Morning Roundtable Forum
Meet the Experts over Breakfast
Lower Extremity Intervention

Cutting Edge of BTK CTO Revascularization

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Wiring methods for BTK-CTO

1. Antegrade wiring

Tactile sensation-guided wiring Duplex echo-guided wiring Knuckle wire technique

2. Bi-directional wiring with distal puncture

Dorsalis Pedis

distal ATA

distal PTA

distal PA

Digital arteries

Plantar artery

3. Bi-directional wiring using collateral channel

Trans-collateral angioplasty (TCA)

Trans-pedal arch angioplasty (TPA)

Case: 80's female

Diagnosis: PAD (Rutherford 4)

DM

Dyslipidemia

CKD (Stage 3B, eGFR 23.8)

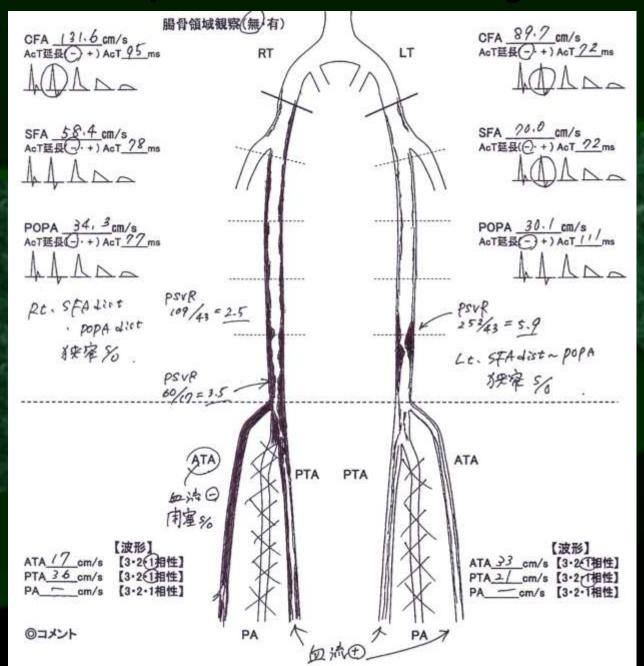
Intervention history: None

ABI: Right 0.34

Target lesion: Stenosis of Rt. Popliteal artery

Rt. PA-CTO, ATA-CTO

Duplex ultrasound image



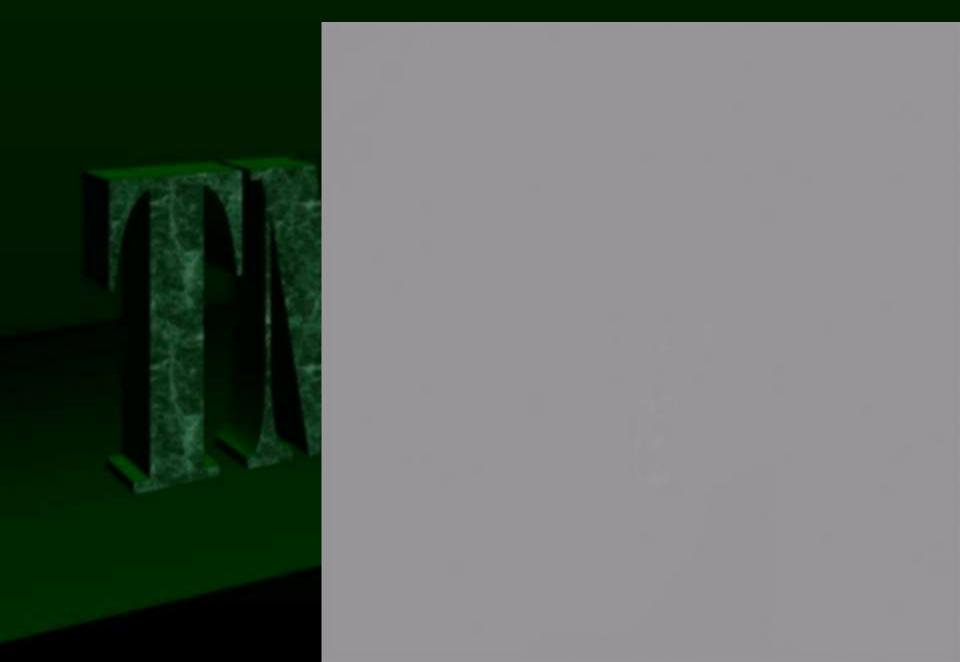
Control carbon dioxide (CO2) angiography



Control carbon dioxide (CO2) angiography



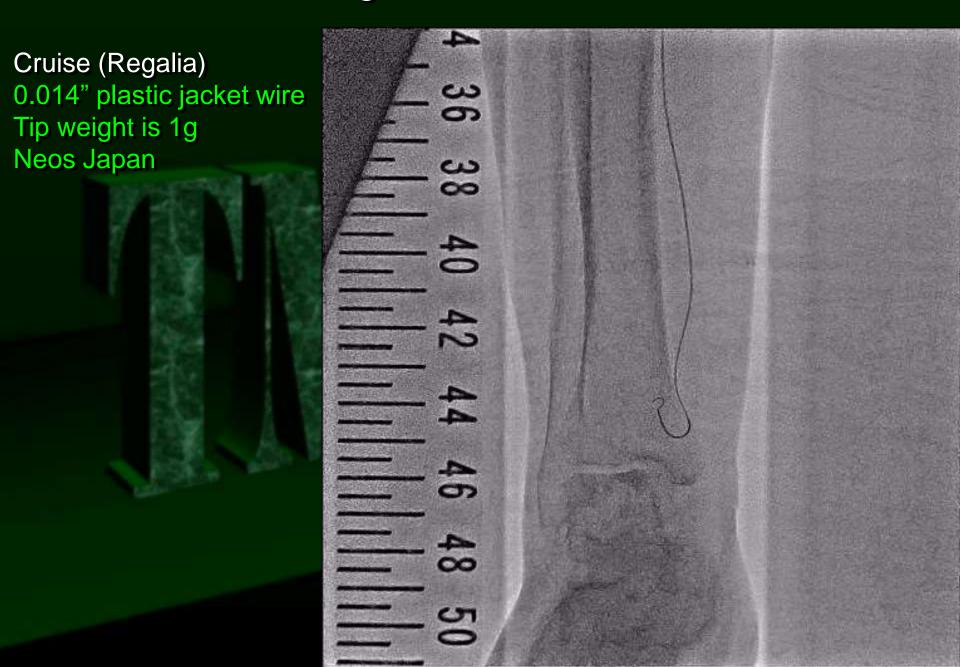
Control carbon dioxide (CO2) angiography



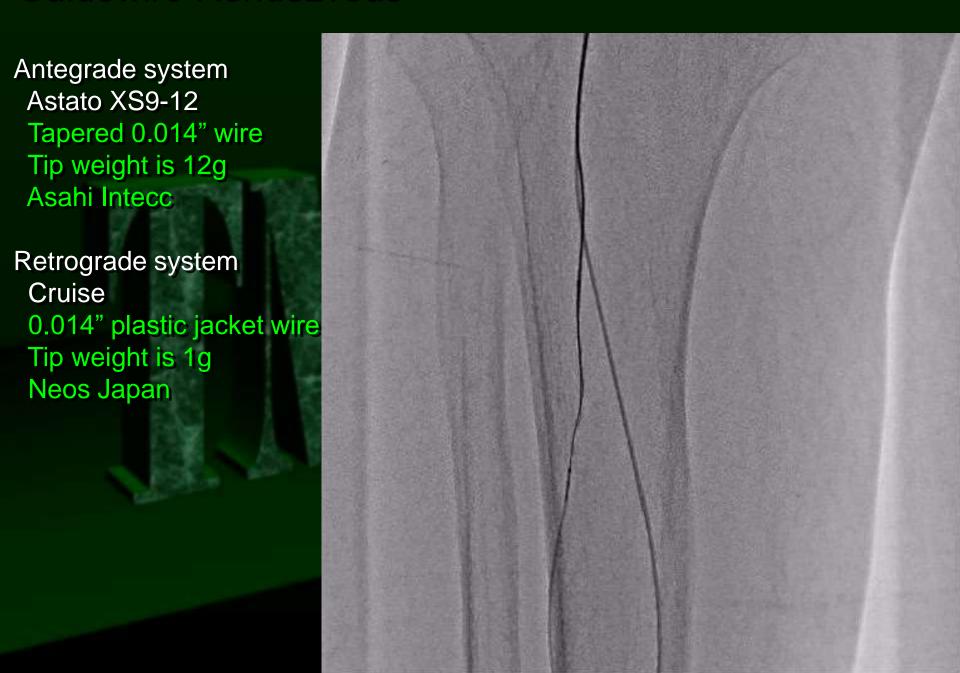
Visualize a collateral channel connecting to PA

CO₂ angio from microcatheter

Trans-collateral wiring



Guidewire Rendezvous



POBA for PTA



POBA for PA



Visualize the plantar arch and the route to DP

CO₂ angio from microcatheter

Trans-pedal arch wiring



Guidewire Rendezvous

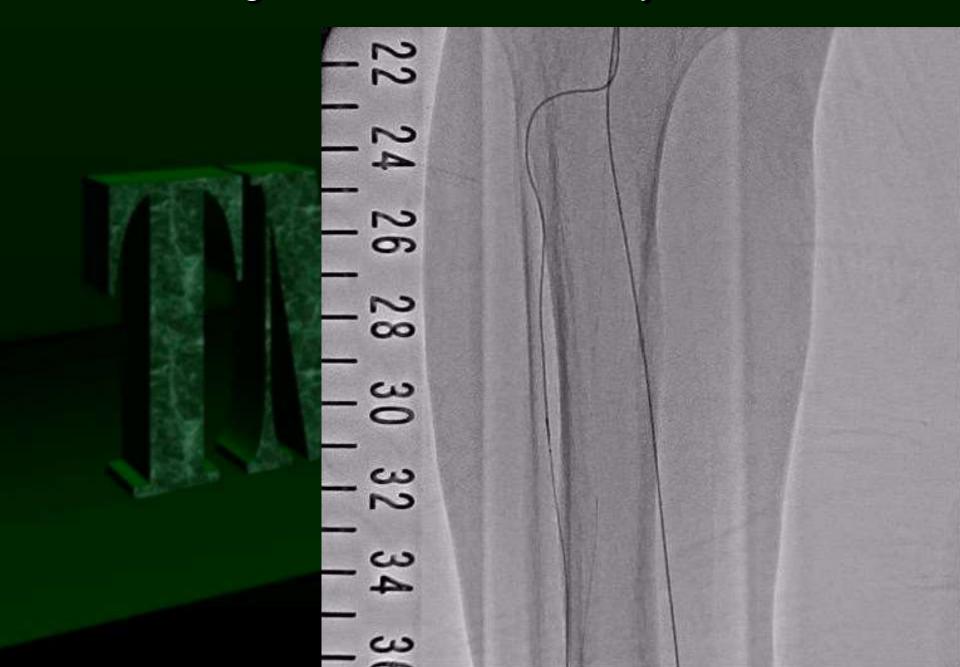
Antegrade system Astato XS9-12 Tapered 0.014" wire Tip weight is 12g Asahi Intecc with Corsair-PV Asahi Intecc Retrograde system Chevalier floppy

0.014" plastic jacket wire
Tip weight is 2g
Cordis Japan
with
Prominent

Tokai Medical Products



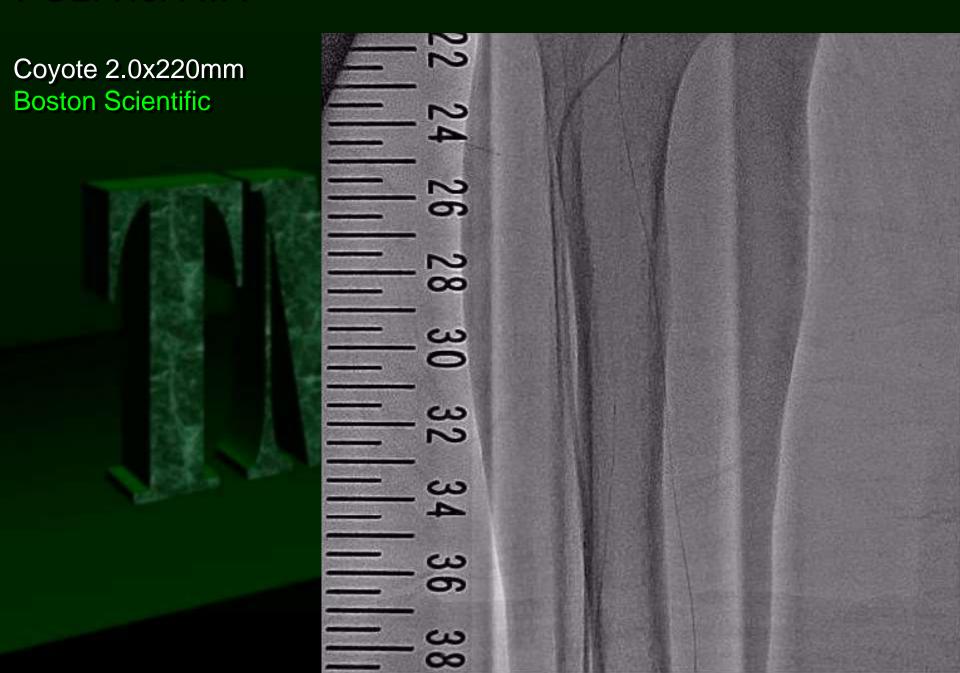
Advance antegrade micro-catheter beyond CTO



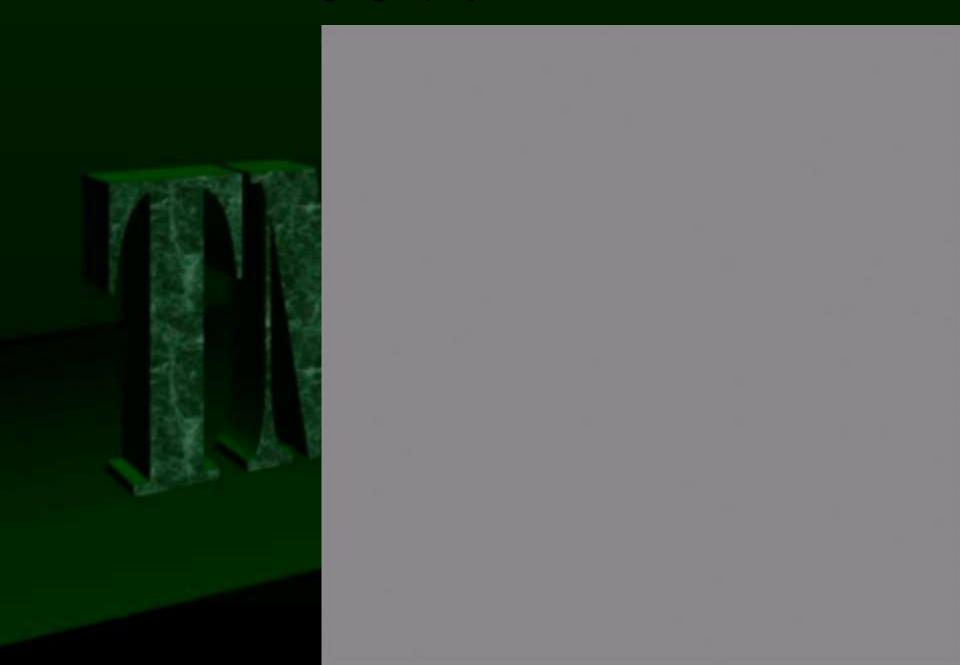
Remove the retrograde guidewire



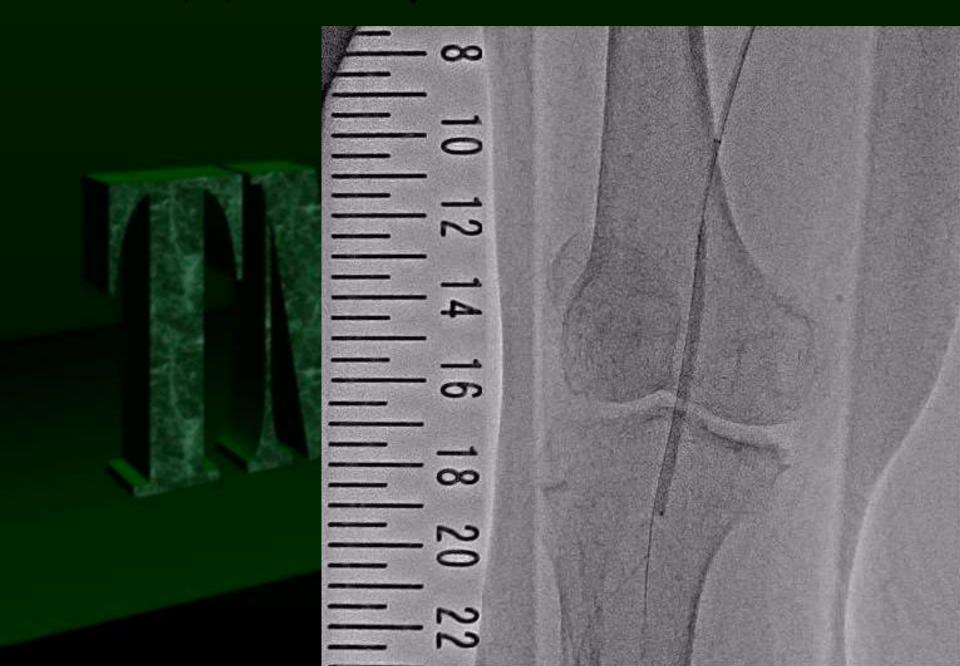
POBA for ATA



Carbon dioxide angiography after POBA



POBA for popliteal artery stenosis



Final angiography using contrast medium



Procedure summary

Final result: Complete revascularization of BTK 3V

Procedure time: 70 min

Contrast medium: 3cc

ABI: pre $0.34 \rightarrow post 0.93$

Take Home Message

In order to achieve successful revascularization on very complex BTK lesions, you have to combine several different techniques such as various distal puncture methods, trans-collateral or trans-pedal arch wiring, and guidewire rendezvous technique.

More options, you will have better outcome.