Long Term Survival Rate of TAVR With and Without Dialysis

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Transcatheter aortic valve replacement (TAVR) is an increasingly conventional minimally invasive procedure for high risk patients with severe aortic stenosis.

- Avoids complications associated with a median sternotomy and the heart lung machine
- Long-term patient survival and valve durability are not completely known.

For patients coincidingly on dialysis:
- Previous studies have illustrated a faster degeneration of the transaortic valve leaflets
- Regular cost of valve: $32,000 and cost of procedure: $70,000

- 530 patients had the TAVR procedure
  - 110 died (20.75%)
  - 11 died within 30 days of the procedure
- 14 patients were coincidingly on dialysis
  - 7 died (50%)
  - \( p = 0.0035 \)
  - p values <0.05 are statistically significant
  - Worse survival rate by a factor of three

- Hazard ratio = 2.959; 95% CI 0.8381% to 10.446%
- Average survival time of 2.02 yrs. (95% CI) PP
- Median survival time of 0.953 yrs. (95% CI). PP

TAVR has been successful for non-dialysis patients

Significant decrease in survival rates for hemodialytic patients should draw caution to the cardiothoracic team as they assess a TAVR candidate.

Further research is warranted to continue TAVR patient follow up and expand the existing TAVR database.