



Modern Treatment Aspects of Aortoiliac Occlusive Disease and Leriche Syndrome - a Jump into Endovascular Era

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Abstract:

69 of the endovascular cases and 65 of the open repairs were with Leriche Syndrome, the rest of the patients being with uni- or bilateral iliac occlusion. Technical success was achieved in all patients, while preoperative mortality rate remained 0.0% in both groups. In 4 endovascular cases (2.5%) major intraoperative complications occurred, one of them was switched to open surgery. Early postoperative mortality is 1.9% for endovascular vs. 6.8% for open surgery. Primary patency at 12th month is 98.8% for group A (n=159) and 98.6% for group B (n=72). Conclusion: Short- and long-term patency for both methods is similar and remains significantly high. Stentgrafts show better long-term results compared to bare-metal stents due to higher patency rate, no intimal hyperplasia and in-stent restenoses but recanalization with bare-metal stents is appropriate option, due to lower price, and doesn't preclude the possibility of re-stenting, secondary CERAB or open surgical reconstruction. Endovascular recanalization is better method due to lower mortality rate, shorter hospital stay, higher patient satisfaction and better quality of life.

Biography:

Dobrichkoff L is currently working at Sofiamed University General Hospital, Sofia, Bulgaria.



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