

Risk factors ID'd for SCA in heart defect repair survivors

June 22 2012



In adult survivors of surgery for congenital heart disease, severe subaortic ventricular systolic dysfunction is a significant and independent predictor of sudden cardiac arrest, according to research published in the July 1 issue of *The American Journal of Cardiology*.

(HealthDay) -- In adult survivors of surgery for congenital heart disease (CHD), severe subaortic ventricular systolic dysfunction is a significant and independent predictor of sudden cardiac arrest (SCA), according to research published in the July 1 issue of *The American Journal of Cardiology*.

Pastora Gallego, M.D., Ph.D., of the La Paz University Hospital in Madrid, and colleagues conducted a longitudinal cohort study involving 936 adults (mean age at first examination, 21 years) with previously repaired CHD who had been followed up at a tertiary care facility for a mean period of nine years. [Congenital heart defects](#) included tetralogy of Fallot, coarctation of the aorta, transposition complexes, and single

ventricle.

During 8,387 person-years of follow-up the researchers found that 22 patients presented with SCA (2.6 per 1,000 person-years). Independent risk factors for SCA were age at initial examination and severely impaired subaortic ventricular systolic function (adjusted hazard ratios, 1.05 and 29, respectively). SCA occurred in 0.7 percent of patients with non-severe decreased subaortic ventricular function and in 23 percent of those with severe subaortic ventricular systolic dysfunction (P

"To our knowledge, this is the first longitudinal cohort study to analyze predictors of SCA in a large population of adult survivors after operation for CHD at

Citation: Risk factors ID'd for SCA in heart defect repair survivors (2012, June 22) retrieved 1 May 2024 from <https://medicalxpress.com/news/2012-06-factors-idd-sca-heart-defect.html>

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