Difficult Femoral And Iliocaval Endovascular Reconstructions: Lessons Learned

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Faculty Disclosure
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Obstruction
MTS or PTS

Obstruction & Reflux
PTS more common

Stent Patency

Case 1

24 yo with recurrent VLU instrumentation as infant in ICU recurrent DVT

1. good inflow from calf
2. severe femoral-iliacoutflow obstruction
1. Cross from below
2. Cross from above
3. Snare “body floss”
4. Serial balloon dilate tract
5. Stent ilio-caval
6. Augment inflow from below

Case 2

40 yo WF
Recurrent DVR
CS PTS

Femoral Vein Stenting, 10mm Nitinol

Femoral vein angioplasty, POBA, high pressure

Stent Occlusion At 30 Days (On Rivaroxaban)
Conclusion:

Pitfalls:
1. Inflow, inflow, inflow
2. Stent Compression

Thank you!