


eComment: Re: Is reduction aortoplasty (with or without external wrap) an acceptable alternative to replacement of the dilated ascending aorta?

Authors: Leo A. Bockeria, Bakoulev Scientific Center for Cardiovascular Surgery, Roublevskoye Sh 135, 121552 Moscow, Russia; Ivan I. Skopin, Vladimir A. Mironenko, Garik G. Aleksanyan

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We agree with the conclusion of Gill and Dunning that the use of an external wrap support in some patients with ascending aortic dilatation is a viable alternative [1].

We reviewed 142 patients undergoing aortic valve replacement with external wrap support in the last seven years. Ninety-five patients had bicuspid aortic valve with enlargement of the ascending aorta. Forty-seven patients had post-stenotic dilatation.

The primary intent of using the external wrap was to reduce the enlarged diameter of the ascending aorta and to prevent effusion of blood from aortotomy.

Mean age of patients was 54 ± 8.7. Preoperative diameter of ascending aorta was 45–60 mm; after surgery it was 35–42 mm. Reduction aortoplasty was performed in 20 patients. We used pericardial or dacron patch as a wrap tissue which was affixed on aortic root to the prosthetic valve.

There were no early postoperative complications attributed to the wrap support. At follow-up, there were no cases of migration of the patch or any re-enlargement of the aorta. Two patients were re-operated due to prosthetic endocarditis.

In our opinion, the external wrap support (with or without reduction aortoplasty) is useful either for reducing aortic dilatation (<60mm) or for hemostatic procedure after aortotomy.

Reference