



Update on Off-Pump Transapical MV Repair

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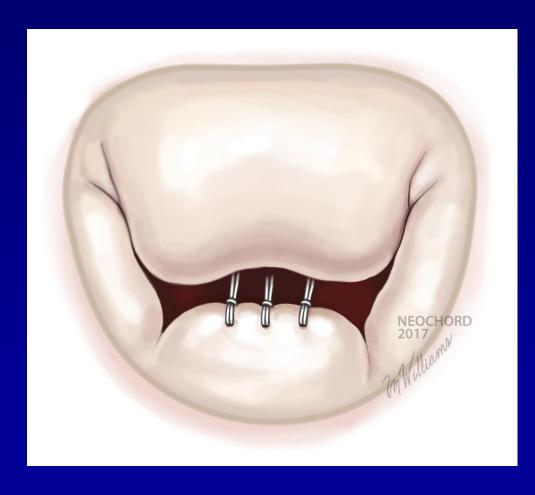
Disclosures

- Abbott Vascular: Advisory Board / Research
 - National Co-PI: Tendyne in Mitral MAC Trial
 - Executive Committee: SUMMIT trial
- Boston Scientific: Consultant / Research
 - National Co-PI: REPRISE IV trials
- Claret Medical: Consultant
- Cryolife: Consultant / Research
- Edwards Lifesciences: Advisory Board / Research
 - National Co-PI: ACTIVE Trial (Cardioband)
- Gore Vascular: Consultant
- Jenavalve: Consultant / Research
 - National Co-PI: TAVR trial





TA Chordal Repair Preserves Future Treatment Options

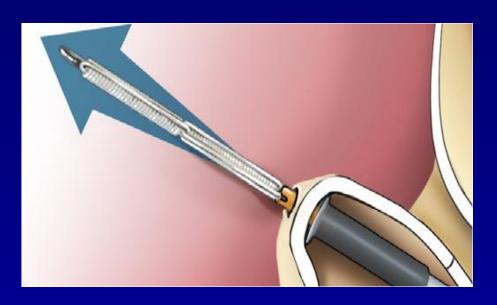


- Mimics surgical mitral valve repair
- Potential for future interventional annular treatment
- Potential for future interventional leaflet repair or replacement

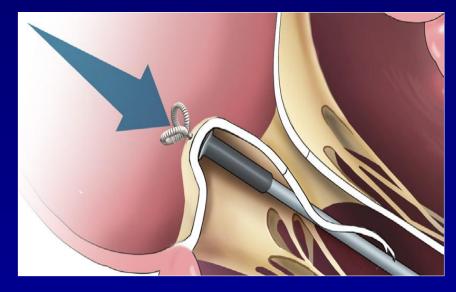




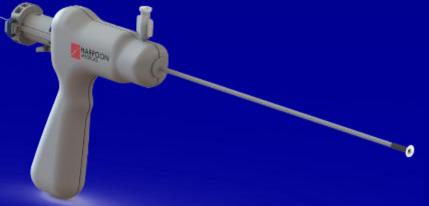
Harpoon Edwards Automated Anchoring Technology



Pre-Wound Needle



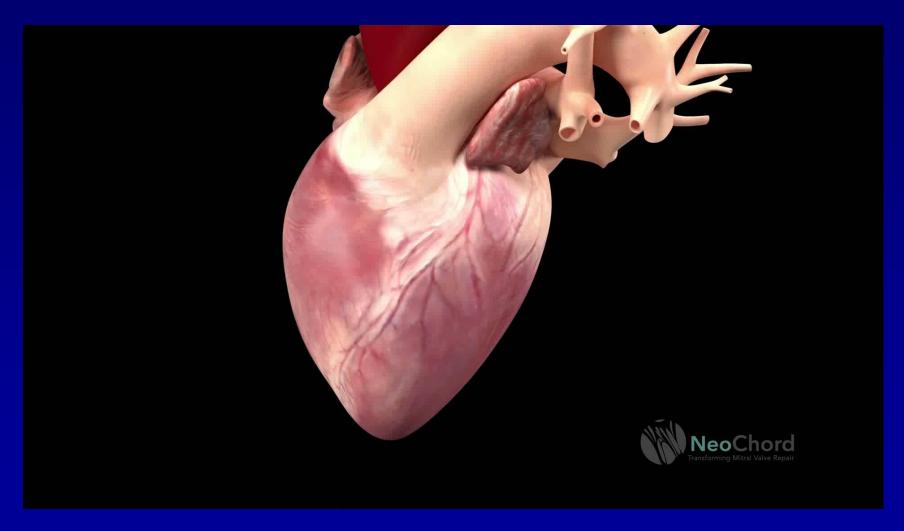
Self Forming ePTFE Anchor







NeoChord

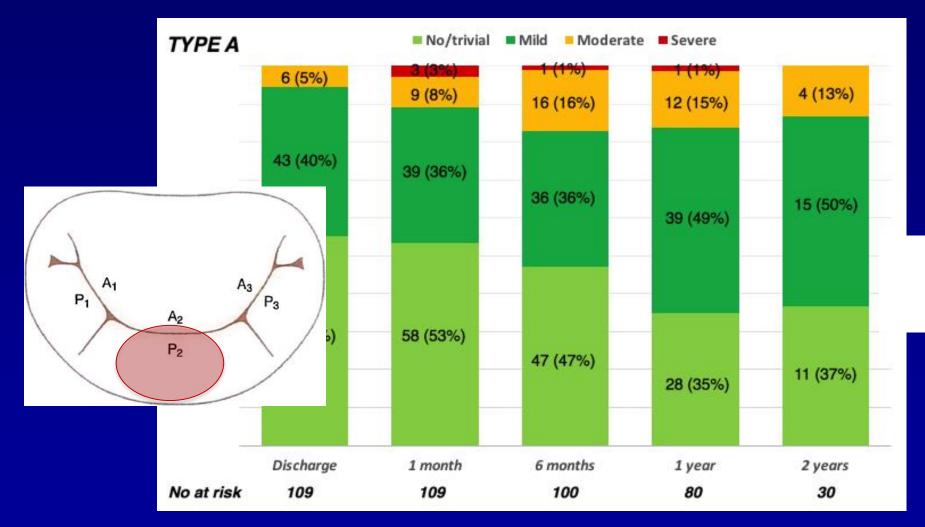


CAUTION: Investigational Device Limited by Federal (United States) Law to Investigational Use





NeoChord MR for Type A

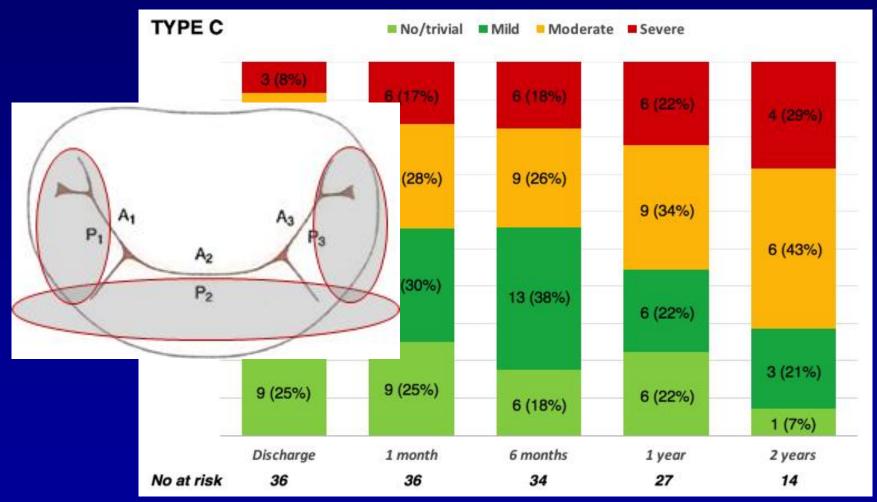


87% ≤ **MILD**





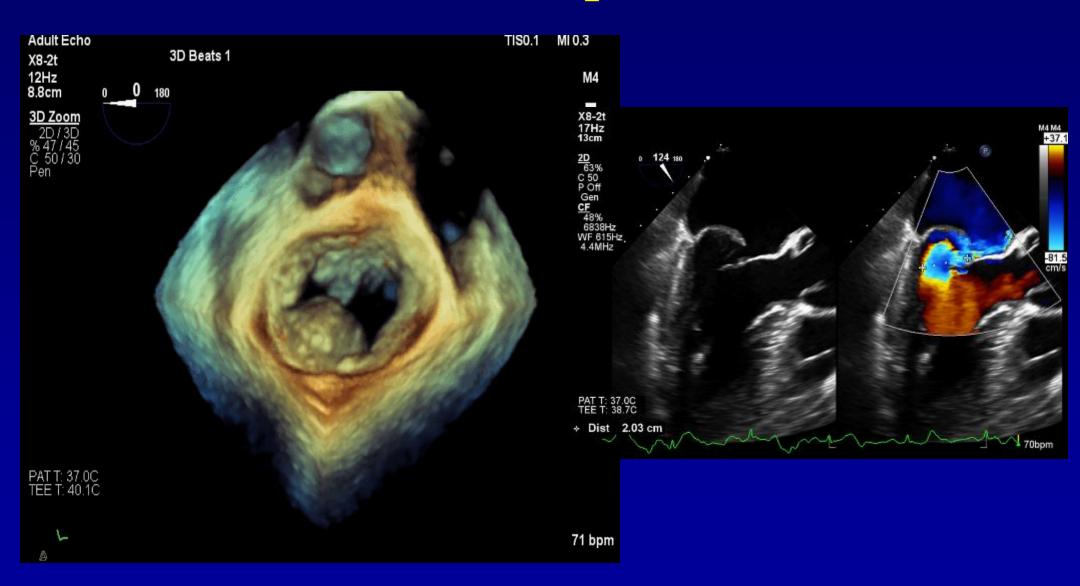
NeoChord MR for Type C



28% ≤ **MILD**



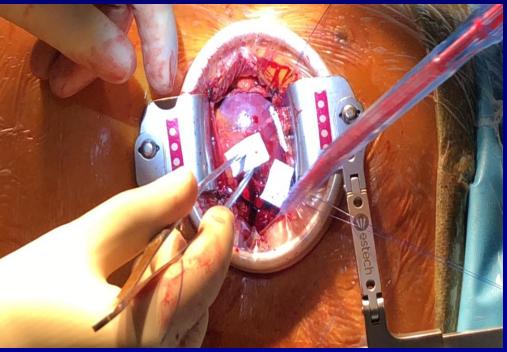






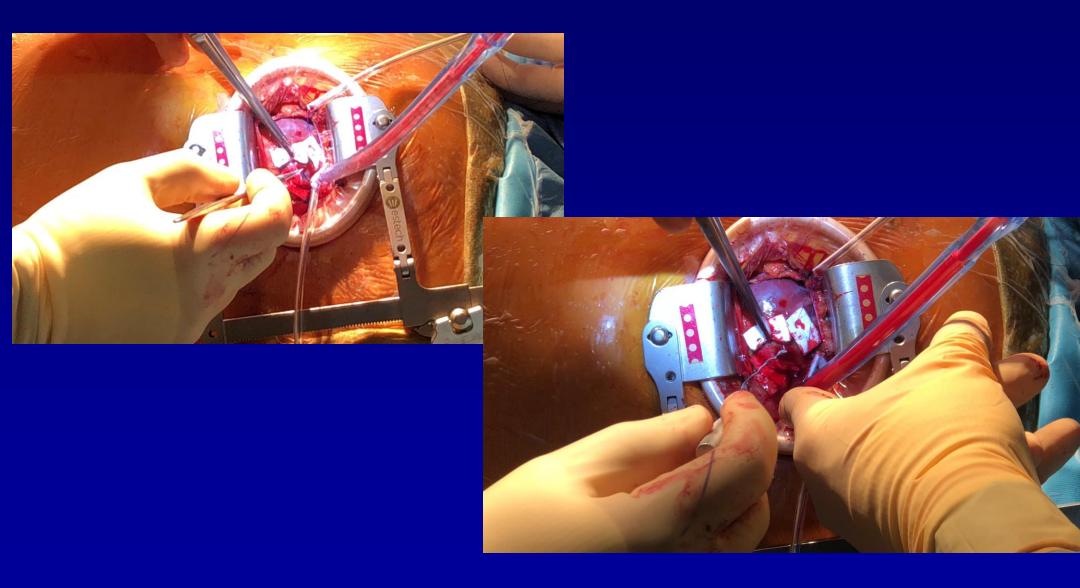






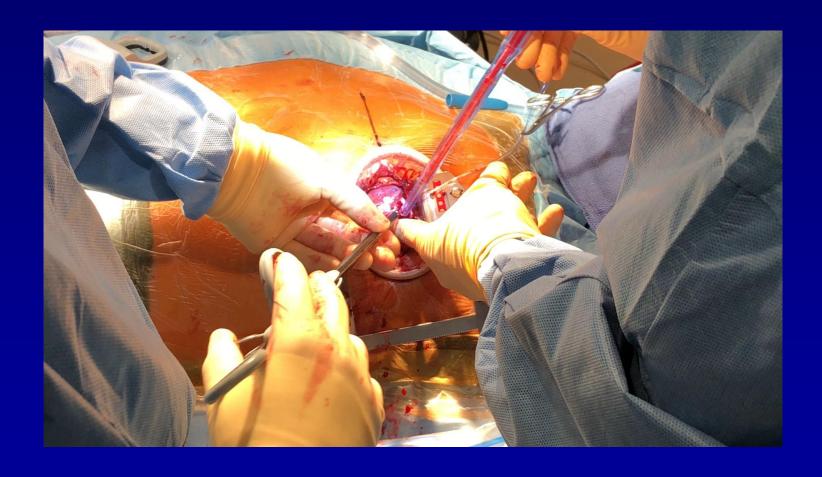






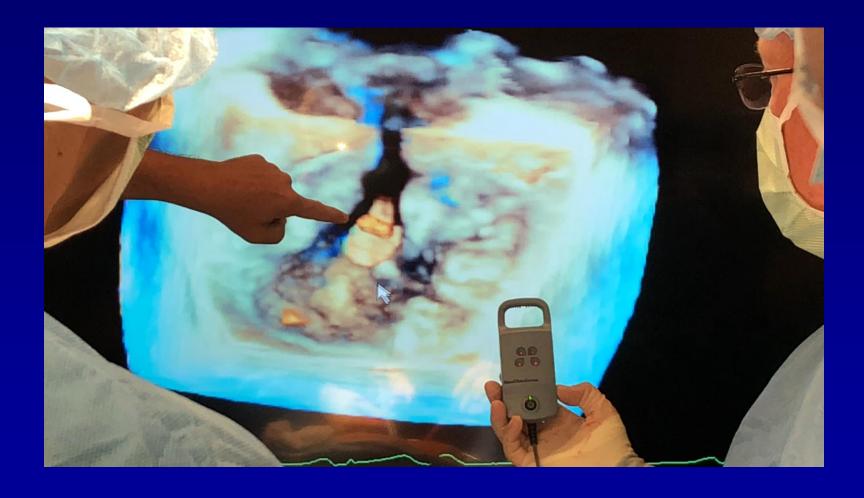






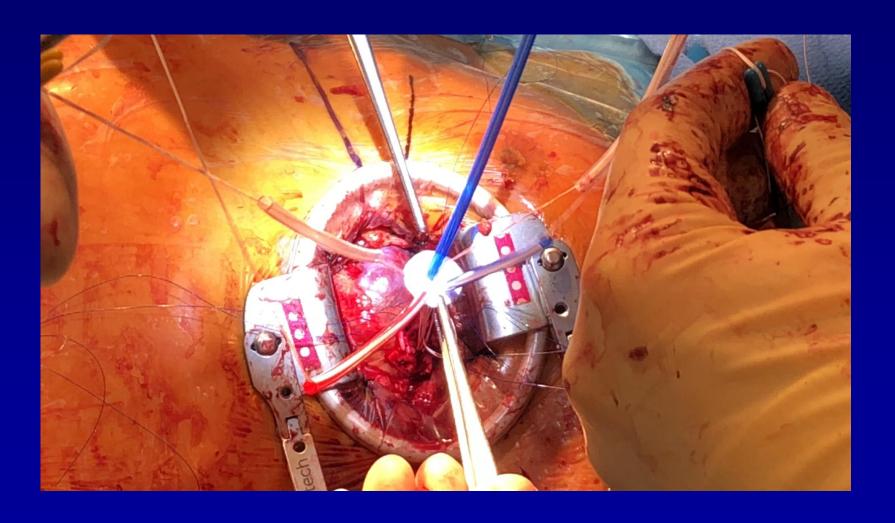






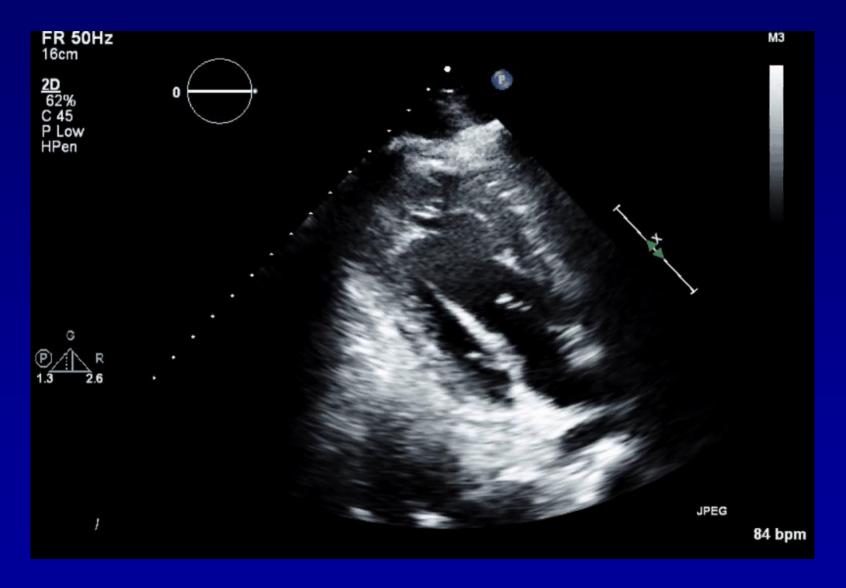








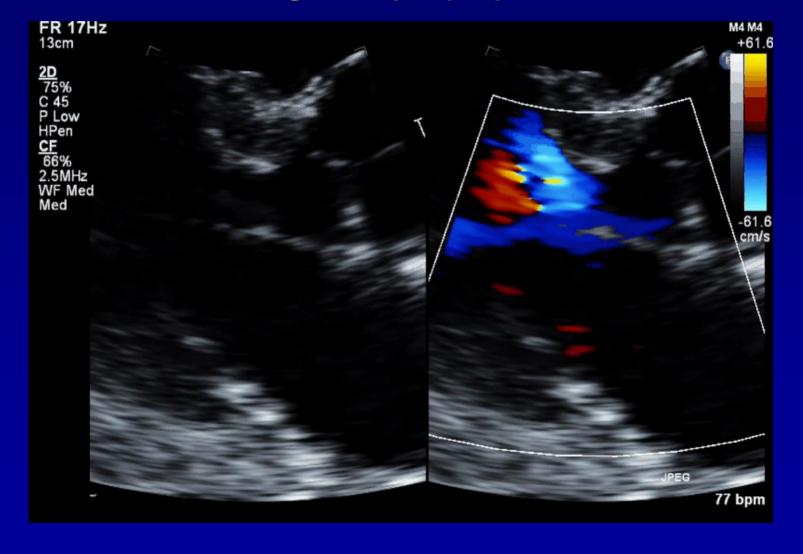






NeoChord Postop TTE 3 Months









Conclusions

- Initial experience with TA neochordal repair shows high feasibility and safety of the technique
- Device failure and complications were seen mainly during the first period after implantation while clinical stability was shown beyond follow-up
- Efficacy was maintained up to 1 year showing significant clinical benefit
- Better patients selection improve outcomes







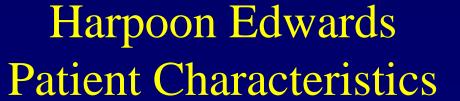
Thanks

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			STS Risk	NYHA	
PT#	Sex	Age	Score	Class	LVEF
1	F	65	0.76	II	65
2	M	68	1.09	III	50
3	M	63	0.60	II	70
4	M	57	0.69	П	60
5	M	42	0.22	II	60
6	M	63	0.46	П	60
7	M	59	0.34	I	55
8	M	89	4.57	III	73
9	M	82	2.50	II	54
10	M	73	1.41	1	65
11	M	51	0.21	III	65
12	M	66	0.58 III		57
<u>13</u>	M	80	1.50	ļļļ.	79
MEAN		66.0	1.15		63





Excellent Safety Profile

- No Mortality
- No Stroke
- No Renal Failure
- No Myocardial Infusion
- No Blood Transfusion
- No New Onset Post-Op AFib





Echo Follow-Up

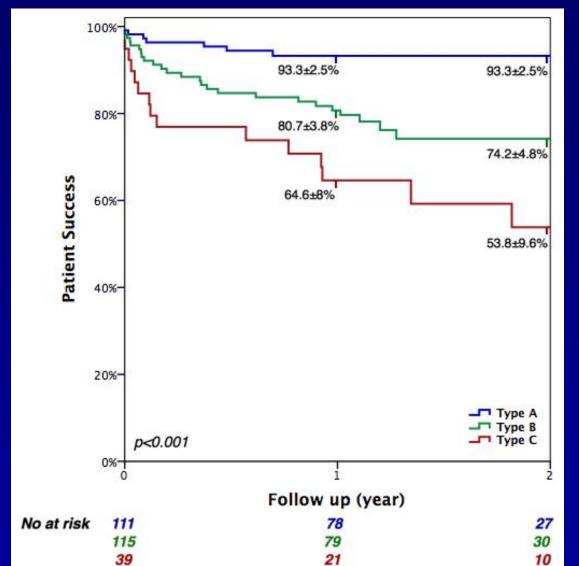
	Days Post Procedure		Total Chord Days	Screening / Baseline	30 Days	6 Months	12 Months
1	562	4	2,248	Severe	Mild	None/Trace	None/Trace
2	560	3	1,680	Severe	None/Trace	Moderate	Moderate
3	510	3	1,530	Severe	None/Trace	None/Trace	None/Trace
4	72	4	288	Severe	Moderate	Converted to	open surgery
5	460	3	1,380	Severe	None/Trace	None/Trace	None/Trace
6	405	4	1,620	Severe	Moderate	Moderate	Moderate
7	404	4	1,616	Severe	Mild	Mild	Mild
8	359	3	1,077	Severe	Mild	None/Trace	
9	359	5	1,795	Severe	Mild	Mild	
						Severe - converted to open	
10	231	3	693	Severe	Mild	surgery	
11	307	4	1,228	Severe	None/Trace	Mild	
12	211	4	844	Severe	Mild	Mild	
13	211	4	844	Severe	None/Trace	None/Trace	



SEORGETOWN UNIVERSITY NeoChord

Patient Success

MedStar Heart & Vascular Institute



Type A

Type B

Type C





Nov 2013 to May 2017 7 European Centers

265 consecutive patients included

Clinical follow-up at 1 year (N=194 eligible subjects)

Clinical follow-up at 2 years (N=79 eligible subjects)





NeoChord Overall Mitral Regurgitation

