



LINC

Crossing chronic total occlusions successfully -the Japan experience



Morinomiya Hospital, Osaka, Japan
Daizo Kawasaki, MD



LINC

Disclosure

Speaker name: Daizo Kawasaki

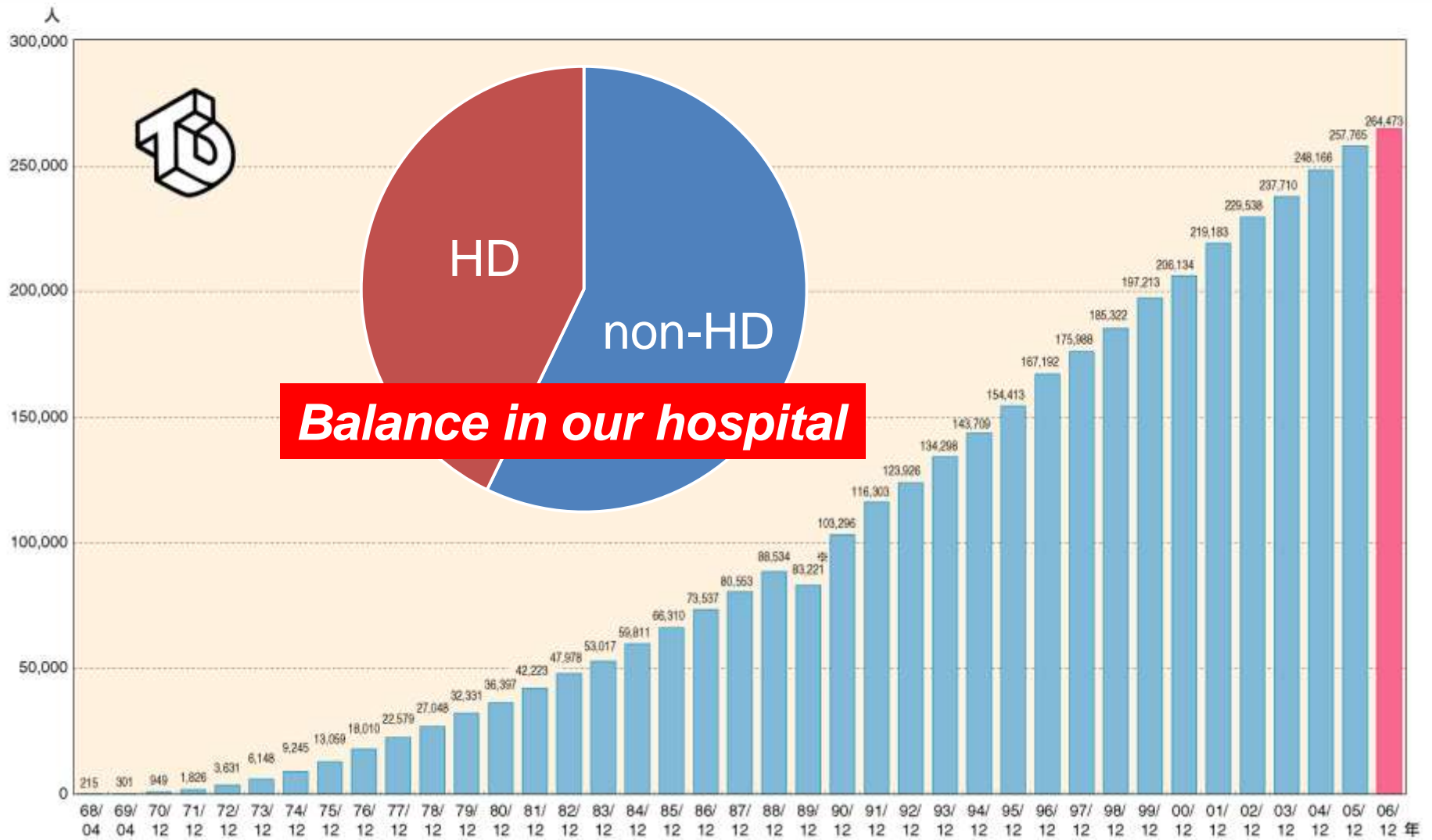
.....

I have the following potential conflicts of interest to report:

Consulting

- Employment in industry
- Stockholder of a healthcare company
- Owner of a healthcare company
- Other(s)
-
- I do not have any potential conflict of interest

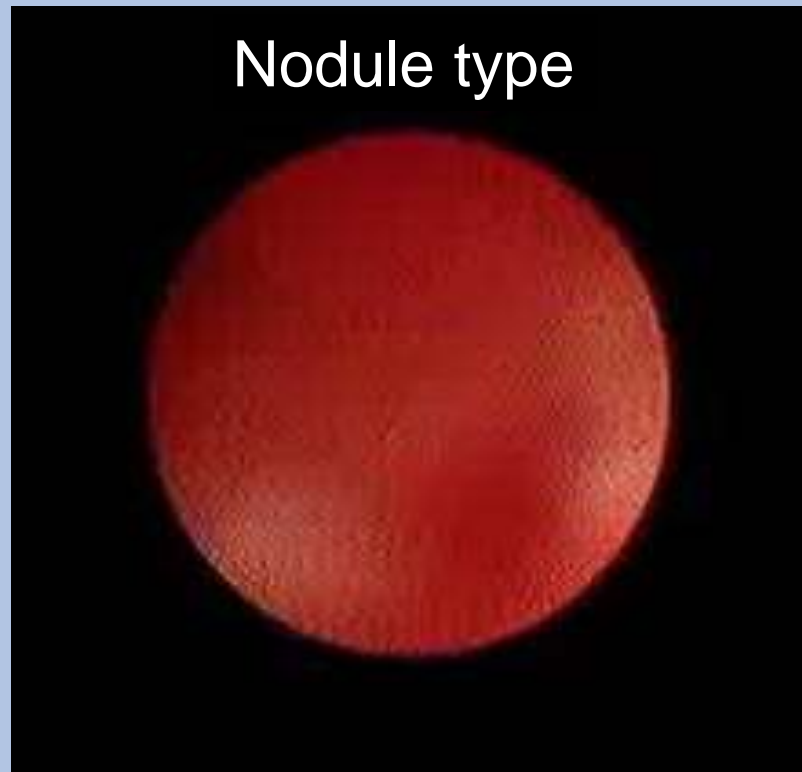
In current situation, number of dialysis patients is dramatically increasing in Japan





LINC

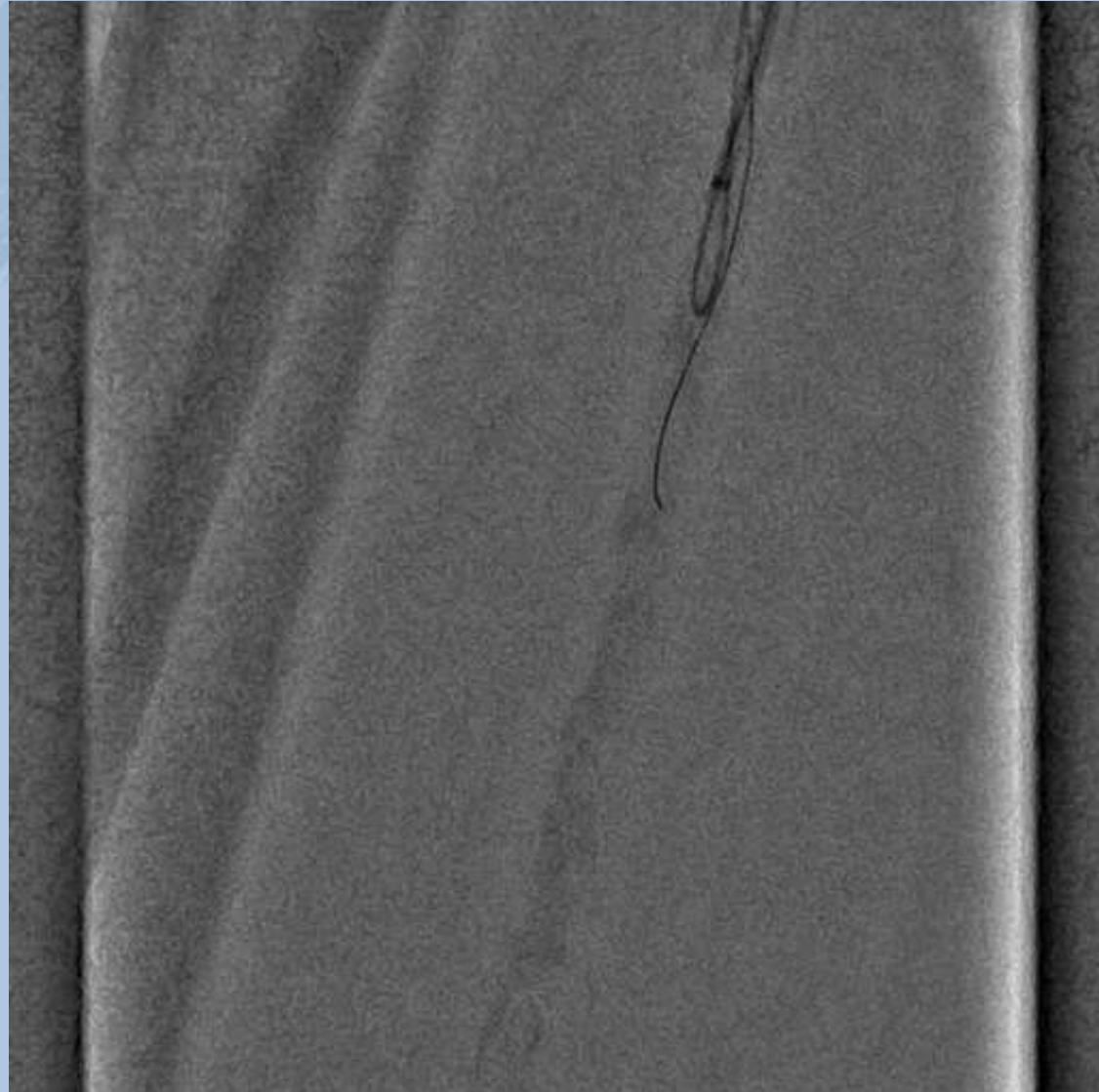
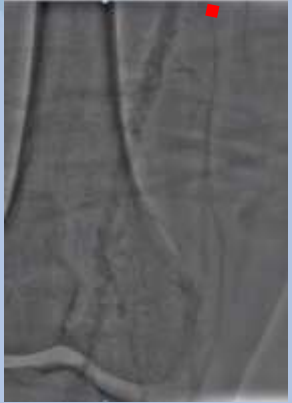
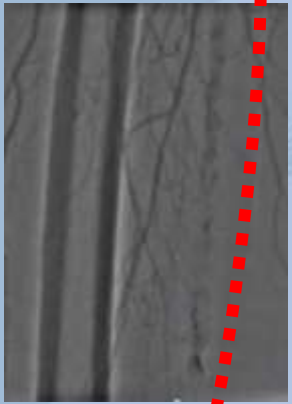
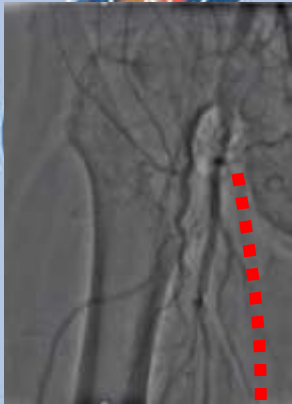
Typical CTA and Angioscopic finding of dialysis patients



These patients have much heavy calcified lesion everywhere in the arterial wall
Many of them have calcification even in intimal such as nodule, not only in medial

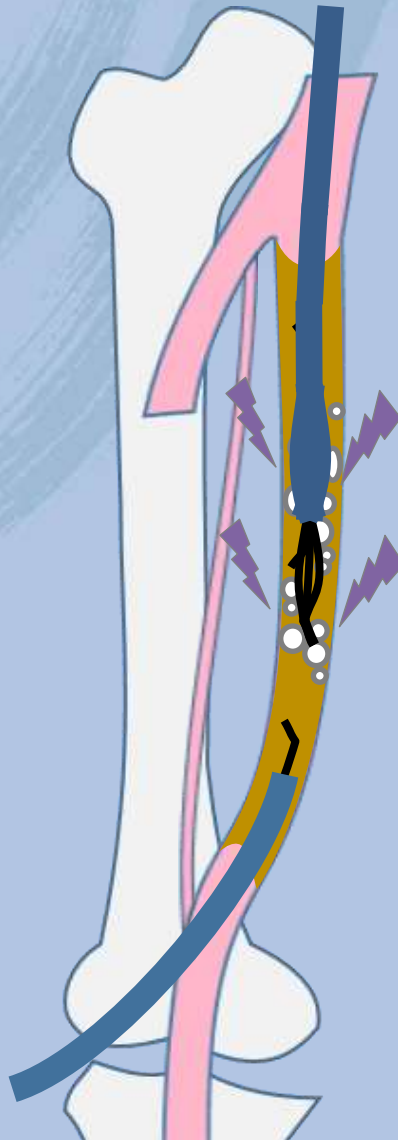


0.014 or 0.035 inch wiring
is not effective for heavy calcified CTO

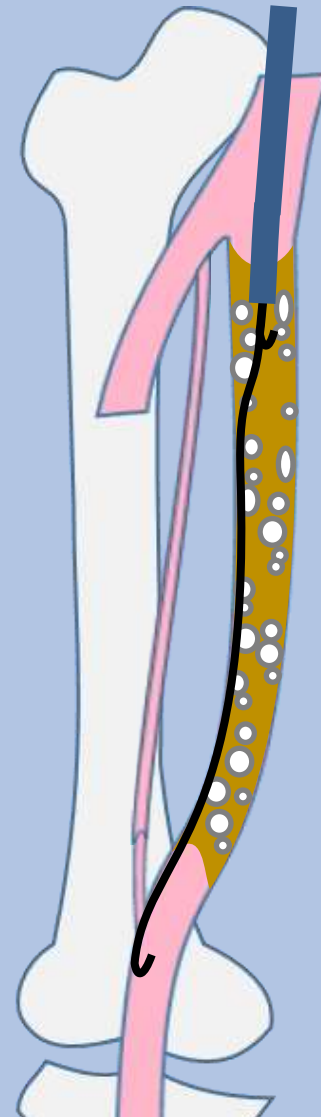




Common situation of EVT for **calcified** CTO

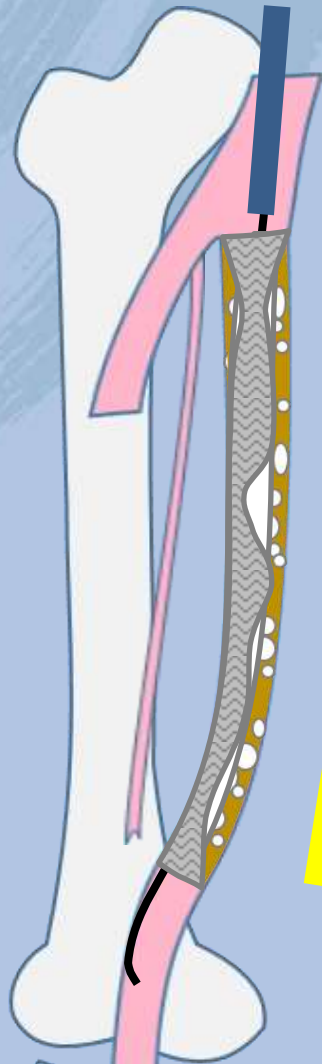


Bidirectional wiring is needed often



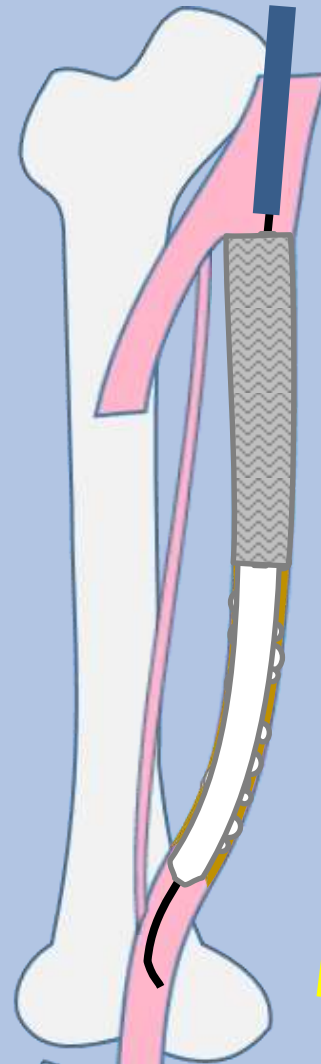
This technique has high risk of collapsing the major collateral

Difference of final results after EVT between **subintimal stenting** and **intraluminal stenting**



Require full covered stenting

High possibility that expansion is not enough



High possibility of finishing with single stent

High chance of getting fully expansion



Crosser System

LINC

CROSSER® Generator

The CROSSER™ Generator and affixed Transducer convert AC power into high frequency mechanical vibration.

Transducer

FLOWMATE® Injector

infuses saline at a rate of 0.3ml/sec at a maximum of 200 PSI.

CROSSER® Catheter

The tip of the CROSSER™ Catheter mechanically vibrates against the face of the CTO at **20,000** cycles per second (20kHz) at a stroke depth of approximately **20** microns.

Foot Switch





LINC

Case presentation





LINC

Case male '80s

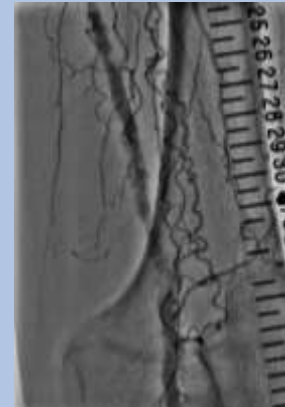
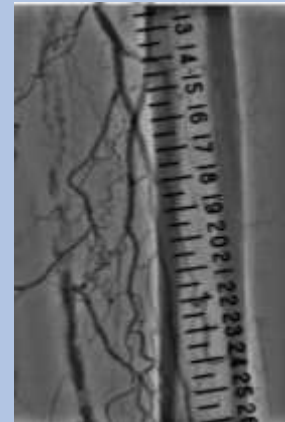
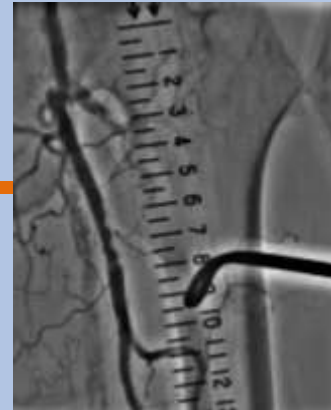
Left. SFA-CTO

Clinical Data

- Rutherford 3
- Risks; Hypertension, Diabetes, ex-smoker
- CKD stage : **HD**
- Previous Intervention : none
- ABI; 0.42 / **0.66**
- Antiplatelet agent : Aspirin + Plavix

Approach

Left ipsilateral Femoral artery





Crosser is good indication for calcified CTO

LINC





LINC

Summary

Crosser catheter is **CTO crossing device**, which does not need wire control.

Crosser catheter is good indication for CTO with **heavy calcification**.

Flossing technique with Crosser catheter is helpful to make a small channel inside **nodule calcification**.



LINC

For Save Legs, Save Patient's Life



Daizo Kawasaki, MD

Morinomiya Hopspital, Osaka, Japan



LINC

Crossing chronic total occlusions successfully -the Japan experience



Morinomiya Hospital, Osaka, Japan
Daizo Kawasaki, MD