

Minimally Invasive Aortic Valve Replacement in Combination with a Sutureless Valve and Fast-track Regime: a Safe Combination Even in Elderly

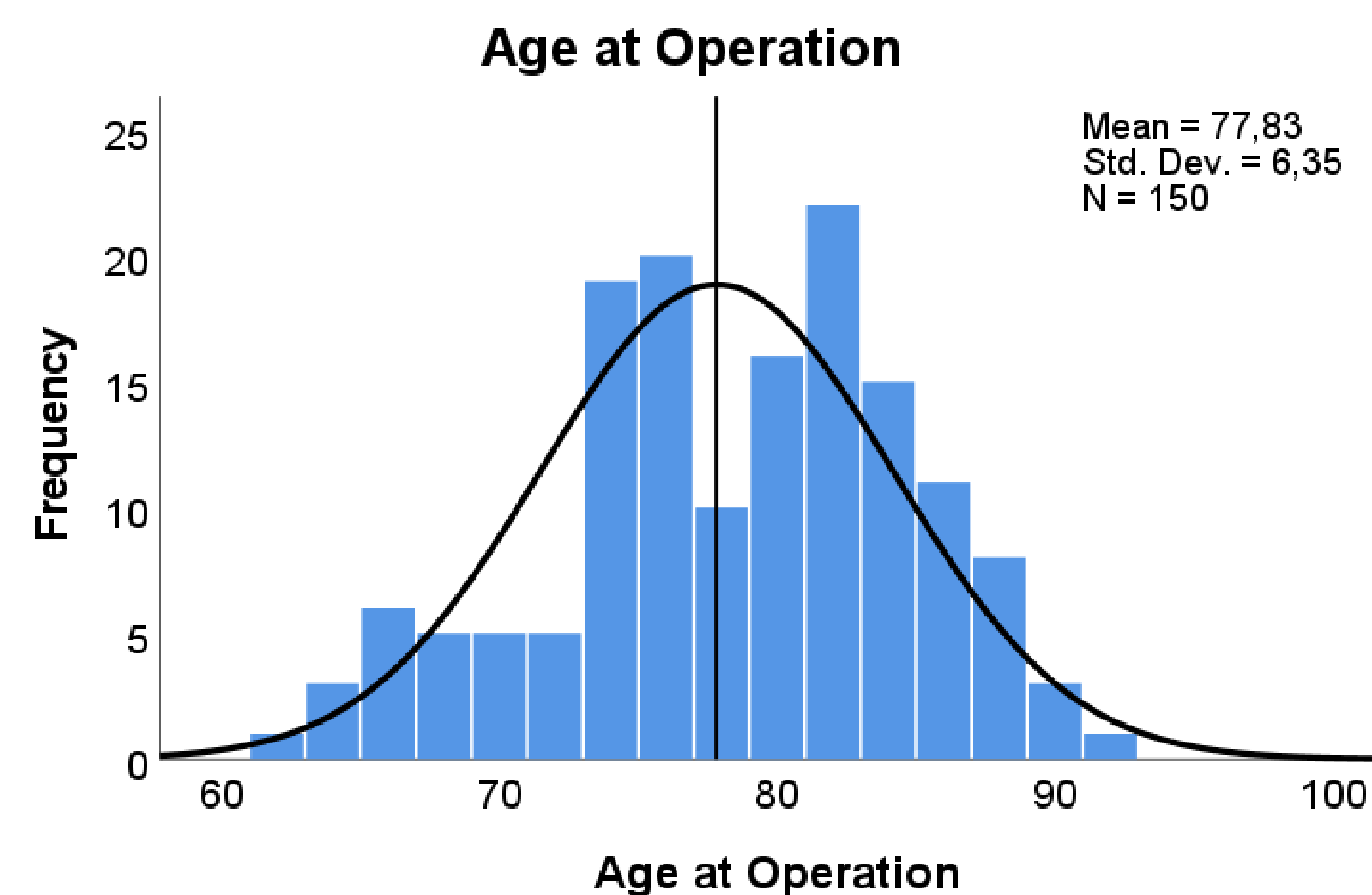
Objective:

Analysis of patients treated with MICS sutureless AVR that were fast-tracked

Methods:

Monocentric, retrospective study.
MICS + sutureless AVR + fast-tracked (no ICU stay) between Jan 2007 – Jun 2022

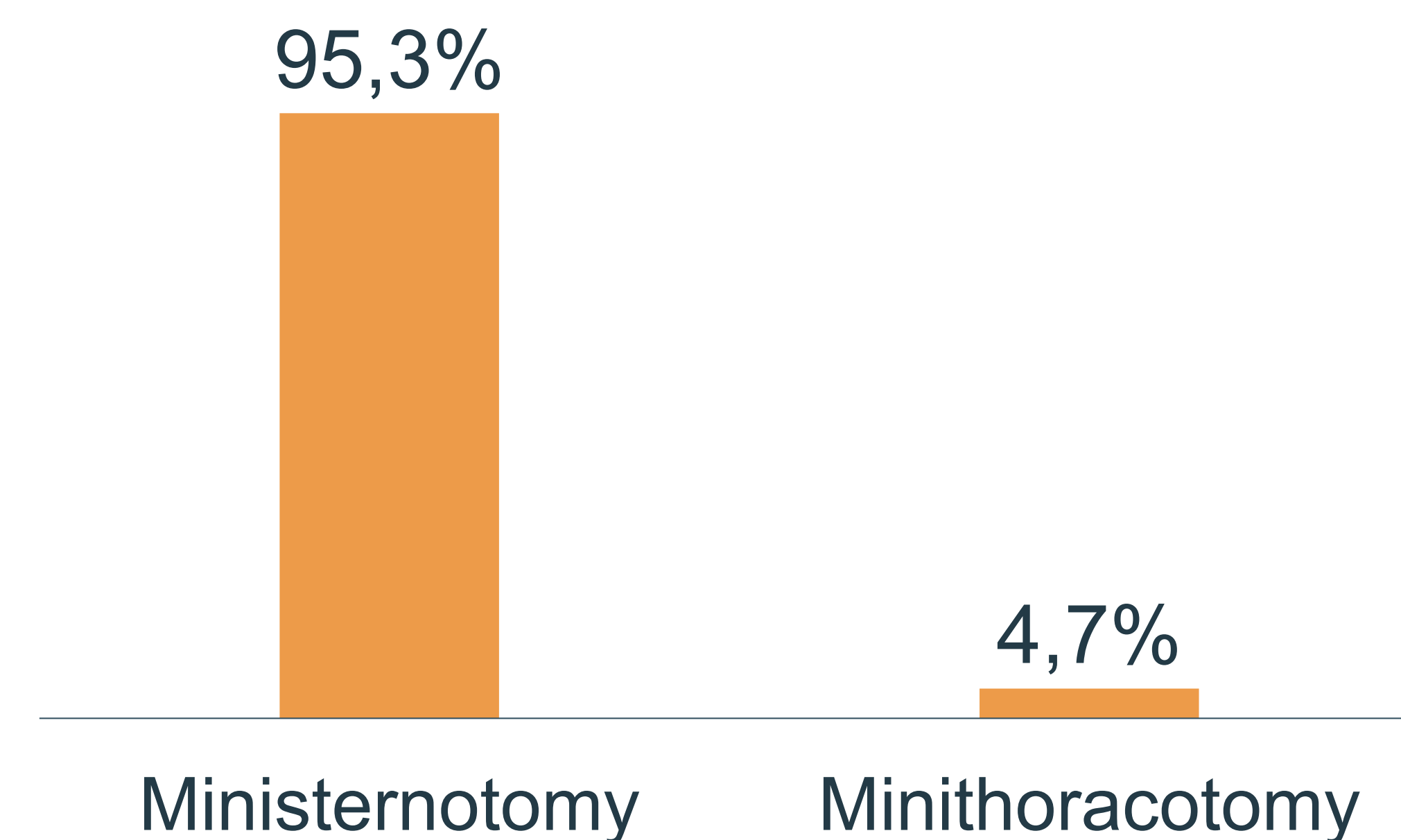
→ 150 patients were included



Gender: 46% male

EuroSCORE II: 1.5% (IQR: 1.1 – 2.0)

MICS type

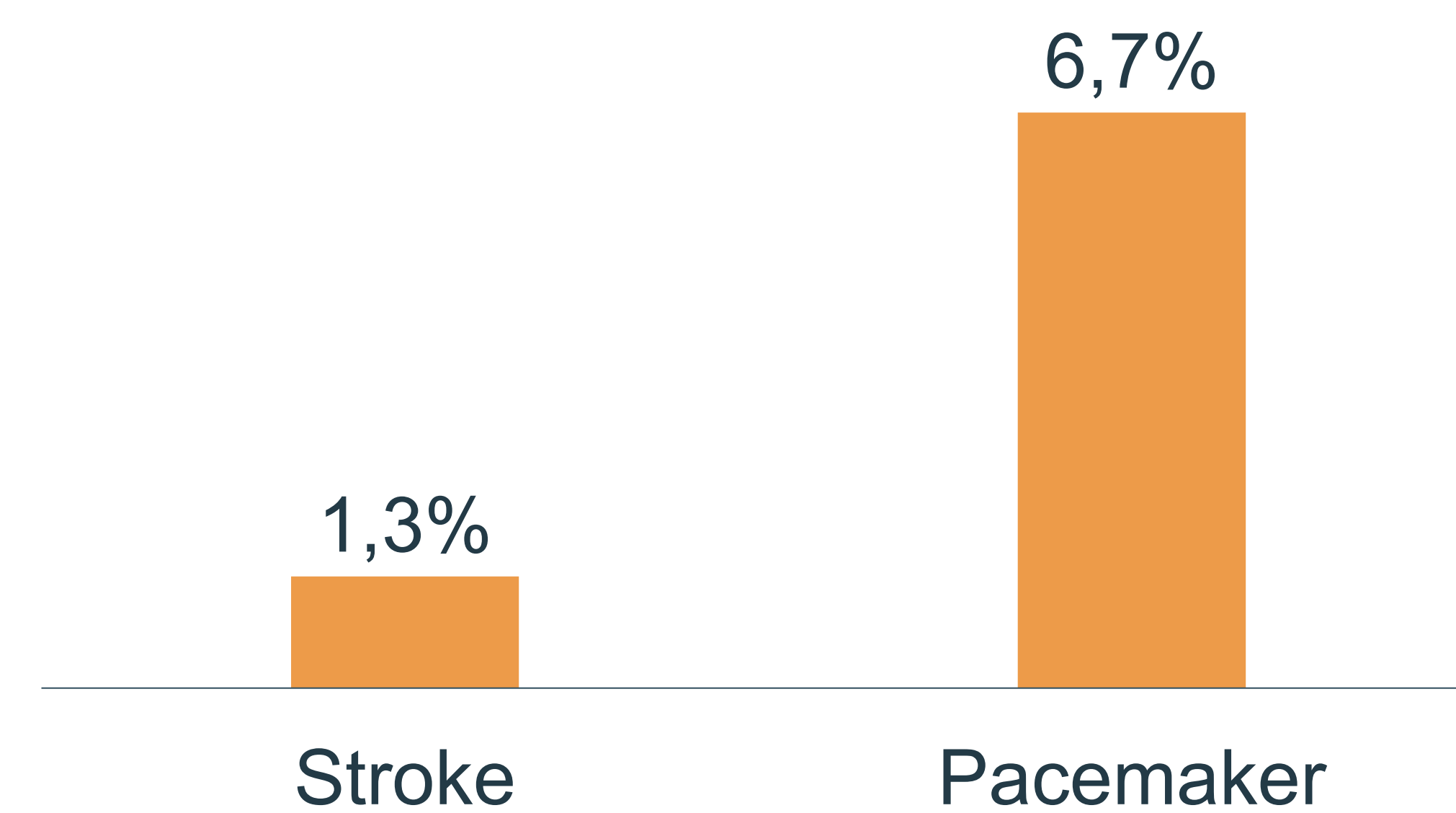


CPB time 57 min (IQR: 48 - 66)

Cross-clamp time 36 min (IQR: 29 - 43)

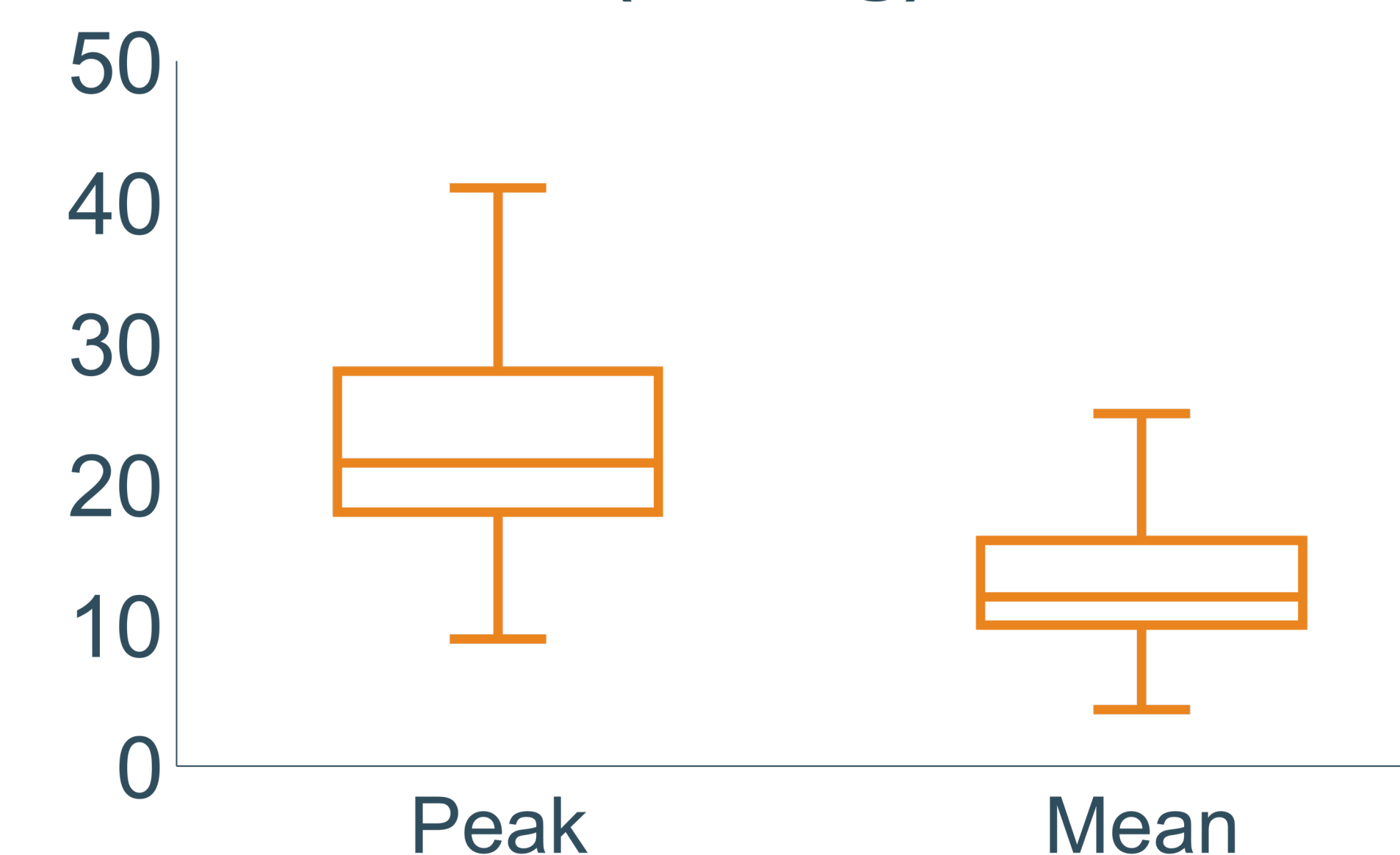
Hospital LOS 7 days (IQR: 6 - 9)

Postoperative complications



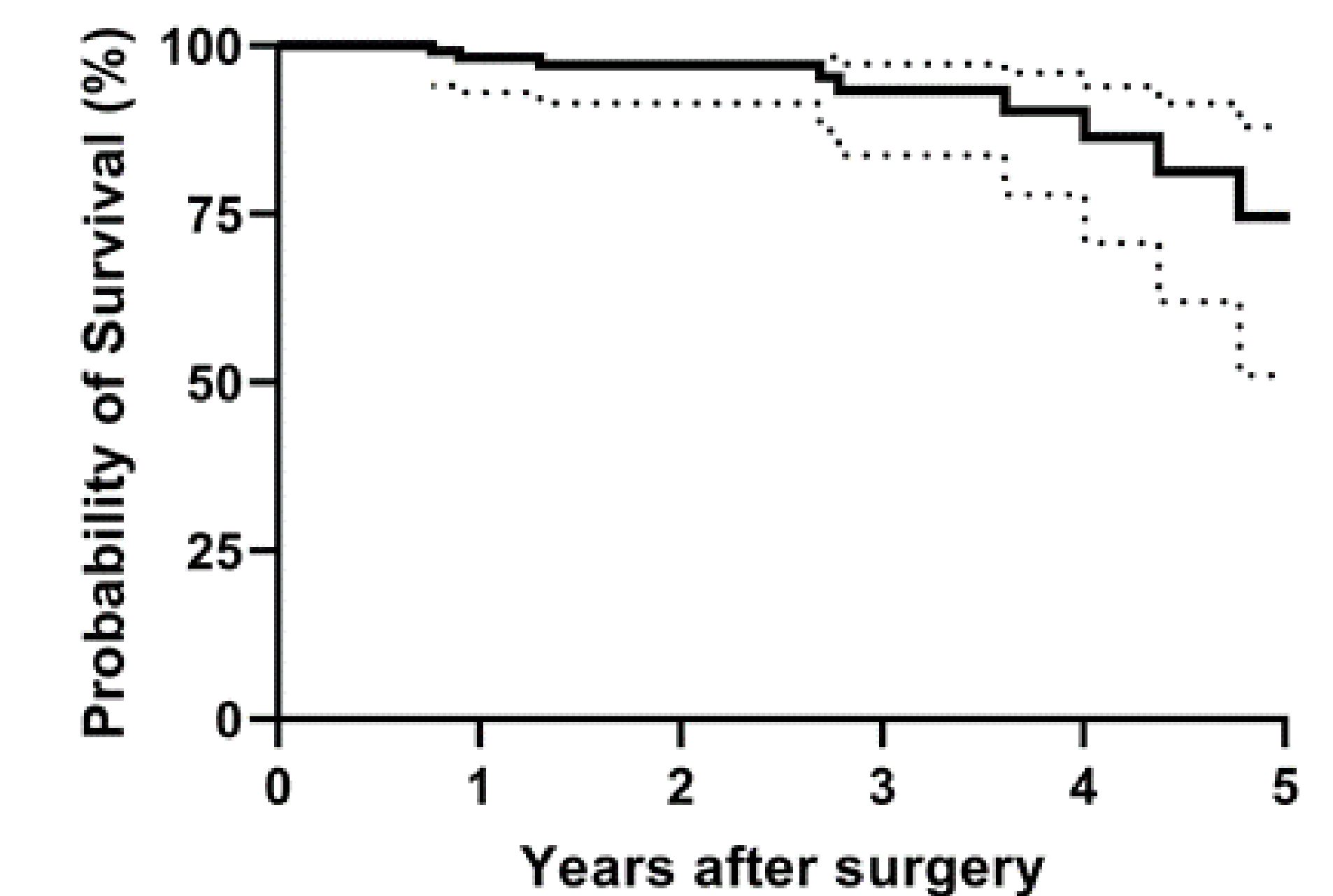
New dialysis: 0%

Discharge AV gradients (mmHg)



PVL > 1/4 at discharge: 1.3%

In-hospital mortality: 0%



Conclusion:

With a majority of patients aged above 75 years, we saw no early mortality, low stroke rate and good hemodynamics.

Shortness and simplicity of sutureless AVR facilitates MICS and allows for application of a fast track recovery regime. Good results can be obtained, even in elderly patients above 75y, where current guidelines direct patients more towards TAVI.