Simplifying Treatment of ALI With The Use of The Indigo Thrombectomy System: When Is Open Surgery Required

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Disclosures

• Consultant:
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Why Percutaneous Embolectomy?

• Remove thrombi and emboli in one setting and treat the underlying stenosis
• Reduce cost
• Easier access to vessels BTK
• Reduce the need for lytics
• Still have other treatment options open, if needed

Indigo System Innovation of Catheters

<table>
<thead>
<tr>
<th>CAT 3</th>
<th>CAT 5</th>
<th>CAT 6</th>
<th>CAT 8</th>
<th>CAT D</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.7 F</td>
<td>1.9 F</td>
<td>2.4 F</td>
<td>3.0 F</td>
<td>3.8 F</td>
</tr>
<tr>
<td>150 cm</td>
<td>132 cm</td>
<td>135 cm</td>
<td>135 cm</td>
<td>85 &amp; 115 cm</td>
</tr>
<tr>
<td>Wire Platform</td>
<td>.014–.025”</td>
<td>.014–.025”</td>
<td>.014–.038”</td>
<td>.014–.038”</td>
</tr>
<tr>
<td>Separator™</td>
<td>3</td>
<td>3</td>
<td>5</td>
<td>8</td>
</tr>
</tbody>
</table>

Compatibility

Working Length

Wire Platform

Compatible

Penumbra Devices

Product availability varies by country. Caution: Federal (USA) law restricts these devices to sale by or on the order of a physician. Prior to use, please refer to the Instructions for Use for Indigo Aspiration System and Penumbra Pump MAX for complete product indications, contraindications, warnings, precautions, potential adverse events and detailed instructions for use. Please contact your local Penumbra representative for more information.

Indigo System Atraumatic, trackable, Low Profile Clot Removal

Technique for ALI

• Traverse clot burden
• Infuse 10 mg TPA in pulse spray manner with microinfusion catheter
• Advance largest caliber sheath possible
• XTRACT Technique

• Adjunctive techniques
  – Balloon angioplasty
  – Fogarty
  – Stents
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The contralateral sheath with RHV/Tuohy is positioned as close to the lesion as possible and the Indigo CAT8 is advanced through sheath over a wire.

The Indigo CAT8 is placed just proximal to the face of the clot and wire is retracted.

Aspiration is applied to Indigo CAT8 via Pump MAX until CAT8 becomes occluded (recommend waiting at least 90 seconds).

The Indigo CAT8 is removed under aspiration to ensure clot remains engaged in catheter tip and clot is extracted out of the body.

Clot removed with XTRACT Technique

Common Iliac Occlusion

SFA Thrombosis

Distal Popliteal Thrombosis

AFib Occlusion

Indigo System with CAT6
Aspirated thrombus from:
- Distal Popliteal and TP Trunk
- Common Iliac
- SFA Thrombosis
- Distal Popliteal Thrombosis
- AFib Occlusion
Indigo System with CAT8, flow restored to posterior tibial and peroneal emboli from Atherectomy in Tibial-Peroneal Trunk

Open Surgery

- Clot burden is extensive
  - Multilevel
- Percutaneous embolectomy inadequate
- Dense ischemia with motor loss or compartment syndrome
- Chronic clot less responsive