

Survival Following Intervention in Patients with Low-Gradient Severe Aortic Stenosis and Preserved Left Ventricle Function.

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Disclosures

NONE



Severe Aortic Stenosis

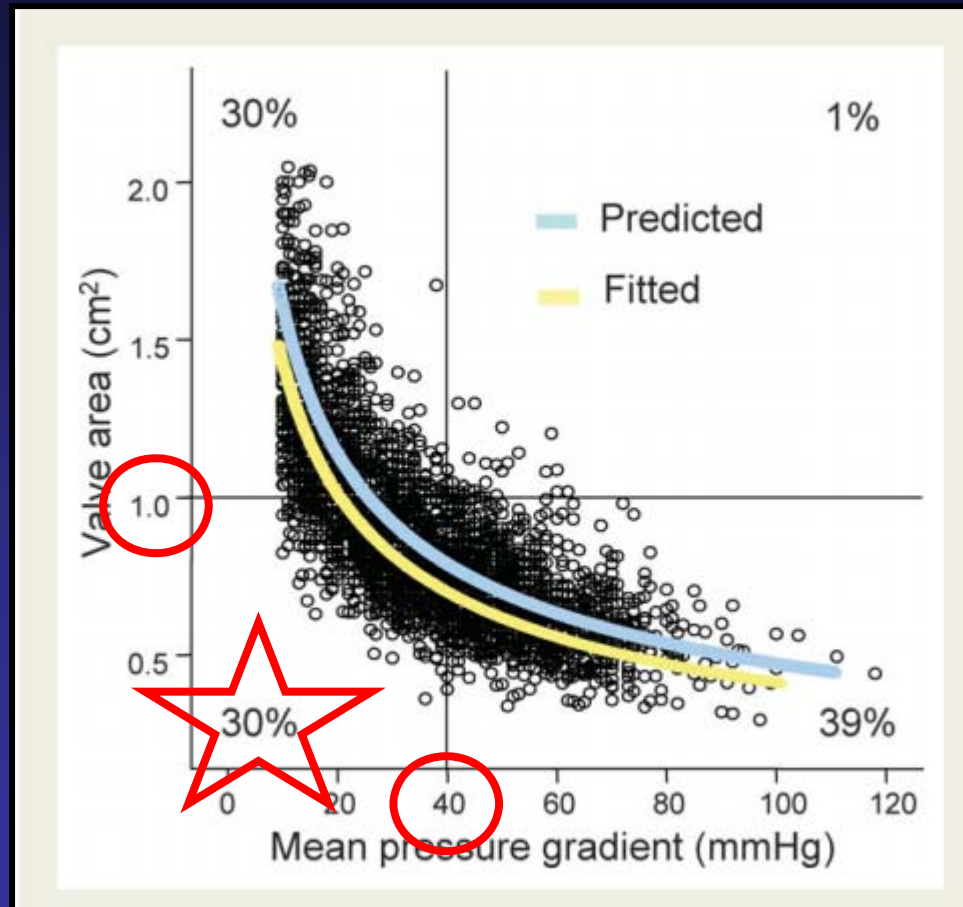
- Aortic valve area $\leq 1 \text{ cm}^2$
 - Indexed valve area $\leq 0.6 \text{ cm}^2/\text{m}^2$
- Mean pressure gradient $\geq 40\text{mm Hg}$
- Peak velocity $\geq 4\text{m/s}$

Severe Aortic Stenosis

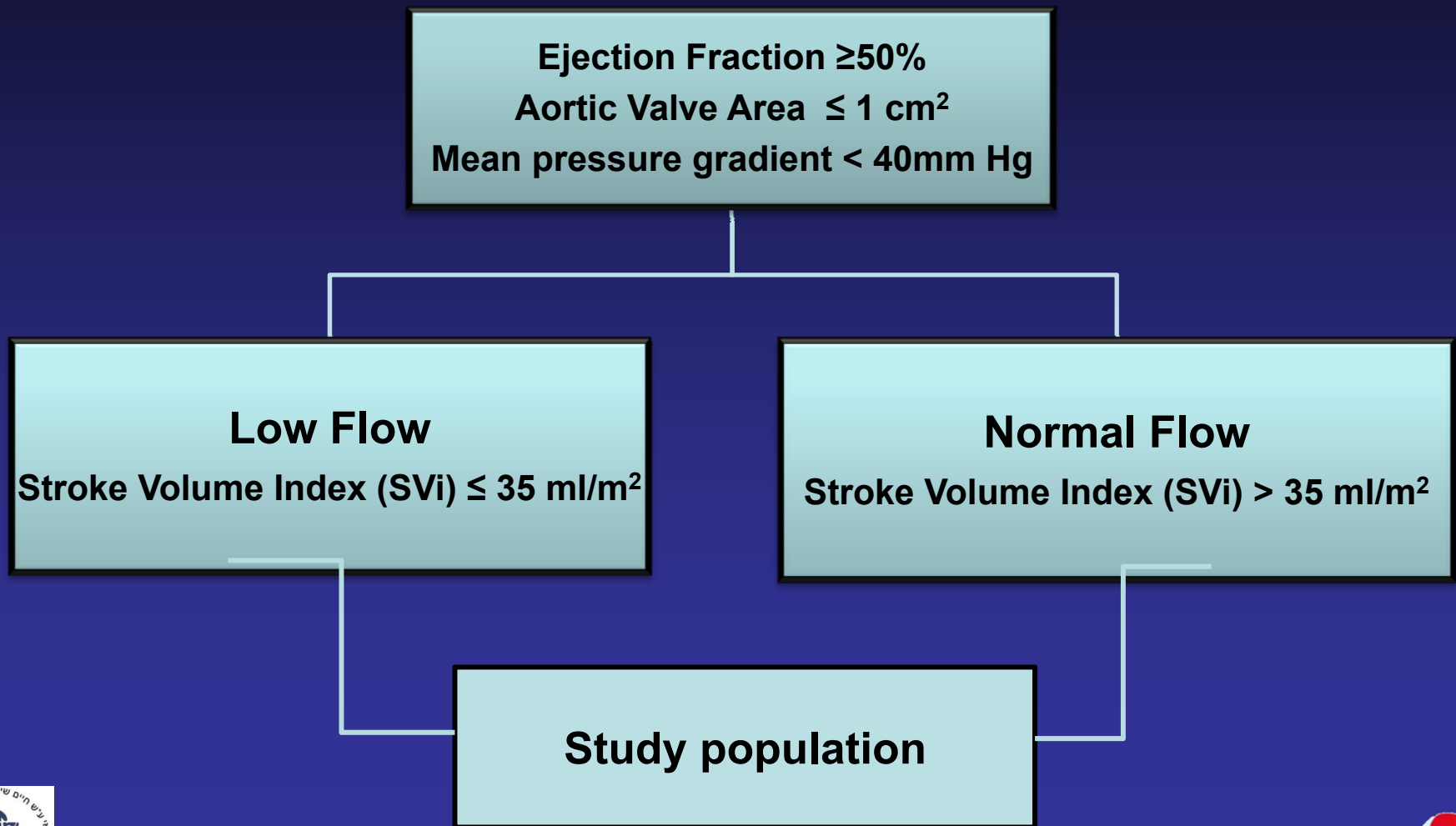
- Aortic valve replacement improves survival of symptomatic patients with severe aortic stenosis.



Severe Aortic Stenosis



Low Gradient Severe Aortic Stenosis with Preserved Ejection Fraction



Low Gradient Severe Aortic Stenosis with Preserved Ejection Fraction

- There are conflicting data regarding the effect of aortic valve intervention on survival.

Dumesnil JG, et-al. Paradoxical low flow and/or low gradient severe aortic stenosis despite preserved left ventricular ejection fraction: implications for diagnosis and treatment. Eur Heart J 2010.

Jander N, et al. Outcome of patients with low-gradient "severe" aortic stenosis and preserved ejection fraction. Circulation 2011.

- Resulting in inconsistent referral to valvular intervention.

Clavel MA, et-al. Outcome of patients with aortic stenosis, small valve area, and low-flow, low-gradient despite preserved left ventricular ejection fraction. J Am Coll Cardiol 2012.



Aim

- To evaluate the effect of aortic valve intervention on survival among patients with low gradient severe aortic stenosis and preserved ejection fraction.

Methods

Study Population

- 416 patients who underwent Echocardiographic and Doppler studies at Sheba medical center between 2004 - 2012.



Methods

Inclusion criteria

- Ejection fraction $\geq 50\%$
- Aortic valve area ≤ 1 cm²
- Mean pressure gradient ≤ 40 mm Hg

Exclusion criteria

- Ejection fraction $< 50\%$
- Another significant valvular disease

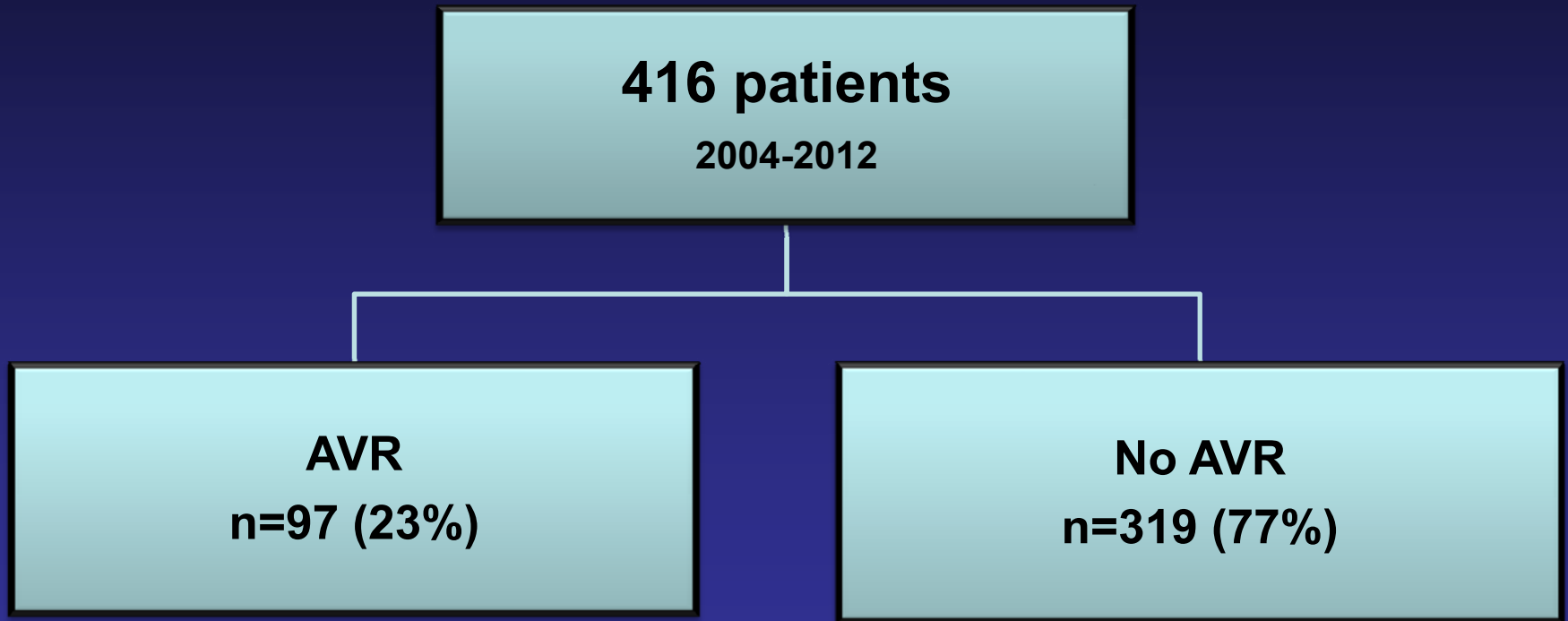
Methods

- Echocardiographic parameters
- Clinical data
- Valvular intervention
- Death records from the ministry of health

Statistical analysis

- The effect of aortic valve intervention on survival was assessed as a time dependent covariate in the Cox multivariate model.
- Mantle - Byar survival analysis was used to evaluate the survival of patients before and after intervention.

Results



AVR - Aortic Valve Replacement

Baseline characteristics

	AVR (n=97)	no AVR (n=319)
Male (%)	50	40
Age>80 (%)	27	54 *
BMI (kg/m ²)	28±4	28±5
BSA (m ²)	1.8±0.2	1.8±0.2

* P< 0.001



Baseline characteristics

	AVR (n=97)	no AVR (n=319)
Diabetes Mellitus (%)	41	35
Hypertension (%)	65	69
Dyslipidemia (%)	47	50
Active Smokers (%)	5	6
Chronic Renal Failure (%)	17	25
Ischemic Heart Disease (%)	45	46
Cerebrovascular Disease (%)	14	20

Echocardiographic characteristics

	AVR (n=97)	no AVR (n=319)
Left Ventricle Ejection Fraction (%)	59 ± 5	60 ± 5
LV diastolic dimension (cm)	4.7 ± 0.5	4.5 ± 0.5
LV systolic dimension (cm)	2.8 ± 0.5	2.7 ± 0.5
Septum width (cm)	1.2 ± 0.2	1.2 ± 0.2
LV mass (gr)	203 ± 51.5	190 ± 46
LA area (cm ²)	22 ± 4.3	23.2 ± 7.6
Estimated Pulmonary Artery Pressure (mmHg)	38.5 ± 12	40.6 ± 11.9



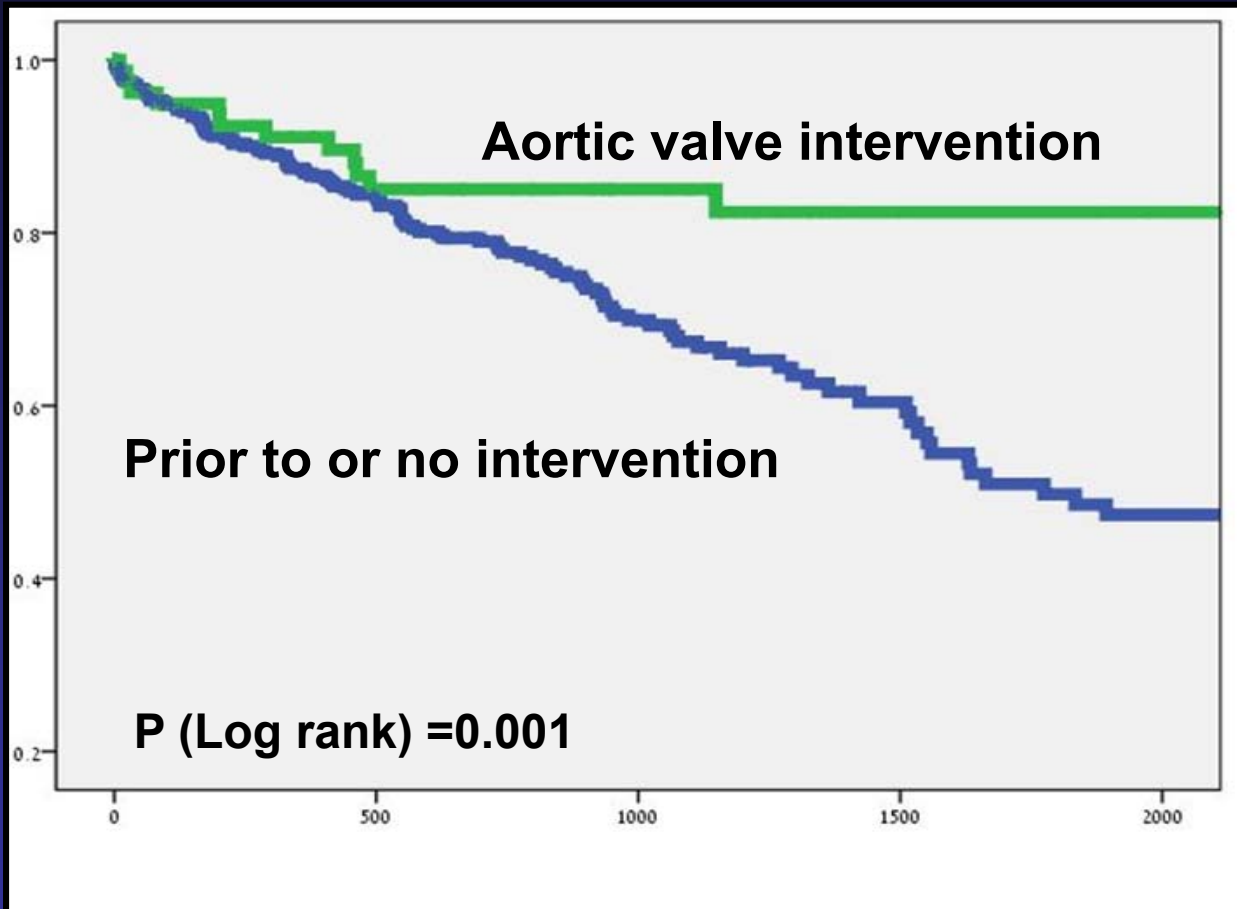
Echocardiographic characteristics

	AVR (n=97)	no AVR (n=319)
Aortic Valve area (cm ²)	0.8 ± 0.1	0.8 ± 0.1
Indexed Area (cm ² /m ²)	0.45 ± 0.06	0.47 ± 0.07
Aortic Valve Mean Gradient (mmHg)	32 ± 5.3	30 ± 6.5 *
Peak Velocity (m)	3.7 ± 0.4	3.5 ± 0.4
SV Index (ml/m ²)	40.3 ± 6.1	38.7 ± 7.2
Cardiac Index (L/min*m ²)	2.7 ± 0.5	2.7 ± 0.5

* P < 0.001



Mantel Byar Survival Curve

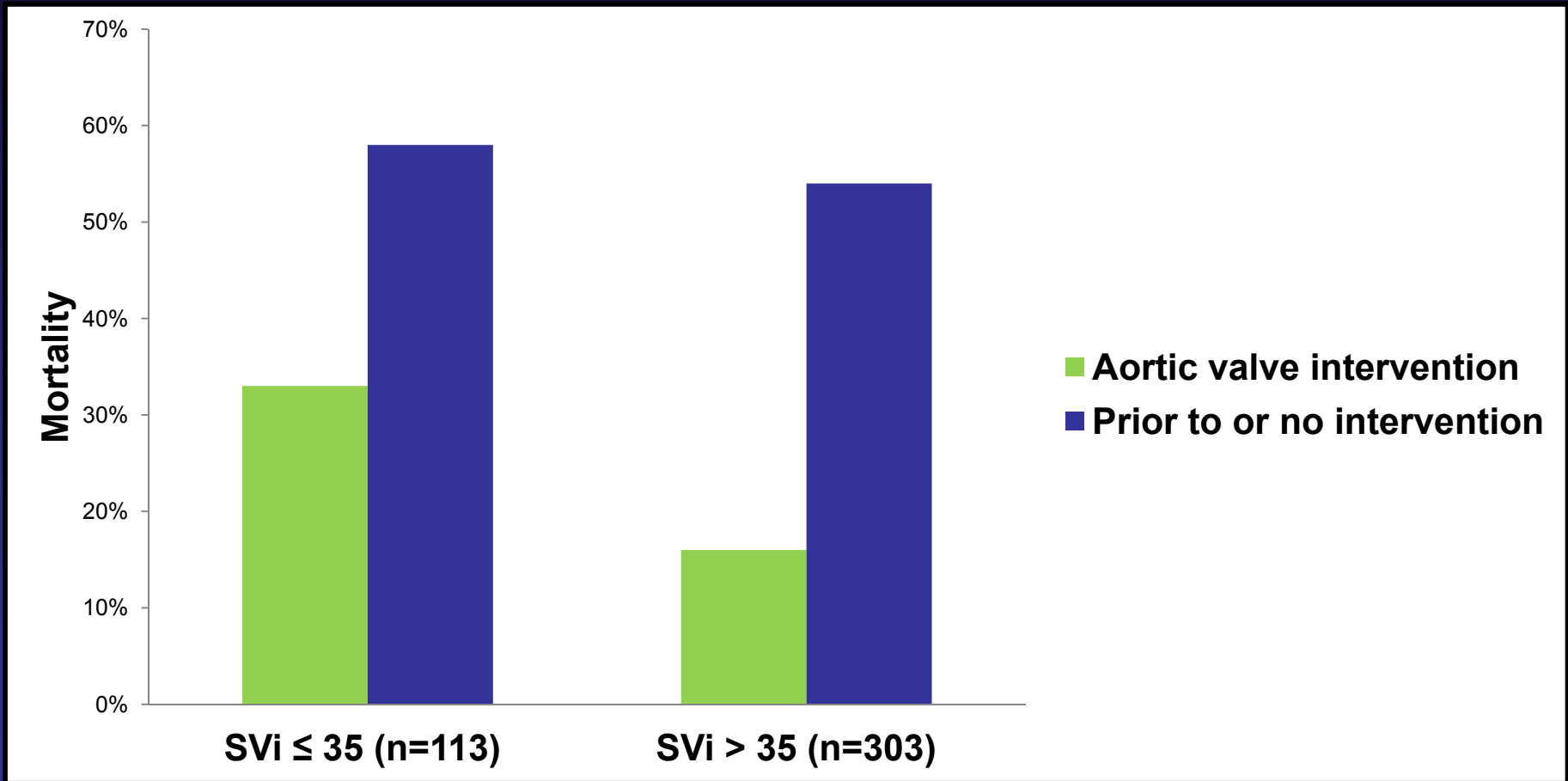


Survival

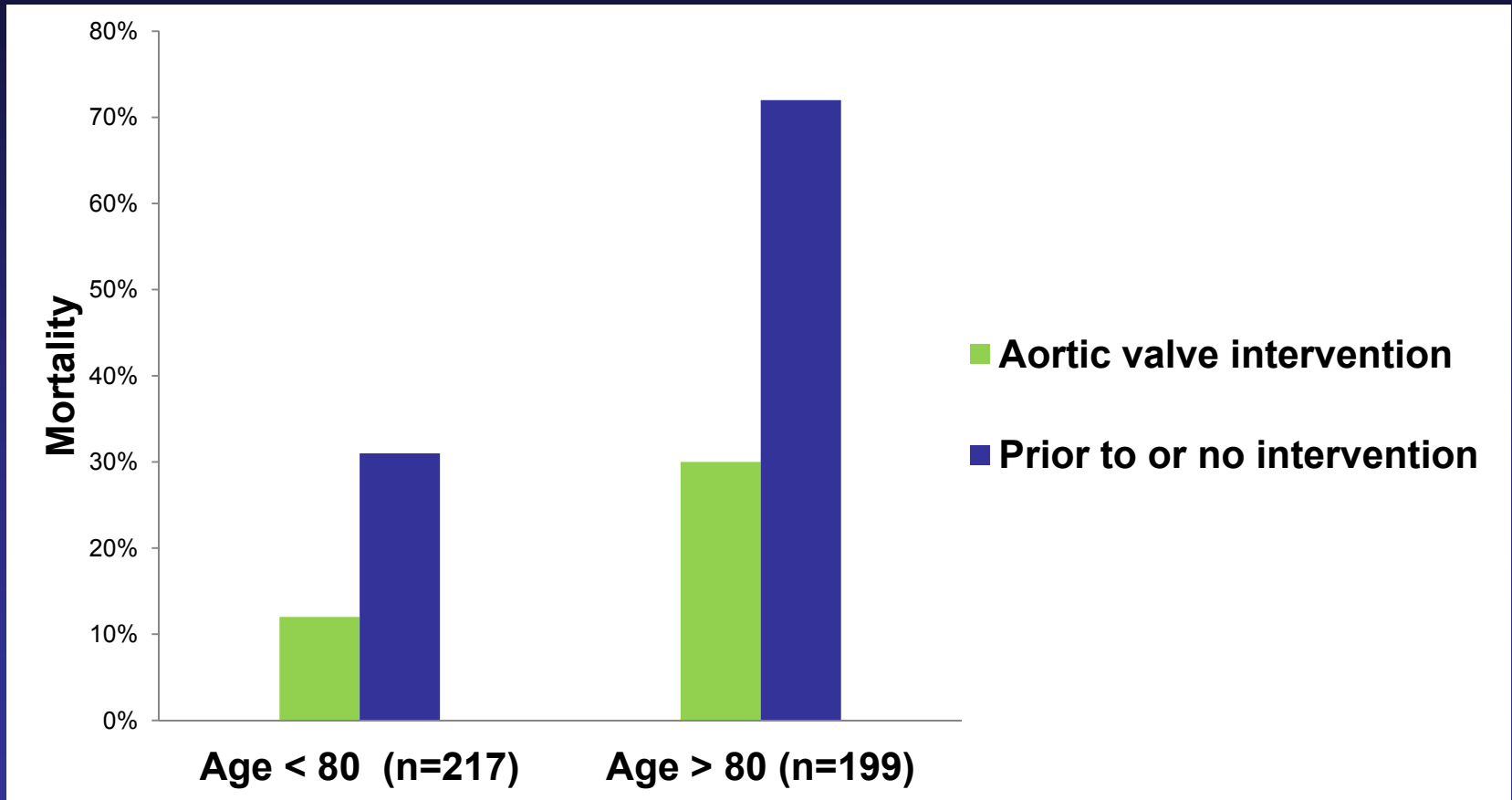
Days



Effect of Intervention on Mortality by Stroke Volume Index (SVi)



Effect of Intervention on Mortality by Age



Multivariate Cox Regression

	Hazard Ratio	P Value
Male	1.06	0.76
Age > 80 y	4.7	<0.001
Aortic valve area ≤ 0.8 cm ²	1.66	0.009
BMI	1.02	0.32
Ischemic Heart Disease	1.2	0.31
Time Dependent Aortic valve Intervention	0.51	0.028

Limitations

- Retrospective Analysis
- Single Center Cohort
- Measurements error (Stroke volume errors)
- Ejection Fraction Estimation
- Lack of data regarding patients symptoms

Conclusion

- Our data suggest that aortic valve replacement is associated with improved survival among patients with low gradient severe aortic stenosis and preserved left ventricle function.