INNOMINATE ARTERY PSEUDOANEURYSM
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)

X I do not have any potential conflict of interest
Case Presentation

• 85 y.o. woman

• Hypertension and hypercholesterolemia

• PAD w/ previous femoro-peroneal bypass graft

• No other relevant clinical history
Clinical Symptoms

Intermittent fever of 40ºC during the previous 30 days

- Blood Cultures: positive for **MSSA**
- Transesophageal echocardiogram: suspicion of rupture of mitral chordae
Provisional Diagnosis

Infectious Endocarditis

• **Antibiotic IV**: Cloxacilin and Daptomycin.

• A PET-CT scan was performed to confirm diagnosis.
Repair Strategy

• Bovine arch

• Proximal/distal landing zone (10/20 mm)

• Length of IA: 5 cms

• Proximal IA Ø: 15 mm

• Distal IA Ø: 13 mm
Repair Strategy

- Open aortic arch surgery: elderly patient & infection
- Custom-made endoprosthesis: emergent case
- Chimney technique: not CSG available for these measures
- Covered stent graft: not available

Hybrid repair &
**In situ customization** of iliac limb
Hybrid Repair

- Transposition of LCCA to LSA
- Dacron tube on the RAA
- Percutaneous CFA access
- **Home-made customization of iliac limb**
- **Release** through the Dacron tube sutured on to the RAA
- **Coil embolization** of the pseudoaneurysm
Home-Made Customization

- **Endurant™ II iliac limb**
  - Ø 16 mm proximal
  - Ø 20 mm distal
  - 82 mm length

- The endograft was released from the sheath
Home-Made Customization

- **Two stents** were cut off to obtain a length of 55 mm

- The graft was placed **inverted** into the sheath:
  - Ø 20 mm proximal
  - Ø 16 mm distal
  - 55 mm length
Result
Post-Operative

• Rapid extubation
• No neurological event
• No surgical wound complications
• Early ambulation
Follow-Up

• **CT scan** (2 weeks): Complete exclusion. No endoleaks.

• 6 weeks of IV antibiotic therapy.

• Discharged with oral antibiotics

• Currently: no symptoms, no fever

• *New CT in 6m*
THANK YOU
INNOMINATE ARTERY PSEUDOANEURYSM

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