SANDWICH-GRAFT TECHNIQUE TO PRESERVE BOTH INTERNAL ILIAC ARTERIES IN A PATIENT WITH PREVIOUS AORTO-AORTIC BYPASS AND EXTERNAL ILIAC ARTERY OCCLUSION

R. Villardefrancos
Angiology and Vascular Surgery Department
Complexo Hospitalario de Ourense.
CHUO. Spain.
Disclosure

Speaker name:

Rosa Villardefrancos Gil

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
IIA, PRESERVATION IN EVAR?

Outcome after Interruption or Preservation of Internal Iliac Artery Flow During Endovascular Repair of Abdominal Aorto-iliac Aneurysms

G.N. Kouvelos a, A. Katsargyris a, G.A. Antoniou b, K. Oikonomou b, E.L.G. Verhoeven a

a Department of Vascular and Endovascular Surgery, Paracelsus Medical University Nuremberg, Germany
b Department of Vascular and Endovascular Surgery, The Royal Oldham Hospital, Pennine Acute Hospitals NHS Trust, Manchester, UK

Conclusion: Unilateral or bilateral IIA occlusion during EVAR seems to carry a substantial risk of significant ischemic complications in nearly one quarter of patients. Bilateral IIA occlusion was related to a significantly higher rate of BC. IIA preservation techniques represent a significant improvement in the treatment of aorto-iliac aneurysms and have been associated with high technical success and low morbidity.

© 2016 European Society for Vascular Surgery. Published by Elsevier Ltd. All rights reserved.

Article history: Received 21 February 2016, Accepted 19 July 2016, Available online 2 September 2016

Keywords: Internal iliac artery, Preservation, Interruption, Endovascular aneurysm repair
**TECHNICAL NOTE**

**Sandwich Technique for Aortoiliac Aneurysms Extending to the Internal Iliac Artery or Isolated Common/Internal Iliac Artery Aneurysms: A New Endovascular Approach to Preserve Pelvic Circulation**

Armando C. Lobato, MD, PhD

São Paulo Vascular and Endovascular Surgery Institute, São Paulo, Brazil.
Modified Sandwich-graft Technique Employing Aorfix and Viabahn Stent-grafts to Preserve Hypogastric Flow in Cases of Complex Aortoiliac and Isolated Common Iliac Artery Aneurysms Including the Internal Iliac Artery Ostium

C.S. Lim a, Y. Naji b, S.T. Hussain a, E. Pleban c, A. Wiszniewski c, S. Onida d, N.J. Mosquera Arochena d,*, P. Szopinski e

a Department of Vascular Surgery, Northwick Park Hospital, Harrow, UK
b Department of Radiology, Northwick Park Hospital, Harrow, UK
c Clinic of Vascular Surgery, Institute of Haematology and Transfusion Medicine, Warsaw, Poland
d Angiology and Vascular Surgery Department, Complexo Hospitalario Universitario de Ourense, Ourense, Spain

WHAT THIS PAPER ADDS
This study described and assessed the short- and mid-term outcome of a modified-sandwich graft technique that can be used to preserve hypogastric flow in cases of complex aortoiliac and isolated common iliac artery aneurysms including internal iliac artery ostium. Although there are iliac branch devices (IBDs) available in the market, these endografts may not be suitable for all cases, especially those with complex aortoiliac anatomy. Furthermore, the long-term outcomes of the IBD remain unclear. The study provides an alternative safe and effective endovascular strategy to preserve the hypogastric flow in patients with aortoiliac aneurysms including internal iliac artery ostium that may not be suitable for IBDs.

Conclusions: MSGT was a safe and feasible strategy to preserve hypogastric flow in cases of complex aortoiliac and isolated CIA aneurysms including IIA ostium and mid-term outcomes.
Male, 84y
Hypertension, AF, OB, asthma

13 years ago:
- Infrarenal AAA ➔ Aorto-aortic bypass
- Occlusion left EIA ➔ femoro-femoral bypass
*Follow-up: aneurism disease progression*
EVAR: AORFIX™.
SANDWICH-GRAFT TECHNIQUE: VIABAHN™

OR: ✗
- Comorbidities

IBD: ✗
- Left EIA occlusion
- Length
CONCLUSION

Endovascular reconstruction of the iliac bifurcation is safe and effective. It allows the extension of distal landing zone for EVAR while preserving the IIA blood-flow, even in unfavourable iliac anatomy.
SANDWICH-GRAFT TECHNIQUE TO PRESERVE BOTH INTERNAL ILIAC ARTERIES IN A PATIENT WITH PREVIOUS AORTO-AORTIC BYPASS AND EXTERNAL ILIAC ARTERY OCCLUSION

R. Villardefrancos
Angiology and Vascular Surgery Department
Complexo Hospitalario de Ourense.
CHUO. Spain.