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(54) **VASCULAR HOLE CLOSURE DEVICE**

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(76) Inventors: **James F. McGuckin**, Radnor, PA (US); **John D. Leedle**, Philadelphia, PA (US); **James S. Tarmin**, Philadelphia, PA (US); **Thanu Anidharan**, Downingtown, PA (US)

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Correspondence Address:
Neil D. Gershon
1011 High Ridge Road
Stamford, CT 06905 (US)

(57) **ABSTRACT**

A device for closing an aperture in a vessel wall comprising a covering member having a longitudinal axis and positionable inside the vessel against the internal opening of the aperture and having a dimension to prevent egress of fluid through the aperture and having a first opening. A first retainer is positionable external of the vessel. A flexible connecting member operatively connects the covering member and the first retainer, wherein the first opening of the covering member is configured to restrict movement of the connecting member.

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(22) Filed: **Aug. 12, 2010**

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(63) Continuation-in-part of application No. 12/358,411, filed on Jan. 23, 2009.

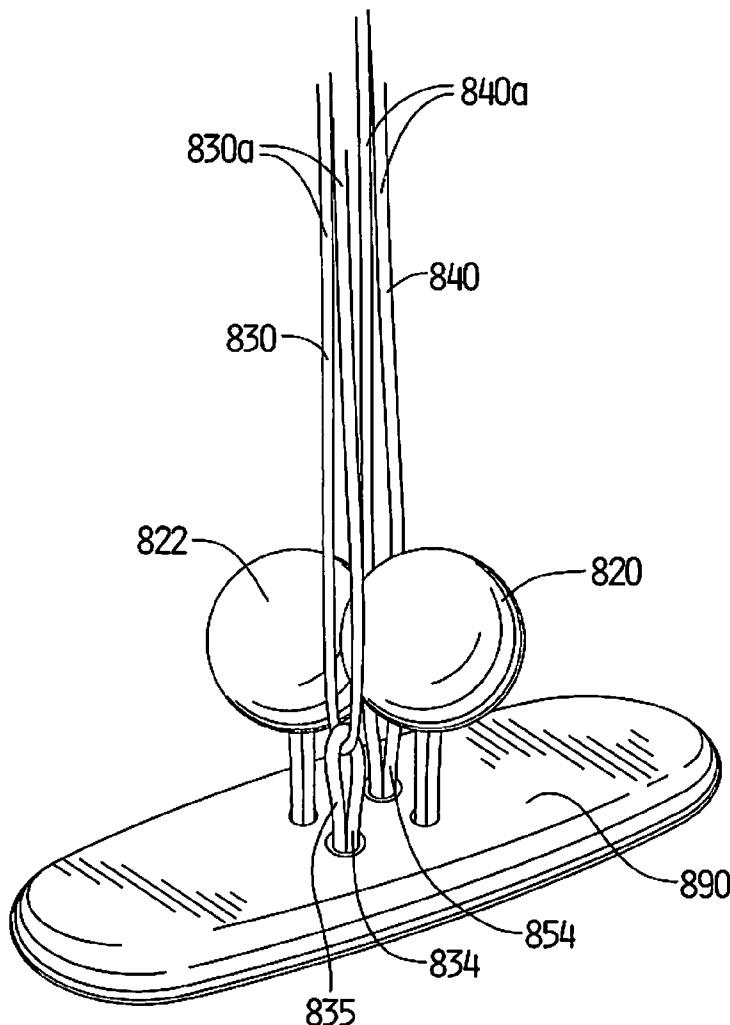


FIG. 1

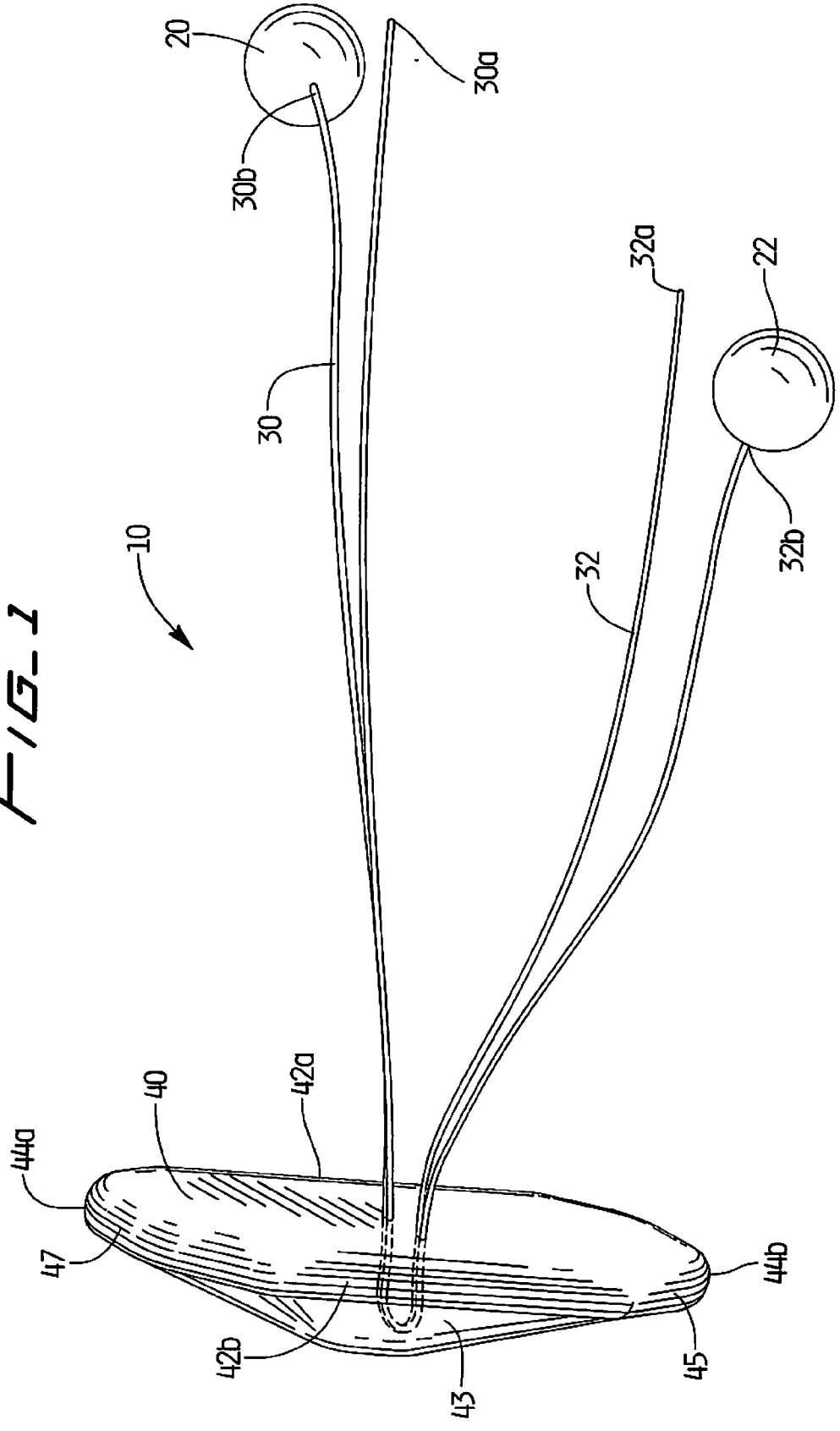


FIG. 2

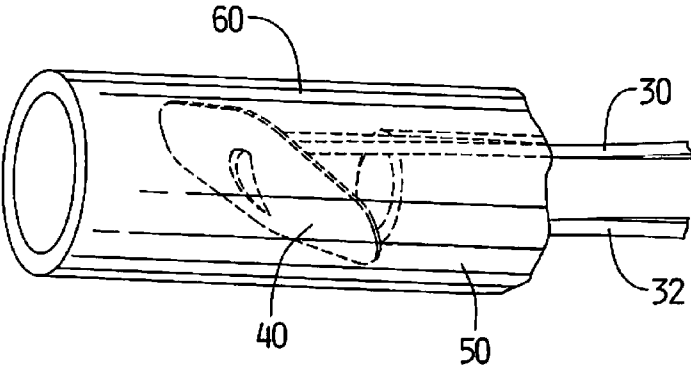
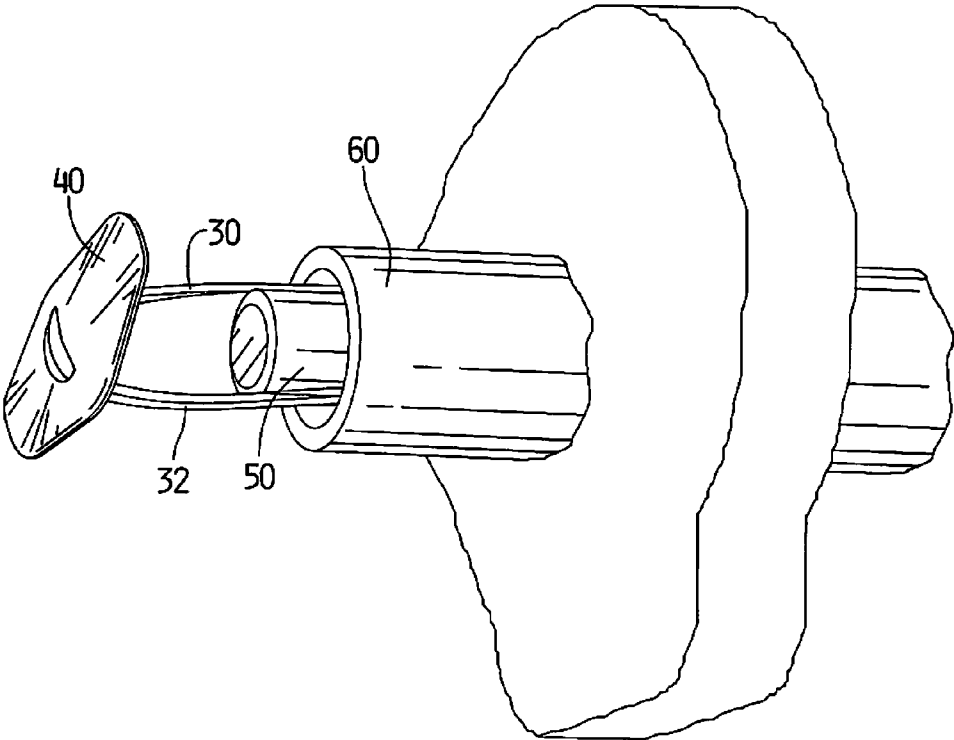
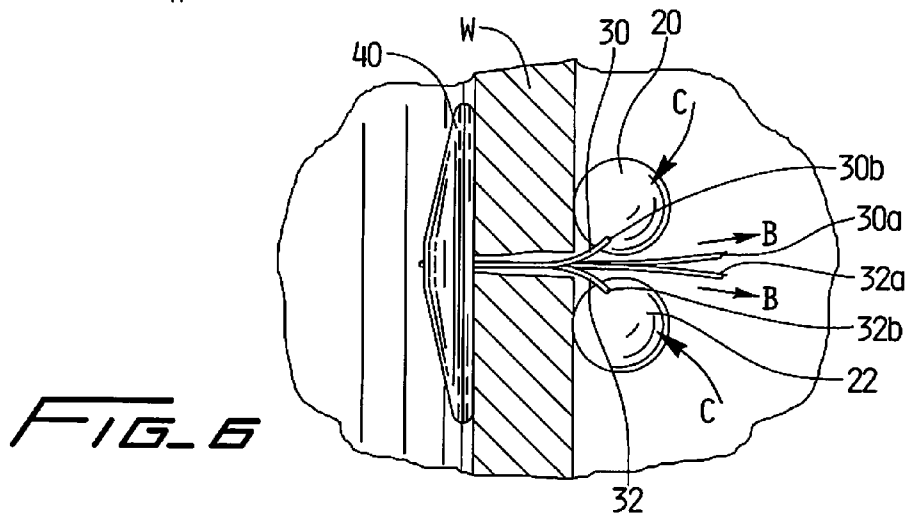
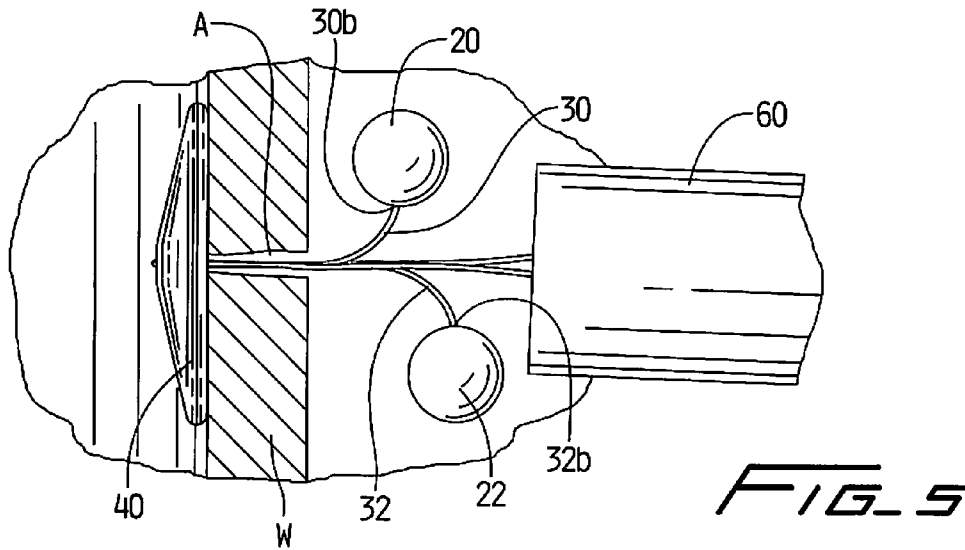
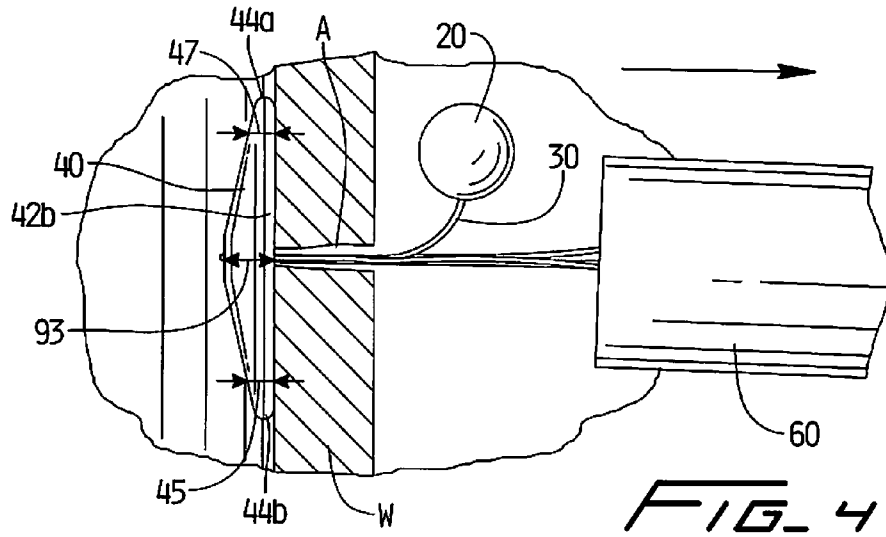


FIG. 3





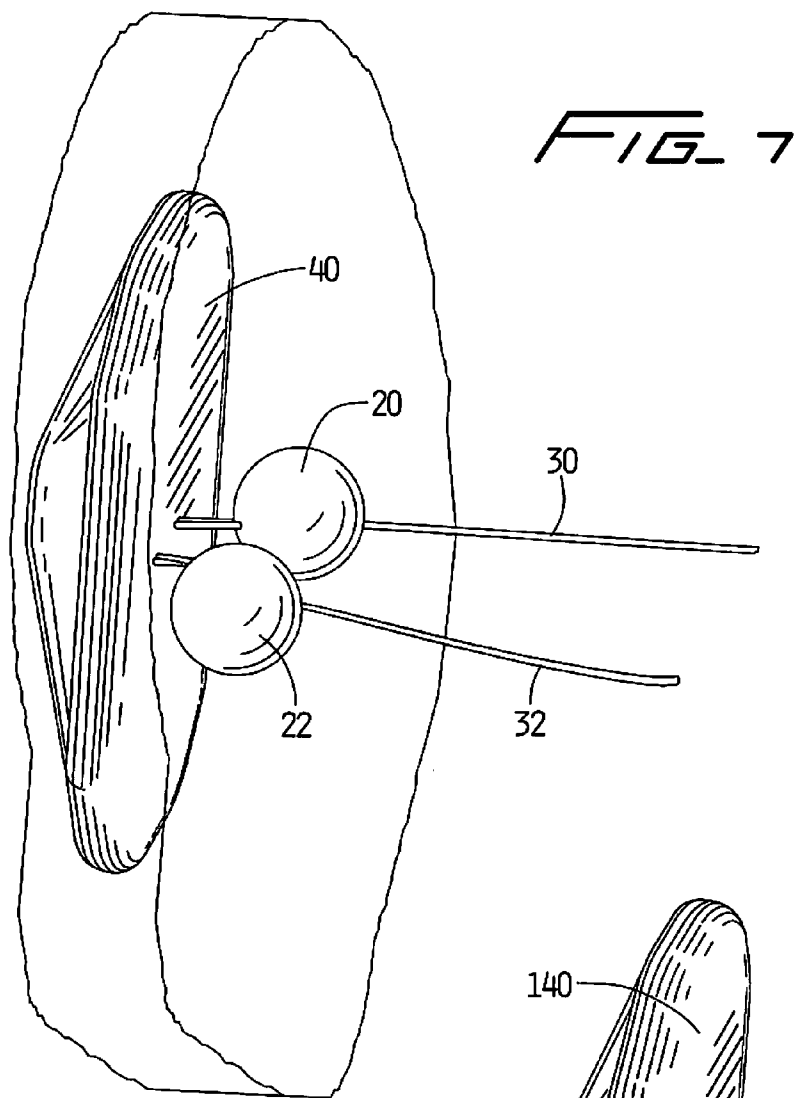


FIG. 8

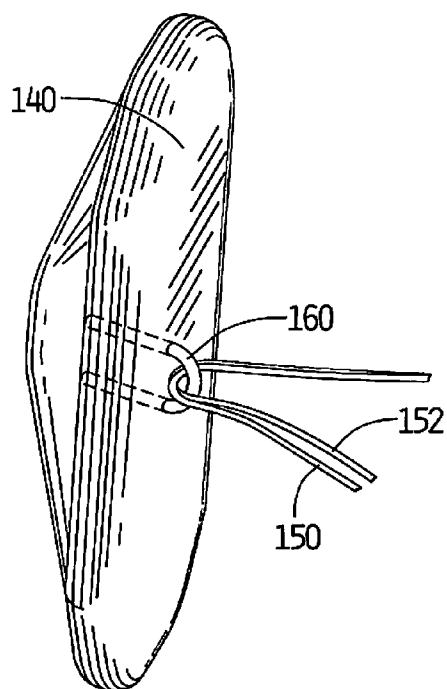
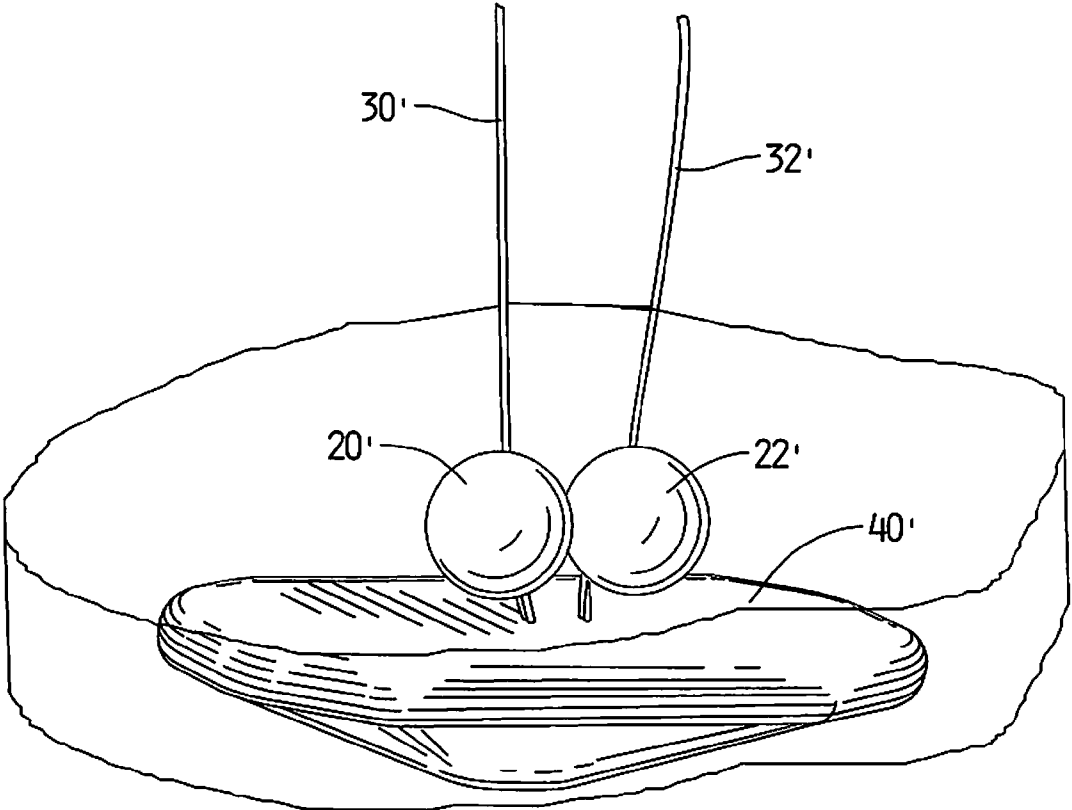


FIG. 9



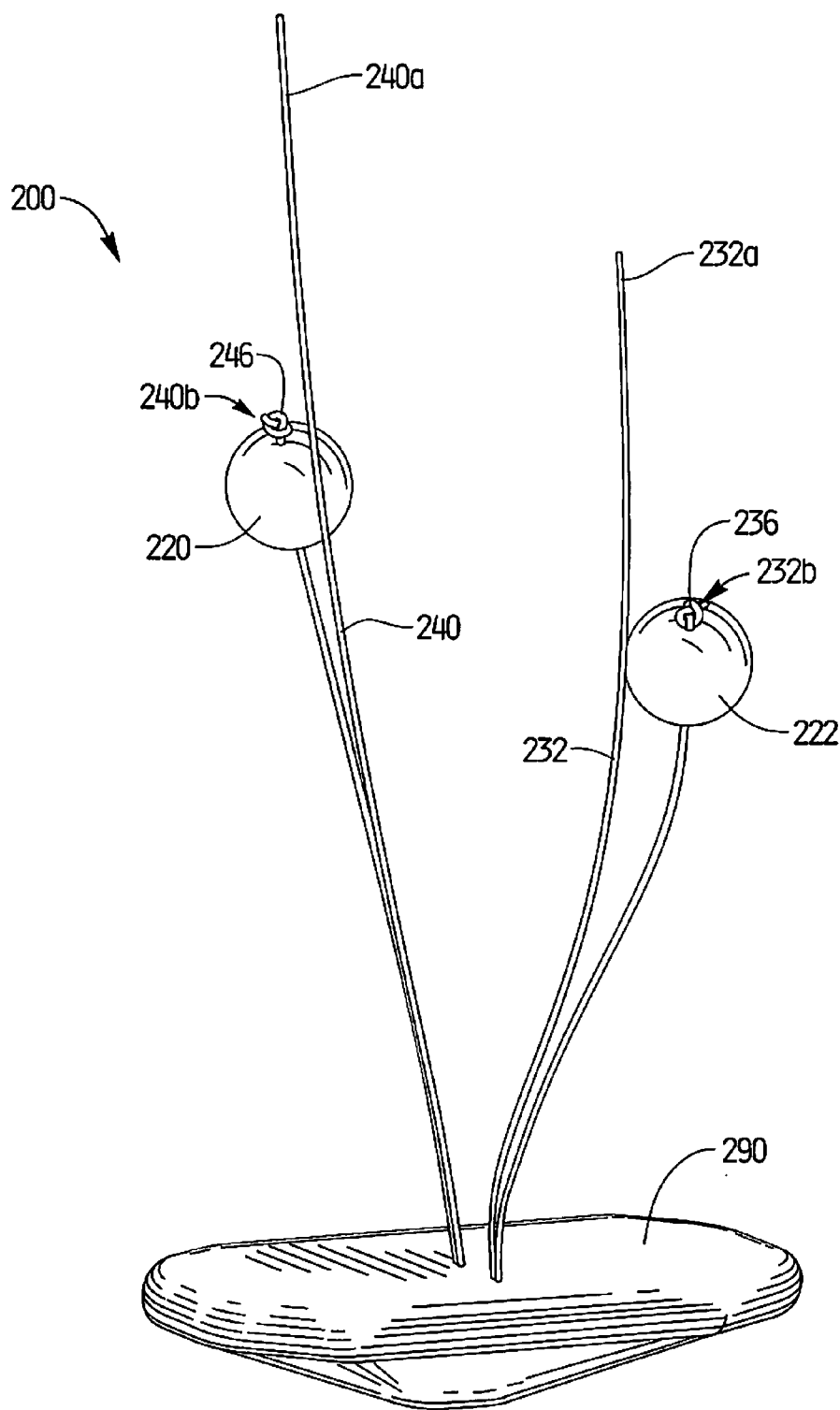


FIG. 10

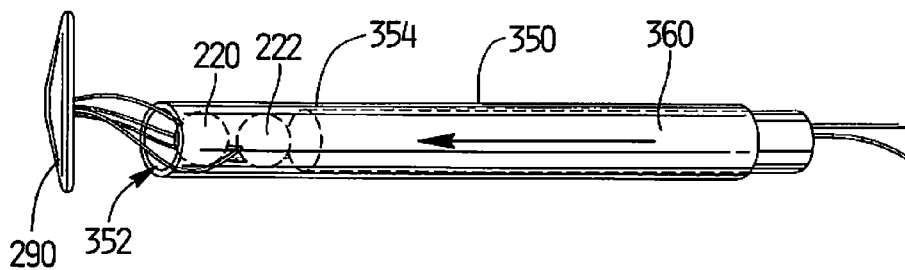


FIG. 11

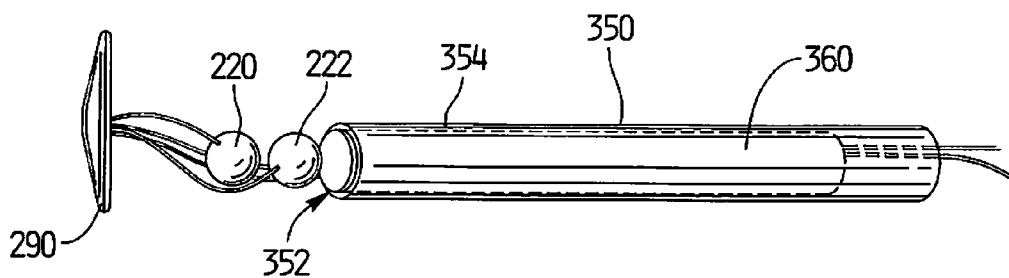


FIG. 12

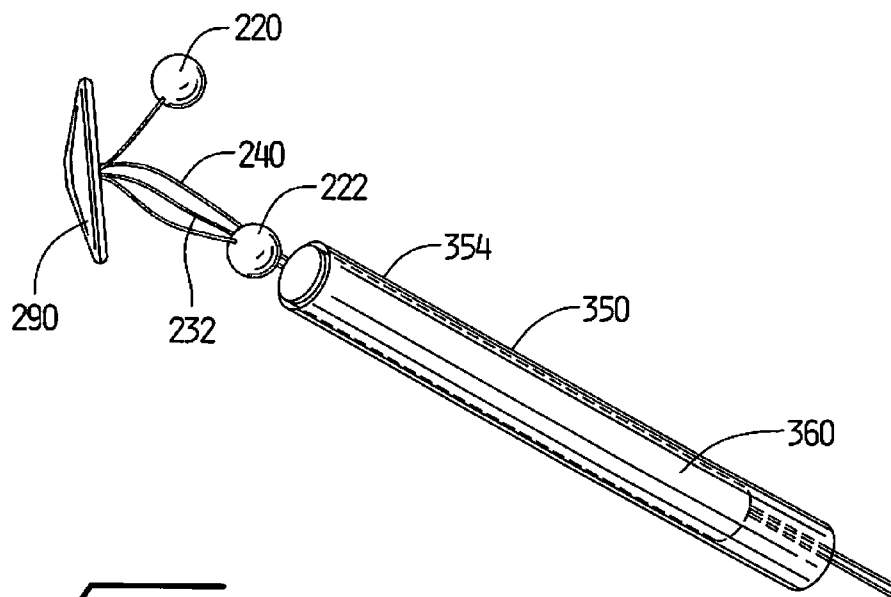
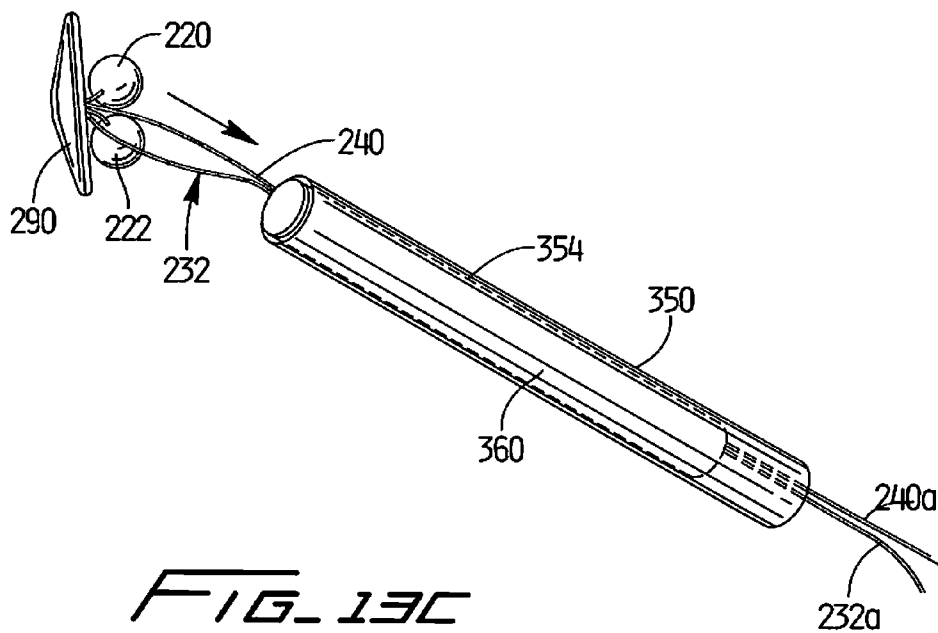
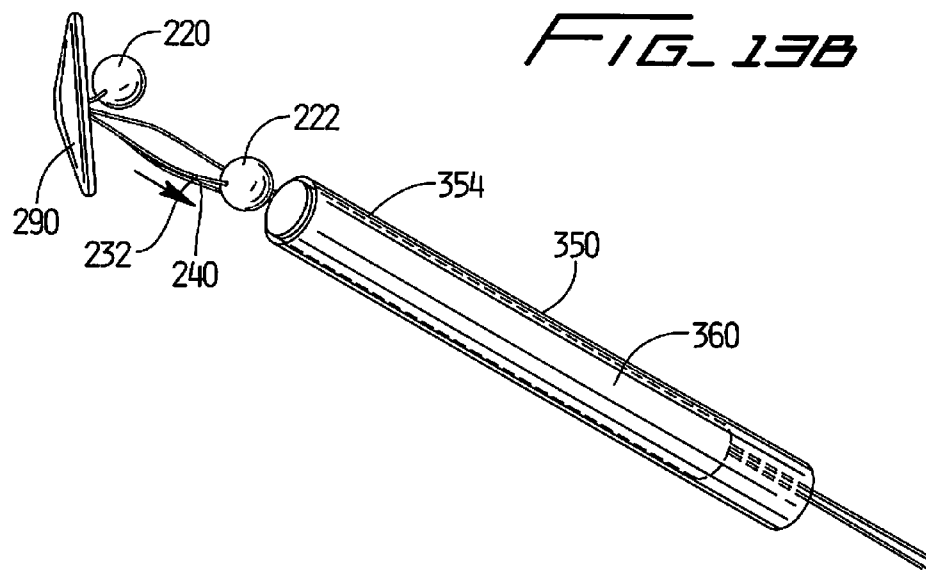


FIG. 13A



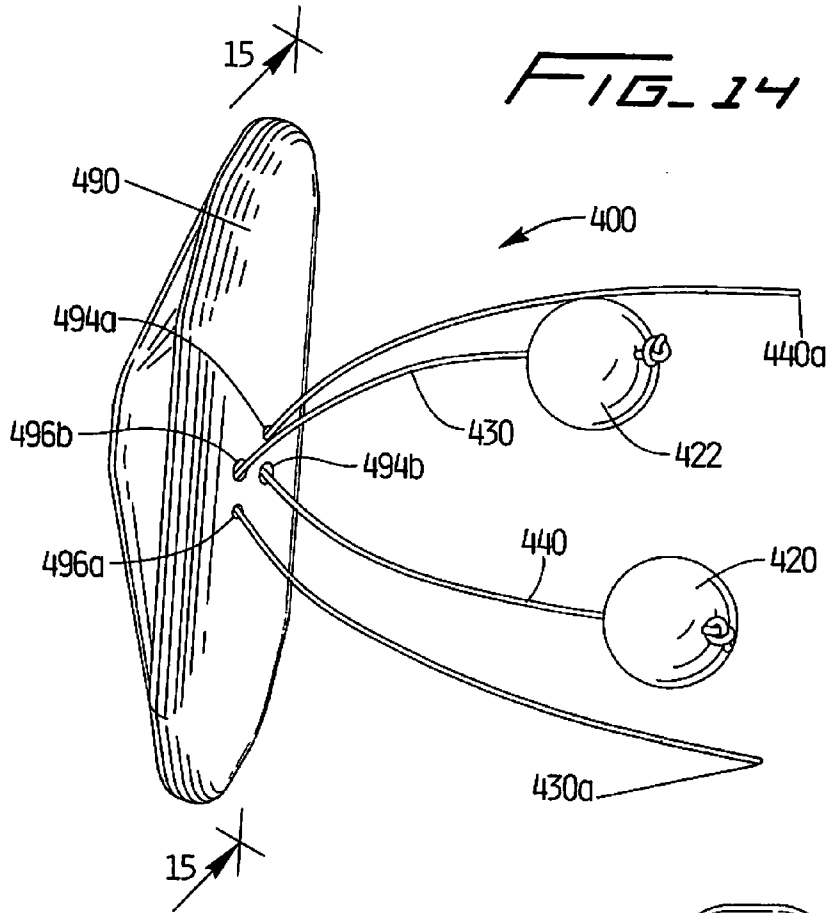


FIG. 14

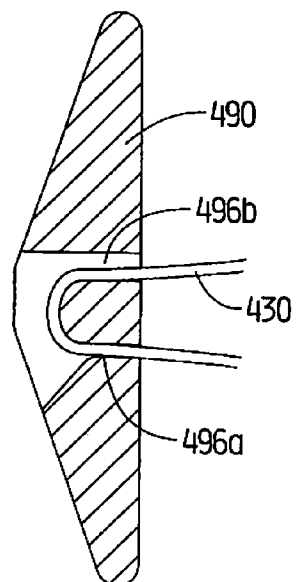


FIG. 15

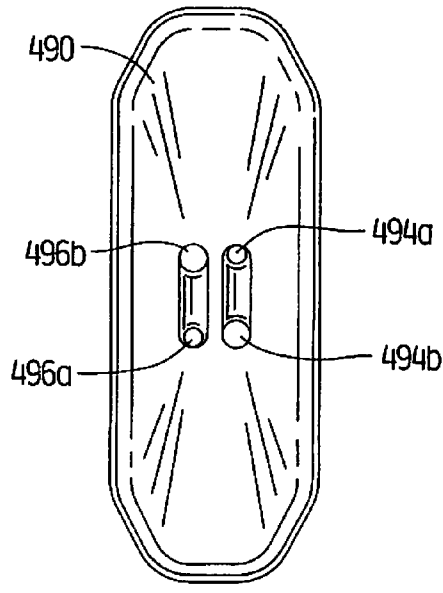


FIG. 16

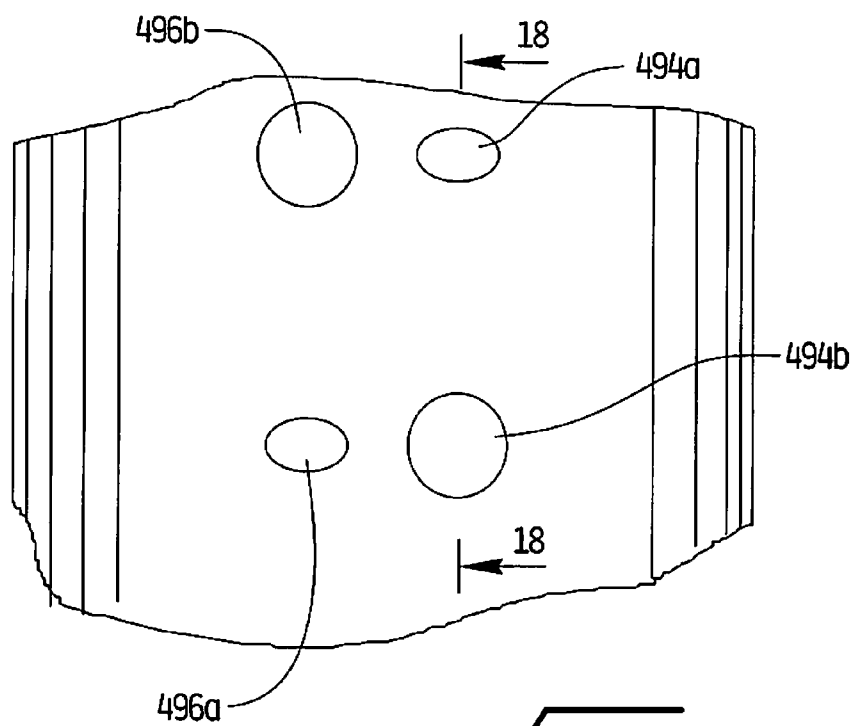


FIG. 17

FIG. 18

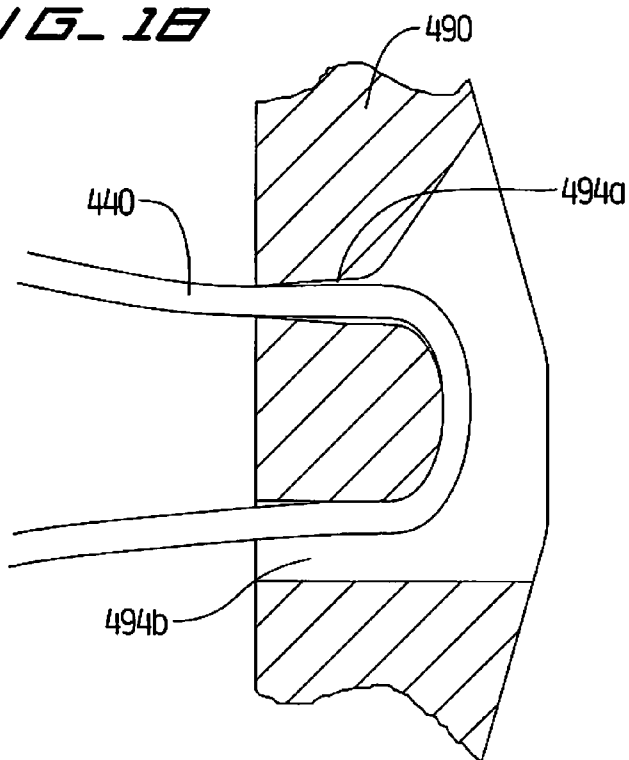


FIG. 19

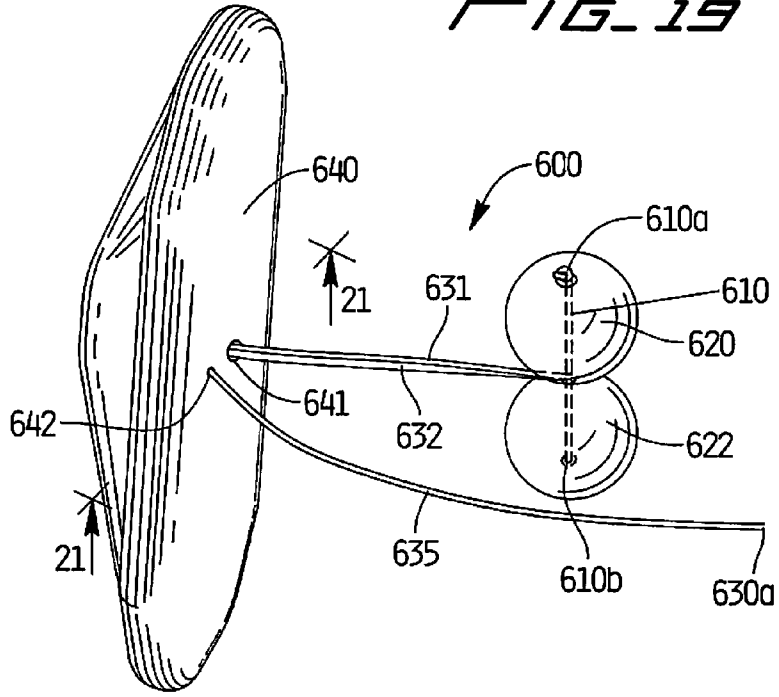


FIG. 20

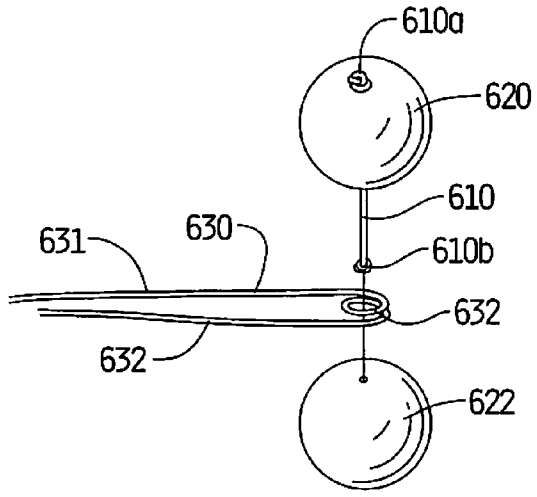
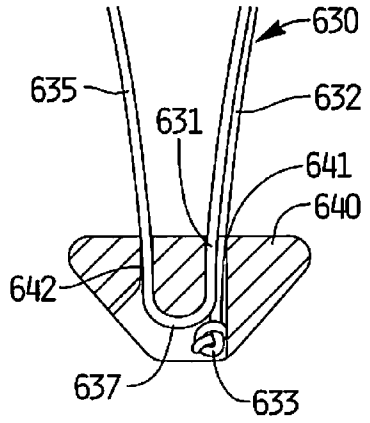


FIG. 21



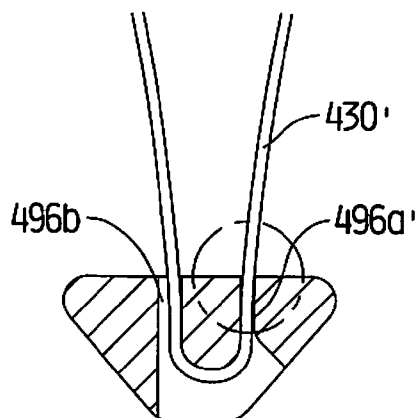


FIG. 22

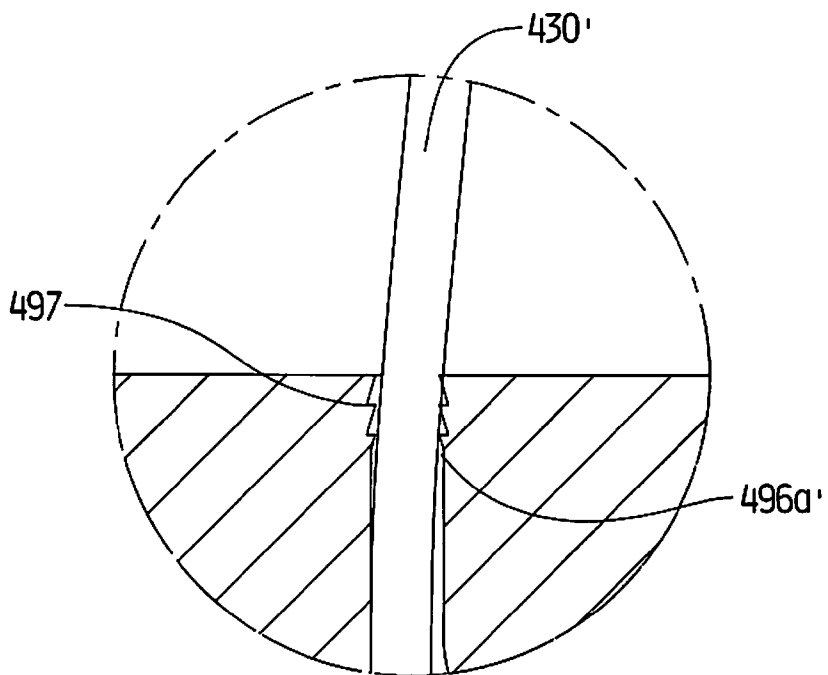


FIG. 23

FIG. 24

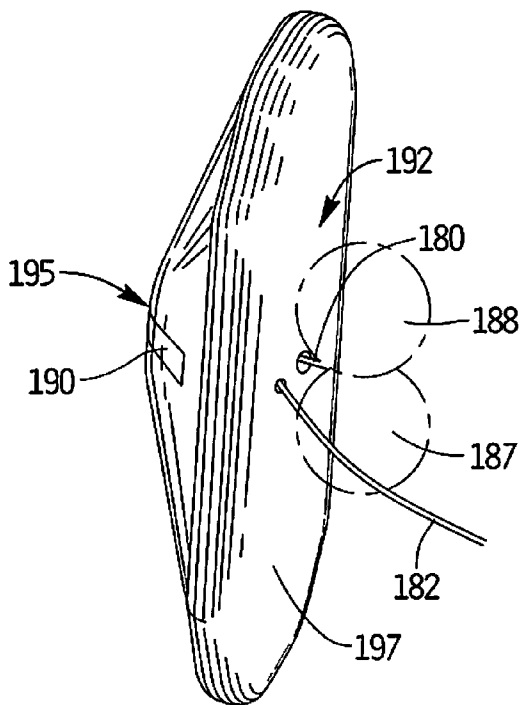
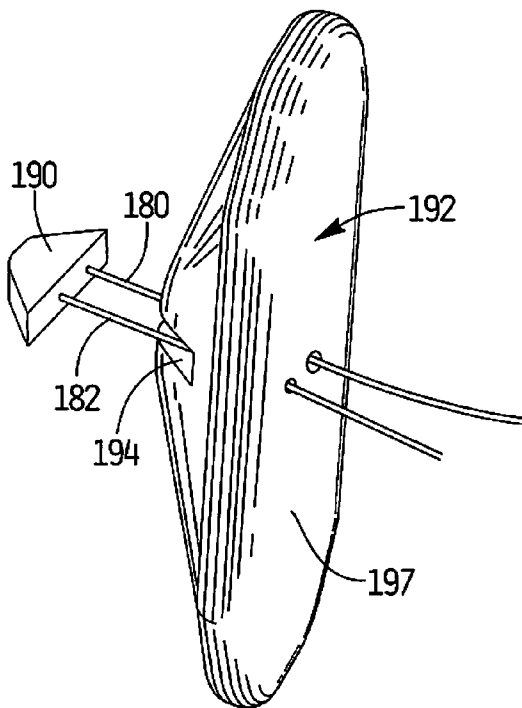


FIG. 25

FIG. 26

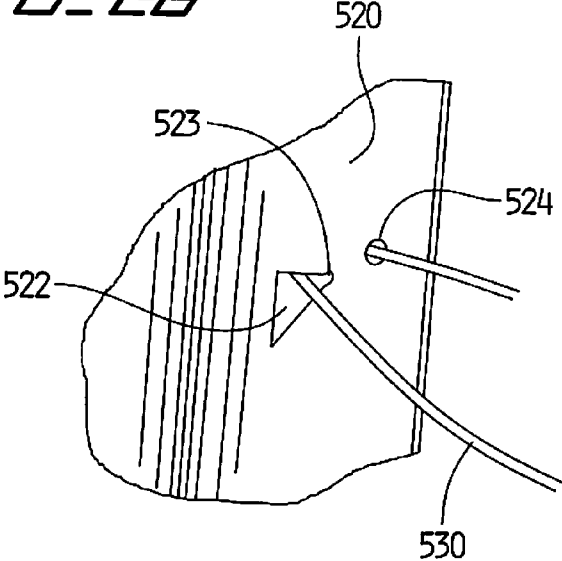


FIG. 27

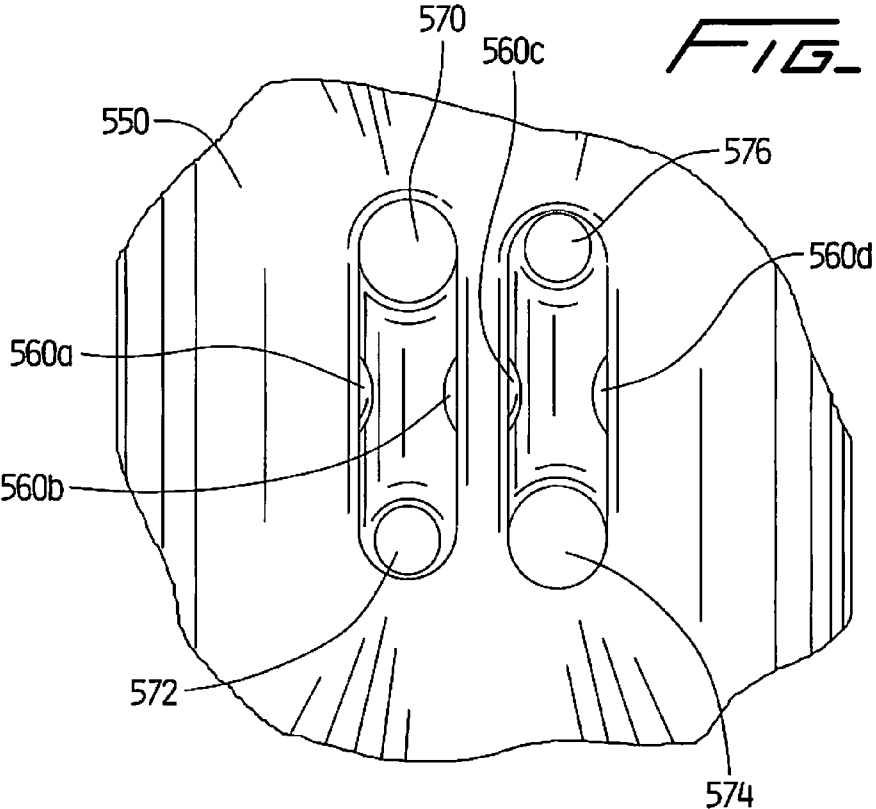
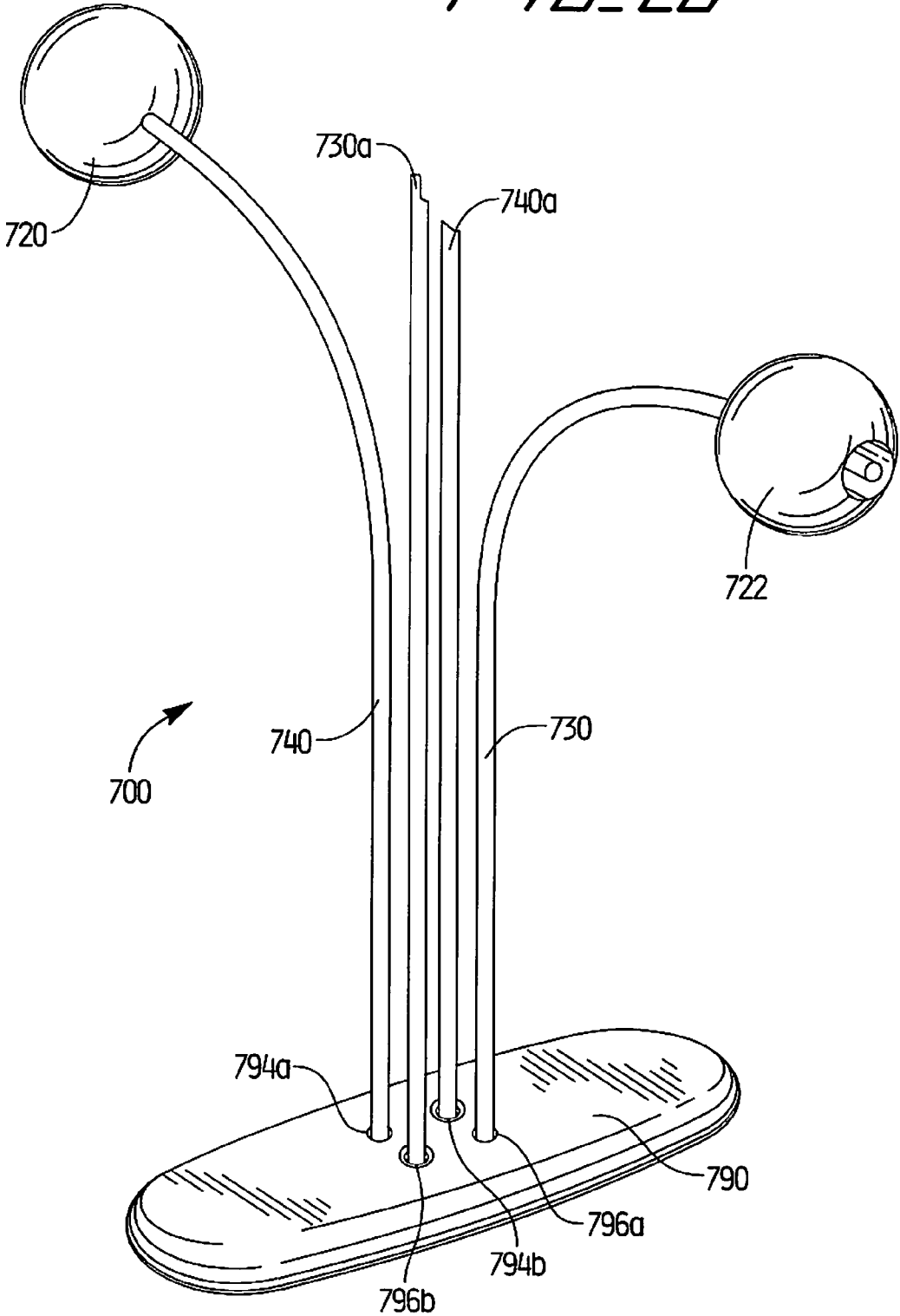


FIG. 28



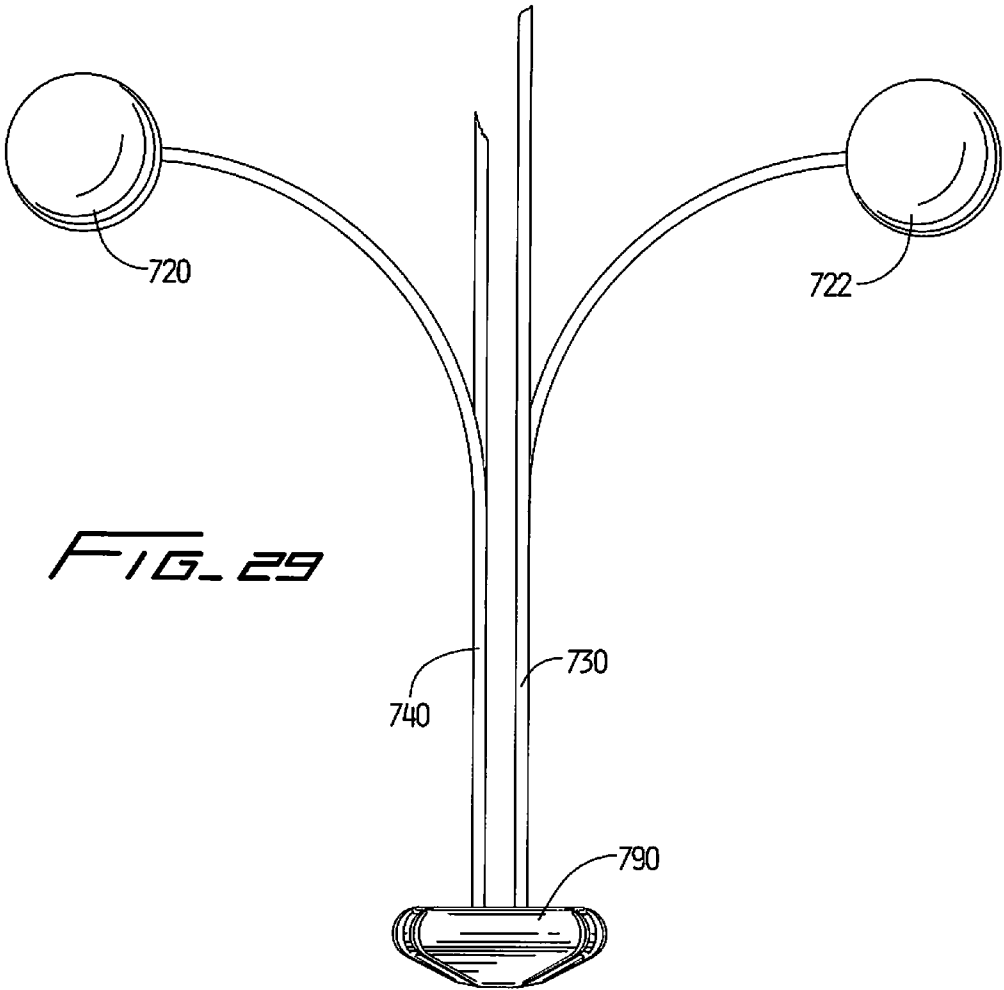


FIG. 29

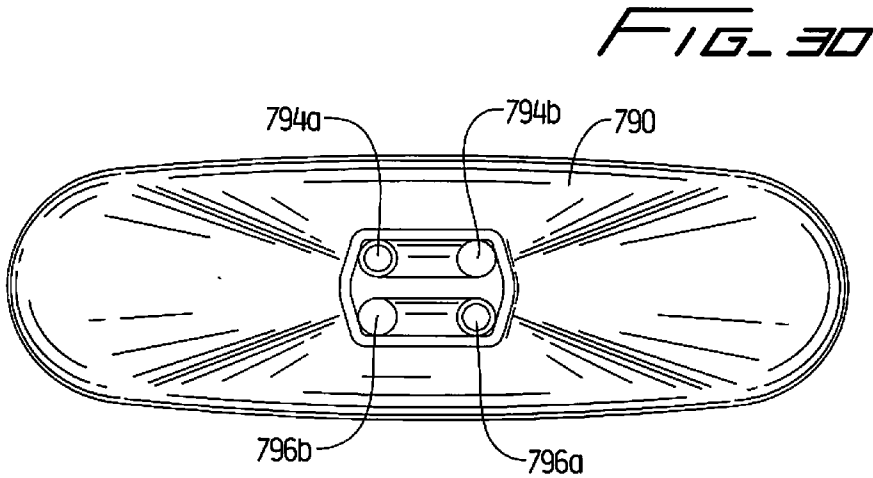


FIG. 30

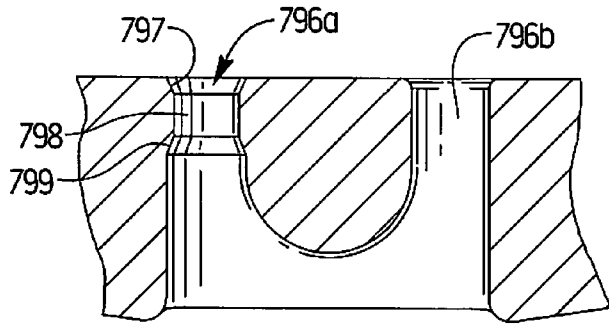


FIG. 31

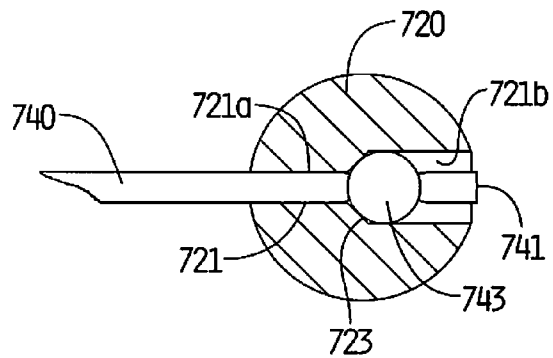


FIG. 32

FIG. 33

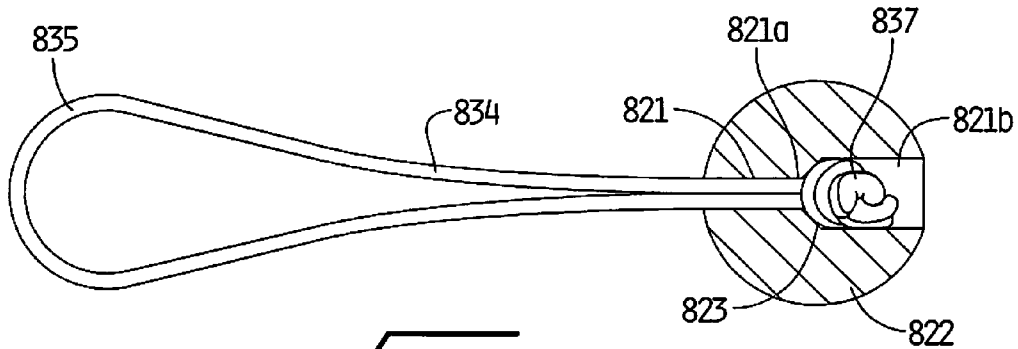
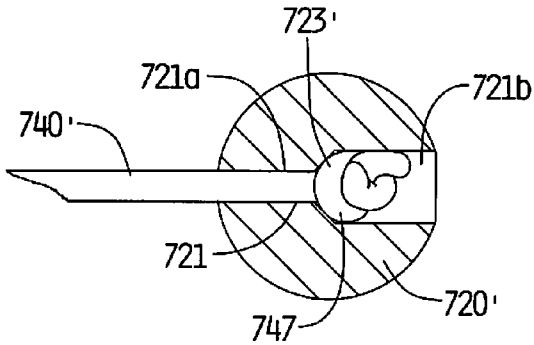


FIG. 34

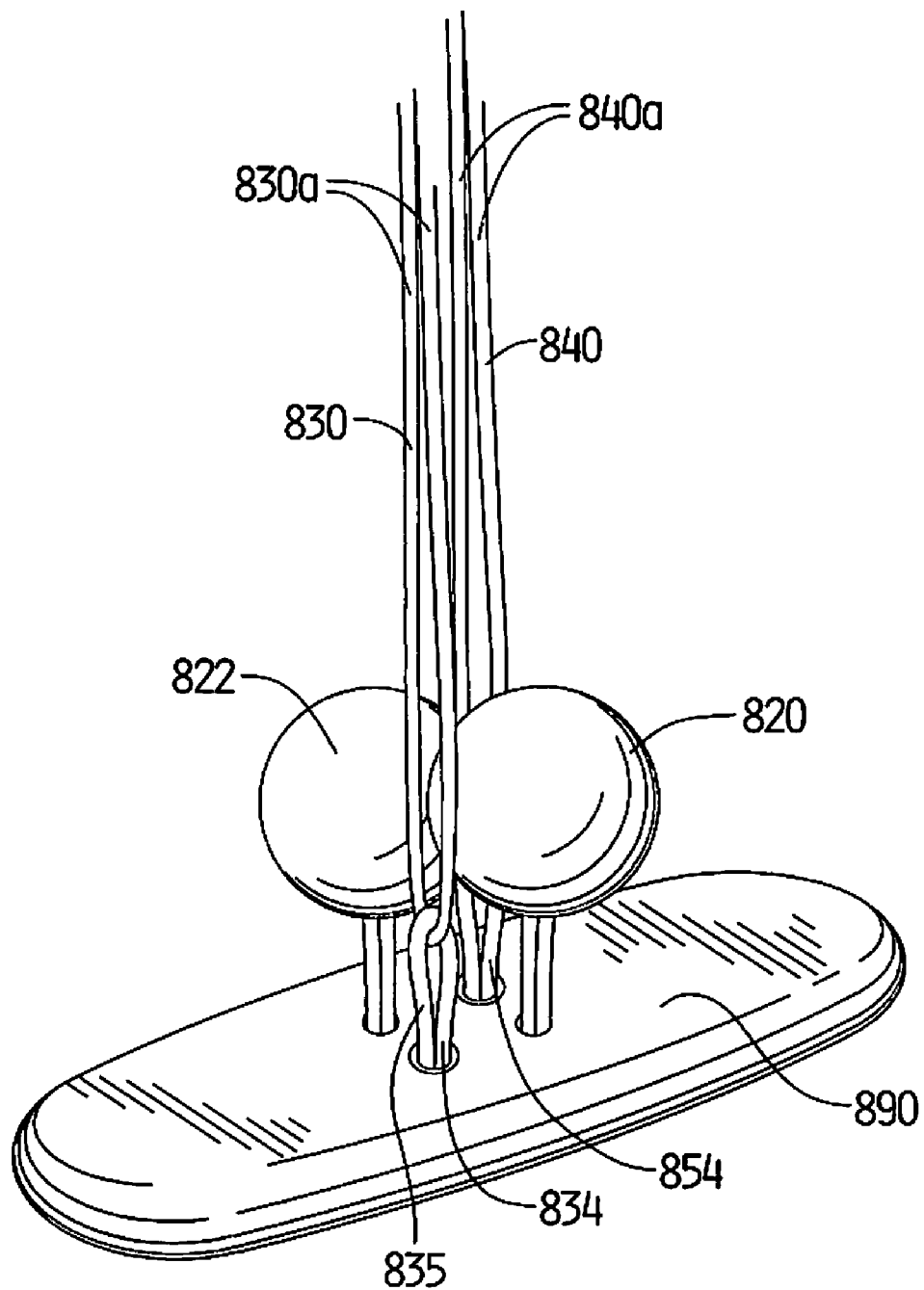


FIG. 35

VASCULAR HOLE CLOSURE DEVICE

[0001] This application claims priority from provisional application No. 61/241,555, filed Sep. 11, 2009 and is a continuation in part of application Ser. No. 12/358,411, filed Jan. 23, 2009 which claims priority from provisional application Ser. No. 61/066,072, filed Feb. 15, 2008. The entire contents of each of these applications are incorporated herein by reference.

BACKGROUND

[0002] 1. Technical Field

[0003] This application relates to a vascular device and more particularly to a device for closing openings in vessel walls.

[0004] 2. Background of Related Art

[0005] During certain types of vascular surgery, catheters are inserted through an incision in the skin and underlying tissue to access the femoral artery in the patient's leg. The catheter is then inserted through the access opening made in the wall of the femoral artery and guided through the artery to the desired site to perform surgical procedures such as angioplasty or plaque removal. After the surgical procedure is completed and the catheter is removed from the patient, the access hole must be closed. This is quite difficult not only because of the high blood flow from the artery, but also because there are many layers of tissue that must be penetrated to reach the femoral artery.

[0006] Several approaches to date have been used to close femoral access holes. In one approach, manual compression by hand over the puncture site is augmented by a sandbag or weight until the blood coagulates. With this approach, it can take up to six hours for the vessel hole to close and for the patient to be able to ambulate. This inefficiency increases the surgical procedure time as well as the overall cost of the procedure since the hospital staff must physically maintain pressure and the patient's discharge is delayed because of the inability to ambulate.

[0007] In another approach to close the vessel puncture site, a clamp is attached to the operating table and the patient's leg. The clamp applies pressure to the vessel opening. The patient, however, must still be monitored to ensure the blood is coagulating, requiring additional time of the hospital staff and increasing the cost of the procedure.

[0008] To avoid the foregoing disadvantages of manual pressure approaches, suturing devices have been developed. One such suturing device, sold by Abbott, advances needles adjacent the vessel wall opening and pulls suture material outwardly through the wall adjacent the opening. The surgeon then ties a knot in the suture, closing the opening. One difficulty with the procedure involves the number of steps required by the surgeon to deploy the needles, capture the suture, withdraw the suture, and tie the knot and secure the suture. Moreover, the surgeon cannot easily visualize the suture because of the depth of the femoral artery (relative to the skin) and essentially ties the suture knot blindly or blindly slips a pre-tied knot into position. Additionally, the ability to tie the knot varies among surgeons; therefore success and accuracy of the hole closure can be dependent on the skill of the surgeon. Yet another disadvantage of this suturing instrument is that the vessel opening is widened for insertion of the instrument, thus creating a bigger opening to close in the case

of failure to deliver the closure system. It is also difficult to pass the needle through calcified vessels.

[0009] U.S. Pat. No. 4,744,364 discloses another approach for sealing a vessel puncture in the form of a device having an expandable closure member with a filament for pulling it against the vessel wall. The closure member is held in place by a strip of tape placed on the skin to hold the filament in place. However, the closure device is still subject to movement which can cause leakage through the puncture. Additionally, if the suture becomes loose, the closure member is not retained and can flow downstream in the vessel. Moreover, since the suture extends through the skin, a potential pathway for infection is created. The closure device in U.S. Pat. No. 5,545,178 includes a resorbable collagen foam plug located within the puncture tract. However, since coagulation typically takes up to twenty minutes and blood can leak in between the plug and tissue tract, manual pressure must be applied to the puncture for a period of time, until the collagen plug expands within the tract.

[0010] It would therefore be advantageous to provide a device which would more quickly and effectively close openings (punctures) in vessel walls. Such device would advantageously avoid the aforementioned time and expense of applying manual pressure to the opening, simplify the steps required to close the opening, avoid widening of the opening, and more effectively retain the closure device in the vessel.

[0011] Commonly assigned U.S. Pat. No. 7,662,161 discloses effective vascular hole closure devices which have the foregoing advantages. It would be further advantageous to provide a vascular hole closure device which is adjustable to accommodate different tissue thicknesses and applies a more constant clamping/retaining force between the intravascular and extravascular components of the device irrespective of tissue thickness.

SUMMARY

[0012] The present invention overcomes the disadvantages and deficiencies of the prior art. The present invention provides a device for closing an aperture in a vessel wall, the aperture having an external opening in an external region of the vessel wall and an internal opening in an internal region of the vessel wall. The device comprises a covering member positionable inside the vessel against the internal opening of the aperture and having a dimension to prevent egress of fluid through the aperture and having a first opening. A first retainer is positionable external of the vessel. A flexible connecting member operatively connects the covering member and the first retainer and advances the retainer toward the covering member. The first opening of the covering member is configured to restrict movement of the connecting member.

[0013] Preferably the connecting member comprises a first suture and the first retainer is attached to the first suture whereby pulling of the first suture moves the first retainer toward the covering member.

[0014] The device may further comprise a second retainer movable toward the covering member by pulling a second suture attached to the second retainer. The covering member can have a second opening configured to restrict movement of the second suture. In preferred embodiments, the first and second retainers are spherical.

[0015] In preferred embodiments, the first and second retainers and the first and second sutures are composed of a resorbable material.

[0016] In a preferred embodiment, the retainers are positioned in a substantially side by side relationship in a placement position and are positioned in a stacked relationship in a delivery position.

[0017] In one embodiment, the opening has a dimension to frictionally engage the connecting member. In another embodiment, the opening includes a plurality of teeth to retain the connecting member.

[0018] The covering member is preferably pivotable between a longitudinal orientation for delivery and a transverse position for placement.

[0019] The device may include a third opening for unrestricted movement of the first suture and fourth opening for unrestricted movement of the second suture.

[0020] In another aspect, the present disclosure provides a method of closing an aperture in a vessel wall, the aperture having an external opening in an external region of the vessel wall and an internal opening in an internal region of the vessel wall. The method comprises the steps of:

[0021] inserting a covering member inside the vessel against the internal opening of the aperture, the covering member having a dimension to prevent egress of fluid through the aperture and having a connecting member extending therefrom;

[0022] inserting a first retainer external of the vessel; and

[0023] applying a sufficient force to overcome resistance to movement of the connecting member to advance the first retainer toward the covering member.

[0024] In one embodiment, the step of advancing the first retainer comprises the step of moving a suture attached to the first retainer through an opening in the covering member having a diameter substantially the same as the outer diameter of the suture. The method preferably includes the steps of inserting a second retainer external of the vessel and advancing the second retainer toward the covering member by pulling a second suture connected to the second retainer.

[0025] In one embodiment, the step of advancing the first retainer comprises the step of moving a first suture attached to the first retainer through an opening having a plurality of teeth engagable with the outer surface of the suture. In another embodiment, the step of advancing the first retainer comprises the step of moving a first suture attached to the first retainer between bumps on the covering member.

BRIEF DESCRIPTION OF THE DRAWINGS

[0026] Preferred embodiment(s) of the present disclosure are described herein with reference to the drawings wherein:

[0027] FIG. 1 is a perspective view of a first embodiment of the closure device of the present invention;

[0028] FIG. 2 is a side perspective view of the covering (blocking) member of the closure device of FIG. 1 shown within a delivery sheath;

[0029] FIG. 3 is a side perspective view illustrating the covering member of FIG. 2 deployed from the delivery sheath;

[0030] FIG. 4 is a side view illustrating one of the spherical retainers of the closure device deployed from the sheath (the vessel wall shown in cross-section);

[0031] FIG. 5 illustrates both spherical retainers deployed from the sheath;

[0032] FIG. 6 illustrates the sutures pulled to move the spherical retainers toward the covering member for positioning in a side by side relationship against the outer surface of the vessel wall;

[0033] FIG. 7 is a perspective view illustrating the retainers in the placement position;

[0034] FIG. 8 is a perspective view of the covering member and sutures of an alternate embodiment of the closure device of the present invention showing the sutures attached to the covering member via a looped suture;

[0035] FIG. 9 is a perspective view illustrating an alternate orientation of the retainers in the placement position;

[0036] FIG. 10 is a perspective view of another alternate embodiment of the closure device of the present invention;

[0037] FIGS. 11-13C illustrate schematically the steps of insertion of the closure device of FIG. 10 (the delivery sheath not shown for clarity) wherein:

[0038] FIG. 11 illustrates the covering member distal of the retainer tube and the retainers inside the retainer tube;

[0039] FIG. 12 illustrates the retainers advanced from the retainer tube;

[0040] FIG. 13A illustrates the first retainer being advanced towards the covering member;

[0041] FIG. 13B illustrates the first retainer further advanced toward the covering member;

[0042] FIG. 13C illustrates the second retainer advanced toward the covering member;

[0043] FIG. 14 is a perspective of yet another alternate embodiment of the closure device of the present invention;

[0044] FIG. 15 is a cross-sectional view taken along lines 15-15 of FIG. 14;

[0045] FIG. 16 is a bottom view of the covering member of FIG. 14;

[0046] FIG. 17 is a top view of a portion of the covering member of FIG. 14 with the suture removed for clarity;

[0047] FIG. 18 is a cross-sectional view taken along lines 18-18 of FIG. 17;

[0048] FIG. 19 is a perspective view of yet another alternate embodiment of the closure device of the present invention;

[0049] FIG. 20 is an exploded view of the spherical retainers and sutures of FIG. 19;

[0050] FIG. 21 is a cross-sectional view taken along lines 21-21 of FIG. 19;

[0051] FIG. 22 is a cross-sectional view of a region of a covering member of an alternate embodiment of the present invention;

[0052] FIG. 23 is a close up view of the area of detail designated in FIG. 22;

[0053] FIG. 24 is a perspective view of another alternate embodiment of the closure device shown with the covering member plug separated from the covering member;

[0054] FIG. 25 is a perspective view of the assembled closure member of FIG. 24;

[0055] FIG. 26 is a top view of a region of the covering member of an alternative embodiment;

[0056] FIG. 27 is a bottom view of a region of the covering member of another alternative embodiment;

[0057] FIG. 28 is a perspective view of an alternate embodiment of the closure device of the present invention;

[0058] FIG. 29 is a side view of the closure device of FIG. 28;

[0059] FIG. 30 is a bottom view of the closure device of FIG. 28;

[0060] FIG. 31 is a cross-sectional view of the covering member of the closure device of FIG. 28;

[0061] FIG. 32 is a cross-sectional view illustrating attachment of the retainer and suture;

[0062] FIG. 33 is a cross-sectional view illustrating an alternate attachment of the retainer and suture;

[0063] FIG. 34 is a cross-sectional view illustrating another alternate attachment of the retainer and suture; and

[0064] FIG. 35 is a perspective view of another alternate embodiment of the closure device of the present invention utilizing the retainer/suture attachment of FIG. 34.

DETAILED DESCRIPTION OF PREFERRED EMBODIMENTS

[0065] Referring now in detail to the drawings where like reference numerals identify similar or like components throughout the several views, FIG. 1 is a perspective view of a first embodiment of the vascular hole (aperture) closure device of the present invention. The device is intended to close an aperture in the vessel wall, typically formed after removal of a catheter previously inserted through the vessel wall into the vessel lumen for performing angioplasty or other interventional procedures. The aperture extends through the patient's skin and underlying tissue, through the external wall of the vessel, through the wall of the vessel, and through the internal wall of the vessel to communicate with the internal lumen of the vessel. The closure device of the present invention has an intravascular component to block blood flow and an extravascular component to retain the intravascular component.

[0066] More specifically, the closure device includes a covering member or patch positioned within the vessel against the internal wall of the vessel to block blood flow and two retainers positioned external of the vessel wall to retain the covering member in its blocking position. Each retainer is preferably spherical in configuration and is fixedly attached to a suture such that pulling of the suture advances the attached retainer toward the covering member to ultimately position the retainers in a side by side relationship either against or adjacent the external surface of the vessel wall.

[0067] Turning to FIGS. 1-7, a first embodiment of the closure device of the present invention is illustrated. Hole (aperture) closure device 10 has a covering (blocking) member or patch 40 and first and second retainers 20, 22. First and second retainers 20, 22 are preferably in the form of a sphere or ball. The covering member 40 is dimensioned and configured for positioning inside the vessel on the internal side of the vessel aperture against the internal wall of the vessel; the retainers 20, 22 are configured to be positioned outside the vessel wall adjacent or contiguous the external side of the vessel aperture.

[0068] Covering member 40, preferably elongated in configuration as shown, is retained in a delivery sheath in a longitudinal position for delivery to the vessel, and then pivots to a transverse position within the vessel lumen (substantially perpendicular to an axis extending through the aperture) for orientation to cover (patch) the vessel aperture on the internal side. This movement is illustrated in FIGS. 37A-37D of U.S. Pat. No. 7,662,161, the entire contents of which are incorporated herein by reference (hereinafter the '161 patent). A comparison of FIGS. 2 and 5 also shows pivoting of the covering member.

[0069] The spherical retainers are preferably held in the delivery tube in a stacked relationship (see e.g. FIG. 11), with retainer 22 (222) atop retainer 20 (220) (or vice versa).

[0070] The elongated covering member 40 functions to cover (patch) the internal opening in the vessel wall to prevent the egress of blood. With reference to FIGS. 1 and 4, the

covering member 40 is preferably somewhat oval shaped with elongated substantially parallel side walls 42a, 42b and end walls 44a, 44b connecting the side walls 42a, 42b. Other shapes of the covering member are also contemplated. The end walls 44a, 44b can have substantially straight wall portions, or curved wall portions. Covering member preferably has a thicker region 43 in the central region than the first and second end regions 45, 47. Other dimensions are also contemplated.

[0071] The longitudinal axis of covering member 40 defines a lengthwise dimension and transverse axes define a shorter widthwise dimensions. The widthwise dimension of the covering member 40 is preferably, for a 6Fr device, in the range of about 2.5 mm to about 3.5 mm, and more preferably about 3.3 mm. Other dimensions are also contemplated. The width preferably is at least substantially equal to the dimension of the internal opening in the vessel wall to effectively cover the opening. In a preferred embodiment, the covering member 40 has a length in the range of about 7.5 mm to about 9 mm (in a 6 French system), and preferably about 8 mm.

[0072] It should be appreciated that alternatively the covering member could be provided with an enlarged width region as illustrated in the embodiment of FIG. 1 of the '161 patent. The covering member could also be configured asymmetrically so that the enlarged region is off-centered to accommodate widening of the aperture as the member is pulled at an angle. The covering member could also be configured in a paddle shaped with a narrowed region adjacent a wider region as in FIGS. 9B-9E of the '161 patent. Other covering member configurations including those disclosed in the '161 patent could be utilized with the retainers of this present application.

[0073] The elongated covering member can be composed of materials such as polycarbonate or polyurethane. Preferably it is composed of resorbable materials such as lactide/glycolide copolymers that after a period of time resorb in the body. If composed of resorbable material, the covering member could optionally have regions of varying resorbability. Varying degrees of resorbability can be achieved for example by utilizing different materials having differing resorbable characteristics or by varying the mass of the covering member (increased mass increases resorbation time).

[0074] Spherical retainers 20 and 22 are preferably composed of resorbable material. In a preferred embodiment, the diameter of each retainer 20, 22 is about 0.090 inches to about 0.095 inches, although other dimensions are contemplated. Although shown as spheres, other rounded shapes are also contemplated. The retainers could alternatively be made of non-absorbable polymeric or metallic material.

[0075] When the retainers 20 and 22 are released from the delivery instrument, they are spaced further from the covering member 40. They are then configured to be advanced toward the covering member 40. More specifically, each retainer 20, 22 is fixedly secured to a respective flexible connecting member such as suture 30, 32. Sutures 30, 32 are preferably made of polymeric material and are preferably resorbable, composed of a material such as polydioxanone. It is also contemplated that alternatively a metallic material could be utilized. The sutures, retainers and covering member can be made of the same or different resorbable material, and/or have the same or different resorption times.

[0076] As shown, suture 30 has a free end 30a and an opposite end 30b secured to retainer 20 by molding, gluing, forming a knot, or other methods. Similarly, suture 32 has a

free end **32a** and an opposite end **32b** secured to retainer **22** in any of the foregoing manners. The suture is shown in the embodiment of FIG. 1 looped through the covering member. Other methods of attachment are also contemplated. For example, in the alternative embodiment of FIG. 8, sutures **150, 152** are attached to covering member **140** by a loop of suture **160**. Loop **160** extends upwardly (proximally) from the covering member **140** and the sutures **150, 152** are looped through suture loop **160**. Suture **160** can be attached to the covering member **140** by various methods such as insert molding or by tying a knot in the suture under the covering member. In another alternate embodiment shown in FIG. 24, sutures **180, 182** are insert molded to a plug **190**. The covering member **192** has a recess **194** to receive the plug **190**. During manufacture, the plug **190** is wedged within the recess **194**, creating a tight frictional fit. The plug **190** is preferably flush with the distal surface **195** of covering member **192**. Spherical retainers are designated by reference numerals **187, 188**, are preferably identical to retainers **20, 22**, and illustrated in the advanced position closer to proximal surface **197** of covering member **192**.

[0077] To advance the retainers **20, 22** toward the vessel wall (and covering member), the free end of each suture is pulled proximally (in a direction of the arrow of FIG. 4, thereby moving the respective retainer in the opposite direction closer to the aperture A and vessel wall W. Once tightened against the tissue, a sufficient retention force is maintained, i.e. a proximal pulling force on the covering member **40** to pull it slightly proximally against the vessel wall. The retainers **20, 22** therefore help to prevent the covering member **40** from separating from the vessel wall (e.g. moving in the direction toward the opposing vessel wall) which could create an unwanted gap between the covering member **40** and the vessel opening to allow blood flow. The extent to which the retainers **20, 22** move toward the wall (and thus their distance from the vessel wall in their final placement position) will depend on the tissue thickness. Thus, the closure device can adjust for different tissue thicknesses and apply a constant retention force regardless of tissue thickness. The retainers of the other embodiments disclosed herein function in a similar manner.

[0078] The delivery instrument for inserting the closure device extends through an opening in the skin, through the tissue tract to the vessel, through an external opening in the vessel wall, through the aperture in the vessel wall, and through an internal opening on the internal side of the vessel wall into the vessel lumen.

[0079] The covering member **40** in FIG. 2 is outside retainer tube **50** and, within delivery sheath **60** in a tilted (pivoted) position. The covering member **40** emerges from the sheath **60** and moves from a tilted position, more aligned or in preferred embodiments substantially aligned with the longitudinal axis of the sheath, to a transverse position within the vessel (see FIG. 3). (Note the vessel wall is shown in FIG. 3 but the rest of the vessel and tissue are removed for clarity.) The retainers **20, 22** remain within tube **50**. Note the covering member **40** can be ejected by a pusher (not shown) contacting the side or top wall. The retainers/covering members of the other embodiments disclosed herein can be delivered in a similar manner as that of retainers **20, 22** and covering member **40**.

[0080] As shown in FIG. 4 covering member **40** is pulled proximally to abut the internal opening on the internal side of the vessel W to cover (patch) the opening and the sutures

extend through the opening A in the vessel wall. The first retainer **20** is shown ejected from the delivery sheath **60** in FIG. 4 either by advancing the retainer, retracting the sheath after a counterforce is applied by engagement of the covering member with the vessel wall, or relative movement of both. The second retainer **22** is still within tube **50**. The second retainer **22** is then deployed in a similar manner as retainer **20** and is shown outside sheath **60** in FIG. 5. Note that in the delivery position, the retainers **20** and **22** are preferably in a stacked relationship (such as in FIG. 11) to minimize the transverse dimension of the delivery system.

[0081] Then, to retain the covering member **40** in position against the vessel wall to block blood flow therethrough, sutures **30** and **32** are pulled proximally from their free ends **30a, 32a** in the direction of arrows B of FIG. 6, thereby advancing the retainers **20, 22** distally in the direction of arrows C toward the vessel wall V and covering member **40**. As shown, the retainers **20, 22** can be moved to a position contiguous to the vessel wall, or depending on tissue thickness, may be adjacent the wall with some tissue interposed between the retainers and vessel wall. The retainers **20, 22** in this position apply a proximal force on the elongated covering member **40** to limit movement of the covering member into the vessel. The retainers in this placement position are preferably in a substantially side by side relationship as shown in FIG. 7.

[0082] As shown in FIG. 7, in the side by side relationship, the retainers **20** and **22** are alongside in a transverse orientation with respect to covering member **40**. That is, they are positioned along the width of the covering member **40**. However it is also contemplated that the retainers in the placement position can be in a lengthwise orientation (substantially parallel to the longitudinal axis of the covering member) as shown in FIG. 9 where corresponding components to FIG. 7 (e.g. retainers **20', 22'**, sutures **30', 32'**, covering member **40'**) have prime designations. The retainers could also be in other side by side arrangements at angles to the longitudinal axis. Alternatively, the retainers can be partially stacked in the placement position.

[0083] FIG. 10 illustrates an alternate embodiment of the closure device, designated by reference numeral **200**. Closure device is substantially identical to closure device of FIG. 1 except for the knot at the end of the suture to retain the suture. More specifically, suture **232** has a free end **232a** and a knotted end **232b** with a knot **236** to retain spherical retainer **222**. Similarly, suture **240** has a free end **240a** and a knotted end **240b** with a knot **246** to retain spherical retainer **220**. The sutures are held in frictional engagement with a bore extending through the respective retainer **220, 222**. Covering member **290** is substantially identical to covering member **40** of FIG. 1 with the sutures attached thereto by a loop (not shown) as in FIG. 1. As the suture free ends **240a, 232a** are pulled, the respective spherical retainers **220, 222** are advanced toward the covering member **240**, as the knots **246, 236** abut the proximal end of the respective spherical retainers **220** and **222**. Thus, the knots aid in the attachment of retainers **220, 222**.

[0084] FIGS. 11-13C illustrate schematically a delivery system which can be utilized for placement of the closure devices described herein and shows schematically the device of FIG. 10 by way of example.

[0085] The delivery device includes a retainer tube **350** which is positioned within a delivery sheath (not shown). Retainer tube **350** has a distal opening **352** communicating

with lumen 354 providing for passage of the retainers 220, 222 of closure device 200. Also positioned within the delivery tube 350 is a pusher tube 360 which is preferably solid except for two small lumens (not shown) dimensioned to receive a respective suture 240, 232.

[0086] In use, the retainer tube 350 with the retainers of the closure device contained within is placed in a delivery sheath (not shown). When positioned within the delivery sheath, the retainers 220, 222 are contained within the lumen 352 and the covering member 290 is positioned outside the retainer tube 350, and held in a longitudinal position by the walls of the delivery sheath. The covering member 290 is advanced from the delivery sheath into the vessel lumen by advancing the pusher tube 360 against the second retainer 222 in the direction of the arrow of FIG. 11. Since in the delivery position the second retainer 222 abuts the first retainer 220 which abuts the covering member 290, advancement of the pusher tube 360 advances the covering member 290 from the delivery sheath.

[0087] Subsequently, the pusher tube 360 is moved further distally to advance the retainers 220, 222 from the retainer tube 350 as shown in FIG. 12. Next, the first retainer 220 is advanced toward the covering member as shown in FIGS. 13A, 13B by pulling the suture 240 from its proximal end in the direction of the arrow. After placement of the first retainer 220, the second suture 232 is pulled proximally in the direction of the arrow of FIG. 13C to advance the second retainer 222 toward the covering member 290. The sutures can then be severed leaving the retainers 220, 222 and covering member 290 in place. It should be appreciated that these schematic views of FIGS. 11-13C omit the surrounding tissue and vessel portions for clarity. The covering member 290 is positioned inside the vessel lumen and the spherical retainers 220, 222 are positioned outside the vessel lumen.

[0088] FIGS. 14-18 illustrate an alternate embodiment of the closure device having a configuration to restrict movement of the connecting member, e.g. the suture, which connects the retainer to the covering member.

[0089] More specifically, the closure device 400 of FIG. 14 is similar to the device 200 of FIG. 10 except the covering member 490 has a first pair of holes 494a, 494b and a second pair of holes 496a, 496b. The first pair of holes 494a, 494b receive suture 440 and the second pair of holes 496a, 496b receive suture 430. Holes 494a, 496a have a smaller diameter than holes 494b, 496b. The larger hole 494b is dimensioned to receive suture 440 for free unrestricted movement of the suture 440 therethrough and therefore easier application of spherical retainer 420. Similarly, the larger hole 496b is dimensioned to receive suture 430 for free unrestricted movement of the suture 430 therethrough and therefore for easier application (movement) of spherical retainer 422. Smaller hole 496a is dimensioned to frictionally engage suture 430 so that tension is applied to the suture 430. It is dimensioned so that the suture 430 can be pulled through the hole 496a if sufficient force is applied by pulling on free end 430a, but if such predetermined force is not applied, the suture will remain frictionally engaged within the wall of the opening 496a and not move. In this manner, when the user ceases pulling on free end 430a, the suture 430 and thus the spherical retaining ball 422 will remain in position. Suture 440 operates in a similar manner, with smaller opening 494a dimensioned to frictionally engage and resist movement of the suture 440 to retain spherical retainer 420. FIGS. 15-18 show how the suture is looped through the respective opening.

[0090] In an alternate embodiment, a plurality of internal teeth can be provided to enhance the retention of the suture within the smaller diameter hole. This is shown for example in FIGS. 22 and 23 wherein hole 496a' has a plurality of teeth 497 formed on the interior wall of the smaller opening. Engagement of the suture 430' by the teeth 497 retains the suture 430 and spherical retainer. Note that the teeth 497 can be formed to angle inwardly so the suture 430 can be moved in only one direction, i.e. proximally so the retainer is advanced toward the covering member. Similar teeth can be provided in the other small hole for retaining the other suture and retainer.

[0091] In the embodiment of FIG. 26, the opening 522 in covering member 520 has a triangular wedge shape region 523. The region 523 has a reduced size opening, narrowing to a diameter less than an outer diameter of the suture 530 extending therethrough. The clinician can move the suture 530 into the narrow (reduced diameter) region 523 when desired to apply a gripping force on the suture 530 to retain the suture in place. Opening 524 is dimensioned larger than the outer diameter of the suture 530 to allow free unrestricted movement therethrough. Only one of the pair of openings is shown in the portion of the covering member 520 illustrated in FIG. 26, it being understood that a second similar pair of openings for the second suture can be provided. In all other respects the closure device can be identical to closure device 200 of FIG. 10 or other devices disclosed herein.

[0092] In the embodiment of FIG. 27, the retention of the suture is enhanced by inwardly directed bumps 560a, 560b, 560c and 560d on the underside of the covering member 570. That is, the suture (not shown) extending through large and small openings 570, 572, respectively, is gripped by the bumps 560a, 560b as the distance between opposing bumps is slightly less than the diameter of the suture. Sufficient tension (e.g. pulling force by the clinician), overrides the frictional force of the bumps 560 on the suture. Similarly a suture (not shown) extending through large and small openings 574, 576 is frictionally restrained by bumps 560c, 560d. The sutures connect retainers to the covering member 550 and are configured to be pulled to advance the retainers to the covering member in the manner described above with respect to the other embodiments. The bumps 560 can be utilized as a supplement to the small opening frictional engagement as is the embodiment of FIG. 14 or alternatively as the sole retention feature with two pairs of larger openings in the covering member.

[0093] FIGS. 19-21 illustrate an alternate embodiment of the closure device, designated generally by reference numeral 600, having a suture 610 extending transversely and joining spherical retainers 620 and 622. A knot 610a, 610b is formed on each end of the suture 610 to retain the retainers 620, 622. Connecting suture 630 has a looped proximal end 632 through which suture 610 extends. This loop 632 is tightened to secure suture 610. Both ends 631, 632 of the looped suture 630 extend through first opening 641 in covering member 640. End 632 terminates in knot 633 to connect suture 630 to covering member 640 (due to its diameter larger than opening 641). The other end 637 loops through covering member 640, exiting through opening 642 in suture portion 635. Openings 642, 641 can be large and small openings functioning similar to the large and small openings of the embodiment of FIG. 14. That is, the openings can be configured to provide for free movement and tighter frictional engagement as in the embodiment of FIG. 14.

[0094] Pulling of suture end **630a** advances the retainers **620**, **622** together toward the covering member **640** due to the engagement of suture **630** with the transverse suture **610**.

[0095] FIGS. **28-31** illustrate an alternate embodiment of the closure device, designated generally by reference numeral **700**. Device **700** is similar to device **400** except for the way the suture and retainer are attached and the suture openings in the covering member. More specifically, closure device **700** has a first suture **730** and a second suture **740**. Retainer **722**, preferably spherical in configuration, is connected to suture **730** and retainer **720**, preferably spherical, is connected to suture **740**.

[0096] Covering member **790** has a first pair of holes **794a**, **794b** and a second pair of holes **796a**, **796b**. The first pair of holes **794a**, **794b** receive suture **740** and the second pair of holes **796a**, **796b** receive suture **730**. Holes **794a**, **796a** have a smaller diameter than holes **794b**, **796b**. The larger hole **794b** is dimensioned to receive suture **740** for free unrestricted movement of the suture **740** therethrough and therefore easier application of spherical retainer **720**. Similarly, the larger hole **796b** is dimensioned to receive suture **730** for free unrestricted movement of the suture **730** therethrough and therefore for easier application (movement) of spherical retainer **722**.

[0097] Smaller hole **796a** is dimensioned to frictionally engage suture **730** so that tension is applied to the suture **730**. It is dimensioned so that the suture **730** can be pulled through the hole **796a** if sufficient force is applied by pulling on free end **730a**, but if such predetermined force is not applied, the suture will remain frictionally engaged within the wall of the opening **796a** and not move. As shown in the cross-sectional view of FIG. **31**, the hole **796a** has an inwardly angled wall **797** transitioning into a reduced diameter region **798** and an outwardly angled wall **799** transitioning back to a larger diameter. The angled walls **797**, **799** facilitate movement of the suture **730** when tension is applied, with the reduced diameter region **798** frictionally securing the suture. Hole **794a** has a similar configuration as hole **796a** and thus contains similar angled walls. In this manner, when the user ceases pulling on free end **730a**, the suture **730** and thus the spherical retaining ball **722** will remain in position. Suture **740** operates in a similar manner, with smaller opening **794a** dimensioned to frictionally engage and resist movement of the suture **740** to retain spherical retainer **720**.

[0098] FIG. **32** illustrates one method of attachment of the suture to a spherical retainer. Spherical retainer **720** has a through hole **721** extending therethrough. Hole **721** has a first portion **721a** having a first diameter and a second portion **721b** having a second larger diameter. A crimp or a bead **743** is attached to the suture **740**, creating a diameter larger than the diameter of portion **721a**. Thus, the wall of the through hole **721** forms a shoulder **723** to block movement of the spherical retainer **720**. Preferably, the end **741** of the suture is substantially flush with the spherical retainer **720**. The crimp or bead is of substantial transverse dimension to frictionally engage the second portion **721b**. Consequently, this frictional engagement prevents the retainer **720** from sliding in the direction away from the covering member **790** while the shoulder **723** prevents the retainer **720** from sliding in the direction toward the covering member **790**. The retainer **722** and suture **730** preferably have the same structure and engagement/retention as retainer **722** and suture **740**.

[0099] In the alternate embodiment of FIG. **33**, the suture **740'** has a knot **747** formed at its end. The shoulder **723'**

provides a stop for movement of retainer **720'** away from covering member **790'**, as the diameter of portion **721a'** of opening **721** is less than the transverse dimension of the knot **747**. The knot **747** is of sufficient transverse dimension to frictionally engage the second portion **721b'** to prevent the retainer **720'** from sliding in the direction away from the covering member **790**.

[0100] In the embodiment of FIGS. **34** and **35**, a suture **834** forming a loop **835** has a knot **837** at one end. This suture knot **837** frictionally engages portion **821b** of the hole **821** formed in the retainer **820**. A reduced diameter hole portion **821a** forms a shoulder **823** to block movement of the knot **837**. As shown, the looped end **835** of suture **834** receives suture **830**. Consequently, tension applied to the ends **830a** of suture **830** pull the loop **835** upwardly (as viewed in the orientation of the FIG. **35**) away from the covering member **890** to advance spherical retainer member **822** toward the covering member **890**. A second suture **854** identical to suture **834** has a loop to receive suture **840** in the same manner as suture **830**. Suture **854** and **840** are identical to sutures **834** and **830**, respectively, except that they function to secure and move spherical retainer member **820**. Consequently, when the ends **840a** of suture **840** are pulled proximally, the suture **854**, attached within an opening in the retainer **820** in the identical manner as suture **834**, pulls the retainer **820** toward the covering member **890**.

[0101] While the above description contains many specifics, those specifics should not be construed as limitations on the scope of the disclosure, but merely as exemplifications of preferred embodiments thereof. Those skilled in the art will envision many other possible variations that are within the scope and spirit of the disclosure as defined by the claims appended hereto.

What is claimed is:

1. A device for closing an aperture in a vessel wall, the aperture having an external opening in an external region of the vessel wall and an internal opening in an internal region of the vessel wall, the device comprising:

a covering member positionable inside the vessel against the internal opening of the aperture, the covering member having a dimension to prevent egress of fluid through the aperture, the covering member having a first opening;

a first retainer positionable external of the vessel; and

a flexible connecting member operatively connecting the covering member and the first retainer, the connecting member advancing the first retainer toward the covering member, the first opening of the covering member configured to restrict movement of the connecting member.

2. The device of claim 1, wherein the connecting member comprises a first suture, and the first retainer is attached to the suture.

3. The device of claim 2, wherein pulling of the first suture moves the first retainer toward the covering member.

4. The device of claim 3, wherein the first retainer is spherical in configuration.

5. The device of claim 1, further comprising a second retainer movable toward the covering member.

6. The device of claim 5, further comprising a second flexible connecting member, the second retainer attached to the second suture and pulling of the second connecting member advances the second retainer toward the covering member, the covering member having a second opening configured to restrict movement of the connecting member.

7. The device of claim 6, wherein the second retainer is spherical in configuration.

8. The device of claim 1, wherein the covering member is composed of a polymeric material.

9. The device of claim 1, wherein the covering member and first retainer are composed of a resorbable material.

10. The device of claim 2, further comprising a second suture and second retainer attached to the second suture, the second suture advancing the second retainer toward the covering member.

11. The device of claim 10, wherein the first and second retainers are positioned in a substantially side by side relationship in a placement position and are positioned in a stacked relationship in a delivery position.

12. The device of claim 10, wherein the first and second retainers are in a transverse orientation with respect to the covering member in the placement position.

13. The device of claim 10, wherein the first and second retainers and the first and second sutures are composed of a resorbable material.

14. The device of claim 1, wherein the first opening of the covering member has a dimension to frictionally engage the connecting member.

15. The device of claim 1, wherein the covering member is pivotable between a more longitudinal orientation for delivery and a transverse position for placement.

16. The device of claim 10, further comprising a third opening in the covering member for unrestricted movement

of the first suture and a fourth opening in the covering member for unrestricted movement of the second suture.

17. A method of closing an aperture in a vessel wall, the aperture having an external opening in an external region of the vessel wall and an internal opening in an internal region of the vessel wall, the method comprising:

inserting a covering member inside the vessel against the internal opening of the aperture, the covering member having a dimension to prevent egress of fluid through the aperture and having a connecting member extending therefrom; and

inserting a first retainer external of the vessel; and applying a sufficient force to overcome resistance to movement of the connecting member to advance the first retainer toward the covering member.

18. The method of claim 18, wherein the step of advancing the first retainer comprises the step of moving a first suture attached to the first retainer through an opening having a diameter substantially the same as the outer diameter of the suture.

19. The method of claim 18, further comprising the steps of inserting a second retainer external of the vessel and advancing the second retainer toward the covering member by pulling a second suture connected to the second retainer.

20. The method of claim 17, wherein the step of advancing the first retainer comprises the step of moving a first suture attached to the first retainer between bumps on the covering member.

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