

Fontan - kde cesta končí?

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HERZZENTRUM

LEIPZIG

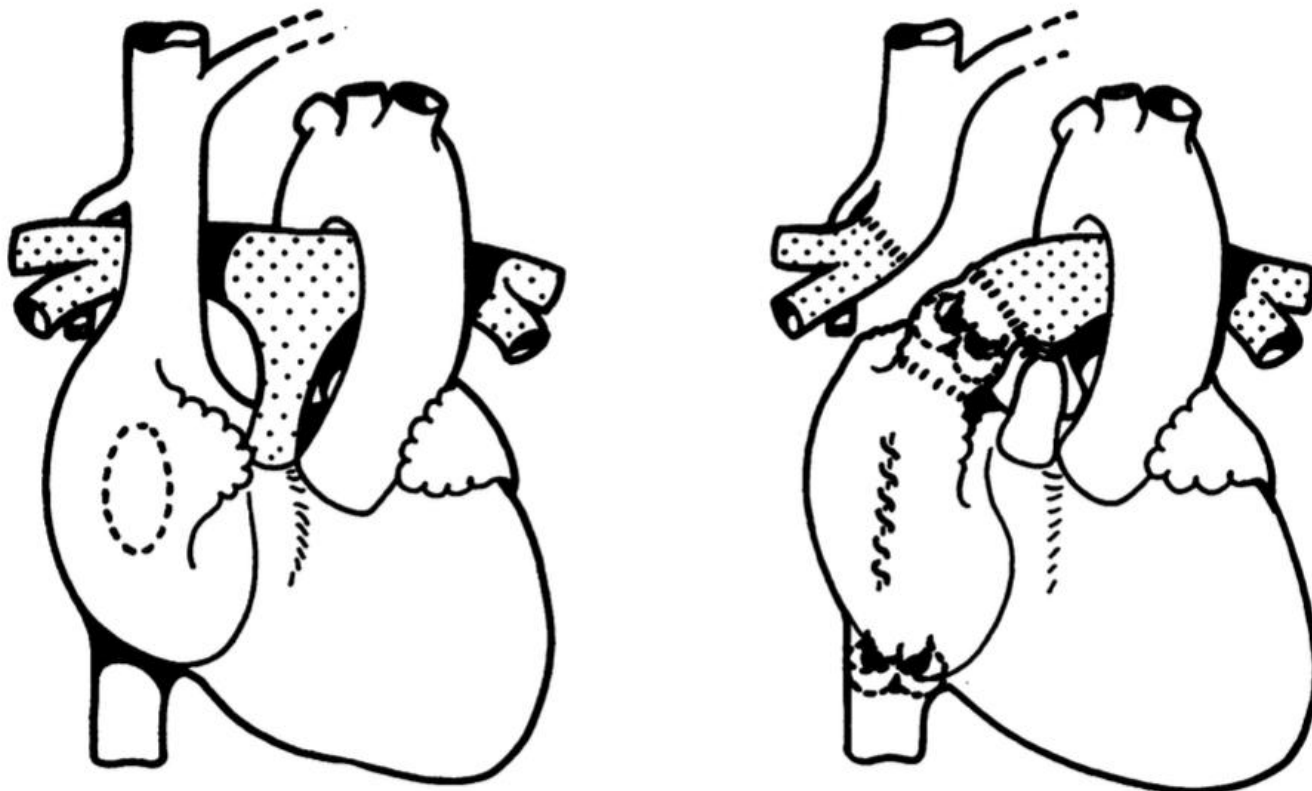


Surgical repair of tricuspid atresia

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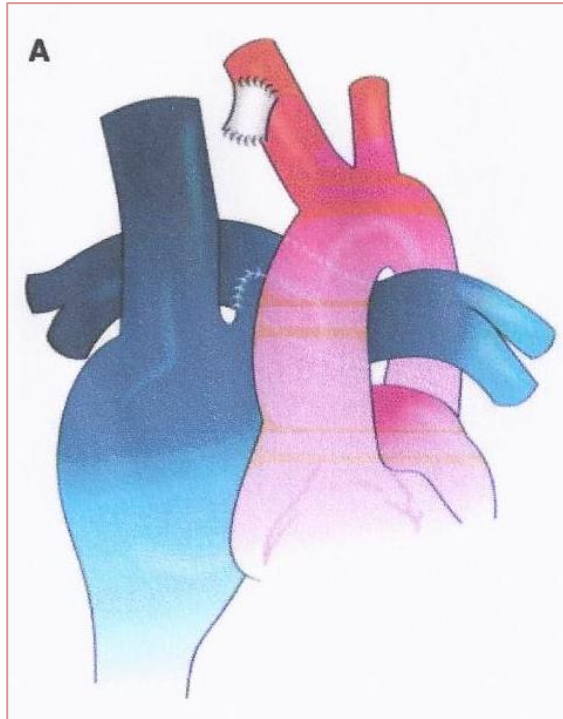
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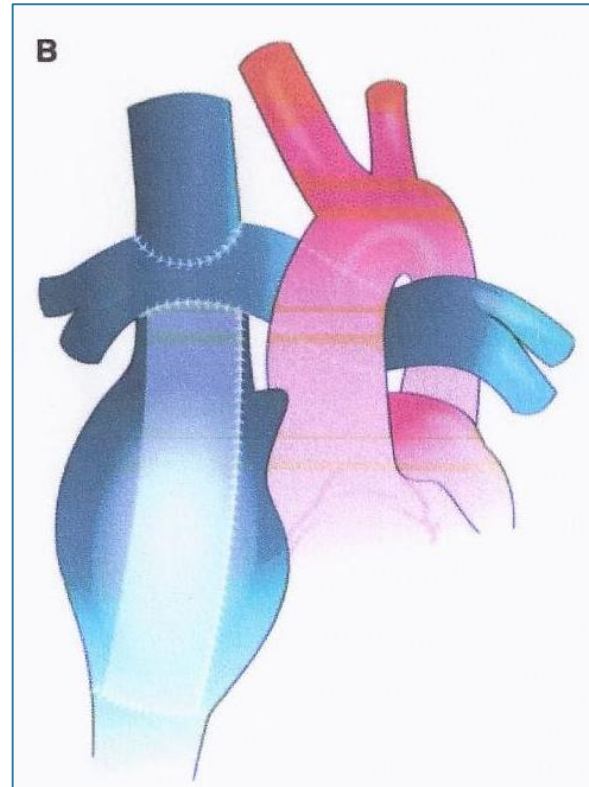
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FIG. 1. Case 2. Tricuspid atresia type II B. Drawing illustrates steps in surgical repair: (1) end-to-side anastomosis of distal end of right pulmonary artery to superior vena cava; (2) end-to-end anastomosis of right atrial appendage to proximal end of right pulmonary artery by means of an aortic valve homo-

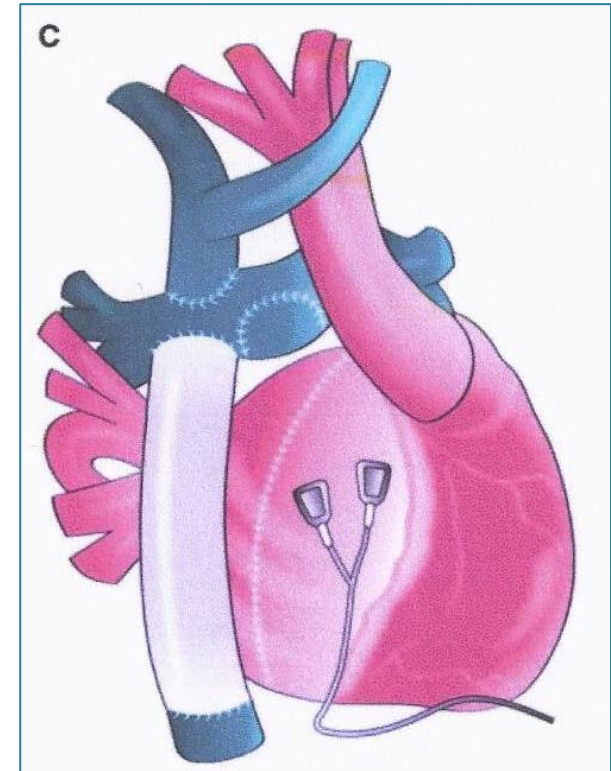
Variations of Fontan surgery



Modified
classic Fontan
(1971-85)



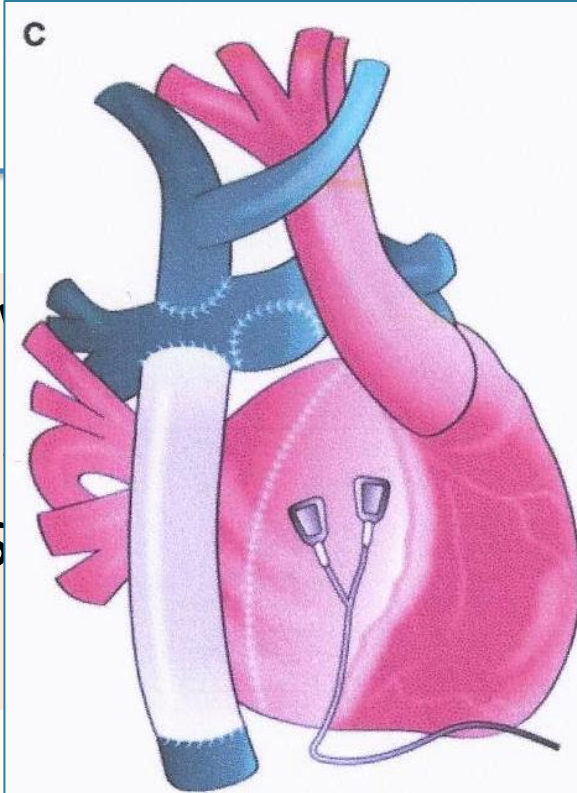
Intracardiac
lateral tunnel
(1980-90)



Extracardiac
tunnel
(od 1991)

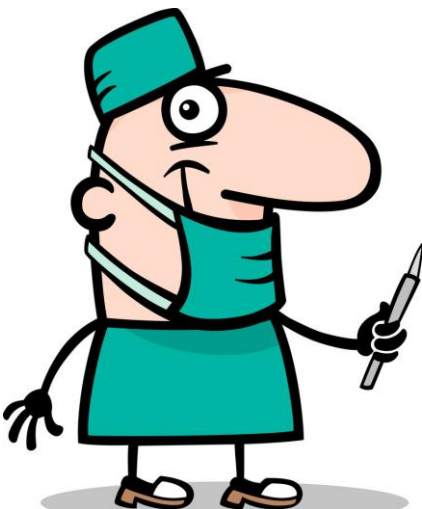
35-letá pacientka, lékařka na

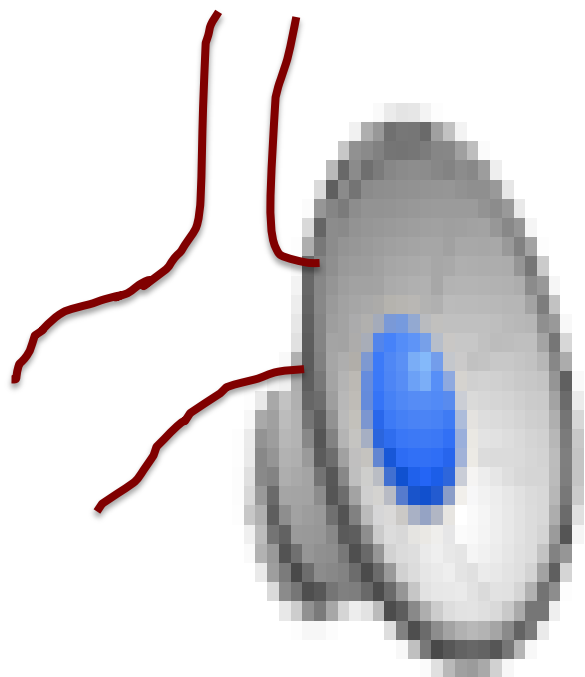
L-TGA s významnou stenózou plicnice,
ageneze dolní duté žíly s hemiazygo
oboustranné horní duté žíly, LS
isomerismus



modifikovaná Fontanová operace v 8 letech:
vpravo Glenn (RSVC -> RPA),
vlevo "side to side" anastomoza LSVC -> LPA
redirekce hepatálních žil tunelem do CS -> LPA

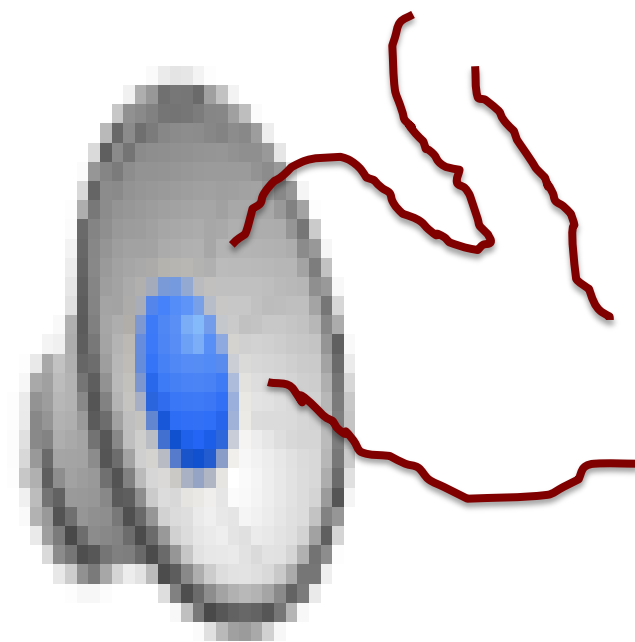
na první pohled elegantní řešení, ale...



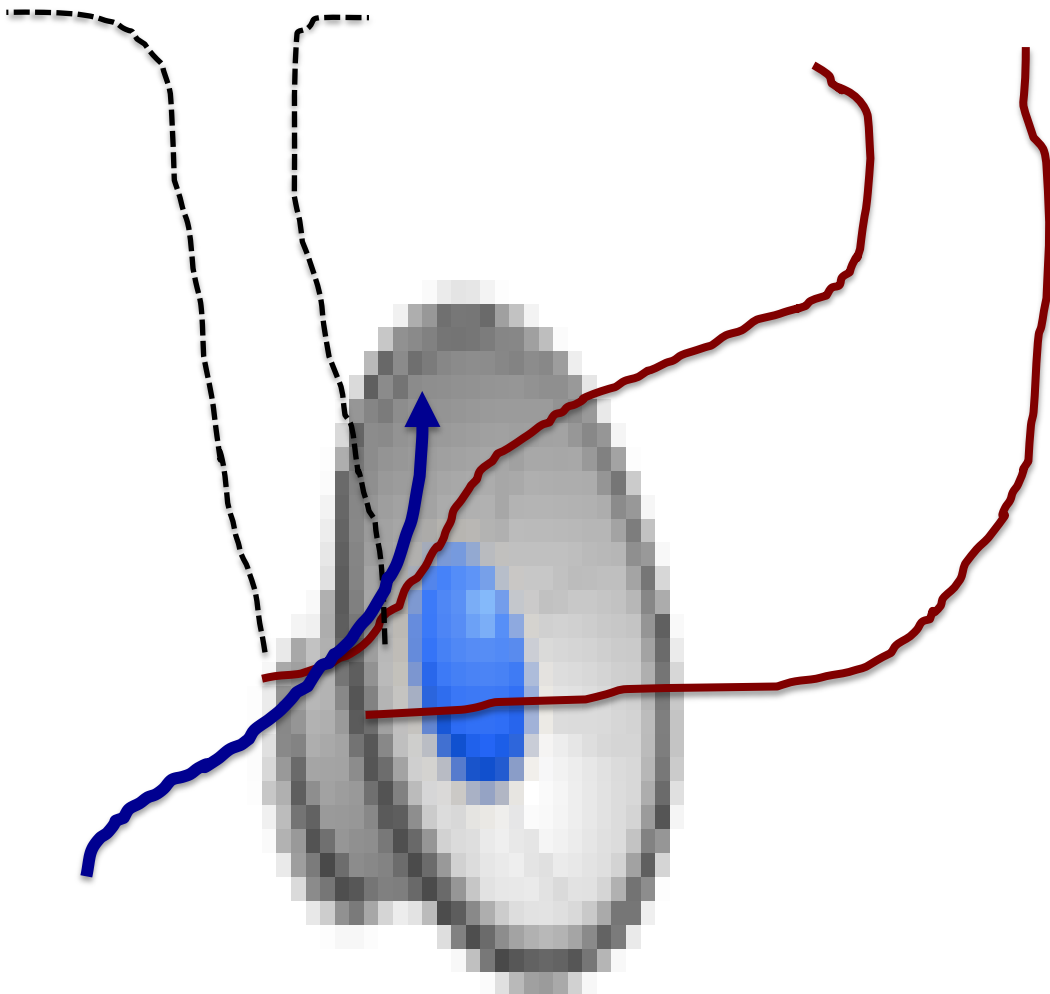


RSVC "end to side"
do RPA

LSVC "side to side"
do dilatované LPA



Derivace hepatálních
žil tunelem
z perikardu do
CS -> LSVC -> LPA



Amanéza a aktuální klinická situace

- opakované epizody reentry AT -> 4 x RF ablace,

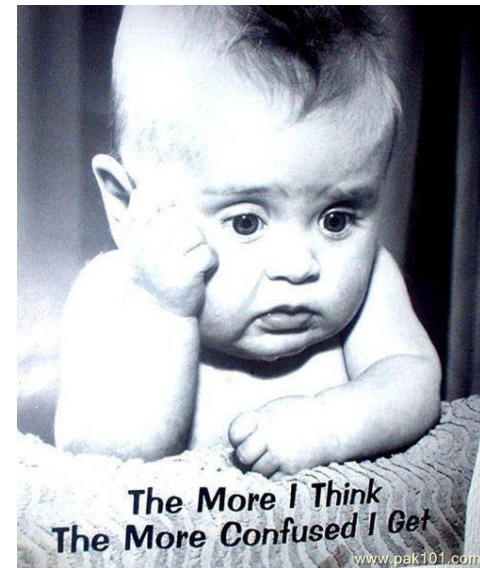
Nastal již opravdu ten správný okamžik pro indikaci mladé ženy na takto rizikový výkon???

Absence venózního přístupu k srdci,
intrakardiálně jen přes aortu ☹

Jediná možnost:

TCPC konverze & kryoablace & epi
DDD pace

Periop. riziko: 5 - 20(30)%!!!



Thank you for attention!

