

P-303

Significant aortic obstruction with the Amplatzer Duct Occluder II

*Saliba Z. , Chehab Gh., Helou D., El-Rassi I., AbdelMassih T.
Hotel Dieu de France Hospital, Beirut, Lebanon*

OBJECTIVE: Describe the cases of significant aortic protrusion of the ADO II.

METHODS: Since its introduction in June 2008, the ADO II was favored for all types PDA < 5.5mm. Patients in whom we encountered a severe aortic obstruction of this device were described.

RESULTS: Between 2008 and 2011 the ADO II was used in 61 patients. In three of them, the aortic disc severely obstructed the aorta. N1: (6.6 Kg; type A; 3.2mm large; 7.4 mm long). The aortic disc of a 6-6 ADO II kinked 10 days later leading to severe coarctation. It was surgically resolved. N2: (6.9 kg; type C; 2mm large; 8.4mm long). The aortic disc of a 3-6 ADO II, anterogradely delivered, immediately bulged in the aorta after detachment. This was recovered by aortic balloon inflation. N 3: (7Kg; type A; 3mm large; 8mm long). The aortic disc of a 4-4 ADO II, arterially delivered, immediately kinked in the aorta after detachment. It was snared, retrieved and successfully replaced by a 5-4 ADO I.

CONCLUSIONS: the ADO II is not the device of choice in type A PDA. Discs are bulky and highly articulated. Immediate or even late aortic protrusion may occur leading to severe obstruction especially in small infants.