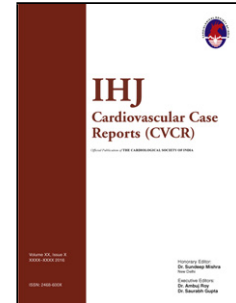


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India's First Percutaneous Tricuspid Valve Implantation: Valve-in-Valve is a Treatment Option for Bioprosthetic Valve Dysfunction

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Abstract:

Bioprosthetic valve dysfunction leading to haemodynamically significant consequences is well recognised. Traditional treatment of choice has been conventional re-do surgical valve replacement. However, over the last decade, percutaneous solutions such as Valve-in-valve (VIV) implantations has emerged as a well-established option for such patients^{1,2,3}. We report India's first tricuspid valve-in-valve implantation with a balloon expandable valve through a trans-jugular approach to treat dysfunctional tricuspid valve dysfunction.

Introduction:

Longevity of bioprosthetic valves have been inferior to metallic valves. The incidence of bioprosthetic valve dysfunction is low within 10 years of valve implantation but increases markedly after that point. This may lead to bioprosthetic Valve stenosis or regurgitation. Although surgical re-do valve replacement is well established and continues to be routinely and successfully performed worldwide, these patients' risk from re-do open surgery is unquestionably higher compared to their first surgery. Transcatheter Aortic Valve Implantation (TAVI) technology has been used to perform Valve-in-valve procedures as an alternative to surgical re-do operations in such patients with a much lower risk than surgical re-do valve replacement^{1,2,3}. Initially adopted in the aortic position, this technology has now been widely reported in other valve positions such as mitral¹, tricuspid² and pulmonary positions as a Valve-in-valve implantation for dysfunctional bioprosthesis. We report a VIV implantation in the tricuspid position through a trans-jugular approach in a patient with dysfunctional tricuspid valve bioprosthesis.

Case Report:

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