





Conflict of Interest Max Amor

- Nothing to declare.



SUPERA Use in Extra Femoral disease

Case 1

SUPERA in Occluded axillary artery as bailout stenting

M.F 81 y.o female

Cardiovascular risk factors: HBP, dyslipidemia

Past medical History : 1978: Radiotherapy for breast cancer
Paroxysmal atrial fibrillation

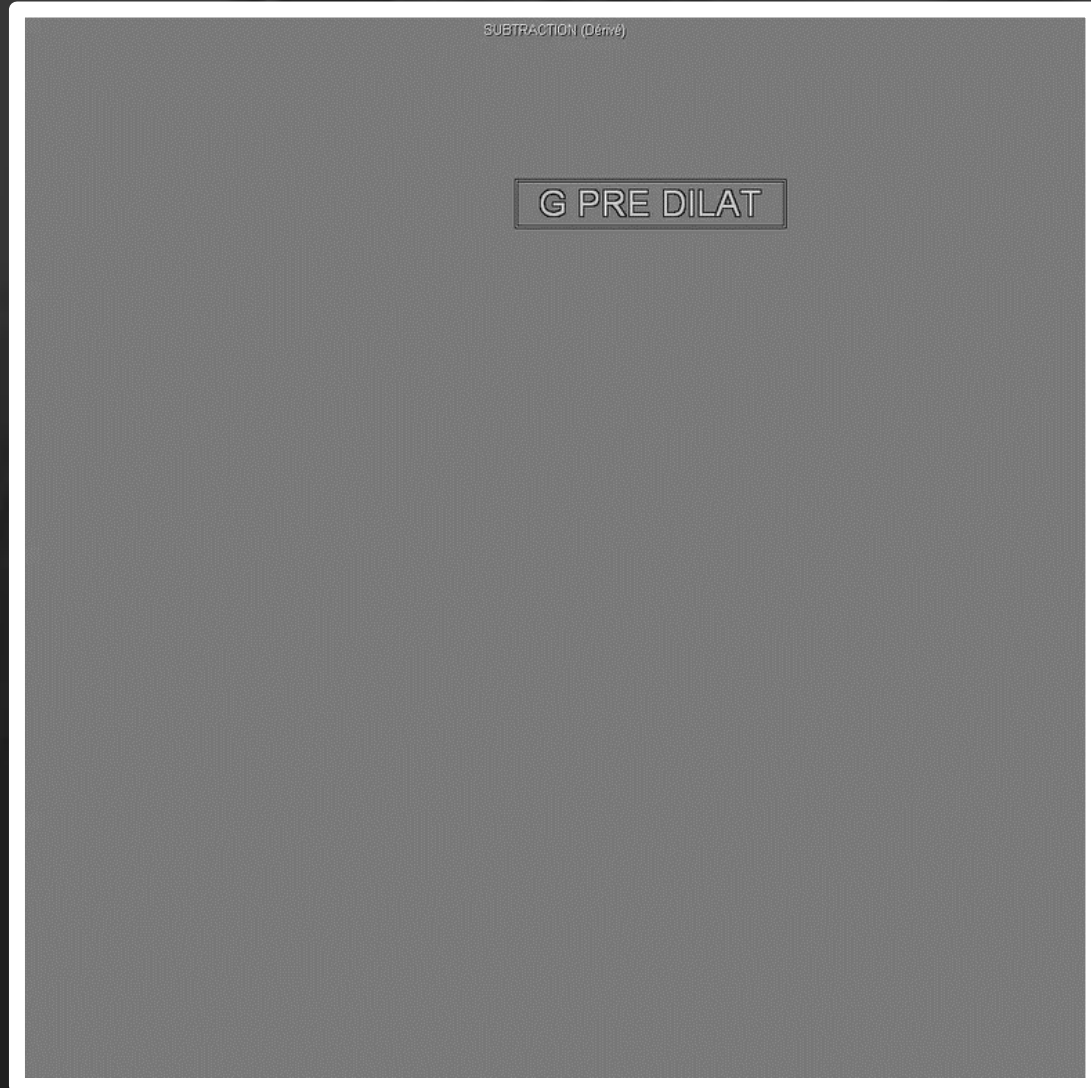
Current diagnosis:

- Progressive left arm exertional pain / intermittent rest pain
- Left arm and hand oedema/ Finger Acrocyanosis

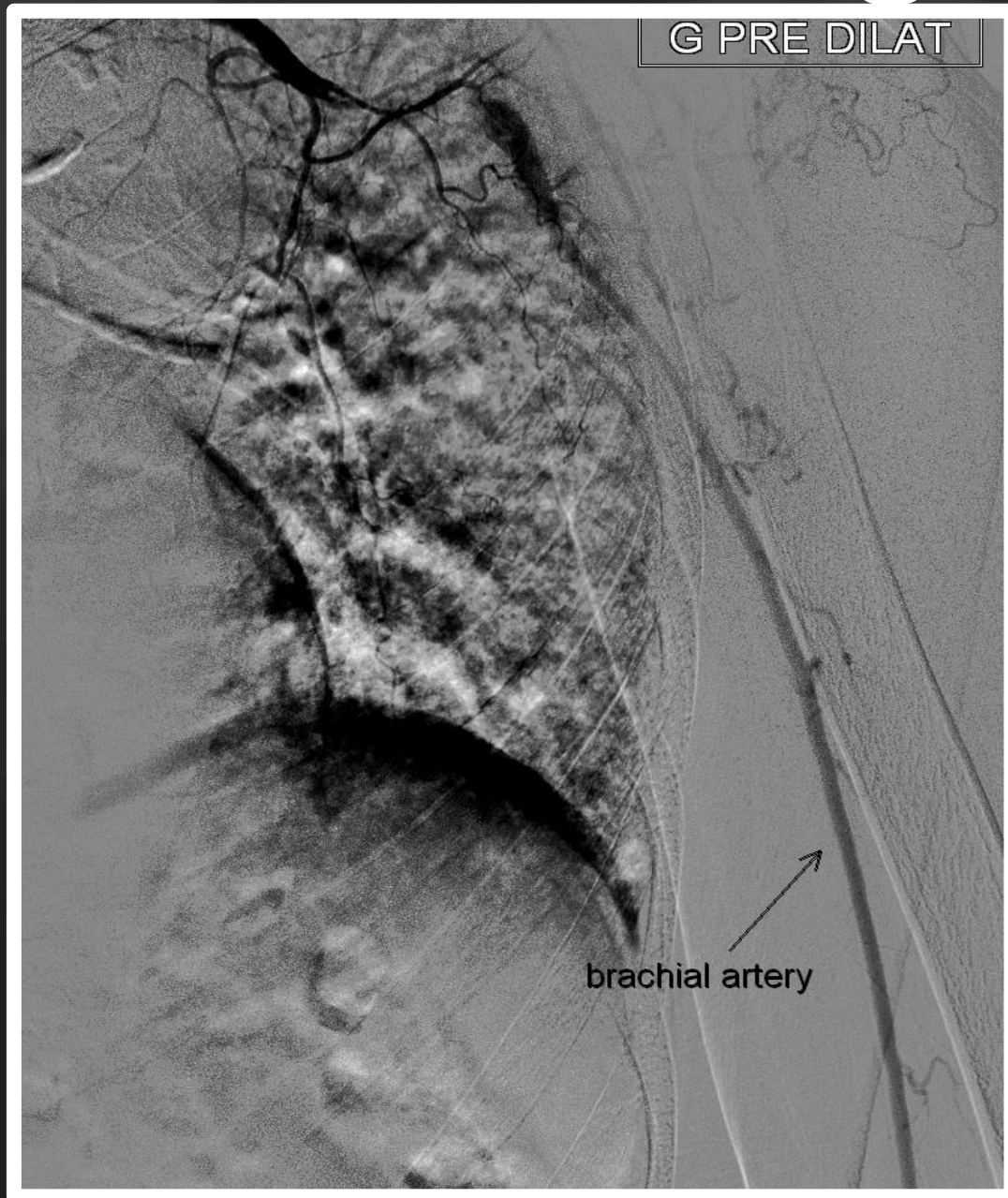
Biological parameters: Hb: 13,5 gr/dl , Cr cl :76ml/min

- **Medication:** aspirine, simvastatine, perindopril, Sotalol

Angiography



Angiography

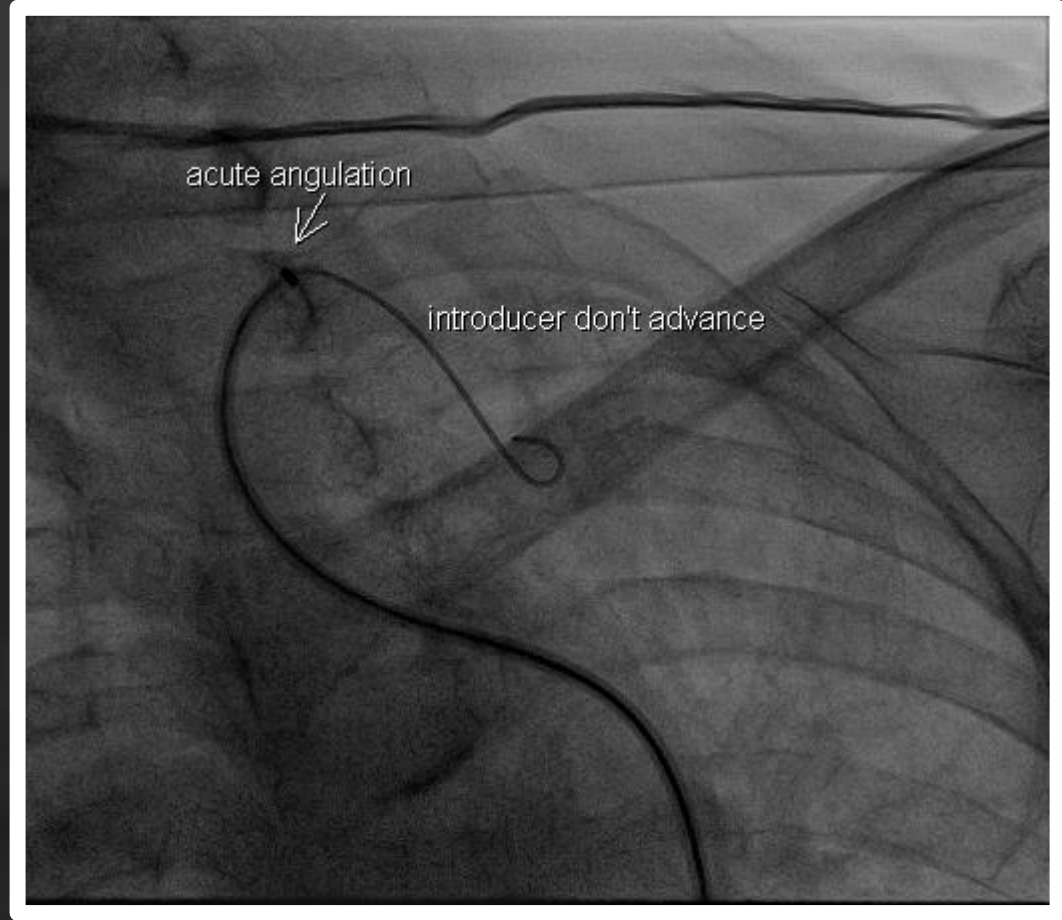


Planned Strategy

- 1. Femoral 6F Access**
- 2. DCB angioplasty**
- 3. Provisional stenting**

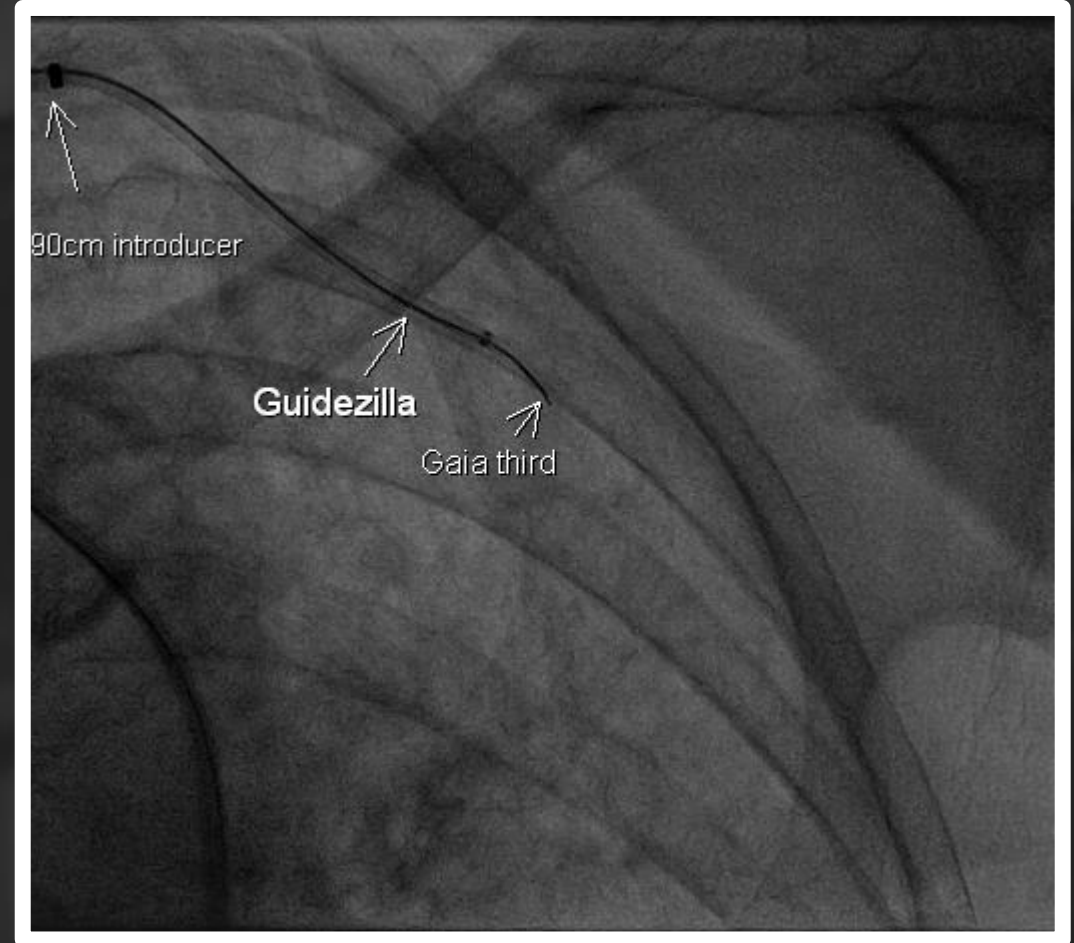
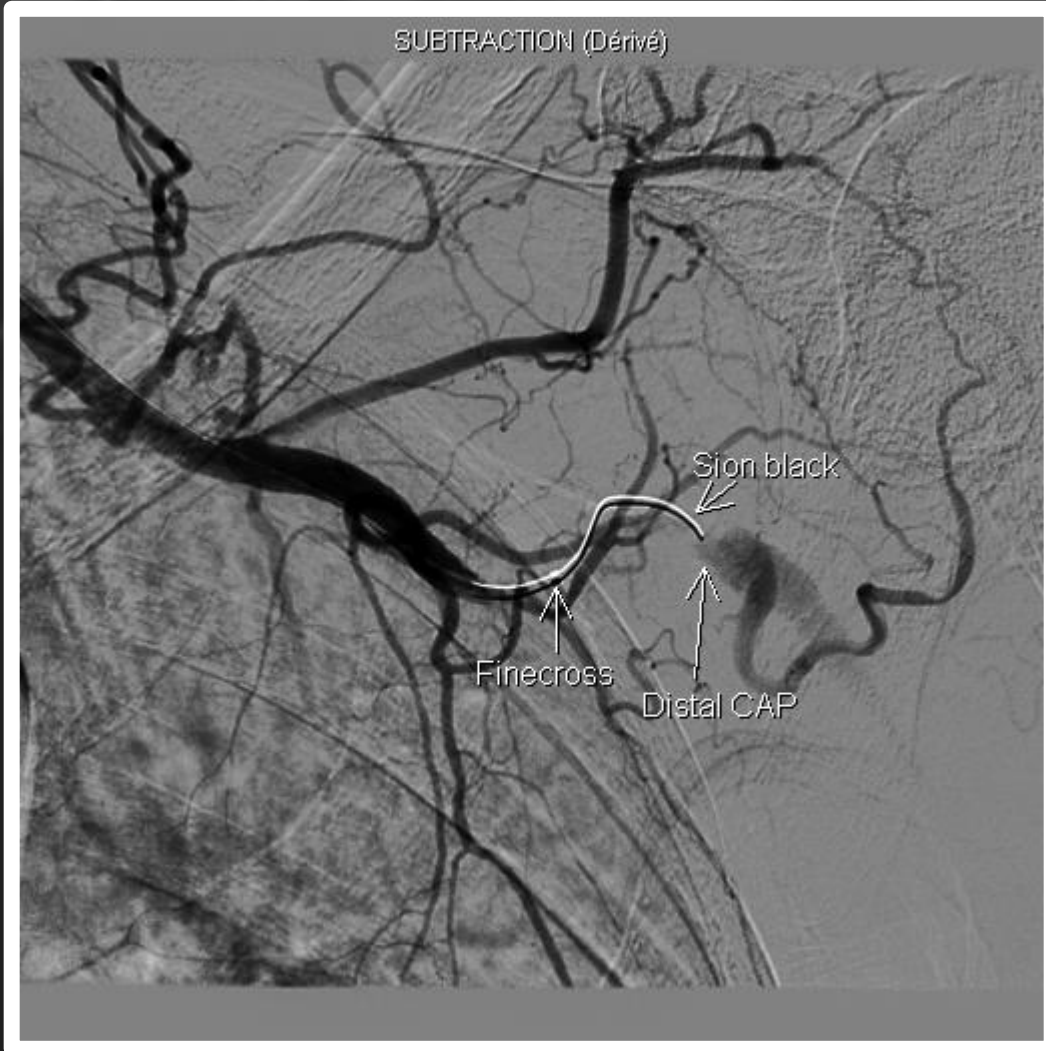
Procedure

SUBTRACTION (Dérivé)



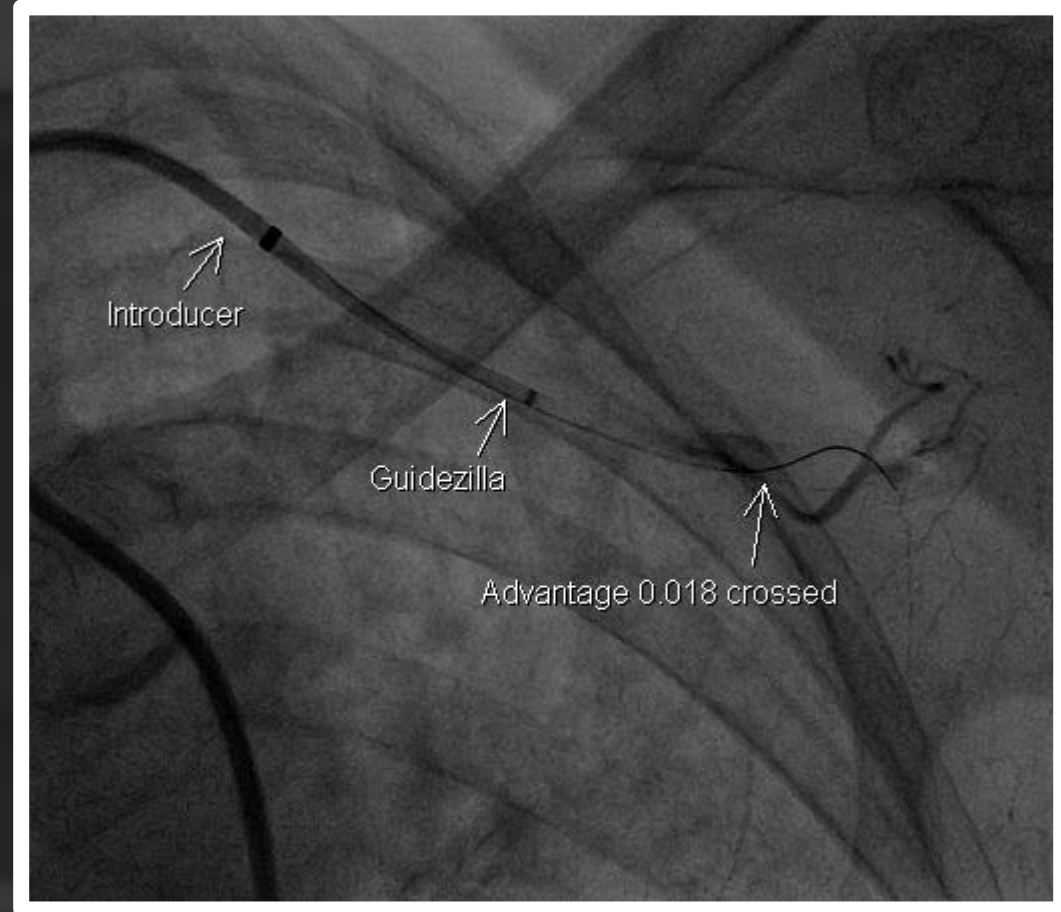
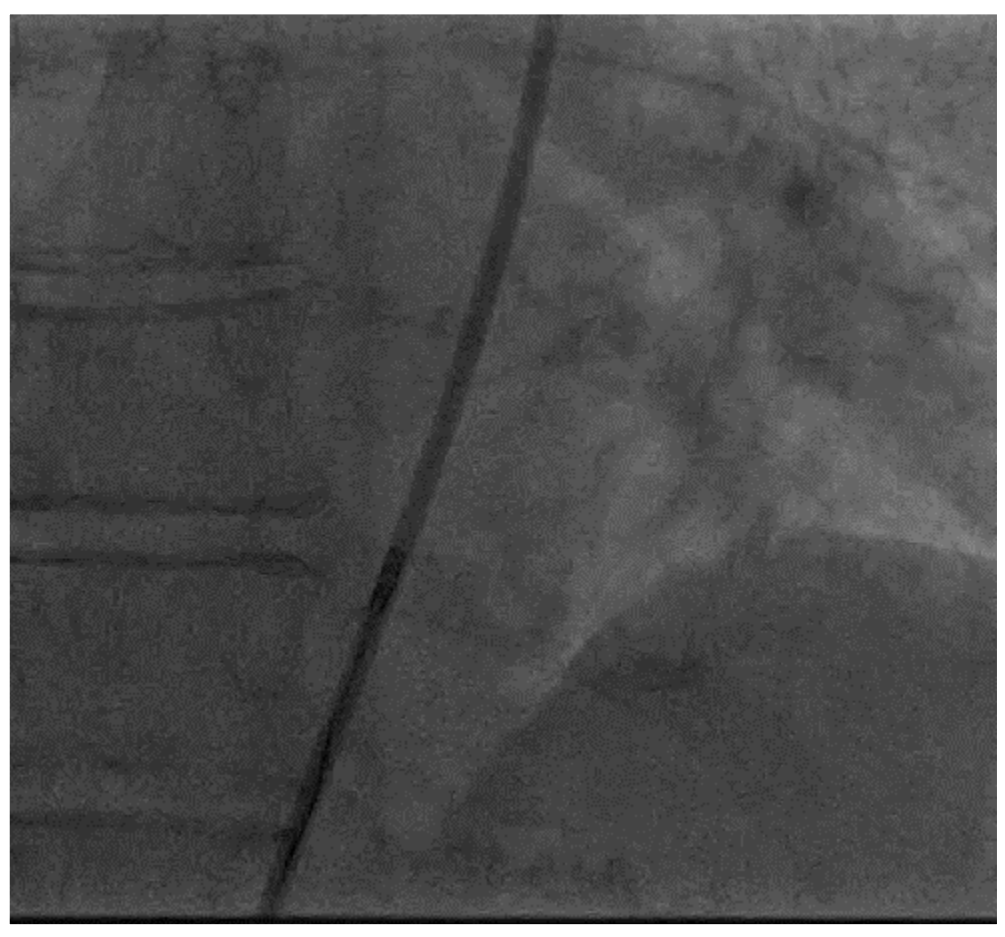
Procedure

Uncrossable lesion with 0.014 " Sion black and Gaia third



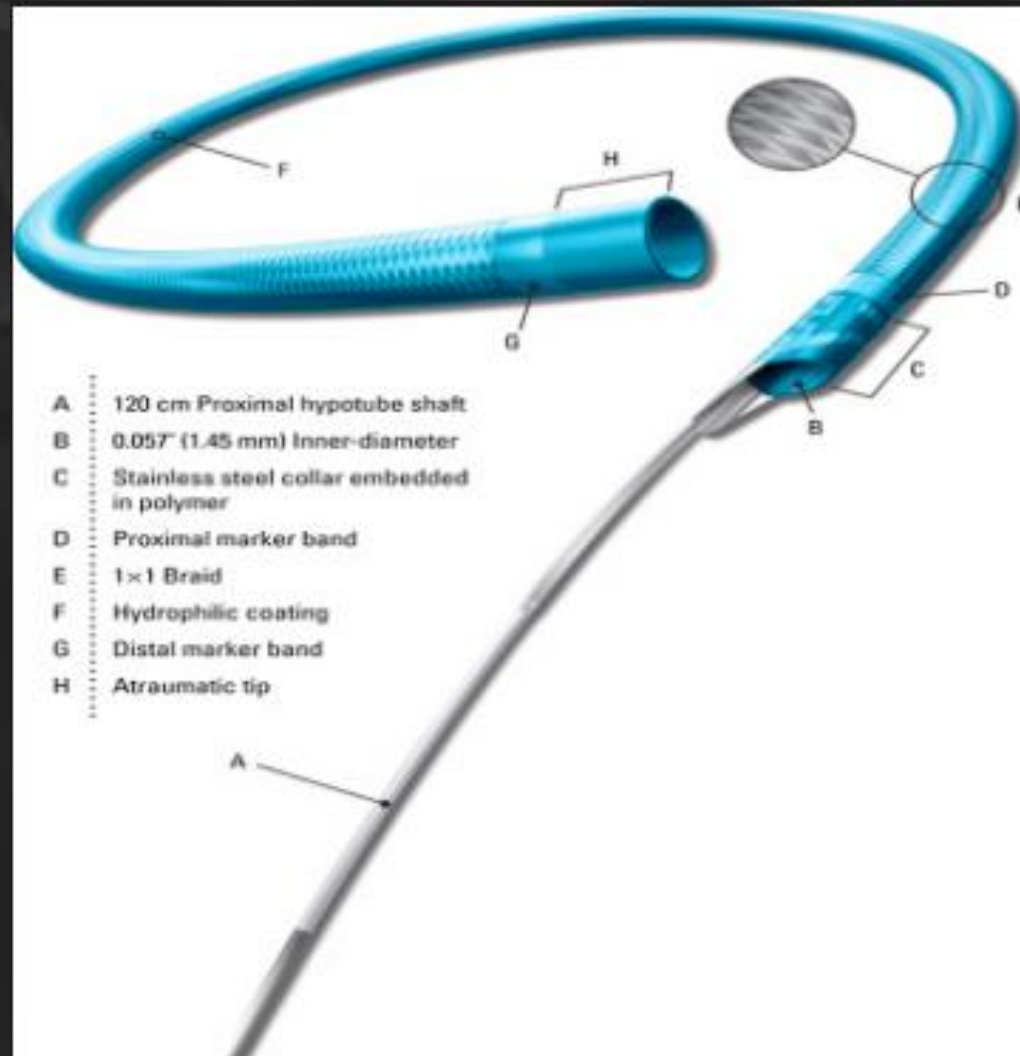
Procedure

Crossed with 0.018" Advantage guidewire



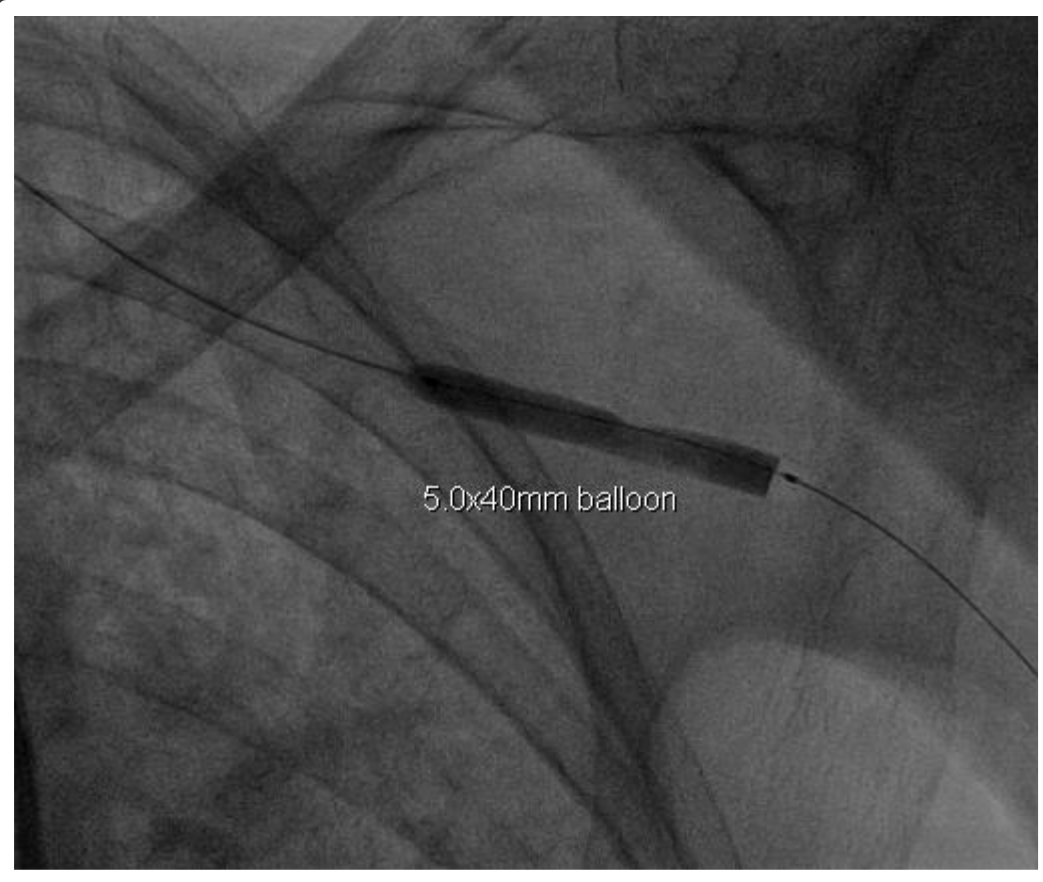
Procedure

Guiding catheter extension (Guidezilla)

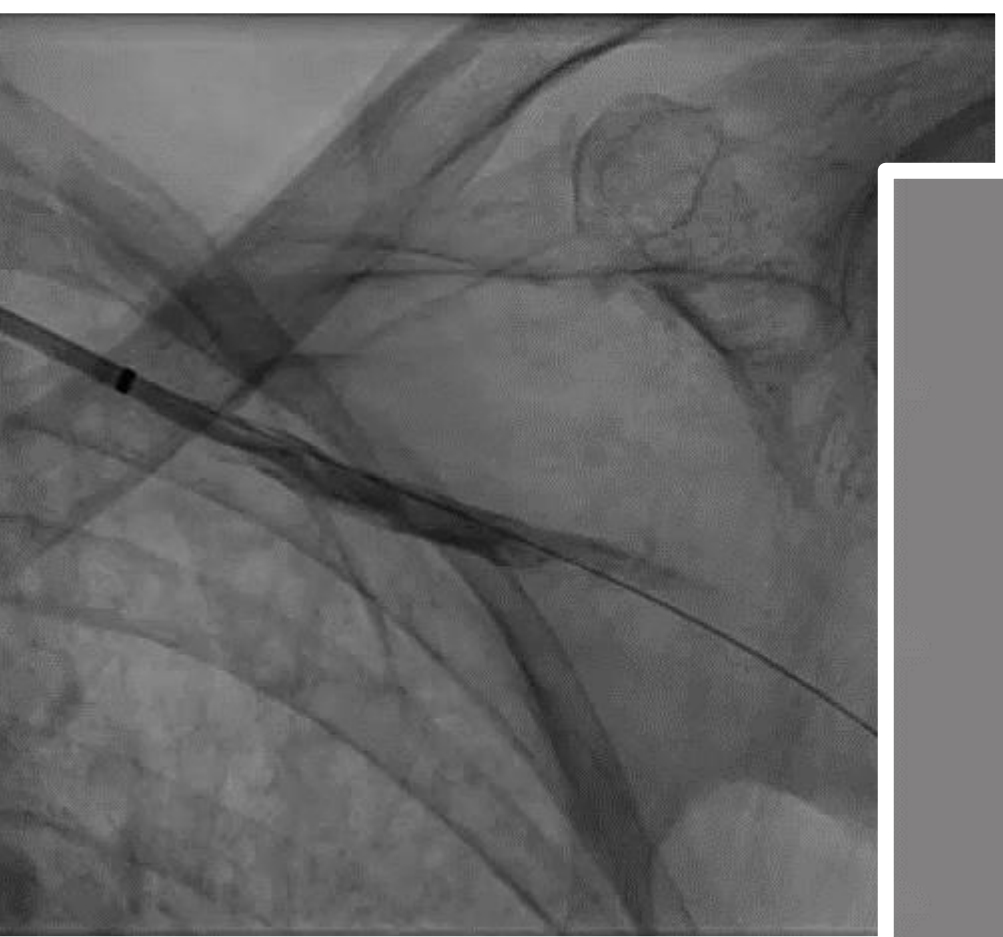


Procedure

DRUG COATED BALLOON IN-PACT Admiral 6x60mm

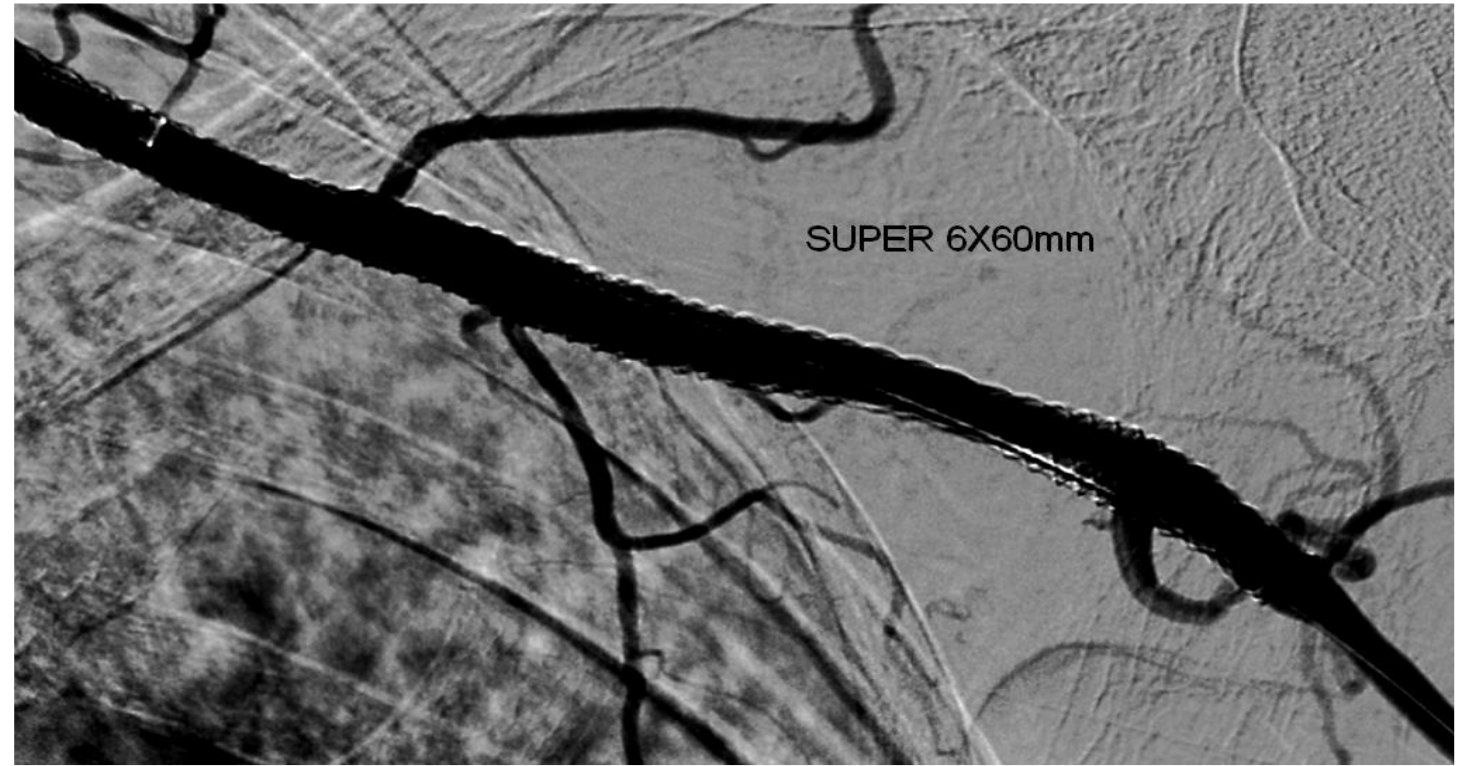


Control : dissection

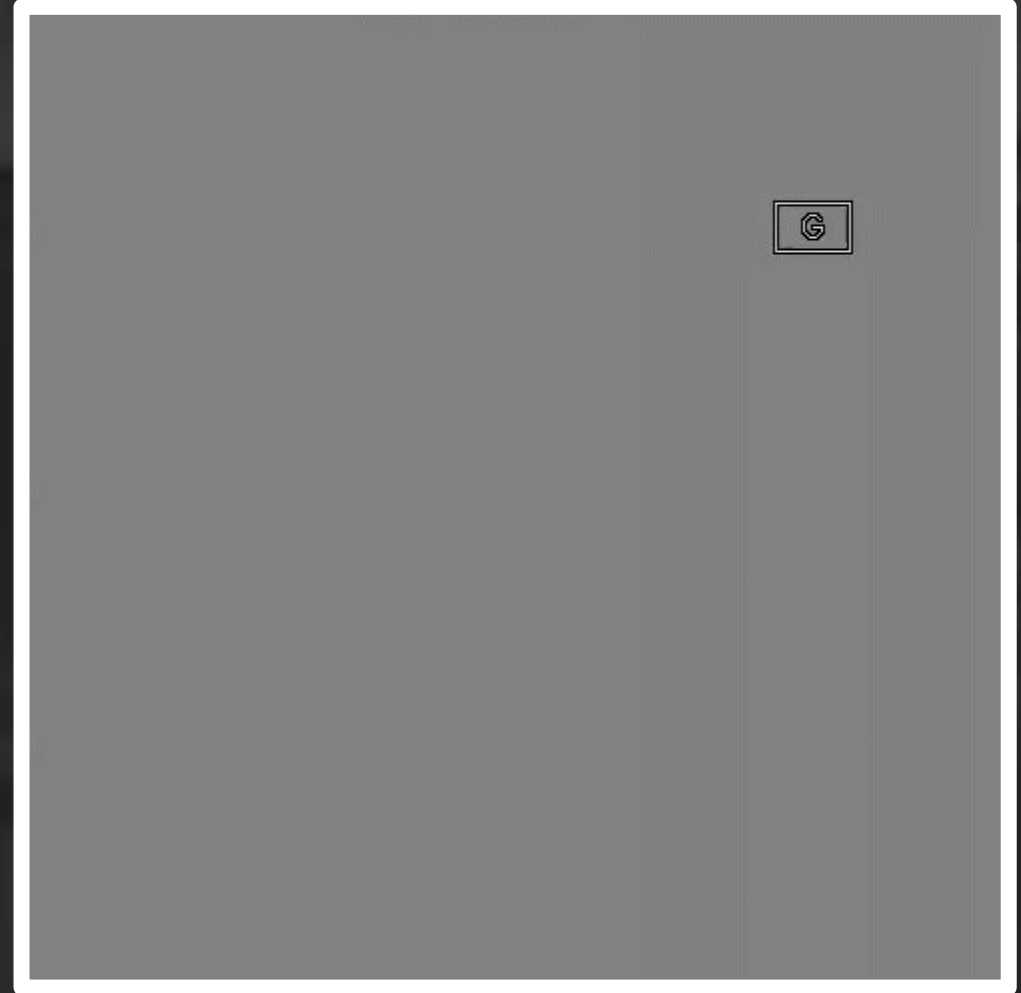
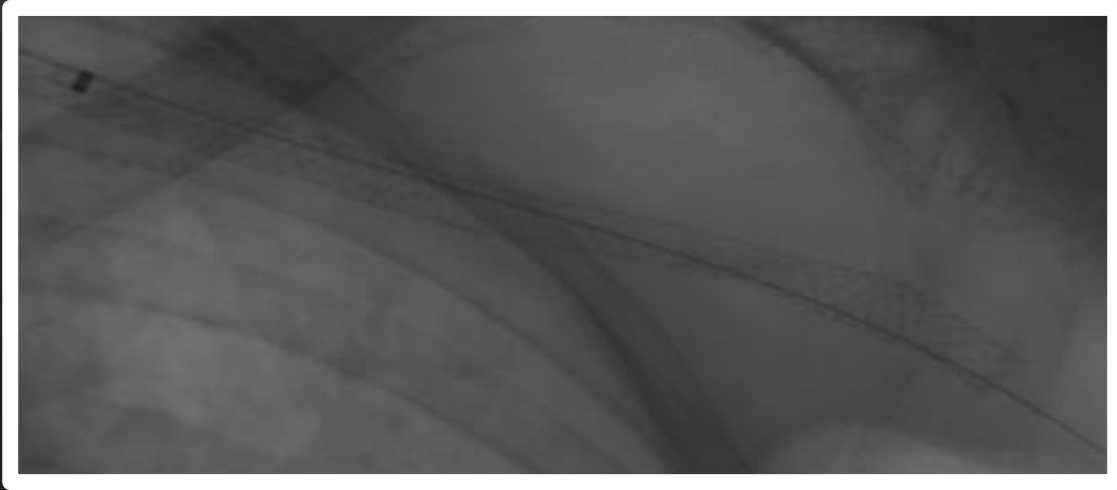


SUPERA 6X60mm implantation

G POST DILAT



Distal Forearm flow



3 Months Follow-up

- **Asymptomatic.**
- **DUS : patent axillary artery.**

Case 2

SUPERA in bilateral External ilac and CFA

B.G 78 y.o male

Cardiovascular risk factors: HBP, dyslipidemia

Past medical History : **CAD:** Right coronary artery CTO

Atrial fibrillation : OAC

2005: Bilateral carotid arteries stenting

1995: Left Subclavian artery Stenting

Femoro-Femoral Bypass

Bilateral CFA endarterectomy.

Aorto bi-iliac Graft

Current Symptoms:

- Bilateral intermittent claudication

Biological parameters: Hb: 12 gr/dl , Cr cl :60ml/min


Medication: aspirine, simvastatine, ramipril, bisoprolol, Rivaroxaban

Angiography




RICA stent
13 years patency

This is a grayscale angiogram showing a Right Internal Carotid Artery (RICA) stent. The vessel is dark and well-defined, indicating good patency. The stent is visible as a series of small, dark, overlapping rings along the length of the vessel. The background shows some faint, branching vessels.



LICA stent
13 years result

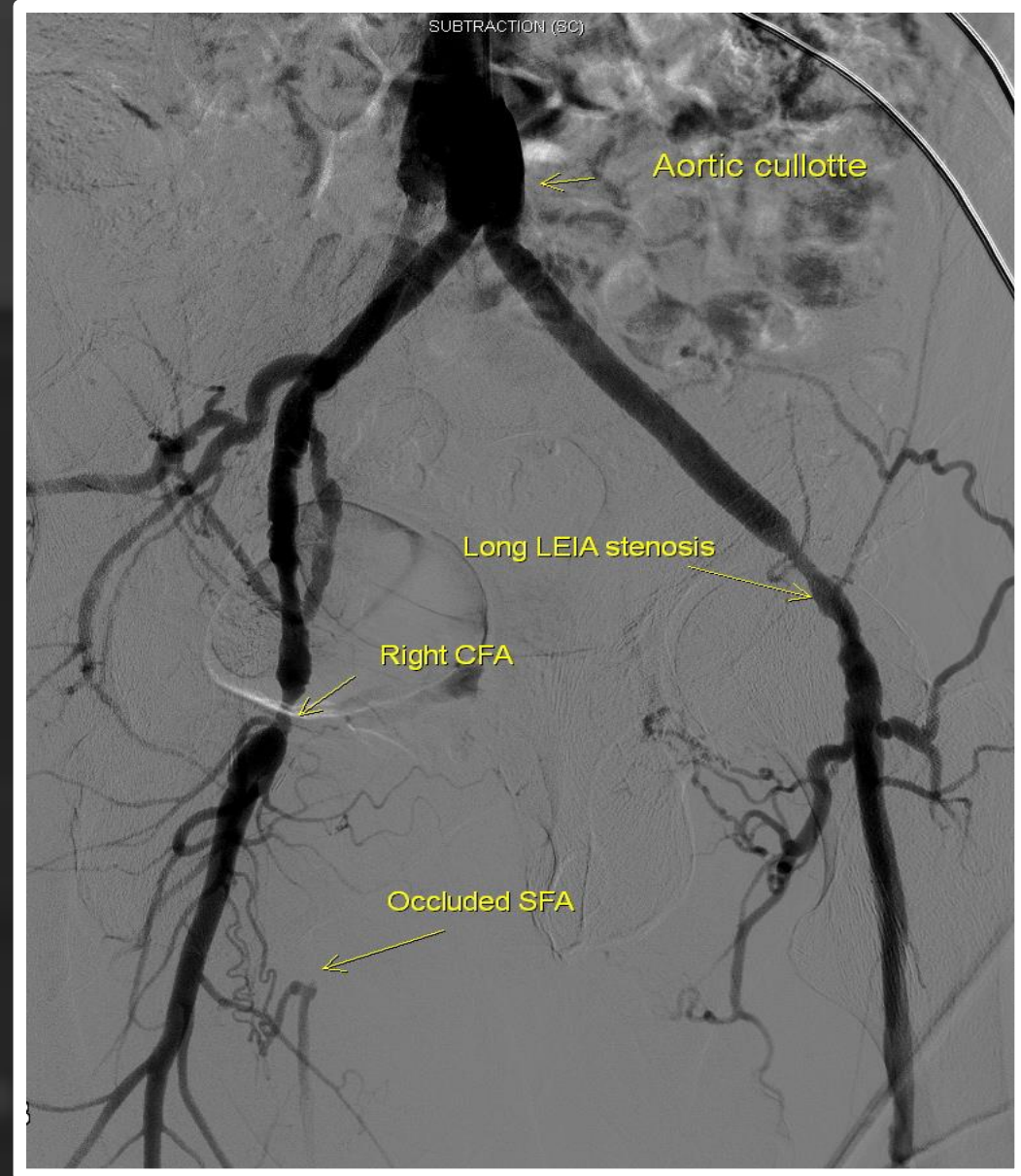
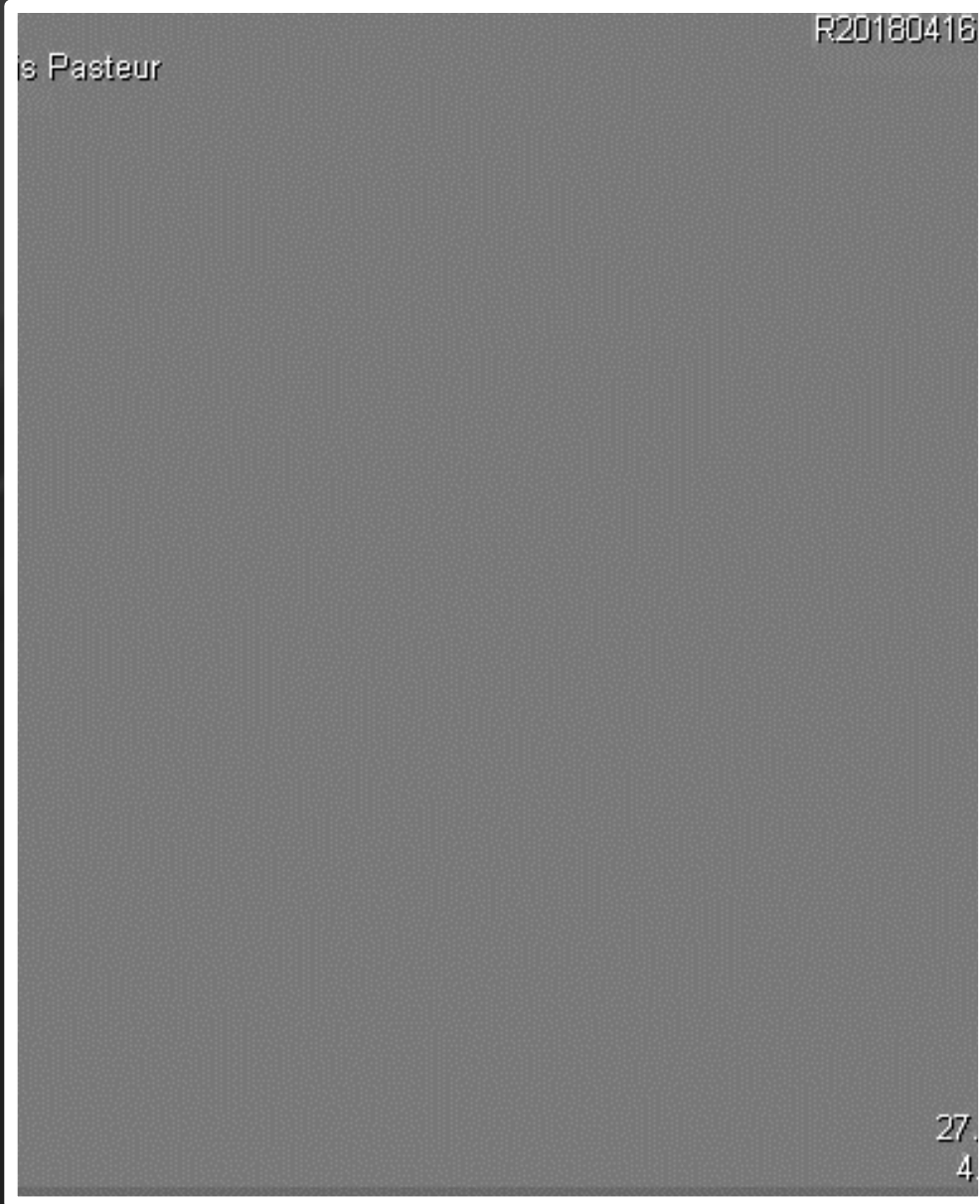
This is a grayscale angiogram showing a Left Internal Carotid Artery (LICA) stent. The vessel is dark and well-defined, indicating good patency. The stent is visible as a series of small, dark, overlapping rings along the length of the vessel. The background shows some faint, branching vessels.



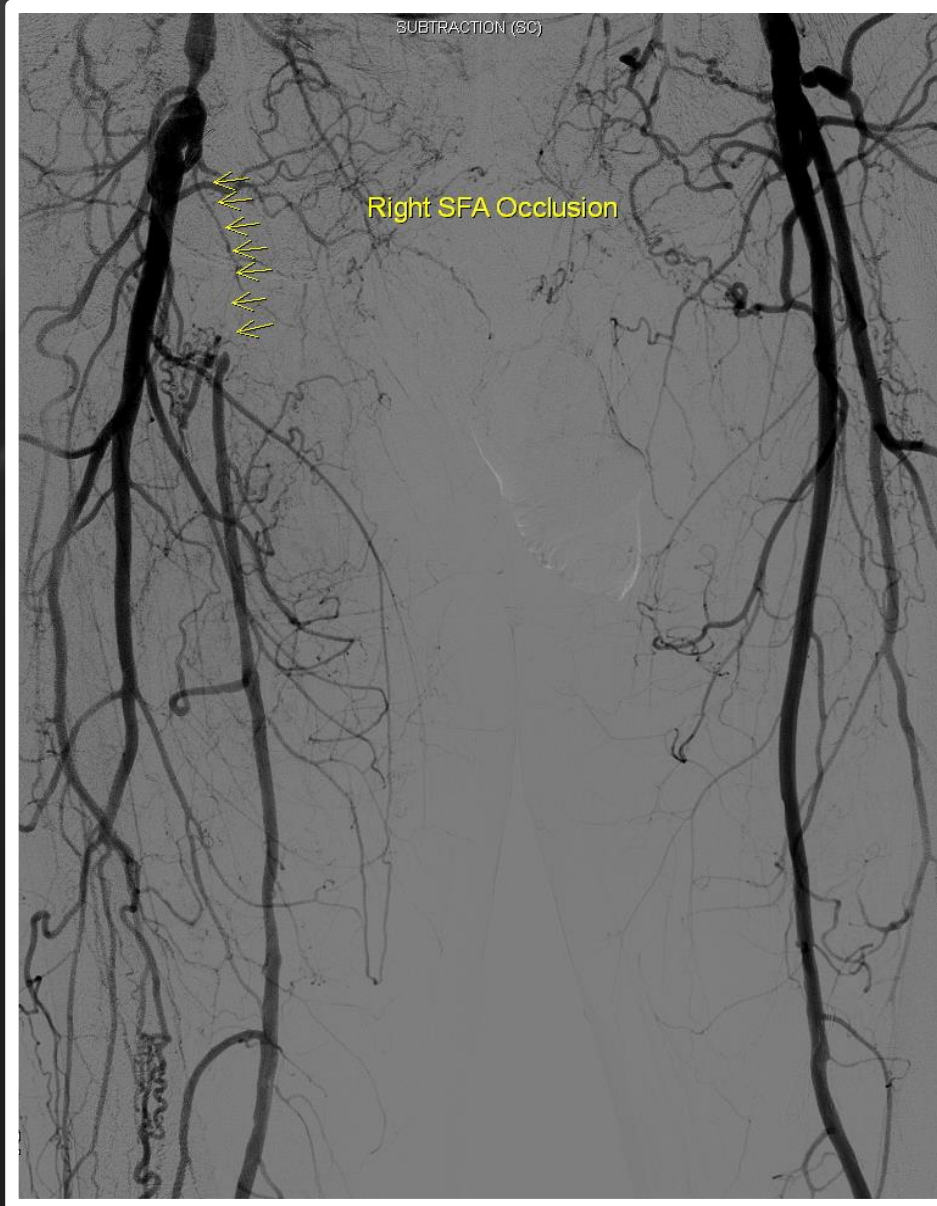
Left subclavian Stent
23 years patency

This is a grayscale angiogram showing a Left subclavian Stent. The vessel is dark and well-defined, indicating good patency. The stent is visible as a series of small, dark, overlapping rings along the length of the vessel. The background shows some faint, branching vessels.

Angiography



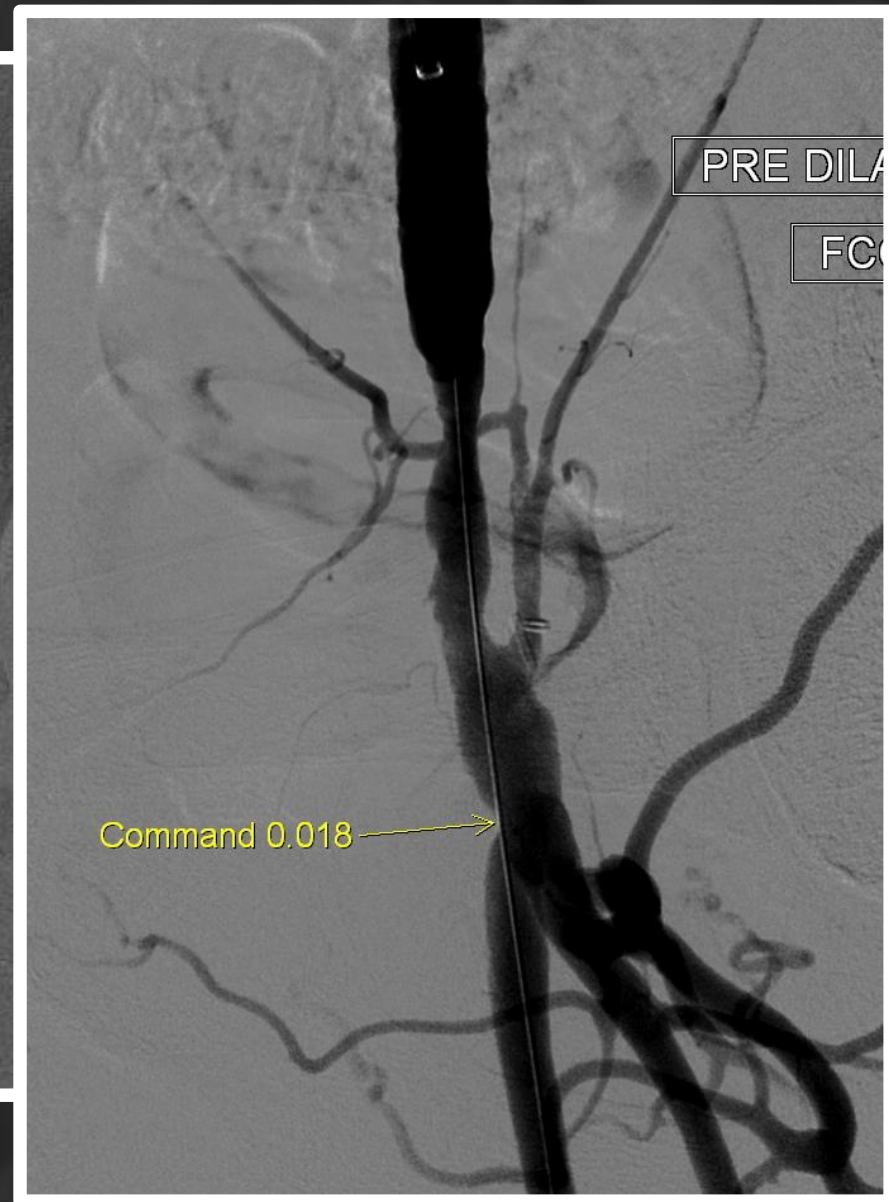
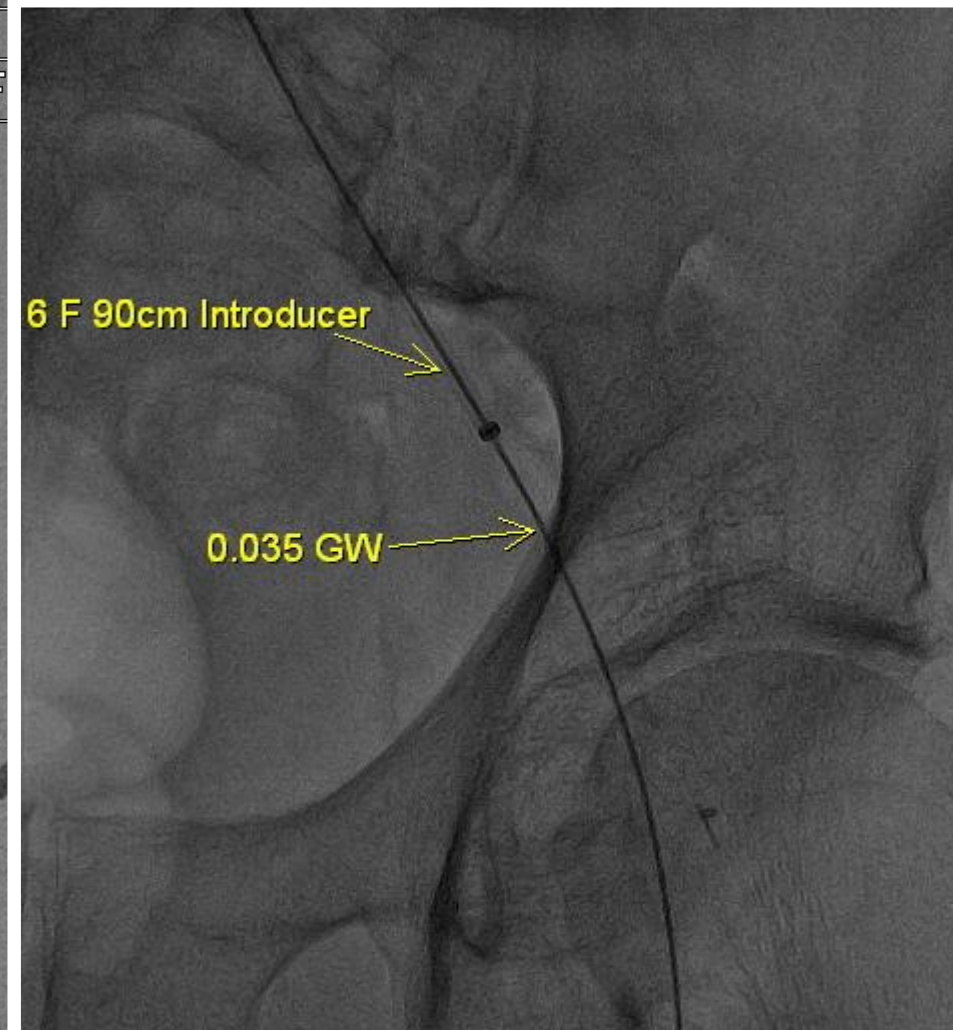
Angiography



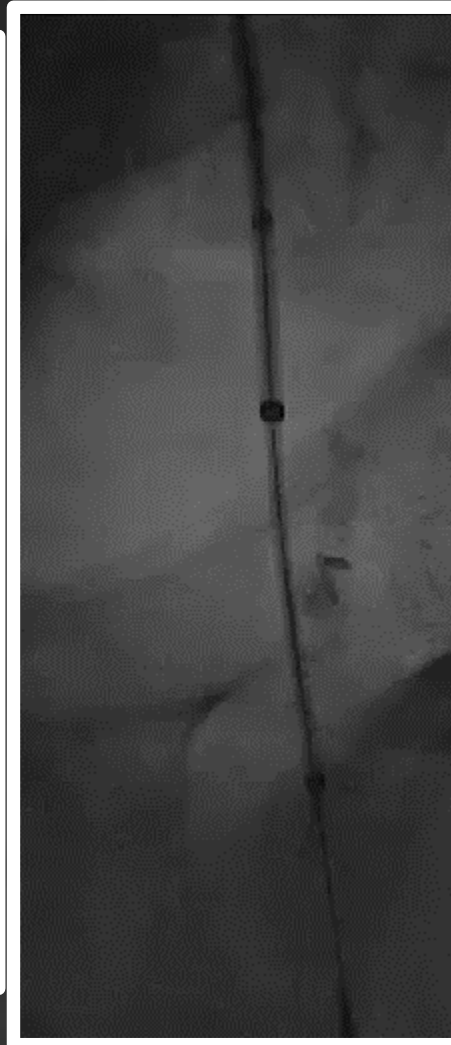
Planned Strategy

- 1. Brachial 6F Access**
- 2. Bilateral Angioplasty and stenting**

Procedure: Left

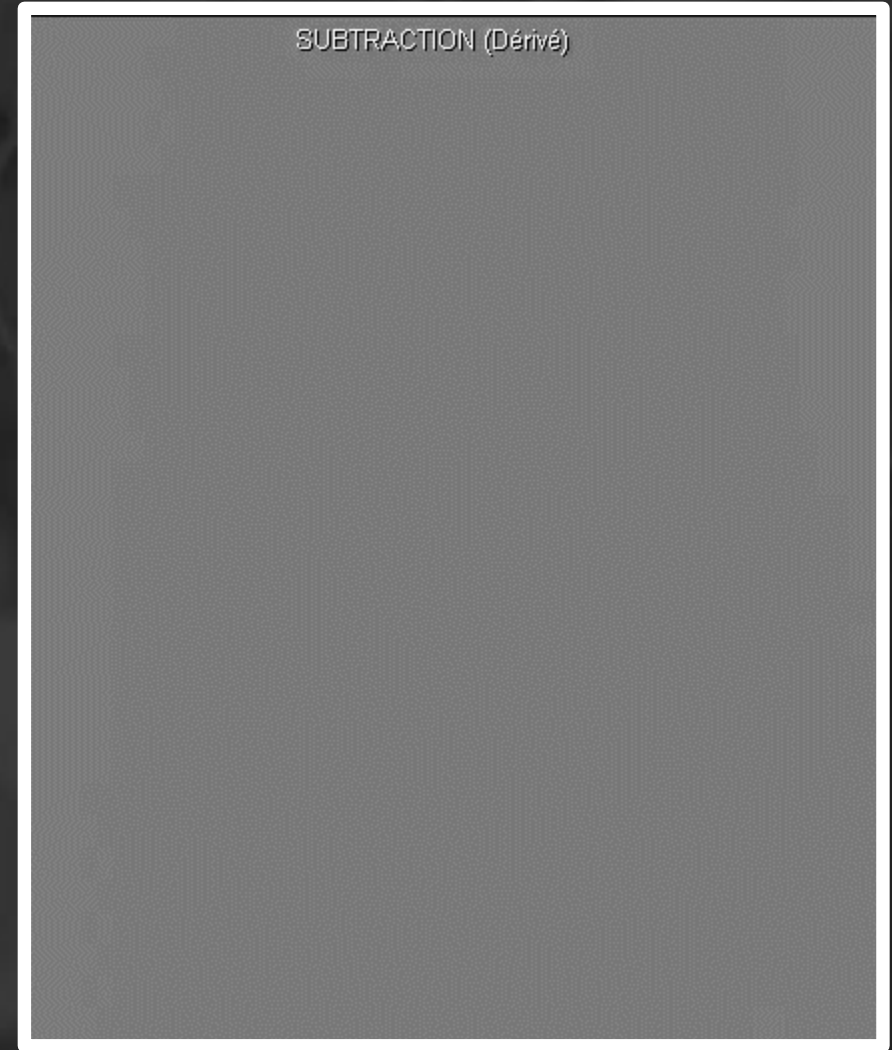
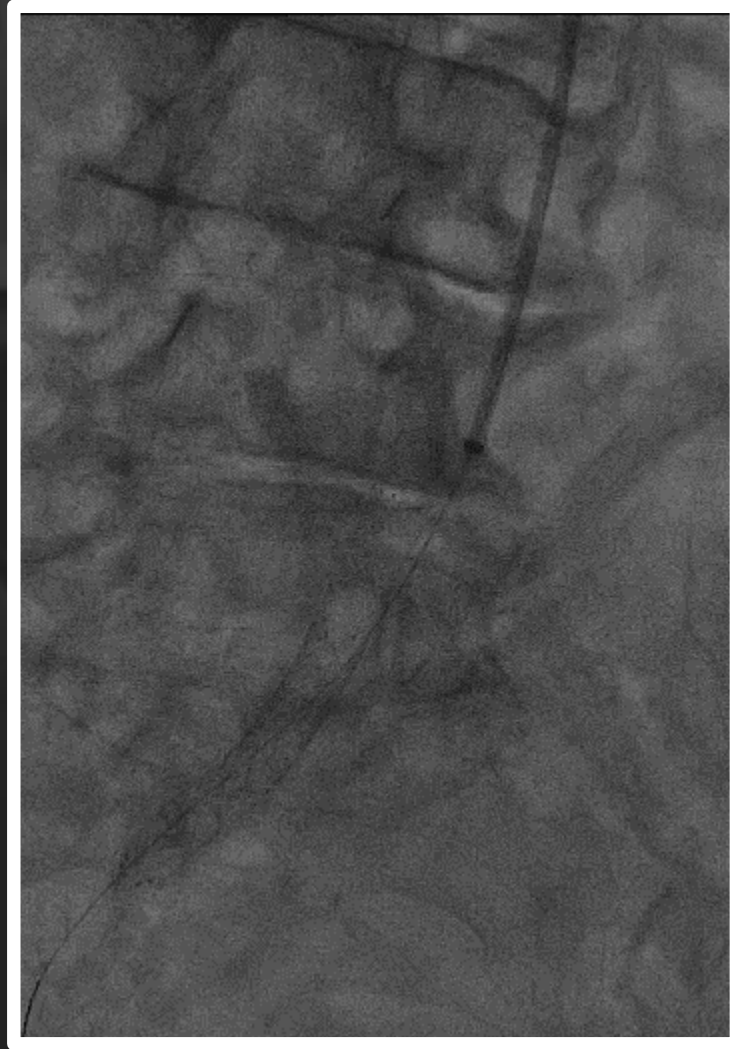


Procedure: Left Side



Final result

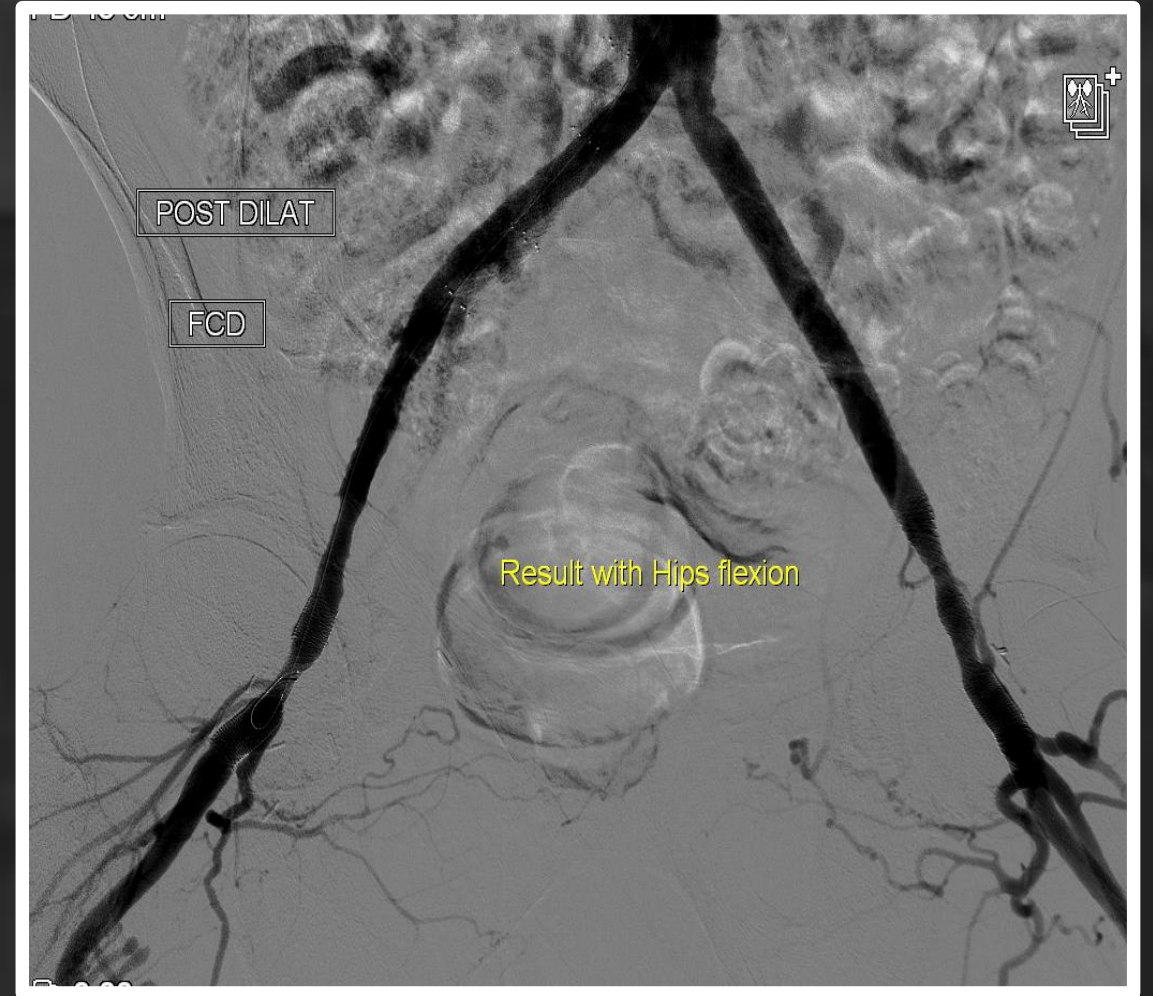
Procedure Right Side



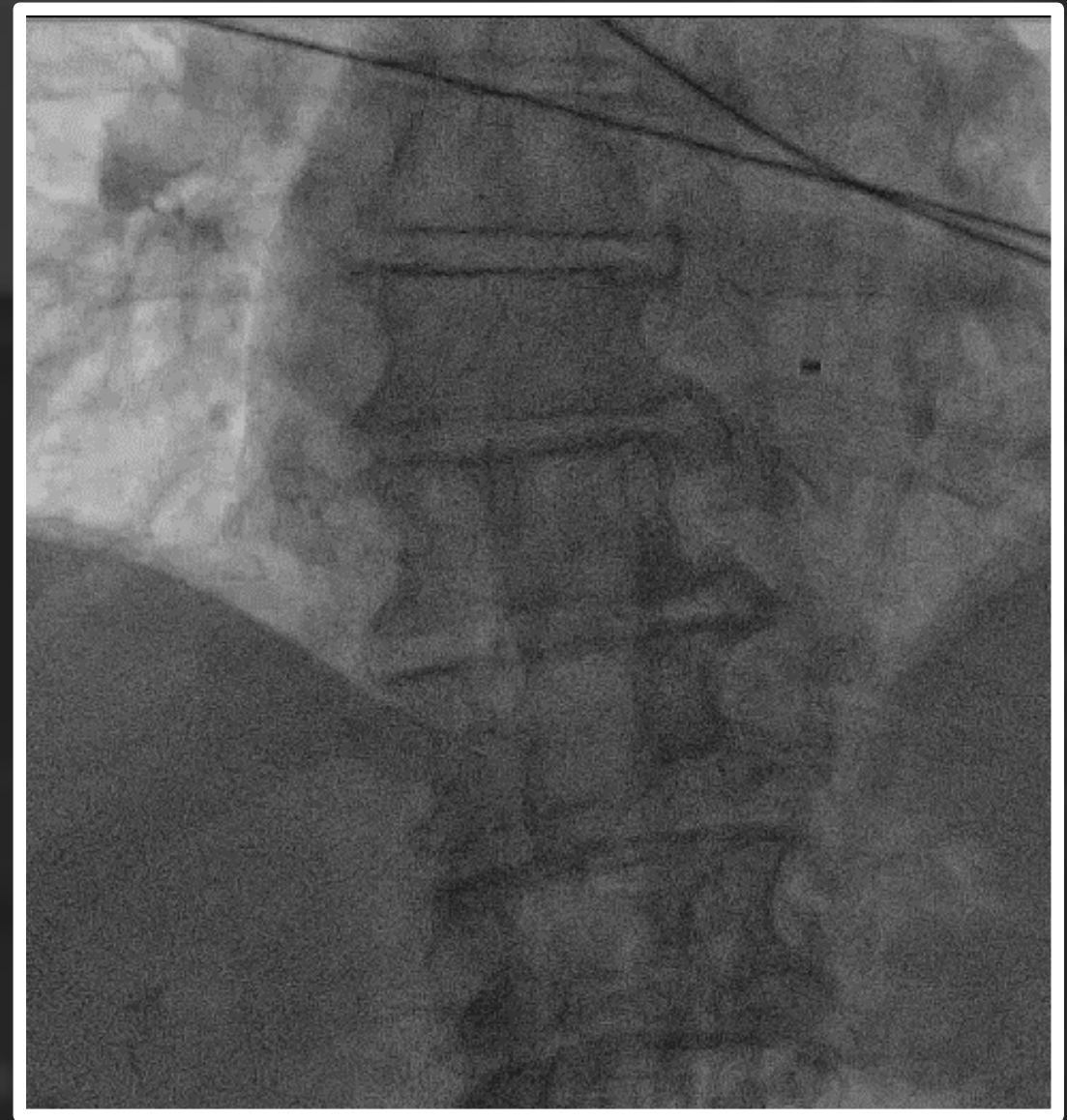
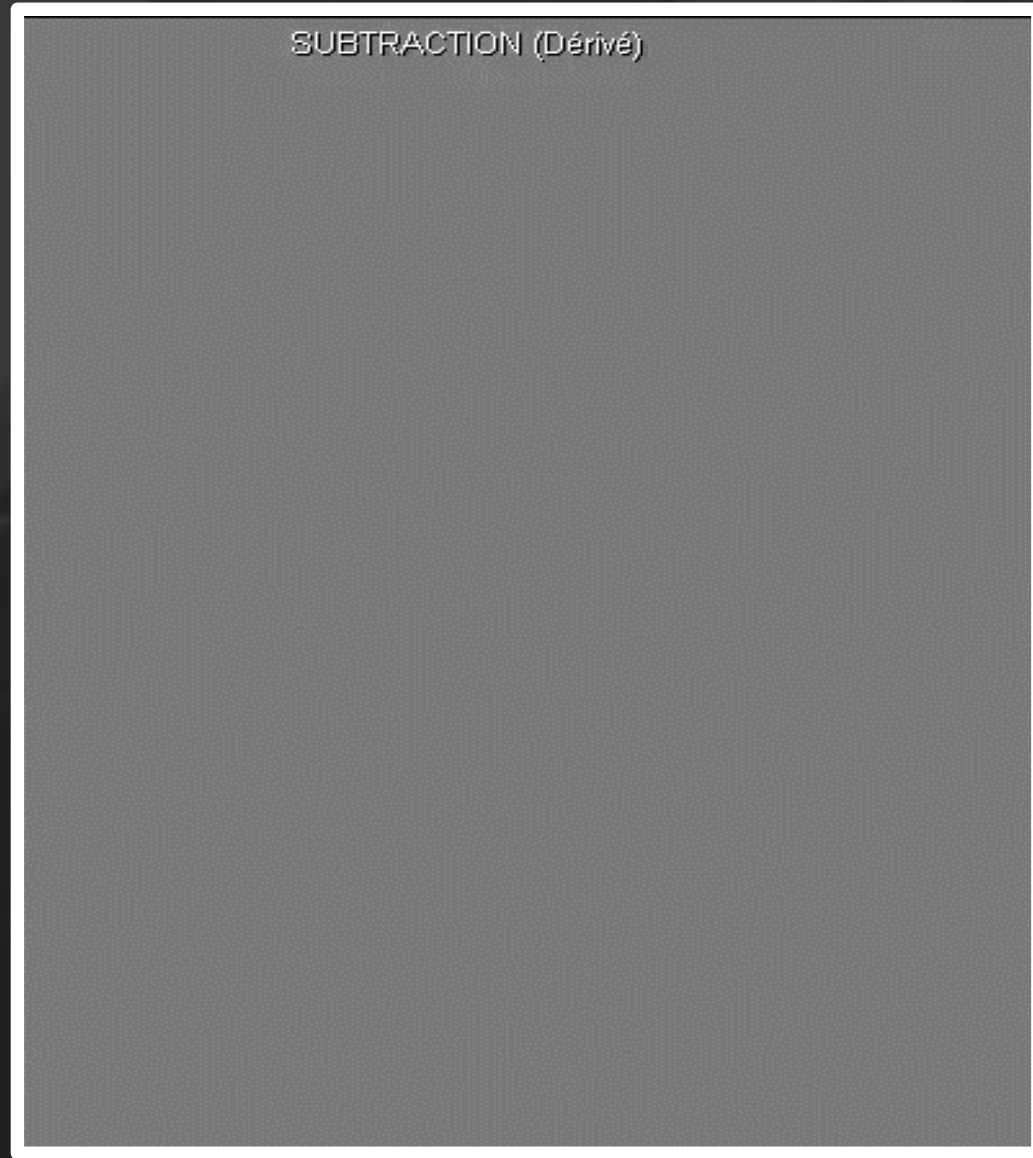
Procedure Right



Final result: Both Hips Flexed



Final result



Messages:

- **SUPERA Stent is a valuable option for extra-femoral bailout Stenting particularly in joint locations arteries : Hips, Knees, Shoulders.**
- **It can be used safely in these locations**
- **It requires improvements :**
 - **Longer Shaft Devices > 120cm**
 - **Larger diameter up to 8mm**



Thank you