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CLINICAL RESEARCH

Characteristics, aetiological spectrum and management of valvular heart disease in a Tunisian cardiovascular centre

Les particularités, le profil étiologique et la prise en charge des valvulopathies acquises dans un centre cardiovasculaire en Tunisie

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KEYWORDS

Valvular heart disease;
Cardiac surgery;
Heart valve;
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Summary

Background. – Valvular heart diseases occur frequently in Tunisia, but no precise statistics are available.

Aim. – To analyse the characteristics of patients with abnormal valvular structure and function, and to identify the aetiological spectrum, treatment and outcomes of valvular heart disease in a single cardiovascular centre in Tunisia.

Methods. – This retrospective study included patients with abnormal valvular structure and function, who were screened by transthoracic echocardiography at a single cardiology department between January 2010 and December 2013. Data on baseline characteristics, potential aetiology, treatment strategies and discharge outcomes were collected from medical records.

Results. – There were 959 patients with a significant valvular heart disease (mean age 53 ± 17 years; female/male ratio 0.57). Valvular heart disease was native in 77% of patients. Mitral stenosis was the most frequent lesion (44.1%), followed by multiple valve disease (22.3%).

Abbreviations: ARF, acute rheumatic fever; EHS, Euro Heart Survey; PBMV, percutaneous balloon mitral valvuloplasty; RHD, rheumatic heart disease; VHD, valvular heart disease.

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Rheumatic origin (66.6%) was the most frequent aetiology, followed by degenerative (17.2%) or ischaemic (8.1%) causes, endocarditis (1.4%) and congenital (0.9%) causes. Native valve disease was severe in 589 patients (61.4%). Percutaneous mitral balloon valvuloplasty was performed in 36.9% of patients with mitral stenosis. Among patients with severe valvular heart disease, surgical treatment was indicated for 446 (75.7%) patients. Only 161 (36.1%) patients were finally operated. Postoperative mortality was 13.6% for all valvular heart diseases.

Conclusion. – This retrospective study has shown that the main cause of valvular heart disease in Tunisia is rheumatic fever. Mitral stenosis and multiple valve disease are the most frequent valvular heart diseases in Tunisia. Percutaneous mitral balloon valvuloplasty and prosthetic valve replacement are the preferred treatment methods for valvular heart disease.

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MOTS CLÉS

Valvulopathies ;
Chirurgie valvulaire ;
Valve cardiaque ;
Valvulopathies
rhumatismales

Résumé

Contexte. – Les valvulopathies sont très fréquentes dans notre pays, la Tunisie, mais on manque d'études épidémiologiques qui précisent des statistiques exactes.

Objectifs. – Analyser les caractéristiques cliniques des patients atteints de valvulopathies et identifier les étiologies de ces valvulopathies ainsi que les modalités thérapeutiques proposées dans un centre de cardiologie en Tunisie.

Méthodes. – C'est une étude rétrospective monocentrique incluant tous les patients atteints de valvulopathies significatives confirmés par échocardiographie entre janvier 2010 et décembre 2013. Le recueil des données s'est fait à travers notre base de données informatisée.

Résultats. – Notre population est faite de 959 patients. L'âge moyen des patients était de 53 ± 17 ans, le sex-ratio est de 0,57. La majorité des patients avaient une valvulopathie native (77 %). Le rétrécissement mitral était la valvulopathie la plus fréquente (44,1 %), suivi par les valvulopathies multiples (22,3 %). L'origine rhumatismale était l'étiologie la plus fréquente (66,6 %), suivie par l'étiologie dégénérative dans 17,2 %, l'ischémique dans 8,1 %, l'endocardite infectieuse dans 1,4 % et l'origine congénitale dans 0,9 %. Les valvulopathies isolées étaient sévères chez 589 patients (61,4 %). La dilatation mitrale percutanée est réalisée dans seulement 36,9 % des cas de rétrécissement mitraux Parmi les patients ayant une valvulopathie sévère, le traitement chirurgical était indiqué chez 446 patients (75,7 %). Seulement 161 patients (36,1 %) ont été finalement opérés. La mortalité postopératoire était de 13,6 %, toutes valvulopathies confondues.

Conclusion. – La cause majeure de valvulopathies dans notre contexte est rhumatismale. Le rétrécissement mitral et les valvulopathies multiples sont les valvulopathies les plus fréquentes en Tunisie. La dilatation mitrale percutanée et le remplacement valvulaire ont été les moyens thérapeutiques de choix dans notre série.

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Background

Valvular heart diseases (VHDs) are the most common causes of mortality and morbidity after coronary artery disease, hypertension and heart failure [1]. The prevalence of VHD is 2.5% in developed countries [2]. In developing countries, rheumatic heart disease (RHD) is the primary cause of VHD [3].

Echocardiography is one of the most effective means of assessing valvular structure and function, and is widely used for VHD screening in clinical practice; it can provide helpful information regarding the aetiology of valvular disorders [4]. No echocardiographic study of VHD has been done in Tunisia or North Africa. The objective of the present study

was to analyse the characteristics, aetiological spectrum and management of VHD as assessed by echocardiography, in a contemporary series from Tunisia.

Methods

Study design

This retrospective study was conducted in the Department of Cardiology of Hédi Chaker University Hospital, one of the major cardiac referral centres in Tunisia. The hospital receives referrals from other health institutions for the investigation and/or management of suspected heart

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