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## Long-term relative survival study after surgical aortic valve replacement in patients with intermediate risk

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The indications for Transcatheter Aortic Valve Implantation (TAVI) are evolving. The original indication, in patients with unacceptably high risk for surgery, was expanded to include high-risk patients also eligible for surgery. TAVI is now being offered to intermediate-risk patients without available long-term data. Surgery in these patients offers excellent results, both in the short and long term. Surgical aortic valve replacement, with or without concomitant coronary revascularisation, can achieve a normal life expectancy in intermediate-risk patients aged 68 or older. We present a 20-year relative survival study, comparing patients' outcomes with that of normal controls derived from the National Statistics database. The study also correlated long-term survival with patient-related, procedure-related and post-operative complication-related factors. Surgical AVR for severe aortic stenosis in intermediate-risk patients yields excellent long-term survival. The decision to offer TAVI to these patients should factor in the known long-term results of surgery.

#### **Recent Publications**

- 1. A Manché (2017) Long-term outcome after surgical aortic valve replacement Cardiothoracic Department, Mater Dei Hospital, Malta J Clin Exp Cardiolog, 8:9(Suppl): 31. Doi: 10.4172/2155-9880-C1-077
- 2. A Manché, L Camilleri and D Gauci (2016) Does aortic valve replacement restore normal life expectancy? A twenty-year relative survival study International Cardiovascular Forum Journal; 6:3-10.
- 3. A Manché and L Camilleri (2016) At what age does aortic valve replacement restore life expectancy? SCTS Conference News The official newspaper of the SCTS Annual Meeting and Cardiothoracic Forum page 30
- A Manché, A Casha and L Camilleri (2016) The impact of age in prosthesis-patient mismatch on long-term survival after aortic valve replacement: in-vitro versus in-vivo values. Journal of Advances in Medical and Pharmaceutical Sciences; 9:1-8 JAMPS.28381 ISSN: 2394-1111

#### **Biography**

Alexander Manché is the Chairman of the Cardiothoracic Surgery at Mater Dei Hospital, Malta. He qualified at Westminster Medical School, London in 1979 and spent 18 years in UK and US, including two years of research at the Rayne Institute. He returned to Malta in 1995 and set up the cardiothoracic unit, which offers a comprehensive adult service including surgery for ischaemic and valvular heart disease, thoracic vascular conditions, heart transplantation, vascular access as well as lung disease. His journal publications and presentations at scientific meetings are over two hundred. He has a special interest in the epidemiology of aortic valve surgery.

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