

# It is Time for Practical Use of High-Resolution IVUS

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# Disclosure Statement of Financial Interest

Within the past 12 months, I or my spouse/partner have had a financial interest/arrangement or affiliation with the organization(s) listed below.

## Affiliation/Financial Relationship

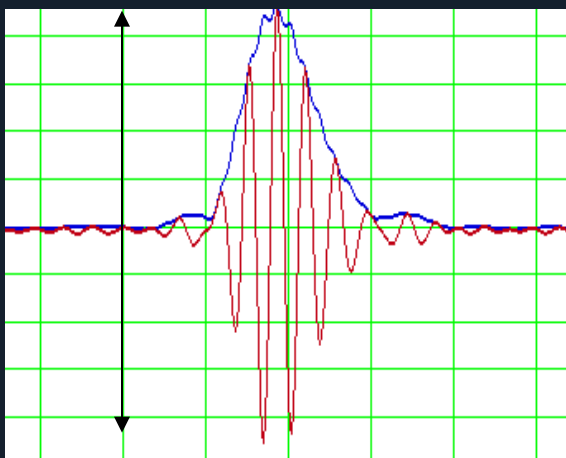
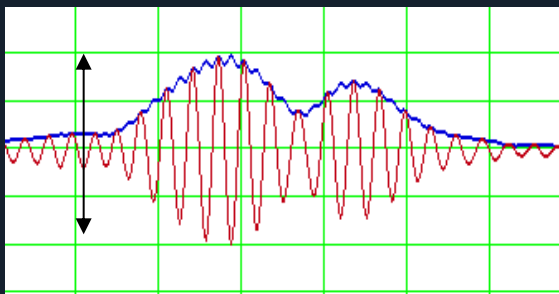
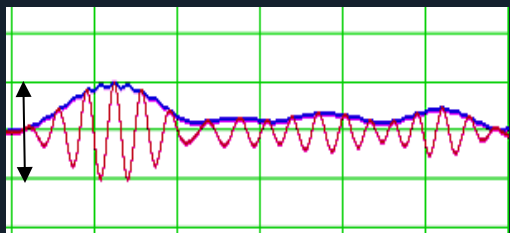
- Grant/Research Support
- Consulting Fees/Honoraria

## Company

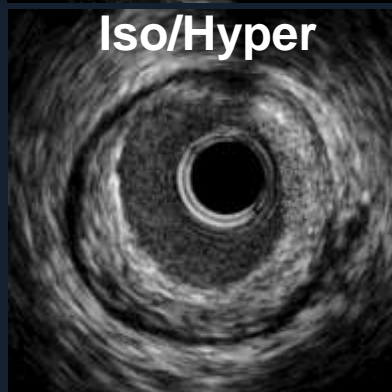
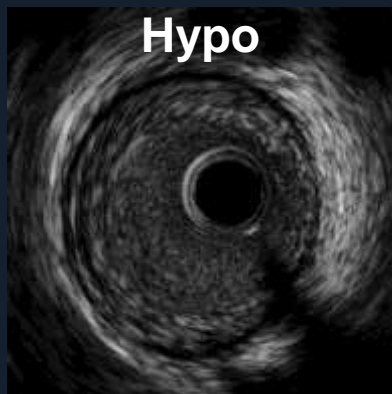
- Boston Scientific Corporation
- Boston Scientific Corporation, ACIST, St Jude Medical

# Gray Scale IVUS Tissue Characterization

## Ultrasound Wave



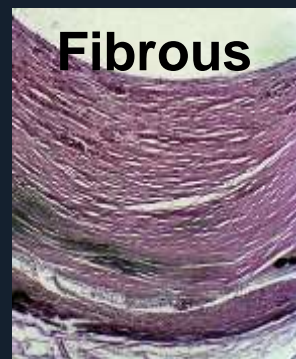
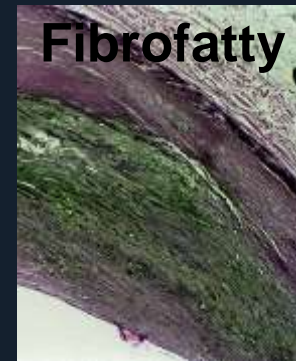
## Gray Scale





## Hyper with Shadow



## Pathology



# Five Companies Are Working on Next Generation IVUS Systems

- **ACIST, 60MHz (purchased SVMi - has been working on next generation IVUS since 2007)** 
  - **Boston Scientific, 60MHz**
  - **Volcano, FACT**
  - **InfraReDx, 50MHz**
  - **OCT Medical Imaging Inc, 60MHz** 
- Available*
- Under development*

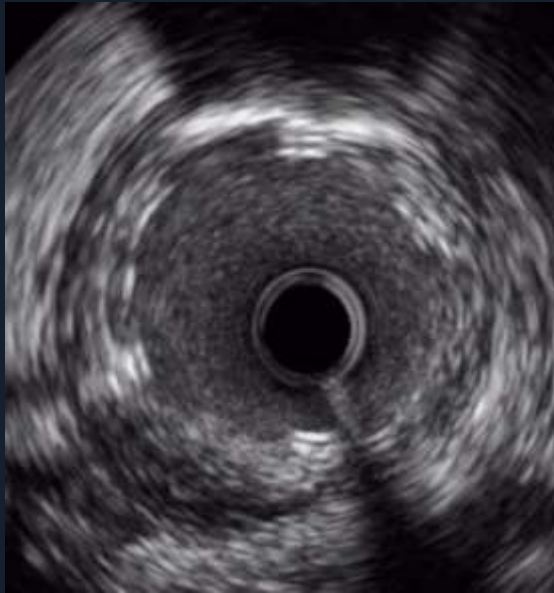
# Intravascular Imaging System Comparison

<b>Feature</b>	<b>ACIST HDi / Kodama</b>	<b>Boston Scientific</b>	<b>Volcano FACT</b>	<b>InfraReDx</b>	<b>St Jude Medical OCT</b>
<b>Frequency or Wavelength</b>	60 MHz	55 MHz	40 MHz	50 MHz	1.3 $\mu\text{m}$
<b>Nature of the Energy</b>	Ultrasound				Optical
<b>Axial Resolution</b>	40 $\mu\text{m}$	22 $\mu\text{m}$	<50 $\mu\text{m}$	20 $\mu\text{m}$	15 $\mu\text{m}$
<b>Lateral Resolution</b>	90 $\mu\text{m}$	50-140 $\mu\text{m}$	100-200 $\mu\text{m}$	<200 $\mu\text{m}$	40 $\mu\text{m}$
<b>Soft Tissue Penetration</b>	> 2.5 mm	>3.5 mm			0.8-1.2 mm <sup>*</sup>
<b>Blood Penetration</b>	> 3.4 mm	>4.0 mm			$\leq$ 1.2 mm
<b>Pullback Speed (mm/s)</b>	0.5, 1.0, 2.5, 5.0, 10	0.5,1.0		0.5	20
<b>Pullback Length (mm)</b>	130	100		150	75

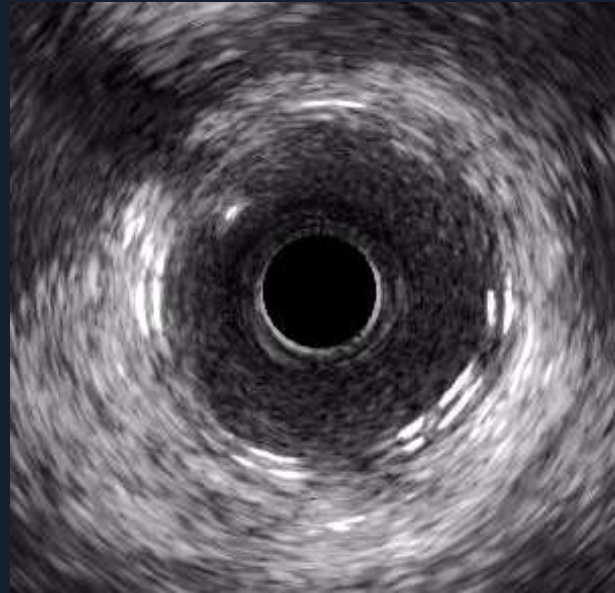
\* Soft Tissue Penetration with contrast injection to achieve blood clearing.

# Boston Scientific: HD-IVUS and Bioresorbable Vascular Scaffolds

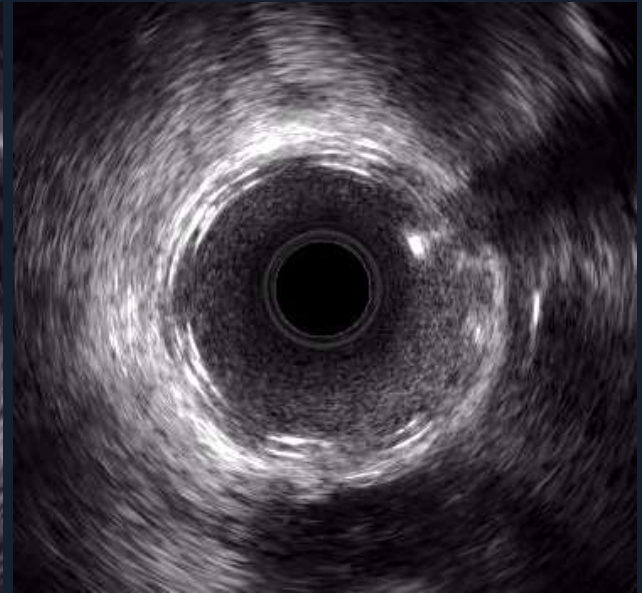
**Pro/iCross 40 MHz**  
43 micron axial



**OptiCross 40 MHz**  
38 micron axial

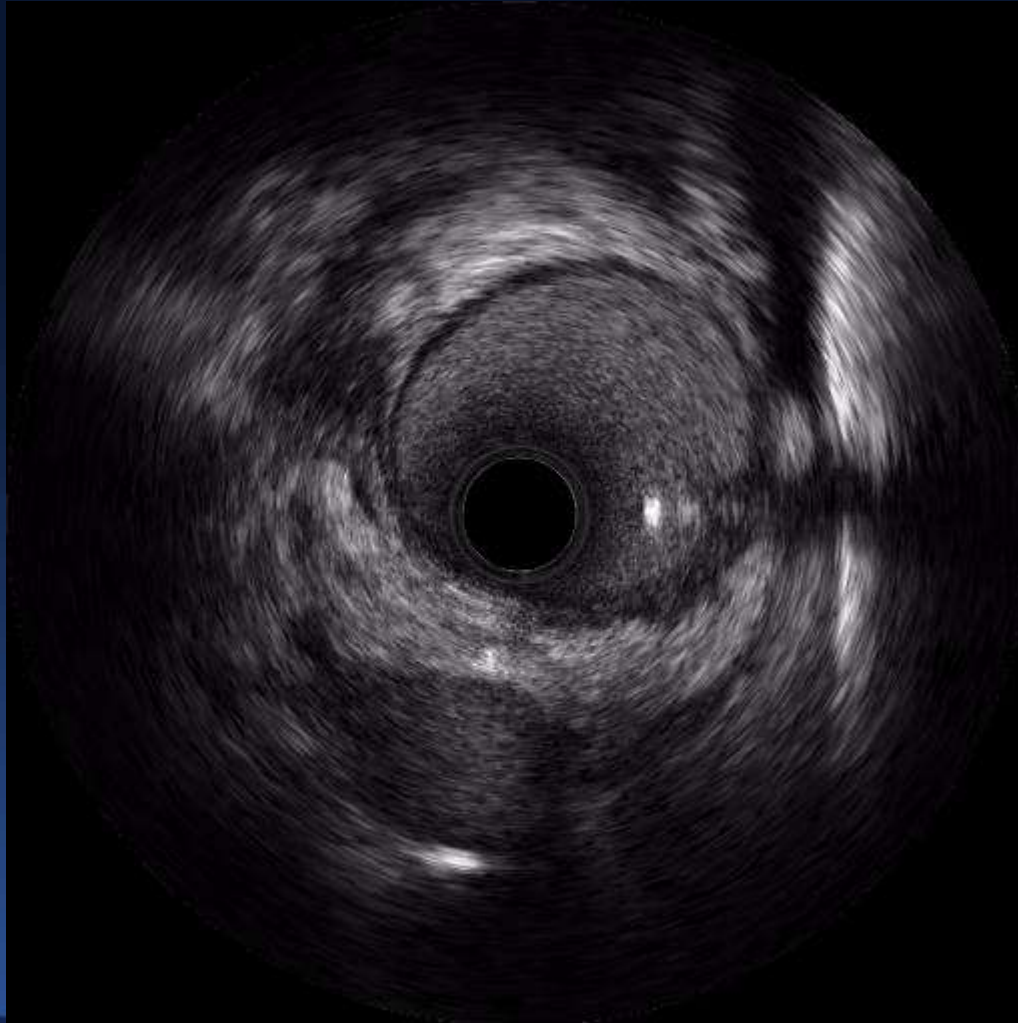


**Next Gen IVUS 55 MHz**  
22 micron axial

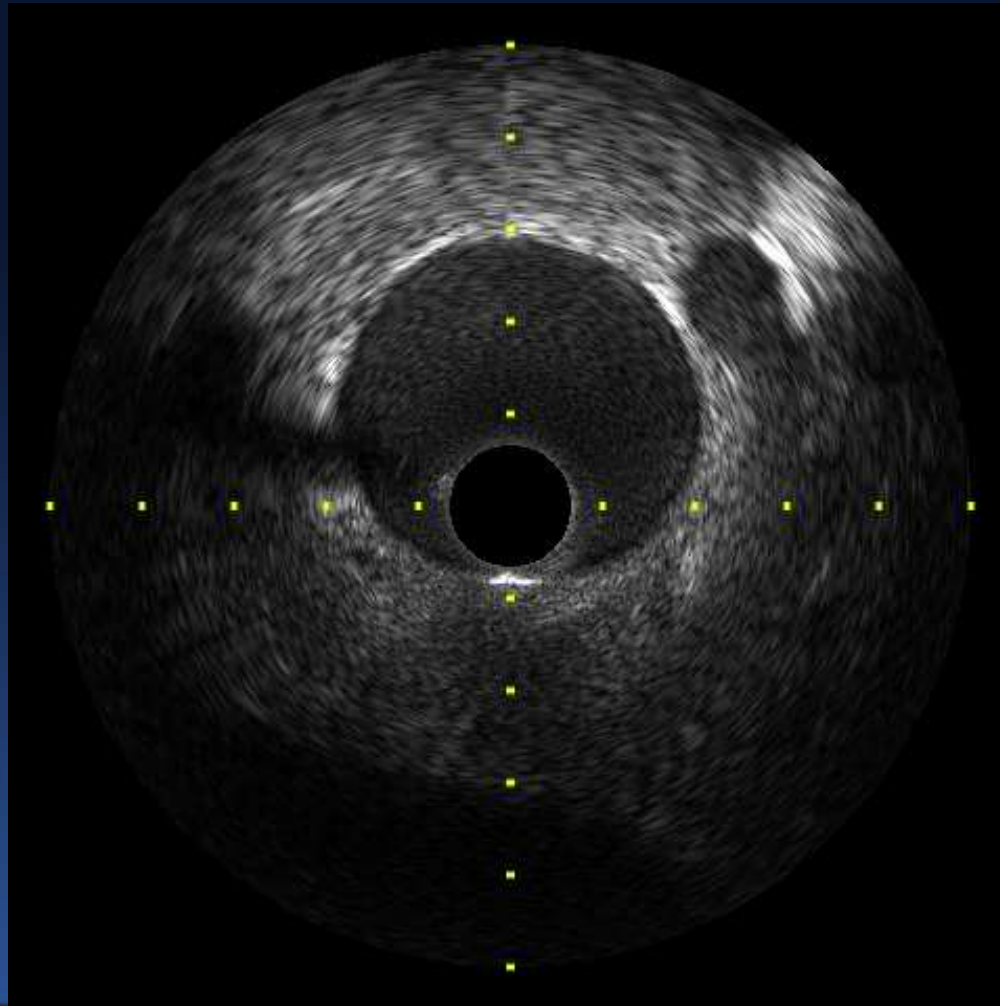


Improving IVUS Resolution without Compromising Penetration

# Boston Scientific: 55MHz IVUS in Animal Normal Coronary Artery

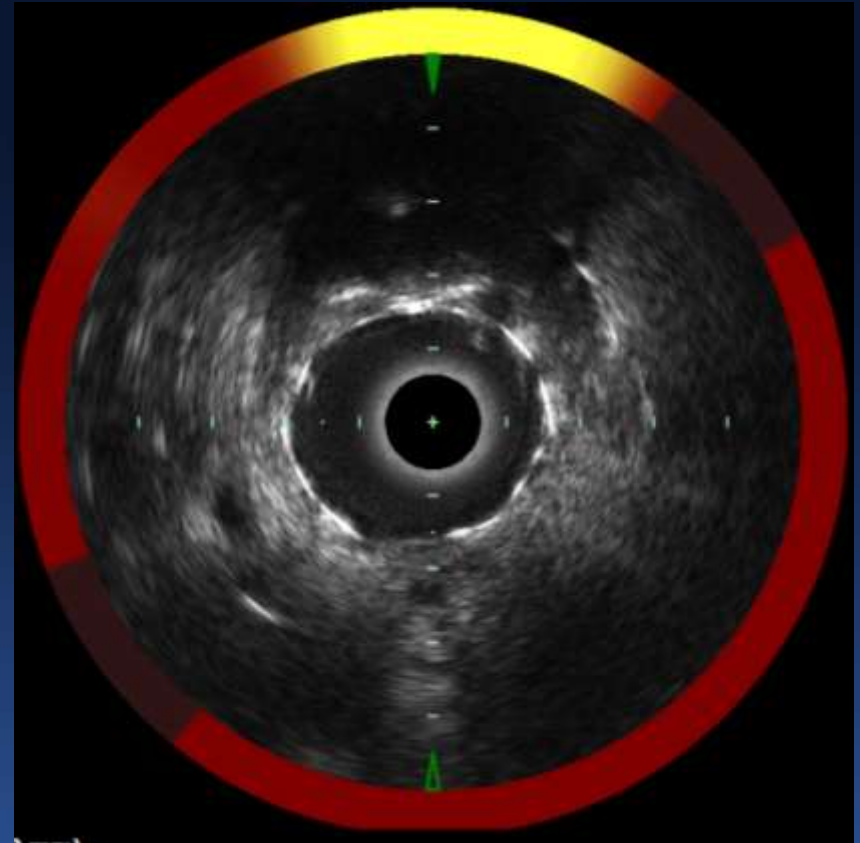


# InfraReDx: 50MHz IVUS in Animal Normal Coronary Artery



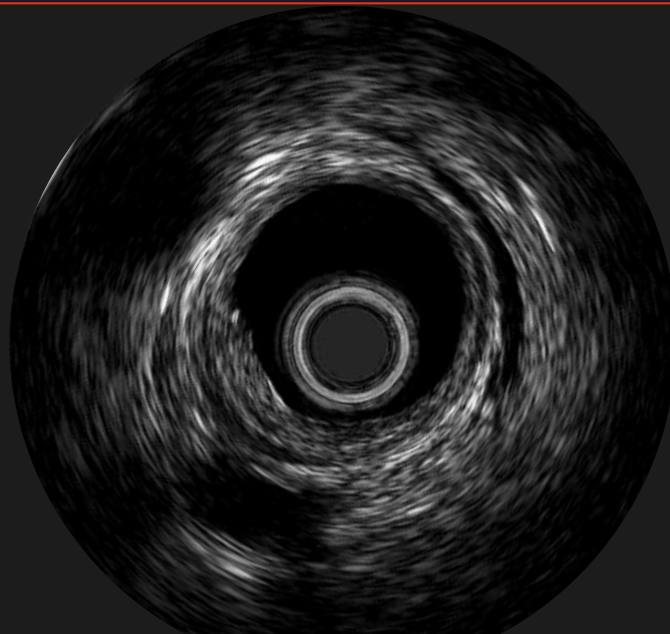


# InfraReDx: 50MHz IVUS Human Coronary Artery

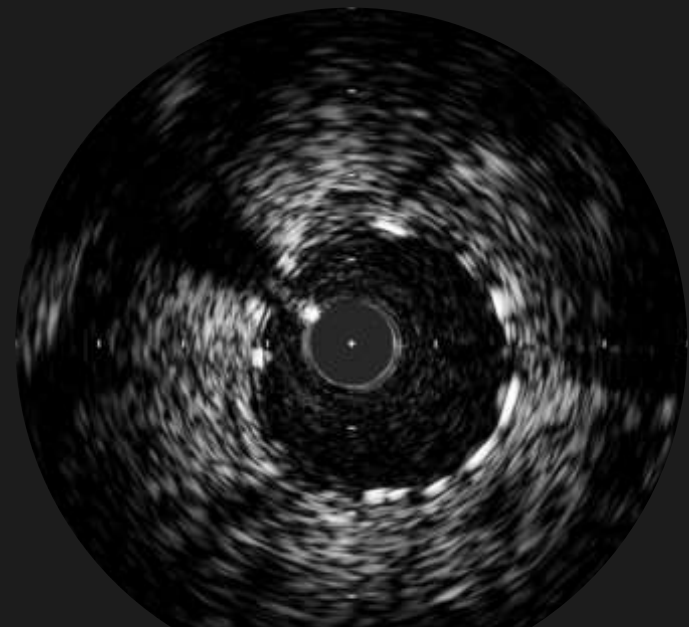


# Volcano: FACT (Focused Acoustic Computed Tomography)

FACT ultrasound transducer intended to generate a “cleaner” signal than traditional piezoelectricity, near field resolution close to OCT.

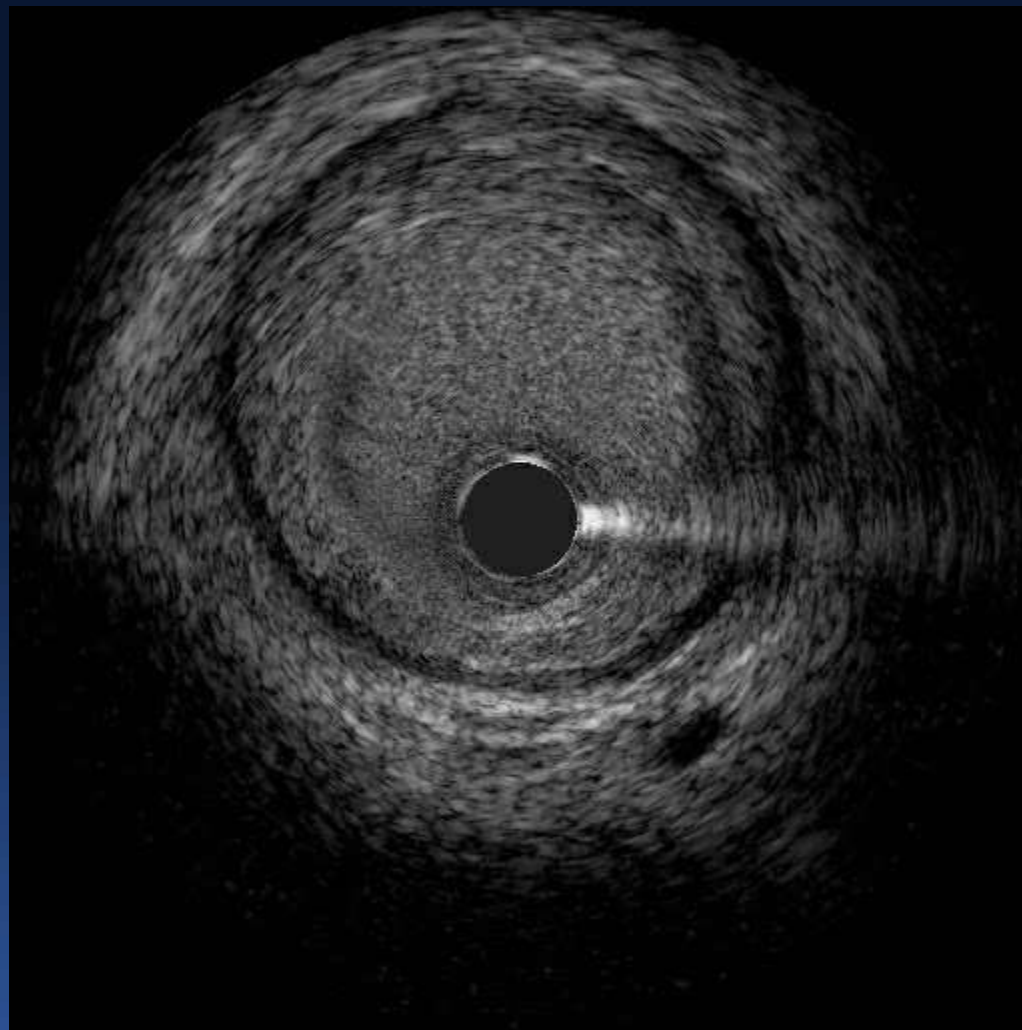


Cadaver Image without blood

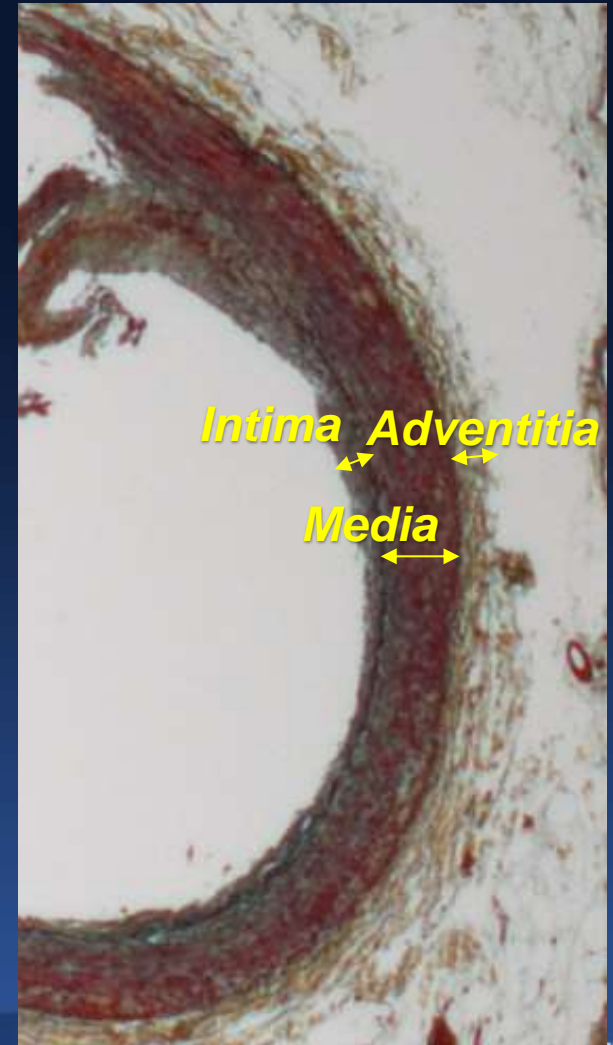
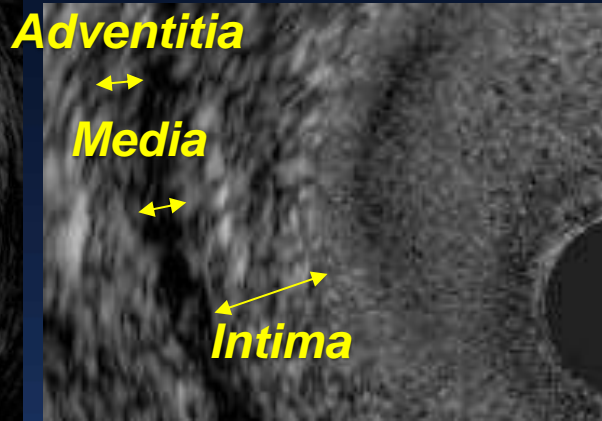
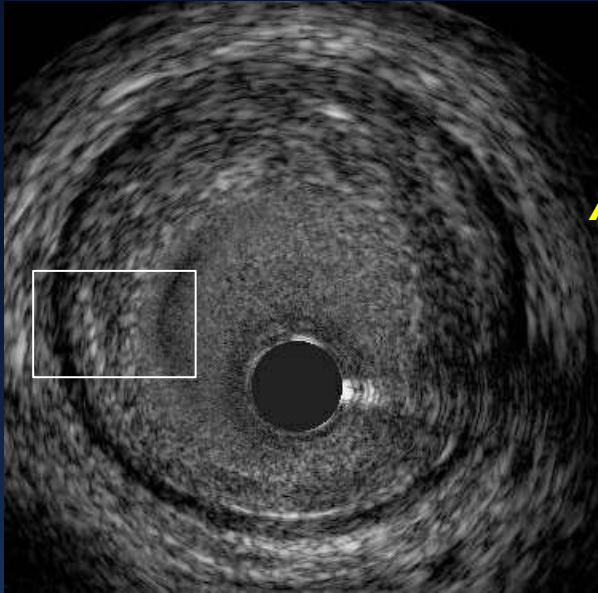


Animal Image with stent

# ACIST 60MHz IVUS

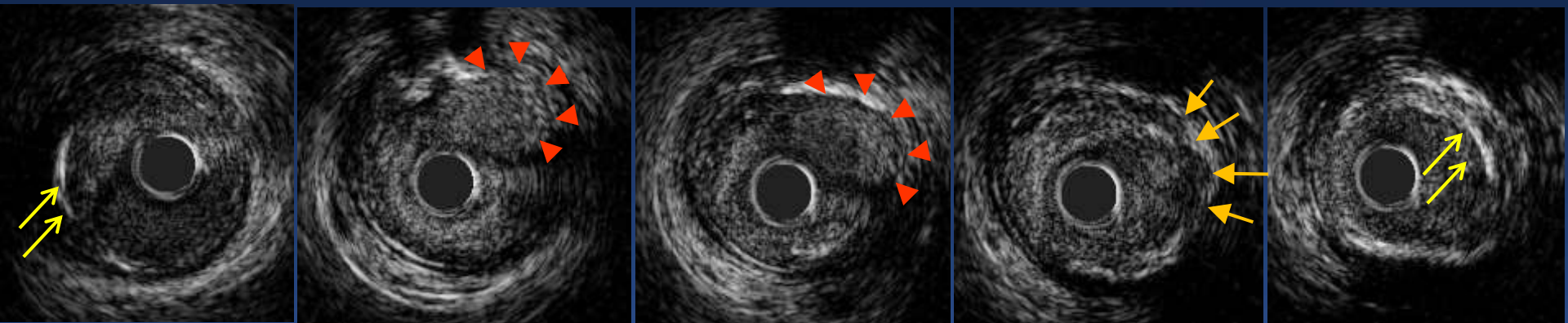
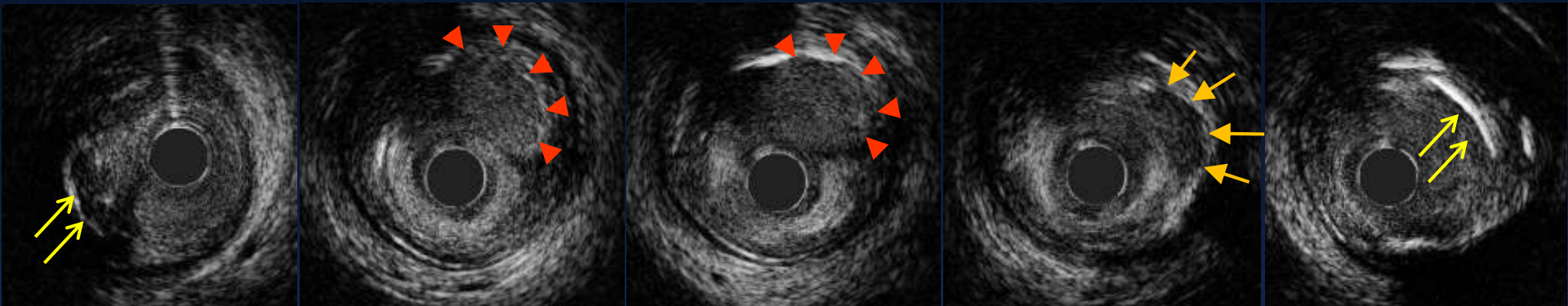


# Three Layers Appearance



# Ruptured Plaque

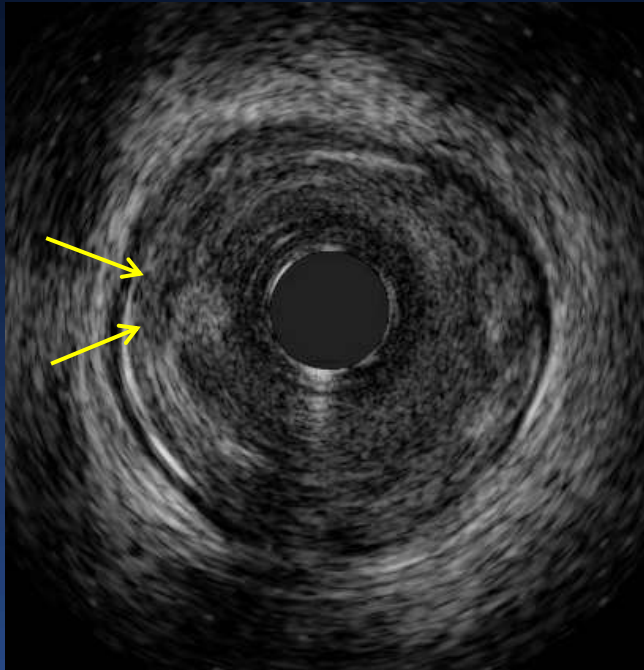
## 60MHz



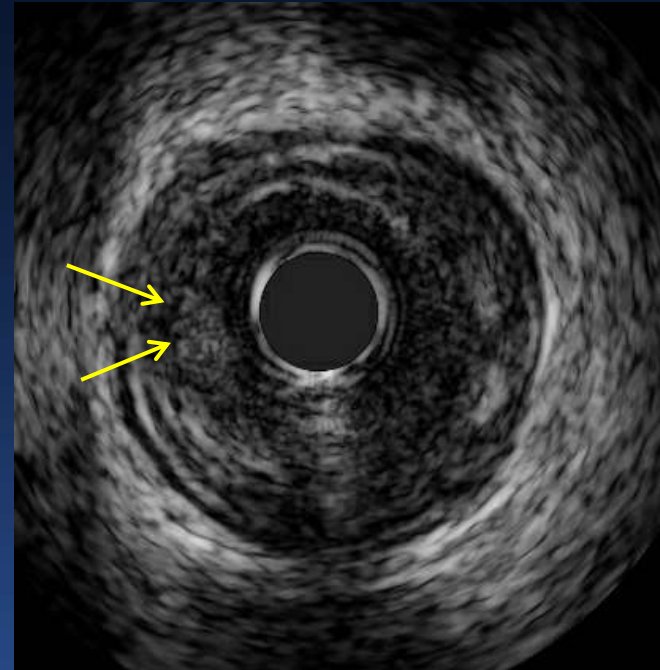
## 40MHz

# Thrombus

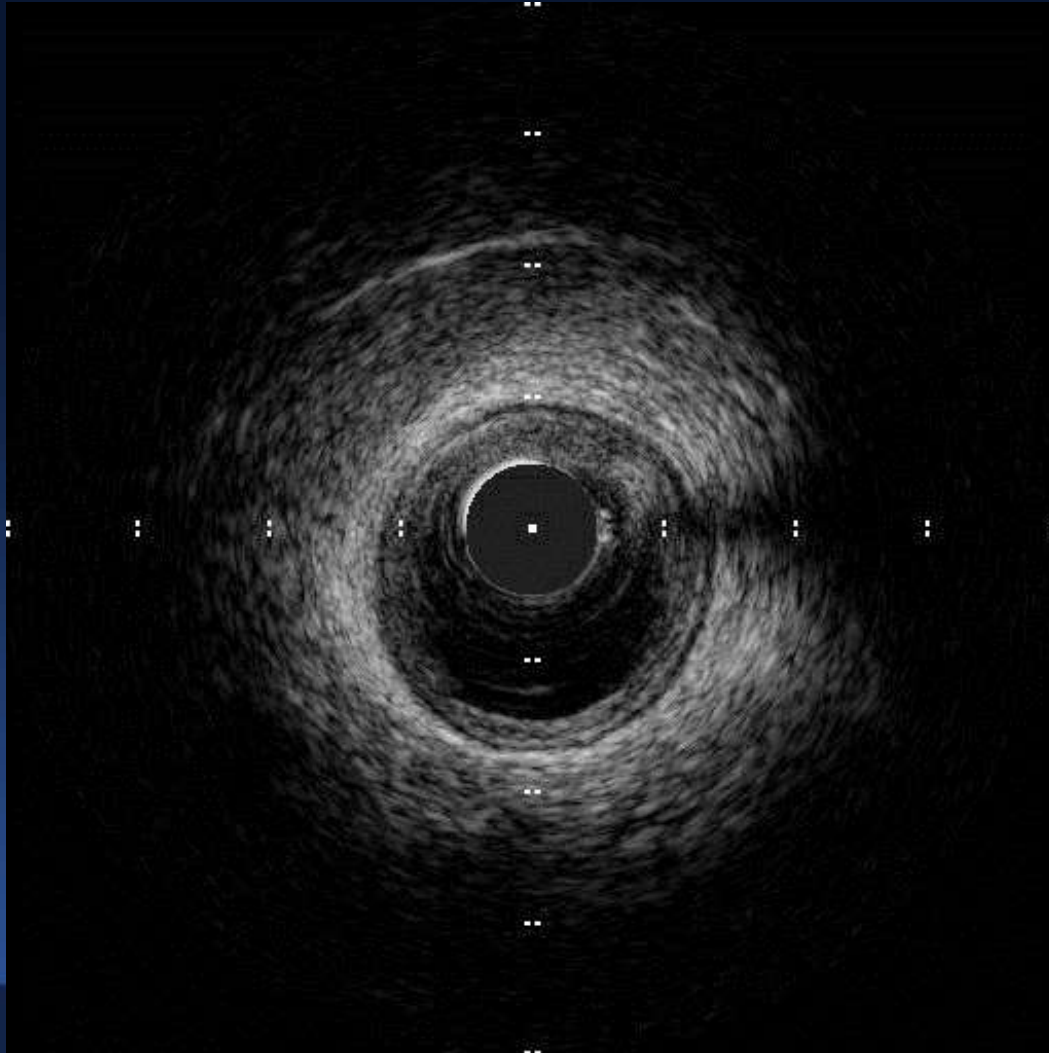
60MHz



40MHz

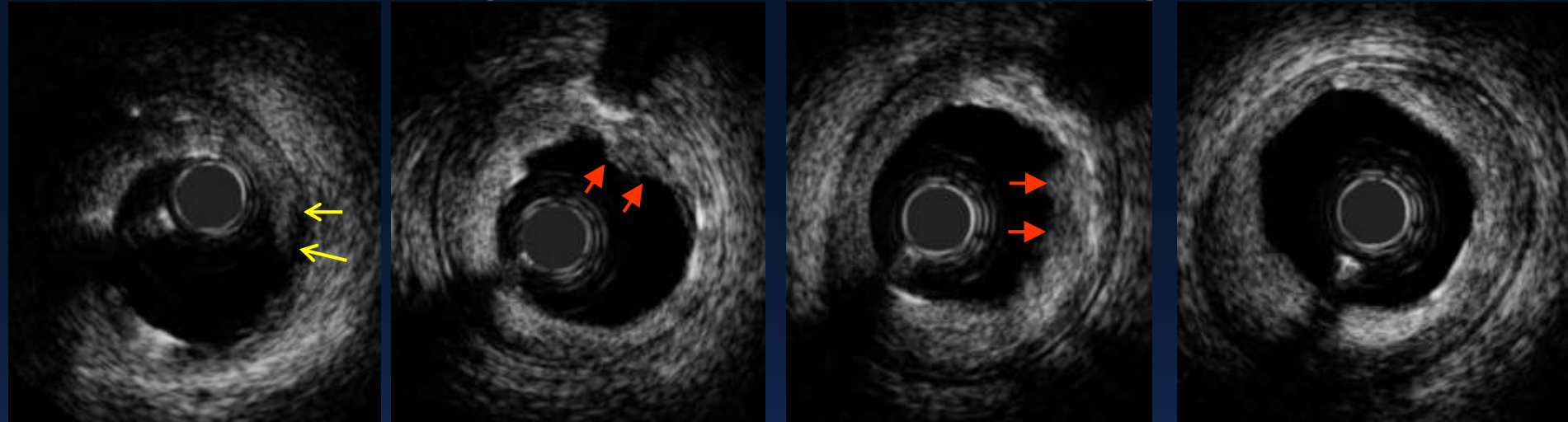


# High Speed Pullback (10mm/sec) with Flushing

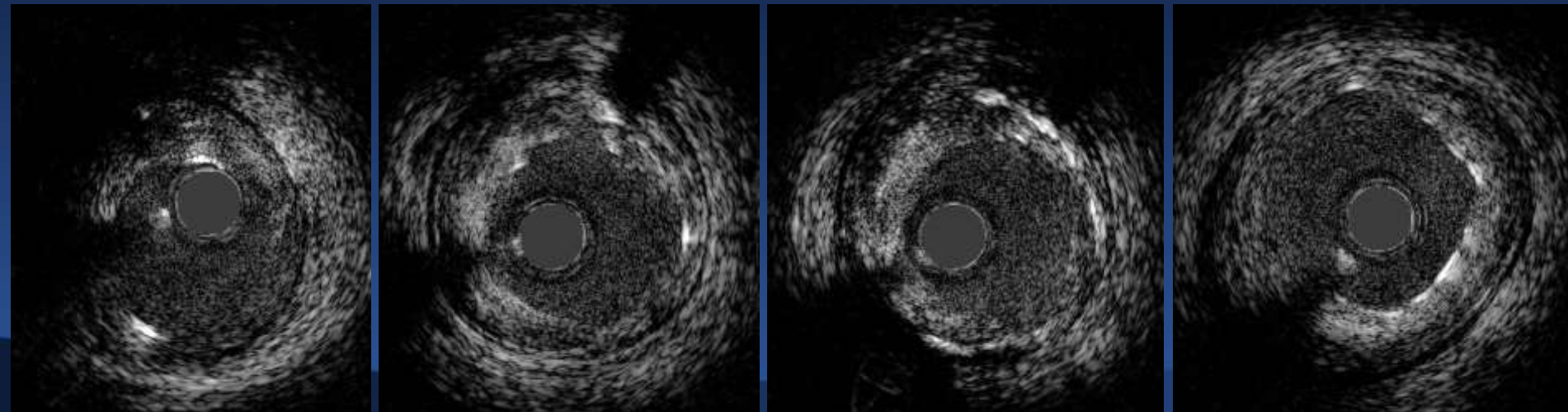


# Comparison with vs without Flush

## High Speed Pullback with Flushing



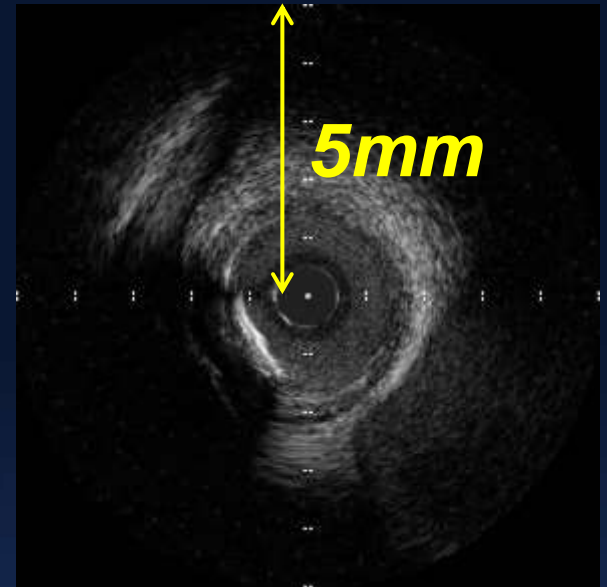
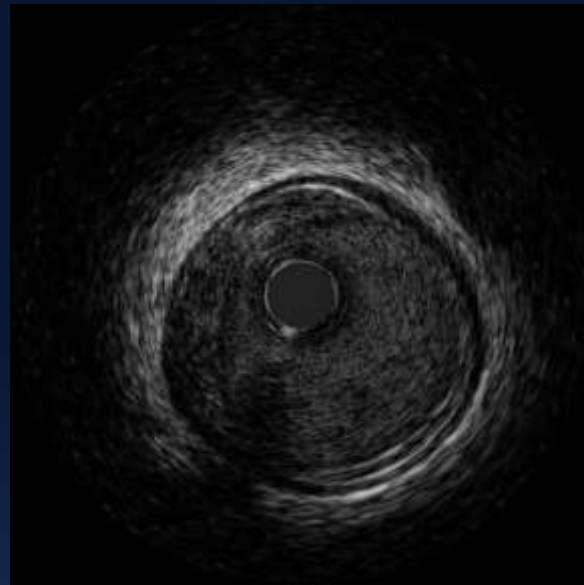
## Normal Pullback



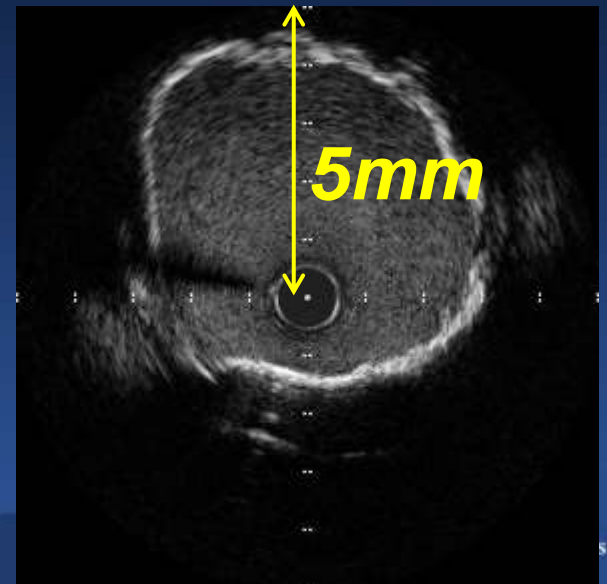


# Penetration

Soft Tissue  
Penetration



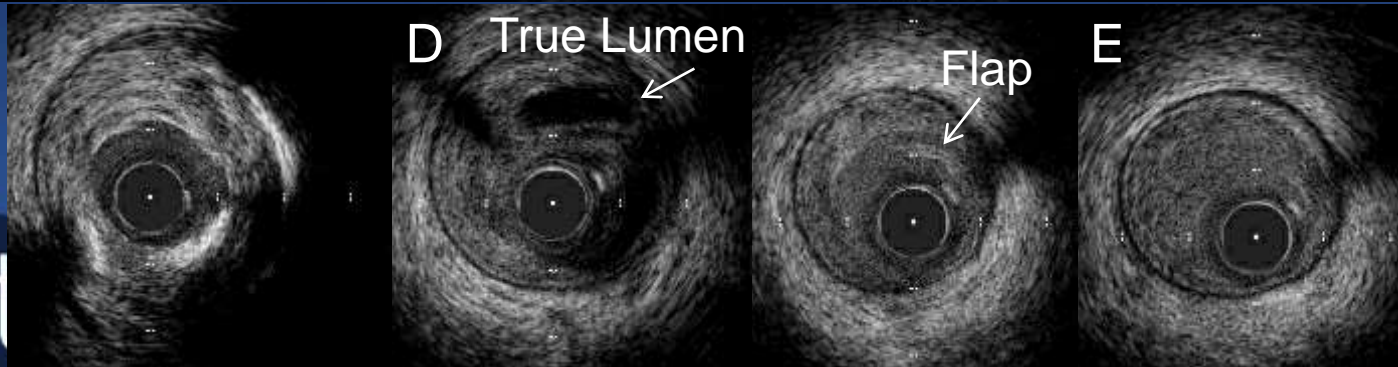
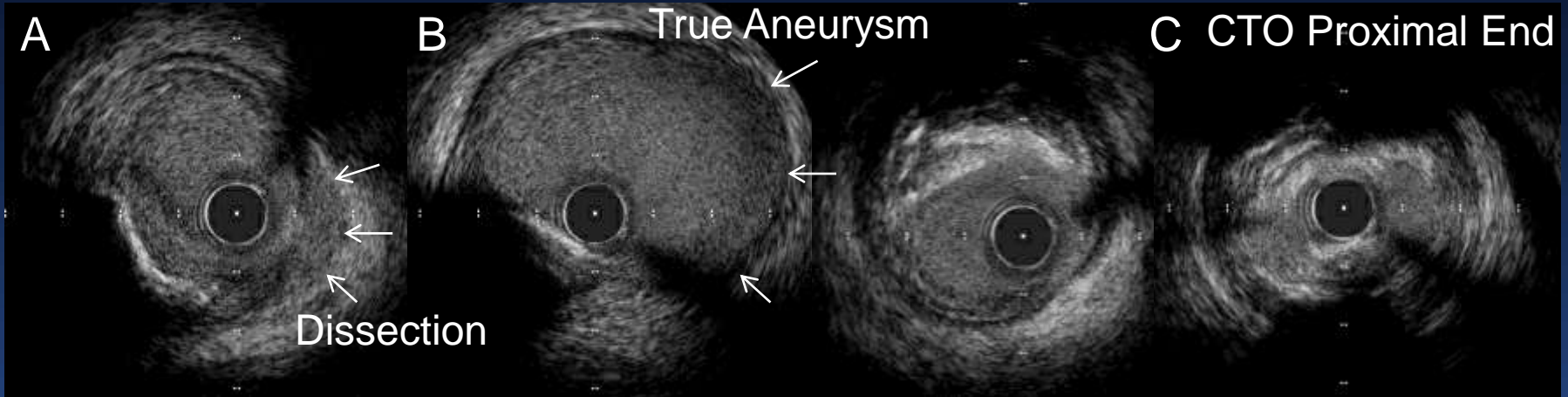
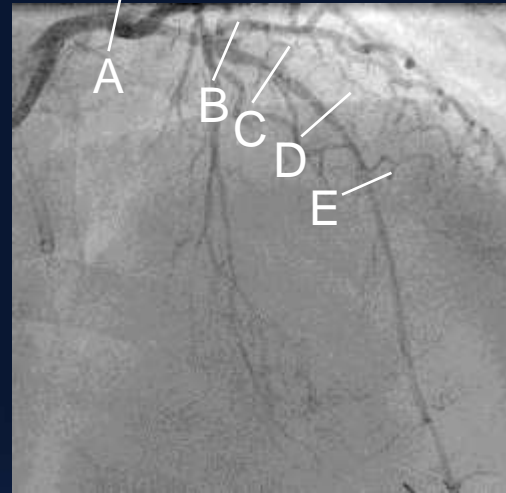
Blood  
Penetration

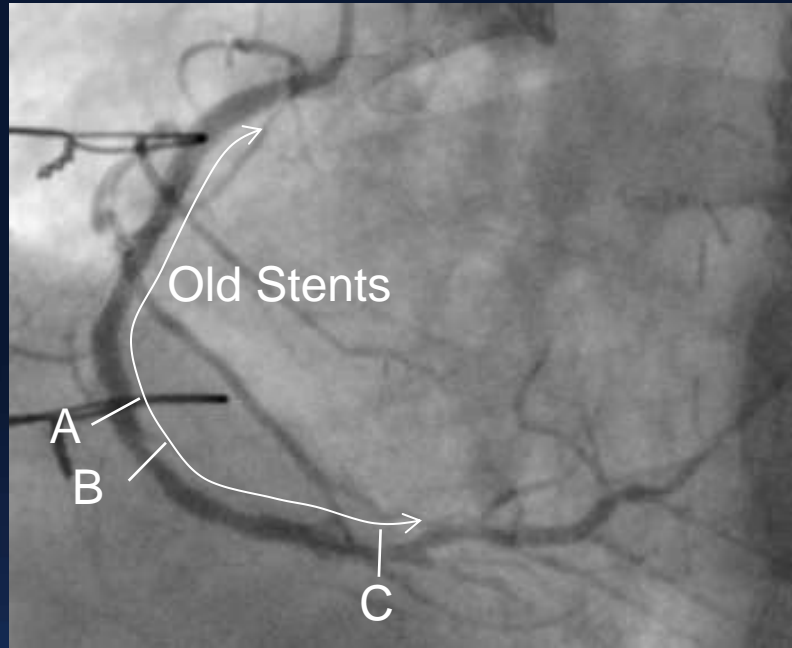


# Pre-PCI

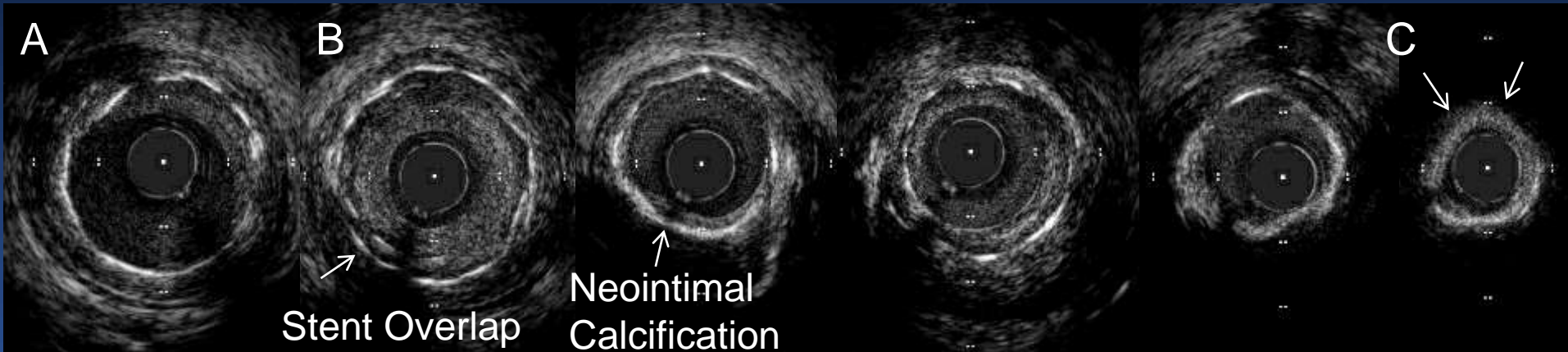


# Post-Wiring

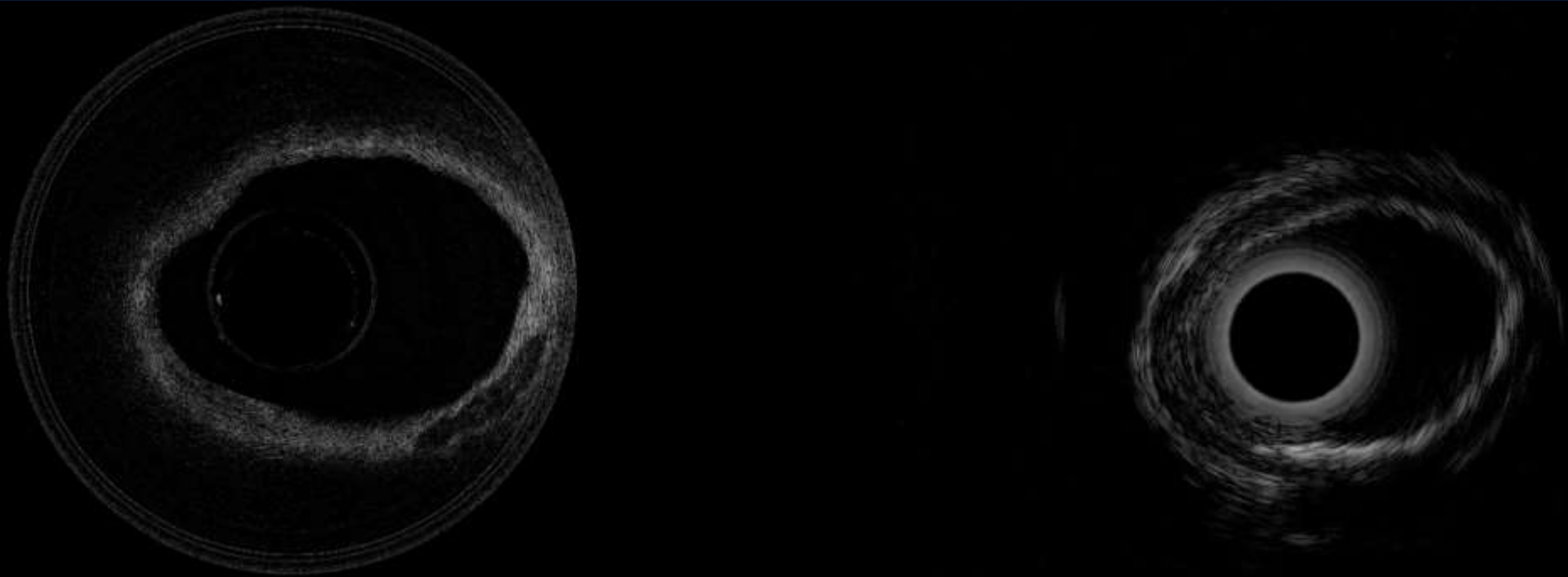




Neointimal  
Attenuated Plaque



# OCT/IVUS Combined Catheter

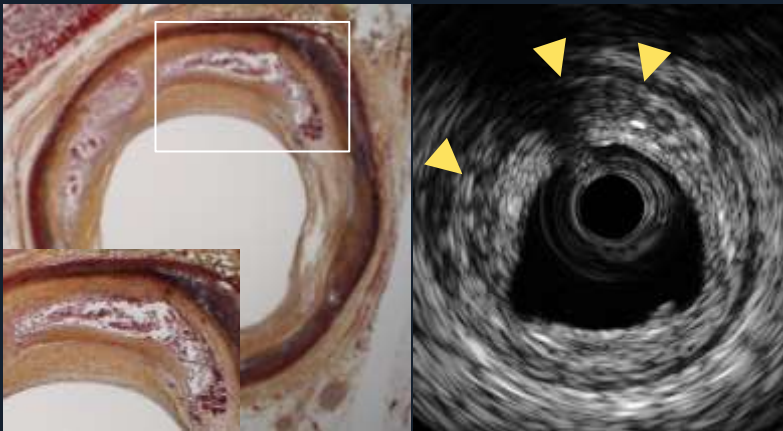


Courtesy for Pranav Patel & Zhongping Chen University of California, Irvine; Ram Ramalingam OCT Medical Imaging Inc.

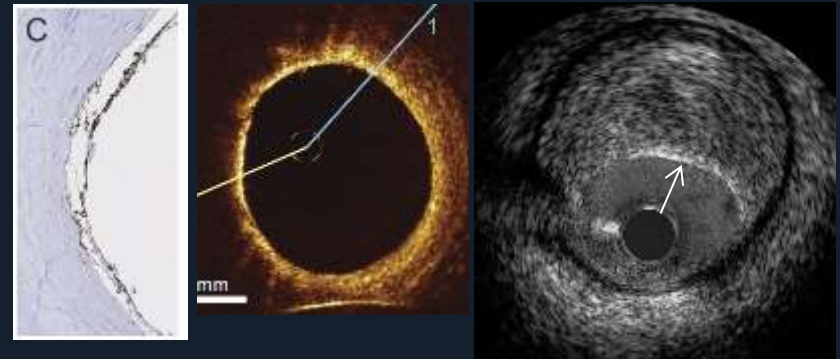
# What we are looking for more?

- Intraplaque Hemorrhage
- Thrombus
- Macrophage
- Bioabsorbable stent, stent fracture
- Edge dissection

## Intraplaque Hemorrhage



## Macrophage?



Soest G et al, JACC Img 2011; 4:810-3.

# Summary

- 1. New generation of high definition (frequency) of IVUS will provide better resolution (close to OCT) with clinically enough penetration (vessel size evaluation is possible).**
- 2. Clinically useful easier diagnosis such as under-expansion and dissection will be expected.**
- 3. Understanding of plaque vulnerability (intraplaque hemorrhage, macrophage, thrombus) would be promising.**