



# Successful management of TricValve pop out

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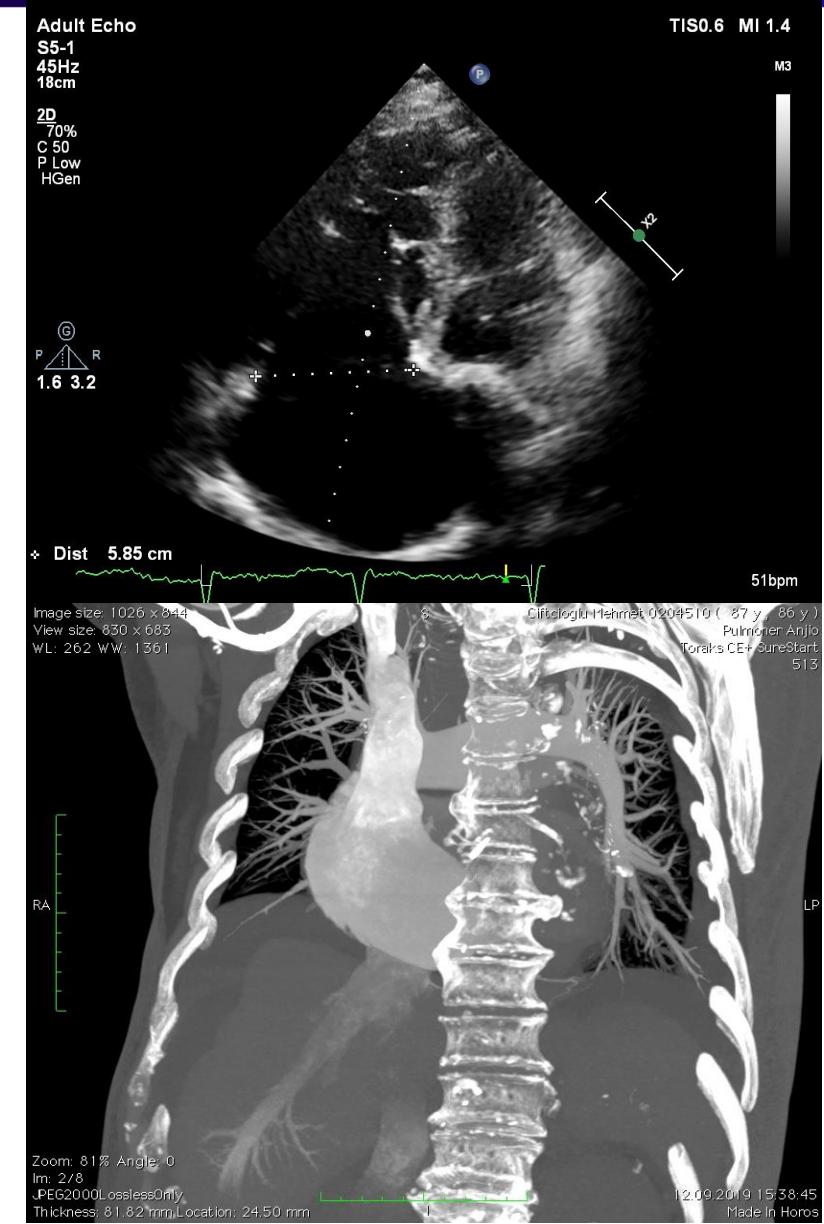
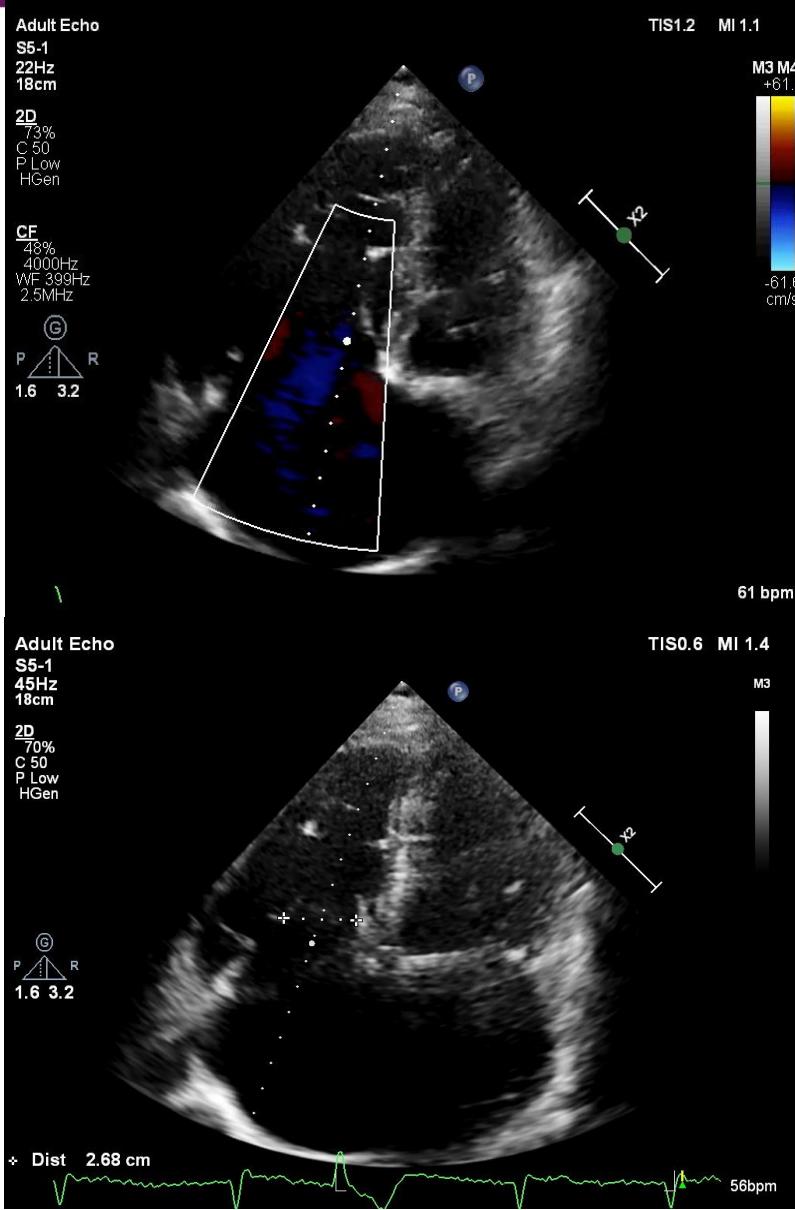
(b) Department of Cardiology, Istanbul University Cerrahpaşa, Institute of Cardiology, Istanbul, Turkey

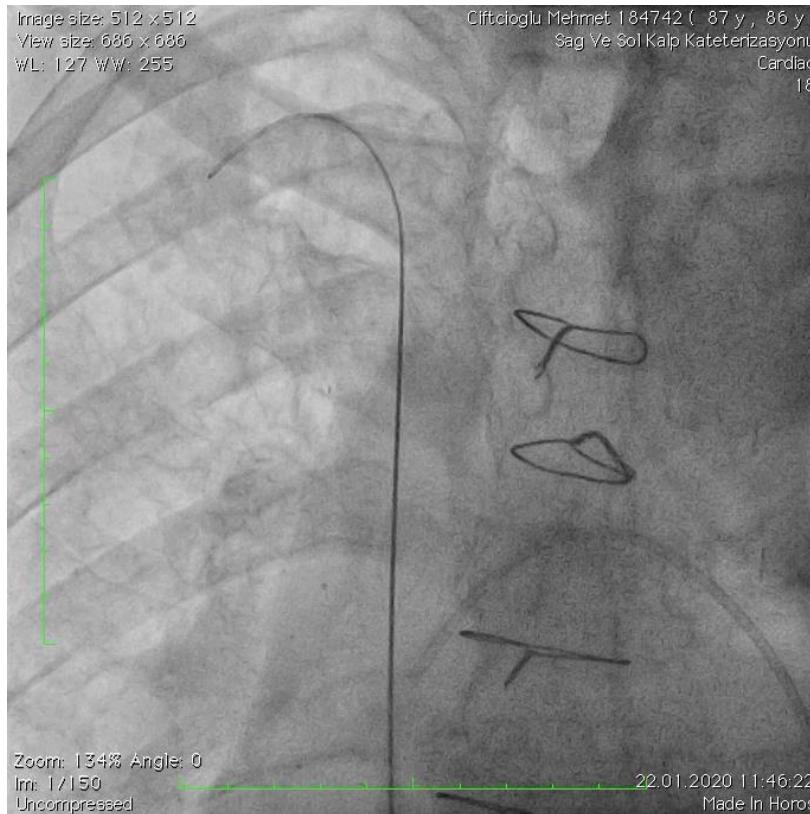
(c) Department of Cardiology, Memorial Bahçelievler Hospital, Istanbul, Turkey

- Tricuspid valve disease has been a “neglected valvulopathy” for many years. In patients with left heart pathologies, chronic pressure overload on right ventricle causes functional TR, and is associated with poor prognosis<sup>1</sup>.
- Transcatheter tricuspid valve therapy (TTVT) has emerged as a novel strategy for patients with high or prohibitive surgical risk.

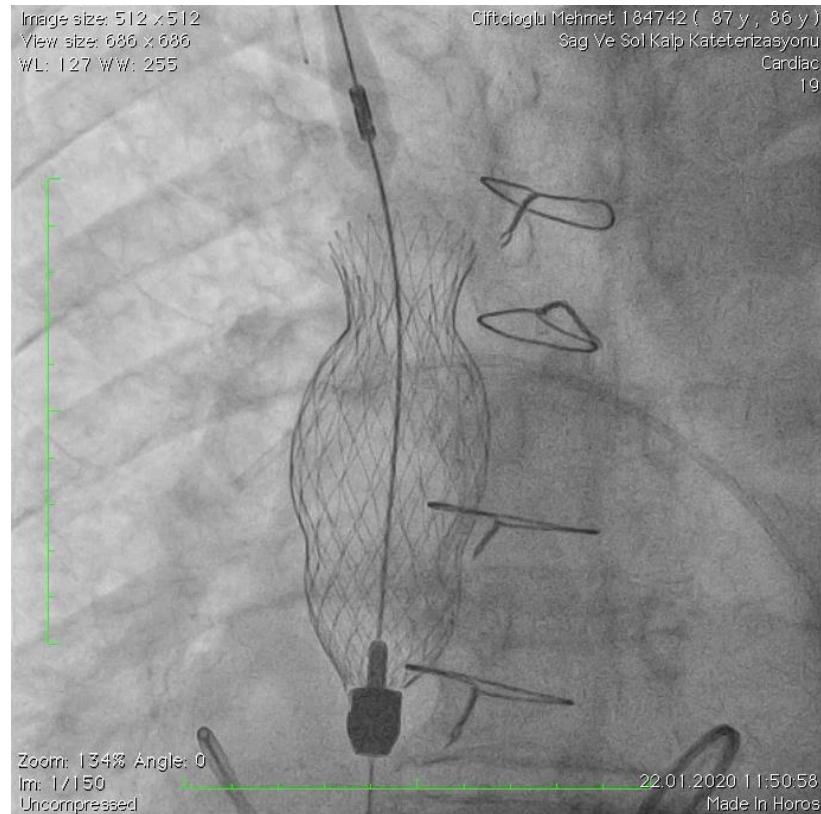
<sup>1</sup> Nath J, Foster E, Heidenreich PA. Impact of tricuspid regurgitation on long-term survival. J Am Coll Cardiol. 2004 Feb 4;43(3):405-9. doi: 10.1016/j.jacc.2003.09.036. PMID: 15013122.

- A 86-year old patient presented with dyspnea (NYHA Class III-IV) and ascites, resistant to diuretics.
- History of AVR+CABG 18 years
- Persistent atrial fibrillation, chronic renal failure, COPD
- TTE revealed severe functional TR, enlarged right ventricle (RV) with preserved RV functions, moderate mitral regurgitation, normal LVEF (%60) and normal functioning prosthetic aortic valve.
- No history of device therapy
- Patient was considered high risk for surgery, heart team decided percutaneous intervention (EUROSCORE %10.89)





Alignment of superior caval valve, catheter positioned in pulmonary artery



Successful expansion of superior caval valve

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View size: 686 x 686  
WL: 127 WW: 255

Ciftcioglu Mehmet 184742 ( 87 y , 86 y )  
Sag Ve Sol Kalp Kateterizasyonu  
Cardiac  
28

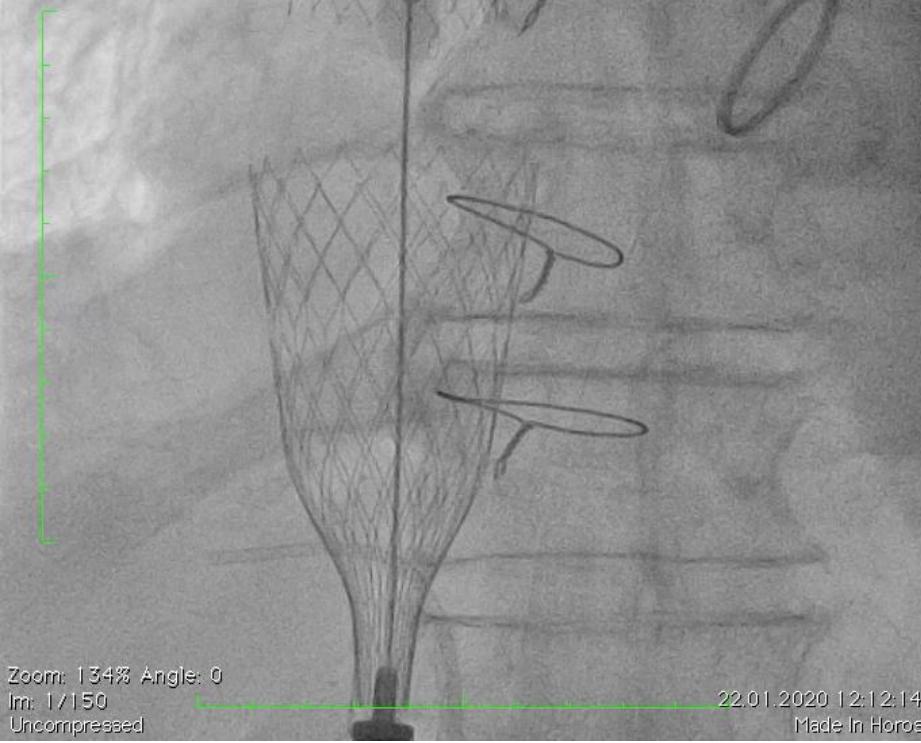


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Ciftcioglu Mehmet 184742 ( 87 y , 86 y )  
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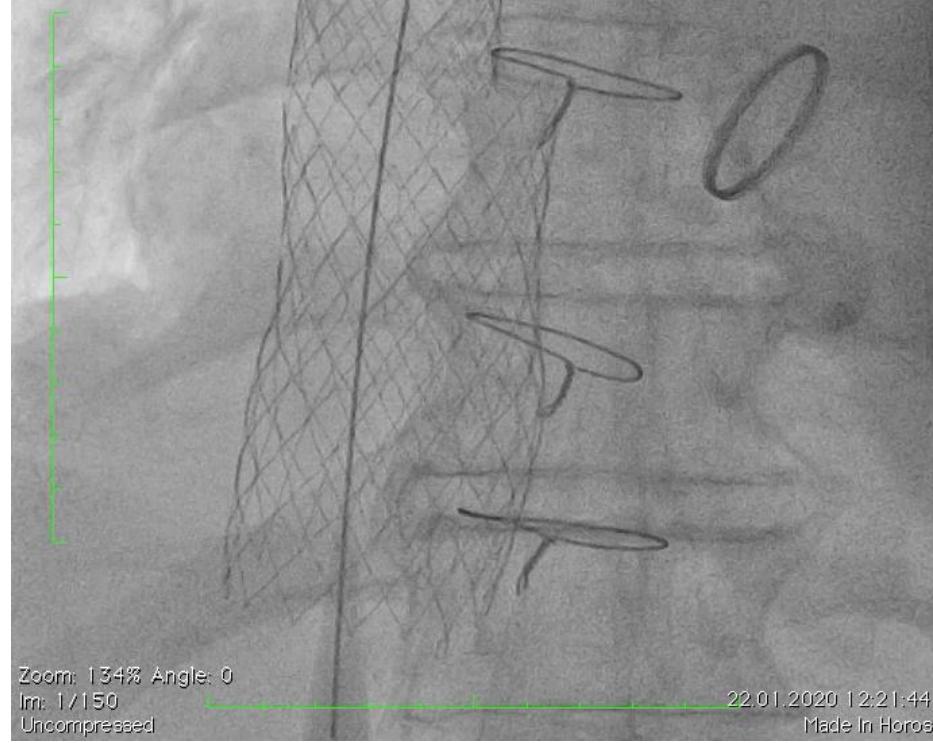


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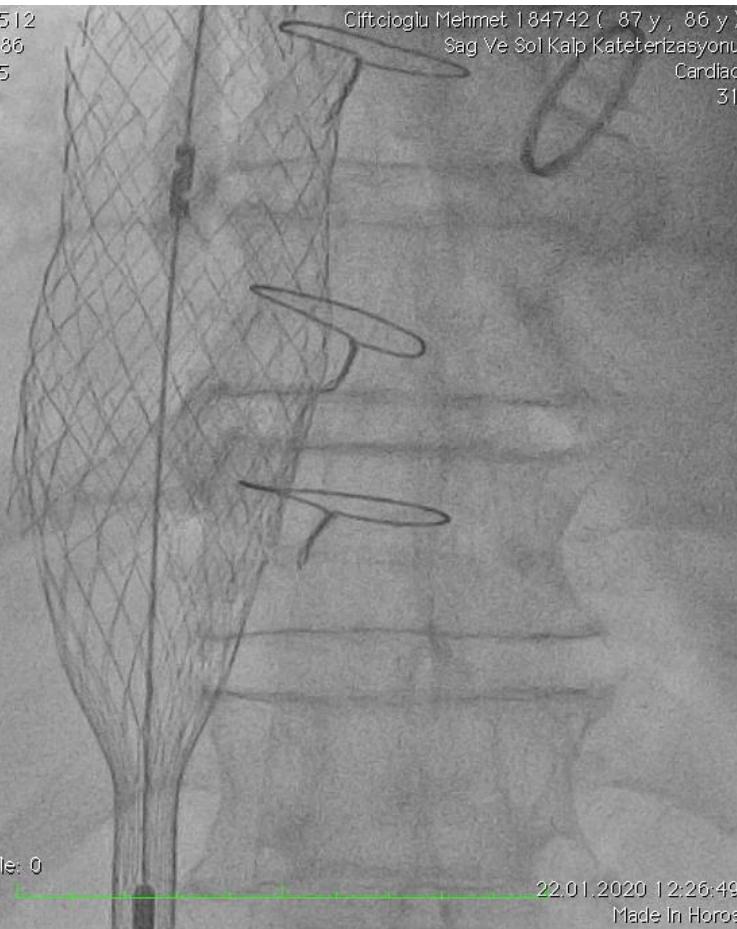
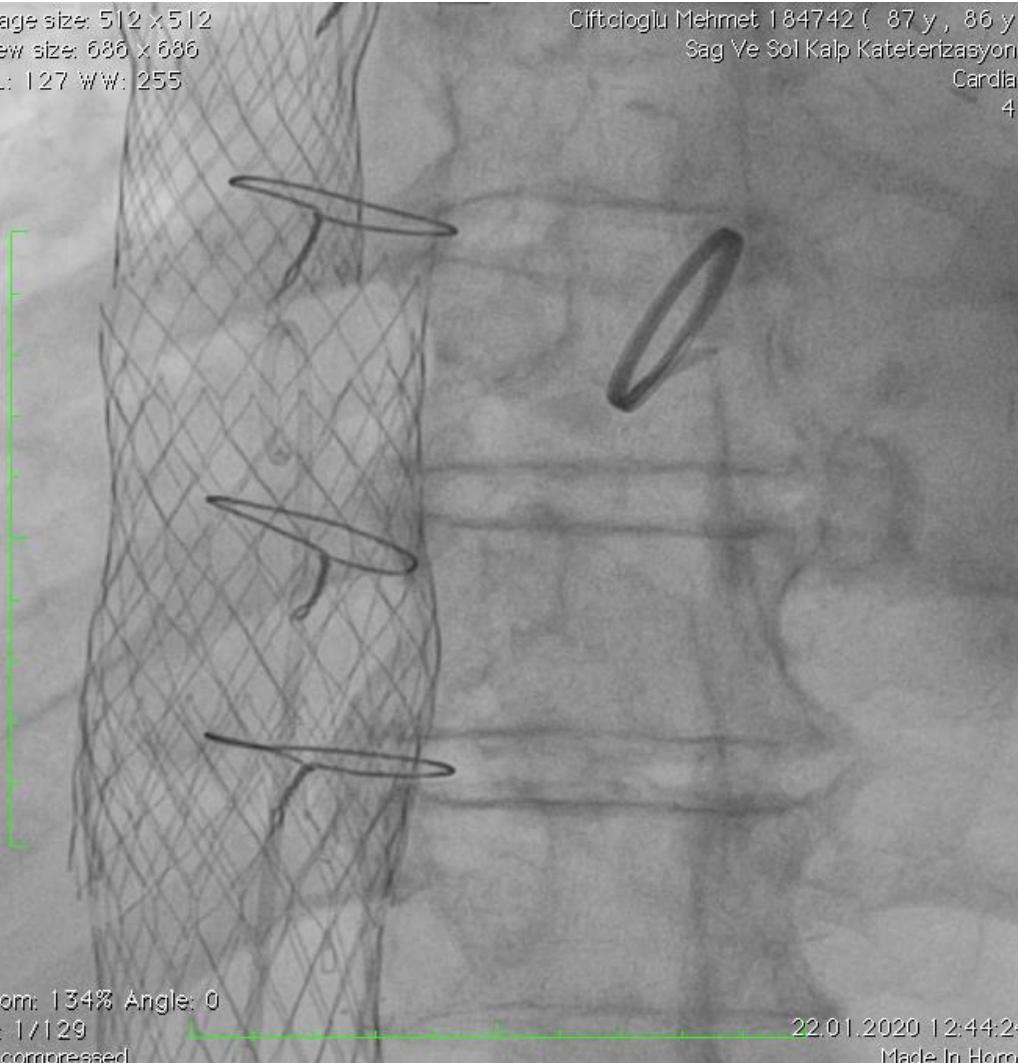


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Cardiac  
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- Due to high surgical risk, heart team decided watchful waiting for the migrated valve.

- 6 month follow-up;

-Functional status improved to NYHA II

-6MWT from 145 to 225 meters

-TR remained severe

Despite the migrated valve, no hemodynamical or clinical worsening was observed. Patient's clinical symptoms were significantly improved.

Patient follow-up was uneventful for 6 months.