

**Case 17 Amagasaki 1:  
male, 63 years (K-O)**

**Long SFA flash occlusion of the left  
involving SFA ostium**

**Operators: O. Iida, Y. Hata, T. Toyoshima**

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- **Clinical data:**
  - **PAOD Rutherford 3, walking capacity 100m, ABI left 0.66**
  - **Previous bilateral iliac stenting (bare metal stent) 09/2007**
  - **Referred for bilateral claudication last month**
  - **Previous angioplasty (drug coated balloon) for right SFA stenosis and plain angioplasty for left EIA stenosis 2 weeks before**

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- **Risk factors:**
  - Arterial hypertension
  - type II diabetes
  - Dislipidemia
  - current smoker
- **Angiography:**
  - Left SFA occlusion involving ostium site

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- **Procedural steps:**
  - **1. Right femoral cross-over approach**
    - Judkins Right 5F diagnostic catheter (GOODMAN)
    - 0.035" Radifocus stiff J-type guidewire 260cm (TERUMO)
    - 6Fr-45cm Destination sheath (TERUMO)
  - **2. Guidewire passage of occlusion by antegrade approach**
    - 0.014" Gladius guidewire 200cm (ASAHI)
    - Prominent standard microcatheter 110cm (TOKAI MEDICAL)
    - 0.018" Treasure guidewire 180cm (ASAHI)
    - 0.035" Radifocus stiff J-type guidewire 260cm (TERUMO) for knuckle wiring

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- **Procedural steps:**
  - 3. Retrograde approach via left posteriotibial artery
    - 0.014" Gladius MG ES guidewire 235cm (ASAHI)
    - Ichibanyari PAD microcatheter 60cm (KANEKA)
  - 4. IVUS evaluation for vessel size and wire route
    - Alta view IVUS (TERUMO)
  - 5. Vessel preparation/PTA
    - 6.0-7.0 mm Ultraverse (BARD/BD)
  - 6. Evaluation by angio/IVUS and PTA with DCBs
    - Lutonix (BARD/BD)
  - 7. Provisional stenting with severe dissection