

A novel treatment for a Han patient with high risk of coronary obstruction underwent TAVI procedure using a novel second- generation device

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Abstract

In this study the obstruction of coronary ostium (CO) is unusual but lethal complication under TAVI procedure it is not normally accepted that a range distance between the coronary ostium (CO) and the annulus lower than 10mm or in case of sinus of Valsalva diameter around 30mm, while the existing of bulky counted as a leaflet, this is also in case of the valve in valve implantation, in this situation consider as a risks for coronary occlusion (CO) as for TAVI methodology (1-2). In TAVI device using J-Valve™ system is a brand new second-generation and TAVI device divided in to three U-shapes anatomically oriented devices such as “claspers” which could favour conjectural and “self-positioning” valve implantation (3). Furthermore, Due to the ability to enclosure and snaffle the main Major of leaflets in main time of valve implantation and in specific designed extra bear area located on the valve stent. The novelty of this valve is particular appropriate for the patient who is more in the risk for coronary ostium (CO) such as valve-in-valve implantation. In this study convey the patient of utilize J-Valve in therapy the case with an high risk of coronary ostium (CO) during TAVI procedure.

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Biography

Duraid Al-Midfai considering the cardiovascular major for various reasons. Since I he was a child, he has been fascinated by the world around himself. When he traveled to China and Middle East, the conservation efforts of these two countries interested him and he knew that he wanted to do something related to the CAD disease in Genetics filed.