中文題目: Protein S 缺乏併發反覆周邊動脈栓塞藉由機械性血栓移除術成功治療 英文題目: Protein S deficiency complicated with repetitive peripheral arterial thrombosis successfully treated by mechanical thrombectomy device with Rotarex system 作 者: 吳韋璁<sup>1</sup>, 李文賢<sup>2</sup>, 朱俊源<sup>3</sup>, 蘇河名<sup>4</sup>, 林宗憲<sup>5</sup>, 許栢超<sup>6</sup> 服務單位: 高雄醫學大學附設中和醫院內科部 心臟內科<sup>1</sup>

## Abstract

Protein C/S deficiency is an inherited thrombophilia associated with an increased risk of venous thromboembolism. However, arterial thrombosis is a relative rare complication of protein C/S deficiency and the prognosis of these patients was worse than those without protein C/S deficiency in the literature. Herein we reported a 70 year-old male with protein S deficiency experiencing several times acute peripheral arterial occlusive disease (PAOD) of left leg from superficial femoral artery (SFA) to distal below-the -knee arteries. He received surgical embolectomy twice initially but arterial thrombosis of left leg still recurred within few months. Cardiologist was then consulted for further endovascular treatment (EVT) of left leg. Although EVT was successfully performed by several days catheter-directed thrombolysis (CDT) and stenting for left SFA, arterial thrombosis still recurred after three months of 1<sup>st</sup> EVT. We tried to use CDT again but thrombosis could not be treated by this strategy anymore. Therefore, we used mechanical thrombectomy device (Rotarex system) and successfully regained the straight-line blood flow to the foot after the procedure. No further arterial thrombosis was noted and peripheral echo also showed patent flow after 6 months follow-up. To our knowledge, this case was the first case using Rotarex mechanical thrombectomy device for acute PAOD in Taiwan. In addition, it also reminds physicians that Rotarex system is a safe and highly efficient device for acute PAOD even in the patients with hypercoagulable state.