Author's response to reviews

Title: Mid-term results of the first 150 TAVI results comparing apical versus femoral approaches

Authors:

Alain AR Rougé (alain.rouge@hotmail.com)
Olivier OH Huttin (o_huttin@chu-nancy.fr)
Thibaud TV Vaugrenard (tvaugrenard@gmail.com)
Rumas RA Aslam (aslam_rumas@hotmail.fr)
Thomas TJ Jouve (thom.jouve@gmail.com)
Michael MA Angioi (michaelangioi@gmail.com)
Juan Pablo JPM Maureira (jp.maureira@chu-nancy.fr)

Version: 2 Date: 29 April 2015

Author's response to reviews: see over
Dear Editor

Journal of Cardiothoracic Surgery

April, 29, 2015

I am pleased to submit an original research article entitled “Mid-term results of the first 150 TAVI results comparing apical versus femoral approaches” by Juan Pablo Maurieira and Alain Rougé for consideration for publication in Journal of Cardiothoracic Surgery.

Transcatheter aortic-valve implantation is a new therapeutic choice for treating aortic stenosis in patients considered high risk for surgery and still requires evaluation of medium and long term prognosis. We hereby report our results of the first 150 consecutive patients to receive TAVI implants in a retrospective and monocentric study. We analyzed long-term morbidity and mortality criteria and compared the apical and femoral approach results and researched predictors of cardiac mortality. The mid-term results in our center, demonstrated mortality rates of 4%, 11.3%, 22.7% and 26% at the immediate perioperative point, 31 days, 1 year, and 2 years, respectively. The interindividual variability of LVEF improved significantly over time (p=0.001). Our study revealed a trend towards increased probability of survival in the femoral group compared to the apical group. On comparing the rates of complications in terms of approach method, we observed that the patients treated through the transapical route, who are usually at higher risk, exhibited significantly more hemodynamic complications (p=0.049) and more pulmonary complications (p=0.029). These results underline the importance of a multidisciplinary decision concerning the choice of approach type.

The study was non interventionnal and retrospective. According to the French law, patients received information about the study and a non-opposition to their participation in the study was sought.

All authors listed have contributed sufficiently to the project to be included as authors, and all those who are qualified to be authors are listed in the author byline. To the best of our knowledge, no conflict of interest, financial or other, exists

Thank you for receiving our manuscript and considering it for review. We appreciate your time and look forward to your response.

Juan Pablo Maurieira, PhD
CHU de Nancy
Université de Lorraine, France

Alain Rougé, MD
CHU de Nancy

CHU de Nancy