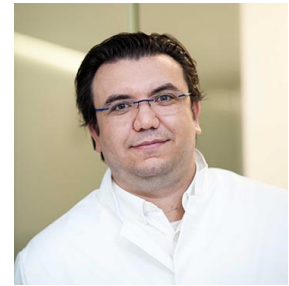




1st PASS IN STROKE WITH UNKNOWN ONSET

Right M1 Occlusion 1st Pass
Success with
NeVa™ M1 (4.0 x 30 mm)



Dr. Vladimir Kalousek
Sisters Charity Hospital
Zagreb, Croatia

Presentation

88 year old female patient presented with a NIHSS of 15.

The patient was found on the floor of her bathroom, with left side hemiplegia. Her pre-stroke mRS was assessed to be 0.

Native CT showed hyperdense M1 segment on the right side. CT angio confirmed M1 occlusion.

Pre-op CT



NIHSS at Admission:	15
Pre-stroke mRS	0
Time of Onset	Unknown

Pre-op CT Angio



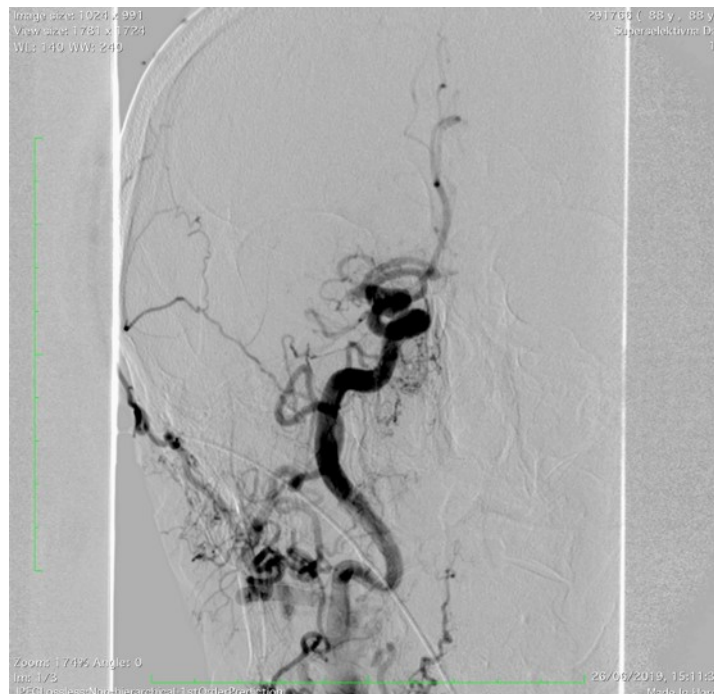
The Procedure

Dr Kalousek and the Sisters' Charity team decided to treat the patient with thrombectomy using a NeVa M1 (4 mm x 30 mm) under distal aspiration.

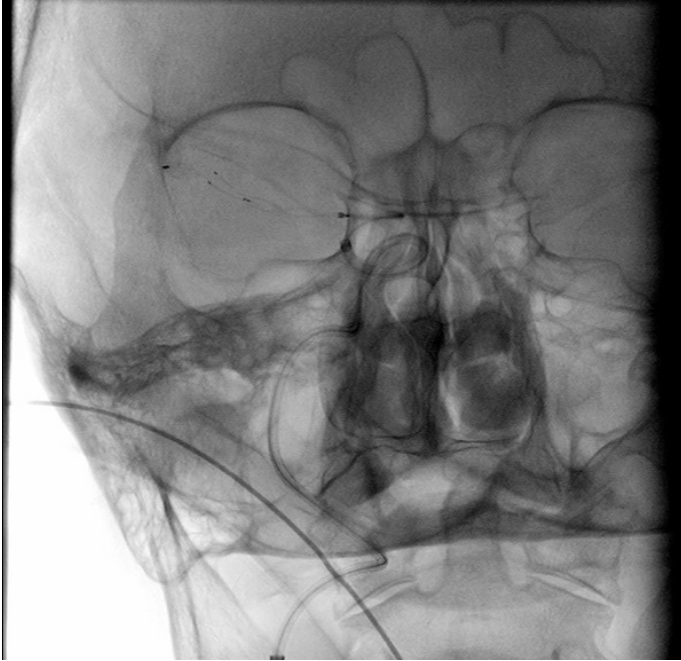
The access set up was: 9F femoral sheath , 9F Cello , 0.064" aspiration catheter and 0.027" microcatheter.

Full recanalization was possible in a single pass.

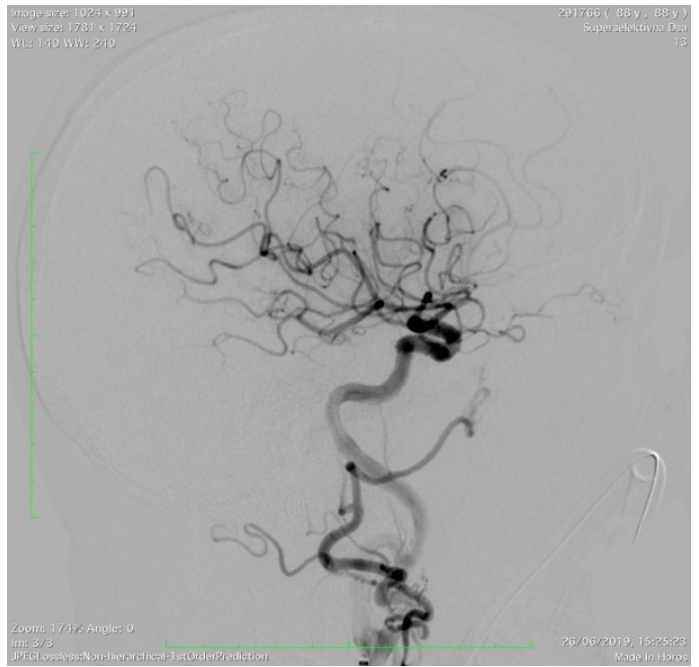
Angio showing Right MCA (M1) Occlusion



Angio images showing NeVa deployment in the MCA branch



Angio images showing recanalization after the first NeVa pass



First Pass Success with NeVa M1 (4mm x 30mm)

Thrombectomy was done under distal aspiration with NeVa M1 (4mm x 30mm). Distal aspiration was used as flow control strategy.

Full recanalization (TICI 3) was possible with a single pass and significant thrombus was observed throughout the body of NeVa and inside the distal tip.



Post-op CT

Control CT showed demarcation of the core of infarct in basal ganglia



Clinical Success

Post-procedure NIHSS of the patient was 6 and she began to recover immediately.

At VESALIO, we feel blessed to be part of the stroke field, where together with these dedicated physicians, we can make an incredible impact on people's lives.

Thank you Zagreb !