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Acute dissection of ascending aorta: Early experience of emergency, valve sparing aortic root reconstruction.

Mohammad A S Ahmed, Mohammad I Sewielam, Alaa El Din F , Mohammad, and Ahmad A Daoud Cairo University , Egypt.

Dispective: Acute dissection of the ascending aorta requires immediate surgical intervention. In this study we report our early experience with valve sparing aortic root reconstruction with excision of all diseased tissues. Methodology: During one year thirty patients suffering from acute aortic dissection [Stanford type A ] underwent valve sparing aortic root reconstruction. Operative and postoperative data were analyzed. Results: Age range was 29 to 74 years. Ascending aorta dissections found in one patient while both ascending aorta and arch in 29 cases. Results: Mean cardiopulmonary bypass time was 240 +/- 41 min., mean aortic cross clamp time was 156 +/- 38 min. With arch involvement circulatory arrest was [ 20 +/- 4.5 min. After reconstruction, echocardiography showed aortic insufficiency grade 0 in 23 [ 76.6% ] patients, trivial in 4 [ 13.3% ] and mild in 3 patients [ 10% ].ICU stay was 87 +/\_ 22 hours. Postoperative hospitalization was 11.+/- 4.8 days.Perioperative deaths were 6 [ 20% ].Conclusion: Valve sparing aortic root reconstruction with type A dissection can be performed with acceptable mortality and morbidity giving excellent follow up results.

cardio\_thoracic2011@yahoo.com