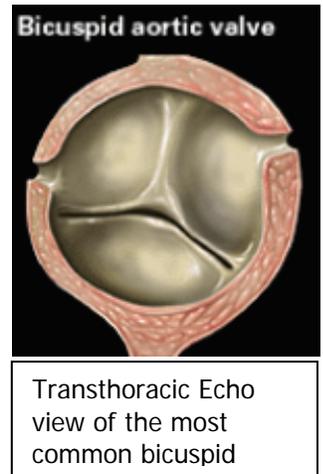


31. Bicuspid Aortic Valve



Incidence:

- Most common congenital abnormality (except for MVP).
- 2% of population
- Found in 60% of pts with aortic stenosis between ages of 15-65 yrs
- 2.5x more common in males over females

Exam Findings:

- Early systolic ejection click which is best heard at apex and does not vary with respiration
- Soft, early, midsystolic murmur at RUSB
- Soft murmur of AR may also be heard

Diagnostic Test:

- 2-D Echo (78% sensitive)
- TEE occasionally necessary if TTE in determinant

Natural History and Prognosis:

- Most common complication is calcification of AV
- 85% of cases of calcific AS before age 70 are congenitally bicuspid
- Abnormal hemodynamic stresses result in progressive fibrotic thickening and calcification of the leaflets with loss of mobility
- This is most common cause of AS in pts under age 65 (After age 65, most AS occurs in calcific degeneration of a normal tricuspid valve)
- Less common ramifications is predominant AR
- May first be recognized during infective endocarditis Dx

Treatment/Prognosis:

All pts with recognized congenital bicuspid AV should receive prophylaxis
 Follow asymptomatic pts as one would for AS or AI

