

[Poster Board #H53] A Multi-Center Trial with the IBV™ Valve for Treatment of Severe Emphysema, [Publication Page: A611]

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Objective: Lung Volume Reduction Surgery for selected patients with severe emphysema improves pulmonary function, exercise capacity and quality of life, but with significant morbidity and mortality. A minimally invasive therapy could provide palliation with less risk. The IBV™ Valve (Spiration, Inc) blocks distal airflow to areas of severe emphysema with minimal perfusion. The valve is designed to allow secretions to pass centrally and to allow removal if necessary.

Methods: Patients underwent endoscopic placement of multiple valves into both upper lobes with flexible bronchoscopy. Follow-up bronchoscopy was done after 1 month for adjustments if needed. Patients are being followed at 1,3,6, and 12 months.

Results: Seven centers treated 60 patients between January 2004 and July 2005. Patient follow-up ranges from 2 to 12 months. A mean of 6.5 valves per patient were placed. Valves were positioned in 100% of desired airways, and the procedure time ranged from 15 to 187 minutes (mean 62). Segmental airways were treated 71%, and subsegmental airways 29% of the time. Length of stay ranged from 1 to 32 days with a mean of 2.5 and median of 2 days. Follow-up bronchoscopy resulted in additional valves, or valve revision in 28 patients. All valves designated for removal were removed up to 9 months after original placement.

Conclusions: The IBV™ valve system procedure is acceptable to proceed with further clinical studies. The IBV™ valve may be a minimally invasive alternative to surgical LVRS.

Session Info: [**] Thematic Poster Session, [C121] INTERVENTIONAL PULMONOLOGY AND THORACIC SURGERY

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