

BTK recanalization... styles around the world...

The pragmatic **English** Style

Lorenzo Patrone

Vascular and Interventional Radiology Consultant



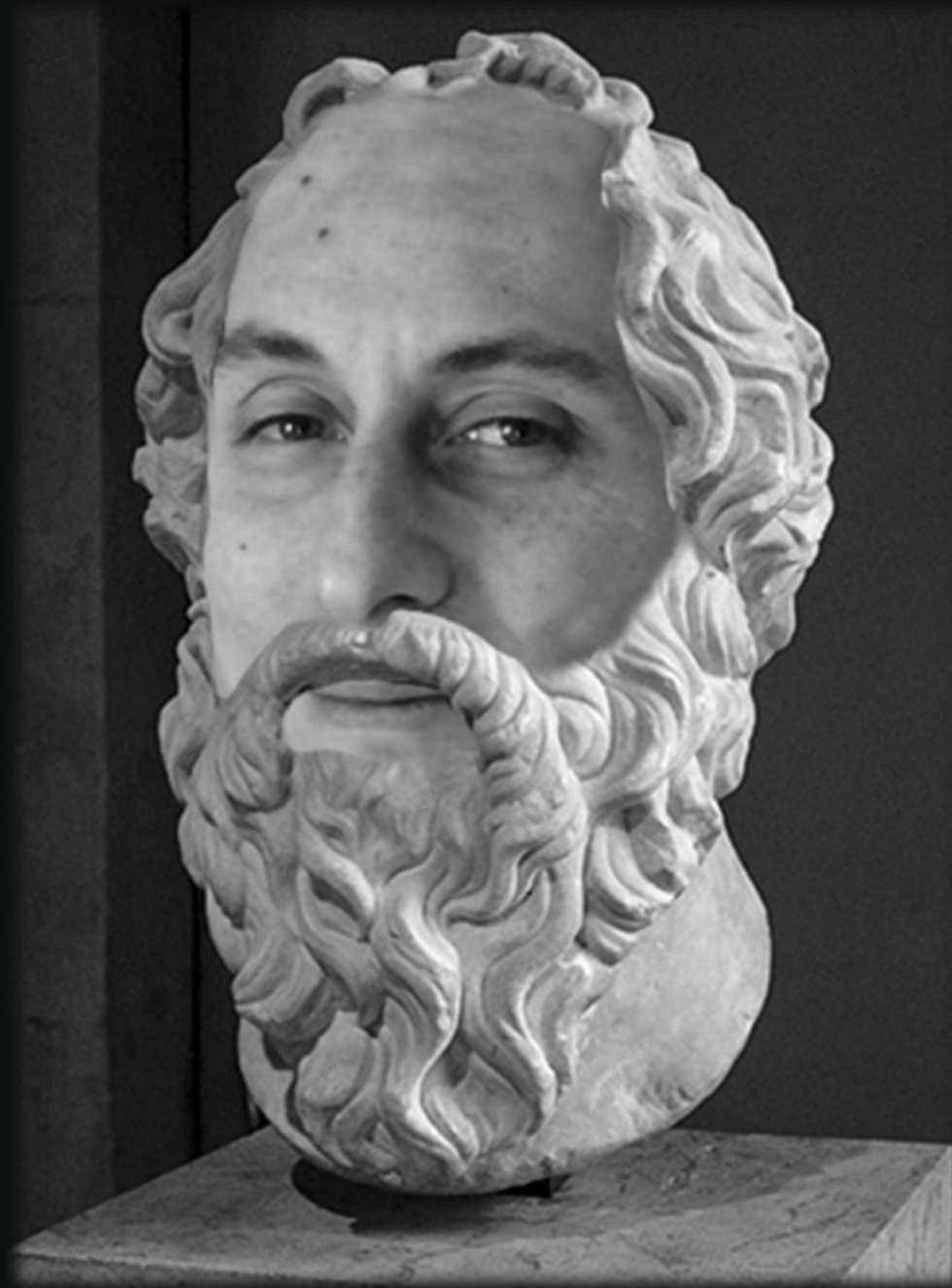
OUTS















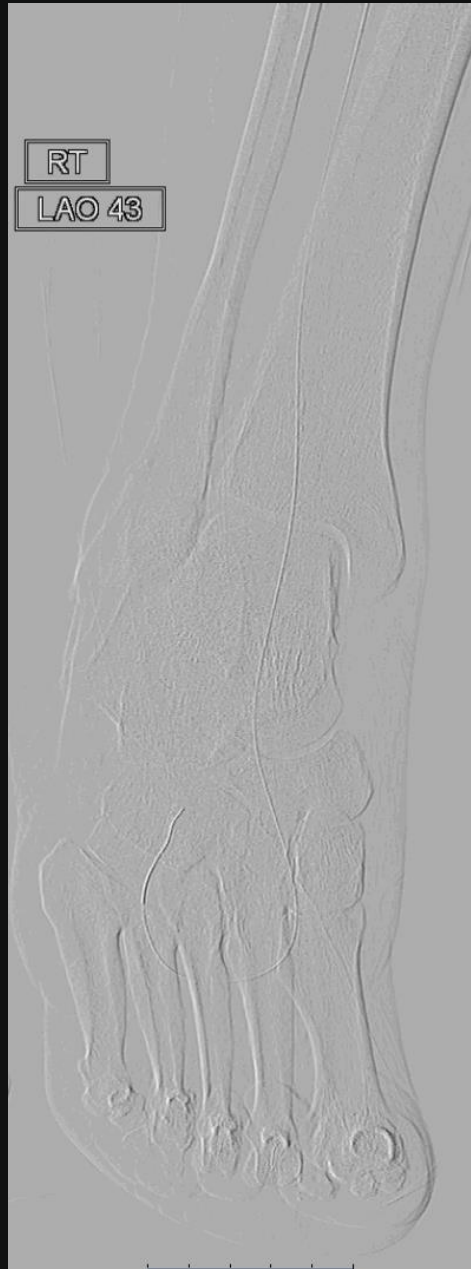
**KEEP
CALM
AND
FOLLOW
PROTOCOL**

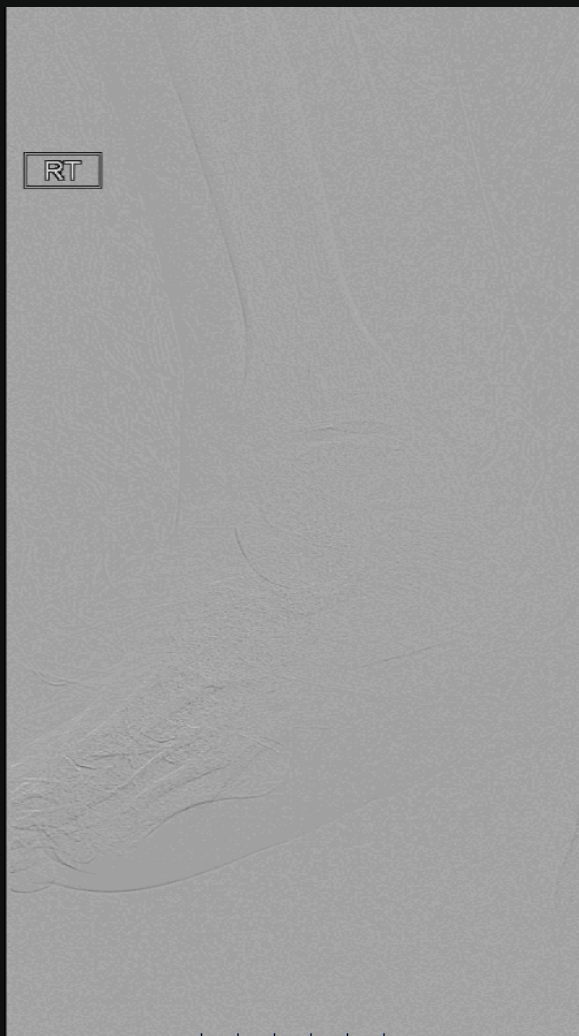


RIGHT
RAO 49

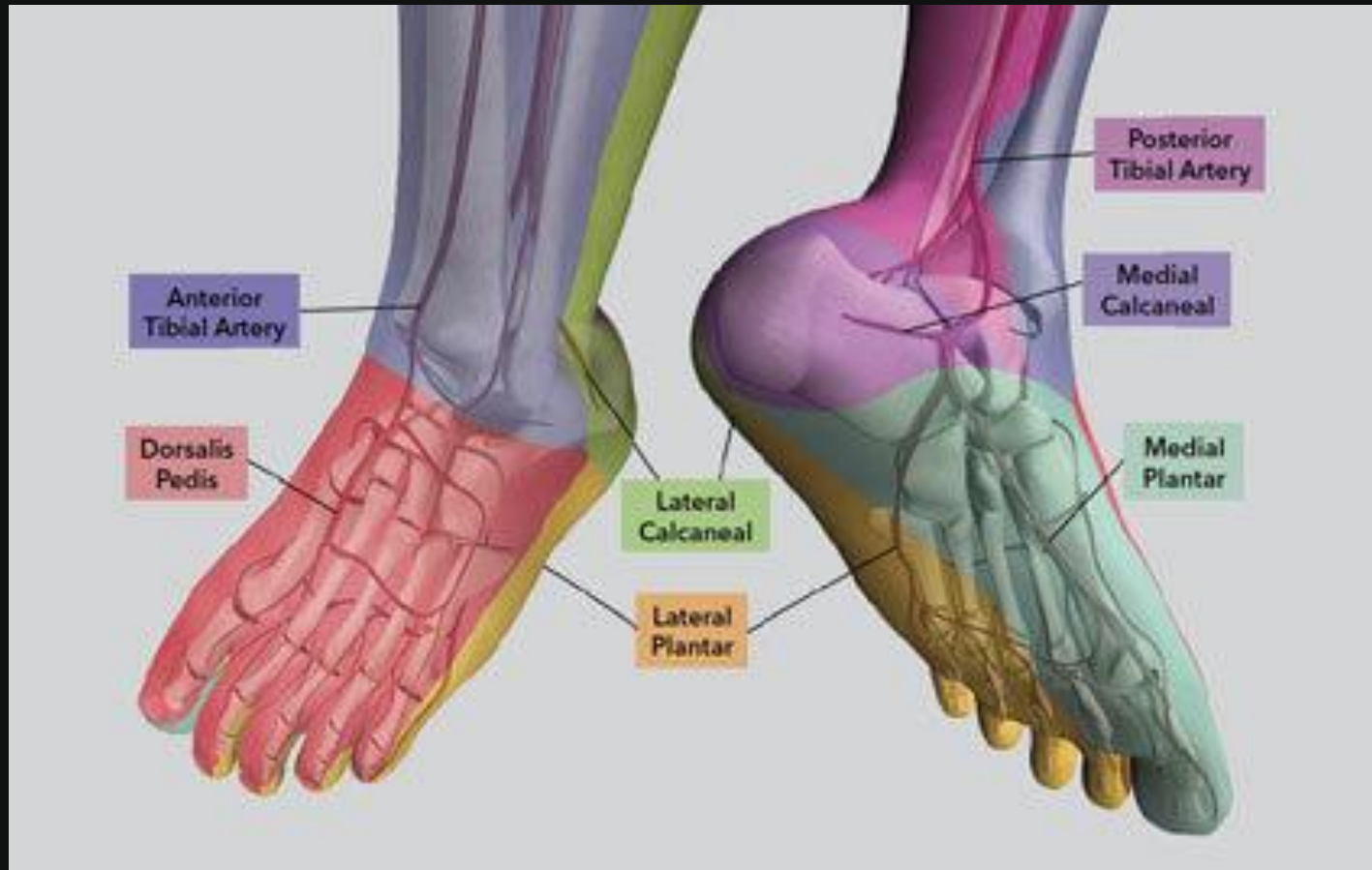


RT
LAO 43





ANGIOSOMES





Plast Reconstr Surg. 2006 Jun;117(7 Suppl):261S-293S.

Angiosomes of the foot and ankle and clinical implications for limb salvage: reconstruction, incisions, and revascularization.

Attinger CE¹, Evans KK, Bulan E, Blume P, Cooper P.

Vasc Endovascular Surg. 2010 Nov;44(8):654-60. doi: 10.1177/1538574410376601. Epub 2010 Jul 30.

The role of foot collateral vessels on ulcer healing and limb salvage after successful endovascular and surgical distal procedures according to an angiosome model.

Varela C¹, Acín F, de Haro J, Bleda S, Esparza L, March JR.

J Endovasc Ther. 2008 Oct;15(5):580-93. doi: 10.1583/08-2460.1.

Selective primary angioplasty following an angiosome model of reperfusion in the treatment of Wagner 1-4 diabetic foot lesions: practice in a multidisciplinary diabetic limb service.

Alexandrescu VA¹, Hubermont G, Phillips Y, Guillaumie B, Ngongang C, Vandenbossche P, Azdad K, Ledent G, Horion J.

Direct revascularisation provides better wound healing and limb salvage than indirect revascularisation



Ann Vasc Surg. 2009 May-Jun;23(3):367-73. doi: 10.1016/j.avsg.2008.08.022. Epub 2009 Jan 29.

Revascularization of a specific angiosome for limb salvage: does the target artery matter?

Neville RF¹, Attinger CE, Bulan EJ, Ducic I, Thomassen M, Sidawy AN.

Direct revascularisation provides **better limb salvage** compared to indirect revascularisation
but no difference in wound healing



J Vasc Surg. 2013 Jan;57(1):44-9. doi: 10.1016/j.jvs.2012.07.042. Epub 2012 Oct 9.

Outcomes of angiosome and non-angiosome targeted revascularization in critical lower limb ischemia.

Kabra A¹, Suresh KR, Vivekanand V, Vishnu M, [Sumanth R](#), [Nekkanti M](#).

Direct revascularisation provides better wound healing compared to indirect revascularisation but no difference in limb salvage



[Eur J Vasc Endovasc Surg](#). 2012 Mar;43(3):322-8. doi: 10.1016/j.ejvs.2011.12.001. Epub 2012 Jan 9.

Factors influencing wound healing of critical ischaemic foot after bypass surgery: is the angiosome important in selecting bypass target artery?

[Azuma N](#)¹, [Uchida H](#), [Kokubo T](#), [Koya A](#), [Akasaka N](#), [Sasajima T](#).

No statistically significant difference
between DR and IR for wound healing
and limb salvage





Angiosome Perfusion Of The Foot: An Old Theory Or A New Issue?

Jos C. van den Berg, MD PhD, Carlo Setacci



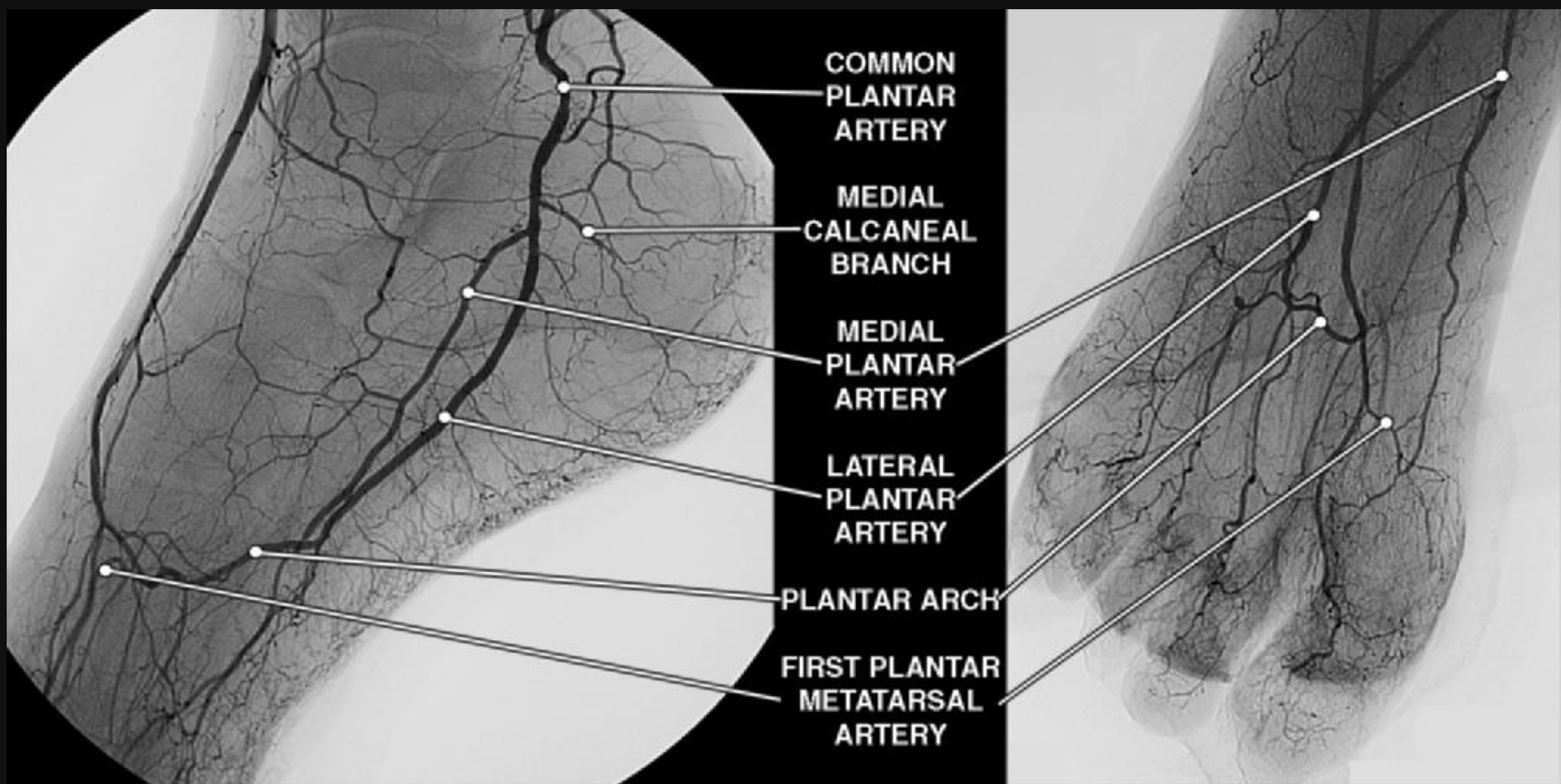
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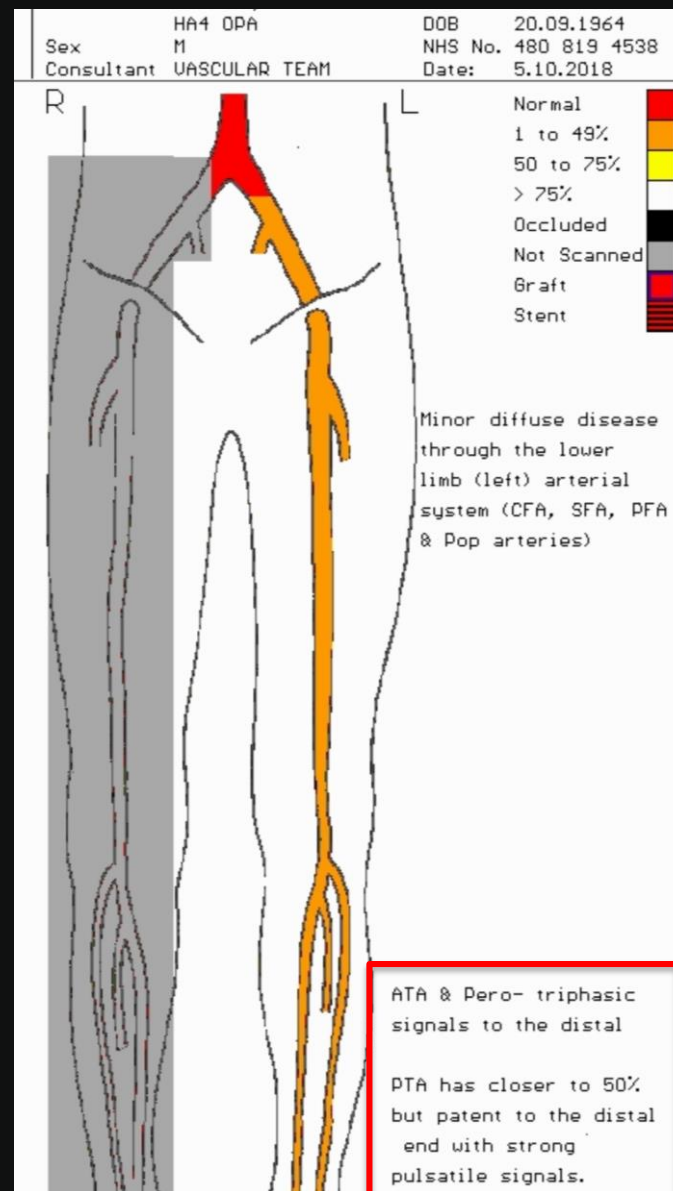
DOI: <https://doi.org/10.1053/j.semvascsurg.2018.12.002>

Reference: YSVAS 50551

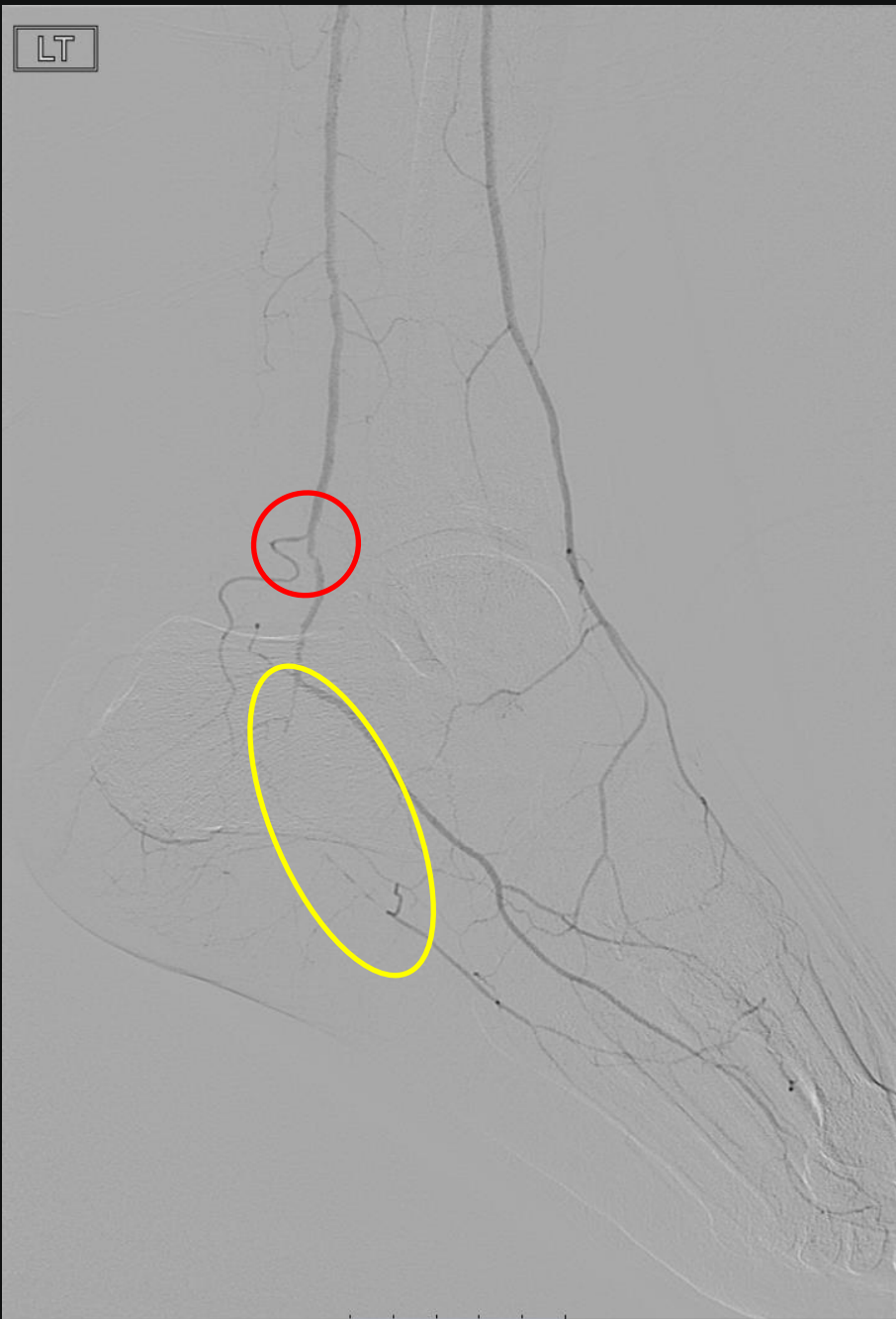
To appear in: *Seminars in Vascular Surgery*

angiosome model will be of less importance. Furthermore, given the variations in anatomy and the variable amount of collateral reserve, the predefined anatomical, topographical angiosomes do not always correspond to the actual distribution of flow. This underscores the need for proper pre- or per-operative angiographic assessment in order to reliably confirm which artery should be considered as the feeding artery of a wound bed. The old angiosome theory is here to stay, but should be part of a more



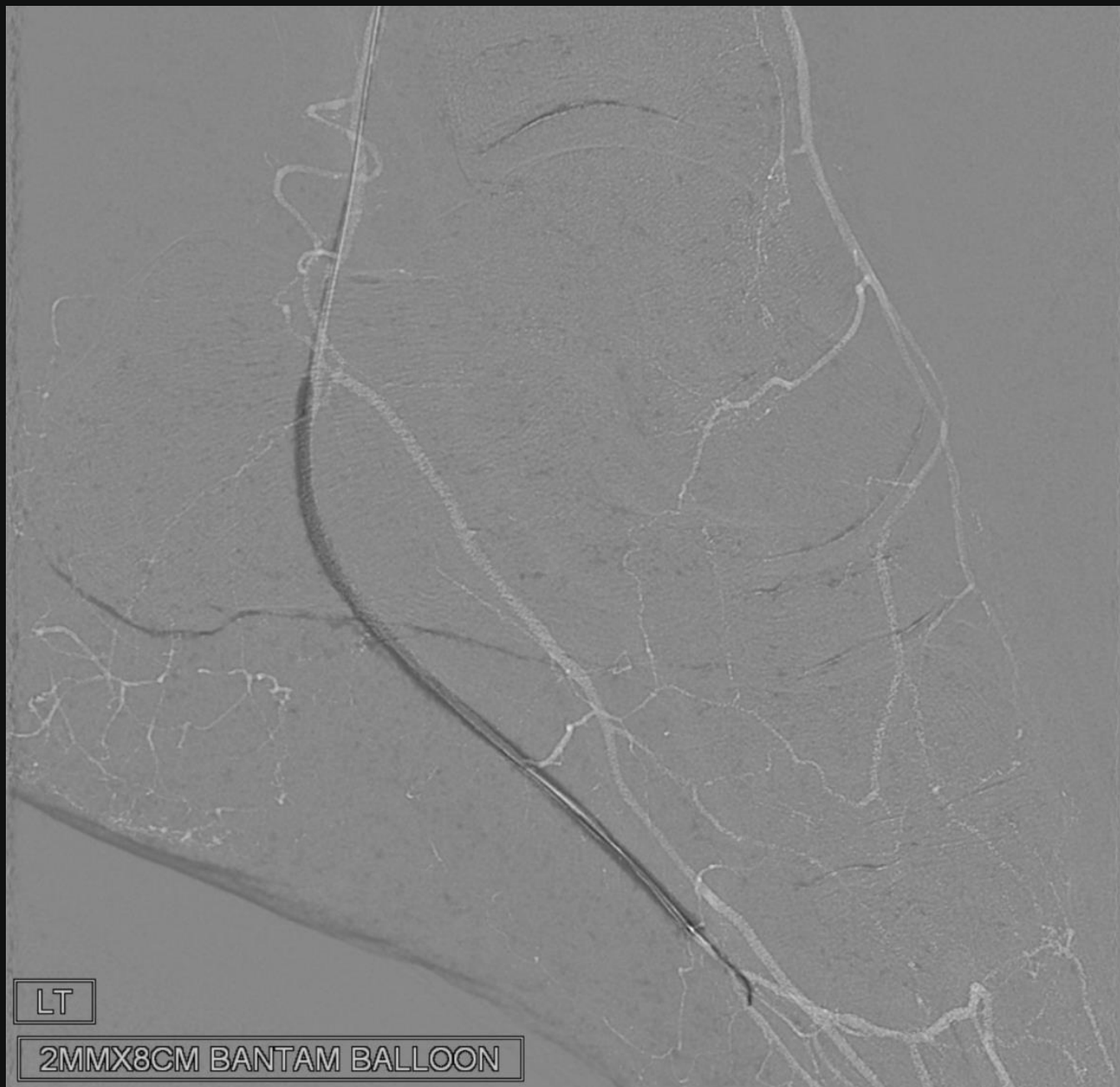


LT



LT
RAG60
CAUD10





LT

2MMX8CM BANTAM BALLOON

CAUD10

RAO80

LT

LT

LT

LT
RAO60
CAUD10



CAUD10

RAO80

LT





0 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20
cm

West London

Vascular and
Interventional Centre

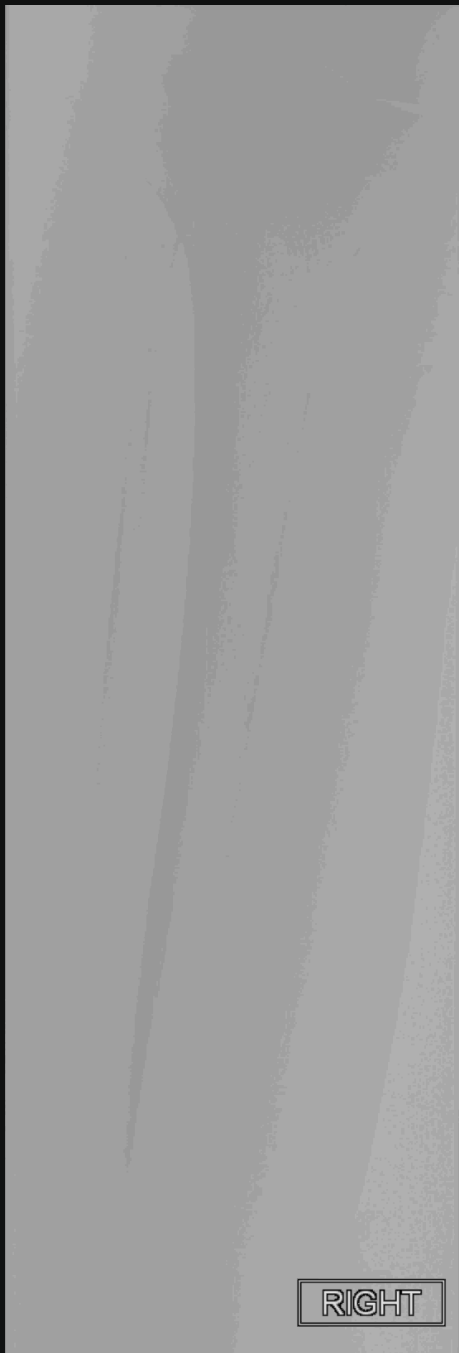
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Hospital No: H088819

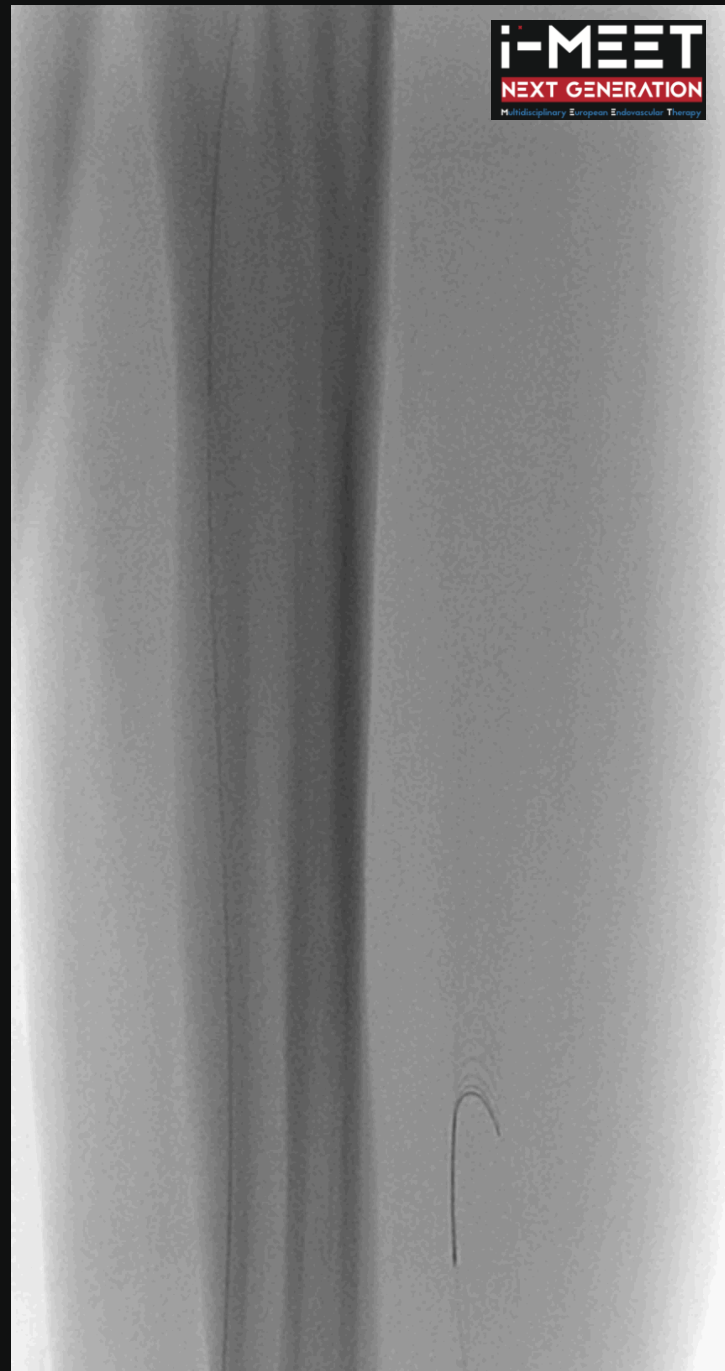
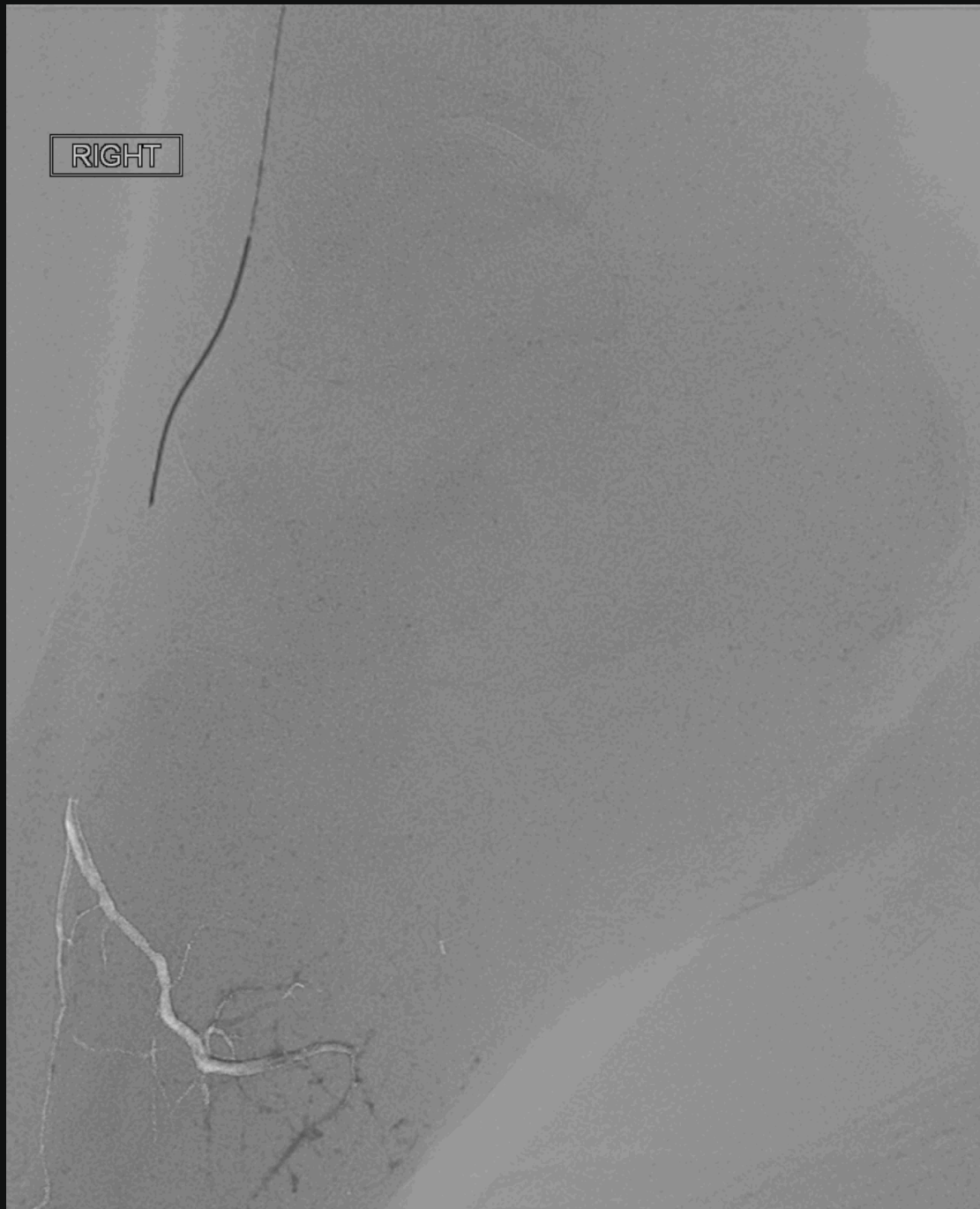
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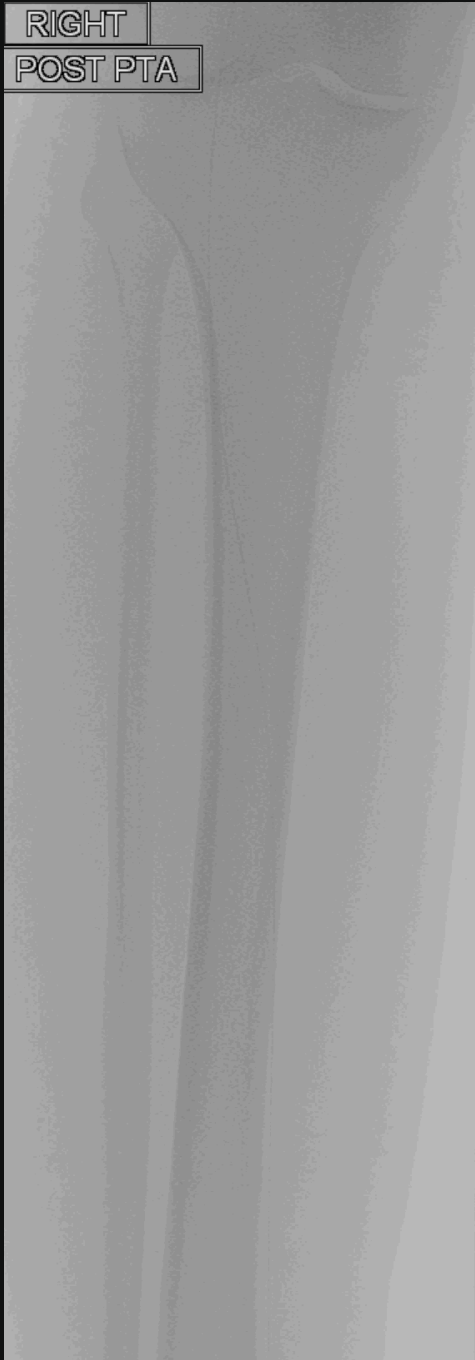




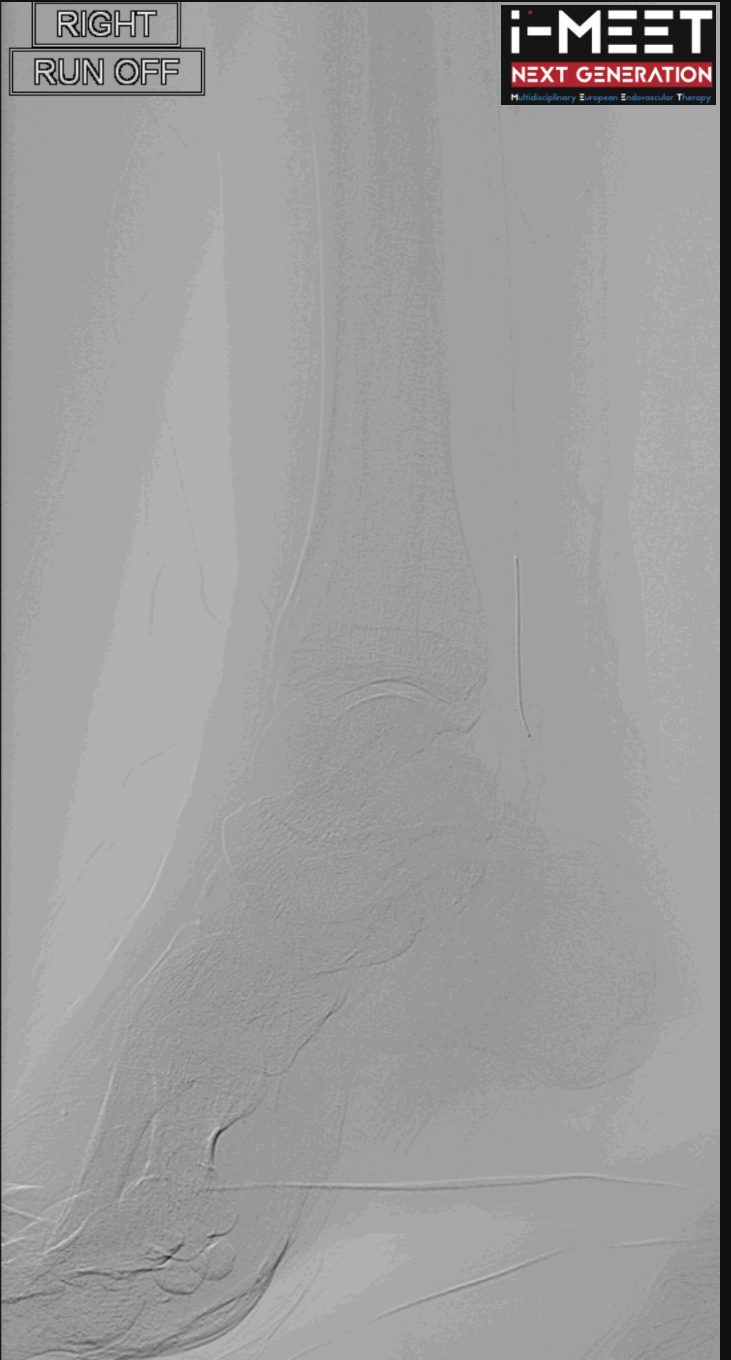
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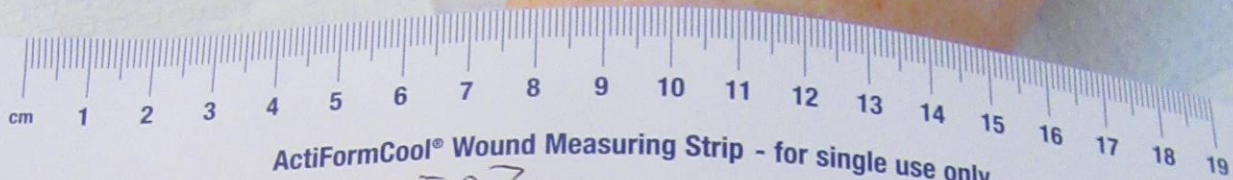


RIGHT
POST PTA



RIGHT
RUN OFF





ActiFormCool® Wound Measuring Strip - for single use only

Patient Identification: H 340507

Wound size: _____

Date: 18, 11, 18

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R
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25/10/2018









LAO 27

LT

LT

RAO 30



LT

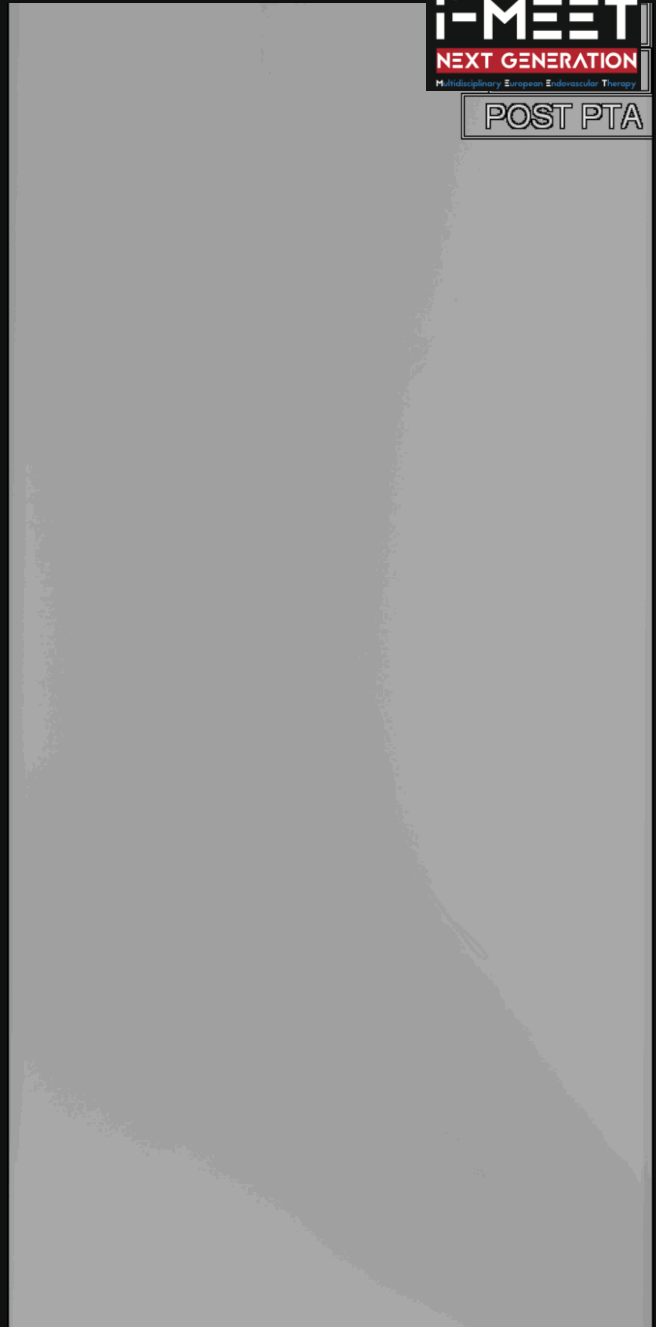
RAO 23

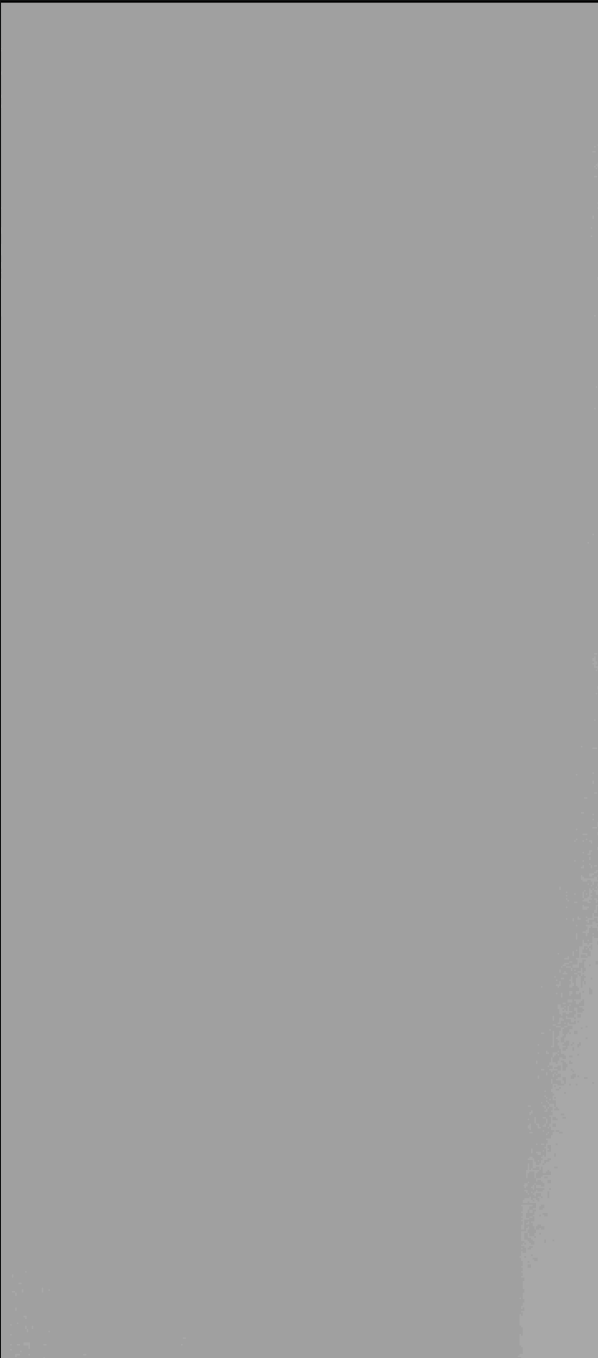


LT

RAO 23

3MMX120MM BALLOON



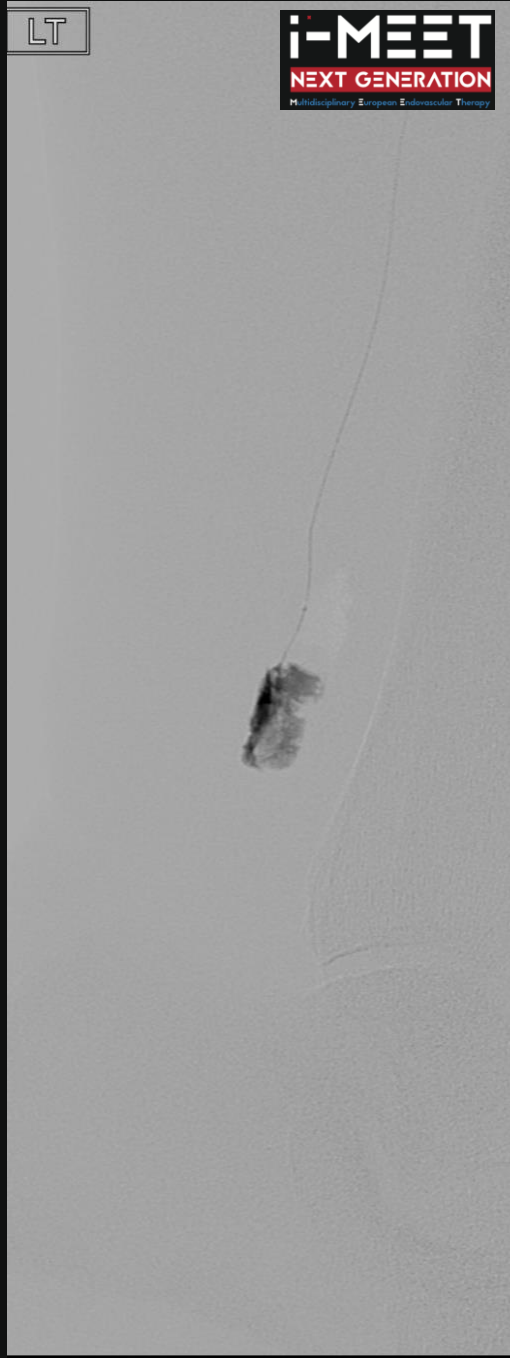


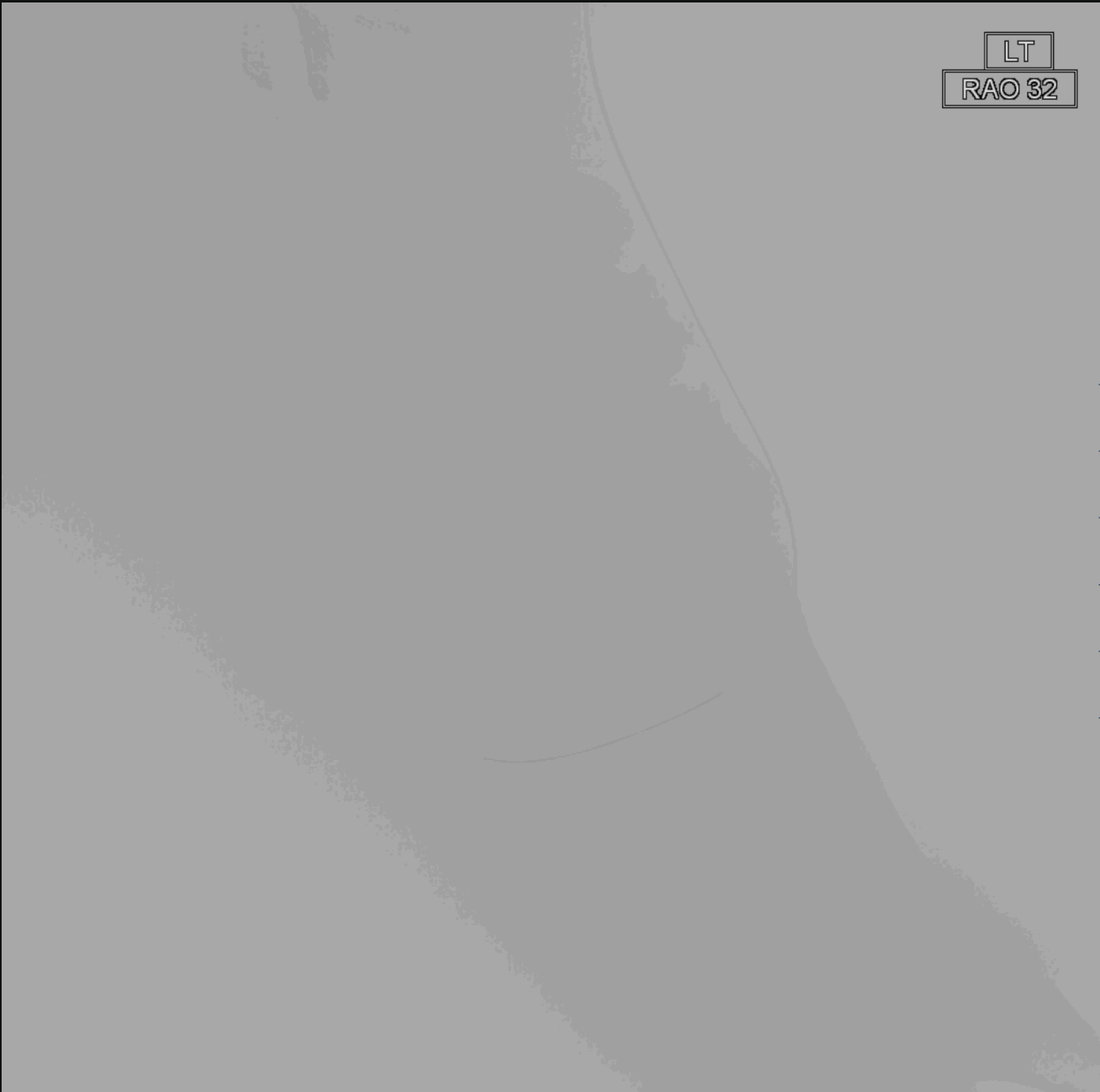
LT



LT

i-MEET
NEXT GENERATION
Multidisciplinary European Endoscopic Therapy



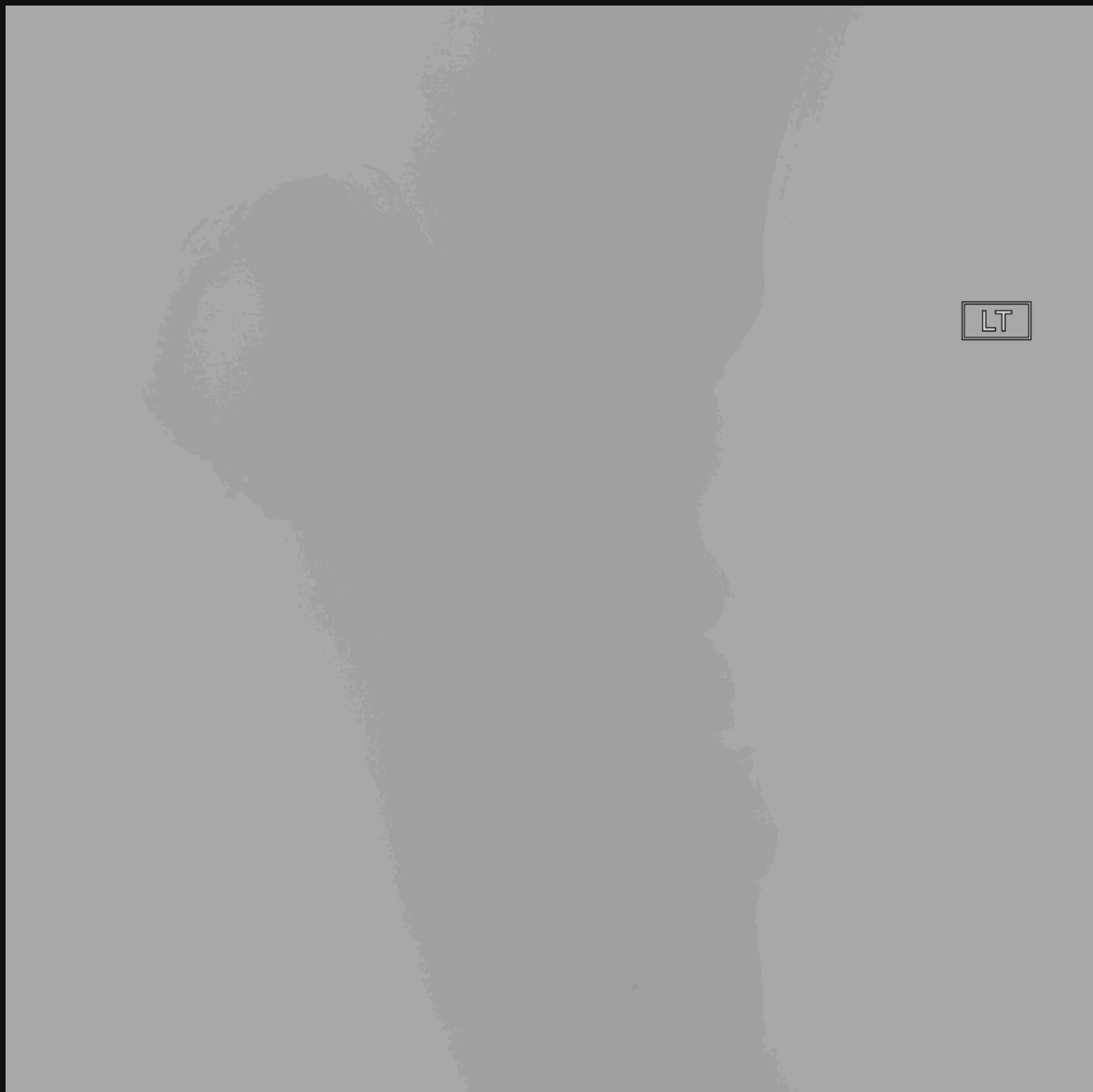


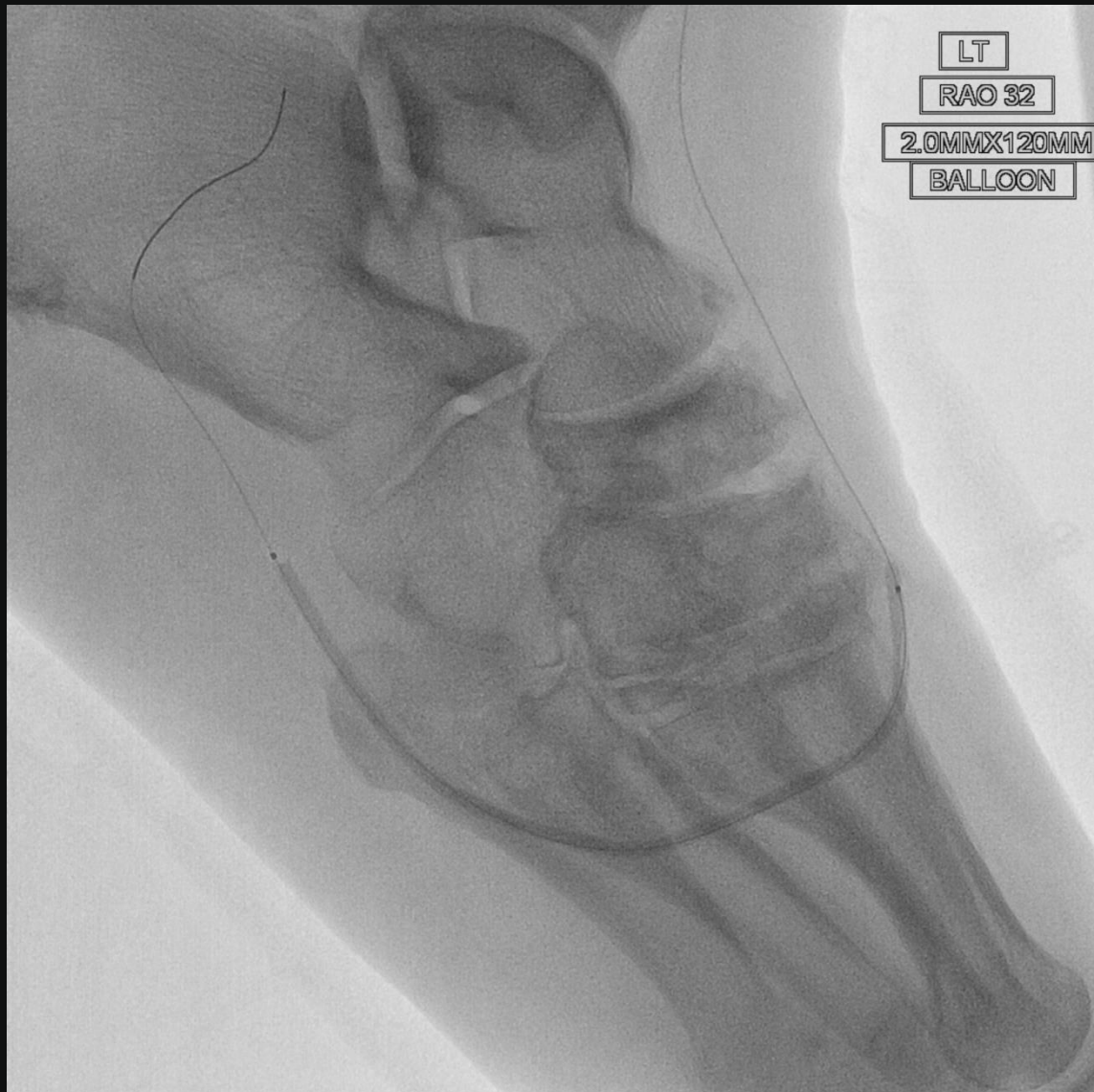
LT
RAO 32



LT
RAO 32







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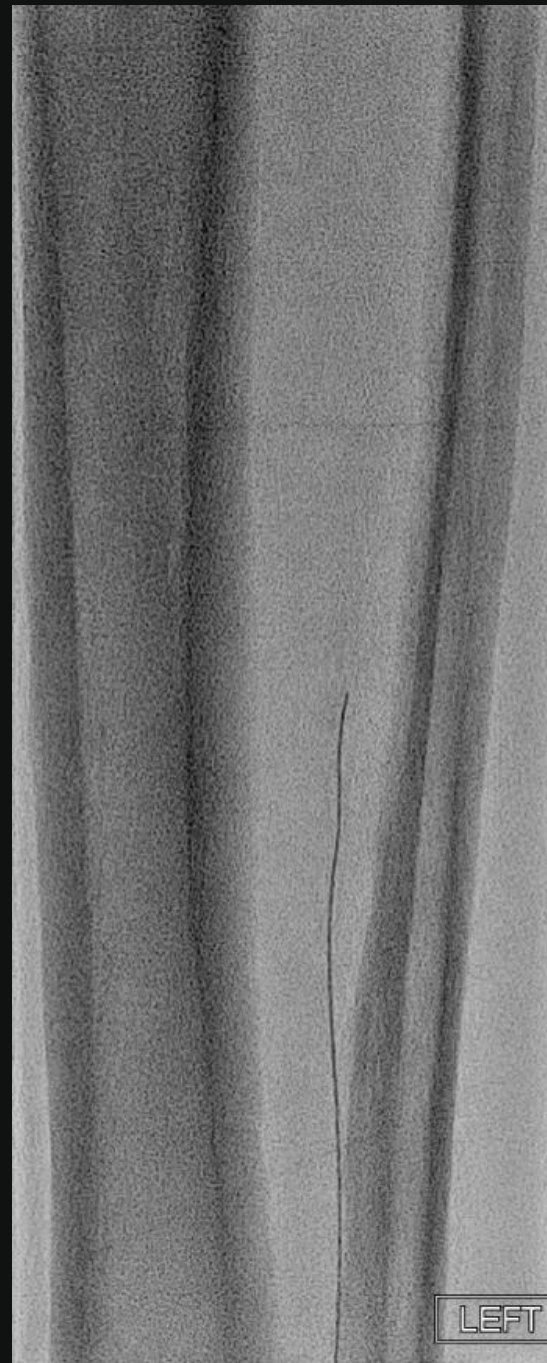
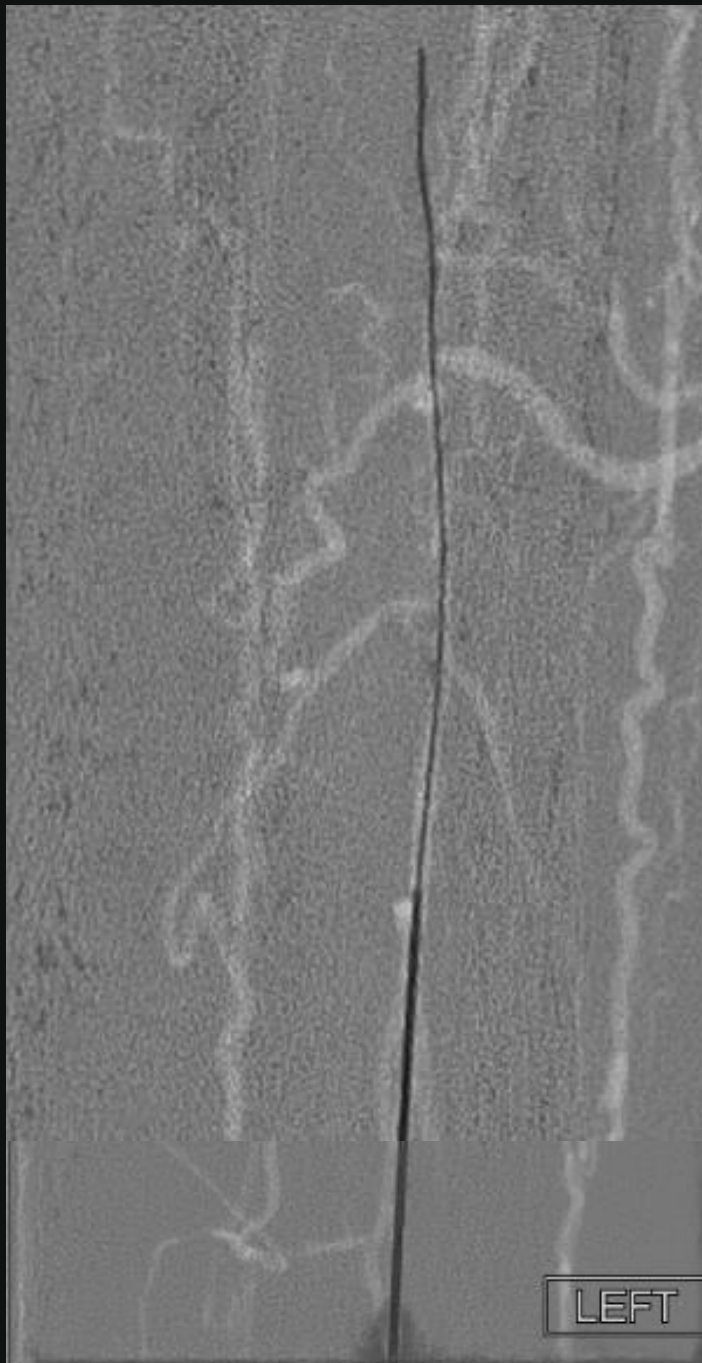
LEFT

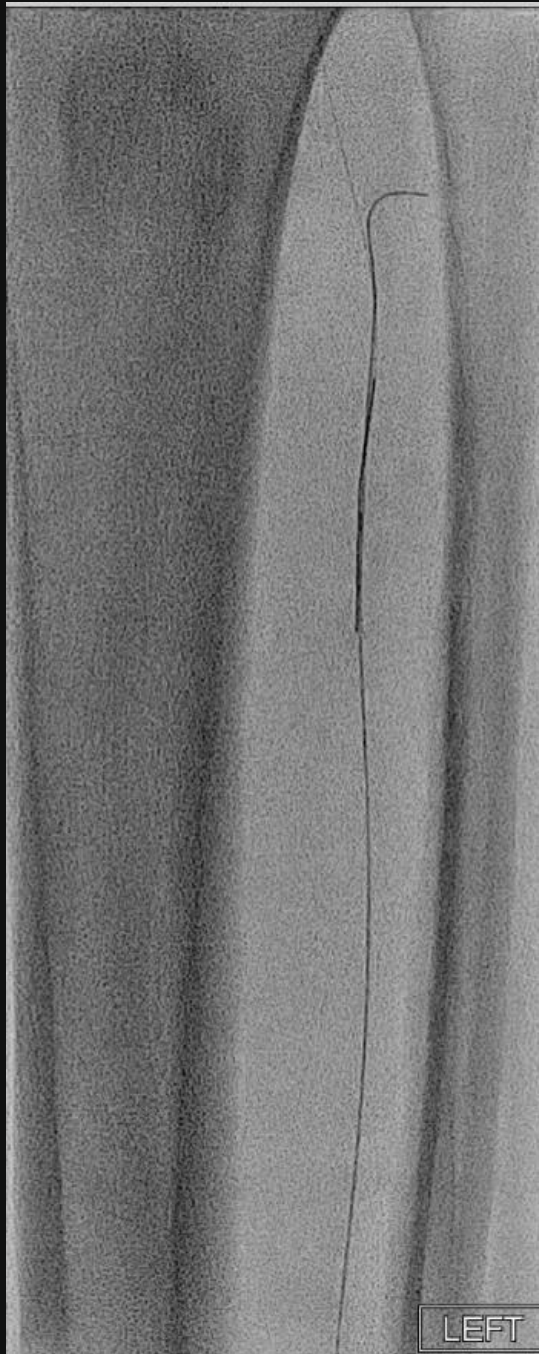
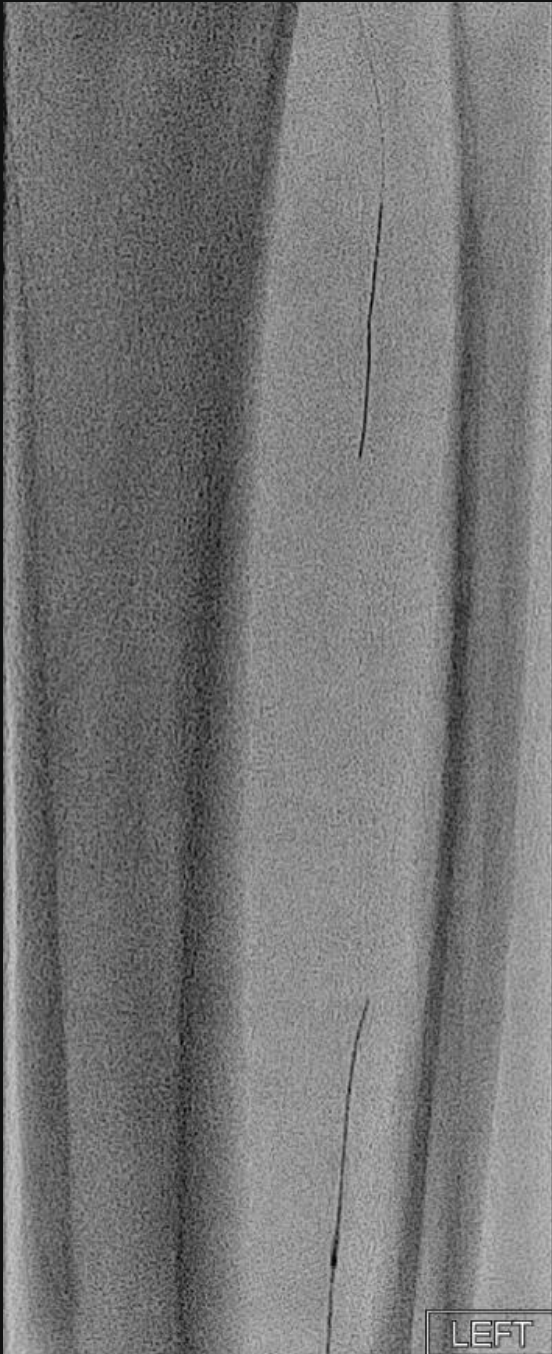
LAO21

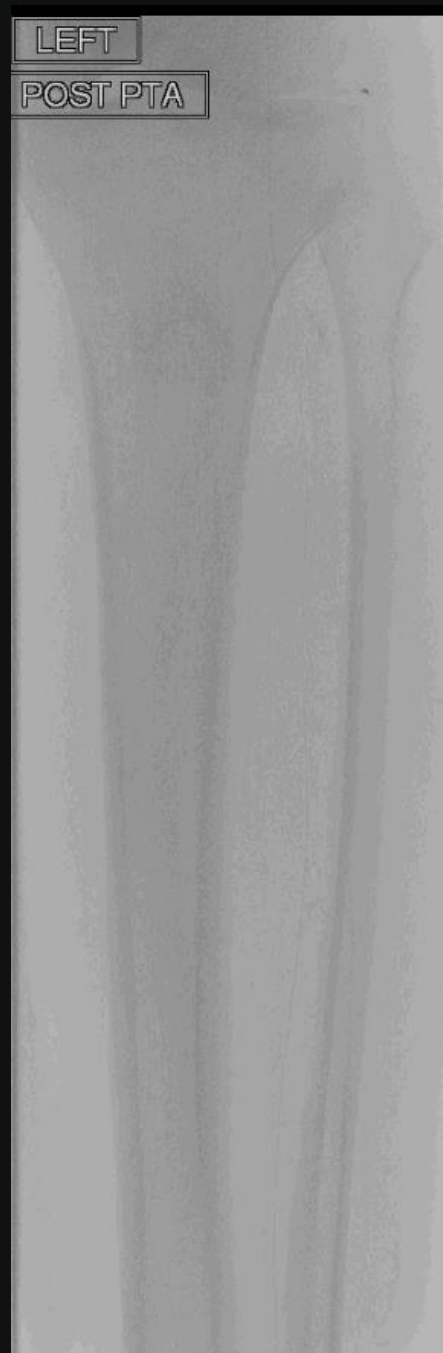
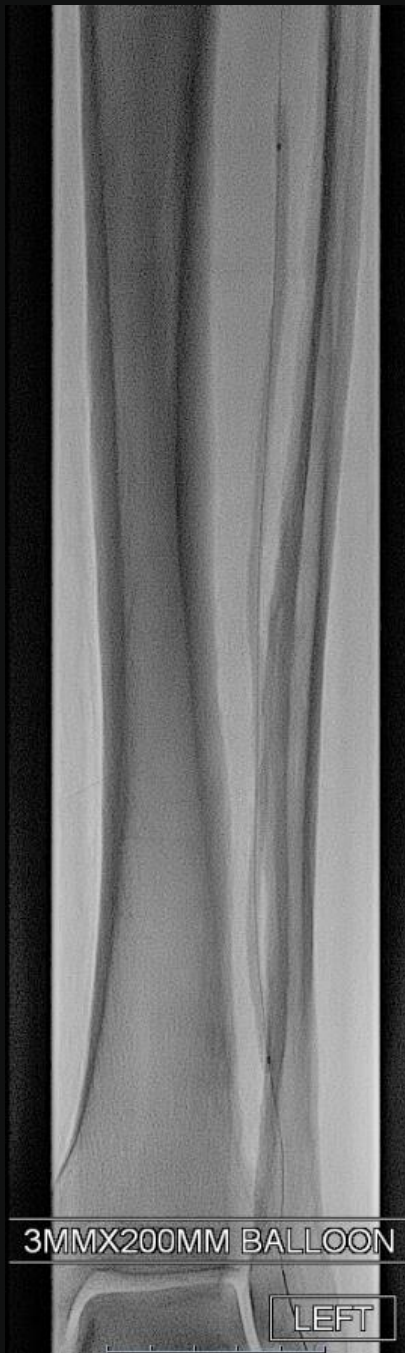
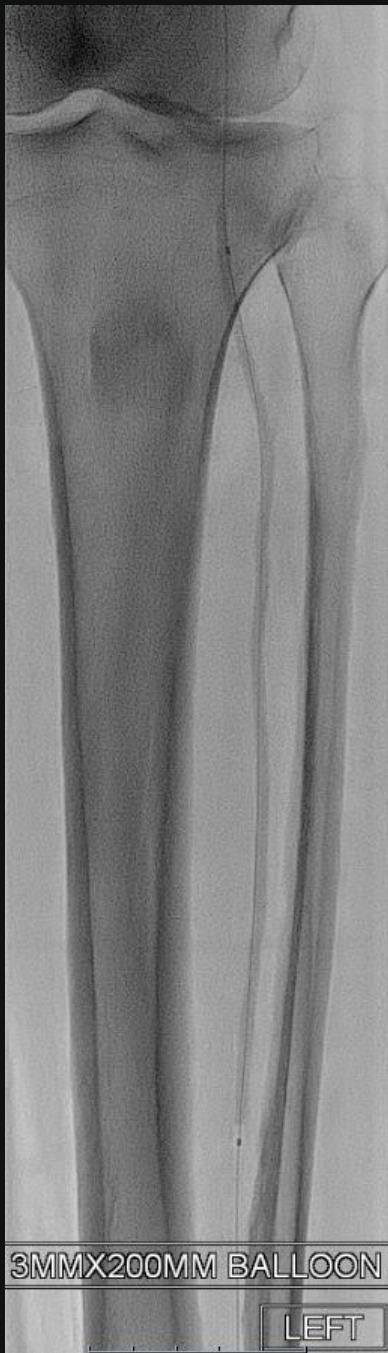


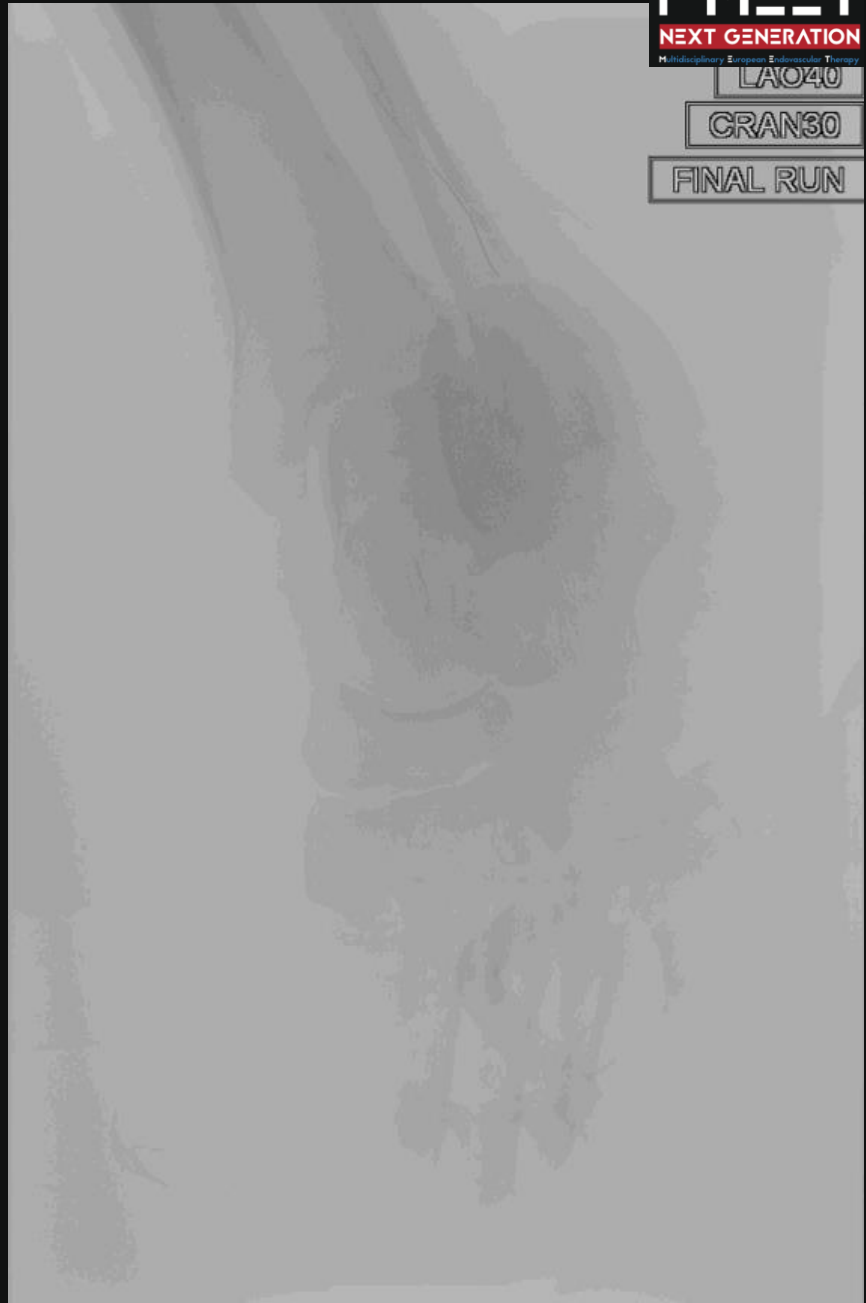
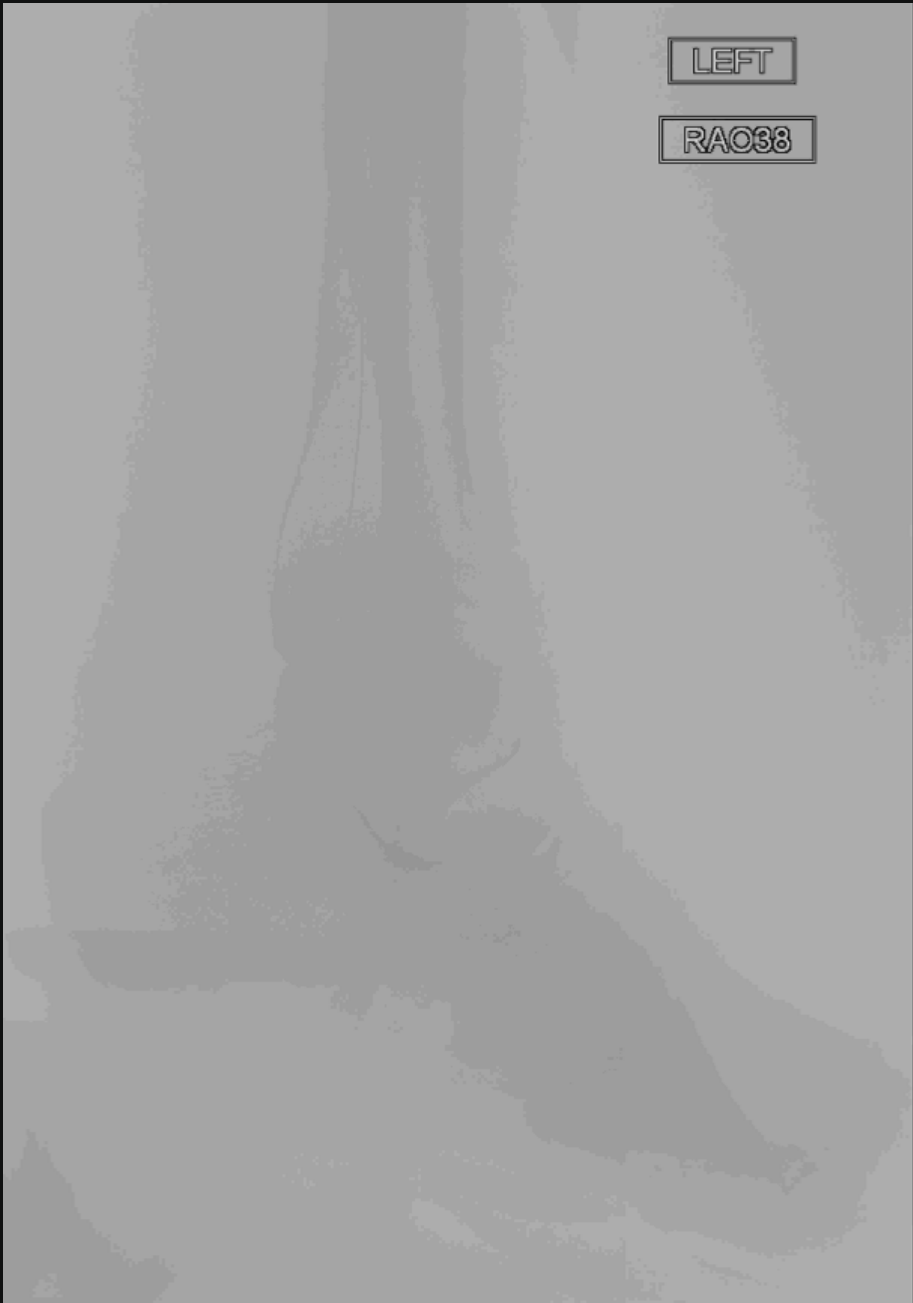
LEFT

RAO33















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**FLOAT
LIKE A
BUTTERFLY
STING
LIKE A
BEE**







THANK YOU FOR YOUR ATTENTION

