Peroneal artery gate for PTA of tibial arteries in beyond TASC infrapopliteal lesions.  
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**Background**

PTA of complex infrapopliteal lesions might be a true and complex challenge, especially in diabetic patients. Several techniques have been postulated to deal with such lesions. However, success rates remain suboptimal.

**Aim of the study**

We report our results difficult infrapopliteal disease recanalization using combined antegrade-retrograde approach to recanalize the tibial arteries through collateral branches of the peroneal artery.

**Patients and methods**

Out of 165 case with infrapopliteal lesions treated by PTA, 22 patients (17 males and 5 females) with infrapopliteal TASC D and beyond TASC lesions, underwent recanalization of at least one of the tibial arteries by combined retrograde antegrade route using the peroneal artery channels to reach the tibial veins which are proximally occluded.

**Results**

- The technique was implemented in 22 patients.
- Technical success was achieved in 15 patients who were followed for 6-24 months.
- Healing of ischemic ulcers or spontaneous separation of ischemic gangrenous patches was achieved in 11 patients.
- Minor amputation was done in 4 patients. No major amputation in the follow up period.

**Conclusion:**

- When other options are not possible or are contraindicated. This technique may be of value specifically when a proximal occlusion stump is not evident.
- This technique may represent a feasible endovascular option.