Hybrid procedures for the management of deep vein obstructions

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Disclosure

Speaker name: Houman Jalaie

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
Introduction
Indication/Contraindication

• symptomatic obstruction in iliofemoral and caval level with involvement of CFV covering the ostium of deep femoral vein

• severe impairment of inflow (trabeculation in VF and DFV)
Diagnostic

postthrombotic trabeculation

poor Inflow from DFV

adequate inflow from DFV
Diagnostic

pre op. MR-venography
Procedure

- Recanalization of CFV, EIV and CIV
- Endophlebectomy of CFV
- Patch closure
- av-fistula creation (PTFE, loop shape)
Procedure

Endophlebectomy of CFV
Procedure

Endophlebectomy of CFV
## Patient characteristics

<table>
<thead>
<tr>
<th>Patients Legs</th>
<th>70</th>
<th>74</th>
</tr>
</thead>
<tbody>
<tr>
<td>sex</td>
<td>44 (63%) female</td>
<td></td>
</tr>
<tr>
<td>age</td>
<td>39 (18-75)</td>
<td></td>
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<tr>
<td>Thrombophilia</td>
<td>76,9%</td>
<td></td>
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<tr>
<td>Venous claudication</td>
<td>64 (91%)</td>
<td></td>
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<tr>
<td>one DVT</td>
<td>47 (67%)</td>
<td></td>
</tr>
<tr>
<td>two or more DVTs</td>
<td>22 (31%)</td>
<td></td>
</tr>
<tr>
<td>Years after DVT</td>
<td>5 (1-41)</td>
<td></td>
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<tr>
<td>Bilateral (CVO)</td>
<td>14 (20%)</td>
<td></td>
</tr>
<tr>
<td>Involvement of IVC</td>
<td>17 (24%)</td>
<td></td>
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</tbody>
</table>
Results

- **Patency**
  - primary 61.4%
  - ass. primary 78.6%
  - secondary 87.1%

- **Clinical improvement (subjective)**
  - yes 81%
  - no 19%

- Median VCSS (12 months) 11 > 5
- Median Villalta (12 months) 12 > 4
- Improvement of venous claudication 74%
- Wound healing disorder 25% (majority szilagyi I°)
Conclusion

• Endophlebectomy of CFV improves the inflow from GSV and DFV

• clinical scores show a significant improvement

• acceptable patency rates

• high rate of wound complications

• respect limits of recanalization > > > > severe impairment of inflow
Thank you for your attention

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