

STRUCTURAL HEART DISEASE: LEFT ATRIAL APPENDAGE CLOSURE, PFO CLOSURE

 Moderators: *D. Rubenson, M. Saric*

8:00 AM	Case Studies: Left Atrial Appendage, Thrombus, Spontaneous Echo, Contrast <i>D. Rubenson</i>
8:20 AM	Left Atrial Appendage Occlusion in the Era of Novel Oral Anticoagulants <i>R. Makkar</i>
8:40 AM	Case Studies: Role of TEE in Left Atrial Appendage Occluder Device Placement (Pre and Intraprocedure) <i>B. Khandheria</i>
9:00 AM	Case Studies: Oops, What Went Wrong Here? Thrombus On or Leak Around the Device? <i>M. Saric</i>
9:20 AM	Patent Foramen Ovale: Diagnosis and Treatment: Master Clinician and Former Editor Perspective <i>A. DeMaria</i>
9:45 AM	Case Studies: 2D/3D TEE in Evaluation of Atrial Septum <i>R. Lang</i>
10:05 AM	Case Studies: Closure of Paravalvular Regurgitation <i>R. Hahn</i>
10:25 AM	Question and Answer
10:45 AM	Refreshment Break and Visit Exhibits

 31st Annual State of the Art Echocardiography | San Diego, CA

February 19, 2018 | 9:00 – 9:20 PM | 20 min

Oops... What Went Wrong: Thrombus or Device Leak

Muhamed Sarić MD, PhD, MPA
 Director of Noninvasive Cardiology | Echo Lab
 Associate Professor of Medicine

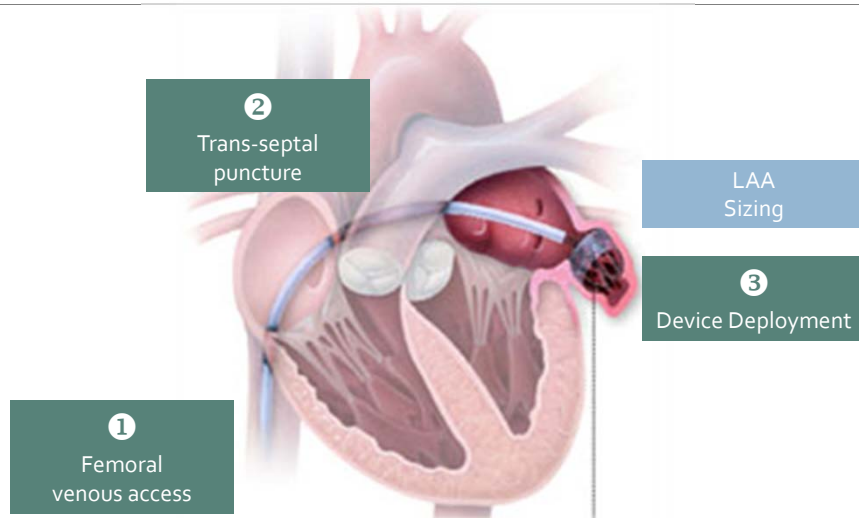


Disclosures

Speakers Bureau (Philips, Medtronic)
Advisory Board (Siemens)

Use of experimental devices in approved clinical trials will be discussed

Percutaneous LAA Occlusion: Procedural Steps



Percutaneous LAA Closure Devices



WATCHMAN



AMULET



LARIAT

**ENDOCARDIAL
LAA EXCLUSION**

**EPICARDIAL
LAA EXCLUSION**

Percutaneous LAA Closure Devices



Karl Eugen Hauptmann



Eberhard Grube



Kurt Amplatz



William E. Cohn

WATCHMAN
First to implant a Watchman device
in 2002 in Germany

AMULET
Inventor of Amplatz
family of devices

LARIAT
Inventor of Lariat device
at Texas Heart Institute

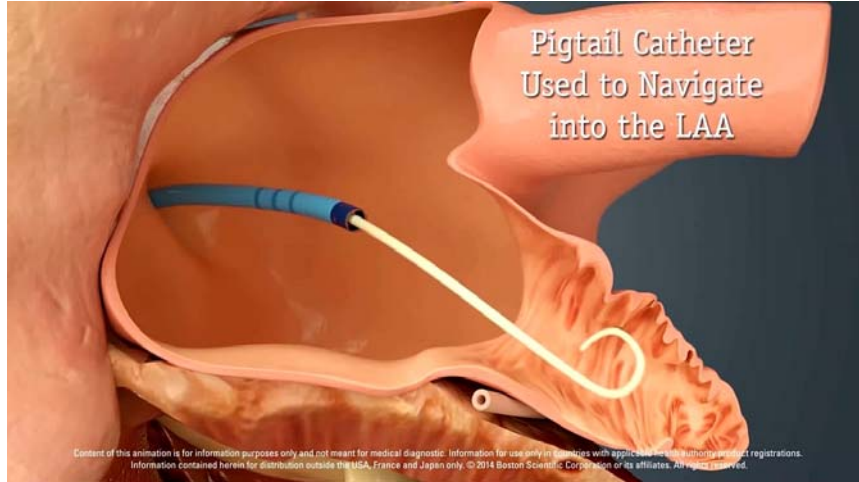
WATCHMAN PROCEDURE



WATCHMAN PROCEDURE



WATCHMAN PROCEDURE



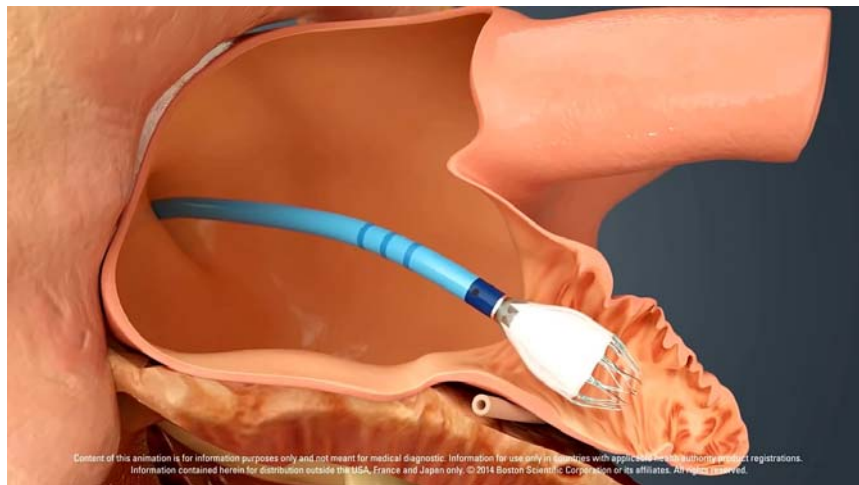
WATCHMAN PROCEDURE



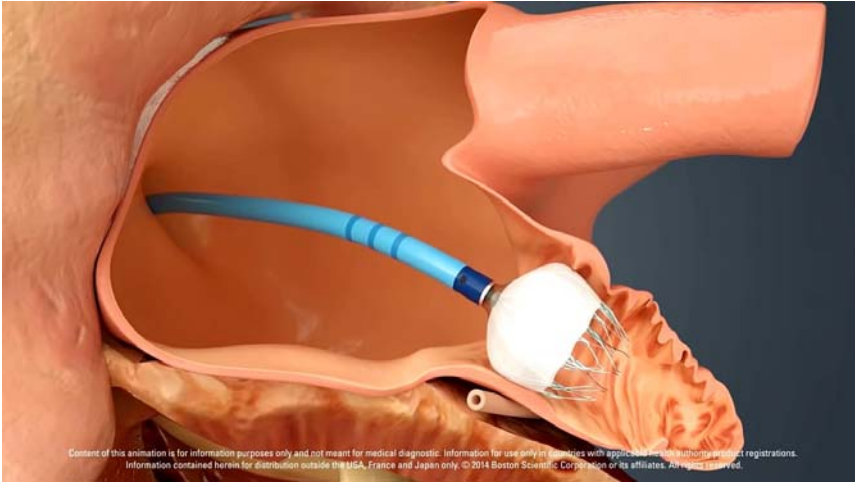
WATCHMAN PROCEDURE



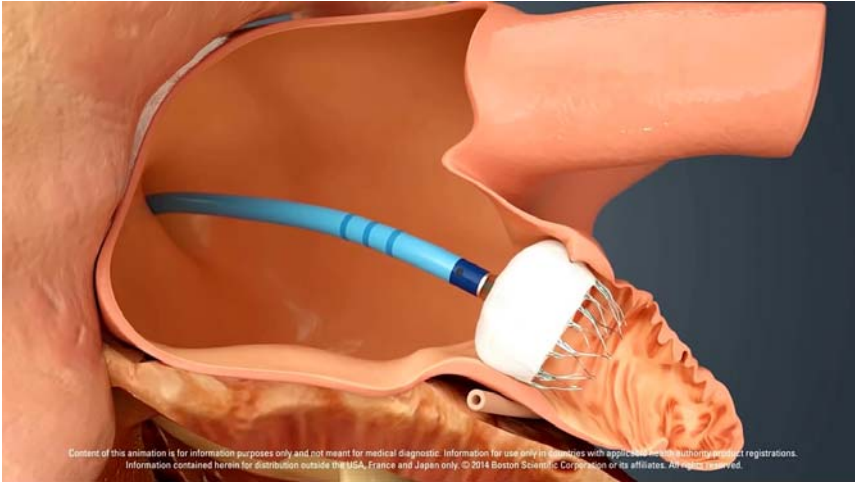
WATCHMAN PROCEDURE



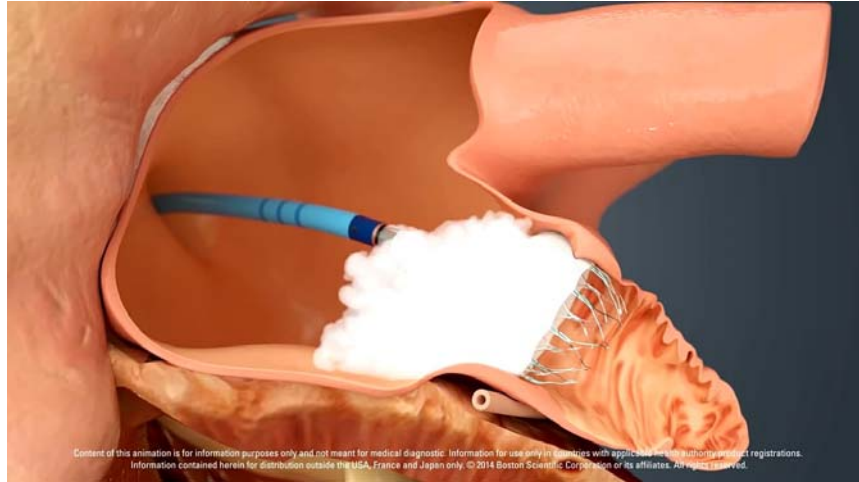
WATCHMAN PROCEDURE



WATCHMAN PROCEDURE



WATCHMAN PROCEDURE



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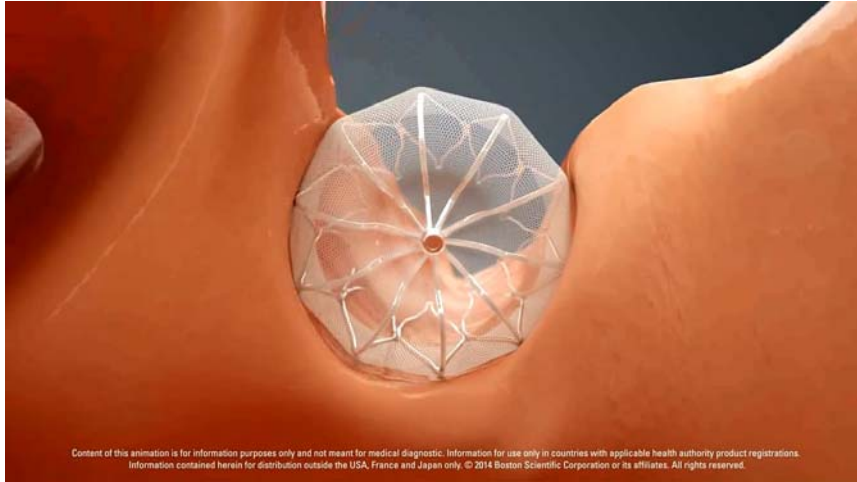
WATCHMAN PROCEDURE



To release the
WATCHMAN Device,
unscrew the core wire

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WATCHMAN PROCEDURE



WATCHMAN PROCEDURE



WATCHMAN PROCEDURE



IMAGING OF LAA DEVICE CLOSURE PROCEDURE

Real-time complementary & collaborative use of
fluoroscopy + transesophageal echocardiography

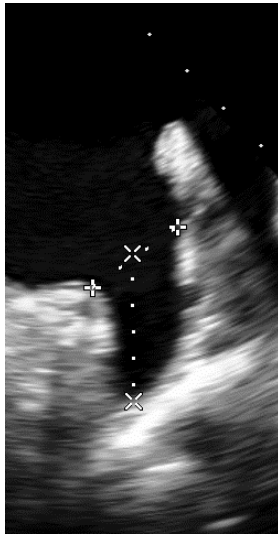
LAA DEVICE CLOSURE PROCEDURE: ROAD MAP

1. Left atrial appendage (LAA) sizing
2. Trans-septal puncture
3. Device deployment in LAA

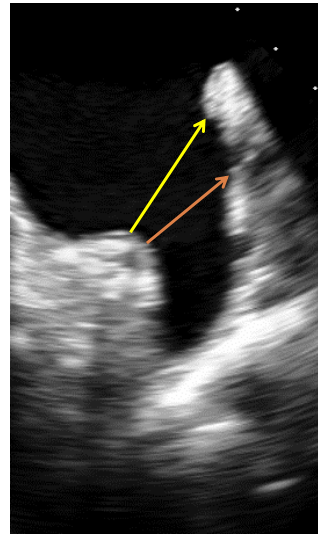
Step #1

- LAA Sizing
- Demonstration of exclusion criteria

LAA Sizing: Endocardial Devices



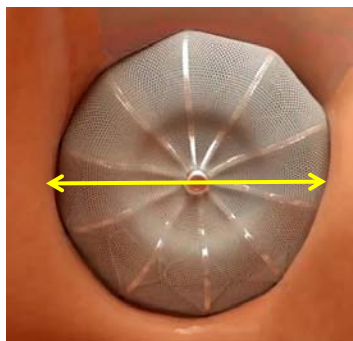
Sizing based on
LAA **diameter** and
depth.



Anatomic orifice
diameter

Sizing orifice
diameter

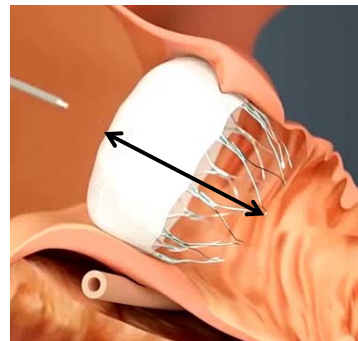
WATCHMAN Device Sizing



DIAMETER

Watchman devices come in
5 diameter sizes:

21, 24, 27, 30, 33 mm

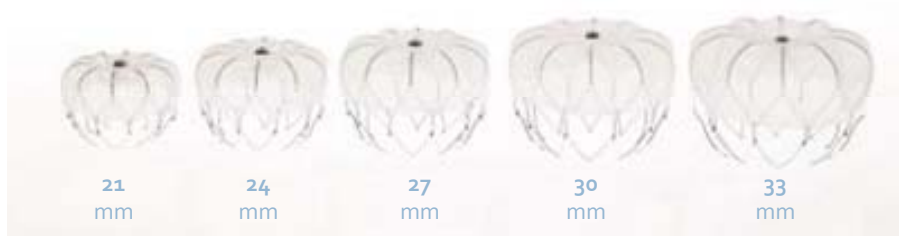


LENGTH

Watchman length is
proportional to diameter

Watchman Device Sizes

Watchman comes in 5 diameter sizes, with 3-mm diameter increments.



US QUARTER
Diameter
24 mm

Watchman Device Sizing

STEP #1

Measure LAA diameter
at TEE angles
0, 45, 90 & 135°

STEP #2

Select the
largest LAA diameter measured.

STEP #3

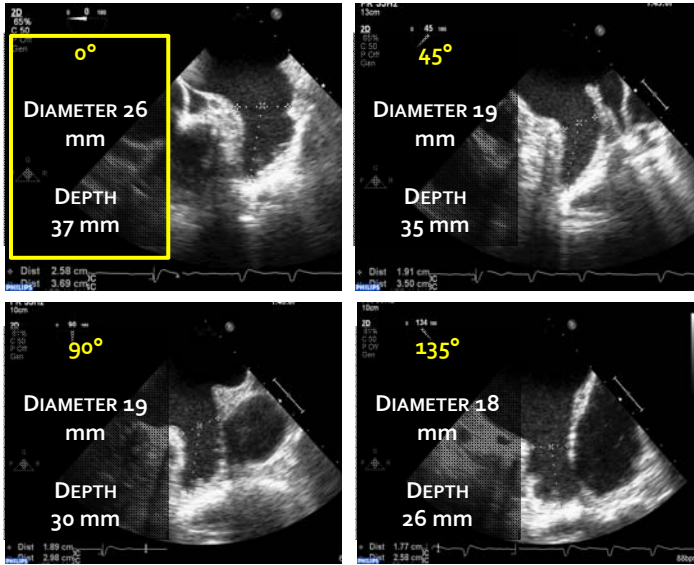
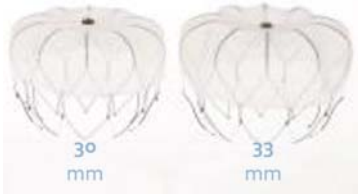
Use a lookup table to select
appropriately **oversized** device.



LAA Diameter	Device Diameter	Device Compression
17-19	21	16.8-19.3
20-22	24	19.2-22.1
23-25	27	21.6-24.8
26-28	30	24.0-27.6
29-31	33	26.4-30.4

LA APPENDAGE SIZING: 2D TEE

Select the largest LAA measurements for Watchman device sizing.



LA APPENDAGE SIZING

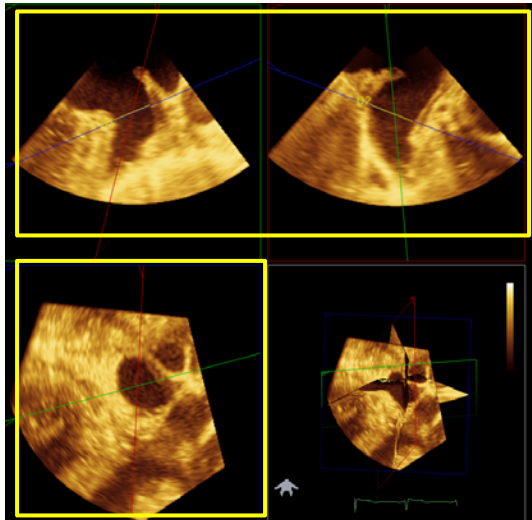
3D TEE | MULTIPLANE RECONSTRUCTION (MPR)

LONG AXES

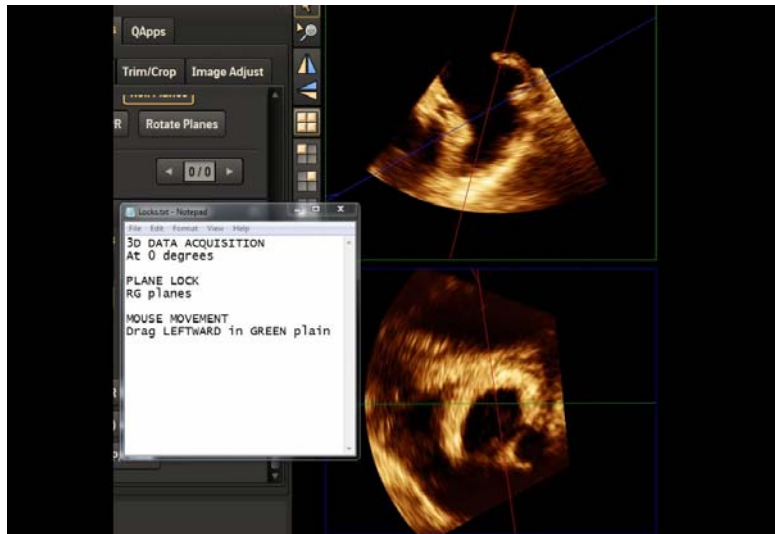
MPR assures measuring LAA diameter at same level in all long-axis views.

SHORT AXIS

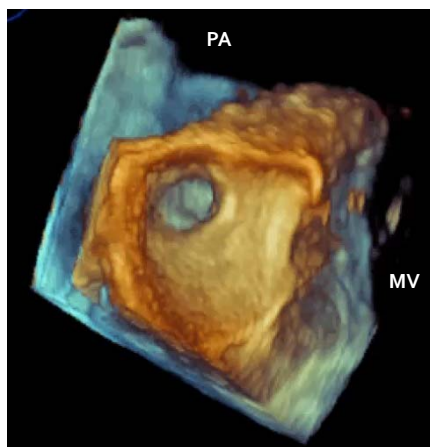
MPR allows for visualization of LAA orifice shape in short-axis views.



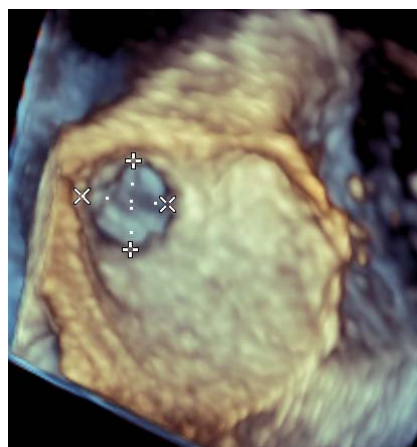
LAA on 3D TEE: 'NYU Twirl'



LA Appendage Sizing on 3D TEE



Dynamic change in size & shape of LAA orifice during the cardiac cycle.



Direct on-image LAA diameter measurements may **NOT** be precise.

Watchman

FDA Indication for Watchman LAA Occluder

The WATCHMAN Device is Indicated to reduce the risk of thromboembolism from the left atrial appendage in patients:

- ▶ With non-valvular AF who are at increased risk for stroke and systemic embolism based on CHADS2 or CHA2DS2-VASc scores;
- ▶ Are deemed by their physicians to be suitable for warfarin; and
- ▶ Have an appropriate rationale to seek a non-pharmacologic alternative to warfarin

Watchman Device Sizes

- ▶ Watchman comes in 5 different sizes, 3 mm apart
- ▶ Size is based on the device diameter
- ▶ Available sizes 21, 24, 27, 30, 33 mm
- ▶ Implanted Watchman should be appropriately oversized for a given LAA diameter

LAA Anatomic Exclusion Criteria

- ▶ **Largest LAA orifice diameter < 16.8 mm OR > 30.4 mm**
That is, the largest LAA orifice size cannot be smaller the smallest diameter required for the 21-mm Watchman and cannot be larger than the largest diameter required for the 33-mm Watchman.

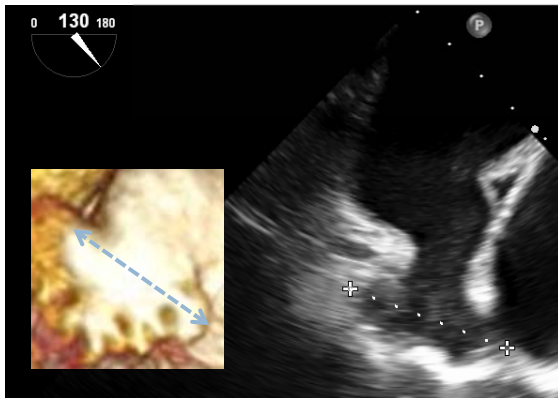
LAA diameter and depth are measured on TEE at 0, 45, 90 and 135 degrees. The largest diameter and depth obtained from these 4 angles is then used. At 0 degrees, measure from left coronary artery to 2 cm from tip of LAA coumadin ridge. At other angles from top of MV annulus to 2 cm from tip of LAA coumadin ridge.
- ▶ **LAA depth < Largest LAA orifice diameter**
That is, a patient's LAA cannot be too shallow.
- ▶ **The depth of the secondary LAA lobe (if present) from the LAA orifice plane < 1 cm**
That is, the secondary lobe cannot be too close to the LAA orifice.
- ▶ **Presence of intracardiac thrombus or LAA dense smoke**

saric.us/economy

LAA Sizing: Lariat Device



LARIAT DIAMETER
(40 mm)



LAA WIDTH
Should be less than
Lariat diameter
(< 40 mm)

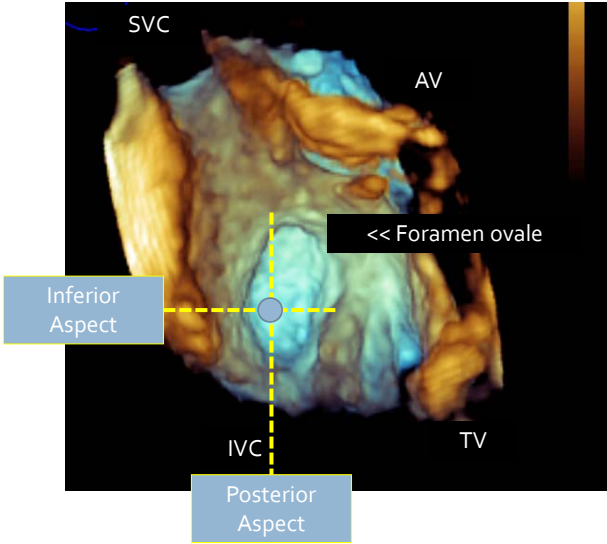
Step #2

- Transseptal puncture

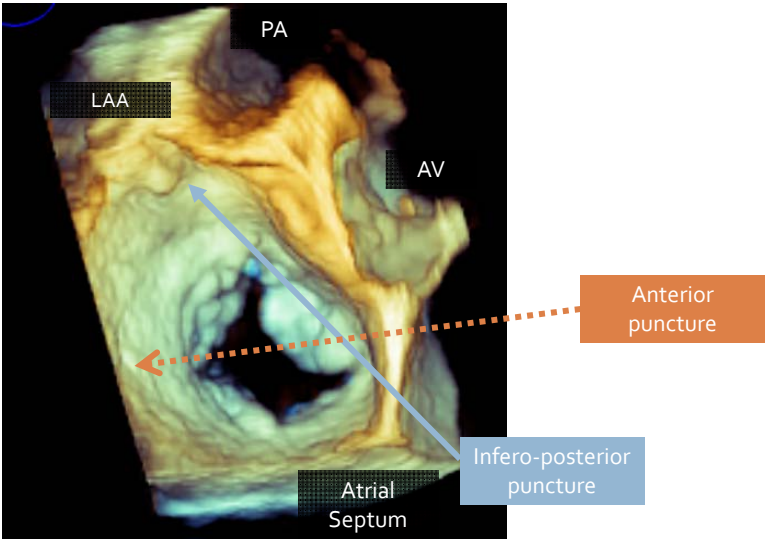
Trans-septal Puncture

TEE provides guidance for trans-septal puncture
in the **posterior & inferior** aspect of the interatrial septum.

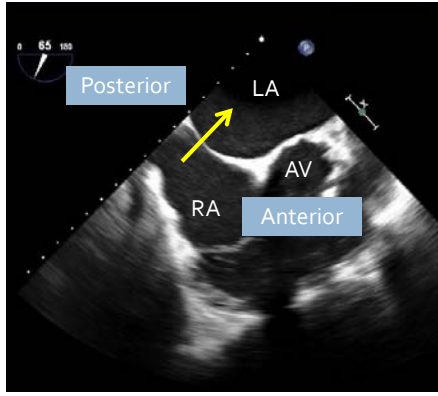
Fossa Ovalis | Right Atrial Perspective



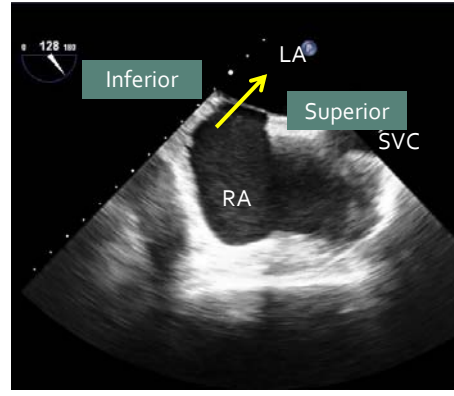
Trans-septal Puncture | Optimal Location



Trans-septal Puncture | Optimal Location

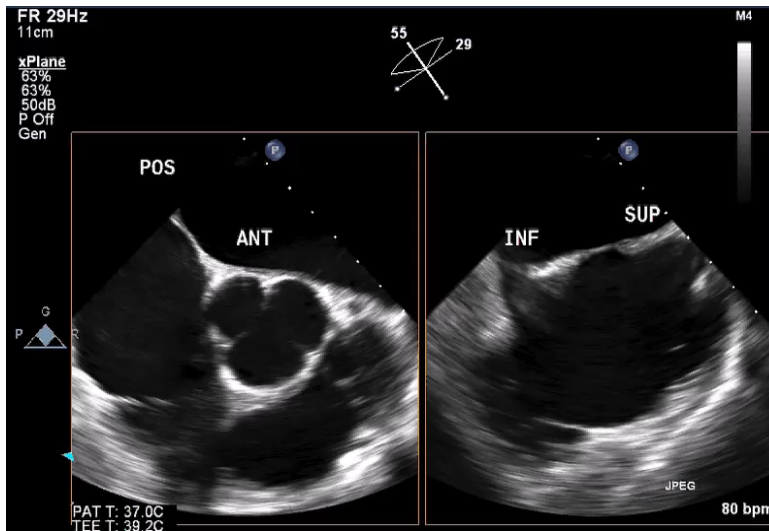


TEE | AV SHORT AXIS

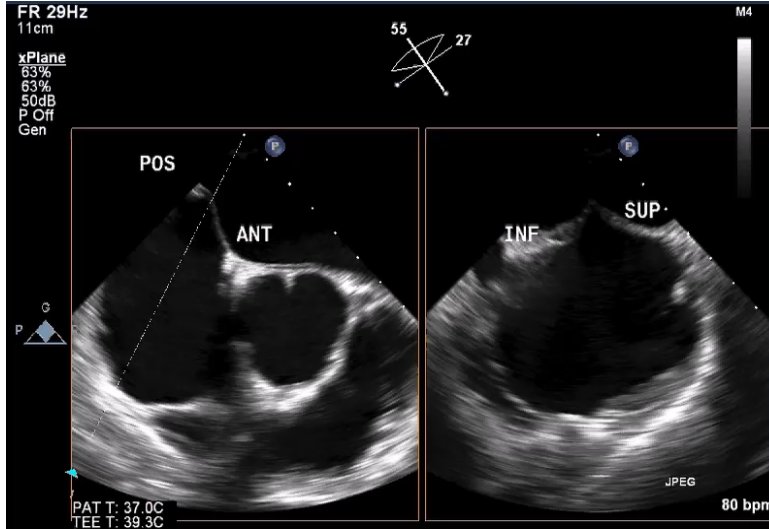


TEE | BICAVAL VIEW

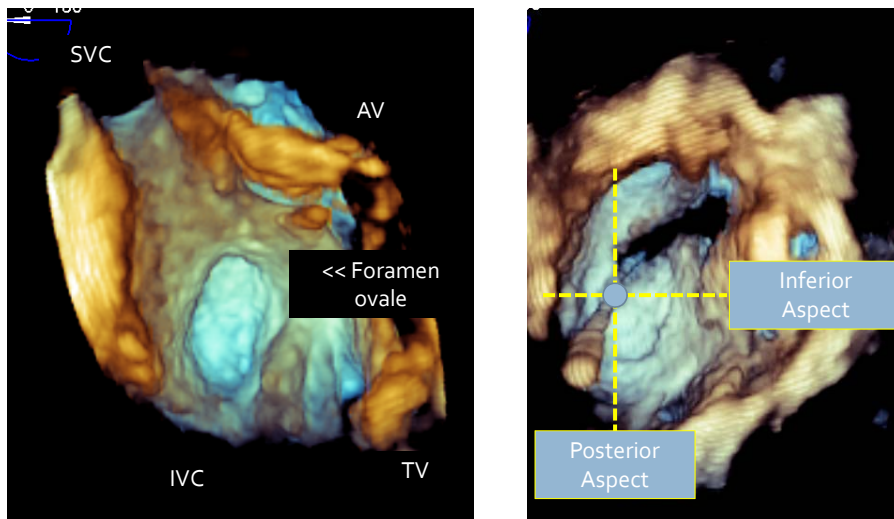
Trans-septal Puncture | Optimal Location



Trans-septal Puncture | Optimal Location



Trans-septal Puncture | Optimal Location



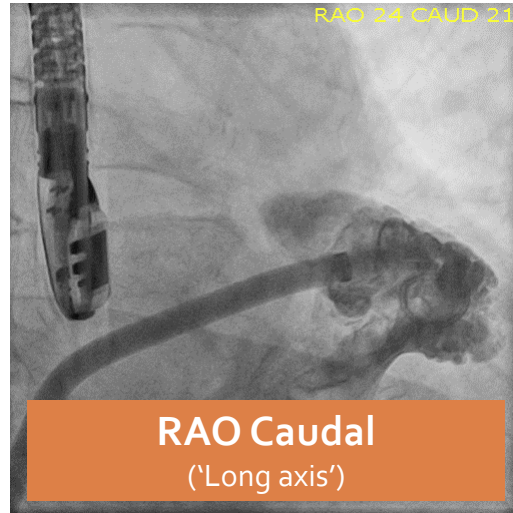
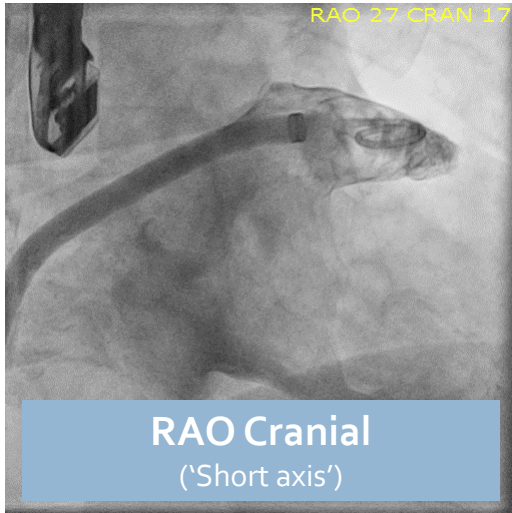
Step #3

- LAA Occluder Device Deployment

LAA Occluder Device Deployment

Complementary roles of **echocardiography** and **fluoroscopy**
during device deployment.

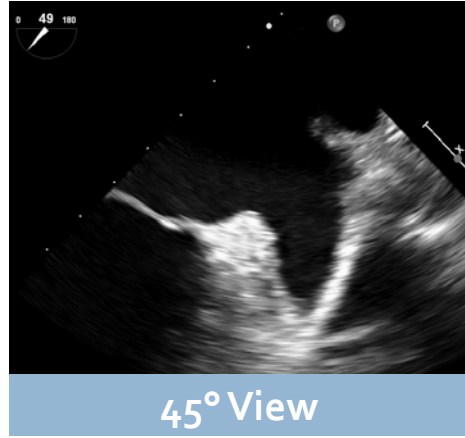
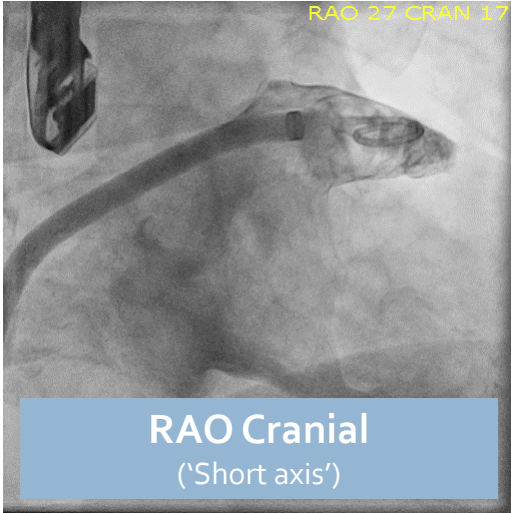
LAA Fluoroscopy View



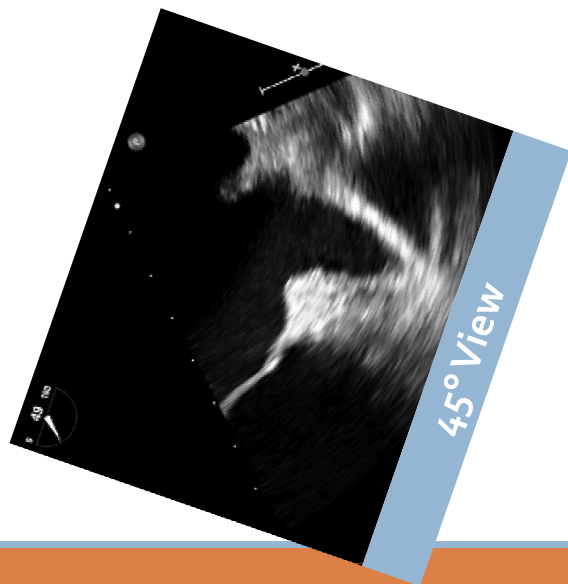
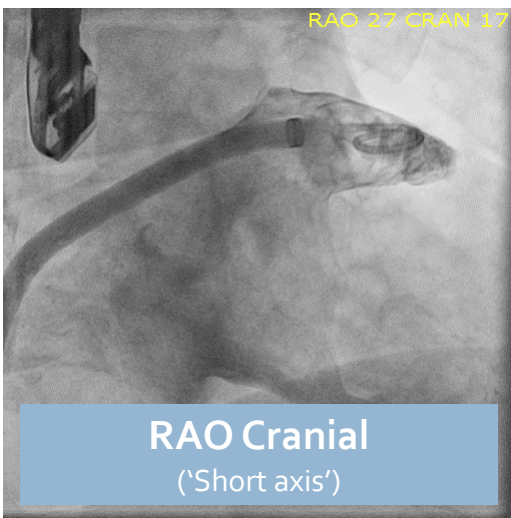
Equivalent Views

What TEE views are equivalent to fluoroscopic RAO views?

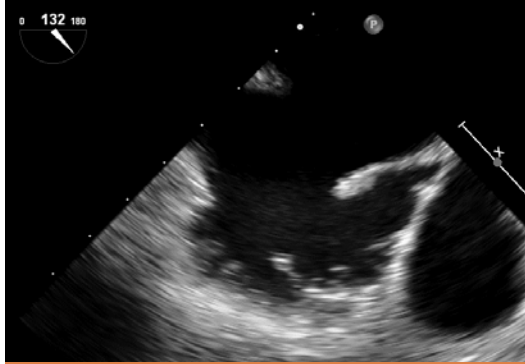
Fluoroscopy vs. TEE



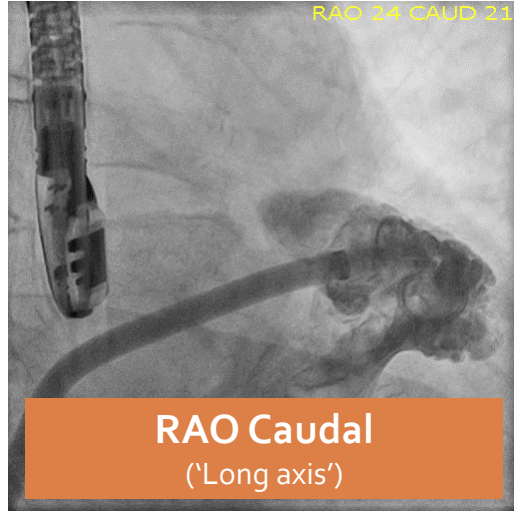
Fluoroscopy vs. TEE



LAA Fluoroscopy View

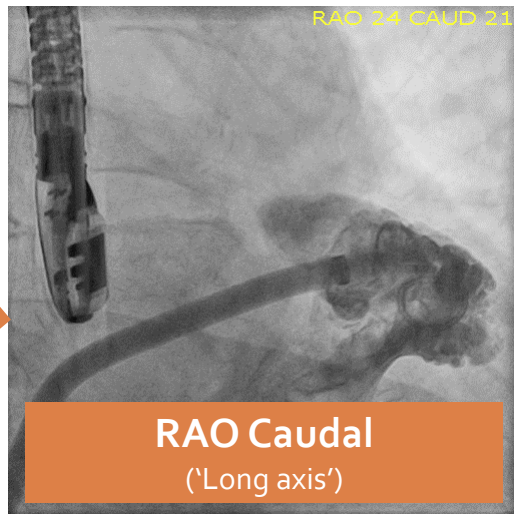
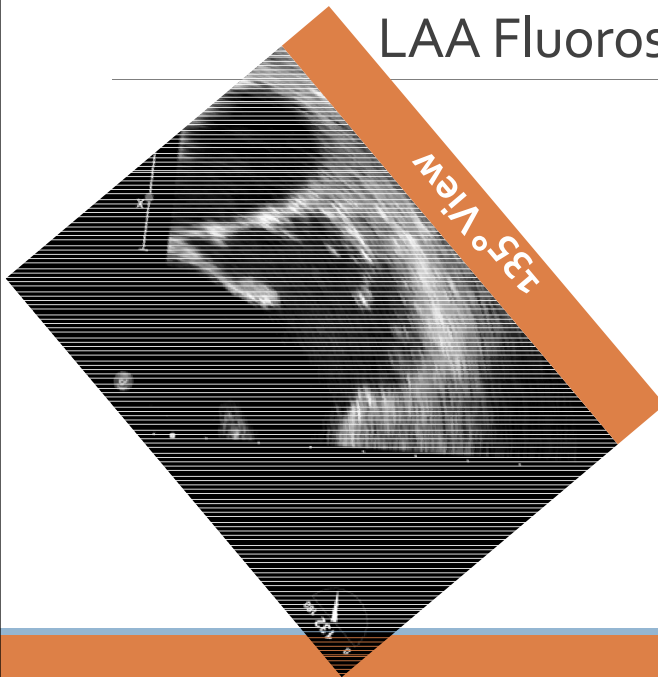


135° View



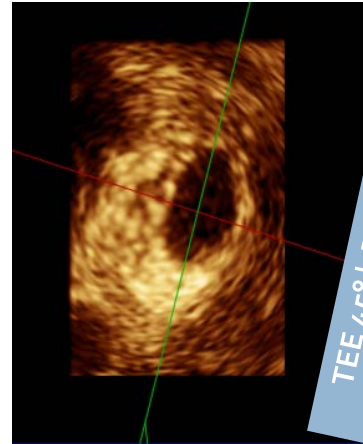
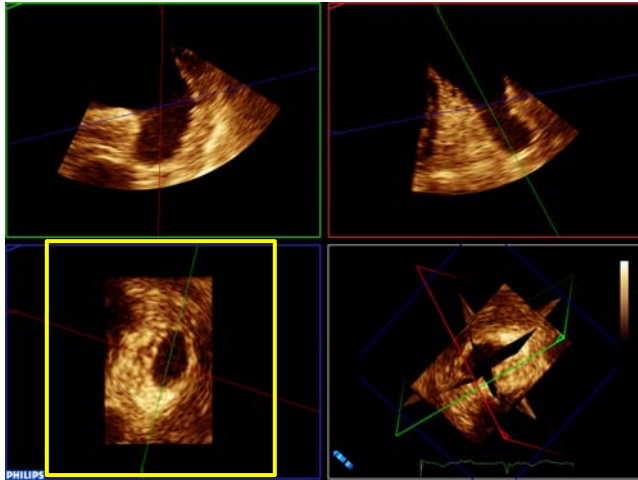
RAO Caudal
(‘Long axis’)

LAA Fluoroscopy View



RAO Caudal
(‘Long axis’)

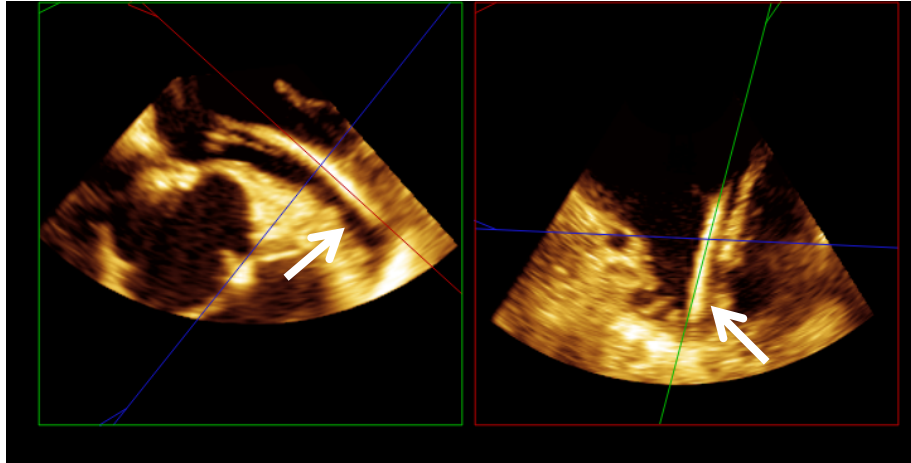
TEE vs. Fluoroscopy



TEE 135° | RAO Caudal
(Major or Long axis)

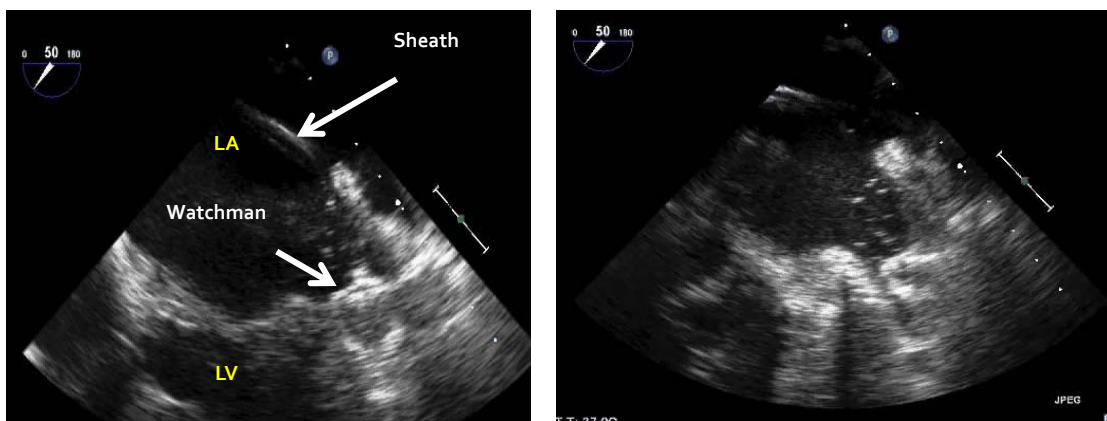
Watchman Device Deployment

Watchman Deployment



Biplane TEE | Assessing for Catheter Tip Position

Watchman Deployment

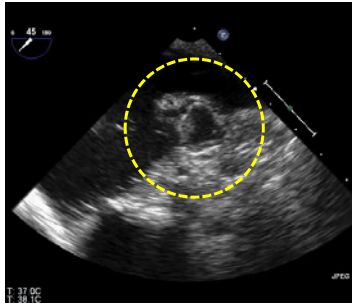


Watchman Deployment

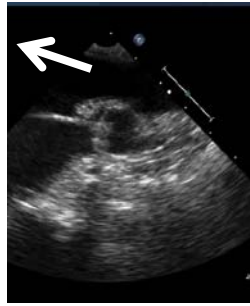
While the Watchman is still attached to its delivery cable, perform the **PASS** check.

PASS Check

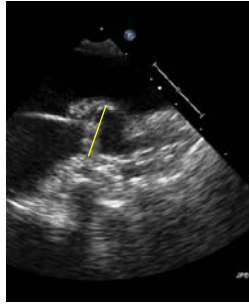
- Position
- Anchoring
- Size
- Seal



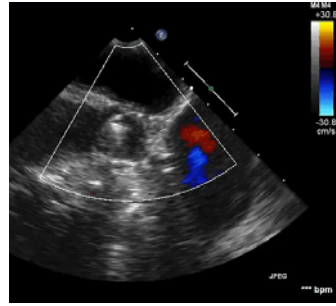
POSITION
Properly positioned; no tilt



ANCHORING
Tug Test

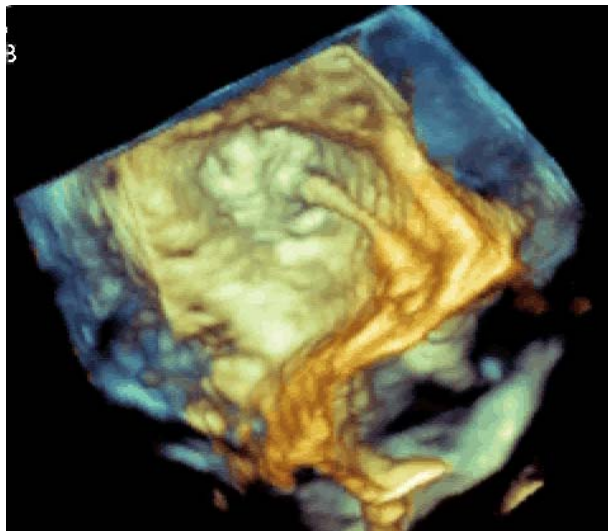


SIZE
15-30% Compression

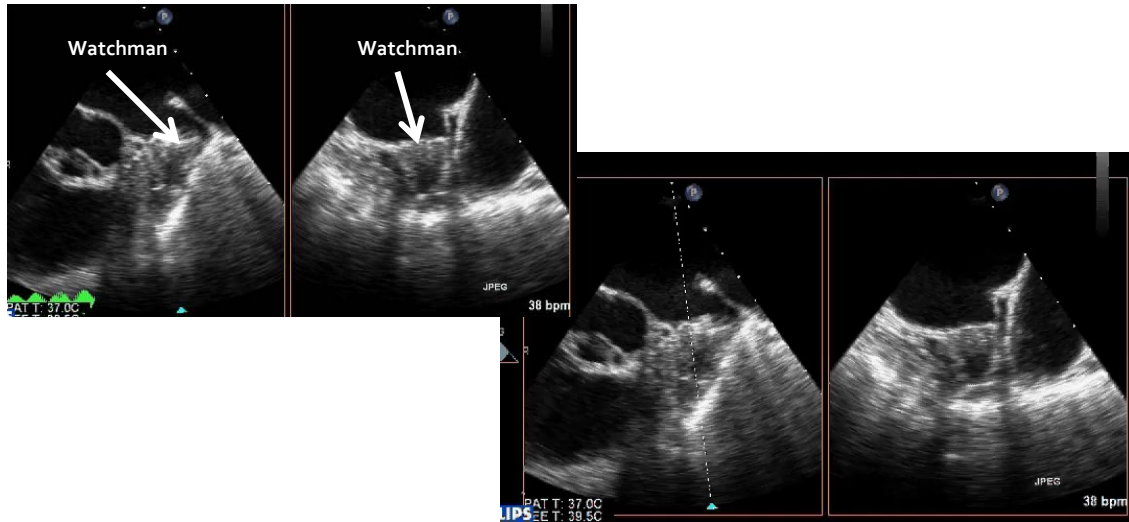


SEAL
No para-device leak

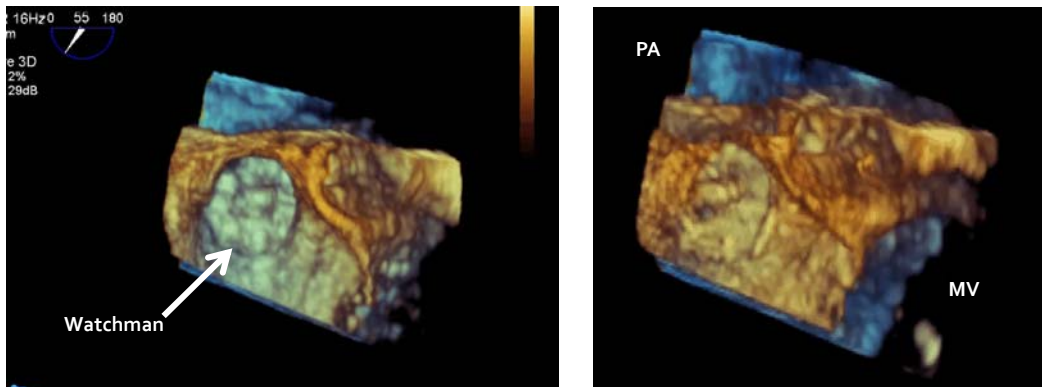
3D TEE | Watchman Release



Biplane TEE | Watchman Deployed

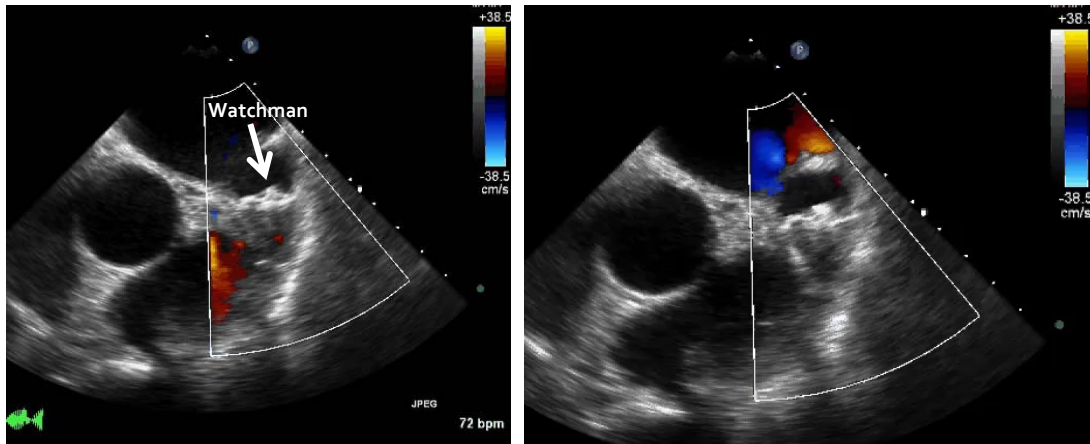


Biplane TEE | Watchman Deployed



Properly placed Watchman device
at the orifice of the LA appendage

TEE | Watchman Deployed

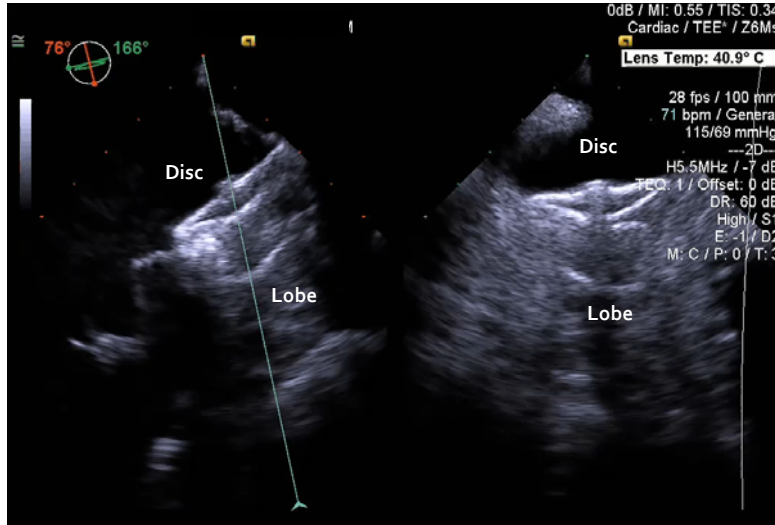


Watchman device properly
seals the LAA orifice
(No color flow around the device)

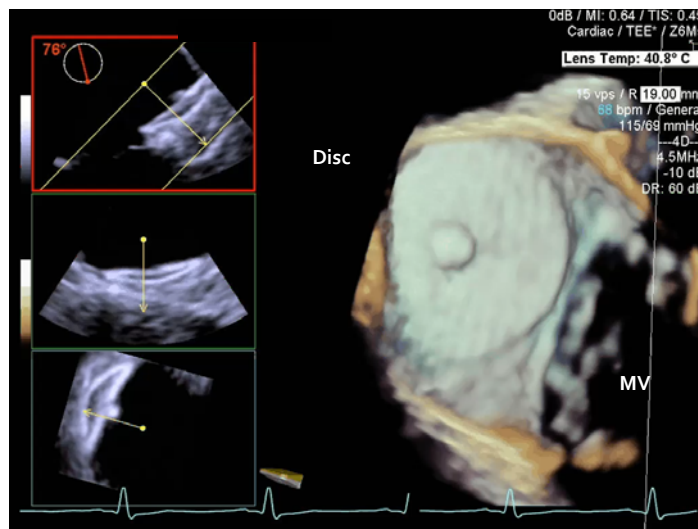
Amulet Device Deployment



3D TEE | Amulet Deployed



3D TEE | Amulet Deployed



Lariat Procedure



STATE-OF-THE-ART REVIEW ARTICLE

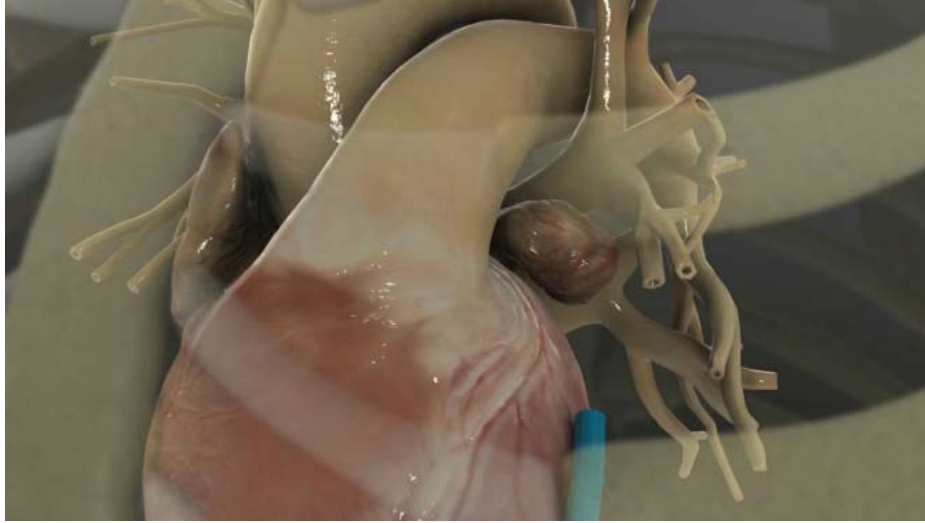
The Role of Multimodality Imaging in Percutaneous Left Atrial Appendage Suture Ligation with the LARIAT Device

Diana M. Laura, BA, Larry A. Chinitz, MD, Anthony Aizer, MD, MSc, Douglas S. Holmes, MD, Ricardo Benenstein, MD, Robin S. Freedberg, MD, Eugene E. Kim, MD, and Muhamed Saric, MD, PhD, New York, New York

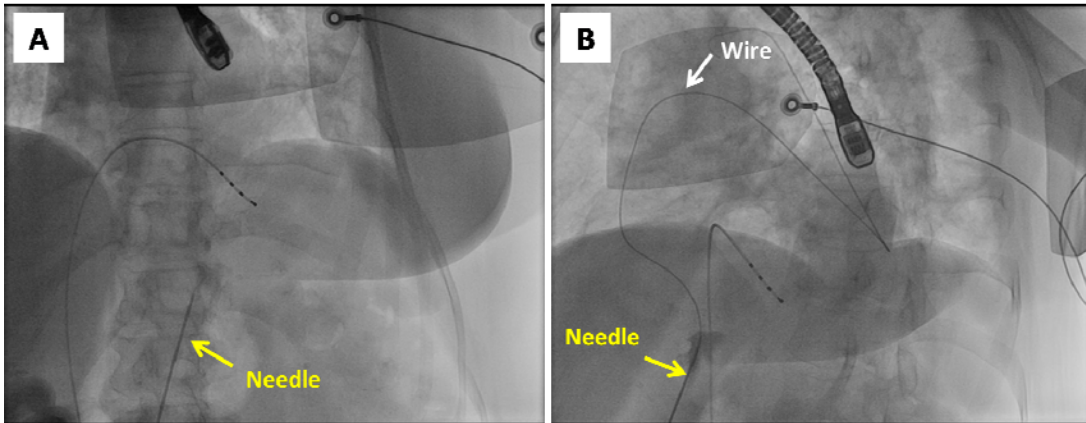
J Am Soc Echocardiogr. 2014 Jul;27(7):699-708.



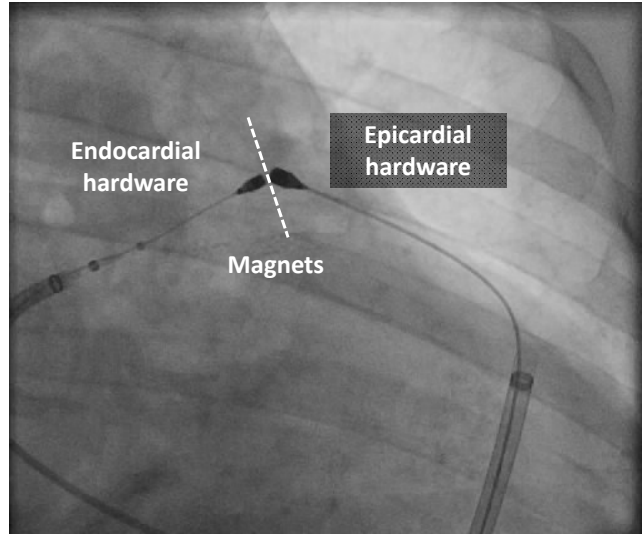
Lariat Procedure



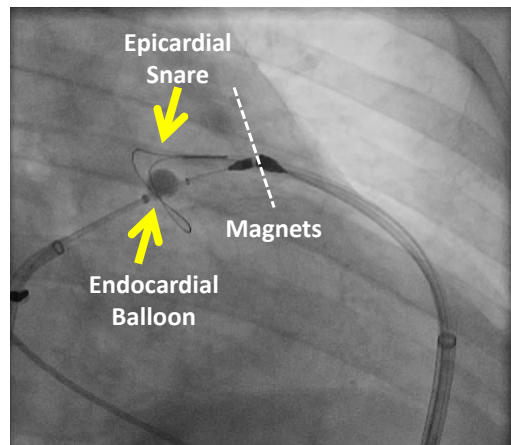
LARIAT Procedure: Pericardial Access



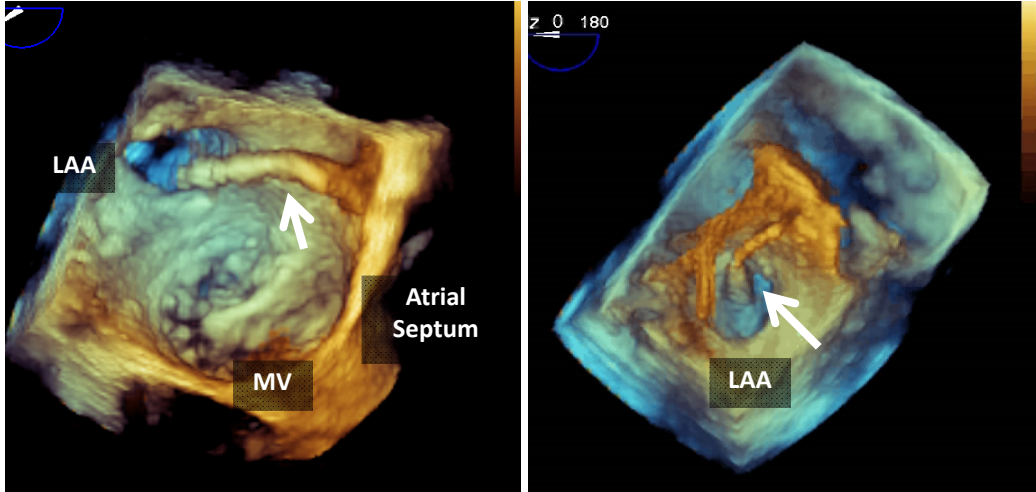
LARIAT Procedure: Fluoroscopy



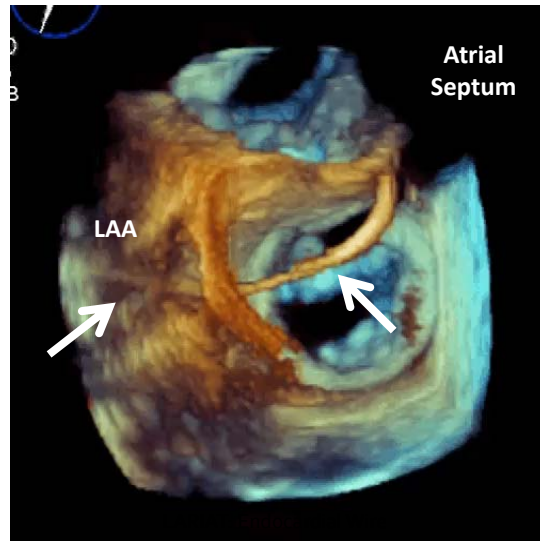
LARIAT Procedure: Fluoroscopy



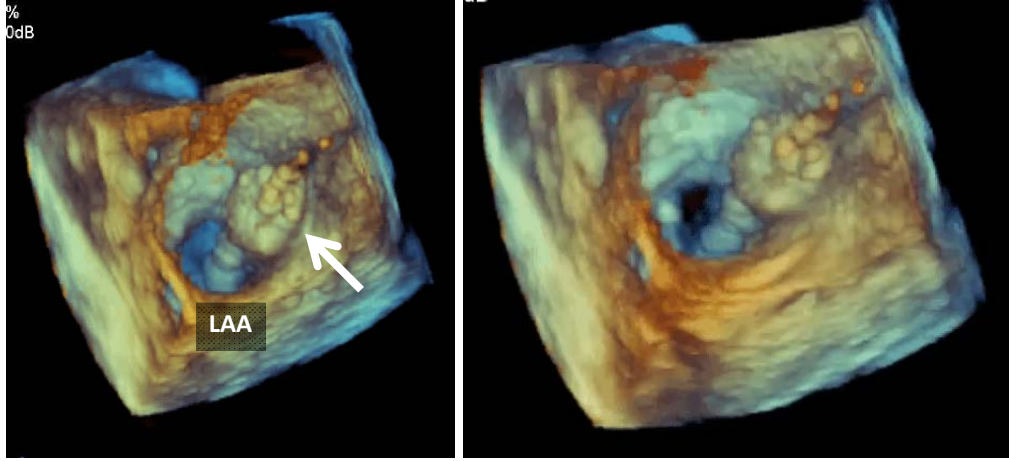
Lariat Procedure: 3D TEE



Lariat Procedure: 3D TEE

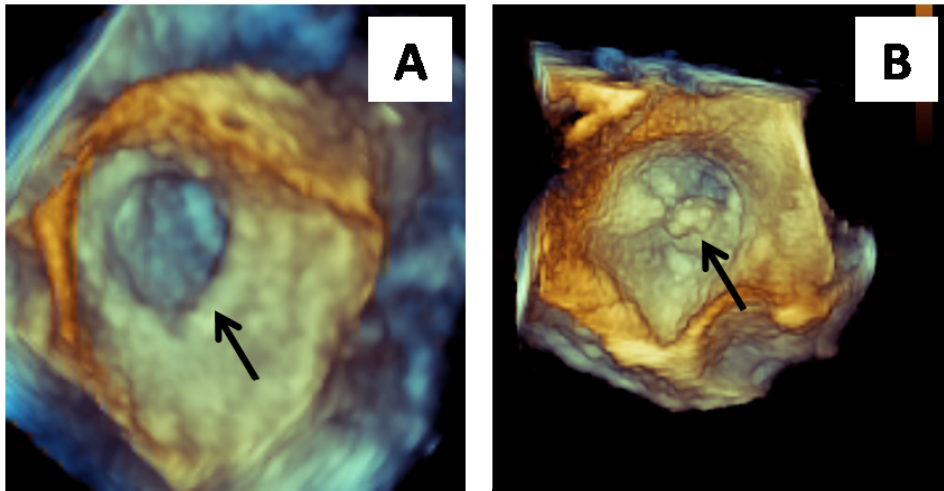


Lariat Procedure: 3D TEE



Balloon inflation at LAA orifice

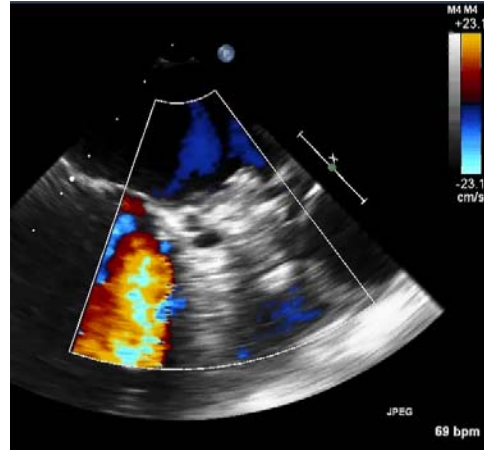
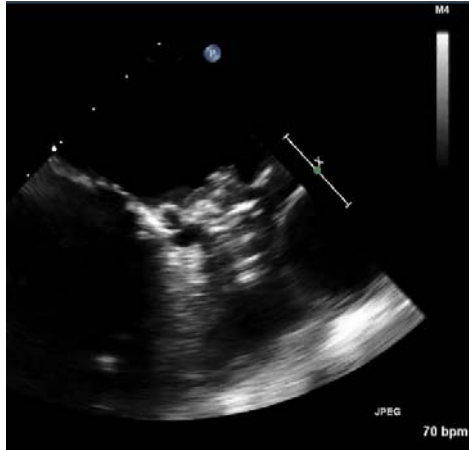
LARIAT Procedure: 3D TEE



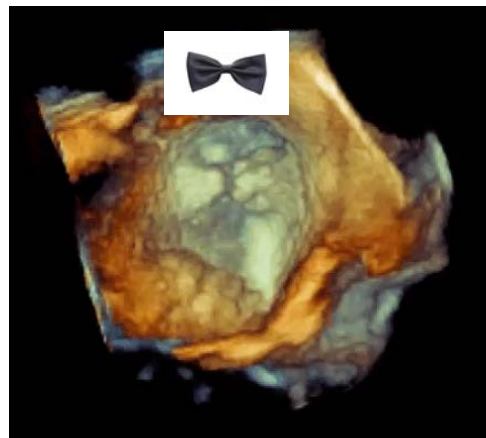
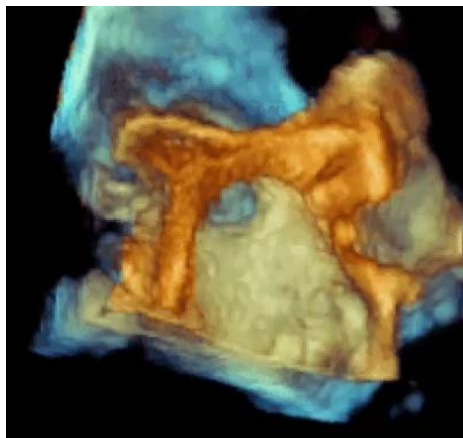
LAA Prior to Ligation

LAA Post Ligation

LARIAT Procedure: Ligated LAA



LARIAT Procedure: 3D TEE



LAA Prior to Ligation

LAA Post Ligation

Thank You!



New York University Langone Medical Center