RESULTS AND CONCLUSION

In the period of 16 years, from 1960 to June 1977, mitral commissurotomy was performed in 913 cases in the department of thoracic and cardio-vascular surgery at Ain Shams University (see Graph I and Table 1).

In the preoperative evaluation some of our cases, diagnosed clinically as mitral stenosis were associated with minor degrees of incompetence; the operative decision was still mitral commissurotomy because the symptoms and the severity of the condition were related to the stenosis and not to the incompetence. Others were discovered to have mitral incompetence operatively although clinically diagnosed as isolated mitral stenosis, the total number of cases was 66 (7.24 %). The incompetence did not disappear after the operation in any of them, the degree of incompetence was mostly stationary but in a small number, 13 cases, the degree of incompetence increased. (See Table 5).

Those patients presenting to our department with atrial fibrillation (see Table 2 and Graph 3) or history of embolization e.g. hemiplegia (see Table 4)