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TRANSCATHETER CLOSURE THERAPY OF ATRIAL SEPTAL DEFECT WITH PULMONARY HYPERTENSION AND BIDIRECTIONAL SHUNT IN 10 PATIENTS

Zhou Aiqing, Xie Dongming, Yiang Yihng *Gannan Medical College, First Affiliated Hospital*

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Objective To evaluate the efficacy and safety of transcatheter closure therapy for treatment of atrial septal defect (ASD) with pulmonary hypertension and bidirectional shunt.

Methods All 10 patients had a single atrial septal defect. Domestic atrial septal defect occluders which produced by Starway Medical Technology Inc were used during surgery. ECG, X-ray of chest and transthoracic echocardiography (TTE) were investigated before and after 3 days of operation and follow-up were performed after 6 months and 1 year.

Results Dynamic pulmonary hypertension was confirmed by right heart catheterisation and occlusion tests in all patients during operation. The success rate was 100% and no surgical complications were occurred. Clinical symptoms improved, dilated atrium and ventricle, in particular, right ventricular volume, reduced, ejection fraction improved, quality of life improved significantly and no residual leakage occurred during follow-up.

Conclusion Transcatheter occluder is safe and can still feasible in atrial septal defect with dynamic pulmonary hypertension and bidirectional shunt.