



Utilizing complementary imaging modalities to guide strategy and optimize outcomes

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Disclosures

Daniel van den heuvel

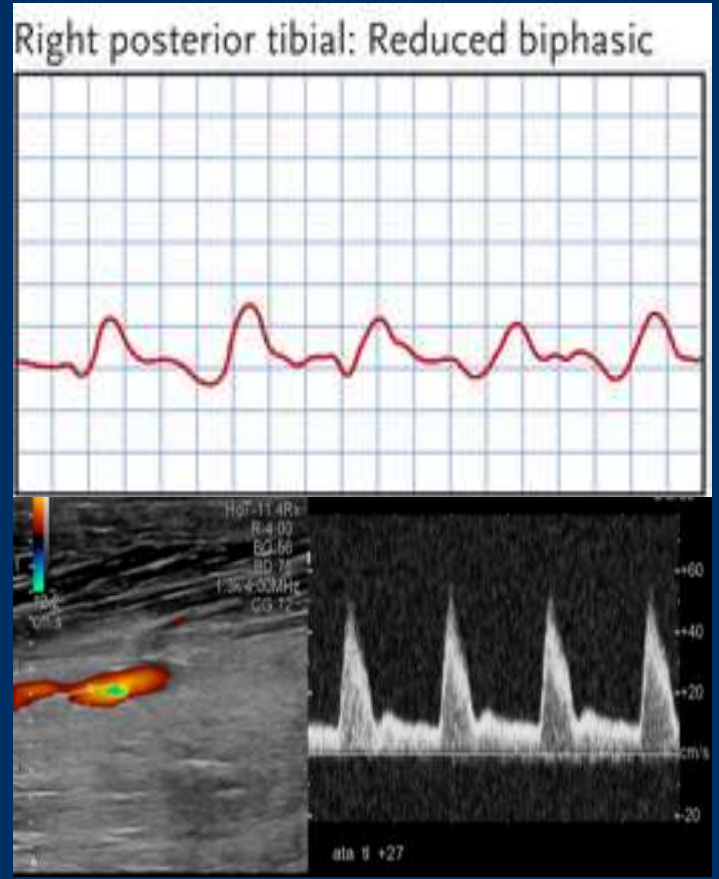
Consultant to LimFlow SA, Philips

Speaker for LimFlow SA, Philips, Asahi

Pre procedure imaging





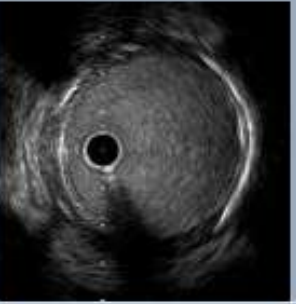

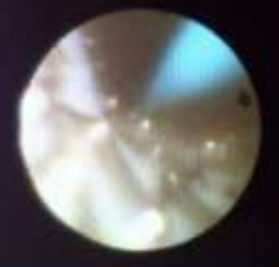
CE-MRA/CTA



Dx/ PSV and Continuous waveform

Complementary Imaging Modalities?

Imaging modality for peripheral intervention field

Modality	Angiography	CTA	IVUS	OCT/OFDI	Angioscopy
IMAGE					
resolution(μm)	200	300	80-150	10-20	200
Radiation Exposure	+	++	-	-	-
Contrast Media	+	++	-	+/-	+/-
Technique	-	-	Easy	So So	Complex
Calcification	Yes	Yes	Just superficial	Yes	Yes
Vessel size	Underestimation	Difficult	Overestimation	Accurate	Difficult
Long Axis	Yes	Yes	Yes (AltaView)	Yes	No
Reimbursement	Yes	Yes	Yes	No	Yes

Intervention lab with Azurion 7C20 FlexArm

LINC



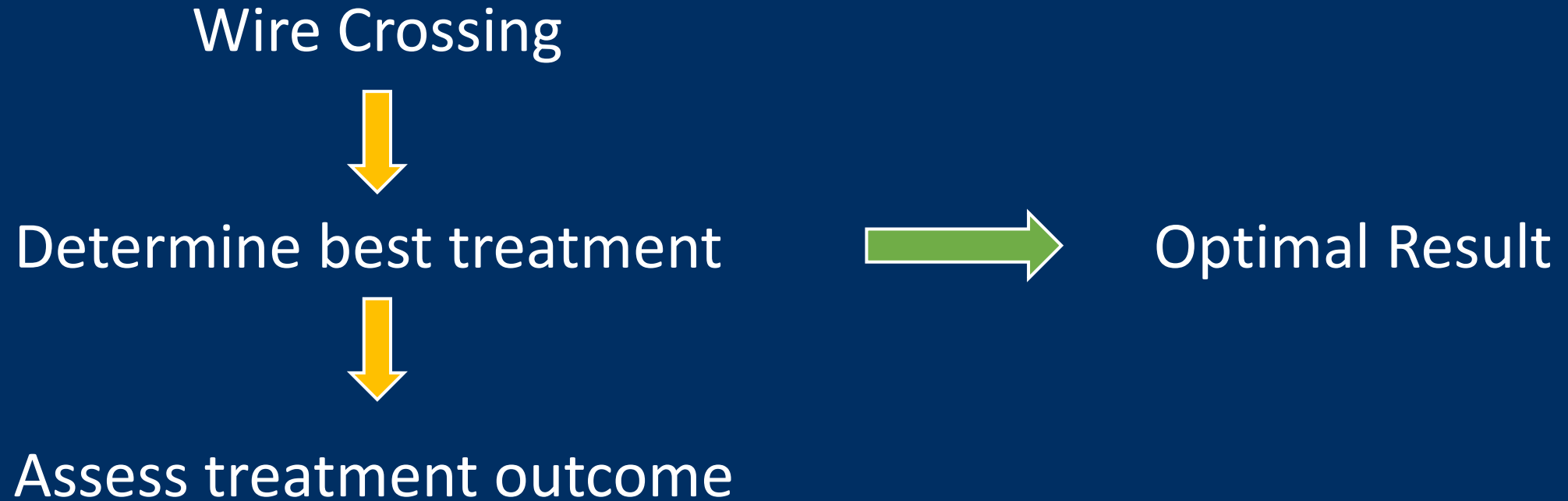
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Why Complementary Imaging Modalities?

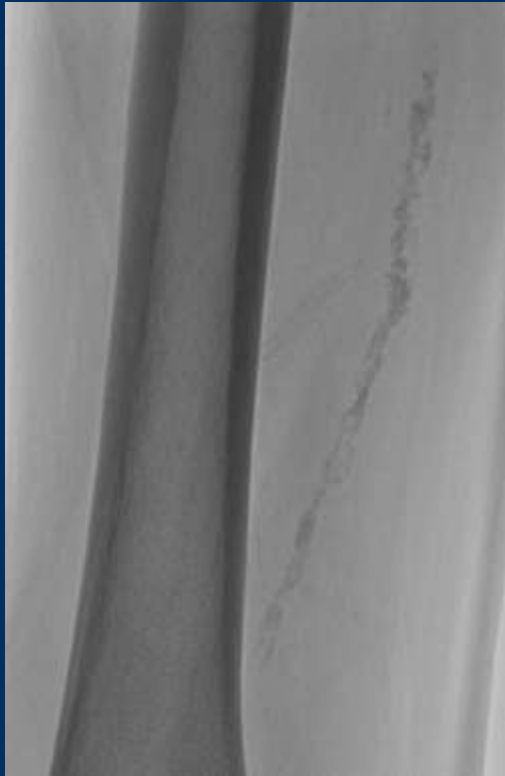


- Digital Subtraction Angiography/ Fluoroscopy
- Extra Vascular Ultra-Sound (EVUS)
- Intra Vascular Ultra-Sound (IVUS)
- Optical Coherence Tomography (OCT)

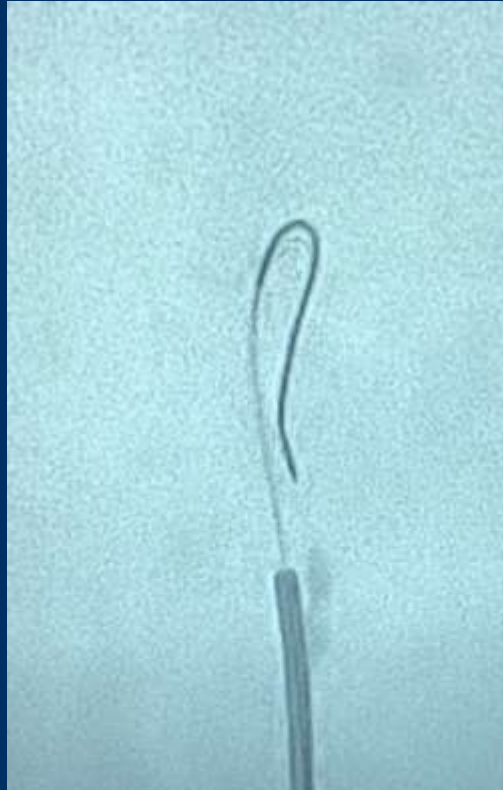
Treatment Algorithm PAD



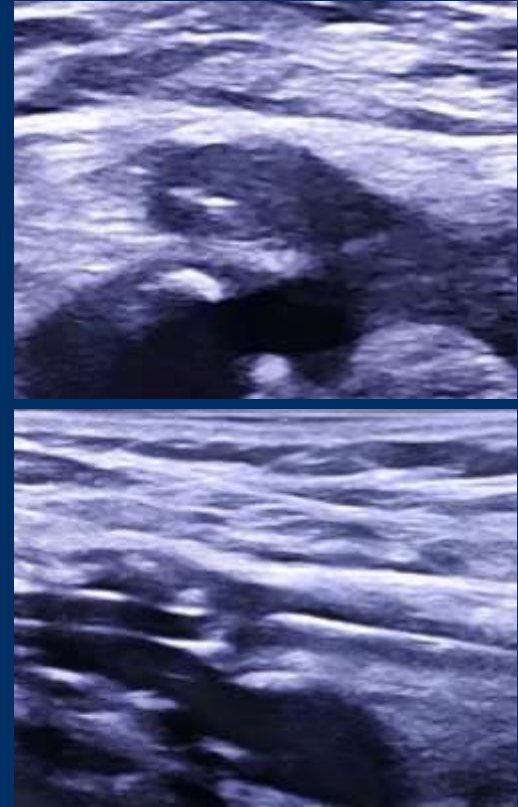
Wire Crossing



Vessel wall calcification

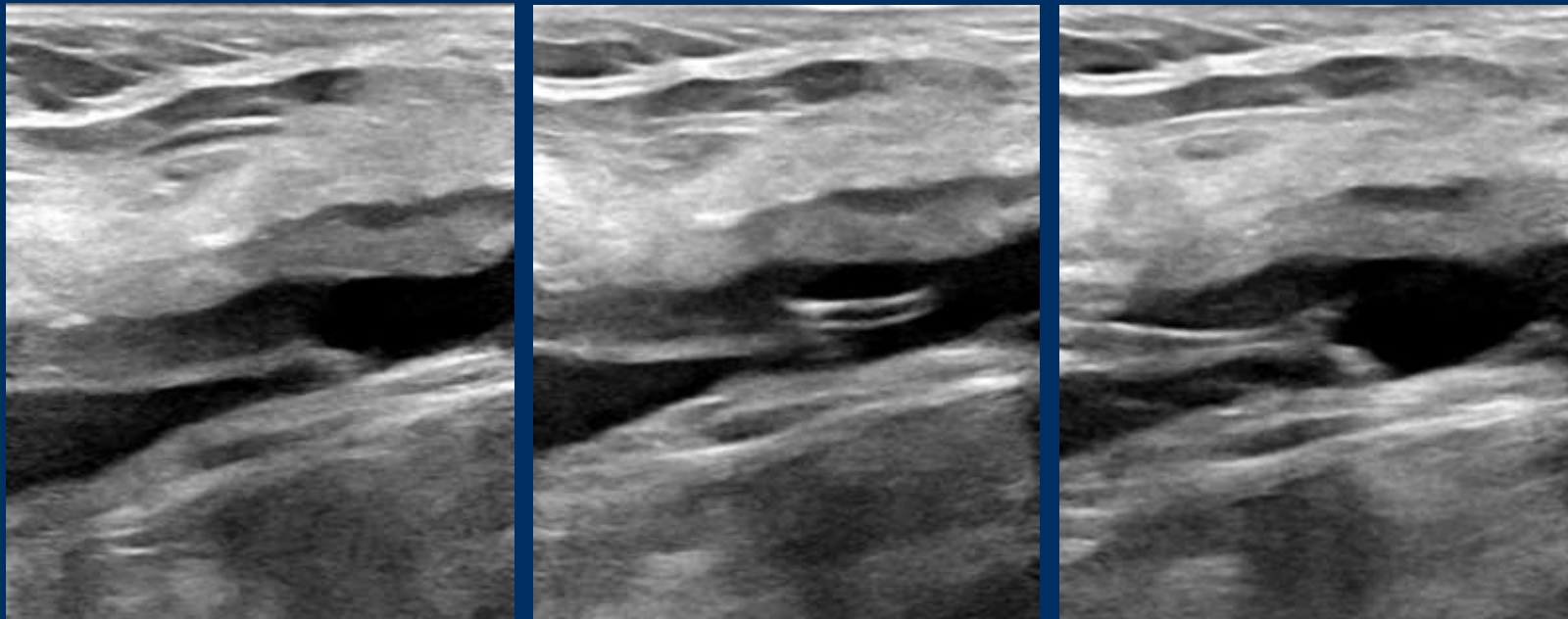


Wire movement



Wire Location

Wire Crossing



EVUS Assisted recanalization of SFA origin

Determine Best Treatment

Imaging requirements

Characterize Vessel Wall Calcification

Determine Lumen diameter

Diagnose large subintimal space

Flow Limiting Dissections

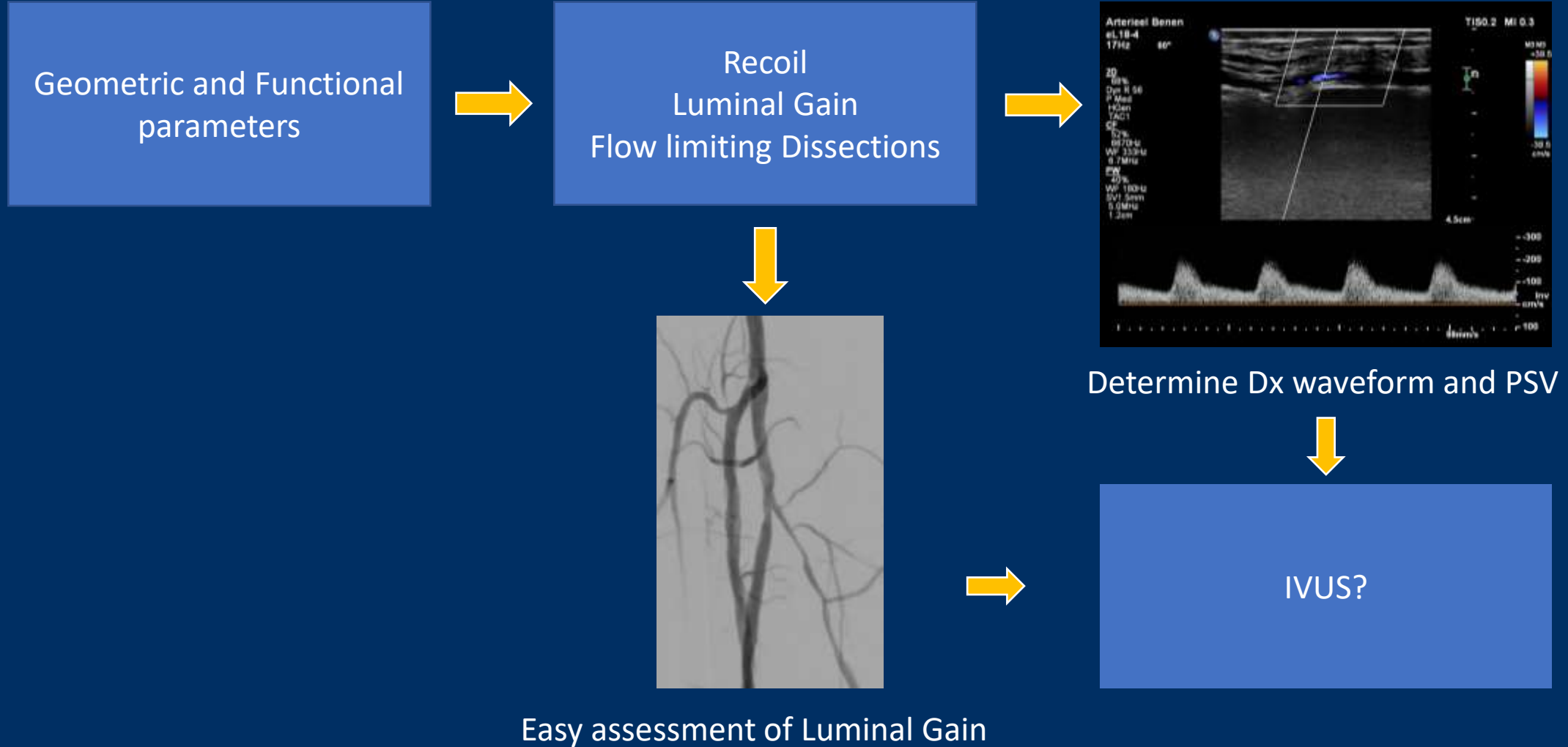


Balloon size, prevent DCB undersizing,
achieve maximal luminal gain,

Atherectomy

Stent type: SNS/ DES/ VMI/ Tack

Assess Treatment Outcome





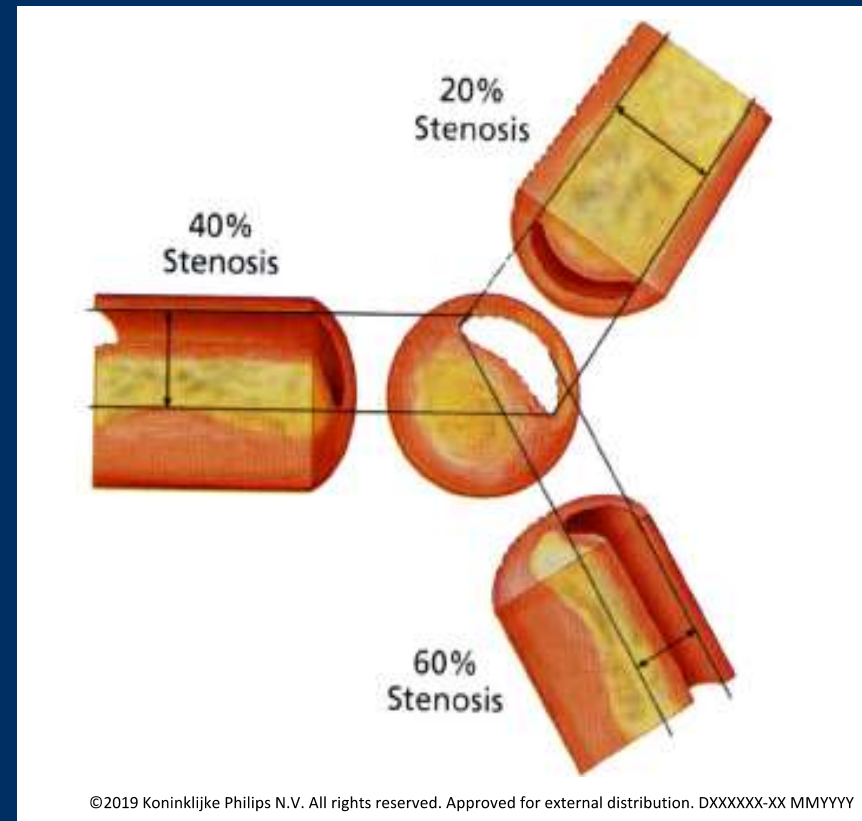
Balloon Sizing

Balloon sizing	DSA/QVA	EVUS	IVUS
SFA/POP	+	++	+++
Prox. Tibial	++	+	+++
Dist. Tibial	+	++	++

Eiberg JP, Gronvall Rasmussen JB, Hansen MA, Schroeder TV. Duplex ultrasound scanning of peripheral arterial disease of the lower limb. Eur J Vasc Endovasc Surg. 2010;40:507-512.

Balloon Sizing

- Angiography is actually lumenography
- With angiography lumen diameter is underestimated
- An artery consists of a lumen AND a vessel wall



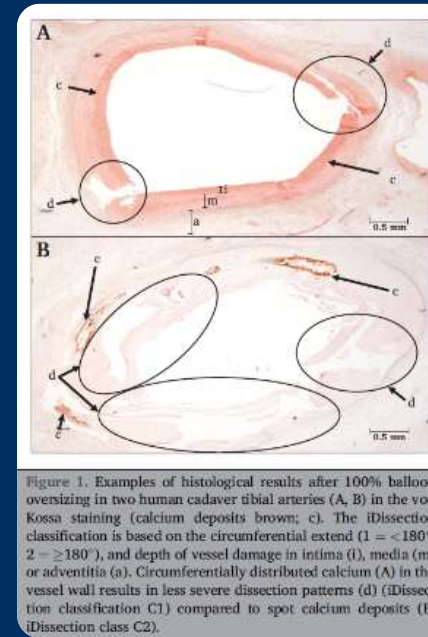
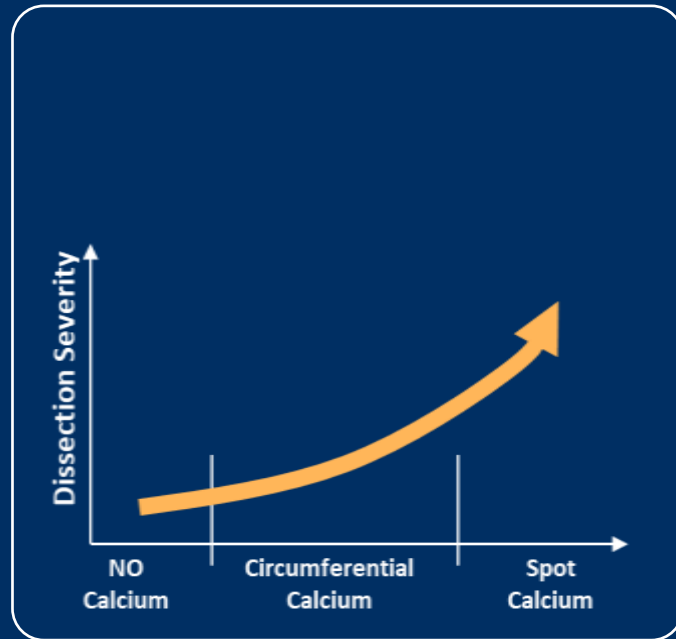
Vessel Wall Calcifications



Calcifications	DSA/QVA	EVUS	IVUS
SFA/POP	++	+	+++
Prox. Tibial	++	+	+++
Dist. Tibial	++	+	+++

Mintz GS, Popma JJ, Pichard AD, et al.. *Circulation*. 1995;91(7):1959–1965. doi:10.1161/01.cir.91.7.1959

Vessel wall calcifications histopathology



Calcium absence → Circumferential → Spot distribution

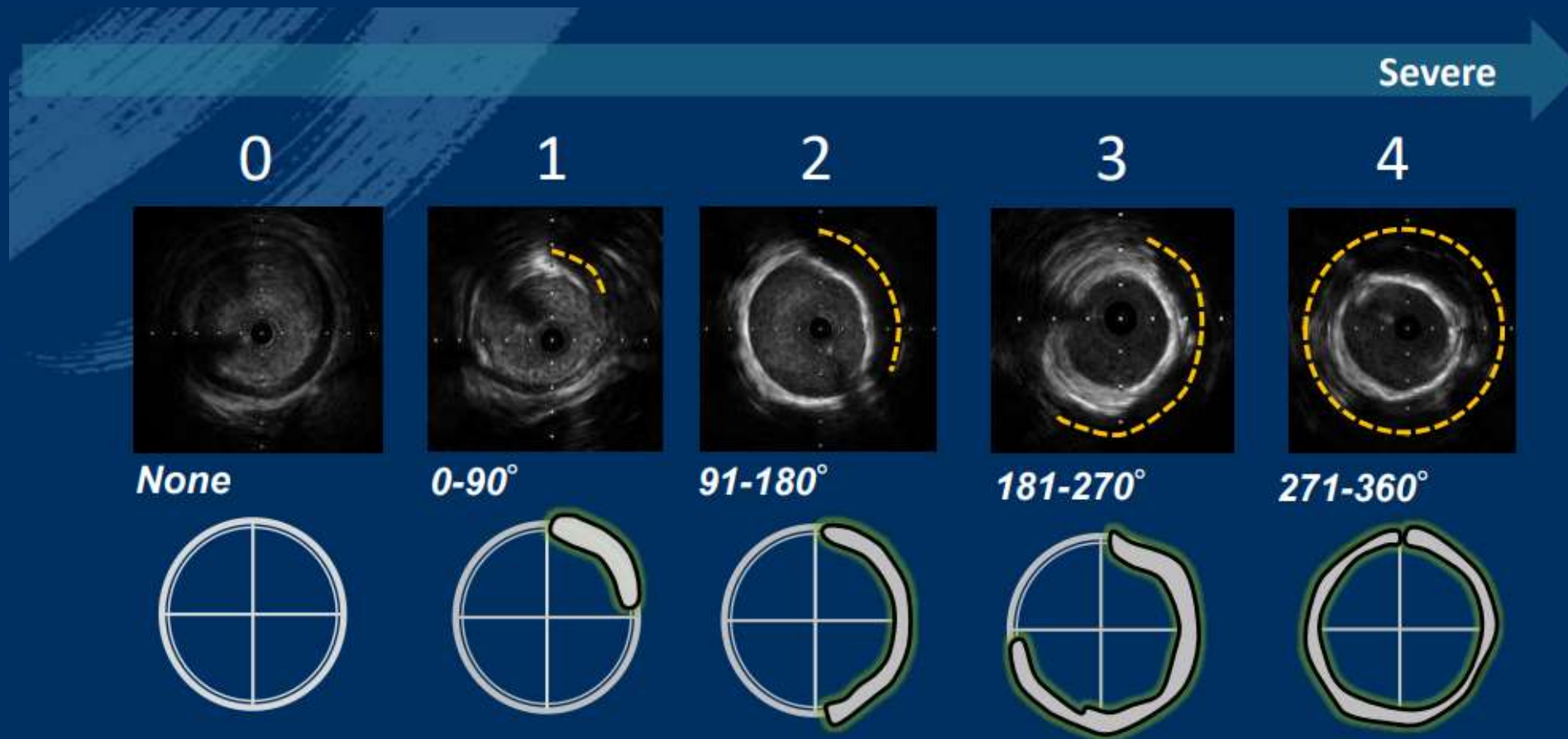
Significance of Vessel wall calcifications

Vessel Calcification Patterns should Determine Balloon Size Strategy in BTK Angioplasty

IVUS GUIDED TREATMENT STRATEGY

1. avoids balloon under-sizing
2. drives ad-hoc balloon over-sizing
 - beneficial in circumferential calcium (limited vessel damage and ↑ likelihood to maximize lumen gain)
 - to be avoided in spot-calcium (↑ incidence of severe dissections)

Vessel wall calcifications by IVUS

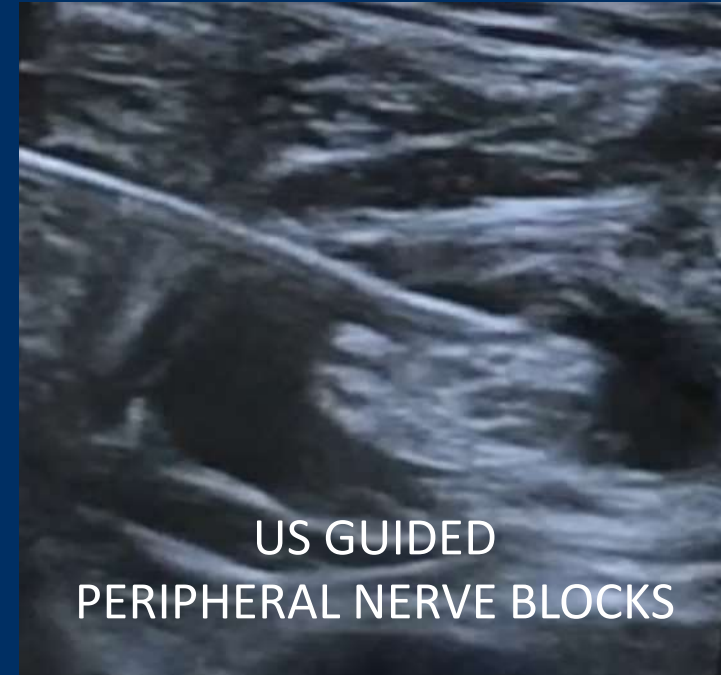


Complementary EVUS

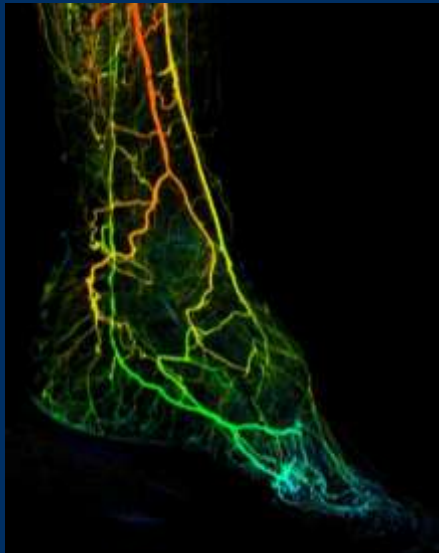


In addition to functional imaging:

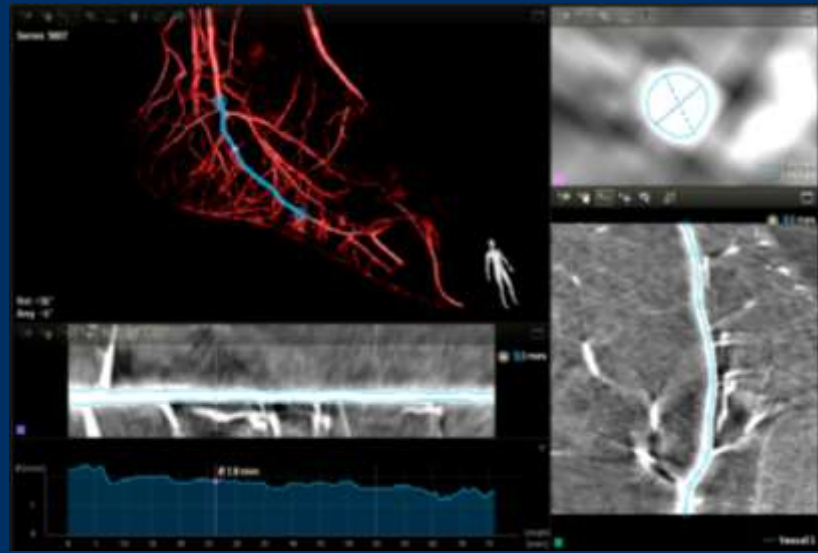
- EVUS Assisted Vessel Access
- EVUS Assisted vessel closure
- US guided nerve blocks



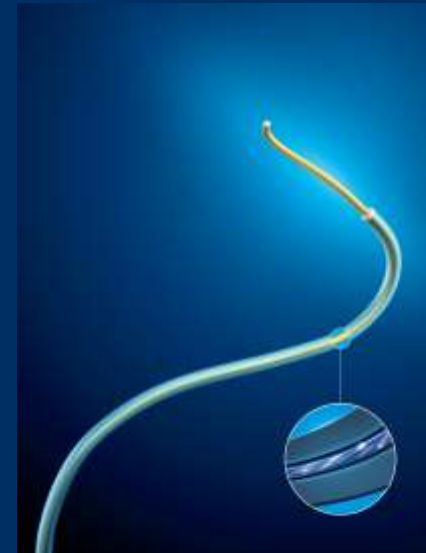
Innovative Imaging Modalities



Perfusion Angiography



Vessel analysis



Fiber Optic
RealShape (FORS)
technology



Augmented Reality

Summary



- DSA/ Fluoroscopy and EVUS are complementary imaging modalities
- IVUS is the next level imaging tool for vessel assessment
- EVUS remains indispensable for optimizing treatment outcome



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