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Mohamed Aashig Abdul Ghayum Children's Mercy Kansas City

Nitin Madan Children's Mercy Hospital

William Gibson Children's Mercy Hospital

Sanket Shah Children's Mercy Kansas City

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Rare Complications Associated with Use of Bovine Pericardium

Mohamed Aashiq Abdul Ghayum, MD1; Nitin Madan, MD1; William J. Gibson, DO2; Sanket Shah, MD1

¹Pediatric Cardiology, Ward Family Heart Center, Children's Mercy, Kansas City, MO
²Pediatric Cardiovascular Surgery, Ward Family Heart Center, Children's Mercy, Kansas City, MO

Background

 Bovine Pericardium (BP), with numerous and improving preparation techniques, is used extensively in repair of simple and complex congenital heart defects.

Case Presentation

Case 1

- A 14-month-old male, with trisomy 21 and complete AV canal (CAVC) repaired with patch closure of atrial septal defect (ASD) with photo-oxidized BP. Ventricular septal defect (VSD) was closed primarily.
- A routine surveillance echocardiogram showed a mass attached to the atrial septum and atrial aspect of the left atrioventricular valve (LAVV) (Figures 1)
- A cardiac MRI and trans-esophageal echocardiogram (TEE) were consistent with thrombus (Figure 2).
- · Pathology showed fibrin thrombus.

Case 2

- A 10-month-old girl, with mosaic trisomy 9 and Tetralogy of Fallot underwent a transannular patch repair with photofixed RP
- A follow-up echocardiogram showed fluid collection around right ventricular outflow tract (RVOT) patch with intraluminal compression.
- A CT angiogram (Figure 3) confirmed the suspicion.
- Intraoperatively, purulent appearing fluid within an intact patch was drained.
- Fluid culture showed no growth and pathology revealed fibrous tissue with mixed inflammatory infiltrate including necrotizing granulomas.

Diagnostic Images

Figure 1 (Case 1): Echocardiogram showing thickened echo dense atrial septum (*) and mass on the LAVV (#)



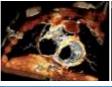


Figure 2 (Case 1): Cardiac MRI and Macroscopic picture of the thrombus removed from ASD patch





Figure 3 (Case 2): 3D reconstructed CT image shows a fluid collection along the anterior left aspect of the RVOT and MPA with luminal narrowing (*)





Discussion

- Chronic inflammation and calcification are common causes of patch failure.
- We report two rare complications of photofixed BP, namely a thrombus and sterile abscess within 6 months of surgical repair.
- Paucity of data in pediatric population regarding range of complications associated with BP.
- Literature regarding complications associated with photo-oxidized BP is limited to a single center experience.

Conclusion

- Exact mechanism causing patch failure is inconclusive and warrants further research.
- Physicians should have a high index of suspicion on surveillance echocardiograms for rare but significant complications in association with BP, even in asymptomatic cases
- Advanced imaging modalities including cardiac CT, cardiac MRI and TEE, allow for better visualization and definitive diagnosis.
- Surgical re-intervention should be considered if BP associated complications appear to be progressive and unresponsive to medical management.





