



# TAVI in valvola aortica bicuspide

# Presentazione clinica

C.E. anni 81

**FRCV:** iperteso

**Anamnesi remota:** ipertrofia prostatica

## **Storia cardiologica**

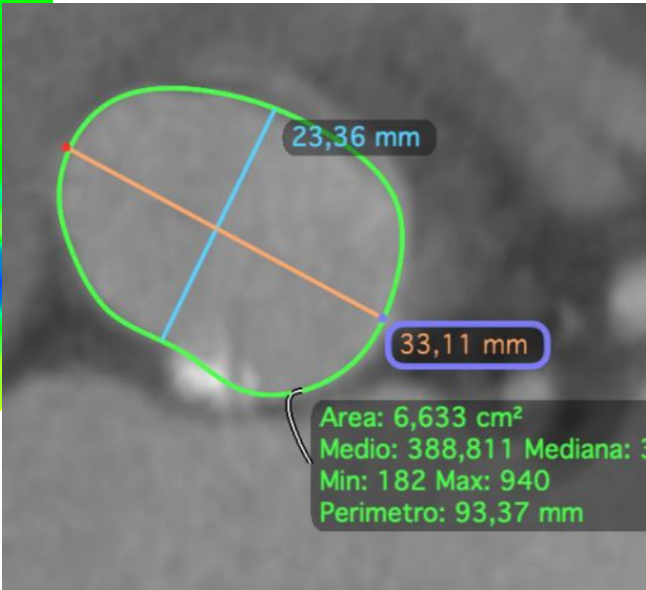
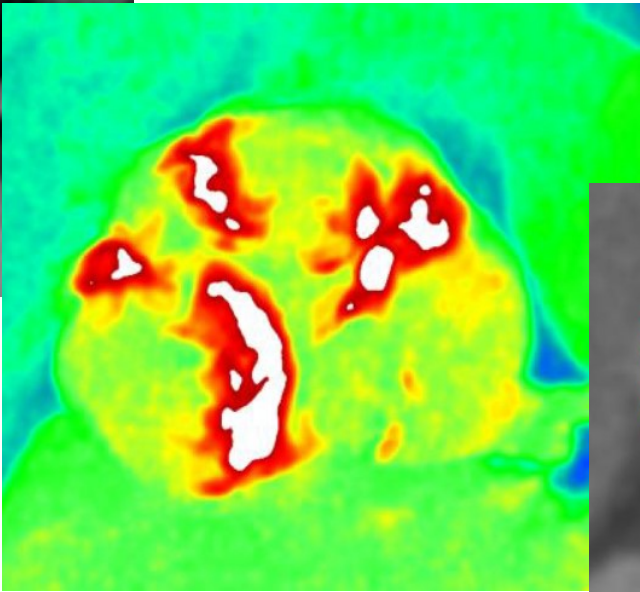
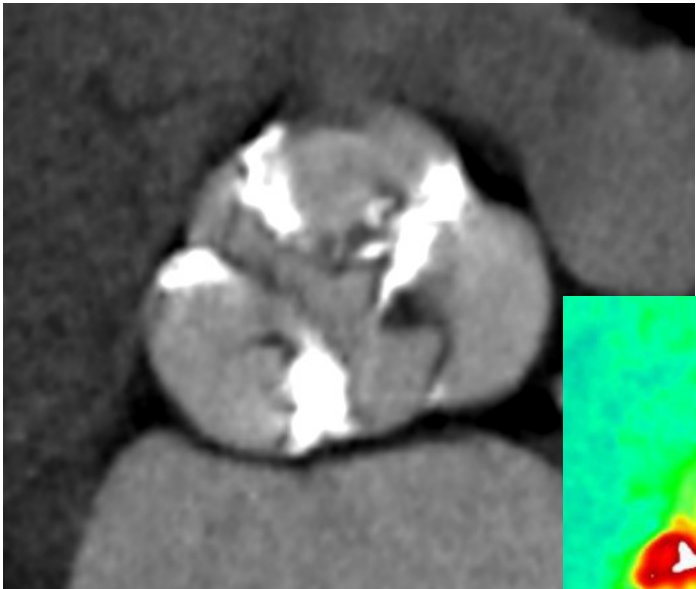
Nota FA parossistica in warfarin

14/09/2022 sincope durante sforzo, trauma cranico

**ECG:** BAV I grado; nessuna alterazione del ritmo durante il monitoraggio telemetrico


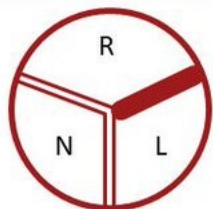
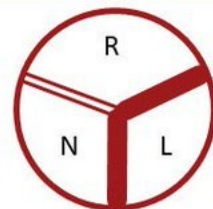





**Ecocardiogramma:** stenosi aortica severa; area funzionale 0.9/1 cmq. FE 50%

# Analisi TC



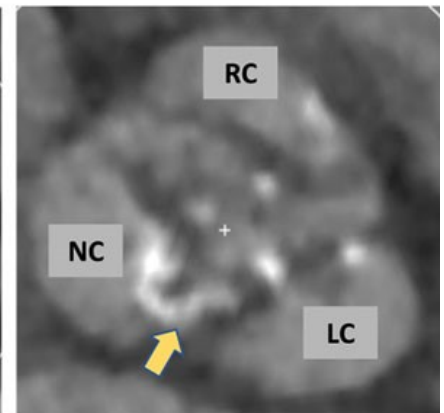
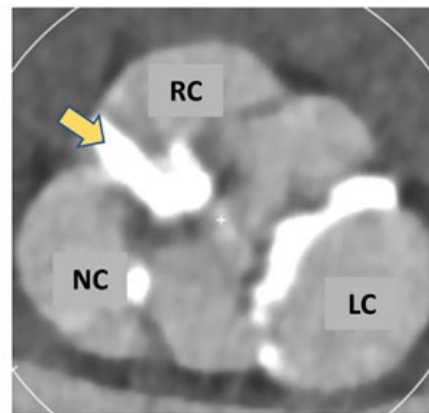
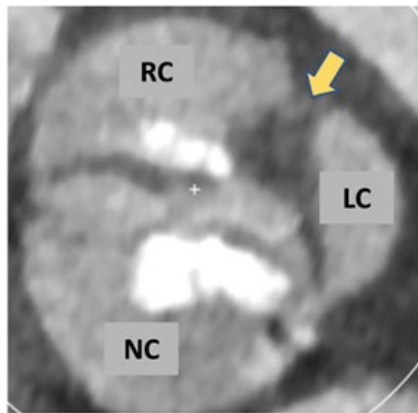
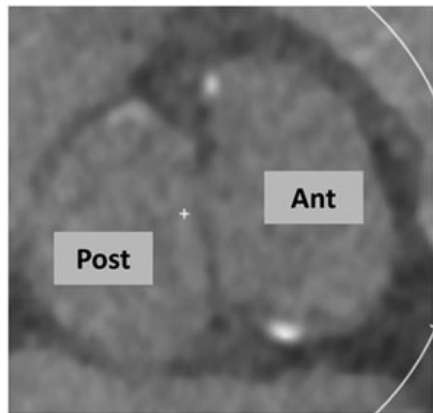
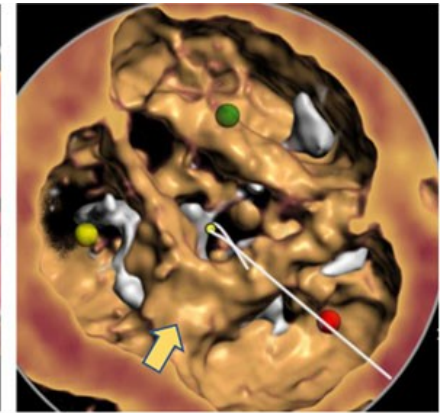
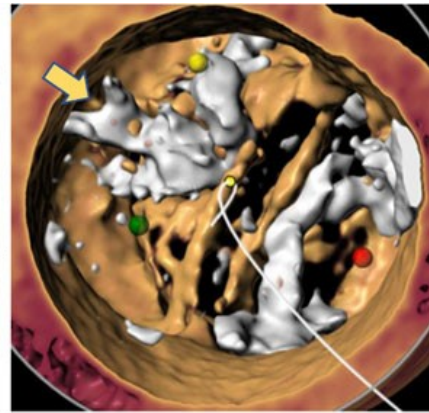
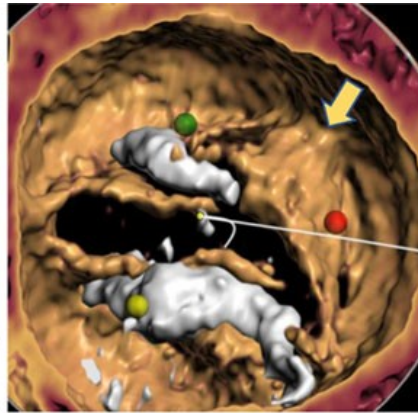
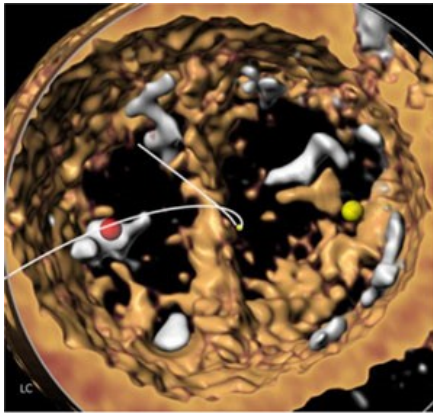
# Bicuspid valve classification

## Classification of BAV

Type 0 (0 raphe, true BAV)	Type 1 (1 raphe)	Type 2 (2 raphe)
 (6%)	 (89%)	 (5%)
(4%)  lat	Type 1a (71%)  R-L	(functionally unicuspid)
(2%)  AP	Type 1b (15%)  R-N	
	Type 1c (3%)  L-N	

Adapted from Sievers HH, Schmidtke C. J Thorac Cardiovasc Surg 2007; 133:1226-1233

# Bicuspid valve classification

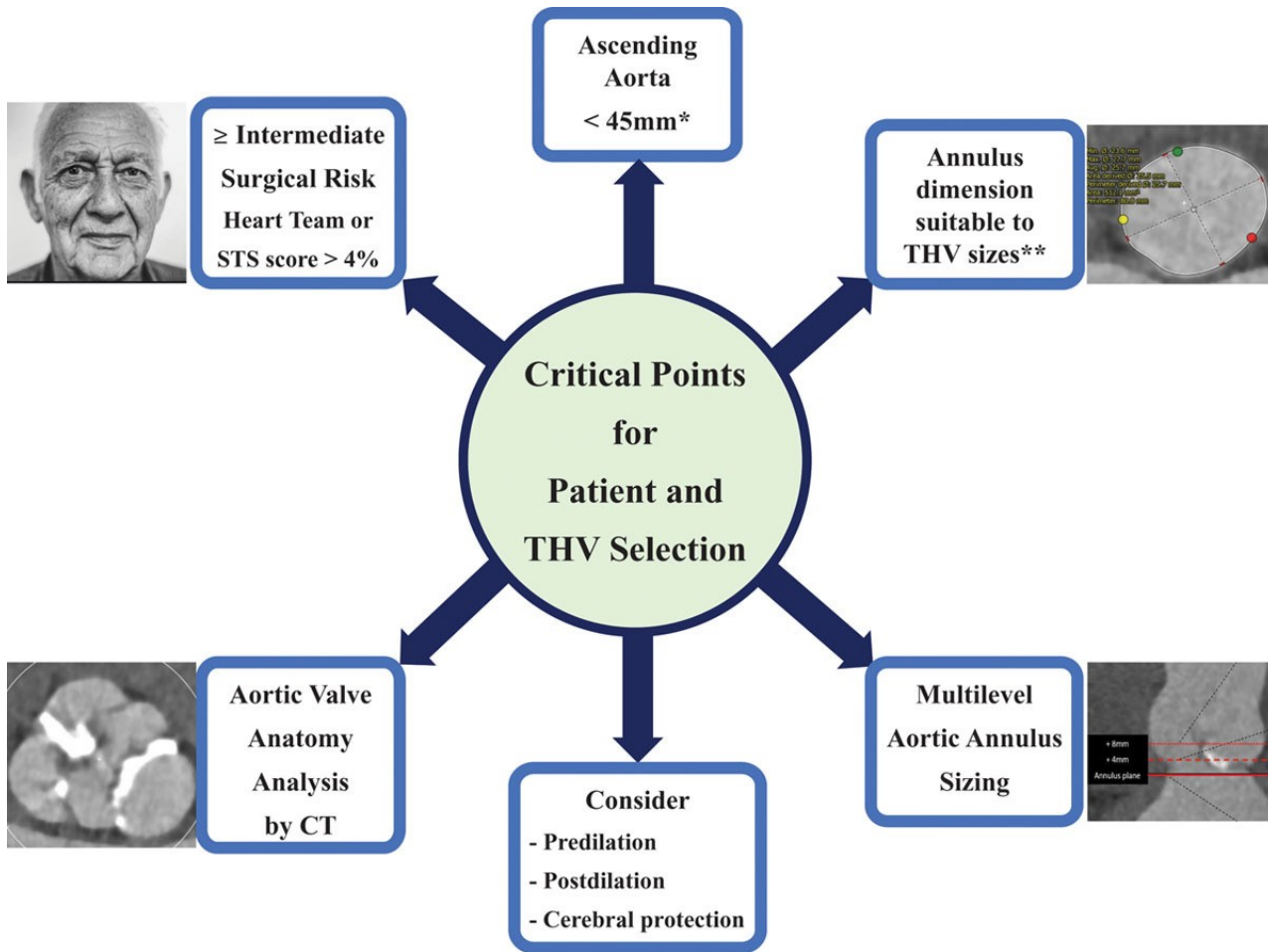


Bicommissural non Raphe-type coronary cusp fusion or type 0 antero-posterior Sievers

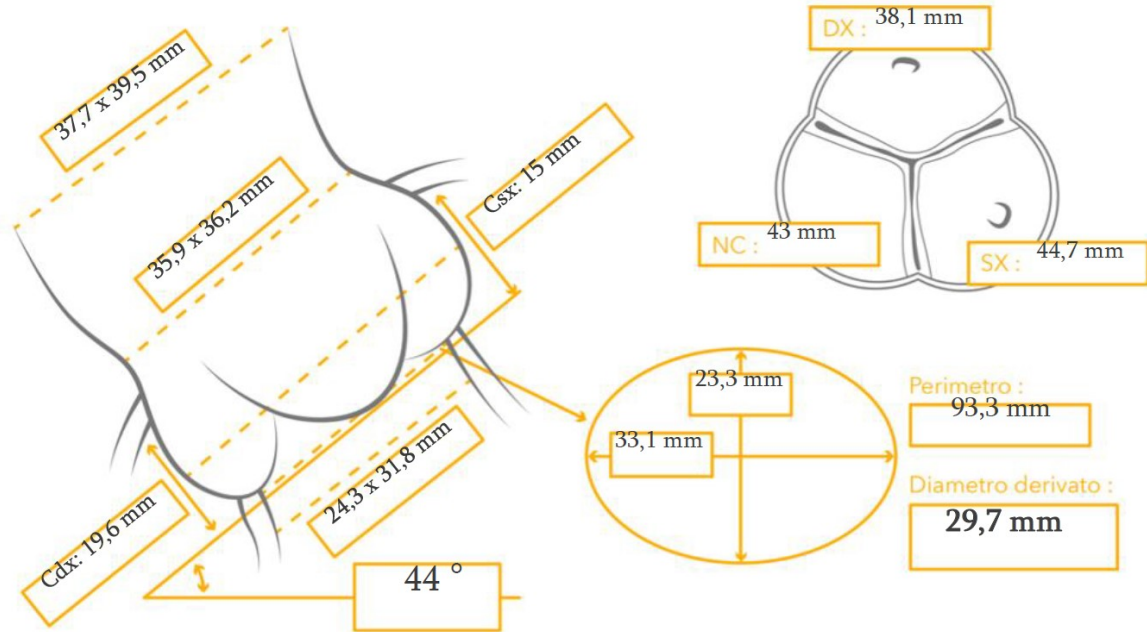
Bicommissural L-R non calcified raphe-type cusp fusion or type 1 L-R Sievers

Bicommissural R-N calcified raphe-type cusp fusion or type 1 R-N Sievers

Tricommissural mixed cusp fusion or type 1 N-L Sievers with incomplete raphe



# Analisi TC



## Proiezione d'impianto

COT

RAO 14°  
CAU 45°

3-CUSP

LAO 9°  
CAU 18°

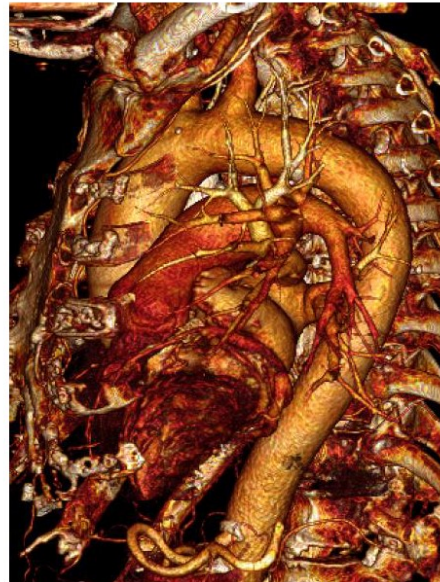
CoreValve Evolut PRO+ 34 mm

## Altezza seni

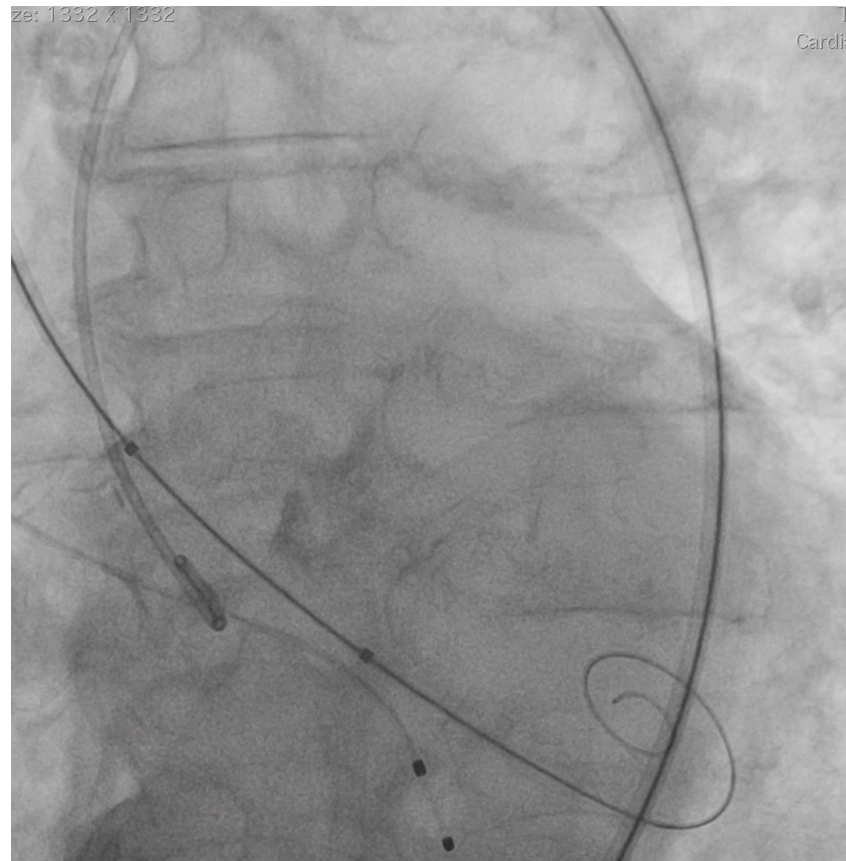
DX: # mm    SX: # mm    NC: # mm

9,6 x 10,3 mm

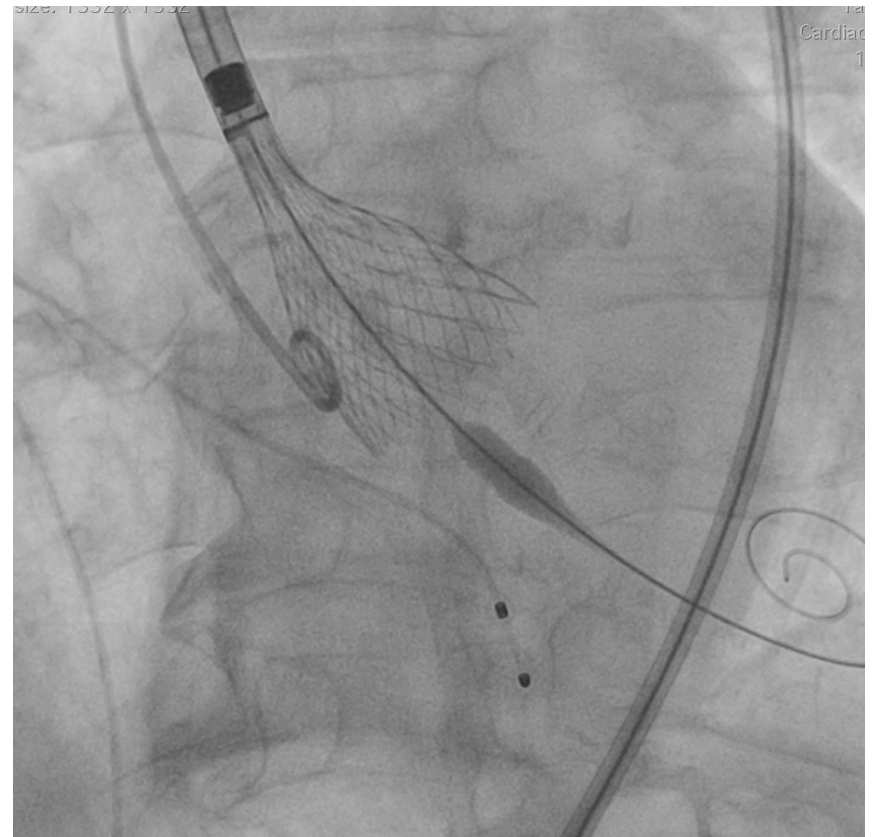
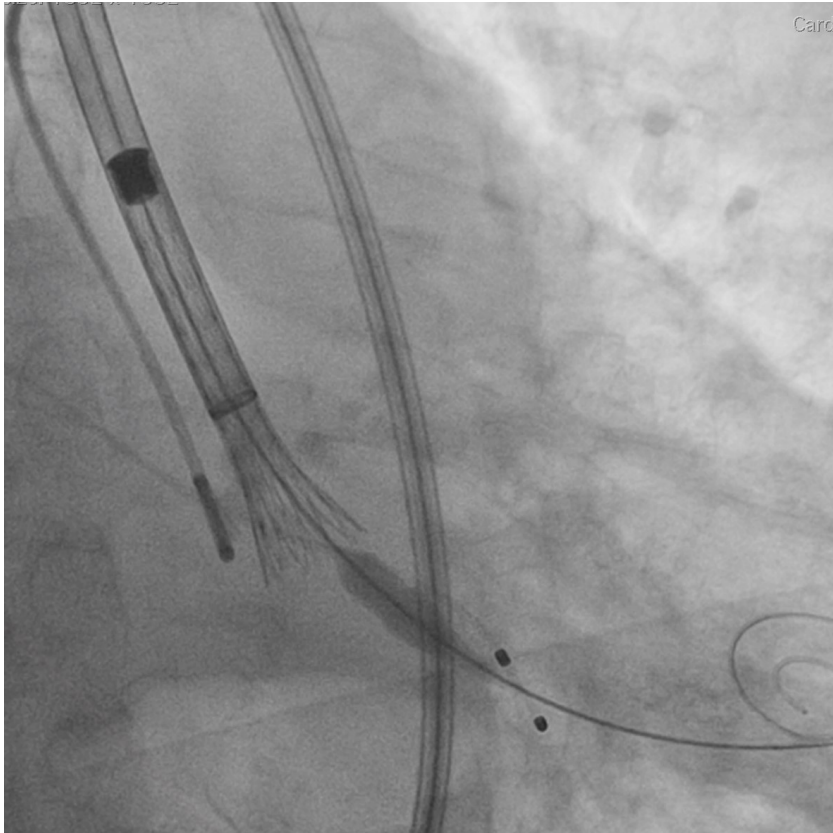
9,7 x 11 mm



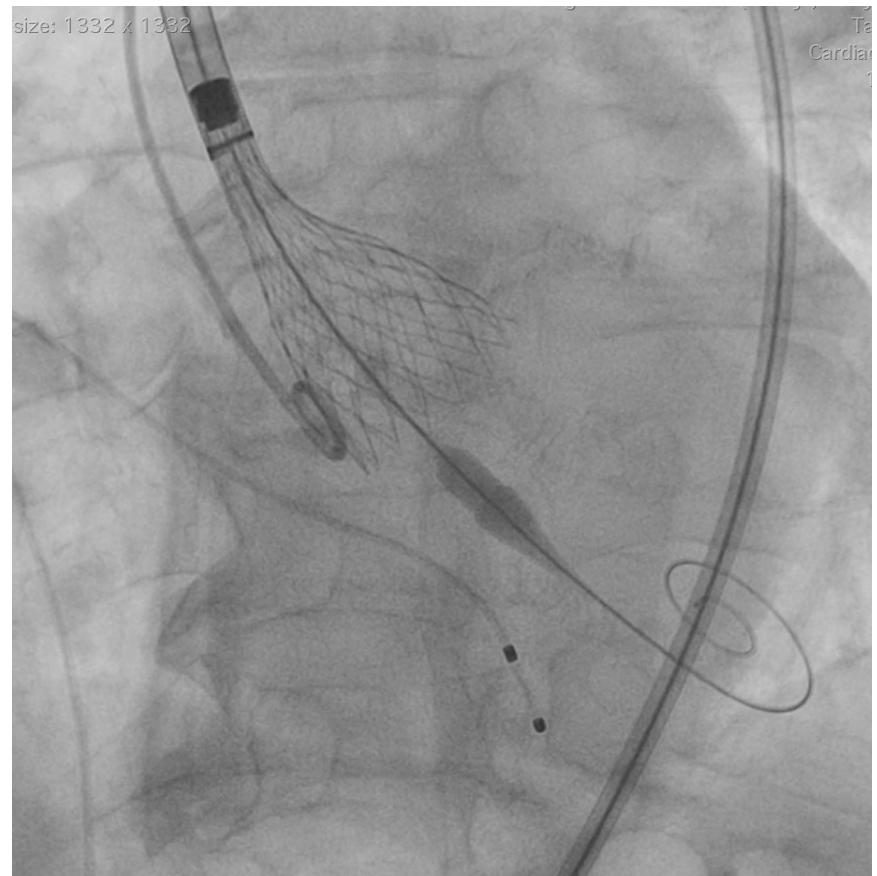
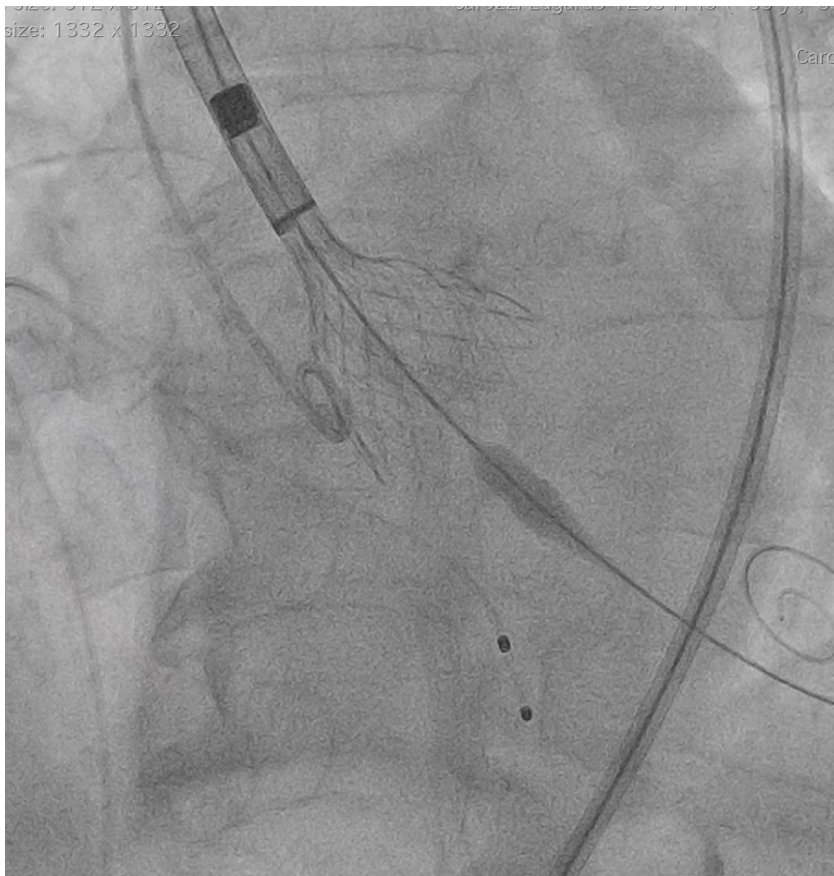
# Procedura emodinamica



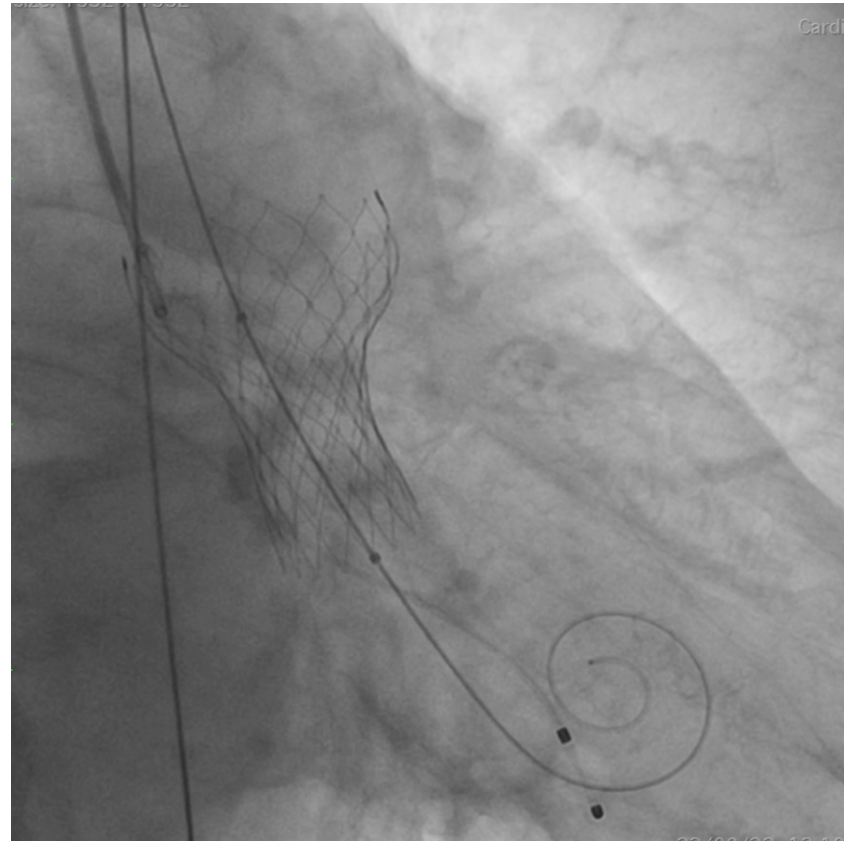
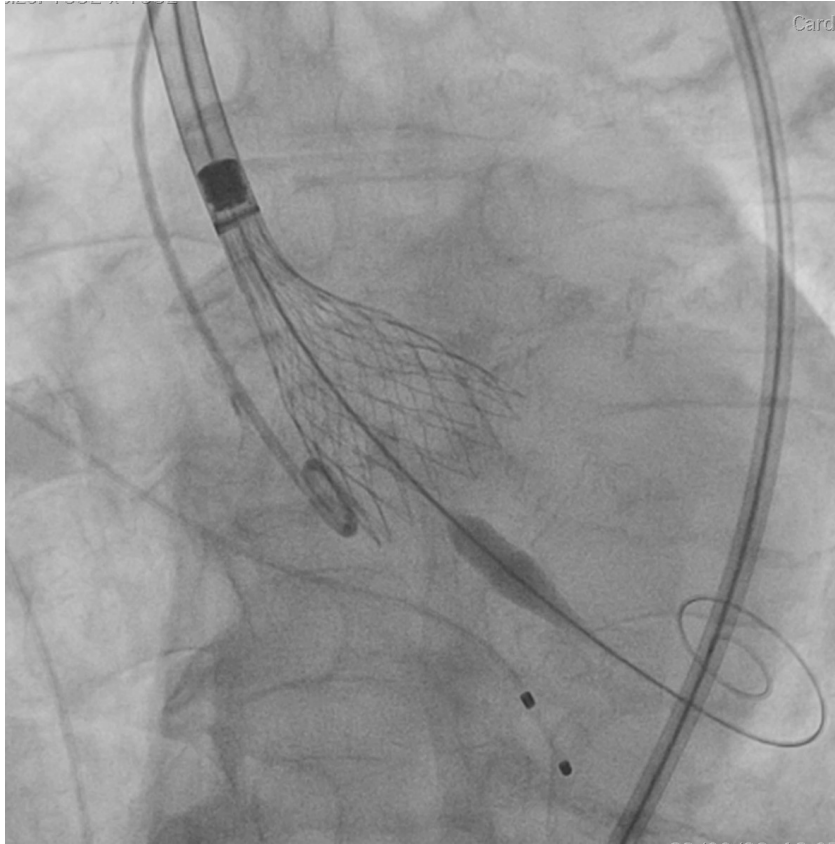
# Procedura emodinamica



# Procedura emodinamica



# Procedura emodinamica



# Risultato finale



# Decorso post-TAVI

22/09/2022 comparsa di BBSn → studio elettrofisiologico che ha mostrato HV 50 ms (V.n. <70 ms) → loop recorder

26/09/ 2022 Ecocardiogramma: Protesi biologica aortica percutanea normofunzionante, G max 14 mmHg. FE 60%. PAPs 28 mmHg

28/09/2022 dimesso