

Trifecta[™] Bioprotheses : Evaluation of the safety based of degenerations according to the VARC-3 classification

O. RICHEZ¹, Y. HUN-CHABRY², D. MALAQUIN³, J. HUDELO³, T. CAUS², A. PETIT¹.

¹Hospital Pharmacy, ²Cardiac Surgery Department and ³Cardiology Department Amiens-Picardie University Hospital, Amiens, France.

BACKGROUND AND IMPORTANCE

In 2021, cardiologists reported to the medical-devices-vigilance sector serious incidents in four patients with a firstgeneration Trifecta[™] bioprosthesis that resulted in three aortic valve replacement and one death.

→ The question of the degeneration of their bioprosthesis arose.

AIM AND OBJECTIVES



f Evaluate the intrinsic imputability of Trifecta™ for dysfunction according to the VARC-3 classification in patients implanted and to reassess their referencing in our center.

MATERIALS AND METHODS

(1) **Realisation** of a retrospective, single-center and observational study of computerized patient records between February 4, 2011 date of our center's first implantation, and December 31, 2016 to have 5 years of follow-up per patient. This study was approved by our local research department.

(2) **Extraction** of Trifecta[™] values and data related to the implantation from the traceability software. The collection of echographic and clinical follow-up data were based on the computerized patient records with an extended follow-up period until March 31, 2022.

(3) **Classification** of dysfunctions according to the VARC-3 classification criteria¹ : structural valve deterioration (SVD), non-structural valve dysfunction (NSVD), thrombosis and endocarditis.

RESULTS –						
 Average age 	e : 73,0 (± 9.15)	years, 60,7 %	á male			
382 bioprosthes	es Trifecta [®] implant	ted in 378 patien	ts 4 of whom had a			Ale to the second
Perioperative	Missing data :	Conclusive	2 nd Trifecta™ during the study period		Endocarditis n = 20	Photo of a stenosing
deaths :	253 patients	data :		SVD		Trifecta [™] bioprosthesis



CONCLUSION AND RELEVANCE

The classification of failures according to VARC-3 allowed us to confirm the intrinsic imputability of the Trifecta[™] bioprostheses regarding to the number of SVD-type dysfunctions. Although this study has limitations, it shows the understatement of medical-devices-vigilance cases by the medical staff. The 64 files with dysfunctions were transmitted to the national health authority. The patients will be reviewed to complete the data and perform an echographic follow-up. According to the manufacturer, degenerations could be related to the expansion system that was improved in the second-generation Trifecta[™] marketed in 2016. Since this study, the Trifecta[™] has been removed from the hospital formulary. Nowadays, the French High Authority for Health has removed these bioprostheses from the list of health products financed as hospitalization services mentioned in article L.165-11² and R. 165-49³ of the social security code on the basis of a new safety assessment⁴. These articles condition the purchase of this bioprosthesis by health care institutions. Studies have shown that these valves are less durable than other bioprostheses.

REFERENCES

¹ VARC-3 WRITING COMMITTEE:, Généreux P, et al. Valve Academic Research Consortium 3: Updated Endpoint Definitions for Aortic Valve Clinical Research. J Am Coll Cardiol. 2021 Jun 1;77(21):2717-2746

 ³ Code de la santé publique - Article R165-49
 ⁴ HAS. Avis sur les dispositifs médicaux - TRIFECTA GT Bioprothèse valvulaire aortique avec armature. 2023.

² Code de la santé publique - Article L165-11



CONTACT DATA

Hospital Pharmacy, Amiens-Picardie University Hospital 1 rond-point du Professeur Christian Cabrol, 80054 Amiens, FRANCE RICHEZ Ophélie richez.ophelie@chu-amiens.fr



