**LONG TERM FOLLOW-UP OF TRANSCATHETER DEVICE CLOSURE OF PM-VSD**

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Ventricular septal defects (VSD) represent up to 40% of all congenital heart malformations. Percutaneous transcatheter closure of peri-membranous VSD

(PM-VSD) was adopted as an acceptable mode of management but was held in some centers due to complications of early and late complete heart block. We performed 55 cases of transcatheter PM-VSD closure between October 2002 and July 2007. They were 24 (43.6%) males and 31 (56.4%) females subjects with a mean age of 9.8 years, youngest 1.7 years and eldest 45 years. The mean weight was 29.3 kg, maximum weight was 67 kg and the minimum was 9.5 kg. The mean follow up till last visit was 39.8 months with the longest of 94 months. All patients had normal function post intervention. There was no leak in 51(92.7%) patients, tiny leak in small leak in 4 (7.3%) patients with no hemodynamic consequences. 45 (86.5%) patients had no valve complications. Trivial aortic valve regurgitation developed in 6 (11.5%) patients. One (1.8%) patient developed immediate moderate tricuspid valve regurgitation that improved to trivial after 5 months. Two patients (3.6%) developed complete heart block, one early (immediate during the procedure) and the other was late after 6 years.

Conclusion: Percutaneous closure of PM-VSD is effective. Though, the challenging risk of heart block prevents further application of the procedure till new device design is out. From our experience, continued follow up is warranted for all the patients to monitor late complication.