



CGUARD[™]EPS System – My experience in treatment of carotid lesions: Mechanical behavior and clinical results

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Background

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Stent name X-act 1.9% Nexstent 3.3% Wallstent 2.3% Precise 4.1%	
Protégé 3.0% 3.0% Occu Acculink 4.2% 3.7% post-proc Exponent 11.8% 5.9% post-proc Total 3179 2.83% 1.9%	events Ir

No stent or current EPS protects against late embolization

Bosiers et al. Eur J Vasc Endovasc Surg 2007;33



- procedure related events can be caused by lesion crossing, pre- and post dilatation, but
- particular attention is focussed on the stent design, because post-procedural DW-MRI lesion were significantly more present in patients treated with an open-cell stent vs. treated with a closed-cell stent^{1,2}



- Purpose: Evaluation of clinical implantation
 procedure and in vitro investigation of mechanical
 properties of the novel double-layer stent for the
 carotid artery.
 1. Park et al. J Neurosurg 2013; 119: 642-647
 - 2. Nikas et al. J Cardiovasc Surg 2011; 52: 779-793



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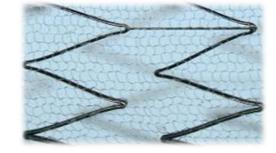
CGUARD, Inspire MD, Penumbra



- » Nitinol stent platform
- 6F self-expanding system
- 4 radiopaque markers
- Smart Fit™ Technology
- Open cell stent platform
- Dual layer design with MicroNet™
- Prevents embolization during placement and postdilation, offers greater confidence during post dilation
- > Prevents plaque prolapse and late embolization
- >> Flexible without compromising plaque scaffolding
- Conformable, reconstructs to natural anatomy
- Extremely precise placement
- Screat visibility under all imaging modalities
- Allows for natural endothelialization
- Does not inhibit flow to branch vessels
- ➢ MicroNet[™] encapsulates struts mitigating fish scaling

Design

Advantages

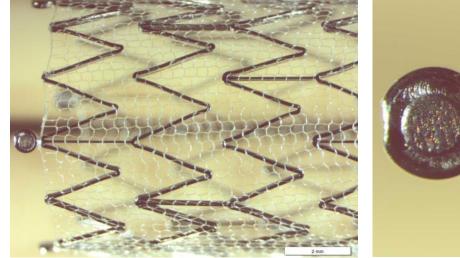


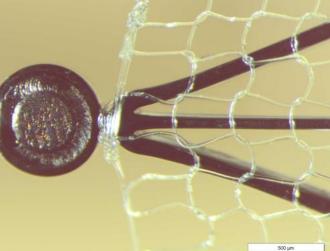


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• CGUARD, Inspire MD, Penumbra

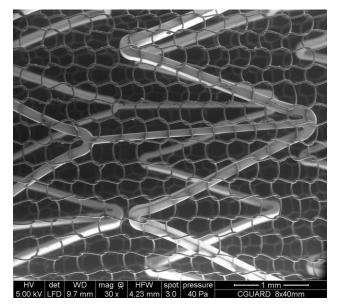


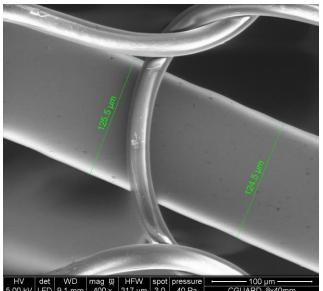


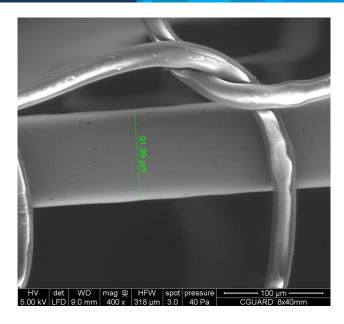




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Inside: open-cell Nitinol-Stent (Struts 92 and 125μm) Outside: closed-cell PET (25 μm) Cell-size: ca. 165 μm

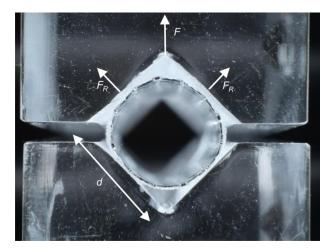
- Carotid Embolic Prevention System CGUARD[™] were investigated in the dimension 8x40 mm:
 - Radial force

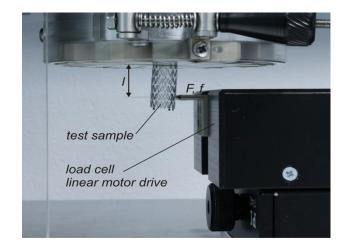
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- Bending stiffness
- Foreshortening
- Collapse pressure
- Vessel wall adaption





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Age, mean	73.1 ± 6.3
Gender, m/f	21m / 9 f
Risc factors	
Art. Hypertension	50 %
Diabetes mellitus	35 %
Hyperlipidemia	45 %
Smoking	50 %
Mean Stenosis %	84.1 ± 7.9
Symptomatic (%)	25 (83)
TIA	21 (70)
Amaurosis fugax	4 (13)
Asymptomatic (%)	5 (17)
Lesion length, mm	16.6 ± 2.1
Stents, n	
7/40 mm	1
8/30 mm	9
8/40 mm	14
9/30 mm	3
9/40 mm	3

Wissgott et al. J Endovasc Ther 2016, in press



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Results

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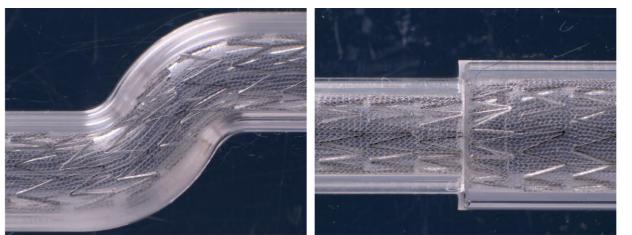
	RX	
Mean profile	8.412 mm	Expanded stent
	8.354 mm	Proximal stent end
	8.458 mm	Distal stent end
Radial force	2.28 N	Expanded to 7 mm
	4.28 N	Compressed to 7 mm
Bending stiffness	530.18 Nmm²	Stent on delivery catheter
	59.88 Nmm²	Fully expanded stent
Stent length	42.5 mm	Mounted on delivery catheter
	41.8 mm	Expanded to 7 mm
Foreshortening	0.7 mm/1.8 %	Expanded to 7 mm
Collapse pressure	0.18 bar	



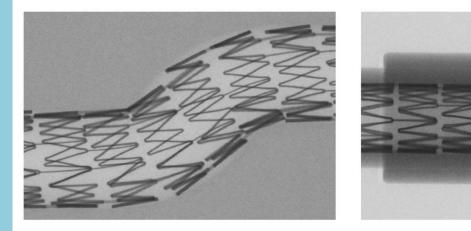
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Results

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Stent adaption in a straight vessel model with an inner diameter step from 7 to 5 mm for InspireMD CGUARD (macrophotography)



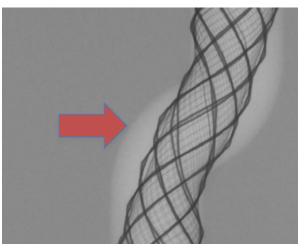
Stent adaption in a straight vessel model with an inner diameter step from 7 to 5 mm for InspireMD CGUARD (micro CT)



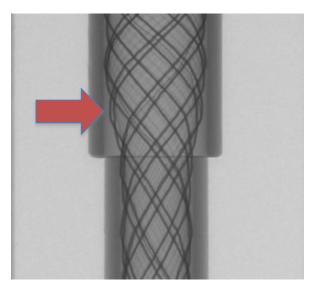
Results

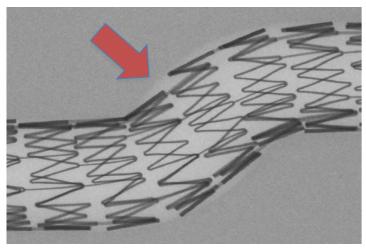
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Wall adaption in comparison to Competitor

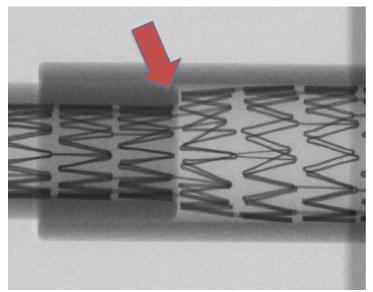


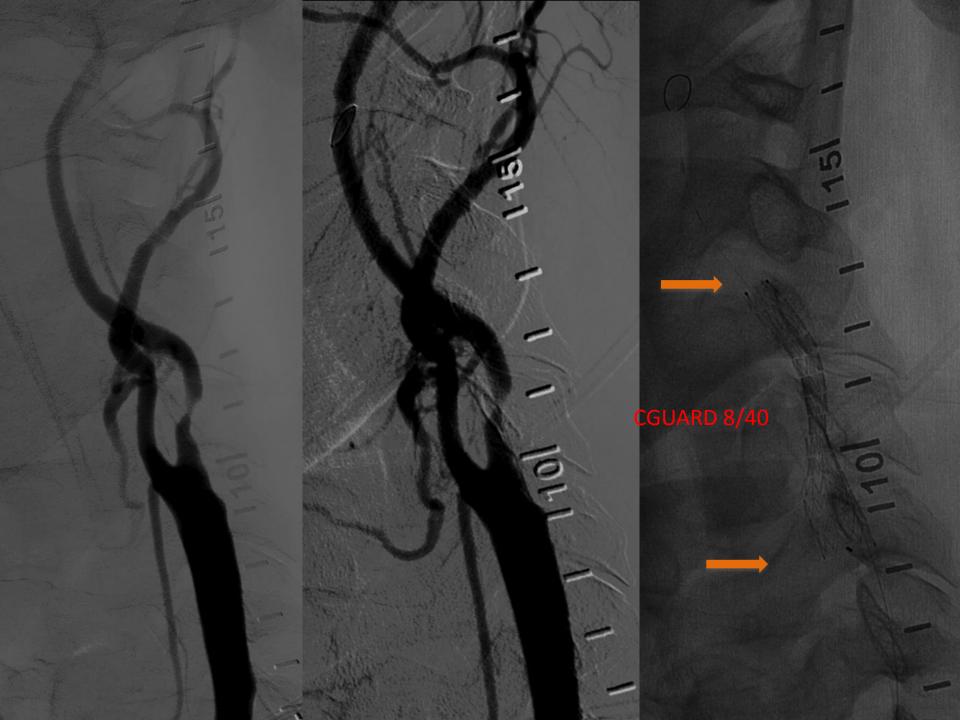
Competitor

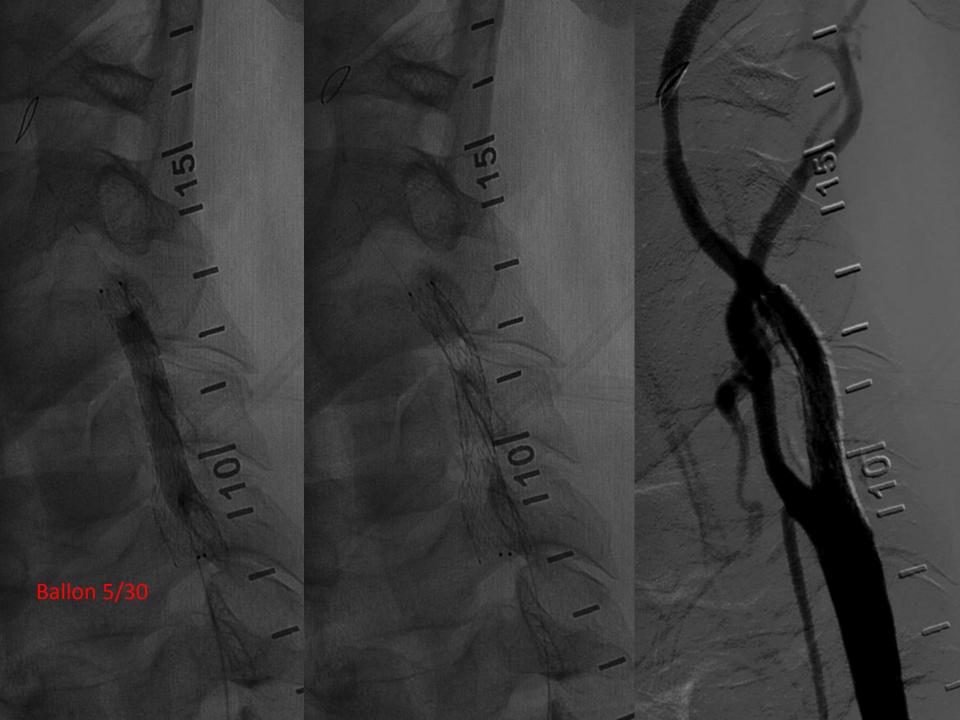




CGUARD



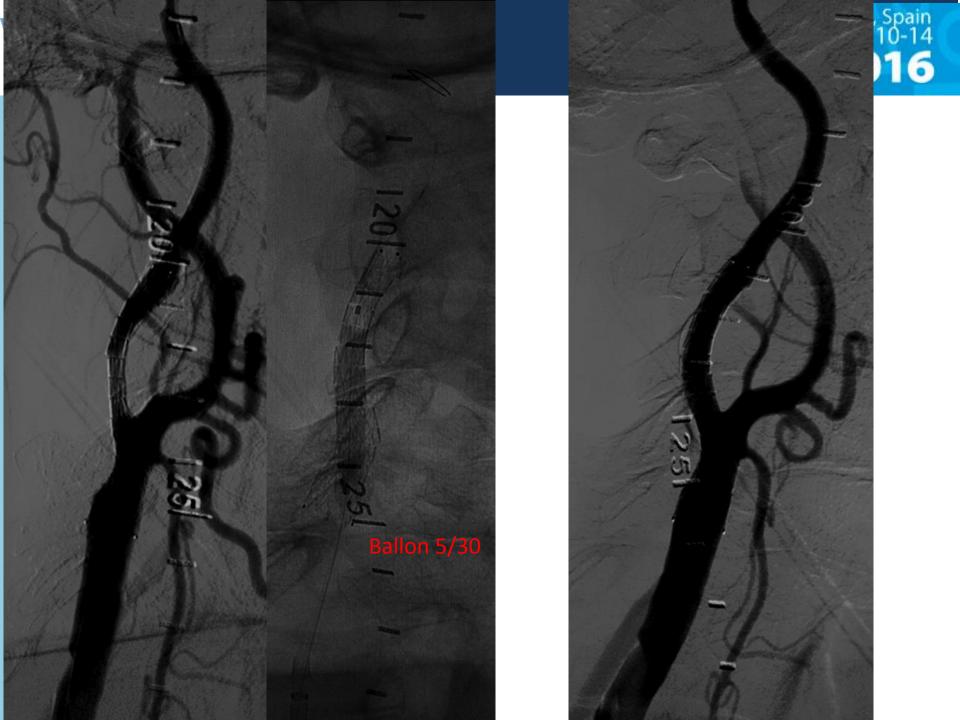






arcelona, Spain ember 10-14 E **2016**

CGUARD 8/40







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Final Result







- Clinical results:
 - 30 patients were consecutive treated and have completed a 6 months FU
 - Technical success 100 %
 - -No perinterventional complications
 - No peri- or postinterventionell Minor- or Majorstrokes
 - -Median treatment time was 42.2 min





- Clinical results:
 - The modified Rankin Scale of the symptomatic patients improved from 1.56 \pm 0.57 prior to intervention to 0 postinterventionally
 - DUS observed that all stents were fully patent
 - peak systolic velocity (PSV) was 67.4 ± 7.4 after 30d and 71.2 ± 15.1 after 6 months
 - DWI-MRI from 19/30 patients after 30 days and 6 months detected no new ipsilateral lesions



Discussion

CGUARD

- Schofer et al. CARENET Trial (JACC Cardiovasc Interv 2015;8:1229-1234)
 - 30 Pat.
 - 100 % techn. success
 - No complications
- Musialek et al. PARADIGM-Study (PCR 2015)
 - 71 Pat.
 - 100 % techn. Success
 - no minor/major stroke





- The novel double-layer stent CGuard with the combination of an open-cell nitinol stent and a micro-mesh coverage leds to prevention of post-procedural embolic events in this moderate series of otherwise routine CAS in consecutive patients.
- The tested stent is easy and save to implant,
 because it has no foreshortening and a very
 smooth wall adaption.





- CGUARD stent provides a high radial force and strong support for expanded stenotic vessel sections.
- Its structure adapts well to changes in diameter and direction of tortous vascular anatomies.
- The novel feature for embolic protection, the MicroNet PET mesh, causes no measurable changes of specific mechanical parameters



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Thank you for your attention

