Pulmonary valve cusp augmentation for pulmonary regurgitation after repair of valvular pulmonary stenosis

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A 23-year-old female patient with a history of pulmonary valvectomy for pulmonary stenosis at 2 years of age underwent pulmonary valve repair, which consisted of remnant cusp extension using a fresh pericardium and commissural resuspension. An immediate postoperative computed tomographic scan showed full movement of the extended anterior cusp during systole, yet flail motion during diastole. However, follow-up magnetic resonance imaging at 10 months postoperatively revealed a small amount of pulmonary flow regurgitation (2.0%).

**Biography**
Hong Ju Shin is currently the Clinical Associate Professor at Department of Thoracic and Cardiovascular Surgery, Korea University Ansan Hospital. He also has the Membership at various societies such as The Asian Society for Cardiovascular Surgery, The Korean Society for Thoracic and Cardiovascular Surgery, The Korean Society of Circulation, The Korean Pediatric Heart Society and The Korean Medical Association.

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