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Resection of the native aortic valve prior to percutaneous aortic valve implantation: A mandatory step?

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Abstract

The remaining native valve is the cause of transcatheter aortic valve implantation (TAVI) complications that I will describe below. For this reason we decided to focus our research on the native aortic valve resection prior to transcatheter valve implantation.

The complications due to the compression and the squeezing of the diseased native aortic leaflets between the endovalve and the aortic wall are well known: paravalvular leak, atrio-ventricular bloc, coronary ostia occlusion, continuous calcium embolization, patient/prosthesis mismatch. We analysed carefully all the TAVI complications related papers in the literature. Based on this analyse, we demonstrated the need of native valve resection prior to endovalve deployment.

Further clinical work should be done in the nearest future to prove the concept.

Biography

Parla Astarci is a Consultant cardiac and vascular surgeon. His main interest in all percutaneous endovascular and endocardiac procedure. He has done his Doctor of Medicine (MD) in 1995 and Cardiovascular Surgeon in the year 2001 at UCL Brussels Belguim.