Renal Case Study

Renal - Pseudoaneurysm

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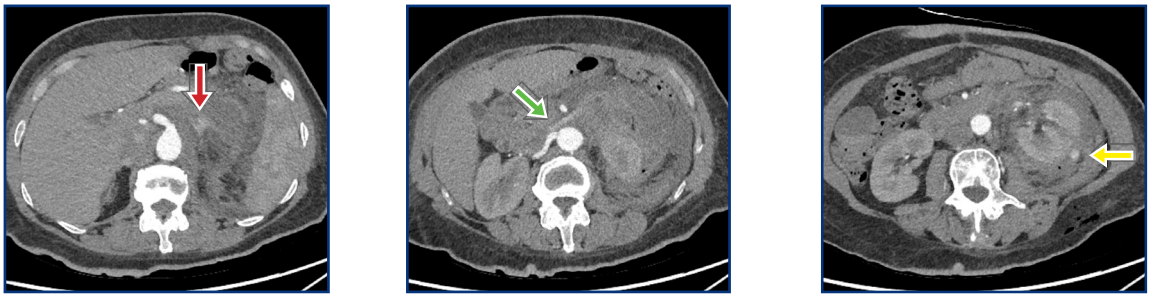
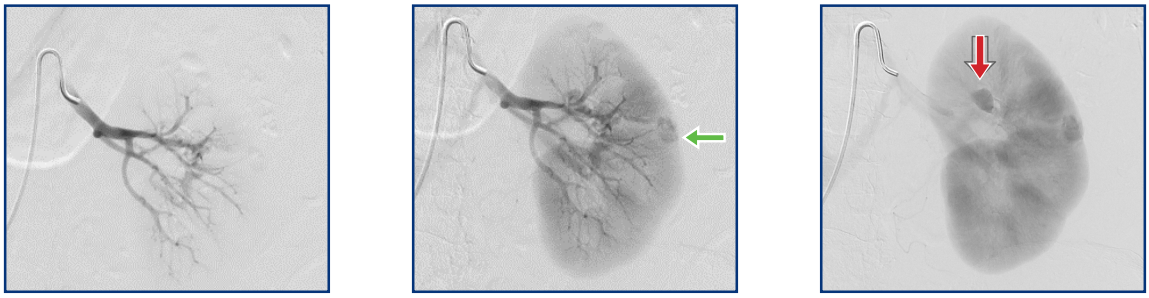
Patient Presentation

42-year-old male that underwent CT guided non-focal renal biopsy. Patient developed marked gross hematuria, dropping hemoglobin, low BP and was emergently transferred from an outside hospital.

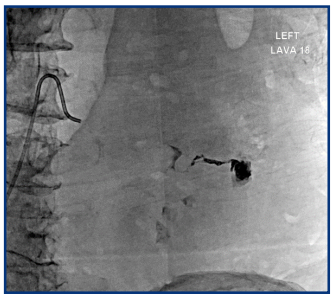


These images from CT scan showed evidence for active bleeding (red arrow), a peripheral pseudoaneurysm (green arrow) and a likely AV fistula (yellow arrow) after the biopsy.

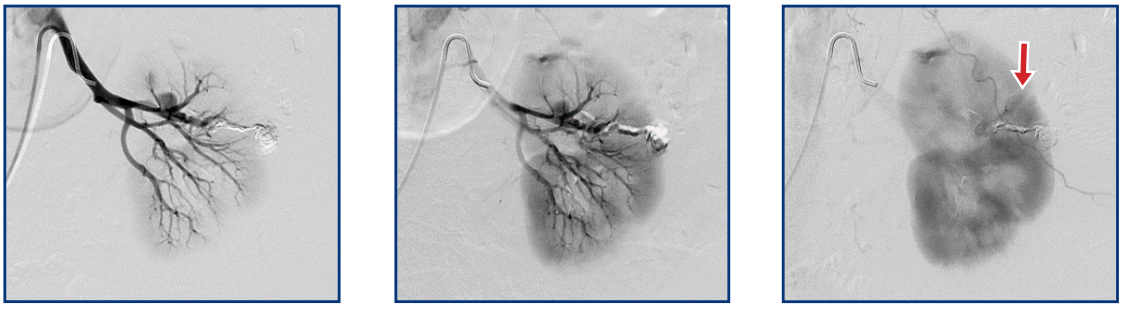


These images from the initial renal angiogram showed evidence for a pseudoaneurysm (source of bleeding) in the periphery of the left kidney (green arrow) with additional abnormal contrast pooling in the more medial aspect of the kidney (red arrow).

Treatment-Initial Bleed

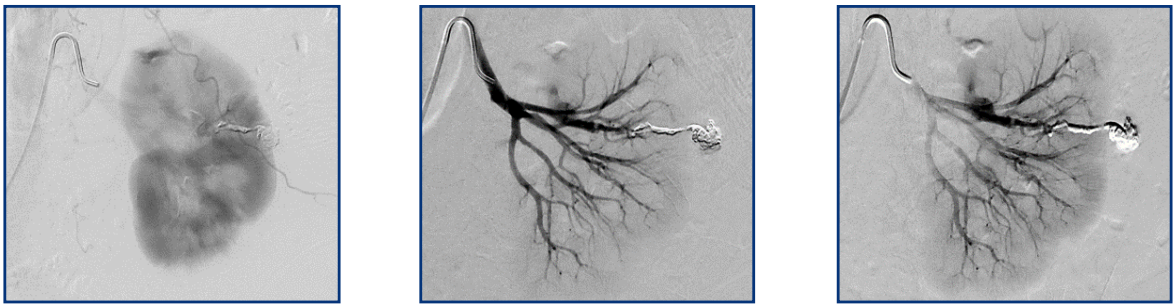


This is an image following the administration of LAVA 18 into the mid-pole branch supplying a pseudoaneurysm where contrast extravasation was seen.

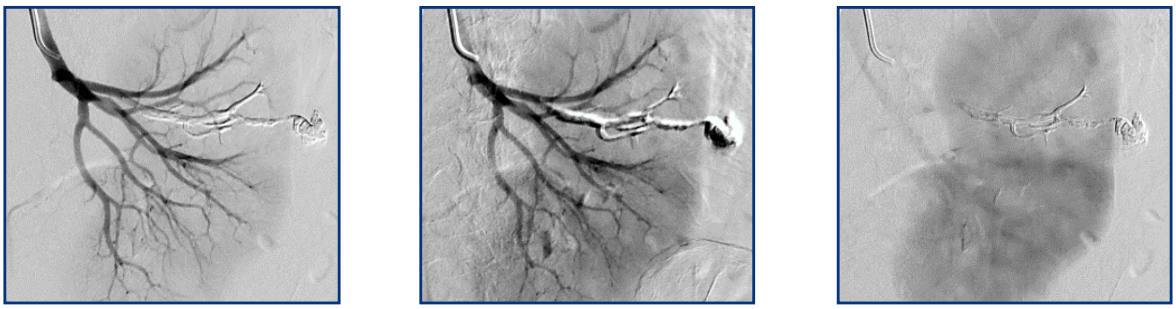


An angiogram after LAVA 18 administration showed good control of the peripheral bleeding, but additional bleeding was seen in the medial aspect of the upper pole (red arrow). This corresponded to the area of bleeding seen on CT.

Second LAVA Administration



Additional angiographic images showed that there was additional bleeding in the medial aspect of the upper pole of kidney that was likely arising from a more proximal position of the same artery supplying the original area of bleeding.



LAVA 18 was administered more proximally into the injured artery with good control of the bleeding at both sites. The target vessels was embolized in its entirety which impacted only a small percentage of the left kidney. No adverse events.

Caution: U.S. federal law restricts the sale, distribution, and use of this product to physicians or as prescribed by a physician. This device should be used only by physicians with a thorough understanding of angiography and percutaneous interventional procedures, and the physician would have successfully completed training. **Indications for Use:** LAVA® LES is indicated for embolization of arterial hemorrhage in the peripheral vasculature. **Potential Complications:** Potential adverse effects (e.g., complications) associated with the use of the device include: Non-target embolization, Ischemia or infarction of the target territory, Allergic reactions to device components, Catheter breakage, Catheter entrapment, Inadvertent embolization of a non-target vessel or territory, Embolization of device components, Access site hematoma or ecchymosis, Access site false aneurysm, Pain at access site, Arterial dissection, Mural thrombus formation, Vessel perforation, Hemorrhage, Recanalization, Vessel perforation, Arteriovenous fistula, Distal atheroembolism, Infection, Sepsis, Serous drainage, Lymphorrhea, Leg edema, Leg pain, and Back pain. **Consult the Instructions for Use (www.sirtex.com/lava/risks_adverse-events) for a complete listing of indications, contraindications, potential complications, warnings, and precautions.**

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