

Crush stent technique for iliac stent thrombosis

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Introduction

Iliac stent thrombosis is problematic. When intraluminally stent recanalization is not possible, sub intimal recanalization of the stent can be performed and may be completed by a new stenting in the subintimal space which will lead to a crush of the occluded stent.

Case report

We report a case of a 55 years old women who was admitted for a critical lower limb ischemia due to thrombosis of left common iliac stent which was implanted 2 years earlier for claudications. We failed to achieve an intra lumen within stent recanalization, so we performed a subintimal recanalization of the lesion. The wire crossed the occlusion completely outside stent through the subintimal space. We performed a balloon angioplasty in the false lumen which was inflated at high pressure and contributed in crushing of the thrombosed stent. We implanted in this lumen a wall stent that completed the crush of the occluded stent. Post operative course was favorable and duplex ultra sound showed patency of the wall stent at 1 and 6 months.

Discussion

Crush stent technique is known in interventional cardiology but rarely performed. In vascular and interventional radiology, intentionally crush stent technique was reported only in one case in literature which was a superficial femoral stent [1]. The originality of our case is that we report the first crush stent technique for an iliac stent to our knowledge. In 2012, Vogel B et al published the first superficial femoral case. In 2017, Ascitutto G et al, reported the first subintimal recanalization of an occluded iliac stent but in this report occluded stent was not crushed.

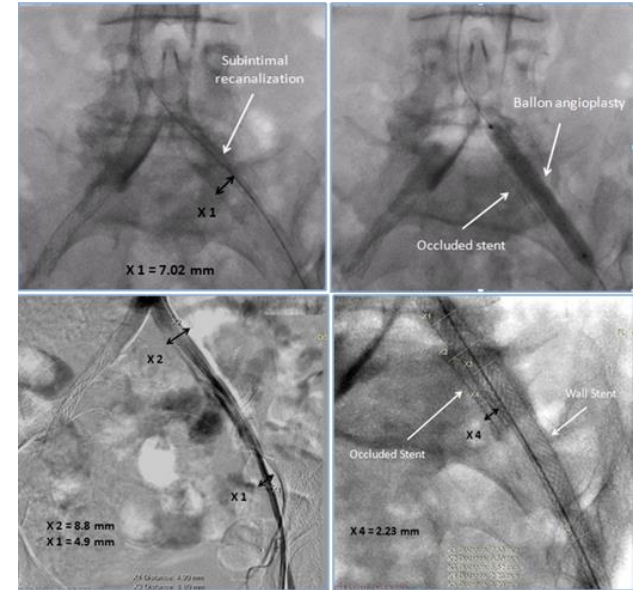


Figure : Procedure steps

Conclusion

Crush stent technique is feasible not only for coronary stent but also for peripheral artery stent.