## Background

## Cardiac CT analysis



## Hypothesis



GH: Geometric height, EH: Effective height, VAJ: ventriculoaortic junction

## Objectives

To investigate the efficacy of the formula in the patients with aortic regurgitation.

## Methods

- 2019-2022 Reimplantation, Tricuspid valve
- Retrospective study
- To compare Pts with the equation to Pts without the equation
- Subgroup analysis -- type II, III aortic regurgitation
- Outcomes : recurrent AR greater than moderate


## Operative techniques

## - Without the formula

- Standard Reimplantation technique
- Graft size: $28-30 \mathrm{~mm}$
- To raise the EH to 9 mm using central plication


## - With the formula

- Deep dissection around the RCS
- Graft size: Non-left commissure height
- To raise the EH > 10 mm in type II AR
- Frequently used Free margin resuspension



Using the equation:

| GH $(\mathrm{mm})$ | $\mathrm{EH}(\mathrm{mm})$ | VAJ $(\mathrm{mm})$ |
| :---: | :---: | :---: |
| 18 | 8 | 16.8 |
| 20 | 9 | 18.0 |
| 22 | 10 | 19.1 |
| 24 | 11 | 20.3 |
|  |  | EH $\approx 45 \% \mathrm{GH}$ |
|  |  |  |

A simplified formula: target VAJ $=$ (minimum GH $-\operatorname{target} \mathrm{EH}) \times 2$ (Target EH: 10-11mm)


## Conclusions

The controlled approach of VAJ reduction in reimplantation would produce appropriate effective height and bring better long-term valve durability in patients with aortic regurgitation.

## The controlled VAJ reduction in reimplantation



