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GARY GERSHONY: I'm Gary Gershony. I'm an interventional cardiologist on the staff at John Muir Health. My areas of primary interest relate to the field of interventional cardiology, specifically coronary interventions, and more recently in the last few years, structural heart disease, and the very exciting area of transcatheter aortic valve replacement.

Transcatheter aortic valve replacement is part of this new field of interventional cardiology called structural heart disease. Essentially, what that refers to is the ability to use catheters minimally invasively, frequently percutaneously, to either replace damaged or diseased heart valves, fix holes in the heart, and other such problems that in the past needed to be corrected through much more invasive open techniques. The procedure of transcatheter aortic valve replacement, generally known as TAVR for the acronym, refers to a very exciting new technology that was developed in the last decade, most of it in the United States. However, due to regulatory considerations, we were one of the later countries to be able to adopt this very exciting new technology, first being used in Europe and in Canada.

At John Muir Health, we were one of the first programs in the United States to adopt this new technology after it was approved by the FDA approximately five years ago. We have extensive experience with transcatheter aortic valve replacement and have noticed, as have centers around the country, continuing improvements in our results in our ability to offer this treatment to patients who are very sick and very frail, and more recently, even to healthier patients concomitant with the recent expansion of approval by the FDA to use TAVR in healthier and younger patients.

We are very proud of our TAVR program at John Muir Health and our other structural heart disease programs, including mitralclip, and most recently, left atrial appendage closure that'll be used for patients that have atrial fibrillation and who are not good candidates for anti-coagulation. We have really promoted the concept of a heart team approach to treating these types of patients, which means that we include the appropriate disciplines and we work as a team in ways that we've never been able to do this before.

So for example, in our TAVR team, we include members from cardiac surgery, interventional cardiology, imaging cardiologists who are experts in echocardiography, interventional radiology, and, of course, excellent nursing capabilities from a variety of disciplines. We are very excited about the progress that we've made with our structural heart disease program at John Muir Health and feel that we now are able to offer the latest and most advanced technologies in the least invasive way for our patients and with results that exceed the best national benchmarks that have been recently published and with results that are similar to the best, most recognized programs around the country.

We are very excited about the future opportunities that we have to provide these types of treatments to our patients and look forward to working with our referring physicians and the rest of the heart team to continue to advance our program.

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