Transcatheter aortic valve implantation for treatment of aortic valve stenosis: a health technology assessment

Health Quality Ontario

Record Status
This is a bibliographic record of a published health technology assessment from a member of INAHTA. No evaluation of the quality of this assessment has been made for the HTA database.

Citation

Authors' conclusions
Moderate quality evidence showed that TAVI and SAVR had similar mortality rates in patients who were eligible for surgery. Information about quality of life showed similar results for TAVI and SAVR in the first year, but was based on low quality evidence. Moderate quality evidence also showed that TAVI was associated with higher rates of adverse events than SAVR. In patients who were not suitable candidates for surgery, moderate quality evidence showed that TAVI improved survival compared with balloon aortic valvuloplasty. When TAVI was compared with SAVR, the incremental cost-effectiveness ratio was $51,988 per quality-adjusted life-year.

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