Minimally Invasive Aortic Valve Replacement Advantageous for Some Very Elderly Patients

Study suggests TAVI should be considered as treatment option even in patients over age 85

Chicago – Transcatheter aortic valve implantation (TAVI) appears to be an effective alternative to surgical aortic valve replacement (AVR) for the treatment of aortic stenosis in very elderly patients, including those age 85 years and older, according to a study in the January 2014 issue of *The Annals of Thoracic Surgery*.

With an aging population, the number of patients who require cardiac surgery has increased among both octogenarians (age 80-89 years) and nonagenarians (age ≥90 years); however, nearly one-third of patients with severe symptomatic valve disease are not recommended for surgery due to multiple comorbidities or advanced age.

Mansanori Yamamoto, MD, and Emmanuel Teiger, MD, both from the Centre Hospitalier Universitaire (CHU)-Henri Mondor in Creteil, France, led a group of researchers examining TAVI results in very elderly patients.

“Our study found TAVI to provide acceptable clinical results in very elderly populations,” said Dr. Yamamoto. “Elderly patients generally require more time to recover after invasive treatments, such as AVR, so TAVI may have advantages because earlier mobility plays a significant role in maintaining neuromuscular strength and physical function in elderly patients. Smaller incisions allow faster resumption of physical activity and therefore full recovery.”

For the study, researchers collected data from 2,254 patients age 80 years and older who underwent TAVI between January 2010 and October 2011 at any of the 34 hospitals participating in the French
national TAVI registry (FRANCE-2 Registry). For the analysis, patients were divided into three categories based on age: 80-84 years (867 patients), 85-89 years (1,064 patients), and ≥90 years (349 patients).

High procedural success was achieved in every patient age group (97.8%, 96.3%, and 97.1%, respectively), and both length of hospital stay and time in the intensive care unit were similar in all groups.

Cumulative mortality rates for the entire patient population were 9.9% at 30-days and 23.8% at 1-year post-surgery. Mortality rates at 1-year were higher among patients in the 85-89 and ≥90 year age groups, compared with the mortality rate in patients in the 80-84 year age group (26.1%, 27.7%, and 19.8%, respectively).

“TAVI may be a good therapeutic option even in very elderly patients,” said Dr. Teiger

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