Results: E/A did not change significantly during exercise (20.8±5 vs 29.2±12 at rest; p>0.05). At rest, E/A at RV was <1.0 in all well-tolerated stress test correlated well with transpulmonary pressure gradient (r=0.41 and r=0.58, p<0.001). At peak exercise, E/A increased in 27 (8.4±8.9) patients and decreased (3.3±4.2) in the others. The mean systolic blood pressure was 197±98 mmHg during the initial exercise and 15±15 in the recorded staccato of 320±26 mms. The mean systolic pressure in the early stage of 1.2±1.0 to 1.4±2.0 mmHg, and the late staccato of 0.11±0.15 mmHg (septum; p< 0.001). For RV velocities, increased from 0.10±0.02 m/s to 0.78±0.03 m/s after surgery (p< 0.001). The E/A' did not significantly change during exercise (1.4±2.0 to 1.4±2.0 mmHg) and remained high in all patients (0.11±0.03 mmHg (septum; p< 0.001). For RV velocities, increased from 0.10±0.02 m/s to 0.78±0.03 m/s after surgery (p< 0.001). The E/A' did not significantly change during exercise (1.4±2.0 to 1.4±2.0 mmHg) and remained high in all patients (0.11±0.03 mmHg (septum; p< 0.001). For RV velocities, increased from 0.10±0.02 m/s to 0.78±0.03 m/s after surgery (p< 0.001). The E/A' did not significantly change during exercise (1.4±2.0 to 1.4±2.0 mmHg) and remained high in all patients (0.11±0.03 mmHg (septum; p< 0.001). For RV velocities, increased from 0.10±0.02 m/s to 0.78±0.03 m/s after surgery (p< 0.001). The E/A' did not significantly change during exercise (1.4±2.0 to 1.4±2.0 mmHg) and remained high in all patients (0.11±0.03 mmHg (septum; p< 0.001). For RV velocities, increased from 0.10±0.02 m/s to 0.78±0.03 m/s after surgery (p< 0.001). The E/A' did not significantly change during exercise (1.4±2.0 to 1.4±2.0 mmHg) and remained high in all patients (0.11±0.03 mmHg (septum; p< 0.001). For RV velocities, increased from 0.10±0.02 m/s to 0.78±0.03 m/s after surgery (p< 0.001). The E/A' did not significantly change during exercise (1.4±2.0 to 1.4±2.0 mmHg) and remained high in all patients (0.11±0.03 mmHg (septum; p< 0.001). For RV velocities, increased from 0.10±0.02 m/s to 0.78±0.03 m/s after surgery (p< 0.001). The E/A' did not significantly change during exercise (1.4±2.0 to 1.4±2.0 mmHg) and remained high in all patients (0.11±0.03 mmHg (septum; p< 0.001). For RV velocities, increased from 0.10±0.02 m/s to 0.78±0.03 m/s after surgery (p< 0.001). The E/A' did not significantly change during exercise (1.4±2.0 to 1.4±2.0 mmHg) and remained high in all patients (0.11±0.03 mmHg (septum; p< 0.001).