



Echocardiographic Innovations for transcatheter mitral valve procedures

Andrea Colli MD PhD FECTS

Department of Cardiac, Thoracic and Vascular Sciences
University of Padua, Italy

Disclosure Statement of Financial Interest

AC, received travel grants from Neochord, Inc., Harpoon Medical, Siemens
AC was proctoring for Neochord, Inc.

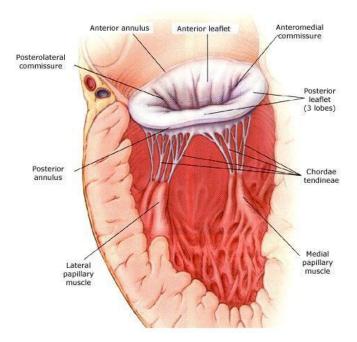


Mitral Valve

•The MV is a complex structure consisting of the mitral annulus, anterior and posterior leaflets, chordae tendinea, and the papillary muscles.

 A comprehensive understanding of normal mitral anatomy and its alteration in diseased states is

fundamental

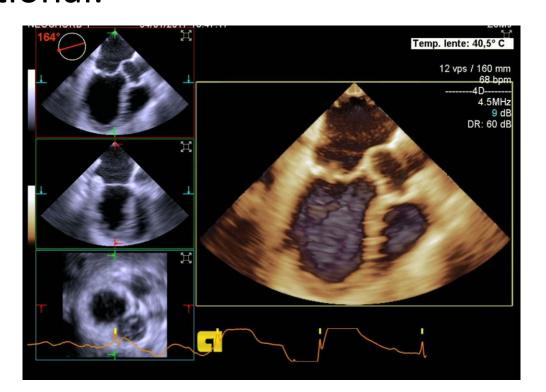






Mitral Valve

2D and 3D Echocardiography have played a central role in understanding the functional anatomy and dynamics of the MV complex in the normal state and various etiologies of MR including degenerative and functional.





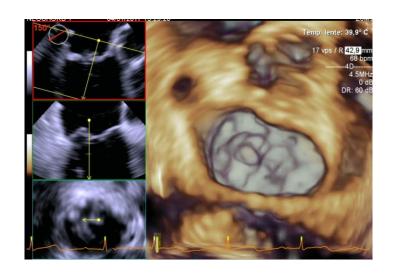


Mitral Valve Imaging Evolution

2D and 3D Echocardiography today gained the central role of procedural guidance of all new Transcather/Interventional Mitral Valve procedures









Mitral Valve Trasapical Procedures

- Neochord Mitral Valve Repair Procedure
- Harpoon Mitral Valve Repair Procedure
- Amend Mitral Valve Annuloplasty Procedure
- TMVR Tiara



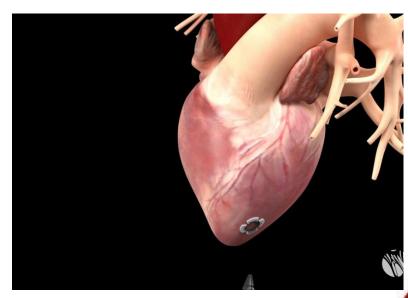




NeoChord procedure

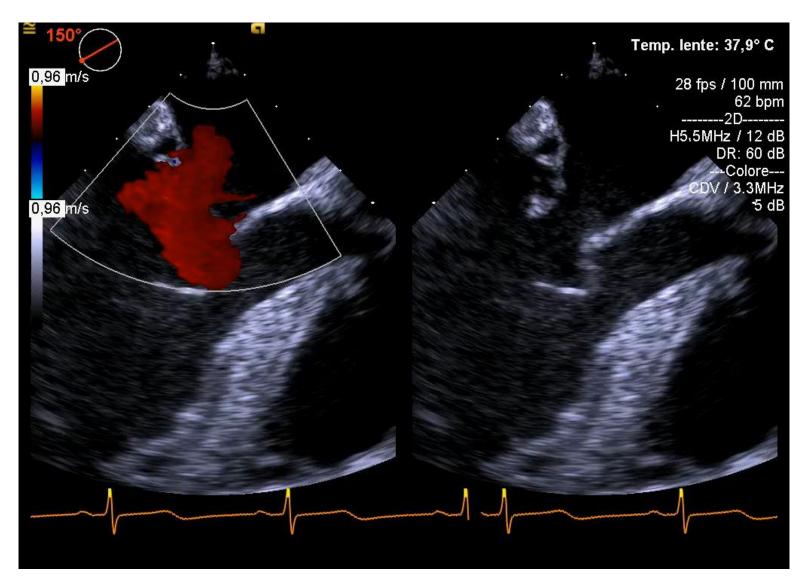
Transapical off-pump mitral valve repair with neochordae implantation (TOP-MINI), also know as NeoChord Repair, is a novel transcatheter ECHO-GUIDED procedure to treat patient suffering severe symptomatic Degenerative MR







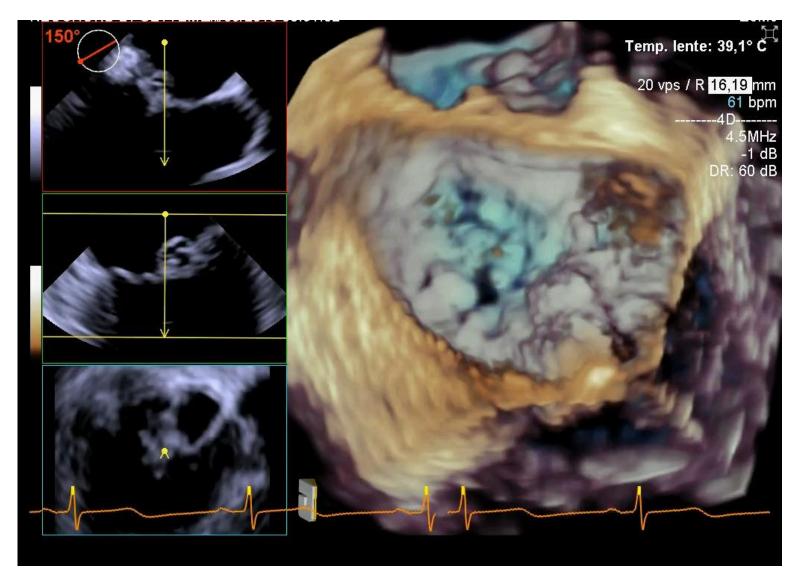
2D TEE Pre Procedure MV assessment







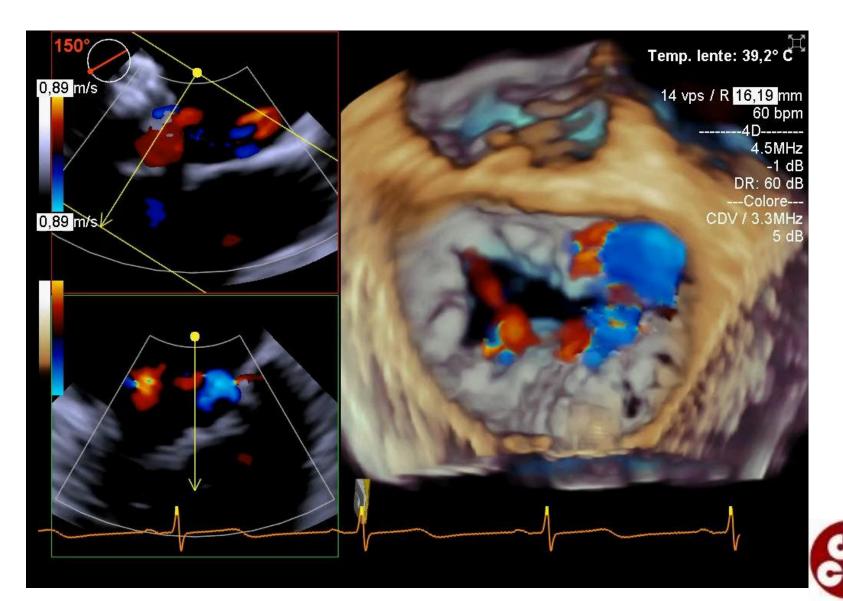
3D TEE Pre Procedure MV assessment





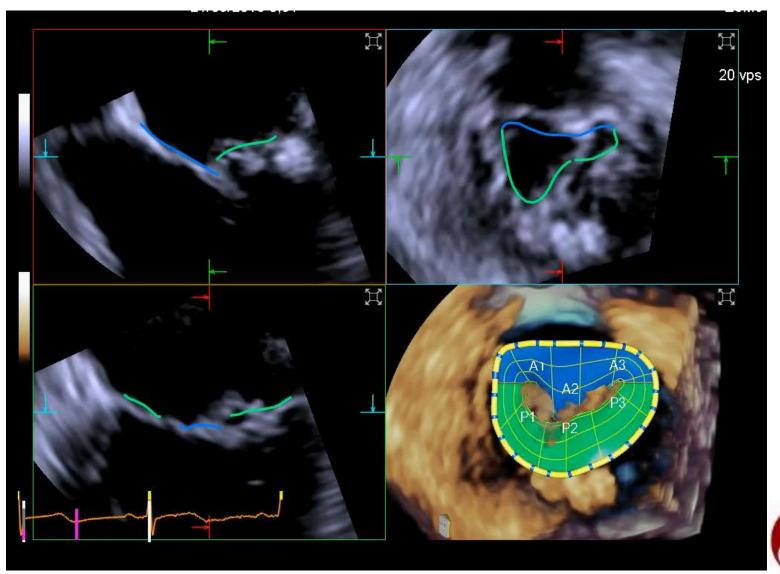


3D color doppler Pre Procedure MV assessment





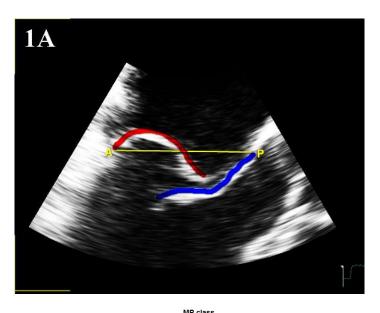
Pre Procedure MV assessment eValve modelling

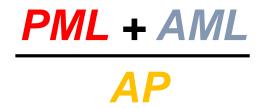


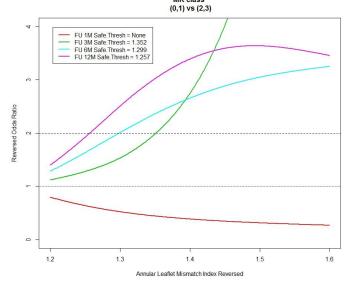




Leaflet-to-Annulus Index (LAI)







LAI Index >1.25 showed to be positive predictor of MR ≤ Mild at 1y FU



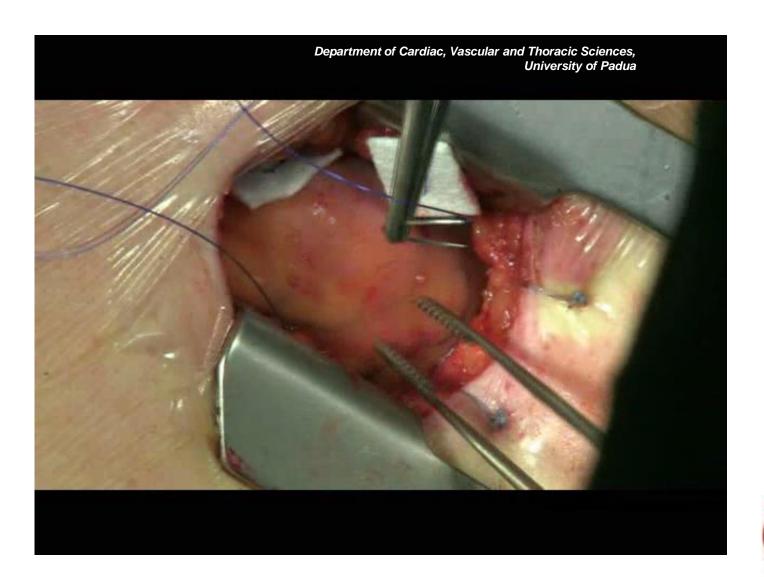
Left antero-lateral mini-thoracotomy and Finger Test







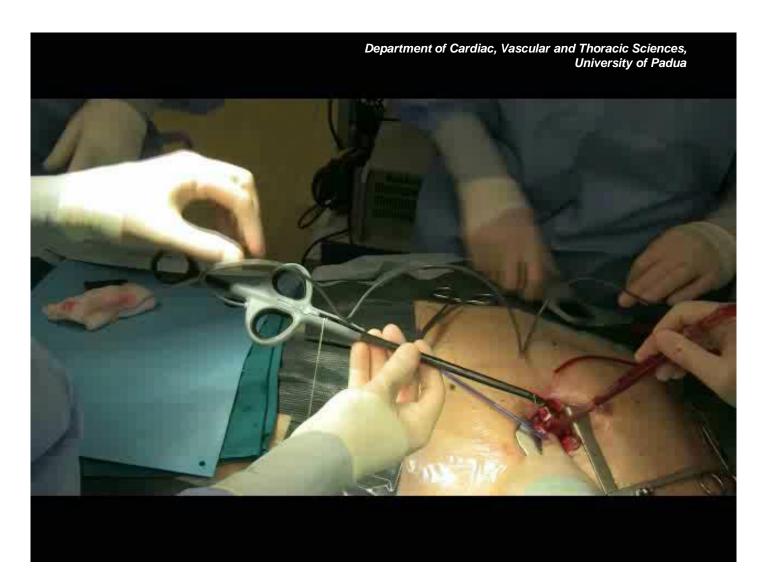
Apical purse strings







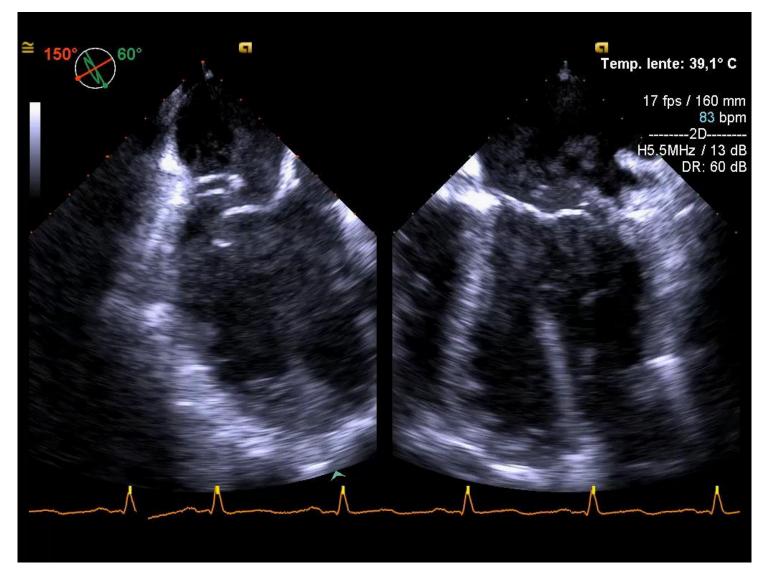
Transapical device insertion







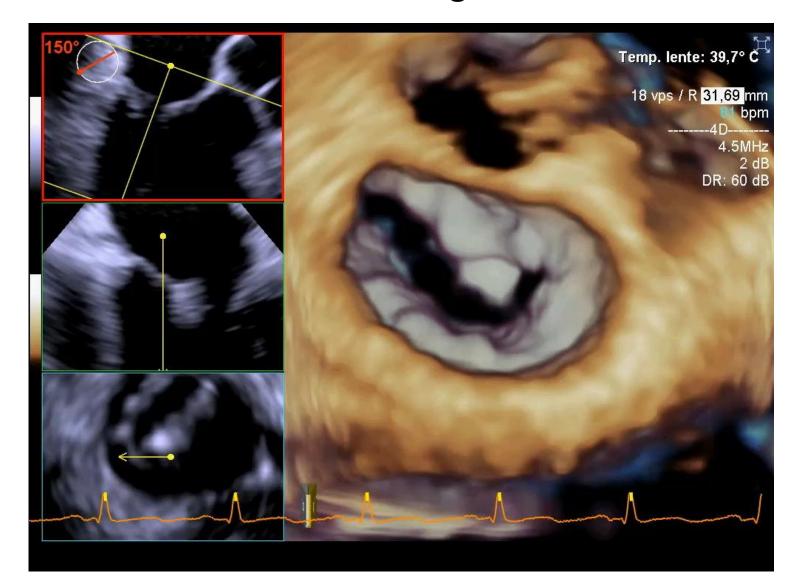
Intraventricular navigation on 2D-TEE







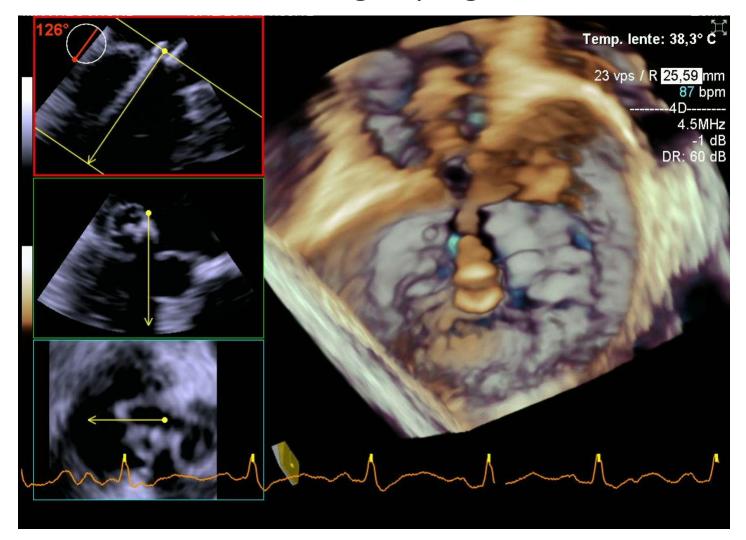
Intraventricular navigation on 2D-TEE







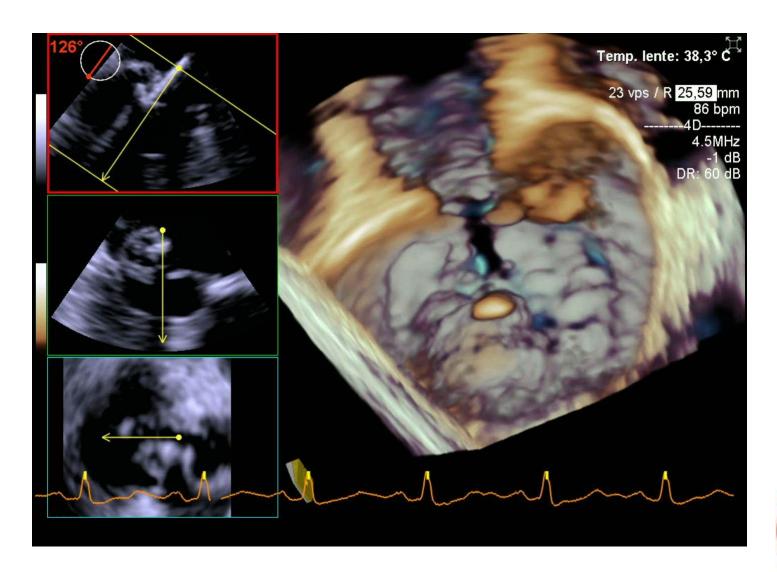
Atrial navigation on 3D-TEE and Leaflet grasping







Leaflet Grasping on 3D-TEE







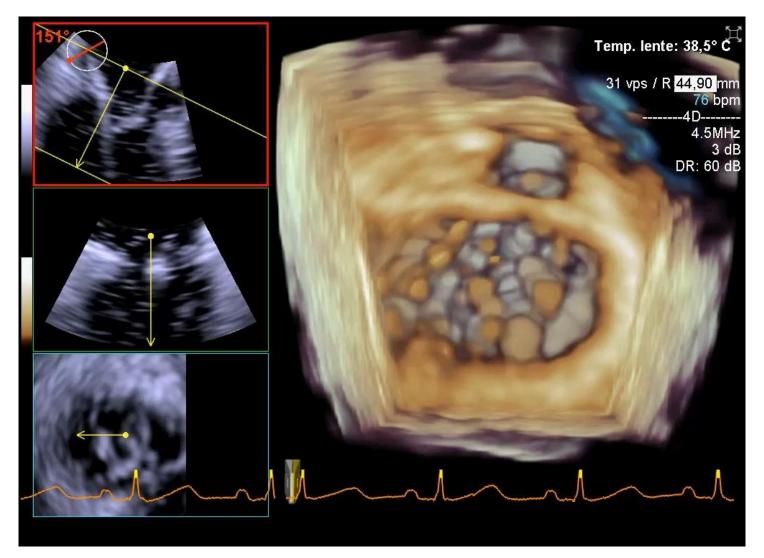
Leaflet Grasping on 3D-TEE







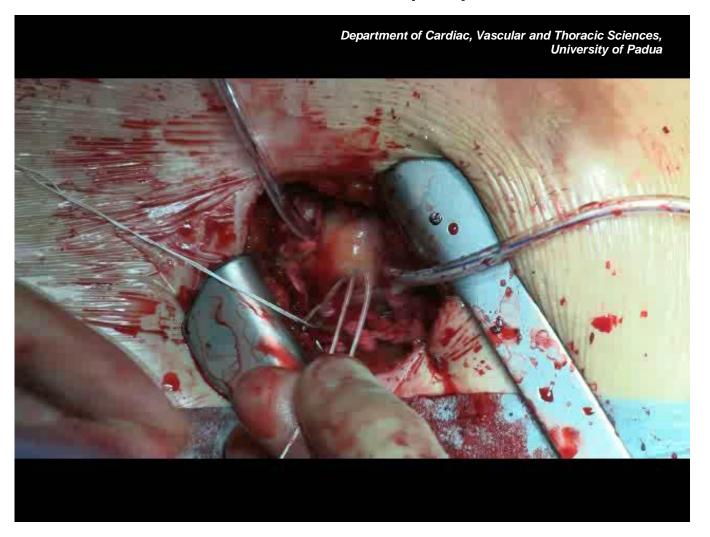
Leaflet puncture







Formation of half-hitch knot on the leaflet after chord deployment

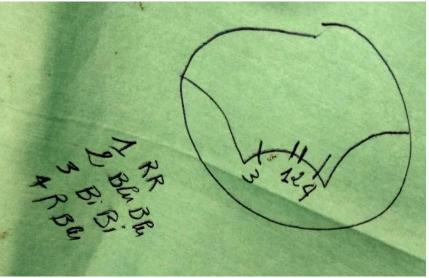






Neochord tensioning









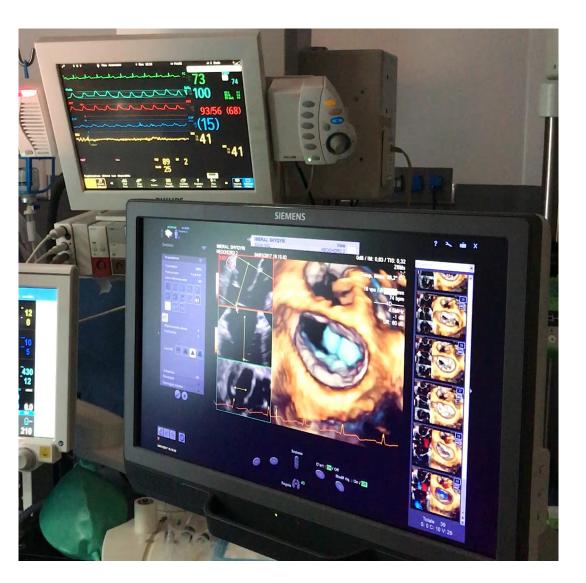
Neochord manual tensioning







Acute assessment of MV function with REAL TIME 3D-Color Doppler TEE





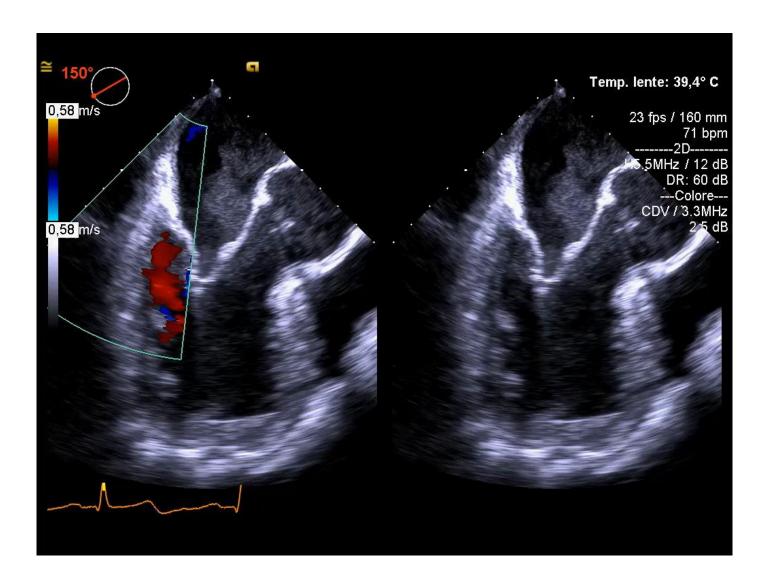


Neochord tourniquet tensioning





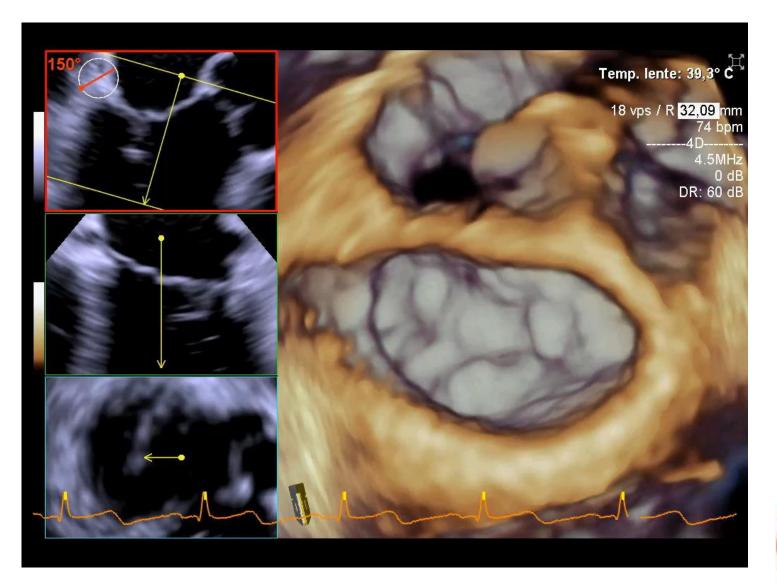
Final assessment of MV function with 2D-TEE







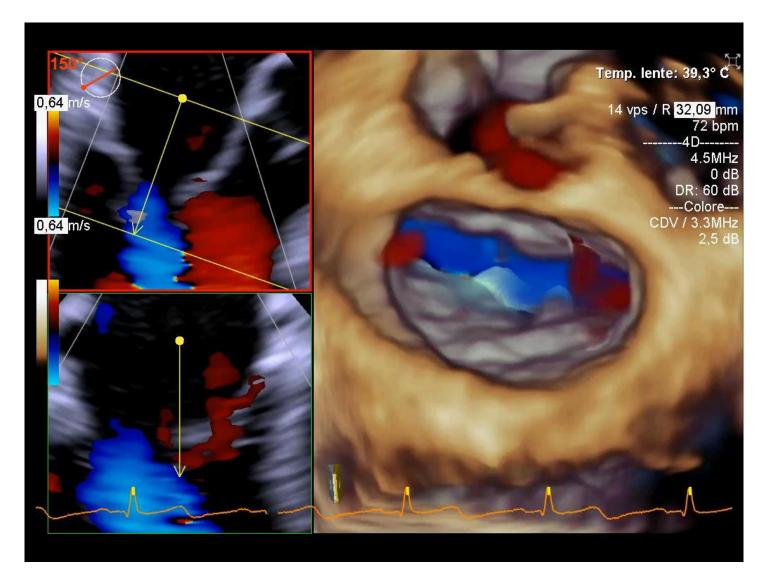
Final assessment of MV function with 3D-TEE







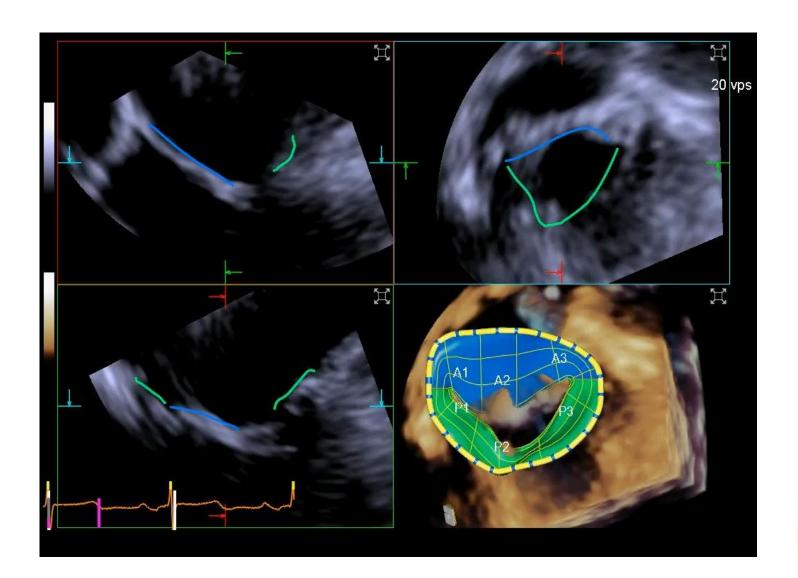
Final assessment of MV function with 3D-TEE







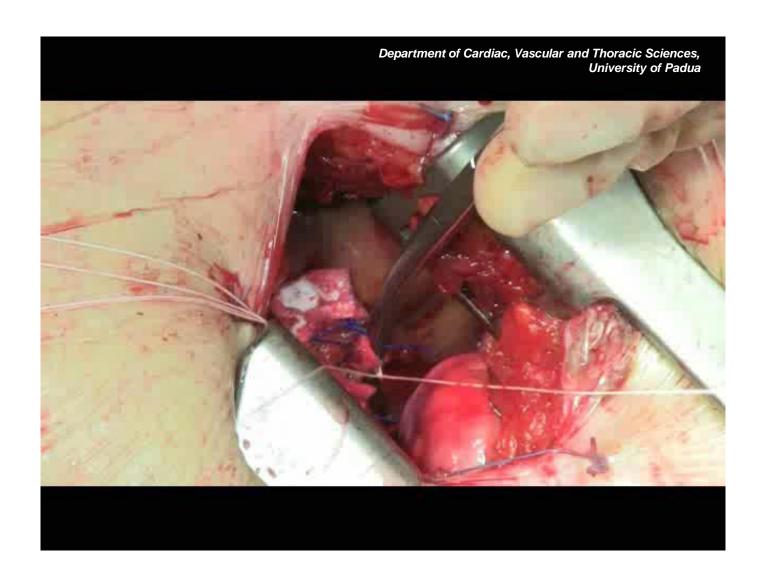
Final assessment of MV function with 3D-TEE







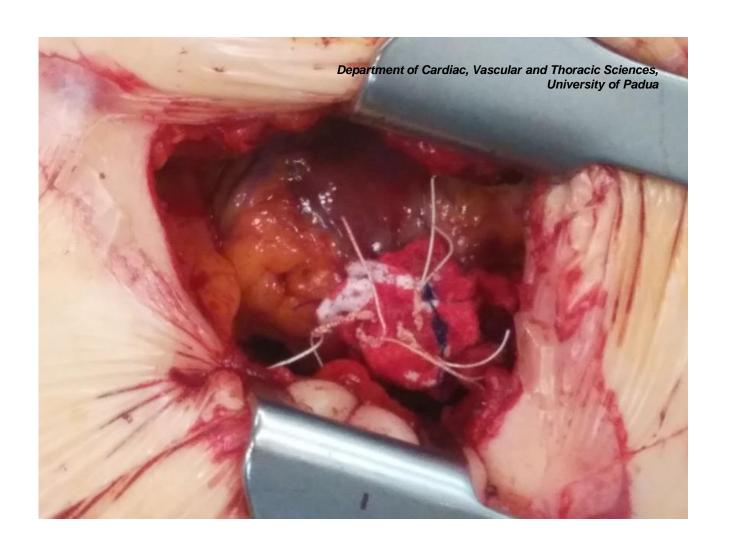
Anchoring of the NeoChords on the epicardium





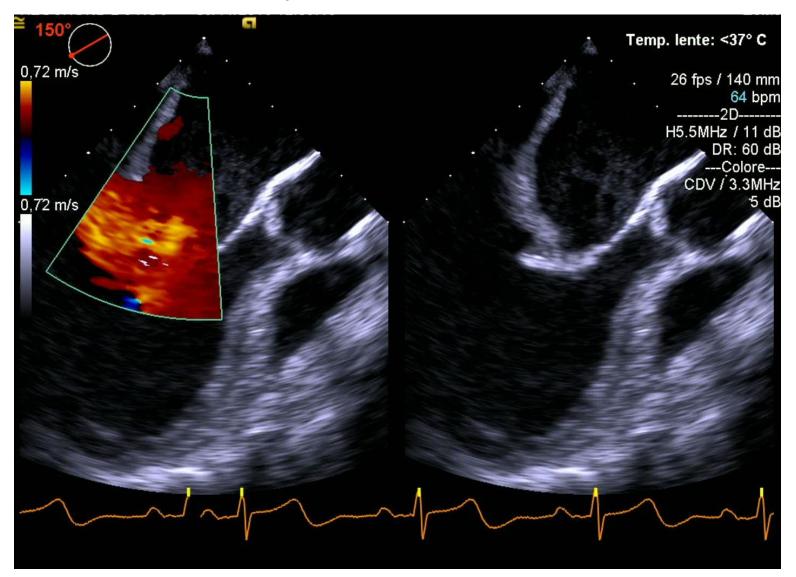


Neochord passed into a round apical teflon pledget



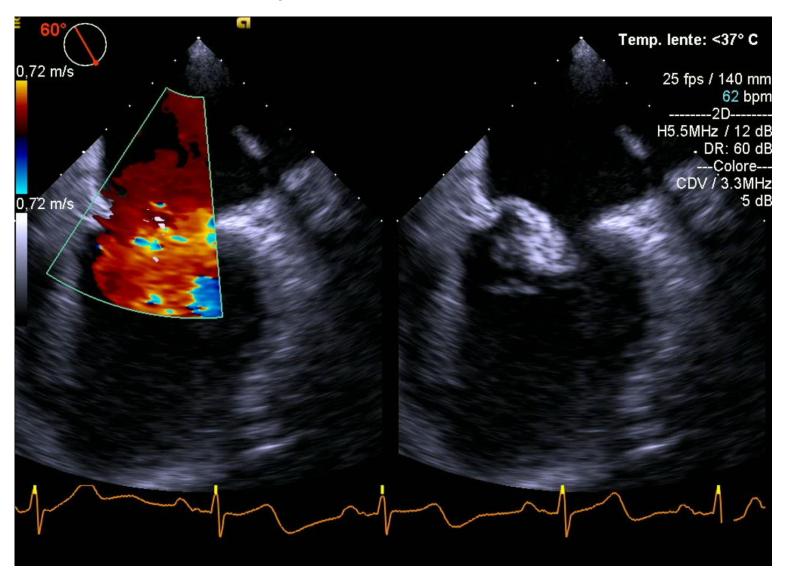






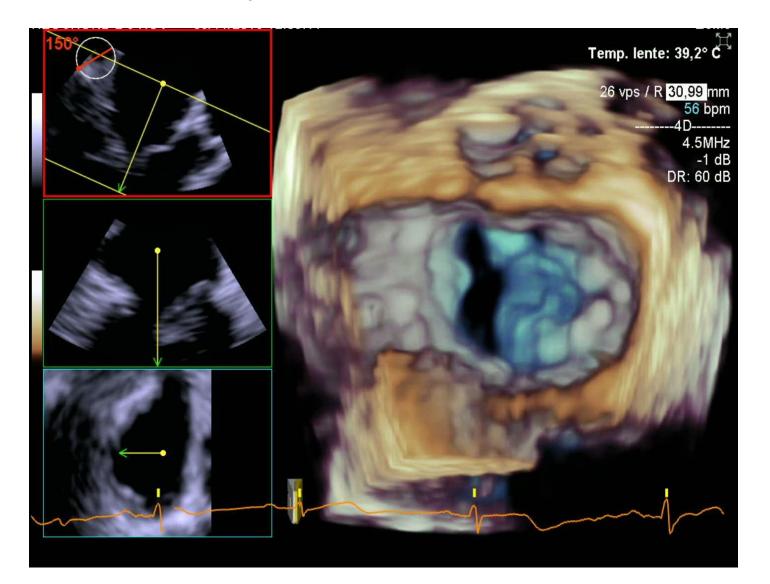






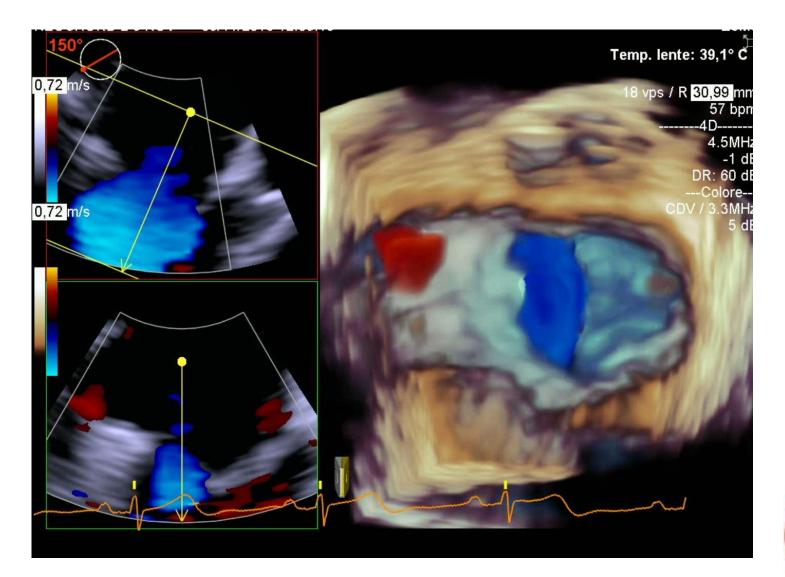














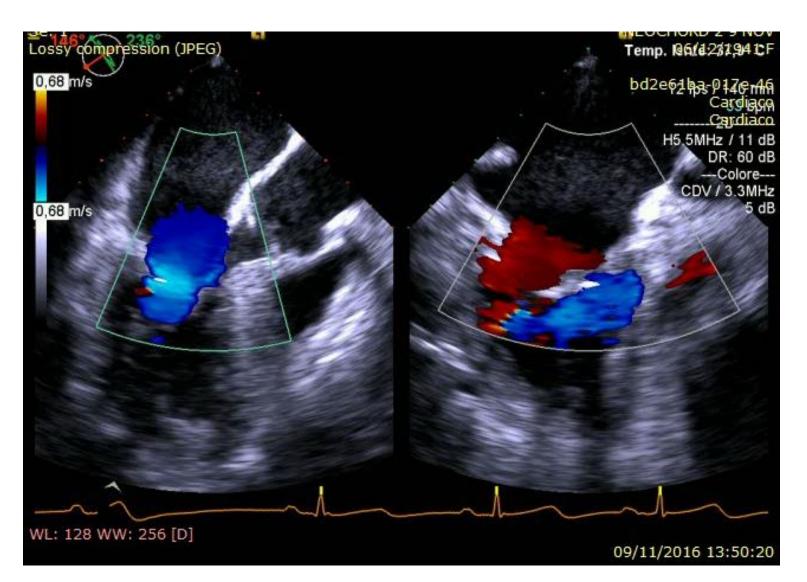


Complex Bileaflet Repair



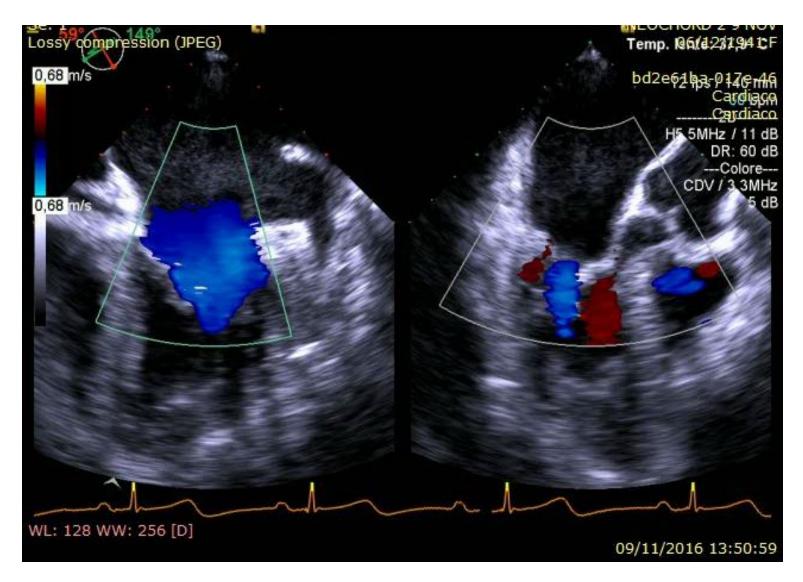






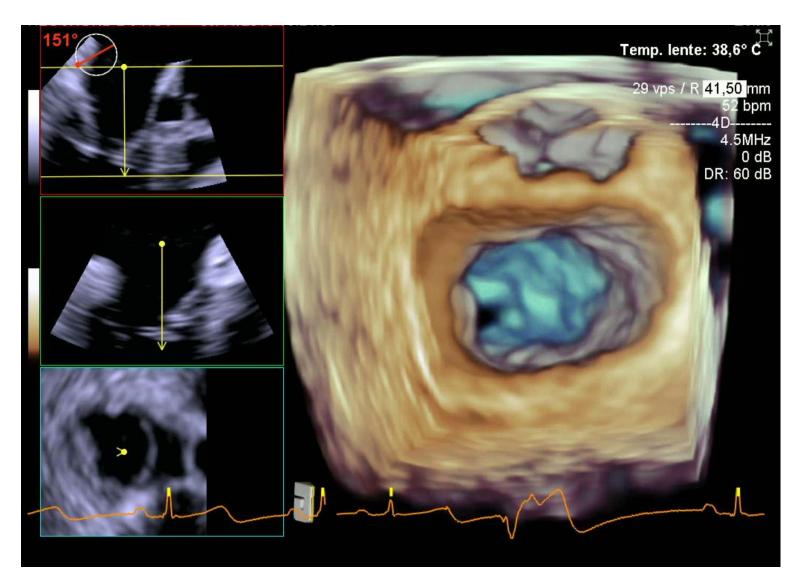






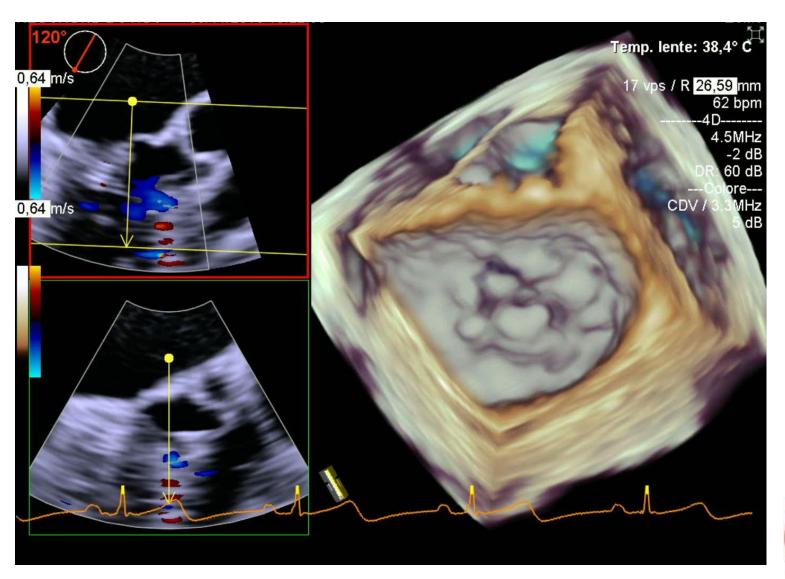






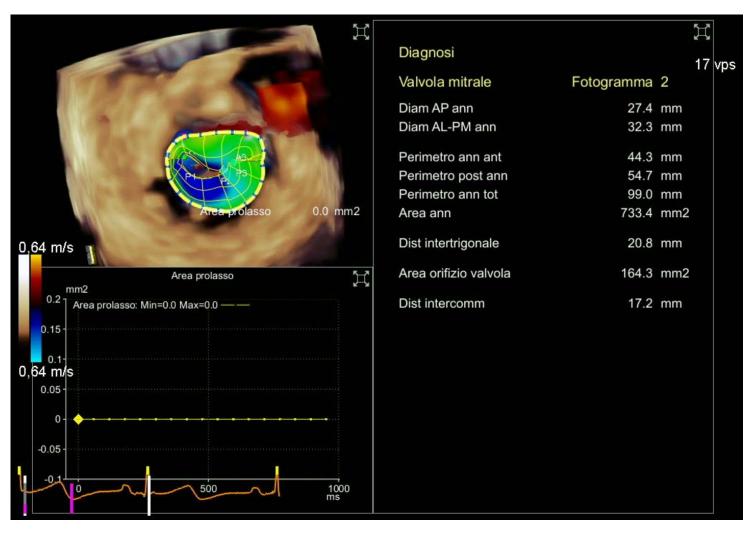
















The NeoChord procedure is now technically standardized and reproducibile

- Patient Selection Criteria: Leaflet-to-Annulus Index,
 MV Morphology classification
- Access site: Postero-Lateral, modifications based on Leaflet-to-Annulus Index evaluation
- Echocardiographic guidance protocol
- Tensioning protocol: Tourniquets, Overtensioninig,
 3D-Color Doppler Real Time

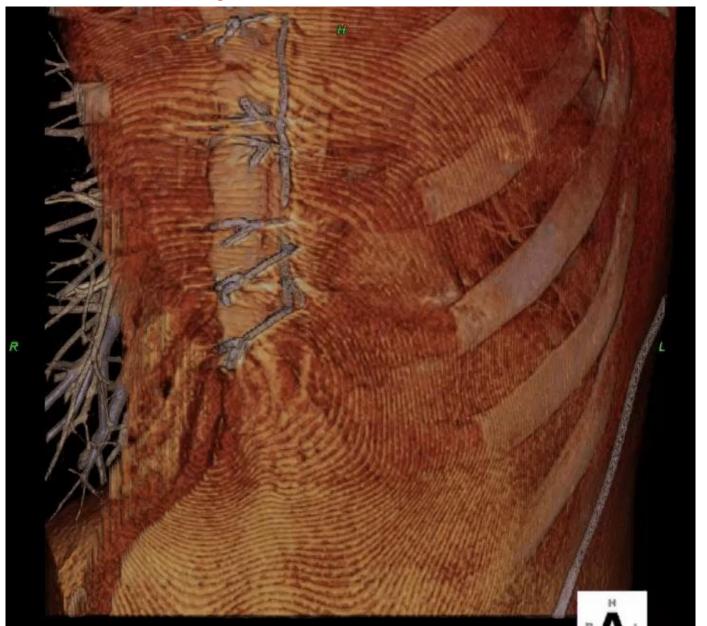


Multimodality Imaging to improve the procedure

Ventricular access site we need to be between the papillary muscles, not interfering with the MV subvalvular apparatus, preserving physiology, reducing skin incision, reducing risk of coronary injuries, preserving the best symmetry between chords...



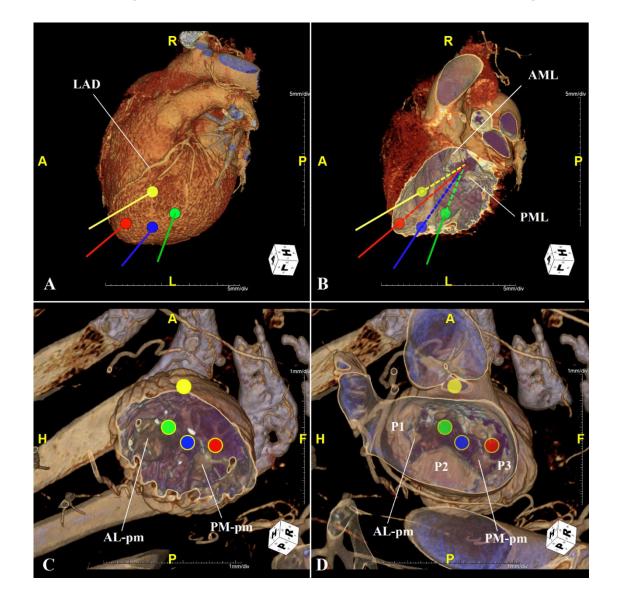
Preoperative 4D CTA







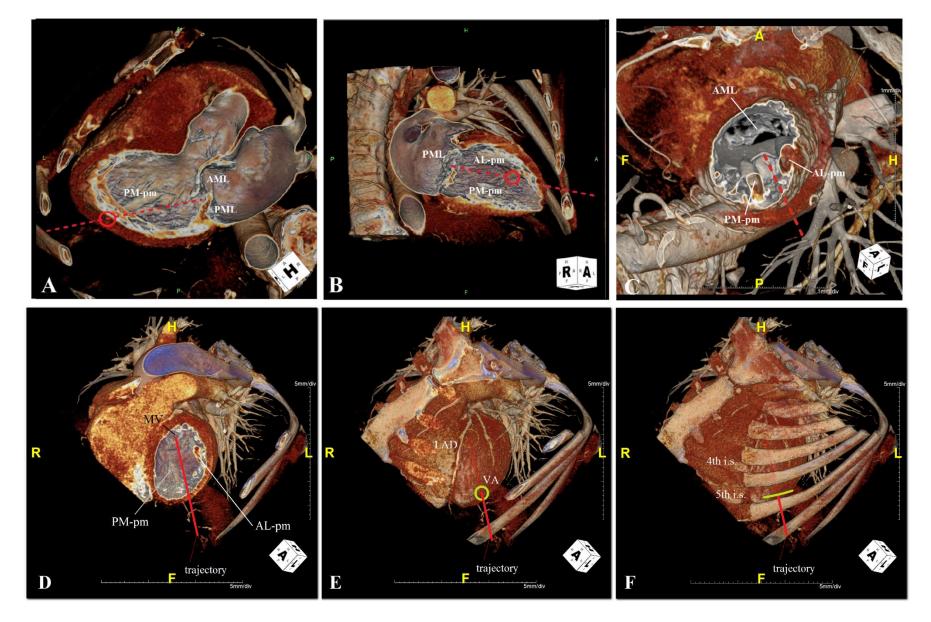
Ventricular access sites for Transapical NeoChord Repair





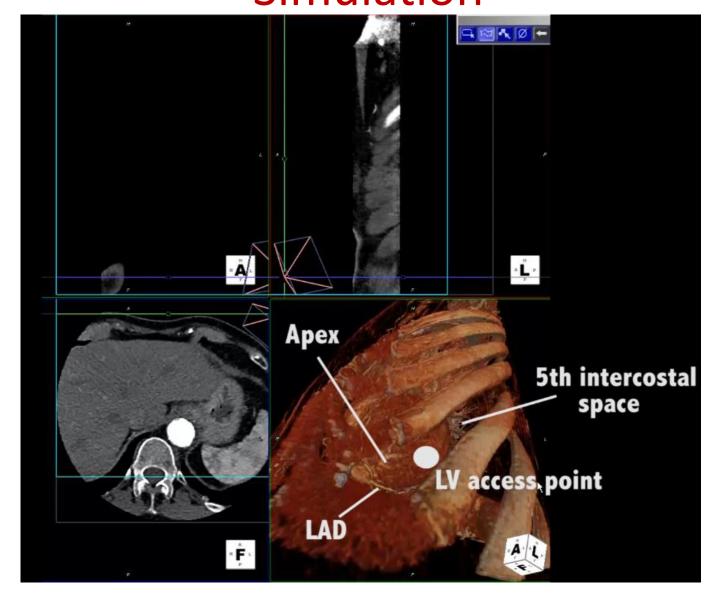


Ideal Ventricular access site





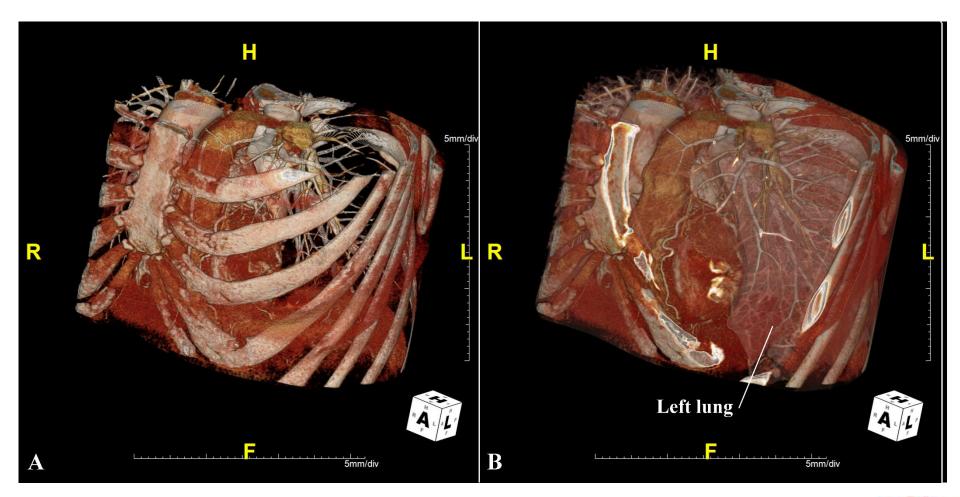
NeoChord device Trajectory 4D CTA Simulation





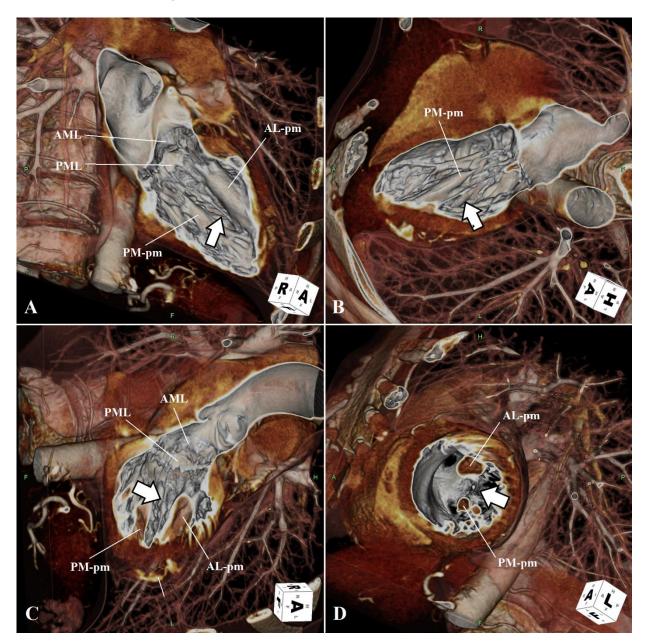


Postoperative Ventricular access site



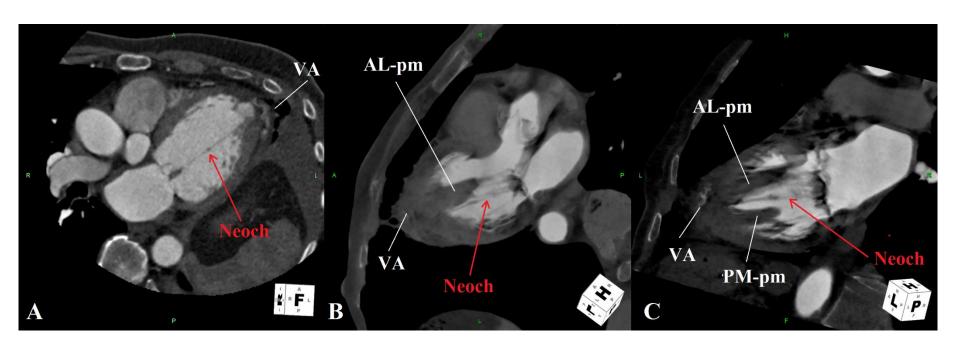






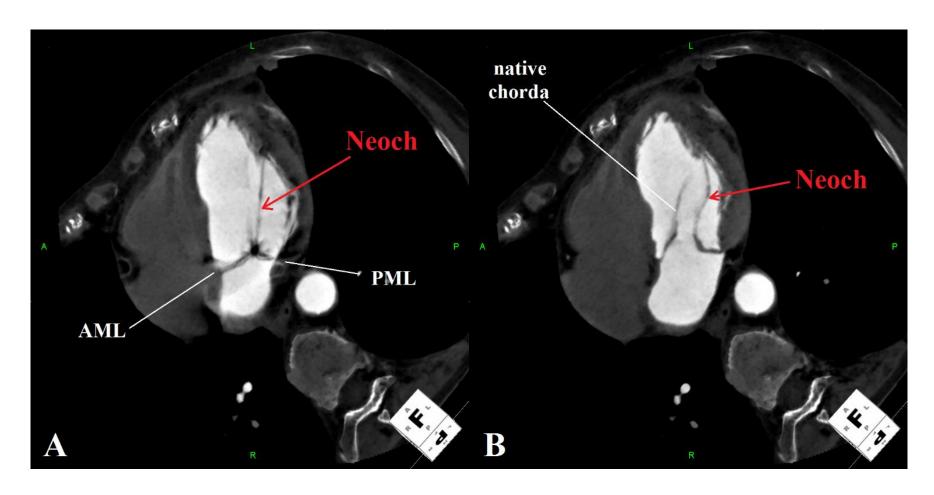






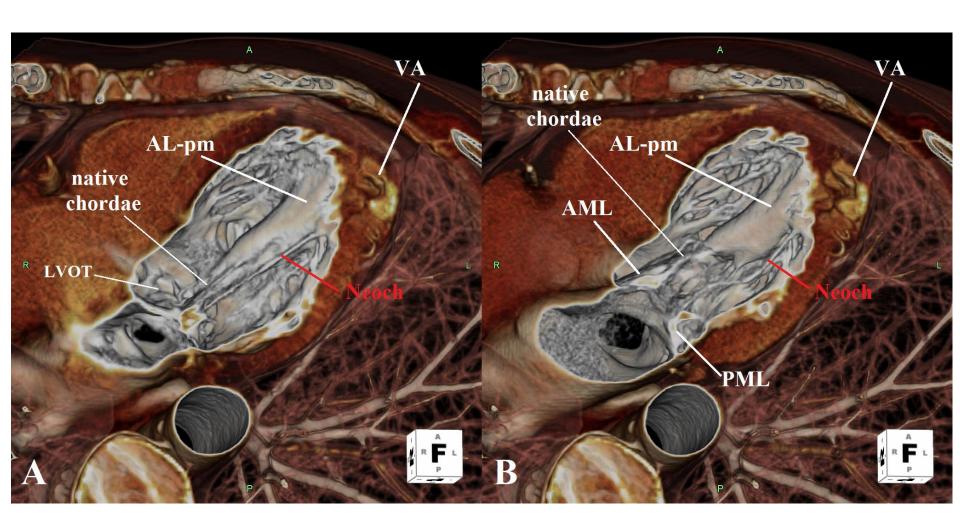












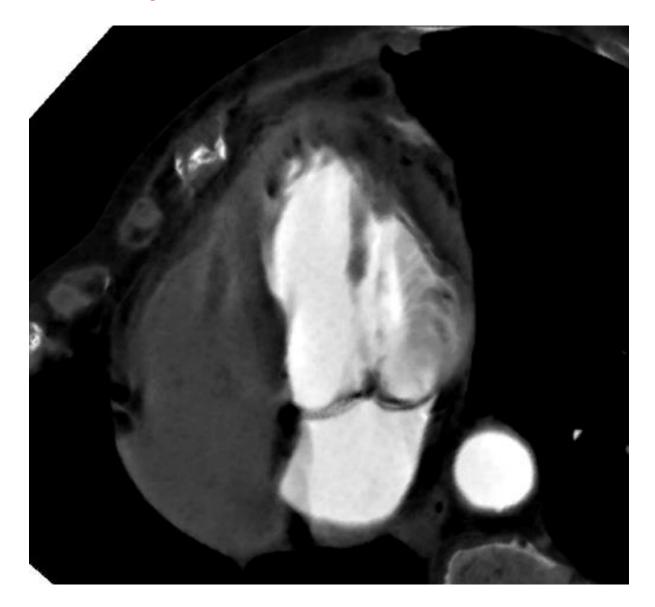








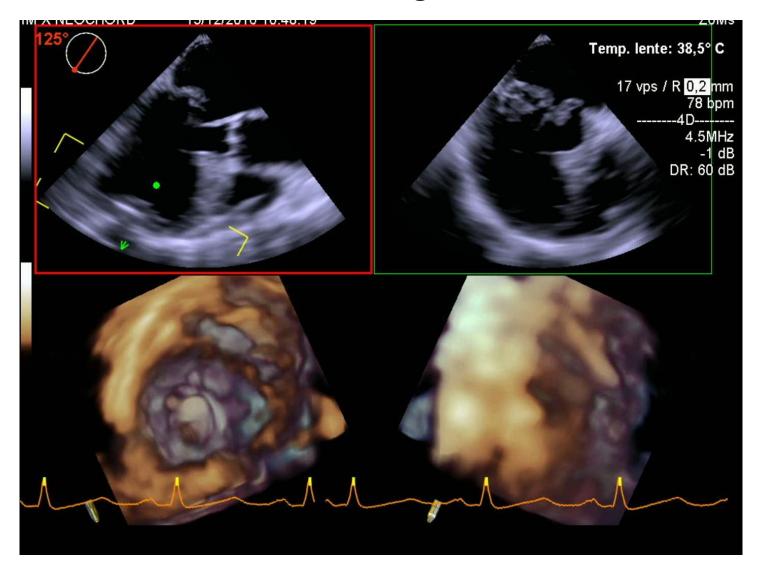








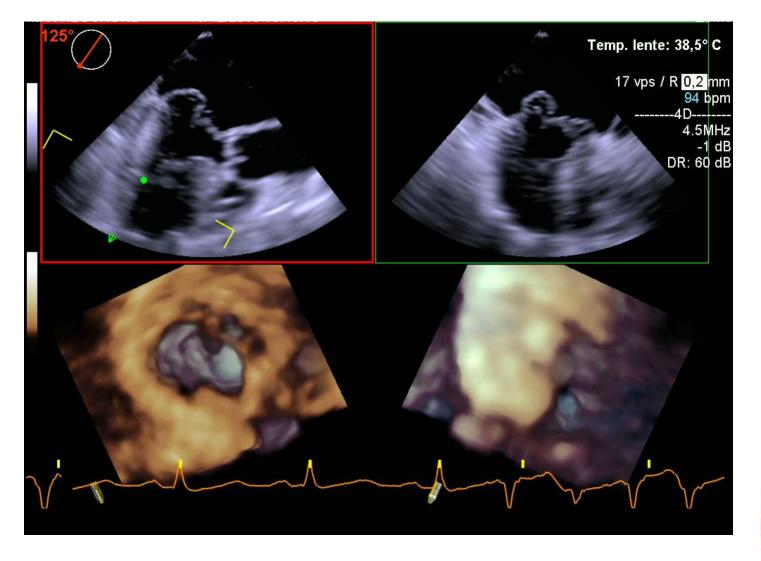
Central Finger Test







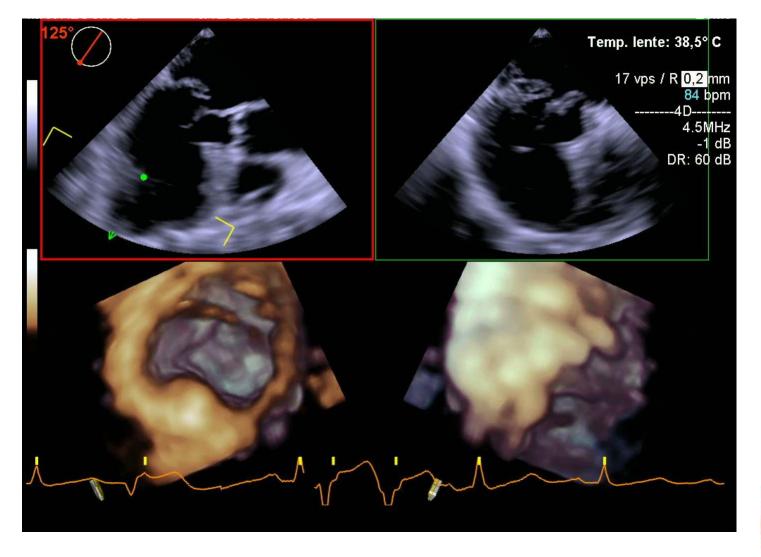
Posterior Finger test







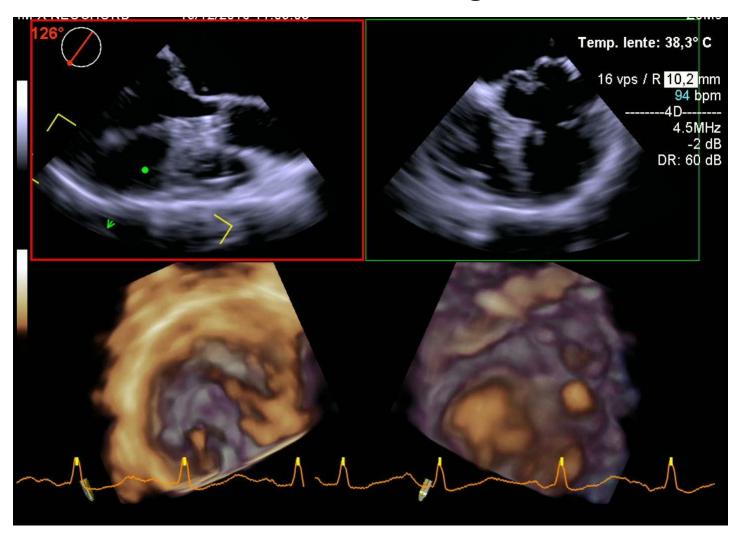
Anterior Finger Test







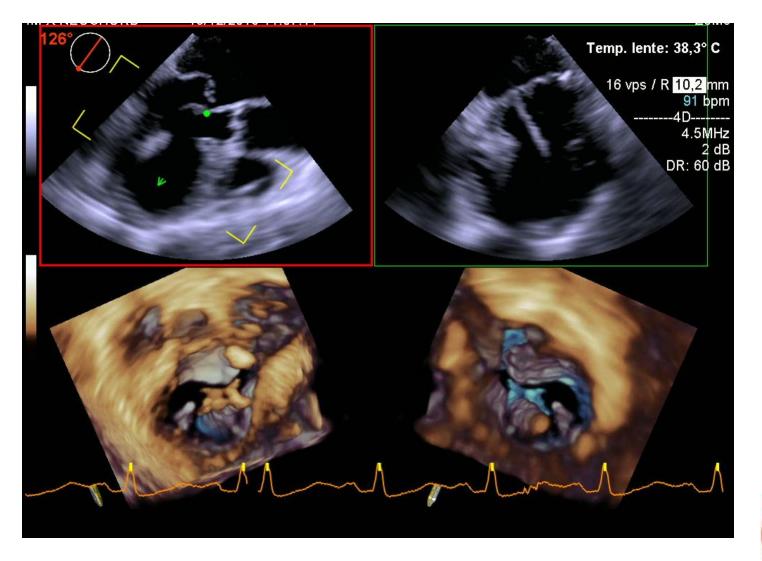
Ventricular navigation







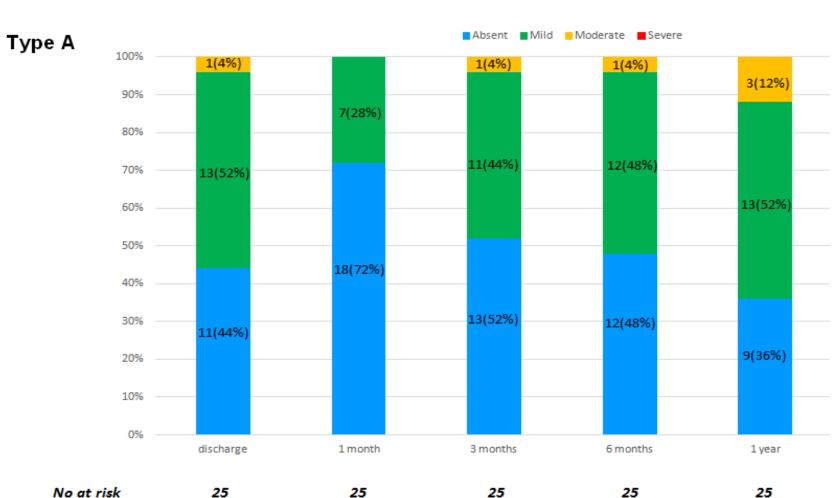
Ventricular Navigation and MV crossing







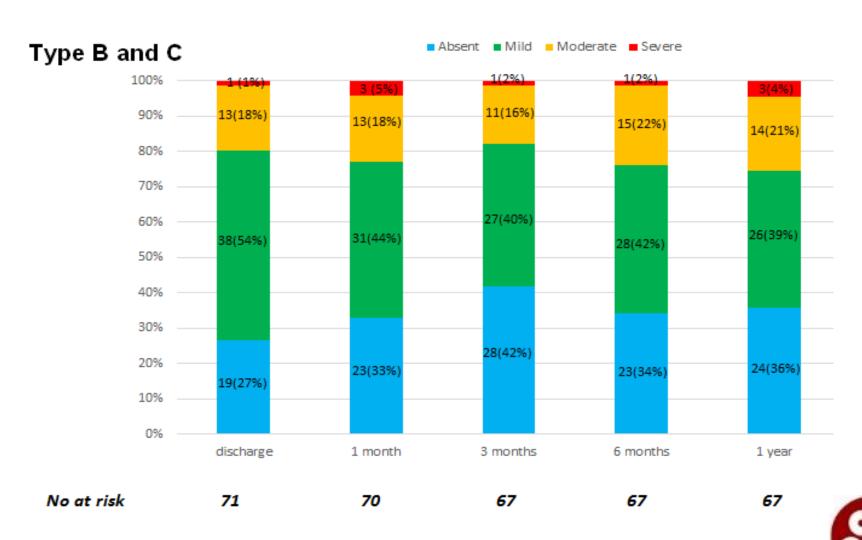
1-year results of Isolated Central posterior flail/prolapse



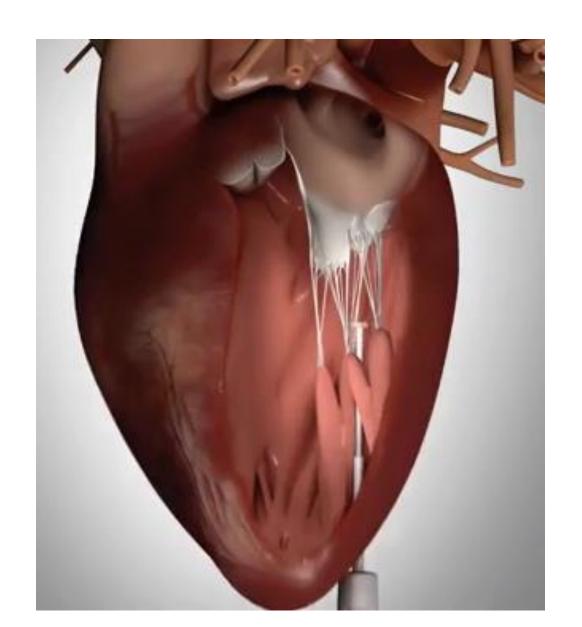




1-year results of complex MV

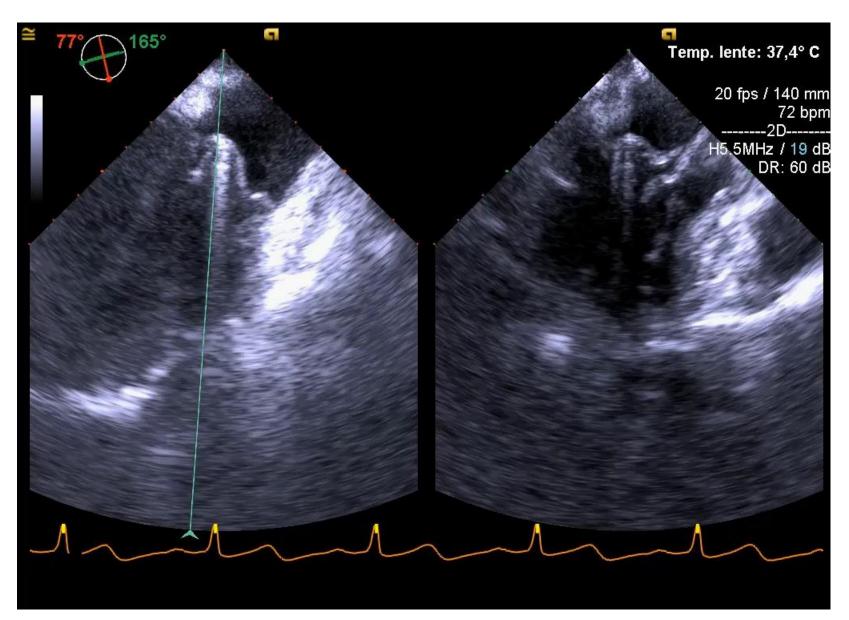






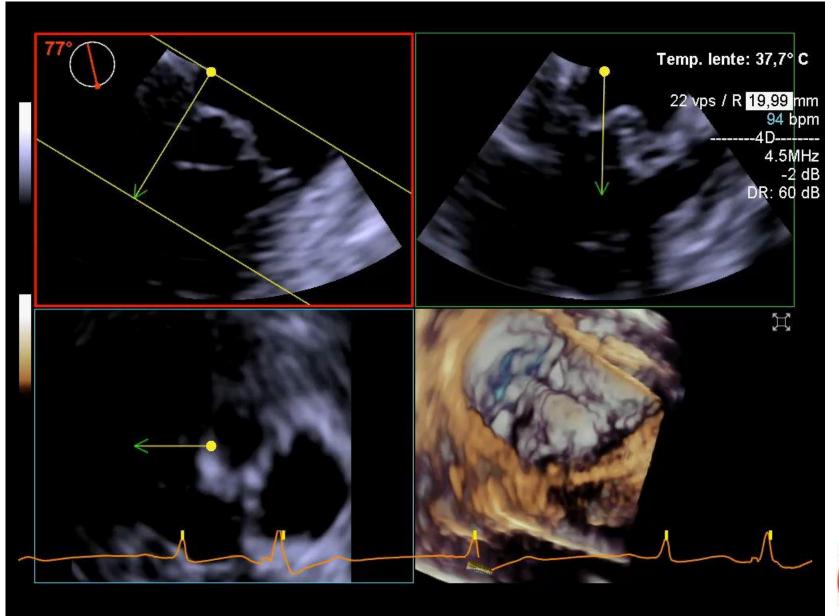






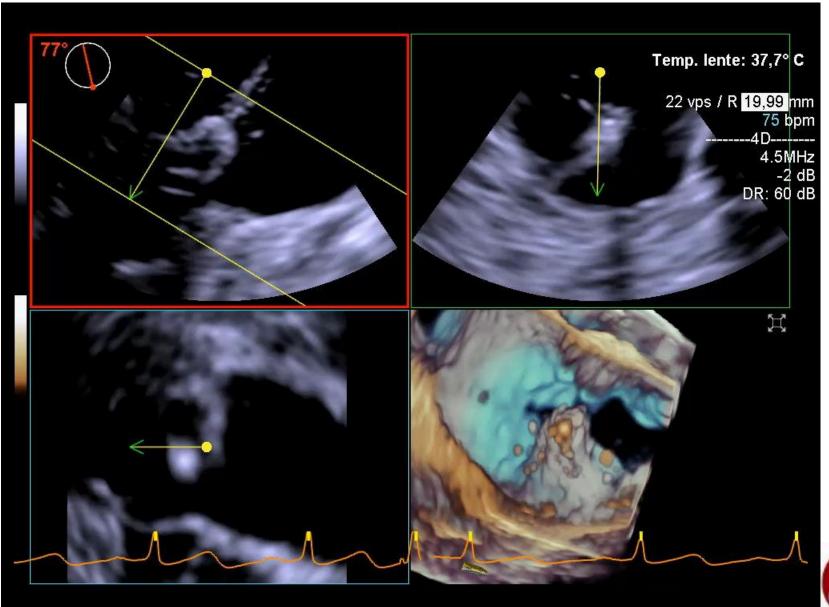






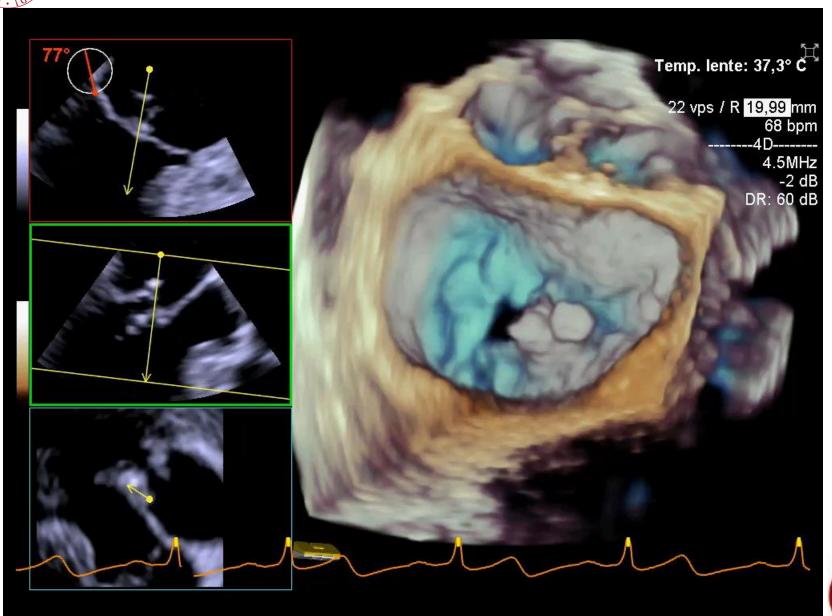






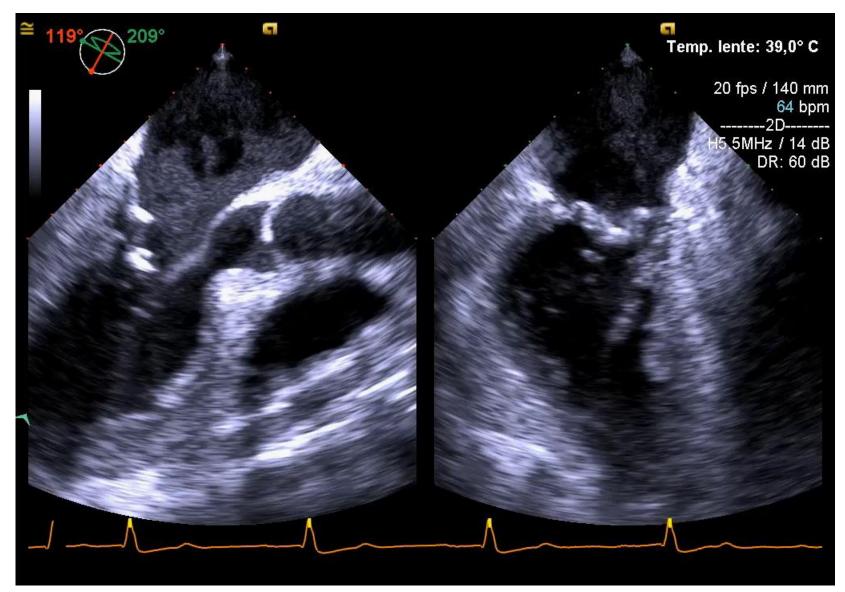






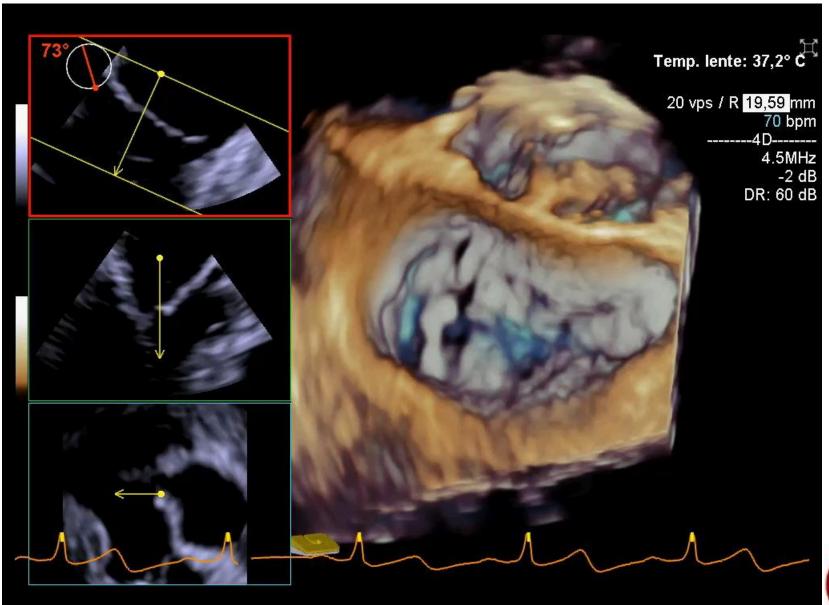






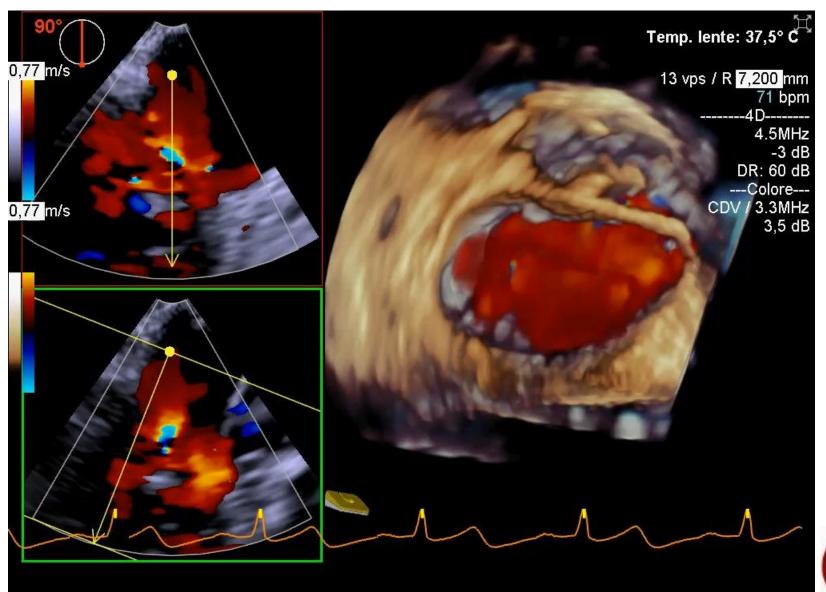








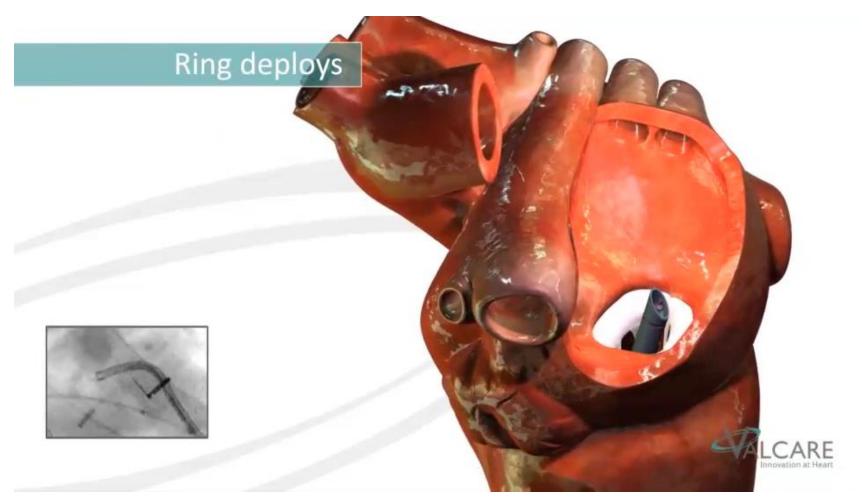








Amend Annuloplasty Repair

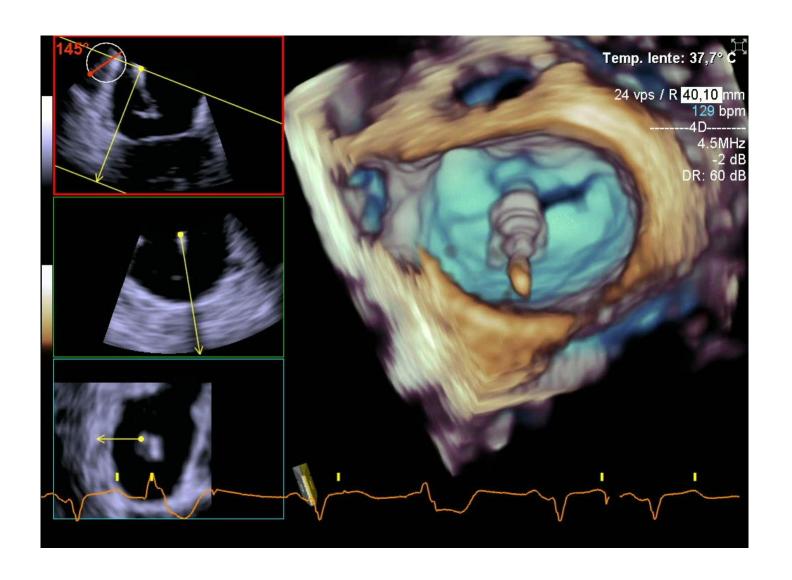






Amend Annuloplasty Repair

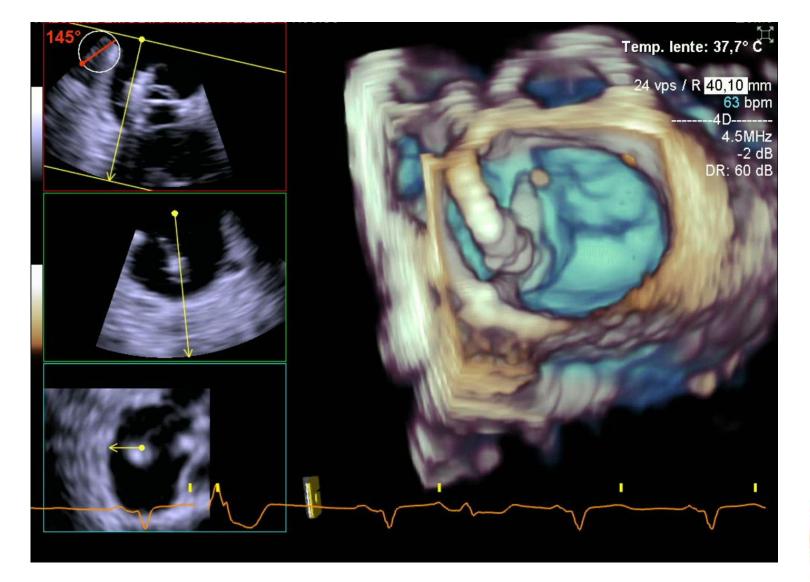
Ring is unsheathed







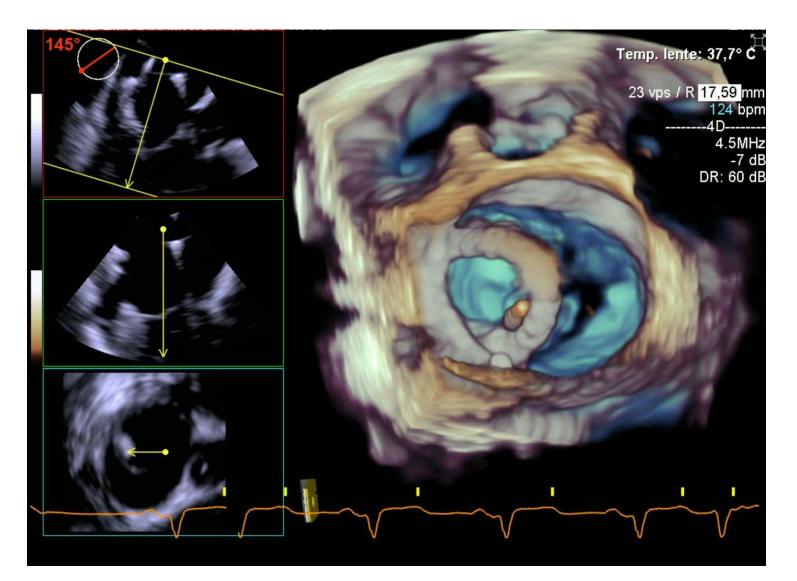
Ring is unsheathed







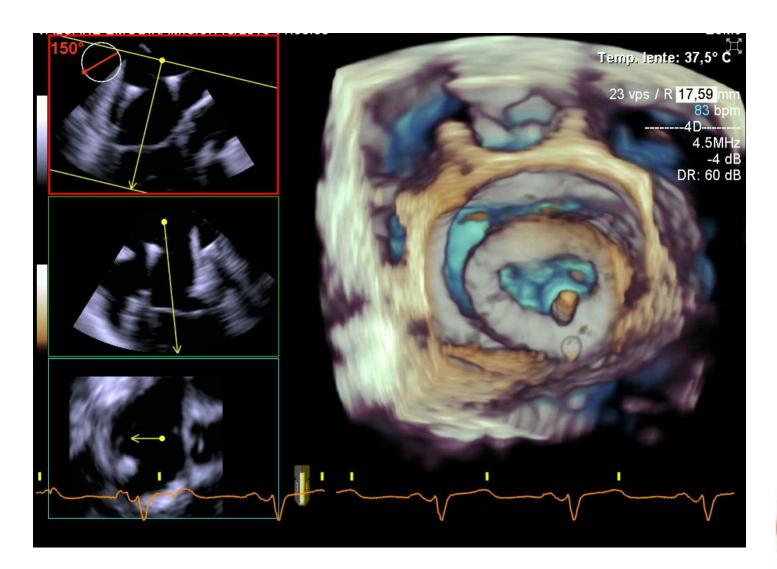
Ring is unsheathed







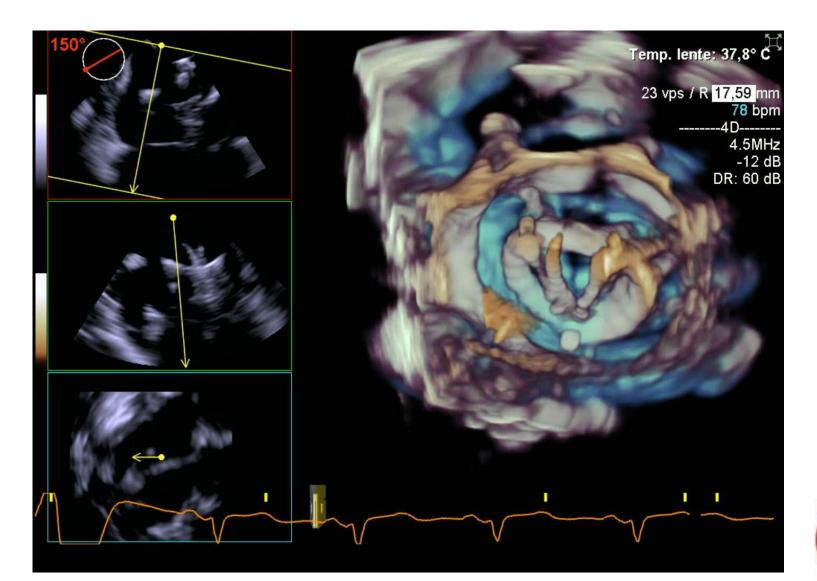
D shape regained







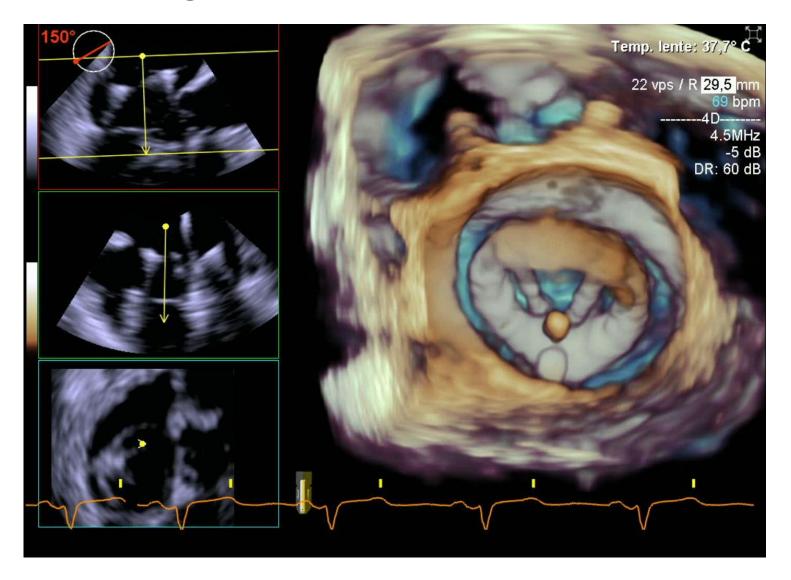
Stabilizing tool unsheathed







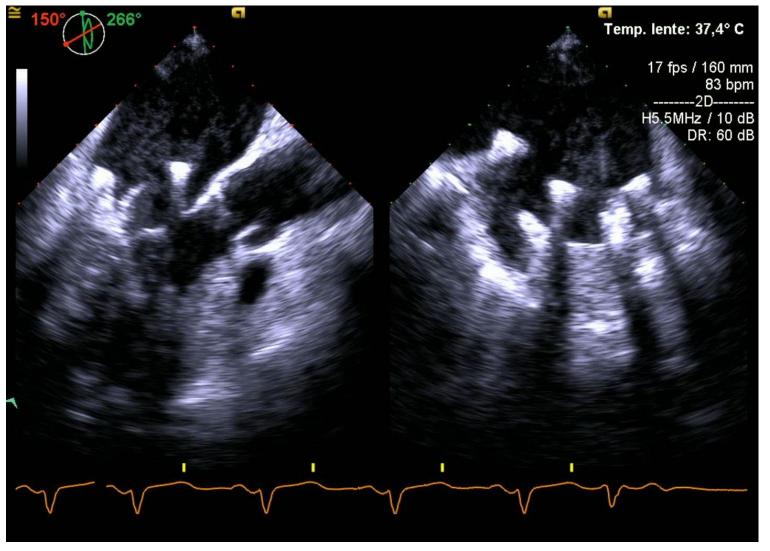
Ring orientation in the atrium







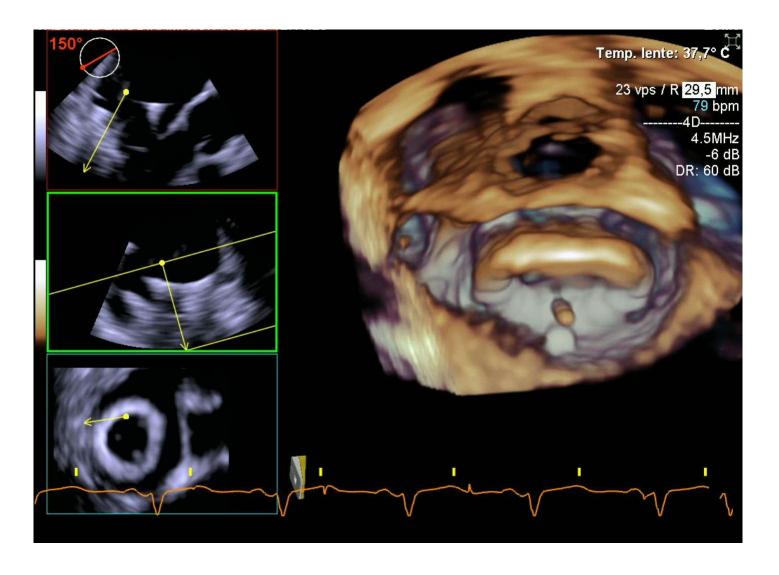
Creating ring to posterior annulus Intimate contact







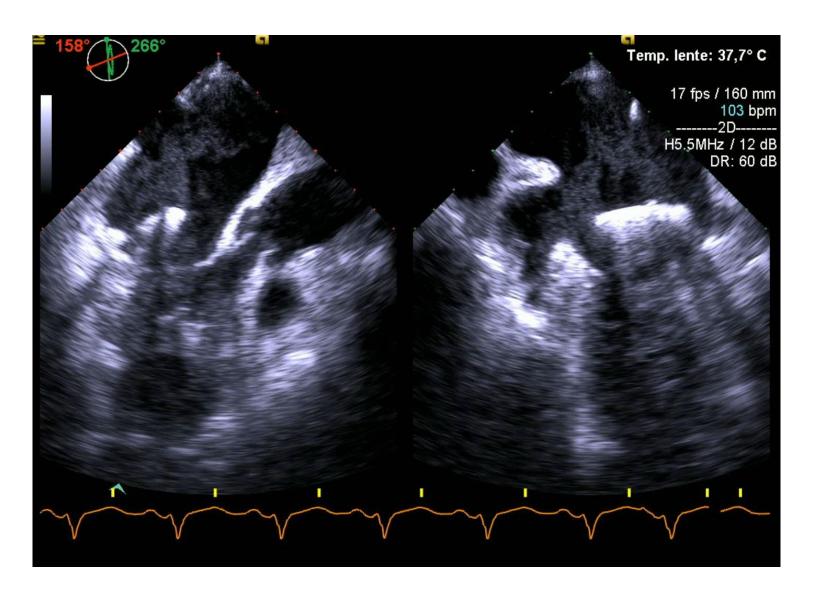
Posterior positioning







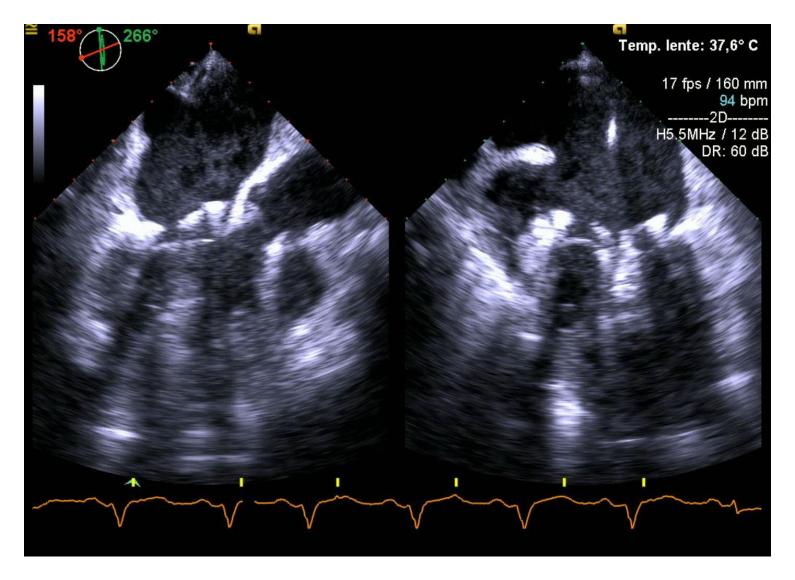
Moving the ring anteriorly







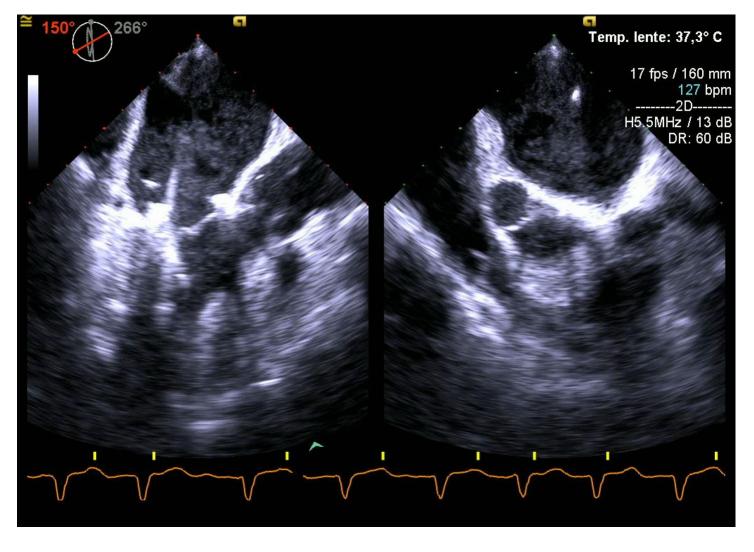
Moving the ring anteriorly







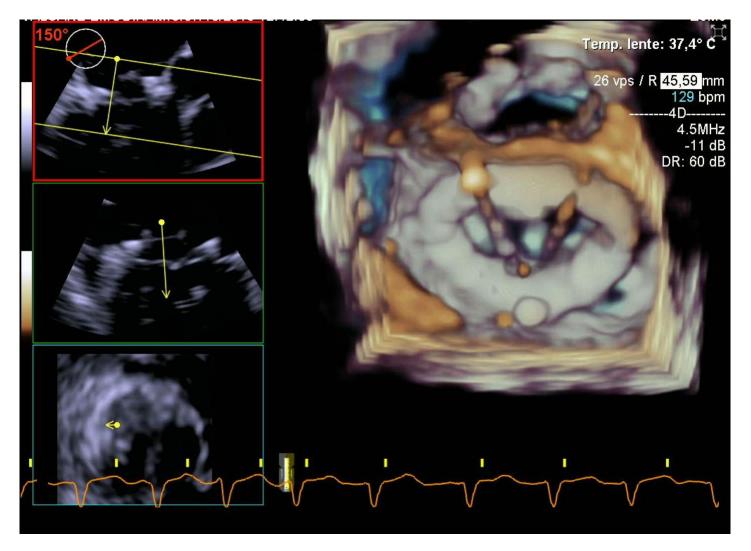
Moving the ring anteriorly







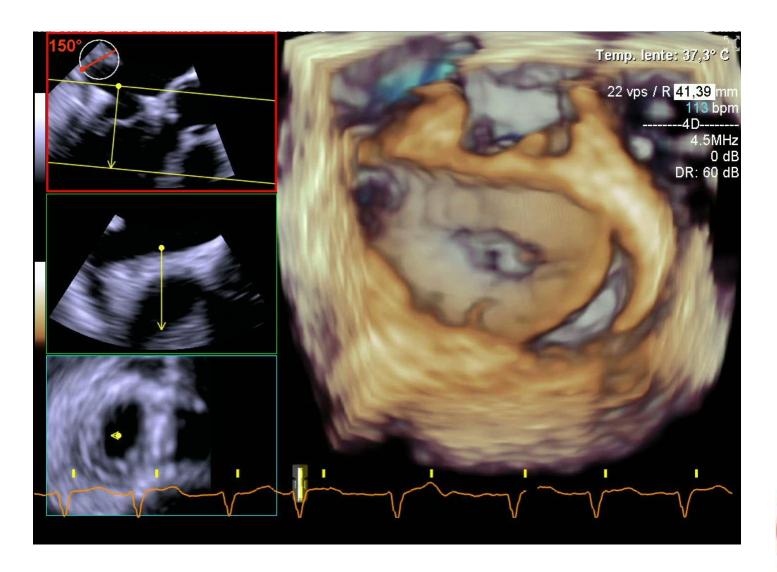
Fine adjustment of the Stabilizing tool to improve anterior contact







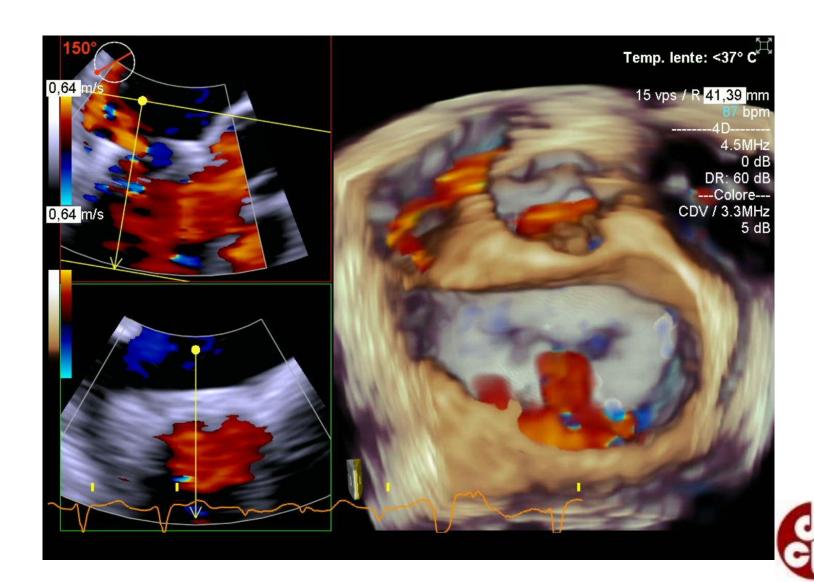
Final 3D assessment







Final 3D color Doppler assessment

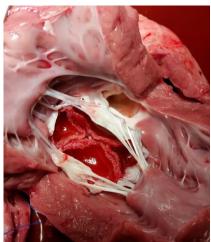




Corona TMVR

- D-shaped self-expanding stent-based valve
- 4-Leaflet concept
- Uses AMEND Ring as landing zone
 - Preservation of native geometry
 - No PVL
 - Low profile with minimal protrusion to LV and LA







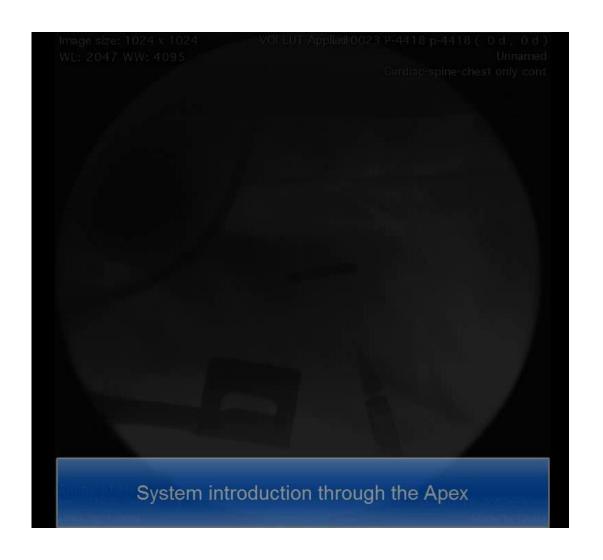






Corona Mitral Valve Replacement

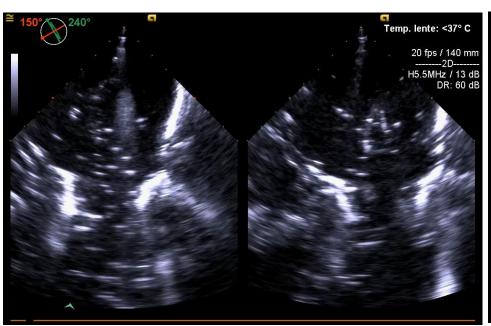
Amend Ring Implanted

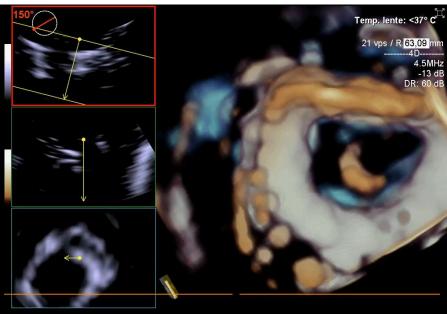






Tiara TMVR

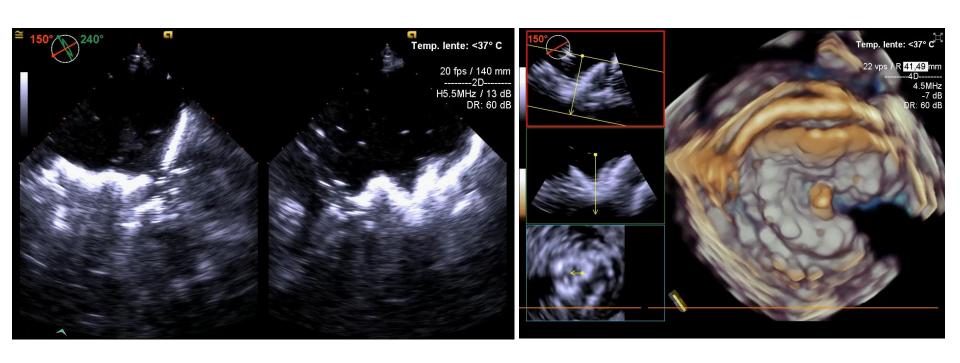








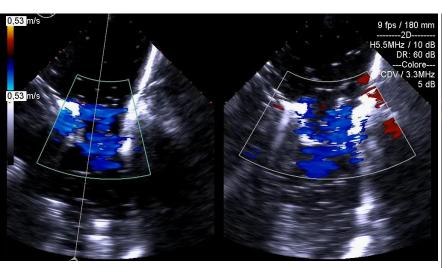
Tiara TMVR

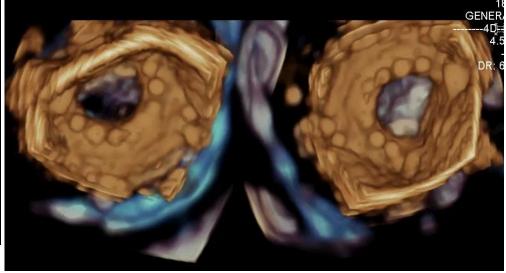






Tiara TMVR









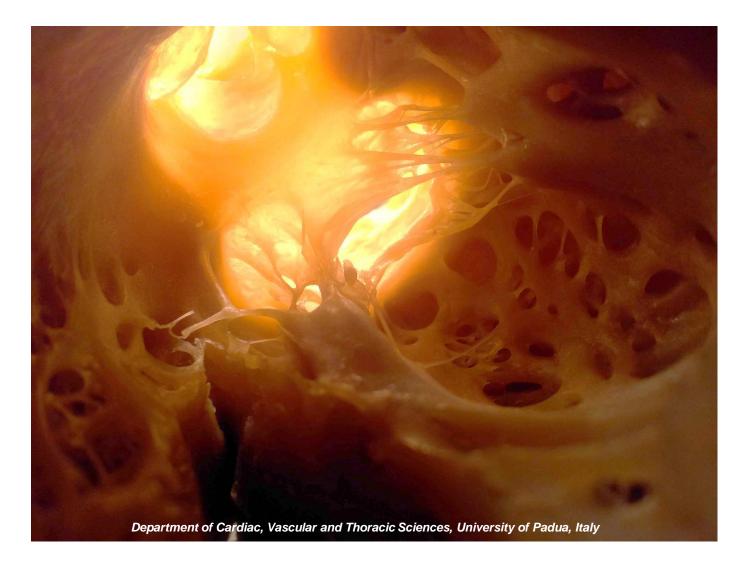
Conclusion

The full integration of the REAL TIME 3D ECHOCARDIOGRAPHY with Interventional procedures is mandatory today in order to improve the clinical outcomes









andrea.colli@unipd.it

