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Debating drug-coated balloons vs drug-eluting stents in the management of in-stent restenosis; the LANDMARK trial on the novel Myval transcatheter heart valve; using the ACURATE *neo*2 for bicuspid aortic stenosis from the Neo2 BAV Registry; predicting patient eligibility for early discharge after TAVI with the novel D-PACE scoring system; EAPCI news; and more

nce again, we welcome you to EuroIntervention's 20th year of publication with our first online publication of 2025! Over the years, we've grown along with our speciality by our dedication to bringing you the latest in clinical knowledge and research – and here's what we're offering in this issue.

A debate on the use of drug-coated balloon angioplasty for in-stent restenosis

Let's begin by looking at the treatment of in-stent restenosis: is there a clear choice between drug-coated balloons or drug-eluting stents? Is there a place for both strategies? Are they complementary? The complexity and nuances of these questions are explored by our experts Fernando Alfonso, Robert A. Byrne and Bruno Scheller, followed by critical commentary from Eric Van Belle and Julinda Mehilli

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The novel Myval transcatheter heart valve compared with the SAPIEN and Evolut valves

In a substudy of the LANDMARK trial, **Niels** van Royen, Andreas Baumbach and colleagues perform a head-to-head comparison of the balloon-expandable Myval transcatheter heart valve (THV) versus the balloon-expandable SAPIEN and the self-expanding Evolut THVs. At the primary endpoint, a 30-day composite of safety and effectiveness, the Myval device was found to be non-inferior to the other THVs. **Stephan Windecker and Daijiro Tomii** provide an editorial commentary.

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Predicting delayed conduction disturbances after TAVI – the D-PACE scoring system

To improve our ability to identify patients eligible for early discharge after TAVI, Francesco Bendandi, Francesco Saia and colleagues describe their development of the D-PACE scoring system. Using electrocardiographic and procedural variables, the D-PACE score can stratify TAVI patients according to their postprocedural risk of delayed high-grade atrioventricular block increasing the ability to predict its occurrence and, thus, help identify low-risk patients suitable for next-day discharge. The article is accompanied by an editorial by Stefan Toggweiler.

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Treating bicuspid aortic stenosis – results from the Neo2 BAV Registry

The ACURATE *neo2* transcatheter aortic valve implantation (TAVI) system has never been specifically evaluated for use in bicuspid aortic valve stenosis. The Europe-wide Neo2 BAV Registry addressed this question with authors **Andreas Rück, Darren Mylotte and colleagues** evaluating the safety, efficacy and clinical performance of the ACURATE *neo2* valve in patients with severe bicuspid aortic stenosis. They found this THV demonstrated good technical success and early safety with low rates of stroke, permanent pacemaker implantation and moderate paravalvular leakage.

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