In severe, asymptomatic aortic stenosis, early surgery may help

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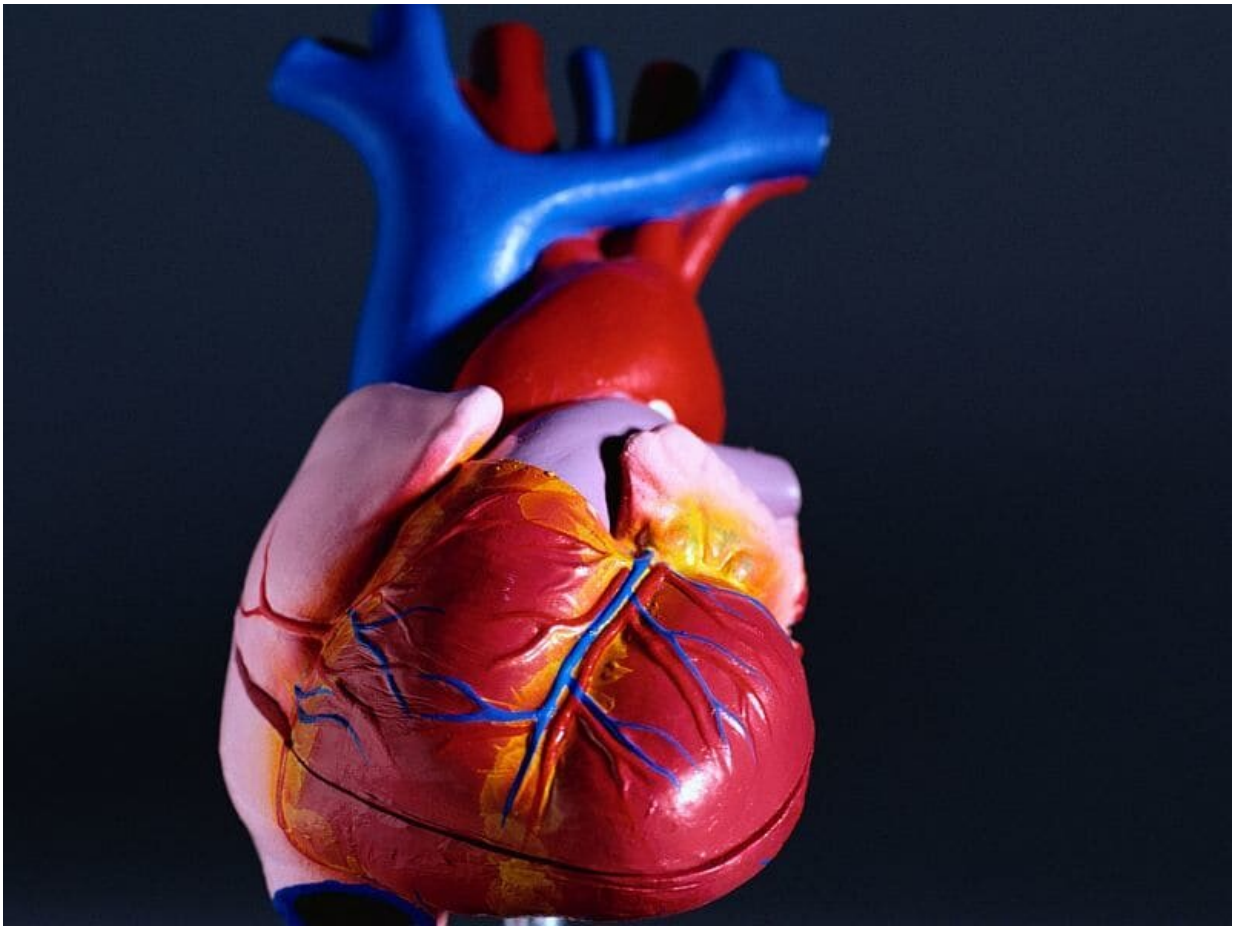

(HealthDay)—Early aortic valve replacement (AVR) may improve

survival in patients with severe, asymptomatic aortic stenosis, according to a study published online March 20 in *The Annals of Thoracic Surgery*.

John Campo, M.D., of the Northwestern University Feinberg School of Medicine in Chicago, and colleagues examined echocardiograms performed between January 2005 and December 2013 in 265 patients with severe, asymptomatic aortic stenosis. The authors sought to evaluate outcomes based on whether the patients were initially recommended to undergo early AVR (104 patients) or watchful waiting (WW; 161 patients).

The researchers found that two years after treatment recommendation, survival in the AVR group was 92.5 percent compared with 83.9 percent in the WW group. Also, the two-year probability of death or undergoing surgery in the WW group was 43.9 percent. Surgery and better survival were independently associated in the AVR group (hazard ratio, 0.17) and in the WW group (hazard ratio, 0.39).

"The strategy of early AVR could potentially improve survival in asymptomatic, severe aortic stenosis patients," the authors write. "On the basis of our analysis, a period of WW may be safe up to one year, but undergoing AVR is associated with higher survival whether WW or AVR was initially recommended. Randomized clinical trials are underway to determine the safety and efficacy of AVR in asymptomatic aortic stenosis."

One author disclosed a financial relationship with Edwards Lifesciences.

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