Infrapopliteal Stenosis Requiring Proximal and Distal Approach

Amit N. Nanavati MD
Lehigh Valley Health Network, Amit_N.Nanavati@lvhn.org

Adrian C. Bell DO
Lehigh Valley Health Network, Adrian_C.Bell@lvhn.org

Sarang S. Mangalmurti MD
Lehigh Valley Health Network, Sarang_S.Mangalmurti@lvhn.org

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Lehigh Valley Health Network, Allentown, PA

Case Presentation:

- 64 year-old male with a history of bilateral iliac stenting and severe bilateral lower extremity claudication originally presented for pre-operative clearance for femoral-popliteal bypass surgery.
- Severe aortic stenosis with preserved left ventricular ejection fraction was discovered.
- Due to the prohibitive operative risk, percutaneous peripheral revascularization was elected.

Peripheral Angiography:

- Peripheral angiography revealed 100% left infrapopliteal stenosis and 60% left anterior tibial stenosis with vessel reconstitution.
- Atherectomy was attempted on the popliteal lesion via a left femoral (antegrade) approach, however a wire was unable to cross.
- A second distal pedal access was obtained via the left anterior tibial artery with exteriorization of the wire via the femoral sheath.
- An orbital atherectomy device was then advanced via the femoral site and atherectomy performed on the infrapopliteal lesion with subsequent balloon angioplasty. Brisk flow was restored.

Conclusion:

- We believe that entertaining distal access to a lesion unable to be accessed otherwise and exteriorization via a proximal access represents a novel approach to treating peripheral arterial disease.

Disclosures:

Conflict of Interest: No relevant disclosures for this presentation.