

## One-year outcomes from the ACURATE *neo2* PMCF Post-market Registry

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On behalf of the ACURATE *neo2* Post-Market Clinical Follow-up Study Investigators



CAUTION: In Europe, ACURATE neo and neo2 Aortic Valve Systems are CE-marked. In the USA, ACURATE neo2 is an investigational device and restricted under federal law to investigational use only. Not available for sale.

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✓ I have the following potential conflicts of interest to declare:

Receipt of grants / research support: Boston Scientific

Receipt of honoraria or consultation fees: Abbott, Boston Scientific, Edwards Lifesciences, Meril, Shockwave Medical





## Why this study?

- ACURATE *neo2* is a 2<sup>nd</sup>-generation supra-annular valve that features improvements to further reduce PVL compared to the prior-generation ACURATE *neo*.
- The PMCF post-market registry studied *neo2* in routine clinical practice.
- Outcomes at 30 days have been previously presented. Here, we report 1-year outcomes.







## What did we study?

Prospective multicentre single-arm post-market surveillance study in a routine clinical practice setting

#### Independent CEC adjudication of safety events

Primary safety endpoint: 30-day all-cause mortality Additional endpoints evaluated through 1 year Death, stroke, bleeding, major vascular complications, hospitalization for valve-related symptoms

#### Independent core laboratories

Echocardiography: MedStar Health Research Institute

Hemodynamics and PVL at discharge, 30 days, and 1 year

<u>4D-CT</u>: The University of British Columbia, Department of Radiology

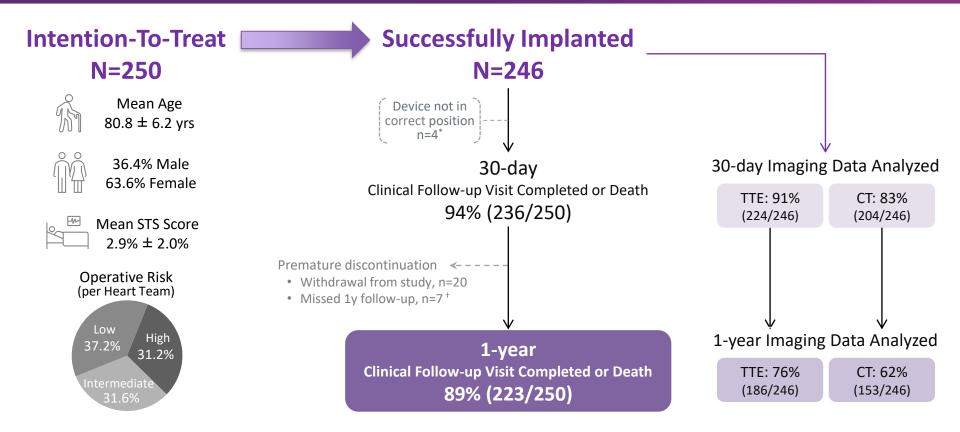
Hypo-attenuated leaflet thickening (HALT) at 30 days [primary imaging endpoint] and 1 year







## How was the study executed?



\*In 4 patients, ACURATE *neo2* embolized and patients were implanted with a non-study valve; these patients were followed for safety only through 30 days \*Patient survival confirmed, but no additional follow-up data collected.

#### What are the essential results?

Key Safety Events	Discharge	30 Days	1 Year
All-cause mortality	0.4% (1)	0.8% (2)* 1° Safety Endpt	5.1% (12)
Cardiovascular mortality	0.4% (1)	0.8% (2)	3.4% (8)
All stroke	0.4% (1)	0.8% (2)	3.0% (7)
Major bleeding	2.4% (6)	2.4% (6)	2.8% (7)
Hospitalization for valve-related symptoms or worsening CHF	0.0% (0)	0.0% (0)	1.7% (4)
Prosthetic aortic valve thrombosis	0.4% (1)^	0.4% (1)	<b>0.9% (2)</b> ‡
Prosthetic aortic valve endocarditis	0.0% (0)	0.4% (1)	1.7% <b>(4)</b>
Valve-related repeat procedure (BAV)	0.4% (1) <sup>*</sup>	0.4% (1)	<b>0.8% (2)</b> <sup>+</sup>
Newly implanted permanent pacemaker	5.2% (13)	6.1% (15)	7.8% (19)

\*Deaths: 1 patient experienced life-threatening bleeding (admitted to secondary hospital, source of bleeding not recorded) and hemodynamic instability leading to circulatory arrest and death; 1 patient died post index procedure following valve embolization and unsuccessful TAV-in-TAV with non-study valve leading to coronary obstruction and procedural myocardial infarction.

\*Surgical removal of embolized ACURATE neo2 valve

^Thrombus noted pre-discharge in non-study valve implanted subsequent to ACURATE neo2 embolization

<sup>‡</sup>Diagnosis of HALT at 30 days and 1 year, with oral anticoagulant therapy initiated shortly before 1-year visit

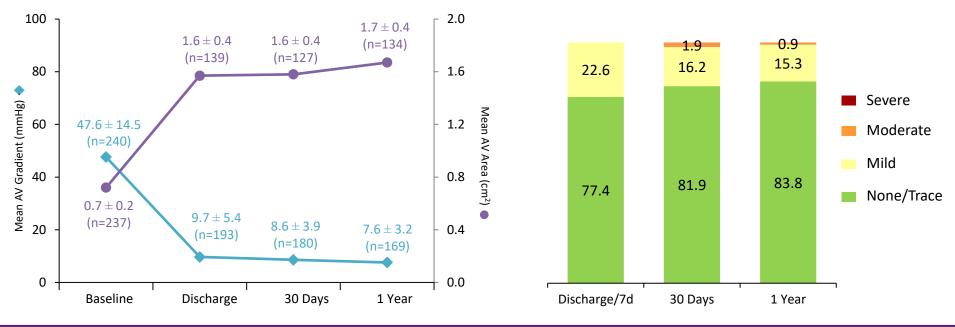




#### **Echocardiography Core Laboratory**

Aortic Valve Haemodynamics, ITT Population

Paravalvular Leak, Paired Analysis (n=116)



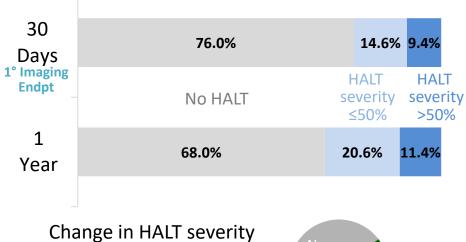




#### What are the essential results?

### **CT Core Laboratory**

#### HALT, Paired Analysis (n=150)



from 30 days  $\rightarrow$  1 year

(n=135, excludes pts on OAC)



1-Year Event Rate	HALT @ 30d or 1y N=72	No HALT @ 30d and 1y N=93	P-value
All-cause mortality	0.0% (0)	0.0% (0)	0.25
CV mortality	0.0% (0)	0.0% (0)	0.25
All stroke	2.2% (2)	2.2% (2)	0.74
Disabling stroke	0.0% (0)	0.0% (0)	
Valve thrombosis	0.0% (0)	0.0% (0)	0.25
Echocardiography	n=27*	n=91	
AV gradient (mm Hg)	7.1±4.3	7.8±2.7	0.36
AV area (cm <sup>2</sup> )	1.6±0.4	1.7±0.4	0.53

\*Only subjects with HALT recorded at 30 days *and* 1 year are included in the analysis.





### The essentials to remember

This report confirms favorable performance and safety through 1 year in patients with severe aortic stenosis treated with ACURATE *neo2* 

- Patients treated with ACURATE *neo2* exhibited early improvement in valve haemodynamics and low rates of PVL through 1 year
  - At 1 year, 99% of patients had mild or no/trace PVL (<1% had moderate PVL)</li>
  - No patients exhibited >moderate PVL at any time
- 1-year rates of all-cause mortality (5.1%) and stroke (3.0%) are comparable to other trials of TAVR patients at intermediate or high surgical risk
- > The presence of HALT:
  - Did not impact patient safety at 1 year
  - Did not significantly affect mean AV gradient or mean AV area





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