













Postoperative Atheroembolic particles (a)Dislodged atherosclerotic CALCIFICATION particles, crystals \ cholesterol particles

(b)Aortic wall \ Endothelial tissue particles

(c)Dislodged acute thrombus particles

(d)Organizing thrombus particles

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(e)Microembolic calcification , thrombus particles - of 30μ > 50μ (demonstrated by DW MRI during Cardio Vascular procedures)

(f) Foreign materials - polymer particles .

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Temporary Renal Embolic protection The clinical WISH LIST

- 1. <u>Protects Renal arteries</u>. <u>CELIAC trunk and the SMA</u> from Embolic and Micro-Embolic particles *throughout the duration of the*
- 2. <u>Protects Distal abdomen & pelvic organs</u> upon activation of the CAPTURE
- 3. Debris is evacuated from the body after the conclusion of the procedure
- 4. minimizing impact on Aortic walls and possible dislongement of atherosclerotic particles









Conclusion

EVAR | TEVAR are mainstay treatments , with over 300,000 procedures performed worldwide annually.



Advanced EVAR\TEVAR devices lead to a growing success rate, lower mortality and complications.

KIDNEY injury is a devastating complication that calls for a definitive solution on the way to make EVAR\TEVAR a safer, successful procedure.

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