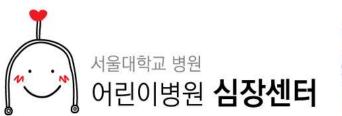
Perspective of Percutaneous Pulmonary Valve Implantation in the future

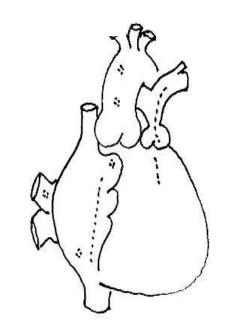
#### Gi Beom Kim Department of Pediatrics Seoul National University Children's Hospital







## **Tetralogy of Fallot Operation Record**



TOF -VSD (low MO) -PS (combined)

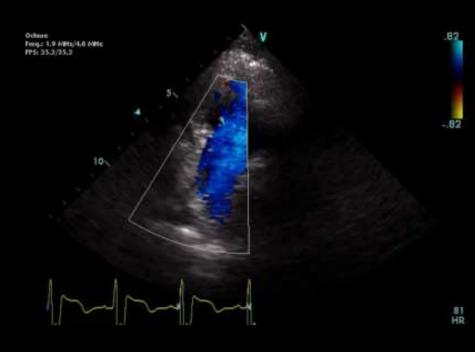
Total repair 1. Pul. value preserved Pul. value : bimepid 2. VSD patch baffling via RA bilat. 3. RV in fund: bular muscle commissuratomy resertion & patch widening Post. leaflet : thick , small 4. MPA & LPA patch angiopherty PFO primary docus GA - fixed auto-pericardium

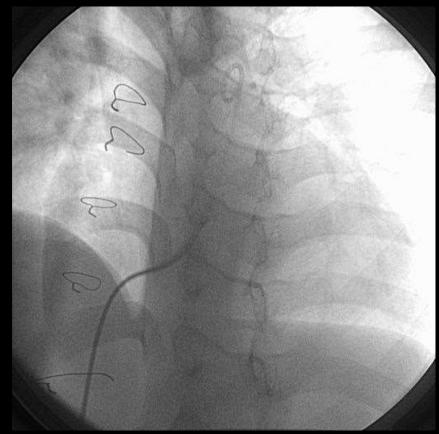
#### **Extensive plastic surgery in RVOT !**

PFO

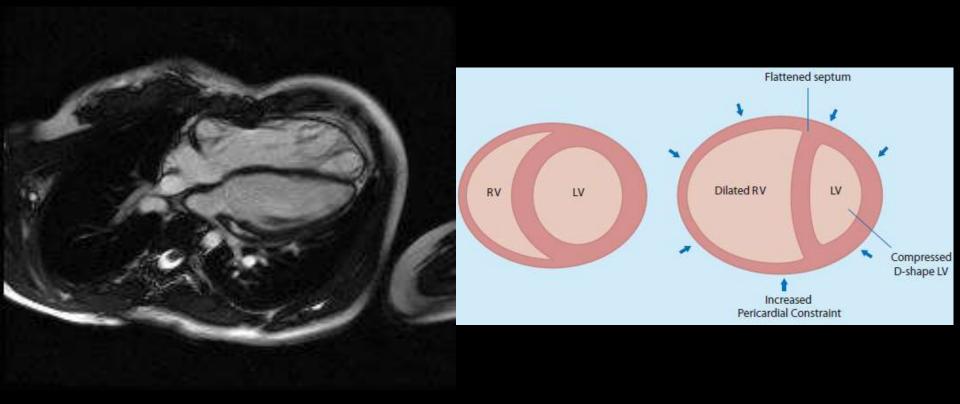
## **Progressive PR in TOF**

- 이O희 (M/ 13Yr)
  - TOF total correction (1996.1)
  - Severe PR with RV volume overloading



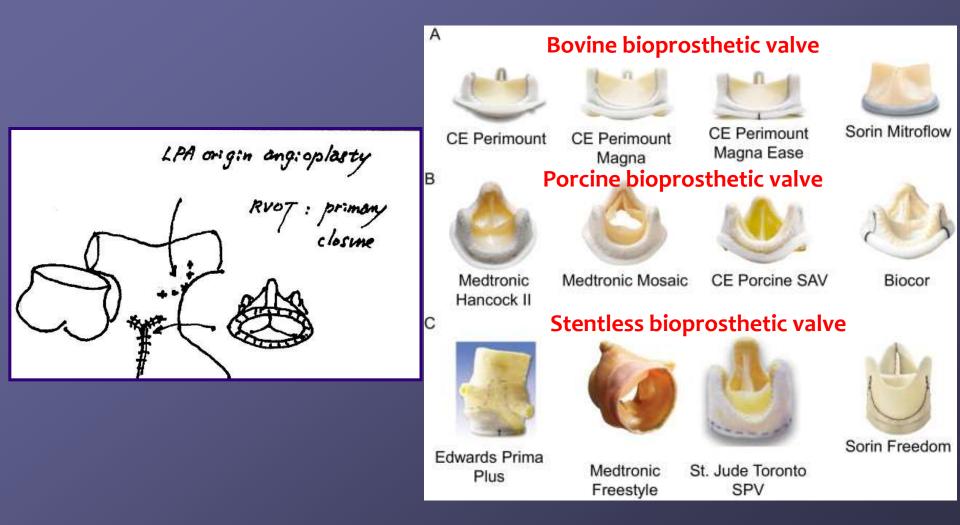


## The effect of chronic PR on RV



#### (Hadhad F et al. 2008 Circulation)

## **Surgical PVR**



J Am Coll Cardiol Intv. 2011;4(7):721-732

#### Available percutaneous pulmonic valve

#### Melody valve by Medtronic Company





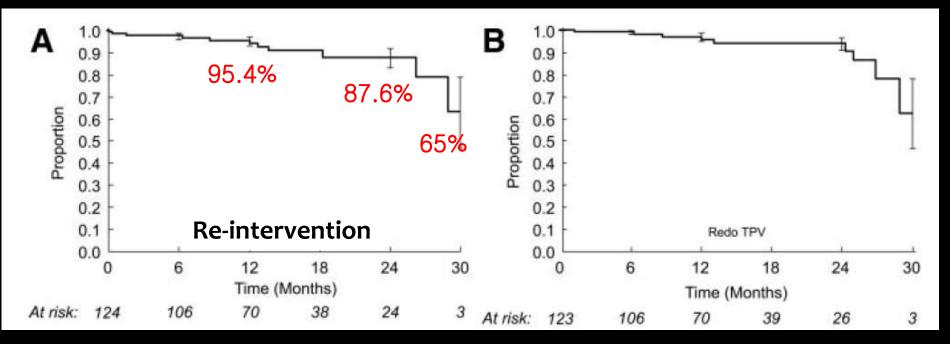


Melody* Transcatheter Pulmonary Valve					
Order Number	Description				
PB1018	<ul> <li>A bovine jugular vein valve sutured within a platinum iridium stent.</li> <li>One size valve (18 mm) that is crimped to 6 mm and re-expanded from 18 mm to 22 mm.</li> <li>Thin, compliant leaflets open fully and close readily with a minimum of pressure.</li> <li>Preservation in a proprietary sterilant of glutaraldehyde and alcohol.</li> </ul>				
Torque Wrench					
Order Number	Description				
	Description				
01-0055	Reusable jar opener				
Ensemble <sup>®</sup> Transcatheter Delivery System					
Order Number	Balloon Size	French Size	Overall Length		
NU1018	18 mm	22	100 cm		
NU1020	20 mm	22	100 cm		
NU1022	22 mm 22 100 cm				
Description					
<ul> <li>Balloon-in-balloon catheter delivery system with a retractable polytetrafluoroethylene (PTFE) sheath covering.</li> </ul>					

- Nylon inner and outer balloons available in three sizes: 18 mm, 20 mm and 22 mm. At inflation, the inner balloon is half the diameter of the outer balloon.
- Sheath with side port for flushing the system and a hemostatic sleeve to minimize bleeding at the insertion site.

## **US Melody valve trial**

- 2007.1~2009.8
- 5 centers in USA, 136 patients (median: 19 years, range: 7~53 years)



Freedom from Melody valve dysfunction or reintervention

: 93.5% at 1 year, 87.6% at 2 years

(McElhinney et al, 2010 Circulation)

Clinical and hemodynamic outcomes up to 7 years after transcatheter pulmonary valve replacement in the US melody valve investigational device exemption trial.

- 148 patients, median follow-up duration: 4.5 years (range, 0.4-7 years)
- 32 patients: underwent right ventricular outflow tract reintervention due to
  - obstruction (n=27, with stent fracture in 22)
  - endocarditis (n=3, 2 with stenosis and 1 with pulmonary regurgitation)
  - right ventricular dysfunction (n=2).
- 11 patients: TPV explanted as an initial or second reintervention.
- 5-year freedom from reintervention and explantation:  $76\pm4\%$  and  $92\pm3\%$
- 113 patients who were alive and reintervention free
  - follow-up gradient (median, 4.5 years after implantation) was unchanged from early post-TPV replacement
  - all but 1 patient had mild or less pulmonary regurgitation.
  - Almost all patients were in New York Heart Association class I or II.

The main cause of TPV dysfunction was stenosis related to **stent fracture**, which was uncommon once prestenting became more widely adopted.

Circulation. 2015 Jun 2;131(22):1960-70

## Indication of balloon-expandable PVR

- Indication (by FDA) for Melody valve
  - Existence of a **full (circumferential) RV outlet tract conduit** 
    - equal to or **greater than 16 mm in diameter** when originally implanted
  - **Dysfunctional RVOT** <u>conduits</u> with a clinical indication

and either:

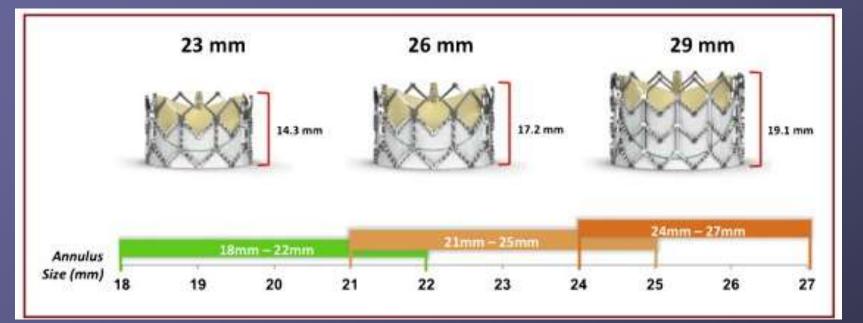
- regurgitation: ≥ moderate regurgitation, or

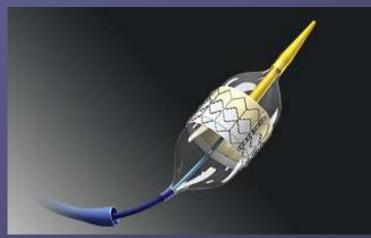
- stenosis: mean RVOT gradient ≥ 35 mmHg



#### Available percutaneous pulmonic valve

#### Edwards SAPIEN by Edwards Company



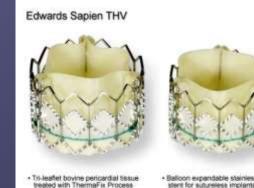


 three bovine pericardial leaflets handsewn to a tubular, slotted, stainless steel, stent with fabric sealing cuff covering the lower portion of the stent.

#### **COMPASSION study** – long term result

76 patients recruited from 4 centers, 2008.4 ~2015

- Mean age: 28.3±14 year-old
- Successful implantation: 66 patient
- Valve migration: 3 patients, before 2009
- No mortality



- 97% of patients free from MACCE at 6 months and one year
- 100% freedom from fractures
- 97% freedom from endocarditis at one year

(Hijazi ZM et al. PICS-AP 2015)

#### Limitation of Melody and Edwards valve



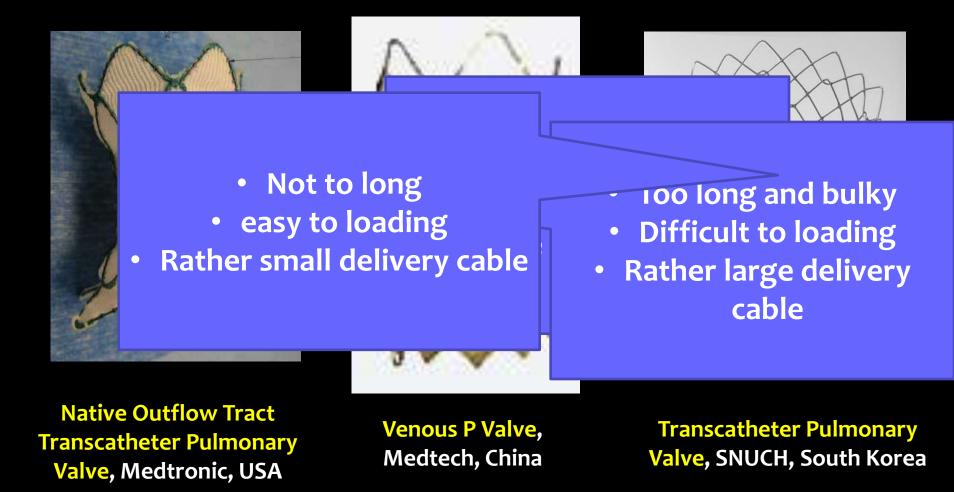
Melody valve and Edwards valve

- fit for patients with a conduit or a bioprosthetic valve in RVOT

- post-op patient with **RVOT lesions:** indicate only 15-20%

Most post-op **TOF** patients : Native RV Outflow Tract Valve!

#### New self-expandable pulmonic valved-stent



Valve diameter: 22 mm 25 Fr. delivery cable Valve diameter: 16-32 mm 14-22 Fr. delivery cable

Valve diameter: 18-28 mm 18 Fr. delivery cable

#### New self-expandable valved stent in SNUCH

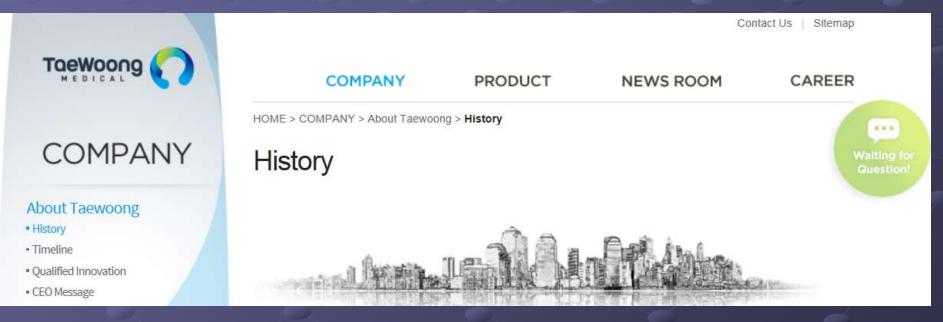
- Stent using Nitinol-wire backbone
  - self-expandable
- **Tissue valve** using **porcine pericardium** 
  - multiple steps for tissue preservation





## Disclosure

#### • TaeWoong Medical Co., Ltd.: technical support



#### **Tissue preservation for porcine pericardium**

1. **Decellularization** with 0.25% SDS (sodium dodecyl sulfate)

2. 0.1 units/mL alpha-galactosidase treatment

(for reduction of immunogenicity)

3. **Space filler** with PEG (polyethylene glycol)

4. 0.5 % GA fixation with solvent (75% ethanol + 5% octanol)

5. Detoxification with 0.1M glycine J Heart Valve Dis. 2012;21:387-97. Eur J Cardiothorac Surg. 2012;41:383-90. Int J Cardiol. 2014;173: 74–79.

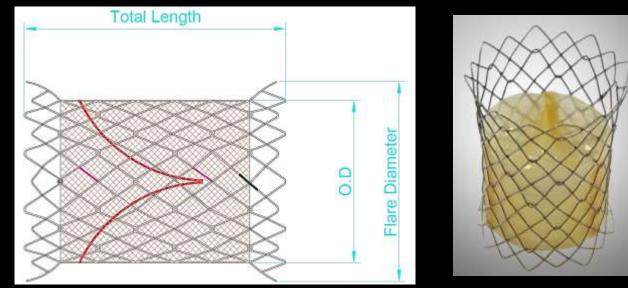
#### In Vitro valve motion test



#### In normal valve model

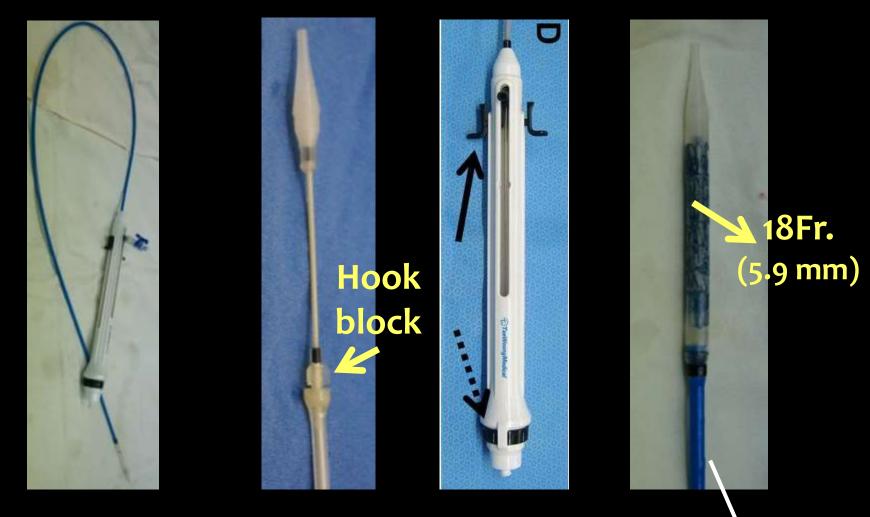
In diseased valve model : 22 mm valve in 19 mm porcine Ao. valve

## Pulmonary valved-stent shape



	Outer Diameter (mm)	Total Length (mm)	Flare Diameter (mm)	Expansion Force (gf)	Compression Force (gf)
TPV18	Ø18	$20 \pm 4.4$	Ø22	628	1707
TPV20	Ø20	28 ± 1.4	Ø24	630	1758
TPV22	Ø22	<b>34 ⊥ 4 55</b>	Ø26	448	1468
TPV24	Ø24	31 ± 1.55	Ø28	452	1540
TPV26	Ø26	<b>&gt;&gt;</b> ⊥ 4 6 F	Ø30	473	1713
TPV28	Ø28	33 ± 1.65	Ø32	453	1725

#### **Trans-catheter delivery system**



long delivery catheter - Usuable length: 110 cm

Head

Handle

12Fr. shaft



## Stent loading





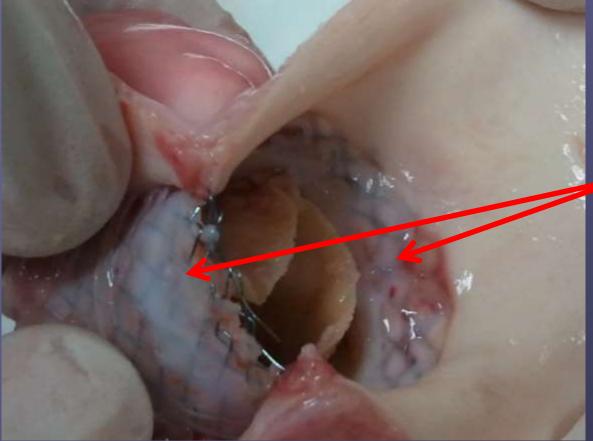


#### Animal study of percutaneous PVR

About 6 Month-old40- 50 kg

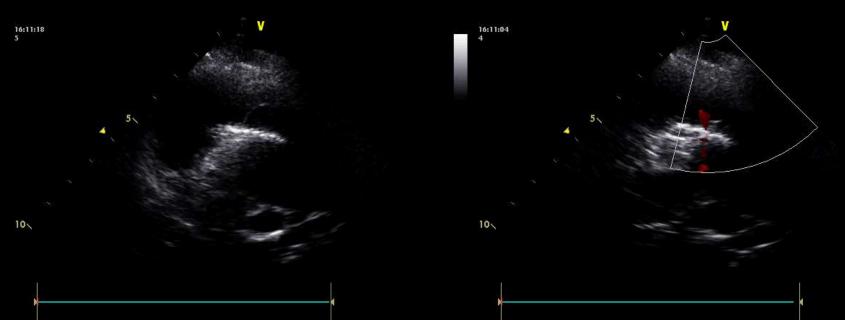


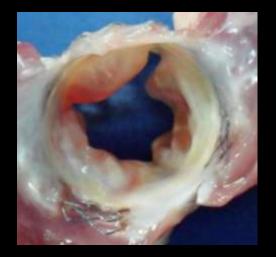
## Endothelization

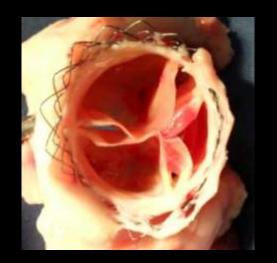


#### Full endothelization after 3 months

## 6 Month F/U







1.05

-1.05

A feasibility study to evaluate the safety and short-term effectiveness of implantation of 'Transcatheter Pulmonary Valve (TPV)' for the treatment of Congenital heart disease with Pulmonary valve disease

Acquired SNUH IRB and Korean FDA approval

- A feasibility study: 10 patients

: primary outcome

- Procedure success

- Procedural / Device related serious adverse events at 6month

- Hemodynamic functional improvement rate at 6month

#### Transcatheter Self-expandable Pulmonary Valve

Transcatheter Pulmonary Valve	Size	Pulmonary Annulus Diameter
$\sim \sim \sim \sim \sim$	18 mm	15 mm ~ 16.9 mm
	20 mm	17 mm ~ 18.9 mm
	22 mm	19 mm ~ 20.9 mm
	24 mm	21 mm ~ 22.9 mm
	26 mm	23 mm ~ 24.9 mm
	28 mm	25 mm ~ 26.9 mm

TPV Delivery System	Diameter	Usable Length
	18Fr (5.9 mm)	110 cm

## A feasibility study

	Screening	Procedure	Follow-up				
			F/U				F/U
			(Short-term)			(Long-term)	
Study Procedure	Visit1	Visit2	Visit3	Visit4	Visit5	Visit 6	Visit 7~11
	Baseline	Day1	Discharge	1mon ±1week	3mon ±2week	6mon ±4week	Annually ±8week
	OPD/Adm.	Adm.	Adm.	OPD	OPD	OPD	OPD
Consent	V						
Demographic data	V						
Vital sign	V	V	V	V	V	V	$\checkmark$
physical exam.	V		V	V	V	V	V
History/Allergy	V						
Blood test	V	V	V	V	V	V	V
12-Lead ECG	V		V	V	V	V	V
Cardiac MRI	V					V	
X-ray	V	V	V	V	V	V	V
Echocardiography	V		V	V	V	V	V
Cardiac catheterization with Angiography		V				$\checkmark$	
TPV procedure		V					
Procedural success			V				
evaluation			v				
Clinical evaluation							
NYHA classification	V		V	V	V	V	V
Concomitant med.	V	V	V	V	V	V	V
Adverse event/SAE		V	V	V	V	V	V

## First patient – 2016.2.25.

- Female/20 years with Tetralogy of Fallot
- Two times of open heart surgery
  - 2 months old: TOF total repair
  - 14 years old: pulmonary valvuloplasty for severe

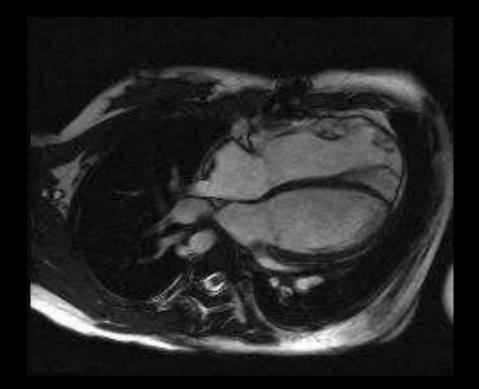
pulmonary regurgitation

- NYHA: III
- Max  $VO_2$ : 14.9 mL/kg/min

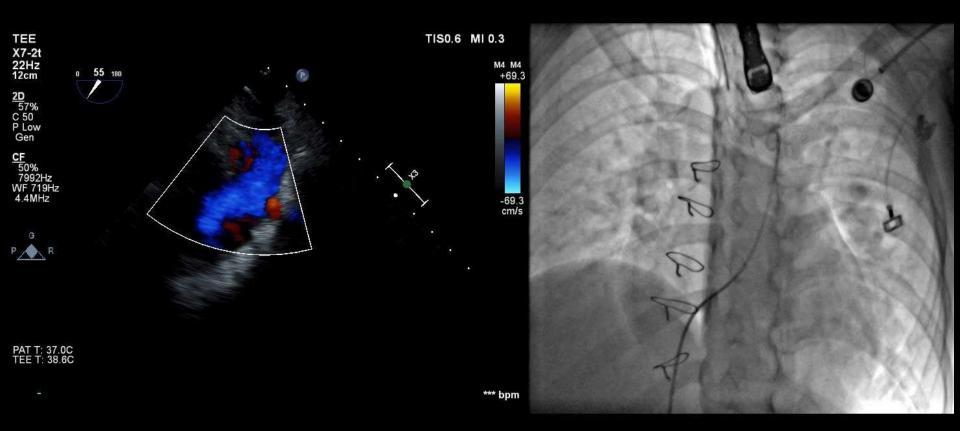
## First patient – 2016.2.25.

- Before procedure
  - Severe pulmonary regurgitation, **PR fraction: 38.4**%
  - Enlarged Rt. Ventricle: End-diastolic volume 181.7 mL/m<sup>2</sup>

End-systolic volume – 89.9 mL/m<sup>2</sup>, EF- 50.5%



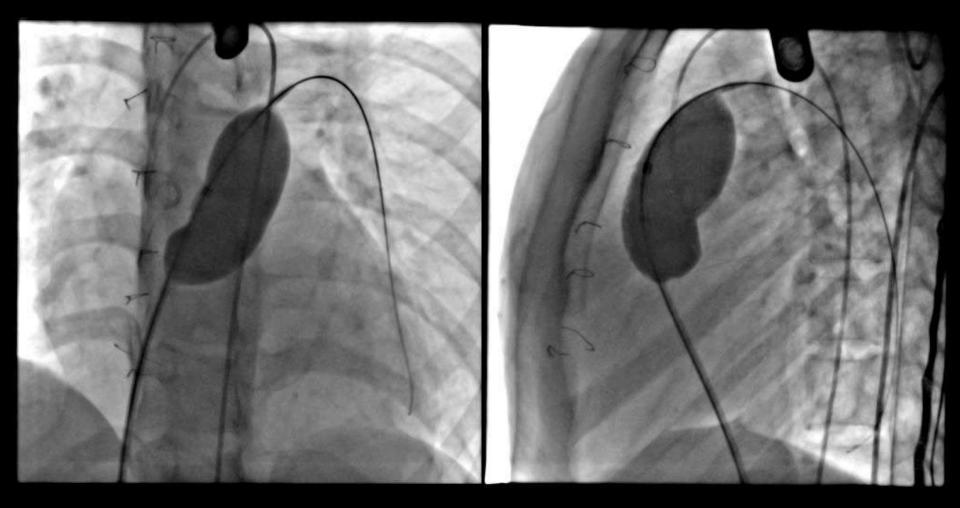
#### Hemodynamic study before PPVR



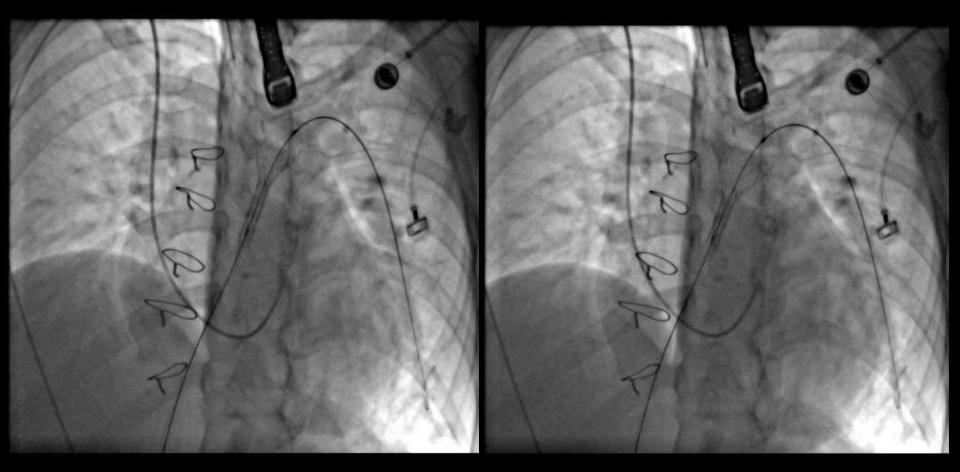
## Transesophageal echocardiography

#### **MPA** angiogram

# Balloon sizing of main PA and coronary angiography



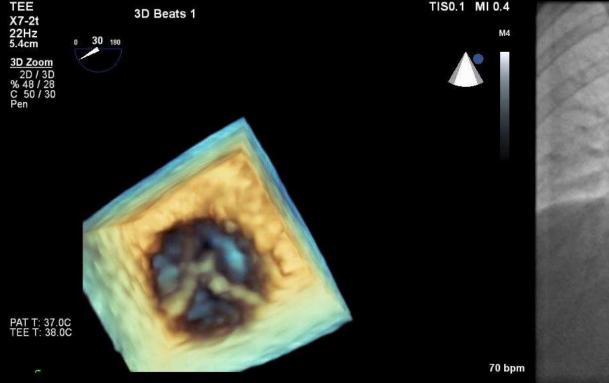
#### **Deployment of valved-stent**

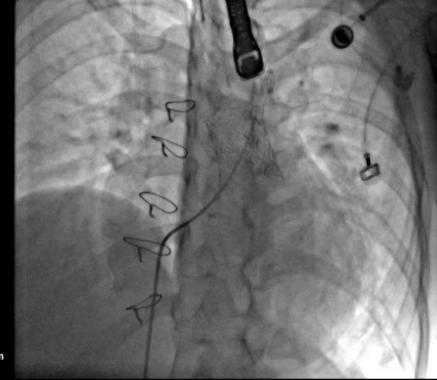


Partial deployment and positioning

**Full deployment** 

#### Hemodynamic study before PPVR





#### **3D valve motion from TEE**

#### **MPA** angiogram

#### Chest PA change – 1<sup>st</sup> case







1 Mo. After CT ratio: 52.1%

## Second patient – 2016.4.7.

- Before procedure
  - Severe pulmonary regurgitation, **PR fraction: 56**%
  - Enlarged Rt. Ventricle: End-diastolic volume 167.5 mL/m<sup>2</sup>

End-systolic volume – 81.5 mL/m<sup>2</sup>, EF- 51.4%



## Chest PA change – 2<sup>nd</sup> case, 19 yr-old female

- NYHA: |||
- Max Vo2: 16.9 mL/kg/min



• NYHA: | ~ ||



Pre- procedure CT ratio: 51.2% 10 days After CT ratio: 42.1%

#### Next Plan !

Completion of clinical trial in this year

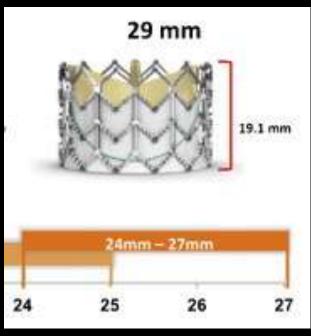
Expansion of PVR candidate

Larger size stent: up to 34 mm

●Age ≥ 10 year-old, Body weight ≥ 30 kg

Global cooperation

#### Now available pulmonic valved-stent for native RVOT lesions







Edwards - Sapien Valve, Need pre-stenting Venous P Valve, Medtech, China **Transcatheter Pulmonary Valve, SNUCH, South Korea** 

Valve diameter: 16-32 mm 14-22 Fr. delivery cable Valve diameter: 18-28 mm 18 Fr. delivery cable

#### Ideal valved-stent !

- Iong durability with good valve function
- good stability
  - good position without migration
- high radial strength
- easy feasibility for stent implantation
- Iow guiding sheath profile

#### Conclusions

- Balloon-expandable Melody and Edwards valve for RVOT conduit shows good clinical outcome in US and Europe.
- New Nitinol-based self-expandable valved stent for RVOT lesions is on the clinical trial in US, China, and Korea.

# Thank You for Attention !