QUALITY OF LIFE IN 9985 PATIENTS FOLLOWING AORTIC VALVE REPLACEMENT: ONE-YEAR RESULTS FROM THE GERMAN AORTIC VALVE REGISTRY

A. Beckmann1, R. Lange1, T. Neumann1, M. Krane2, A. Welz4, C. Hamm5, F. Mohr6

1Department of Cardiovascular Surgery, German Society for Thoracic and Cardiovascular Surgery, Berlin, Germany; 2Department of Cardiovascular Surgery, German Heart Center Munich, Munich, Germany; 3Clinic for Cardiology, Universitätsklinikum Essen, Essen, Germany; 4Department of Cardiac Surgery, University of Bonn, Bonn, Germany; 5Cardiology, Kerckhoff Klinik Bad Nauheim, Bad Nauheim, Germany; 6Department of Cardiac Surgery, Heart Center Leipzig, Leipzig, Germany

Objectives: Surgical aortic valve replacement (SAVR) is still the gold standard for patients suffering from aortic valve disease. Despite various analyses of periprocedural findings and outcome parameters, one major aim of the German Aortic Valve Registry is the evaluation of mid- and long-term health-related quality of life (HrQoL) in patients after SAVR.

Methods: In 2011, 9985 patients undergoing SAVR were included in the German Aortic Valve Registry. Patients underwent isolated SAVR (SAVR; n = 6523) or SAVR in combination with CABG (SAVR + CABG; n = 3462). HrQoL was measured using the EuroQol Five-Dimension (EQ-5D-3L) questionnaire preoperatively and 12 months postoperatively. Evaluated dimensions were amended by a visual analogue scale (VAS) for self-rating health status.

Results: Preoperative and 1-year follow-up for HrQoL was completed in 5421 (83.1%) patients for SAVR and 2718 patients (78.5%) undergoing SAVR + CABG, respectively. Unadjusted 1-year mortality was 6.7% for patients after SAVR and 9.5% for patients following SAVR + CABG. Preoperative VAS score was 64.3 ± 19.9% for SAVR and 63.1 ± 19.6% for SAVR + CABG while at 1-year follow-up an improvement to 69.2 ± 19.3% and 67.8 ± 20%, respectively, was detected. A similar substantial improvement for patient-dependent HrQoL from baseline to 1-year follow-up was observed for mobility of 9.8% (SAVR) and 5.4% (SAVR + CABG) and usual activity of 16.2% (SAVR) and 13.5% (SAVR + CABG), while moderate changes were found for the remaining items: self care, pain/discomfort and anxiety/depression.

Conclusion: Surgical aortic valve replacement in patients suffering from aortic valve disease either as isolated procedure or combined with CABG leads to a substantial improvement in HrQoL, especially in terms of mobility and usual activities.