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Outcomes of Septal Myectomy on Patients with Hypertrophic Cardiomyopathy

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Outcomes of Septal Myectomy on Patients with Hypertrophic Cardiomyopathy

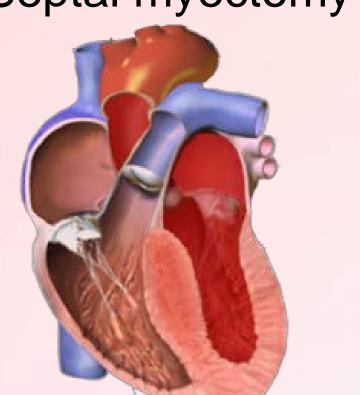
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Background

- Hypertrophic Cardiomyopathy (HCM) is a condition in which a portion of the heart becomes thickened without an obvious cause
 - *Hypertrophy* = enlargement of tissue
- Drug-resistant patients → Septal Myectomy
 - Surgical removal of enlarged portions of the heart
- Previous studies have found promising outcomes that include low mortality rates and rare occurrences of major complications
 - Septal myectomy decreases symptoms of HCM



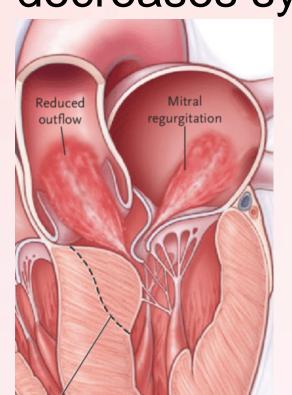




Figure 1: Diagram of HCM and Septal Myectomy Procedure

Objective

• This study seeks to evaluate the survival rates of patients with HCM that underwent the septal myectomy procedure.

Methods

Classified

 Single-center retrospective review of all septal myectomy patients from 2006-2020 at LVHN

Reviewed

 Specific patient data gathered and assessed through in-house database

Data was recorded in a unique REDCap database

Analyzed

 Descriptive statistics were used to analyze the significance of patient survival rates

Results

- 114 total patients
 - 14 died (12.28%)
 - Average survival time of 1134.14 days (3.10 years)
- 3 patients died within 30 days of the procedure (2.63%)
 - 2 died due to excessive bleeding
- Major complications were not prevalent in the population
 - Data is statistically significant, p < 0.001
- Survival rates are promising → only 12.28% died in a patient cohort that spans over 14 years

	Factor	Number of events ^a		Number of censored ^b		Comunic oi
		N	%	N	%	Sample size
	HCM Patients	14	12.28	100	87.72	114

Table 1: Septal Myectomy Patient Mortality Summary

Events = Death Censored = Alive

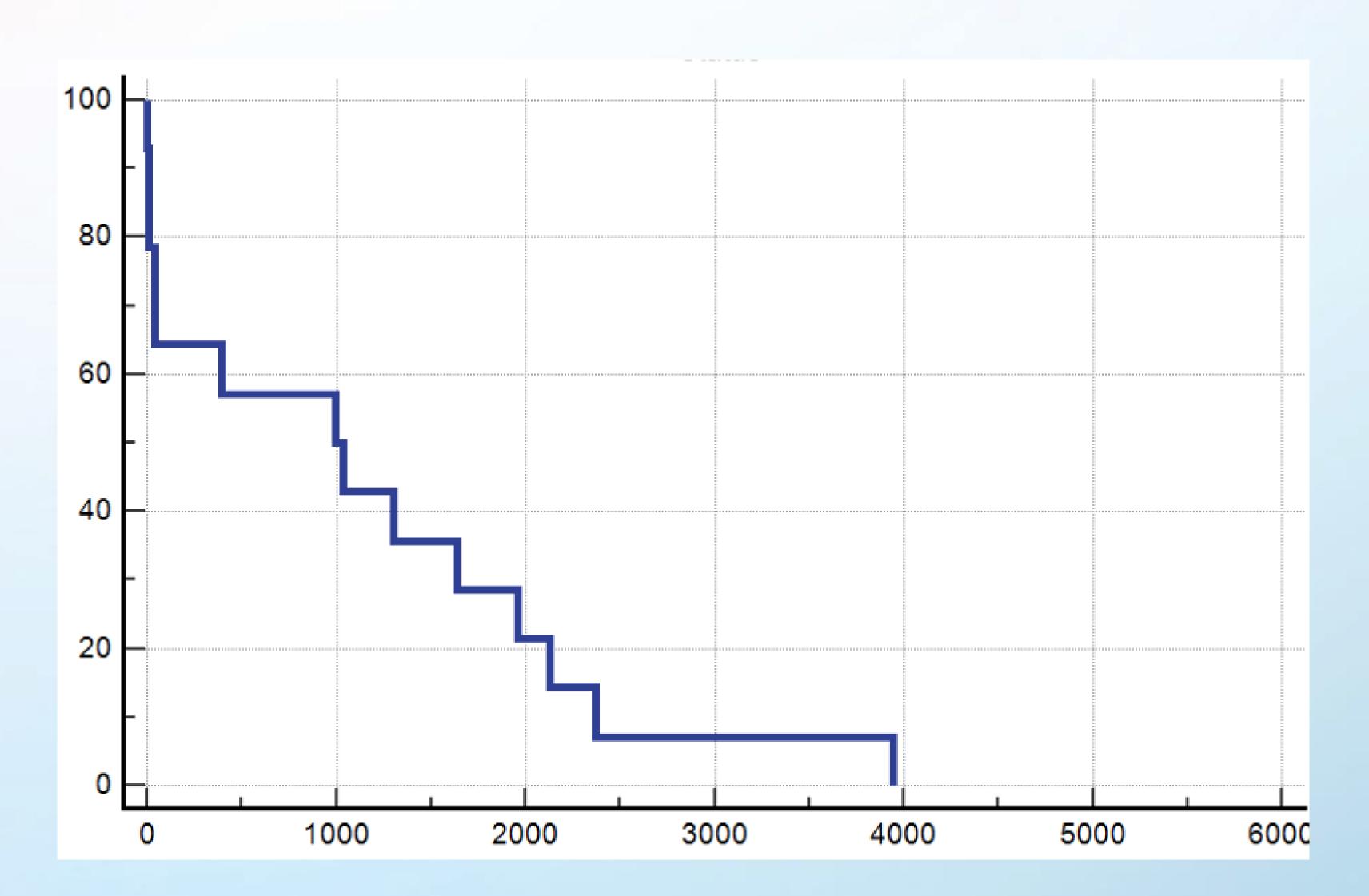


Figure 2: Kaplan-Meier Curve of Septal Myectomy Patients
The gradual drops in the curve illustrate promising survival rate for patients. The data suggests that this is statistically significant, p < 0.001.

Perioperative	Risk Factor	N	%
	CHF	51	44.7
	Mitral Regurgitation	47	41.2
	LVOTO	46	40.4
	SAM	35	30.7
	AFib	24	21.1
	CAD	23	20.2
	Prior Pacemaker	18	15.8
	Dyspnea	12	10.5
Postoperative	Complication	N	%
	New Pacemaker	10	8.7
	Heart Block	8	7.0
	Kidney Failure	8	7.0
	New VSD Repair	5	4.4
	Extra Ventilator	3	2.6
	Excessive Bleeding	2	1.8

Table 2: Pre-Septal Myectomy Risk Factors and Postoperative Complications

Conclusions

- Patients with several comorbidities are at higher
 risk for the septal myectomy procedure
 - However, the overall survival rates are promising
- Long-term survival rates of HCM patients that underwent septal myectomy illustrate success for this procedure
- Future research is encouraged to evaluate longterm outcomes of septal myectomy over 20 years and understand the effects of pre-TAVR risk factors

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