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Transcatheter closure of patent duct arteriosus (PDA): 62 cases.

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Introduction: Trans-catheter closure of patent duct arteriosus (PDA) is new technique that is currently developing in our Paediatric Medical and Surgical Unit.

Objectif: Prove the safety of this intervention that should be a priority rather than a choice, identify the challenges and limitations of this technique.

Material and methods: This retrospective study was carried from October 2013 to July 2017, during which 62 patients who underwent cardiac catheterization in an attempt to close the PDA by trans-catheter approach using duct occluder device.

Results: The average age of our patients was 6.6 years, ranging from 5 months to 15 years. Sex ratio M / F was 0.56. Parental consanguinity is noted in 15 patients. The patients were weighed between 5 kg and 45 kg, and their mean weight was 15.4 kg. PDA presented as an isolated lesion in 84% of patients. PDA-associated heart lesions were as follows: seven cases of restrictive interventricular communication, two cases of pulmonary stenosis. The clinical symptoms in reported cases in our study are very variable, dominated by dyspnea, feeding difficulties, and repeated lower respiratory tract infections.

According to the classification of Krichenko: 37 patients had conical type (type E), six patients had megaphone form (type A), four had window (type B), eleven had tubular (type C), three had aneurysmal (type D). The diameter of the PDA in our cases ranged between 2 mm and 12 mm. Pulmonary hypertension was found in 13 cases. We report three Unsuccessful attempt to close the tubular shape of PDA.

Conclusion: Results of trans-catheter occlusion of PDA have been excellent, and follow-up generally excellent. Trans-catheter closure of PDA deserves a place in the management of this defect and will prove to be of great benefit for all of our patients.