

## **The aim of this paper is to evaluate the safety and efficacy of endovascular revascularization of malignant superior vena cava syndrome (SVCS) and simultaneous implantation of a totally implantable venous access port (TIVAP) using a dual venous approach” Anton et al (2017).**

Abstract:

**PURPOSE:** The aim of this paper is to evaluate the safety and efficacy of endovascular revascularization of malignant superior vena cava syndrome (SVCS) and simultaneous implantation of a totally implantable venous access port (TIVAP) using a dual venous approach.

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**MATERIALS AND METHODS:** Retrospectively, 31 patients (mean age  $67 \pm 8$  years) with malignant CVO who had undergone revascularization by implantation of a self-expanding stent into the superior vena cava (SVC) (Sinus XL<sup>®</sup>, OptiMed, Germany;  $n = 11$  and Protégé<sup>™</sup> EverFlex, Covidien, Ireland;  $n = 20$ ) via a transfemoral access were identified. Simultaneously, percutaneous access via a subclavian vein was used to (a) probe the lesion from above, (b) facilitate a through-and-through maneuver, and (c) implant a TIVAP. Primary endpoints with regard to the SVC syndrome were technical (residual stenosis  $< 30\%$ ) and clinical (relief of symptoms) success; with regard to TIVAP implantation technical success was defined as positioning of the functional catheter within the SVC. Secondary endpoints were complications as well as stent and TIVAP patency.

**RESULTS:** Technical and clinical success rate were 100% for revascularization of the SVS and 100% for implantation of the TIVAP. One access site hematoma (minor complication, day 2) and one port-catheter-associated sepsis (major complication, day 18) were identified. Mean catheter days were  $313 \pm 370$  days. Mean imaging follow-up was  $184 \pm 172$  days. Estimated patency rates at 3, 6, and 12 months were 100% in Group 1 and 84, 84, and 56%

in Group 2 ( $p = 0.338$ ).

**CONCLUSION:** Stent-based revascularization of malignant SVCS with concomitant implantation of a port device using a dual venous approach appears to be safe and effective.

Reference:

Anton, S., Oechtering, T., Stahlberg, E., Jacob, F., Kleemann, M., Barkhausen, J. and Goltz, J.P. (2017) Endovascular stent-based revascularization of malignant superior vena cava syndrome with concomitant implantation of a port device using a dual venous approach. Supportive Care in Cancer. December 22nd. .

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