Cutting Balloon Angioplasty in Different Subsets

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Abstract------

This article briefly describes the uses of Cutting ballon as an essential tool in cathlab.

POBA or Plain old balloon angioplasty is severely limited in complex lesion subsets like calcified and fibrotic lesions because it does not achieve optimal balloon expansion, leading to sub optimal vessel bed preparation leading to inadequate stent expansion which leads to adverse effects like stent thrombosis and instent restenosis. To achieve optimal lesion preparation in such settings ,Cutting balloon angioplasty is a novel tool. The balloon has four longitudinally mounted microtomes on the external surface .When the balloon is inflated the microtomes exert longitudinal cuts into the plaque. After one balloon inflation the deflated cutting balloon is withdrawn into the guide catheter and reintroduced across the lesion and re inflated. This facilitates longitudinal cuts across another plane, thus facilitating better plaque modification. The limitations of the present generation cutting balloon is its bulky design which may limit deployment through severe calcification. The major indications for cutting balloon angioplasty includes moderately calcified lesions, fibrotic and aorto ostial lesions and in instent restenosis.

Biography

Arghya Jana, a Senior Paramedic in Cathlab, has his expertise in both Pediatric and Adult Cardiac Interventions. Presently He is doing in Onco-Interventions. He has a keen interest to learn more and deliver his best at times of needs.

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