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Abbott introduces first-of-its kind device to repair leaky tricuspid valve in India

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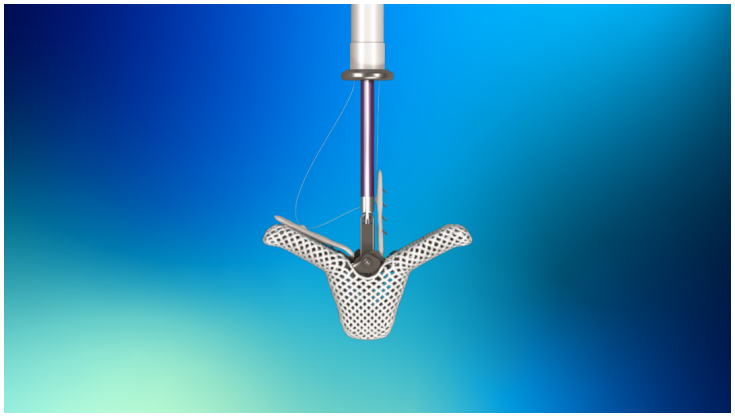
TriClip has a specialised delivery system engineered for navigating the right side of the heart



Abbott, a global healthcare leader, has announced the launch of the TriClip™ transcatheter edge-to-edge repair (TEER) system in India. This device is specifically designed for the treatment of tricuspid regurgitation (TR) or a leaky tricuspid valve.

Delivered through a vein in the leg, TriClip's TEER technology works by clipping together a portion of the leaflets – or flaps of tissue – to repair the tricuspid valve and help blood flow in the right direction without the need for open-heart surgery. It leverages the technology and robust body of evidence from the MitraClip device, the minimally invasive option to repair leaky mitral valves, which occurs on the left (opposite) side of the heart.

The TriClip has a specialised delivery system engineered for navigating the right side of the heart. On average, people who receive TriClip only need one day in the hospital before they recover and can return home.

The tricuspid valve controls blood flow from the heart’s right atrium to the right ventricle. TR occurs when the valve doesn’t close properly, causing a leak and allowing the blood to flow backward in the heart. TR can force the heart to work harder, causing debilitating symptoms such as fatigue and shortness of breath. When left untreated, TR can lead to atrial fibrillation (irregular heartbeat) and heart failure.

For those who continue to have symptoms or persistent TR despite treatment with medical therapy and are not considered good candidates for surgery, TriClip represents an option that can improve a person’s quality of life and reduce hospitalisations for heart failure.

TR is increasingly being recognised as a common but underâ??diagnosed heart valve condition in India, particularly among older adults and people with rheumatic heart disease, atrial fibrillation, pulmonary hypertension, or other valve disorders. Published reviews and echocardiographyâ??based data indicate that clinically significant TR is frequently seen in routine cardiac practice and often progresses over time when left untreated, highlighting the need to address this disease in India.