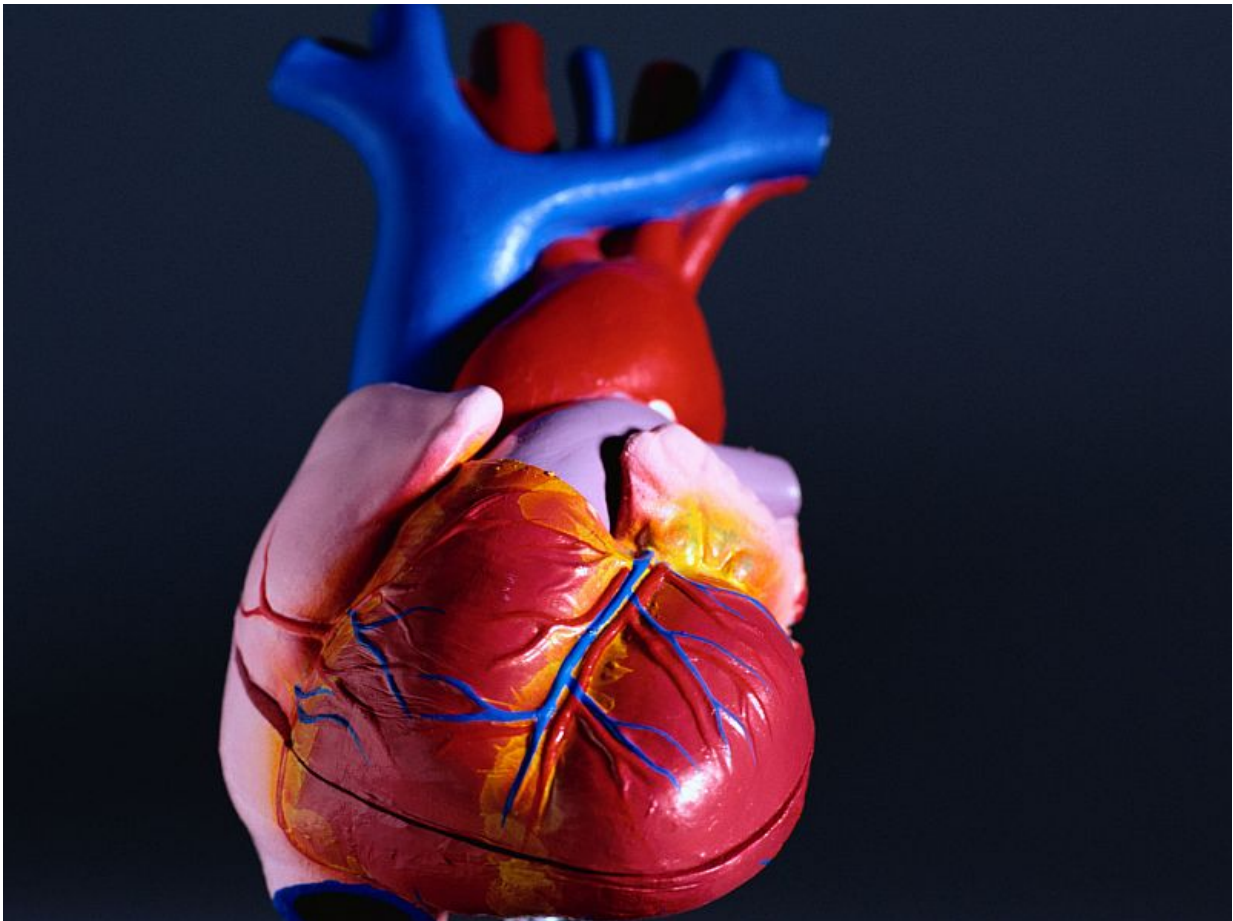


Review: similar / improved outcomes for TAVI versus SAVR

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(HealthDay)—Transcatheter aortic valve implantation (TAVI) may be

associated with improved clinical outcomes versus surgical aortic valve replacement (SAVR) in adults with severe aortic stenosis, according to a review and meta-analysis published online June 7 in the *Annals of Internal Medicine*.

Giuseppe Gargiulo, M.D., from the Federico II University in Naples, Italy, and colleagues compared [clinical outcomes](#) in adults with [severe aortic stenosis](#) undergoing TAVI or SAVR. Data were included from five randomized trials and 31 observational matched studies involving 16,638 patients.

The researchers found that TAVI and SAVR did not differ significantly in terms of early (odds ratio, 1.01; 95 percent confidence interval, 0.81 to 1.26) or midterm (odds ratio, 0.96; 95 percent confidence interval, 0.81 to 1.14) all-cause mortality. In trials, transfemoral TAVI provided mortality benefits over SAVR. In analyses restricted to studies of patients at low to intermediate risk there were non-significant reductions in early and midterm mortality with TAVI. TAVI was associated with lower incidence of periprocedural myocardial infarction, major bleeding, acute kidney injury, and new-onset atrial fibrillation; however, TAVI was associated with increased risk for pacemaker implantation, vascular complications, and paravalvular leak. A non-significantly increased risk of long-term all-cause mortality was seen for TAVI; long-term [mortality](#) outcomes were inconclusive for patients at low to intermediate risk.

"Compared with SAVR, TAVI may have similar or better early and midterm outcomes for [adults](#) with aortic stenosis, including those at low to intermediate risk," the authors write.

One author disclosed financial ties to Edwards Lifesciences.

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