

# Partner: Three-Year Outcomes after Transcatheter or Surgical Aortic Valve Replacement in High-Risk Patients with Severe Aortic Stenosis

**Background:** The PARTNER trial compared replacement of the aortic valve in high-risk patients using a transcatheter valve to surgical aortic valve replacement alone (SAVR). Although these patients had a reduction in 1-year mortality, transcatheter aortic valve replacement (TAVR) in this trial resulted in more peri-procedural strokes and paravalvular regurgitation.

**Questions to Answer with Longer f/u:** additional benefits of TAVR vs. SAVR in these patients.

<b>Methods</b>	N=699; severe AS – high surgery risk patients F/U ≥ 3 years Randomized: TAVR vs. SAVR
<b>Results</b>	Mortality - all cause TAVR vs. SAVR: 44.2 % vs. 44.8% Mortality - cardiovascular TAVR vs. SAVR: 30.1% vs. 30.2% Stroke risk TAVR vs. SAVR: 8.2% vs. 9.3% Para-valvular regurgitation: rates higher with TAVR; higher mortality, even mild regurgitation (p<0.001)
<b>Take Away</b>	Mortality was similar for TAVR and SAVR, and stroke risk after 30 days did not increase. Para-valvular leaking remains a mortality issue at 3 years.