

# 2014 TCTAP

## Wrap-Up Interview

# Transcatheter Aortic Valve Implantation

**Moderator**

**Alain G. Cribier**

**Interviewees**

**Eberhard Grube, Martin B. Leon, Ian T. Meredith**

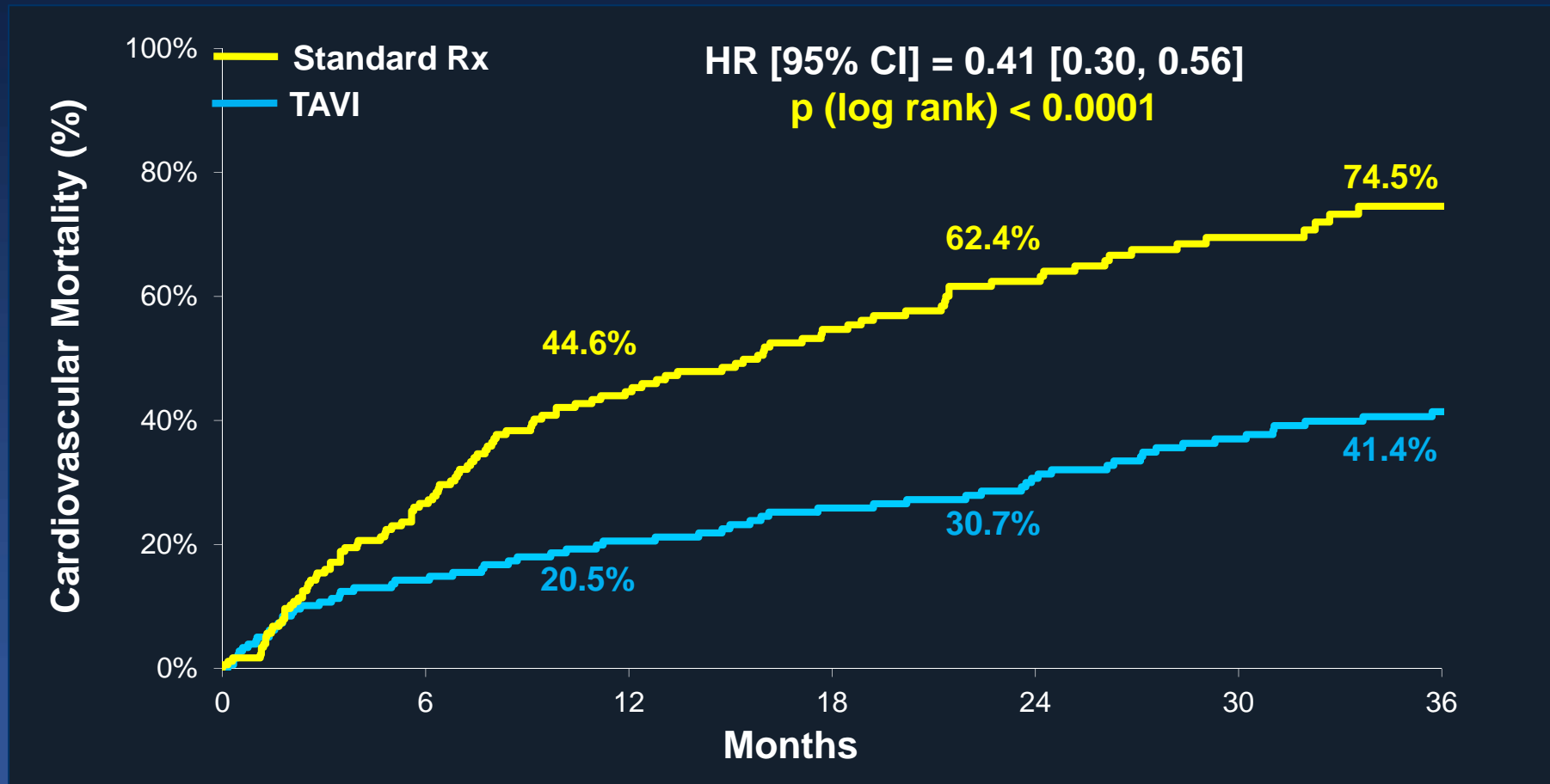
# Issues in Brief

## **Transcatheter Aortic Valve Implantation**

- 1. Updated Evidence and Guideline**
- 2. Indication for Intermediate Risk Patients**
- 3. Valve in Valve for Failed Prostheses**
- 4. Complications**
- 5. New Devices**

# Edward Valve: PARTNER B

## TAVI vs. Standard Tx

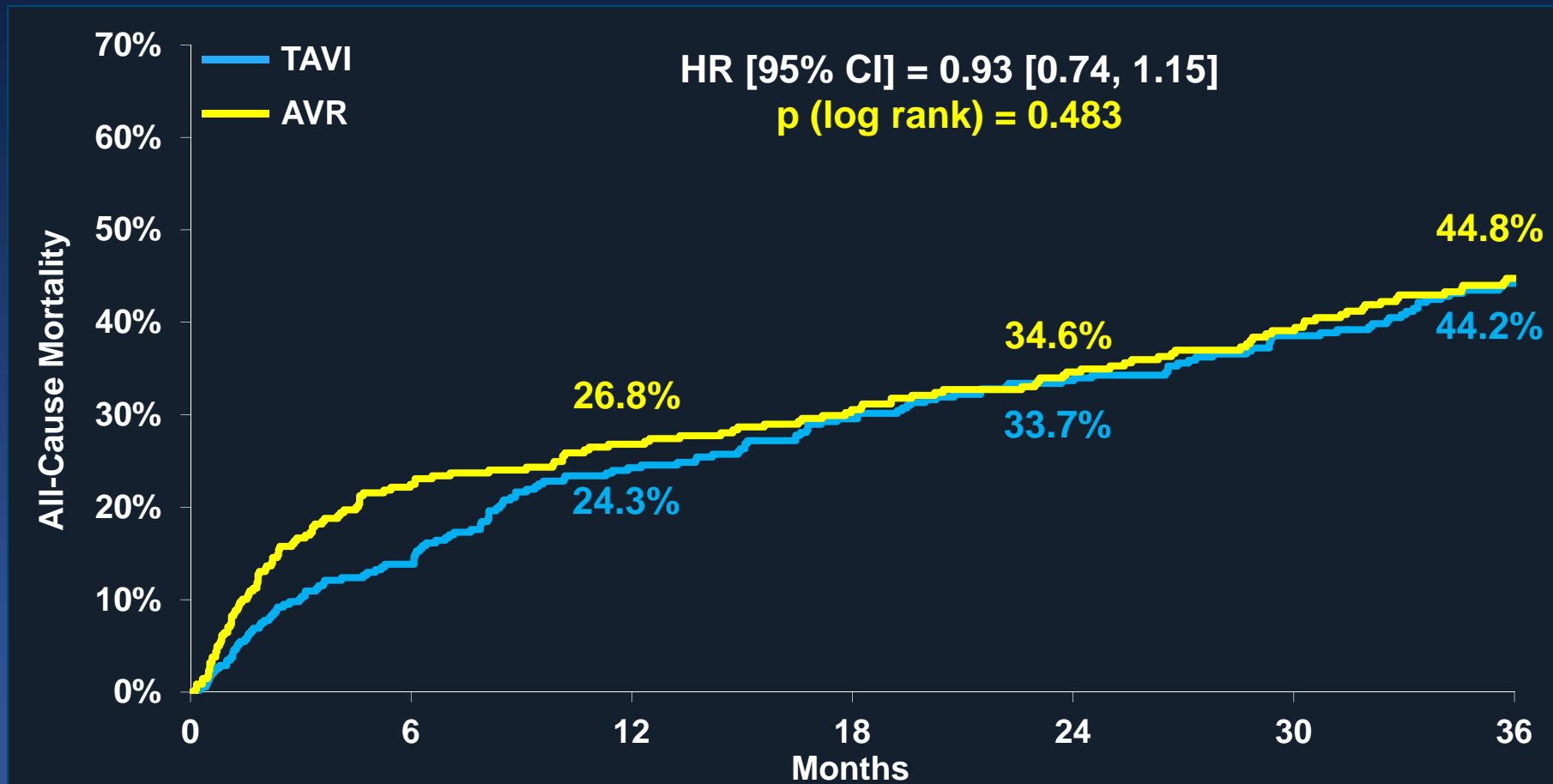


No. at Risk

	0	6	12	18	24	30	36
Standard Rx	179	121	85	62	46	27	17
TAVR	179	138	124	110	101	88	70

# Edward Valve: PARTNER A

## TAVI vs. AVR

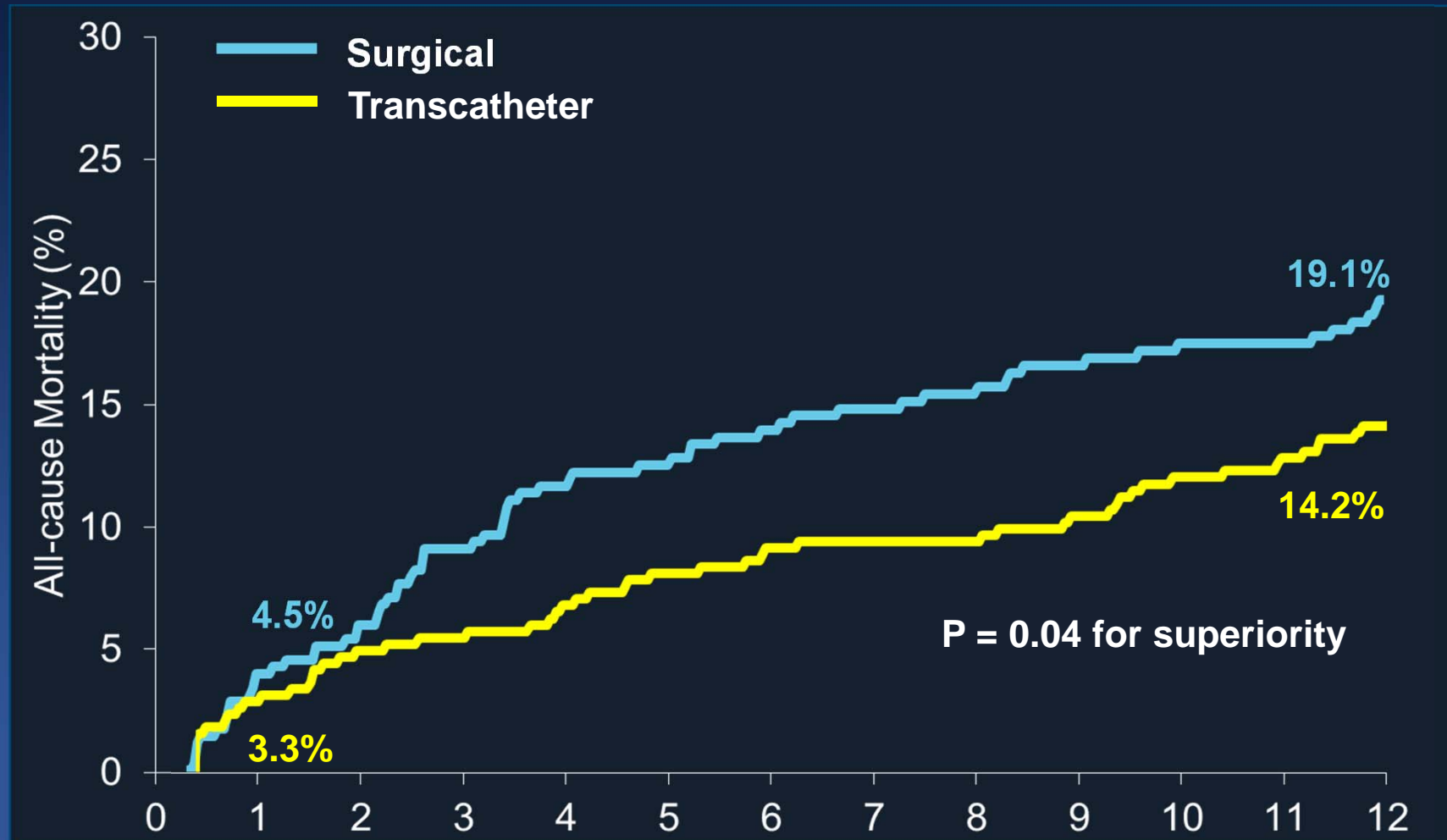


No. at Risk

TAVI	348	298	261	239	222	187	149
AVR	351	252	236	223	202	174	142

# CoreValve: Pivotal Trial

## TAVI vs. AVR



No. at Risk

Surgical 357 341

297

274

Transcatheter 390 377

353

# CHOICE Trial

## Edward Valve vs. CoreValve

	Balloon-expandable Valve (N=121)	Self-expandable Valve (N=120)	P Value
Device success (primary endpoint)	95.9	77.5	< 0.001
30-day clinical outcomes			
All-cause death	4.1	5.1	0.77
Cardiovascular death	4.1	4.3	0.99
Stroke	5.8	2.6	0.33
Life threatening bleeding	8.3	12.0	0.35
Vascular complications	14.0	12.8	0.78
Rehospitalization for heart failure	0.0	4.3	0.02
NYHA class improvement	94.3	86.7	0.06
New permanent pacemaker	17.3	37.6	0.001

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# Current Guideline for TAVI



European Heart Journal (2012) 33, 2451–2496  
doi:10.1093/eurheartj/ehs109

ESC/EACTS GUIDELINES



## Guidelines on the management of valvular heart disease (version 2012)

### Class I:

- Heart Team Required
- On-Site Cardiac Surgery
- Patients Not Suitable for AVR (**PARTNER B**)

### Class IIa:

- High-Risk Operable as an Alternative to Surgery; Determined by Heart Team and Case-Based Decisions (**PARTNER A**)



# Patient Risk and Indication for TAVI



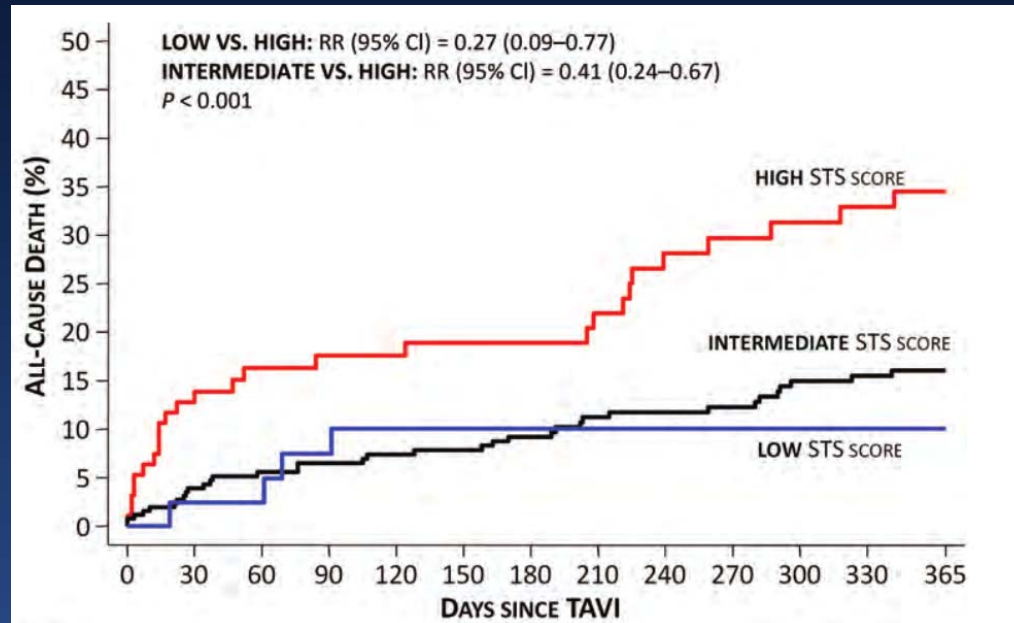
*Surgery (AVR)*

?

*TAVI*  
or  
*AVR*

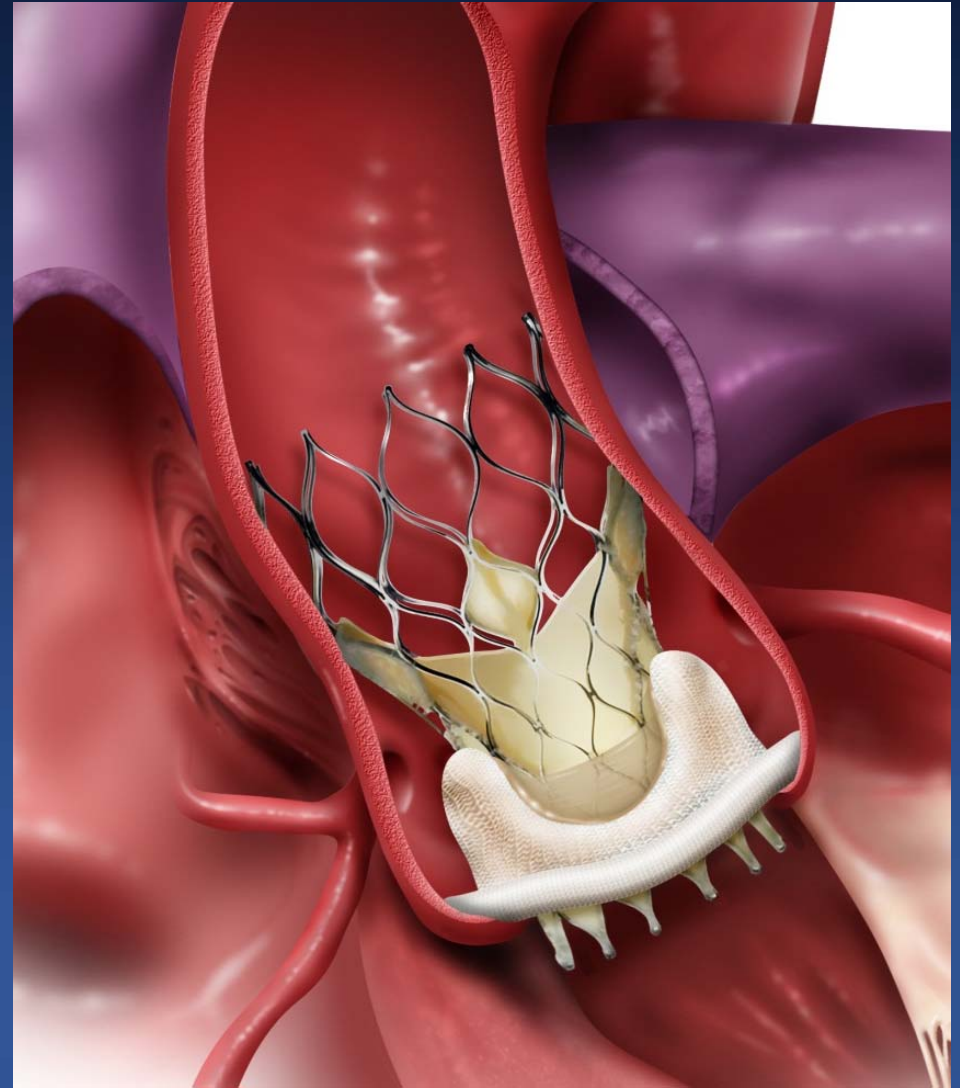
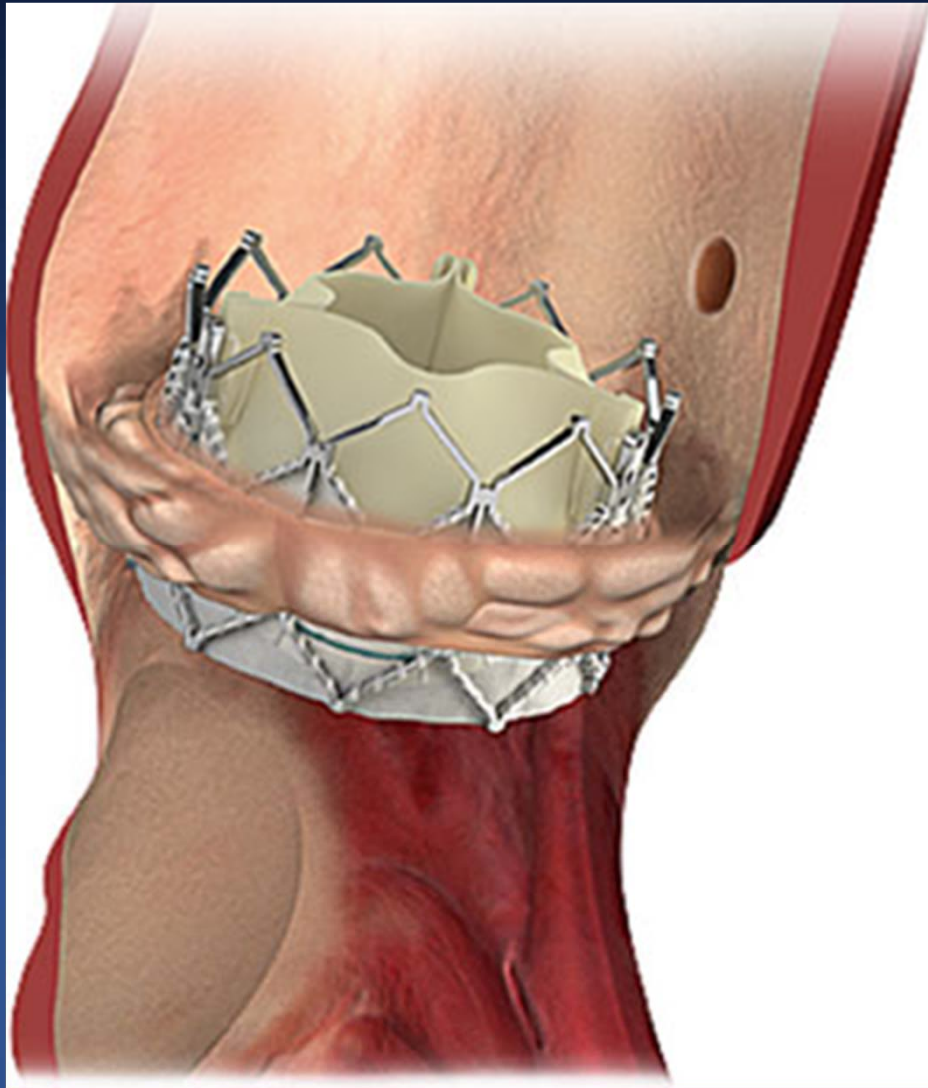
*TAVI*

# TAVI in Low/Intermediate Risk Patients



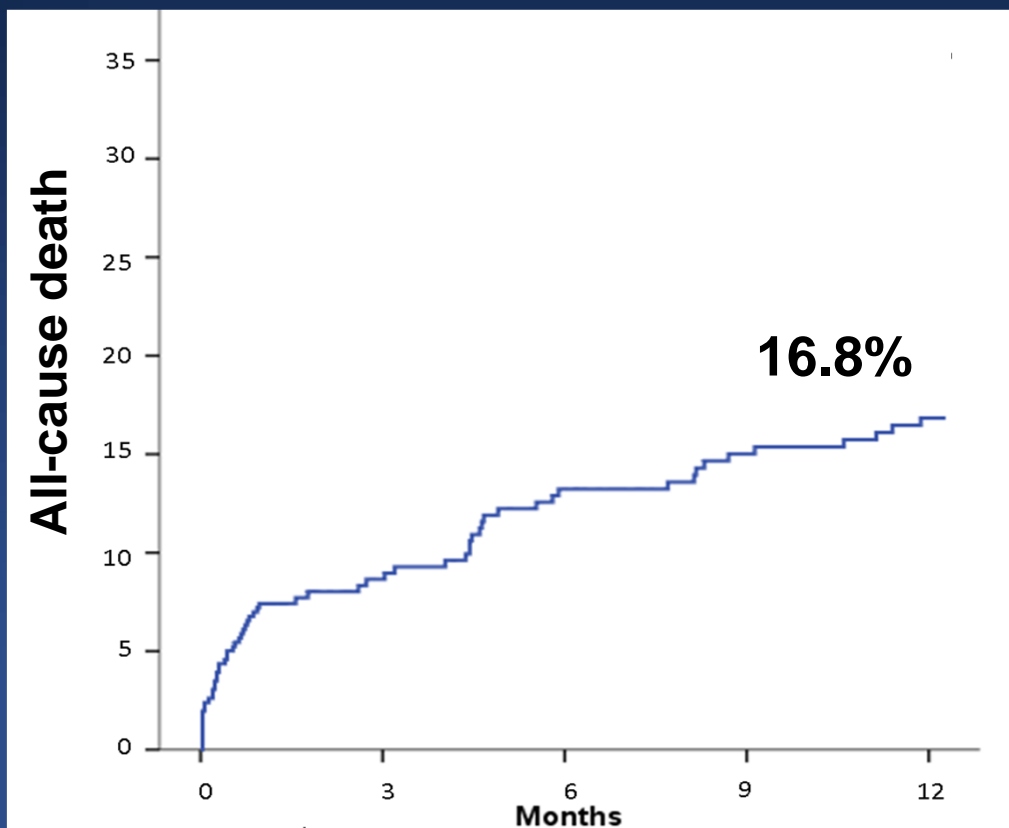
Outcomes at 1 Year: RR (95% CI)	Low vs. High Risk	Intermediate vs. High Risk	Overall P value
All-Cause Death	0.27 (0.09-0.77)	0.41 (0.24-0.67)	0.0003
Major Stroke	2.00 (0.36-11.11)	1.07 (0.29-3.99)	0.42
MI	0.56 (0.05-6.31)	0.12 (0.01-1.04)	0.023

# Valve in Valve for Failed Bioprostheses

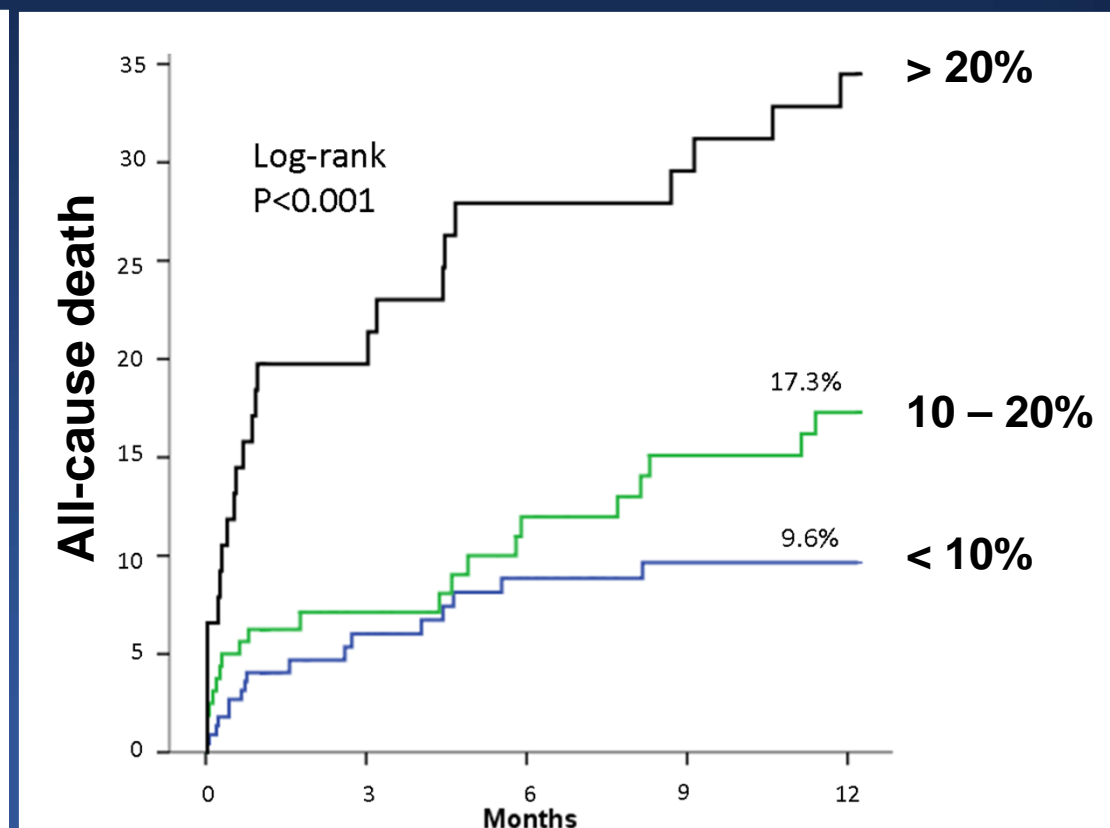


# Global Valve in Valve Registry

## All-Cause Death



## Stratified by STS Score



# Current Limitations of TAVI

- **Paravalvular Aortic Regurgitation**
- **Stroke**
- **New Permanent PaceMaker Implantation**
- **Vascular Complications**

# New Valve Designs

## EDWARDS

## COREVALVE



*Para-valvular sealing cuff*

**Sapien 3**

Balloon expandable



**Centera**

Self expandable

**e-sheath 14F-16F**



CoreValve



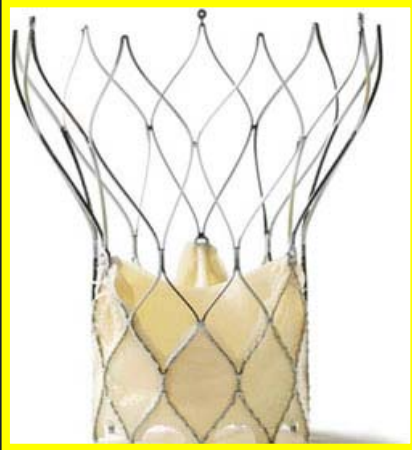
CoreValve  
Evolut

**CoreValve Evolut™**

**Better fitting with  
annulus structures**

# New Devices

**SJ Portico**



**BS Sadra**



**Medtronic Engager**



**Jena Valve**



**Direct Flow**



**Symetis**



# Discussion

- **Current Trend Toward Low to Intermediate Risk Patients**
- **Durability of Transcatheter Heart Valve**
- **Other Complications (PPM, Coronary Obstruction, Stroke, Vascular, Aortic Regurgitation)**
- **Future Perspectives (for AR, Mitral Valve, V-in-V, etc)**