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Nová technologie pro lifetime TAVI management u mladších pacientů

M Sluka / Heart Team FN Olomouc

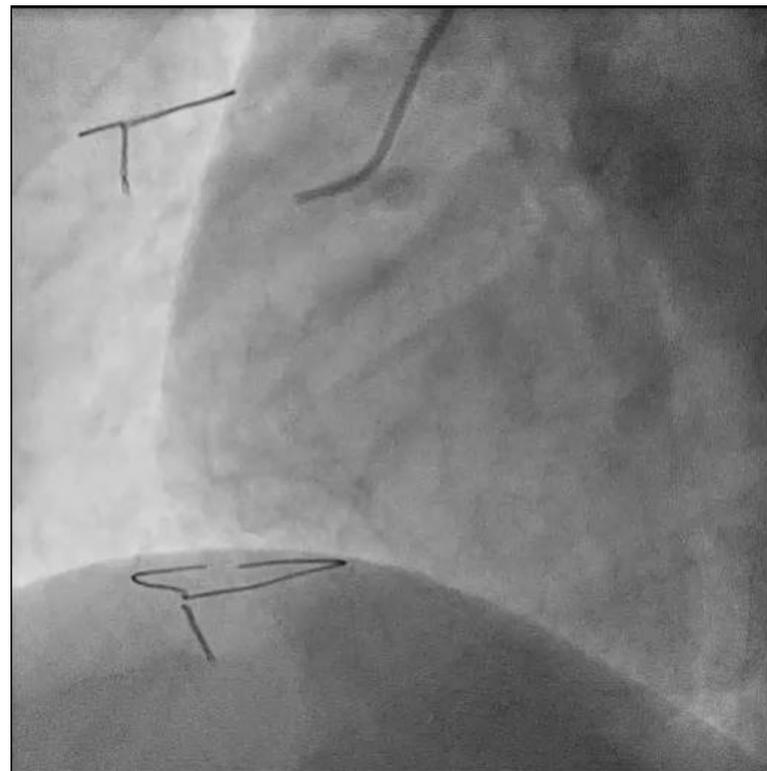
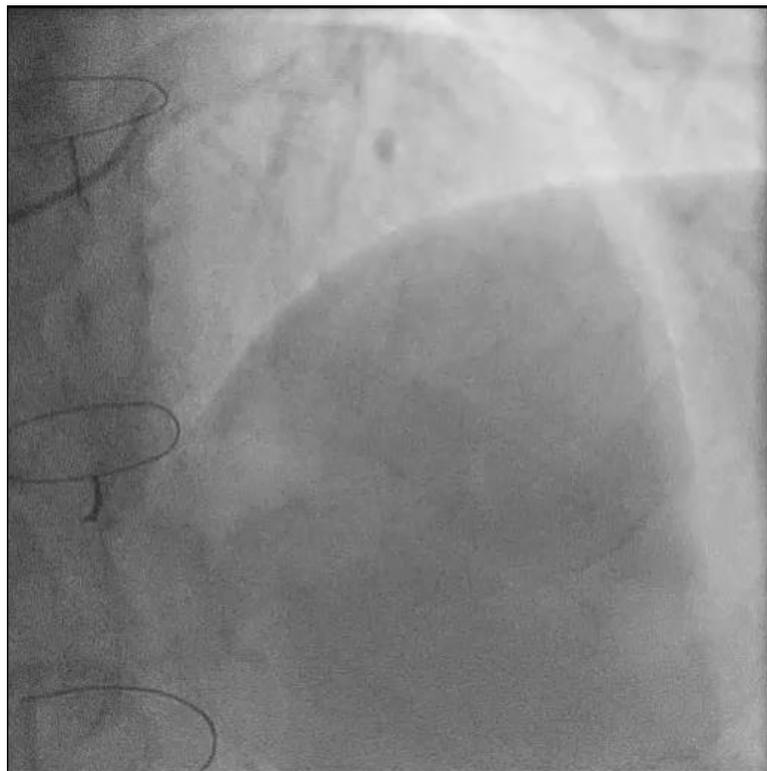
Anamnéza

- Muž, 61 let, tiskař/umělecký fotograf
- 188 cm, 84 kg
- Disp. pro aortální stenózu
- Stp. maligním lymfomu (1985), stp. sternotomií, radioTx hrudníku, chemoTx, dlouhodobá remise
- Panické ataky

Klinický vývoj XII/21-V/24

- PG 49/28 \Rightarrow 62/38 mmHg při stacionárním SVi 30-35 ml/m²
- AVA 1,1 \Rightarrow 0,85 cm², AVAi 0,55 \Rightarrow 0,4 cm²/m²
- NTproBNP 250-300 ng/l \Rightarrow 900 ng/l
- Od poč. 2024 limitován dušností NYHA II, zanechal sportu
- Graficky pozitivní ergometrie s horizontálními ST depresemi II,III,aVF, V₄₋₆, bez stenokardií

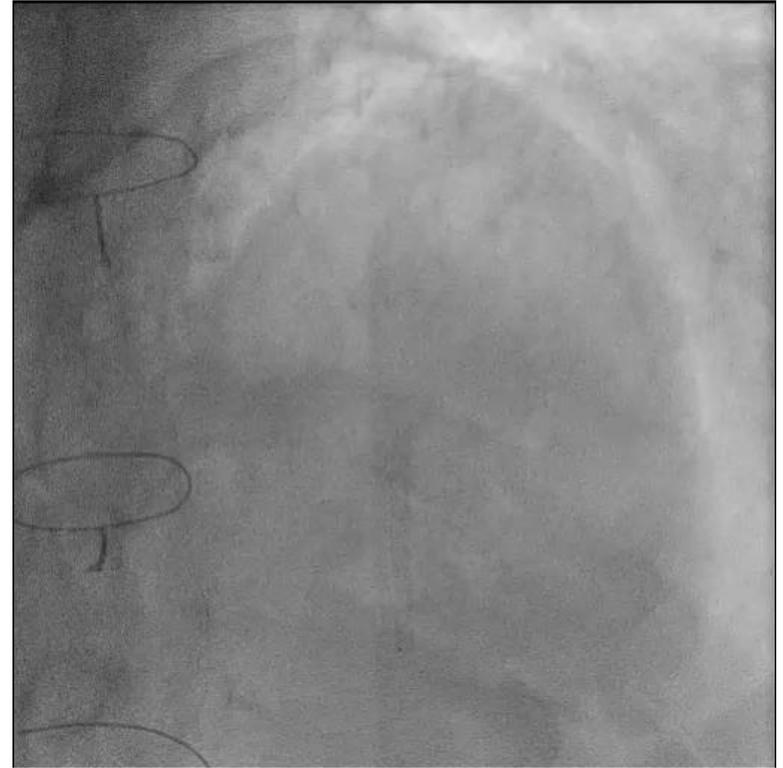
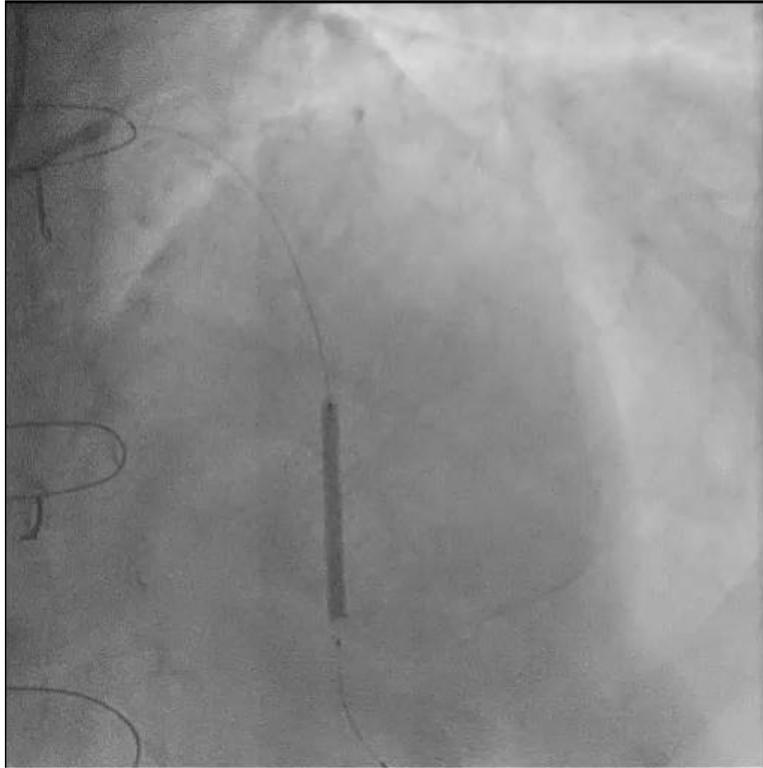
SKG V/24



Heart team I

- PCI RIA
- CTA_g (TAVI protokol)
- Zhodnocení symptomatologie po PCI
- Opakovaná diskuze v rámci „Heart teamu“

PCI RIA V/24



CTAg V/24

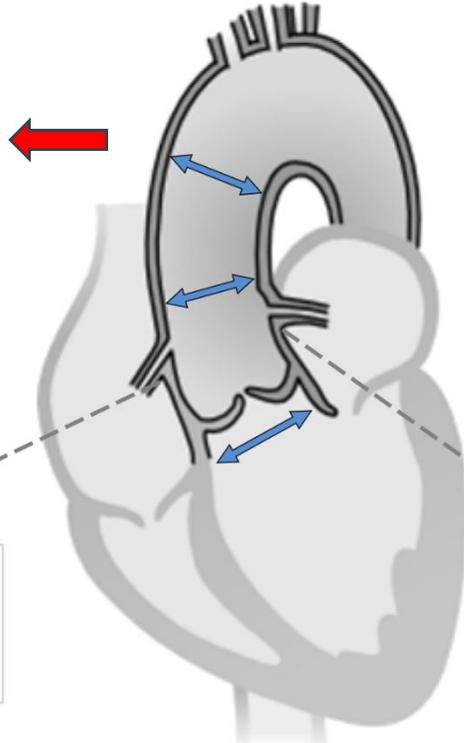
Aortic Annulus	
Perimeter:	72,4 mm
Perimeter Derived Ø:	23,0 mm
Area:	403,3 mm ²
Area Derived Ø:	22,7 mm
Min Ø:	19,9 mm
Max Ø:	26,1 mm
Average Ø:	23,0 mm
Eccentricity:	0,24

LVOT Ø:	22,6 mm
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RCA Height:	19,8 mm
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Sinus Of Valsalva Diameters:	
Left:	36,1 mm
Right:	33,1 mm
Non:	33,5 mm



Asc. Aorta Ø:	29,3 mm
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LCA Height:	15,5 mm
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CTAg V/24

Aortic Annulus

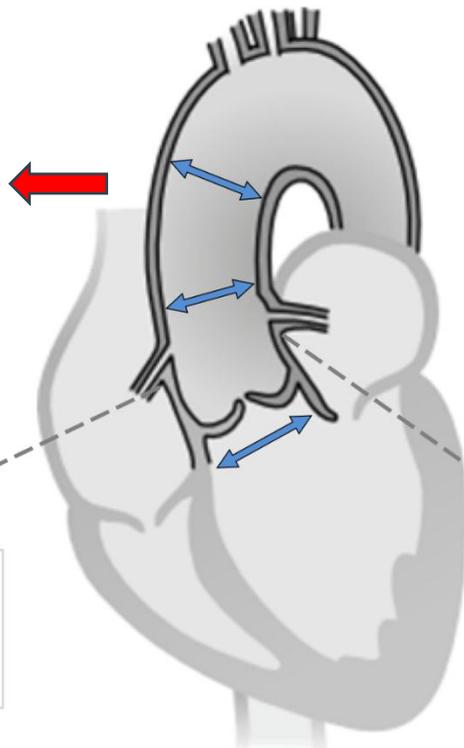
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LVOT Ø: 22,6 mm

RCA Height: 19,8 mm

Sinus Of Valsalva Diameters:

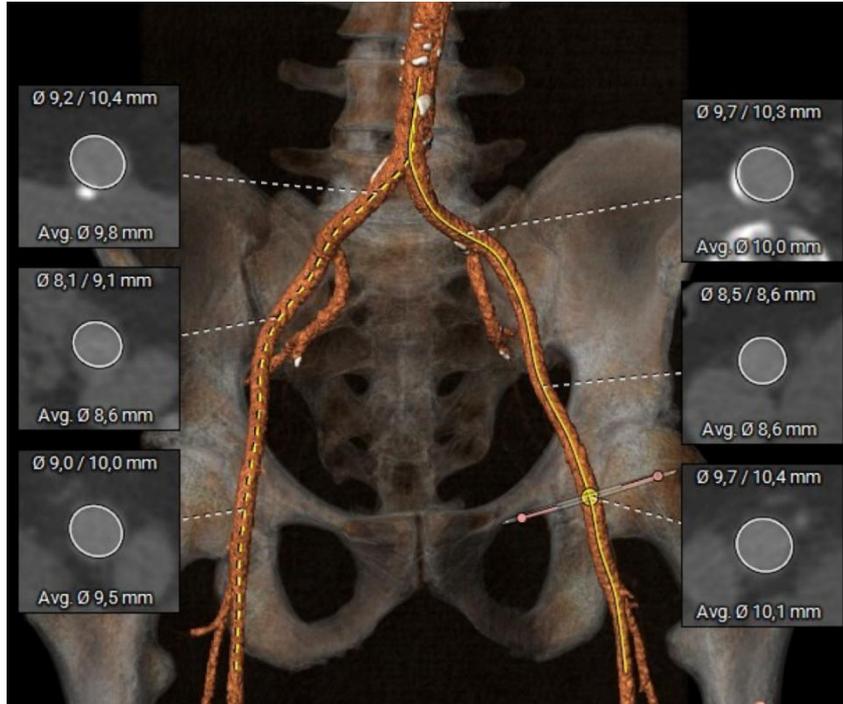
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Asc. Aorta Ø: 29,3 mm

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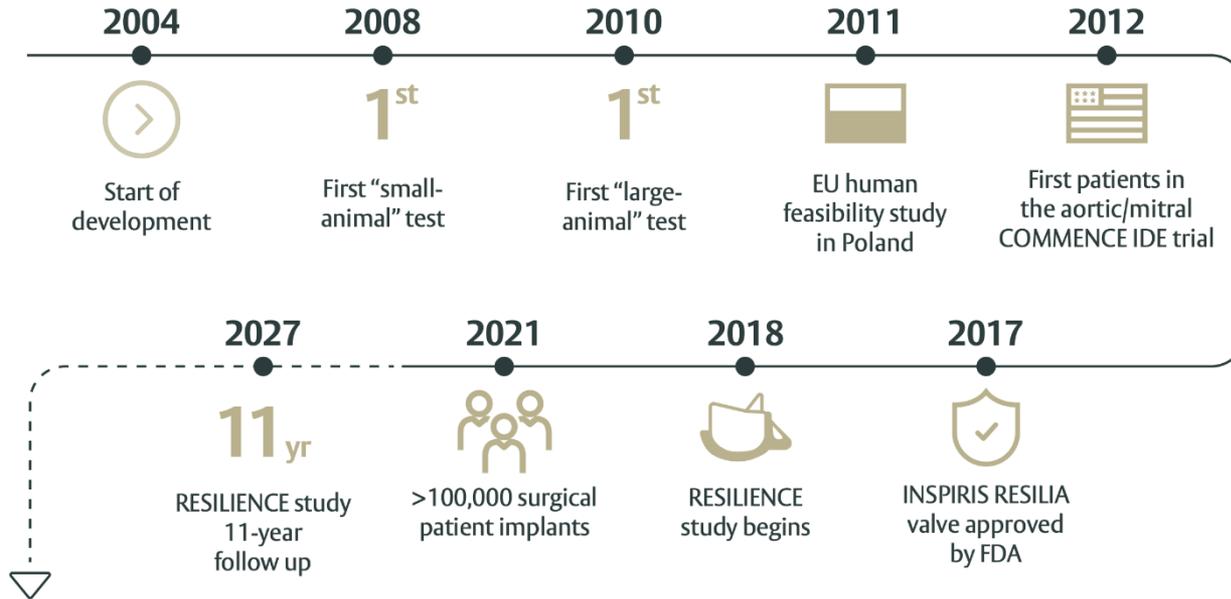
CTAg V/24



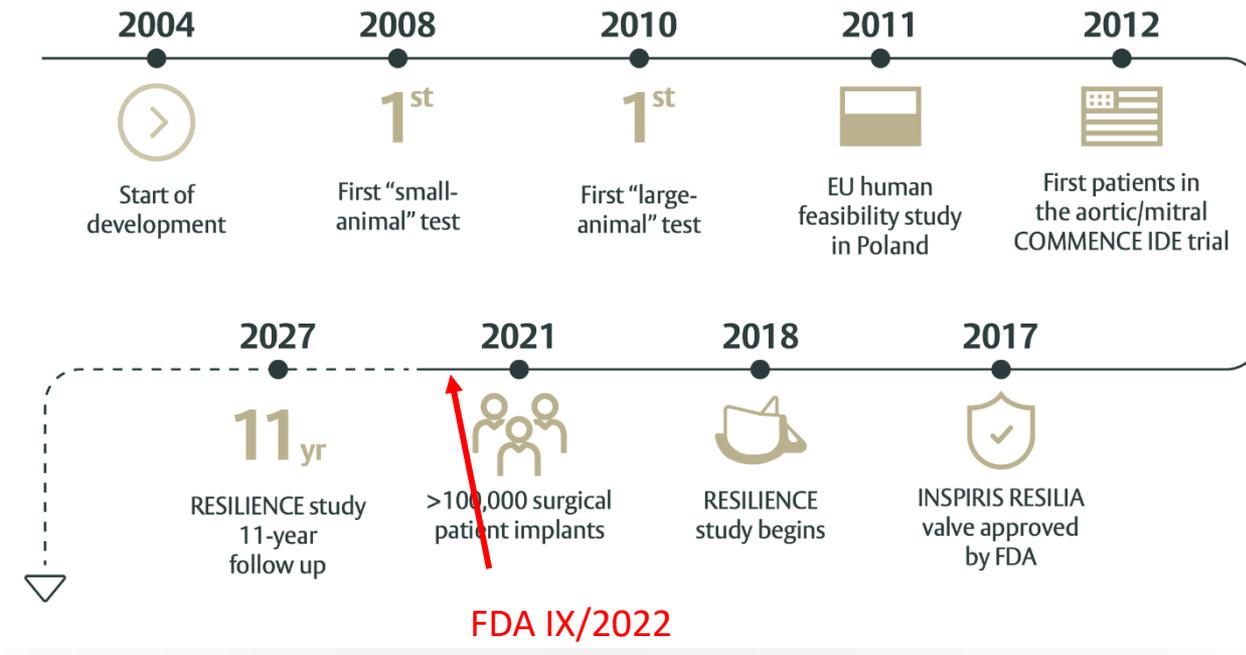
Heart team II

- Symptomatologie nezměněna
- ES II 1,3%, STS 0,66% x stp.sternotomii, radioTx hrudníku + malá morfologie Ao anulu! (SAVR vs. size 21 – EOA 1,8 cm² ≈ EOAI 0,85 cm²/m²)
- Věk – indikace/preference Inspiris RESILIA x dostupnost Sapien 3 Ultra RESILIA
- Zvážení dostupnosti a úhrady Sapien 3 Ultra RESILIA, v opačném případě SAVR

RESILIA pipeline

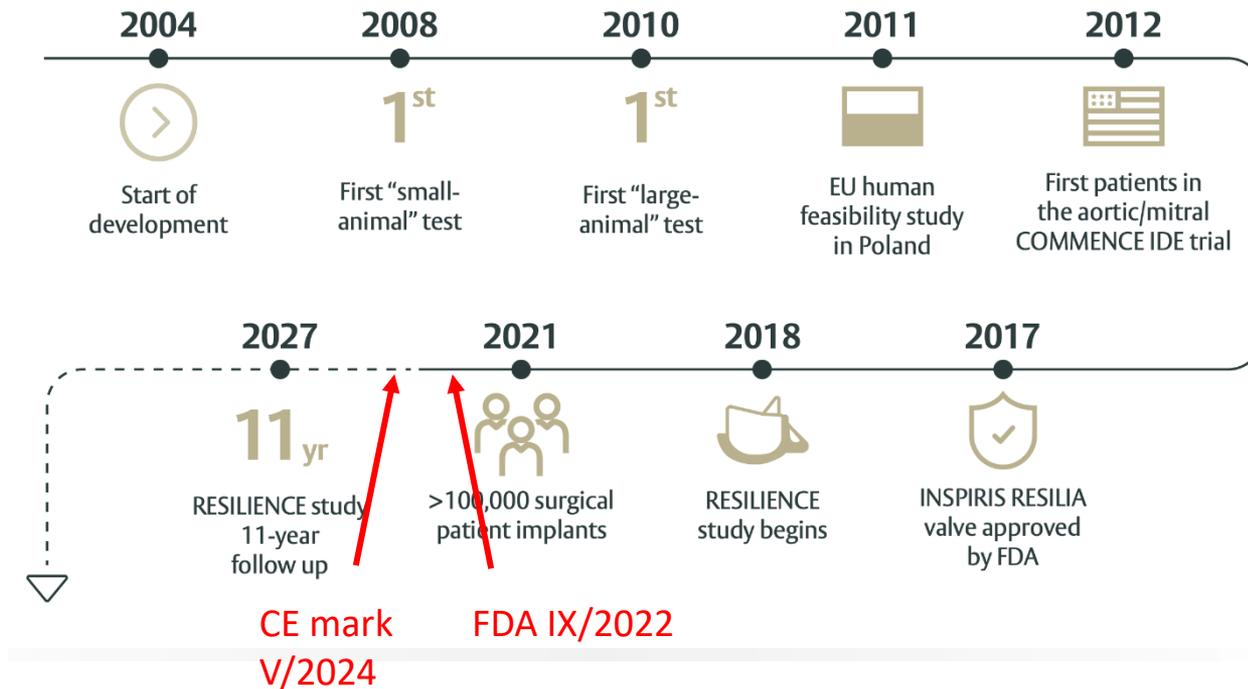


RESILIA pipeline



Sapien 3 Ultra RESILIA

RESILIA pipeline



Sapien 3 Ultra RESILIA



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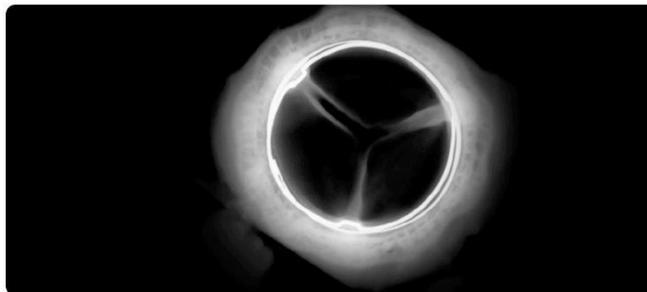
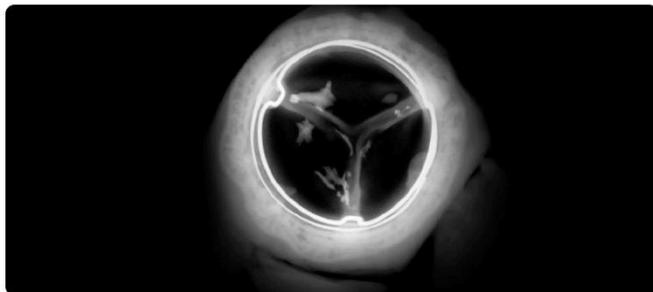


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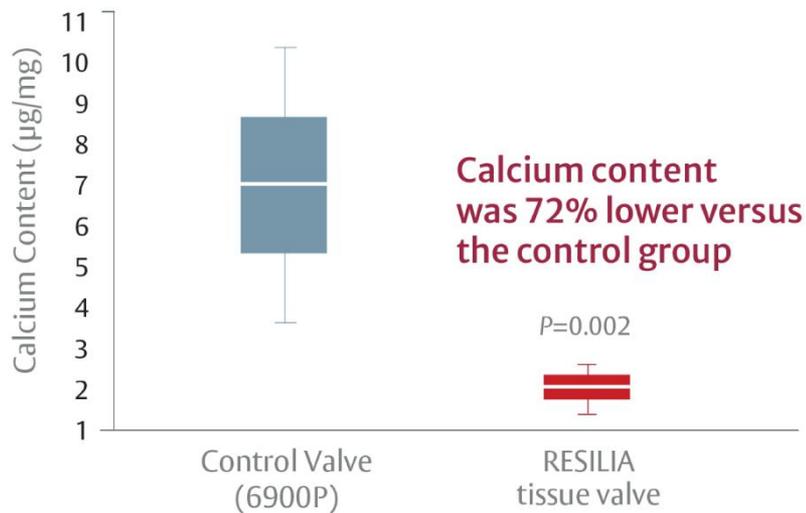
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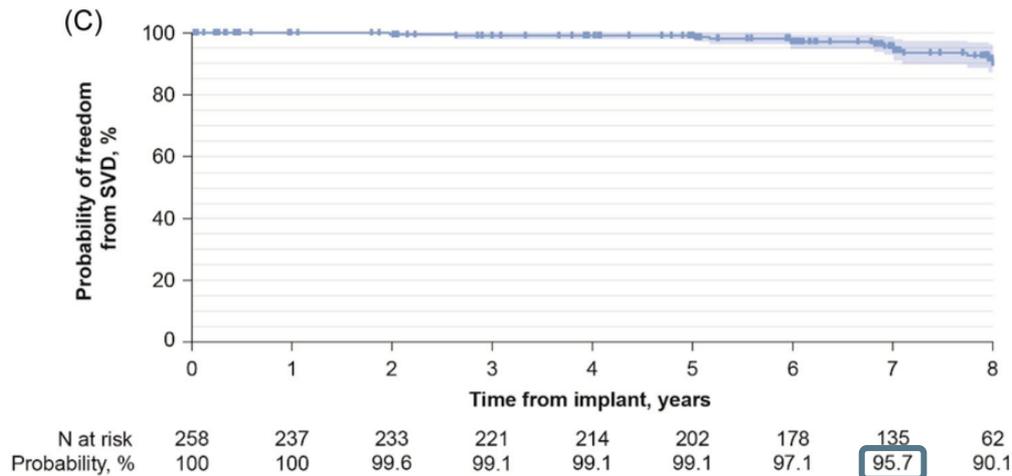
Animální testování



Control valve (



~4.3% SVD at 7 years in SAVR with Carpentier-Edwards PERIMOUNT Magna Ease valve



*SVD was adjudicated per Akins *et al.* 2008.
Tsuji, S. *et al.* J Card Surg 2022 Dec; 37(12): 4999–5010.



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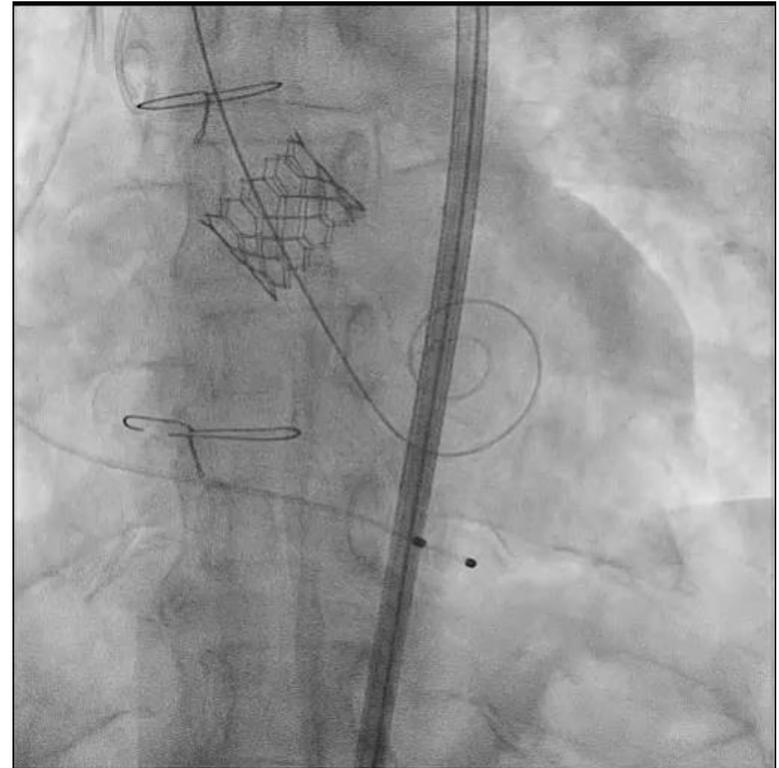


Heart team III

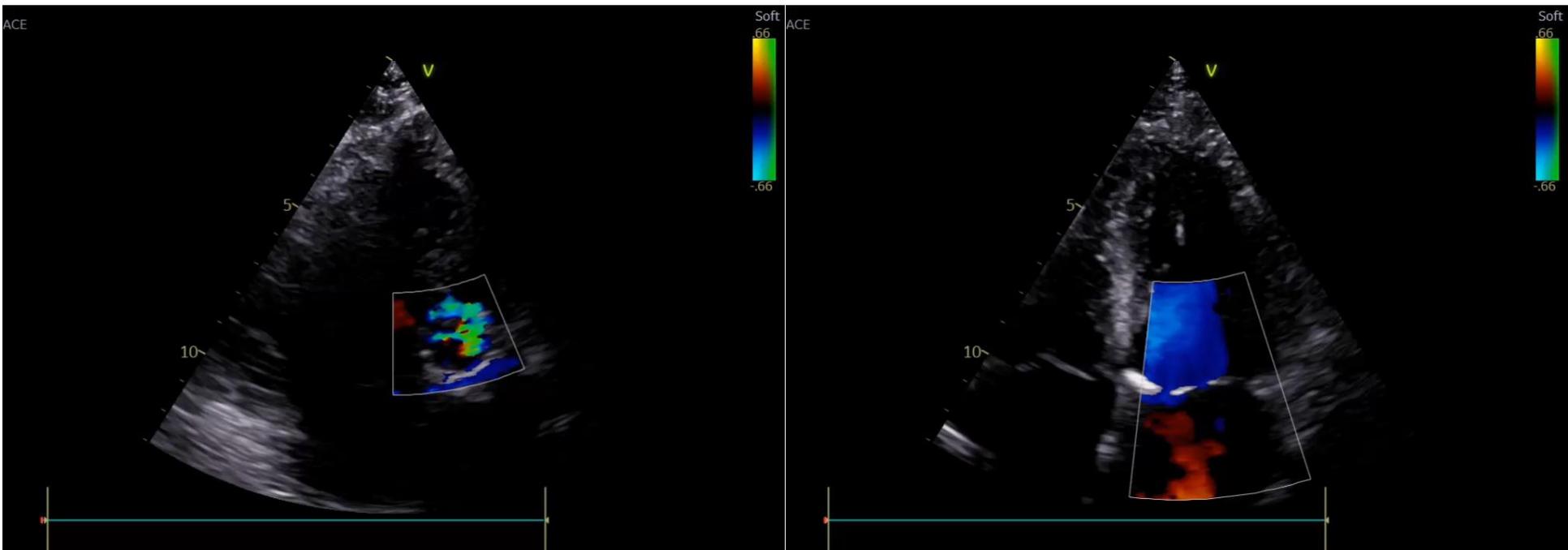
- Sapien 3 Ultra RESILIA dostupná v ČR, platná registrace SÚKL, není úhrada
- Individuální žádost ZP (§ 16) schválena
- TAVI VIII/24 – S3 Ultra RESILIA 23, femorální přístup, lokální anestezie, direktní implantace



TAVI 22.8.24



TTE D4



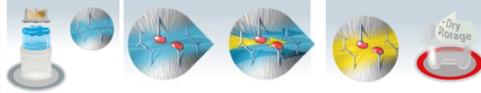
Průběh

- Bez komplikací
- EKG bez převodní poruchy, QRS 85 ms
- TTE: EF LK 60%, PG 17/9 mmHg, PVL stopový, EOA 2,6 cm²
- Propuštěn domů D4



Key messages

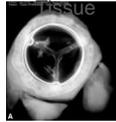
The Technology



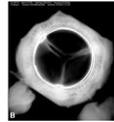
Stable-capping of free aldehydes and glycerolization are key differentiators of the RESILIA tissue

Animal Studies

PERIMOUNT

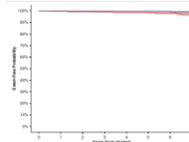


RESILIA Tissue



Animal studies showed that RESILIA tissue has significantly improved anticalcification properties

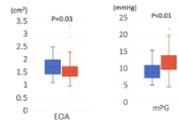
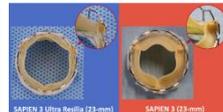
Surgical Clinical Data



CENTRAL MESSAGE
Aortic valve replacement with a Resilia tissue valve demonstrated 99.3% freedom from SVD at 7 years in COMMENCE aortic trial patients.

Surgical data are showing excellent durability data with 99.3% freedom from SVD after 7 years of follow-up

Early SAPIEN 3 Ultra RESILIA valve Data



Early clinical data from the US and Japan show a very strong performance of the SAPIEN 3 Ultra RESILIA valve



DĚKUJI ZA POZORNOST

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der™ | Delivery System

SAPRÉN 3 UJITA