

EKOS™ Lysis of a Chronic Occlusion of the SFA

Justin A. Robinson, MD - Yakima Valley Memorial Hospital, Yakima, WA

Patient History

- 40yo female presented with persistent symptoms of lower limb claudication pain/heaviness. Left superficial femoral artery (SFA) endarterectomy 4-years prior
- Symptoms more pronounced on the left lower limb than right and during uphill walking
- History of diabetes and renal transplant
- Physical examination: no pulse at the groin on the left side
- Duplex ultrasound: complete occlusion of the left SFA
- CT angiography: bilateral SFA occlusion, with more blockage on the left than the right

Treatment

- Complete left SFA occlusion demonstrated by pre-procedural angiography (Fig. 1)
- Bard™ Crosser™ established access into the true lumen
- EKOS™ device (24-cm treatment length, 106cm working length) placed in the left SFA
- rtPA infused using the EKOS™ device at 1.0 mg/hr

Results

Following 10 hours of rtPA infusion

- False negative angiographic result attributed to placement of the EKOS™ device which obstructed inflow at the ostial SFA
- Following removal of the EKOS™ device, angiography demonstrated patency and brisk flow in the SFA from the proximal to the popliteal region (Fig. 2)
- Thrombus resolution revealed regions of atherosclerotic lesions (Fig. 2)
- Adjunctive balloon angioplasty followed by stenting with Bard™ LifeStents™ resulted in excellent outcome with reduced filling of the collaterals (Fig. 3)

Conclusion

- Substantial thrombotic content was present in the chronic SFA occlusion
- EKOS™ therapy successfully resolved the thrombosed segments, allowing restoration of blood flow and identification of the culprit lesions for simplified atherosclerotic treatment of blood flow and identification of the culprit lesions for simplified atherosclerotic treatment

"Given the age and volume of the clot, I was impressed with the level of clearance we achieved with the EKOS™ device."

- Justin A. Robinson, MD



Figure 1. Pre-procedural angiography

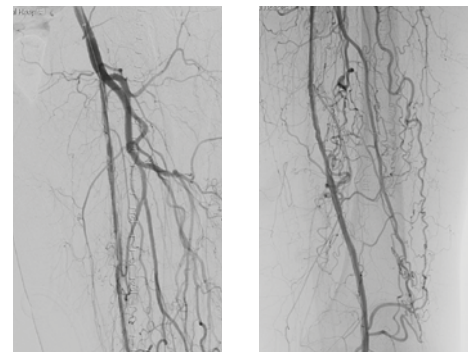


Figure 2. Post-EKOS™ angiography

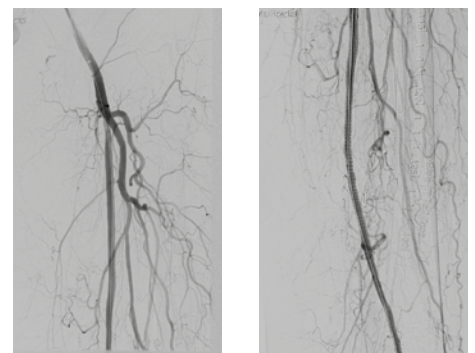


Figure 3. Completion angiography

Imagine where we can go.

Indications for use: The EkoSonic™ Endovascular System is intended for controlled and selective infusion of physician-specified fluids, including thrombolytics, into the peripheral vasculature. The EkoSonic™ Endovascular System is CE Marked for the treatment of pulmonary embolism with a $\geq 50\%$ clot burden in one or both main pulmonary arteries or lobar pulmonary arteries, and evidence of right heart dysfunction based on right heart pressures (mean pulmonary artery pressure ≥ 25 mmHg) or echocardiographic evaluation. **Contraindications:** Not designed for peripheral vasculature dilation purposes. This system is contraindicated when, in the medical judgment of the physician, such a procedure may compromise that patient's condition. Such conditions include but are not limited to: Tortuous vascular anatomy compromising safe introduction of endovascular equipment - Conditions associated with increased risk of bleeding. See device instructions for use for complete prescribing information http://ekoscorp.com/international_enter.htm#Resources

EKOS, the EKOS logo, Acoustic Pulse Thrombolysis and EkoSonic are trademarks of EKOS Corporation, a BTG International group company. EKOS is a registered trademark in the US, EU and certain other territories. "Imagine where we can go", BTG and the BTG roundel logo are trademarks of BTG International Ltd. BTG and the BTG roundel logo are registered trademarks in the US, EU and certain other territories. All rights reserved. © 2015 EKOS Corporation. GxUS-EKO-2015-0202



BTG

btg-im.com