Special Issue

Aortic Valve Replacement: Current Clinical Practice and Future Challenges

Message from the Guest Editors

Cardiac surgery has undergone tremendous evolution in recent years, resulting in an operative mortality as low as 1%–3% in patients that underwent elective cardiac surgery. Calcified aortic valve stenosis represents the most common acquired valvular pathology; thus, aortic valve replacement (AVR) is currently the second most frequently performed cardiac surgery after isolated CABG. Besides conventional surgical AVR (SAVR) with either mechanical or biological prosthesis, the evolution of minimally invasive techniques and transcatheter procedures (TAVI, "valve in valve" procedure) paved the way for a more sophisticated treatment. However, the employment of these techniques in intermediate- as well as low-risk patients is still lacking of convincing long-term results. Undoubtedly, all these new technologies and technical advances of the current conventional prostheses enabled heart surgeons to plan and perform patient-tailored management with enhanced outcomes, quality of services, and quality of life. Our aim is to provide the readers with the cutting-edge and up-to-date advances, as well as to discuss the future challenges in this topic.

Guest Editors

Dr. Kyriakos Spiliopoulos
Department of Cardiothoracic Surgery, University of Thessaly, Biopolis, 41110 Larissa, Greece

Dr. Andrew Xanthopoulos
Department of Cardiology, University Hospital of Larissa, 41110 Larissa, Greece

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Journal of Personalized Medicine
Editorial Office
MDPI, Grosspeteranlage 5
4052 Basel, Switzerland
Tel: +41 61 683 77 34
jpm@mdpi.com

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Journal of Personalized Medicine (*JPM*; ISSN 2075-4426) is an international, open access journal aimed at bringing all aspects of personalized medicine to one platform. *JPM* publishes cutting edge, innovative preclinical and translational scientific research and technologies related to personalized medicine (e.g., precision medicine, pharmacogenomics/proteomics, systems biology, 'omics association analysis). *JPM* is covered in Scopus, the Science Citation Index Expanded (SCIE), PubMed, PMC, Embase, and other databases.

Editor-in-Chief

Prof. Dr. Kenneth P.H. Pritzker
Department of Laboratory Medicine and Pathobiology, Department of Surgery, University of Toronto, 6 Queens Pk Crescent W,F, Toronto, ON M5S 3H2, Canada

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