A Challenging TAVR Case for Patient With Bicuspid Aortic Valve

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Case presentation

 \diamond Female, 83 yrs

- Recurrent dyspnea on exertion for 3 years, aggravated for 20 days
- \diamond NYHA IV

♦ PMH

- ♦ CAD
- ♦ Hypertension
- Anemia

Log EuroScore = 23.92% STS = 8.3%
Surgical extreme risk
Heart valve team suggested TAVR.

Echo

- LVEF = 46.2%
- LVIDd = 5.22cm LA = 5.55cm
- Severe AS
 - PG_{mean} = 79 mmHg
 - V_{max} = 5.84 m/s
 - $AVA = 0.32 \text{ cm}^2$
- AR: moderate
- MR: mild
- TR: severe

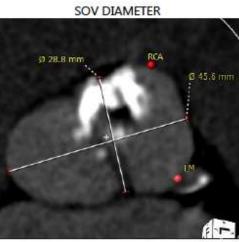


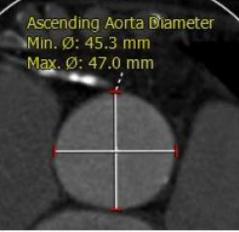
CTA

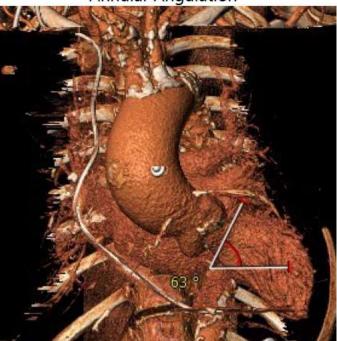
Annular Angulation

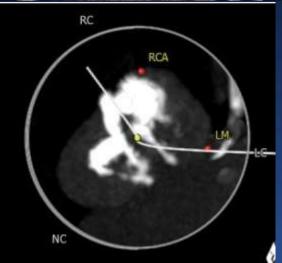
Aorta ANNULUS SOV DIAMETER Ø 28.8 mm Perimeter: 74.3 mm LVOT ASCENDING AORTA **LVOT** Diameter Min. Ø: 45.3 mm Min. Ø: 17.7 mm Max. Ø: 47.0 mm Max. Ø: 29.3 mm 40mm above basal plane

Smm below basal plane











CTA

Ø 15.6 / 16.0 mm ···· Ø 9.9 / 11.0 mm ···· Ø 10.6 / 10.8 mm ···· Ø 6.8 / 8.2 mm ···· Ø 8.6 / 10.3 mm ···· Ø 6.3 / 6.8 mm

••ø 7.4 / 8.1/mm ••ø 6.7 / 8.2 mm

Right Common Iliac Diameter Min. Ø: 6.8 mm Max. Ø: 8.2 mm

Problem 1: Critical clinical situation

- Poor heart function
- Cause of anemia (Hgb 69g/L, stool OB ++++)?
 - Endoscopic diagnosis under sedation
 - Multiple intestinal polyps
- Post-TAVR anti-platelet strategy?
- Unfavorable anatomy
 - Bicuspid aortic valve
 - Porcelain aorta

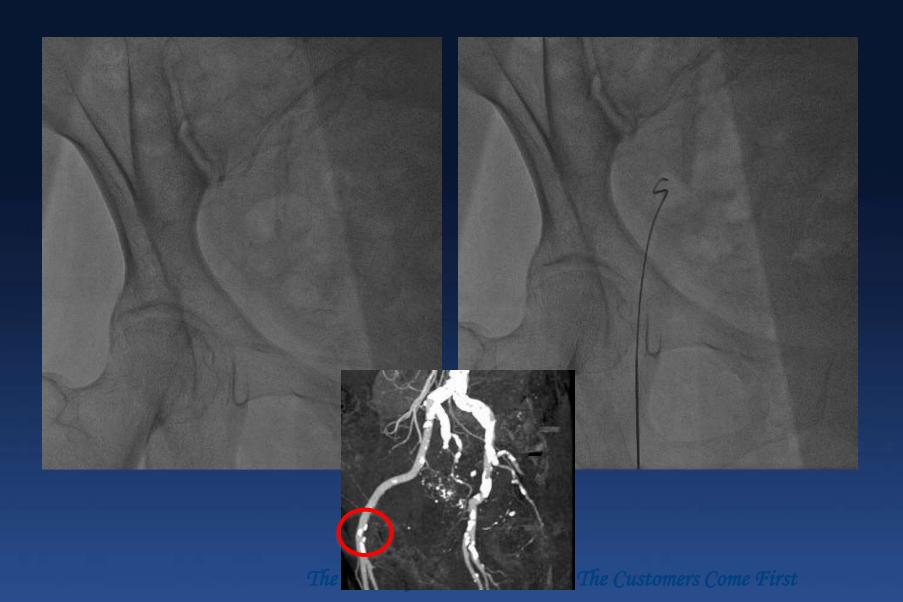
TAVR procedure Plan

 \diamond Blood transfusion before TAVR \diamond General anesthesia \diamond Access: right femoral artery \diamond 2 Proglides ♦ Balloon: ZMED II 20mm ♦ Downsize: CoreValve 26 mm ♦ However ♦ No 26mm available ♦ Many 29mm available

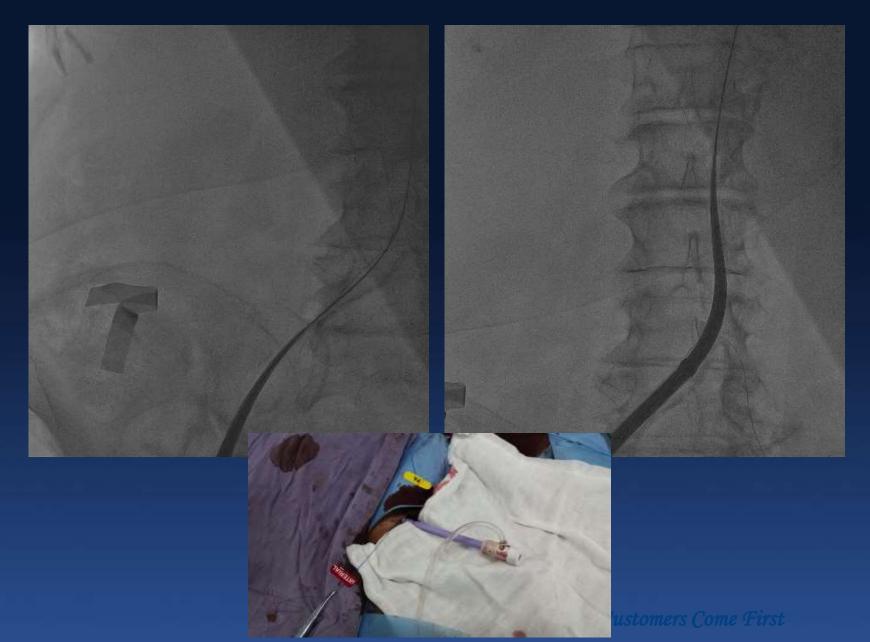
Problem2: Do TAVR or not?

Problem 3

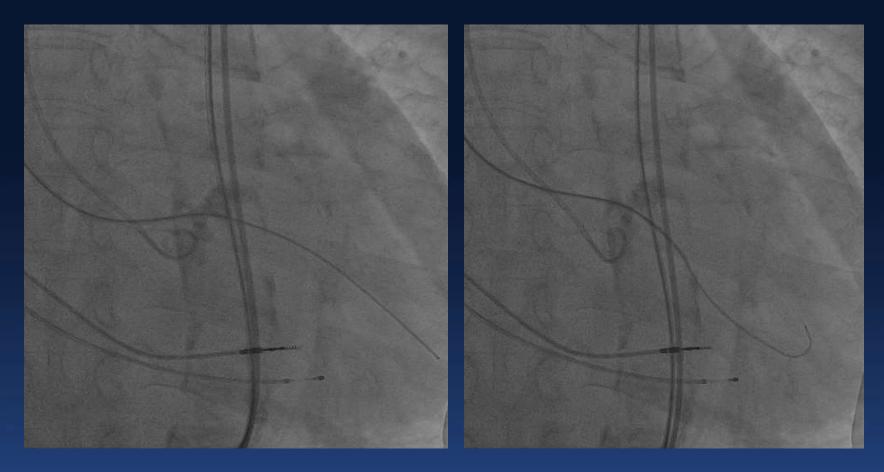




Problem 4



Problem 5



6F AL1.0 failed to cross

5F pigtail crossed

Problem 6: 20mm ZMED II failed to cross



Changed to 18mm ZMED II

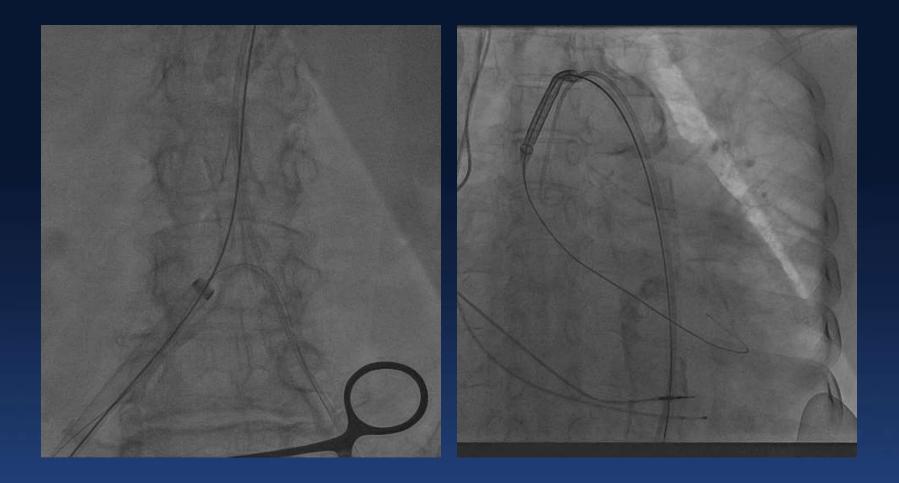


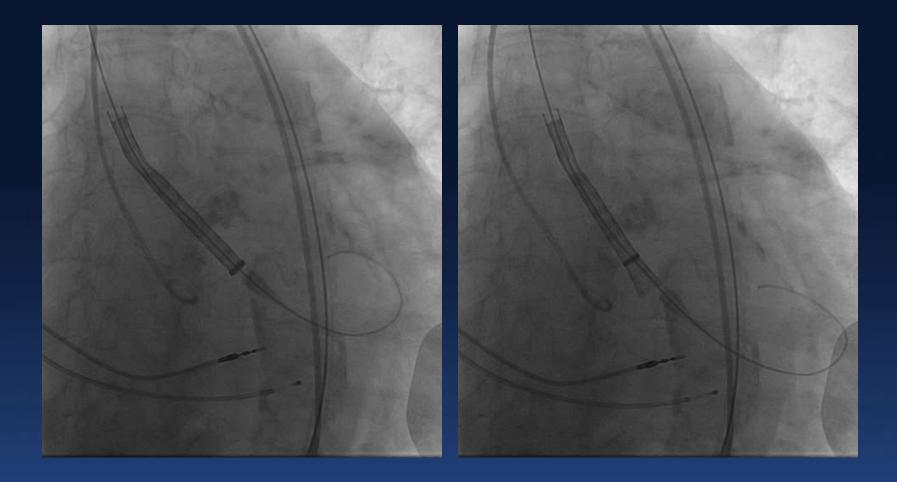
18mm ZMED II

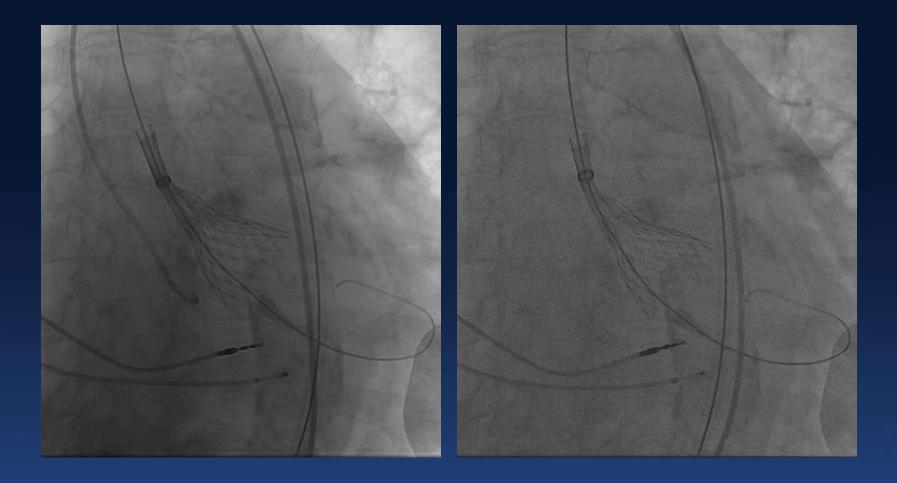


20mm ZMED II Needs of The Patients and The Customers Come Firs

Problem 7: CoreValve cross right iliac artery



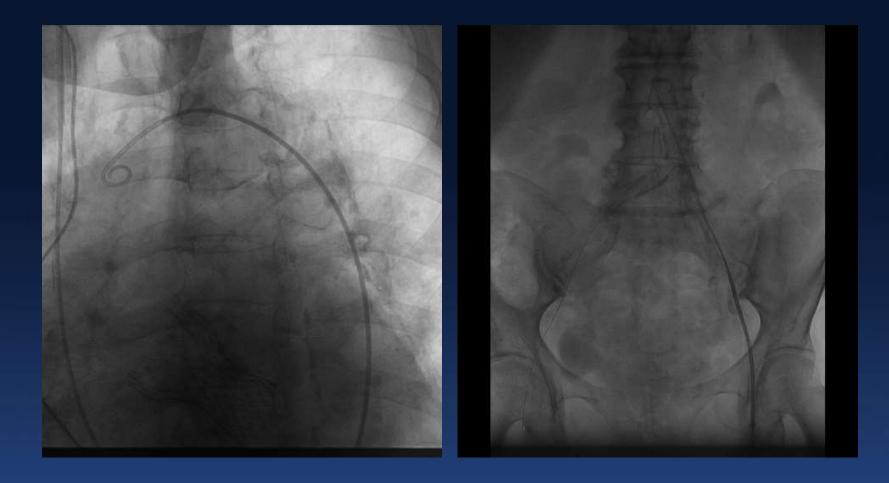




Final Result



The Needs of The Patients and The Customers Come First



Follow up

	NYHA	V _{max} (m/s)	Mean Gradient (mmHg)	AVA (cm2)	LVEF (%)	LVEDD (cm)
Baseline	IV	5.84	79	0.32	46.2	5.22
1 m	111	2.30	9	1.56	54.7	4.91
6 m	II	2.12	8	1.75	60.1	4.58
12m	II	2.14	9	1.72	60.9	4.71

FU after long travel to Inner Mongolia



Take Home Message

- TAVR is suitable for patients with bicuspid aortic valve and porcelain aorta.
- Heat team and corporation with all related departments are very important.
- Careful evaluation before procedure is essential.
- Experience and skillfulness are crucial to perform a challenging TAVR case.