

Medical Expertise

"Development of the European Network in Orphan Cardiovascular Diseases"
„Rozszerzenie Europejskiej Sieci Współpracy ds Sierocych Chorób Kardiologicznych”

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CASE SUMMARY

Its an interesting case report, concerning the management of the patient with double outlet right ventricle. The course of the disease, the data of the examinations and the treatment options are well described.

LITERATURE REVIEW

Guidelines on the Management of Grown-up Congenital Heart Disease of the European Society of Cardiology (2010) are used for making the decision on the management of this patient.

EXPERT'S OPINION

The patient is carefully monitored from his childhood and in comparison with the data from 2 years ago - the deterioration of clinical and echocardiographic data is observed. But he was admitted with recurrent arrhythmias and this could be one of the reason of heart failure symptoms (NYHA f.cl.2). Though the echocardiographic examination revealed RVSP 45 mmHg with RV dysfunction (TAPSE - 16 mm), the cardiac catheterization showed RVSP 30 mmHg. MDCT showed only some amount of calcification in the homograft and the lumen cross-section area at the level of homograft about 45% of that at the level of pulmonary trunk just proximal to bifurcation. These findings show that there is not enough indications for reoperation at this moment. Close monitoring of the clinical and echocardiographic data together with optimal medicament treatment is preferable at the moment. Holter monitoring for arrhythmias and conduction disorders is recommended to choose the optimal treatment strategy.

CONCLUSION



At this moment optimal medicamental treatment with close monitoring of clinical and echocardiographic data is recommended. In the case of deterioration of clinical status or/and echo data, decision of reoperation should be reconsidered.