Femoropopliteal angioplasty in patients with severe vascular disease

MOLLON Ana, DINI Andres, TAMASHIRO Gustavo, DE CANDIDO Laura, RIOLO Federico, CARRO Gabriela, TAMASHIRO Alberto. HOSPITAL NACIONAL A. POSADAS. ARGENTINA

Objective: We have analyzed the clinical characteristics, treatment strategy and follow-up in patients (p) who underwent femoropopliteal angioplasty.

Conclusions: Femoro-popliteal angioplasty seems to be an effective and safe treatment for this group of patients who suffered from severe vascular disease. These patients reached a high rate of symptomatic relief during the follow-up and also high limb salvage rate. The patients treated with DCB needed less or no reintervention at all.

Methods: A retrospective, descriptive and longitudinal study of 95 consecutive patients with chronic ischemia (Rutherford 3 to 6) in femoropopliteal territory conducted between January 2012 and July 2016. Angiography characteristics, Rutherford classification improvement, limb salvage rate and clinical follow-up were analyzed. Technical failure was defined as a residual stenosis of >30%. Clinical success was defined as clinical improvement evaluated following the Rutherford classification. Major amputation was defined as an amputation above the ankle. The results are shown as mean ± 2STD for the continuous variables and as percentage for categorical variables.

Results: One hundred fifteen limbs (L) were treated in 95 patients (P) and the mean follow-up (FU) was 23.7±3.3 months. Clinical characteristics: 65 % were men (62/95 p), mean age 64 years (± 22.6), 70% (67/95 p) had diabetes, 77% (73/95 p) hypertension, 58% (55/95 p) dyslipidemia and 79% (75/95 p) were smokers. Treated Arteries: Superficial Femoral: 94/115L and Popliteal 54/115L. Both in 28.7 % of the P.

Total occlusion >5 cm: 37%, and < 5cm: 7%. The severe lesions were 56%(64/115L), the mean lesion length was 12.3 cm. Technical Failure: 4 patients (2.7%). Successful complete revascularization: 111 limbs out of 115 were achieved. Clinical success: 83% (96 /115 limbs). The major amputation rate was 8% (9/115 limbs) and all of these patients suffered from critical limb ischemia. The mortality rate was 4.2%. The clinically driven target lesion revascularization (TLR) was 12% (14/115 limbs). When we analyzed the re-stenosis that needed revascularization we found out that 12/14 were stents and 2/14 plain balloons.

Conclusions: Femoro-popliteal angioplasty seems to be an effective and safe treatment for this group of patients who suffered from severe vascular disease. These patients reached a high rate of symptomatic relief during the follow-up and also high limb salvage rate. The patients treated with DCB needed less or no reintervention at all.