Abstract

Percutaneous transluminal balloon valvuloplasty is currently the treatment of choice for most cases of pulmonary valve stenosis. In the first series of cases performed at Kenyatta National Hospital, six patients aged 4 to 24 years with severe pulmonary valve stenosis and no other associated cardiac lesions were selected for the procedure. Immediately following balloon valvuloplasty, the pressure gradients across pulmonary valve measured by both echo-Doppler technique and cardiac catheterisation dropped very significantly (P < 0.001). Catheterisation peak systolic gradients (psg) dropped from 162.5 +/- 23.7 to 56.5 +/- 19.0 while echo-Doppler pressure gradients dropped from 112.0 +/- 11.9 to 42.8 +/- 16.0. No complications occurred during or after the procedure. This initial short-term experience in our set-up confirms the safety and effectiveness of this procedure. Furthermore, this procedure is much cheaper and technically easier to perform than cardiac surgery.