

A Treatment Algorithm for Acute Mesenteric Ischemia

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Dutch Mesenteric Ischemia Study Group

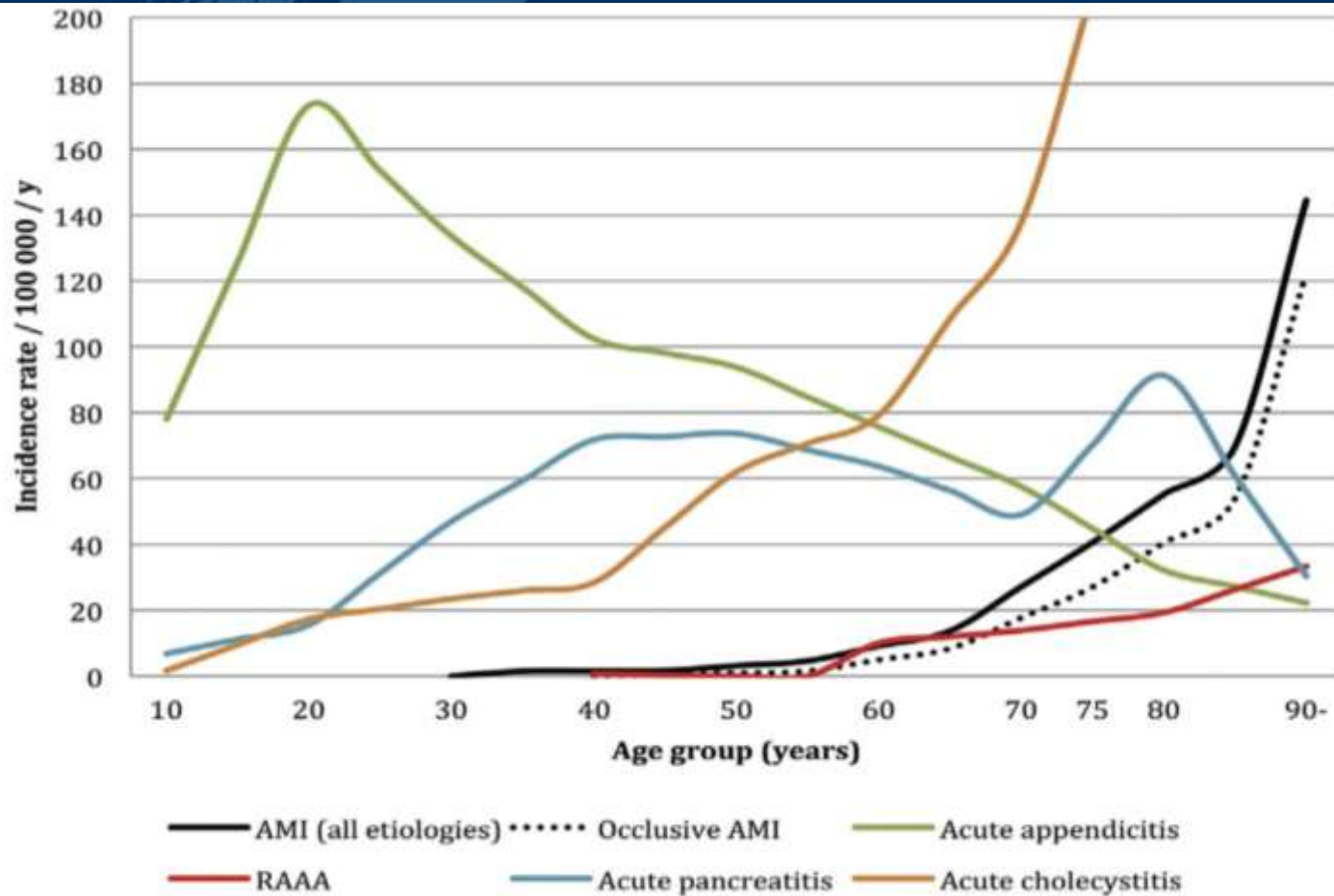
Disclosure

Speaker name:

Olaf J. Bakker

X I do not have any potential conflict of interest

Acute Mesenteric Ischemia; incidence



Acute Mesenteric Ischemia

- Around 1% of pts with acute abdomen
- > 70 yrs, 10% of pts with acute abdomen
- Mortality > 20%
- Swift diagnosis and treatment paramount
- Clinical presentation varies & evidence is lacking....



Plenty of room for discussion

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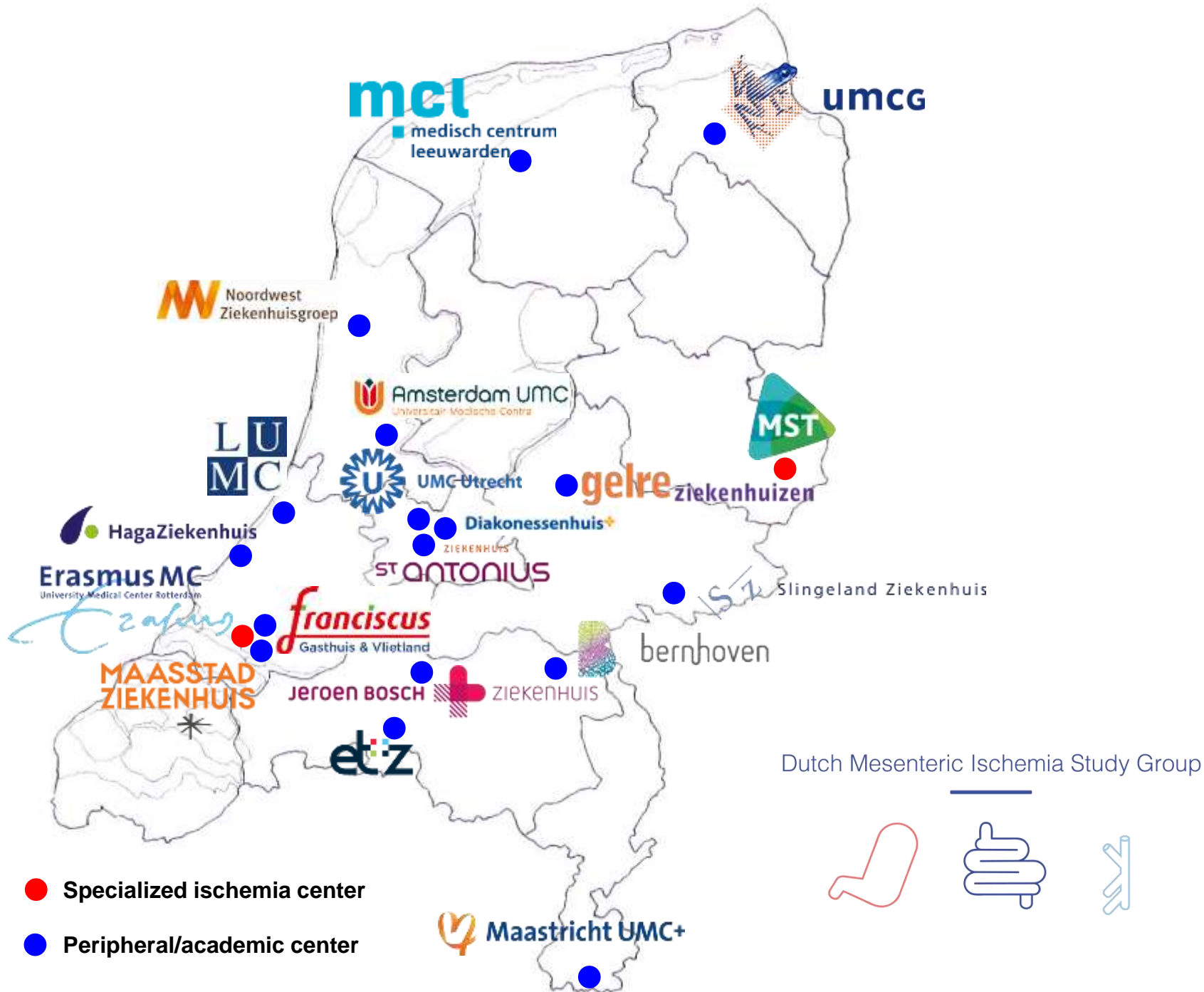
DMIS

Dutch Mesenteric Ischemia Study Group



- Nationwide multidisciplinary research group
- Founded in 2015
- Goal:
 - Improve diagnostics
 - Improve therapy
 - Improve care
- Most important features:
 - Multidisciplinary collaboration
 - Multicenter studies & publications & protocols

} Scientific research,
consultation and
centralization



Timely diagnosis of AMI

Biomarkers or CTA?

	Sensitivity (95%CI)	Specificity (95%CI)
L-lactate	86%	44%(32-55)
D-dimer	96% (89-99)	40%(33-47)
CT	94%(90-97)	95%(93-97)

Lactate is too late!

Endo or open?



Figure 3. Meta-analysis of bowel resection rates after open and endovascular therapy of AMI.



Figure 4. Meta-analysis of 30-day mortality rates after open and endovascular therapy of AMI.

AMI: endo first strategy!

- Mesenteric stenting (PMAS) preferred method
- Adjunctive thrombolysis if necessary
- Thrombectomy devices promising

Thrombectomy Devices in the Treatment of Acute Mesenteric Ischemia: Initial Single-Center Experience

Bruno Freitas,^{1,2,3} Yvonne Bausback,¹ Johannes Schuster,¹ Matthias Ulrich,¹ Sven Bräunlich,¹ Andrej Schmidt,¹ and Dierk Scheinert,¹ Leipzig, Germany, Arapiraca and Alagoas, Brazil

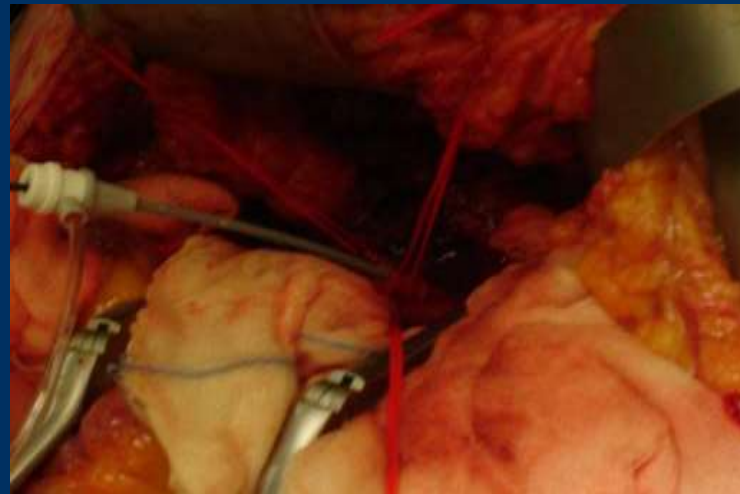
AMI: endo first strategy!

- 20 patients
- High technical success rate
- Short procedure time
- 2 minor device related complications

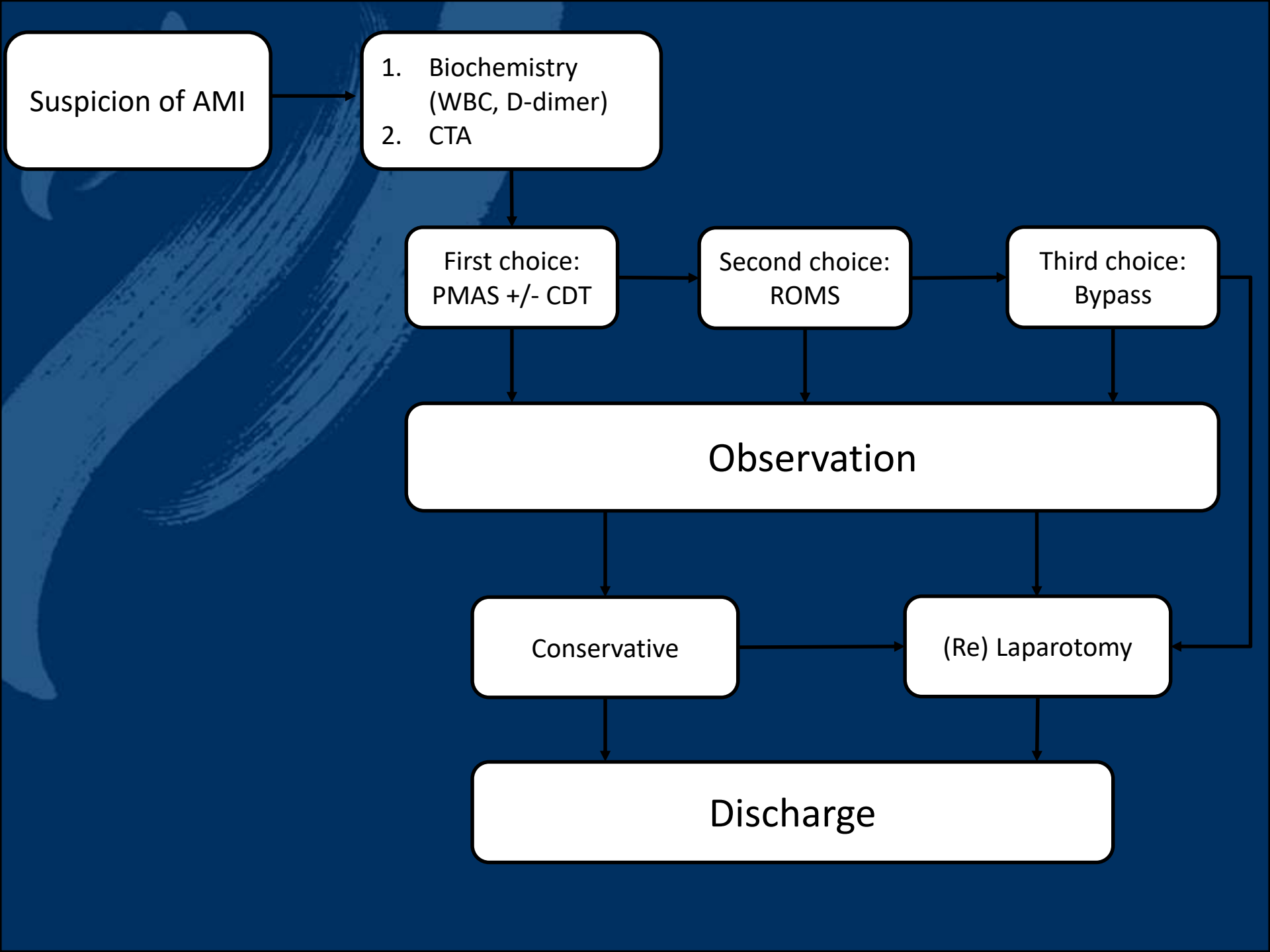


If PMAS fails...

- ROMS: Retrograde Open Mesenteric Stenting
- Several retrospective series report high technical success rates¹⁻³



¹Oderich J Vasc Surg 2018; ²Roussel J Vasc Surg 2019; ³Blauw J Vasc Surg 2014



Suspicion of AMI

1. Biochemistry (WBC, D-dimer)
2. CTA

First choice:
PMAS +/- CDT

Second choice:
ROMS

Third choice:
Bypass

Observation

Conservative

(Re) Laparotomy

Discharge

Acute Mesenteric Ischemia

- Lack of evidence
- High mortality, swift diagnosis & Rx crucial
- Endo first strategy
- Thrombectomy devices promising
- ROMS good option before bypass
- New evidence coming from DMIS....

Covered Stents versus Bare-Metal Stents in Chronic Atherosclerotic Mesenteric Ischemia



VS.



Inclusion completed Results expected in 2021

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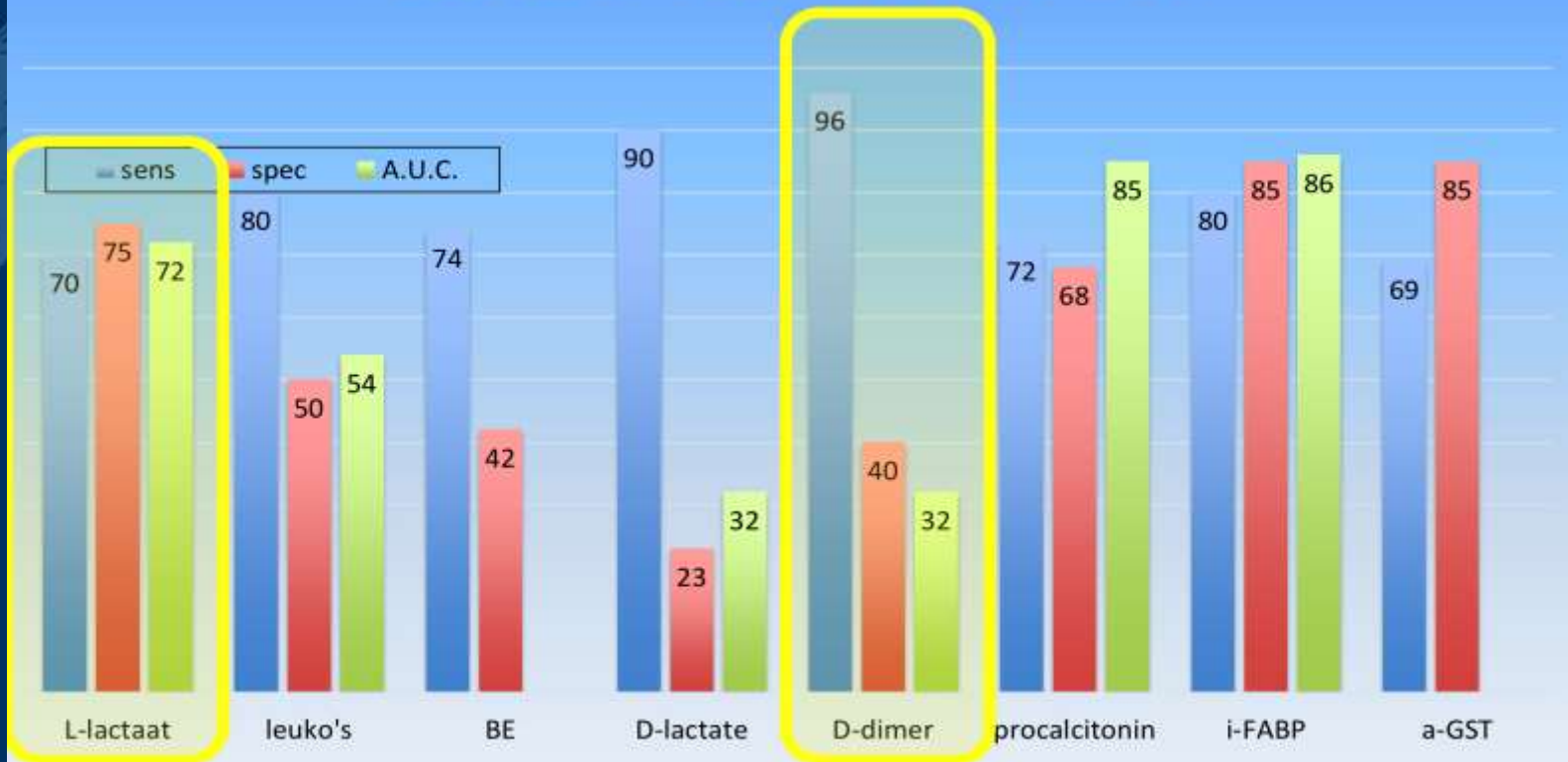
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Serum Markers in AMI

serum markers AMI



Derikx JP, Schellekens DH, Acosta S.
Best Pract Res Clin Gastroenterol. 2017;31(1):69-74.



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