MVPTM MICRO VASCULAR PLUG SYSTEM AN OPTION FOR PERIPHERAL EMBOLIZATION

CASE REPORTS





TYPE II ENDOLEAK FROM THE INFERIOR MESENTERIC ARTERY

Case provided by:

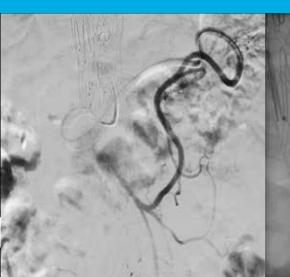
Nuno V Dias MD, PhD Associate Professor Vascular Center Skåne University Hospital Malmö Malmö SWEDEN

HEPATIC ARTERY AND PORTAL VEIN FISTULA

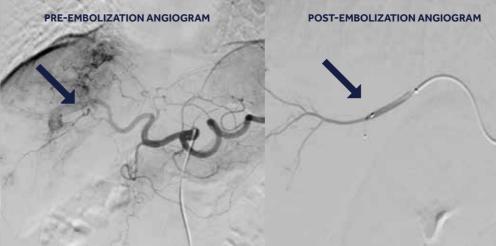
Case provided by:

Jafar Golzarian, MD
Professor of Radiology and Surgery
University of Minnesota Medical Center
420 Delaware Street S.E.
B228-A Mayo Memorial Building
Minneapolis, MN 55455









PATIENT PRESENTATION

Patient is a 72 year old male with an abdominal aortic aneurysm that had previously been treated with an infrarenal EVAR and thereafter subsequent proximal extension with a fenestrated cuff.

Due to continuous expansion of the AAA and the presence of a type II endoleak from the IMA inferior mesenteric artery, it was decided to conduct an embolization of the IMA.

DEVICE

A 5 mm MVPTM microvascular plug system was placed under local anesthesia in the main trunk of the IMA. Access was gained from the SMA fenestration through Riolans Arcade.

A Progreat Omega^{™*} micro catheter from Terumo was used.

PATIENT OUTCOME

The IMA was immediately embolized post procedure and remained embolized at follow up.



Results may vary. Not all patients achieve the same results.

Indications, contraindications, warnings, and instructions for use can be found on the product labeling supplied with each device.



Celiac trunk angiogram showed hepatic artery to portal vein fistula.

Selective right hepatic artery catheterisation showed the early opacification of the portal vein.

DEVICE

5 mm MVP™ micro vascular plug.

PATIENT OUTCOME

MVP[™] plug in the target vessel showed complete occlusion of the fistula.

Results may vary. Not all patients achieve the same results.

CIRCUMFLEX ARTERY BLEED DUE TO TRAUMA

Case provided by:

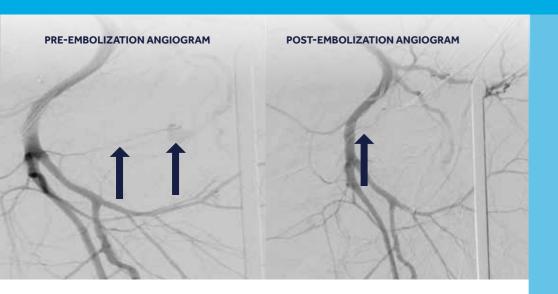
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PRE-CHEMO EMBOLIZATION OF PHRENIC ARTERY TUMOR

Case provided by:

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POST-EMBOLIZATION ANGIOGRAM



CASE DESCRIPTION

Patient has active bleeding due to trauma. The angiogram shows the circumflex iliac artery and the extravasation and the site for embolization.

DEVICE

3 mm MVP™ micro vascular plug system.

PATIENT OUTCOME

The MVP™ plug was deployed in the circumflex lliac artery and stopped the bleeding.

CASE DESCRIPTION

Patient presented with hepatocellular carcinoma. The angiogram showed a tumor in the phrenic artery.

It was decided to embolize the artery shown by the curved arrow before performing chemotherapy to avoid chemo-agents in non target vessels.

DEVICE

5 mm MVP™ micro vascular plug.

PRE-EMBOLIZATION ANGIOGRAM

PATIENT OUTCOME

The patient showed good uptake after placement of MVP™ plug.

The tumor was treated with chemo embolization.

Results may vary. Not all patients achiev

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PATIENT WITH SPLENIC ARTERY TRAUMA

Case provided by:

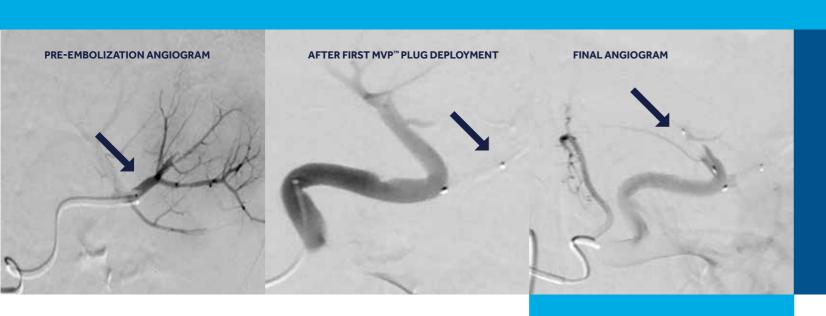
Jafar Golzarian, MD Professor of Radiology and Surgery University of Minnesota Medical Center 420 Delaware Street S.E. B228-A Mayo Memorial Building Minneapolis, MN 55455

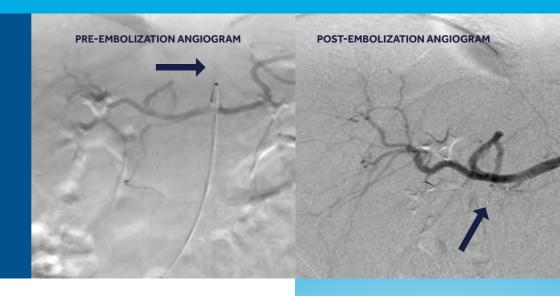
PRE SIRT **MAPPING**

SIRT: Selective Internal Radiation Therapy

Case provided by:

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420 Delaware Street S.E.
B228-A Mayo Memorial Building
Minneapolis, MN 55455





CASE DESCRIPTION

Patient with splenic trauma and extravasation of contrast media.

Patient was treated with two MVPTM micro vascular plug. After the first MVPTM plug, a control angiogram showed more vascular lesions.

Therefore another MVP™ plug was placed.

DEVICE

3 mm and 5 mm MVP[™] micro vascular plug.

PATIENT OUTCOME

The post-procedure angiogram showed occlusion in the vessel. The patient did very well clinically.

A follow up CT scan of the patient showed positive results.

CASE DESCRIPTION

Patient is a 40 year old female with breast cancer metastatic to the liver.

She presents for mapping in preparation for SIRT radioembolization.

Gastroduodenal artery (GDA) was embolized to protect the upper GI tract from non-target embolization with SIRT microspheres.

DEVICE

5 mm MVP™ micro vascular plug.

PATIENT OUTCOME

The GDA artery was immediately embolized.

Results may vary. Not all patients achieve the same results.

Indications, contraindications, warnings, and instructions for use can be found on the product labeling supplied with each device. Results may vary. Not all patients achieve the



GDA EMBOLIZATION FOR A BLEED

GDA: GastroDuodenal Arthery

Case provided by:

Vladimir Sheynzon, MD Associate Professor of Radiology New York Presbyterian Hospital and Columbia Univeristy College of Surgeons and Physicians 630 West 168th Street New York, NY 10032

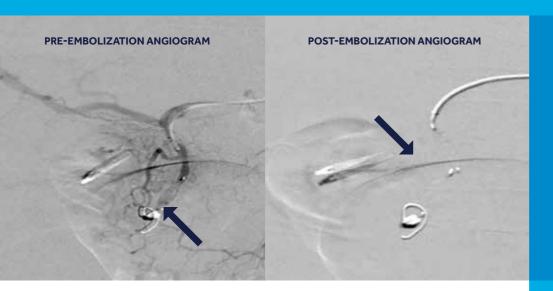
TREATMENT OF PAVM USING MVPTM PLUG

PAVM: Pulmonary Arterio Venous Malformation

Case provided by:

Vladimir Sheynzon, MD Associate Professor of Radiology New York Presbyterian Hospital and Columbia Univeristy College of Surgeons and Physicians 630 West 168th Street New York, NY 10032

POST-EMBOLIZATION ANGIOGRAM



CASE DESCRIPTION

Patient is a 78 year old female with AML in blast crisis, who was admitted for persistent bleeding and melena via NG tube, and found to have duodenal ulcer on endoscopy.

She has had 11 transfusions, unsuccessful in raising hemoglobin.

It was decided to embolize the gastroduodenal artery.

DEVICE

3 mm and 5 mm MVP™ micro vascular pluq.

PATIENT OUTCOME

The GDA artery was immediately embolized.

CASE DESCRIPTION

Patient is a 65 year old female with a history of epistaxis and recently diagnosed brain abscess.

It was decided to embolize this pAVM.

DEVICE

5 mm MVP[™] micro vascular plug.

PRE-EMBOLIZATION ANGIOGRAM

PATIENT OUTCOME

A branch of pulmonary artery was embolized with the 5 mm MVP™ plug.

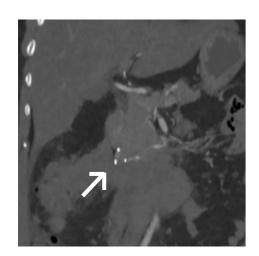
The post procedure angiogram showed a complete occlusion of the pAVM.

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MVPTM PLUG MINIMIZES CT ARTEFACTS







Coils¹



GAME - CHANGING TECHNOLOGY

MVP[™] Micro Vascular Plug System

	Product code	Recommended vessel size	MVP™ device outer diameter unconstrained	MVP™ device length unconstrained	Delivery wire length	Min recommended micro catheter ID for 3Q / 5Q - and OD for 7Q/9Q	Max recommended length of micro catheter / delivery catheter
			A	В		ID	
MVPTM-3Q	MVP-3Q	1.5 – 3.0 mm	5.3 mm	12 mm	180 cm	0.021"	153 cm
MVP™-5Q	MVP-5Q	3.0 – 5.0 mm	6.5 mm	12 mm	180 cm	0.027"	153 cm
MVP™-7Q	MVP-7Q	5.0 -7.0 mm	9.2 mm	16 mm	165 cm	4Fr	120 cm
MVP™-9Q	MVP-9Q	7.0-9.0 mm	13 mm	18 mm	165 cm	5Fr	120 cm

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