The role of advanced imaging in CLTI

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Disclosure

Speaker name: K Stavroulakis

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
When it all started..
But.. we pretty much do the same..
But how reliable is an angiogram?

Angio: Patent vessel

Pathology: 40% Stenosis

When angio fails
When angio fails
IVUS for CLTI treatment

Crossing  Plaque Morphology  Sizing  Guide treatment
CTO Crossing

Diagnostic Angiogram

Antegrade/Retrograde Crossing
CTO Crossing: Subintimal?
Plaque evaluation
The IVUS VS visual estimation project
Femoropopliteal Vessels

<table>
<thead>
<tr>
<th>Location</th>
<th>DSA (mm) (median)</th>
<th>IVUS (mm) (median)</th>
<th>P-value*</th>
</tr>
</thead>
<tbody>
<tr>
<td>Proximal Superficial Femoral</td>
<td>5.5</td>
<td>6.1</td>
<td>0.0001</td>
</tr>
<tr>
<td>Mid Superficial Femoral</td>
<td>5.0</td>
<td>5.9</td>
<td>&lt;0.0001</td>
</tr>
<tr>
<td>Distal Superficial Femoral</td>
<td>4.8</td>
<td>5.9</td>
<td>&lt;0.0001</td>
</tr>
<tr>
<td>Proximal Popliteal (P1)</td>
<td>5.0</td>
<td>5.8</td>
<td>&lt;0.0001</td>
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<tr>
<td>Mid Popliteal (P2)</td>
<td>4.5</td>
<td>5.6</td>
<td>&lt;0.0001</td>
</tr>
<tr>
<td>Distal Popliteal (P3)</td>
<td>4.0</td>
<td>5.3</td>
<td>&lt;0.0001</td>
</tr>
</tbody>
</table>

Pliagas et al JIC in press
IVUS Guided treatment
IVUS Guided treatment
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Conclusions

Still angiogram-based therapy

IVUS can be a valuable tool in order to:

• Assess plaque/lesion morphology

• Guide and control the selected treatment option

• Improve the acute and long term results
Thank you!
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