The Nit-Occlud® PDA occlusion system is designed for the safe and atraumatic occlusion of the congenital heart defect PDA (Persistent Ductus Arteriosus).

The unique coil design and its flexibility make Nit-Occlud® PDA the ideal choice for the closure of small to medium sized PDA of all types.

www.pfmmedical.com
Nit-Occlud® PDA occlusion system is designed for the safe and effective occlusion of the congenital heart defect PDA (Persistent Ductus Arteriosus). Two different types and a broad variety of sizes make the unique spiral-shaped occlusion device the ideal choice for the closure of all PDA types.

**Benefits**

**Customised**
The Nit-Occlud® PDA types Flex and Medium (limited access) vary in size and flexibility to match individual PDA morphologies and sizes.

**Highly flexible and adaptive**
The degree of stiffness decreases from the distal to the proximal windings, allowing the coil to adapt perfectly to the anatomy of various PDA types.

**Safe closure**
The delivery system facilitates optimal device positioning. Tight and compact windings ensure efficient occlusion.

**Easy of use**
The specially developed application system is easy to use. It is inserted by means of a 4-5 F implantation catheter. The coil is repositionable and retrievable prior to release.

**Details**

- Pre-mounted coil system
- Fits all PDA types
- 4 F or 5 F system
- Graduated stiffness from aortal to proximal
- Strong distal windings avoid »pull through«
- Proximal windings anchor the device on the pulmonary side
- Delivery through 4F/5F
- Repositionable and retrievable prior to release
- Radiopaque
- MR compatible

**Portfolio**

**Nit-Occlud® PDA-R**
PDA Occlusion Device (plug type)

**Nit-Occlud® Lê VSD**
VSD Occlusion Device (coil type)

**Nit-Occlud® PFO**
PFO Occlusion Device (umbrella type)

**Multi-Snare**
Grasping Device

**Use**

**Case 1**
- Patient: female, 19 years 6 months old, 63 kg
- PDA measurements: short broad type,
  - D 1 = 4,0 mm, D 2 = 10,0 mm, L = 7,0 mm
- Selected coil: 11 x 6 mm
- Clinical outcome: closed

**Case 2**
- Patient: female, 4 years old, 17 kg
- PDA measurements: short broad type,
  - D 1 = 3,0 mm, D 2 = 10,0mm, L = 9 mm
- Selected coil: 9 x 6 mm
- Clinical outcome: closed

*Case 1: Prof. Dr. med. Sievert, Cardiovascular Center, Frankfurt/Dr. med. Lê, Universitätsklinik Eppendorf, Hamburg, Germany*
*Case 2: Dr. med. Borges, Hospital de Clinicas Caracas, Venezuela/Dr. med. Freudenthal, Kardiozentrum, La Paz, Bolivia*
Nit-Occlud® PDA

Knowledge

The first pfm medical PDA coil system was introduced in 1993. Since 2001 our 2nd generation system - Nit-Occlud® PDA - is being successfully used worldwide.

Handling

A lateral aortogram should be performed to measure the dimensions of the PDA.

According to the measurements, the ductus type and the following recommendations, a coil should be selected as follows:

The distal coil diameter $D$ should be \textbf{max. 2 mm larger than $D_2$}.

The distal coil diameter $D$ should be \textbf{min. 3 to 4 mm larger than $D_1$}.

Length of the configured coil $L_c$ should be \textbf{not longer than $L_3$}.

Dimensions to be measured

$D_1 =$ Minimum Diameter, $D_2 =$ Maximum Diameter, $L_3 =$ PDA Length

Coil Dimensions

$D =$ Distal Diameter
$P =$ Proximal Diameter
$L_c =$ Length configured

Function

The Nit-Occlud® PDA coil adapts perfectly to various ductus types and sizes. To secure the implant in the ductus, \textbf{strong distal windings} avoid «pull through» back into the pulmonary artery. To avoid embolisation into the aorta, \textbf{proximal windings are anchoring} the device on the pulmonary side.
Nit-Occlud® PDA › Permanent implant for the closure of Persistent Ductus Arteriosus (PDA)
▶ Content: Implant, delivery system, implantation catheter

<table>
<thead>
<tr>
<th>Type</th>
<th>REF</th>
<th>Distal x Prox. Coil Diameter</th>
<th>Lc</th>
<th>Implantation Catheter</th>
<th>Length Catheter</th>
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<tbody>
<tr>
<td>Flex</td>
<td>145044</td>
<td>4 x 4 mm</td>
<td>8.5 mm</td>
<td>4 F</td>
<td>85 cm</td>
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<td>11 x 6 mm</td>
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<td>5 F</td>
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Occlumarker: › Pigtail Catheter for accurate aortographic measurement of PDA sizes
▶ Exact DCI-calibration with 3 distal markers, 10 and 20 mm apart

<table>
<thead>
<tr>
<th>REF</th>
<th>Size</th>
<th>Length</th>
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<tr>
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<tr>
<td>147411</td>
<td>4 F</td>
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<tr>
<td>147471</td>
<td>4 F</td>
<td>110 cm</td>
<td>0.032&quot;</td>
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<tr>
<td>147431</td>
<td>5 F</td>
<td>90 cm</td>
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<td>5</td>
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<tr>
<td>147481</td>
<td>5 F</td>
<td>110 cm</td>
<td>0.035&quot;</td>
<td>5</td>
</tr>
</tbody>
</table>

Multi-Snare* › For use in middle-sized to large vessels
▶ Content: Snare, snare catheter, insertion aid, torquer

<table>
<thead>
<tr>
<th>REF</th>
<th>Snare Diameter</th>
<th>Snare Length</th>
<th>Introducer</th>
<th>Introducer Length</th>
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<tbody>
<tr>
<td>147305</td>
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Should you have any questions our Customer Service & Sales Support team is happy to advise you.

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