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# ROYAL AUSTRALASIAN COLLEGE OF SURGEONS

## MEDIA RELEASE

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## What is the best strategy for mitral valve endocarditis?

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Different treatments for mitral valve endocarditis have been compared and their effectiveness measured during a presentation to cardiothoracic surgeons attending the 82<sup>nd</sup> Annual Scientific Congress (ASC) of the Royal Australasian College of Surgeons.

Dr Timothy Oh, a cardiac registrar at Auckland City Hospital, said the aim of his study was to compare the outcomes of different treatment strategies for mitral endocarditis, including valve replacement, valve repair and medical (i.e. non-surgical) treatment. Mitral valve endocarditis is an infection of the heart's mitral valve, leading to damage or scarring which can cause the valve to leak.

Dr Oh reported that a retrospective chart review was undertaken of all patients admitted to the Green Lane Cardiac Unit with mitral valve endocarditis between January 2005 and December 2010. Kaplan Meier estimates of death and late reoperation were used to measure treatment failure.

"Ninety-four cases of mitral endocarditis were identified, including 71 cases of native valve endocarditis (NVE) and 23 cases of prosthetic valve endocarditis (PVE)," he said. "Twenty-five patients had infection of more than one cardiac valve."

"In the NVE group, 17 received valve replacement, 23 underwent repair and 31 were treated medically. In the PVE group, 10 received valve replacement and 13 were treated medically. The 1 year mortality was 7.9% for valve replacement, 4.3% for valve repair, and 32.6% for medical treatment. At 8 years, cumulative freedom from death and mitral reoperation was 57.2% for replacement versus 72.0% for repair. Cumulative survival in the medical group was 38.1% at 8 years compared with 77.8% among those treated surgically. Mitral reoperation was required in 17.4% of the repair group versus 3.8% of replacements."

Dr Oh concluded that valve repair is an attractive option for endocarditis when infection is of limited extent, although the late failure rate is not insignificant.

"Valve replacement has a similar overall failure rate, despite being employed for more advanced infection. Medical treatment is associated with substantially higher mortality than surgery, but is sometimes reserved for patients deemed too sick for operation."

Approximately 1200 surgeons from New Zealand, Australia and around the world are attending the ASC, which runs from 6 to 10 May and is being held at Auckland's Skycity/Crowne Plaza Convention Centre.

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