

# Aortic Regurgitation

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## What is it?

The heart has a series of valves that encourage the blood to flow in the correct direction when it contracts. The main outlet valve is called the **Aortic valve**. It opens to allow the blood to be expelled from the pumping chamber into the main blood vessel the Aorta and onto the vital organs and after the heart contracts it closes to prevent blood leaking back into the heart chamber. **Regurgitation** or leaking, occurs when the valve fails to close adequately. The leakage means that the heart has to expel more blood each time it beats leading to over expansion and increased workload.

## What causes it?

Valve leakage can occur when the valve is abnormal from birth when it has only two opening components instead of three, or be damaged by rheumatic fever sustained in earlier life. It can also leak because the main blood vessel coming out of the heart, the aorta is dilated or in association with rarer general medical conditions.

## What are the risks?

Significant regurgitation of the valve leads to an increased load on the heart that will eventually make it fail. At a late stage this can manifest with reduced energy levels or shortness of breath. Mild regurgitation can be followed by observation. Valves that function abnormally are predisposed to infection. It is advised that patients notify their dentists that they have a murmur and receive appropriate antibiotics prior to dental work.

## How do you treat it?

If that leak is severe open heart surgery is the best treatment to replace the leaking valve and replace it with a new "artificial" **prosthetic** valve. There are two types of valve, mechanical or tissue. Mechanical valves are made from Carbon pyrolite and have the advantage of lasting for many years but require life long blood thinning with Warfarin tablets. Tissue valves have the advantage of often not needing blood thinners but tend to not last as long.