

Armando C Lobato, MD, PhD

São Paulo Vascular & Endovascular Surgery Institute (ICVE-SP)





Disclosure

Speaker name: Armando C. Lobato MD, PhD

□ I have the following potential conflicts of interest to report:

- Consulting
- Employment in industry
- Shareholder in a healthcare company
- Owner of a healthcare company
- Other(s)
- I do not have any potential conflict of interest

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Total Surgical
Hybrid
Branched Arch Endograft
Chimney/Sandwich Technique



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I Total Surgical
I Hybrid
I Branched Arch Endograft
I Chimney/Sandwich Technique



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10 Reasons

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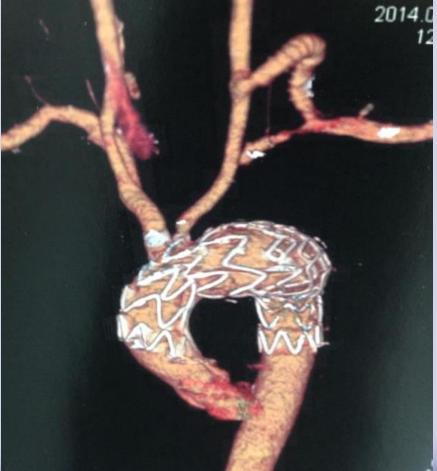


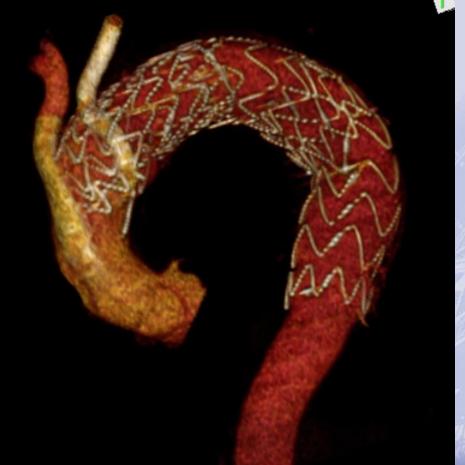
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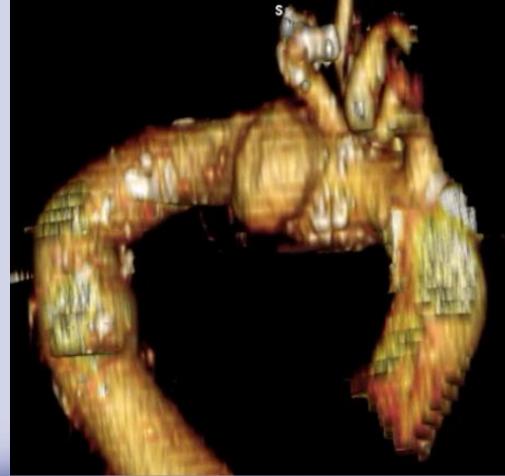


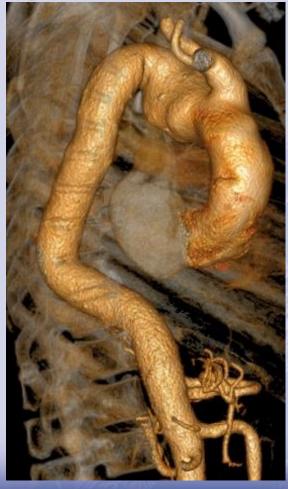


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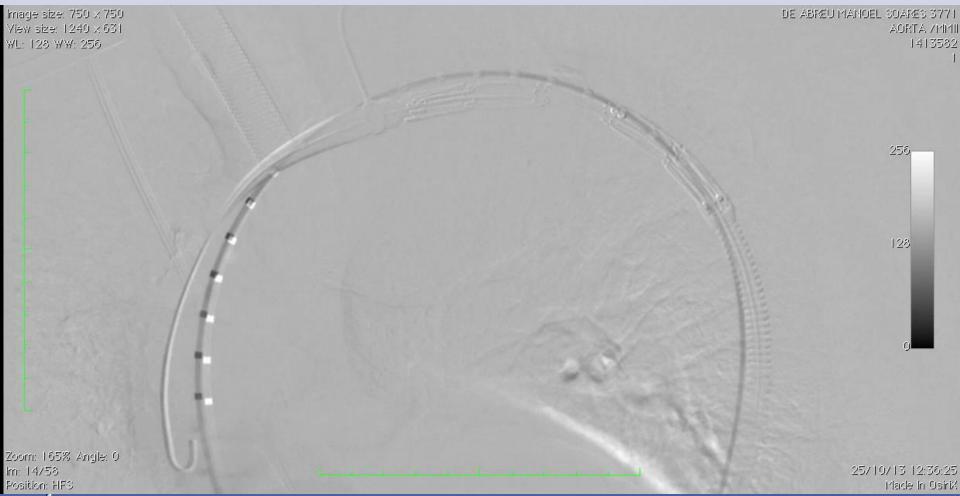
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- 1. Real World
- 2. 2 Thoracic ELG, 3 SECS, 1 LB, 3 Introducers,
 - 3 Guide wire & 1 pig tail
- 3. Use the ELG which the surgeon is familiarized
- 4. Can be used in an urgent setting
- 5. Easier than branched ELG

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- 6. Previous TEVAR or Open Repair
- 7. More patients can be treated
- 8. More Endovascular Specialist can perform it
- 9. Intervention time is shorter
- 10. Significant low cost (at least in Brazil)



- In our institution, a prospective study was
- conducted of all consecutive patients undergoing
- endovascular repair of complex aortic arch
- aneurysms (zone 0) from October 2010 to May 2014,
- 11 patients (10 men and 1 woman; mean age, 60.4 ±
- 10.1 years) with aortic arch aneurysm underwent
- **TEAAR with the ST.**

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- **Primary endpoints included:**
 - **I** 30-day and 1-year related mortality
 - **D** Endoleak
 - I Supra-aortic trunk (SAT) patency
 IAneurysm sac (AS) evolution
 I Neurologic complication rate

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- The Mean Follow-up Period: 9.4 ± 8.3 months
- Primary SAT Patency Rate: 91% (3/33)
- 30-Day Endoleak Rate (18%):
 - One type I: It was successfully managed during the procedure with the deployment of a thoracic endograft.
 - One type II: It sealed spontaneously after a 30-day CT
 - scan.

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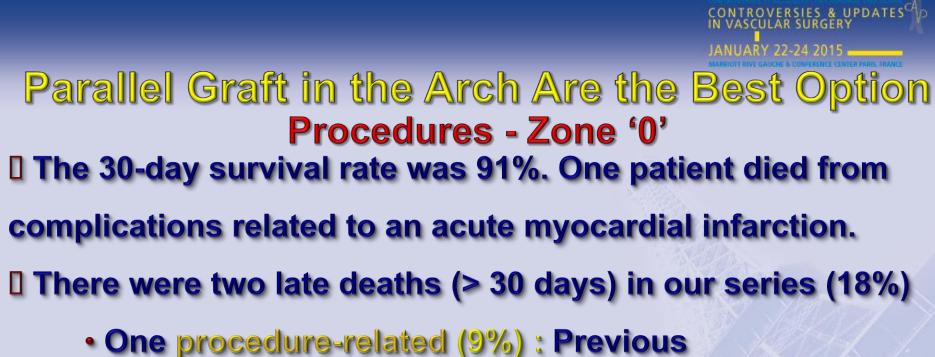
Late Endoleak Rate (9%):

 One type III. It was effectively treated with a second thoracic stent graft deployed after three months.
 Reappear in 4 months



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- aortoesophageal fistula died from pulmonary complications 4 months postprocedure.
- One non-procedure-related (9%): Concomitant thoraco abdominal aortic aneurysms; Died during elective thoracioabdominal aneurysm repair after 6 months.

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- After 6-month FU: Complete AS exclusion 91%
- I No Conversion Rate
- I No Spinal Cord Ischemia Rate
- **Stroke/TIA Rate**
 - Minor Stroke (9%): Complete recovered in 2 days)



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Conclusions

✓ TAAER with the ST is an effective technique with satisfactory early and midterm results.

✓ This technique could be an attractive alternative to conventional total arch replacement.

I More experience with the method is warranted.



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CICE2015

April 15-18, 2015 Sheraton São Paulo WTC Hotel, São Paulo, Brazil www.cice.com.br