Troubleshooting during complex TEVAR: Kommerell diverticulum

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Disclosure

Speaker name:

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I have the following potential conflicts of interest to report:

☐ Consulting
☐ Employment in industry
☐ Stockholder of a healthcare company
☐ Owner of a healthcare company
☐ Other(s)

☐ I do not have any potential conflict of interest
Case

- 72 year-old male
- HTN
- Dyslipidemia
- Obesity
- Diabetes
- COPD: several admittances in the last 2 years
- Atrial fibrillation
- Right carotid occlusion and .....
Kommerell diverticulum
Surgical planning: 1st stage
Surgical planning: 2\textsuperscript{nd} stage

Covered 10 mm stent
Surgical planning: 2\textsuperscript{nd} stage
Surgical planning: 2\textsuperscript{nd} stage

Localizing vertebral art. Pre-deployment angio
But when deploying the graft

Collapse of the proximal part (image after opening attempts with Reliant balloon and pulling back to straight aorta)
Several materials used
Finally passing through....

9F longh straight sheath with straight terumo guidewire

PTA wiht 10 mm balloon
Expanding the graft

Low compliant ballooning

Several times
Again in the arch...

New aortic graft  Checking chimney patency
Final angio before coiling
Filling the sac with coils
What happened next..

- Time to achieve opening of the graft: 100 min
- Patient taken to ICU
- Extubated the next day
- No clear neurological déficit
- 5 days after surgery severe respiratory insufficiency
- Died 7 days after surgery in ICU
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