Balloon-expandable TAVI valves have proven durability at 5 years with a promising outlook for the future.

At 5 years, transcatheter valve implantation (TAVI) and surgical aortic valve replacement (sAVR) durability are equivalent.\(^1\)

### PARTNER Trial

<table>
<thead>
<tr>
<th></th>
<th>TAVI</th>
<th>sAVR</th>
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</thead>
<tbody>
<tr>
<td>Mean aortic valve area</td>
<td>1.6cm(^2)</td>
<td>1.5cm(^2)</td>
</tr>
<tr>
<td>Mean valve gradient</td>
<td>10.7mm Hg</td>
<td>10.6mm Hg</td>
</tr>
</tbody>
</table>

Mean aortic valve area: \(p=0.29\); Mean valve gradient: \(p=0.92\)

There are no significant differences in:\(^1\):

- All-cause mortality
- Cardiovascular mortality
- Stroke
- Repeat hospital admission

Very few patients who received TAVI required reintervention due to structural valve deterioration (SVD).\(^2\)

- 0.2\% Patients required reintervention due to SVD
- 0.8\% Patients required reintervention

Total patients: 2,482
TAVI valves are tested with even more rigorous criteria for measuring SVD and bioprosthetic valve failure (BVF)

Even so, studies still show very low rates of SVD and BVF at 8 years after TAVI

- **Incidence of SVD at 8 years**: 3.2%
- **Incidence of BVF at 8 years**: 0.6%
- **Total patients**: 378
- **Only nine patients had SVD**
- **only two had definite late BVF**

At 2-year follow-up on the PARTNER 3 Trial, there was no change in mean gradient, aortic valve area or paravalvular regurgitation. Patients will be followed up to ten years.