

**When Lower Extremity Interventions Are Required In Patients With Prior EVAR Or Kissing Iliac Stents, How Can Contralateral Femoral Access Be Used: Technical Tips**

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MORE HOT NEW TOPICS RELATED TO LOWER EXTREMITY OCCLUSIVE DISEASE, CLTI AND ITS TREATMENTS.  
VEITH SYMPOSIUM 2024 SESSION 22, November 19, 5:36- 5:41 pm.

Nothing to disclose

**Endovascular interventions for peripheral arterial disease in patients with pre-existing endovascular aortic repair utilizing mother-and-child sheath system**

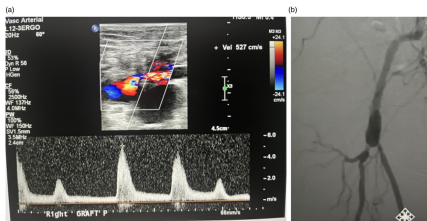
Dipankar Mukherjee, Khashi Rahmani and Benjamin Paolucci

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**CASE PRESENTATION**

- 76 yr old male underwent EVAR for AAA repair in 2006.
- In 2020 underwent successful reversed vein Femoral-Popliteal bypass for ischemic rest pain in the foot .
- In follow up was found to have developed high grade stenosis at the proximal anastomosis as well at the origin of the PFA.
- ABI dropped from 0.6 to 0.4 and patient developed short distance claudication.
- Intervention was planned . Challenges included acutely angulated iliac limbs of the EVAR device with tortuous iliac arteries.
- Sparing a wire from the ipsilateral side to allow a sheath from the contralateral side to come up and over the aortic bifurcation risks disruption the integrity of the EVAR device.
- Additionally have to deal with access on the ipsilateral side which may interfere with planned intervention.

**Pre-Operative Ultrasound Showing Stenosis at proximal anastomosis of femoral popliteal saphenous vein bypass graft.(b) Angiogram showing stenosis at proximal anastomosis of bypass graft and stenosis in proximal profunda femoris.**



Steerable Sheaths. Destino Twist (Oscor) 6.5Fr and Tourguide 6.5 Fr x 45 cm (Medtronic).



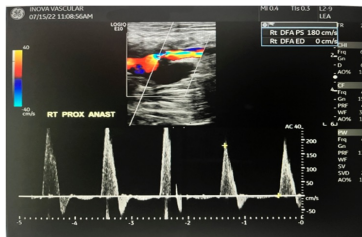
**Steerable sheath over aortic bifurcation with co-axial catheters to engage areas of stenosis in bypass graft and profunda femoris.**



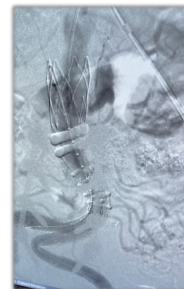
**Completion angiogram demonstrating successful treatment of stenosis at the proximal anastomosis of the bypass graft and profunda femoris.**



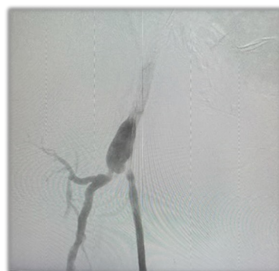
**Completion angiogram demonstrating successful treatment of stenosis at the proximal anastomosis of the bypass graft and profunda femoris.**



**Pre-existing EVAR with downstream graft stenosis**

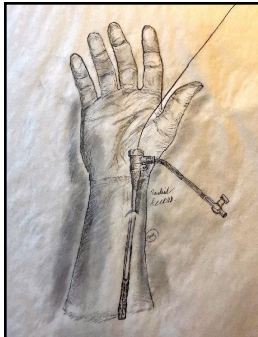


**Angiogram showing critical stenosis at proximal anastomosis of femoral Popliteal saphenous vein graft**



**Angioplasty by Direct Stick of Vein Graft**






**Radial Access For Graft Stenosis**

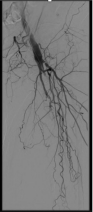
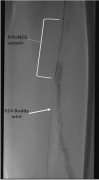
- 5fr Terumo Slender sheath
- 260 length Glide Wire
- 150 Length Terumo R2P sheath
- Cutting Balloon / Regular POBA

**Pedal Access For Graft Stenosis**

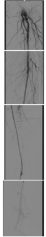
- Cook Pedal Access Micro- puncture set
- 018 and .035 CXI
- 150 cm Length Terumo Glide Wire for crossing.
- Command .014 or .018 wire.
- Cutting Balloon/ POBA



Retrograde pedal access and percutaneous mechanical thrombectomy for salvage of an occluded vein bypass  
 Jayne R. Rice, MD, Louis Darkwa, BS, and Grace J. Wang, MD, Philadelphia, PA; and Chicago, I  
 (J Vasc Surg Cases Innov Tech 2024;10:101510.)

Pounce 0.018-in. wire and 0.014-in. buddy wire in the bypass.



Antegrade angiogram of Left common femoral artery

Final Angiogram

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THANK YOU