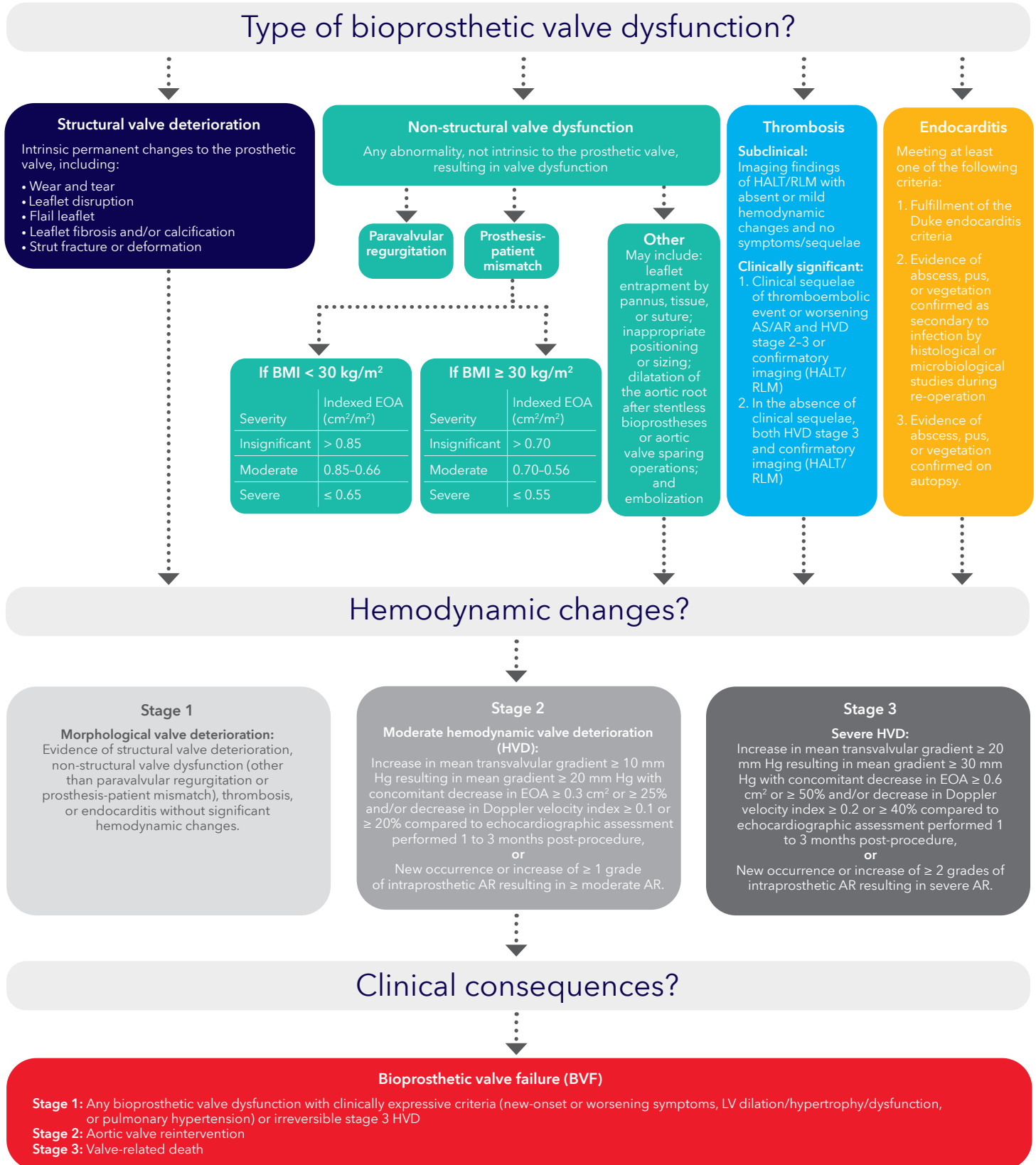


VARC-3 bioprosthetic valve dysfunction¹



If BMI < 30 kg/m²

Severity	Indexed EOA (cm ² /m ²)
Insignificant	> 0.85
Moderate	0.85-0.66
Severe	≤ 0.65

If BMI ≥ 30 kg/m²

Severity	Indexed EOA (cm ² /m ²)
Insignificant	> 0.70
Moderate	0.70-0.56
Severe	≤ 0.55

Stage 1

Morphological valve deterioration:
Evidence of structural valve deterioration, non-structural valve dysfunction (other than paravalvular regurgitation or prosthesis-patient mismatch), thrombosis, or endocarditis without significant hemodynamic changes.

Stage 2

Moderate hemodynamic valve deterioration (HVD):
Increase in mean transvalvular gradient ≥ 10 mm Hg resulting in mean gradient ≥ 20 mm Hg with concomitant decrease in EOA ≥ 0.3 cm² or ≥ 25% and/or decrease in Doppler velocity index ≥ 0.1 or ≥ 20% compared to echocardiographic assessment performed 1 to 3 months post-procedure,
or
New occurrence or increase of ≥ 1 grade of intraprosthetic AR resulting in ≥ moderate AR.

Stage 3

Severe HVD:
Increase in mean transvalvular gradient ≥ 20 mm Hg resulting in mean gradient ≥ 30 mm Hg with concomitant decrease in EOA ≥ 0.6 cm² or ≥ 50% and/or decrease in Doppler velocity index ≥ 0.2 or ≥ 40% compared to echocardiographic assessment performed 1 to 3 months post-procedure,
or
New occurrence or increase of ≥ 2 grades of intraprosthetic AR resulting in severe AR.

Bioprosthetic valve failure (BVF)

Stage 1: Any bioprosthetic valve dysfunction with clinically expressive criteria (new-onset or worsening symptoms, LV dilation/hypertrophy/dysfunction, or pulmonary hypertension) or irreversible stage 3 HVD

Stage 2: Aortic valve reintervention

Stage 3: Valve-related death

Reference

¹ Généreux P, Piazza N, Alu MC, et al. Valve Academic Research Consortium 3: updated endpoint definitions for aortic valve clinical research. *Eur Heart J*. May 14, 2021;42(19):1825-1857.

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