HIQA’s HTA of Transcatheter Aortic Valve Implantation (TAVI) vs Surgical Aortic Valve Replacement (SAVR) in patients with severe symptomatic aortic stenosis at intermediate and low surgical risk

Findings:
Switching from SAVR to TAVI

- Patients will have shorter hospital stays and faster recovery times following the procedure.
- No additional cost to the HSE over the next five years.
- Opportunity to release hospital beds, surgical staff, and theatre time to address other healthcare demands.
- Increased demand for catheterisation laboratory capacity.
- TAVI is associated with greater improvements in health-related quality of life outcomes (one to three months from baseline) compared with SAVR.

Standard treatment is SAVR, an open cardiovascular surgical procedure. TAVI is a minimally invasive alternative to open heart surgery.

100 patients aged 70 years and older at intermediate and low surgical risk currently undergo SAVR each year in Ireland, but could be eligible for TAVI.

TAVI is no less effective than SAVR in terms of cardiac and all-cause mortality.

TAVI is associated with greater improvements in health-related quality of life outcomes (one to three months from baseline) compared with SAVR.

TAVI is a highly cost-effective procedure in patients aged 70 years and over at intermediate and low surgical risk.

hiqa.ie