Treatment of Iliac Compression Syndrome with Catheter-directed Thrombolysis and Stent Placement: A case report

Division of Cardiology and Catheterization Laboratories, Showa University Northern Yokohama Hospital, Yokohama, Japan

Clinical history:
A 50 year-old woman presented to our institute with a chief complaint of left lower leg edema. computed tomography revealed the compression of the left common iliac vein between the right common iliac artery and the underlying vertebrae, and thrombus at the left iliac vein. A temporary inferior vena cava filter was replaced below the renal vein to prevent pulmonary embolism. In spite of CDT and two times of balloon dilation from left common iliac vein to common femoral vein, thrombus was not dissolved. Finally, we put self-expandable stent (10x60 mm) for left common iliac vein.

Summary:
Recently, CDT and stent placement has become the more effective and reliable method for treatment of with ICS. In this case, CDT was not effective, but stent was fully patent without post-thrombotic syndrome at 1 year follow-up. Venous stent placement for ICS was effective to maintain mid-term patency.