

BRITISH CARDIOVASCULAR INTERVENTION SOCIETY

President

Prof Adrian Banning Department of Cardiology John Radcliffe Hospital Headington Oxford OX3 9DU

Ms Rachel Galloway H.M Assistant Coroner H.M Coroner's Office Manchester City Area Exchange Floor The Royal Exchange Cross Street Manchester, M2 7EF

12 December 2019

Dear Ms Galloway

Honorary Secretary

Department of Cardiology Leeds General Infirmary Great George Street Leeds LS1 3EX

Treasurer

Manchester Heart Centre Manchester Royal Infirmary Oxford Road Manchester M13 9WL

Regulation 28 report (re: Stuart Clarke, deceased)

Thank you for contacting the British Cardiovascular Intervention Society (BCIS) about the outcome of this recent inquest. We note that the patient presented with symptoms of breathlessness in Feb 2018 and sadly died two days after a TAVI procedure in June 2019. We agree that this represents a clinically unacceptable delay (18 months) before the TAVI procedure was performed.

Transcatheter Aortic Valve Intervention (TAVI) is a transformative technology which is much less invasive than conventional open heart surgery. Large international clinical trials have shown that patient outcomes are better than conventional surgery for patients who are 'high risk' (Euroscore II >8%) or 'intermediate risk' (Euroscore II >4%) surgical candidates. As the evidence base increases it is likely that the use of TAVI internationally will grow.

Our professional society has published an updated service specification for TAVI this year (enclosed). In this document we outline the essential criteria for hospitals to provide a high quality TAVI service. These include detailed recommendations about training, hospital volumes, length of stay and national data collection. In particular we recommend a maximum waiting time of 18 weeks between initial referral and treatment and local audit of waiting times.

BCIS would support the Department of Health and NHS England in moves to ensure that there is adequate capacity for TAVI candidates to be seen, investigated and treated without undue delay. In addition, we will contact our members to ask them to review local referral pathways to expedite treatment and prevent delays.

Yours sincerely

Glesham

Dr Gerald Clesham

Chairman, Clinical Standards Group, British Cardiovascular Intervention Society