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OCCLUSIVE DISEASE OF THE INFRARENAL AORTA AND AORTIC BIFURCATION: ENDOVASCULAR THERAPY IS SIMPLE, SHORT AND SAFER?

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Introduction

To report on 50 cases of steno-occlusive disease of the aorto-iliac bifurcation treated with endovascular PTA-stenting.

Materials & Methods

During the last 36 months we treated 50 patients (46 males and 4 females) affected by Leriche syndrome in 19 cases (38%) or severe claudication in 31 cases (62%). Every patient underwent ecocolor Doppler and preoperative angiography. The lesions of the bifurcation were defined as type C and type D of the TASC classification, while the lesions of the infrarenal aorta propered as II and III classes of the American Heart Association Tasc Force on Peripheral PTA. 40 procedures (80%) were carry out in the angiographic theatre. 10 patients (20%) underwent initial locoregional thrombolysis and than we performed 10 PTA-stenting (20%) and 38 PTA-kissing balloon plus stent (76%). Our follow-up consisted of ecocolor Doppler at 1,3,6 and 12 months after the procedure.

Results

27 patients (54%) were less than 60 years old. Mortality rate was 0. Primary technical success rate was 80% (40 cases); we were not able to cross the lesion in just 2 cases (4%). Mean follow-up was 19 months (range 4-36), primary patency rate at dimission date was 100% while overall patency rate was 96% (48 cases). Mean hospitalization was 4 days (range 2-16).

Conclusion

Endovascular therapy in complex aorto-iliac lesions is feasible; patency rate is similar to traditional surgery. It seems to be a better therapeutic option thanks to the lower mortality and morbidity rates; it provides shorter hospitalization.

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