

**Erasmus MC**

Universitair Medisch Centrum Rotterdam



# **Next Generation 3D-OCT: How Beneficial in Practice?**

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**Thoraxcenter**  
**Erasmus Medical Center**  
**Rotterdam, NL**



# 3D-OCT: How beneficial in clinical practise?

- Atherosclerosis is a disease of the arterial vessel wall
- The standard imaging method, angiography, however, does only visualize the lumen, not the arterial wall



We work in 3D space on a moving object using

- 2D imaging method
- Only indirect visualization of anatomy
- Poor visualization of devices



# 3D-OCT: How beneficial in clinical practise?

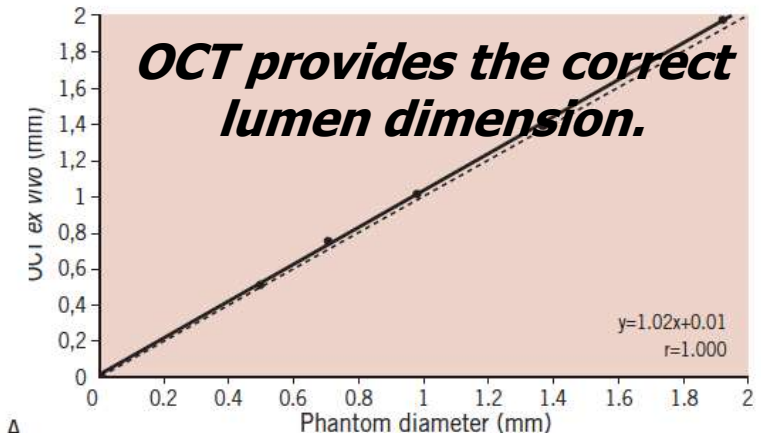
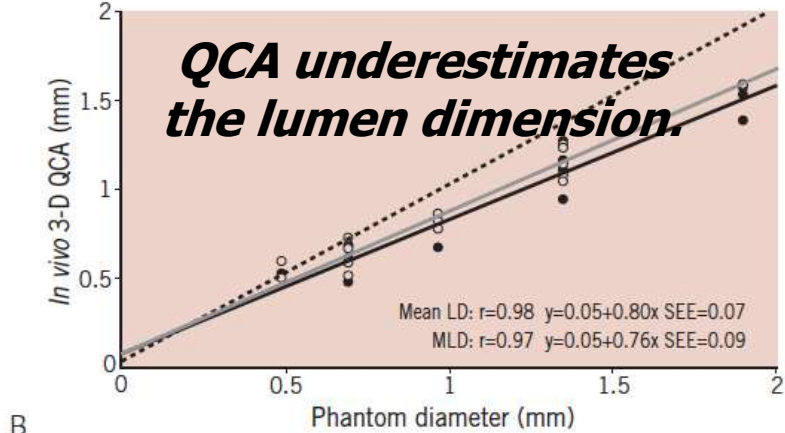
## *In vivo* validation of a novel three-dimensional quantitative coronary angiography system (CardiOp-B™): comparison with a conventional two-dimensional system (CAAS II™) and with special reference to optical coherence tomography

Clinical research

EuroIntervention

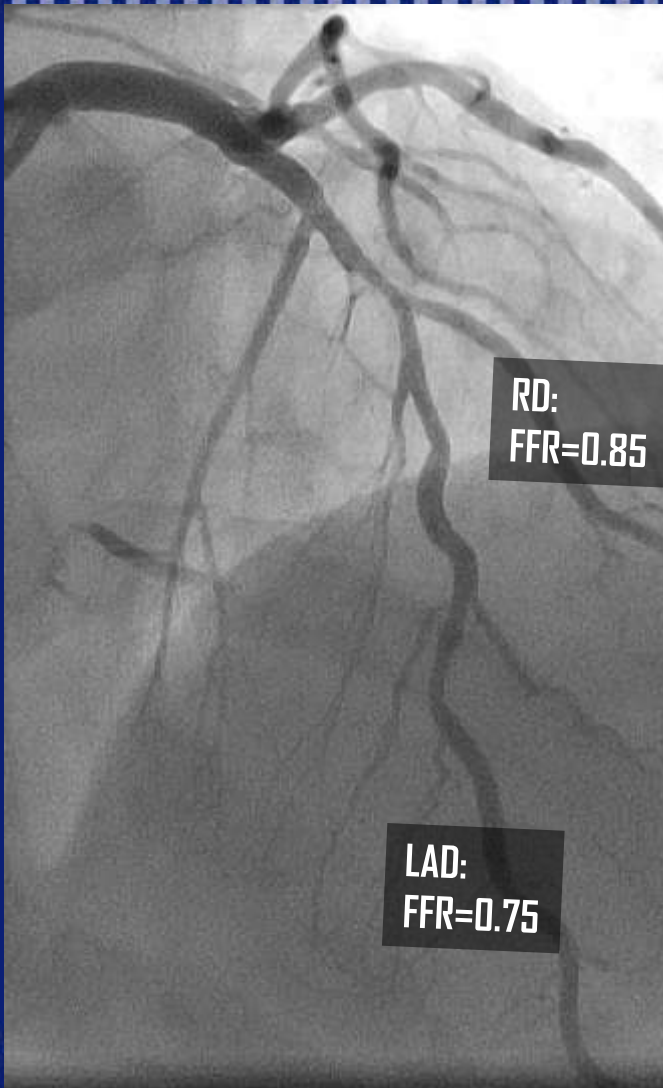
Keiichi Tsuchida, MD, PhD; Willem J. van der Giessen, MD, PhD; Mark Patterson, MRCP; Shuzou Tanimoto, MD; Héctor M. García-García, MD, MSc; Evelyn Regar, MD, PhD; Jurgen M. R. Ligthart, BSc; Anne-Marie Maugenes; Gio Maatrijk; Jolanda J. Wentzel, PhD; Patrick W. Serruys\*, MD, PhD, FACC, FESC

Thoraxcenter, Erasmus Medical Center, Rotterdam, The Netherlands



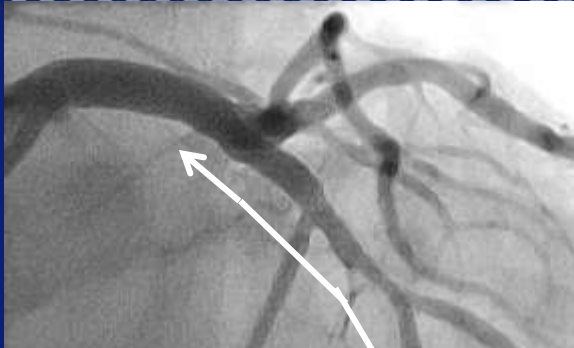


# 3D-OCT: How beneficial in clinical practise?





# 3D-OCT: How beneficial in clinical practise?



Mean Diameter: 1.0mm  
 Min. L. Diameter: 0.8mm  
 Max. L. Diameter: 1.2mm  
 Mean Diameter: 1.0mm  
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 Min. L. Diameter: 0.8mm  
 Max. L. Diameter: 1.2mm

- *Reviewing a pullback by scrolling back and forth is time consuming*
- *Risc to “overlook” a detail*
- *What’s about dimensions needed for Tx planning:*
  - > *Stent diameter?*
  - > *Stent length?*

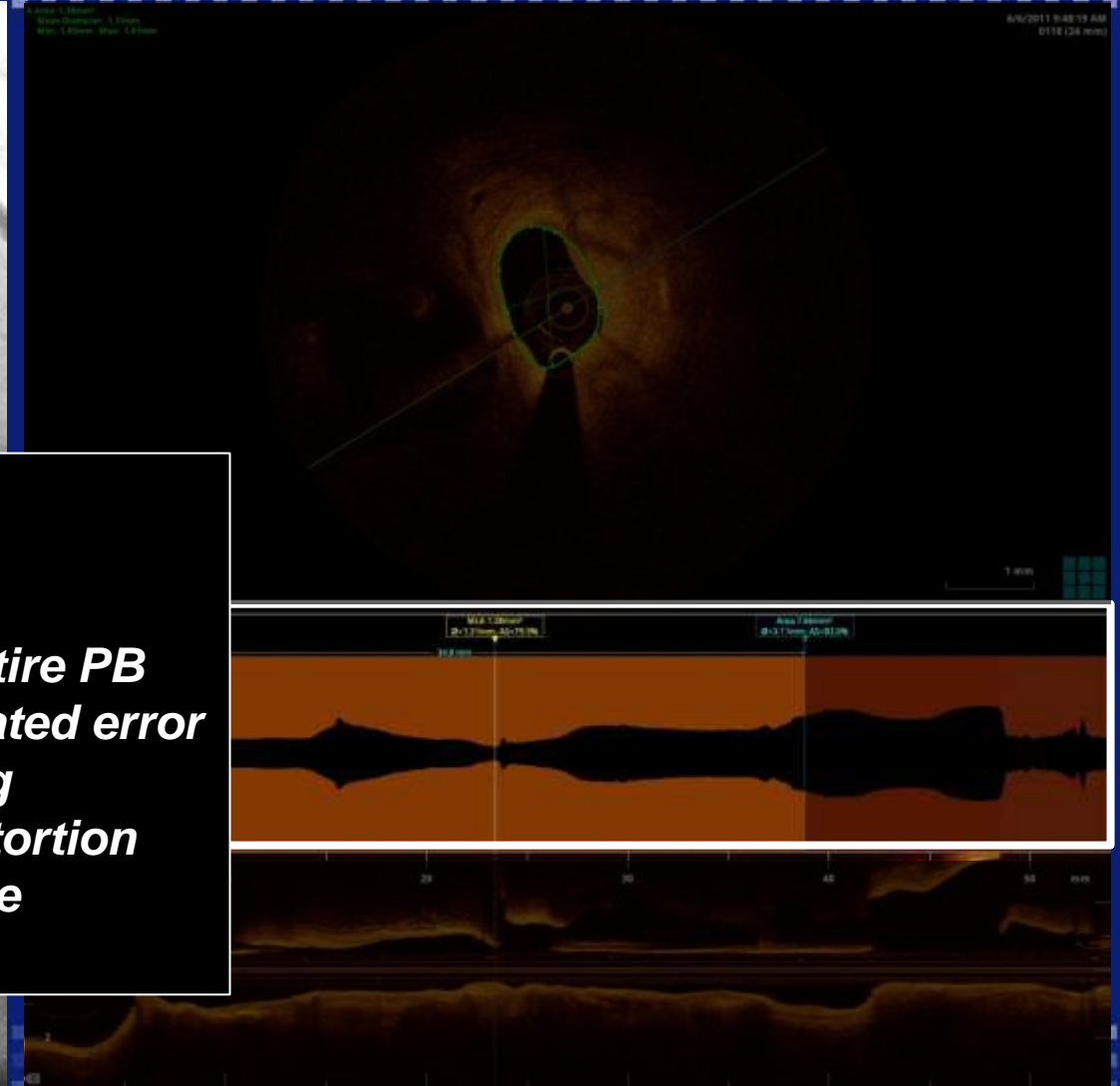






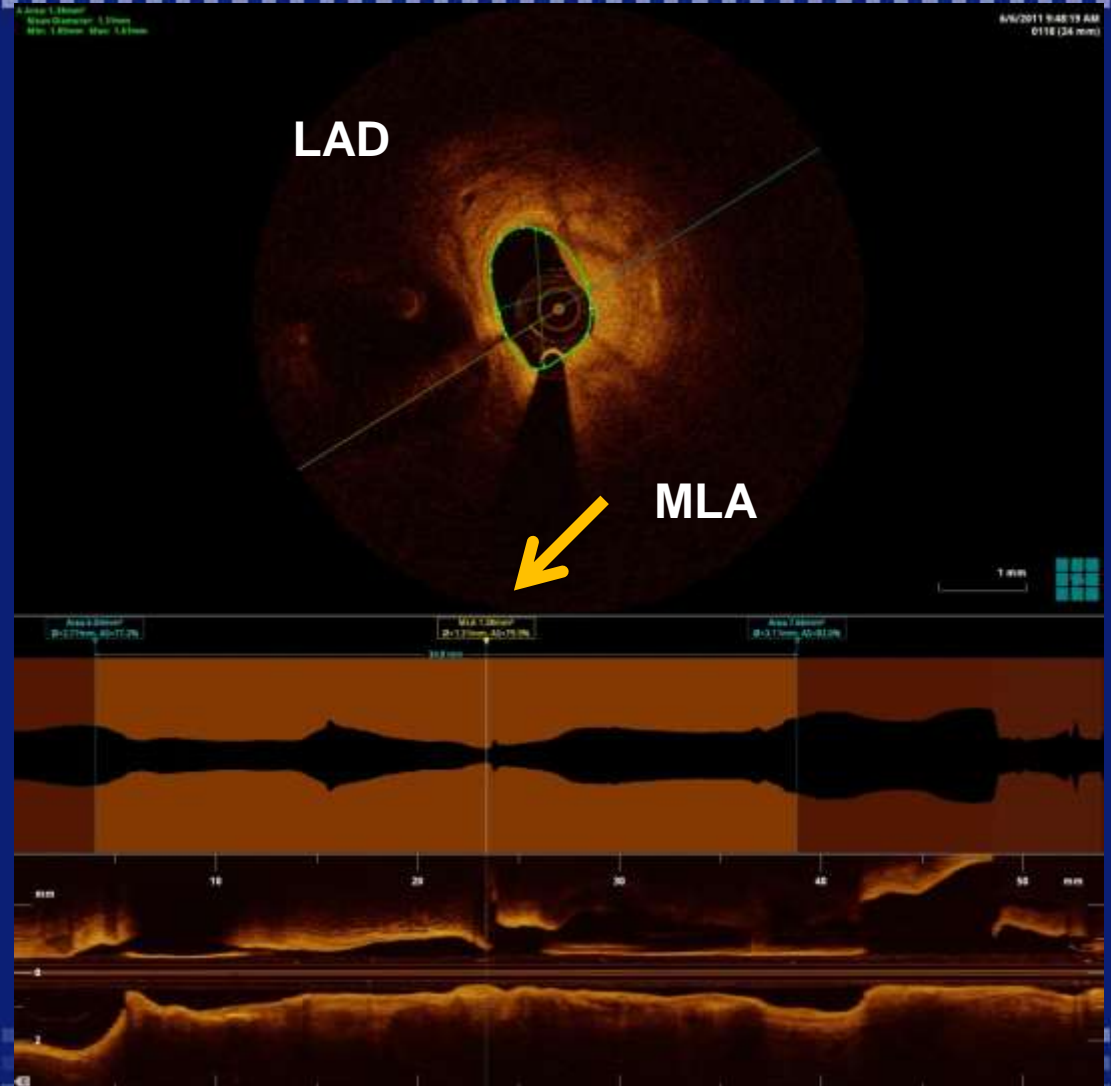
# 3D-OCT: How beneficial in clinical practise?

- **OCT = 3D dataset**
- **Representation of *TRUE* lumen diameter over the length of the entire PB**
  - no projection-related error
  - no foreshortening
  - no geometric distortion
- **Instantaneously available**

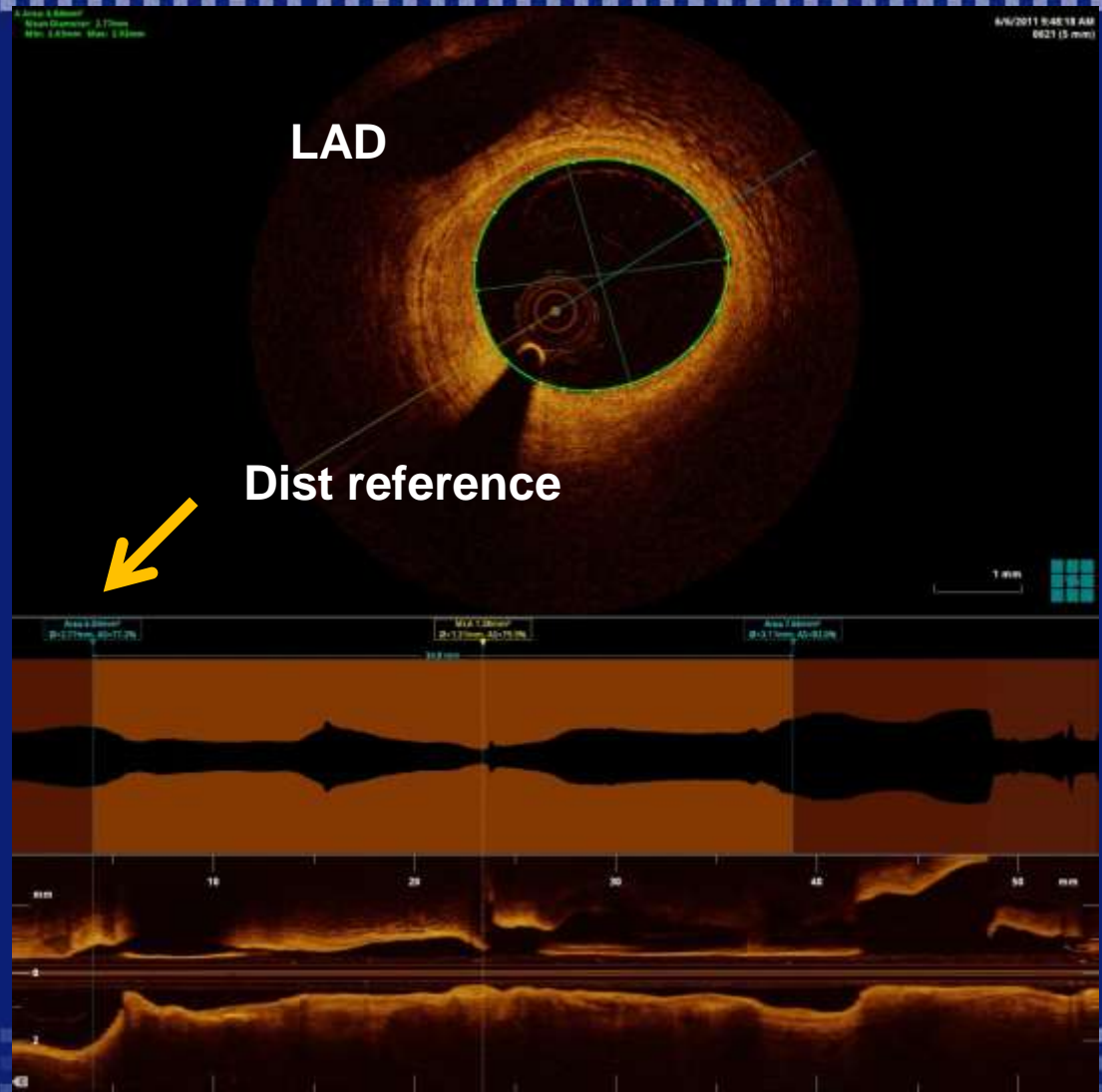




# 3D-OCT: How beneficial in clinical practise?



# 3D-OCT: How beneficial in clinical practise?





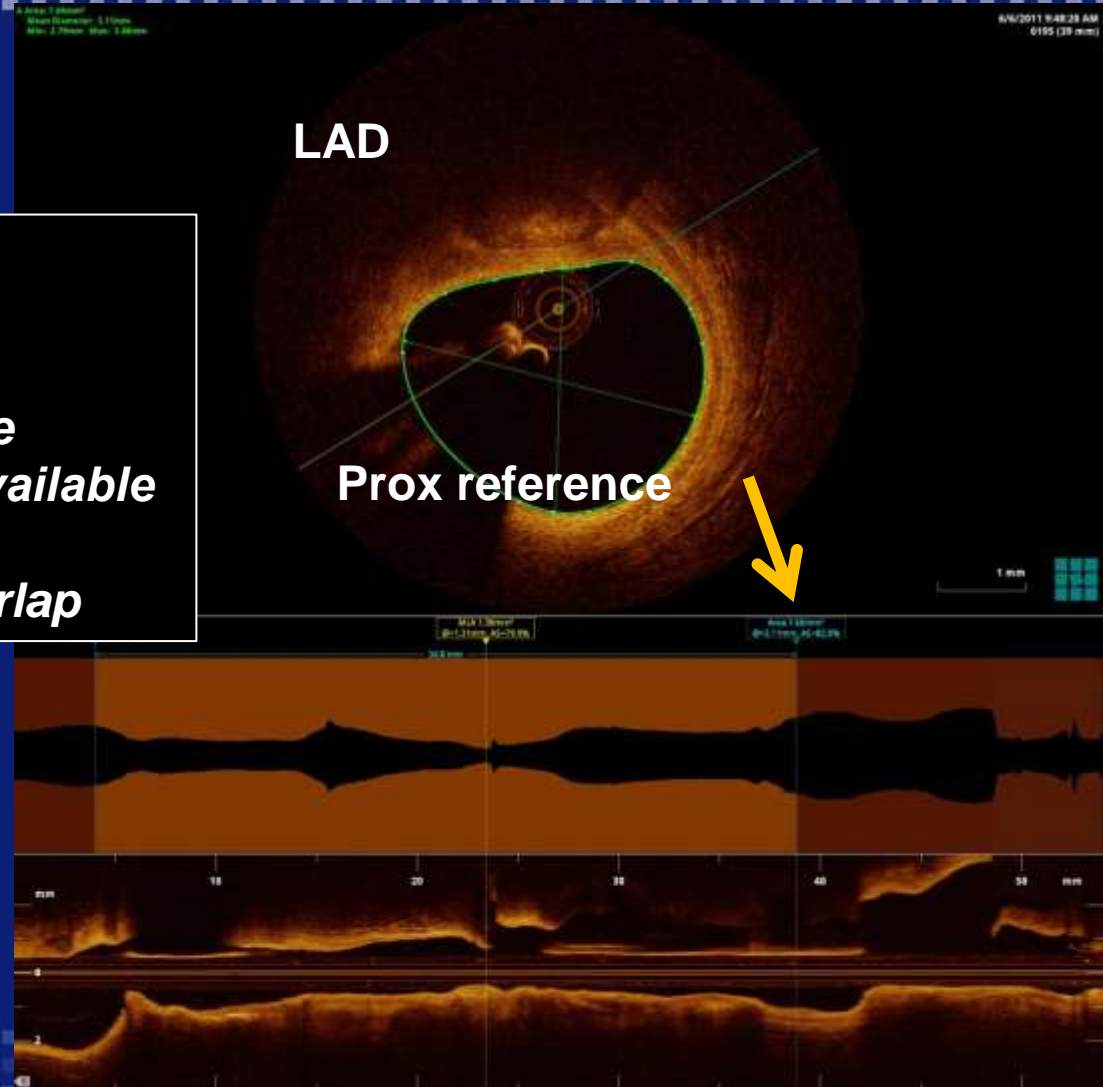
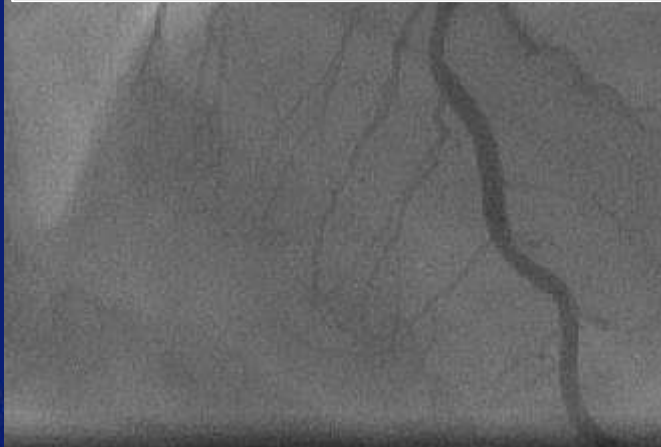


# 3D-OCT: How beneficial in clinical practise?



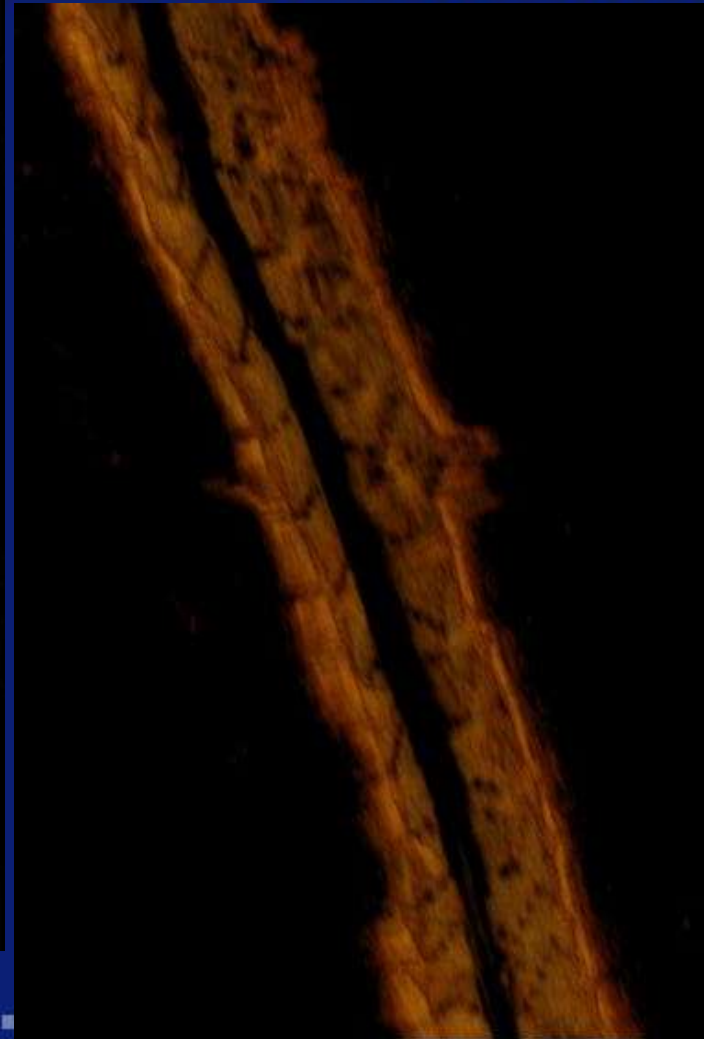
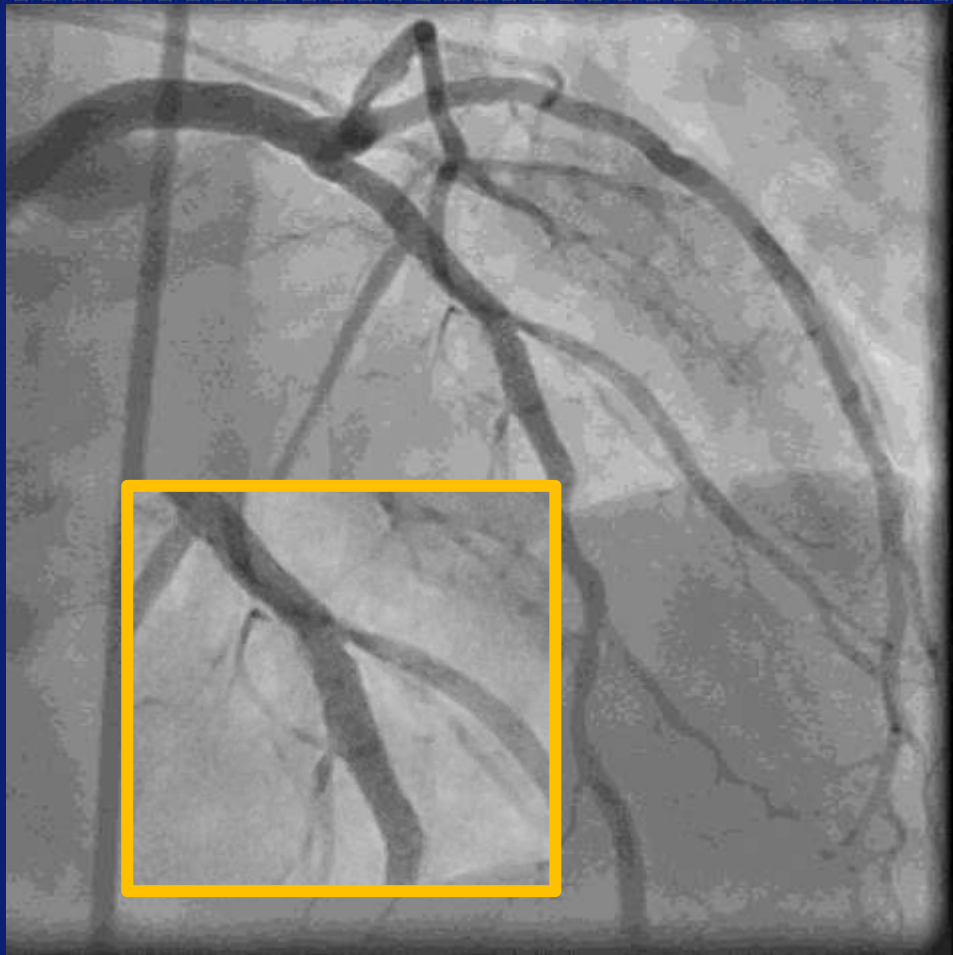
## ***Landing zone selection***

- ***Largest lumen with***
- ***Least disease***
- ***Coverage of necrotic core***
- ***“Virtual planning” with available stent length***
- ***Plan regions of stent overlap***



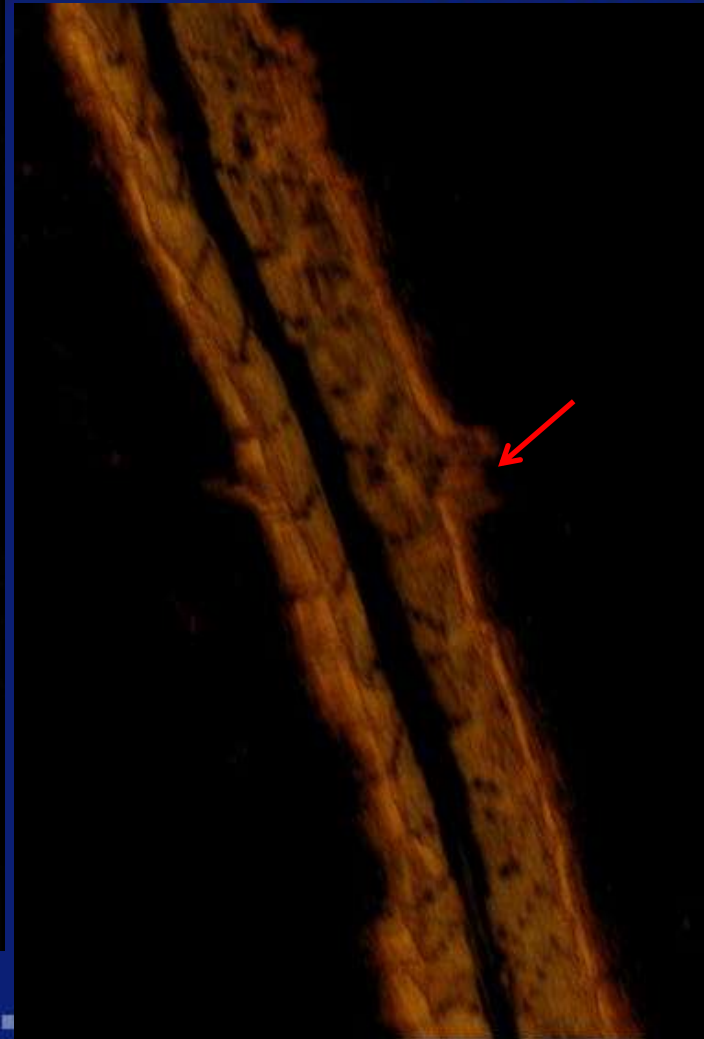
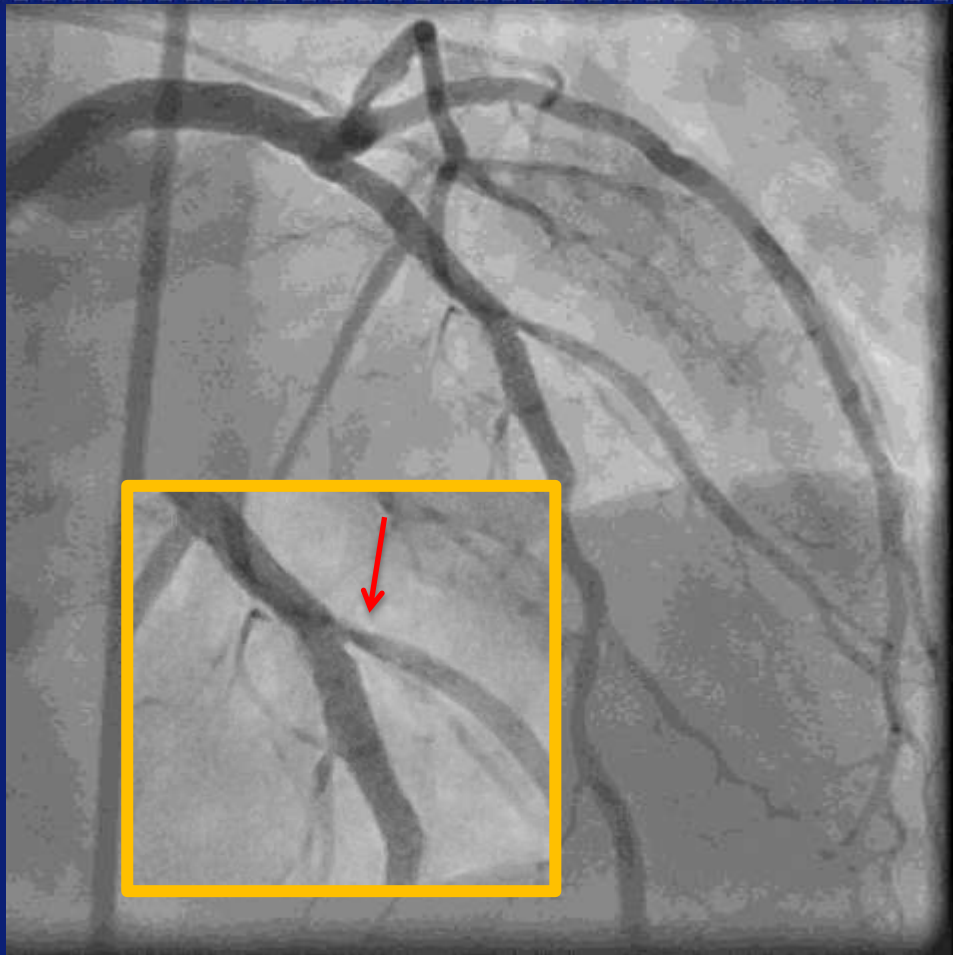
# 3D-OCT: How beneficial in clinical practise?

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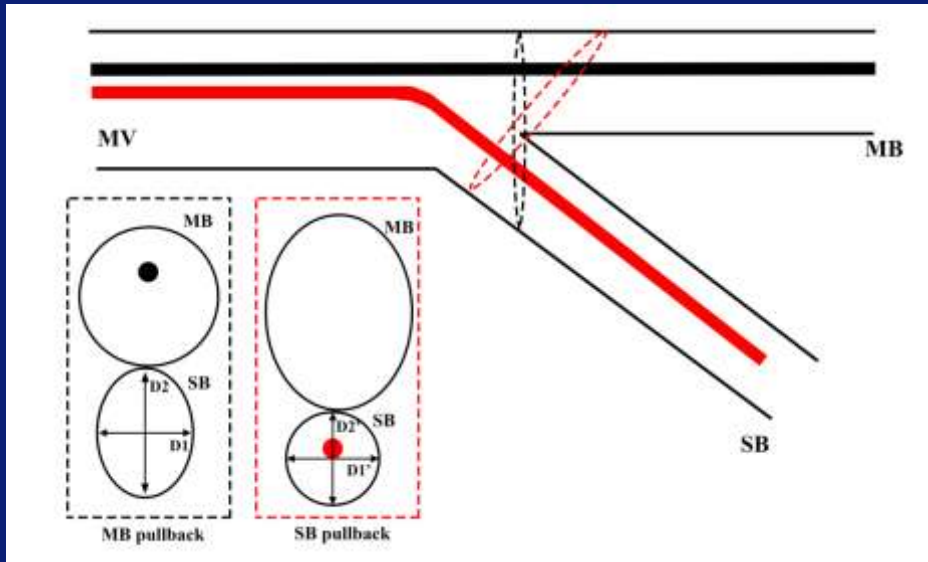
# 3D-OCT: How beneficial in clinical practise?



# 3D-OCT

## Bifurcation PCI guidance

### Assessment of SB ostium



- Potential error in SB measurements when performed from a MB pullback

SB side branch  
MB main branch



# 3D-OCT

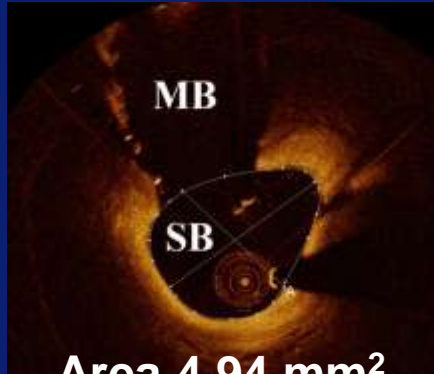
## Bifurcation PCI guidance

Assessment of SB ostium

SB Pullback



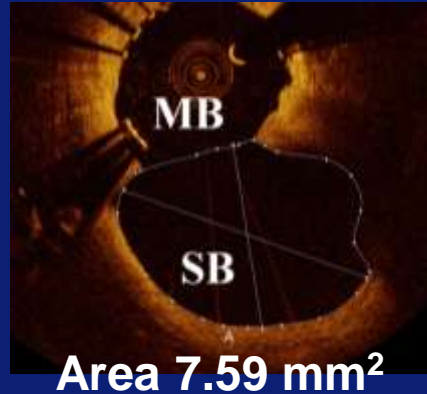
Conventional analysis



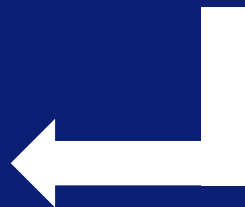
MB Pullback



Conventional analysis



- Potential error in SB measurements when performed from a MB pullback
- 3D rendering can help assessment of the ostium

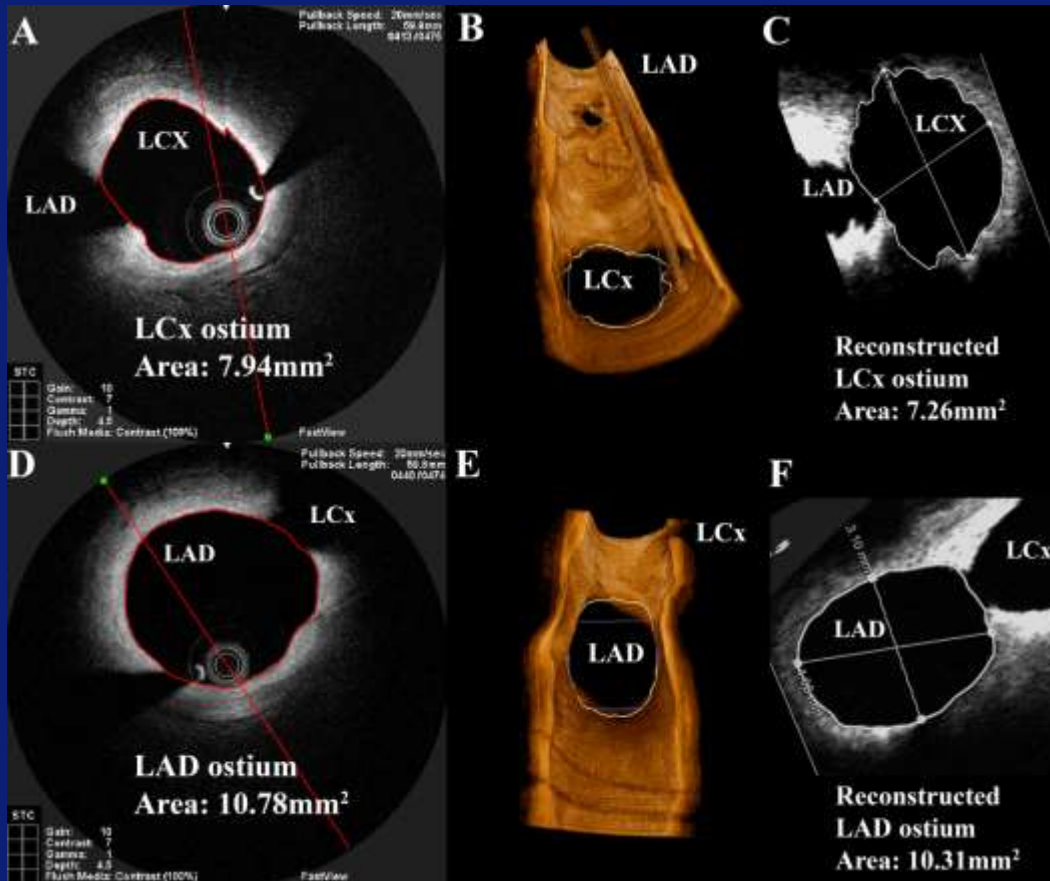


Cut plane analysis

# 3D-OCT

## Bifurcation PCI guidance

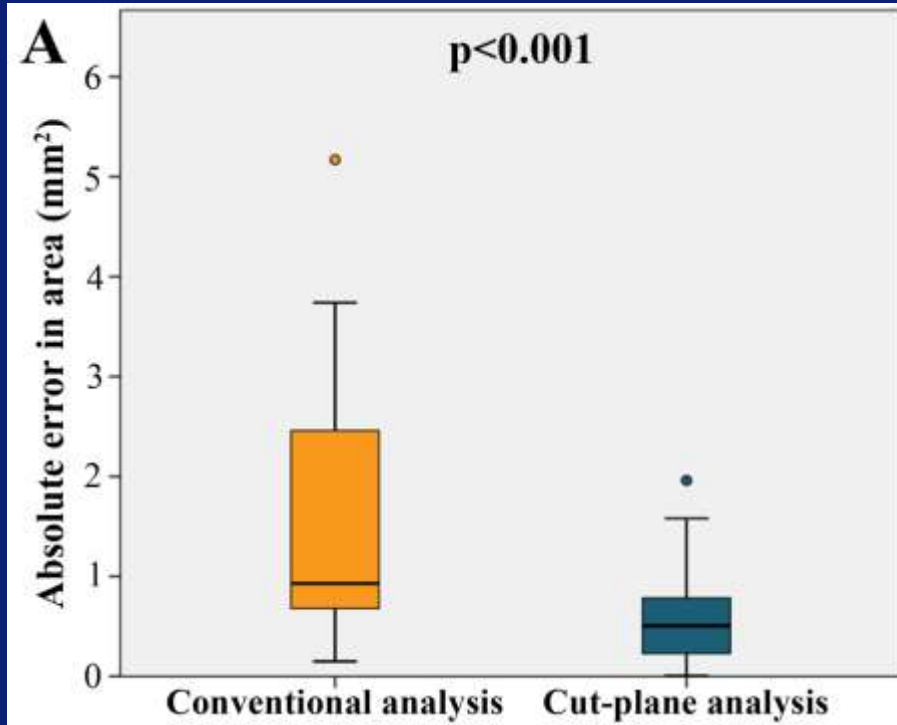
### Assessment of SB ostium



- Potential error in SB measurements when performed from a MB pullback
- 3D rendering can help assessment of the ostium
- Reconstruction of the SB ostia using a contralateral OCT pullback

# 3D-OCT Bifurcation PCI guidance

## Assessment of SB ostium

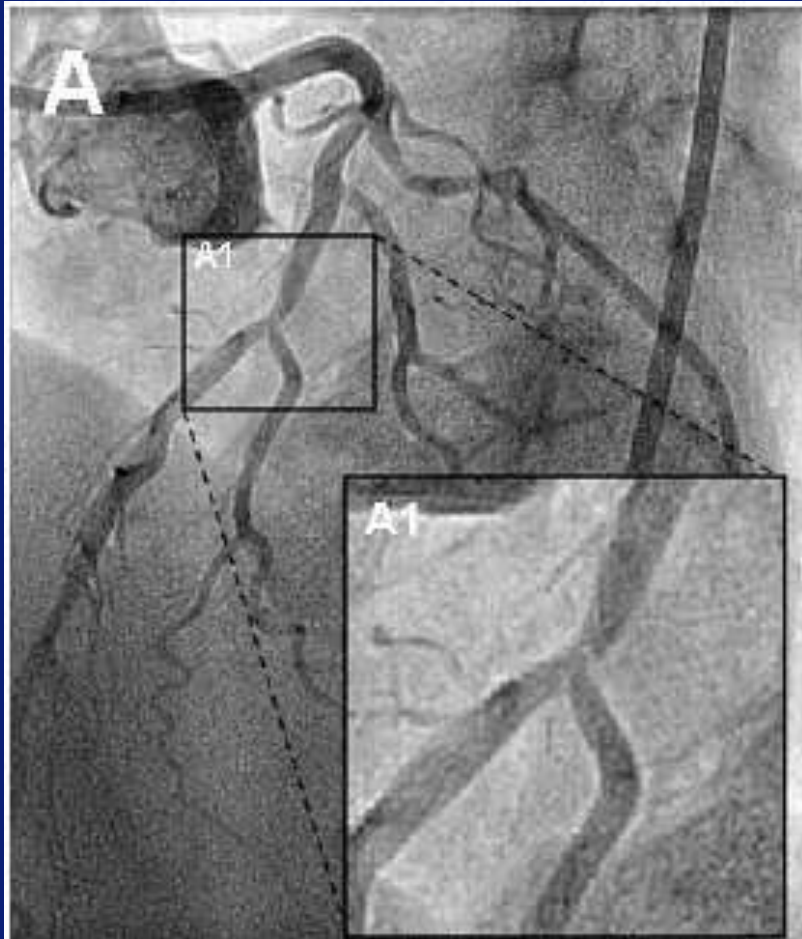


- Potential error in SB measurements when performed from a MB pullback
- 3D rendering can help assessment of the ostium
- Reconstruction of the SB ostia using a contralateral SB OCT pullback
- **Reduction of the error in SB assessment with 3D-OCT based analysis**

# 3D-OCT

## Bifurcation PCI guidance

### Wiring



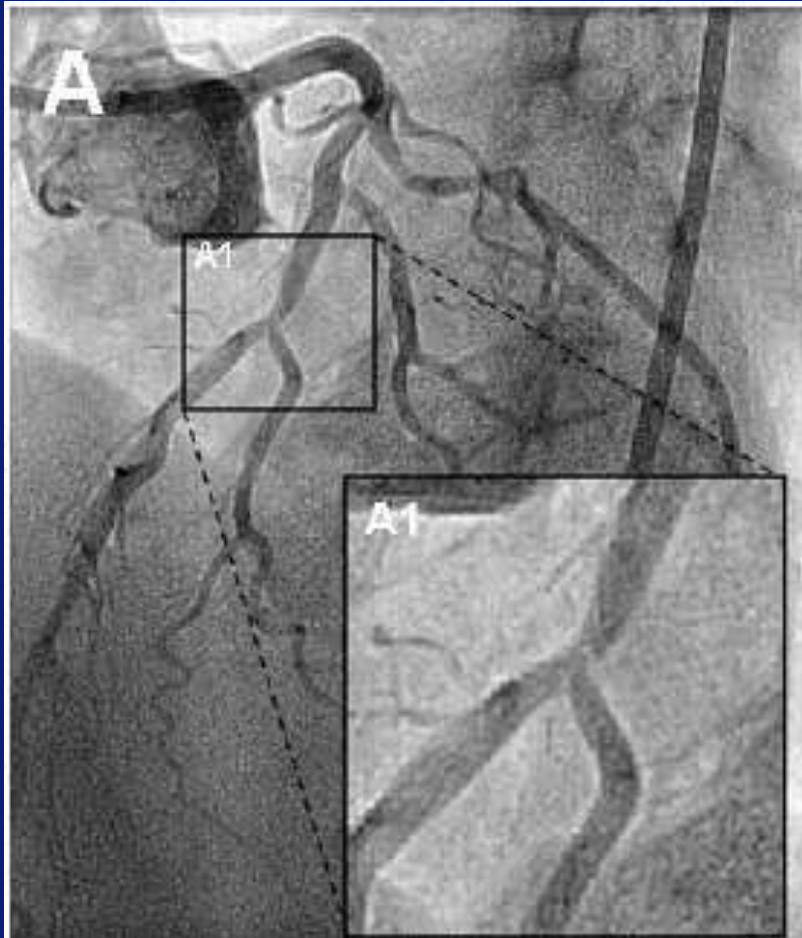
- 55 year old woman with SA
- LAD-LD bifurcation lesion



# 3D-OCT

## Bifurcation PCI guidance

### Wiring

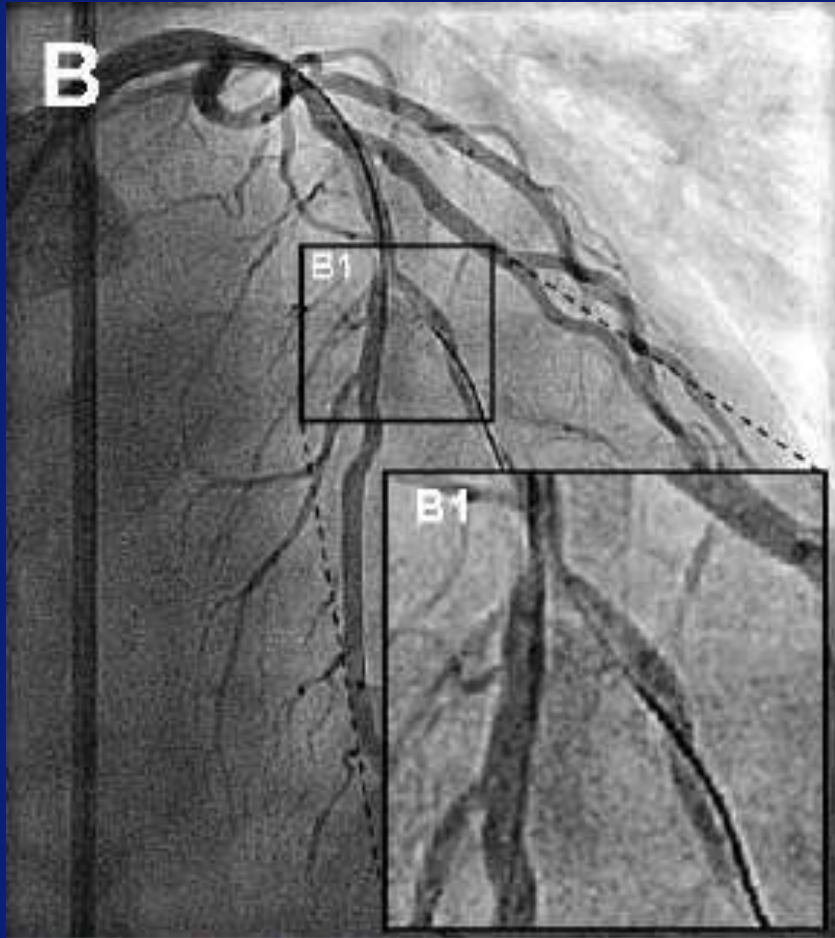


- 55 year old woman with SA
- LAD-LD bifurcation lesion
- **Procedural plan: guidewire LAD + guidewire diagonal branch for patency protection**

# 3D-OCT

## Bifurcation PCI guidance

### Wiring

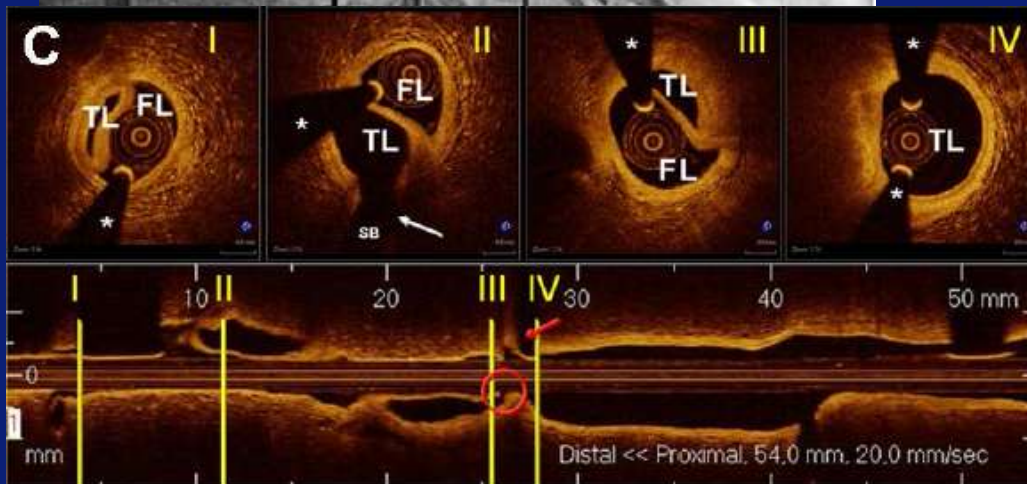
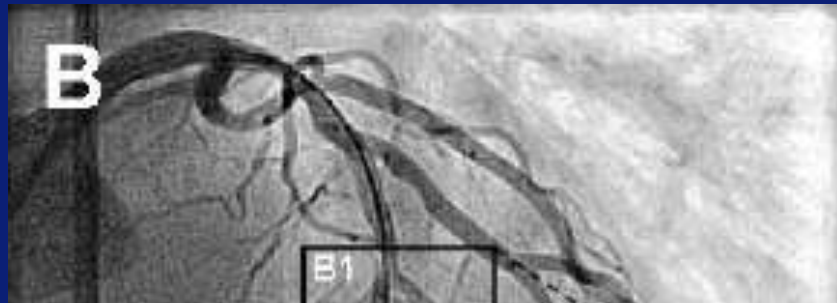


- 55 year old woman with SA
- LAD-LD bifurcation lesion
- Procedural plan: guidewire LAD + guidewire diagonal branch for patency protection
- **Angiography suggestive for dissection**

# 3D-OCT

## Bifurcation PCI guidance

### Wiring



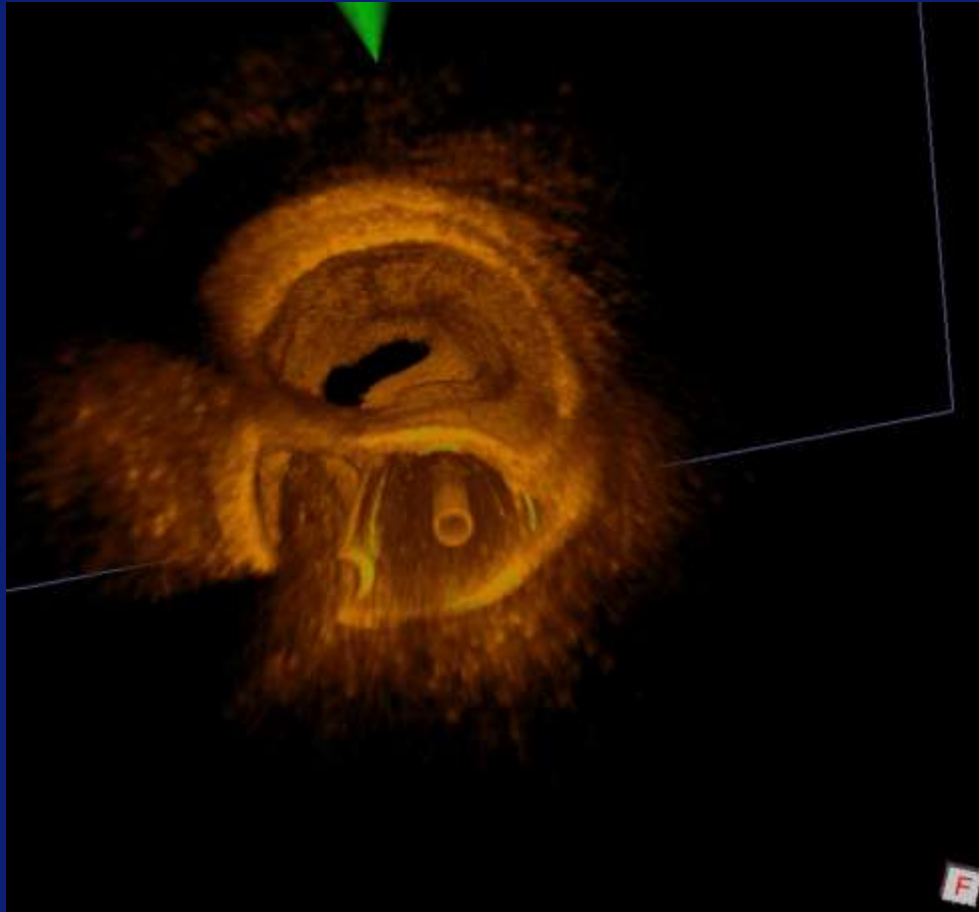
- 55 year old woman with SA
- LAD-LD bifurcation lesion
- Procedural plan: guidewire LAD + guidewire diagonal branch for patency protection
- Angiography suggestive for dissection
- **2D OCT shows wire in false lumen without clear tracking of the course**



# 3D-OCT

## Bifurcation PCI guidance

### Wiring



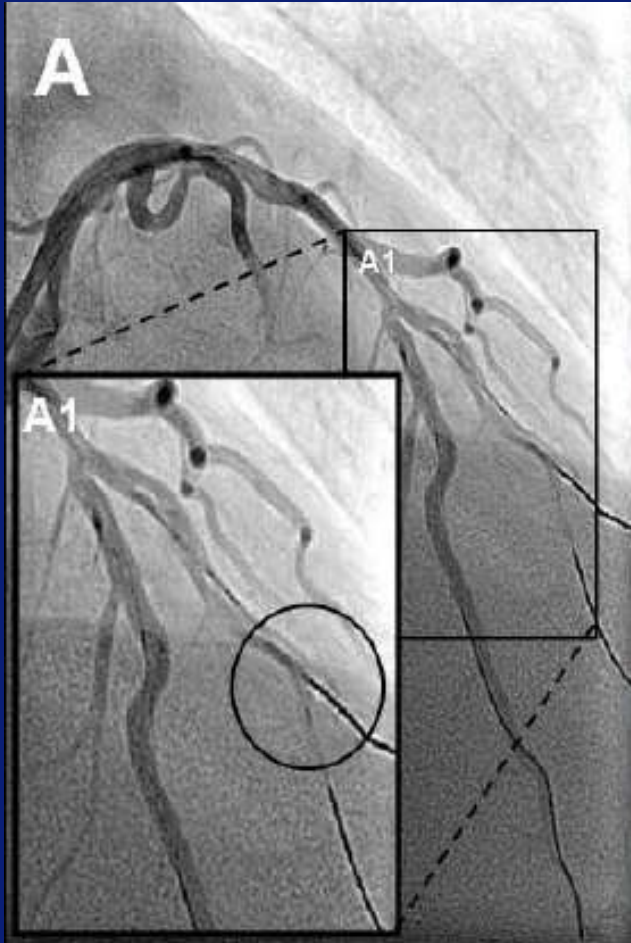
- 55 year old woman with SA
- LAD-LD bifurcation lesion
- Procedural plan: guidewire LAD + guidewire diagonal branch for patency protection
- Angiography suggestive for dissection
- 2D OCT shows wire in false lumen without clear tracking of the course
- **3D OCT demonstrates clearly the extent of the dissection – wire entirely in false lumen**



# 3D-OCT

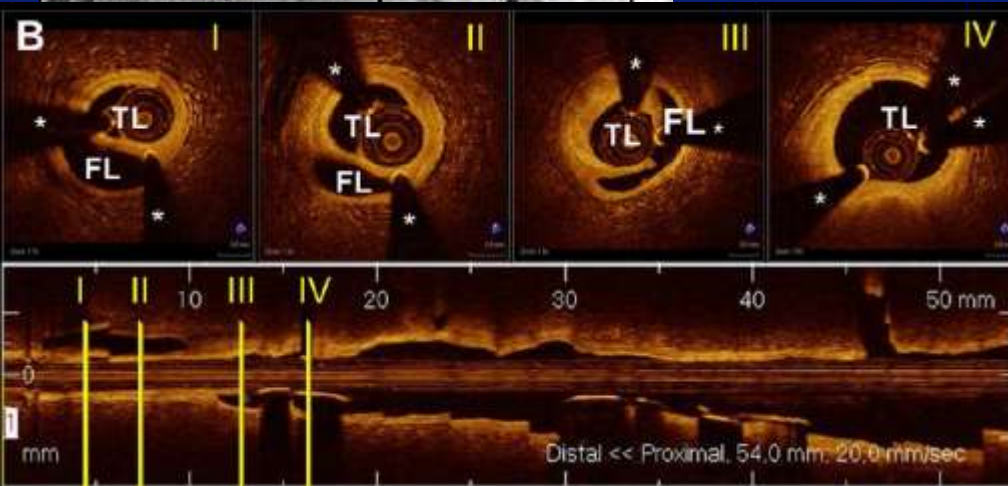
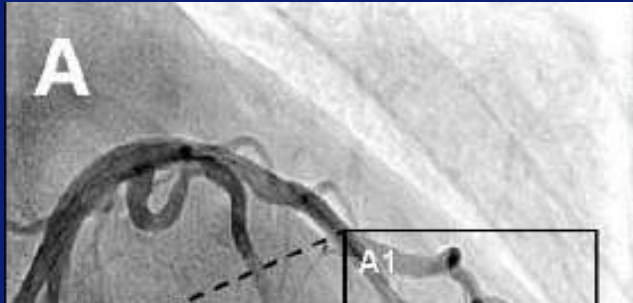
## Bifurcation PCI guidance

### Wiring



- After re-wiring the SB, dissection remains and position of the GW is uncertain
- Repeat OCT study

# 3D-OCT Bifurcation PCI guidance Wiring

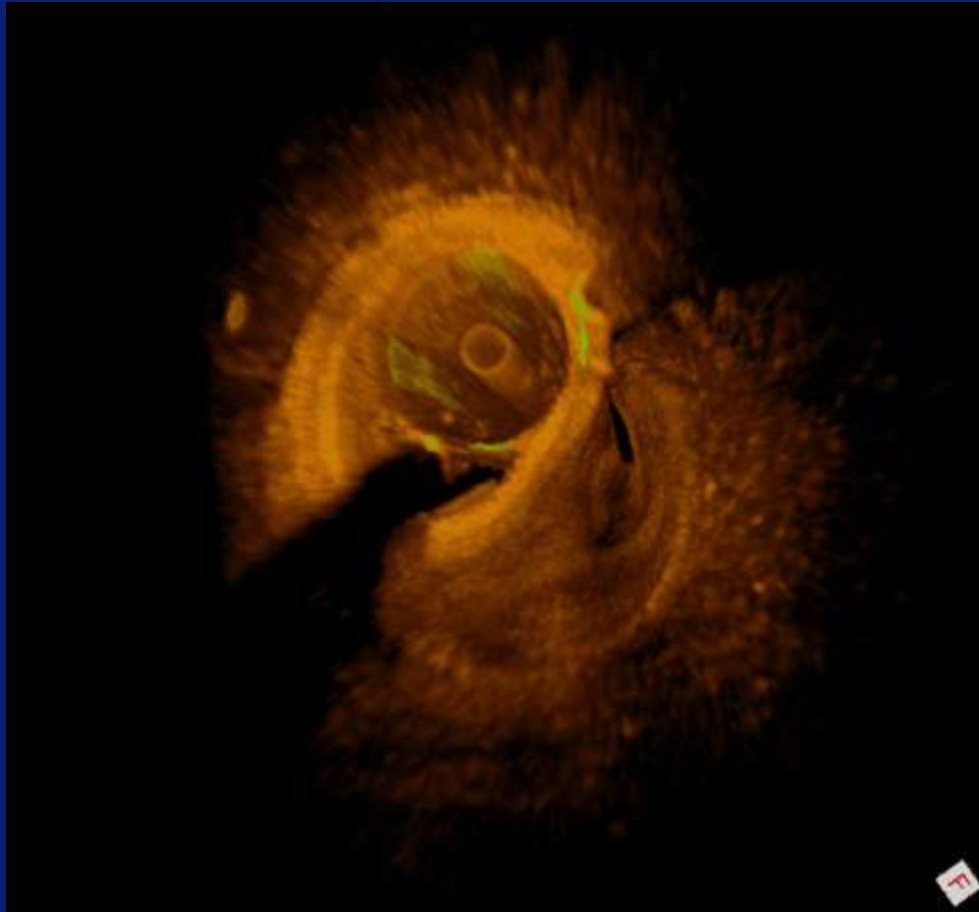


- After re-wiring the SB, dissection remains and position of the GW is uncertain
- Repeat OCT study
- **Guide wire seems in the true lumen**

# 3D-OCT

## Bifurcation PCI guidance

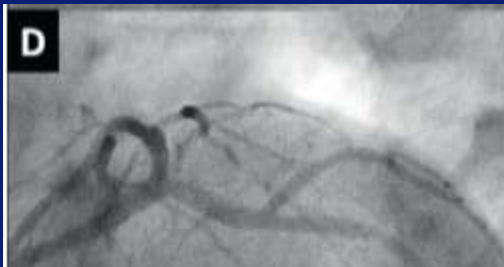
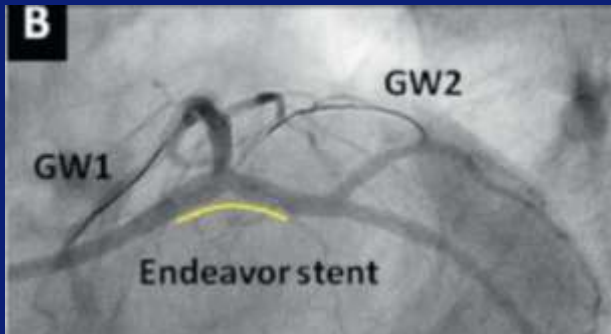
### Wiring



- After re-wiring the SB, dissection remains and position of the GW is uncertain
- Repeat OCT study
- Guide wire seems in the true lumen
- **Confirmation by 3D OCT**

# 3D-OCT Bifurcation PCI guidance

## Wiring



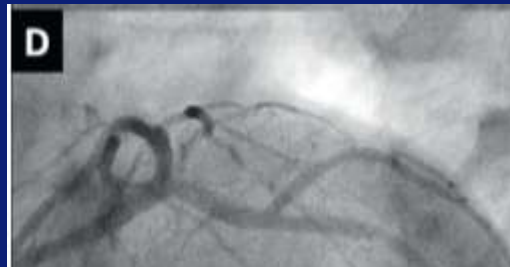
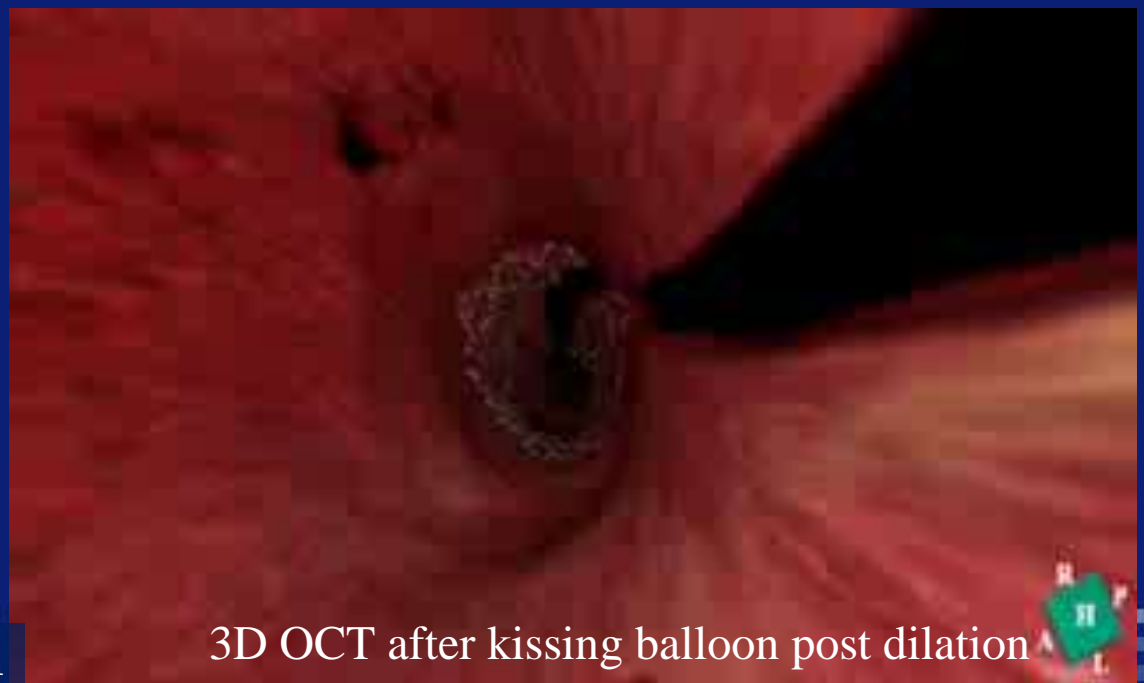
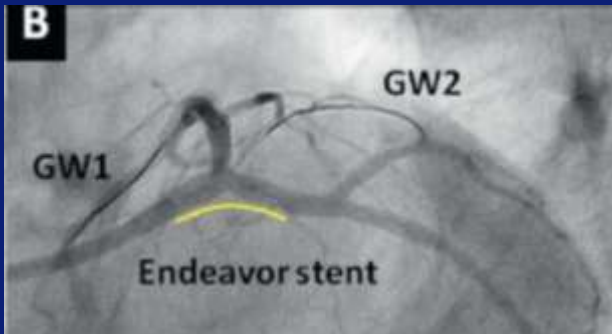


# 3D-OCT

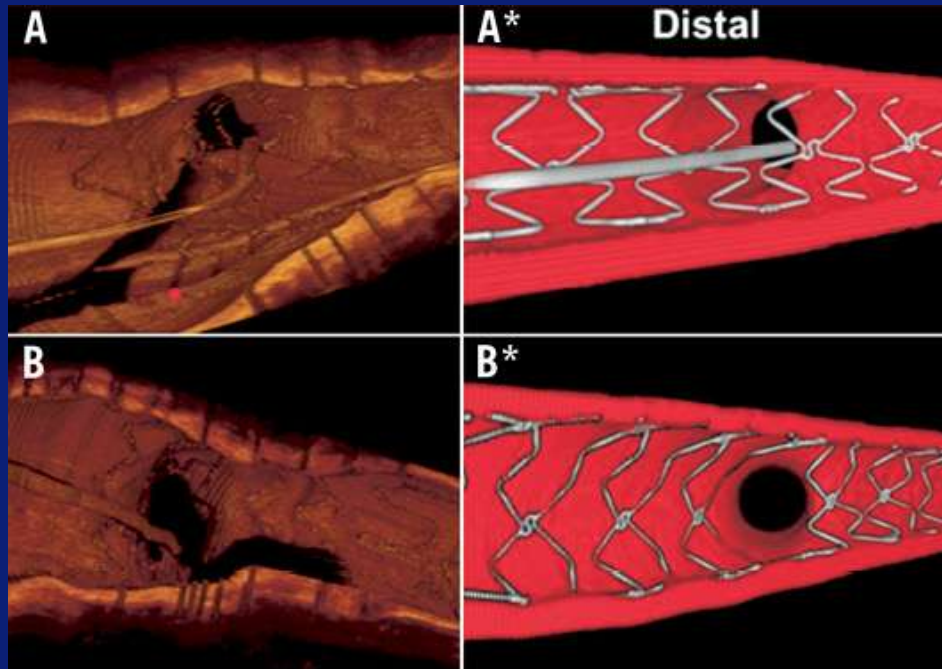
## Bifurcation PCI guidance

### Wiring

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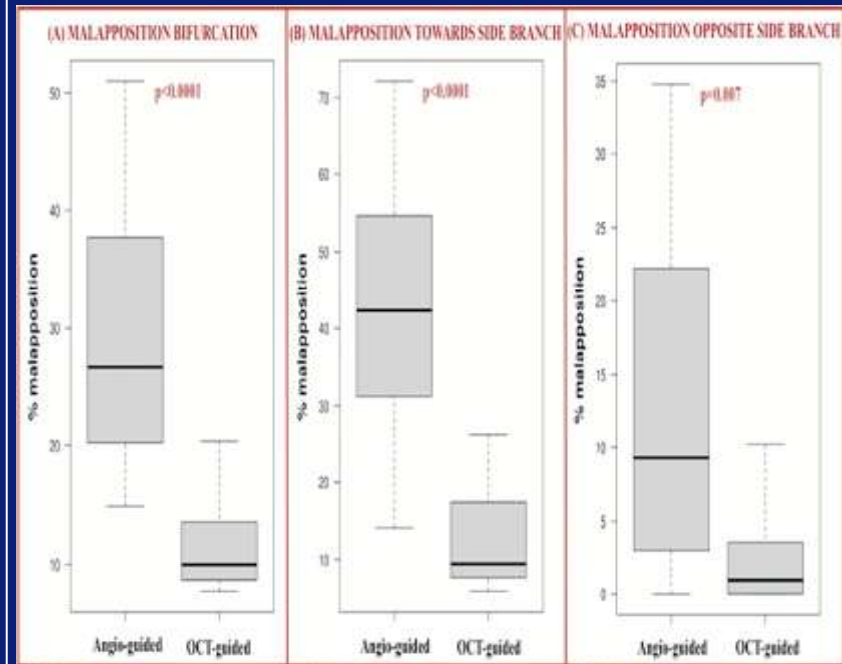


# 3D-OCT Bifurcation PCI guidance Wiring



Assessment of SB recrossing:  
distal vs proximal

Distal recrossing -> better strut opening




Lower SB malapposition rates  
with OCT guidance of wire  
position

# 3D-OCT: Is Beneficial in Clinical Practise!

- Information easily available in the cathlab
- Correct assessment of lumen dimensions
- Correct assessment of lesion length
- Efficient treatment planning
  
- Bifurcation treatment
- Guide wire position in complex lesions
- Stent deformation
- BVS assessment

# 3D OCT: Future Developments Co-Registration with Angiography



OCT file: C:/Medis 3D/Studies/Druifff/5/1-23-2012 1-34-43 PM/ncapoststentend/la3ml-s.dcm

Progress: 100%

Slices: 252    Pullback speed: 20    Frame rate: 100     OCT to Angio

Buttons: L-View, Close, Register, Reset

Diam (mm):	Art.: 3.08	Ref.: 3.65
Area (mm <sup>2</sup> ):	Art.: 7.73	Ref.: 10.48
Obs (%):	Diam: 15.7	Area: 26.2

Locate Angio \*    OCT Quantification    Clear Quantification

Short Diam: 0.00    Long Diam: 0.00    Area: 0.00

Lesion Len: 53.60

MLD marker: 241

proximal

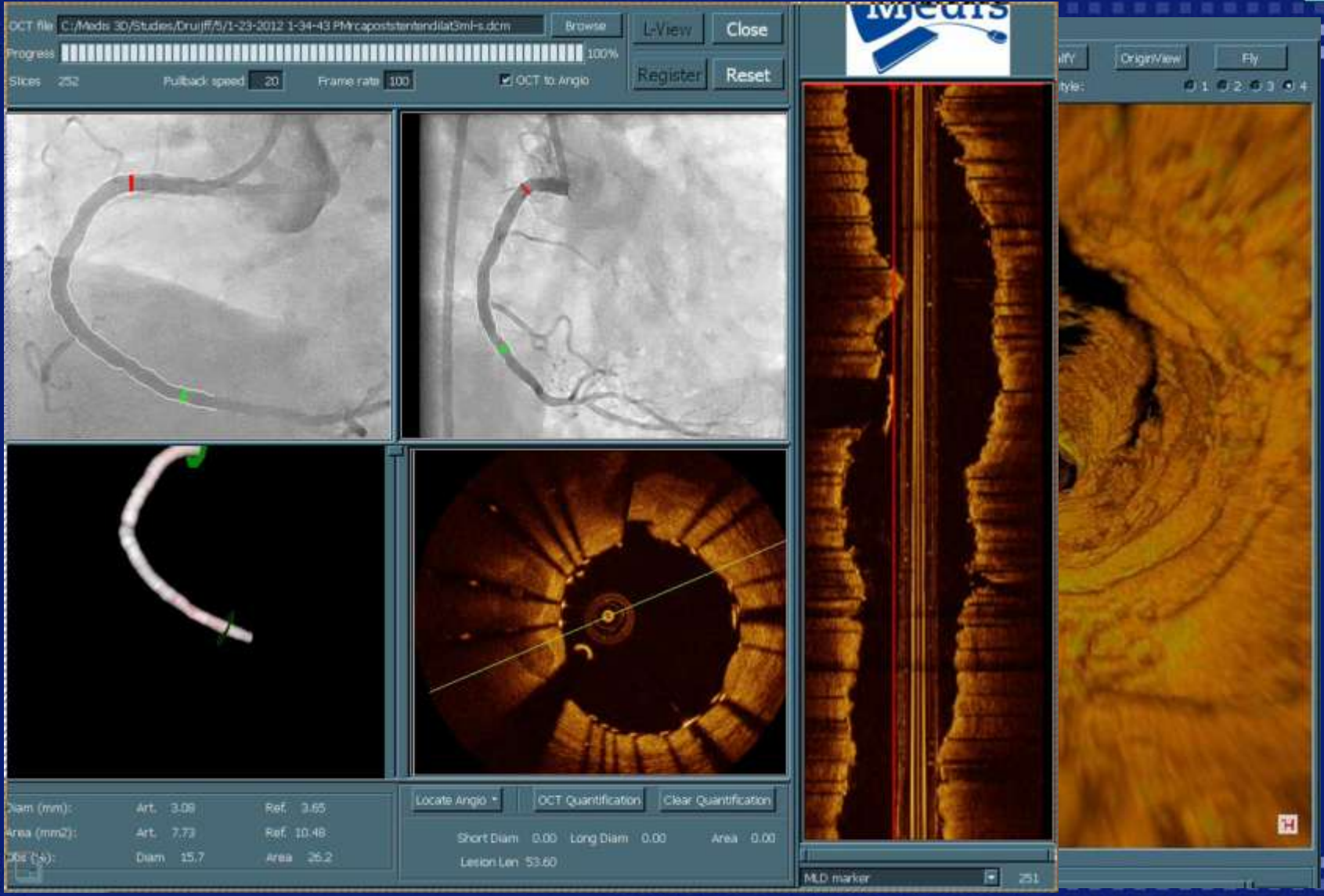
**Fast  
Easy  
Reliable**

**No  
disturbance  
of work-flow**

distal



# 3D OCT: Future Developments Co-Registration with Angiography



OCT file: C:/Medis 3D/Studies/Druif/5/1-23-2012 1-34-43 PM/capostatentendilat3ml-s.dcm

Progress: 100%

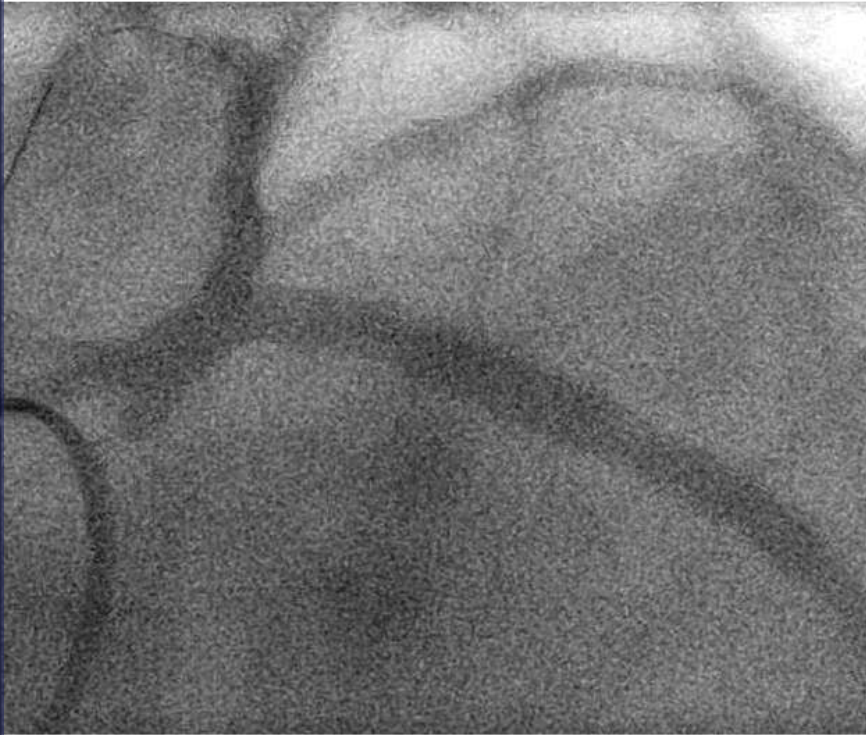
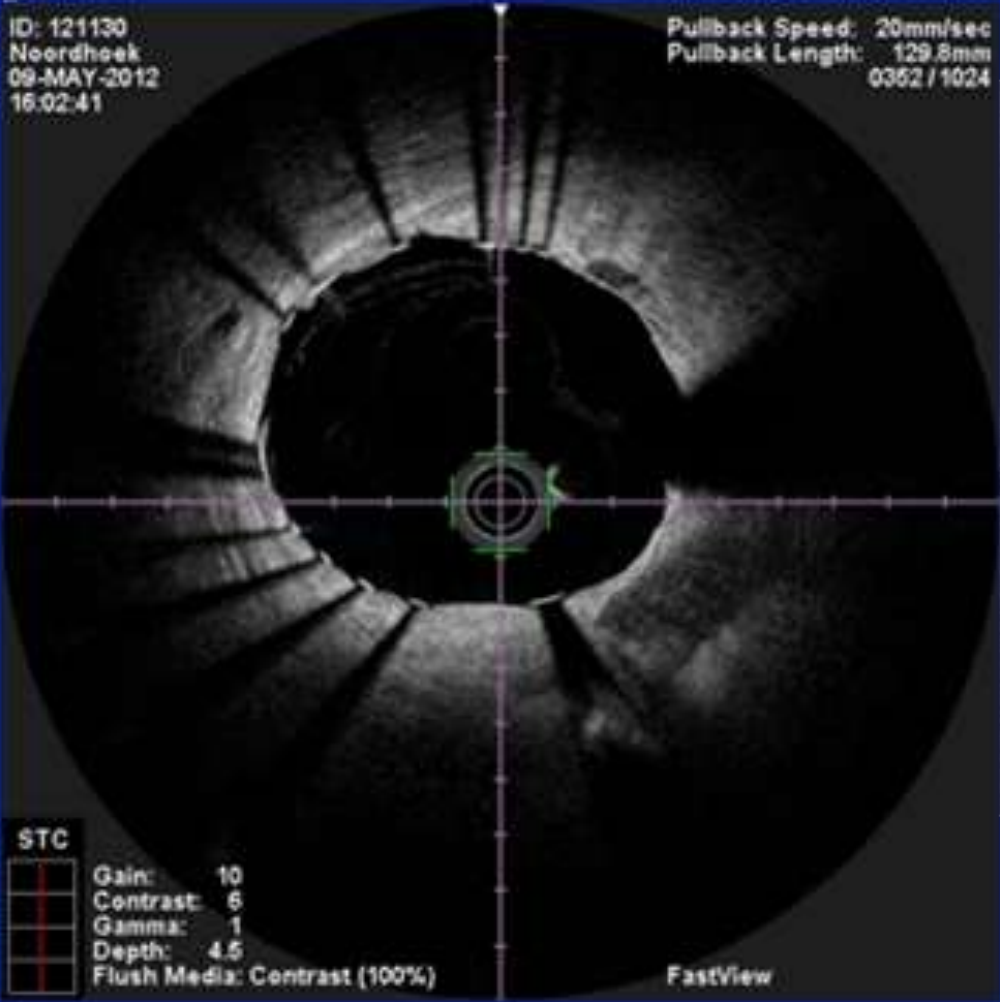
Slices: 252    Pullback speed: 20    Frame rate: 100     OCT to Angio

Diam (mm):    Art. 3.08    Ref. 3.65  
Area (mm<sup>2</sup>):    Art. 7.73    Ref. 10.48  
Vol (%):        Diam 15.7    Area 26.2

Short Diam 0.00    Long Diam 0.00    Area 0.00  
Lesion Len 53.60

MLD marker: 251

# 3D OCT: Future Developments High Quality 3D Visualization



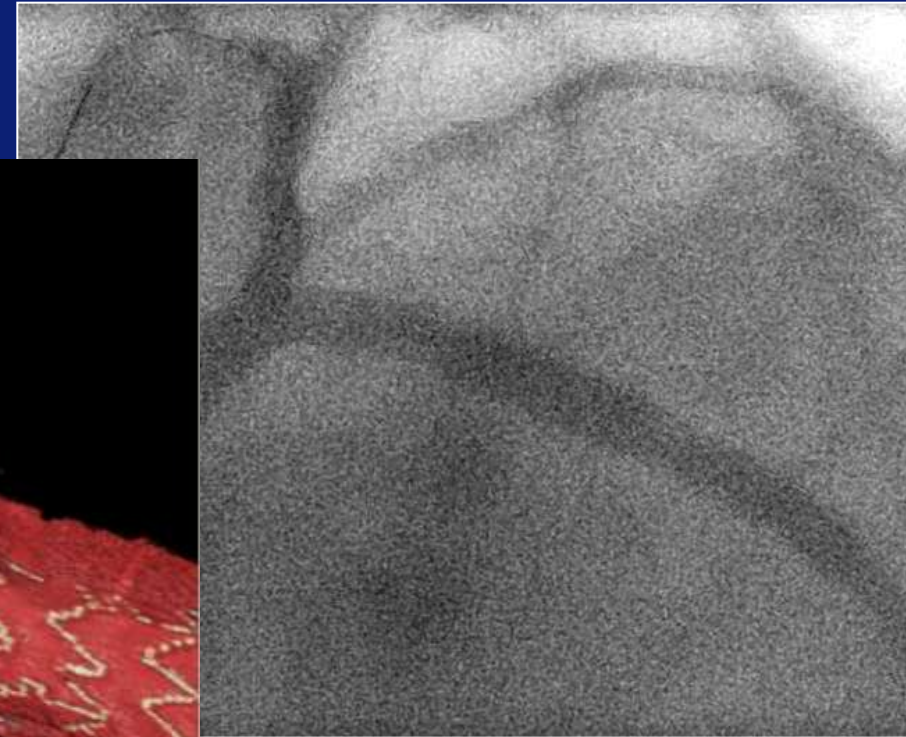
**LAD-LM  
After Stenting Across LCx  
& Kissing Balloon**



# 3D OCT: Future Developments

## High Quality 3D Visualization

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**LAD-LM**  
**After Stenting Across LCx**  
**& Kissing Balloon**

# 3D OCT: Future Developments? High Quality 3D Visualization



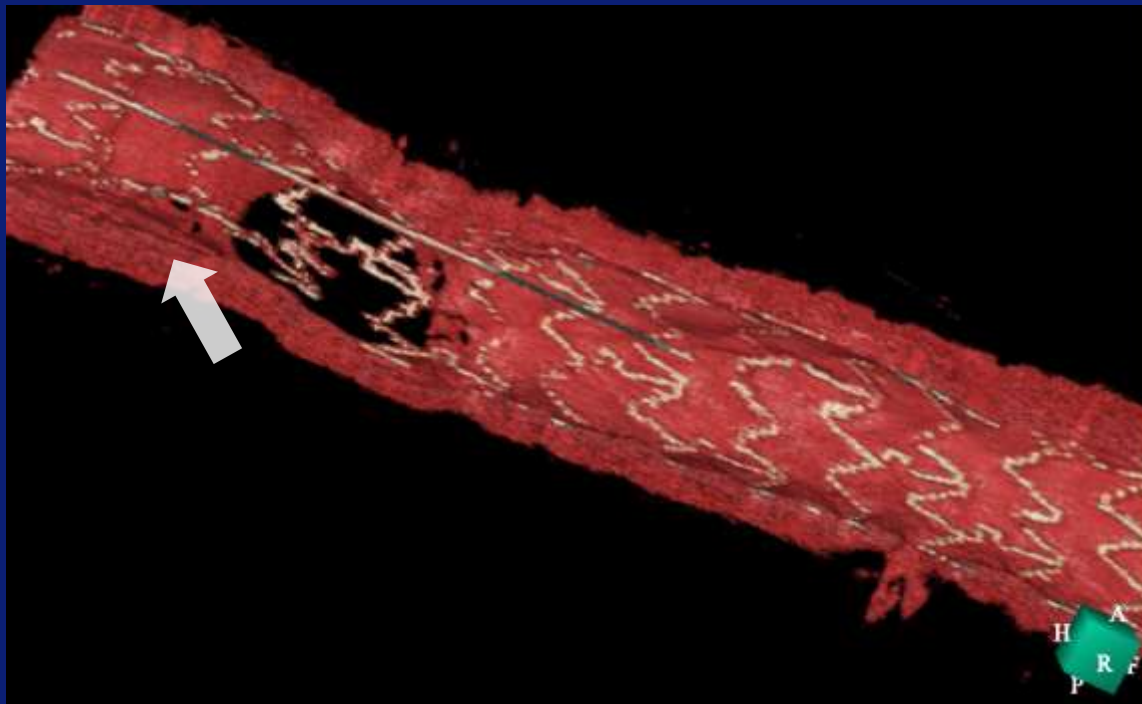
**Fast**  
**Easy**  
**Reliable**

**No**  
**disturbance**  
**of work-flow**

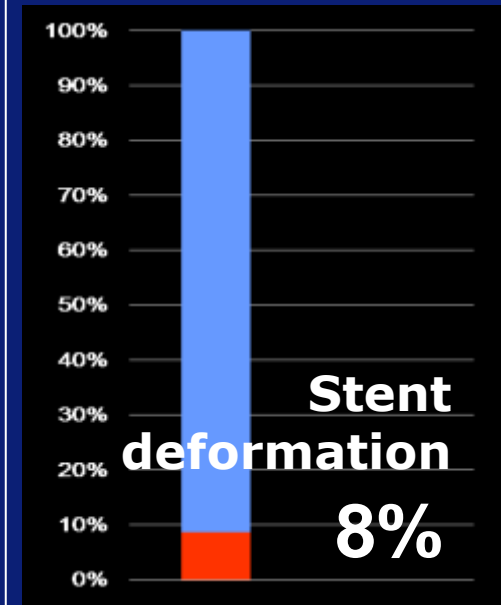


# 3D OCT: Future Developments

## High Quality 3D Visualization



### PTCA for Left Main Disease (n=64 pts)



despite POT plus kissing technique

# 3D OCT: Future Developments

## High Quality TRUE 3D Visualization

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LAO 43, CRAN 33  
DS 648, 20.7 mm  
Pro Bif Angle: 147  
Dis Bif Angle: 71  
Pro: 2.6 mm, 2.3 mm  
Dis: 1.1 mm, 1.9 mm

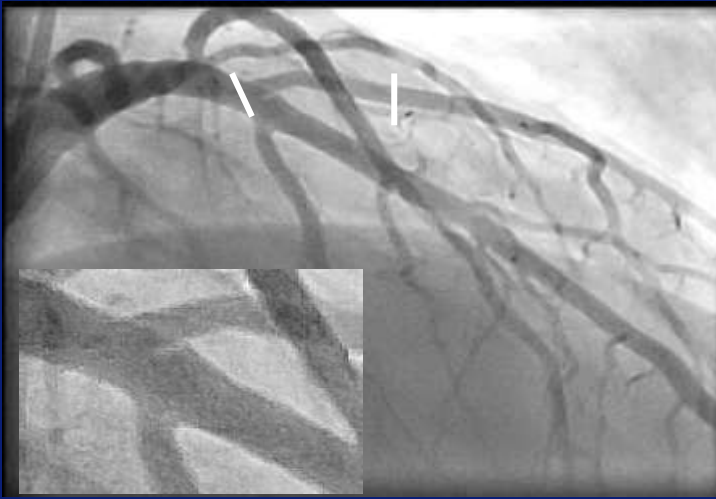


# 3D OCT: Future Developments

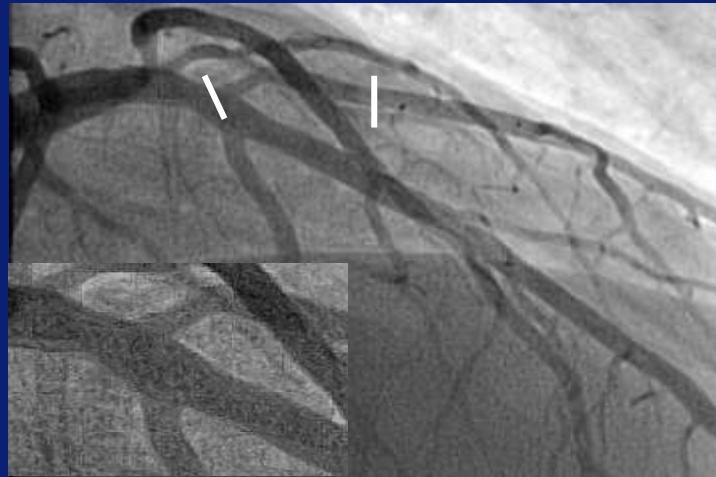
## 3D Angio – OCT Fusion and Flow Computation



*Baseline*



*Follow-up*



**Neocarina development**



*Downstream fly-through view*

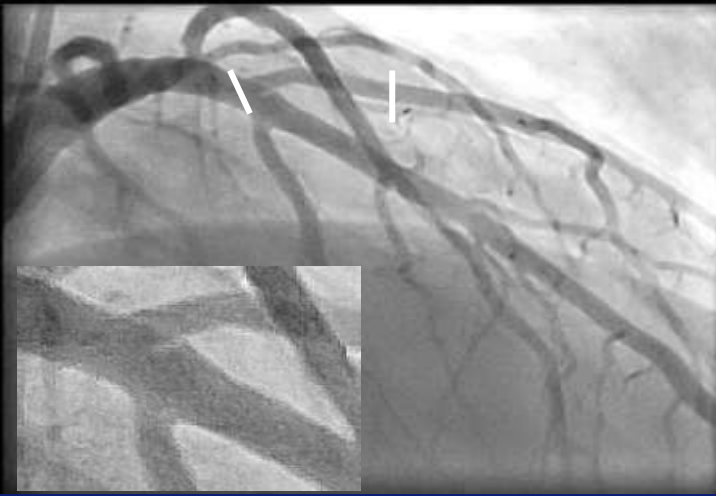


# 3D OCT: Future Developments

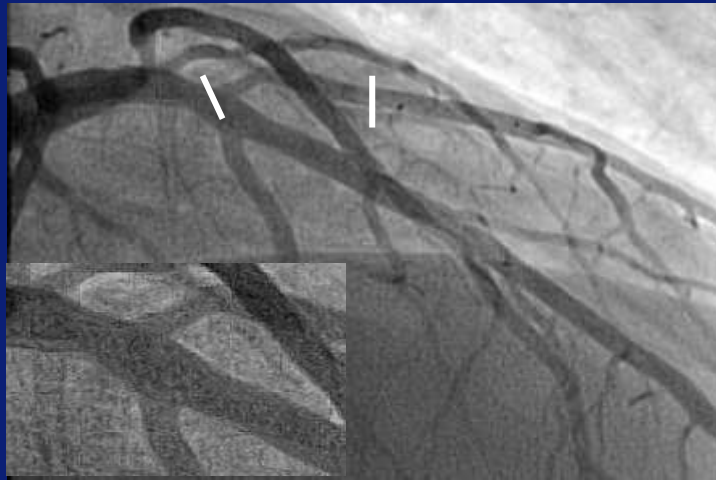
## 3D Angio – OCT Fusion and Flow Computation



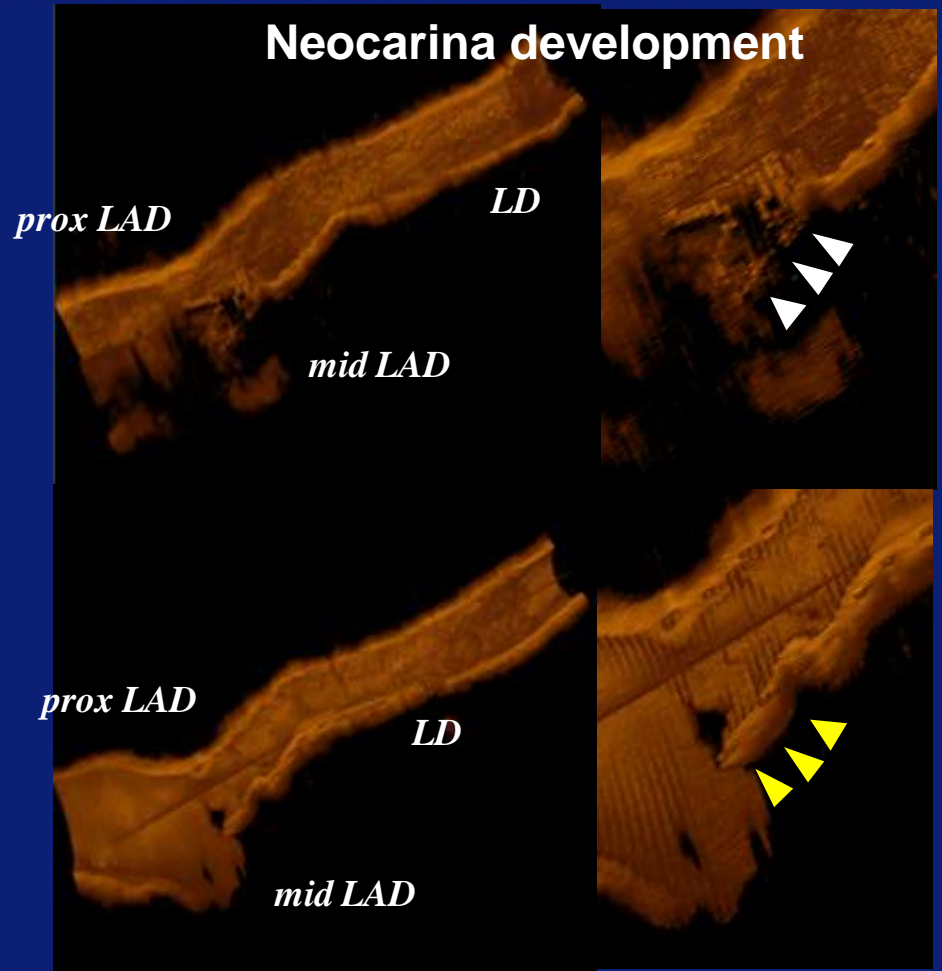
*Baseline*



*Follow-up*



**Neocarina development**

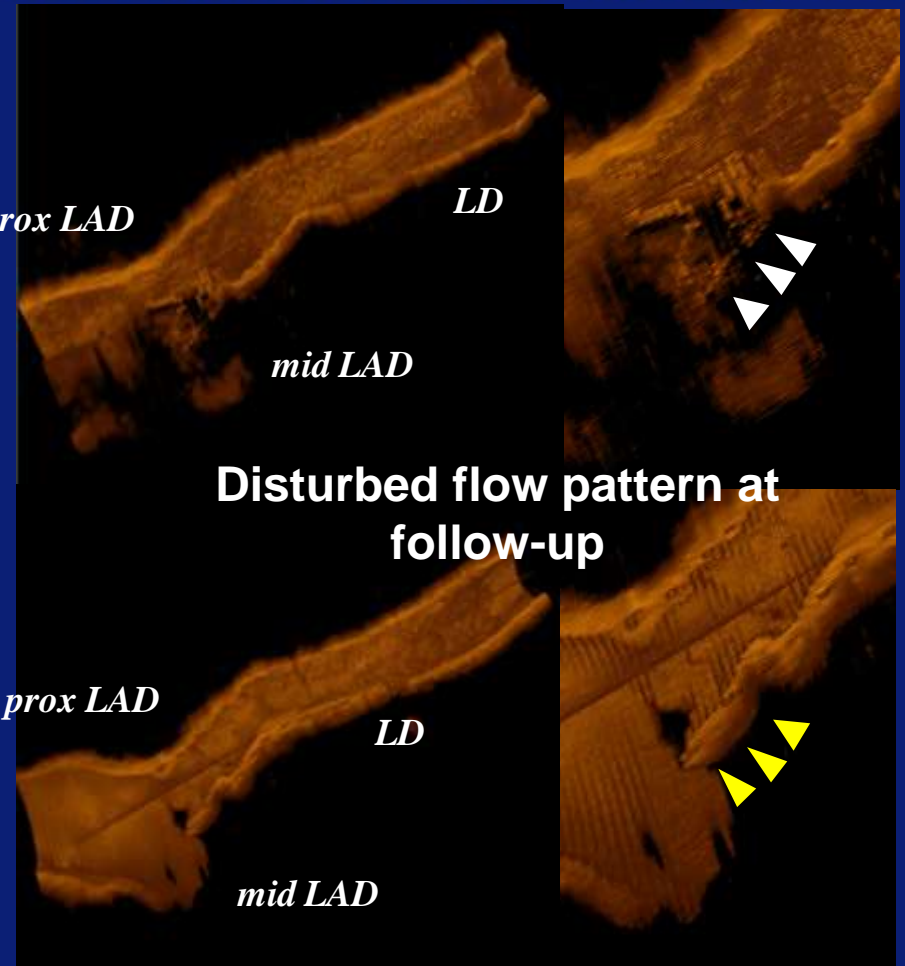
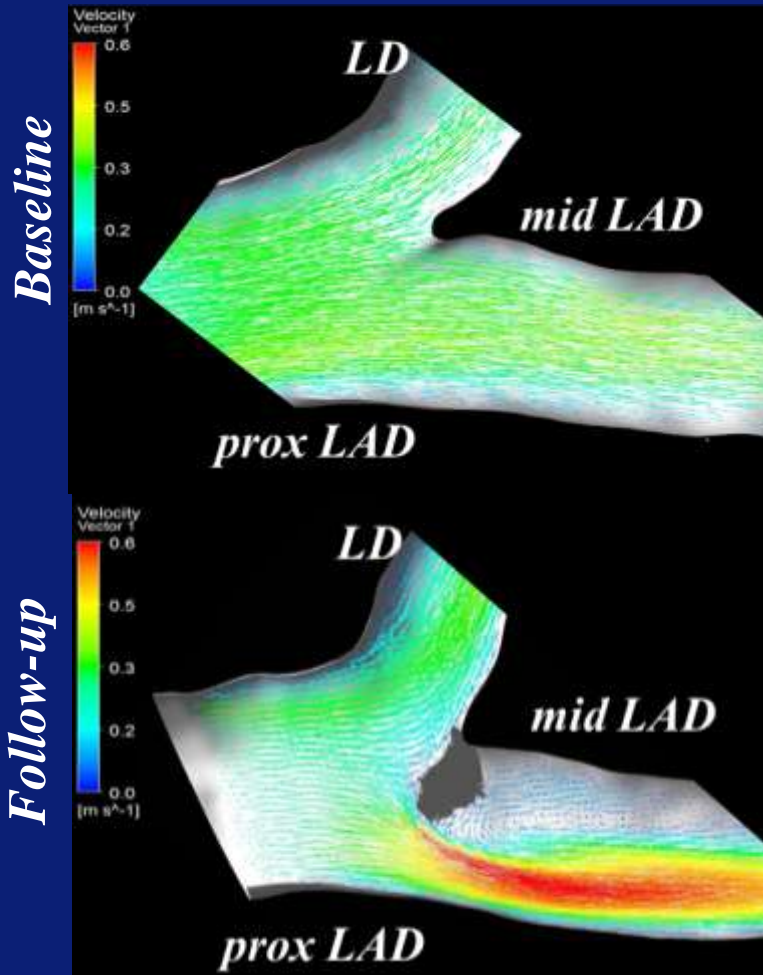


*Longitudinal cut-away view*



# 3D OCT: Future Developments

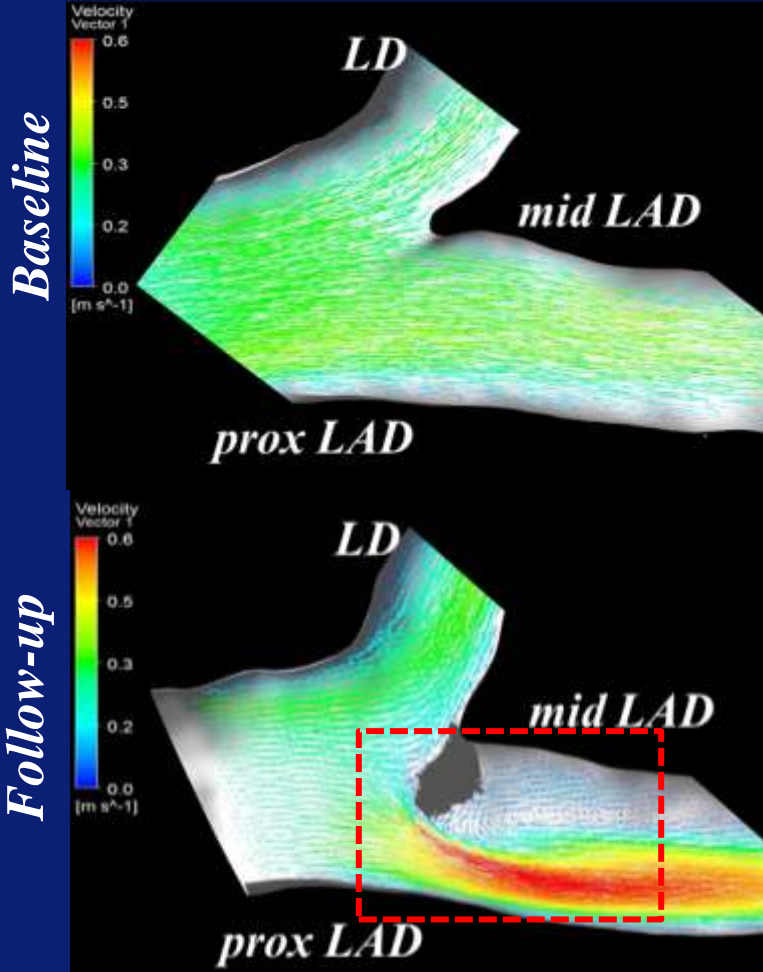
## 3D Angio – OCT Fusion and Flow Computation



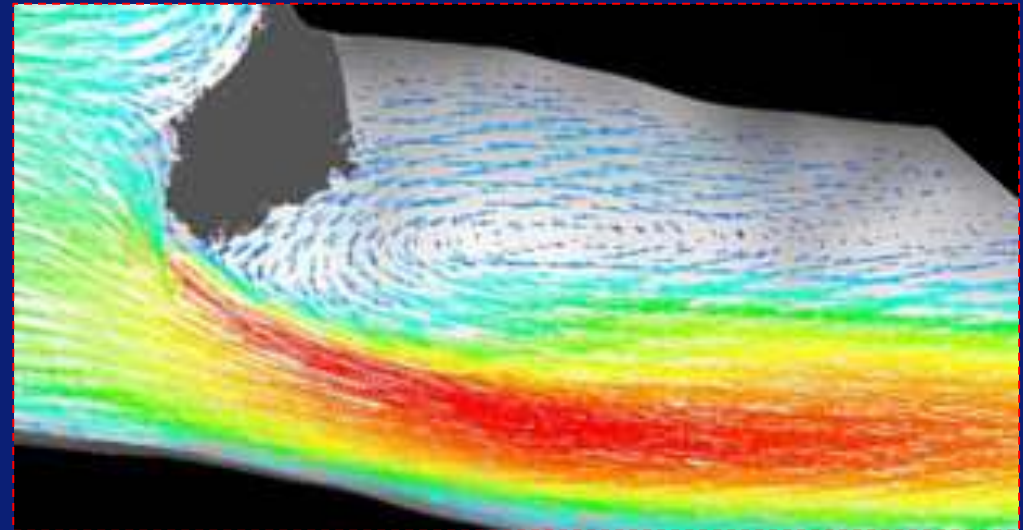
*Longitudinal cut-away view*

# 3D OCT: Future Developments

## 3D Angio – OCT Fusion and Flow Computation



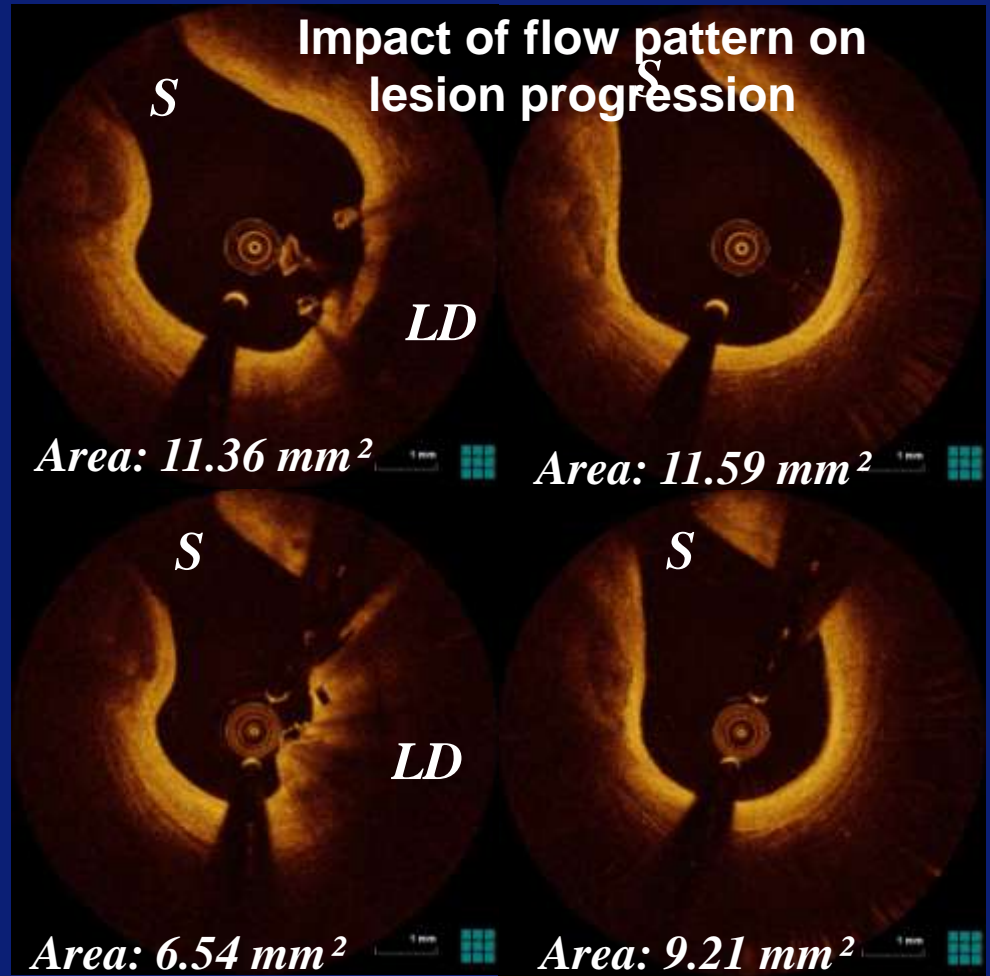
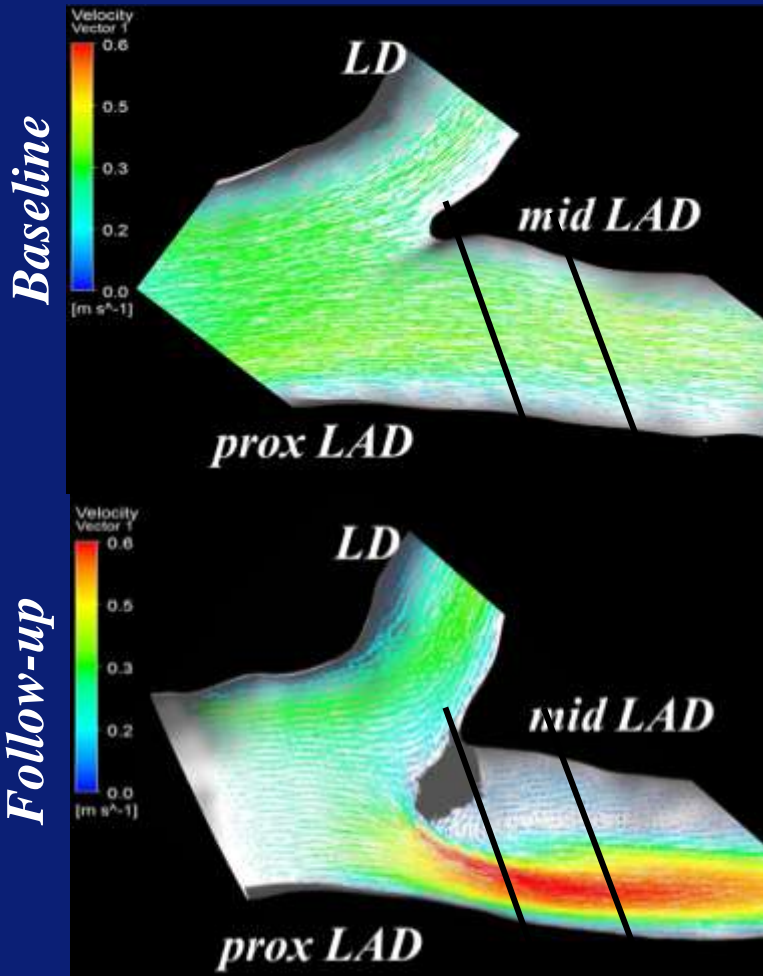
Disturbed flow pattern at follow-up





# 3D OCT: Future Developments

## 3D Angio – OCT Fusion and Flow Computation





# Thank you for your attention!

## **PhD Students**

**A. Karanasos**

**N. van Ditzhuijsen**

**J. van der Sijde**

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**K. Witberg**

**R.J. van Geuns**

**P. de Jaegere**

**N. van Mieghem**

**M. Valgimigli**

**R. Diletti**

**F. Zijlstra**

## **Experimental Cardiology**

**H. van Beusekom**

## **Hemodynamics Laboratory**

**J. Wentzel**

**F. Gijsen**

## **Bioengineering**

**G. van Soest**

**A.F.W. van der Steen**

## **Imaging Group**

**N. Bruining**

**K. Sihan**