

# ENDOVASCULAR FEMOROPOPLITEAL REVASCULARIZATION IN BILATERAL TASC D LESIONS

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## INTRODUCTION

Bypass is the most widely used technique for the treatment of complex femoropopliteal lesions with long occlusions (TASC D). Nonetheless, technical and clinical success rates of endovascular therapy make it an alternative for more complicated infrainguinal lesions. Recent studies point out a long-term superiority of drug-eluting stents (paclitaxel) compared to plain old balloon angioplasty and bare-metal stents – however this association is yet to be verified in TASC D lesions.

## CASE REPORT

54-year-old male. Medical background of arterial hypertension, dislipidaemia and bilateral stage IV peripheral arterial disease (PAD).

### RIGHT lower limb

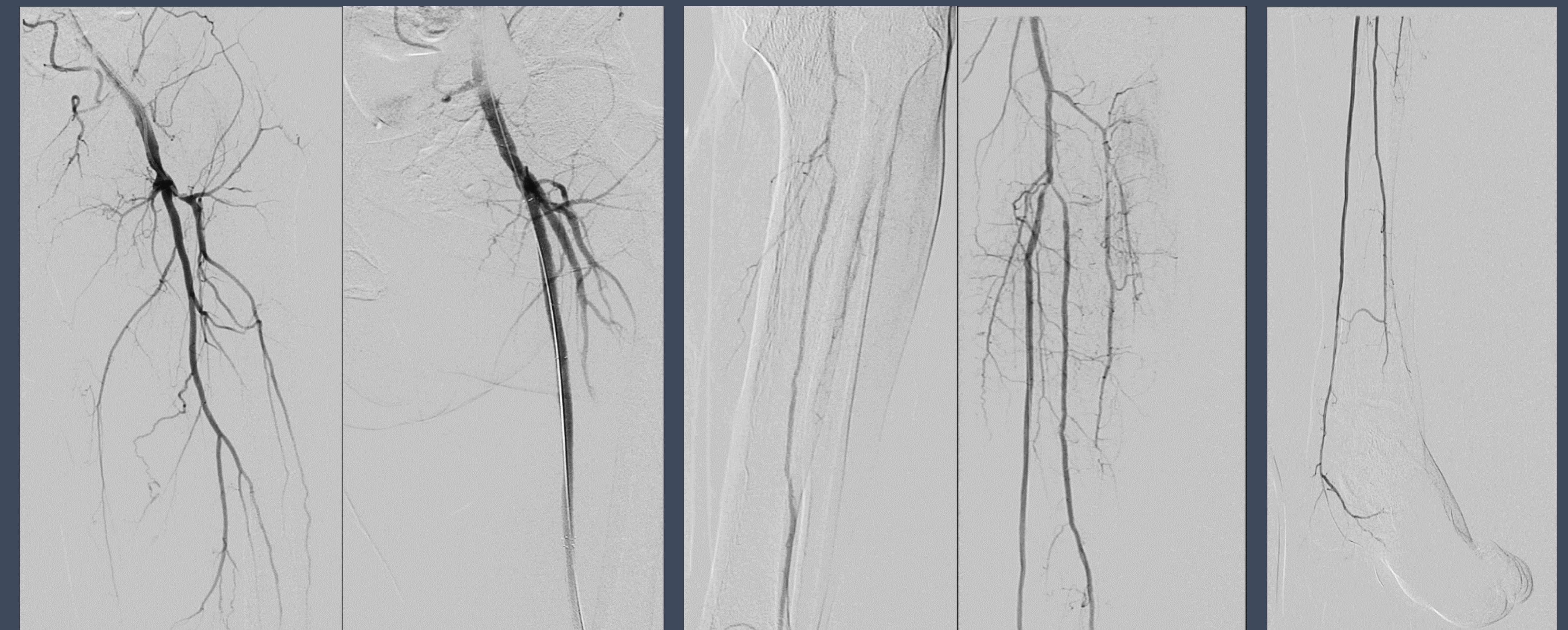
- Right femoral revascularization was decided in order to make a below-knee amputation feasible.
- SFA was recanalized [figure 1] and ballooned with a 6x150mm POBA (4 sequential inflations).
- Dissection → 6x120mm self-expandable BMS [figure 2].
- Excellent angiographic result → below-knee amputation was performed at the end of the procedure.



### LEFT lower limb

- SFA and popliteal artery occlusion → recanalization → sequential PTA with a 6x120mm POBA.
- Dissections in plaque segments → deployment of three sequential paclitaxel drug-eluting stents in the SFA and above-knee popliteal artery.
- Posterior tibial artery occlusion → recanalization → 0.018" guide wire, 4gr tip supported by a 3x150mm balloon. PTA of the posterior tibial artery with a POBA (3-3,5x210mm).
- Excellent angiographic result with good inflow to the foot was verified at the end of the procedure.

→ Wounds healed favourably and the rest pain resolved.  
→ Post-procedure left ABI: 0.78.



## CONCLUSION

Endovascular techniques can be safely performed with a good clinical result in TASC D lesions. Further follow-up is required for surveillance of restenosis and long-term patency rates. Drug-eluting stents have a good short-term efficacy in more complex femoropopliteal lesions, although their long-term patency is yet to be (im)proved.