

AP Target Symposium

AP Target Symposium 2 (I-APT2)

Dealing with the borderline Right Ventricle - Fontan vs One-and-a-Half Ventricle Repair vs Biventricular Repair: what are the criteria and how to get there –

Chair: Munetaka Masuda (Department of Cardiovascular Surgery, Yokohama City University Hospital, Japan)

Chair: Hiroyuki Yamagishi (Department of Pediatrics, Keio University School of Medicine, Japan)

Fri. Jul 7, 2017 4:15 PM - 5:45 PM ROOM 3 (Exhibition and Event Hall Room 3)

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[I-APT2-02] Fontan vs One-and-a-Half Ventricle Repair vs Biventricular Repair: what are the criteria and how to get there

○ Mark A. Fogel (Children's Hospital of Philadelphia, USA)

Children born with varying degrees of hypoplasia of one or both ventricles can occur with many different anatomic configurations. In many instances, the choice is clear whether to reconstruct the heart with a single ventricle (SV) or a biventricular repair. There remains, however, a group of patients where that decision is not as clear cut (such as the borderline left ventricle) and reconstruction of cardiovascular system can proceed as either. In addition, if the SV route is chosen, supplemental pulmonary blood flow from the ventricle (the “one and a half ventricle” repair) may be an option. Congenital heart diseases such as double outlet right ventricle, critical aortic stenosis and malaligned atrioventricular canal are 3 such cases where these decisions come in to play. Clinical outcomes are not straightforward in these cases and the clinician needs to rely on a limited dataset in the literature along with their own experience as well as newer ideas and imaging modalities. This lecture will discuss focus on these 3 types of congenital heart lesions when the operative decision is complex and review the literature on the topic. In addition, newer data and ideas about how to make this decision will be discussed. Ultimately, this will stimulate the discussion of which is better - a “good” Fontan or “poor” biventricular repair?