Ottava Giornata della Ricerca della Svizzera Italiana
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Modulo per la sottomissione abstract di ricerca STUDENTI MASTER

Titolo (massimo **15 parole**)

Long-term outcome following percutaneous mitral valve repair with MitraClip: Analysis of the initial experience at Cardiocentro Ticino

Autori (cognome e iniziali, es: Grassi L.)

Garzoli G., Biasco L., Moccetti T., Moccetti M., Faletra F., Pasotti E., Pedrazzini G.

Affiliazioni (ospedale o istituto, servizio o reparto, indirizzo, es: Ospedale Regionale di Lugano, Servizio di angiologia, Lugano)

Fondazione Cardiocentro Ticino, Lugano

Testo (massimo **250 parole**, preferibilmente in italiano (accettato anche in inglese), suddiviso in Introduzione, ***Metodi***, ***Risultati***, ***Conclusioni*** e ***Finanziamento***

Introduction: Percutaneous mitral valve repair with MitraClip is safe with good short and mid-term results in Mitral regurgitation (MR) patient's unsuitable for cardiac surgery. We here report on the procedural success and long-term outcomes of the first 40 patients treated at the Cardiocentro Ticino between 2009 and 2012 and on predictors of long term mortality.
Methods: Clinical and echocardiographic data were collected at enrollment. Acute procedural success, peri-procedural adverse events at discharge and at 3-6 months, rehospitalisation rate and mortality were recorded and followed up to 5 years. Kaplan-Meier for survival and Cox-regression analyses to identify predictors of long term mortality were used.
Results: At baseline 39/40 patients had a moderate-severe to severe MR, 35/40 patients were in NYHA class≥III. Significant reduction (from ≥3+/4+ to 1+/2+) in MR was achieved in 34/40 patients (87%), while 80% NYHA class 2 of the functional class at 3-6 months. Median survival time was 31 months (IQR 11.8-69.2) and median follow-up was 78 months (IQR 58.2-89.4). The estimated yearly mortality rate was 24.2 for 100 patients/year. A total of 31 deaths occurred at follow up, 18 of which were due to cardiac causes. Low body mass index and residual severe MR were identified as independent predictors of long term mortality. Previous atrial fibrillation, while significant at univariate, lost its impact on a multivariable model.
Conclusion: Our data confirm a significant reduction in MR and a corresponding impact on symptoms in approximately 75-80% of patients. Nonetheless, no demonstrable effect on their long-term survival was evident with a 5-years mortality above 75%, mostly due to cardiac causes.

Visto superiore (prego indicare Nome e Cognome del superiore)

Prof. Pedrazzini Giovanni

Criteri per sottomissione Abstract:
NO Case report
NO Abstract senza nessun risultato
VISTO da un superiore

Invio Abstract