Implante de prótesis aórtica transcatéter para el tratamiento de estenosis aórtica severa
[Transcatheter aortic prosthesis implantation for the treatment of severe aortic stenosis]

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' objectives
To assess the available evidence on the efficacy, safety and coverage related aspects regarding the use transcatheter aortic valve prosthesis for severe aortic insufficiency treatment.

Authors' conclusions
For those patients at low or moderate surgical risk, surgical aortic valve replacement is the treatment of choice. For patients at high surgical risk or in those where surgery is not possible, there is no consensus on what the best conduct should be. The results of this report come mainly from two RCTs. One of these RCTs compared TAVI against conventional surgery in patients at high surgical risk and in this group TAVI did not prove to be better than conventional surgery, or even it could present a higher adverse event risk. Therefore, even for those cases at high surgical risk, surgery may continue to be the best alternative for many patients. For those cases where surgery is not a possible option or the patient rejects it, the options are medical treatment, balloon angioplasty or TAVI. The second RCT included in this report assessed TAVI in a group of patients who were not considered surgical candidates. In this study, the comparator was a group of patients who mainly underwent balloon valvuloplasty. The TAVI group presented better results, but their interpretation should be cautious since balloon valvuloplasty is now being questioned due to the uncertainty regarding its potential effectiveness and its adverse event profile. No conclusions can be drawn regarding post-BAV TAVI effectiveness since the results come from observational studies evaluated at short term. In summary, in those patients where conventional surgery is not possible, the available evidence does not allow to clarify what the best conduct should be.

Final publication URL

Indexing Status
Subject indexing assigned by CRD

MeSH
Humans; Aortic Valve Stenosis; Heart Valve Prosthesis Implantation

Language Published
Spanish

Country of organisation
Argentina

English summary
An English language summary is available.
Address for correspondence
Institute for Clinical Effectiveness and Health Policy, Viamonte 2146 - 3 Piso, C1056ABH Ciudad de Buenos Aires, Argentina Tel: +54 11 49 66 00 82 Fax:+54 11 49 53 40 58 Email: info@iecs.org.ar

AccessionNumber
32014000297

Date abstract record published
31/01/2014