Tricuspid valve regurgitation in heart transplant patients

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Tricuspid valve regurgitation is the most frequent valve disease after heart transplantation (HTx)¹. Post-transplant tricuspid valve regurgitation ranges in different severity but the majority are of no clinical importance. There are many causes of tricuspid valve regurgitation and they are related to the time of diagnosis after the surgery. In the early post-transplant period, tricuspid valve regurgitation is usually secondary to pulmonary hypertension, i.e. increased pulmonary vascular resistance. Most of tricuspid valve regurgitation in the late phase is secondary to tricuspid annulus enlargement due to right ventricular remodeling and dilatation². Other frequent causes are lesions of valve apparatus during right ventricular endomyocardial biopsy, acute graft rejection and the alteration of right atrial morphology due to the surgical technique.

Medical management of clinically significant tricuspid valve regurgitation in heart transplant patients is the standard therapy. Surgical correction is indicated in properly selected patients who are refractory to medical treatment alone.

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LITERATURE

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