**Endovascular Management of Acute Ischemia Secondary to Antiphospholipid Syndrome That Associates Severe Hematological Disorders**

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**Purpose**

The antiphospholipid syndrome is an acquired thrombophilic disorder characterized by *thrombotic phenomena* at multiple levels, associating clinical manifestations of another type, *mainly hematologic*<sup>a</sup>, forcing us to employ minimally invasive techniques to solve the ischemic situation.

**Methods**

A 66-year-old woman who goes to the emergency unit due to an acute ischemia of the left lower limb of one week of evolution and dyspnea of sudden appearance in the last 24 hours. The CT-angio confirms *bilateral pulmonary thromboembolism*<sup>b</sup> and *thrombotic occlusion of the left popliteal artery* with patency of distal trunks.

The laboratory test detects severe *anemia* and *thrombopenia*, in addition to and *elongated prothrombin rate* despite she wasn’t taking anticoagulants. Due to its hematological disorders and to avoid the complications that an open surgery would suppose, we decided to use a *percutaneous thrombectomy system* to solve the arterial ischemia.

Under local anesthesia we punctured the left common femoral artery. We managed to cross the occlusion with a 0.014 wire supported on a hydrophilic catheter and then the clot was aspirated. Final angiography revealed *patency of the treated sector* and *no distal embolization* was observed.

**Results**

The patient recovered *pedal pulse* with disappearance of the ischemic clinic. Analytical and clinical studies confirm the suspicion of *Antiphospholipid Syndrome* associated with Evans Syndrome.

**Conclusions**

The use of percutaneous thrombectomy systems allows a *quick, safe and efficient approach*, reducing the rate of complications in *patients at high risk for bleeding*, being an alternative to an open technique.