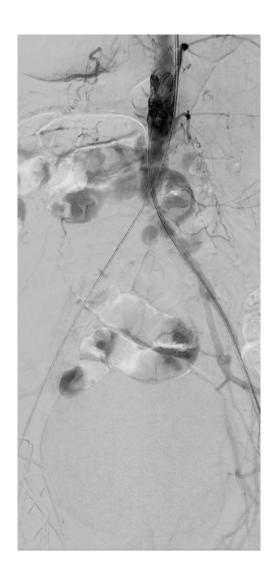


Hybrid revascularization of an acute iliac vessel occlusion: Keep the hypogastric patent



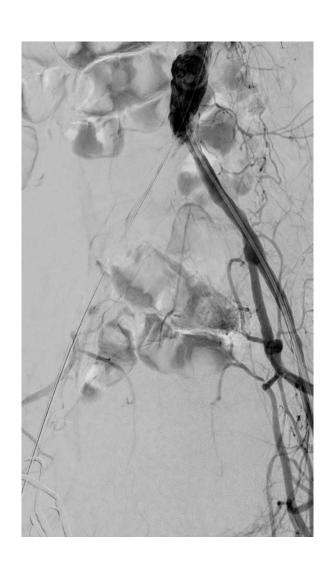
Konstantinos Stavroulakis MD
Consultant of Vascular Surgery
Vascular and Endovascular Surgery Center
University Hospital of Münster, Germany

Case Presentation



- 65 yr. male patient
- Bilateral acute limb ischemia
- Previous claudication of both limbs
- CT scan:
- Bilateral occlusion of the common iliac artery
- Occlusion of the hypogastric and the external iliac (r)
- Patent hypogastric and external iliac (I)

Hybrid Iliac Vessel Revascularization



Step 1:

Bilateral surgical exposure of the common femoral

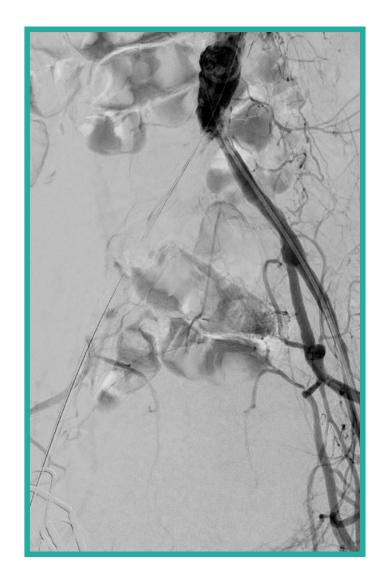
Step 2:

Crossing of the occlusion with a 0,035" Glidewire guidewire (Terumo)

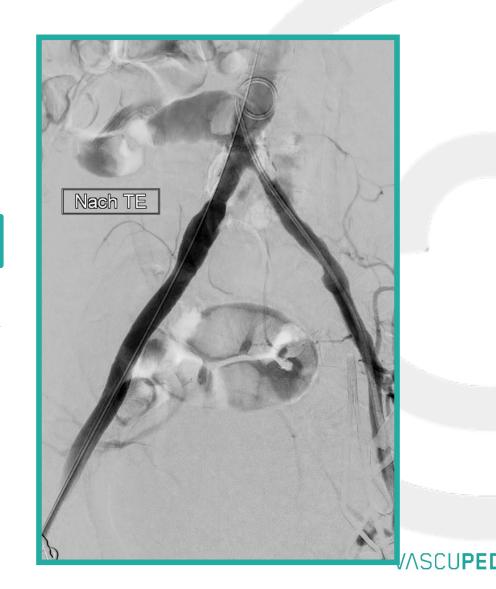
Step 3:

Transfemoral thrombectomy of the right iliac vessels with an overthe-wire Fogarty thru-Lumen embolectomy catheter (Edward Lifescience)

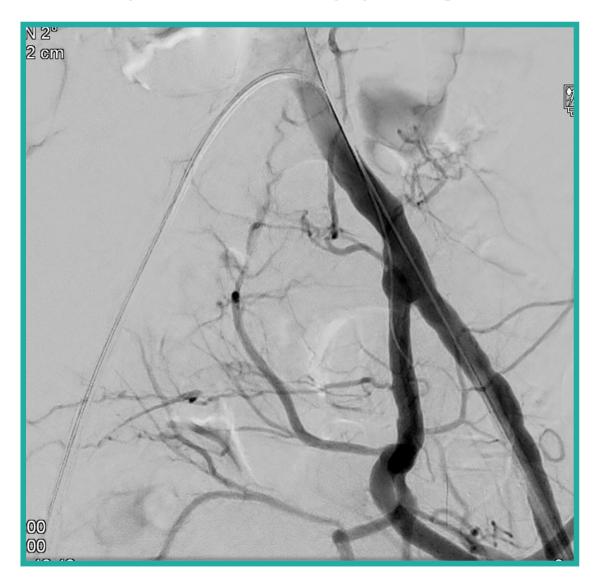
Hybrid Iliac Vessel Revascularization



Thrombectomy



Keep the hypogastric patent

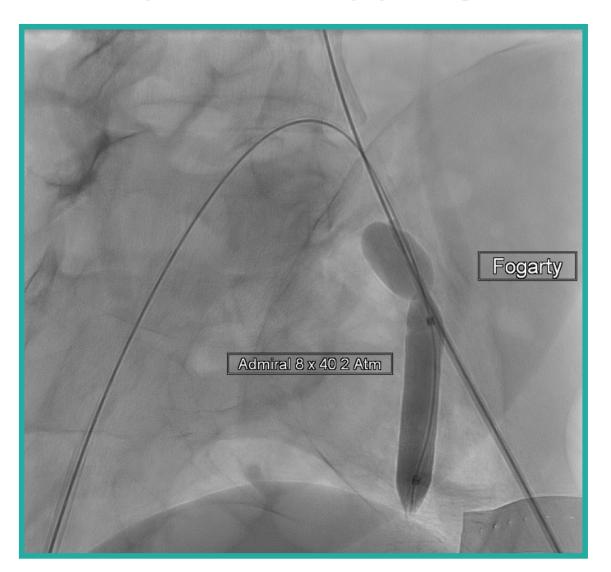


Step 4:

Up and Over positioning of a 0.035" guidewire in the left hypogastric with a 5 F diagnostic pigtail catheter (Cordis)



Keep the hypogastric patent



Step 5:

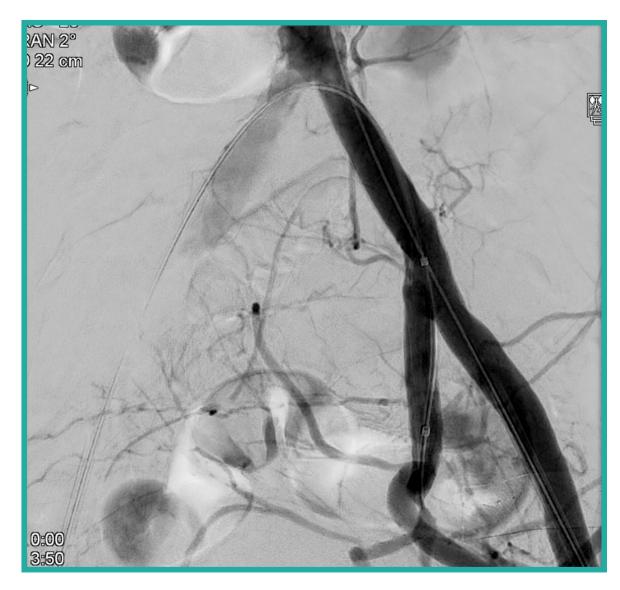
Low pressure inflation (2 Atm) of an Admiral PTA catheter (Medtronic) in the hypogastric

Step 6:

Guidewire guided transfemoral thrombectomy of the left iliac vessels



Angiogram after the thrombectomy

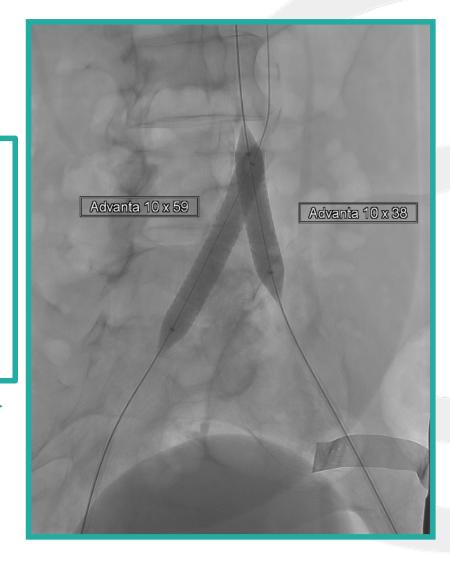




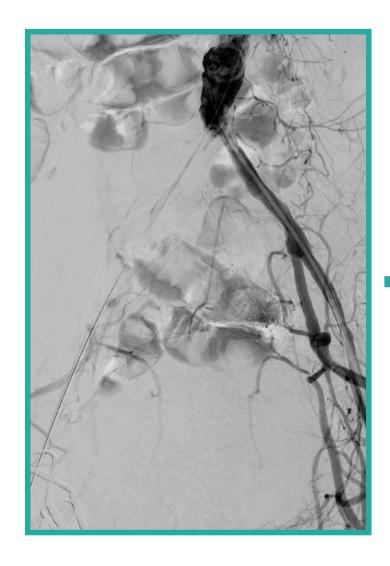
Hybrid Iliac Vessel Revascularization



Step 7:
Kissing Stent
with balloon
expandable
covered stents
(Maquet)



Final Result





Summary

- Acute bilateral hypogastric occlusion is associated with increased morbidity
- Although iliac thrombectomy is considered a straightforward procedure might lead to hypogastric occlusion
- Basic endovascular materials can be helpful in keeping the hypogastric patent