Angioseal stuck anchor unlocking method

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Disclosure

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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
79-year-old female

- was admitted to the clinic with

Ds:
- CLTI of left leg, Rutherford 5.
- SFA, BTK arteries occlusions.
The first angio after antegrade CFA puncture (ultrasound guided)

Are there any contraindications to use closing devices?
Before angioplasty
After angioplasty
Closure of the puncture hole in the CFA by Angioseal 6F

- the black marker on the thread is not shown (the sponge did not reach the anchor)

- anchor traction unsuccessful

- pushing the sponge along the thread meets elastic resistance
What are our actions?

- US control

and/or

- Angio control from other access
Angio control from left brachial access

- bleeding from the puncture site
- anchor in the CFA distal segment
- artery is patent
- sponge out of the lumen
For example - another case

- more intensive bleeding from the puncture site

- total occlusion

- sponge in the lumen
Our actions

- balloon 8x20mm inflated in the area of the stuck anchor
- multidirectional movements with a deflated balloon
- successful traction of the anchor to the puncture site
- successful closure of the puncture hole
Hospital follow up

- no rebleeding

- follow-up without problems
Take-home messages

- if AngioSeal anchor is stuck in a deeper position, you can try to separate it by balloon inflating at low or nominal pressure
  
  - balloon diameter can be 1:1 to the vessel diameter
  
  - the balloon is delivered using an optional operator-friendly access
  
  - routine not only US-guided puncture but and closure of puncture holes could reduce the risk of local complications
Thank you for attention!

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