

How I Adopted Intravascular Imaging into My Practice

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#RadialFirst

Disclosures

- No Consulting RWI since March 2018

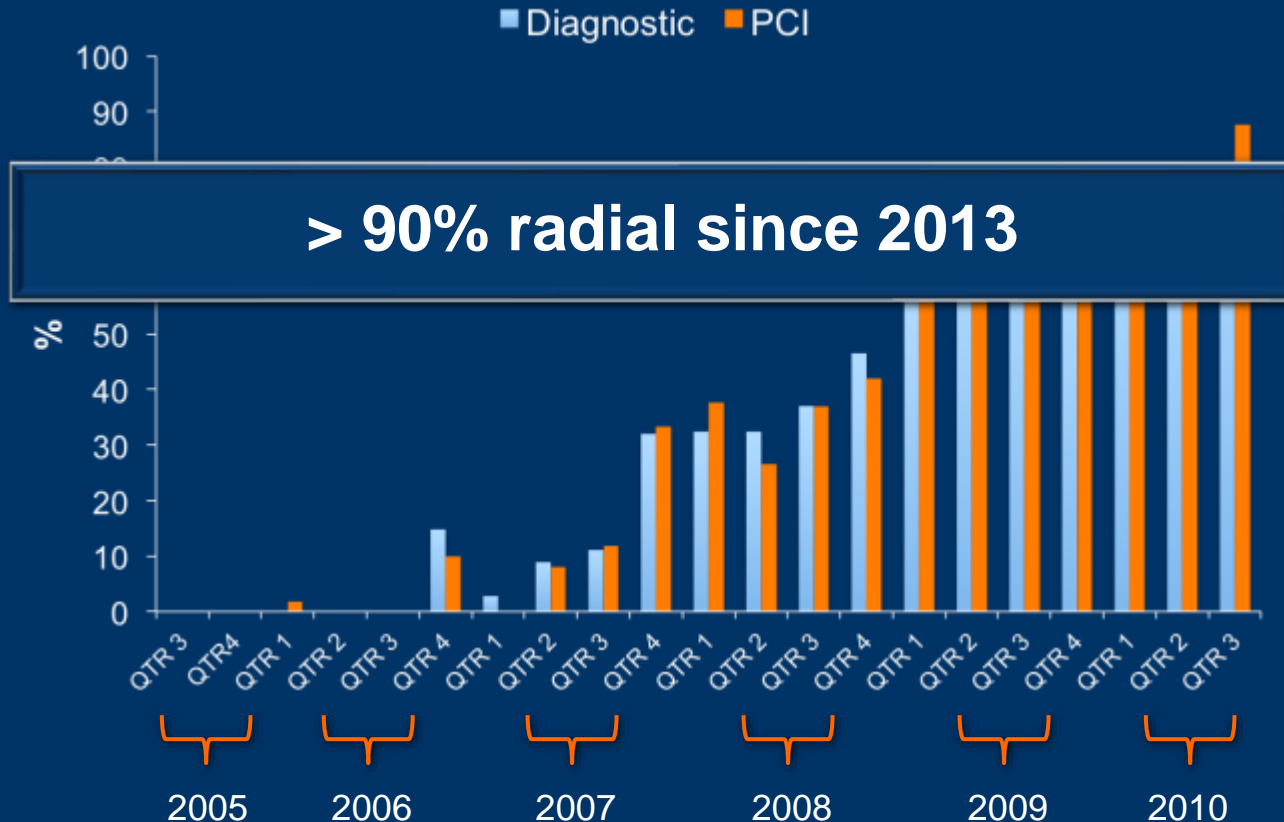
- “Slowness to change usually means fear of the new”
 - Philip Crosby

- “Change before you have to”
 - Jack Welch

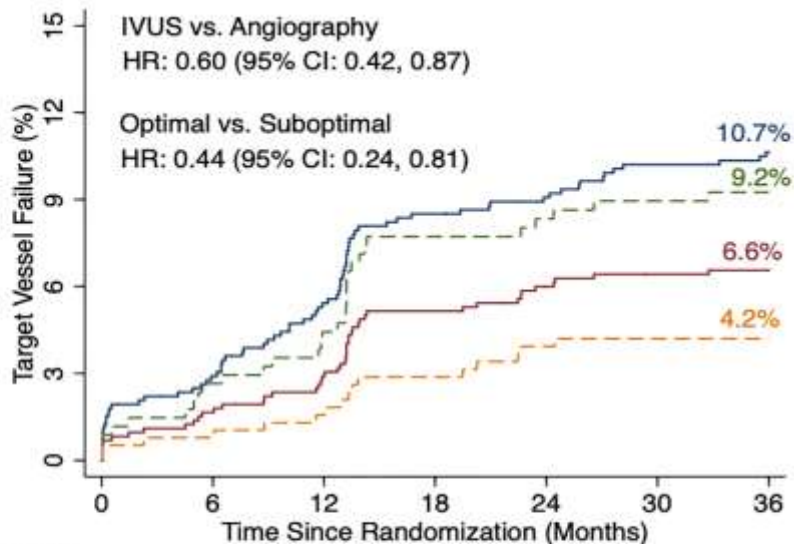
About me...

- ▣ Completed Fellowship 2004
- ▣ During fellowship:
 - ▣ A grand total of 2 transradial cases, only one successfully completed via radial access
 - ▣ A grand total of 1 case of IVUS
 - ▣ A grand total of ZERO FFR cases
- ▣ Joined Duke & Durham VAMC faculty 2004

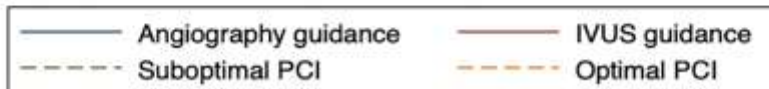
Practice change #1: Conversion to Radial First



Three-year Clinical FU



	0	6	12	18	24	30	36
Number at risk							
Angiography guidance	724	698	676	651	643	634	631
IVUS guidance	724	710	696	676	660	655	654
Suboptimal PCI	340	329	320	309	300	296	295
Optimal PCI	384	381	376	367	360	359	359





MAY 14TH 2020

SCAI Issues Position Statement on the Performance of Percutaneous Coronary Intervention in Ambulatory Surgical Centers

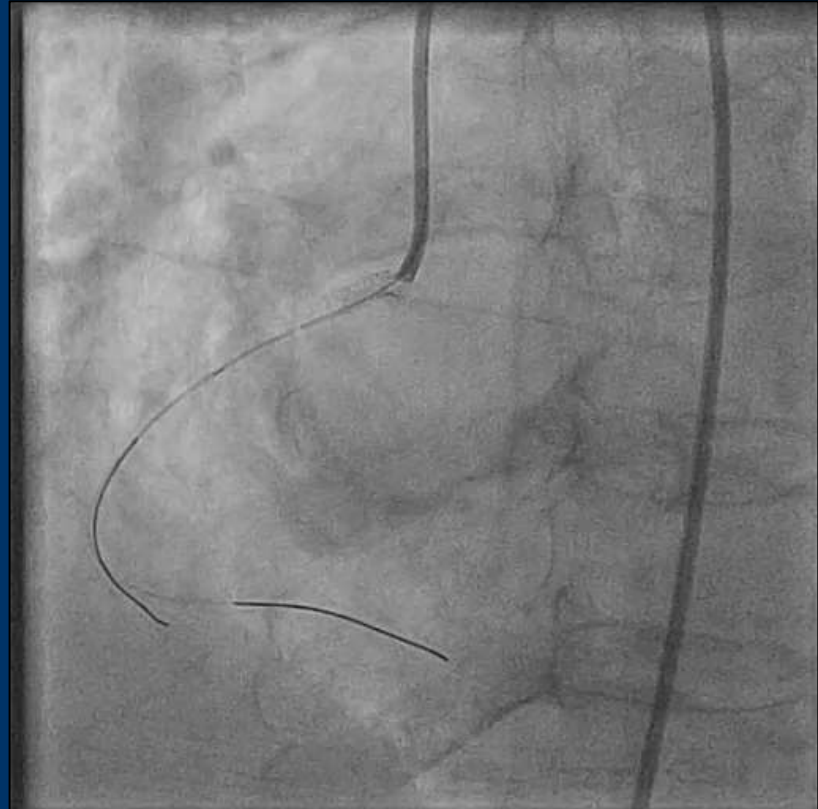
Press Release

Clinical Practice

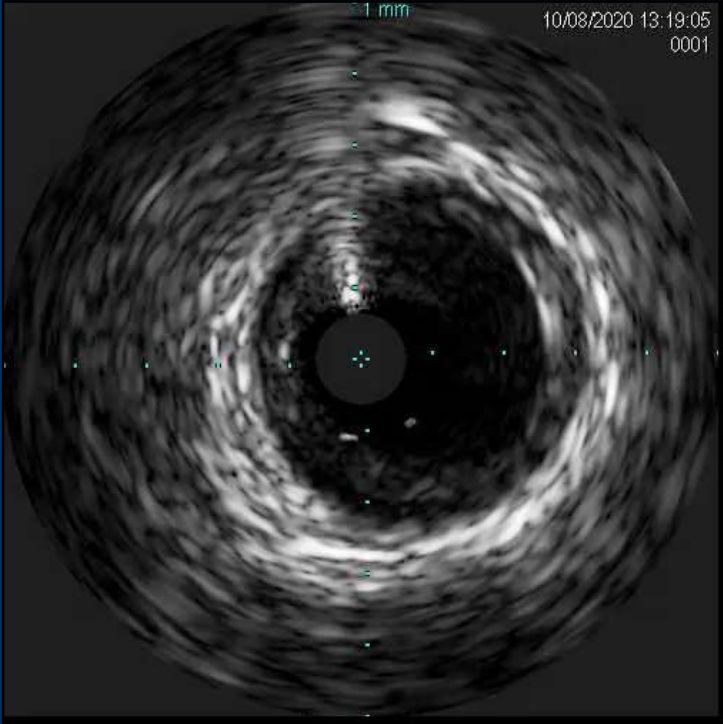


Practice change #2: Implementation of “optimized PCI”

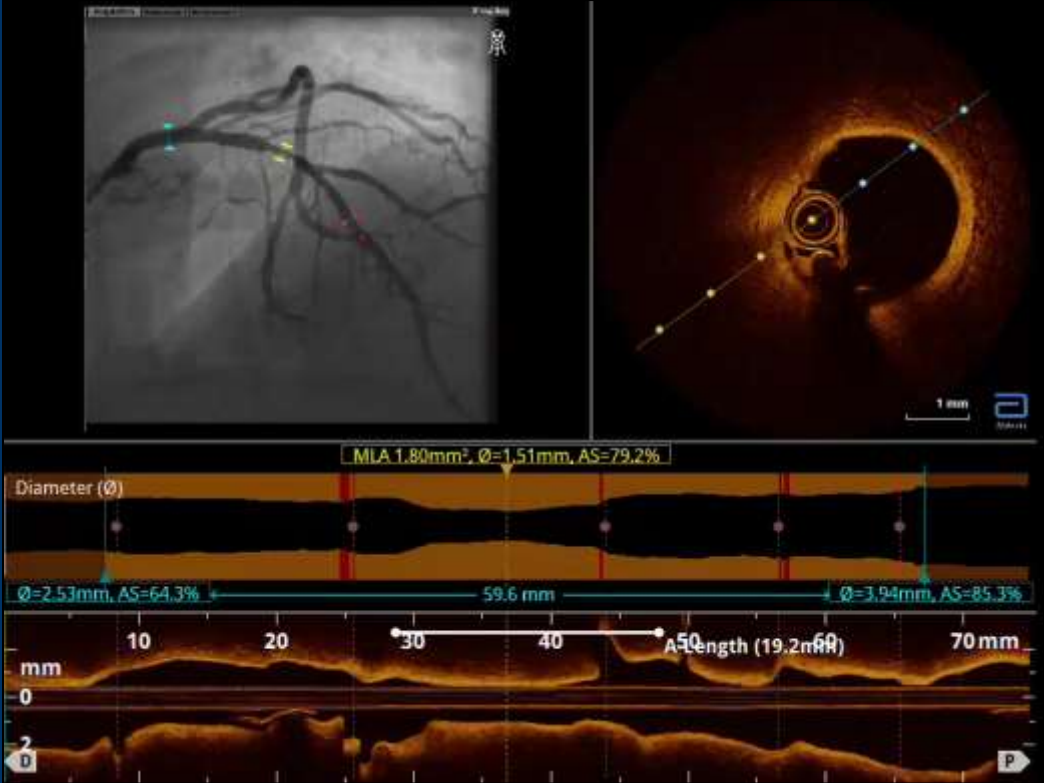
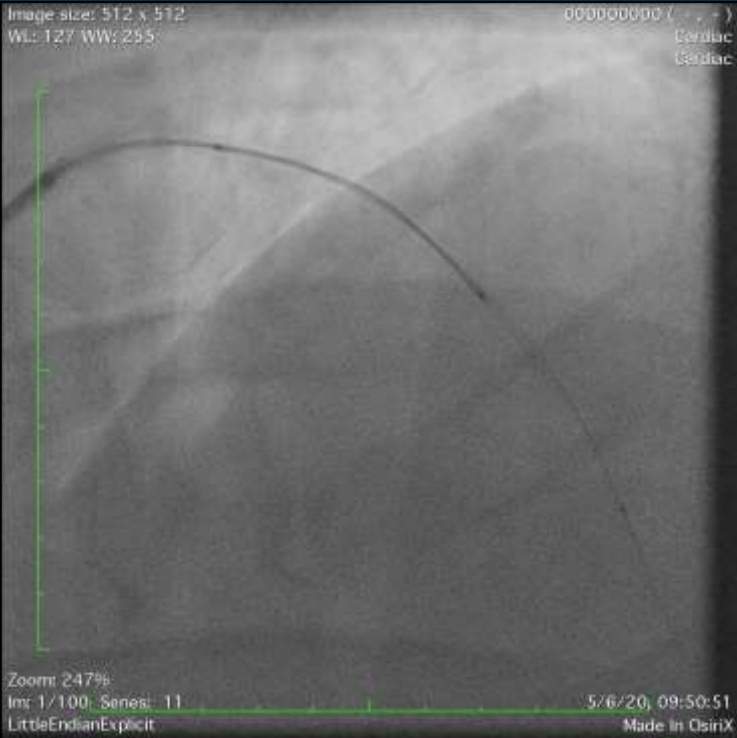
- 84 yo admitted with NSTEMI
- Small radial and ulnar arteries by U/S
- U/S guided RFA approach
- Hx of PCI at OSH
 - 3.0 X 18 DES
- Stent protrusion into aorta
- Angio after predilation



Practice change #2: Implementation of O-PCI

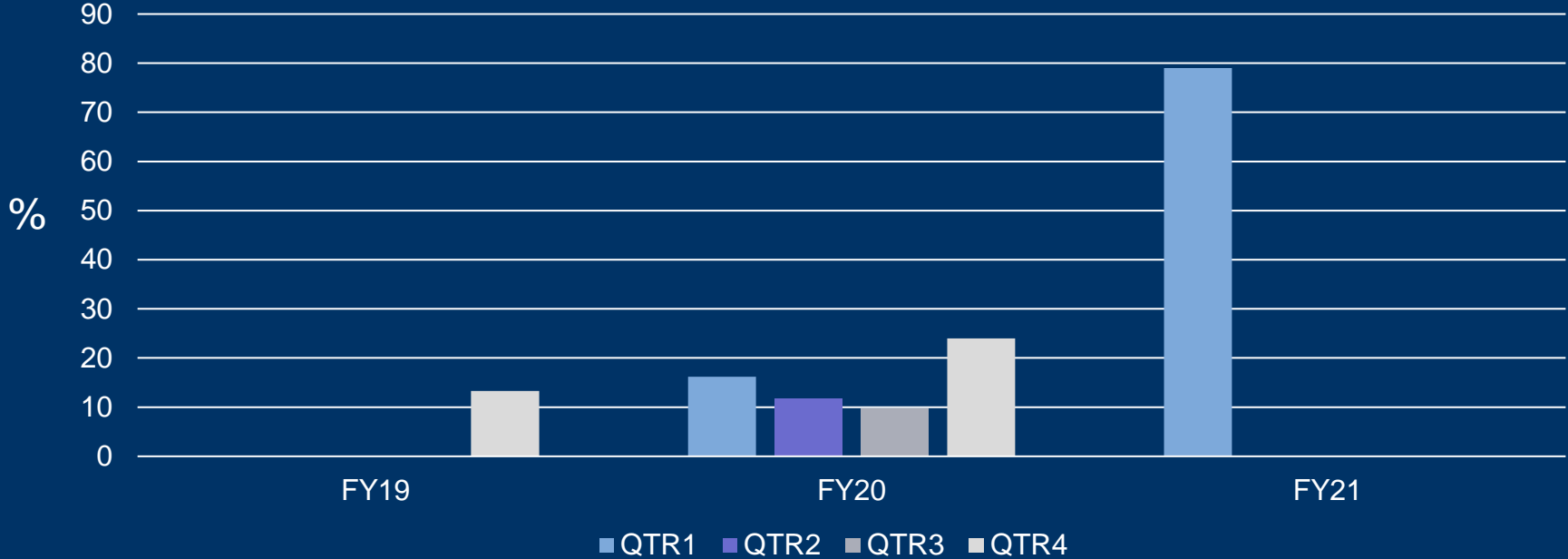


October 2019 – installation of OCT with co-registration



Growth of IC imaging at our institution

OCT Use



5 Contributors to adoption

- **The data** – continues to evolve but appears to show better outcomes with IC imaging, especially in complex lesions
- **Humility** – admit what you don't know and resolve to learn
- **Technology** – integration of imaging into the workflow
- **Education/Training** – leverage the community, train the cath lab staff
- **Consistency** – consistency leads to proficiency

How O-PCI changed my practice

Summary

- n Imaging-guided PCI is the evidence-based approach to coronary intervention
- n Adoption requires commitment, training, and consistency
- n Train yourself and the cath lab staff
- n Don't ever finish a case with uncertainty

Duke Univ. Medical Center



Thank you.

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