**A REVIEW OF RACIAL DISPARITIES IN TRANSCATHETER AORTIC VALVE REPLACEMENT (TAVR)**

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**Objective:** To review racial disparities in the accessibility, referrals, and performance of Transcatheter Aortic Valve Replacement (TAVR).

**Background:**While the number of TAVR procedures has been increasing annually at an almost 100% rate, the percentage of African American (AA) patients who receive this therapy has remained the same at 3.8%. This is not proportionate to their percentage in the population. Several factors can explain this disparity.

**Method:** We performed a Pubmed and Medline search for this topic and found 56 studies suitable for review.

**Results:** **Racial Differences in the Prevalence of Aortic Stenosis (AS):** AA patients have been found to be at a significantly lower risk of developing severe AS compared to Caucasians (0.3% vs 0.9%). Studies have shown AAs with calcified aortic valves are less likely to progress to AS.

**Socioeconomic and health insurance disparities:** There is a higher number of uninsured AA patients compared to their Caucasian counterparts. Many older minorities have Medicare, which has stringent reimbursement requirements and multiple exclusions for approval of TAVR. In comparison, patients with a combination of private and Medicare insurance have been shown to get the procedure more often.

**Disparities in specialist referrals:** It has been shown that AA patients with severe AS are less likely to be referred to cardiology, more likely to decline an intervention, or be lost to follow-up. **Limited Inclusion in Clinical Trials:**The Partner Trials that pioneered the use of TAVR in high risk AS patients had limited inclusion of AA patients. Access of AAs to Tertiary Care Centers is limited.

**Cultural Perception towards disease and procedure:** AA patients are significantly more likely to refuse AVR compared to Caucasians. Medical decisions are often reached from a group decision by family members who may dissuade the patient without a full understanding of the procedure.

**Conclusion:**Racial disparities in TAVR implantation result from multiple complex factors. A holistic multidisciplinary approach is required to improve TAVR access in African Americans.