JCK Oral

JCK Oral 3 (II-JCKO3)

Cardiac Surgery

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Sat. Jul 8, 2017 1:50 PM - 3:20 PM ROOM 3 (Exhibition and Event Hall Room 3)

1:50 PM - 3:20 PM

[II-JCKO3-05]Mid-term Outcomes of Survival and Quality of Life in Children with Complex Congenital Heart Diseases after atrioventricular valvuloplasty in China

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Objectives： To describe mid-term outcomes of survival and quality of life of children with complex congenital heart diseases (CCHD) after atrioventricular valvuloplasty.
Methods: From 2012 to 2015, 181 children with CCHD who underwent atrioventricular valvuloplasty were enrolled. Median age was 13.6 (7.4 - 34.2) months. The patients were divided into 4 groups. Group 1 received mitral valve repair and associated complicated cardiac anomalies repair (n=41), Group 2 received total endocardial cushion defect (TECD) correction (n=102), Group 3 received tricuspid valve repair for Ebstein anomaly (n=28) and Group 4 received atrioventricular valvuloplasty for single ventricle (SV) (n=10). The parents reported the household income and completed the pediatric Quality of Life Inventory (PedsQL), which including generic core scales and cardiac module, during the outpatient visit.
Results: The surgical mortalities were 2.4%, 2.9%, 0, and 20% in group 1 to 4, respectively ($p<0.05$). The median follow-up time was 32 months. During the follow-up, 6 patients died, and 2 in Group 4 .The lowest PedsQL scores and more cardiac symptom and cognitive problems were observed in Group 4. Meanwhile, the family with low household income had the significantly reduced number of outpatient visits.
Conclusions: The valvuloplasty for children with SV had the highest mortality and worst life quality. Although valvuloplasty with mitral valve, TECD and Ebstein anomaly had excellent surgical outcomes and acceptable life quality, the family socioeconomic status had negative effect on the closed follow-up.