# Severe Aortic Stenosis **Diagnosis and Treatment:** A General Cardiologist's Guide

Understanding the gender-specific differences in the pathophysiology and diagnosis of aortic stenosis (AS) is crucial for improving female patient outcomes. The presentation and progression of AS can vary significantly between men and women, necessitating tailored diagnostic and treatment approaches. This guide outlines diagnostic considerations for referring and diagnosing female patients for either surgical aortic valve replacement (SAVR) or transcather aortic valve implantation (TAVI).

### Table 1. Epidemiological, pathophysiological, and diagnostic peculiarities in female patients affected by AS<sup>1</sup>



Figure 1. Management of patients with severe AS<sup>2</sup>

# Pre-procedural screening



Transthoracic echocardiography Multidetector computed tomography (Electrocardiogram gated-acquisition, 3D-reconstruction)

## **Device selection**

Small anatomic root Low coronary ostia Small sheath-to-femoral artery ratio



# Peri-procedural considerations



Risk of vascular complications Risk of left ventricular perforation Risk of acute coronary occlusion/ Aortic annular rupture Lifetime management strategy

Post-procedural management Short hospital stay



Figure 2. Key components for optimal patient outcomes: early and accurate diagnosis, timely referrals, interdisciplinary collaboration, and patient-centered care<sup>1</sup>

### Summary

**Early and accurate diagnosis:** Utilise sex-specific thresholds and consider symptomatic differences in women to ensure accurate diagnosis.

**Timely referrals:** Avoid delays in referring patients to heart specialists when severe AS is suspected, particularly in high-risk groups.

**Interdisciplinary collaboration:** Engage with Heart Teams early in the diagnosis process to facilitate comprehensive care planning.

**Patient-centred care:** Discuss all available treatment options, including SAVR and TAVI, with a focus on patient preferences and risk profiles.

### References

- Masiero G, Paradies V, Franzone A, et al. Sex-specific considerations in degenerative aortic stenosis for female-tailored transfemoral aortic valve implantation management. J Am Heart Assoc. 2022; 11: e025944.
- 2. Vahanian A, Beyersdorf F, Praz F, et al. 2021 ESC/ EACTS guidelines for the management of valvular heart disease. *Eur Heart J*. 2022; **43:** 561-632.



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Timely referral is crucial – guide your female patients with severe aortic stenosis to a Heart Team evaluation.

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