

PASCAL repair system Evidence from a multicenter real world registry

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Potential conflicts of interest

Speaker's name: Victor Mauri, MD

- ☐ I have the following potential conflicts of interest to declare
 - Speaker honoraria and travel compensation by Edwards Lifesciences





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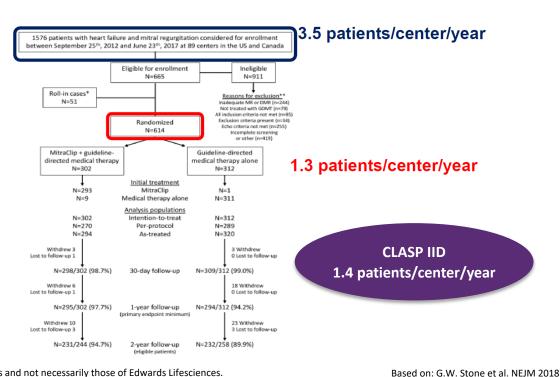


Why do we need real-world evidence?

COAPT Trial

- 78 centers
- 42 inclusion/exclusion criteria
- 1576 patients screened
- 614 patients randomized





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PASCAL repair system - Early post approval real world registry

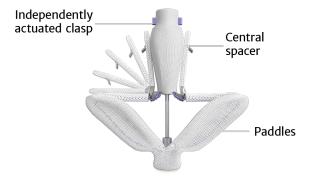
Patients First 309 patients treated post-approval

Location 10 high volume centers in Germany

Time period 02/2019 – 12/2019

No inclusion-/exclusion criteria

PASCAL implant (P10) only



PASCAL Implant



















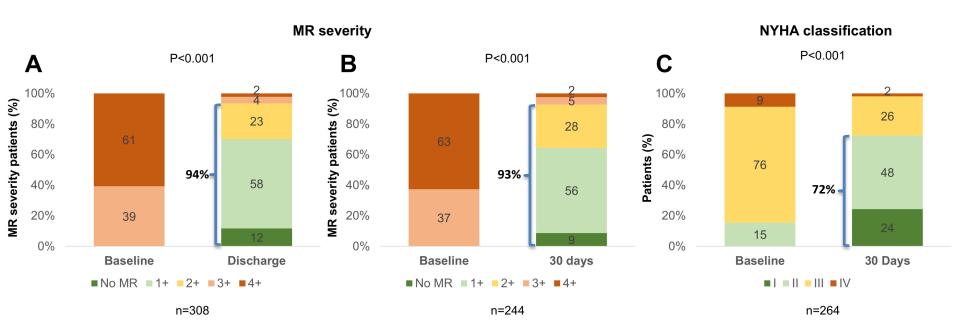


Mauri V et al., German Multicenter Experience With a New Leaflet-Based Transcatheter Mitral Valve Repair System for Mitral Regurgitation. JACC Cardiovasc Interv. 2020 14;13(23):2769-2778. Expert opinions, advice and all other information expressed represent contributors' views and not necessarily those of Edwards Lifesciences.





Key results initial cohort

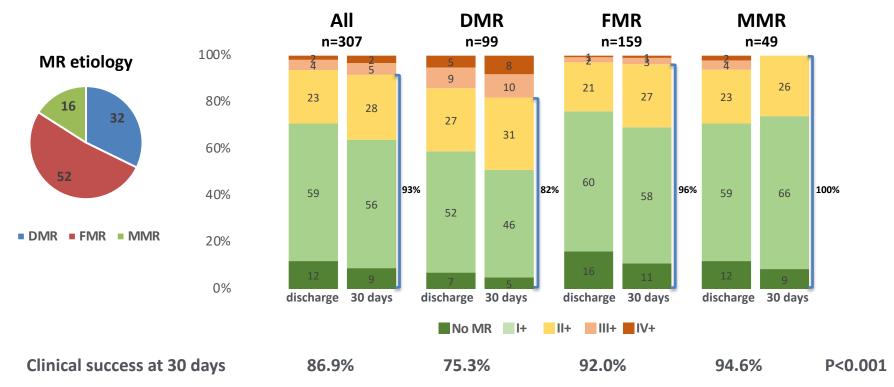


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Degree of MR by etiology



Clinical success (CLASP trial definition): successful device implantation, MR ≤2+, and freedom from mortality, stroke, unplanned surgical or interventional procedures and device failure at 30 days Expert opinions, advice and all other information expressed represent contributors' views and not necessarily those of Edwards Lifesciences.



Unpublished data

PASCAL Repair System vs MitraClip – a propensity score matched comparison

PASCAL real-world registry

n = 30902/2019 - 12/201910 sites

MitraClip Heart Failure Network Rhineland registry

n=1010 08/2010 - 10/20183 sites

1:1 propensity score matching

Parameters: age, sex, NYHA functional class, LVEF, LVEDD, LA-Volume-Index, MR etiology, vena contracta width



n = 307



100% of 307 cases PASCAL implant (P10)



96% of 307 cases MitraClip G1/G2

NYHA: New York Heart Association; LVEF: left ventricular ejection fraction, LVEDD: left ventricular end-diastolic diameter Expert opinions, advice and all other information expressed represent contributors' views and not necessarily those of Edwards Lifesciences.

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Baseline characteristics matched cohort

Clinical characteristics	PASCAL	MitraClip	P
Age (yrs)	77.0±9.6	77.1±8.5	0.424
Female	42.3%	42.0%	0.935
NYHA functional class III/IV	86.0%	83.1%	0.245
Coronary artery disease	56.4%	61.6%	0.218
Previous cardiac surgery	20.5%	36.8%	<0.001
ICD/CRT	22.5%	19.9%	0.489
Atrial fibrillation	70.7%	63.5%	0.071
Chronic lung disease	22.1%	20.5%	0.694
Renal disease	62.5%	67.1%	0.237
EuroSCORE II (%)	5.8±4.5	6.9±4.9	0.002

Echo characteristics	PASCAL	MitraClip	Р
MR etiology			0.932
Functional/mixed MR	67.1%	66.4%	
Degenerative MR	32.9%	33.6%	
Vena contracta width (mm)	7.3±2.1	7.1±2.0	0.400
EROA (cm²)	0.39±0.22	0.34±0.13	0.267
LVEF (%)	47±15	47±15	0.657
LVEDD (mm)	57±10	57±10	0.773
Transmitral gradient (mmHg)	1.9±1.1	2.2±1.1	0.001
LA Volume index (ml/m²)	68±29	65±30	0.088
sPAP (mmHg)	45±14	49±16	<0.001

Exact Fisher Test or Mann-Whitney U test

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Clinical outcomes and transmitral gradient

Clinical outcomes Mean transmitral gradient n.s. n.s. n.s. * 96.7 98.0 100,0 6,0 5,0 30,0 5.2 26,0 5,0 80,0 4,0 3.9 4.0 20,0 60.0 mmHg 3,0 15,6 % 3,0 % 2.3 40,0 2.0 2,0 2,0 10,0 20,0 1,0 1,0 0.0 0,0 0,0 0,0

Exact Fisher Test. * p<0.05; n.s.: not significant
Gradients: Values are adjusted for baseline gradients ±SEM
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Technical success

london valves

PASCAL MitraClip

Mean transmitral

gradient

Increase in

transmitral

gradient

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MAE



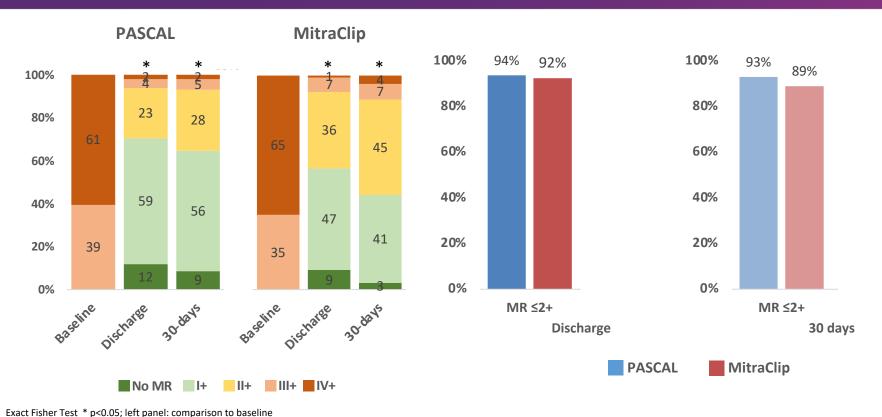
Mean gradient ≥ 5

mmHg

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SLDA

Degree of MR at discharge and 30 days



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Thank you!







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