Results of endovascular treatment of superior and inferior vena cava at mid-term follow-up (up to 65 months)

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Disclosure

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☐ I do not have any potential conflict of interest
Baseline

- June 2013-August 2019
- 52 patients with superior or inferior vena cava obstruction
- Patients age from 20 to 81 years old, mean age 55 years old

Complete occlusion 30.8% or 16pts
Mean stenosis is 90%

Number patients

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<thead>
<tr>
<th>Superior vena cava</th>
<th>Inferior vena cava</th>
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<td>41</td>
<td>11</td>
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Most of the patients had carcinoma (lung, pancreatic, mediastinal) with most of them with short life expectancy and the procedure was palliative to ameliorate the cava syndrome.
Successful procedures were 97.8%  
- Balloon predilatation - 48%  
- Stent placement – self expandable stents (Sinus XL, Protégé, Abre)  
- Balloon postdilatation - 54%  

Two major complications (3.8%)  
- Thrombus migration causing pulmonary embolism  
  Both of them treated endovascularly with thrombus fragmentation, local fibrinolysis and aspiration
Results

- All patients had relief of vena cava syndrome
- All patients were clinically followed up – up to 65 months
- Median follow up period was 1 month (30-1950 days)
- CT – scan or Doppler ultrasound follow up was done in 59.6% of patients

We had 7% restenosis rate (2 patients) – both had successful re-interventions.

Stent patency was 93%.
Conclusion

• Endovascular treatment with stent implantation for superior and inferior vena cava syndrome is a minimal invasive and safe procedure with favorable clinical effect and satisfactory mid-term result.
Thank you for your attention
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