

## F.6 Aortic regurgitation – regurgitant fraction or volume on cardiac MRI

**Table 19: Clinical evidence profile: AR fraction or volume on cardiac MRI**

Quality assessment							No of patients		Effect	Quality
No of studies	Design	Risk of bias	Inconsistency	Indirectness	Imprecision	Other considerations	Regurgitant fraction or volume on cardiac MRI	Control	Relative (95% CI)	
AR fraction ≤33% vs >33% for predicting indication for surgery during follow-up - adjusted HR (Asymptomatic moderate/severe AR) (follow-up mean 2.6 years)										

1	cohort studies	very serious <sup>1</sup>	no serious inconsistency	no serious indirectness	no serious imprecision	none	74	39	HR 7.4 (2.94 to 18.6)	⊕⊕○○ LOW
<b>AR fraction &lt;34% vs ≥34% for predicting aortic valve surgery during follow-up - adjusted for MRI-derived LV volumes or their indices (Asymptomatic severe AR) (follow-up median 587 days)</b>										
1	cohort studies	very serious <sup>1</sup>	no serious inconsistency	no serious indirectness	no serious imprecision	none	104		HR 1.05 (1.02 to 1.08)	⊕⊕○○ LOW
<b>AR volume ≤42 ml vs &gt;42 ml for predicting indication for surgery during follow-up - adjusted HR (Asymptomatic moderate/severe AR) (follow-up mean 2.6 years)</b>										
1	cohort studies	very serious <sup>1</sup>	no serious inconsistency	no serious indirectness	no serious imprecision	none	74	39	HR 13.2 (3.8 to 45.8)	⊕⊕○○ LOW
<b>AR volume &lt;45 ml vs ≥45 ml for predicting aortic valve surgery during follow-up - adjusted HR (Asymptomatic severe AR) (follow-up median 587 days)</b>										
1	cohort studies	very serious <sup>1</sup>	no serious inconsistency	no serious indirectness	no serious imprecision	none	104		HR 1.03 (1.02 to 1.04)	⊕⊕○○ LOW

<sup>1</sup> Downgraded by 1 increment if the majority of the evidence was at high risk of bias, and downgraded by 2 increments if the majority of the evidence was at very high risk of bias