Causes of Failure of Iliac Vein Stenting and What to Do About Them?

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Disclosures

- None pertaining to material presented in this talk

Personal Experience:
2005-2013

- C5 and C6 disease - 375 patients (483 limbs)
- Documented history of DVT - 59/375 (15.73%)
- 393 limbs evaluated for deep venous pathology
- 289/393 (73.5%) limbs identified as ilio-caval obstructive disease.
Iliac Vein Stents - Failure modes

- Poor Inflow 45%
- Poor Outflow 20%
- Neo-intimal Hyperplasia 15% Recoil
- Poor stent choice / no/minimal overlap / misalignment 10%
- Pro-thrombotic states 28%
- Non compliance with anticoagulation 9%

Case 1 – Poor Inflow

Before                Final result

Treatment Options

Extending Stents Below Inguinal Ligament

Endovenectomy with Iliac Vein Stent
Conclusions

- Iliac Vein stenting is an established treatment for iliac venous obstruction.
- Good outcomes can be expected
- Limiting factors should be identified pre and intra-operatively
- Post-operative regular follow-up is essential and should be overcome for long-term ulcer healing.