

**The 53rd Annual Meeting of
the Japanese Society of Interventional Radiology
PAD Working Group Live demonstration**

2024.5.24 13:00-17:30

Venue: Wakayama- Jo Hall

Room 2 (3F Small Hall)

Live site: Kouseikai Takai Hospital, Tenri, Nara, Japan

- 13:00-13:05 開会挨拶 井上政則
- 13:05-14:30 Live 1: 腸骨動脈 日本語セッション
座長 安藤 弘、井上政則
コメンテーター 川崎竜太、元津倫幸、寒川悦次、千葉義郎
ミニレクチャー: 中井貴大、永富 暁
ライブオペレーター: 高山勝年、明珍 薫、和田 敬
- 14:30-15:00 Live 2: 浅大腿動脈 英語セッション
座長 Je Hwan Won、長谷部光泉
コメンテーター 遠藤雅之、小川普久、宮本直和、Stefan Müller-Hülsbeck
ミニレクチャー: Je Hwan Won、Stefan Müller-Hülsbeck
ライブオペレーター: 佐藤友保、高山勝年
- 15:00-17:25 Live 3: 膝下動脈 日本語セッション
座長 大木隆生、阪口昇二
コメンテーター 市橋成夫、岩越真一、神山拓郎、遠田 穰
ミニレクチャー: 金森大悟、本郷哲央
ライブオペレーター: 高山勝年、明珍 薫、和田 敬
- 17:25-17:30 閉会挨拶 山口雅人

Opening remarks: 13:00-13:05

Masanori Inoue

Live 1: 13:05-14:30 Japanese session

Moderator: Hiroshi Ando, Masanori Inoue

Commeator: Ryota Kawasaki, Tomoyuki Gentsu,
Etsuji Sohgwawa, Yoshiro Chiba

Mini lecture: Takahiro Nakai, Satoru Nagatomi

Live operator: Katsutoshi Takayama, Kaoru Myouchin

Live from Kouseikai Takai Hospital, Tenri, Nara, Japan

Case 1: female, 76 years

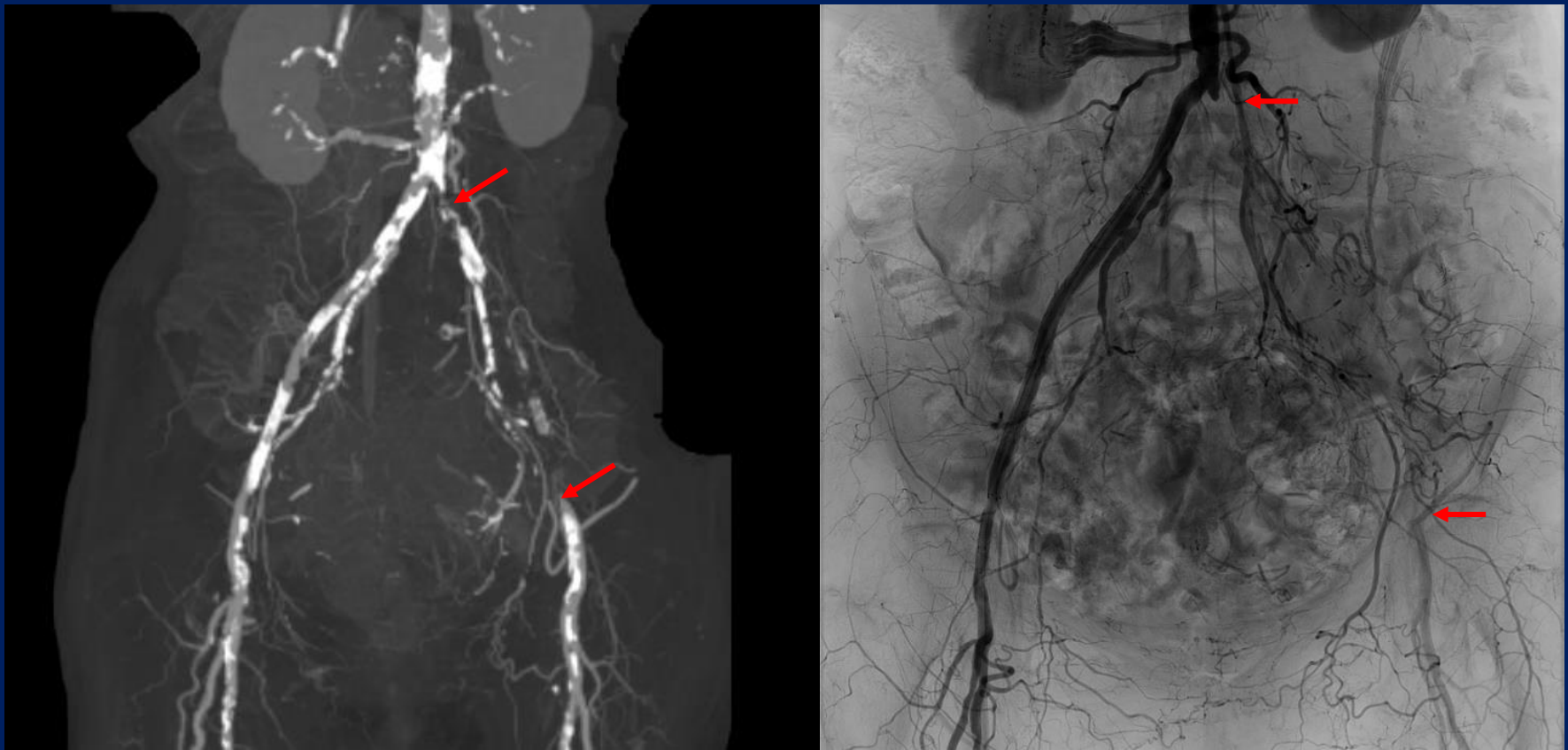
CTO of the left CIA-EIA

Operators: K. Takayama, K. Myouchin

Clinical data: PAD Rutherford 4 left foot rest pain.

Risk factors: Non-current smoker, HT, DM, DL

ABI: Right 0.85, Left unmeasurable



Live from Kouseikai Takai Hospital, Tenri, Nara, Japan

Case 1: female, 76 years

CTO of the left CIA-EIA

Procedural steps **1. Brachial access via right brachial artery**

- 6F Britetip RADIANTZ 110 cm

2. True lumen recanalization left CIA-EIA

- Prominent Advance NEO 150 cm

- 0.014" Cruise 235 cm

- 0.014" Vasallo GT G40 190 cm

3. PTA and stenting left CIA-EIA

- Oceanus 3 mm x 200 mm, 150 cm

- SMART RADIANTZ 8 mm x 100 mm for EIA

- SMART RADIANTZ 10 mm x 60 mm for CIA

- SHIDEN HP 6 mm x 150 mm, 150 cm

Live 2: 14:30-16:00 English session

Moderator: Je Hwan Won, Terumitsu Hasebe

Commeator: Stefan Müller-Hülsbeck, Masayuki Endo,
Yukihisa Ogawa, Naokazu Miyamoto

Min lecture: Je Hwan Won, Stefan Müller-Hülsbeck

Live operator: Tomoyasu Sato, Katsutoshi Takayama,

Live from Kouseikai Takai Hospital, Tenri, Nara, Japan

Case 2: male, 76 years

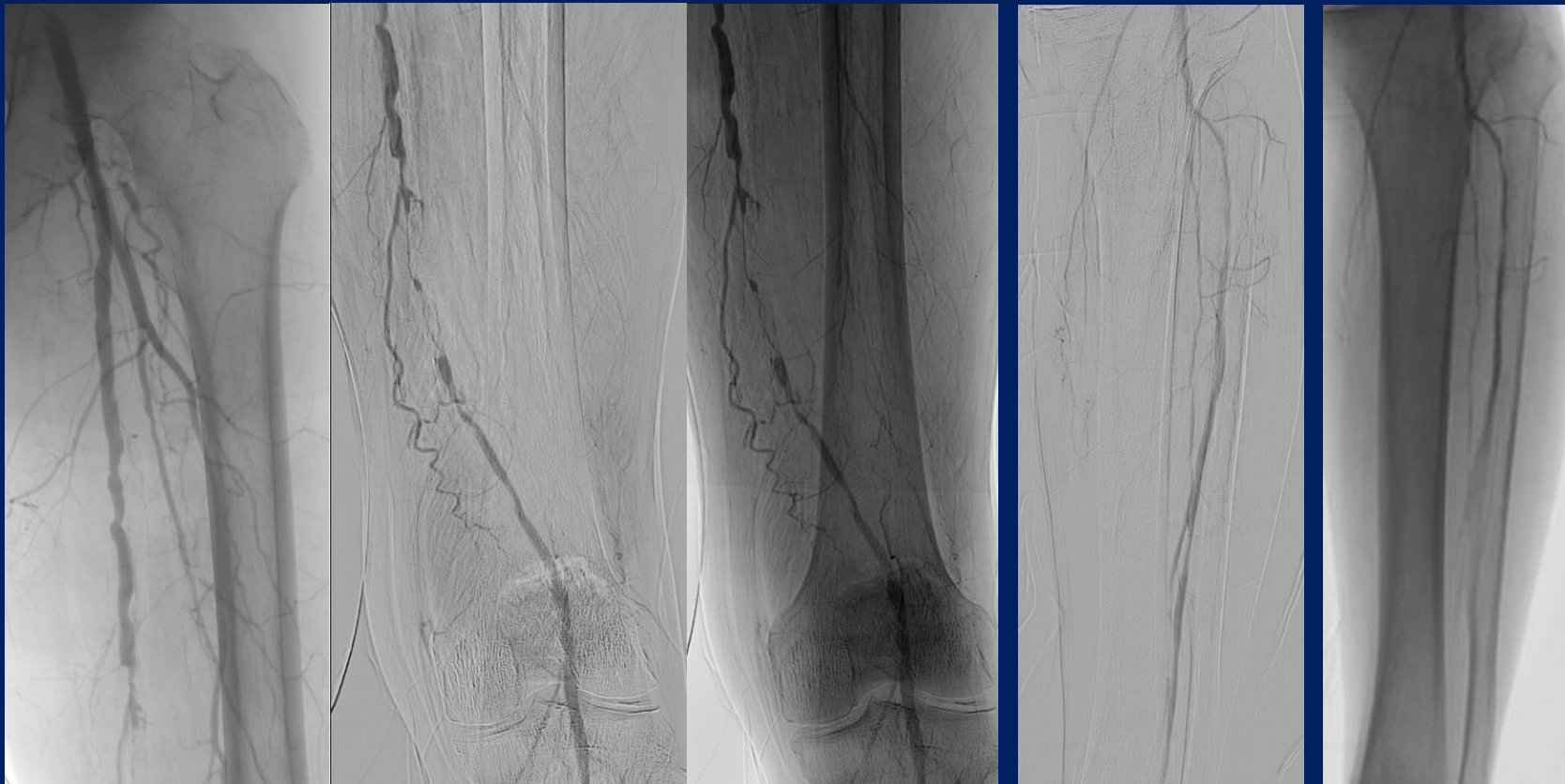
Left SFA occlusion

Operators: T. Sato, K. Takayama

Clinical data: PAD Rutherford 5 left toes wound.

Risk factors: current smoker, HT, CKD eGFR 37.9 ml/min

ABI: Right 0.83, Left 0.70



Live from Kouseikai Takai Hospital, Tenri, Nara, Japan

Case 2: male, 76 years

Left SFA occlusion

Procedural steps 1. Antegrade left CFA access

- 6F Parent Plus 60 cm

2. True lumen recanalization left SFA

- 4F vertebral tempo 4 100 cm

- Prominent Advance NEO 150 cm

- 0.014" cruise 180 cm

- 0.014" Vasallo GT Support 300 cm

3. PTA and DCB left SFA

- JADE2 3 mm x 180 (or 240) mm, 150 cm

- NSE Aperta 4 mm x 40 mm

- IN.PACT 5 mm x 200 mm

4. In case of flow limiting dissection after PTA, stenting left SFA

- ELUVIA 6 mm x 150 mm

- SABER 5 mm x 150 mm

Live 3: 16:00-17:25 Japanese session

Moderator: Takao Ohki, Shoji Sakaguchi

Commeator: Shigeo Ichihashi, Shinichi Iwakoshi

Takuro Kamiyama, Joe Toda

Min lecture: Daigo Kanamori, Norio Hongo

Live operator: Katsutoshi Takayama, Kaoru Myouchin

Closing remarks: 17:25-17:30

Masato Yamaguchi

Live from Kouseikai Takai Hospital, Tenri, Nara, Japan

Case 3: female, 69 years

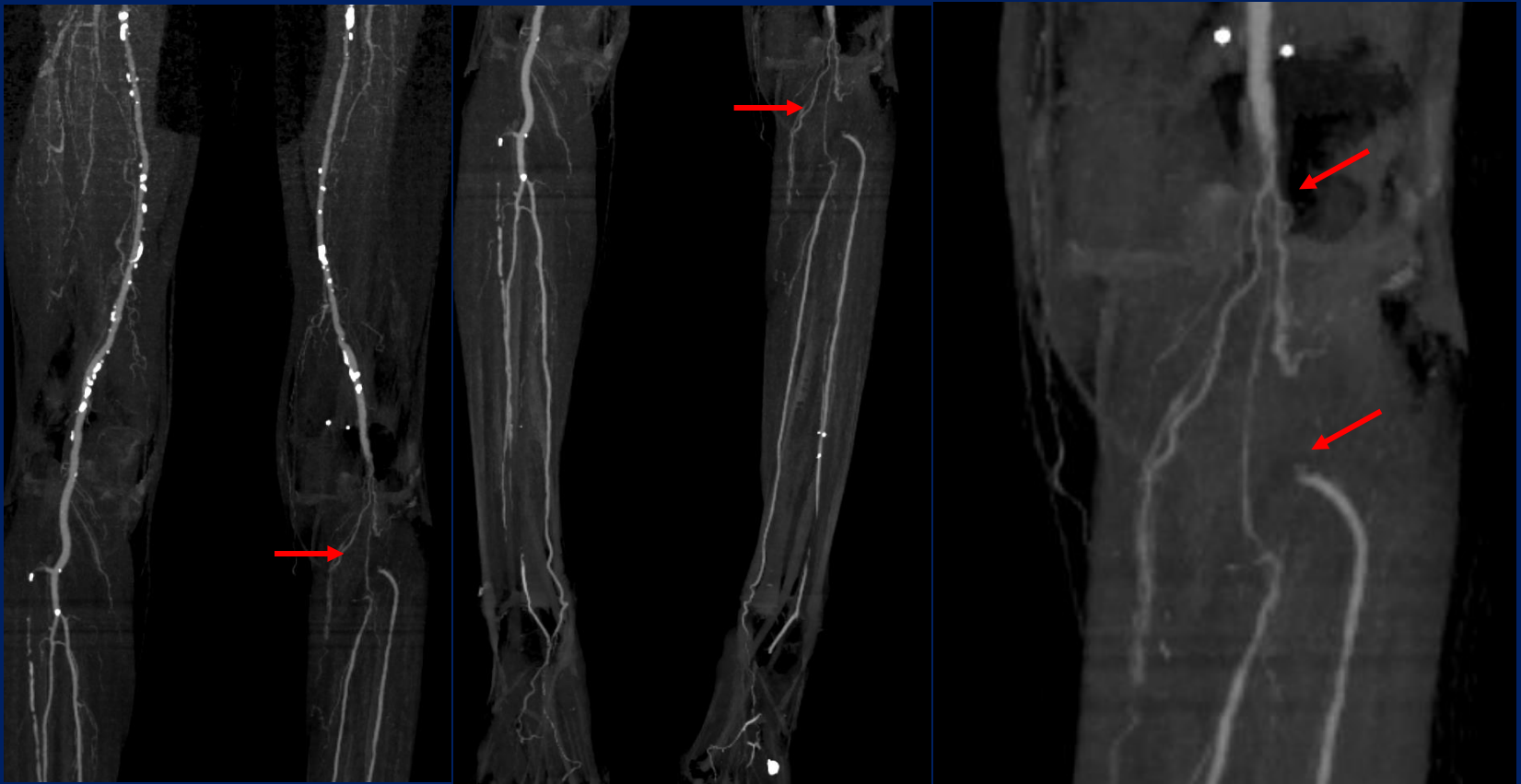
Left popliteal artery occlusion, ATA stenosis

Operators: K. Takayama, K. Myouchin

Clinical data: PAD Rutherford 4 left lower leg rest pain.

Risk factors: current smoker, HT, DL

ABI: Right 0.99, Left 0.64



Live from Kouseikai Takai Hospital, Tenri, Nara, Japan

Case 3: female, 69 years

Left popliteal artery occlusion, ATA stenosis

Procedural steps **1. Antegrade left CFA access**

- 4.5F CROSSROADS 55 cm

2. True lumen recanalization left popliteal artery

- Sergeant STR 90 cm

- Teleport 135 cm

- 0.014" Cruise 180 cm

- 0.014" Aguru 300 cm

3. PTA and DCB left popliteal artery

- NSE Aperta 4 mm × 40 mm

- Ranger 4 mm x 60 mm

4. PTA left ATA

- RapidCross RX 2.5 -3.0 mm x 150 mm

- Coyote 2.5 mm x 150 mm