A 85-yr-old woman presented with right-sided weakness, abdominal pain and right foot pain
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Case Summary:
85 years old female, DM(+), HTN(+)
Visited the ER with right-side weakness, abdominal and right foot pain ass. with foot drop.
→ Admitted to neurology department initially
→ Contacted to cardiology at 10 days.

1st intervention
SFA & Popliteal – Jetstream + PTA
Pedal embolus: - Suction + PTA

2nd intervention at one month: Recurred pain
TP trunk stenosis
Dorsalis stenosis
2.0x30mm balloon
3.0x30mm balloon
2.5x40mm & 2.5x150mm balloon
2nd PTA; Final popliteal and pedal

3rd intervention at 4 months: Re-recurred resting pain
Reocluded
SFA, TP & Dorsalis
Surface USG-guided intraluminal wire passage
Reoccluded SFA, TP & Dorsalis
SFA CTO; AART
TP CTO: Pedal loop access
Final angiogram

Clinical course after 3rd intervention
The leg pain and the sensory were all improved. The foot drop was improved, and the activities without aids were possible.
To improve patient’s symptoms and QOL, appropriate interventional strategies to overcome various anatomical problems should be applied.