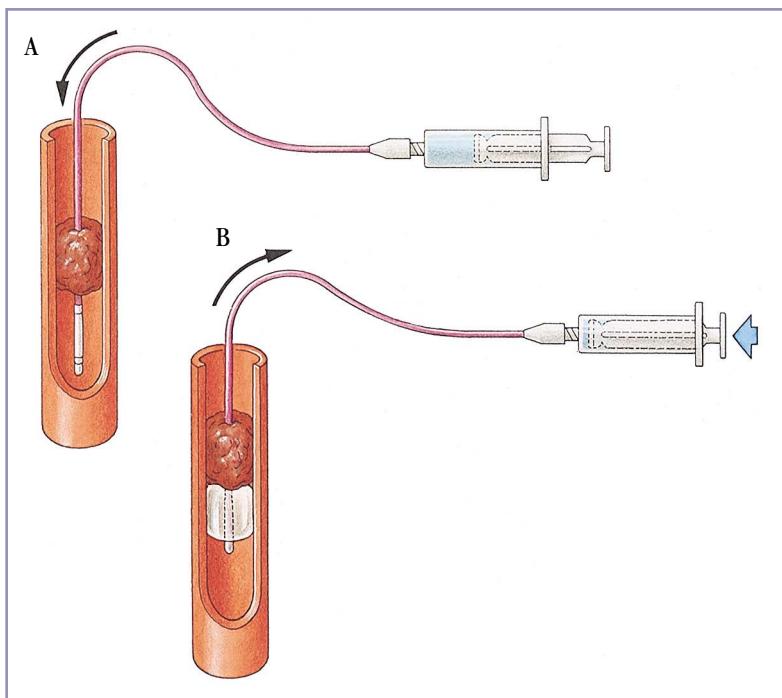


## Arterial thrombectomy of the limbs using a fogarty balloon catheter

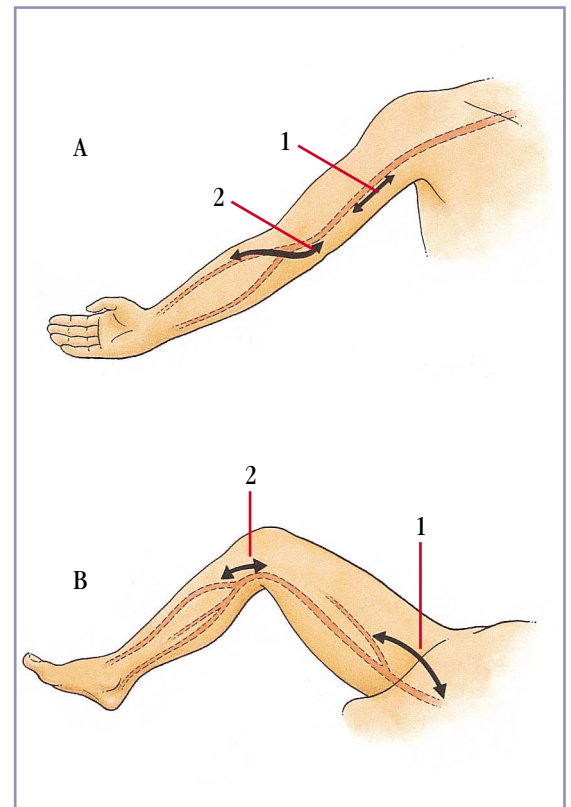
D. ROUX, Y. GLOCK, A. LAGHZAOU, Ph. CONCINA, G. FOURNIAL  
 Department of Cardiovascular Surgery – Rangueil Hospital – Toulouse  
 H. BOCCALON, Ph. LEGER, F. GIAUFFRET  
 Department of Angiology – Rangueil Hospital - Toulouse

This surgery is often undertaken as an emergency in the presence of an acute ischaemia affecting the upper or lower limb. It is carried out under a local anaesthetic with no prior supplementary investigations; arteriography, echo-Doppler or echography is subsequently undertaken in order to evaluate the outcome and to establish a cause.



**Figure 1:** The Fogarty principal.

A: The balloon catheter is pushed distally, piercing the thrombus in the process.  
 B: The balloon is inflated, a constant pressure is maintained in order for the balloon to remain in contact with the arterial wall irrespective of its calibre; the thrombus can thus be withdrawn.



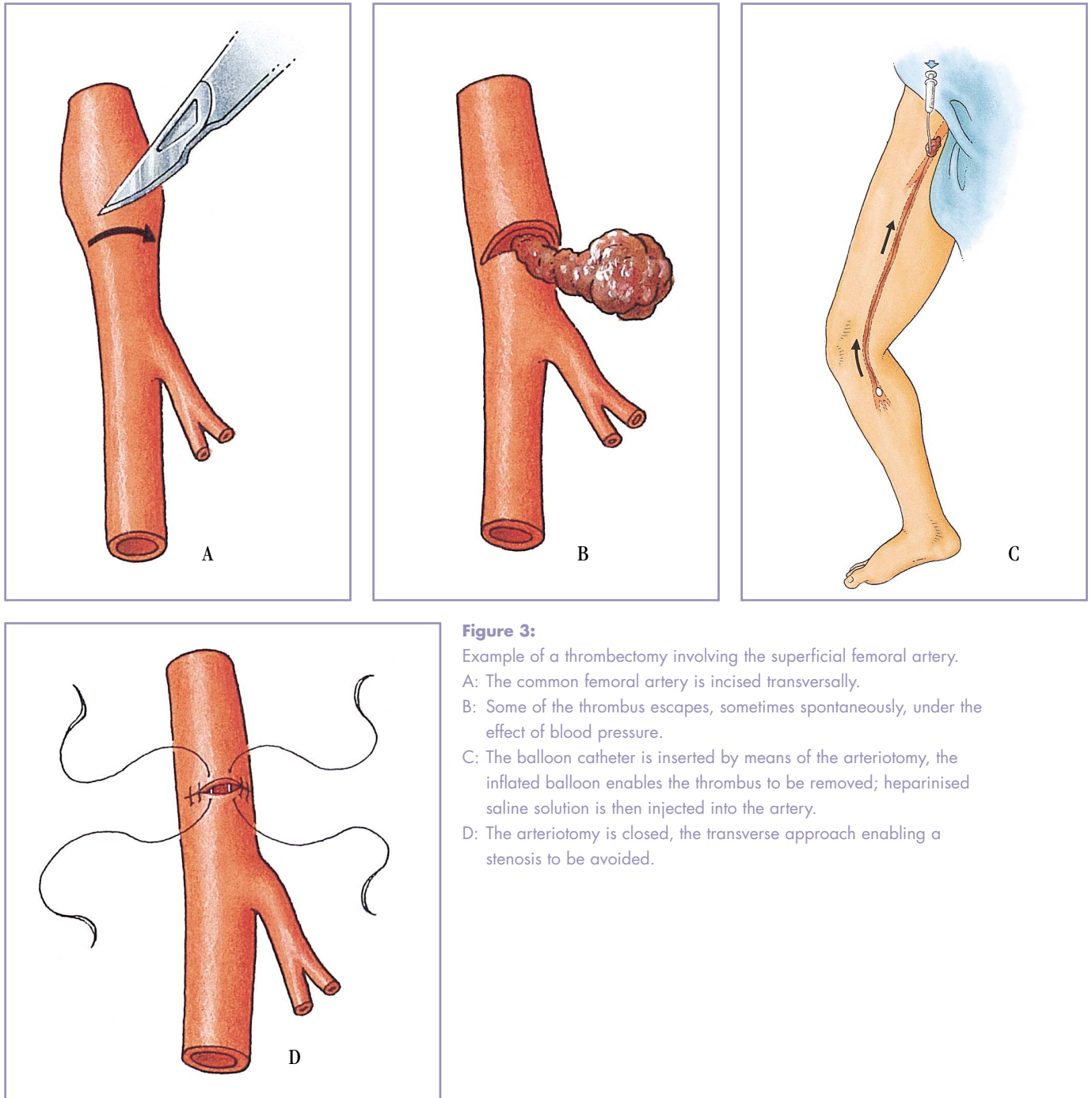
**Figure 2:** The various surgical approaches.

A: In the upper limb:

- 1) The humeral approach enables a subclavian, axillary or humeral artery thrombus to be removed.
- 2) The brachial approach enables radial and cubital arteries to be selectively unblocked.

B: In the lower limb:

- 1) The crural approach enables the entire iliac trunk to be unblocked as well as the deep femoral artery, the superficial femoral artery and a distal trunk.
- 2) The popliteal approach enables the three lower leg arteries to be treated selectively.



This rapid and minimally invasive technique is the treatment of choice for acute ischaemia involving the limbs.