

Treatment of Focal Arterial Embolus With Stand-Alone Mechanical Thrombectomy



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Patient Presentation

- 82-year-old female presented with symptoms of acute-onset pain and paresthesia.
- Initial vascular exam was abnormal.
- Complex prior medical history, including chronic kidney disease, atrial fibrillation, heart failure with preserved ejection fraction, type 2 diabetes, hypertension, and dyslipidemia.
- Initial angiogram revealed a focal embolic occlusion of the right CFA.
- ABI of 0 on the right and 1.26 on the left.

Procedure Overview

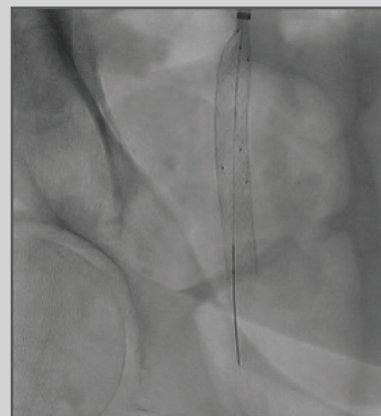
- A guiding sheath was placed contralaterally into the right CFA and the Pounce™ Thrombectomy System delivery catheter was placed distal to the embolus with the basket wire in the mid SFA.
- The Pounce system funnel catheter was deployed within the CFA with some draping into the bifurcation profunda SFA to clear the distal CFA.
- The Pounce system baskets were pulled back into the funnel and removed.
- A second pass was made with similar positioning of the components.
- Final Angiogram revealed complete removal of the embolus.
- Post procedure ABI of 1.05 on the right and 1.36 on the left.

PRE-TREATMENT IMAGING



Pre-procedure Angiogram of the Right CFA

INTRAPROCEDURAL IMAGING



The Pounce™ System Basket Retracted into Funnel in the Right CFA

CLOT REMOVED



Embolus Removed After Two Passes with the Pounce™ System

FINAL IMAGING



Post Procedure Angiogram of the Right CFA

Conclusion: The Pounce system provided prompt, on-table restoration of arterial flow for a patient with an embolic occlusion of the right CFA. No thrombolytics or other adjunctive therapies were used during the procedure.



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