A descriptive study about femoral pseudoaneurysms treated with covered stents (CS), between January/2015 and July/2017 at a tertiary center. True aneurysms, anastomotic pseudoaneurysms and those treated with other endovascular techniques were excluded.

**RESULTS**

- **14 patients**
  - Mean age: 71.1±13.9 years.
  - 64.3% were women
  - 28.5% were obese.

- **Urgent Treatment:** 10 patients (71.4%).
  - Hemodynamic instability
  - Retroperitoneal hematoma
  - Arteriovenous fistula (AVF)
  - Active bleeding
  - Other techniques fail (thrombin, coils)

- Complications:
  - Hemodynamic instability: 21.4%
  - Retroperitoneal hematoma: 14.2%
  - Arteriovenous fistula (AVF): 7.1%
  - Active bleeding: 7.1%
  - Other techniques fail: 42.8%

**DISCUSSION**

The gold standard for treatment of femoral pseudoaneurysms is open surgery, although percutaneous thrombin injection has been the first strategy in last years. When it is not possible, endovascular repair with covered stents is a useful alternative; especially in complicated femoral pseudoaneurysms (active bleeding, AFV associated, hemodynamic instability, DFA localization, hostile groin) or when other techniques have failed.