

SUPPLEMENTARY INFORMATION

Transcatheter tricuspid valve intervention (TTVI) plus optimized medical therapy (OMT) versus optimized medical therapy (OMT) alone in tricuspid regurgitation: a systematic review and meta-analysis

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Supplementary Figure 6: leave-one-out analysis of primary outcomes.

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Supplementary Table 1: Search Strategy.

Database	Search Strategy
PubMed	<p>("Transcatheter Tricuspid" OR "Edge-to-edge repair" OR "Tricuspid Repair" OR "Tricuspid Replacement" OR "Tricuspid Implantation" OR "Tricuspid Intervention" OR TriClip OR PASCAL OR FORMA OR Trialign OR TriCinch OR Cardioband OR TRAIPTA OR K-Clip OR Navigate OR EVOQUE OR LuX-Valve OR Cardiovalve OR "PTVR" OR "PTVI" OR TTVR OR "TEER") AND ("Tricuspid Valve Insufficiency" OR "Tricuspid Valve Regurgitation" OR "Tricuspid Valve" OR "Tricuspid Valve Incompetence" OR "Tricuspid Incompetence" OR "Tricuspid Regurgitation" OR "Atrioventricular Valve Insufficiency" OR "Right Atrioventricular Valve Regurgitation" OR "Tricuspid Valvular Insufficiency" OR "Tricuspid Valvular Regurgitation" OR "Tricuspid Insufficiency" OR "Tricuspidal Insufficiency" OR tricuspid valve replacement) AND ("Medical therapy" OR "Medical therapies" OR "Medical treatment" OR "Medical treatments" OR Medication OR Medications OR "Drug therapy" OR "Drug Therapies" OR Pharmacotherapy OR Pharmacotherapies OR "Conservative Treatment" OR "Conservative Treatments" OR "Conservative Management" OR "Conservative Managements" OR "Conservative Therapy" OR "Conservative Therapies" OR "non-surgical treatment")</p>
Scopus	<p>ALL (("Transcatheter Tricuspid" OR "Edge-to-edge repair" OR "Tricuspid Repair" OR "Tricuspid Replacement" OR "Tricuspid Implantation" OR "Tricuspid Intervention" OR TriClip OR PASCAL OR FORMA OR Trialign OR TriCinch OR Cardioband OR TRAIPTA OR K-Clip OR Navigate OR EVOQUE OR LuX-Valve OR Cardiovalve OR "PTVR" OR "PTVI" OR TTVR OR "TEER") AND ("Tricuspid Valve Insufficiency" OR "Tricuspid Valve Regurgitation" OR "Tricuspid Valve" OR "Tricuspid Valve Incompetence" OR "Tricuspid Incompetence" OR "Tricuspid Regurgitation" OR "Atrioventricular Valve Insufficiency" OR "Right Atrioventricular Valve Regurgitation" OR "Tricuspid Valvular Insufficiency" OR "Tricuspid Valvular Regurgitation" OR "Tricuspid Insufficiency" OR "Tricuspidal Insufficiency" OR tricuspid valve replacement) AND ("Medical therapy" OR "Medical therapies" OR "Medical treatment" OR "Medical treatments" OR Medication OR Medications OR "Drug therapy" OR "Drug Therapies" OR Pharmacotherapy OR Pharmacotherapies OR "Conservative Treatment" OR "Conservative Treatments" OR "Conservative Management" OR "Conservative Managements" OR "Conservative Therapy" OR "Conservative Therapies" OR "non-surgical treatment"))</p>
Web of Science	<p>("Transcatheter Tricuspid" OR "Edge-to-edge repair" OR "Tricuspid Repair" OR "Tricuspid Replacement" OR "Tricuspid Implantation" OR "Tricuspid Intervention" OR TriClip OR PASCAL OR FORMA OR Trialign OR TriCinch OR Cardioband OR TRAIPTA OR K-Clip OR Navigate OR EVOQUE OR LuX-Valve OR Cardiovalve OR "PTVR" OR "PTVI" OR TTVR OR "TEER") AND ("Tricuspid Valve Insufficiency" OR "Tricuspid Valve Regurgitation" OR "Tricuspid Valve" OR "Tricuspid Valve Incompetence" OR "Tricuspid Incompetence" OR "Tricuspid Regurgitation" OR "Atrioventricular Valve Insufficiency" OR "Right Atrioventricular Valve Regurgitation" OR "Tricuspid Valvular Insufficiency" OR "Tricuspid Valvular Regurgitation" OR "Tricuspid Insufficiency" OR "Tricuspidal Insufficiency" OR tricuspid valve replacement) AND ("Medical therapy" OR "Medical therapies" OR "Medical treatment" OR "Medical treatments" OR Medication OR Medications OR "Drug therapy" OR "Drug Therapies" OR Pharmacotherapy OR Pharmacotherapies OR "Conservative Treatment" OR "Conservative Treatments" OR "Conservative Management" OR "Conservative Managements" OR "Conservative Therapy" OR "Conservative Therapies" OR "non-surgical treatment")</p>

Supplementary Table 2: Excluded Full-Text Studies and Reasons for Exclusion

Study	DOI	Reason for Exclusion
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Orban M. et al. 2018	10.1002/ejhf.1147	No OMT comparator
Lee et al. 2021	10.1016/j.athoracsur.2020.09.028	Pilot feasibility; single-arm; no comparative OMT group
Ning et al. 2021	10.3760/cma.j.cn112148-20210125-00091	Small single-center feasibility; no OMT comparator
Meijerink F. et al. 2021	10.1007/s12471-021-01613-3	Registry experience; no OMT comparator
Hahn et al. 2025	10.1056/nejmoa2401918	TRISCEND II (old) less follow-up period
Sorajja et al. 2023	10.1056/nejmoa2300525	TRILUMINATE Pivotal (old) less follow-up period
Kodali et al. 2023	10.1016/j.jacc.2023.02.049	Early feasibility; single-arm
Kitamura et al. 2021	10.1016/j.jcin.2021.09.021	No OMT comparator

Supplementary Table 3: Comparative Registries and Studies Screened but Excluded

Study/Registry	Year	Device(s)	Comparator	Reason for Exclusion
EuroTR Registry	2023	TriClip, PASCAL	None	Single-arm design; no OMT comparator
TriValve Registry	2022	Mixed devices	None	Descriptive outcomes only; no hazard ratios or time-to-event data
TRILUMINATE single-arm study	2019	TriClip	None	single-arm design
TRISCEND I	2021	EVOQUE	None	Feasibility study; no OMT control group
LuX-Valve Pilot Studies	2020-2022	LuX-Valve	None	Small single-arm feasibility cohorts
Other device-specific registries (e.g., PASCAL early experience)	Various	Various	None	Noncomparative; insufficient outcome reporting

Supplementary Table 4: Baseline data scores.

Study ID	Euro Score II		NYHA III to IV		STS mortality Score		KCCQ-OS Score	
	TTVI+OMT	OMT	TTVI+OMT	OMT	TTVI+OMT	OMT	TTVI+OMT	OMT
Wang 2024	N/A	N/A	31 (100%)	46 (80.7%)	11.0 (\pm 2.0)	10.2 (\pm 1.0)	34.74 (\pm 7.4)	45.0 (\pm 5.2)
Arnold 2025 TRISCEND	N/A	N/A	N/A	N/A	N/A	N/A	52.8 (\pm 22.0)	50.6 (\pm 21.4)
Tang 2025	N/A	N/A	160 (56.1%)	155 (54.0%)	N/A	N/A	55.6 (\pm 22.9)	54.6 (\pm 23.8)
Taramasso 2019	12 (\pm 11)	13 (\pm 9)	249.24 (93%)	61.64 (23%)	N/A	N/A	N/A	N/A
Donal 2024	N/A	N/A	59 (38.9%)	68 (45.9%)	N/A	N/A	54.0 (\pm 23.4)	54.0 (\pm 25.0)
Scotti 2022	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Cai 2020	N/A	N/A	43 (81.1%)	48 (67.6%)	N/A	N/A	N/A	N/A

Kresoja 2020	5.07 (±3.16)	5.03 (±4.14)	80 (85.1%)	66 (70.2%)	N/A	N/A	N/A	N/A
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Supplementary Table 5: Baseline data LAB.

Study ID	NT-proBNP (pg/L)		Alanine transaminase (U/L)		Aspartate transaminase (U/L)		eGFR (mL/min/1.73m ²)		Creatinine (mmol/L)	
	TTVI+OMT	OMT	TTVI+OMT	OMT	TTVI+OMT	OMT	TTVI+OMT	OMT	TTVI+OMT	OMT
Wang 2024	1265.4 (±608.7)	923.8 (±81.4)	21.2 (±6.2)	24.0 (±3.2)	30.0 (±7.6)	22.9 (±4.4)	56.82 (±11.9)	66.0 (±7.3)	124.50 (±22.6)	121.2 (±23.4)
Arnold 2025	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Tang 2025	1871100 (±1483900)	2420700 (±3416100)	N/A	N/A	N/A	N/A	55.6 (±21.1)	57.8 (±20.8)	N/A	N/A
Taramasso 2019	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Donal 2024	N/A	N/A	N/A	N/A	N/A	N/A	13 (±8.55)	6 (±4.05)	N/A	N/A
Scotti 2022	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Cai 2020	3598.0 (±984.4)	939.6 (±278.8)	19.4 (±8.9)	22.3 (±18.3)	25.5 (±8.9)	30.7 (±17.6)	44.5 (±18.0)	54.1 (±24.5)	127.6 (±48.0)	125.6 (±67.4)
Kresoja 2020	5372 (±9021)	5819 (±8706)	N/A	N/A	N/A	N/A	47.33 (±24.09)	48.33 (±24.85)	1.37 (±0.45)	1.37 (±0.6)

Supplementary Table 6: Baseline data Echo.

Study ID	TAPSE (mm)		LVEF (%)		SPAP, systolic pulmonary artery pressure		LVESD (mm)		LVEDD (mm)		TR severity n (%)		RV end diastolic diameter mid (mm)	
	TTVI+OMT	OMT	TTVI+OMT	OMT	TTVI+OMT	OMT	TTVI+OMT	OMT	TTVI+OMT	OMT	TTVI+OMT	OMT	TTVI + OMT	OMT
Wang 2024	14.3 (±2)	16.2 (±2.1)	53.9 (±3)	55.8 (±4.3)	45.3 (±2.8)	45.0 (±3.9)	34.5 (±9.3)	35.1 (±4.3)	47.4 (±9.1)	43 (±3.4)	31 (100%)	57 (100%)	44.2 (±5)	38 (±4.7)
Arnold 2025	N/A	N/A	54.4 (±9.9)	54.3 (±11.1)	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Tang 2025	17 (±4)	16 (±4)	59.4 (±9.0)	59.7 (±9.2)	39.1 (±9.4)	39.8 (±9.6)	N/A	N/A	N/A	N/A	N/A	N/A	37 (±)	37 (±8)

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Taramasso 2019	N/A	N/A	49 (±15)	50 (±15)	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Donal 2024	N/A	N/A	N/A	N/A	22.2 (±6.4)	22.6 (±6.7)	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Scotti 2022	16.6 (±4.9)	17.6 (±5.5)	50.6 (±13.5)	50.4 (±18.2)	N/A	N/A	N/A	N/A	27.3 (±5.0)	25.7 (±5.2)	N/A	N/A	N/A	N/A
Cai 2020	15.6 (±3.4)	16.3 (±4.5)	49.7 (±16.6)	51.4 (±13.2)	N/A	N/A	35 (±10)	32 (±10)	49 (±10)	46 (±8)	53 (100%)	71 (100%)	N/A	N/A
Kresoja 2020	16.4 (±5.2)	17.3 (±4.8)	51.6 (±14.3)	51.4 (±14.2)	N/A	N/A	N/A	N/A	N/A	N/A	57 (60.6%)	58 (61.7%)	4 3 · 8 (± 7 · 4)	39.9 (± 9.4)

Supplementary Table 7: shows the risk of bias assessment of randomized trials using the ROB-2 tool.

Study ID	D1	D2	D3	D4	D5	Overall risk of bias
Tang 2025	Low	Low	Low	Low	Low	Low risk of bias
Arnold 2025	Low	Low	Low	Low	Low	Low risk of bias
Donal 2024	Low	Low	Low	Low	Low	Low risk of bias

Supplementary Table 8: shows the risk of bias assessment of non-randomized studies using the ROBINS I tool.

Study ID	D1	D2	D3	D4	D5	D6	D7	Overall risk of bias
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Wang 2024	Serious	Low	Low	Low	Low	Low	Low	Serious risk of bias
Andrea Scotti 2023	Serious	Moderate	Low	Low	Low	Moderate	Low	Moderate risk of bias
Cai 2020	Serious	Serious	Low	Serious	Low	Serious	Serious	Serious risk of bias
Kresoja 2020	Moderate	Low	Low	Low	Low	Low	Low	Moderate risk of bias
Taramasso 2019	Serious	Low	Low	Low	Low	Serious	Serious	Serious risk of bias

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Study	Risk of bias domains					Overall
	D1	D2	D3	D4	D5	
Tang 2025	+	+	+	+	+	+
Arnold 2025	+	+	+	+	+	+
Donal 2024	+	+	+	+	+	+

Domains:
 D1: Bias arising from the randomization process.
 D2: Bias due to deviations from intended intervention.
 D3: Bias due to missing outcome data.
 D4: Bias in measurement of the outcome.
 D5: Bias in selection of the reported result.

Judgement
 Low

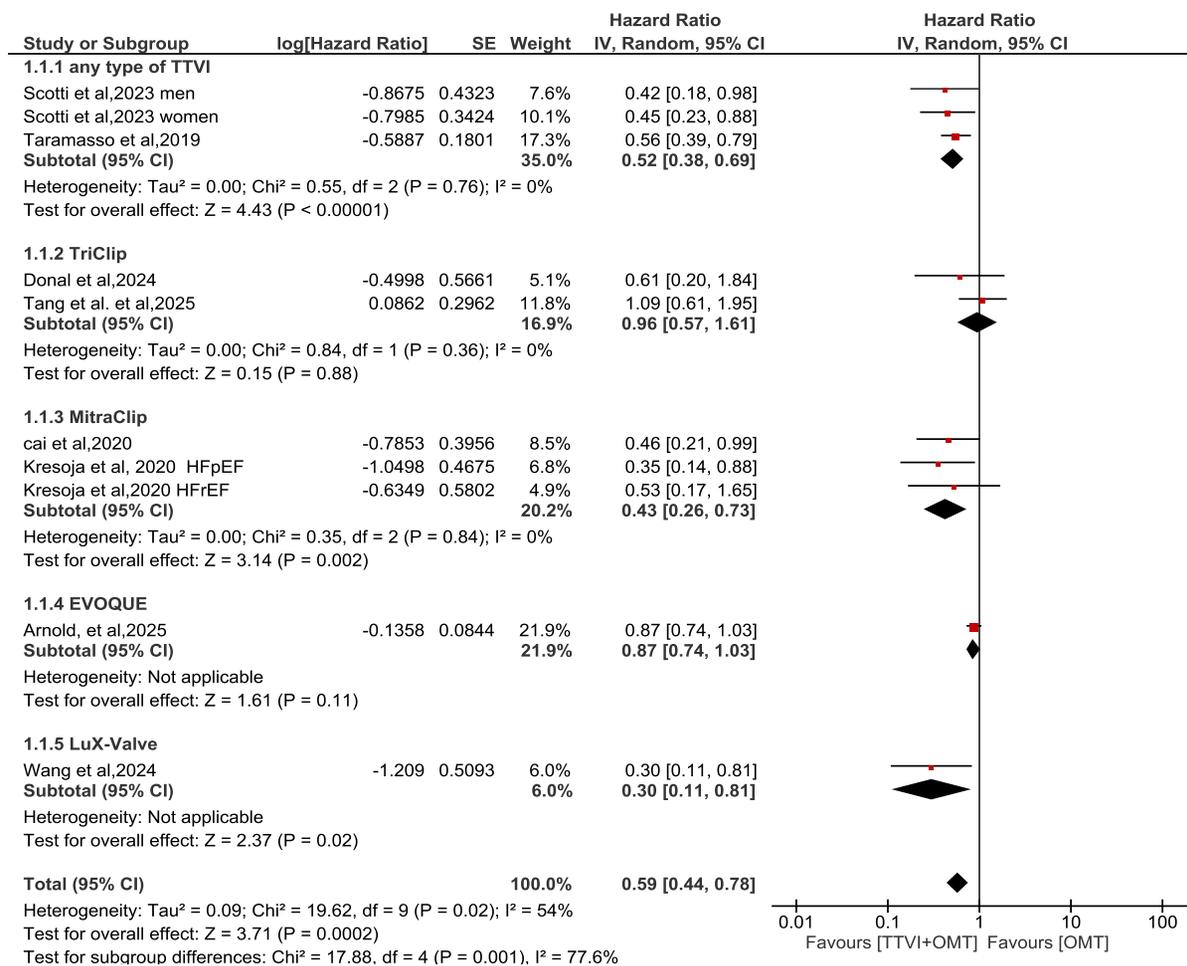
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Study	Risk of bias domains							Overall
	D1	D2	D3	D4	D5	D6	D7	
Wang 2024	⊗	+	+	+	+	+	+	⊗
Andrea Scotti 2023	⊗	-	+	+	+	-	+	-
Cai 2020	⊗	⊗	+	⊗	+	⊗	⊗	⊗
Kresoja 2020	-	+	+	+	+	+	+	-
Taramasso 2019	⊗	+	+	+	+	⊗	⊗	⊗

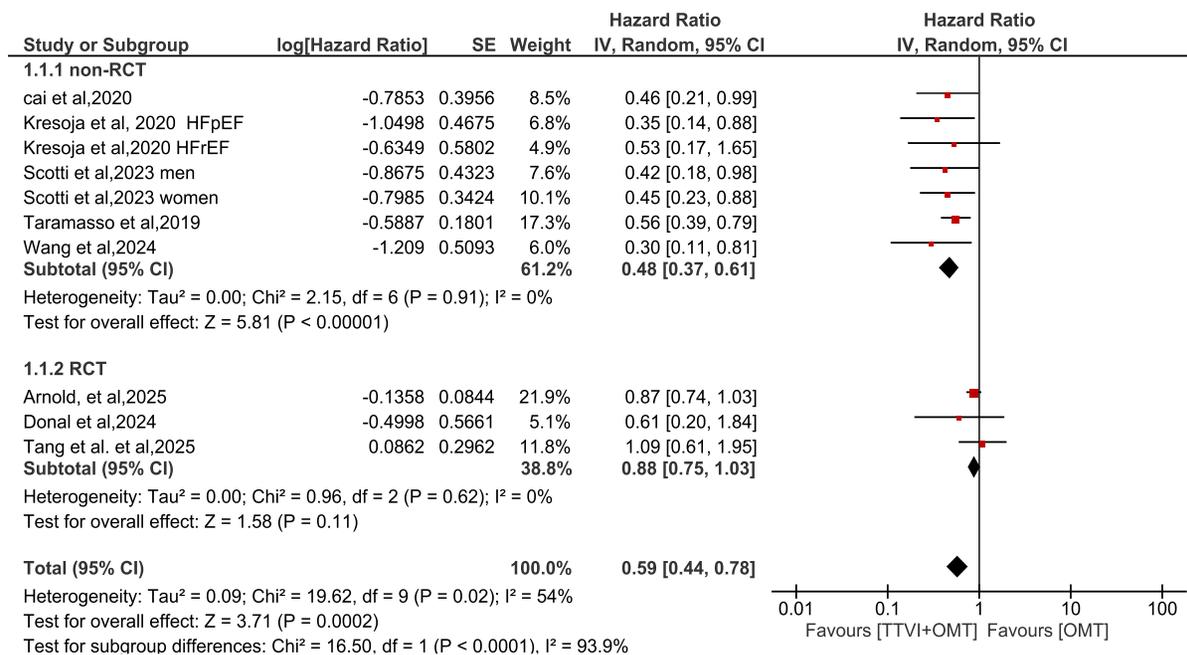
Domains:
 D1: Bias due to confounding.
 D2: Bias due to selection of participants.
 D3: Bias in classification of interventions.
 D4: Bias due to deviations from intended interventions.
 D5: Bias due to missing data.
 D6: Bias in measurement of outcomes.
 D7: Bias in selection of the reported result.

Judgement
 Serious
 Moderate
 Low

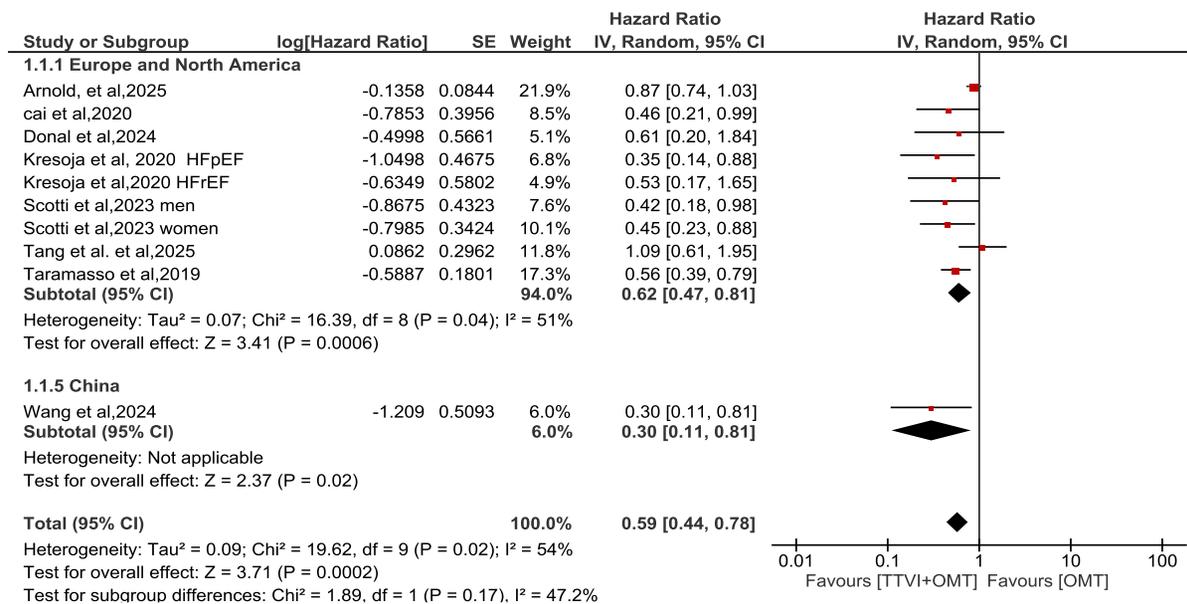
Supplementary Figure 1: (A) shows the risk of bias summary of randomized trials using the ROB-2 tool, (B) shows the risk of bias summary of non-randomized studies using the ROBINS I tool.



Supplementary Figure 2: Forest plot for Subgroup analysis of type of TTVI of hazard ratio of all-cause mortality comparing TTRI+OMT with OMT alone.

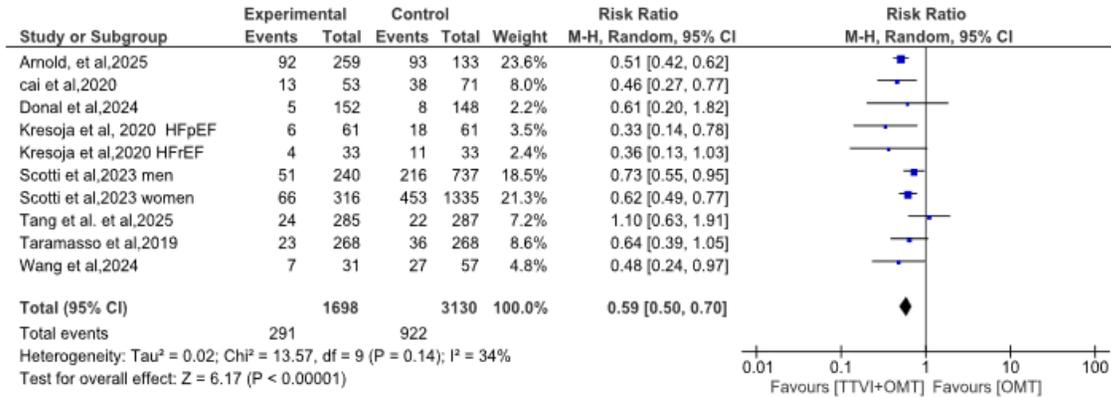


Supplementary Figure 3: Forest plot for Subgroup analysis of study designs of hazard ratio of all-cause mortality comparing TTRI+OMT with OMT alone.

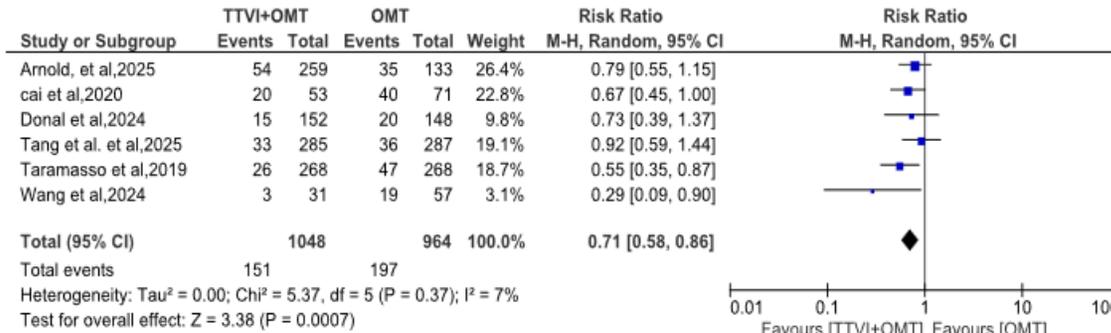


Supplementary Figure 4: Forest plot for Subgroup analysis according to geographical area of hazard ratio of all-cause mortality comparing TTRI+OMT with OMT alone

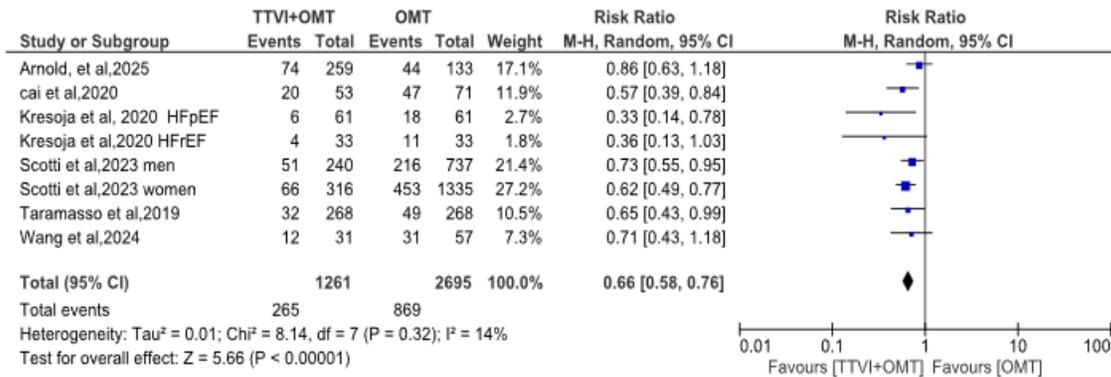
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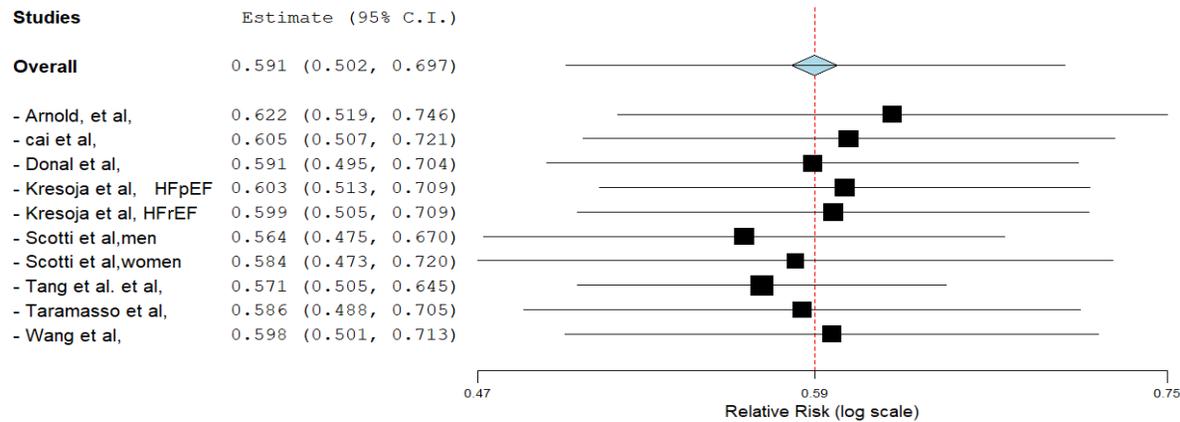
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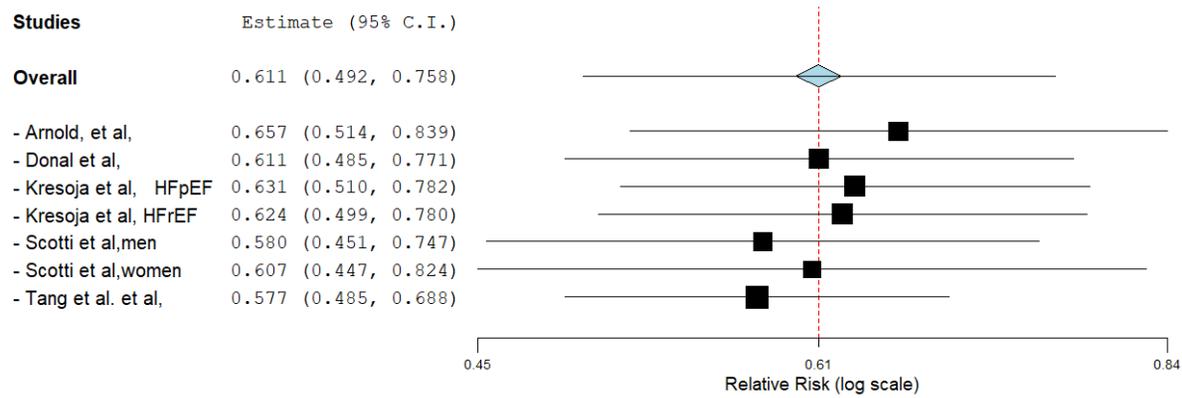
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Supplementary Figure 5: (A) Forest plot of risk ratio of all-cause mortality comparing TTRI+OMT with OMT alone, (B) Forest plot of risk ratio of HF hospitalization comparing TTRI+OMT with OMT alone, (C) Forest plot of risk ratio of combined outcome comparing TTRI+OMT with OMT alone



Supplementary Figure 6: leave-one-out analysis of primary outcomes.



Supplementary Figure 7: leave-one-out analysis of primary outcomes after excluding high-risk bias studies.