

Right Guide Wire for Collateral and CTO Lesion Crossing

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TCTAP2019

Most of collateral channel can be negotiated by SUOH 03

SION with microcatheter to select septal or collateral source of epicardial channel



Change to SUOH03

ASAHI
SUOH03
PTCA GUIDE WIRE

The significance of "03"



Evolutionary coronary guide wire from ASAHI INTECC Softest available tip load at 0.3 gf*

Our new soft as silk guide wire provides new opportunities to treat complex PCI cases

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However, every channel is not selectable...Why?...

Representative difficult collateral channels for negotiation are

- **Many small bifurcations in septal channel**
- **Invisible connection in septal channel**
- **Tortuous connection in epicardial channel**

For reduction of channel negotiation failure, identification of channel morphology is important.

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What is the best wire for channel negotiation?

There is no answer in real practice.

- **SUOH03 can cover most of the situations.**
- **However, SUOH03 is not good at selection of bifurcation**
- **SION is better to select bifurcation**
- **XT-R can go in small channel but make perforation easily.**

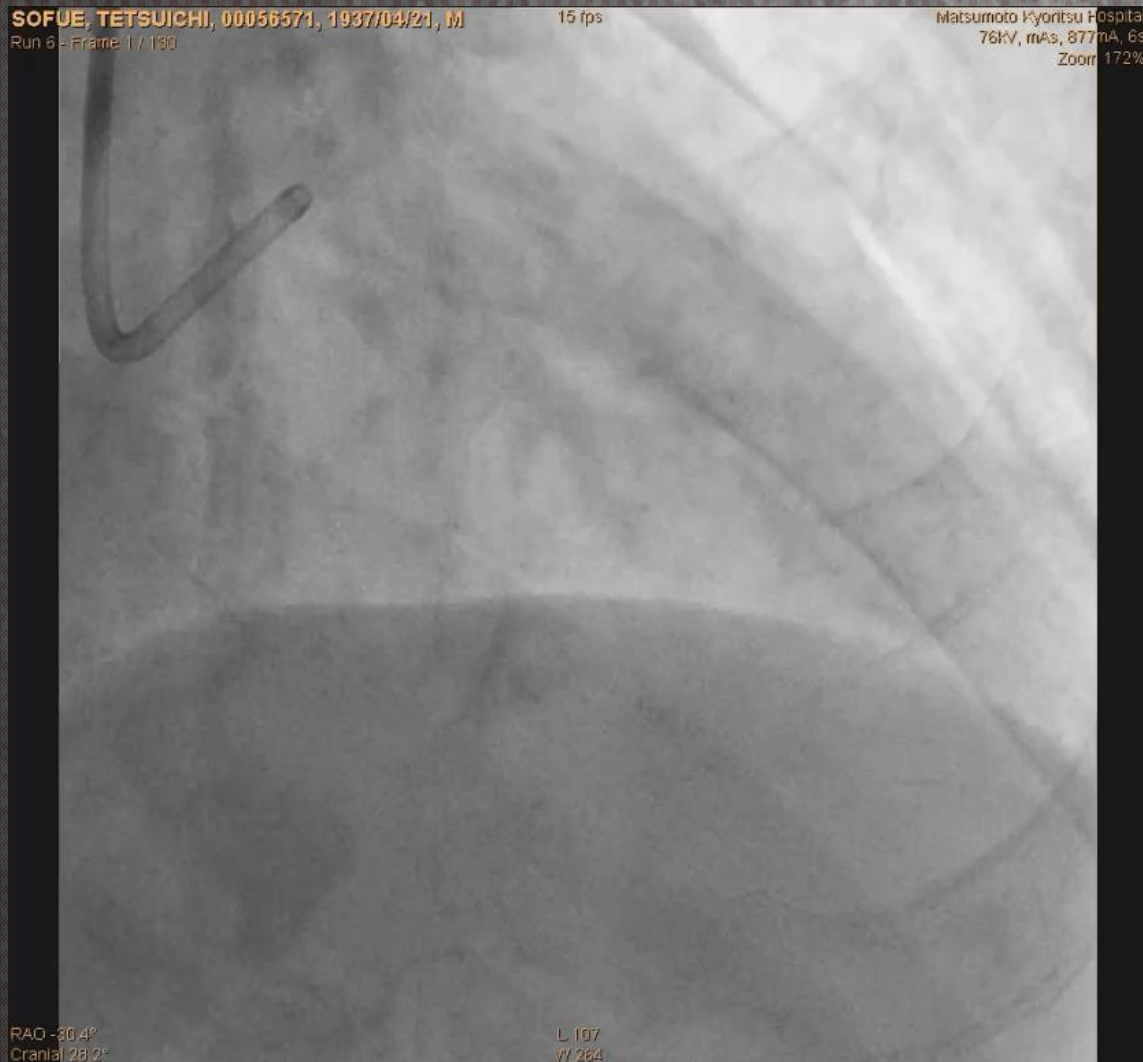
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How to Negotiate Collateral Channel?

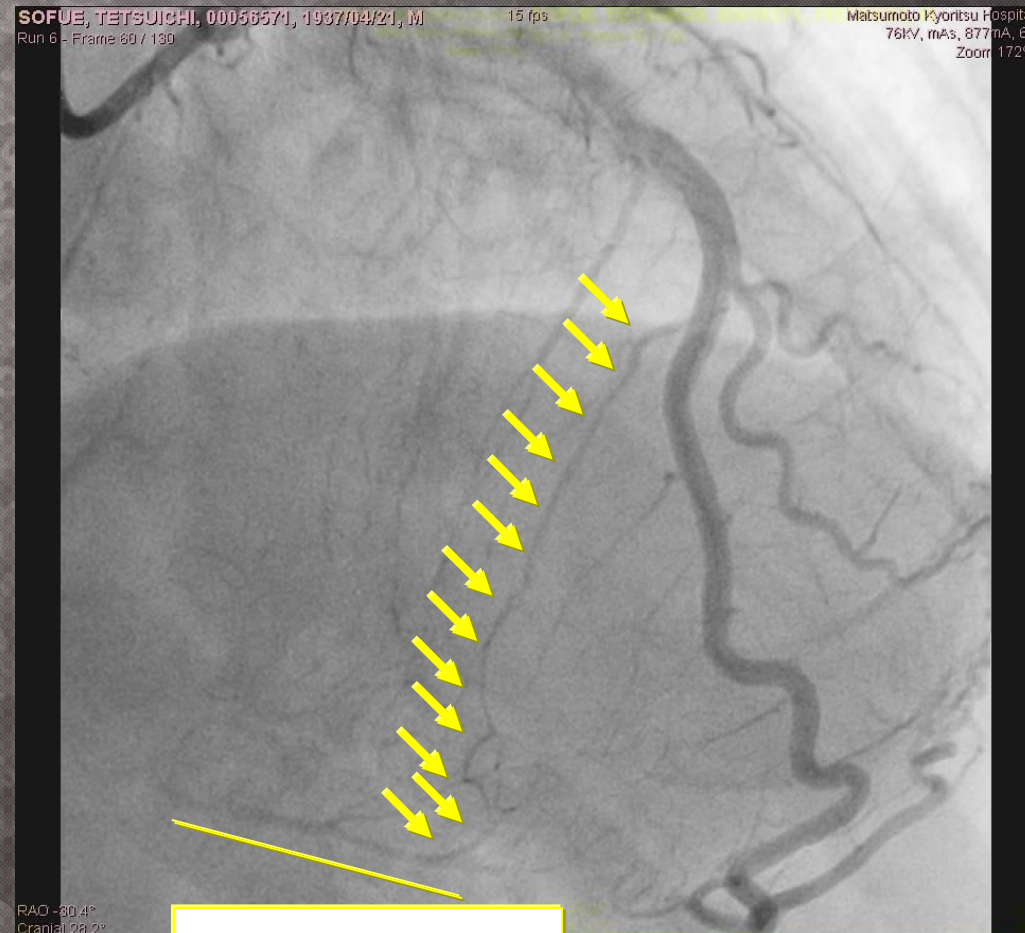
- Before wire selection, understanding of channel morphology is very important to choose appropriate GW and make the best tip curve of GW.
- For understanding of channel morphology, tip injection from multi-projection is mandatory.

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Routine projections for septal channel negotiation RAO CAU and RAO CRA



RAO CRA



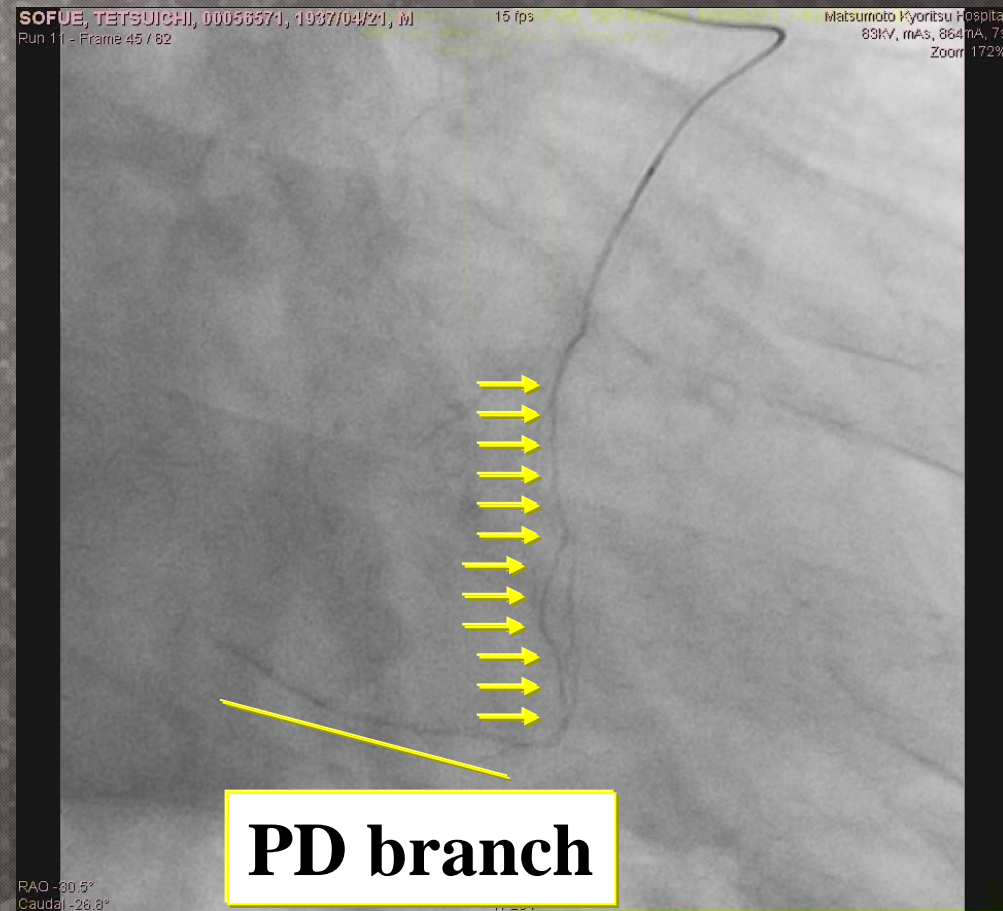
PD branch

Routine projections for septal channel negotiation

RAO CAU and RAO CRA

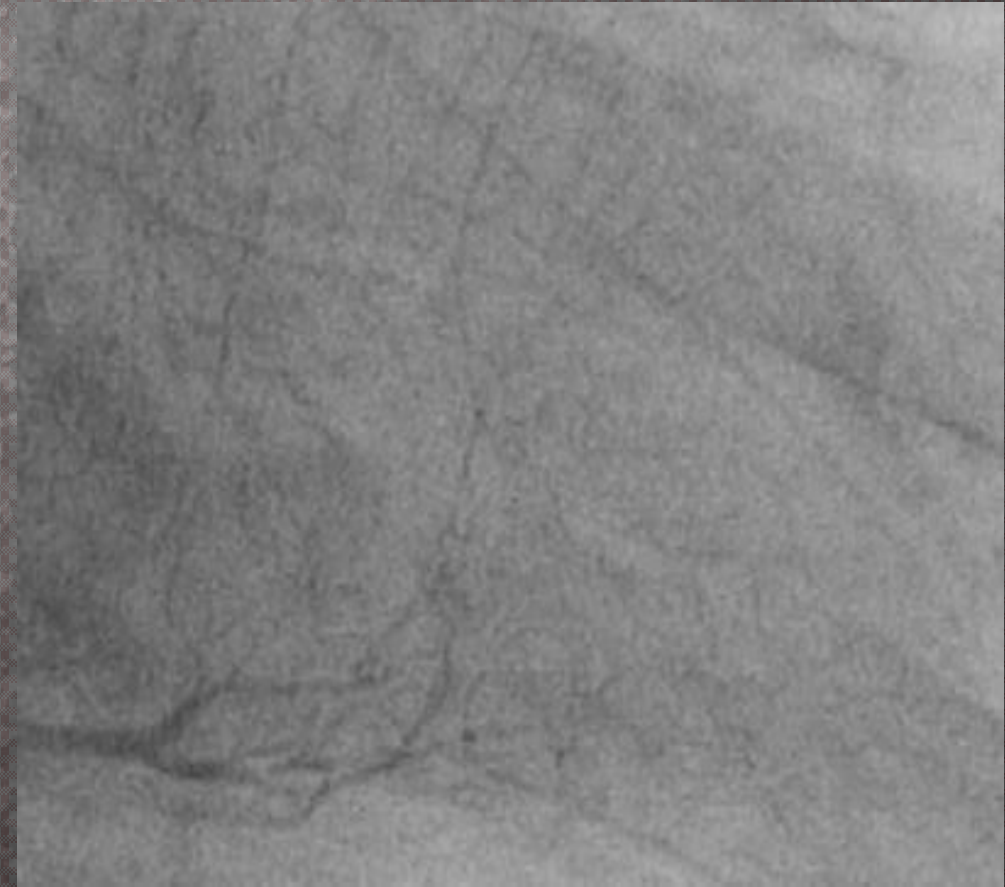
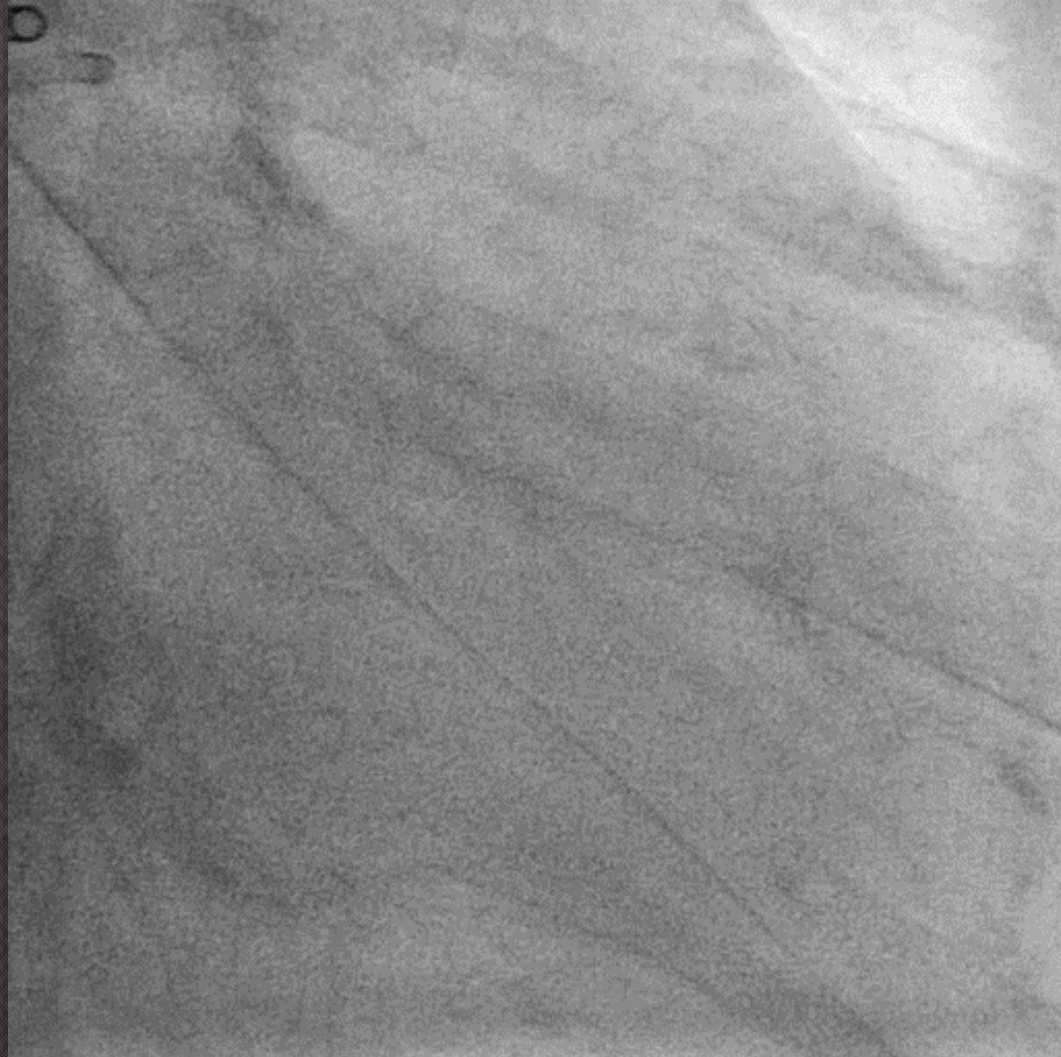


RAO CRA

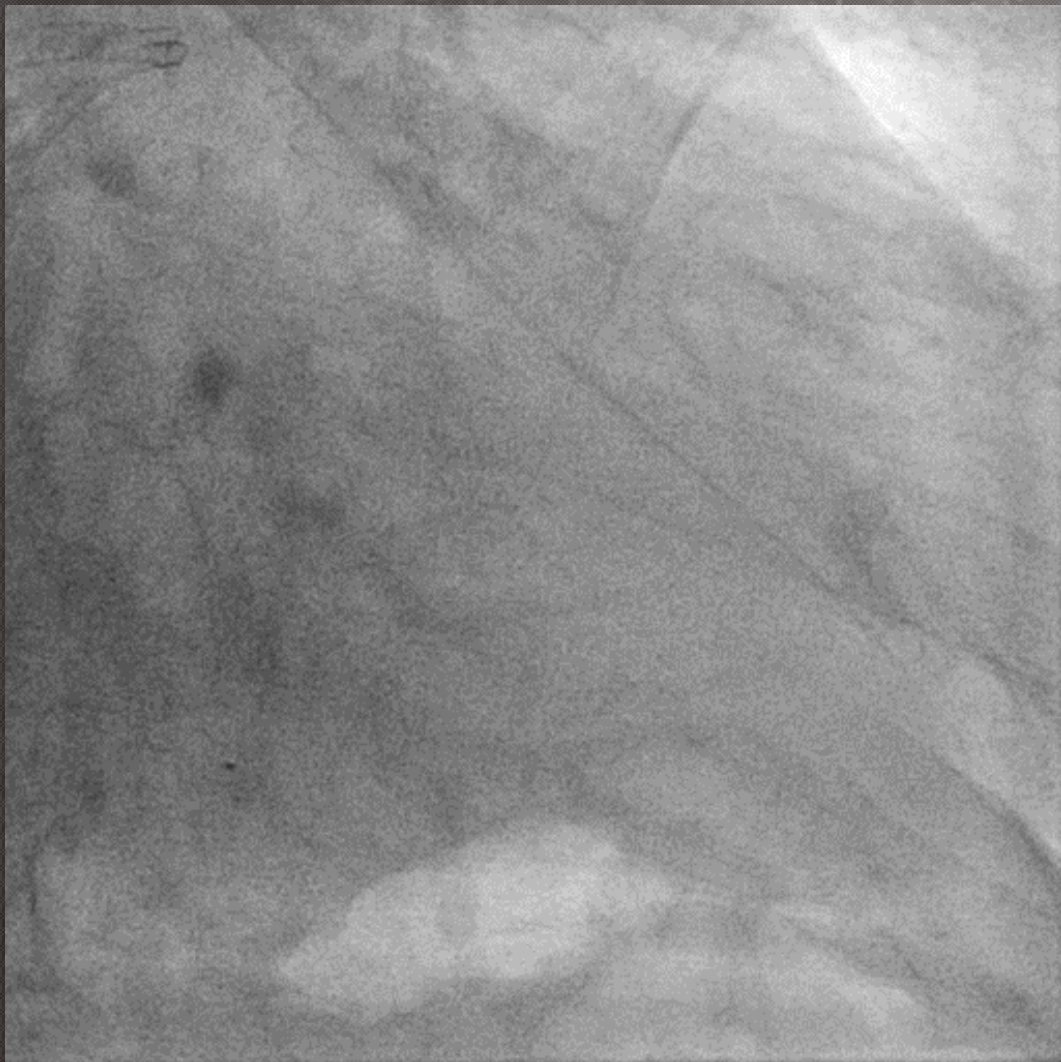


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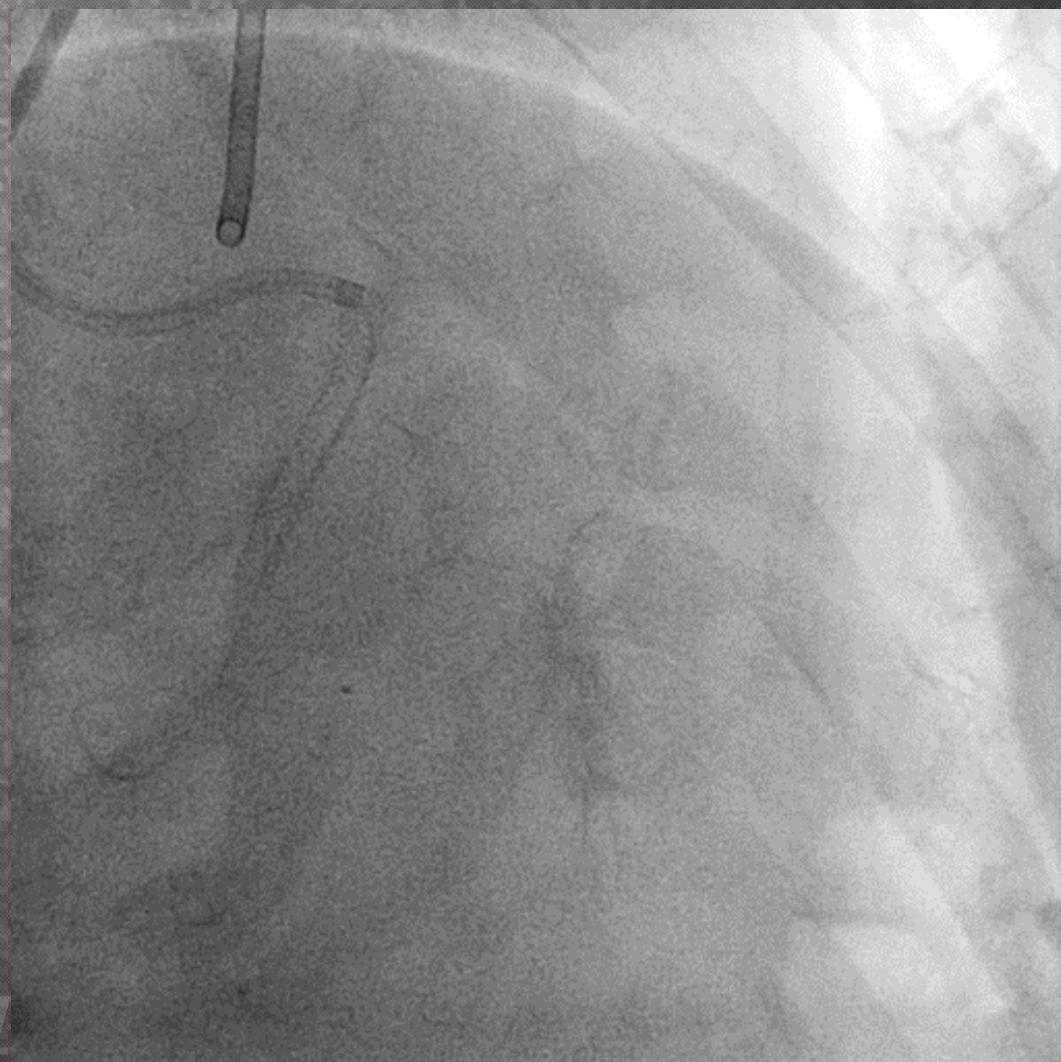
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to identify channel morphology**



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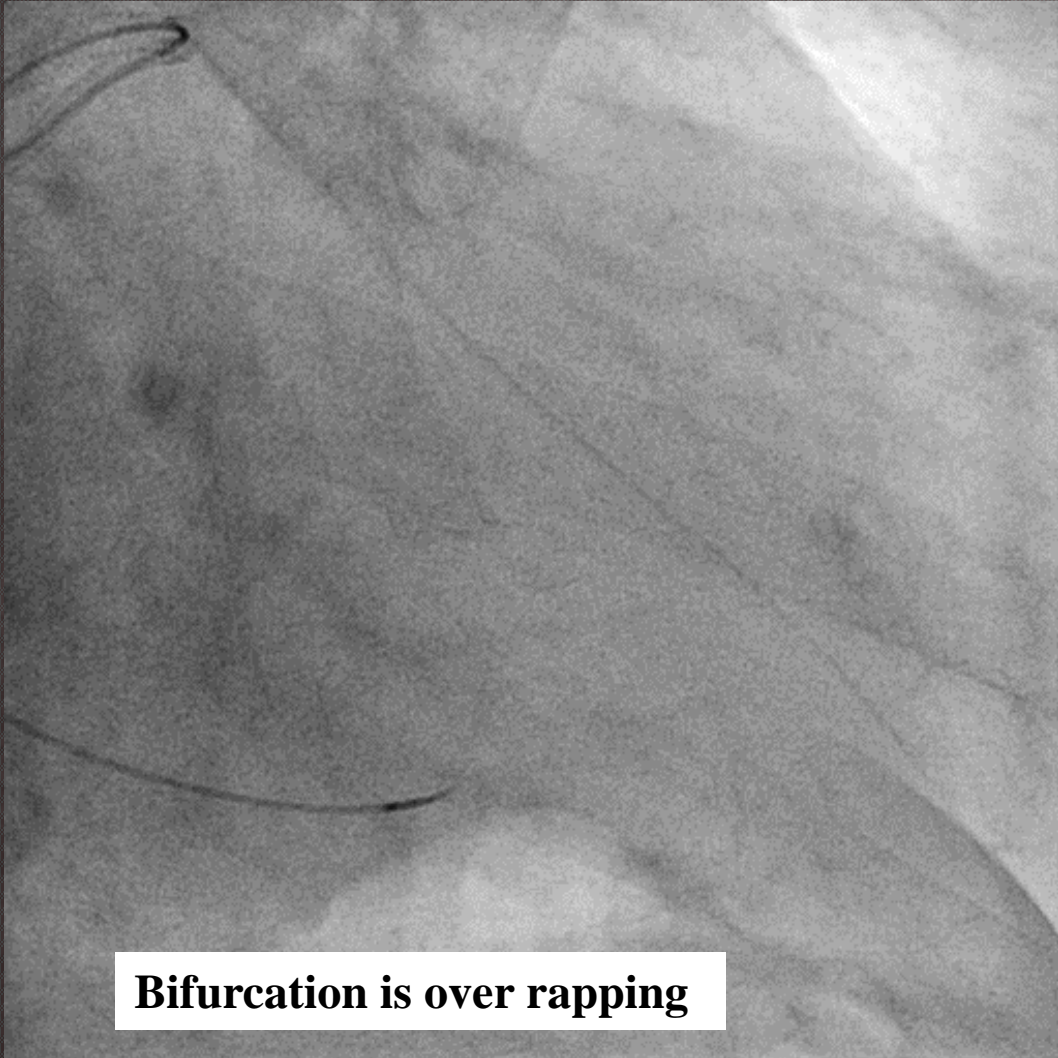


RAO CAU



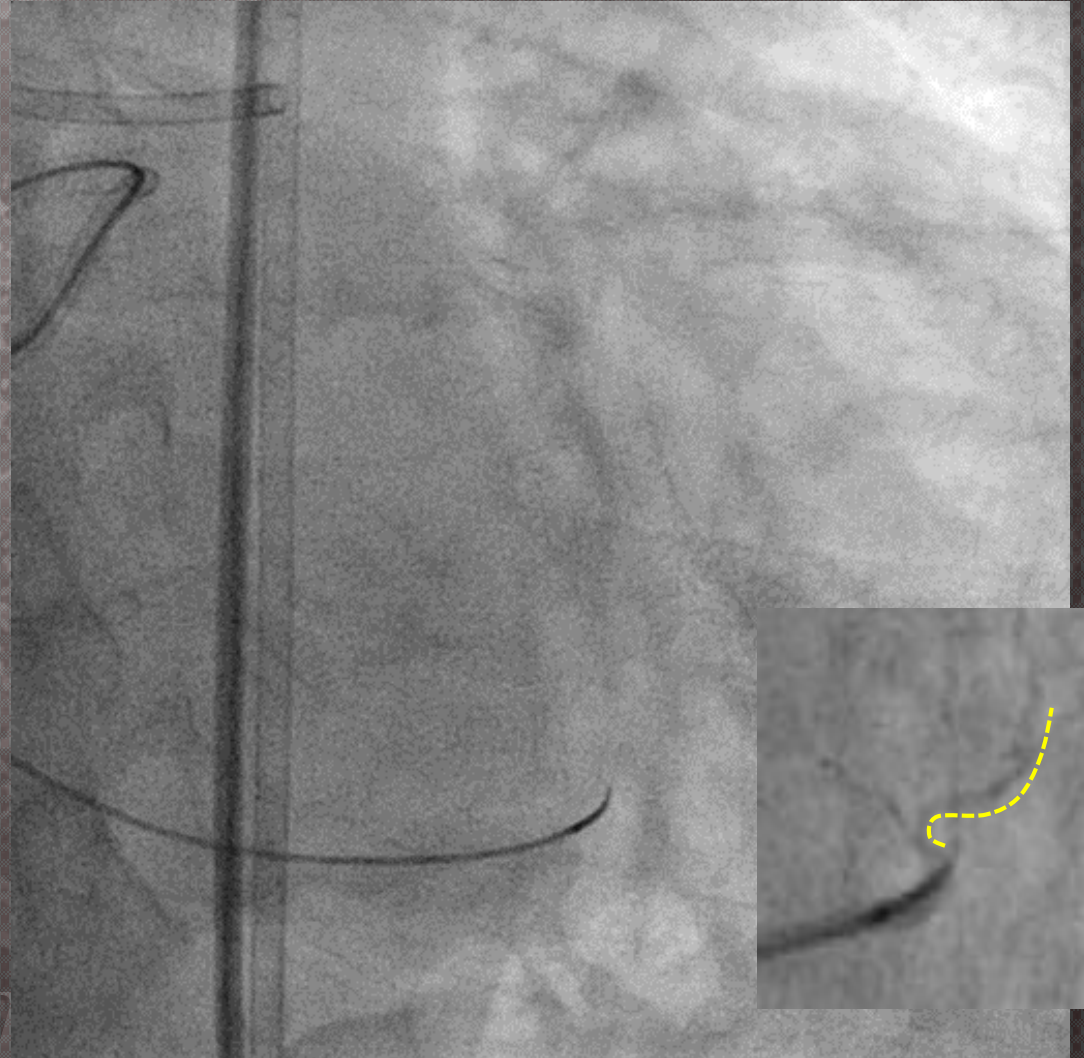
RAO CRA

Sometime, we need the other projection to identify channel morphology



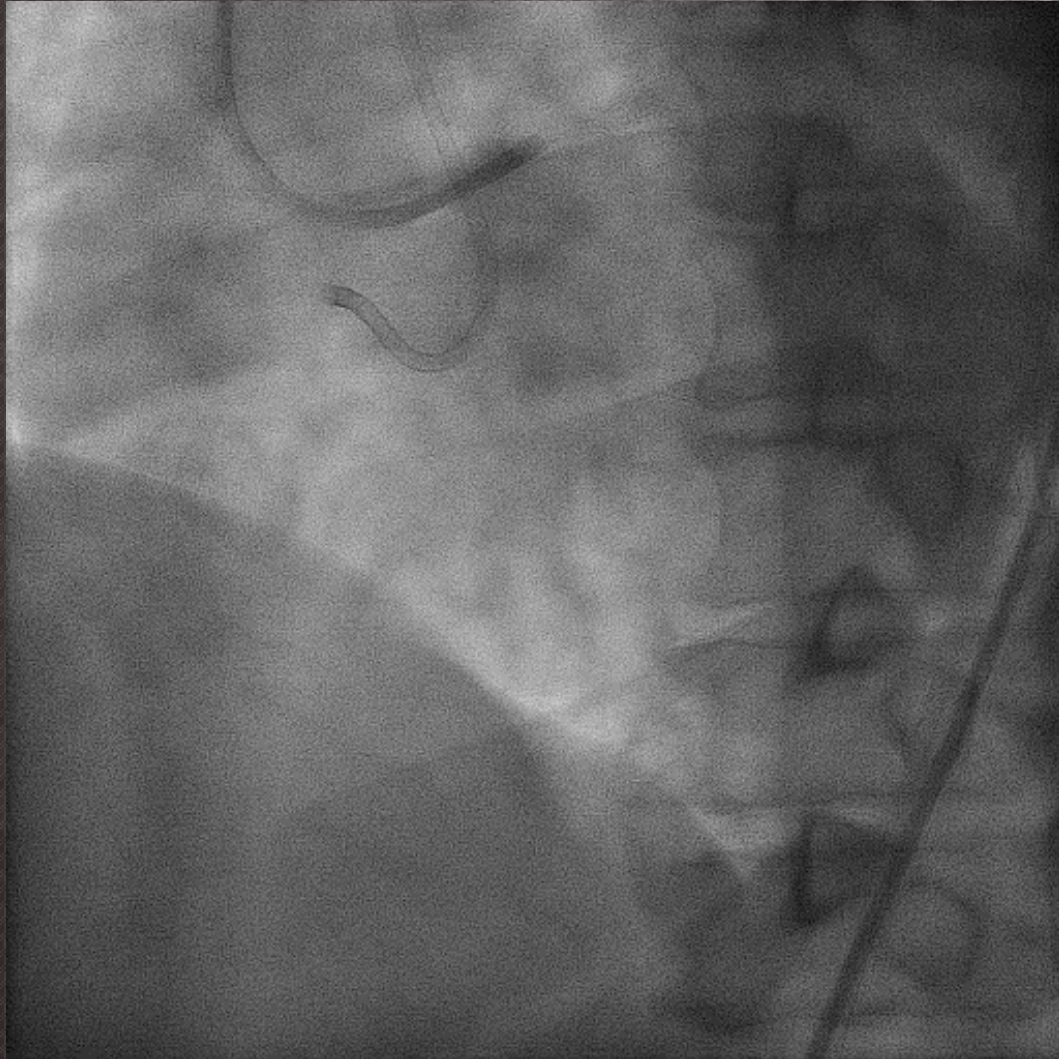
Bifurcation is over rapping

RAO30 CAU30



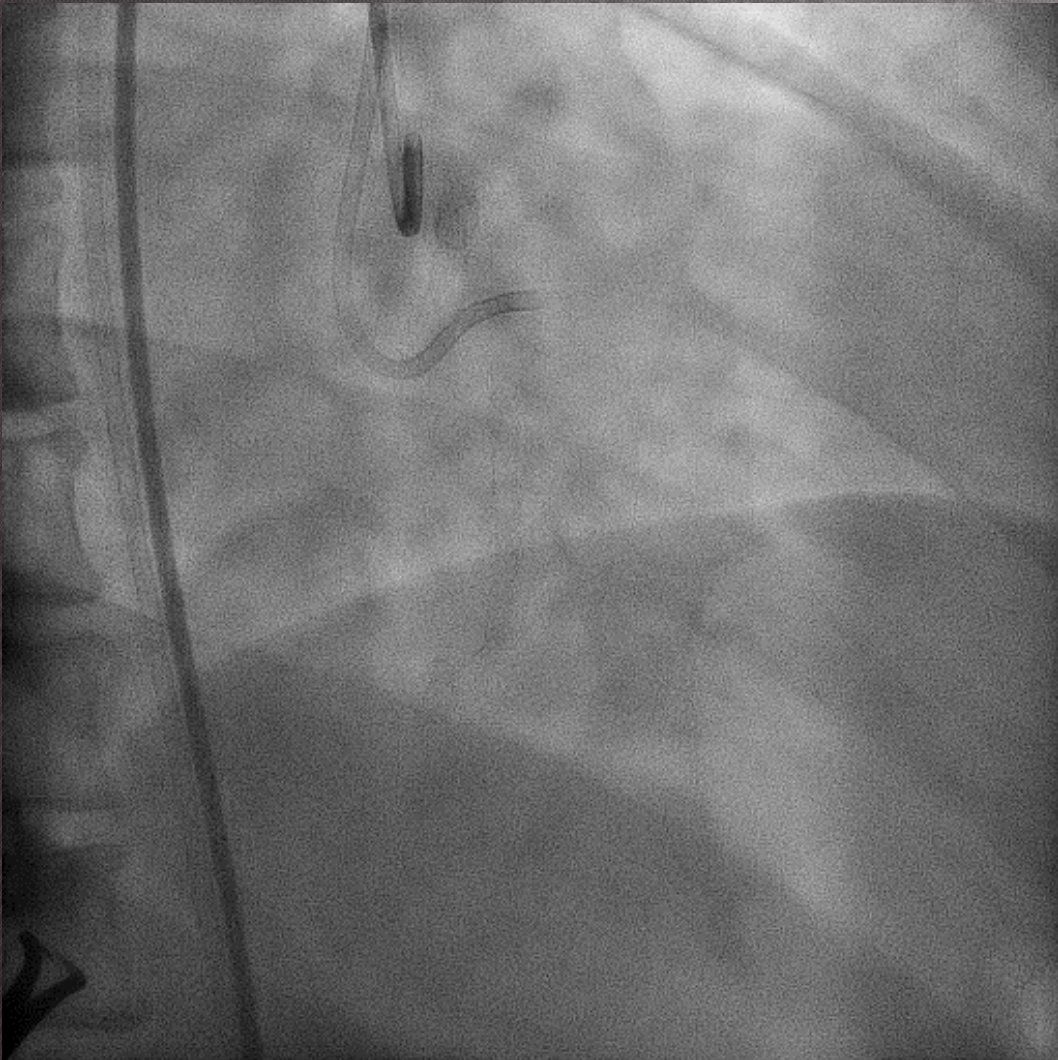
CAU 30

If you see the thick black contrast in collateral channel...



ICCA P2019

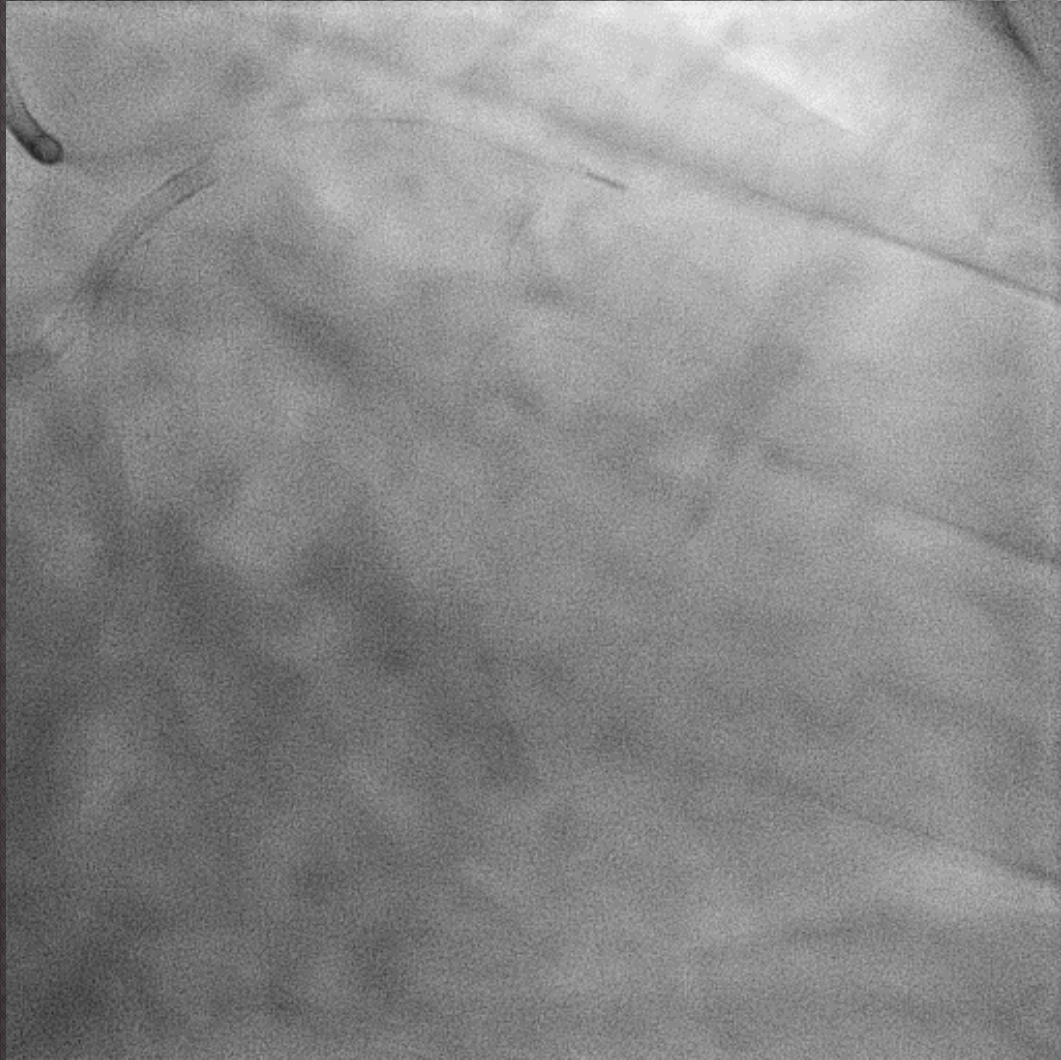
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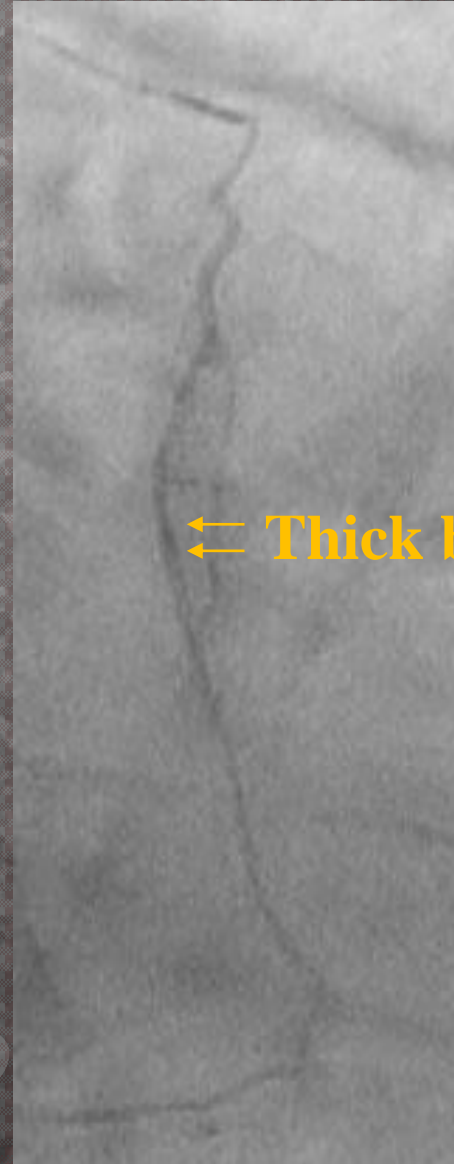
RAO CRA

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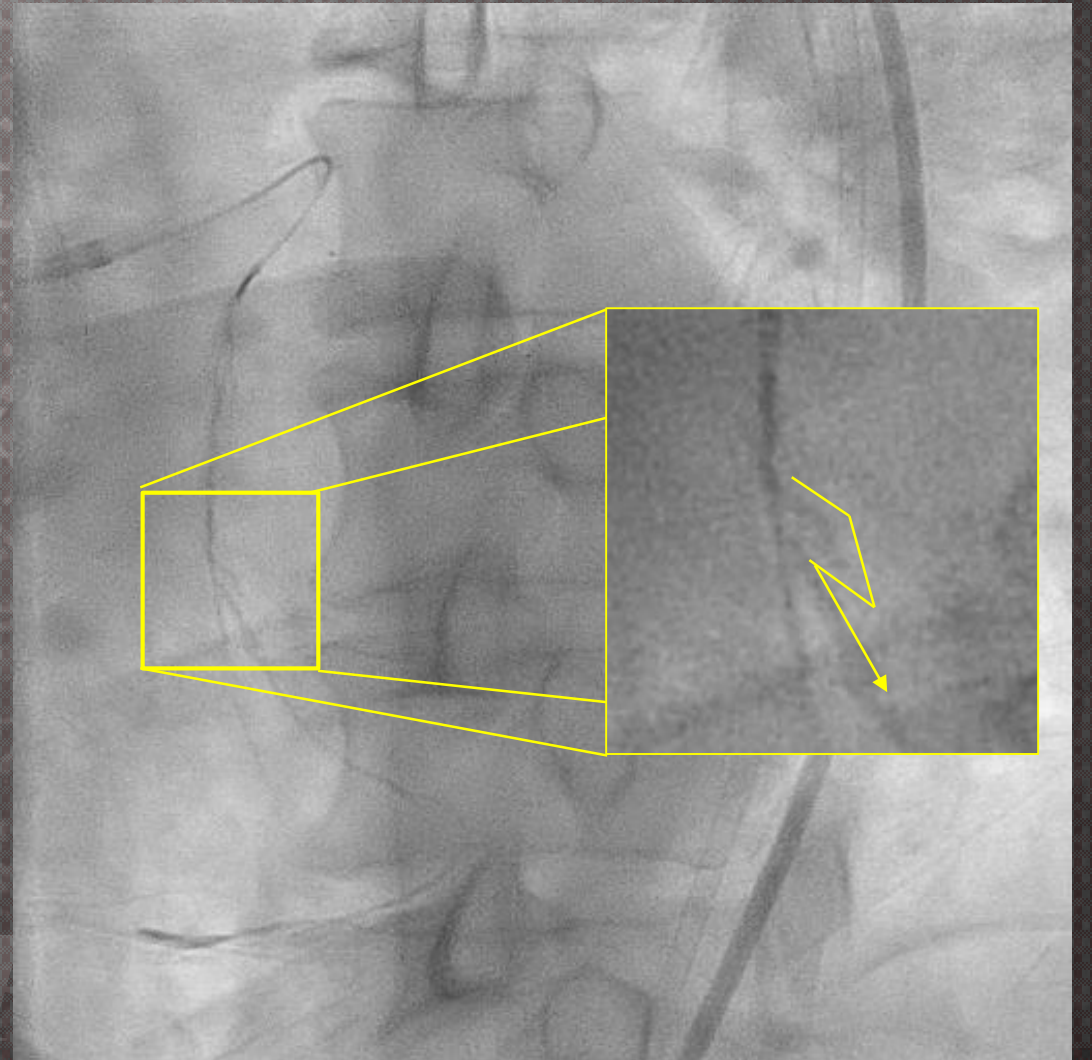
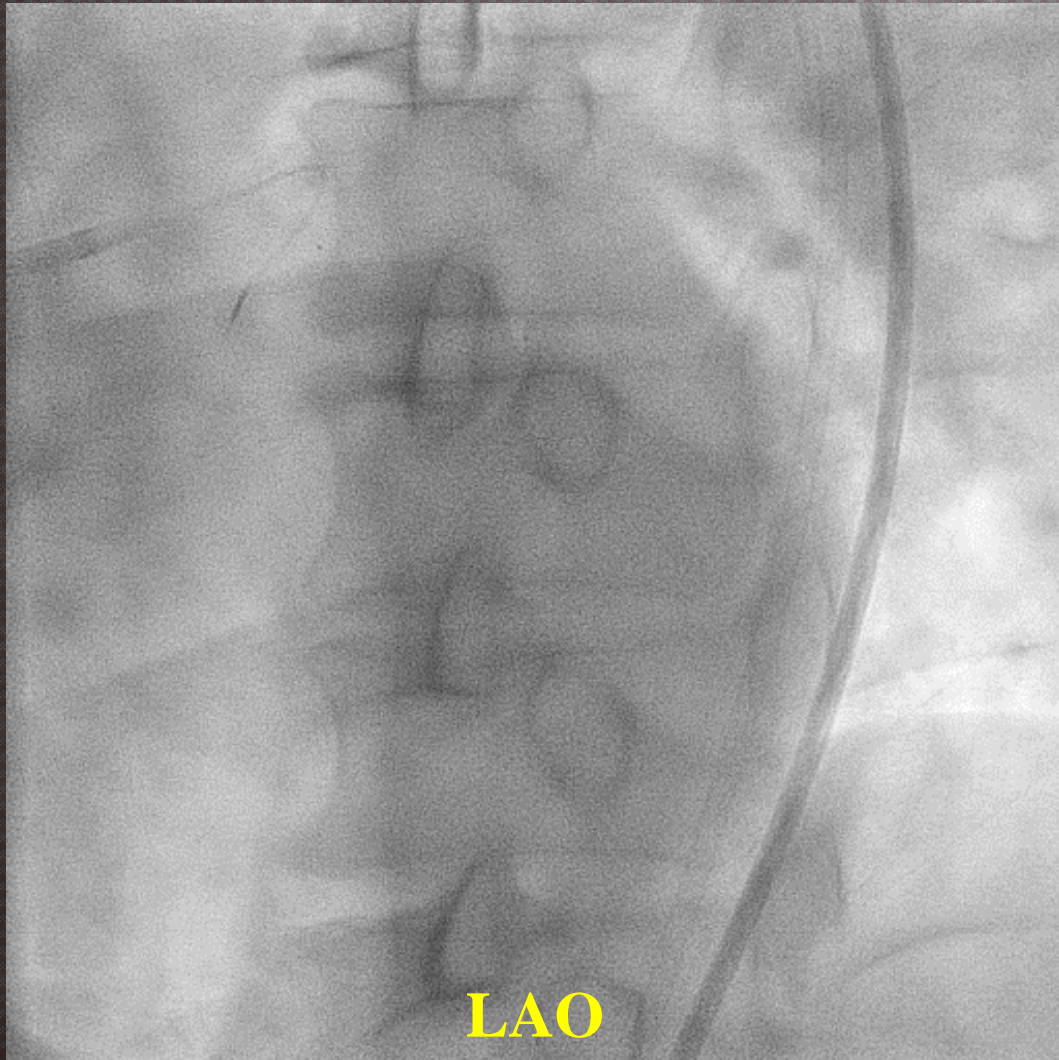
RAO CAU



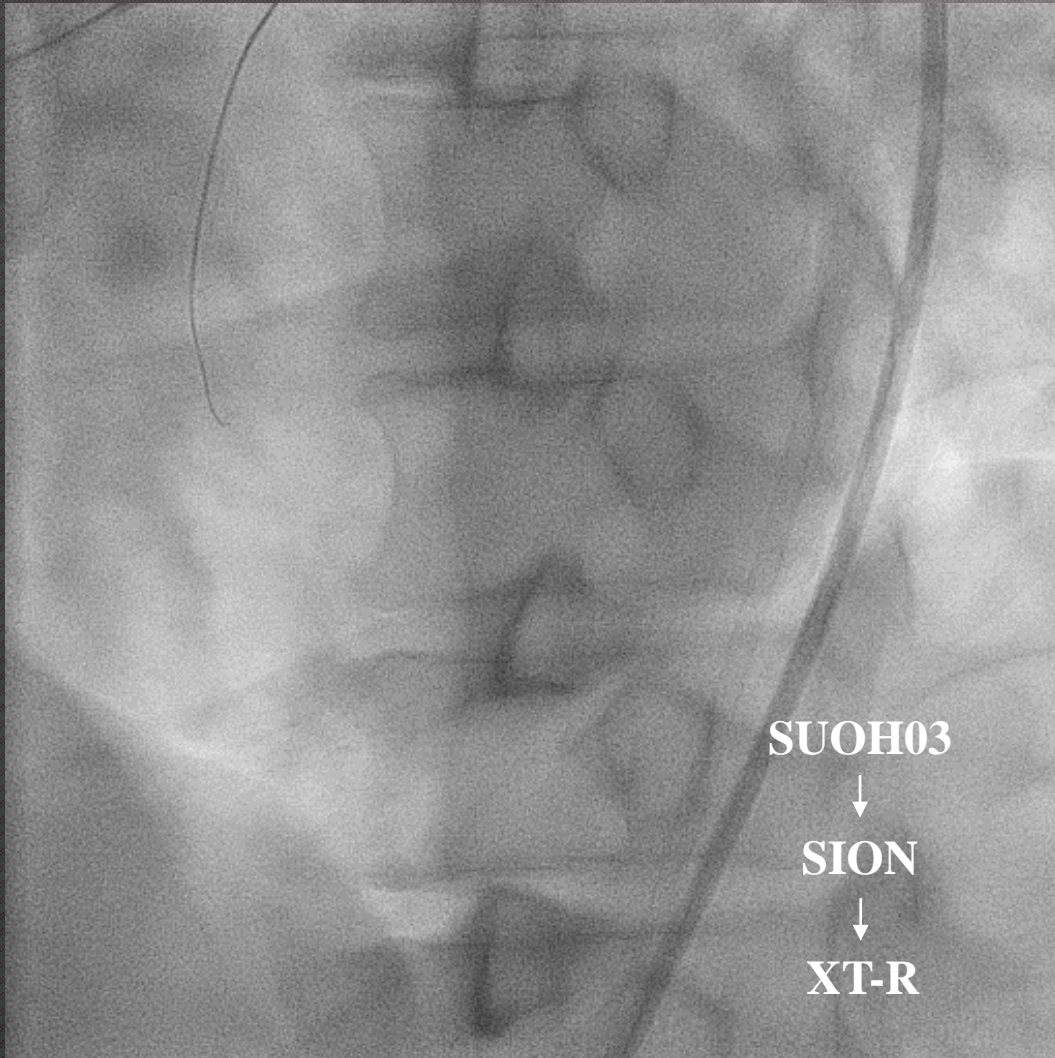
⇔ Thick black point

ICIA P2

**If you see the thick black contrast in collateral channel...
Channel may has a bending point.**

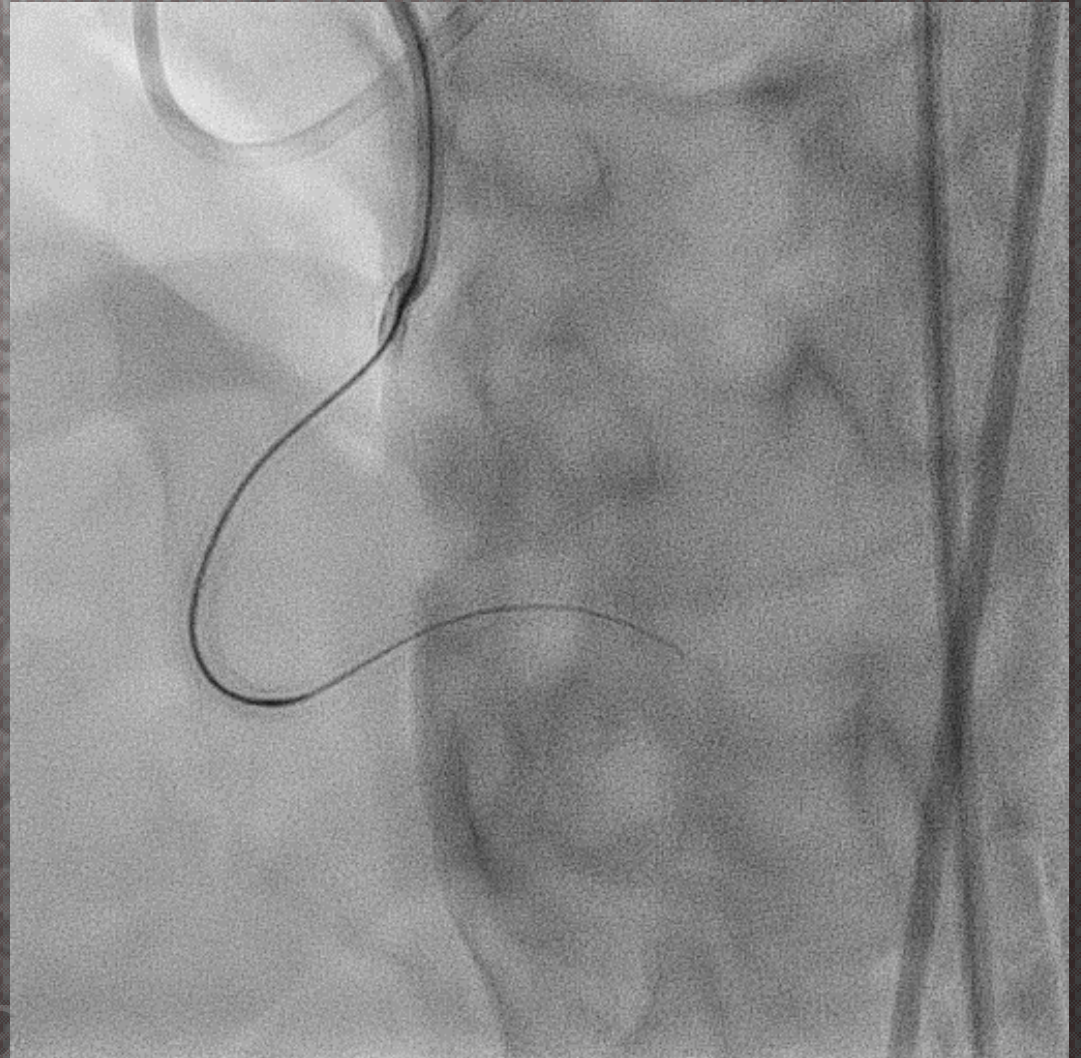
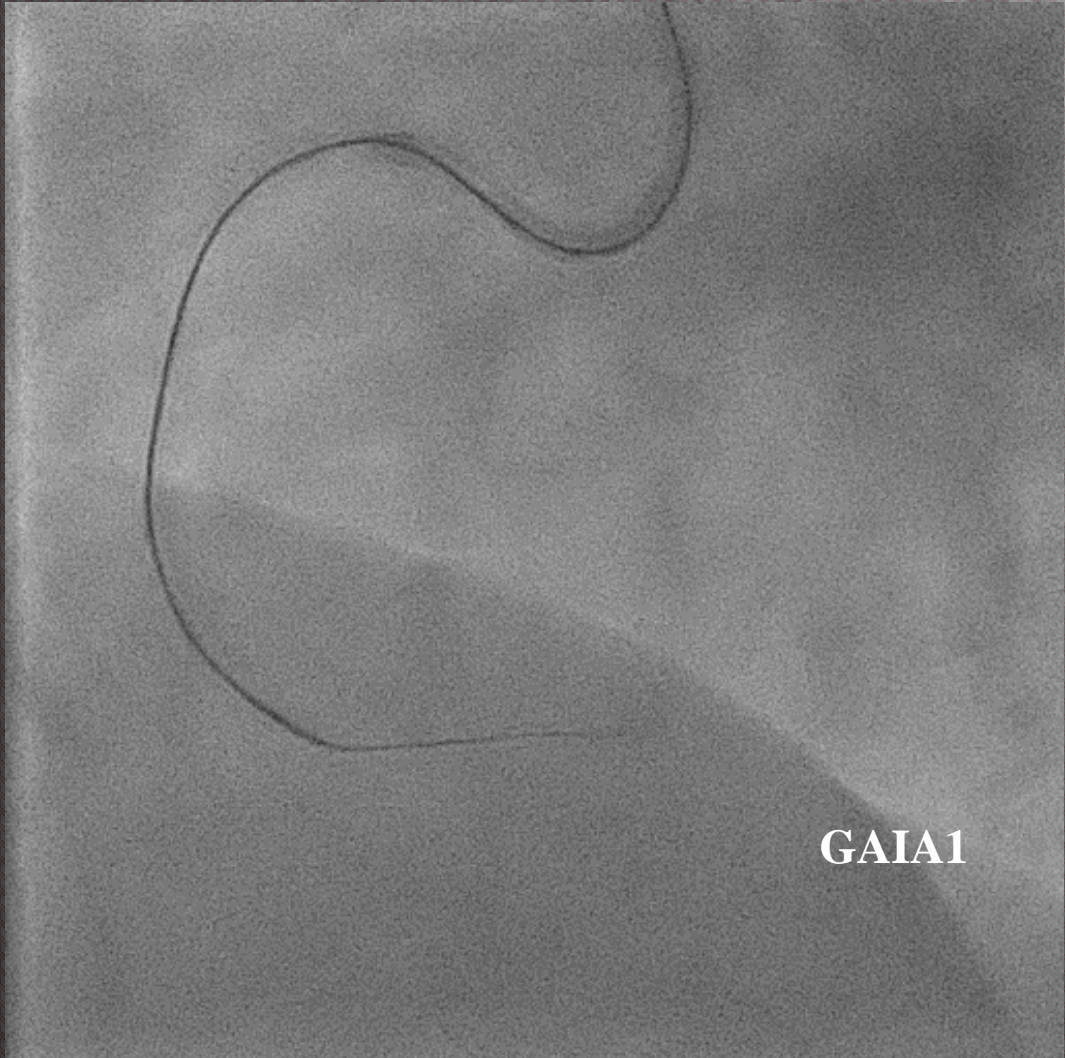


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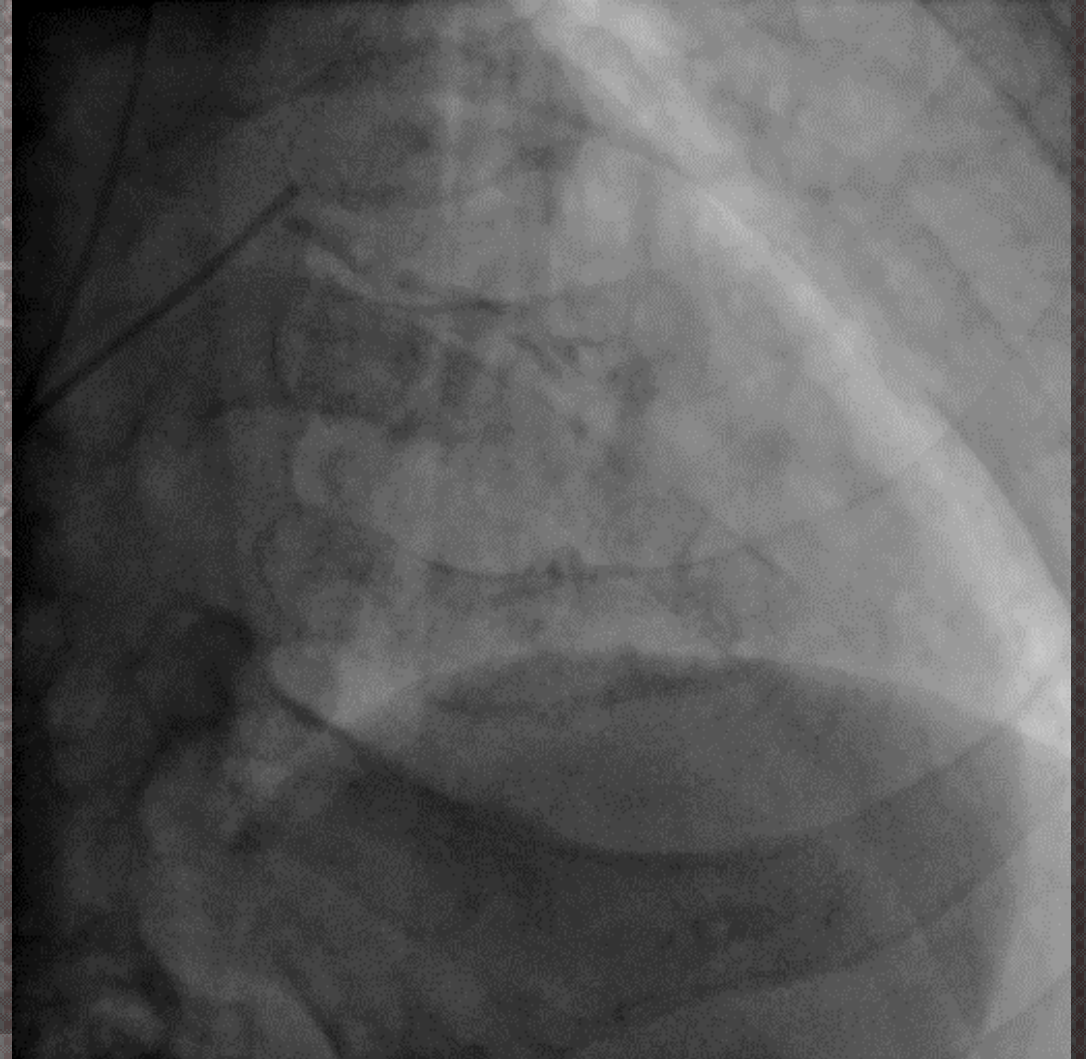
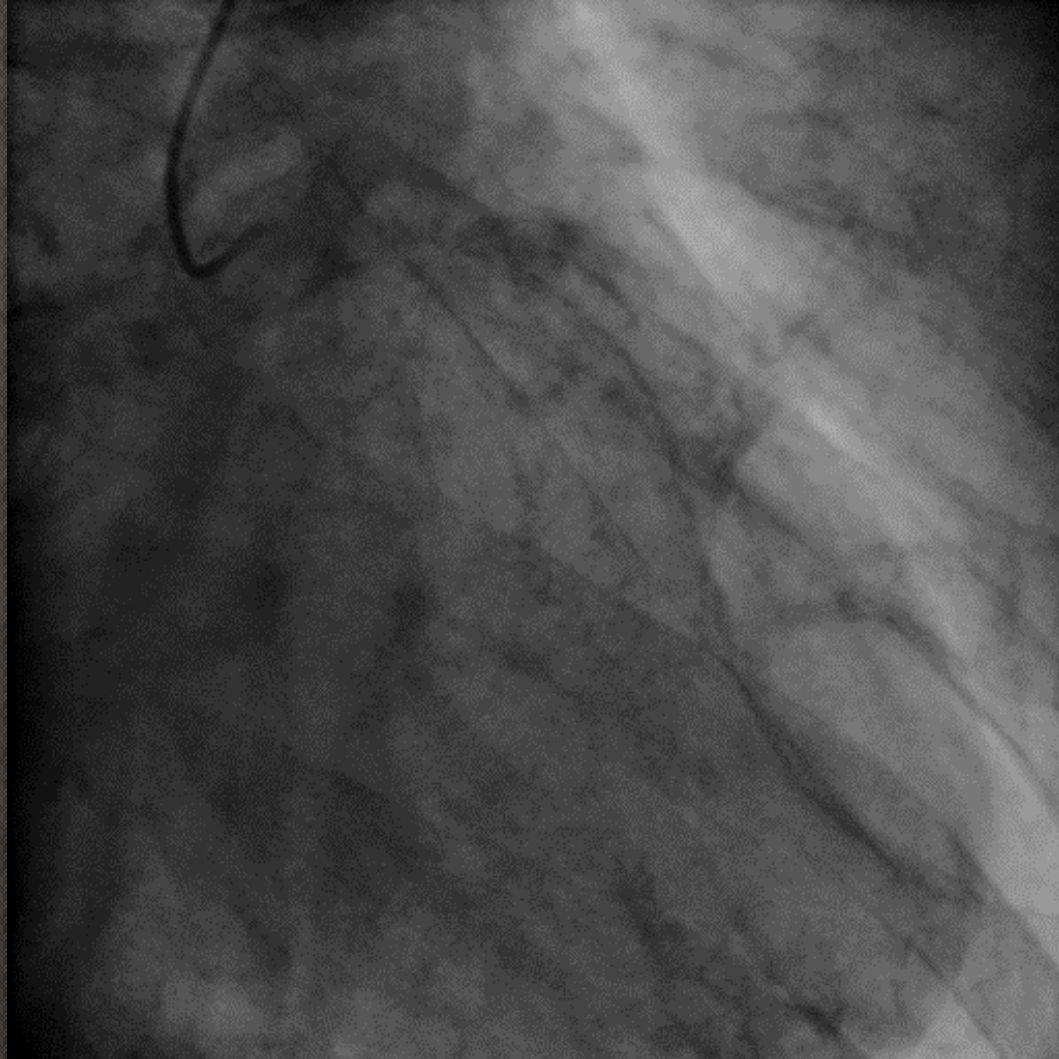


- The sign of difficulty for negotiation
- Checking channel from multi-projections is recommended

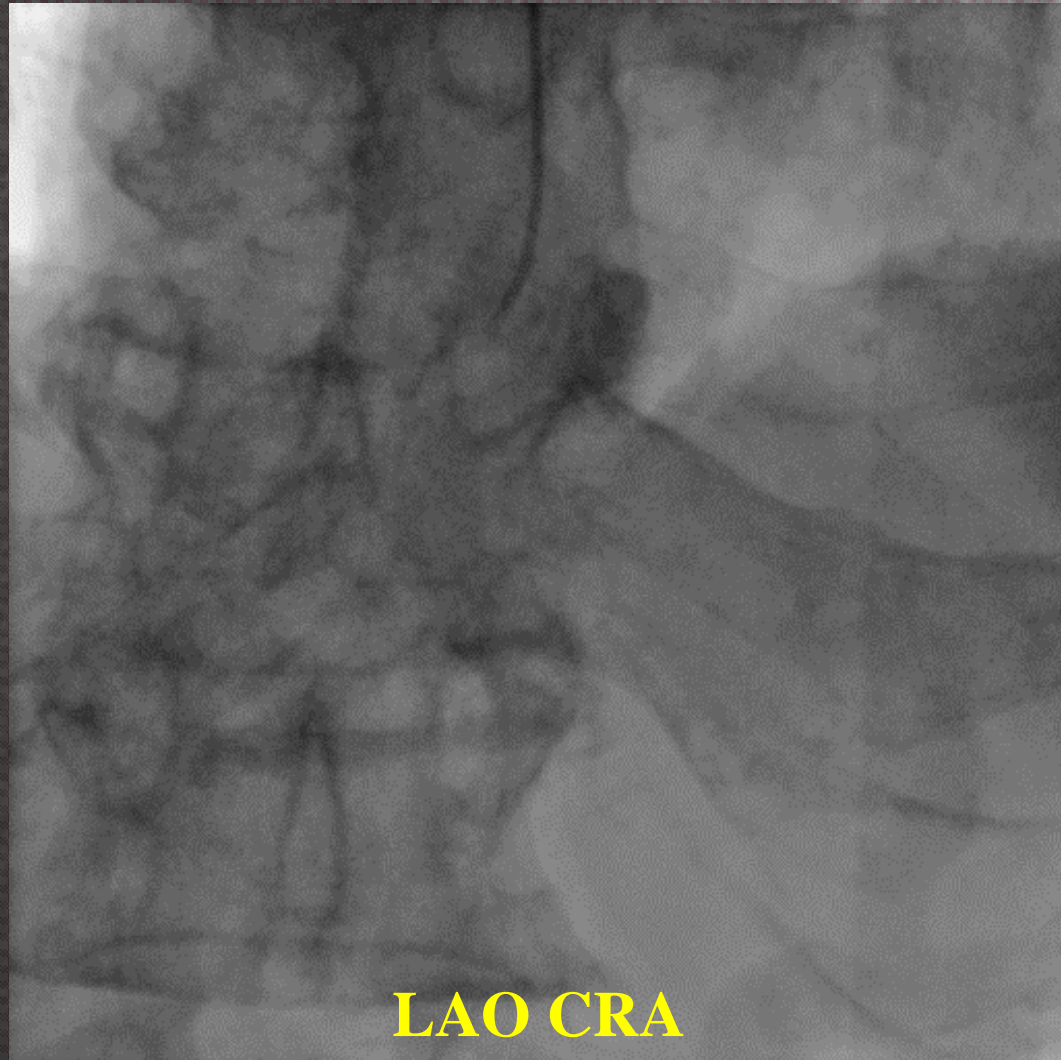
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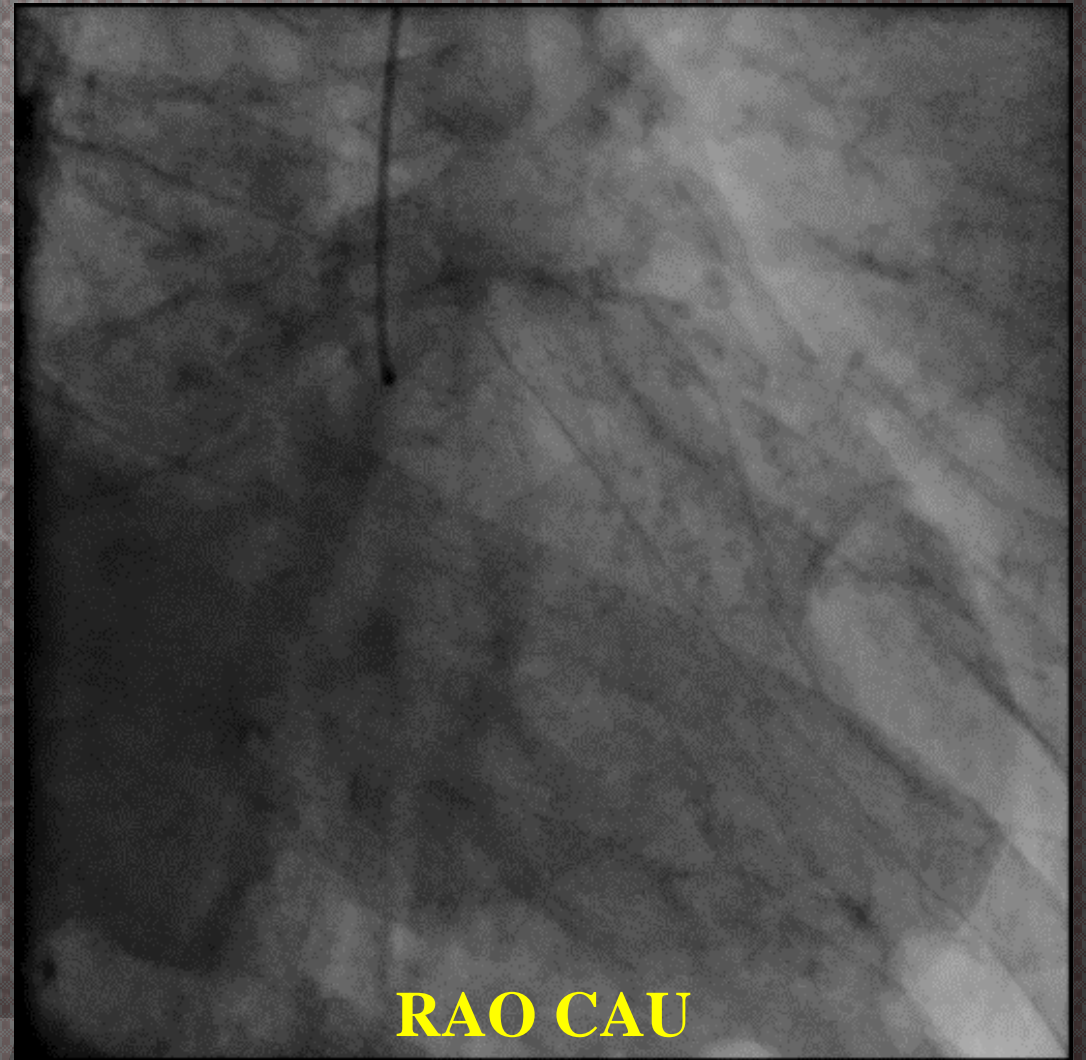
If you see ups and downs in PD branch...



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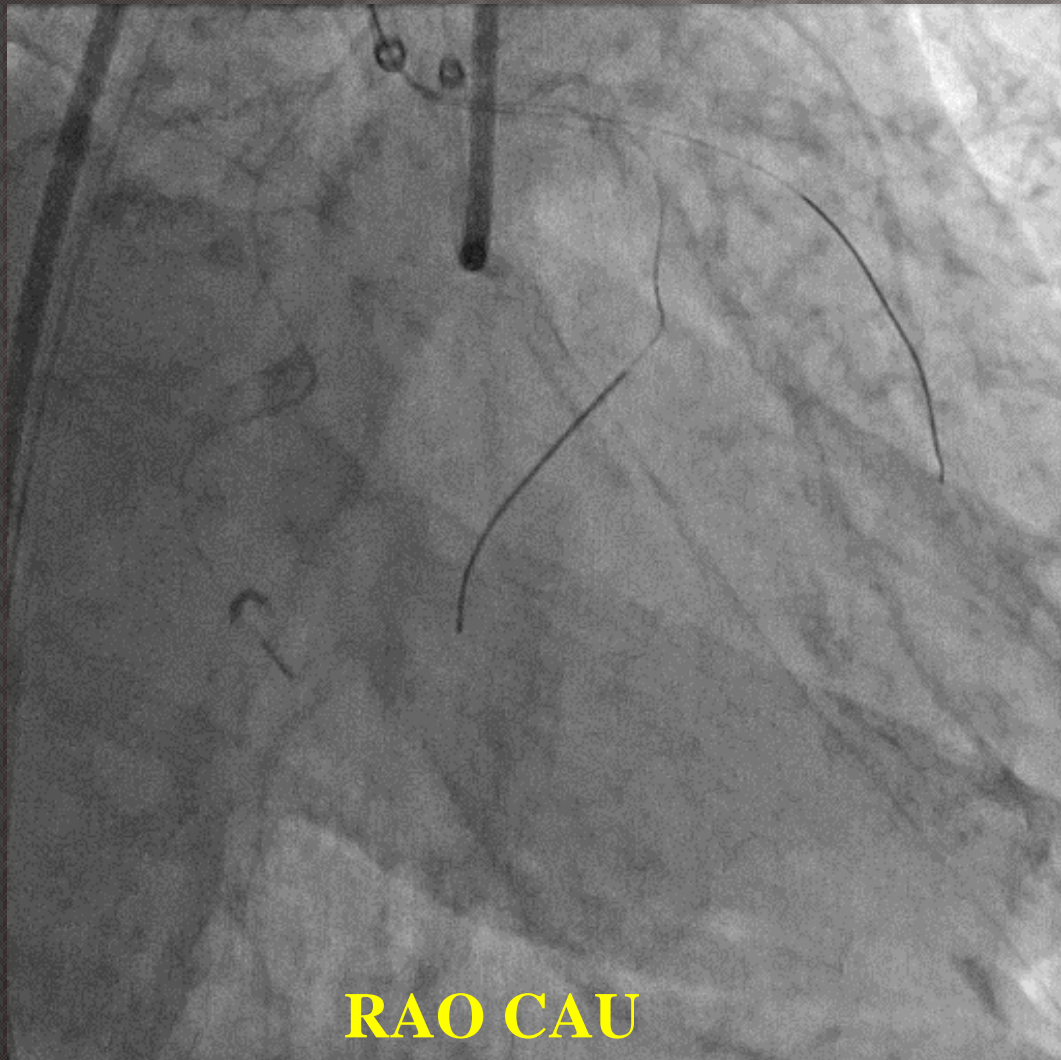


LAO CRA



RAO CAU

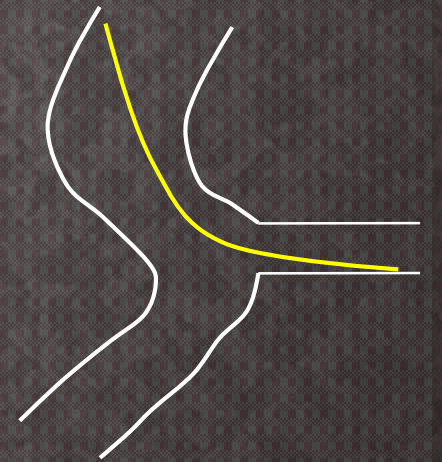
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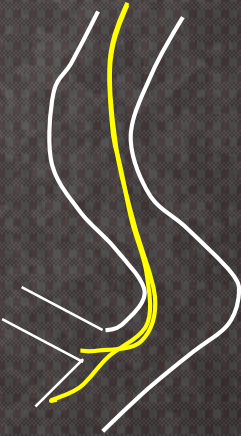
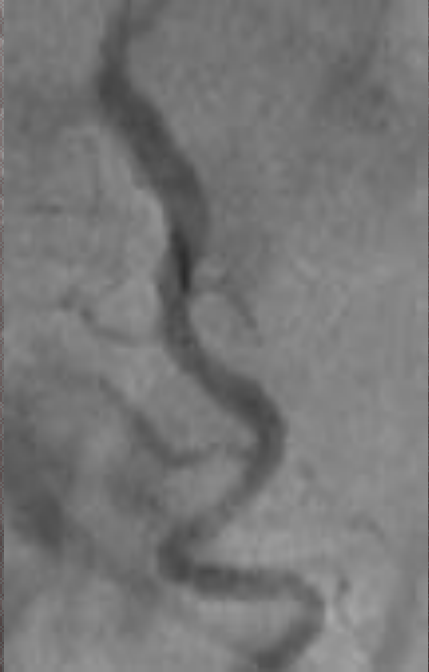
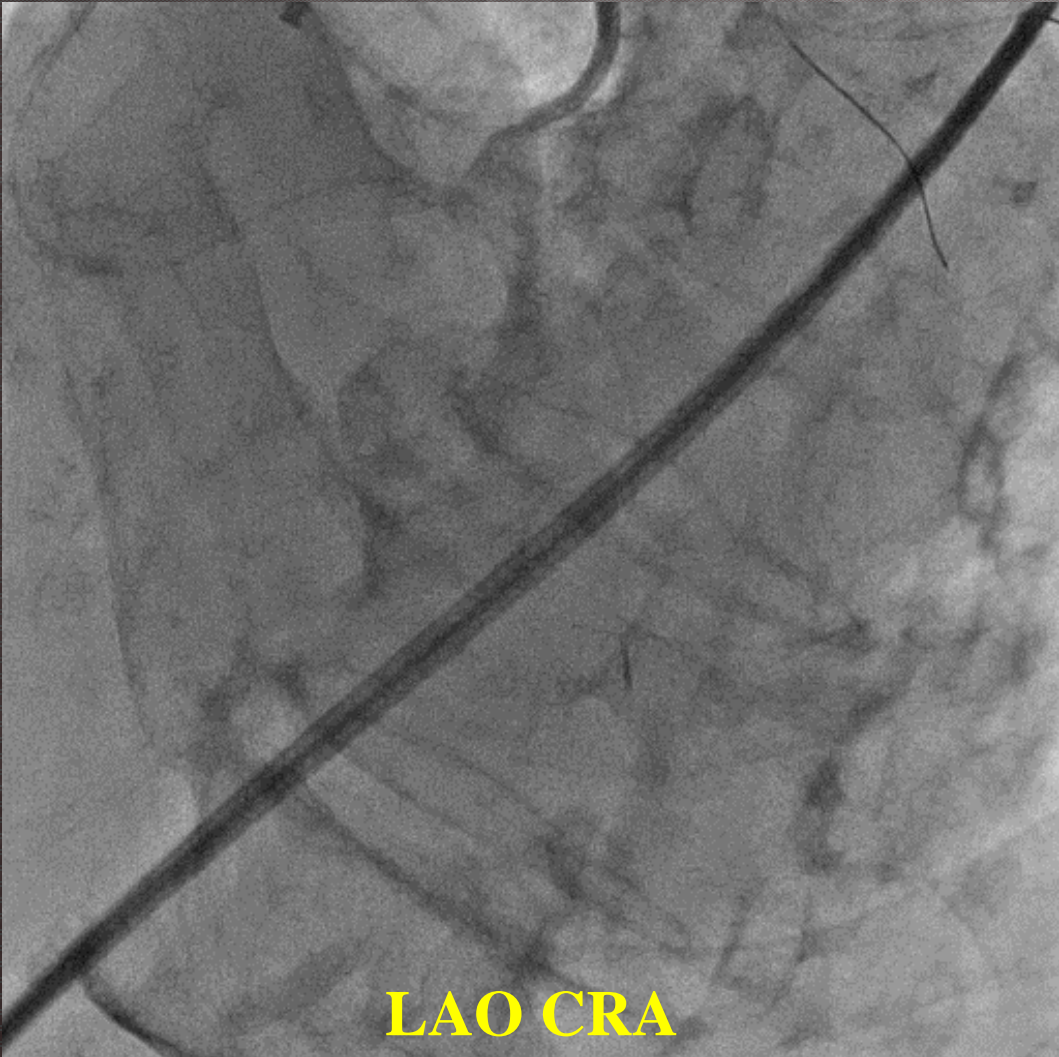
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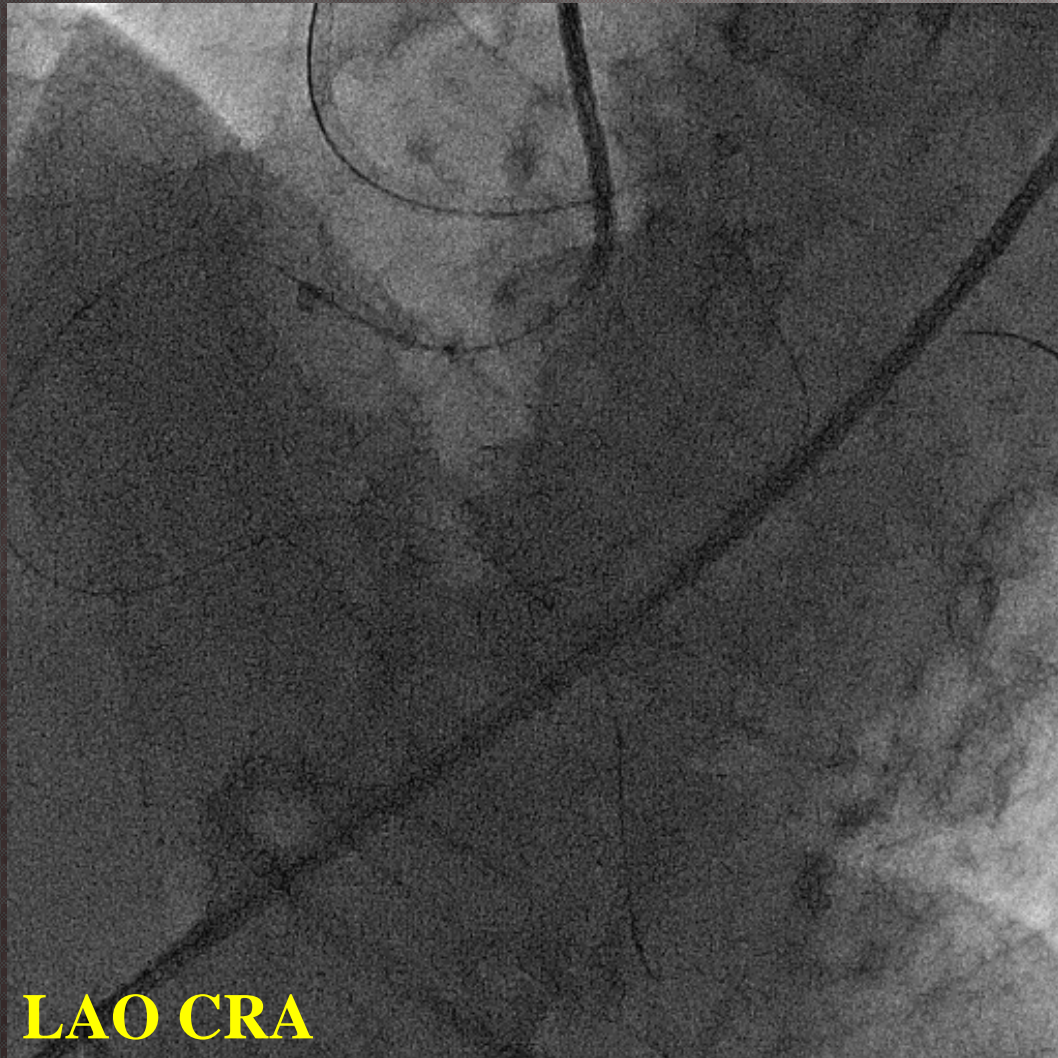
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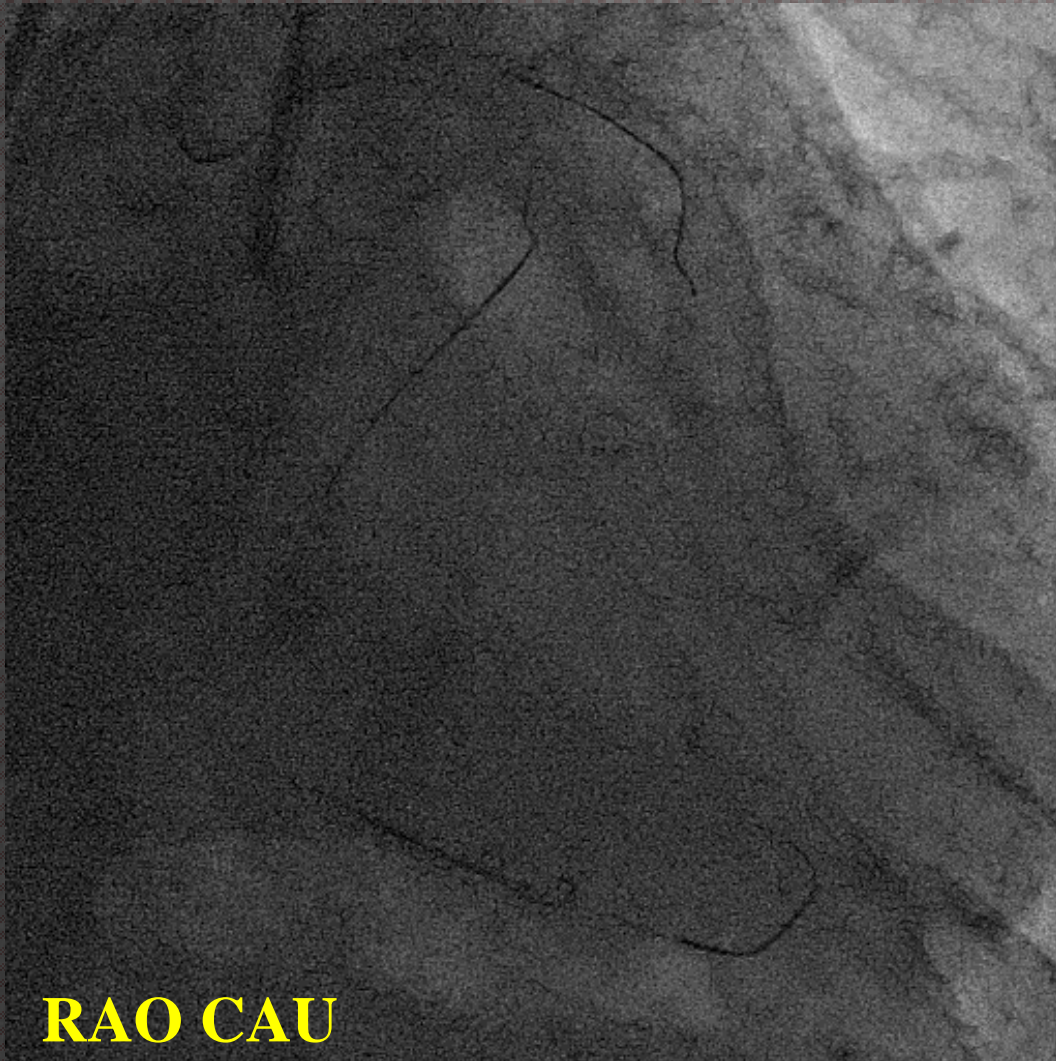
P2019

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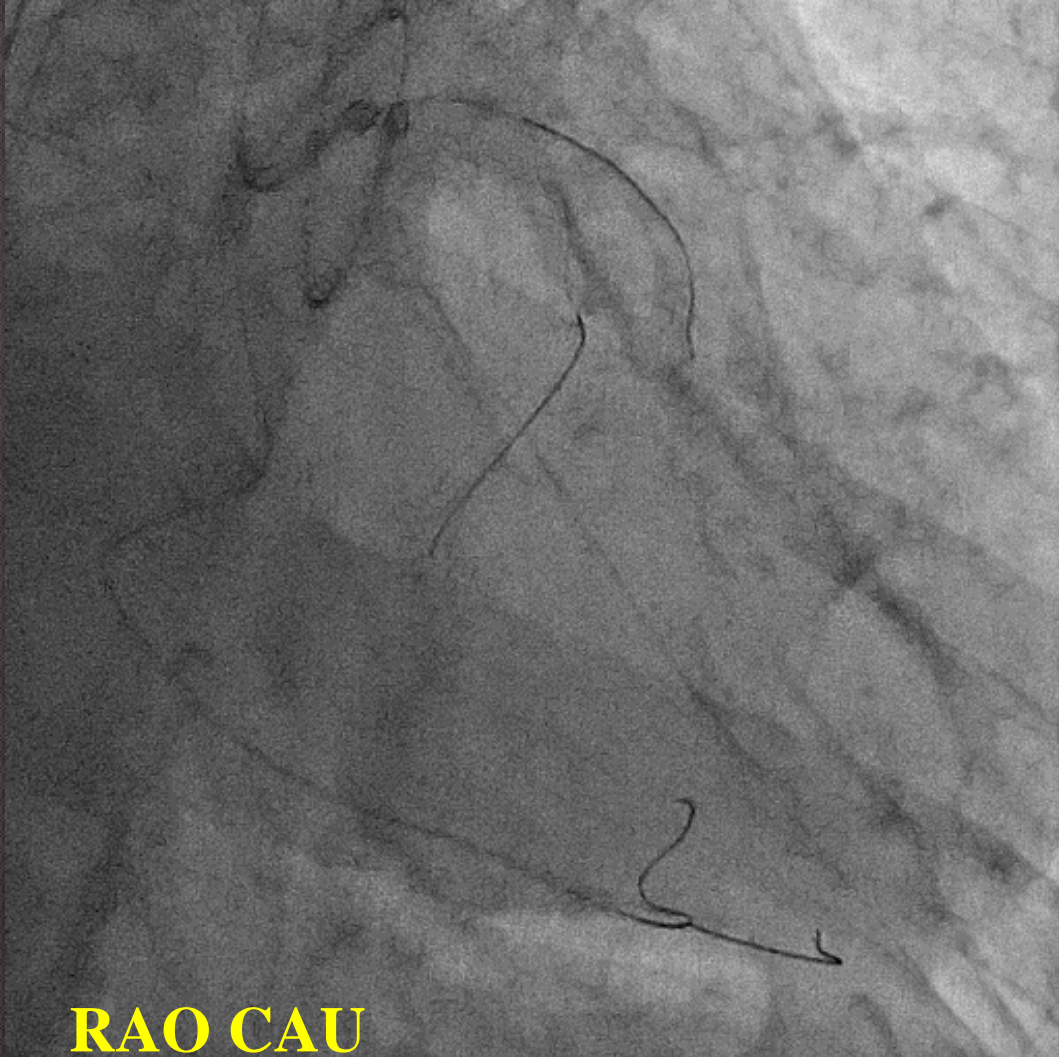
- Stretching the PD by 1st wire
- Dual lumen catheter for septal selection

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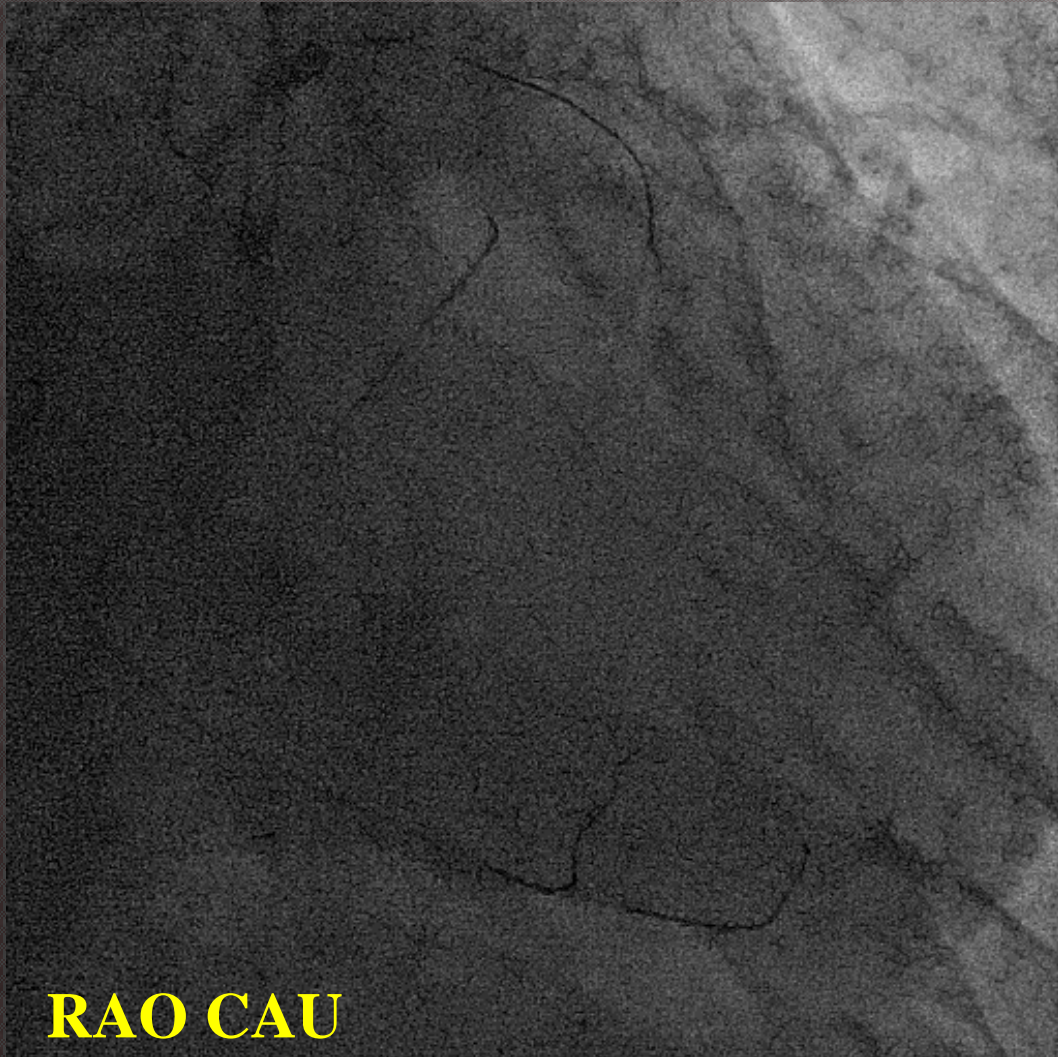
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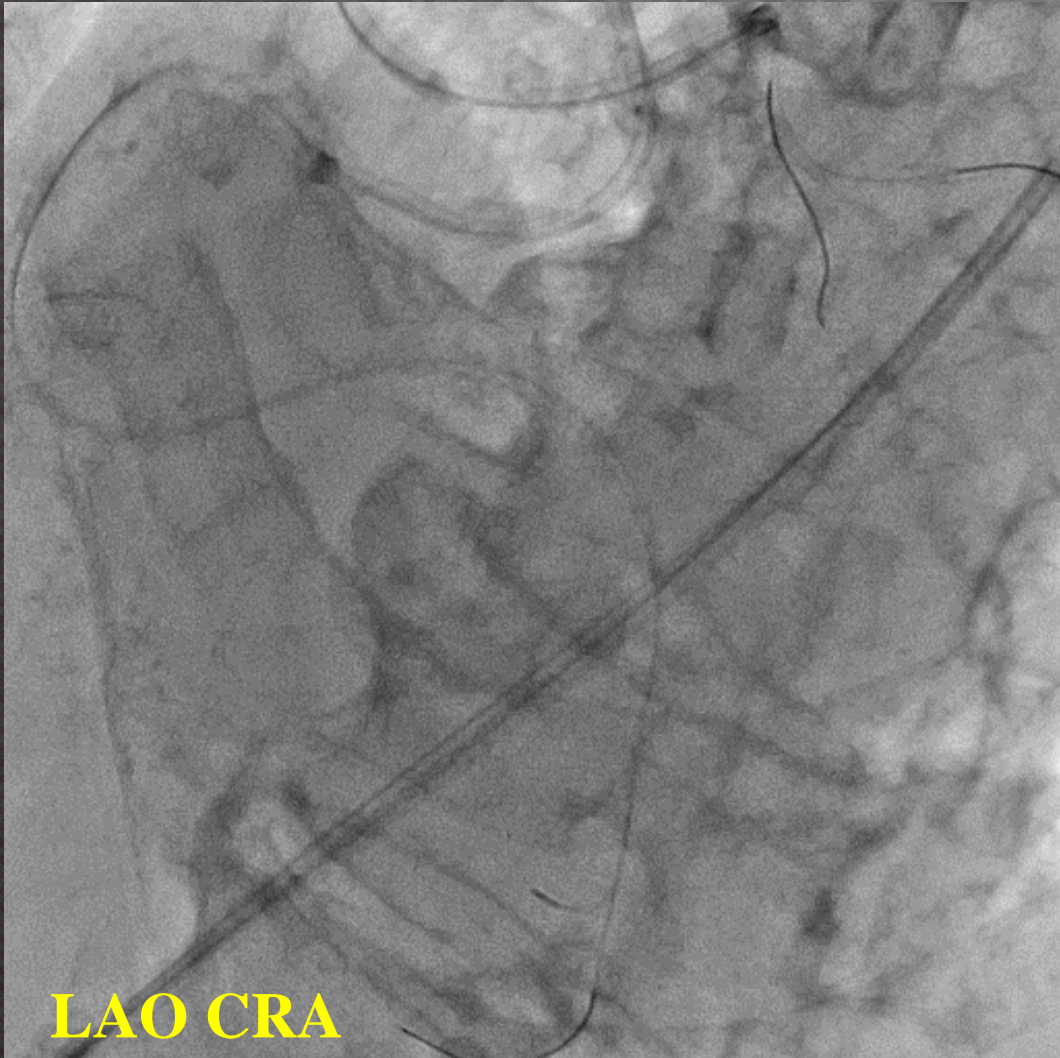
- Stretching the PD by 1st wire
- Dual lumen catheter for septal selection
- Change to microcatheter

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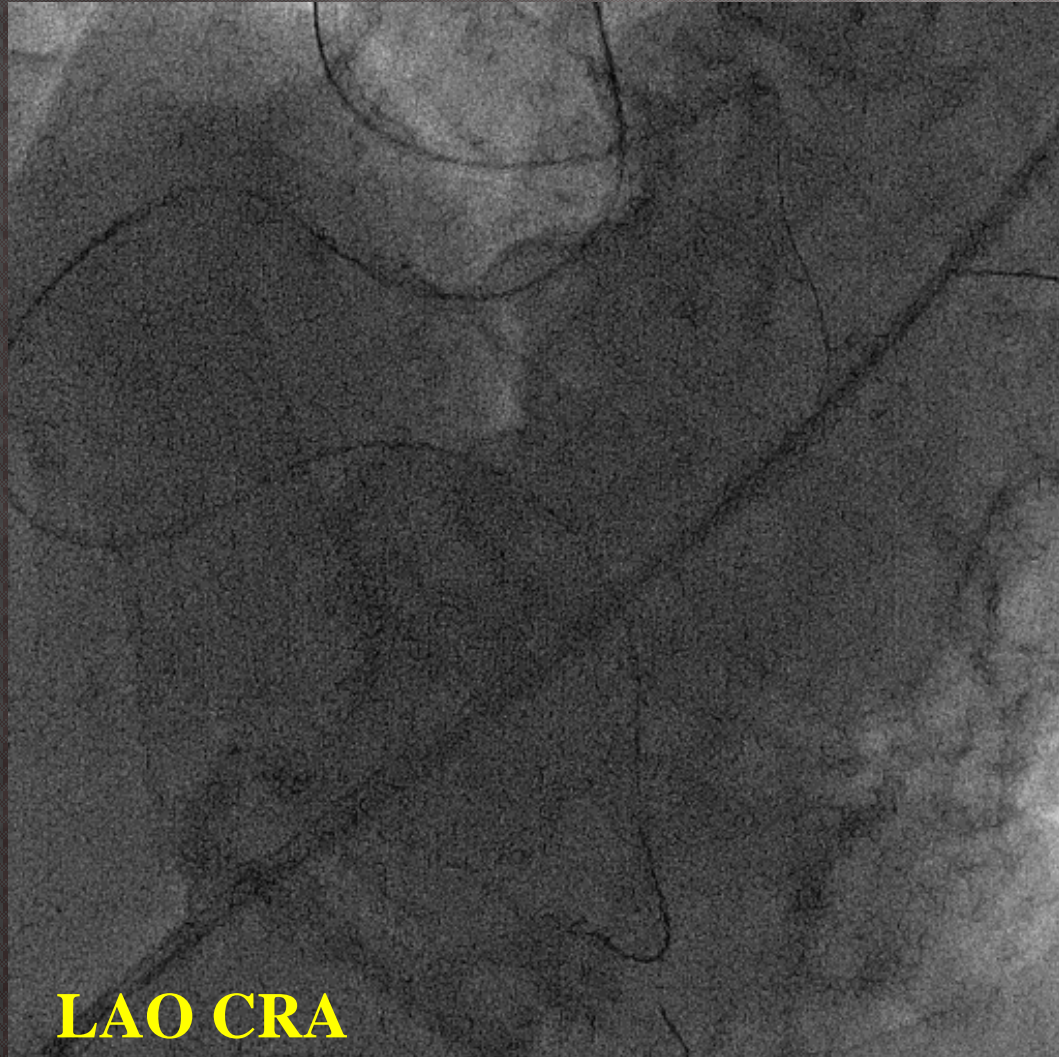
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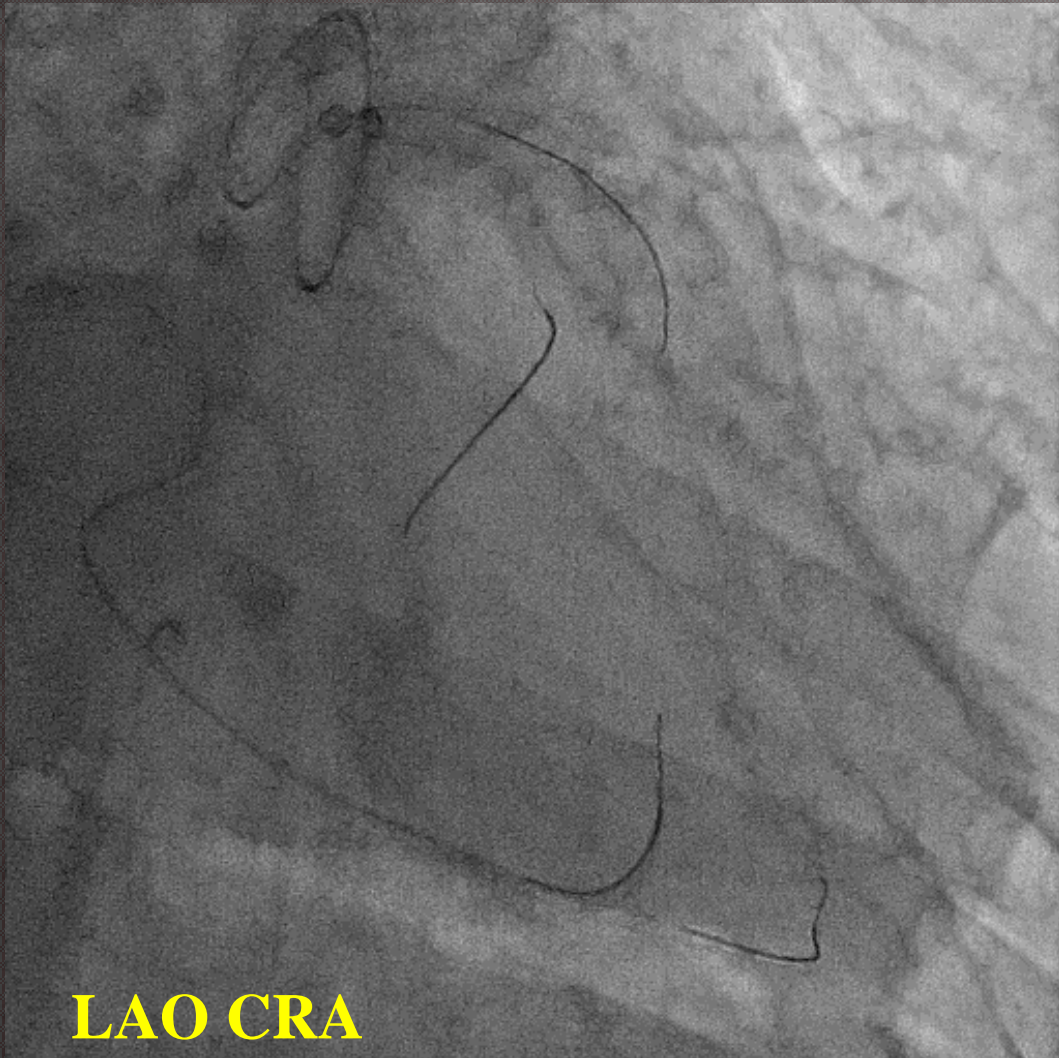
- **Stretching the PD by 1st wire**
- **Dual lumen catheter for septal selection**
- **Change to microcatheter**
- **Tip injection to evaluate channel morphology**

If you see ups and downs in PD branch...



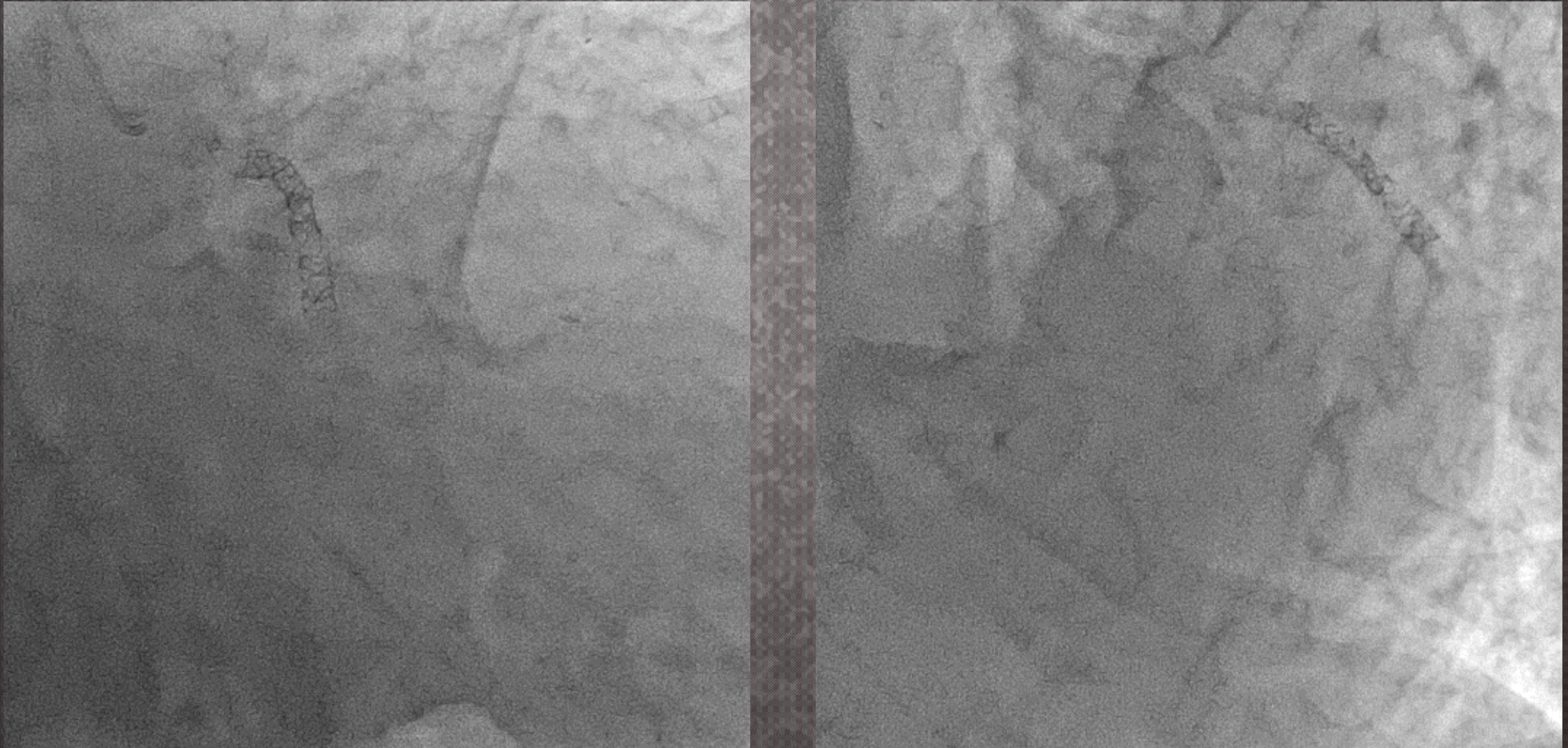
- **Stretching the PD by 1st wire**
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- **SION for small bifurcation**

If you see ups and downs in PD branch...



- **Stretching the PD by 1st wire**
- **Dual lumen catheter for septal selection**
- **Change to microcatheter**
- **Tip injection to evaluate channel morphology**
- **SION for small bifurcation**

If you see tortuous epicardial channel...

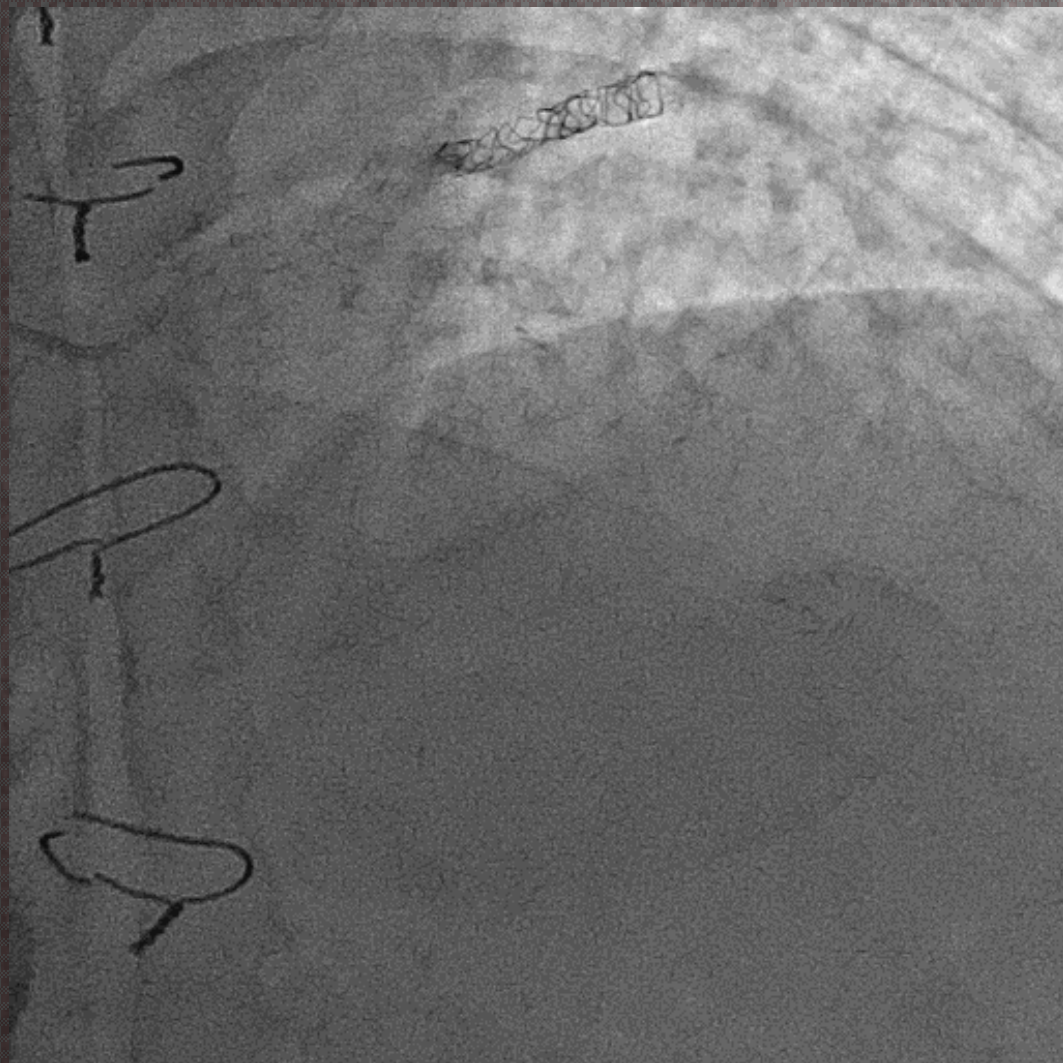


LCA (RAO 30 CAU 30)

LCA (LAO 45)

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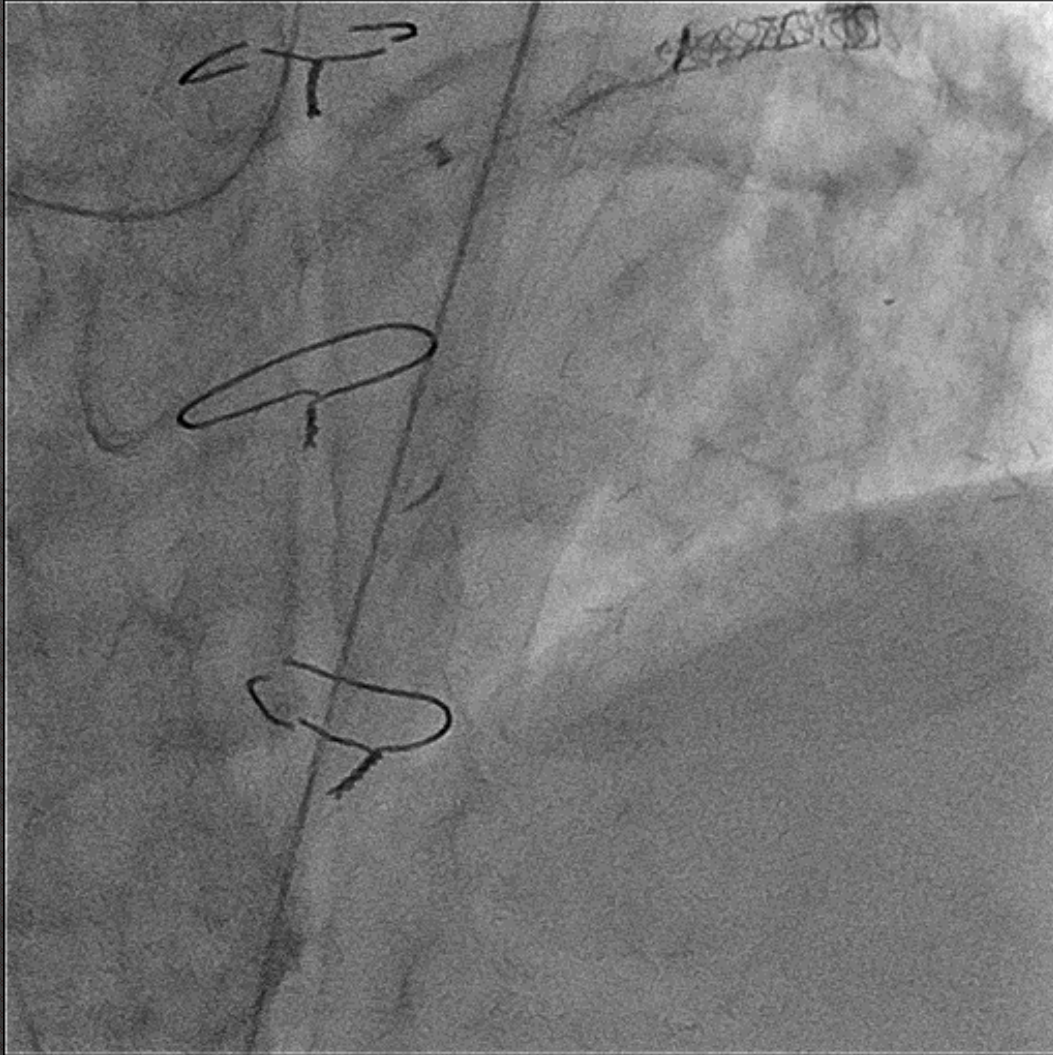
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LCA (CRA 30)

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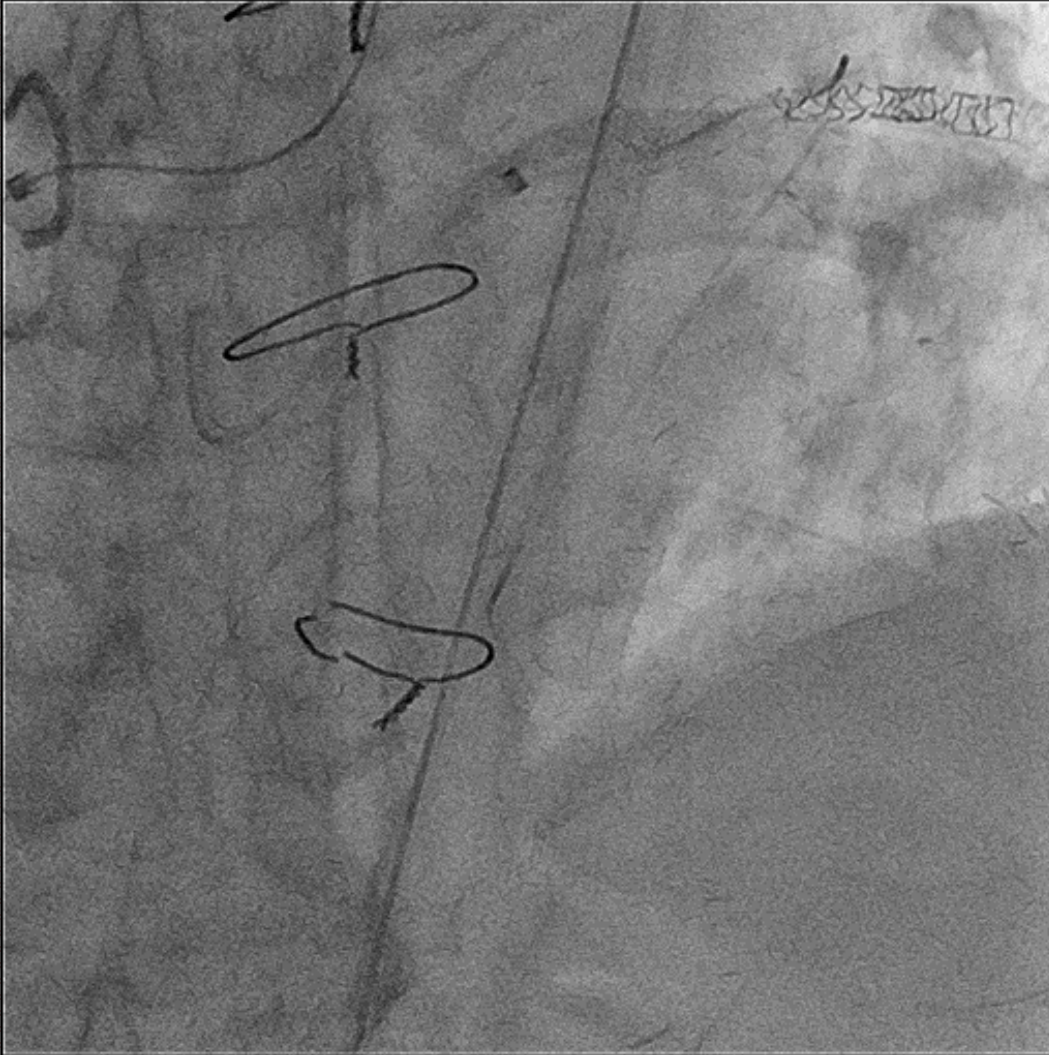


Tip injection (CRA30)



Tip injection (LAO 45)

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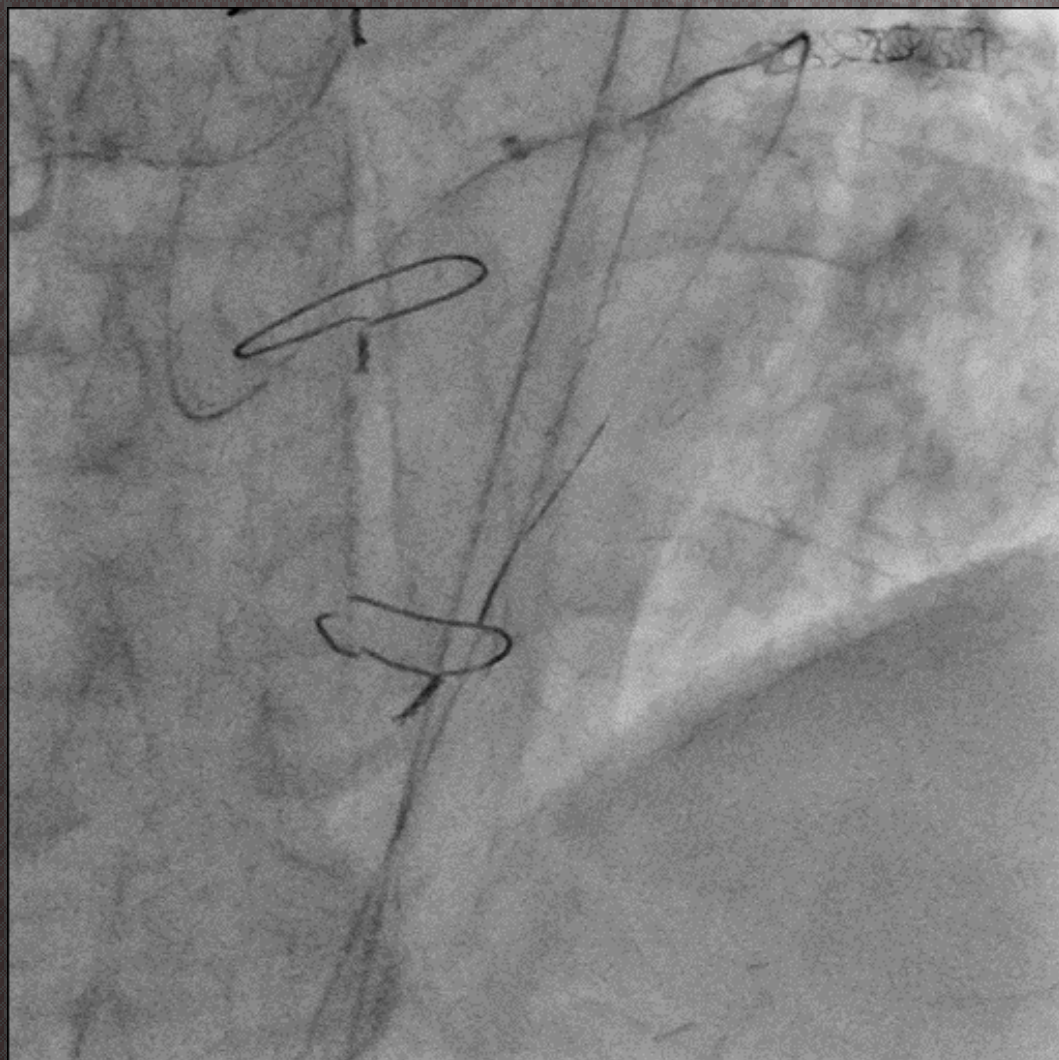
Tip injection (CRA30)



Tip injection (LAO 45)

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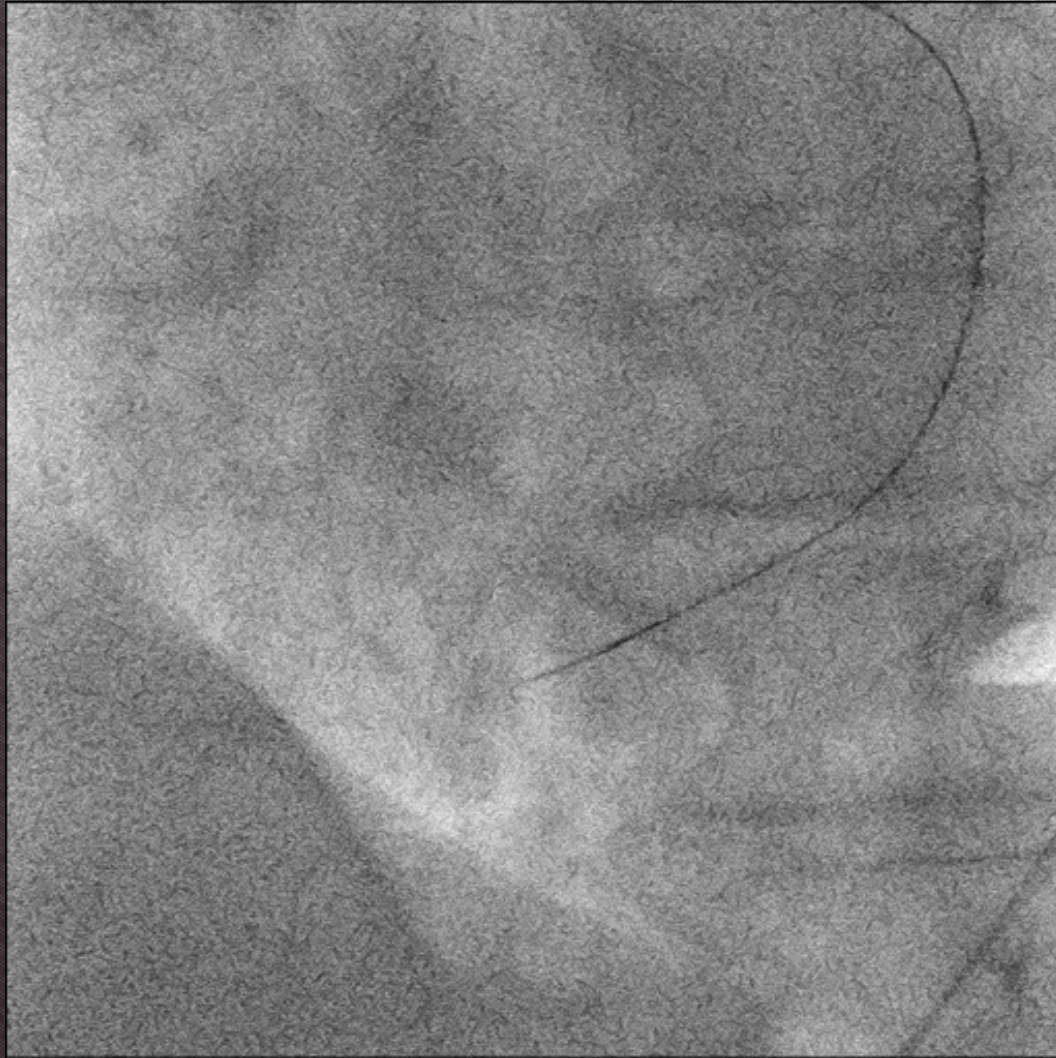
If you see tortuous epicardial channel...



➤ **SUOH03 not advanced**

Tip injection (CRA30)

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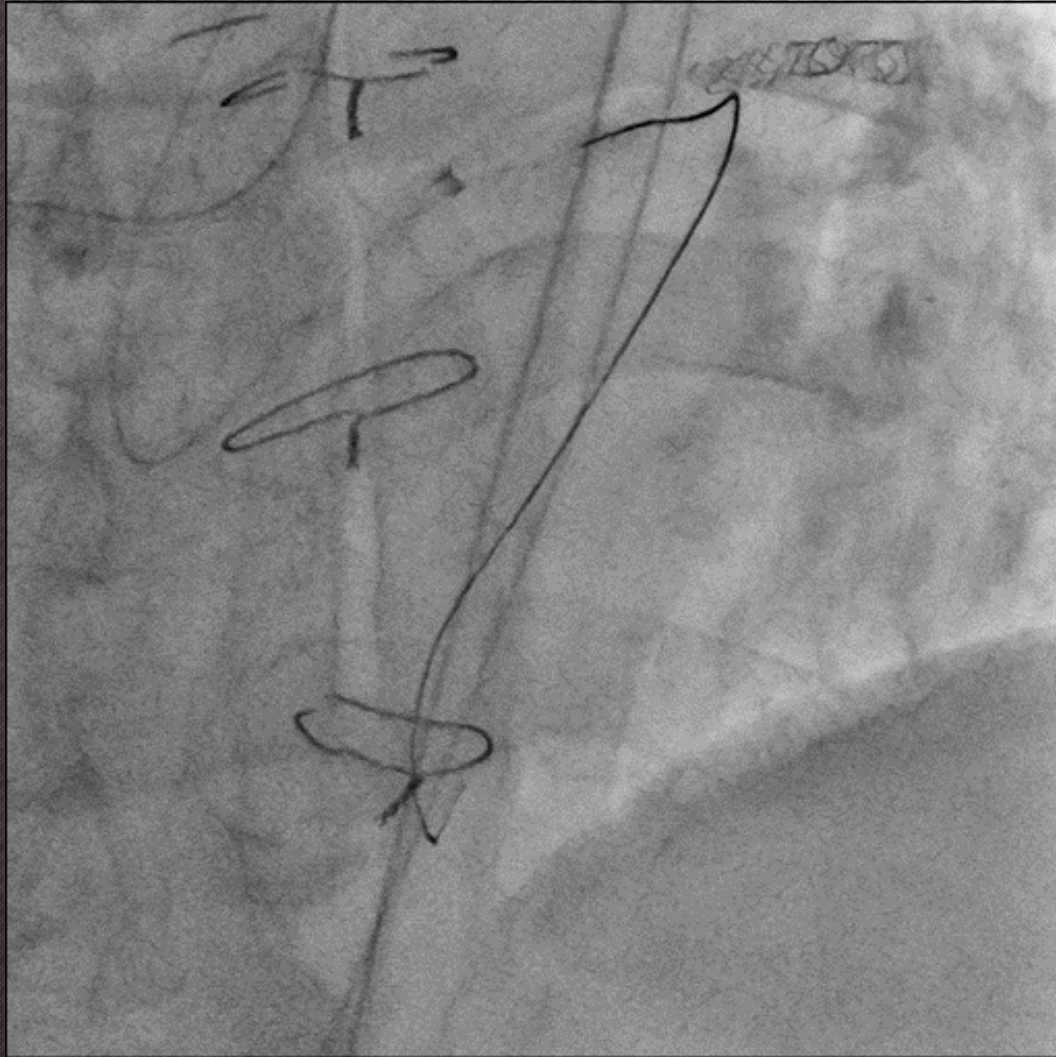


- SUOH03 not advanced
- XT-R with a very small knuckle

Tip injection (CRA30)

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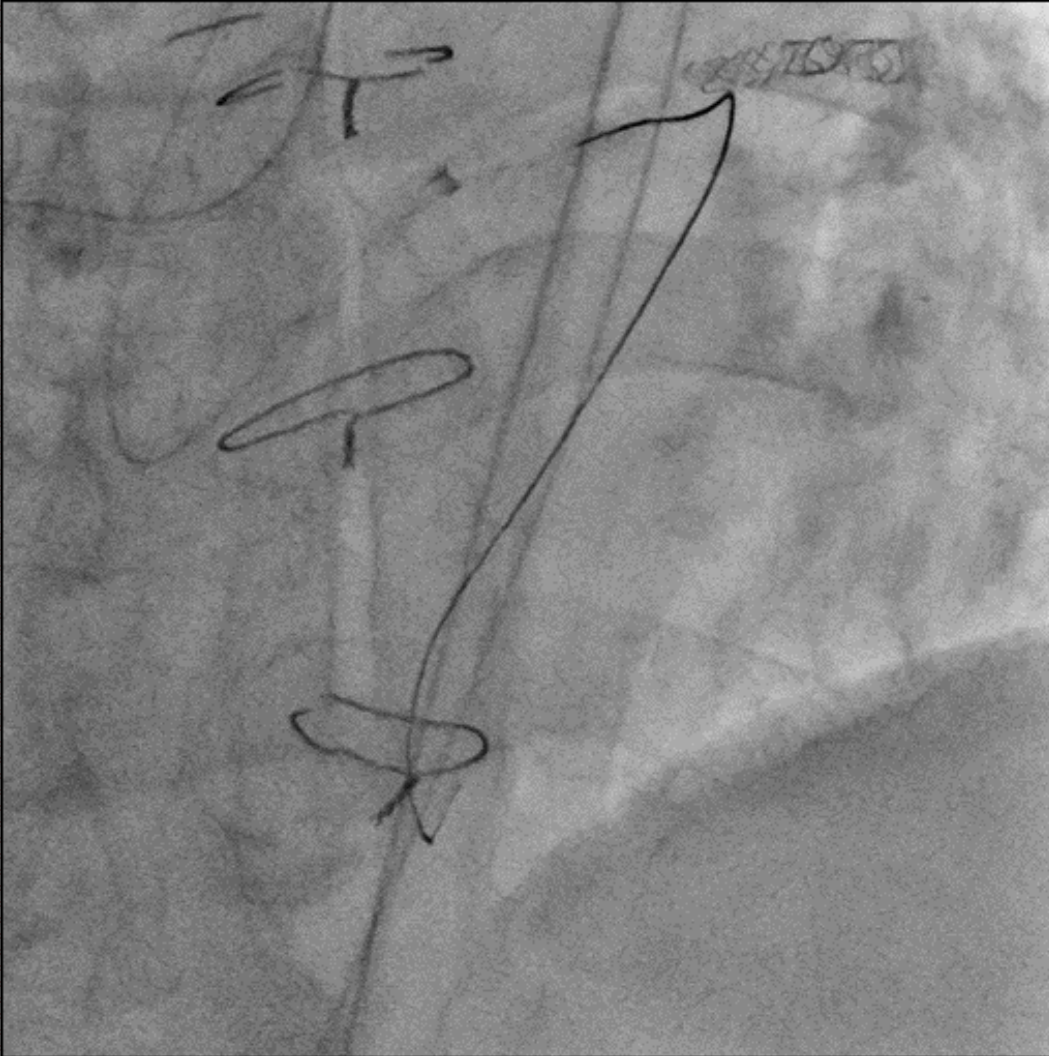
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Tip injection (CRA30)

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- **SUOH03 not advanced**
- **XT-R with a very small knuckle**

Tip injection (CRA30)

Right guide wire for collateral channel

- Before wire selection, understanding channel morphology is more important.
- For understanding channel morphology, tip injection from multi-projections. Make it a habit in your procedure!
- Initial choice of channel negotiation is SUOH03
- SION is needed to select small bifurcation.
- XT-R is needed for septal surfing and small channel
- XT-R with a small knuckle is useful in some situations.

CTO Club

[Dates]

June 14 Fri. – 15 Sat., 2019

[Venue]

WINC AICHI, Nagoya, Japan

<http://cct.gr.jp/ctoclub/>

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