

Therapeutical XperSwing®

Clinical Application of XperSwing® (DARCA:
Dual-**A**xis **R**otational **C**oronary **A**ngiography)
in Your Daily Complex-PCI

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Presenter Disclosure Information at TCTAP 2013

Mutsuo Nakayama, M.D.

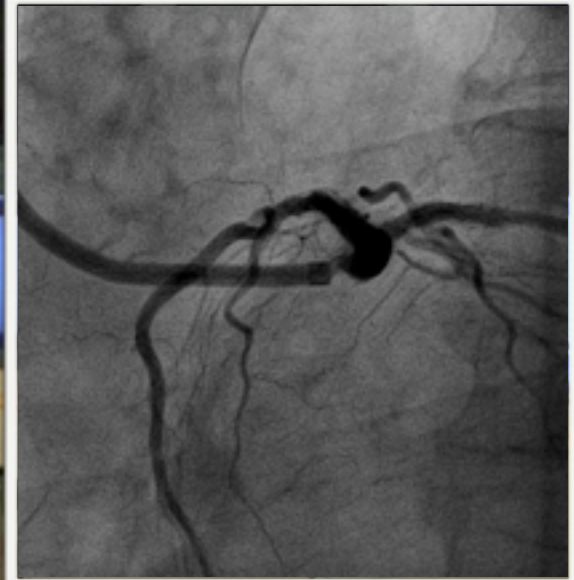
I DO NOT have any financial interest/arrangement or affiliation with one or more organizations that could be perceived as a real or apparent conflict of interest in the context of the subject of this presentation.



XperSwing® image of diseased LAD

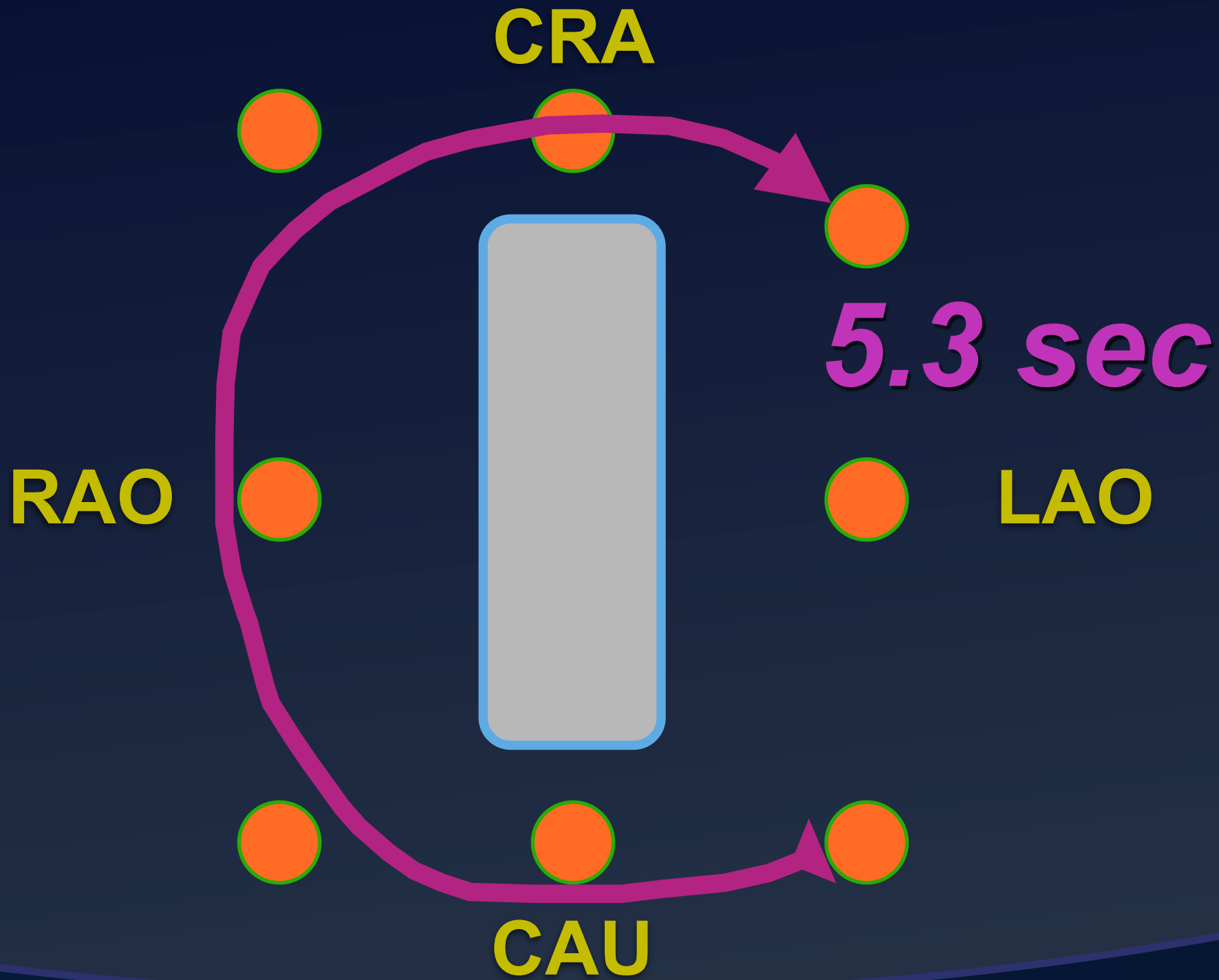


Dual-axis Rotational Coronary Angiography PHILIPS allura xper FD-20 XperSwing®



Dual-axis Rotational Coronary Angiography PHILIPS allura xper FD-20 XperSwing®



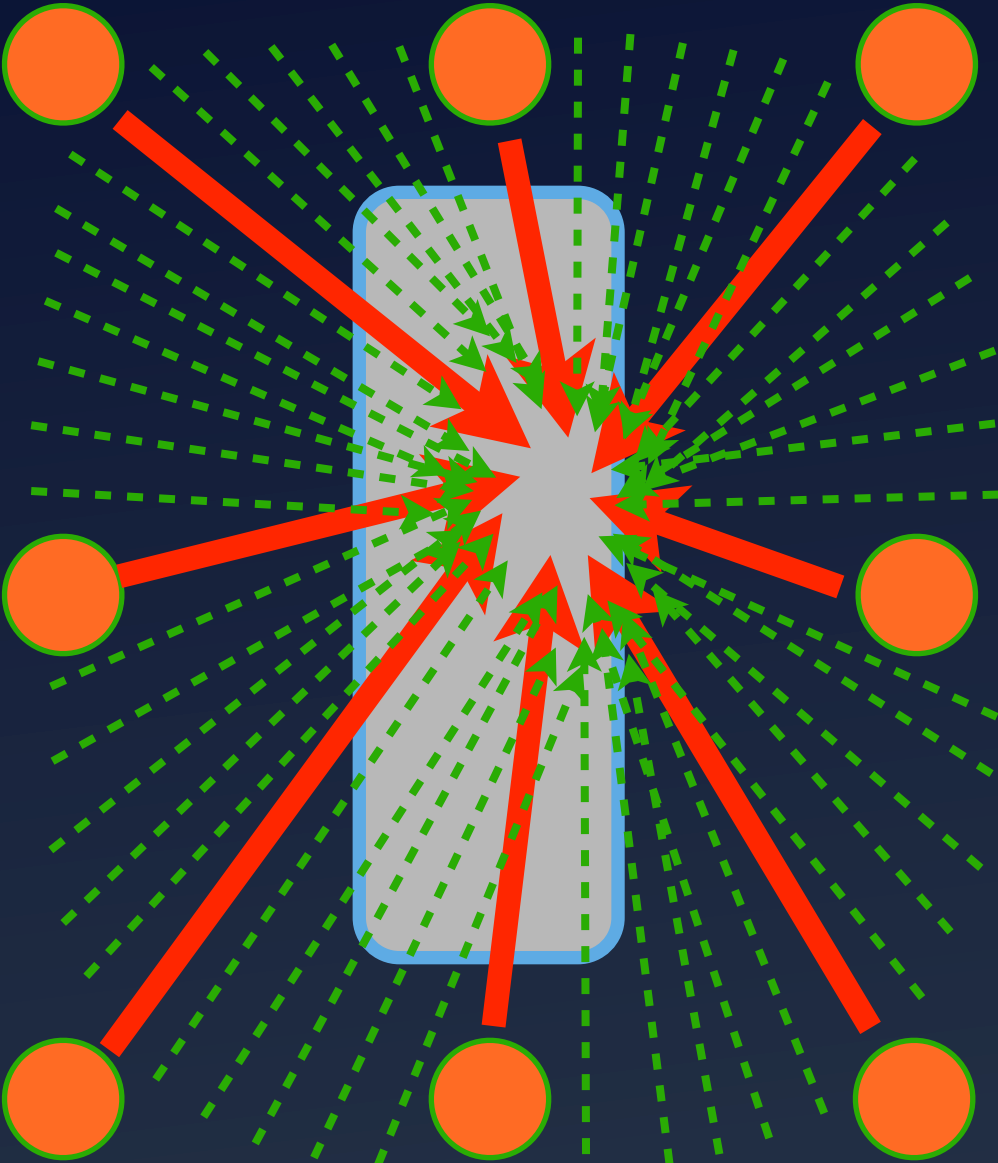


CRA

RAO

LAO

CAU



Dual-axis Rotational Coronary Angiography

How less amount of contrast media required ?

	Contrast Volume
LCA	<i>13ml ± 2ml</i>
RCA	<i>9ml ± 3ml</i>



Comparison of Standard Angiography, Single-Axis Rotational Coronary Angiography (SARCA) and XperSwing® (DARCA)

Table 1. Comparative Analysis of Several Angiographic Techniques

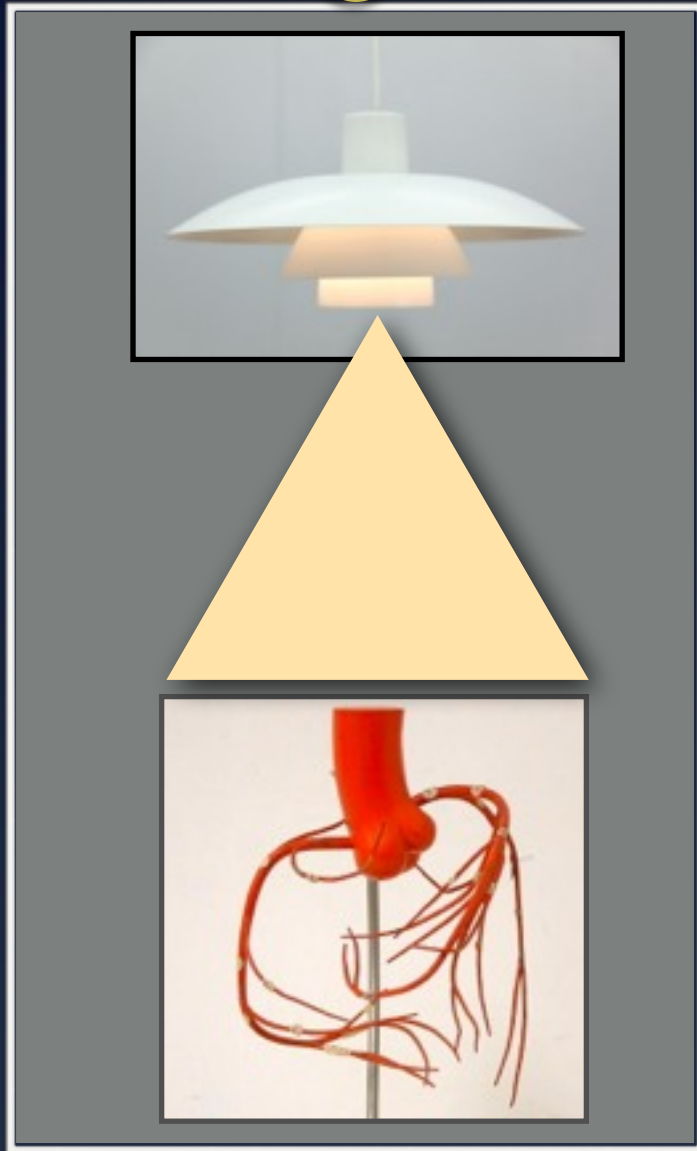
	SA	RA	DARCA
Contrast volume	+	+++	+++
Radiation exposure	+	+++	+++
Procedural time	++	++	+
Image content	+	++	+++
Ease of use	+++	++	++

Abbreviations: DARCA, dual-axis rotational coronary angiography; RA, rotational angiography; SA, standard angiography.

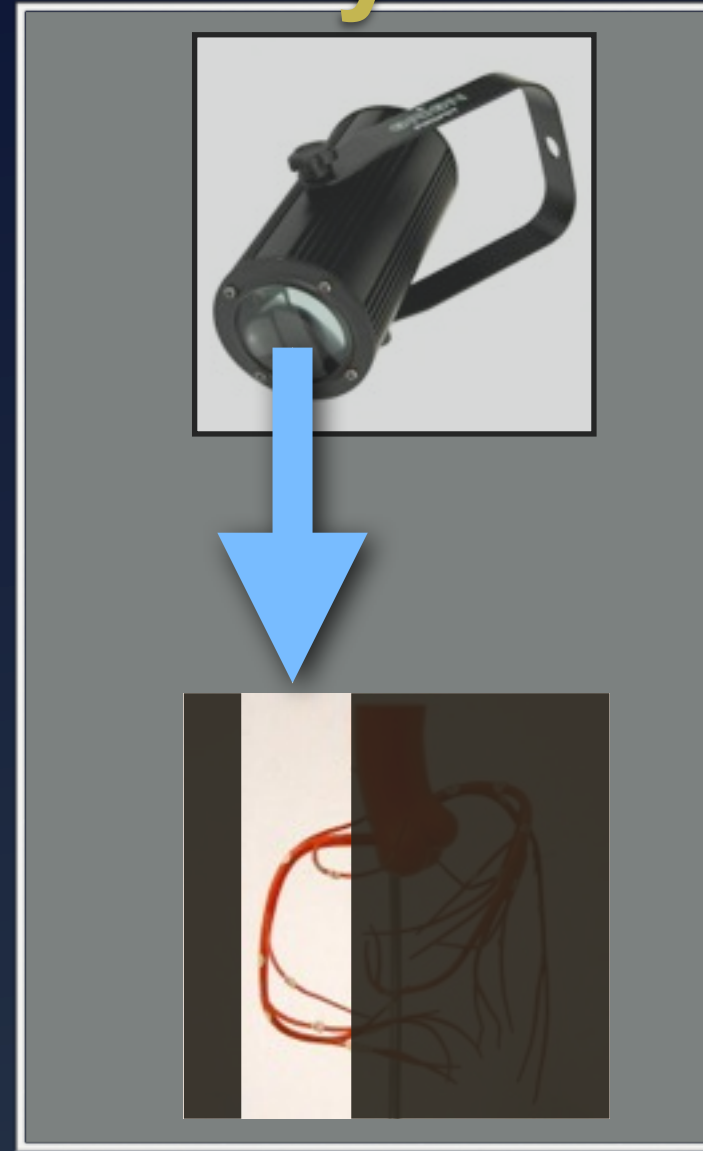
+ Least favorable. ++ Similar. +++ Most favorable.



DARCA XperSwing ®



Standard Angiograph y

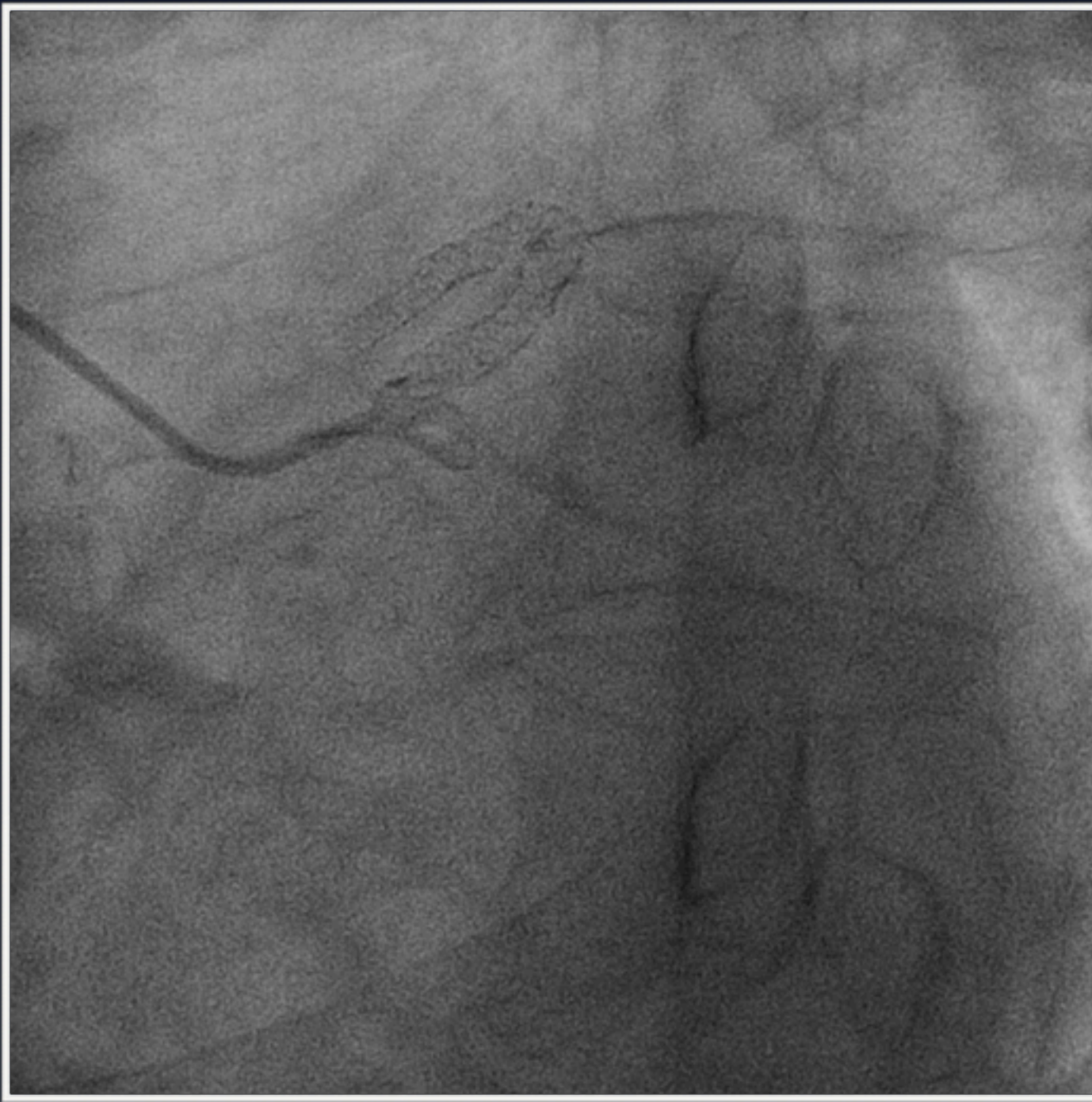


DARCA XperSwing[®]

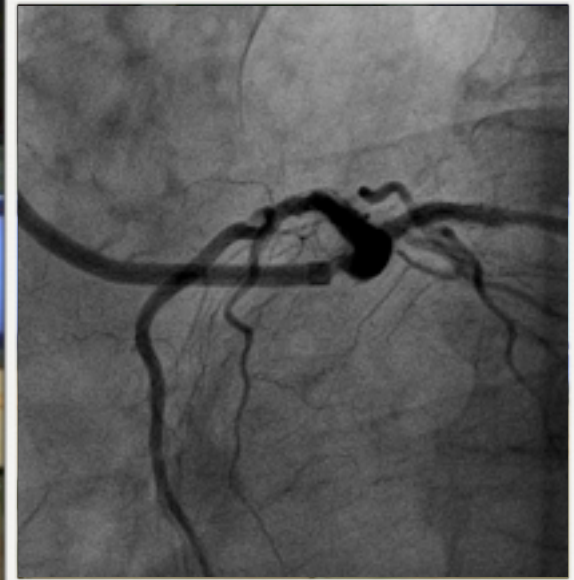


Standard Angiography





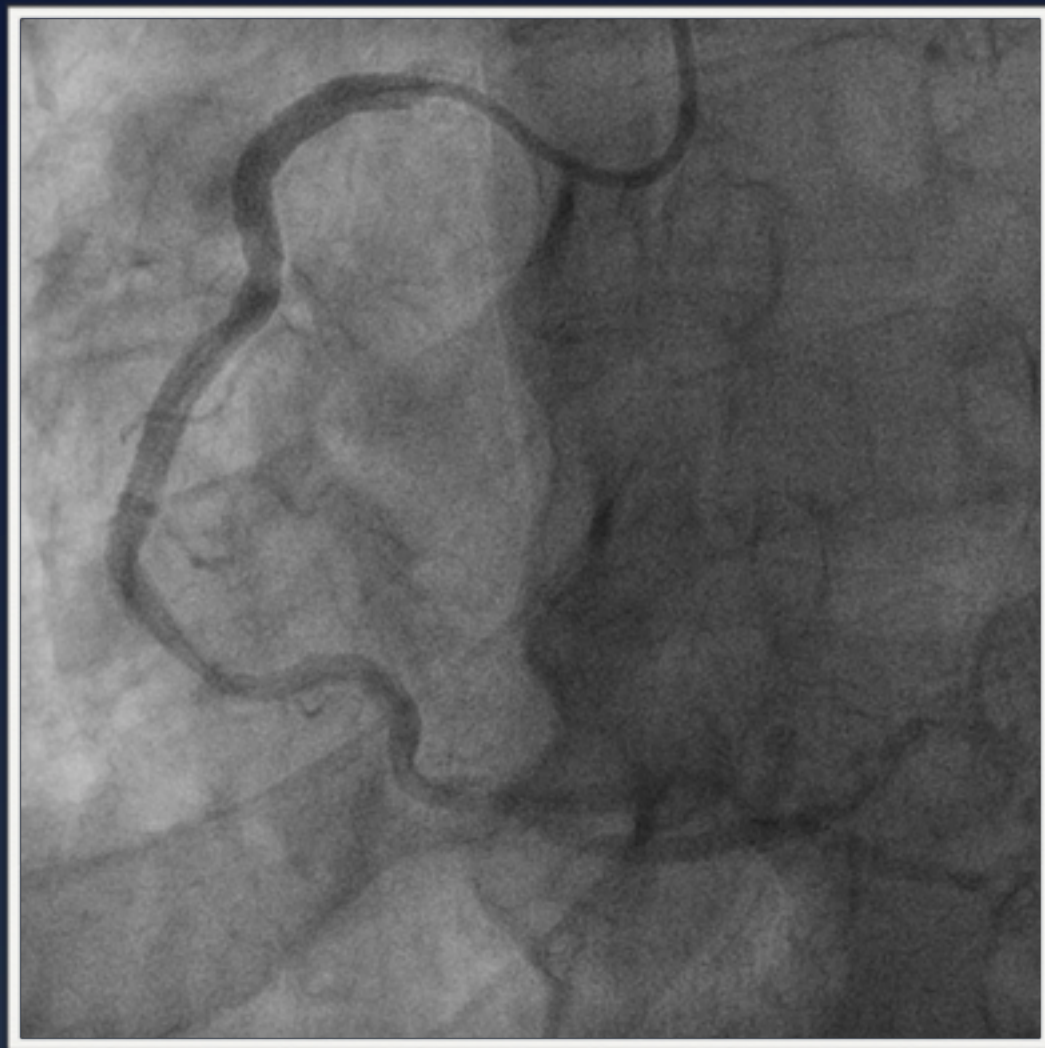
Dual-axis Rotational Coronary Angiography PHILIPS allura xper FD-20 XperSwing®



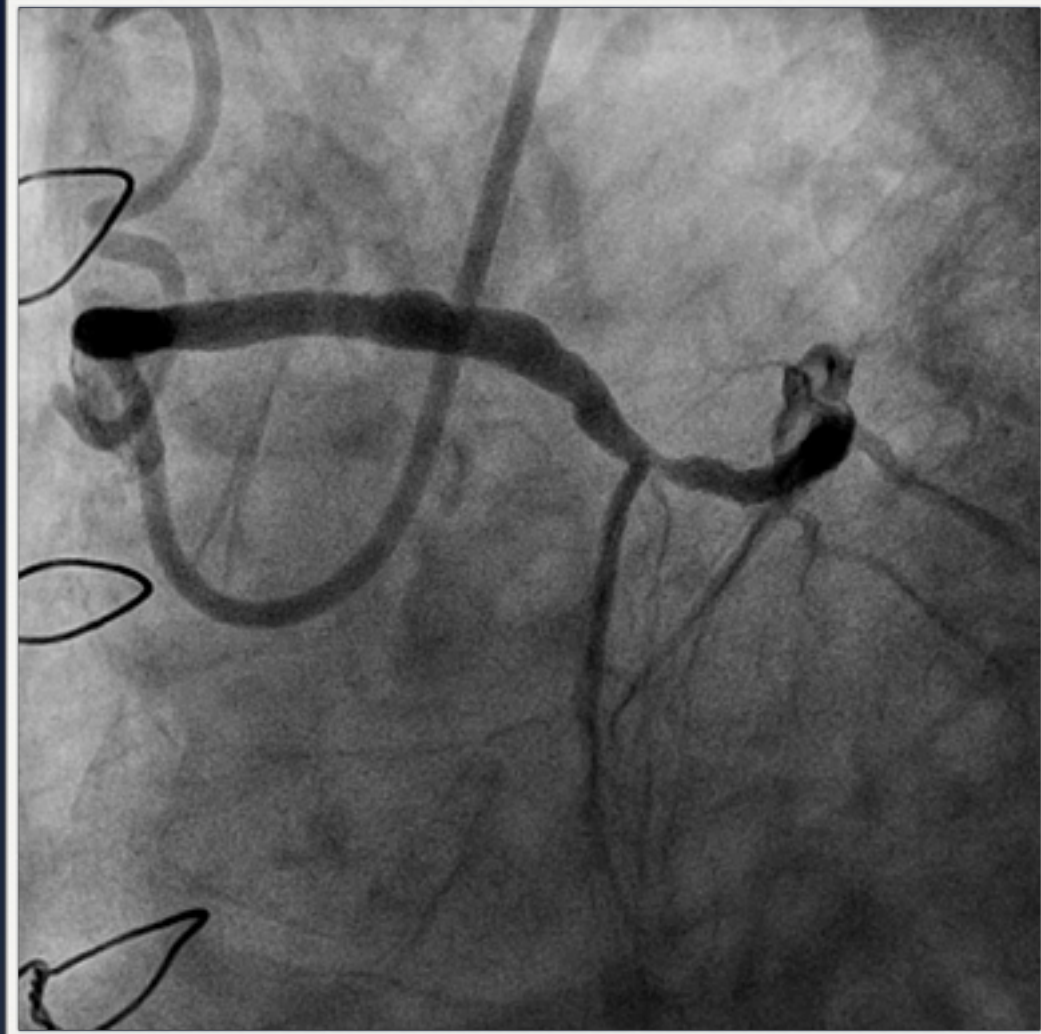
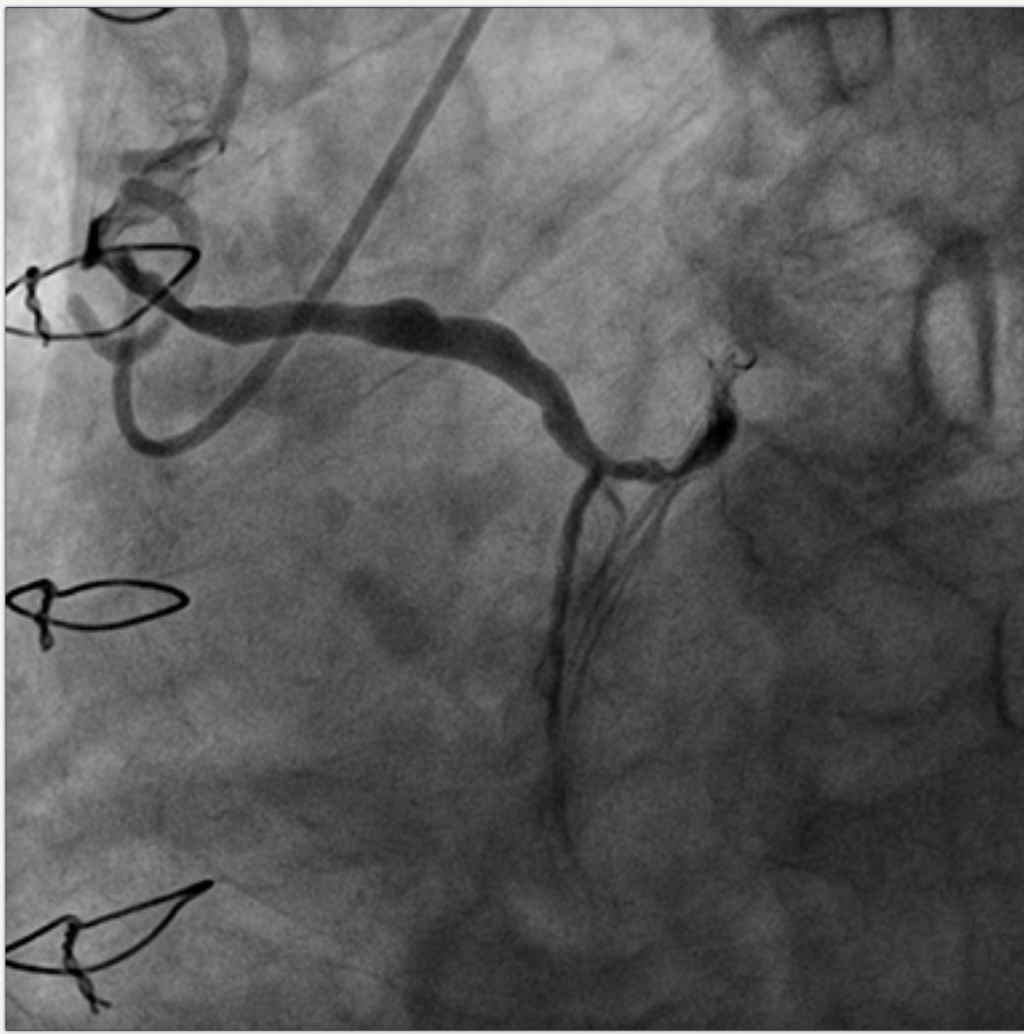
XperSwing® image of treated LAD



XperSwing® image of treated RCA



XperSwing® image of treated SVG

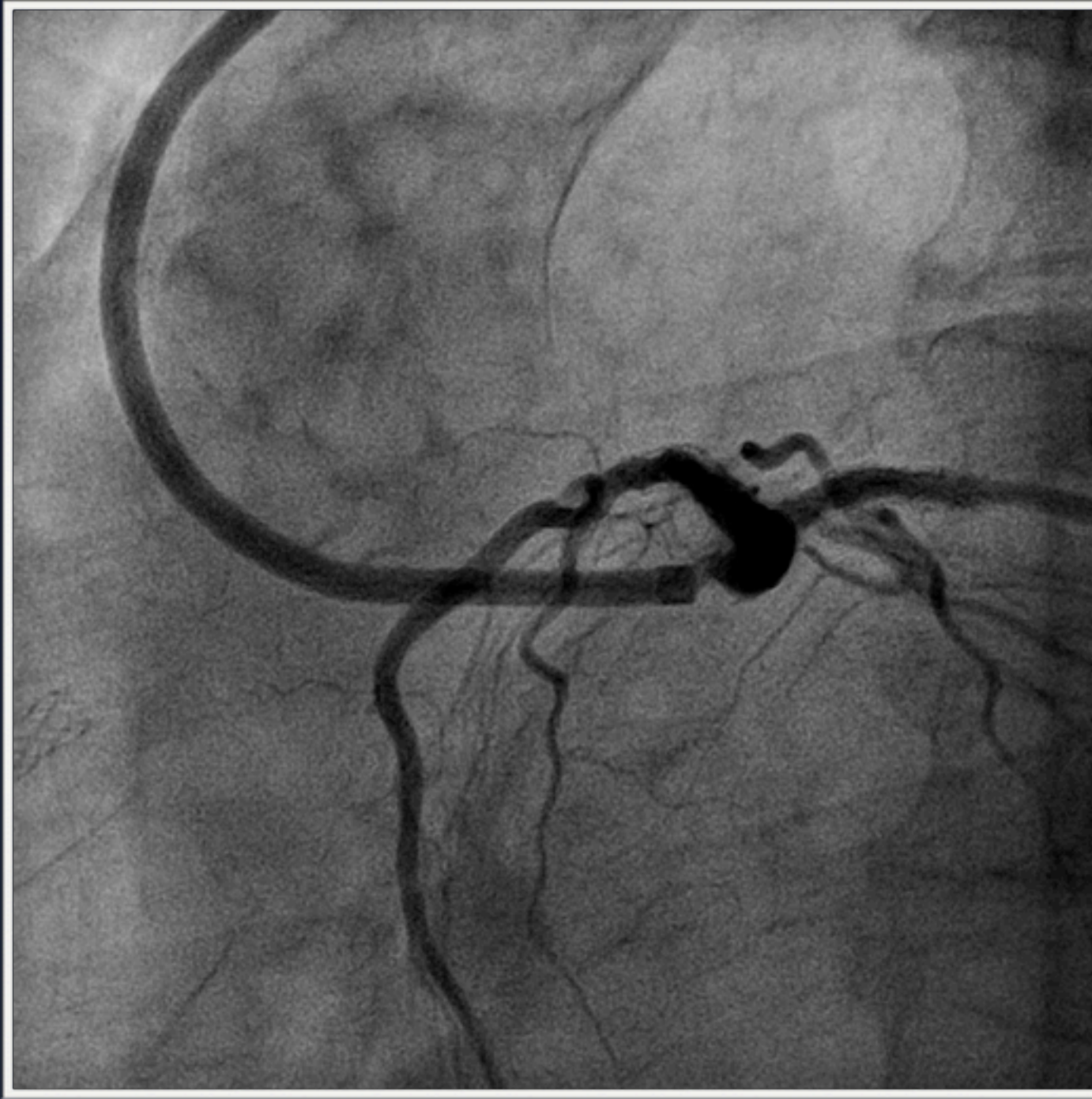


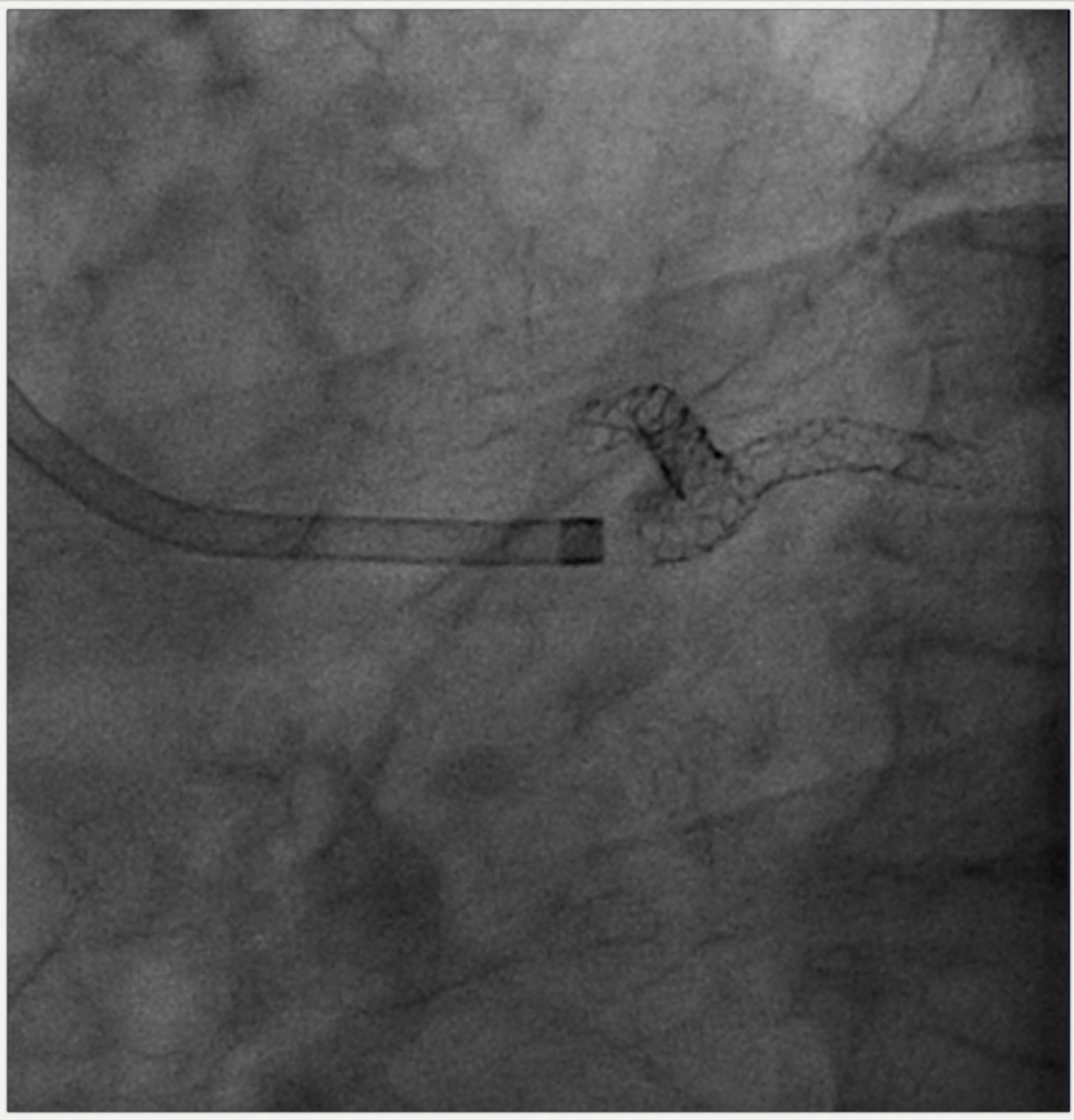
CASE-1

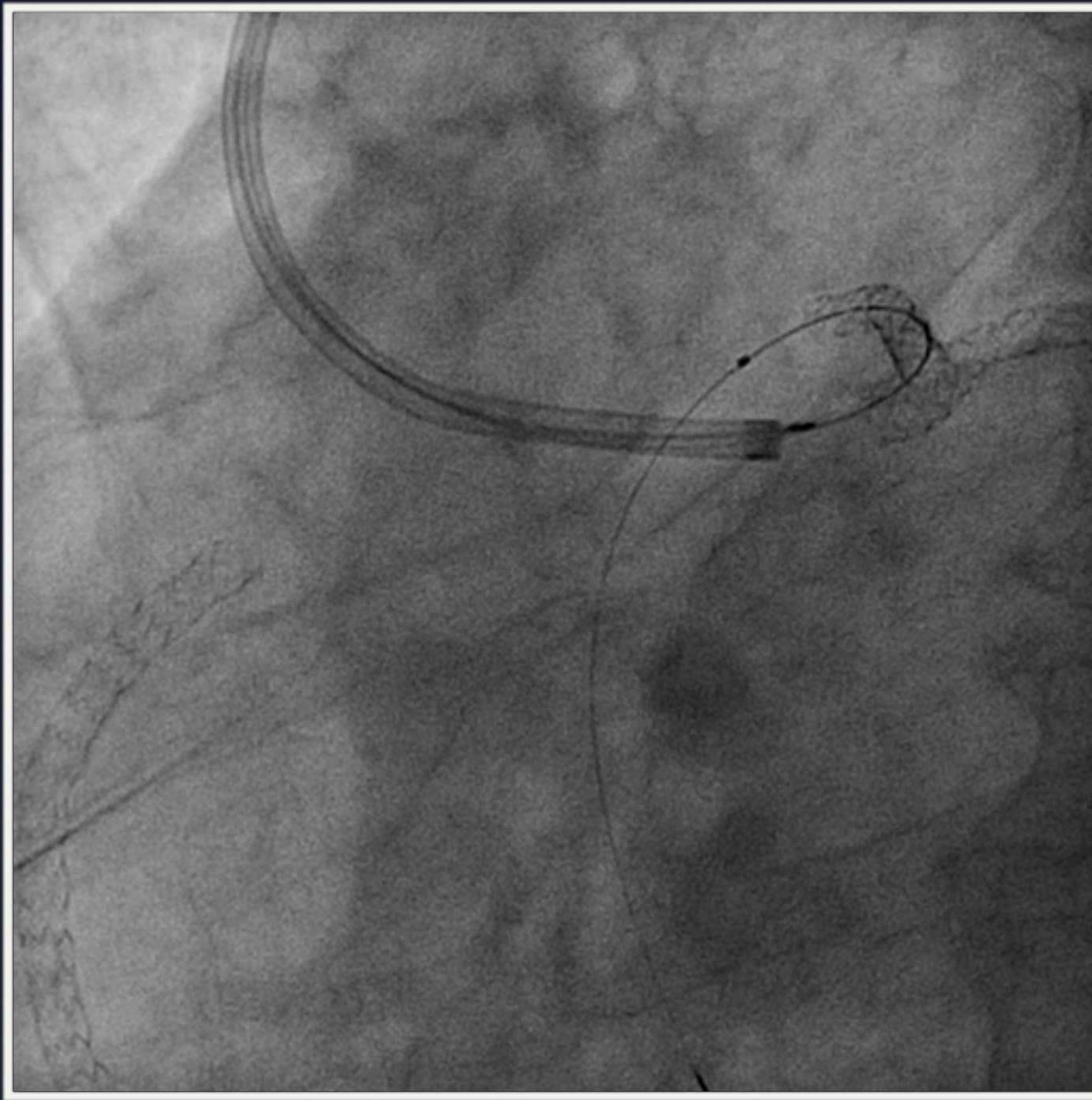
Unstable Angina Pectoris

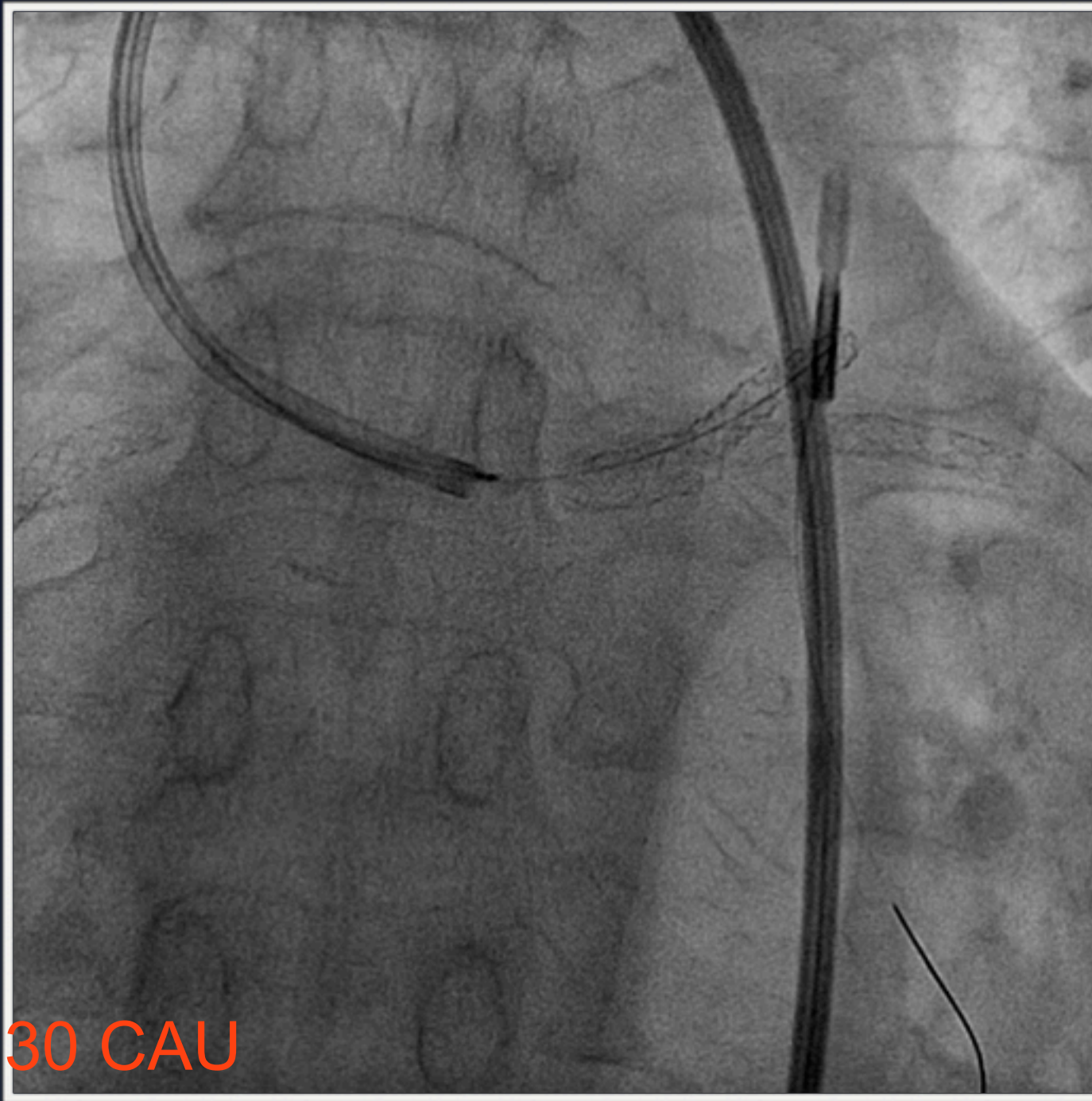
Target Lesion : ULM-jp









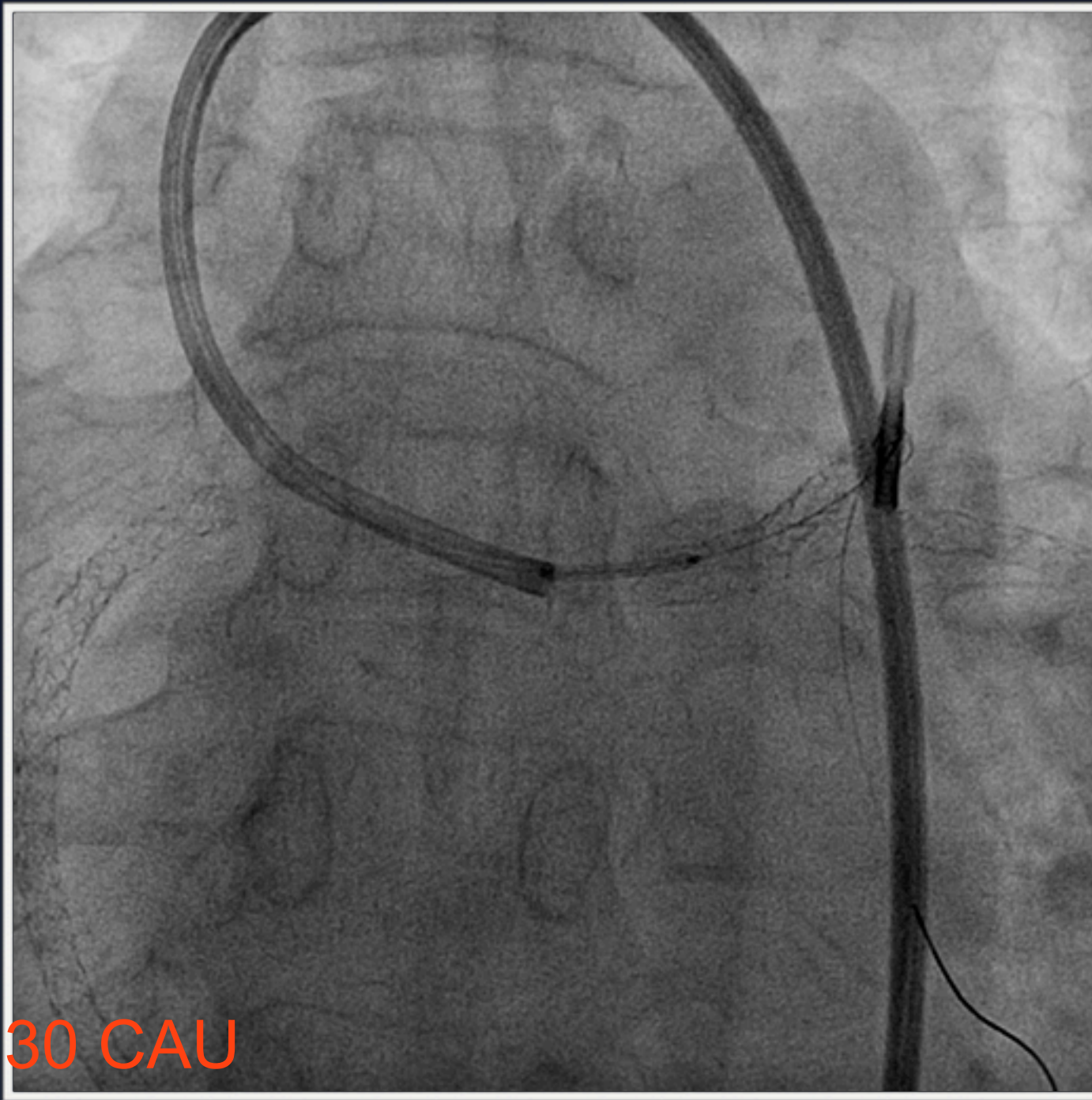


30 CAU



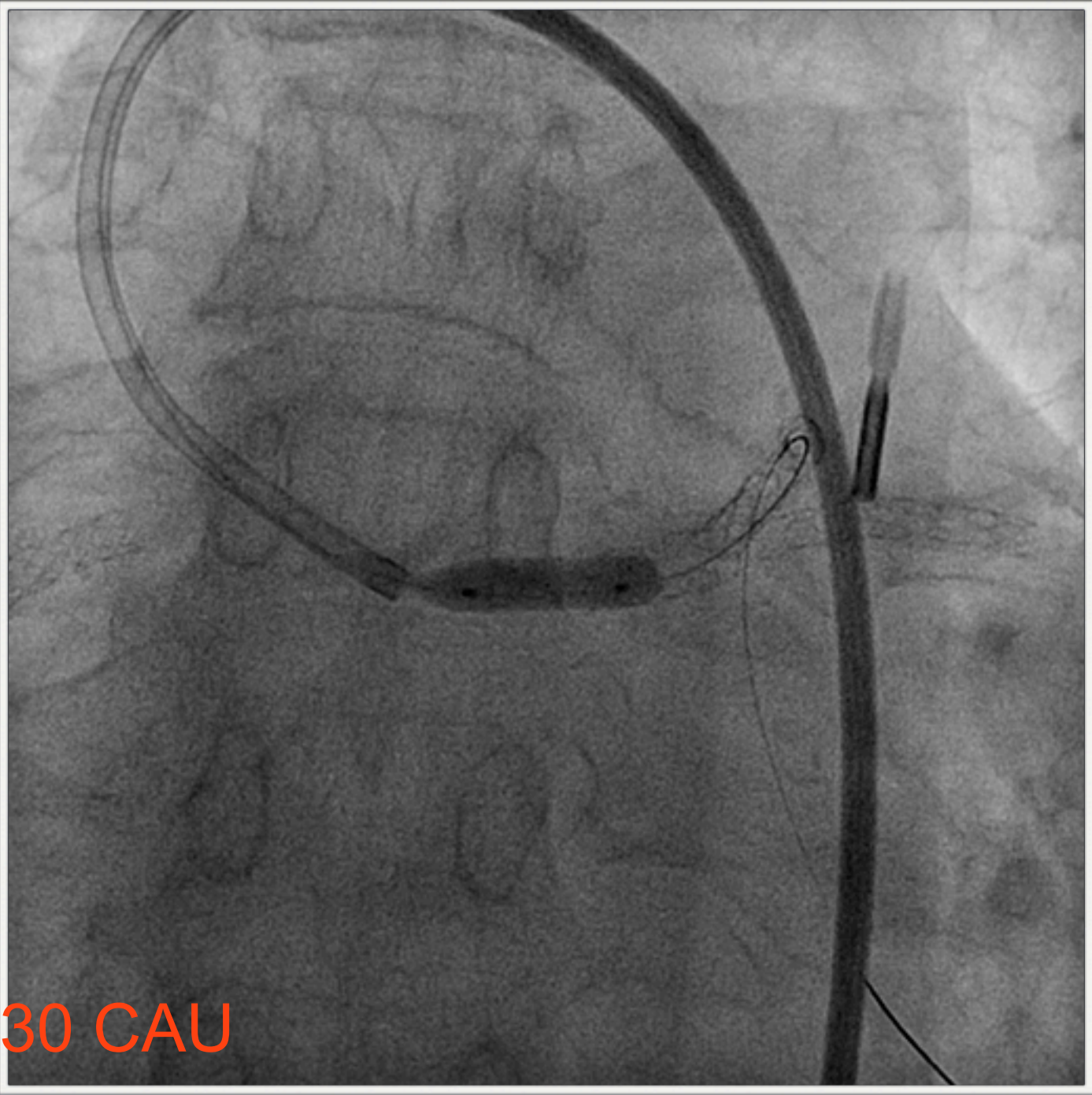
The XperSwing could suggest
**the most optimal
projection**
for PCI treatment
of the complex lesion.





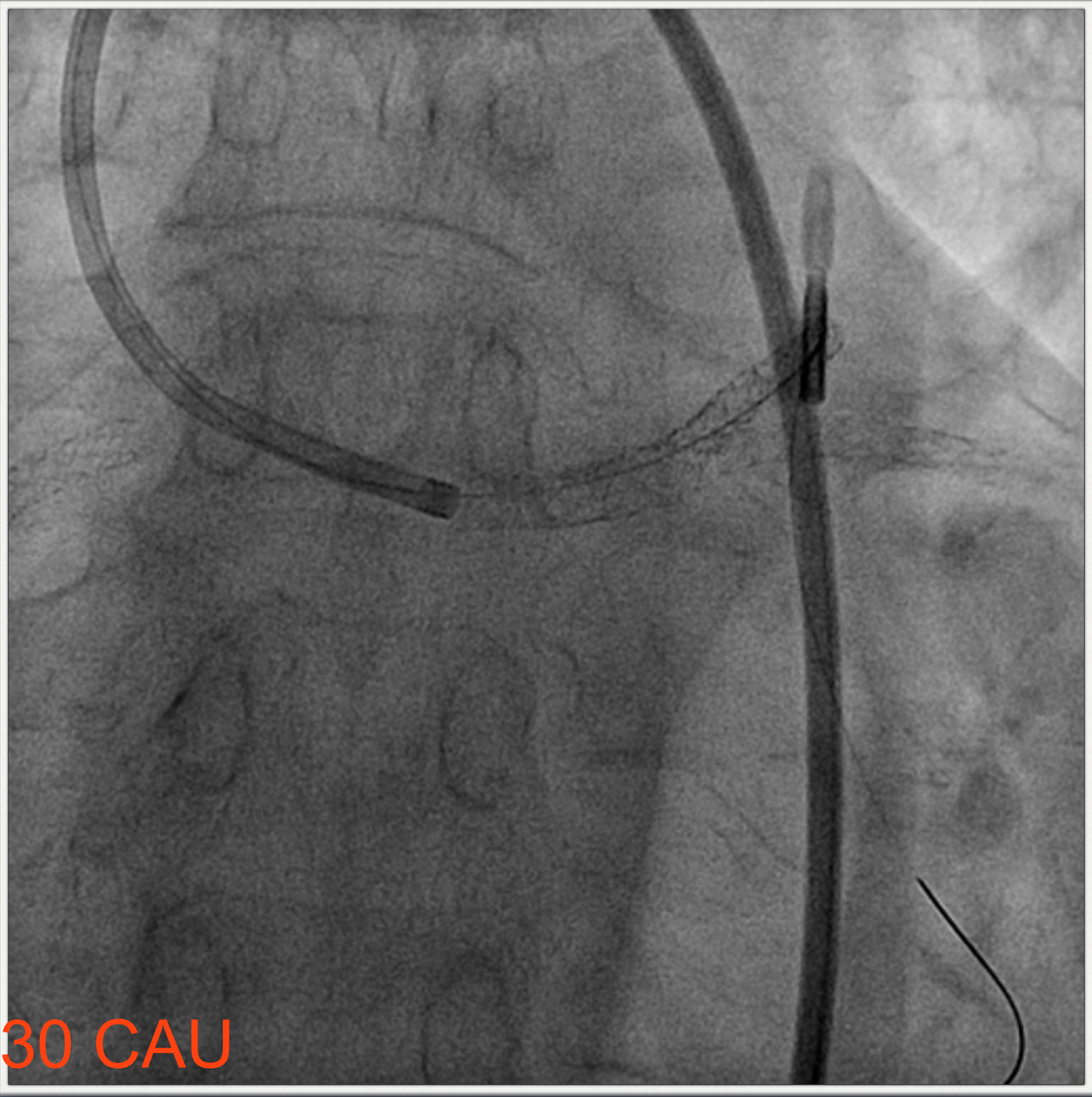
30 CAU





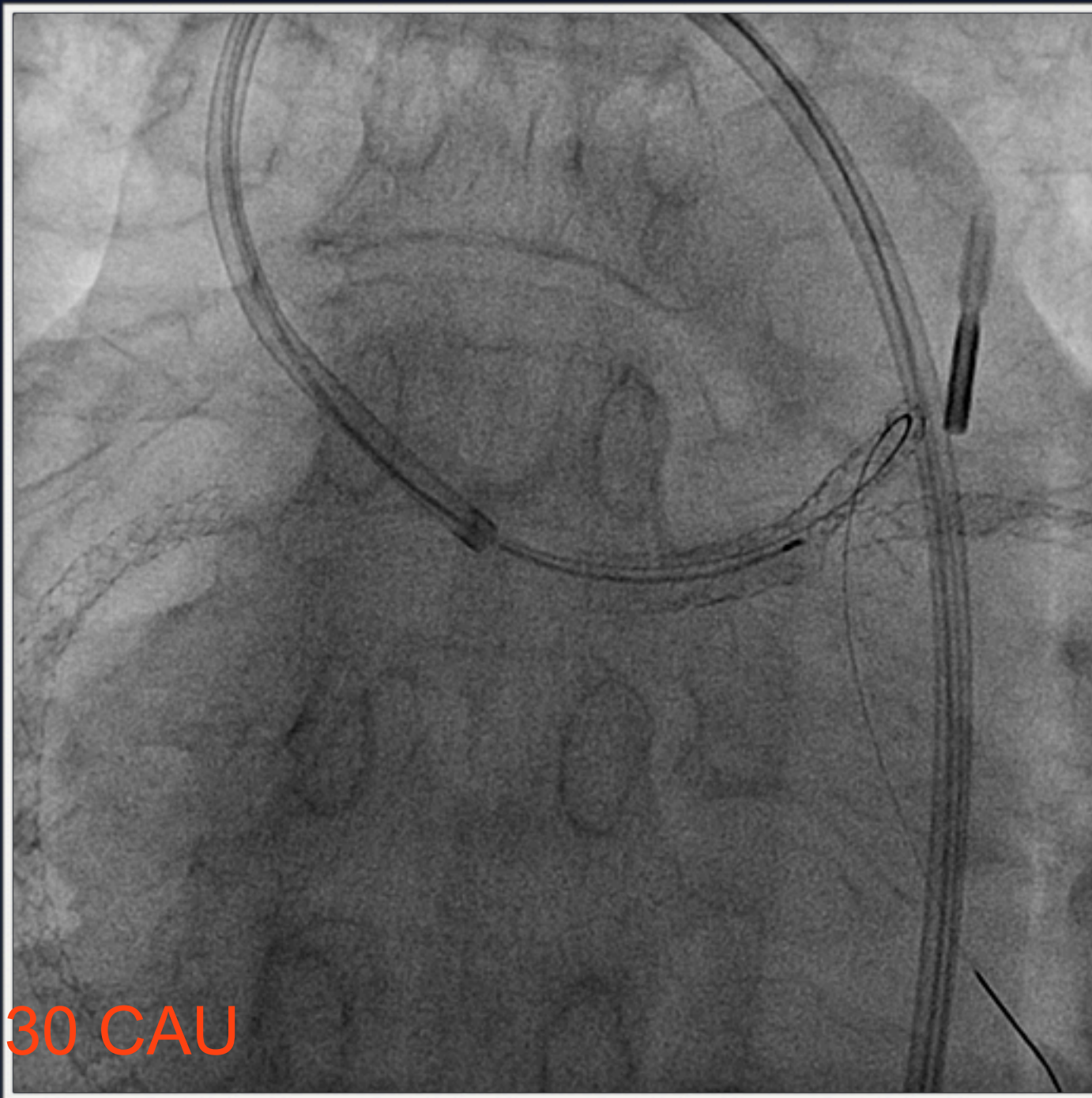
30 CAU





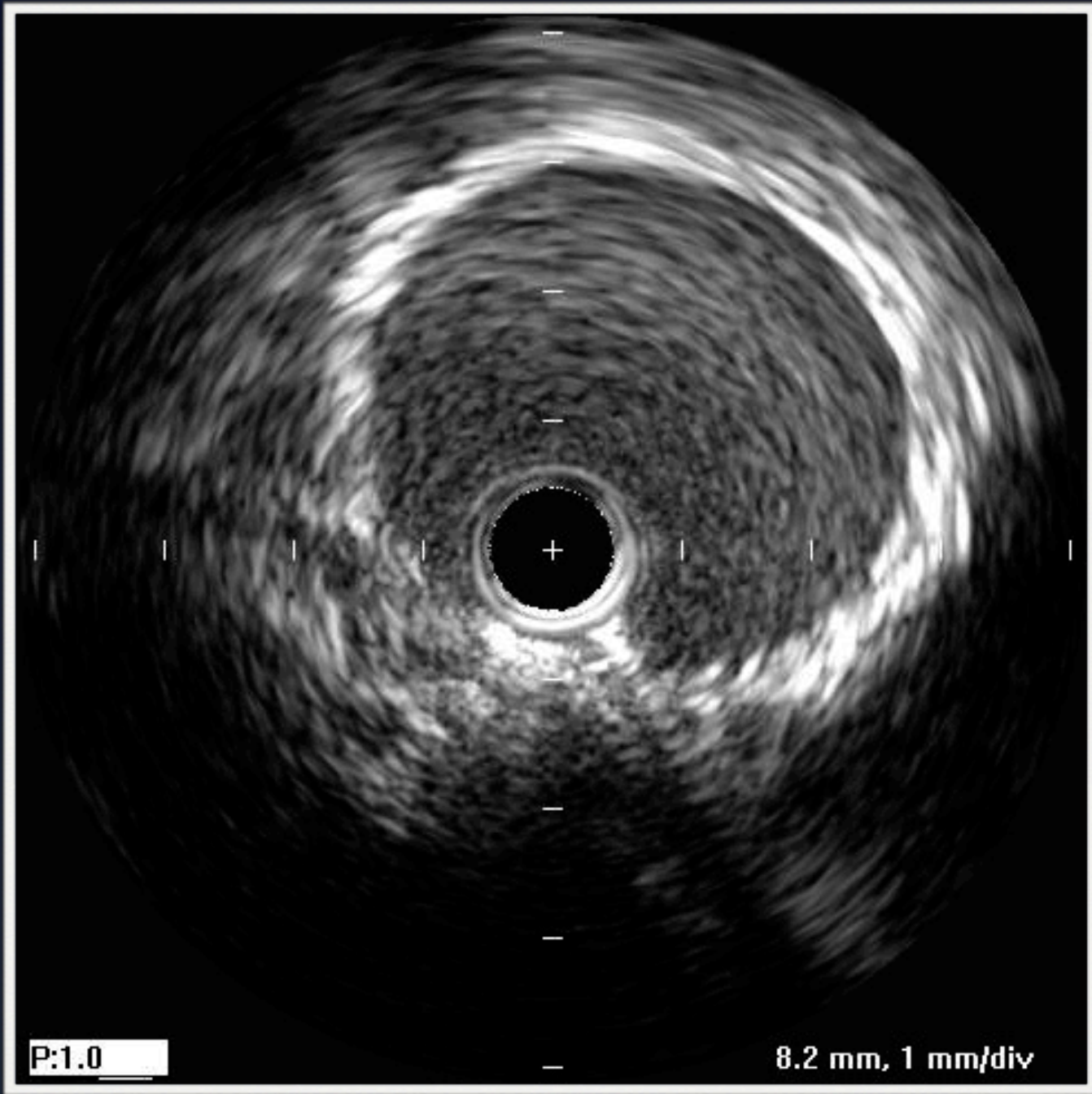
30 CAU

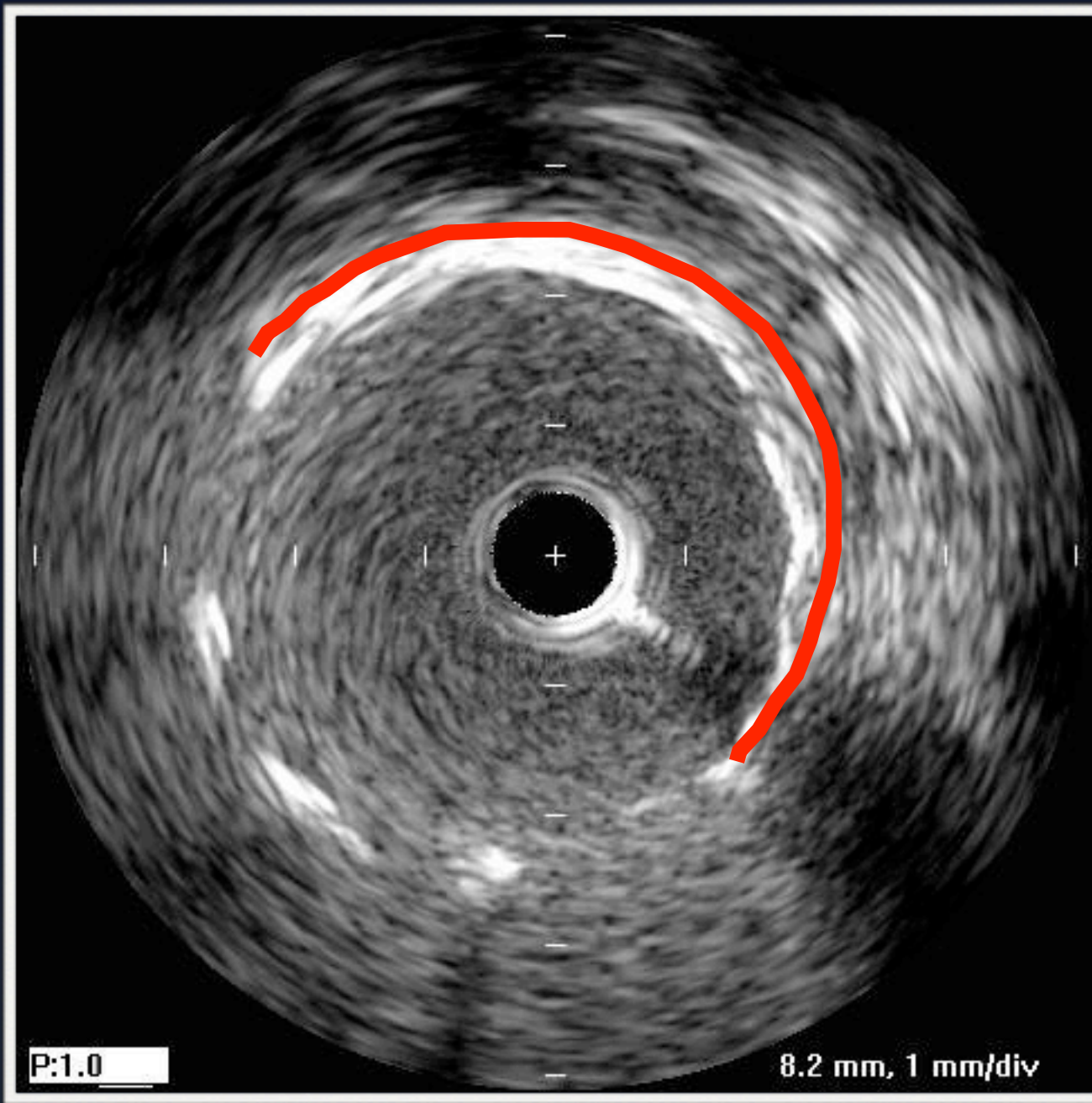




30 CAU

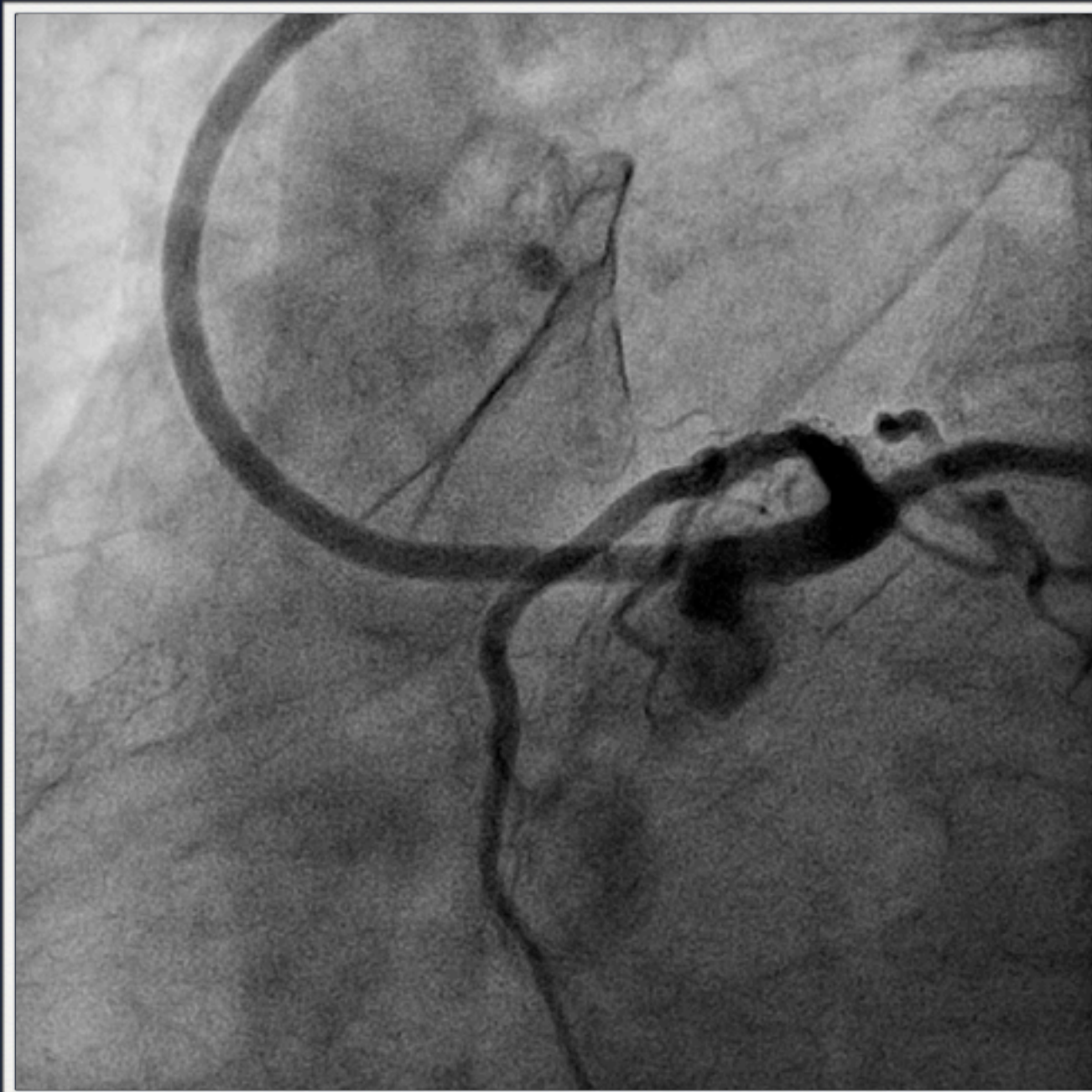






P:1.0

8.2 mm, 1 mm/div



XperSwing can clearly define :

OPTIMAL PROJECTION

for

- ① Measurement of the lesion length
- ② Precise location of left main ostium
- ③ Information of LAD-LCx-bifurcation

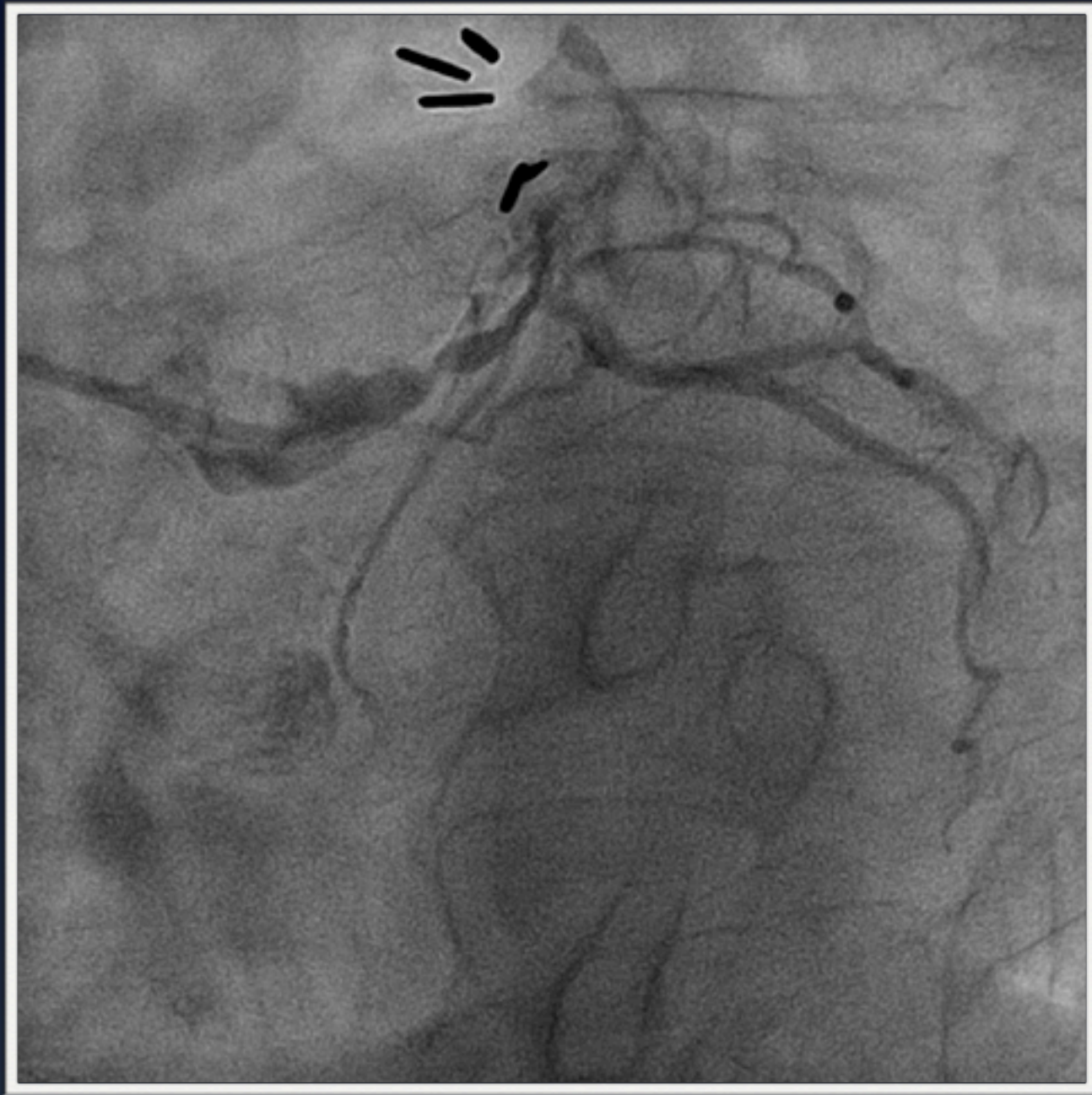


CASE-2

Unstable Angina Pectoris

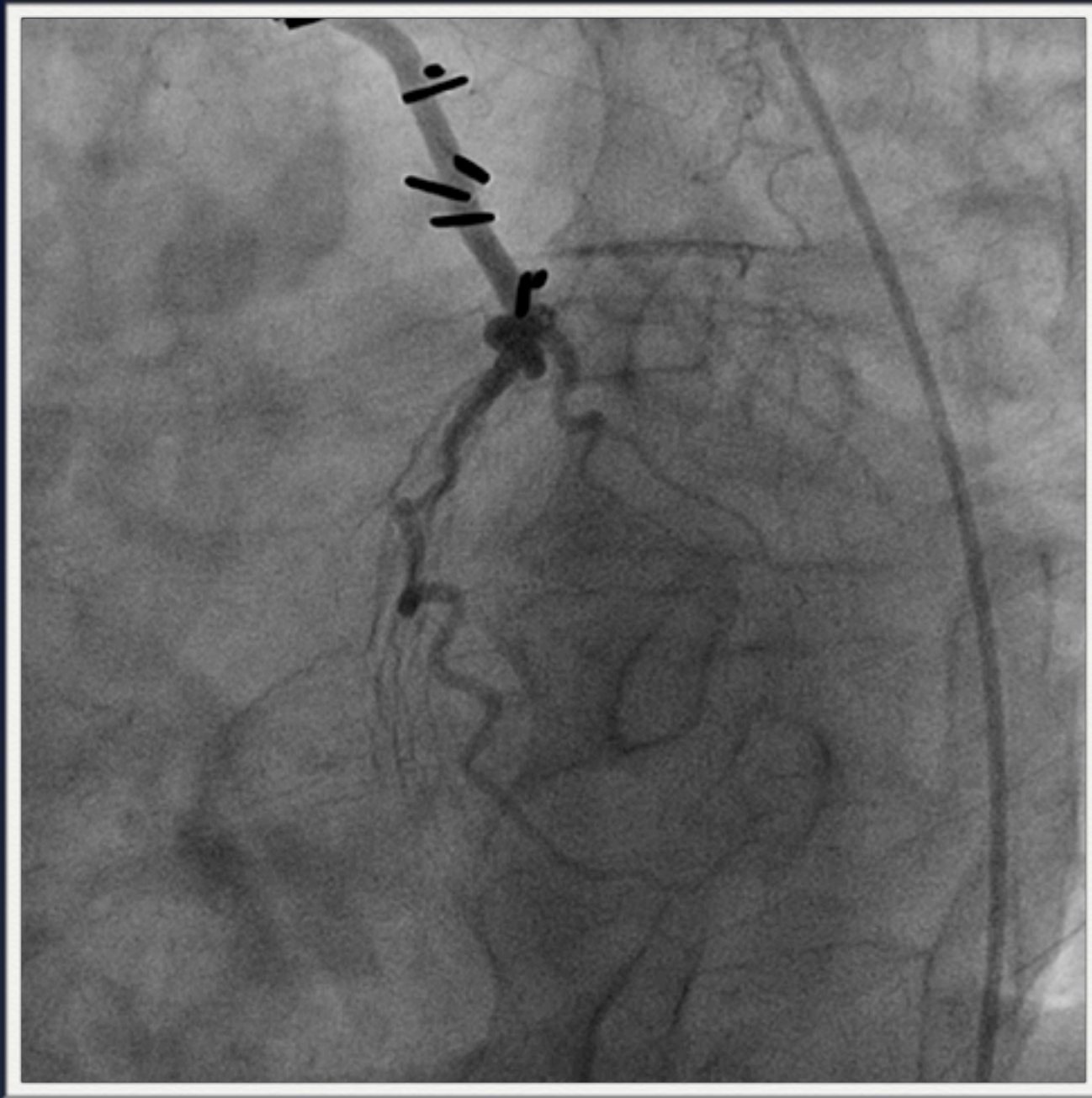
Target Lesion : PLM(body)

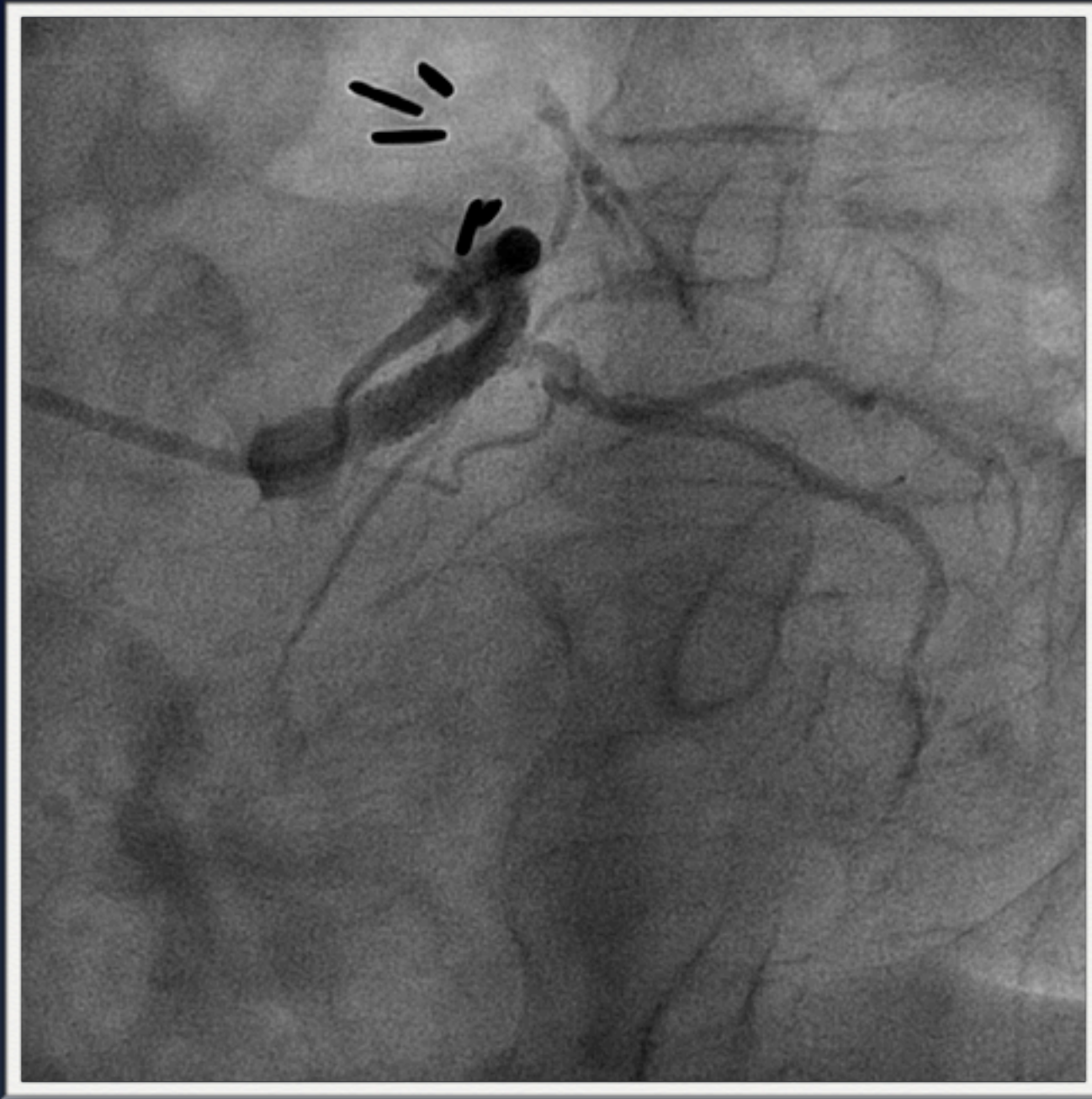


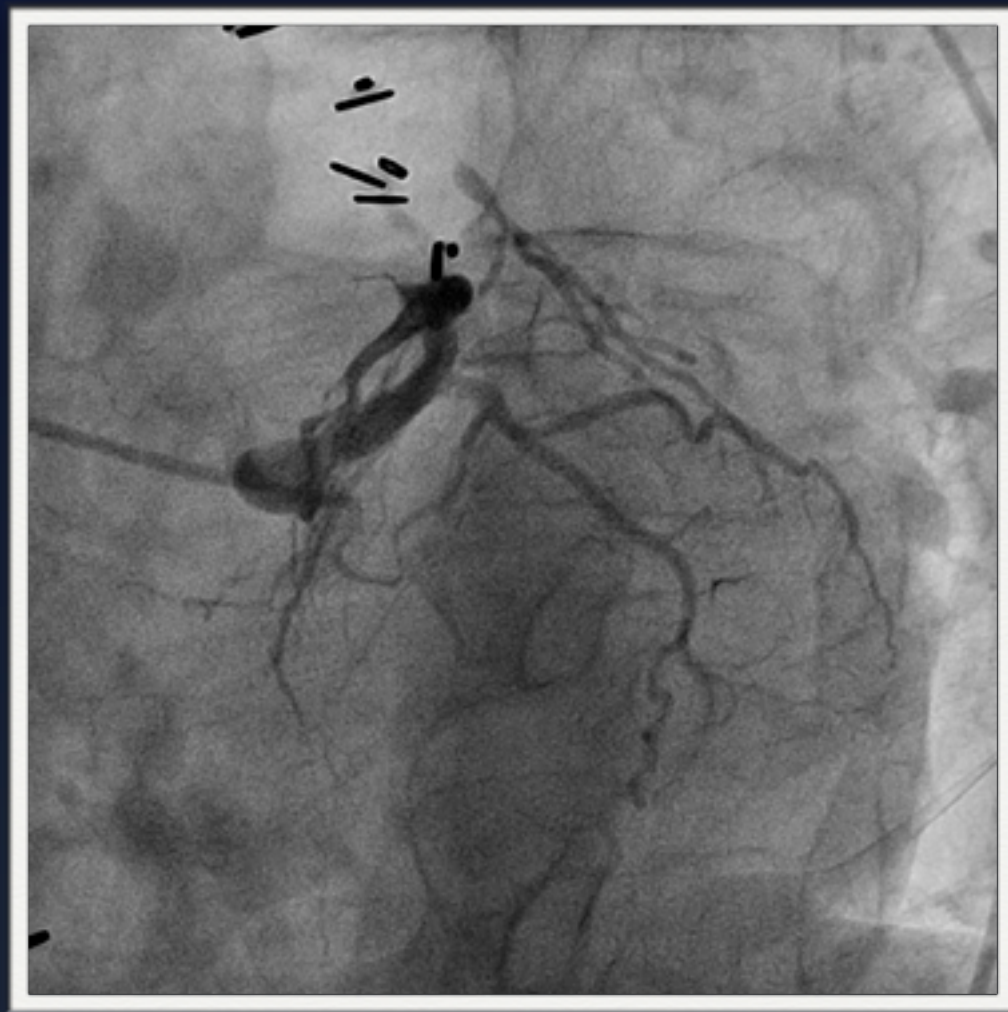


**XperSwing is suggesting
that the best projection
for the assessment of LIMA
is definitely XperSwing itself.**







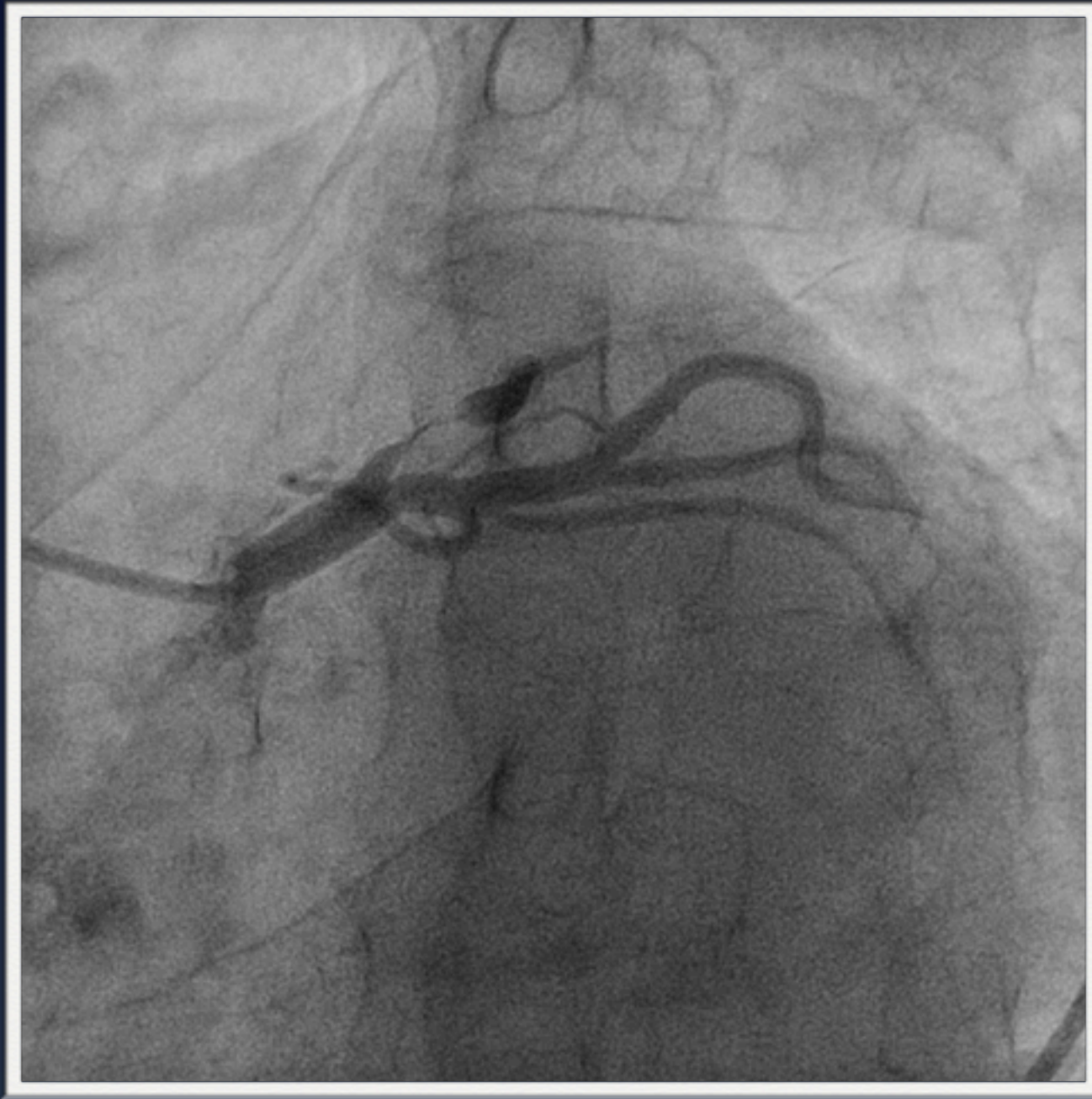


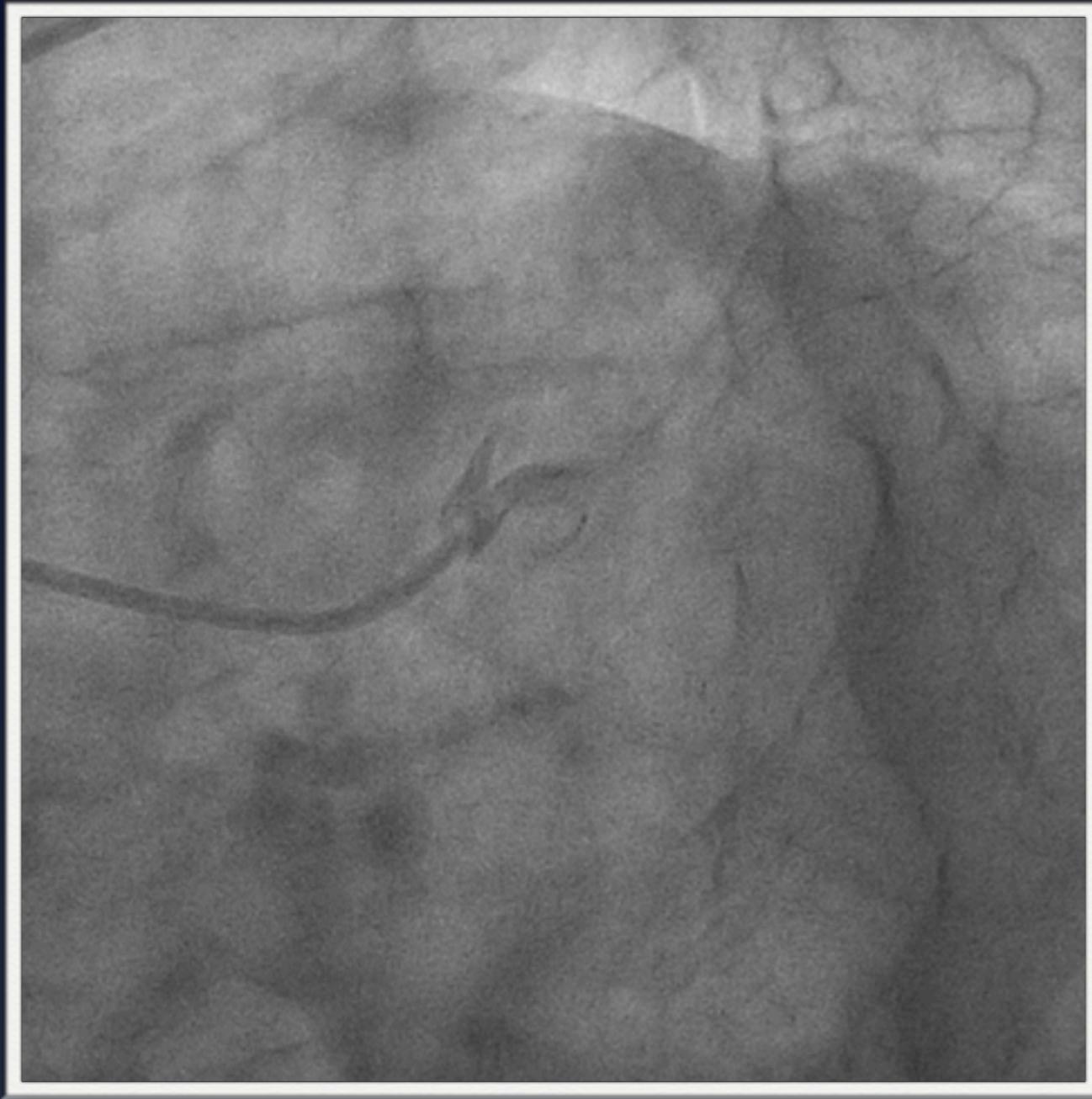
CASE-3

Unstable Angina Pectoris

Target Lesion : LAD-jp

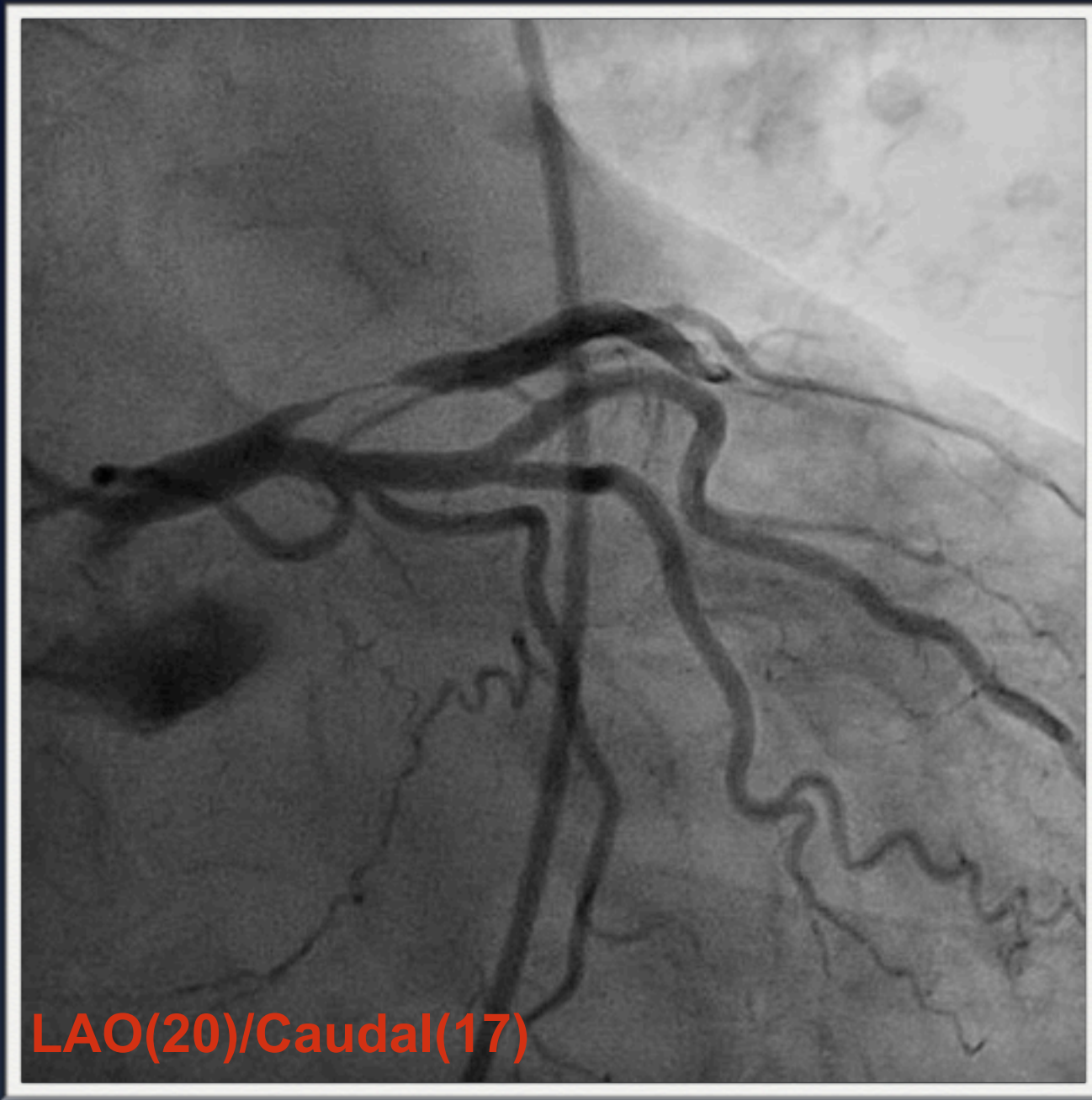






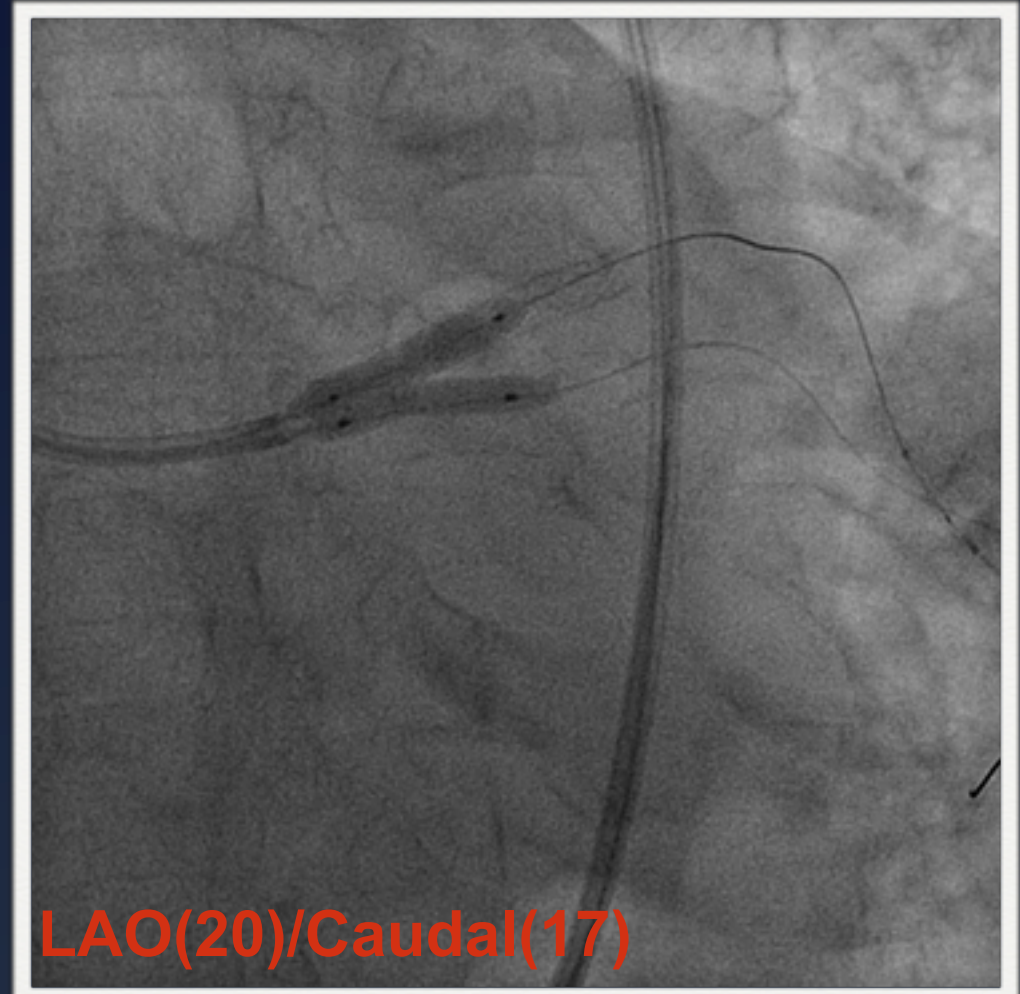
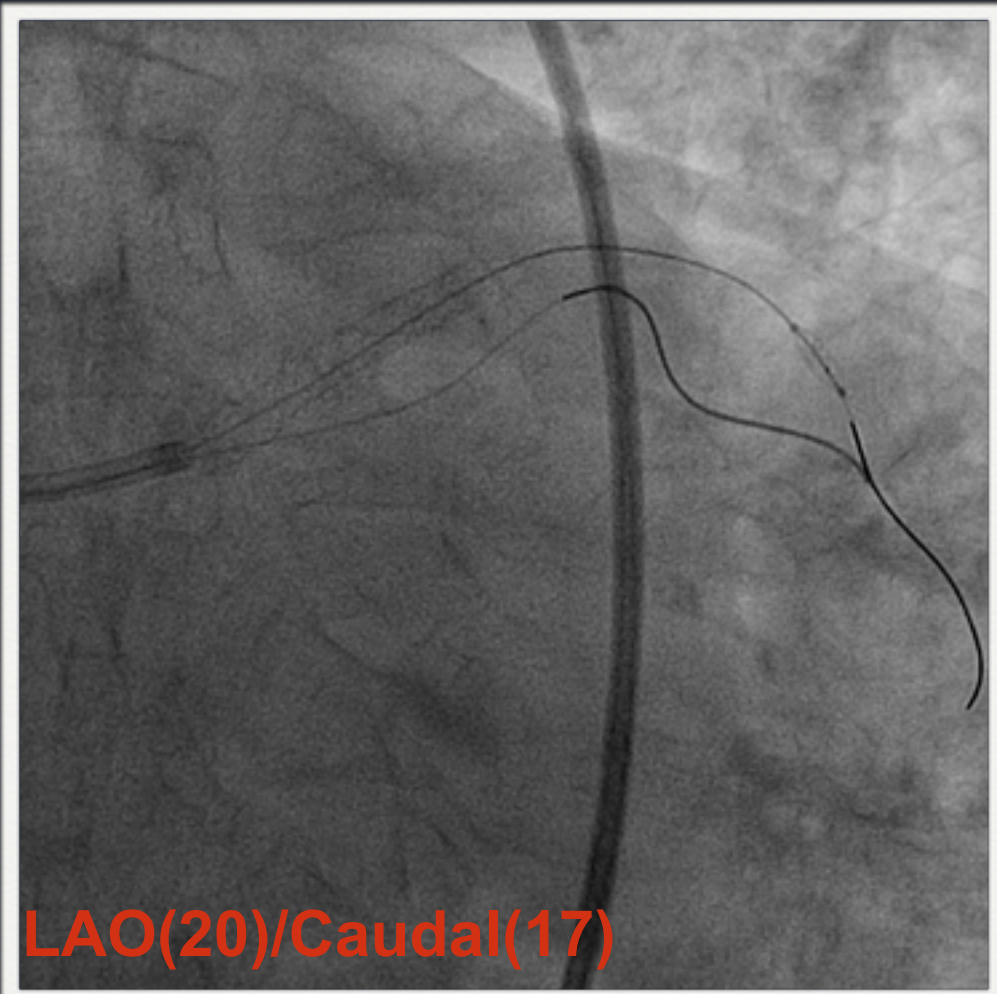
In this case, images from
XperSwing suggest that
the most optimal projection
for the target lesion is
LAO(20)/Caudal(17)

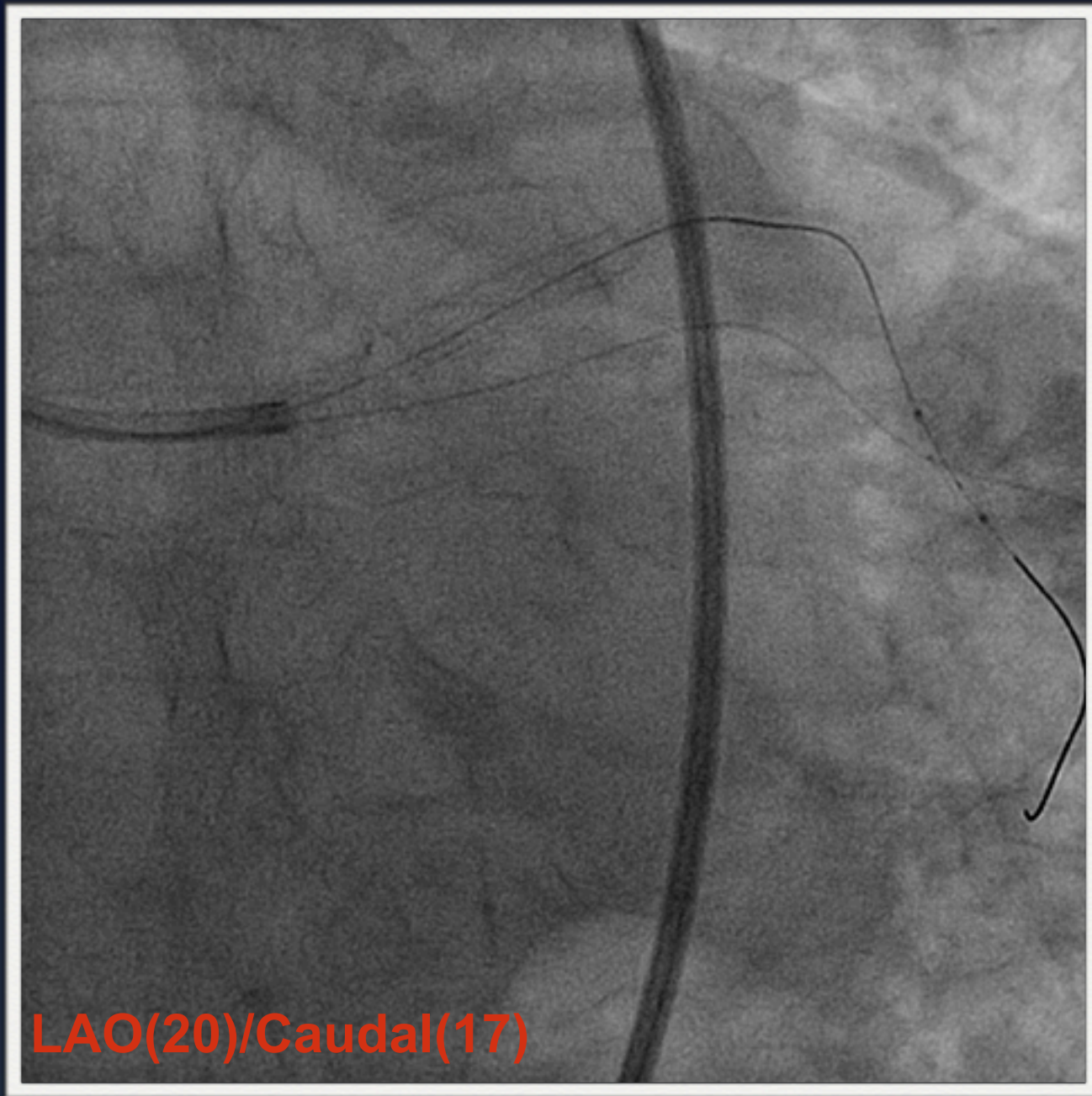




LAO(20)/Caudal(17)

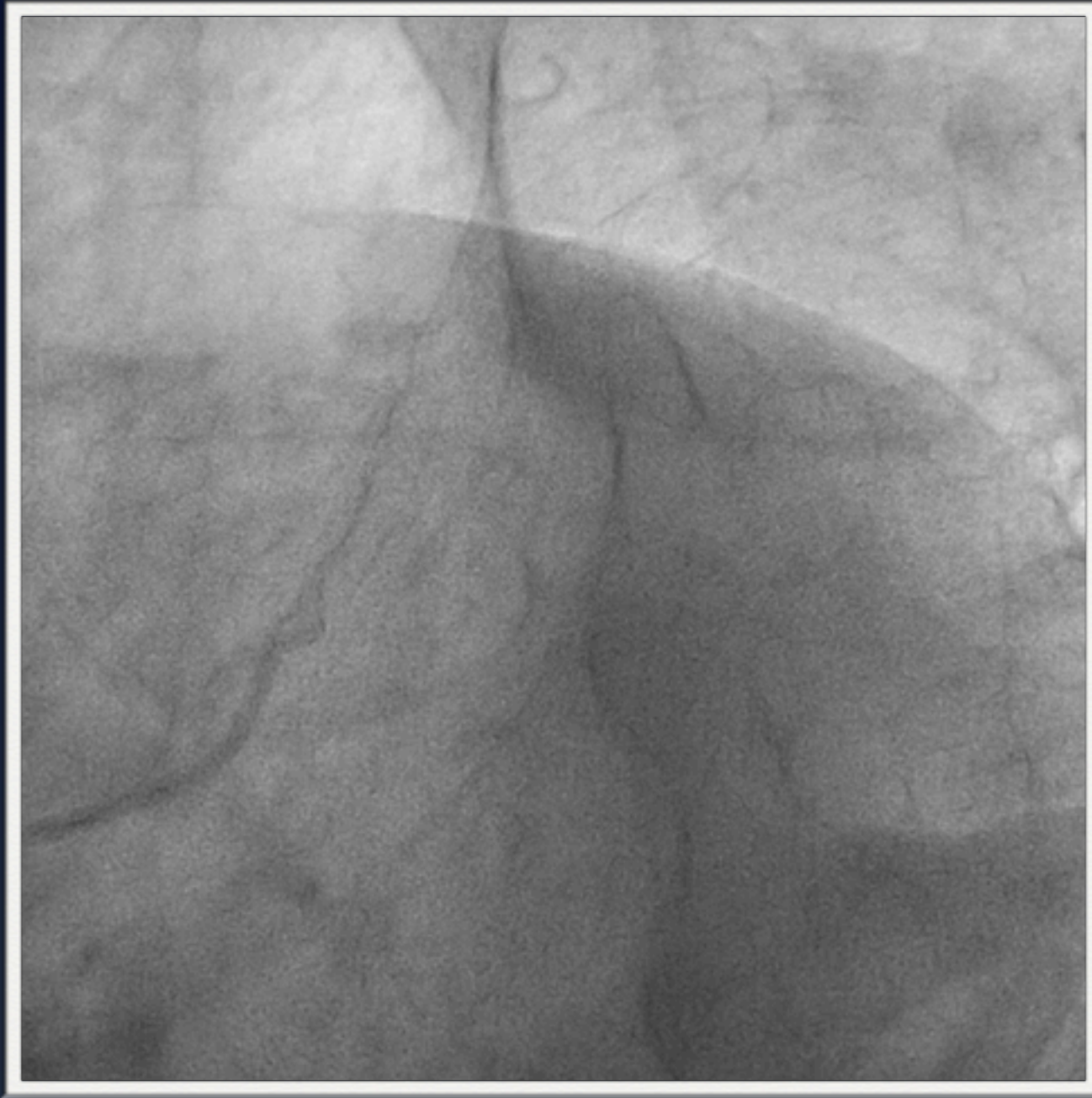


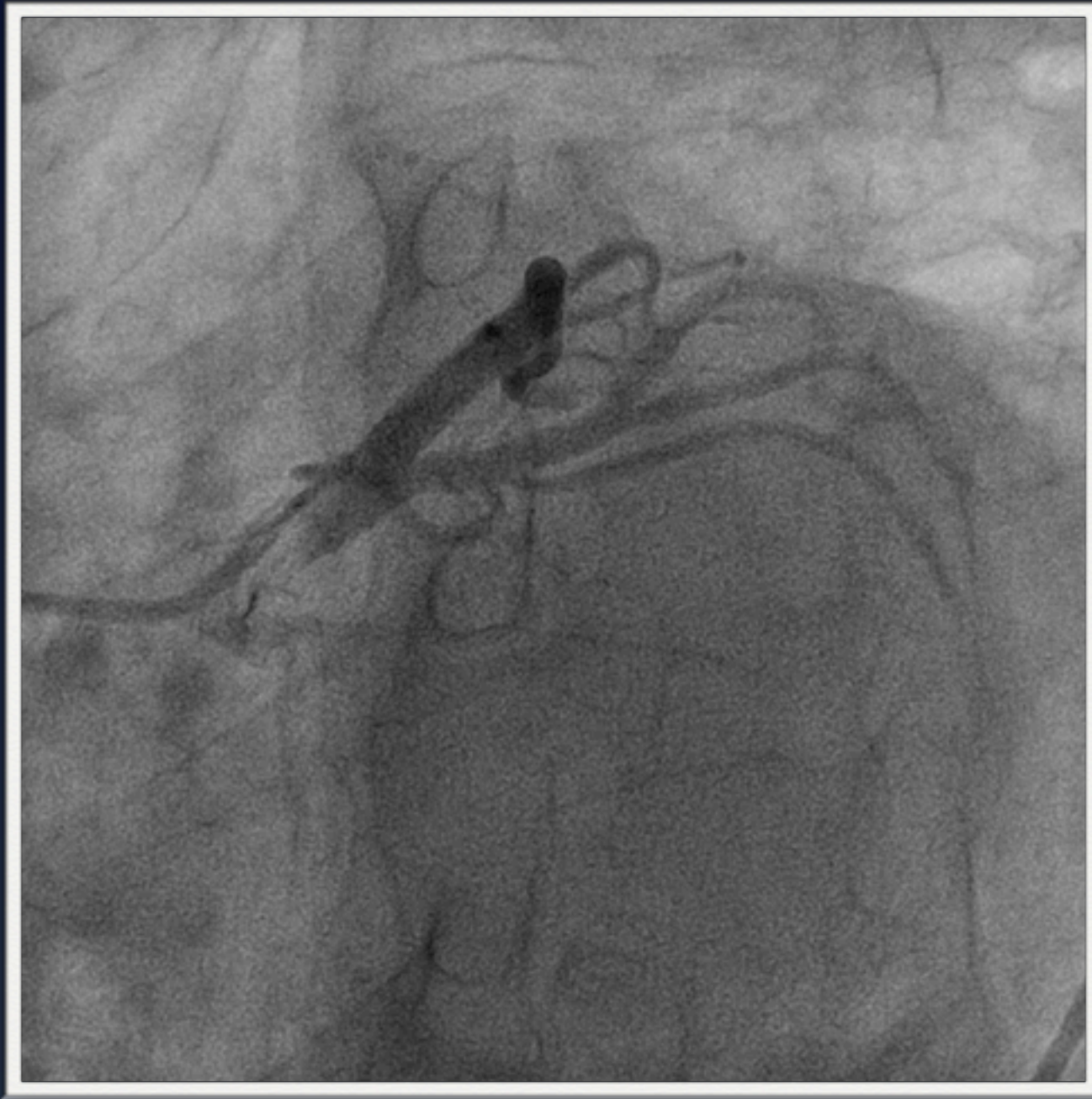


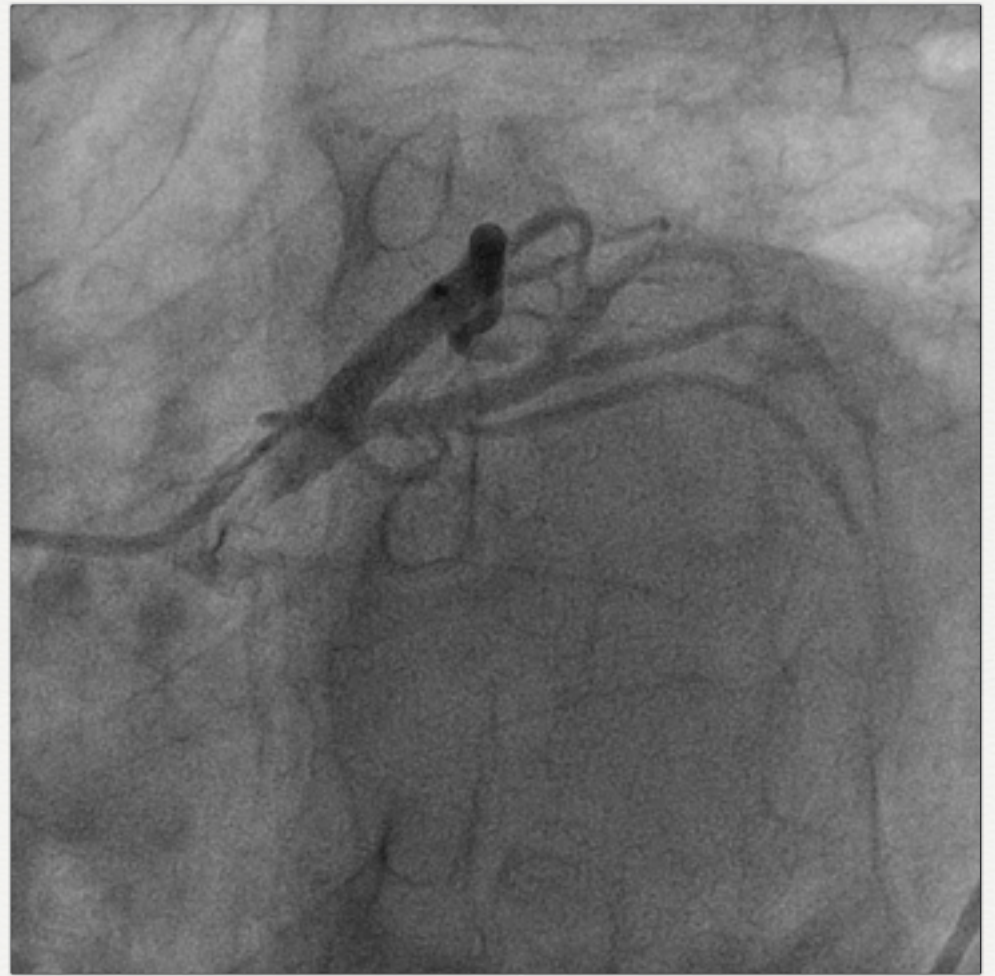


LAO(20)/Caudal(17)









CASE-4

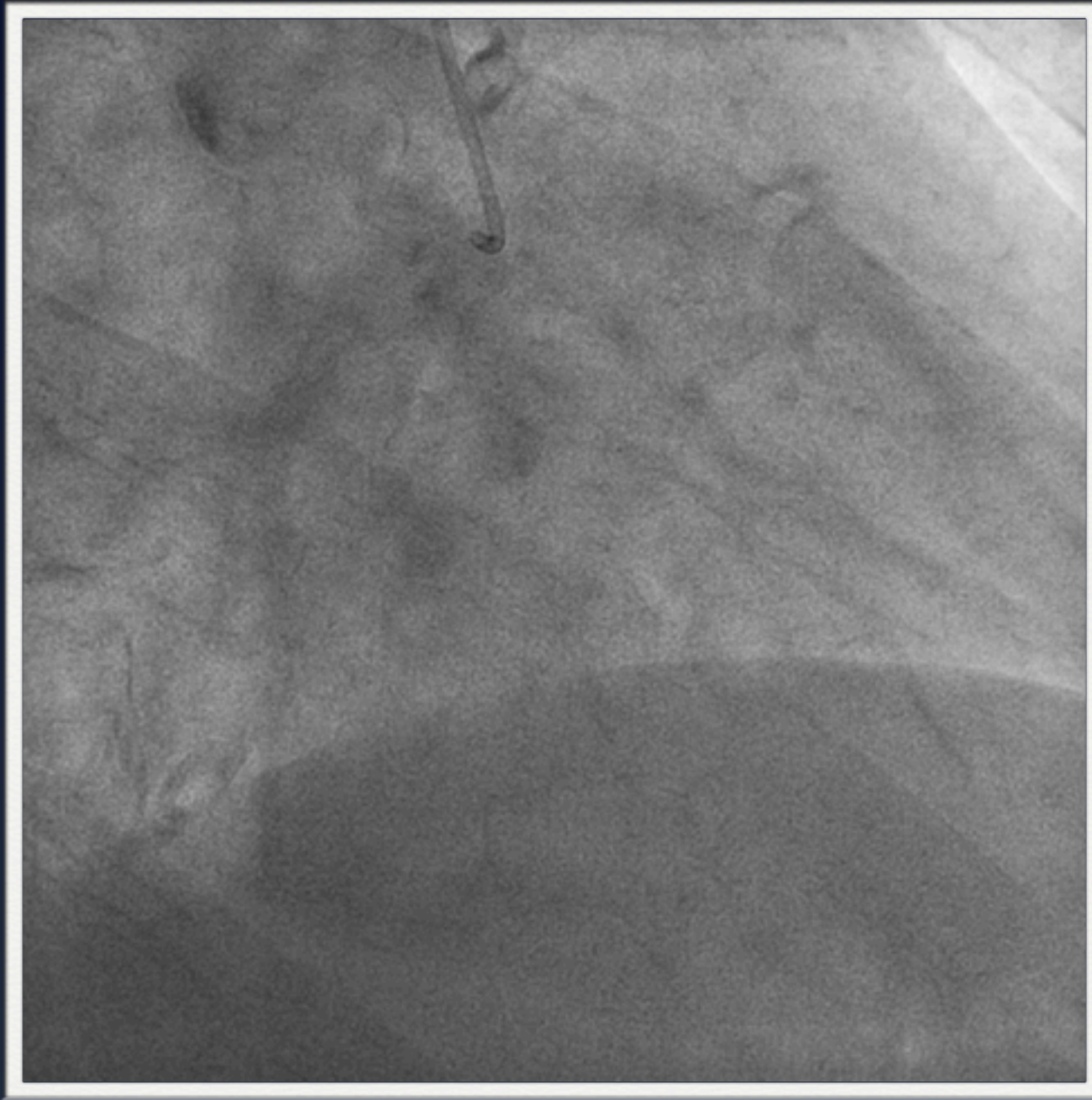
Stable Angina Pectoris

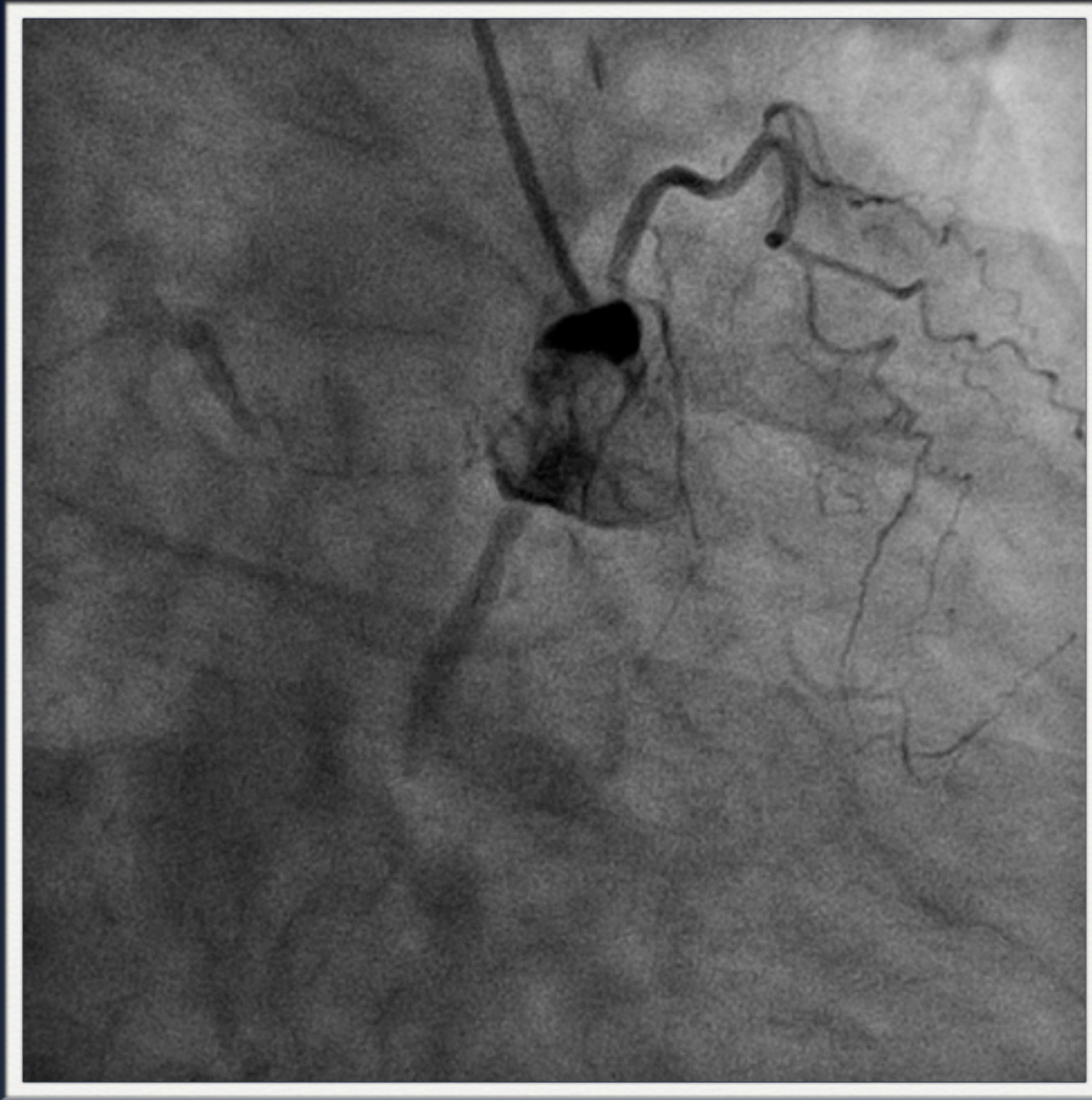
Target Lesion

Functional RCA-CTO



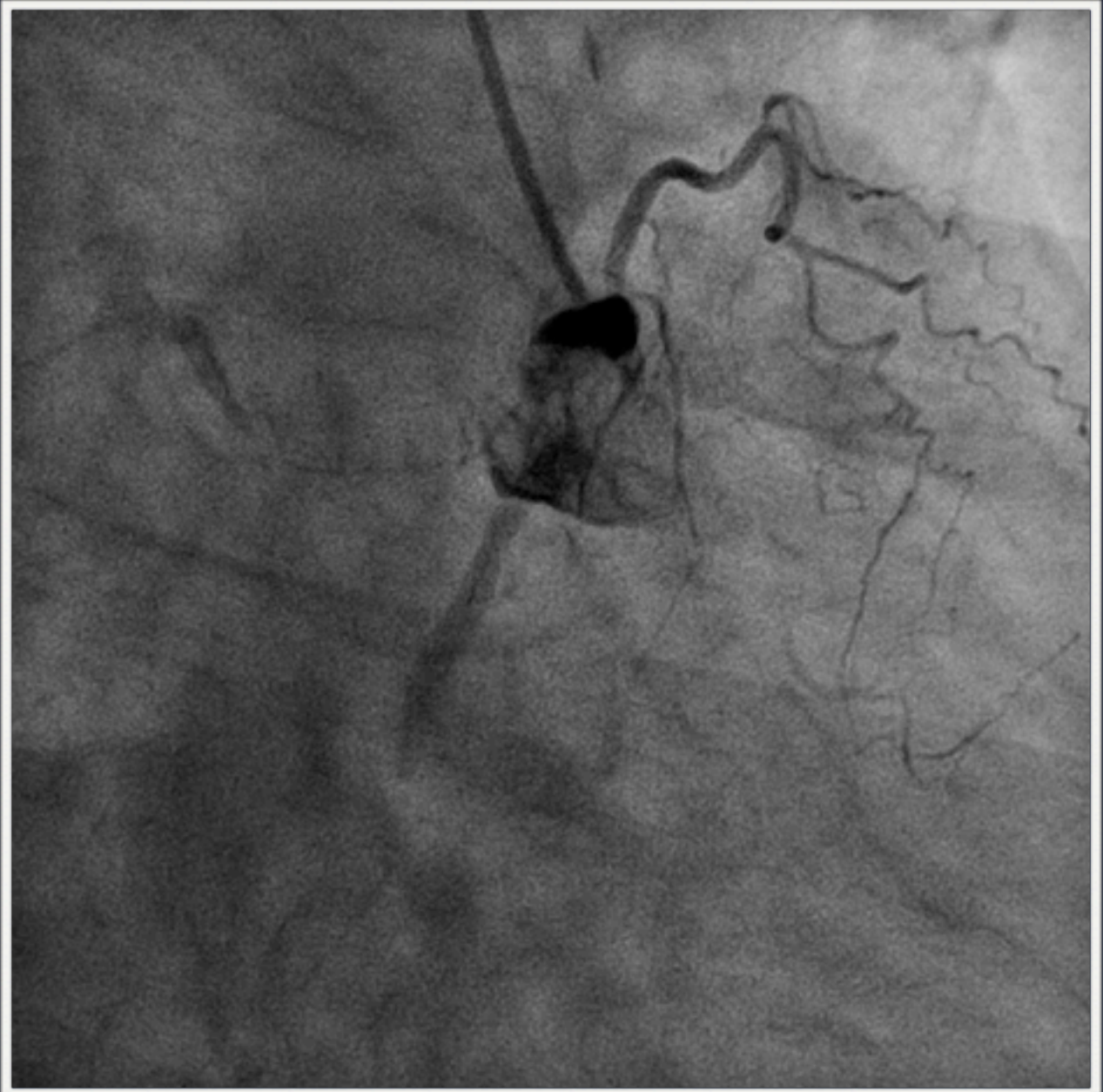
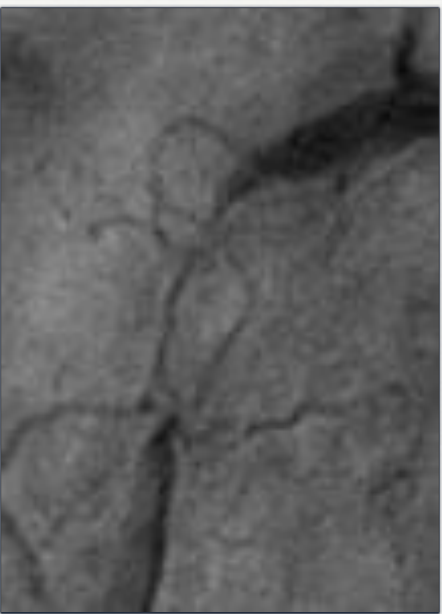


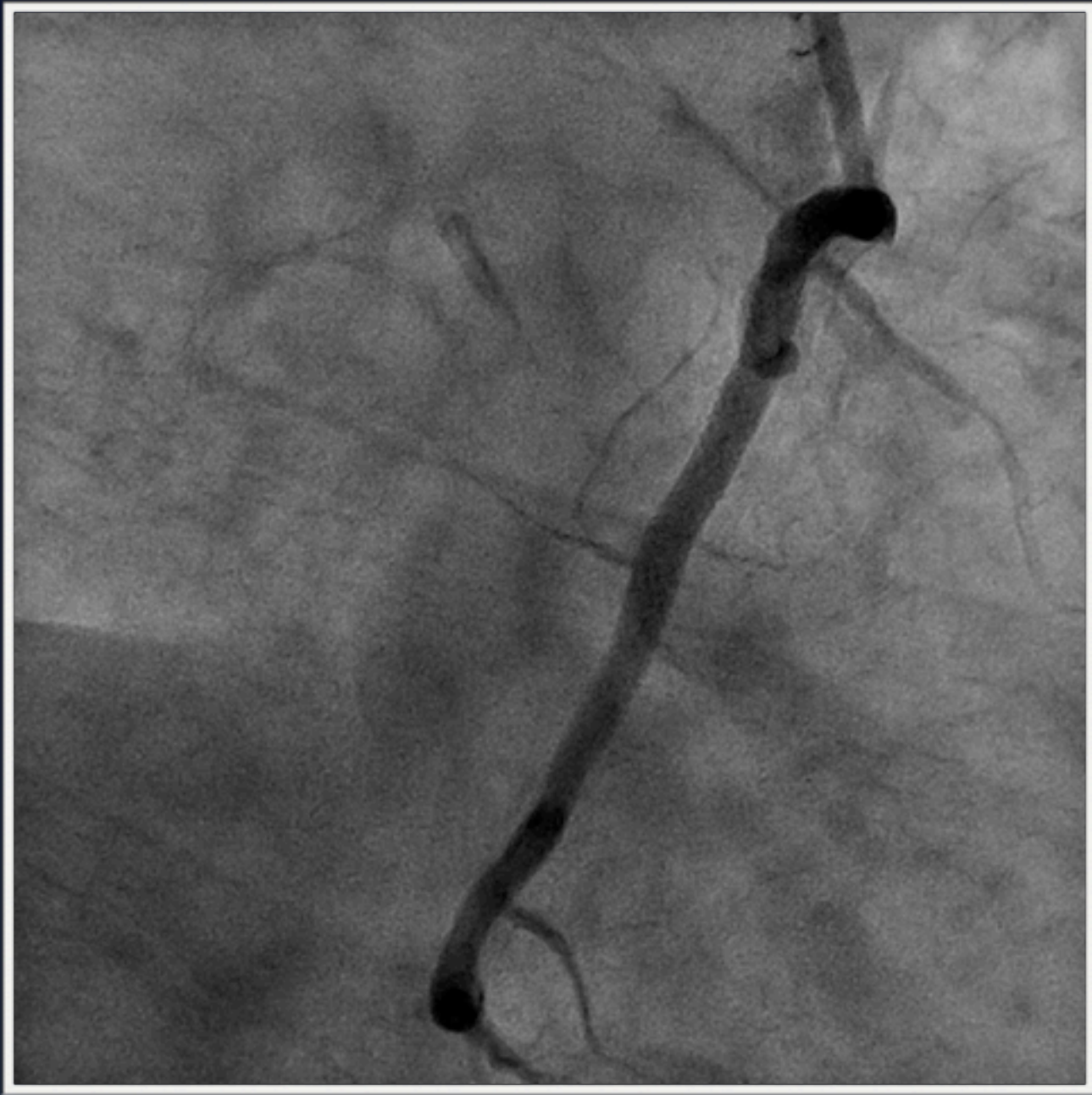




**Only XperSwing could reveal
a promising micro channel
is existing definitely
in the CTO segment.**







Take home message

XperSwing® is useful for **diagnosis**, but also for **planning** and **follow-up** the final results after complex-PCI. It has promising potential to be the standard angiography in the near future. So, I would like to recommend XperSwing strongly for your daily practice.

