**BALLOON VALVULOPLASTY AS A BRIDGE TO AORTIC VALVE REPLACEMENT: A SINGLE CENTER EXPERIENCE**

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Introduction: Balloon aortic valvuloplasty (BAV), once considered a palliative procedure for patients who were deemed too high risk for conventional aortic valve replacement, may be an effective bridging strategy when used as a strategy for ultimate aortic valve replacement.

Methods: A cohort of 239 patients from 2008 to June 2011 underwent BAV at our institution. Clinical, hemodynamic, echocardiographic, and mortality data were collected retrospectively and analyzed. Of these 28 (11.7%) had 2 BAV procedures and 64 (26.8%) went on to ultimately have aortic valve replacement (AVR).

Results: Baseline characteristics show an elderly, sick cohort of patients with the mean age 81.9 +/- 8.4 years, mean STS score of 11.7 +/- 7.1%. When stratified into the three categories of ultimate therapy received for severe AS- either single BAV, multiple BAVs, or BAV with ultimate AVR- a statistically significant difference in survival between the groups was found with probability of survival at 1 year for single BAV 55%, multiple BAV 74%, BAV with ultimate AVR 84% (p 0.0001). Probability of survival at 2 years for single BAV 40%, multiple BAV 42%, and BAV with ultimate AVR 78% (p 0.0001) and probability of survival at 3 years for single BAV 20%, multiple BAV 38%, and BAV with ultimate AVR 73% (p 0.0001).

Conclusions: BAV as part of a treatment strategy towards ultimate AVR appears to be an effective strategy at our center. Further larger scale investigation should take place evaluating the role of BAV in these patients.