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Successful bailout case with covered stent for SFA aneurysm after stent implantation

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A 73 year-old male with previous EVT for both common iliac arteries in other hospital referred to our hospital due to gangrene on the bilateral little toes. Angiography showed chronic-total-long occlusion of both SFA. We performed EVT for left SFA firstly and, one month later, we performed EVT for right SFA. Right SFA was totally occluded from the ostium with short stump to popliteal artery, so we employed bi-directional approach from the right popliteal artery and contra-lateral femoral artery. Retrograde wire managed to advance to the proximal lesion with microcatheter and then we advanced antegrade wire to the direction of the retrograde wire. Because the both wires seemed to exist in the same sub-intimal lumen, we employed CART technique and achieved wire pull-through into the right popliteal sheath. Eventually we deployed 6mm sized self-expandable-stent and the final angiogram seemed to be acceptable. After 2 days, he complained sharp pain on his right thigh. The sonogram revealed that the treated proximal SFA was extremely expanded and accepted bloodstream far outside of the stent. Angiography also demonstrated aneurysm-like appearance around the proximal stent site. Therefore, we performed balloon angioplasty with the aim of thrombotic closure for the entry and the re-entry of the aneurysm for a long time, but it failed. On third session, we employed newly approved covered stent and it was extremely effective. Immediately after the operation, the pain disappeared and no more extra-stent staining was observed. A month later, sonography and angiography showed excellent result without extra-stent blood-flow.

評価1	評価2	評価3	採否
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