

TAVI monitorizado con SavvyWire

Dr. Ander Regueiro
Hospital Clínic de Barcelona

Caso Clínico

Mujer 80 años

- *DM2, HTA, FA, EPOC*
- *Obesidad (IMC 34)*
- *SVAo en 2014. Mosaic 19 mm. Gradiente al alta 22 mmHg.*

Caso Clínico

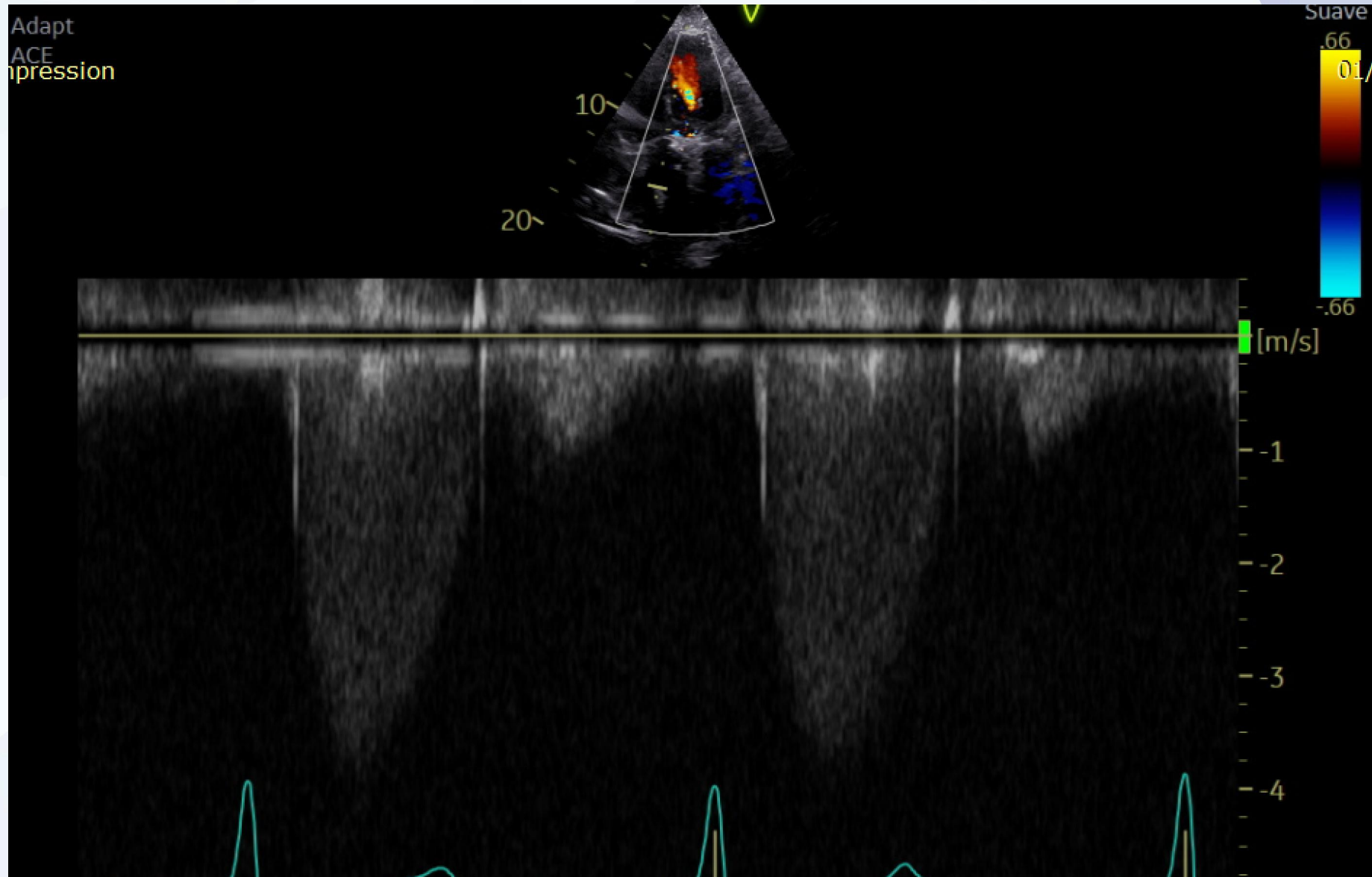
Mujer 80 años

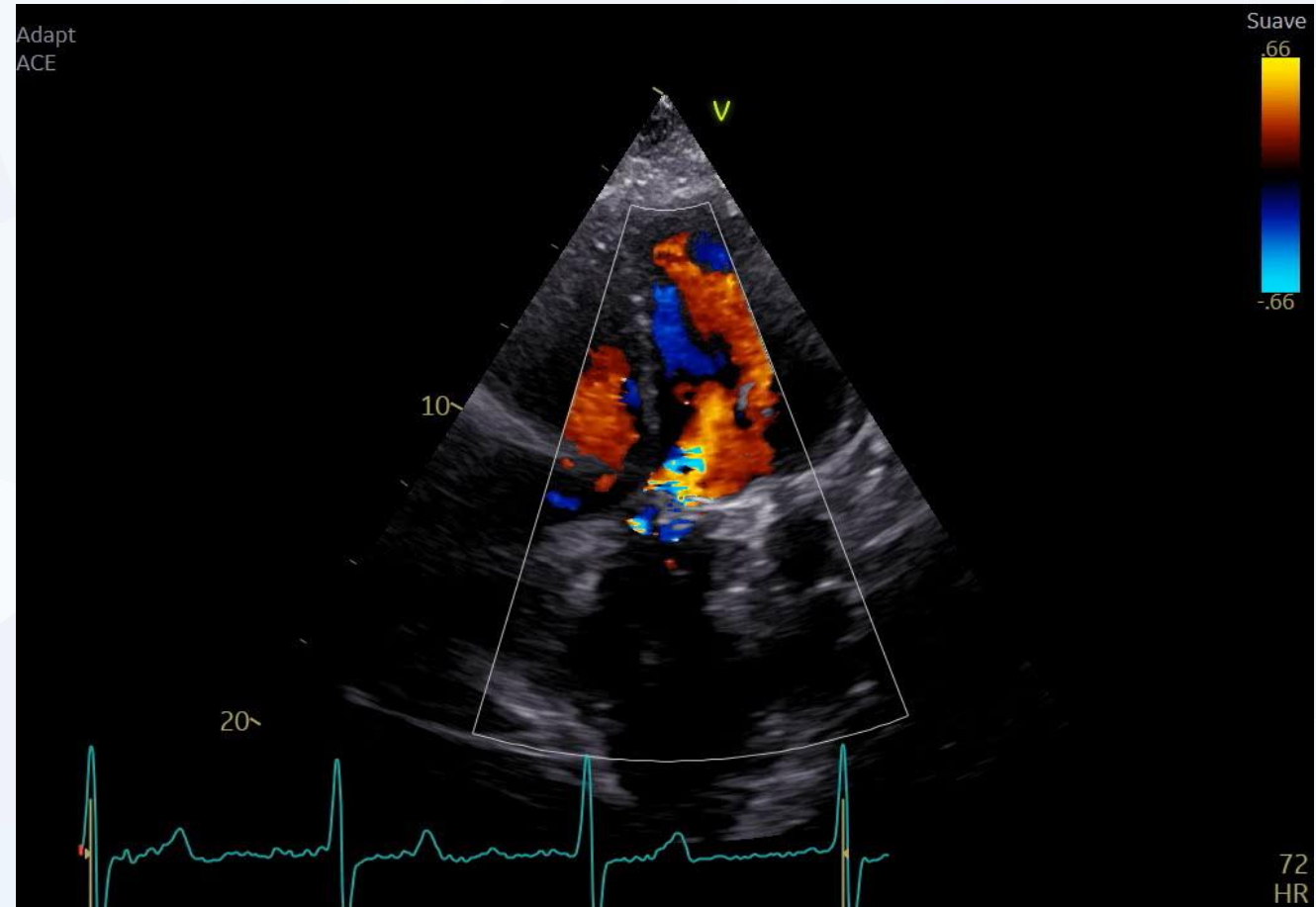
2022

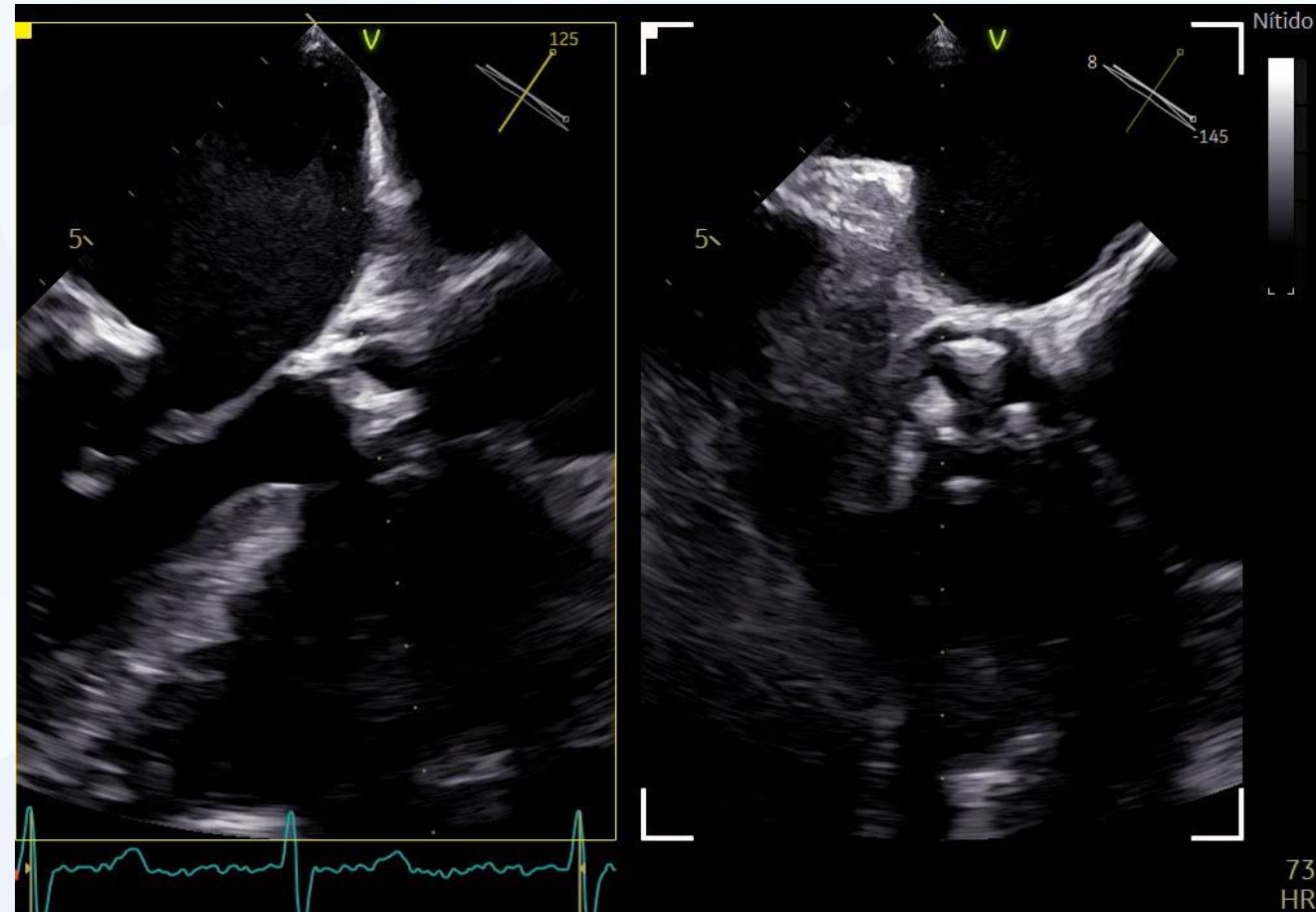
- Degeneración en forma de estenosis (Gmed 44 mmHg)
- Asintomática

2024

- Disnea progresiva hasta NYHA III







Caso Clínico

Degeneración bioprótesis (estenosis e insuficiencia)

Insuficiencia cardiaca

Alto riesgo quirúrgico (edad, REDO, EPOC, obesidad)

Caso Clínico

Valve in Valve

Annulus Base Diameter ES

Annulus Dimensions

Min. Ø: 14,6 mm

Max. Ø: 17,7 mm

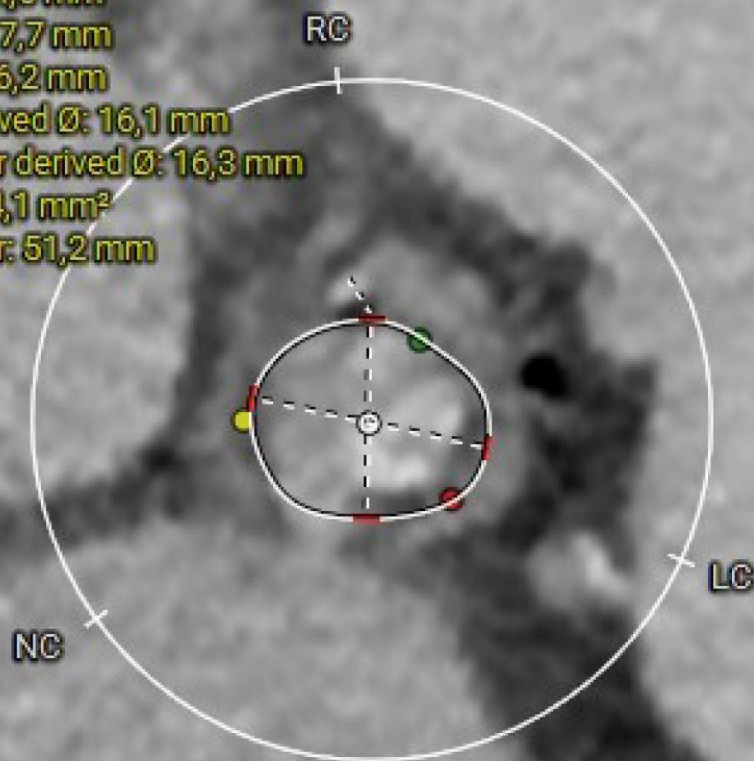
Avg. Ø: 16,2 mm

Area derived Ø: 16,1 mm

Perimeter derived Ø: 16,3 mm

Area: 204,1 mm²

Perimeter: 51,2 mm



Distance: 0,0 mm

LVOT at 3mm depth

LVOT Diameter

Min. Ø: 16,9 mm

Max. Ø: 18,1 mm

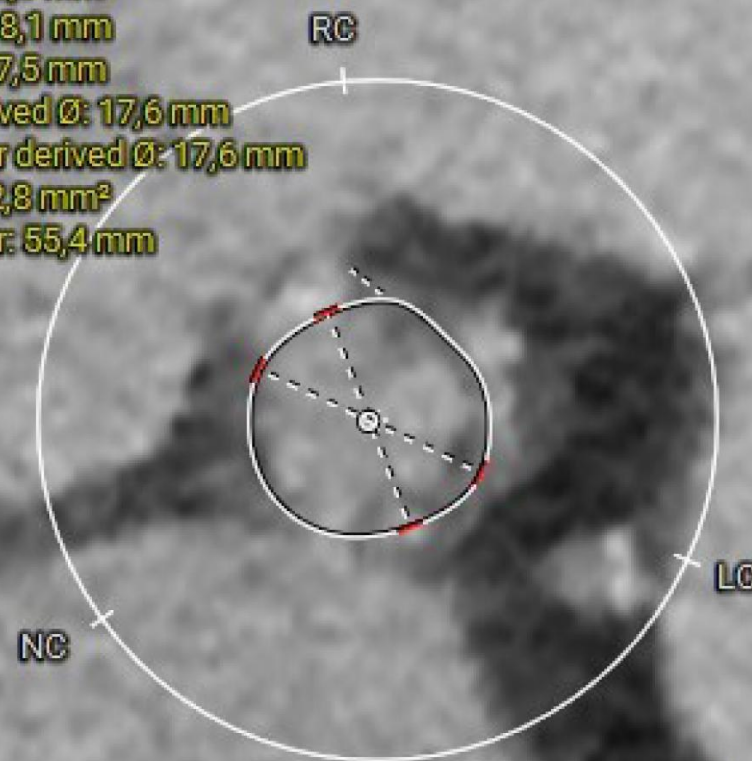
Avg. Ø: 17,5 mm

Area derived Ø: 17,6 mm

Perimeter derived Ø: 17,6 mm

Area: 242,8 mm²

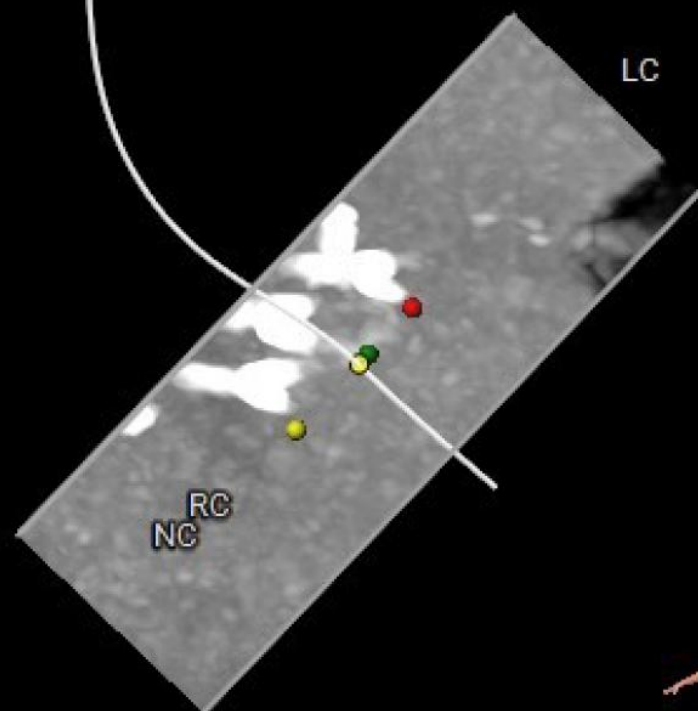
Perimeter: 55,4 mm



Distance: 3,0 mm

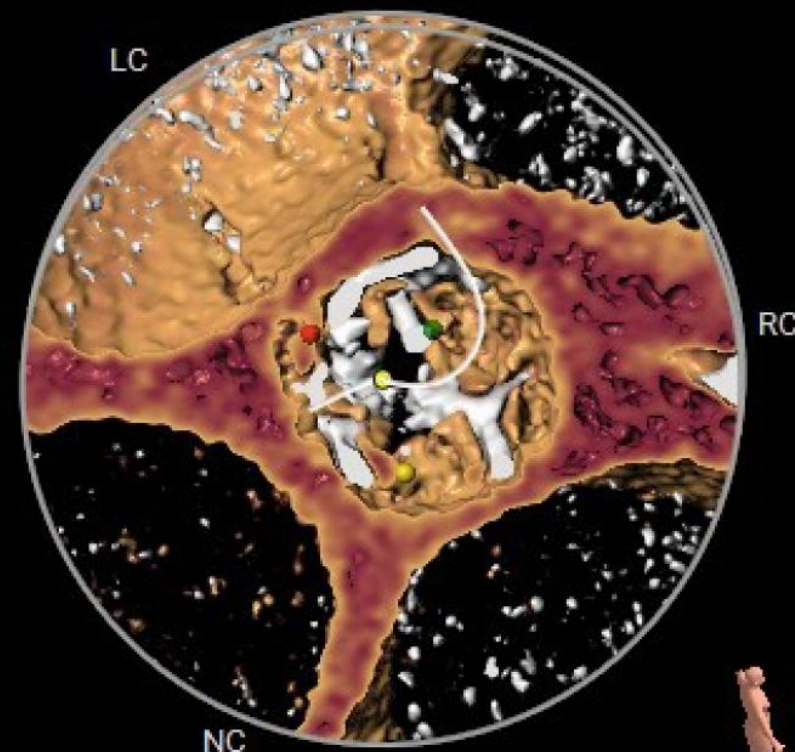
Hockey Puck (MIP)

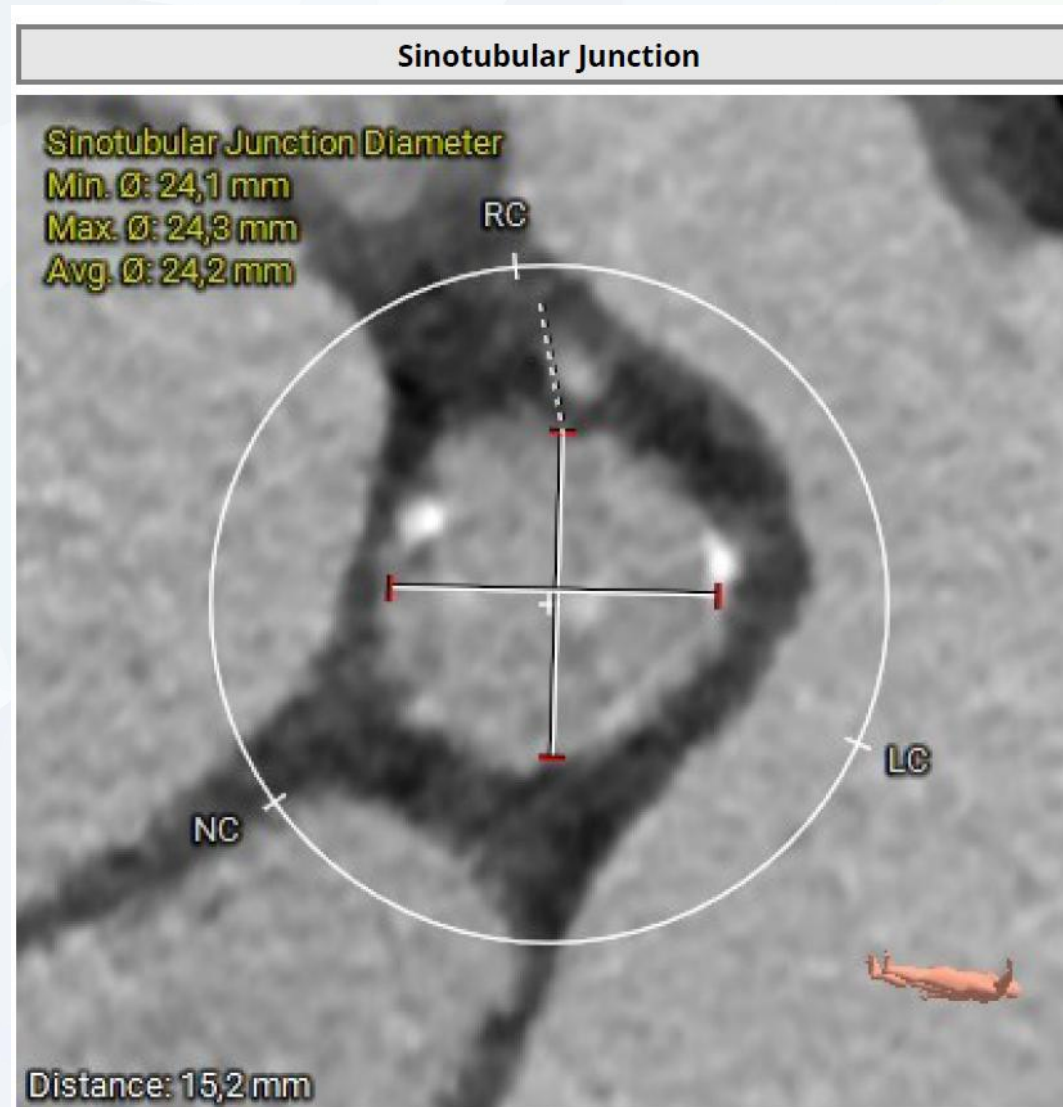
LAO: 4°
Cranial: 21°



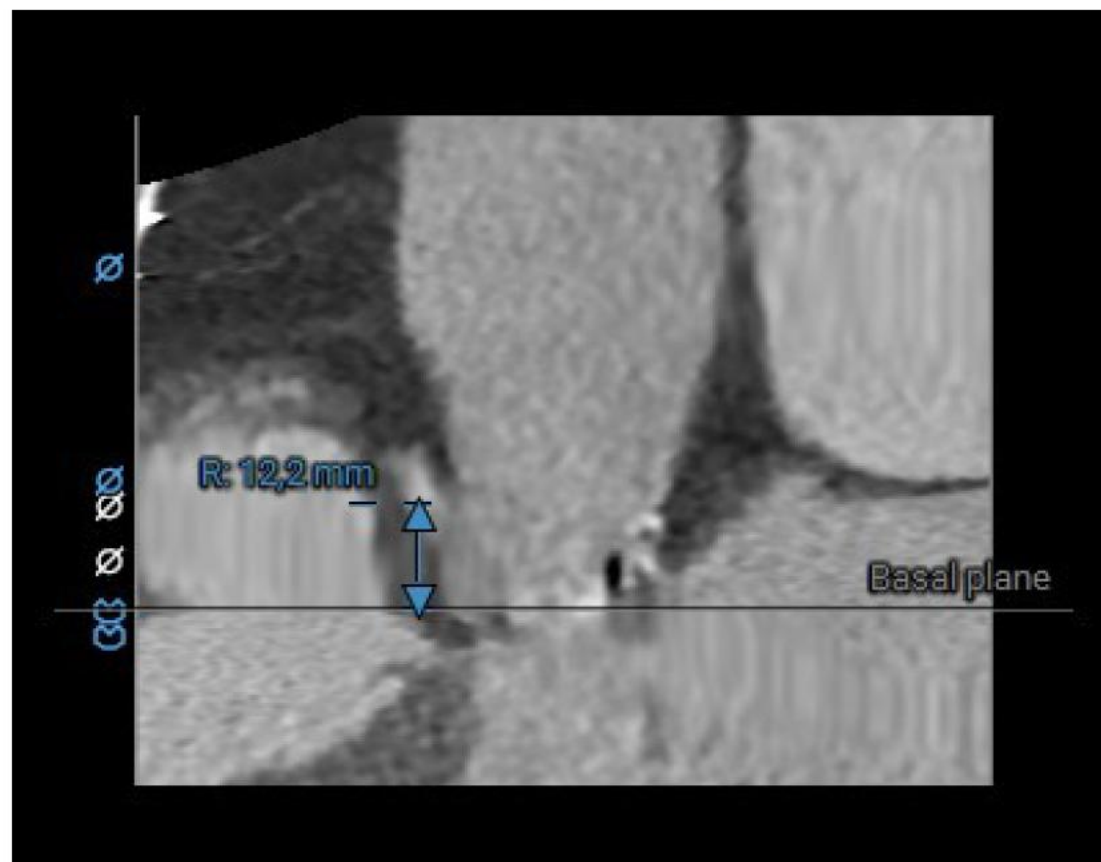
Hockey Puck (VR)

RAO: 101°
Cranial: 40°

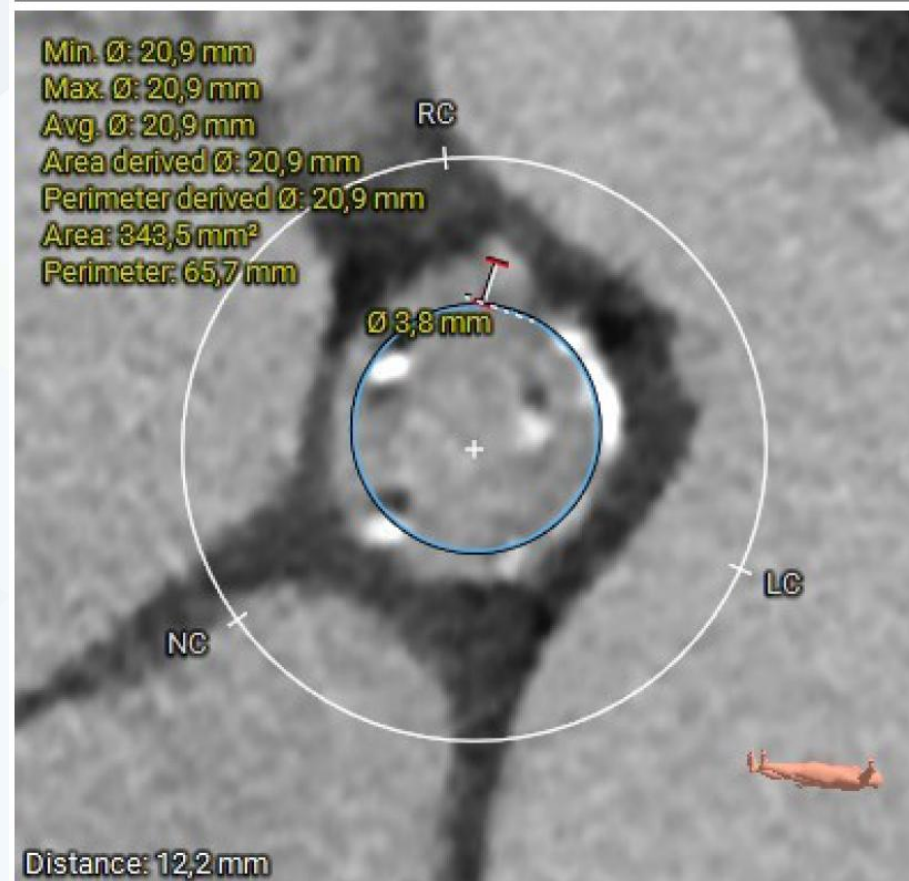




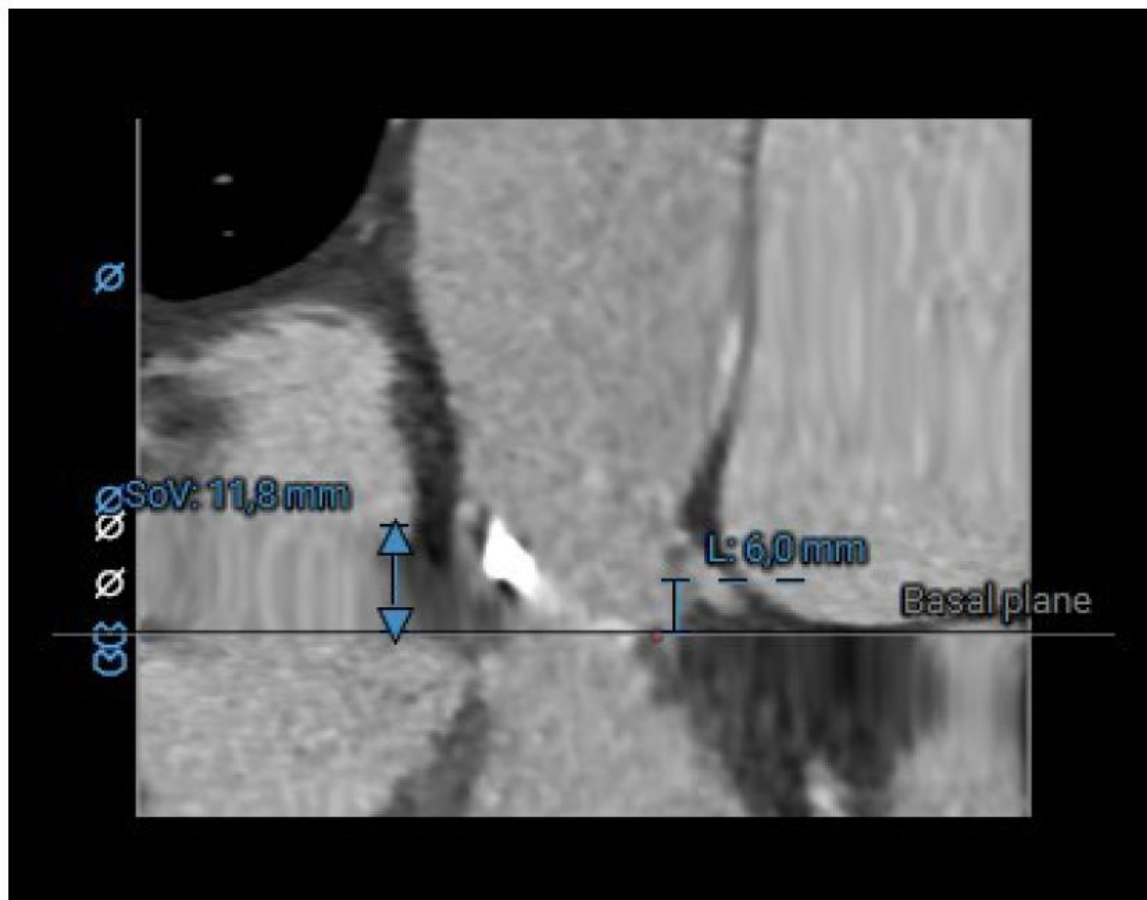
Annulus base to RCA



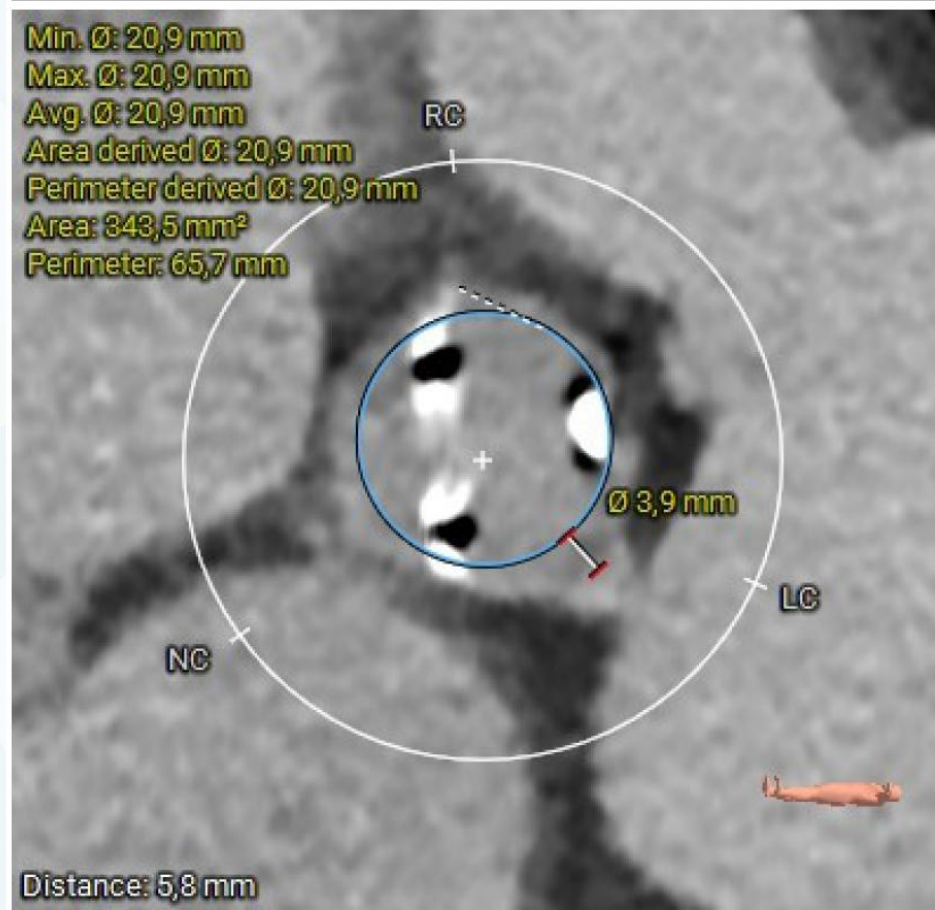
VTC ro RC

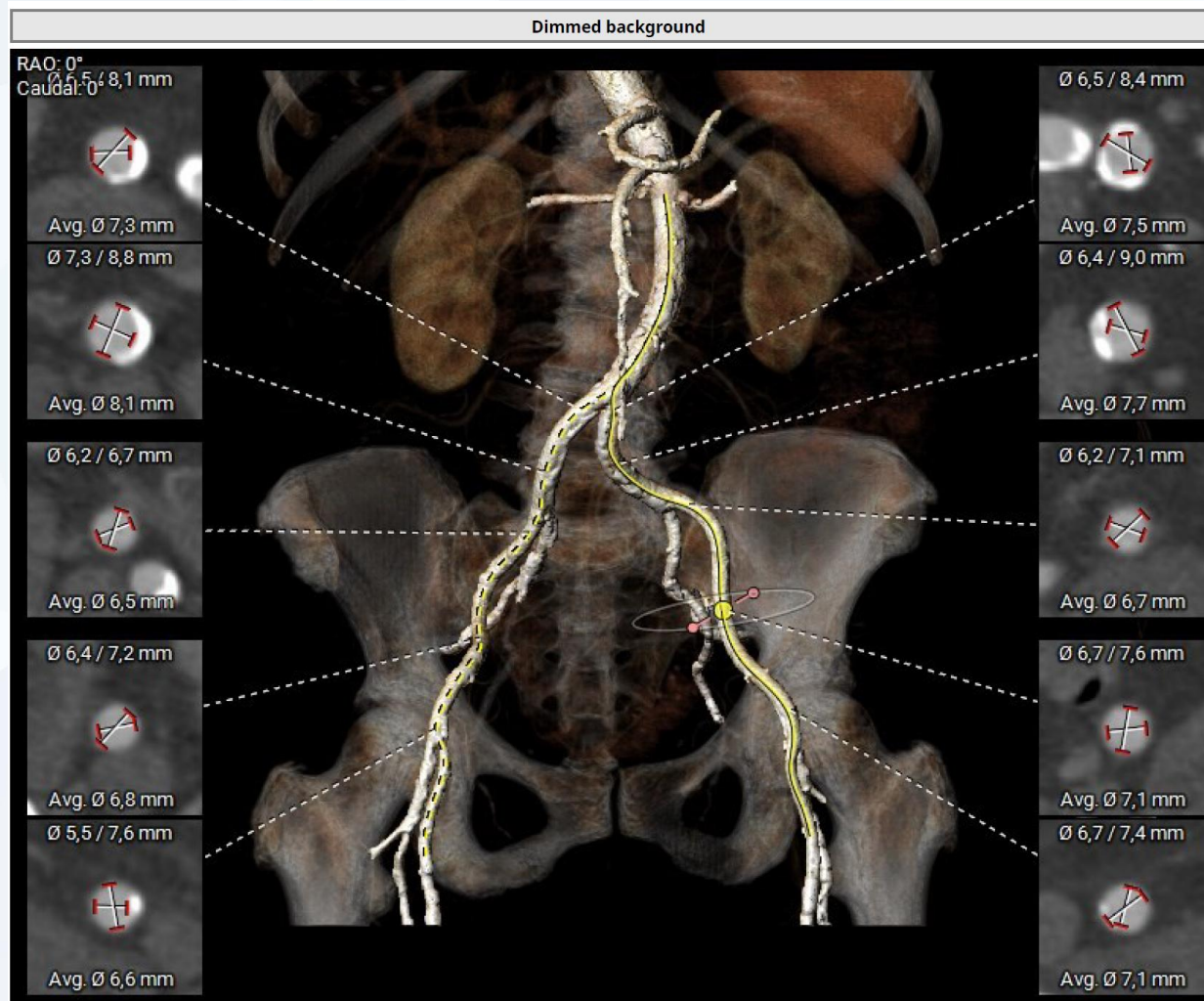


Annulus base to LM and STJ



VTC to LC





Caso Clínico

*Obstrucción coronaria
Mismatch*

Soporte (obesidad y prótesis aórtica 19 mm)

Caso Clínico

*Obstrucción coronaria → Modificación de velo
Mismatch → Fractura de la prótesis
Soporte (obesidad y SVAo 19 mm) → Guía alto
soporte*

Circulation: Cardiovascular Interventions

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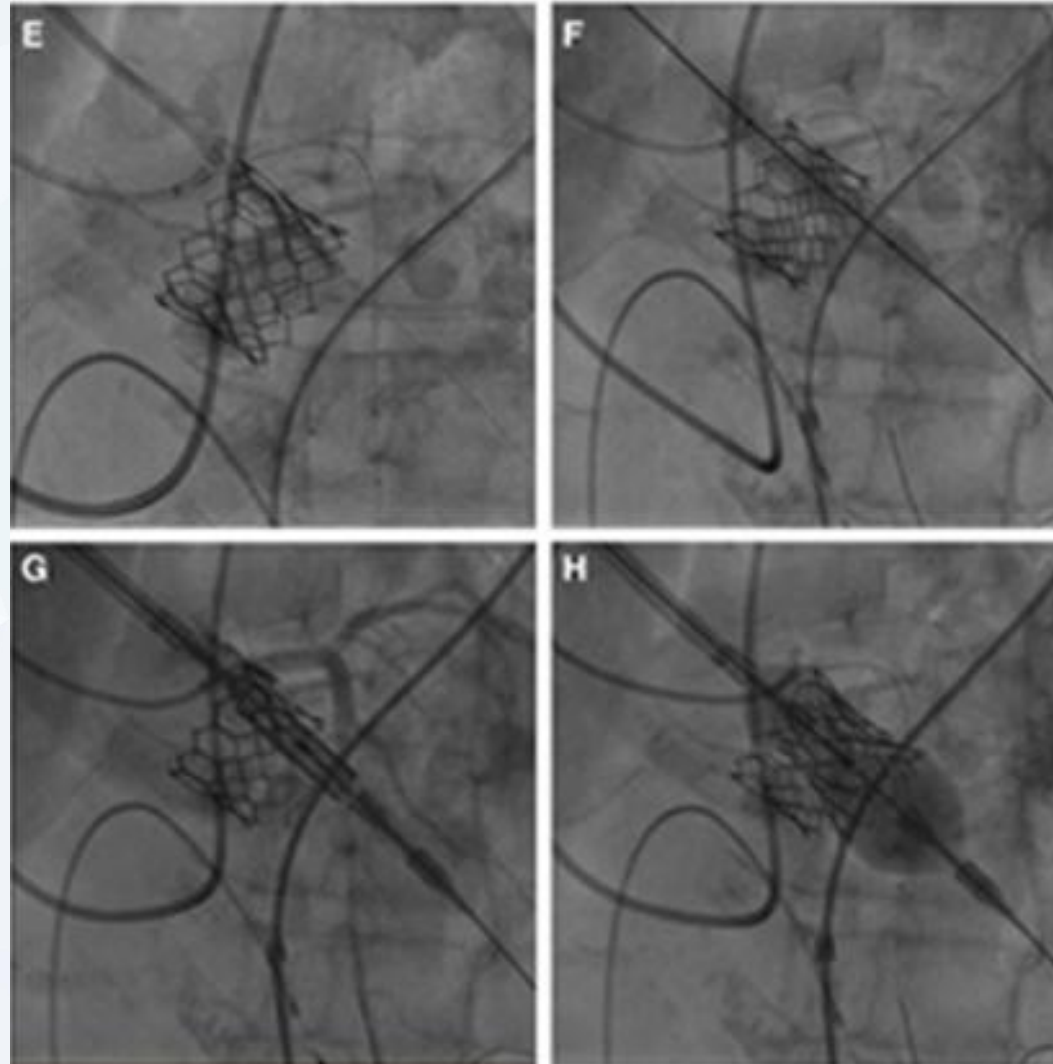
CASE REPORT

| Originally Published 21 October 2022 | 

 Check for updates

First-in-Human Undermining Iatrogenic Coronary Obstruction With Radiofrequency Needle (UNICORN) Procedure During Valve-in-Valve Transcatheter Aortic Valve Replacement

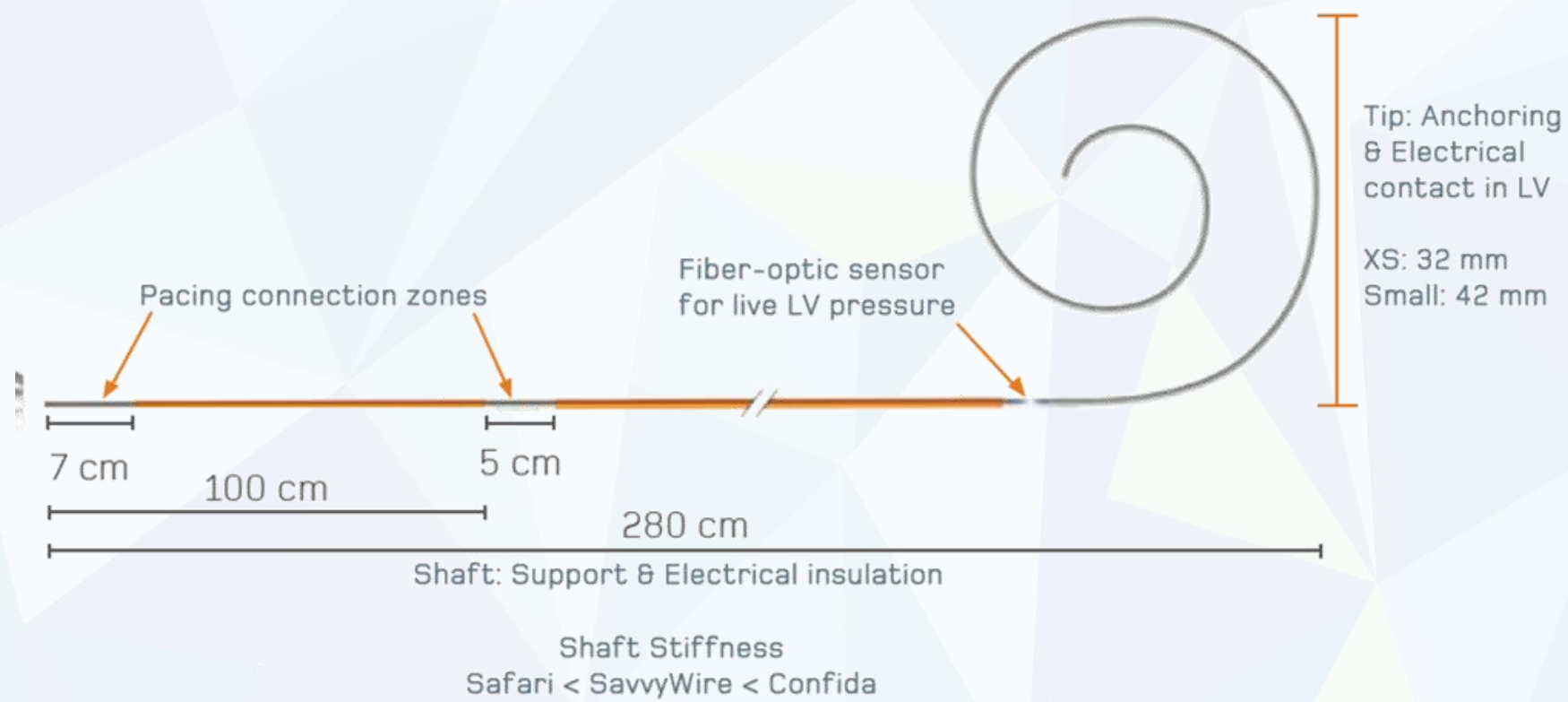
Kwong-Yue Eric Chan, MBBS , Daniel Tai-Leung Chan, MBBS, Cheung-Chi Simon Lam, MBBS, Michael Shu-Yue Sze, MBBS, Ka-Chun Un, MBBS, Chor-Cheung Frankie Tam, MBBS , Yui-Ming Lam, MBBS, and Chun-Ka Wong, MBBS   | [AUTHOR INFO & AFFILIATIONS](#)



CRACK-UNICORN con Savvywire



SAVVYWIRE



SAVVYWIRE

opSens Settings 17:08:12 2022-03-18

Pressure scale < 0, 200 > DU audio level - 0 +

Time scale < 3 > OU audio level - 0 +

Pa ☒ FFR/TAVI ☐ Brightness - 7 +

Pd ☒ Hide Pat. Info ☐ Pressure wire delay (ms)

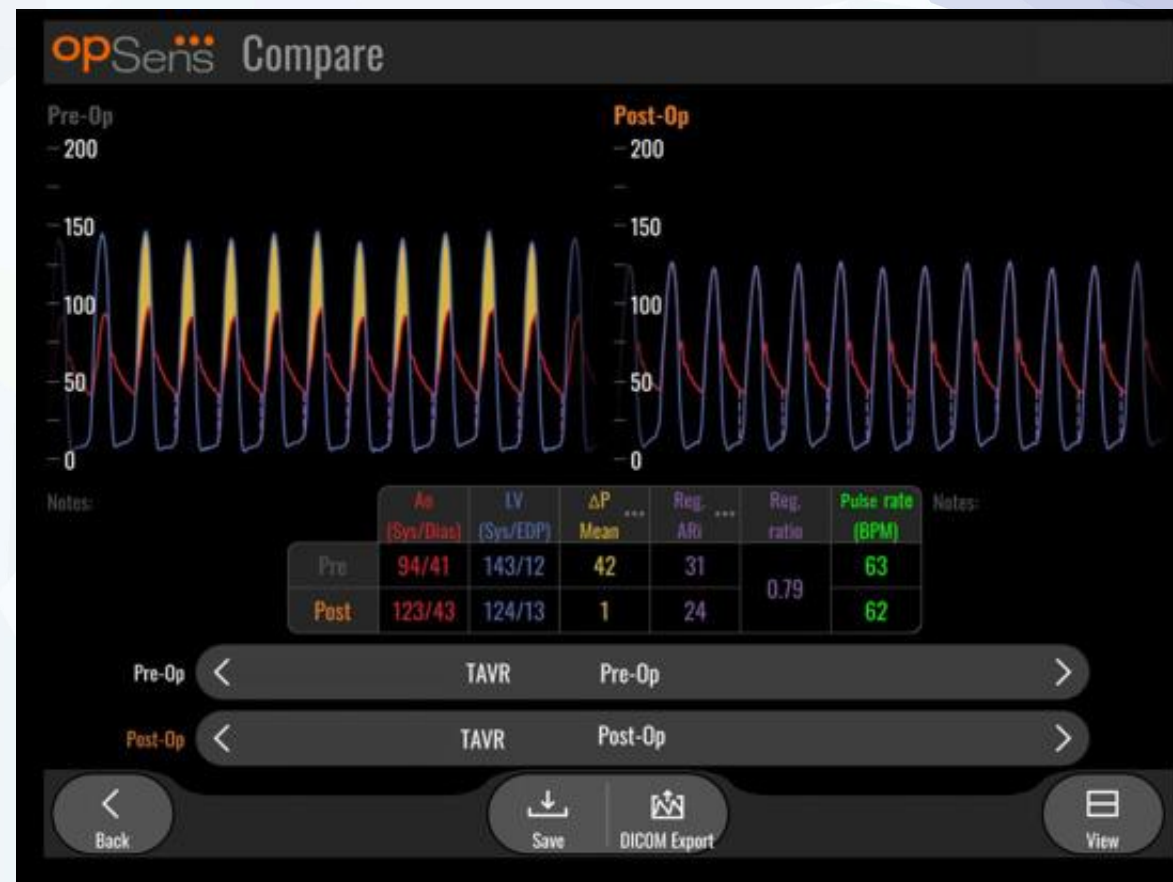
Pd/Pa ☒ Prospect. Eq. ☐

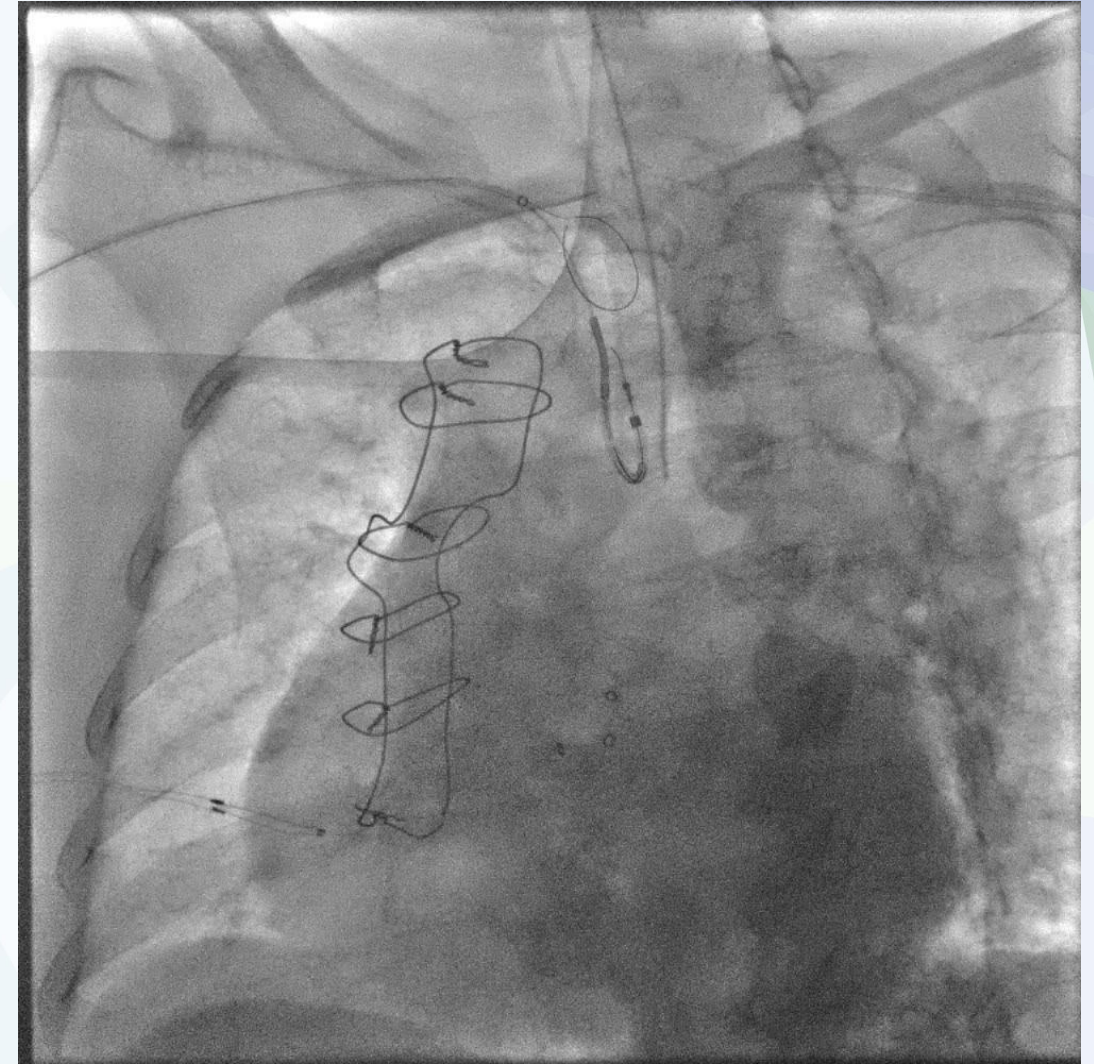
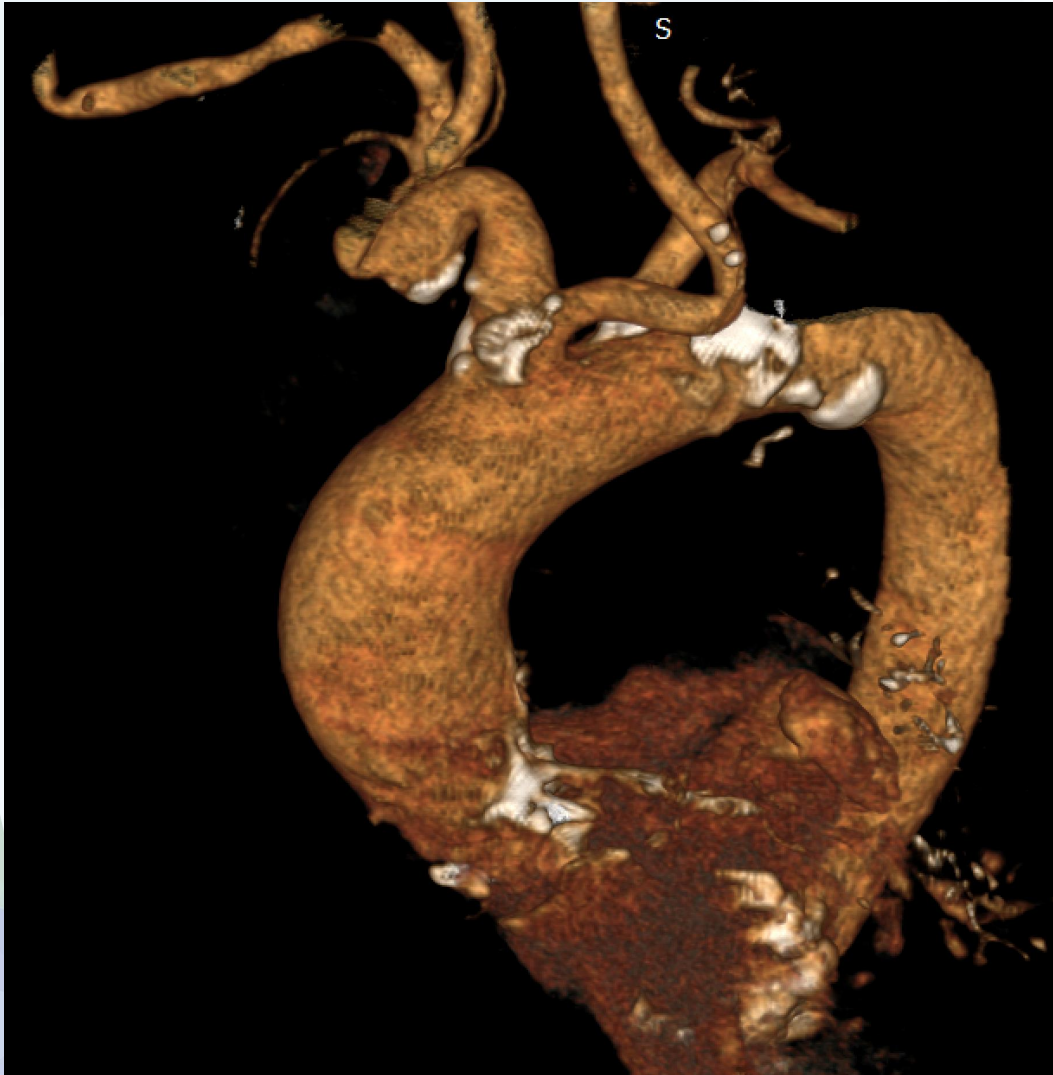
Enable dPR ☐

HR/ECG ☒ Show ECG ☒

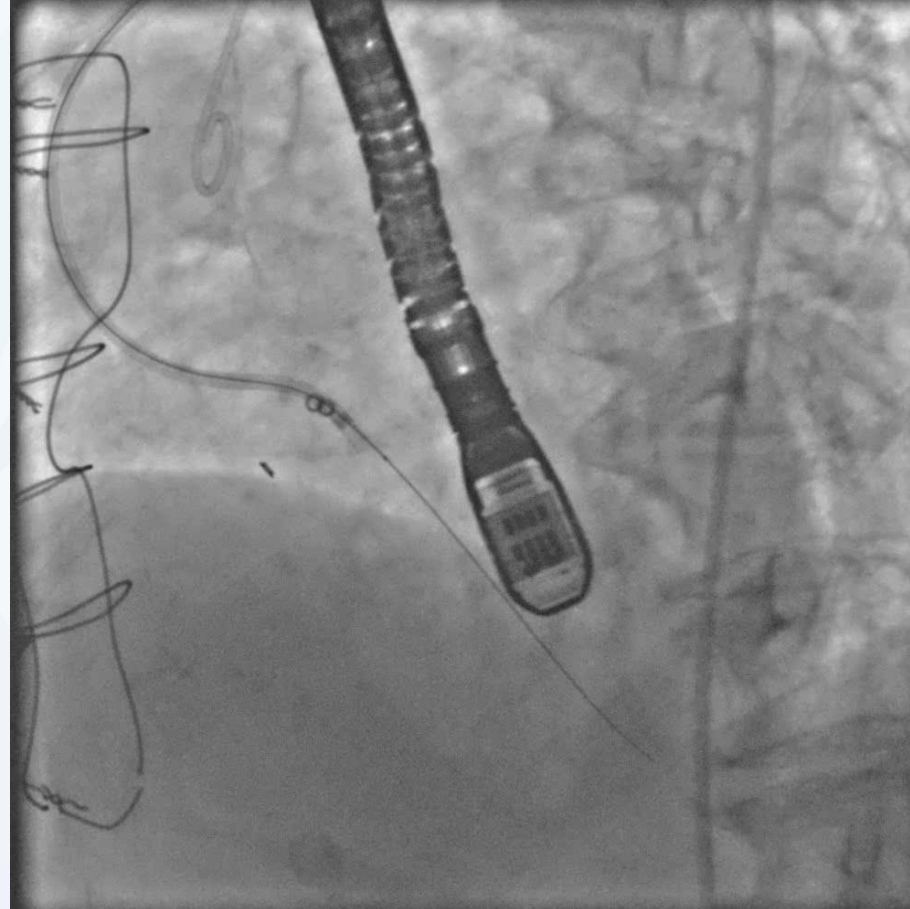
Averaging Period < 3 > < 0 >

Back Maintenance OW Zero Demo





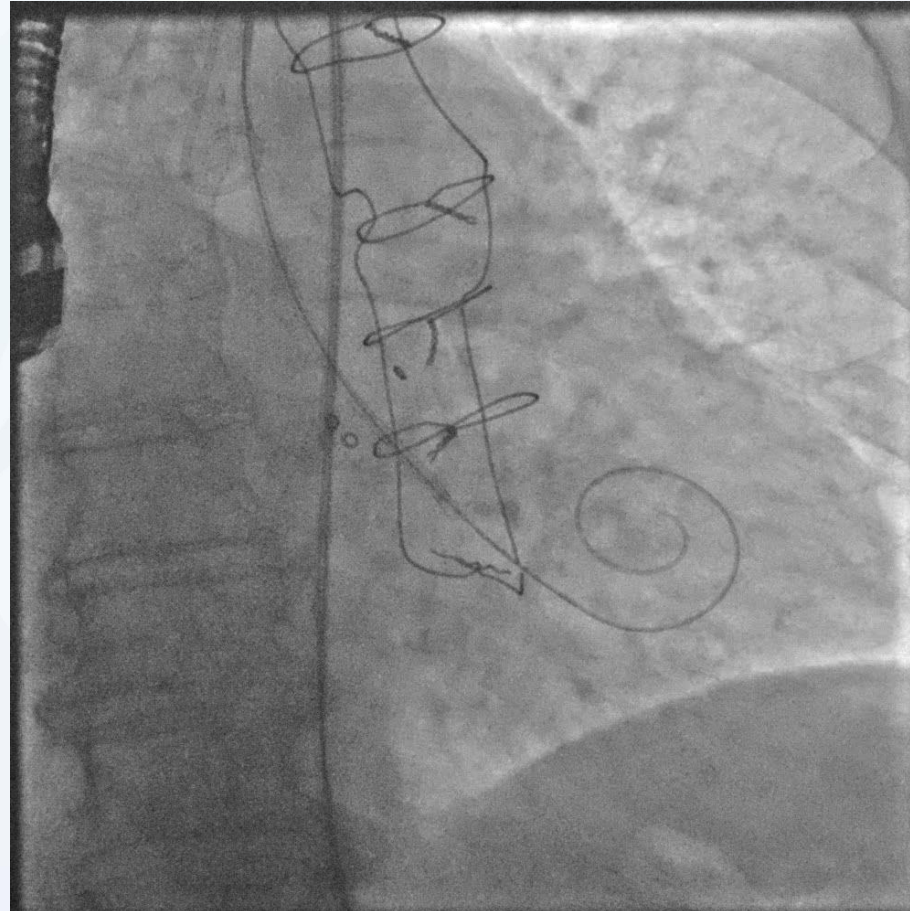








RE



MADR

opSens

Name

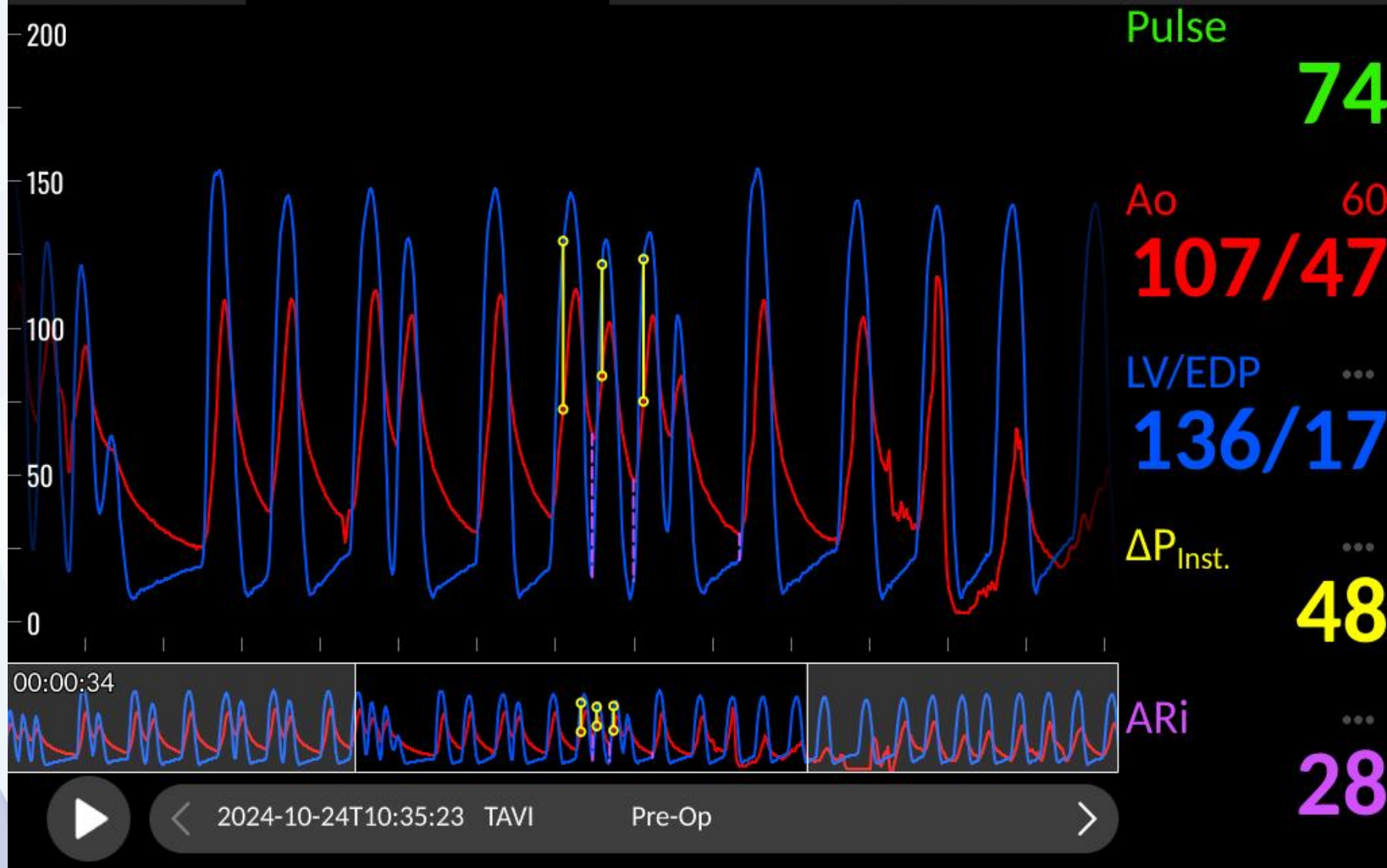
Patient ID



3B

10:45:36

2024-10-24





HR

76

Ao

76

91/61

LV/EDP

108/18

ΔP_{Mean}

33

ARi

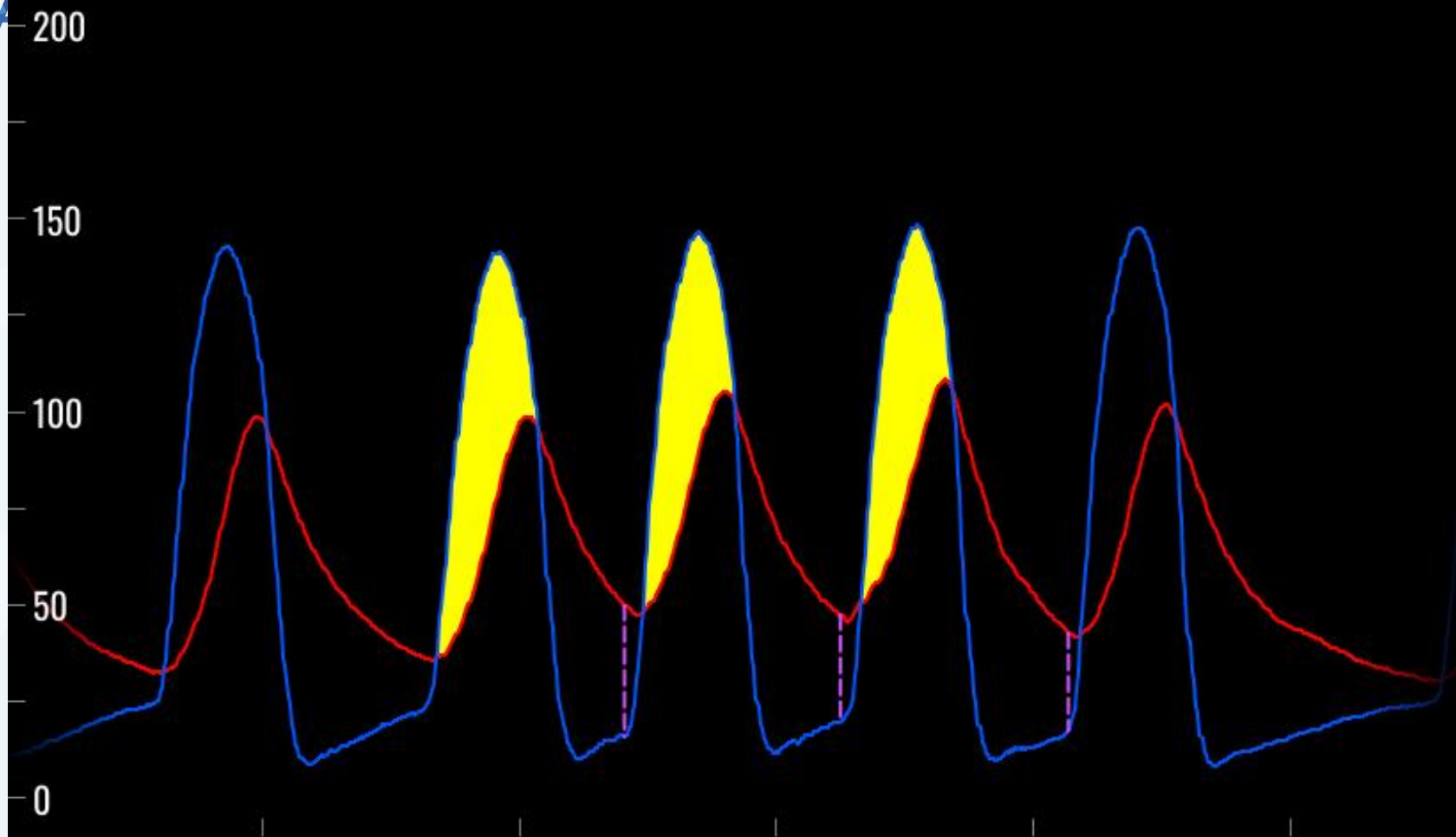
27



3B

10:43:49
2024-10-24

NOVIEMBRE
PLAZA DE ESPAÑA



Pulse

65

Ao

67

104/45

LV/EDP

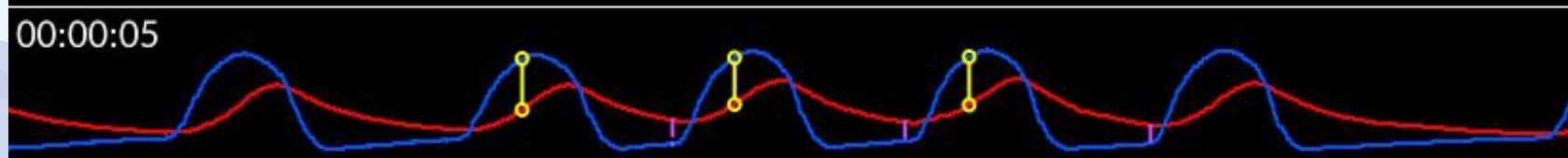
...

145/18

ΔP_{Mean}

...

45



ARi

...

27

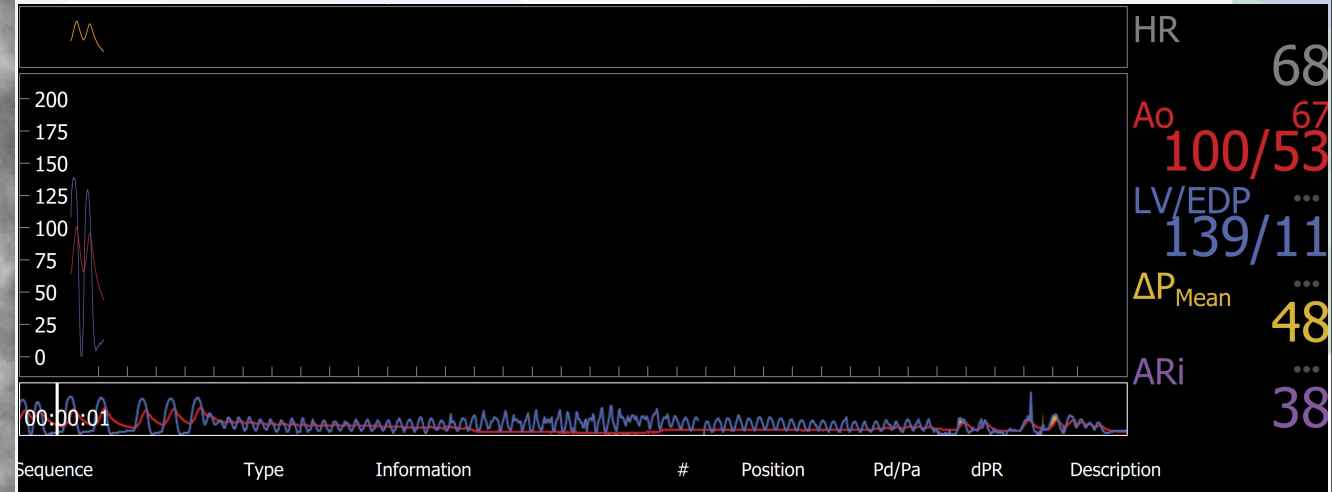
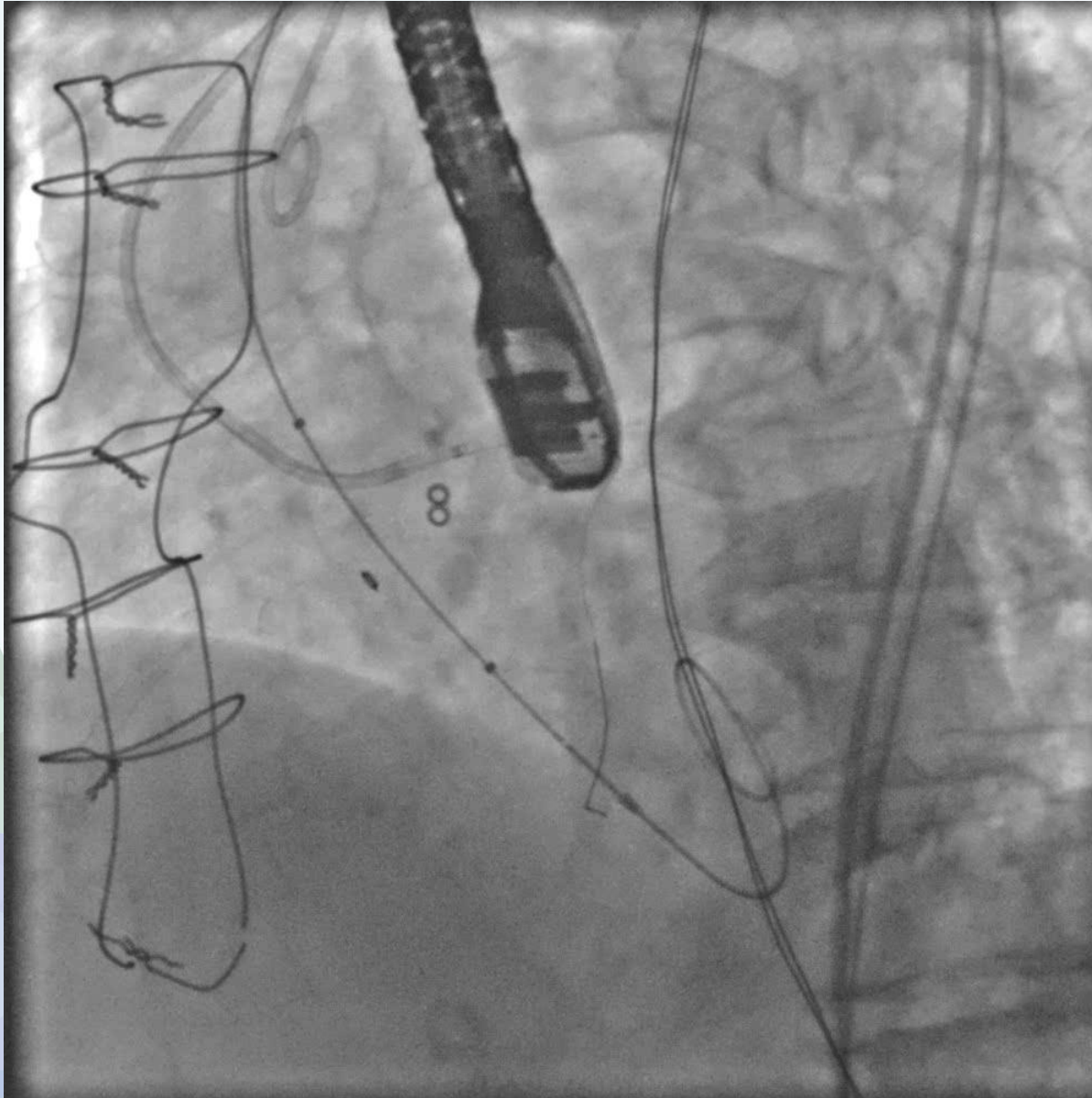


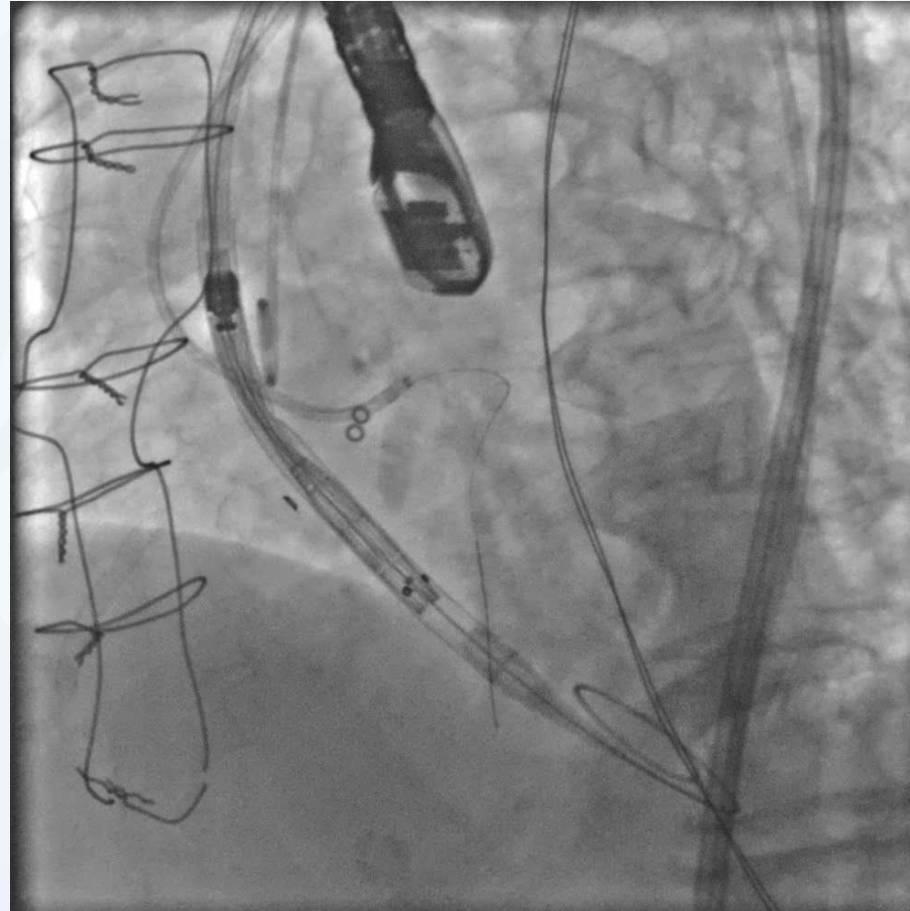
2024-10-24T10:41:44 TAVI

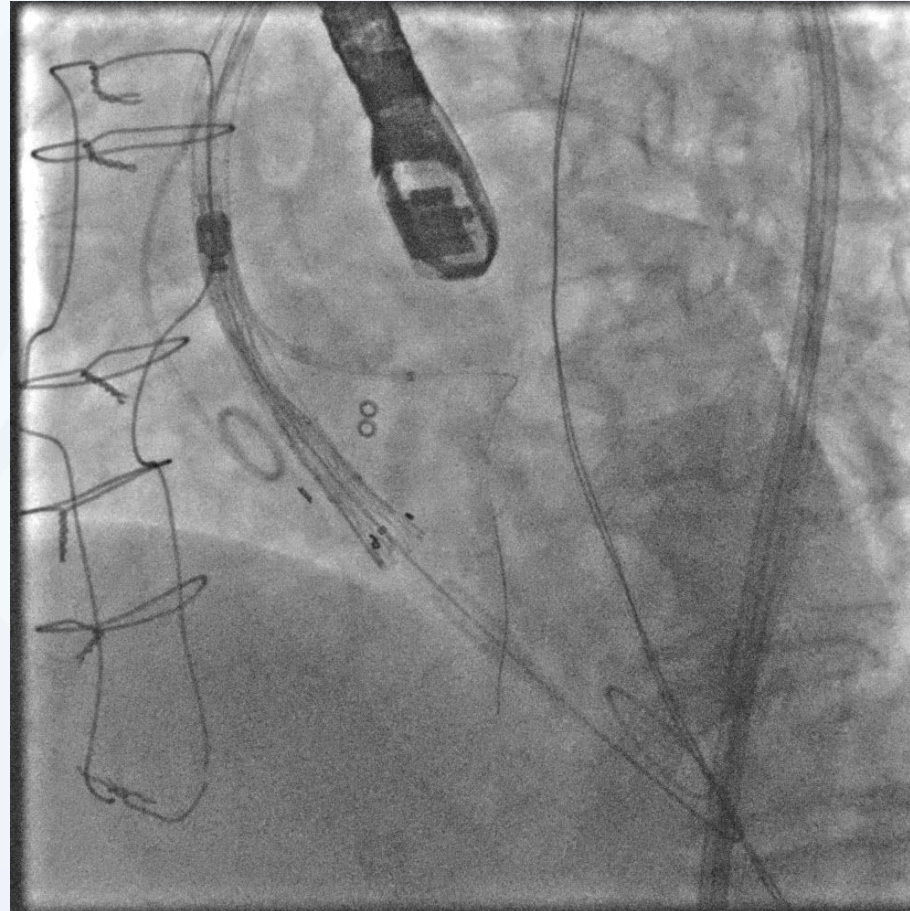
Pre-Op

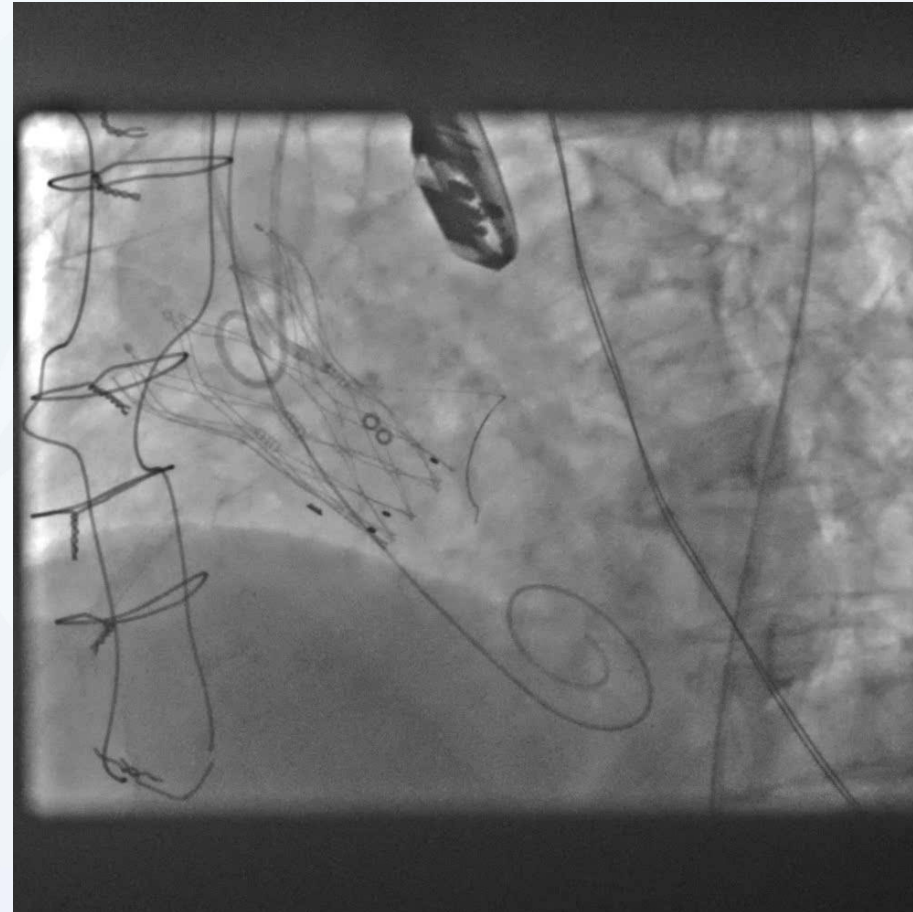




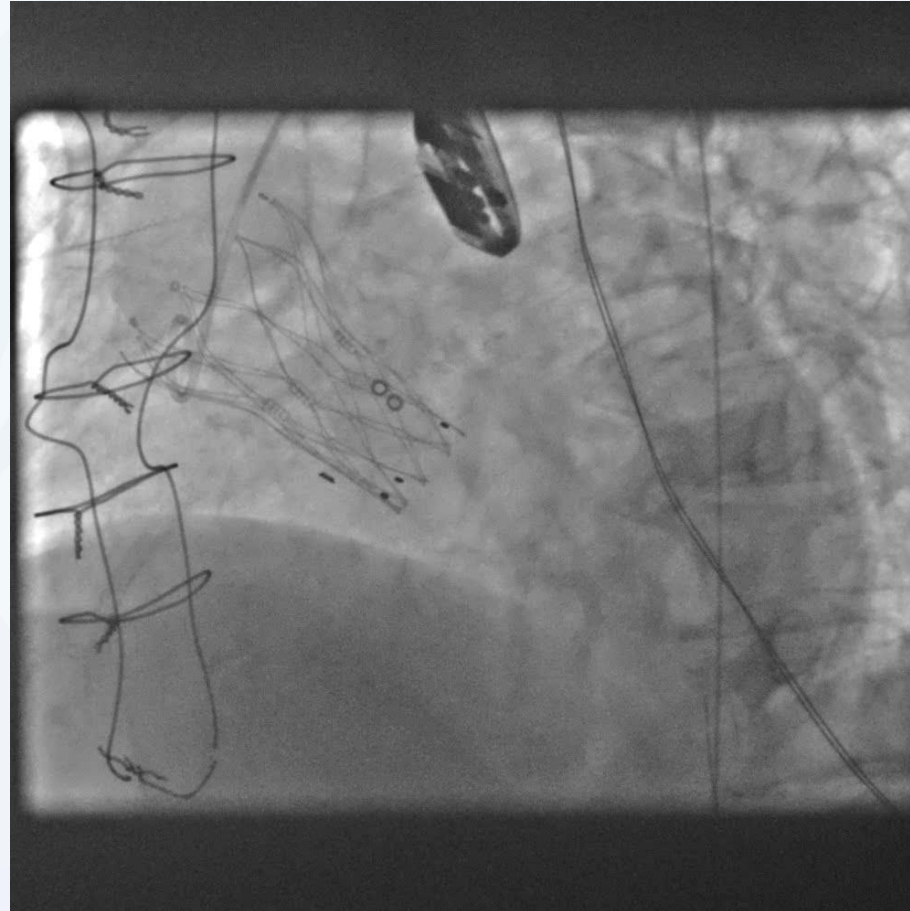


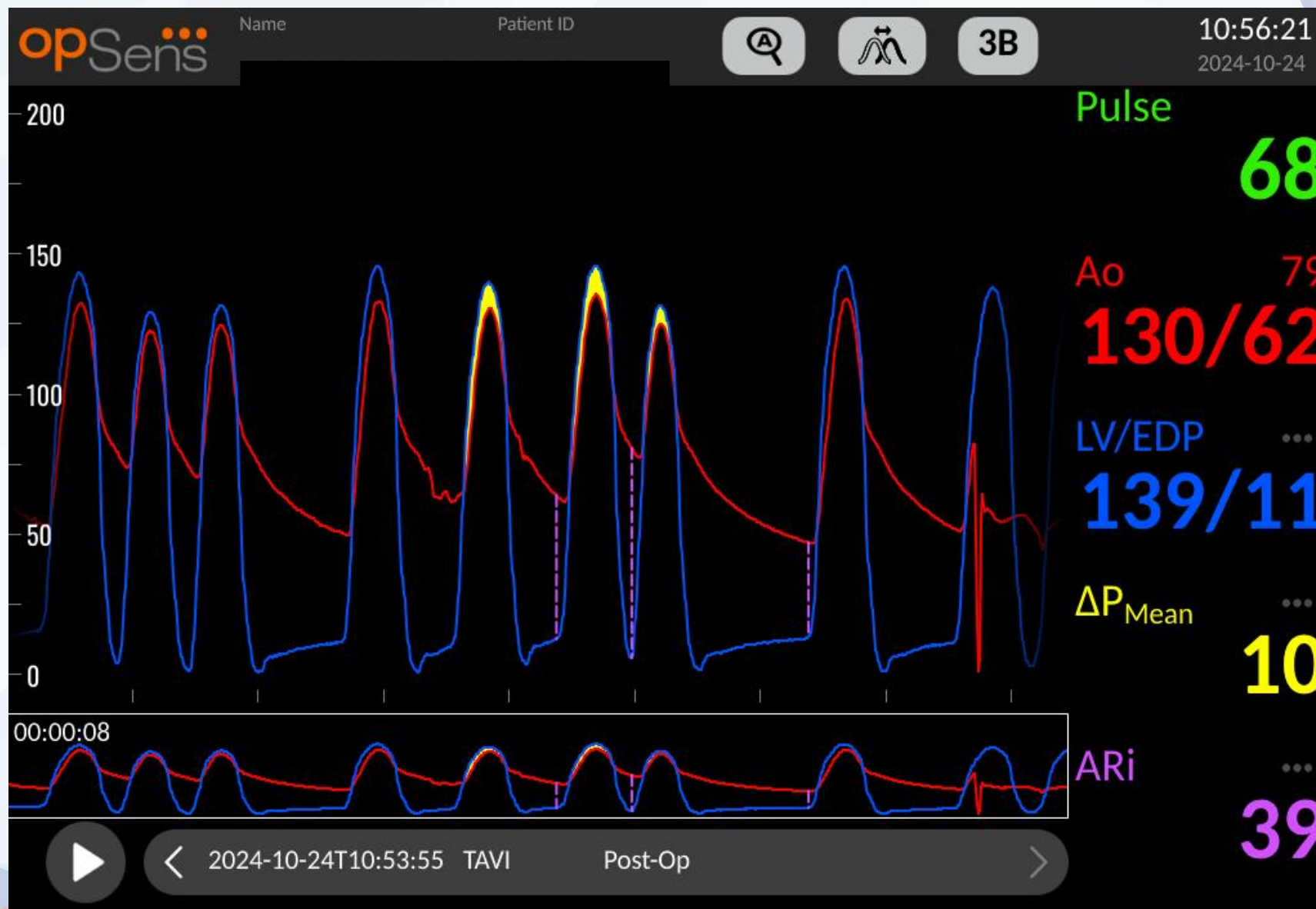


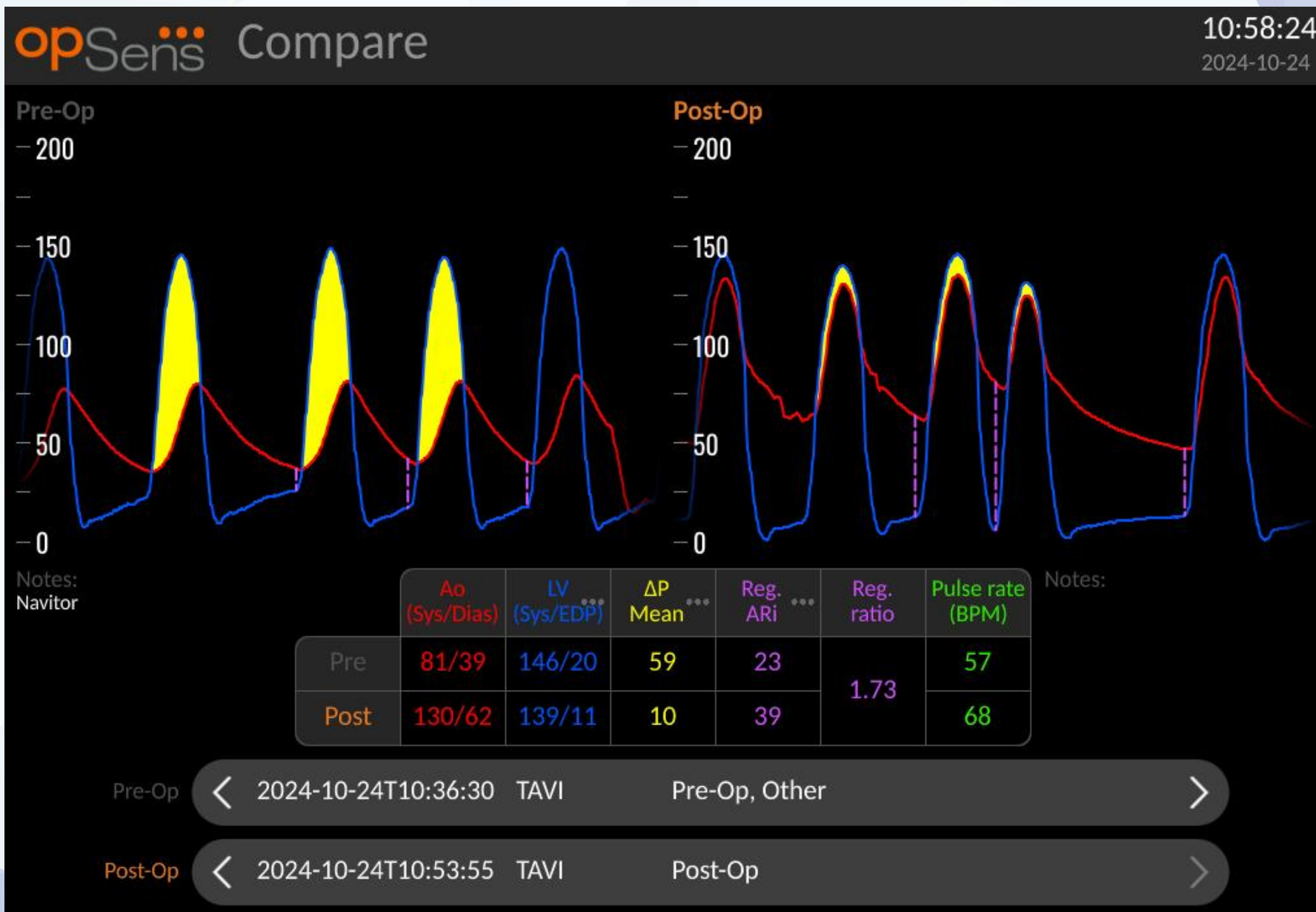


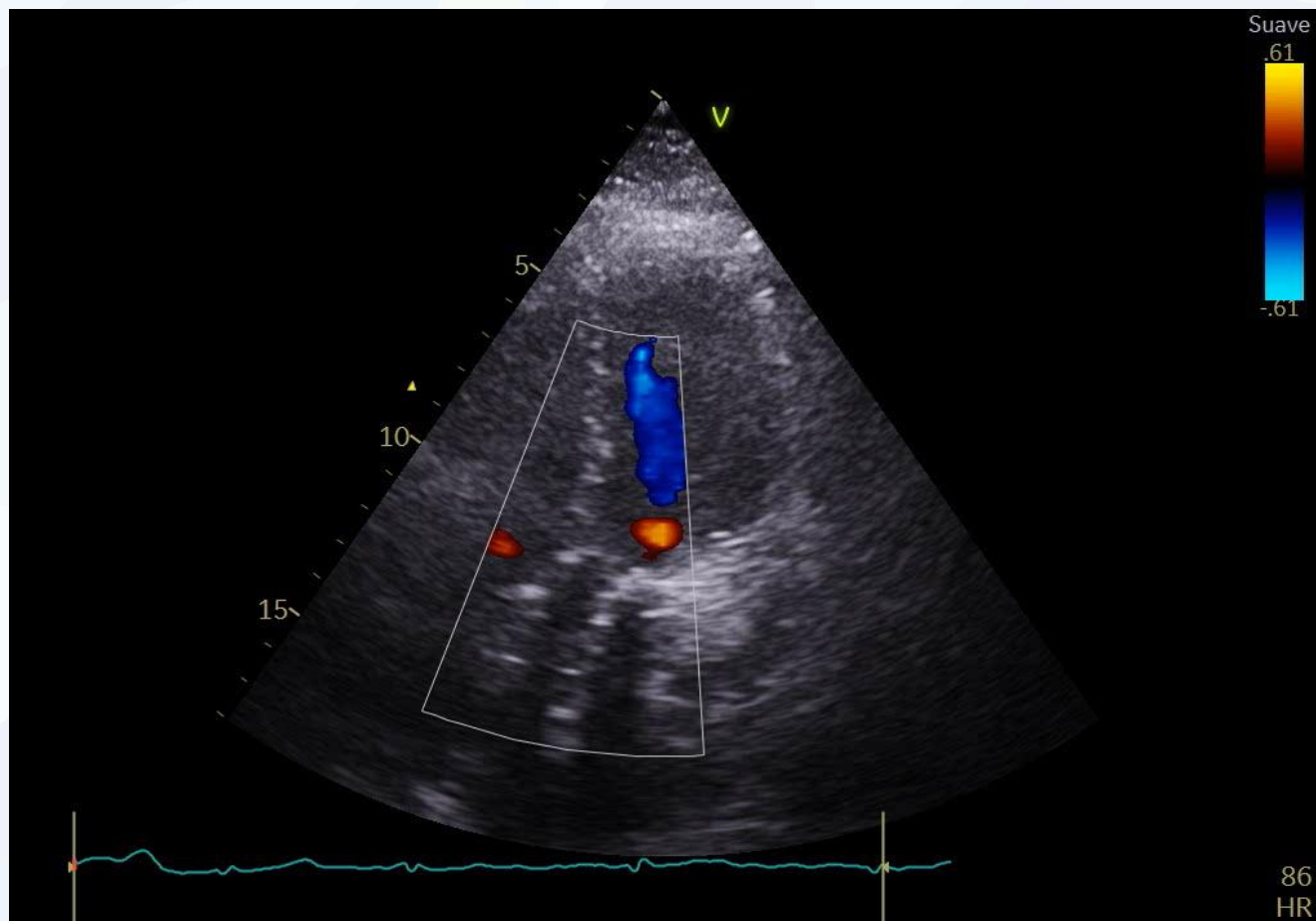


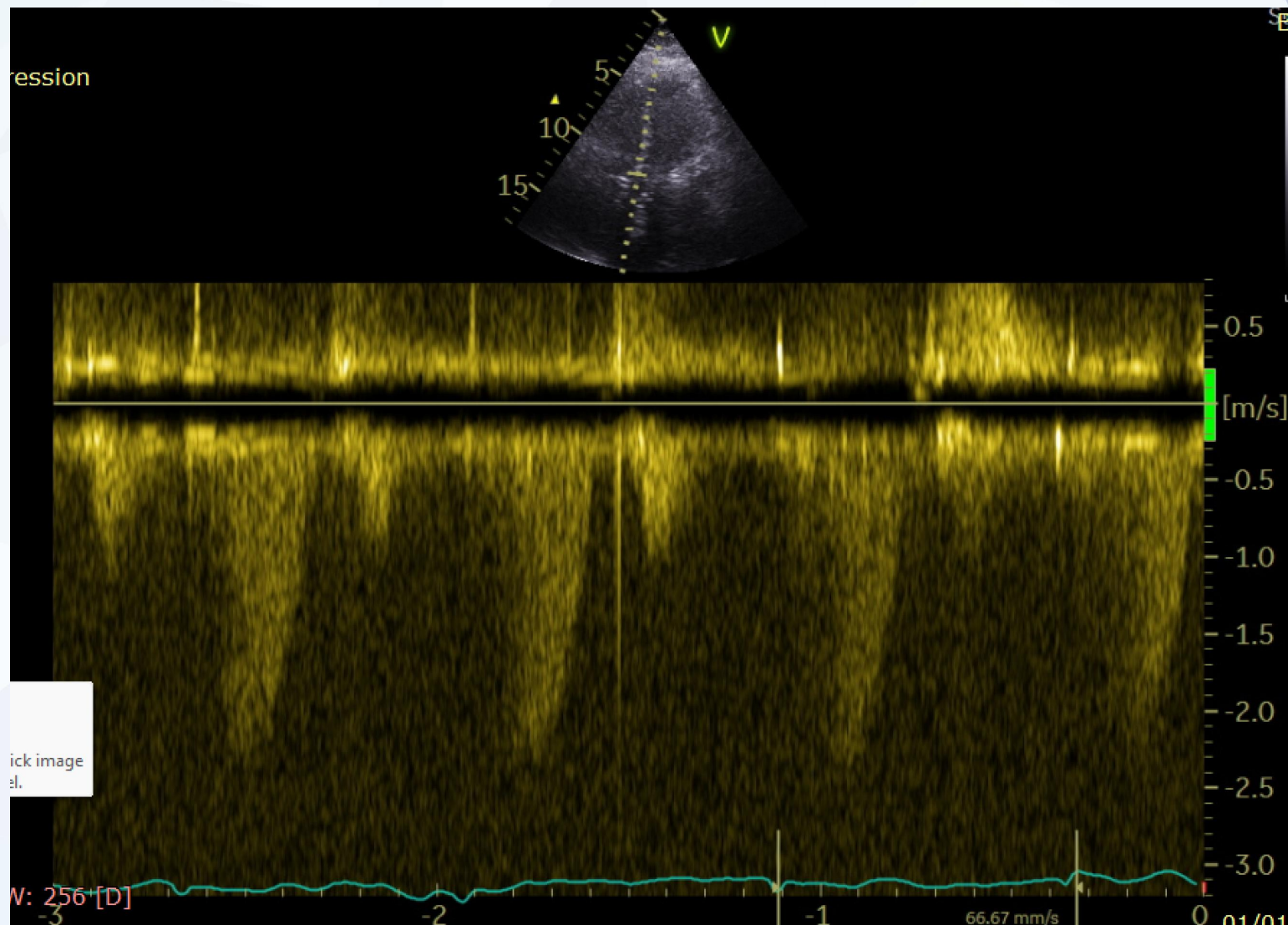












Conclusiones

SavvyWire

Guía alto soporte

Monitorización peri-procedimiento

Toma de decisiones

Simplificación del procedimiento

CRACK-UNICORN

*Opción para VIV válvulas pequeñas con riesgo
obstrucción coronaria*