

Challenging in Peripheral Vascular Intervention

A Challenging Case

CIAT @ TCTAP, April 28, 2015

The COEX, Seoul, South Korea

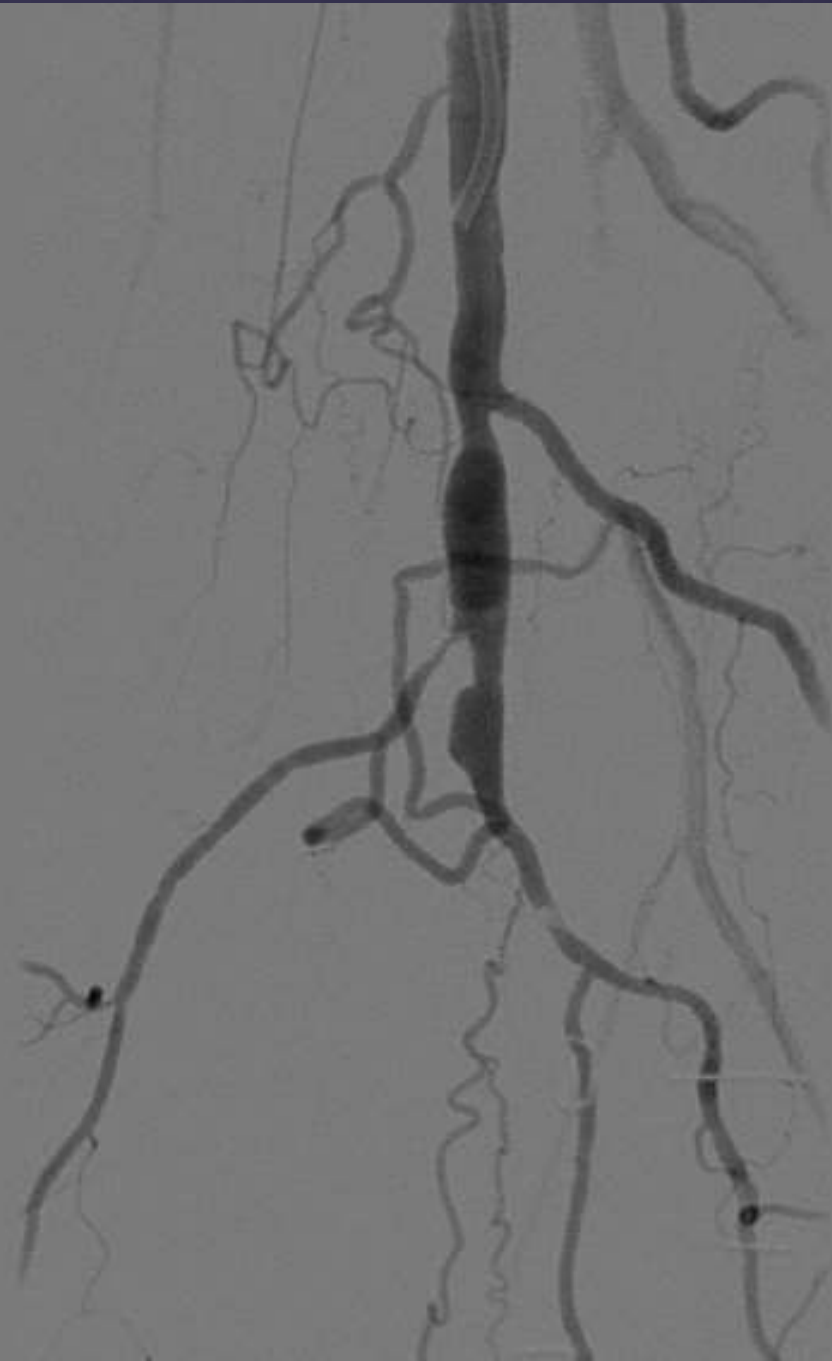
Piyanart Preeyanont, MD
Perfect Heart Institute
Bangkok, Thailand

The Case

- A 74 y/o Kuwaiti male
- T2DM, HTN, DLP
- Gangrene left foot 4 weeks. Angiogram + attempted PTA to left SFA in Kuwait.
- S/P left great toe amputation 1 week.
- Clinical setting : PAOD, Rutherford stage IV category 5
- P.E. left femoral pulse – weak, popliteal pulse – absent, PT –Doppler +ve, DP-Doppler -ve








Challenging Points

- ⌘ Chronic total occlusion with side branch at proximal cap
- ⌘ Occluded popliteal artery, retrograde access site

Looped Terumo



Retrograde access obtained



0.018 guidewire + 5.0 mm balloon

0.018" guidewire + CX1 catheter



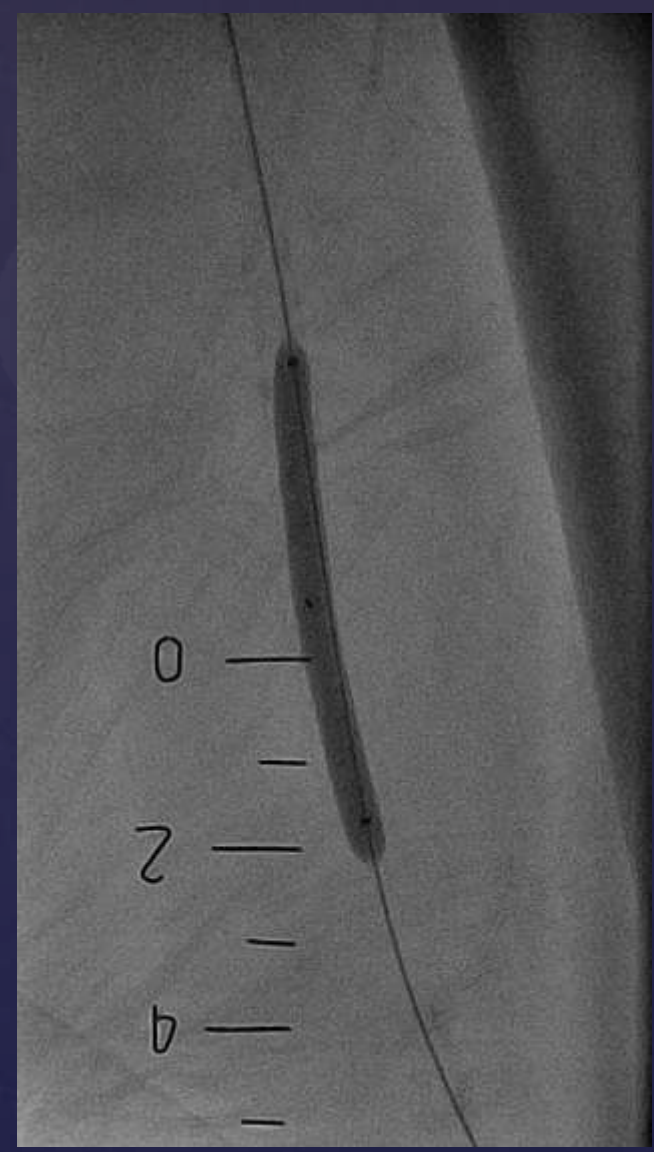
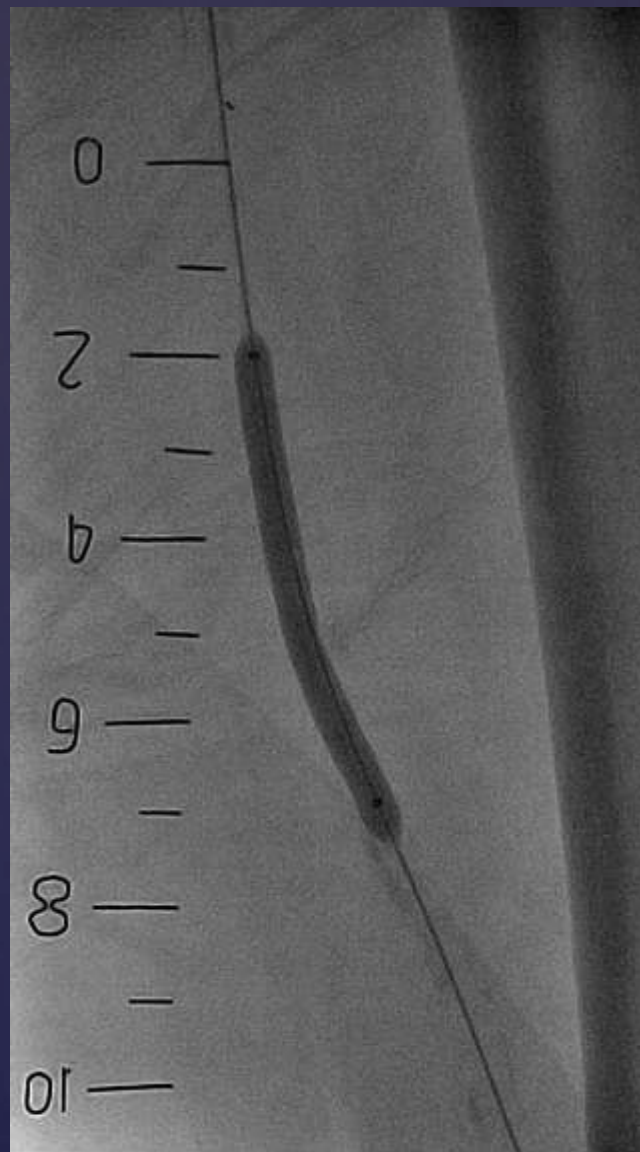
5.0 mm balloon on 0.018" guide wire both

0

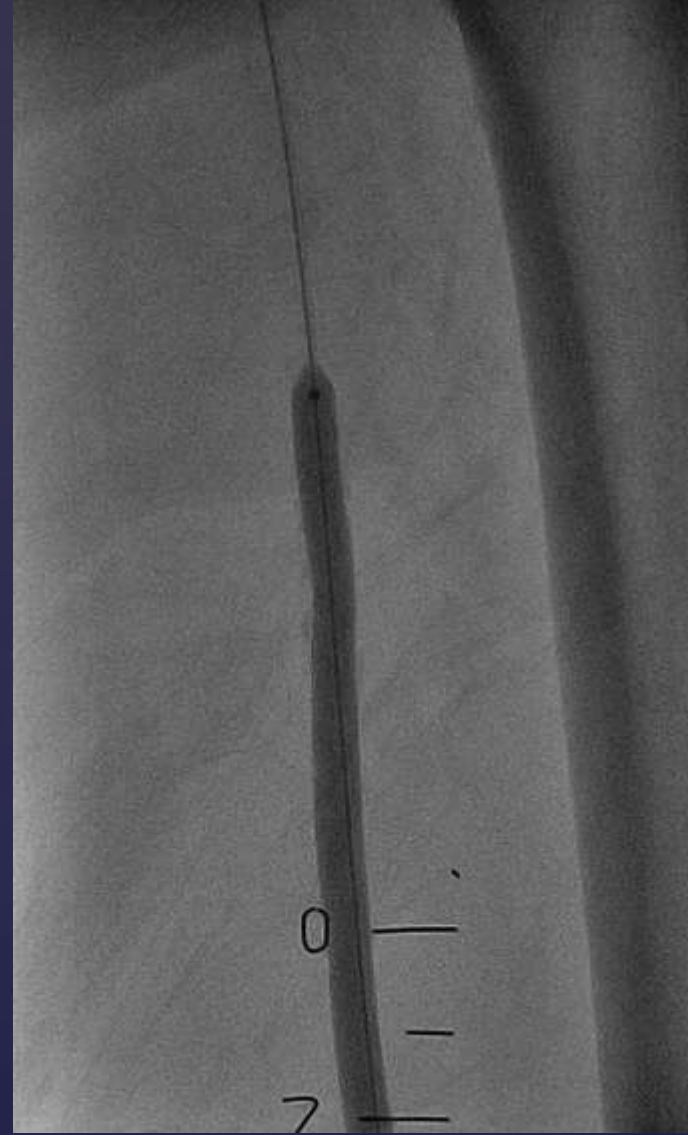
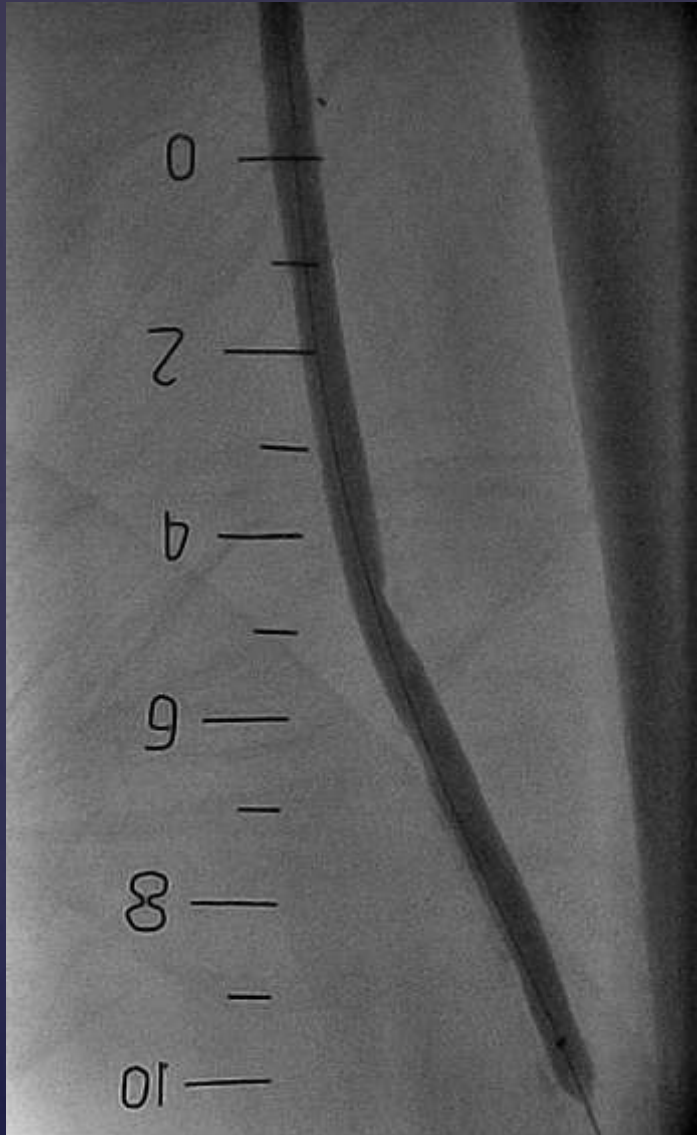
2

4

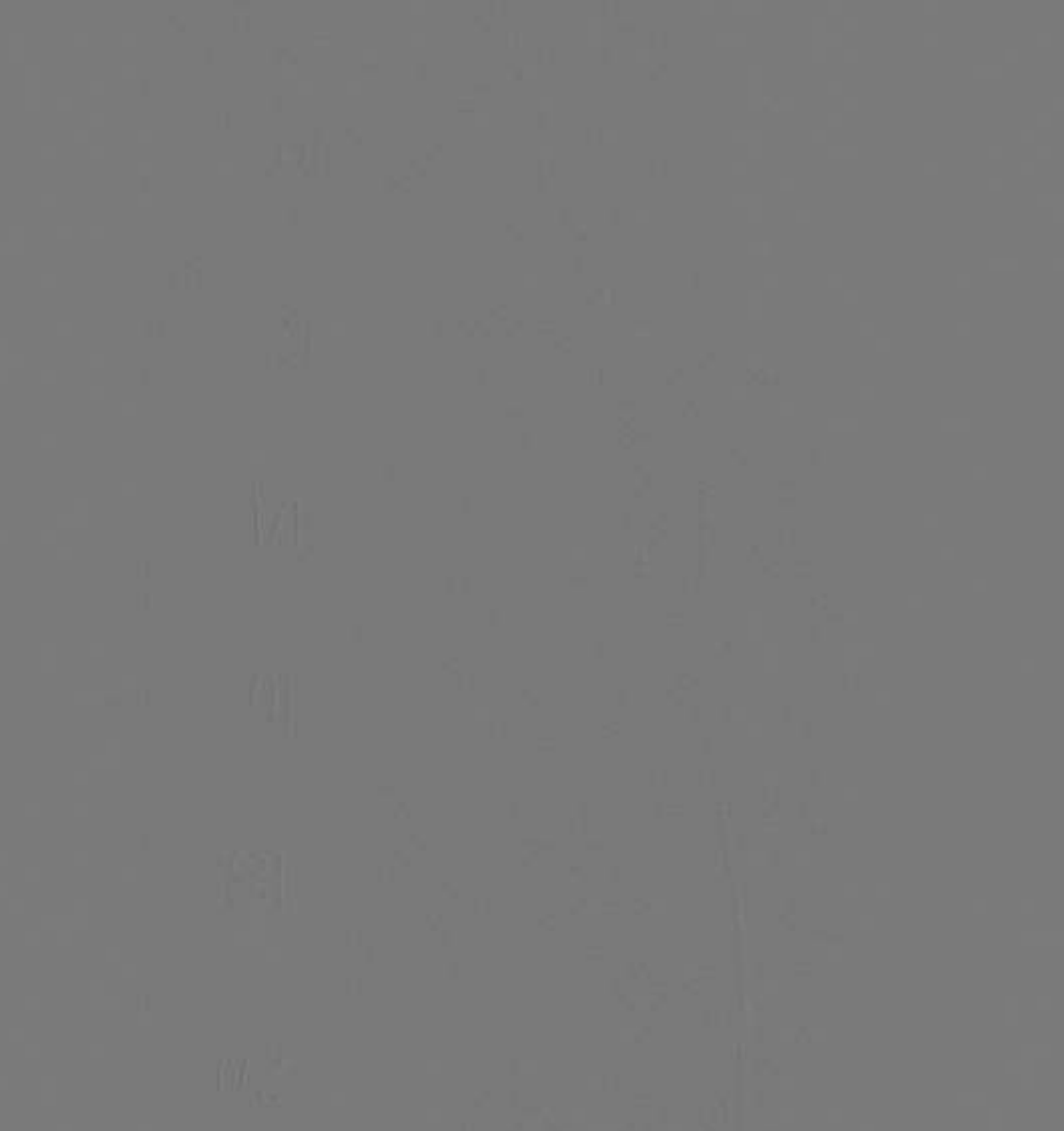
Serial predilatation with 5.0 mm balloon



Aggressive predilatation with 6.0 mm balloon



Retrograde sheath removed



—20

—18

—16

—14

—12

—10

—20

—18

—16

—14

—12

—10

2

12

13

16

14

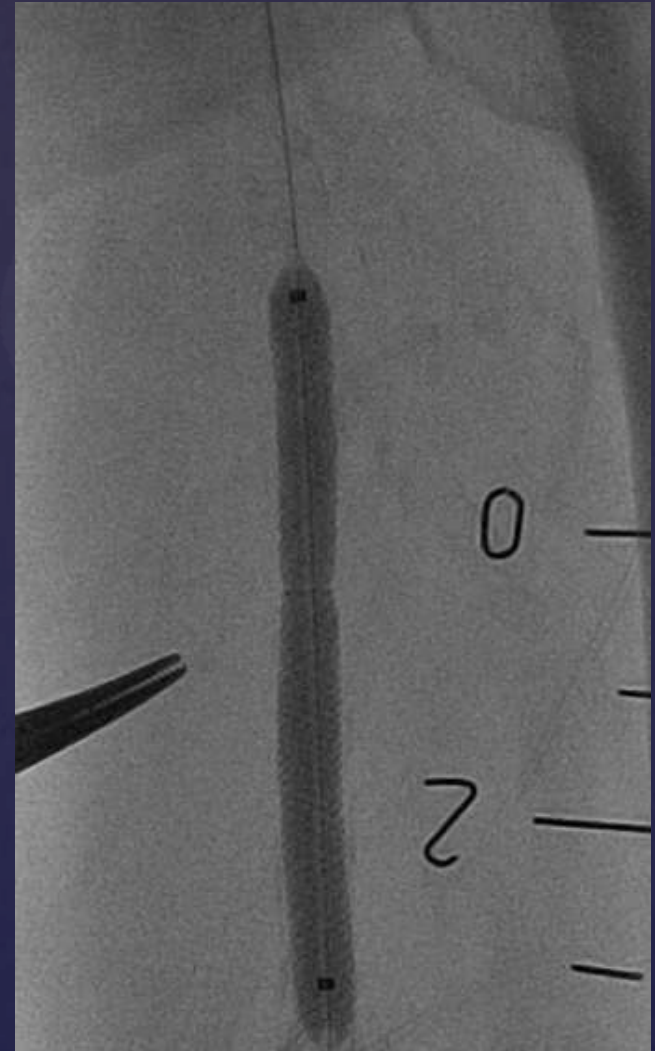
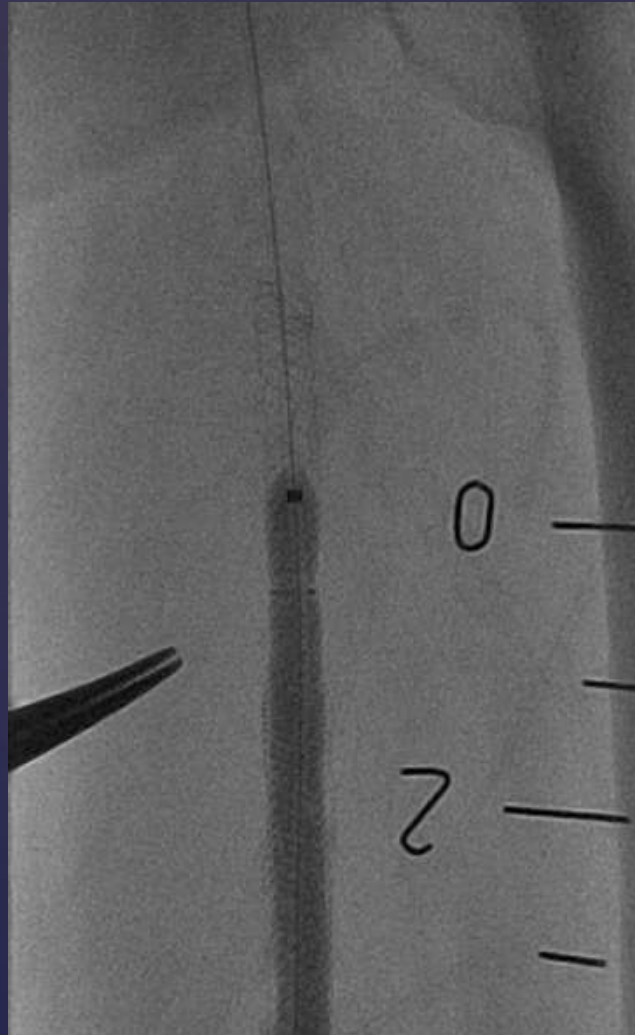
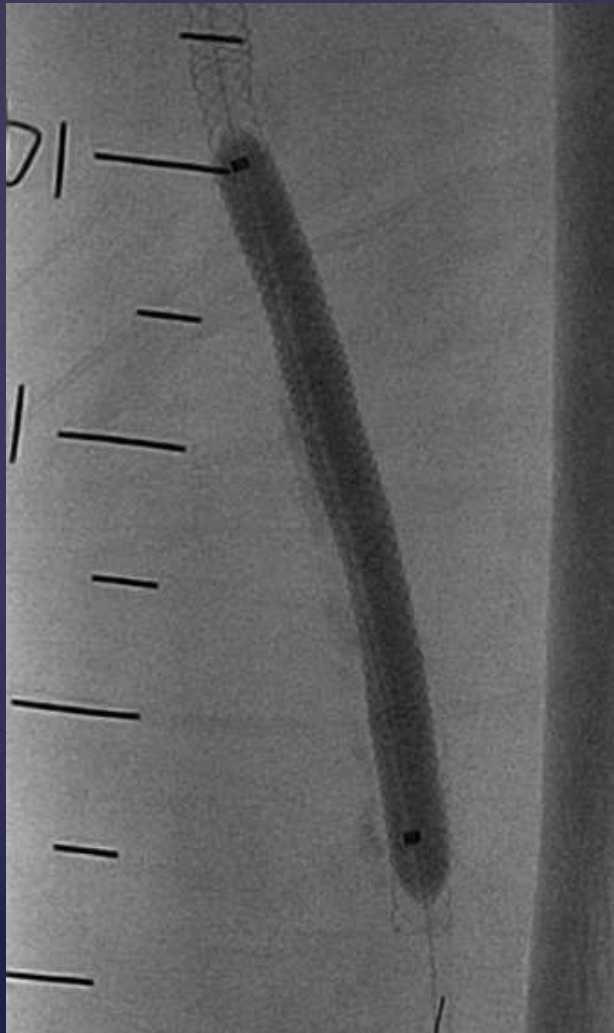
12

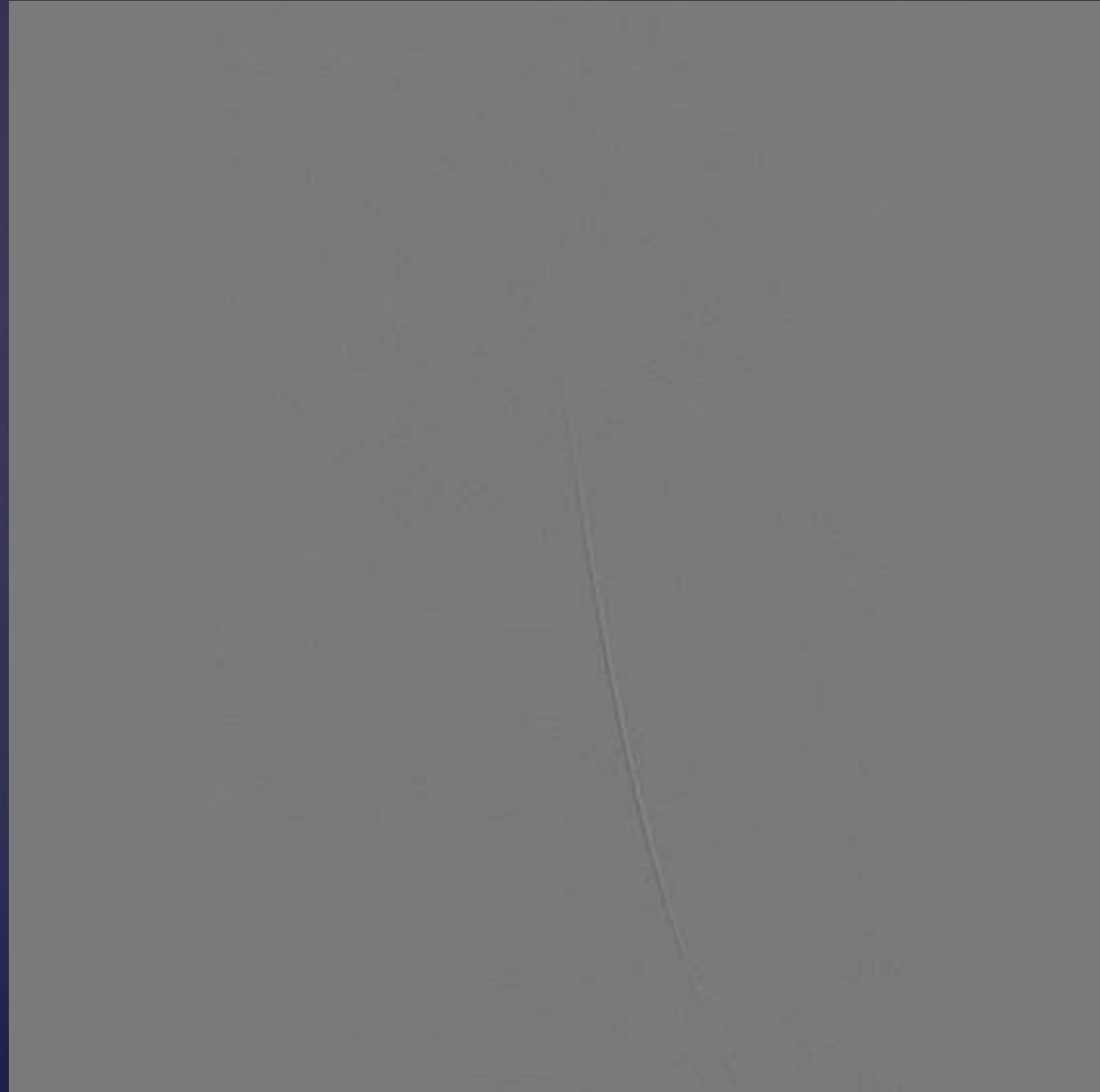
Exchanged to be 0.018 guidewire



5.0 x 120 mm, 5.0 x 80 mm Supera stents

Postdilated with 5.0 mm balloon

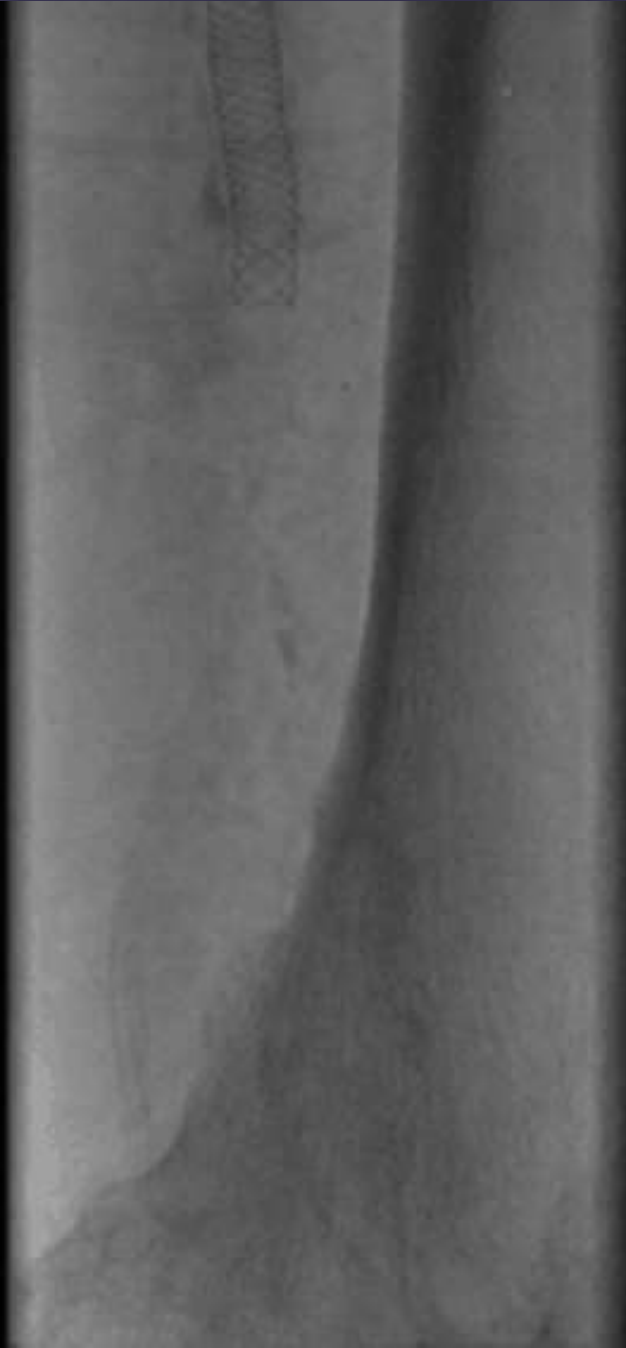




0

2

4





THANK YOU