Challenging Deep Venous Recanalization: Go-to Tools and Approaches

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Tools and approaches to succeed in deep venous recanalization

**Tools**
- Support catheters
- Sharp and RF assistance
- Stent choices
- IVUS
- Filter retrieval tools

**Approaches**
- Accesses
- Need inflow
- “String sign”
- Give yourself a target
- Take what the case gives you...

Disclosures

- Speakers bureau/consulting, Cook Medical, Boston Scientific, AngioDynamics
- Consulting, Philips/Spectranetics, OptiMed
- Off-label discussion of venous stent placement and use of forceps/laser for filter retrieval
What about IVUS?

- Extent of caval occlusion can be difficult to identify on venography alone
  - “Normal” cava can be obscured by collaterals
- Can be particularly helpful when landing stents near the cavoatrial junction
Can we “jail” the renal veins/hepatic veins with a conventional stent?
Conclusion: Tips for success

- Define true lumen, use support catheters to limit recoil
  - String sign
  - Sharp/RF-assisted recanalization when necessary
- Use what the case gives you (i.e. up and over wire)
- IVUS can help define obscured anatomy/stent landing
- Avoid jailing venous inflow (hepatics/renals) with large diameter stents
- Connecting open vein to open vein critical for durability...optimize inflow!

Thank you
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