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3 YEAR FOLLOW-UP AFTER INOUE BALLOON MITRAL VALVOTOMY

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### Authors

FELDMAN, T

CARROLL, JD

HERRMANN, HC

et al.

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**Three Year Follow-up After Inoue Balloon Mitral Valvotomy**

\*Ted Feldman, John D. Carroll, Howard C. Herrmann, David R. Holmes, Donald A. Rothbaum, Jeffrey M. Isner, Augusto D. Pichard, Jonathan M. Tobis, J. Kevin Harrison, Steven R. Bailey, Robert C. Feldman and the North American Inoue Investigators, University of Chicago, Chicago, IL.

Long term follow up after Inoue balloon mitral valvotomy (BMV) has not been characterized in a North American population. We report 3 year follow up in a group of 770 patients. 85% were female, the mean age was  $53 \pm 14$  years, and mean Echo score  $7.3 \pm 2.6$  (62% with score  $\leq 8$ ). The population is 75% caucasian, 7% black, 8% Hispanic, and 5% Asian.

The BMV procedure was completed successfully in 94%. Mitral valve area increased from  $1.0 \pm 0.3 \text{ cm}^2$  to  $1.8 \pm 0.6 \text{ cm}^2$  ( $p < 0.001$ ). Mitral regurgitation increased 1+ or less (scale 0-4+) in 89%.

	PRE	POST	1 yr	2 yrs	3 yrs
NYHA Class $\leq 2$	27%	89%	89%	79%	87%
Asymptomatic	-	49%	55%	47%	83%
MVA ( $\text{cm}^2$ )	1.0	1.8	1.6	1.6	1.6
n=	770	-	276	107	23

In follow up the majority of patients remained in NYHA class 2 or less, about half were asymptomatic and over 80% remained improved by at least one NYHA class at every follow up interval. Mitral valve replacement was performed in 4.6% within 30 days, and an additional 6.1% between 30 days and 3 years.

Actuarial freedom from death, mitral valve replacement or repeat procedure was 86% after 1 year, 80% after 2 years, and 77% after 3 years.

**Conclusions:** Three year follow up after Inoue balloon mitral valvotomy in a large, heterogenous North American population shows a majority of patients with preserved mitral valve area and improved symptoms. Actuarial event free survival after 3 years is 77%.

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