

A novel approache : Antegrade Wire-based Fenestration and Chanal Tracking technique (AWF-CT)

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- 65 years old hypertensive and diabetic male patient
- went angiography in another center due to efor induced angina despite guideline directed maximal medical treatment.
- Angiography revealed non severe plaque formation on both RCA and LCX arteries with chronic total occlusion of the mid LAD segment with rentrop class 2 filling from the distal RCA segment.
- Blunt stump , bending >45 and length of the occlusion make it very difficult and complex procedure according to the J CTO score (3).
- After analyzing of the views we decided to go antegradely by controlled wire induced fenestration of the proximal part of the plaque by conquest pro 12.
- The main aim of this technique is to make sponge like structure with mutiple fenestrations which can be connected to unseen and hidden microchannels ,and if we can make this connection we can easly cross the lesion by polymer jacted low load tip wire like Filder-XT or any controlled wire like Gaia 2.
- Bifemoral approche, JR for the right and 3,5 EBU for the left system, 1.4 microcathe TAHA medical microcatheter and 0,014 conquest pro 12 (ASAHİ wire) at the antegrade gear.
- Draw off the wire just after little penetration of the proximal cap many times and then by controlled movement of Gaia 2 (ASAHI 0,014 wire) we were able to cross the lesion.
- Sever bending of the LAD mid segment , we were abla to cross with 2 made bend Sion blue guidewire (ASAHA 0,014)



then after pre dilatation and stenting the lesion we restore TIMI 3 flow.

- Here in this case we are emphasizing the idea and mentality that unseen channels does not mean it does not exist .
- we believe that many hidden microchannels exist inside the body of the CTO.
- In case of blunt proximal caps retrograde approach still the main way to restore and cross the lesion but by this approach we also have the chance to catch these hidden channels by more simple ,more cheap and less complication induced procedure .
- Many techniques manly by HDR emphasize the exist of the channels which can be valuable in the CTO antegrade approach .
- We tried this technique in 3 patients with 100% success.



• In conclusion we believe of the power of the hidden microchannels which can be crossed antegradely.

• This technique give us a chance of the antegrade based approach at the same time in case of failure it does not reduced the chance of the retrograde crossing succes .













