

Functional moderate mitral regurge in patients undergoing AVR

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Abstract:

Objectives: Functional Mitral regurgitation (MR) is common in patients with severe aortic pathology and can predispose to atrial fibrillation, heart failure, and a need for mitral valve surgery during aortic valve replacement (AVR). Coexistent mitral regurgitation may adversely influence both the morbidity and mortality in patients undergoing aortic valve replacement. It is accepted that concomitant mitral surgical intervention is required in severe, symptomatic mitral regurgitation. However, in cases of moderate non-structural mitral regurgitation, improvement may be seen following aortic valve replacement only, avoiding the increased risk of double valve surgery. The precise benefit of such a conservative approach is yet to be adequately quantified. In our study we used to compare results of mitral valve repair versus the conservative approach by leaving the mitral valve without intervention in patients with moderate functional mitral regurgitation in the setting of AVR.