

RV FUNCTION ASSESSMENT PRE AND POST PTMC IN PATIENTS WITH SEVERE MITRAL STENOSIS

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ABSTRACT

The purpose of this research paper is to assess the immediate and short term effect of PTMC on RV function using two dimensional and doppler echocardiographic indices and also to assess the RV function in patients who undergo PTMC for isolated severe mitral stenosis before, after and at 6 months cohort follow up after PTMC. Cohort prospective study included adult patients who are > 18 years of age with isolated severe MS, in sinus rhythm, and cases were admitted for the BMV. Exclusion criteria ; patients with atrial fibrillation, in accordance with NYHA class I or IV symptoms, overt right heart failure, pregnancy, chronic obstructive pulmonary disease (COPD), other valvular lesions or undergoing emergency BMV were excluded from the study. Present study consisted of 50 patients with isolated severe MS in sinus rhythm, who met the inclusion criteria. The baseline characteristics of the study population is summarized in Table 1 Mean age of the population studied was 38 ± 9 yrs. 62% were females and 38% were males. RV Free wall thickness decreased from 0.51 ± 0.11 cm to 0.44 ± 0.07 which was statistically not significant. RV dimensions decreased from baseline in basal, mid and apex to base dimensions which was statistically not significant. RV systolic area decreased from 29.30 ± 5.28 cm² to 25.18 ± 4.40 cm² at 6 months which was statistically not significant. RV diastolic area increased from 46.30 ± 9.20 cm² to 51.82 ± 9.87 cm² at 6 months which was statistically significant ($p < 0.05$). This study showed RV function parameters in patients with severe mitral stenosis did not improve immediately after PTMC. However these parameters showed improvement compared to baseline at 6 months of follow up.

KEYWORDS: RV Function, PTMC, Stenosis, Follow Up

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