For small babies a new Amplatzer Duct Occluder II Additional size: Initial experience of our clinics

Baspinar O., Irdem A., Kilinc M.
Gaziantep University Medical Faculty, Department of Pediatric Cardiology, Gaziantep, Turkey

Background: Using any PDA occluder for smaller than 6 kg babies may be harmful. A new Amplatzer Duct Occluder II Additional Sizes (ADO II AS) gives us some opportunity about this subject. We report our initial single-center experience with the new ADO II AS at the small infants. Methods: From August until December 2011, 6 consecutive small babies with PDA were enrolled for intention-to-treat with ADO II AS. The median age was 4 months (2 to 7 months); the median weight was 4.4 kg (4–9.5 kg). Results: ADO II AS implantation was attempted in all 6 patients. The mean PDA diameter was 2.12 ± 0.57 mm, and the mean PDA length was 4.41 ± 0.92 mm. In one patient, the ADO II AS could not close the defect; hence it was changed to an ADO II. We achieved complete occlusion of the duct in all of the patients on the day of insertion. No major or minor complications occurred. Conclusion: Transcatheter occlusion of PDA at the small babies with the ADO II AS device is safe and effective, with a high rate of complete occlusion. The device can be deployed completely in the ductal body without any descending aortic obstruction or left pulmonary artery obstruction because of it’s specially configuration. Also, the advantages of using it are the smaller sheath sizes and softer shape.