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A study of indications, complications of prosthetic valves and prognosis after treatment of stuck valve

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Background: Implantation of prosthetic cardiac valves to treat hemodynamically significant valvular diseases has become common; however it is associated with complications. Thus this study was intended to evaluate the indications for implantation of prosthetic valve and complications after its implantation and prognosis after treatment of one of its complication, i.e., stuck valve.

Methods: This was a single-centered study wherein 50 patients who came to the emergency department with stuck valve were assessed. The 2D echocardiography was performed in all patients. Thrombolysis was done and the gradients were reassessed; further, response to treatment and development of complications before and after treatment were observed.

Results: Of total patients, 60% were females; mean age group was 30-40 yrs. Of these 80% presented with shortness of breath, 20% with palpitations, tachycardia was seen in 80% patients, blood pressure was <100/70 mmHg in 80% patients, hemoglobin was <8 gm% in 60% patients, serum bilirubin elevated in 45% patients, most of them were asymptomatic for 6 years and there was lack of compliance in 90% of patients. Drug used was Acitrom (acenocoumarol) 2 mg in 90% patients and drug interaction with digoxin is seen in 4% and INR was less than 1.5 in 25% of patients. Cardiomegaly was observed in 60% and 2D echocardiography showed global hypokinesia in 60% patients. Most common indication for valve replacement was mitral stenosis (60%) followed by mitral regurgitation (20%), aortic regurgitation and aortic stenosis (10%), combined mitral and tricuspid regurgitation (10%). Commonest valve was St. Jude (90%). Pannus was observed in 10% patients and thrombus was observed in 50% patients. Most patients had gradients 45/20 mmHg across mitral valve. In about 90% patients gradients decreased after thrombolysis (12/5 mmHg). The complications after valve placement were hemiparesis (4%), death before thrombolysis (5%) and death after thrombolysis (4%).

Conclusion: In light of these results, it can be concluded that prosthetic valves are seldom associated with some complications. Further, thrombolysis can be effective in patients with prosthetic valve thrombosis.

Biography

Kavya Pingali has completed her MBBS at Siddhartha Medical College, Vijayawada. Subsequently, she obtained her MD in General Medicine at Guntur Medical College and DM Cardiology at Osmania Medical College, Hyderabad. She is currently a Senior Resident at Government Hospital, Guntur. She has an apt adroitness in performing coronary interventions. She had done multifarious coronary interventions independently, with a high success rate and a negligible number of complications. Moreover, she has a finesse to perform device closures for ASD and VSD and to implant the prosthetic heart valves.

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