



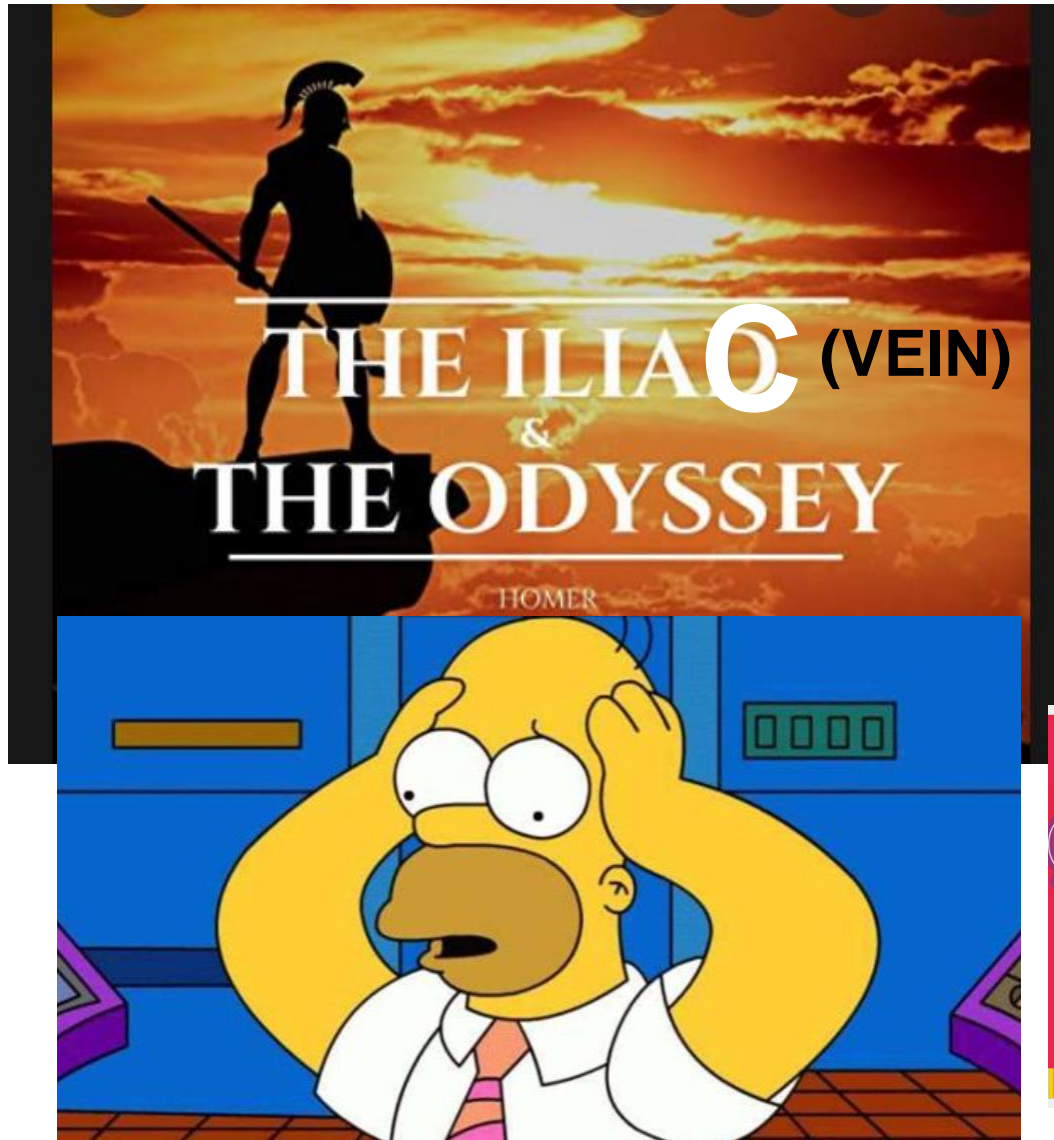
L'École Izzo est une école d'apprentissage de la survie en milieu naturel.

L'apprentissage de la bonne utilisation du fouet y est enseignée.

L'école Izzo enseigne également différentes méthodes et techniques de survie : construction d'abris, épuration de l'eau, méthodes d'allumage du feu et bien d'autres activités encore.

Pour plus de renseignements, rendez-vous sur [le site de l'École Izzo](#).

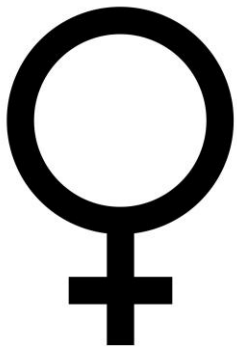




**Jean Marc PERNES**  
**Dionisys PONGAS**

**Hôpital Privé Antony**  
**FRANCE**





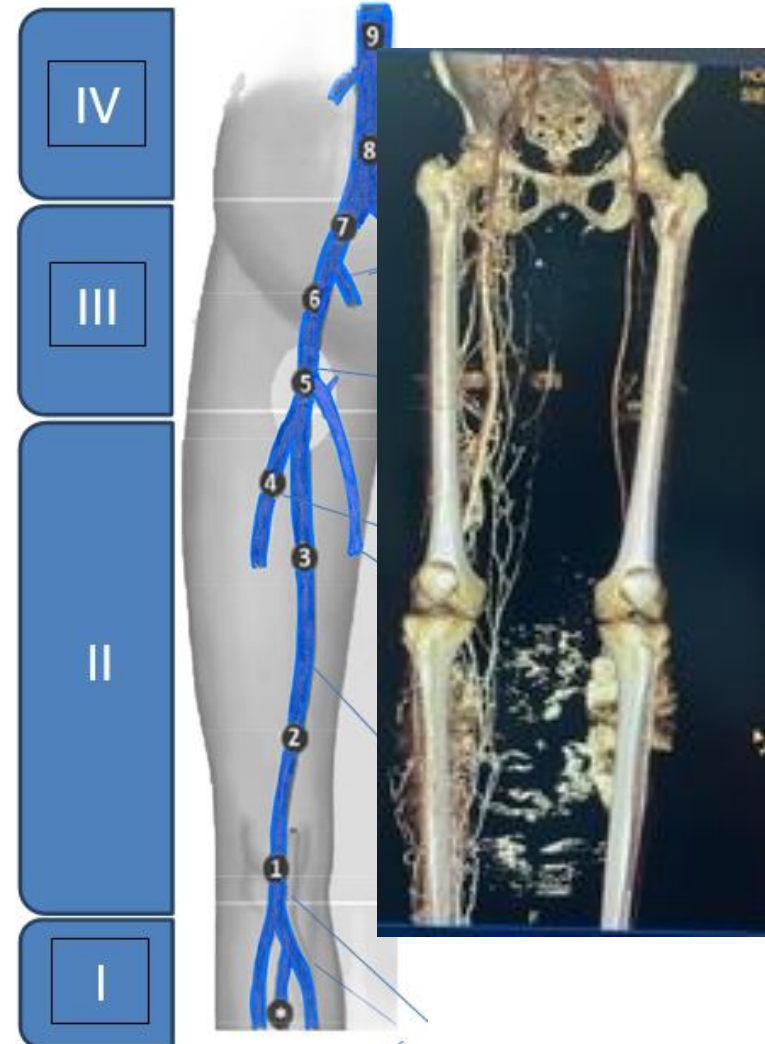
61 Y

2017: idiopathic **RIGHT LETIII DVT**

2018 Moderate PTS with Villalta score 8,  
claudication, CIVIQ 20 score: 42  
.still under XARELTO

### US and direct Phlebo CT:

OCCLUSION of the proximal RIGHT external and FCV



**A Standardized  
classification**

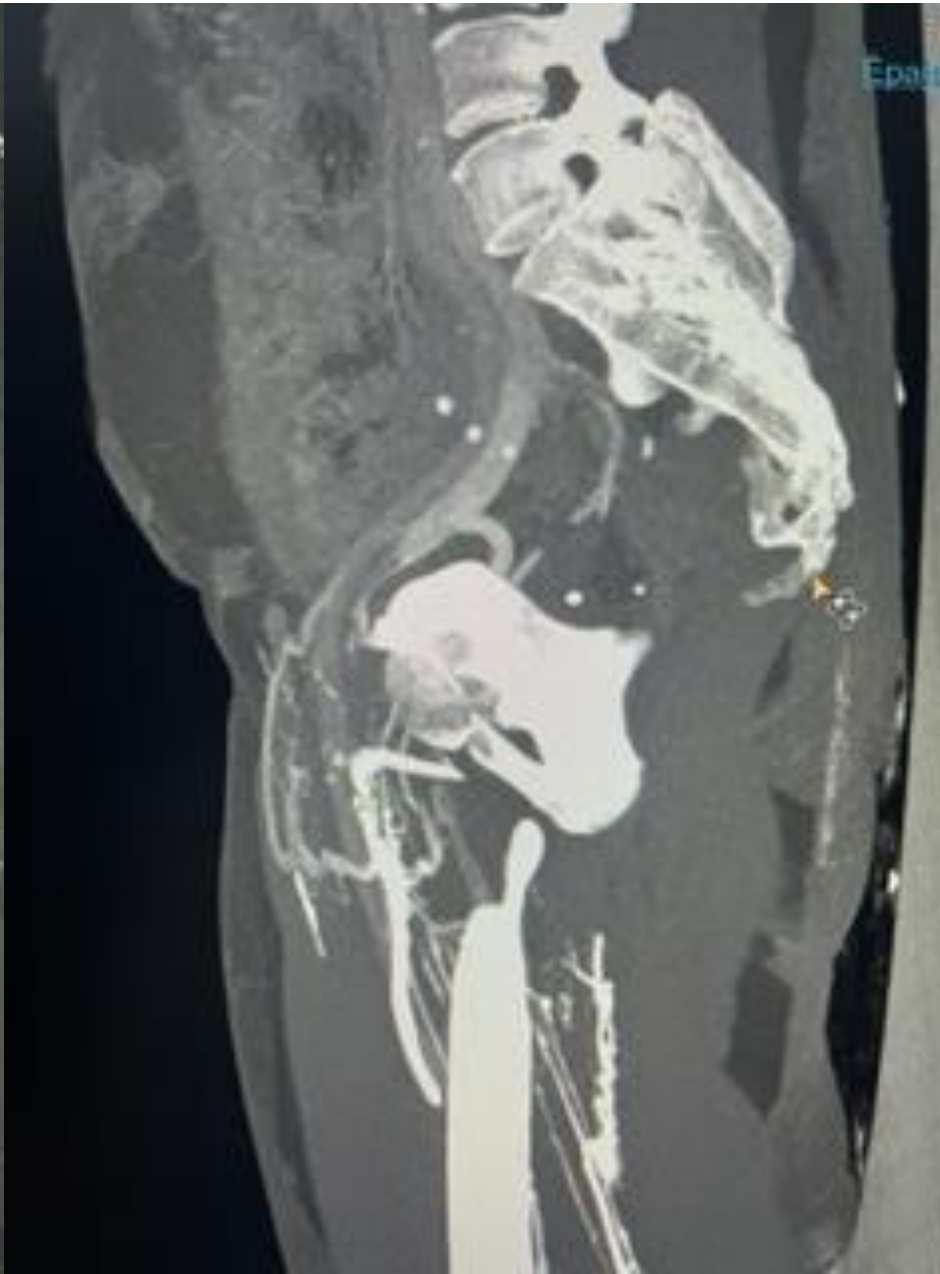
**LET (Lower extremity thrombosis) classification:**

> **Class III: femoro-iliac thrombosis**

- Common femoral vein, iliac veins
  - Bad recanalisation
  - Impaired outflow / bad collaterals
  - High PTS



Direct Phleboscanner



**INDICATION OF RECANALIZATION**

# AT THE BEGINING :COOL!

- Wire Crossing failure from the jugular acces
- ok via ipsi femoral approach



DR. PERNES



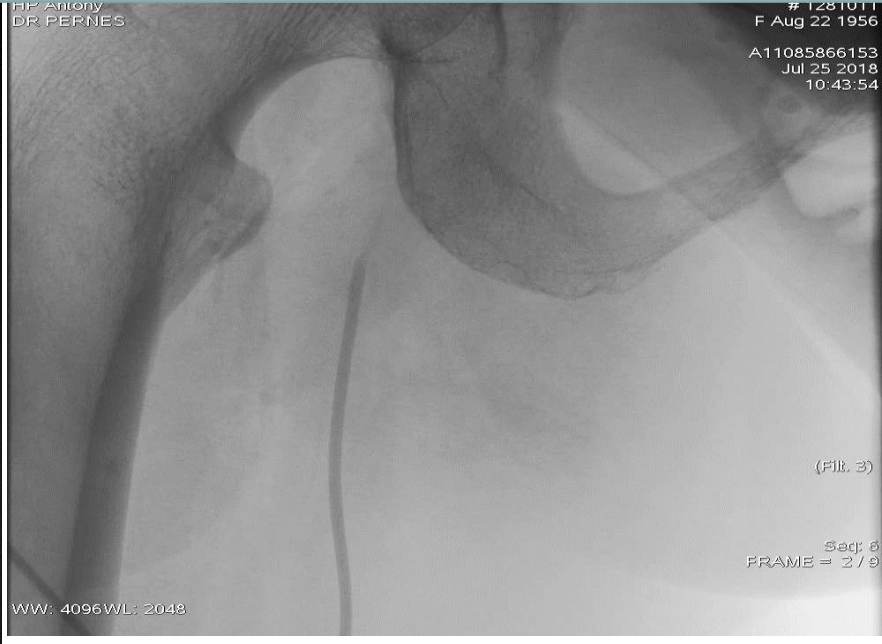
F Aug 22 1956  
A11085866153  
Jul 25 2018  
09:59:24

(FILM 3)

Seq: 3  
FRAME = 2 / 11

WW: 4096WL: 2048

HP Antony  
DR. PERNES



# 1281011  
F Aug 22 1956  
A11085866153  
Jul 25 2018  
10:43:54

(FILM 3)

Seq: 6  
FRAME = 2 / 9

WW: 4096WL: 2048

HP Antony  
DR PERNES

# 1281011  
F Aug 22 1956

A11085866153  
Jul 25 2018  
11:16:10

(Fit. 1)

Seq: 8  
FRAME = 1 / 102

WW: 256 WL: 128



DR PERNES



F Aug 22 1956  
A11085866153  
Jul 25 2018  
11:41:18

(Filt. 3)

Seq: 10  
FRAME = 2 / 2

WW: 4096WL: 2048

DR PERNES



F Aug 22 1956  
A11085866153  
Jul 25 2018  
11:48:17

(Filt. 3)

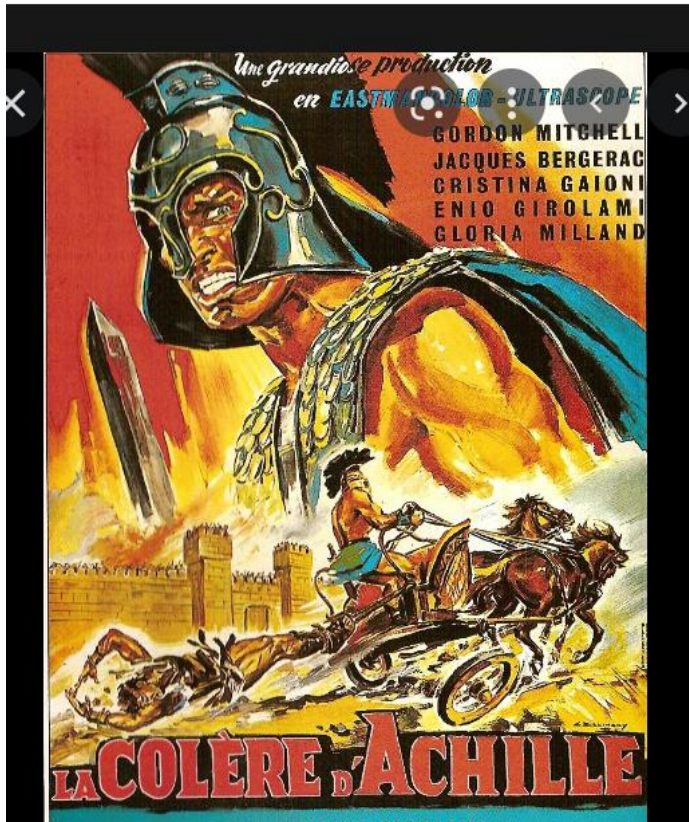
Seq: 11  
FRAME = 2 / 13

WW: 6454WL: 2951

# AND THEN , BIG MESS!!!

... Wrong manipulation of the exchange wire before inserting STENT...

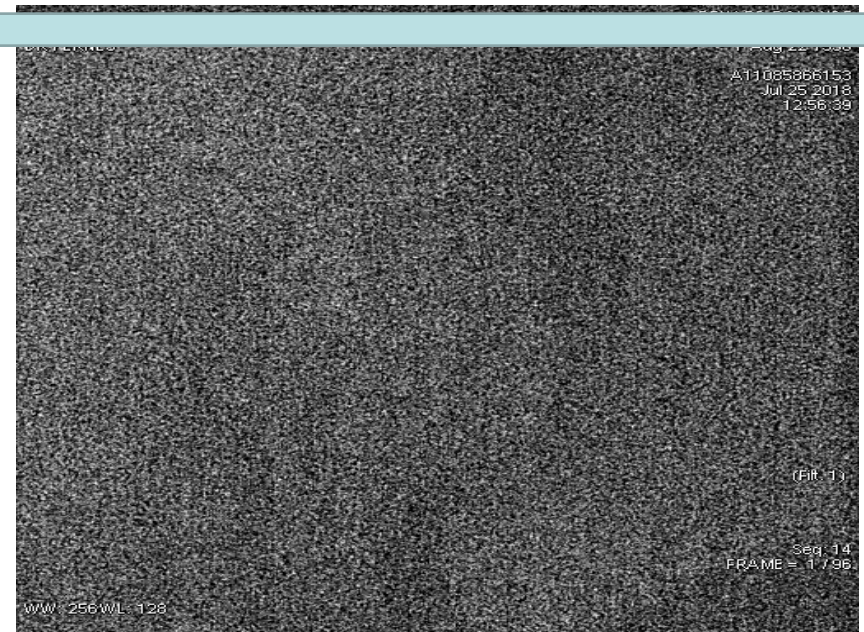
**NO WIRE ANYMORE: OVER-ZEALOUSNESS!!!**



# AND WHEN I SAY BIG MESS...

Try again from both acces

Long fight: seems OK from below , but not the same road...



HP Antony  
DR. PERNES

# 1281011  
F Aug 22 1956  
A11085866153  
Jul 25 2018  
13:17:48

(Filt. 3)

Seq: 18  
FRAME = 2 / 6

WW: 4096WL: 2048

HP Antony  
DR. PERNES

# 1281011  
F Aug 22 1956  
A11085866153  
Jul 25 2018  
13:13:47

(Filt. 3)

Seq: 17  
FRAME = 2 / 2

WW: 4096WL: 2048

# SUB INTIMAL( SUB ADVENTICIAL???) PATH:VENOUS BOLIA ... (NON intentionnel!!!)

HP Antony  
DR. PERNES

# 1281011 HP Antony  
F Aug 22 1956 DR. PERNES

A11085866153  
JUL 25 2018  
13:26:29

# 1281011  
F Aug 22 1956

A11085866153  
JUL 25 2018  
13:27:49

(Filt. 3)

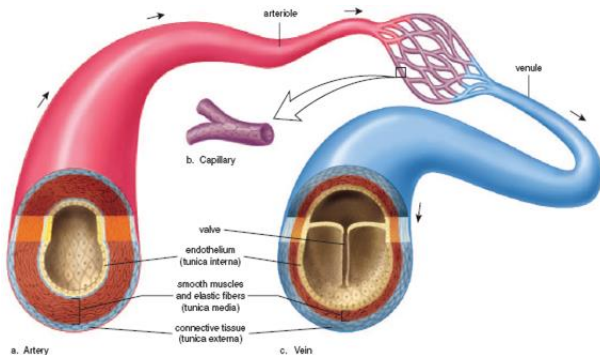
(Filt. 3)

Seq: 20  
FRAME = 2 / 12  
MASK = 1

Seq: 22  
FRAME = 2 / 10  
MASK = 1

WW: 4096WL: 2048

WW: 4096WL: 2048



FROM THE JOURNAL OF VASCULAR MEDICINE AND BIOLOGY  
for vascular surgery in the Front. Mr Zayed  
has a special interest in endovascular  
techniques to treat arterial disease and he  
helped to develop and expand a specialist  
diabetic foot network covering south east  
London. Mr Zayed is a regular speaker at  
national and international meetings



'Sub-intimal Angioplasty  
How I do it'

Dr. Amman Bolia

**VaLSA Endosim  
Workshop Starting**



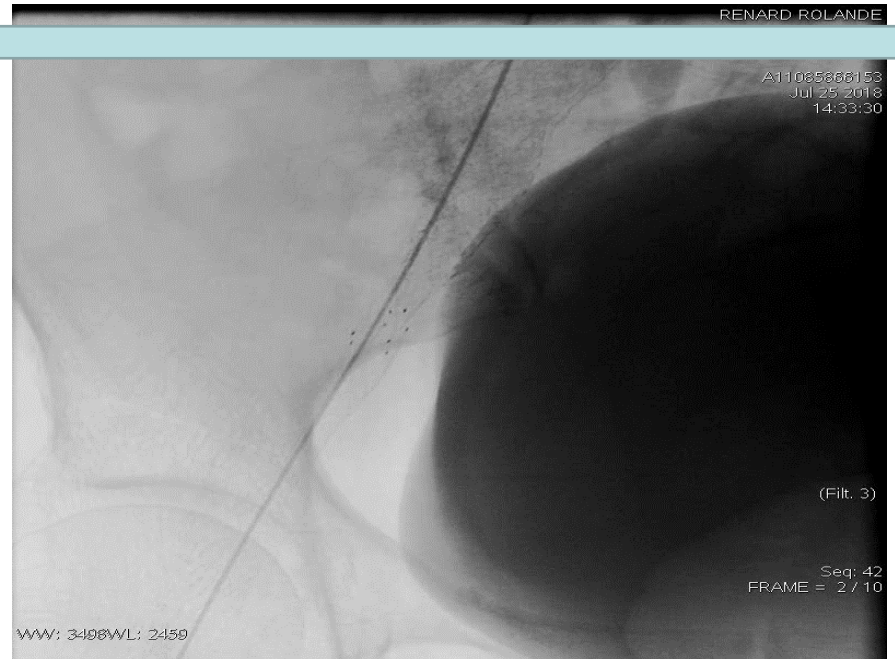
**VaLSA Cadaveric Module**

KASTC  
Keele Medical School  
David Weatherall Building  
Keele University  
Staffordshire  
ST5 5BG

Date:  
24-25th May, 2022

# MUST DECIDE...STENT

- 2 STENTS (OPTIMED 10/120 + 12/80 )



ALMOST HUGGLY...

# ONE MORE BALLON-EXPANDABLE STENT( 10/40)

## AT THE JUNCTION OF THE 2 SELF EXPANDABLE STENT



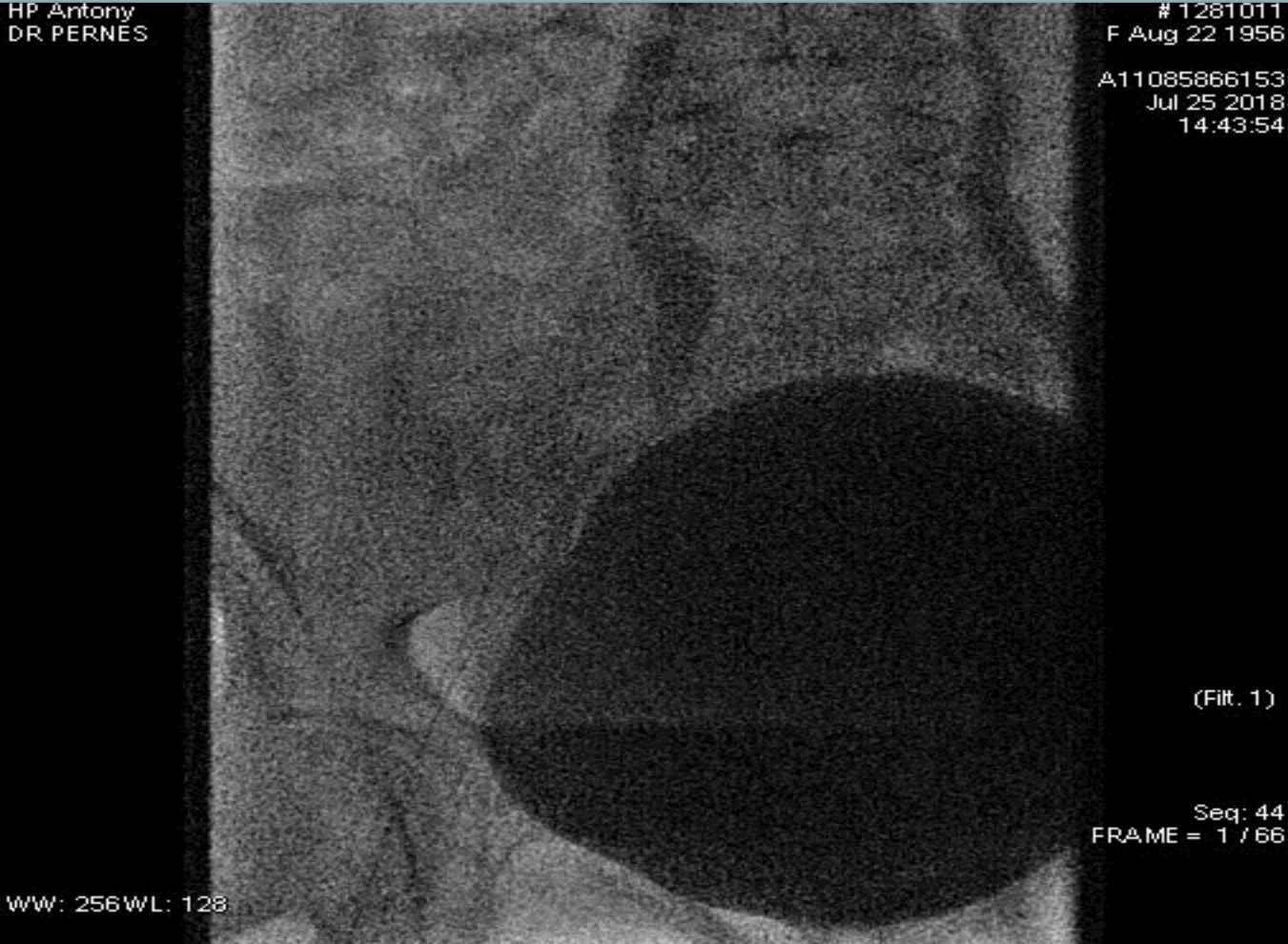
# NOT VERY HAPPY...BUT STOP

(first injection:9H54...NOW:14H43...)

HP Antony  
DR. PERNES

# 1281011  
F Aug 22 1956

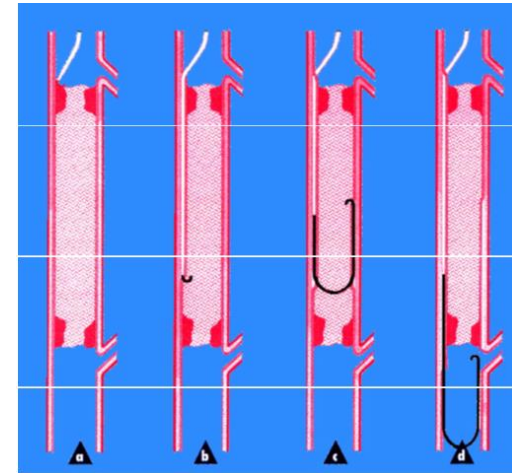
A11085866153  
Jul 25 2018  
14:43:54



(Flt. 1)

Seq: 44  
FRAME = 1 / 66

WW: 256 WL: 128





# NOT ONLY A VENOUS BOLIA...

**IMMEDIATLY** at the exit of the cath-lab: rest pain of the right lower limb with sensitiv and motor defect, no more femoral pulse:

**ACUTE ISCHEMIA!!!**

**MURPHY ' law:** *If there's more than one way to do a job, and one of those ways will result in disaster, then somebody will do it that way. »*



# BACK TO THE CATH-LAB FOR ANGIOGRAPHY

HP Antony  
DR PERNES

#1281011  
F Aug 22 1958  
A11085866153  
Jul 25 2018  
17:39:32

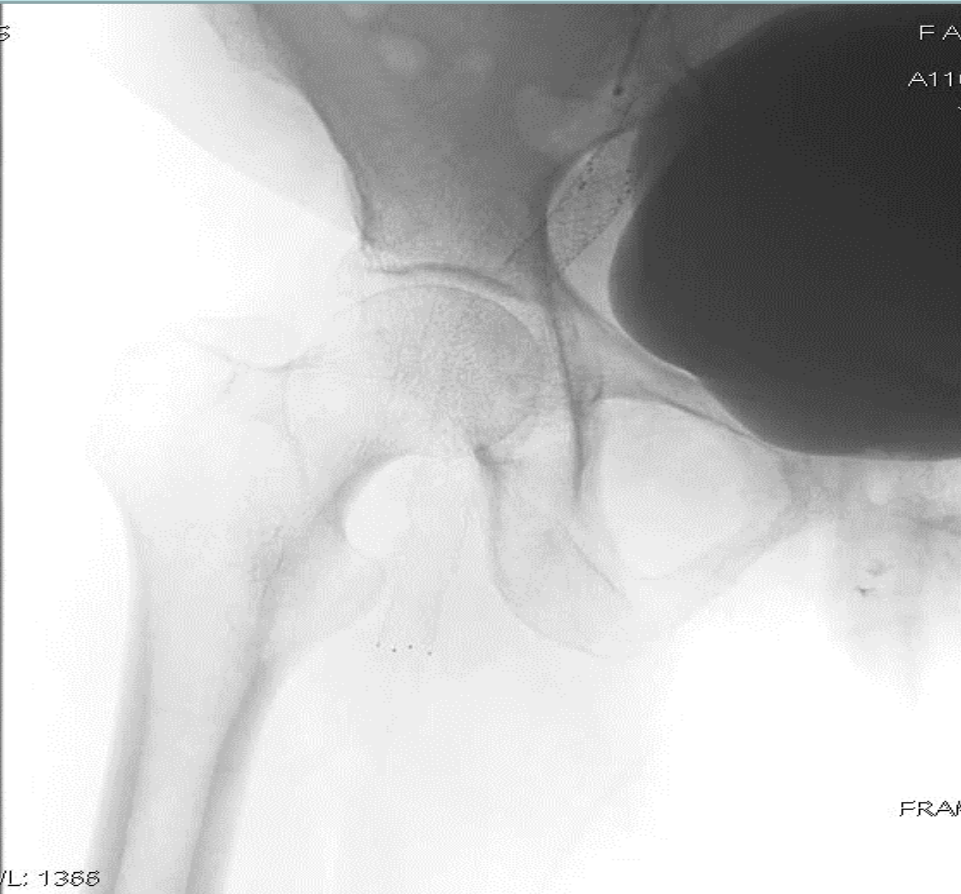
(Filt. 3)

Seq: 47  
FRAME = 2/14  
MASK = 1

WWW: 4362WL: 2357

HP Antony  
DR. PERNES

# 1281011  
F Aug 22 1956  
A1108586615  
Jul 25 201  
17:40:1



(Filt. 3

Seq: 4  
FRAME = 2 / 1

WW: 3611 WL: 1368

RENALTA BOLANDE

DR PERNES

F Aug 22 1956 DR PERNES

F Aug 22 1956

A11085886153  
JUL 25 2018  
17:40:57

A11085886153  
JUL 25 2018  
17:42:28

(Filt. 3)

(Filt. 3)

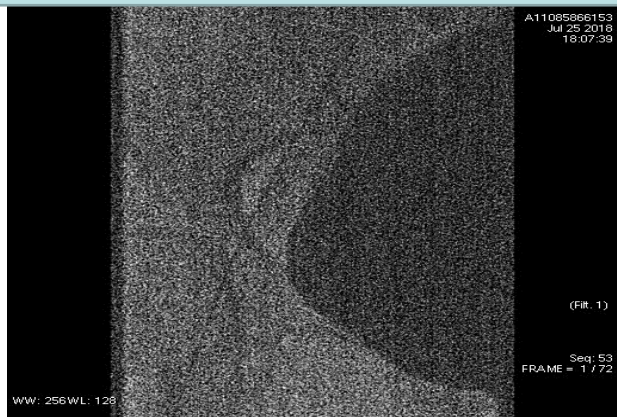
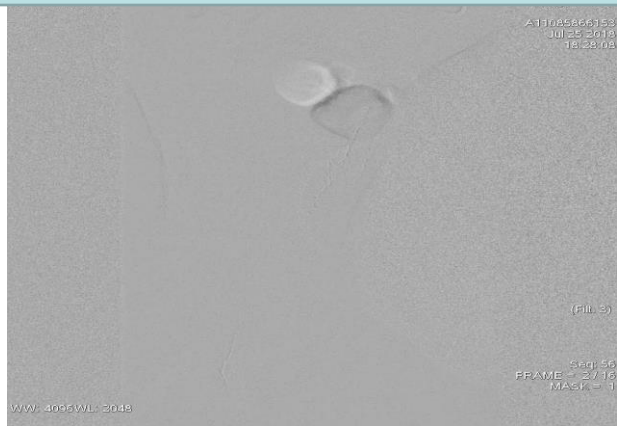
Seq: 49  
FRAME = 2 / 14  
MASK = 1

Seq: 50  
FRAME = 2 / 23  
MASK = 8

WW: 4096WL: 2048

WW: 4096WL: 2048

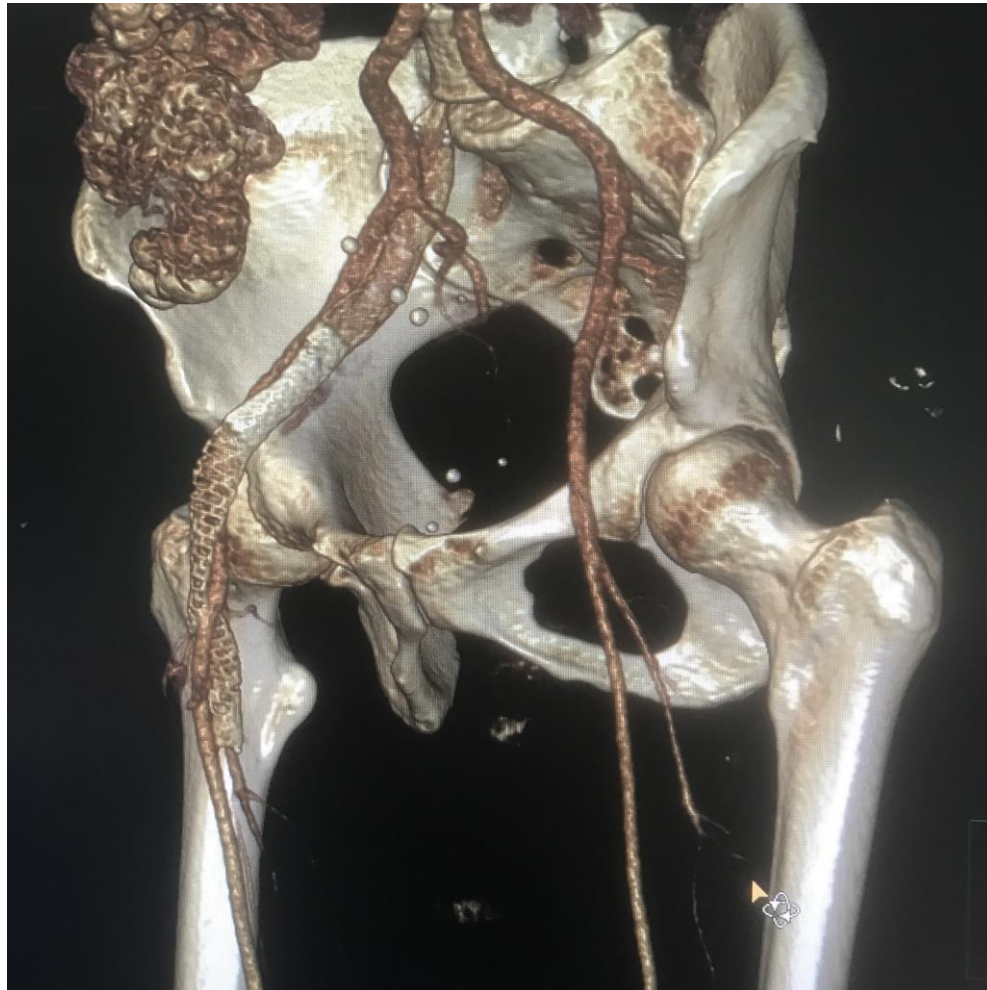
# POBA WITH 6,7,8 mm: OK (STOP, OUF..)

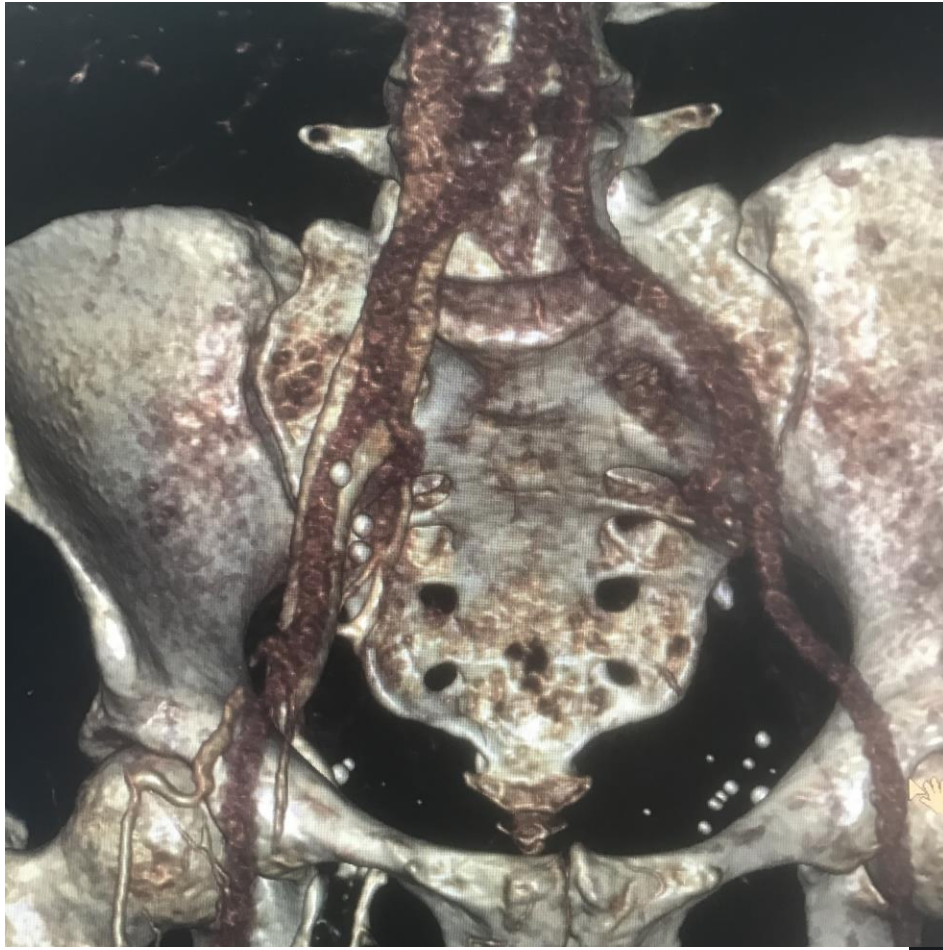


J'ai l'impression que mon ange gardien me regarde comme ça souvent...



# COMPRESSION BY THE MURAL VENOUS HEMATOMA AND SUBINTIMAL STENT?

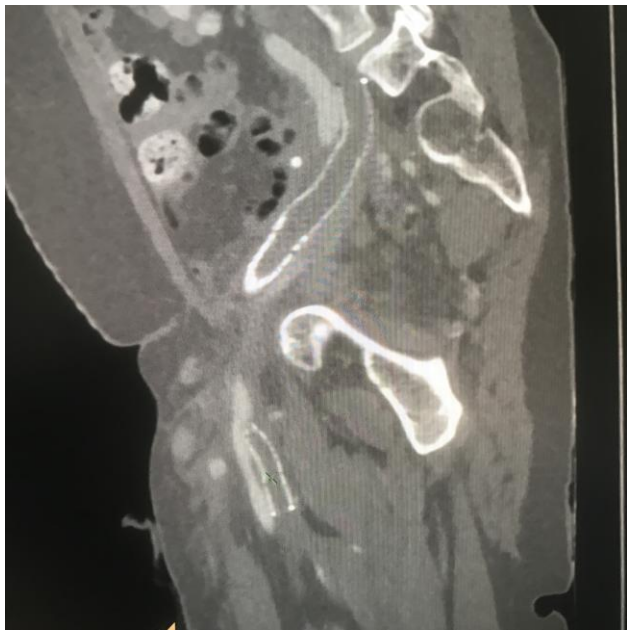




BEFORE



AFTER

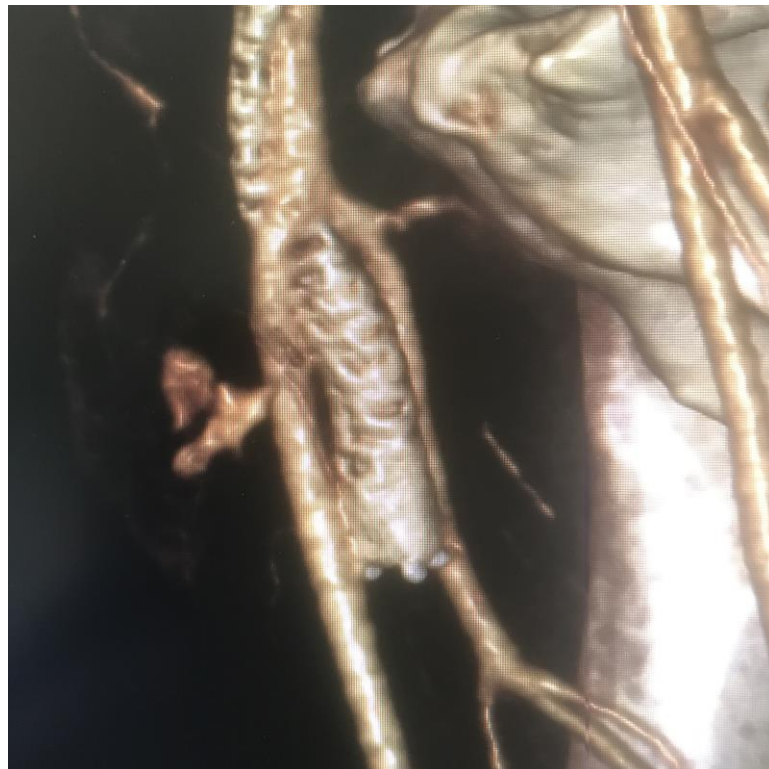
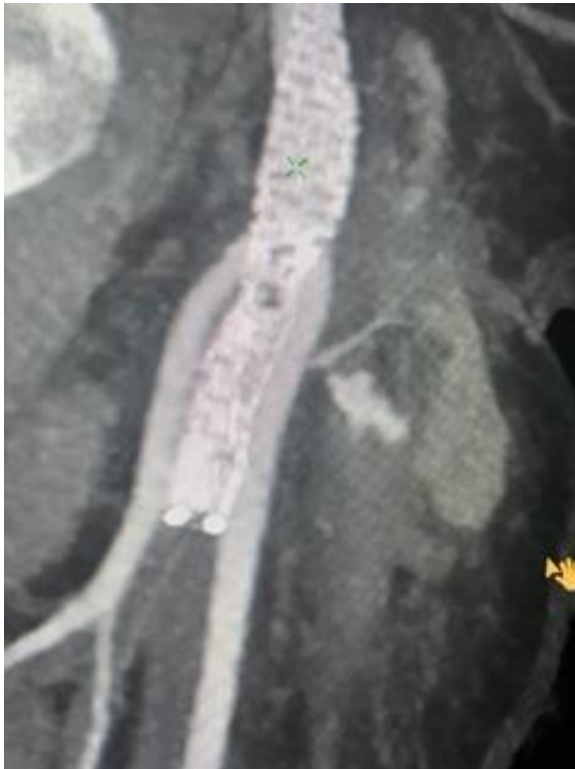




# SOMETHING ELSE ON THE CT...(after US)

**WHY SO MUCH HATE ???**

False Aneurysme on a branch of the right SFA ...  
Decision of manual compression under US ( by myself...)





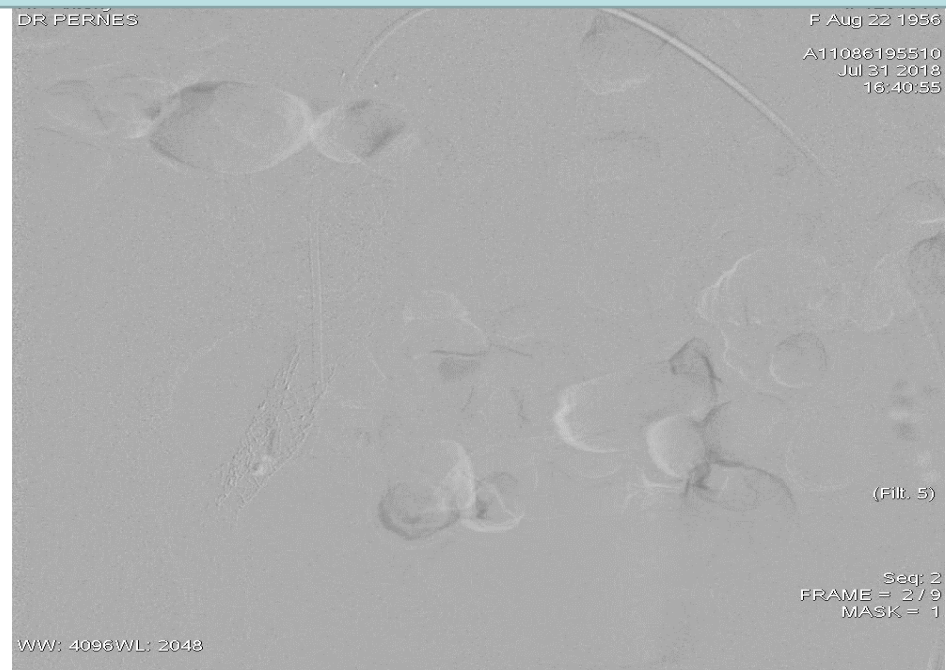
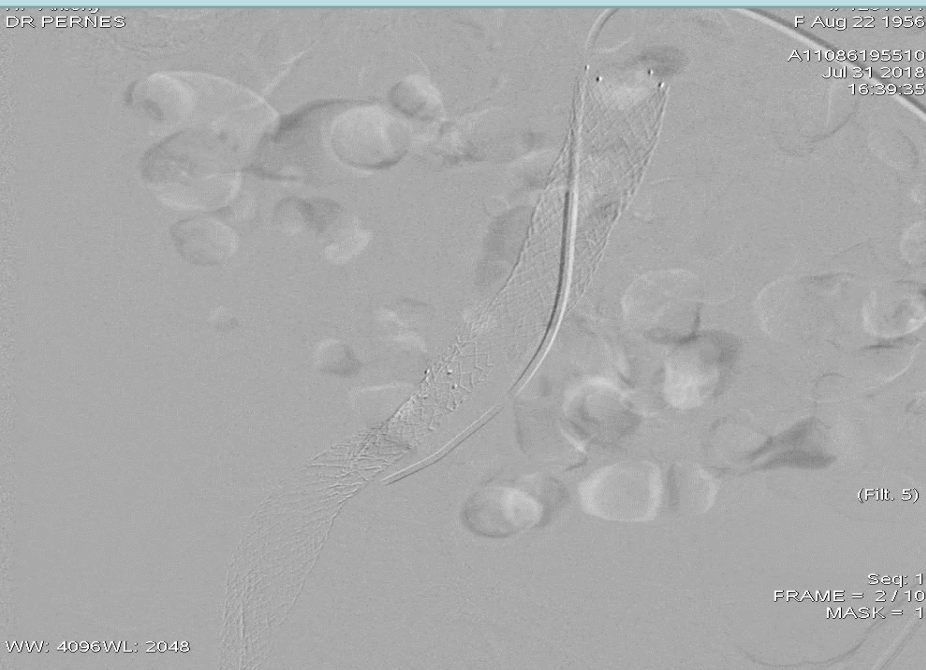
**BINGO !!!: FA EXCLUDED....**

**AND THE VENOUS STENT**

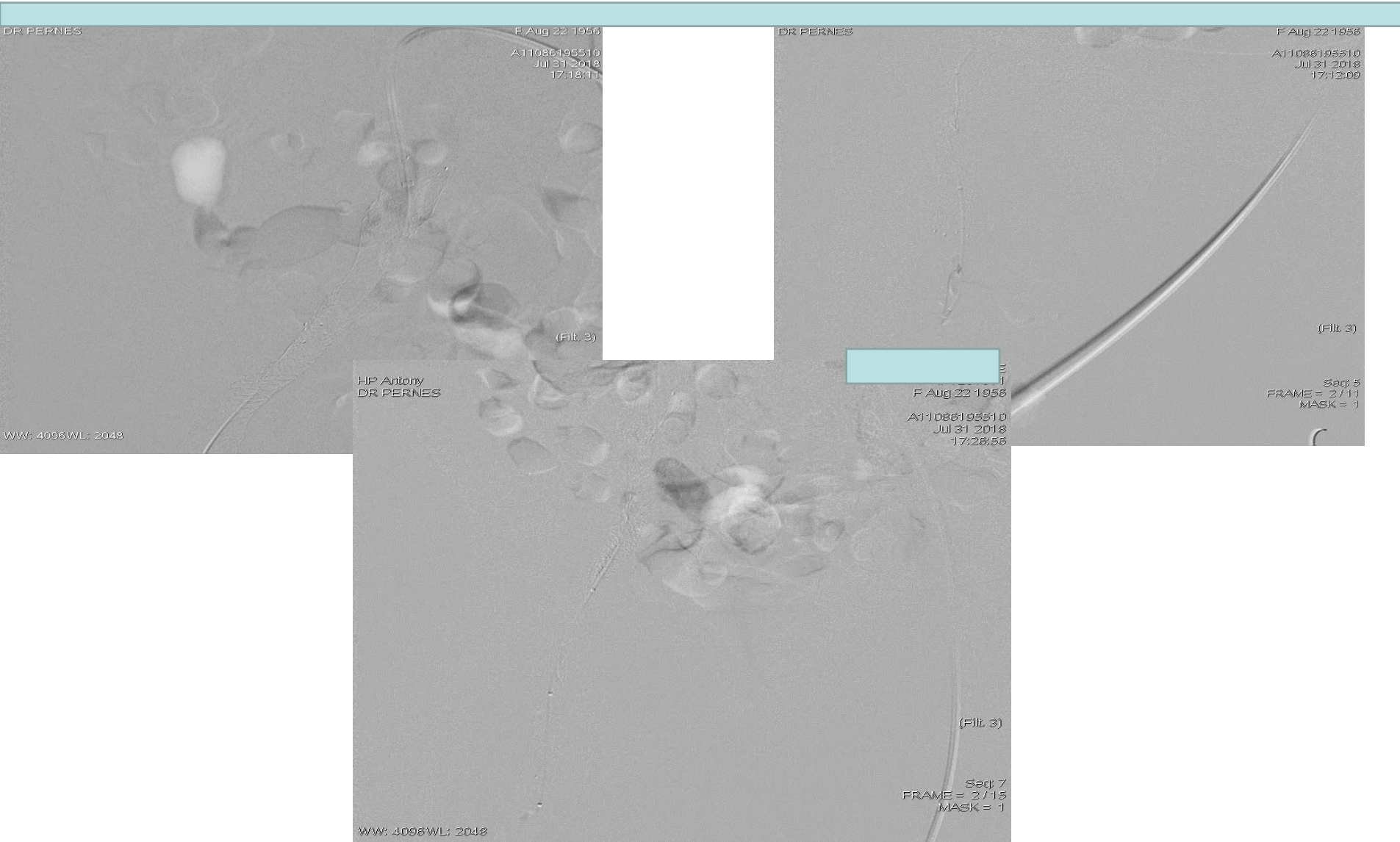
**ALSO...**

**(RE BACK TO THE CATH-LAB...**

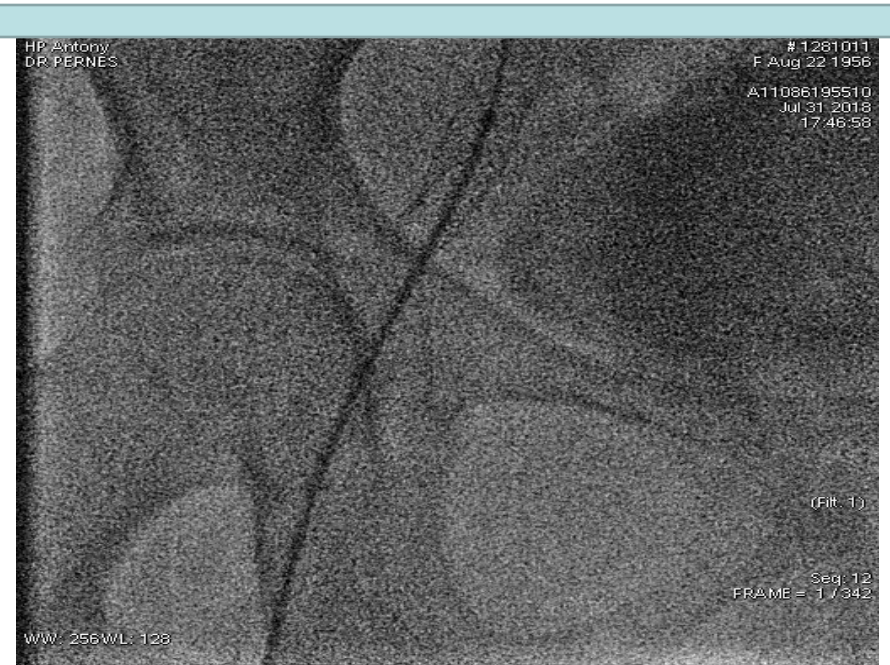
# CONFIRMATION OF SUBINTIMAL STENTING



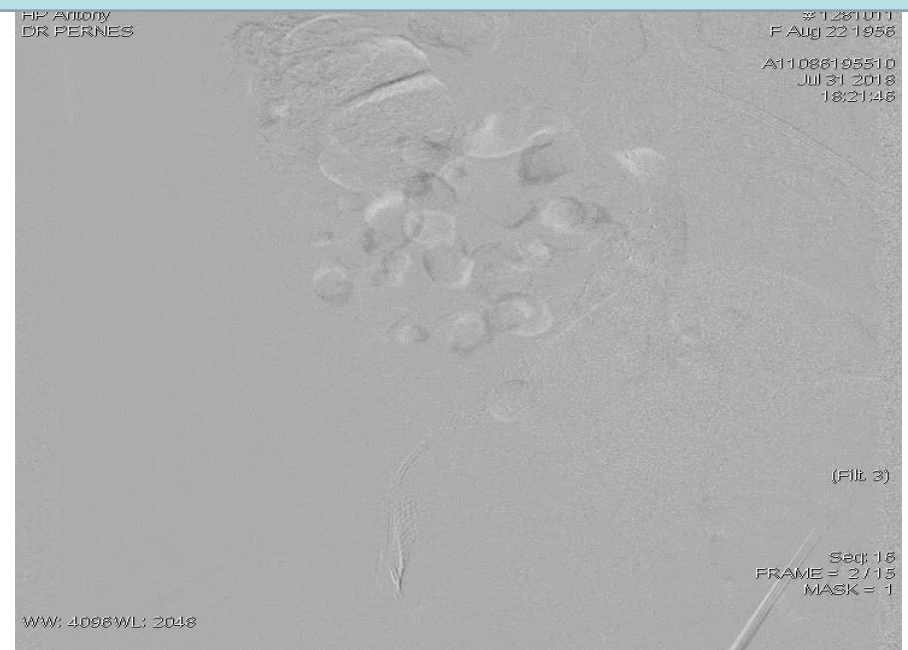
# RECANALIZATION OF THE OCCLUDED STENT(Left CFV acces )



# INFLATION OF 5/200, then 10 MM BALLON AT 20 ATM + 2 NEW OPTIMED STENT(10/120 + 12/60) INSIDE THE 3 PREVIOUS ONE...



# UNPREDICTIBLE FINAL GOOD RESULT...(2 H of FIGHT)



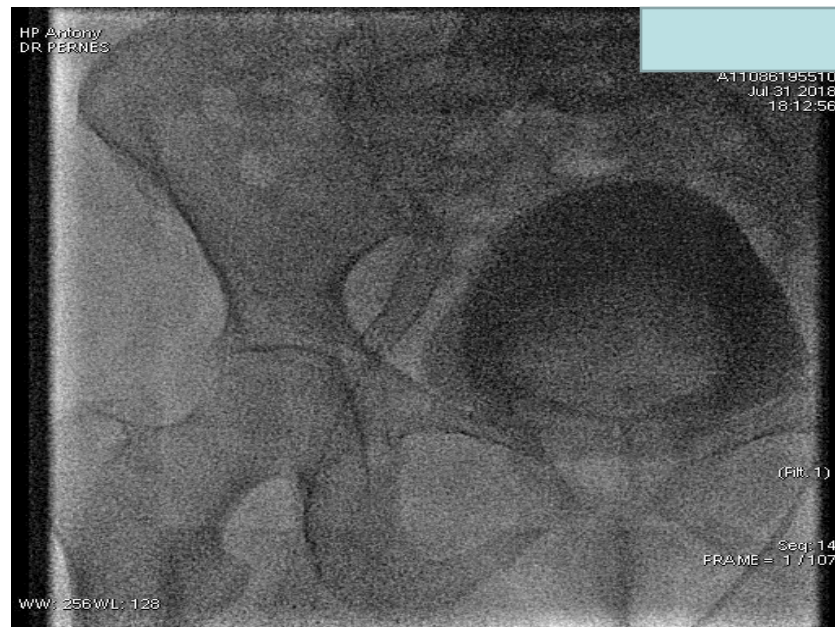
**Pneumatic serial compression applied immediately after the procedure and used while the patient constrained in bed.**

**1 MONTH: LMWH twice daily + PLAVIX (Aspirin allergy...)**

**AFTER: long life XARELTO**

**NO Symptoms at 8 months** and US : patency of the STENT with 50% residual stenosis of the CFV: the patient refused a new attempt of balloon angioplasty

**1Y:** diagnosis of SYSTEMIC SCLERODERMIA and **asymptomatic re – occlusion of the CFV at the US control...STOP**



# The 7 Deadly Sins

## OF AN INTERVENTIONNAL DOCTOR!!!:

universal lessons from the cases of complex interventions (from an old to young potential murders....)



Vice ⇄	Latin ⇄	Virtue ⇄	Latin ⇄
Lust	<i>Luxuria</i>	Chastity	<i>Castitas</i>
Gluttony	<i>Gula</i>	Temperance	<i>Temperantia</i>
Greed	<i>Avaritia</i>	Liberality	<i>Liberalitas</i>
Sloth	<i>Acedia</i>	Diligence	<i>Industria</i>
Wrath	<i>Ira</i>	Patience	<i>Patientia</i>
Envy	<i>Invidia</i>	Kindness	<i>Humanitas</i>
Pride	<i>Superbia</i>	Humility	<i>Humilitas</i>



# SIN OF PRIDE (HUBRIS)



Building the [Tower of Babel](#) was, for Dante, an example of *pride*. Painting by [Pieter Bruegel](#)



- F
- «
- T
- b
- tr
- 2
- F
- tr
- fr



# SIN OF GLUTTONY



# AGAINST GLUTTONY: TEMPERANCE!

- Try to contain your basic instincts of interventionist...



Remember that sometimes the best is the enemy of good

# SIN Of GREED (CUPIDITY)



1909 painting *The Worship of Mammon* by [Evelyn De Morgan](#).

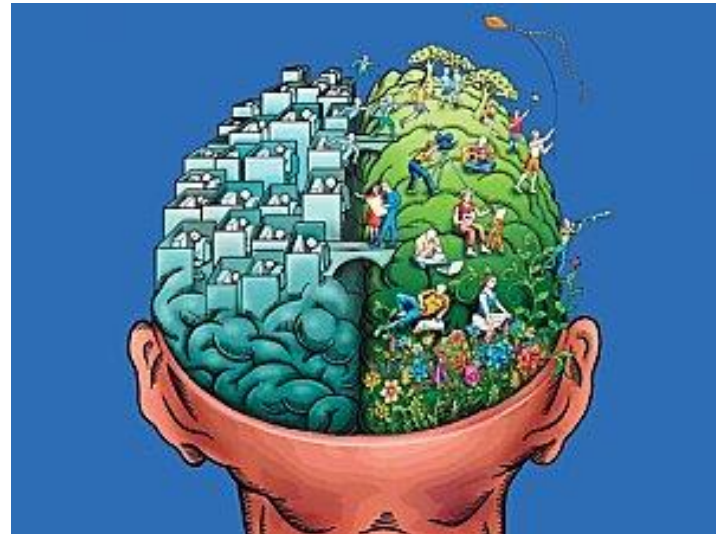


# AGAINST GREED:LIBERALITY!

If you plan complex procedures, : Obligation of means,resources! ( all kinds of wires,ballons ,stents).....



Necessity of EBM.... But keep your common sens for medical decisions!!!: use your right hemisphere (creativity, emotion,...) not only the left !!



# SIN OF ENVY



*Envy Arch* in the nave with a gothic fresco from 1511 of a man with a [dog-head](#), which symbolizes envy ([Dalbynder Church \(da\)](#), Denmark)

# AGAINST (too much) ENVY (FOR CTO of CHRONIC DVT...)

## Respect INDICATIONS:



DELPHI SFMV/SFICV (en cours)



Indication clinique consensuelle pour une solution de RECANALISATION:

## Symptômes invalidants de SPT

- L'indication **doit** être envisagé chez les patients avec des symptômes de syndrome post thrombotique et un score de Villalta  $\geq 10$
- - L'indication **peut** être discuté chez les patients avec des symptômes de syndrome post thrombotique et un score de Villalta  $\geq 5$
- - En presence des symptômes de Syndrome Post thrombotique impactant la qualité de vie
- (sur la base des scores) l'indication **peut** être discuté, quelque que soit le score de Villalta

LET III PURES  
Ou LET III + II +IV





# SIN OF WRATH (ANGER)

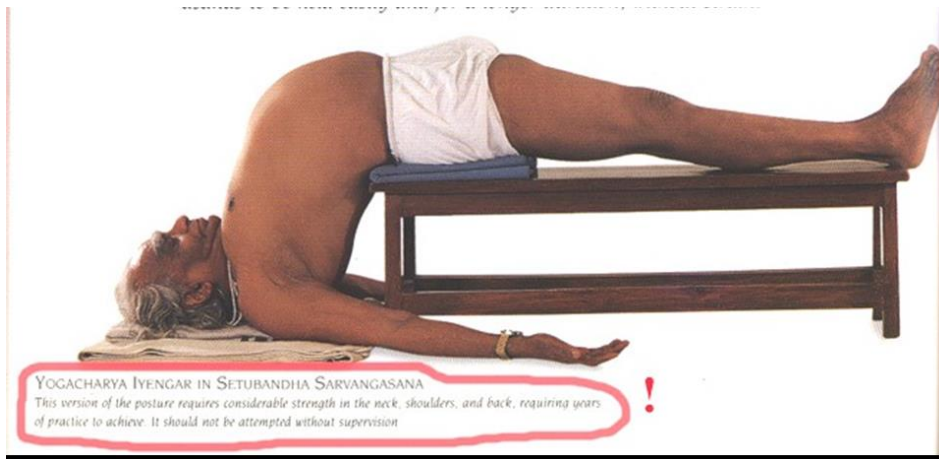


Wrath, by [Jacob Matham](#)

# AGAINST WRATH?

RULES: keep always some little anger

- You must HATE the defeat and still filled with indignation when complications or failure occur , even if the risk 0 does not exist!
- BUT , try to stay ZEN .different methods ...



# SIN OF LUST(LUXURIA)

**Lust** :emotion or feeling of intense desire in the body.

The lust can take any form such as the lust for knowledge, the lust for sex or the lust for power



in [The Seven Deadly Sins and the Four Last Things](#), by [Hieronymus Bosch](#).

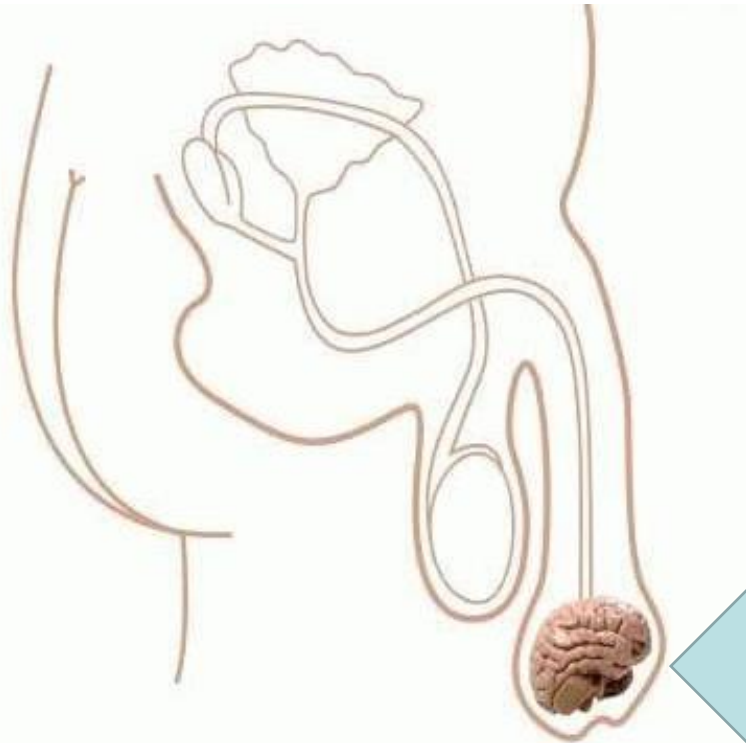


# AGAINST LUST:

# TEMPERANCE, CHASTITY!!

- **Respect abstinence** : follow indications and recommendations

**KEEP your head cold.**



**Quel traitement ?**

- Traitement des lésions obstructives de la veine fémorale commune jusqu'à la veine cave inférieure
- Quelle que soit l'ancienneté et l'état de la veine



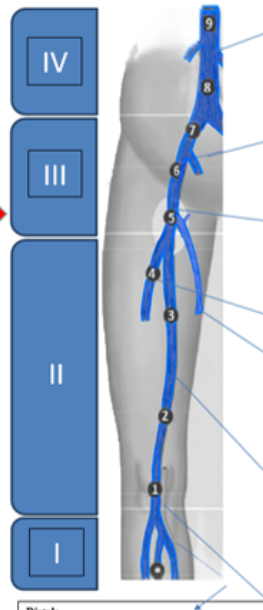
Recommendation 56	Class	Level
In patients with clinically relevant chronic ilio-caval or ilio-femoral obstruction or in patients with symptomatic non-thrombotic iliac vein lesions, percutaneous transluminal angioplasty and stent placement using large self expanding stents should be considered.	Ila	B

Eur J Vasc Endovasc Surg (2015) 49, 678–737

**Editor's Choice – Management of Chronic Venous Disease**  
*Clinical Practice Guidelines of the European Society for Vascular Surgery (ESVS)*

C. Wittens<sup>a</sup>, A.H. Davies<sup>b</sup>, N. Bakgaard<sup>c</sup>, R. Broholm<sup>d</sup>, A. Cavezzi<sup>e</sup>, S. Chastanet<sup>f</sup>, M. de Woot<sup>g</sup>, C. Eggen<sup>h</sup>, A. Giannoukas<sup>i</sup>, M. Gohe<sup>j</sup>, S. Kakkos<sup>k</sup>, J. Lawson<sup>l</sup>, T. Noppeneey<sup>m</sup>, S. Onida<sup>n</sup>, P. Pittaluga<sup>o</sup>, S. Thomis<sup>p</sup>, I. Toonder<sup>q</sup>, M. Voytseke<sup>r</sup>,  
ESVS Guidelines Committee<sup>s</sup> P. Kolh, G.J. de Borst, N. Chakfé, S. Debus, R. Hinchliffe, I. Koncar, J. Lindholt, M.M. de Ceuja, F. Vermassen, F. Verzin,  
Document Reviewers<sup>t</sup> M.G. De Maeseneer, L. Blomgren, O. Hartung, E. Kalodiki, E. Korten, M. Lugli, R. Naylor, P. Nicolini, A. Rosales

Bilan lésionnel selon classification LET



# SIN OF SLOTH (LAZINESS)

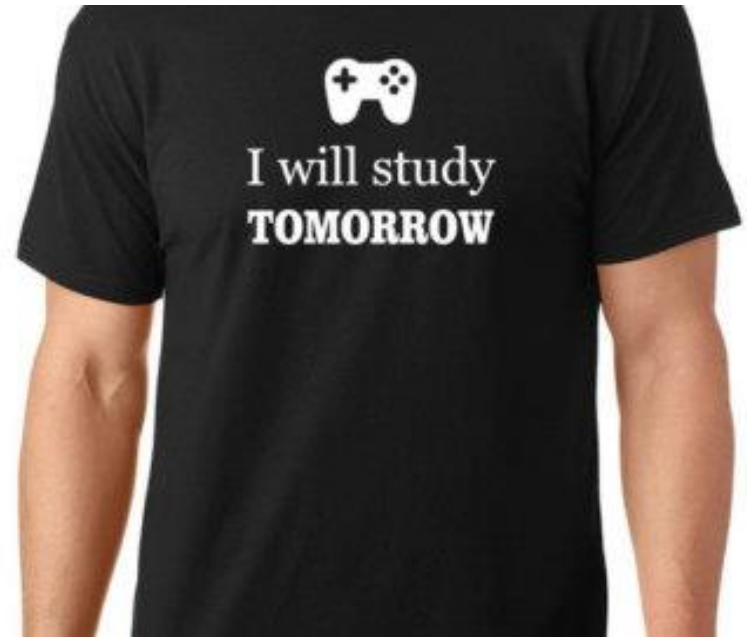


*Sloth* [Parable of the Wheat and the Tares](#)  
by [Abraham Bloemaert](#), [Walters Art Museum](#)



# AGAINST LAZINESS:

- Crippling flaw if you want to become an Interventionnist!!!: need a lot of ENERGY
- Do not forget that you are a Doctor ... before being an Interventionnal specialist!
- Basic principles of Medicine : questionne, examine, analyse...



# THE END



**Mark Twain**

La catastrophe qui finit par arriver n'est jamais celle à laquelle on s'est préparé

**Marcel Jouhandeau**

Une maladresse avouée humblement comme sienne ressemble parfois à une élégance.;

Le bien du mal (1964)

B O R D E A U X

# PERSPECTIVES

Friday, June 17, 2022

My most didactic/ nightmarish cas and my most promising and innovative technique

## ORGANIZATION

Eric Ducasse & Maxime Sibé

## CONTACT & INFORMATION

ademarconnay@divine-id.com  
[www.congresperspectives.com](http://www.congresperspectives.com)

