Atypical Presentation of Critical Lower Limb Ischaemia Treated with Aortobifemoral Biosynthetic Prosthesis

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The case of a 67-year old man initially presenting with claudication, which soon progressed to rest pain and ulcers in the thighs, groins, scrotum, sacral and gluteal regions, is presented. Computed tomography angiography revealed occlusion of the infrarenal aorta. There was no clinical, laboratory or histopathologic evidence of vasculitis, calciphylaxis, cholesterol emboli or pyoderma gangrenosum. Because of the risk of prosthetic graft infection, an aortobifemoral bypass was performed using an Omiflow II Biosynthetic Graft (Le Maitre, Sulzbach, Germany). An 8 mm graft was divided into two equal pieces, which were sutured in an inverted “Y” configuration. The patient experienced relief of the ischaemic rest pain and the ulcers healed within two months (Fig. 1).

Figure 1. Ischaemic ulcers in the thigh area before (left top) and after (right top) revascularization with an aortobifemoral biosynthetic prosthesis. Computed tomography angiography of the aorta before (left bottom) and after (right bottom) revascularization with an aortobifemoral biosynthetic prosthesis.