Latrogenic aortic dissection during mitral valve replacement surgery--a case report.

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摘要

Abstract

Intraoperative aortic dissection is one of the complications of aortic cannulation, which is potentially lethal with an incidence of about 0.16%. Early diagnosis and treatment can lower the mortality rate effectively. We report a 68 y/o female patient sustaining an acute type A aortic dissection in consequence of aortic cannulation for mitral valve replacement surgery. Induction of general anesthesia and endotracheal intubation were performed smoothly. Transesophageal echocardiography (TEE) has proven itself as an important tool to offer definite diagnosis of aortic dissection. latrogenic intraoperative aortic dissection is rare but is potentially a fatal complication. Early diagnosis and prompt treatment are important for survival.