PERCUTANEOUS CLOSURE OF MITRAL PARAVALVULAR LEAK: LONG-TERM RESULTS IN A SINGLE-CENTER EX-PERIENCE

SUPPLEMENTARY MATERIAL

Supplementary Table S1: Predictors of procedural success:

Factor	P value	
	Univariant analysis	Multivarian analysis
NYHA I-II vs III-IV	0.046	0.093 (NS)
HF vs HA indication	0.002	0.054
Transfusion (yes/no)	0.000	0.085 (NS)
Location (multiple vs no multiple PVL)	0.009	0.030
More than 2 previous surgeries	0.015	NS
Basal hemoglobin	0.063	NS
Basal LDH	0.000	NS
Pulmonary hypertension	0.135	-

Univariate analysis: Pulmonary hypertension, more than 2 previous surgeries, basal NYHA, HF vs HA indication, blood transfusion (yes/no), location (multiple vs no multiple PVL), basal hemoglobin, basal LDH.

Supplementary Table S2: Predictors of major adverse cardiovascular events (MACE) during long-term follow-up:

	P value	HR	95% Conf. Interval
CKD	0.043	2.2	1.0 – 4.6
3 months HF previous admission	0.000	5.7	2.3 – 13.8
First proc. Success	0.002	0.1	0.0 – 0.5
Improve NYHA class at follow-up	0.011	0.4	0.2 – 0.8
HF vs HA indication	0.000	5.9	2.9 – 12.2

Univariate analysis: Sex, previous CAD, CKD, basal NYHA, 3 months HF previous admission, previous red blood cells transfusion (yes/no), basal hemoglobin, basal LDH, STS score, EuroScore I, HF vs HA indication, PVL location, technical success, procedural

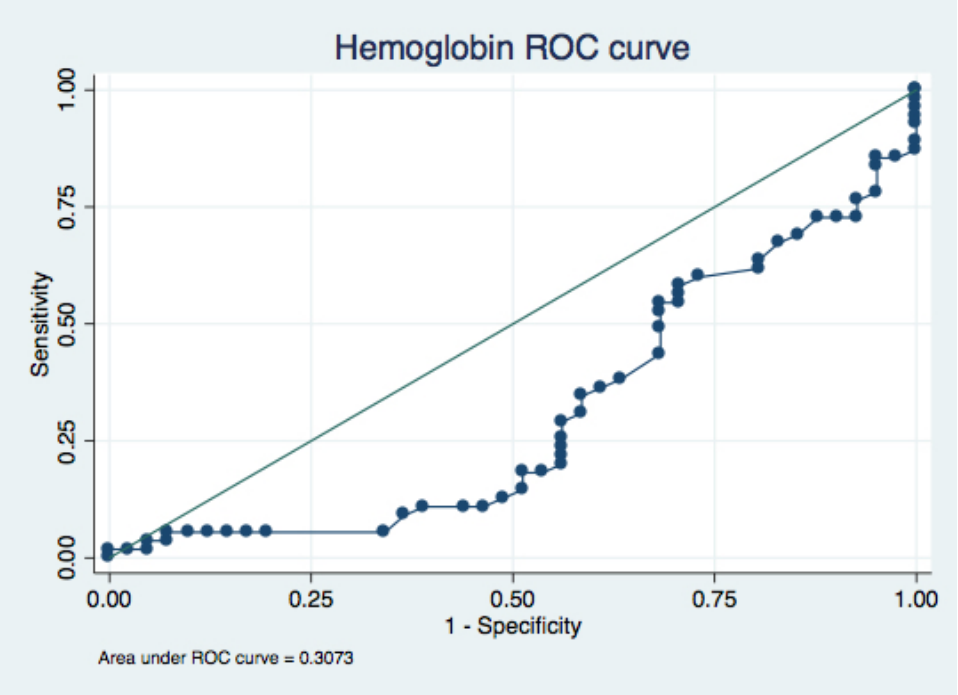
success, procedural complications, in-hospital complications, NYHA IV functional class 90 days after PVL closure, NYHA improve at 90 days and follow-up and red blood cells transfusion (yes/no) in follow-up.

Supplementary Table S3: Predictors of death during long-term follow-up:

	P value	HR	95% Conf. Interval
3 months HF previous admission	0.000	7.0	2.7 – 16.5
NYHA IV functional class 90 days after PVL closure	0.030	4.5	1.2 – 17.4
Improve NYHA class at follow-up	0.004	0.2	0.1 – 0.6
HF vs HA indication	0.000	6.7	2.7 – 16.6

Univariate analysis: Previous CAD, basal NYHA, 3 months HF previous admission, previous red blood cells transfusion (yes/no), basal hemoglobin, basal LDH, STS score, EuroScore I, HF vs HA indication, PVL location, technical success, procedural success, procedural complications, in-hospital complications, NYHA improve at 90 days and follow-up, NYHA IV functional class 90 days after PVL closure and red blood cells transfusion (yes/no) in follow-up.

Supplementary Figure S1



Supplementary Figure S2