Transcatheter Mitral Valve Implantation

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CardiAQ[™] TMVR System

Multiple access routes

Transfemoralsuccessful FIH June 2012Transapicalsuccessful FIH May 2014

Controlled deployment

Multi-stage deployment

Accurate positioning

- Self-positioning within native valve annulus
- Intra/supra annular placement to preserve
 LV contractility and maximize LVOT area

Secure anchoring

- Preserves native chordae and leaflets
- Anchoring without radial force



Animal studies



Clinical results

- 4 patients treated in Copenhagen:
- All turned down for surgery and technically not candidates for MitraClip
- TMVR on compassionate ground approved by DMA

No	Date	Gen	Time	<u>Status</u>		
TF-1	2012/6	1	60 min	Died day	3	(SIRS)
TA-1	2014/5	2	20 min	Alive day	151	
TA-2	2014/7	2	13 min	Alive day	95	
TA-3	2014/7	2	13 min	Died day	9	(pneumonia)

Patient #1 (TF)

- 86 years old male
- AHT, CABG, PCI
- NYHA-class IV
- Severe MR
- LVEF 45%, LVEDD 62 mm
- STS risk score 31% (mortality)

80% (morbidity & mortality)

Annular dilatation & restricted PML



Copenhagen manoeuvre



Coaxial alignment



Opening of ventricular anchors



Secure capture of leaflets



Deployed valve



Valve after deployment



Echocardiography Day 3



Patient #2 (TA)

- 89 years old female, NYHA-class IIIB
- CABG, CKD
- Severe MR
- Aorto-mitral angle 79°
- LVEF 50%, LVEDD 56 mm
- STS risk score 36% (mortality)

77% (morbidity & mortality)

chordae rupture with prolapse of AML



Copenhagen manoeuvre

Engaged in mitral apparatus

Free run



Capsule retrieval

Flipping LV anchors



Secure capture of both leaflets



Final release



Post-procedural imaging



Patient #3 (TA)

- 79 years old male, NYHA-class IIIB
- AHT, PCI, Afib, CKD, COPD, PAH
- Severe MR
- Aorto-mitral angle 64°
- LVEF 55%, LVEDD 58 mm
- STS risk score 22% (mortality)

65% (morbidity & mortality)

Annular dilatation & restricted PML



Checking position Releasing valve



Low position at aortic side



Snare and pull frame from the aorta



Corrected position



Competent valve



Day 68



Patient #4 (TA)

- 80 years old female, NYHA-class IIIB
- CABG & PCI, Afib, CKD, COPD
- Severe MR
- Aorto-mitral angle 42°
- LVEF 35%, LVEDD 65 mm
- STS risk score 44% (mortality)

76% (morbidity & mortality)

Annular dilatation



Capsel closure

Ventriculogram



Post-procedural imaging



Next steps for CardiAQ

- Gain more experience on both TF and TA TMVR procedure during compassionate cases
- CE mark trial anticipated to start by early 2015
- 100 patients at 10 sites

Co-workers

Cardiologists

- Nikolaj Ihlemann
- Anders Jönsson
- Olaf Franzen
- Matthew Brooks
- Luigi Biasco
- Ole de Backer

Cardiothoracic surgeons

- Susanne Holme
- Peter Skov Olsen
- Mariann Tang Jensen
- Kim Terp

Anaesthesiologists

- Peter Bo Hansen
- Peter Hasse Møller
- Annette Ulrich

Nurses

- Birgit Lauridsen
- Pia Mejding
- Barbara Wulff

CardiAQ

- Arshad Quadri
- Brent Ratz

Copenhagen FIH Team - 2012



Issues for TMVI

- Access route
- Size of delivery system
- Steerability
- Anchoring
- Re-capture
- Anti-coagulation/platelet therapy
- Patient selection
- Role in spectrum of repair/replacement techniques