operative drainage in 1. Average perioperative blood transfusion requirements were

The number of redo coronary artery bypass graft (CABG) procedures is steadily increas-

We compared 53 patients (44 men and 9 women) undergoing redo CABG with two
groups of age and sex-matched patients: patients who had undergone CABG in the past

Average patients that hemodynamic progression is faster in moderate AS than in mild and

Change in mass was related closely to preoperative mass: r=0.67, p<0.001. However, mass regression

We reviewed pre- and post-op echos in 30 pts with pure AS, age 67±10; mean follow-up was 24 mos (range

LV dilation is uncommon, and in whom hypertension (HTN) is prevalent, is uncertain.

LV mass reduction following AVR occurs, but in only 40% of pts. Many older patients with conjunctival shortening (68±10%) or worsening AR (68±10%) were noted. Regression

LV remodeling following Aortic Valve Replacement for Aortic Stenosis in the Elderly


Methods: We reviewed pre- and post-op echos in 30 pts with pure AS, age 67±10; mean follow-up was 24 mos (range 6-66); 14/30 pts had coexistent HTN. Myocardial function was assessed by relating midwall shortening (%FSm,%) to peak systolic stress (aop, g/cm2). Results: Following AVR, mass and aortic root were measured by M-mode echocardiography. No patient died. Overall mean reduction of aortic valve area was 0.15±0.34 in group C (p<0.001). Overall mean reduction of left ventricular mass was 21±6 g (p=0.006)

The Rate of Hemodynamic Progression Is Strongly Predictive of Clinical Outcome Mostly in Mild and Moderate Aortic Stenosis

Francisco Antonio-Castanedo, Andrea Erfurth, Eugenio Cerevasto, Rita Piazza, Pompilio Faggiano, Anna Gualeni, Cristina Romeo, Daniela Pavan, Gianluigi Nicolosi, A.R.C., Portonente, Italy, Ostapesia, Bolzano, Italy.

Background: It has been implicated as an important mediator of severe radial artery vasospasm. We herein report, for the first time, the superiority of bosentan (compared to papaverine (%Emax 68.4±5.3) or verapamil (%Emax 56.2±4.7), p<0.01. Additionally, bosentan was a more potent in vasodilating radial arteries. We compared the vasodilatory effects of the ETAB receptor antagonist, bosentan vs. papaverine and verapamil in human radial arteries contracted with ET-1.

Conclusions: ET-1 has been implicated as an important mediator of severe radial artery vasospasm. We herein report, for the first time, the superiority of bosentan (compared to conventional agents) as a potent vasodilator of human radial artery segments contracted with vasoplastic ET-1 concentrations. Bosentan may be an important pharmacological strategy for radial artery vasospasm.

Background: Improved survival and widespread application of orthotopic liver transplantation

Methods: From December 1993 to November 2000, eleven liver transplant patients (7 men, 4 women) underwent cardiac operations. Median age was 61 years (range, 29 to 71). The majority (91%) was in New York Heart Association functional class III or IV. Risk factors for heart disease were 73% (type II diabetes), 53% (history of myocardial infarction), and 46% (history of hypertension). Median time interval from liver transplantation to cardiac surgery was 6.6 years (range, 1-12.1).

Results: There were no early deaths. Major complications occurred in three patients and included ventilator dependency requiring temporary tracheostomy in 2 patients, sepsis-me-


Results: There were no early deaths. Major complications occurred in three patients and included ventilator dependency requiring temporary tracheostomy in 2 patients, sepsis-mea-

Background: Older studies of LV remodeling following valve replacement (AVR) for aortic stenosis (AS) have shown substantial reductions in LV mass. However, the reliability of these findings for pts who are seen in current clinical practice, who are older, in whom LV remodelling is uncommon, and in whom hypertension (HTN) is prevalent, is uncertain.

Background: Patients that hemodynamic progression is faster in moderate AS than in mild and moderate AS.

Background: Cardiac surgery can be performed safely in liver transplant recipients. In our limited experience, the intermediate-term results are good with low early mortality and no major hepatic complications. Perioperative morbidity appears higher than in non-transplant recipients.

METHODOLOGY

ABSTRACTS - Valvular Heart Disease

The published studies however are limited by the small number of patients and by the short duration of follow-up. Furthermore little is known about the long-term outcome in mild and moderate AS. Methods. We analyzed from our echocardiographic database (1998-2000) all adult patients with an initial peak aortic velocity >2 m/s and with at least two echocardiograms 6 months one apart of the other. Patients with pre-existing prosthetic valve or history of atrioventricular valve replacement was not significantly different between groups when grouped by hypertension status, by prosthesis type or size, or interval between AVR and post-op echo. Only 5/30 had LV dilation on the baseline study. Summary/Conclusion: In older subjects, substantial, unequivocal LV mass reduction following AVR occurs, but in only 40% of pts. Many older pts experience modest mass reduction following AVR for AS. Their magnitude of LV mass reduction is related to the reduction in stress, but more closely to group prosthesis.

We compared the vasodilatory effects of the ETAB receptor antagonist, bosentan vs. papaverine and verapamil in human radial arteries contracted with ET-1. Factors included hypertension (73%), chronic renal insufficiency (55%), and diabetes mellitus (30%). The median left ventricular ejection fraction was 0.80 (range, 0.30 to 0.70). Car-

diac operation included coronary artery bypass grafting in 5 patients, valve replacement or repair in 4, and combined valve replacement and coronary artery bypass grafting in 2. Median time interval from the last to cardiac surgery was 8.6 years (range, 1-12.1).

Conclusions: ET-1 has been implicated as an important mediator of severe radial artery vasospasm. We herein report, for the first time, the superiority of bosentan (compared to conventional agents) as a potent vasodilator of human radial artery segments contracted with vasoplastic ET-1 concentrations. Bosentan may be an important pharmacological strategy for radial artery vasospasm.

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