My most nightmarish case: « The orthopedic « dark side » of vascular surgeon »

« Oups! »

Disclosures







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- Healing center
- * Woman, 81 y-old
- * Toe pain after pedicure care



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- High Blood Pressure
- Active smoke
- Chronic obstructive pulmonary disease
- Diabete

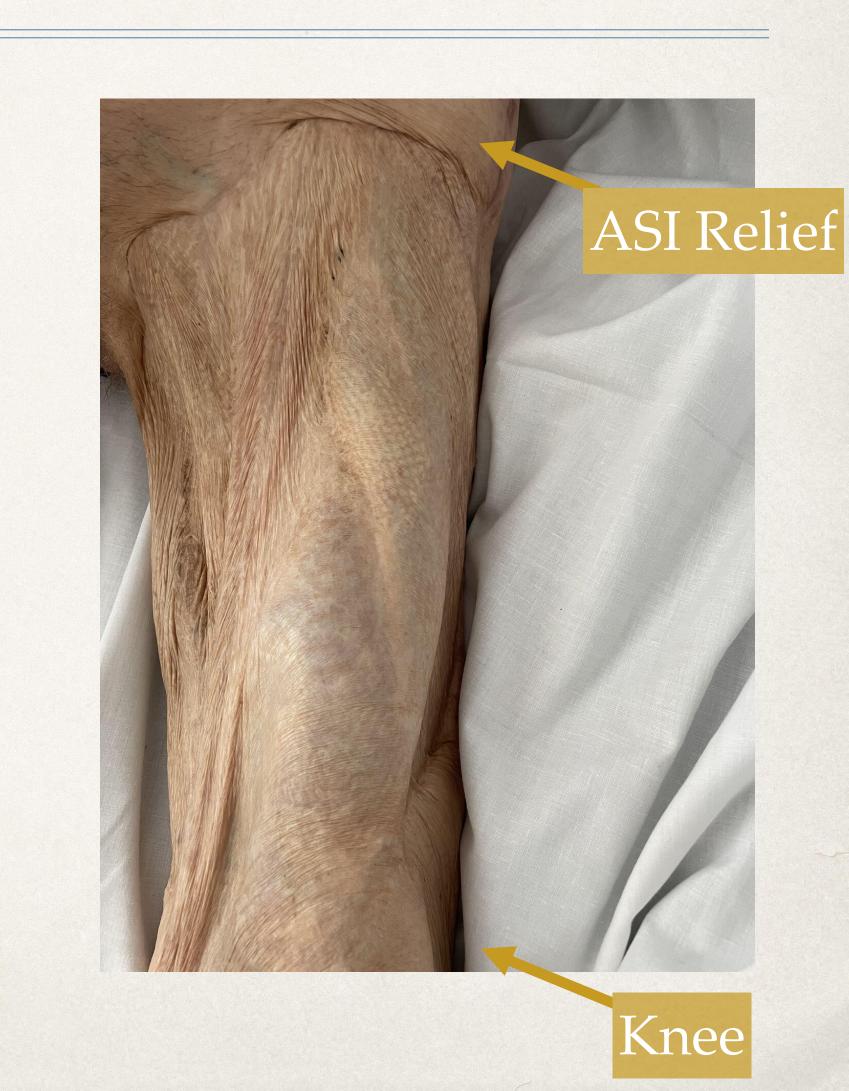
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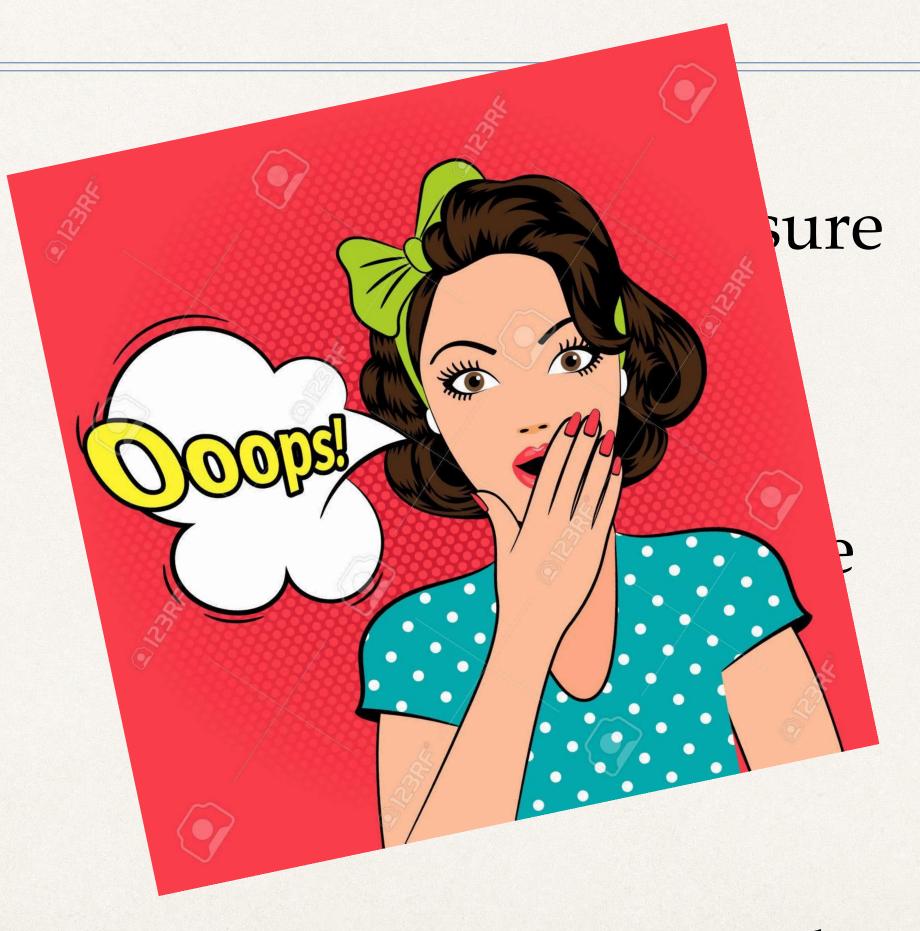
 1991: very serious road accident (bike Vs truck), multiple left leg fracture

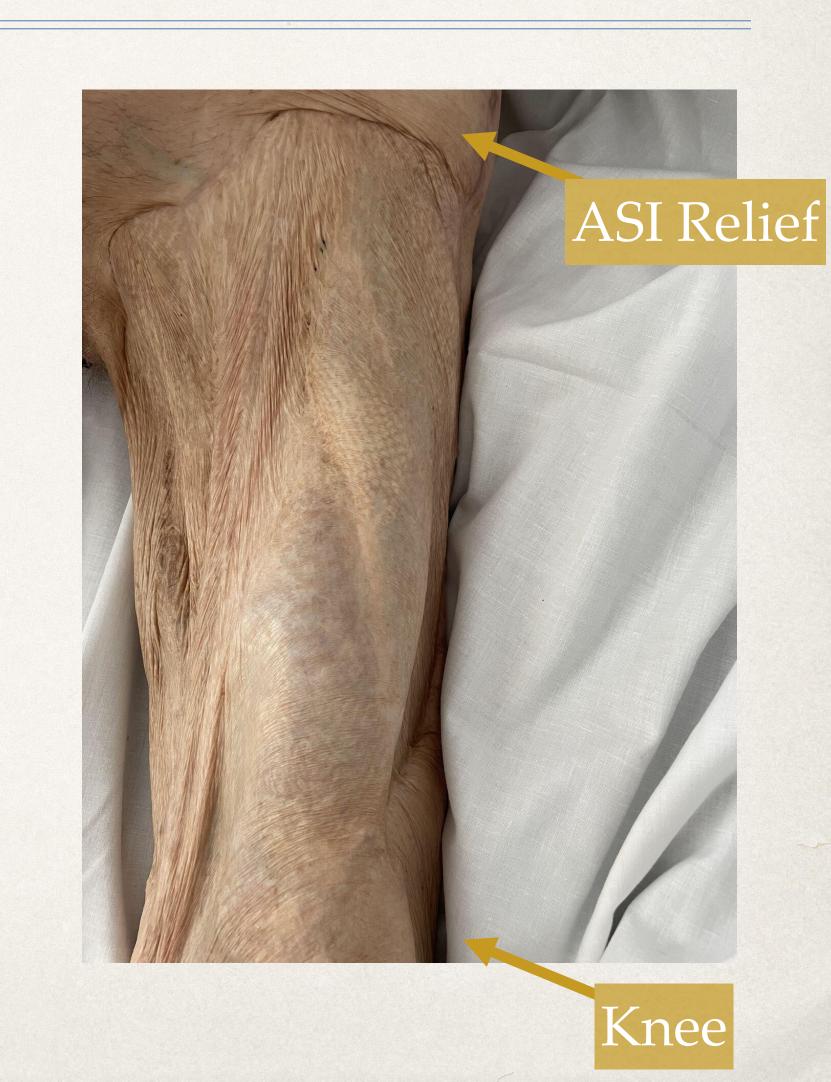
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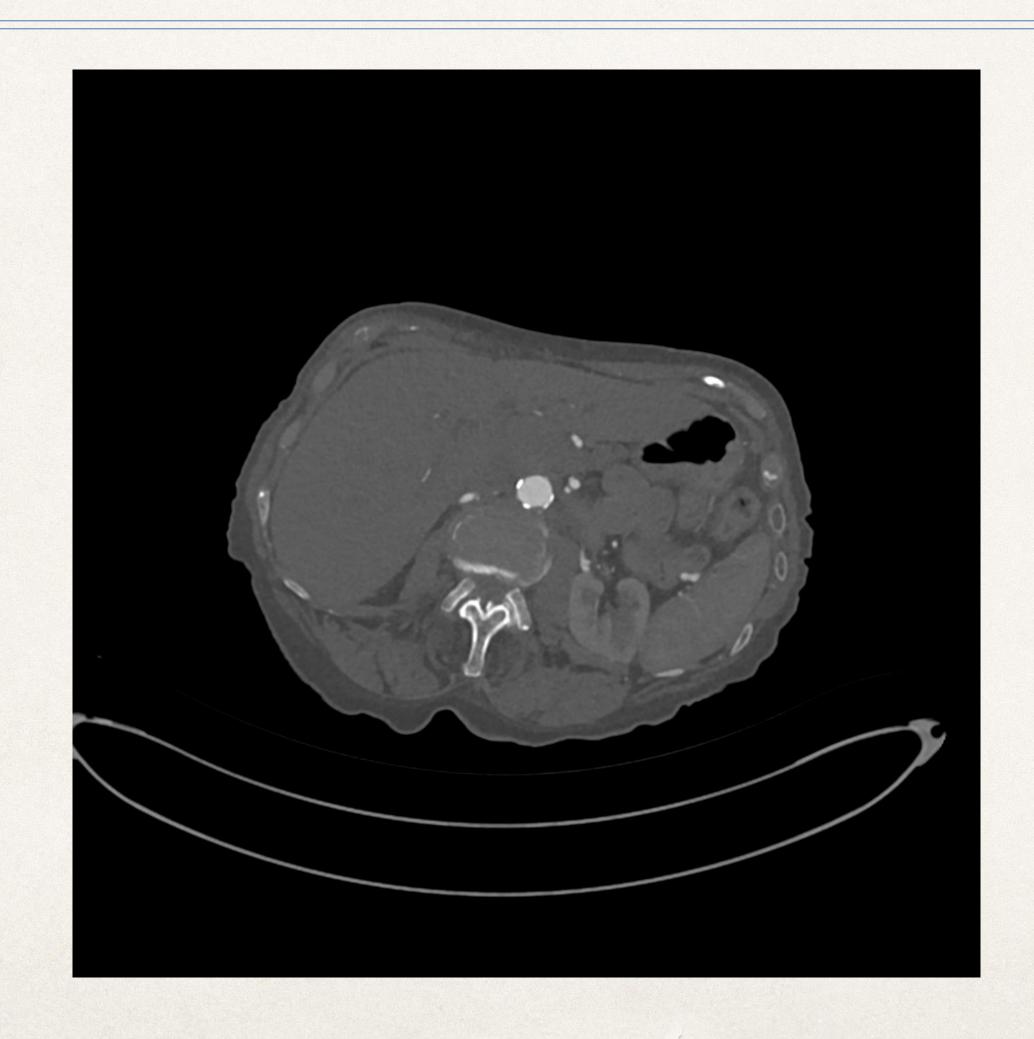
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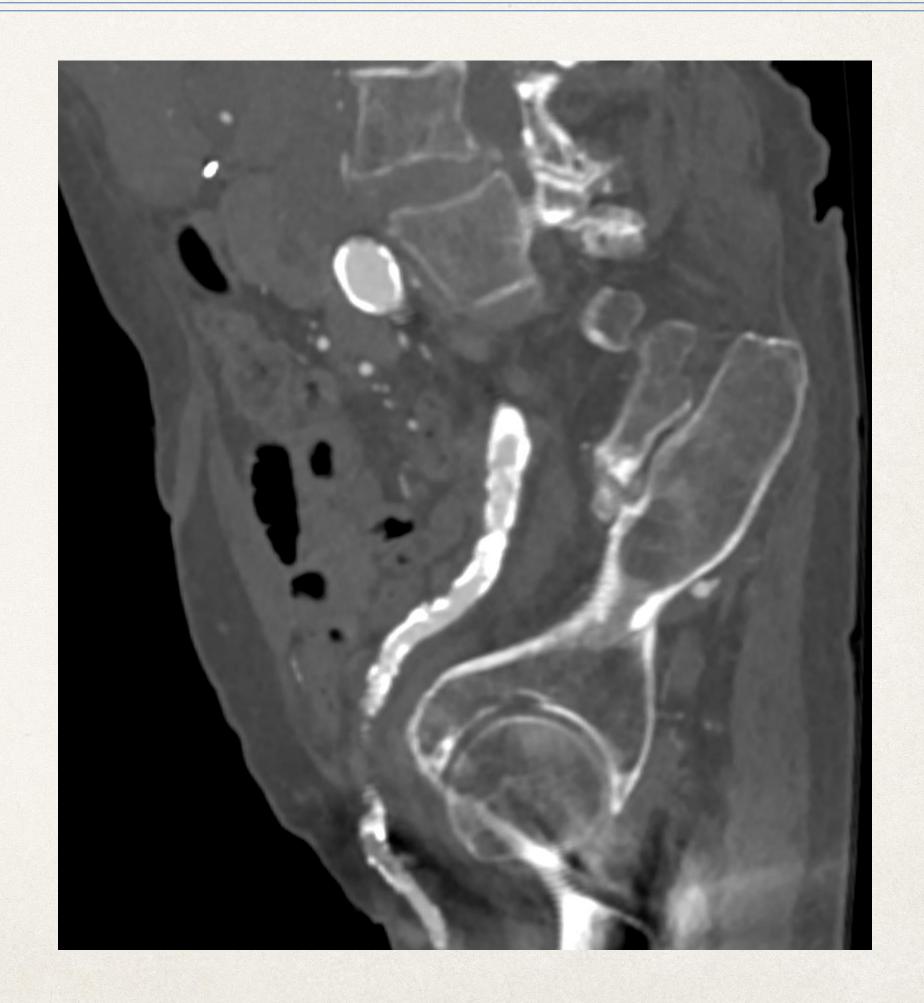


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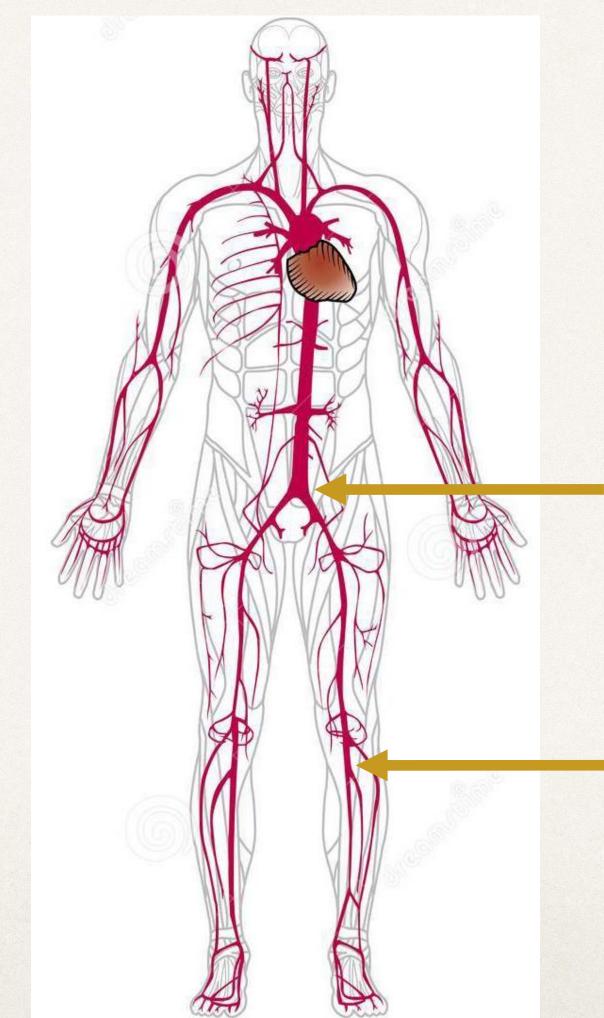






- Indication: yes
- Proximal zone: Aorto-iliac junction?
- Distal zone: tibial-fibular
 trunk / anterior tibial artery

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Let's go

- Median laparotomy and proximal zone control:
 Aorto-iliac junction: check
- Iliac wing: hole: check
- Distal zone: lateral selective approach of anterior tibial artery: check
- Renforced prothetic graft Gore 8mm + Venous allograft (Bioprotec)

- 1-hour later
- * Post-interventionnal care:
 « The foot is cold, the patient is very painful! »

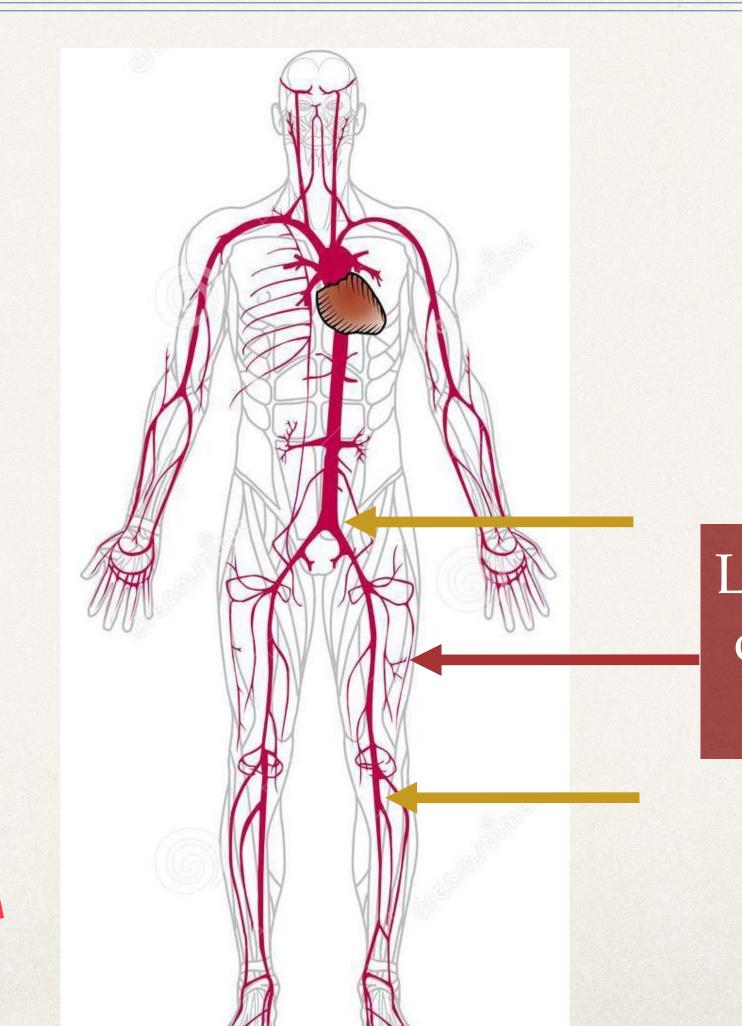
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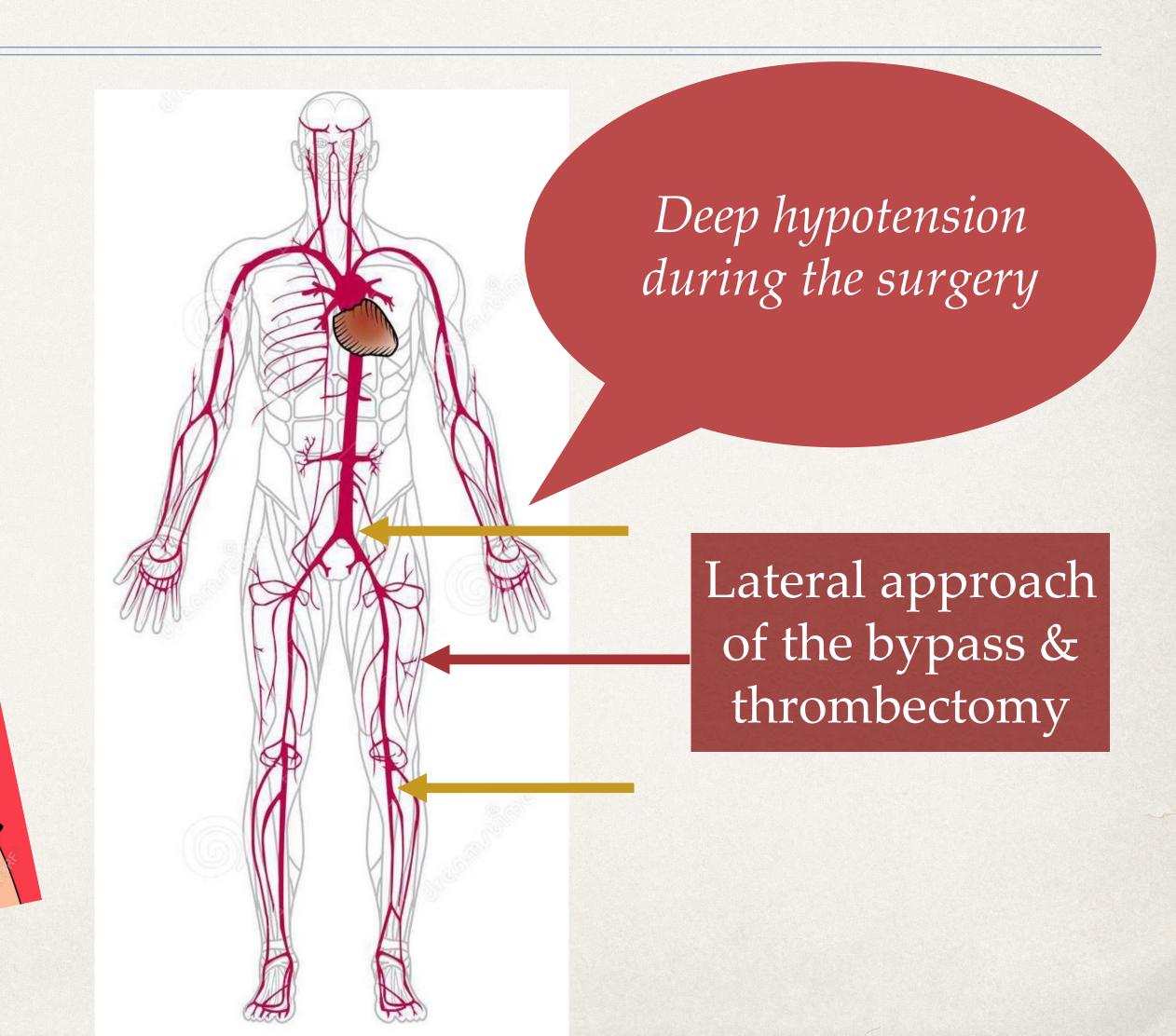
Lateral approach of the bypass & thrombectomy

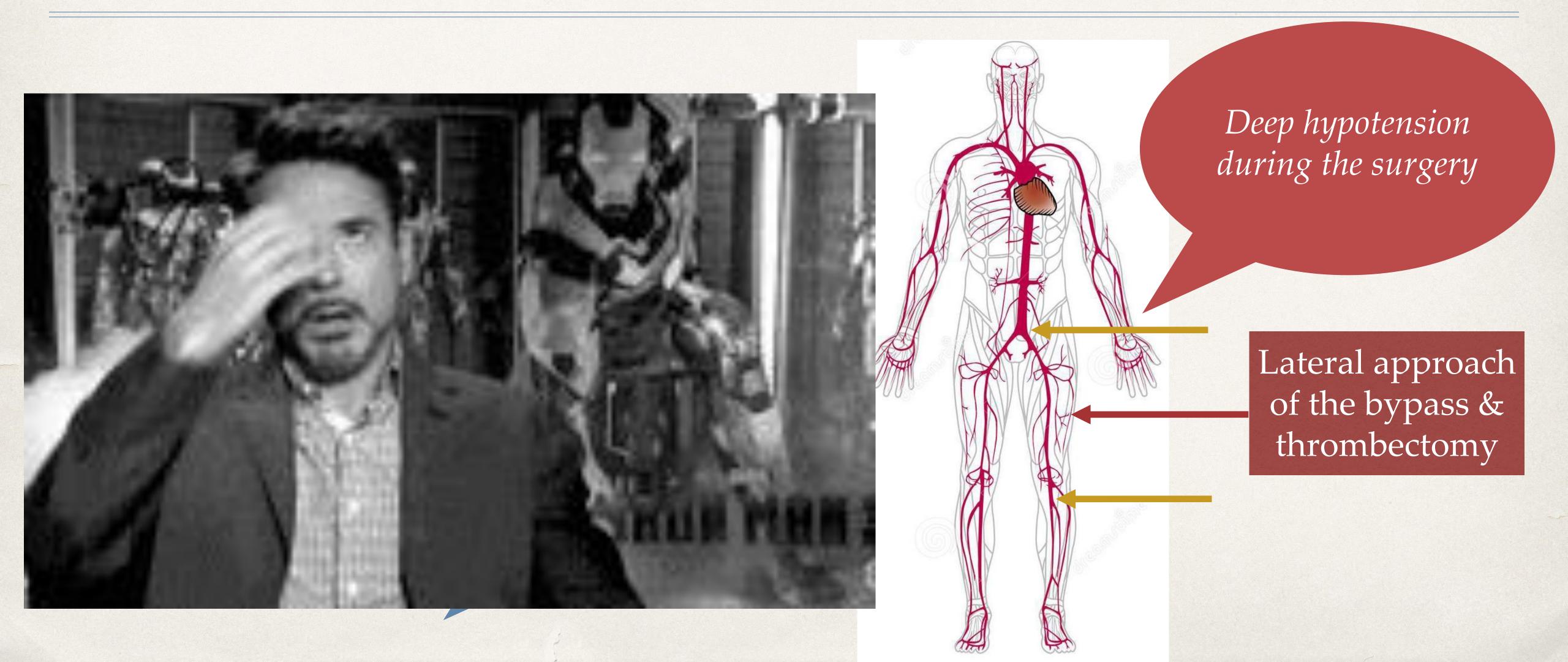
1-hour later

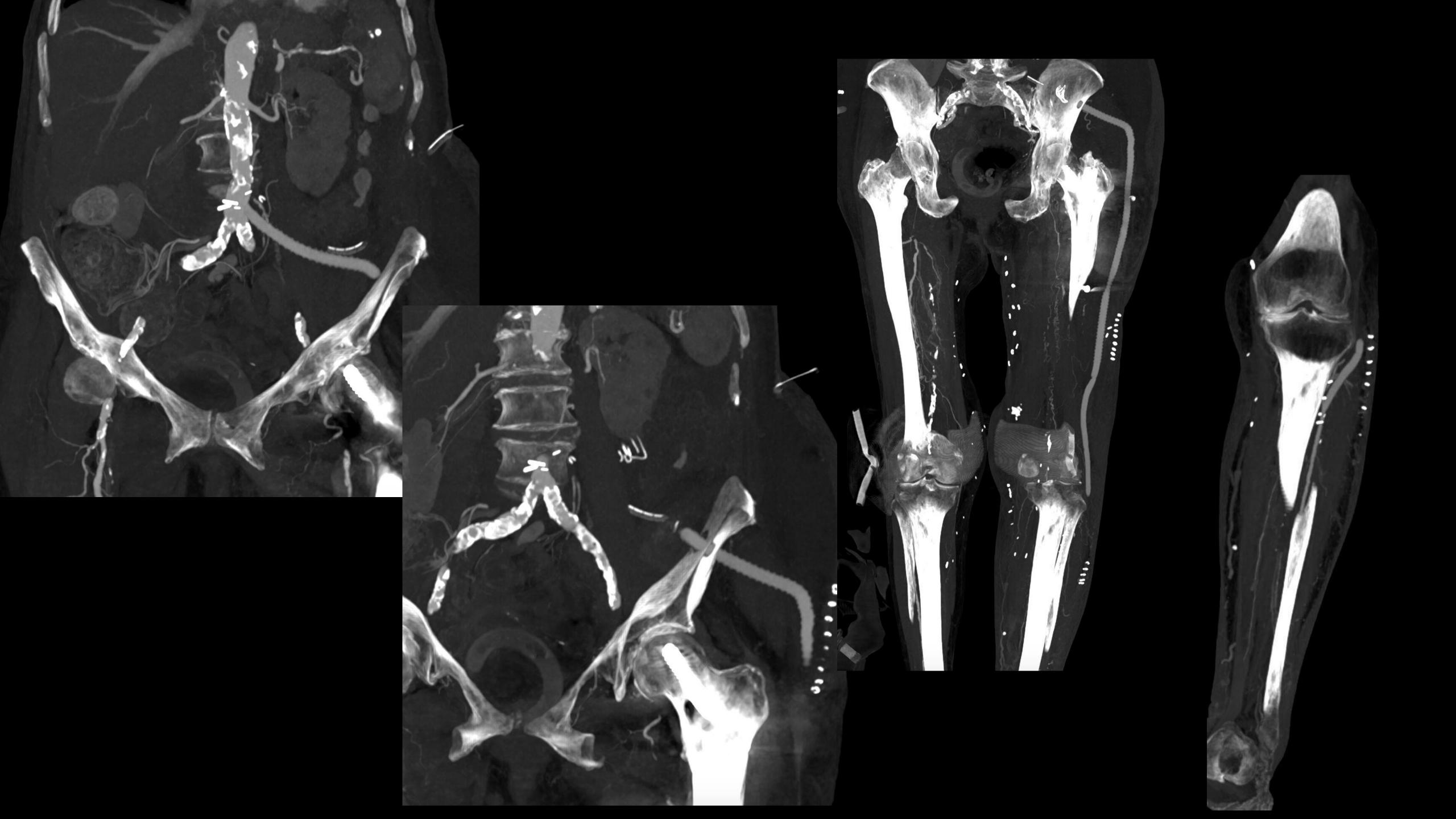
* Post-interventionnal care:

« The foot is cold, the patient

is very painful! »



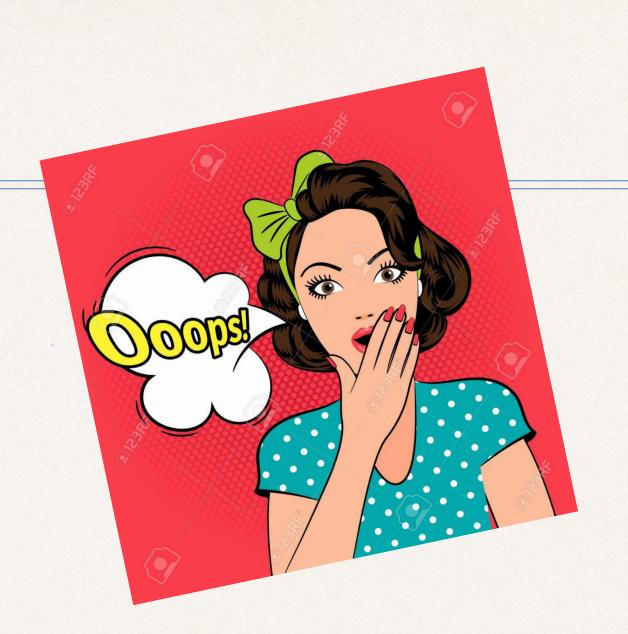






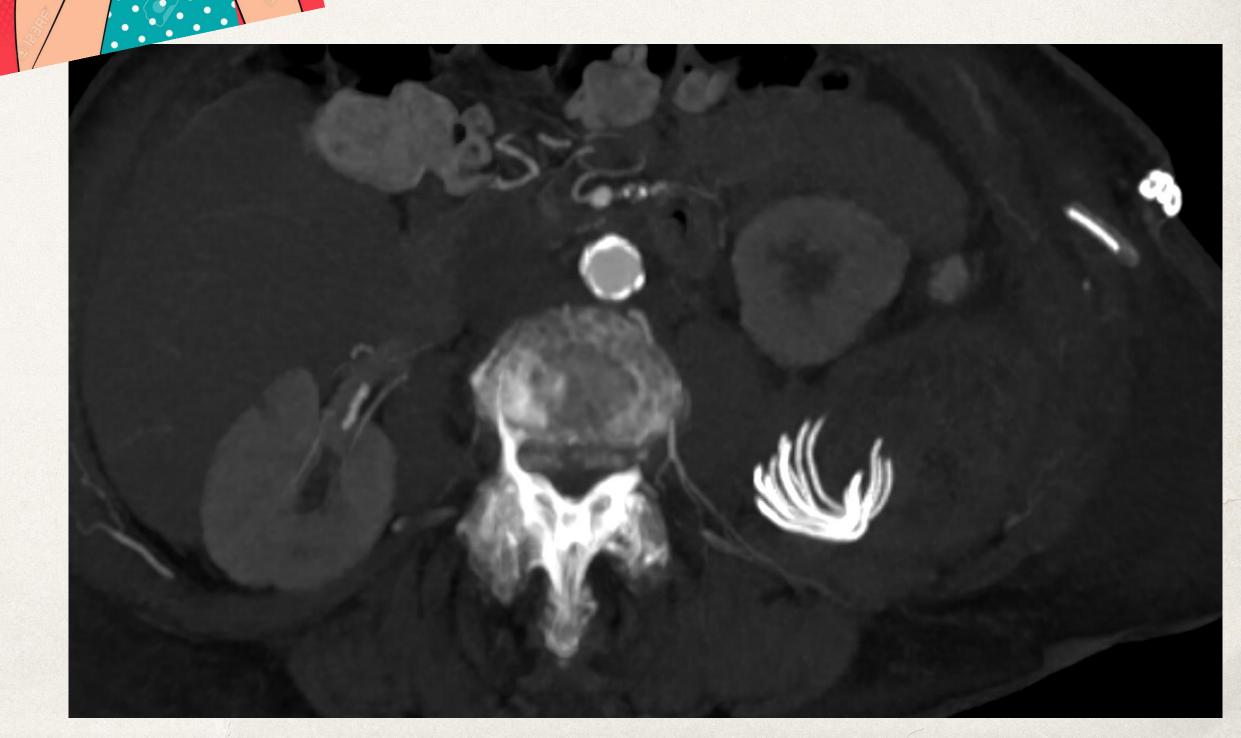
- 2 days later
- * Radiologist: « Wonderful bypass! Just to know: what did you leave in the abdomen? »
- Operative room: « No, textil count was ok! »

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10 bloody compresses forgotten under the relief of iliac wing

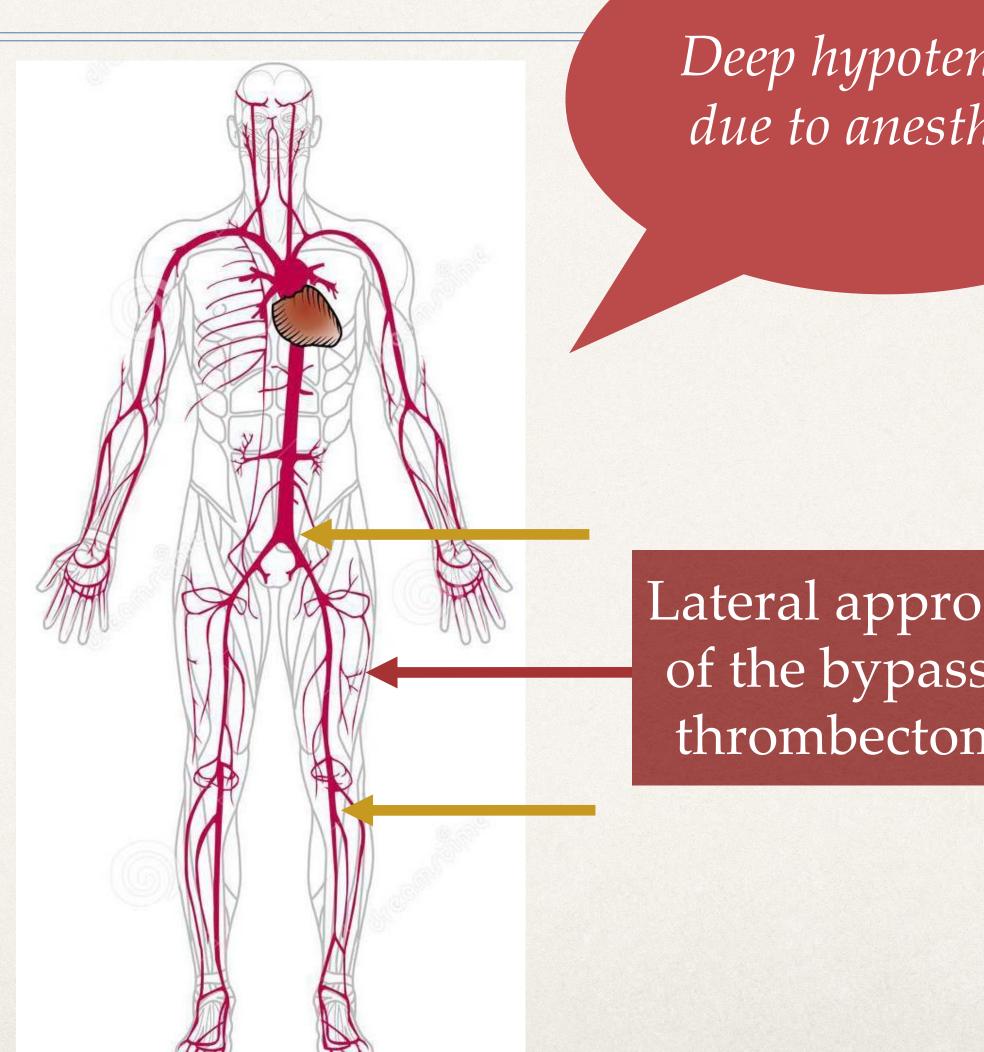


- September 2021
- * Right side: bypass CFA-PFA and iliac covered stent
- * Post-interventionnal care: « The foot is cold, the patient is very painful! »

- September 2021
- Right side: bypass CFA-PFA and iliac covered stent
- Post-interventionnal care: « The foot is cold, the patient is very painful! »
- * « On the right side ? »
- * « No, on the left !!! »



* Take the same and start again!



Deep hypotension due to anesthesia

Lateral approach of the bypass & thrombectomy

Extra-anatomic bypass

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Secondary Extra-anatomic Infrainguinal Bypass following Lower Limb Tumoral Resection

Léonore Freycon-Tardy ¹, Dorian Verscheure ¹, Elie Fadel ¹, Sacha Mussot ¹, Olaf Mercier ¹, Philippe Brenot ¹, Ryad Bourkaib ¹, Dominique Fabre ², Stephan Haulon ¹

Results: Five patients underwent extra-anatomic iliopopliteal bypass for oncological purpose from 2008 to 2018 at our institution. Mean age at surgery time was 52 years (standard deviation = 19.3). Prosthetic graft was used in all cases. Primitive tumor involved Scarpa triangle in 3 cases (soft tissue sarcomas) and ganglionic metastasis involved Scarpa triangle in 2 cases (epidermoid carcinoma). Clinical presentation was ischemic in 4 cases and hemorrhagic in 1 case. One patient died during hospitalization. Of the 4 survivors, 3 patients had a patent bypass at the end of follow-up (2 had bypass thrombectomy, 1 patient had major amputation).

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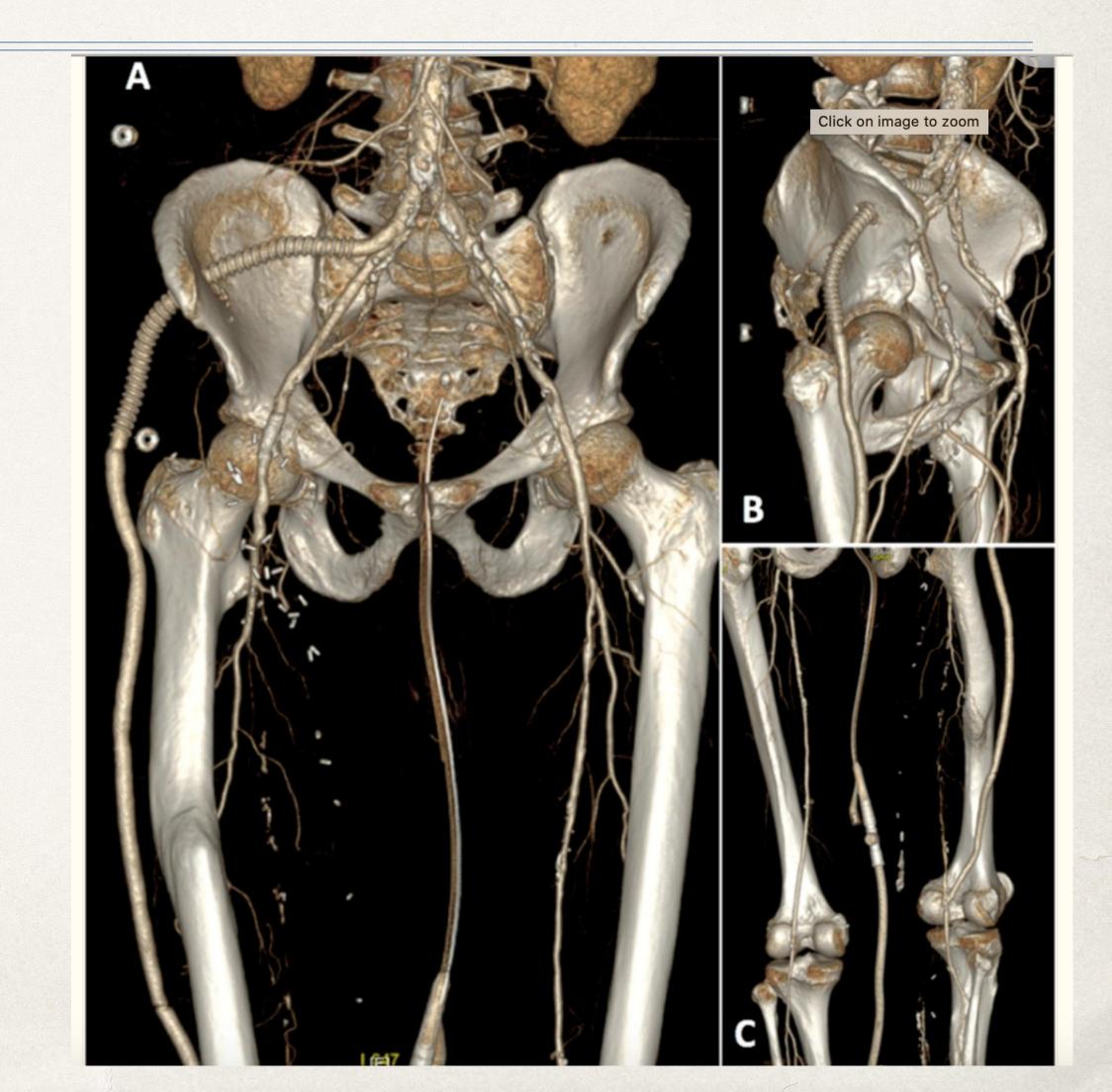
EJVES Short Rep. 2019; 42: 31–33.

Published online 2019 Feb 20. doi: <u>10.1016/j.ejvssr.2019.01.002</u>

PMCID: PMC6411489 PMID: <u>30931404</u>

Trans-iliac Bypass for Critical Limb Ischaemia with Groin Necrosis: A Case Report

Youcef Lounes,* Baris A. Ozdemir, Pierre Alric, and Ludovic Canaud

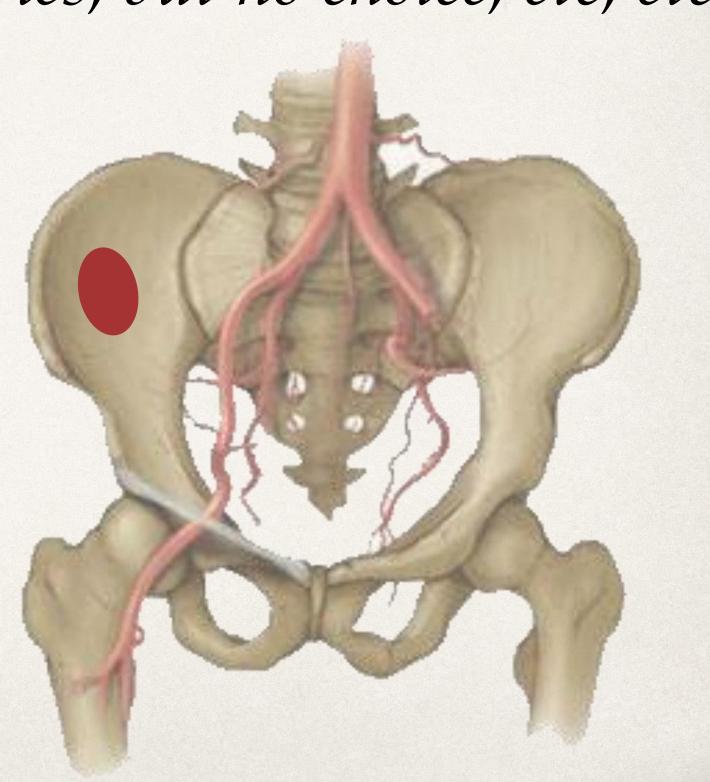


Take home message

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- Other extra-anatomic option impossible

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