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Long-term outcomes after surgical aortic valve replacement

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Transcatheter Aortic Valve Implantation (TAVI) is increasingly employed in the treatment of severe aortic stenosis. Initially the indication was in patients who were refused surgery on the grounds of an unacceptably high risk. Long-term results following TAVI are sparse and current data suggests that about a third of patients are alive at 6 years. TAVI is now being offered to intermediate risk patients without available long-term data. Surgery in such patients offers excellent results, both in the short and long term. We present our unit's long-term outcomes after surgical aortic valve replacement (SAVR), with or without concomitant coronary revascularization. We conclude, from a 20-year relative survival study, that patients aged 68 or older can achieve a normal life expectancy after SAVR. This study correlated long-term survival with patient-related, procedure-related and post-operative complication-related factors. In a second study, we evaluated the effect of prosthesis-patient mismatch on long-term survival. We believe that SAVR remains the gold standard of treatment for severe aortic stenosis. The decision to offer patients TAVI should take into consideration the known long-term results of surgery.

Biography

Alexander Manché is the Chairman of the Cardiothoracic Surgery at Mater Dei Hospital, Malta. He completed his studies at Westminster Medical School, London in 1979 and spent 18 years in the UK and the US, including two years of research at Rayne Institute. He returned to Malta in 1995 and set up the Cardiothoracic Unit, which offers a comprehensive adult service including surgery for ischemic and valvular heart disease, thoracic vascular conditions, heart transplantation, vascular access as well as lung disease. He has a special interest in the Epidemiology of Aortic Valve Surgery.

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