


CARDIOVASCULAR FLASHLIGHT

Catch me, if you can!

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A 78-year-old gentleman with symptomatic aortic valve stenosis (EuroSCORE: 26.9%) was referred for transcatheter aortic valve implantation (TAVI). Open heart surgery was denied due to a floating thrombus in the aortic arch near the origin of the left common carotid artery, considered as a source of two left-sided ischaemic strokes 3 months prior to TAVI (Panels A and B; see Supplementary material online, Video S1). The patient underwent transfemoral TAVI with the peri-procedural use of a cerebral protection device (CE ProTM Claret Medical Inc., Santa Rosa, CA, USA), deployed via the right brachial artery. The filters were deployed within the brachiocephalic and left carotid artery, respectively (Panel C). As the system was retrieved after successful TAVI, a significant amount of debris was found within the filters (Panel D). In post-procedural transoesophageal echocardiography, the thrombus was not detectable (see Supplementary material online, Video S2). Diffusion-weighted magnetic resonance imaging ruled out silent cerebral embolism (Panel E). The use of a dedicated cerebral protection device might reduce peri-interventional embolic burden in patients undergoing TAVI.

Supplementary material is available at European Heart Journal online.

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