CASE REPORT

POUNCE™ Venous Thrombectomy

Complete removal of acute-on-chronic iliofemoral thrombus with two passes of the Pounce™ Venous Thrombectomy System

Stephen A. Black, MD, FRCS(Ed), FEBVS
Vascular Surgeon
St Thomas' Hospital,
London, UK

PATIENT PRESENTATION

A female patient in her mid-50s presented with a severely swollen left leg (Figure 1). Ten days prior to presentation, the patient had experienced a major bleeding event in connection with a prior surgery. Baseline Villalta scoring was 7, indicating mild post-thrombotic syndrome (PTS).

DIAGNOSTIC FINDINGS

Venous access was established via the popliteal vein in the ipsilateral leg under ultrasound guidance and a 10 Fr introducer sheath was inserted. Venography revealed iliofemoral thrombus completely occluding blood flow (Figure 2). Iliac vein compression (May-Thurner syndrome) was noted.

Figure 1. Swollen left leg prior to treatment.

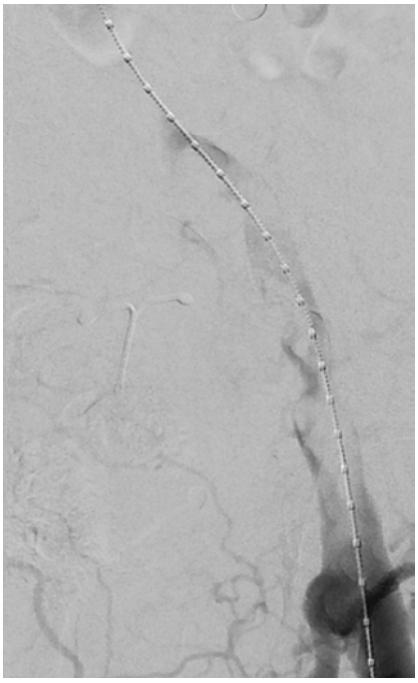

Figure 2. Pre-thrombectomy venogram showing occlusive iliofemoral thrombus.

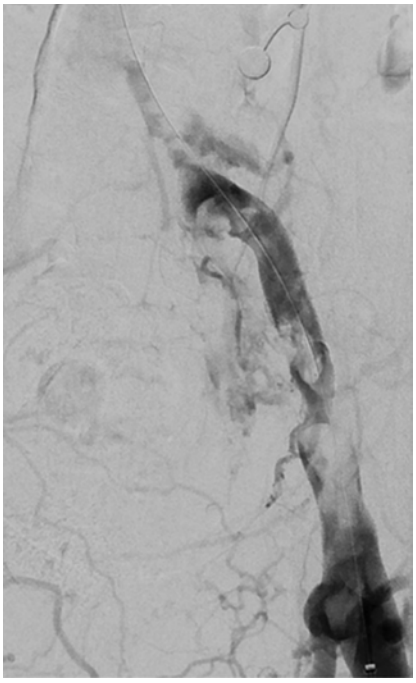

Figure 3. Primary flow restored to treatment region following initial Pounce™ Venous System pass.

TREATMENT

Use of thrombolytics was ruled out due to prior bleeding. An 0.018" guidewire was inserted through the introducer and advanced past the treatment site. The Pounce™ Venous Thrombectomy System was then advanced over the wire until the device was positioned at the cranial limit of the treatment zone. The Pounce Venous System basket was deployed and the powered extraction mechanism was activated. The basket was retracted caudally along the vein, restoring primary blood flow to the treatment area (Figure 3).

SURMODICS

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Figure 4. Post-procedure venography (with stenting) showing rapid in-line flow restoration.

Core-lab adjudicated complete thrombus removal* was obtained with 2 device passes. The treatment area was then stented, resulting in restoration of rapid in-line flow (Figure 4).

POST-PROCEDURE OUTCOME

In patient follow-ups to 12 months, there were baseline-to-12-month improvements in VEINES QOL† (76–102) and VCSS‡ (8–4). The patient's 12-month Villalta scoring was 2, indicating no or minimal PTS.

PHYSICIAN OBSERVATIONS

In a patient contraindicated to thrombolysis, use of the Pounce™ Venous System resulted in complete removal of acute-on-chronic iliofemoral thrombus.

* Society of Interventional Radiology (SIR) grade III lysis (>95% thrombus removal)

† Venous Insufficiency Epidemiological and Economic Study-Quality of Life questionnaire

‡ Venous Clinical Severity Score

To schedule a product demonstration, call **888-626-8501** or visit **pouncevenous.com.**

Dr. Black is a consultant for Surmodics

Caution: Federal (US) law restricts this device to sale by or on the order of a physician. Please refer to Instructions for Use for indications, contraindications, warnings, and precautions.