



There is more to life for people over the age of 80 with Aortic Stenosis

Watching and waiting isn't winning.

There is an urgent need to treat patients over the age of 80 with AS*. Evidence shows us that conservative management of patients over the age of 80 can lead to poor prognosis.¹ Recently published data reveals that increased wait times for treatment are associated with increased mortality and hospitalisations.³ However, we can still see instances where the decision not to intervene is linked to a patient's chronological age.⁴



A patient's physiological age is a much better indicator of suitability for SAVR or TAVI and the expected clinical and QoL outcomes than chronological age.⁵

ESC guidelines support your early decision to treat AS



The ESC updated AS treatment guidelines to reflect improved risk assessment models that use a comorbidity-focused approach or an age cutoff.⁶

Don't let age be a barrier to AS treatment

≥75

ESC guidelines recommend TF-TAVI as the preferred mode of intervention in patients with severe AS ≥75 years of age⁶

AS, Aortic Stenosis; ESC, European Society of Cardiology; QoL, Quality of Life; SAVR, Surgical Aortic Valve Replacement; TAVI, Transcatheter Aortic Valve Replacement; TF-TAVI, Transfemoral Transcatheter Aortic Valve Replacement.



AVR treatment is the right choice for your AS patients over the age of 80

For today...

For many elderly patients, improved survival is not the primary goal of treatment.⁷ TAVI provides a clinically important improvement in the perceived physical burden of AS and can improve physical health and quality of life in the short term.⁸

Patient reasons for choosing TAVI⁷



Maintaining independence

30%



Ability to do an activity

48%

...and tomorrow

Similarly favourable survival outcomes were achieved in the elderly population as in younger patients, even with the presence of comorbid conditions.⁹ Despite high predicted operative risk in this age group, outcomes were excellent with low operative stroke (2.2%) and death (4.7%) rates (observed-to-expected ratio 0.55).¹⁰



Refer and treat AS patients over 80

TAVI has been recognised as an effective and safe treatment option that improves QoL in elderly patients with comparable outcomes to younger patients in life expectancy.^{11,12}

AS, Aortic Stenosis; AVR, Aortic Valve Replacement; QoL, Quality of Life; TAVI, Transcatheter Aortic Valve Replacement.

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