

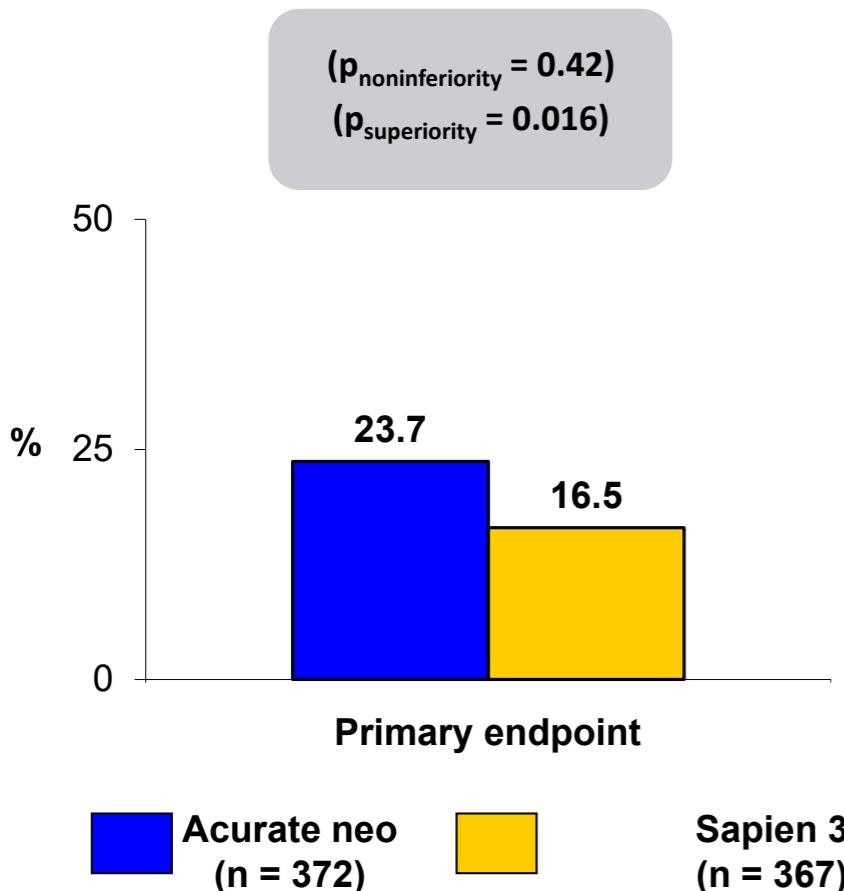
# SCOPE I

## #TCT2019



AMERICAN  
COLLEGE *of*  
CARDIOLOGY®

**Trial Description:** Patients with severe aortic stenosis undergoing transfemoral TAVR were randomized in a 1:1 fashion to Acurate neo or Sapien 3 TAVR valves. They were followed for 30 days.



### RESULTS

- Primary endpoint (death/stroke/bleeding/vascular complications/coronary obstruction/AKI/rehospitalization/repeat intervention/valve dysfunction): Acurate neo vs. Sapien 3: 23.7% vs. 16.5% ( $p_{\text{noninferiority}} = 0.42$ ;  $p_{\text{superiority}} = 0.016$ )
- All-cause mortality: 2.5% vs. 0.8% ( $p = 0.09$ )
- Valve-related dysfunction: 9.7% vs. 4.7% ( $p = 0.0084$ ); need for multiple valves during implant: 3% vs. 1% ( $p = 0.012$ ); new pacemaker implantation: 11.5% vs. 10.3% ( $p = 0.68$ ) 30-day PVL  $\geq$  moderate: 9.4% vs. 2.8% ( $p < 0.0001$ )

### CONCLUSIONS

- TAVR with the self-expanding Acurate neo valve did not meet criteria for noninferiority compared with balloon-expandable Sapien 3 valve among patients undergoing transfemoral TAVR. TAVR with Sapien 3 was superior for the composite 30-day endpoint, driven primarily by lower rates of AKI, paravalvular regurgitation, and vascular complications