Covering Every Case: The SABER™ PTA Dilatation Catheter

A discussion with J.A. Mustapha, MD, and Craig Walker, MD, on how the SABER™ Catheter provides an important option for lower extremity endovascular therapy.



Dr. Mustapha is Director of Cardiovascular Catheterization Laboratories, Metro Health Hospital in Wyoming, Michigan. He has disclosed that he is a paid consultant to Cordis, does research with TriReme, and is principal investigator of the Chocolate BAR registry.



Dr. Walker is Founder, President, and Medical Director, Cardiovascular Institute of the South in Houma, Louisiana. He has disclosed that he is a paid consultant/speaker for TriReme and Cordis

What characteristics of the SABER™ PTA Dilatation Catheter differentiate it from other available balloons?

Dr. Mustapha: The true low profile of the entire balloon and the shaft make the SABER™ Catheter unique. Many balloons are described as being low profile. This is usually referring to the balloon itself. With the SABER™ Catheter, both the balloon and shaft have a low profile.

The second point to emphasize is the tremendous pushability of the shaft of the balloon, which enhances the already low-profile portion. The combination of its low profile and excellent shaft for pushability makes it excellent for trackability. The combination of the balloon's low profile, pushability, and protractability make it an excellent balloon that will add a significant value to the therapy for infrainguinal vessels.

Dr. Walker: We are interested in getting the SABER™ Catheter. It's an 0.018-inch-based wire balloon that comes in diameters from 2 to 10 mm. In particular,

the 10-mm diameters are unique in terms of the 0.018-inch-based balloons. That allows us to use a smaller sheath to dilate fairly big vessels. The sizes up to 6 mm in diameter are up to 300-mm long. These longer balloons are important for long-segment disease.

I am interested in this concept of a dual-hydrophilic coating that provides durability and hydrophilicity, and therefore, diminished friction. The fact that the balloon itself is made of DURALYN® and therefore has highly controlled compliance is somewhat of a distinguishing characteristic due to the probability of not overdilating those segments.

How do the inflation times of this balloon compare to others?

Dr. Mustapha: When I compared the deflation and inflation times of this balloon to others, I found that the deflation time of this balloon is significantly faster than other balloons. In my experience, the inflation time is similar.

When would you use the SABER™ Catheter over the Chocolate® PTA Balloon?

Dr. Mustapha: It is well known that low-profile sheaths have a lower access complication rate. A 4-F sheath plays a major role when we access diseased vessels. The SABER™ Catheter allows use of large-diameter balloons, such as 5 or 6 mm, without having to change the sheath. This can mean the difference between failure and success, especially during a TAMI procedure.

The SABER™ Catheter is a phenomenal balloon when doing transtibial intervention because of its ability to track and its pushability. A third attribute that makes the SABER™ Catheter extremely attractive, and a scenario in which I might use it before the Chocolate® PTA Balloon Catheter is when we are doing transpedal loop revascularization. Other than that, if we have a larger-diameter sheath, the Chocolate® PTA Balloon Catheter is phenomenal in the majority of the same

vessels that were mentioned in the earlier discussion. In addition, in vessels where we attempt to open with a traditional balloon and continue to have resistance, the Chocolate® PTA Balloon Catheter can be used to resolve the waist without an undue risk of complication. If there is evidence of moderate to severe calcification, we tend to go straight to the Chocolate® PTA Balloon Catheter, inflate it slowly, and keep it up for 2 minutes to simulate the same results in terms of low dissection and the low perfusion rate that we saw in the Chocolate BAR study.

Would you employ the same technique for the SABER™ Catheter as you would Chocolate®?

Dr. Mustapha: Because we learned from the Chocolate BAR that inflating the balloon for more than 30 seconds and maintaining it for 2 minutes gives us such a good result, we're doing the same now with the SABER™ Catheter. ■

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