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Thromboembolectomy with Fogarty through lumen catheter and guide wire is effective for acute limb ischemia patients.

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Background: Thromboembolectomy using a Fogarty balloon catheter is blind procedure in general. Therefore the complete removal of thromboemboli and selecting the lesion is difficult. We report the effectiveness of using a Fogarty through lumen catheter (FTLC) that can be inserted a guide wire (GW). Methods and results: From November 2015 to January 2017, we treated seven patients with acute arterial occlusion using FTLCs and GWs. The occluded vessels consisted of common femoral arteries in 3, superficial femoral arteries in 3 and external iliac artery in 1 case. All patients had residual thrombus with FTLCs before using GWs and we needed further thromboembolectomy. Of the 15 untreatable vessels with Fogarty catheters only, 14 lumens were possible to patent by using GWs. Only one patient with the anterior tibial artery occlusion could not be passed with a GW, but the blood flow of all patients maintained and all patients improved clinical symptoms by the revascularization. We performed computed tomography in 4 patients within 2 months after intervention and all treated arteries were patent. Conclusion: The use of a GW with a Fogarty catheter is effective to select the target peripheral arteries for acute limb ischemia patients.

評価1	評価2	評価3	採否
発表日時 月 日 (第 日)	セッション	会場	時 分～ 時 分

受付番号

演題番号