Getting A Look At Inflow With Duplex Ultrasound Prior To Endovascular Reconstruction Of Post-Thrombotic Iliocaval Disease

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The Inflow Issue

In an estimated 20% of post-thrombotic limbs, the profunda femoris is also involved, in which case its collateral potential to carry femoral vein flow is likely diminished. If the lesion involves only the profunda femoris orifice per IVUS or venography, the iliac-femoral stent can be extended into the profunda femoris vein with good patency (unpublished data). If the profunda femoris involvement is more extensive, adequate inflow in the common femoral vein may not be available to sustain the stent as the femoral vein is also occluded. At present, there is no reliable preprocedural or intraprocedural way to reliably estimate inflow adequacy at the common femoral vein level.


Axial Transformation of the Profunda

Venogram
Patient prone
Popliteal access
CFV
PV
FV
Pop V

Case 1
Case 2
Proximal Femoral Vein PTS

Proximal Profunda PTS

Midthigh FV Occlusion

Popliteal Vein PTS

Hybrid –
Open Endovenectomy Femoral
Endovenous Iliac Stent

Conclusion:
Duplex Ultrasound at the confluence of the CFV gives a good sense of the inflow status prior to iliofemoral vein stenting

Thank you!