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## Tricuspid regurgitation after mitral valve replacement surgery with St. Jude mechanical valve at 108 Military Central Hospital

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**Introduction:** The systemic mitral valve repair should be done in tricuspid valve surgery (mitral valve disease primarily due to Rheumatic fever). In this study, the tricuspid valve is corrected according to the guidelines of AHA and ESC with tricuspid valves measured in echocardiography and measured in surgery from 35 mm and using PTFE strips. The rate of tricuspid regurgitation after mitral valve replacement with SJM mechanical valve and the effectiveness of PTFE stripping technique at 108 military center hospital.

**Method:** Hundred and twenty-two (122) patients received surgical mitral valve replacement with SJM mechanical with or without tricuspid valve repair at Medical Center Hospital 108 in 05/2010 to 12/2014. In this study, the patients were thoroughly examined for clinical and laboratory pre-surgery. Criteria based on AHA/ACC guidelines postoperative follow-up six times in the first year and four times from the 2nd year. Technique for using PTFE strips at the 108 Hospital: The pillar at the posteroseptal like Kay method using PTFE was built. The pillar at the anteroseptal commissure by Ethibond 2.0 stitches into anterior cusp of tricuspid valve was built. Bypass after pillar and before pillar by a PTFE strip (the length even tricuspid annulus valve of septal leaflet).

**Result:** Mean age was  $48.1 \pm 9.2$ , no difference in mean age of male and female. Rate of tricuspid regurgitation valve medium-heavy is 51.6% and 46.7% were repair by PTFE strips. Mainly in the group with lesions coordination mitral regurgitation and stenosis valve (80.3%). Early results after surgery in the group with repair tricuspid valve: Tricuspid regurgitation valve medium-heavy is 12.2% and in the group with not repaired tricuspid valve: Tricuspid regurgitation valve medium-heavy is 12.3% (before the surgery are not tricuspid regurgitation) followed at one month, six months, 12 months, 24 months, 36 months, 48 months in the group with not repaired tricuspid is increased tricuspid regurgitation and heart failure compare to group with repair tricuspid valve.

**Conclusion:** It is important to fix the tricuspid valve systematically in mitral valve replacement surgery to reduce postoperative heart failure. Using PTFE strips in the repair tricuspid valve is good after surgery.

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