

*100% FOR CHILDREN*



# Big Things Don't Fit in Small Spaces

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# Disclosures

No financial relationships to disclose





# Big Things Don't Fit in Small Spaces



# Pediatric Challenges

- Size of MCS for proper fit and function
- Limited pediatric experience with device
- Limited certified pediatric centers
- Device modification for complex congenital anatomy
- Anticoagulation protocols for children
- Cost



Hearts will never be  
practical until they can be  
made unbreakable.

But I still  
want one.

# Types of MCS

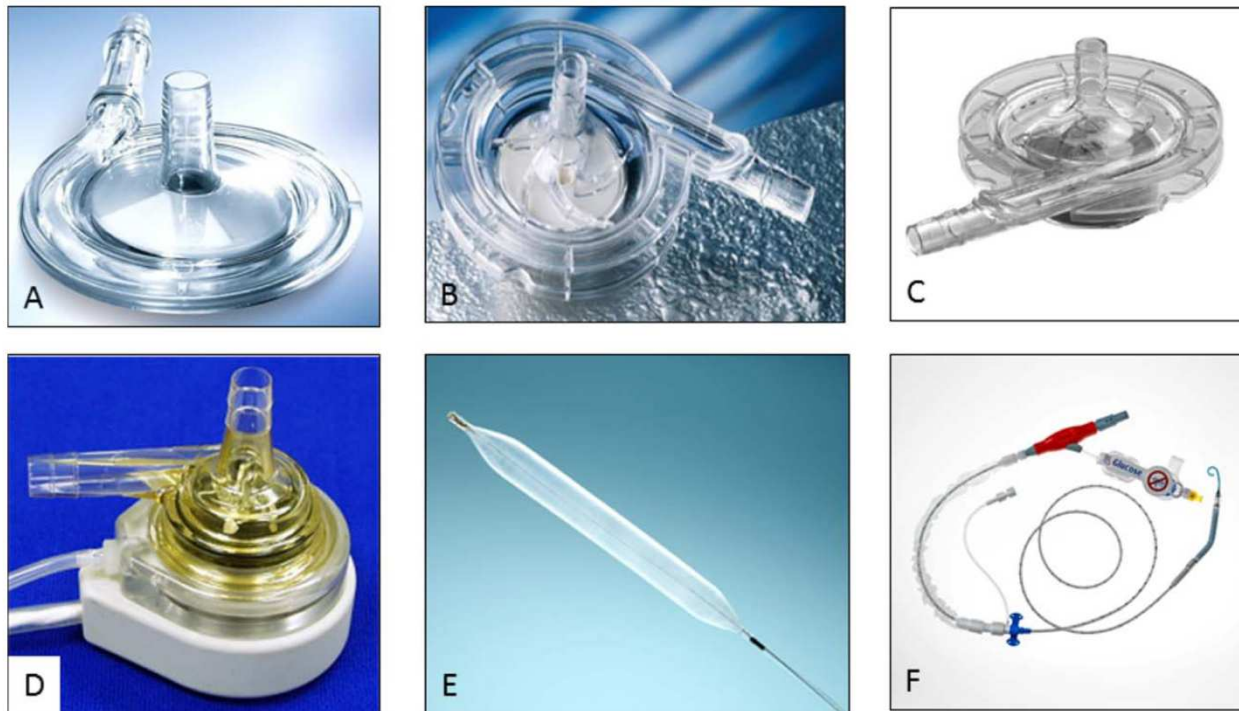
- ECMO
- Short-term MCS
  - CentriMag
  - PediMag
  - Tandem Heart
  - Impella
- Longer-term MCS
  - BERLIN EXCOR
  - Heartware HVAD
  - HM II
- TAH

ECMO Circuit



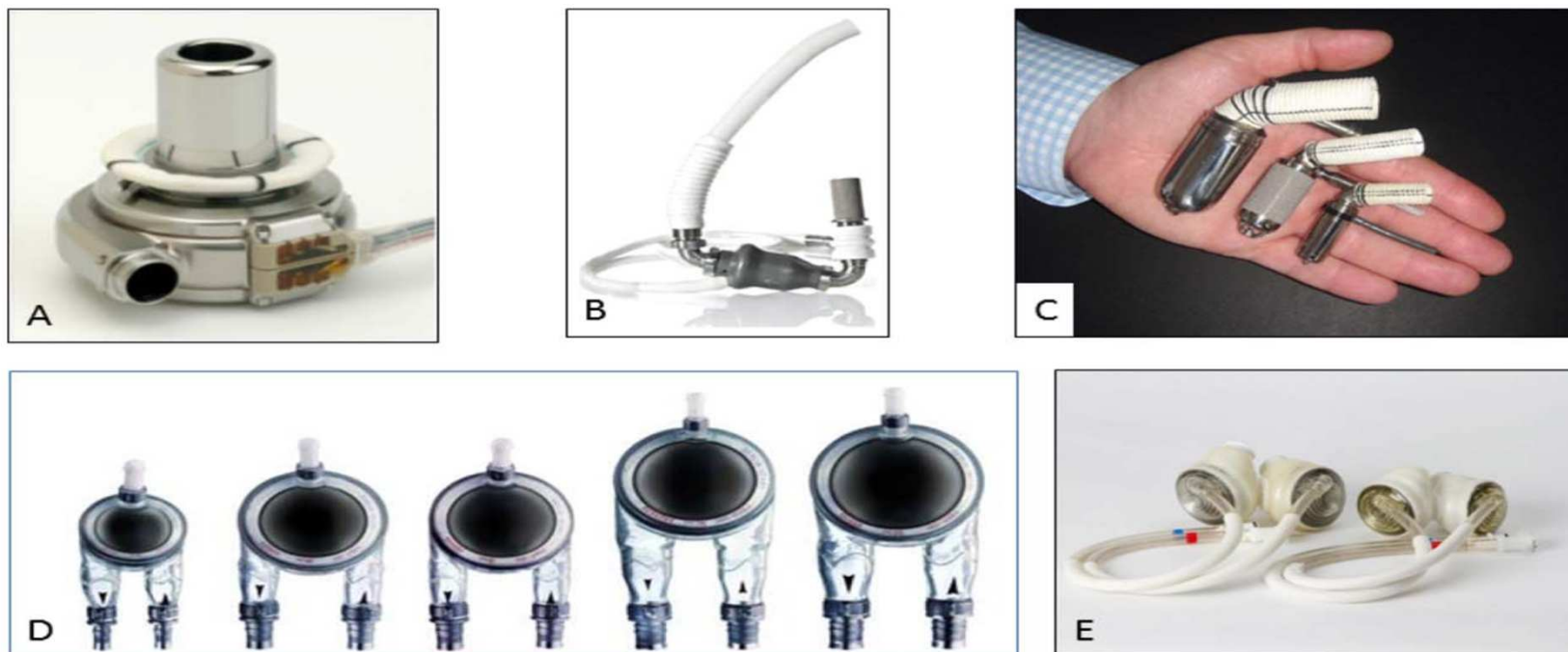


# Short-Term MCS Options



**FIG. 2.** Short-term mechanical assist devices. (A) Maquet RotaFlow (2); (B) Thoratec CentriMag (3); (C) Thoratec PediMag (2); (D) TandemHeart (2); (E) Pediatric intra-aortic balloon pump (98); (F) Abiomed Impella 5.0 (33).

# Long-Term MCS Options



**FIG. 3.** Long-term mechanical assist devices. (A) HeartWare HVAD (2); (B) Thoratec HeartMate II (2); (C) Jarvik 2000: Adult VAD (left), Child VAD (middle), Infant VAD (right) (2); (D) Berlin Heart EXCOR (43); (E) Syncardia Total Artificial Heart (TAH), 70cc TAH (left), 50cc TAH (right) (60).



# Total Artificial Heart: Implant at PCH

- 14 year old small male
- 50 kg and 152.4 cm = 1.5 m<sup>2</sup> BSA
- Dilated cardiomyopathy
- Severe biventricular failure
- ECMO X 8 days with LV and
- aortic thrombi
- CT scan:
- 9 cm from T10 to sternum



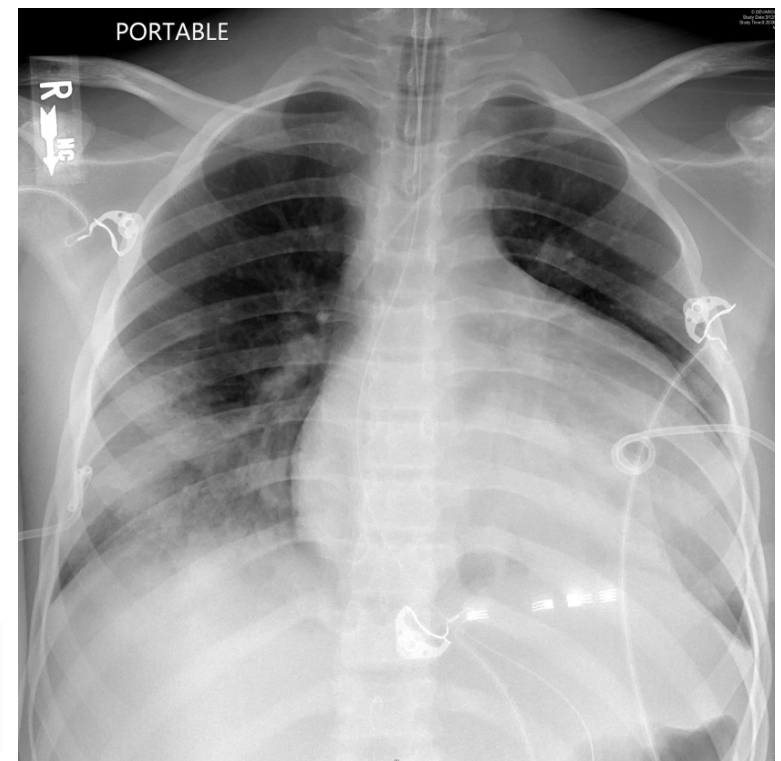
**70 cc TAH: 10 cm, 1.7 m<sup>2</sup> BSA**

**Pt: 9 cm, 1.5 m<sup>2</sup> BSA (Too Small)**



**From: Park S et al. Total artificial heart  
in a small pediatric patient with  
biventricular heart failure**

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# Advantages of TAH

- Restores biventricular circulation
- End-organ recovery may be superior to other MCS types
- Decreased risk of thromboembolism
- Innovations:
  - 50 cc pump (women and adolescents)
  - Portable driver (13.5 lbs) can allow discharge home
  - Quiet

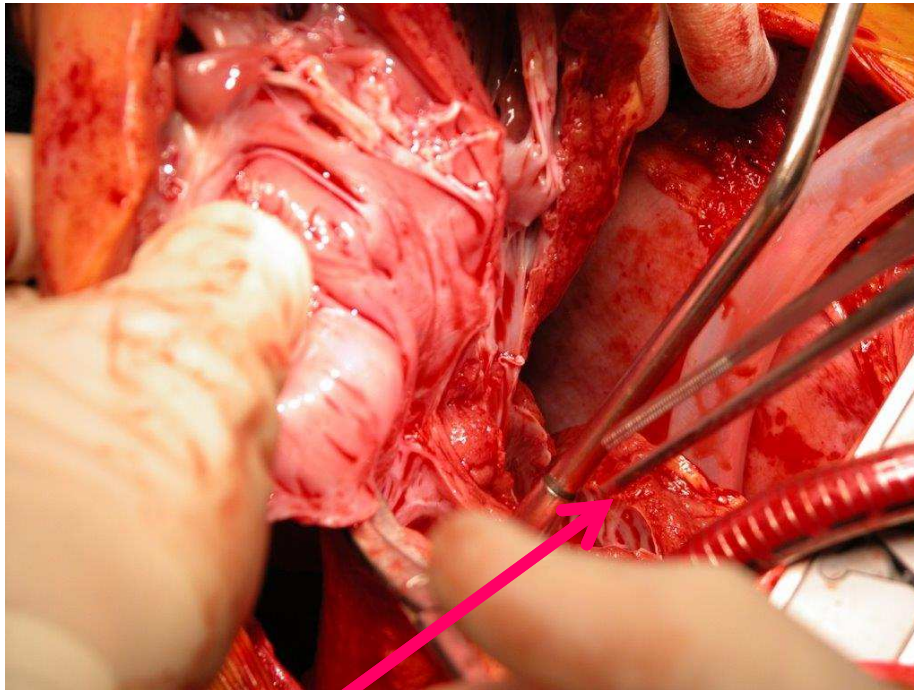
# Innovations: Virtual Fitting

- Dr. Ryan and his team at PCH/ASU have done 102 virtual implants
- Spanning over 40 institutions and 7 countries
- Current multi-institutional trial: '3D Hearts Enabling a Randomized Trial' actively enrolling with PCH, CHOP, CNMC as lead sites
- More information and to get involved:

[3dprintlab@phoenixchildrens.com](mailto:3dprintlab@phoenixchildrens.com)



# Total Artificial Heart: Implant at PCH



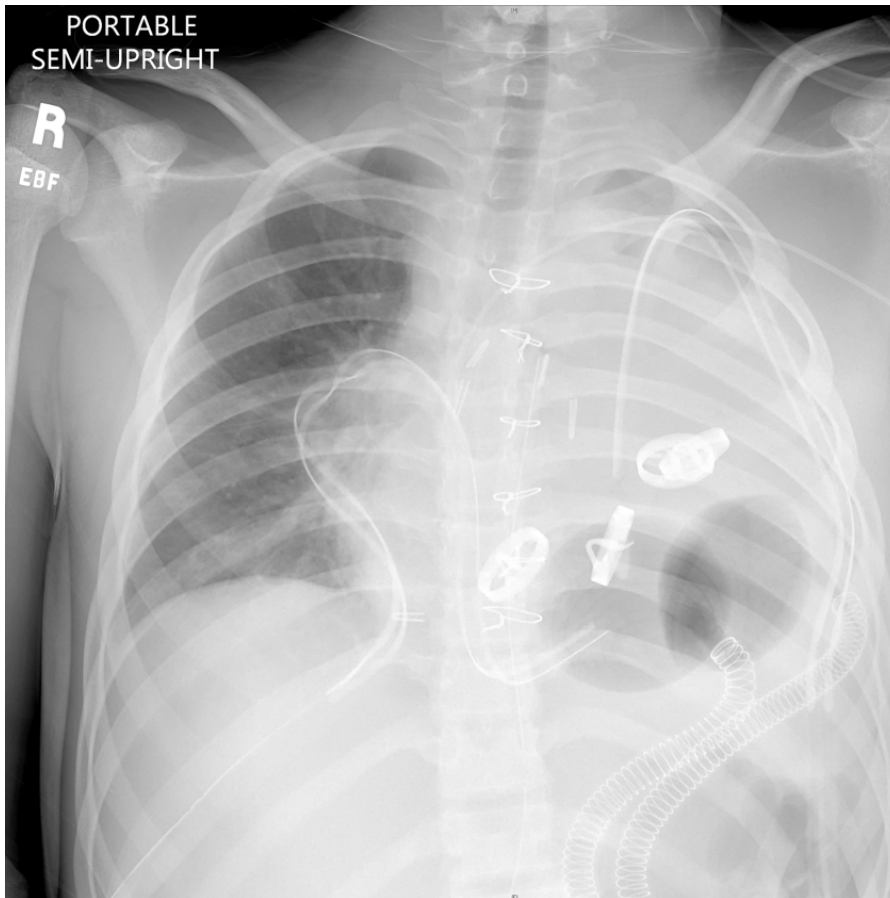
LV thrombi

Implanting – with help  
from 3D imaging





# CXR Post-TAH Implantation



CXR showed 'white-out' of left lung

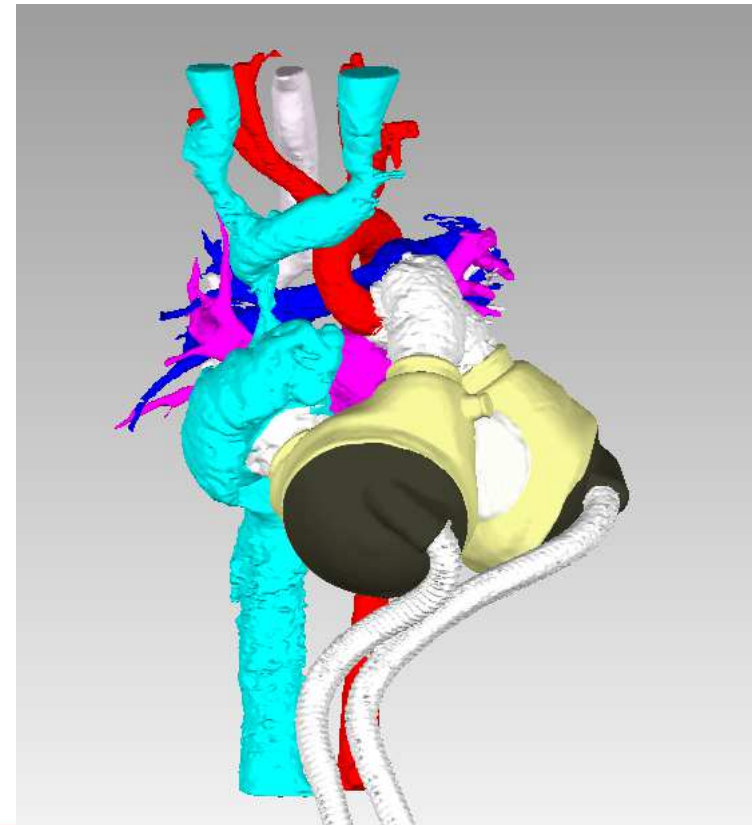
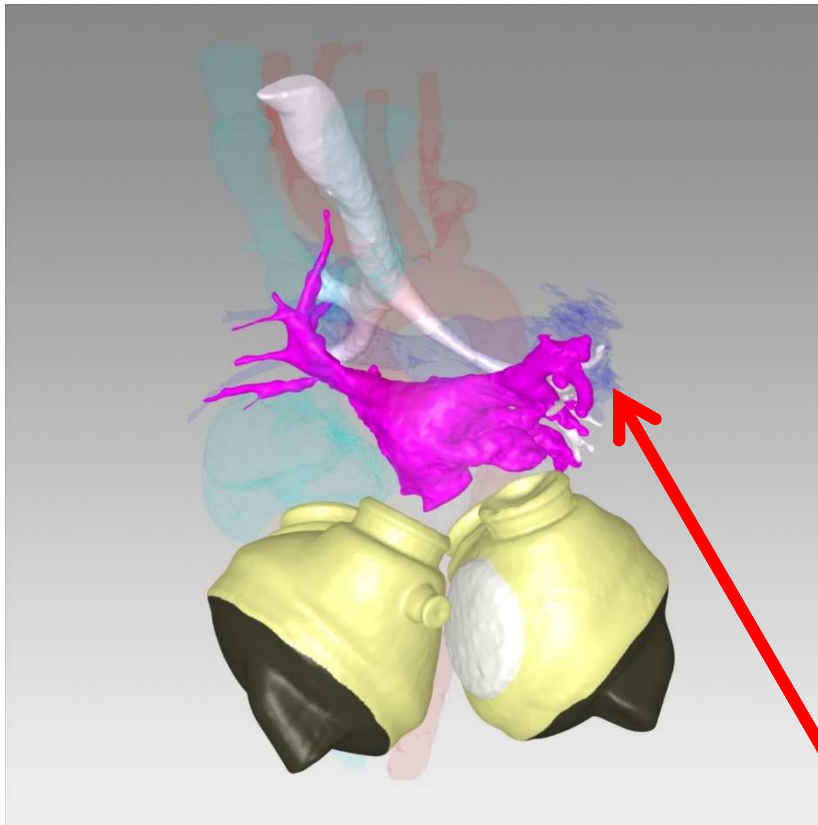
Question: What is cause?



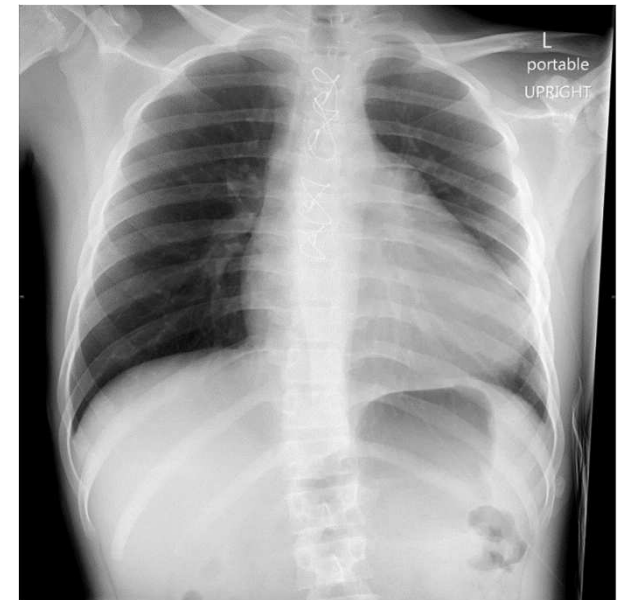
UhOh

# Innovations from PCH Implant

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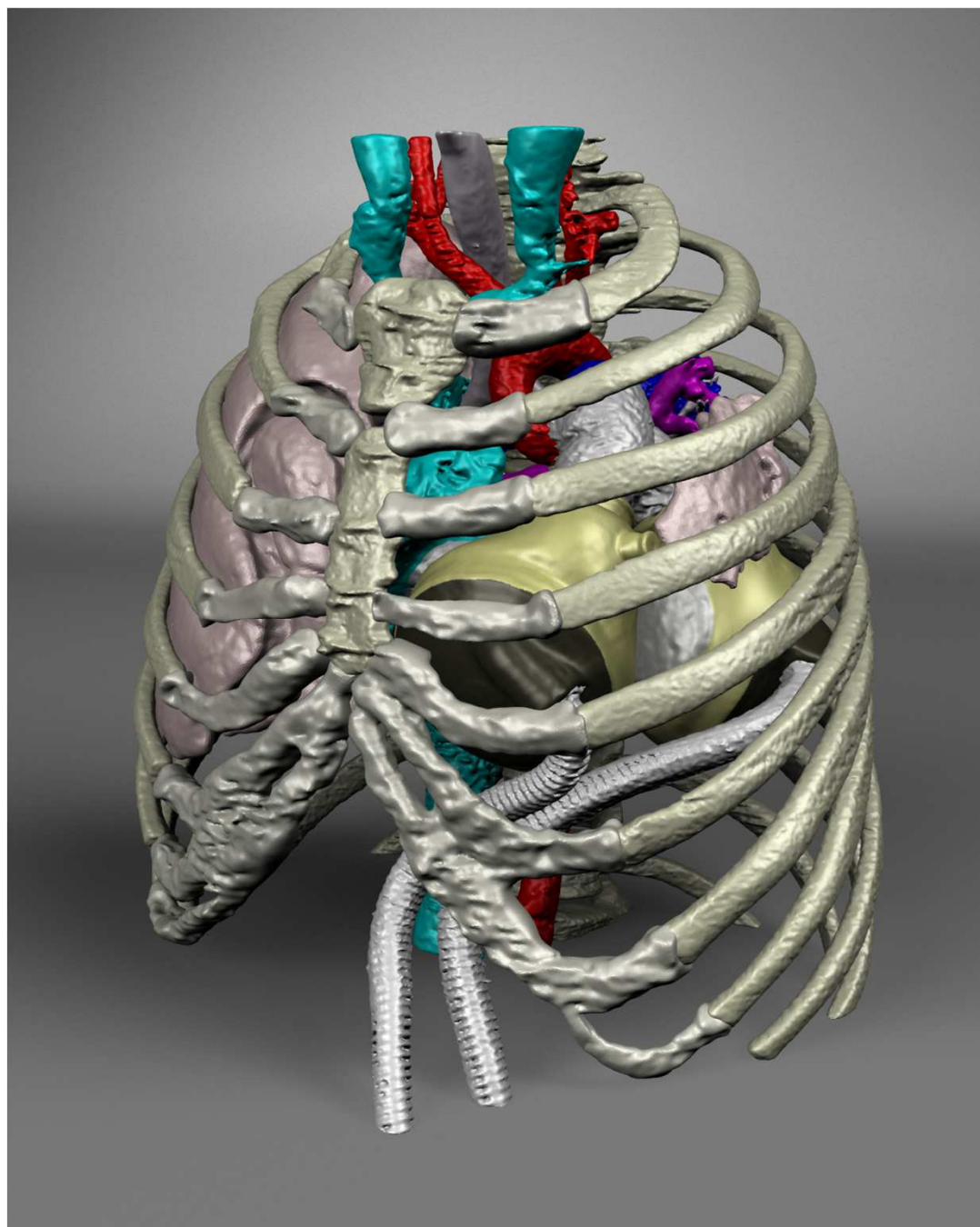


# Successfully Bridged to Transplant 12 Days After TAH



**Post Heart Tx**



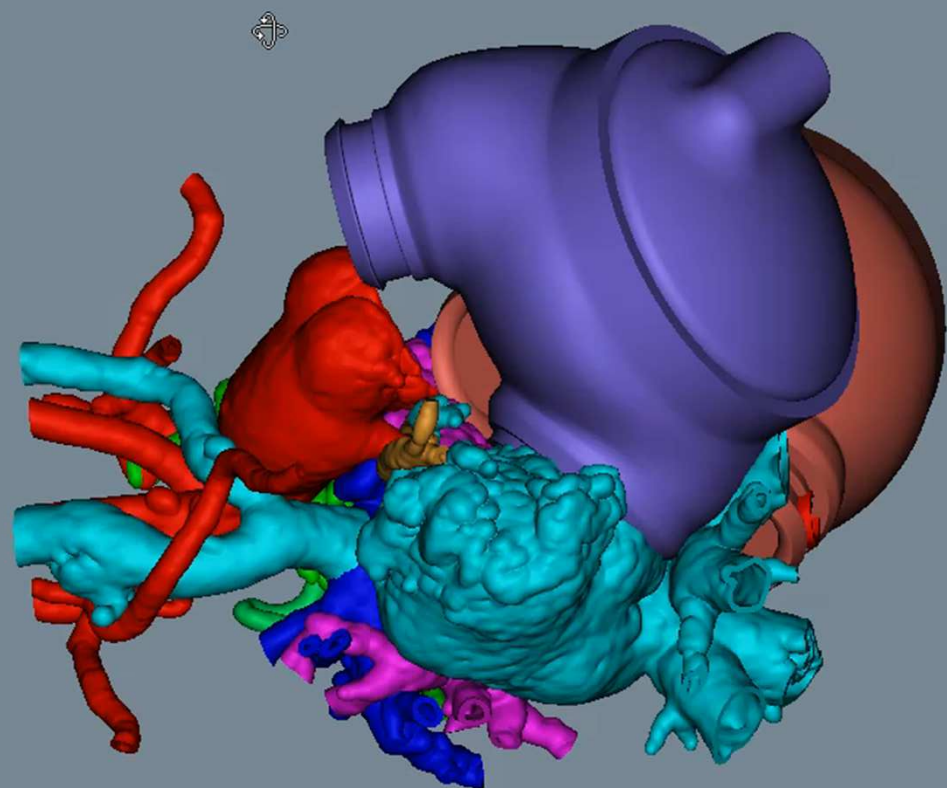


# Total Artificial Heart: Innovations

Using CT imaging  
And 3D models  
for virtual fitting

*Courtesy of  
J. Ryan, PhD  
and the PCH/ASU  
3D Print Lab*





# Innovation: Virtual Heart Transplantation

- Size Matching Concerns:
  - Cardiac output (allograft undersized)
  - Compression (allograft oversized)
- Size Matching Methods:
  - Donor: Recipient Body Weight Ratio (clinical standard)
  - Echocardiogram Measurement Ratios
- Limited/no donor and recipient anatomical aberrations directly considered

# Innovation: Virtual Heart Transplantation

	Donor	Recipient
Gender	Female	Female
Age (yrs.)	16.4	10.3
Height (cm)	163	140
Weight (kg)	60	28
	DRBW	2.1

- 1A listed patient (Hypoplastic left heart) offered oversized allograft
- Clinical team initially leaned towards declining donor offer
- Virtual heart transplant assessment performed to supplement patient care

# Innovation: Virtual Heart Transplantation

## Results:

- Virtual Transplant suggested no oversized fit-related complication
- No fit-related complications observed

	Donor	Recipient
Weight (kg)	60	28
	<b>DRBW</b>	<b>2.1</b>
Total Cardiac Volume (mL)	398	682
	<b>TCV ratio</b>	<b>0.6</b>

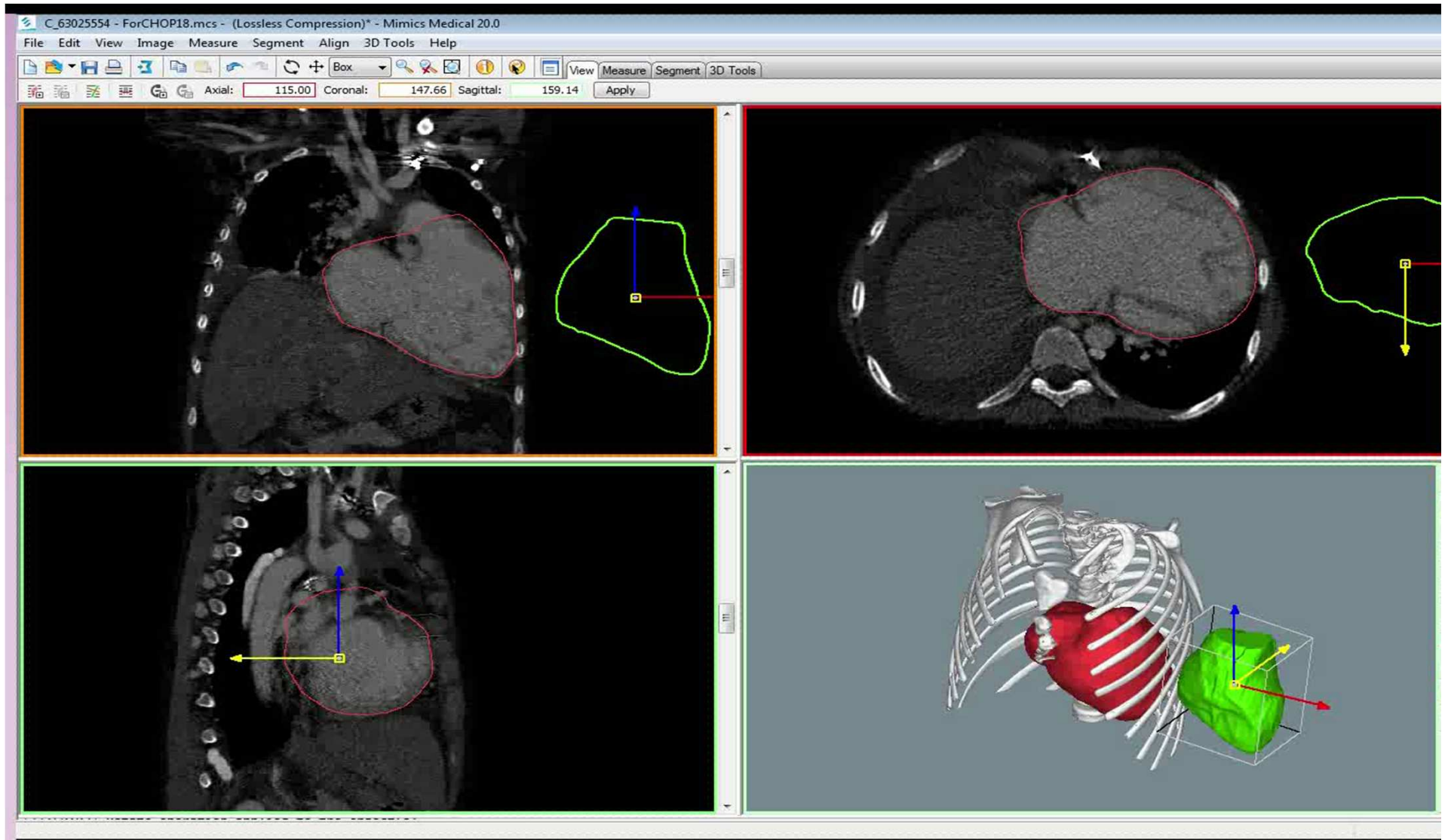
- Discharged home after 15 days
- Currently thriving over one year later

## Conclusion:

- The virtual heart transplant augmented the clinical team's available information and assisted in the acceptance of a donor offer
- Potential to expand patient donor pools by accounting for patient aberrations



# Innovation: Virtual Heart Transplantation



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cat stuck in a box



**IF IT FITS, I SITS!**



Thank you!

