

*Abstracts of the Scientific Awards of XXXIX COMU 2020 -
Research Classified - Monography*

Heart Transplant Surgeries: Postoperative Complications and Therapeutic Repercussions

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Introduction: Heart transplantation is a major and highly complex surgery, requiring assistance from a trained multidisciplinary team, but which can still present complications inherent to any type of surgery, whether biological, psychological, social or spiritual. Studies have shown a high influence on the quality of life of transplant recipients and the satisfaction of these patients after transplantation in all domains. The dissatisfaction occurred at statistically insignificant levels.

Objectives: To evaluate the prevalence of complications and therapeutic repercussions of heart transplant surgery, epidemiology and the clinical evolution of patients in the postoperative period. Methodology: Research carried out in the database Scielo, ScienceDirect, Pubmed and Revista Medicina - FMUSP, between the years 2007-2018, with analysis of the most relevant articles.

Results: Studies have shown that complications are many and multifactorial, the most frequent of which are: renal failure, infections, cardiac graft dysfunction, gastrointestinal dysfunction, increased bleeding, permanent total atrioventricular block, headache, arrhythmias, shock, sepsis, tamponade, pericardial effusion, seizures, encephalopathy and even reactivation of *Trypanosoma cruzi* in chagasic patients. Regarding the main causes of death after heart transplantation, it is worth mentioning the primary graft dysfunction, right ventricular dysfunction, infections (the main etiologies include opportunistic agents due to the use of immunosuppressants, being more frequent and more severe in the first months after transplantation, as immunosuppression is more intense at this stage), rejection, graft vascular disease as a late complication, neoplasms in the late postoperative period. With the application of the Whoqol-Bref questionnaire, individuals perception of the impact that diseases have on their lives is measured. As a result of this study, more than half of the patients were satisfied in all areas: physical, psychological, social relations and the environment. And when questioned the quality of life, women showed a higher level of satisfaction than men.

Discussion: Transplantation occurs with heart failure (HF) as the underlying disease, half of which is classified as chagasic cardiomyopathy. Regarding the patients postoperative clinical evolution, it was discovered in a study that most patients developed severe HF and had a cardiac event during follow-up, with left ventricular systolic function frequently preserved and coronary angiography frequently abnormal, but it can be normal or almost normal. Regarding the aged graft, it often shows coronary lesions and a restrictive physiology, presenting cardiac allograft vasculopathy and myocardial fibrosis. The clinical manifestations of such pathology are: sudden death, ventricular and supraventricular arrhythmias, acute coronary syndromes and congestive HF.

Conclusion: Based on these statements, it is admitted that complications are many and multifactorial and the main causes of death result from the mandatory immunosuppression of these patients, however, despite this, surgical intervention remains the best option for patients with severe HF, and it is up to us elucidate optimization of postoperative treatments in order to guarantee their survival. Despite the great risks and complications, there was predominant satisfaction in all areas investigated, by patients after surgery.

Keywords: Heart transplantation; Postoperative complications; Reproducibility of results.