

# Imaging Planning for Device Type and Size Selection

**Jung-Sun Kim, MD, Ph D, FESC**

**Division of Cardiology, Severance Cardiovascular Hospital  
Yonsei University College of Medicine**

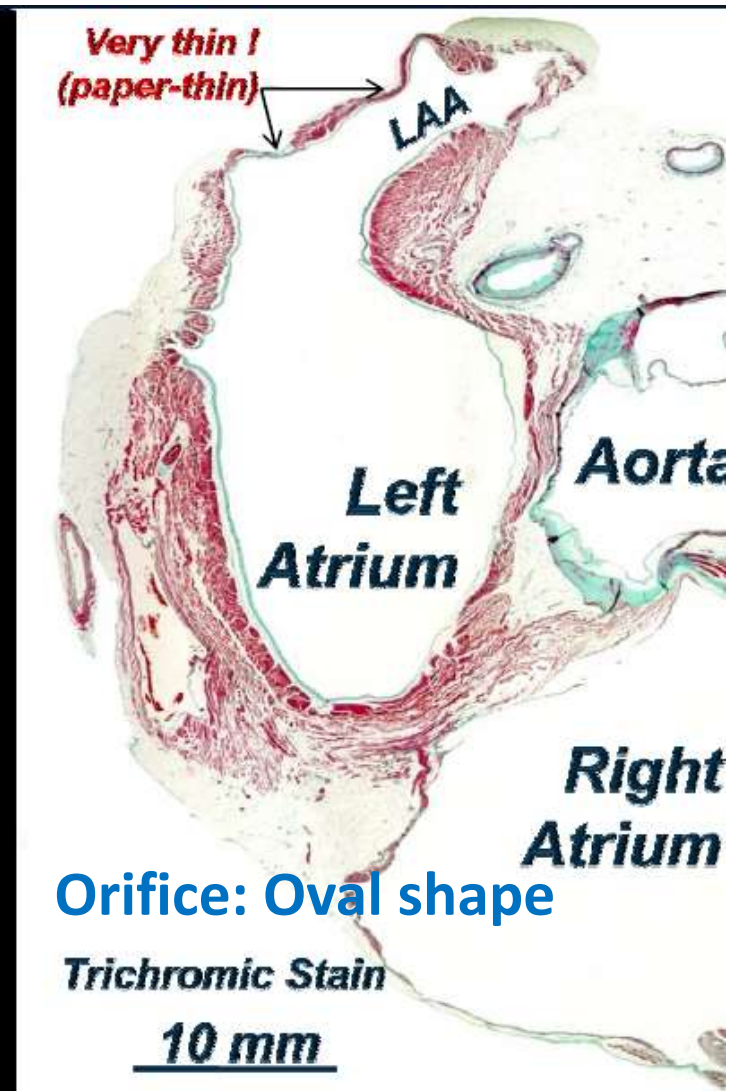
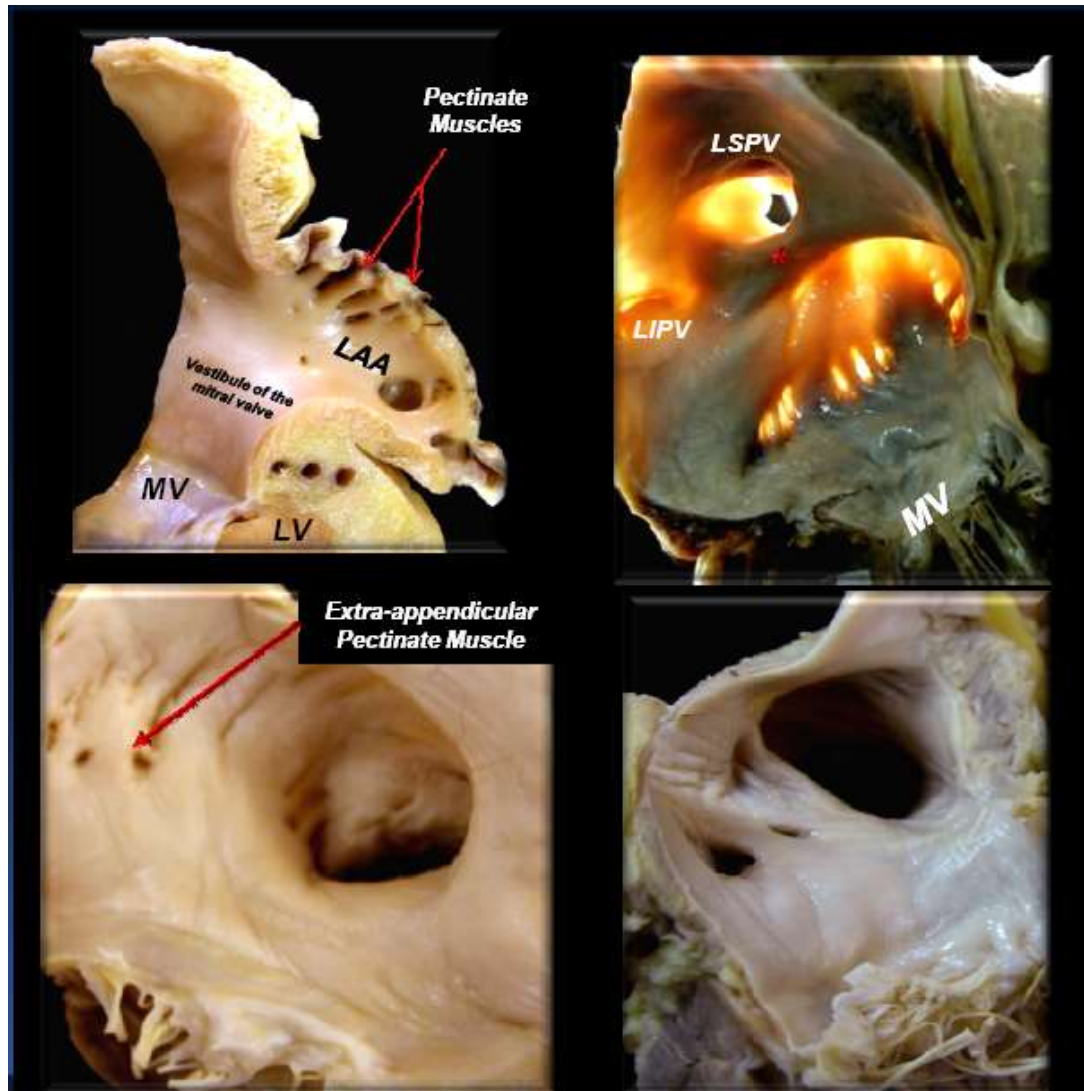
**20 min**

**Aug 10<sup>th</sup> 2019**

# Disclosure

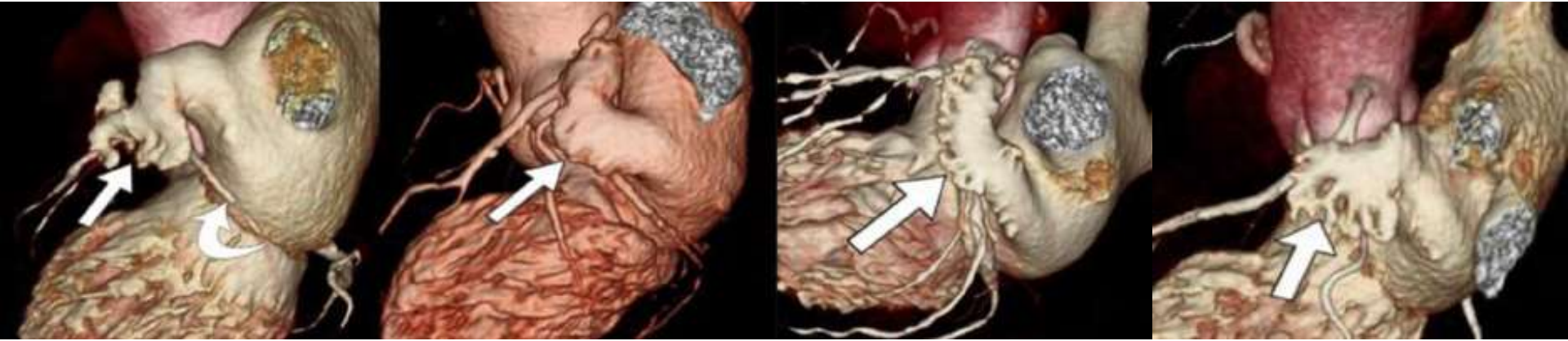
- **Relationships with commercial interests:**
- **Support/Consultant:** ACP and Amulet Proctor of Abbott
- **Speaker's Bureau:** Abbott

# Distal LAA is very thin structure easily to perforate



Courtesy Slide of Prof. D. Sanchez Quintana

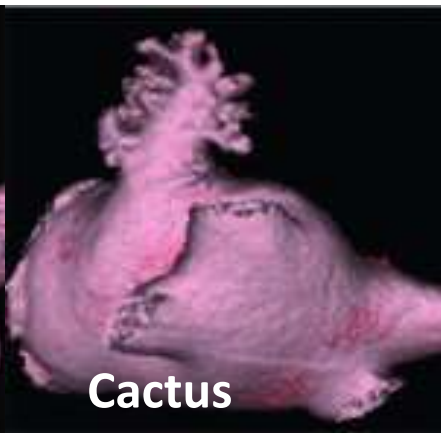
# LAA Shape by Cardiac CT



**Volume rendering is VERY USEFUL to determine LAA Morphology!**



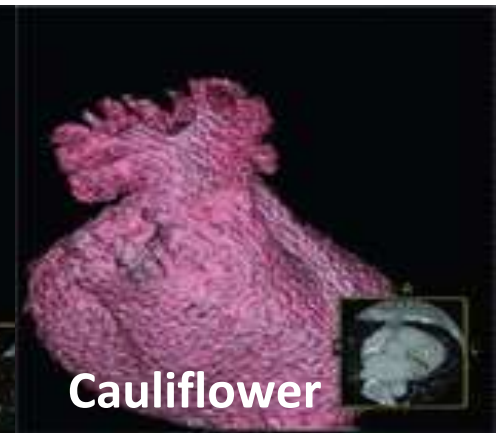
**Windsock**



**Cactus**



**Chicken Wing**



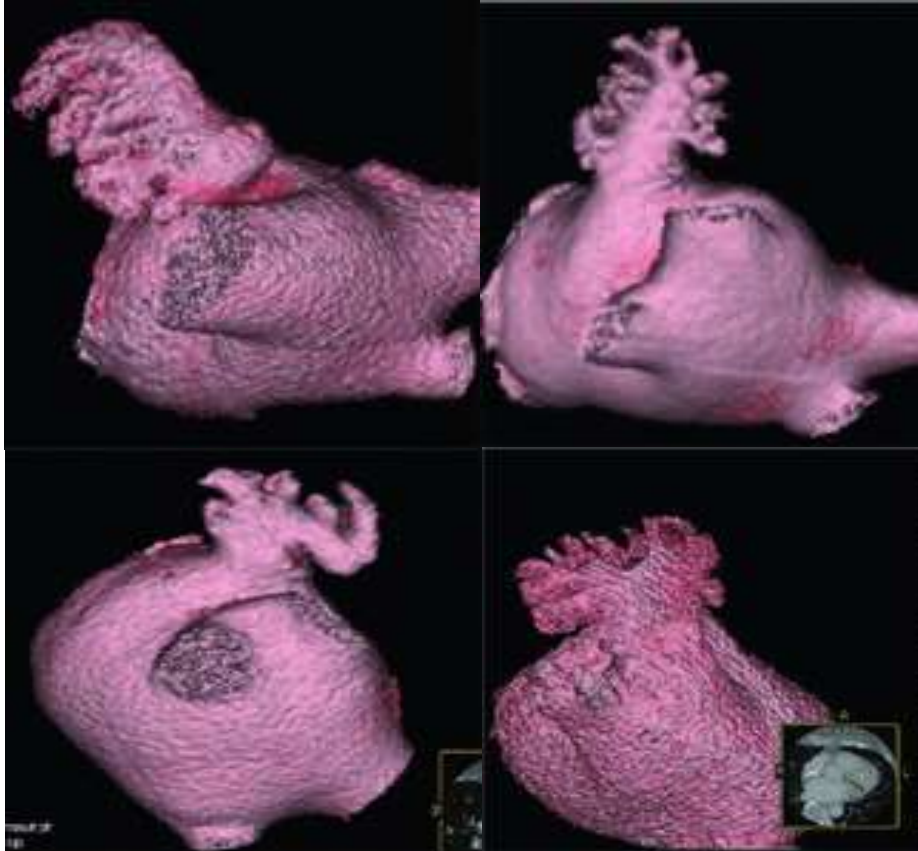
**Cauliflower**

Patti G, et al., *EHJ* 2016

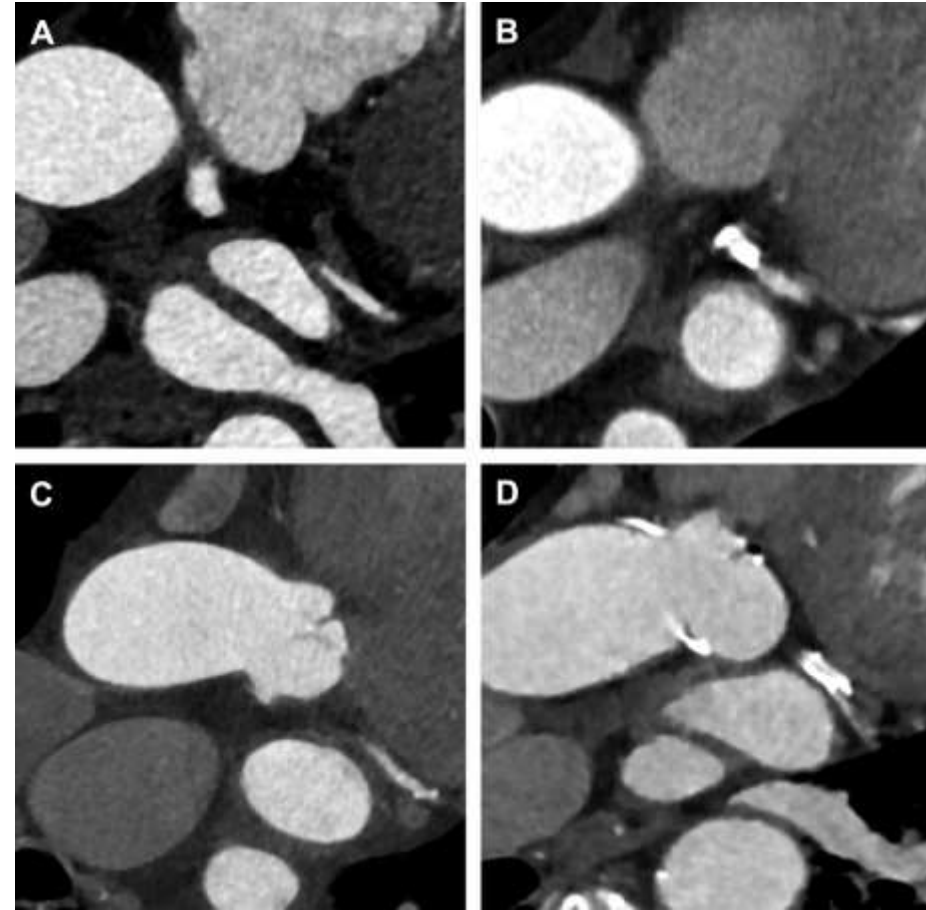


# LAA Morphology

## 3D LAA Morphology



## Shape of LAA Orifice



Korsholm K, et al. Intervent Cardiol Cline 2018:229–242

# Selection of Devices

## WATCHMAN® System (Boston Scientific)

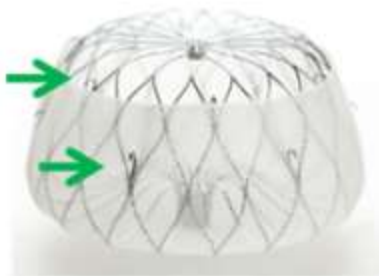


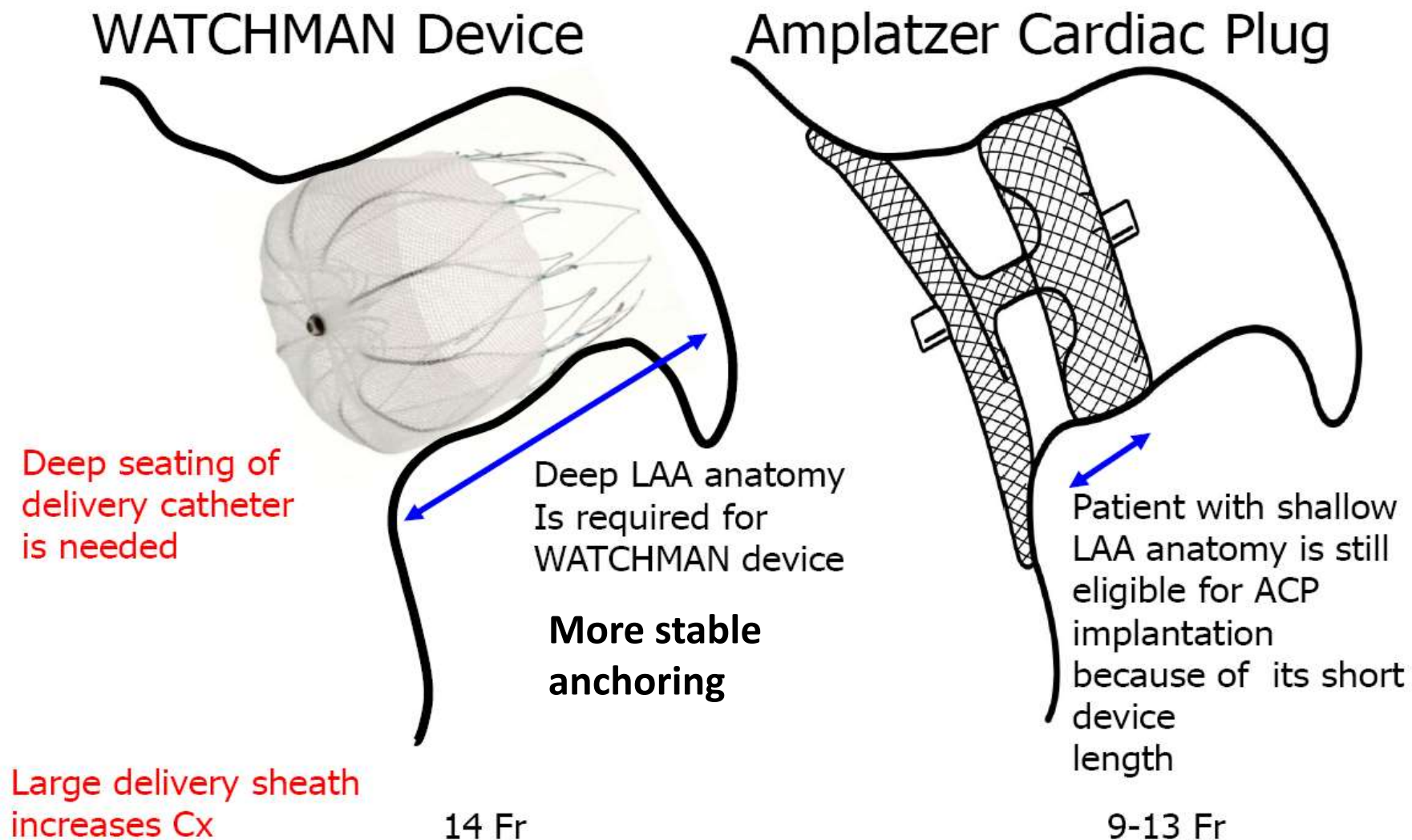
## Amplatzer Cardiac Plug and Amulet (Abbott)



**Next generation devices are just around the corner.**

**WATCHMAN FLX, WAVECREST, LAMBRE, and OCCLUTECH**





*Modified with Lam YY, et al. Catheter Cardiovasc Interv 2012;79:794-800*

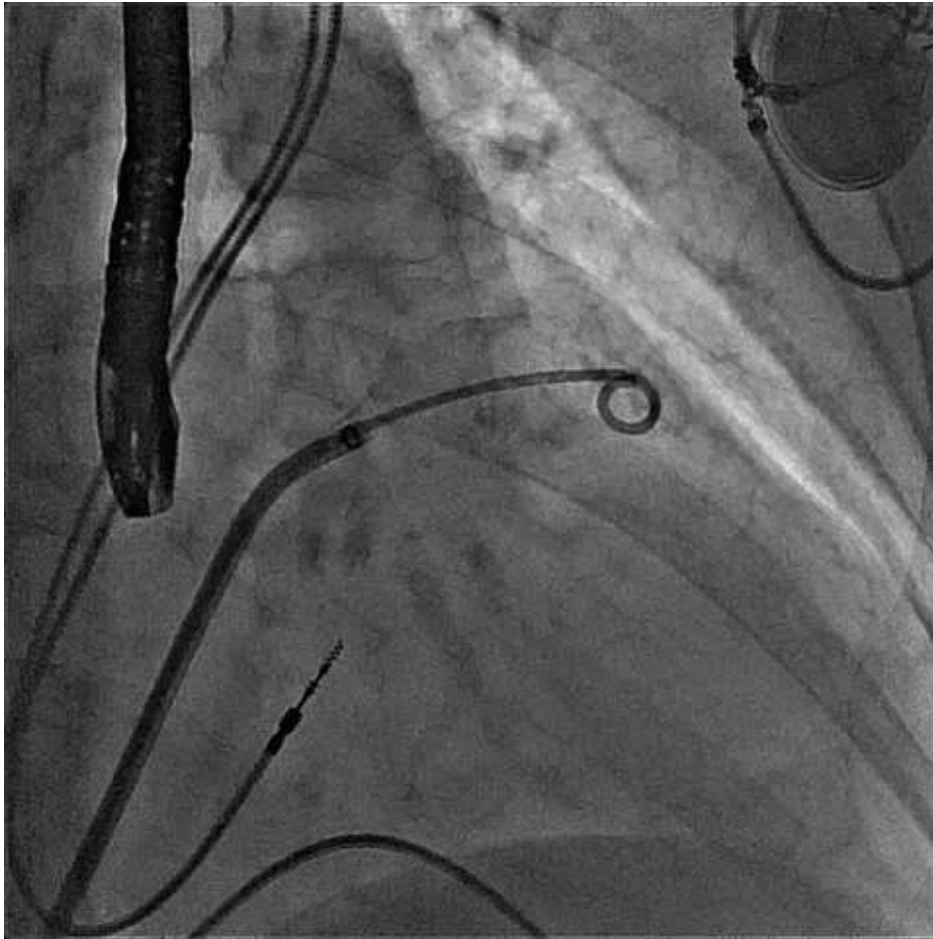
# Measure Landing Zone

- Check if LA Pressure is  $\geq 10$  mmHg
- Although angiographic assessments are slightly larger than TEE, both assessments should be consistent within 2 mm. If not, check the calibration error in angiography.
- Personally, TEE measurement may be more reliable.
- Device selected will be 10-20 % greater than measurement.

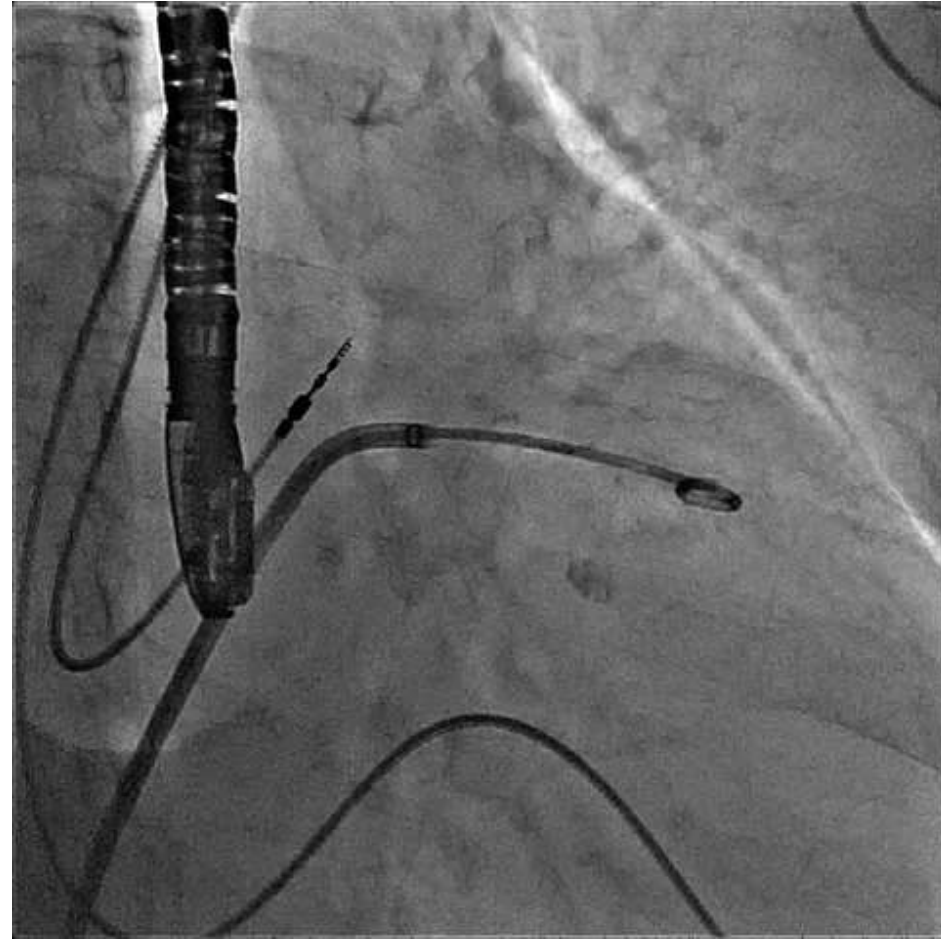


- **Expected landing zone**

- Approximate 10 mm inside the orifice (projected line)
- The transverse axis of the ACP lob should be perpendicular to the axis of the neck (Blue)



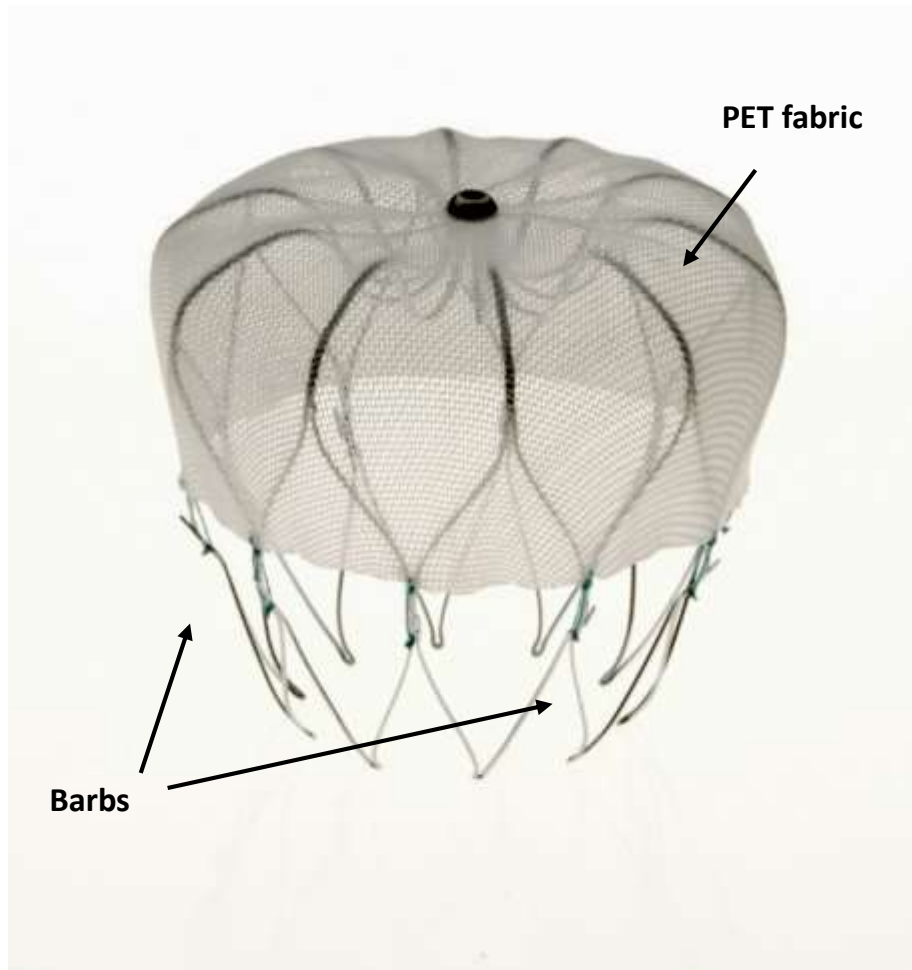
RAO 30 CRA 20



RAO 30 CAU 20

# Watchman

# WATCHMAN LAA Closure System Components



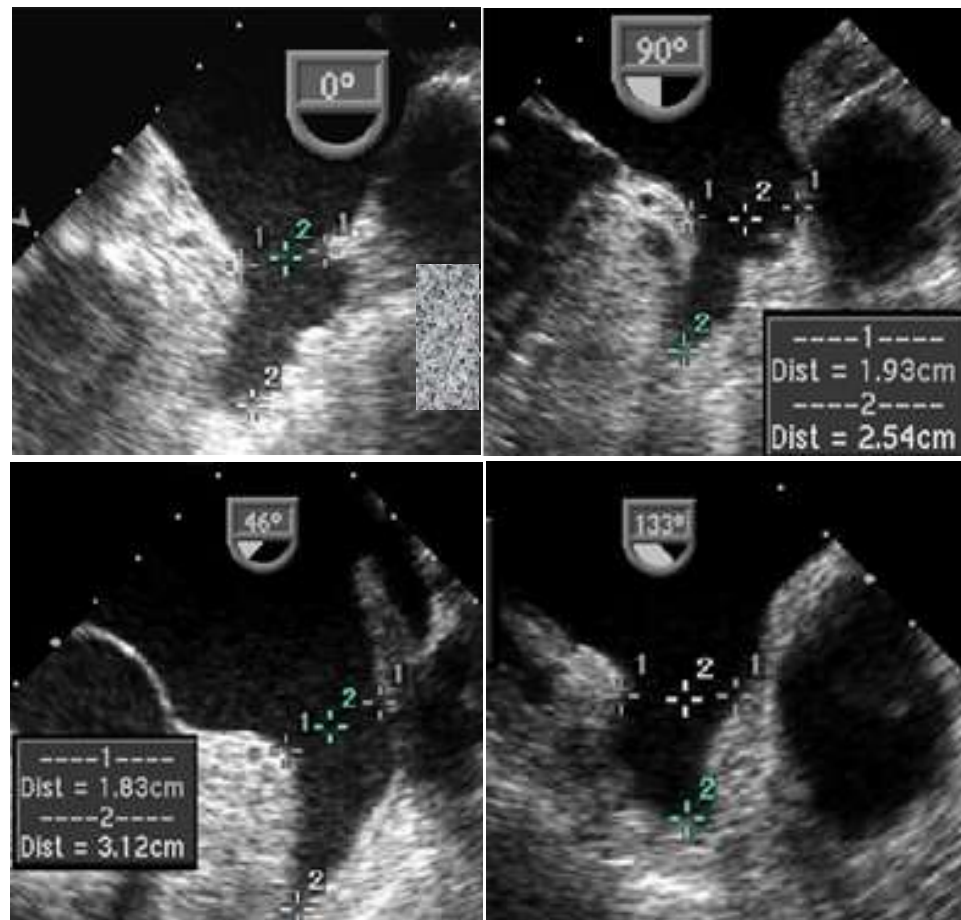
## Frame: Nitinol structure

- Available sizes: **21, 24, 27, 30, 33 mm (diameter)**
- 10 Fixation barbs around device perimeter engage LAA tissue
- Contour shape accommodates most LAA anatomy

## Fabric Cap: (PET) Fabric Polyethyl terephthalate

- Prevents harmful emboli from exiting during the healing process
- 160 micron filter

- Confirm the absence of LA/LAA thrombus
- Measure LAA ostium in at least 4 TEE views
- At **0 deg** (from left coronary artery to a point 2 cm from tip of the LUPV limbus)
- At **45, 90, 135 deg** (from the top of the MV annulus to a point 2 cm from tip of the LUPV limbus)
- Measure the approximate **LAA usable length** from the ostium line to the apex of the LAA

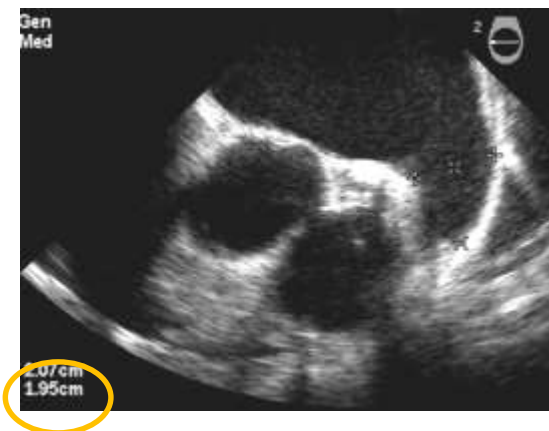




# Determine proper device selection

Watchman

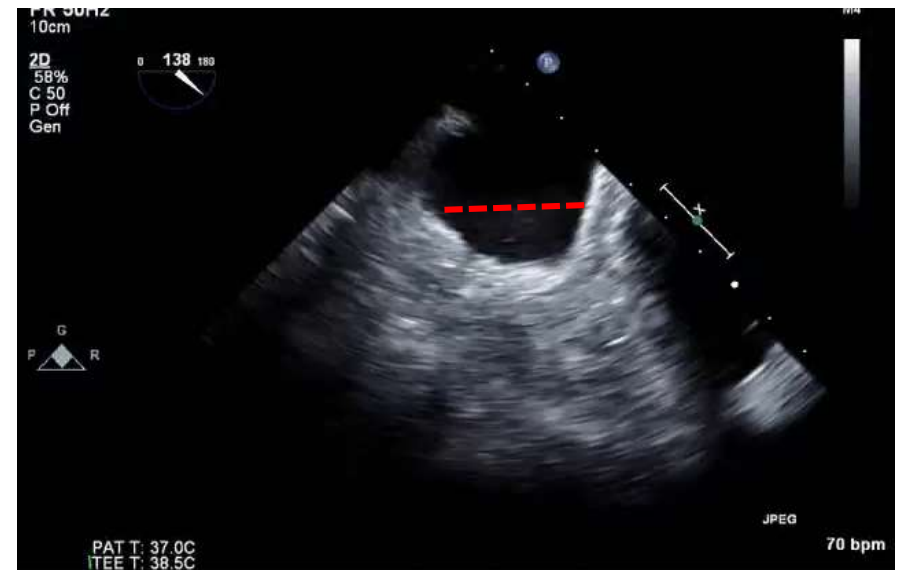
Maximum LAA Ostium (mm)	Device Size (mm) (uncompressed diameter)
17-19	21
20-22	24
23-25	27
26-28	30
29-31	33



- Device sizing is based on maximum LAA diameter
- **Maximum LAA ostium size** should be **>17mm** or **<31mm** to accommodate available device sizes
- Available/useable **LAA length** should be **equal to or greater** than the ostium

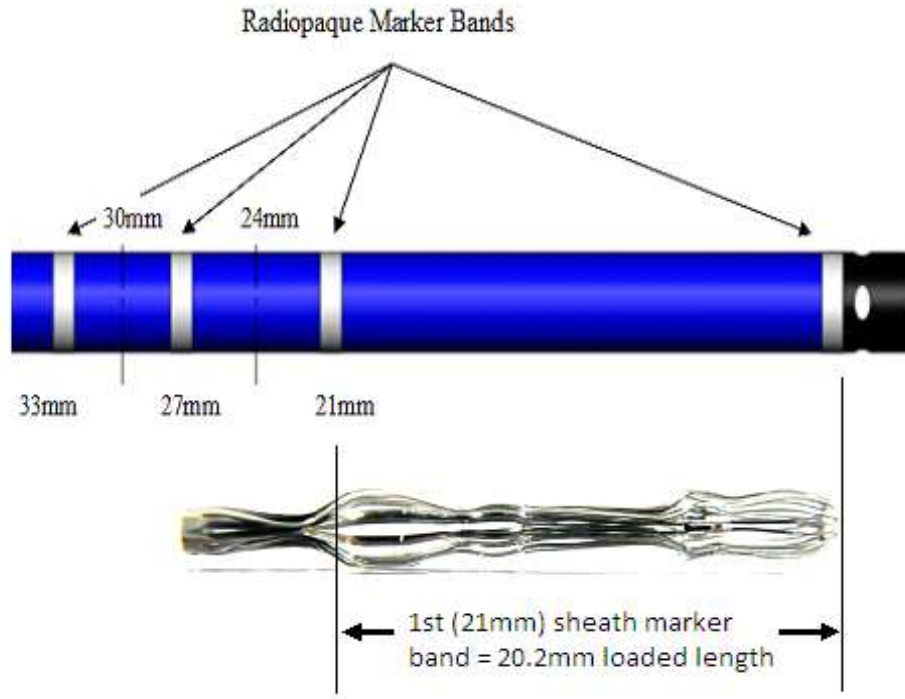
# TEE measure during Procedure

Watchman



# Sheath navigation/manipulation (*marker bands*)

## Watchman



Access Sheath Marker Band	Loaded Device Length*
21mm	20.2mm
<b>24mm</b>	<b>22.9mm</b>
27mm	26.5mm
<b>30mm</b>	<b>29.4mm</b>
33mm	31.5mm

- Radiopaque marker bands guide initial sheath placement/depth in the LAA
- Align appropriate marker band with the LAA ostium according to device size selected

# Sheath navigation/manipulation

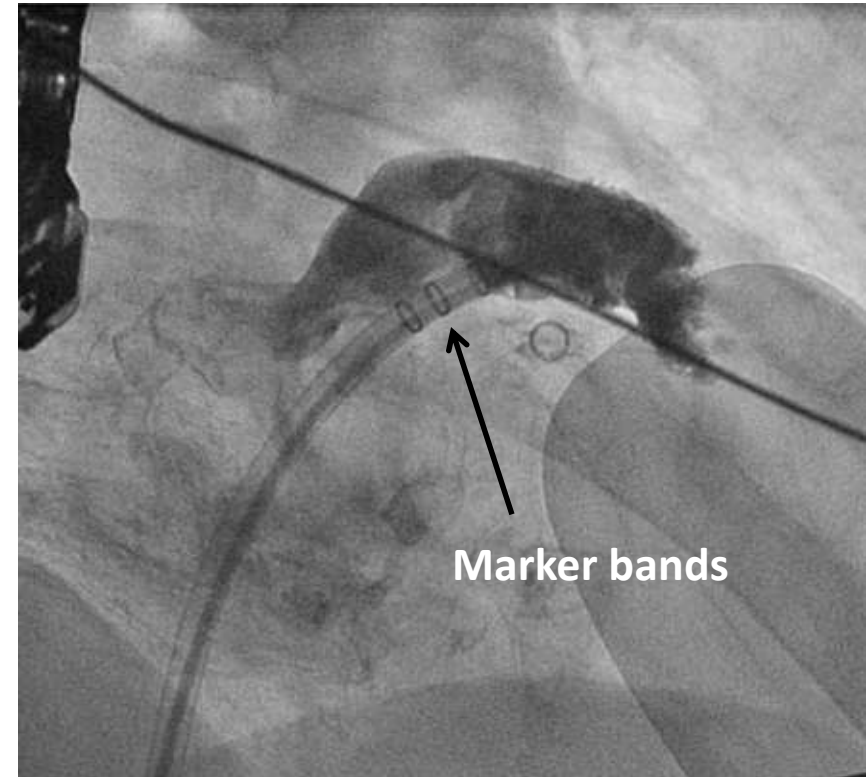
*(advancing in the LAA)*

To better visualize complex LAA anatomy and verify access sheath tip position:

Obtain multiple views with

- Angiography (minimum RAO cranial/caudal)
- TEE (minimum 0-135 deg sweep)

Most important when sheath is advanced near the wall or apex of LAA and while advancing more distally in any anatomy.

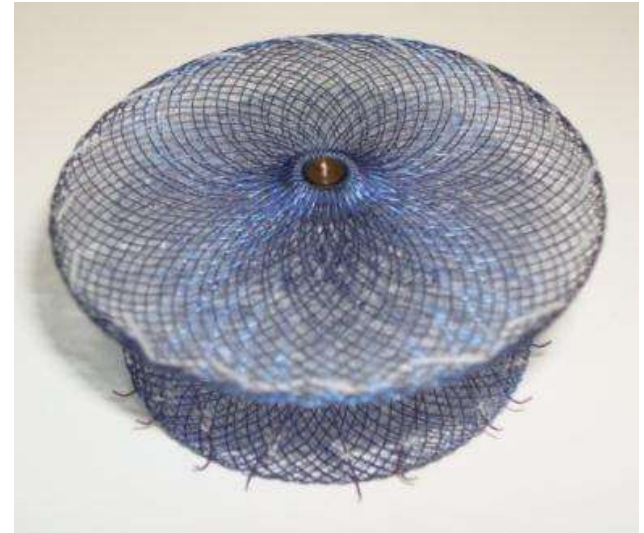




# Amulet

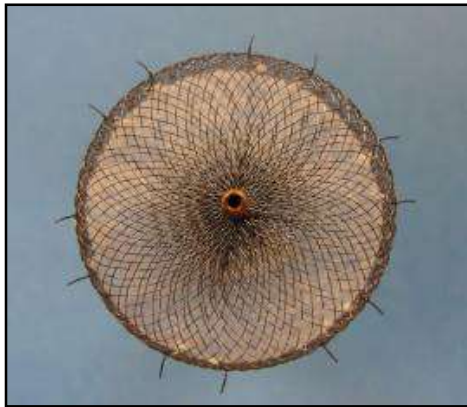
# Amulet

- Pre-loaded
- Recessed end screw
- Larger disc diameter
- Longer lobe length
- Longer waist length
- Larger sizes up to 34mm
- Stiffer stabilizing wires (.0065)
- More stabilizing wires on larger devices

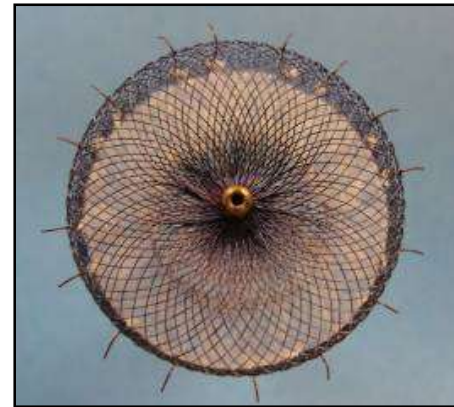


# Stabilizing Wire Changes

- Number of stabilizing wires dependent on lobe diameter
- Designed to increase stability of the lobe inside the left atrial appendage



**AMPLATZER™ Cardiac Plug**  
Sizes 16 – 30 mm: 6 pairs



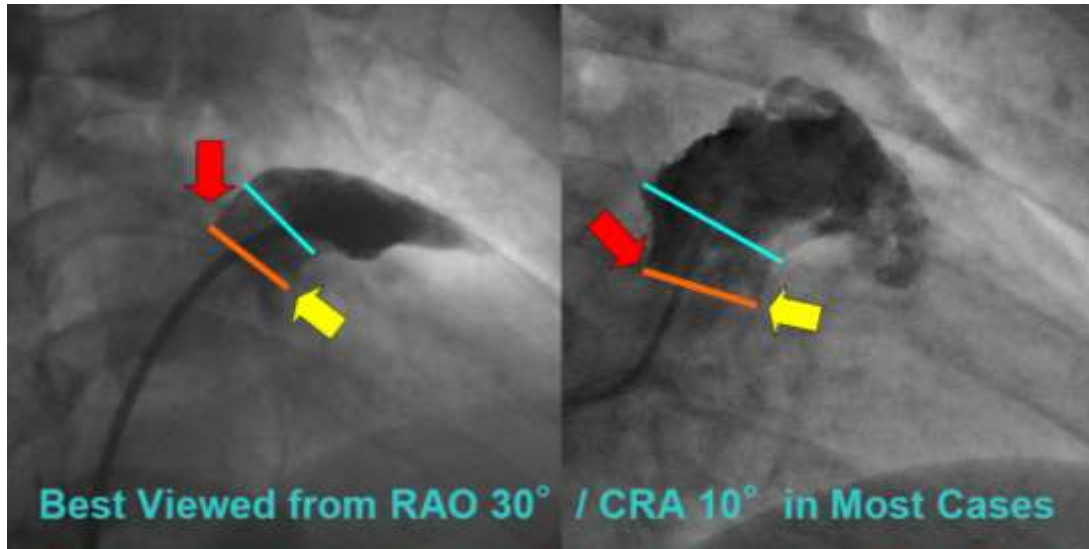
**Amulet™ Device**  
Sizes 16 – 18 mm: 6 pairs  
Sizes 20 – 25 mm: 8 pairs  
Sizes 28 – 34 mm: 10 pairs

# Device Specifications

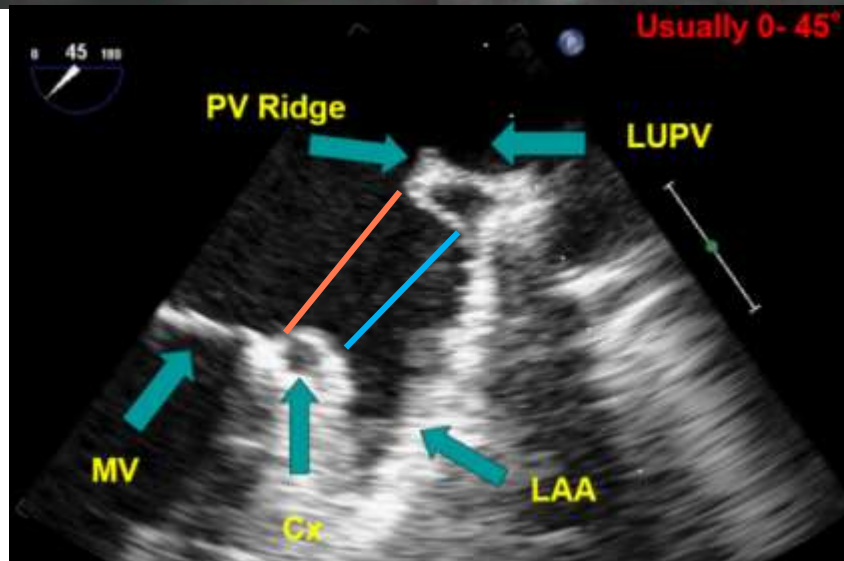
Feature	AMPLATZER™ Amulet™								AMPLATZER™ Cardiac Plug							
Size / Lobe Diameter (mm)	16	18	20	22	25	28	31	34	16	18	20	22	24	26	28	30
Disc Diameter	Lobe + 6 mm				Lobe + 7 mm				Lobe + 4 mm				Lobe + 6 mm			
Lobe Length	7.5 mm				10 mm				6.5 mm							
Waist Length	5.5 mm				8 mm				4 mm							
Stabilizing Wires	6 pairs		8 pairs			10 pairs			6 pairs							
Sheath Diameter	12F 14F (with Adaptor)					14F			9F	10F				13F		







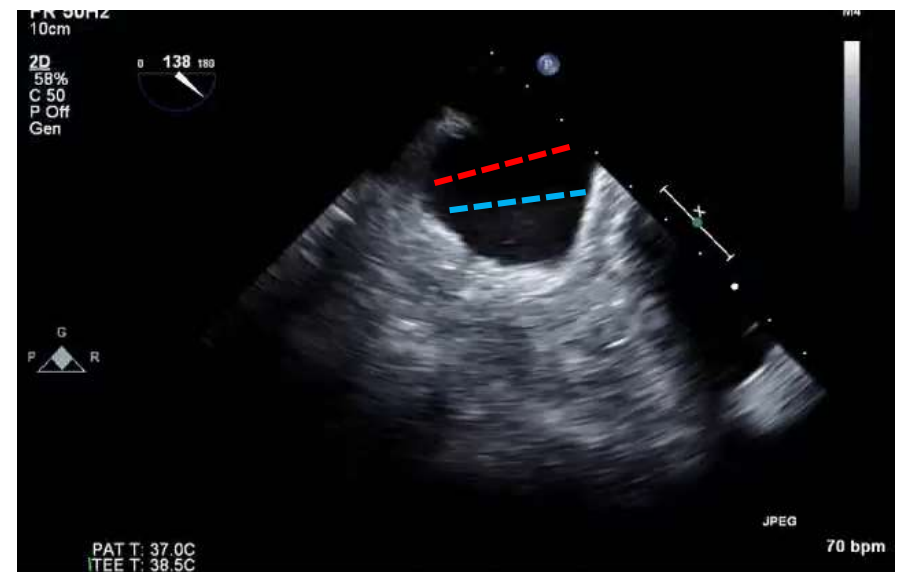
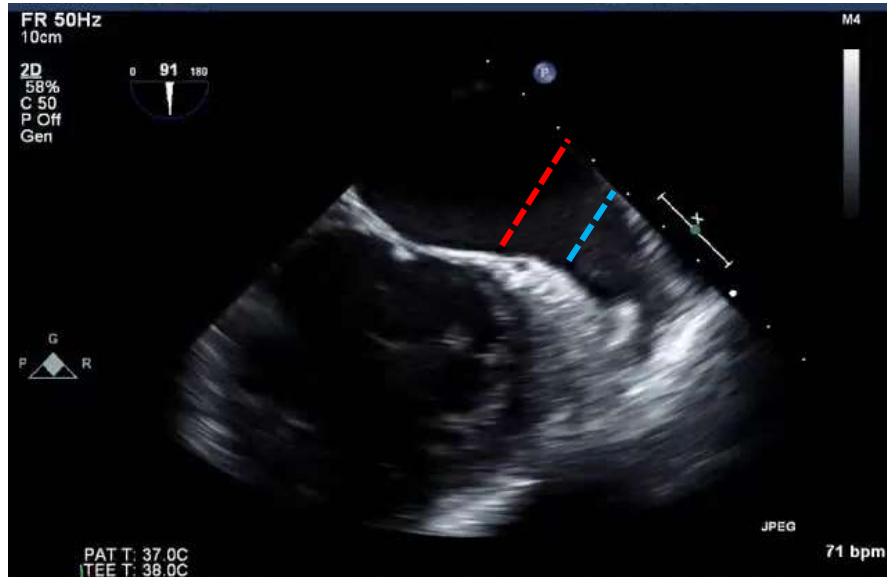
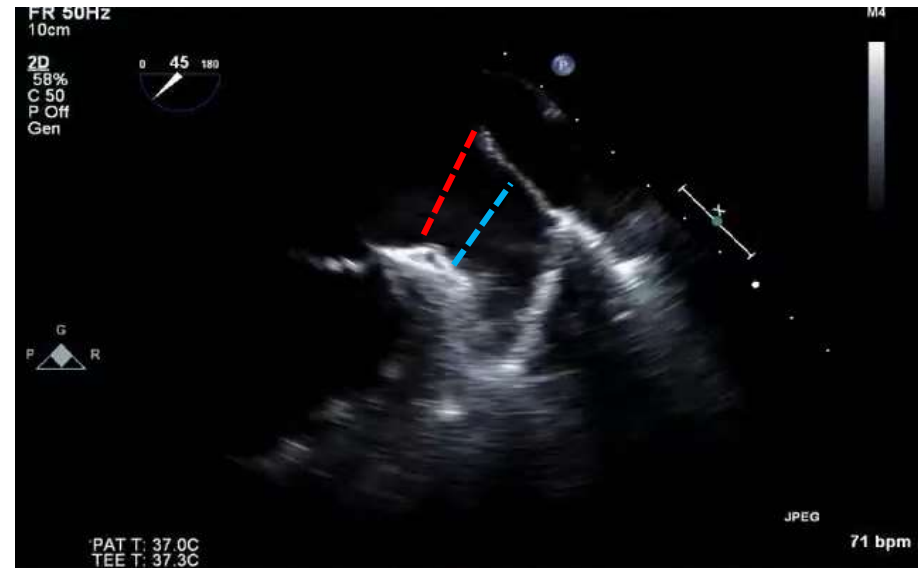
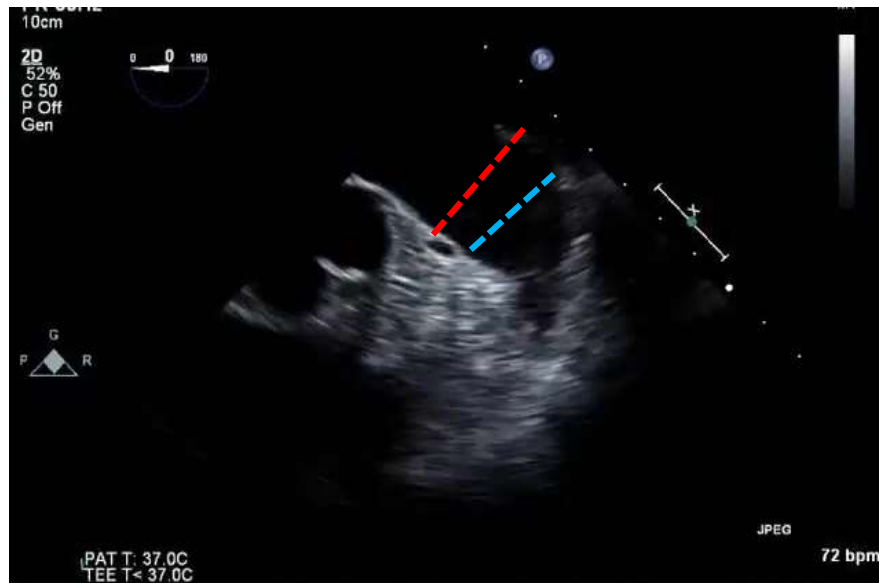
## Angiography



## TEE

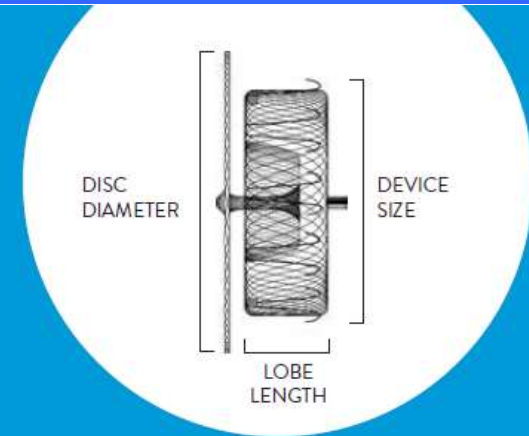
# TEE measure during Procedure

Amulet



# AMPLATZER™ Amulet™

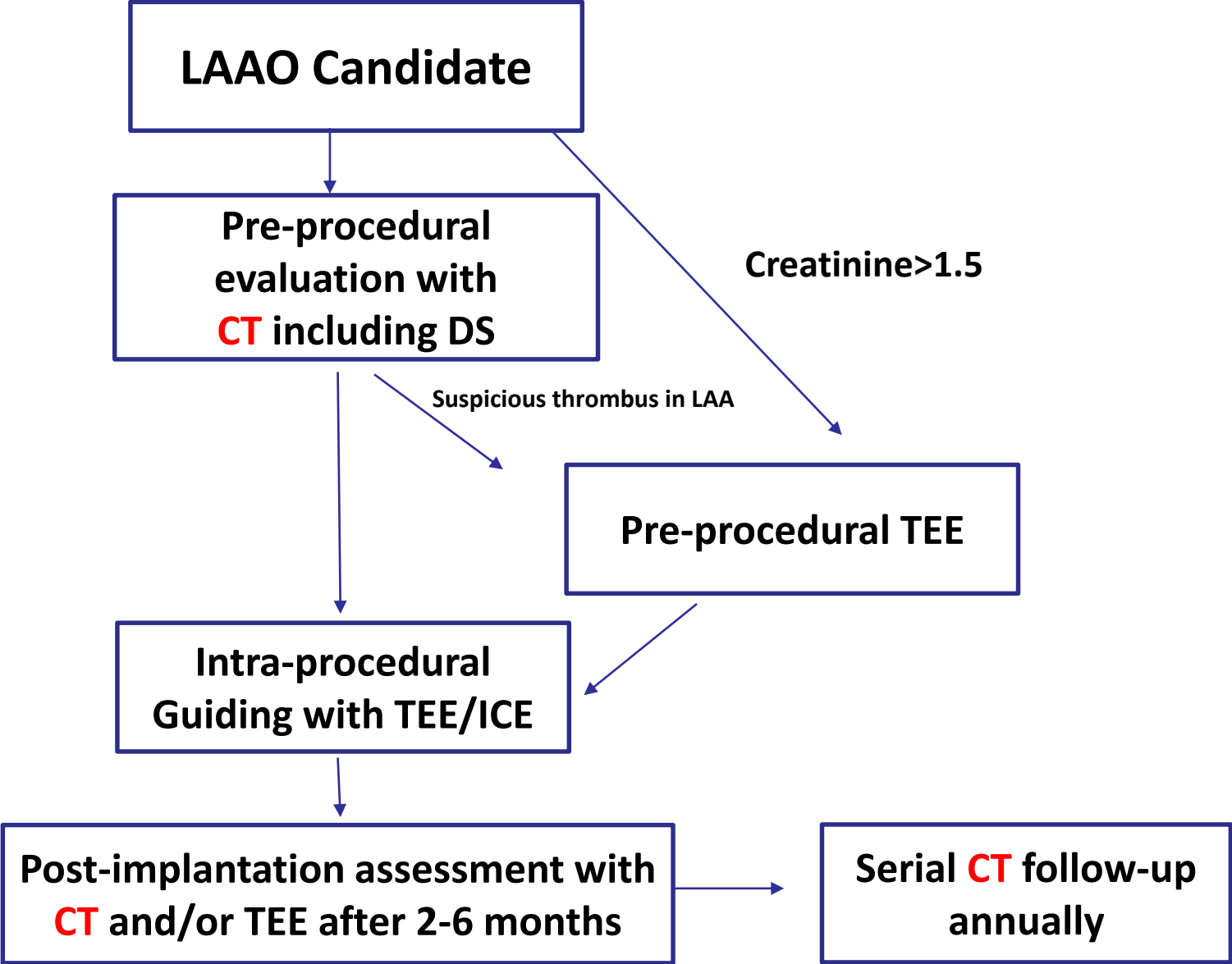
## LEFT ATRIAL APPENDAGE OCCLUDER



### DEVICE DIMENSIONS AND SIZING CHART

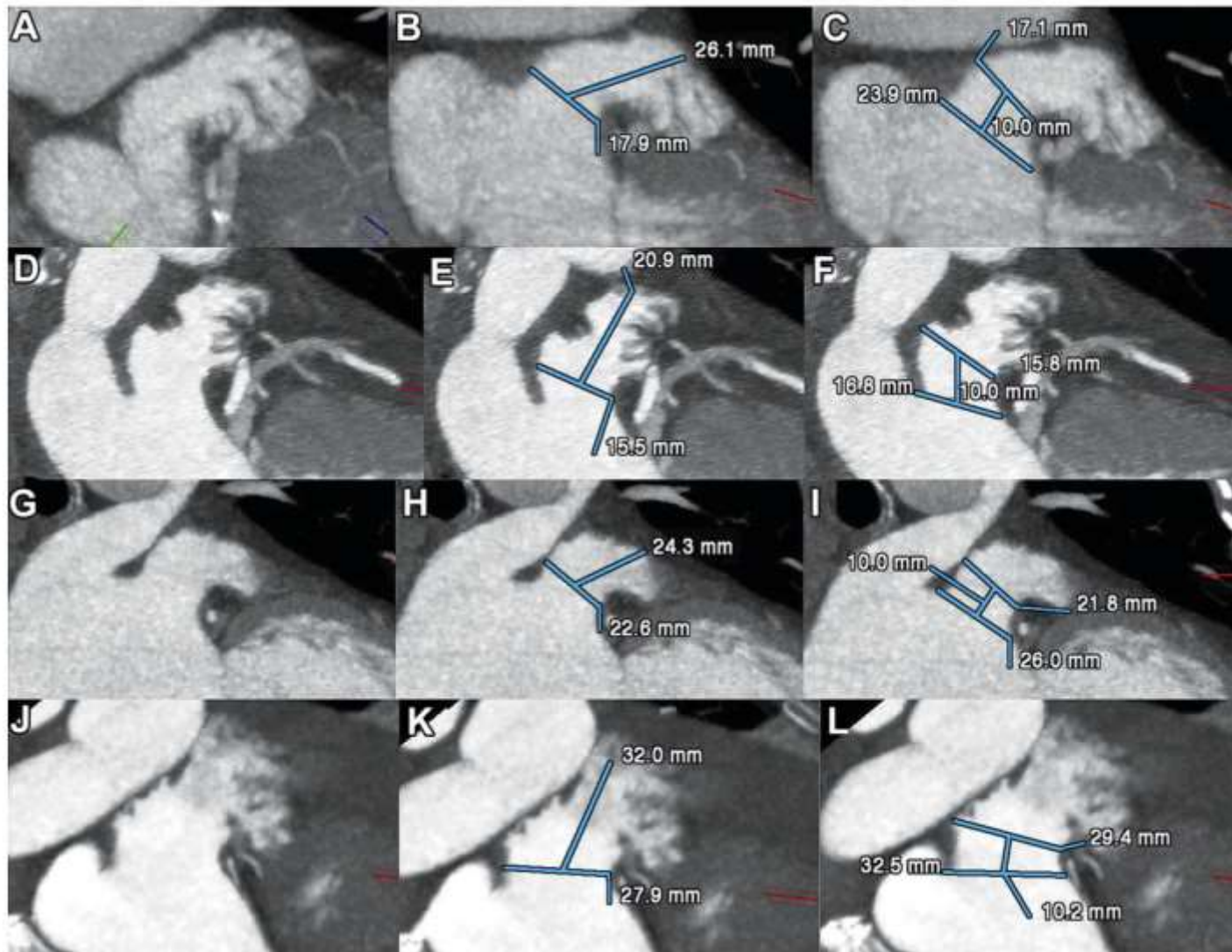
MAXIMUM LANDING ZONE WIDTH (MM)	DEVICE SIZE (MM)	LOBE LENGTH (MM)	MINIMUM LAA DEPTH (MM)	DISC DIAMETER (MM)	SHEATH DIAMETER
11.0-13.0	16	7.5	≥ 10	22	<b>12 F</b> or <b>14 F</b> (with adaptor)
13.0-15.0	18	7.5	≥ 10	24	
15.0-17.0	20	7.5	≥ 10	26	
17.0-19.0	22	7.5	≥ 10	28	
19.0-22.0	25	10	≥ 12	32	
22.0-25.0	28	10	≥ 12	35	<b>14 F</b>
25.0-28.0	31	10	≥ 12	38	
28.0-31.0	34	10	≥ 12	41	

# CT First Workflow for LAAO Procedure

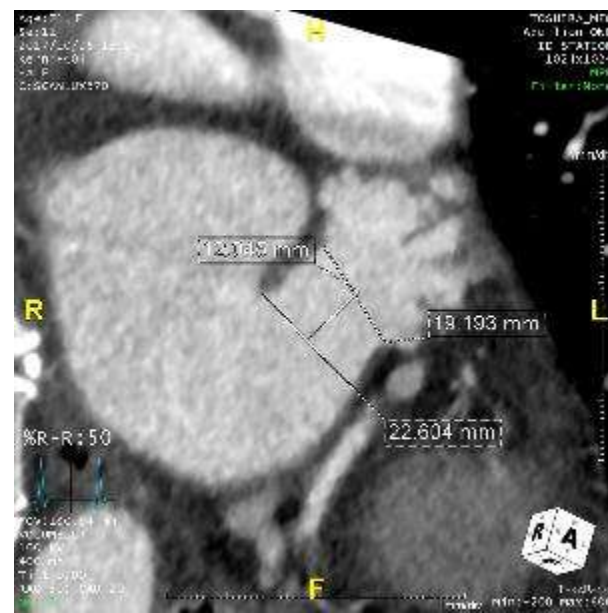




# Conventional 2D Measures

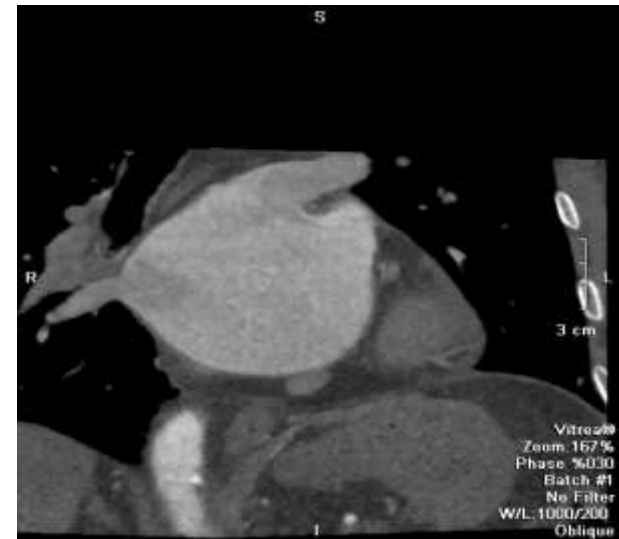


Saw J, et al., *J Am Coll Cardiol Interv* 2014;7:1205–20



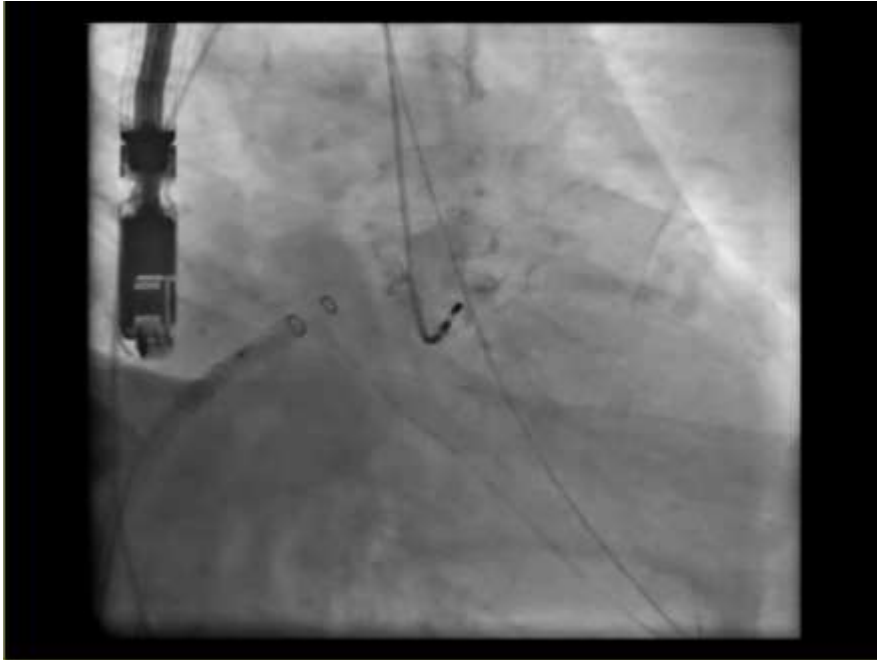
# **Good Results vs. Bad Results.**

# Recapture & deployment – Good Results



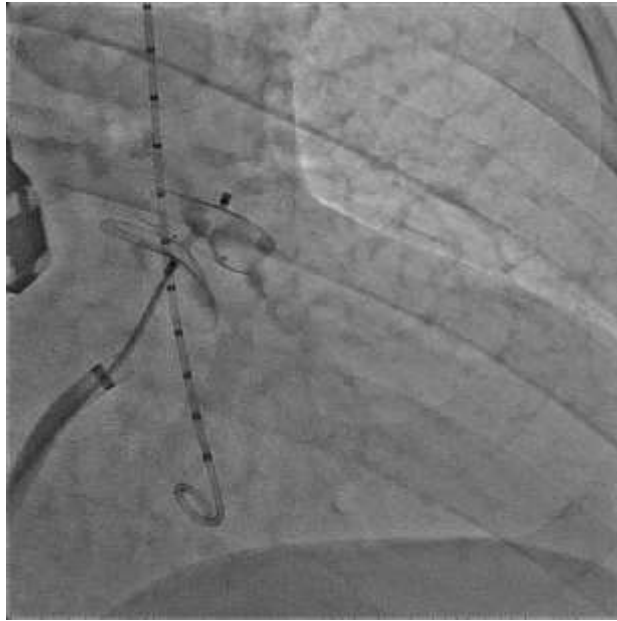


# Good Results

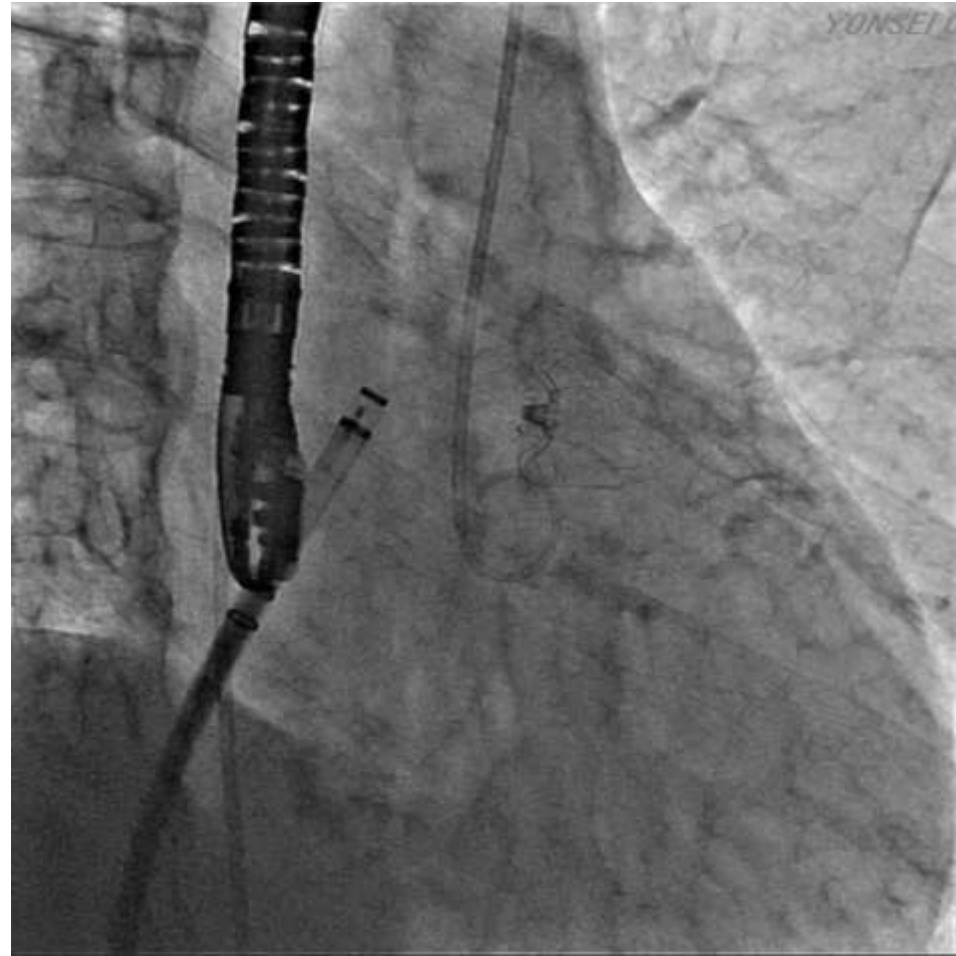
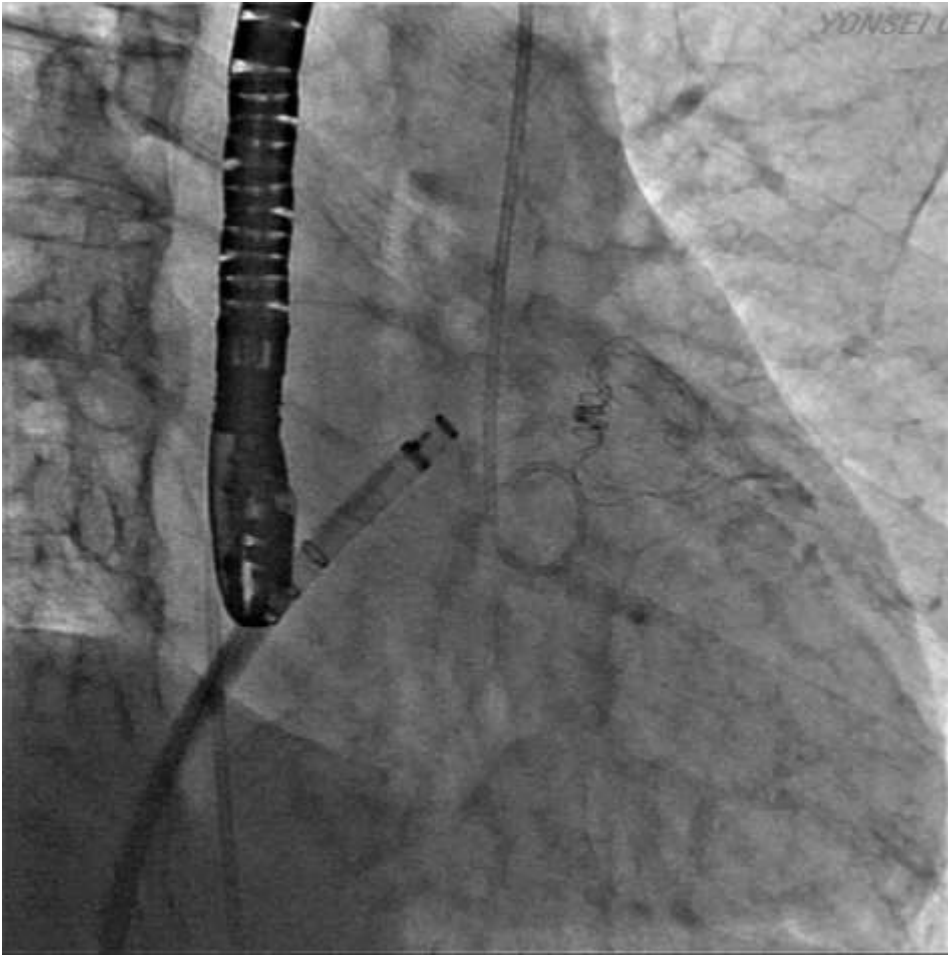




# Good Results

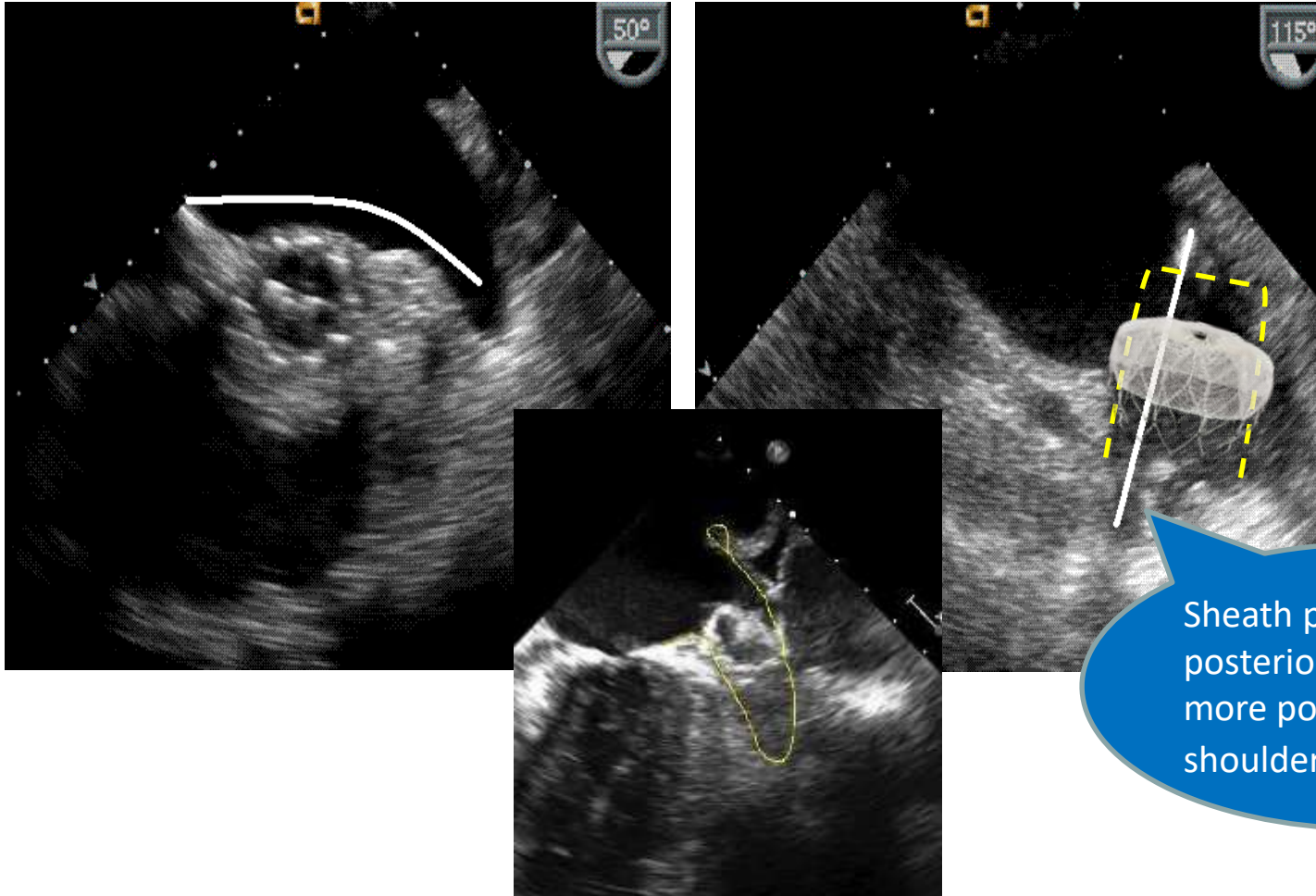


# Inappropriate Results



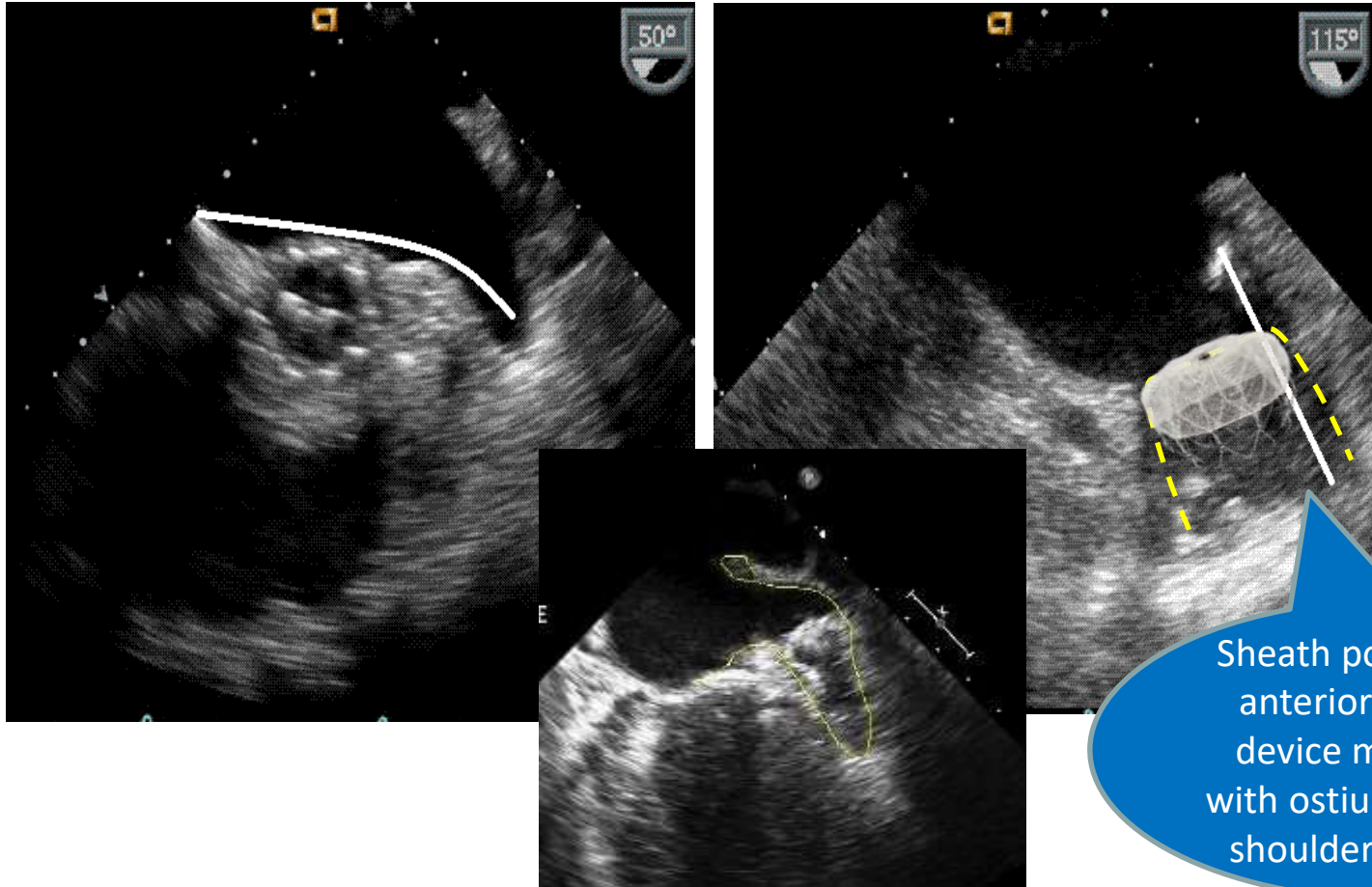
**Successful implantation (?)** of LAA occlusion device (24mm WATCHMAN)

## IAS Crossing / Sheath Ramifications - Double Curve / Post. Stick no Torque



Sheath position in the posterior lobe leaves more posterior shoulder protrusion.

## IAS Crossing / Sheath Ramifications - Double Curve / Post. Stick with CCW Torque



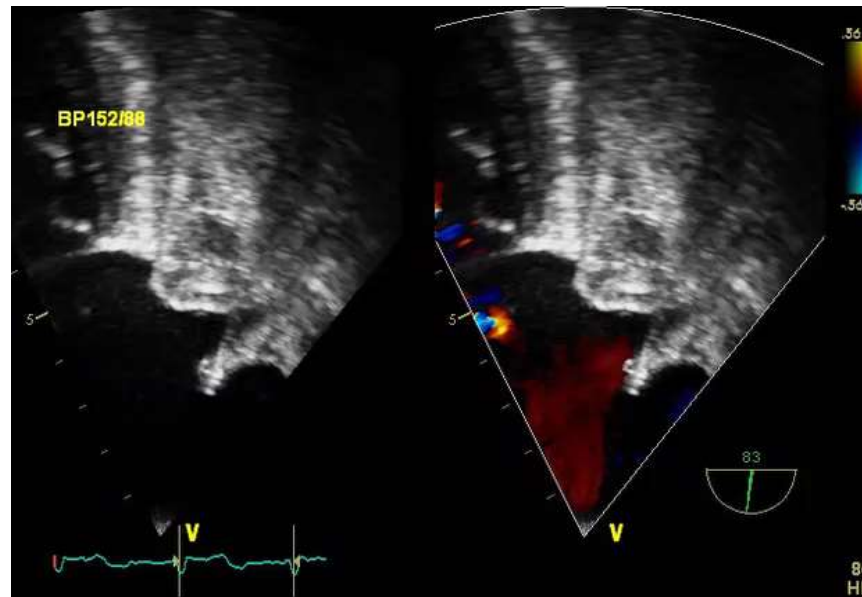
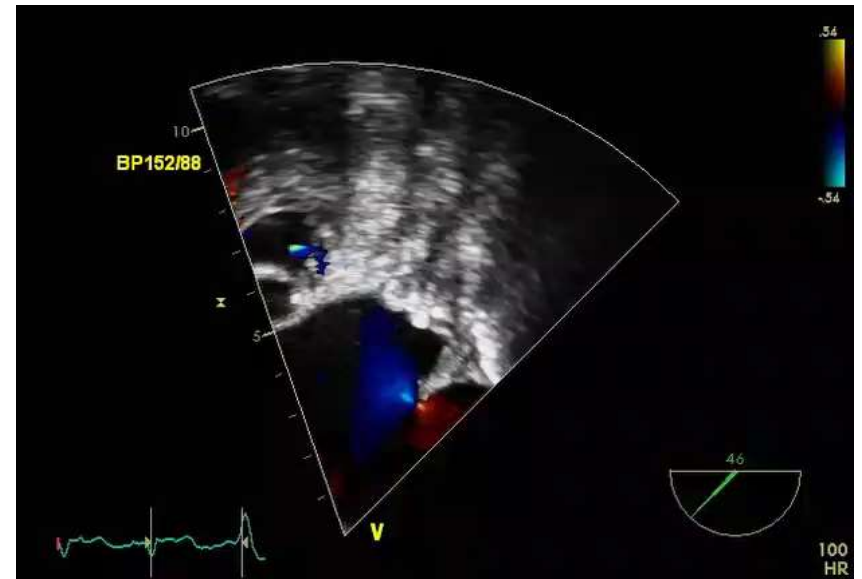


- Small atrial side device thrombosis.

**Yonsei University College of Medicine**



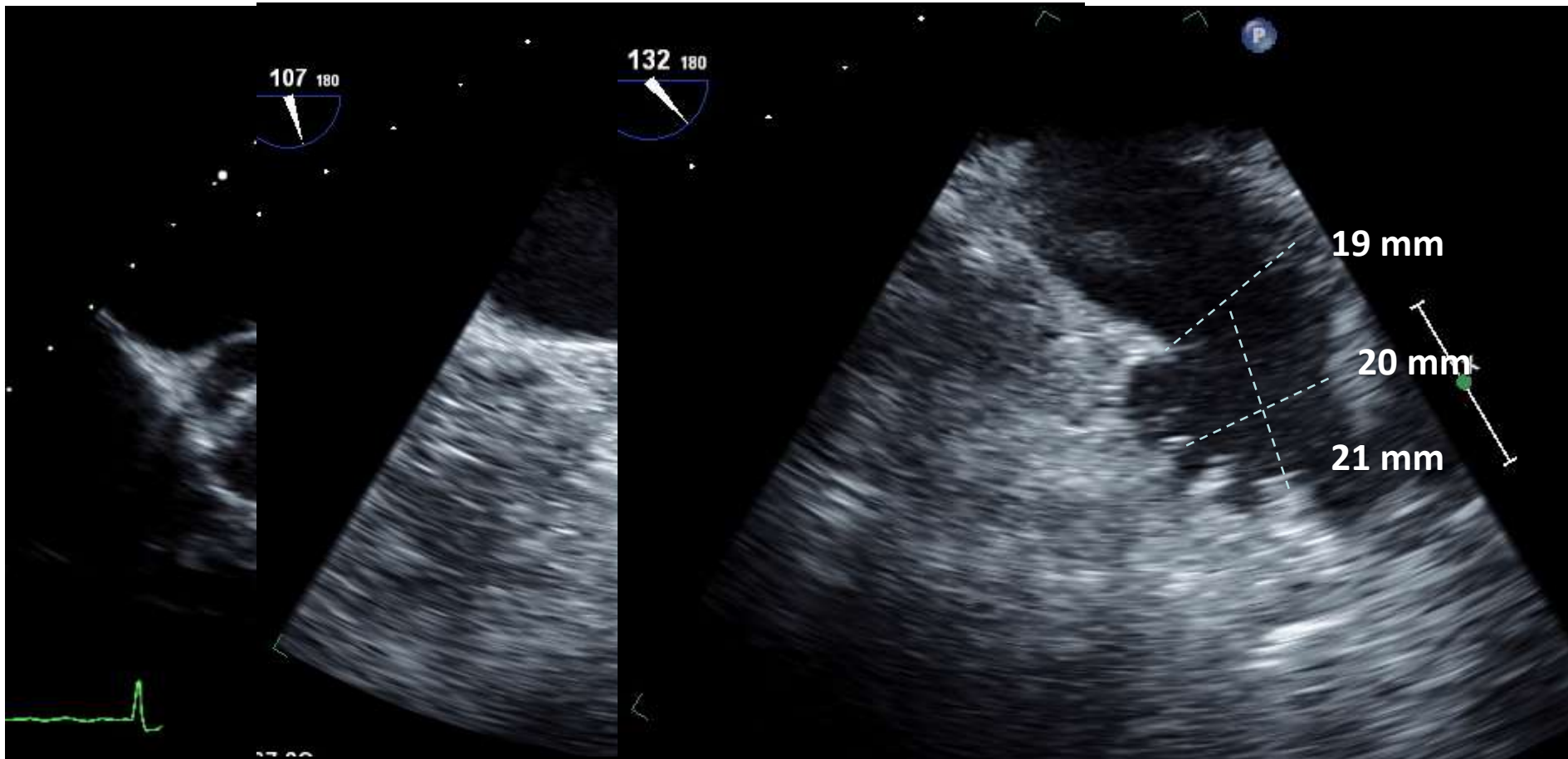
# 2 month follow-up TEE after NOAC



# Real Cases

# TEE

Amulet

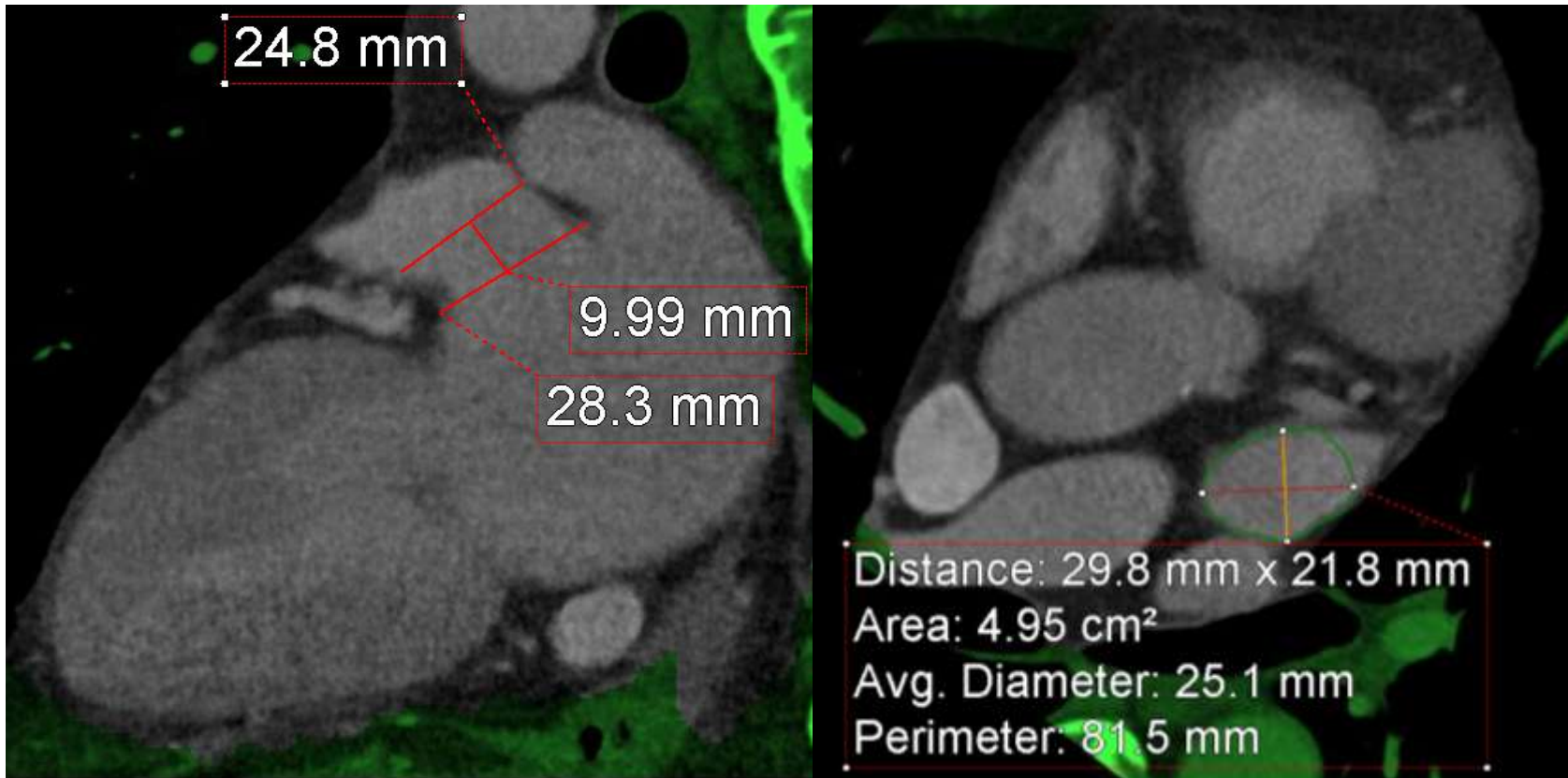


In 45 degree, Os 27 mm/Landing **22mm**/Depth 26 mm  
In 107 degree, Os 23 mm/Landing **20 mm**/Depth 24 mm  
In 135 degree, Os 19 mm/Landing **20 mm**, Depth 21 mm

Courtesy slide of Dr. Cho IS

# LAAO Size Determination

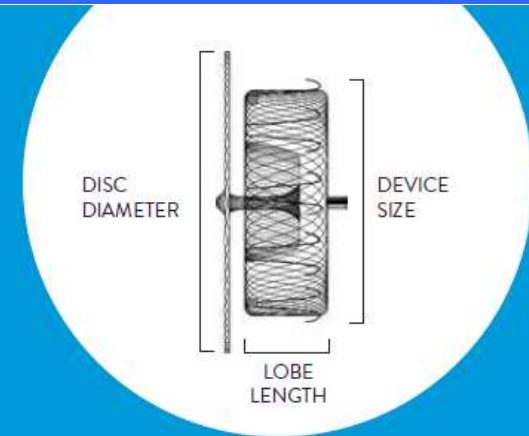
Amulet



Courtesy slide of Dr. Cho IS

# AMPLATZER™ Amulet™

## LEFT ATRIAL APPENDAGE OCCLUDER



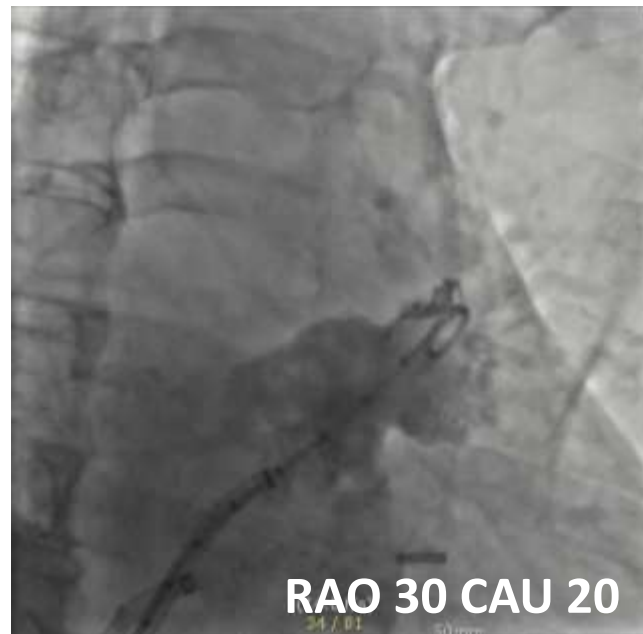
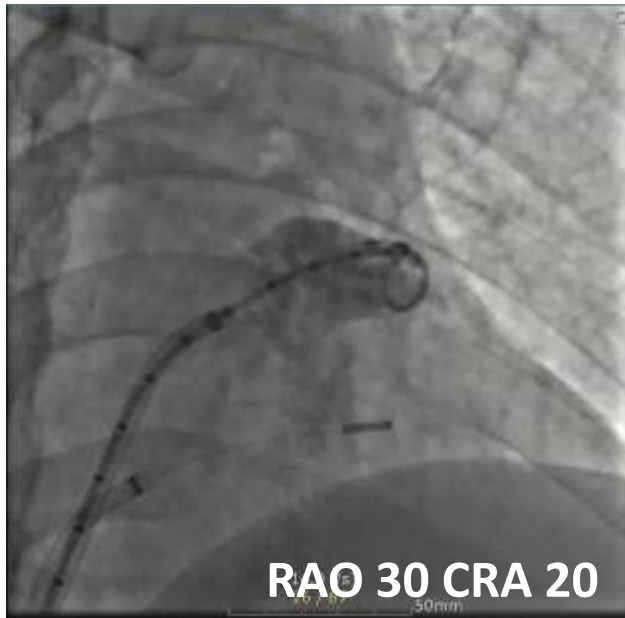
### DEVICE DIMENSIONS AND SIZING CHART

MAXIMUM LANDING ZONE WIDTH (MM)	DEVICE SIZE (MM)	LOBE LENGTH (MM)	MINIMUM LAA DEPTH (MM)	DISC DIAMETER (MM)	SHEATH DIAMETER
11.0-13.0	16	7.5	≥ 10	22	<b>12 F</b> or <b>14 F</b> (with adaptor)
13.0-15.0	18	7.5	≥ 10	24	
15.0-17.0	20	7.5	≥ 10	26	
17.0-19.0	22	7.5	≥ 10	28	
19.0-22.0	25	10	≥ 12	32	<b>14 F</b>
22.0-25.0	28	10	≥ 12	35	
25.0-28.0	31	10	≥ 12	38	
28.0-31.0	34	10	≥ 12	41	



# Amulet 25mm

**Amulet**

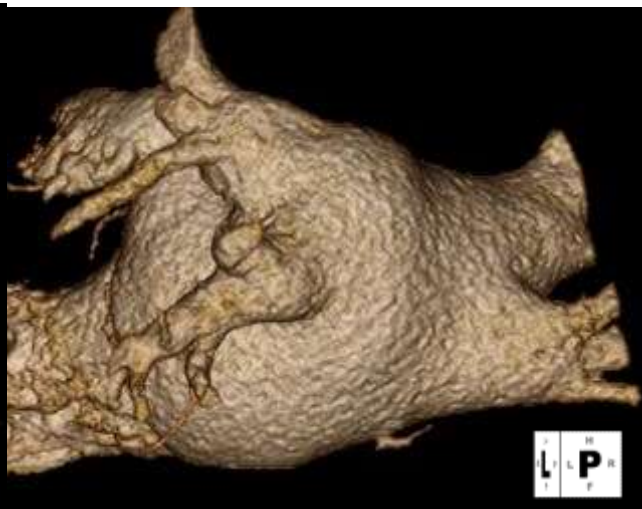
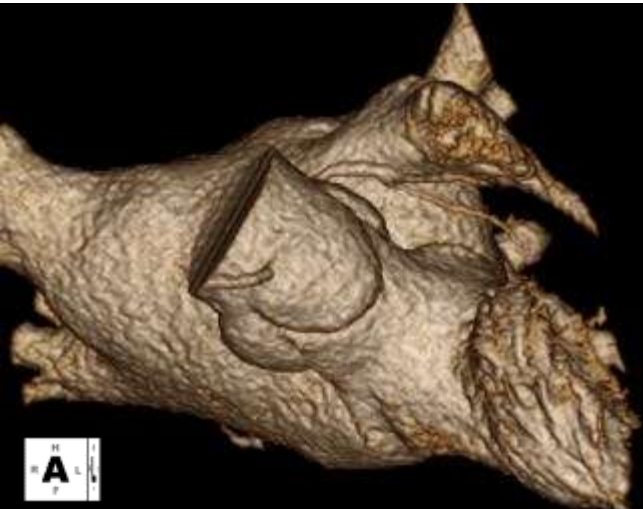
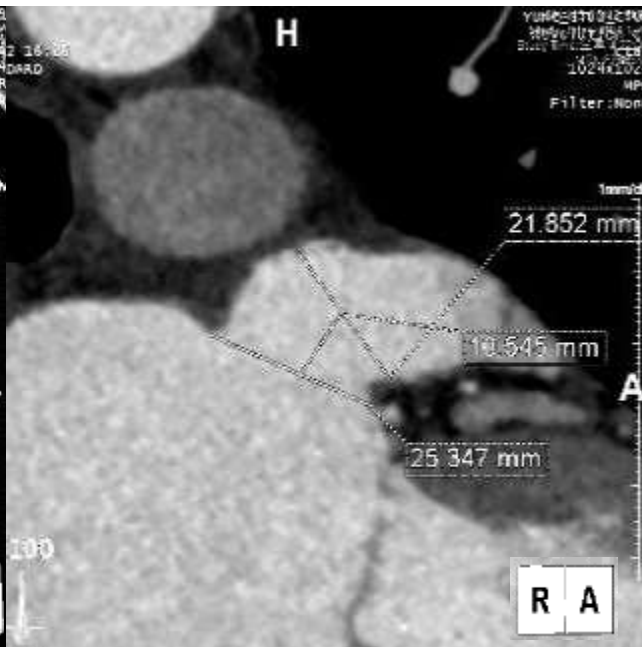
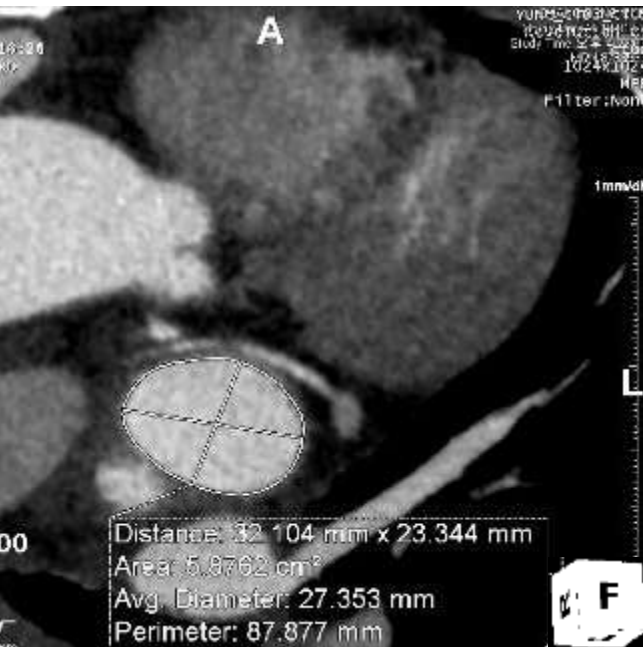


**Courtesy slide of  
Dr. Cho IS**

- **M / 59, 167cm / 71 kg**
- **Current diagnosis**
  - **Persistent AF (2018.12, CHA<sub>2</sub>DS<sub>2</sub>-VASc: 3, HAS-BLED : 4)**
  - **Liver cirrhosis d/t CHB & alcohol**
  - **Esophageal varix bleeding s/p EVL (2018.12)**
  - **Old CVA at the Lt. frontal SCWM area**

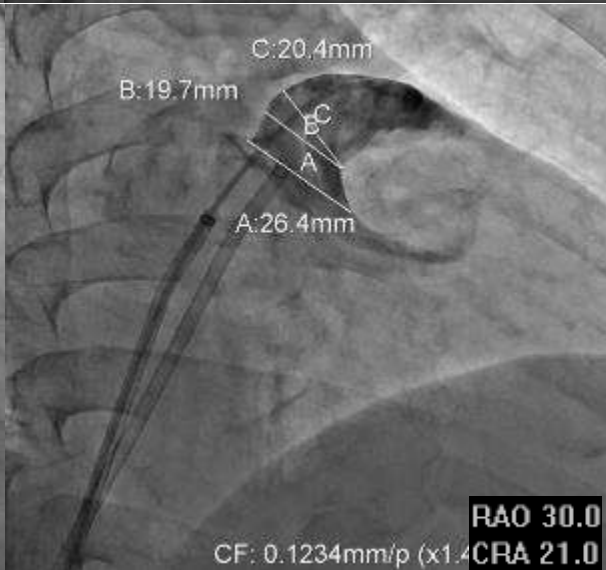
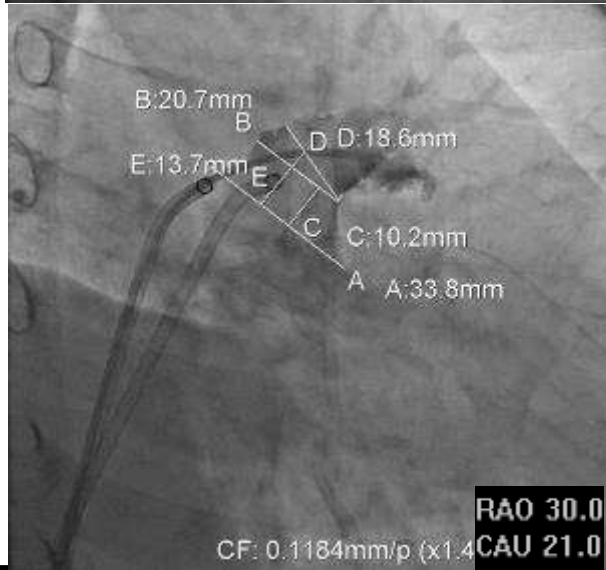
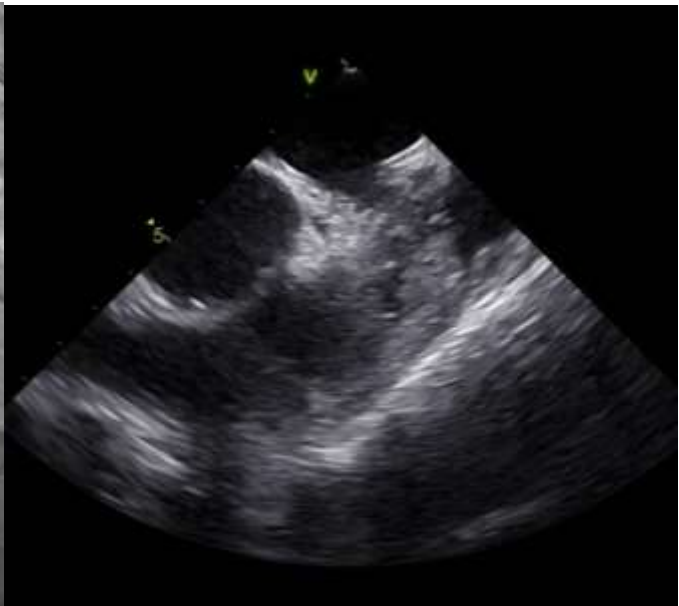
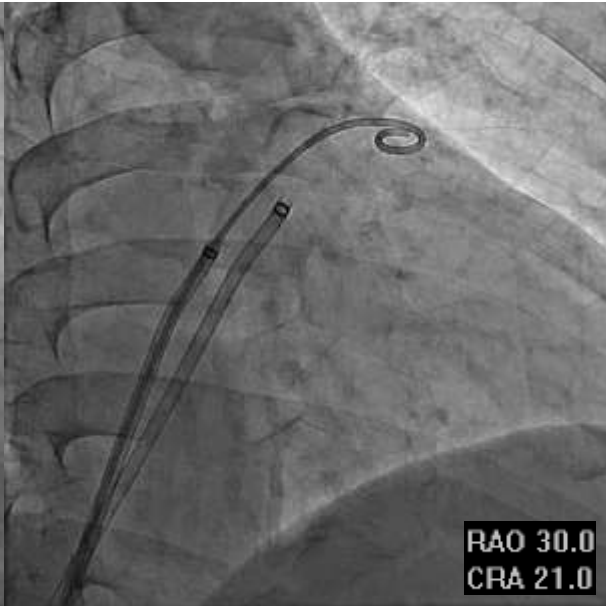
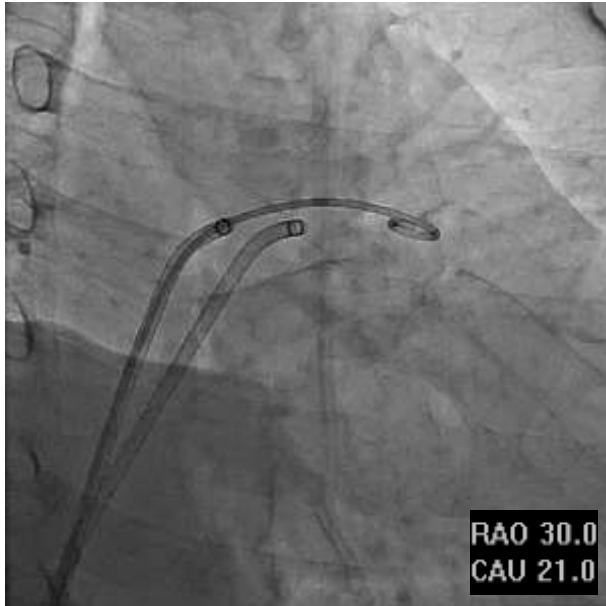
# Preprocedural Planning CT

**Amulet**



**Mild circulatory stasis in LAA without thrombus**  
**LAA ostium 32.1x23.3mm**  
**(average 27.4mm)**  
**LAA perimeter 87.9mm**  
**Landing zone diameter 21.9mm**

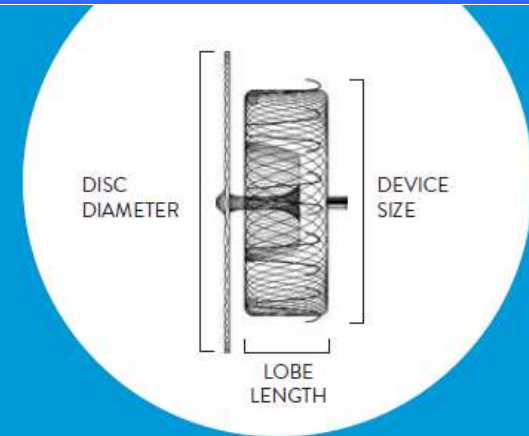
# Measurements and Sizing





# AMPLATZER™ Amulet™

## LEFT ATRIAL APPENDAGE OCCLUDER



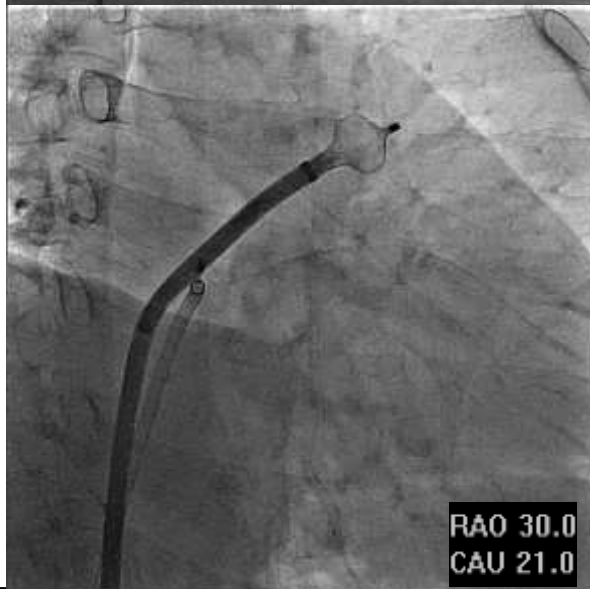
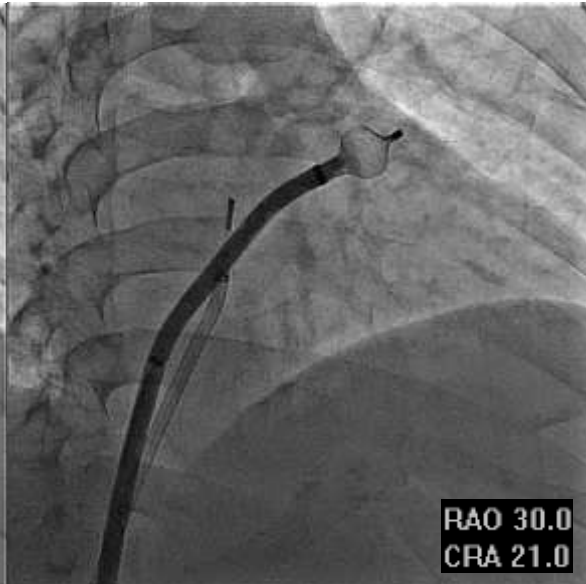
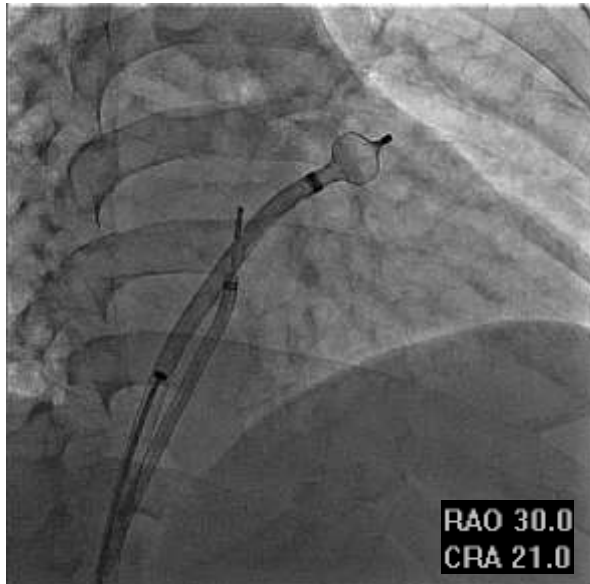
### DEVICE DIMENSIONS AND SIZING CHART

MAXIMUM LANDING ZONE WIDTH (MM)	DEVICE SIZE (MM)	LOBE LENGTH (MM)	MINIMUM LAA DEPTH (MM)	DISC DIAMETER (MM)	SHEATH DIAMETER
11.0-13.0	16	7.5	≥ 10	22	<b>12 F</b> or <b>14 F</b> (with adaptor)
13.0-15.0	18	7.5	≥ 10	24	
15.0-17.0	20	7.5	≥ 10	26	
17.0-19.0	22	7.5	≥ 10	28	
19.0-22.0	25	10	≥ 12	32	<b>14 F</b>
22.0-25.0	28	10	≥ 12	35	
25.0-28.0	31	10	≥ 12	38	
28.0-31.0	34	10	≥ 12	41	



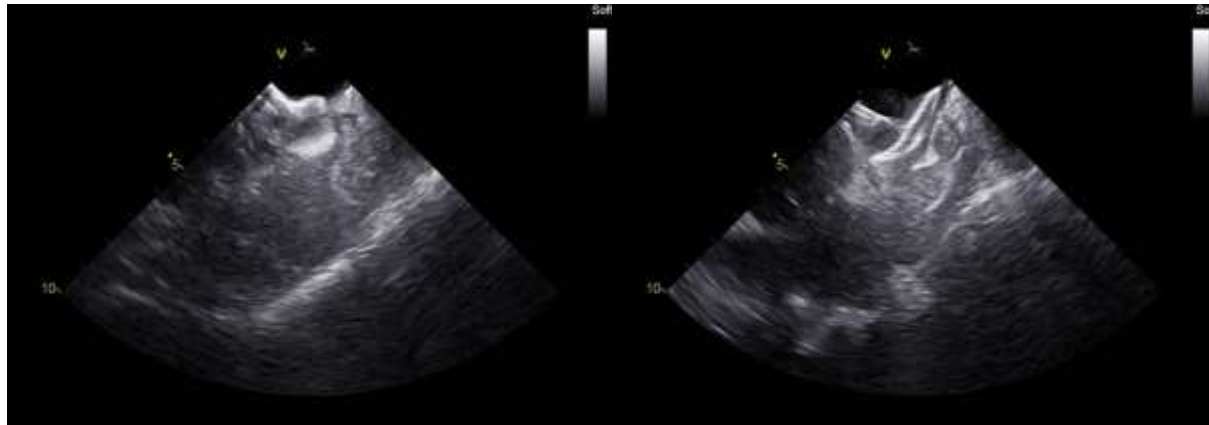
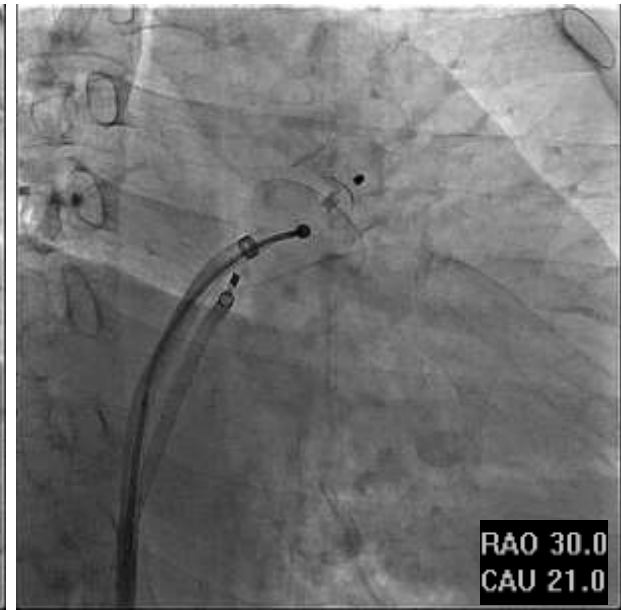
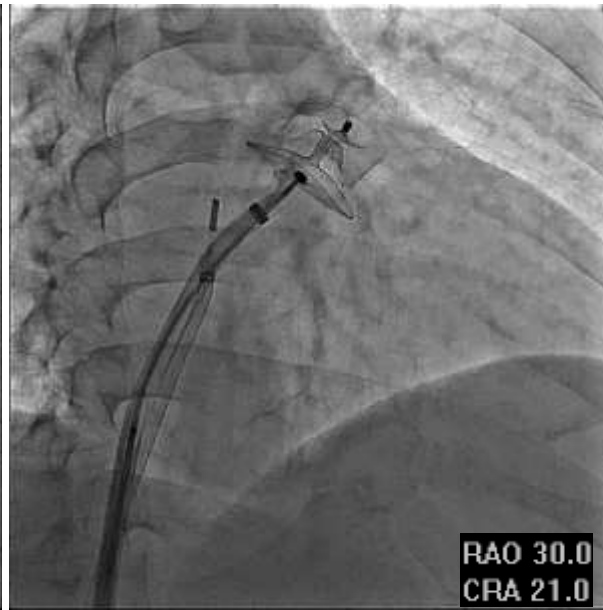
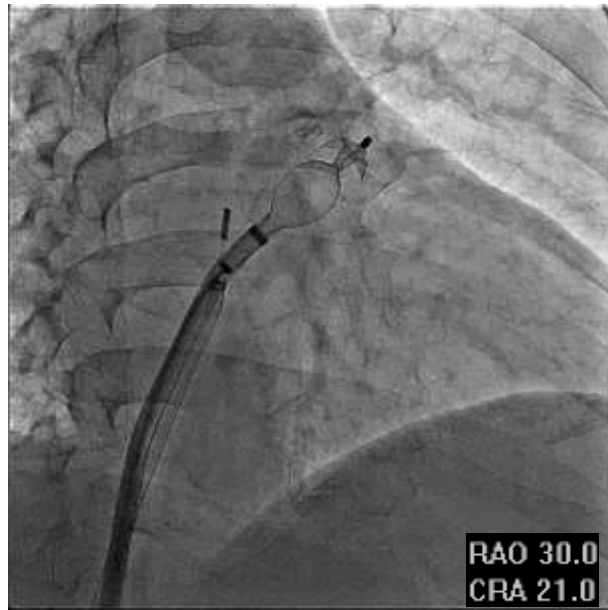
# Lobe Deployment

Amulet



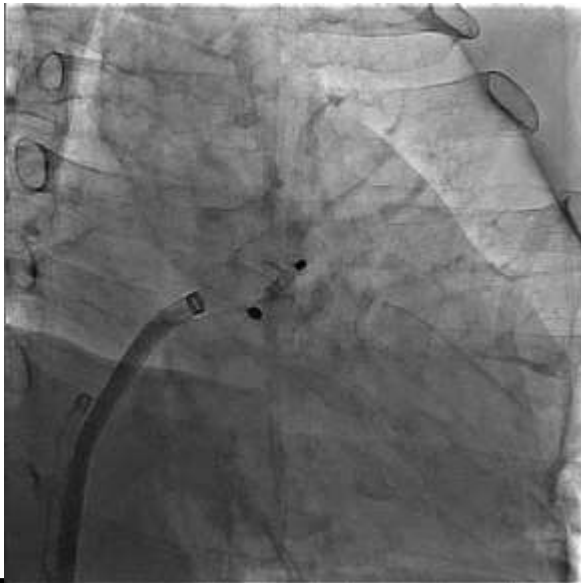
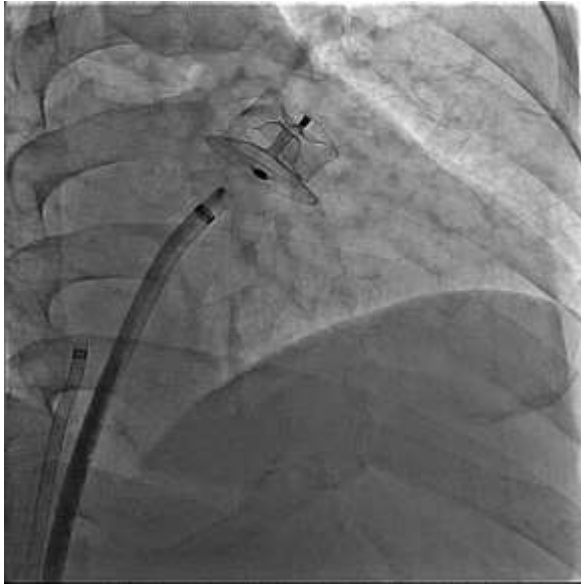
# Disc Deployment (25 mm Amulet)

**Amulet**



# Final Angiography

Amulet



- **Stable angina pectoris**
- **S/P PTCA c stent**
- **PeAF (CHA<sub>2</sub>DS<sub>2</sub>-VASc score = 7, HAS-BLED score = 5)**
- **DM**
- **Brain hemorrhage (1995)**
- **s/p Carotid stenting**
- **CKD**



# TEE measurement

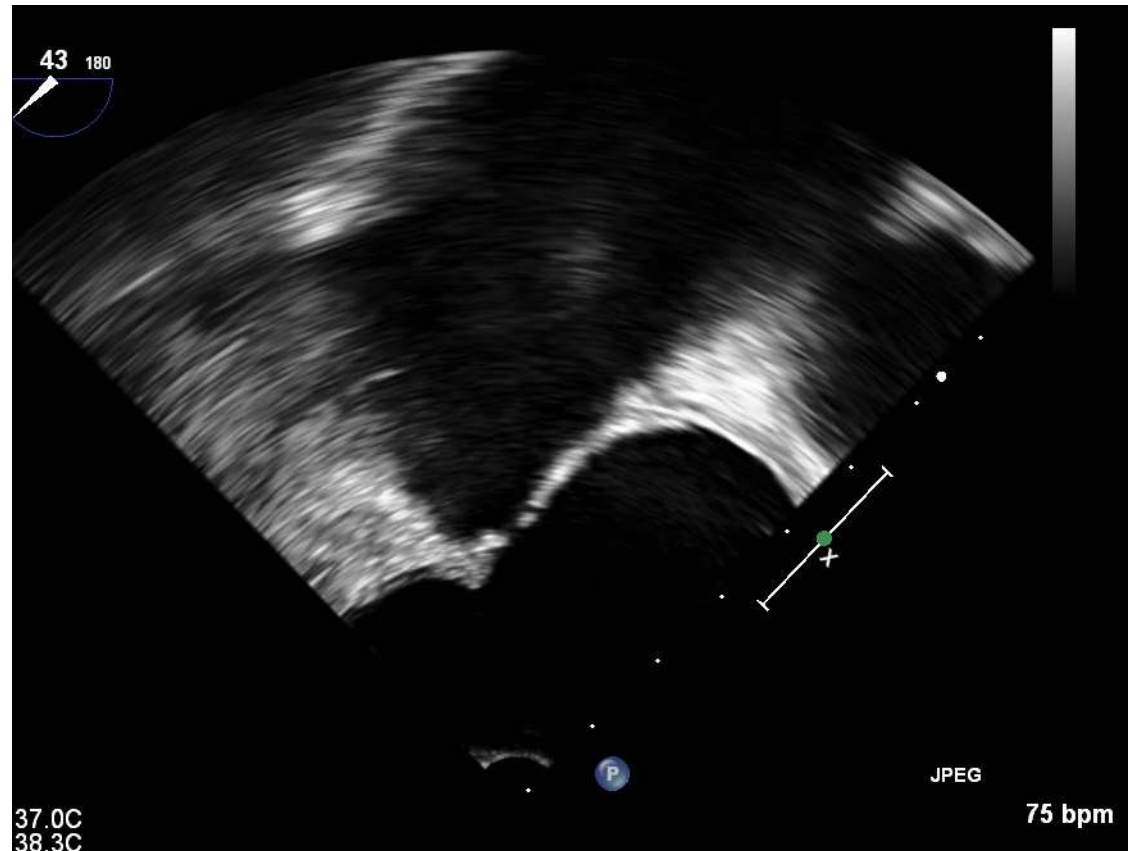
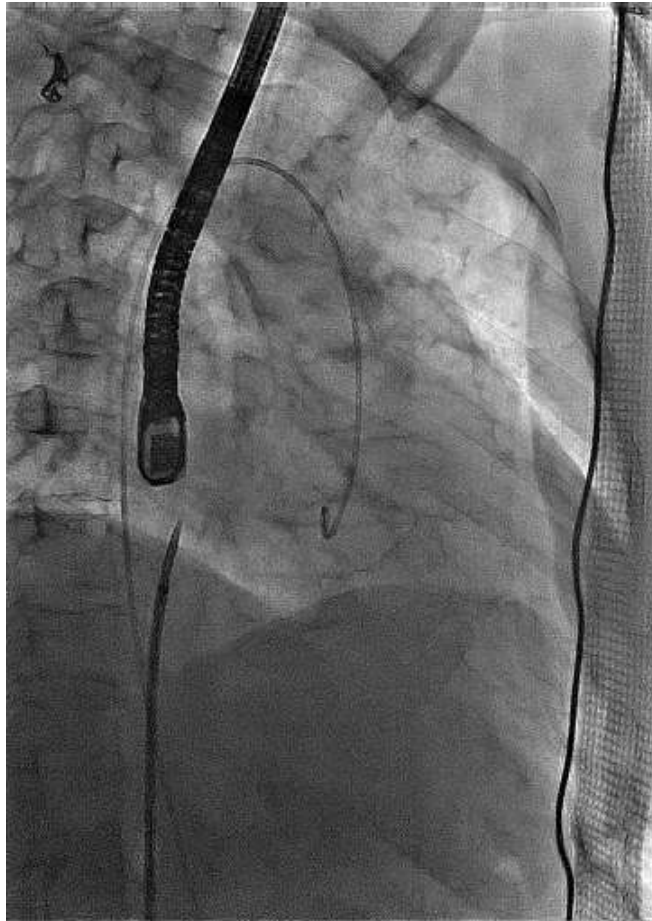
Watchman



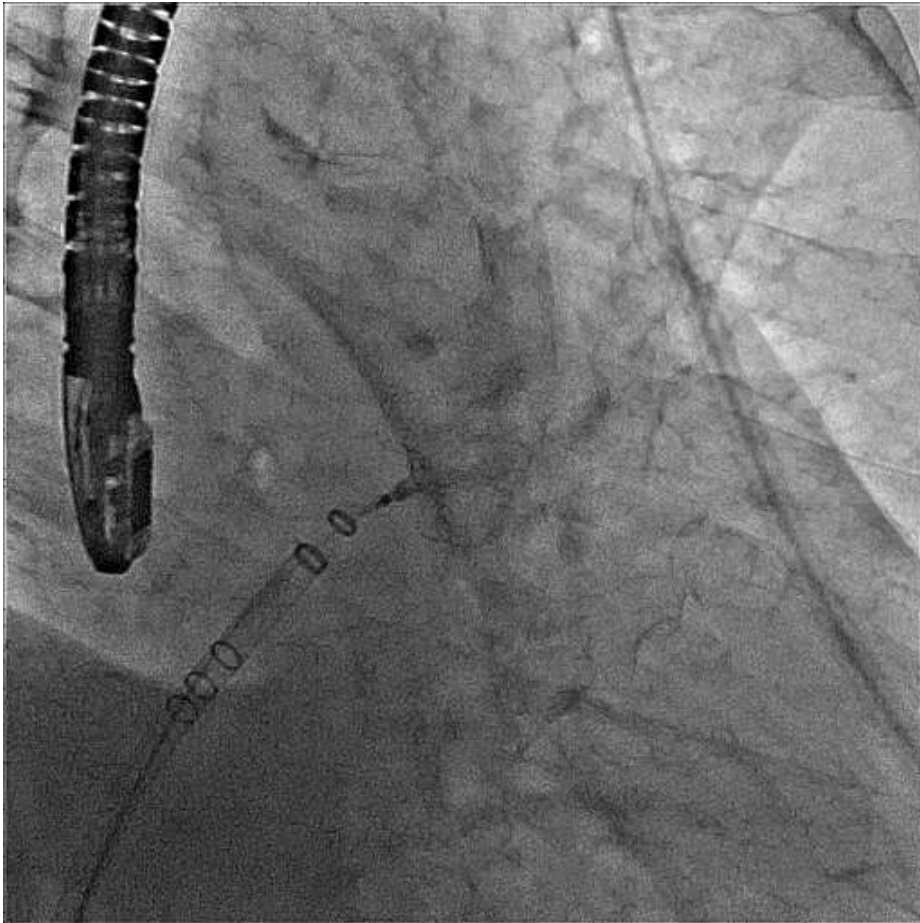




Maximum LAA Ostium (mm)	Device Size (mm) (uncompressed diameter)
17-19	21
20-22	24
23-25	27
26-28	30
29-31	33



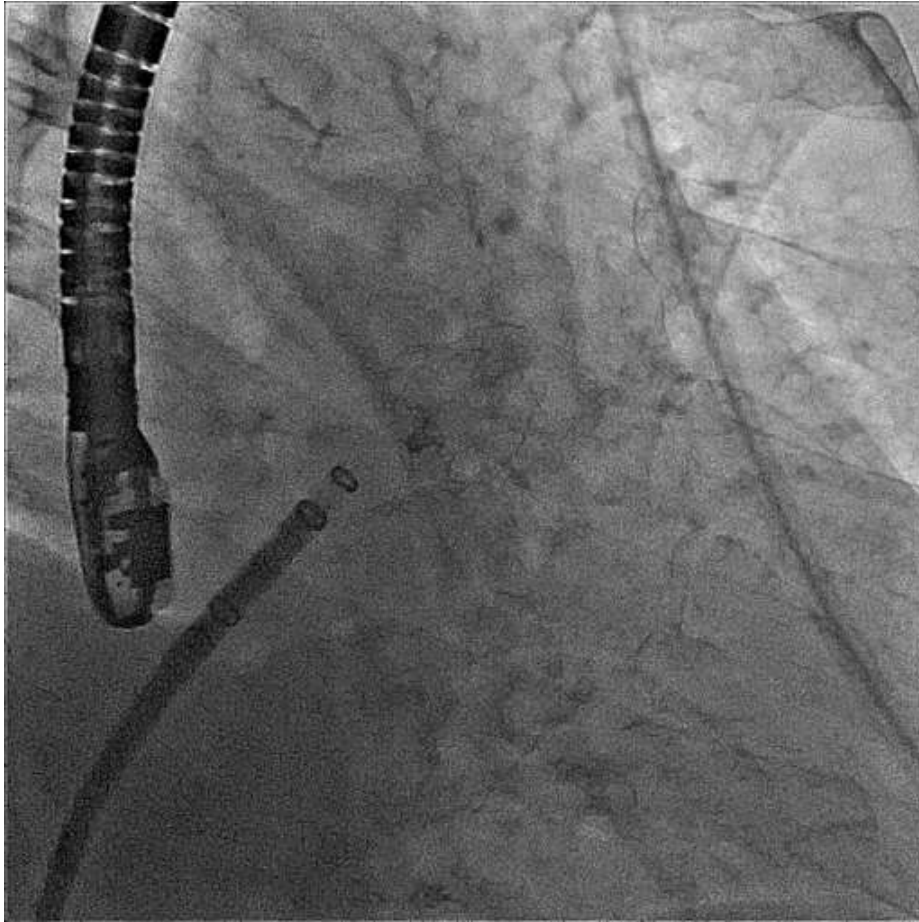
**Targeting posterior-inferior septum under TEE-guidance**



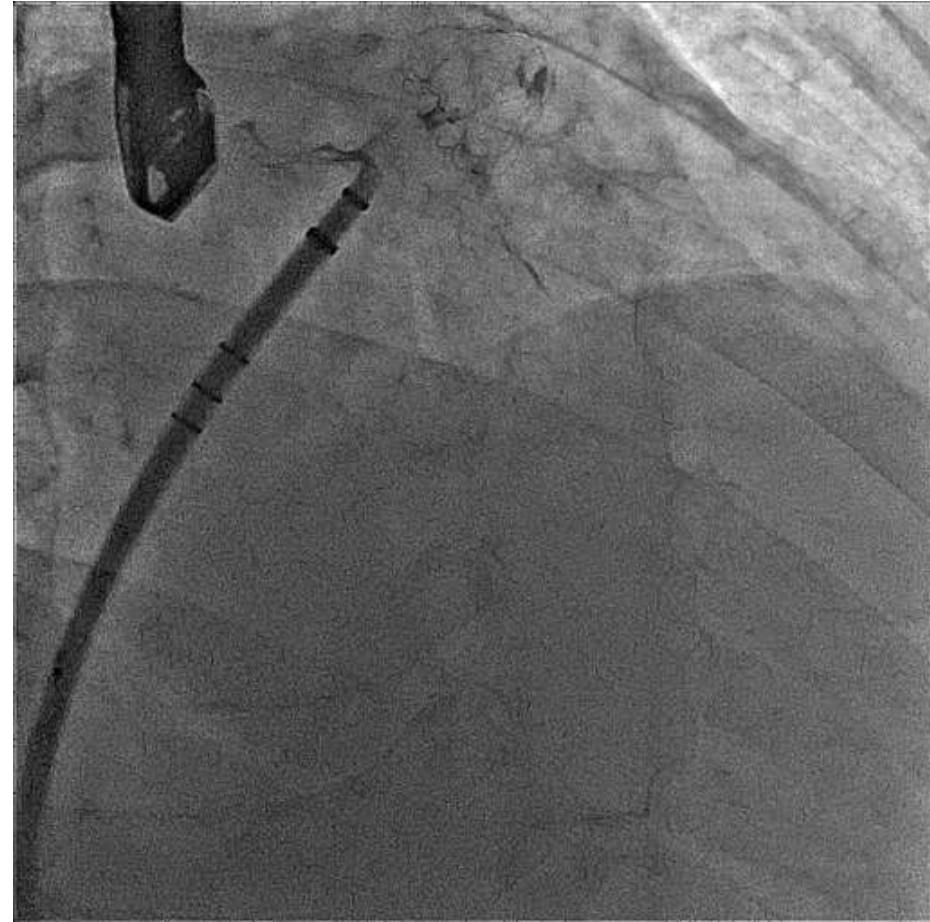
**Watchman 24mm**







**RAO 30 CAU 20**

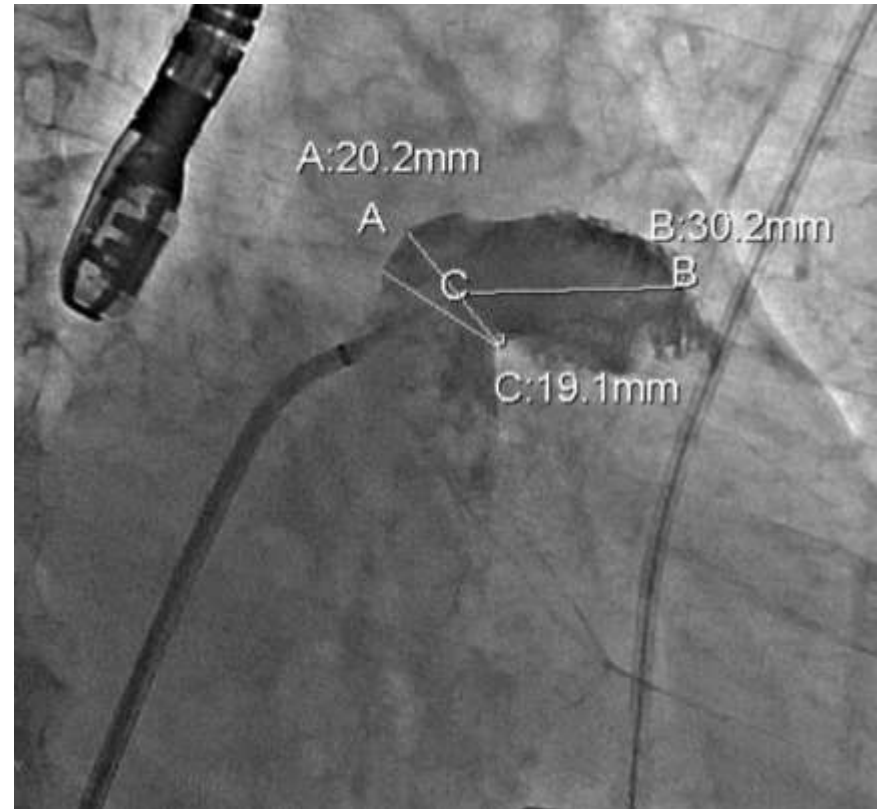
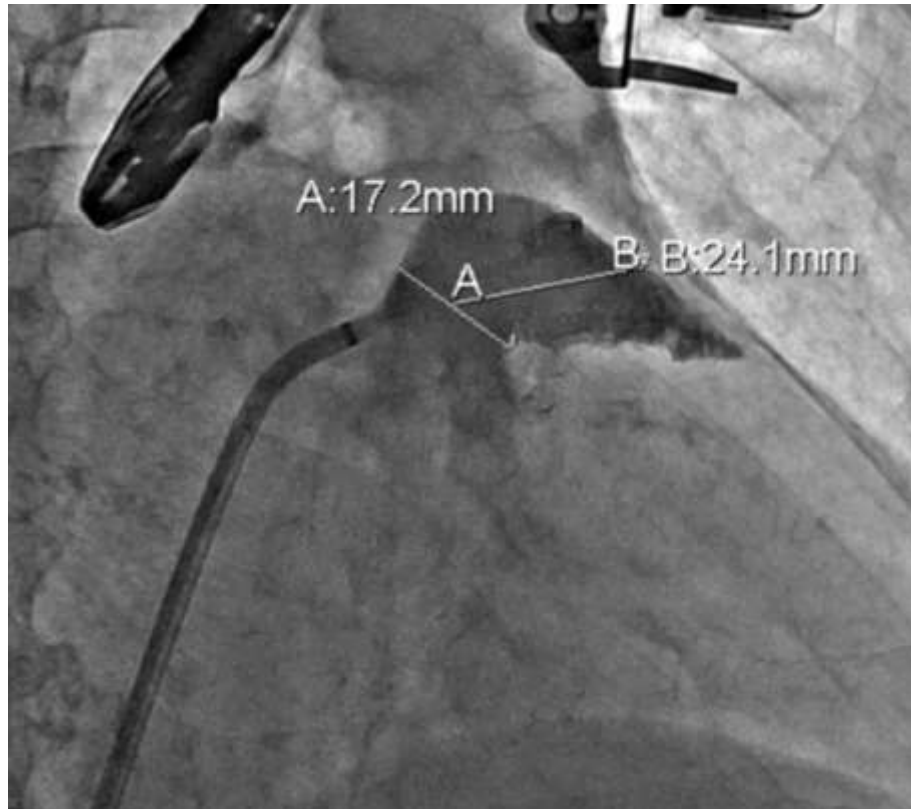


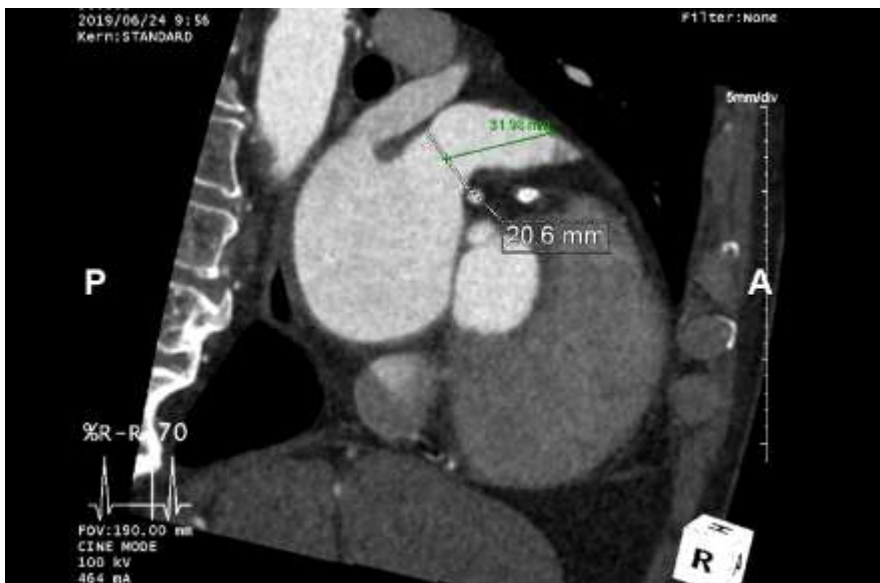
**RAO 30 CRA 20**

- Old MI
- s/p PTCA c stent
- Small bowel bleeding
- PAF (CAHD VASc 4, HASBLED 3)









Maximum LAA Ostium (mm)	Device Size (mm) (uncompressed diameter)
17-19	21
20-22	24
23-25	27
26-28	30
29-31	33

