

What Is New In The Treatment Of External Iliac Artery Endofibrosis In Committed Cyclists: Is There A Role For Endovascular Treatment?

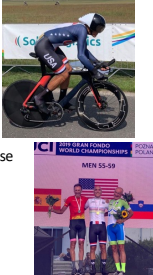
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Disclosures

Medtronic, Inc, Society for Vascular Surgery

External Iliac Artery Endofibrosis

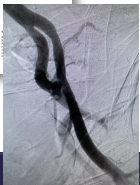
- High performance athletes
 - Cyclists most typical, but runners, skaters, skiers...
 - L leg > R, may be bilateral
- Characteristic lesion
 - Distinct from atherosclerosis, FMD, cystic adventitial disease
 - Circumferential or eccentric
- Most common location proximal external iliac artery
 - Other arteries involved: femoral>common iliac



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Endofibrosis

- Hyperflexion at the hip
 - Repetitive stretch
- Arterial fixation
 - Inguinal ligament, hypogastric, psoas branches
- Psoas muscle impingement
 - Combination of hypertrophy and fixation
- Arterial redundancy
 - Kinking with or without endofibrosis
- Dynamic: vasospasm



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Treatment

Conservative measures:

- Often unacceptable to patients, small risk of progression/occlusion

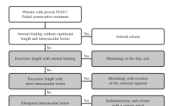
Surgical approaches: Controversy!

- Interposition graft
- Patch angioplasty +/- endofibrectomy
- Vessel shortening
- Iliac release, inguinal ligament release
- Endovascular: **no role as primary therapy**

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Endofibrosis

- Van Hooff et al JVS 2023: Enderterectomy and patch
 - 68 pts/79 limbs
 - 55.7% male, ave age 34
 - Postop: 91.2% sx improvement, 93.7 % satisfaction
 - Post-exercise ABI: 34 → 59
 - Long term: 94.5% sx improvement, 91.7% satisfaction
 - 2 saphenous vein patch dilation



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Mayo/Virginia Experience

2002


Observative external iliac angioplasty in and beyond: flow and vascular hemodynamics before and after stenting

2012

Results of external iliac artery reconstruction in and outflow

2020

Stenting Versus The Surgical Treatment of External Iliac Artery Disease in High-Risk Patients



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UVA Experience: 2004-2019

- Single institution: 75 patients (102 limbs) – 36% bilateral
- 26 Males (35.7%) vs. 49 Females (65.3%)
- Age – 40.35 years at intervention (range 22.3 – 56.1)
 - Start training – 23.74 years
 - Symptom onset – 35.89 years
- Prior intervention at other institutions – 8 limbs (7.8%)

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Outcomes

Survey Data: Patient-Reported Outcomes

- Response rate – 43% (32/75 patients)
- Pain Score
 - Pre-operative – 7.38
 - Postoperative – 3.38
- Return to full training – **71.87%**
- Any symptom persistence/recurrence – 22 (68.75%)
- Helpfulness in relieving symptoms – 7.16
- Pursue surgery again – **28 (87.5%)**

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Reintervention

Interposition – 19/56 limbs (33.9%)

- Proximal Intimal Hyperplasia – 3/19 limbs
- Distal Intimal Hyperplasia – 11/19 limbs
- Kinking – 2/19 limbs

Patch angioplasty – 6/30 limbs (20%)

- Distal Intimal Hyperplasia – 2/6 limbs
- Kinking – 4/6 limbs

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Controversy!

Short- and long-term results of open-flow artery stenting in peripheral arteries

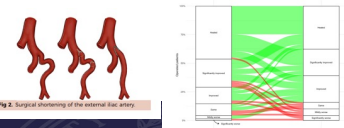
Surgical shortening of lengthened distal arteries in endovascular arterial stent graft and long-term satisfaction

Short- and long-term outcomes after endovascular and surgical treatment in endovascular stent graft and long-term satisfaction

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Shortening

- Van Hooff et al JVS 2022: Shortening only
 - 83 pts/90 limbs
 - 96.7% male, ave age 34
 - 2 prior arterial release, 2 went on to patch, 1 stent*
 - Postop: 87.5% sx improvement, 86.4% satisfaction
 - 10% same sx
 - 25.7% slight improvement
 - 50% large improvement
 - Post-exercise ABI: .55 → .62 (!)
 - Long term: 84.1% sx improvement, 81.2% satisfaction



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Release

- Van Hooff et al JVS 2022: Release only
 - 142 pts/155 limbs
 - 88.4% male, ave age 24
 - Postop: 83% sx improvement, 80% satisfaction
 - Post-exercise ABI .53 → .57
 - 34% with residual kinking, mostly ax
 - Long term: 63.9% sx improvement, 59% satisfaction
 - 8 reinterventions
 - Same interval:
 - 90 limbs/83 pts shortening only
 - 79 limbs/68 pts endarterectomy/patch

Patch Repair

Interposition Graft

Shortening

Inguinal Ligament Release

Role of Endovascular Therapy

Angioplasty

- Should not be used de novo.
- May be suitable for mild and moderate post-operative stenoses.
- Likely not durable result
- Avoid in severe hyperplasia. Lesion disruption may lead to worsening of symptoms, including acute thrombosis and embolization.

Stenting

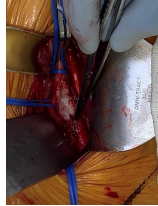
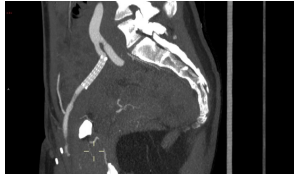
- **NO.** Extremes of flexion, stretch. Prone to vasospasm.

Case Reports

Endofibrosis of Iliac Arteries in High-Performance Athletes: Diagnostic Approach and Minimally Invasive Endovascular Treatment

Abraham D. Sternik, Vikar Bhatti, Umeshkrishnan Arany, Thorar J. Chelvestad, Jonathan G. Reed, Peter A. Ganzel
Medical College of Wisconsin, Milwaukee, Wisconsin; University of Wisconsin-Madison, Madison, WI, USA

Endovascular Treatment- Don't Be That Guy...



External Iliac Arteriopathy: Key Points

- Overall, most return to sport, high satisfaction
- Durability? Relatively high rate of reintervention long term
- BAD complications possible
- Genuine controversy:
 - Diagnostics and algorithm
 - Subtypes (and combinations)
 - Technique
- Endo: *Still "No!"*



Questions?

