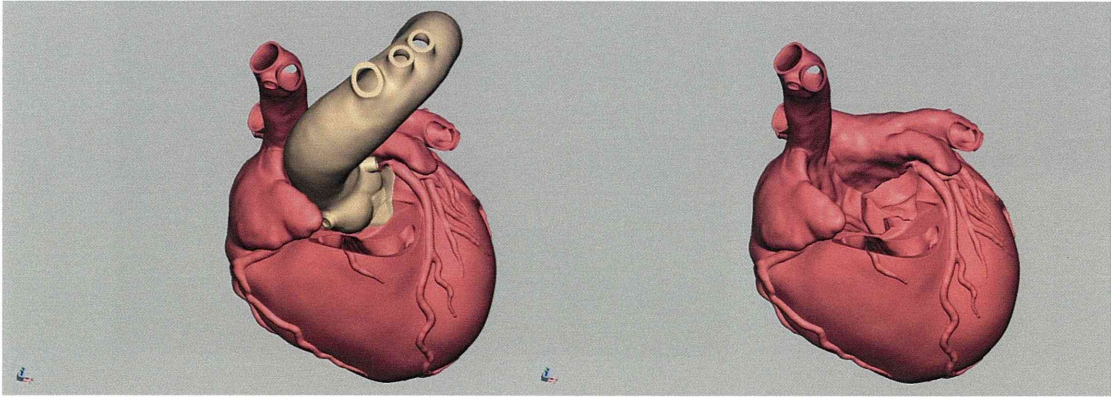
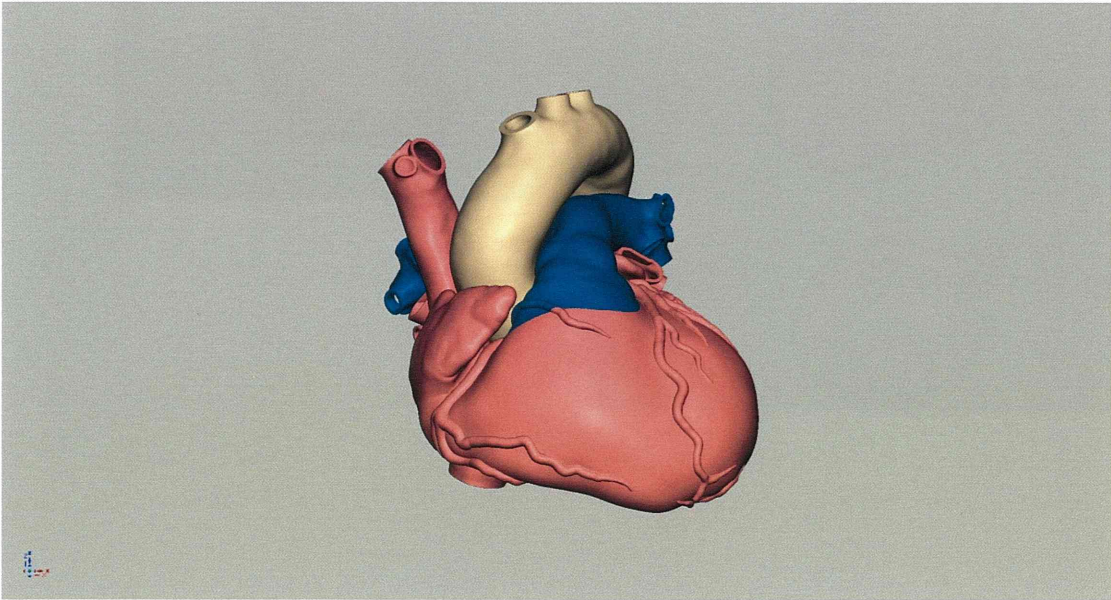
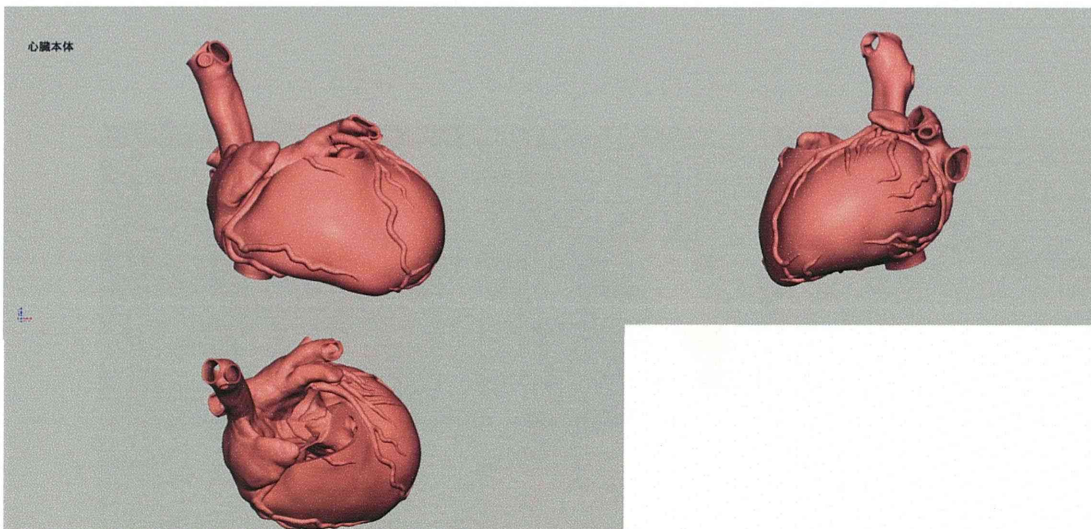
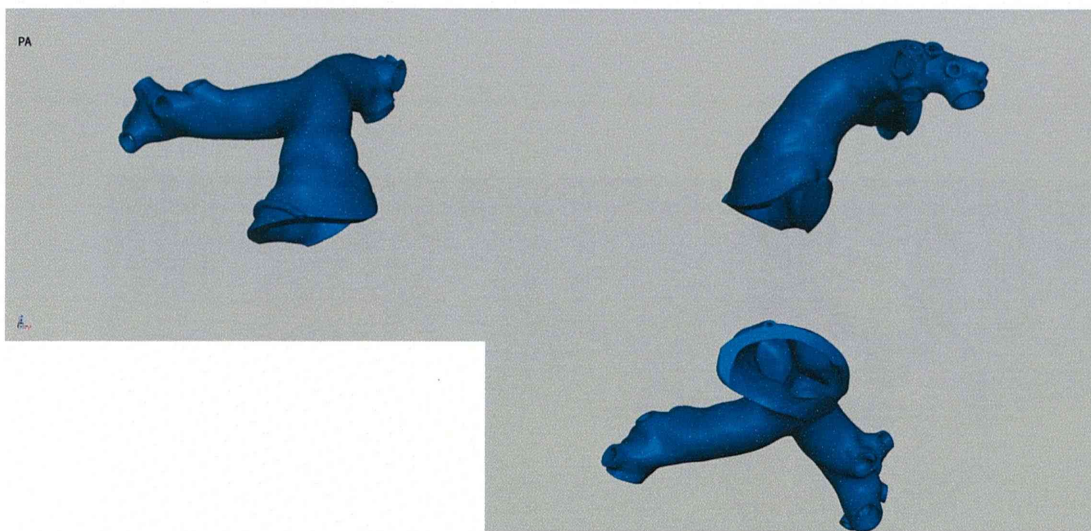
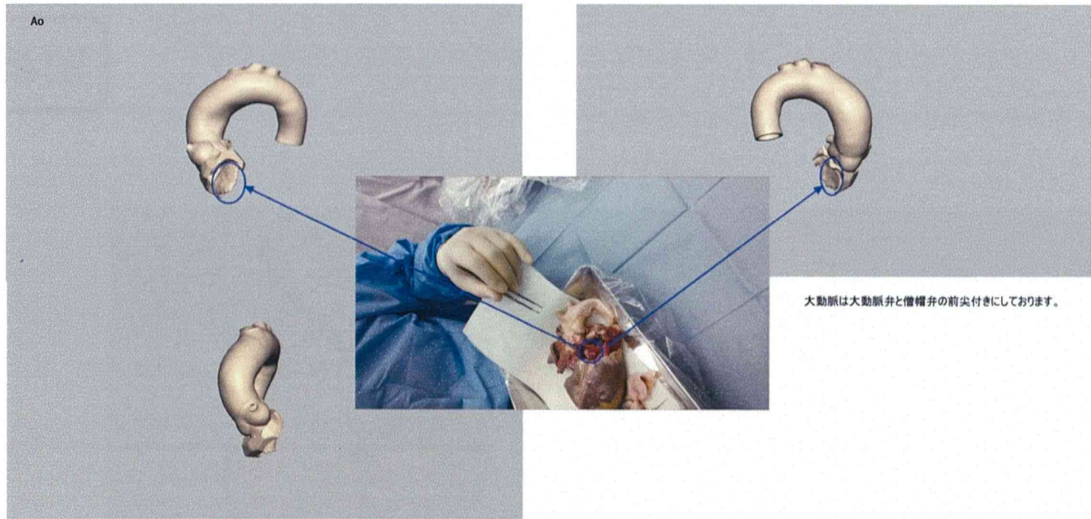


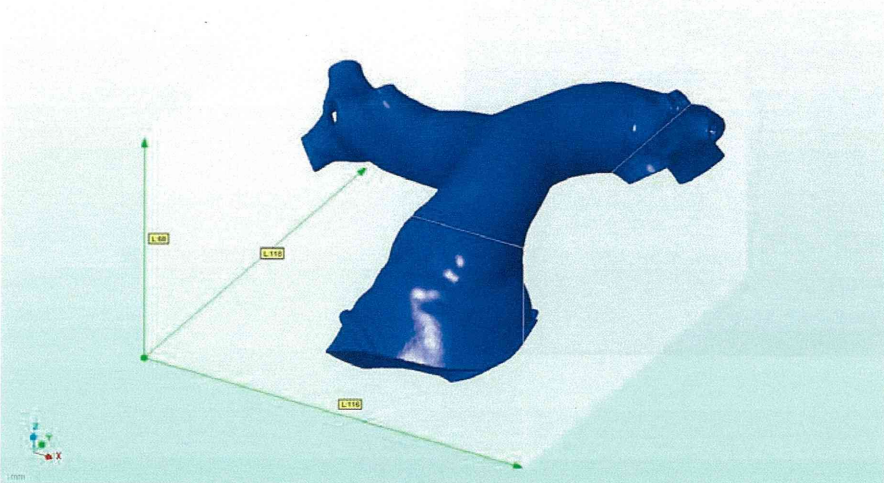
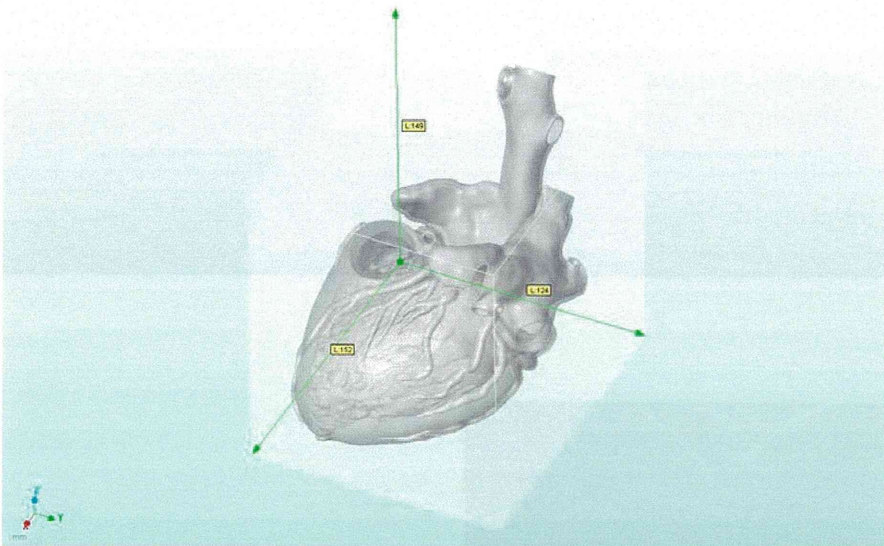
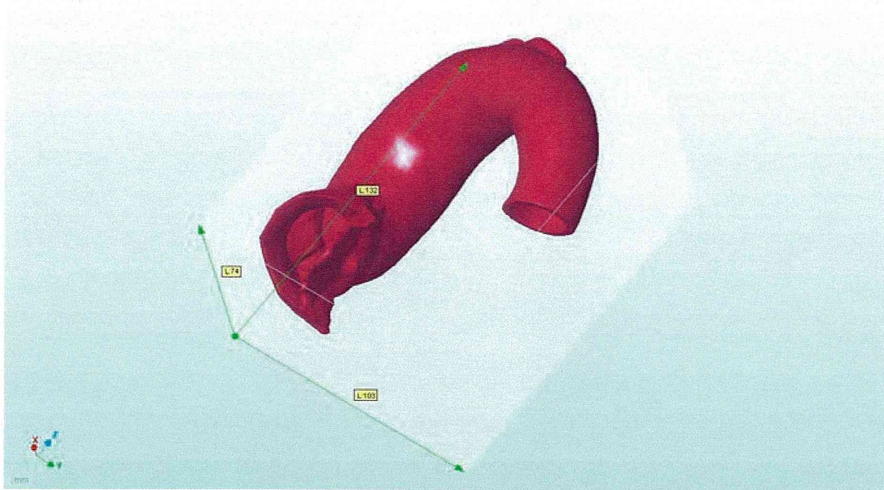
PA切り分け後のイメージ



Ao切り分け後のイメージ









[Ⅲ]研究成果の刊行に関する一覧表

研究成果の刊行に関する一覧表

雑誌

発表者氏名	論文タイトル名	発表誌名	巻号	ページ	出版年
Kitamura S, Kobayashi J, Fujita T, Minatoya K, Ichikawa H, Nakatani T, Ogawa M, Taniguchi S	Mid-to Long-term Outcomes of Cardiovascular Tissue Replacements Utilizing Homografts Harvested and Stored at Japanese Institutional Tissue Banks	日本組織移植学会雑誌	13(1)	71	2014
石垣理穂, 小川真由子, 竹脇奈々, 豊田一則, 藤田知之, 中谷武嗣	国立循環器病研究センターにおける潜在的ドナー把握の試み	日本組織移植学会雑誌	13(1)	132	2014
小川真由子, 藤田知之, 石垣理穂, 秦広樹, 湊谷謙司, 市川肇, 中谷武嗣, 小林順二郎, 北村惣一郎	厚生労働科学研究費補助金交付事業の取り組み	日本組織移植学会雑誌	13(1)	133	2014
小川真由子, 石垣理穂, 中谷武嗣	組織移植コーディネーターからみた移植医療の現状と展望	Organ Biology	21(3)	63	2014
猪野崇, 藤田知之, 秦広樹, 島原佑介, 佐藤俊輔, 小林順二郎	ホモグラフト大動脈弁を用いた大動脈基部置換術の有用性	心臓血管外科学会雑誌	44	480	2014

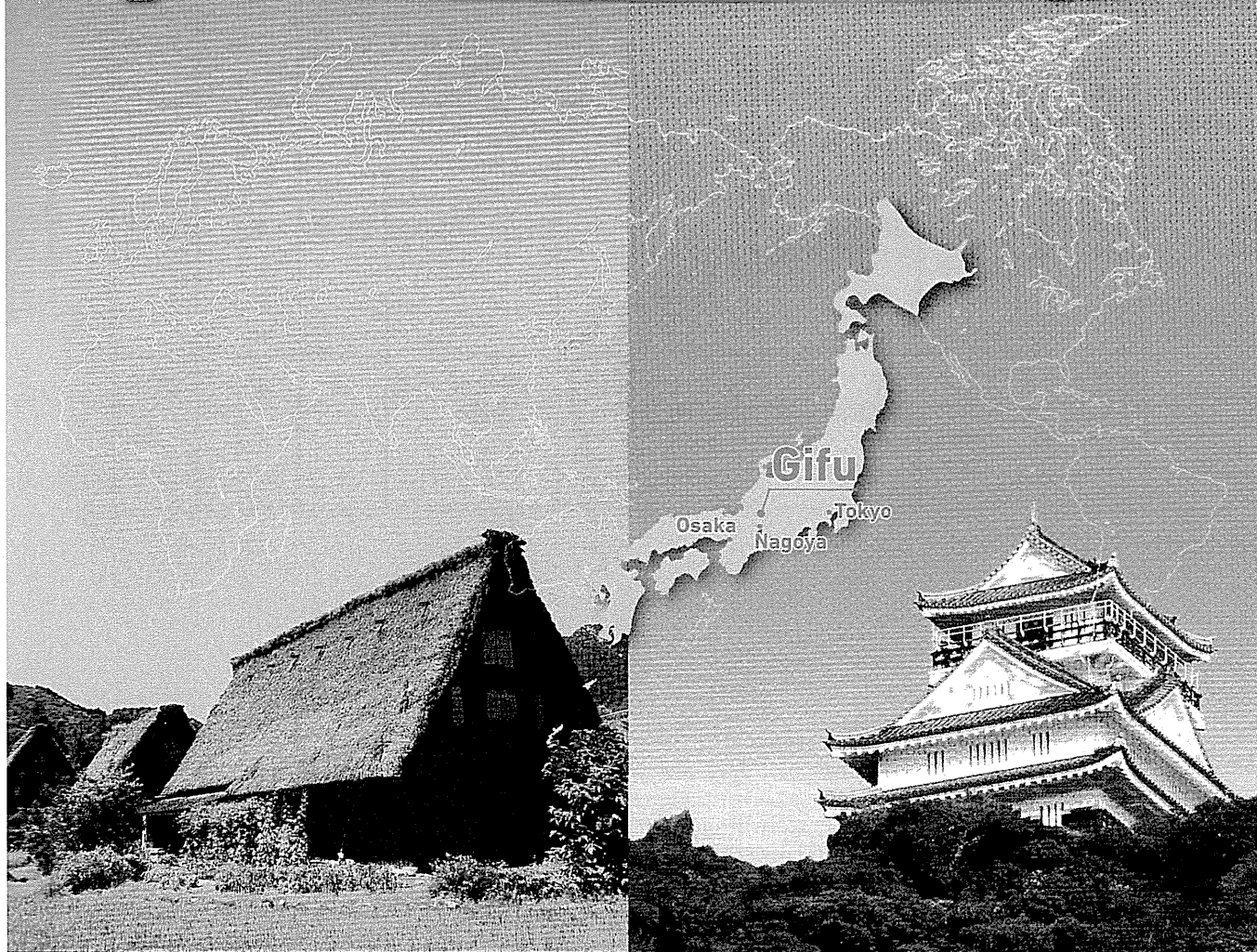
APASTB / JSTT

Combined Scientific Meeting in Japan 2014

*The 15th Asia Pacific Association of Surgical Tissue Banking
The 13th Japanese Society of Tissue Transplantation*



PROGRAM & ABSTRACTS



Dates **August 27 Wed - 29 Fri , 2014**
Venue **Nagaragawa Convention Center**
President **Yudo Hachiya, M.D.,Ph.D.** (Hachiya Orthopaedic Hospital)

<http://www.doc-japan.com/apastb-jstt2014>

Mid- to Long-term Outcomes of Cardiovascular Tissue Replacements Utilizing Homografts Harvested and Stored at Japanese Institutional Tissue Banks

Soichiro Kitamura¹⁾, Junjiro Kobayashi¹⁾, Tomoyuki Fujita¹⁾, Kenji Minatoya¹⁾, Hajime Ichikawa¹⁾, Takeshi Nakatani¹⁾, Mayuko Ogawa¹⁾, Shigeki Taniguchi²⁾

¹⁾National Cerebral and Cardiovascular Center

²⁾Nara Medical University

Key Words

1. Homograft (Allograft) Valve

2. Endocarditis

3. Aortic Root Replacement

Purpose:

We reviewed our clinical experiences with cardiovascular homografts harvested and preserved at our institutional tissue banks.

Methods:

Since our bank was first established in Japan in 1990, 74 patients have undergone various surgical procedures using homografts. We classified them into 5 groups according to the procedure: Group I, subcoronary implantation of a homograft aortic valve; Group II, homograft aortic root replacement for active native or prosthetic endocarditis; Group III, homograft aortic replacement for mycotic aortic aneurysms or infected grafts; Group IV, pulmonary homografts in the Ross operation; and Group V, pulmonary homograft conduits for complex congenital heart diseases.

Results:

The 9 to 10-year survival rates were good and acceptable, respectively, for the patients in all 5 groups. The infection recurrence rate was low (8%). Cardiac event-free rates, including deaths, were 0.57 in group I, 0.58 in II, 0.75 in III, 0.81 in IV and 0.69 in group V operations. The rates of structural homograft deterioration suggest that homografts deteriorate more rapidly after subcoronary implantation than aortic root replacements ($p=0.058$).

Conclusions:

Subcoronary implantation should probably be abandoned for routine aortic valve replacement, but the continued use of homografts will provide valuable alternatives for patients with active infectious cardiovascular diseases. For the Ross operation, pulmonary valve homografts showed good durability.

The 15th Asia Pacific Association of Surgical Tissue Banking
August 29, 2014

**Mid- to Long-term Outcomes of
Cardiovascular Tissue Replacements
Utilizing Homografts Harvested and Stored
at
Japanese Institutional Tissue Bank**

Seichiro Kitamura, M.D.¹, Junpro Kobayashi, M.D.², Tomoyuki
Kiyota, M.D., Kazuo Minamiwa, M.D., Tetsuo Takikawa, M.D.

1) National Cerebral and Cardiovascular Center
2) Nara Medical University



