

ORAL PRESENTATION

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Results of heart transplantation: 18 years experience in University Hospital Dubrava, Zagreb

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Background

Despite advances in medical treatment, development of new surgical procedures and the availability of mechanical circulatory support heart transplantation (HTx) remains the treatment of choice for end-stage heart failure. Objective of this study is to report single center experience and outcomes of patients undergoing HTx.

Methods

We retrospectively examined the outcomes from ninety-five HTx recipients between September 1995 and May 2013. The mean recipient age was 55±8 years, and 85% were male. Dilated cardiomyopathy was present in 40%, ischemic in 30% and 30% were other causes. Ten patients (10%) that were heart recipients from our cohort were on high urgent list of Eurotransplant. As an induction of immunosuppressive therapy we were using antithymocyte globulin, and for maintenance a combination of cyclosporine, prednisone and mycophenolate. Survival was studied using Kaplan-Meier curves.

Results

In-hospital mortality was 12%. The median follow-up was 20 months. The global survival rates at 1, 5, and 10 years were 82%, 77%, and 62% respectively. The mean survival is 105 months (95% CI, 93.4-118.3). Early main causes of death were sepsis (41%) and primary graft failure (29%) and late causes were late rejection (20%), malignant disease and other causes (10%).

Conclusion

In our center, post-HTx survival rates at 1, 5, and 10 years were even better than those reported by the International

Society of Heart and Lung Transplantation as a result of combined effort of all medical personnel involved in perioperative and postoperative management.

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