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Congenital Heart Disease (CHD)

1230 Is cardiac diagnosis a predictor of neurodevelopmental outcome after cardiac surgery in infancy?

J. William Gaynor, MD, Marsha Gerdes, PhD, Alex S. Nord, BA, Judy Bernbaum, MD, Elaine Zackai, MD, Gil Wernovsky, MD, Robert R. Clancy, MD, Patrick J. Heagerty, PhD, Cynthia B. Solot, MA, CCC, Donna McDonald-McGinn, MS, CGC, and Gail P. Jarvik, MD, PhD, Philadelphia, Pa, and Seattle, Wash

Mean scores for neurodevelopmental outcomes domains tested are in the normal range for preschool children with no recognized genetic syndromes after surgery for ventricular septal defect, tetralogy of Fallot, transposition of the great arteries, and hypoplastic left heart syndrome. Unadjusted neurodevelopmental outcomes for hypoplastic left heart syndrome are lower for cognition, fine motor skills, executive function, and math skills compared with the other patients. After correction for demographic, preoperative, and operative variables, there were no significant differences among groups for any domain.

Surgical repair of congenital mitral valve malformations in infancy and childhood: A single-center 36-year experience



Giovanni Stellin, MD, Massimo A. Padalino, MD, PhD, Vladimiro L. Vida, MD, PhD, Giovanna Boccuzzo, MPH, Emanuele Orrù, MD, Roberta Biffanti, MD, Ornella Milanesi, MD, and Alessandro Mazzucco, MD, Padua and Verona, Italy

Clinical results and predictors of outcome of surgical repair of congenital mitral valve dysplasia were analyzed. Ninety-three consecutive patients underwent successful mitral repair with good early mortality and reoperation rates. At a mean follow-up of 10.3 years, the durability of mitral repair is independent from coexistence of associated cardiac anomalies.

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1245 Prenatal diagnosis and risk factors for preoperative death in neonates with single right ventricle and systemic outflow obstruction: Screening data from the **Pediatric Heart Network Single Ventricle Reconstruction Trial**

Andrew M. Atz, MD, Thomas G. Travison, PhD, Ismee A. Williams, MD, MS, Gail D. Pearson, MD, ScD, Peter C. Laussen, MBBS, William T. Mahle, MD, Amanda L. Cook, MD, Joel A. Kirsh, MD, Mark Sklansky, MD, Svetlana Khaikin, RN, MPH, Caren Goldberg, MD, Michele Frommelt, MD, Catherine Krawczeski, MD, Michael D. Puchalski, MD, Jeffrey P. Jacobs, MD, Jeanne M. Baffa, MD, Jack Rychik, MD, and Richard G. Ohye, MD, for the Pediatric Heart Network Investigators, Charleston, SC; Watertown and Boston, Mass; New York, NY; Bethesda, Md; Atlanta, Ga; Winston-Salem, NC; Toronto, Ontario, Canada; Los Angeles, Calif; Ann Arbor, Mich; Milwaukee, Wis; Cincinnati, Ohio; Salt Lake City, Utah; St. Petersburg, Fla; Wilmington, Del; and Philadelphia, Pa

The incidence of prenatal diagnosis and risk factors for preoperative death were investigated among 906 infants with hypoplastic left heart syndrome or related lesions. Prenatal diagnosis occurred in 75%; major congenital anomalies were less common among those. Preoperative death was independently associated with preterm birth, obstructed pulmonary venous return, and extracardiac major congenital abnormalities.

Histomorphometric analysis of intrapulmonary vessels in patients undergoing bidirectional Glenn shunt and total cavopulmonary connection A

Ujjwal K. Chowdhury, MCh, Diplomate NB, Raghu M. Govindappa, MS, Prasenjit Das, MD (Pathol), Ruma Ray, MD (Pathol), FRC (Path), Mani Kalaivani, MSc (Biostatistics), and Srikrishna M. Reddy, MCh, New Delhi, India

Histomorphometric examination of specimens of lung from 44 patients undergoing univentriculartype repairs revealed severe intimal lesions, thrombus, abnormal smooth muscle extension, and a lower mean indexed area of the intrapulmonary arteries in patients with low Nakata index with poor postoperative outcome.

1257 Circulating matrix metalloproteinase levels after ventricular septal defect repair in infants

Tim C. McQuinn, MD, Rachael L. Deardorff, Rupak Mukherjee, PhD, Anna Greta B. Taylor, MD, Eric M. Graham, MD, Andrew M. Atz, MD, Geoffrey A. Forbus, MD, Stacia M. DeSantis, PhD, Jennifer B. Young, Robert E. Stroud, MS, Fred A. Crawford, MD, Scott M. Bradley, MD, Scott T. Reeves, MD, and Francis G. Spinale, MD, PhD, Charleston, SC

Surgery for congenital heart disease initiates a complex inflammatory response that can influence the postoperative course. The present study profiled a large array of cytokines and matrix metalloproteinases after ventricular septal defect repair and demonstrated significant relationships between changes in bioactive molecules to early postoperative outcomes. Specific patterns of cytokine and matrix metalloproteinase release may hold significance as biomarkers for predicting and managing the postoperative course after surgery for congenital heart disease.

General Thoracic Surgery (GTS)

1266 A comprehensive evaluation for aspiration after esophagectomy reduces the incidence of postoperative pneumonia

Mark F. Berry, MD, B. Zane Atkins, MD, Betty C. Tong, MD, David H. Harpole, MD, Thomas A. D'Amico, MD, and Mark W. Onaitis, MD, Durham, NC

Esophagectomy is often associated with postoperative aspiration. In this review of 799 patients undergoing esophagectomy, the incorporation of a routine comprehensive swallowing evaluation to detect aspiration before diet advancement was associated with a significant decrease in the incidence of pneumonia.

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