

Strategies on dealing with non-compliant patients with chronic pain: An applied behavioral analysis approach on fear avoidance

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Abstract

The purpose of this study was to evaluate the early outcome after total correction of tetralogy of fallot in 180 consecutive patients with a mean age of 5-30 years underwent repair of surgery in a single center Amiri medical complex Kabul Afghanistan between August 2015 and October 2018. 8 patients had initial palliative operations (modified BT shunt) in outside centers and referred to us for total correction, trans annular pericardial patch was inserted in 133(73,8%) patients, 32(17,7%) patients repaired trans atrial total correction (ventricular septal defect, right ventricular out flow tract muscle band resection and pulmonary valvotomy through right atrium) for 15(8,3%) patients with absent pulmonary valve monocuspid and bicuspid pulmonary valve reconstructed with pericardial patch. 22 patients had small residual ventricular septal defect and none of the patients had complete heart block (0%). Total correction of tetralogy of fallot can have low operative mortality and provide excellent short and long term survival, this experience suggests that key factor in total correction of tetralogy fallot is to correct the pathology completely.

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