Modena is a small city in the northern Italy.

Our first publication on deep vein surgery:

O. MALETI*, M. LUGLI, M. COLLURA
ANÉVRYSMES VEINEUX POPITÉES : EXPÉRIENCE PERSONNELLE
Endovascular chronic and acute obstruction treatment

Today: our fields of research

Dedicated venous stent
Percutaneous valve

Iliocaval angioplasty/stenting

What did we learn after an experience on over than 350 procedures of angioplasty/stenting in PTS patients?

1) the crucial area is the common femoral vein

2) Patient selection is the key

To provide an adequate diagnostic workup is essential
3) reflux can be an important cause of clinical failure

In PTS patients, despite good technical results after stenting, clinical conditions during years can deteriorate due to deep reflux.

4) follow up is essential to maintain good clinical results

5) Reimbursement is a crucial issue

Reimbursement

- UK: No dedicated reimbursement
- France: Reimbursement similar to arterial stent
- Germany: No dedicated reimbursement
- Italy: No dedicated reimbursement
- Spain: Only private or insurance
- IVUS: No reimbursement

Deep vein reconstruction in 107 patients affected by PTS.

Reflux correction after proximal stenting in PTS improves outcomes.

<table>
<thead>
<tr>
<th>Outcome after iliac stenting alone</th>
<th>Outcome after iliac stenting + open surgery</th>
</tr>
</thead>
<tbody>
<tr>
<td>11 (10.2%) C6</td>
<td>8 (14.3%) stop</td>
</tr>
<tr>
<td>10 (9.3%) C5</td>
<td>2 (1.8%) C3</td>
</tr>
<tr>
<td>42 (39.2%) C4a</td>
<td>34 (31.2%) C4</td>
</tr>
<tr>
<td>35 (32.7%) C4a</td>
<td>55 (51.2%) unchanged</td>
</tr>
<tr>
<td>9 (8.4%) C3</td>
<td>13 (12.5%)</td>
</tr>
<tr>
<td>7 (6.5%) C2</td>
<td></td>
</tr>
</tbody>
</table>

Cumulative rate of improvement (60 months FU)

After stenting alone: 48.8%
After stenting + open surgery: 80.4%

European Reimbursement: A Snapshot of Some Healthcare Systems

- UK: 10 Primary Care Trusts, 10 Foundation Trusts, 10 Strategic Health Authorities (England), NHS (England), Prospective payment system.
- France: Public & Private, centralized decision making, DRG-TEU, system prospective payment system, Device specific reimbursement.
- Spain: 17 autonomous regions, high decision making power at hospital level (global budget).
- Denmark: 6 Counties, high decision making at hospital level (global budget).
- Germany: 16 countries, DRG, private/specialized funds, high decision making power at hospital level, DRG prospective payment system.
- Italy: 21 local health authorities, high decision power at regional level, DRG prospective payment system.
CONCLUSION

Stenting for venous obstruction is not just a matter of technique and type of stent. To get and maintain satisfying clinical results the whole deep vein disease should be known and managed.

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Thank you