

Repair VS Replacement of the Mitral Valve in Endocarditis

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Background

Several observational studies have suggested a superior survival after mitral valve repair compared with replacement in patients undergoing surgery for infective endocarditis

A systematic review of literature showed that mitral valve repair is associated with good clinical in-hospital and long-term results among patients undergoing surgery for infective endocarditis . We aim To evaluate our institutional results of mitral valve repair in comparison to mitral valve replacement for infective endocarditis.

Methods

From 2004 to 2008, 377 patients underwent mitral valve repair in our institution, out of them 23 repairs of infected mitral valves. During this time frame, 28 patients underwent mitral valve replacement due to endocarditis. Mitral repair techniques included extensive debridement, reconstruction of the annulus and mitral leaflets with pericardial patches and repair of the primary pathology. Post operative complications, and midterm follow up of clinical and echocardiography evaluation were compared for the two groups.

Results

There were 1 (4%) in hospital death in the repair group and 4 (15%) in the replacement group. Mean follow up was 14±9 months. Freedom from reoperation was 95% and 86%, in repair and replacement groups, respectively. Freedom from recurrent SBE was 100% in the repair group. Echocardiography follow-up revealed 95% (22/23) and 93% of patients (repair and replacement groups, respectively) were free from moderate or severe mitral regurgitation.

Conclusions

Our experience shows that mitral valve repair is associated with good clinical and midterm results among patients undergoing surgery for infective endocarditis.