underlying diagnoses were tetralogy of Fallot (n = 44, 33%) and pulmonary atresia +/- ventricular septal defect (n = 26, 19%). The most common previously employed conduit was a homograft (n = 91, 67%). Indications for PPVI included conduit stenosis (n = 75, 56%), regurgitation (n = 12, 9%) or mixed disease (n = 47, 35%). Immediate haemodynamic outcome was good in 90% with peak gradients decreasing from mean 40 mmHg to mean 11 mmHg (p = 0.047). Risk of severe procedural complication was low. There was one early post procedure death due to device embolisation within the RVOT. In follow-up (median 21 months, range 0–98 months), there were two further deaths, unrelated to PPVI. Thirteen individuals developed IE (annualised incidence rate 4.6% per patient-year). 9 of these individuals required valve re-replacement. Two further individuals underwent valve replacement without IE.

Conclusions: PPVI as performed in selected ANZ centres provides a relatively safe and feasible method of rehabilitat- ing the RVOT.

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Poorer Self-Reported Physical Health and Higher Anxiety in Young Adults with Previous Coarctation Repair

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Background: Little is known about the impact of a coarcta- tion repair on the functional outcomes of young adults. This study aimed to determine (1) the functional and mental health status of young adults with previous coarctation repair; and (2) the impact of late hypertension on their quality of life.

Methods: A cross-sectional study using validated self-re- ported questionnaires (Short Form 36 version 2 [SF-36v2], Beck Depression Inventory [BDI], and State-Trait Anxi- ety Inventory [STAI]) was performed in 54 patients aged 15–47 years with previous paediatric coarctation repair. Questionnaire scores were compared to healthy age- and gender-matched controls. Patients’ previously published 24-hour blood pressure monitoring results were included.

Results: Late hypertension was present in 64% (34/54) at a mean of 29 ± 8 years after coarctation repair. SF-36v2 mean physical component summary score was significantly lower in coarctation patients compared to controls (53.1 ± 6.8 vs. 56.0 ± 4.7, p = 0.02), but there was no significant difference in mean mental component summary score (p = 0.2). SF-36v2 mean role emotional score tended to be associated with 10 mmHg increases in mean 24-hour systolic blood pressure (regression coefficient 4.3, p = 0.06). STAI mean trait anxiety score tended to be higher in coarctation patients compared with controls (36.6 ± 9.0 vs. 33.5 ± 7.8, p = 0.06). There was no significant difference in BDI scores between patients and controls.

Conclusion: Young adults with previous coarctation repair report poorer physical health and higher anxiety compared to healthy controls. Strategies to improve self-reported physical health and anxiety should be explored. Long-term assessment of quality of life outcomes in coarctation patients is warranted.

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Psychological Experiences of Siblings of People with a Fontan Circulation: Insights from the Australian and New Zealand Fontan Registry

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Objective: To examine the prevalence and predictors of psychological wellbeing among siblings of children, adoles- cents and adults with a Fontan circulation enrolled in the Australian and New Zealand Fontan Registry.

Methods: Siblings aged ≥6 years of patients enrolled in the ANZ Fontan Registry, who were at least 12 months post-Fontan completion were invited to complete a suite of validated psychometric instruments capturing a range of demographic, environmental and clinical factors.

Results: Eighty-two siblings from 63 families of patients enrolled in the ANZ Fontan Registry were included in this analysis. Siblings ranged in age from 6–45 years (M=15, SD=8.1), 52% were brothers, most (74%) were currently full- or part-time employment, and 10% had a university degree. Depressive symptoms requiring clinical intervention were reported by 38% of adult siblings, and 20% of child and adolescent siblings. Over one-quarter (28%) of adult siblings, and 16% of child and adolescent siblings, reported symptoms of anxiety warranting clinical assessment. Most participants (82%) reported feeling worried about their sibling’s heart con-