Percutaneous Coronary Intervention and TAVI as a Combined Procedure

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Background: Coronary artery disease (CAD) has been reported in ~50% of elderly patients with severe aortic stenosis (AS). Concomitant CAD may increases the procedural risk of transcatheter aortic valve implantation (TAVI). In light of the evolution of TAVI and ongoing improvements in techniques of PCI, a combined approach using PCI and TAVI can be proposed for patients with complex coronary artery and AS.

Aims: We report herein our experience with combined PCI and TAVI in elderly patients with severe AS.

Methods: Patients who underwent TAVI at our department were retrospectively analyzed. Study endpoints included procedural success and 30-day survival.

	TAVI+PCI Combined [n=18]
Age [year]	81±7
Male	33%
NYHA>2	100%
Anginal pain	39%
DM	33%
CAD	100%
EuroScore	20±3
STS score	9±5
Femoral/Apical/Axillery	78%/22%/0%
CoreValve/Edwards	39%/61%
Procedural success	94%
One month mortality	5.6%

Conclusion: We conclude that in carefully selected cases, combining PCI and TAVI is feasible and associated with acceptable clinical outcomes in selected cases. Further experience is needed to evaluate this expanded strategy