ALL AORTO-ILIAC OCCLUSIONS CAN BE TREATED ENDOVASCULARLY BY STENTS

IF CERTAIN PRECAUTIONS ARE TAKEN TO PREVENT RENAL AND VISCERAL EMBOLIZATION

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Recommendation 36. Treatment of aortoiliac lesions
Leriche Syndrome

surgery is the treatment of choice for type D lesions [C].

ESC Guidelines on the diagnosis and treatment of peripheral artery diseases

endovascular approach …in aorto-iliac TASC D lesions in pts with severe comorbidities if done by expertized team (grade II lev C)

NO DISCLOSURE FOR THIS TOPIC

DANISH VASCULAR REGISTRY

- MORTALITY 3,6%
- MAJOR COMPL 20%

Long term data of endovascularly treated patients with severe and complex aortoiliac occlusive disease

Eur Heart J 2013;32:2851-2906
- **Risk of Failure (low < 5%)**
- **Risk of Embolization/Thrombus Displacement**
- **Restenosis Rate (?)**

**Related to the Occlusion Level**

**Related to the Presence of Recent Thrombus**

**High with no Precaution**
- 2 Renals
- 1 Visceral

**Lesson Learned**
RECANALIZATION FROM ABOVE WITH SHEATH INSIDE THE LESION

RETROGRADE RECANALIZATION
Not recommend
Only when feasible intraluminally with a 0.014 wire

RECENT THROMBOSIS IS A RISKY SITUATION

RENAAL ARTERIES PROTECTION FILTERS: BOTH RENALS

RENAAL ARTERIES PROTECTION PROXIMAL ANGIOPLASTY

➢ Suboptimal to reduce thrombus squeezing

RENAAL ARTERIES PROTECTION HUGGING BARE STENTS
One shot proc 6F sheath < thrombus dislodg
HUGGING BARE STENTS

RENAL ARTERIES PROTECTION FILTERS: ONE RENAL (DISALLIGNED)

RESCUE

RESCUE

RESCUE

RESCUE
RENAL ARTERIES PROTECTION
BALLOON: SOLITARY KIDNEY → CHIMNEY
OPEN VIABAHN FIRST THE AORTIC STENTS

HUGGING BARE STENTS + CHIMNEY

Leriche Syndrome 18 PTS
FEB 2010 – OCT 2015

EMBOLIZATION 3 pts (16.6%)
RENAL 2
SPLEEN 1
LEG 1

Leriche Syndrome 18 PTS
FEB 2010 – OCT 2015

EMBOLIZATION
3/5 2010-2011
filter (single) 1
wire 1
0/13 2011-2015
filter (single 3) 5
balloon (single 4) 8

18 cases (high risk pts)
- Death
- Renal embolism
- Renal+Distal embolism 1
- Splenic infarction 1
- Retroper (high puncture)
- Perc (temporary dialysis)
- Stent occlusion (treated) 1*

18 high risk pts
follow-up 38.6 mths (1-68 mths)
- Death 2 (6/41 mths) 11.1%
- Prim patency 88.9%
- Sec patency 94.4%
- Ren art patency 100%
- AAA reperfusion (viabahn)
CONCLUSIONS

- RECANALIZATION IS FEASIBLE

- SOME PRECAUTIONS ARE NECESSARY
  - RECANALIZE WITH THE SHEAT INSIDE LESION
  - PROTECTIVE MEASURES FOR RENALS
  - SUBOPTIMAL ANGIOPLASTY
  - IF THROMBUS PASSES THE ARTERIES → CHIMNEY