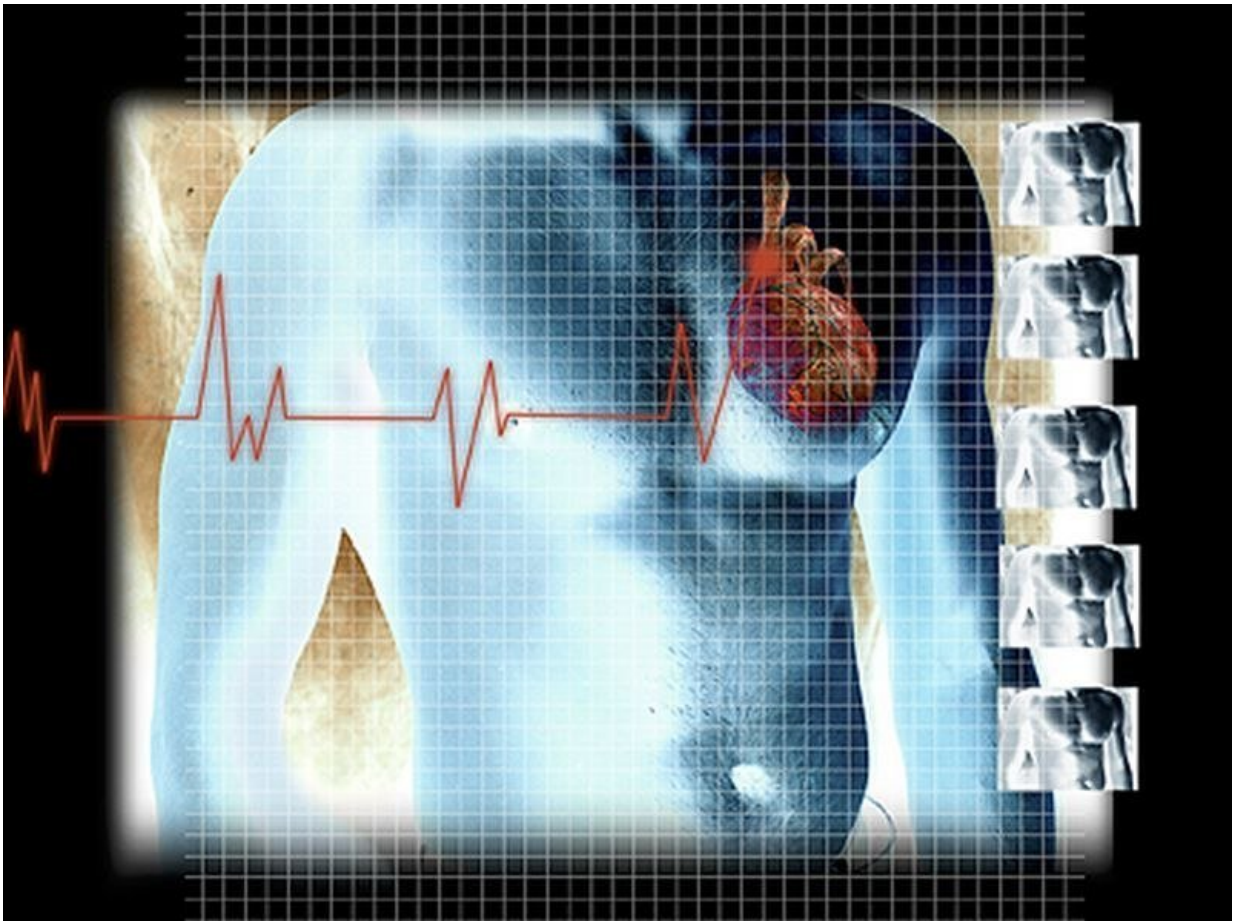


Rapid deployment valve for aortic stenosis ups stroke risk

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(HealthDay)—For patients with aortic valve stenosis, treatment with a

rapid deployment valve (RDV) is associated with increased rates of new-onset pacemaker implantation and disabling stroke, compared with conventional biological valves (CBVs), according to a study published in the April 3 issue of the *Journal of the American College of Cardiology*.

Stephan Ensminger, M.D., from Ruhr-University Bochum in Germany, and colleagues enrolled 22,062 patients who underwent isolated surgical [aortic valve replacement](#) using CBV or RDV between 2011 and 2015. Researchers used 1:1 [propensity score](#) matching to analyze baseline, procedural, and in-hospital outcome parameters for CBVs and RDVs. A total of 20,937 patients received a CBV, and 1,125 were treated with an RDV.

The researchers found that for patients treated with an RDV versus a CBV, there were significantly reduced times for procedure (150 versus 160 minutes), cardiopulmonary bypass (70 versus 83 minutes), and aortic cross clamp (44 versus 60 minutes; P

"In this large, all-comers database, the incidence of [pacemaker implantation](#) and disabling stroke was higher with RDVs, whereas no beneficial effect on in-hospital mortality was seen," the authors write.

Several authors disclosed financial ties to the pharmaceutical industry.

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