Guidewire Assisted Device Placement in Large ASD with Aortic Rim Deficiency - —An Easy and Simple Method—

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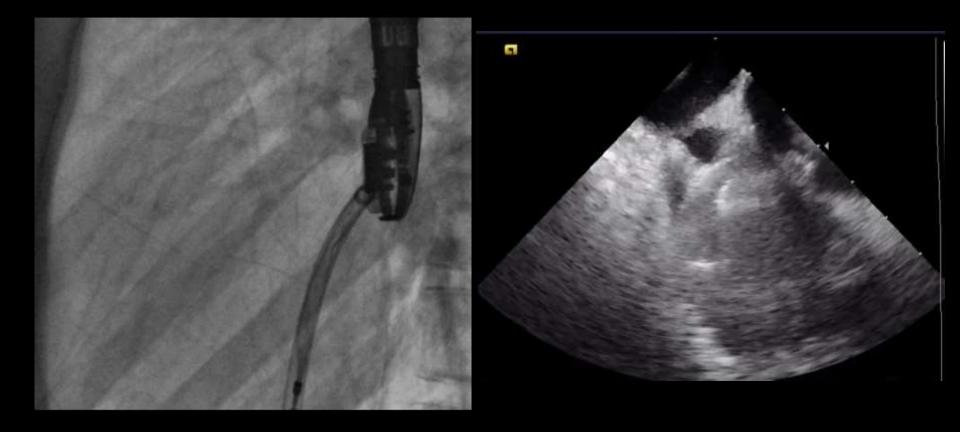
#### We have nothing to disclose.

#### Difficult ASD

Large defect Defect size = BW Defect size = BW+10mm

>= 20mm in diameter Wide range rim deficiency especially Aotic rim

#### Standard procedure

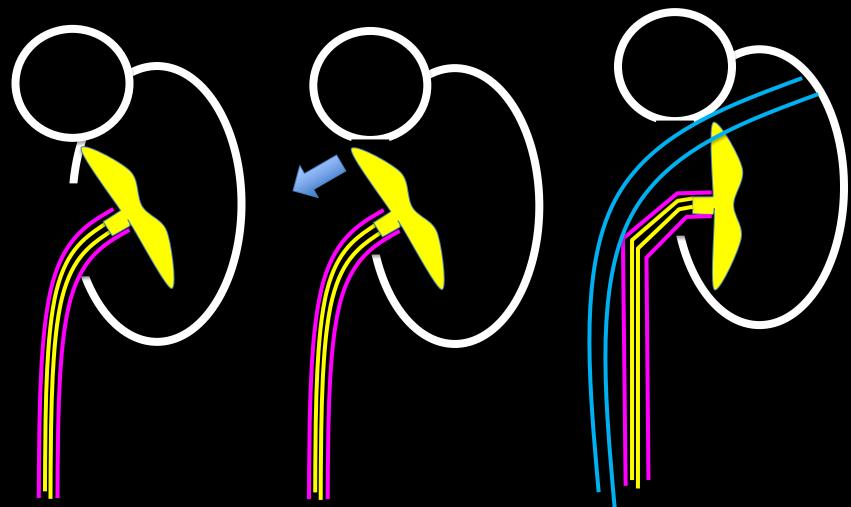


#### Aligning discs to interatrial septum



Prevention of LA disc in case with Ao rim deficiency

Lat



#### Placement Technique

Technique : LAD Engagement-Disengagement Masura techniuqe – Football RUPV

Direct w/ Sheath : Hausdorf Medikit Multi-purpose Mechanical prevention : Long-sheath assist Balloon assist

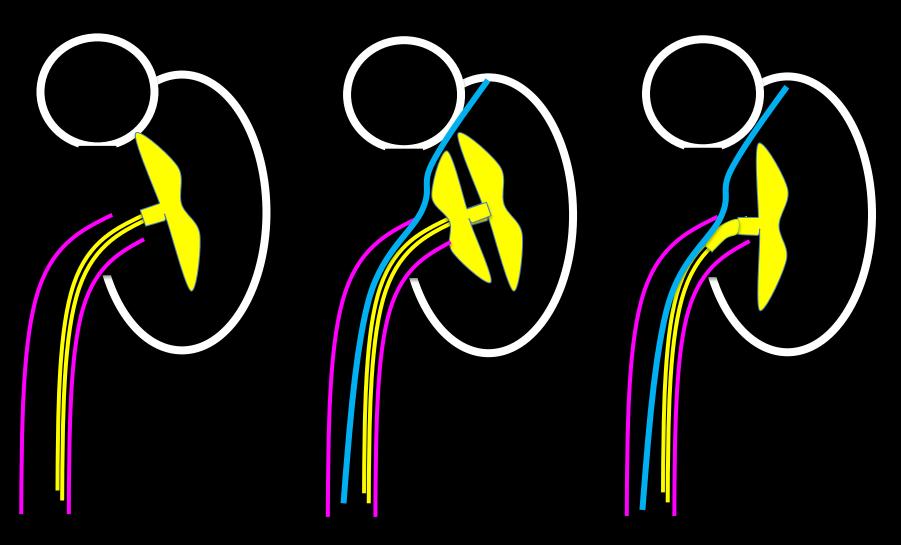
#### Subjects

Among 446 pts who underwent device closure of ASD 3 patients, 2005~

4.9 y.o.	19kg	defect	20mm
7.8 y.o.	22kg	defect	18mm
60 y.o.		defect	22mm

All patients had rim <3mm at > 60 degree

## Guidewire assist technique

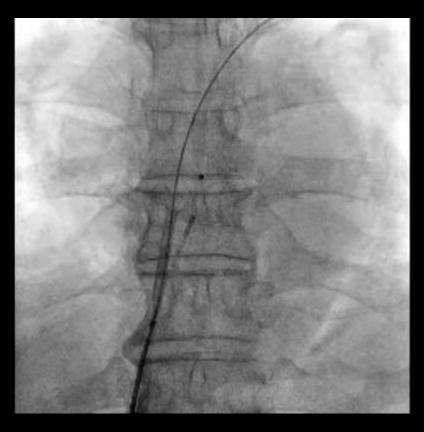


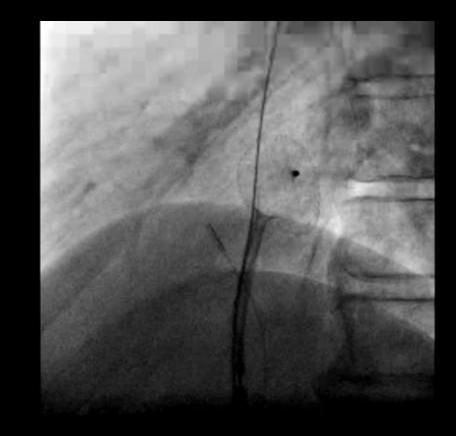
#### Technique

Sheath assist + Modification of Balloon assist

- Open both discs in LA
- Insert guidewire just next to delivery cable in a single long sheath
- Place a guidewire into LUPV and prevent LA disc from prolapse
- Once retrieve RA disc into long sheath, pull them back, and open RA disc

#### Guidewire assist technique Fluoroscopy

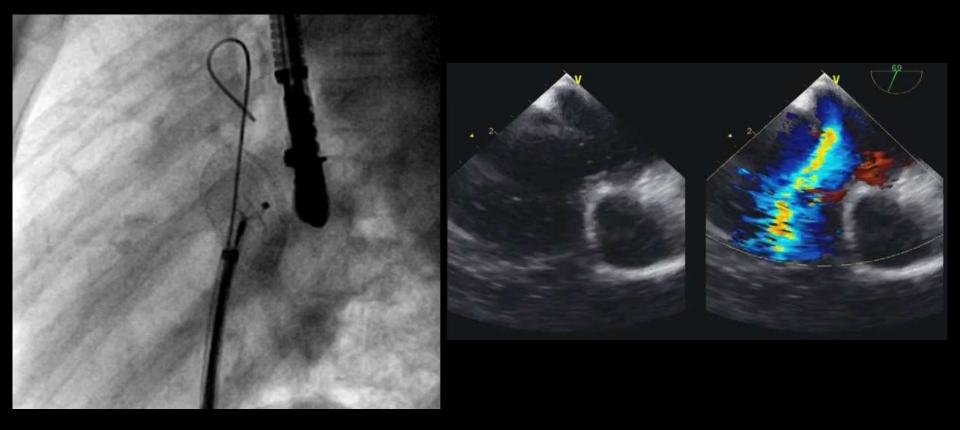




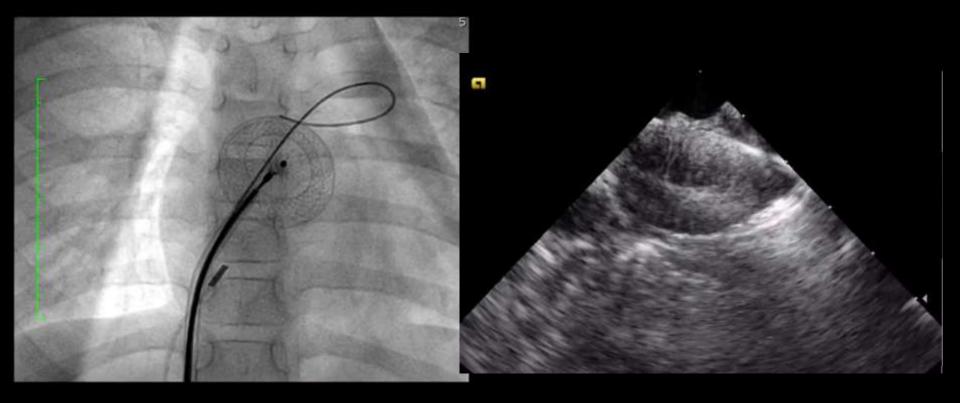
#### Guidewire assist technique ICE picture



#### Guidewire assist technique



### Guidewire assist technique



# Benefits& drawbacksBenefitsDrawbacks

Pre-existing equipments No need for new access Obtain time to confirm device position Risk of thrombus & Embolization Discs Long sheath

Unable in small LA disc Unable in OccluTec

#### Conclusions

- We report guidewire assist technique to prevent prolapse of LA disc in case with Ao rim deficiency
- This is easy and less expensive technique because it does not need new access or equipment and therefore worth to try once before try other methods.
- Obviously, further experience is required.