Different ways of successful bail out from thrombotic occlusion of VIABAHN stents implanted in SFA CTO lesion

67 y.o. female, HD, DM
Left IC for several weeks
MRA; complete occlusion of two 5.0/150mm VIABAHN stents implanted in left SFA CTO lesion 3 months ago.

Thrombolysis using Fountain catheter with urokinase 240,000 U bolus injection followed by urokinase 240,000 U per day infusion for 3 days
Ad POBA
SHIDEN HP 5.0*40 mm to lt SFA VIABAHN Coyote 4.0*100 mm to lt POP

Different ways of successful bail out technique (thrombolysis, thrombus aspiration, thrombectomy) for thrombotic occlusion of VIABAHN stents implanted in SFA CTO lesion in the same patient

Same symptoms 16 months later
Echography; complete occlusion of two VIABAHN stents

Thrombus aspiration with 6F Rebirth pro2, following thrombolysis using Fountain catheter with urokinase 120,000 U bolus injection followed by urokinase 240,000 U per day infusion for 2 days

Still complete thrombus occlusion
→Thrombus aspiration with 6F TVAC
→Thrombectomy using 4mm balloon like Fogarty catheter
→Thrombus aspiration using GOGO catheter (5.5F straight catheter)

complete thrombus removal !!!!

LIFESTENT 6.0/80mm in the distal edge of VIABAHN stent, following balloon dilatation from proximal edge of VIABAHN stent to POP lesion

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