IVUS-guided SFA intervention

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Disclosure

Speaker name: Daizo Kawasaki

I have the following potential conflicts of interest to report:

- Consulting
- Employment in industry
- Stockholder of a healthcare company
- Owner of a healthcare company
- Other(s)

I do not have any potential conflict of interest
Eagle Eye® Platinum ST (Volcano)

Navifocus WR (Terumo)

OptiCross (Boston)
IVUS-guided technique for long SFA CTO

- Wire preceding
- IVUS preceding

-or-

- Wire preceding
- IVUS preceding
Wire preceding technique
IVUS preceding technique
60' male:
Rutherford class-3

SFA long CTO

Stump +
Wire preceding

CTO-entrance

IVUS

GC
IVUS preceding SFA-proximal to mid
IVUS preceding

SFA-distal
Wire preceding
SFA-distal
IVUS preceding CTO-exit
50’ male
Rutherford class-3

SFA long CTO
IVUS guided parallel wire technique

CTO-entrance
IVUS preceding

SFA-proximal to distal
Wire preceding

CTO-exit
70’ male
Rutherford class-3
Add distal access immediately
IVUS guided Rendez-vous technique
Summary

• It is very important to get intraluminal at the CTO-entrance to protect DFA flow

• Combination of IVUS and wire preceding technique is logical, safe, and quick as well as looped wire technique

• We can decide next strategy according to IVUS information of just before CTO-exit
Thank you!!

My Best Team

For Save Legs, Save Patient’s Life
IVUS-guided SFA intervention

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