

The Underestimated Risk of Valvular Heart Disease



According to findings from a study published in the British Journal of Medicine, the development of valvular heart disease in patients with chronic heart failure is underestimated and rarely treated.

In the past, mitral regurgitation has been interpreted as part of the progression of heart failure rather than a treatable disease in its own right. However, it is important to understand that mitral regurgitation is a disease, in which the valve between the left atrium and left ventricle starts to leak, so that blood refluxes with each heartbeat. The most typical symptoms of mitral regurgitation include increasing fatigue, increased shortness of breath on physical exertion and water retention in the lungs and legs. Mitral regurgitation may also be associated with atrial fibrillation. The disease is associated with a significant reduction in life expectancy and frequent hospital referrals.

Mitral regurgitation is particularly dangerous and more common in patients with chronic heart failure as reported by study researchers who analysed data from more than 13,000 patients with heart failure and who had a cardiac ultrasound scan. Findings suggest a correlation between patient mortality and mitral regurgitation.

"Mitral regurgitation has hitherto often been interpreted as the progression of heart failure rather than as a treatable disease in its own right. The results of the study show that mitral regurgitation is much more prevalent in patients with chronic heart failure than was previously thought and that it has a particularly negative impact on the long-term prognosis of the patient," explains Georg Goliashch from the Division of Cardiology within the Department of Medicine II at Vienna General Hospital and MedUni Vienna.

Mitral regurgitation has rarely been treated as a separate disease in patients with chronic heart failure mainly due to the lack of treatment options. The only option for treating mitral regurgitation in the past was open-heart surgery, an intervention that is considered much riskier in patients with chronic heart failure.

However, in recent years, there has been increased focus on heart valve disease and new, minimally invasive treatment options have been developed. It is now possible to treat patients with heart valve disease who could not have been treated previously or for whom treatment would have carried a higher risk. Transcatheter techniques can be carried out with much less risk.

Study findings also show that the probability of developing a heart valve defect increases with age. Because of the increasing life expectancy of the general population, it is safe to assume that the number of cases of this disease are likely to increase in the near future. Hence, clinicians need to be prepared for these challenges.

Source: [Medical University of Vienna](#)

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