

# Haemophiliac undergoes open heart surgery

Chennai, Apr 11:

A 38 year old Binu Nettikardan from Kerala was admitted at MIOT with the diagnosis of a large aneurysm of the ascending aorta and a leak in the aortic valve. The aneurysm was very large and was life threatening.

He had consulted many doctors and all of them had told him that it was too risky to do anything. He was referred to MIOT for further treatment.

Finally, he was referred to MIOT International, where V.V. Bashi, chairman of Centre for Thoracic and Cardiovascular Care, worked with doctors from six different specialities to find a way to operate on Binu.

The biggest challenge in the operation was that the patient was suffering from haemophilia, a rare disorder in which the blood does not clot normally as it lacks sufficient blood-clotting proteins. This disease mostly affects men. Patients with haemophilia may bleed for a longer time after an injury than they would if their blood clotted normally. Using a multi-disciplinary approach, doctors used clotting factors to control the

## First of its kind performed by MIOT Hospital



Dr. Chezhan Subash – HOD - Haematology, Haemato-Oncology and Bone Marrow Transplant  
Mrs. Usha Parthasarathy – Ex-Vice President, Development Hemophilia Federation of India  
Mrs. Mallika Mohandas - Chairman – MIOT International  
Mr. Binu - Patient  
Dr. V.V. Bashi, Chairman – Centre for Thoracic and Cardio Vascular Care, MIOT International

bleeding and completed the surgery. Dr V V Bashi, who headed the surgical team, said that patients with haemophilia needed to be handled with care during surgery as even after small procedures, they can bleed profusely which can turn fatal.

“Another problem was that we could not use artificial metal valve. Such a valve would need blood thinning tablets for the rest of his life. If given blood thinning tablets,

the patient can die of bleeding,” doctor said. If a biological artificial valve is used it will last for only 10 to 12 years and he will need another surgery. So they decided to repair his valve along with the aneurysm surgery.

“During the surgery on March 23, every bleeding point had to be stopped before we proceeded to the next step. We gave clotting factors during the operation which controlled bleeding and successfully

completed the surgery,” said Bashi. Doctors replaced the ascending aorta with a synthetic graft and Nettikardan’s valve was then repaired and re-implanted into the graft.

The bleeding was controlled effectively post the seven hour surgery and the patient was shifted to the intensive care unit. “His post-operative period was uneventful, and e made a remarkable recovery. He had to be given clotting

factors post operatively as well,” said the surgeon.

P.V.A. Mohandas, founder and managing director, MIOT International, said, “Most hospitals would not be willing to operate on patients with haemophilia, even if they have minor conditions. An open heart surgery could be very risky,” he said.

Binu can now lead a normal life after a month’s rest. He will be discharged on Saturday.