

- Title** Development of quality indicators for transcatheter aortic valve implantation (TAVI) for treatment of severe aortic stenosis. Expert consensus
- Agency** Avalia-t. Axencia de Avaliación de Tecnoloxías Sanitarias de Galicia
Edificio Administrativo San Lázaro 15781 Santiago de Compostela
Telf.: 881 541 831 Fax: 881 542 854 e-mail: avalia-t@sergas.es web page: <http://avalia-t.sergas.es>
- Reference** avalia-t2012/13-3, <http://www.sergas.es/Docs/Avalia-t/avaliat201213-3indicadoresTAVI.pdf>

Aim

To draw up quality indicators for the use of TAVI in treating symptomatic severe aortic stenosis, based on available scientific evidence and expert opinion.

Conclusions and results

On the basis of a systematic review of the literature and expert opinion, a set of 23 quality indicators was drawn up for evaluating the performance of TAVI in patients with symptomatic severe aortic stenosis.

A group of 15 experts participated actively in defining the structure of the indicators. Initially, 18 indicators were proposed, which were judged appropriate by the panel of experts in the first round. Using the experts' suggestions, a final proposal of 23 indicators was then drawn up. In the second round, all the indicators were classified as appropriate, though the indicators' standards: *Use of multislice CT for measurement of the aortic annulus* and *TAVI use rates in patients with indication for aortic valve replacement* were considered uncertain. In the case of 6 indicators (*Existence of a cardiac surgery department, Existence of a multidisciplinary patient-selection hospital committee, Availability of a patient-selection protocol, Cardiac imaging assessment prior to TAVI, Patients evaluated by a multidisciplinary hospital committee* and *Appropriateness of selection of TAVI candidates*), the group of experts decided on a 100% standard of compliance, thus making these indicators indispensable requirements for performing the technique.

Recommendations

It would be advisable for these indicators to be implemented at all hospitals where the technique is used, to ensure the quality of the procedure and identify possible areas for improvement.

Methods

The modified RAND/UCLA method (i.e., without any face-to-face meeting) was used. In a first stage, a list of proposed indicators and reference standards was drawn up on the basis of systematic review of the literature; in the second stage the proposed indicators were then assessed by a group of experts over the course of 2 scoring rounds.

Further research/reviews required

The indicators implementation in health care system will require.

Written by

Janet Puñal Riobóo, avalia-t, Galicia (Spain).