



Acute Limb Ischemia after Aortic Stent Graft for the treatment of PAU type of Para-renal AAA

Suko Adiarto

Department of Cardiology and Vascular Medicine, University of Indonesia/ Harapan Kita National Cardiovascular Center

Abdominal Aortic Aneurysm

- Required intervention when diameter is critical or the type of AAA is vulnerable (Penetrating Atherosclerotic Ulcer/PAU)
- Access (diameter and turtousity of illiofemoral artery) and relations with aortic branch is critical in deciding the type of intervention (surgical vs. stent graft)

Current Practice AAA Repair With Stent Grafts

82% of Endoluminal AAA Repair in US is still performed with General, 16% with Regional Anesthesia & surgical FA access and repair



Device	Total complications	Vascular complications
*AneuRx (n=190) **Zenith (n=200)	32 (16.8%) 40 (20%)	17 (8.9%) 22 (11%)
**Excluder (n=801)	153 (19.1%)	43 (5.3%)

*Zarins et al, J Vasc Surg 1999;29:292-308,**Greenberg et al. J Vasc Surg 2004; 39:1209-18

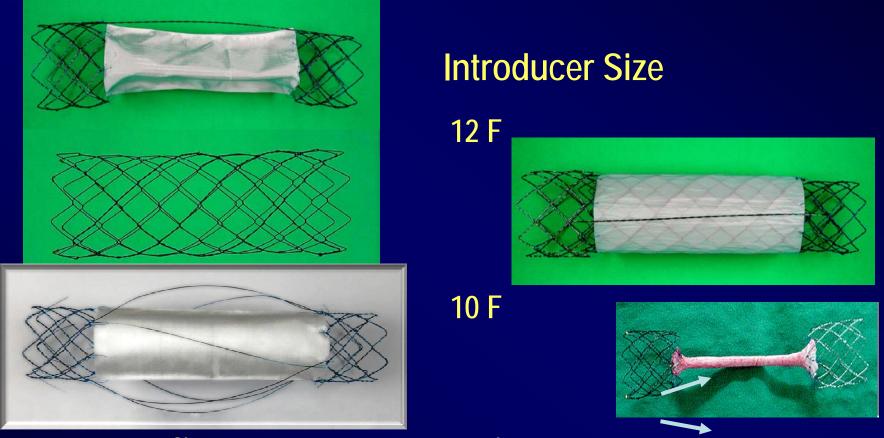
SYSTEM



- Easier to introduce
- Negotiable to vessel tortousity (iliacs)
- Less likely to arterial trauma
- No need surgical exposure (arteriotomi)
- No need general anesthesia



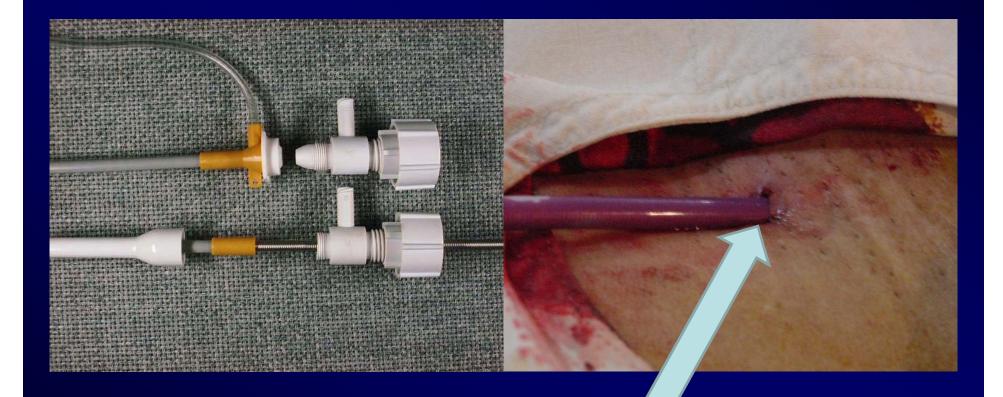
Percutaneous Separate Stent-Graft



Low profile - no need to surgical cut down

No migration - no need to lower the BloodPressure during deploymentRadiology 2001; 220:533-539

Introductory system for new design



12 F System without arteriotomy

Mr. TSK

- 67 years of age
- Hypertensive, Diabetic, Smoker
- Penetrating Atherosclerotic Ulcer AAA para-renal artery
- Refused surgery
- Customized aortic stent-graft

CT Angiography

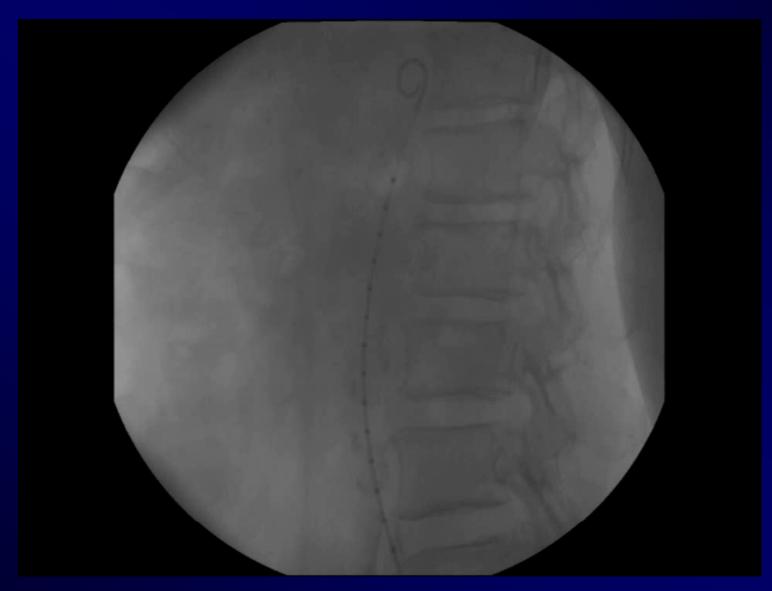


CT Scan - Customized Stent-graft





Customized Aortic Stent Graft



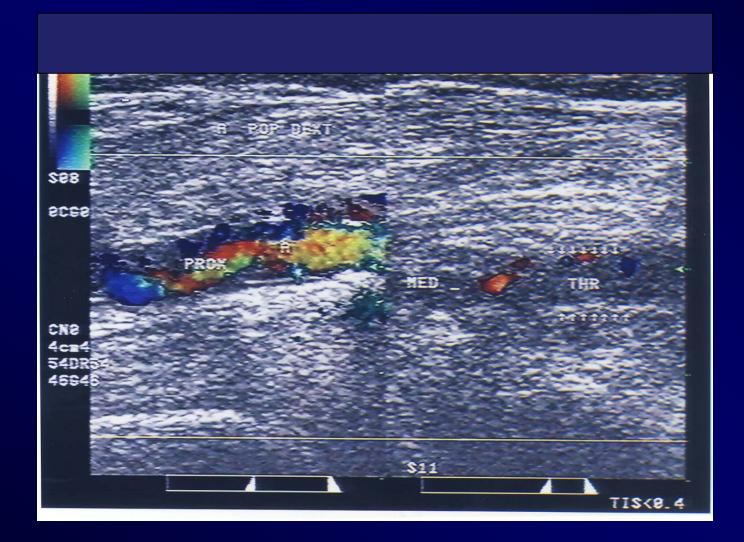
Post Procedural Management

- Manual compression
- Closure device not available

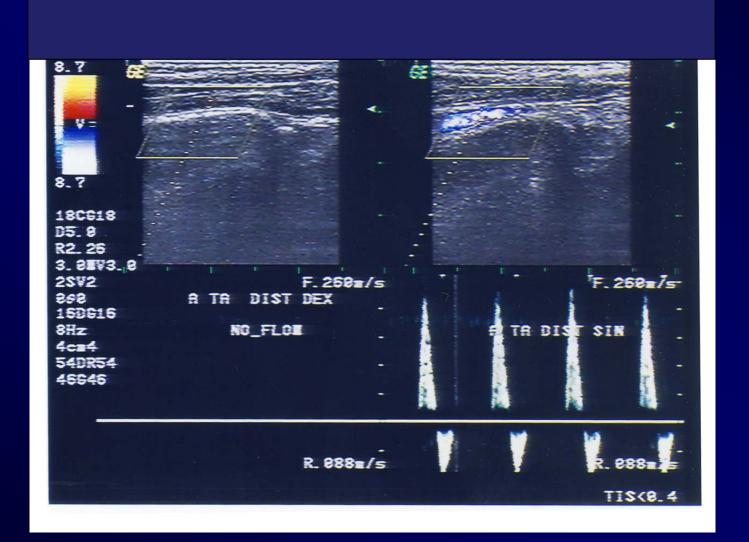
24 hours after procedure

- Leg pain
- Non-palpable anterior and posterior tibial artery
- Undetectable pulse on Duplex sonography
- Treatment:
 - Bolus heparin
 - Maintenance heparin
 - Clopidogrel 2 x 75 mg
 - analgetic

Dupplex Sonography



Dupplex Sonography



What should we do?

- Surgical Embolectomy?
- Intra-arterial Thrombolysis?
- Rheolytic Thrombectomy?

Arteriography



Angiojet-thrombosuction



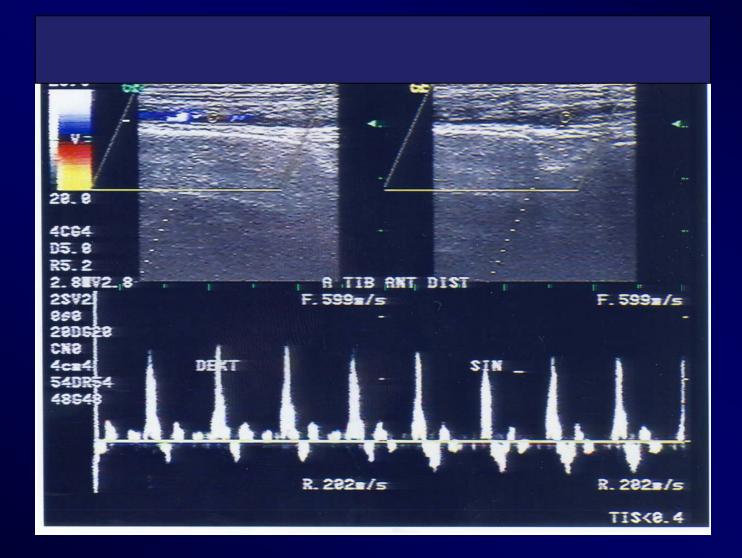
Angiojet-thrombosuction



Angiojet-thrombosuction



Dupplex Sonography



Take Home Message

- Although Stent graft with smaller delivery profile system is safer, it is not completely free of vascular complication
- SFA thrombus complication can be avoided by using proper closure device
- Angiojet is the device of choice in patients with large thrombus burden vessel