



Tools for treatment of carotid stenosis

Tools , Dilatation catheters

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Theater , equipment ,patient preparation ,etc

- Radiological equipment : An angiography suite is preferable to an operating room
- An EKG and an intra-arterial pressure monitoring are indispensable .Invasive monitoring is fundamental
- Patient: Head immobilized and a squeeze toy to monitor the consciousness
- The possibility to perform road mapping is useful to reduce contrast medium injection
- The possibility to perform temporary pacing : exceptional need

Injection & Flushing equipment

- Media-valve line with manifolds to avoid air bubbles and reduce quantity of contrast medium
- Flushing bags of heparinized serum

Introducers

➤ For femoral approach

■ With Guiding Catheter

- Standard length (12cm) ,7 or 8 F
- Long sheath (23 cm) for diseased iliac

■ With coaxial sheath placement

- Cook,Terumo ,Cordis Sheath
- 80 to 90 cm , 5 or 6 or 7 F

➤ For brachial approach

■ Long sheath introducers

➤ For Direct puncture

■ Short introducers (6 to 8cm) with markers

GUIDING CATHETERS

➤ SIZE

- 90 CM - 100 CM
- 8F 0.086" - 0.088"
2.20 MM - 2.25 MM

➤ SHAPE

- MULTIPURPOSE
- OTHERS :
 - VERTEBRAL, ANGLED
 - BENTSON TYPE
 - More frequently HOCKEY STICK

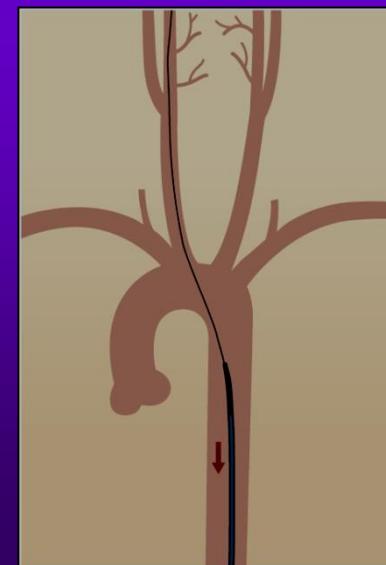
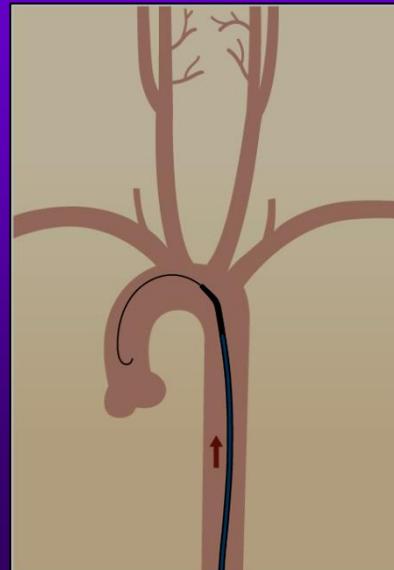
➤ LONG INTRODUCERS

- 80 CM - 90 CM
- 5 to 7F – 1.60 TO 2.30 MM

FLUSH

Guidewires (1)

- For Approach ,Exchange (femoral ,brachial, radial)
 - All are 0.035" peripheral guidewires
 - Steerable hydrophilic angled or straight GW
 - Extra stiff Rosen or Amplatz GW



Guidewires (2)

- For Angioplasty (Pre-dilatation, Buddy wire...)
 - All are 0.014" steerable coronary guidewires with different tips
 - Floppy tip : BM ,Traverse (Guidant)
 - Stiff tip: Cross it 100,200
 - Hydrophilic & soft tip : Pilot 50 , PT Graphx, Asahi
 - Hydrophilic& stiff: Pilot 150, PT stiff

Catheter selection

| Catheters | Left | Right |
|-----------------------------|------|-------|
| Simmons (sidewinder) | | |
| I | + | +++ |
| II | ++ | +++ |
| III | +++ | ++ |
| IV | +++ | ++ |
| Hinck/Berenstein | ++ | +++ |
| Headhunter | | |
| I | + | +++ |
| II | +++ | + |
| Bentson | | |
| JB1 | + | +++ |
| JB2 | +++ | ++ |
| JB3 | +++ | + |
| Mani | +++ | ++ |
| Vitek | ++ | +++ |



Catheter selection & width of the aorta

| CATHETERS SHAPE | AORTA TYPE | | |
|--------------------|------------|----------|-------|
| | SMALL | STANDARD | LARGE |
| SIMMONS | | | |
| I | +++ | | |
| II | + | +++ | + |
| III | | ++ | +++ |
| IV | | ++ | +++ |
| HINCK | + | + | + |
| HEADHUNTER | | | |
| I | | ++ | |
| II | | | ++ |
| BENTSON | | | |
| JB1 | + | ++ | |
| JB2 | | +++ | |
| JB3 | | | ++ |
| VITEK | + | +++ | + |



SELECTION OF THE CATHETERS ACCORDING TO THE APPROACH WAY

| | BRACHIAL | FEMORAL |
|-------------------|-----------------|----------------|
| SIMMONS | | |
| 1 | ● ● | ● |
| 2 | ● ● ● | ● ● ● |
| 3 | ● ● ● | ● ● ● |
| 4 | ● | ● ● ● |
| HINCK | ● | ● ● |
| HEADHUNTER | | |
| 1 | ● ● | ● ● |
| 3 | ● ● | ● ● |
| BENTSON | | |
| JB1 | ● ● | ● ● |
| JB2 | ● ● | ● ● |
| JB3 | ● ● | ● ● |

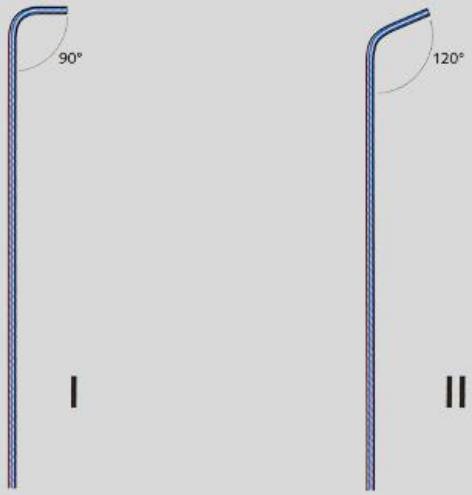


Figure 2. Angled catheters

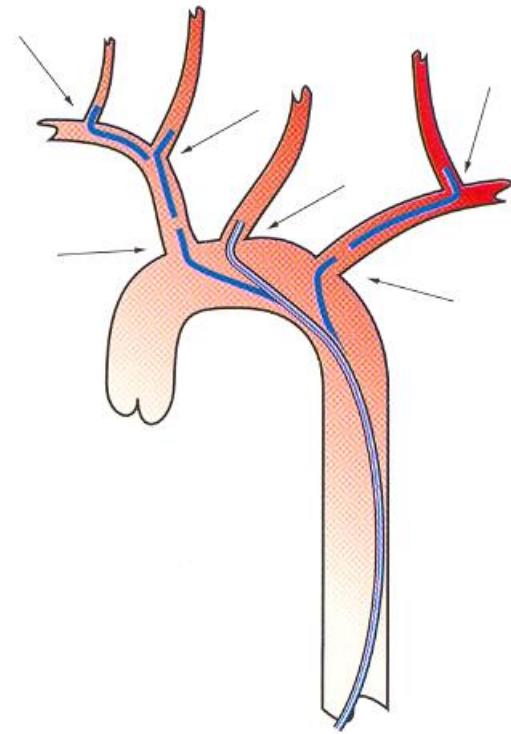


Figure 3. Use of angled catheters

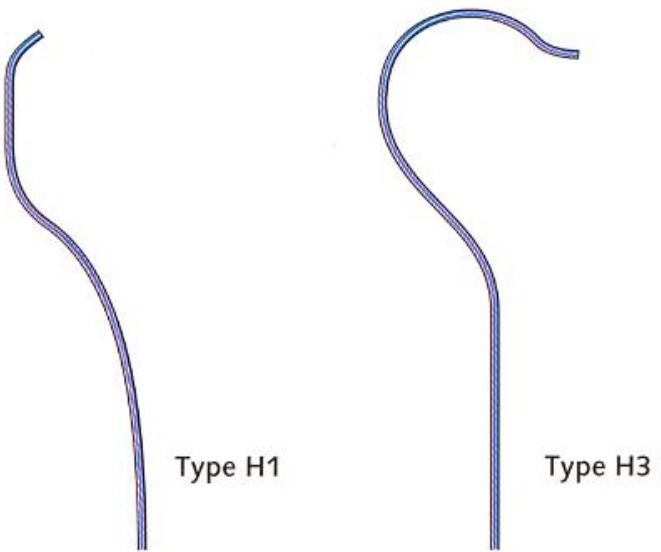


Figure 4. Head hunter

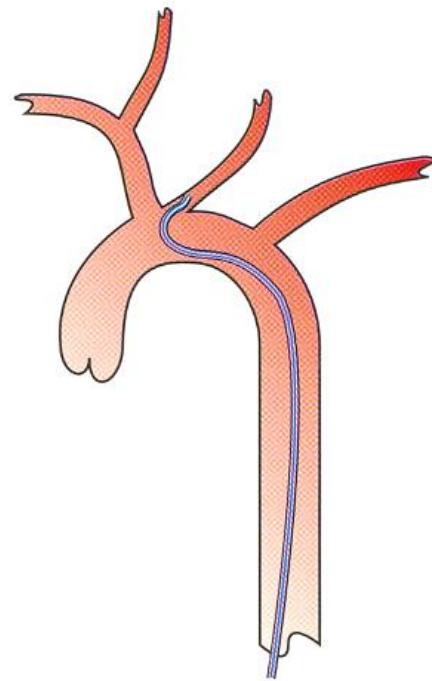


Figure 5. Use of head hunter type H3

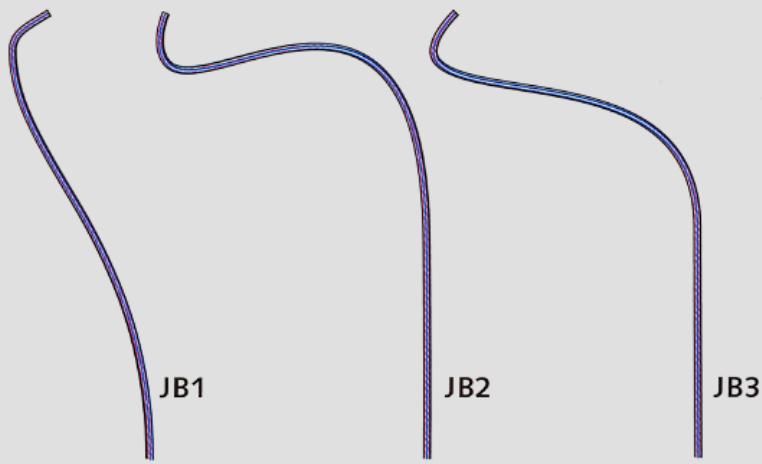


Figure 6. Bentson / Hannafee

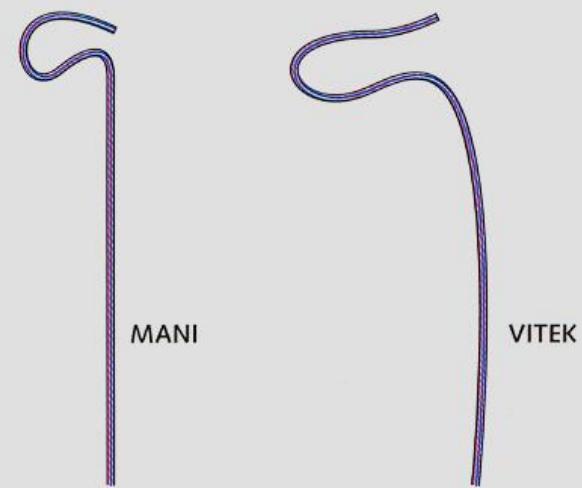


Figure 7. Mani / Vitek

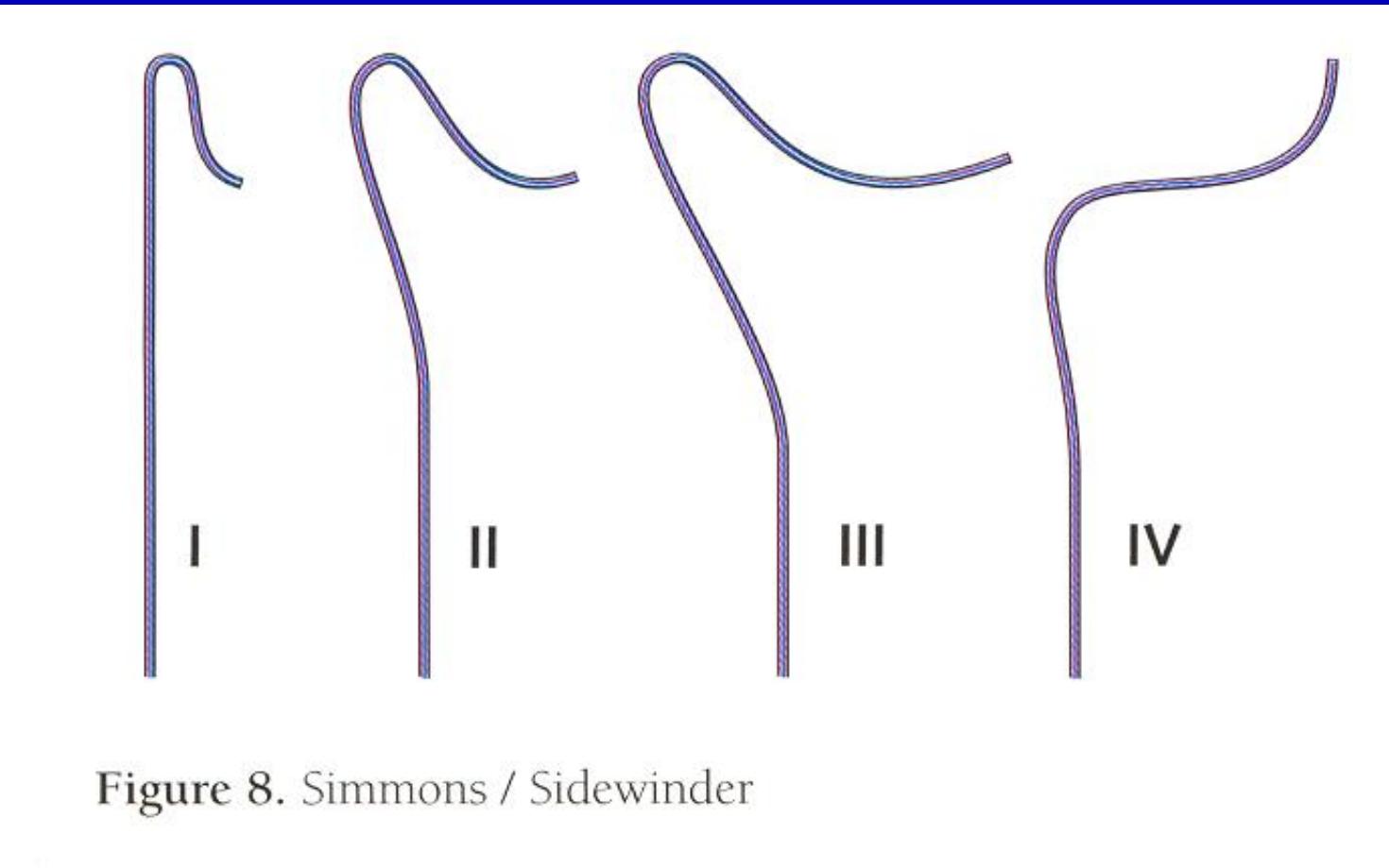
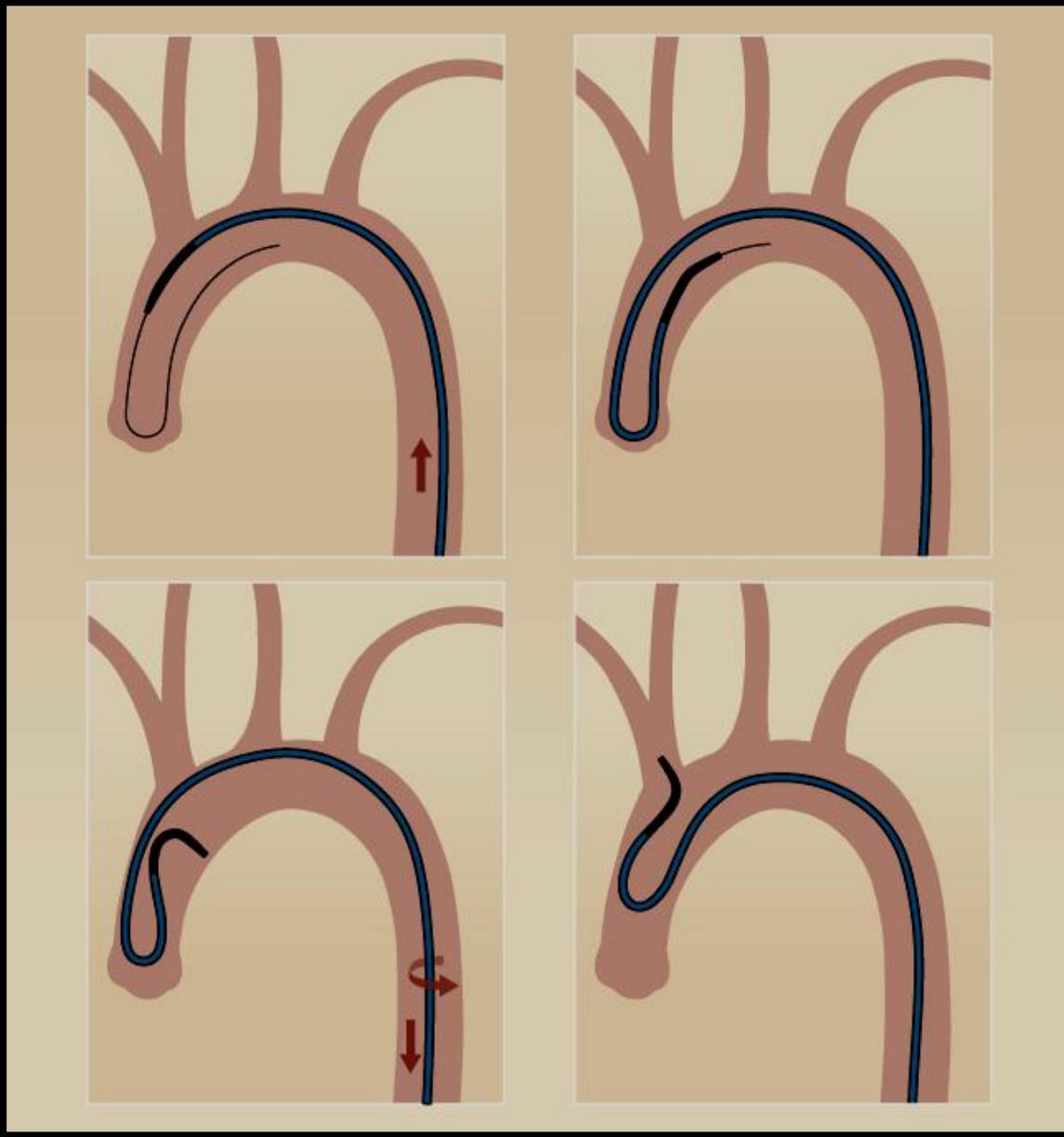


Figure 8. Simmons / Sidewinder



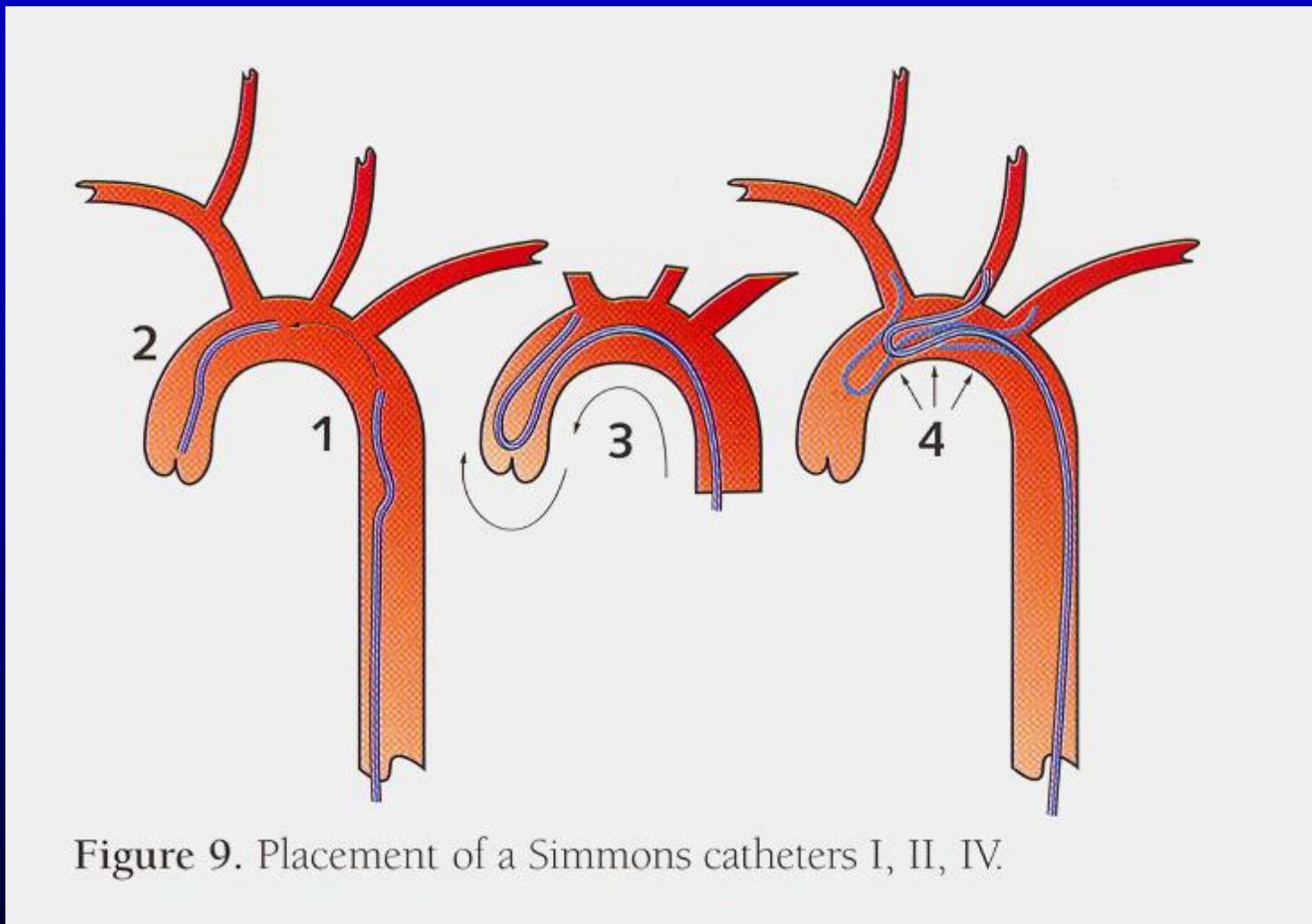


Figure 9. Placement of a Simmons catheters I, II, IV.

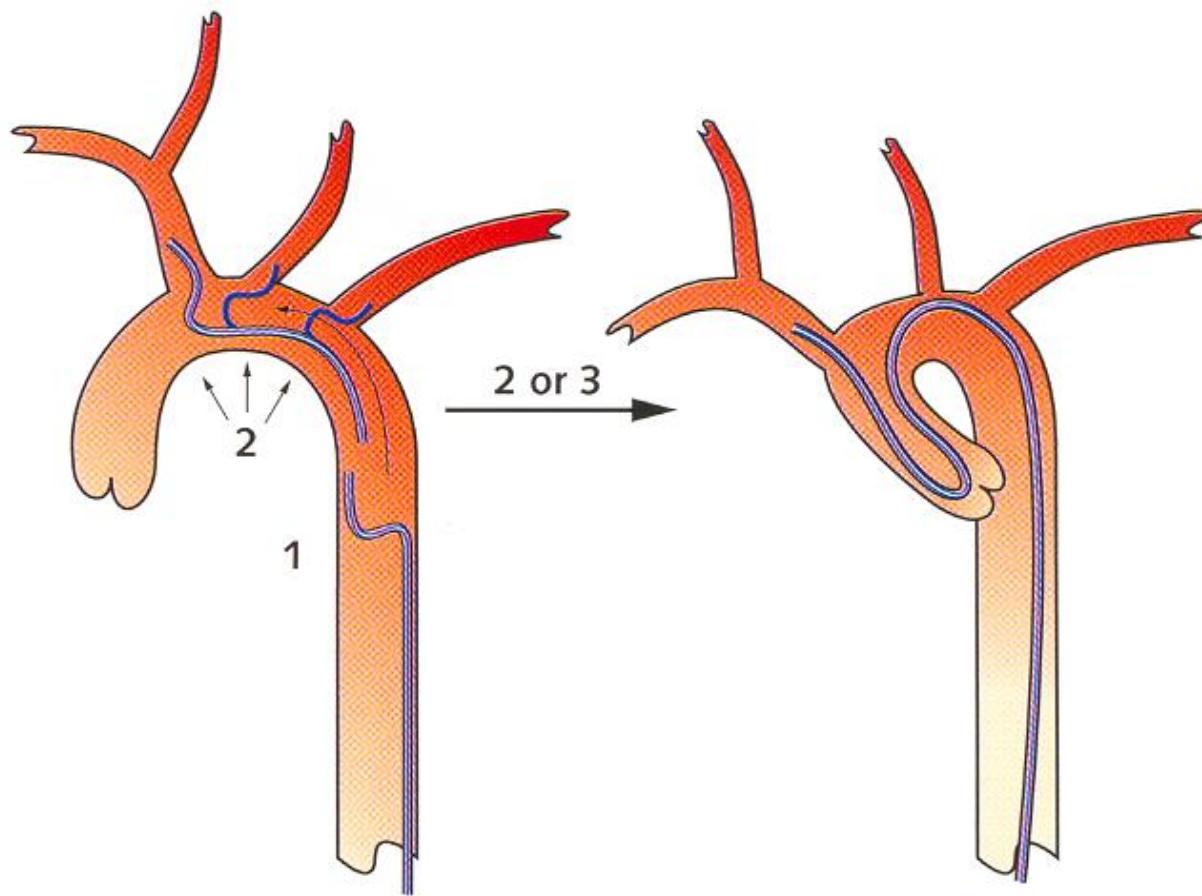


Figure 10. Use of Simmons type IV.

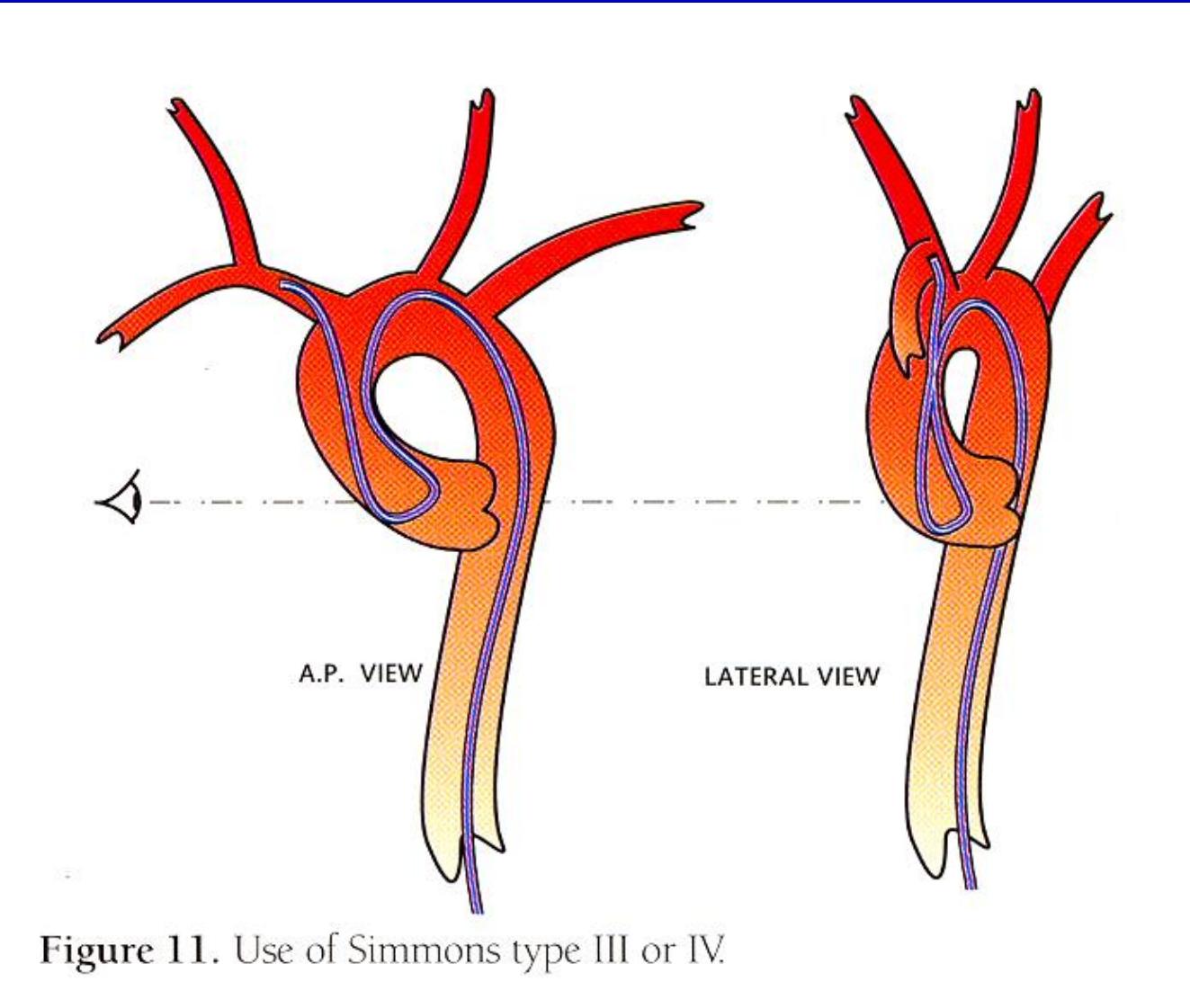


Figure 11. Use of Simmons type III or IV.

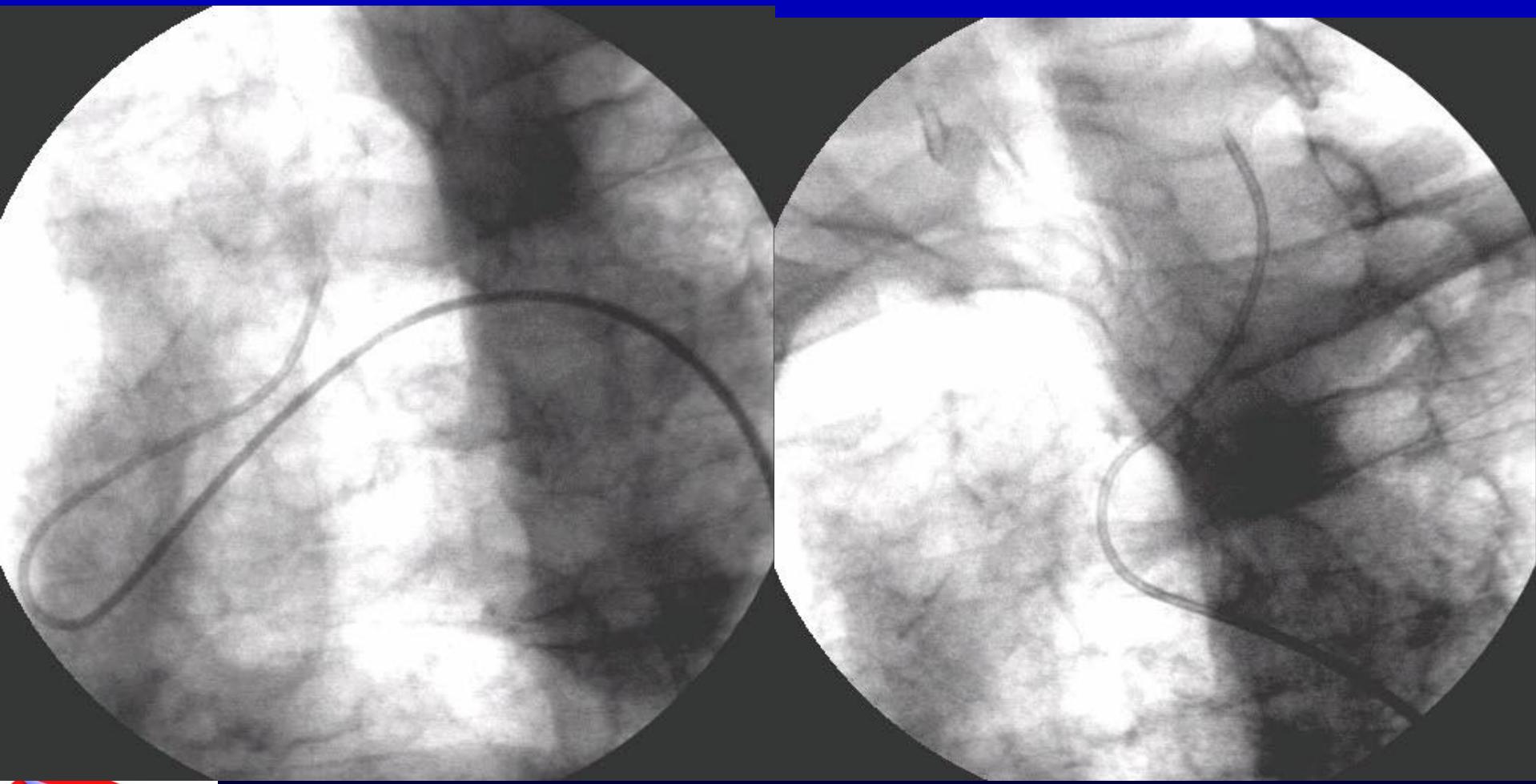
Balloons

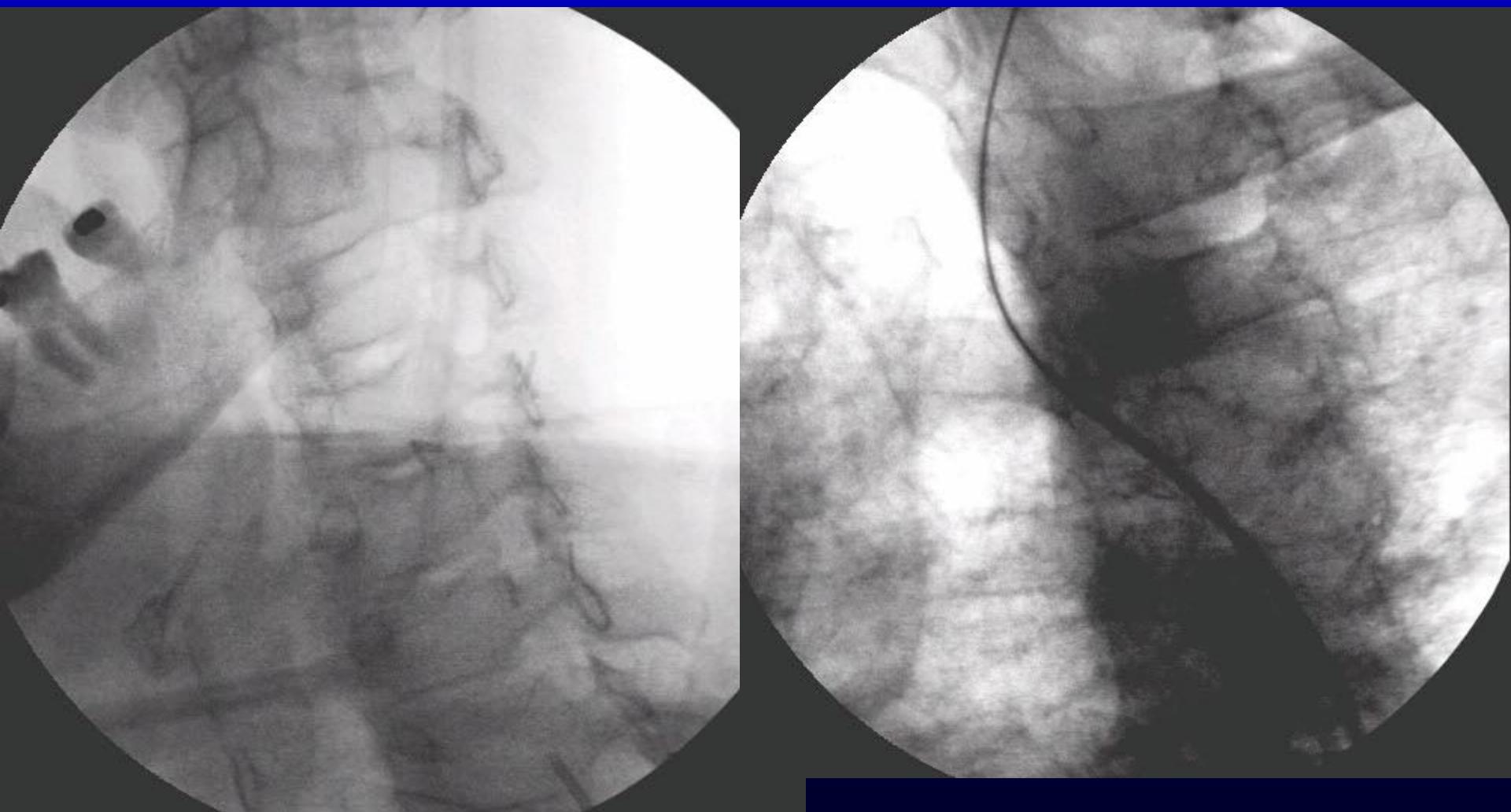
➤ For pre-dilatation :

- Long coronary monorail balloons .
- 3 or 4cm long . 3mm diameter

➤ For post-stenting dilatation:

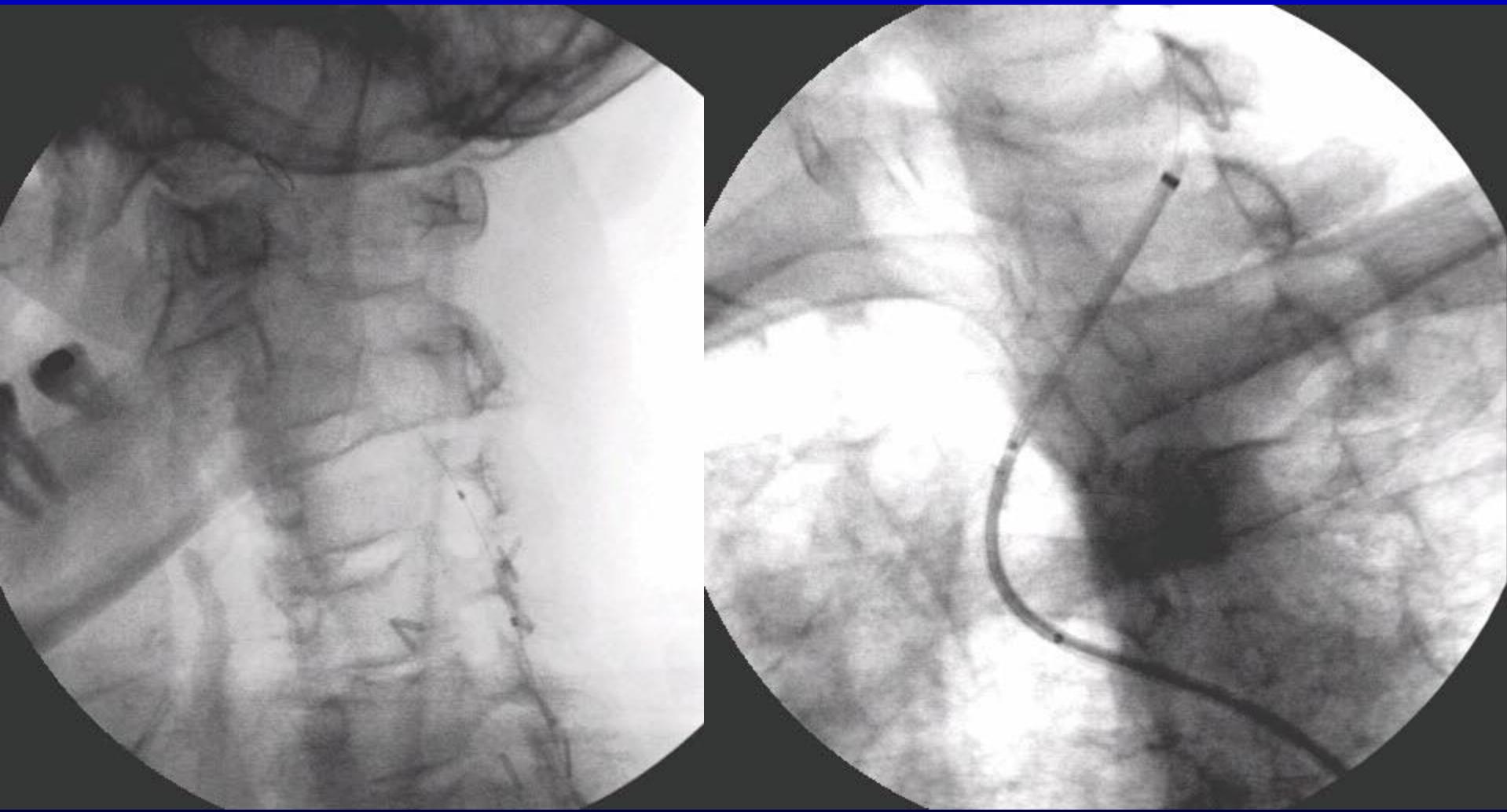
- Usually 5 mm X2cm monorail balloons
- Full deflation ,negative pressure to avoid in case of rupture gaseous emboli





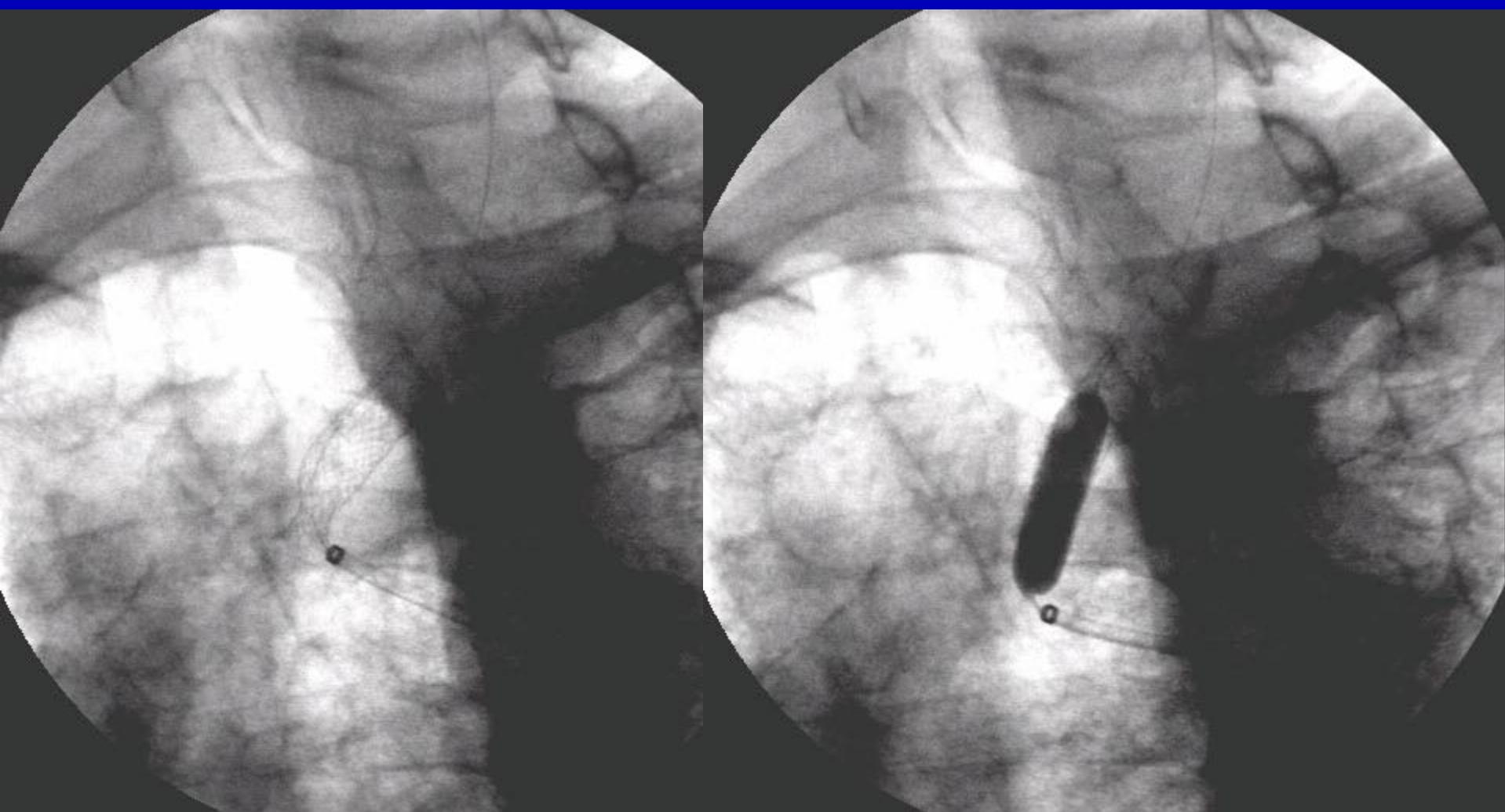
du Coeur et
des Vaisseaux

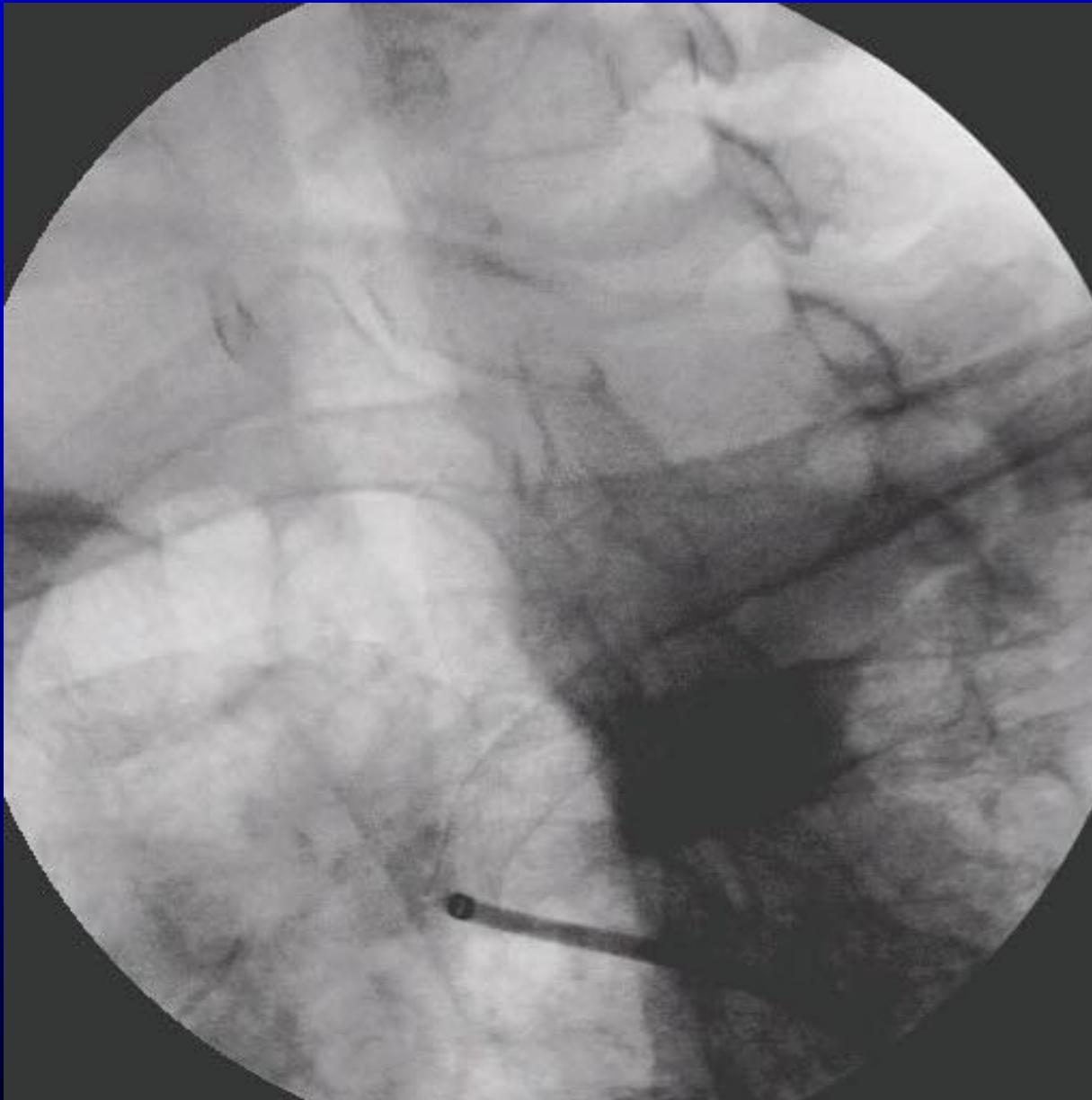
ILCV



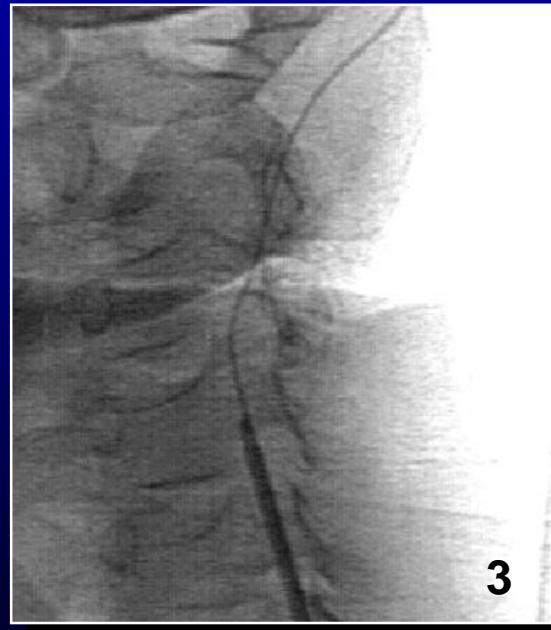
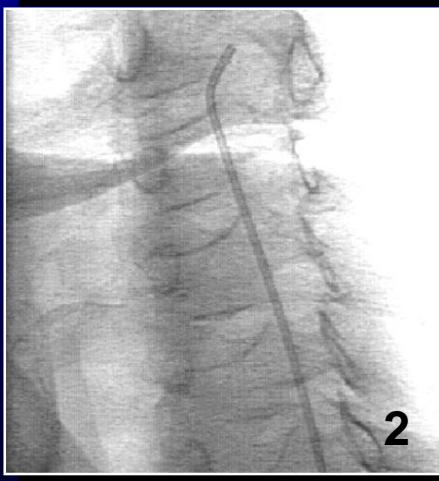
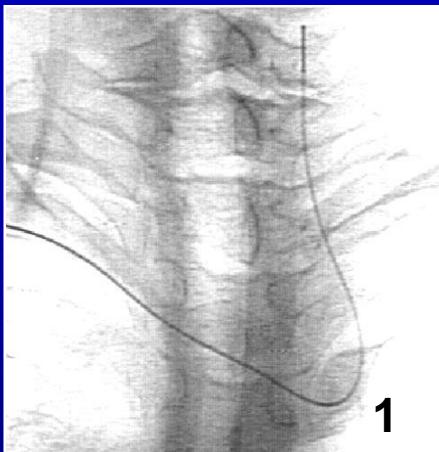




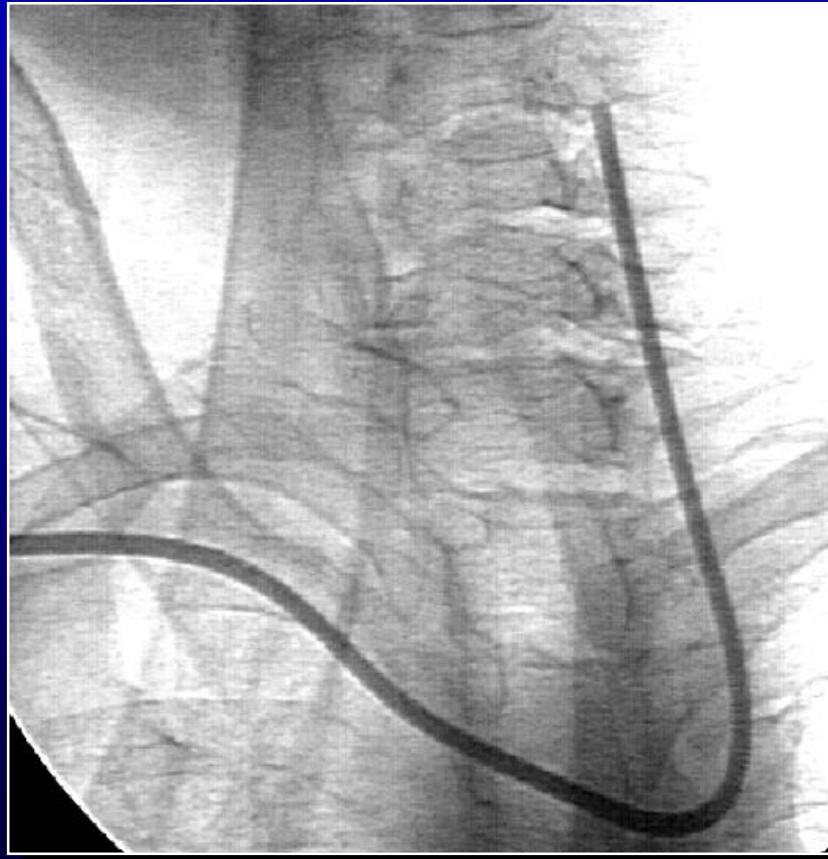




The different steps of carotid angioplasty using the brachial approach



Braided introducer



1

Diagnostic
Catheter
Brachial
Approach

e

Braided
Introducer
Sheath (80 cm)

2

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3

Left Internal Carotid Stenosis

4

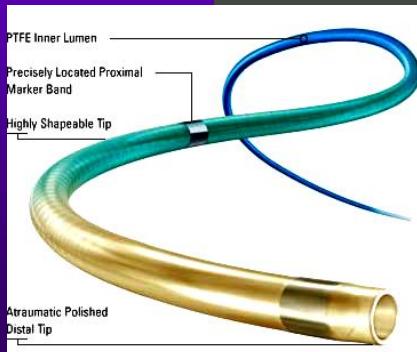


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Rescue devices

- Aspiration catheters: monorail 3F with vacuum syringe . 6F guiding compatible
 - Export catheter (Medtronic)
 - Rio catheter (Bsc)
- Microcatheters : embolisation ,thrombolytics infusion
 - Bsc : Renegade , Excelsior : Steam shapeable or pre-formed catheters
 - Cordis : Prowler select : preformed catheter
- Thrombectomy devices (Experimentation)
- Covered stents



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Available selective catheter configurations

