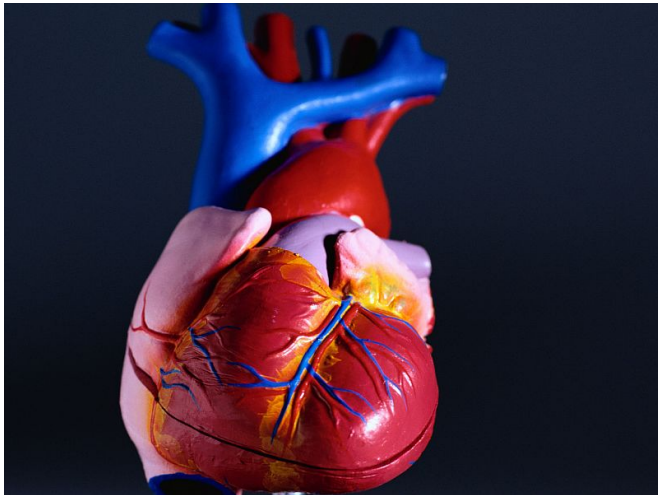


TAVI can be performed without ICU admission

21 June 2016



(positive predictive value, 26.7 percent), mainly conductive disorders which required a pacemaker. In multivariate analysis, the investigators found that preprocedural predictive factors of adverse events included right bundle branch block (odds ratio, 14.1), use of the self-expandable valve without a pacemaker (odds ratio, 5.5), vitamin K antagonist treatment (odds ratio, 3.8), and female gender (odds ratio, 2.6).

"In conclusion, our results suggested that TAVI can be performed safely without ICU admission in selected patients," the authors write. "This strategy may optimize efficiency and cost-effectiveness of procedures."

More information: [Abstract](#)
[Full Text \(subscription or payment may be required\)](#)

(HealthDay)—Transcatheter aortic valve implantation (TAVI) can be performed in low-risk patients without admission to the intensive care unit (ICU), according to a study published in the July 1 issue of *The American Journal of Cardiology*.

Florence Leclercq, M.D., Ph.D., from the University Hospital of Montpellier in France, and colleagues evaluated 177 consecutive [patients](#) who underwent TAVI. The patients were classified as either high risk (those who were transferred to the ICU) or low risk (those who were admitted to conventional cardiology units and had stable clinical state, transfemoral access, no right bundle branch block, permanent pacing with a self-expandable valve, and no complications during the procedure).

The researchers found that only one of the low-risk patients (1.6 percent) had a minor complication (negative predictive value, 98.4 percent). Of the high-risk patients, 26.7 percent had clinical events

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