

# **Congenital Cardiac Surgery at Mansoura University: Going More Complex**

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Case 1

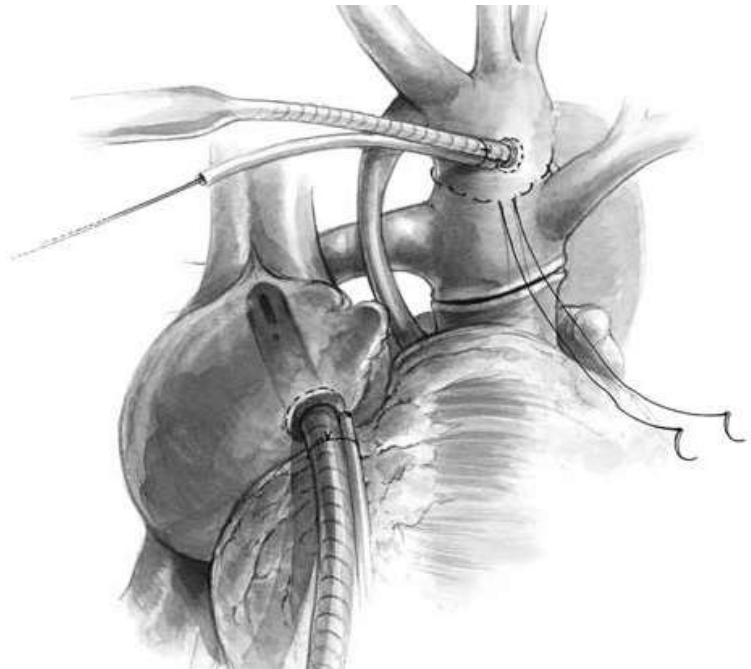
- **Norwood (Stage I) Operation**

## Preoperative Data:

- 30-day, 3-kg female patient transferred from a NICU in Cairo to our Congenital Cardiac Surgery Unit at Mansoura University Children's Hospital.
- Echo: Hypoplastic Left Heart Syndrome (MA/AS), small VSD, small ascending aorta, hypoplastic aortic arch, highly restrictive ASD and small PDA.
- MSCT: Big collateral from the descending aorta supplying the LLL.
- The patient presented with RD III, pulmonary congestion and hemorrhage that required mechanical ventilation.

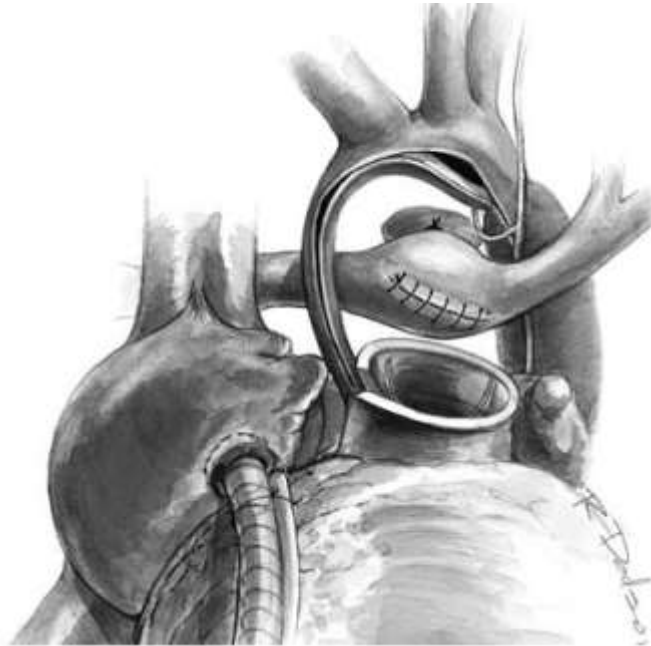
## Surgical technique: 1

- Division of PDA
- Transection of MPA proximal to confluence



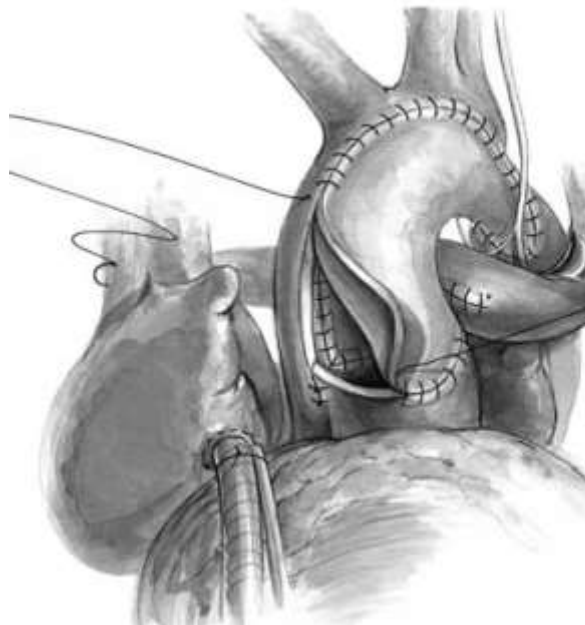
## Surgical technique: 2

- Damus-Kaye-Stansel anastomosis



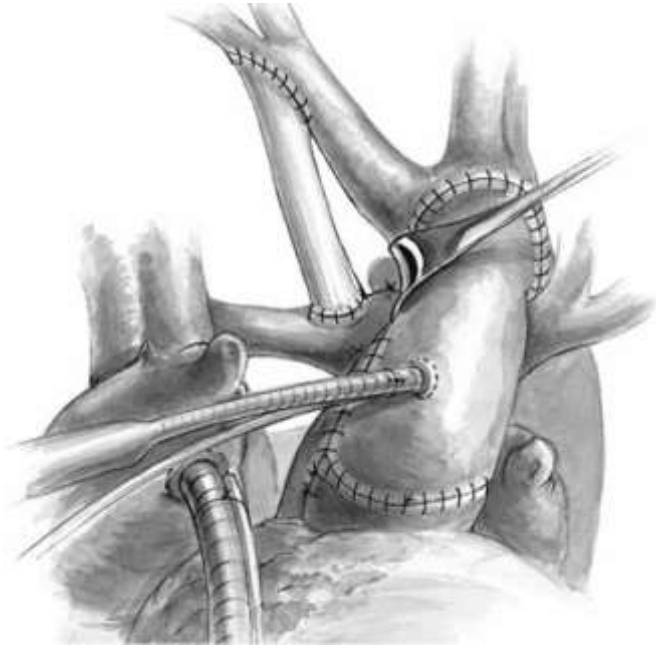
## Surgical technique: 3

- Reconstruction of the ascending aorta and aortic arch with a pericardial patch.



## Surgical technique: 4

- Placement of MBT shunt.



Postoperative image:  
(MSCT)  
DKS  
anastomosis



## Postoperative Course:

- a. Open chest.
- b. Abscess in LLL.
- c. Ischemic bowel.

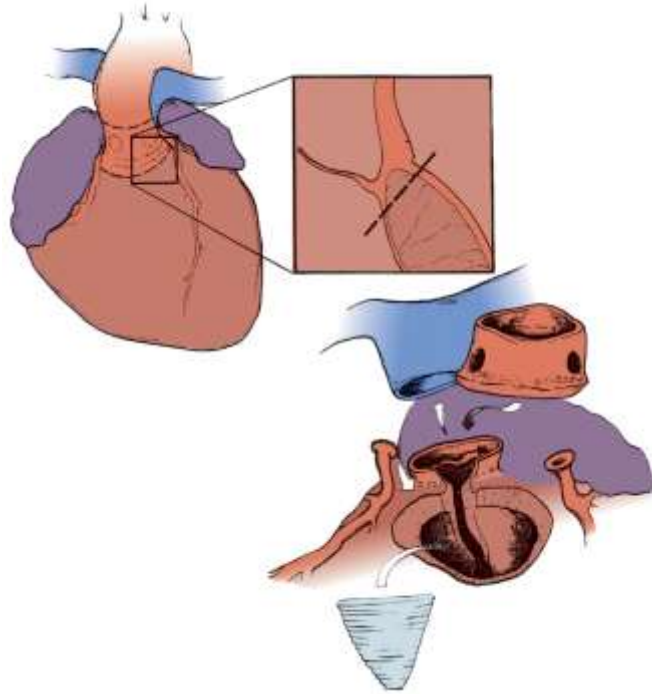


## Case 2

- **Aortic Root Translocation (Nikaidoh) Operation.**

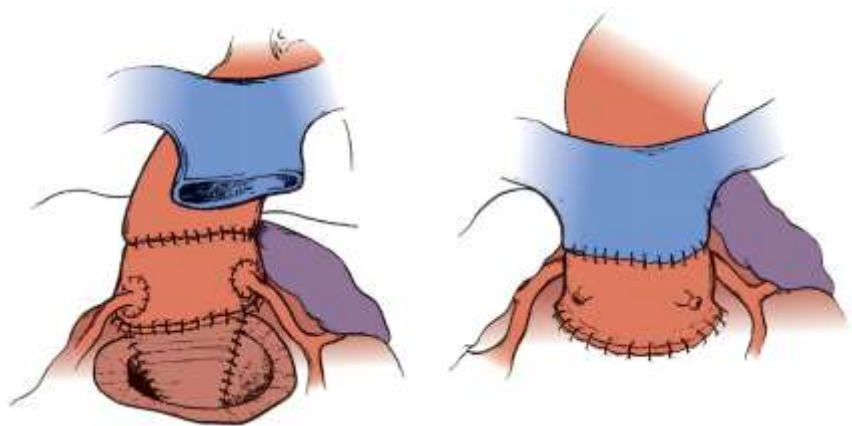
## Surgical technique: 1

- . Harvesting the aortic root.
- . Incising the conal septum.
- . VSD patch closure.



## Surgical technique: 2

- . Implanting the aortic root in the LVOT
- . LeCompte maneuver
- . Placement of RV-PA conduit.



## Nikaidoh op



## Neonatal Cardiac surgeries at MUCH in the last 6 months:

- 1 Norwood op: 30-day, 3-kg.
- 6 Arterial Switch op's: (1 mortality).
- 1 Interrupted Aortic Arch(B)/VSD: 8-day, 2.8-kg – Total repair.
- 2 Hypoplastic aortic arches: Reconstruction on CPB.
- 1 TOF/PA: 20-day, 3.4-kg – total repair with placement of RV-PA conduit (Contegra).



• **Thank You**