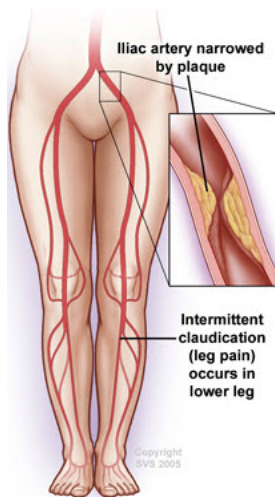


Hybrid Procedures

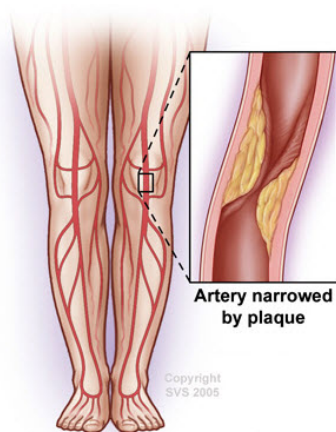
by Ruth Bush, MD

Associate Professor, Division of Surgery

Texas A&M University Health Services Center



Peripheral arterial disease, which is also called PAD, affects almost 8 million people in the United States. Though most people who have PAD do not have any symptoms, those with more advanced disease may develop pain and discomfort in their legs when they walk. Very severe cases may even have pain in their feet when not moving.



There are many treatments for PAD including use of a combination of minimally invasive therapy and traditional open surgery. Vascular surgeons have the training and skill to combine different treatment modalities to fully take care of a patient with PAD. What sets vascular surgery apart from other medical specialties is vascular surgeons are trained to do endovascular procedures such as angioplasty or stenting which are done with only a skin puncture and an x-ray machine and we are also trained to do open procedures such as a bypass or endarterectomy to remove blockages in a vessel.

Persons with advanced PAD and severe symptoms may have multiple areas of blockage from their iliac arteries to the vessels below the knee joint. Traditionally, a bypass to circumvent the iliac lesion would be necessary. Now, with modern technology, such extensive complex disease may require that a minimally invasive approach be performed to open a blood vessel such as the iliac artery to provide blood flow into the lower leg. Additional blockages in the lower leg can then be treated by either a stenting procedure or, alternatively, a bypass if the blockage is extensive. Sometimes all that is needed to restore blood flow is

to remove the plaque buildup, called an endarterectomy, in the femoral artery. Both the iliac stent and the endarterectomy can be treated through a small incision in the groin.

Using both open and endovascular approaches (such as stenting) can have many advantages. By minimizing the size and number of the incisions needed, patients recover faster and do not have as many complications such as infection. In sicker more frail persons, these types of procedures will be safer than a larger operation and often may be done with local anesthesia only. Also, the pain one experiences after a combined procedure is less and patients spend a shorter time in the hospital. Even more advantageous is the fact that people are able to resume their work and leisure activities sooner after a combined procedure. Studies have been done which look at the outcomes of these combined, or hybrid procedures as they are called. As technology and training have improved so have results.

To learn more about your vascular health and find a vascular surgeon visit VascularWeb.org.