

BHF PROTECT-TAVI



OVER

»»» 1000 «««

PARTICIPANTS RECRUITED

Congratulations to all our sites and to St Bartholomew's Hospital, for randomising the 1000th participant.

NEW SITES!

Welcome **Golden Jubilee Hospital** and **Royal Papworth Hospital**.

We now have 17 open sites.

EVENTS

Please make reporting strokes within 72 hours post-TAVI a priority. Ensure all **imaging** and **supporting documentation** are uploaded for the event. These events are in the process of being validated by our committee.

AUGUST RECRUITMENT

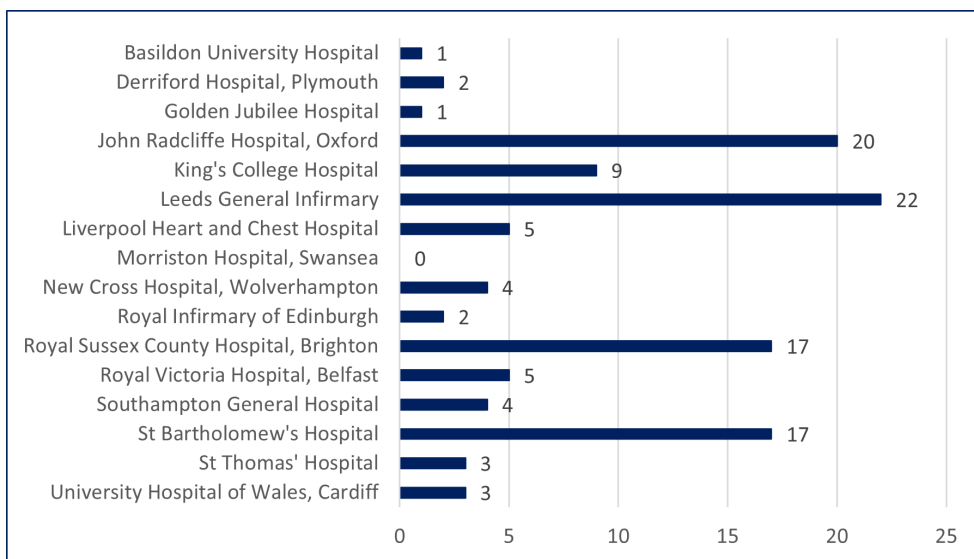


Figure 1: Shows the number of participants recruited in August at each site.

Q&A WITH DR JAMES KENNEDY

Dr Kennedy is Associate Professor of Stroke Medicine, Honorary Consultant in Oxford, and stroke investigator on the BHF PROTECT-TAVI trial.

Why is the Questionnaire to Verify Stroke Free Status used (QVSFS)?

The QVSFS is used to maximise stroke identification. It is recognised as a very effective way of identifying patients who have not had an event. Those patients who answer yes to any of the questions must prompt a local outcome assessment against the stroke definition as described below.

The questionnaire only takes a few minutes, does not require any training and can be administered by staff outside the research team. Please contact the BHF PROTECT-TAVI team for more information.

How is stroke defined in the trial?

The definition of stroke is based on a clinical diagnosis supported by imaging, and not one based on imaging alone. This is to remove any bias in diagnosis driven by the different sensitivity of CT and MR to identify brain infarcts and the different use of imaging modalities across sites.

So, for the primary outcome, stroke is defined as a focal or global neurological deficit of presumed vascular origin lasting more than 24 hours, with those patients with evidence of infarction on imaging without ongoing symptoms being considered in the secondary outcome.

There is a single group of patients that will be deemed to have met the primary outcome, regardless of whether they have ongoing symptoms, and that is those that go for mechanical thrombectomy for large cerebral vessel occlusion in the first 72 hours following TAVI.

What's the mechanism of stroke in TAVI patients?

Stroke affects approximately 3% of TAVI patients, the majority of which will be as a result of debris being released into the circulation during the procedure.

How might the CEP device prevent stroke?

The CEP device is comprised of two filters; one is placed in the brachiocephalic artery and the other in the left common carotid artery. The filters collect debris released during the procedure preventing it from travelling to the brain. However, the filter is not deployed in the left subclavian artery and, therefore, the left vertebral artery is not protected.

CONTACT US

For any queries you may have please email: bhfprotect-tavi@lshtm.ac.uk



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