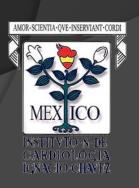


Ventricular Septal Defect from A to Z

HCMC Pediatric Cardiology and Congenital Heart Disease Society

January 9 - 11, 2013 Ho Chi Minh city, Vietnam

PULMONARY AV FISTULA CLOSURE: TIPS AND TRICKS



Disclosure Information



PULMONARY AV FISTULA CLOSURE: TIPS AND TRICKS

Carlos Zabal MD, FACC

As a faculty member for this program, I disclose the following relationships with industry:

(GRS): Grant/Research Support (C): Consultant (SB): Speaker's Bureau

(MSH): Major Stock Holder (AB): Advisory Board (E): Employment

(O):Other Financial or Material Support

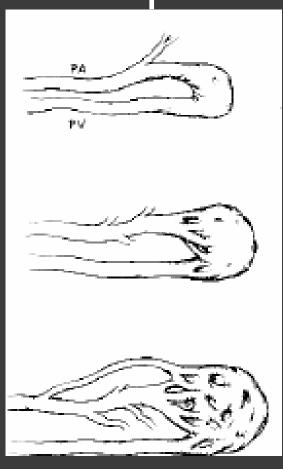
St. Jude Medical: C, O.



FACTS

- Direct artery to vein connections in the lung.
- Most often associated with hereditary hemorragic telangiectasia syndrome.
- They can be single or multiple in one or both lungs.
- 65% located in the lower lobes.
- Produce desaturation and pradoxic emboli.

ANATOMY Simple



Complex

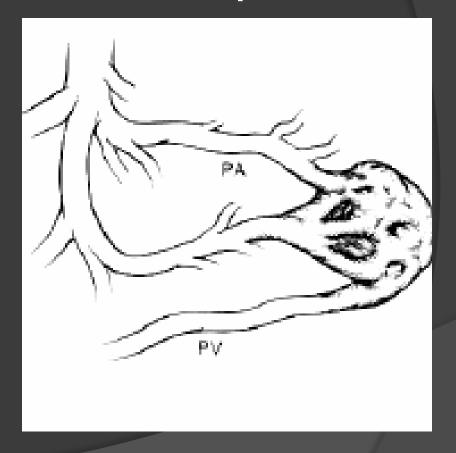


IMAGE DIAGNOSIS

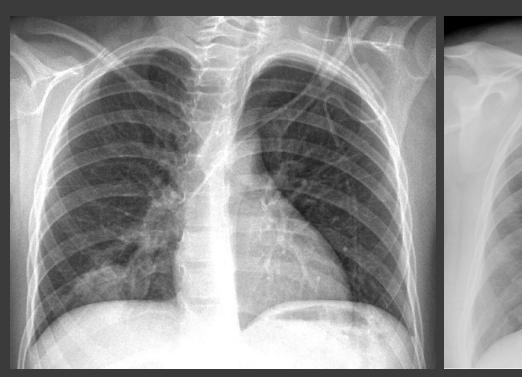
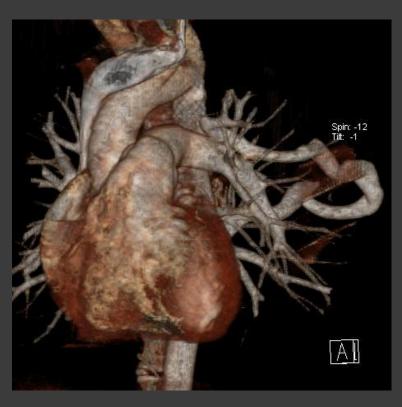




IMAGE DIAGNOSIS





TREATMENT OPTIONS

- Embolization.
 - Liquids and particles.
 - Detachable balloons.
 - Coils.
 - Occluders.
 - Plugs.
- Exclusion.
 - Covered stents.
- Surgery.

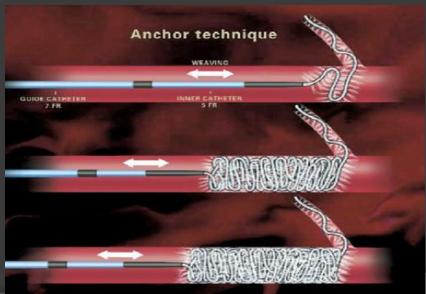


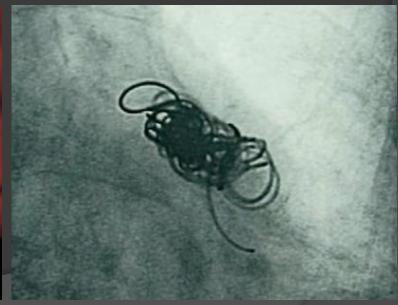




STRATEGIES

- Occlude all feeding vessels.
- If using coils, anchor a big one in an adyacent vessel, and then pack with smaller coils (anchor technique).



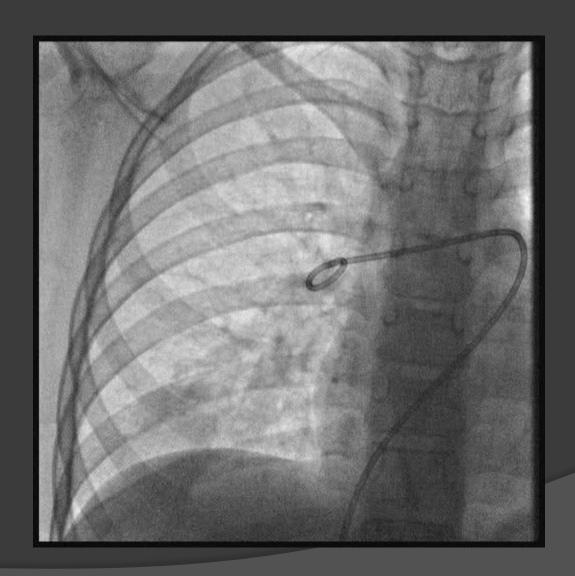


STRATEGIES

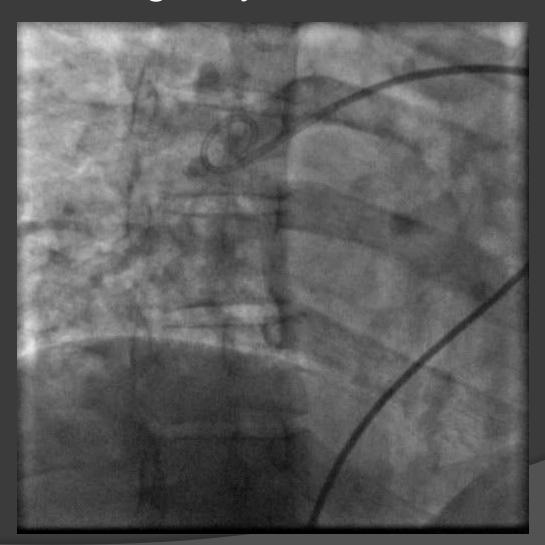
- Occluders or plugs are easier to use but cost more.
- Frequent use of multiple devices.



9 yo girl. SaO₂ 88% on 100% O₂



18 yo boy. SaO₂ 72% on room air. Four sessions through 6 years.



TIPS

- Plan your strategy with the CT before the actual procedure.
- Coaxial catheters are useful y tortuous courses.
- Avoid air or clot in the catheters since they can embolize to the systemic circulation.
- Before finishing procedure, make a general angio to be sure you closed all feeding vessels.
- Follow-up with CT to ensure closure and look for new fistula.