Response to Letter Regarding Article, “Reoperation of Left Heart Valve Bioprostheses According to Age at Implantation”

We thank Charitos and colleagues for their interest in this article and also for their comments.

The actuarial curves in Figure 2 represent freedom from reoperation adjusted for preoperative atrial fibrillation and concomitant coronary artery bypass grafting, whereas the curves in Figure 1 represent unadjusted data. The adjusted curves in Figure 2 included younger patients with atrial fibrillation and concomitant coronary artery bypass grafting matched to older patients with these comorbidities. Although atrial fibrillation and concomitant coronary bypass grafting are known to negatively impact long-term survival following valve replacement, in this study, younger patients were impacted to a greater degree.

For example, in patients <60 years of age who underwent bioprosthetic aortic valve replacement with preoperative atrial fibrillation, 9 of 19 (47%) died within 10 years of surgery in comparison with 21 of 178 (12%) in patients >60 years of age (P=0.001). In patients <60 years of age who underwent bioprosthetic mitral valve replacement and concomitant coronary artery bypass grafting, 9 of 44 (20%) died within 10 years of surgery in comparison with 26 of 310 (8%) in patients >60 years of age (P=0.01).

Figure 2 therefore displays a greater freedom from reoperation in younger patients compared with Figure 1 because of the competing risk of death.

Disclosures

Dr Ruel is on the speakers’ bureau of Medtronic and also receives a research grant from Edwards Lifesciences.

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References

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