


# Patent foramen ovale closure – Zadar General Hospital experience

 **Mira Stipcevic**\*,  
 **Marin Bistirlic**,  
 **Zoran Bakotic**,  
 **Drazen Zekanovic**,  
 **Jogen Patrk**,  
 **Karla Grgic**,  
 **Zorislav Susak**,  
 **Karla Savic**,  
 **Nikola Verunica**

Zadar General Hospital, Zadar,  
Croatia

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**\*ADDRESS FOR CORRESPONDENCE:** Mira Stipčević, Opća bolnica Zadar, Bože Peričića 5, HR-23000 Zadar, Croatia. /  
Phone: +385-98-593-416 / E-mail: [mira.stipcevic@gmail.com](mailto:mira.stipcevic@gmail.com)

**ORCID:** Mira Stipcevic, <https://orcid.org/0000-0003-4351-1102> • Marin Bistirlic, <https://orcid.org/0000-0002-9213-4174>  
Zoran Bakotic, <https://orcid.org/0000-0002-7095-0111> • Drazen Zekanovic, <https://orcid.org/0000-0002-8147-6574>  
Jogen Patrk, <https://orcid.org/0000-0002-8165-692X> • Karla Grgic, <https://orcid.org/0000-0003-3512-9472>  
Zorislav Susak, <https://orcid.org/0000-0002-2417-2494> • Karla Savic, <https://orcid.org/0000-0002-1339-8922>  
Nikola Verunica, <https://orcid.org/0000-0003-2480-9106>

**Introduction:** Patent foramen ovale (PFO) is a vestigial congenital cardiovascular structure present in around 25% of adults. In most cases, PFO is entirely benign and requires no treatment. The most well-established complication of PFO is stroke, defined as an ischemic stroke in the presence of a PFO and no other identified likely cause, but it has also been associated with other adverse neurological and embolic events. PFO may be treated with blood thinning medication alone, or with a percutaneous procedure to close the PFO and medication.<sup>1</sup>

**Methods and Results:** Closure of a patent foramen ovale (PFO) has been shown to reduce the risk of recurrent stroke in selected patients. From December 2019 till February 2023, 26 patients were selected for PFO closure procedure in Zadar General Hospital. For 25 patients indication was cryptogenic stroke and one patient was professional scuba diver with repetitive decompression illness and evident PFO. All patients were screened for atrial fibrillation and thrombophilia. Mean age was 44.3 (25-70) and 52% were female. Risk of Paradoxical Embolism (RoPE) Score has been calculated for each patient and mean was 7.64. PFO closure was performed with Amplatzer devices in deep sedation with 3D transesophageal control. There were no periprocedural and follow up complications.

**Conclusion:** With good patient selection, transcatheter PFO closure significantly reduces the risk of recurrent stroke compared with medical therapy in patients with cryptogenic stroke, with no increased risk of serious adverse events or influence on major bleeding.

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## LITERATURE

1. Dia A, Cifu AS, Shah AP. Management of Patients With a Patent Foramen Ovale With History of Stroke or TIA. *JAMA.* 2021 Jan 5;325(1):81-82. <https://doi.org/10.1001/jama.2020.22176>