Clinical News Bulletin

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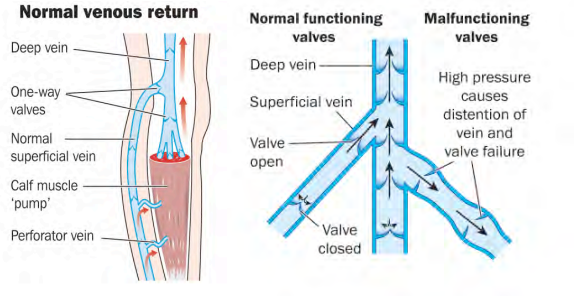
AndraTec AltoSa-Premier a Novel Maximum Pressure XL Balloon first UK Experience; CASE REPORT Venous Ilio-Femoral Obstruction at St. Thomas Hospital London, UK

References: Dr. Stephen Black, Consultant Vascular Surgeon St. Thomas Hospital London / UK

Introduction, what is venous disease?

Venous disease is deeper than varicose veins. The venous system of the lower extremities includes the deep veins, superficial veins, and perforator veins. Deep venous disease may result from obstruction and/or reflux. There are different types of venous obstructions:

- Acute / DVT disease
- Post-thrombotic syndrome (PTS)
- Nonthrombotic iliac vein lesions (NIVL)



Post-thrombotic syndrome and deep vein thrombosis (DVT) are serious venous disorders. DVT is when a blood clot forms in the deep veins of the legs, pelvis, or abdomen. PTS is a long term complication that can develop after DVT.
PTS occurs in approximately 20-50% of the DVT patient population.

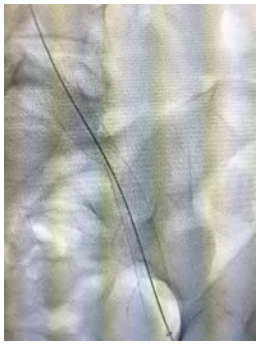
A nonthrombotic iliac vein lesion (NIVL) is an obstruction in the deep vein system that is not caused by a clot, such as May-Thurner Syndrome/Cockett Syndrome, or iliac vein compression syndrome. In order to properly diagnose and treat outflow obstruction a more thorough diagnosis is required. This can be done through the use of a duplex ultrasound, venogram, and/or intravascular ultrasound (IVUS). Venous disorders with an obstructive component can be safely and successfully treated with stenting.

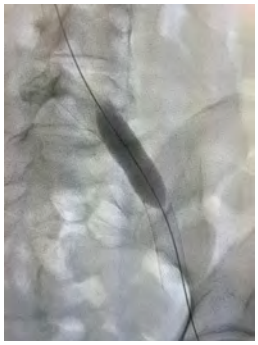
Case presentation:

A 25 year-old male patient was administered to our hospital with left-side ilio-femoral obstruction. A venogram and IVUS assessment demonstrated venous outflow obstruction without thrombosis. An obstructive fibrotic lesion was revealed.

Material and Methods:

We treated the patient with pre-dilatation of the occlusive lesion with an **AltoSa-Premier** 14x40mm PTA balloon at 16atm **(AndraTec Germany)**. Followed by the placement of a Veniti Vici Venous Stent 16x120mm (Veniti, Missouri / USA). We then re-dilated with the same **AltoSa-Premier** 14x40m balloon which was inflated to 18atm. The **AltoSa-Premier** maximum pressure PTA balloon is specifically designed to treat resistant stenosis and fibrotic lesions consistent with Venous Disease.





Discussion and conclusion:

Interventional venous treatment is still at its early stage. Results are encouraging and new material will improve patient outcomes. High pressure dilatation balloons (>14 -16atm) are essential to procedural success. Compared against other balloons of similar caliber, the benefits of the **AltoSa-Premier** are shorter shoulders, the faster inflation & deflation time, and the excellent secondary profile for easy sheath removal. The **AltoSa-Premier** maximum pressure PTA Balloon **(AndraTec Germany),** is an excellent tool that allows the treatment of these type of high pressure requiring lesions.

Conflict of Interests: The authors declare they have no potential conflict of interests or any financial relations.

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