

Primary surgical repair of congenital heart defects beyond the age of 60

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Objective: Our country has the longest average life span in the world. The number of newly found out patients with congenital heart defects is increasing by the progress of echocardiography and computed tomography. In this study, we tried to examine the recent primary surgical repair of congenital heart defects beyond the age of 60

Methods: Eleven patients with congenital heart defects beyond the age of 60 underwent primary surgical repair for the last decade in our hospital. The median age was 64 years (60 to 78). The operative procedures were as follows: atrial septal defect closure and tricuspid annuloplasty 7 cases, atrial septal defect closure and right partial anomalous pulmonary venous return repair one case, left partial anomalous pulmonary venous return repair one case, partial atrioventricular defect repair one case and rupture of valsalve aneurysm one case. The median follow up period was 3.5 years (1 to 10). The change of NYHA classification, BNP level and the number of given drugs related to congenital heart defects were investigated.

Results: There was no surgical death and no hospital death. And there was no late death during follow up period. NYHA classifications before operation were NYHA1 2 cases, NYHA2 7 cases and NYHA3 2 cases. After operation, NYHA classifications improved significantly. And NYHA classifications at follow up were NYHA1 10 cases and NYHA2 one case. Median BNP levels (ng/ml) before operation was 67. And the median BNP levels were 117 after operation and 84 at follow up. The median numbers of given drugs related to the congenital heart defects was 1.5 (0-3) before operation, 3 (1-5) after operation and 3 (0-4) at follow up.

Conclusions: The result of primary surgical repair of congenital heart defects beyond the age of 60 was satisfactory. NYHA classifications were improved by the surgery. But BNP level and the number of given drugs increased after operation.