UniversitätsKlinikum Heidelberg

Heart Transplantation in Patients with Cardiac Amyloidosis

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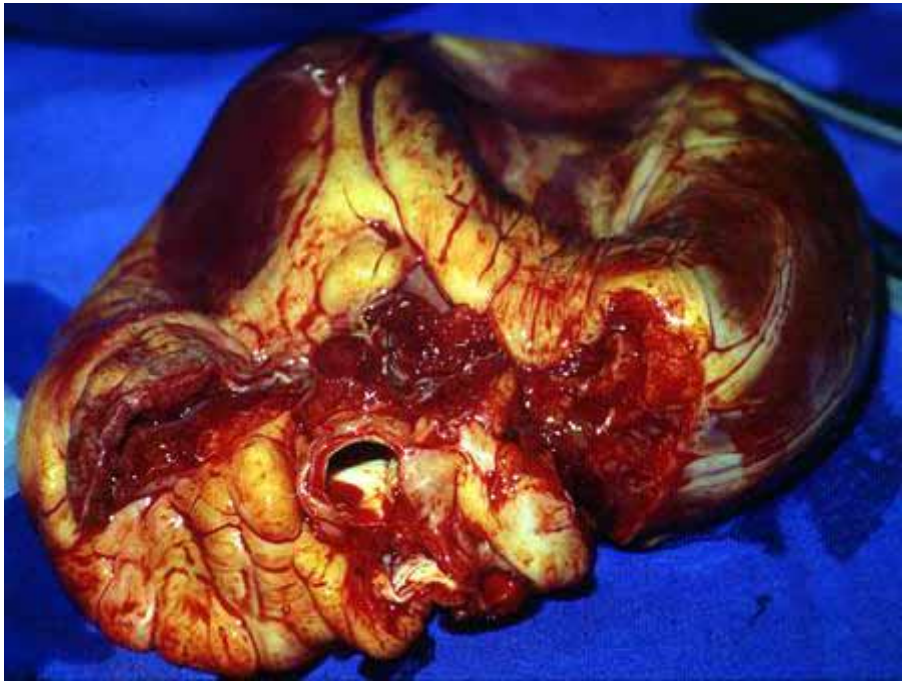
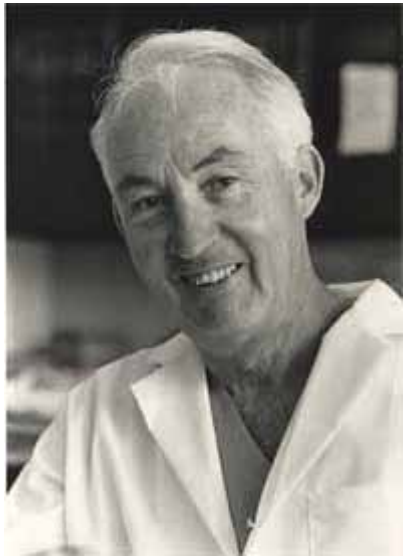
2. Mai 2009

Unfixierte Explantate

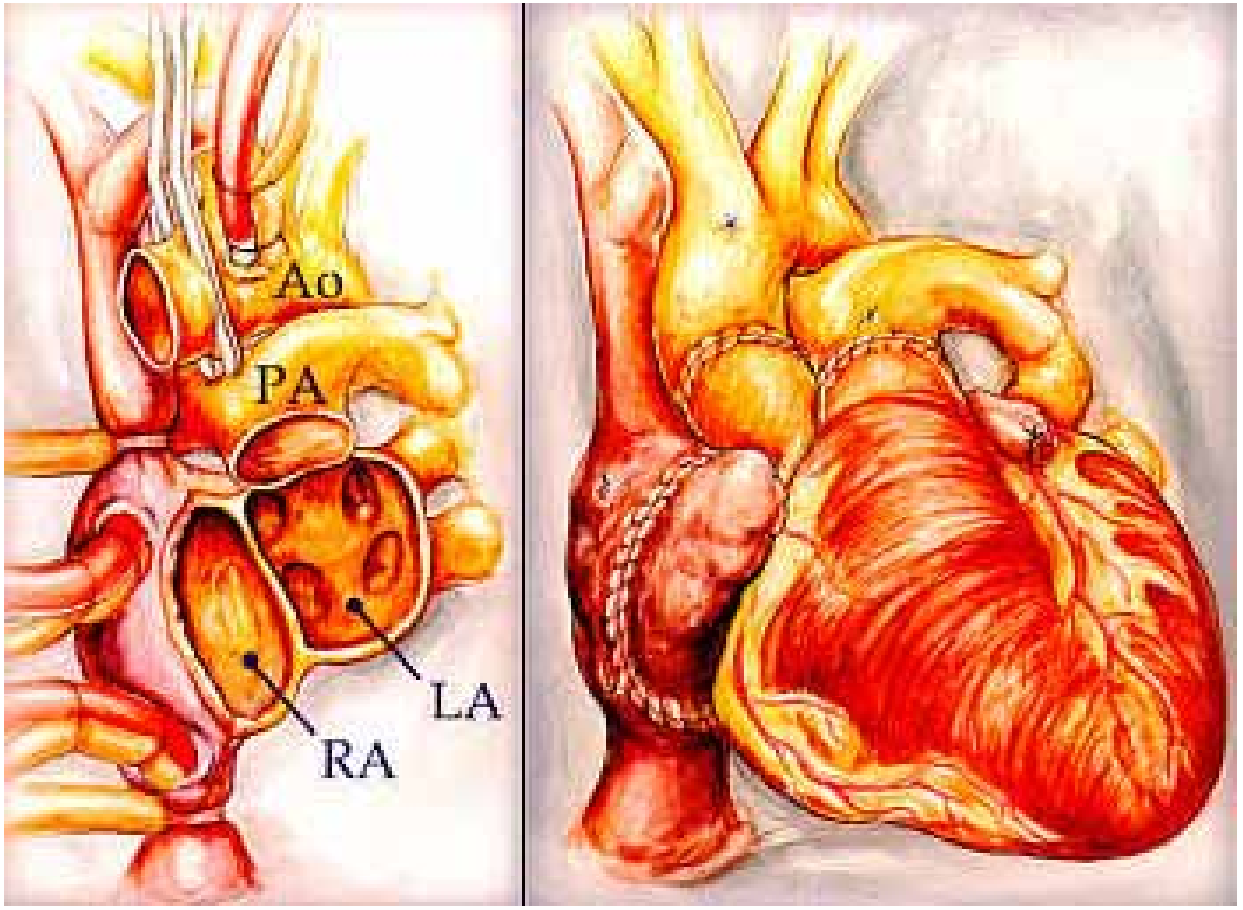


dilatative Kardiomyopathie

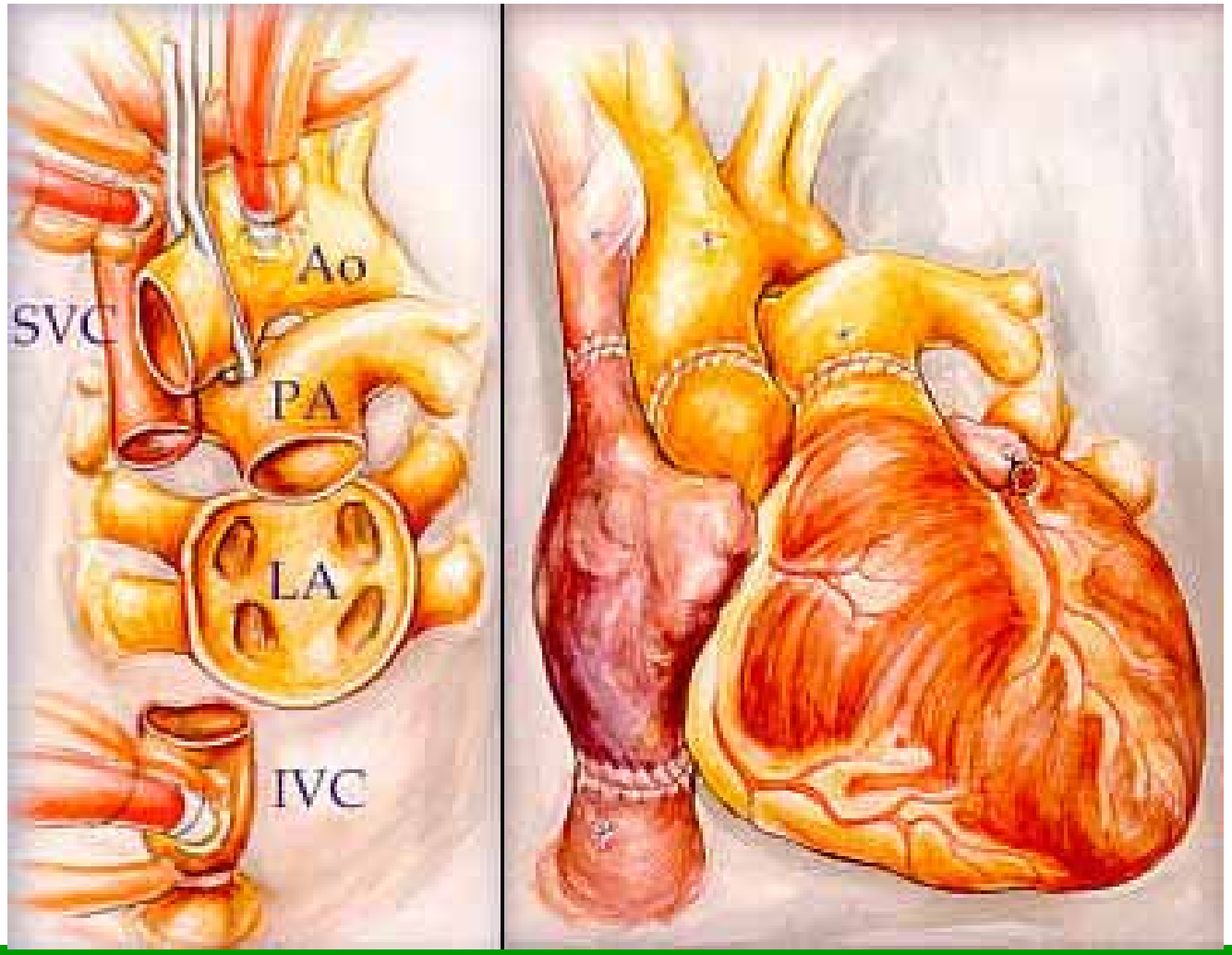
Amyloidkardiomyopathie



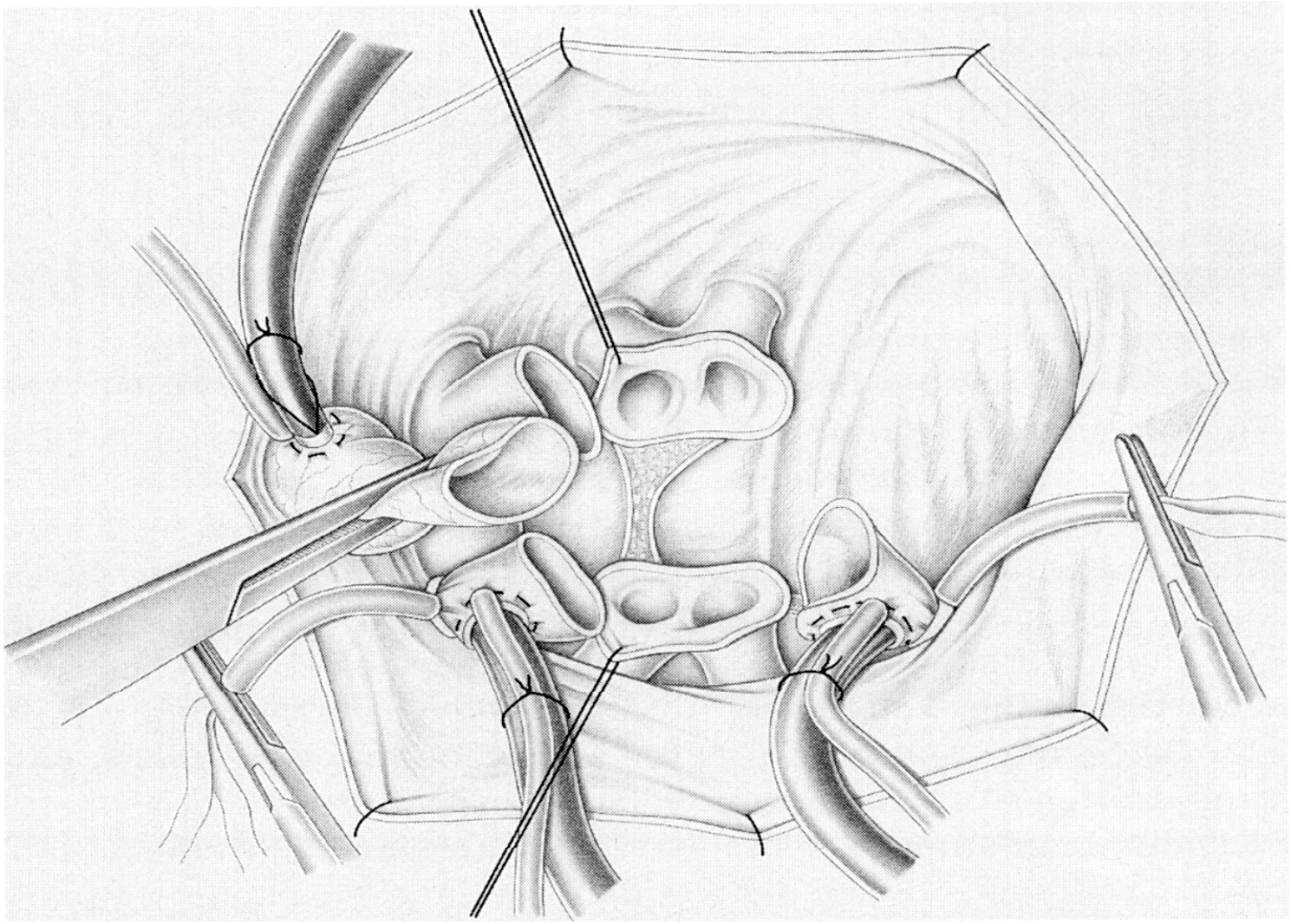
Standardtechnik
nach Lower und Shumway



Bicavale Implantationstechnik



Totale Orthotope Transplantation



DANGER: Patient Selection

D iarrhoea	weight loss, malabsorption
A utonomic nervous system	polyneuropathy, syncopes heart rate variability
N utritional status	serum protein body mass index
G astro-intestinal tract	history of bleeding, gut biopsy
E limination	nephrotic syndrome creatine clearance
R espiratory tract	spirometry, diffusion capacity computed tomography

Conclusions

- cardiac involvement is common in patients with light-chain amyloidosis
- symptomatic cardiac involvement in patients with light-chain amyloidosis is associated with poor prognosis and represents an interdisciplinary challenge for the physicians
- therapeutic approaches are limited in patients with symptomatic cardiac amyloidosis
- identification of high-risk patients is necessary to improve prognosis
- survival of amyloidosis patients after HTx is comparable to survival with survival of HTx patients on the high-urgency list