

TrelliX® Embolic Coils

FOR POST TRAUMATIC DIRECT CCF

CASE STUDY

Odense University Hospital
Odense, Denmark

Gyula Gál, MD
Department of Radiology

A 55-year-old male with severe head trauma presented with a direct carotid cavernous fistula (CCF) on the left carotid sinus. Baseline angiography revealed a high flow fistula.

Coil embolization was planned using Trellix Embolic Coils. A long Neuron MAX™ (Penumbra, Inc.) sheath was used and a Prowler Plus (Johnson & Johnson) microcatheter was then navigated to the cavernous sinus. A Copernic balloon catheter (Balt) was inflated in the carotid artery to prevent microcatheter kickback during coil delivery. Following deployment of four 16x20 Trellix coils (the largest available), flow remained high. Lesion access was lost due to microcatheter kickback and attempts to recannulate the cavernous sinus failed.

Because the patient had adequate crossover blood flow, the Copernic balloon was inflated for 10 minutes to allow the previously delivered coils to embolize. Expecting incomplete fill, the fistula occluded. Following an additional 15 minutes, a completion angiogram confirmed complete thrombosis of the CCF. Results at 6 months showed complete embolization.

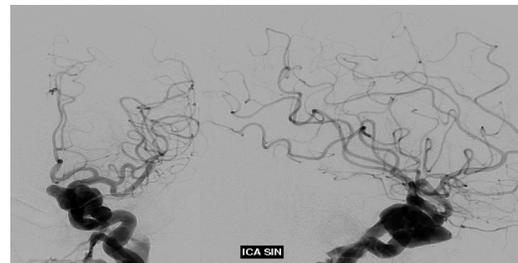
“Complete CCF occlusion with such low packing density would not have been possible with traditional embolic coils. The Trellix Embolic Coils made the difference.”

Gyula Gál, MD

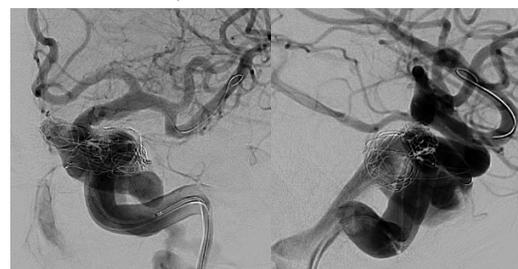
INDICATION: The Trellix Embolic Coil System is intended to obstruct or occlude blood flow in vascular abnormalities of the neurovascular and peripheral vessels. Indications include intracranial aneurysms, other neurovascular abnormalities such as arteriovenous malformations and arteriovenous fistulae, and arterial and venous embolizations in the peripheral vasculature.

INDICATION: The Trellix Detachment Controller System is intended for use with the Trellix Embolic Coil System which is intended to obstruct or occlude blood flow in vascular abnormalities of the neurovascular and peripheral vessels. Indications include intracranial aneurysms, other neurovascular abnormalities such as arteriovenous malformations and arteriovenous fistulae, and arterial and venous embolizations in the peripheral vasculature.

BASELINE IMAGING



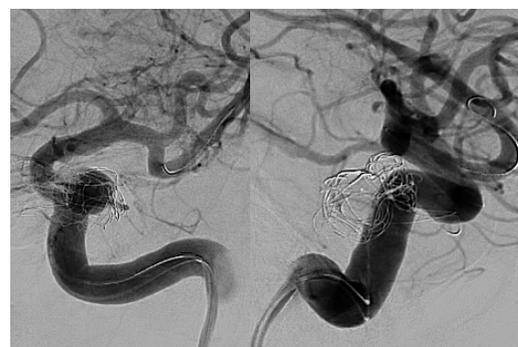
POST DEPLOYMENT, 4 TRELLIX COILS



10-MINUTE BALLOON OCCLUSION FOR INCREASED STASIS



POST EMBOLIZATION



6-MONTH FOLLOW-UP



Patent: www.shapemem.com/patents
Shape Memory Medical and Trellix are registered trademarks of Shape Memory Medical Inc.
Indications, contraindications, warnings, and instructions for use can be found in the product labeling supplied with each device.

CE 0297

LTI038 Rev B.

shape
memory medical

© 2021 Shape Memory Medical Inc. All rights reserved.
807 Aldo Avenue, Suite 109, Santa Clara, CA 95054 USA
+1.408.649.5175 info@shapemem.com | www.shapemem.com