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Results of Endovascular Treatment for TASC type D Aorto-iliac Chronic Total Occlusion Lesions

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Background: We report the clinical and patency results of stent placement for TASC type D aorto-iliac CTO. Methods: This was the observational study. Total 55 patients (45 male and 10 female; 66.7 years of a mean age; 79 limbs) treated with stent placement were analyzed retrospectively. This study was composed of patients with TASC type D aorto-iliac CTO that had more than 10cm in the lesion length. Demographics, clinical presentation, classification, comorbidity, ankle-brachial index (ABI) before and after treatment, technical success, patency, restenosis, and complications between groups were recorded at follow-up. Results: Study group consisted of 55 patients with 79 treated limbs. Technical success rate was 96.2% (76/79 limbs). No periprocedural complications had occurred at study group. Three type approach methods were tried. Contralateral approach was used 78.4% (62/79 limbs), Both contralateral and ipsilateral approach was used 17.7%(14/79 limbs). When contraletal or both approach had failed, left brachial approach was adopted in 15 limbs. The technical success rate was 100% (15/15). Mean procedural time was 152 minutes. Mean amount of contrast media was 293.1mL. ABI increased from 0.51 before procedure to 0.91. An angiographic follow up was done on 6 months for 80.8% of all patients (42/52). The primary patency was 94.7% (72/76) of primary patency and 100% of secondary patency. Target lesion revascularization was 5.3%(4/76) Conclusion: Our results suggest that endovascular treatment for TASC type D aorto-iliac CTO lesions is a good and safe treatment modality and restenosis rates is low.

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