



Iliac aneurysms: endovascular solutions

G. Panuccio



**11-12
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- Chirurgie Vasculaire
- Chirurgie cardio-vasculaire et thoracique
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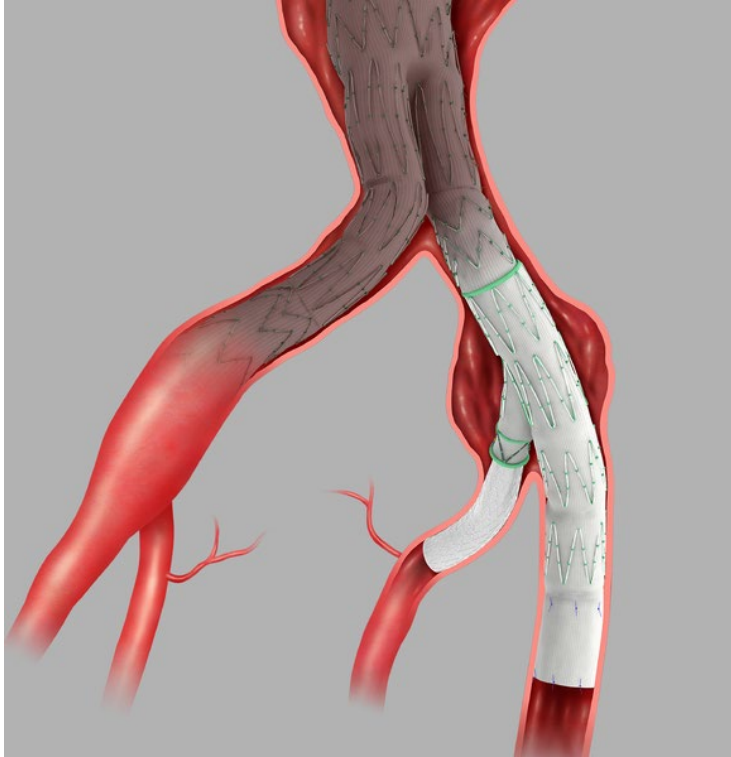
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Disclosures

COOK: Proctoring



Cook Zenith Iliac Branch (ZBIS)
Dacron

Cook Incorporated's Zenith Branch Endovascular Graft Receives CE Mark Approval

October 10, 2006 | 1 min read



BLOOMINGTON, Ind.--(BUSINESS WIRE)--William Cook Australia, a global leader in endovascular therapy products, has taken another major step forward in the treatment of complex aortic aneurysms. The Zenith Branch Endovascular Graft, a new product using Cook's groundbreaking Zenith anchored endograft technology, has received CE Marking approval in Europe, allowing its distribution in the European Union and other countries that recognize the CE Mark.

Why Preserve Hypogastric (Internal Iliac) Artery Flow?

1. Prevention of Pelvic Ischemic Complications

- *Erectile dysfunction*: ~4%
- *Persistent symptoms (>6 months)*: ~16%
- *Buttock claudication*: up to 28%

Ir J Med Sci (2016) 185:865–869
DOI 10.1007/s11845-015-1384-4



ORIGINAL ARTICLE

How safe is internal iliac artery embolisation prior to EVAR? A 10-year retrospective review

J. G. McGarry¹ · A. O. Alenezi¹ · F. P. McGrath¹ · M. F. Given¹ ·
A. N. Keeling¹ · D. S. Moneley² · A. L. Leahy^{2,3} · M. J. Lee^{1,3}

2. Relevance to Spinal Cord Perfusion

Eur J Vasc Endovasc Surg (2015) 49, 248–254

Editor's Choice — The Impact of Early Pelvic and Lower Limb Reperfusion and Attentive Peri-operative Management on the Incidence of Spinal Cord Ischemia During Thoracoabdominal Aortic Aneurysm Endovascular Repair

B. Maurel^a, N. Delclaux^a, J. Sobocinski^a, A. Hertault^a, T. Martin-Gonzalez^a, M. Moussa^a, R. Spear^a, M. Le Roux^a, R. Azzaoui^a,
M. Tyrrell^b, S. Haulon^{a,*}

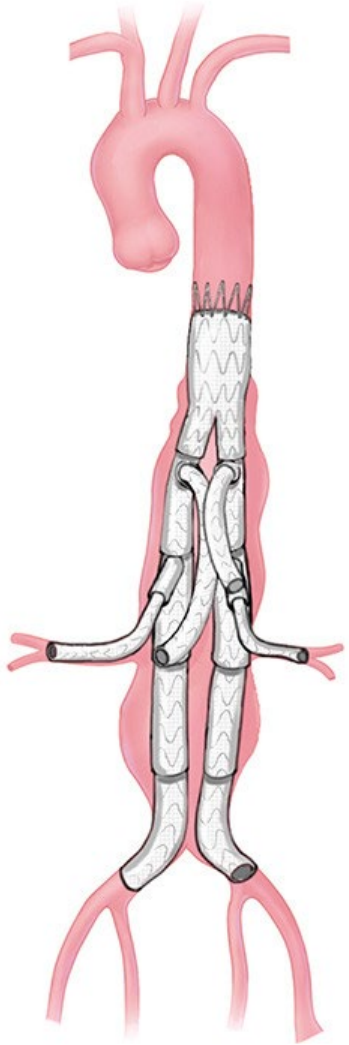
^a Aortic Centre, Hôpital Cardiologique, CHRU de Lille, INSERM U1008, Université Lille Nord de France, 59037 Lille Cedex, France

^b King's Health Partners, London, UK

Modularity transforms iliac devices into versatile endovascular tools.

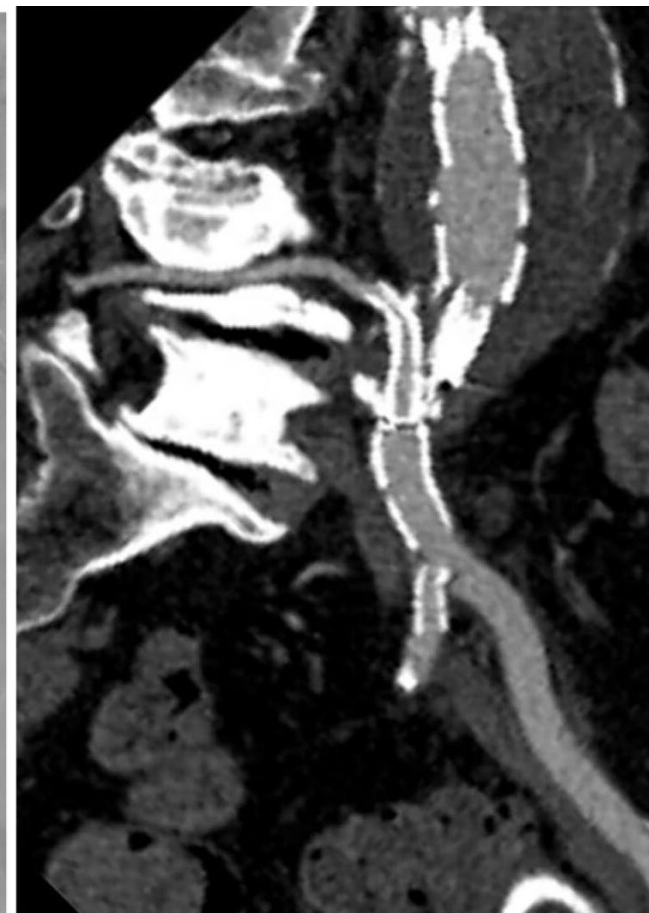
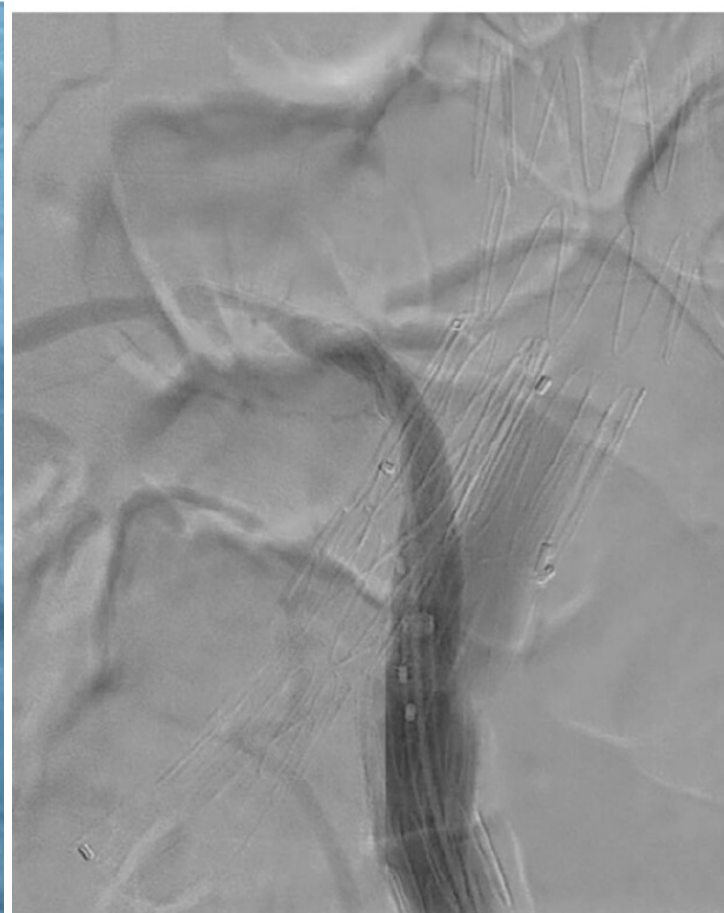
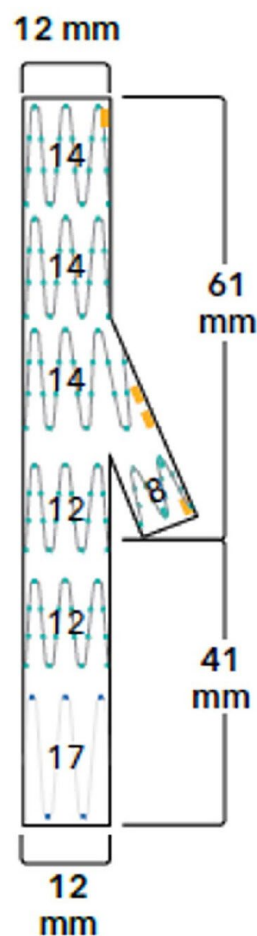
Multi-Branch AOrtic reconstruction with G-iliac system (BAO-G) technique in thoracoabdominal aortic aneurysm endovascular repair

Jiang Shao, MD, Yiyun Xie, MD, Zhichao Lai, MD, and Bao Liu, MD, Beijing, China



Physician-Modified Reversed Iliac Branch Device to Prevent Spinal Cord Ischemia in an Urgent Branched Endovascular Aortic Repair

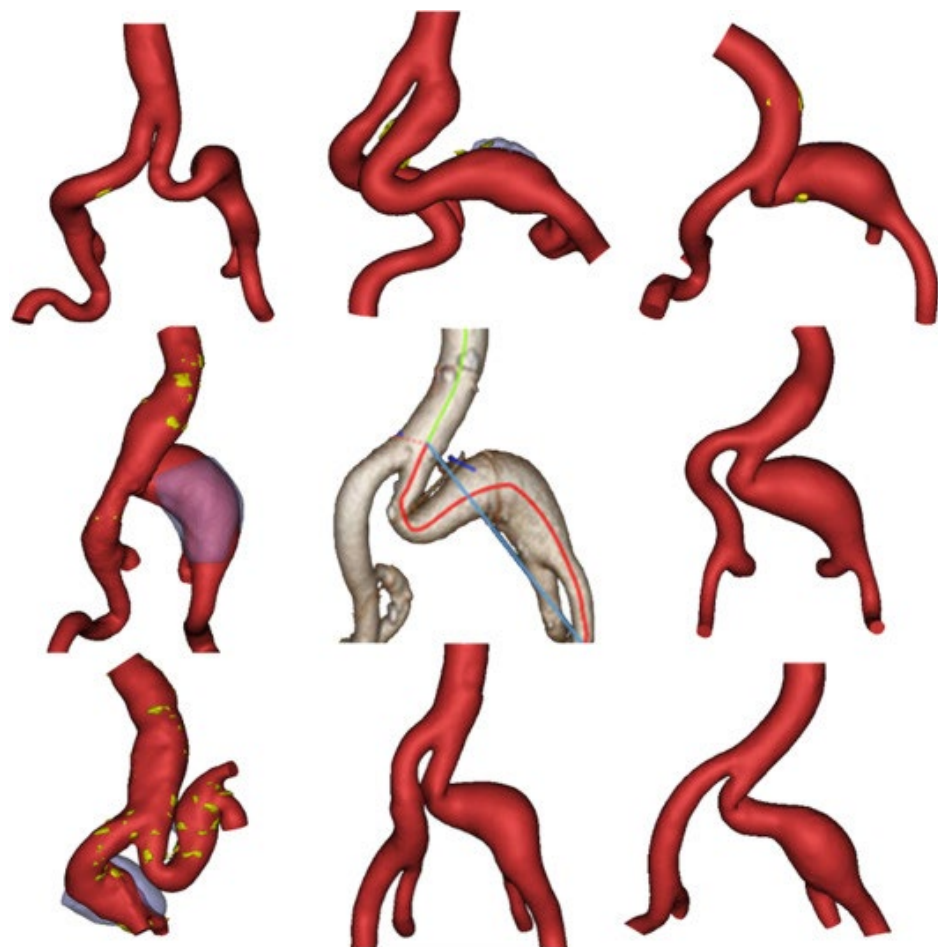
Karolina Malik, MD, PhD , Tilo Kölbel, MD, PhD, Alessandro Grandi, MD , Jose Torrealba, MD, Fiona Rohlfes, MD, PhD , and Giuseppe Panuccio, MD, PhD



LESSONS LEARNED OVER 20 YEARS

Effect of iliac tortuosity on outcomes after iliac branch procedures

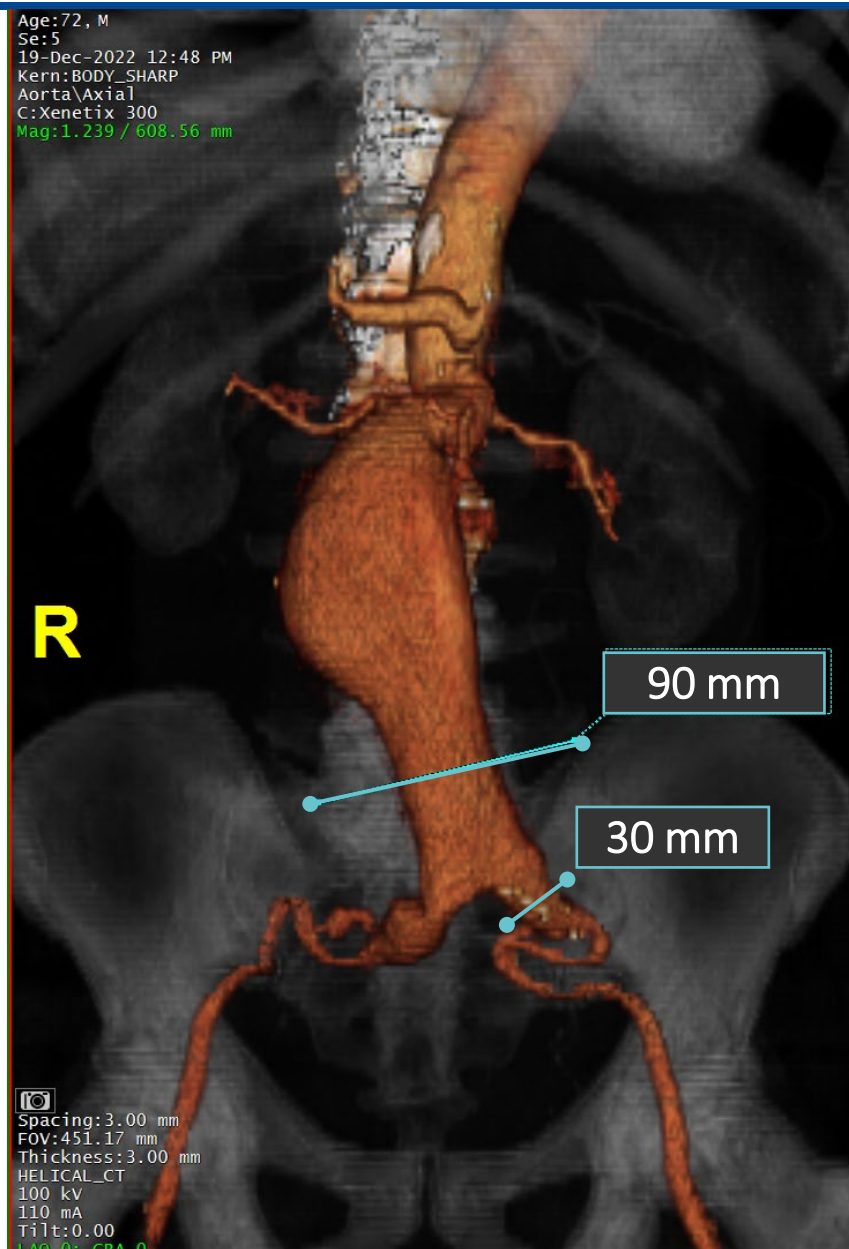
Cecilia Fenelli, MD,^{a,b} Mauro Gargiulo, MD, PhD,^b Carlota Fernandez Prendes, MD, FEBVS,^a
Gianluca Faggioli, MD, PhD,^b Konstantinos Stavroulakis, MD,^a Enrico Gallitto, MD, PhD, FEBVS,^b
Jan Stana, MD, PhD,^a Paolo Spath, MD,^b Barbara Rantner, MD, PhD,^a and
Nikolaos Tsilimparis, MD, PhD, FEBVS, FACS,^a *Munich, Germany; and Bologna, Italy*



External Iliac Artery Tortuosity: A Key Limitation & Driver of Reintervention



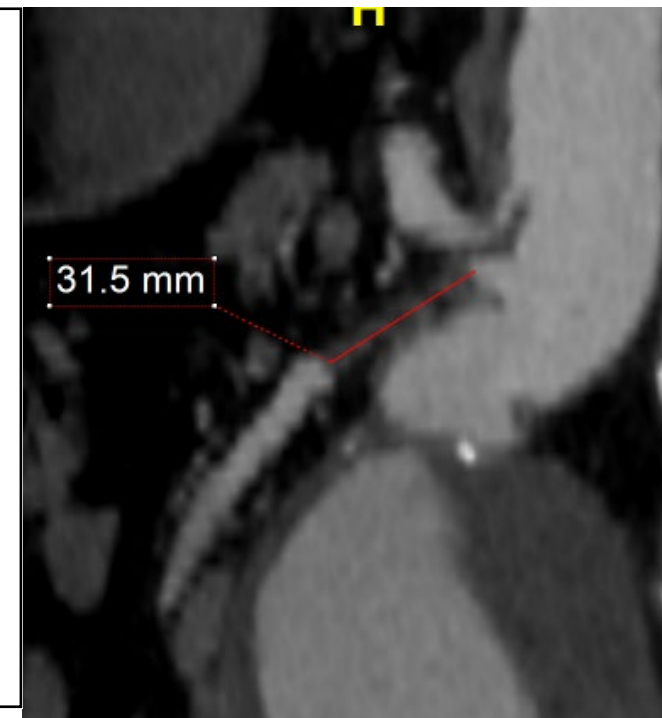
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Se: 5
19-Dec-2022 12:48 PM
Kern: BODY_SHARP
Aorta\Axial
C: Xenetix 300
Mag: 1.239 / 608.56 mm



Symptomatic pararenal AAA 72yo and CAD 30% EF

severe tortuosity of the iliac vessels & left CIA aneurysm

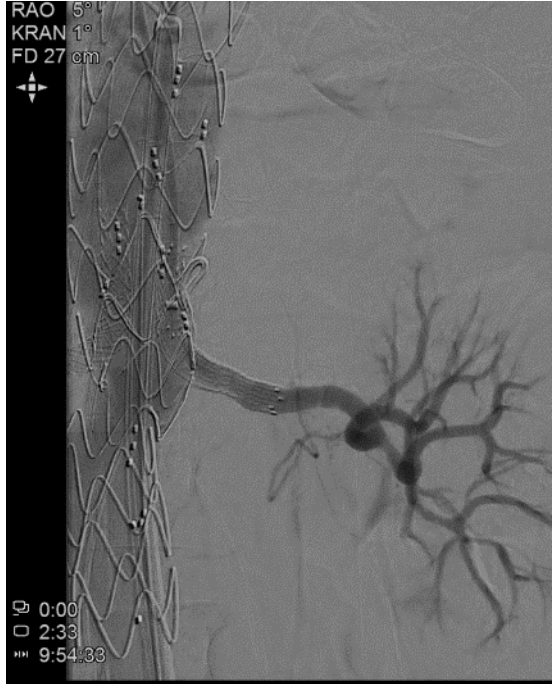
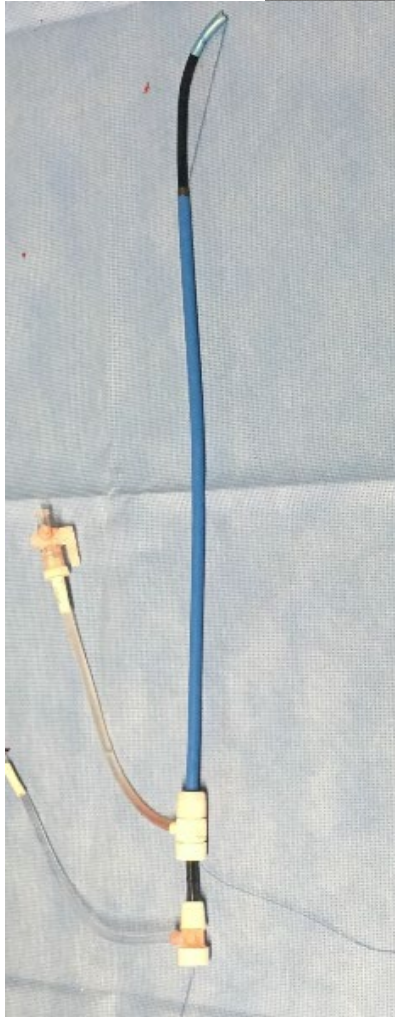
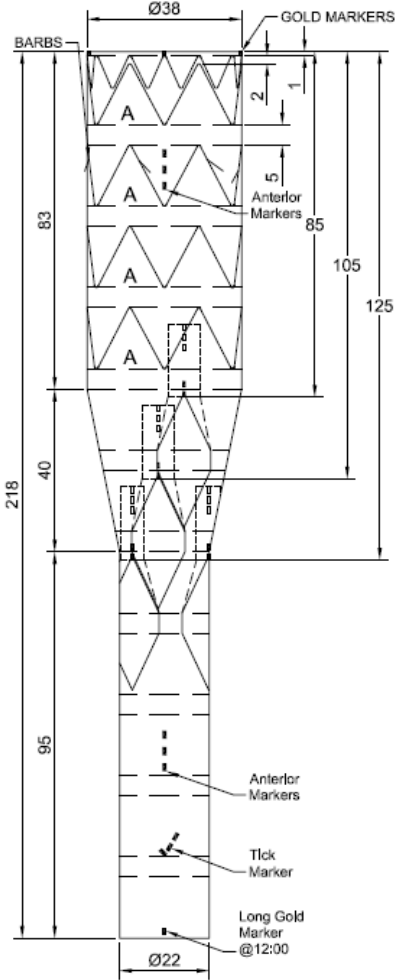
occlusion of the SMA





CMD iBEVAR Graft intended for a different Patient

Through a single
right femoral approach

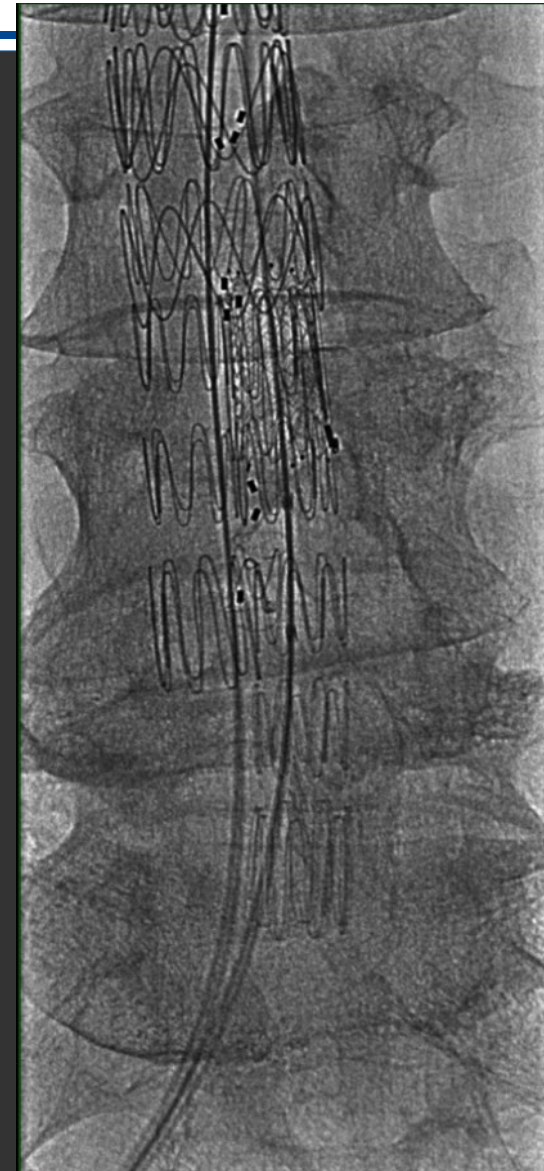




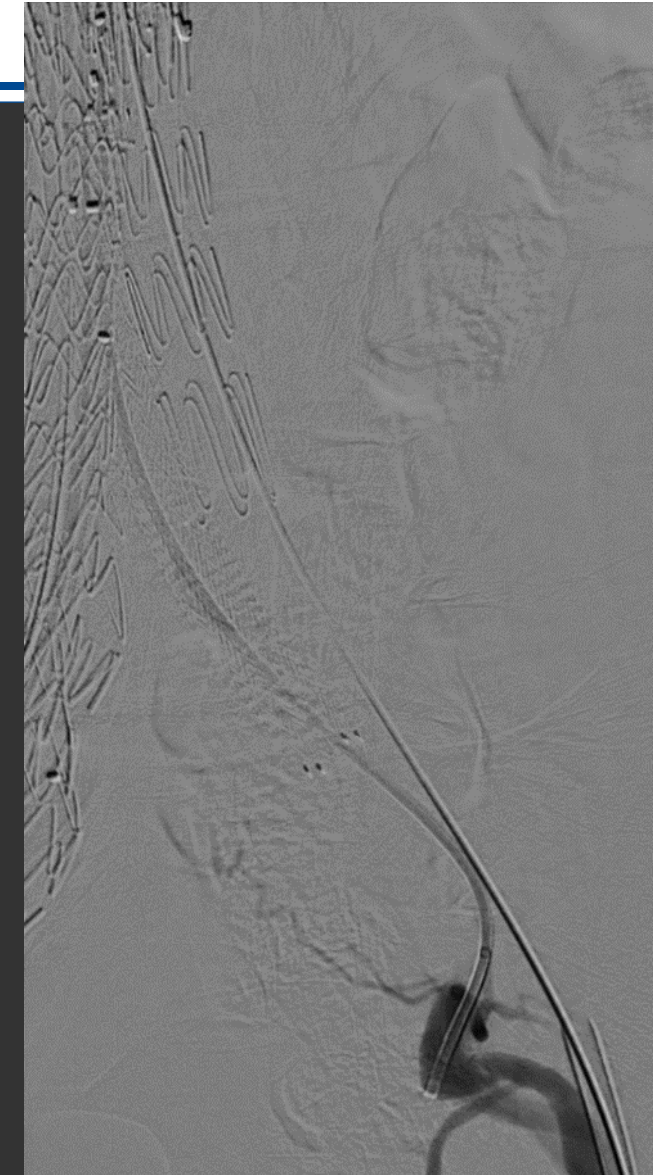
ISB on contralateral leg



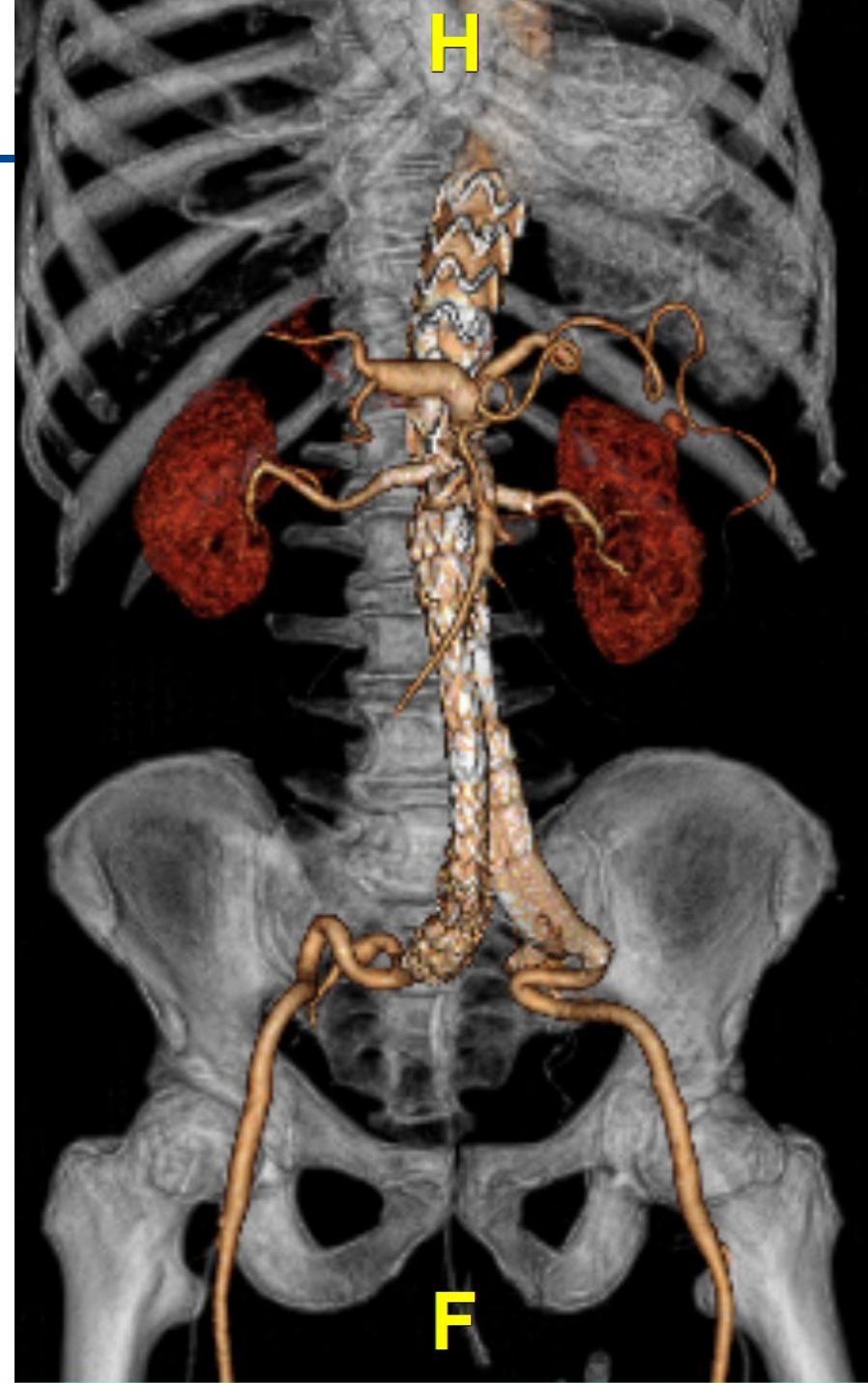
Short Unibody



Retrograde graft catheterization



All catheterization from right to left (Modified steerable Sheath)



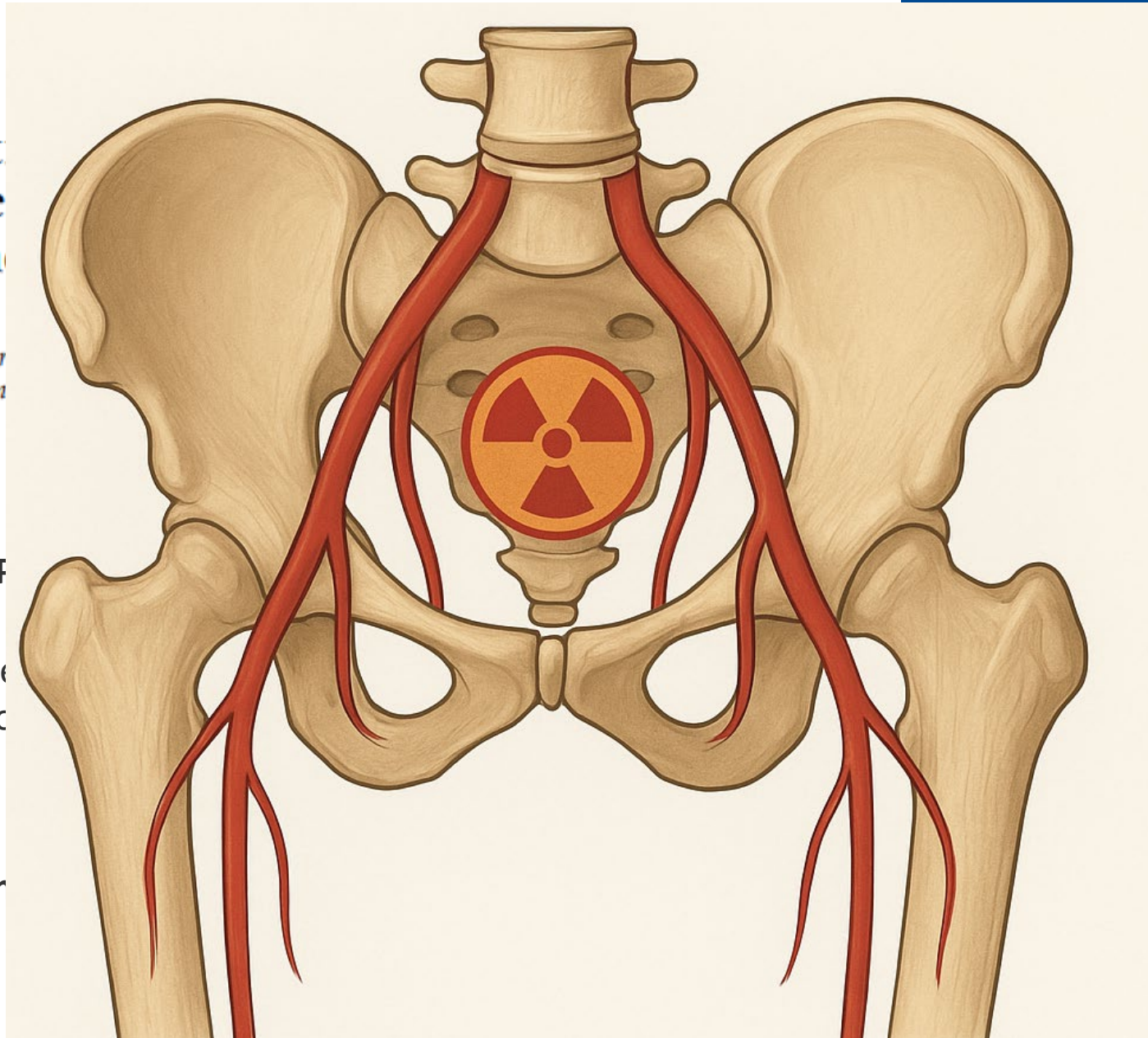
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*Blandine Maur
and Simon Rin*

Dose-Area Product (DAF

higher procedure
use of hybrid roc

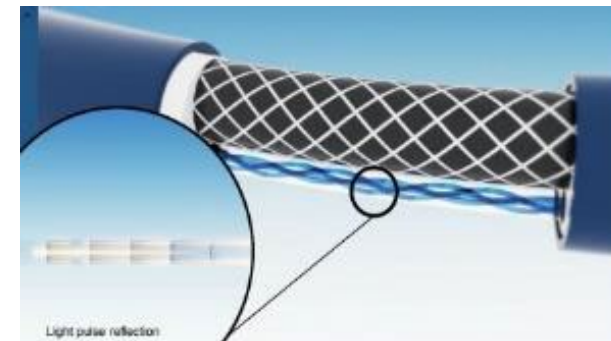
Employing **fusion imagin**



oy 2015 ($p < 0.01$).

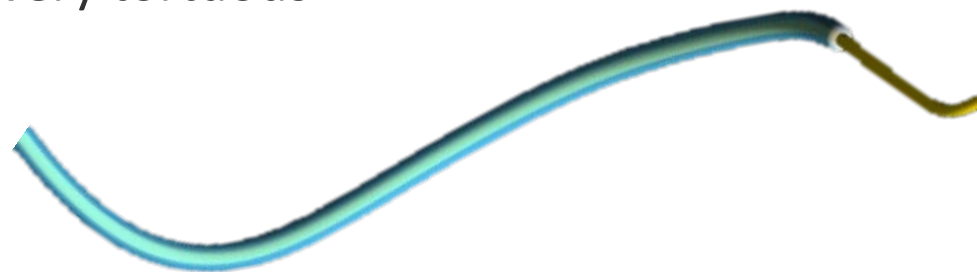
Fiber Optic RealShape (FORS) Technology for Endovascular Navigation in Severe Tortuous Vessels

Giuseppe Panuccio, MD, PhD¹ , Jose Torrealba, MD¹ ,
Fiona Rohlfes, MD, PhD¹ , Franziska Heidemann, MD, PhD¹ ,
Bart Wessels, PhD², and Tilo Kölbel, MD, PhD¹ 



Single case study

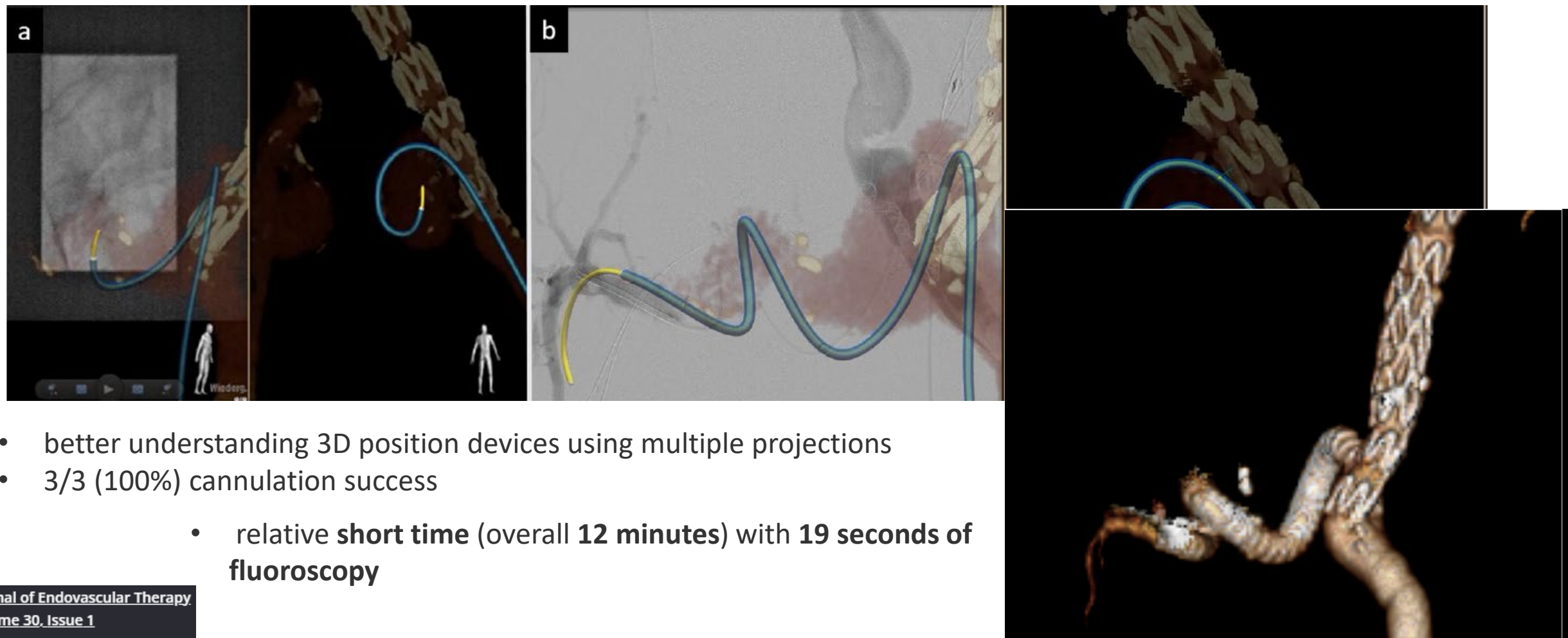
79-year old, male, 3 navigation tasks in very tortuous anatomy



Medical history:

history of hypertension, CAD, atrial fibrillation

Fiber Optic RealShape (FORS) Technology for Endovascular Navigation in Severe Tortuous Vessels



- better understanding 3D position devices using multiple projections
- 3/3 (100%) cannulation success
 - relative **short time** (overall **12 minutes**) with **19 seconds of fluoroscopy**

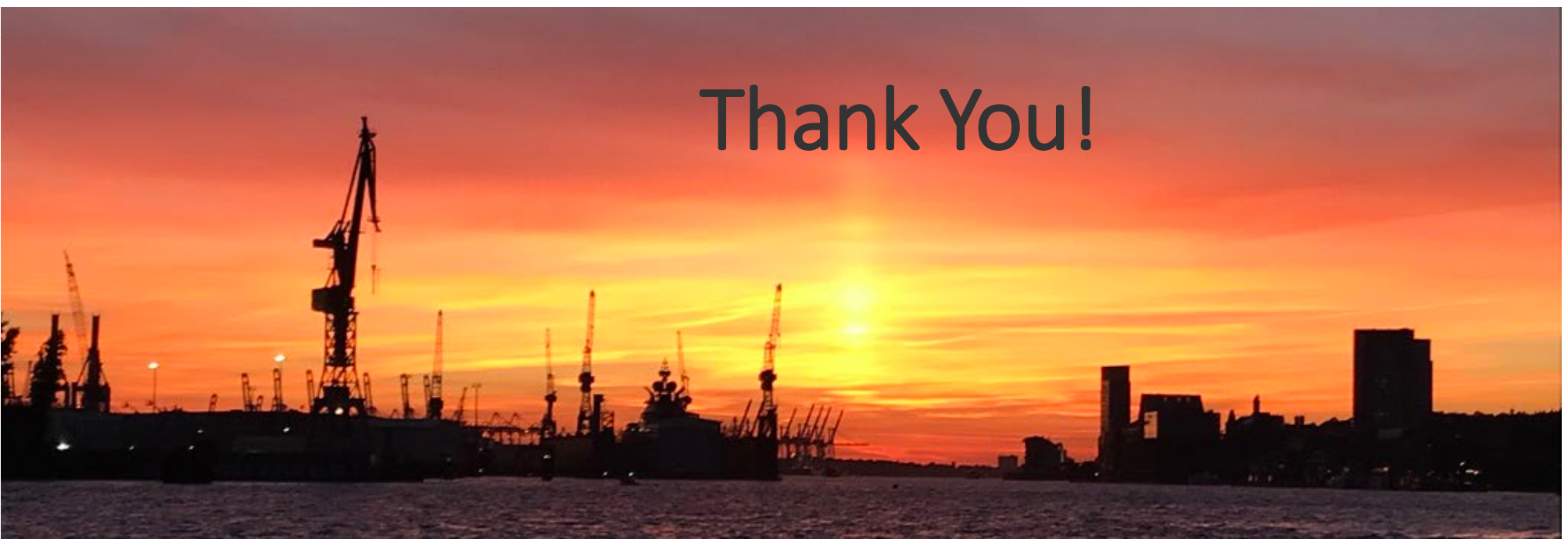
Conclusions

Iliac Branch Devices (IBDs) have proven **and effective** solutions, with high patency and lower reintervention compared to embolization techniques.

Available grafts extend their **significantly**, especially because **combined with each other eff**

Pay attention... and don't step too hard on the X-ray pedal!





Thank You!

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Giuseppe Panuccio

Senior Consultant

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