How important is the size of the mitral ring?

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Congratulations to the authors for this study [1]. We benefited a lot from this report. But we want to put emphasis on some points that—we think—should be taken into consideration by the authors.

It was previously shown that increased annular diameter of the mitral valve affects left ventricular functions adversely [2]. Szalay et al. [3] indicated that a larger annuloplasty ring causes mitral regurgitation postoperatively. A study conducted by David et al. [4] compared flexible rings with rigid rings after equalizing the ring sizes. We think that the authors should equalize the ring sizes and ring types in order to obtain more scientific data.

REFERENCES


LETTER TO THE EDITOR RESPONSE

Reply to Yurekli et al.

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This is a response to the letter to the editor by Yurekli et al. [1], to the article by Hu X et al. [2]. We would like to thank Dr Yurekli for their appreciation involving in our contribution and further raising a constructive suggestion. We agree with them that increased annular diameter of the mitral valve is associated with deteriorated left ventricular functions. And we are aware of the fact that equalizing the ring sizes was not performed when comparing flexible ring with rigid ring. In fact, the size of annuloplasty ring dependent of mitral annulus is an indirect index representing the left ventricular geometry, which indeed stratifies risk in mitral regurgitation independently of, and more strongly than, mitral annulus or other potentially reversible risk factors. Then it is noted that the enrolled trials all balanced the patients’ baseline characteristics with no significance in the left ventricular end-diastolic diameter or left ventricular end-systolic diameter. In addition, it is infeasible to enroll selected patients in order to equalizing the ring sizes between the two groups in random control trials, which could violate the principle of randomization. At last, in the pooling assessment, the heterogeneity used to judge the consistency of evidence in left ventricular performance was not deemed significantly. Hence, we continue to maintain that our data are valid and scientific.