

## Nit-Occlud (PFM coil) for Closure of Congenital Gerbode Defect

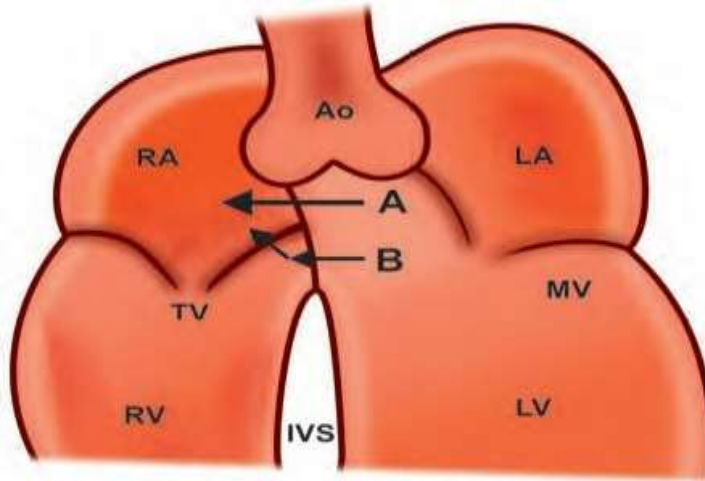
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- Gerbode defect represents left ventricle to right atrial communication ,it is a rare type of ventricular septal defects.
- Traditionally closed by surgery and not known to be amenable to transcatheter closure.

Types :



- A three-year-old female child presented to outpatient clinic in cardiology department , Tanta university hospitals with complains of repetitive chest infection since birth.

- **Clinically**, There was pansystolic murmur of grade 3/6 in left parasternal area.
- **CXR**: cardiomegaly with increased pulmonary vascular markings.
- **ECG**: sinus rhythm with negative T waves in leads V1 to V4.

## Transcatheter closure

- On cardiac catheterization, oximetry revealed a step up in oxygen saturation at the RA level.
- Pulmonary artery pressure was 30/10 mmHg.
- LV angiogram showed filling of RA earlier than RV.
- The ratio of pulmonary vascular resistance to systemic vascular resistance was 0.08. QP/QS was 2.0.
- The patient underwent successful percutaneous closure of the defect using Nit –Occlud (PFM coil 12 x 6).

## PFM coil



Successful closure,  
No Heart block,  
No encroachment on any of cardiac valves,  
No residual shunt.

## Take Home Message

- Gerbode defect is amenable to Transcatheter closure with Nit Occlud coils which represents a promising alternative to surgical closure.
- Long term efficacy and safety ? Which device is better for closure? more long term follow up of large number of patients is needed.

**THANK YOU**