

静脈学

THE JAPANESE JOURNAL OF PHLEBOLOGY

第31回日本静脈学会総会プログラム・論文抄録

2011 **Vol.22** NO.2

日本静脈学会機関誌

日 本 静 脈 学 会

Japanese Society of Phlebology

<http://www.js-phlebology.org>

The Japanese Journal of Phlebology

“The 31st Japanese Society of Phlebology” Program • Abstract

2011

GLO6-4 回収可能型下大静脈フィルター(ALN)の使用経験—長期留置後回収の可能性—

越谷市立病院 循環器科

〒350-0192 越谷市大宮

木村 徹, 市川 良子, 高須 清
松尾 一可, 比企 誠, 中嶋 直久

〒350-0192 越谷市大宮

〒350-0192 越谷市大宮

【目的】当施設では急性肺血栓栓症(APTE)の一次、二次予防には主に一時型下大静脈フィルター(IVCF)を使用してきたが、感染や固定等の問題があった。一方、回収可能型IVCFについてはPREPIC研究における長期留置の合併症や残存血栓の消失に伴い抗凝固療法が再開可能な場合もあることから、極力永久留置を避けるよう努めてきた。昨年我々はALN留置174日後に回収できた症例を経験し、理想的には長期留置後も回収可能なフィルターが望ましいと考えた。そこで当施設の回収可能型IVCFについて肺血栓栓症の有無や再発率、留置期間、回収率、回収透視時間、合併症等について比較検討した。

【対象】1999年より2010年における急性期静脈血栓症に対しIVCFを留置した116例のうち、2006年以降の回収可能型IVCF留置31例、ALN(A群、16例)、OptEase(O群、11例)、Gunter Tulip(G群、4例)。

【結果】男性13例、女性18例、平均年齢61歳。APTE合併は18例、留置後の再発はなく、フィルター自体のMigrationもなかった。A群2例、G群1例にPenetration、O群にTilting、血栓捕捉を各1例ずつ認めた。永久留置目的としての留置はA群1例、O群6例。A群には回収時に残存血栓のために永久留置への移行1例と留置後他疾患による死亡1例を認め、従って回収予定で回収された症例は20例で(A群の2月以降の回収予定2例を除く)、回収不成功例は認めなかった。留置期間(中央値)はA群16日、O群11日、G群14日、A群で長い傾向にあった。回収手技に関しては、回収透視時間(中央値)はA群10.3分、O群11.3分、G群20.6分であった。

【結語】ALNの回収率は高く回収手技も短い傾向がみられた。さらに長期間留置後にも回収できる可能性がある。今後、回収可能型IVCFの留置期間延長について議論を重ねていくべきである。

Experience Study with IVCF Optional type (ALN)

- Possibility of extraction after long-term implantation -

Koshigaya Municipal Hospital

Director: Prof. Toru Kimura

【Purpose】 We have been using IVC temporary filter type (IVCF) mainly for acute pulmonary thromboembolism (APTE) of primary and secondary prevention in our institution, but there were problems such as infection or fixed condition matter. On the other hand, we had been trying to avoid permanent implantation as much as possible because to avoid complication which induced by long-term implantation or in a case to resume anticoagulation therapy by residual blood clots disappearance, that was also reported from PREPIC Study. We have experienced successful extraction case after 174 days implantation of ALN filter last year, so ideally we think the best filter is to be able to extract even if long-term implantation period. As a result, we examined comparison study about our using extractable IVCF in our facility for presence and recurrence rate of pulmonary embolism, implantation period, extraction rate, time of extraction fluoroscope usage, complications.

【Subject】 Out of 116 cases which patients were implanted IVCF because of acute phase of venous thrombosis from 1999 to 2010, total of 31 cases of implanted extractable IVCF after 2006, (ALN (Group A, 16 cases)), (OptEase (Group O, 11 cases)), (Gunther Tulip (Group G, 4 cases)).

【Result】 Male: 13 cases; Female: 18 cases; Mean age: 61 years old. APTE complications were occurred for 18 cases, there was no recurrence after implantation, and there was no filter migration. There were Penetrations for Group A: 2 cases and Group G: 1 case, and there were Tilting and capture of clot for Group O: 1 case. Permanent implantation usage is Group A: 1 case, Group O: 6 cases. Group A, there was 1 case to transfer from temporary use to permanent use because of remaining clots at the time of extraction, and there was 1 mortality case because of another disease after implantation, so planned extraction cases were 20 cases and there was no unsuccessful extraction cases within these cases. (except 2 cases that are planned to extract after February) Term of implantation (median) is Group A: 16 days; Group O: 11 days; Group G: 14 days, and there was a tendency that Group A has longer term. Time of extraction fluoroscope procedure (median) is Group A; 10.3 minutes; Group O; 11.3 minutes; Group G; 20.6 minutes.

【Conclusion】 We observed that ALN filter has high extraction rate and shorter extraction procedure.

In addition, there is a possibility to extract after long term implantation. We should have further discussion about longer extraction period after implantation for extractable IVCF.