FIGURE 1. Well-preserved valve function of the Melody valve (A-D) and encouraging gross inspection (F-H).

a complex single ventricle patient to heart transplantation. Given the well-preserved valve function and the encouraging gross inspection of the implanted Melody valve, the strategy may also be used as an adjunctive treatment in the staged single-ventricle palliation in patients with irreparable AV valve regurgitation.

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LESSONS LEARNED FROM MELODY VALVE RETRIEVED AT TRANSPLANTATION

Reply to the Editor:

In their letter to the Editor, Honjo and co-authors¹ provide an update on a patient who underwent common atrioventricular valve replacement with a stented bovine jugular vein graft

FIGURE 1. Melody (Medtronic, Minneapolis, Minn) valve examined at cardiac transplantation, 3 months after implantation.

Author has nothing to disclose with regard to commercial support.

(Melody; Medtronic, Minneapolis, Minn) valve. At the time of cardiac transplantation, the Melody valve was removed.

An important finding is that the explanted valve demonstrates thin, mobile leaflets. From the images taken, it appears that the housing surrounding the valve leaflets is encased in pannus, but the leaflets inside the stent are remarkably spared. This finding suggests that the valve housing shields the internal apparatus from deleterious pannus ingrowth and allows the valve to retain pliability. The persistence of leaflet pliability may contribute to ongoing expandability that has been demonstrated in other clinical settings.²

The authors are to be commended for innovative use of the Melody valve to salvage a difficult clinical situation. Similar to their experience, the first patient to receive a mitral Melody in our center was a neonate who required

bridge to transplantation. The valve, explanted 3 months after implantation, showed little pannus ingrowth onto the valve leaflets (Figure 1), sparking interest in using this device as an expandable valve for children. The strategy of valve replacement to stabilize the circulation until transplantation is enabled by the availability of such technology and should be considered in appropriate clinical circumstances.

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