

Advanced Techniques Of Carotid Artery Stenting Stent & Filter Lessons From Clinical Trials

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Boston Scientific, Lumen Bio





- Master Anatomical Adverse Condition
- Condition dictates technique
- Technique mandates equipment and Preparation
- Preparation Prevents complications



20 YEARS OF INNOVATION It is all about Technique

- Anatomical Adversity Predicts Ischemic Complications
- Co- Morbid Adversity Predicts Hemodynamic Complications



20 YEARS OF DEDEOOB It is All About Access

CCA Access

Guide catheter/ sheath

- Proximal Protection Device placement
- ICA Access
 - DPD placement



20 YEARS OF DED2008 Avoidable Adversity

- Carotid Adverse Anatomy
 - Type III arch
 - Severe Tortuosity
 - Sharp Entry angle at lesion
 - Sharp Exit angle at lesion
 - Absent Clear path across lesion
 - Heavy Calcification
 - Poor landing Zone



VEARS OF INNOVATION Carotid Anatomy Findings

- Source
 - CT Angiography
 - MR Angiography
 - Carotid Duplex
 - Catheter Carotid Angiography







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- Carotid access is not protected
- Access is the most important learning Curve issue



20 YEARS OF DEDEOOB CAS Observations

- Early CAS Registries show 1% Contralateral Stroke partly access related
- MRI-DWI studies suggest embolization during Carotid angiography and Access
- EVA-3S study Access related Complications lead to emergency CEA and Cranial Nave Palsies





- Which Carotid Access Technique?
 - Front Loading Telescopic Technique
 - Back Loading Serial Stiffening Technique
 - TAD Wire Method
 - Remote Carotid Access



20 YEARS OF INNOVATION Carotid Access Determinants

- Aortic Arch Type
- CCA/ECA Disease
- Carotid Tortuosity



20 YEARS OF DEDEOOB Arch Types (Myla 1996)



20 YEARS OF CCA Access Aortic Arch Types (Myla 1996)

Type I

Type II

Type III



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Dietrich and Bergeron

GA, Starclose. low dose Anticoagulation



20 YEARS OF INNOVATION Technical Pearls

- Deep Wire Access
- Least Manipulation
- ECA/ Subclavian Anchor Wires/ Balloons
- Don't Ignore iliac tortuosity
- Be aware of Carotid ostial disease



20 YEARS OF DEDEOOB Carotid Stent Issues

- Doesn't Cross The Lesion
- Stent Maldeployed (missed target)
- Stent Migration
- Stent Thrombosis
- Stent Crush (only Balloon Expandable Stents)



20 YEARS OF INNOVATION Stent Doesn't Cross

- Subtotal Occlusion
- Heavy calcification
- Sharp lesion angle
- Soft Guide wire
- Blunt end stent
 without nose cone

Pre-dilate Large balloon dilatation Stiff guide wire Stiff guide wire Change stent



20 YEARS OF INNOVATION Mal-deployment & Migration

- Direct stenting
- Nitinol stents with built in tension
- Heavy Calcification

- Pre-dilate lesion
- Release tension by prior advancement past stenosis
- Avoid them



20 YEARS OF DEDEOOB Carotid Filter Issues

- Should I Pre-dilate Before Filter Placement?
- What to do with slow Flow/occlusion in a filter?
 - Is this Filled Filter?
 - Is this carotid Spasm?
- What do to when the retrieval sheath fails to advance?
- How to Handle a detached filter?



20 YEARS OF DCI2008 Carotid Filter Issues

- What to do when filter doesn't Advance?
 - Poor guide support
 - Carotid tortuosity
 - Severe stenosis
 - Large filter
 - Sharp entry angle
 - Sharp exit angle





- What determines ICA access?
 - Carotid Tortuosity
 - Sharp Entry Angle
 - Sharp Exit Angle
 - Complex Lesion Morphology
 - Subtotal occlusion
 - Absent clear path across lesion
 - Heavy/Strategic calcification
 - Landing Zone



20 YEARS OF INNOVATION Sharp Lesion Angles





20 YEARS OF INNOVATION Sharp Entry Angle









20 YEARS OF INNOVATION Sharp Entry Angle





20 YEARS OF DE DOOB Carotid Filter Issues

- What to do when filter doesn't Advance?
 - Solutions
 - Power Guide support
 - Pre-dilatation
 - Buddy Wire
 - Buddy Catheter
 - Bare wire/Spyder
 - Percusurge
 - Proximal Protection



20 YEARS OF DEDEOOB Carotid Filter Issues

- Should I Pre-dilate Before Filter placement?
 - Carotid Complex Lesion Morphology
 - Sharp Entry Angle
 - Sharp Exit Angle
 - Absent clear path through Lesion





- Should I Pre-dilate Before Stent placement?
- Should I Post Dilate After Stent Placement?



20 YEARS OF INNOVATION Carotid Stent Issues

- Should I Pre-dilate Before Stent placement?
 - Carotid Stent Profile
 - Carotid Lesion Severity
 - Carotid Tortuosity
 - Operator Experience
 - Carotid Lesion Complex Morphology
 - Sharp Entry Angle
 - Sharp Exit Angle
 - Heavy Calcification



20 YEARS OF DEDEOOB Carotid Stent Issues

- Should I Post Dilate After Stent Placement?
 - Objectives
 - Minimal Final lumen diameter
 - Safe retrieval of DPD
 - Avoid Stent migration



20 YEARS OF INNOVATION Carotid Stent Issues

- Should I Post Dilate After Stent Placement?
 - Carotid Stent Type
 - Closed Cell Design
 - Open Cell Design
 - Carotid Lesion Type
 - Heavily Calcified
 - Residual Lesion severity
 - Large residual
 - Protection device type
 - Percusurge



20 YEARS OF INNOVATION Carotid Landing Zone Issues

- What to do with Inadequate Landing Zone?
 - Can this be modified?
 - Buddy wire
 - BareWire
 - More proximal placement of Guide sheath in CCA to relax the vessel
 - PTA/stenting of stenosis
 - No
 - CEA
 - Proximal Protection
 - Unprotected stenting





- What to do with slow flow/occluded Filter?
 - Are Filter Dots Closed?
 - Yes
 - Carotid Spasm
 - Give Nitro
 - No
 - Filter slow flow due to emboli
 - Retrieve Filter



20 YEARS OF DEDEOOB Carotid Filter Issues

- What to do with slow flow/occluded Filter?
 - Angioguard/Rubicon/Filterwire/Accunet/Fib ernet
 - Filling defect below filter dots
 - Aspirate with Percusurge Export
 - Close Filter
 - Filling defect above filter dots
 - Close filter and remove
 - Incidence
 - Slow flow 10- 20%
 - Aspiration 2-5%





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6

20 YEARS OF DE DOOB Carotid Filter Issues

- What to do when Retrieval sheath doesn't advance?
 - Anatomical Adversity Issues
 - Carotid Tortuosity
 - Sharp Lesion Angles
 - Guide wire bias
 - Inadequate post dilatation
 - Open cell stent design with "gater backing"
 - Calcified lesion



20 YEARS OF INNOVATION DPD Retrieval Catheter Issues

- Retrieval Catheter (RC)
 - Close Cell vs. Open Cell Design
 - Carotid Adverse Anatomy
 - Tortuosity
 - Sharp Lesion Angle
 - Heavily Calcified Lesion
 - Significant Residual Lesion
 - RC Design
 - Coaxial System
 - Single Stiff catheter
 - Single Soft Catheter



20 YEARS OF DEDEOOB DPD Retrieval Catheter Issues

- Retrieval Catheter (RC)
 - Closed Cell stent
 - Least Problems
 - Neutralizes anatomical adversity
 - Open cell stent
 - Worst Problems
 - Single Stiff Recovery Catheter
 - Anatomical Adversity







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20 YEARS OF DC DOB Carotid Filter Issues

- What to do when retrieval sheath doesn't advance?
 - Don't panic and pull on filter!
 - Neck rotation
 - Advance sheath distally
 - Neck compression
 - Bent tip retrieval sheath
 - Buddy-wire
 - Additional balloon dilatations





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Cath Lab 26

26

Head Tilt



20 YEARS OF DEDEOOB Filter Detachment

- RC Catheter advancement problem
- Filter slides down and impinges on stent
- Guide catheter prolapse into Aorta pulls Filter down



20 YEARS OF DEDEOOB Filter Detachment

- Preventive Strategies
 - Avoid cases with poor landing zone
 - Always Keep guide tip in view
 - Never force pull Filter into RC
 - Use salvage Measures for RC problems
 - Change RC type















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Lessons Learned/Avoid These S

- STEEP Arch (туре III)
- **SEVERE tortuosity**
- SHARP Entry Angle
- SHARP Exit Angle
- INSUFFICIENT
 Landing Zone
- UNSATISFACTORY
 Collaterals





20 YEARS OF DEDEOOB Lessons Learned/Avoid These S



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20 YEARS OF DEDEOOB Technical Pearls

- Remote Access for
 Type III Arch
- Liberal Use of STIFF Buddy Wire
- Know limitations of DPD Devices







• www.carotidtraining.com

