# Commissural alignment & TAV performance: Results from the COMALIGN-neo 2 study

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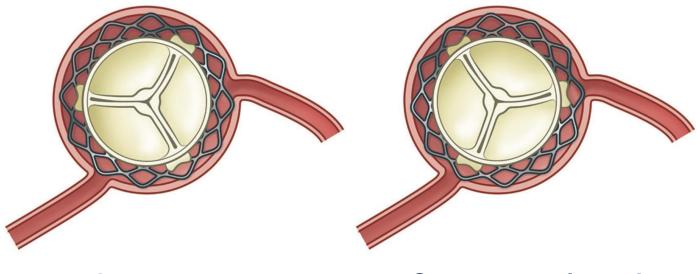
### Disclosure of Relevant Financial Relationships

I, Ole De Backer received institutional research grants and consulting fees from Boston Scientific.





## TAVR – commissural alignment





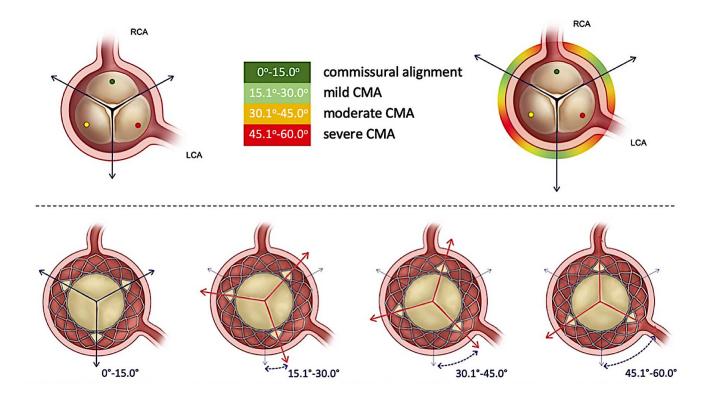


Severe commissural misalignment





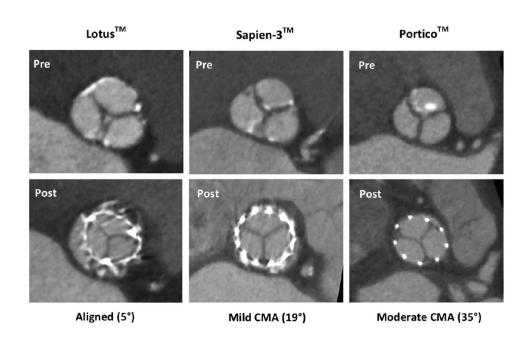
## TAVR – commissural alignment



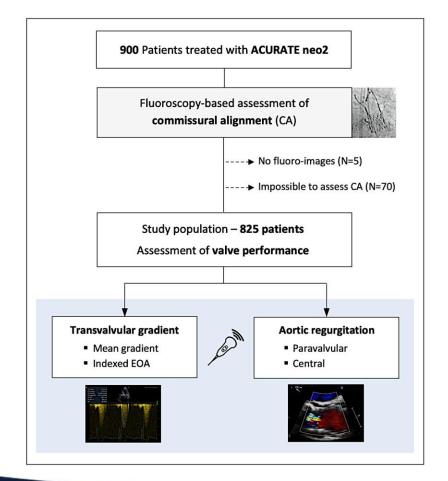




## TAVR – commissural alignment



	Aligned	Mild CMA	Moderate CMA	Severe CMA
SAVR				
Perimount (n = 9)	9 (100)	-	-	-
Magna $(n = 9)$	8 (89)	1 (11)	_	_
Epic (n = 5)	5 (100)	_	_	
MitroFlow (n = 4)	4 (100)	_	-	_
Trifecta (n = 1)	1 (100)	_	-	-
Total $(n = 28)$	27 (96)	1 (4)	_	_
TAVR				
SAPIEN 3 (n = 82)	24 (29)	21 (26)	10 (12)	27 (33)
Lotus (n = 42)		13 (31)	12 (29)	12 (29)
Evolut R (n = 38)	8 (21)	9 (24)	8 (21)	13 (34)
Portico (n = 27)	6 (22)	2 (7)	10 (37)	9 (33)
Acurate (n = 17)	3 (18)	5 (29)	4 (24)	5 (29)
Centera (n = 6)	1 (17)	3 (50)	2 (33)	
Total (n = 212)	47 (22)	53 (25)	46 (22)	66 (31)



### COMALIGN-neo2

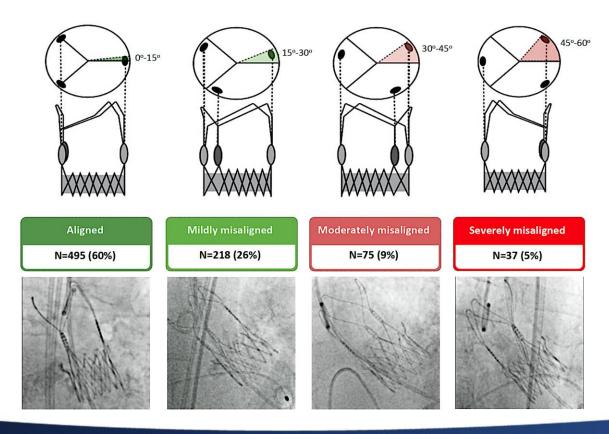
ACURATE neo2 commissural alignment & valve performance





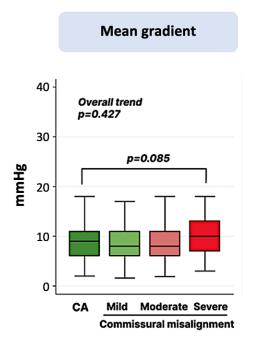


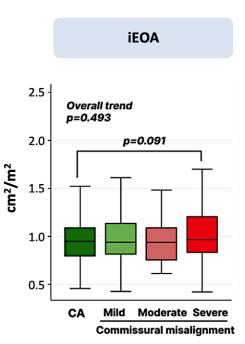
## ACURATE neo2 – commissural alignment

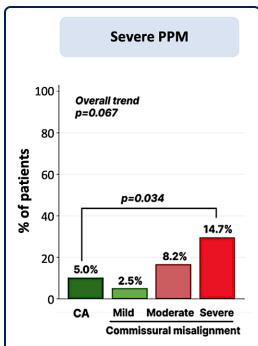






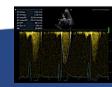






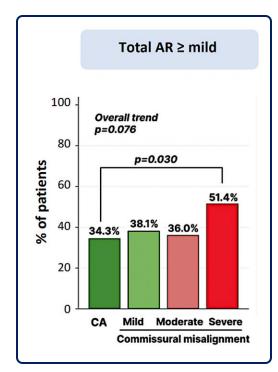


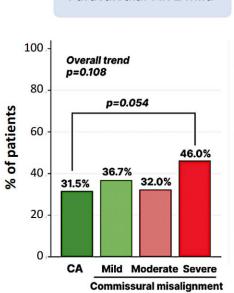


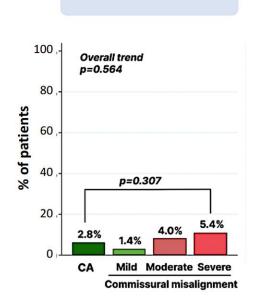




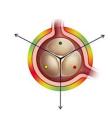
Paravalvular AR ≥ mild







Central AR ≥ mild



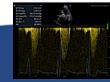




#### Multivariate analysis for the risk of severe PPM

	Univariate	9	Multivaria	P						
Variable	OR	P value	Adjusted OR	P value	1					
Aortic annulus Ø <23 mm	1.20 (0.61-2.38)	0.599			1		1 0-6			
Predilatation	1.35 (0.32-5.77)	0.685			Aligned		Reit	erence		
Postdilatation	0.25 (0.09-0.72)	0.010	0.26 (0.09-0.75)	0.012	Alighed		1			
TAV size					Γ	10	0.48	3 (0.18-1.2	7)	
23mm (reference)	-	-			Mild CMA		Ţ.			
25 mm	0.57 (0.25-1.29)	0.178					!	1.62	(0.63-4.1	15)
27 mm	0.72 (0.32-1.62)	0.423			Moderate	ŀ			(0.00	•,
TAV implant height					CMA				3.	12 (1.09-8.90)
Optimal (reference)	-	-			Severe		ļ.	<b>A</b>		
Deep	1.24 (0.47-3.27)	0.667			CMA			•		
High	n/a	0.990					I			
TAV commissural alignment					.	_	-			
Aligned (reference)	-	-				0	1	3	6	9
Mild CMA	0.48 (0.18-1.29)	0.148	0.48 (0.18-1.27)	0.140		U	•	3	U	9
Moderate CMA	1.72 (0.67-4.37)	0.257	1.62 (0.63-4.15)	0.315	L	Adjusted Odds Ratio for severe PPM				
Severe CMA	3.31 (1.17-9.34)	0.024	3.12 (1.09-8.90)	0.033	Ш					
·							10	. Sever		







#### Multivariate analysis for the risk of ≥ mild aortic regurgitation

	Univariate		Multivariate							
Variable	OR	P value	Adjusted OR	P value						
Aortic annulus Ø <23 mm	1.01 (0.74-1.38)	0.963								
Severe leaflet calcification	1.30 (0.93-1.80)	0.122					Reference			
Predilatation	1.60 (0.87-2.94)	0.130			Aligned	• ′	ererence			
Postdilatation	1.33 (0.98-1.80)	0.067	1.28 (0.94-1.74)	0.114		-				
TAV size					Mild CMA		1.19 (0	.85-1.66)	R	
23mm (reference)	-	-			mila omira	.   ~				
25 mm	1.21 (0.82-1.77)	0.339			Moderate	l h	400	(0.00.4.0	01	
27 mm	1.00 (0.67-1.49)	0.999			CMA		1.09	(0.66-1.8	2)	
TAV implant height						-		20	5 (1.05-4.	201
Optimal (reference)	-	-	•	-	Severe			2.0	J (1.0J-4.	021
Deep	0.65 (0.39-1.07)	0.091	0.69 (0.41-1.14)	0.147	CMA	ľ	•		•	
High	3.44 (1.03-11.5)	0.045	3.34 (0.99-11.3)	0.052	Lj	!				
TAV commissural alignment					T —	_				
Aligned (reference)	-	-			0	1	2	3	4	
Mild CMA	1.18 (0.84-1.64)	0.148	1.19 (0.85-1.66)	0.303	ľ		2	3	4	
Moderate CMA	1.08 (0.65-1.78)	0.257	1.09 (0.66-1.82)	0.728	<u>L</u>	Adjı	usted O	dds Rat	io	
Severe CMA	2.02 (1.03-3.95)	0.040	2.05 (1.05-4.02)	0.037	for ≥ mild AR					
			1		_					

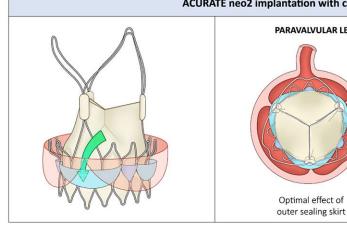


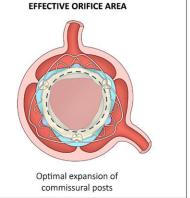




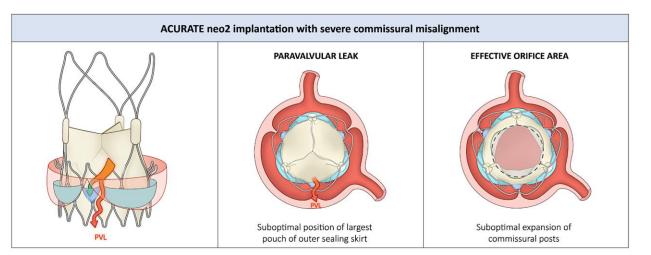








**Aligned** 

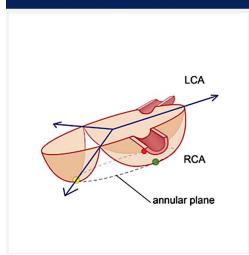


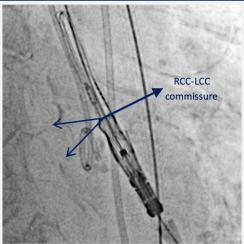
Severe CMA

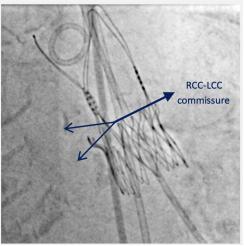


## ACURATE neo2 Commissural alignment implant technique

#### IMPLANTATION TECHNIQUE IN RCC/LCC CUSP OVERLAP VIEW – COMMISSURAL ORIENTATION

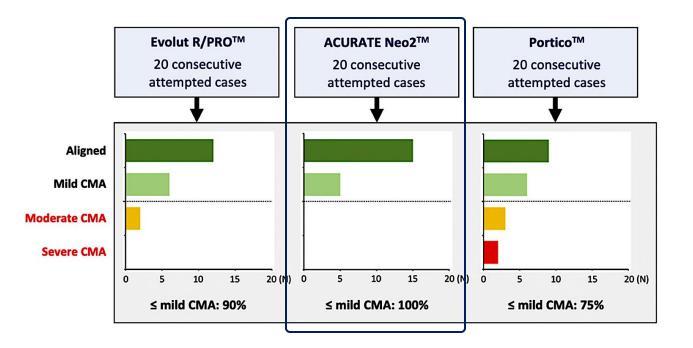


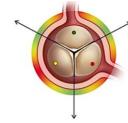






## COMALIGN study ACURATE neo2 – best-in-class TAV

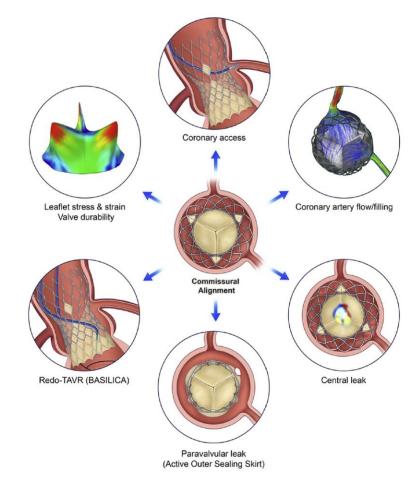












# TAVR - Impact of commissural alignment





### **COMALIGN-neo2 study**

#### Take-home messages

- ✓ Commissural alignment had no statistically-significant impact on transvalvular mean gradients and EOAs. However, severe misalignment (CMA) is associated with increased risk of severe patient-prosthesis mismatch (PPM).
- ✓ Total aortic regurgitation was significantly higher in severely misaligned patients, and this is mostly explained by a sub-optimal position of the largest pouch of the outer sealing skirt.
- ✓ **Commissural alignment is easy to obtain** when using the ACURATE neo2 platform (*best-in-class*).



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