

## Highlights from:

Marie-France Poulin, MD, FACC, FSCAI, Burhan Mohamedali, MD, Clifford J. Kavinsky, MD, PhD, FACC, MSCAI, and Kousik Krishnan, MD, FACC, FHRS

Poulin et al., Catheterization and Cardiovascular Interventions; 1-3, Dec 2018 DOI: 10.1002/ccd.28027



# Left atrial appendage occlusion using a Watchman device in a transplanted heart with biatrial anastomosis

#### INTRODUCTION

- ▶ Biatrial anastomosis orthotopic heart transplant (OHT) results in enlarged atria, scarred and thickened interatrial septum, and leftward rotation of the heart, thereby complicating left atrial appendage (LAA) closure.
- ► This report describes successful LAA occlusion in a patient with previous biatrial anastomosis OHT using the WATCHMAN™ Device and the radiofrequency (RF) NRG™ Transseptal Needle (Baylis Medical') for controlled crossing of the septum.

## METHODS AND RESULTS

### Transseptal puncture

- ► Transesophageal echocardiography (TEE) indicated a thickened interatrial septum from the prior biatrial anastomosis and scar tissue.
- ➤ Site-specific transseptal puncture in the inferio-posterior location of the fossa ovalis was achieved using the NRG™ Needle with minimal additional force.

#### LAA occlusion

- ▶ Standard TEE views (0°, 45°, 90°, and 135°) were adjusted by 10–20° to account for the effects of biatrial anastomosis and replicate the desired LAA ostial views for appropriate device sizing.
- ► Successful deployment of a 21 mm WATCHMAN™ Device into the LAA was achieved with no complications.
- ▶ 45 days post-operative TEE indicated no thrombus formation or residual flow in the LAA.
- ► Anticoagulation was administered for 45 days, while antiplatelet therapy was continued for six months post-procedure, respectively.

#### DISCUSSION AND CONCLUSIONS

- ► Changes in atrial morphology and leftward rotation of the heart, such as those seen in this patient with biatrial anastomosis OHT, can make standard WATCHMAN™ implantation difficult.
- ▶ Site-specific transseptal puncture and firm engagement of the interatrial septum can be complicated by scarring and thickening of the septum, and may result in accidental puncture and perforation.
- Additional balloon dilation of the septum may be required to advance the large LAA occluder sheath into the left atrium.
- ► The NRG™ Transseptal Needle was used to provide controlled site-specific crossing of the interatrial septum without complications.
- Using a radiofrequency needle can enable simpler and safer access to the left atrium, without requiring extra force application.
- ► LAA occlusion using the WATCHMAN™ Device in a patient with prior biatrial anastomosis OHT can be safely and successfully performed using the described procedural modifications.

All trademarks are property of their respective owners. Patents Pending and/or issued. CAUTION: The law restricts these devices to sale by or on the order of a physician. Indications, Contraindications, Warnings, and Instructions For Use can be found in the product labelling supplied with each device or at www.baylismedical.com.

Products shown for INFORMATION purposes only and may not be approved or for sale in certain countries. This material not intended for use in France.



