

EUROVALVE

DEBATING
CHAMBER



**CAMBRIDGE
UNION
SOCIETY**
OCTOBER
7&8, 2022

Jan Kovac,
Leicester,
United Kingdom



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FACULTY DISCLOSURE

I disclose the following financial relationships:

Consultant for the company Edwards Lifesciences, Medtronic, Boston Scientific, Abbott
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ESC Valve Guidelines 2021....

Recommendations on management of prosthetic valve dysfunction (3) ESC



Recommendations	Class	Level
<i>Haemolysis and paravalvular leak</i>		
Reoperation is recommended if a paravalvular leak is related to endocarditis or causes haemolysis requiring repeated blood transfusions or leading to severe heart failure symptoms.	I	C
Transcatheter closure should be considered for suitable paravalvular leaks with clinically significant regurgitation and/or haemolysis in patients at high or prohibitive surgical risk.	IIa	B
Decision on transcatheter or surgical closure of clinically significant paravalvular leaks should be considered based on patient risk status, leak morphology, and local expertise.	IIa	C

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In Absence of Randomized Data Some Evidence...

- Surgical re-operation is associated with thirty day / in-hospital mortality of **8.8-11.5% (10,7% leading centre-Milan)**
- Overall hospital mortality of **3.9%** in percutaneous closure –**all centres (UK Ireland Registry-P Calvert)**

Paravalvular Leak

Percutaneous First...

- **Yes, unquestionably**
- But Experience Matters, Procedure Relat Infrequent
- (and rapidly growing TAVI in 2022 almost abolished post procedural leak..)
- So
- Percutaneous First But Not Necessarily In All Centres?

Paravalvular Leak

Percutaneous First...

- At the MDT Surgeons Prefer This
- Cardiology Structural Expertise
- Imaging and Interventional
- Skill set grown over decade
- Resources Utilization
- Keeps surgical option opened
- Patient Preference