

Evaluation of the technical success rate and complications when retrieving dislocated intravascular foreign bodies" Ayx et al (2016).

Abstract:

Purpose: Evaluation of the technical success rate and complications when retrieving dislocated intravascular foreign bodies.

Material and Methods: Between 1999 and 2015 38 patients (21 female; 17 male; Age: 17-92; Average 54.3 years) underwent an extraction of intravascular dislocated foreign bodies, which were not lost during a radiological intervention. The extracted material included 29 port catheters, 3 tips of tunneled dialysis catheters, 2 stents, 2 guide wires, 1 CVC tip and 1 AS occluder device. Various catheters for repositioning and extraction were used. The access was transarterial as well as transvenous. Technical success was defined as complete removal of the foreign body.

Results: The technical success rate was 92.1% (35 of 38). In 17 patients an additional catheter was necessary to reposition the foreign body in order to make it accessible for the extraction catheter. In one case a stent was relocated and remodeled within the patient and was not extracted. In another case we experienced a dislocation of a small fragment of the port catheter into the distal parts of the pulmonary artery, which couldn't be extracted. A guide wire could not be extracted as it was already adhered with the vessel wall. Peri-interventional complications were not documented.

Conclusion: The percutaneous extraction of dislocated intravascular foreign bodies is technically successful and poor of complications. Interventional therapy can avoid surgical removal.

Key points:

- The percutaneous extraction of dislocated intravascular foreign bodies is technically successful and safe.
- In most cases surgical removal can be avoided.
- The gooseneck-snare catheter was mainly used for the extraction of intravascular foreign bodies.

Reference:

Ayx, I., Goessmann, H., Hubauer, H., Uller, W., Wiesinger, I., Uhl, C., Töpel, I. and Zorger, N. (2016) Interventional Removal of Intravascular Medical Devices: Methods and Technical Success. Rofo. April 19th. .

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