Laceration of the Femoral Vein Following Stripping of a Fibrotic Great Saphenous Vein

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Aim: To report a complication in the femoral vein (FV) following stripping of the great saphenous vein (GSV).
Case report: We report FV laceration after invagination stripping, possibly related to post-thrombotic thickening of a GSV and its mid thigh perforator (MTP).
Discussion: In patients with a history of ascending thrombophlebitis, duplex ultrasound imaging may identify thickening of GSV and MTP. If invasive therapy is deemed necessary, MTP should be marked preoperatively and ligated separately. However, percutaneous minimally invasive techniques may be preferred in these patients.

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Neurological Deficit Secondary to Spinal Cord Ischemia after Infrarenal Abdominal Aortic Repair for Aorto-iliac Occlusive Disease: A Case Report

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Neurological deficit after infrarenal abdominal aortic repair is rare. We report on a patient who had an infrarenal aortobifemoral bypass for claudication. Postoperatively, he developed a partial anterior spinal artery syndrome (ASAS).
Factors contributing to the development of ASAS were evaluated using contrast-enhanced magnetic resonance angiography of the spinal cord's blood supply. ASAS was probably caused by a temporary inadequate blood flow to the cord due to intra-operative hypotensive episodes combined with generalized vascular disease. Since treatment options for ASAS are solely supportive, preventive measures are imperative to avoid neurological deficit.

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