

What is a TAVI?

TAVI stands for “Transcatheter Aortic Valve Implantation” and is a procedure that replaces the diseased aortic valve in people who have severe Aortic Stenosis.

The aortic valve is located between the left lower heart chamber (left ventricle) and the body’s main artery (aorta). If the valve doesn’t open correctly, blood flow from the heart to the body is reduced. TAVI can help restore blood flow and reduce the signs and symptoms of Aortic Stenosis — such as chest pain, shortness of breath, fainting and fatigue. TAVI is a less invasive procedure than open heart surgery that may help you get back on your feet faster.¹

Severe Aortic Stenosis can be scary, but your treatment does not have to be. The decision to treat Aortic Stenosis with TAVI is made after a discussion with a team of heart and heart surgery specialists, who work together to determine the best treatment option for you.

Benefits of TAVI may include:²



Less invasive with minimal scarring



Improved quality of life



Shorter recovery time to getting back to everyday activities



Shorter hospital stay



Relief of symptoms



Less pain and anxiety



Helping your heart work better so that you feel better sooner



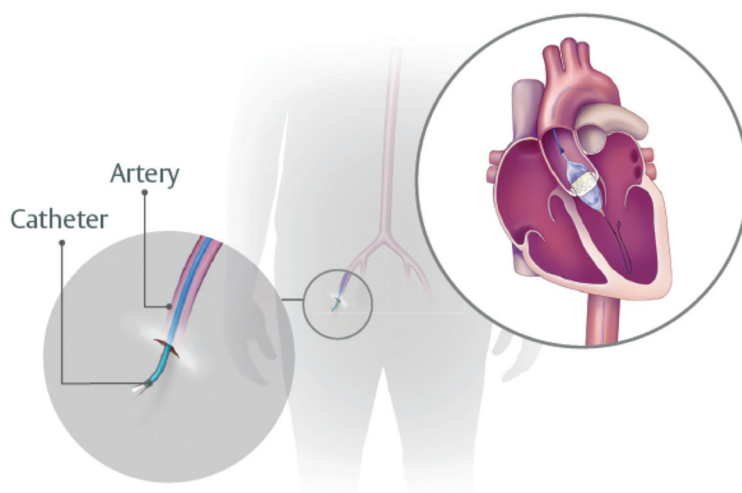
Better clinical outcomes

What happens during a TAVI?

Your TAVI procedure takes place in a hospital room which looks like an operating theatre. You will be taken to the procedure room on a trolley or wheelchair and be asked to lie on a narrow procedure table. Usually, a local anesthetic with sedation is given so you will be awake during the procedure but you will not feel any pain and your doctor may give you medication to help you relax. This will be discussed with you prior to your procedure.

TAVI is a minimally invasive procedure that involves making a small incision usually, in the leg. Transcatheter aortic valves are specially designed for this procedure. The valve is made of natural tissue from the heart of a cow. The natural tissue is re-engineered and attached to a flexible expanding mesh frame.

The cardiologist uses a small catheter, or tube, that is pushed through the incision to an artery all the way to the heart to place a new valve within a diseased aortic valve. The replacement valve then takes over the job of managing blood flow through your heart.



The recovery time after TAVI and the length of hospital stay may be shorter than that with open heart surgery. On average, the TAVI procedure lasts approximately 1 hour and the majority of patients are able to go home the next day.

You should start feeling better right away because your heart valve is now working properly. Some patients may take longer to feel better.³

Who is a good candidate for a TAVI?

TAVI is available for patients with severe symptomatic Aortic Stenosis in all risk categories (low, intermediate or high) for standard open-heart valve replacement surgery.⁴

How long will I need to stay in hospital?

Because the procedure is performed under local anesthesia the recovery can vary depending on the patient but the majority of patients are able to go home the next day.

What are the risks of a TAVI?

Although TAVI is not as invasive as open-heart surgery it is still a medical procedure and all medical procedures carry some risk. Your doctor will explain what the risks for you are likely to be.

How can I be considered for TAVI?

In order to be considered for a TAVI procedure, you need a referral from a cardiologist.

Don't wait until severe Aortic Stenosis completely disrupts your life before seeking treatment. It's important to be proactive and talk to your cardiologist about whether TAVI is the right treatment for you.

Is TAVI reimbursed by Health Insurance Providers?

The majority of health insurance providers now offer reimbursement for TAVI. This must be approved by the insurance provider based on their eligibility criteria.

¹Al-Lamee, R., Thompson, D., Dehbi, H. M., Sen, S., Tang, K., Davies, J., ... & Nijjer, S. S. (2018). Percutaneous coronary intervention in stable angina (ORBITA): a double-blind, randomised controlled trial. *The Lancet*, 391(10115), 31-40.

²Mack MJ, Leon MB, Smith CR, et al. 5-Year Outcomes of Transcatheter Aortic Valve Replacement or Surgical Aortic Valve Replacement for High Surgical Risk Patients with Aortic Stenosis (PARTNER 1): A Randomized Controlled Trial. *J Am Coll Cardiol*. 2015; 66(25): 2827-36. doi: 10.1016/j.jacc.2015.10.018.

³Baron S, Thourani V, Kodali S, et al. Effect of SAPIEN 3 Transcatheter Valve Implantation on Health Status in Patients With Severe Aortic Stenosis at Intermediate Surgical Risk. *J Am Coll Cardiol Interv*. 2018 Jun, 11 (12) 1188-1198.

⁴Otto CM, Nishimura RA, Bonow RO, et al. 2021 ACC Expert Consensus Decision Pathway on the Management of Aortic Stenosis. *J Am Coll Cardiol*. 2021;77(23):e215-e253. doi:10.1016/j.jacc.2021.03.001

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Edwards Lifesciences Unit 2, 40 Talavera Road, North Ryde, NSW 2113 Australia. • Ph: 1800 222 601