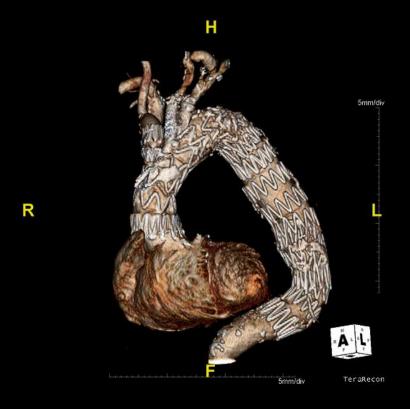
16™ INTERNATIONAL EXPERTS SYMPOSIUM CRITICAL ISSUES in aortic endografting 2012



May 24 & 25
LILLE, FRANCE

Bolton Branched Endograft

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Faculty Disclosure



W. Anthony Lee, MD

I disclose the following financial relationships:

Consultant for Cook, Bolton

Receive grant/research support from Cook

Paid speaker for Cook, Bolton

Relay Branched Thoracic Endograft

- Based on Relay NBS (Non Bare Stent) Plus platform
- Single internal branch (innominate)
- Intended for Zone 0
 deployment combined with
 extra-anatomic arch branch
 bypass(es): carotid-carotid(left subclavian





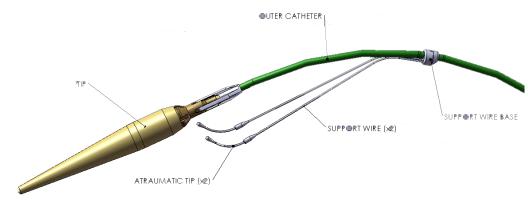




Relay NBS Plus

CRITICAL ISSUES
in aortic endografting 2012

- Improved arch conformation and prevent retroflex deployment
- Self-orienting







5 Cases to Date



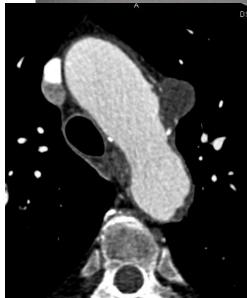
- Case 1 (Martinelli and Rampoldi)
- Case 2 (Castelli and Piffaretti)
- Case 3 (Bortone)
- Case 4 (Camparini)
- Case 5 (Cao)

Case 1

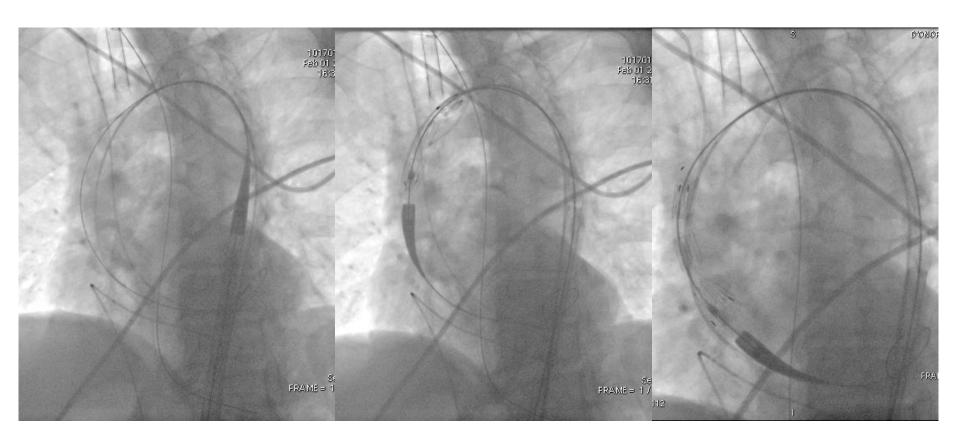
- 74 year old man
- Arch PAU
- PMH: COPD, diabetes, CRI

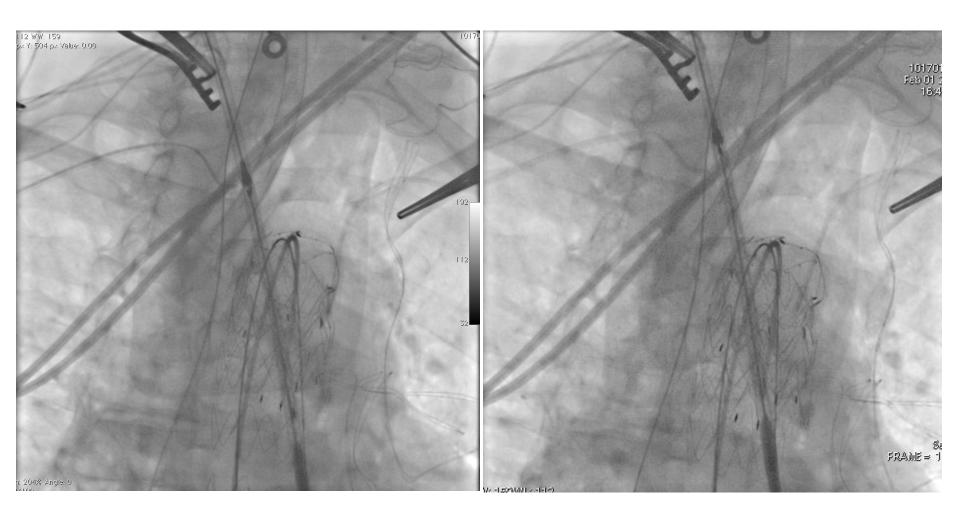


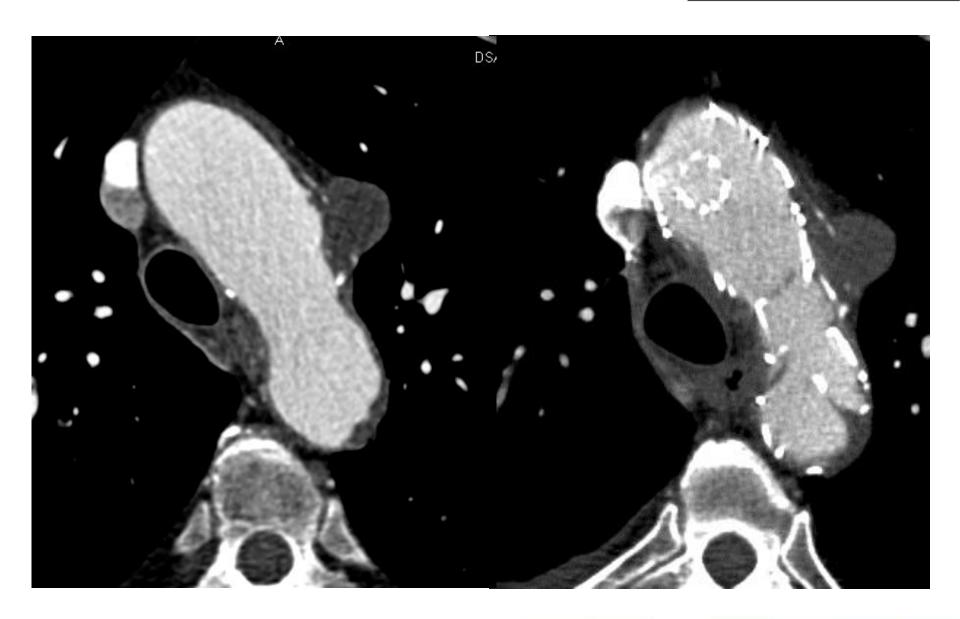




Courtesy of Drs. Martinelli and Rampoldi, Hospital Niguarda, Milan, Italy



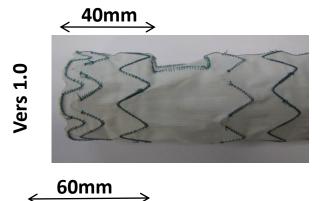




Modifications from 1st case

- Increased length of graft segment proximal to tunnel entrance/window.
 - Increase sealing / anchoring length
 - Increase length of tunnel for greater telescopic ability of the branch graft
- Implemented support stent in the tunnel segment





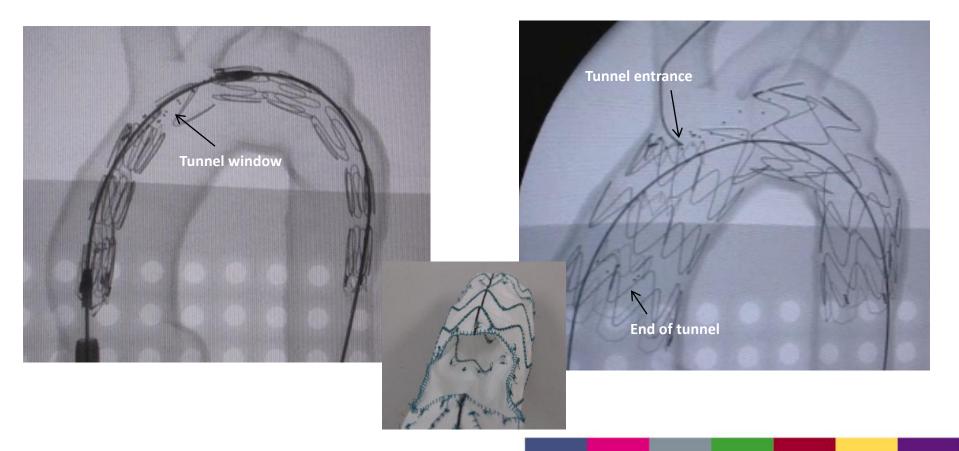
Support stent







Improved radiopaque marking of tunnel openings (prox/dist)



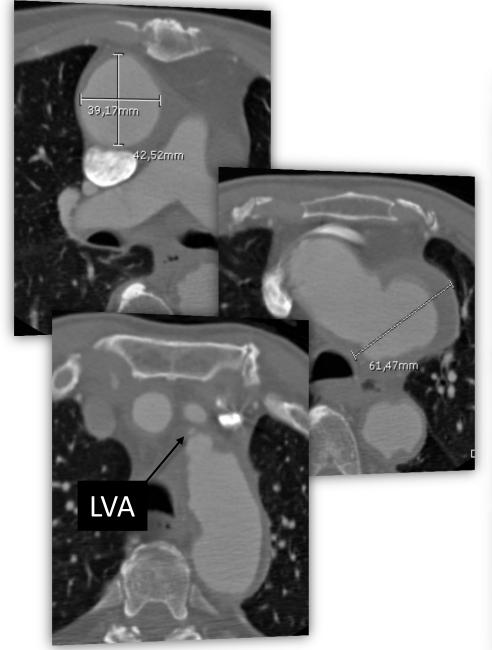
Case 2 (Varese, Italy)

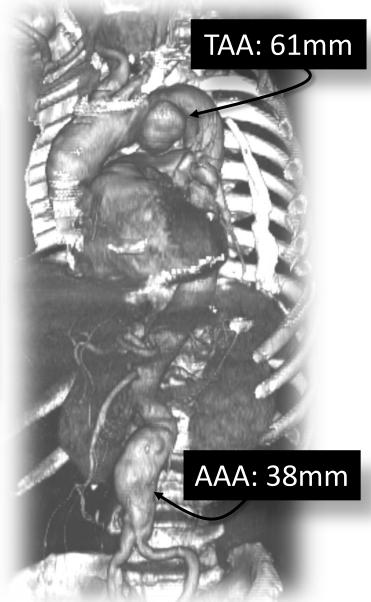


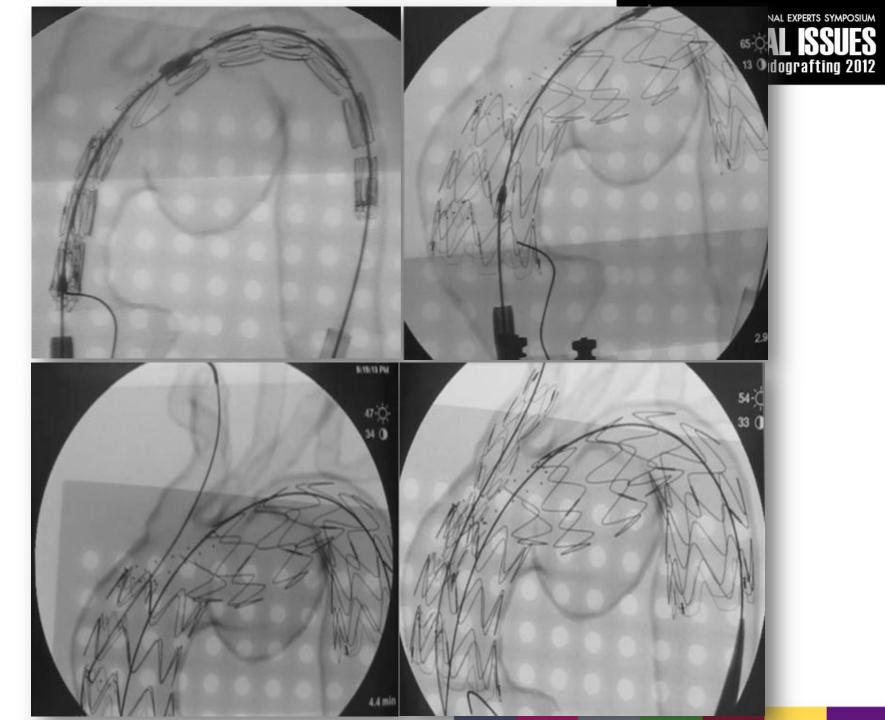
- 81 year old man w/ Ortner's syndrome
- Arch TAA
- PMH: Hypertension, COPD

Courtesy of Drs. Castelli and Piffaretti, University of Insubria





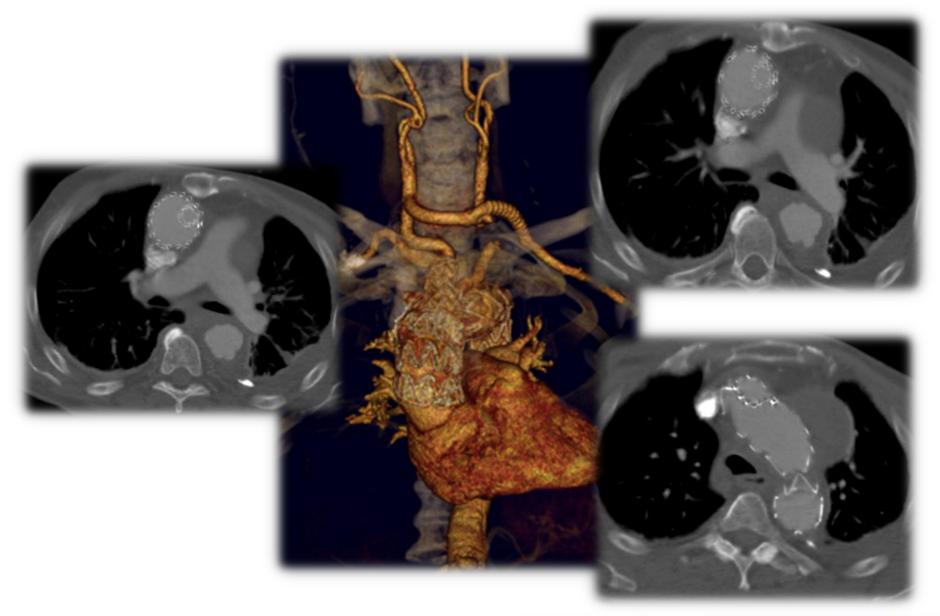


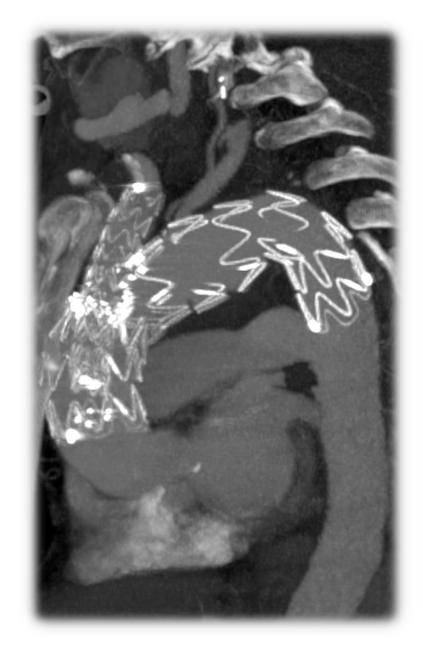










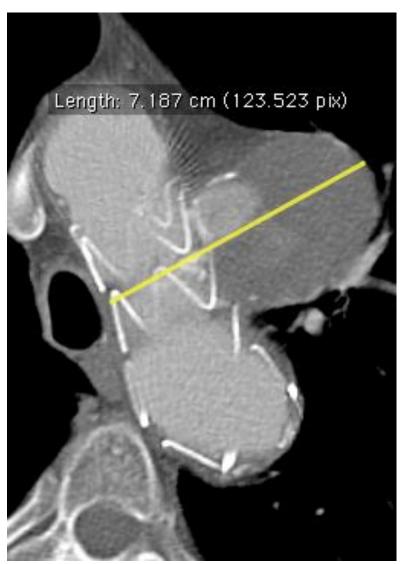




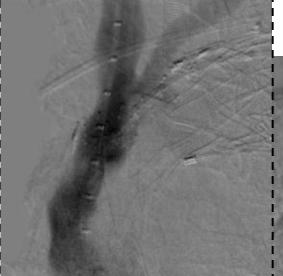
Case 4

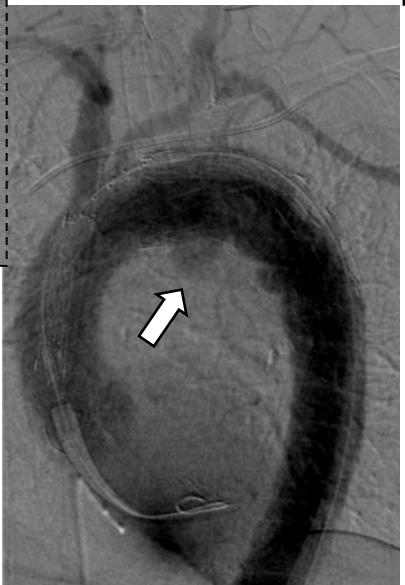
CRITICAL ISSUES in aortic endografting 2012

- 70 year old woman
- Arch TAA
- s/p TEVAR, type Ia endoleak

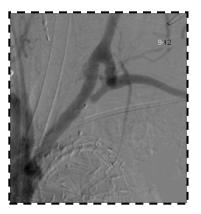


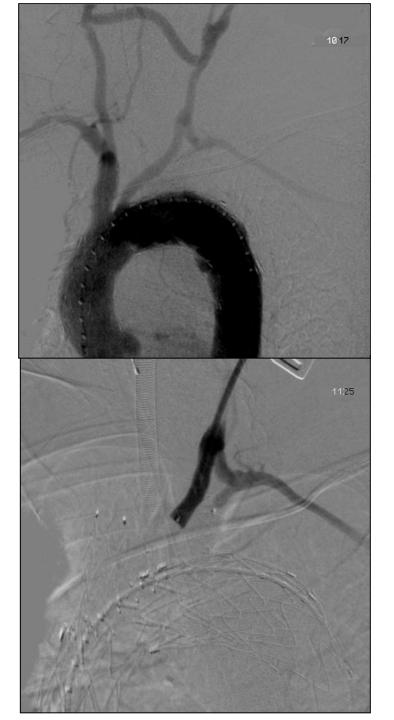
Courtesy of Dr. Camparini













Future Directions



- Double-branch (innominate, L CCA)
- Optimized mating stent graft
- Delivery system improvement
 - Lower profile
 - Improved markers
 - Improved conformance
 - Nosecone modification