

中文題目：探討短期抗凝血藥物對經主動脈生物瓣膜置換患者存活率之影響
英文題目：The impact of short term warfarin on survivals of patients undergoing bioprosthetic aortic valve replacement

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Background

The need for anticoagulation after surgical aortic valve replacement (AVR) with bioprosthetic valves is not well examined. In this study, we aimed to investigate the associations of warfarin treatment with the risk of major adverse cardiac and cerebrovascular events (MACCEs), bleeding incidents and the requirement of reoperation after bioprosthetic AVR surgery.

Methods

We identified 1007 patients who received the first bioprosthetic AVR from Taiwan's National Health Insurance Database between 2001 and 2010, excluding those with prior use of Warfarin, dual valve procedures, prior valve surgeries or concomitant with other surgeries. These patients were divided to two groups according to free from Warfarin use and less than three month use of Warfarin. The median follow up duration were 36 months.

Results

Compared with non-Warfarin user, patients received Warfarin were at their younger age and free from kidney disease. Interestingly, despite a gross decrease of MACCE in patients received Warfarin, patients under Warfarin for a longer duration (31-90 days) had a relatively higher risk than those for a less than 30 day use. In contrast, no significant differences of bleeding and the risk of reoperation were observed in between non-Warfarin user and patients receiving various durations of Warfarin. Older patients suffered from higher risks of post-operative MACCEs and bleeding. Also, patients with comorbidities including hyperlipidmeia and renal diseases encountered an increased incidence of bleeding.

Conclusions

The short term use of postoperative warfarin (less than 30 days) following bioprosthetic AVR reduces the incidence of MACCEs compared with those of non-users. However, the benefit diminished in the prolonged use. Conversely, the risks of bleeding and reoperation were not insignificant between groups.

Key words: bioprosthetic AVR; warfarin; MACCEs

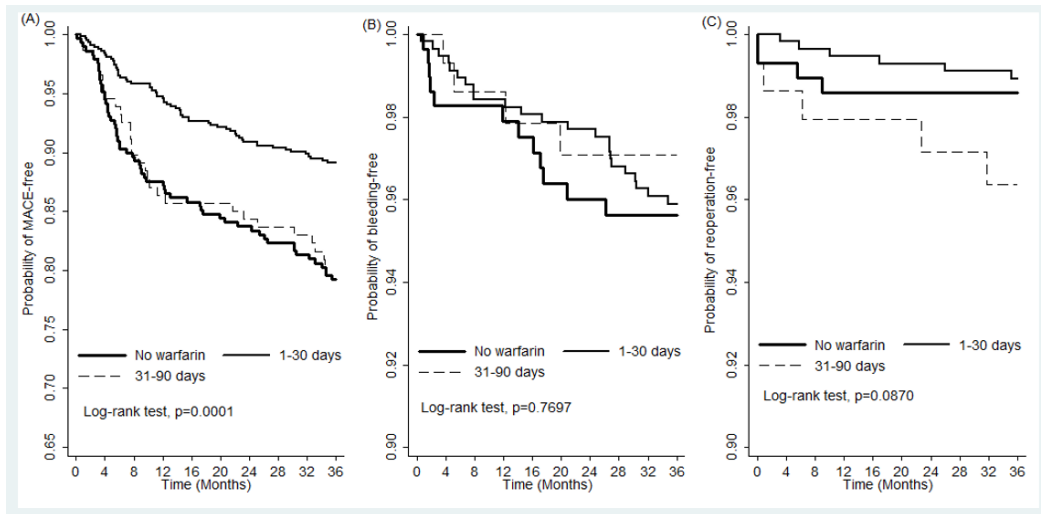


Figure. Kaplan Meier plot of (A) MACCEs, (B)bleeding and (C)re-operation among warfarin users of short duration (1-30 days), of moderate duration (31-90 days) and non-users in patients post bioprosthetic AVR.