# TAVR in a Patient with Severely Depressed Left Ventricular Ejection Fraction

Ariel Roguin MD PhD
Rambam Medical Center,
B. Rappaport - Faculty of Medicine, Technion
Haifa ISRAEL

Complex Management Options in TAVR (Sponsored by the Israel Heart Society Working Group on Interventional Cardiology







#### **Disclosure Statement of Financial Interest**

Within the past 12 months, I or my spouse/partner have had a financial interest/arrangement or affiliation with the organization(s) listed below.

#### **Affiliation/Financial Relationship**

- Grant/Research Support
- Consulting Fees/Honoraria

#### **Company**

- Edwards
- Medtronic







- Diabetes, Hypertension, Hyperlipidemia.
- Chronic renal failure [Cr- 1.5]
- Was admitted for decompensated left heart failure and worsening angina.







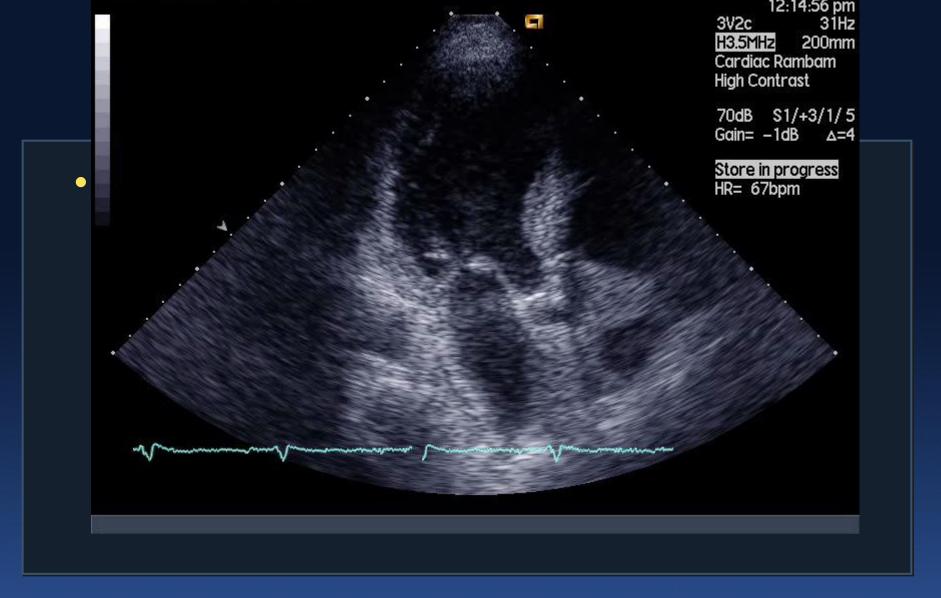
- S/P inferior MI [1999]
- Stents to RCA

Nuclear scan - Severe infero-lateral ischemia.















## TTE: Mr S 86 yo Male

- Moderately to severely reduced LV systolic function EF 25-30%
- Infero-postero lateral akinesis (MI) and septal hypokinesis.
- Mildly dilated LV.
- Moderate diastolic dysfunction (Pseudonormal filling pattern)







## TTE: Mr S 86 yo Male

- Low gradient severe calcific aortic stenosis
- Trans aortic gradients: peak 37 mmHg, mean 23 mmHg.
- Aortic valve area 08-0.9 cm<sup>2</sup> by continuity and plannimetry.
- Annulus 21 mm.
- Moderate MR
- Mildly reduced RV systolic function.
- Pulmonary artery systolic pressure ~45 mmHg







Coronary angiography:

50% LM disease,

50% LAD

70% Ramus

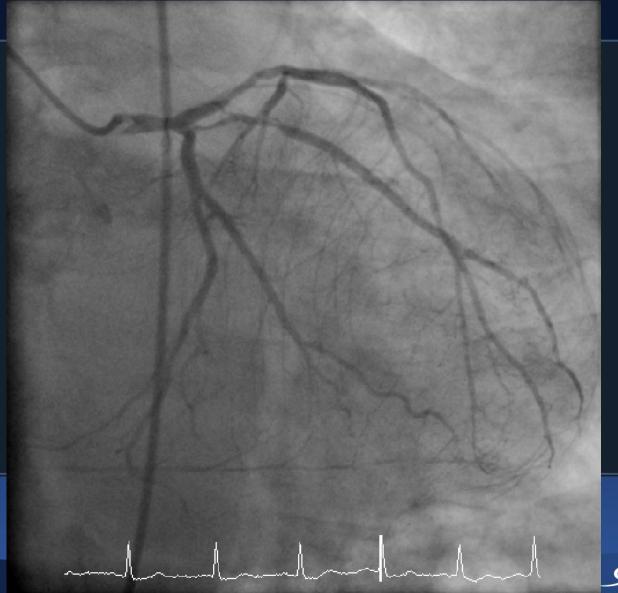
Long ISR in RCA.







Cath:



















 A long DES was inserted in the RCA with good angiographic result and improvement in anginal symptoms.

LV function - moderately to severely reduced.







- Symptomatic
- Dyspnea after minimal efforts
- Hospitalized again after several days







- Heart team : recommendation TAVI
- Logistic EUROSCORE 21.63%
- STS
  8.6% for mortality,
  36.2% for morbidity & mortality







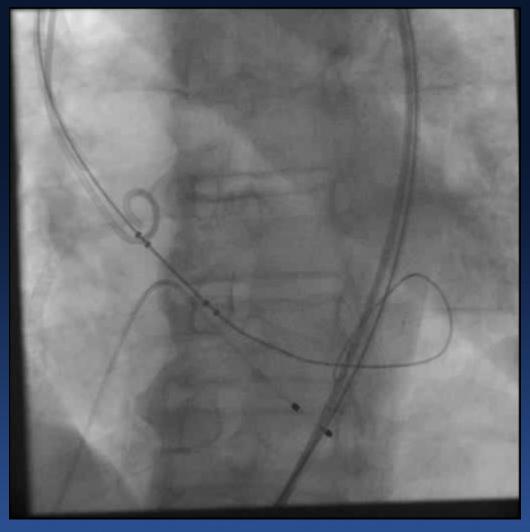
#### **CT Angio:**

- Minimal diameters 7.9 mm Bilateral
- For transfemoral approach.







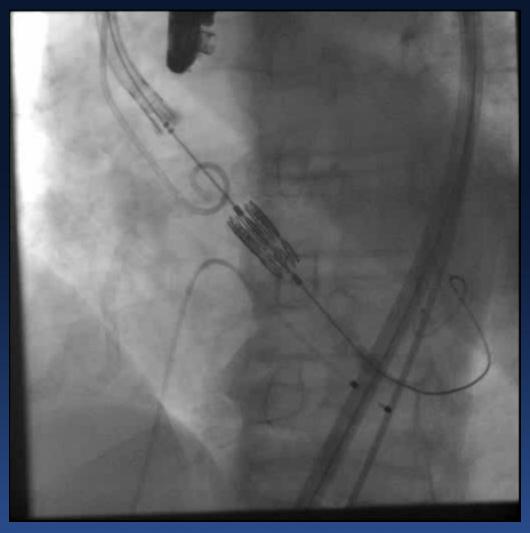


Balloon Valvuloplasty 23mm/30mm







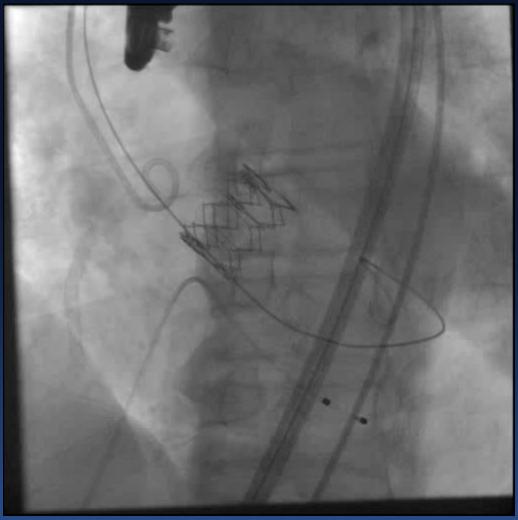


26 mm Edwards SAPIEN transcatheter heart valve Valve









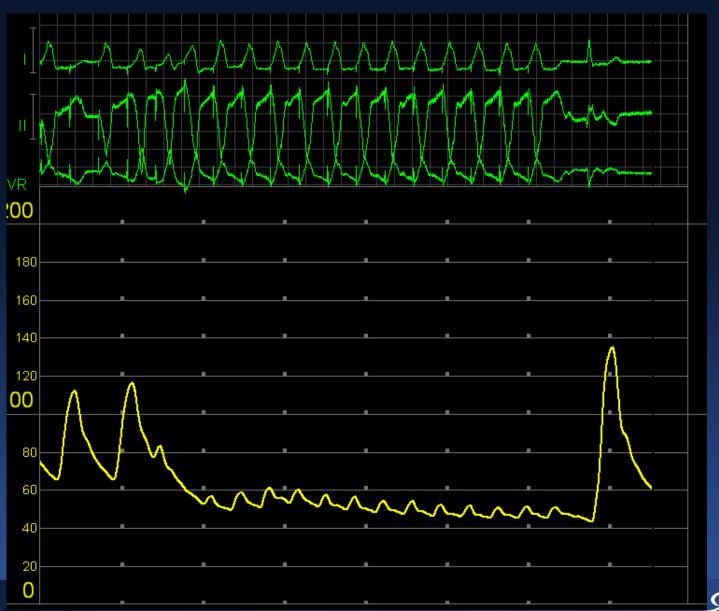
Post implant Edwards SAPIEN valve







#### Mr S 86 yo Male: Procedure Hemodynamics







#### Mr S 86 yo Male: Procedure Hemodynamics



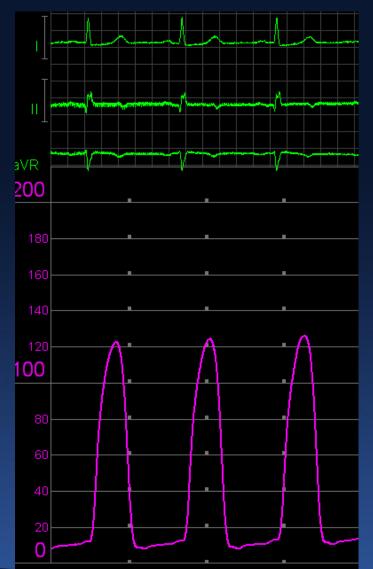


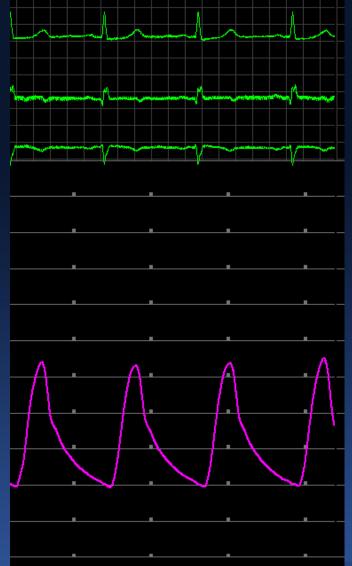




#### Mr S 86 yo Male: Procedure Hemodynamics

#### **Minimal LV-Ao Gradient**











#### Mr S 86 yo Male Post Procedure Course

- Patient discharged after 4 days
- No rhythm problems

 Urinary Tract Infection – treated successfully with antibiotics







#### Mr S 86 yo Male Clinical Follow Up

 CardioVascular system – excellent post procedure course.

- No chest pain.
- NYHA 1-2







#### **Echo Pre-TAVI**

#### Cardiac Chambers

Left ventricle

LV cavity size: Mildly dilated
LV wall thickness: Mildly increased

LV systolic function: Moderately-to-severely reduced

End-diastolic diameter: 5.9 cm End-diastolic volume (Teichholz): 173 ml ; 95 ml/m² End-systolic diameter: 5.2 cm End-systolic volume (Teichholz): 131 ml ; 72 ml/m²

Visually-estimated LVEF: 30% LVEF (Teichholz): 24% Interventricular septum thickness: 1.4 cm Posterior wall thickness: 0.8 cm LV mass: 272 g LV mass index: 149 g/m²

Wall motion score

Rest:



LV regional wall motion: (0-Not visualized 1-Normal 2-Hypokinesis 3-Akinesis 4-Dyskinesis 5-Aneurysm)

Score index: 2.06 Right ventricle

RV size: Normal

RV systolic function: Mildly reduced

Left atrium

LA cavity size: Mildly dilated

Right atrium

RA cavity size: Normal

<u>Aorta</u>

Aortic root / sinuses: 3.7 cm Proximal ascending aorta: 4.1 cm

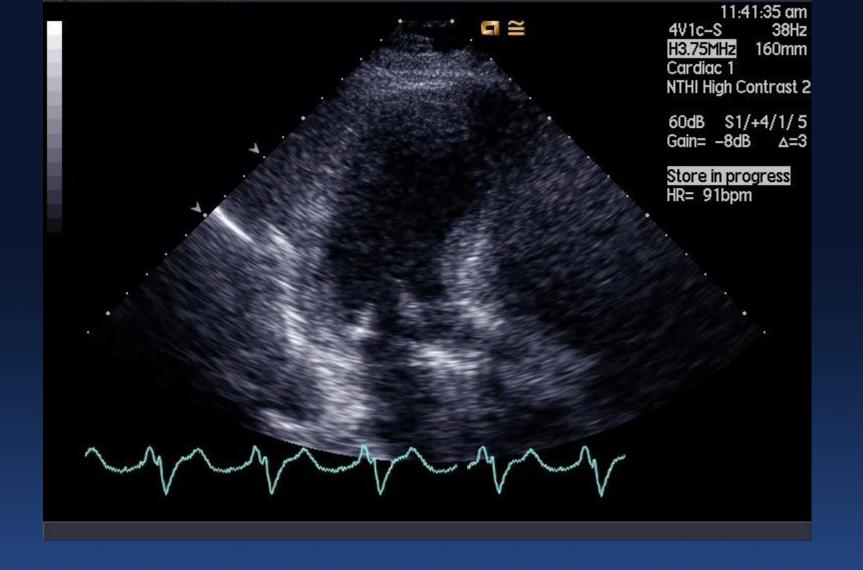
Pericardial effusion

Pericardial effusion: None









## TTE - Follow Up







#### Echo Follow Up 3 month post TAVI

#### Cardiac Chambers

Left ventricle

LV cavity size: Mildly dilated

LV wall thickness: Normal

LV systolic function: Mildiy-to-moderately reduced

End-diastolic diameter: 6.1 cm End-diastolic volume (Teichholz):

40%

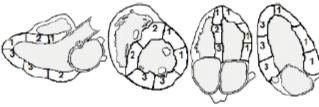
Visually-estimated LVEF:

1.0 cm Interventricular septum thickness: 1.1 cm Posterior wall thickness:

LV mass: 270 g

Wall motion score

Rest:



LV regional wall motion: (0-Not visualized 1-Normal 2-Hypokinesis 3-Akinesis 4-Dyskinesis 5-Aneurysm)

Score index: 1.81 Right ventricle

RV systolic function: Normal

Left atrium

LA cavity size: Mildly dilated End-systolic area: 25 cm<sup>2</sup>

Right atrium

RA cavity size: Normal

Aorta

Proximal ascending aorta: 4.2 cm

Pericardial effusion

Pericardial effusion: None

Cardiac Valves

Aortic valve

Bioprosthesis, normal morphology, posterior perivalvular leak Aortic prosthesis:



187 ml

#### Echo Follow Up 3 month post TAVI

Mitral annulus calcification (MAC)

Mean pressure gradient:

Indexed aortic valve area:

LVOT diameter:

Velocity time integral (VTI) - LVOT:

AS / Prosthesis

Peak pressure gradient:

Velocity time integral (VTI) - aortic valve:

Aortic valve area (continuity equation):

Mitral valve

Structure: Mitral regurgitation:

Tricuspid valve

Tricuspid regurgitation:

Mild (I)

Hemodynamics

15 mmHa

37 cm

1.4 cm<sup>2</sup>

Mild (I)

TR pressure gradient: 15 mmHq

Estimated RA pressure: 5 mmHq PA systolic pressure: 20 mmHg

Mitral inflow

Fused F and A Comments:

Cardiac output

Stroke volume 53 ml

Summary

Diagnoses

Left ventricular systolic function: mildly-to-moderately reduced

Right ventricular systolic function: normal

Left ventricular segmental wall motion abnormalities - inferopoterior

Left ventricular concentric hypertrophy: mild

Left atrial enlargement: mild

Aortic bioprosthesis

Agric prosthesis: normal morphology and function

Mitral annulus calcification Mitral valve regurgitation: mild

10 mmHa

0.82 cm<sup>2</sup>/m<sup>2</sup>

17 cm

2.0 cm



## Mr S 86 yo Male Summary

- 86 year old gentleman NYHA 3-4, CCS-3
- S/P MI and coronary artery disease
- EF=30%
- DES to RCA
- Successful TAVI

- Post procedure:
- CCS-1, NYHA 1-2 EF=40%







