Clinico-Etiological Profile of Cardiac Tamponade in a Tertiary Care Centre

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Background: Pericardial tamponade, a life-threatening condition caused by the accumulation of fluid in the pericardial sac, can be acute or chronic. Mortality and morbidity can be minimized on prompt diagnosis and treatment with percutaneous drainage. Materials and methods: 246 patients admitted with cardiac tamponade between Jan 2010 and Aug 2014 was enrolled in t ...

Hurdles for Starting Ministernotomy Aortic Valve Replacement Program

Published On: August 30, 2016 | Pages: 035 - 037

Author(s): Suraj Wasudeo Nagre*

Research article regarding hurdles for starting ministernotomy Aortic valve replacement program in Grant Medical College, Mumbai and techniques to overcome them. Here we studied twenty patients of aortic valve replacement surgery out of which ten are operated by ministernotomy and ten by full sternotomy in our institution, from May 2013 to May 2016. Middle age patients ...

Historical Evolution of Surgery for Transposition of Great Arteries (TGA)
The history of surgery for transposition of great arteries (TGA) has paralleled the history of cardiac surgery. In fact, it began before the birth of open heart surgery when the palliative Blalock-Hanlon septectomy was first performed in 1948. The atrial switch, which was an attempt to correct the physiology of transposition, had significant shortcomings. The arterial ...

**Case Report**

**A Case of Balloon Rupture Cause Serious Complication during Percutaneous Coronary Intervention**

Balloon rupture in the process of percutaneous coronary intervention (PCI) leading to coronary artery dissection, subintimal hematoma and hematoma extension after stent implantation is an uncommon complication, but it has important clinical significance. ...
Direct Aortic Evolut R Implantation as Valve-In-Valve in a Patient Affected by Leriche Syndrome

Published On: September 28, 2016 | Pages: 038 - 040

Author(s): Pierre Dahdah, Giuseppe Bruschi* and Victor Jebara

Transcatheter aortic valve implantation (TAVI) has been designed to treat elderly patients with severe aortic stenosis considered high-risk surgical candidates. Due to the large device size, even of current generation systems, the transfemoral approach requires favorable ilio-femoral arterial anatomy; this approach is contraindicated in patients with excessive ath ...

Aortic Valve Thrombosis in Antiphospholipid Syndrome Causing Coronary Artery Embolic Disease

Published On: August 24, 2016 | Pages: 032 - 034

Author(s): Jeremy R Burt*, Kimberly M Beavers and Vincent E Grekoski

Antiphospholipid syndrome (APS) is a disorder characterized by the presence of antiphospholipid antibodies which are known to promote thrombus formation and heart valve complications. In this case, a 20 year old African American male presenting with chest pain was found to have APS as well as Budd-Chiari Syndrome. He was then evaluated through the use of cardiac magne ...

Subclavian Artery Pseudoaneurysm Secondary to Accidental Stone Chip Injury and its Excision

Published On: July 25, 2016 | Pages: 030 - 031

Author(s): SW Nagre*

A pseudo aneurysm, also known as a false aneurysm, is a hematoma that forms as a result of a leaking hole in artery. Hematoma was contained by the surrounding tissues. Also it must continue to communicate with the artery to be
considered a pseudo aneurysm. Post stab injury subclavian artery pseudoaneurysm is rare entity with great significance because of risk of compl ...

**Can Irisin be a New Agent Responsible for the Development of Heart Attack and Cardiac Cachexia?**

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Author(s): Suna Aydin*

Cardiac cachexia, a syndrome characterized by systemic destruction, nutritional impairment and weight loss [1], has a prevalence ranging between 8 and 42% around the world [2]. ...

**Pathological Biomineralization in the Calcific Aortic Valve**

Published On: October 22, 2016 | Pages: 045 - 046

Author(s): Elena Cavarretta* and Adriana Maras

The prevalence of moderate to severe calcific aortic valve stenosis in patients 75 years old is 2.8% and only 40% of patients with surgical indication undergo aortic valve replacement because of high perioperative risk, older age, lack of symptoms, and patient/family refusal [1]. In the absence of hemodynamically significant left ventricular (LV) outflow obstruction, ...