

Egyptian Society of
CARDIOLOGY

Minia University Suez Canal University Assiut University



45TH Annual International Congress of the
EGYPTIAN SOCIETY OF CARDIOLOGY
CardioEgypt 2018

UN CASO PARTICOLARE DI TAVI

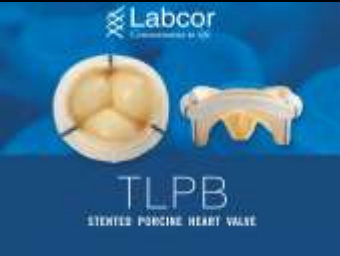


On behalf of
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History

- 1940 : Birth date
- 1969 : 1st attack of heart failure
- 1971 : Mitral commissurotomy
- 1/1989 : MVR using Bioprosthesis
- 5/2001 : easy fatiguability, dyspnoea, L.L. oedema
- 7/2001 : MVR using Labcor 27
- 2/2006 : Echo: normal functioning MV, mild aortic stenosis
- 1/2014 : admission with dyspnoea IV



Labcor
Commitment to Life

TLPB
STENTED PORCINE HEART VALVE



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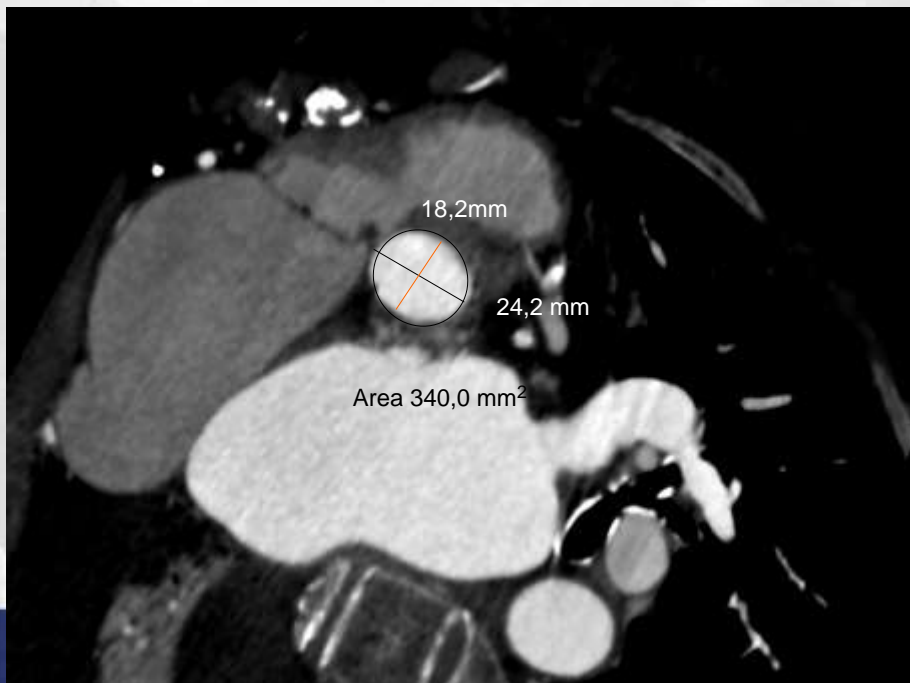
Echocardiography

- Concentric LVH;EF: 70%
- Normal right ventricle.TAPSE 26 mm
- Dilated both atria
- MV prosthesis: calcific valve with poor excursion, PG mean:10mmHg, paravalvular leak with severe posterolateral regurge
- Severe AS (PG 70/46 mmHg),mild AR
- Severe TR ,estimated PASP:65 mmHg
- CONCLUSION: malfunctioning MV ;severe AS



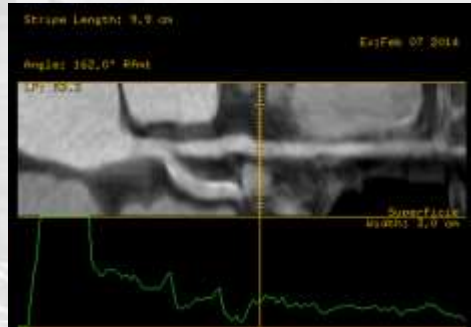
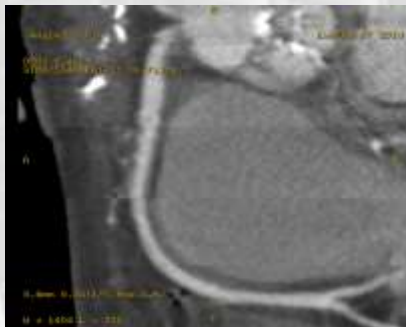
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CT coronary angiography



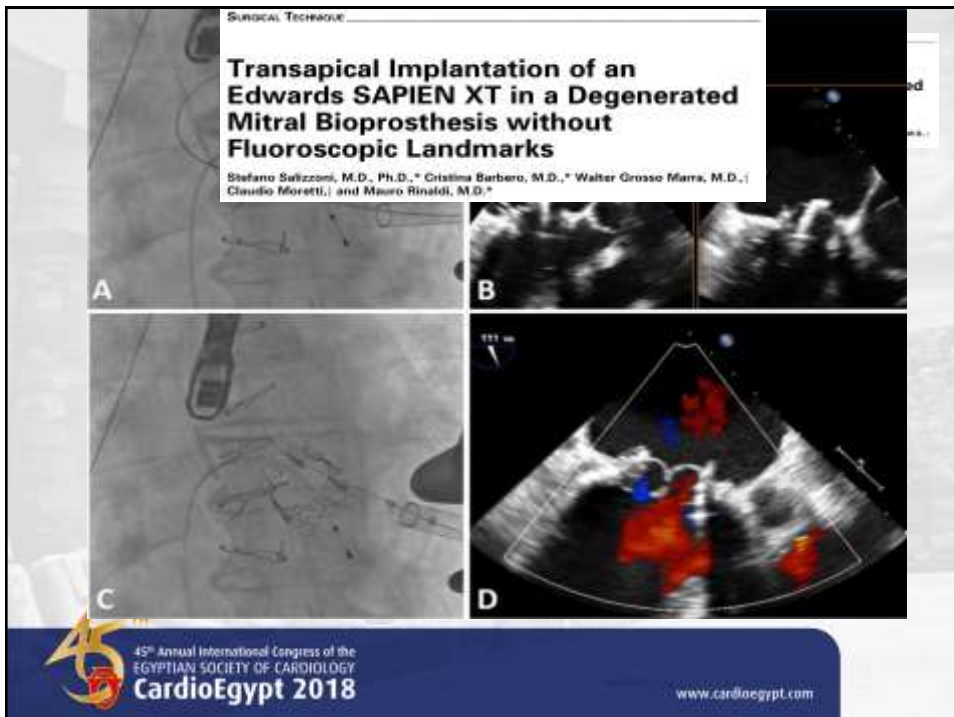
Heart Team

1. Cardiology: good life expectancy
2. Cardiac surgery : EUROSCORE II.....9,68%
3. Radiology: Possible intervention to both valve using transapical approach
4. Informed medical consent



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Take home message

- Heart Team is a must
- Correct selection of the patient and prosthesis
- Accurate approach :once mitral always transapical
- During the procedure: TEE is a friend
- Follow up after the procedure





**Thank
You!!!**



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