Acute type A Aortic dissection report

Data base committee of the BACTS

Marc A Radermecker, E de Worm, C Stefanidis and B Stockman
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Purpose of the study

• To obtain prospective data on patients operated for AAOD in Belgium over 1 y.
• To obtain information on the pathology
• Management
• Surgical treatment
• outcome
Methodology

• A AOD treated within 1 week of symptoms
• All belgian cardiac centers
• Prospective study between may 31, 2008 and June 1, 2009
• Data reported via a questionnaire
• Data anonymised (data base Manager)
• Statistics by the Dpt of Biostatistics of the Ulg
• Report elaborated within the database
Data

- 84 cases reported via the questionnaire
- 75 eligible cases
- Demographics
- Pathology
- Diagnostic
- Clinical status
- Estimation of the surgical risk (Euroscore)
- Surgery
- Postoperative complications
- Survival at discharge
- 1 year survival
Etiology

- MDH: 66.67%
- MDB: 5.33%
- MDU: 18.67%
- MS: 4.00%
- CTD: 1.33%
- PPP: 0.00%
- PAA: 13.33%
- Trau: 1.33%
- Drug Abuse: 1.33%
- Iatrogenic: 10.67%
- Related CS-early: 1.33%
- Related CS-late: 2.67%
- Other: 4.00%
Preop diagnosis

- CE-CT: 86.84%
- MRI: 0.00%
- TEE: 53.95%
- Angio: 7.89%
- PD Other: 5.26%
Preop status

- Unstable: 36.84%
- Stable: 63.16%
Unstable definition

- U-intubated: 19.74%
- U-inotrope: 17.11%
- U-Vasopressor: 17.11%
- U-Agitation: 15.79%
- U-Resuscitation: 11.84%
- U-other: 9.21%
Complications

- Peric Effusion: 51.32%
- Tamponade: 26.32%
- Cor Ischemia: 22.86%
- AI-None: 15.79%
- AI-Mild: 24.29%
- AI-Moderate: 18.57%
- AI-Severe: 34.29%
- Neur Deficit: 27.78%
- Spin Cord Isch: 1.41%
- Visc Malperf: 11.27%
- Limb Isch: 12.68%
- PC-others: 1.32%
Severity scores

- Eurosc (add): 10.86
- Eurosc (logist): 27.51
Arterial cannulation

- AC-femoral: 67%
- AC-subcl axill: 23%
- AC-carotid: 5%
- AC-aortic: 5%
- AC-LV: 0%
Open distal anastomosis

- Yes: 75%
- No: 25%
Anterograde reperfusion

NO 30%

YES 70%
Replacement Ao valve

- YES: 25%
- NO: 75%

Valve type

- Bio.: 21%
- Mec.: 79%
Post-operative period

- PP-compl 73%
- PP-simple 27%
Post-operative period

- LV dysfunction: 3.51%
- RV dysfunction: 8.47%
- arrhythmia (VF-VT): 16.13%
- myocardial infarction: 10.00%
- stroke: 22.03%
- diffuse brain injury: 38.33%
- prolventil: 54.41%
- renal failure: 30.16%
- total bilir: 5.00%
- INR: 15.00%
- myoisch infarct: 1.64%
- transfusion: 81.82%
- limbisch: 16.67%
- reexpl bleeding: 20.63%
- ab bleed-coag: 19.05%
- sepsis: 30.77%
- other: 0.00%
Follow-up

![Bar chart showing number of patients alive and dead at discharge versus 1 Year]

- **Number of patients**
  - Alive: Discharge - 60, 1 Year - 50
  - Dead: Discharge - 15, 1 Year - 20

- **Mortality in %**
  - Alive: Discharge - 10%, 1 Year - 10%
  - Dead: Discharge - 20%, 1 Year - 20%
Conclusion 1

- 75 cases
  - ±85 % participation rate
- High risk patients
- High (expected) complications rate
- Overall mortality results within the range of recently reported data from the litterature IRAD registry (JTCS 2010) + 21 % < 70 Y
  31 % > 70 Y
Conclusions

• Capability of our professional society to collect data in an anonymised form
• Capability to clearly identify a pathology
• Capability to proceed to outcome assessment in relation with patients’ risk
• Willingness and capability to proceed to “quality control”