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Successful endovascular left iliac vein stent insertion treatment of acute DVT: May Thurner Syndrome

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May Thurner Syndrome also known as “Iliac Vein Compression Syndrome” or Cockett’s Syndrome. In this syndrome the left common iliac vein is compressed by the right common iliac artery and it causes development of deep vein thrombosis. Anticoagulant therapy is one of the most chosen protocol for this syndrome but alone is highly risky for the development of pulmonary embolism and early recurrence. We report a case of May-Thurner Syndrome with the treatment of Catheter-guided thrombolysis and angioplasty with stent implantation, we think this is a safe and effective method for May-Thurner Syndrome. We report a case of a 55-year old woman. A female patient presented to the emergency department with complaints of swelling, edema and pain which had started about 4 hours ago. In physical examination, she was normotensive and +2 edemas were present. Peripheral pulses were open. No difficulty in breathing or tachycardia. A diagnosis of deep vein thrombosis from iliac vein to popliteal vein was made. The patient was taken to the interventional catheterization unit. Puncture was made to popliteal vein and a sufficient recanalization was made from left common iliac vein to vena cava inferior using AngioJet™ Peripheral Thrombectomy System by Boston Scientific. Narrowness in left iliac vein and residue thrombosis were observed, and accordingly balloon dilatation was performed first and a stent was inserted into the iliac vein and a balloon dilatation was performed again in the stent. After the procedure, popliteal vein was completely opened, and a very slight amount of residual thrombus was seen in the left iliac vein. The procedure was finalized since the venous return flow was very good. The patient was discharged with coumadin treatment.

Biography

Kenan Abdurrahman Kara graduated in Cardiovascular Surgery from the Ege University Medicine School in 2006. He completed his cardiovascular assistant training from Süleyman Demirel University Heart Center (2012). In 2009-2010 he worked for Professor Francesco Donatelli (Milan, Italy) as a Visiting Assistant. Presently he is working as an Assistant Professor at the Yeditepe University Hospital Cardiovascular Surgery Department. His interested areas are: minimally invasive cardiac surgery, multiple arterial graft usage in CABG and endovascular procedures.

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