Left atrial appendage occlusion/exclusion, therapeutic alternative to oral anticoagulation

Cierre percutáneo de orejuela izquierda, alternativa terapéutica a la anticoagulación oral

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An essential part of atrial fibrillation (AF) treatment is thromboembolic prevention, which usually is carried out with oral anticoagulation. However, this treatment entails an increase in the risk of bleeding, especially in geriatric patients. The observed images were taken from the clinical case of an 80-year-old woman with a history of systemic arterial hypertension, previous ischemic vascular event, and permanent AF with embolic risk (CHA2DS2VASc, 6 points) and high hemorrhagic risk (HAS-BLED, 4 points; HEMORR2HAGES, 7 points; ATRIA Risk Score, 6 points) on treatment with apixaban, who showed up at the hospital with a second digestive tract bleeding episode and with Hb of 7.4 mg/dL. In view of her history, percutaneous closure of the left atrial appendage was decided, which is an FDA approved

procedure in patients with AF and long-term oral anticoagulation contraindication.

Before the procedure, angiographic measurements were made and correlated with transesophageal echocardiogram measurements (Fig. 1A and B). A No. 24 Watchman device was chosen, which was placed guided by fluoroscopy and transesophageal echocardiography (TEE) (Fig. 1C and D). The patient evolved adequately and was discharged with dual antiplatelet therapy.

The emergence of alternative thromboembolic prevention treatments originated due to the need to reduce the bleeding risk in vulnerable patients. The Watchman left atrial appendage closure device has been assessed in two randomized trials (PROTECT AF and PREVAIL), both of non-inferiority design, with good results in comparison with warfarin^{1,2}.

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Figure 1. **A:** left atrial appendage measurements for Watchman device in 2D TEE at 0°, 45°, 90°, and 135°. **B:** fluoroscopic view in the right cranial oblique projection. **C:** display of the Watchman device in fluoroscopy. **D:** view of the Watchman device in 3D TEE.

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Conflicts of interest

All authors declare that they have no conflicts of interest.

Ethical responsibilities

Protection of people and animals. The authors declare that no experiments were performed on humans or animals for this study.

Confidentiality of data. The authors declare that they have followed the protocols of their work center on the publication of patient data.

Right to privacy and informed consent. The authors have obtained written informed consent of the patients and/or subjects mentioned in the article. The corresponding author is in possession of this document.

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