



Implant of Myval Transcatheter Aortic Valve in Patients with Severe Aortic Stenosis

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Objective: The objective of this work is to establish and determine the behavior of patients with severe aortic stenosis who underwent the implantation of the Myval expandable balloon aortic valve and its follow-up 30 days and 6 months after the valve was implanted.

Methods: The method of study is a prospective design, with follow-up of cases at 30 days and 6 months after valve implantation. Below is our initial experience with the Myval aortic valve. Initially, the clinical and imaging evaluation was performed and discussed in the Heart Team, with indication for Myval transcatheter aortic valve implant, through the most appropriate approach for each patient. Transcatheter valve implantation was performed in the hemodynamics room, under general anesthesia and with the use of transesophageal echo. The trans-

femoral and transaortic approach was done with support of cardiovascular surgery. Table 1 shows the clinical data.

Results: The following Table 2 describes the characteristics of the patients after the valve implant.

Conclusions: According to these results, we can conclude that the implantation of the aortic valve transcatheter myVal is feasible and represents a good alternative in patients with severe aortic stenosis.

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Disclosure Statement

The authors do not declare any conflict of interest.

Table 1. Clinical and imaging characteristics of the patients studied.

Clinical data	Patient 1	Patient 2	Patient 3	Patient 4	Patient 5	
Age, gender	75,Female	66,Male	61,Male	75,Male	74,Female	
STS / EuSII (%)	18.8/11.2	4.1/16.7	2.9/1.7	1.6/2.9	16.2/9	
Arterial hypertension	Do not	Yes	Yes	Yes	Yes	
Previous coronary disease	3 vessels	2 vessels	Do not	Do not	1 vessel	
Previous cardiac surgery	Aortocoronary bypass AMI to ADA and venous to MO1	Aortocoronary bypass AMI to ADA and venous to MO1	Do not	Do not	Do not	
Other Comorbidities	ADC breast with radiotherapy and chemotherapy	COPD	Mellitus diabetes	Do not	Disease Arterial peripheral	
Conduction disorders	Do not	BAV MCP-RSC	Do not	Do not	Do not	
Ejection fraction	45%	14%	61%	60%	50%	
Peak velocity (Aortic)	5.4 m/s	3.3 m/s	4.4 m/s	4.54 m/s	4.64 m/s	
Valve area (Aortic)	0.5 cm ²	0.45 cm ²	0.7 cm ²	0.55 cm ²	0.32 cm ²	
Maximum gradient (Aortic)	97 mmHg	46 mmHg	77 mmHg	83 mmHg	105 mmHg	
Mean gradient (Aortic)	70 mmHg	27 mmHg	43 mmHg	41 mmHg	74 mmHg	
Regurgitation Aortic	0	+/++++	0	+/++++	0	
Pulmonary pressure	35 mmHg	55 mmHg	45 mmHg	10 mmHg	50 mmHg	
Access	Transfemoral	Transaortic	Trans femoral	Transfemoral	Transfemoral	
Number Myval Prosthesis	20	26	26	29	23	



Table 2. Results post-procedure. 30 days and 6 months follow-up.

	Patient 1		Patient 2		Patient 3		Patient 4			Patient 5				
Results	Post	30 d	Post	30 d	6m	Post	30 d	6m	Post	30 d	6m	Post	30 d	6 m
Maximum velocity (m/s)	-	-	1.8	2.2	1.1	1.9	2.1	1.4	1.4	1.6	1.4	1	1.1	1
Gradient mean (mmHg)	-	-	6	11	5	6.5	10	7	5.9	8	6	4	5	4
Paravalvular Regurgitation	-	-	0	0	0	0	0	0	mild	mild	mild	mild	mild	mild
Pacemaker	-	-	F	revious		Do not	Do not	Do not	Do not	Do not	Do not	Do not	Do not	Do not
Mortality	Post-implant	: AMI died	-	-	-	-	-	-	-	-		-	-	-