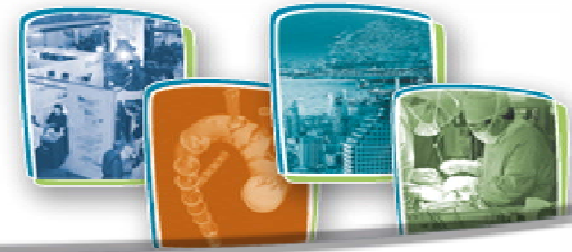


ICI Meeting
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Advances in Mitral Valve Repair Surgeons' View

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Disclosure

- None



Goal

- The goal of mitral valve repair operation is
- **to minimize the degree of mitral**
- **valve incompetence to 0-+1**



'Surgical' Causes of Failure

- Chordal shortening
- Non use of annuloplasty ring
- **Post repair residual MR greater than +1**



Mitral Valve Repair Philosophy

- Mitral valve repair operation is not an exotic art
- Can be successfully performed by most of CT surgeons
- Adopt a systematic approach
- More than 90% of myxomatous mitral valves can be successfully repaired



Mitral Valve Repair- Philosophy Surgeons' View

- **Exposure**
- Intraoperative valve **assessment**
- **Simplify** the repair
- Use **annuloplasty ring**
- **Test** the repair
- Perform additional reparative manouvers as needed
- **Don't leave the O.R. with M.R. greater than +1**



The Surgical Approach to the Mitral Valve



Median Sternotomy

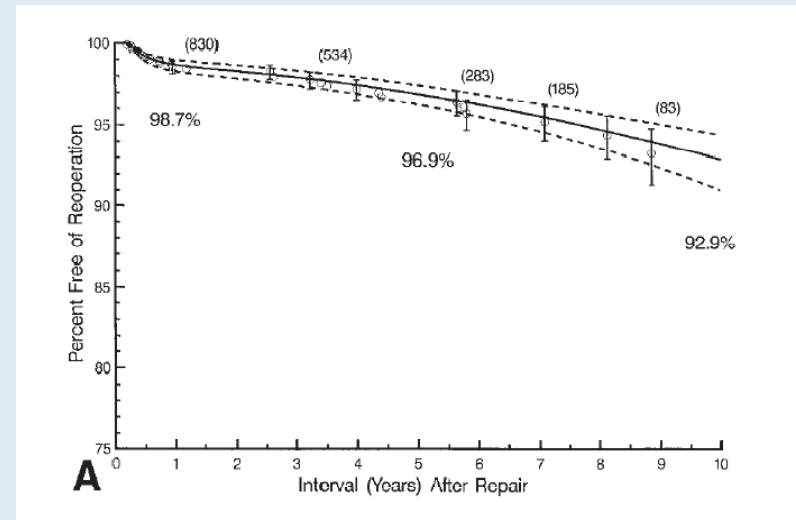


- Fast
- Safe
- Easy to perform
- Direct cost-Low
- **Midline incision**

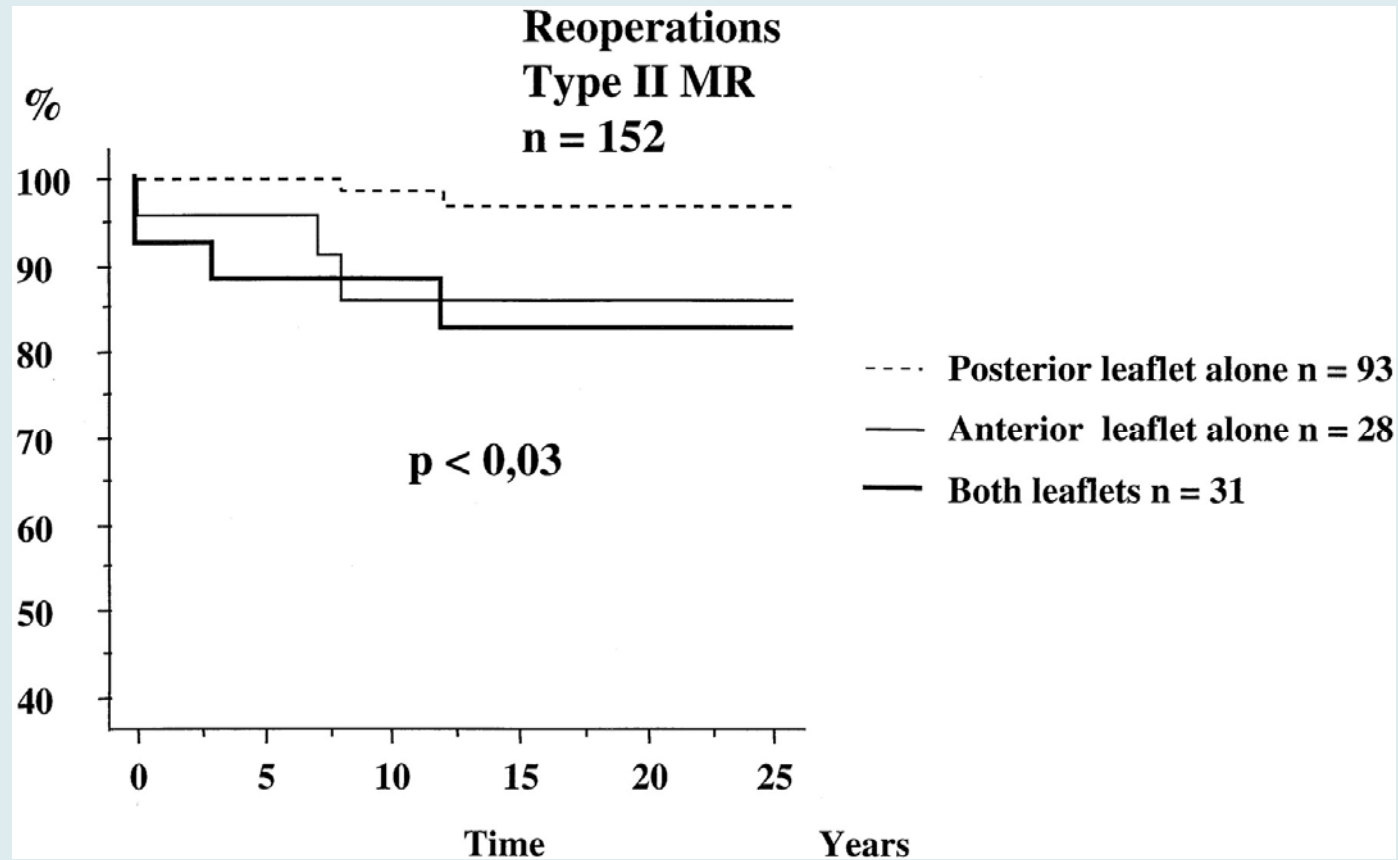


Median Sternotomy

- Early mortality <1%
- C.V.A. <1%
- Bleeding 4%



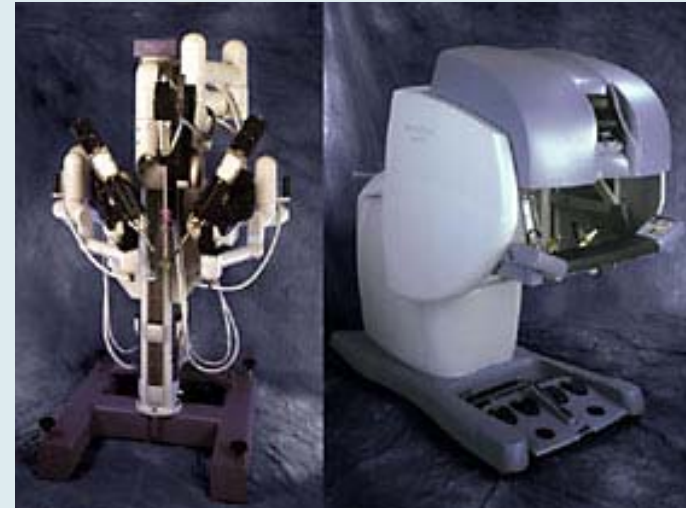
Median Sternotomy



Robot Assist

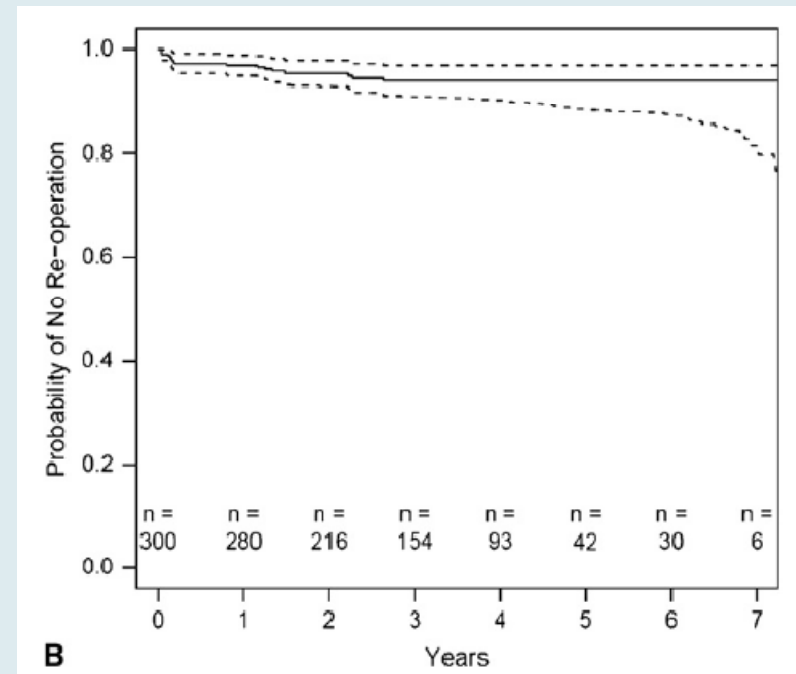
- Elegant
- Marketing tool
- 3D
- Cosmetics

- Expensive
- Learning curve
- Time consuming
- Safety

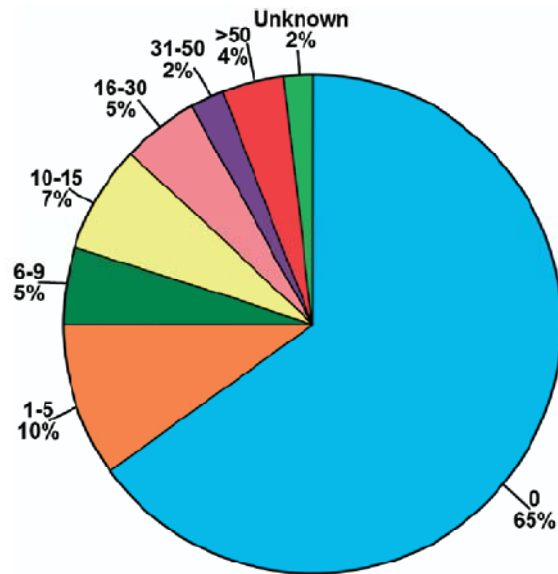


Robot Assist

- Mortality <1%
- C.V.A. <1%
- Bleeding 2.5%



Robot Assist



- 25% of CTS surgery
- 7.3 cardiac cases/robot
- 0.5% of open heart cases
- Marginal improvement

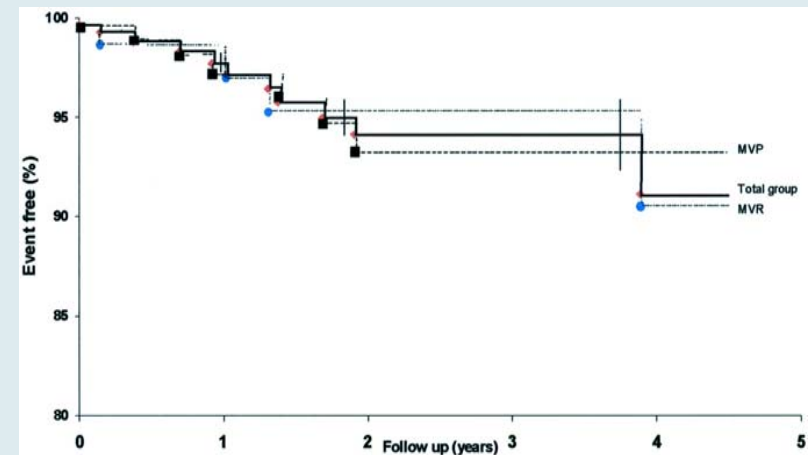
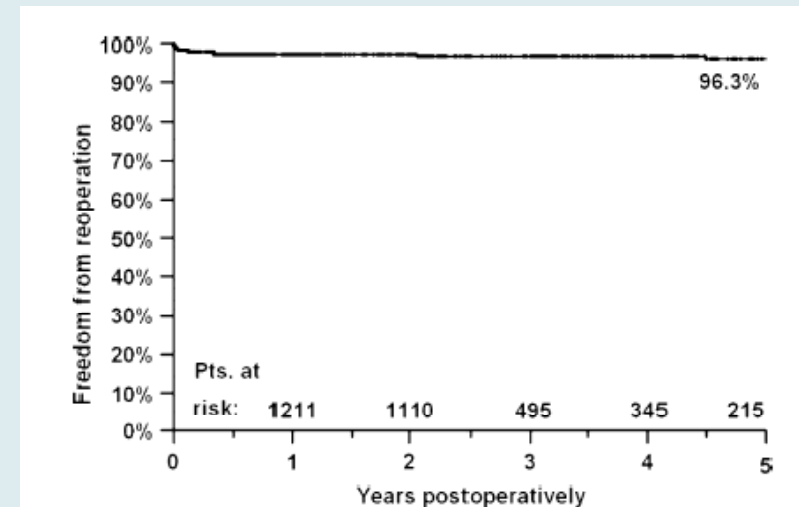


Port Access



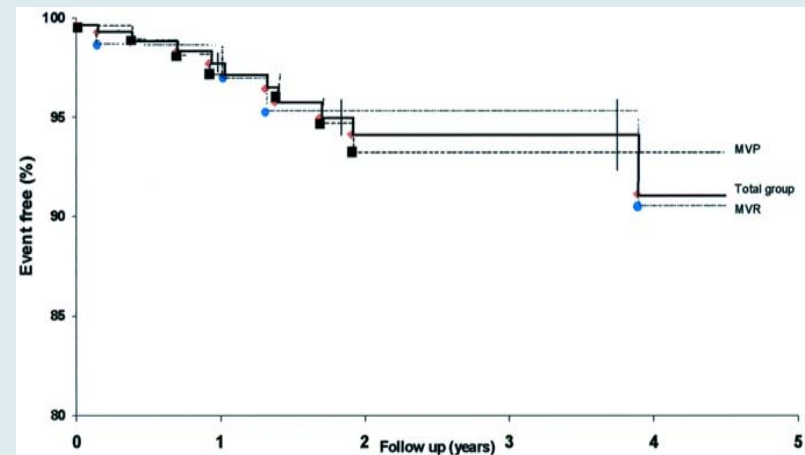
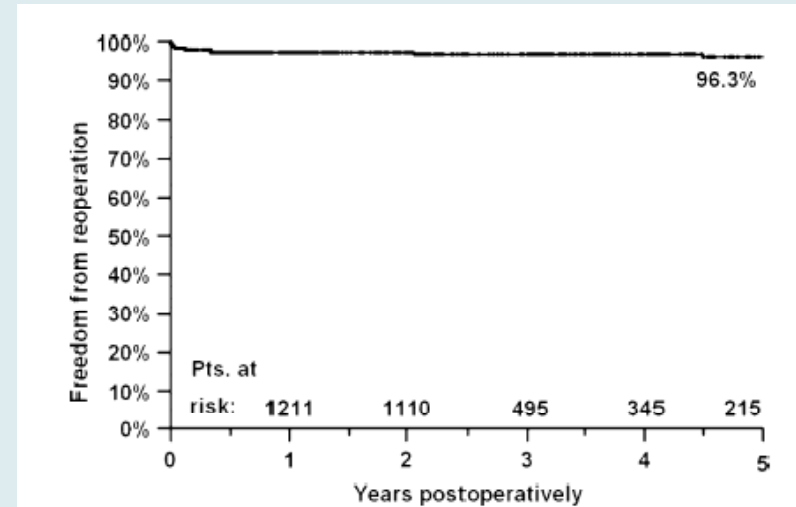
Port Access

- Cosmetics
- Marketing tool
- 2D
- Expensive
- Learning curve
- Time consuming
- Safety



Port Access

- Mortality 1-2.5%
- C.V.A. 1%
- Bleeding 5-9%



Lower Hemi-Sternotomy

- Small incision
- No additional cost
- Safe
- Easy to teach
- Learning curve

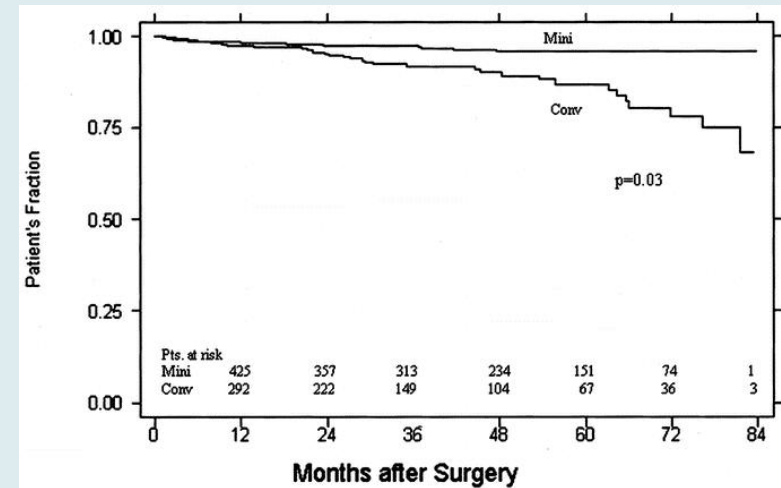


- Midline incision



Lower Hemi-Sternotomy

- Mortality 0.3%
- C.V.A. 1%
- Bleeding 2%



Percutaneous Mitral Valve Repair

- New and promising (?)
- More Q than A
- Too simplistic
- Compared to the GOLD STANDARD



Conclusions

- Excellent short and long term results
- No large randomized/controlled trials
- Think about hospital cost
- The benefit is mainly cosmetic



Conclusions

- Do what you feel comfortable with
- Never compromise safety
- **Downgrade the MR to 0- + 1**
- Personal preference
- **Lower Hemi-Sternotomy**



Thank You

