

The philosophy

complications

during percutaneous cardiovascular interventions

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of

Outline

- The basics
- The trainee
- The teacher
- The tools





Rich emotion experiences

- Underreported
- Variable perception
- "Scientific gap"
- Lack of adequate auditing jungle of practice











Human error

- Unability to cope with unexpected procedural events
- Loss of the global picture
- Non compliance with protocols
- Suboptimal communication within the team
- Stress lack of experience loss of concentration – inadequate actions and strategic errors
- Individual or team failure















Device or technology failure

- Uncommon in interventional practice
- Non compliance with IFU
- Lack of training & expertise
- Can often only be solved by human imagination & creativity

=> Mechanism abused by practioners...





Medical - system error

- Sleep deprivation
- Inter operator competition
- Upfront lack of concentration
- Insufficient knowledge of the patient records
- Step out of "one's boundaries"

=> Medical error - nonchalance





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The trainee

- Need for true grit
- Identify your local mentor
- A certain degree of dexterity
- Make &/or imagine a career plan
- Identify a particular field of interest (skills, research)





Key elements

- Powertraining practice...practi
- Go abroad
- At risk : cope with multitasking





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The teacher should be...

- Humble
- Open-minded (a person of this world... And of his word)
- Willing to share and teach
- A hands-on person (not a flying doctor...)
- Have a broad vision & knowledge
- Able to assure continuity in medical care (when on leave...and on his definitely leave)
- (Have been) a victim of a substantial number of complications in the past
- At risk : nonchalange







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The tools

- The mentor teacher gourou
- Textbooks
- Basics & powertraining at home
- Fellowship
- Web-based teaching
- Simulators
- Learning by sharing (courses, congresses, networking)











PERCUTANEOUS INTERVENTIONAL CARDIOVASCULAR MEDICINE

THE PCR-EAPCI TEXTBOOK



EDITORS

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www.escardio.org/EAPCI

The essentials

 The PCR – EAPCI reference text book and on line platform

Core medical knowledge for the interventionalist

- Comprehensive
 Coronary structural valvular vascular
- Innovative

On line (App – Ipad) Extremely illustrative



www.escardio.org/EAPCI

Homework & then...





The PCR online learning program on complication management"

Olivier Muller Lausanne University Hospital



PCR online learning program



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Coronary Stent Loss

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| CORONARY STENT LOSS | | | | | | | |
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PCRonline / Cases & Resources / Complications / Embolised devices

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Complications: coronary stent loss

Embolised device complications

Stent loss and embolisation although infrequent (<7% of PCI) since factory crimping was introduced has not been eliminated entirely. Retrieval techniques are technically challenging and evidence for their success is limited to case reports and case series from experienced operators. The key principle for retrieval is to bring the foreign body down into the iliac artery as this removes the risk of embolisation to the cerebrovascular system and or thrombosis in a coronary artery.

The position of the guidewire will be crucial in the choice of the technique, indeed, some techniques, are not possible in the case of inadvertent removal of the guidewire. Thus, taking great care to keep the wire position inside the stent and across the lesion is of major importance. For stent loss within the coronary circulation the key principle for successful retrieval is to keep the guidewire position secure at all times.

PCR Complications Team Patrick Calvert, Eric Eeckhout, Michael Haude and Olivier Muller Medical assistants Timothy Sze Wah Lai Coronary Stent Loss





Learning by watching



PCR and Terumo Learning $EDGE^{TM}$



Physical simulation-based learning





Lauder L, Eurointervention, in process



Learning by sharing

- Congresses courses
- Networking
- Case based sessions
- Social media
- Individual contacts
- Morbidity mortality meetings
- Team debriefings after each major complication
- Learn from your own/others mistakes





What have we learned ?

- To meet a lot of people
- Learning through sharing, for better and for worse
- To uphold the core values of modesty, honesty & mutual respect
- Trigger human creativity in complications management
- To organise complications meetings





Far east Asia – December 2015





Confidence



Confidence















James Ensor – The Bad Doctors BOZAR, Bruxelles - 1892

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