

Non-operative Management of Aortic Graft Infections

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Introduction

Prosthetic grafts are used to treat abdominal aortic aneurysms and occlusive aorto-iliac disease. Despite the recent advances in techniques and technology, graft infections remain one of the most serious complications of aortic surgery. The incidence varies between 0.7% - 2% with associated morbidity and mortality of 10% – 25%. The mainstay of treatment for aortic graft infections is removal of the infected graft and restoration of arterial continuity using in-situ graft or extra-anatomical bypass which can be very challenging as a majority of these patients are unfit for further surgery.

Aim

To explore the effectiveness of non-operative management of aortic graft infections.

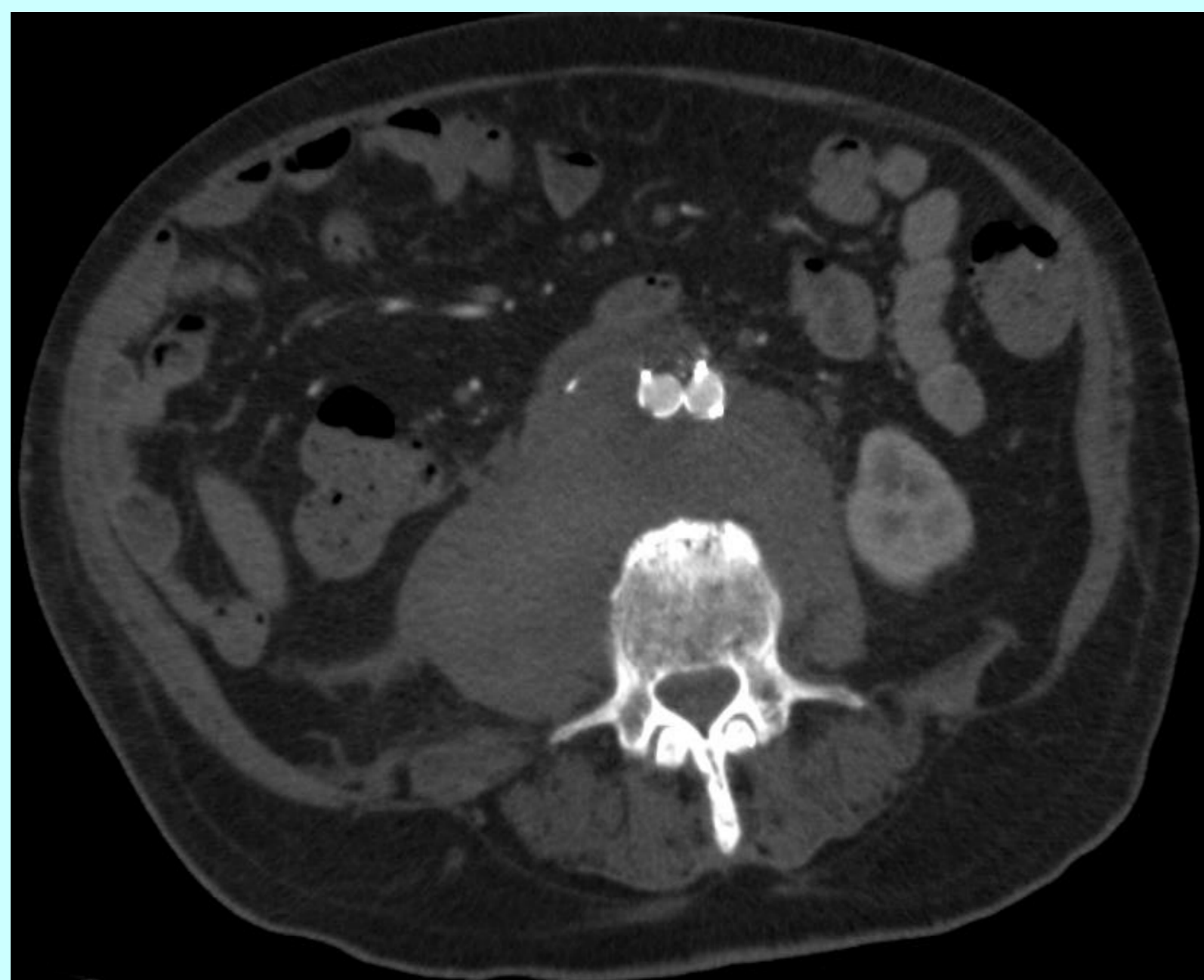
Method

Retrospective case note review of all cases of aortic graft infections.

Results

Patient No.	Surgical Procedure	Type	Treatment		Outcome	CRP		Follow-up
			Drain	Antibiotics		Pre	Post	
1	Emergency EVAR	Mycotic	Yes	Yes	Contained	264	13	2 years
2	Emergency open	Mycotic	Yes	Yes	Eliminated	294	6	3 years
3	Emergency open		Yes	Yes	Eliminated	346	11	3 years
4	Emergency open	Mycotic	Yes	Yes	Contained	137	5	4 months
5	Elective FEVAR		No	Yes	Eliminated	126	2	16 months

Patient 1



Pre-drain

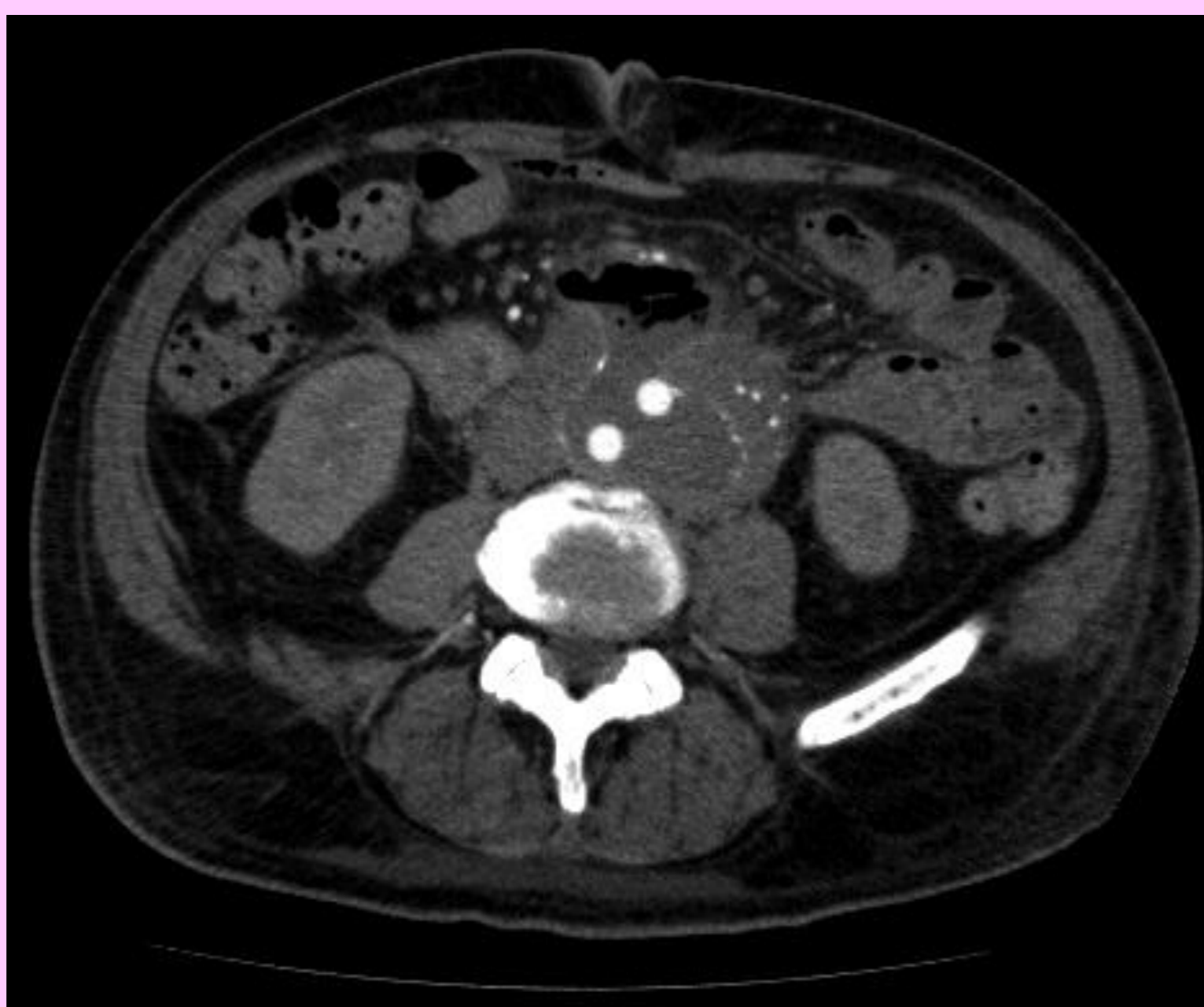


Drain in-situ

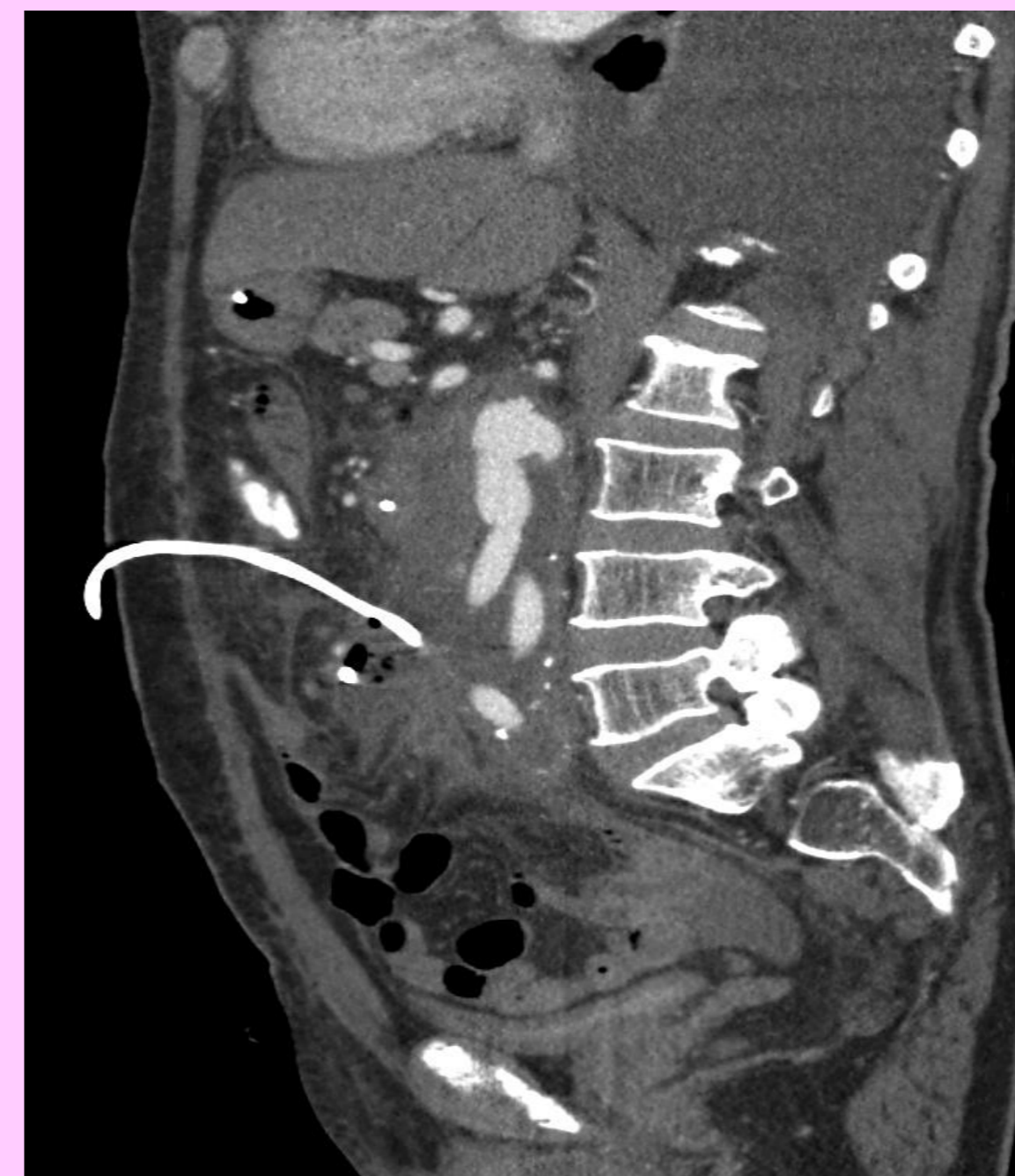


At recent follow-up

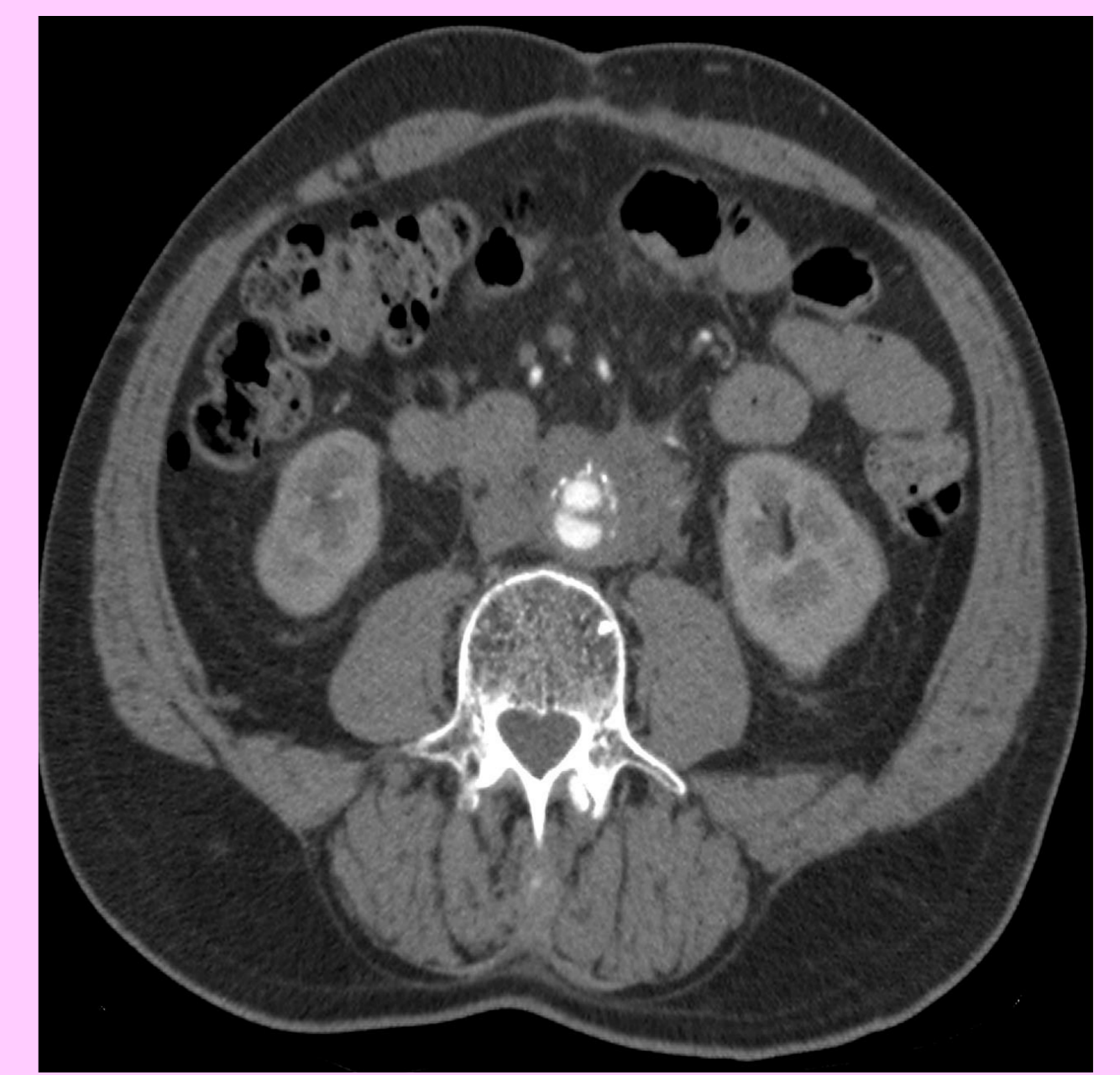
Patient 2



Pre-drain

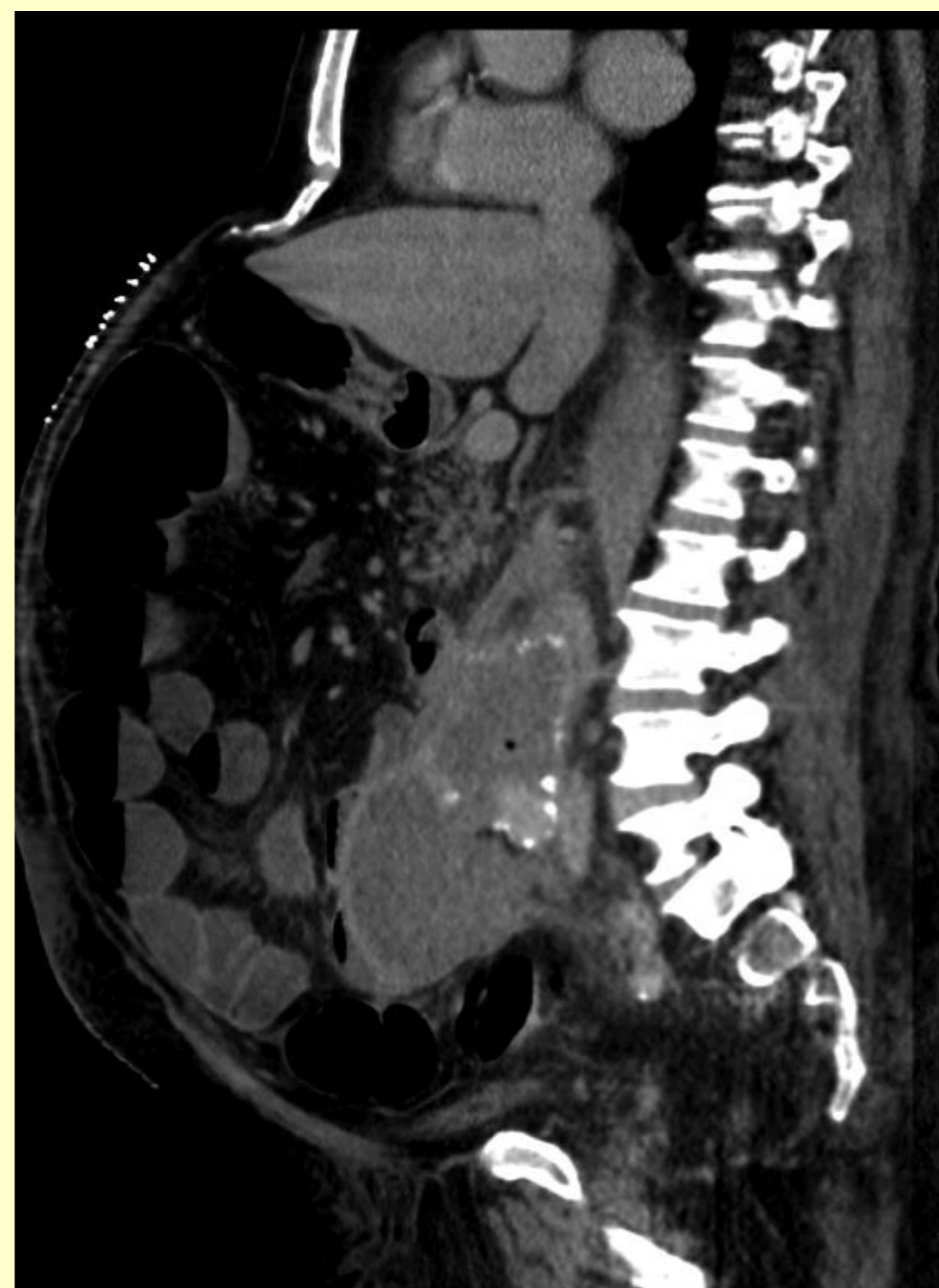


Drain in-situ



At recent follow-up

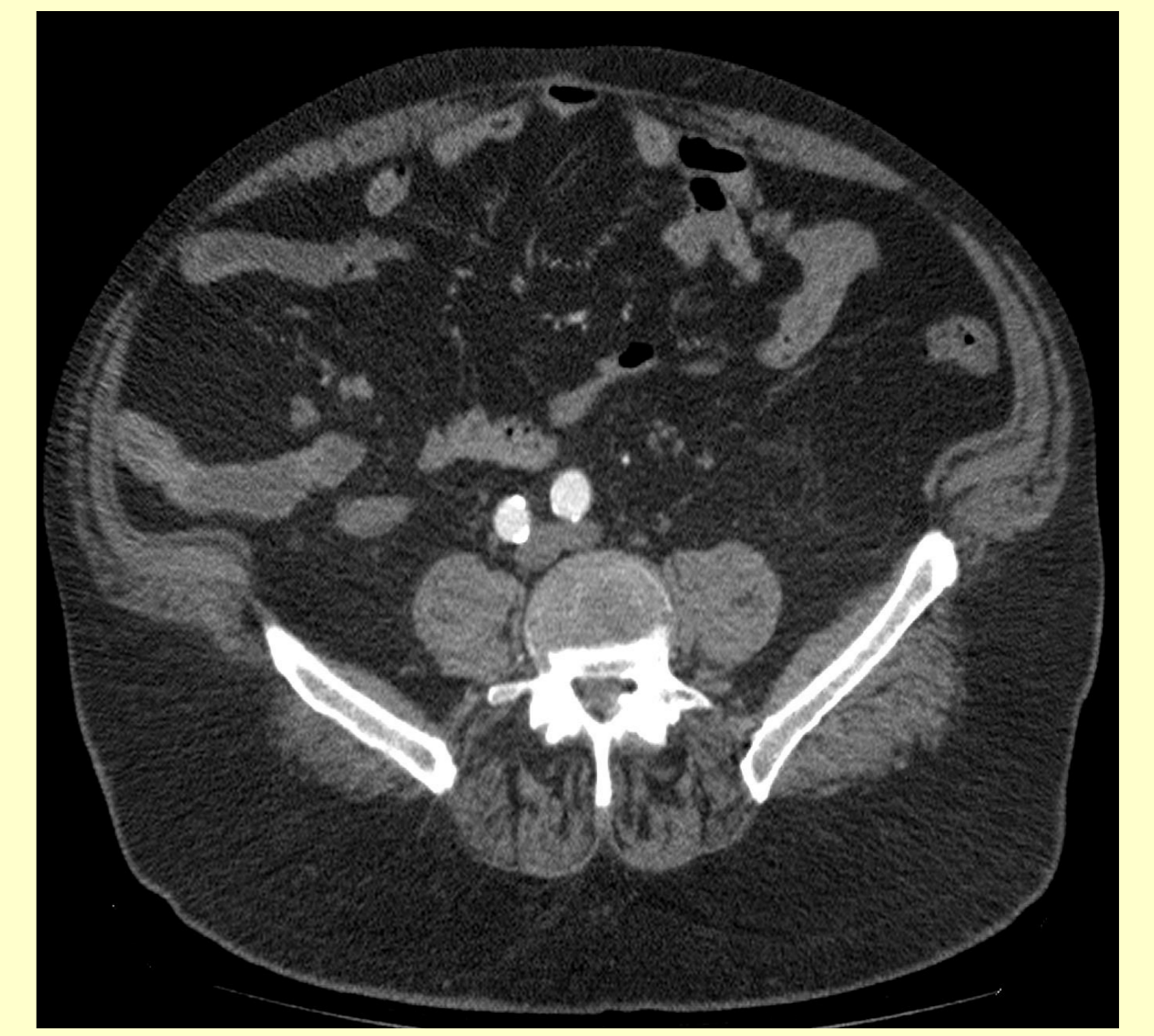
Patient 3



Pre-drain



Drain in-situ



At recent follow-up

Conclusion

Although mainstay of treatment of aortic graft infection remains surgical, our series suggest that percutaneous drainage of aortic graft infections combined with antibiotics may be a feasible treatment option in selected cases, with appropriate follow-up.