

Clinical and Echocardiographic Outcomes at 30 Days with the SAPIEN 3 TAVR System in Inoperable, High-Risk and Intermediate-Risk AS Patients

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on behalf of The PARTNER Trial Investigators

ACC 2015 | San Diego | March 15, 2015



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Disclosure Statement of Financial Interest

Susheel Kodali, MD

Within the past 12 months, I or my spouse/partner have had a financial interest/arrangement or affiliation with the organization(s) listed below.

Affiliation/Financial Relationship

- Grant/Research Support
- Steering Committee
- SAB (Equity)
- Honoraria

Company

- Edwards Lifesciences, Medtronic, Boston Scientific, Claret Medical
- Edwards Lifesciences, Claret Medical, Meril
- Thubrikar Aortic Valve, Inc
- St. Jude Medical, Claret Medical



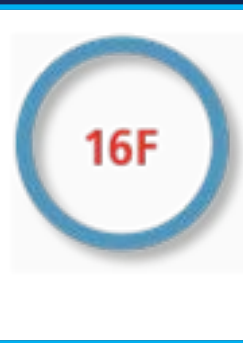
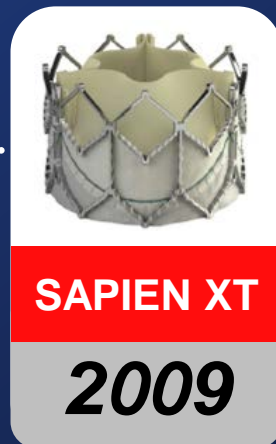
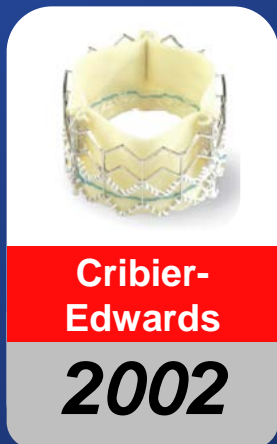
Background



- Based on randomized trials with first generation devices, transcatheter aortic valve replacement (TAVR) has been incorporated into the treatment strategy for high-risk and inoperable patients with severe AS.
- Procedural complications remain a concern with TAVR, including stroke, vascular complications, paravalvular leak (PVL) and conduction disturbances.
- Addressing these limitations will support TAVR use in lower risk populations.



Evolution of the Edwards Balloon-Expandable Transcatheter Valves

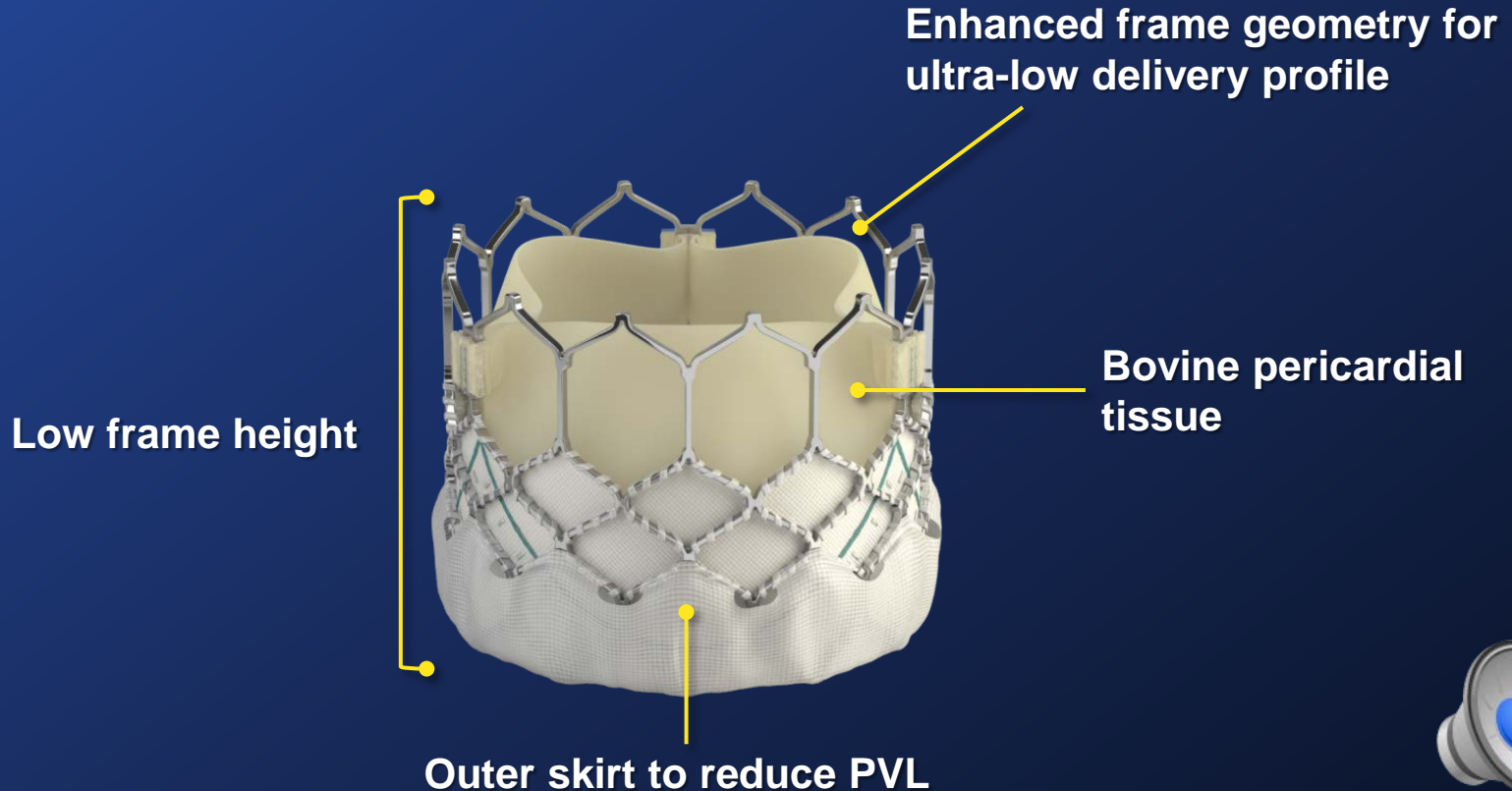


* Sheath compatibility for a 23 mm valve



SAPIEN 3 Transcatheter Heart Valve

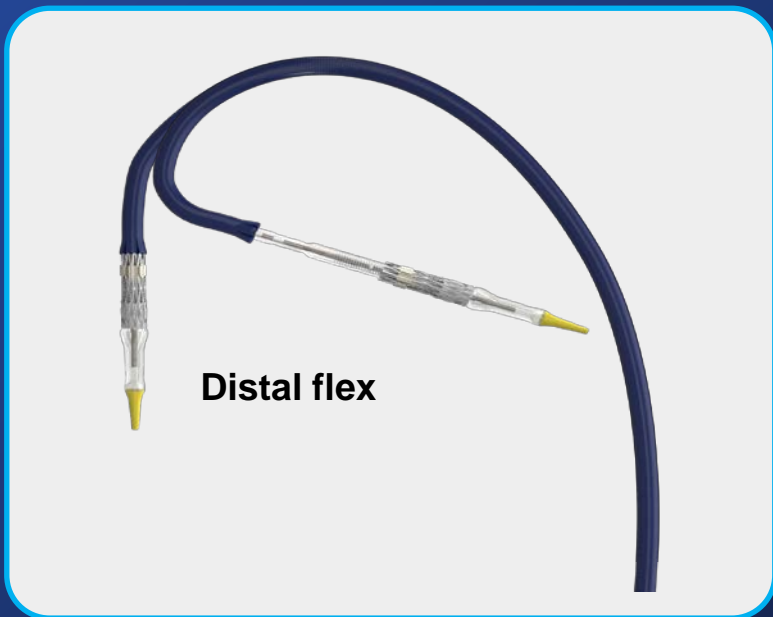
Distinguishing Features



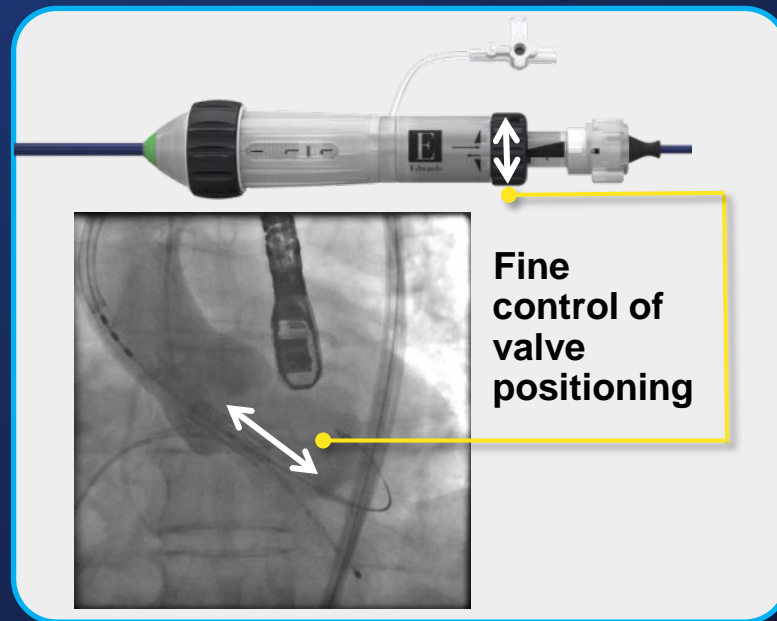
SAPIEN 3 Commander Delivery System Distinguishing Features



- Improved coaxial alignment



- Accurate positioning



SAPIEN 3 Valve Size	20 mm	23 mm	26 mm	29 mm
Expandable Sheath	14F	14F	14F	16F
Minimum Access Vessel Diameter	5.5 mm	5.5 mm	5.5 mm	6.0 mm



The PARTNER II S3 Trial

Purpose



To evaluate the safety and efficacy of the SAPIEN 3 transcatheter heart valve system at 30 days in inoperable, high-risk, and intermediate-risk patients.

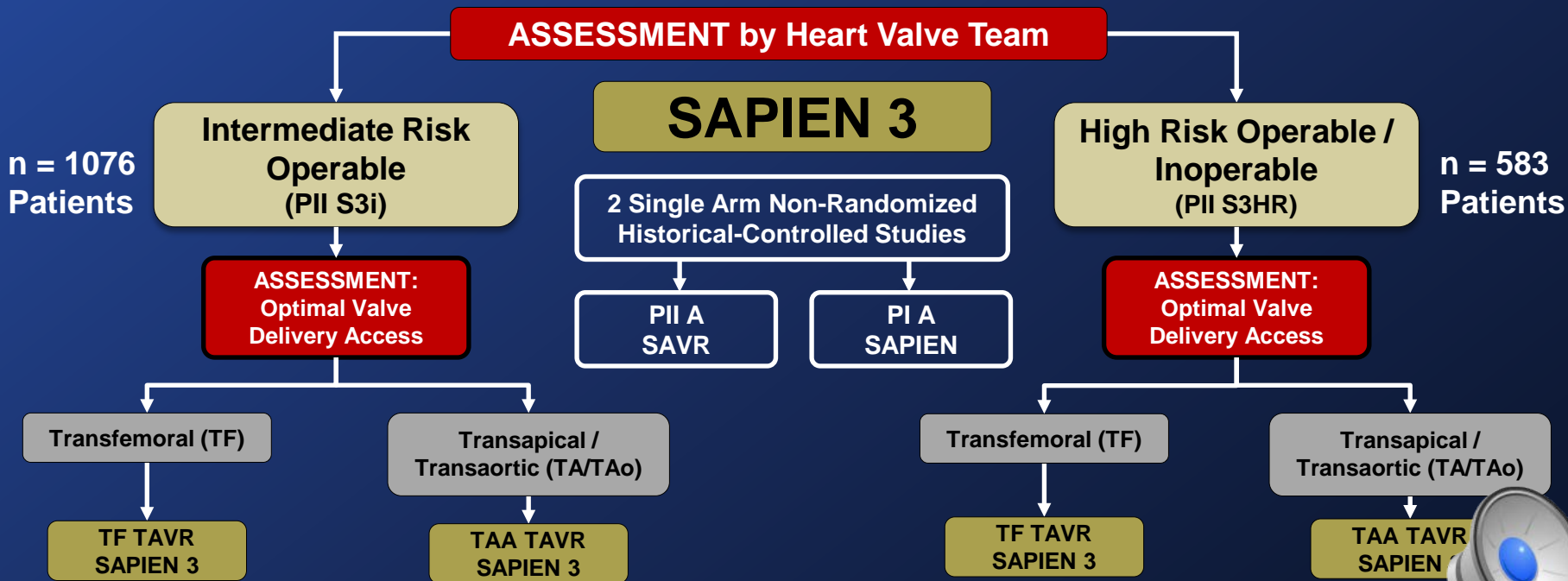


The PARTNER II S3 Trial

Study Design



Symptomatic Severe Aortic Stenosis



Key Inclusion Criteria



- Risk determined by STS score and heart team:
 - **High Risk / Inoperable (S3HR):** STS score > 8 or heart team determination
 - **Intermediate Risk (S3i):** STS score between 4 and 8 or heart team determination
- Severe aortic stenosis determined by echocardiography:
 - Valve area $< 0.8 \text{ cm}^2$ or Valve area index $< 0.5 \text{ cm}^2/\text{m}^2$ **and** mean gradient $> 40\text{mmHg}$ or peak velocity $> 4 \text{ m/s}$



Key Exclusion Criteria



- MI within one month
- Bicuspid aortic valve
- Severe aortic regurgitation
- Prior prosthetic valve in any position
- Untreated significant CAD (S3HR only)
- LVEF < 20%
- Stroke or TIA within 6 months
- Upper GI bleed within 3 months
- Creatinine > 3.0 or dialysis
- Estimated life expectancy < 24 months



Study Methodology

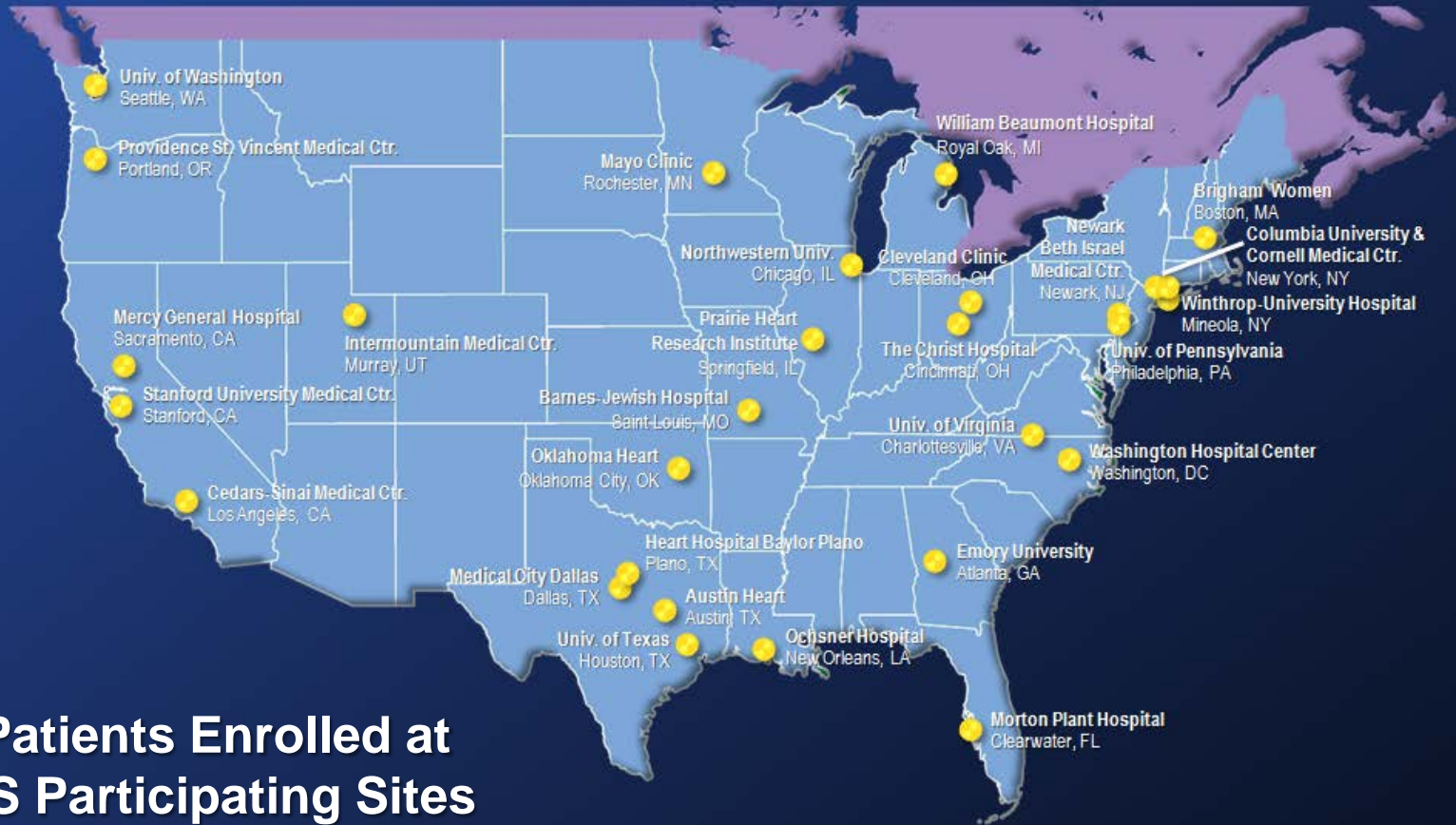


- All patients presented on a screening call for approval prior to implant.
- 3D imaging of annulus (CT or 3D TEE) recommended for S3HR and required for majority of S3i with core lab analysis prior to implant.
- All patients evaluated by a neurologist at baseline and at follow-up time points.
- **Primary Analysis:** As treated patients
- S3HR and S3i combined for echocardiographic analyses (valve implant patients).



The PARTNER II S3 Trial: S3HR

Participating Sites



**583 Patients Enrolled at
29 US Participating Sites**



The PARTNER II S3 Trial: S3HR & S3i

Top 10 Enrollment Sites



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S3HR

Cedars-Sinai Medical Ctr. Los Angeles, CA	73
Columbia University Medical Ctr. New York, NY	65
Emory University Atlanta, GA	63
University of Pennsylvania Philadelphia, PA	43
Heart Hospital Baylor Plano Plano, TX	30
Ochsner Hospital New Orleans, LA	26
University of Texas, Houston Houston, TX	25
Stanford University Medical Ctr. Stanford, CA	24
Newark Beth Israel Medical Ctr. Newark, NJ	21
Washington Hospital Ctr. Washington, DC	19

S3i

Cedars-Sinai Medical Ctr. Los Angeles, CA	106
University of Pennsylvania Philadelphia, PA	66
Emory University Atlanta, GA	62
University of Texas, Houston Houston, TX	52
Columbia University Medical Ctr. New York, NY	48
Heart Hospital Baylor Plano Plano, TX	46
Cleveland Clinic Foundation Cleveland, OH	41
Newark Beth Israel Medical Ctr. Newark, NJ	38
The Christ Hospital Cincinnati, OH	38
Mayo Clinic Rochester, MN	35



Study Administration



Co-Principal Investigators

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Study Flow: S3HR & S3i

30 Day Patient Status



S3HR

n = 583

13 Deaths

n = 570
SAPIEN 3

0 Withdrawal
3 LTFU

**567 / 570 or 99.5% follow-up
visits performed at 30 Days**

S3i

n = 1076

12 Deaths

n = 1064
SAPIEN 3

0 Withdrawal
5 LTFU

**1059 / 1064 or 99.5% follow-up
visits performed at 30 Days**



Baseline Patient Characteristics

S3HR Patients



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Average STS =

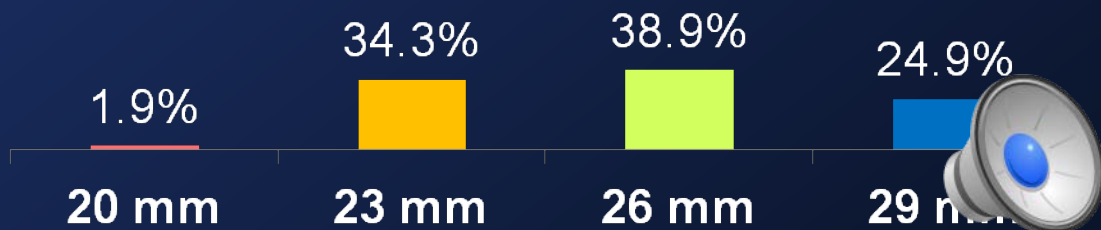
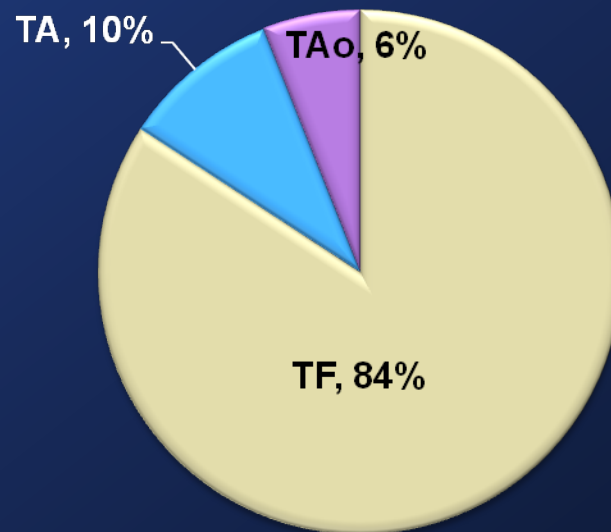
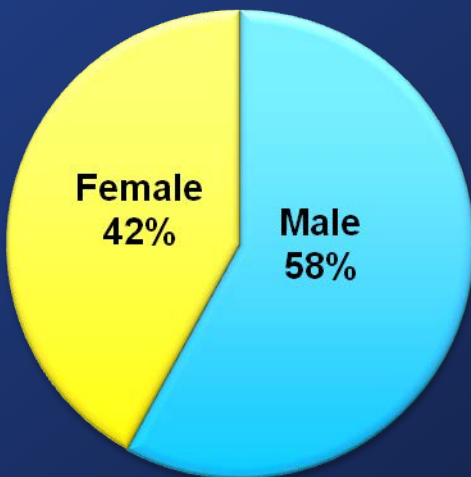
8.6%

(Median 8.4%)

Average Age =

82.6yrs

N = 583



Baseline Patient Characteristics

S3i Patients



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Average STS =

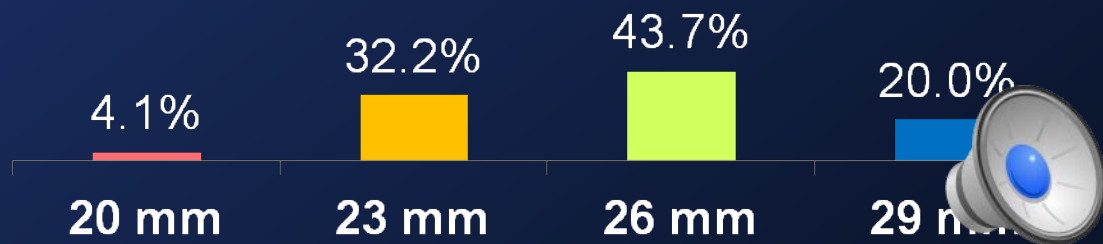
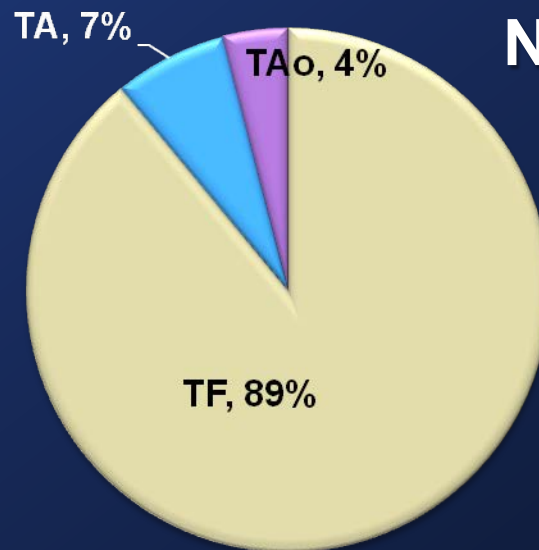
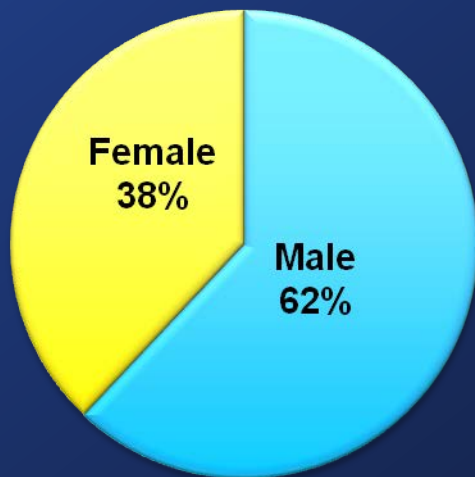
5.3%

(Median 5.2%)

Average Age =

81.9yrs

N = 1076



Baseline Patient Characteristics

Demographics



Characteristic (%)	S3HR (n=583)	S3i (n=1076)
NYHA Class III or IV	90.1	72.6
Previous CABG	33.1	28.0
Previous CVA	11.0	8.9
Peripheral Vascular Disease	35.2	28.3
Diabetes	34.5	34.1
COPD - O ₂ Dependent	11.7	5.0
CKD - Creat. ≥ 2mg/dL	12.0	7.5
Atrial Fibrillation	43.7	36.0
Permanent Pacemaker	16.3	13.2
Frailty	30.9	8.6



Baseline Echocardiography



Characteristic	S3HR (n=583)	S3i (n=1076)
AV Area - cm² (mean ± SD)	0.67 ± 0.18	0.70 ± 0.17
Annulus Diam. - cm (mean ± SD)	2.2 ± 0.2	2.2 ± 0.2
AV Gradient - mmHg (mean ± SD)	45.5 ± 14.3	46.3 ± 12.7
LV Ejection Fraction (%)	56.4 ± 14.8	58.6 ± 13.3
Mod-Severe MR (%)	3.0	2.3



Procedural Factors



	S3HR (n=583)	S3i (n=1076)
Post-Dilatation (%)	14.8	11.3
>1 Valve Implanted (%)	0.9	0.4
Valve Embolization (%)	0.2	0.1
IABP During Procedure (%)	0.5	0.4
Cardiopulmonary Bypass (%)	1.2	0.6
Conscious Sedation (%)	13	17
Median LOS – Days (Min, Max)	5 (1, 33)	4 (1, 64)



Mortality and Stroke: S3HR

At 30 Days (As Treated Patients)

Mortality

■ All-Cause ■ Cardiovascular

O:E = 0.26
(STS 8.6%)

2.2

1.4

S3HR

Stroke

■ All Stroke ■ Disabling

1.5

0.9

S3HR



Mortality and Stroke: S3i

At 30 Days (As Treated Patients)



Mortality

■ All-Cause ■ Cardiovascular

O:E = 0.21
(STS 5.3%)

1.1

0.9

S3i

Stroke

■ All Stroke ■ Disabling

2.6

1.0

S3i



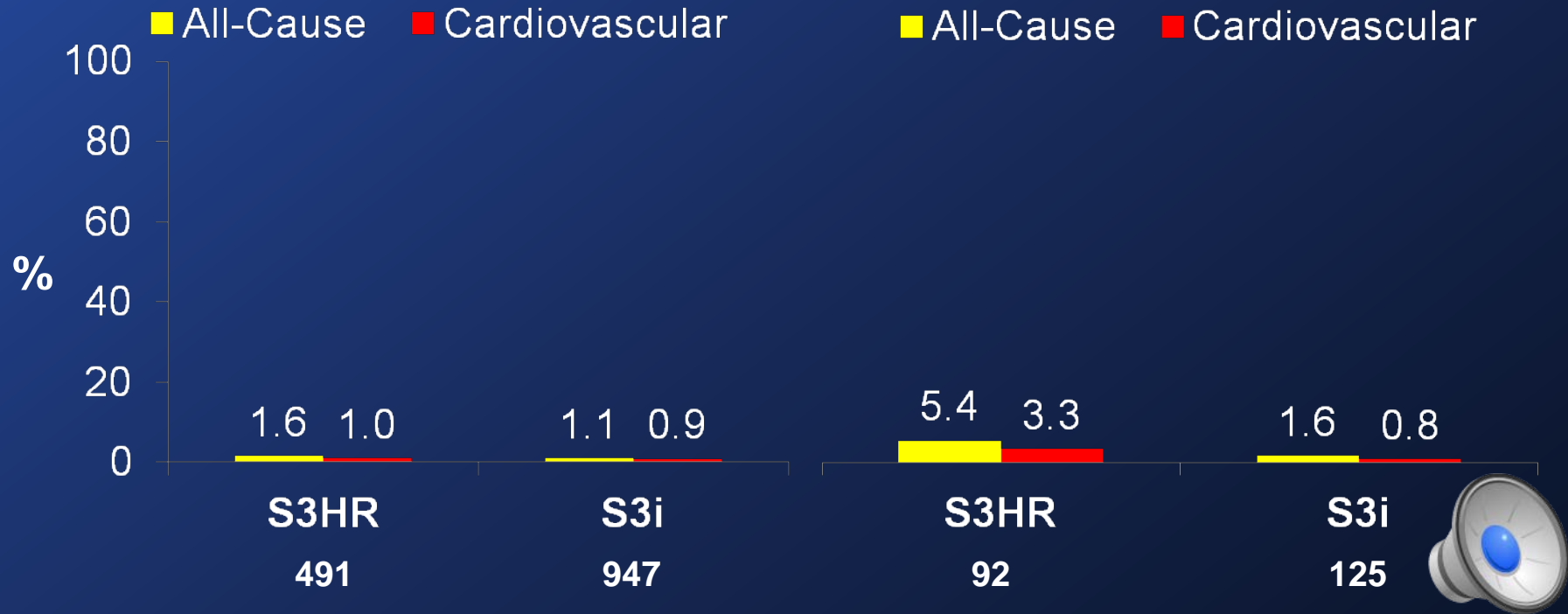
Mortality: S3HR & S3i

At 30 Days (As Treated Patients)



Transfemoral

Transapical / Transaortic



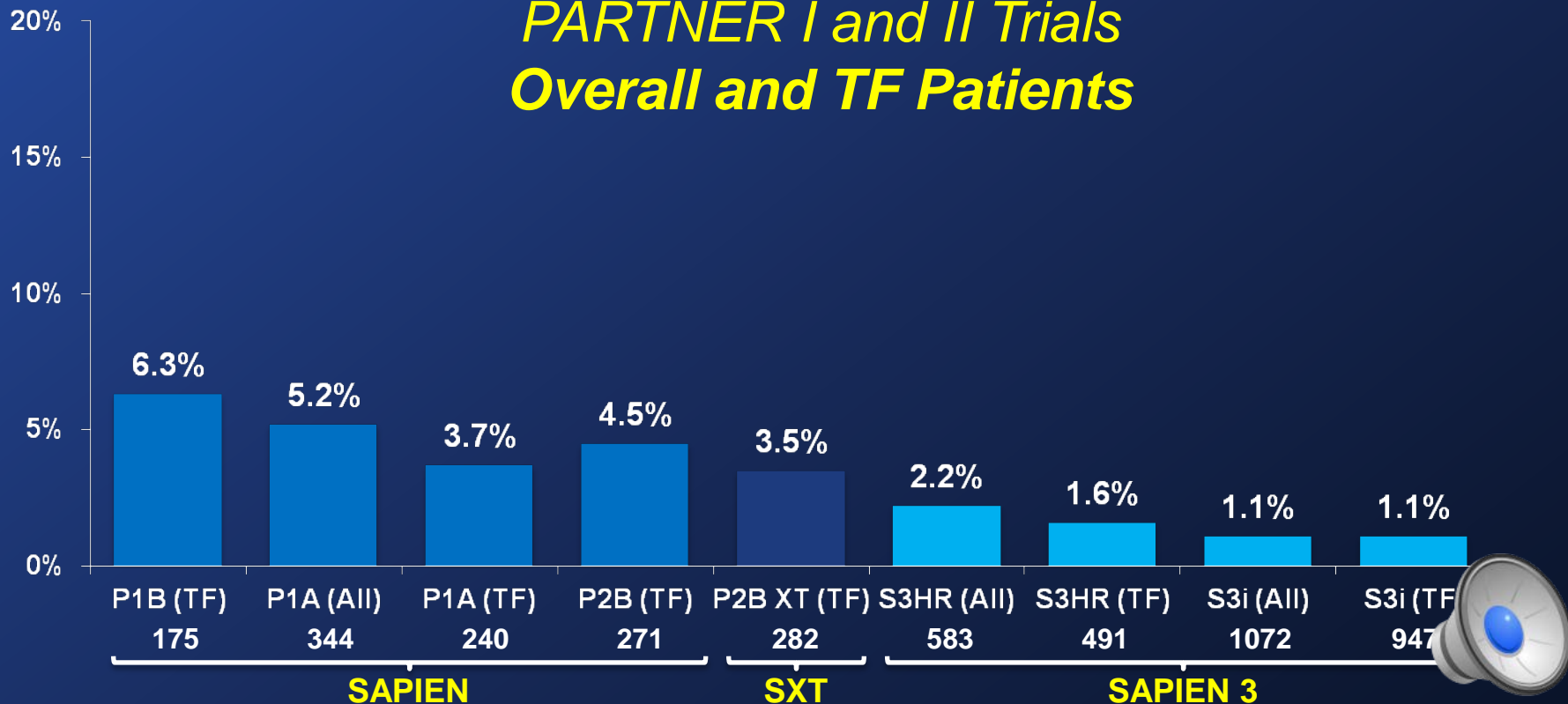
All-Cause Mortality at 30 Days

Edwards SAPIEN Valves (As Treated Patients)



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*PARTNER I and II Trials
Overall and TF Patients*



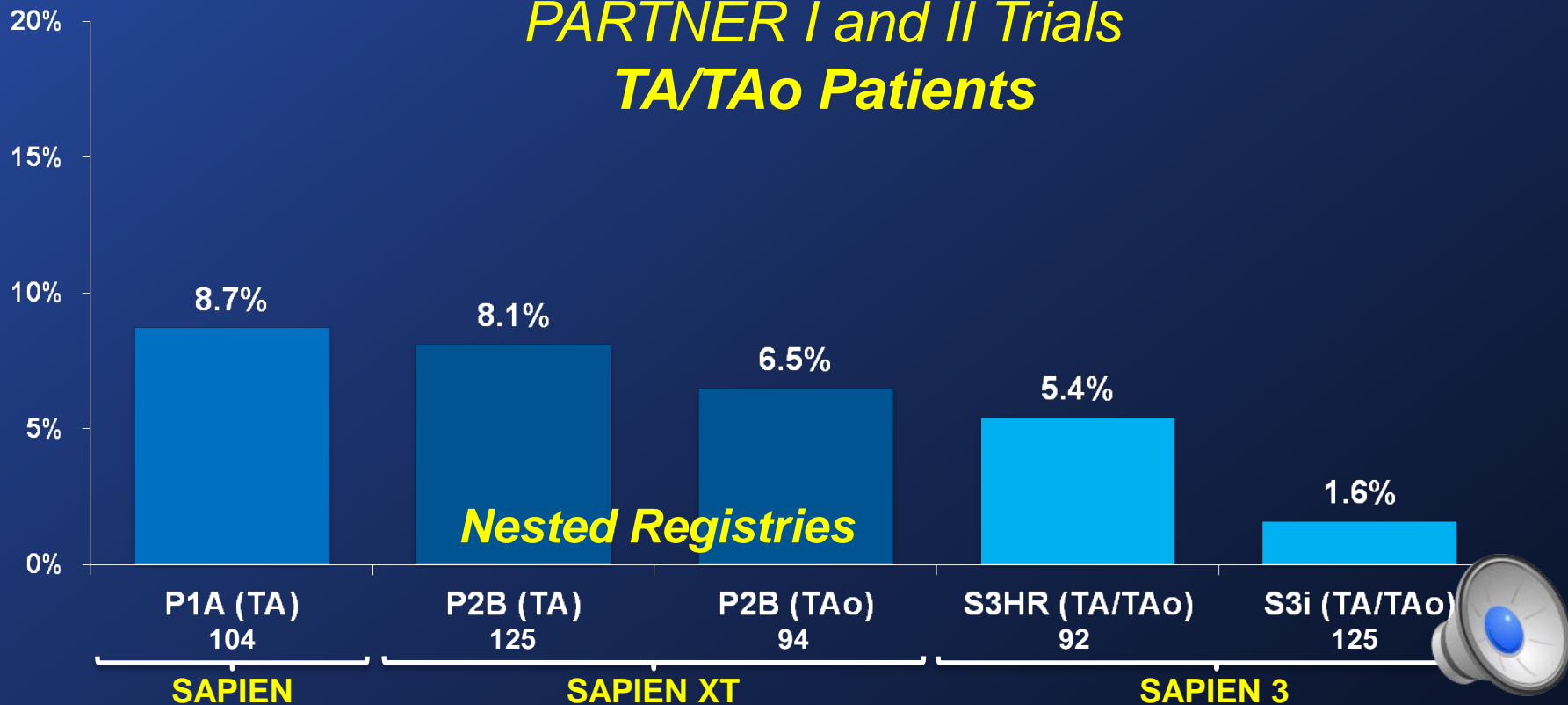
All-Cause Mortality at 30 Days

Edwards SAPIEN Valves (As Treated Patients)



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*PARTNER I and II Trials
TA/TAo Patients*



Strokes

At 30 Days (As Treated Patients)



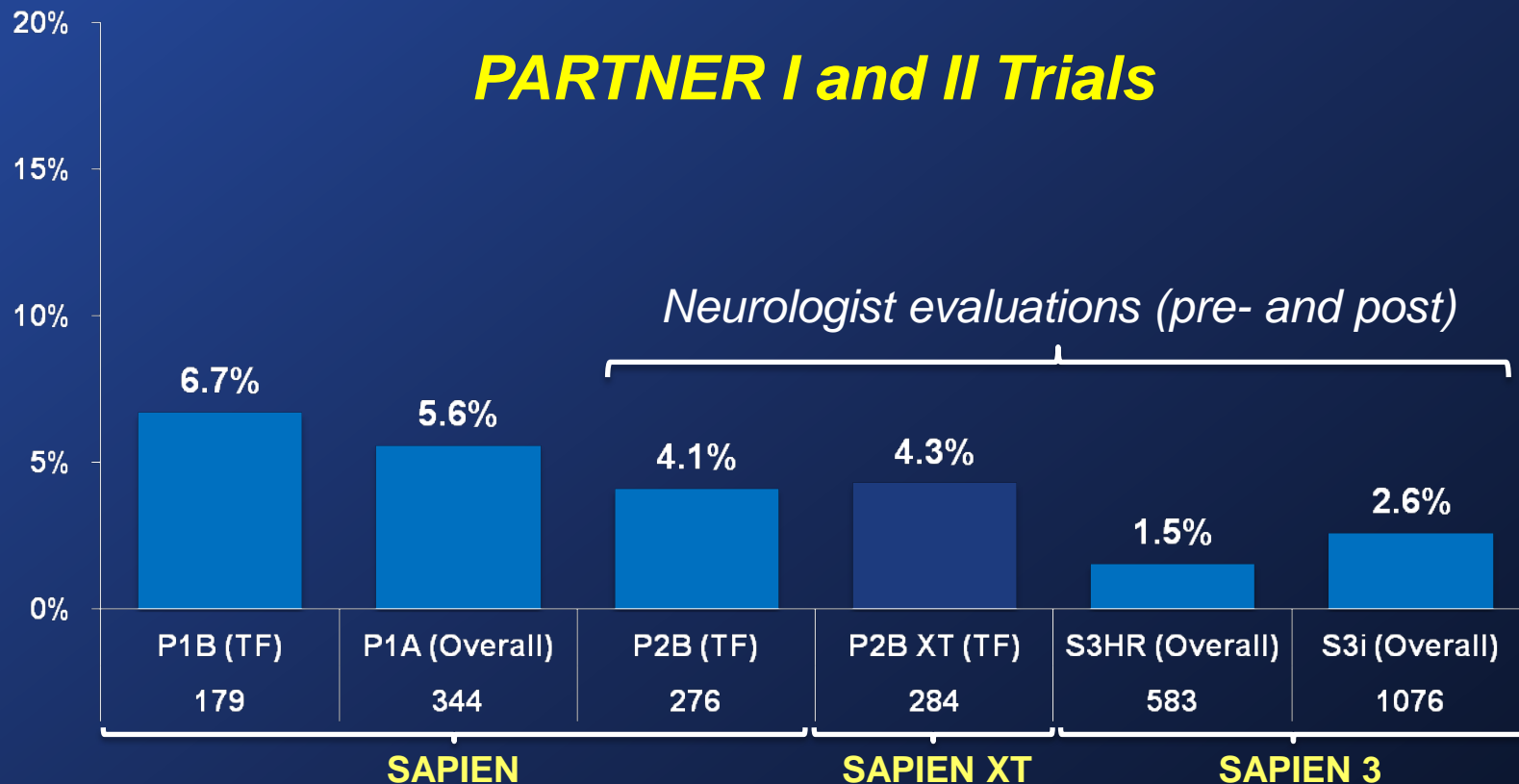
Events (%)	S3HR Overall (n=583)	S3HR TF (n=491)	S3HR TA/TAo (n=92)	S3i Overall (n=1076)	S3i TF (n=951)	S3i TA/TAo (n=125)
All	1.54	1.63	1.09	2.60	2.42	4.00
Disabling*	0.86	0.81	1.09	1.02	0.95	1.60
Non-Disabling	0.69	0.81	0	1.58	1.47	2.40
TIA	0.69	0.61	1.09	0.37	0.42	0

*CEC adjudicated or Modified Rankin Score ≥ 2 at 30 days



All Strokes at 30 Days

Edwards SAPIEN Valves



Other Clinical Events

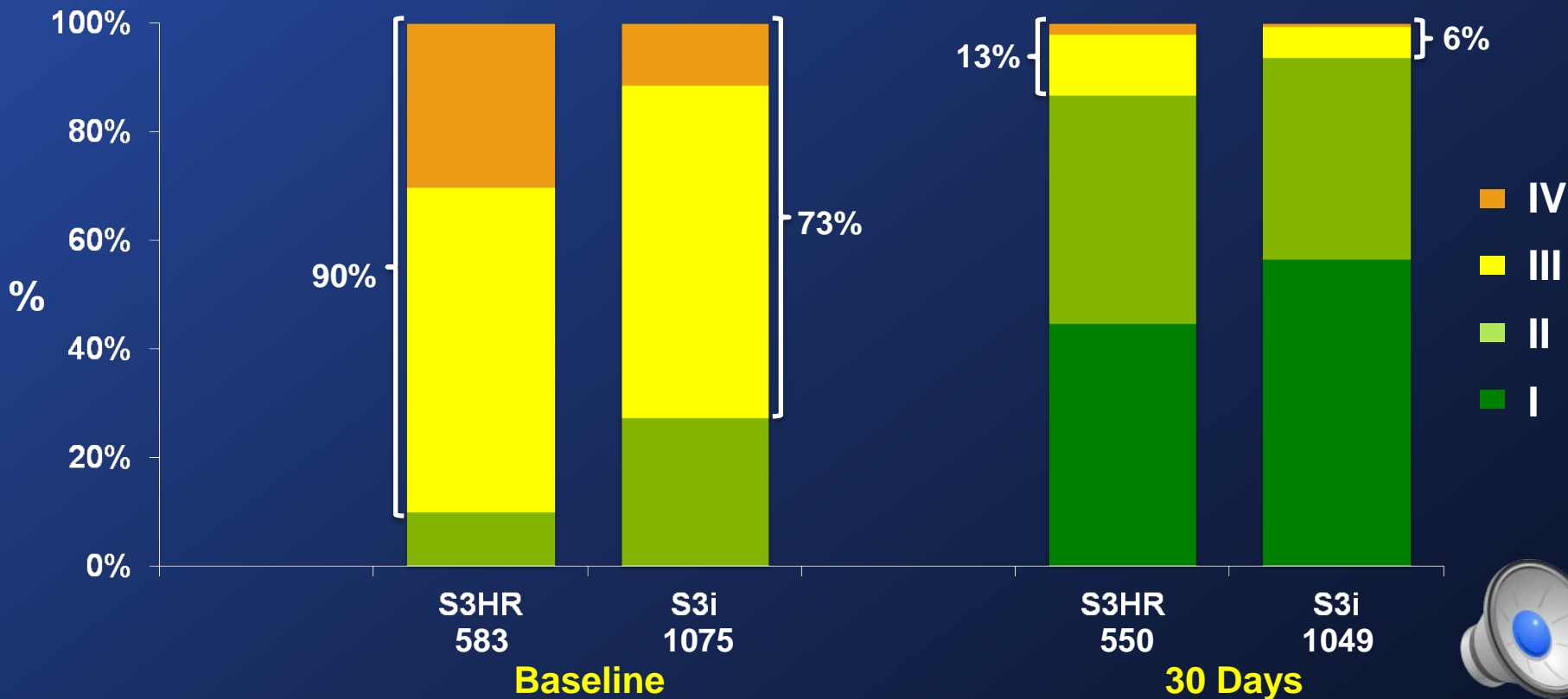
At 30 Days (As Treated Patients)



Events (%)	S3HR Overall (n=583)	S3HR TF (n=491)	S3HR TA/TAo (n=92)	S3i Overall (n=1076)	S3i TF (n=951)	S3i TA/TAo (n=125)
Major Vascular Comps.	5.0	5.3	3.3	5.6	5.9	3.2
Bleeding - Life Threatening	6.3	5.5	10.9	5.4	4.4	12.9
Annular Rupture	0.3	0.2	1.1	0.2	0.2	0
Myocardial Infarctions	0.5	0.4	1.1	0.3	0.3	0
Coronary Obstruction	0.2	0	1.1	0.4	0.4	0
Acute Kidney Injury	1.0	0.8	2.2	0.5	0.3	1.6
New Permanent Pacemaker	13.0	13.2	12.0	10.1	10.4	7.2
Aortic Valve Re-intervention	1.0	0.8	2.2	0.7	0.8	
Endocarditis	0.2	0.2	0	0.1	0.1	



NYHA Functional Class At 30 Days (As Treated Patients)

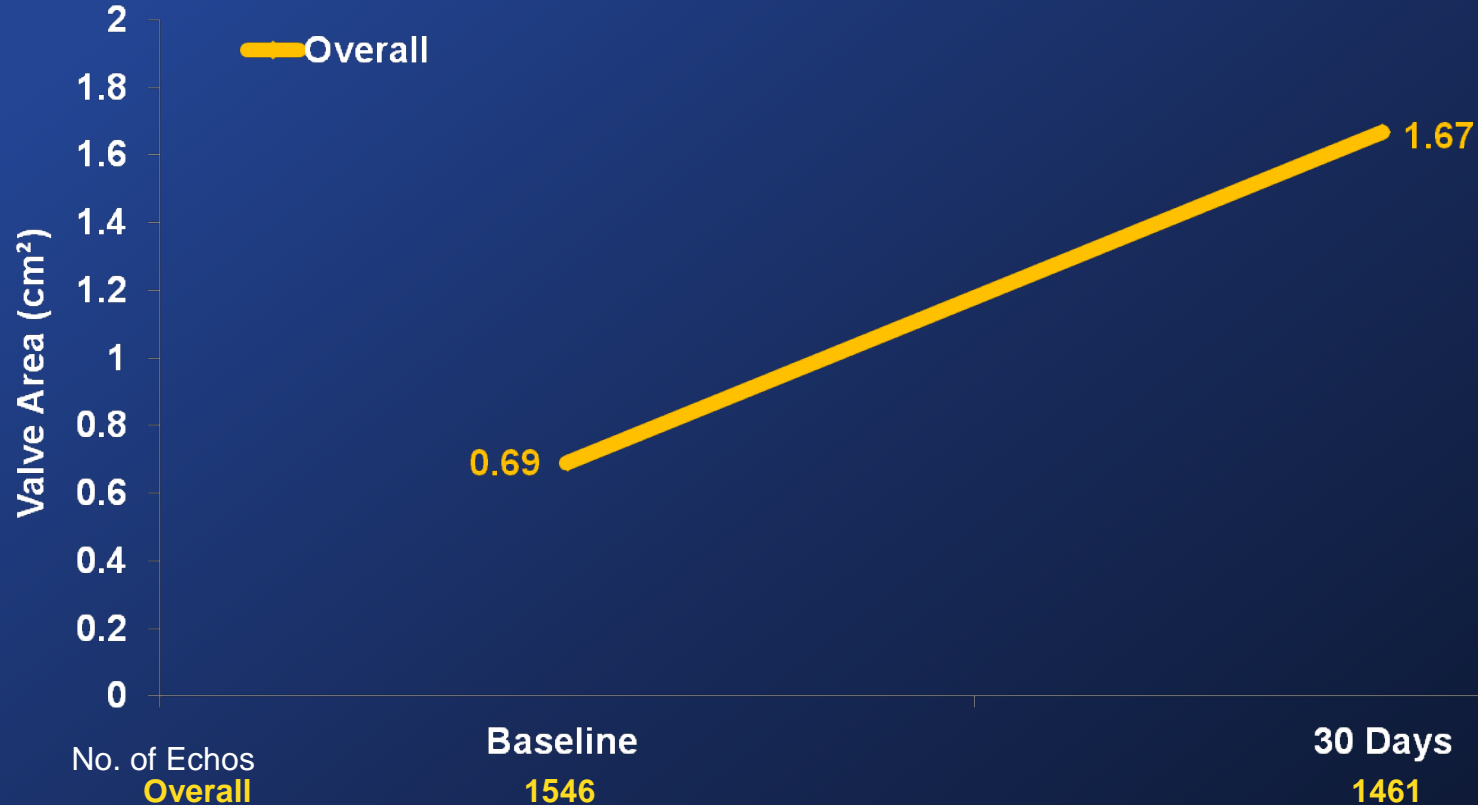


Echo Findings: S3HR & S3i

Aortic Valve Area (Valve Implant Patients)



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No. of Echos
Overall

Baseline
1546

30 Days
1461

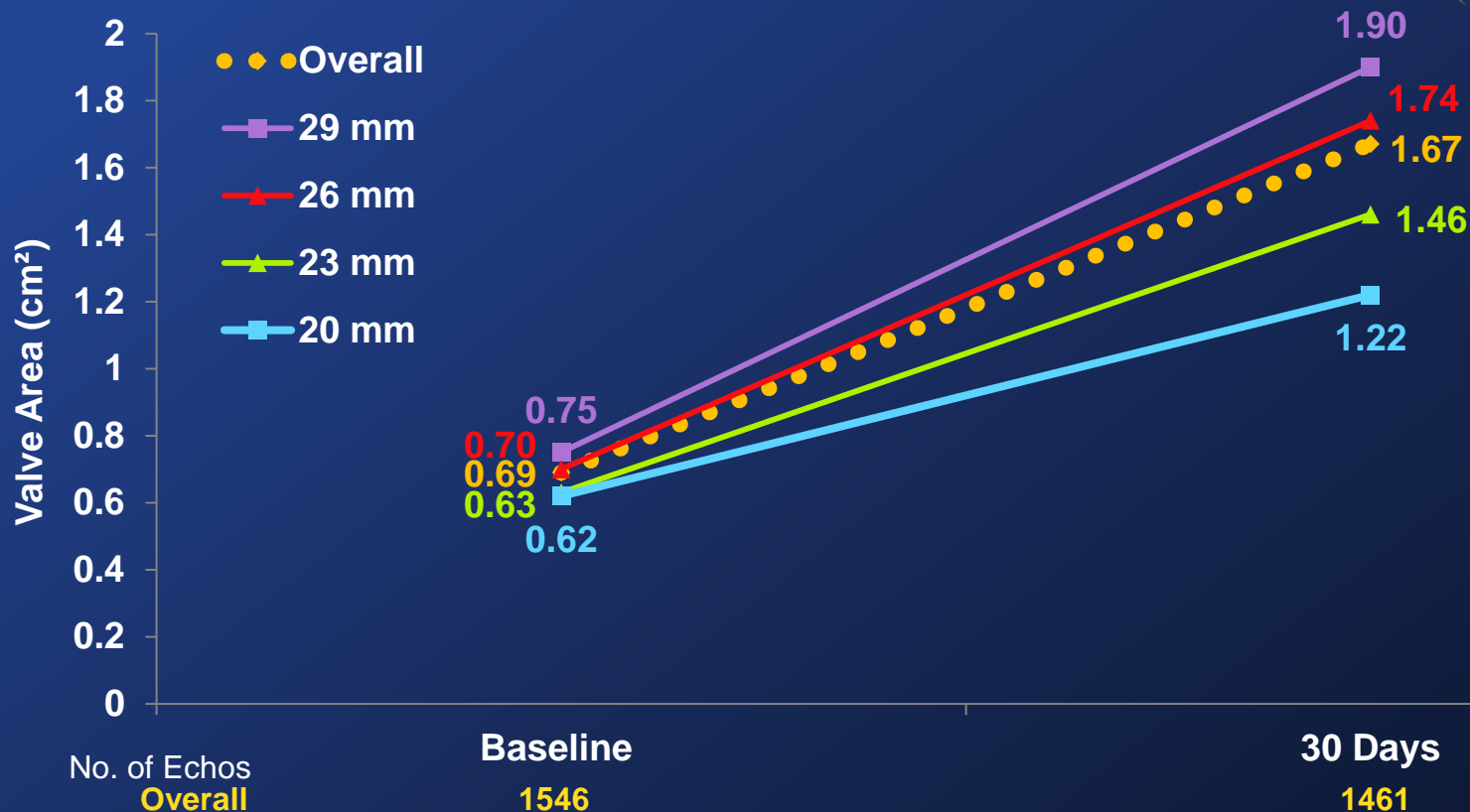


Echo Findings: S3HR & S3i

Aortic Valve Area (Valve Implant Patients)



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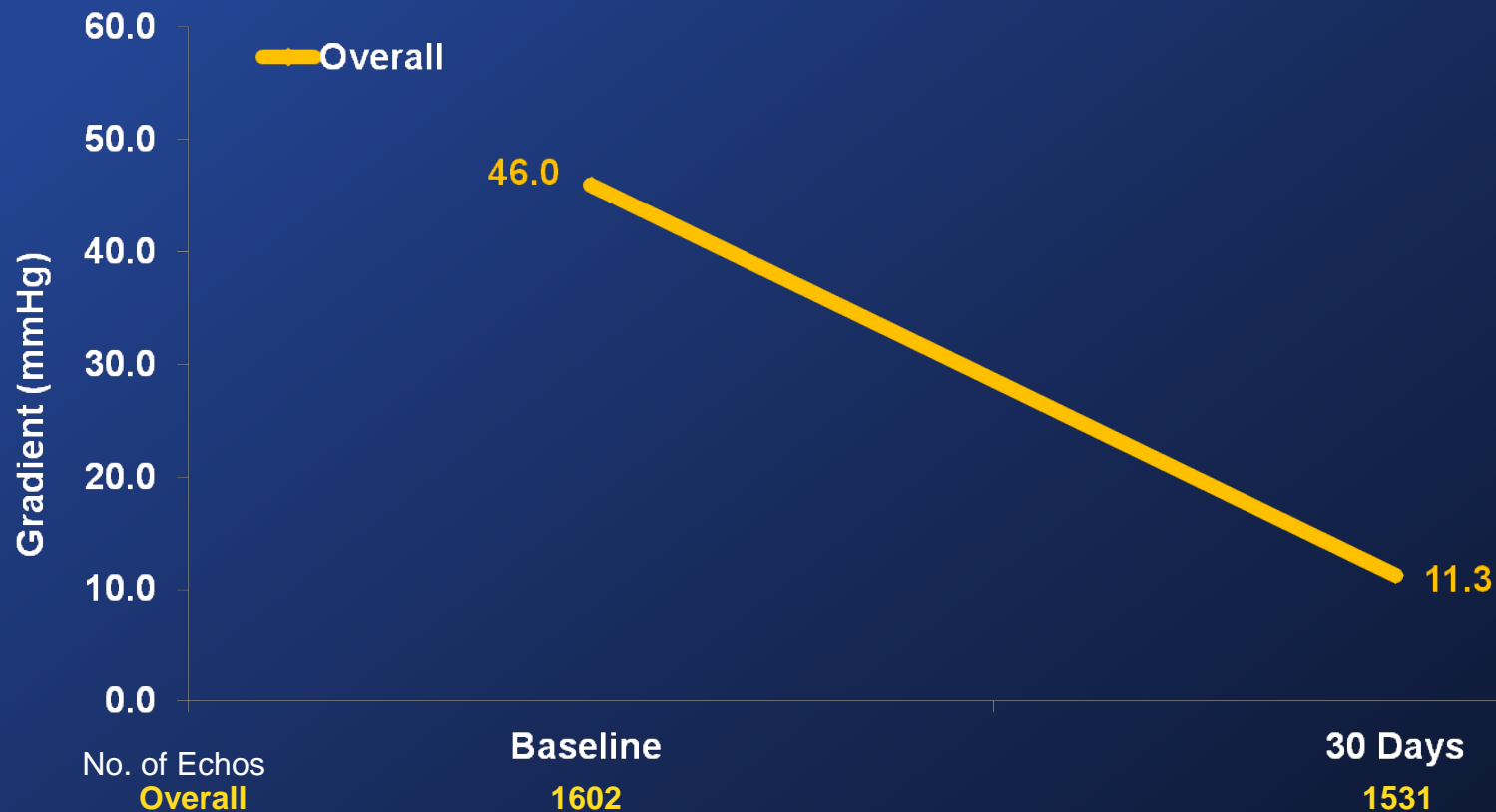


Echo Findings: S3HR & S3i

Mean Gradients (Valve Implant Patients)



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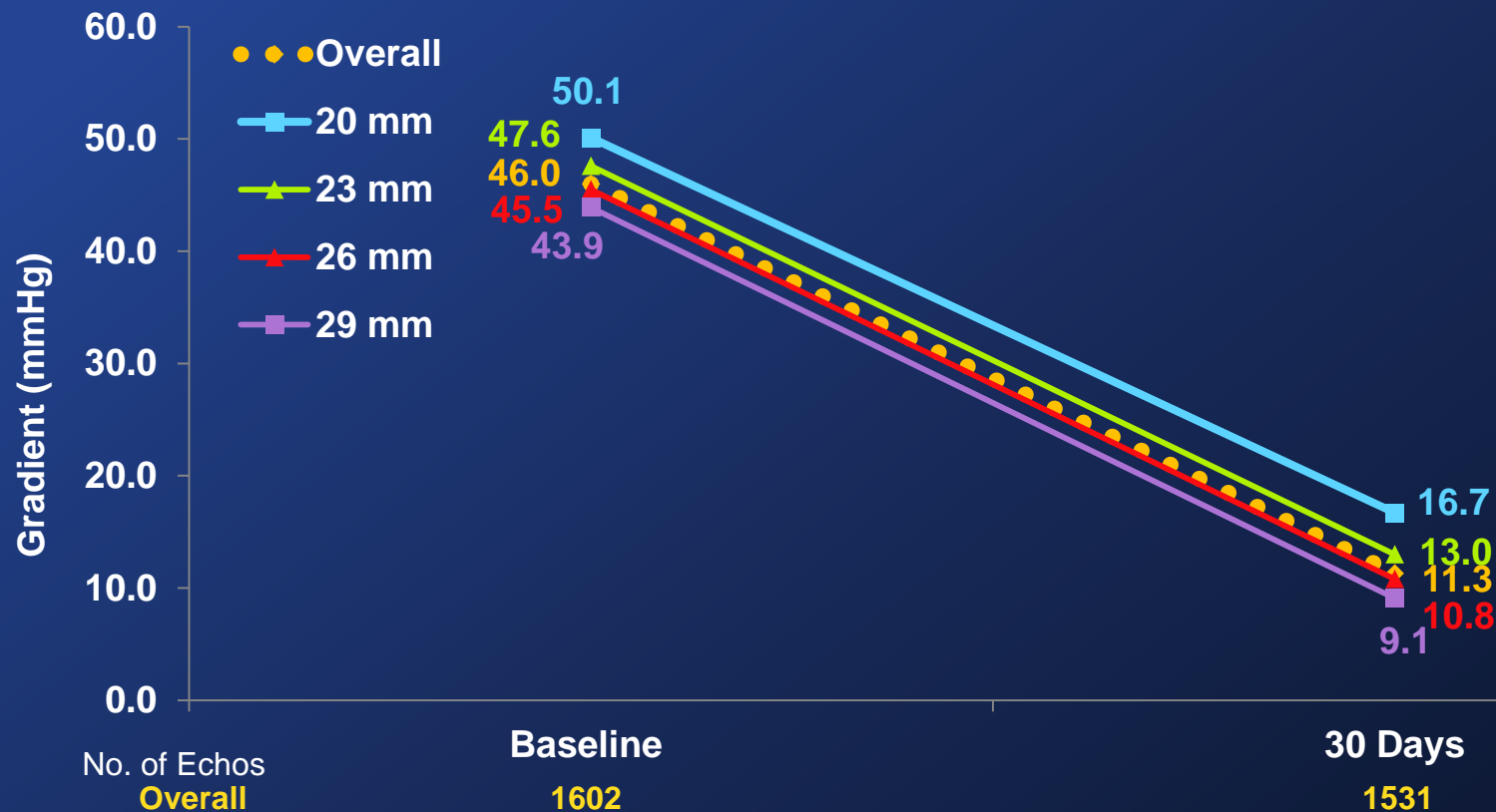


Echo Findings: S3HR & S3i

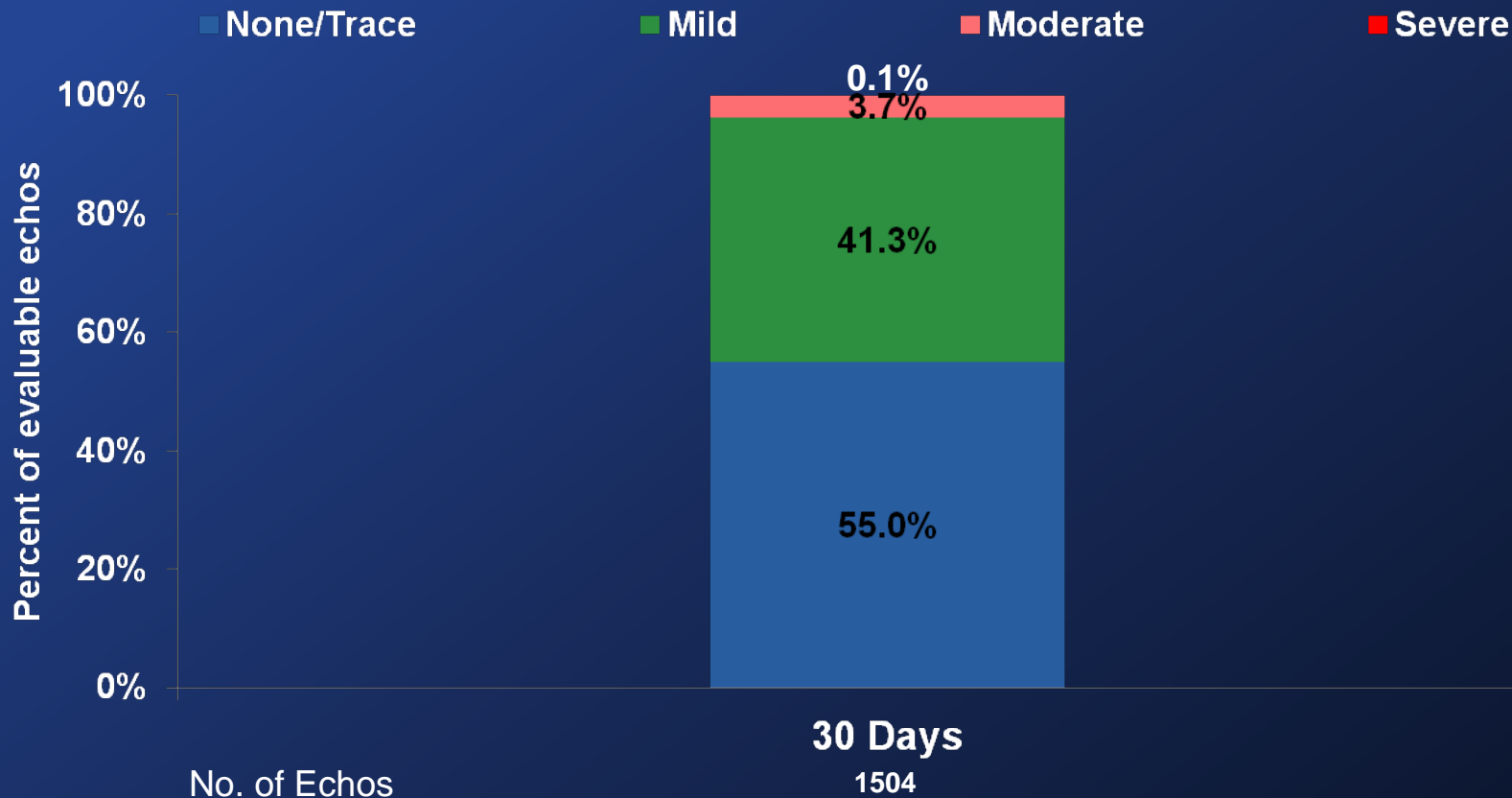
Mean Gradients (Valve Implant Patients)



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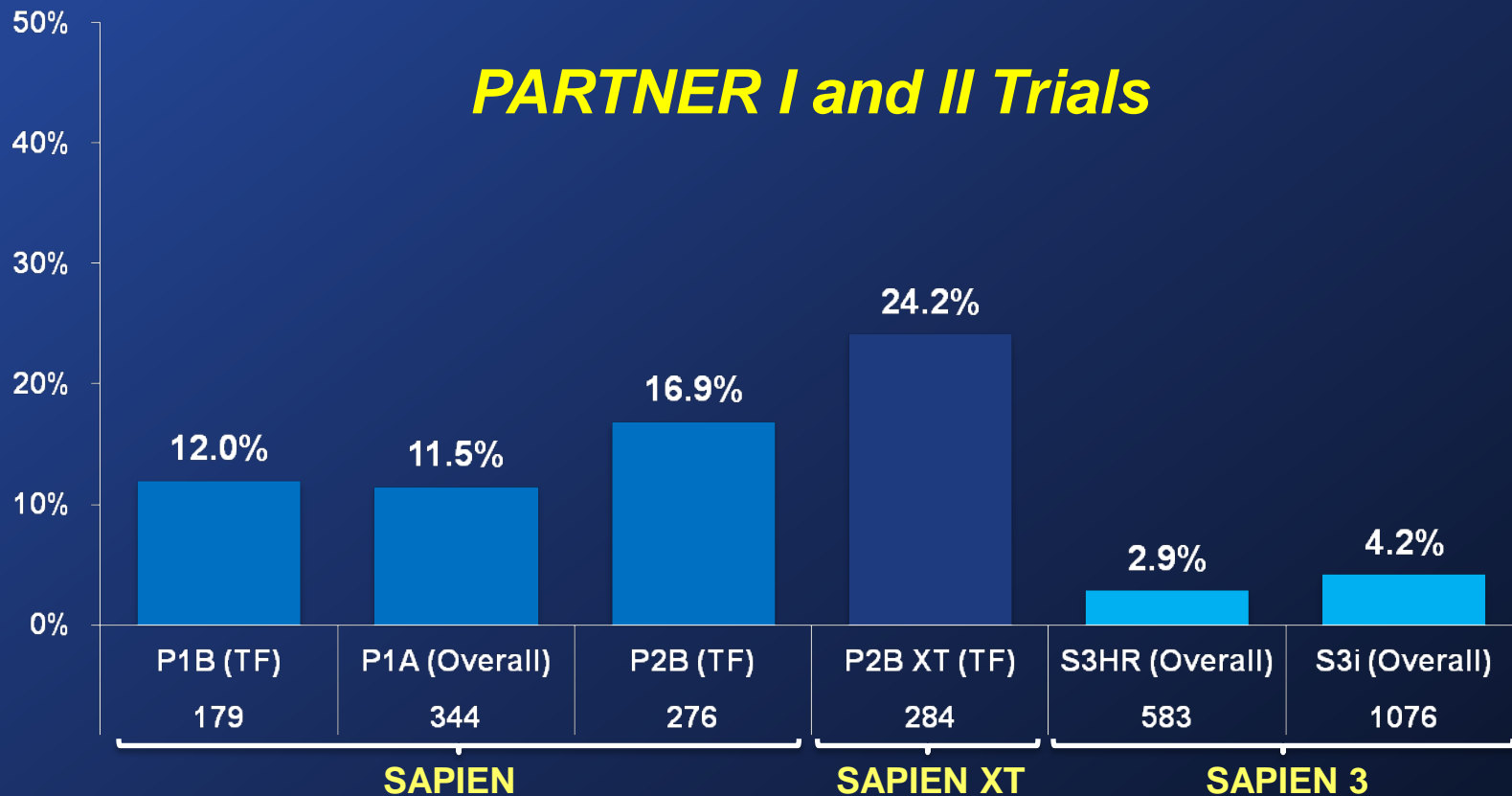


Paravalvular Leak: S3HR & S3i (Valve Implant Patients)



Moderate/Severe PVL at 30 Days

Edwards SAPIEN Valves



Conclusions (1)



- In high-risk and inoperable patients (S3HR), the SAPIEN 3 TAVR system demonstrated low mortality and stroke and excellent clinical outcomes at 30 days:
 - **Mortality:** 2.2% (TF 1.6%, TA/TAo 5.4%)
 - **Disabling Stroke:** 0.9%
- In intermediate-risk patients (S3i), SAPIEN 3 was associated with strikingly low mortality and strokes at 30 days:
 - **Mortality:** 1.1% (TF 1.1%, TA/TAo 1.6%)
 - **Disabling Stroke:** 1.0%



Conclusions (2)

- Other important clinical findings with SAPIEN 3 (both S3HR & S3i) include:
 - **Major vascular complications:** ~5%
 - **Annular rupture:** ~0.2%
 - **Coronary obstruction:** ~0.3%
 - **New pacemakers:** ~10%
- Significant paravalvular regurgitation with SAPIEN 3 (both S3HR & S3i) was rare:
 - **Severe:** 0.1%
 - **Moderate:** 3.7%



Implications



- The rapid evolution of balloon-expandable TAVR, both procedural developments and technical enhancements, represented in the SAPIEN 3 clinical and echo results, indicates at least parity with the best surgical outcomes in comparable patients.
- *SAPIEN 3 TAVR should now be considered as an alternative to surgery, even in lower risk patients with aortic stenosis.*



Dedicated to the Memory of Mike Davidson, a Cherished Member of Our PARTNER Team



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Backup Slides



Primary Endpoint: S3HR



- *Primary Endpoint: Non-Hierarchical composite of Death + All Stroke + Total AR \geq Moderate*
- Patients in S3HR cohort are confirmed to be comparable to patients in P1A SAPIEN group via propensity modeling on baseline characteristics.
- Overall treatment effect is adjusted for propensity quintiles defined by propensity scores.
- Patients that received SAPIEN 3 have 9% lower event rate than patients that received SAPIEN.



Primary Endpoint: S3HR



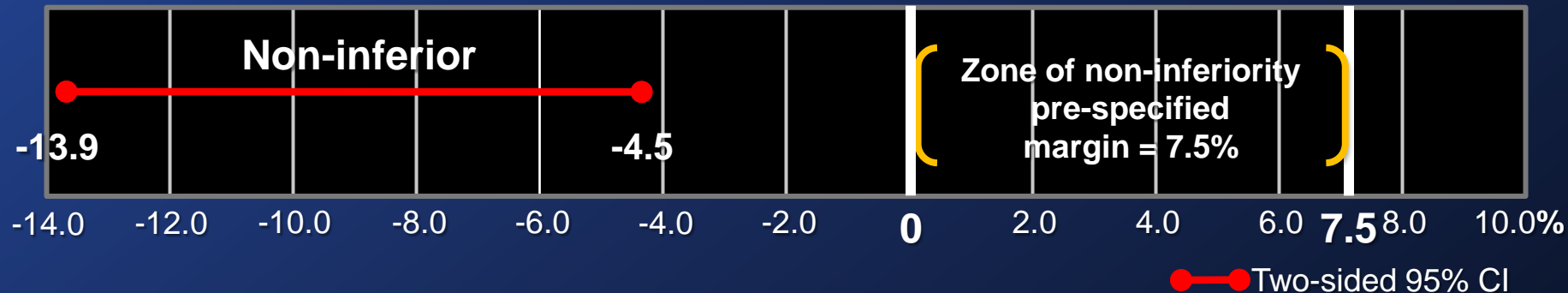
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Primary Endpoint: *Non-Hierarchical Composite of Death + All Stroke + Total AR \geq Moderate*

**Weighted*

Proportion Difference between SAPIEN 3 and SAPIEN: -9.0%*

Two-sided 95% Stratified Newcombe CI: [-13.9%, -4.5%]



Primary Non-Inferiority Endpoint Met: $p < 0.0001$

Sequential Superiority Endpoint Met: $p < 0.01$

