

Structural Disease Update

Much progress has been made in recent years in terms of the therapeutic options available for patients with structural heart disease. In this edition of *Cardiac Interventions Today*, we take a look at how far we have come, where we stand, and what might come next.

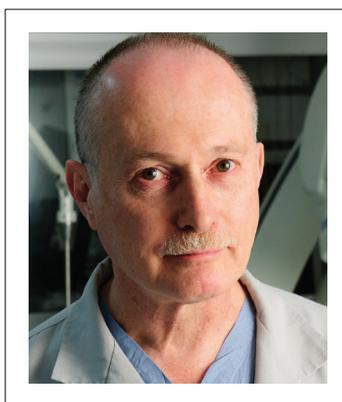
Our focus on structural disease intervention opens with a look at the current state of patent foramen ovale (PFO) closure. Marie-France Poulin, MD, and Clifford J. Kavinsky, MD, provide an overview of the 13-year journey to approval for PFO closure in the United States, including the data that have gotten us to this place and the most recent results that will guide the future of this therapy. Next, Drs. Narbeh Melikian and Philip A. MacCarthy discuss the range of percutaneous PFO closure devices that have been in development, are currently commercially available.

Toby Rogers, MD, then details the patient-specific factors and comorbidities for selecting the proper medical therapy and/or closure device to prevent recurrent cryptogenic stroke in patients with PFOs.

We then move to another hot topic in structural disease—left atrial appendage (LAA) closure. Dee Dee Wang, MD, and Marvin H. Eng, MD, review the applications and limitations of TEE and CTA imaging for evaluating patient anatomy, selecting the correct device size, and guiding LAA closure procedures. With the approval of the Watchman device to close LAAs, the optimal antithrombotic regimen and duration after device implantation is still under consideration and could be specific to each patient. Mathieu Lempereur, MD, and Adel Aminian, MD, discuss the roles for antiplatelet agents and non-vitamin K antagonist oral anticoagulants based on the data available to date.

Our secondary focus for this issue is on Access and Closure. First, we have a roundtable discussion with

Michael H. Salinger, MD; Hyde M. Russell, MD; Susheel Kodali, MD; and Lowell Satler, MD, who share their thoughts on the use of the crossover approach to vascular closure for transcatheter aortic valve replacement (TAVR). Anthony Wassef, MD, and Asim N. Cheema, MD, then review some of the techniques and technologies available to assist with radial access for percutaneous coronary intervention (PCI) in order to provide the most benefit this approach can offer.



This issue also includes a point/counterpoint Valve Update article in which Paul J. Pearson, MD, asserts that TAVR has evolved as a procedure and is ready to be offered in more centers throughout the United States. Meanwhile, D. Craig Miller, MD, contends that the proliferation of TAVR centers will lead to improper patient selection and warns of the harm that would cause. In our Coding & Reimbursement department, Anne Beekman, RN, examines the recent shift toward outpatient PCI

procedures and the benefits and challenges that have been encountered. And finally, we spoke with Saibal Kar, MD, to get his take on current topics surrounding LAA closure and his research on mitral and tricuspid therapies.

This issue summarizes highlights of the recent literature, topics of current interest and controversy, and we hope meets our goal of synthesizing the vast and rapidly expanding interventional literature. ■

A handwritten signature in black ink, appearing to read 'Ted E. Feldman'. The signature is fluid and stylized, with a large, sweeping flourish at the end.

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