

Skipped lesion at Ilio-caval Confluence: Alternative Technique for Stenting in Chronic Venous Obstructions

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BACKGROUND

In patients with bilateral obstruction of iliac vein, stenting the ilio-caval confluence is necessary. Different stent configurations have been described for stenting at the ilio-caval confluence when facing bilateral lesions. In this study, we describe our experience in stenting the ilio-caval confluence with a “skipped technique” and report its stent-related outcome.

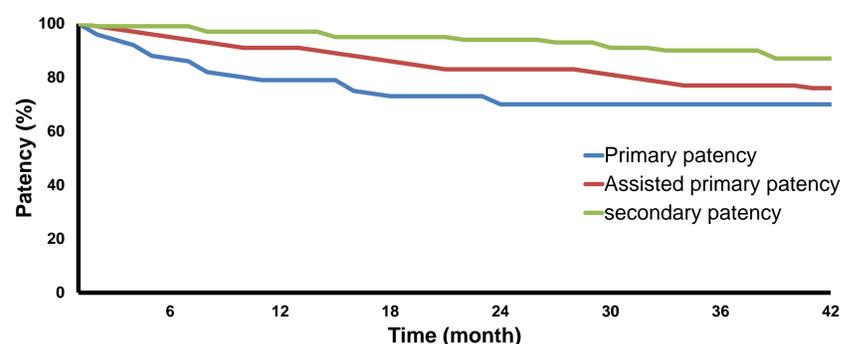
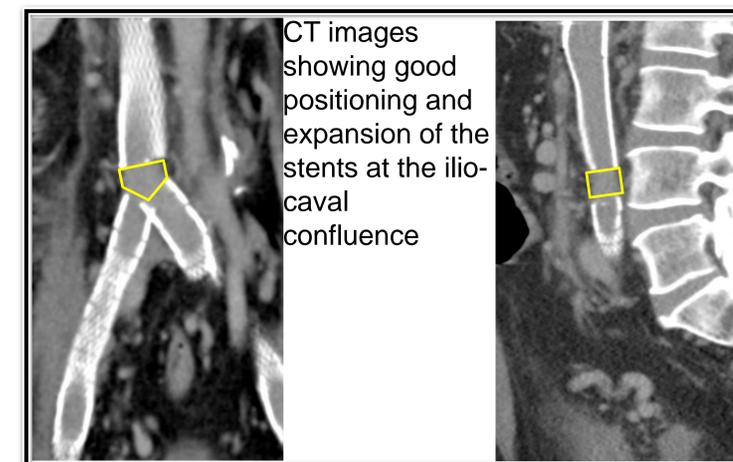
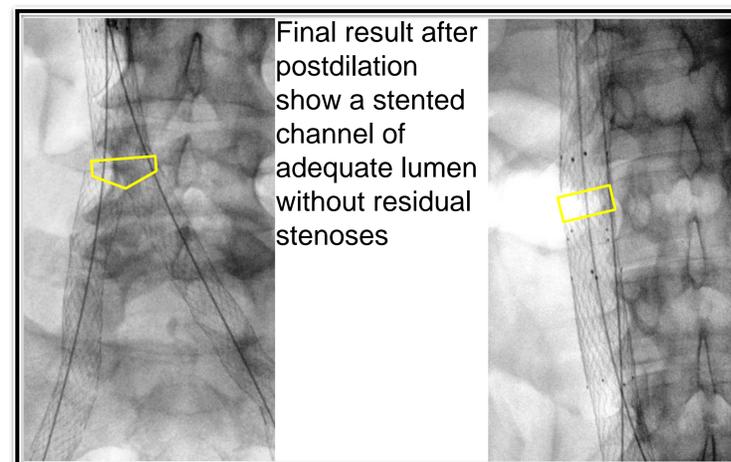
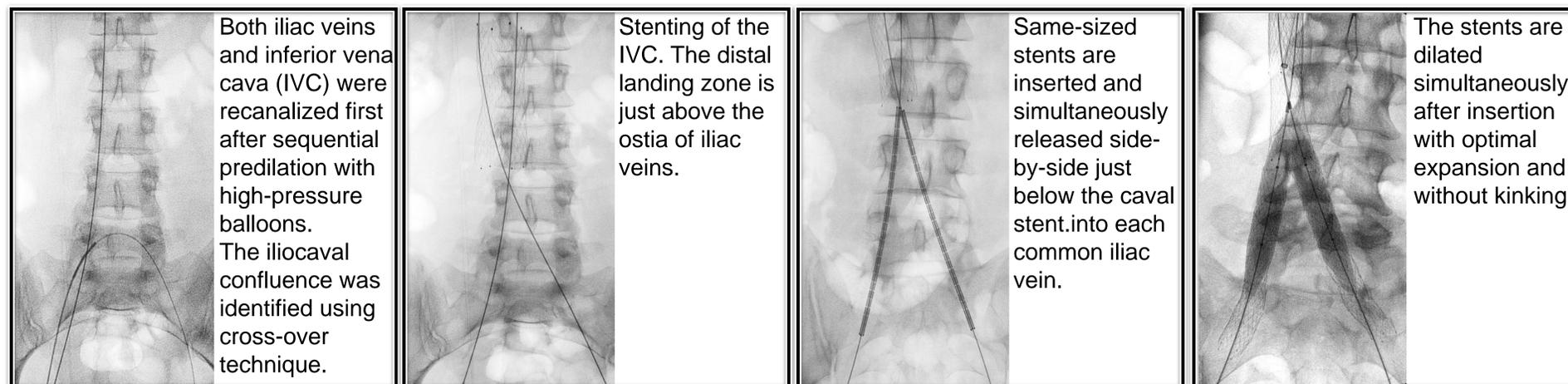
METHODS

Between November 2013 and May 2015, 62 patients with chronic occlusions of the bilateral iliac vein segments were treated at our department, which serves as a referral hospital for complicated venous endovascular procedures. This study was conducted with institutional review board approval. Informed consent was not required for this retrospective study. Only patients who underwent ilio-caval stent reconstruction were included in the study.

PATIENT CHARACTERISTICS

Age	(mean ± SD)	41.2 ± 12.7
Gender		
Male	(n, %)	21 (33.8)
Female	(n, %)	41 (66.2)
BMI	(mean ± SD)	26.4 ± 3.8
C-Class of CEAP		
C2	(n, %)	7 (11.3)
C3	(n, %)	33 (53.3)
C4	(n, %)	16 (25.8)
C5	(n, %)	4 (6.4)
C6	(n, %)	2 (3.2)

OPERATION TECHNIQUE AND RESULTS



CONCLUSIONS

Our findings suggest that leaving a skipped lesion at the level of ilio-caval confluence has no negative effect on stent patency. Patency rates of this study are comparable with other reported techniques of stenting the ilio-caval confluence.

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