

My worst cases and how i solved them

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Disclosure

Speaker name: Yann Gouëffic

I have the following potential conflicts of interest to report:

Receipt of grants/research support

Details: Abbott; Bard; Medtronic; Terumo; WL Gore

Receipt of honoraria and travel support

Details: Abbott; Bard; Boston Sc; Cook; Medtronic; Perouse; Spectranetics; Terumo

Employment in industry

Details: /

Shareholder in a healthcare company

Details: /

Owner of a healthcare company

Details: /

I do not have any potential conflicts of interest to report

Jean de La Fontaine

French fabulist and poets of the 17th century (1621- 1695)

AN OXFORD CLASSIC FABLE

The Lion and the Rat

Brian Wildsmith



“ Be kind whene'er you can,” should be your creed,
There's none so small but you his aid may need.

This striking truth two fables now shall prove;
Matter enough is here your faith to move.

A blundering rat burst through the earth,
And fell into the lion's paws.

The animal of royal birth
Scorned with such blood to stain his claws :
He spared his life, the kindness was repaid ;
Who'd think the lion could e'er require his aid ?

However, 'twas the lion's lot,
Leaving the forest, in a net to fall,
Nor could his rage and roaring break the thrall.

The rat ran to his aid, and speedily
Gnawed through a mesh and set him free.

Patience and length of time will still
Much more than force and rage fulfil.

**Male, 69 years-old:
acute right limb ischemia without motor deficit**

- **Cardiovascular risk factors:** Hypertension, hypercholesterolemia
- **Peripheral arterial disease:**
 - *Right limb: femoropopliteal stenting for IC*
 - *Left limb: femoropopliteal bypass above the knee*
- **No arrhythmia, no valvular disease**
- **Patient stopped APT few days ago**
- **Duplex scan of right limb : femoropopliteal stent thrombosis**

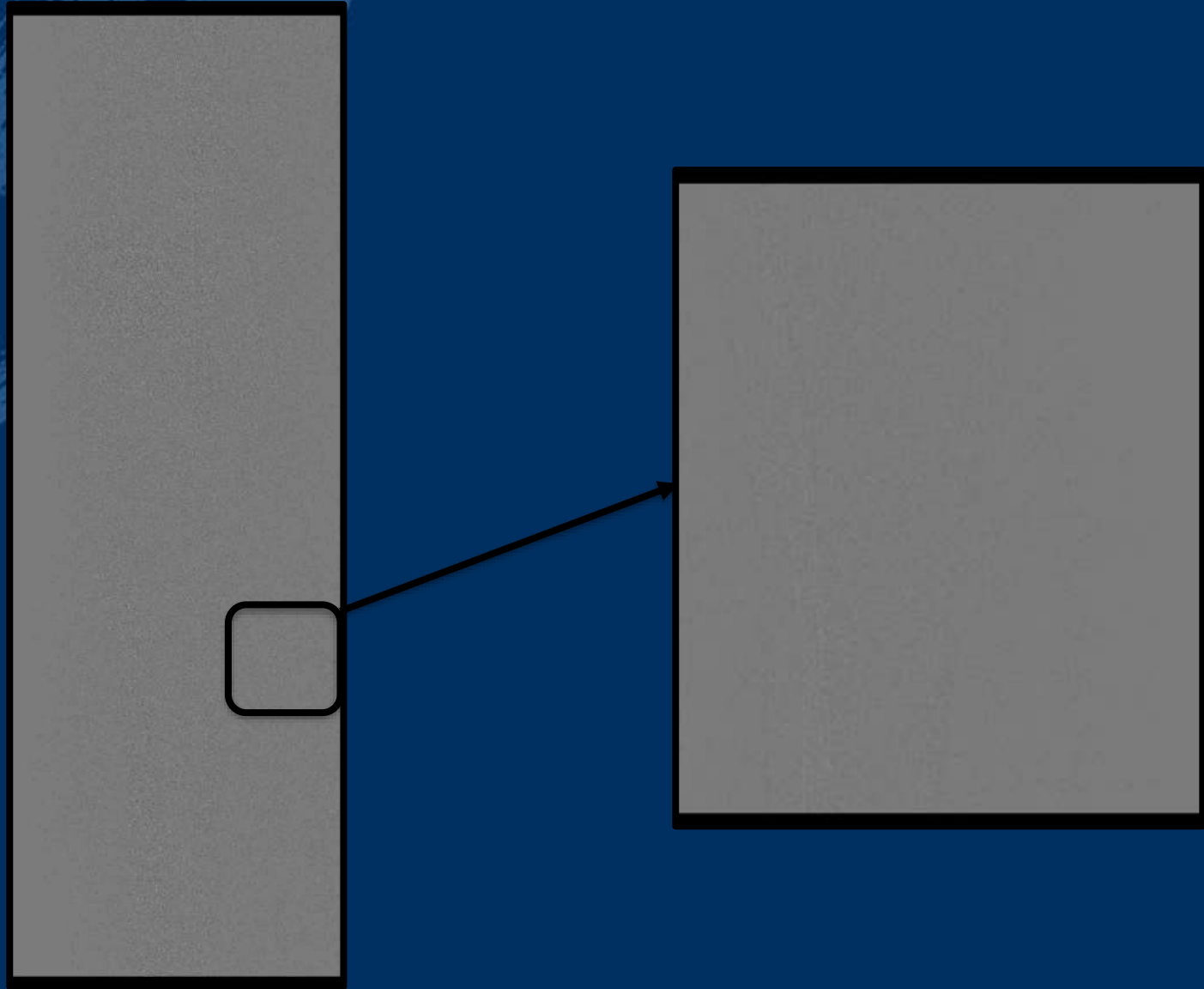
Thrombolysis (Urokinase)

Intraoperative angiogram

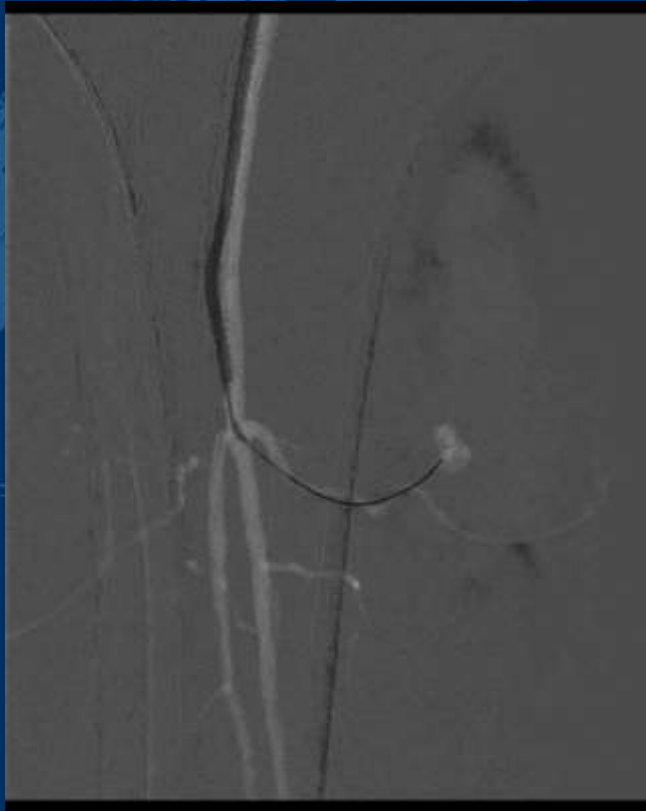
- Duplex scan guided left femoral puncture
 - 5 Fr and 10cm sheath
 - Cross over approach
- UF catheter and radifocus® stiff guidewire (0.035)
 - Thrombolysis catheter



**@ 24h: stiff guidewire traumatism and
bleeding from a branch of the tibio-fibular trunk**



Selective embolism



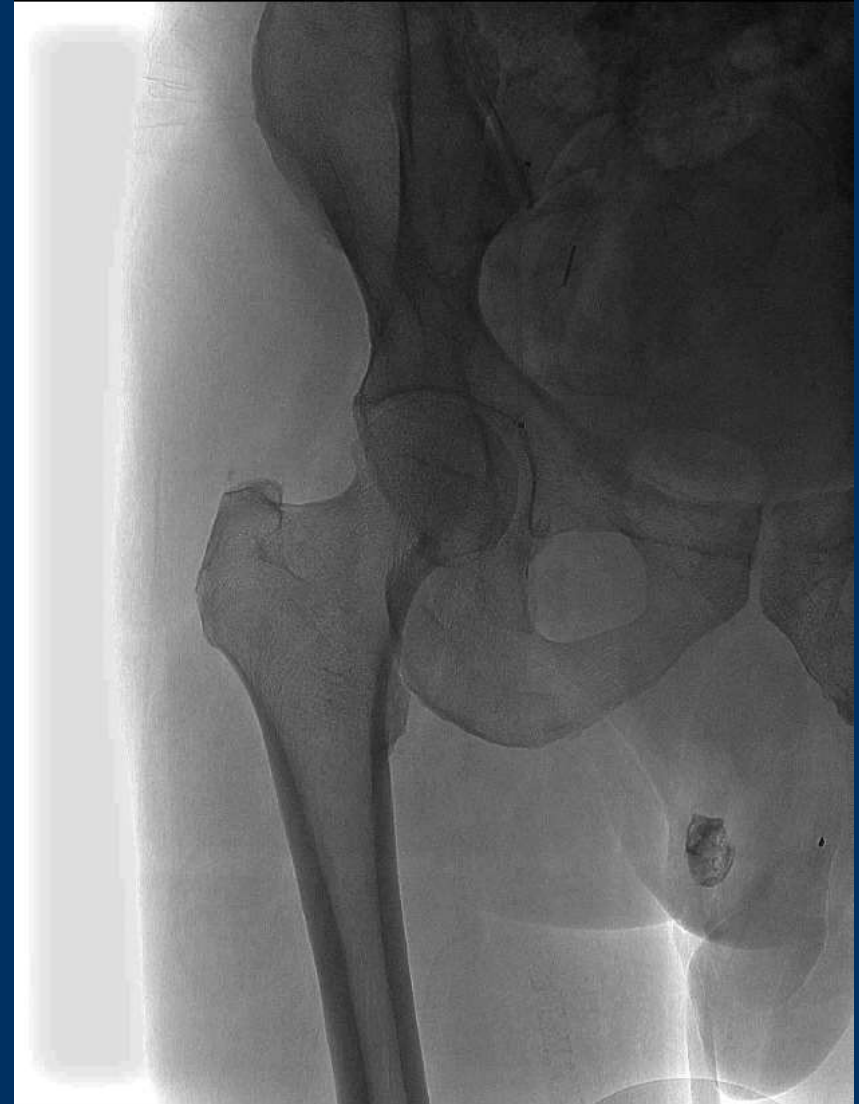
- Cross over approach
- Glidecath® 4fr Angle 120cm
- ProGreat® 2.7F-130cm



Microvention® coils (x2)

Final angiogram

- After 3 days of thrombolysis
- Arterial closure device (Femoseal[®])



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(1621-1695)

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Male, 79 years-old: CLI of the right lower limb

Patient medical history

- Dislipidemia, HTA, active smoking, diabetes
 - Peripheral arterial disease
 - Coronaropathy
- **Duplex scan:** long femoropopliteal artery thrombosis

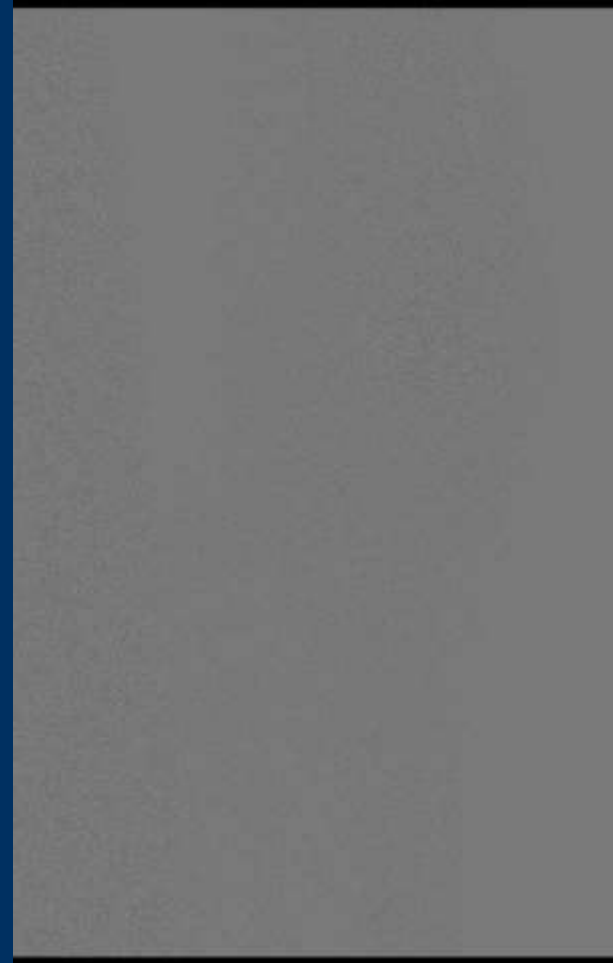
Intraoperative angiogram

- Local anesthesia et conscious sedation
- Duplex scan guided left femoral puncture
- 6 Fr and 45cm Destination® sheath
 - Cross over approach
 - UF catheter and glidewire advantage® stiff guidewire (0.035)

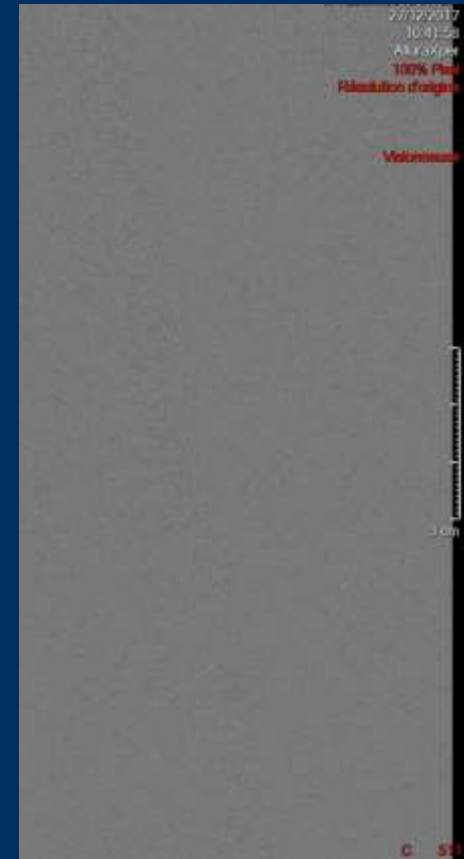
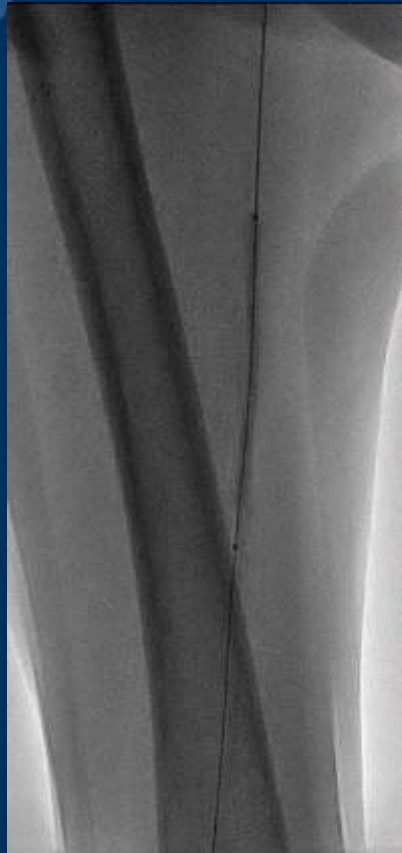
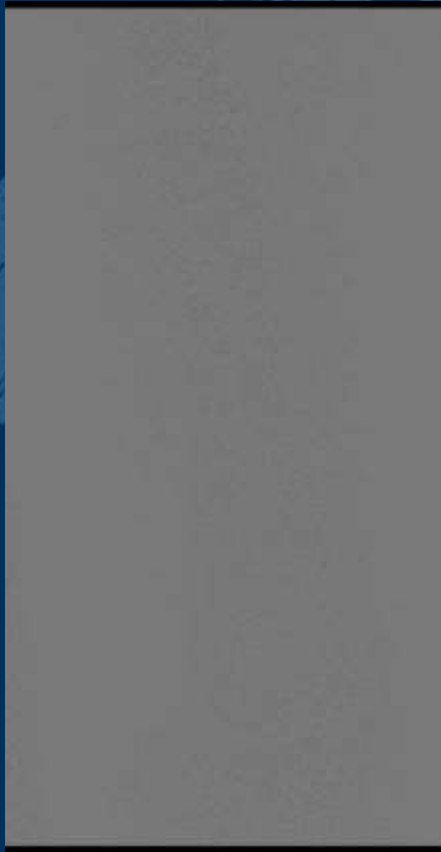


Femoropopliteal recanalization

- Loop
- Support catheter (balloon catheter)
 - P1-P2 re-entry

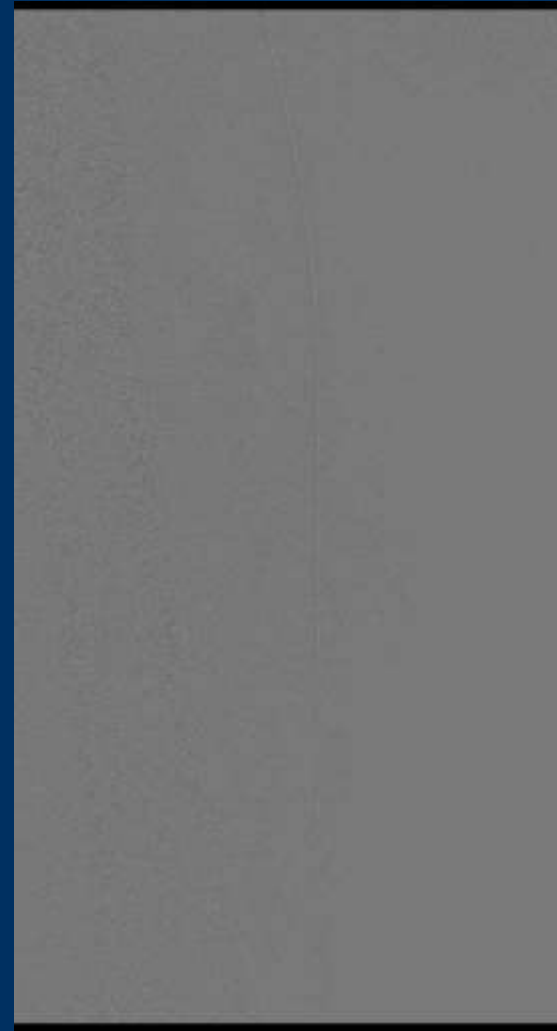
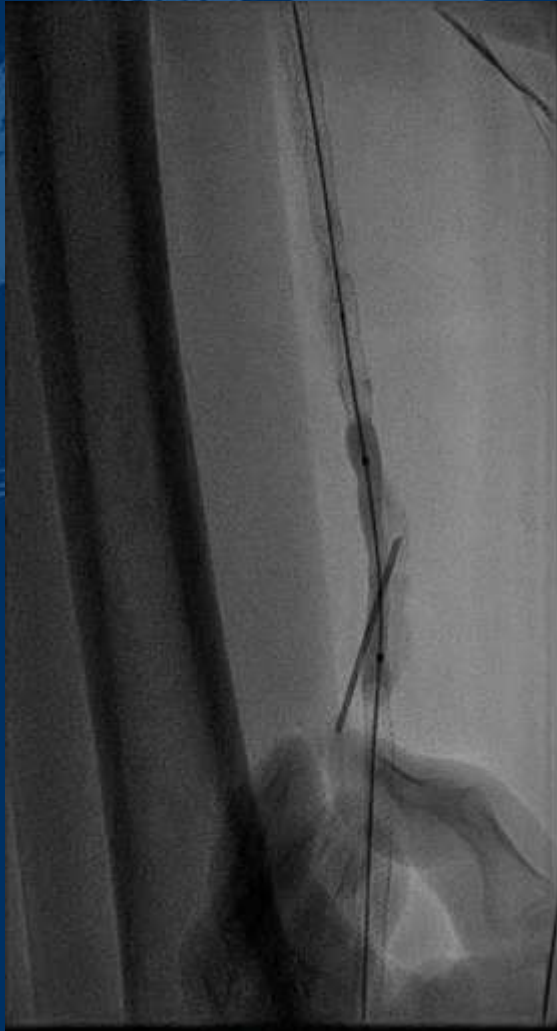


Vessel preparation



Metacross® OTW balloon catheter (0.035 – 135cm)
Diameter: 1-mm inferior to the luminal size / 2-mm inflation
Control angiogram (1 incidence)

Arterial crush with « force and rage »



Final angiogram

Arterial closure device
(Femoseal®)



Take home *lessons*

« There's none so small but you his aid may need. »

Embolism devices could be also required for lower limbs procedures

**« Patience and length of time will still
Much more than force and rage fulfil.»**

Vessel prep should be performed and controlled to improve devices efficacy

Read more La Fontaine fables !!