

**ACURATE *neo***
Aortic Valve System**SELECT RBBB Registry**

Transcatheter Valve SELECTION in Patients with Right Bundle Branch Block and Impact on Pacemaker Implantations.

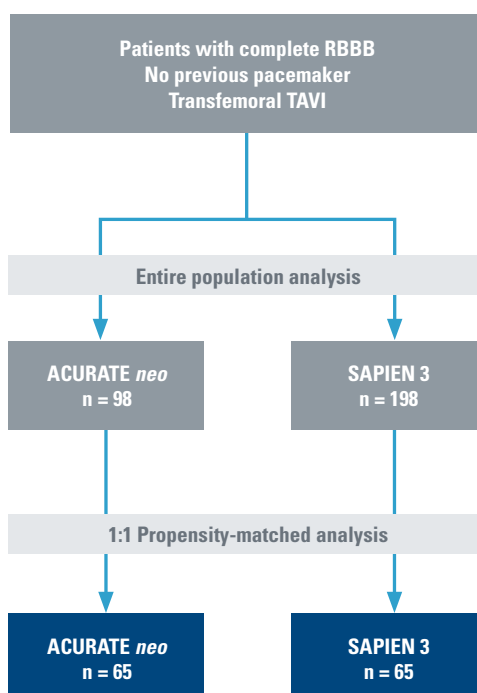
Husser O, et al. *JACC: Cardiovasc Interv.* SEPT 2019;12:1781–93.

Background

Pre-existing right bundle branch block (RBBB), which accounts for approximately 10% of TAVI recipients, has consistently shown to be the strongest patient-related predictor for new permanent pacemaker implantation (PPI) after transcatheter aortic valve implantation (TAVI) with an up to 12-fold risk increase resulting in elevated PPI rates of up to 40%. No comparison of newer-generation transcatheter heart valves (THVs) with regard to PPI in these patients exists. The aim of this study was to evaluate the impact of ACURATE *neo* versus SAPIEN 3 on PPI in patients with RBBB.

Study Design

The SELECT RBBB Multicenter Registry, conducted in 7 centers in Germany and Switzerland, evaluated the impact of ACURATE *neo* versus SAPIEN 3 on PPI in patients with pre-existing RBBB. 4,305 consecutive patients were included in the analysis, of which 302 (> 7%) had pre-existing complete RBBB with no pacemaker at baseline. Out of these patients, a total of 296 (98 ACURATE *neo*, 198 SAPIEN 3) were analyzed, including a propensity-matched population of 130 patients (65 ACURATE *neo*, 65 SAPIEN 3).

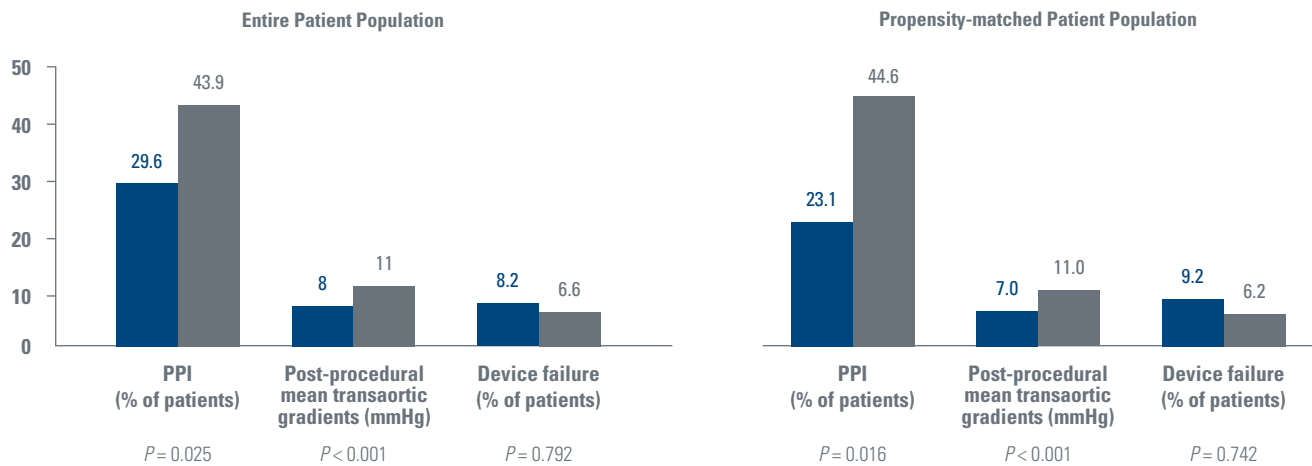


Clinical Highlights

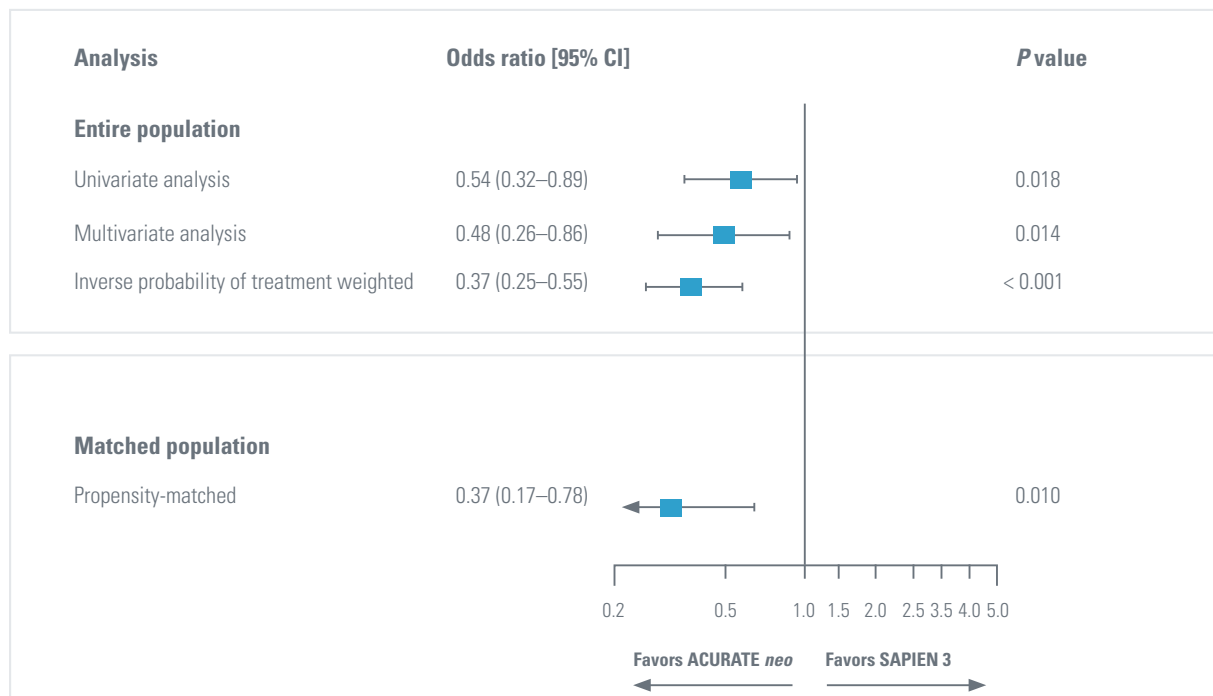
Significantly lower pacemaker rates with excellent hemodynamics were observed in ACURATE *neo* patients vs. SAPIEN 3, while device failure rates remained similar in both cohorts. Results were confirmed in both the entire population and the propensity-matched population.

Clinical Results After Multivariable Adjustment, Before Discharge

■ ACURATE *neo* ■ SAPIEN 3



Risk for Permanent Pacemaker Implantation



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