

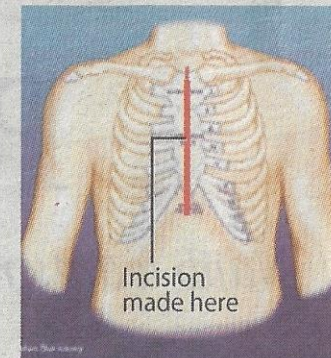
2 make history with heart op



DIFFERENT SURGERIES FOR DISEASED MITRAL VALVES

Conventional surgery:

- Median sternotomy
- Invasive & traumatic
- Direct vision



Minimally invasive approach:

- Small incisions
- No separating of the breastbone or ribcage
- Direct and/or video-assisted

Heart Positioner



BENEFITS OF MIMVR FOR PATIENTS

- Less pain, post-operative comfort
- Fast recovery and rehabilitation
- Less painkiller use
- Improved cosmetics result
- Facilitates redo surgery

Source: National Heart Institute

Tang May Yin, 60, and Zainab Abdullah, 53, underwent minimally invasive mitral valve repair operations last year at the National Heart Institute. One of the surgeons was Dr Jeswant Dillon (inset). — NST pictures by Rizal Braim

By Annie Freeda Cruz

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KUALA LUMPUR: Matron Zainab Abdullah, 53, of Sultanah Aminah Hospital was on cloud nine when she graduated in biomedical and health sciences last November.

But her happiness was short-lived. Three days after receiving her degree, she suffered an attack of asthma.

“I was fighting for breath. I just did not know what was happening to me. I was rushed to hospital and was warded,” said Zainab.

Cardiologists and cardiothoracic surgeons who ran a battery of tests finally diagnosed her as having a dis-

eased mitral valve in the heart and referred her to the National Heart Institute (IJN).

“I was not ready for admission as I was supposed to go on an attachment in New Zealand and I had just been promoted and posted from Batu Pahat Hospital to Sultanah Aminah Hospital.

“I took up my new posting and on Nov 23, went to IJN. I was told that I had to wait two months before I could be operated on.”

On Nov 29, Zainab received a call asking her to get admitted for a minimally invasive mitral valve repair (MIMVR), the first of its kind in the country.

The surgery went “live” before 500

surgeons and doctors who had gathered for the Kuala Lumpur Valve Summit 2009 at a hotel here.

On Dec 2, cardiothoracic surgeons Dr Mohd Azhari Yakub, Dr Jeswant Dillon and Dr Patrick Perier from Germany performed the MIMVR on Zainab. “It was not open heart surgery,” she said.

Dr Jeswant said the repair was done by way of a small incision and without separating the breastbone or ribcage as would have been the case in conventional surgery.

Another patient, Tang May Yin, 60, of Ampang, also underwent the same procedure on Dec 2.

The mother of five and grandmother of two said she was happy that she

was now able to walk, climb stairs and even eat without being breathless.

Like Zainab, she, too, had a sudden onset of breathlessness and water retention in the lungs.

“I was hospitalised for 39 days from other complications,” said Tang. Her husband Chang Bun Sun, 61, a retired sub-contractor, is relieved to see his wife looking good and healthy again.

From 1992 until last year, IJN had done about 1,400 conventional mitral valve repairs.

Dr Jeswant said children could have abnormal mitral valves from birth. Often, the mitral valve became abnormal with age or as a result of rheumatic fever, he added.