

Physician - Physician - Aortic (Thoracic) Pathologies and Surgery/Endovascular Interventions

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Early Results of Patients Who Underwent Button Bentall Operation

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Objective: This study to analyze the early-term results of patients who underwent button Bentall operation.

Methods: Twenty-one patients (12 males, 9 females; 50.67±13.79 years) who underwent an elective button Bentall operation between 2020 and 2023 were included in the study. Patients who were pregnant or breastfeeding, those younger than 18 years of age, who underwent emergency operation, who had type 1 aortic dissection, and who underwent additional valve operations other than aortic valve, infective endocarditis, and reoperations were excluded.

Results: Ten (47.6%) patients had bicuspid aortic valve structure, and all patients had severe aortic valve insufficiency. Four (19%) patients required early revision surgery due to hemorrhage. No mortality was observed during the hospitalization period. The mean cross-clamp time was 87.33±16.77 min, and the mean cardiopulmonary bypass time was 118.81±19.88 min.

Conclusion: In our study, early in-hospital mortality was not observed and we believe that this difference may be due to the small number of patients. Nevertheless, button Bentall operation for ascending aortic aneurysm and valve insufficiency appears to be a safe surgical treatment method with short-term results.

Keywords: Aneurysm, aorta, Bentall.

Table 1. ?????.		
	Parameters	Mean±SD
Preoperative	Ascending aortic diameter (mm)	51.14±2.49
	EF	57.38±6.24
Operative	Cross-clamp (minutes)	87.33±16.77
	CPB (minutes)	118.81±19.88
Postoperative	Intensive care unit (days)	3.1±1.33
	Total hospitalization (days)	10.52±3.75

References

1. Yakut C. A new modified Bentall procedure: The flanged technique. *Ann Thorac Surg* 2001;71:2050-2. doi: 10.1016/s0003-4975(01)02439-0.
2. Tamura K, Arai H, Kawaguchi S, Makita S, Miyagi N, Watanabe T, et al. Long-term results of modified Bentall procedure using flanged composite aortic prosthesis. *Ann Thorac Cardiovasc Surg* 2013;19:126-30. doi: 10.5761/atcs.0a.12.01943.
3. Haunschild J, Dietze Z, van Kampen A, Magomedov K, Misfeld M, Leontyev S, et al. Aortic root replacement in bicuspid versus tricuspid aortic valve patients. *Ann Cardiothorac Surg* 2022;11:436-47. doi: 10.21037/acs-2022-bav-67.