A Single-Stage Hybrid Endovascular Repair of Symptomatic Type V Thoracoabdominal Aortic Aneurysms: Combined Sandwich and Debranching technique

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Disclosure

Speaker name:

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] do not have any potential conflict of interest
A 72-year-old Thai male

- Presented at the emergency room with a 3-day history of severe epigastric pain radiating to the back
- BP 160/90 mmHg, Temp. 37.1 C
- Physical examination revealed a pulsatile abdominal mass at epigastrium with pain on palpation
- **Past medical history**
  - Hypertension
  - Smoking
  - CAD with Hx of CHF
  - Severe MR
  - Aortoiliac occlusive disease s/p left iliopopliteal bypass 5 years ago
  - Bypass graft thrombosis s/p thrombectomy with fem-fem crossover 1 year ago
CTA whole aorta
Planning

Single stage
Procedure

• Both renal arteries bypass in end to end anastomosis
• Retrograde bypass from left iliac bypass graft
Procedure
Procedure
Post op

- CTA ➔ type II endoleak from celiac trunk
- Plan ➔ embolization but the patient denied
- Stayed in the ICU 10 days
- He was discharged at 58 days
- F/U CTA 3 months diminish endoleak, aneurysm was stable
Conclusion

• The hybrid repair has the advantage of avoiding aortic cross clamp, thoracic incision and cardiopulmonary bypass
• It offer an alternative treatment for TAA in high risk patient and high risk anatomy
Thank you for your attention