

Scientific Papers

CODE: SSK02-07**SESSION: ISP: Vascular/Interventional (Venous Intervention)
Feasibility of the Early and Late Retrieval of the ALN Vena Cava
Filter: A Multicentric Study****PARTICIPANTS****Presenter**Fabrice Barral MD**Abstract Co-
Author**Olivier PellerinMarc Sapoval MD,
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Paul Beregi MD**DATE:** Wednesday, November 29 2006**START TIME:** 11:30 AM**END TIME:** 11:40 AM**LOCATION:** E253CD**DISCLOSURES**

F.B. - Nothing to disclose.

O.P. - Nothing to disclose.

M.S. - Nothing to disclose.

P.M. - Nothing to disclose.

J.B. - Nothing to disclose.

PURPOSE

To evaluate the feasibility of early and late retrieval of the ALN vena cava retrievable filter.

METHOD AND MATERIALS

Between December 1999 and February 2006, 130 consecutive patients were referred for percutaneous extraction of ALN filter in three centers. ALN filter is an optional filter that can be implanted through a femoral, brachial and jugular vein approach and extracted by jugular vein. Extraction was attempted after an implantation period ranging between 6 days to 25 months. Filter extraction was attempted through the right internal jugular vein approach, using the dedicated extraction kit after control inferior vena cavography.

RESULTS

Successful extraction was achieved in all but one case. Among these successful retrievals, additional manipulation using a femoral approach was needed when the apex of the filter was observed according to the post implantation cavography. No technical or clinical differences between early and late filter retrieval were noticed.

CONCLUSION

These preliminary results confirm the safety of the ALN filter retrieval, with no apparent limitation along time. In selected and infrequent cases, additional endovenous manipulation are needed to achieve extraction.

CLINICAL RELEVANCE/APPLICATION

The recent development of optional(retrievable) filters have strongly modified the indications of caval filtration.

QUESTIONS ABOUT THIS EVENT EMAIL:

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