Case presentation

Hiroshi Ando, MD

Heart Center,
Kasukabe Chuo General Hospital
Saitama, Japan
Disclosure

Speaker name: Hiroshi Ando

I have the following potential conflicts of interest to report:

- Consulting
- Employment in industry
- Stockholder of a healthcare company
- Owner of a healthcare company
- Other(s)

✔️ I do not have any potential conflict of interest
Case: Male 71y.o.

Lt. CFA, DFA stenosis, SFA, ATA, PTA occlusion

Clinical data:
- PAOD, Rutherford 5, Lt. 4th, 5th toe gangrene
- ABI: 0.45
- SPP: Rt. D 9/P 10mmHg
- DM
- old CVD
- Former smoker
Control Angiography
CFA, DFA Endoarterectomy
F-P bypass
Control Angiography
BAD FORM Technique

0.014inch Regalia
What shall I do?
After passing the wire, no device can pass through the lesion!

- Low profile balloon
- Microcatheter
- Tornus PV®
- Additional wire (Crusade PV®)
- Crosser®
- Rotablator®
- GuideLiner®
- Subintimal passage
- Needle cracking technique
- Brockenbrough needle
- Excimer laser
- Tag of wire
- BAD FORM Technique
Rota floppy  1.25 mm barr
Completion Angiography
Where there’s a will there’s a way!

Thank you for your attention.
Case presentation

Hiroshi Ando, MD

Heart Center,
Kasukabe Chuo General Hospital
Saitama, Japan