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Late complications after Senning or Mustard type of repair in transposition of the great arteries

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AIM

Patients after Senning or Mustard repair for transposition of the great arteries during late follow-up may develop systemic right ventricular failure and decrease in exercise tolerance. Our aim was to describe the outcome of our population.

MATERIALS AND METHODS

Patients with TGA from our adult congenital heart disease database were selected for analysis. Clinical, echocardiographic and/or CMR and cardioexercise testing were documented.

RESULTS

There were 47 patients with median age 29 years (). At the last follow-up evaluation 59% of patients were asymptomatic (New York Heart Association class I.). At cardioexercise testing only 27% of patients achieved a predicted peak VO₂ >70% of their normal. Echocardiography and/ or CMR showed ≥ moderate systemic right ventricular dysfunction in 33% and ≥ moderate tricuspid regurgitation 34% of patients. History of atrial arrhythmia requiring treatment was present in 21% of patients; 41% of patients (5 of 12 patients) were over 30 years of age. Heart failure was present in 15% of patients; 4 of 6 patients over 35 had severe symptoms. After 35 years of age only 50% of patients were alive.

CONCLUSION

High morbidity and mortality is observed in patients with TGA and Senning or Mustard repair after 30 years of age.