



# IV CONGRESSO NAZIONALE DI ECOCARDIO CHIRURGIA

MILANO 10-12 MARZO 2010

Con il patrocinio di: SIEC - ANMCO - SICCH - SIC

**PRESIDENTE ONORARIO**

Antonio Pezzano

**PRESIDENTI**

Cesare Fiorentini

Ettore Vitali

**DIRETTORI**

Antonio Mantero

Giuseppe Tarelli

Sono stati assegnati  
n. 15 crediti ECM



**AORTIC  
VALVE  
REPAIR**



**La plastica dell'apparato  
valvolare aortico  
sottocommissurale.**

*Una tecnica difficile nella quale è  
possibile ottenere buoni risultati.*

## **Carlo Antona**

**Professor of Cardiac Surgery**

**Head Cardio-Nephro-Vascular Department**

**Head Division of Cardiovascular Surgery**

**"L. Sacco" University Hospital**

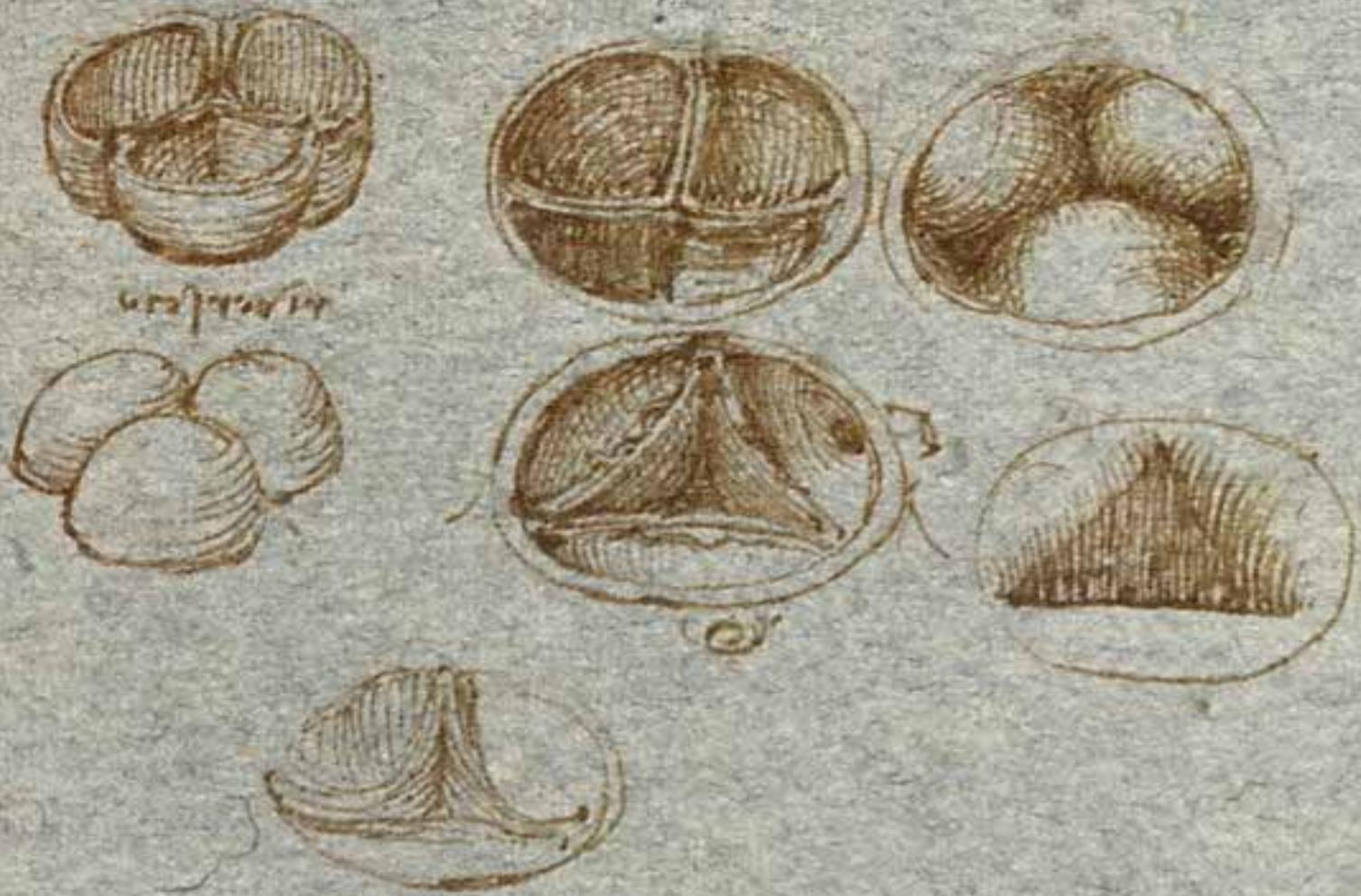
**Milan, Italy**





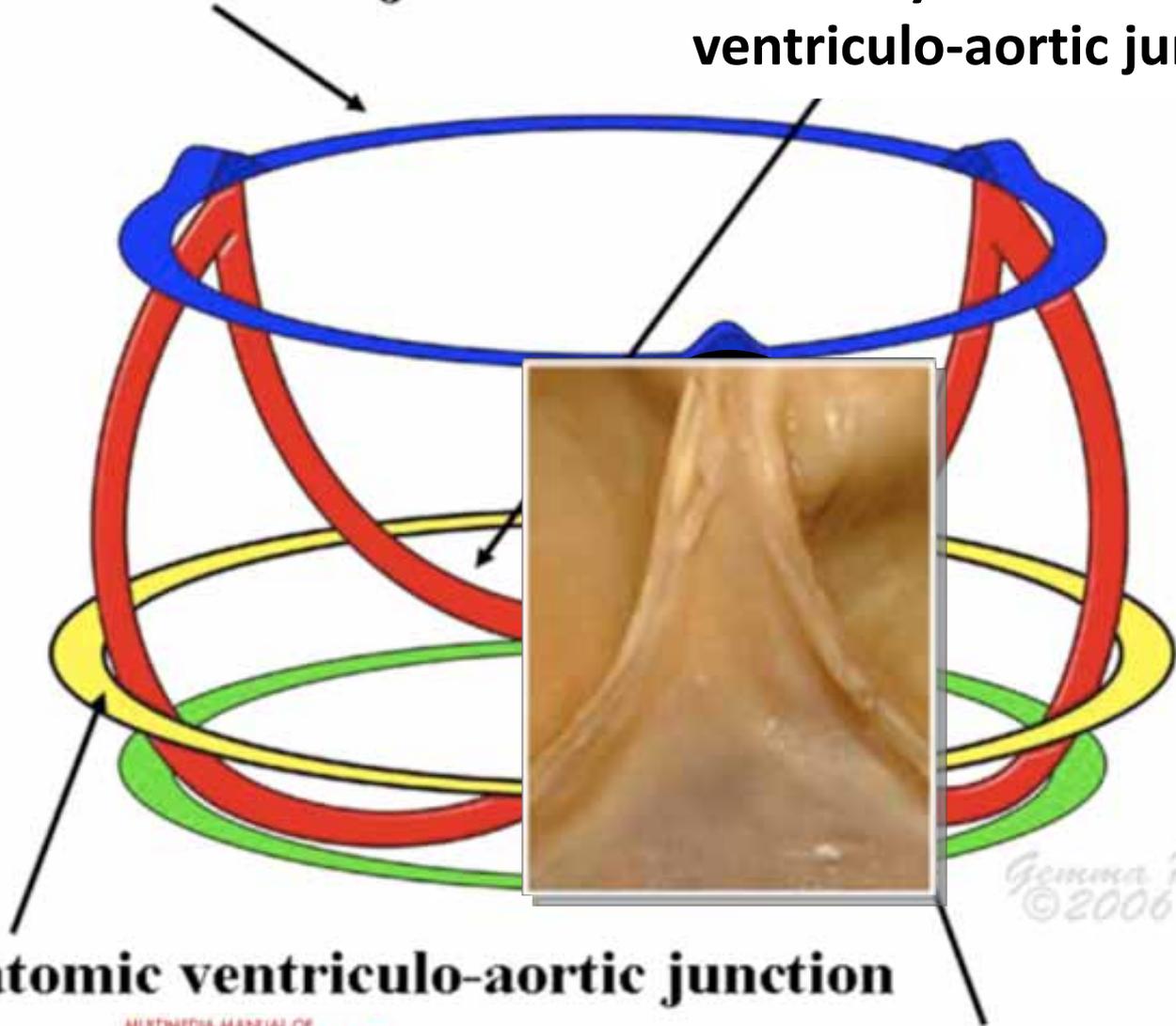
Leonardo da Vinci 1452-1519

Handwritten text in Leonardo's cursive script, likely describing the anatomical structures shown in the sketches below.



**Sinutubular junction**

**Haemodynamic  
ventriculo-aortic junction**



*Gemma Price  
©2006*

**Anatomic ventriculo-aortic junction**

**Virtual basal ring**

ISSN 1351-9606/2006/000202

MULTIMEDIA MANUAL OF  
**CARDIO THORACIC**  
SURGERY

The surgical anatomy of the aortic root

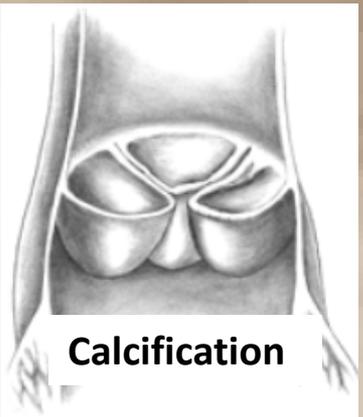
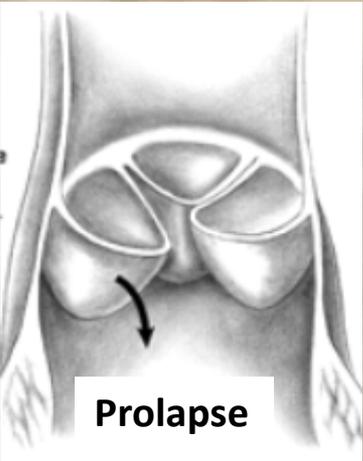
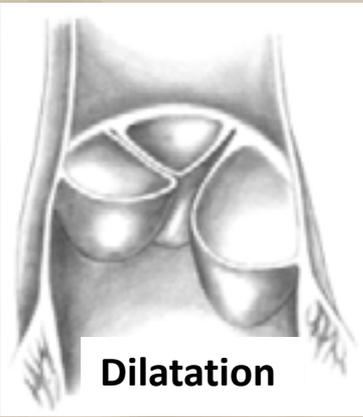
Robert H. Anderson

Cardiac Unit, Institute of Child Health, University College, 30 Guilford Street, London WC1N 1EH, UK



**AORTIC  
VALVE  
REPAIR**





Aortic Valve

Disease

INCOMPETENCE

STENOSIS

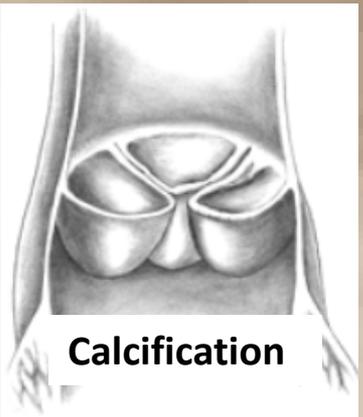
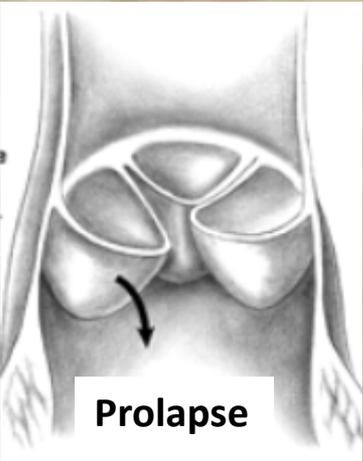
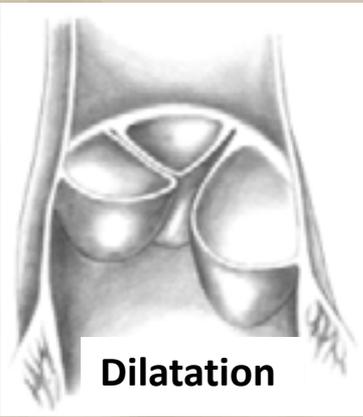
- Ascending Aorta Dilatation →
- Aortic Root Dilatation →
- Aortic Annulus Dilatation ↙

Replacement of the Ascending Aorta by a woven Dacron graft

**BENTALL PROCEDURE**

**Aortic Valve Replacement**





Aortic Valve

Disease

INCOMPETENCE

STENOSIS

- Ascending Aorta Dilatation →
- Aortic Root Dilatation →
- Aortic Annulus Dilatation ↙

Replacement of the Ascending Aorta by a woven Dacron graft

**Sparing Technique**  
Reimplantation  
Remodelling

**Aortic Valve Repair**



**Aortic Valve Replacement**

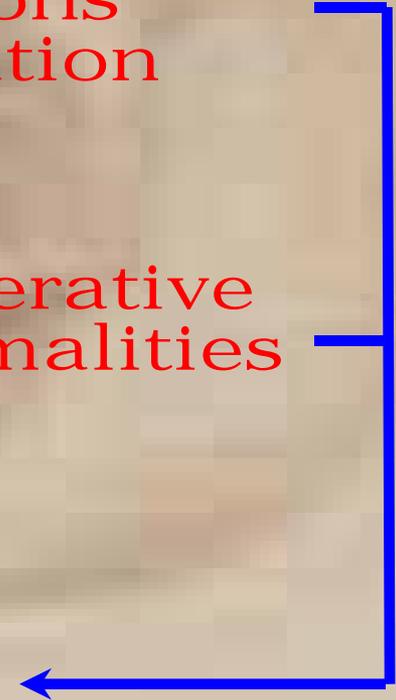


# Successful Approach

- Recognition of the exact lesions responsible for the regurgitation
- Selection of the adequate operative maneuvers to correct abnormalities

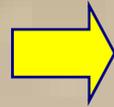


**Cooperation**



# Surgical Flow-Chart for Aortic Regurgitation

**Echo  
Valve Analysis**



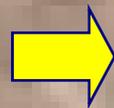
To analyse regurgitation mechanisms

**Surgical  
Valve Analysis**



To confirm repair feasibility and  
to analyse tissue characteristic

**Functional Unit  
Repair**



To repair regurgitation mechanisms

**Functional Unit  
Stabilization**



To regain F.U. continuity  
and to rearrange hemodynamic stresses





**AVR is not always possible**



**AORTIC  
VALVE  
REPAIR**



# What the surgeon want to know from the ECHO?

## PRE-OP.

- The Anatomy of the Aortic Valve Functional Unit
- The measures of the Aortic Valve Functional Unit
- The Aortic Valve pre-op. incompetence grade
- The incompetence mechanism

## POST-OP.

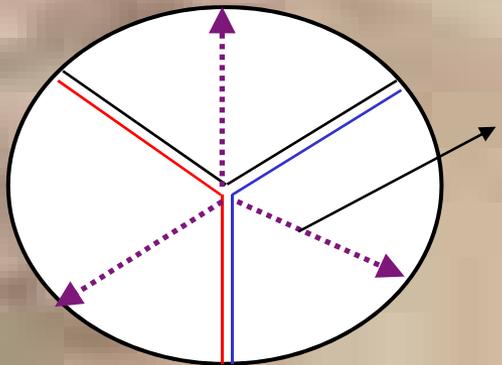
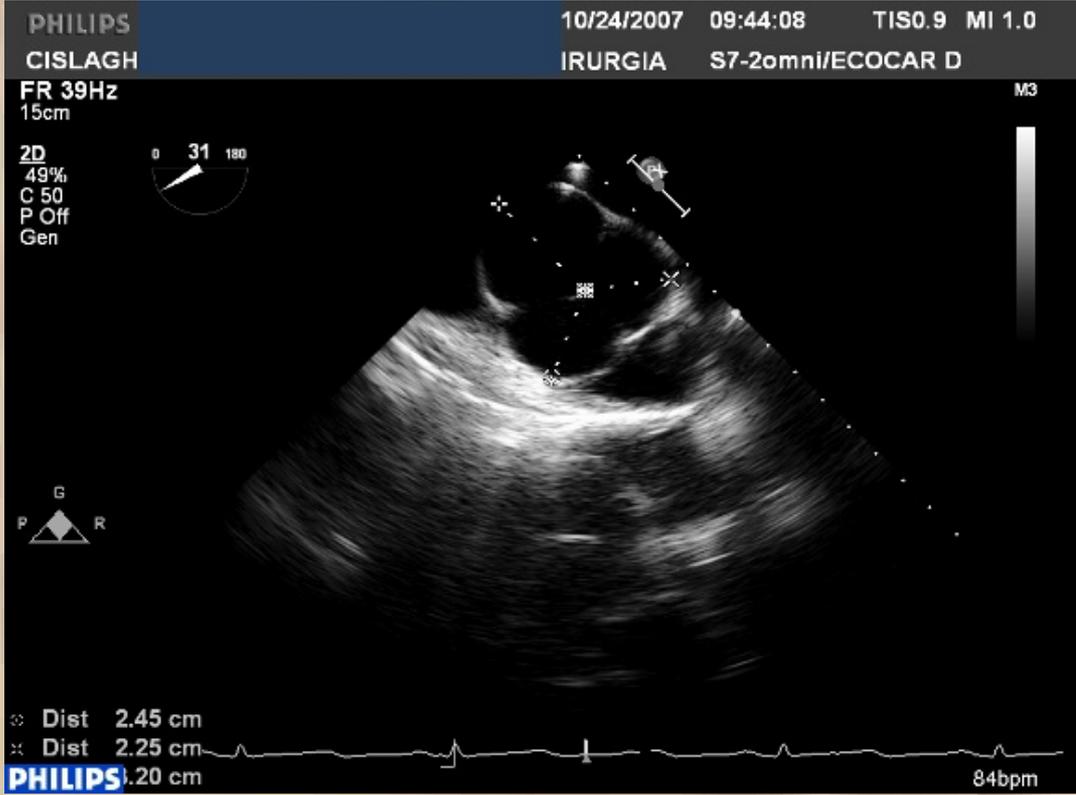
- The post-operative measures
- The residual incompetence grade
- The mechanism of the residual incomptence



- The Aortic Valve Functional Reserve



# Short axis view



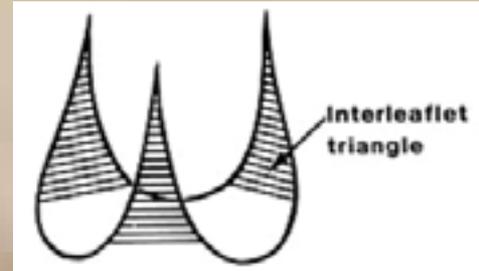
Valsalva Sinus Radius

Normal valve

to measure Asymmetrical Sinuses



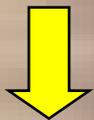
# AORTIC FUNCTIONAL ANNULUS



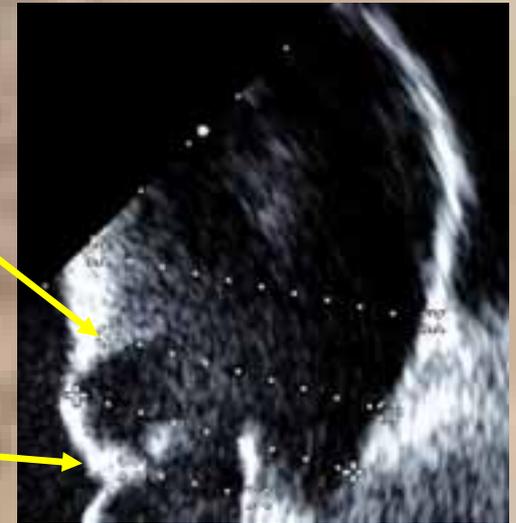
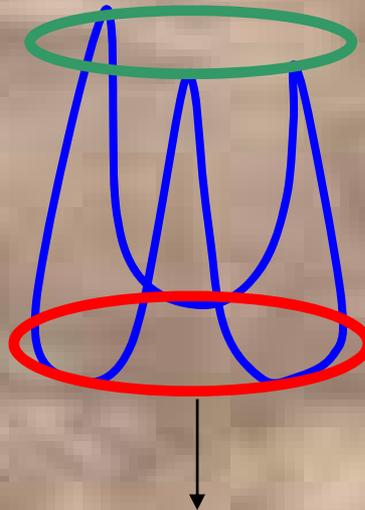
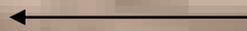
Sino-Tubular Junction



Ventriculo-Arterial Junction



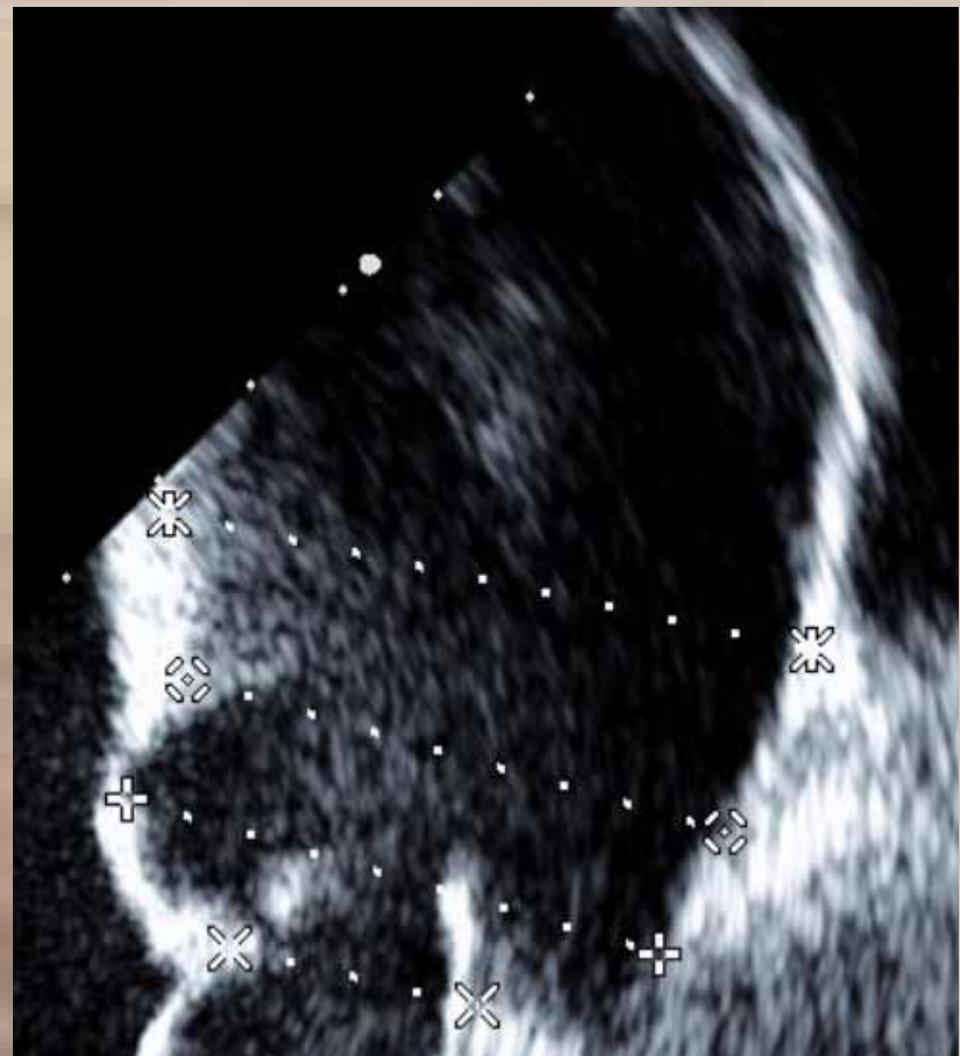
AORTIC FUNCTIONAL ANNULUS



ECO-annulus



# Long axis view



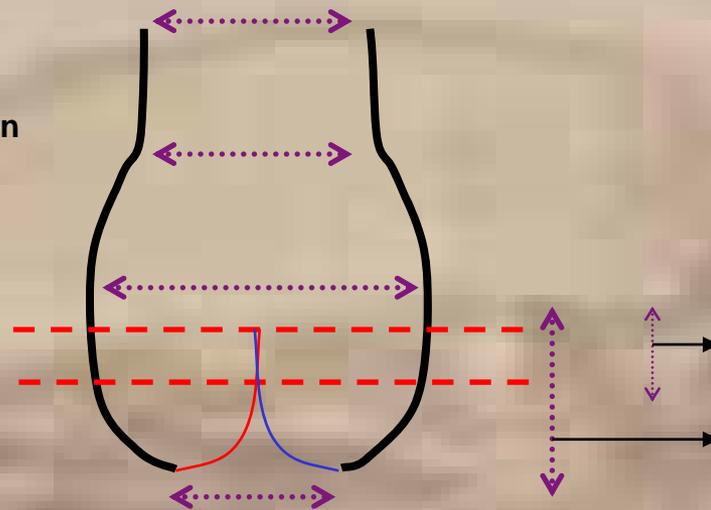
# Long axis view

Ascending Aorta

Sino-Tubular Junction

Root

Virtual Basal Ring



Normal coaptation length

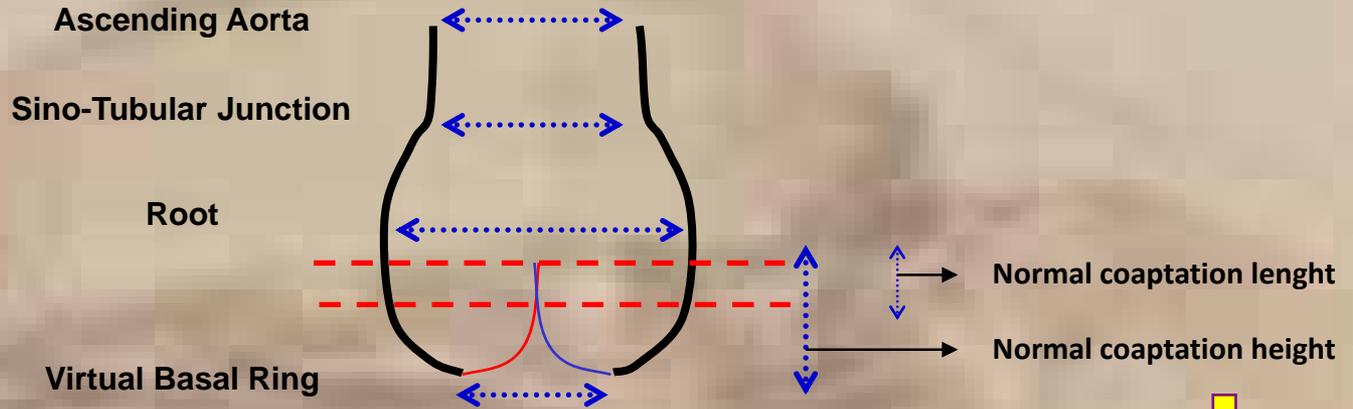
Normal coaptation height

FUNCTIONAL RESERVE

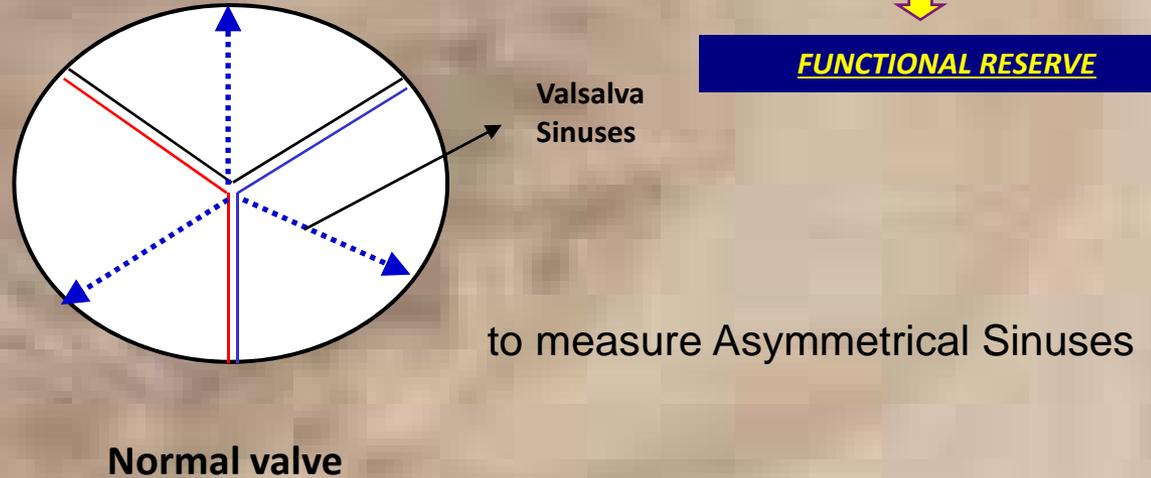


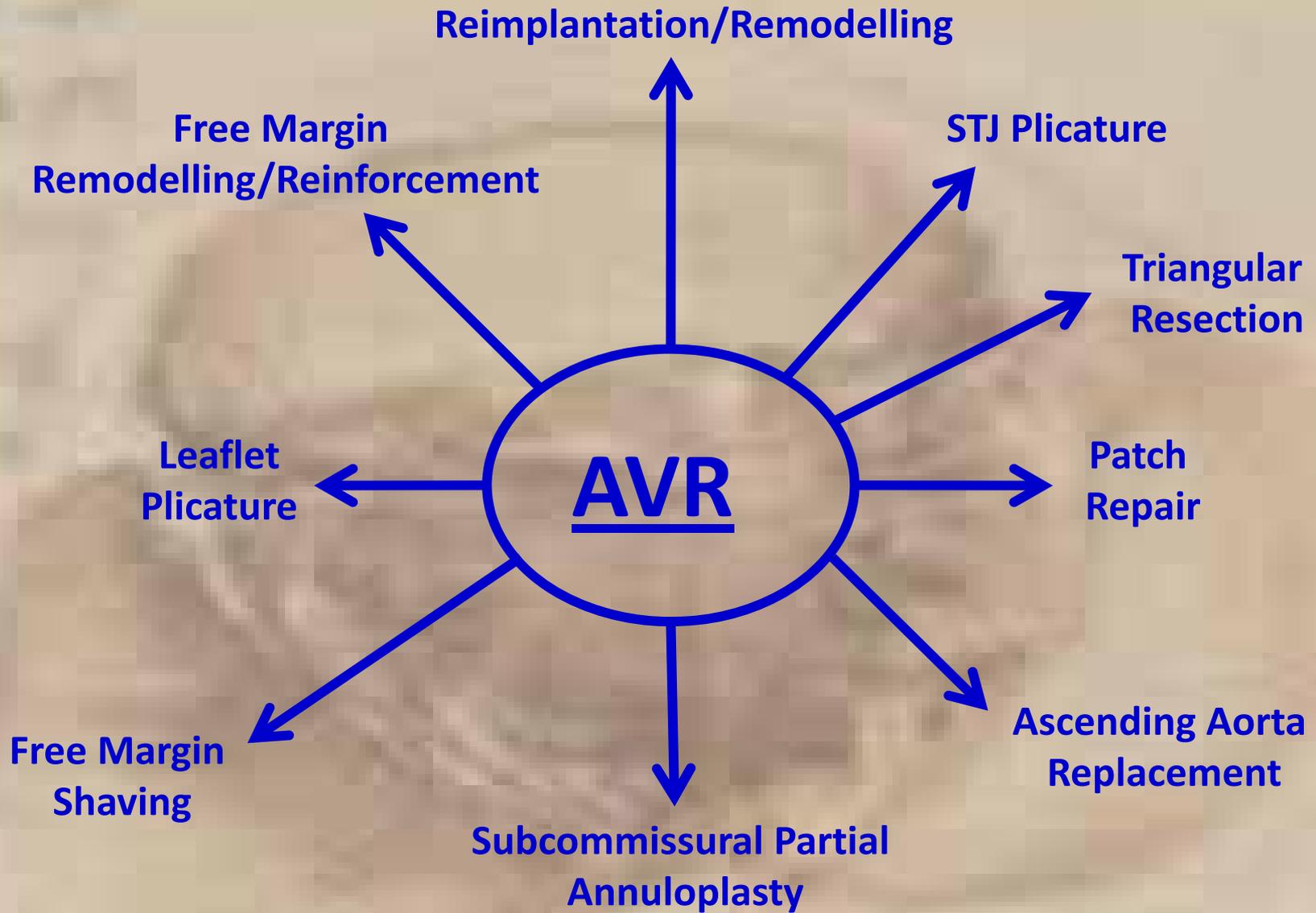
# TEE Measures

Long axis view



Short axis view





## FAA

- STJ Plicature
- Subcommissural Partial Annuloplasty

## AORTIC ROOT

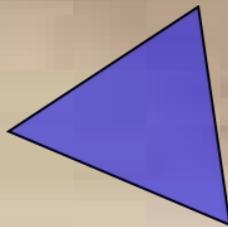
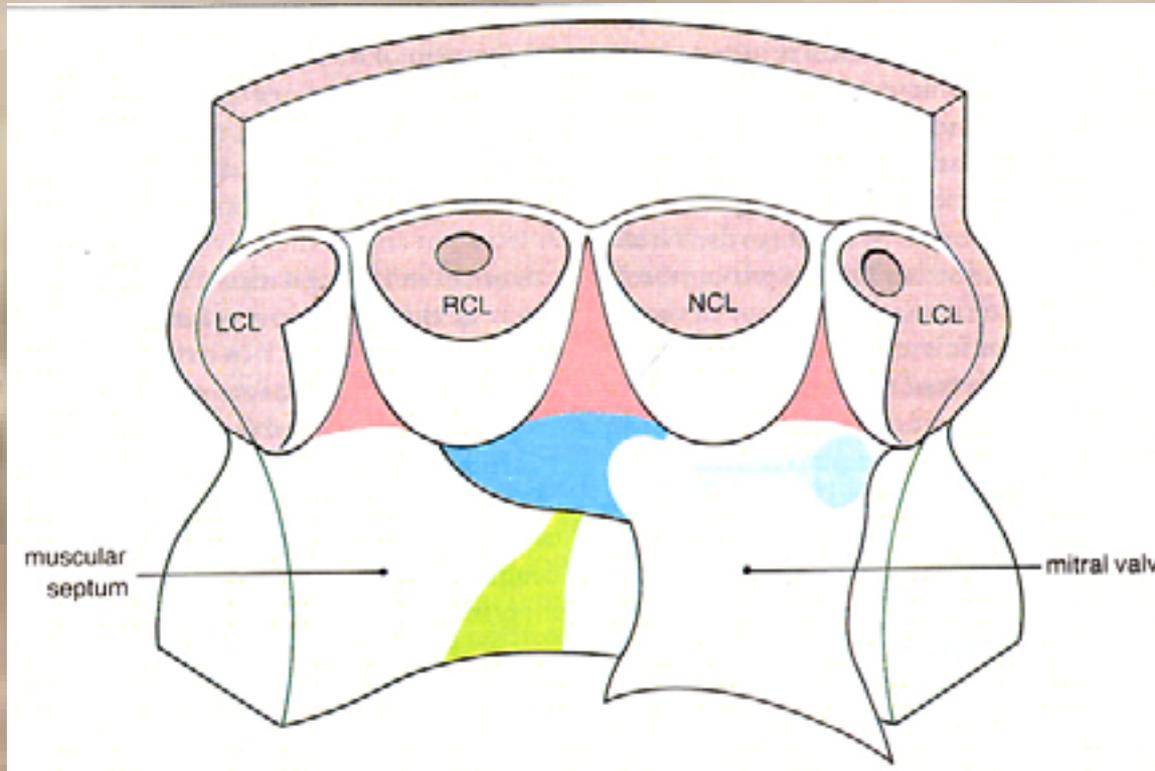
- Ascending Aorta Replacement
- Reimplantation
- Remodelling

## LEAFLETS

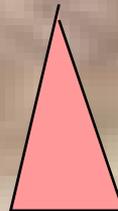
- Leaflet Plicature
- Free Margin Shaving
- Free Margin Reinforcement
- Free margin Remodelling
- Triangular Resection
- Patch Repair



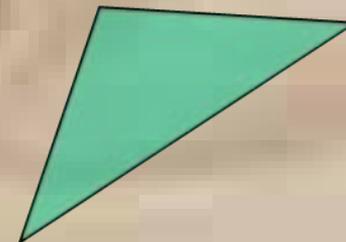
# Interleaflet Triangle Analysis



**Mild Dilation**



**Normal**



**Severe Dilation**



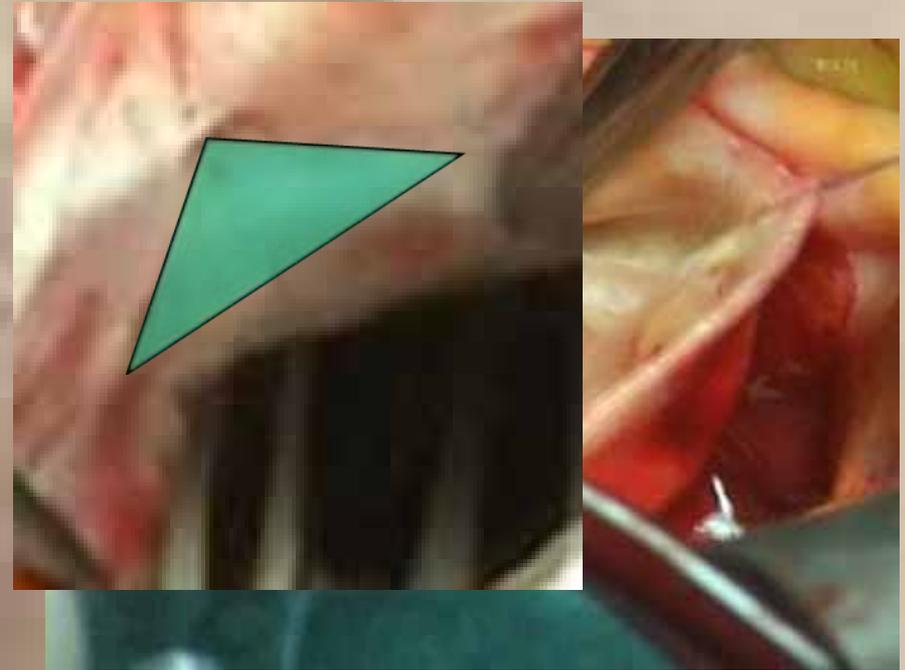
**AORTIC  
VALVE  
REPAIR**



# Pathologic Interleaflet Triangle



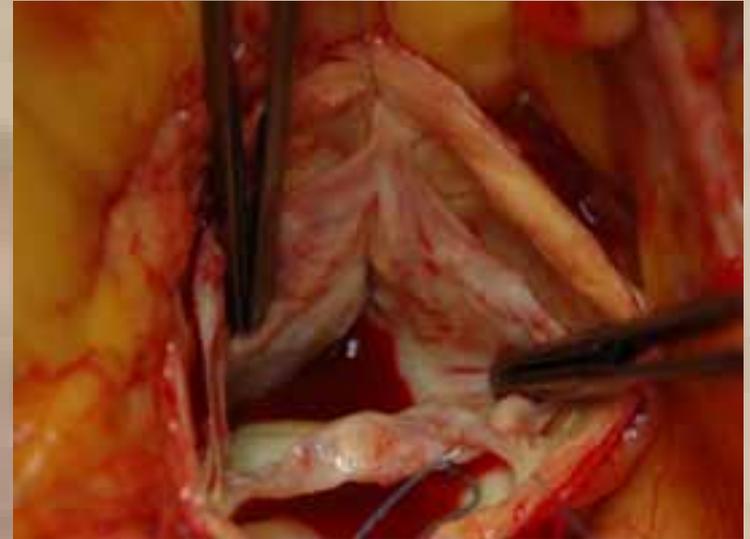
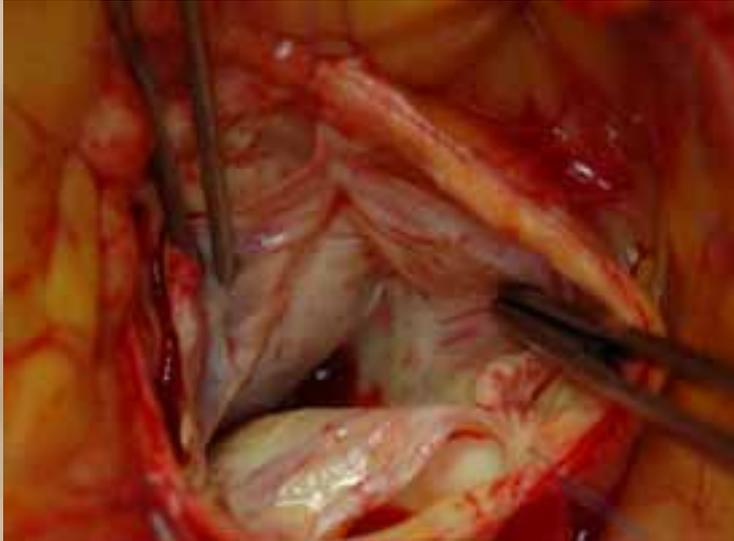
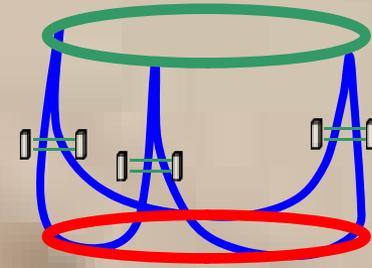
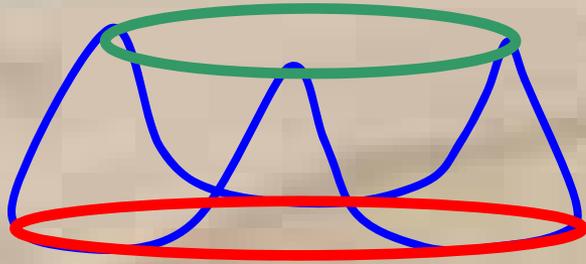
**Mild Dilation**



**Severe Dilation**



# FAA Repair



# STJ Diameter Importance



**Ascending Aortic Aneurysm  
Severe AVR**



**AORTIC  
VALVE  
REPAIR**



FR 39Hz  
8.1cm

M3

2D  
64%  
C 50  
P Off  
APen



- ⊕ Diam. Ao ascend. 4.9 cm
- ⊙ Diam. STJ 3.3 cm
- ⊗ Diam S Valsalva 2.9 cm
- PHILIPS ⊕ 1.9 cm

55bpm

F, 75 y (L.A.)

Ascending aorta dilatation

Tricuspid aortic valve → moderate AR

Asc Ao=4.9 cm  
STJ=3.3 cm  
SoV=2.9 cm  
Ao anulus=1.9 cm



Moderate AR



PHILIPS

22/12/2009 09:25:13 TIS1.3 MI 0.7  
S7-2omni/AdultI

FR 23Hz  
12cm  
2D  
53%  
C 50  
P Off  
Gen  
CF  
70%  
4.9MHz  
WF Alto  
Med.



PHILIPS

STJ dilatation



NO COAPTATION

22/12/2009 09:17:01 TIS0.7 MI 1.2  
S7-2omni/AdultI

JPEG

58 bpm

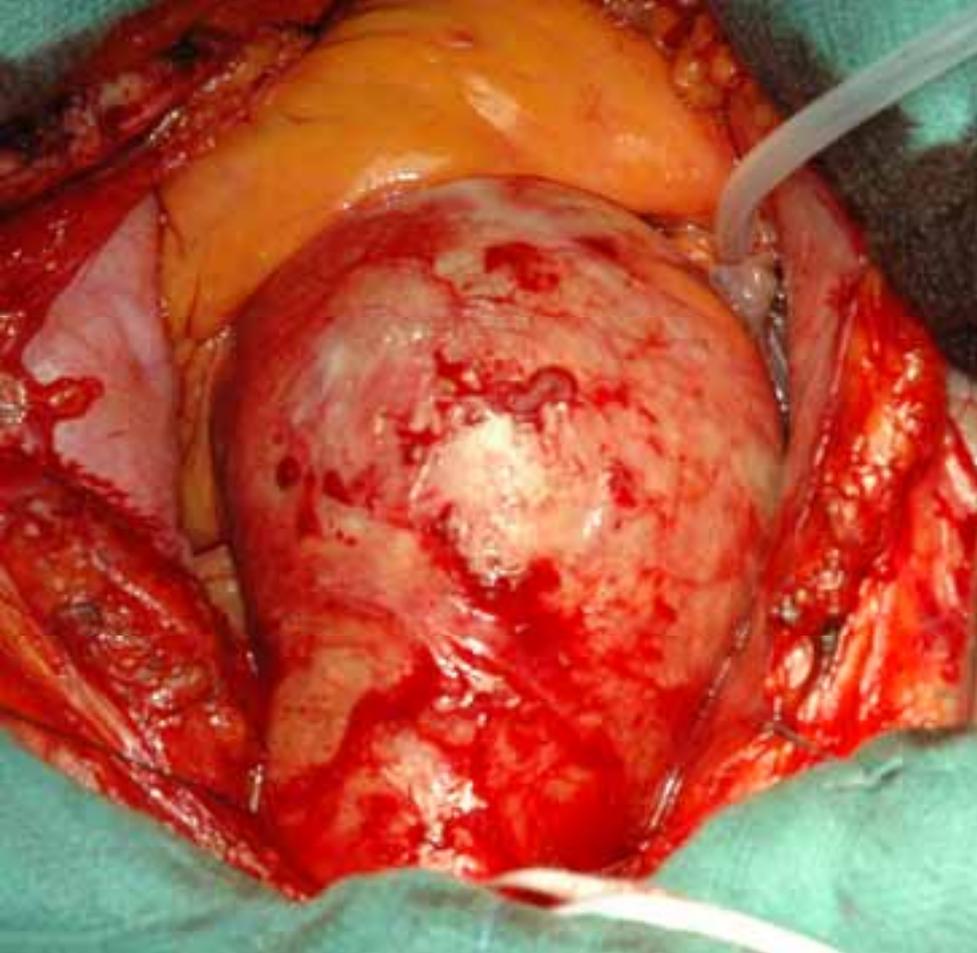


PHILIPS



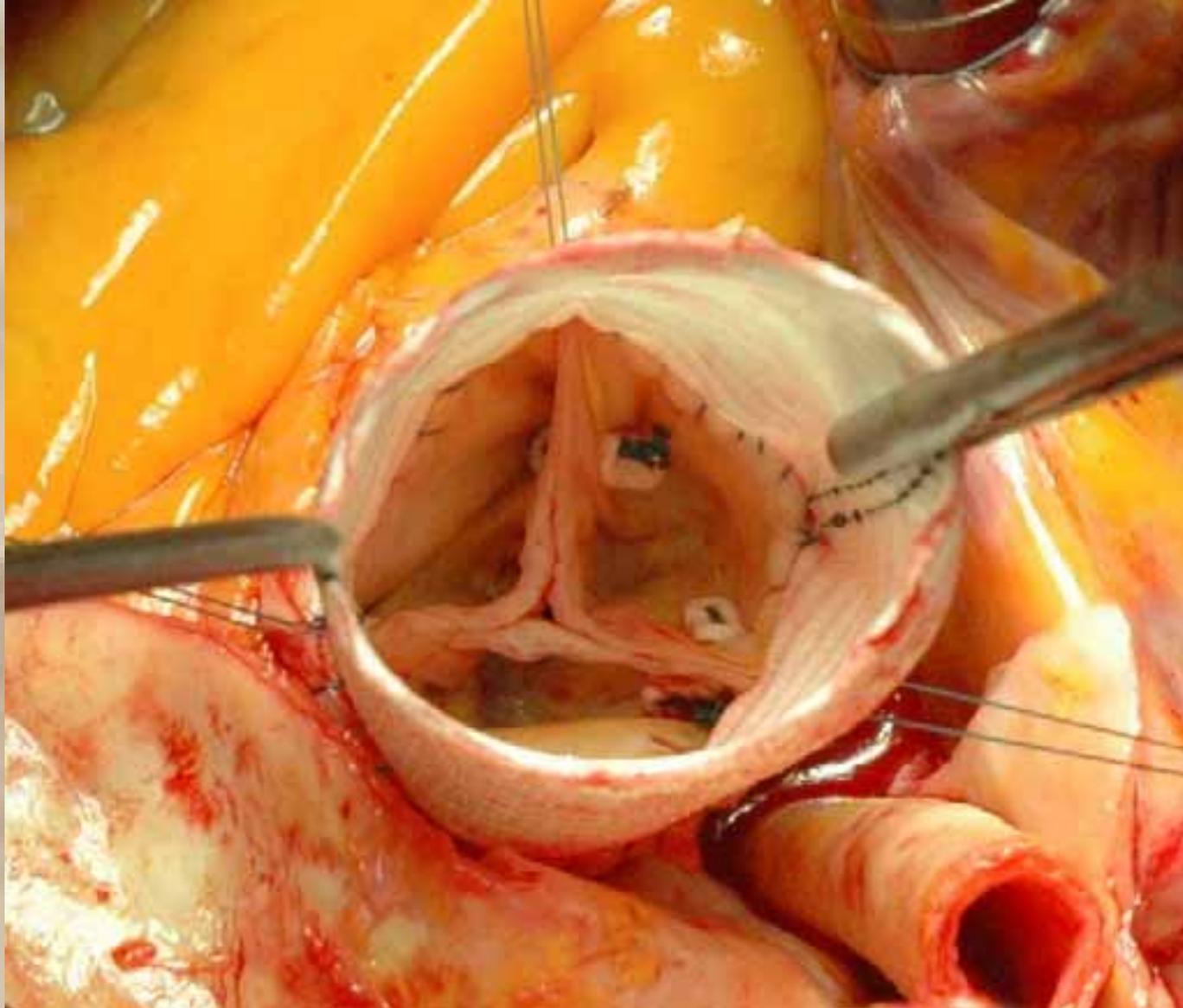
AORTIC  
VALVE  
REPAIR





**AORTIC  
VALVE  
REPAIR**





**Ascending aorta replacement  
Partial subcommissural annuloplasty**



PHILIPS

22/12/2009 11:03:20 TIS1.3 MI 0.7

S7-2omni/AdultI

FR 27Hz  
11cm

2D  
41%  
C 50  
P Off  
Gen  
CF  
70%  
4.9MHz  
WF Auto  
Med.

113 mm

M3 M4  
+61.6  
-51.5  
cm/s



22/12/2009 11:04:35 TIS1.1 MI 0.8

S7-2omni/AdultI

PHILIPS



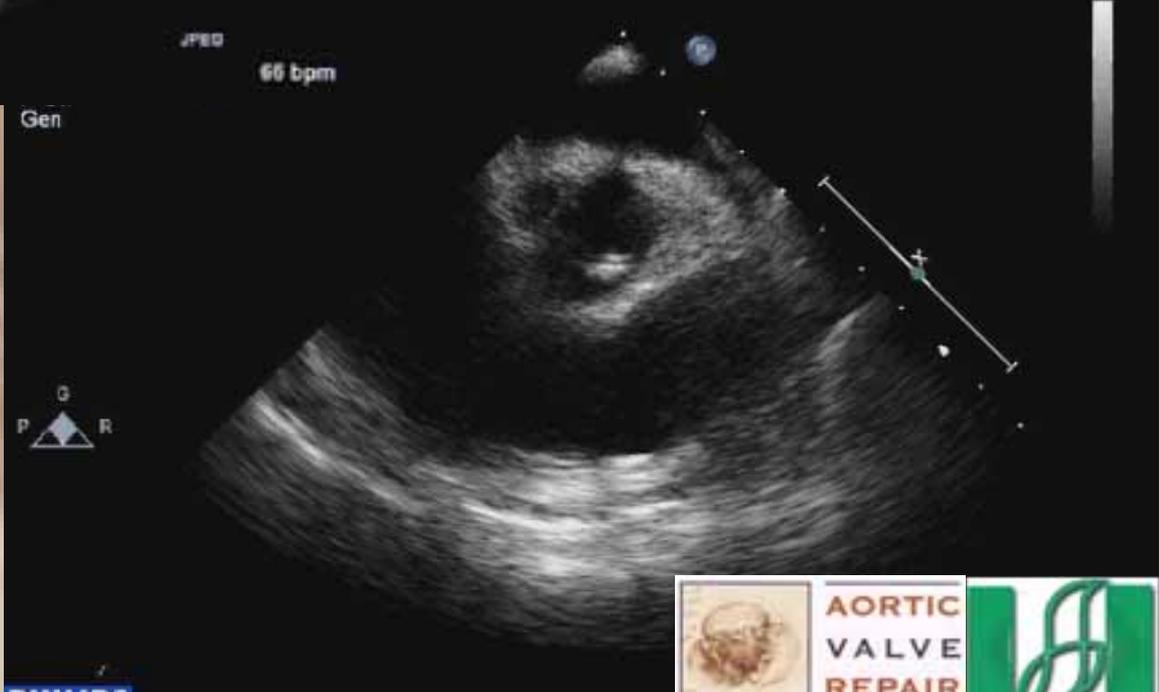
JPE0

66 bpm

Gen

G  
P R

M3



PHILIPS



AORTIC  
VALVE  
REPAIR





F, 63 y (F.A.)  
Bicuspid aortic valve → moderate AR  
Ascending aorta and NCS dilatation

21/12/2009 09:10:38 TIS1.2 MI 0.6  
S7-2omni/AdultI

PHILIPS



20 70  
C 50  
P Off  
Gen  
CF  
70%  
4.9MHz  
WF Ato  
Med.



PHILIPS



**AORTIC  
VALVE  
REPAIR**



FR 17Hz  
8.6cm

2D  
55%  
C 50  
P Off  
Gen  
CF  
70%  
4.9MHz  
WF Alto  
Med.

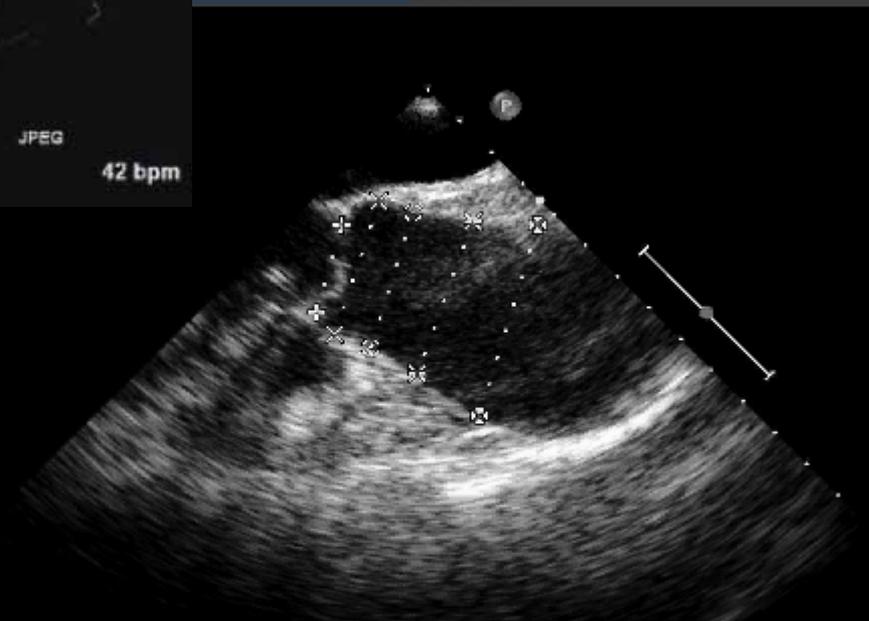


JPEG

42 bpm

Asc Ao=4.5 cm  
STJ=3.7 cm  
SoV=3.2 cm  
Anulus=2 cm

M3



- \* Dist 4.53 cm
- \*\* Dist 3.67 cm
- o Dist 3.21 cm
- x Dist 3.18 cm



AORTIC VALVE REPAIR

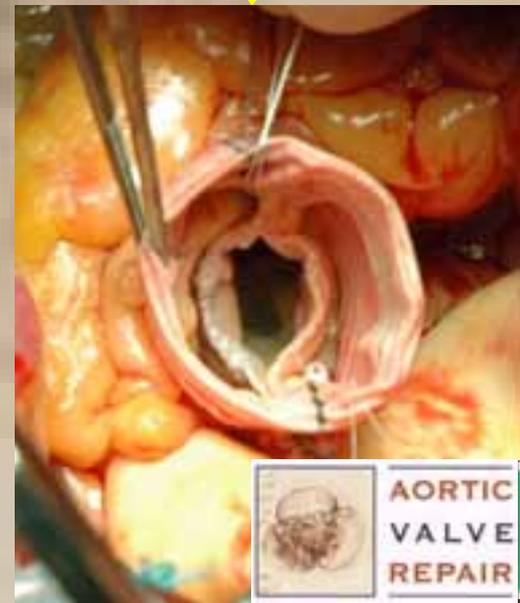




**Raphe resection and patch repair**



**Wolfe procedure**



**Free margin shaving and reinforcement**



**AORTIC VALVE REPAIR**





PHILIPS



21/12/2009 12:37:21 TIS1.1 MI 0.7

S7-2omni/Adultl

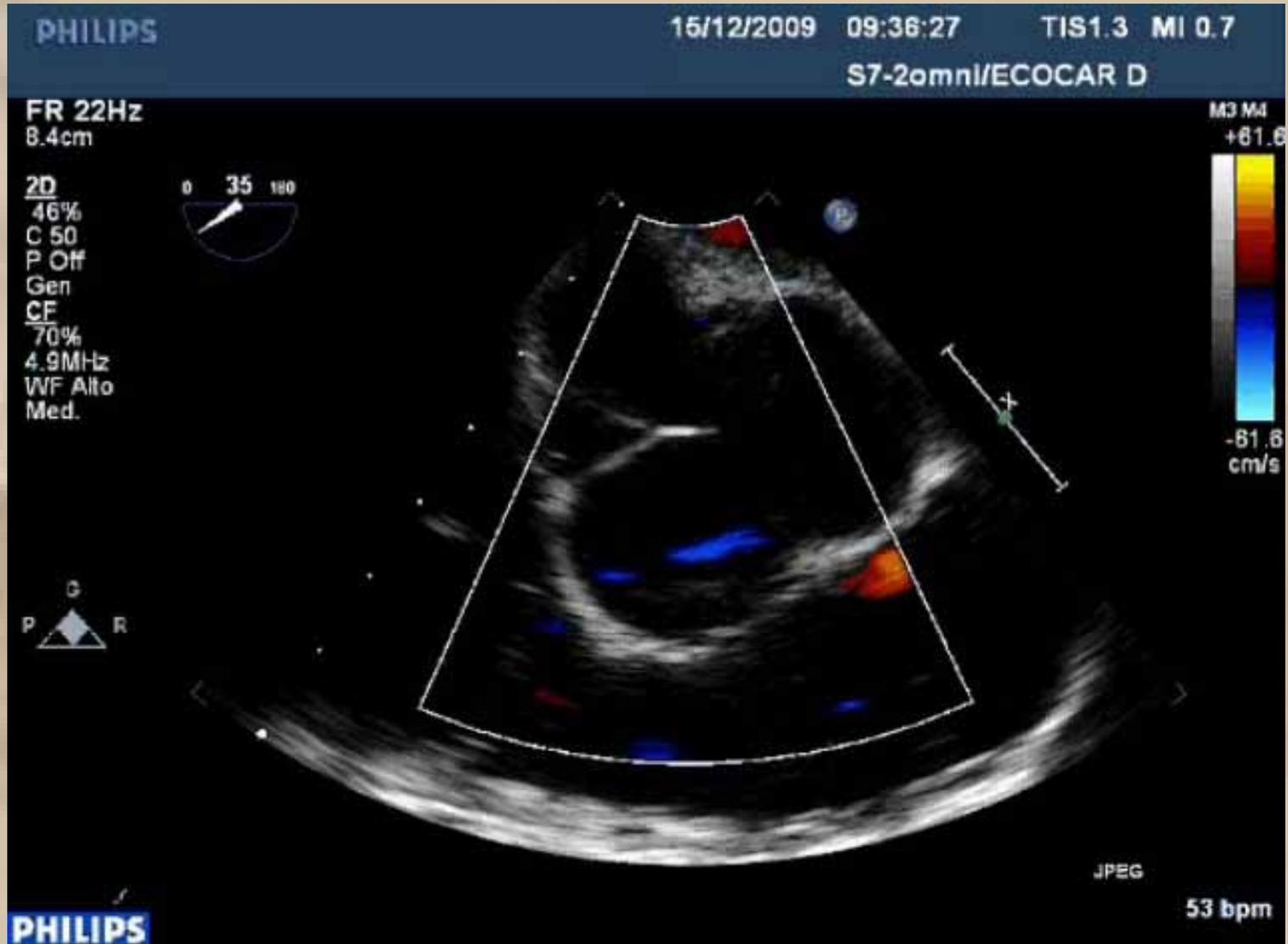


CL  
70%  
4.9MHz  
WF Alto  
Med.



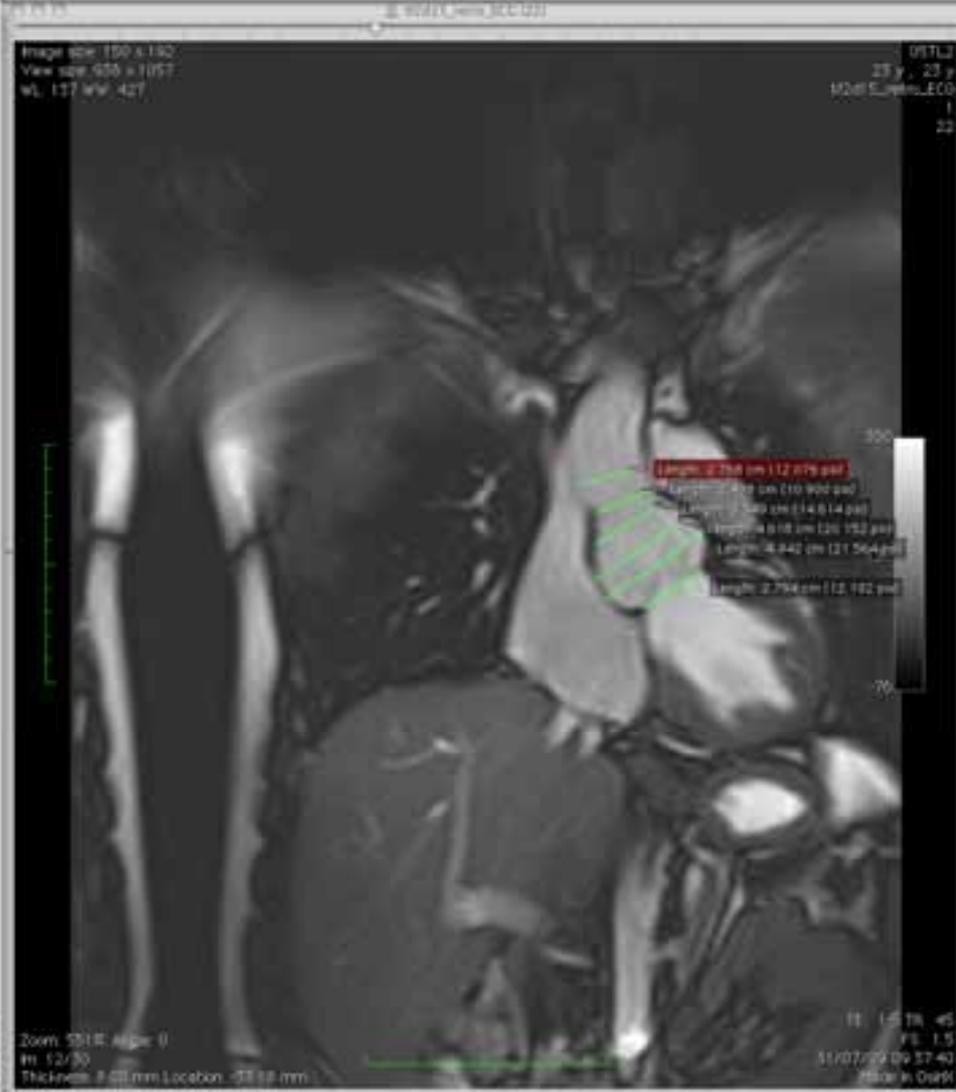
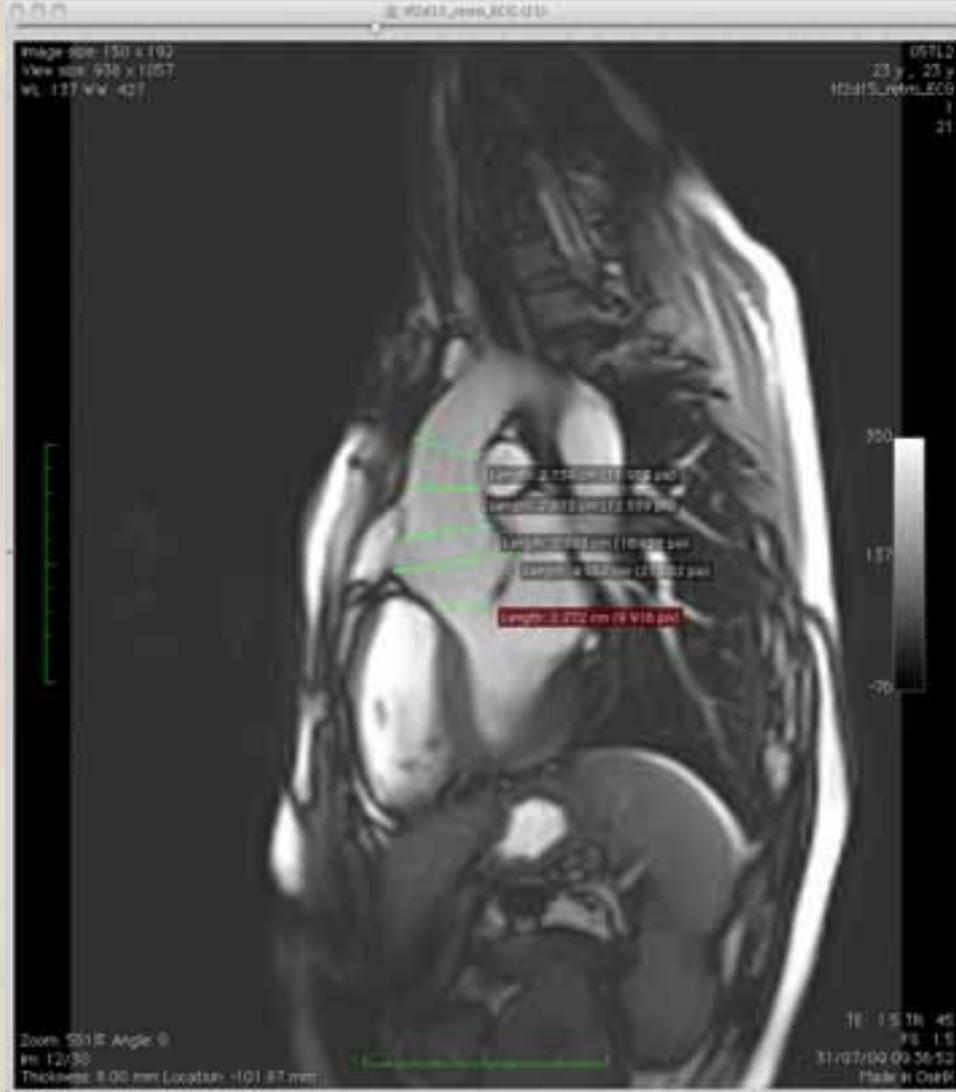
PHILIPS





M, 23 y (T.M.)  
Marfan, aortic root dilatation



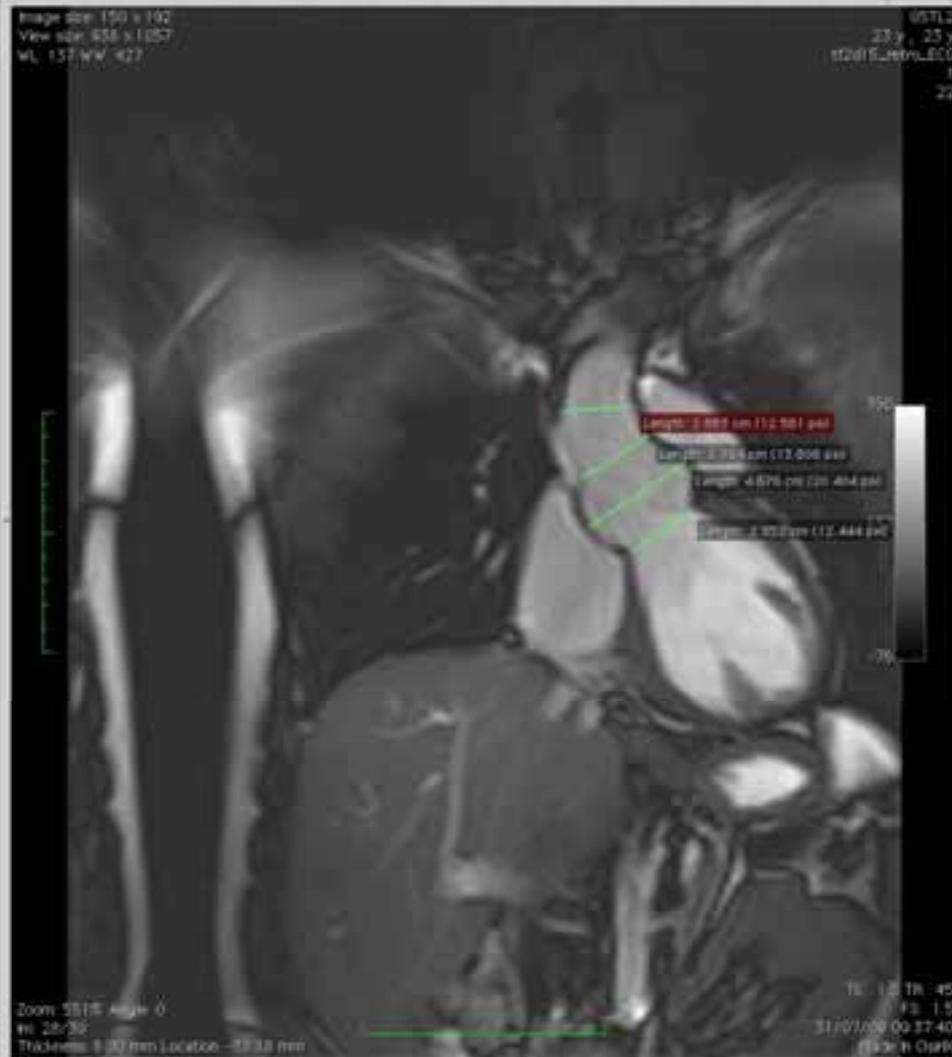
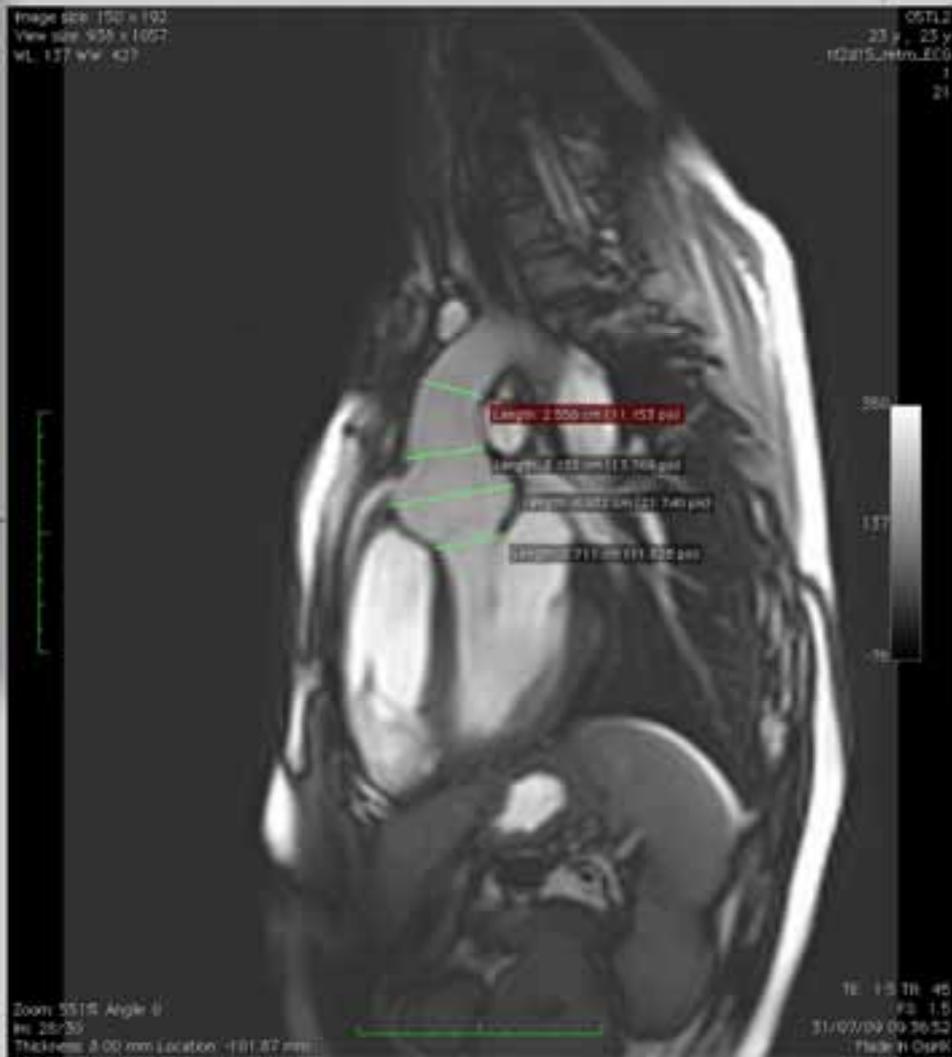


**Anulus=2.2**  
**Root=4.9**  
**STJ=3.7**  
**Asc Ao=2.8**

**END-SYSTOLE**

**Anulus=2.7**  
**Root=4.9**  
**STJ=2.4**  
**Asc Ao=2.7**





Anulus=2.7

Root=4.9

STJ=3.1

Asc Ao=2.5

**END-DIASTOLE**

Anulus=2.8

Root=4.6

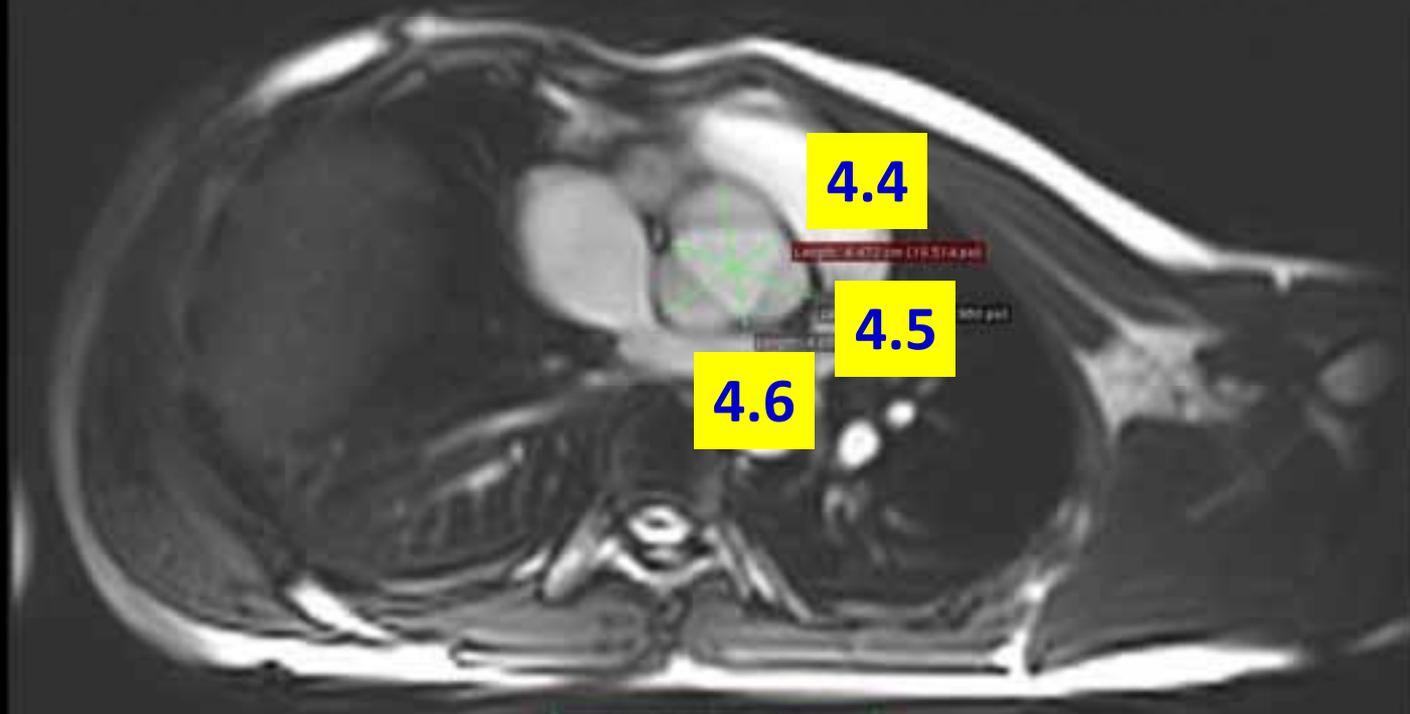
STJ=3.1

Asc Ao=2.8



Image size: 192 x 150  
View size: 1895 x 1057  
WL: 137 Wv: 427

05TL2  
23 y, 23 y  
f2d15\_retro\_ECG  
1  
23



Zoom: 728% Angle: 0  
In: 4/30  
Thickness: 5.00 mm Localiz: -412.19 mm

TE: 1.5 Tr: 45  
FS: 1.5  
31/07/09 09:58:19  
Made in Ours!

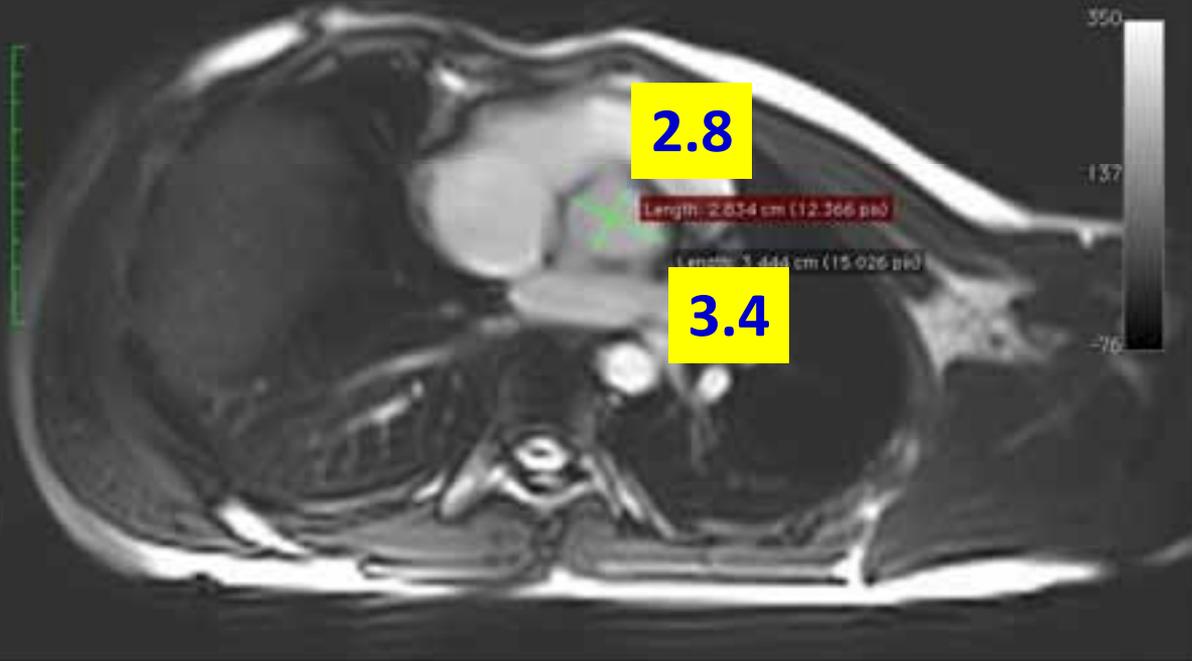
## VALSALVA SINUSES



Image size: 192 x 150  
View size: 938 x 1057  
WL: 137 WW: 427

05TL2  
23 y, 23 y  
tf2d15\_retro\_ECG  
1  
23

# VENTRICULO-AORTIC JUNCTION



ation: -112.19 mm

TE: 1.5 TR: 45  
FS: 1.5  
31/07/09 09:38:20  
Made in OMRK





Remodeling

+

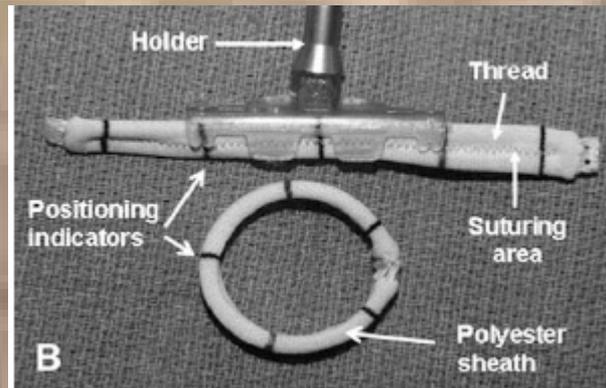


Reimplantation

=



Remodeling +  
Subvalvular aortic annuloplasty



### An expansible aortic ring for a physiological approach to conservative aortic valve surgery

Emmanuel Lansac, MD, PhD,<sup>a,b</sup> Isabelle Di Centa, MD,<sup>c</sup> François Raoux, MD,<sup>d</sup> Neil Bulman-Fleming,<sup>e</sup> Adrian Ranga,<sup>e</sup> Aicha Abed, MSc,<sup>a,f</sup> Maguette Ba, MD,<sup>g</sup> Anthony Paolitto,<sup>e</sup> Didier Letourneur, PhD,<sup>a,f</sup> and Anne Meddahi-Pellé, MD, PhD<sup>a,g</sup>

The Journal of Thoracic and Cardiovascular Surgery • September 2009





PHILIPS

15/12/2009

12:04:27

TIS1.1 MI 0.8

S7-2omni/ECOCAR D

FR 39Hz  
11cm

M3

2D  
46%  
C 50  
P Off  
Gen



POSTCEC

JPEG

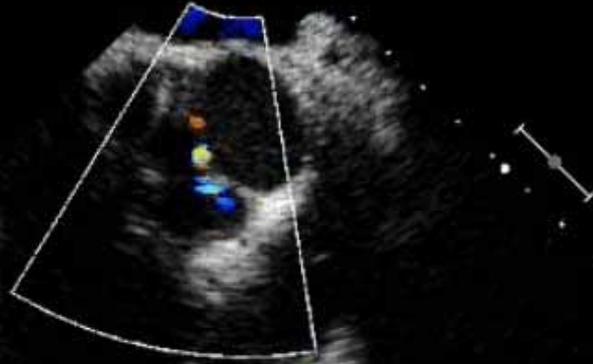
53 bpm

PHILIPS



FR 22Hz  
13cm

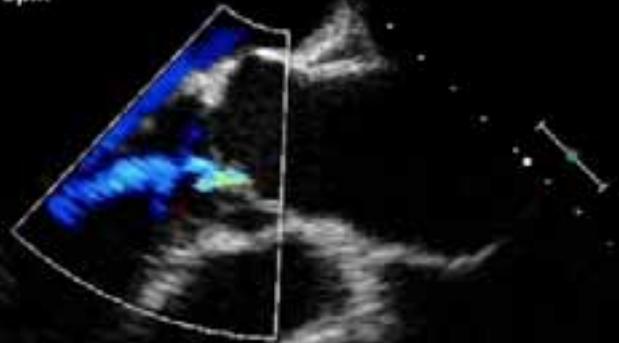
2D  
60%  
C 50  
P Off  
APen  
CF  
70%  
4.9MHz  
WF Alto  
Med.



JPEG

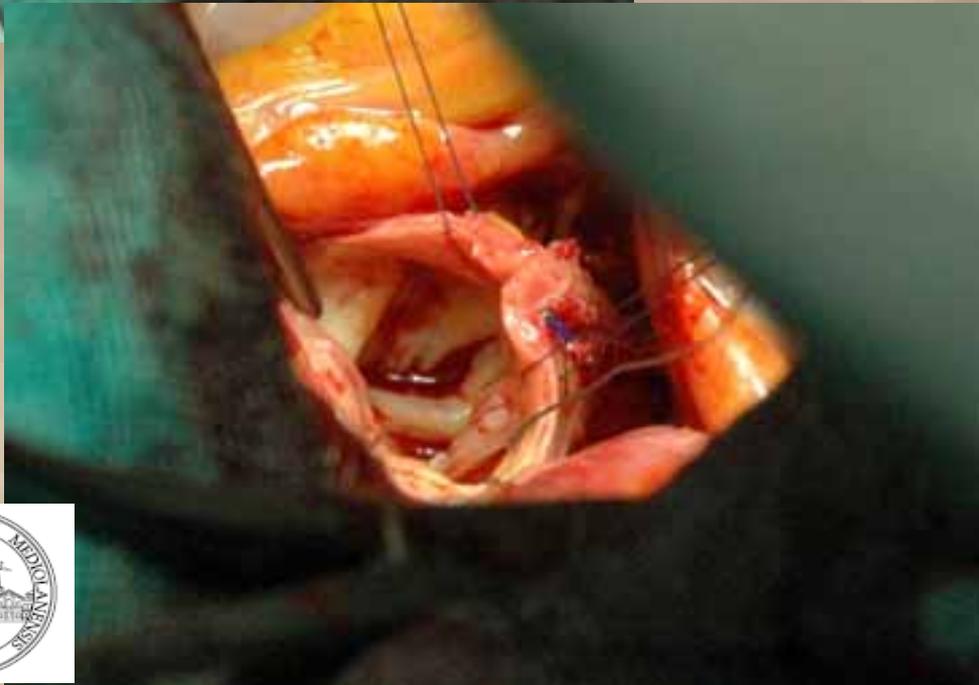
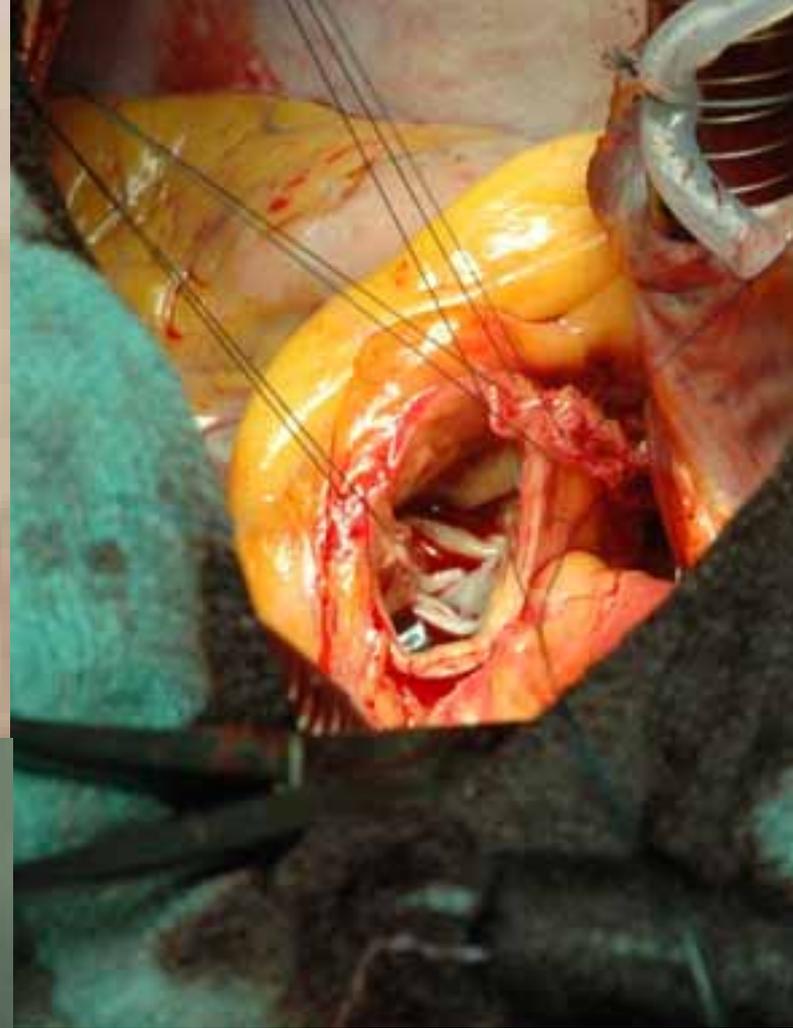
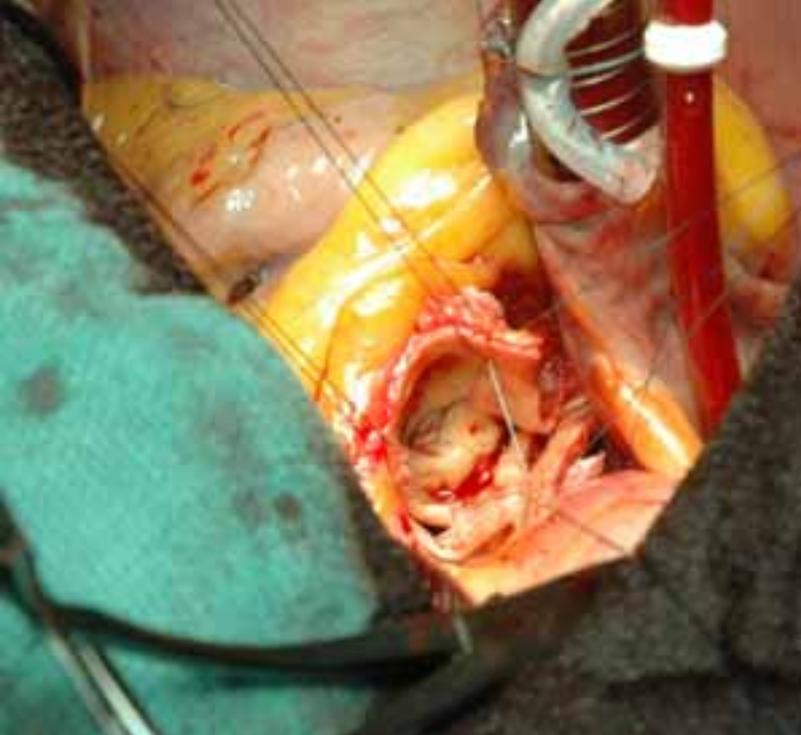
77 bpm

CF  
70%  
4.9MHz  
WF Alto  
Med.



M, 43 y (C.M.)  
Bicuspid aortic valve, moderate  
rigurgitation  
Ascending Aorta dilatation (47mm)  
Aortic root 43 mm

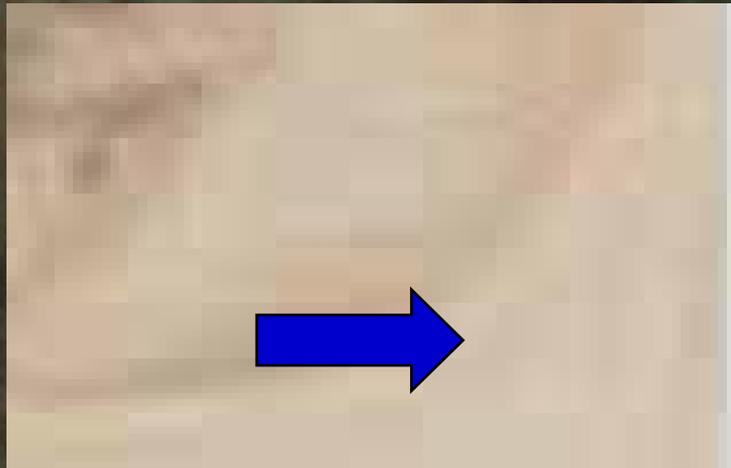
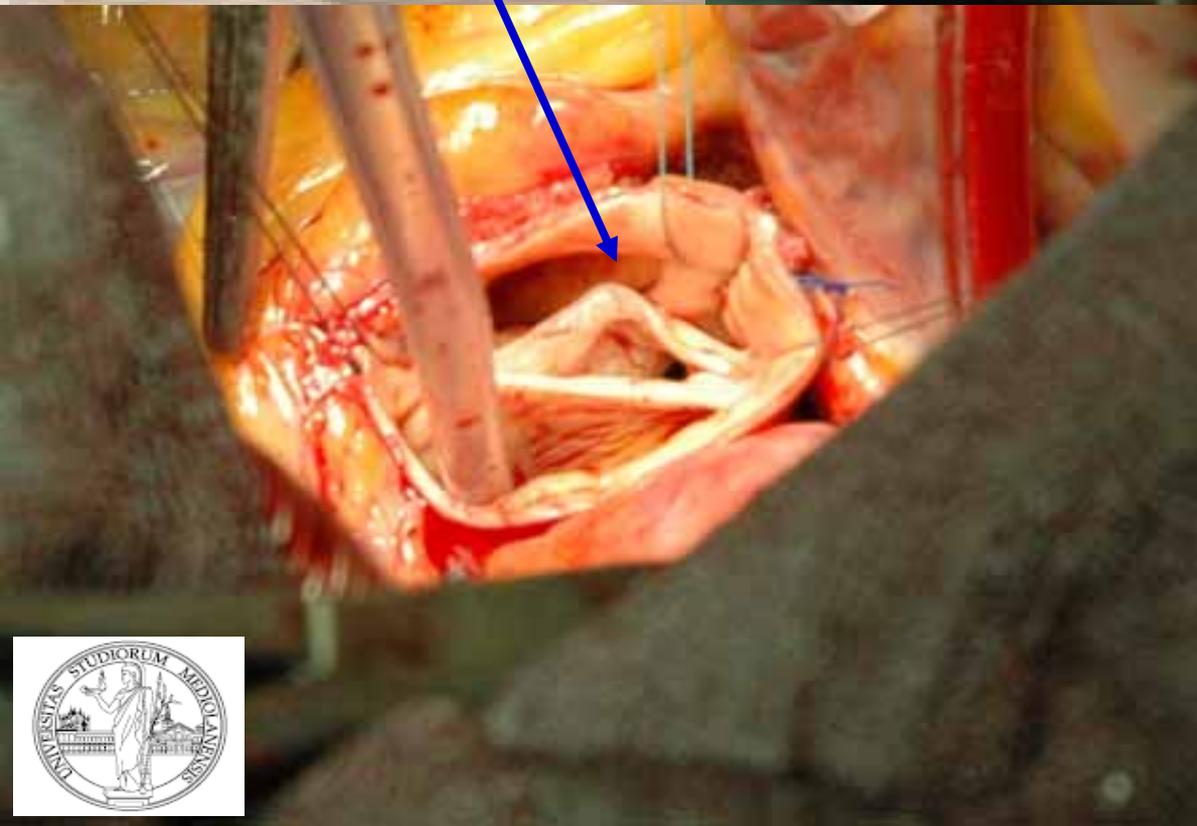
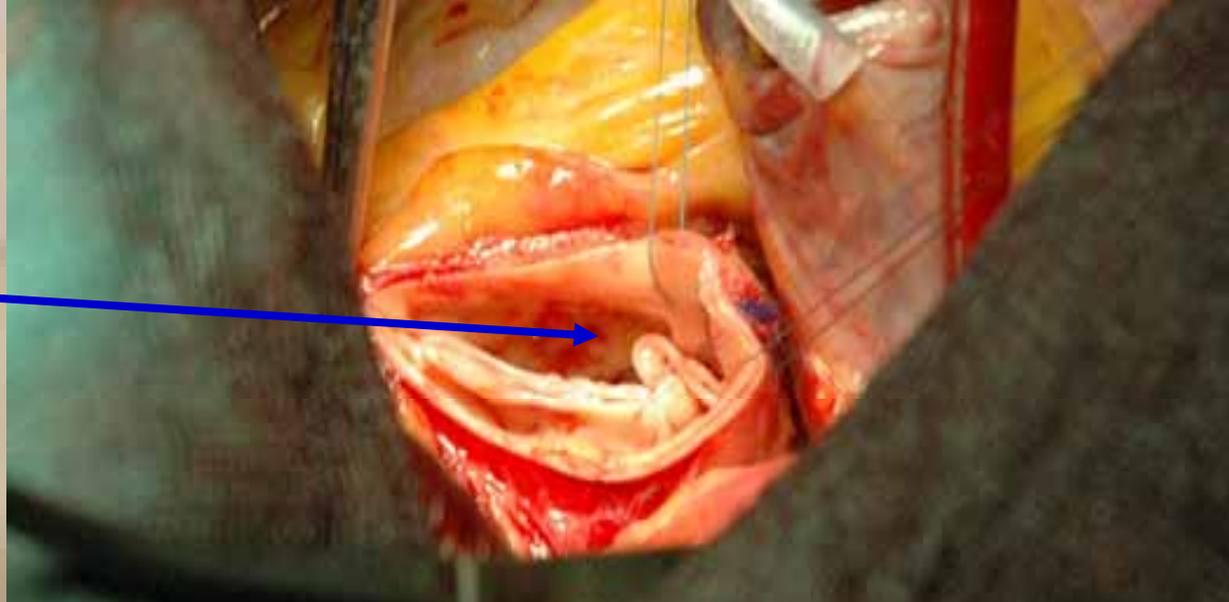


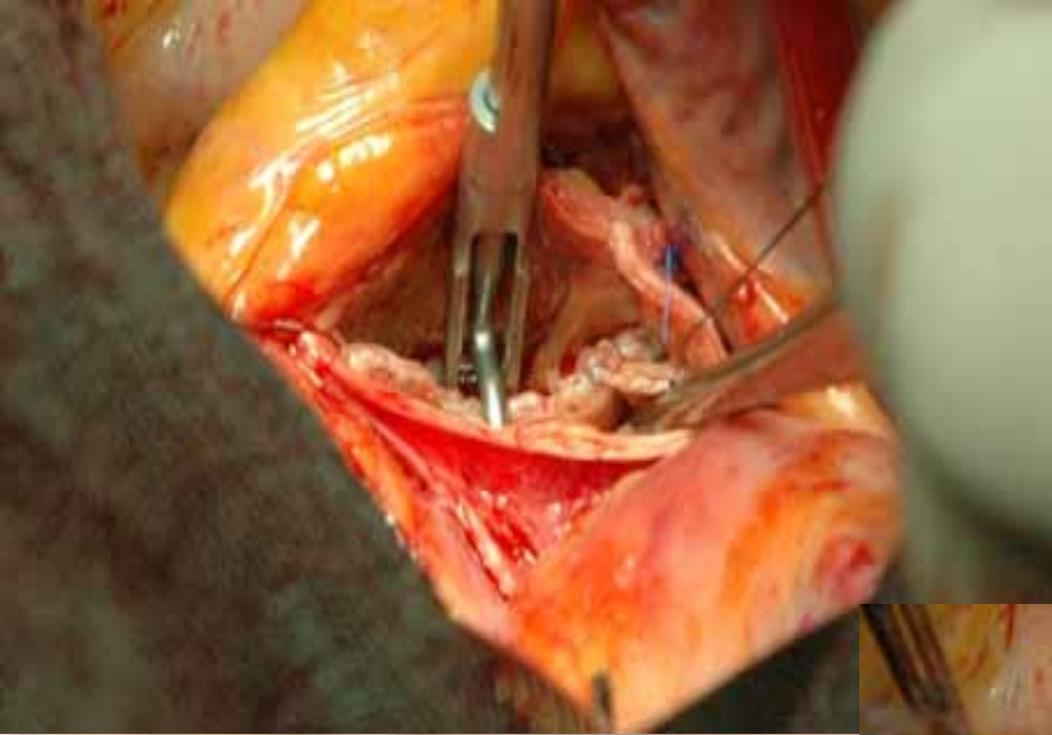


## NC SINUS REDUCTION

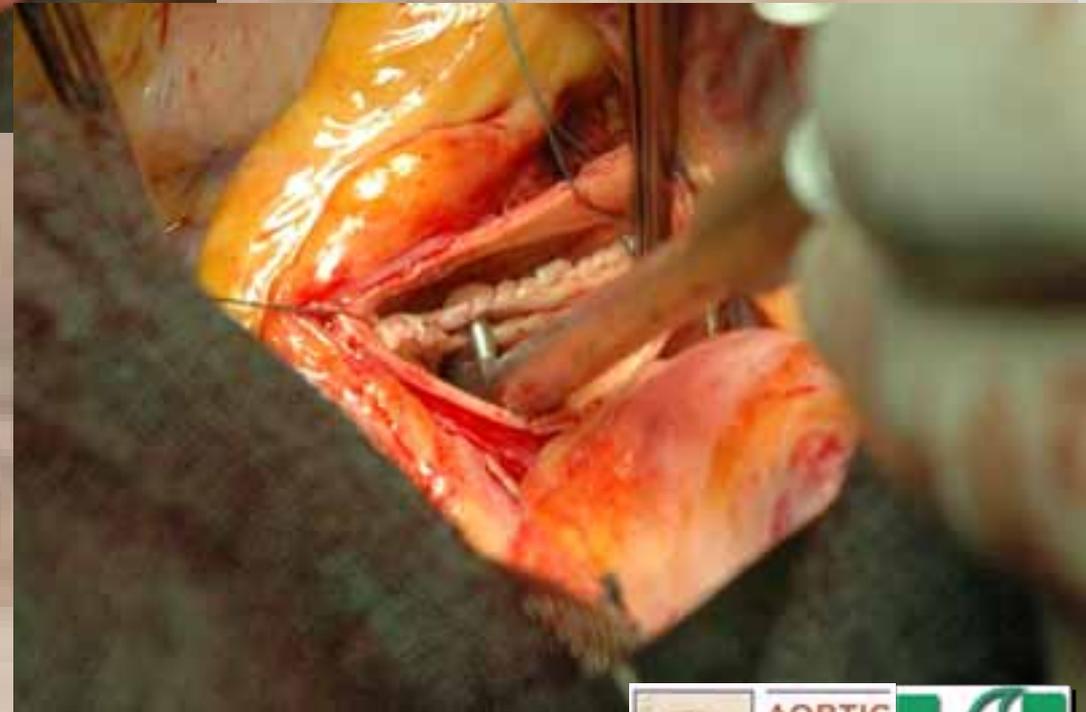


**Leaflet prolapse**





- Leaflet plicature
- Subcommissural annuloplasty
- Free margin reinforcement



Coaptation height  
measurement





## ASCENDING AORTA REPLACEMENT



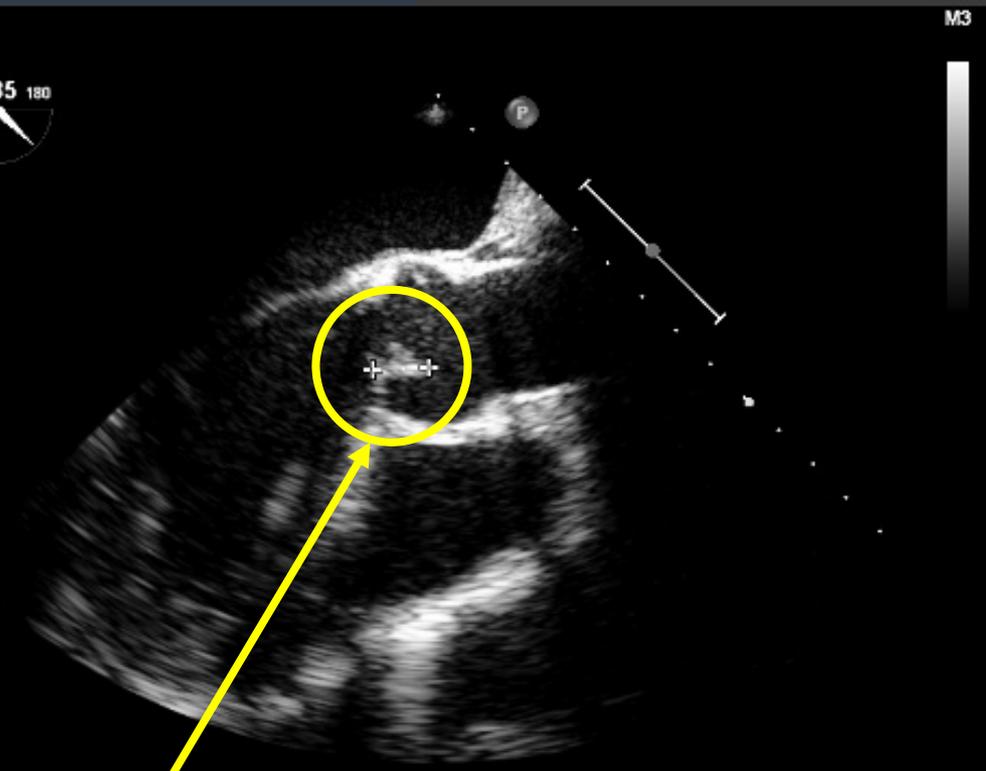
# FINAL RESULT



FR 49Hz  
14cm

M3

2D  
56%  
C 50  
P Off  
APen



Asc Ao=2.55 cm  
STJ=2.54 cm  
SoV=3.48 cm

27/01/2010 12:33:01 TISO.8 MI 1.1  
IRURGIA S7-2omni/Adulti

M3

PHILIPS .17 cm

\*\*\*bpm

CL=1.17 cm



Dist 2.55 cm  
Dist 2.54 cm  
PHILIPS .48 cm





M, 51 y (S.I.)  
Bicuspid aortic valve, severe AR.  
Ascending Aorta dilatation (45 mm)



FR 16Hz  
14cm

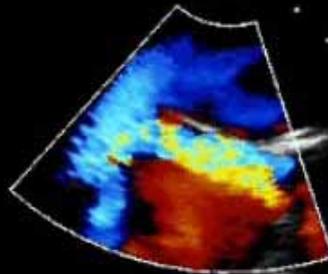
2D  
54%  
C 50  
P Off  
Gen  
CF  
70%  
4.9MHz  
WF Alto  
Med.



10/12/2007 15:27:34 TIS1.3 MI 0.7  
S7-2omni/ECOCAR D

JPEG  
\*\*\* bpm

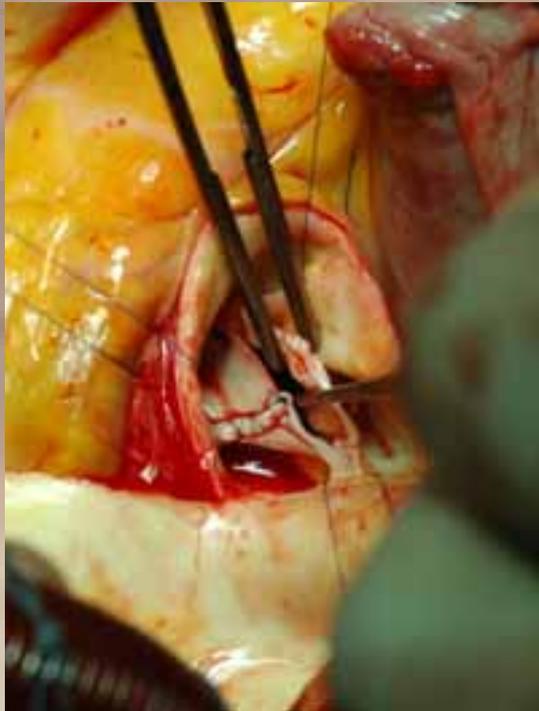
CF  
70%  
4.9MHz  
WF Alto  
Med.



 **AORTIC VALVE REPAIR** 



**Raphe resection**



**Patch repair**

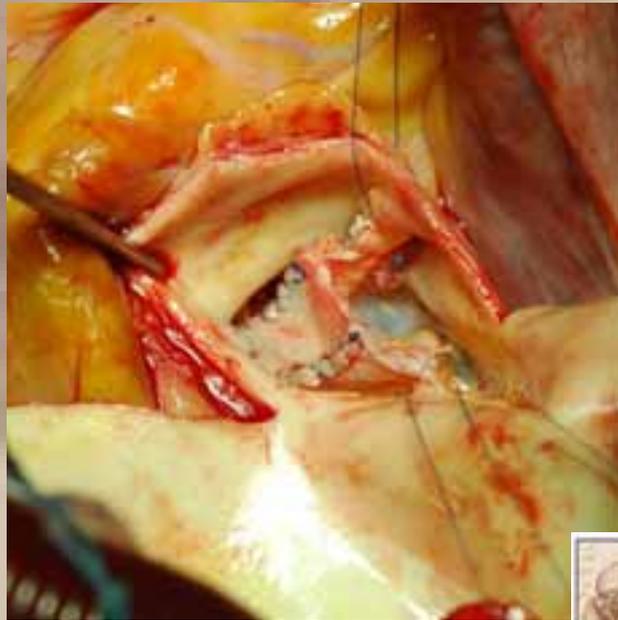




**Free margin shaving**



**CV 7 reinforcement**



**NC leaflet prolapse**



**Ascending Aorta replacement**





PHILIPS

10/12/2007 17:52:15 TIS1.2

S7-2omni/ECOCAR D

FR 53Hz  
13cm

2D  
54%  
C 50  
P Off  
Gen



G  
P R



JPEG

\*\*\* bpm



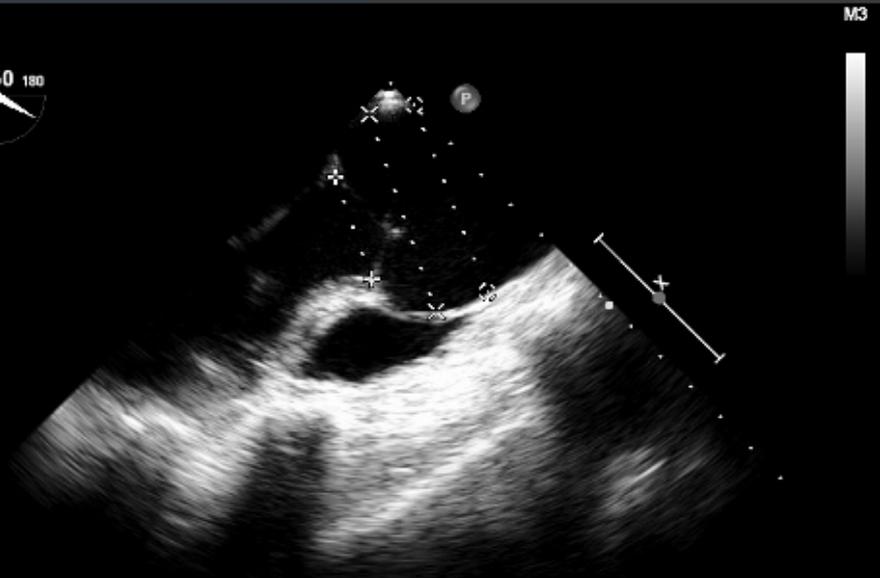
AORTIC  
VALVE  
REPAIR



F, 14 y (P.G.)  
Marfan, moderate AR  
Aortic root dilatation

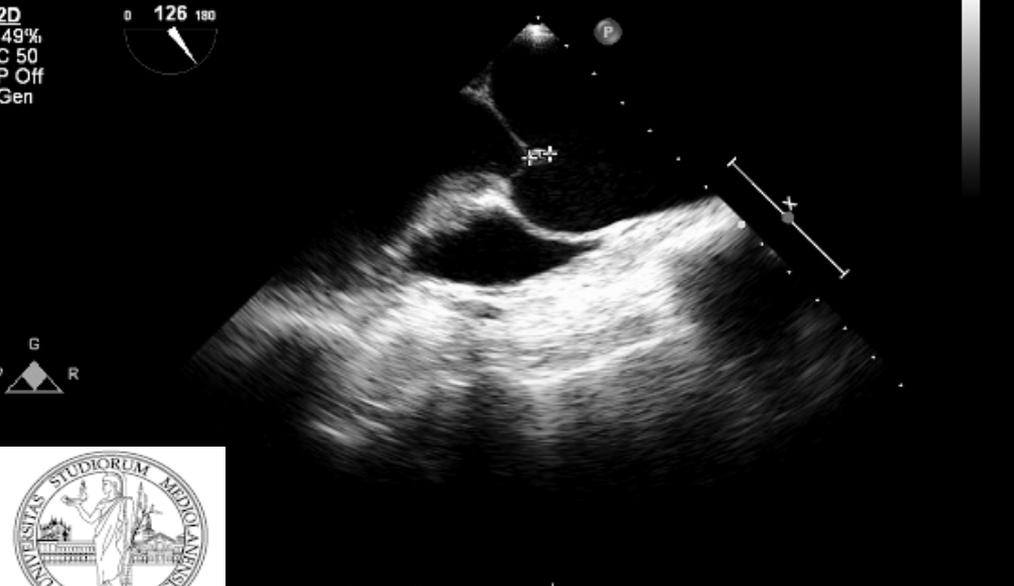
Asc Ao= 4 cm  
STJ=4.7 cm  
SoV= 4.9 cm  
Anulus= 2.5 cm

FR 39Hz  
14cm  
2D  
49%  
C 50  
P Off  
Gen



FR 39Hz  
14cm

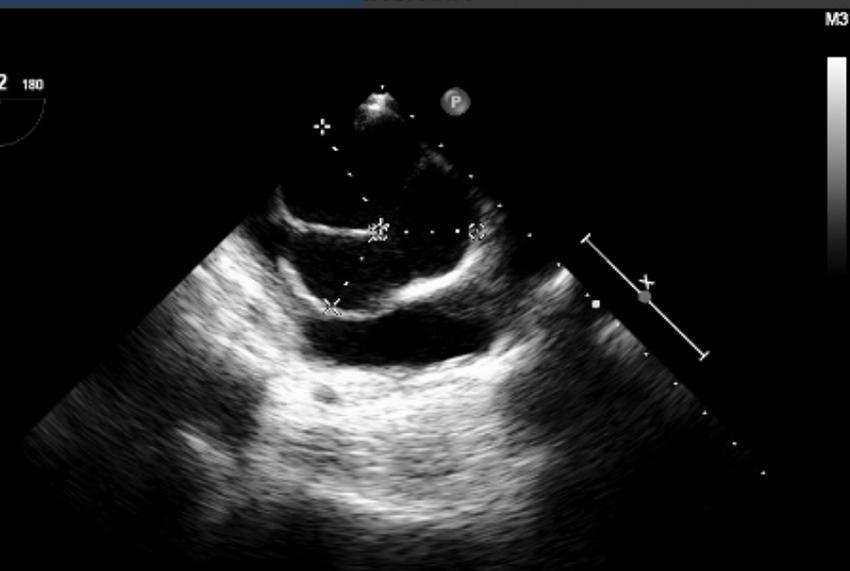
2D  
49%  
C 50  
P Off  
Gen



Aortic root:  
NC=2.77 cm  
LC= 2.31 cm  
RC=2.05 cm

FR 39Hz  
14cm

2D  
49%  
C 50  
P Off  
Gen



PHILIPS 10/24/2007 09:24:31 S7-2om

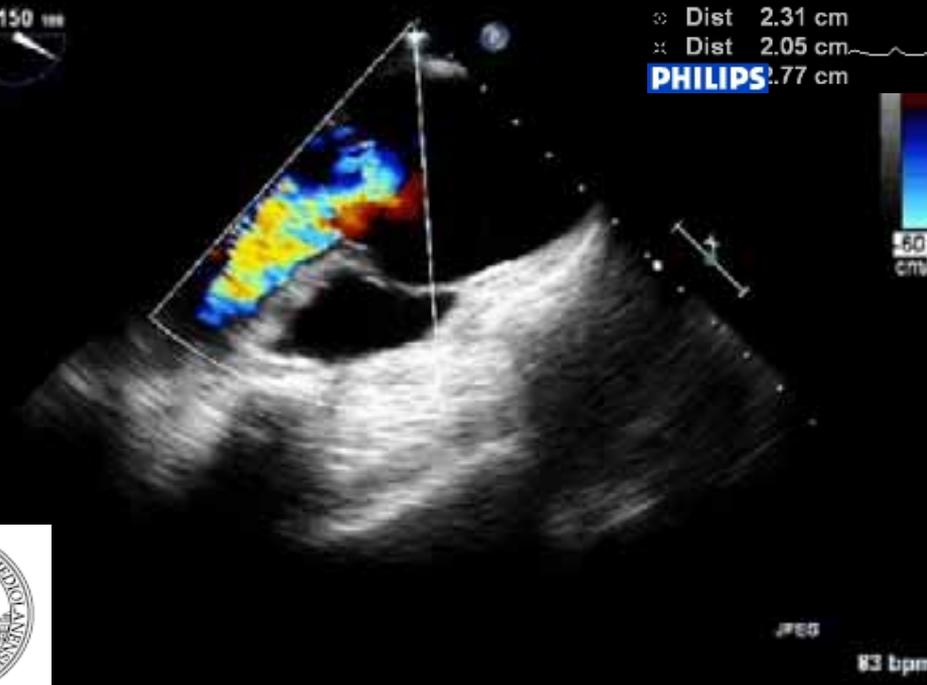
FR 21Hz  
13cm

2D  
53%  
C 50  
P Off  
Gen  
CF  
70%  
4.8MHz  
WF Allo  
Med.



o Dist 2.31 cm  
x Dist 2.05 cm  
**PHILIPS** .77 cm

212bpm



83 bpm



 **AORTIC VALVE REPAIR** 

FR 39Hz  
14cm

2D  
49%  
C 50  
P Off  
Gen



10/24/2007 09:18:40 TIS1.4 MI 0.7

S7-2omni/ECOCAR D



JPEG

117 bpm

Gen  
CF  
70%  
4.9MHz  
WF Auto  
Med.



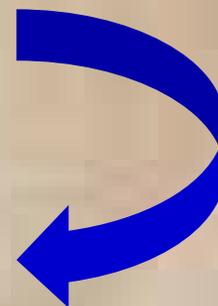
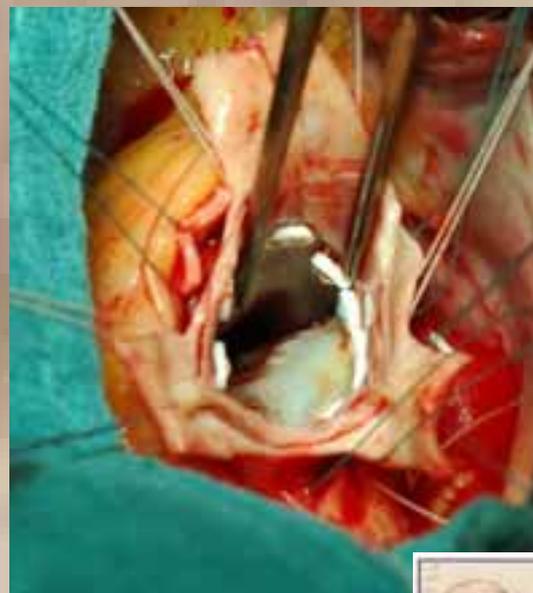
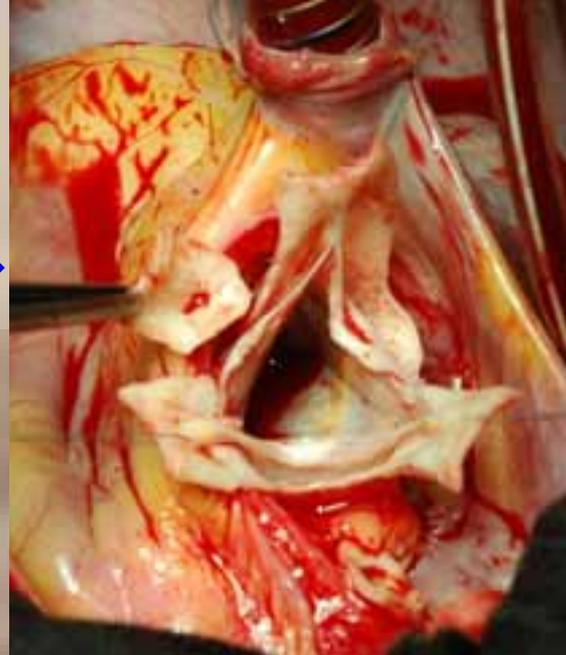
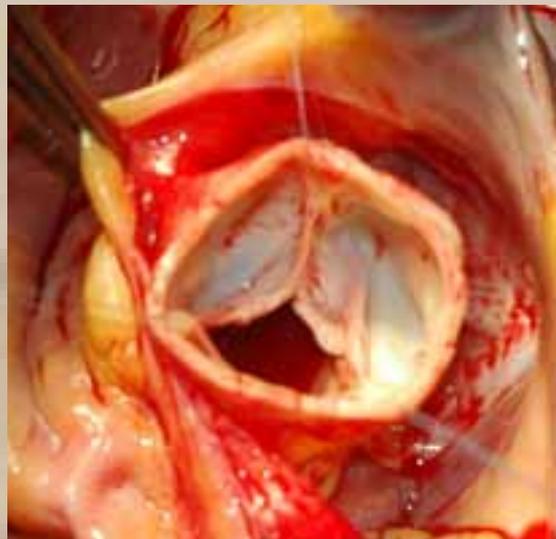
MO M4  
+61.6  
-61.6  
cm/s

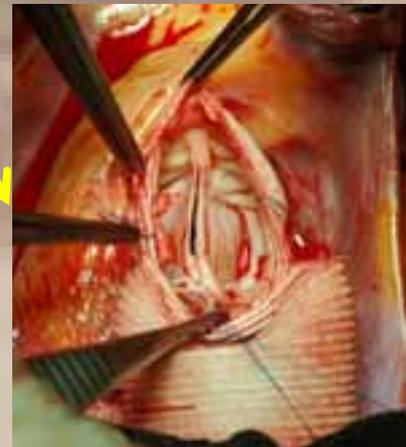
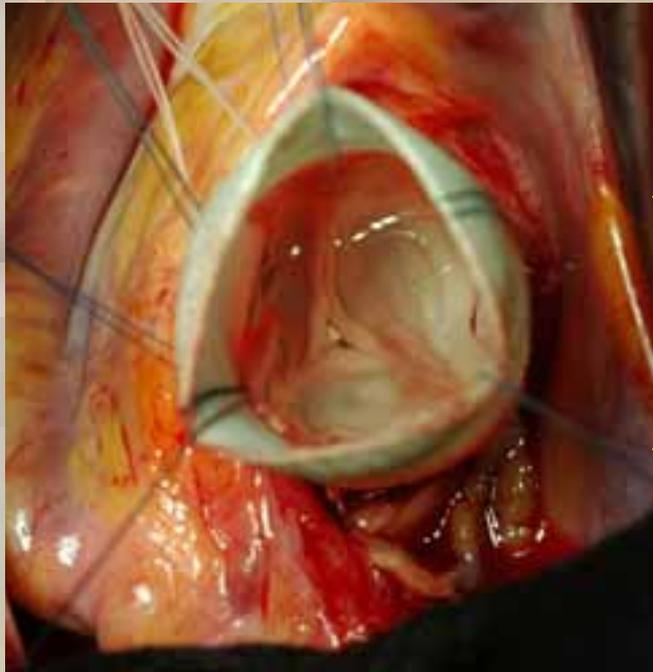


AORTIC  
VALVE  
REPAIR

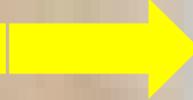


**TD I  
procedure**

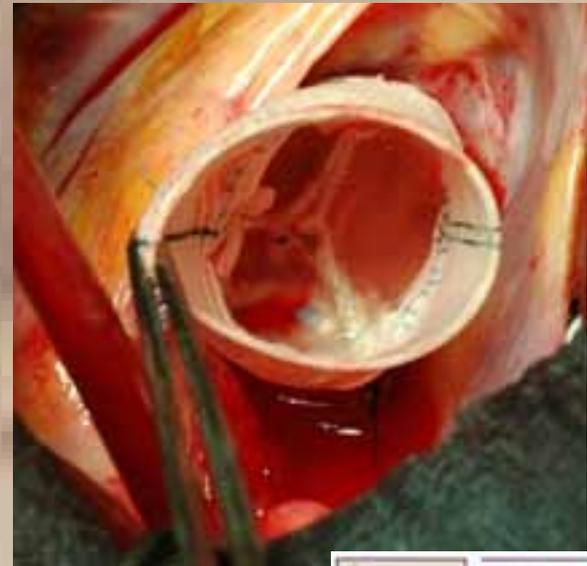
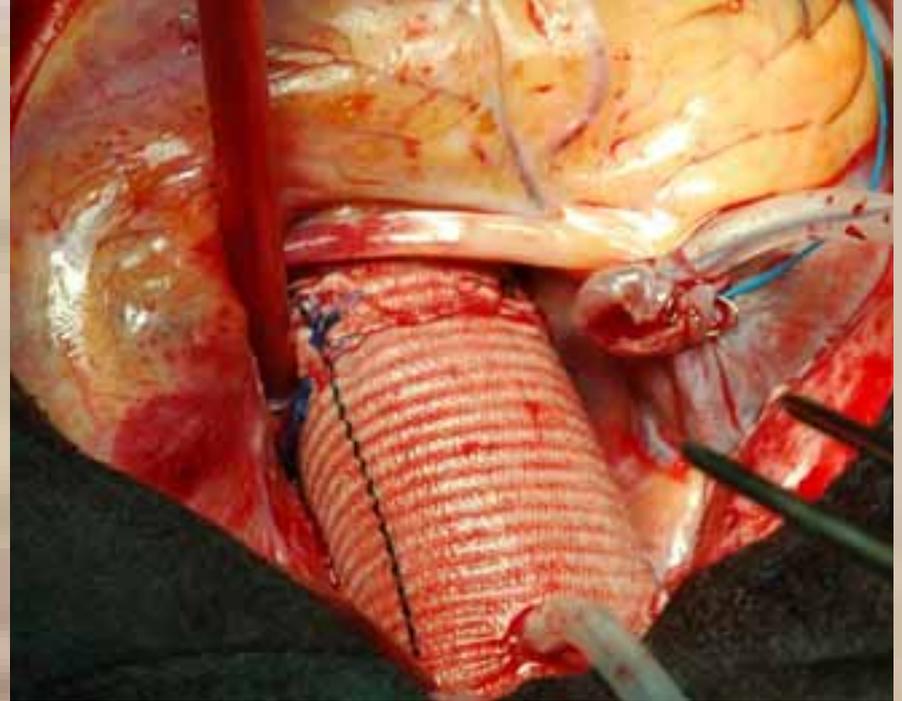




NC and LC  
leaflets prolapse



- NC leaflet plicature
- LC leaflet plicature
- Partial subcommisural annuloplasty (NC-LC triangle)



AORTIC  
VALVE  
REPAIR





PHILIPS POSTCEC (TYRON DAVID I)



PHILIPS POSTCEC (TYRON DAVID I)



AORTIC VALVE REPAIR



Asc Ao=2.8 cm  
Aortic root=1,95 cm

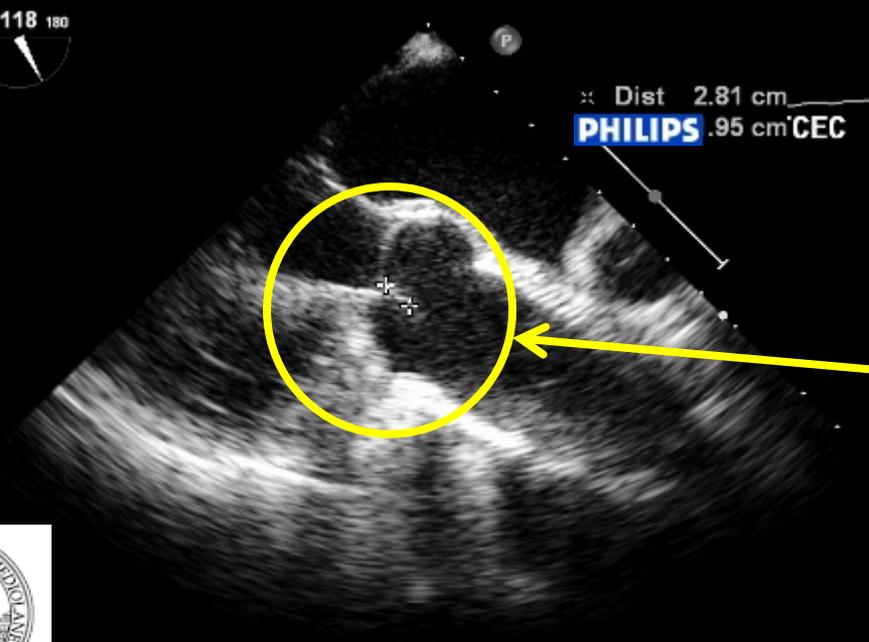
FR 39Hz  
11cm  
2D  
40%  
C 53  
P Off  
Gen



M3

FR 53Hz  
13cm

2D  
54%  
C 50  
P Off  
Gen



Dist 2.81 cm

PHILIPS .95 cm CEC (TYRON DAVID I)

106bpm

CL=0.83



AORTIC  
VALVE  
REPAIR



\*\*\*bpm

# CLINICAL FEATUES

	n°	%
n°	166	
Male	107	64,46%
Age	58,49	35,24%
Smoke	22	13,25%
History of familiar CAD	6	3,61%
CAD	26	15,66%
Hypercholesteremia	22	13,25%
Diabetes	3	1,81%
Hyperension	61	36,75%
COPD	10	6,02%
endocarditis	2	1,20%
Periferal vascular disease	10	6,02%
Cerebrovascular disease	11	6,63%
Previous AMI	2	1,20%
History of familiar Marfan Disease	8	4,82%
HIV	3	1,81%

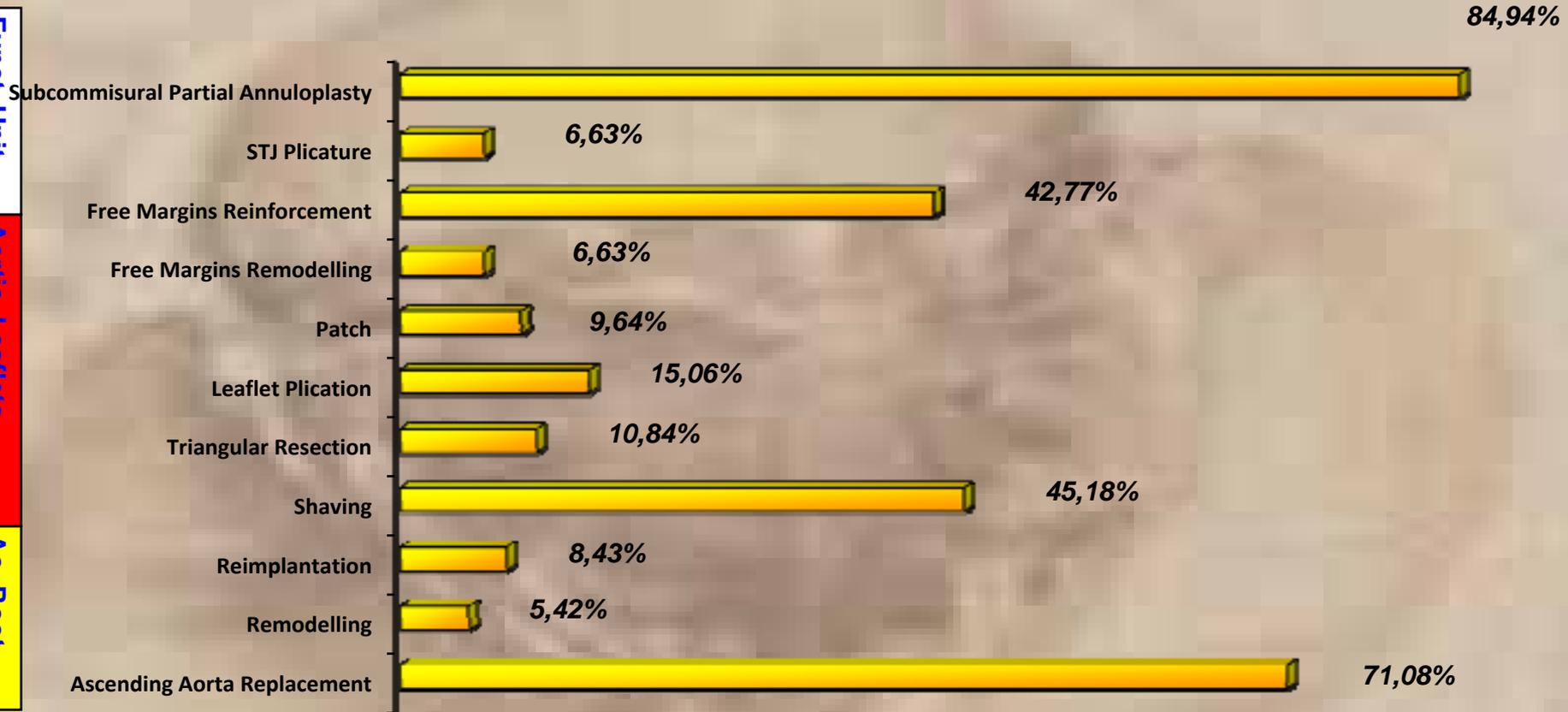


# SURGICAL RESULTS

Funct. Unit

Aortic. Leaflets

Ao. Root



# PERIOPERATIVE RESULTS

**MORTALITY**

**1/149(0.67%)**

**INTRAOPERATIVE CONVERSION**

**2/149(1.34%)**

**PRE-DISCHARGE REOPERATION**

**2/149(1.34%)**



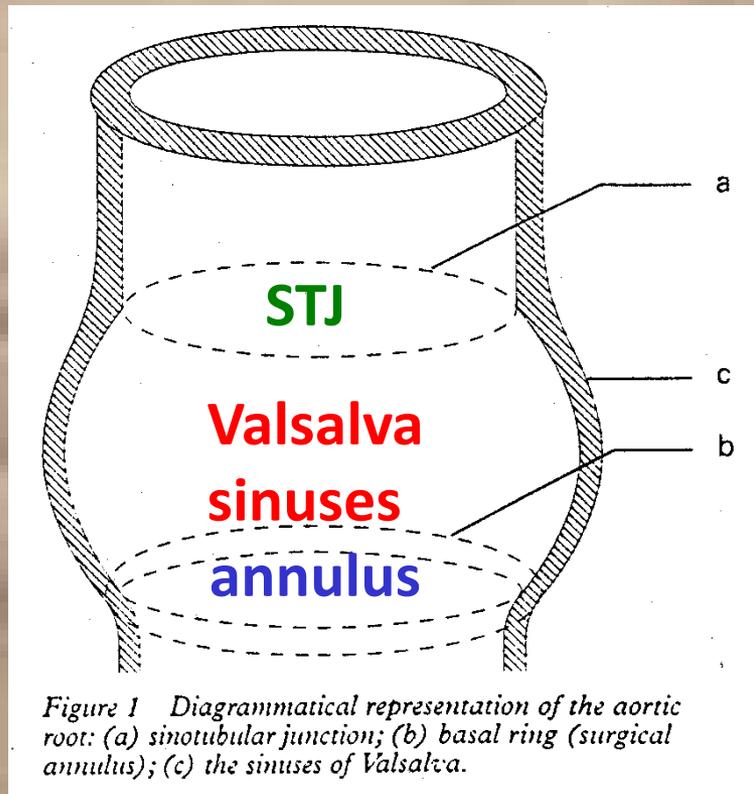
# AORTIC FUNCTIONAL UNIT DIAMETERS

**PRE-OP.**

42.1±7.74

44.4±12.02

24.9±2.32



**POST-OP.**

34.6±5.53mm ( $p \leq 0.01$ )

37.4±3.23mm ( $p \leq 0.01$ )

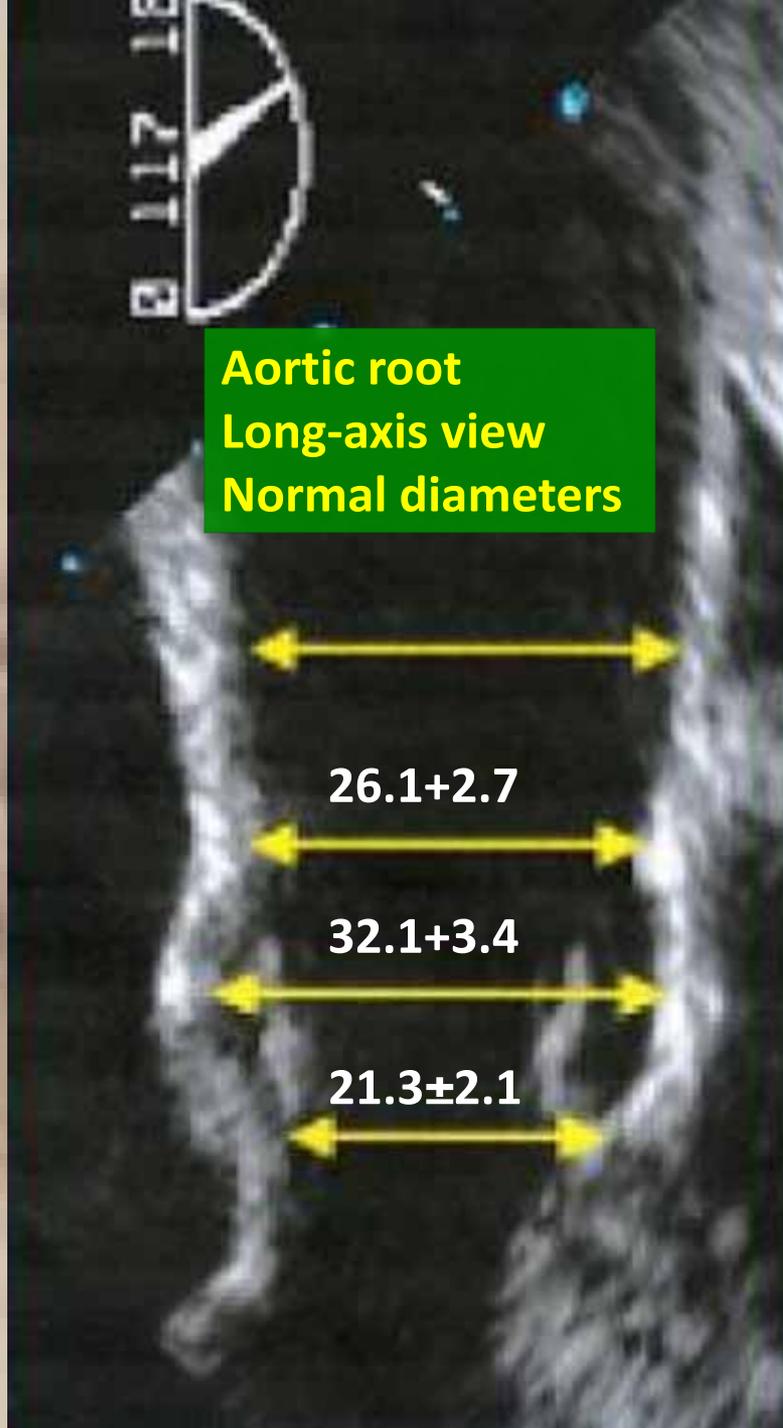
20.4±0.92mm ( $p \leq 0.01$ )

BT 211 B

**Aortic root  
Long-axis view  
Normal diameters**

**POST-OP.**

**34.6±5.53mm**  
**37.4±3.23mm**  
**20.4±0.92mm**

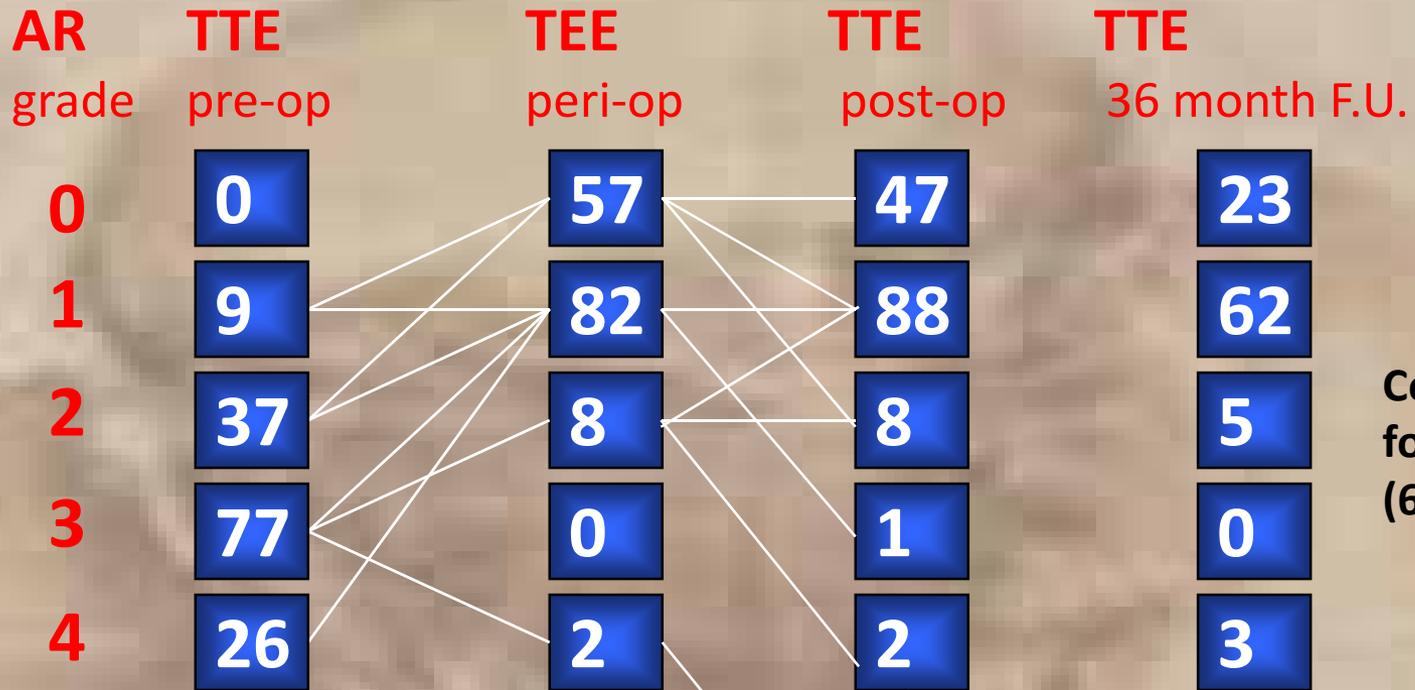


**36 MONTHS  
Follow-up**

**32.4±4.77mm**  
**35.7±4.69mm**  
**22.0±2.95mm**



# ECHO FOLLOW UP



Completed for 93 pts (62.4%)

INTRAOPERATIVE CONVERSION

PRE-DISCHARGE REOPERATION

Death

AVR

Free margins fibrosis

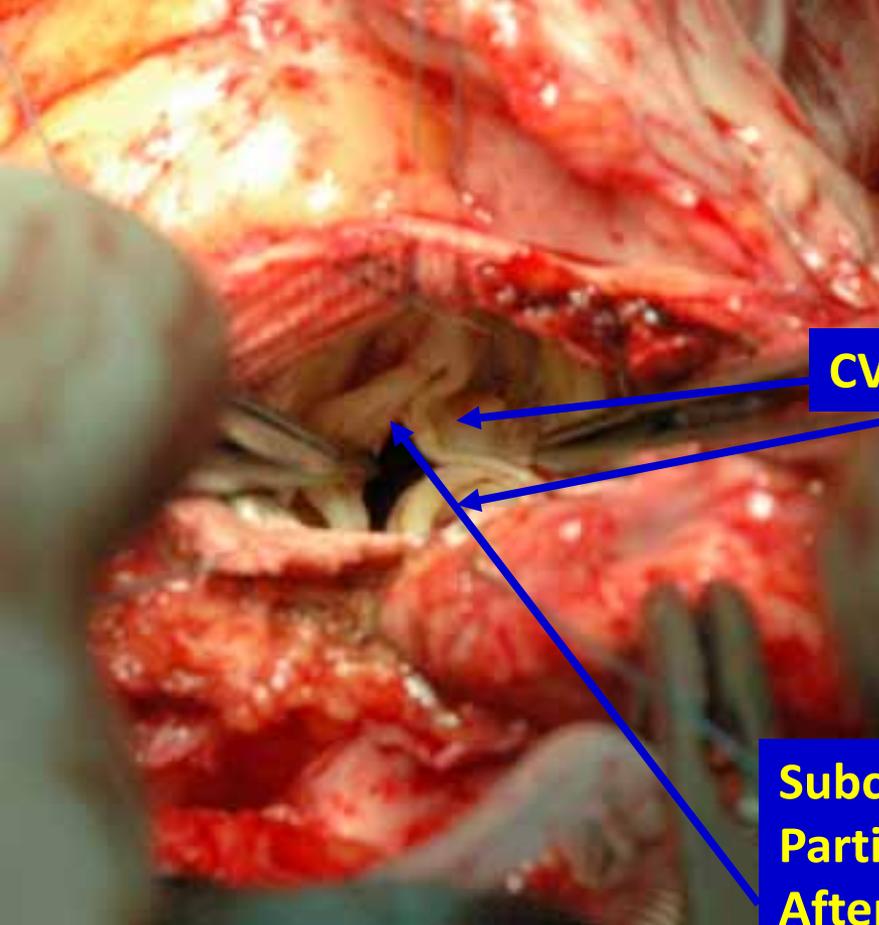
New repair due to suture dehiscence



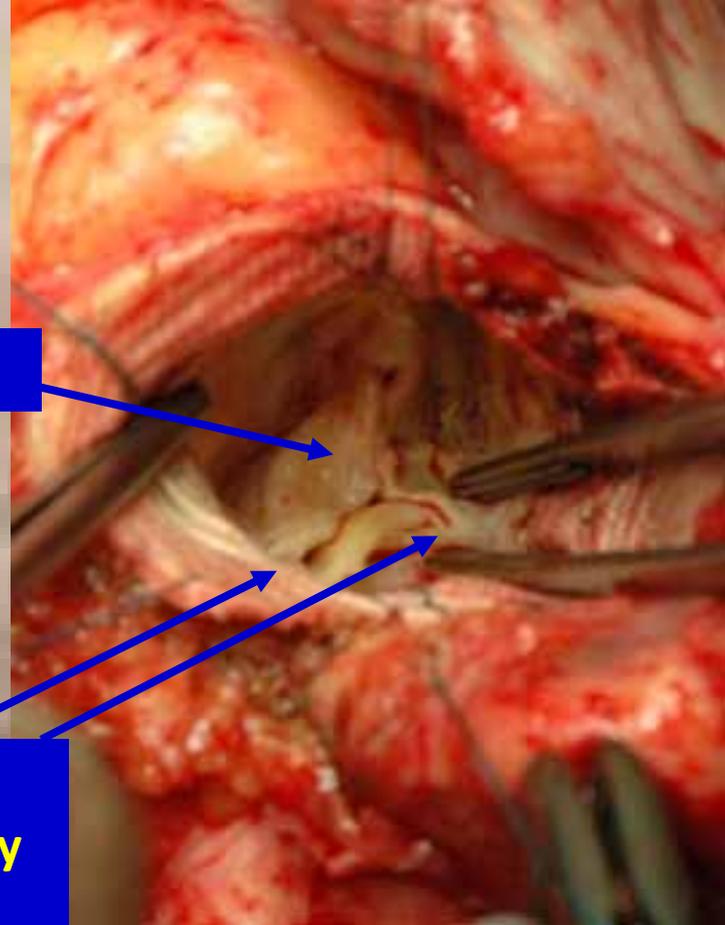
**CV-7 after 1year**

**Subcommissural  
Partial Annuloplasty  
After 1 year**





**CV-7 after 5 year**



**Subcommissural  
Partial Annuloplasty  
After 5 year**



# CONCLUSIONS

**Aortic repair solve the cause and effect of Ao regurgitation**

**Correction and stabilization of FAA**

**Correction of leaflet pathology**

**Reduction of dilatation of LV**

**New approach for surgeons**

**Functional classification**

**Learning curve**

**Knowledge Transfer**

**New approach for echocardiographist**

**New criteria for repair evaluation**

