

Case 3

Module 3: Real World Application of Mechanical Circulatory Support

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Disclosure

All presenters have a speaker agreement with Maquet

Disclaimer – Indications

The content of this presentation represents a medical practitioner's authorized practice of medicine in the exercise of appropriate medical judgment for the best interest of the patient.

Refer to Maquet's Instructions for Use for current indications, warnings, contraindications, and precautions.

Case 3: 49 yo male

**Family history of IHD but previously well
Presented to local hospital (no primary PCI service)
with several hours of chest pain**

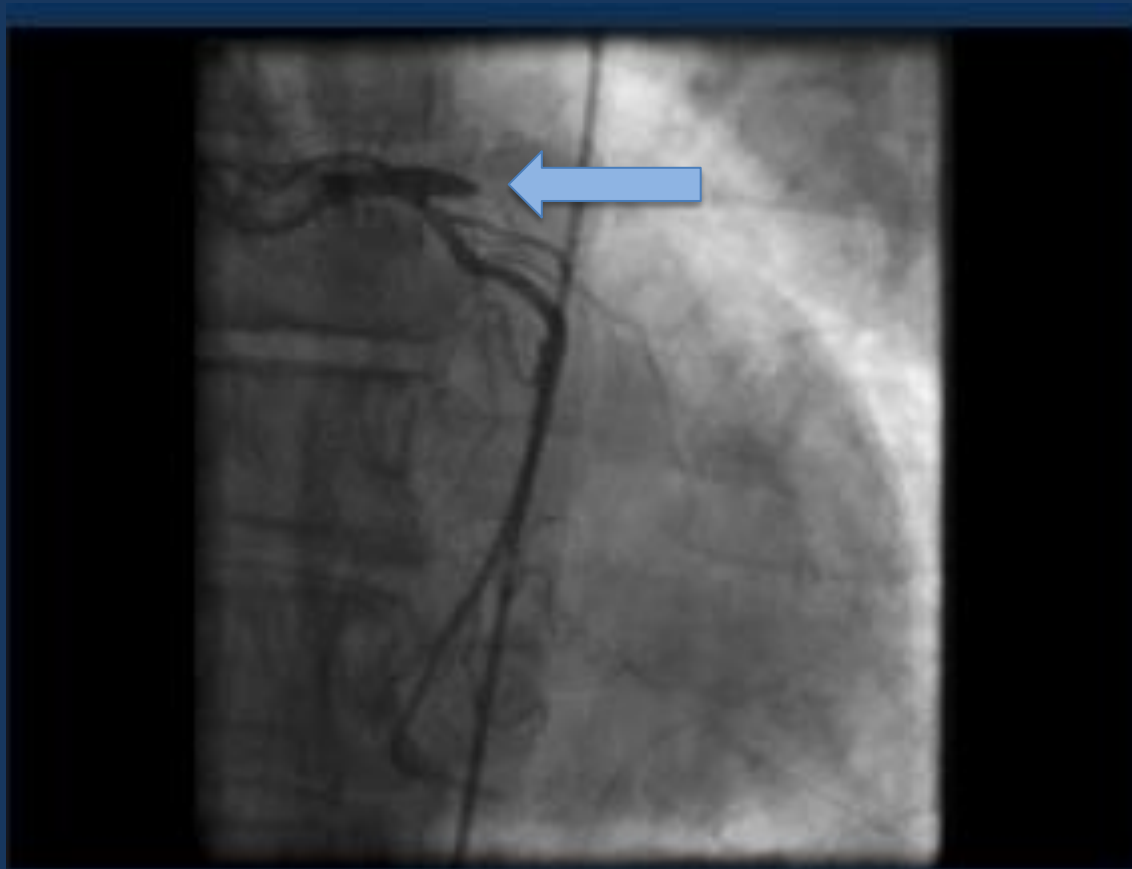
ECG – ST elevation in leads V1-5

Transfer Delays

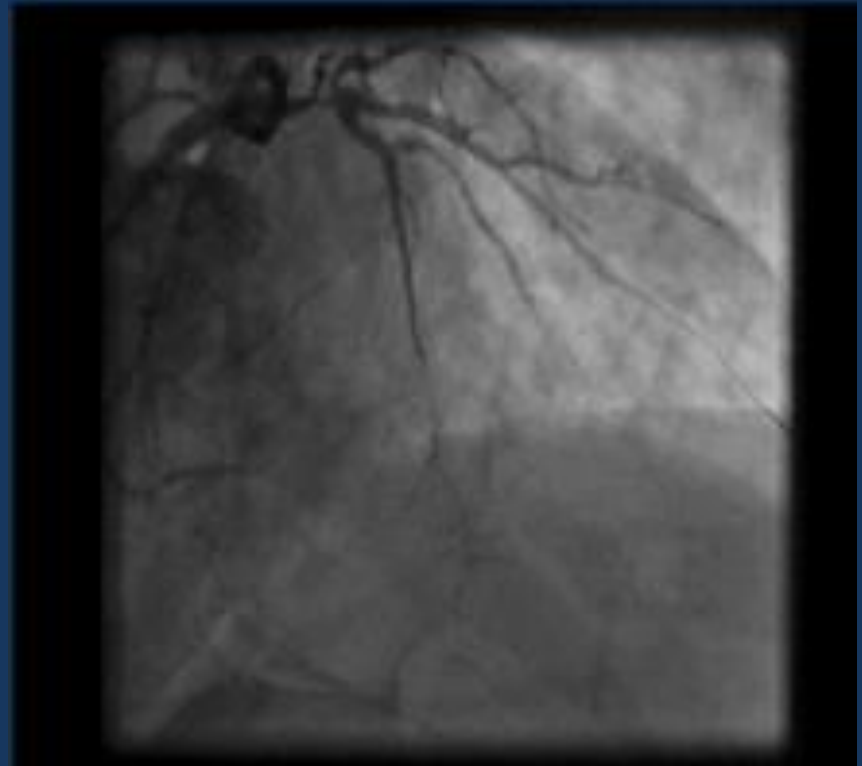
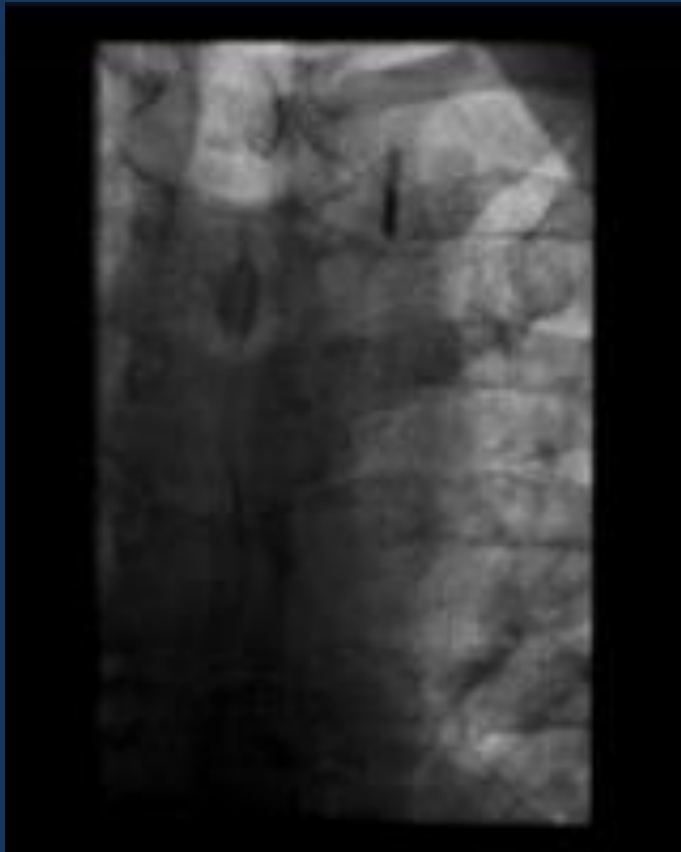
HR 110 bpm, BP 120/70mmHg

Initial SaO₂ on room air 80%, Lactate 3.2

Case 3: Diagnostic Angiogram



Case 3: IABP and PCI



Case 3: Post PCI



Case 3: 49 yo male

BP maintained on IABP support for 24 hours

Urine output poor (20-30ml/hour)

Rising lactate Levels

Supported with Dobutamine infusion

Echocardiogram – severe LV systolic dysfunction with antero-apical akinesis, no evidence of VSD

Case 3: Impella 2.5L Device Inserted



Case 3: Post Impella Insertion

Stability in hemodynamic indices for 24 hours

**BUT, failure to thrive
Increasing inotrope requirement
Decreasing urine output**

**Transferred to Transplant Center
Surgical Biventricular Assist
Successful Heart Transplant**