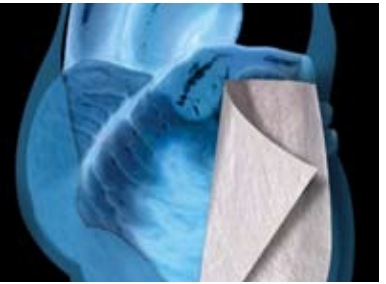


Pericardial Reconstruction

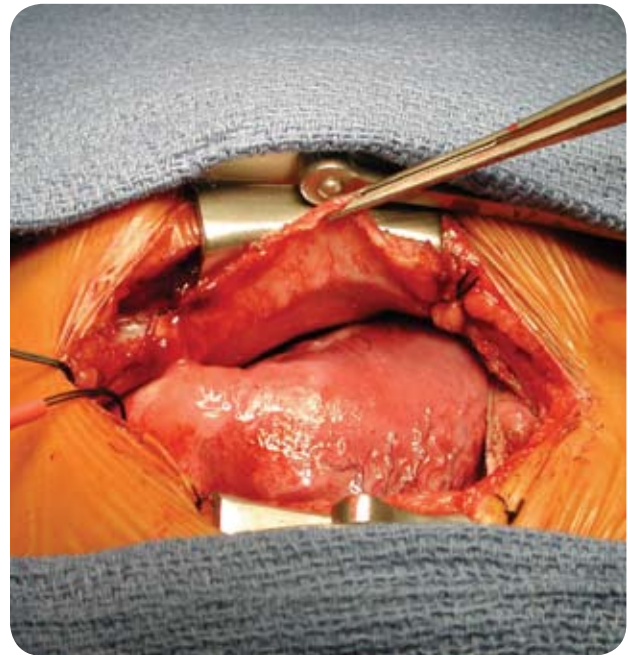
CASE REPORT



INSTITUTION: Joe DiMaggio Children's Hospital

SURGEON: Frank Scholl, MD

A pediatric patient with complex interrupted aortic arch and multiple ventricular septal defects (VSD) underwent hybrid palliation with stenting of the arterial duct and bilateral pulmonary artery bands in the newborn period to encourage left ventricular growth and allow her to gain weight. CorMatrix ECM for Pericardial Closure was used for pericardial reconstruction at the time of the first surgery. She was brought back at the age of three and a half months and underwent redo sternotomy and complete correction including reconstruction of her aortic arch, closure of her perimembranous VSD with CorMatrix ECM for Cardiac Tissue Repair and ventricular device closure of her distal muscular VSD. The intraoperative photo shows that the pericardial space after redo sternotomy is relatively free from adhesions and that the ECM has been remodeled into native tissue. The junction with native pericardium can be seen with vascular ingrowth into the area of the ECM. Sternal reentry and dissection of the heart and great vessels was facilitated. The patient had an uneventful postoperative recovery and was doing well at four months postoperatively.



An intraoperative photo three and a half months after ECM pericardial reconstruction showing that the pericardial space after redo sternotomy is relatively free from adhesions. The junction with native pericardium can be seen with vascular ingrowth into the area of the remodeled tissue. Sternal reentry was greatly facilitated.