

JCK Poster

JCK Poster 4 (III-JCKP4)

Cardiac Surgery

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Sun. Jul 9, 2017 1:00 PM - 2:00 PM Poster Presentation Area (Exhibition and Event Hall)

1:00 PM - 2:00 PM

[III-JCKP4-05]Reconstruction of Pulmonary Arteries after Neonatal Ductus Arteriosus Stenting: Techniques and Results

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Background: The ductus arteriosus (DA) stenting in neonatal period has been progressively indicated in congenital heart disease group with duct – dependent pulmonary circulation. We reported our techniques in reconstruction of pulmonary arteries after neonatal DA stenting and evaluated the results of these surgical techniques.

Methods: This research included 36 patients who underwent cardiac surgeries with pulmonary artery reconstruction after PDA stenting from May 2015 to May 2017. We described our techniques to repair and analyzed the results including hospital mortality, morbidity, survival rate during follow-up.

Results: 100% of cases need a partial removal of stent at the distal part of the PDA stent. Luminal stenosis of pulmonary branches had been resulted in most patients. The debridement of fibrous tissue or/and neo-intimal proliferation had to be done in all patients. The removal of pulmonary end of stented DA and neo-intimal cause large damage of arterial wall and need to be enlarged by patching in all cases.

Conclusions

Stenting of DA in neonatal period is helpful neonatal palliative procedure but associates frequently with intimal proliferation of pulmonary arteries. Reconstruction of pulmonary branches after DA stent implantation demands meticulous techniques and patching enlargement of one or both pulmonary branches is always indicated.