

Images in clinical medicine

Early pannus formation

Ismail Oughebbi

Corresponding author: Ismail Oughebbi, Department of Cardiovascular Surgery, Ghassani Hospital, Fes, Morocco. goulmima87@gmail.com

Received: 09 Mar 2023 - Accepted: 07 Apr 2023 - Published: 20 Apr 2023

Keywords: Early, pannus, valve, deterioration

Copyright: Ismail Oughebbi et al. Pan African Medical Journal (ISSN: 1937-8688). This is an Open Access article distributed under the terms of the Creative Commons Attribution International 4.0 License (https://creativecommons.org/licenses/by/4.0/), which permits unrestricted use, distribution, and reproduction in any medium, provided the original work is properly cited.

Cite this article: Ismail Oughebbi et al. Early pannus formation. Pan African Medical Journal. 2023;44(187). 10.11604/pamj.2023.44.187.39601

Available online at: https://www.panafrican-med-journal.com//content/article/44/187/full

Early pannus formation

Ismail Oughebbi^{1,&}

¹Department of Cardiovascular Surgery, Ghassani Hospital, Fes, Morocco

[&]Corresponding author

Ismail Oughebbi, Department of Cardiovascular Surgery, Ghassani Hospital, Fes, Morocco

Image in medicine

Structural valve deterioration is commonly defined an intrinsic permanent change of the as bioprosthesis due to leaflet calcification, thickening, pannus formation, tear, or disruption. The resulting deterioration leads to stenosis and/or intra-prosthetic regurgitation. Here we present the case of a 75-year-old patient who underwent aortic valve replacement with a bioprosthetic valve. Predischarge transthoracic echocardiography revealed an aortic prosthesis with normal gradients. Three years later, the patient reported exertional dyspnea. Transthoracic echocardiography was performed and showed a high transvalvular pressure gradient of 80 mmhg with restricted mobility of the leaflet caused by





subprosthetic tissue. Redo aortic valve replacement was planned and surgical resection

was performed showing pannus ingrowth in both aortic and ventricular side of the bioprosthesis.

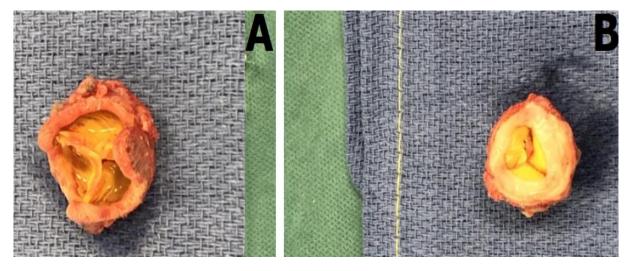


Figure 1: surgical specimen of the bioprosthetic aortic valve; A) circumferential fibrous tissue ingrowth in both aortic; B) ventricular side compatible with pannus