

One-year clinical outcomes with SAPIEN 3 transcatheter aortic valve replacement

July 12 2016

Overall one-year survival was over 85 percent for high-risk or inoperable patients who underwent aortic valve replacement with the SAPIEN 3 trans-catheter aortic valve replacement system, according to a study published in the July 12 issue of the American Heart Association journal *Circulation*. This survival rate is strikingly higher compared to patient outcomes reported in studies that used older trans-catheter aortic valve replacements (TAVR) systems.

Between 30 days and one year, there was no increase in the low rate of moderate leaking around the prosthetic valve, which had been observed in earlier studies, and patients experienced a marked improvement in the quality of life.

This study suggests that the SAPIEN 3 system might be the preferred therapy for high-risk and inoperable patients with <u>aortic stenosis</u>. The authors also conclude that the system should receive additional evaluation to see if it would be appropriate for lower-risk patients.

Limitations: This study is a prospective registry of the Partner II trial of transcatheter <u>aortic valve replacement</u> (TAVR) for high risk (HR) and inoperable (INOP) patients, and was not a randomized comparison to other devices or patient populations. Therefore, such comparisons should be considered exploratory.

Funding Sources: The PARTNER Trial was funded by Edwards Lifesciences and the protocol was designed collaboratively by the



sponsor and the trial executive committee. The sponsor was involved in data collection and management, but was not involved in the design and conduct of this substudy, the analysis and interpretation of the data, or the preparation, review, and approval of the manuscript.

Provided by American Heart Association

Citation: One-year clinical outcomes with SAPIEN 3 transcatheter aortic valve replacement (2016, July 12) retrieved 5 January 2023 from https://medicalxpress.com/news/2016-07-one-year-clinical-outcomes-sapien-transcatheter.html

This document is subject to copyright. Apart from any fair dealing for the purpose of private study or research, no part may be reproduced without the written permission. The content is provided for information purposes only.