## TricValve® Case performed in Spain University Hospital of Salamanca

## TRICVALVE® TRANSCATHETER BICAVAL VALVES



## **Dr. Javier Martín Moreiras**MD, PhD Interventional Cardiologist and Associated Professor of Cardiology. University Hospital of Salamanca, Spain





83-year-old woman, with a long history of rheumatic valvular heart disease, underwent a percutaneous mitral valvuloplasty performed in 1986 and a posterior mitral valve replacement in 2012.

Initially she had a good clinical response to surgery, with a good functional situation (II NYHA functional class) but after SARS-CoV-2 infection in 2022, she had progressive deterioration with heart failure based predominantly in congestive systemic symptoms.

ETE performed showed proper functioning of the mitral prosthesis but a torrential tricuspid regurgitation, slightly right ventricular dilatation but conserved right ventricle contractility. A right cardiac catheterization was done showing type II pulmonary hypertension (sPAP = 60mmHg), with low diastolic pressure gradient, because of a 25mmHg PCP.

Due to high-risk patient, comorbidities, and clinical situation, medical treatment was decided increasing diuretic treatment.







One month later the patient still has massive peripheral edema and fatigue, visiting emergency room twice in that time. She was offered TricValve therapy, using two heterotopic valves in the superior vein cave and inferior vein cave, to prevent systemic congestions due to massive tricuspid regurgitation.

We performed the implantation easily and without complications. Since the implantation six months ago, she has lost 8 kg of weight, has not had to back to the emergency room again and her functional situation has improved considerably. TricValve has given her desire to be alive and do things.







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