Contrôle Écho Doppler des angioplasties et des pontages artériels

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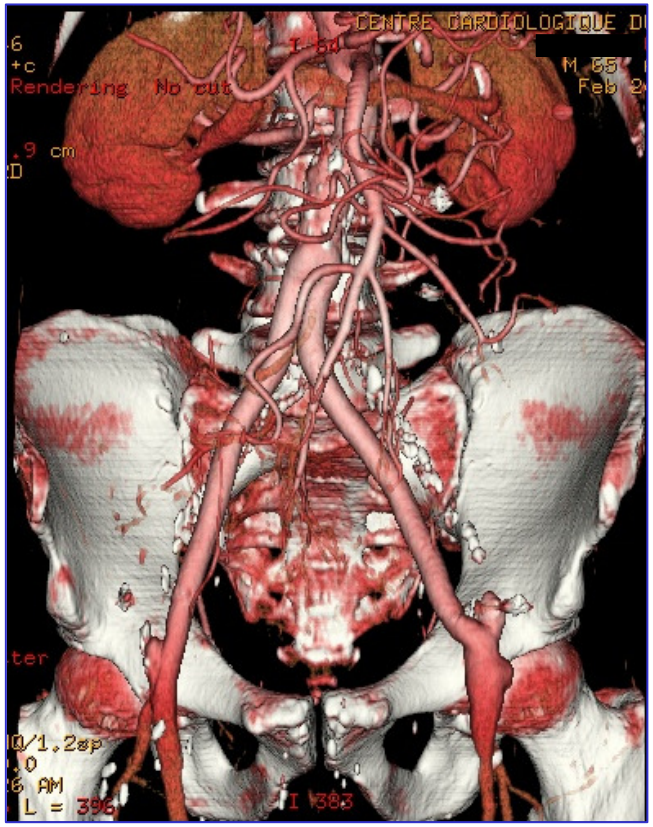
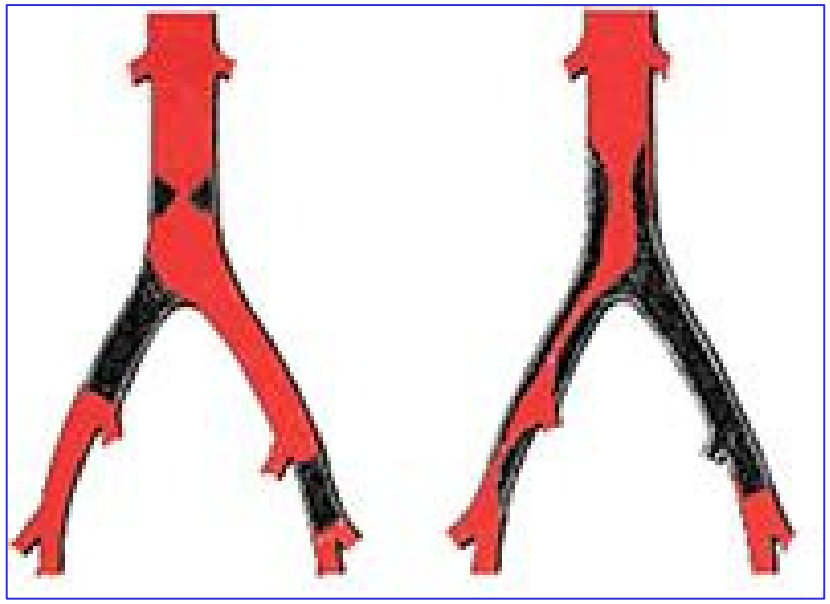
2ème Partie

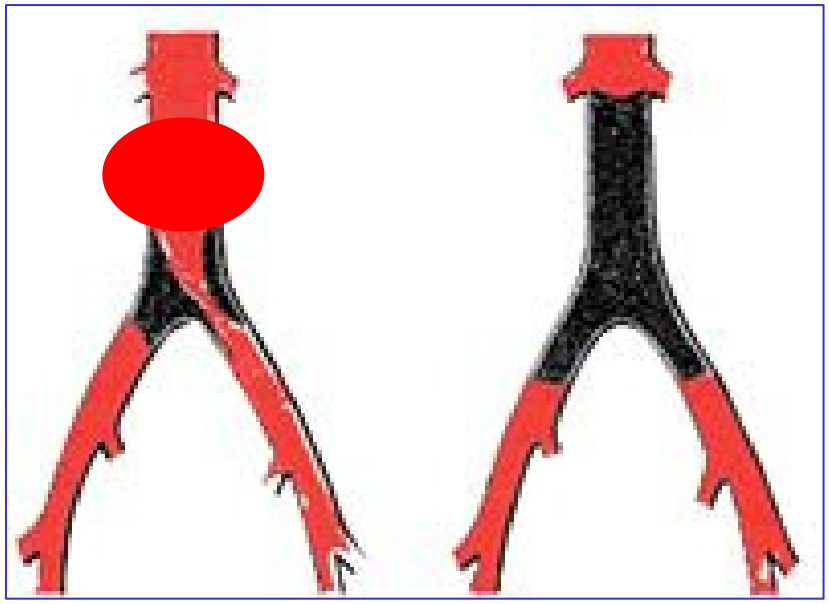
Faculté de Médecine
Montpellier - F

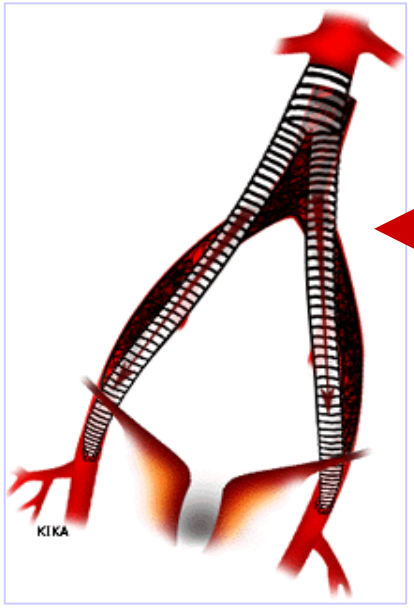
CHRU MONTPELLIER
CENTRE HOSPITALIER REGIONAL UNIVERSITAIRE



Pontages périphériques prothétiques sus inguinaux

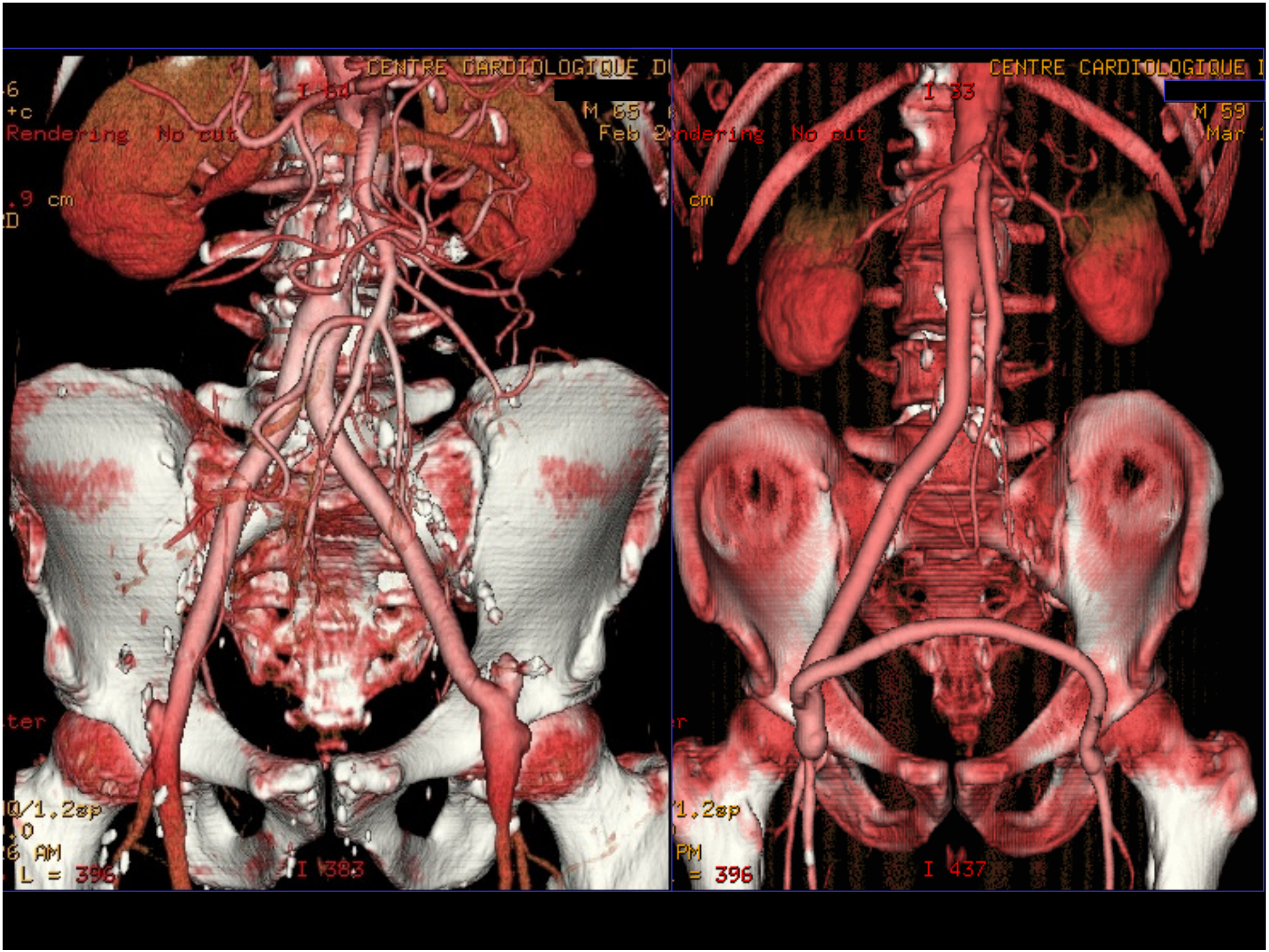






Prothèse ++++

Veine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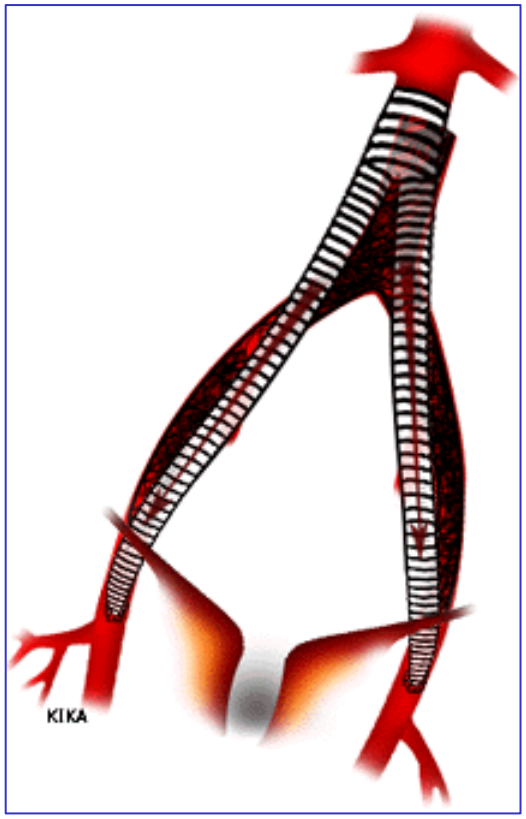
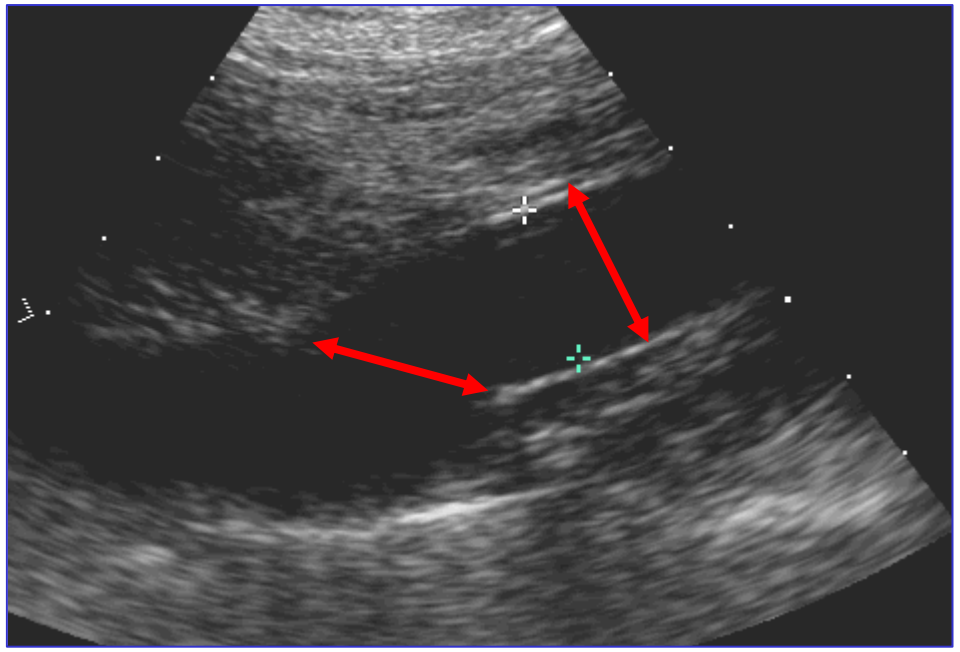
I 383
CENTRE CARDIOLOGIQUE
Rendering No cut
I 33
I 437

Contrôles post opératoire

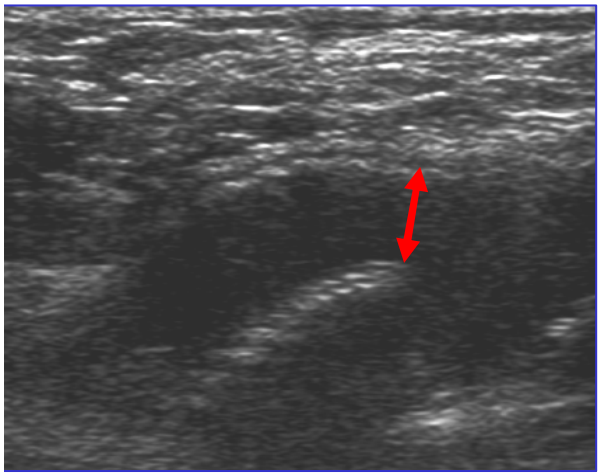
- **J6 / J7 :**
  - * Perméabilité
  - * Aval
  - * IPS
  - * Scarpa
  - * TVP (?)

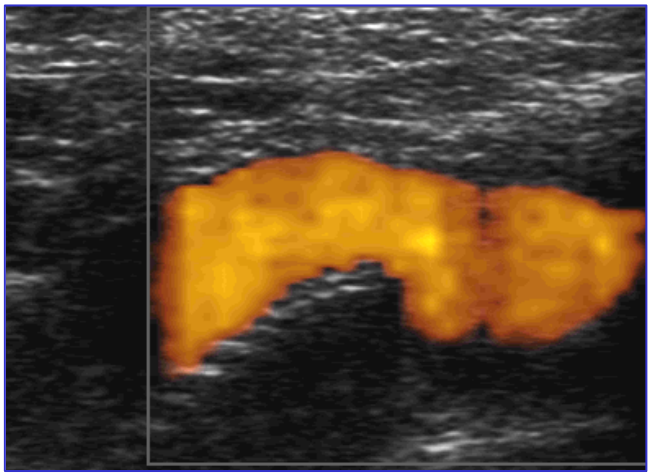
Attention aux problèmes Infectieux (Lavage mains,gants, TEGADERM ou BIOPSY BAG)

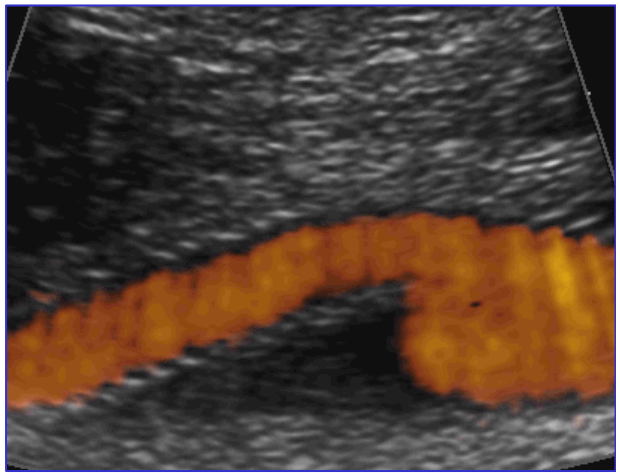


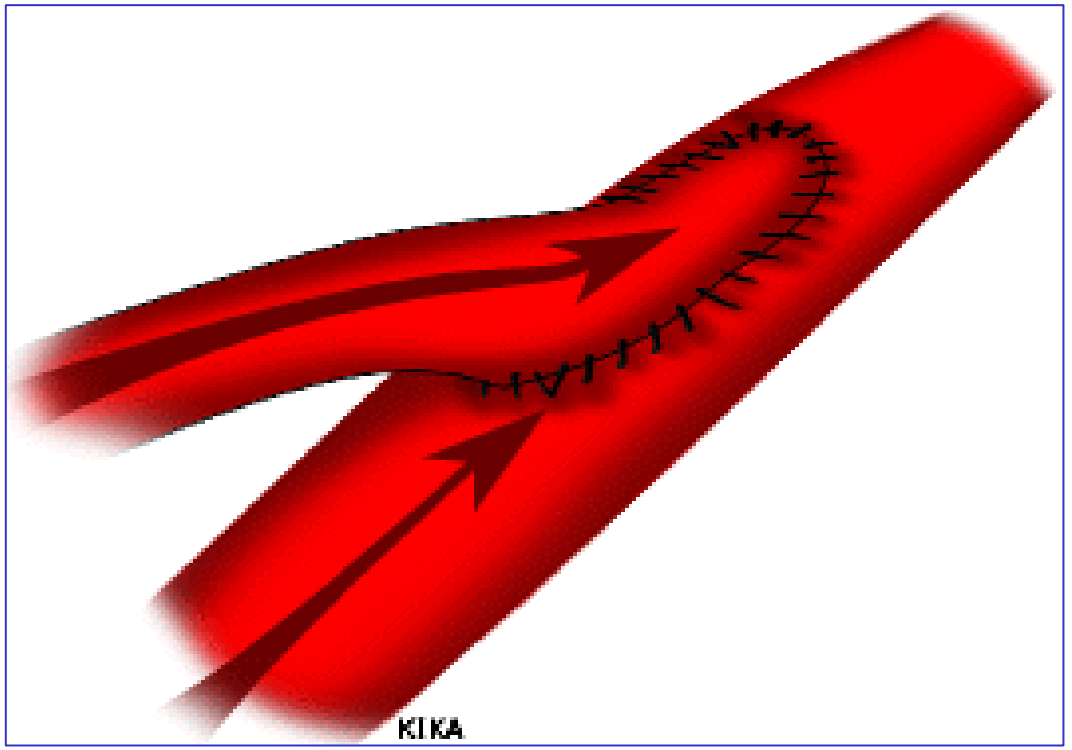


Prothèse Aorto Bi Fémorale

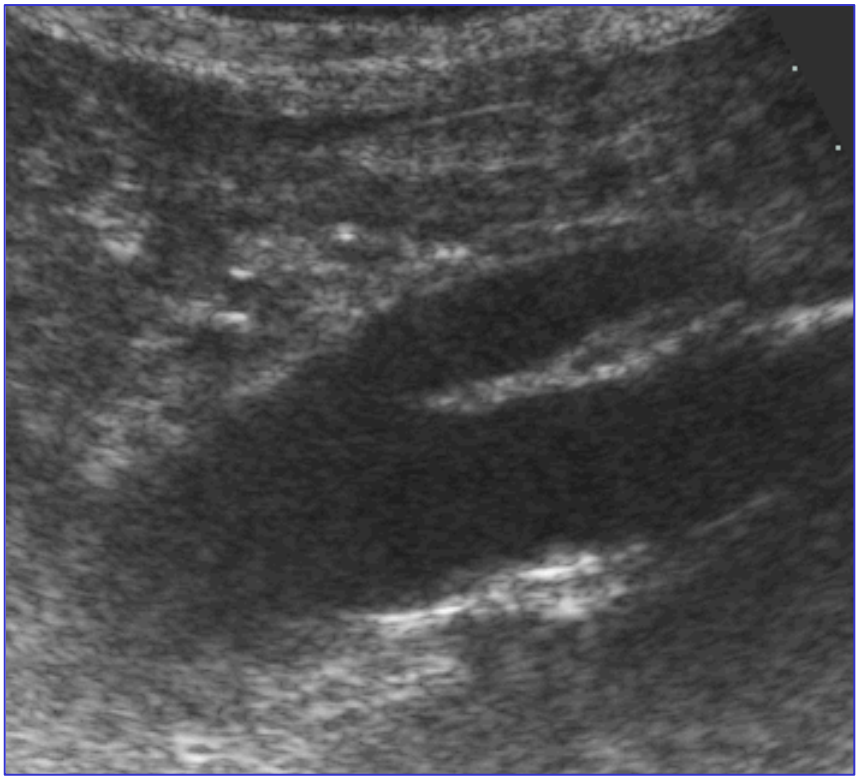


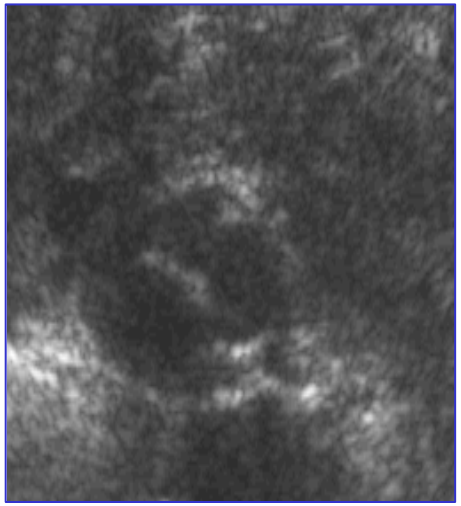


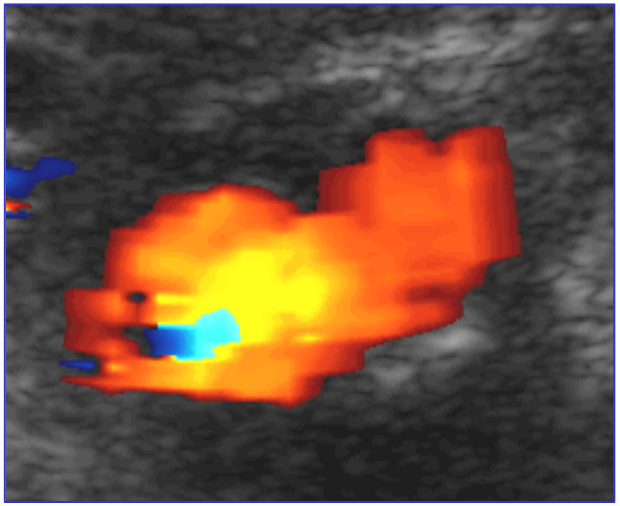


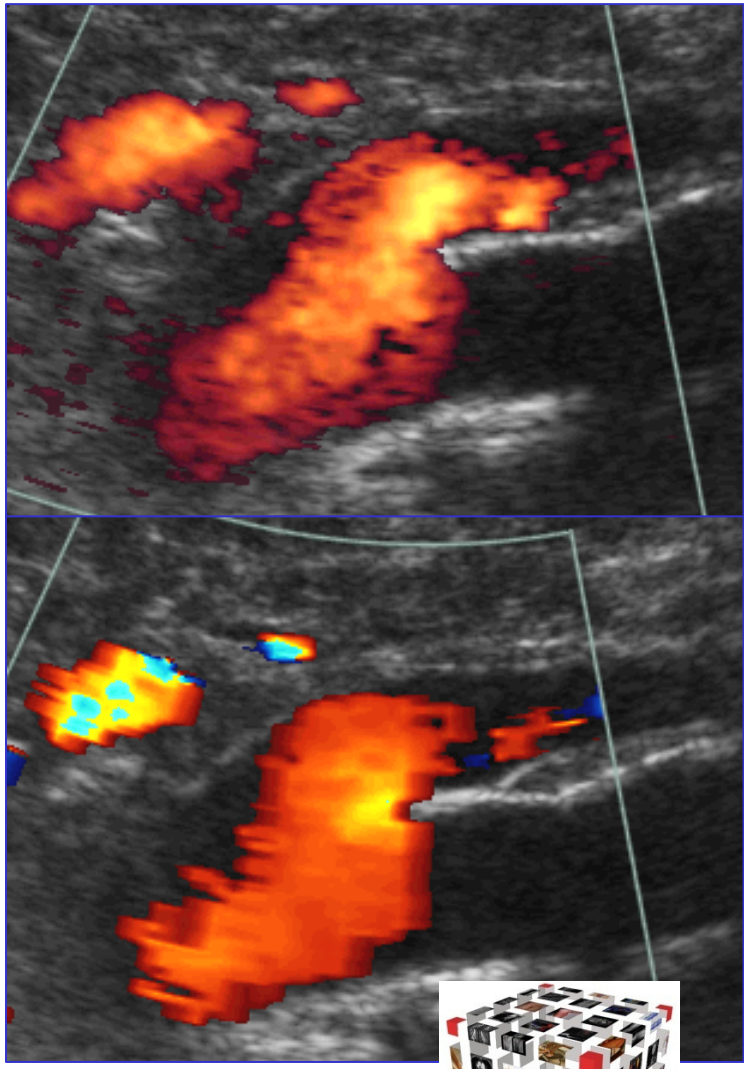


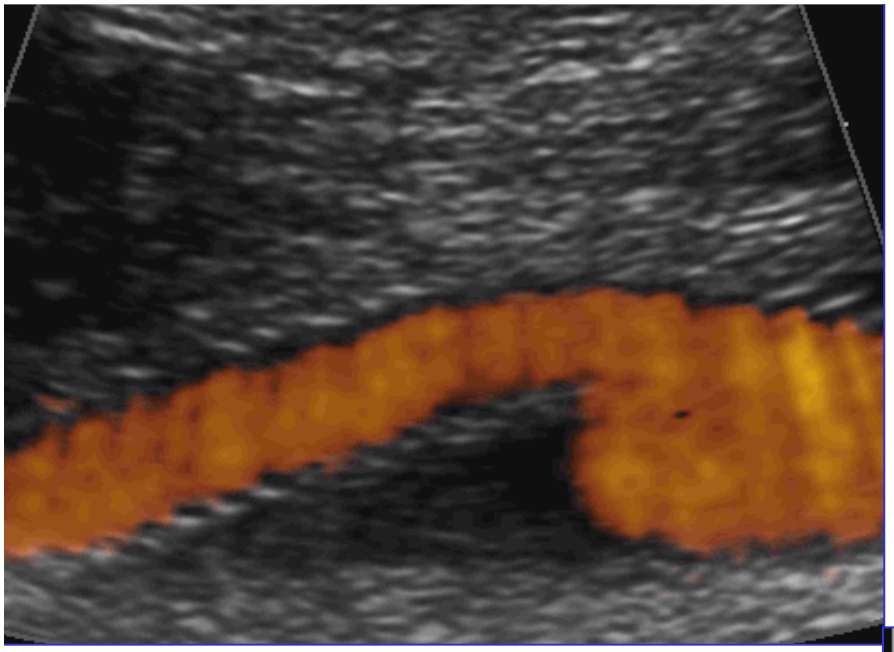
Insertion distale



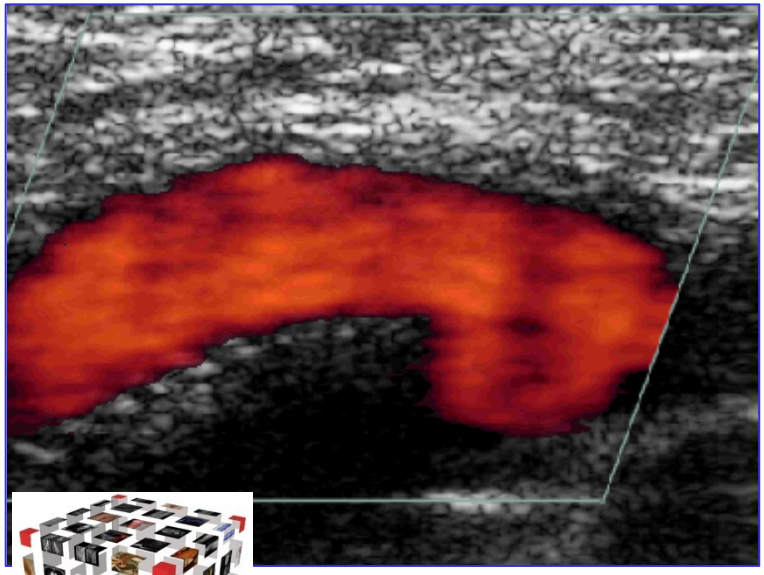


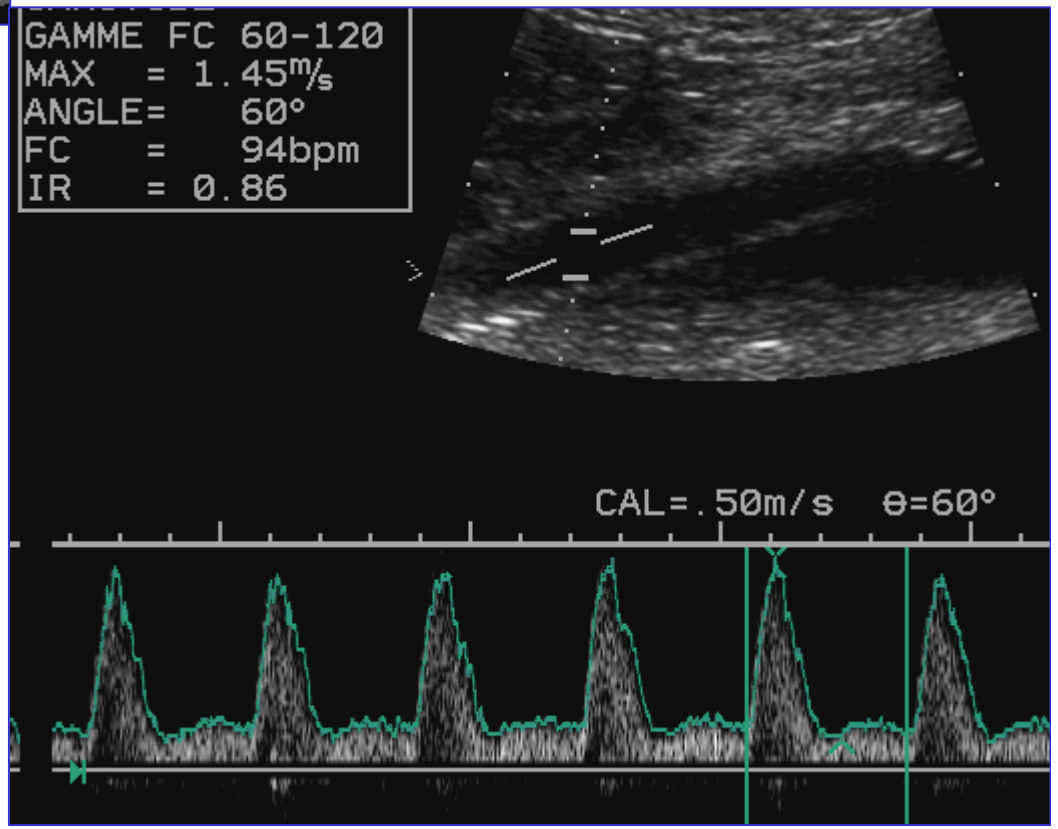


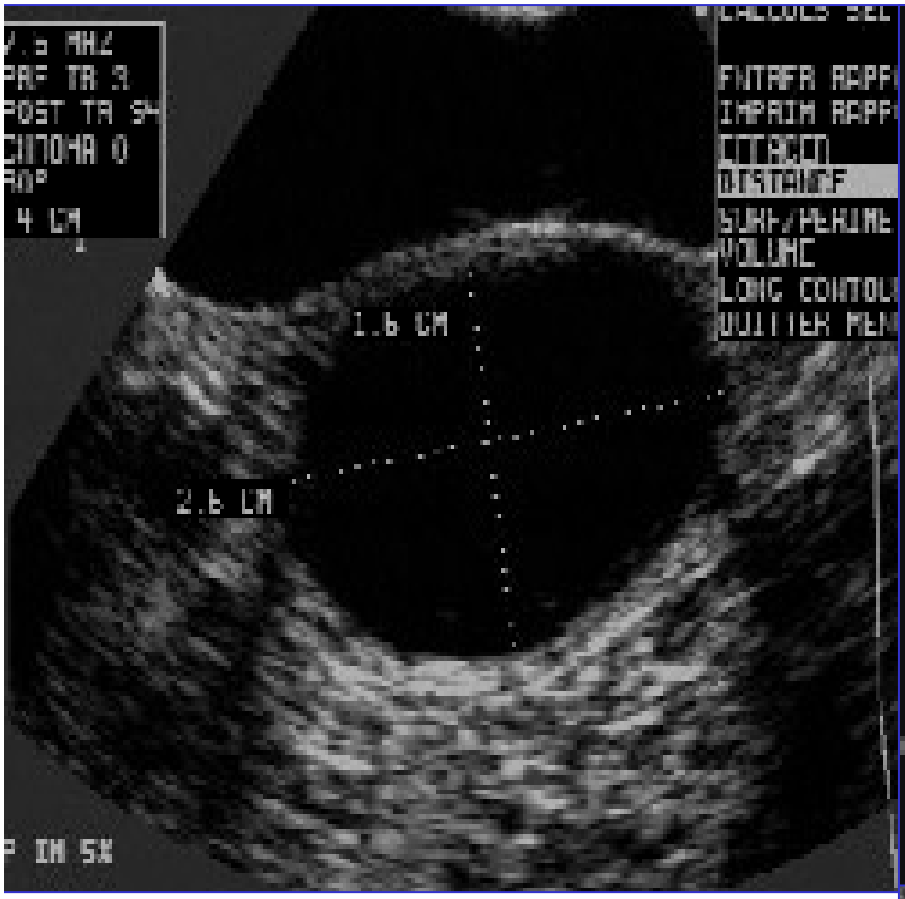


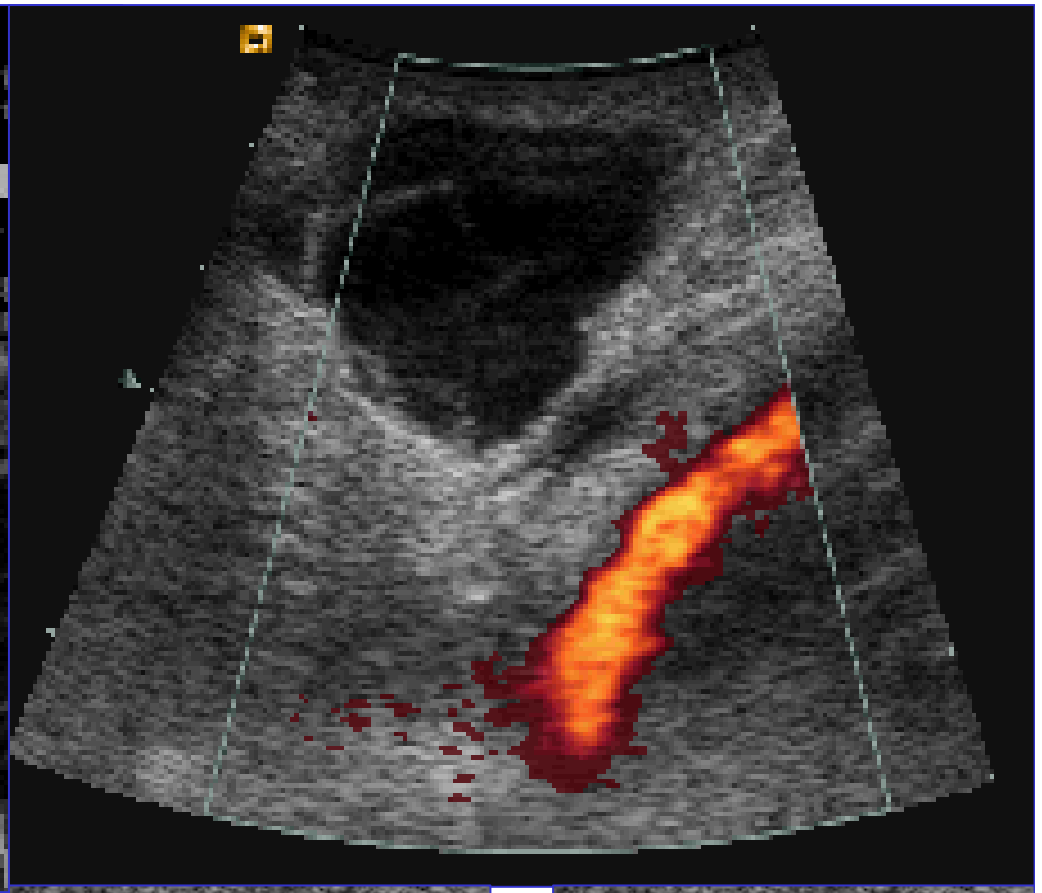


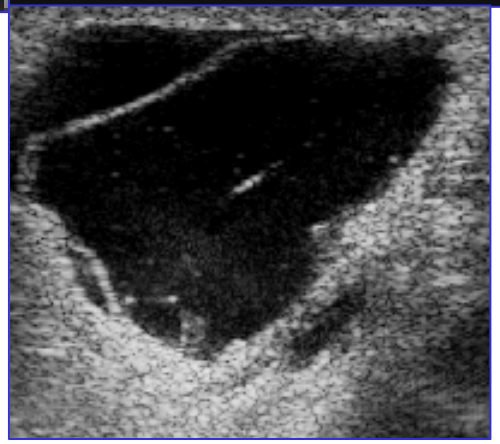
Insertion fémorale d ’une prothèse aorto bi fémorale

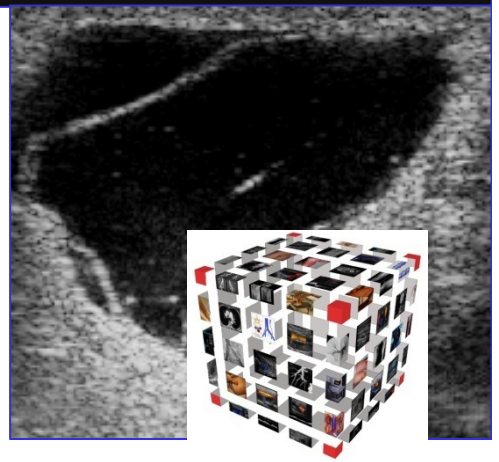




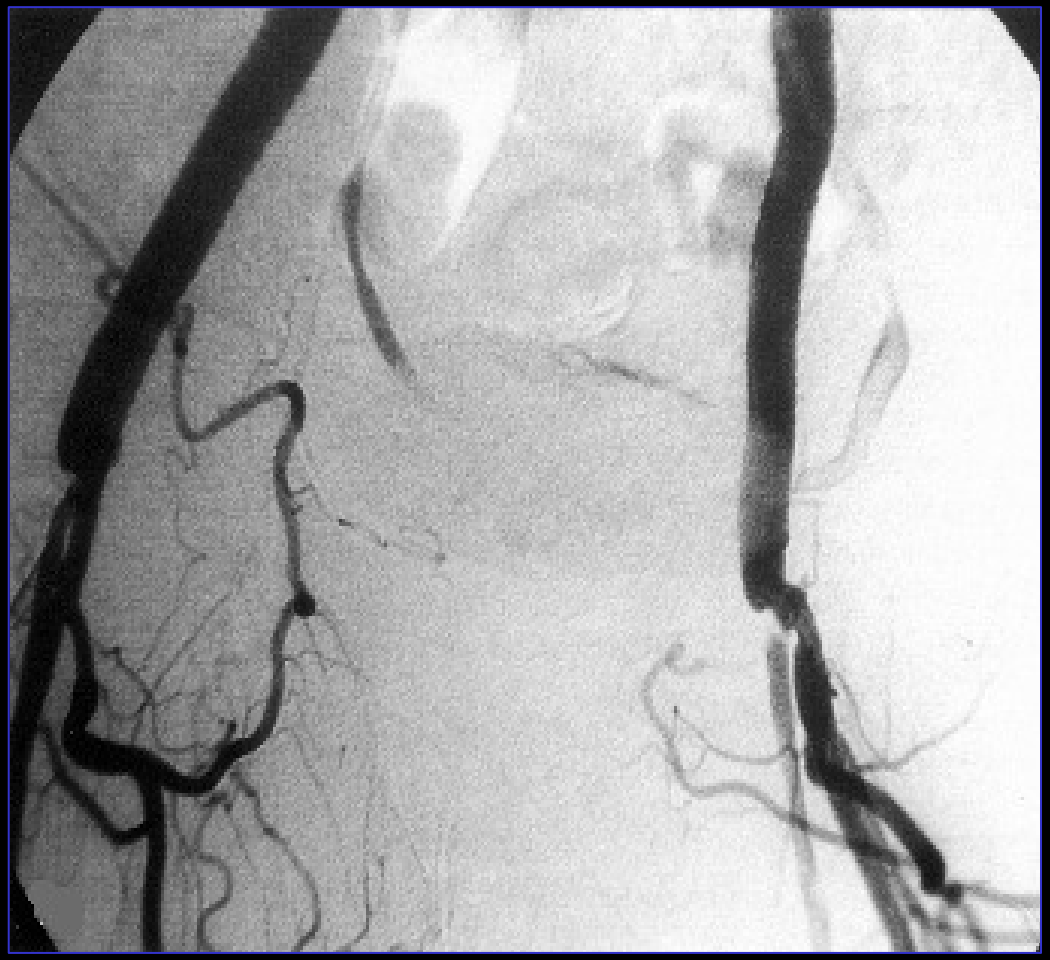




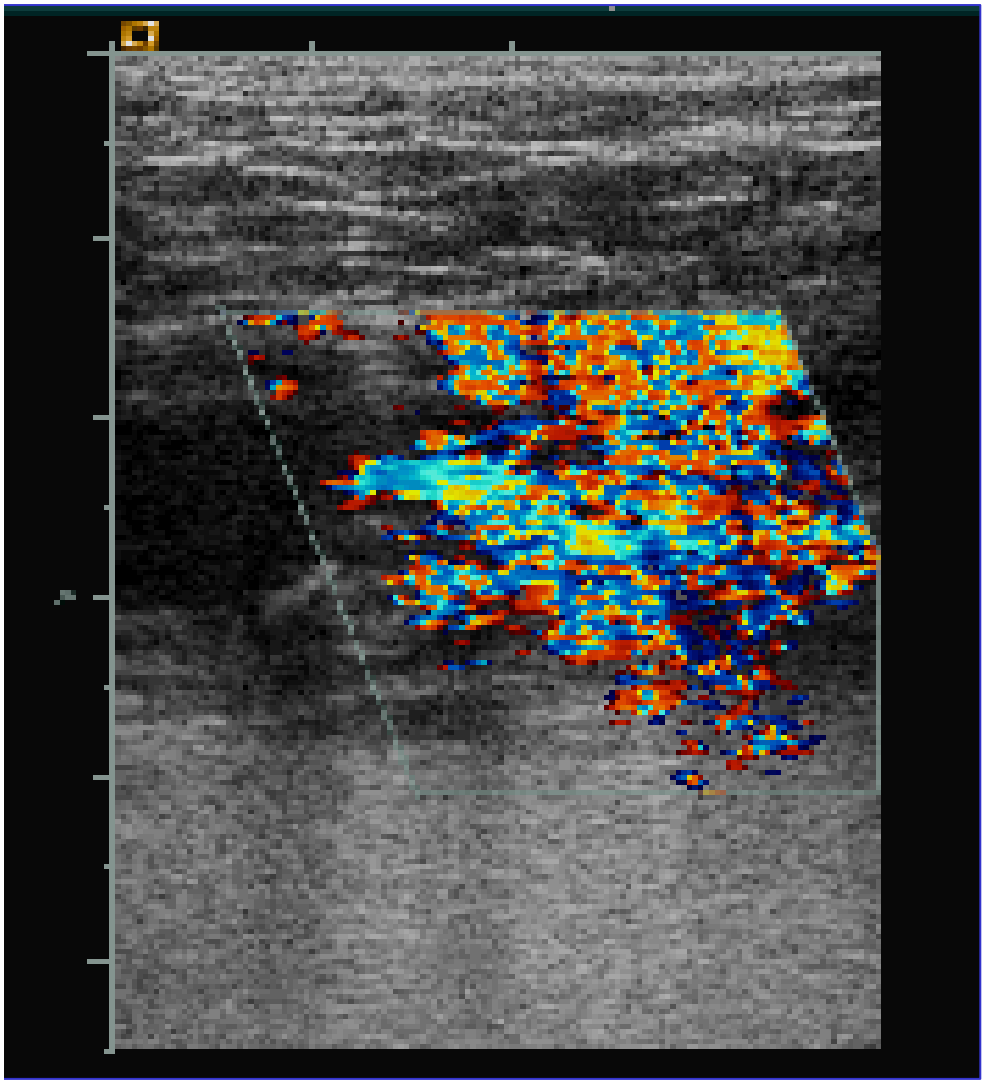


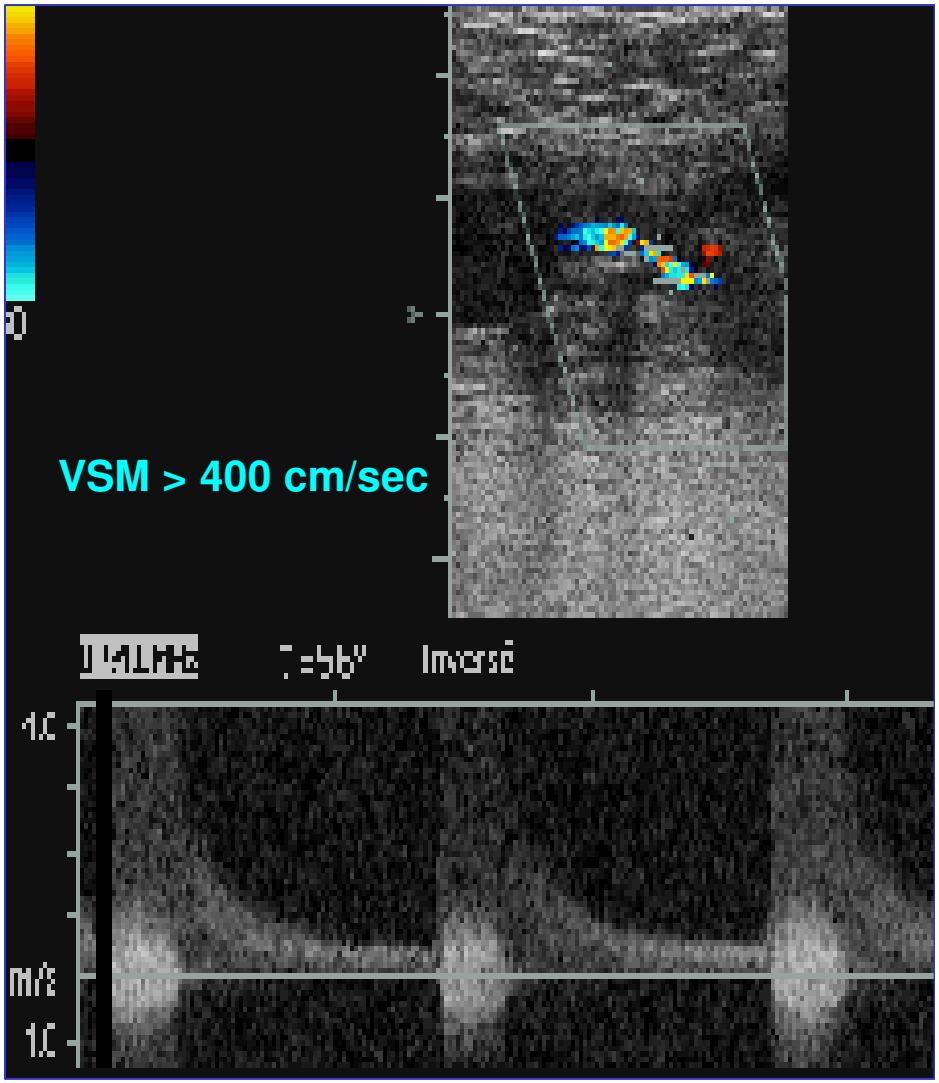


Lymphocèle

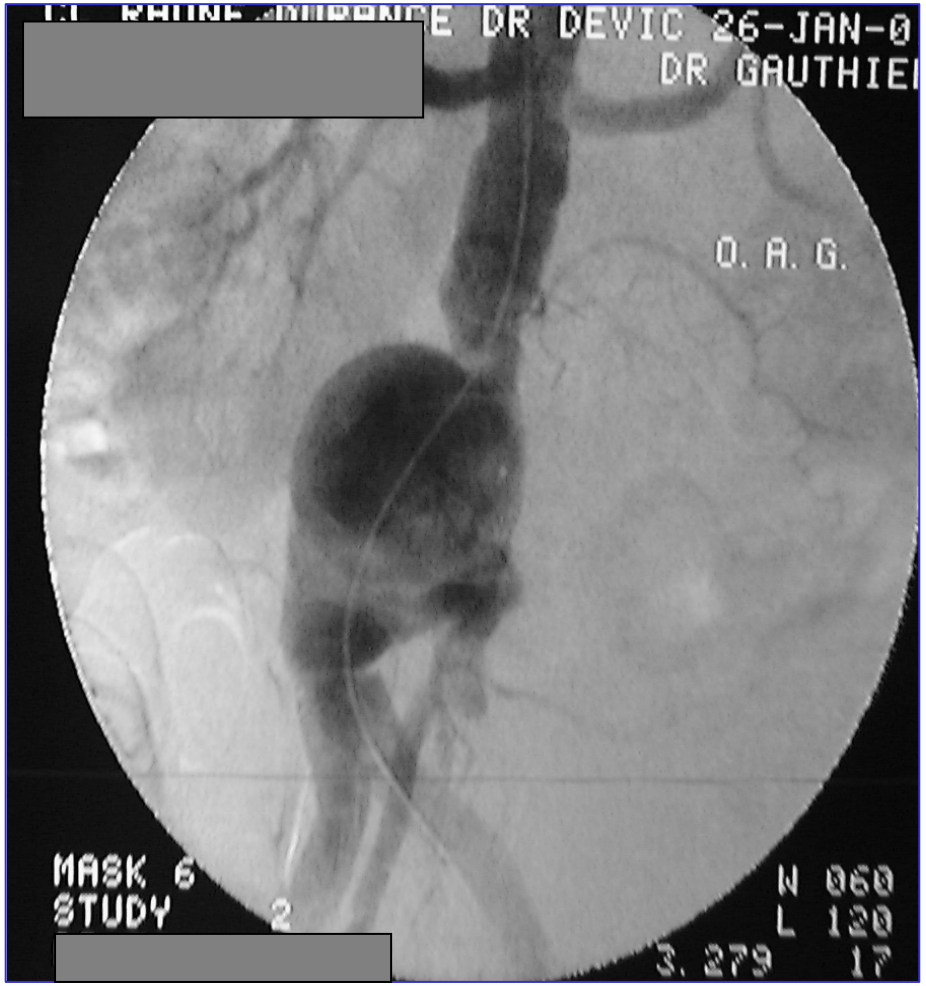


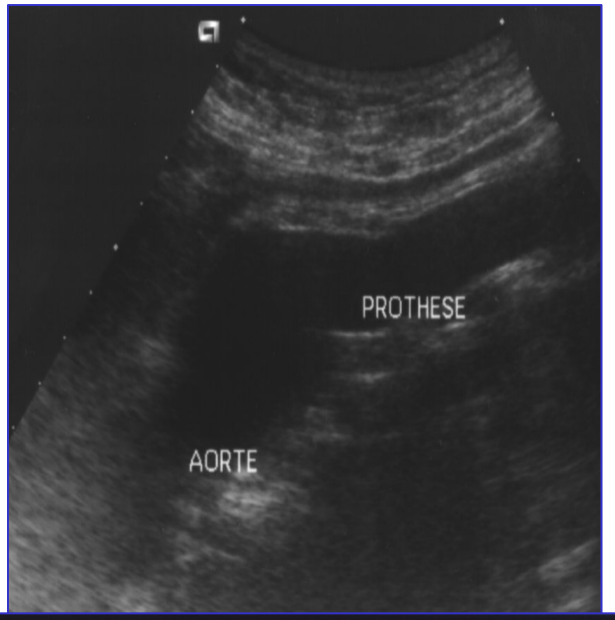
Prothèse Aorto
Bi fémorale
avec sténose
bilatérale

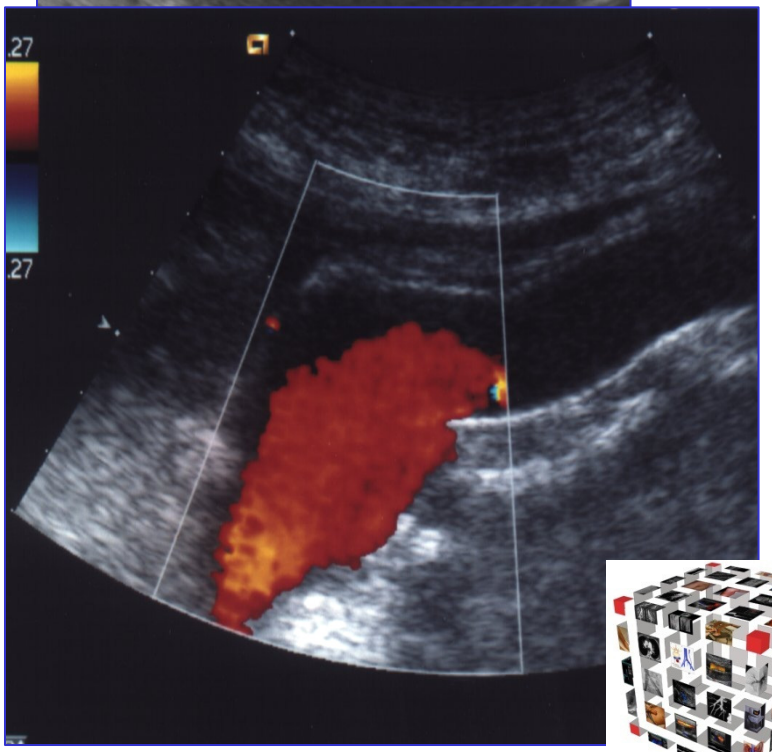




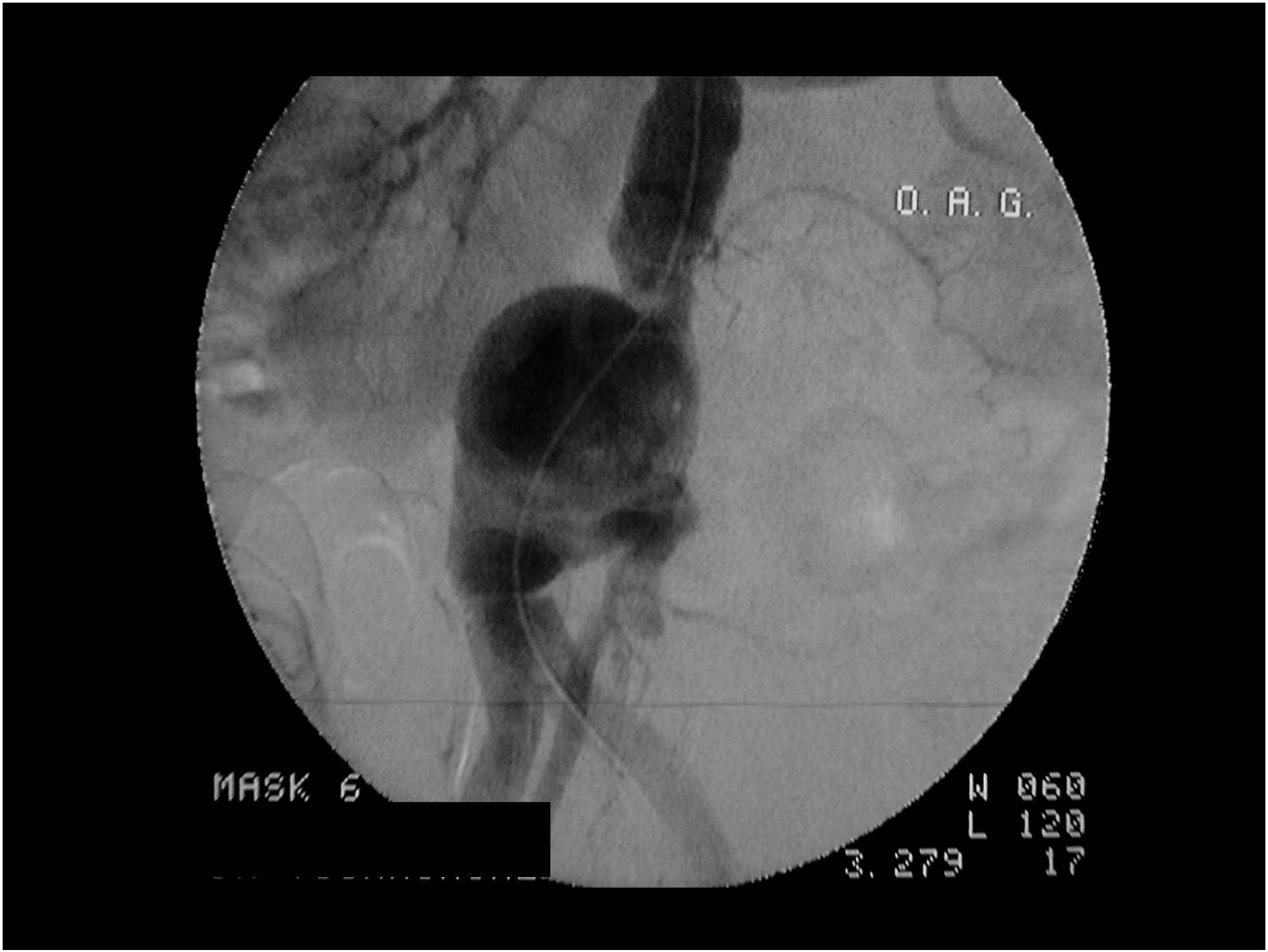
Prothèse Aorto Bi fémorale avec sténose bilatérale







Faux anévrisme
Prothèse/aorte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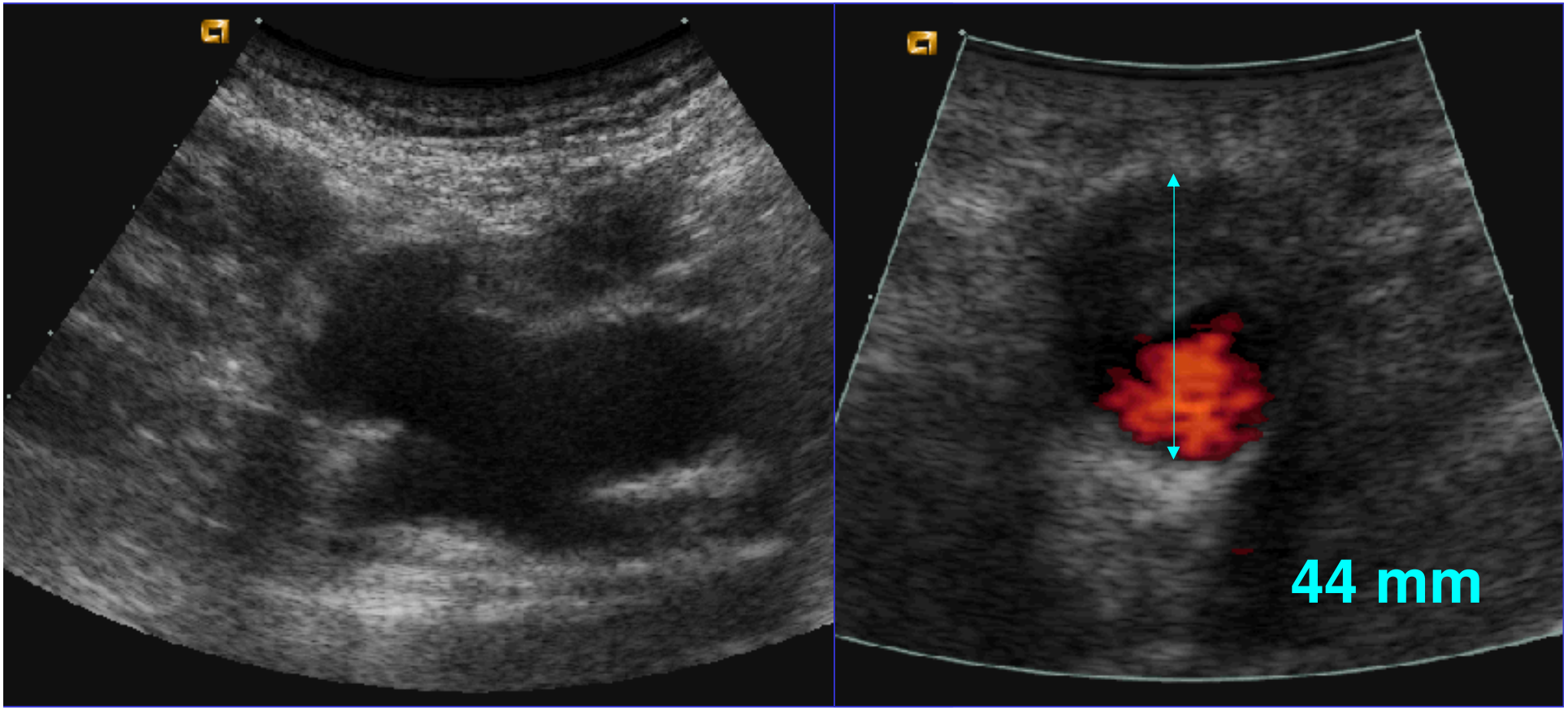
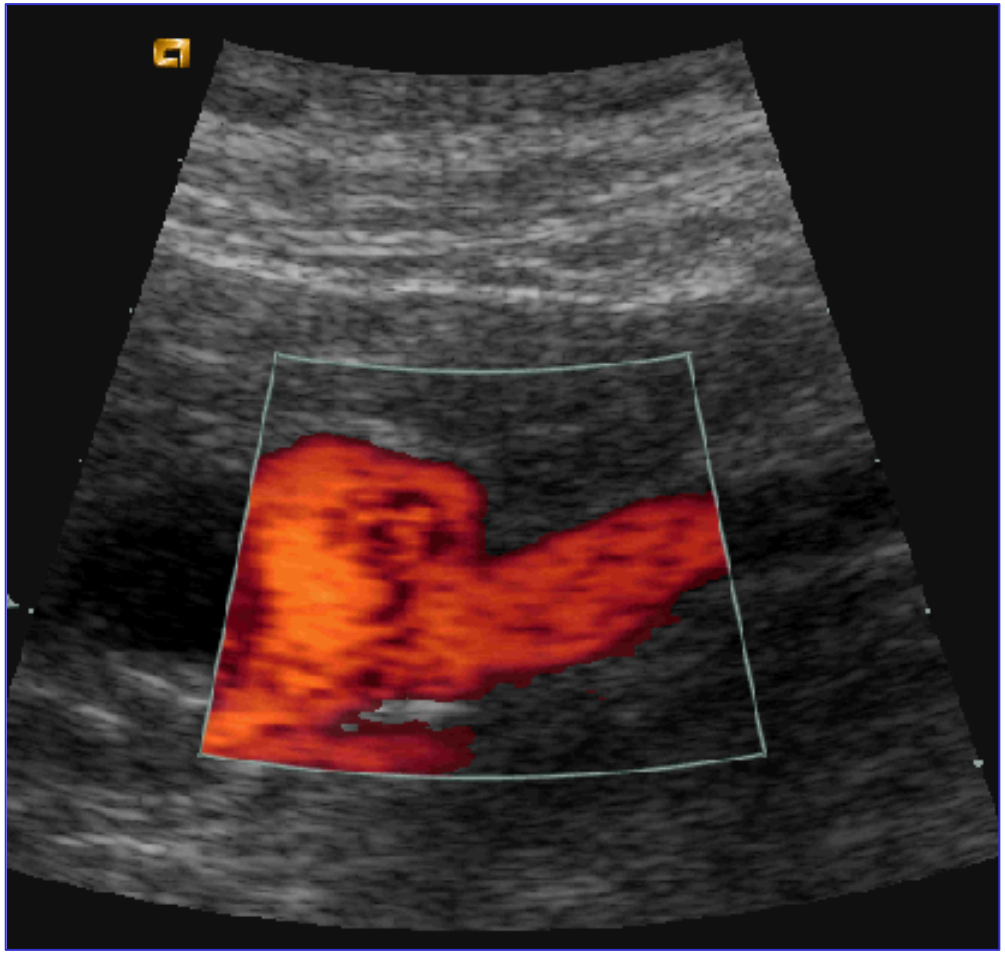
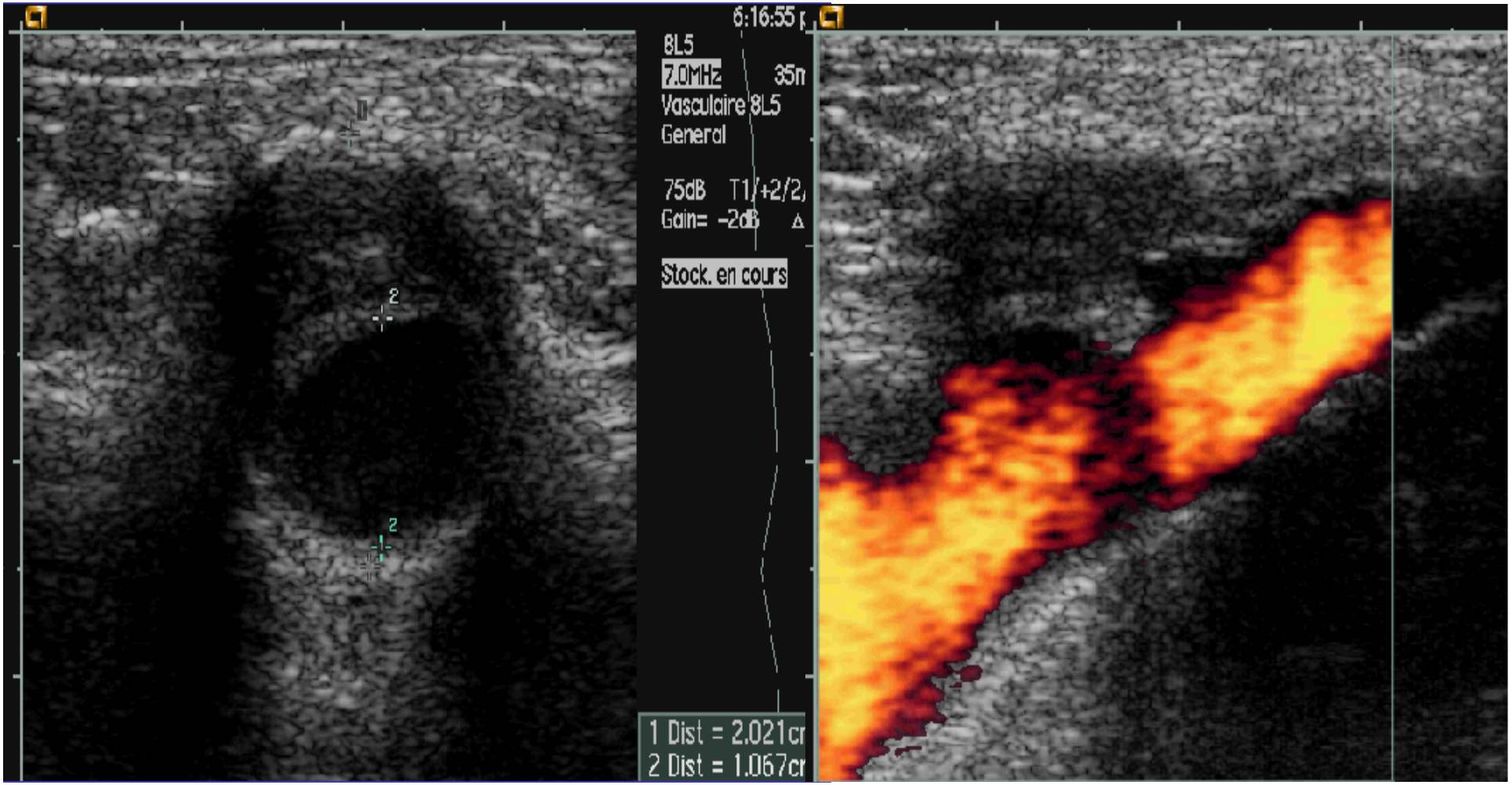


Dilatation anévrismale aorte prothèse

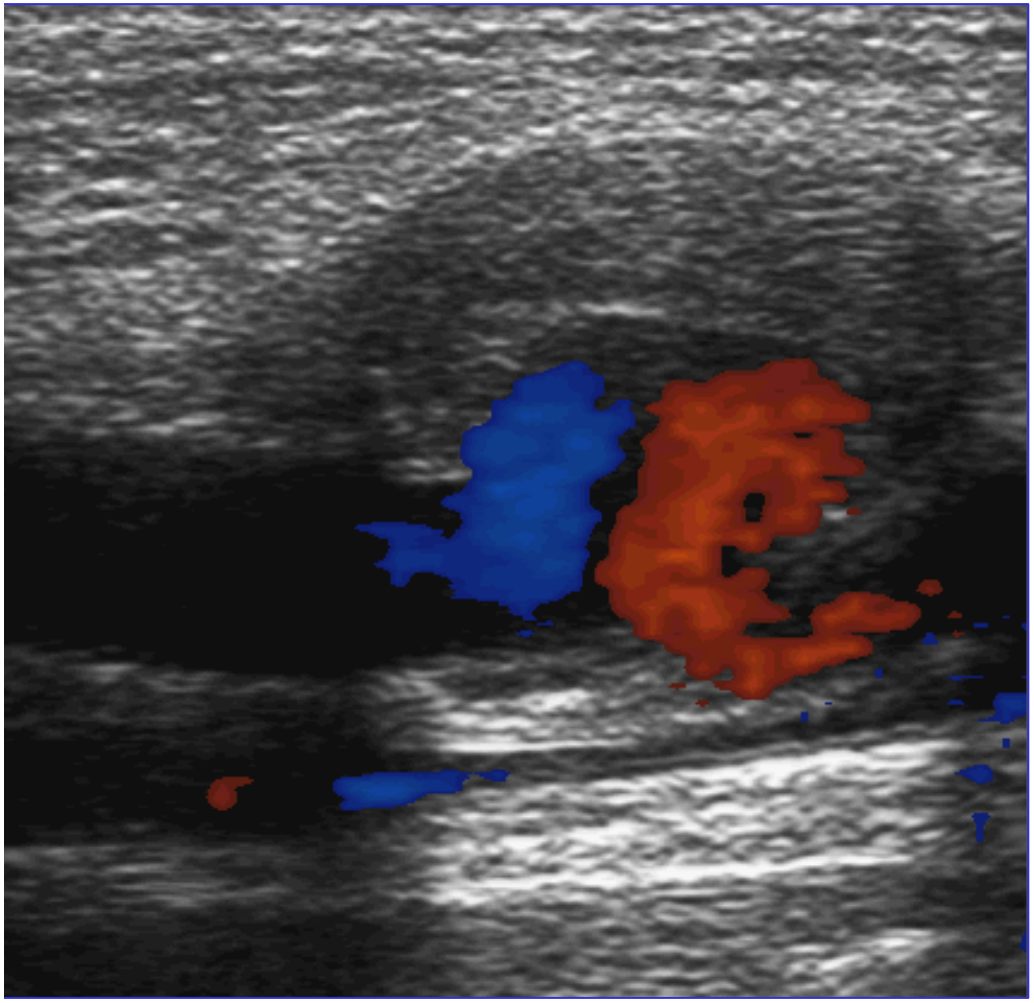


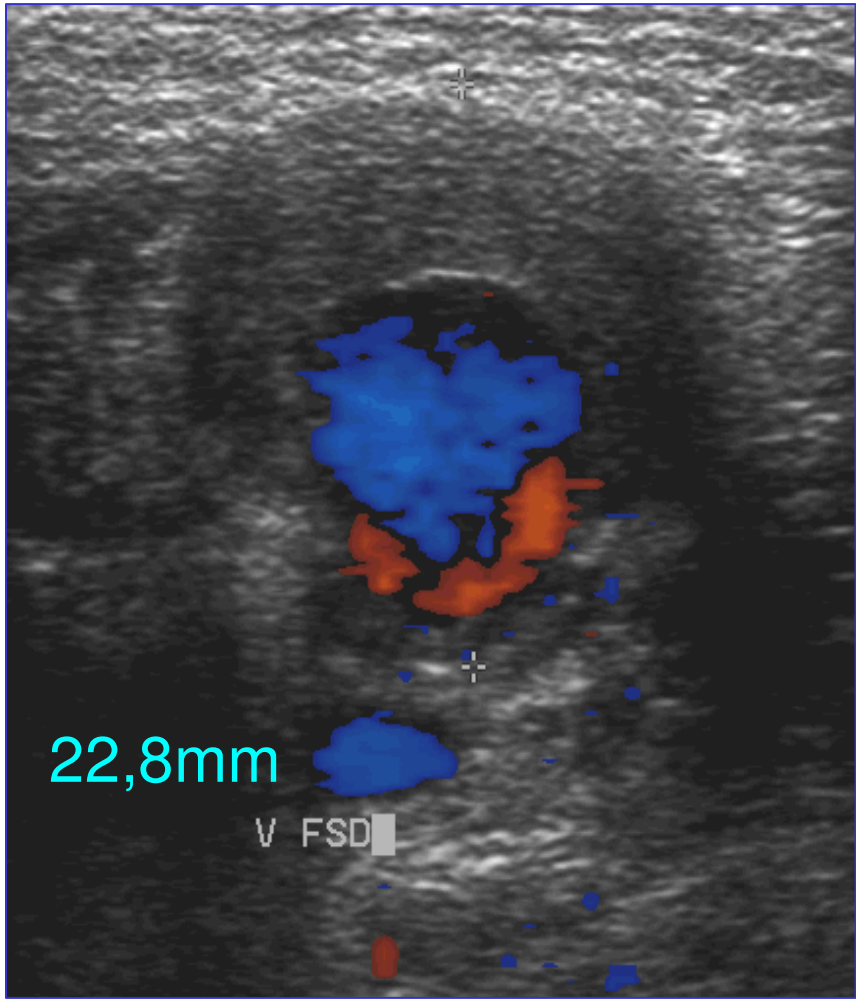
Dilatation prothèse artère iliaque externe

30 mm



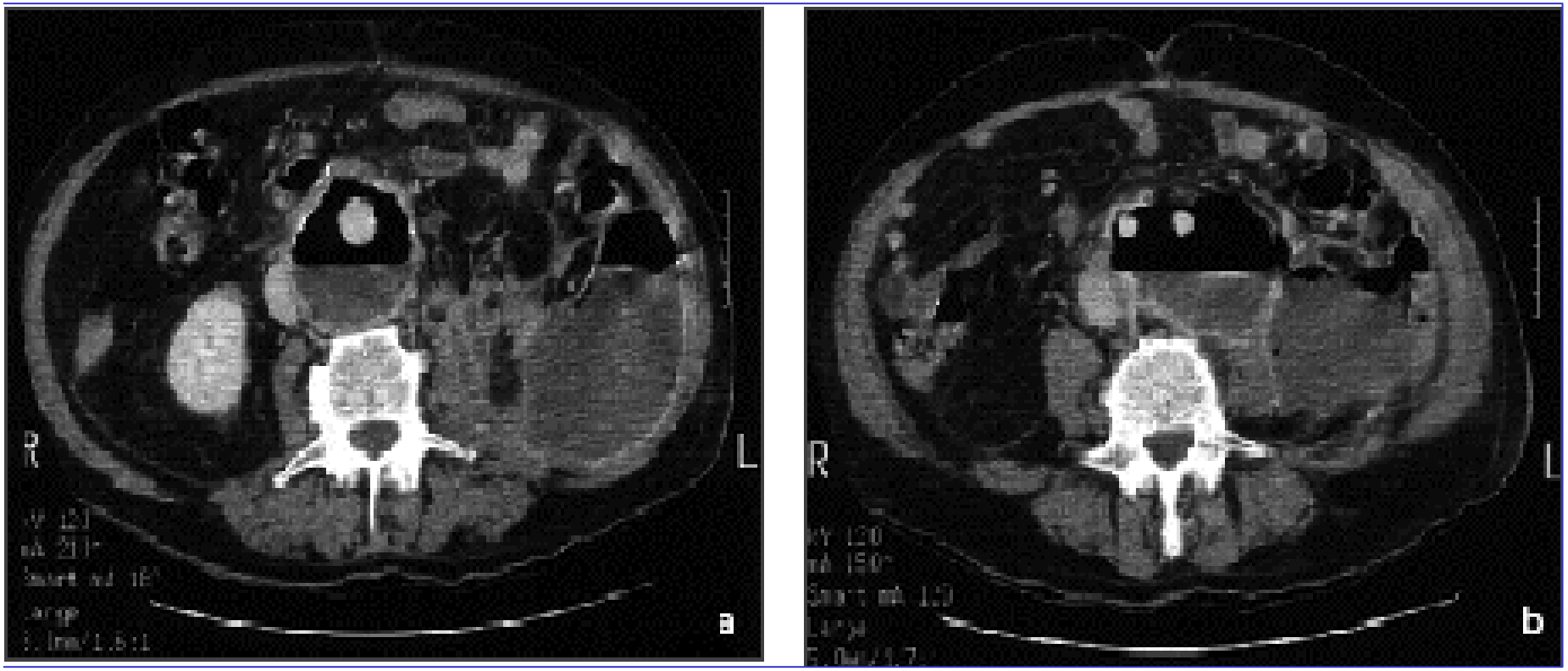
Anévrisme anastomotique prothèto fémoral





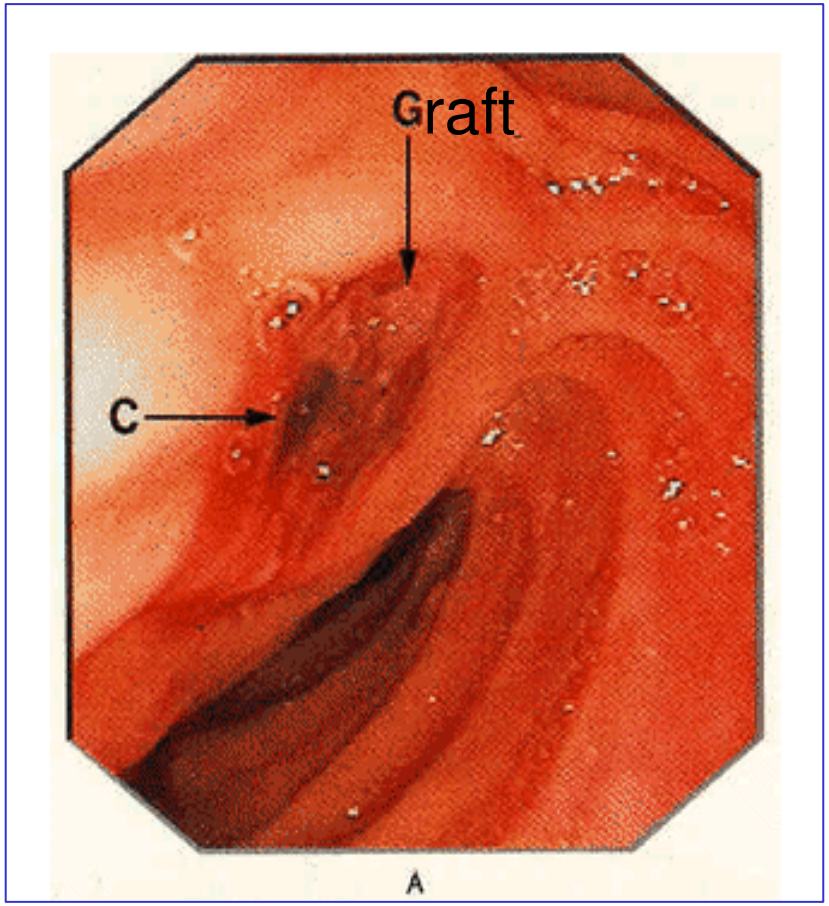
Faux anévrisme prothéto fémoral
Prothèse aorto bi fémorale

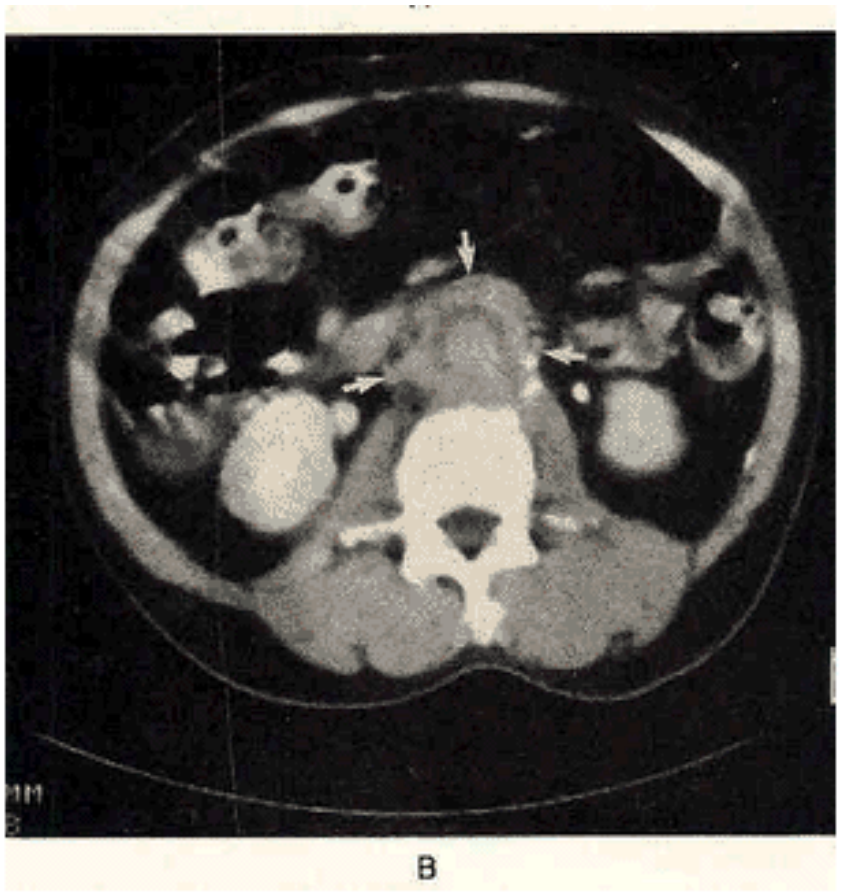
Limites des l'Écho Doppler : infection de prothèse



Tomodensitométrie montrant la présence d'une importante collection avec un niveau hydro-aérique autour du corps (a) et des branches (b) de la prothèse aorto-bi-iliaque, infection de prothèse

Limites des l'Écho Doppler : fistule





A 1.5-cm mucosal defect with the classic appearance of an aortoduodenal fistula was detected by endoscopy in the third portion of the duodenum (Panel A). The patient had a Dacron aortic graft and presented with hematemesis. C indicates the clot overlying the bleeding site, and G the graft with a superimposed collection of infected fluid. Computed tomographic scanning (Panel B) revealed fluid collection in the area of the aorta (arrows). Surgery confirmed the presence of the aortoenteric fistula and an infected graft, N Engl J Med 1993;328:1166, Aortoenteric Fistula Paul E. Zachary

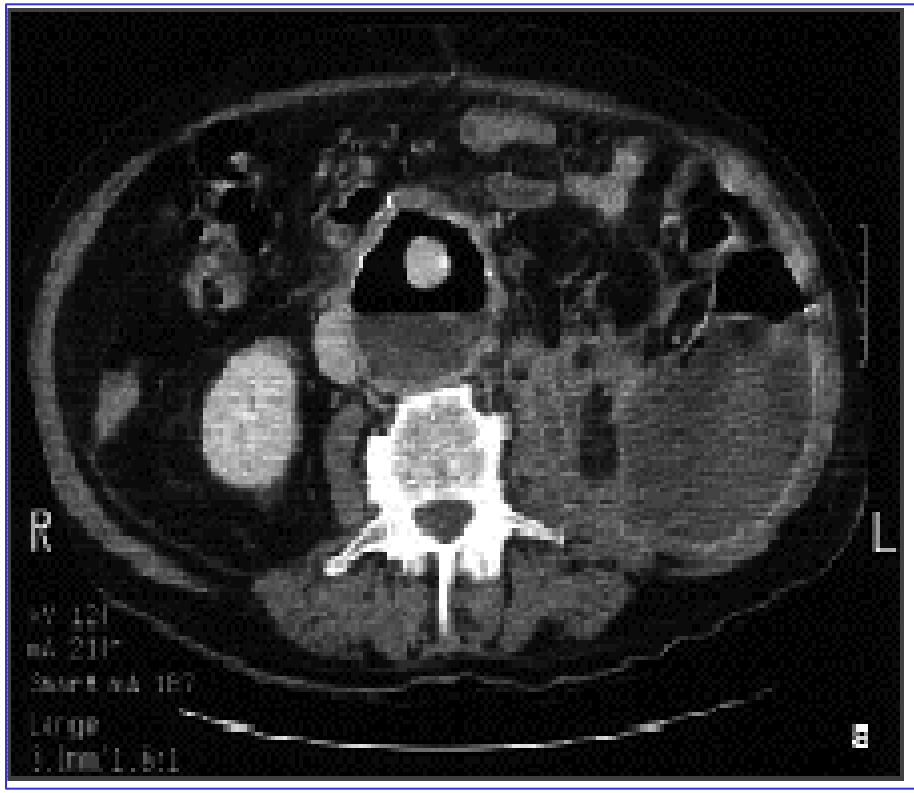
Durant la première année :
1 mois - 6 mois - 1 an
Après la première année :
Procédure simple, bon aval, patient compliant :
- jusqu'à 5 ans : annuel
Procédure complexe, aval médiocre, indocilité :
- annuel : à vie
Sténose ou dilatation en surveillance :
tous les 6 mois

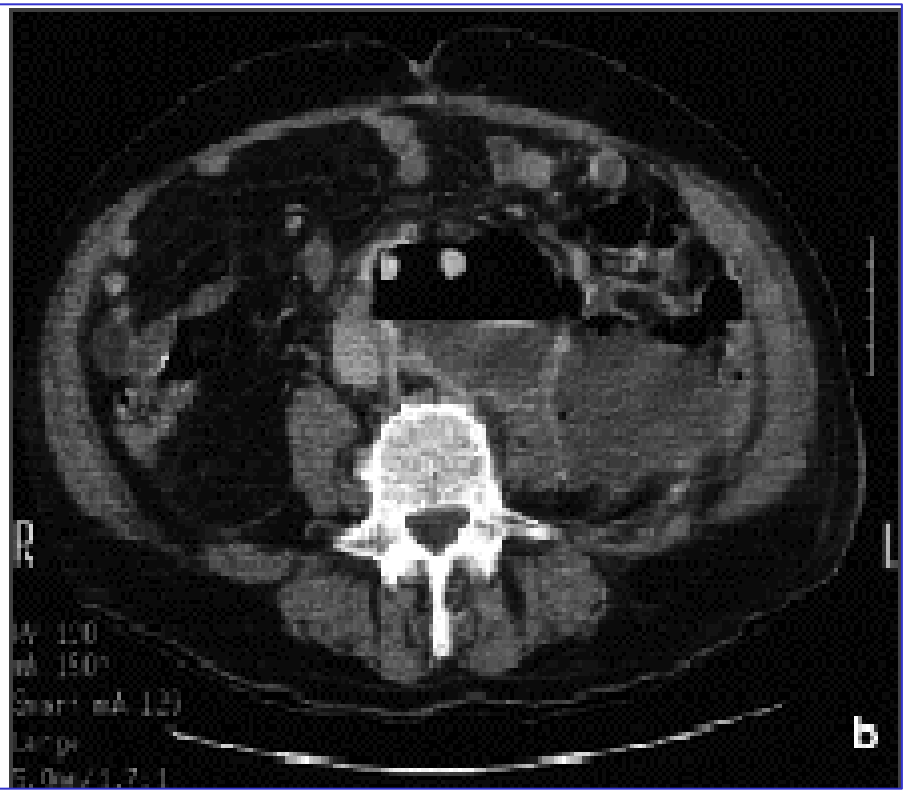
Rythme de surveillance des revascularisations aorto-ilio-fémorales.

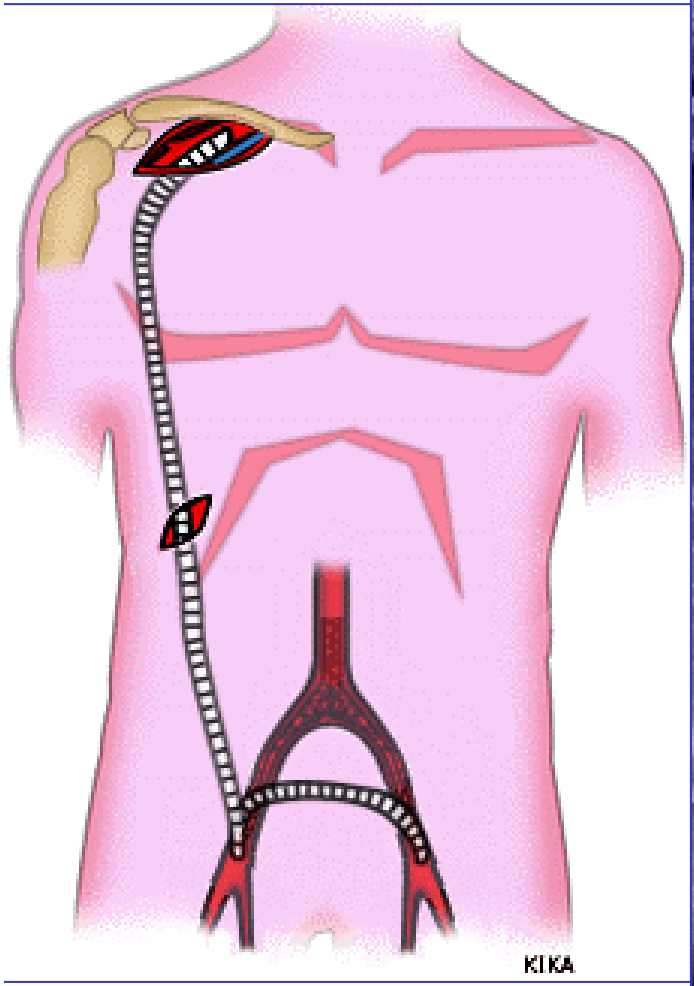
D. Mellière , JMV 1999

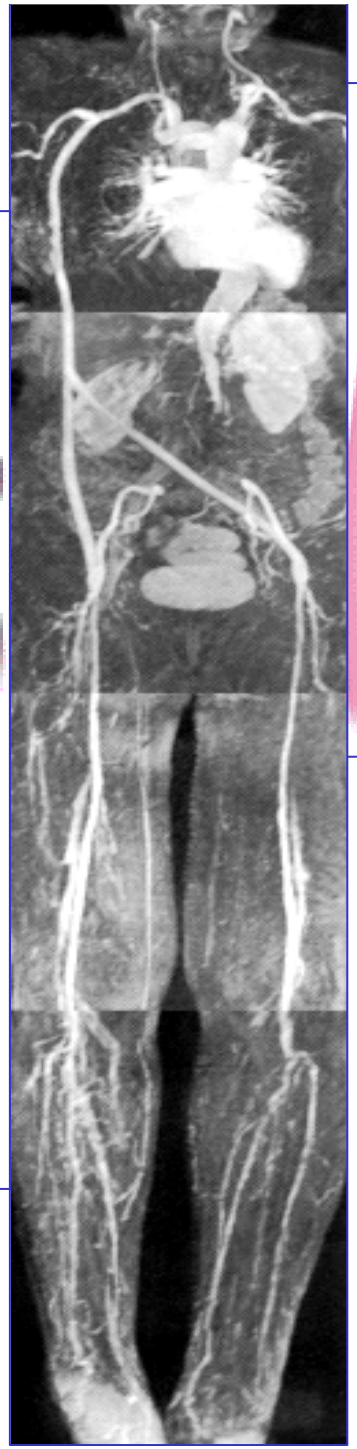
Prothèse

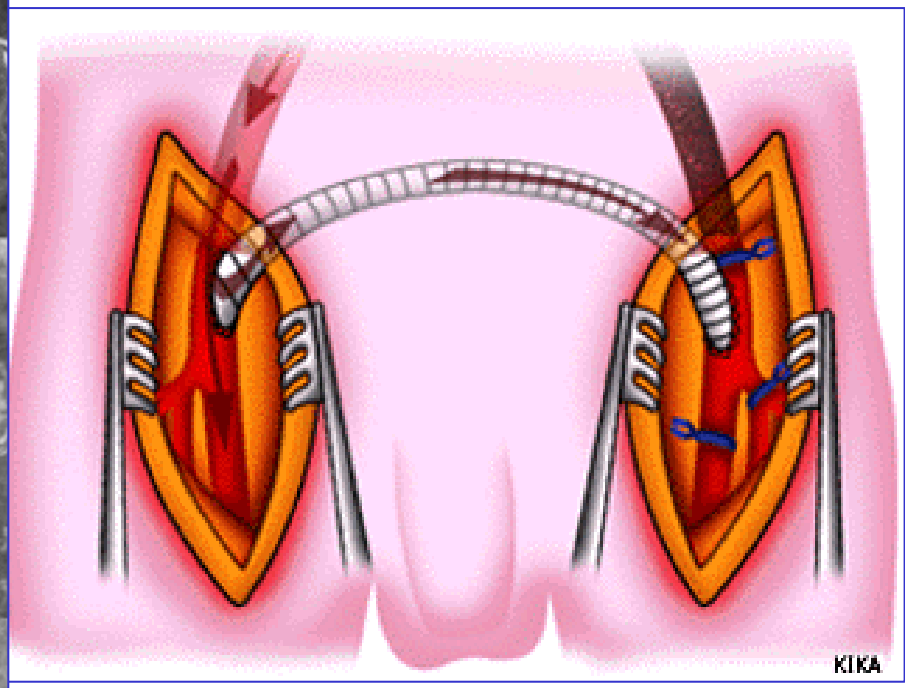
- Doute sur une prothèse : SCANNER






KIKA

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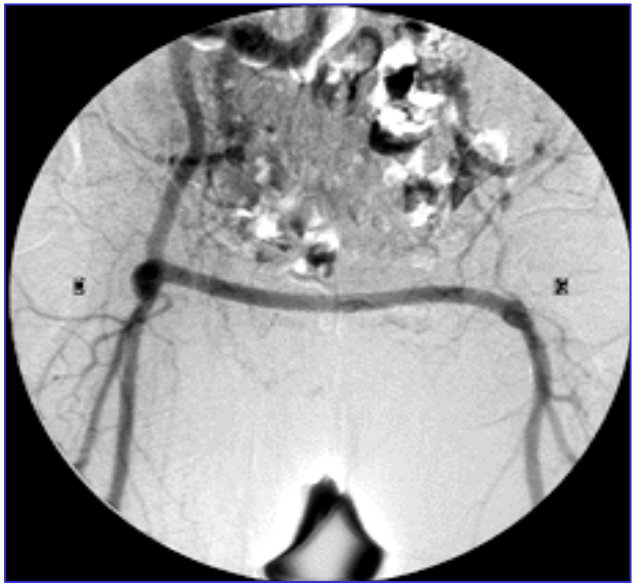
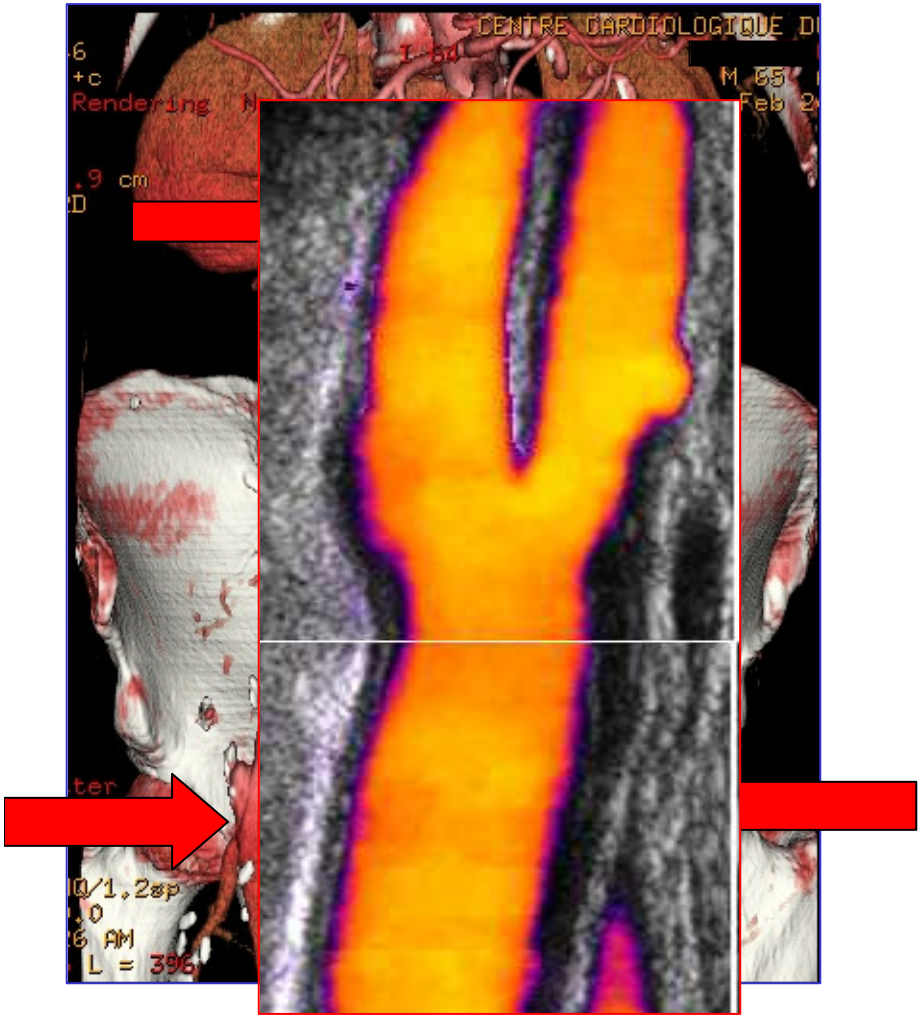


En pratique

- **Prothèse aorto iliaque ou fémoral : disposer du compte rendu opératoire avec mensurations des prothèses (16/8).**
- ***L'ED n'est pas un examen prédictif d'échec au niveau d'un pontage proximal*.**
- **Ne pas hésiter à demander un scanner de la prothèse (dilatation).**
- **Toujours se comporter en médecin décideur et thérapeute , notamment vis à vis de l'athérothrombose : Prévenir, Dépister, Inventorier, Traiter, Surveiller.**

En pratique....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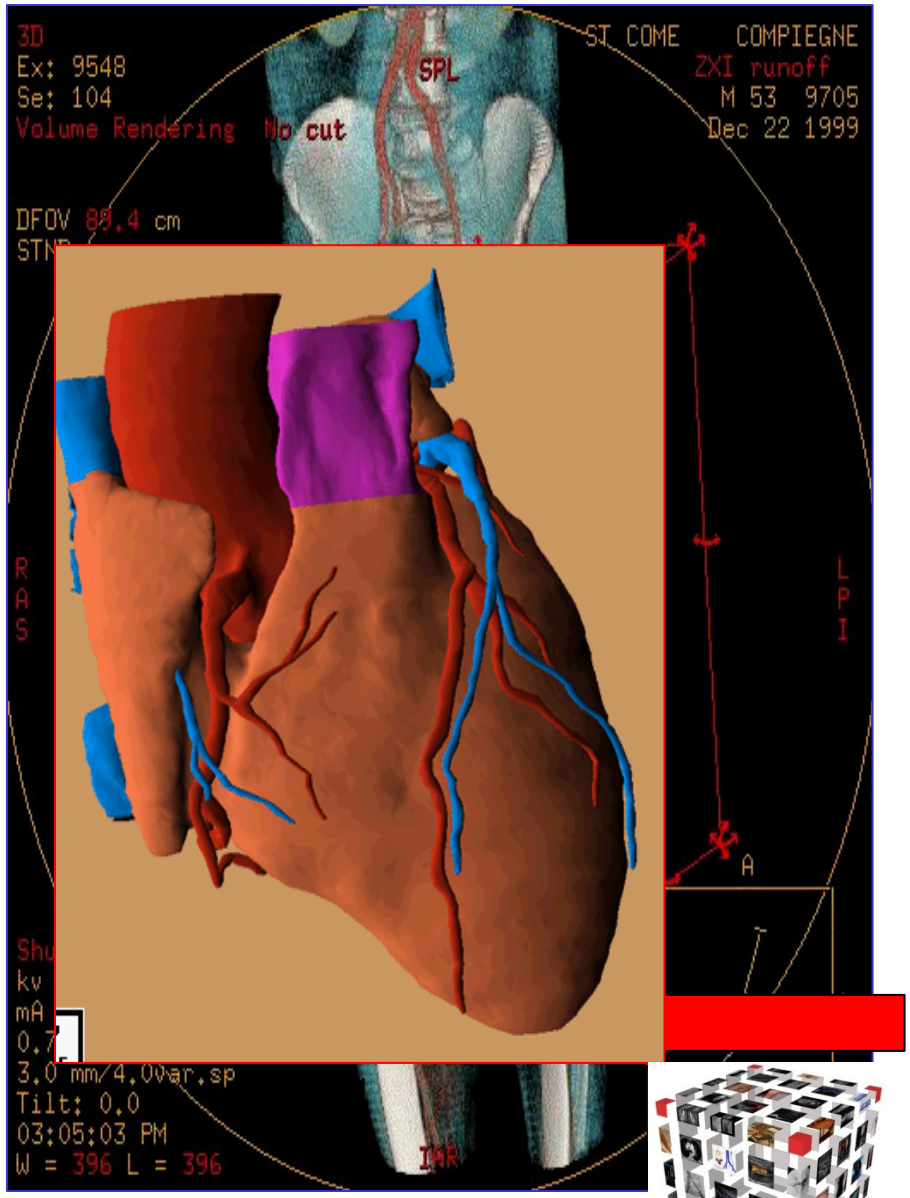
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Volume Rendering No cut
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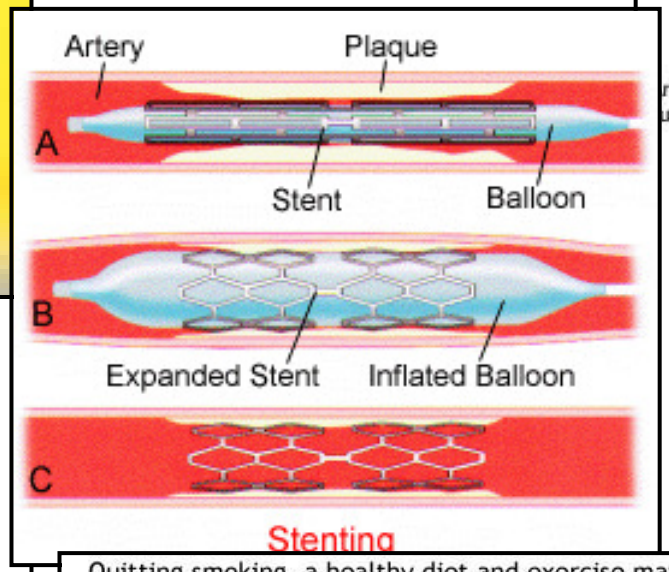
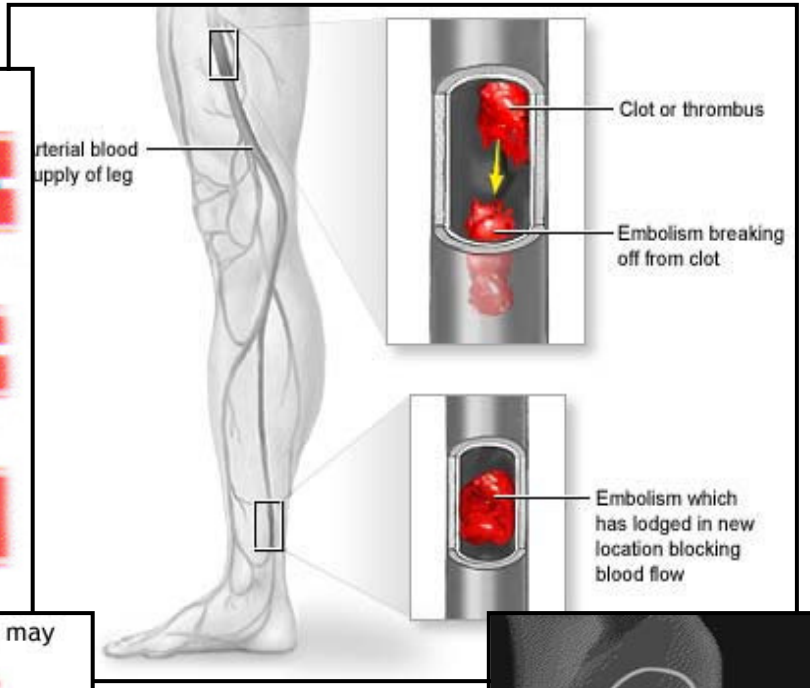
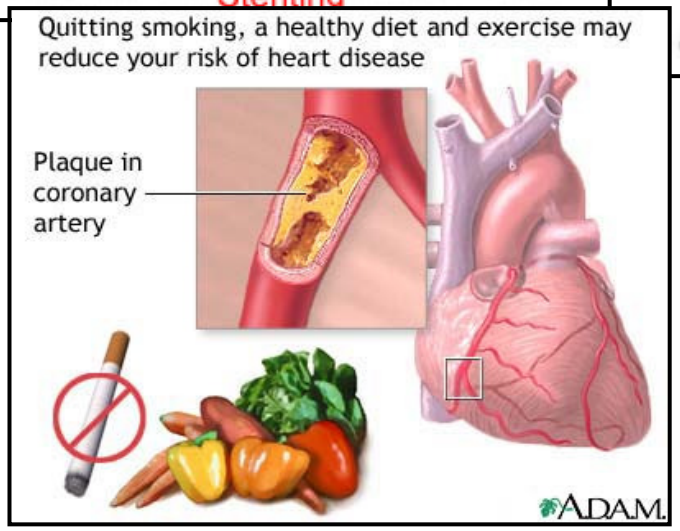
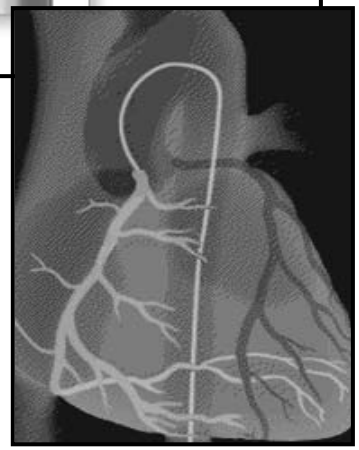
En pratique….


A - F - D


Artery
Plaque
A
Stent
Balloon
B
Expanded Stent
Inflated Balloon
C
Stenting


rterial blood
upply of leg
Clot or thrombus
Embolism breaking
off from clot
Embolism which
has lodged in new
location blocking
blood flow


Quitting smoking, a healthy diet and exercise may
reduce your risk of heart disease
Plaque in
coronary
artery
A.D.A.M.




PARLIAMENT
Lights
Parliament
Lights
100s
THE
PERFECT RECESS
Re·cess (Webster): A break from activity for rest or relaxation.
Re·cess (Parliament): A unique filter for extra smooth taste and low tar enjoyment.

Pontages sous inguinaux

- **Approximately 99,000 infra-inguinal bypass procedures were performed in the U.S. in 1998. It is estimated that approximately 22% of all infra-inguinal bypass grafts will fail by 12 months. Graft failure rates have been estimated to increase to 40% at 12 months for patients receiving composite, cephalic or lesser saphenous (high-risk) vein grafts *(Vascular Surgery Registry, Brigham and Women's Hospital).***

Table 20. Vascular Surgical Procedures for Outflow Improvement

Outflow Procedure	Operative Mortality (%)	Expected Patency Rate (%)	References
Fem-AK popliteal vein	1.3–6.3	66 (5 yrs)	(85,105,106)
Fem-AK popliteal prosthetic	1.3–6.3	50 (5 yrs)	(115–118)
Fem-BK popliteal vein	1.3–6.3	66 (5 yrs)	(105,106)
Fem-BK popliteal prosthetic	1.3–6.3	33 (5 yrs)	(85,105,106)
Fem-Tib vein	1.3–6.3	74–80 (5 yrs)	(107)
Fem-Tib prosthetic	1.3–6.3	25 (3 yrs)	(109)
Composite sequential bypass	0–4	28–40 (5 yrs)	(110,111)
Fem-Tib blind segment bypass	2.7–3.2	64–67 (2 yrs)	(112)
Profundaplasty	0–3	49–50 (3 yrs)	(113,114)

AK = above the knee; BK = below the knee; Fem = femoral; Tib = tibial.

Recommandations AHA 2005
Circulation 2006

Surveillance : pourquoi ?

- **Tous les pontages fémoro poplités sténosés à plus de 70% et la moitié des pontages sténosés à 50% seront thrombosés dans les 2 ans**

Dehant V, Saby JC, STV 1999, Vol 11, N° 9, 679-5

Surveillance : pourquoi ?

Surveillance de 539 pontages veineux sous-inguinaux

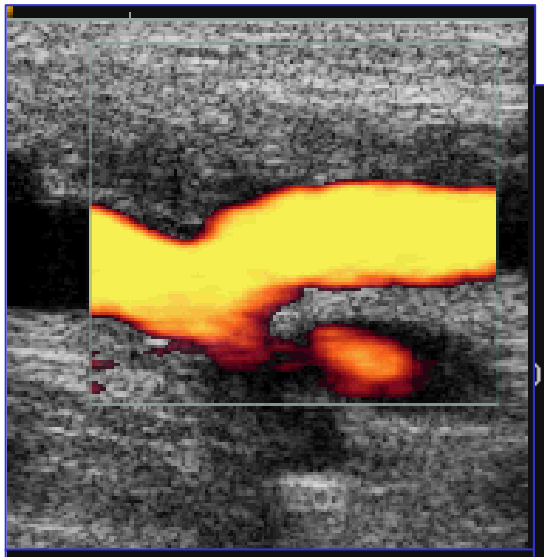
Perméabilité secondaire à 2 ans :

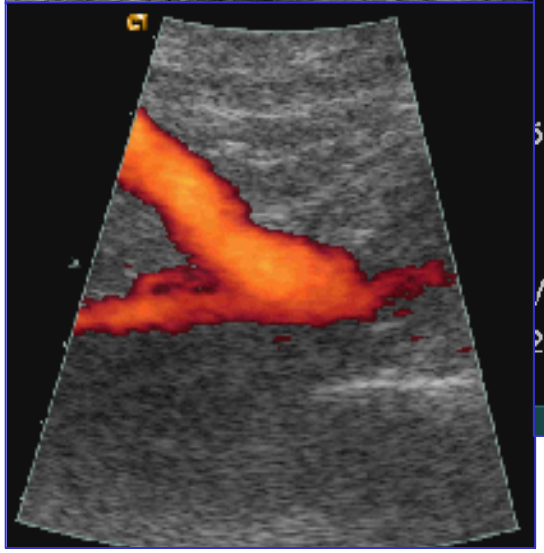
79% pour les pontages repris avant thrombose

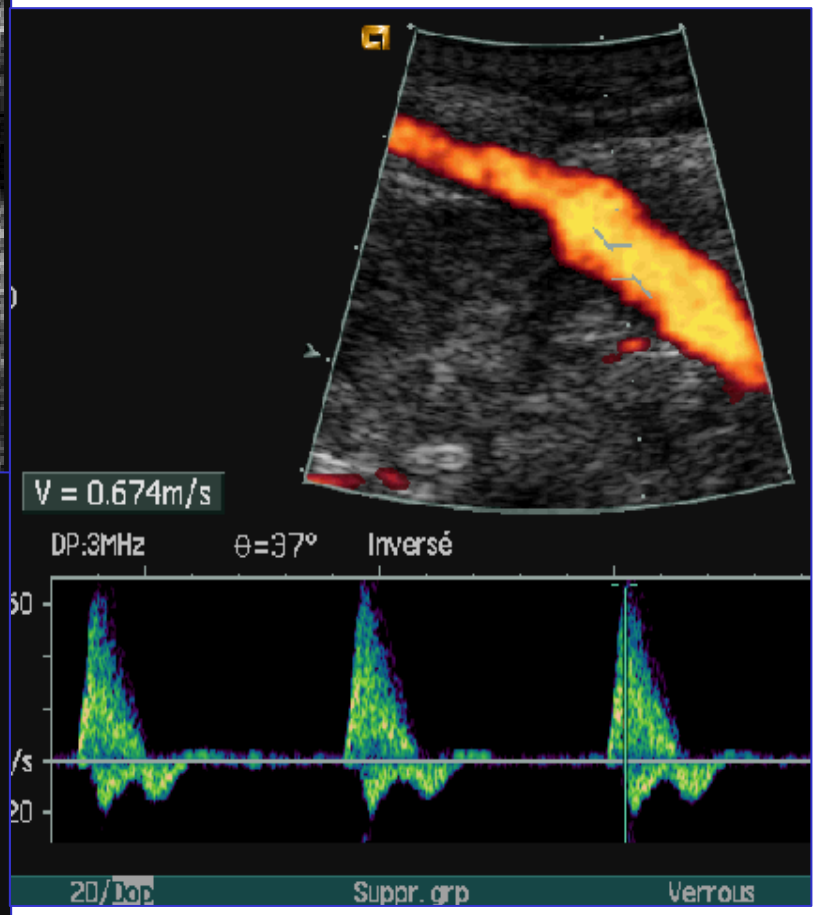
55% pour les pontages repris après thrombose ($p<0,02$)

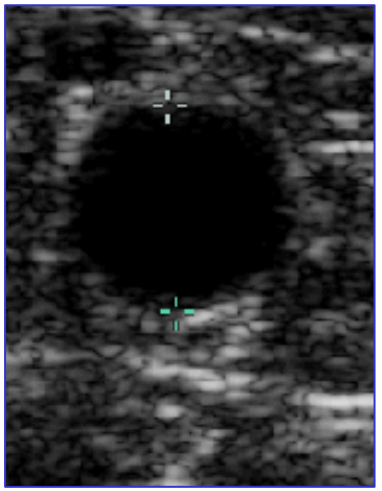
BERGAMINI Ann Surg 1995;221:507-15

Les pontages veineux

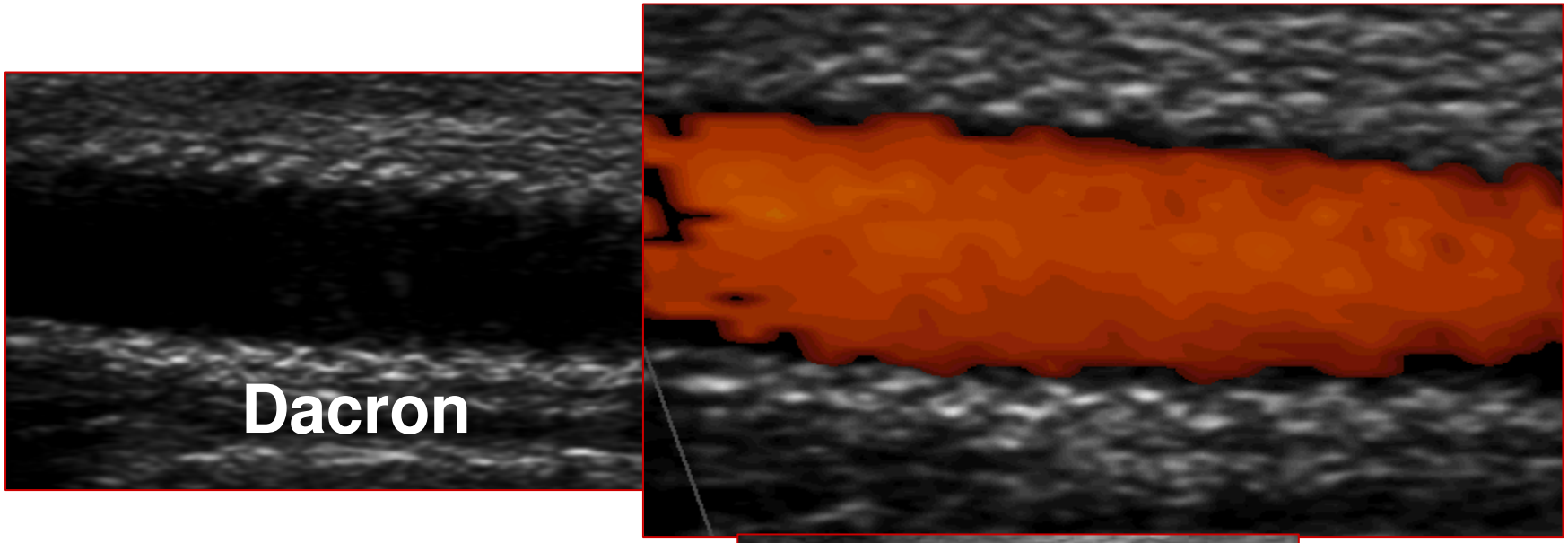


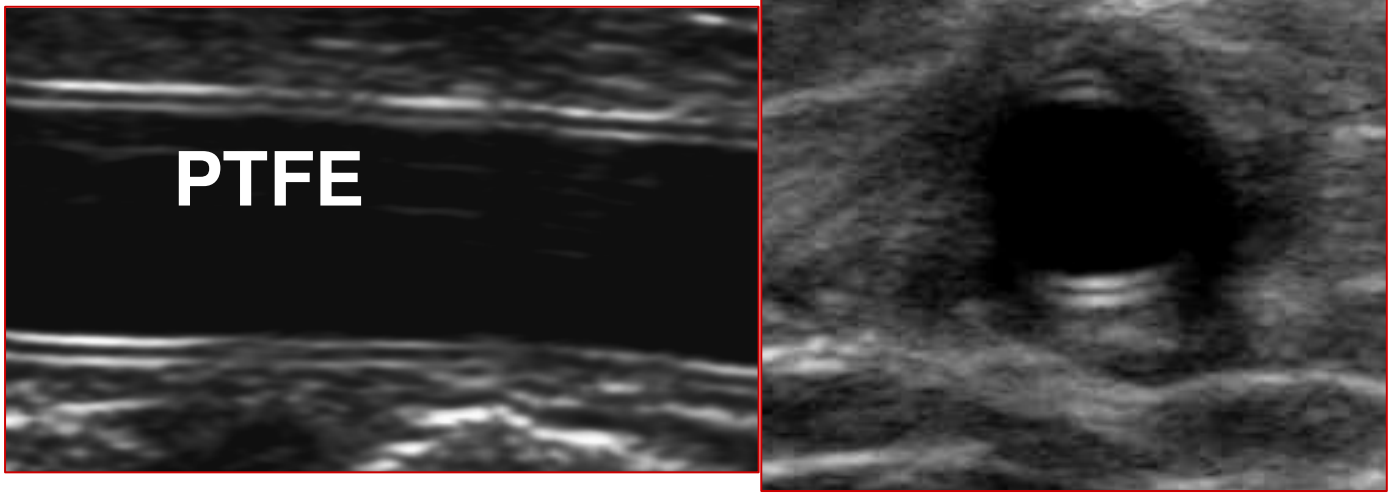


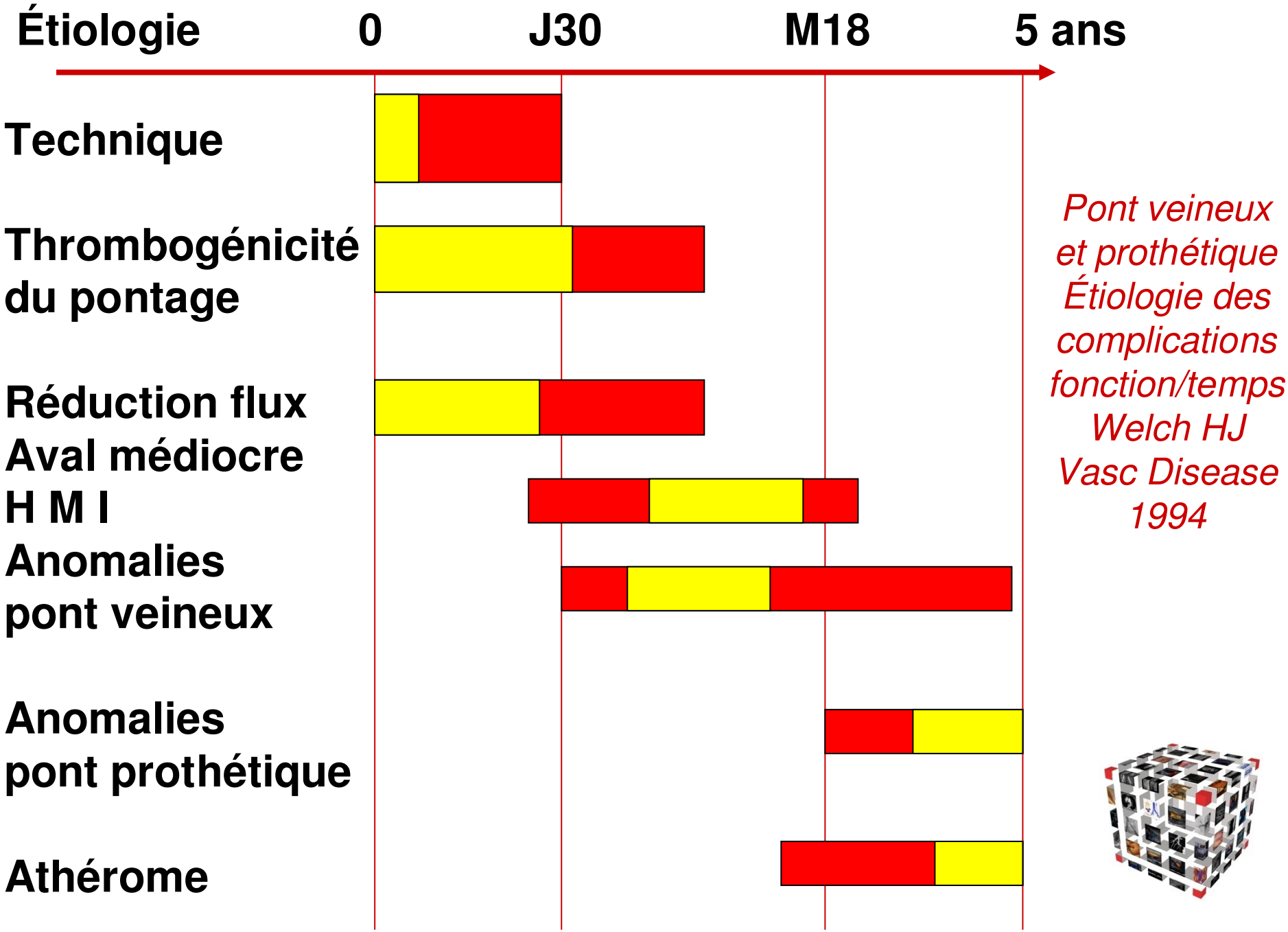




Pontages Prothétiques



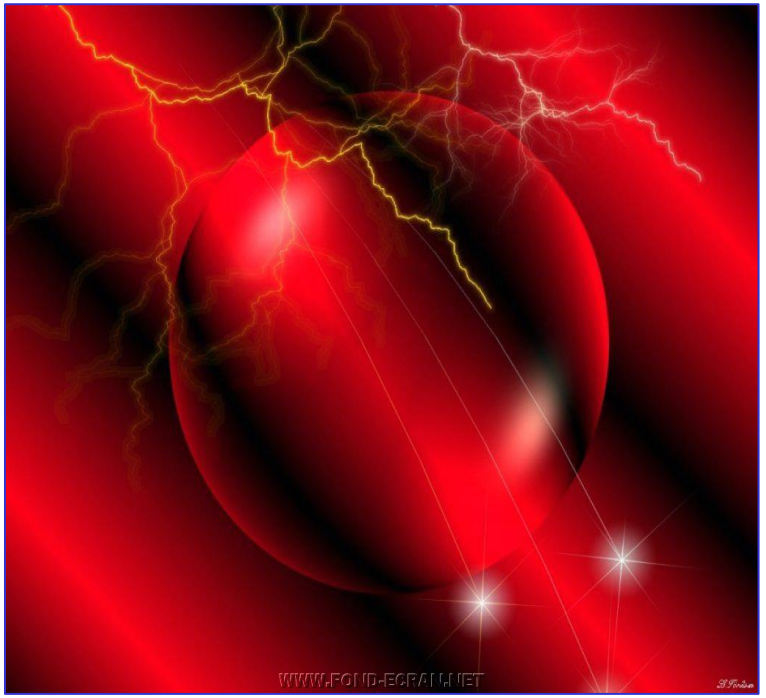




Pont veineux et prothétique
Étiologie des complications fonction/temps
Welch HJ
Vasc Disease
1994

Facteurs de risques d'occlusion des pontages

- **Facteurs locaux :**
  - Pontage prothétique
  - Greffon veineux de mauvaise qualité
  - Lit d'aval médiocre
  - Longueur du pontage
  - Pontage composite
  - Pontage extra anatomique
- **Facteurs généraux :**
  - Diabète
  - Insuffisance rénale
  - Tabac
  - Dyslipidémie non contrôlée
  - Mobilité réduite



Refson JS, Vascular and Endovascular Surgery, Ed Saunders, 2001