

## Letter to the Editor

## Cost-effectiveness of transcatheter aortic valve implants in 2022



## Coste-efectividad del implante percutáneo de válvula aórtica en 2022

## To the Editor,

We have read with considerable interest the excellent article by Piner et al.<sup>1</sup> on a cost-effectiveness analysis of transcatheter aortic valve implantation (TAVI). TAVI management has increasingly become the best option for most patients with severe aortic stenosis. Clinical practice data from Spain show that, even with an advanced patient age (average, 83 years), the 1-year survival with this implant is about 90%.<sup>2</sup> Piner et al. demonstrates that TAVI not only confers major clinical benefit, but also is an efficient treatment. We would like to stress that its efficiency is currently even higher than that reported by the authors. In table 3 of their article, which describes the use of resources in procedure preparation and hospitalization, Pinar et al. estimated a length of stay in the intensive care unit after femoral TAVI of 2.5 days and a length of stay on the ward of 3 days. The standard practice in our center, and in many others, is that these patients are not transferred to the critical care unit and are discharged to home at 48 hours. Moreover, recent experiences have been reported of same-day discharge of patients after the procedure,<sup>3-5</sup> and it is likely that the technique will see further improvements in the future. Accordingly, the positive estimate that the authors make of the cost-effectiveness of TAVI, particularly concerning the transfemoral approach, is probably even an underestimate.

## FUNDING

None.

## CONFLICTS OF INTEREST

None.

Manuel Martínez-Sellés<sup>a,b,c,d</sup>

<sup>a</sup>Servicio de Cardiología, Hospital General Universitario Gregorio Marañón, Madrid, Spain

<sup>b</sup>Centro de Investigación Biomédica en Red Enfermedades Cardiovasculares (CIBERCV), Spain

<sup>c</sup>Facultad de Ciencias Biomédica y de la Salud, Universidad Europea, Madrid, Spain

<sup>d</sup>Facultad de Medicina, Universidad Complutense, Madrid, Spain

E-mail address: [mmselles@secardiologia.es](mailto:mmselles@secardiologia.es)

Available online 2 June 2022

## REFERENCES

1. Pinar E, García de Lara J, Hurtado J, et al. Cost-effectiveness analysis of the SAPIEN 3 transcatheter aortic valve implant in patients with symptomatic severe aortic stenosis. *Rev Esp Cardiol.* 2022;75:325–333.
2. Vicent L, Fernández-Cordón C, Nombela-Franco L, et al. Baseline ECG and prognosis after transcatheter aortic valve implantation: the role of interatrial block. *J Am Heart Assoc.* 2020;9:e017624.
3. Krishnaswamy A, Isogai T, Agrawal A, et al. Feasibility and safety of same-day discharge following transfemoral transcatheter aortic valve replacement. *JACC Cardiovasc Interv.* 2022;15:575–589.
4. Pop AM, Barker M, Hickman L, et al. Same day discharge during the COVID-19 pandemic in highly selected transcatheter aortic valve replacement patients. *Struct Heart.* 2021;5:596–604.
5. Perdoncin E, Greenbaum AB, Grubb KJ, et al. Safety of same-day discharge after uncomplicated, minimalist transcatheter aortic valve replacement in the COVID-19 era. *Catheter Cardiovasc Interv.* 2021;97:940–947.

SEE RELATED CONTENT:

<https://doi.org/10.1016/j.rec.2021.02.013>

<https://doi.org/10.1016/j.rec.2022.04.010>

1885-5857/© 2022 Sociedad Española de Cardiología. Published by Elsevier España, S.L.U. All rights reserved.