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Saeed O et al. Effect of Aspirin Dose on Hemocompatibility-Related Outcomes with a Magnetically Levitated Left Ventricular Assist Device: An Analysis From the MOMEMTUM 3 Study. *J Heart Lung Transplant*.

#### STUDY HIGHLIGHTS

Question: Is there a difference between usual dose (325 mg) and low dose (81 mg) ASA on hemocompatibility-related adverse events (HRAEs) in HM3 patients?

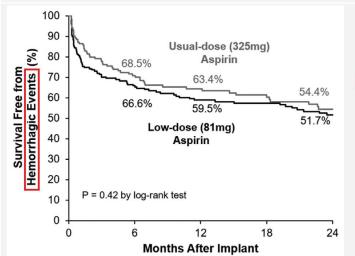
**Design:** Exploratory post-hoc analysis of MOMENTUM 3

**Inclusion:** 321 HM3 patients on warfarin (INR goal 2-3)

Outcomes: Survival free from HRAEs (non-surgical bleeding, pump thrombosis, stroke, and peripheral arterial thromboembolic events) at 2 years

**Results:** No difference in HRAEs (43.4% vs 45.3%, p=0.94). Similar rates of bleeding and thrombosis.

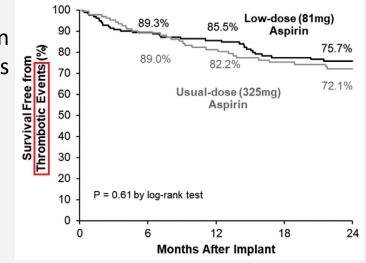
### **CENTRAL FIGURES**



No difference in hemorrhagic events

No difference in **thrombotic** events

ARIES trial (RCT ASA vs. none in HM3) starting soon



#### **REVIEWER'S COMMENTS**

- Comparable INR values at time of HRAE
- ASA regimen could be changed at discretion of treating physician
- Patients that received low dose ASA were older and destination therapy (DT)
- 13% of patients excluded due to no ASA at 7-days post implant

# **Limitations:**

- Unplanned post-hoc exploratory analysis
- Not powered to detect differences in outcomes
- Selection bias as older and DT patients received low dose

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Vieira JL et al. The impact of statin therapy on neurological events following left ventricular assist system implantation in advanced heart failure. J Heart Lung Transplant.

#### STUDY HIGHLIGHTS

**Hypothesis:** Statins may ↓ rates of neurological events (i.e. stroke) following CF-LVAS

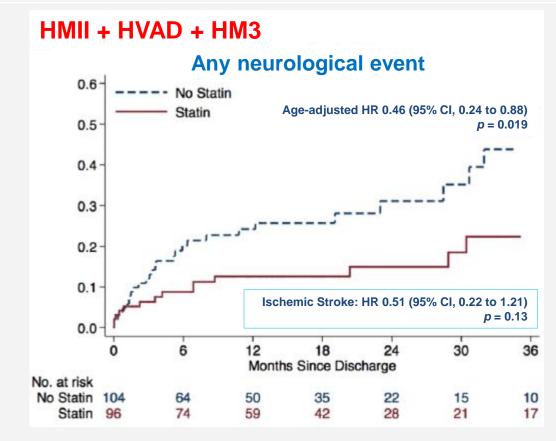
**Design:** Single-center, retrospective, observational

Inclusion: HMII (n=117), HVAD (n=45), HM3 (n=38); 2008-2018; index hospital survival

Outcomes: stroke (ischemic or hemorrhagic), TIA, delirium

Results: Statin assoc. with ↓ neuro events (particularly ischemic stroke if HM3 excluded)

#### **CENTRAL FIGURE**



## HM II + HVAD (excluding HM3)

Any neurological event: HR 0.43 (95% CI, 0.21 to 0.86), p = 0.018 Ischemic Stroke: HR 0.38 (95% CI, 0.15 to 0.99), p = 0.048

#### **REVIEWER'S COMMENTS**

- Statin use = filled ≥2 Rx within 6 months after index discharge
- Comparable aspirin/INR, BP between groups
- Statin group with less events despite higher CHAD2DS2-VASc score
- HM3 lack of effect due to lower numbers vs. less benefit (lower risk)?

# **Limitations:**

- Single center, retrospective
- HMII >50% of population
- Unknown cross-over of statin use