

Case 23 Kingsport 1

male, 61 years

MPB

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- **Clinical Data:**
 - severe calcified PVD
 - s/p complex intervention LCFA, LPFA, ostial L SFA and distal L SFA CTO 2015 (shown)
 - Now with severe claudication @ 50 feet
 - R>L
 - some rest pain
 - no ulceration
 - Severe symptoms on aspirin, clopidogrel, cilastazol 100mg BID, atorvastatin 80 mg daily
 - Exercise ABI's: R 0.58→0.19, L 0.6→0.3

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- Risk factors:
 - NIDDM
 - Htn
 - long standing tobacco 60+ pack years
 - Obesity
 - +Family History
 - dyslipidemia

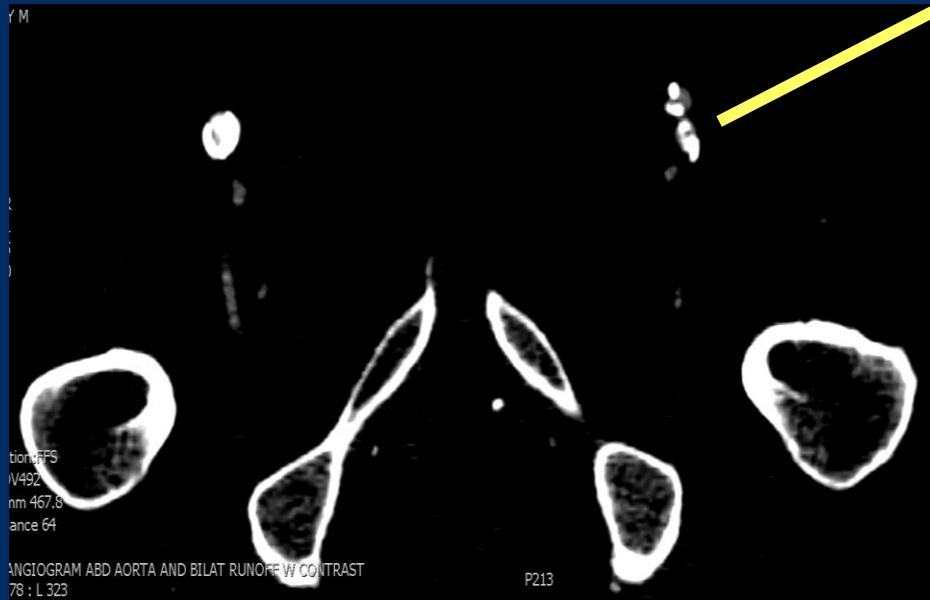
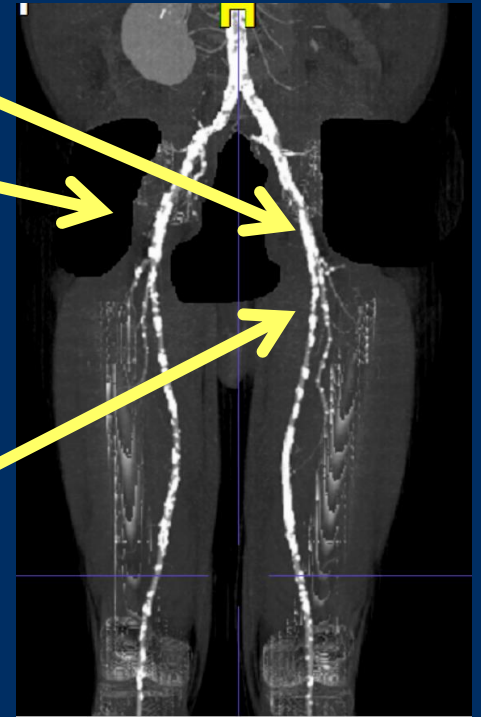
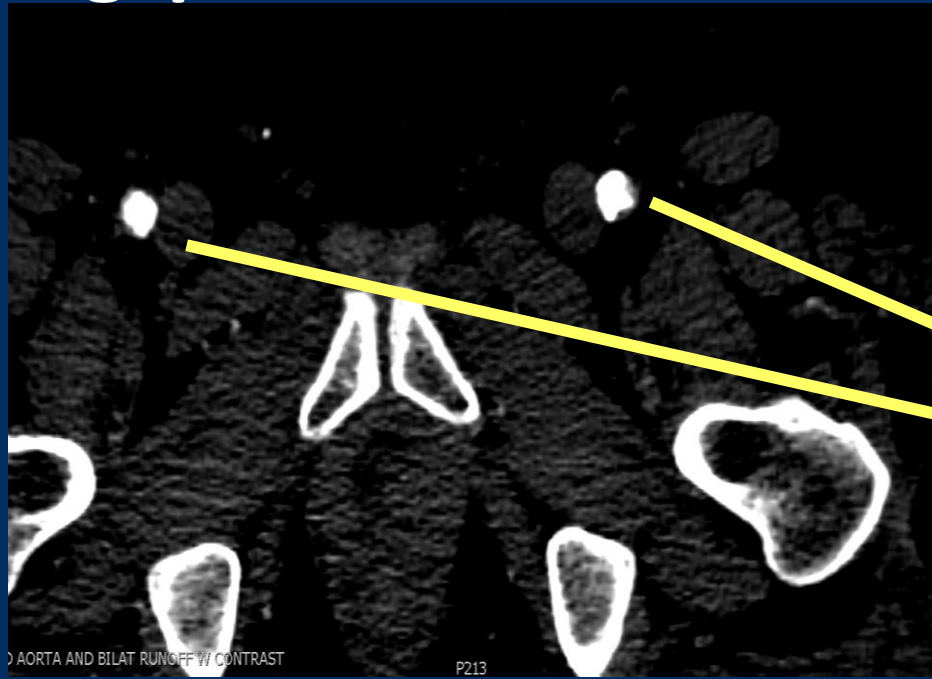
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- **CTA (shown) :**
 - severe CA++ common femoral artery disease bilaterally
 - L SFA stent patent
 - moderate CA++ SFA/popliteal disease
- **Angiograms (shown):**
 - severe B CFA dz

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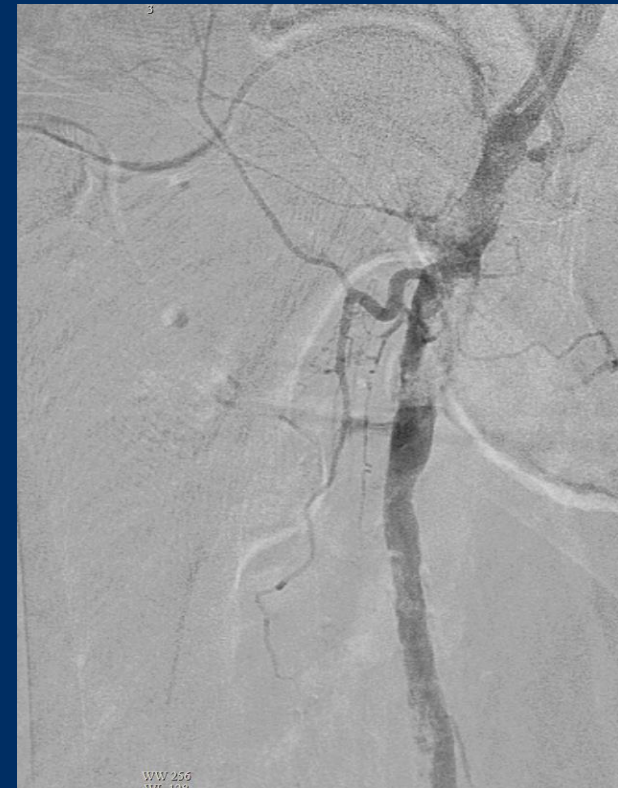
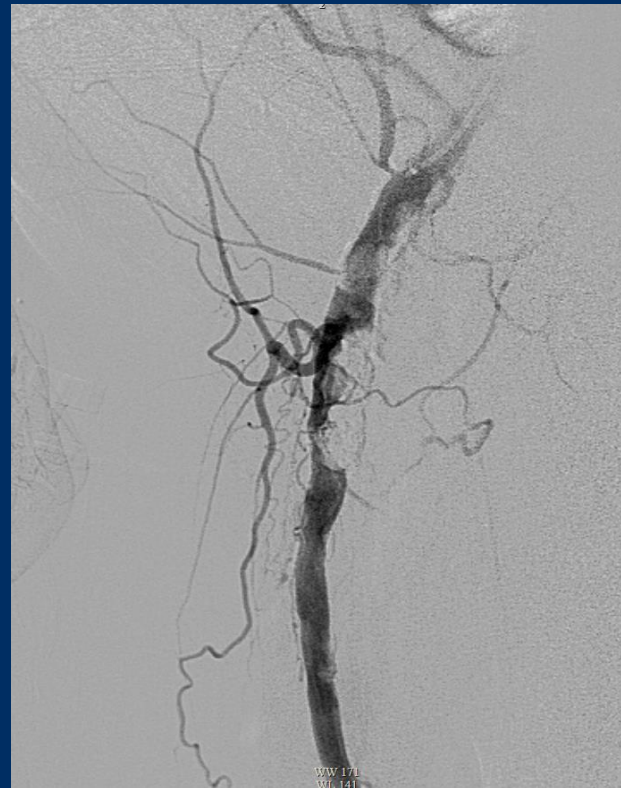
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Left Common Femoral Artery



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Right Common Femoral Artery



NOTE: R Profunda fills via collaterals

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- **Procedural steps:**
 - Panel discussion
 - followed by calcium- specific treatment strategy for treatment of bilateral severely calcified common femoral arteries in an extremely symptomatic patient