SURGICAL & RADIOLOGICAL ENDOVASCULAR SYMPOSIUM
SRES
11-12 SEPT. 2025
• Radiologie Interventionnelle
• Chirurgie Vasculaire
• Chirurgie cardio-vasculaire et thoracique
• Médecine vasculaire
PALAIS DU PHARO
MARSEILLE
www.sres-symposium.org

Cas clinique
Artères membres inférieurs

Mélanie CARRET

CHU Brest

- Homme, 85 ans
- AOMI Rutherford 3

- Actif (vélo, natation)

-> tabagisme sevré

-> traitement médicamenteux optimal

-> rééducation à la marche ++

Define the approach

↓

Cross the lesion

↓

Vessel preparation

↓

Treatment

Define the approach

→

- Cross over
- Antérograde
- Rétrograde

Cross the lesion

Vessel preparation

Treatment

Define the approach

→

- Cross over
- Antérograde
- Rétrograde

Cross the lesion

Vessel preparation

Treatment

Define the approach

Cross the lesion

- Intraluminal
- Subintimal

Vessel preparation

Treatment

Define the approach

Cross the lesion

- Intraluminal
- Subintimal

Vessel preparation

- Guide 0,018
- Sonde de recanalisation

Treatment

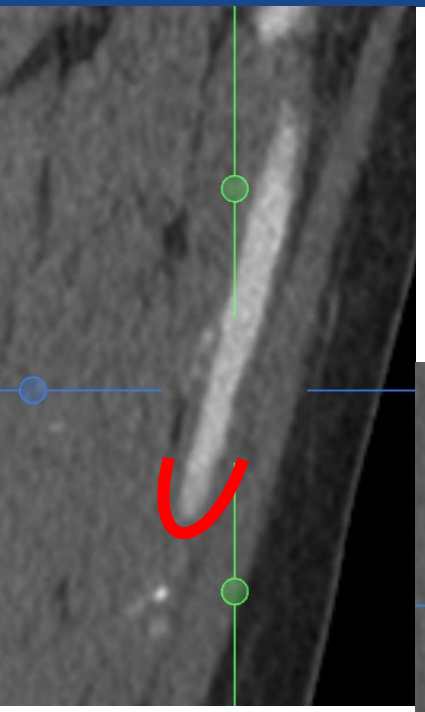
Subintimal Versus Intraluminal Approach for Femoropopliteal Chronic Total Occlusions Treated With Intravascular Ultrasound Guidance

Yusuke Tomoi, MD; Mitsuyoshi Takahara, MD, PhD; Shoichi Kuramitsu, MD, PhD; Yoshimitsu Soga, MD, PhD; Osamu Iida, MD; Masahiko Fujihara, MD; Daizo Kawasaki, MD, PhD; Kenji Ando, MD; on behalf of the IVORY Study Investigators*

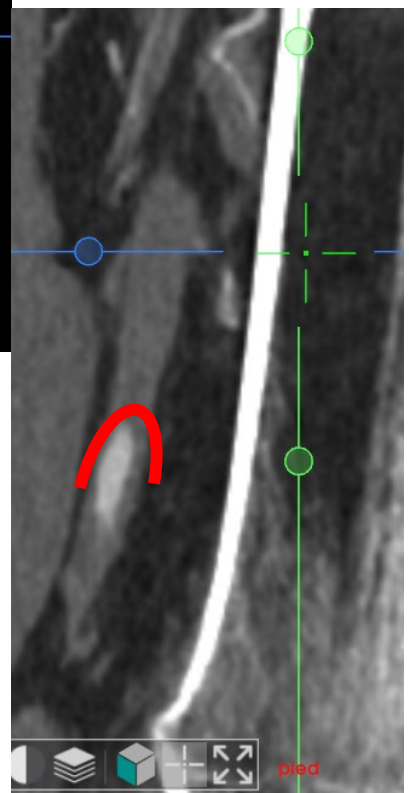
Tomoi Y et al. J Am Heart Assoc 2021

Variable	Overall population			Matched population		
	SWP (n=186)	IWP (n=314)	SD (%)	SWP (n=170)	IWP (n=293)	SD (%)
Peripheral Arterial Calcium Scoring System classification						
Grade 0	39.2%	33.4%	12.1	38.8%	37.0%	3.7
Grade 1	20.4%	18.2%	5.8	19.4%	20.0%	1.4
Grade 2	14.5%	14.3%	0.5	15.9%	14.1%	5.1
Grade 3	8.6%	10.8%	7.5	7.6%	8.9%	4.7
Grade 4	17.2%	23.2%	15.1	18.2%	20.0%	4.5

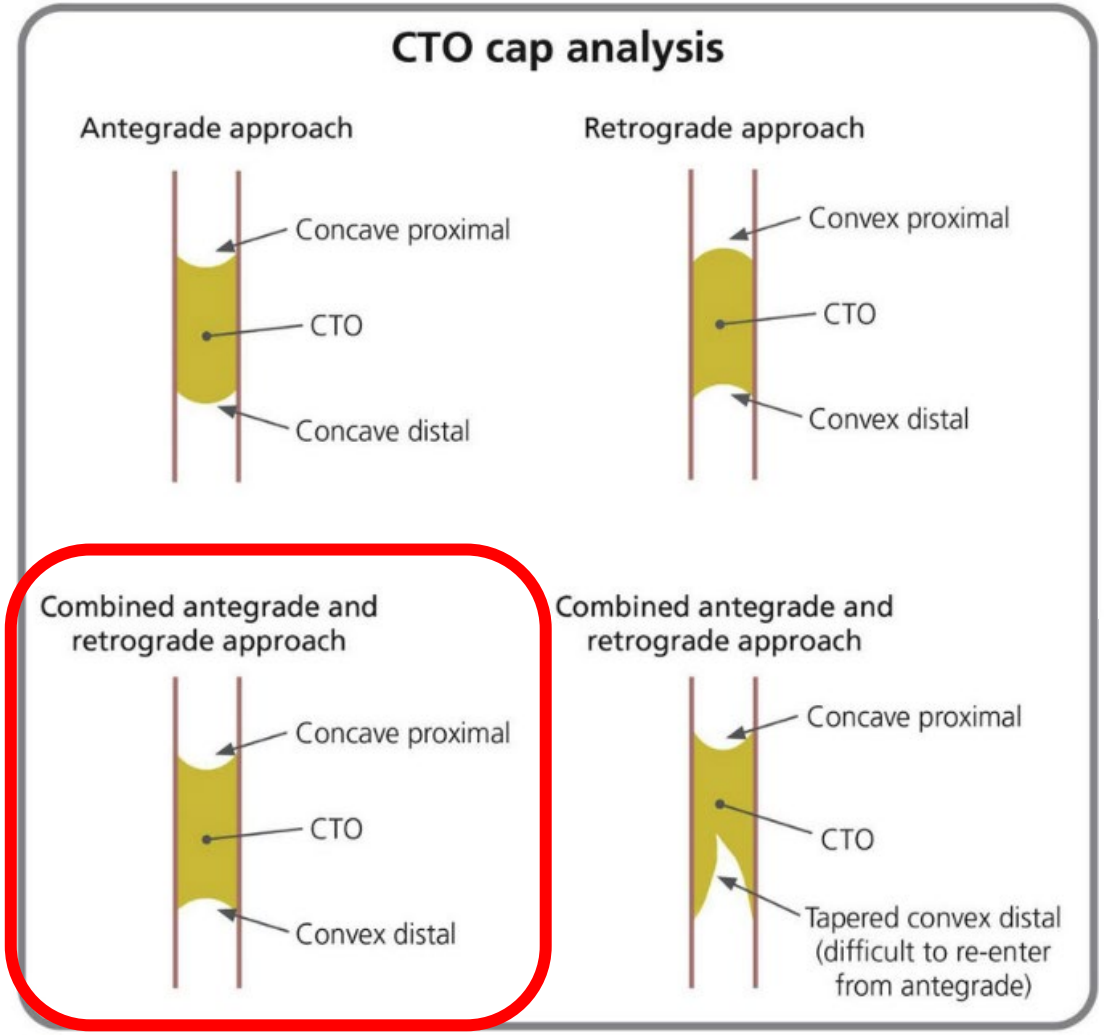
	Subintimal wire passage	Intraluminal wire passage	*P* value
1-year clinical outcomes			
Restenosis	48.2% (33.4–63.1%)	40.8% (18.3–63.4%)	0.40
All-cause mortality	5.5% (1.9–8.9%)	8.6% (3.7–13.4%)	0.70
Major amputation	1.7% (0.0–4.1%)	1.3% (0.0–3.0%)	0.98
Major adverse limb events	18.8% (11.9–25.2%)	17.6% (10.7–23.9%)	0.55



Proximal



Distal



J Endovasc Ther. 2018 Jun;25(3):284-291. doi: 10.1177/1526602818759333. Epub 2018 Feb 27.

Chronic Total Occlusion Crossing Approach Based on Plaque Cap Morphology: The CTOP Classification

Fadi Saab [1], Michael R Jaff [2], Larry J Diaz-Sandoval [1], Gwennan D Engen [1], Theresa N McGoff [1], George Adams [3], Ashraf Al-Dadah [4], Philip P Goodney [5], Farhan Khawaja [6], Jihad A Mustapha [1]

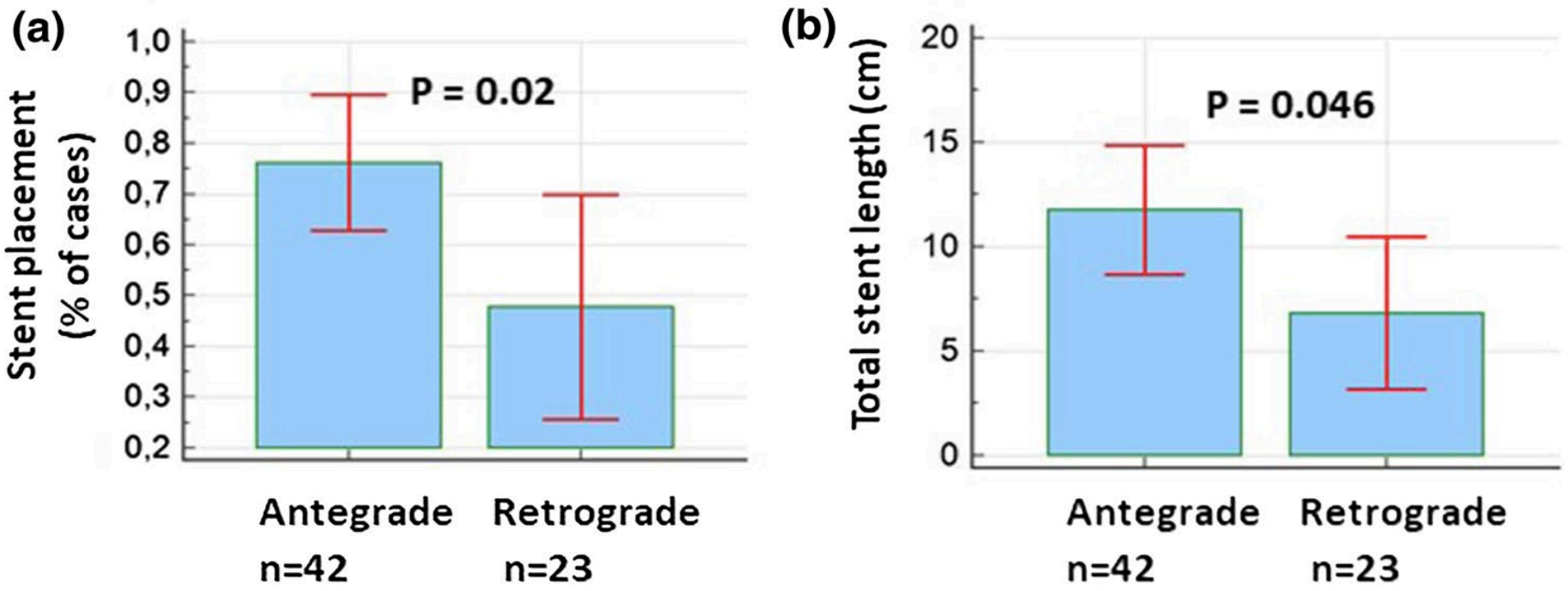
Affiliations + expand

PMID: 29484959 DOI: 10.1177/1526602818759333

SURGICAL & RADIOLOGICAL ENDOVASCULAR SYMPOSIUM
SRES
11-12 SEPT. 2025
• Radiologie Interventionnelle
• Chirurgie Vasculaire
• Chirurgie cardio-vasculaire et thoracique
• Médecine vasculaire
PALAIS DU PHARO
MARSEILLE
www.sres-symposium.org

Comparison of ante-versus retrograde access for the endovascular treatment of long and calcified, de novo femoropopliteal occlusive lesions

Sorin Giusca[1] · Micheal Lichtenberg[2] · Saskia Hagstotz[1] · Christoph Eisenbach[1] · Hugo A. Katus[3] · Christian Erbel[3] · Grigorios Korosoglou[1]



Define the approach

↓

Cross the lesion

↓

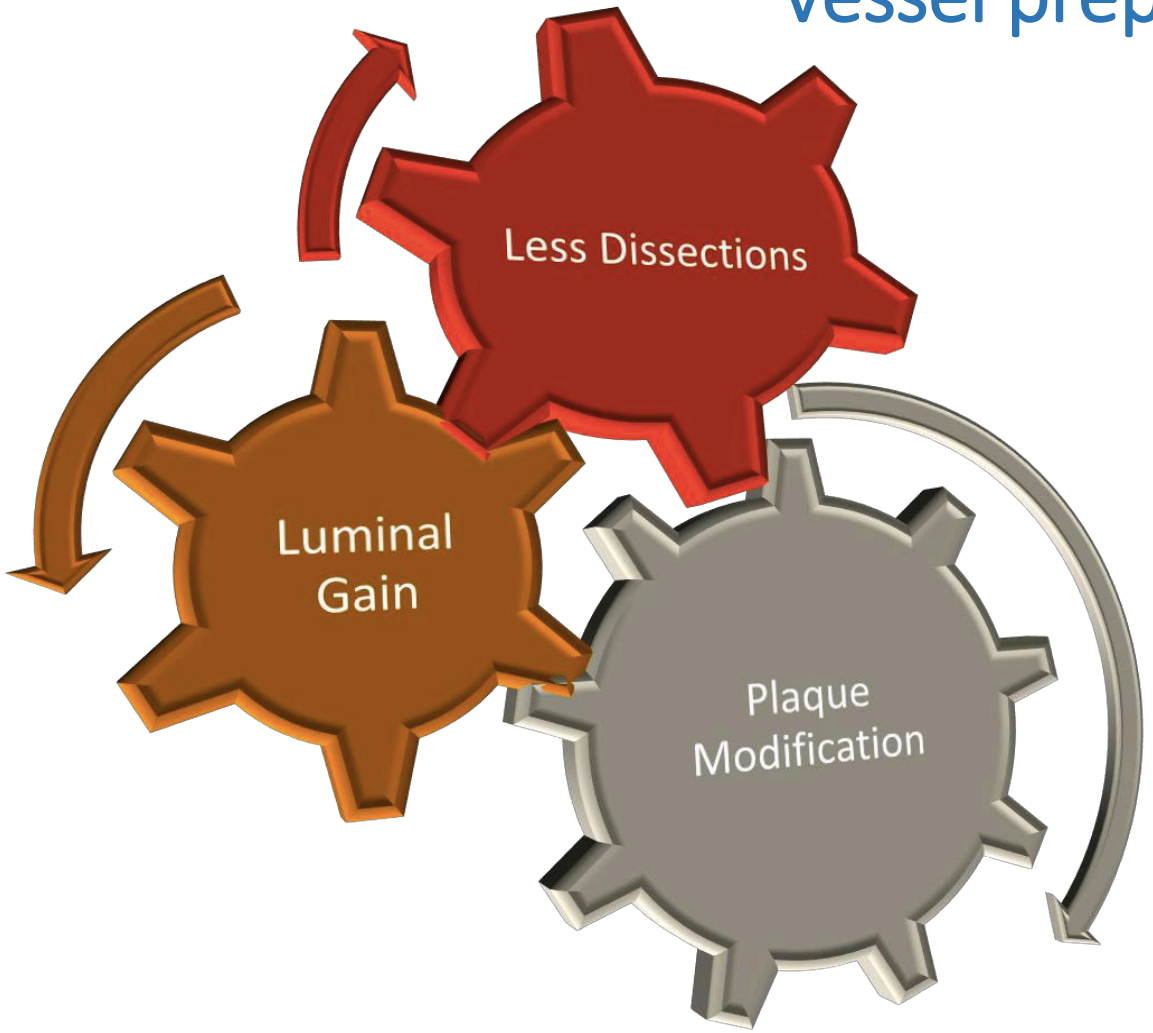
Vessel preparation

↓

Treatment

- Stenting primaire (Viabahn)
- Thrombectomie rotationnelle (Rotarex)
- Athérectomie/ debulking
- POBA

Vessel preparation: Why Debulking ?



Increased Drug Uptake

Less or Better Scaffolding

Improved patency

SYSTEMATIC REVIEW

Systematic Review and Network Meta-analysis of Vessel Preparation Techniques With Plain Balloon Angioplasty, Atherectomy, or Intravascular Lithotripsy Before Application of a Drug Coated Balloon to Treat Atherosclerotic Femoropopliteal Disease

Janice Yiu [a,‡], Ravali Tippireddy [a,‡], Lukla Biasi [a], Sanjay Patel [a], Prakash Saha [a], Athanasios Saratzis [b], Konstantinos Katsanos [c], Hany Zayed [a,*]

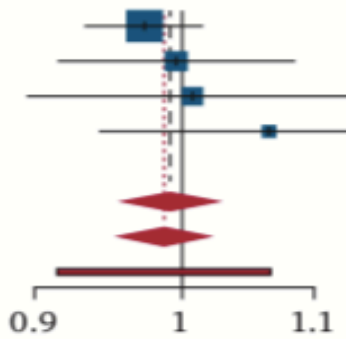
[a] Department of Vascular Surgery, Guy's and St. Thomas' Hospital NHS Foundation Trust and King's College London, London, United Kingdom
[b] NIHR Leicester Biomedical Research Centre, Leicester, United Kingdom
[c] Patras University Hospital, Rion, Greece

Objective: To compare one year outcomes after atherectomy, intravascular lithotripsy *vs.* plain balloon angioplasty before application of drug coated balloons for treating femoropopliteal atherosclerotic disease.

Freedom from TLR

Study	Experimental Events	Experimental Total	Control Events	Control Total	RR	95% CI	Weight (fixed)	Weight (random)
Tepe *et al.* 2022[25]	132	138	114	116	0.97	[0.93–1.02]	54.1%	66.4%
Cai *et al.* 2020[23]	43	45	47	49	1.00	[0.91–1.09]	19.6%	16.8%
Zeller *et al.* 2017[24]	38	41	46	50	1.01	[0.89–1.13]	18.1%	8.7%
Shammas *et al.* 2022[22]	27	27	15	16	1.06	[0.94–1.20]	8.2%	8.2%
Fixed effect model	**240**	**251**	**222**	**231**	**0.99**	**[0.96–1.03]**	**100.0%**	--
Random effects model					**0.99**	**[0.95–1.02]**	--	**100.0%**
Prediction interval						**[0.91–1.07]**		

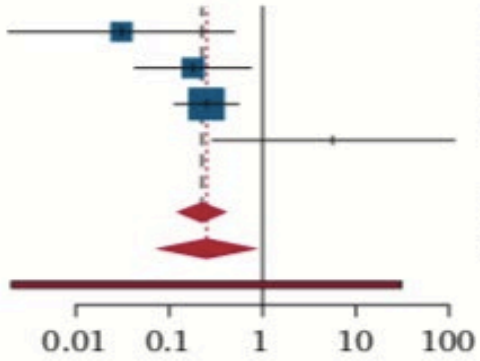
Heterogeneity: $I^2 = 0\%, \tau^2 = 0, p = .55$

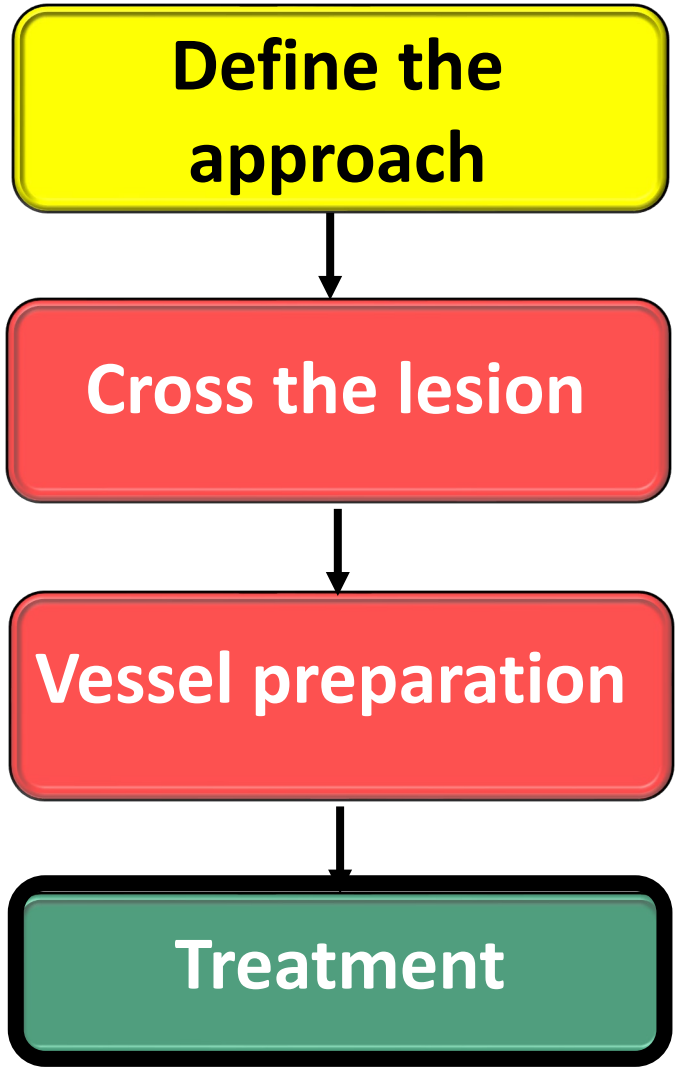


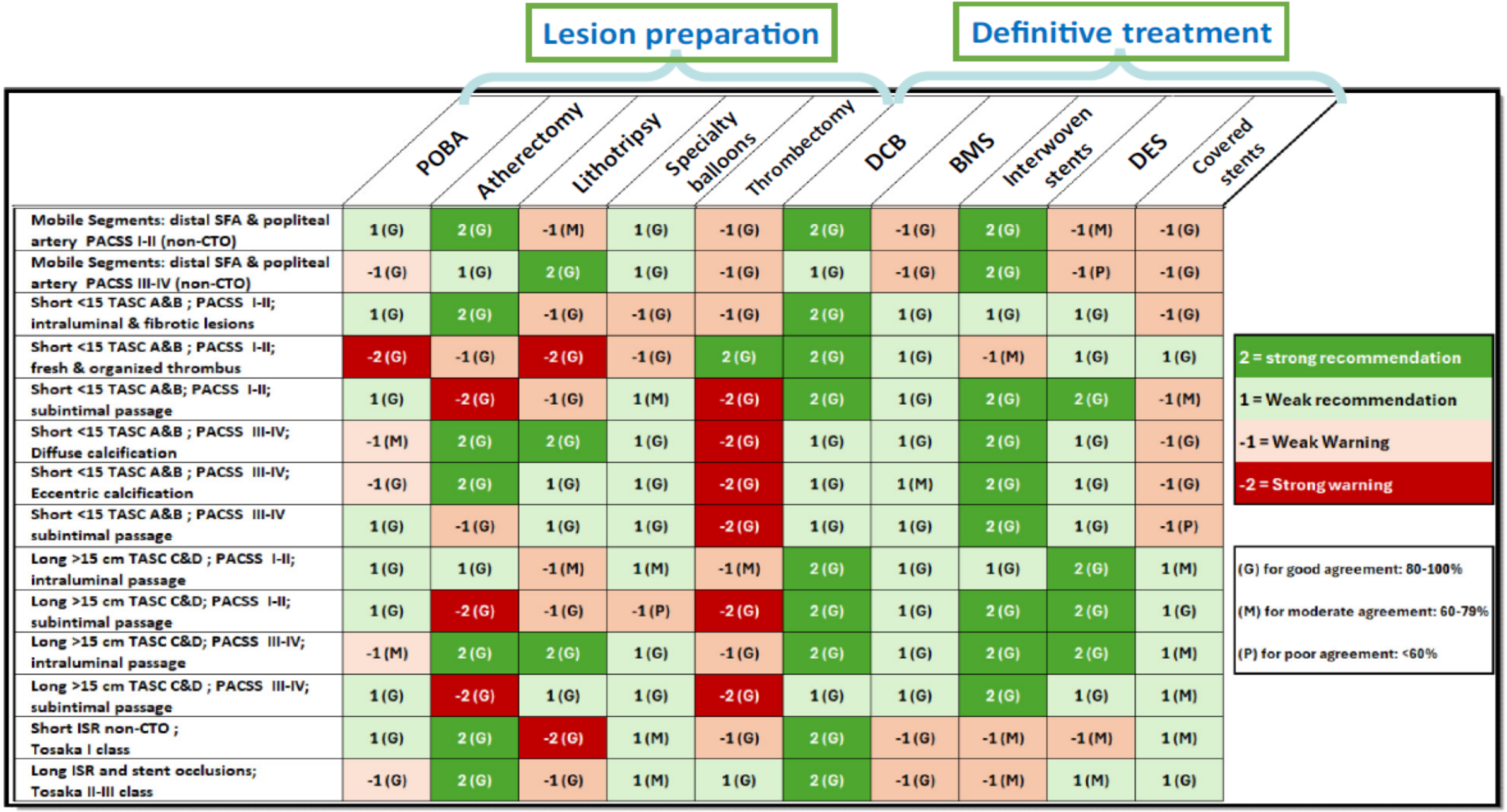
Bailout stenting

Study	Experimental Events	Experimental Total	Control Events	Control Total	RR	95% CI	Weight (fixed)	Weight (random)
Shammas *et al.* 2022[22]	0	31	8	16	0.03	[0.00–0.50]	21.1%	14.6%
Cai *et al.* 2020[23]	2	45	12	49	0.18	[0.04–0.77]	23.0%	30.4%
Tepe *et al.* 2022[25]	7	153	28	153	0.25	[0.11–0.55]	56.0%	41.9%
Zeller *et al.* 2017[24]	2	48	0	54	5.62	[0.28–114.17]	0.0%	13.1%
Fixed effect model	**11**	**277**	**48**	**272**	**0.22**	**[0.12–0.41]**	**100.0%**	--
Random effects model					**0.25**	**[0.07–0.89]**	--	**100.0%**
Prediction interval						**[0.00–30.39]**		

Heterogeneity: $I^2 = 54\%, \tau^2 = 0.8268, p = .090$

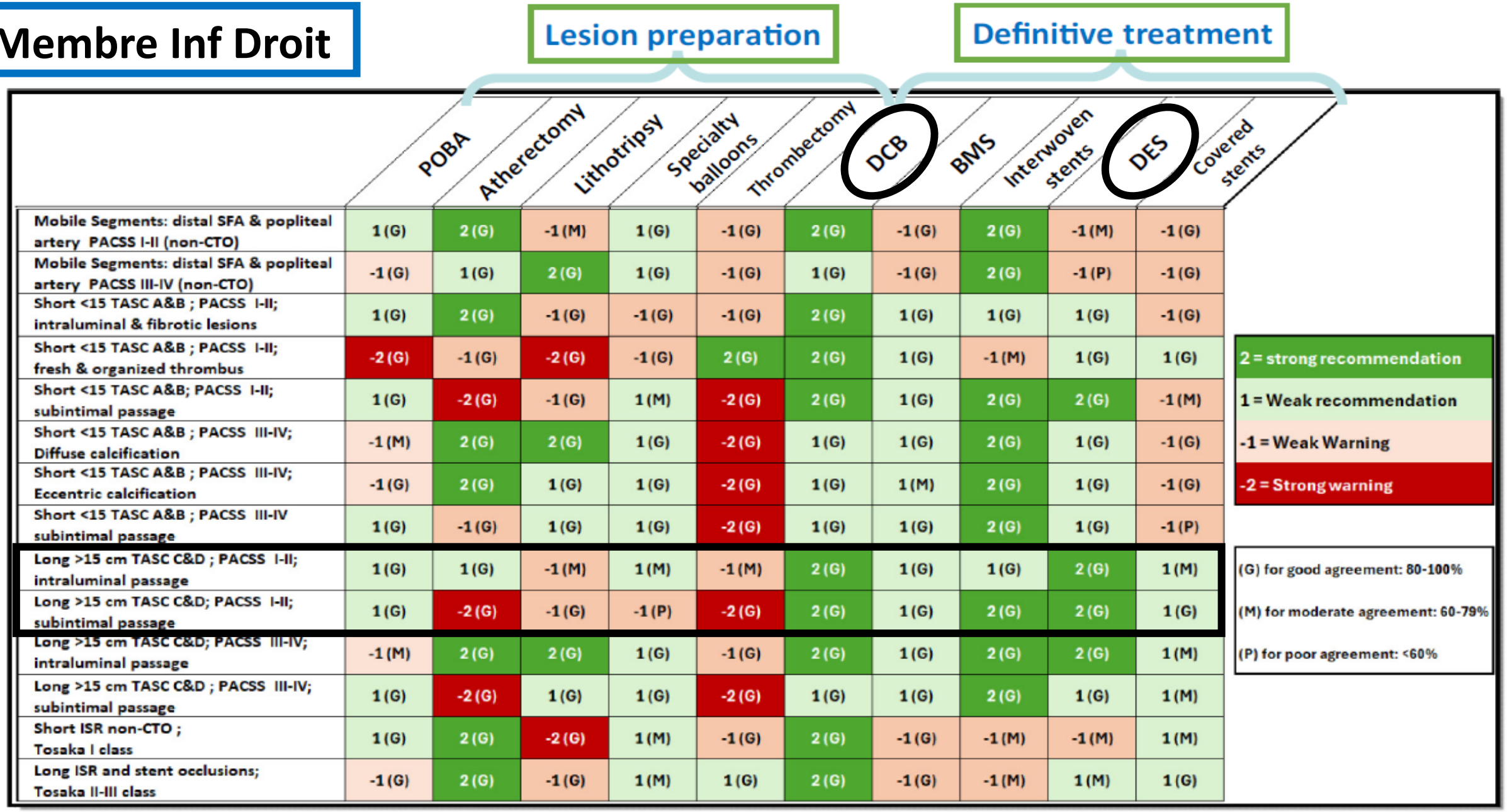



Define the approach
Cross the lesion
Vessel preparation
Treatment



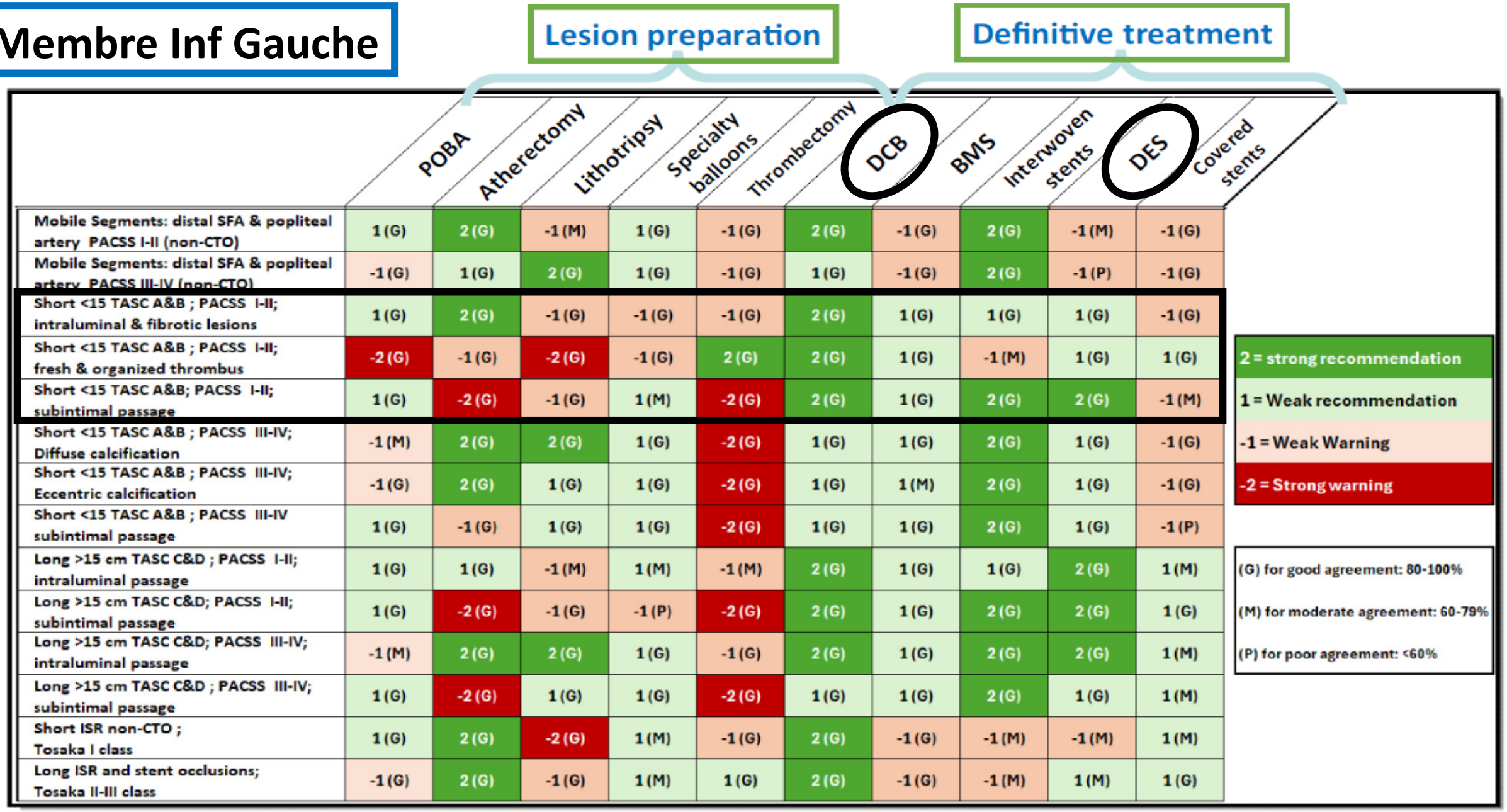
An Interdisciplinary Expert Opinion Statement, Korosoglou et al. JACC Cardiovasc Interv 2025

Membre Inf Droit



An Interdisciplinary Expert Opinion Statement, Korosoglou et al. JACC Cardiovasc Interv 2025

Membre Inf Gauche



	POBA	Atherectomy	Lithotripsy	Specialty balloons	Thrombectomy	DCB	BMS	Interwoven stents	DES	Covered stents
Mobile Segments: distal SFA & popliteal artery PACSS I-II (non-CTO)	1 (G)	2 (G)	-1 (M)	1 (G)	-1 (G)	2 (G)	-1 (G)	2 (G)	-1 (M)	-1 (G)
Mobile Segments: distal SFA & popliteal artery PACSS III-IV (non-CTO)	-1 (G)	1 (G)	2 (G)	1 (G)	-1 (G)	1 (G)	-1 (G)	2 (G)	-1 (P)	-1 (G)
Short <15 TASC A&B ; PACSS I-II; intraluminal & fibrotic lesions	1 (G)	2 (G)	-1 (G)	-1 (G)	-1 (G)	2 (G)	1 (G)	1 (G)	1 (G)	-1 (G)
Short <15 TASC A&B ; PACSS I-II; fresh & organized thrombus	-2 (G)	-1 (G)	-2 (G)	-1 (G)	2 (G)	2 (G)	1 (G)	-1 (M)	1 (G)	1 (G)
Short <15 TASC A&B; PACSS I-II; subintimal passage	1 (G)	-2 (G)	-1 (G)	1 (M)	-2 (G)	2 (G)	1 (G)	2 (G)	2 (G)	-1 (M)
Short <15 TASC A&B ; PACSS III-IV; Diffuse calcification	-1 (M)	2 (G)	2 (G)	1 (G)	-2 (G)	1 (G)	1 (G)	2 (G)	1 (G)	-1 (G)
Short <15 TASC A&B ; PACSS III-IV; Eccentric calcification	-1 (G)	2 (G)	1 (G)	1 (G)	-2 (G)	1 (G)	1 (M)	2 (G)	1 (G)	-1 (G)
Short <15 TASC A&B ; PACSS III-IV subintimal passage	1 (G)	-1 (G)	1 (G)	1 (G)	-2 (G)	1 (G)	1 (G)	2 (G)	1 (G)	-1 (P)
Long >15 cm TASC C&D ; PACSS I-II; intraluminal passage	1 (G)	1 (G)	-1 (M)	1 (M)	-1 (M)	2 (G)	1 (G)	1 (G)	2 (G)	1 (M)
Long >15 cm TASC C&D; PACSS I-II; subintimal passage	1 (G)	-2 (G)	-1 (G)	-1 (P)	-2 (G)	2 (G)	1 (G)	2 (G)	2 (G)	1 (G)
Long >15 cm TASC C&D; PACSS III-IV; intraluminal passage	-1 (M)	2 (G)	2 (G)	1 (G)	-1 (G)	2 (G)	1 (G)	2 (G)	2 (G)	1 (M)
Long >15 cm TASC C&D ; PACSS III-IV; subintimal passage	1 (G)	-2 (G)	1 (G)	1 (G)	-2 (G)	1 (G)	1 (G)	2 (G)	1 (G)	1 (M)
Short ISR non-CTO ; Tosaka I class	1 (G)	2 (G)	-2 (G)	1 (M)	-1 (G)	2 (G)	-1 (G)	-1 (M)	-1 (M)	1 (M)
Long ISR and stent occlusions; Tosaka II-III class	-1 (G)	2 (G)	-1 (G)	1 (M)	1 (G)	2 (G)	-1 (G)	-1 (M)	1 (M)	1 (G)

An Interdisciplinary Expert Opinion Statement, Korosoglou et al. JACC Cardiovasc Interv 2025

SURGICAL & RADIOLOGICAL ENDOVASCULAR SYMPOSIUM

SRES

11-12 SEPT. 2025

- Radiologie Interventionnelle
- Chirurgie Vasculaire
- Chirurgie cardio-vasculaire et thoracique
- Médecine vasculaire

PALAIS DU PHARO
MARSEILLE

www.sres-symposium.org

Merci