

Successful Treatment of Infrapopliteal Embolic Arterial Occlusion with the Pounce™ Thrombectomy System



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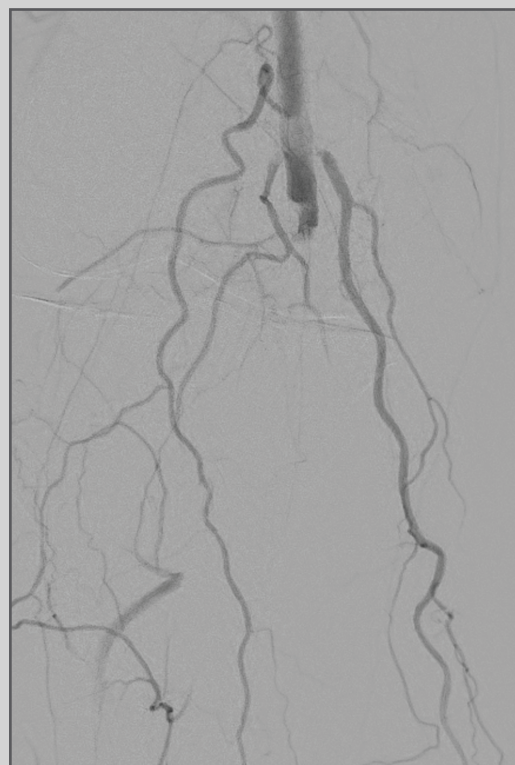
Patient Presentation

- 75-year-old male presented with right foot pain and paresthesia which began 1 day before arrival.
- Diagnostic Angiogram showed a CTO of the right popliteal artery at the P1 segment, the right tibial peroneal trunk with reconstitution via the proximal collaterals, the right proximal posterior tibial artery with visible reconstitution further down the vessel, the right peroneal artery, and the right anterior tibial artery.

Procedure Overview

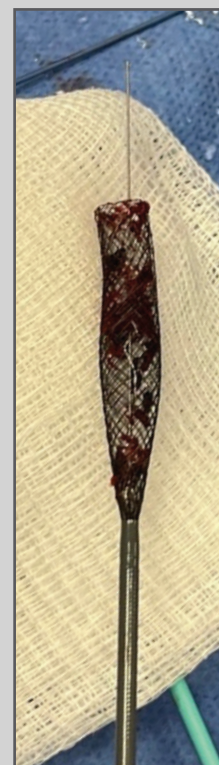
- The Pounce™ Thrombectomy System baskets were deployed mid AT, the funnel catheter was deployed over the basket wire, and the funnel was placed in the proximal AT.
- The baskets were removed through the sheath and re-inserted for a second pass with the baskets in the proximal PT and the funnel in the proximal popliteal artery.
- After removal, balloon angioplasty cleaned up residual stenosis in the PT.
- Finally, the Pounce system was deployed for a third pass in the peroneal artery with the baskets placed in the proximal peroneal artery, and the funnel in the proximal popliteal artery.

PRE-TREATMENT IMAGING



Pre-procedure Angiogram Showing 100% Thrombotic Occlusion of Popliteal, TPT, Peroneal, Posterior, and Anterior Tibial Arteries

CLOT REMOVAL



Thrombus Removed After Multiple Passes with the Pounce™ System

FINAL IMAGING

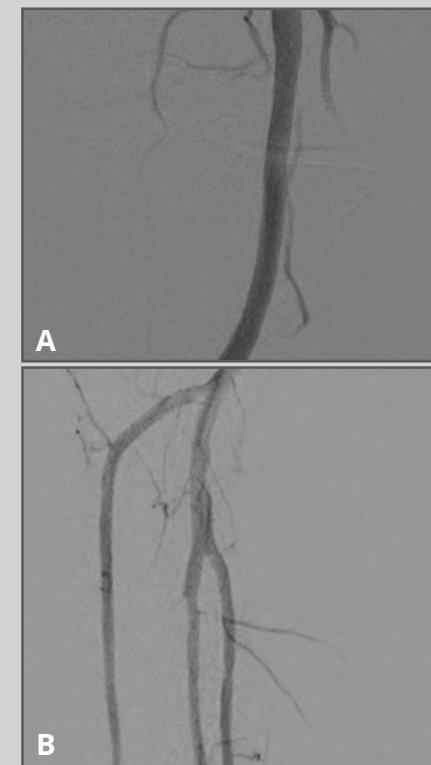


Figure A: Patent Popliteal
Figure B: TPT and Tibial Arteries After Pounce™ System Passes

Conclusion:

The Pounce system successfully restored flow and provided complete thrombus removal in all three BTK vessels. In this case example of a patient suffering from an acute thromboembolic event related to atrial fibrillation, restoration of inline flow of the infrapopliteal vessels was quickly achieved without the need for thrombolysis or open surgical intervention.

Caution: Federal (US) law restricts this device to sale by or on the order of a physician. Please refer to Instructions for Use for indications, contraindications, warnings, and precautions.

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