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Vascular complications following prophylactic balloon occlusion of the internal iliac arteries resolved by successful interventional thrombolysis in a patient with morbidly adherent placenta

Key words: Balloon catheters, Internal iliac artery, Placenta accreta, Vascular complication, Interventional thrombolysis

Research Summary

This case report and the literature review provide cautious reference for obstetric clinicians to deal with the morbidly adherent placenta (MAP) by performing prophylactic iliac artery balloon occlusion as well as the successful experience on the interventional thrombolysis.

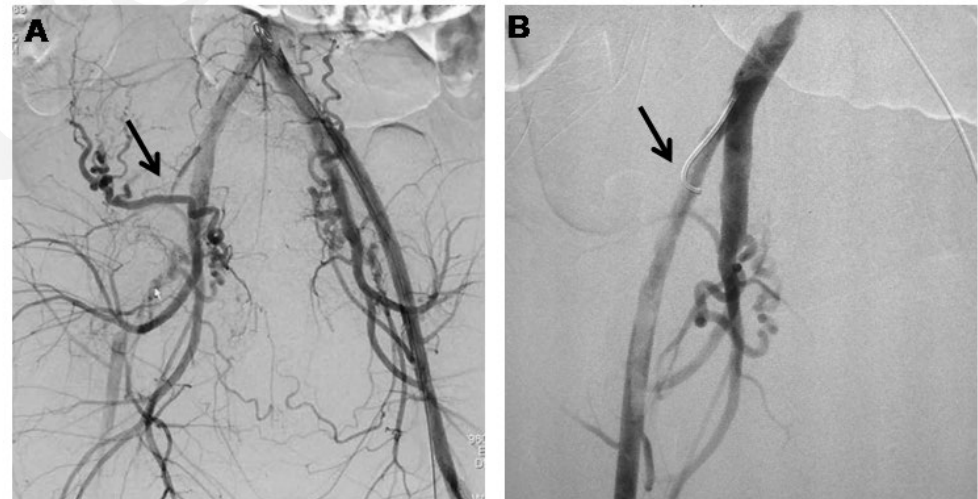
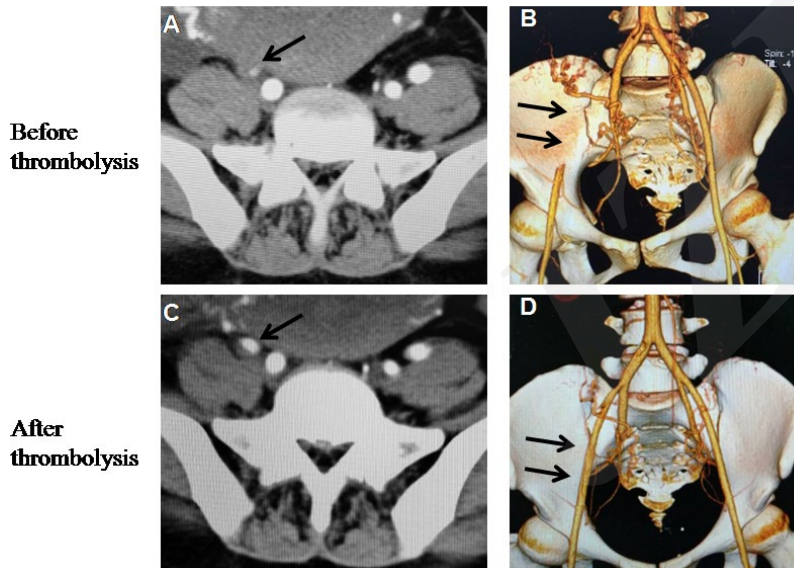
- The increasing incidence of morbidly adherent placenta (MAP) is placing women at a higher risk of life-threatening massive hemorrhage.**
- The safety and effectiveness of preoperative occlusive balloon catheters for abnormal placenta remains controversial.**

Case report

25-year-old woman with placenta increta with preemptive bilateral internal iliac artery balloons experienced external iliac artery thrombosis.

- Imaging studies of iliac arteries using angiograph and 3D multi-detector computed tomography (MDCT) before and after thrombolysis.

- DSA confirms occlusion of right external iliac artery and patency of left iliac artery system



Innovation points

- **We encouraged this novel technique of preoperative occlusive balloon catheters for abnormal placenta based on our previous experience, but caution must be exercised given the lack of meaningful evidence to support this strategy as well as the associated vascular complications.**
- **A centralized registry is highly recommended for assembling scattered data and collecting evidence. Meanwhile, tracking potential complications and associated cofactors will facilitate future comparisons and the development of international guidelines.**