University Clinical Center of Serbia



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PRESENTATION OF TAVI CENTER....

- Start of the TAVI program (1st TAVI): August 23rd, 2022.
- Number of TAVI till now: 28
- Number of TAVI in 2022: 28
- Number of independent operators in 2022: 2
- Valves implanted and %: EVOLUTE R and Pro 100%
- 30-day mortality (from the beginning): 0%
- 30-day mortality in 2021/22: 0%

Patient

• Echo

Coronary angiography/CCTA

Key CT measurements for TAVI

- Worsening dyspnea, lightheadedness without syncopal episodes,
- Prior MI in 2017.
- Prior CABG No II 2017
- Prior PCI in 2018
- HBI Cr 140
- STS 3.22%, EUROSCORE II 7.85%, Katz frailty score 6, Clinical frailty score 4

Patient

Echo

Coronary angiography/CCTA

Key CT measurements for TAVI

• EF 60%, no WMA abnormalities

• AVA 0.5 cm2, PG 60, MG 38mmHg, AR 1+

• MR 1-2+, TR 1+

Patient

• Echo

Coronary angiography/CCTA

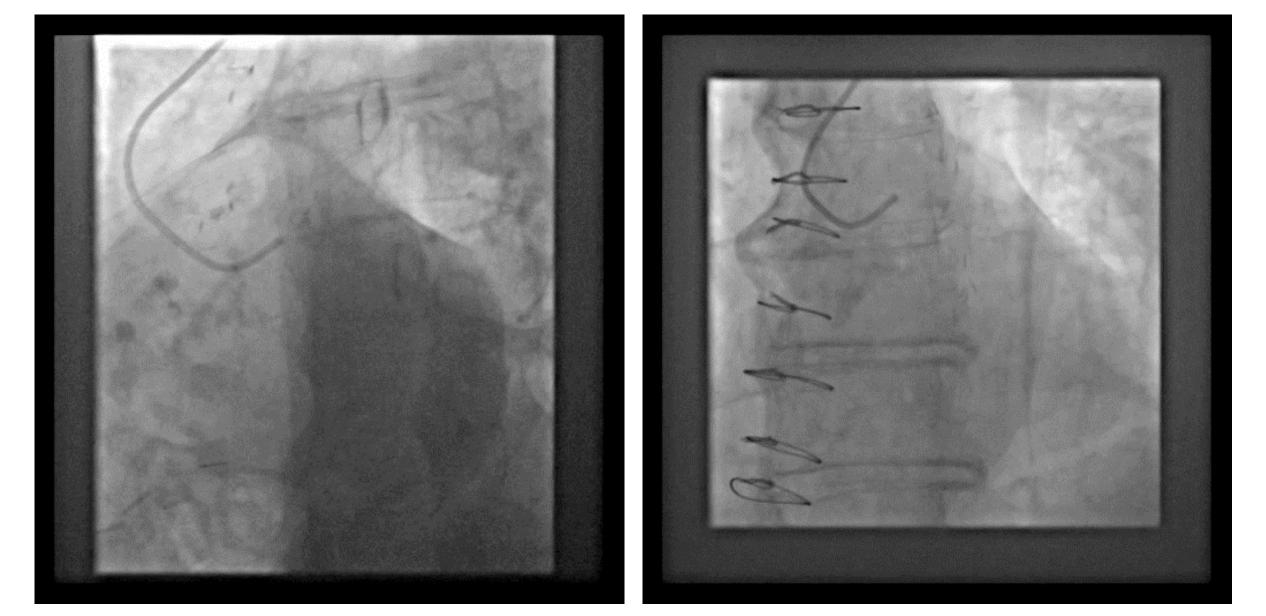
Key CT measurements for TAVI

Coronarography and ad hoc PCI Jun 2022

Calcified distal LM lesion. Occluded mid LAD. Diffusely diseased Cx.
 Occluded OM1. RCA NCS stenosis.

LIMA patent





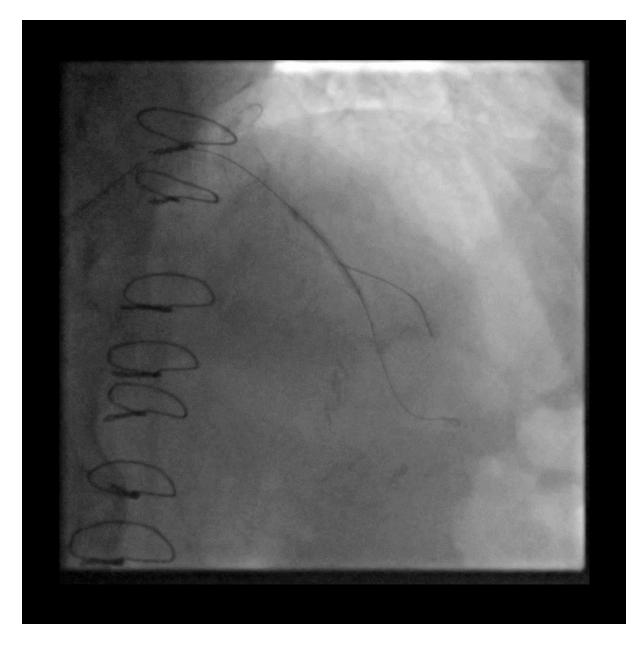


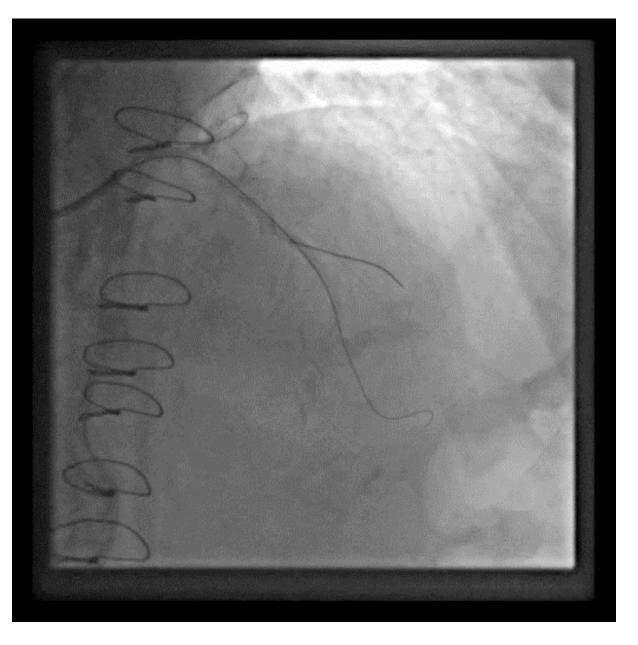
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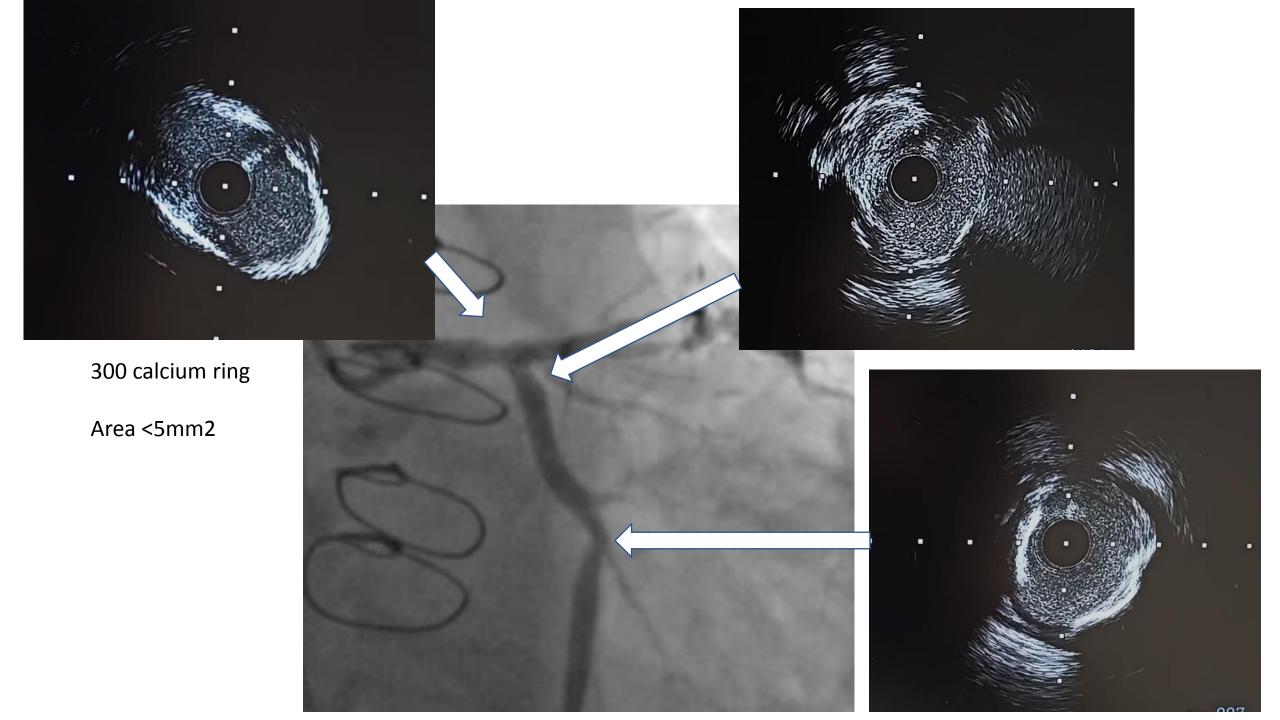
LIMA patent

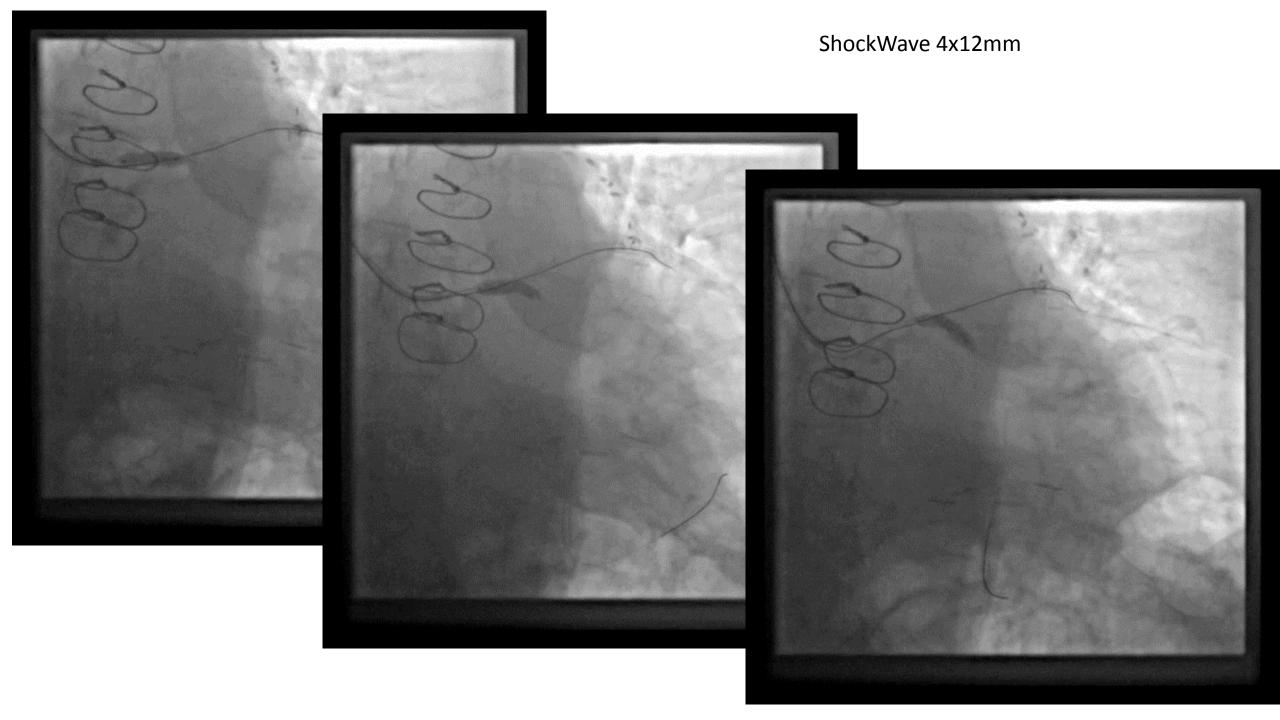
PCI of LAD and IVUS interrogation for the LM



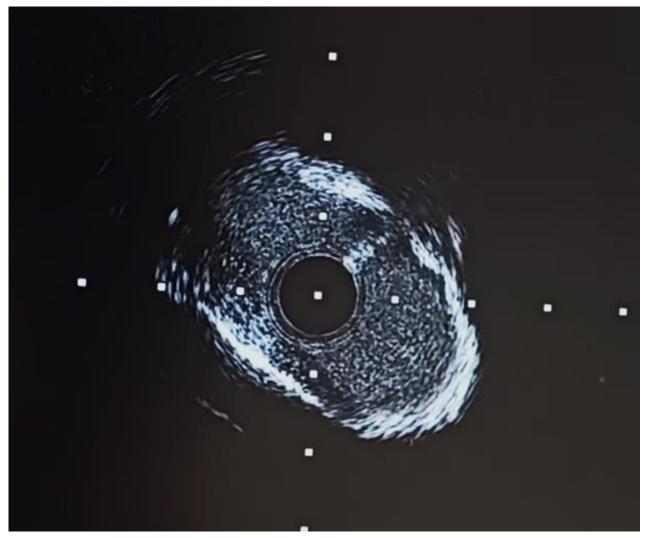


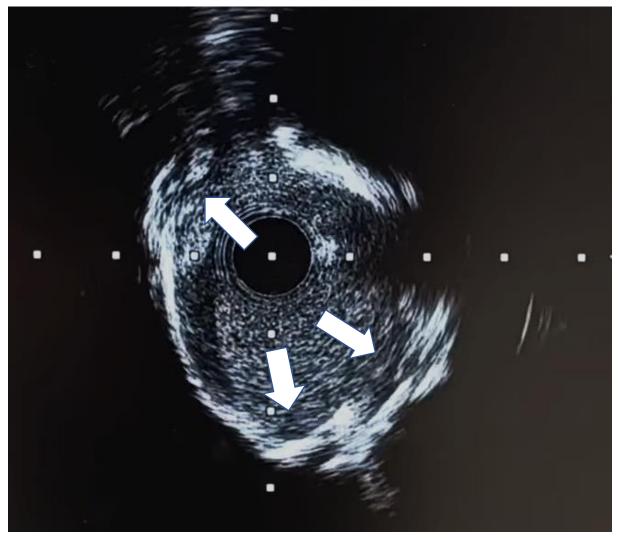
DES 2.25x23mm DES 2.5x16mm



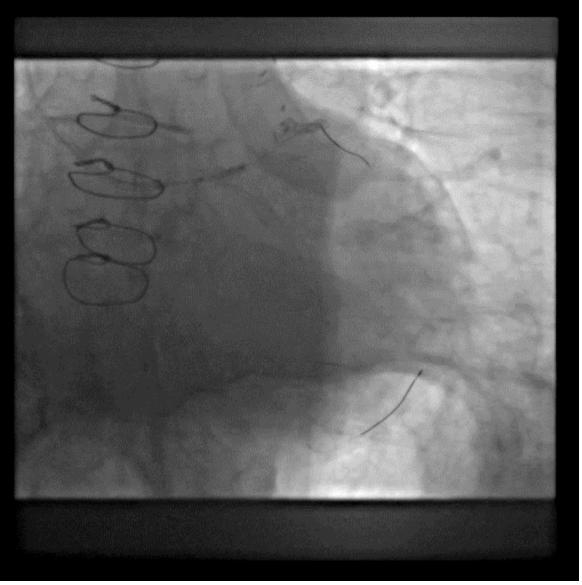


Post IVL

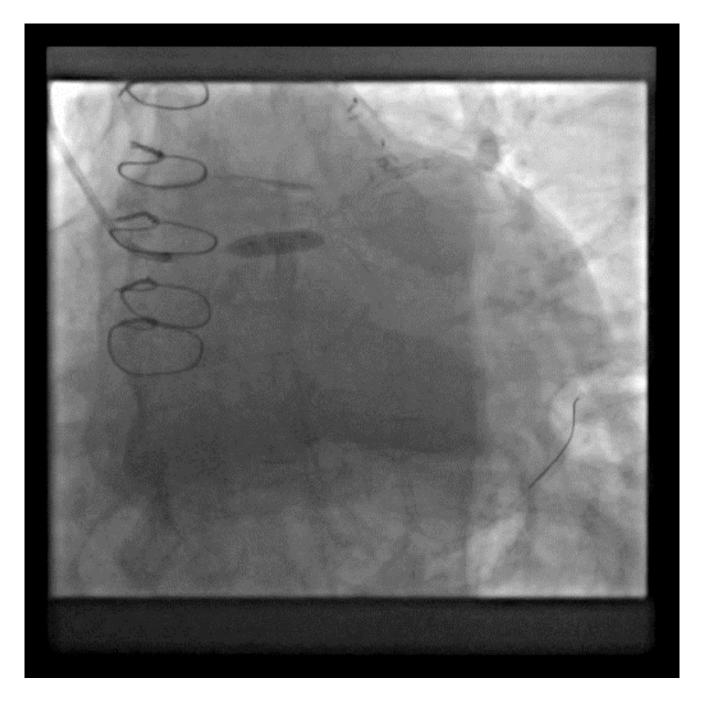




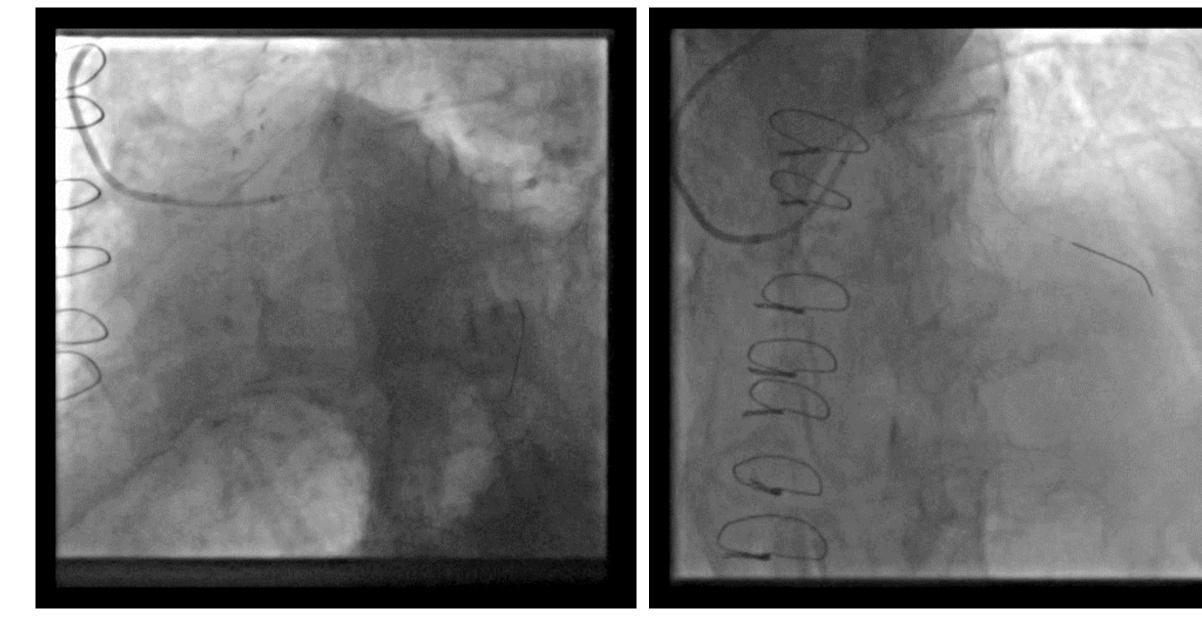




DES 4.0x28mm Balloon 3x12mm



Balloon 5x12mm



Patient

• Echo

Coronary angiography/CCTA

Key CT measurements for TAVI

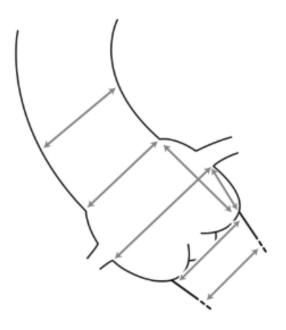
MEDTRONIC ANALYSIS

ANNULUS

Diameter (mm)	23,9	x 26,2 ,	25,1
Perimeter (mm)	Min 78,3	Max , Derived Ø (mm)	Mean 24,9
Area (mm²)	485,8	, Derived Ø (mm)	24,9

LVOT

Diameter (mm)	22,8	x 28,8 ,	25,8
,	Min	Max	Mean
Perimeter (mm)	79,9	, Derived Ø (mm) –	25,4
Area (mm²)	489,4	, Derived Ø (mm)	25,0



Max Ascending Aorta Diameter (mm)	30,2		
Sinotubular Junction Diameter (mm)	27,5 Min	x 28,6 Max	
Sinus of Valsalva Diameter (mm)	31,1	31,1	31,8
	LCC	RCC	NCC
Sinus of Valsalva Height (mm)	22,7	22,0	20,1
, and the same of	LCC	RCC	NCC
Coronary Ostia Height (mm)	15,0	16,0	
resigne (mm)	Left	Right	

RIGHT

CIA Min Diameter (mm)

11,0 x 11,8

EIA Min Diameter (mm)

8,6 x 8,9

Femoral Min Diameter (mm)

8,4 x 8,8



LEFT

CIA Min Diameter (mm)

8,0 x 9,3

EIA Min Diameter (mm)

8,3 x 8,4

Femoral Min Diameter (mm)

8,3 x 9,1

RIGHT

Subclavian Min Diameter (mm)

x ///

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Annular Angulation ≈46°

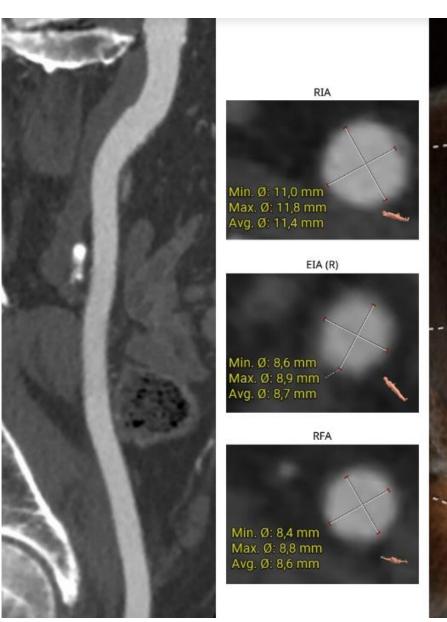


LEFT

Subclavian Min Diameter (mm)

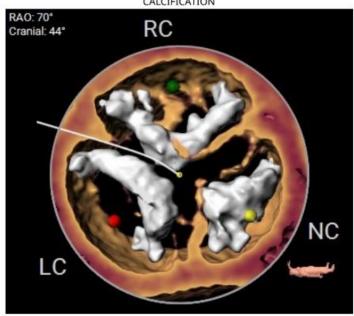
/// x ///

Please review images for direct aortic evaluation.





AORTIC VALVE CALCIFICATION



LAO: 18° Caudal: 2°

Annular Angulation

46°

This is only an estimation.

Patient

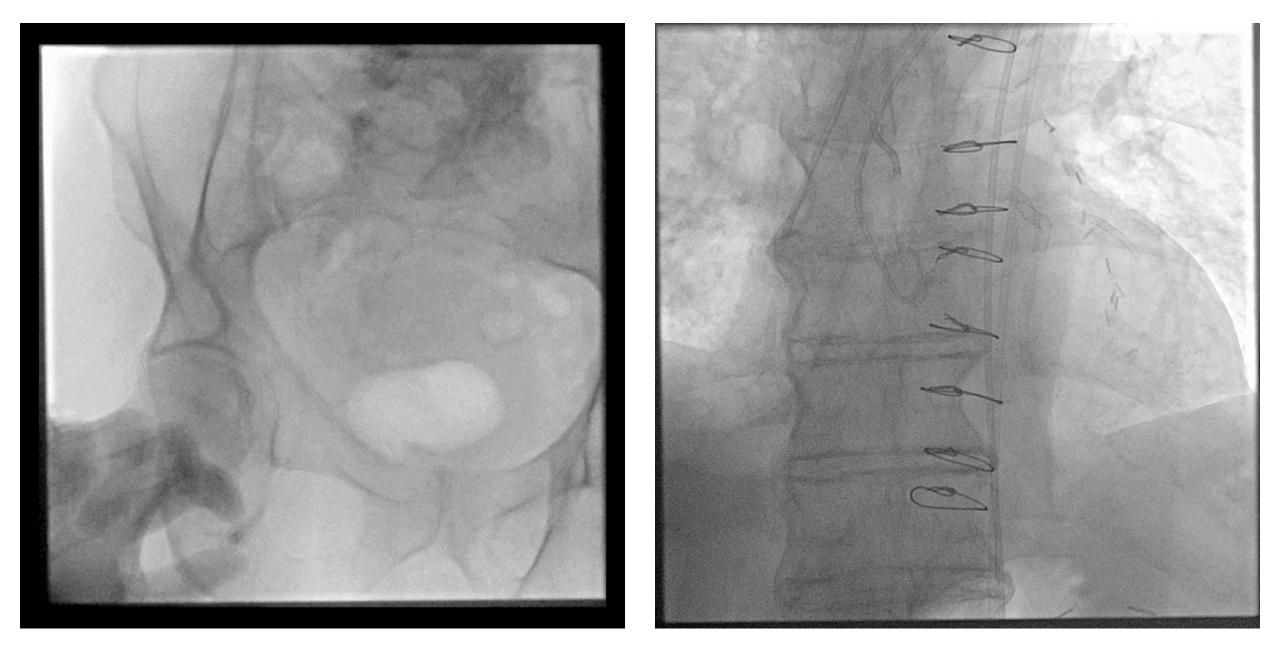
• Echo

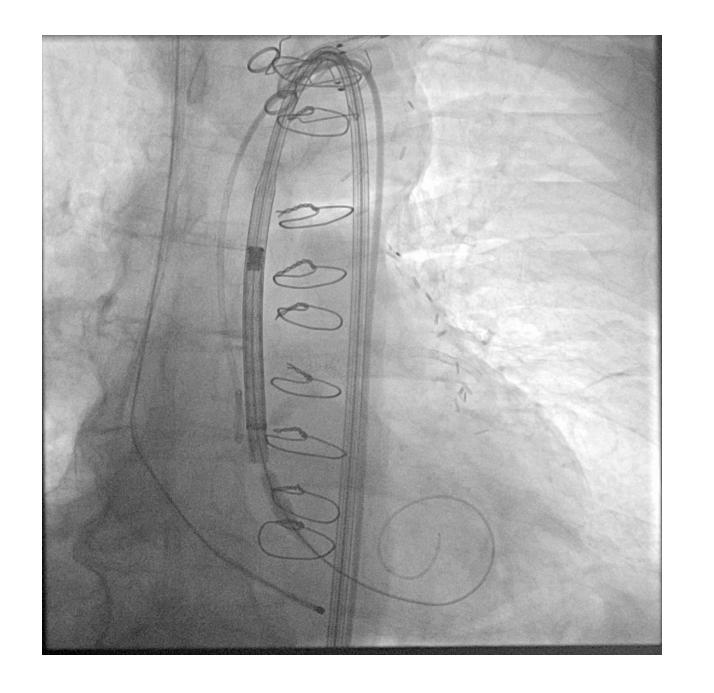
Coronary angiography/CCTA

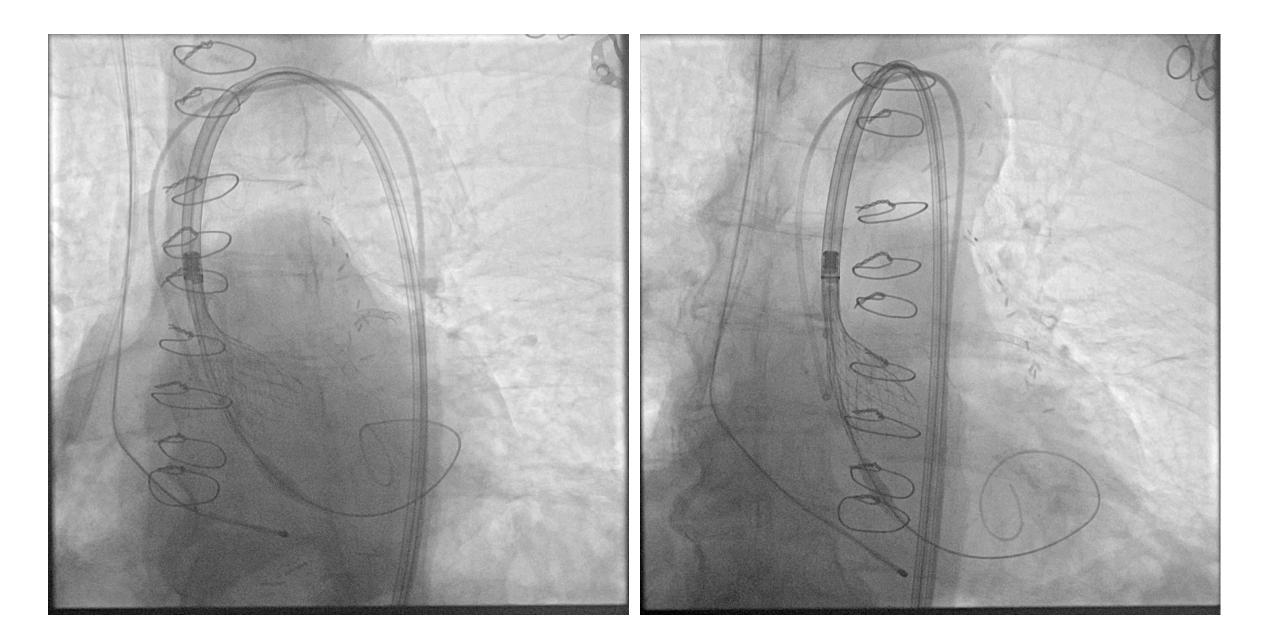
Key CT measurements for TAVI

CASE REPORT-KEY PROCEDURAL STEPS (1)

- Bi-femoral access, right primary 14 Fr, left secondary 6 Fr (planned to go sheetless)
- EVOLUTE R 29mm
- Direct implantation planned, postdilatation if needed
- Temporary pacing via jugular vein
- Proglide + Angioseal 8Fr right, Angioseal 6Fr left closure









CLINICAL OUTCOME and FU

• Post TAVI ECHO no complications, max gradient 17mmHg, AR mild

Discharged without complications

• 30 days FU EF 56%, PG 13, mean 7 mmHg, paravalvular AR 1+

• 90 days FU PG 10 mmHg, AR 1+

ASA, Clopidogrel

WHY DID I SHOW THIS CASE?

•It was my FIRST TAVI!!!

When was the last time, you did something for the first time?



Vanja, first steps Feb 2021