

Valve-in-valve TAVI for aortic bioprosthetic valve dysfunction

Information for the public

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This procedure works well for aortic bioprosthetic valve dysfunction and there are no serious concerns about its safety.

The aortic valve controls the flow of blood out of the left chamber of the heart (left ventricle) to the body's main artery (aorta). A narrowed or worn aortic valve can be replaced with an artificial valve through open heart surgery or by transcatheter aortic valve implantation (TAVI). If a bioprosthetic artificial valve (made of biological tissue) fails, another bioprosthetic valve can be placed inside it using a tube (catheter) inserted through a small cut in the skin and then through a large artery. This is known as valve-in-valve TAVI. The aim is to replace the faulty valve without the need for open heart surgery.

The [NHS website](#) may be a good place to find out more. NICE's information on [interventional procedures guidance](#) has more about what a procedure is and how we assess them.

Is this procedure right for me?

If you've been offered this procedure, your healthcare professionals should discuss with you what is involved, and tell you about the risks and benefits. They should talk with you about your options, and listen carefully to your views and concerns. Your family can be involved too, if you wish. All of this should happen before you agree (consent) to have the procedure. You should also be told how to find more information about the procedure. Read more about [making decisions about your care](#).

Some questions to think about

- What does the procedure involve?
- What are the possible benefits? How likely am I to get them?
- What are the risks or side effects? How likely are they?
- What happens if the procedure doesn't work or something goes wrong?
- What happens if I don't want the procedure? Are there other treatments available?

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