

VersaCross® Radiofrequency System Reduces Time to Left Atrial Access versus Conventional Mechanical Needle

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inohara et al. J Interv Card Electrophys, 2021; in press (DOI: 10.1007/s10940-020-00931-7)

HIGHLIGHTS

The study found LAAC sheath delivery with the VersaCross® RF Transseptal Solution was:

- ▶ **Efficient:** Transseptal puncture and LAAC sheath delivery on average in under 7 mins.
- ▶ **Exchangeless:** Faster LA access by combining a starter wire, RF transseptal device and exchange rail in a 3-in-1 solution.
- ▶ **Effortless:** Controlled RF puncture with a single wire.

INTRODUCTION

- ▶ Left atrial (LA) catheterization requires numerous device exchange steps, and has associated risks and safety concerns.
- ▶ The VersaCross® RF Transseptal Solution (Baylis Medical) enables vascular cannulation, transseptal puncture (TSP) and device exchange using a single RF-tipped pigtail wire.

METHODS

- ▶ Consecutive series of left atrial appendage closure (LAAC) using WATCHMAN™ (Boston Scientific) or Amulet™ (Abbott) devices were retrospectively evaluated.
- ▶ Femoral access was obtained for inferoposterior TSP using two methods:

Conventional approach (n=10):

- Requiring a starter wire, sharp mechanical needle (BRK-1™ Transseptal Needle, Abbott), fixed curve sheath (Swartz™ Transseptal Guiding Introducers, Abbott) and stiff exchange wire (Amplatz Super Stiff™, Boston Scientific or ProTrack™ Pigtail Wire, Baylis Medical)

VersaCross® RF Transseptal Solution (n=10):

- Comprised of the VersaCross® RF Wire, VersaCross® sheath, and dilator
- ▶ Efficiency was assessed in terms of time from femoral access to TSP, delivery of LAAC sheath in the LA, device release, overall procedure, and fluoroscopy use.
- ▶ Safety was assessed in terms of intraprocedural and in-hospital complications.

RESULTS

- ▶ LAAC success was 100% using both methods, with no complications.
- ▶ Significant improvement in LA access times using VersaCross® Solution vs. conventional method:
 - Shorter time to TSP [4.1±2.5 min vs. 8.4±4.0 min (p = 0.009)]
 - Less time for LAAC delivery sheath into LA [6.7±2.4 min vs. 13.4±5.4 min (p = 0.002; Figure 1)]
- ▶ Trend for overall procedural improvement using VersaCross® Solution vs. conventional method:
 - Shorter time to device release [23.7±6.4 min vs. 31.2±10.0 min (p = 0.062)]
 - Less fluoroscopy use [7.2±2.2 min vs. 11.4±5.9 min (p = 0.061)]

Time for LAAC Sheath Delivery

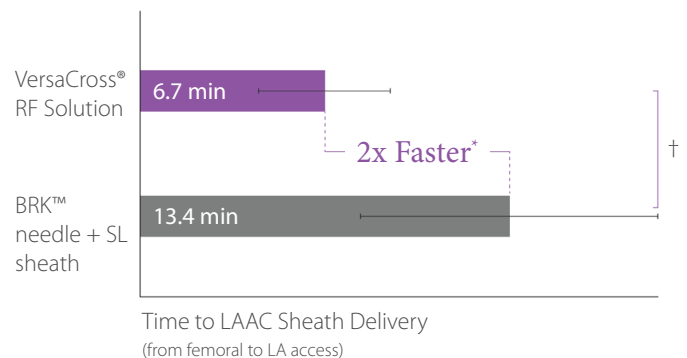


Figure 1 LAAC sheath delivery is two times faster using the VersaCross® Transseptal Solution than the conventional workflow* (*p=0.002).

DISCUSSION & CONCLUSIONS

- ▶ VersaCross® RF Transseptal Solution combines a starter wire, transseptal needle and exchange guidewire for faster LA access, and may improve overall procedural efficiency.

* From femoral access to LAAC sheath delivery using VersaCross® Transseptal Solution compared to a conventional mechanical needle and fixed curve sheath (Inohara et al., 2021).

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