Secondary mitral regurgitation according to gender

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KEYWORDS: secondary mitral regurgitation, gender.

CITATION: *Cardiol Croat.* 2018;13(5-6):184. | <https://doi.org/10.15836/ccar2018.184>

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Background: Mitral regurgitation (MR) represents the second most common valvular heart disease (VHD)¹. It is classified as primary (organic) and secondary (functional) MR, with secondary being more frequent². Secondary MR is usually result of dilatative cardiomyopathy, ischemic heart disease, postmyocarditis and similar². Its prevalence is approximately 1.6% to 19.4%, and is associated with worse prognosis than primary³. The aim of our study was to investigate the incidence of secondary MR according to gender.

Patients and Methods: Retrospective study was conducted to assess the relation between MR with other VHD. A total of 686 patients, with male predominance of 55%, were included in the study.

Results: Among all patients with MR 167 (24.3%) had secondary MR. The main cause was left ventricular enlargement with mitral annular dilatation, counting for 96 (57.5% of secondary MR patients and 14.0% of all MR patients). Other causes of secondary MR included ischemic and postmyocarditis causes, with frequency of 64 (38.3% of secondary MR patients and 9.3% of all MR patients) and 7 (4% of secondary MR patients and 1% of all MR patients), respectively. According to gender distribution, 99 (59.3%) males and 68 (40.7%) females had secondary MR. Dilatative cardiomyopathy was the main cause of secondary MR in both men and women (60.6% and 52.9%). Ischemic MR was present in 36 (36.4%) men, 28 (41%) women, while postmyocarditis MR was observed in 3 (3%) of men and 4 (5.8%).

Conclusion: Secondary MR presents high proportion of all MR causes. Dilatative cardiomyopathy was most common cause of secondary MR, regardless of gender groups, with men more affected. Ischemic cause was slightly more common in women than men.

RECEIVED:
April 24, 2018

ACCEPTED:
May 10, 2018

LITERATURE

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