



ACURATE neo2

ACURATE *neo2* **CE-Mark** Study

Transcatheter Aortic Valve Implantation for Severe Aortic Valve Stenosis with the ACURATE *neo2* Valve System: 30-day Safety and Performance Outcomes

Möllmann H; Presented PCRLV 2018, London, September 10, 2018

Transcatheter Aortic Valve Replacement with the ACURATE *neo2* Valve System: 1-Year Clinical and Hemodynamic Outcomes Möllmann H; Presented TVT 2019, Chicago, June 13, 2019

Study Design

Prospective, single-arm, multicenter study of 120 patients at 9 European sites evaluating the safety and performance of the ACURATE *neo2* Aortic Valve System (device in study named "ACURATE *neo* AS").

Primary endpoint was all-cause mortality at 30 days; key secondary endpoints include VARC-2 clinical events at discharge, 30 days, and 1 year as well as hemodynamic function and aortic regurgitation. Independent assessment of clinical data including core-laboratory analysis of echocardiographic data.

Procedural Characteristics

Procedural efficiency demonstrated with high rate of correct valve positioning (98.3%), procedural success (97.5%), and short device usage time (3.9 min) with no incidence of coronary occlusion.

Procedural Characteristics	
Correct positioning of a single valve in the proper location	98.3%
Procedural success*	97.5%
Peri-procedural MI (≤ 72h)	0.0%
Device usage time**	3.9 ± 3.5 min

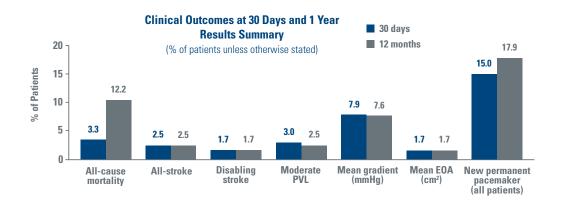
^{*} In 2 patients, valve-in-valve implantation of a non-study valve was required (valve embolization, n=1; valve dislodgement/migration, n=1); In 1 patient, post-dilatation resulted in ventricular septal perforation and conversion to open-heart surgery

^{**} Time from femoral insertion to withdrawal of delivery system

Clinical Highlights

Low complication rates, in line with other third-generation TAVI systems.

Single-digit transvalvular gradients and large EOAs demonstrated at discharge and further improved at 30 days and 1 year. Most pacemaker recipients (56%) had conduction system disturbances already at baseline.



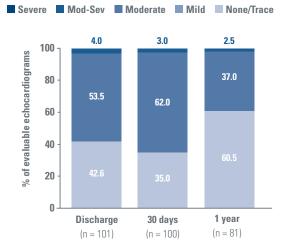
Low PVL rates and excellent hemodynamic performance.

Core lab adjudicated PVL rates are lower with ACURATE nee2 than previously reported with ACURATE nee

- 97% of patients ≤ mild PVL, 3% of patients had moderate, and no PVL more than moderate was observed at 30 days
- Results confirmed at 1 year with 97.5% of patients ≤ mild PVL (60.5% none/trace, 37% mild) and only 2.5% of patients with moderate PVL;
 no patients with severe PVL

Paravalvular Leakage (PVL)

at 7-day/discharge, 30 days, and 1 year



Hemodynamic Performance

at 7-day/discharge, 30 days, and 1 year (mmHg/cm²)

