TEVAR with GORE C-TAG (Active Control System)

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Case Presentation

- 80 year-old Patient
- Mild CAD (NYHA I)
- Hypertension
- Hypercholesterolemia
- Type II Diabetes

Case Presentation

- External emergency department 05.10.2017
- Acute chest and interscapular pain
- Severe hypertension
- IMH with prominent Ulcer like projection

Case Presentation

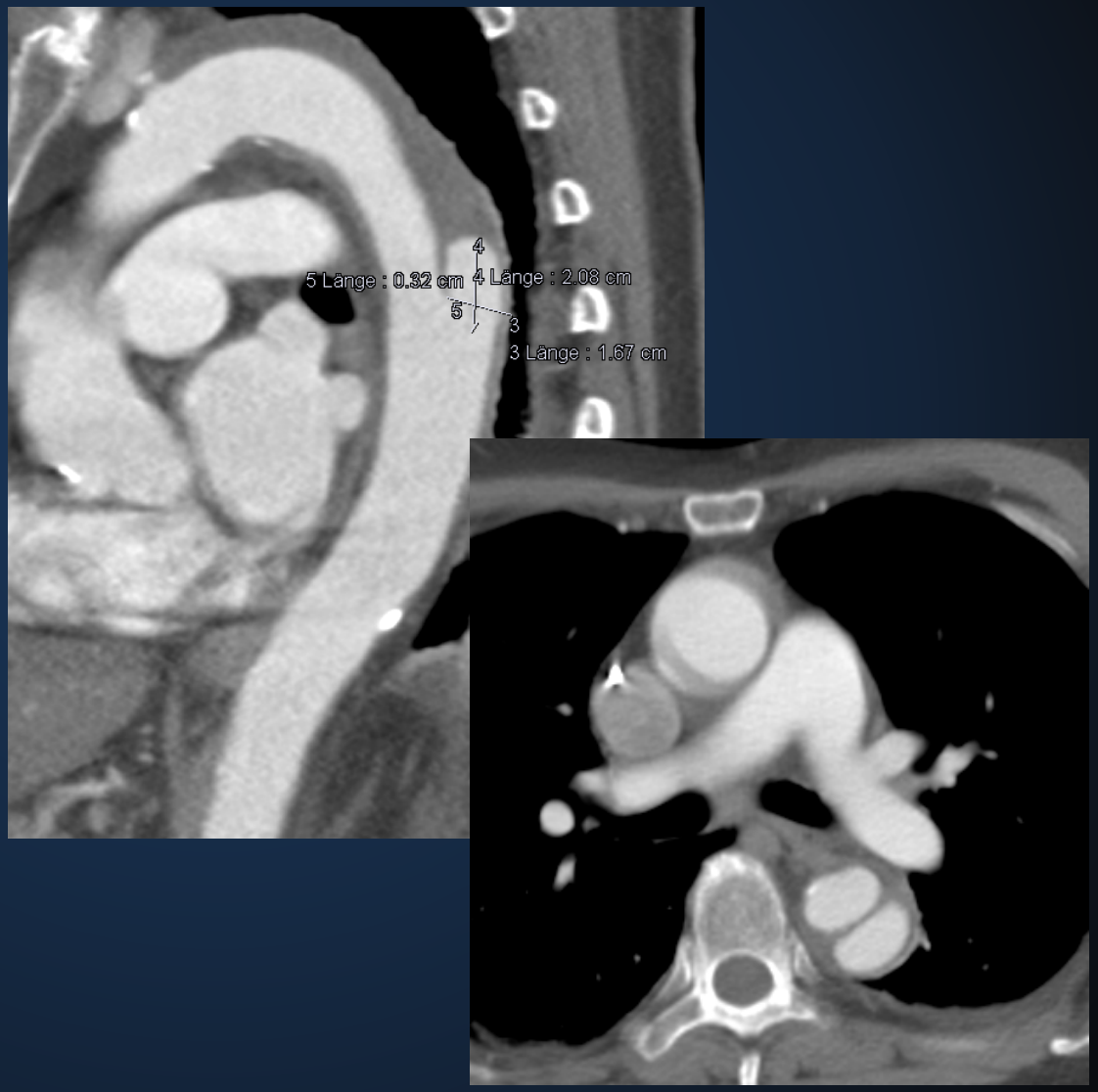
- ICU Monitoring
- Antihypertensive medication
- Analgesic medication

Case Presentation

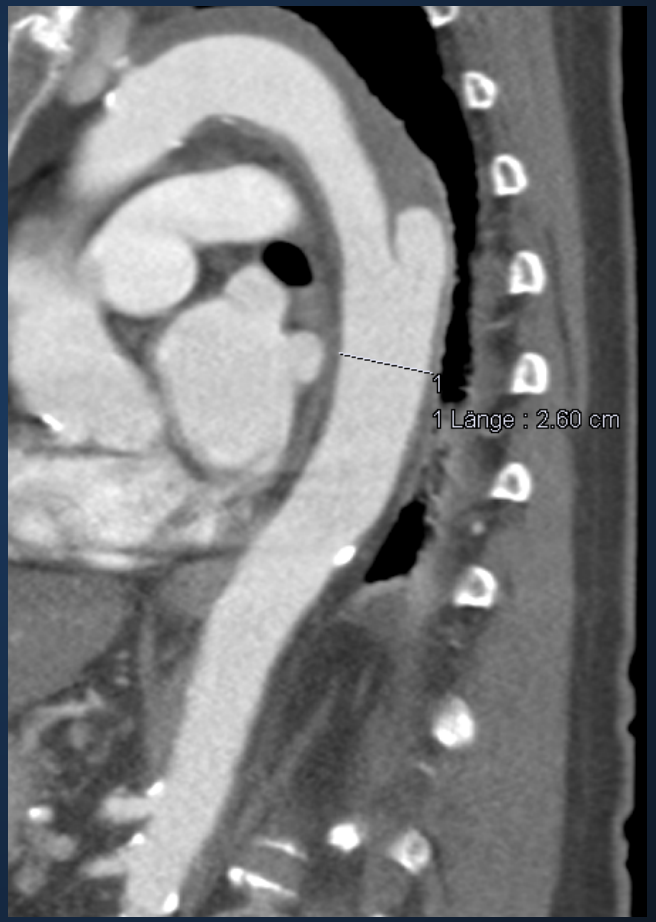
- Refractory pain

  14.10.2017

- Control CTA



Case Presentation



Case Presentation

- Preoperative CSF drainage
- Stentgraft over the right groin
- Angiography over the left groin
- Gore TAG GTM 262610
- Gore TAG GTM 282815
- Partial overstenting of the LSA

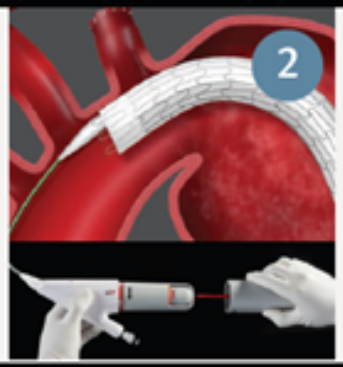
GORE® TAG® Conformable Thoracic Stent Graft with ACTIVE CONTROL System

Deployment Sequence

Device Positioning to Target

- Position device on outer curve
- Release stored energy in the device catheter: Advance stent graft past target location and pull back to desired position

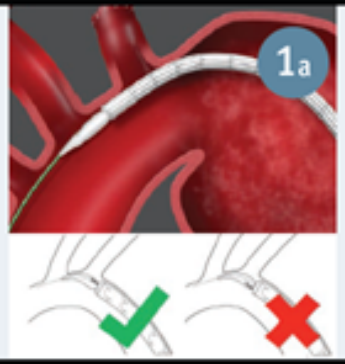
Primary Deployment to Intermediate Diameter



- Rotate and pull gray Primary Deployment Handle. Device will deploy to its intermediate diameter (~50% of device nominal diameter).

OPTIONAL Steps to Optimize Positioning

Verify Proximal Alignment Marker Position



- If optional angulation control will be used, ensure the proximal alignment marker is positioned toward the greater curve relative to the guidewire

Angulation Control at Intermediate Diameter

- At physician discretion, rotate the Angulation Control Dial clockwise until proximal angulation is optimized
- Proximal angulation cannot be reversed or undone
- Therefore, rotate the Angulation Control Dial slowly and deliberately throughout this step, using only the smallest angulation necessary to achieve desired graft alignment

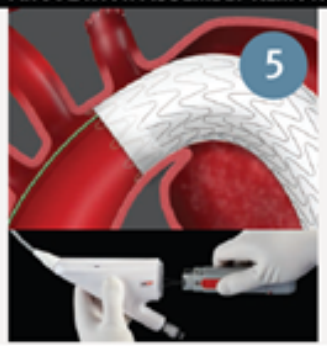
Secondary Deployment to Full Diameter

- Rotate and pull gray Secondary Deployment Handle. Device will deploy to its full diameter.
- At this stage, the stent graft is still attached to the catheter (via lockwire)

Lockwire Removal

- Rotate and pull red Lockwire Handle. Lockwire removal releases the stent graft from the catheter.
- Pull with a steady motion

Angulation Assembly Removal



- Pull back red slider, rotate and pull gray Angulation Assembly Handle
- Pull with a steady and continuous motion
- Withdraw catheter under fluoroscopy to ensure safe removal from stent graft

Angulation Control at Full Diameter

- At the physician's discretion, rotate Angulation Control Dial clockwise until proximal angulation is optimized
- Proximal angulation cannot be reversed or undone
- Therefore, rotate the Angulation Control Dial slowly and deliberately throughout this step, using only the smallest angulation necessary to achieve desired graft alignment

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