

LAA Closure: Step-by-Step from Septal Puncture to Device Detachment

AP Valves 2019 LAA Closure: A-to-Z with Experts

10/8/2019 9:10am to 9:30am

Simon Lam

MBBS(HK) FRCP (Glas) FHKCP (HK) FHKAM (HK) FACC

Associate Consultant

Structural Heart Intervention Program

Division of Cardiology, Department of Medicine,
Queen Mary Hospital, Hong Kong



Disclosures

- Proctor
 - St Jude Medical/Abbott
 - Edwards LifeScience
 - Lifetech Scientific
 - Boston/Claret Medical

AMULET



A1

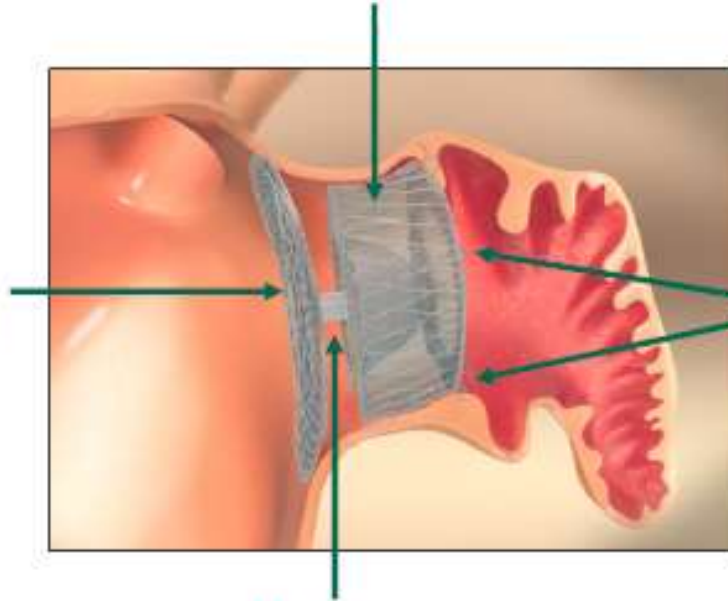
SJM AMULET LAA Occluder

Lobe

- Positioned inside the LAA neck
- Designed to conform to different sizes and shapes of LAA anatomy

Disc

- Designed to completely seal the LAA at the orifice



Waist

- Maintains tension between lobe and disc
- Flexible connection allows device to self-orient

Stabilizing Wires

- Engage with the wall of the LAA
- Help hold the device in place

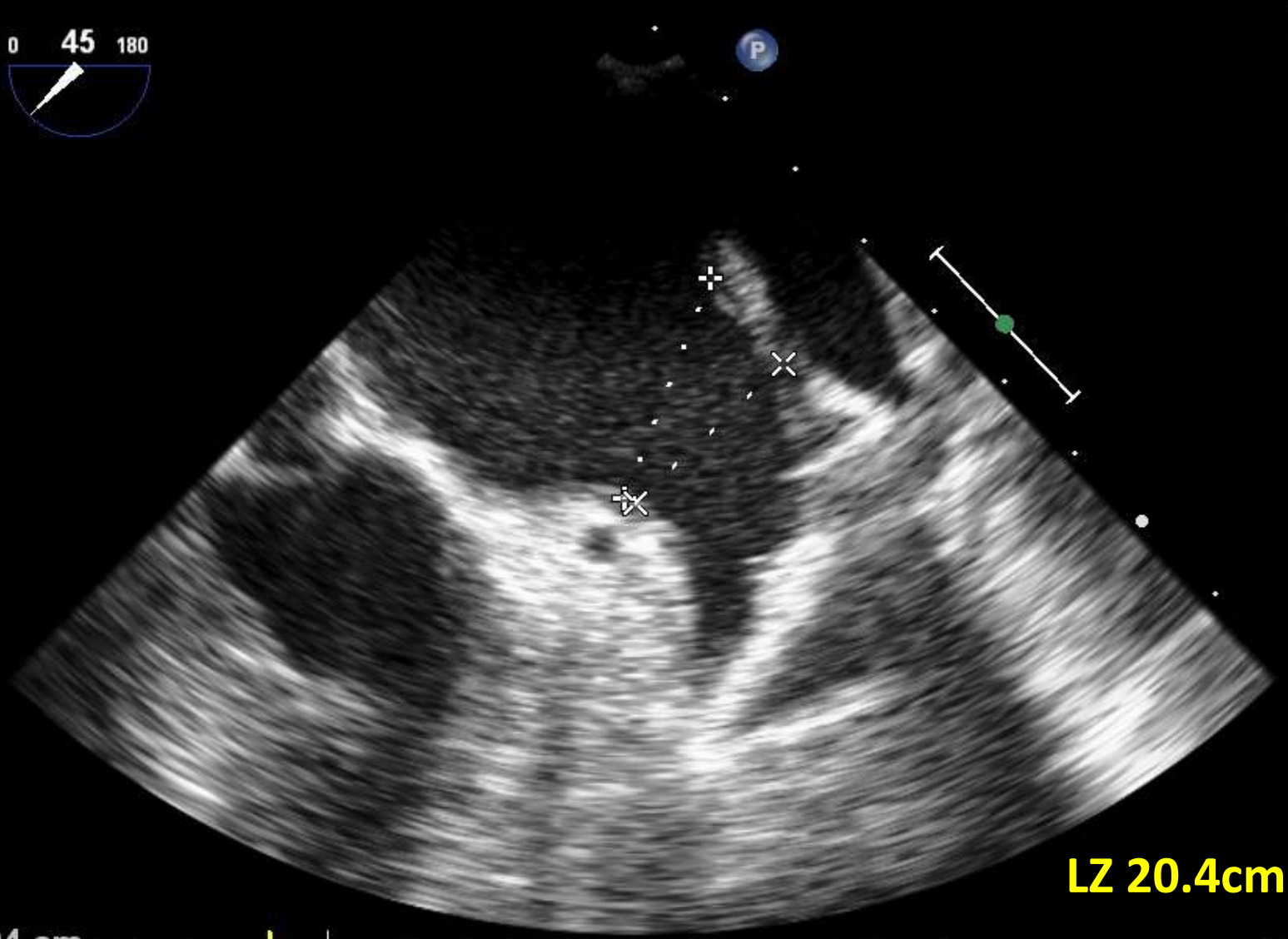


FR 50Hz
9.0cm

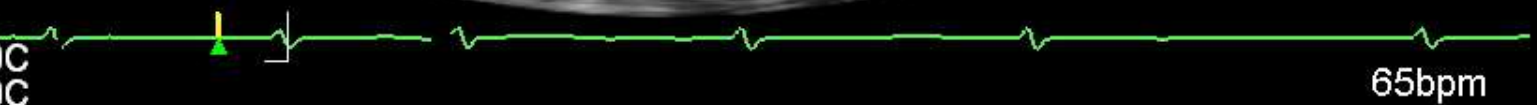
2D
64%
C 50
P Off
Gen



M4



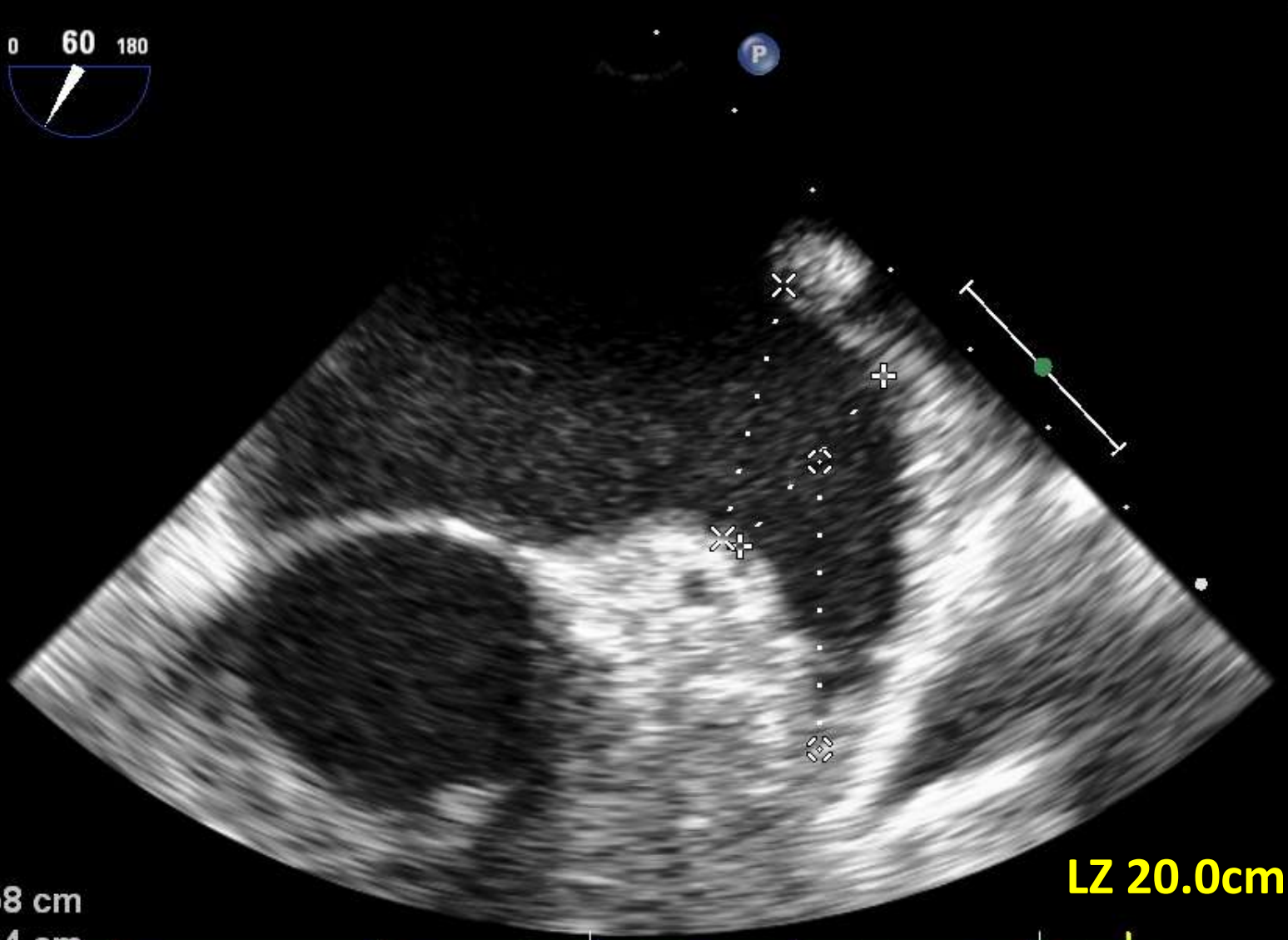
× Dist 2.04 cm
+ Dist 2.37 cm



65bpm

FR 50Hz
8.1cm

2D
62%
C 50
P Off
Gen



LZ 20.0cm

- ◇ Dist 2.58 cm
- × Dist 2.34 cm
- + Dist 2.00 cm



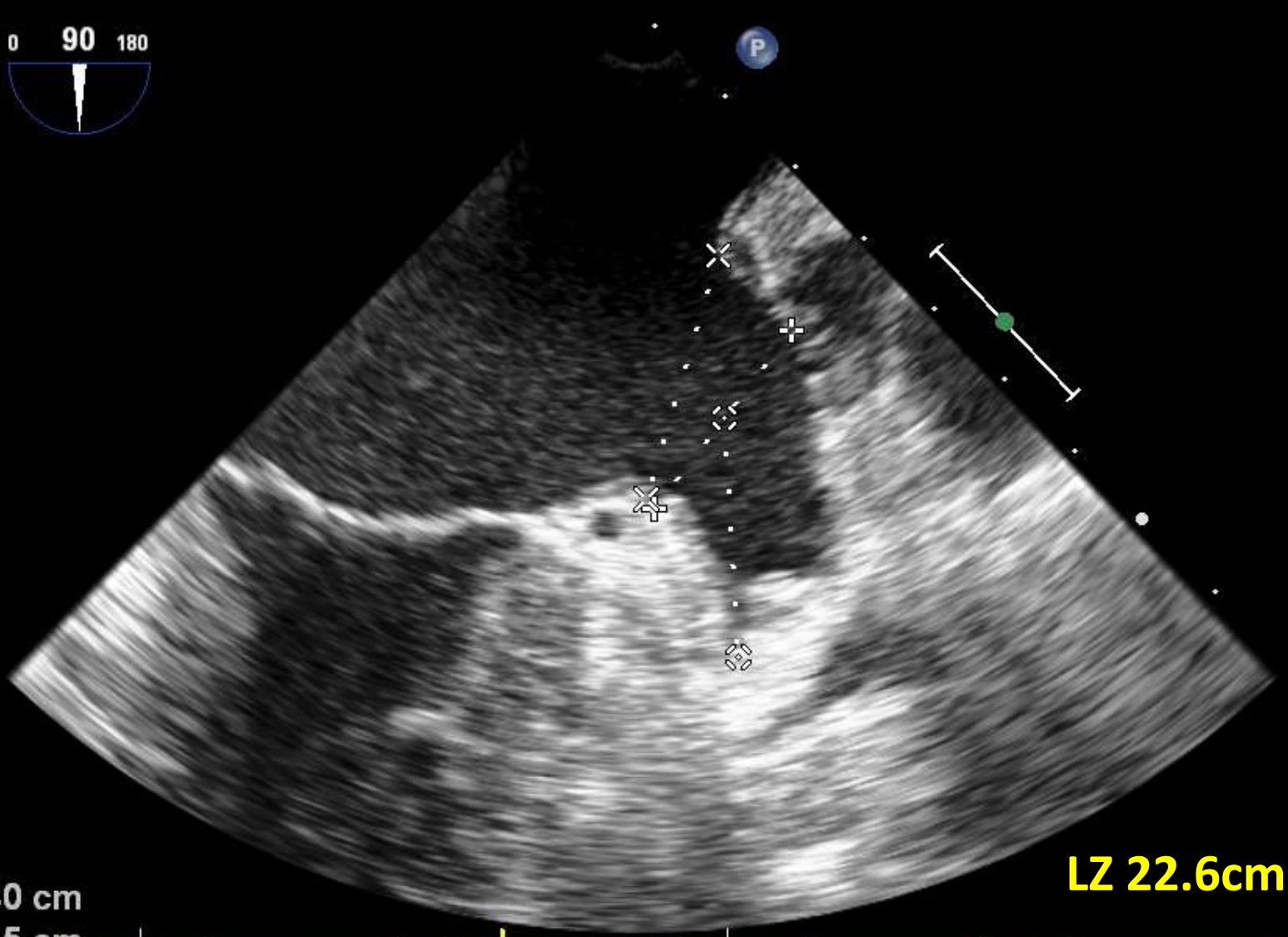
78bpm

FR 50Hz
9.0cm

2D
64%
C 50
P Off
Gen

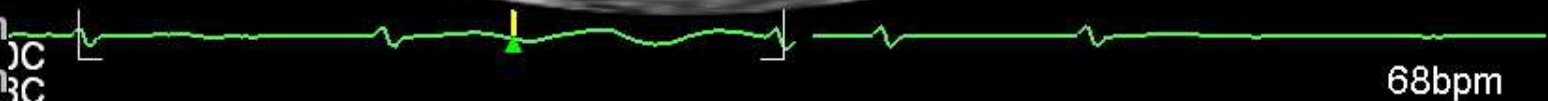


M4



- ◇ Dist 2.40 cm
- × Dist 2.55 cm
- + Dist 2.26 cm

LZ 22.6cm

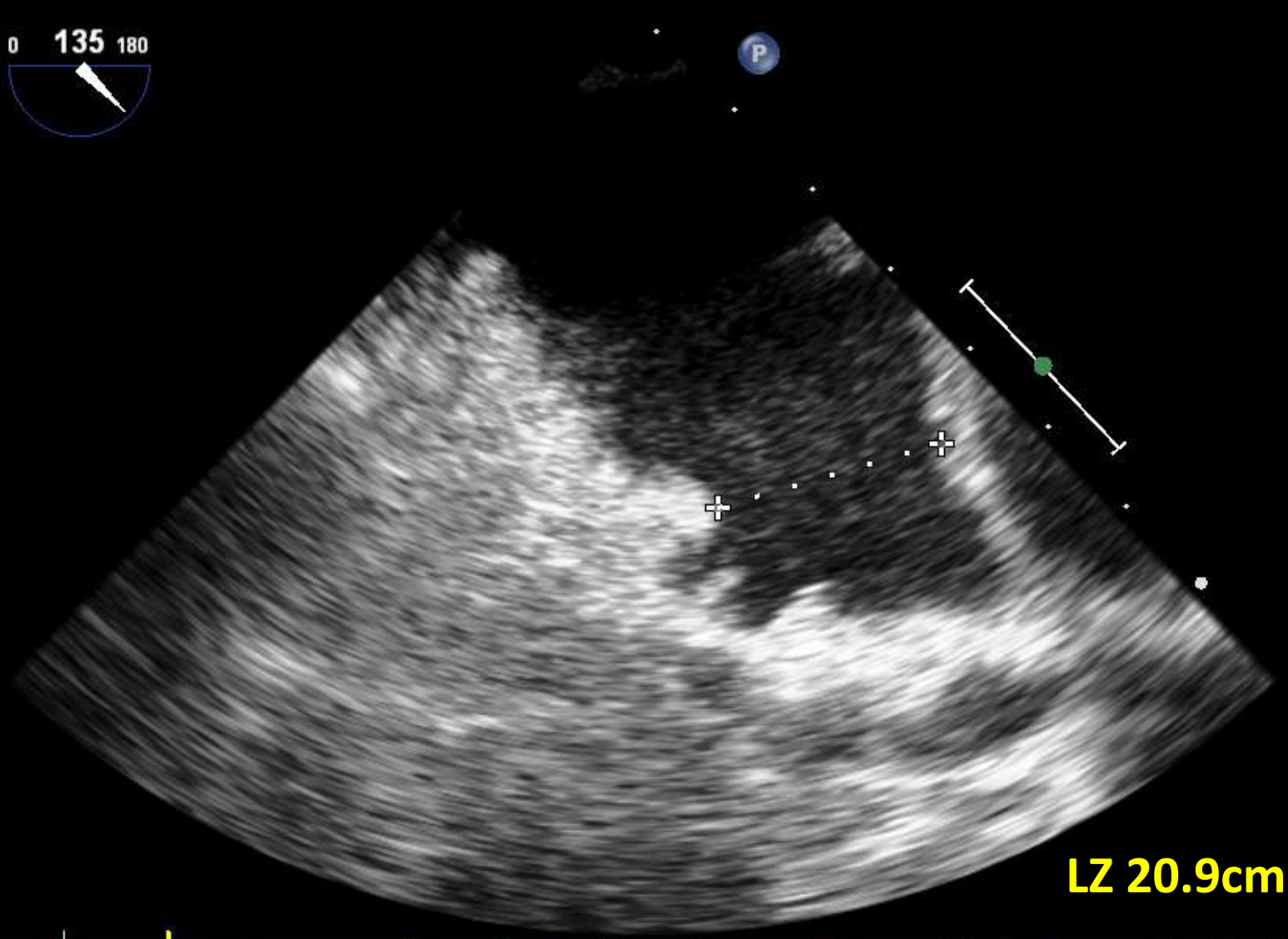


FR 50Hz
8.1cm

2D
62%
C 50
P Off
Gen



M4



LZ 20.9cm

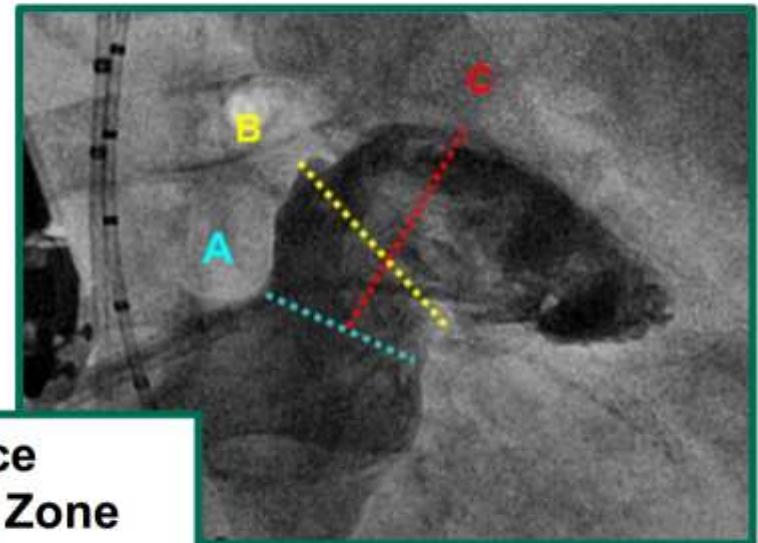
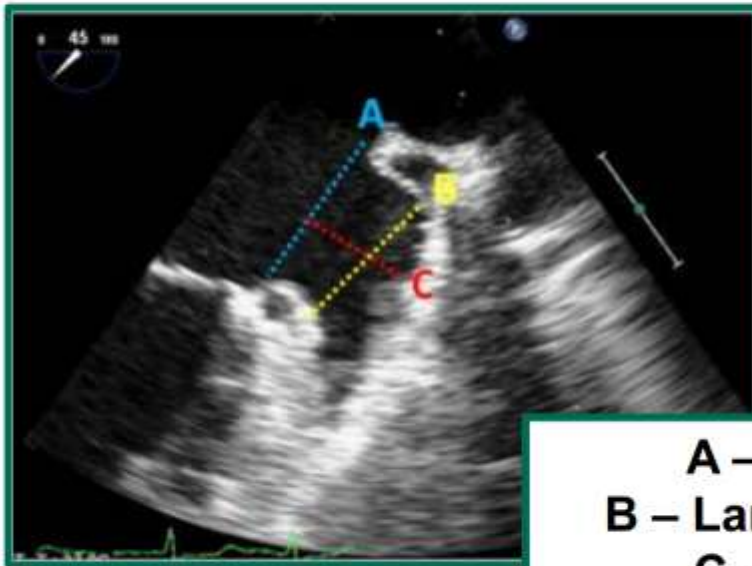
Dist 2.09 cm

71bpm

Measurements and Sizing

- Measurements should be taken using both echocardiography and angiography
- A marker pigtail can be used for LAA access and calibration
- RAO 30° Cranial 10-20° is the most common angiographic projection
 - A range of views in TOE and angiography can help identify the best view for device deployment

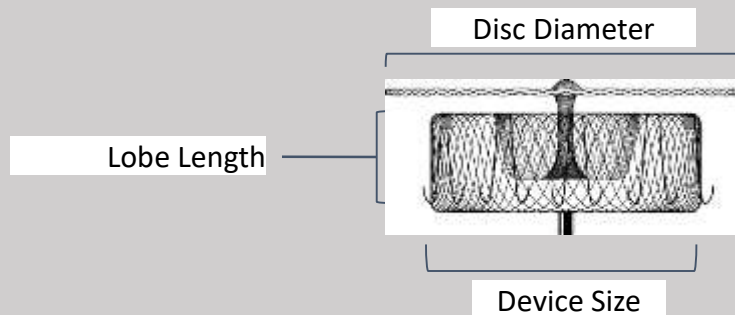
My personal preference - **RAO 30 CRAU 20**



A – Orifice
B – Landing Zone
C – Depth

Device Size Selection - Amulet

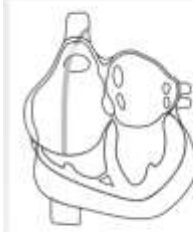
Maximum Landing Zone Width (mm)	Amulet™ Device Size	Lobe Length (mm)	Minimum LAA Depth (mm)	Disc Diameter (mm)	Sheath Diameter
11.0-13.0	16	7.5	≥ 10	22	12 F <i>or</i> 14 F (with adaptor)
13.0-15.0	18	7.5	≥ 10	24	
15.0-17.0	20	7.5	≥ 10	26	
17.0-19.0	22	7.5	≥ 10	28	
19.0-22.0	25	10	≥ 12	32	
22.0-25.0	28	10	≥ 12	35	14 F
25.0-28.0	31	10	≥ 12	38	
28.0-31.0	34	10	≥ 12	41	



Transseptal Access

- An inferior and posterior puncture is ideal.
 - Guided by echocardiography
 - Achieves appropriate sheath alignment in LAA
- Access via existing PFO may not provide good alignment with the left atrial appendage.
- After transseptal puncture maintain an ACT of at least 250 seconds.

Aim for inferior posterior puncture



1. Start position in the SVC.

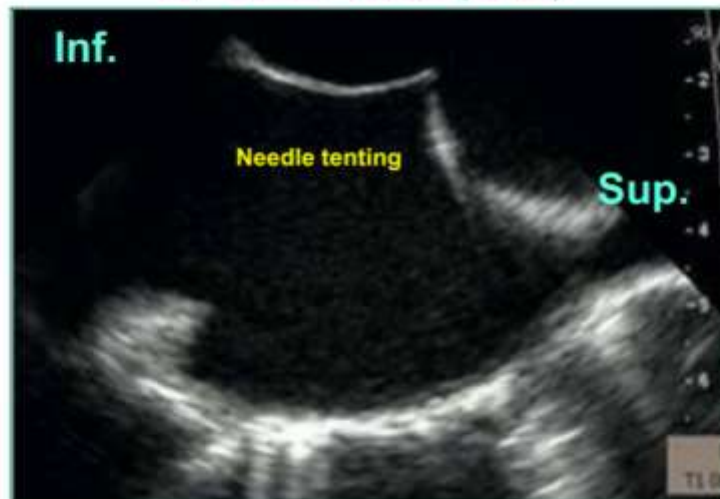


2. Slowly pull down medially to the atrial septum in the RA.

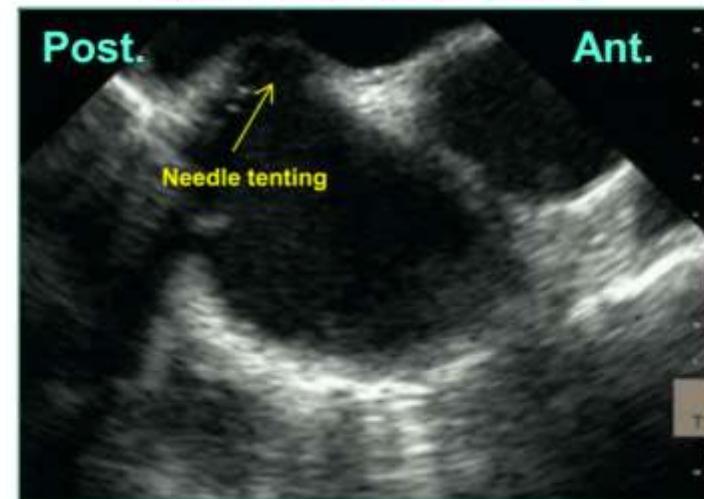


3. Abrupt medial movement onto the fossa ovalis.

Bi-Caval View (TEE)



Short Axis View (TEE)



Im: 1/150
Se: 1

QUEEN MARY HOSPITAL
CG160232
Cardiac Special
Fluoroscopy

WL: 128 WW: 256 [D]
AP



Im: 1/150

Sa: 1

QUEEN MARY HOSPITAL
CG160232
Cardiac Special
Fluoroscopy

WL: 128 WW: 256 [D]

AP

PHILIPS

11/08/2016 03:22:34PM TIS0.3 MI 0.6
X7-2U/Adult

FR 50Hz
9.0cm

2D
61%
C 50
P Off
HGen

28 100

P R
2.7 5.4

PAT T: 37.0C
TEE T: 40.1C

61 bpm

Im: 1/107

Se: 1

QUEEN MARY HOSPITAL
CG160232
Cardiac Special
Fluoroscopy



PHILIPS 11/08/2016 03:23:58PM TIS0.3 MI 0.6
X7-2u/Adult

FR 50Hz
8.1cm
2D
60%
C 50
P Off
HGen



WL: 128 WW: 256 [D]
RAO: 30 CRA: 20

PAT T: 37.0C
TEE T: 39.7C

Jpeg 54 bpm

Im: 1/134

Se: 1

QUEEN MARY HOSPITAL
CG160232
Cardiac Special
Fluoroscopy

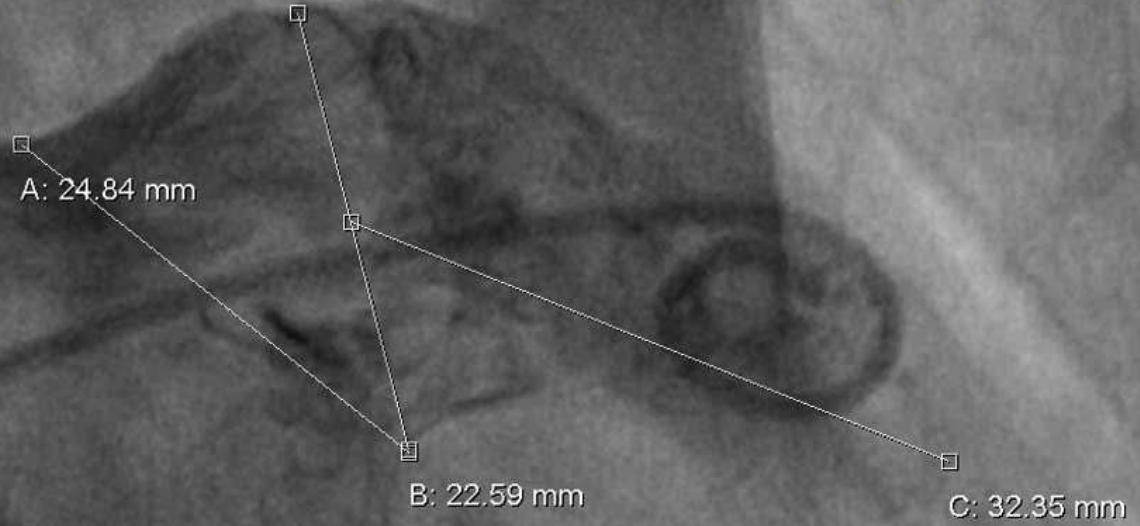
WL: 128 WW: 222 [D]

RAO: 30 CAU: 20

11/8/2016 15:22:19

Im: 1/1
Se: 4

CG160232
Cardiac Special
Ped 30 fps High Contrast

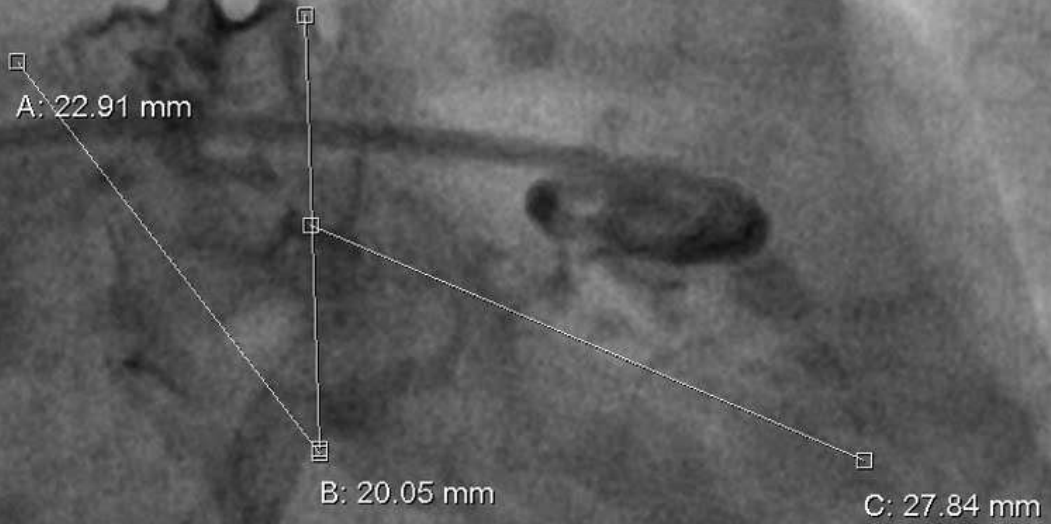


WL: 512 WW: 1024 [D]
CF 0.1216 mm/pix

11/8/2016 15:20:40

Im: 1/1
Se: 5

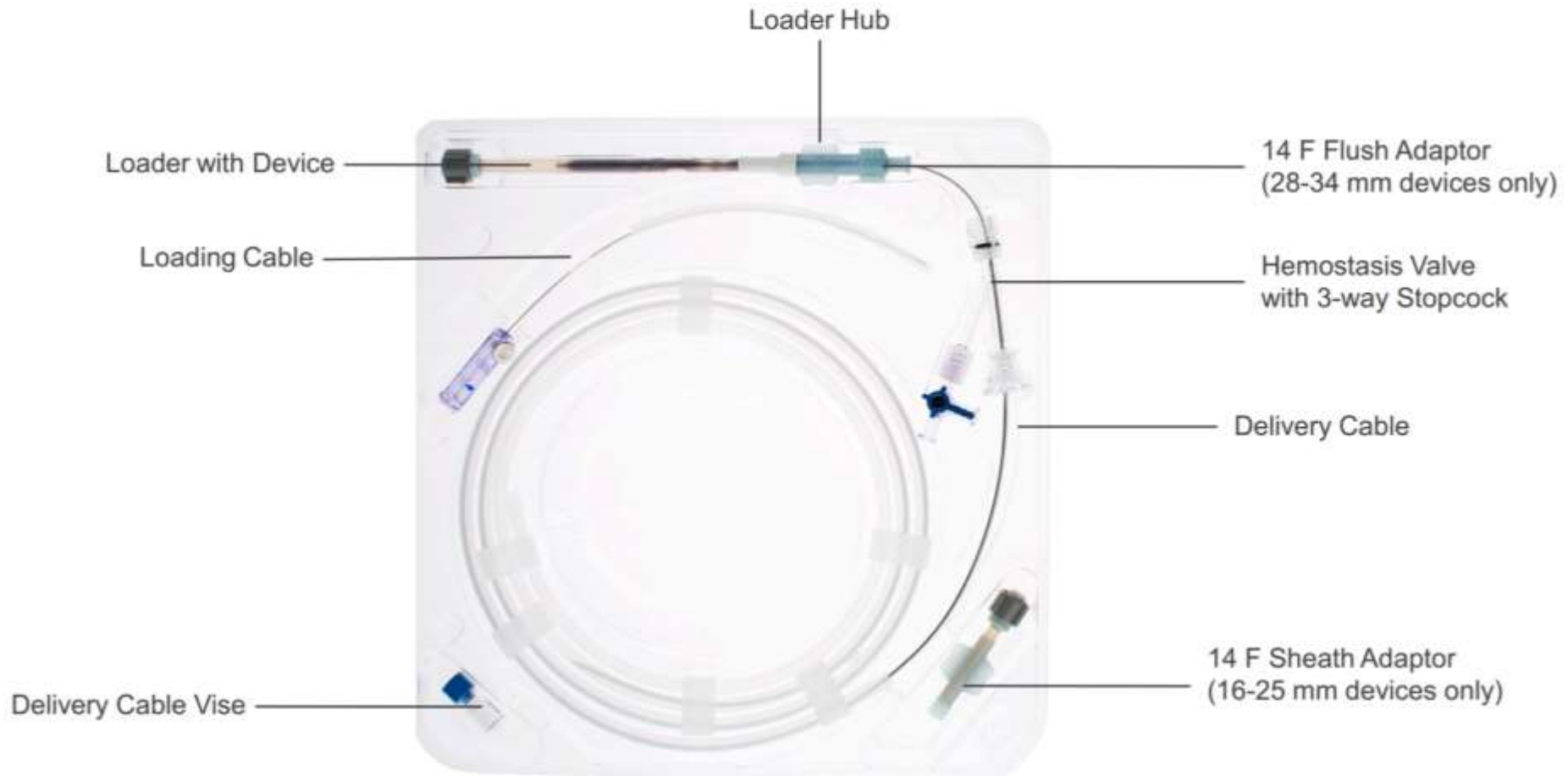
CG160232
Cardiac Special
Ped 30 fps High Contrast



WL: 512 WW: 1024 [D]
CF 0.1119 mm/pix

11/8/2016 15:22:20

Device Package Components



Im: 1/150

Se: 1

QUEEN MARY HOSPITAL
CG160232
Cardiac Special
Fluoroscopy

WL: 128 WW: 256 [D]

RAO: 30

11/8/2016 15:31:23

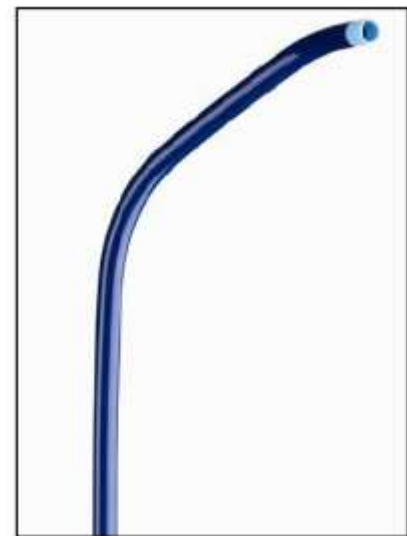
Im: 1/150

Se: 1

QUEEN MARY HOSPITAL
CG160232
Cardiac Special
Fluoroscopy

WL: 128 WW: 256 [D]
RAO: 30

11/8/20



AMPLATZER™
TorqVue™ 45°x 45°
Delivery System

Im: 1/21
Se: 1

QUEEN MARY HOSPITAL
CG160232
Cardiac Special
Fluoroscopy

WL: 128 WW: 256 [D]
RAO: 30

11/8/2016 15:37:58

Im: 1/41
Se: 1

QUEEN MARY HOSPITAL
CG160232
Cardiac Special
Fluoroscopy

WL: 128 WW: 256 [D]
RAO: 30 CAU: 20

11/8/2016 15:39:42

Im: 1/48

Se: 1

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CG160232
Cardiac Special
Fluoroscopy

WL: 128 WW: 256 [D]
RAO: 30 CAU: 20

11



Im: 1/12
Se: 1

QUEEN MARY HOSPITAL
CG160232
Cardiac Special
Fluoroscopy



WL: 128 WW: 256 [D]
RAO: 30 CAU: 20

11/8/

PHILIPS QMH 11/08/2016 03:45:36PM TISO.3 MI 0.6
X7-2/Adult

FR 50Hz
10cm

2D
58%
C 50
P Off
HGen

44

F R
2.7 6.4

PAT T 37.0C
TEE T 39.7C 58bpm

This panel displays an echocardiogram image of the heart. The catheter tip is visible as a bright, curved line within the right ventricle. The image includes technical specifications such as frame rate (FR 50Hz), depth (10cm), and gain settings (2D 58%, C 50, P Off, HGen). A scale bar indicates a length of 44. Orientation markers for Front (F) and Right (R) are shown, along with numerical values 2.7 and 6.4. At the bottom, patient temperature (PAT T 37.0C), TEE temperature (TEE T 39.7C), and heart rate (58bpm) are displayed.

Im: 1/39
Se: 1

QUEEN MARY HOSPITAL
CG160232
Cardiac Special
Fluoroscopy

WL: 128 WW: 256 [D]
RAO: 30 CAU: 20

PHILIPS 11/08/2016 03:46:05PM TISO.3 MI 0.6
X7-2UAdult

FR 50Hz
10cm

20
65%
C 50
P Off
HGen

74 mm



PAT T: 37.0C
TEE T: 36.0C

80 bpm

The image displays a fluoroscopic view of a catheter inserted into a cardiac chamber. An echocardiogram is overlaid on the bottom right, showing a cross-section of the heart. The catheter is visible as a dark line extending from the bottom left towards the center. The echocardiogram shows the internal structure of the heart, including the ventricles and valves. Technical parameters for the fluoroscopy and echocardiogram are displayed around the images.

Im: 1/150

Se: 1

QUEEN MARY HOSPITAL
CG160232
Cardiac Special
Fluoroscopy

WL: 128 WW: 256 [D]

RAO: 30 CAU: 20

11/8/2016 15:42:28

Im: 1/9
Se: 1

QUEEN MARY HOSPITAL
CG160232
Cardiac Special

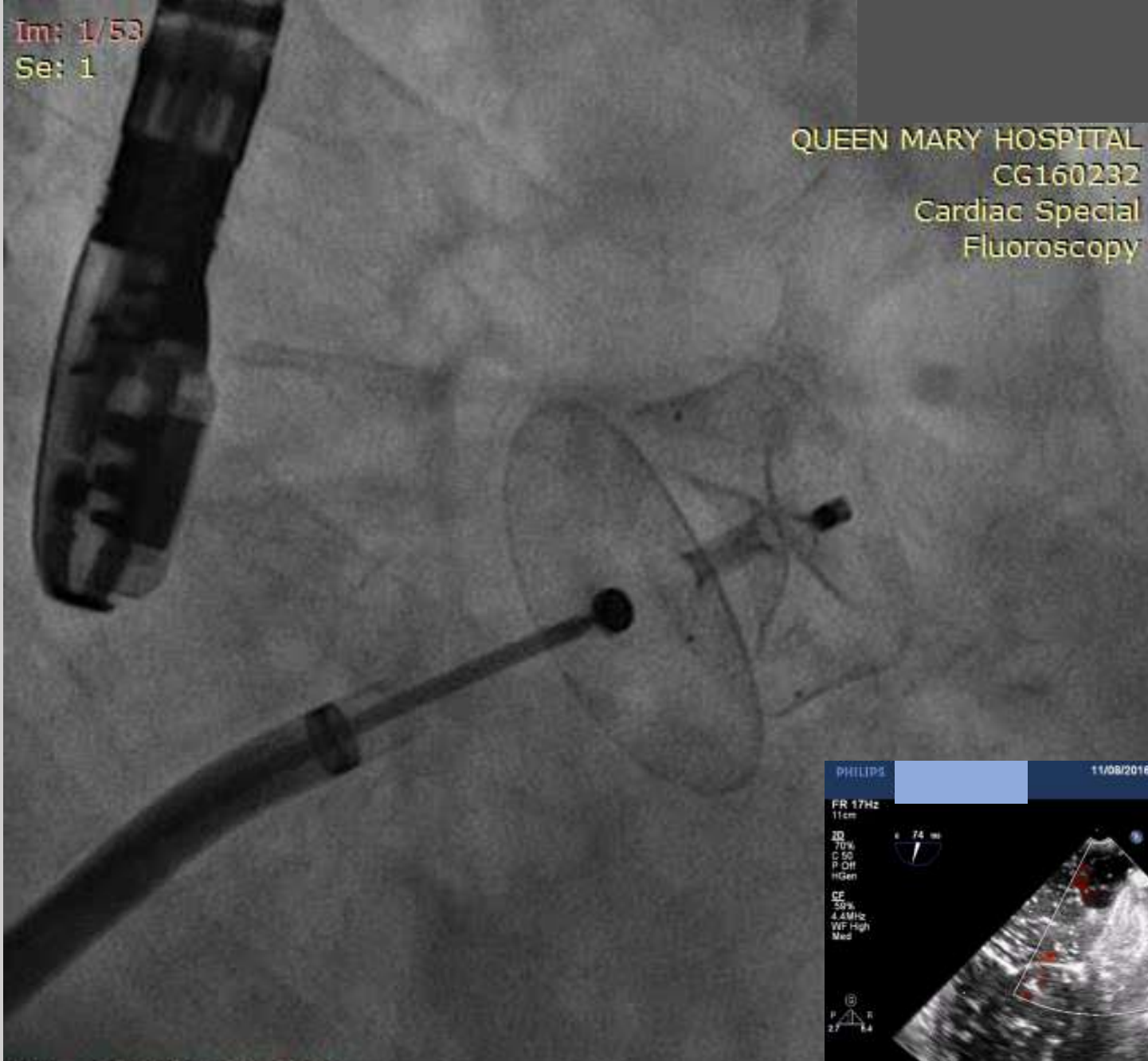
WL: 128 WW: 256 [D]
RAO: 30 CAU: 20

11



Im: 1/53
Se: 1

QUEEN MARY HOSPITAL
CG160232
Cardiac Special
Fluoroscopy



WL: 128 WW: 256 [D]
RAO: 30 CAU: 20

PHILIPS 11/08/2016 03:48:43PM TISO 4 MI 0.7
X7-2t/Adult

FR 17Hz
11cm

2D
70%
C 50
P Off
HGen

CP
30%
4.4MHz
WF High
Med

74 ms

MI MM
+38.5
-38.5
cm/s

PAT T: 37.0C
TEL T: 36.9C
80 bpm

A color Doppler ultrasound image showing a vessel in cross-section. The vessel lumen is dark, and the vessel walls are bright. A color scale on the right indicates flow velocity in cm/s, ranging from -38.5 to +38.5. The image is overlaid on a dark background with technical parameters.

Im: 1/50
Se: 1

QUEEN MARY HOSPITAL
CG160232
Cardiac Special
Fluoroscopy

WL: 128 WW: 256 [D]
RAO: 30 CRA: 20

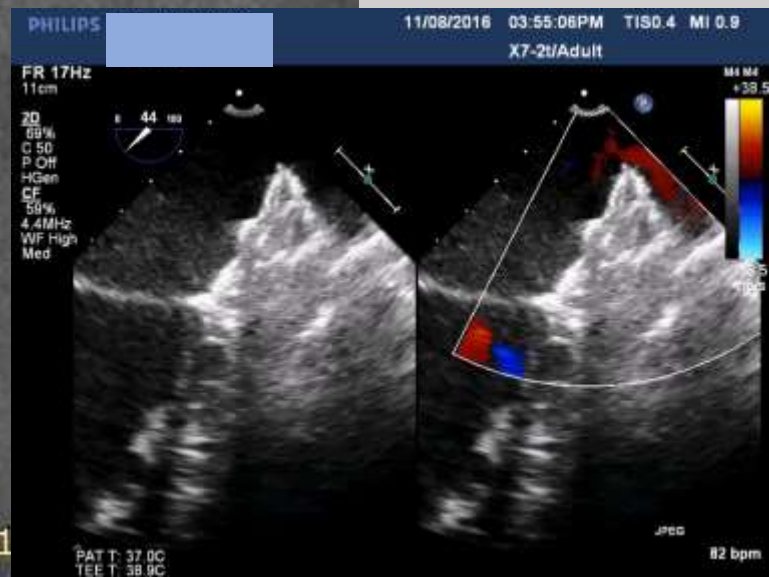
11/8/2016 15:44:31

Im: 1/56
Se: 1

QUEEN MARY HOSPITAL
CG160232
Cardiac Special
Fluoroscopy

WL: 128 WW: 256 [D]
RAO: 30 CAU: 20

11



Im: 1/47
Se: 1

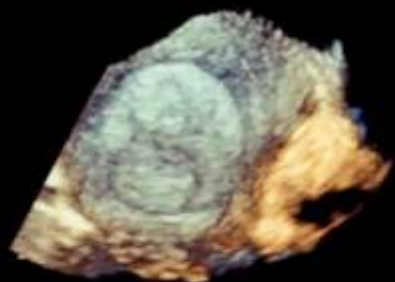
QUEEN MARY HOSPITAL
CG160232
Cardiac Special
Fluoroscopy

WL: 128 WW: 256 [D]
RAO: 30 CRA: 20

PHILIPS 11/08/2016 04:02:53PM TISO.4 MI 1.0
X7-2H/Adult

FR 6Hz 5.6cm 3D Beats 1

3D 75 mm
3D 47%
3D 40dB



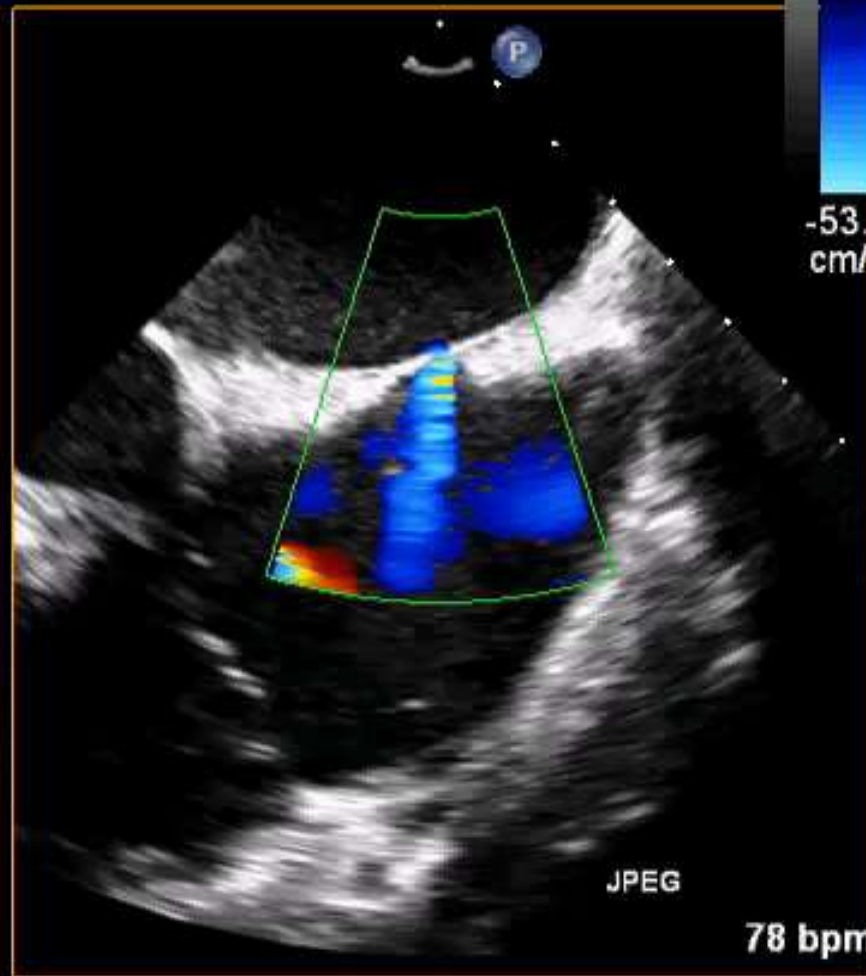
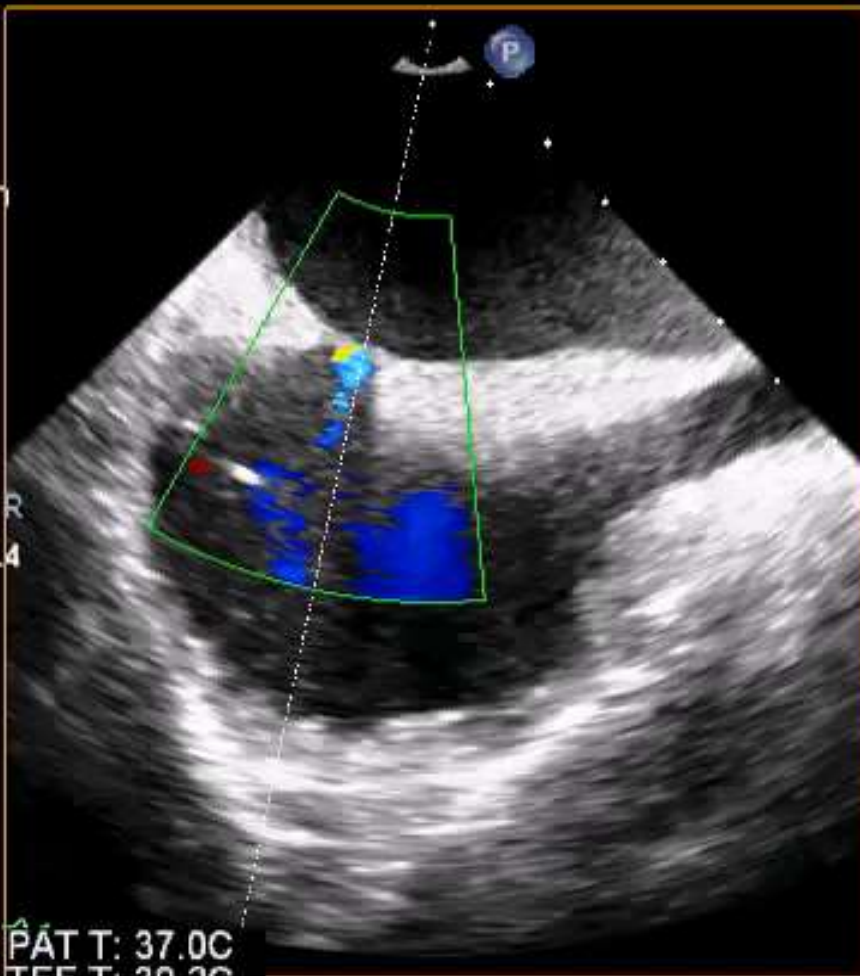
PAT T: 37.0C
TEE T: 39.5C

JPEG 61 bpm

FR 10Hz
11cm

xPlane
68%
68%
50dB
P Off
HGen

CF
59%
4.4MHz
WF High
Med

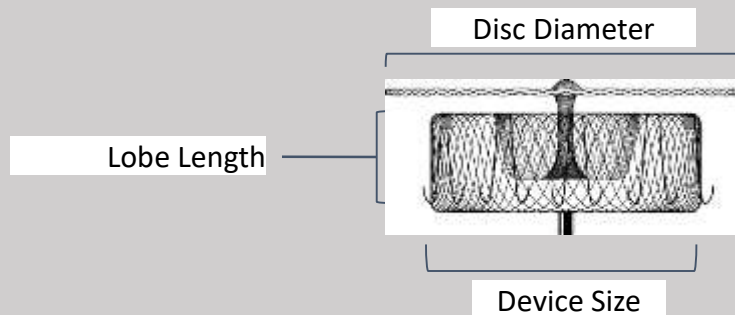


PAT T: 37.0C
TEE T: 39.2C

A2

Device Size Selection - Amulet

Maximum Landing Zone Width (mm)	Amulet™ Device Size	Lobe Length (mm)	Minimum LAA Depth (mm)	Disc Diameter (mm)	Sheath Diameter
11.0-13.0	16	7.5	≥ 10	22	12 F <i>or</i> 14 F (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	14 F
25.0-28.0	31	10	≥ 12	38	
28.0-31.0	34	10	≥ 12	41	





Im: 1/57

Seq: 16

Landing Zone 25mm

AMULET #28mm

Queen Mary Hospital

0342-2017

XA

Left Coronary 15 fps

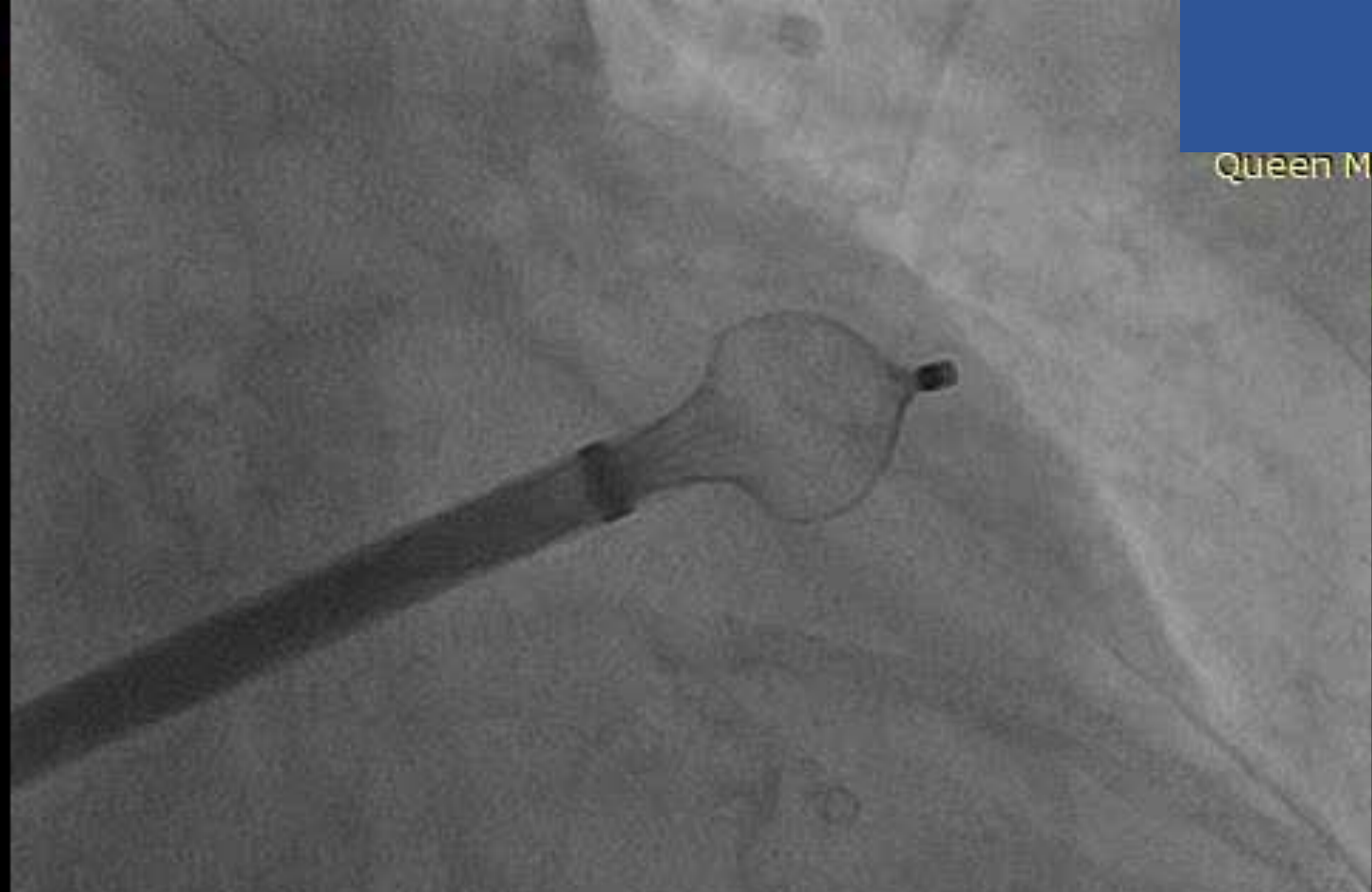
WL: 129 WW: 190 [D]

RAO: 30 CAU: 20

10/3/2017 17:14:25

Im: 1/300
Se: 17

Queen Mary Hospital
0342-2017
XA
Fluoroscopy



WL: 115 WW: 213 [D]
RAO: 30 CAU: 20

Im: 1/300
Se: 18

Queen Mary Hospital
0342-2017
XA
Fluoroscopy



WL: 115 WW: 213 [D]
RAO: 30 CAU: 20

10/3/2017 17:17:21

Im: 1/60
Se: 19

Queen Mary Hospital
0342-2017
XA
Left Coronary 15 fps

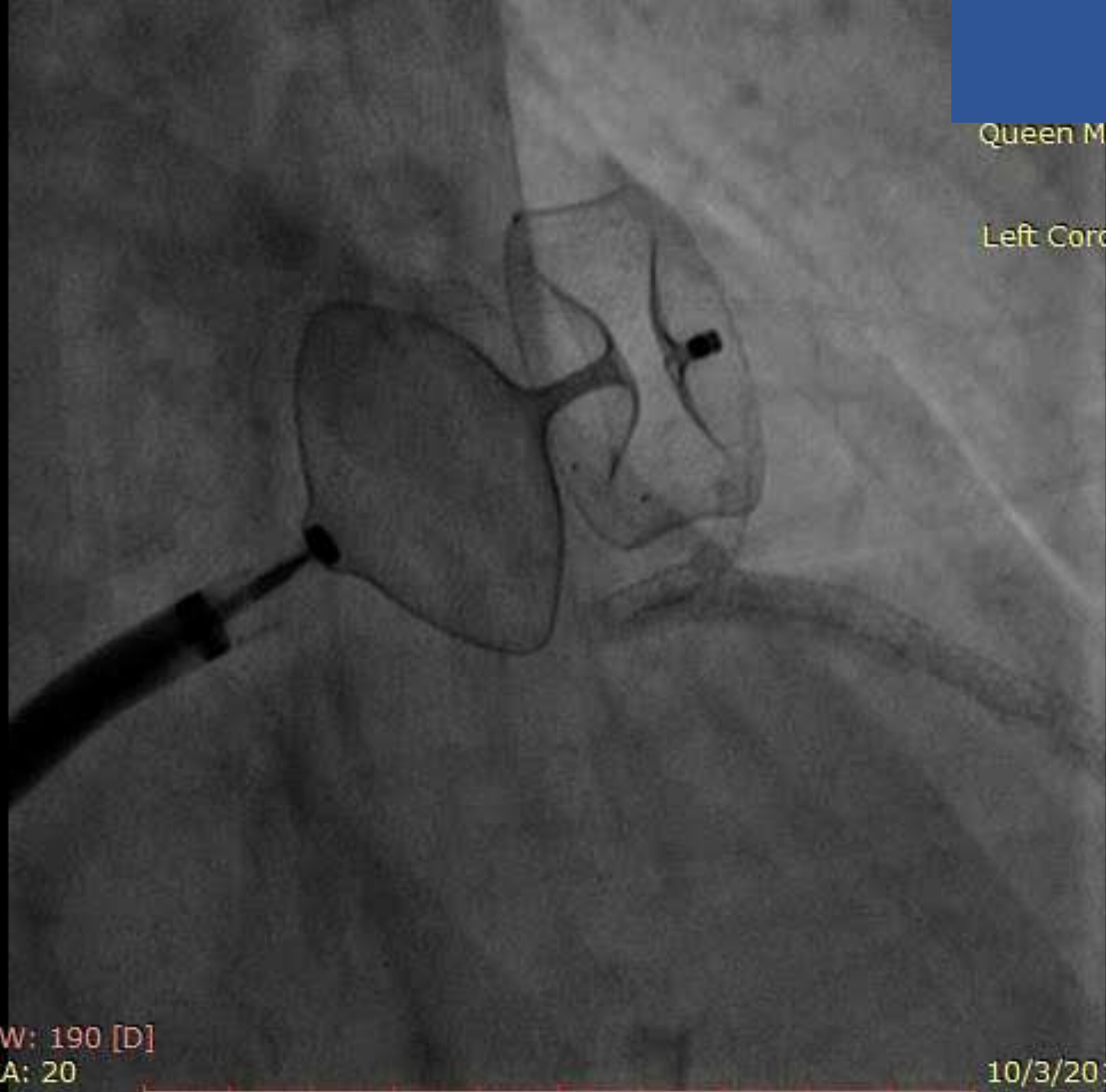


WL: 129 WW: 190 [D]
RAO: 30 CAU: 20

10/3/2017 17:18:13

Im: 1/15
Se: 24

Queen Mary Hospital
0342-2017
XA
Left Coronary 15 fps



WL: 129 WW: 190 [D]
RAO: 30 CRA: 20

10/3/2017 17:22:25

Im: 1/53
Se: 31

Queen Mary Hospital
0342-2017
XA
Left Coronary 15 fps

WL: 129 WW: 190 [D]
RAO: 30 CAU: 20

10/3/2017 17:29:23

A3

Im: 1/91
Se: 24

QUEEN MARY HOSPITAL
CG160207

EP 15 fps



PHILIPS 22/07/2016 01:18:24PM TIS0.3 MI 0.6
X7-2u/Adult

FR 50Hz
12cm
2D
64%
C 50
P Off
HGen



WL: 128 WW: 256 [D]
RAO: 30 CAU: 19

PAT T: 37.0C
TEE T: 39.9C

JPEG 60 bpm

Im: 1/9
Se: 25

QUEEN MARY HOSPITAL
CG160207

EP 15 fps



PHILIPS 22/07/2016 01:18:59PM TISO.3 MI 0.6
X7-2t/Adult

FR 50Hz
12cm

2D 64%
C 50
P Off
HGen

62

P 2.7 R 3.4

JPEG 73 bpm

PAT T: 37.0C
TEE T: 39.9C

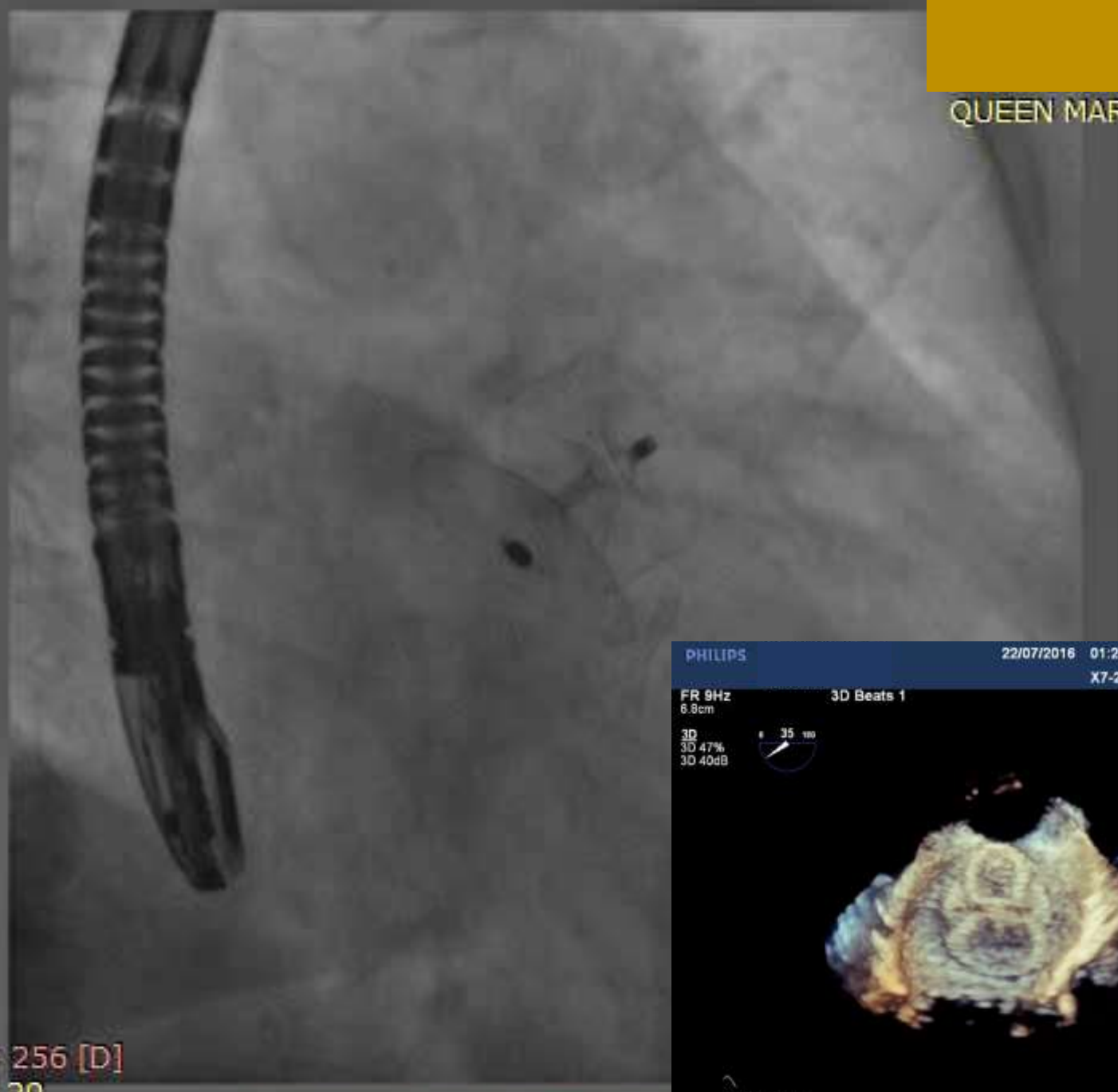
Detailed description: This is a Philips echocardiogram overlay. It features a 2D grayscale image of the heart in cross-section. A white outline highlights the left ventricle. Technical parameters are displayed in the top left, including 'FR 50Hz' and '12cm'. A scale bar on the right indicates '62'. A small diagram at the bottom left shows the probe's orientation with 'P 2.7' and 'R 3.4'. The bottom of the overlay shows patient temperature ('PAT T: 37.0C', 'TEE T: 39.9C') and heart rate ('73 bpm'). The Philips logo and date/time are at the top.

WL: 128 WW: 256 [D]
RAO: 30 CAU: 19

Im: 1/17
Se: 29

QUEEN MARY HOSPITAL
CG160207

EP 15 fps

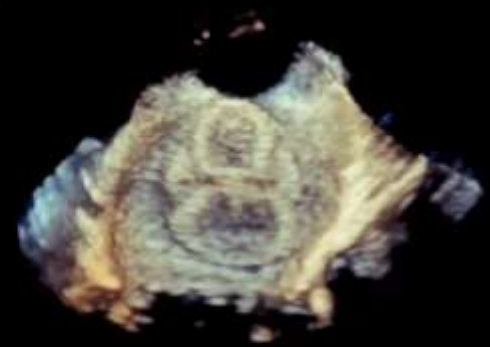


PHILIPS 22/07/2016 01:22:22PM TISO.4 MI 1.0
X7-2u/Adult

FR 9Hz
6.8cm

3D Beats 1

3D
3D 47%
3D 40dB



WL: 128 WW: 256 [D]
RAO: 30 CAU: 20

PAT T: 37.0C
TEE T: 40.0C

JPEG 83 bpm

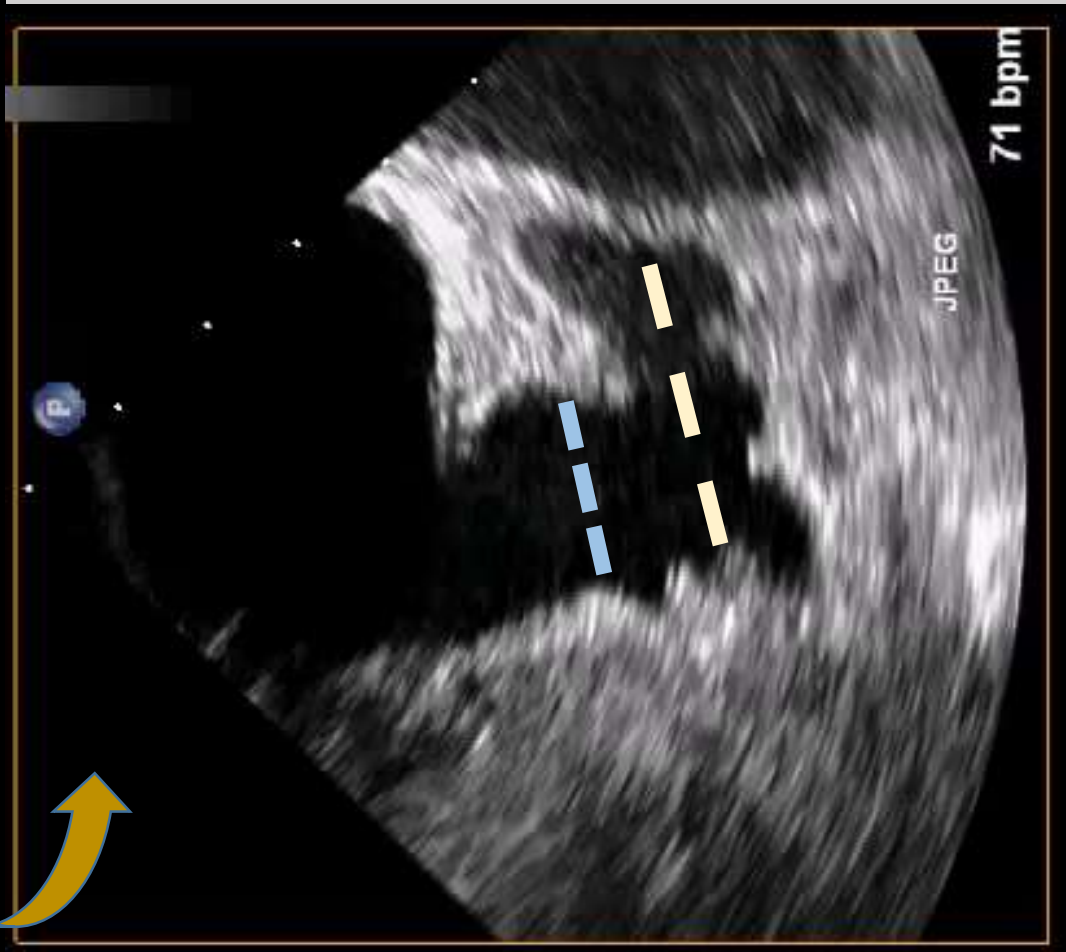
LAMBRE



L1

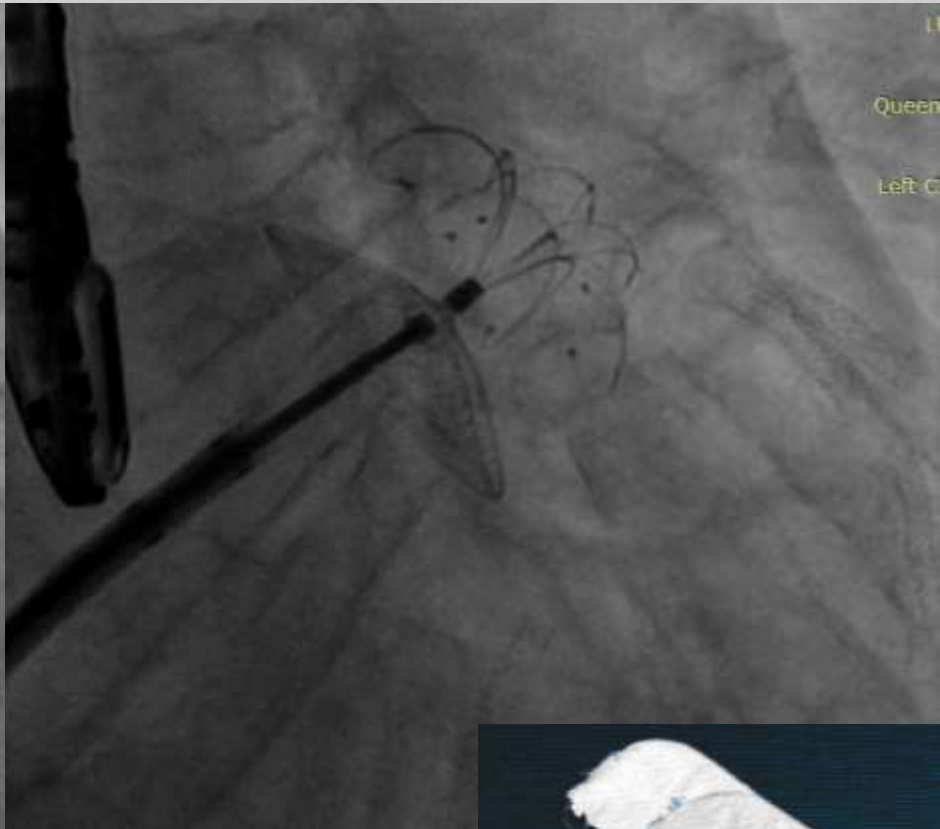
- ACP/LAMBRE in poor defined landing zone/chicken wing anatomy with short neck – **Sandwich technique**
 - overcome challenging anatomies
 - extreme chicken wing type
 - secured position
 - forgiving extreme angles





TEE 135 correlates with RAO 30 CRAU 20

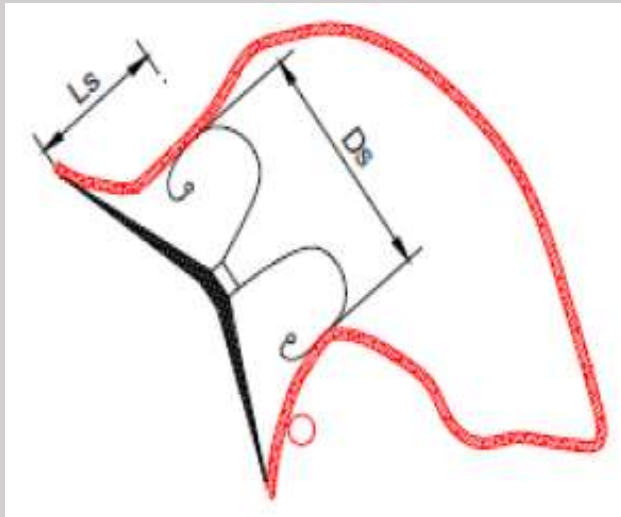




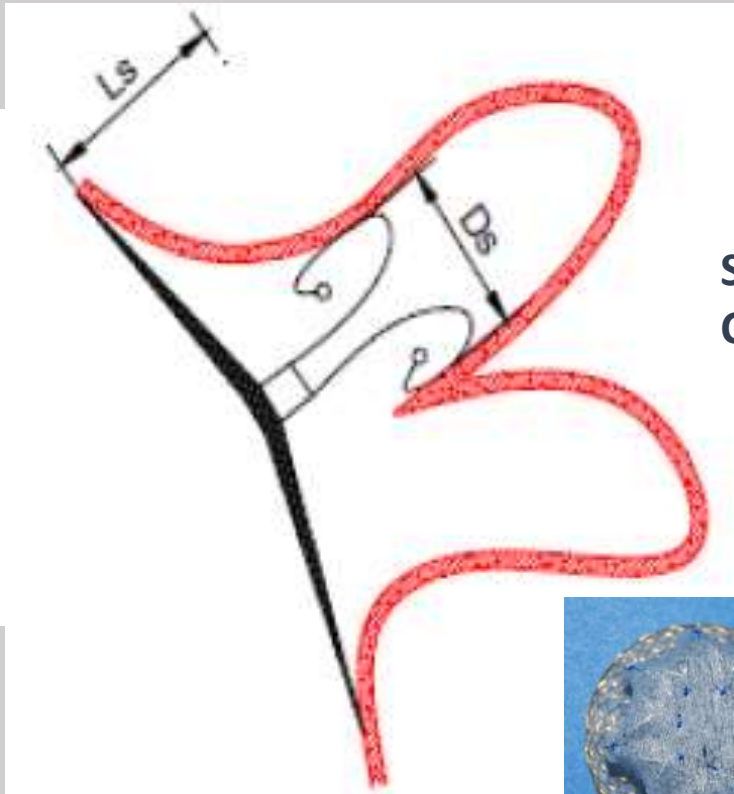
L2

Special LAA Morphology

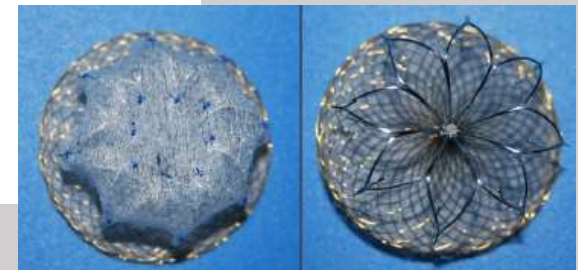
- Small LAA
- LAA with multiple lobes and restrictive septum
- Special design of **L**Ambre **D**evice



Size: 16-36mm
Cover 4-6mm larger



Size: 16-26mm
Cover 12mm larger



Im: 1/57
Se: 3

Queen Mary Hospital
1139-2018
XA
Left Coronary 15 fps

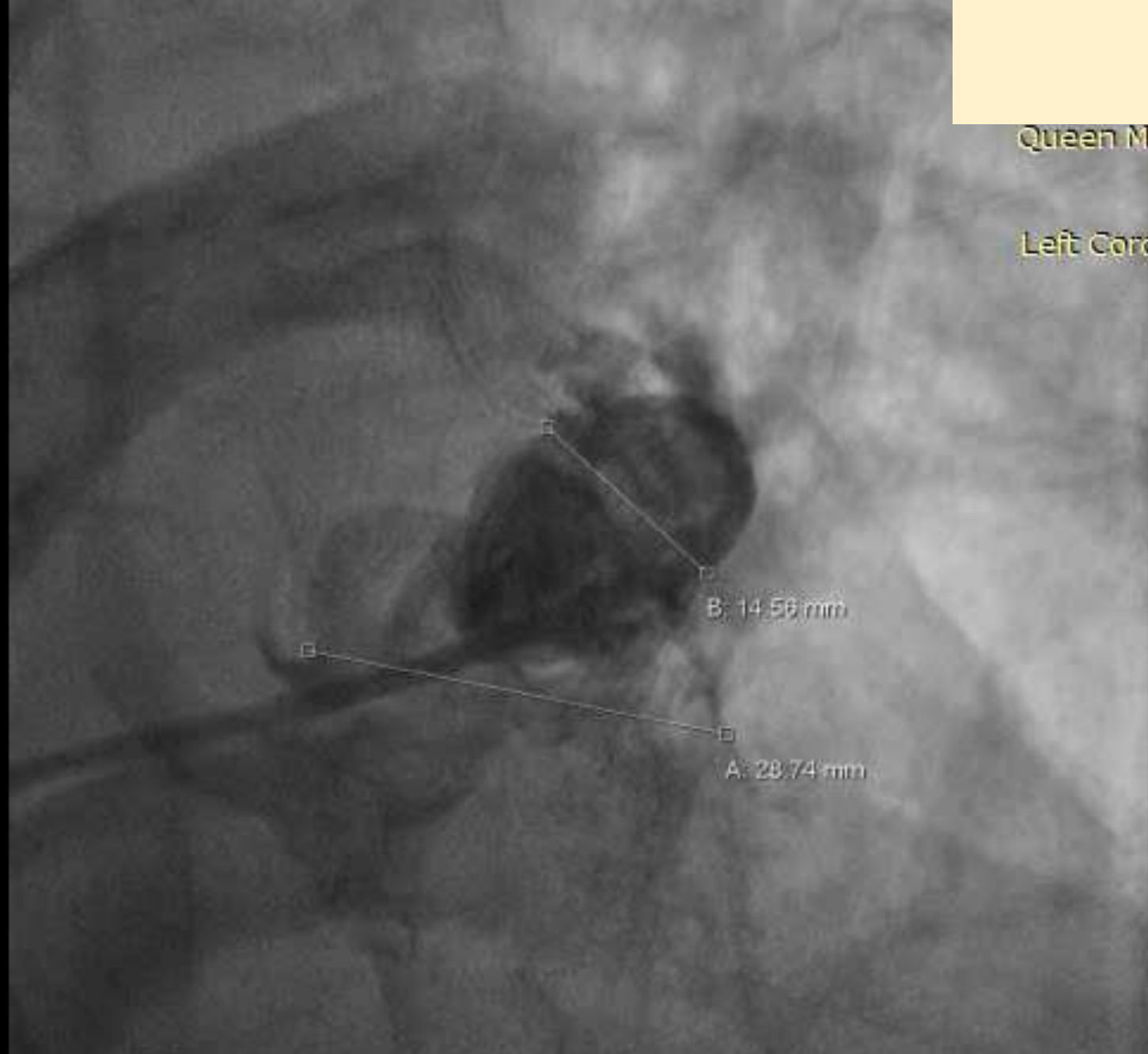


WL: 129 WW: 190 [D]
RAO: 30 CRA: 20

31/8/2018 12:28:26 PM

Im: 1/1
Se: 3

Queen Mary Hospital
1139-2018
XA
Left Coronary 15 fps



WL: 512 WW: 1024 [D]

CF: 0.1294 mm/pix

31/8/2018 12:28:26 PM

Im: 1/63

Se: 4

Queen Mary Hospital

1139-2018

XA

Left Coronary 15 fps

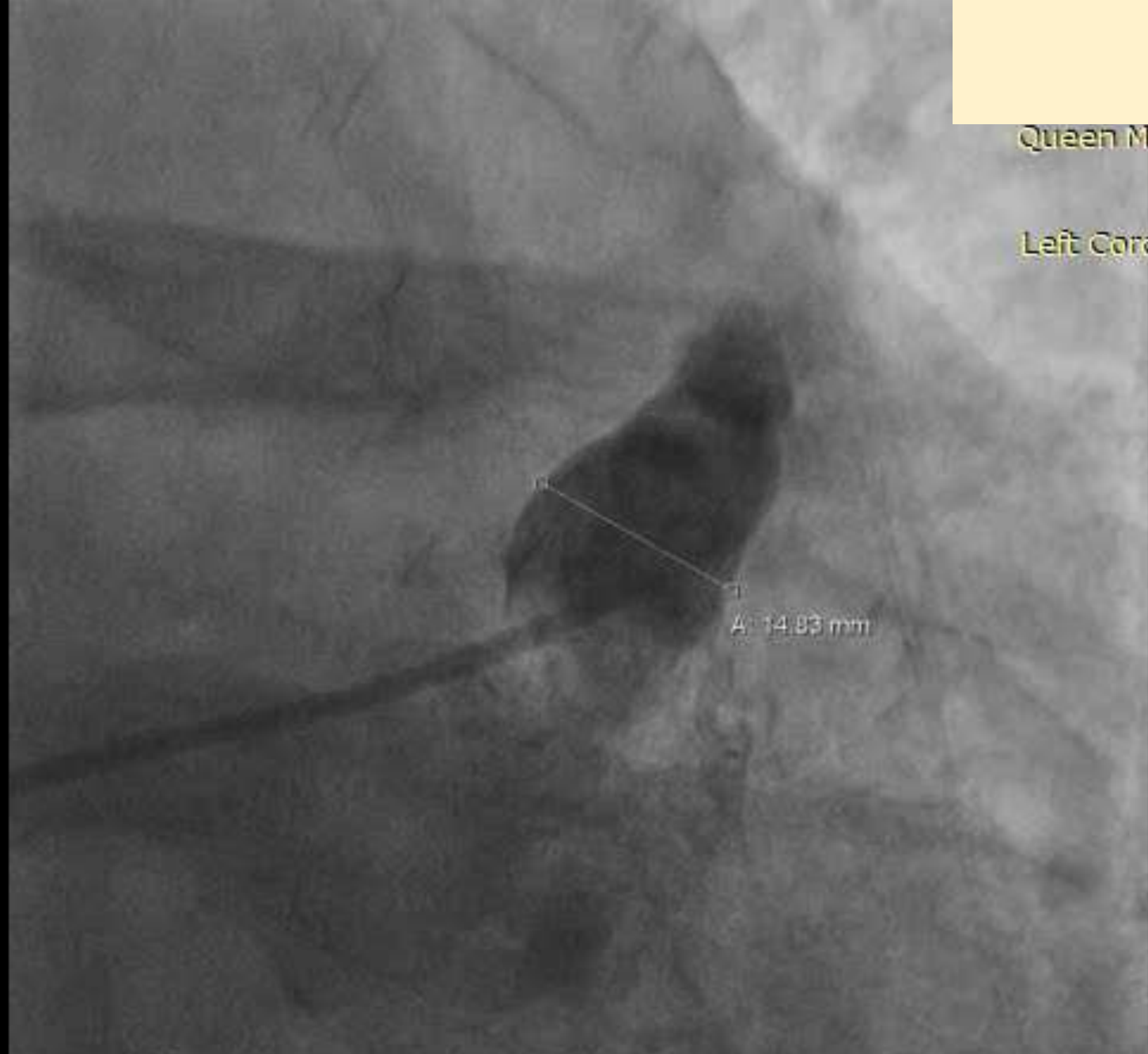
WL: 129 WW: 190 [D]

RAO: 30 CAU: 20

31/8/2018 12:29:32 PM

Im: 1/1
Se: 4

Queen Mary Hospital
1139-2018
XA
Left Coronary 15 fps

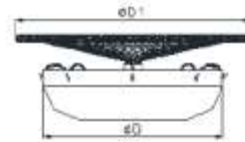
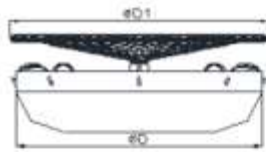


WL: 512 WW: 1024 [D]

CF 0.1304 mm/pix

31/8/2018 12:29:32 PM

Device Sizes and Corresponding Delivery Systems of LAMBRE



Cat.	Diameter of Umbrella(mm)	Diameter of Cover(mm)	Delivery system
LT-LAA-1622	16	22	8F-900 9F-900
LT-LAA-1824	18	24	10F-900
LT-LAA-2026	20	26	9F-900
LT-LAA-2228	22	28	10F-900
LT-LAA-2430	24	30	
LT-LAA-2632	26	32	
LT-LAA-2834	28	34	
LT-LAA-3036	30	36	
LT-LAA-3236	32	36	
LT-LAA-3438	34	38	
LT-LAA-3640	36	40	

Cat.	Diameter of Umbrella(mm)	Diameter of Cover(mm)	Delivery system
LT-LAA-1630	16	30	9F-900 10F-900
LT-LAA-1832	18	32	
LT-LAA-2032	20	32	
LT-LAA-2234	22	34	10F-900
LT-LAA-2436	24	36	
LT-LAA-2638	26	38	

FR 50Hz
11cm

2D
69%
C 50
P Off
HGen



M4



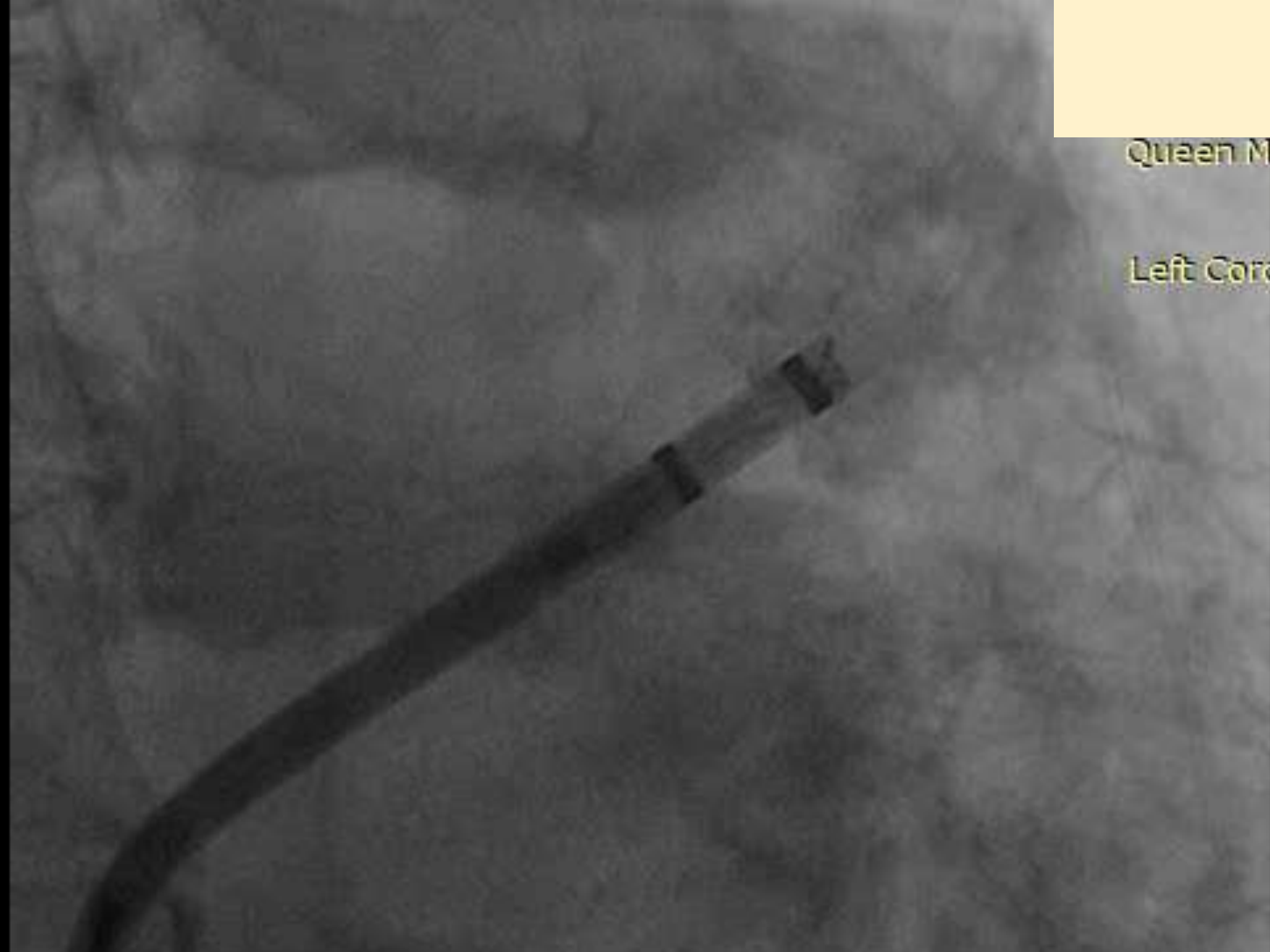
JPEG

PAT T: 37.0C
TEE T: 39.1C

72 bpm

Im: 1/25
Se: 26

Queen Mary Hospital
1139-2018
XA
Left Coronary 15 fps



WL: 129 WW: 190 [D]
RAO: 30 CAU: 20

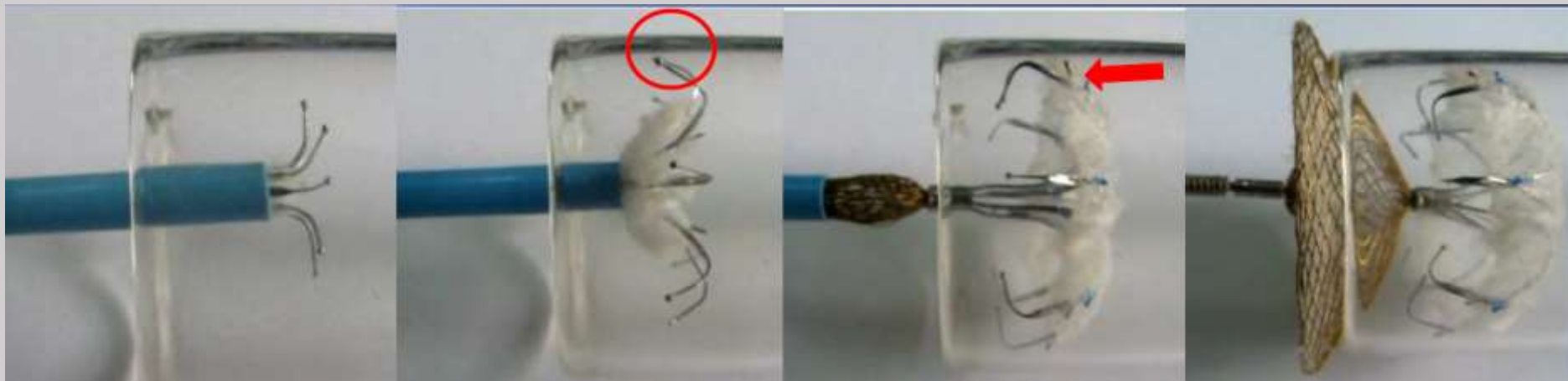
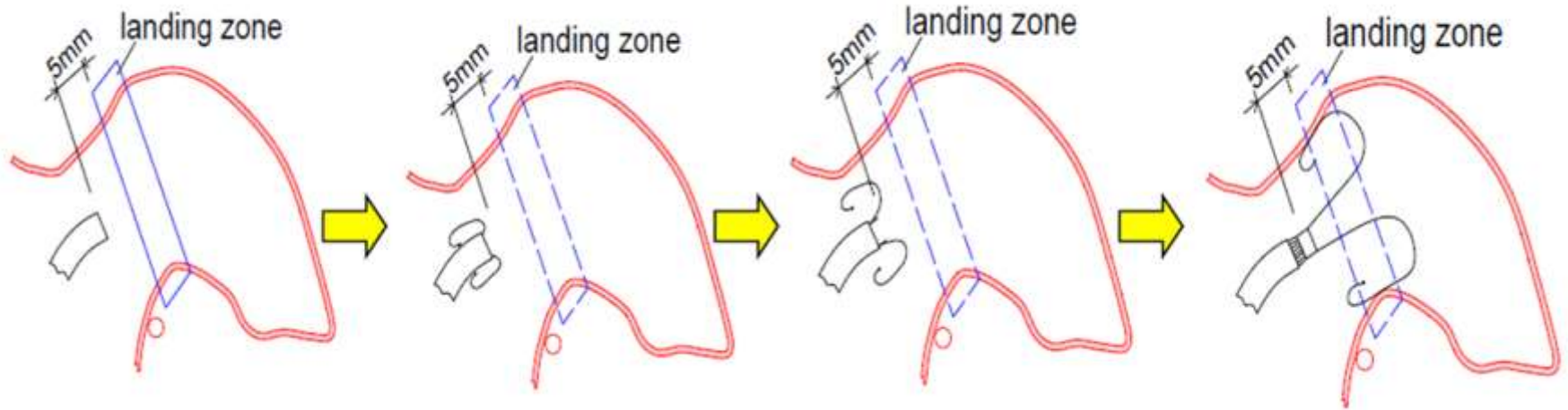


The delivery system

- double curves (45° X 30°) of distal tip
- single curve (45°) of distal tip

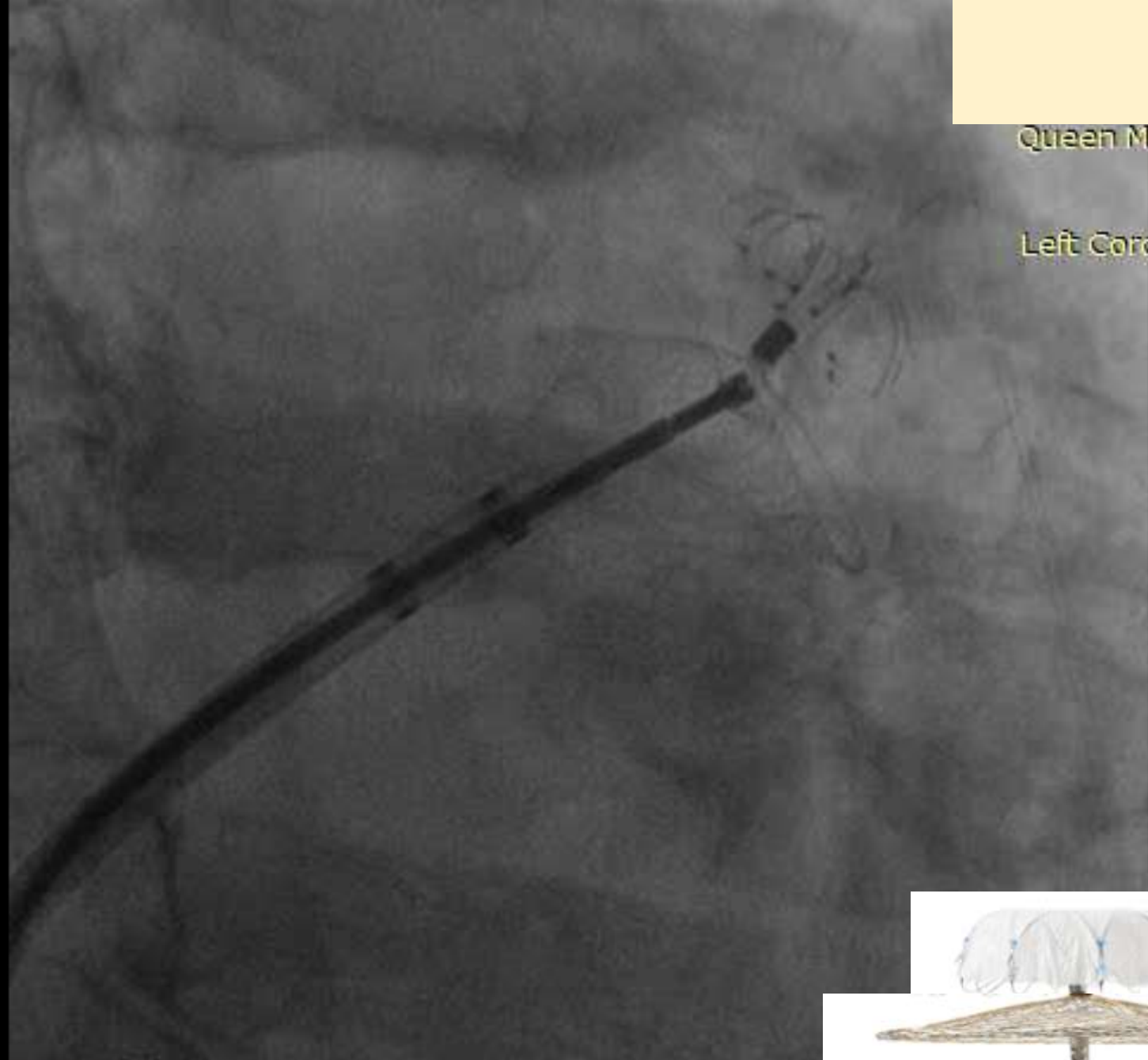
8-10 Fr. small delivery sheath

Deployment of Umbrella/Lobe



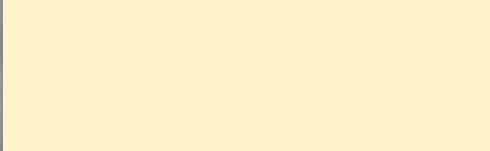
Im: 1/47
Se: 31

Queen Mary Hospital
1139-2018
XA
Left Coronary 15 fps

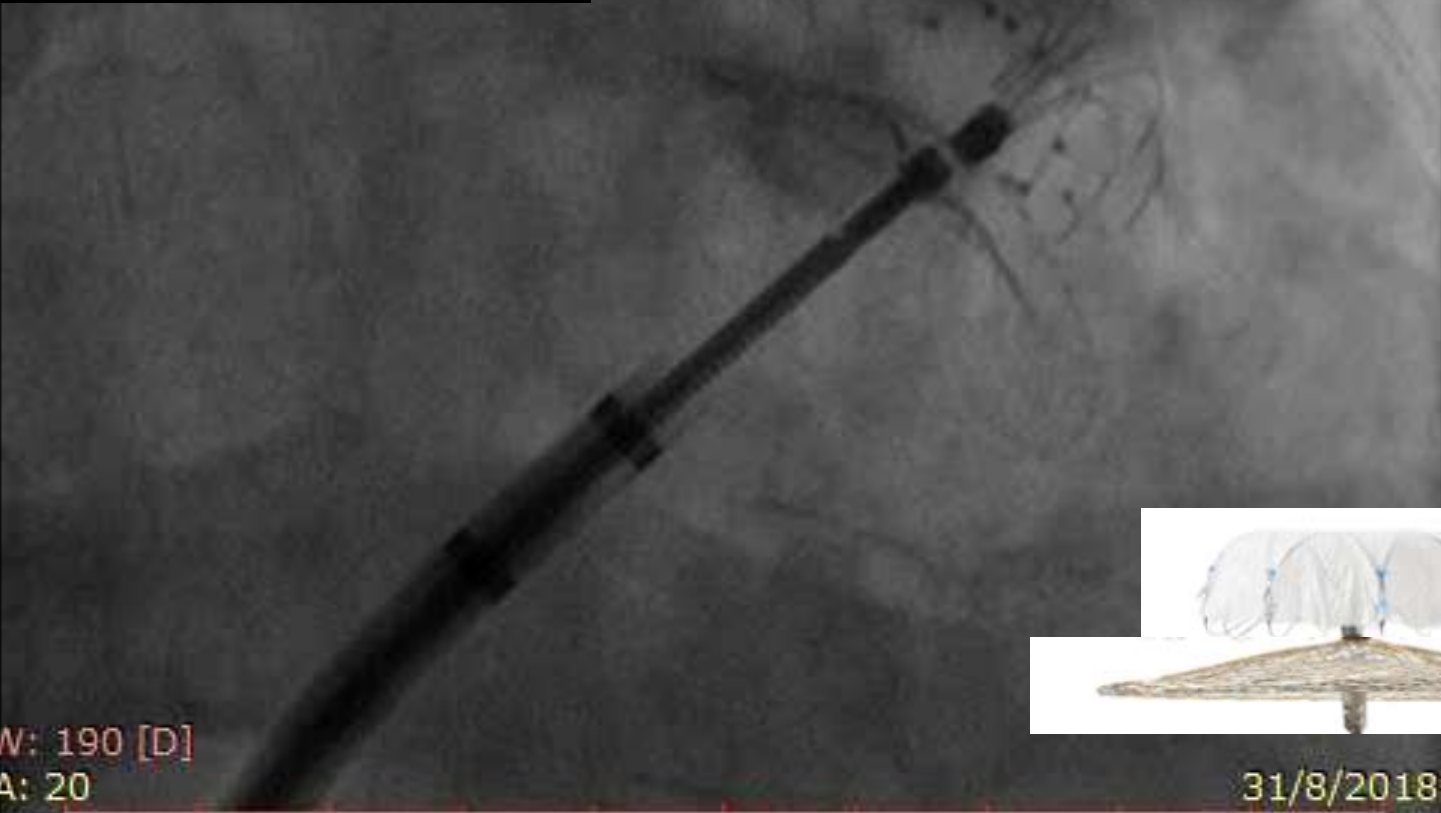


WL: 129 WW: 190 [D]
RAO: 30 CAU: 20

31/8/2018 1:47:24 PM



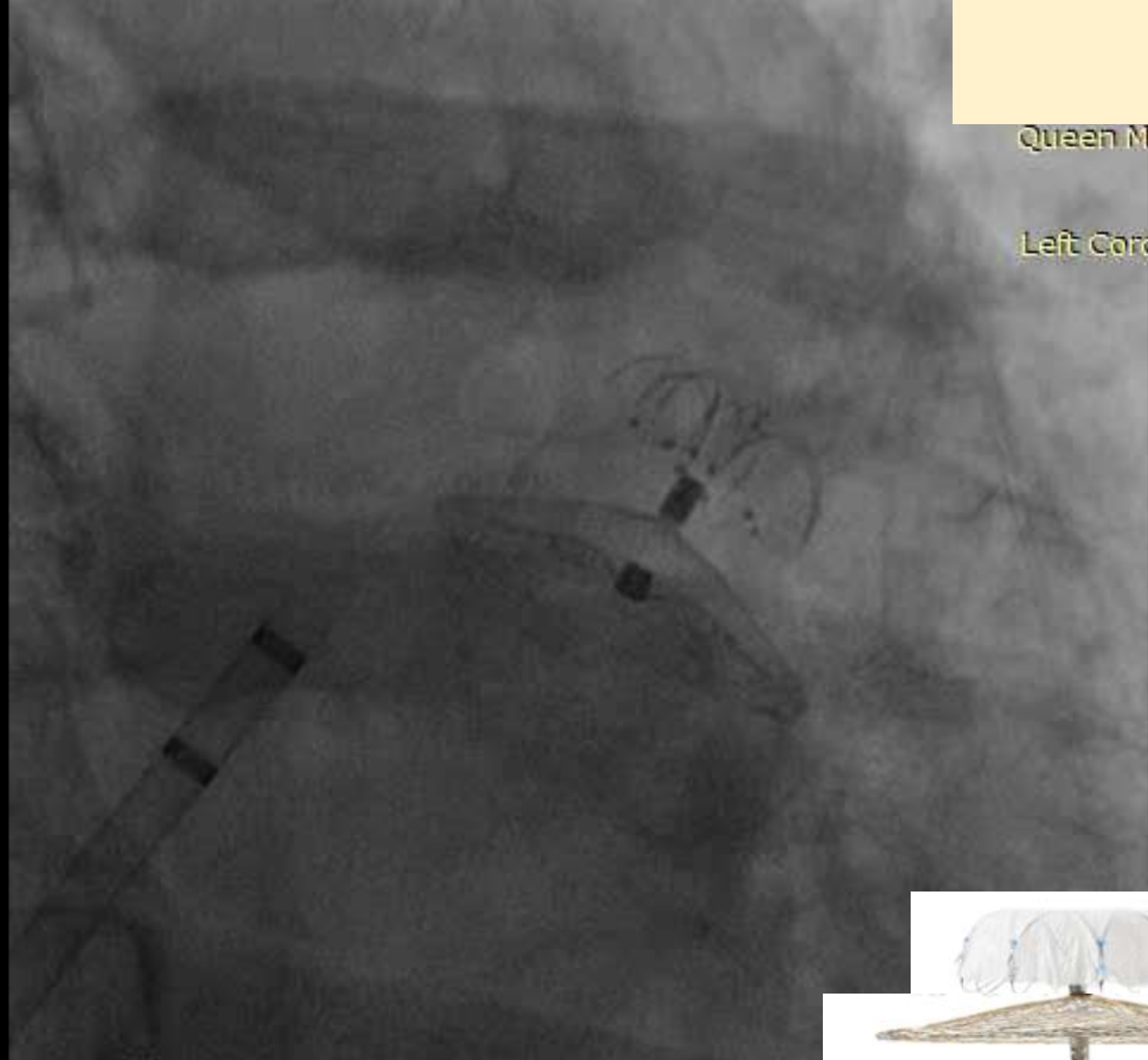
Queen Mary Hospital
1139-2018
XA
Left Coronary 15 fps



31/8/2018 1:50:06 PM

Im: 1/67
Se: 41

Queen Mary Hospital
1139-2018
XA
Left Coronary 15 fps



WL: 129 WW: 190 [D]
RAO: 30 CAU: 20

31/8/2018 1:53:58 PM

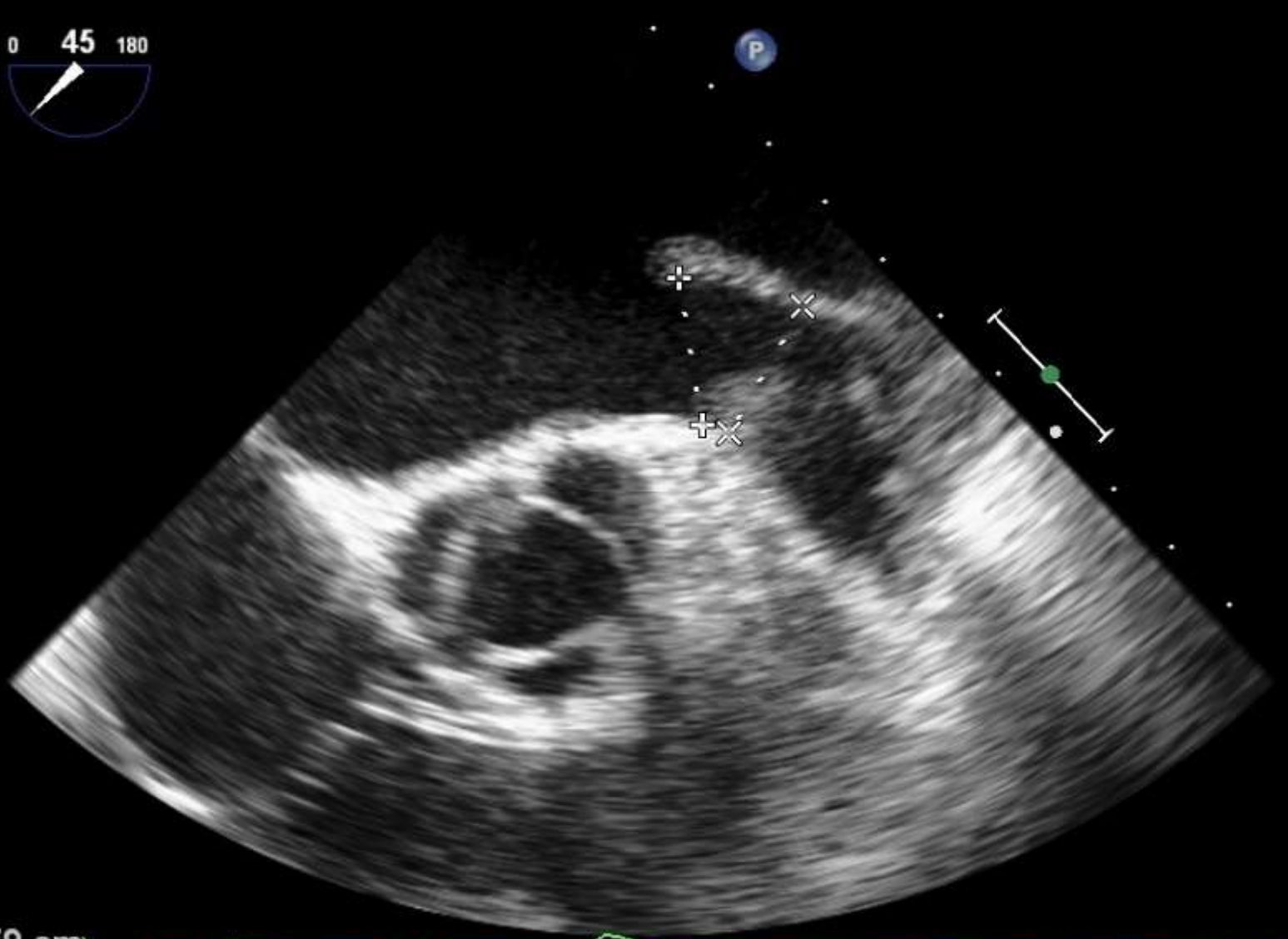
W1

FR 50Hz
11cm

2D
65%
C 50
P Off
Gen



M4



× Dist 1.79 cm
+ Dist 1.82 cm

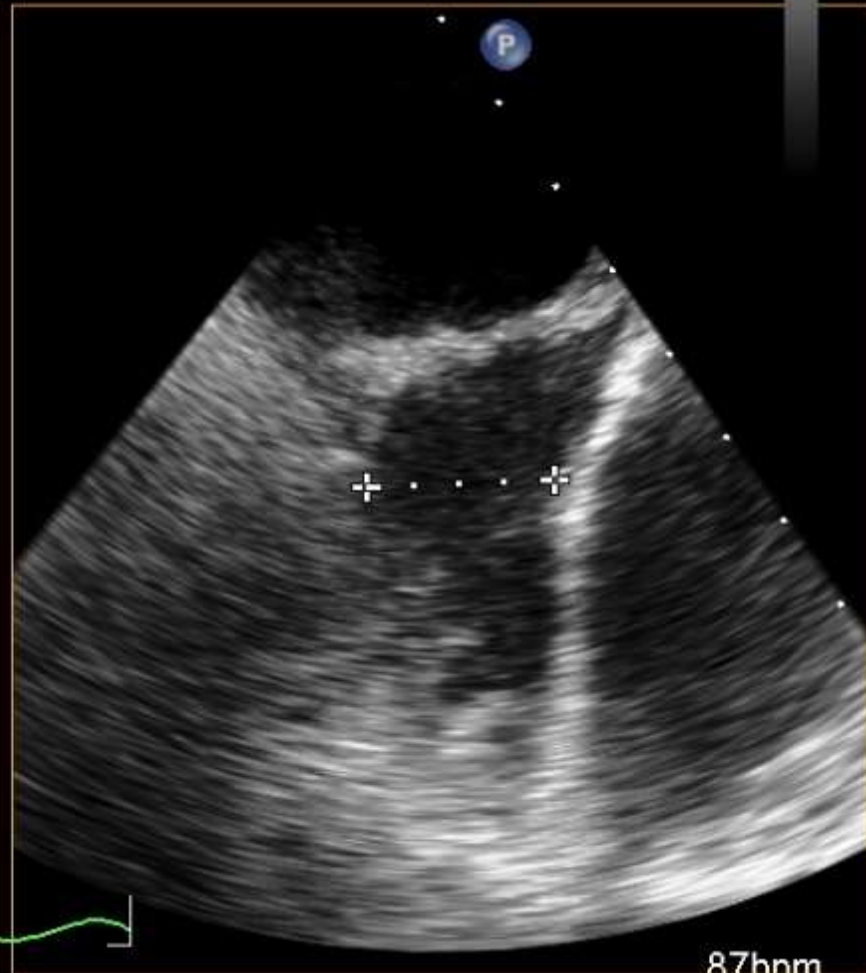


82bpm

FR 35Hz
9.0cm

xPlane
62%
62%
50dB
P Off
Gen

M4



Dist 1.86 cm

87bpm

Im: 1/77
Se: 1

Queen Mary Hospital
0338-2017
XA
Fluoroscopy

WL: 115 WW: 213 [D]
AP

3/10/2017 10:26:59 AM

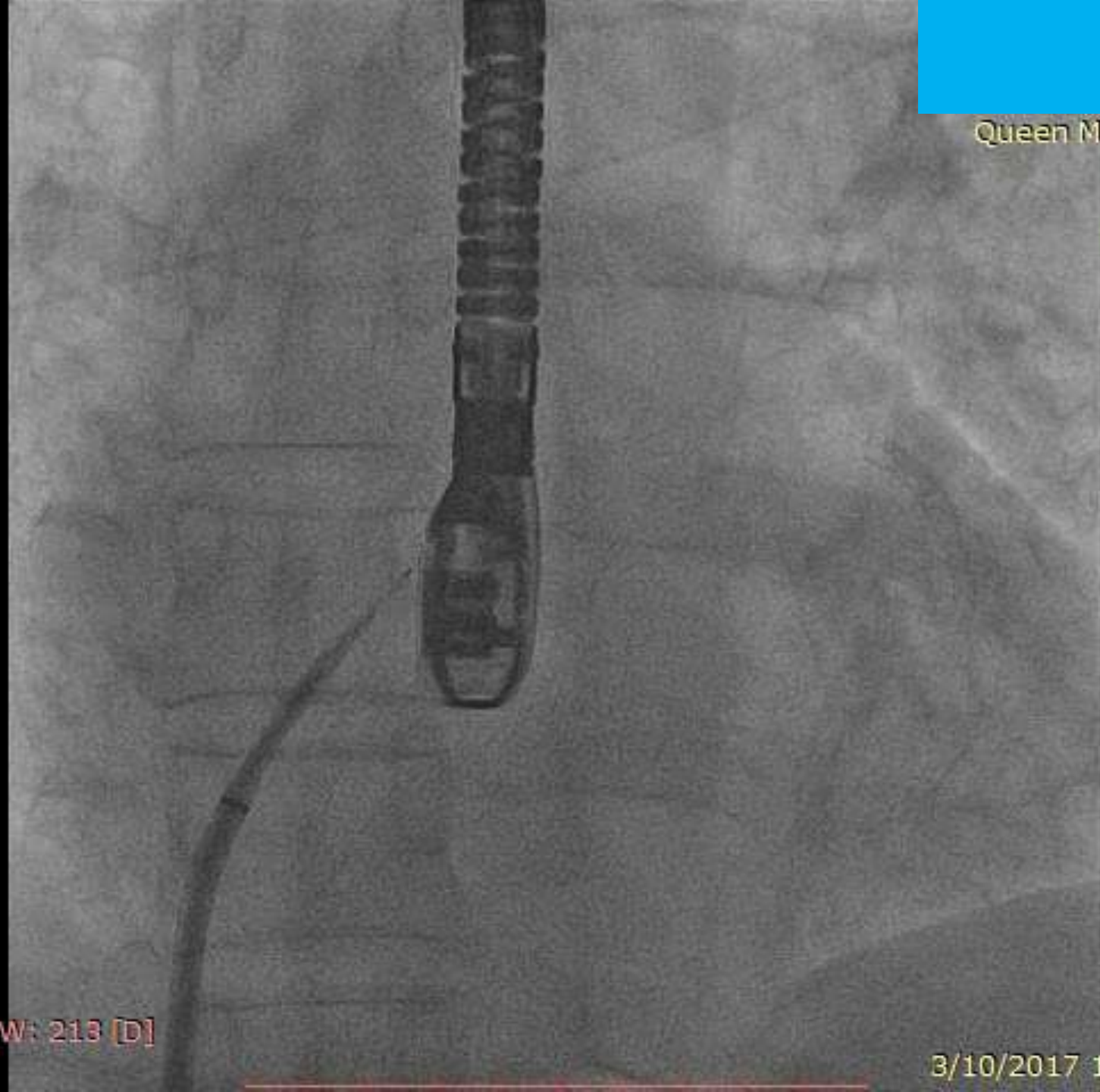


Im: 1/60
Se: 2

Queen Mary Hospital
0338-2017
XA
Fluoroscopy

WL: 115 WW: 218 [D]
AP

3/10/2017 10:27:53 AM



Im: 1/58

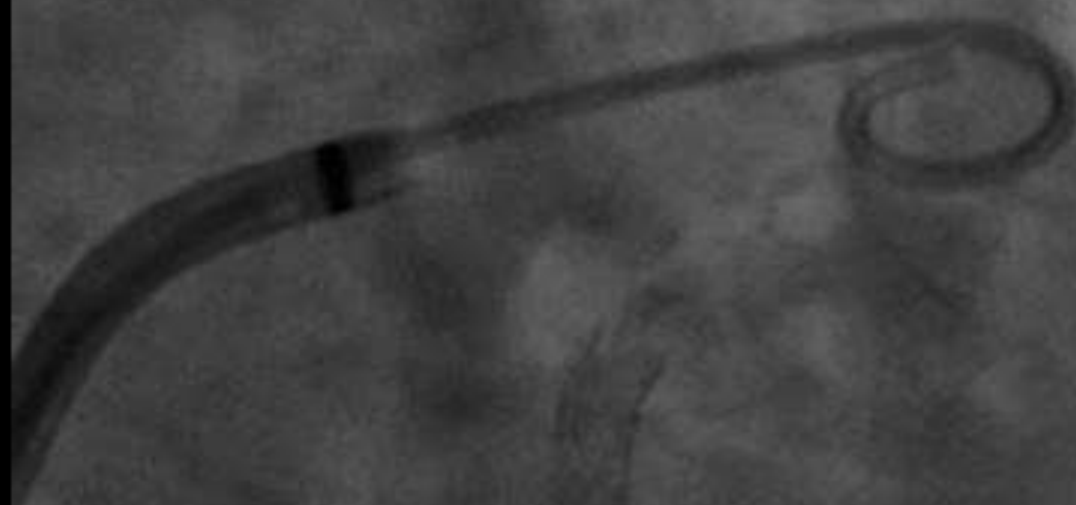
Se: 4

Queen Mary Hospital

0338-2017

XA

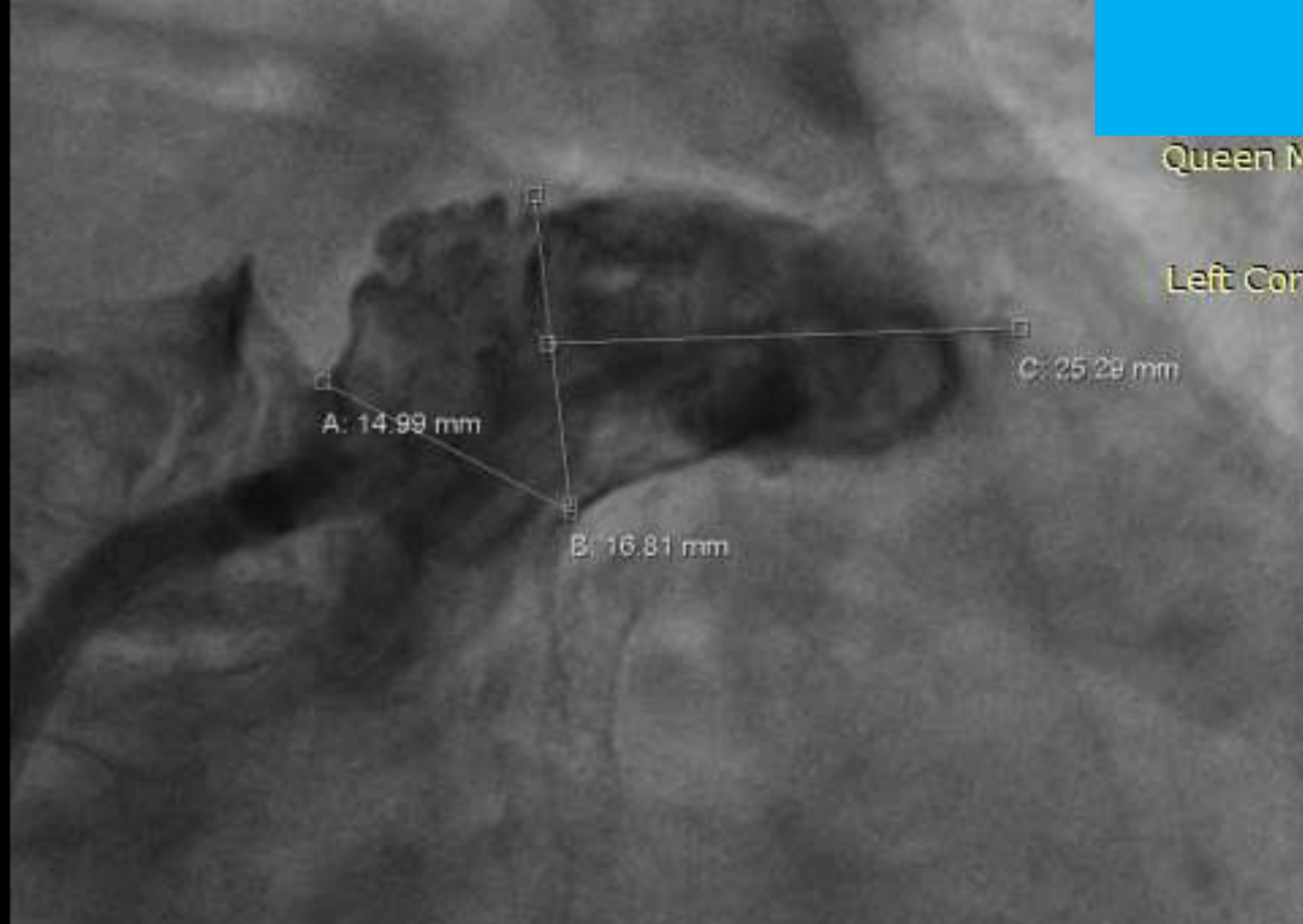
Left Coronary 15 fps



WL: 129 WW: 190 [D]

RAO: 30 CRA: 20

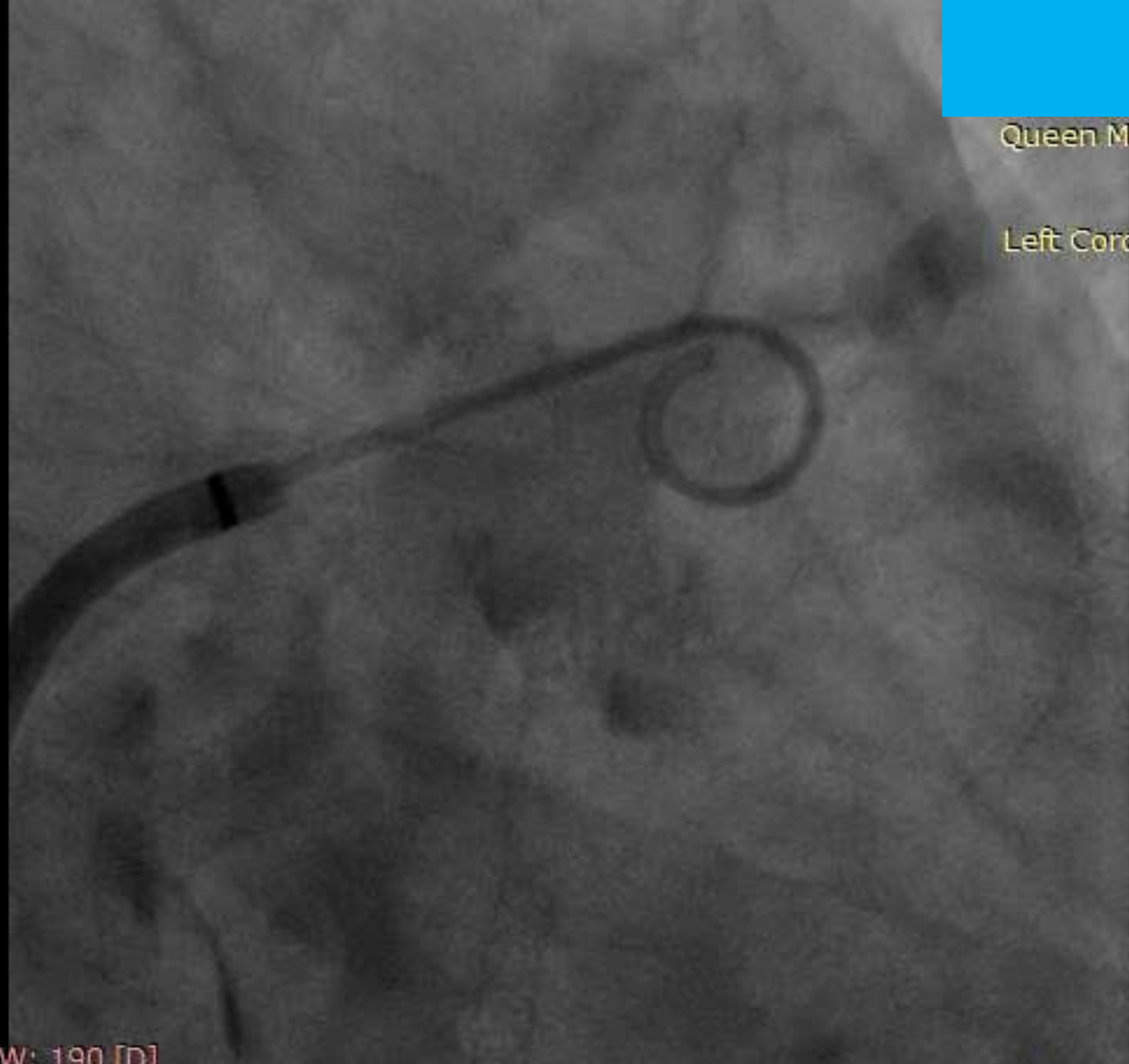
3/10/2017 10:33:02 AM



Max LAA Ostium	Device Diameter
17 – 19 mm	21 mm
20 – 22 mm	24 mm
23 – 25 mm	27 mm
26 – 28 mm	30 mm
29 – 31 mm	33 mm

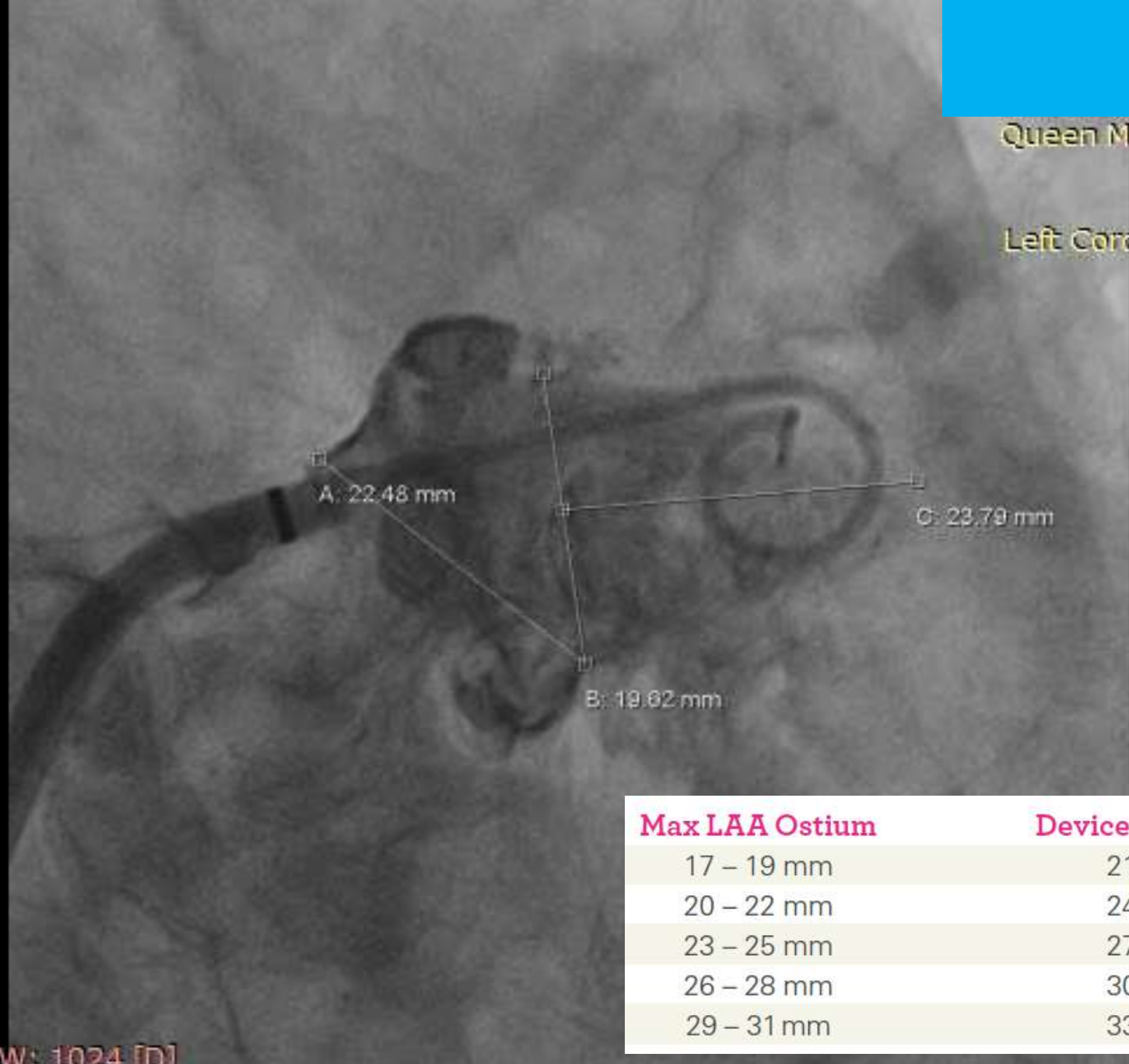
Im: 1/72
Se: 5

Queen Mary Hospital
0338-2017
XA
Left Coronary 15 fps



WL: 129 WW: 190 [D]
RAO: 30 CAU: 20

3/10/2017 10:35:03 AM



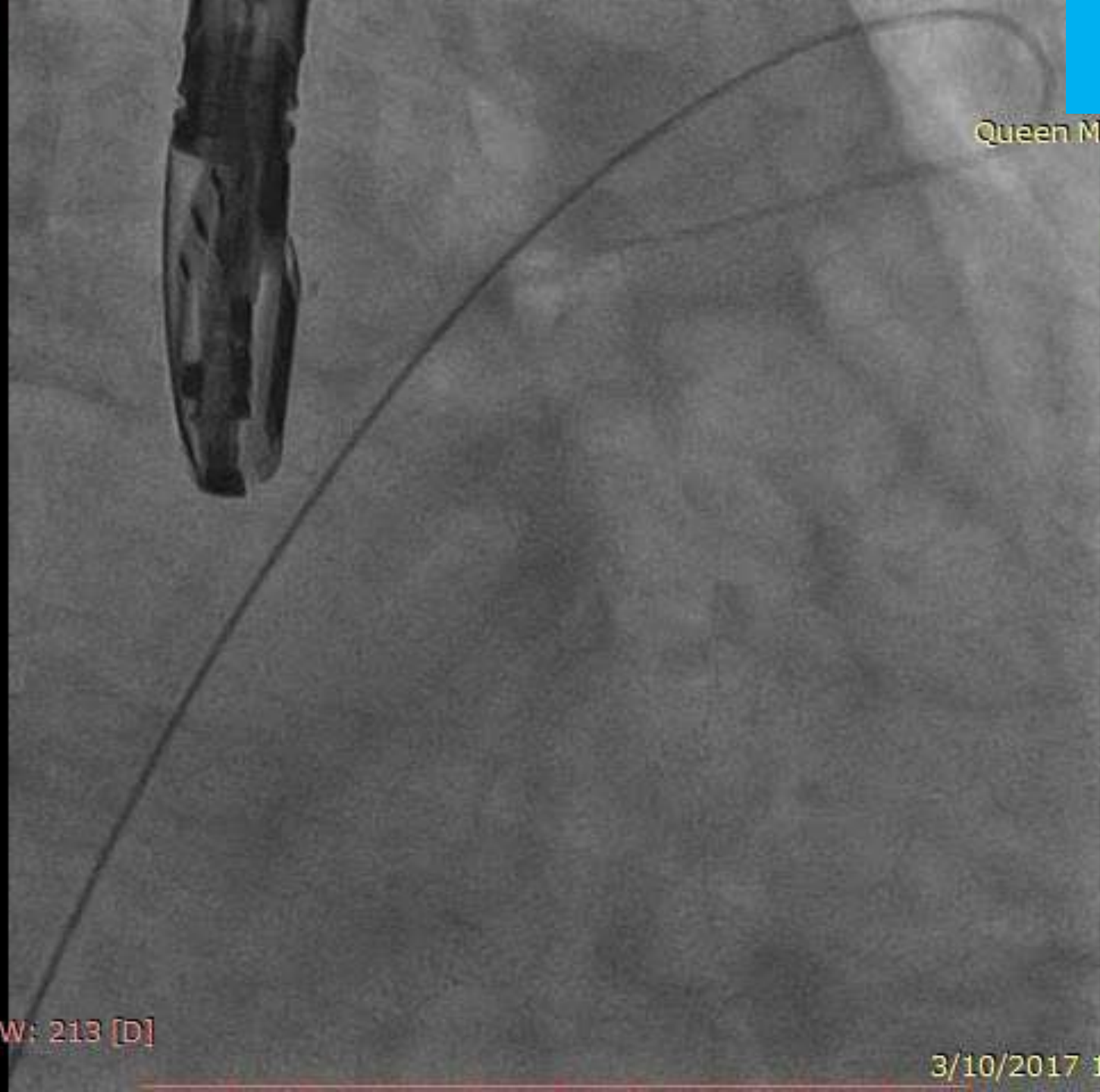
Max LAA Ostium	Device Diameter
17 – 19 mm	21 mm
20 – 22 mm	24 mm
23 – 25 mm	27 mm
26 – 28 mm	30 mm
29 – 31 mm	33 mm

Im: 1/300
Se: 8

Queen Mary Hospital
0338-2017
XA
Fluoroscopy

WL: 115 WW: 213 [D]
RAO: 30

3/10/2017 10:50:05 AM

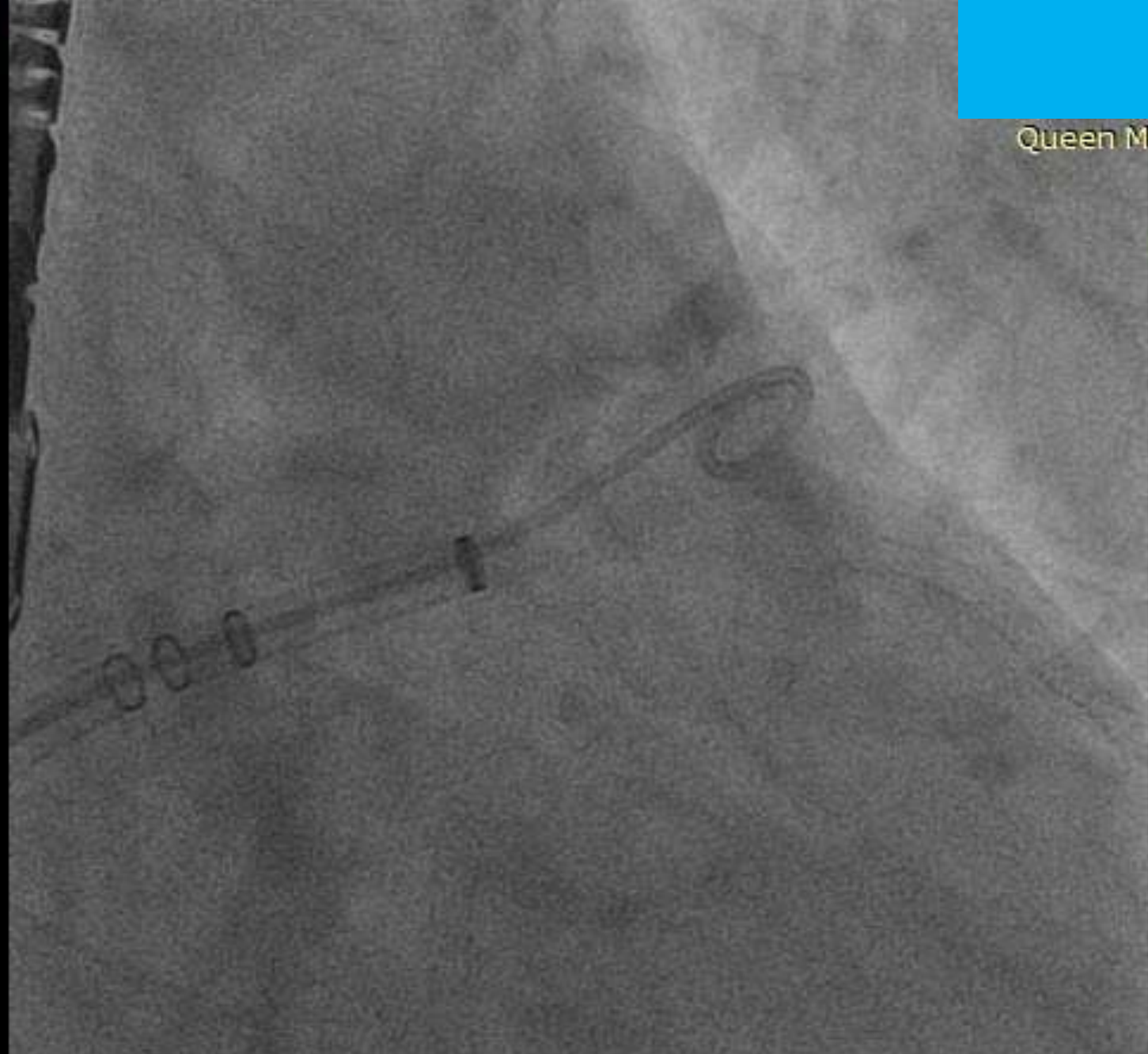


Im: 1/255
Se: 9

Queen Mary Hospital
0338-2017
XA
Fluoroscopy

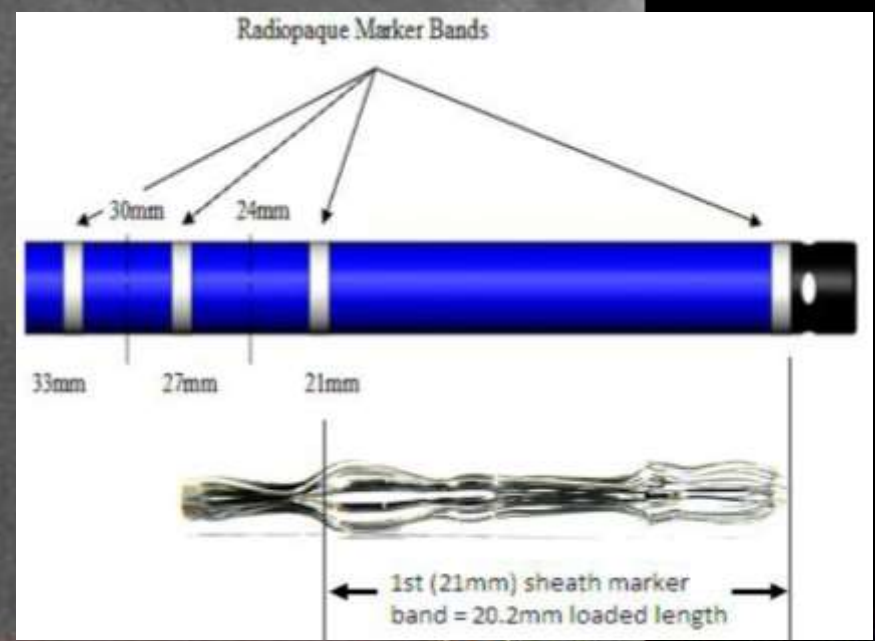
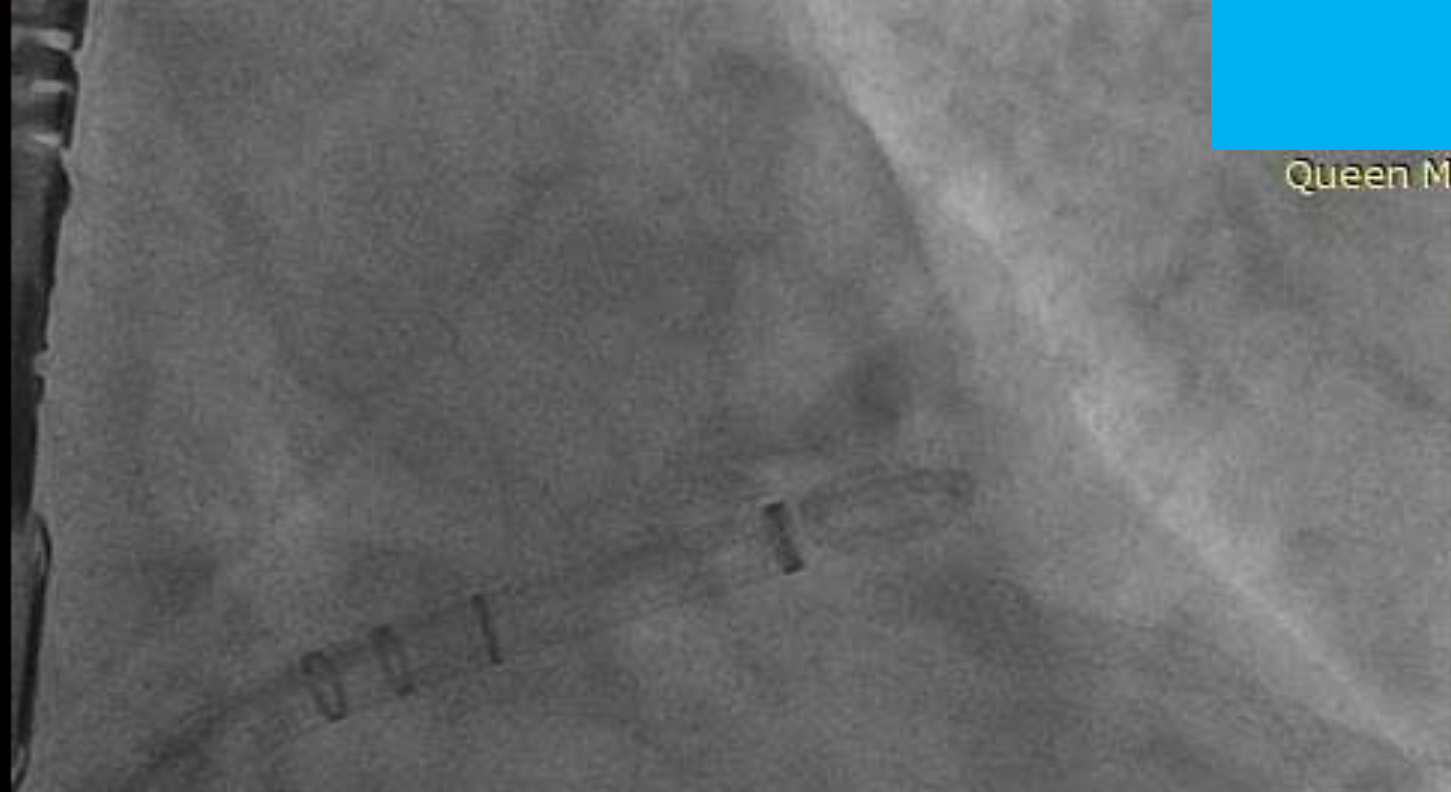
WL: 115 WW: 213 [D]
RAO: 30 CAU: 20

3/10/2017 10:57:29 AM



Im: 1/300
Se: 10

Queen Mary Hospital
0338-2017
XA
Fluoroscopy



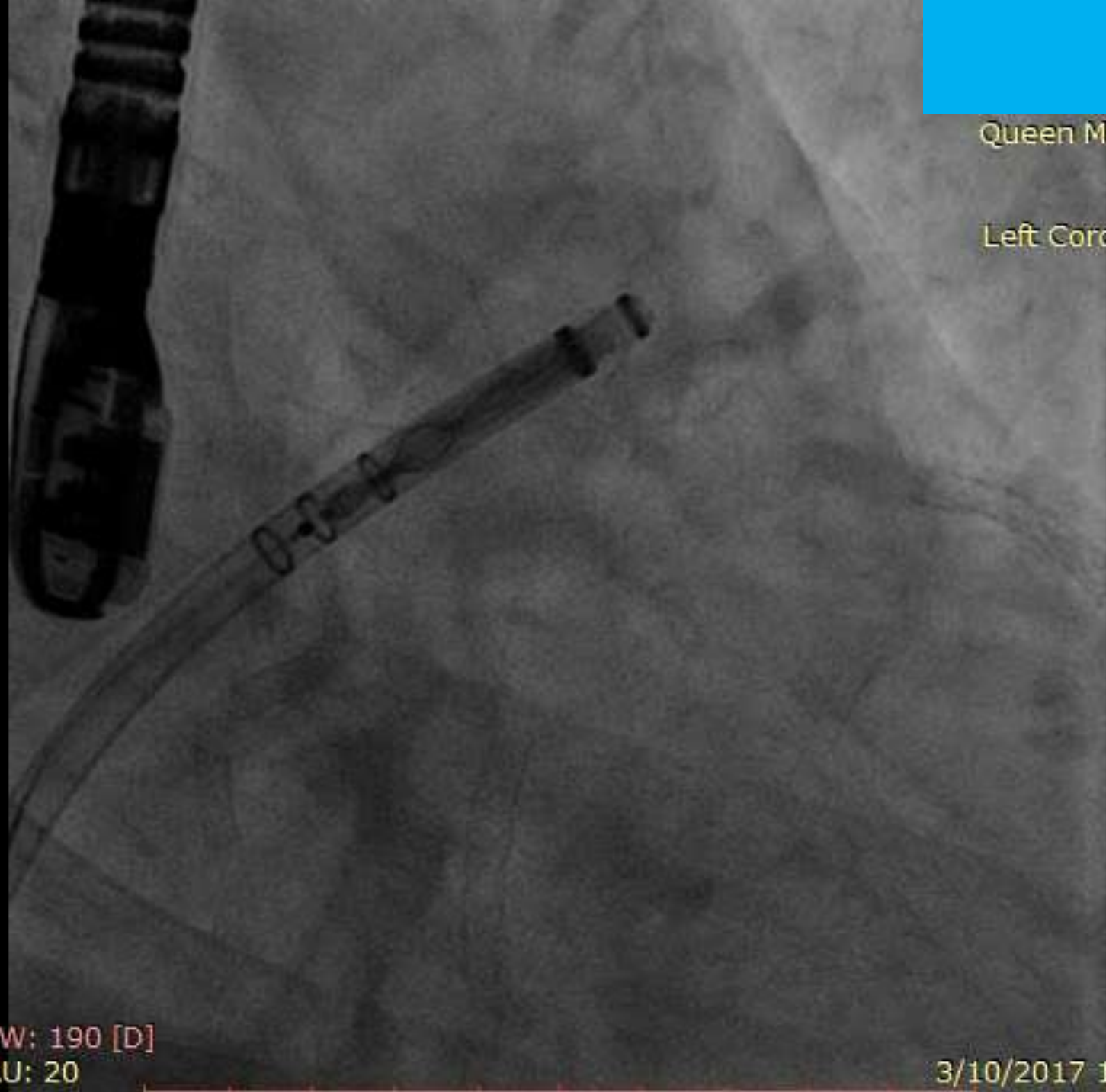
WL: 115 WW: 213 [D]
RAO: 30 CAU: 20

Im: 1/8
Se: 12

Queen Mary Hospital
0338-2017
XA
Left Coronary 15 fps

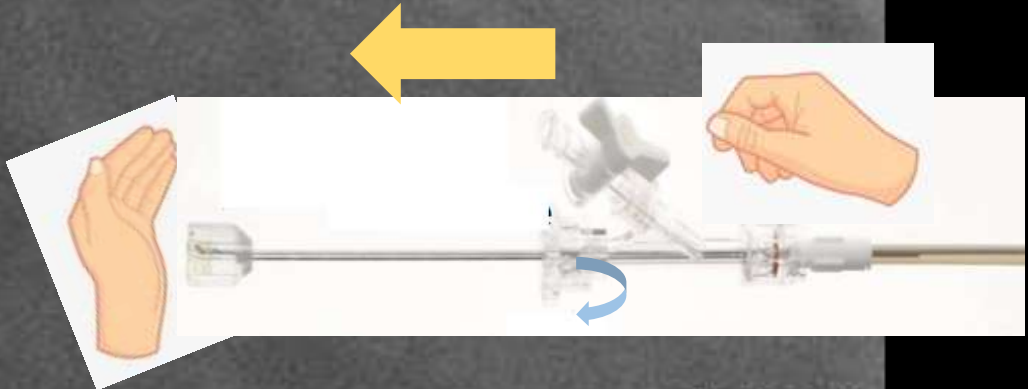
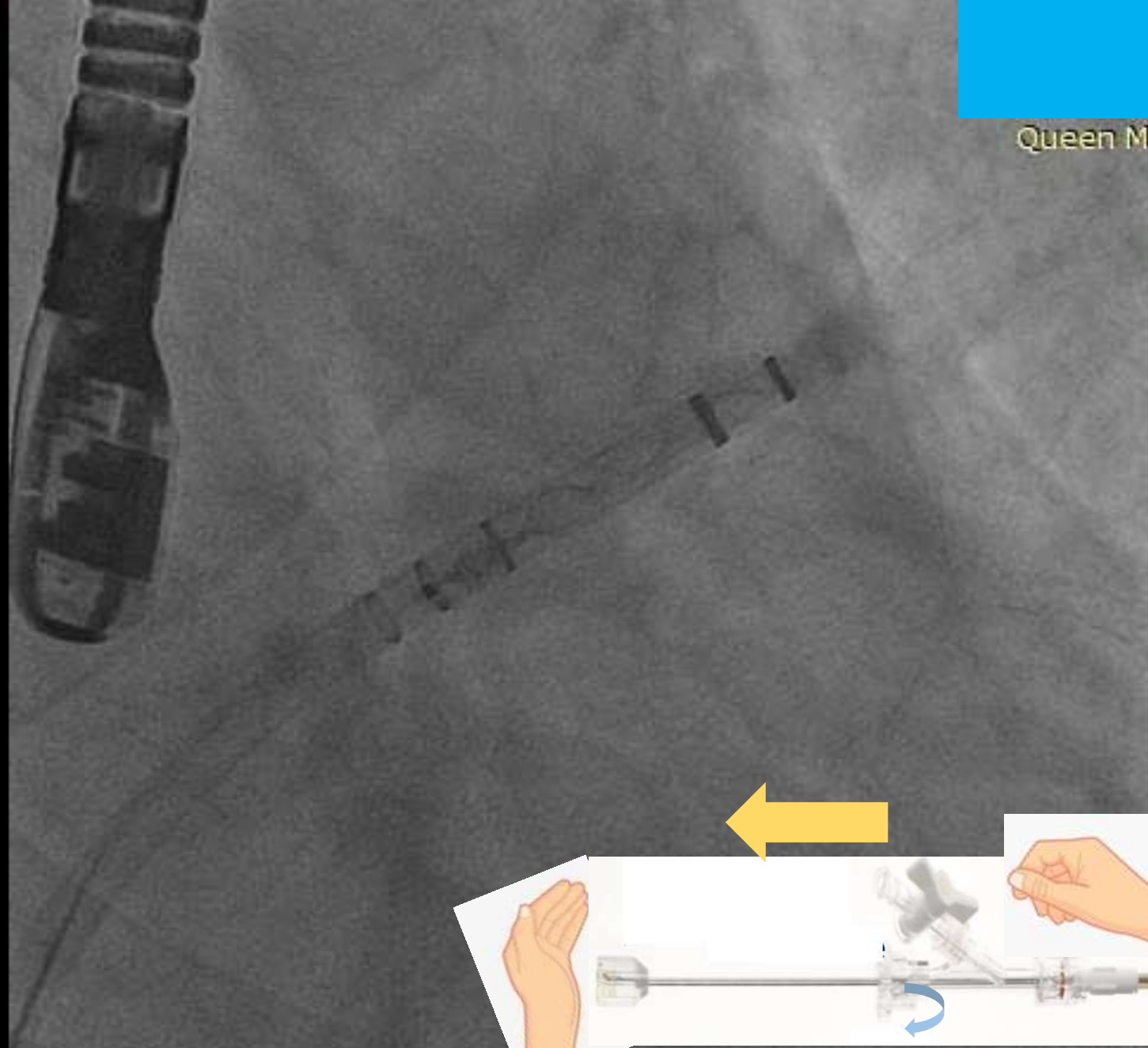
WL: 129 WW: 190 [D]
RAO: 30 CAU: 20

3/10/2017 11:06:00 AM



Im: 1/300
Se: 13

Queen Mary Hospital
0338-2017
XA
Fluoroscopy



WL: 115 WW: 213 [D]
RAO: 30 CAU: 20

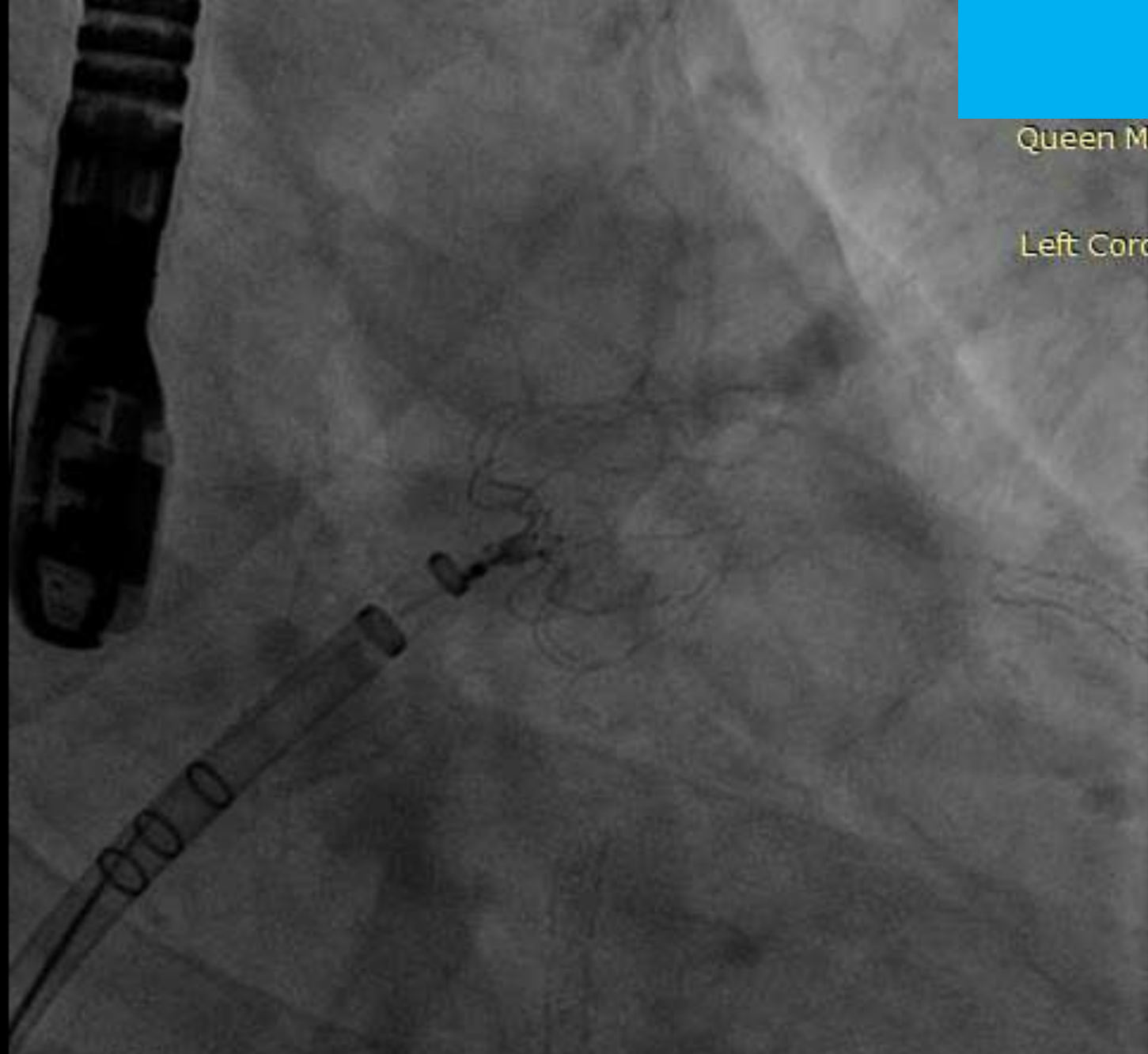
3/10/2017 11:06:37 AM

Im: 1/7
Se: 15

Queen Mary Hospital
0338-2017
XA
Left Coronary 15 fps

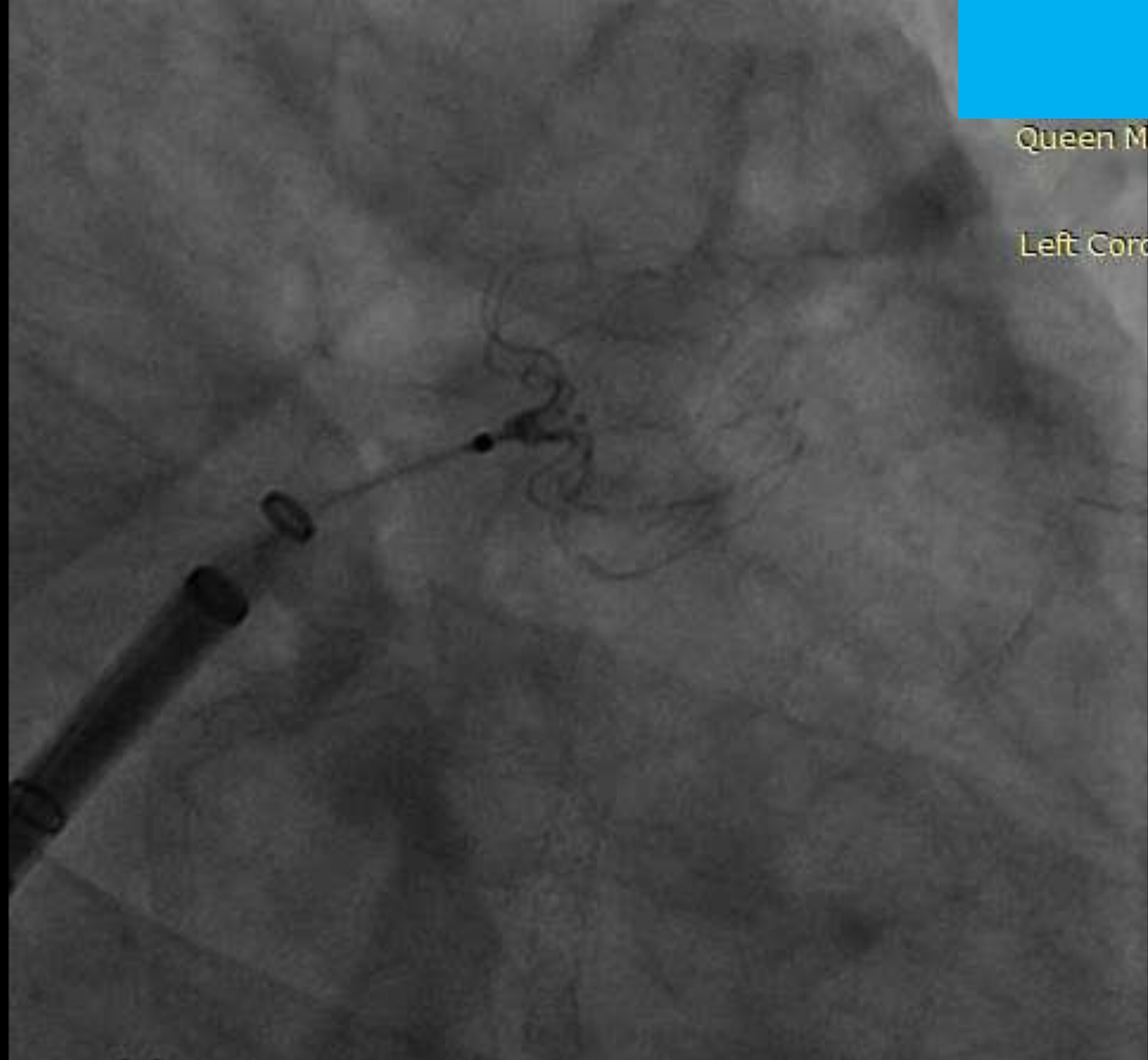
WL: 129 WW: 190 [D]
RAO: 30 CAU: 20

3/10/2017 11:07:18 AM



Im: 1/58
Se: 20

Queen Mary Hospital
0338-2017
XA
Left Coronary 15 fps



WL: 129 WW: 190 [D]
RAO: 30 CAU: 20

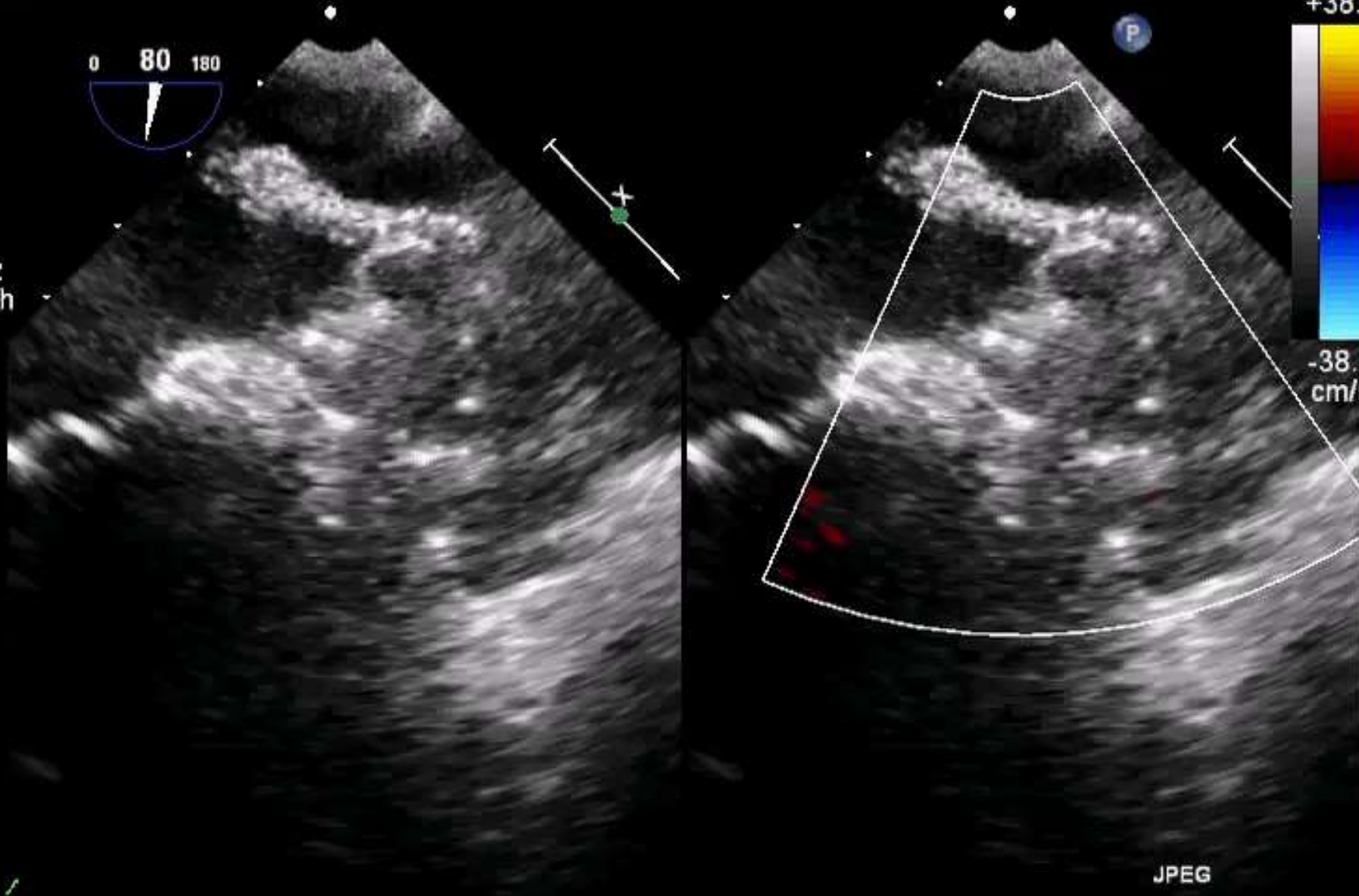
3/10/2017 11:13:18 AM

FR 19Hz
9.0cm

2D
65%
C 50
P Off
HGen
CF
59%
4.4MHz
WF High
Med



M4 M4
+38.5



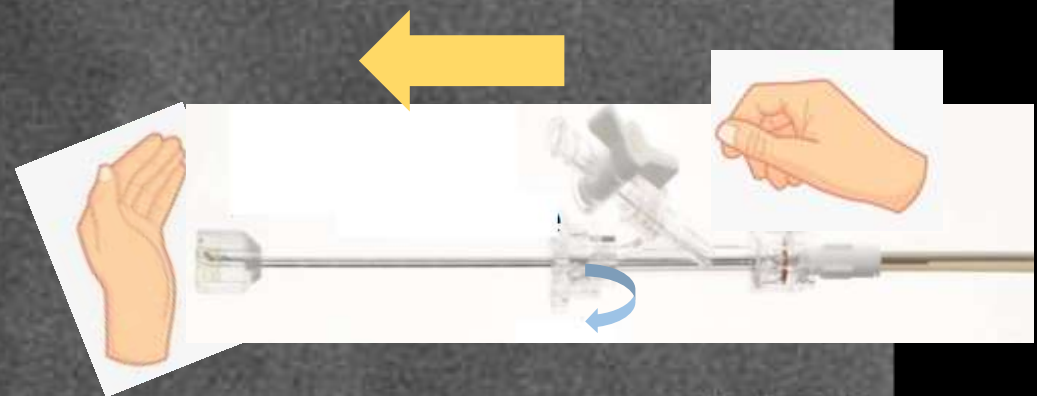
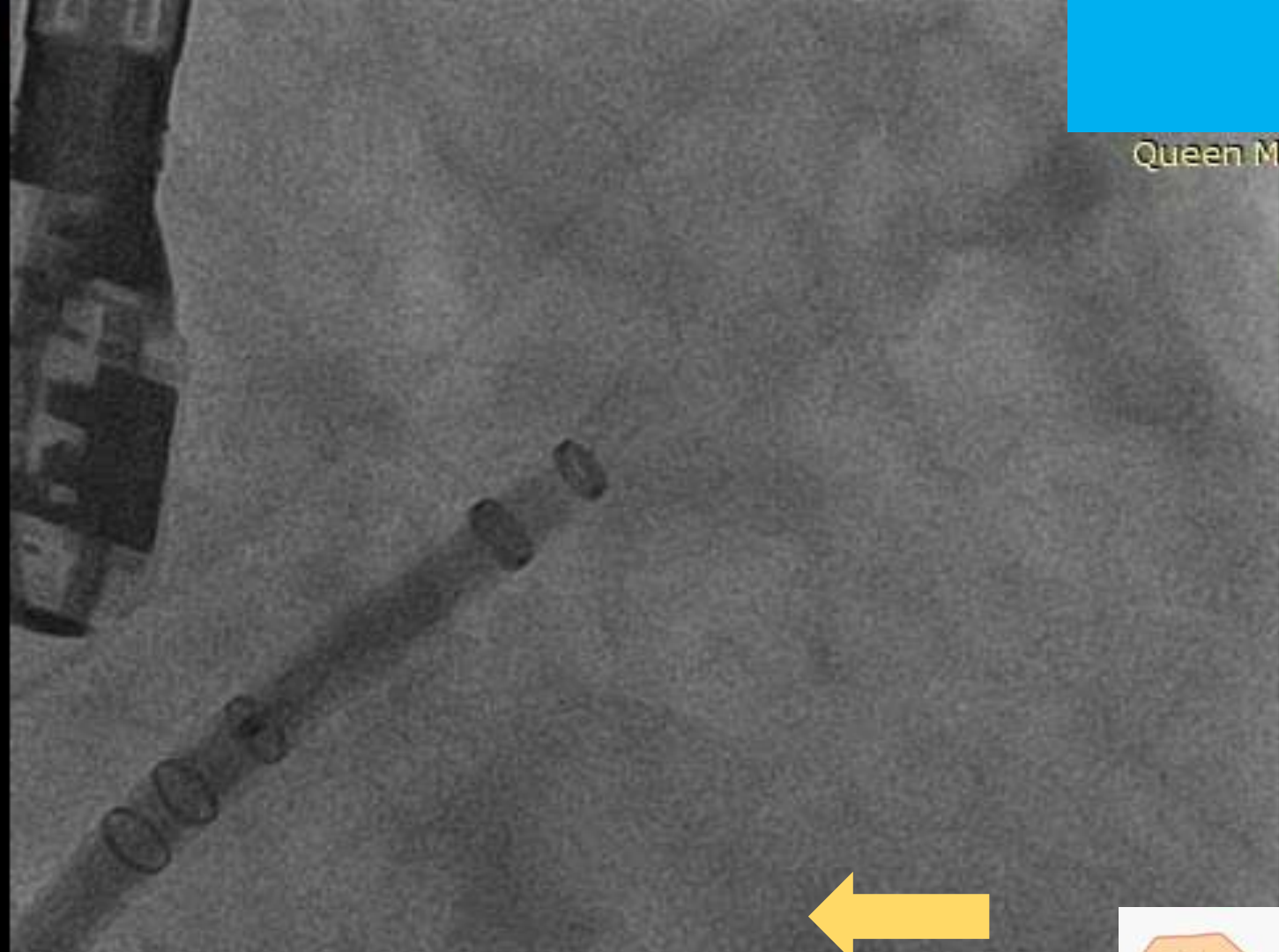
JPEG

PAT T: 37.0C
TEE T: 38.2C

58 bpm

Im: 1/248
Se: 23

Queen Mary Hospital
0338-2017
XA
Fluoroscopy

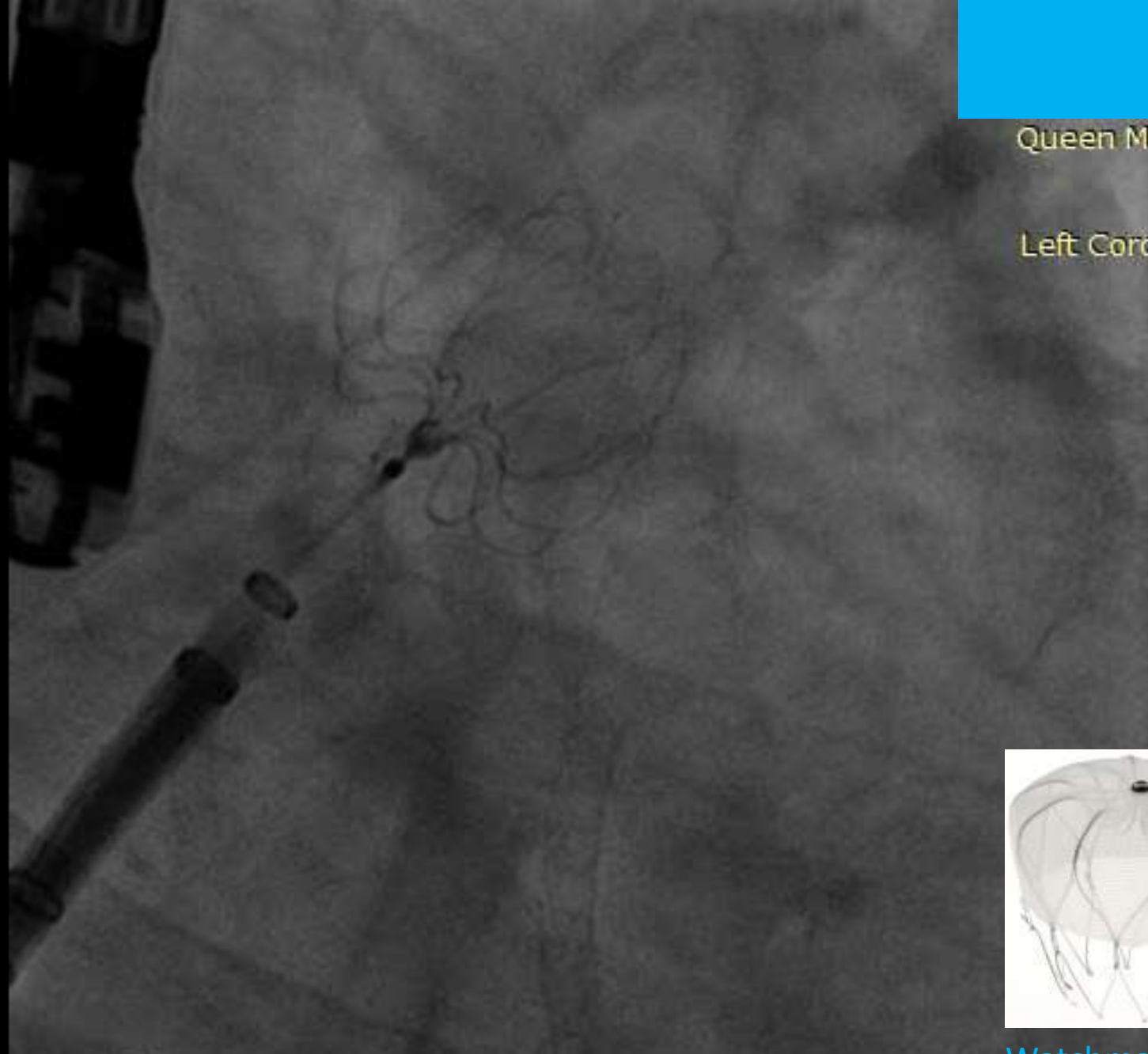


WL: 115 WW: 213 [D]
RAO: 30 CAU: 20

3/10/2017 11:15:41 AM

Im: 1/56
Se: 25

Queen Mary Hospital
0338-2017
XA
Left Coronary 15 fps

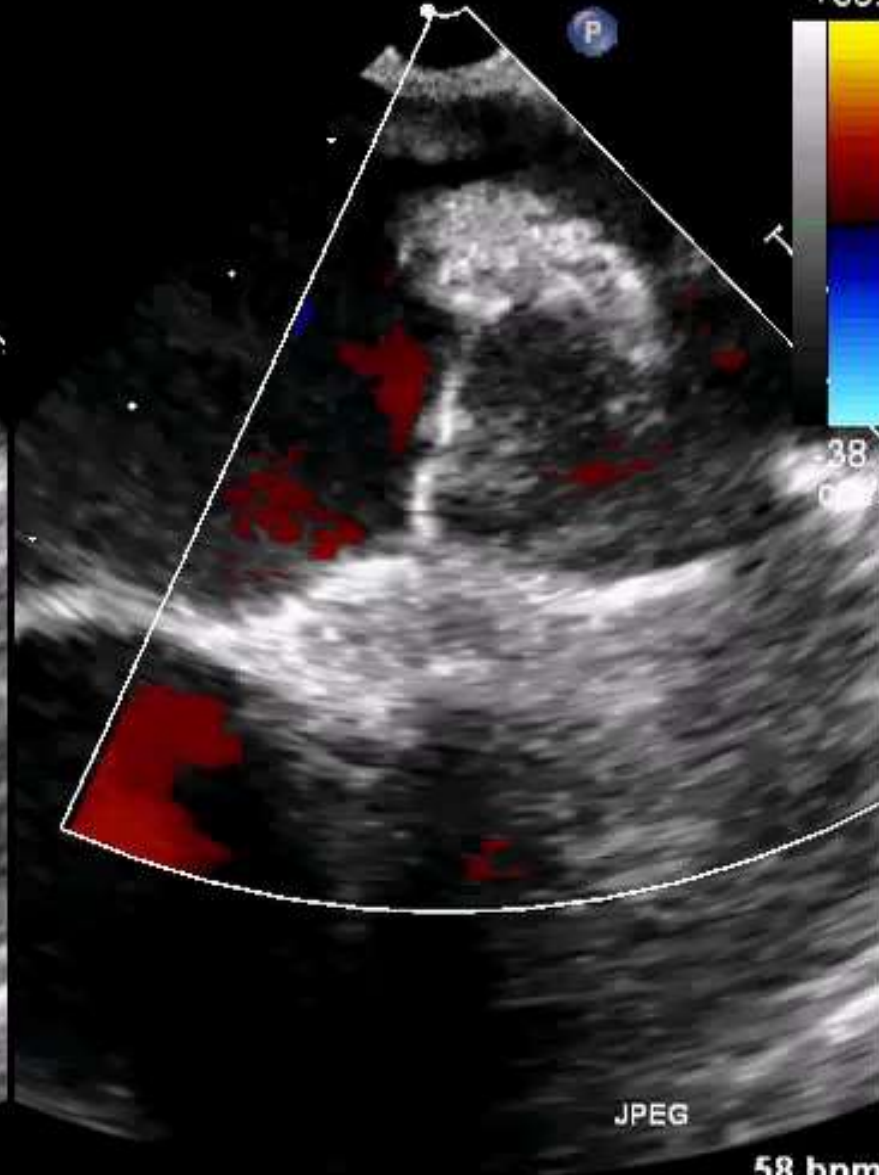


WL: 129 WW: 190 [D]
RAO: 30 CAU: 20

Watchman 24mm
3/10/2017 11:18:35 AM

FR 17Hz
7.0cm

2D
61%
C 50
P Off
HGen
CF
59%
4.4MHz
WF High
Med



JPEG

PAT T: 37.0C
TEE T: 38.4C

58 bpm

Device Release Criteria



All criteria must be met prior to device release (PASS)

Position – device is distal to or at the ostium of the LAA

Anchor – fixation anchors engaged / device is stable

Size – device is compressed 8-20% of original size

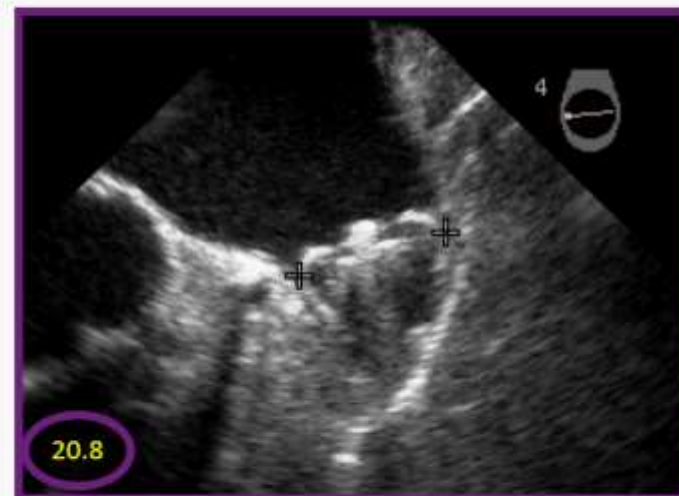
Seal – device spans ostium, all lobes of LAA are covered

– If necessary, device can be recaptured (partial or full)

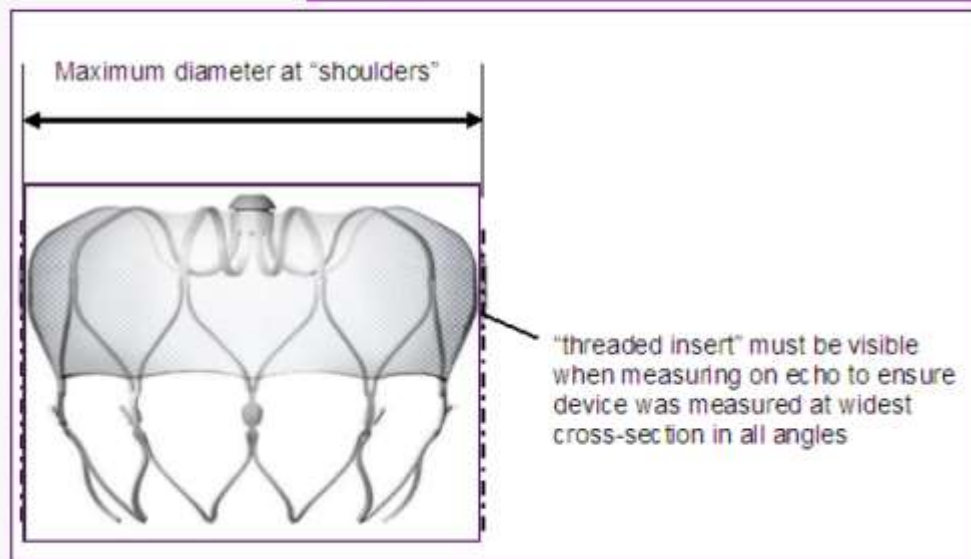
Device Release Criteria – Size

Compression

Device Size <i>(uncompressed diameter)</i>	Maximum (20%) Compression Measured Diameter*	Minimum (8%) Compression Measured Diameter*
21	16.8 mm	19.3 mm
24	19.2 mm	22.1 mm
27	21.6 mm	24.8 mm
30	24.0 mm	27.6 mm
33	26.4 mm	30.4 mm



*Measure in-situ device diameter at approximate TEE angles of 0, 45, 90 and 135 degrees to accurately assess device compression



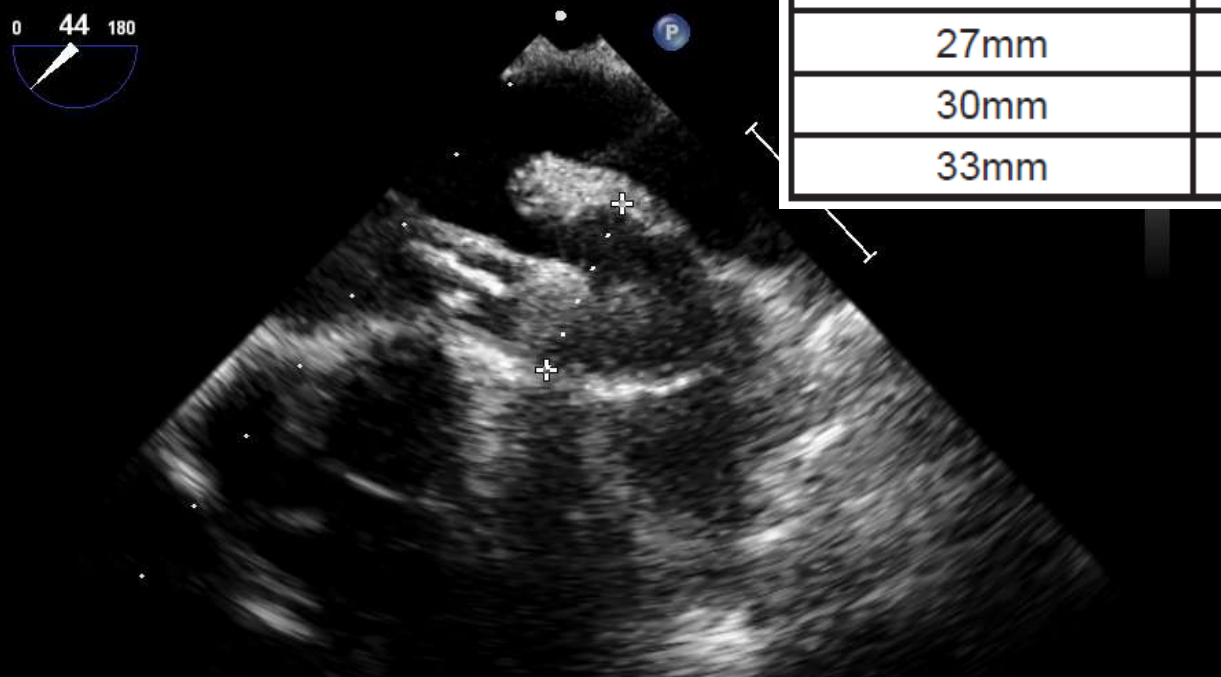
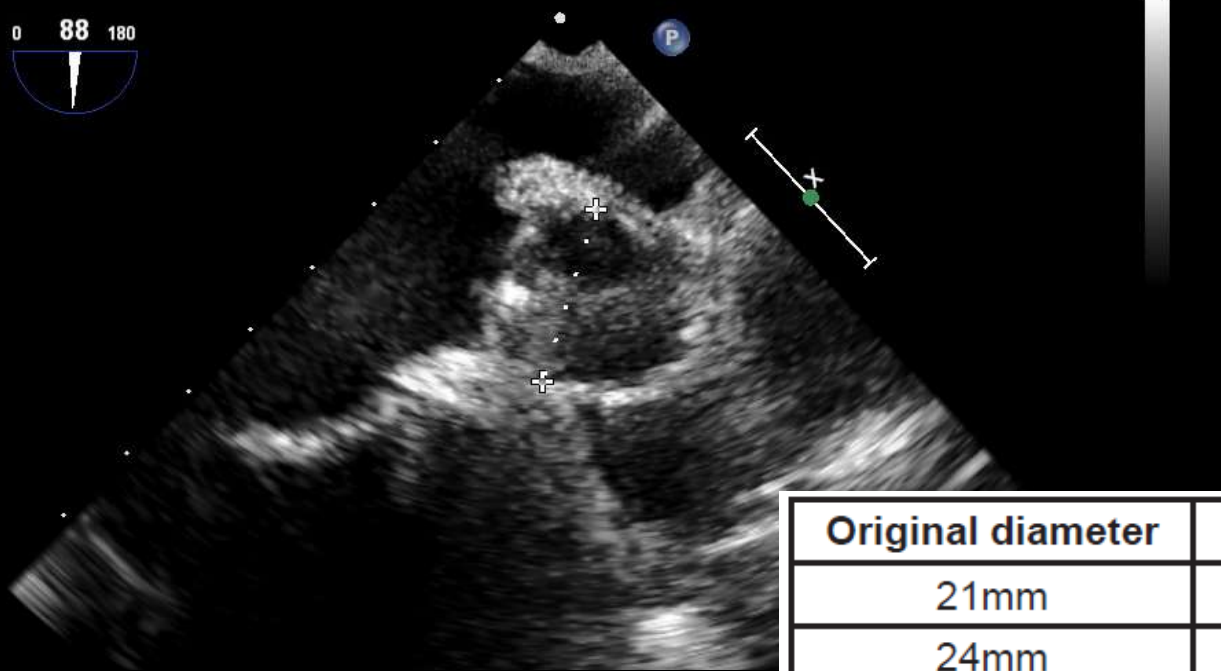
FR 50Hz
9.0cm

M4

2D
62%
C 50
P Off
HGen



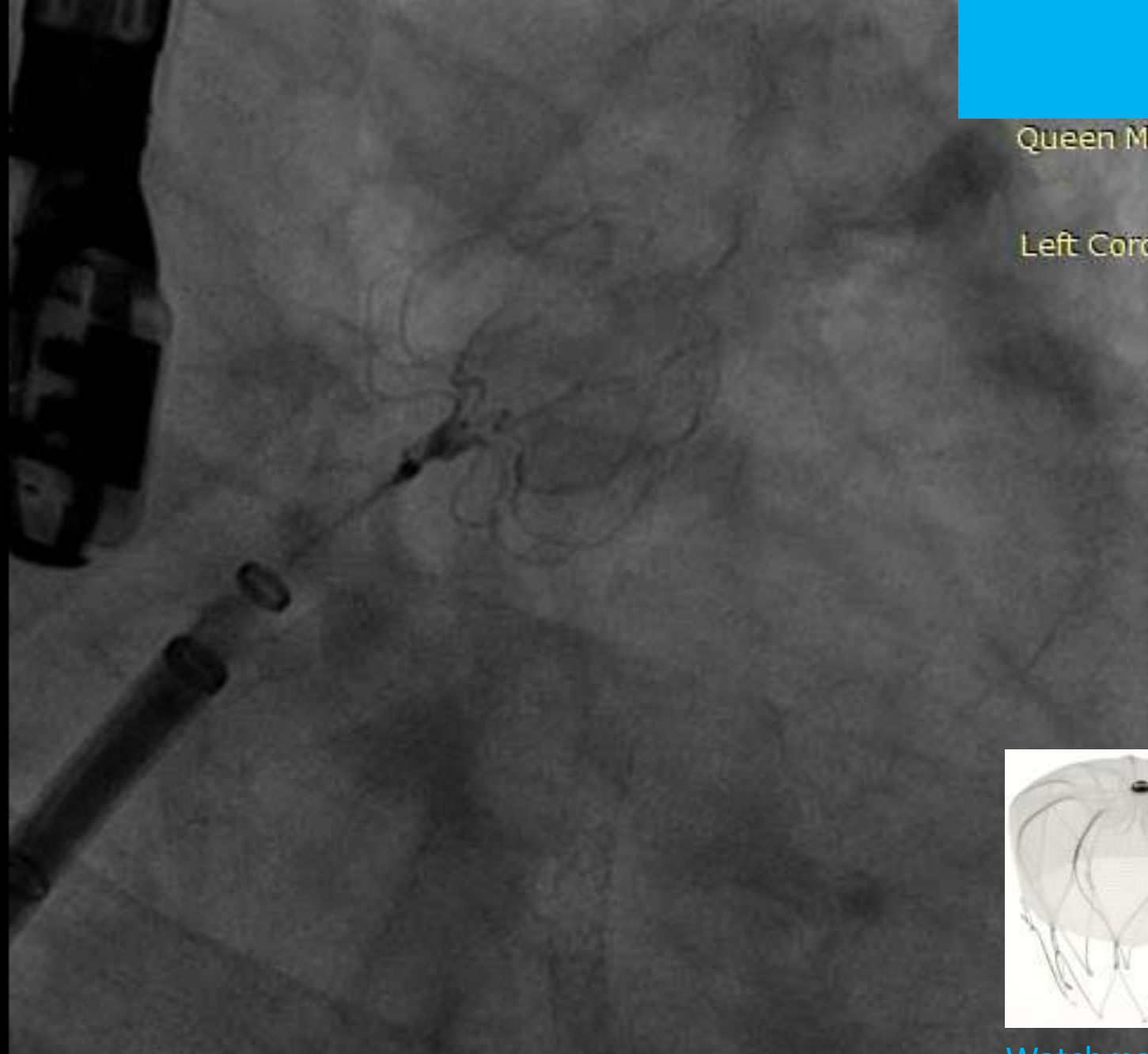
2D
62%
C 50
P Off
HGen



Original diameter	Compressed diameter
21mm	16.8 to 19.3mm
24mm	19.2 to 22.1mm
27mm	21.6 to 24.8mm
30mm	24.0 to 27.6mm
33mm	26.4 to 30.4mm

Im: 1/34
Se: 26

Queen Mary Hospital
0338-2017
XA
Left Coronary 15 fps

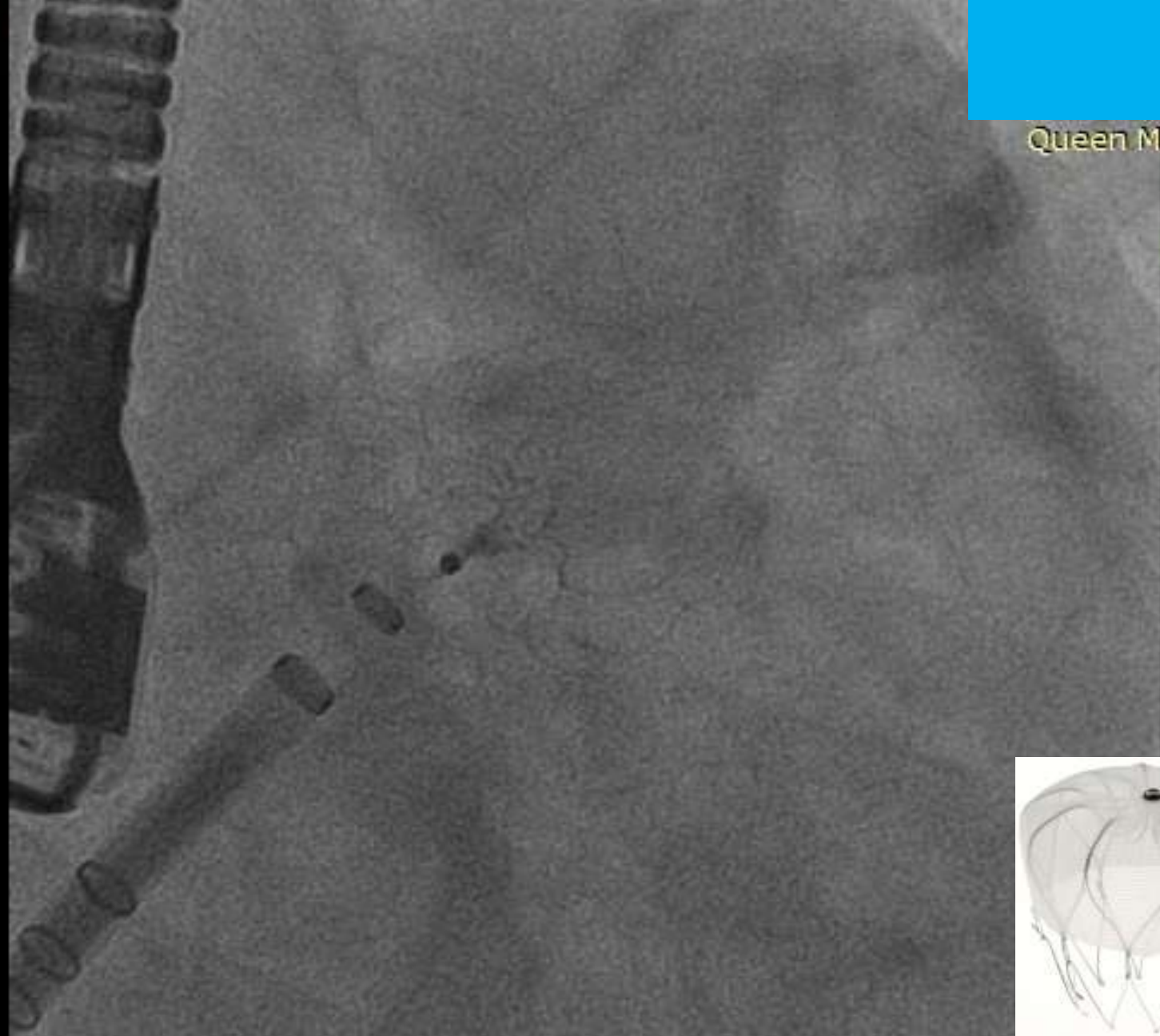


WL: 129 WW: 190 [D]
RAO: 30 CAU: 20

Watchman 24mm
3/10/2017 11:20:09 AM

Im: 1/282
Se: 27

Queen Mary Hospital
0338-2017
XA
Fluoroscopy



WL: 115 WW: 213 [D]
RAO: 30 CAU: 20

Watchman 24mm

3/10/2017 11:20:32 AM

Im: 1/57
Se: 28

Queen Mary Hospital
0338-2017
XA
Left Coronary 15 fps



WL: 129 WW: 190 [D]
RAO: 30 CAU: 20

Watchman 24mm
3/10/2017 11:22:02 AM

FR 13Hz
11cm

xPlane
68%
68%
50dB
P Off
HGen

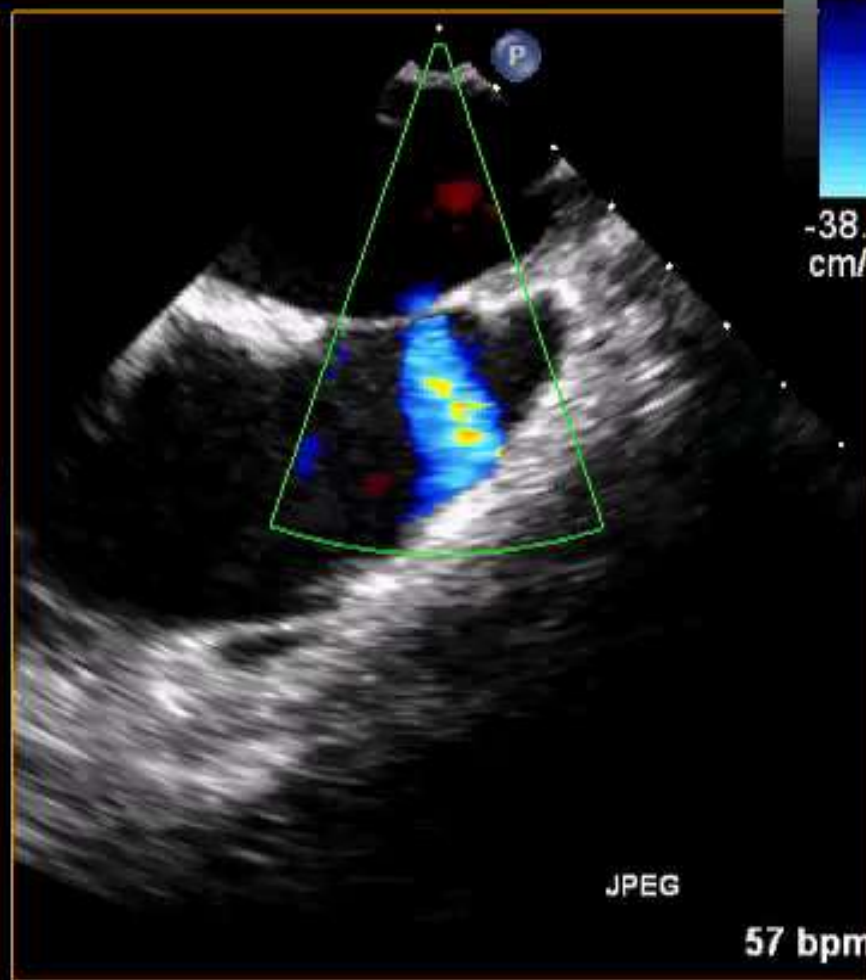
CF
59%
4.4MHz
WF High
Med



M4 M4
+38.5



-38.5
cm/s



PAT T: 37.0C
TEE T: 38.5C

57 bpm

Conclusion – AMULET/LAMBRE

- AMULET and LAMBRE share some common features as a 2-component device and basic concepts of 2-step deployment
- to allow flexibility for challenging anatomy
- differences in sealing concept and anchoring mechanisms
- familiarity with the specific device design/feature and sizing options is essential for LAA closure outcome optimization

Conclusion – Watchman

- Watchman device – tips
 - Depth of the LAA – TEE/Fluoroscopic
 - Delivery sheath relatively more into LAA
 - More forgiving for alignment
 - PASS criteria for release
- Upcoming Watchman FLEX device