

경피적 경혈관 혈관확장술 및 스텐트 삽입술을 이용한 상장간막동맥 협착 치료 1예

김종현 · 안신기 · 심원흠

= Abstract =

A Case Report of Percutaneous Transluminal Angioplasty with Stenting in Treatment of Superior Mesenteric Artery Stenosis

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Percutaneous transluminal angioplasty (PTA) was first described by Dotter and Jukins in 1964 and subsequently modified by Gruentzig and Hoff in 1974. PTA has proved a safe and effective treatment for focal atherosclerotic disease of the aorta and its major extremity branches. The complications of PTA of the peripheral vessels are less frequent and less severe than those associated with the comparable surgical procedure. Intestinal angina is a clinical syndrome comprising postprandial abdominal pain, nausea, vomiting, diarrhea, weight loss, and eventually fear of eating. The syndrome is thought to be due to visceral ischemia, with stenosis or occlusion of two of the three visceral arteries being necessary for the syndrome to occur. Although the first report of mesenteric PTA appeared in 1980, the series of PTA with stenting of the visceral arteries reported in the literature have been small or included limited follow-up. We report a case of a intestinal angina due to superior mesenteric arterial stenosis. A 69-year-old male complained of severe postprandial pain, chronic diarrhea for 1 year. PTA with stenting in superior mesenteric artery result in recannulation of obstructed artery and relief of symptom.

KEY WORDS : PTA with stenting · Superior mesenteric artery stenosis · Intestinal angina.

서 론 (intestinal ischemia) 가
3 (visceral rtery)
(mesenteric artery) 2
1,2,3)
, , ,
(aortomesenteric graft)

(transaortic endarterectomy) 4,5)
 7.5 50% 6-11) 3 85%,
 Dotter Judkins가 1964
 12)
 1 (superior me-
 senteric artery)

:
 8,900/mm³(73%, 18%, 8%)
 , 13mg/dl, 42%,
 256,000/mm³
 BUN 18.6mg/dl, Creatinine
 1.6mg/dl, 79mg/dl Total - Protein 7.7g
 /dl, Albumine 4.4g/dl, SGOT 22 IU/L, SGPT 24 IU/
 L, Alkaline Phosphatase 128 IU/L, Total - Bilirubin
 0.7mg/dl, Na 145mEq/L, K 3.8mEq/L Total - Ch-
 olesterol 107mg/dl, HDL - Cholesterol 34mg/dl, Tr -
 iglyceride 124mg/dl Lp(a) 71.8mg/dl
 : 12
 , , aVF Q 가
 : X

KIO 려
 : , 69
 :
 : 95 1
 (jejunum)
 (jejunotran-
 sverse colostomy)
 : 39 1
 3
 가 :
 : 180/130mmHg,
 60/min, 18/min, 36.5

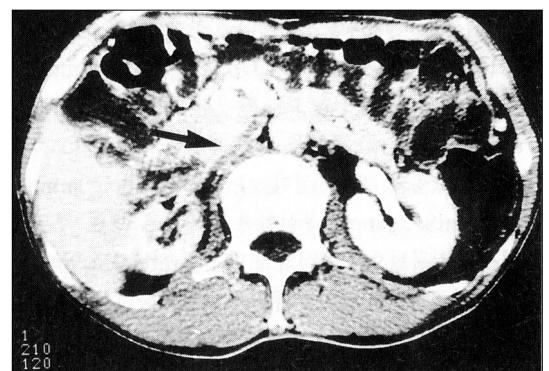


Fig. 1. Contrast-enhanced CT scan shows severe narrowing of right renal artery (arrow) and atrophic change of right kidney.



Fig. 2. Contrast-enhanced CT scan shows well-deployed J-J stent at ostium of superior mesenteric artery (arrow).

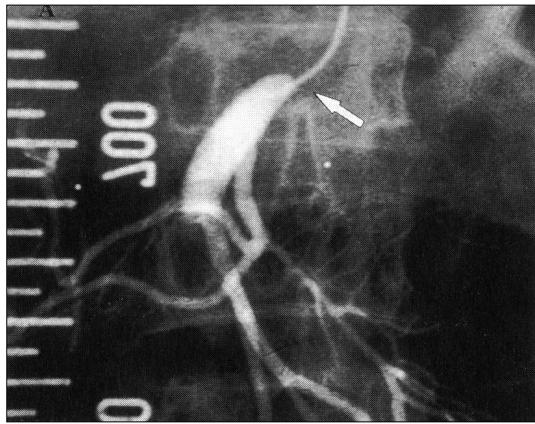


Fig. 3. Selective angiogram shows significant narrowing at ostium of superior mesenteric artery (arrow).

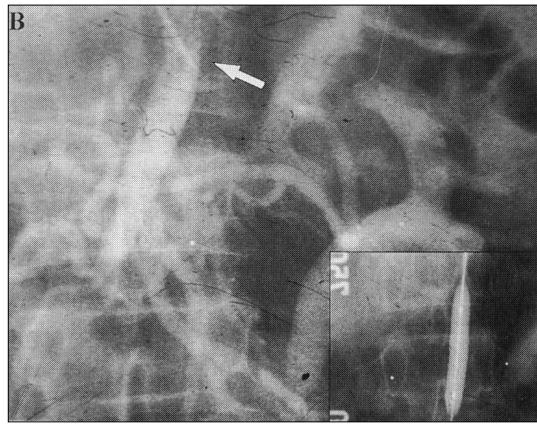


Fig. 4. After stent deployment, adjuvant high pressure ballooning with Ultrathin-Balloon was done successfully (arrow, right lower of figure).

(Fig. 1)

(Fig. 2).

경피적 경혈관 확장술 및 스텐트삽입

(brachial artery)

5Fr (multipurpose)

80%

(Fig. 3).

(guide wire), Roadrunner 018

117mmHg,

74mmHg

035 Ultrathin(5 x 20mm)

4 40 J-J

(8 x 10mm) Ultrathin(8 x 20mm)

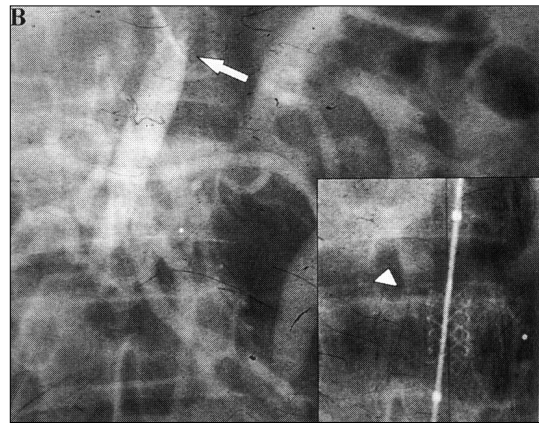


Fig. 5. After adjuvant high pressure ballooning, angiogram shows fully-expanded J-J stent at ostium of superior mesenteric artery (arrow, arrow head).

가

Blue

Max(8 x 40mm)

15

1 15

(Fig.

4).

(Fig. 5).

(migration)

경과

J-J

(8 x 20mm) Blue Max(8 x 40mm)

10

Ultrathin(5 x 20mm)

2.5Kg

6 40

가

고 안 47%, 3 85% 9,10).
 , 54% 20).
 , 93% (patency)
 , 30% 7,9,21). (30)
 가 13-16). 가 , ,
 , 3 , McCollum
 (visceral artery) 2 (Aortomesenteric byp-
 . ass) 33 5 83%, 10
 가 가 62% 9).
 (fibromus-
 cular hyperplasia), (radiation injury) 가 1980
 13) 22)
 60 , .
 40% (epigastric bru- 22-31). Hallisey 32)
 it) 가 16
 14 (88%)
 17) , 2.5
 가 12 9 (75%)
 . Matsumoto 30) 19 15
 Valentine 18) 75% 15
 (renal artery) 12 . 25
 83% (primary success rate)
 . Sniderman 31) 13
 , 가 85% ,
 , 82%
 (bypass) Matsumoto 30) 17%,
 Sniderman 31) 45%, Odurny 25) 63%
 (revascularization) 1958 Shaw Maynard
 . (end - to - end anasto-
 mosis) (Transaortic en-
 darterectomy) 가 가 가
 19). , (carotid artery)
 7.5 50% 가

33,34,35)

28)

요 약

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1

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