

**#8      OUTCOME ANALYSIS OF SEVENTEEN CONSECUTIVE  
INFRAGENICULATE SUBINTIMAL ANGIOPLASTIES FOR LIMB  
SALVAGE**

John Lantis II M.D., Aileen Shieu M.D., Laura Withers M.D.,  
Gary Giangola M.D., George Todd M.D.

St Luke's – Roosevelt Hospital Center, New York, NY

**Objective:** To evaluate the efficacy of subintimal angioplasty of the infrageniculate vessels in the setting of limb salvage.

**Methods:** From July 1, 2003 until September 1, 2004 seventeen patients underwent subintimal angioplasty limited to the infrageniculate vessels for forefoot tissue loss. All patients were followed prospectively with limb loss as their final endpoint. Immediate post procedure pulse volume recordings (PVRs) were obtained, as were one month, three-month and six-month evaluations. All patients were diabetic, seven were on hemodialysis. All patients had palpable popliteal pulses and had at least one infrageniculate vessel successfully recanalized at the time of procedure.

**Results:** All patients had a significant change in their PVRs immediate post-procedure with an average increase in ABI of  $> 0.4$ . The vessels recanalized include; anterior tibial (9), peroneal (6), posterior tibial (5), with 3 patients having two vessels recanalized. Seven patients initially regained palpable dorsalis pedis pulses and two regained posterior tibial pulses. Throughout the group PVRs declined over time. There were two deaths during the follow up period. Six wounds successfully healed. There were eight amputations, including all of the ESRD patients and there was one re-intervention.

**Conclusion:** Despite successful angiographic and early diagnostic testing criteria, the rate of limb loss in the severe DM patient population undergoing isolated infrageniculate subintimal angioplasty is still very high. The sub-group with ESRD at present may be better served with primary amputation than with subintimal intervention.