Endovascular treatment for Recurrent Aneurysm in Behcet's Disease - 2
Case report and review the literature
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Objectives: Behcet's disease (BD) is an inflammatory multisystemic disease of unknown etiology and can result in the peripheral artery aneurysm. The paper is to summarize our experience of the treatment for recurrent aneurysm in Behcet's disease.

Materials and Methods: From March 2013 to December 2014, 2 patients with recurrent aneurysm in Behcet's disease were admitted.

**CASE 1, male, 37 yrs:**
Chief complaints: suffering recurrent femoral aneurysm for 1 year in Behcet's disease
2012-10 right common femoral artery puncture for intracranial aneurysm embolization
2013-3 aneurysm crevasse suture for right common femoral artery pseudo-aneurysm
2013-5 right external iliac artery – SFA bypass for recurrent pseudo-aneurysm
2013-7 cover stent (Fluency, 6-80) for distal SFA anastomosis pseudo-aneurysm of the bypass

**CASE 2, male, 55 yrs:**
Chief complaints: suffering recurrent femoral aneurysm for 8 year in Behcet's disease
2006-2 aneurysm crevasse suture for right common femoral artery pseudo-aneurysm
2007-3 right external iliac artery – SFA bypass for recurrent right common femoral artery pseudo-aneurysm
2007-9 cover stent for left common femoral artery pseudo-aneurysm
2014-12 cover stent (Viabahn 5-150, 5-100, 6-100) for recurrent left common femoral artery pseudo-aneurysm and new distal SFA pseudo-aneurysm

Results: There was no hospital morbidity or mortality. Follow-up 18 and 8 months respectively, there was no recurrent aneurysm.

Conclusions:
1. Arterial lesions occurred in 1.0 – 7.0 % of patients with BD. Although vascular involvement is not an essential finding for the diagnosis of BD, it is one of the most serious contributors to prognosis.
2. Currently, there is no definitive therapeutic modality for peripheral arterial involvement of BD. We observed that endovascular interventions show high technical success and low procedure-related complication rate.
3. The endovascular therapy with proper puncture technique combined with immunosuppressive medication for recurrent aneurysm in BD appears to be an effective management option.