

CASE REPORT

Removal of Mixed-Morphology, Multivessel Lower Extremity Clot With 3 Passes of the Pounce™ Thrombectomy System

By Jay Mohan, DO, FACC, FSCAI, FASE, RPVI

Patient Presentation

A woman in her early 80s presented with approximately 2 weeks of right lower extremity pain with numbness and tingling. Patient history included severe peripheral artery disease, a history of left femoral stent placement, and atrial fibrillation. The patient had been taken off apixaban due to hemorrhoidal bleeding.

Diagnostic Findings

Preoperative assessment with duplex ultrasound showed subacute limb ischemia of the right lower extremity with suspected embolus in the popliteal artery. An initial angiogram showed a total occlusion of the popliteal artery that further suggested organized embolic material (Figure 1).

Treatment

Left femoral access was achieved and a 7 Fr, 45 cm Destination™ Peripheral Guiding Sheath (Terumo Interventional Systems) was placed up and over into the right superficial femoral artery (SFA). A .035 Glidewire Advantage® Peripheral Guidewire (Terumo Interventional Systems) and Quick-Cross™ Support catheter (Philips) were then used to cross the total occlusion in the right popliteal artery. The Pounce™ Thrombectomy System (Surmodics, Inc.) was introduced with the baskets deployed in the popliteal artery and the funnel in the distal SFA (Figure 2). Two passes were performed in the popliteal artery and a

significant amount of thrombus was removed. Angiography showed improved popliteal flow while revealing an occlusion within the mid-anterior tibial (AT) artery (Figure 3). An additional pass with the Pounce™ System removed a significant amount of chronic material. Repeat angiography showed TIMI (thrombolysis in myocardial infarction) grade 3 flow into the foot (Figure 4). Intravascular ultrasound confirmed no evidence of dissection or residual thrombus.

Postprocedure Outcome

The patient tolerated the procedure well with no complications and was discharged the next day with instructions to take prescribed aspirin and clopidogrel. Three passes of the Pounce™ Thrombectomy System aided in removal of multivessel, mixed-morphology clot, with subsequent restoration of robust blood flow to the foot. ■



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Figure 1. Total occlusion of the right popliteal artery.



Figure 2. Deployment of the Pounce™ Thrombectomy System in the right popliteal artery.



Figure 3. Restored flow in the right popliteal artery following two passes of the Pounce™ Thrombectomy System. Angiogram revealed occlusion in the mid-AT artery.



Figure 4. Final angiogram showing restored flow in the AT, posterior tibial, and dorsalis pedis arteries.

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