

Bioprosthetic Mitral Valve Thrombosis: 10 Years Single Center Experience



Bloch Lev¹, Ilan Bushari Limor¹, Jabaren Mohamed ¹, Or Zafrir¹,
Orlov Boris², Barak Yaron², Aravot Dan² , Turgeman Yoav¹

¹Heart Institute , HaEmek Medical Center , Afula

²Heart Surgery Lady Davis Carmel Hospital , Haifa

Conflict of Interest: None

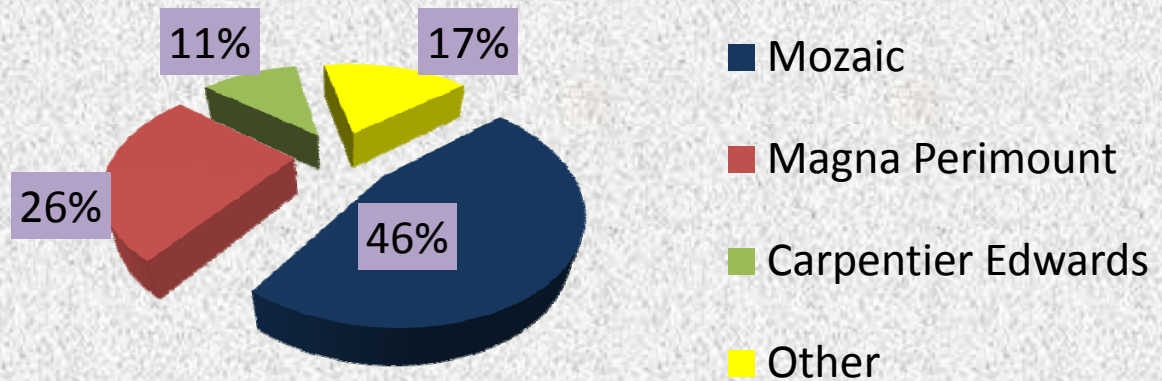
Background:

- Mitral valves bioprosthesis (MVB) are advantageous over mechanical devices as their incidence of thrombosis are significantly lower.
- However , the real prevalence of MVB thrombosis is unknown
- *Aim:* To determine the prevalence and predictors for MVB thrombosis

Material & Methods:

- 10 years: 156 pts: MVR
- 35/156 (22.4%): Bioprosthetic MVR
- Mean age: 68.7 ± 9.5

- *Valve Type :*



- *Etiology:* Ischemic 49% (17)
Rheumatic 31% (11)
Degenerative 17%(6)
Endocarditis 3% (1)
- 35/156 (40%): Persistent AF – Rx - Coumadin

Results:

- 3/35 (8.5%)- MVB Thrombi
- Mean period from surgery to index event: 40 ± 18 months
- Sinus rhythm
- Ischemic etiology
- Echocardiography: LVEF $< 35\%$ (*$p < 0.05$*)
- 2/3- Redo (s/p CABG)
- 1/3- Coumadin for life



Conclusions:

- **MVB thrombosis is a relatively frequent cause of valve dysfunction.**
- **The predictor of this phenomenon was significantly reduced LVEF in pts with ischemic etiology.**
- **In this group the need for early and long term anticoagulation should be considered.**