

The Femoral Eversion Endarterectomy Technique with Transection: Safety and Efficacy

Authors : Hansraj Riteesh Bookun, Emily Maree Stevens, Jarryd Leigh Solomon, Anthony Chan

Abstract : Objective: This was a retrospective cross-sectional study evaluating the safety and efficacy of femoral endarterectomy using the eversion technique with transection as opposed to the conventional endarterectomy technique with either vein or synthetic patch arterioplasty. Methods: Between 2010 to mid 2017, 19 patients with mean age of 75.4 years, underwent eversion femoral endarterectomy with transection by a single surgeon. There were 13 males (68.4%), and the comorbid burden was as follows: ischaemic heart disease (53.3%), diabetes (43.8%), stage 4 kidney impairment (13.3%) and current or ex-smoking (73.3%). The indications were claudication (45.5%), rest pain (18.2%) and tissue loss (36.3%). Results: The technical success rate was 100%. One patient required a blood transfusion following bleeding from intraoperative losses. Two patients required blood transfusions from low post operative haemoglobin concentrations – one of them in the context of myelodysplastic syndrome. There were no unexpected returns to theatre. The mean length of stay was 11.5 days with two patients having inpatient stays of 36 and 50 days respectively due to the need for rehabilitation. There was one death unrelated to the operation. Conclusion: The eversion technique with transection is safe and effective with low complication rates and a normally expected length of stay. It poses the advantage of not requiring a synthetic patch. This technique features minimal extraneous dissection as there is no need to harvest vein for a patch. Additionally, future endovascular interventions can be performed by puncturing the native vessel. There is no change to the femoral bifurcation anatomy after this technique. We posit that this is a useful adjunct to the surgeon's panoply of vascular surgical techniques.

Keywords : endarterectomy, eversion, femoral, vascular

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