

IX CONGRESSO NAZIONALE ECOCARDIOCHIRURGIA 2017

Alternative percutanee nel trattamento dell'insufficienza tricuspidalica: stato dell'arte e prospettive future

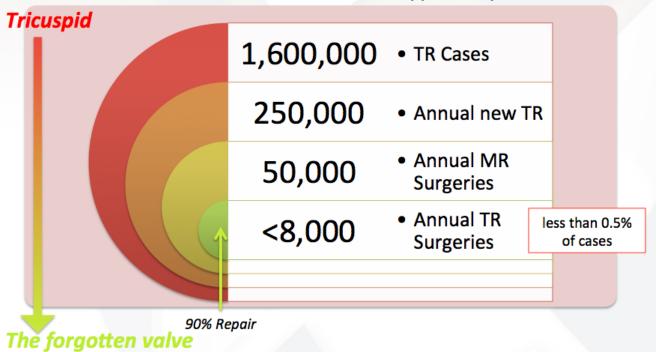
Sergio Berti

Ospedale del Cuore Fondazione C.N.R. Reg Toscana Massa/Pisa

Clinical background

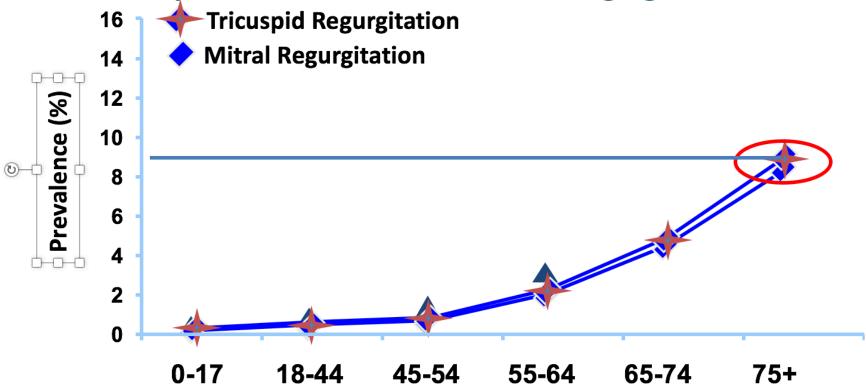
Tricuspid Regurgitation and Low penetration of cardiac surgery

Estimated structural heart disease opportunity: US



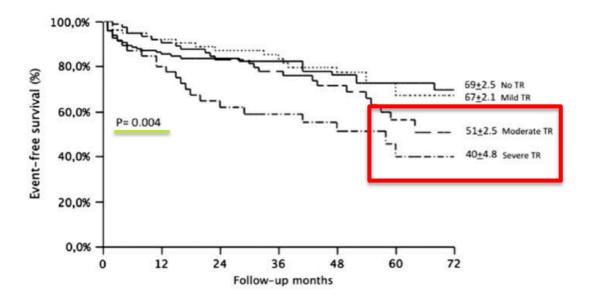
Agarwal et al. Circ Cardiovasc Interv 2009;2:565-573
Stuge O, Liddicoat J. J Thorac Cardiovasc Surg. 2006 Dec;132(6):1258-61

Functional Tricuspid and Mitral Regurgitation have the same incidence & prevalence and are related to aging*



^{*} Diagnosed in Olmsted County, MN, USA Data presented by Prof. M. Enriquez-Sarano - Mayo Clinic CONFIDENTIAL

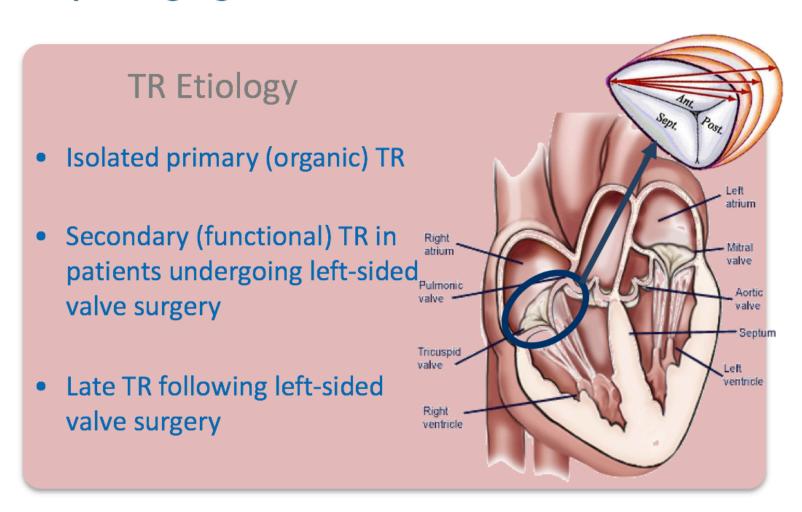
TR highly impacts the rate of events



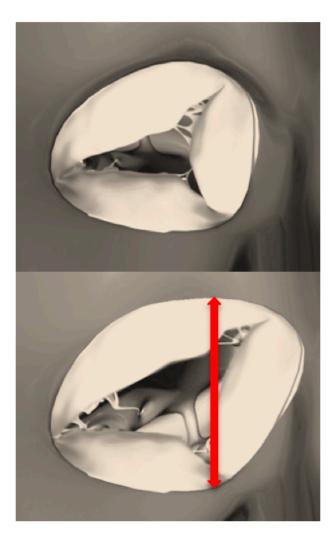
"Moderate to severe TR is independently associated with increased risk of events"*

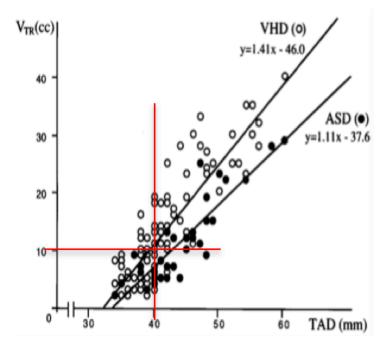
^{*}Agricola E et al. Eur J Heart Fail. 2012 Aug;14(8):902-8

Tricuspid Regurgitation - Clinical Scenarios



Functional tricuspid regurgitation disease mechanism

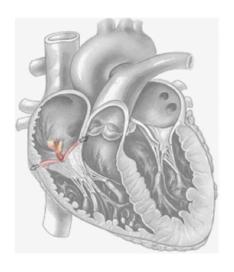


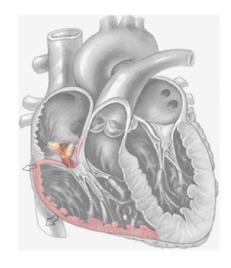


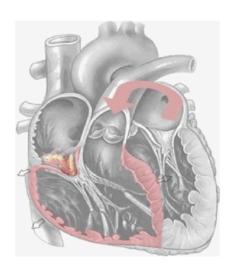
Correlation between Tricuspid Annular Diameter and Regurgitant Volume

Sugimoto et al. J Thorac Cardiovas Surg 1999;117:463

When should we treat?





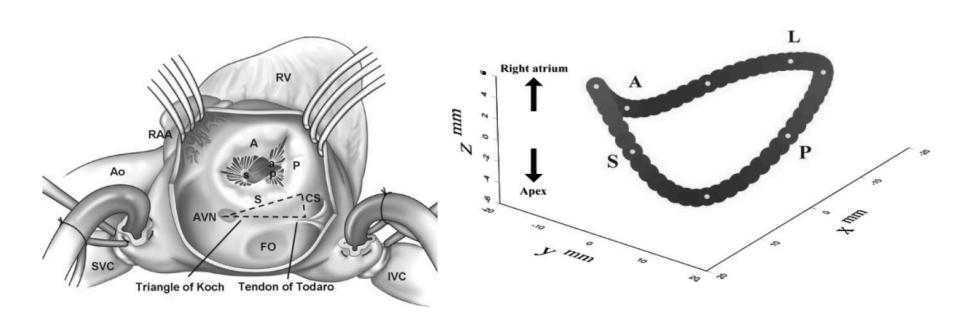


Phase I Initial dilation of RV results in TA dilation

Phase II
Progressive RV
and TA dilation
results in lack of coaptation

Phase III
Progressive RV distortion
tethering of the leaflets,
TA dilation, pulm hypertension

Tricuspid valve: a complex 3-dimensional structure



Surgical techniques for functional Tricuspid Regurgitation

Annular plication by suture annuloplasty

Localized

- Kay repair (bicuspidalization)

Semicircular

-De Vega repair

Reduction annuloplasty with flexible rings

SJM Tailor Annuloplasty ring
Cosgrove-Edwards ring

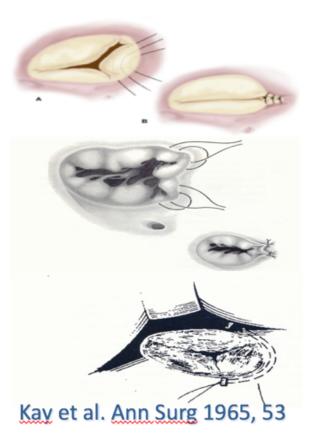
Duran ring

Remodeling annuloplasty with semi-rigid rings

Carpentier-Edwards

Edwards MC3 system

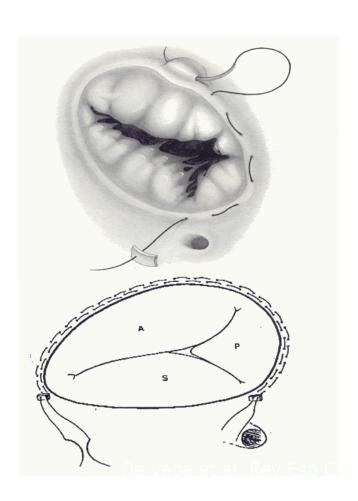
Annular plication Kay Repair (bicuspidalization)



- Bicuspidalization of the TV by exclusion of the posterior leaflet
- Simply, fast, unexpensive and safe (conduction system avoided)
- Late dilatation of the anterior annulus



Semicircular annuloplasty (De Vega)



- Simple, fast, unexpensive
- No prosthetic material
- No AVN injury
- Significant late recurrence of TR



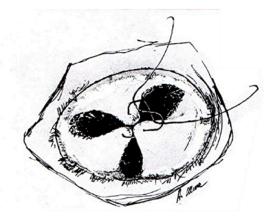


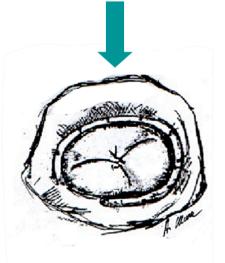


Clover technique







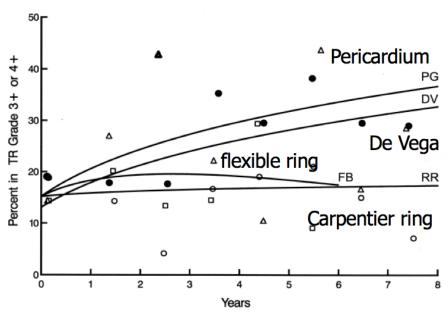




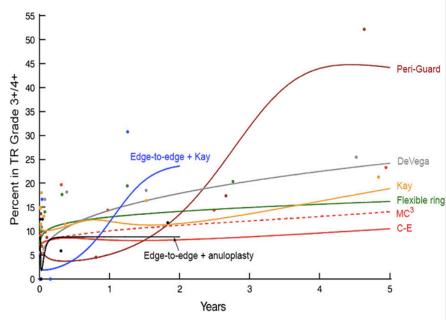




Current results of tricuspid plasty are suboptimal



McCarthy et al. JTCVS 2004;127:675

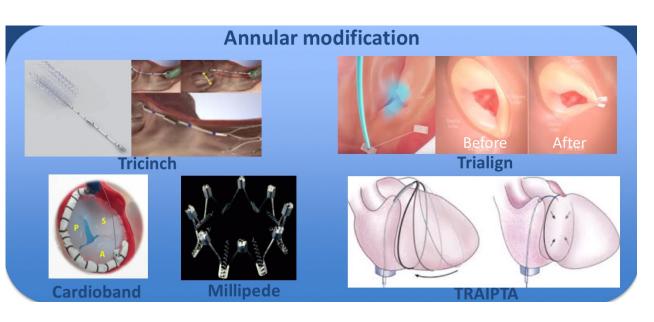


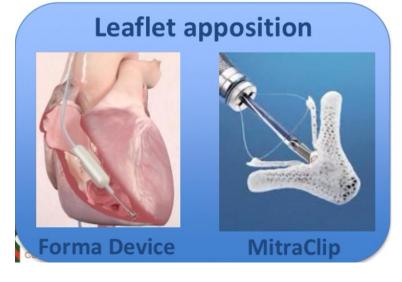
Navia et al. JTCVS 2010;139

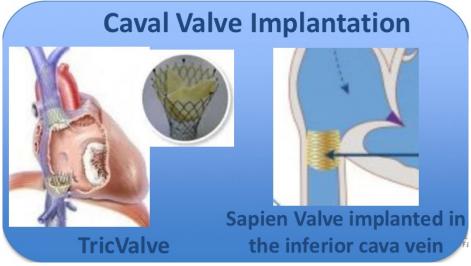
Transcatheter solution for Tricuspid Valve Regurgitation

- Transform proven surgical techniques in percutaneous procedure to perform a remodeling of tricuspid valve annulus in a minimally invasive percutaneous approach.
- Answer an unmet clinical need with a simple, reproducible and cost-effective procedure that will relief non-surgical and high risk patients and decrease health-care spending.

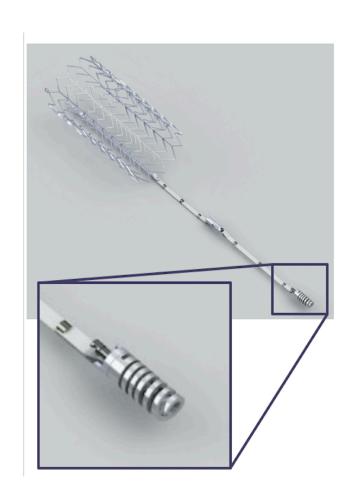
What does the future hold?

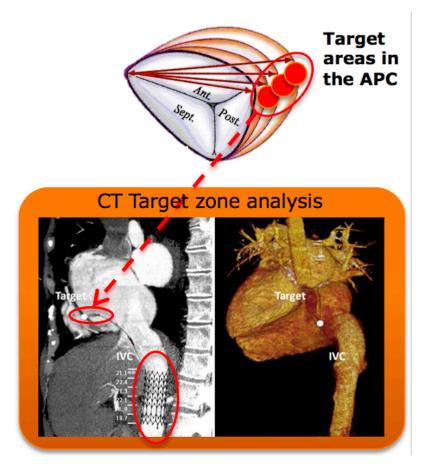






Target areas in the Anterior Posterior Commissure and stent landing zone in the Inferior Vena Cava

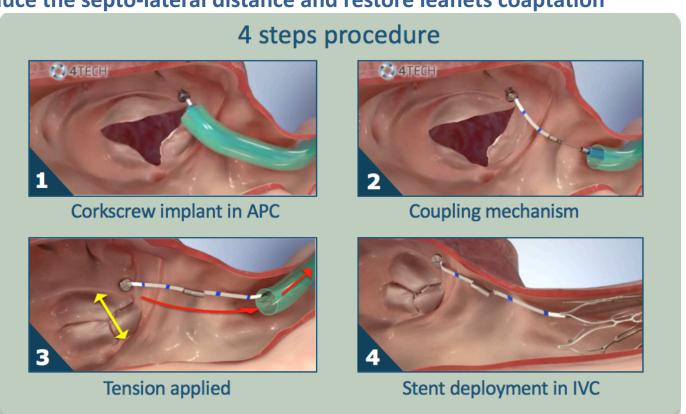




4Tech-TriCinch System™

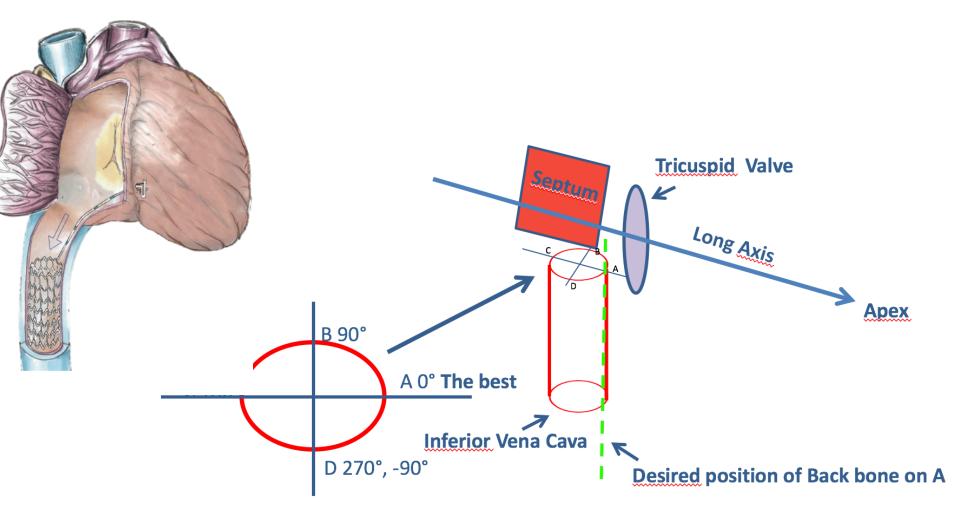
Innovative Percutaneous Solution to Treat Tricuspid Valve Disease

Objective: Reduce the septo-lateral distance and restore leaflets coaptation

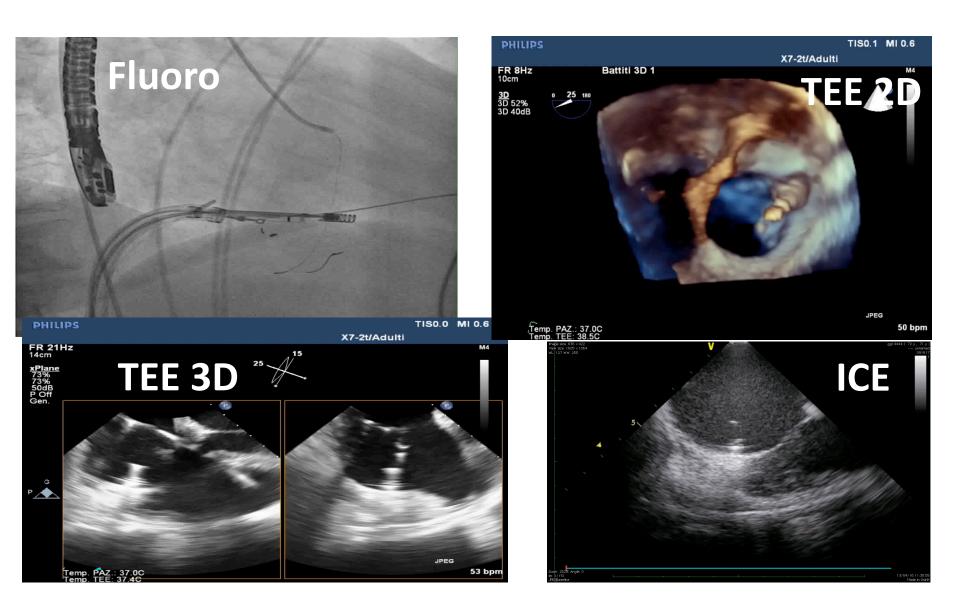


Positioning of back bone and SCREW

Put it on the right in a projection perpendicular to the long axis of the heart

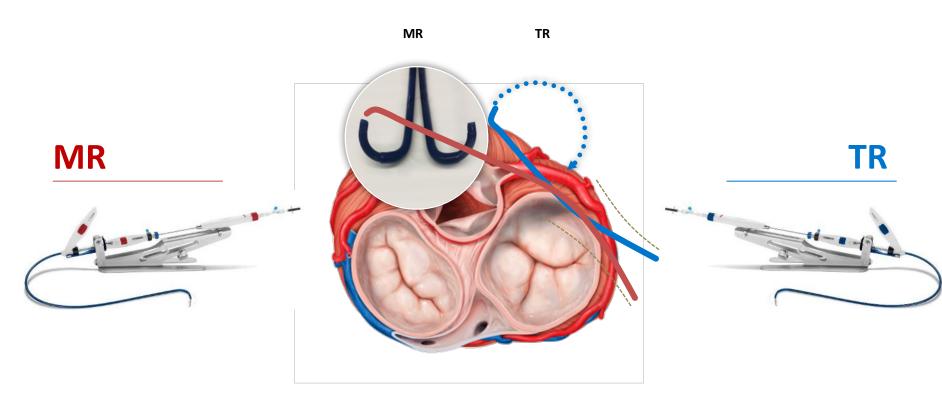


Multi Imaging Aproach



Cardioband Mitral and Tricuspid

- Gold Standard Through a Catheter
- Cardioband TR is a mirrored version of Cardioband MR



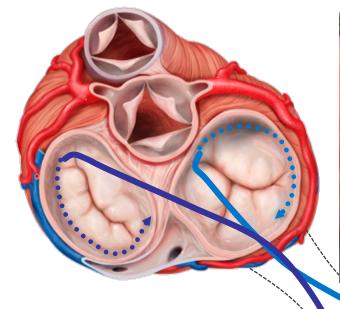
Introducing - Cardioband Tricuspid







Tricuspid

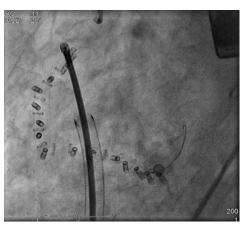




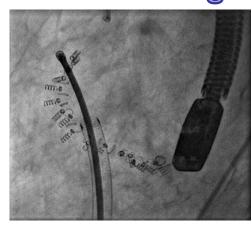
First in Human Experience

Fluoroscopy cinching up to 3.5 (out of 5.5)

Baseline

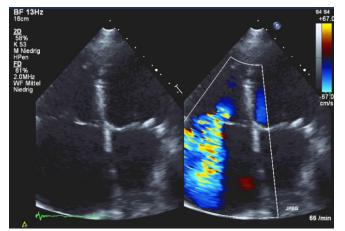


Post cinching

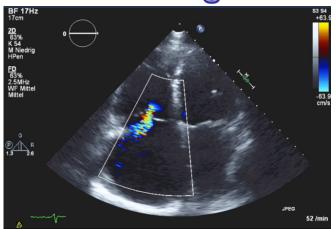


TEE

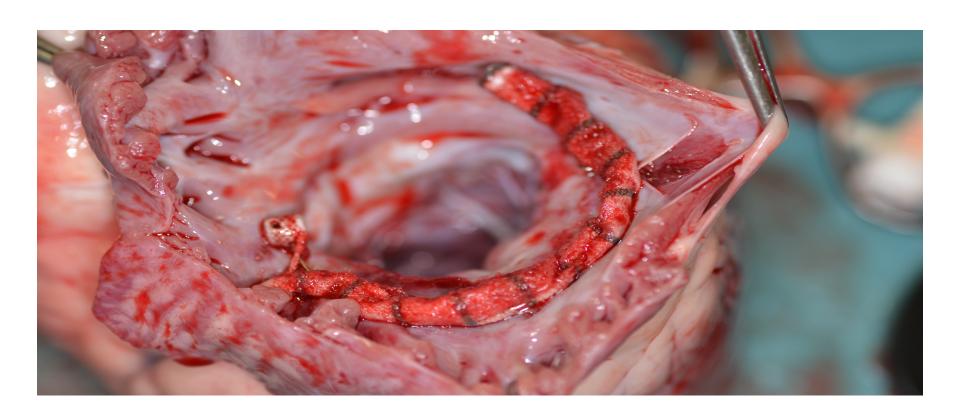
Baseline



Discharge

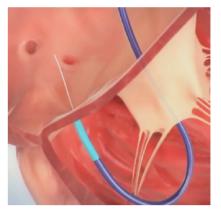


CARDIOBAND: surgical ring implanted percutaneously

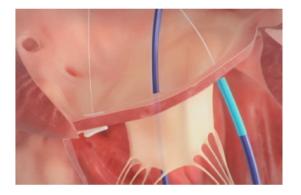


TRIALIGN: Transcatheter Kay Annuloplasty

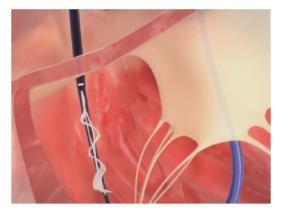
Step 1: Wire Delivery



Step 3: Second Wire Delivery



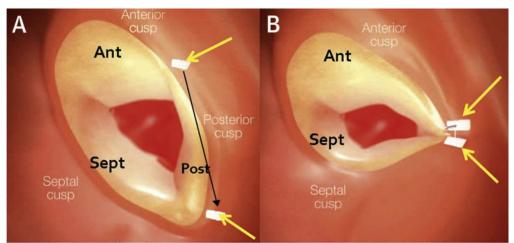
Step 2: Pledget Delivery



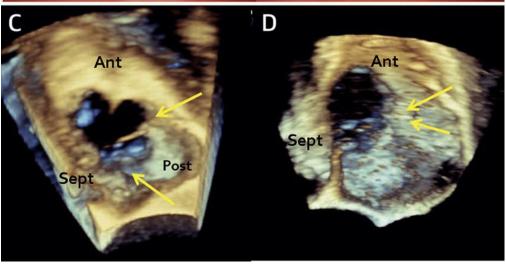
Step 4: Plication and Lock



TRIALIGN concept

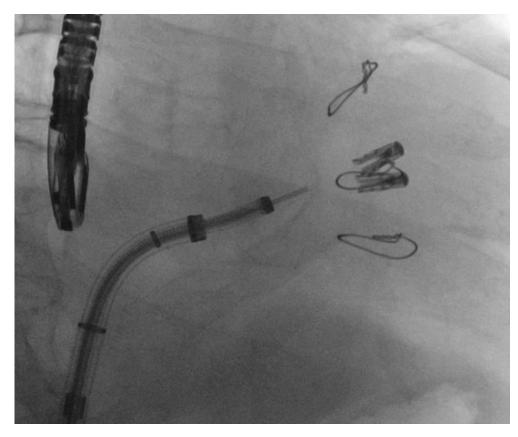


SCOUT Trial On going



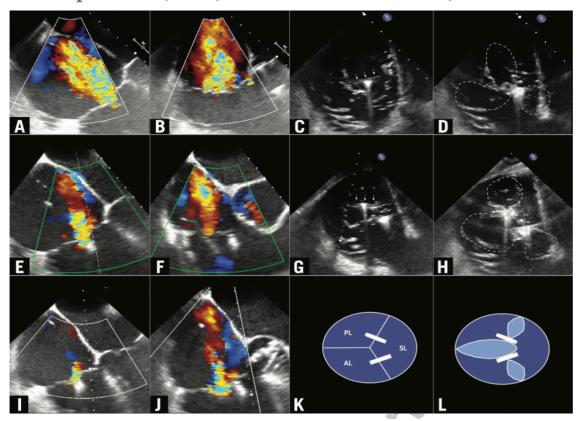
Transchatheter Repair of the Tricuspid Valve Regurgitation using the MitraClip® system



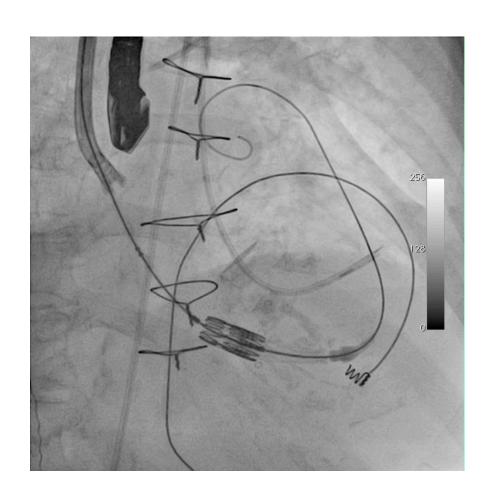


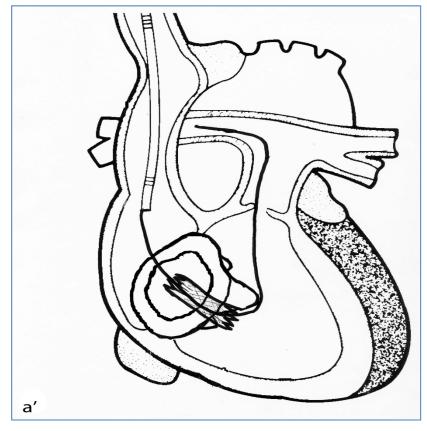
First transfemoral percutaneous edge-to-edge repair of the tricuspid valve using the MitraClip system

Tobias Wengenmayer^{1*}, MD; Manfred Zehender¹, MD; Wolfgang Bothe², MD; Christoph Bode¹, MD; Sebastian Grundmann¹, MD



Transjugular tricuspid valve-in-valve





Catheter Cardiovasc Interv. 2011

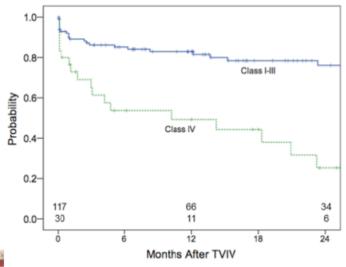
Interventional Cardiology

Transcatheter Tricuspid Valve-in-Valve Implantation for the Treatment of Dysfunctional Surgical Bioprosthetic Valves An International, Multicenter Registry Study

Doff B. McElhinney, MD; Allison K. Cabalka, MD; Jamil A. Aboulhosn, MD;
Andreas Eicken, MD; Younes Boudjemline, MD; Stephan Schubert, MD;
Domfinique Himbert, MD; Jeremy D. Asnes, MD; Stefano Salizzoni, MD; Martin L. Bocks, MD;
John P. Cheatham, MD; Tarek S. Momenah, MD; Dennis W. Kim, MD; Dietmar Schranz, MD;
Jeffery Meadows, MD; John D.R. Thomson, MD; Bryan H. Goldstein, MD;
Ivory Crittendon III, MD; Thomas E. Fagan, MD; John G. Webb, MD; Eric Horlick, MD;
Jeffrey W. Delaney, MD; Thomas K. Jones, MD; Shabana Shahanavaz, MD;
Carolina Moretti, MD; Michael R. Hainstock, MD; Damien P. Kenny, MD;
Felix Berger, MD; Charanjit S. Rihal, MD; Danny Dvir, MD;
for the Valve-in-Valve International Database (VIVID) Registry

McElhinney D, Dvir, D. Circulation. 2016;133:1582-1593.

Survival free from TVIV reintervention or significant TS (mean gradient □10) or TR

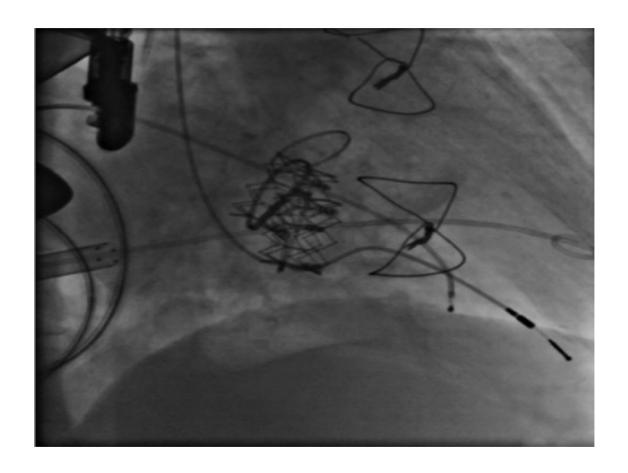




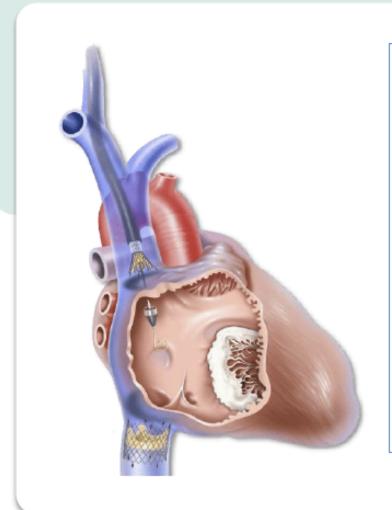


Transatrial Antegrade Approach for Double Mitral and Tricuspid "Valve-in-Ring" Implantation

Domenico Mazzitelli, MD, Sabine Bleiziffer, MD, Christian Noebauer, MD, Hendrik Ruge, MD, Patrick Mayr, MD, Anke Opitz, MD, Peter Tassani-Prell, MD, Christian Schreiber, MD, Nicolo Piazza, MD, and Ruediger Lange, MD



The CAVI concept



Review:

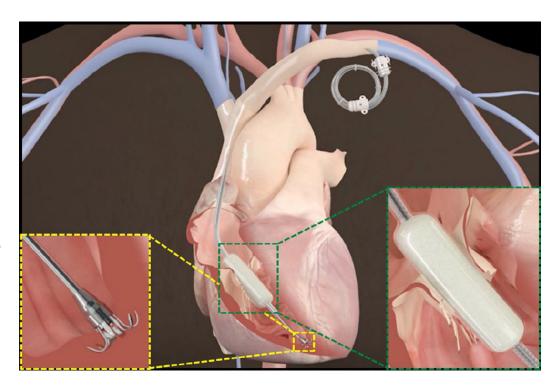
- Caval Valve Implantation
- Technology ad-hoc designed or Stent as support for TAVI implant
- Transfemoral-tranjugular access
- Risk of ventricularization of the right atrium
- Few clinical cases performed
- Few clinical data available

FORMA Repair System Overview Rail

Spacer

- Positioned into the regurgitant orifice.
- Creates a platform for native leaflet coaptation.
- Preserves underlying structure.
- Limited contact with annulus.
- Works with the leaflet, no capture.
- Navigate through chords and papillary muscle.
- Limited contact with conductive system.
- Similar to a pacemaker lead implant.

- Tracks Spacer into position.
- Distally and proximally anchored.



Millipede System

(Millipede, LLC, Ann Arbor, MI)

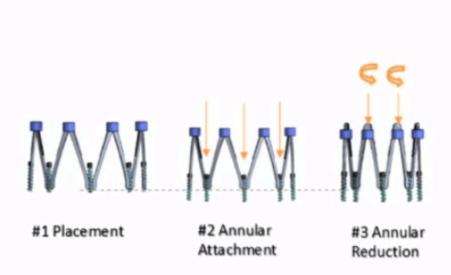


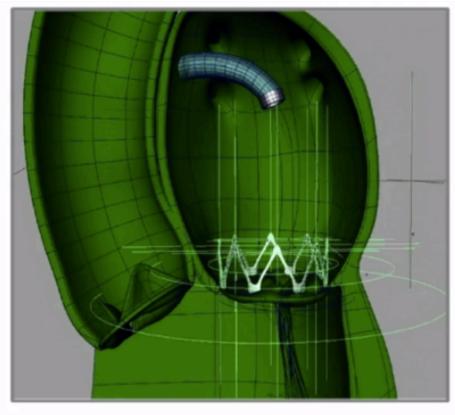
Figure 5. The Millipede system. Delivery of ring assembly to the tricuspid valve (A). Expansion of the annulus and attachment of the annular ring (B). Detachment and release of the ring, reducing annular dimensions and TR (C).

A novel tricuspid annular ring with an unique attachment system via either minimally invasive surgical or percutaneous methods, repositionable and retrievable.

Millipede System

(Millipede, LLC, Ann Arbor, MI)





Direct Vision

Catheter Delivery

Take-Home Messages

• The treatment of TR is now an emerging hot topic in the field of valve heart diseases therapies:

Large unmet clinical need

- Percutaneous TV technologies may be useful for a large amount of patients with TR who are at high risk for openheart surgery.
- Ideas inspired from percutaneous MV repair/replacement.
- Waiting for routilnely use of new imaging modalities.

Joint Symposium GISE-SIC

Reparative system for tricuspid regurgitation

Sergio Berti

Ospedale del Cuore Fondazione C.N.R. Reg Toscana Massa/Pisa