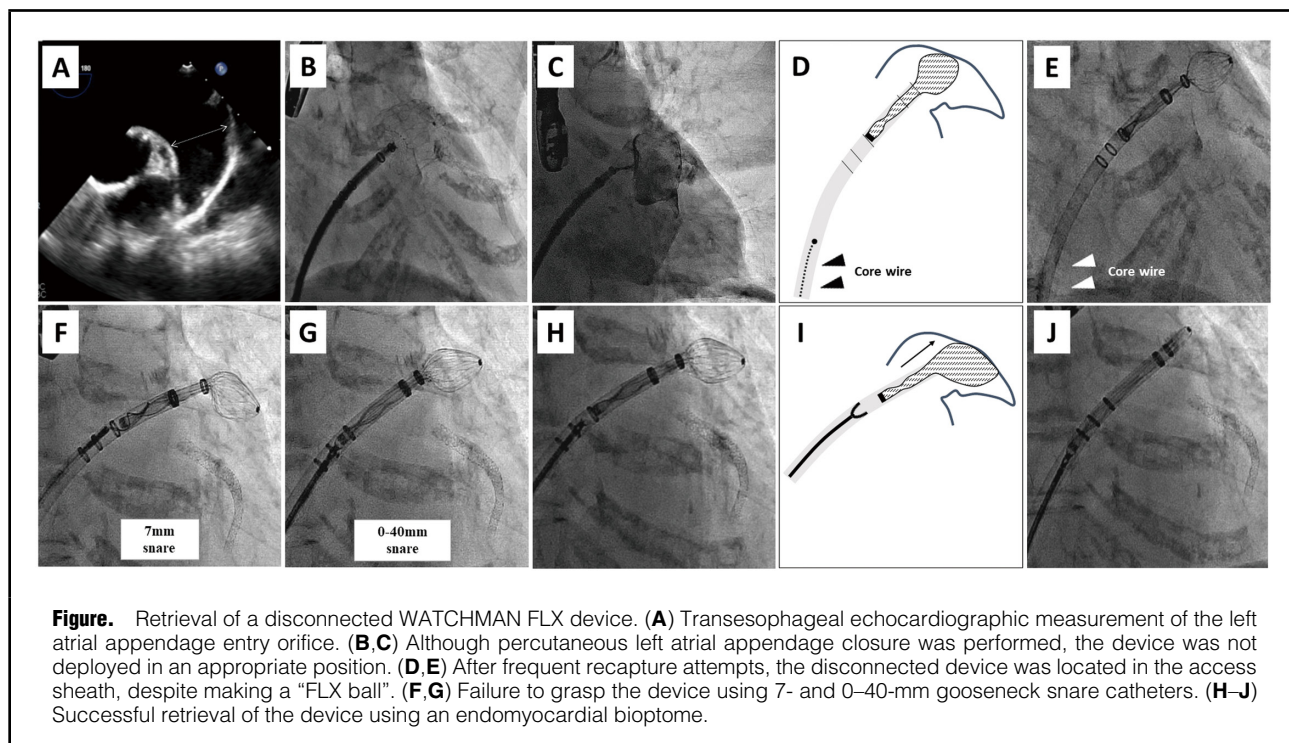


## Successful Retrieval of a Disconnected WATCHMAN FLX in the Access Sheath Using an Endomyocardial Biopptome

Yuya Adachi, MD; Masanori Yamamoto, MD; Ai Kagase, MD;  
Tatsuya Tsunaki; Ryo Yamaguchi, MD



A woman in her 80s with atrial fibrillation was referred for percutaneous left atrial appendage (LAA) closure (LAAC) due to a high risk of cardioembolic stroke and bleeding. The LAA measured 29.3 mm on transesophageal echocardiography (Figure A). Thus, LAAC was performed using a 35-mm WATCHMAN FLX (Boston Scientific, Marlborough, MA, USA; Figure B). However, deploying the device to the appropriate position proved difficult (Figure C). Frequent anticlockwise rotations and recaptures were attempted; thereafter, the device was completely disconnected from the core wire in the access sheath, despite making a “FLX-ball” (Figure D,E).

To recapture the completely separated device, we attempted to grasp the proximal site using 7- and 0–40-mm gooseneck snare catheters (Figure F,G). This approach failed several times because it was difficult to slide the snare over the device due to its smooth surface. Subsequently, we attempted to retrieve the device using an endomyocardial biopptome (Cordis, Cardinal Health, Milpitas, CA, USA). The biopptome was carefully advanced under the guidance of fluoroscopy, and transesophageal echocardiography imaging confirmed that the device was pressing against the LAA wall, preventing it from detaching from the access sheath (Figure H,I). The device was retrieved by rocking its metal

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Department of Cardiology, Toyohashi Heart Center, Toyohashi, Japan

Mailing address: Masanori Yamamoto, MD, Department of Cardiology, Toyohashi Heart Center, 21-1 Gobutori, Oyamacho, Toyohashi 441-8530, Japan. E-mail: masa-nori@nms.ac.jp

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screw using the endomyocardial biptome (**Figure J; Supplementary Movie**). Finally, a 35-mm WATCHMAN FLX was successfully deployed without any further complications. An alternative technique is to reconnect the device by screwing clockwise. If this method is ineffective, device retrieval using a biptome can be considered, depending on the situation.

This paper reports a rare complication of disconnection of a WATCHMAN FLX from the delivery cable. After

frequent attempts to recapture the device during LAAC, an endomyocardial biptome, rather than a snare catheter, helped resolve this complication.

#### **Supplementary Files**

**Supplementary Movie.** The disconnected device was successfully retrieved using an endomyocardial biptome.

Please find supplementary file(s);  
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