# **Challenging Case:**

# Successful Mitral Transcatheter Edge-to-Edge Repair in a Patient with Cor Triatriatum Sinister

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## **Disclosure of Relevant Financial Relationships**

#### I, Amisha Patel, DO NOT have any relevant financial relationships to disclose.





# History

### 77-year-old Ukrainian immigrant

• PMH: AF on apixaban

Presents with:

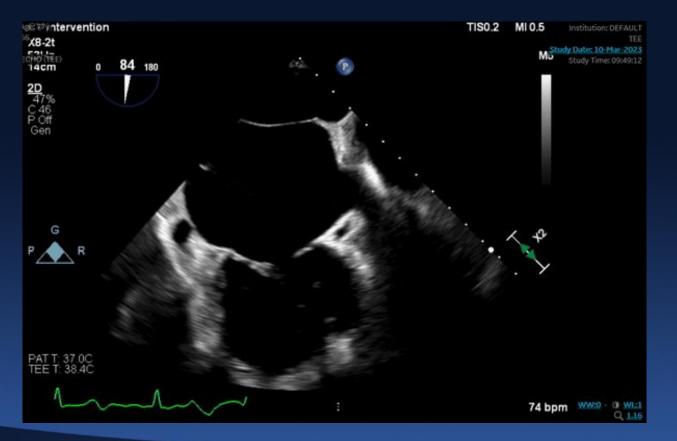
- New York Heart Association (NYHA) class III-IV symptoms
  - dyspnea with light housework
  - inability to ambulate one block
  - worsening lower extremity edema

... Despite increasing diuretic doses





#### Pre procedural TEE showing Cor Triatriatum Defect in Left Atrium

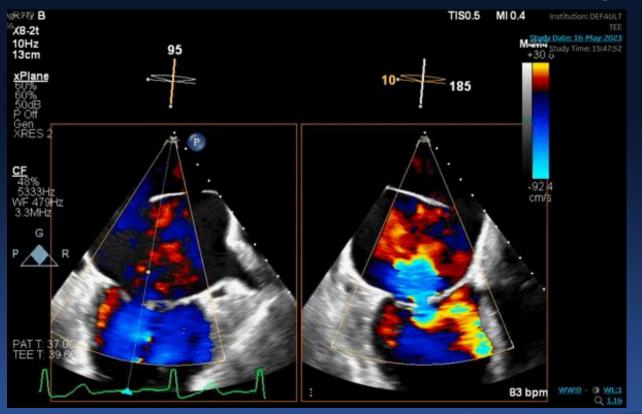


CRF'



#### **Pre- procedural TEE**

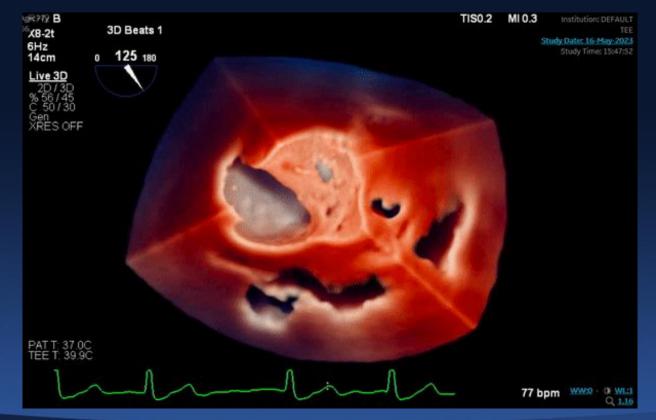
Cor Triatriatum membrane in left atrium with severe mitral regurgitation







#### Pre procedural TEE 3D reconstruction of cor triatriatum defect







# Procedure



https://www.youtube.com/watch?v=FVSzWP77nNo

- The PASCAL Precision system was chosen due to enhanced maneuverability and versatile implant configuration compared to TEER device alternatives.
- Using TEE guidance, transseptal puncture was performed 5.0cm above the mitral valve annulus with a Baylis steerable Versacross system, taking care to navigate around the cor triatriatum membrane.





## Procedure



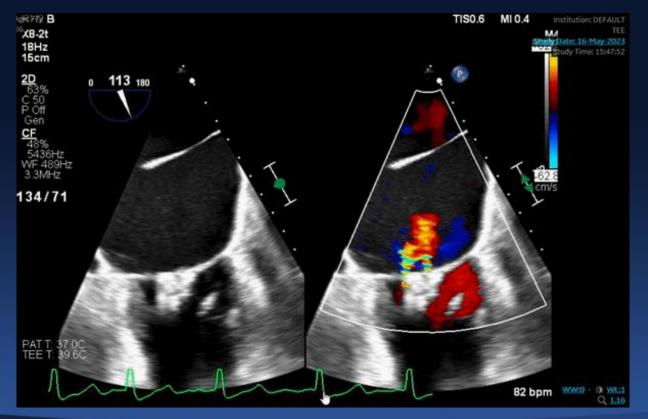
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 With 2D and 3D echo guidance, two PASCAL Precision devices were positioned orthogonal to the commissural plane, one medially to target the predominant jet, and the second lateral to the initial device. Anterior and posterior leaflet grasp was imaged with adequate tissue bridge formation. Final residual MR jets were mild and total mitral valve orifice area by planimetry was 3.2cm2.





#### Post-procedural TEE Clip 4 Residual mild mitral regurgitation after placement of PASCAL device.







#### Post procedural TEE Clip 5

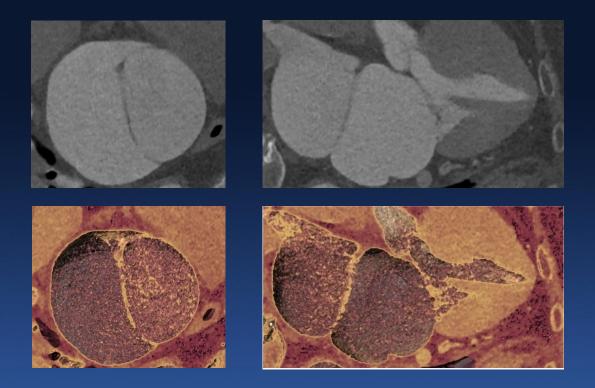
3D echo showing double orifice mitral valve after TEER with two PASCAL devices







Cor Triatriatum Sinister defect visualized on CT angiogram with volume rendering







# **Conclusion**

• This case demonstrates successful TEER using the PASCAL system in a high-risk patient with severe symptomatic MR and cor triatriatum sinister. Newer-generation devices for TEER, with improved maneuverability and precision, provide valuable alternatives for patients who are not candidates for conventional therapies due to anatomic complexity.





# **THANK YOU!**



