



Surgery for Type A Aortic Dissection at a Low Volume Hospital

Fink D, Silberman S, Tauber R, Merin O,
Bitran D.

Cardiothoracic Surgery
Shaare Zedek Medical Center
Jerusalem, Israel



Disclosure: none



Introduction

- Type A Aortic Dissection – life threatening condition that mandates prompt surgical treatment
- Large series indicate a perioperative Mortality: ~ 10-20%



Study Patients

- All patients operated for the diagnosis of Acute Type A Aortic Dissection between 1993-2010
- N = 25



Pre Op Data

- Gender (Males) 20 (80%)
- Age 59 ± 17 (21-84)
- Marfan's Syndrome 2 (8%)
- Bicuspid Aortic valve 1 (4%)
- Tamponade 5 (20%)
- Euroscore 11 ± 3 (5-15)
- Predicted mortality (Euroscore) 28%



Op Data

- Emergent operation 24 (96%)
- Bentall Procedure 13 (52%)
- Replacement of
Ascending Aorta \ Arch 12 (48%)



Results

- Operative Mortality 4 (16%)
95% CI 0.5-31
 - Operative mortality under age 75 - 5%
95% CI 0-15
- No Post op CVA



Op. Mortality

Univariate Analysis

	<u>P Value</u>
• Age	0.003
• Euroscore	0.004



Other Centers

	<u>N</u>	<u>Mortality</u>
• Mount Sinai	124	15%
• Cleveland Clinic	208	14%



Conclusions

- Our results fall within the range of published results from high volume referral centers.