



## IL PAZIENTE FRAGILE IN CARDIOLOGIA

Torino  
Sabato 11 maggio 2019

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Ospedale San Giovanni Bosco



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# La procedura di chiusura percutanea dell'auricola sinistra

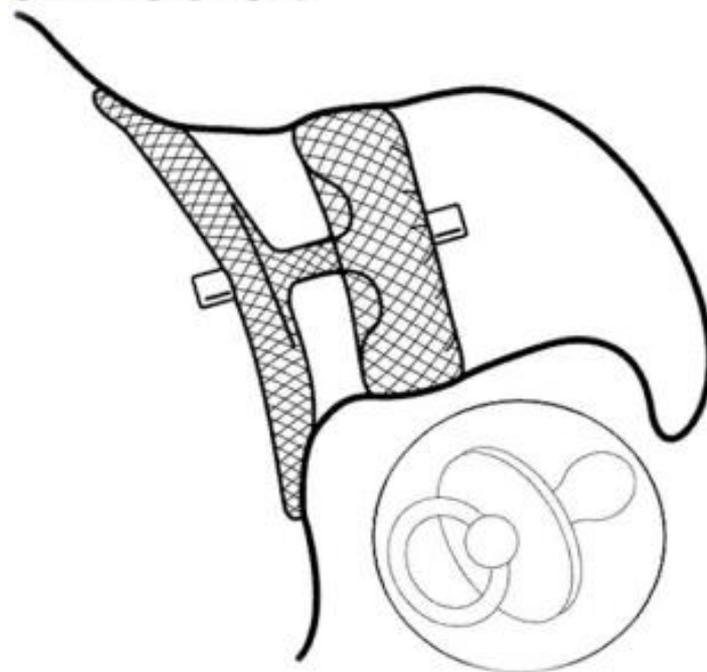
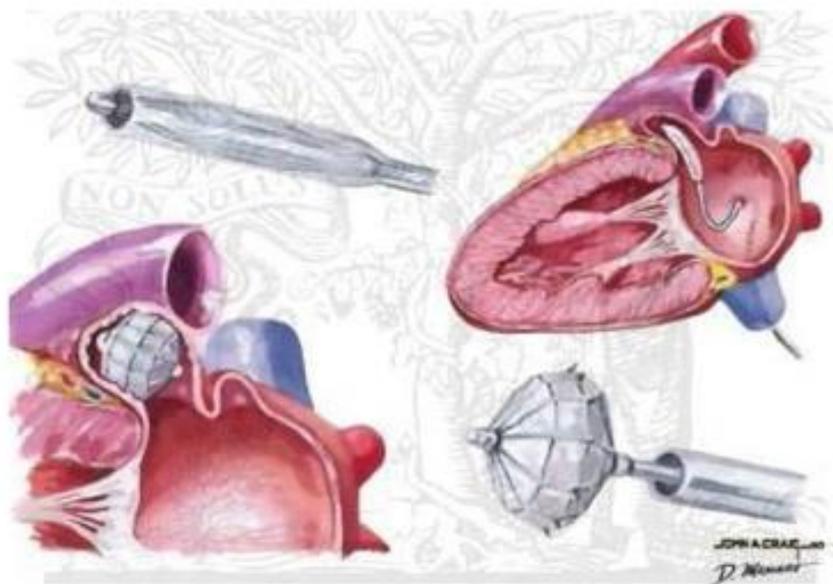
**11 Maggio 2019**

**Dr.ssa Elisabetta Petitti**

Ospedale San Giovanni Bosco

Torino

# Cos'è la chiusura percutanea dell'auricola sinistra?



# Screening pre-procedura

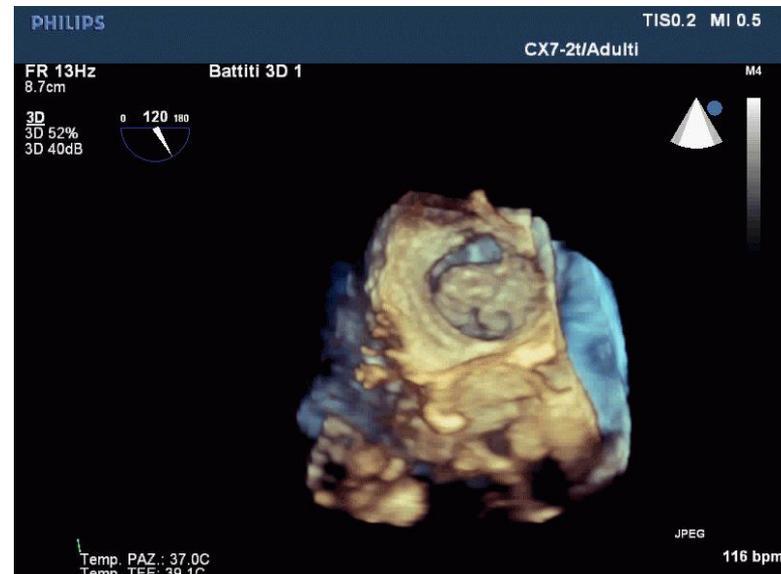
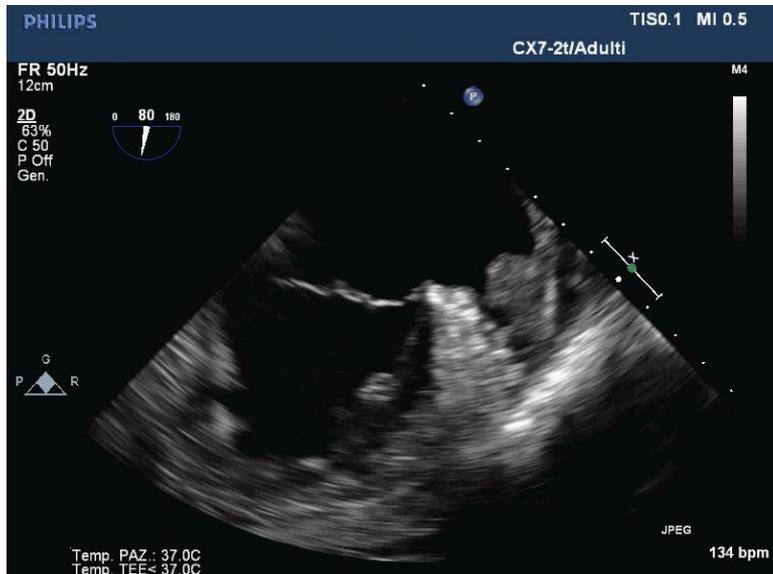
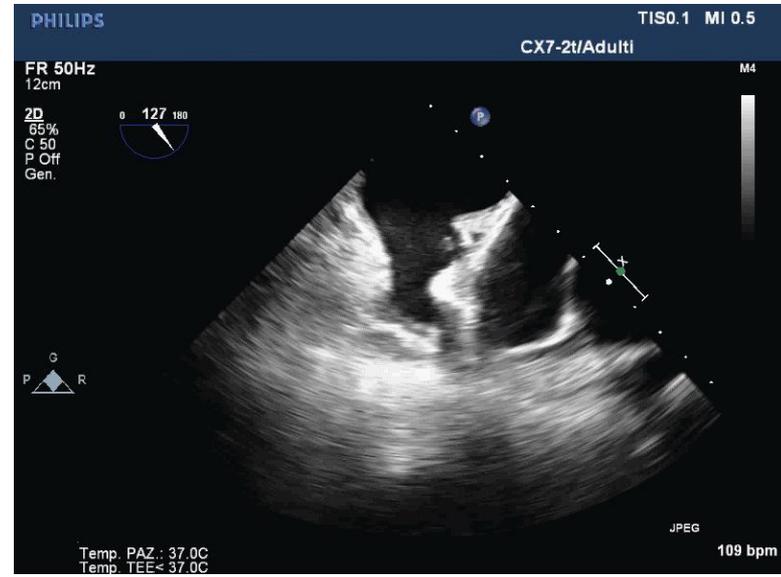
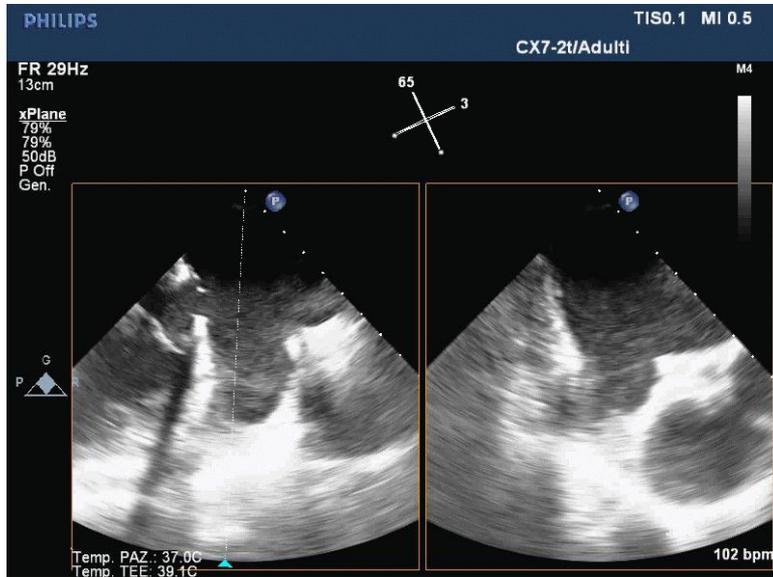
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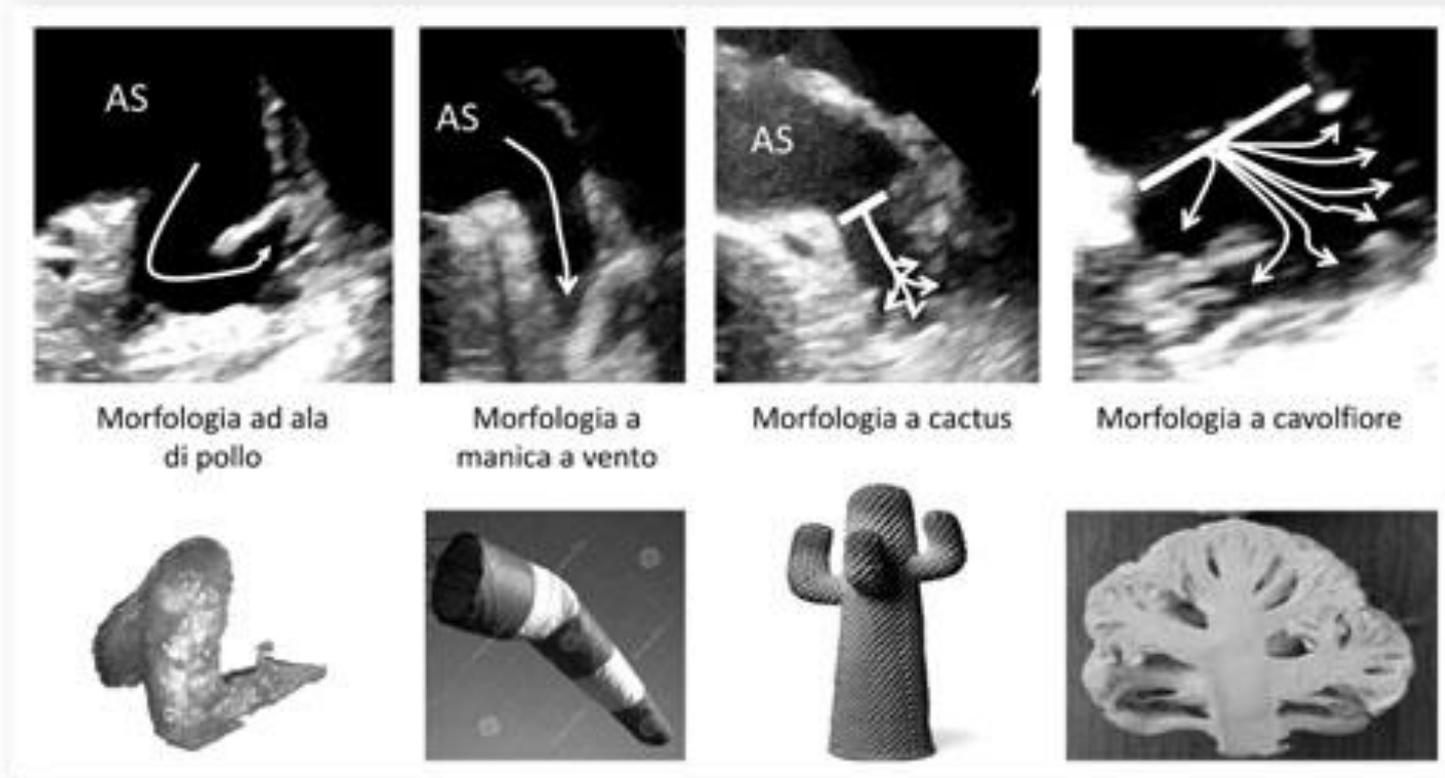
Valutazione ecocardiografica dell'auricola sinistra per identificare:

- a. Presenza di trombosi -> *controindicazione*
- b. Morfologia e dimensioni -> *eleggibilità, scelta del tipo e della taglia del dispositivo*

# Diagnosi di trombosi

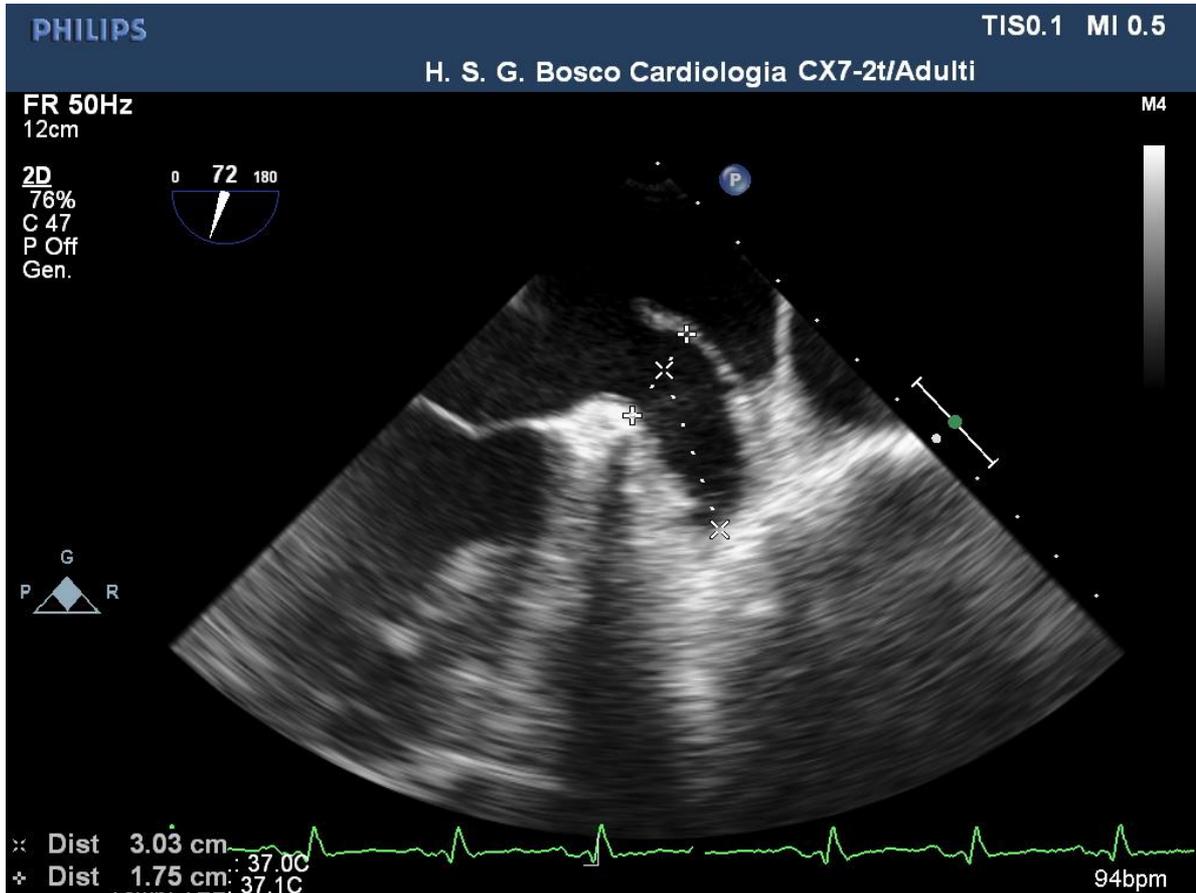


# Morfologia auricolare sn



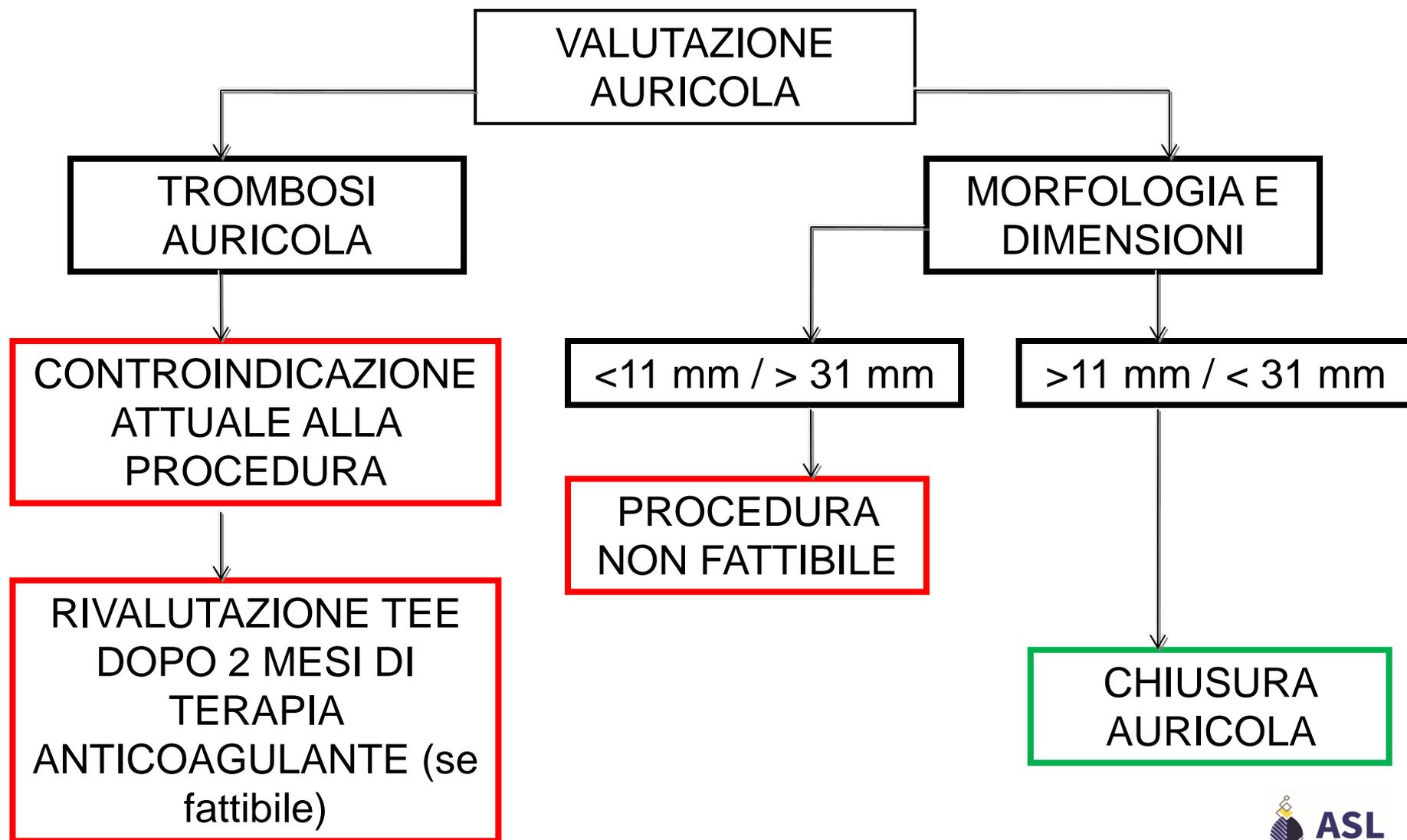
**Figura 7.** Esempi di auricola atriale sinistra con diversa morfologia. Morfologia ad ala di pollo: presenza di un seppimento sottile nel lobo dominante ad una certa distanza dall'orificio. Morfologia a manica a vento: un lobo dominante di sufficiente lunghezza da costituire la struttura principale, con aspetto lievemente ricurvo. Morfologia a cactus: lobo dominante allungato che si arborizza in lobi minori verso l'apice. Morfologia a cavolfiore: ampio orificio e limitata lunghezza, con arborizzazione complessa in vari lobi. AS, atrio sinistro.

# Dimensioni auricola sn



- Landing zone
- Profondità

# Algoritmo decisionale pre-procedurale



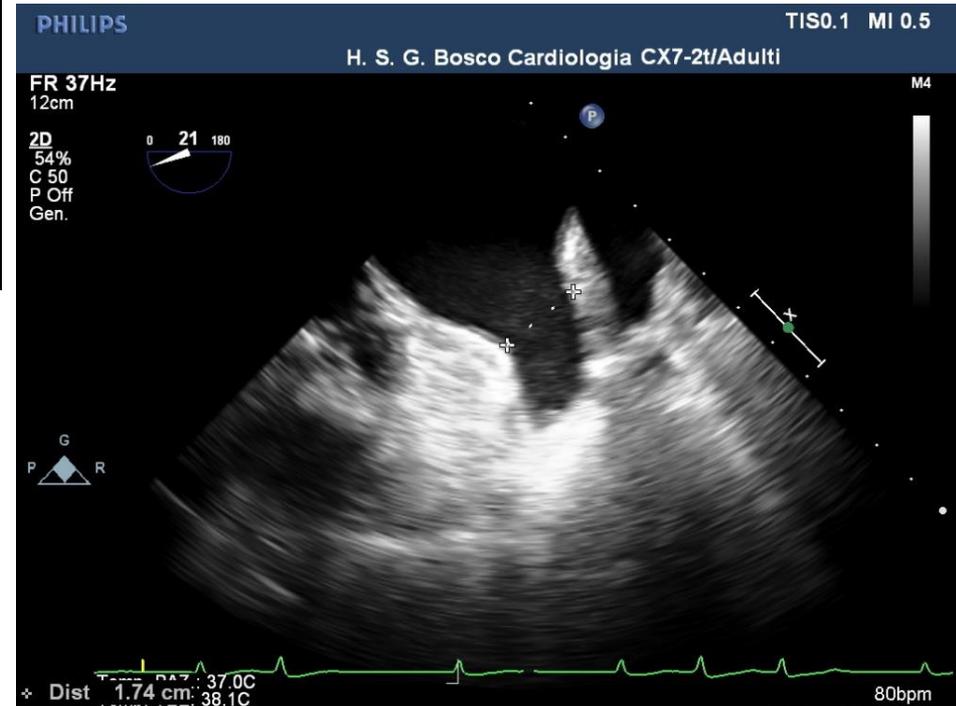
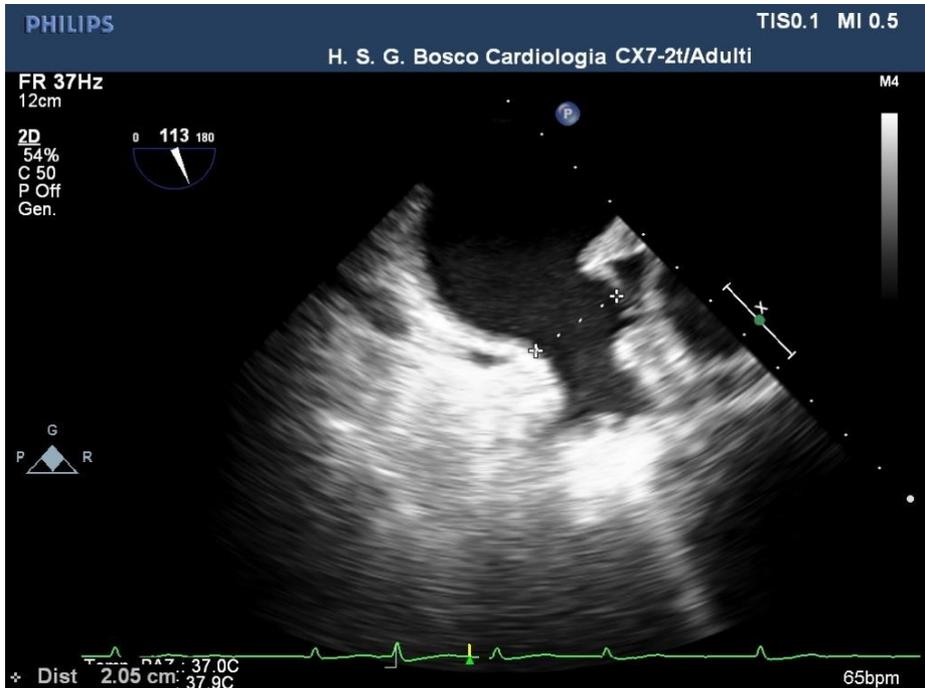
# Procedura di Chiusura auricolare sn

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- Anestesia generale
- Guida ecocardiografica transesofagea
- Accessi:
  - venoso femorale 12-14 Fr
  - arterioso femorale 5Fr per monitoraggio  
cuento della pressione arteriosa

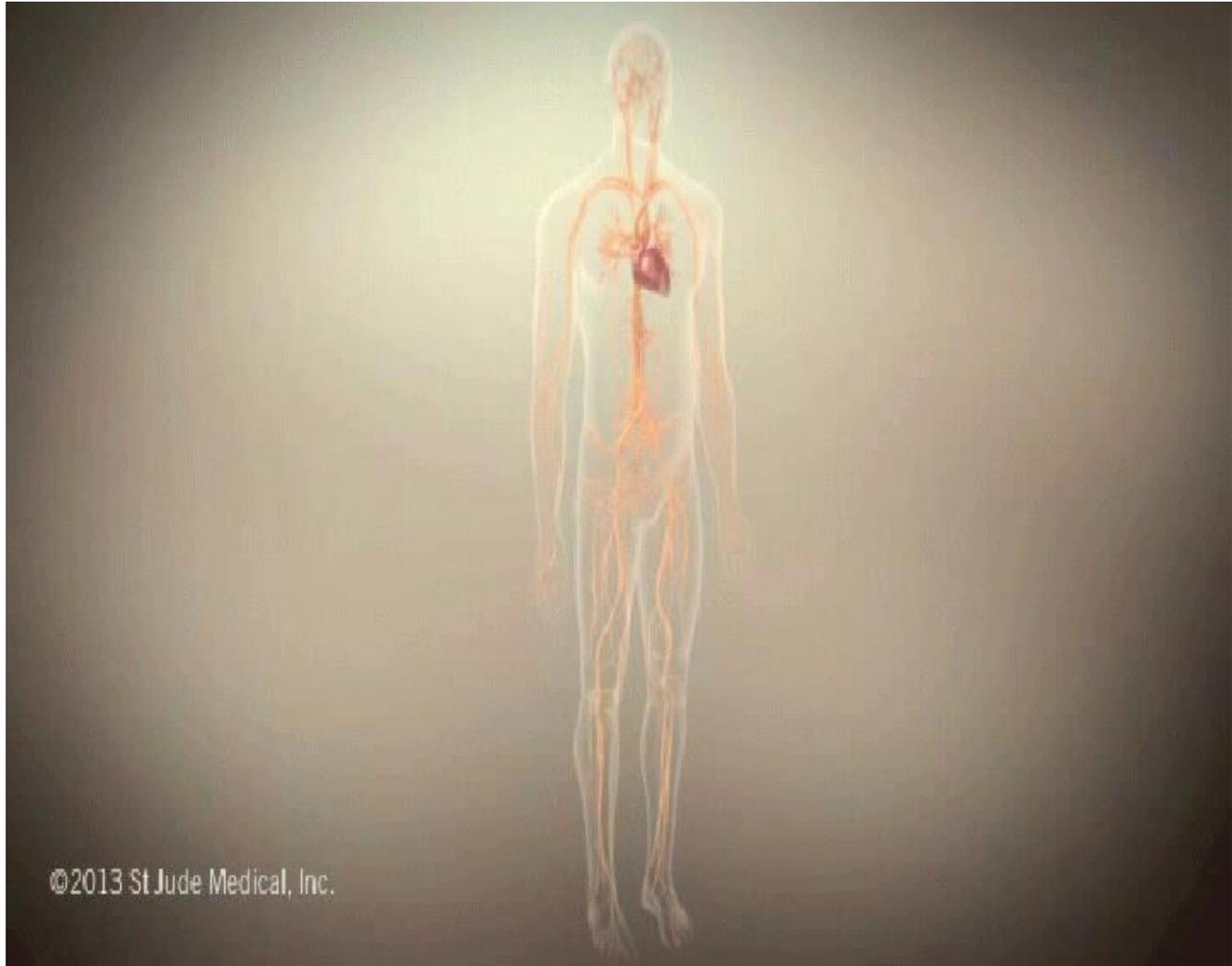
# TEE di controllo intra-procedurale



# Procedura di Chiusura auricola sn

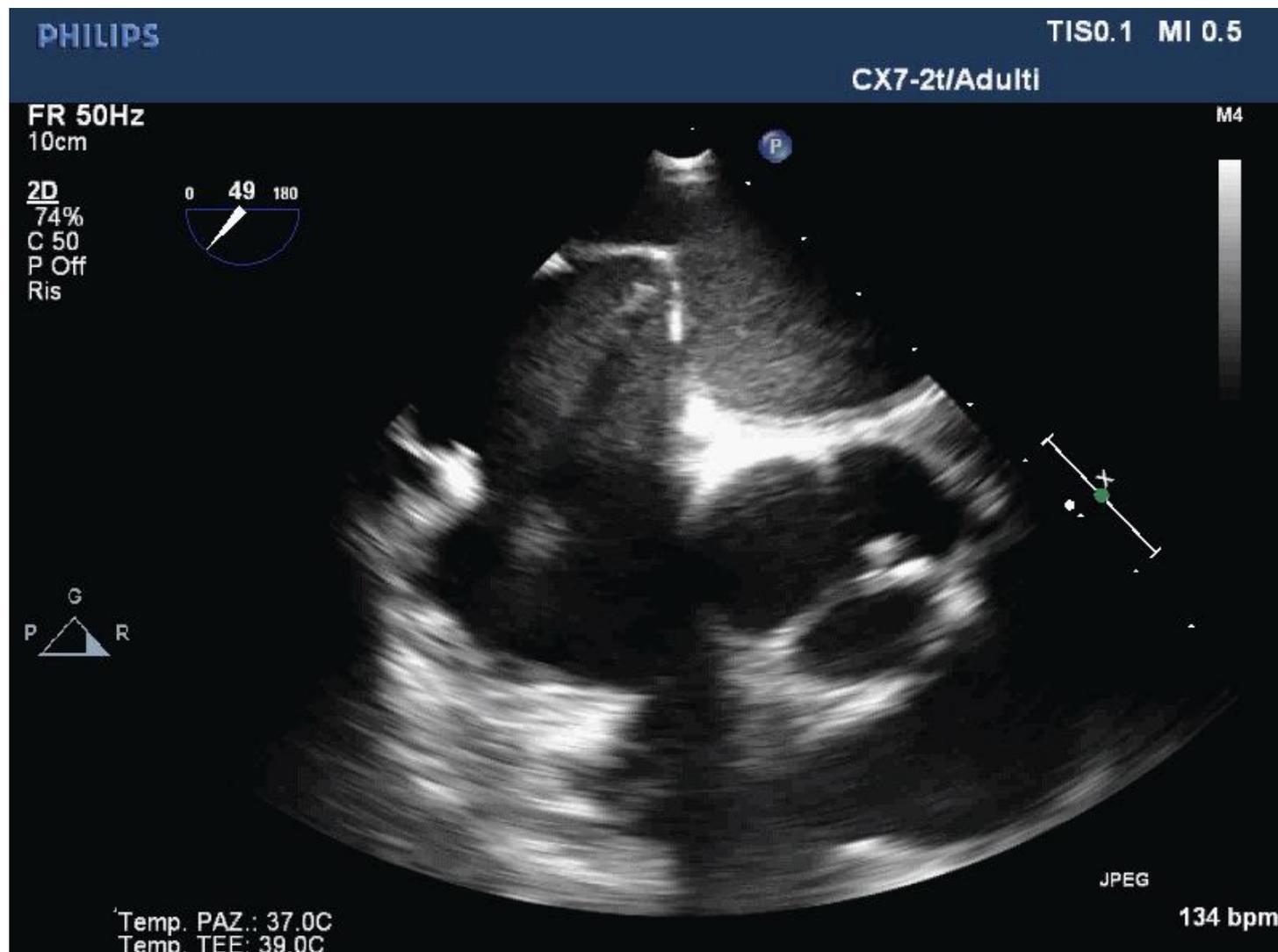
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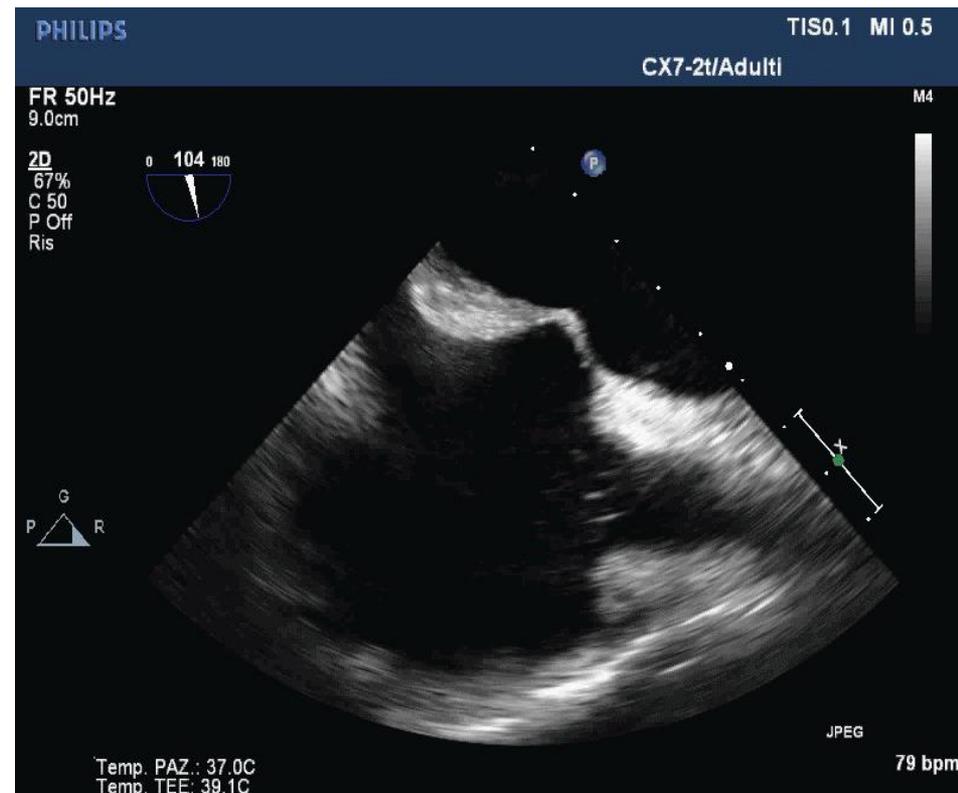
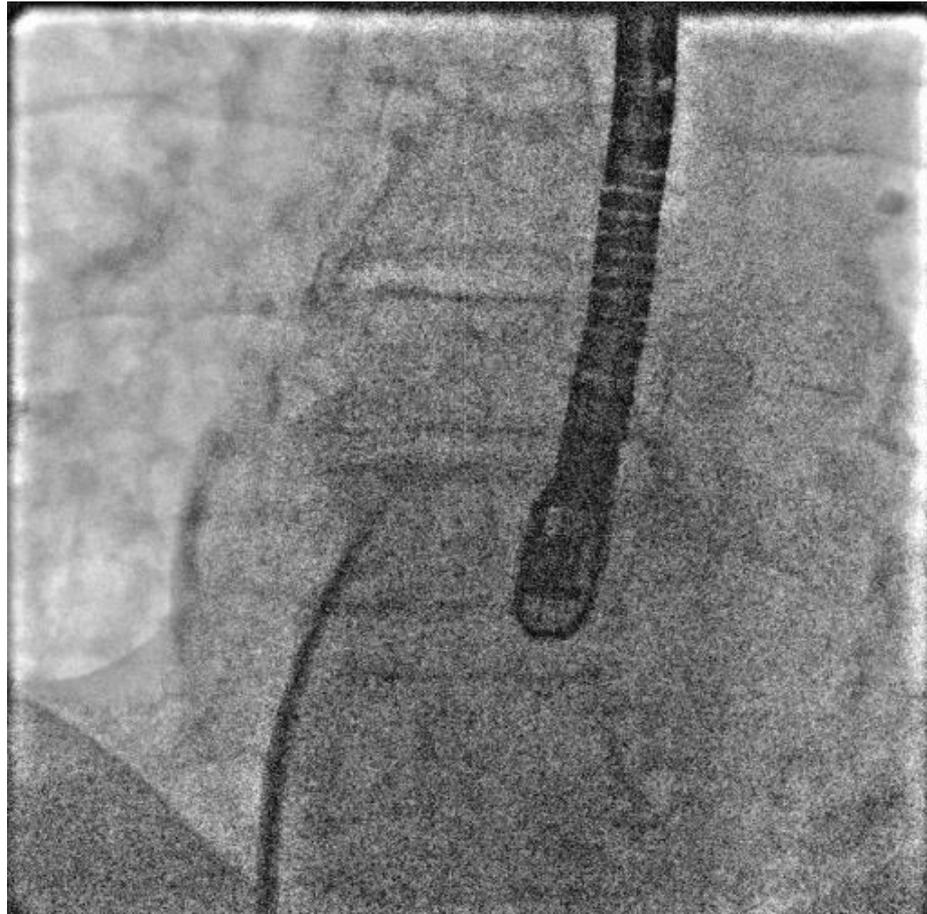
# 1. Puntura transettale



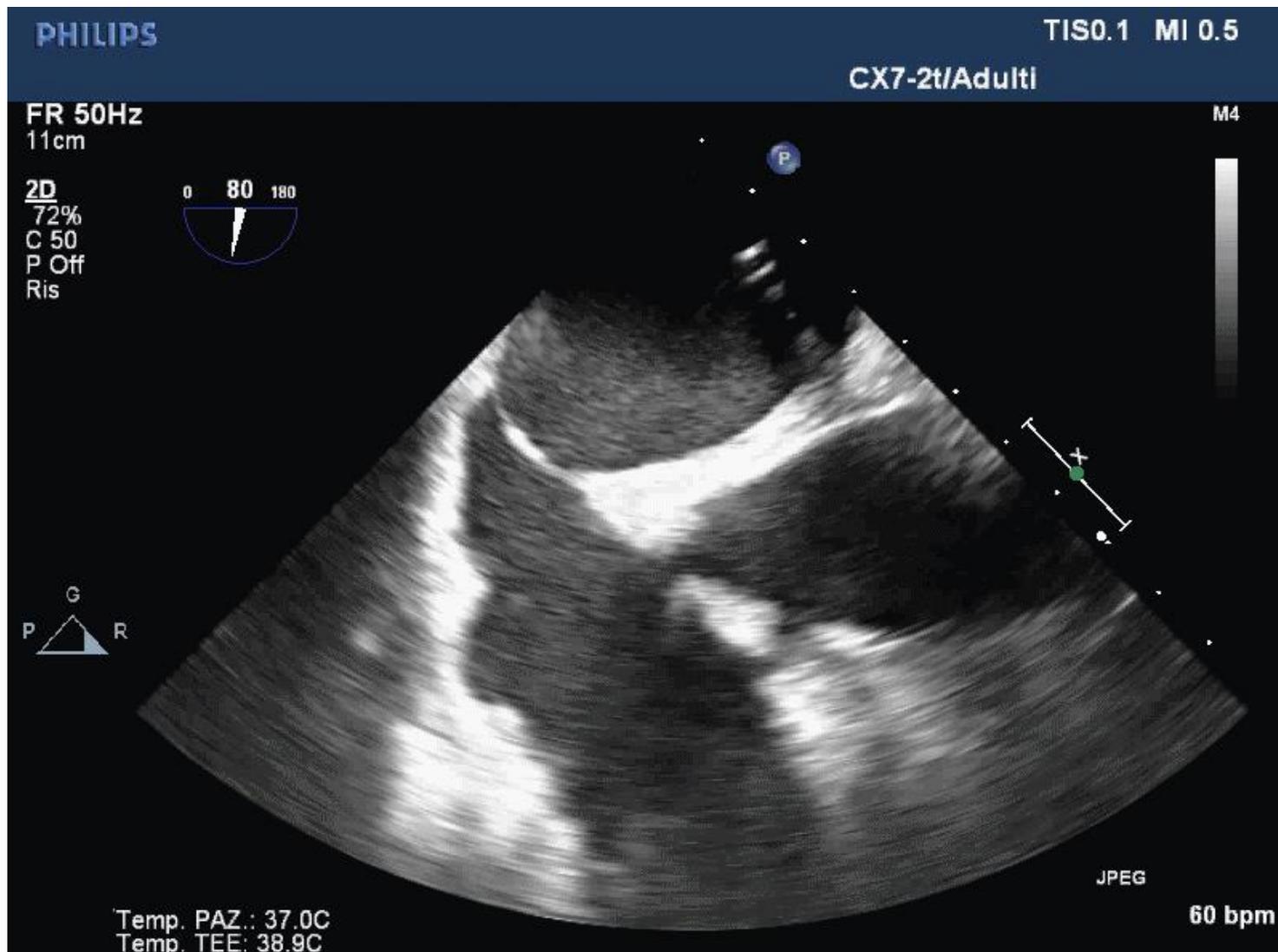
# 1. Puntura transettale

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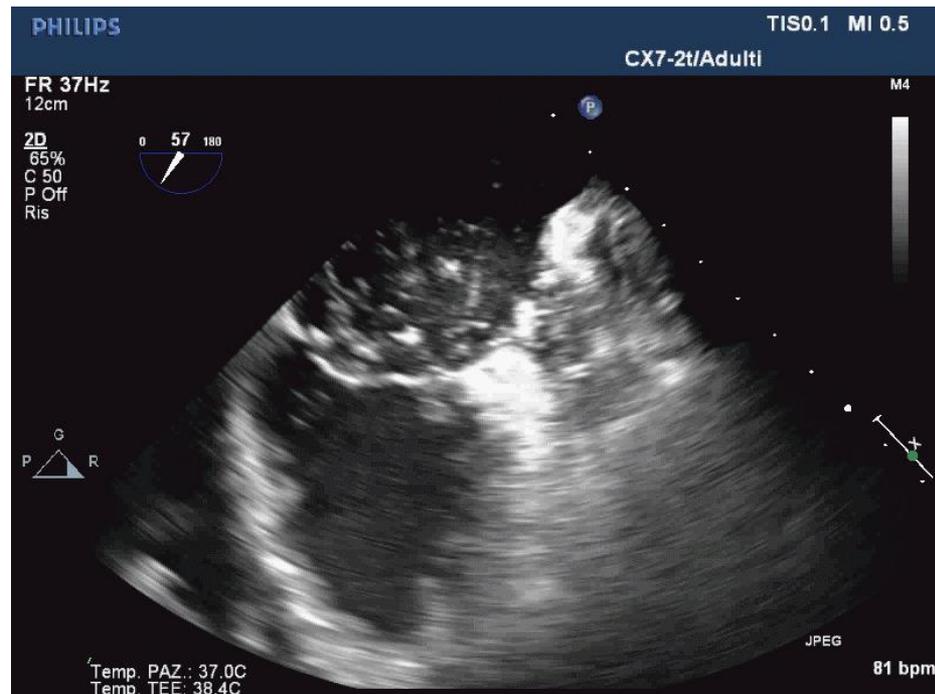
## 2. Passaggio del catetere in atrio sn



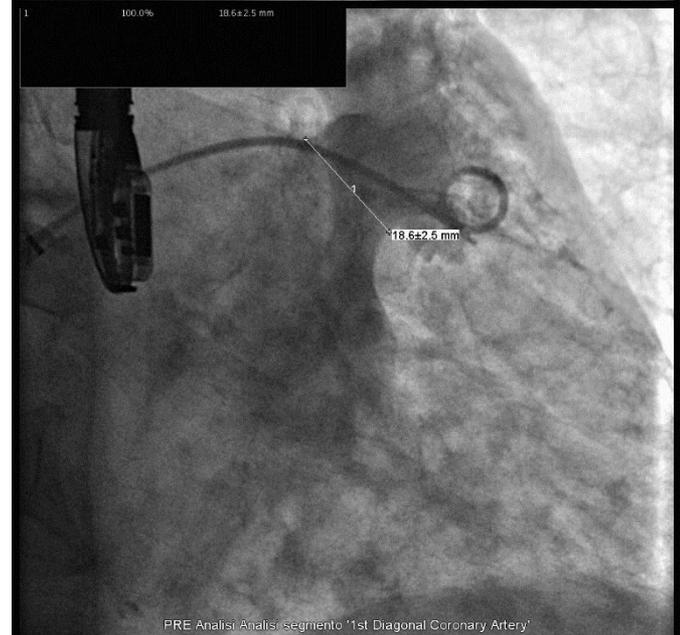
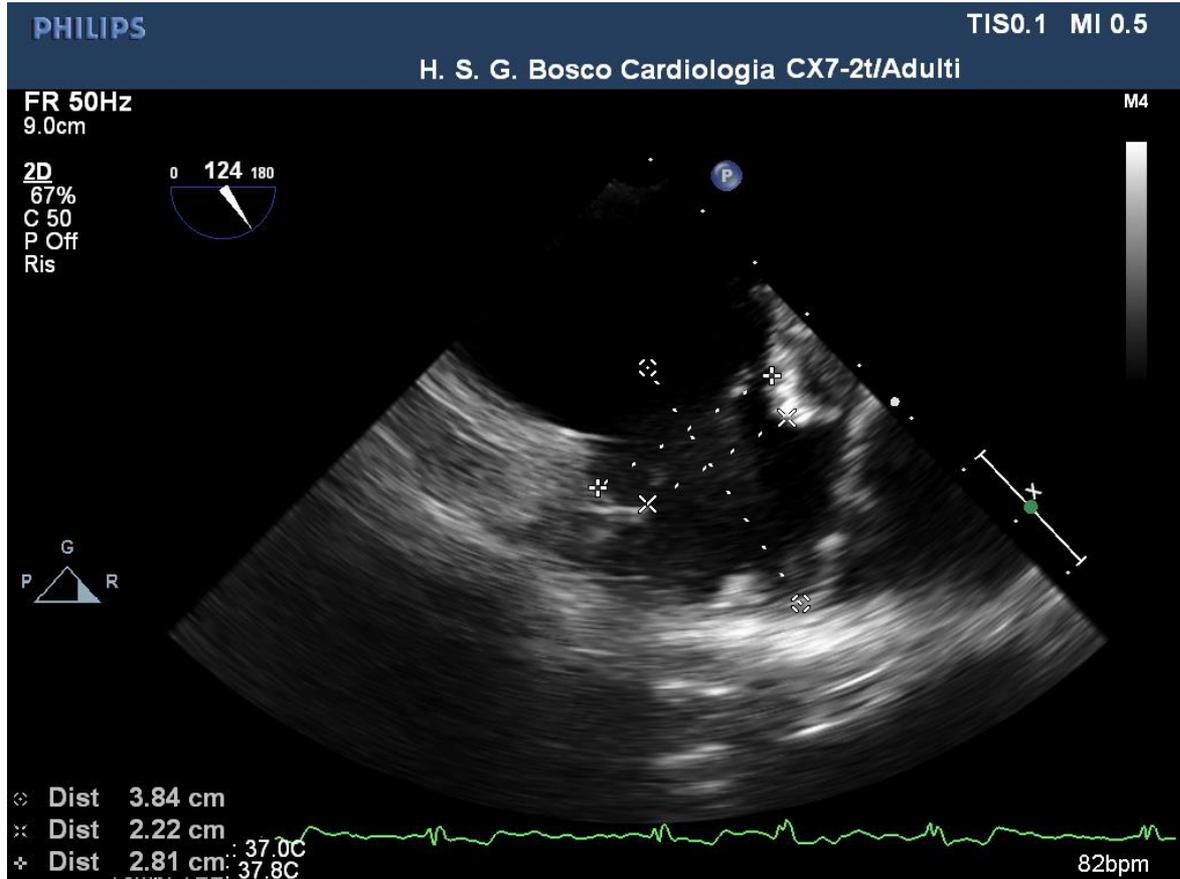
# 3. Posizionamento del pigtail in auricolare

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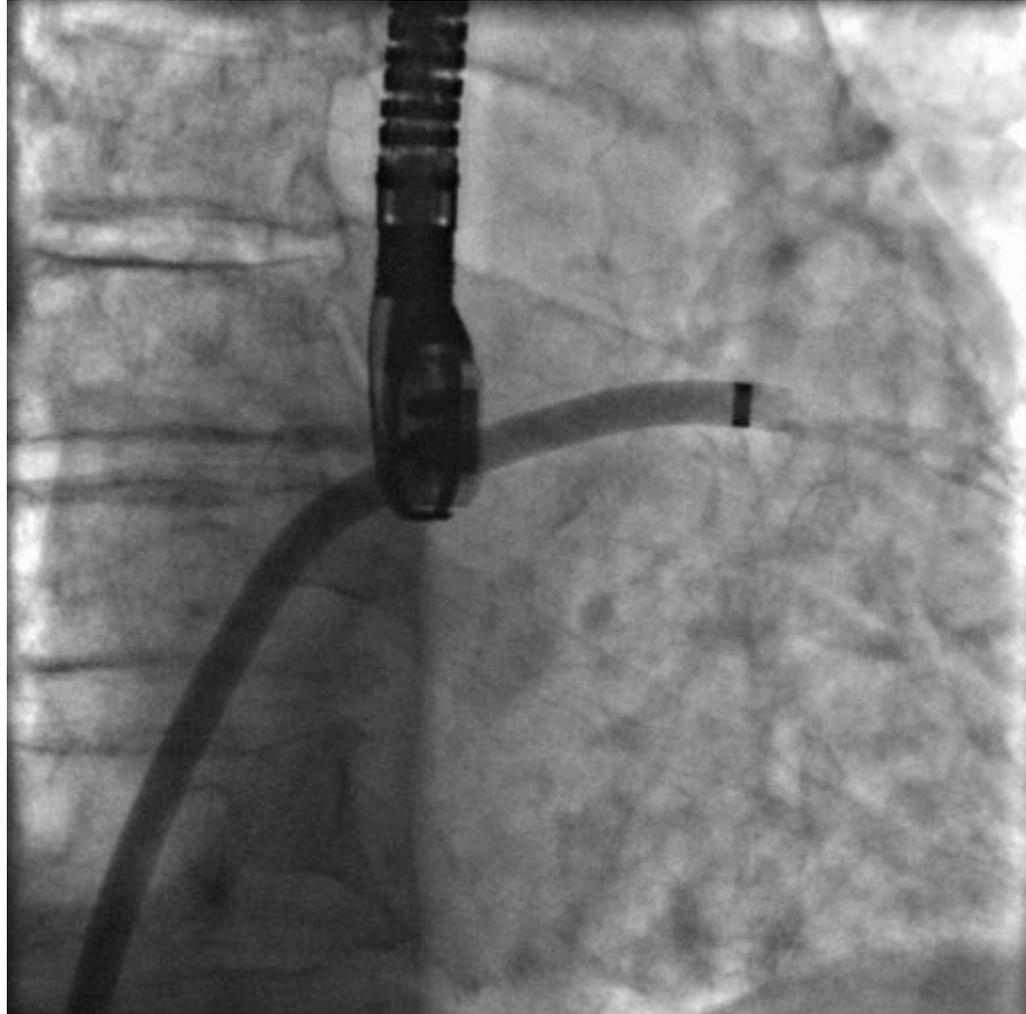
# 4. Dimensioni eco + angio



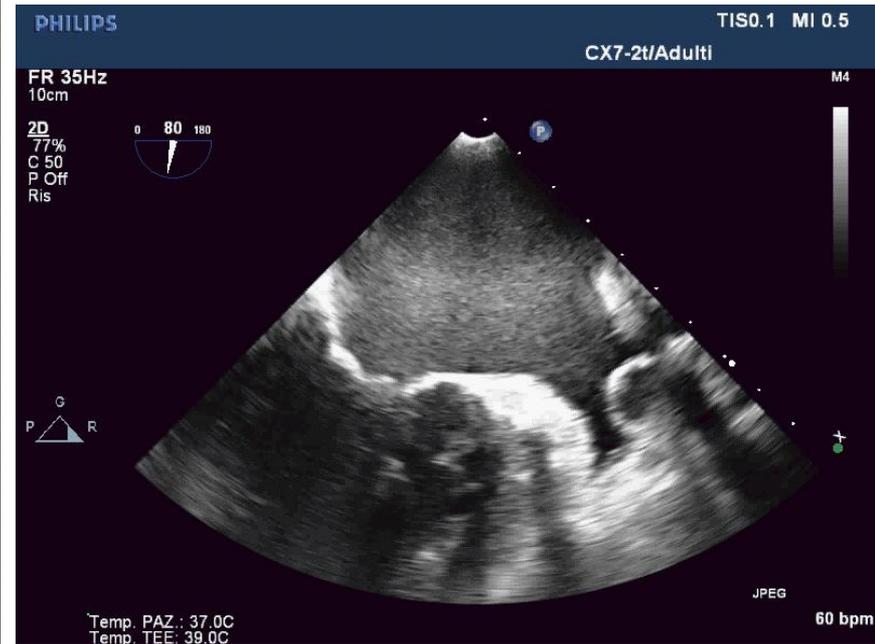
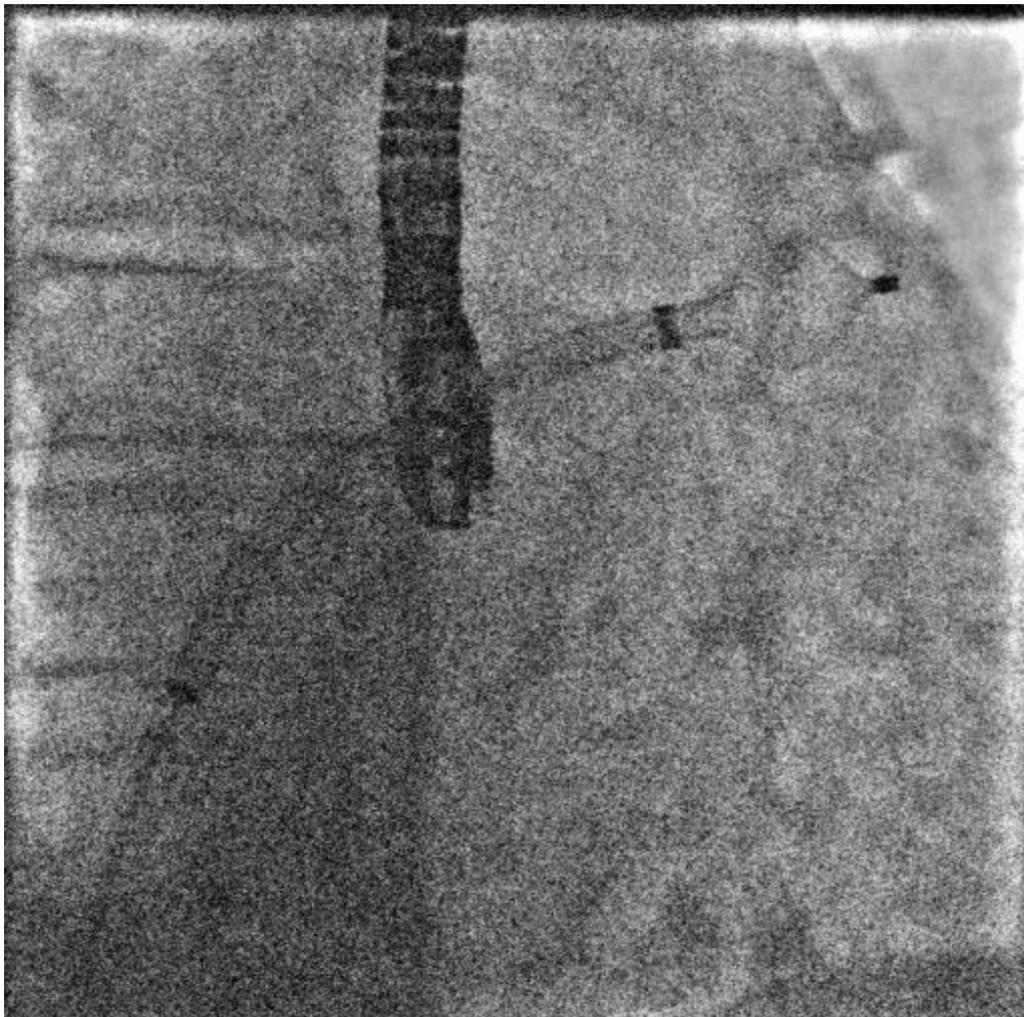
# 5. Scambio con il delivery system

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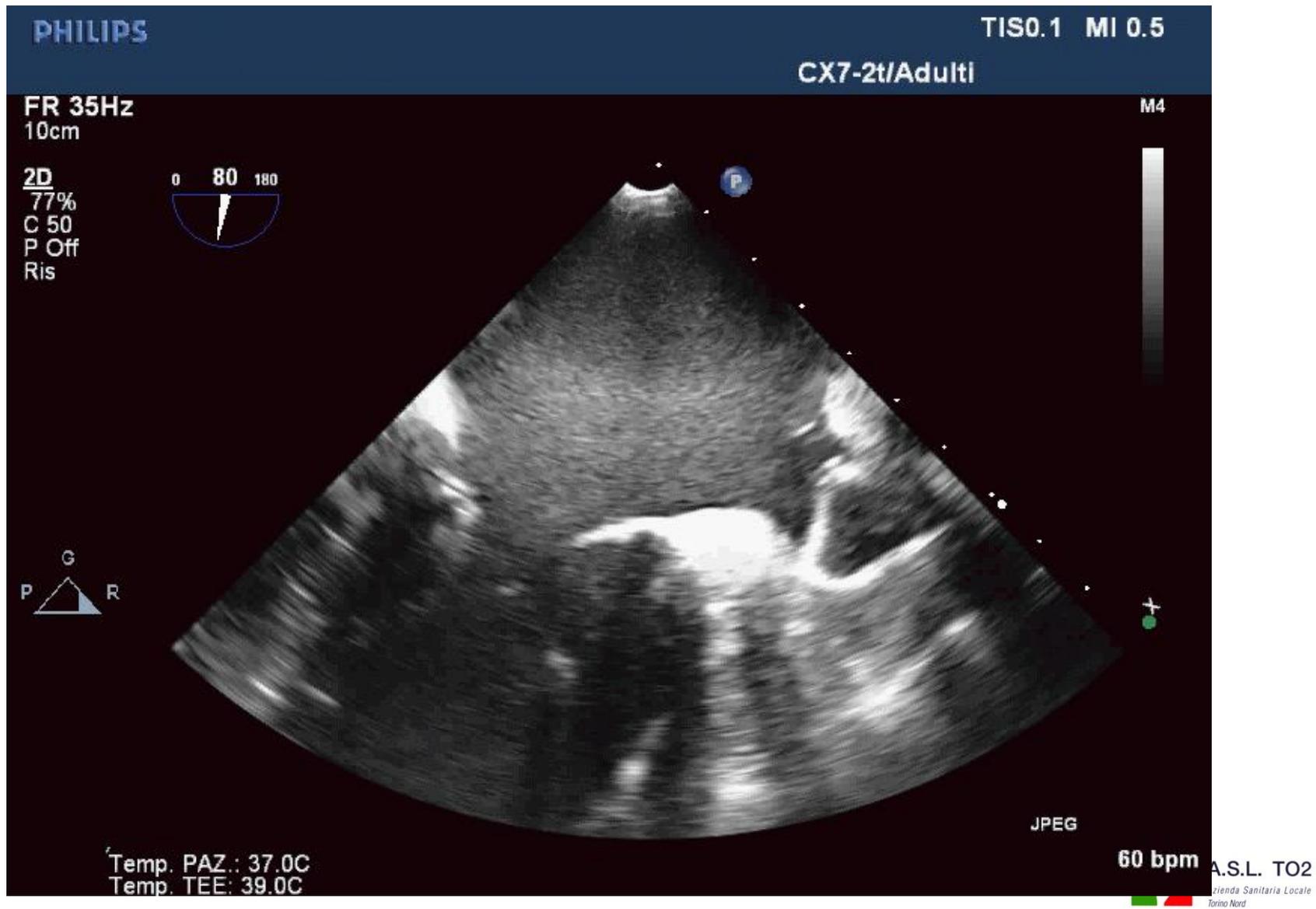
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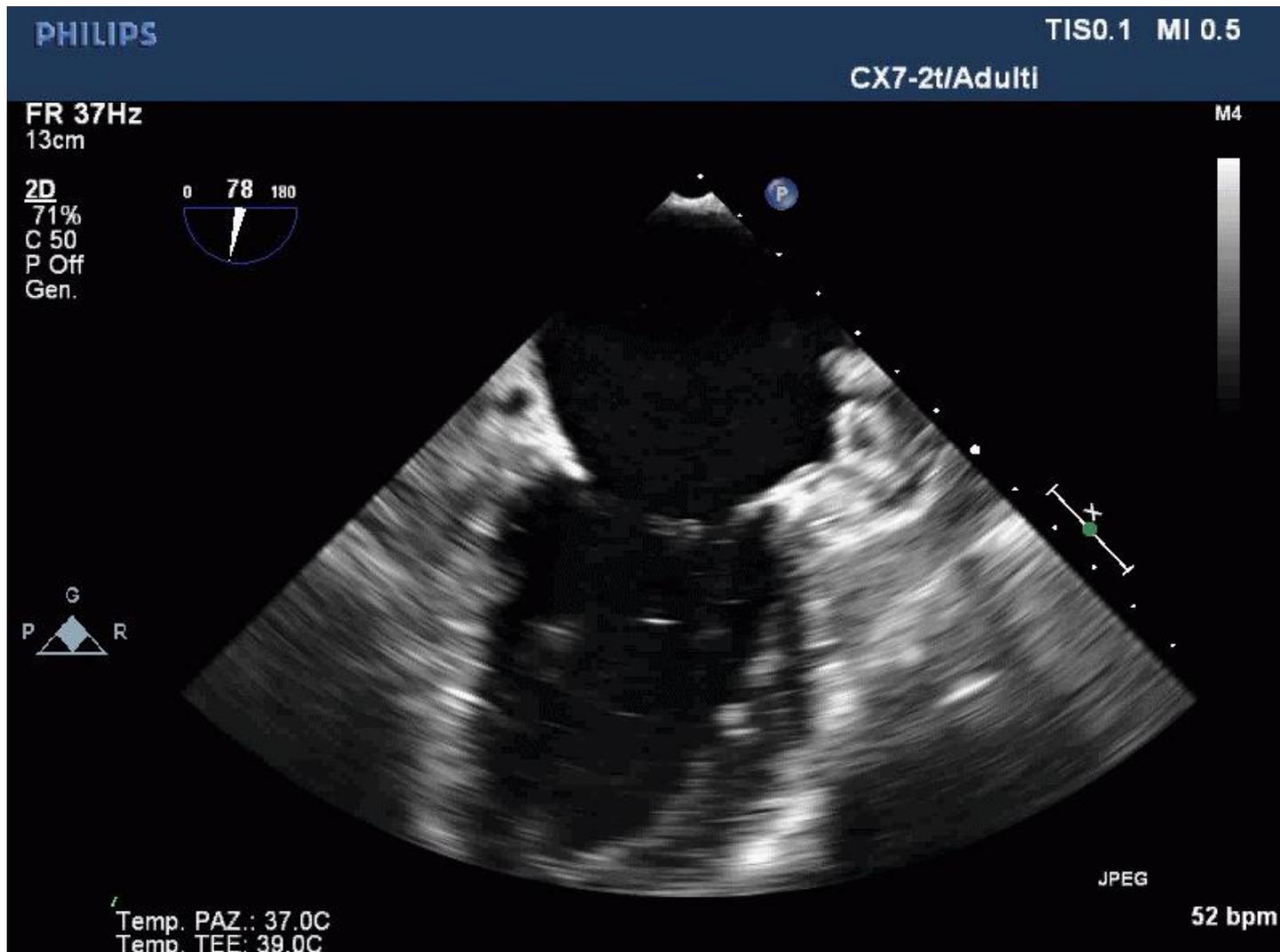
# 6. Posizionamento del device



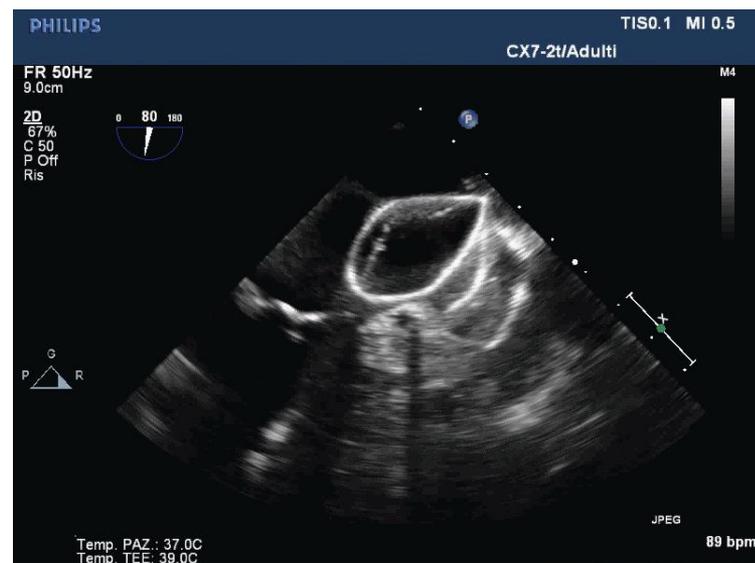
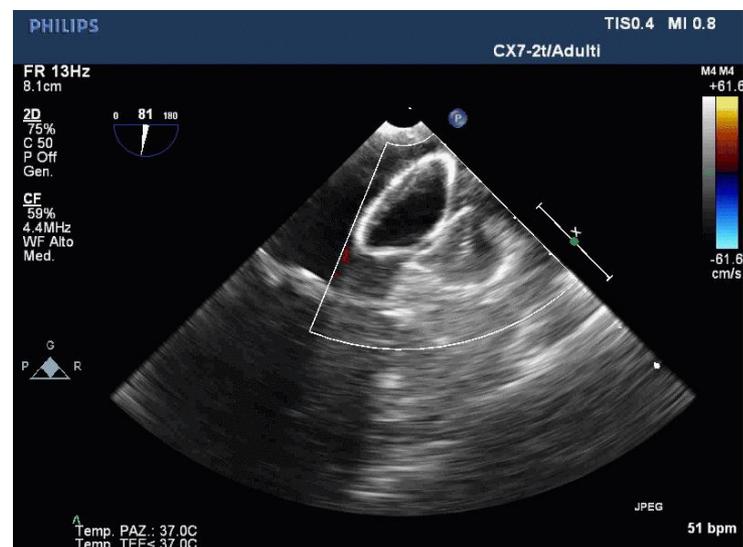
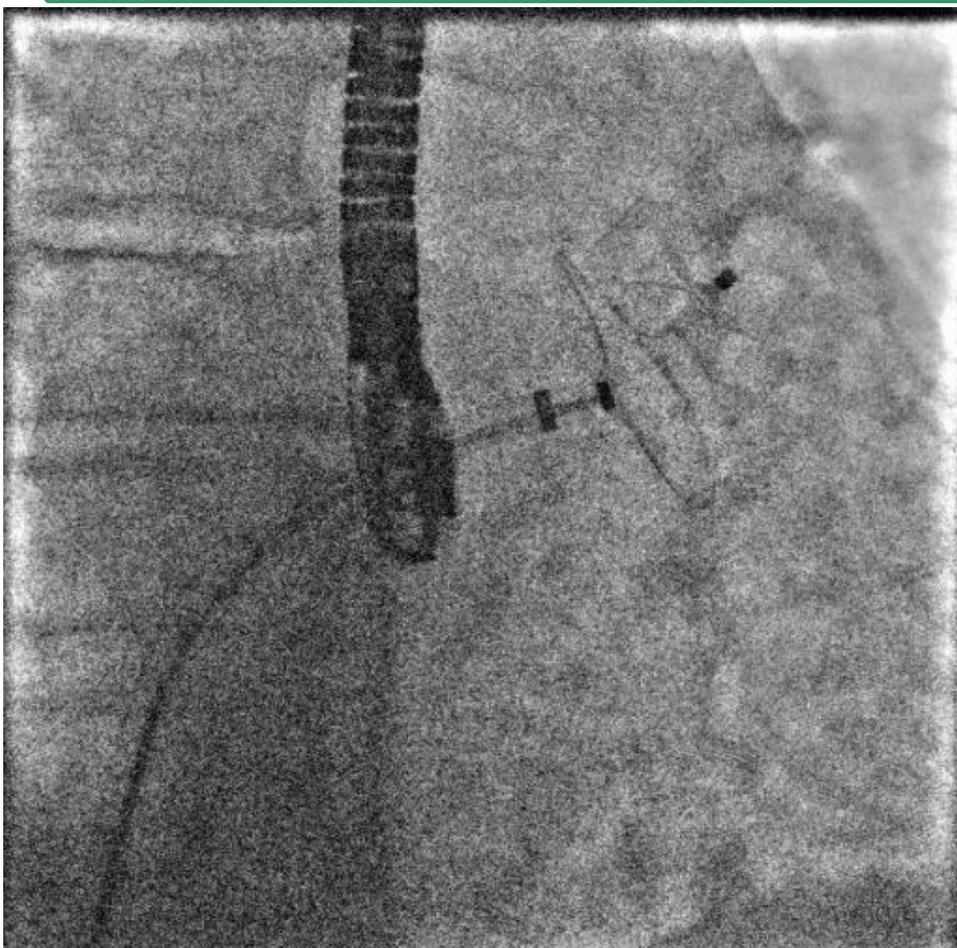
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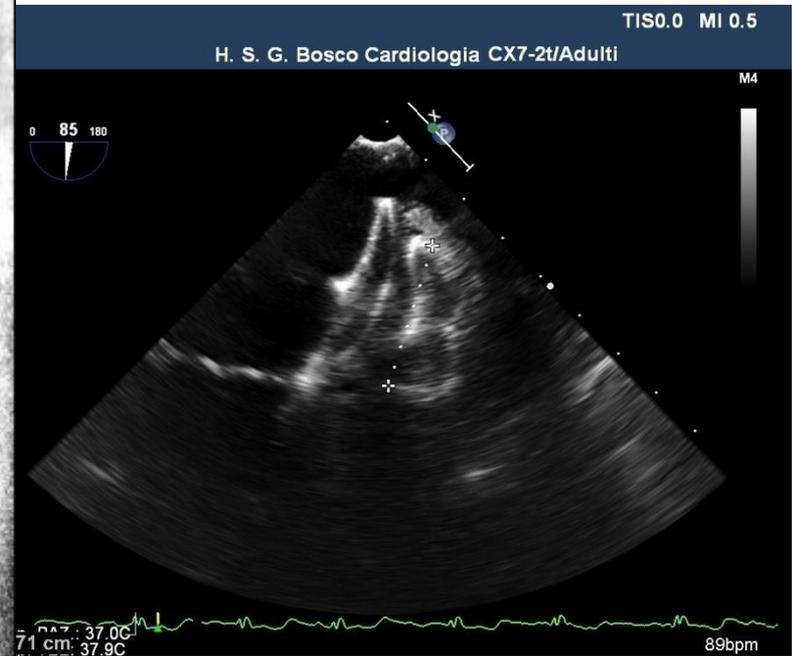
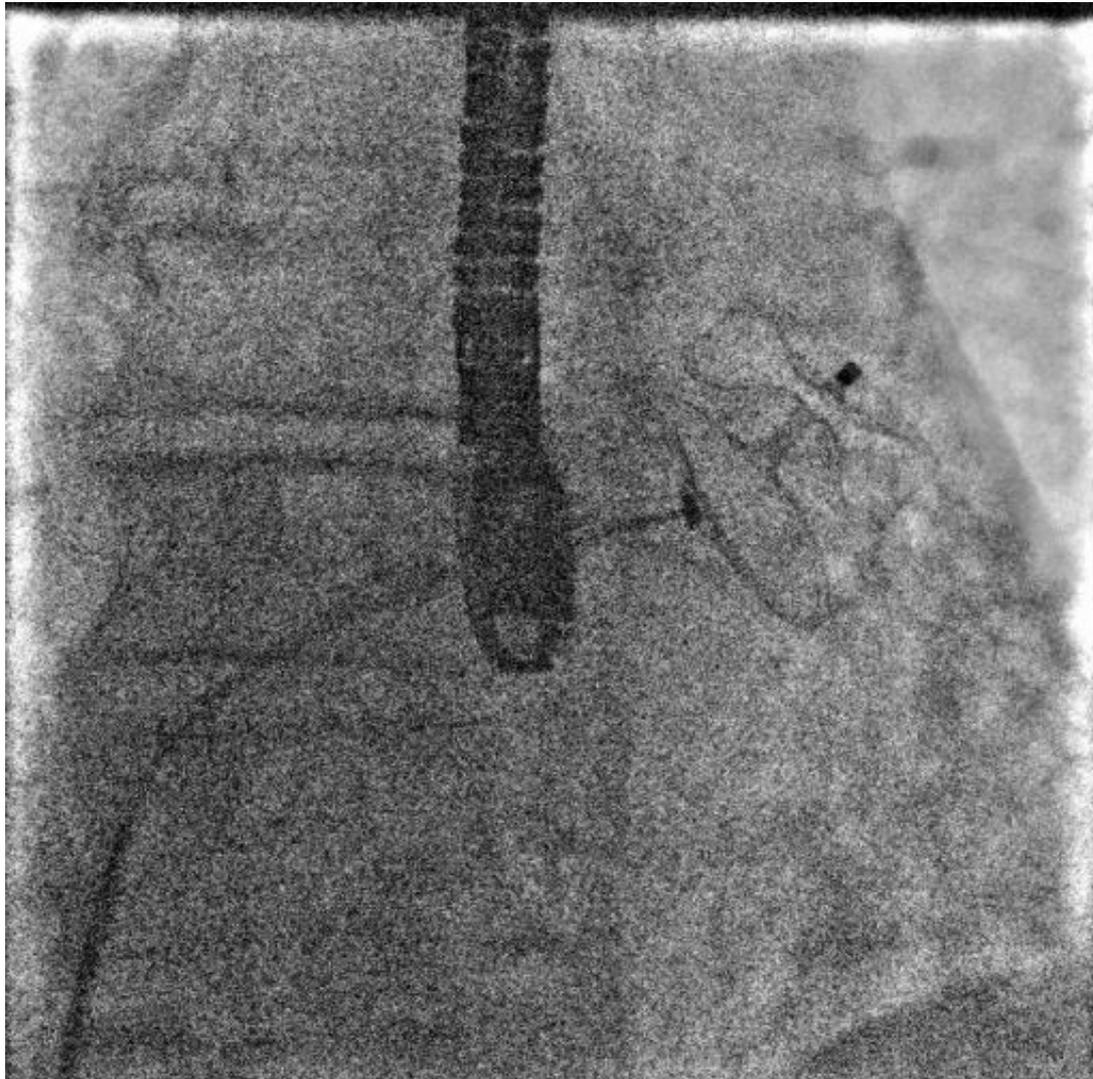
# 7. Test di trazione



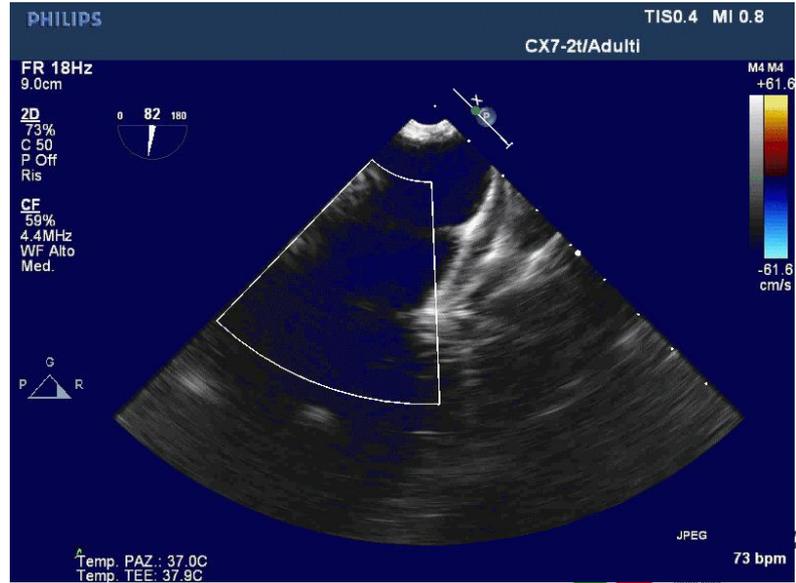
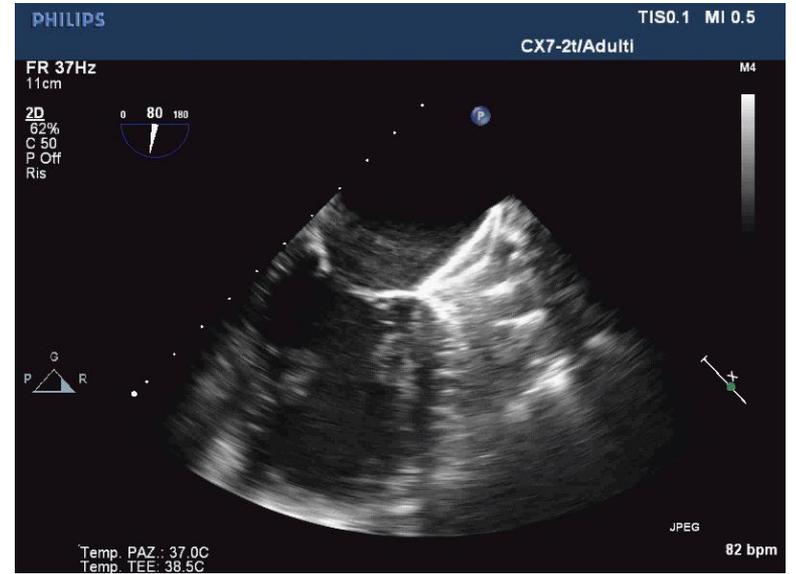
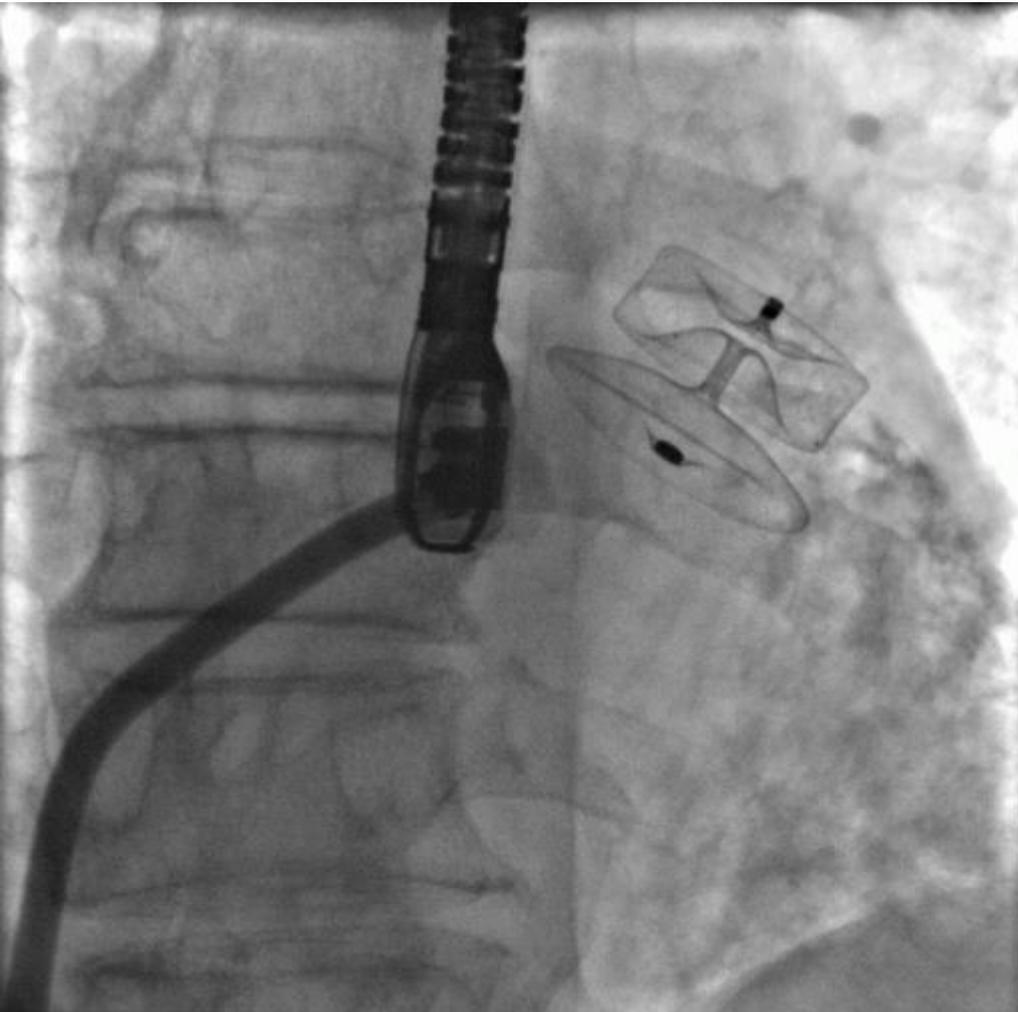
# 8. Rilascio del device

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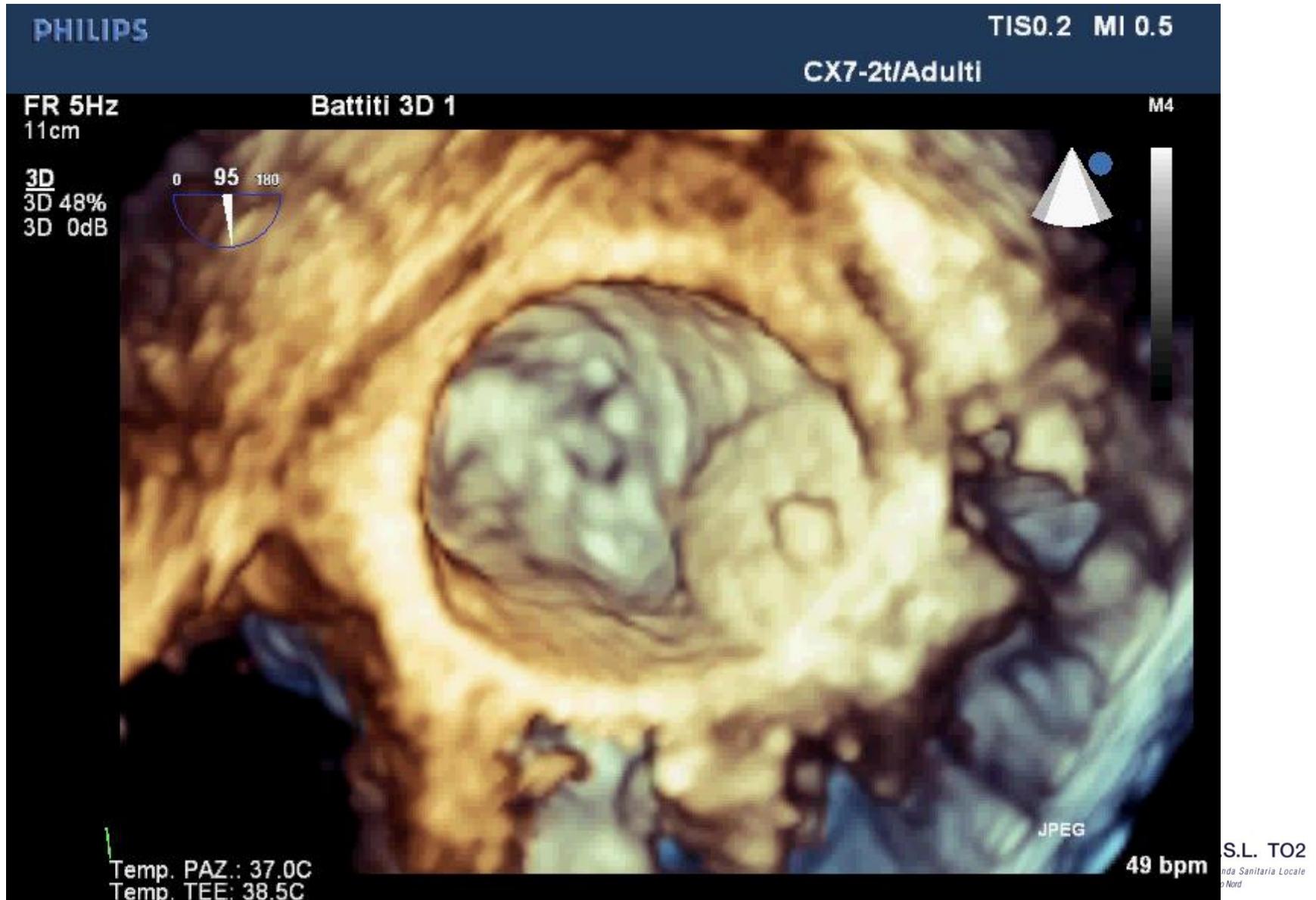
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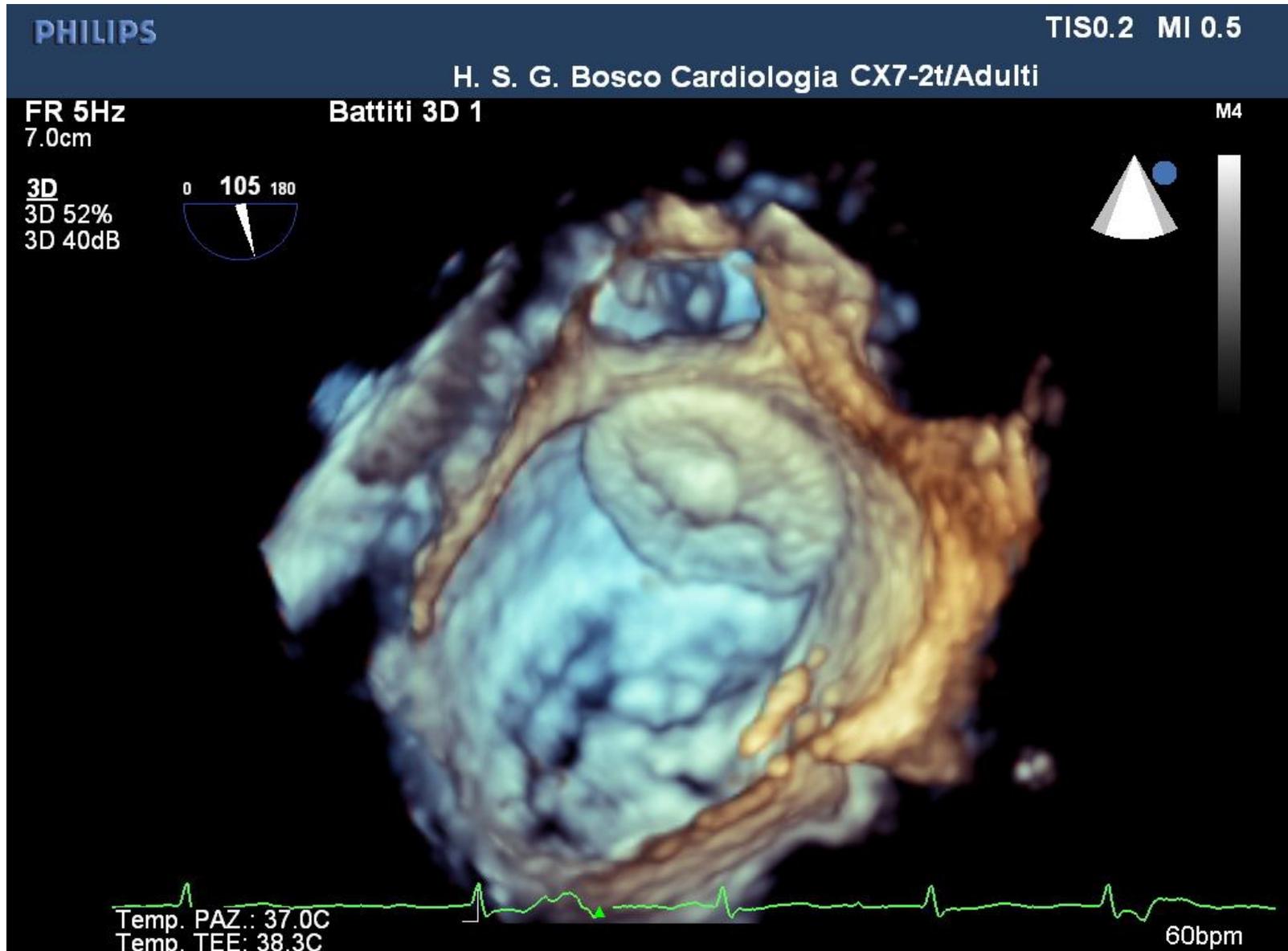
# Risultato finale



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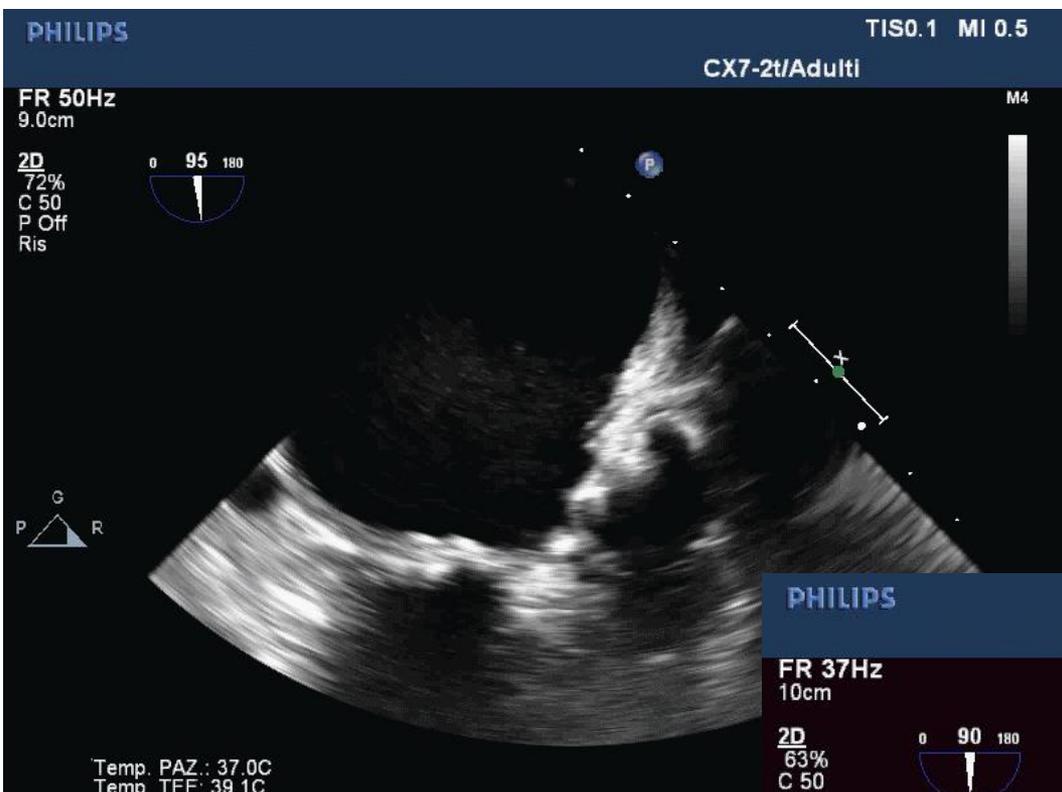


# Follow up post-procedura

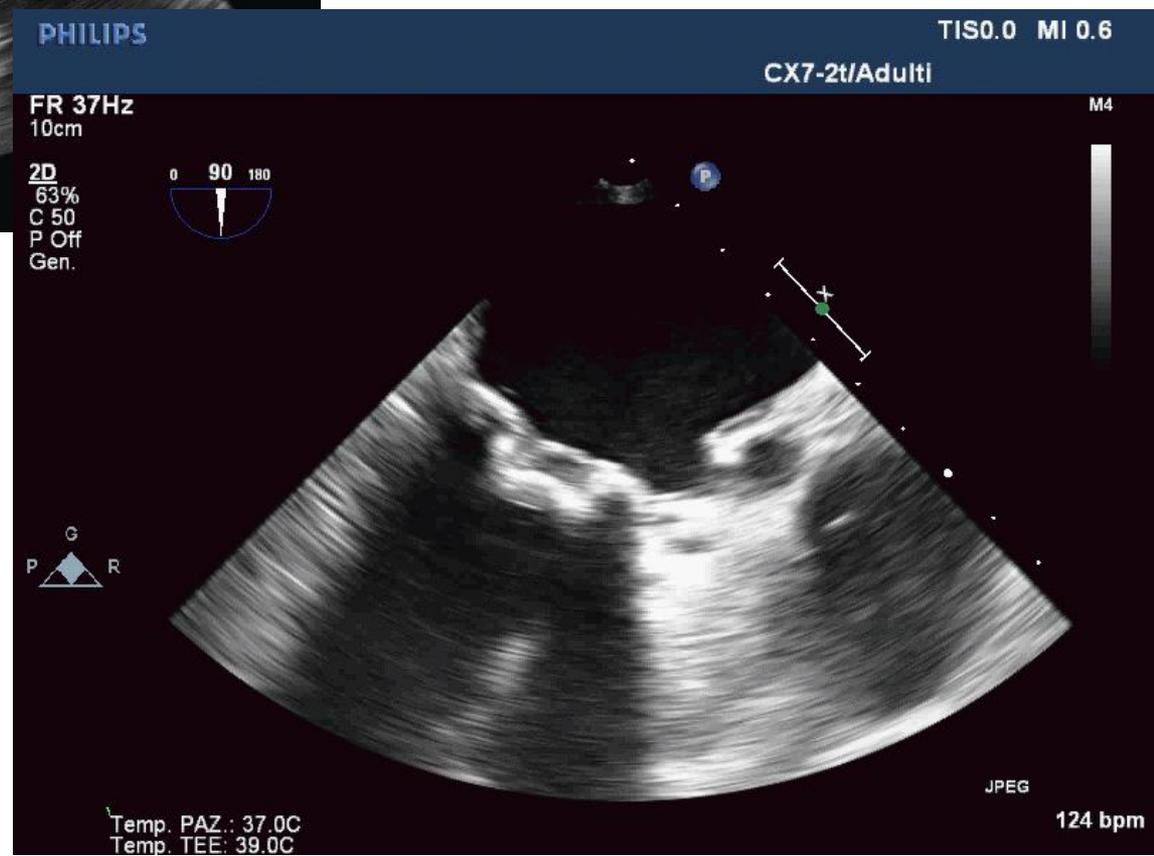
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- Controllo eco TT dopo 24 ore per monitorare se presente versamento pericardico, eventuali complicanze
- Paziente dimissibile dopo 24-48 ore
- Eco TE di controllo dopo 3-6 mesi → leak paraprotetici, trombosi su device



Dopo 6 mesi ...



# Leak nel follow up a 6 mesi

