

Kirurška zamjena aortne valvule uslijed stenozе aortne valvule na Odjelu kardiotorakalne kirurgije Kliničkog bolničkog centra Osijek od 2007. do 2016. godine

Aortic valve replacement due to aortic valve stenosis at the Department of Cardiothoracic Surgery in University Hospital Centre Osijek from 2007 to 2016

Iva Jurić¹,
 Hrvoje Roguljić^{1,2},
 Marko Stupin^{1,2},
 Ana Srnović²,
 Grgur Dulić¹,
 Kristina Selthofer-Relatić^{*1,2},
 Sandra Makarović^{1,2}

¹Klinički bolnički centar Osijek, Osijek, Hrvatska

²Sveučilište Josipa Jurja Strossmayera u Osijeku, Medicinski fakultet Osijek, Osijek, Hrvatska

¹University Hospital Centre Osijek, Osijek, Croatia

²Josip Juraj Strossmayer University of Osijek, Faculty of Medicine in Osijek, Osijek, Croatia

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***ADDRESS FOR CORRESPONDENCE:** Kristina Selthofer-Relatić, Klinički bolnički centar Osijek, J. Huttlera 4, HR-31000 Osijek, Croatia. / Phone: +385-31-511-717 / E-mail: selthofer.relati@gmail.com

ORCID: Iva Jurić, <http://orcid.org/0000-0002-0975-3039> · Hrvoje Roguljić, <http://orcid.org/0000-0002-3747-9305> · Marko Stupin, <http://orcid.org/0000-0001-7296-1669> · Ana Srnović, <http://orcid.org/0000-0001-8895-6215> · Grgur Dulić, <http://orcid.org/0000-0003-2295-3913> · Kristina Selthofer-Relatić, <http://orcid.org/0000-0002-9890-6489> · Sandra Makarović, <http://orcid.org/0000-0002-7487-1189>

UVOD: Kalcificirajuća stenozа aortne valvule je najčešći uzrok kirurške zamjene aortne valvule (AVR) u zapadnim zemljama, čija prevalencija raste s dobi, obuhvaćajući 2-3 % populacije u dobi do 65 godina. Do sada u Hrvatskoj nije formiran službeni registar pacijenata sa stenozom aortne valvule. Iznimno je važno prepoznati potrebu za odgovarajućim praćenjem postoperativnog stanja ovih pacijenata, uzimajući u obzir poteškoće i izazove koji se prepoznaju u svakodnevnom radu i praćenju ove skupine pacijenata.^{1,2}

PACIJENTI I METODE: Ovo istraživanje obuhvaća pacijente koji su podvrgnuti operativnom zahvatu zamjene aortne valvule uslijed simptomatske kalcificirajuće stenozе aortne valvule teškog stupnja u Kliničkom bolničkom centru Osijek u razdoblju od 2007. do 2016. godine.

REZULTATI: Rezultati prikazuju ukupan broj pacijenata kojima je učinjena kirurška zamjena aortne valvule, uz raspodjelu po spolu, dobi (**slika 1**), vrsti implantirane valvule (mehanička ili biološka; **slika 2**) te s obzirom na različite čimbenike i prisutnost fibrilacije atrija. Arterijska hipertenzija je statistički značajno učestaliji rizični čimbenik od ostalih, sa značajno većom prevalencijom u žena ($p < 0.001$). Prosječna dob muškaraca s implantiranom mehaničkom aortnom valvulom je 57 ± 8 , a žena 56 ± 9 godina, a broj muškaraca s mehaničkom aortnom valvulom je značajno veći ($p < 0.005$). Prosječna dob muškaraca s implantiranom biološkom aortnom valvulom je 71 ± 6 , a žena 71 ± 4 godina, s većim brojem žena u ovoj skupini ($p < 0.005$).

ZAKLJUČAK: Ovi podaci mogli bi predstavljati temelj budućeg registra pacijenata sa stenozom aortne valvule.

BACKGROUND: Calcific aortic valve stenosis is the most common cause of aortic valve replacement (AVR) in the Western world, and increases in prevalence with ageing, overtaking 2-3% of the population by the age of 65. So far, there is no official register of aortic valve stenosis patients in Croatia. It is very important to recognize the need to have proper follow up of these patients, considering difficulties and challenges that arise in the daily work with these patients and follow up.^{1,2}

PATIENTS AND METHODS: This study enrolled the patients undergoing aortic valve replacement due to symptomatic severe calcified aortic valve stenosis in University Hospital Centre Osijek, in the period from 2007 to 2016.

RESULTS: The data showed the overall number of patients underwent aortic valve replacement, distribution by gender, age (**Figure 1**), number of specific type of aortic valve prosthesis (mechanical or biological; **Figure 2**), risk factors and atrial fibrillation. Hypertension was shown to be significantly more frequent risk factor in these patients than other risk factors, where significantly higher prevalence of hypertension is in female group in the time of AVR any type ($p < 0.001$). Average age of male patients with mechanical AVR is 57 ± 8 and female 56 ± 9 years old, where number of male patients with mechanical AVR is significantly higher ($p < 0.005$). Average age of male patient with biological AVR is 71 ± 6 and female 71 ± 4 years old, where number of female patients in this group is higher ($p < 0.005$).

CONCLUSION: This data could present valuable basis for the future register of aortic valve stenosis patients.

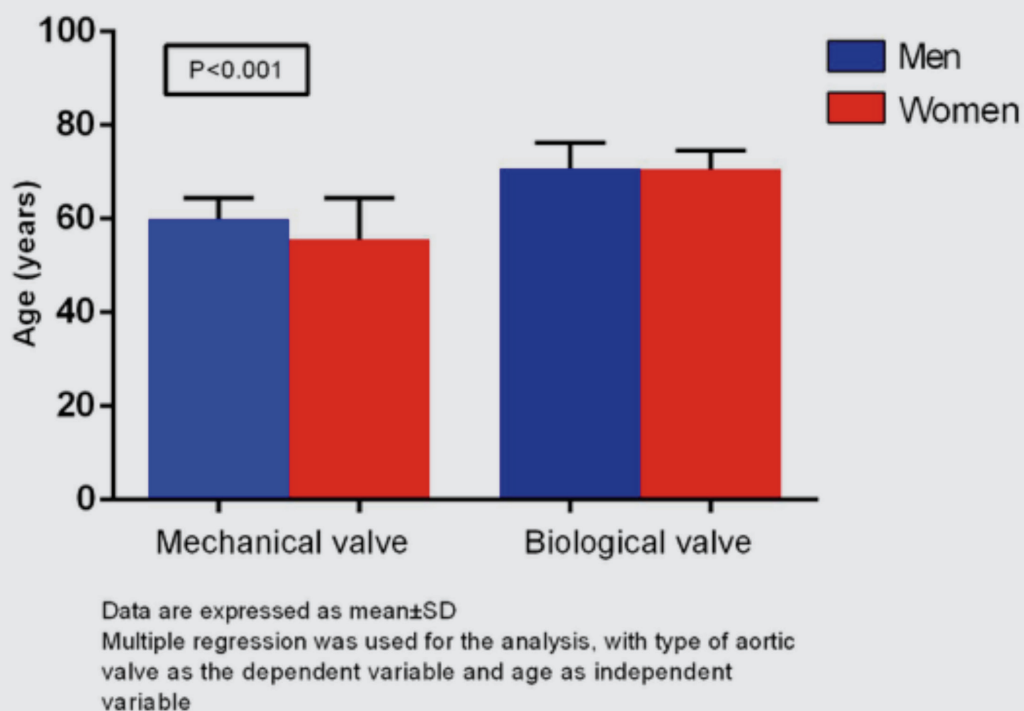


FIGURE 1. Distribution and correlation between age and type of implanted aortic valve.

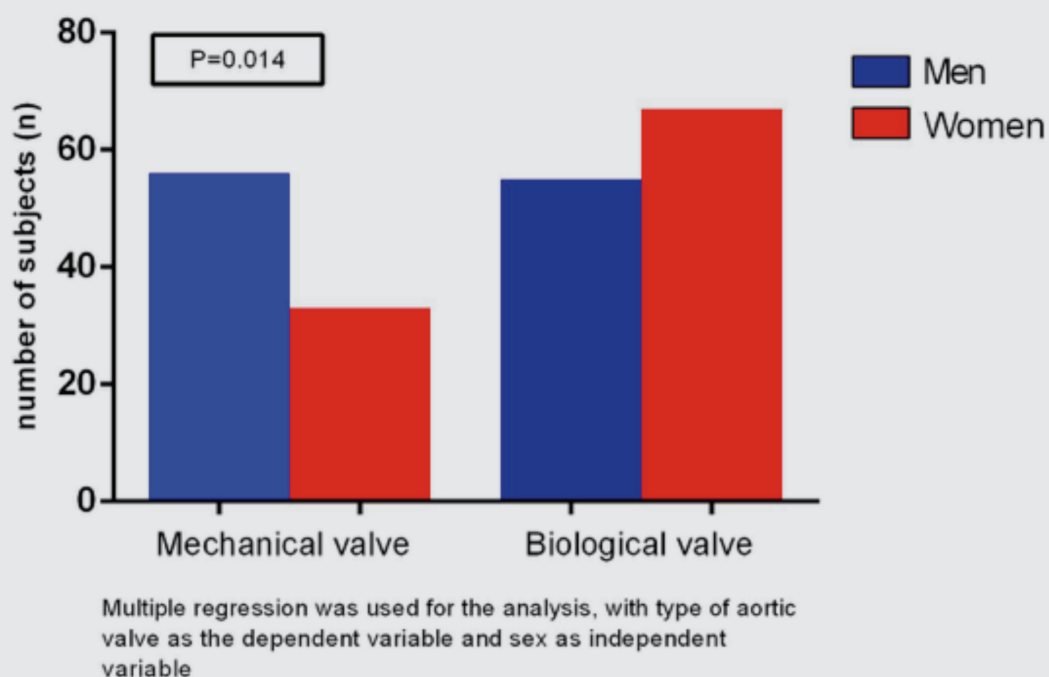


FIGURE 2. Distribution and correlation between sex and type of implanted valve.

LITERATURE

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