**HVS Valve Research Network Meeting***11th of October 2024* **EACTS**

**Aortic VRN**

1. **Intro**
2. **Database update**
* Data Resource Profile – HVS AV Database being published in the JHVS.
* Growth of database
* Main reasons for referral - Regurgitation, ascending aorta,
* Repair 80.7%, Replacement 19.3%
* Follow up completeness: Total 63.85%, 1 year 82.54%, 2 year 78.37%
	+ Follow up is calculated by clinical follow up
	+ There was a lot of discussion on follow up
1. **Organizational restructuring**
* Telemedicine to Castor Jan 1, 2025
	+ Contract verification/new accounts in castor
	+ Creating handbook to help participants with the transition
1. **Financial plan**
2. **Scientific update**
* Update on ongoing research projects
1. **AVIATOR Kids**
* 7 centers confirmed participation
	+ In the process of getting medical/ethical approval
* Centers can apply but keeping it small is the goal to ensure data is entered and complete
* Change name to Aortic VRN Kids to align with the other databases

**Mitral VRN**

1. **Overview**
	1. Introduction
		1. Aligned with ICHOM
		2. Ambispective design
	2. Pilot Phase
		1. Four medical students entered 150 patients' data into the database in Erasmus MC
		2. Castor can do batch uploads – 1200 patients uploaded 45% of obligated variables were uploaded. If centers wish to do a batch upload, the should contact the database manager. Batch uploads are possible for local databases as we will (inter)national registries.
		3. Follow-up data – sometimes patients are followed up in a different hospital – establish early contact with local hospitals
		4. Creation of Castor EDC handbook, including lessons learned, quick start checklist and necessary preparation to do data entry
		5. Discussion on Mobile Applications and identification/consent for questionnaires Should be specified in legal contracts and possibilities of Castor EDC further explored
2. **Data Resource Profile –** submit to the JHVS
3. **Funding**
4. **Project-based inclusion**
	1. Two project proposals approved – other centers can join
	2. Review of both projects