Pedal Angioplasty
Landmarks and Access Lines

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Treating Pedal Lesions Needs Understanding Pedal Vascularization
New Strategies

• New concepts: Angiosome model
  Healing vs Patency

• New Devices: Dedicated balloons
  Drug eluting ballons (DEB)
  Dedicated Stents

• New techniques: Subintimal
  Retrograde
  Combinations
Standard Technical Aspects and Devices

• Antegrade access
• 4 F sheet
• 0.014 - 0.018" guidewires
• Angulated tip
• CTO dedicated guidewires
• 2.5mm crural
• 2mm pedal
Advanced techniques

- trans pedal /crural approach
- Guide wire pull through, parallel antegrade, subintimal, long retrograde
- 0.014`` GW, 1.3-2.8 F support, 4F balloon catheters
Distal Access

- Nitro i.a. 200-300 µg
- Nitro + local anesthesia
- 5000-7500 Heparin
- 4cm – 7cm, 21 G needles
- 0.018 polymer coated guide wire
- 0.018 support catheter, OD 2.6F
- Needle extension
Distal Access

• sheathless approach

• 3 F pedal sheath (Cook)

• 0,014 GW low profile OTW

• 0.018 GW , support catheter
Direct punctures

4f sheath
sheathless access

3F pedal sheath
Antegrade femoral access

Intraluminal tracking of guidewire

Subintimal tracking

Subintimal tracking before pedo-plantar arch

Subintimal tracking beyond pedo-plantar arch

Transcollateral Angioplasty

PTA

Pedal access

Direct retrograde puncture
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