

## INTERVENTIONAL CARDIOLOGY

## TAVI is effective for the treatment of high-risk patients

Transcatheter aortic valve implantation (TAVI) has shown good short-term efficacy in patients at high surgical risk, but there is little evidence on long-term outcomes of patients who undergo this procedure. In one of the largest published series, Josep Rodés-Cabau and colleagues report the medium-term results of a global TAVI program.

A total of 339 patients from six centers in Canada underwent TAVI. Porcelain (calcified) aorta was present in 18% of patients, and frailty was a comorbidity in 25%. The procedural and 30-day mortality were 1.7% and 10.4%, respectively. During follow-up (median 8 months), the cumulative mortality was 22.1%. Results for patients diagnosed as having porcelain aorta or frailty were comparable with those for the rest of the study population.

This study is unique in a number of ways. First, most studies have evaluated TAVI according to the approach (transfemoral versus transapical)—very

few include both approaches. Second, as Rodés-Cabau points out, “no previous studies have determined the results of TAVI in patients with porcelain aorta or frailty, which are both common comorbidities in elderly patients.” These results suggest that TAVI might be a good alternative to surgery for the treatment of patients with these conditions. Finally, a standardized evaluation protocol ensured homogenous use of TAVI across all the centers.

“The PARTNER trial, comparing TAVI with either conventional surgery or medical therapy, will further determine the safety and efficacy of TAVI for the treatment of this challenging group of patients,” concludes Rodés-Cabau.

*Helene Myrvang*

**Original article** Rodés-Cabau, J. *et al.* Transcatheter aortic valve implantation for the treatment of severe symptomatic aortic stenosis in patients at very high or prohibitive surgical risk: acute and late outcomes of the multicenter Canadian experience. *J. Am. Coll. Cardiol.* 55, 1080–1090 (2010)