

FEops HEARTguide™

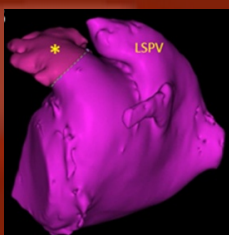
Case Report: LAAo

Operator: Dr. López Mínguez, Hospital Universitario de Badajoz, Badajoz, Spain

A 85-year-old patient with permanent atrial fibrillation with a DDD pacemaker was sent for LAAO due to recurrent gastrointestinal bleedings even on apixaban and with CHA₂DS₂VASc and HAS-BLED scores of 4 and 3 respectively.

Challenge

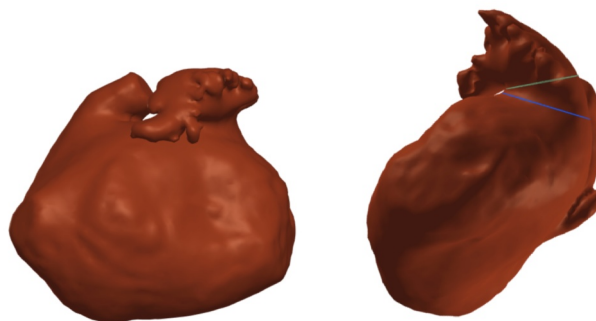
CT showed a reversed chicken wing LAA, with a very low and posterior appendage (the ostium that comes out of the LIPV, type III) and a very short landing zone in a constant curve from the beginning towards anterior and superior, which hardly leaves an area for the device anchorage.



Hospital Universitario de Badajoz

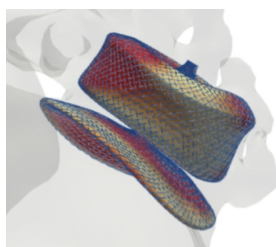
Solution

FEops HEARTguide™'s patient-specific computer simulations allowed to evaluate pre-operatively different Amulet (Abbott) device sizes and positions for this difficult reverse chicken wing LAA anatomy.

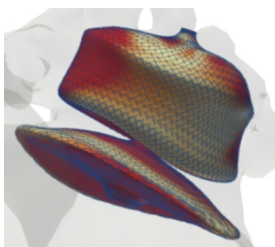


FEops HEARTguide™ simulations

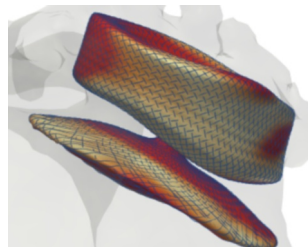
28 mm Amulet
Distal position



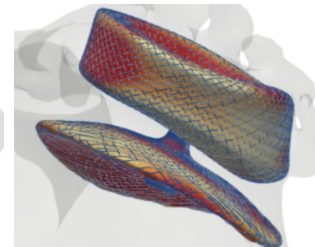
31 mm Amulet
Distal position



34 mm Amulet
Proximal position



Distal position



Simulated Mid-Lobe Mean Diameter

25.6 mm

27.6 mm

32.1 mm

31.8 mm

Physician evaluation

Risk of embolization

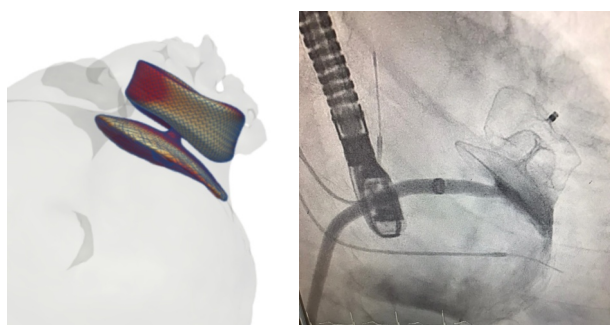
Apposition not good enough

Good option

No sandwich technique due to narrow wing

Result

After a first failed attempt to close this anatomy without using preoperative simulations, a 34 mm Amulet was successfully implanted proximally with the support of FEops HEARTguide™ simulations.



“In complex cases when there is no certainty of an optimal result, I would recommend to use FEops HEARTguide™ computer simulations before the implantation. Simulations allow to evaluate pre-operatively the working projection, the device size and its degree of compression depending on the depth of the landing zone and the selected size”

- Dr. López Mínguez