

2018 | euro
PCR

Interwoven nitinol stents for popliteal aneurysm treatment

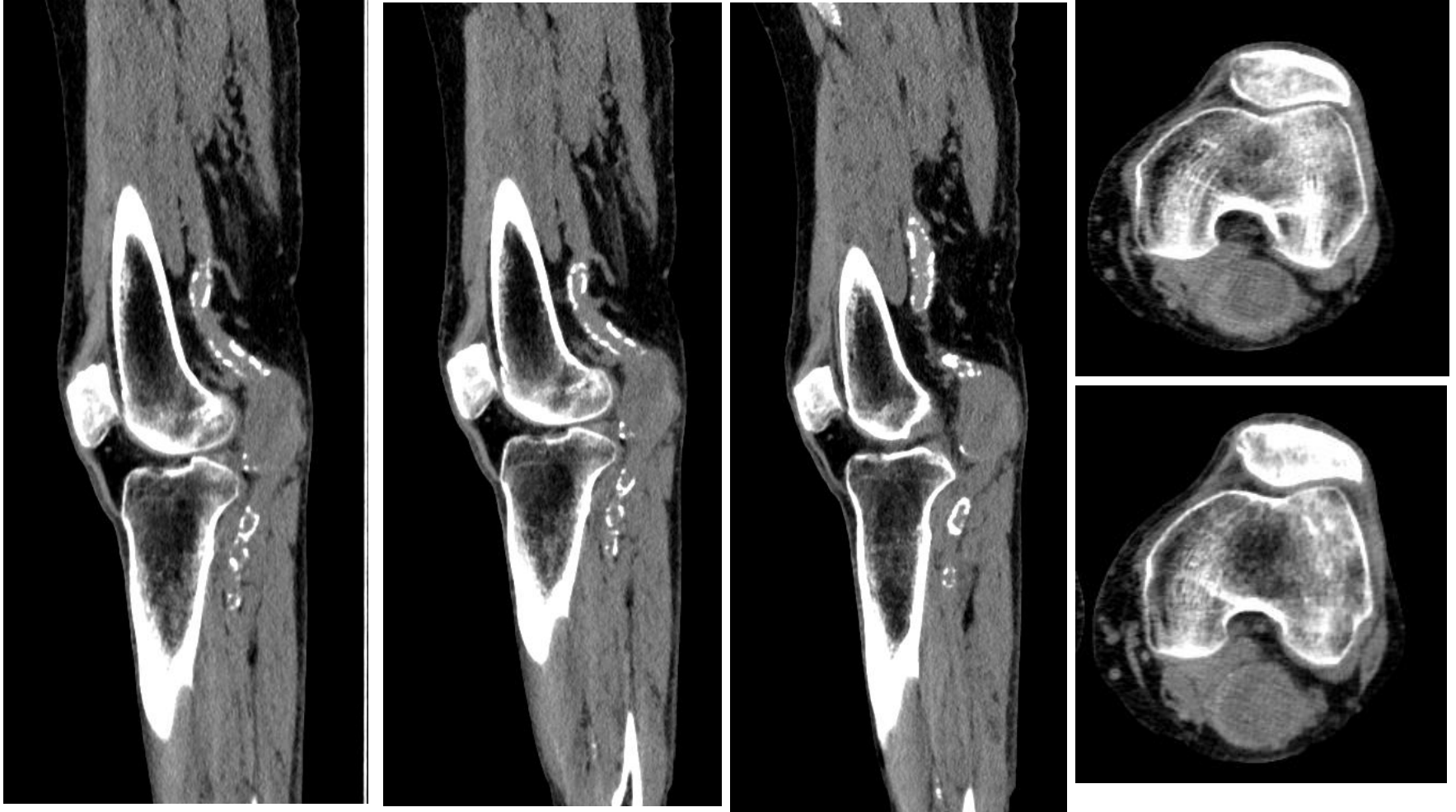
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I do not have any potential conflict of interest

- **90-year-old man**
- **Clinical presentation:** Pulsatile tumor in popliteal hollow
- **Cardiovascular risk factors:** hypertension, dyslipidemia.
- **Background:** definite pacemaker, permanent atrial fibrillation, endovascular abdominal aortic aneurysm repair with posterior need for surgery due to endoleak.
- **Medication:** warfarin, rosuvastatin, enalapril, amlodipine, bisoprolol, aspirin
- Patient refuse surgery

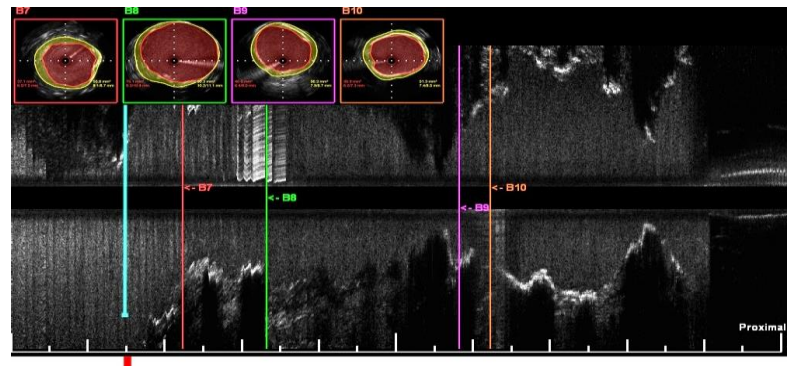
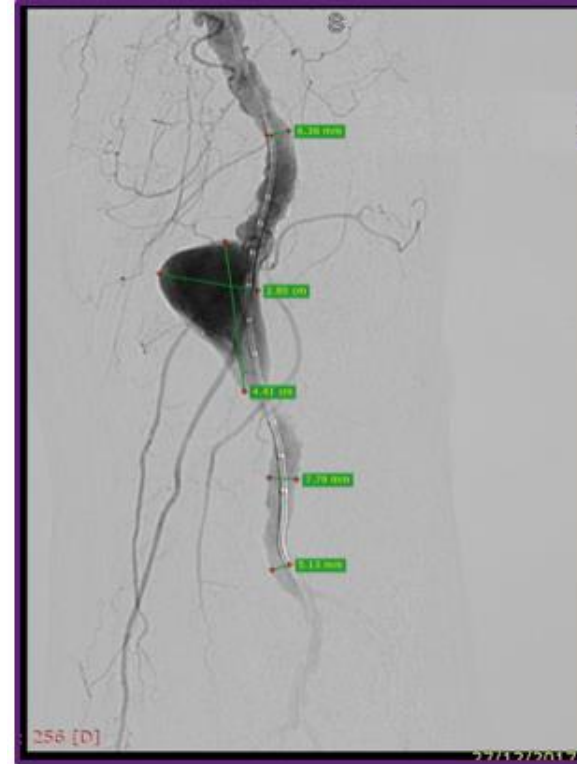
CT angiography



Considerations

- ✓ *Life expectancy at age 90 is around 4 years.*
- ✓ *Thrombosis and distal embolization of a popliteal aneurysm occurs in 30 to 75% at 5 years from the diagnosis*
- ✓ *Surgery is riskier in the nonagenarians (morbi/mortality, neuro-cognitive complications)*
- ✓ *Covered or multilayer stents have been used. Non-specific design for popliteal artery: dislocation, diameter mismatch, fracture.*
- ✓ *A double layer of Supera stent, a stent dedicated to femoropopliteal segment, may create a dense mesh that works as a flow diverter stent*

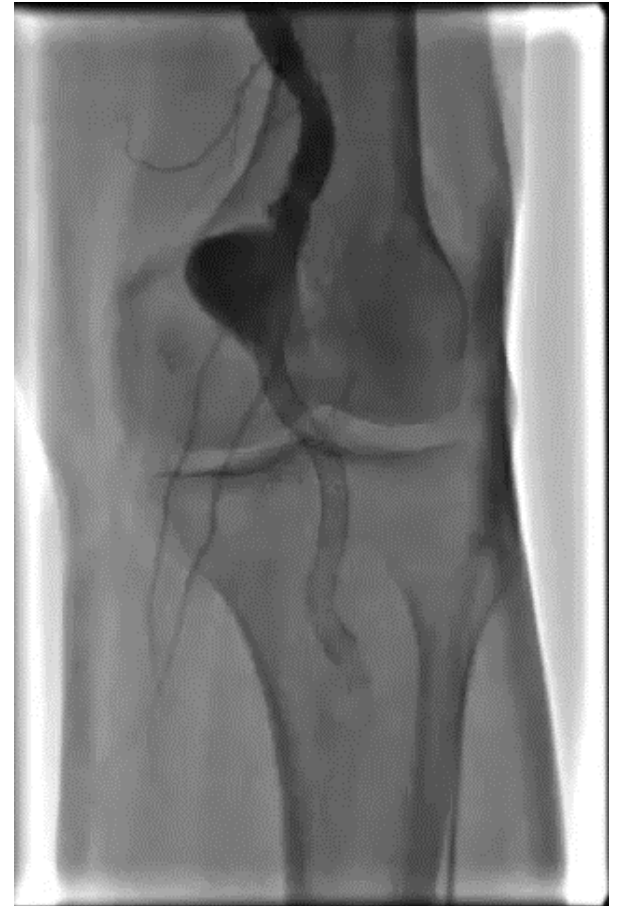
Sizing by angio and IVUS



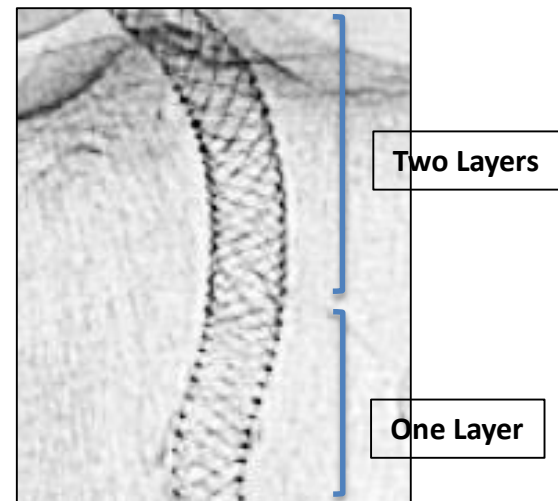
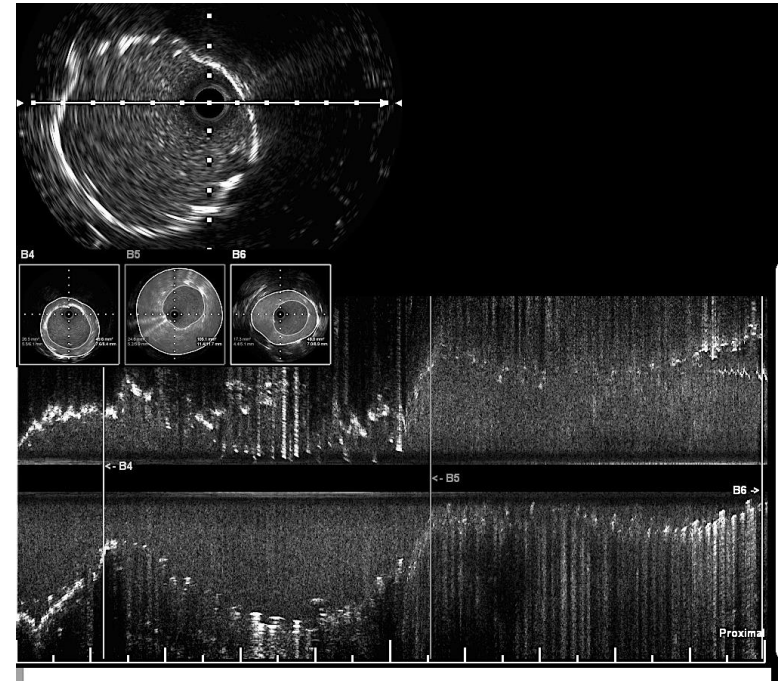
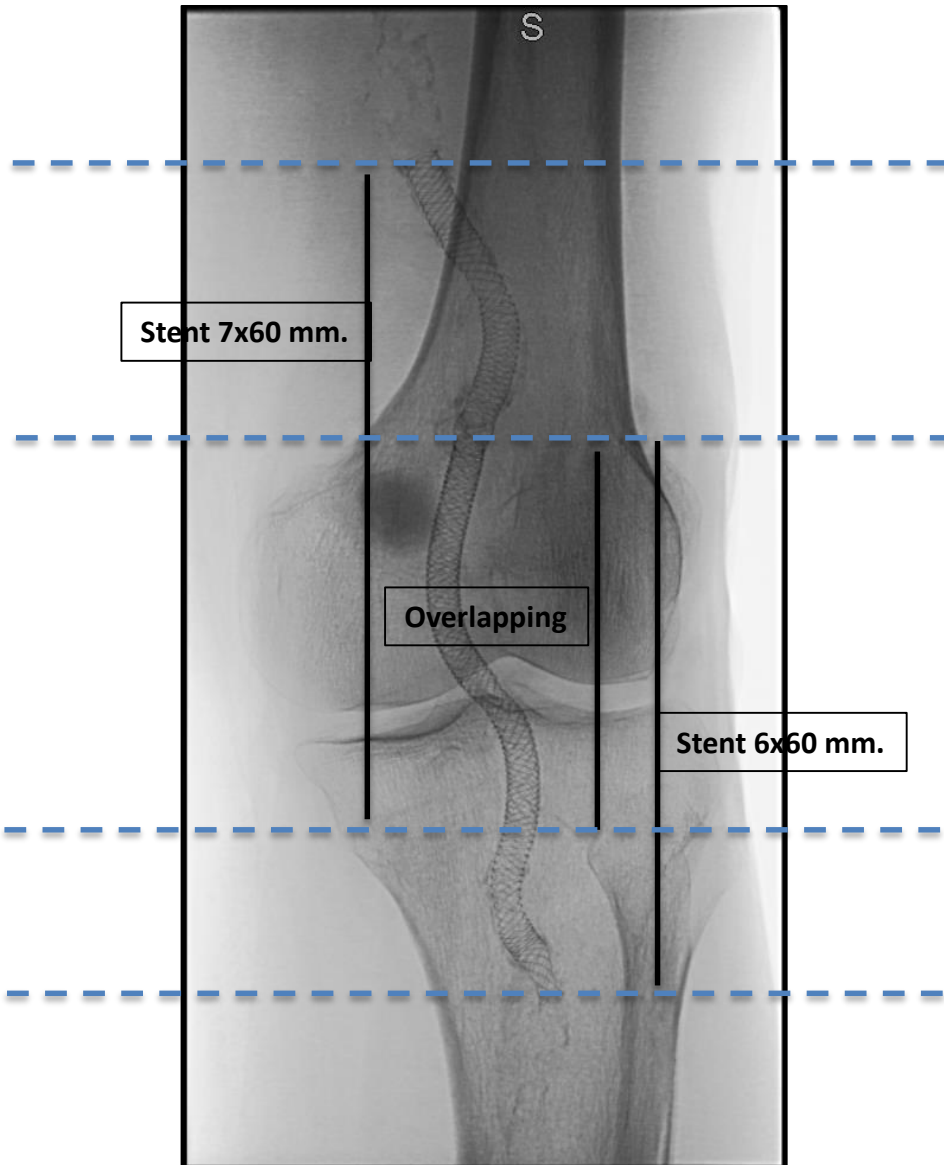
Stents Implantation



Post implanting angiography



IVUS-controlled stents implantation

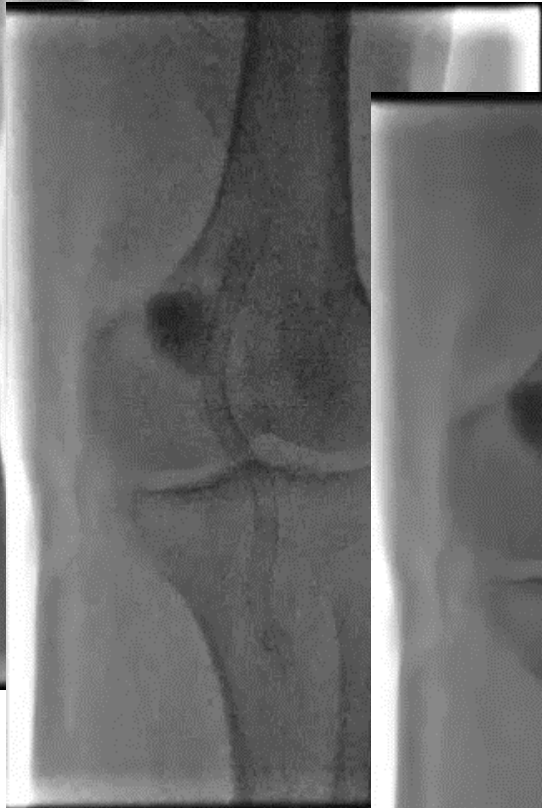


Intra aneurysm stasis

3'



5'



7'



9'



45-day follow-up Doppler

