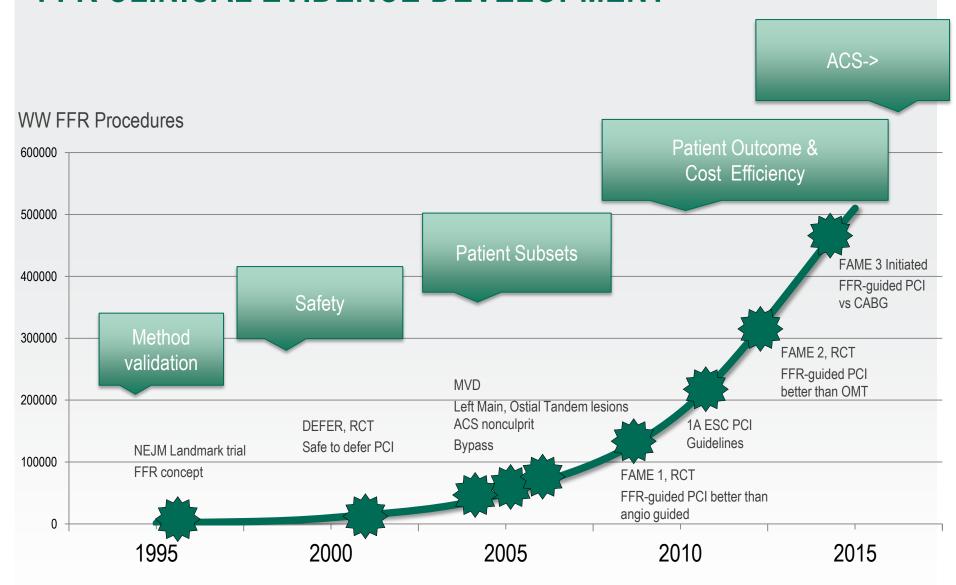
### THE FUTURE IS HERE NOW, AND ITS ELECTRICAL

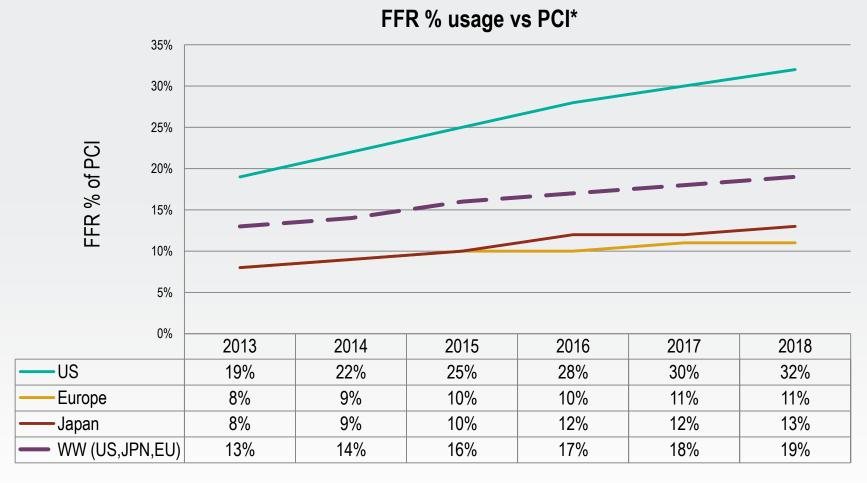
Johan Svanerud, St Jude Medical

#### FFR CLINICAL EVIDENCE DEVELOPMENT





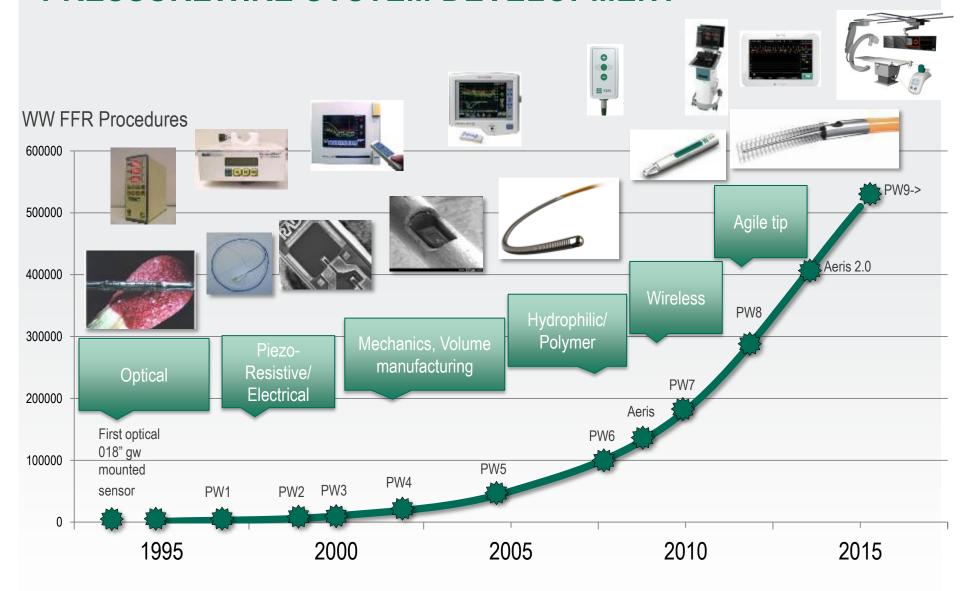
#### FFR USAGE IS GROWING. FAST



Total number of FFR Procedures divided by number of PCI Source: Millennium Research Group (2013-2015)

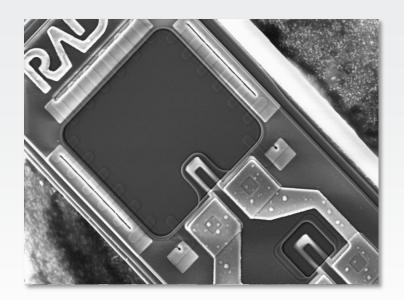


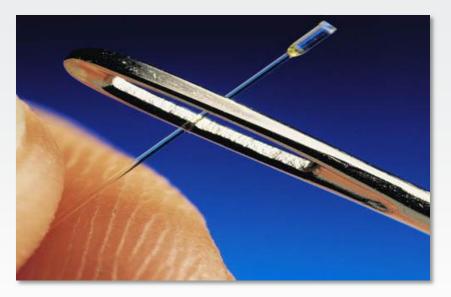
#### PRESSUREWIRE SYSTEM DEVELOPMENT



#### **ELECTRICAL OR OPTICAL SENSORS?**

- Emerging FFR Manufacturers (BSC, OPSENS, ACIST) All use similar optical pressure sensors
- Why does St Jude use Electrical (Piezo-Resistive) Sensors, and how are these being further developed?





# ST JUDE'S ELECTRICAL SENSOR IS <u>STABLE</u>

#### **REALLY?**

- All FFR devices on the market has some level of measurement inaccuracy
- Not all vendors disclose this information publicly

	St. Jude Medical PressureWire™ Pressure Guidewire	ACIST Navvus™ Pressure Catheter	Volcano Verrata™ Pressure Guidewire
Device	Pressure guidewire	Catheter	Pressure guidewire
Sensor technology	Piezo-resistive (Electrical)	Optical Fabry-Perot	Piezo-resistive (Electrical)
Pressure accuracy	+/-1 mmHg plus +/-3% of reading	+/-3% of reading or +/-3 mmHg, whichever is greatest	Not specified in IFU
Pressure range	-30 to 300 mmHg	-30 to 300 mmHg	Not specified in IFU
Frequency response	0-25 Hz	Not specified in IFU	Not specified in IFU
Zero thermal effect	< 0.3 mmHg/deg C	< 0.4 mmHg/deg C	Not specified in IFU
Zero drift	< 7 mmHg/hour	< 7 mmHg/hour	Not specified in IFU Per FDA approval: <5 mmHg/10minutes



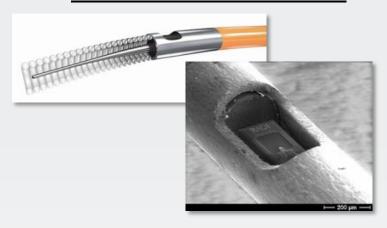
#### WHAT IS THE CAUSE OF DRIFT?

#### Drift related to AO/Procedure



- Changing height of AO transducer
- Capillary forces in catheter
- Wedging guide in Ostium
- Needle in Y-connector
- Catheter with side-holes
- Contrast power injector

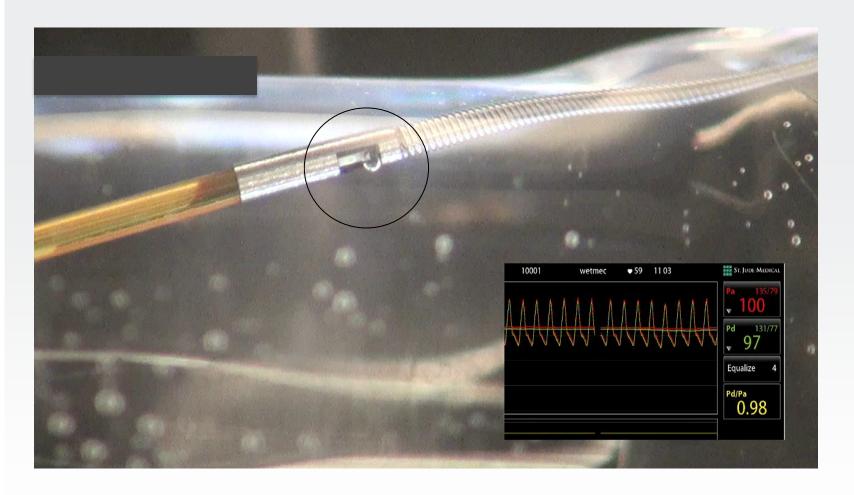
#### **Drift related to PressureWire**



- Temperature shift from room to patient
- Instrumentation calibration
- Blood/saline remnants on connector
- Microscopic-air bubbles trapped inside sensor capsule

#### MICRO-BUBBLES?

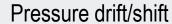
Microscopic-volumes of encapsulated gas may cause pressure shift when dissolving from sensor housing

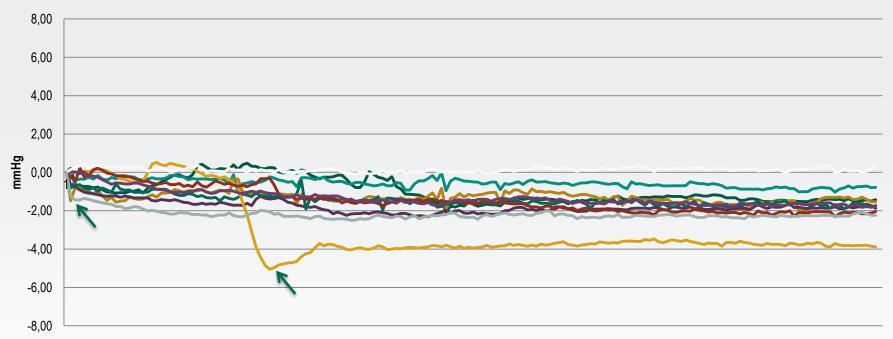




#### WHEN DO DRIFT OCCUR?

- If PW drift occurs it is most commonly early on in the procedure
- After initial pressure drift pressure measurement is normally stable





#### **CAN WE REACH A DRIFT-FREE FFR PROCEDURE?**

#### Improving procedure/accuracy of AO-pressure reading

- Repeated training of the cathlab staff
  - Adherence to protocol need for standardization
- FFR Instrumentation
  - On-screen step-by-step procedure guide
  - Software automatic detecting and avoiding common artifacts/user mistakes









### St. Jude Medical

# ST JUDES'S ELECTRICAL SENSOR CAN BE MADE WIRELESS

#### WHY WIRELESS?

#### Ease of use

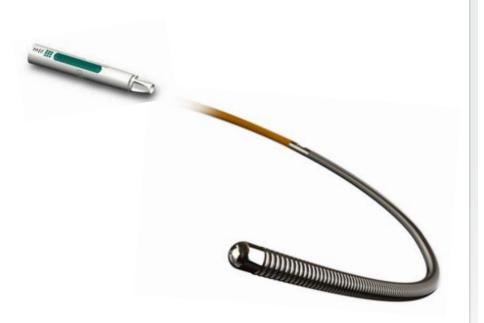
- Quick, wireless setup
- Cable free patient environment
- No cables crossing sterile barrier
- No cables to limit wire movement



#### WHY WIRELESS?

#### Accuracy

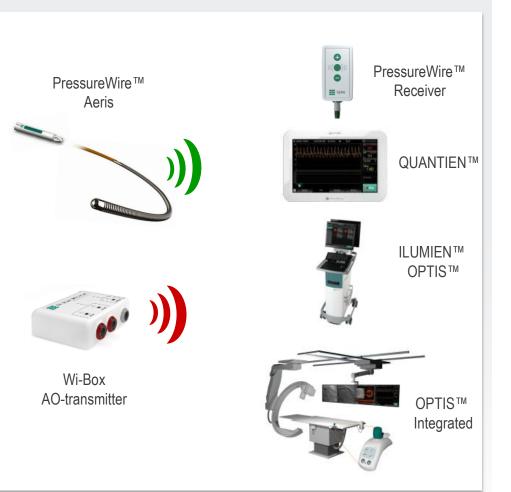
- New, calibrated, measurement electronics
   <u>for every case</u> Accurate, no need for
   annual checkup or calibration
- Analog-Digital conversion at the wire no transmission loss



#### WHY WIRELESS?

#### Flexibility

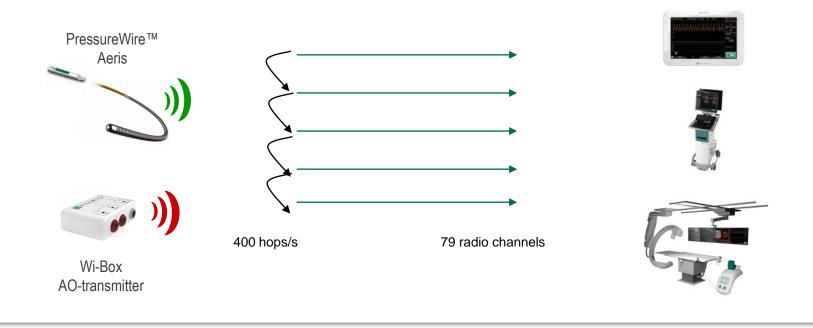
- All St Jude FFR systems share the same wireless AO source: Wi-box
- Allows a mix of Mobile or Integrated FFR/OCT systems, covering all cathlab rooms
- Minimal installation/cabling requirements





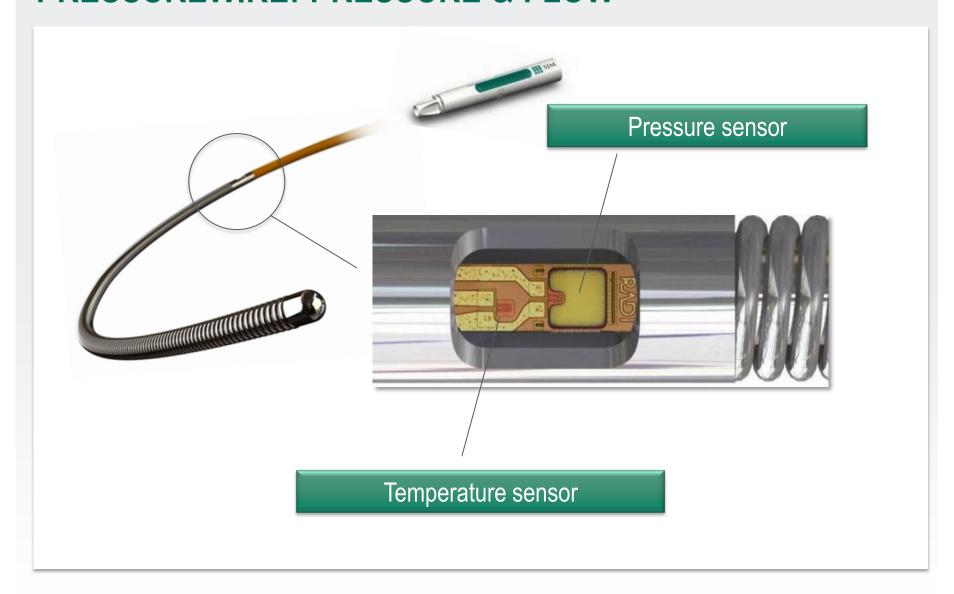
#### **HOW DOES IT WORK?**

- 1. Transmitters and Receivers lock to each other using unique identification codes
- 2. "Frequency-Hopping" technology change transmitting frequency 400 times/second
- 3. Stable and reliable communication also in instrumentation-packed cathlabs

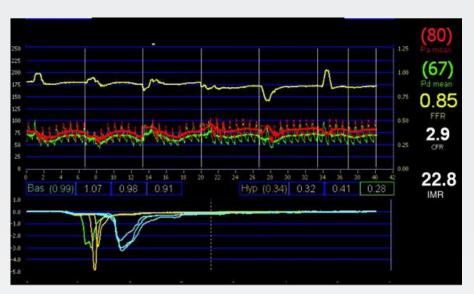


## ST JUDE'S ELECTRICAL SENSOR CAN MEASURE FLOW

#### PRESSUREWIRE: PRESSURE & FLOW



#### 1. THERMO-DILUTION - BOLUS



Transit mean time
(Tmn)

Distal Pressure
(Pd)

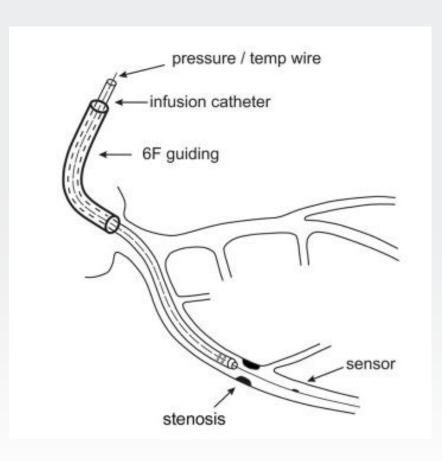
IMR - Index for microcirculatory
Resistance

$$IMR = \frac{\Delta \text{ Pressure}}{\text{Flow}} = \text{Pd x Tmn}$$

CFR – Coronary Flow Reserve

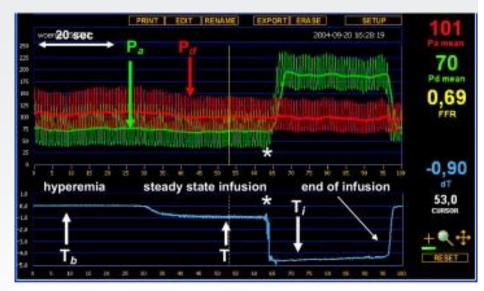
$$CFR = \frac{\text{Hyp flow}}{\text{Resting flow}} = \frac{1/\text{Tmn\_Hyp}}{1/\text{Tmn\_Rest}}$$

#### 2. THERMO-DILUTION - INFUSION



Volumetric blood flow (ml/min)

Qb = Infusion.rate x (T\_infusion/T\_mix) x k k=1.08



 $Q_b = 15 \times (-4.5 / -0.9) \times 1.08 = 81 \text{ ml/min}$ 

Direct Volumetric Blood Flow Measurement in Coronary Arteries by Thermodilution
Wilbert Aarnoudse et al Journal of the American College of Cardiology Volume 50, Issue 24, 11 Dec 2007, Pages 2294–2304

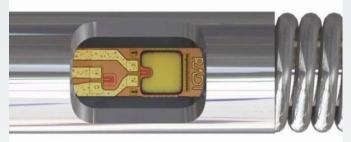


### SENSOR AND CABLE TEMPERATURE FROM PW AERIS 2.0 ON QUANTIEN -WORK IN PROGRESS

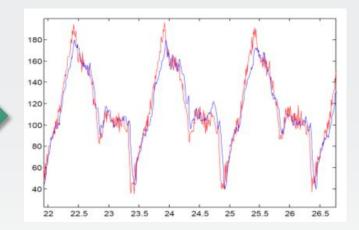


#### 3. THERMO-CONVECTION FLOW VELOCITY

Elevated sensor temperature +5°C Sensor housing +1-2°C



∫ Tra ∫ fun



Blood flow cools sensor temperature proportionally to blood flow rate

Red: Reference flow probe

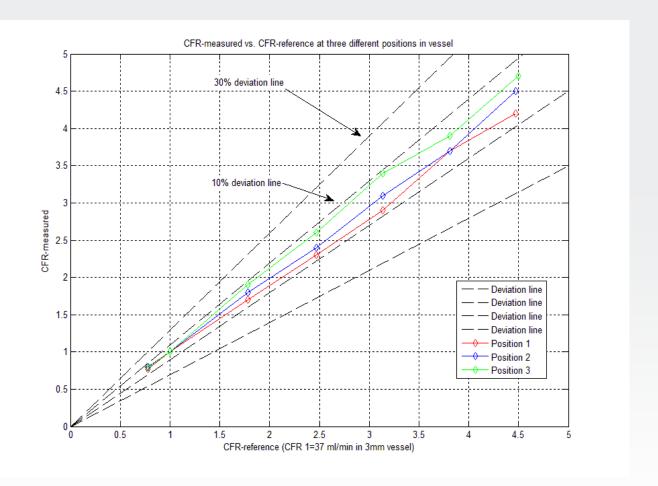
Blue: PressureWire Thermo Convection flow

Internal St Jude Animal data

Thermal anemometric assessment of coronary flow reserve with a pressure-sensing guide wire: An *in vitro* evaluation. Arjen van der Horst, Medical Engineering and Physics, July 2011 Volume 33, Issue 6, Pages 684–691



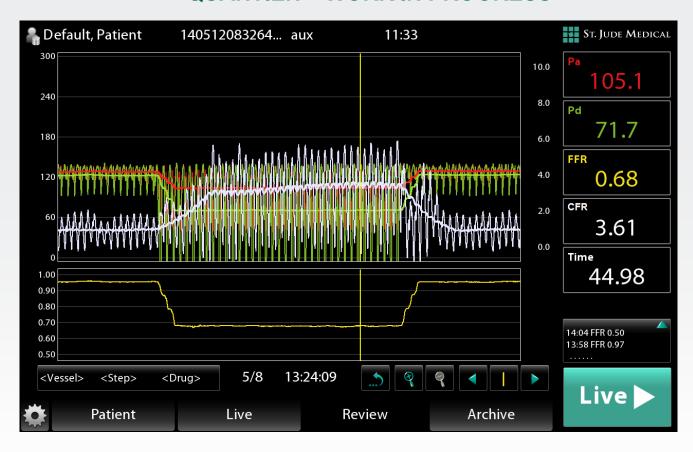
#### 3. THERMO-CONVECTION FLOW VELOCITY



Internal St Jude in-vitro data



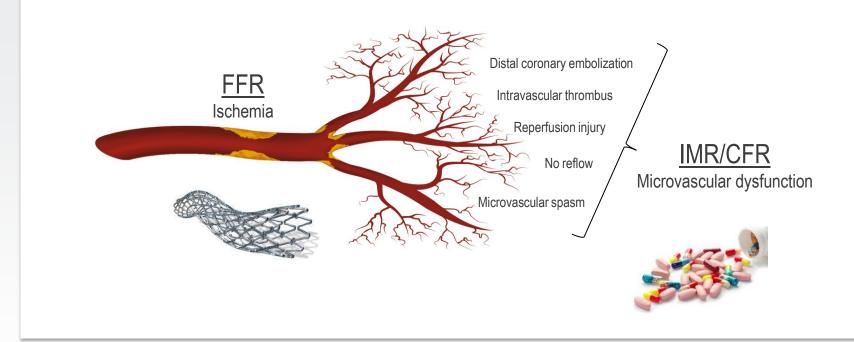
### PRESSURE AND THERMOCONVECTION FLOW FROM PW AERIS 2.0 ON QUANTIEN – WORK IN PROGRESS





#### COMBINED LESION/MICROVASCULAR ASSESSMENT

- Combined assessment of Epicardial and Microvascular disease may lead to improved diagnosis and outcomes
- Enabling FFR and IMR/CFR on a FFR-guidewire designed for every day PCI usage may move combined assessment into every day clinical practice



#### CONCLUSION

THE ELECTRICAL SENSOR TECHNOLOGY USED IN ST JUDE'S PRESSUREWIRE ENABLES:

- 1. HIGH MEASUREMENT RELIABILITY
  - 2. WIRELESS CONNECTIVITY
- 3. COMBINED ASSESSMENT OF FFR & IMR/CFR

## THE FUTURE IS HERE NOW (ALMOST) AND ITS <u>ELECTRICAL</u>

### THANK YOU FOR YOUR ATTENTION