
Complete Multi-Organ Trans-Catheter Treatment

The 'Full Metal Jacket' Strategy is Taken
an Extreme Step Forward

The Interventional Heart Team of Rabin Medical Center

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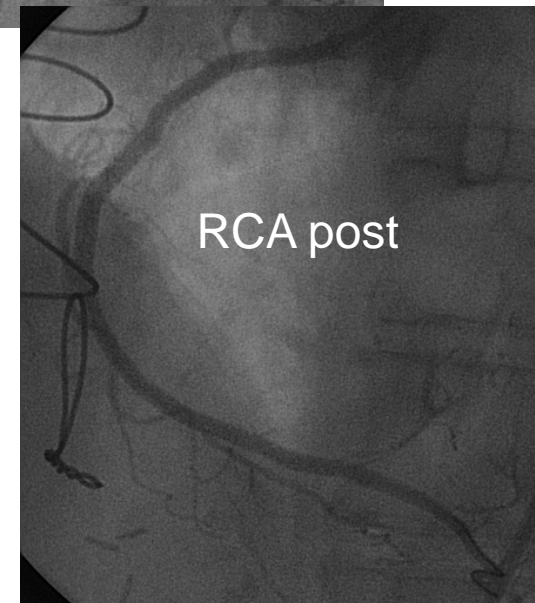
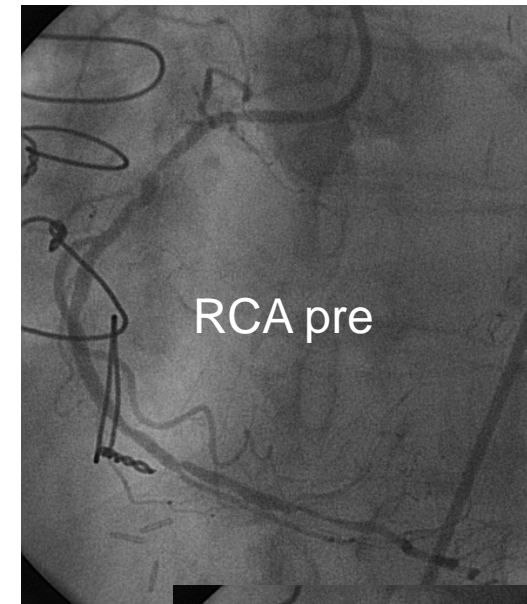
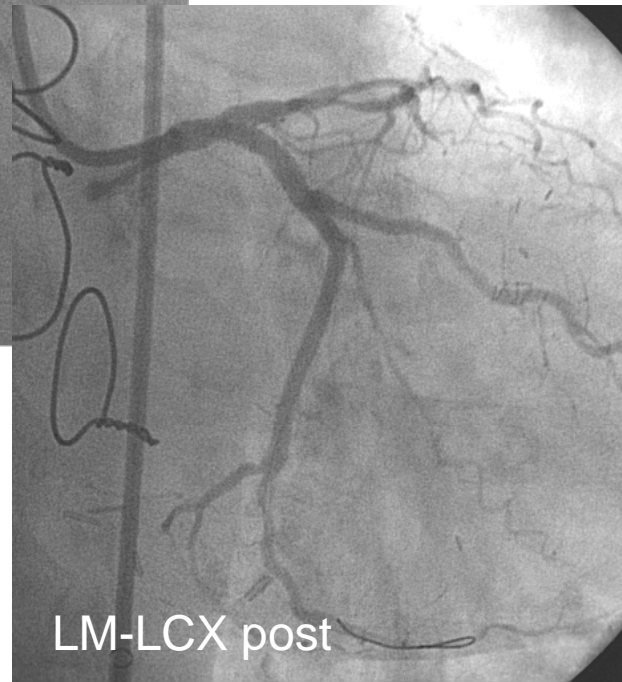
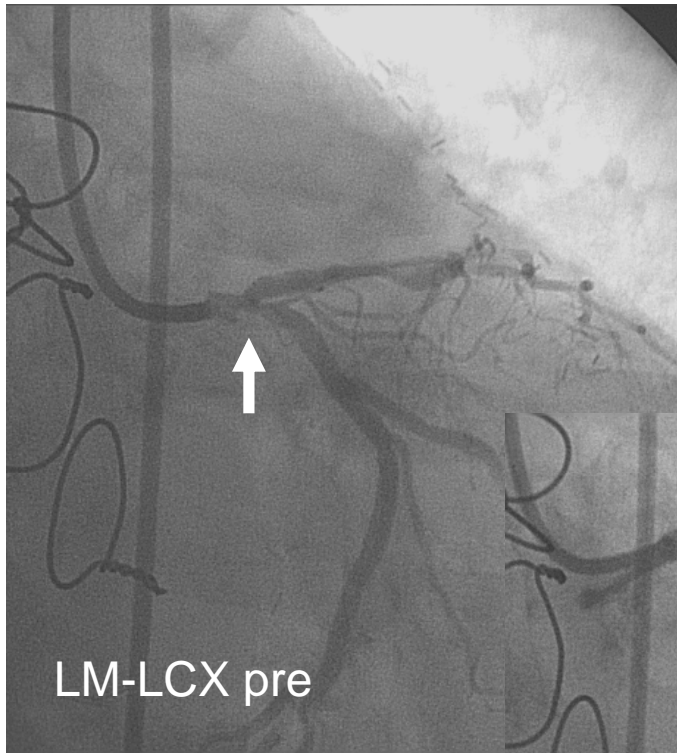
Rabin Medical Center, Petach Tikva, Israel



Clinical History

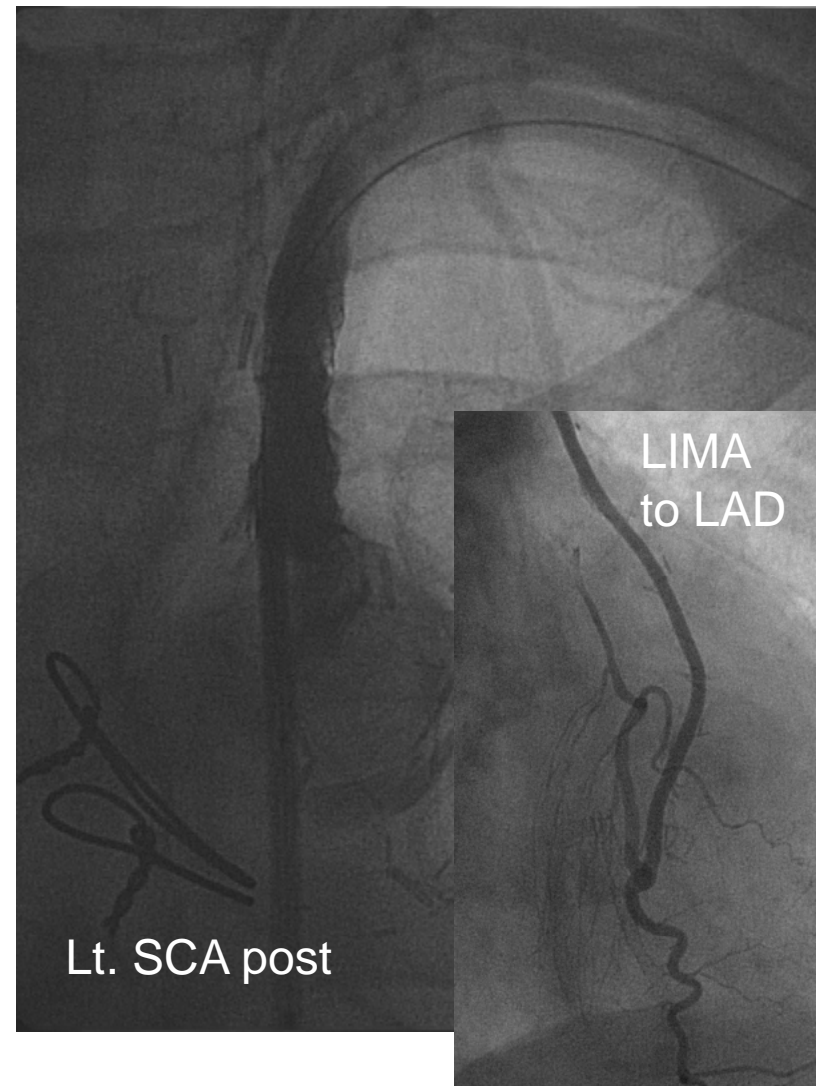
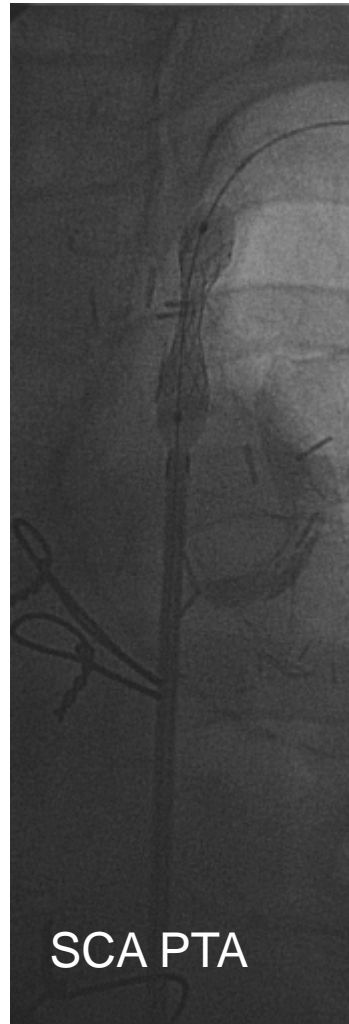
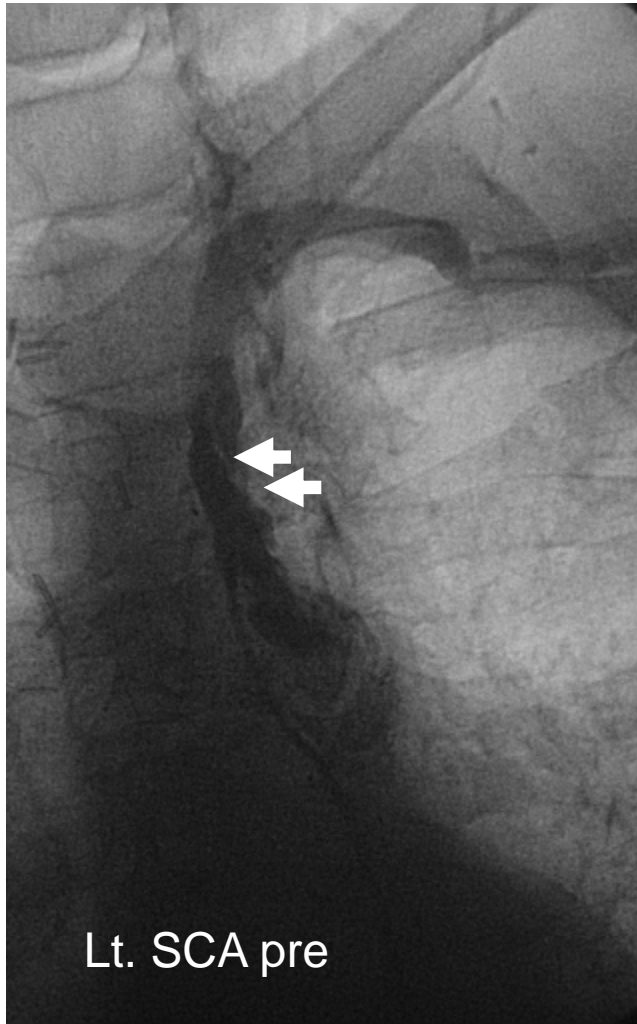
- A 83 y/o lady with severe CAD, severe PVD and symptomatic critical AS with previous complicated CABG (2005) and multiple co-morbidities (e.g. Logistic EuroCore >50%) was referred to our service in order to accomplish the following multi-step catheter-based interventions:
 - LM stenting into LCX due to SVG occlusion to OM branch
 - RCA stenting due to SVG occlusion to RCA
 - Left S.C. stenosis PTA to rescue the LIMA graft to LAD
 - Left internal carotid stenting due to symptomatic TIA attacks
 - TAVI using the Edwards-Sapien 23mm device d/t severe symptomatic AS and lack of adequate peripheral access
- Treatment strategy: multi-stage catheter-based approach.

PCI to LM-LCX and RCA



11/2007

Lt. Sub-Clavian Artery Stenting



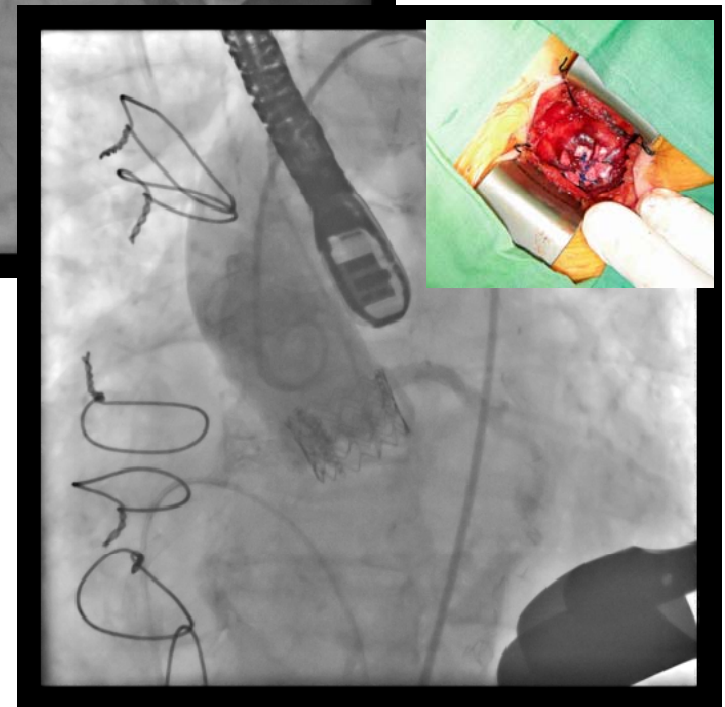
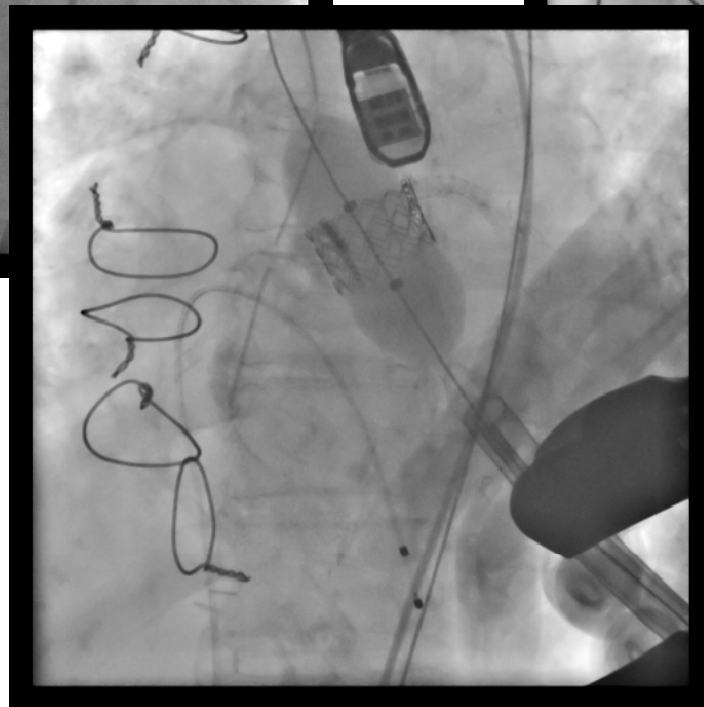
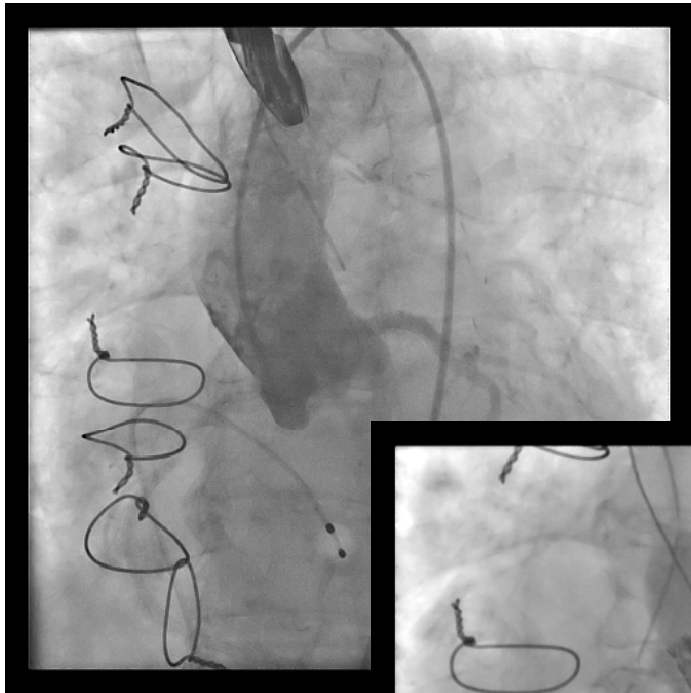
2/2008

Lt. Internal Carotid Stenting Procedure



Trans-Apical TAVI

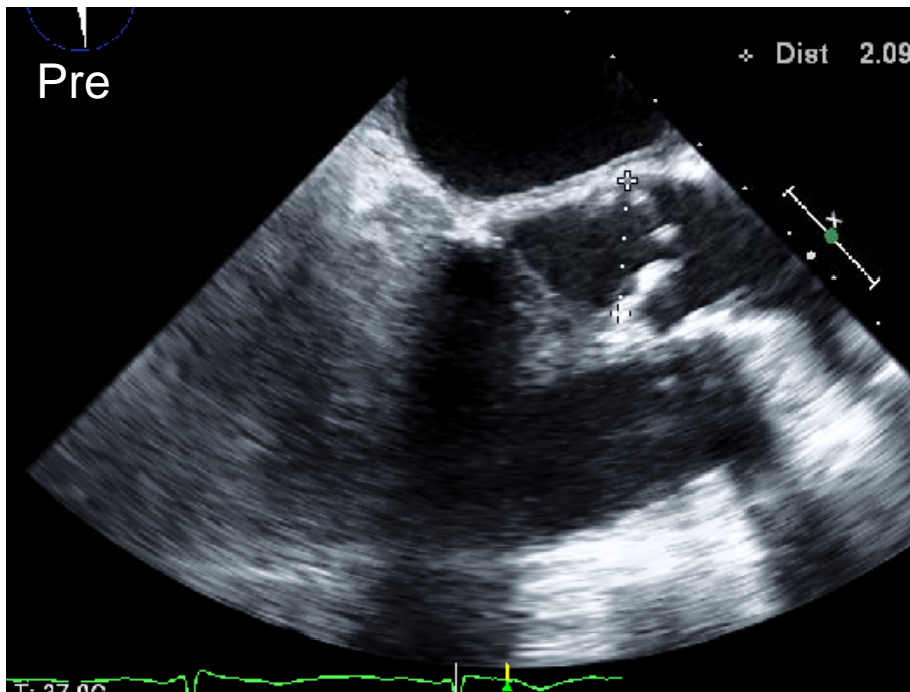
using Edwards Sapien 23 mm Valve



12/2009

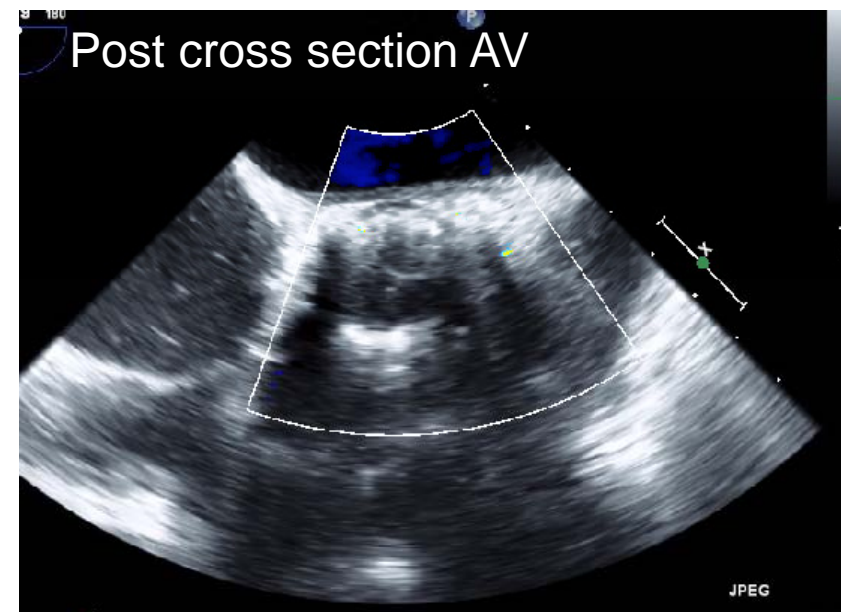
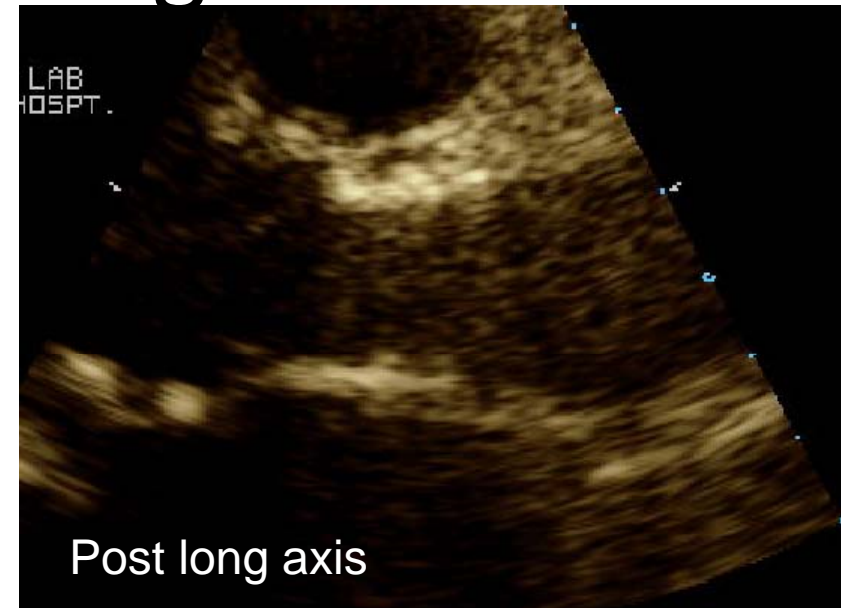
Echo Findings

Pre TAVI
AVA=0.5 cm² - 83/53 mmHg



Post TAVI
AVA=1.7 cm² - 12/7 mmHg

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Summary

- The patient is totally asymptomatic since the TAVI procedure performed on 12/2009.
- Catheter-based treatment in a high-risk patient for vascular (coronary and peripheral) and aortic valve stenotic disease is feasible based on this anecdotal case.
- This multi-step approach broadens the treatment options for extremely complicated cardiovascular patients with multi-organ circulatory disease.