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Analysis of the surgical correction of VSD complicated with pulmonary arterial hypertension.

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Aim: Estimation of results of the surgical treatment of ventricular septal defects complicated with pulmonary arterial hypertension.

Materials and methods: Since January, 2012 till December 2017 in the cardiac surgery department of the National Scientific Center of Surgery named after A.N. Syzganov 152 patients underwent a surgical correction about ventricular septal defect bypass. Of them 50 patients had ventricular septal defect complicated with pulmonary arterial hypertension. There were 26 males and 24 females. The age varied from 3 months till 41 year-old (mean age – 20,7 year-old).

A surgical correction was performed by median sternotomy. The basic stage of surgery was carried out bypass machine. All patients underwent a plastic closure of the ventricular septal defect with synthetic patch. 7 patients underwent a De Vega annuloplasty and 15 patients – suture plasty due to tricuspid valve insufficiency, while the bicuspidalization of the tricuspid valve was performed in 4 patients.

Results: The pressure in the pulmonary artery was measured in order to estimate the pulmonary arterial hypertension before and after a surgical correction of the VSD. 31 patients had a pulmonary arterial hypertension of the I degree (30-50 mm per mercury by Bakulyev), of them 6 patients had an increase of the pressure in the pulmonary artery. 11 patients had a pulmonary arterial hypertension of the II degree (50-70 mm per mercury by Bakulyev). 8 patients had a pulmonary arterial hypertension of the III degree (70-90 mm per mercury by Bakulyev).

Conclusion: Patients with VSD complicated with pulmonary arterial hypertension in the postsurgical period have a high risk of the development of complications, thereby the hospital staying period increases. All patients with pulmonary arterial hypertension should accurately be examined in the postsurgical period and administered an appropriate hypotensive therapy with Sildenafil. According to EchoCG data after surgery the pressure in the pulmonary artery decreased in the second and third groups. In the first group some patients had a mild pulmonary arterial hypertension with tendency to increase (6 patients) that is probably associated with absence of the conservative therapy in the presurgical period.

Biography

Koshkinbayev Zhenis is a Cardiac Surgeon of Cardiac Surgery department at the National Scientific Center of Surgery named after A. N. Syzganov in Kazakhstan.

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