

# AmphiA

## Aim

- To elucidate the frequency and clinical impact of left atrial appendage thrombus (LAAT) in patients set for transcatheter aortic valve implantation (TAVI)

## Results

- A total of **1050 patients** underwent TAVR between January 2014 and June 2020 and had analyzable CT
- Median age was 80 (IQR 74 – 84); median STS-PROM was 3.4% (IQR 2.3 – 5.5)
- LAAT was present in 48 (**4.6%**) of cases, at baseline these patients had higher STS-risk scores, worse systolic function and a higher incidence of pacemaker in situ.
- All patients with LAAT had a history of AF** and were more frequently on VKA compared to patients without LAAT
- The cumulative incidence of cerebrovascular events at 12 months of follow-up was higher in patients with LAAT (**20.6% vs. 7.1%**,  $P < 0.01$  by log rank)

# Left atrial appendage thrombus and cerebrovascular events post TAVI

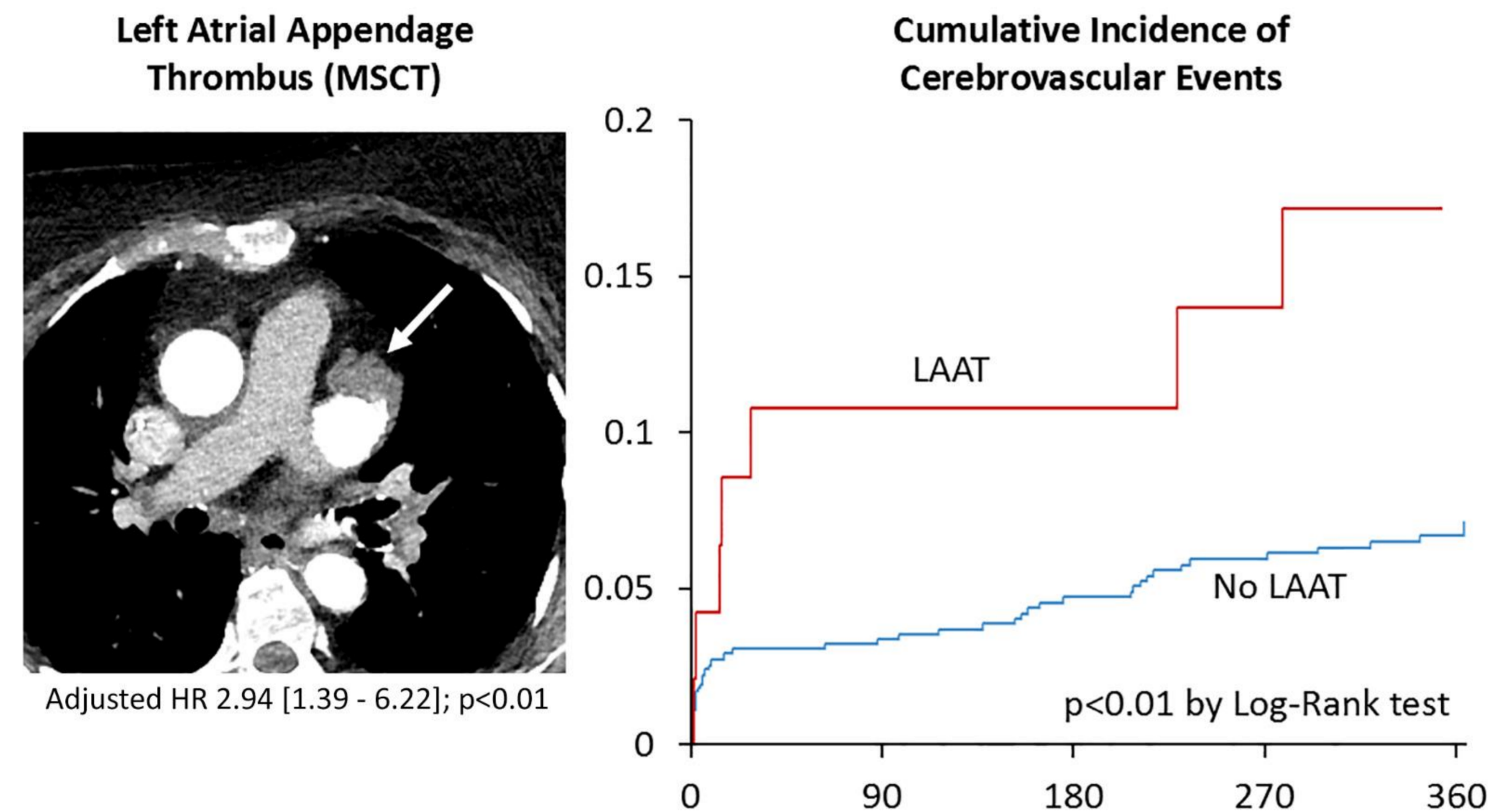
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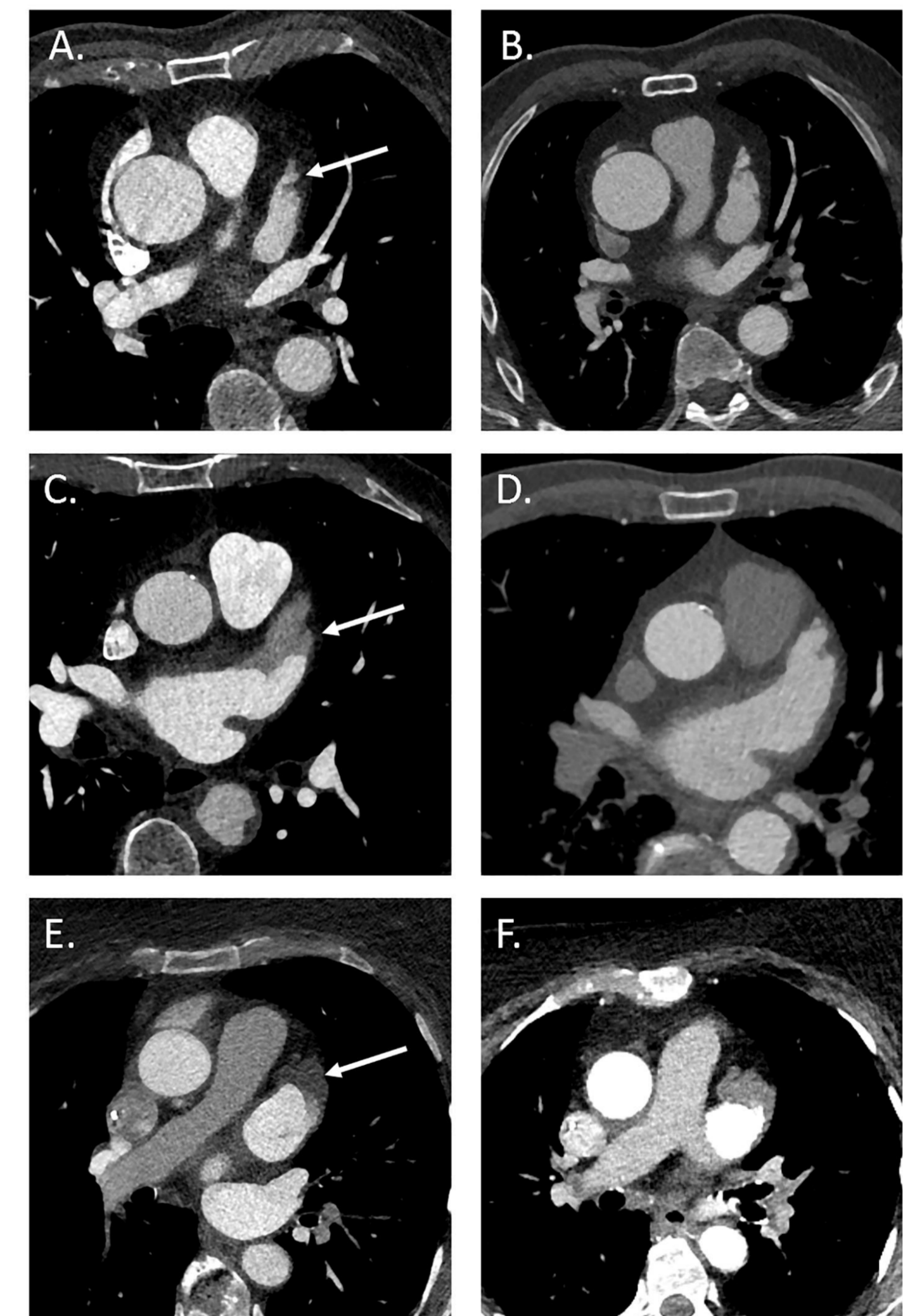
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## Central Image



## LAA thrombus vs. Slow-Flow



Variable	Adj. HR	95% CI	P-value
Age (per year increase)	1.02	(0.98 – 1.06)	0.42
CHA2DS2-Vasc score (per point increase)	1.04	(0.81 – 1.33)	0.77
LAA thrombus on MSCT	2.94	(1.39 – 6.22)	$< 0.01$
Male gender	0.70	(0.40 – 1.21)	0.70
STS-score (per % increase)	1.01	(0.93 – 1.10)	0.82
$>_1$ valve implanted	4.52	(1.79 – 11.25)	$< 0.01$

## Conclusion

Patients with MSCT-identified LAAT were at higher risk for cerebrovascular events during the first year after TAVI