AORTIC LIVE 2017 October 23–24, 2017 Hamburg, Germany

OPEN THORACO-ABDOMINAL REPAIR: BYPASS TECHNIQUES

L. Bertoglio, R. Chiesa

Vascular Surgery, “Vita-Salute” - San Raffaele University

Scientific Institute Ospedale San Raffaele, Milan – Italy

Disclosure

Speaker name:

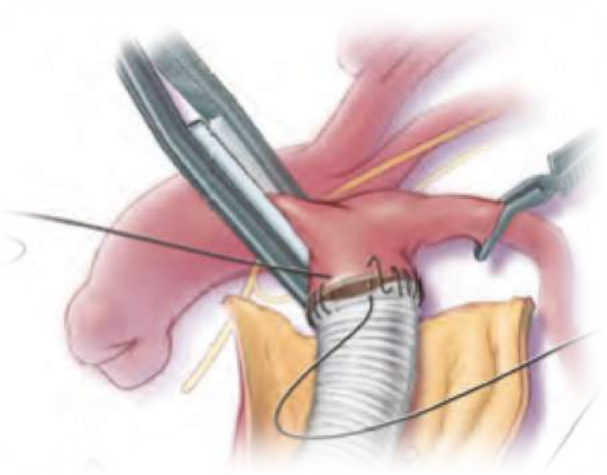
.....

I have the following potential conflicts of interest to report:

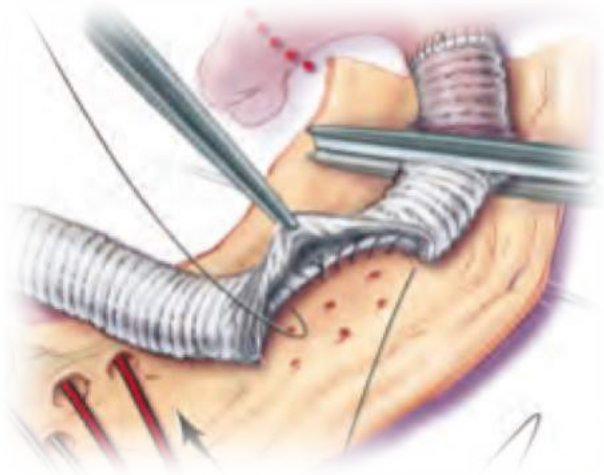
- ☐ Consulting
- ☐ Employment in industry
- ☐ Stockholder of a healthcare company
- ☐ Owner of a healthcare company
- ☐ Other(s)

- ☐ I do not have any potential conflict of interest

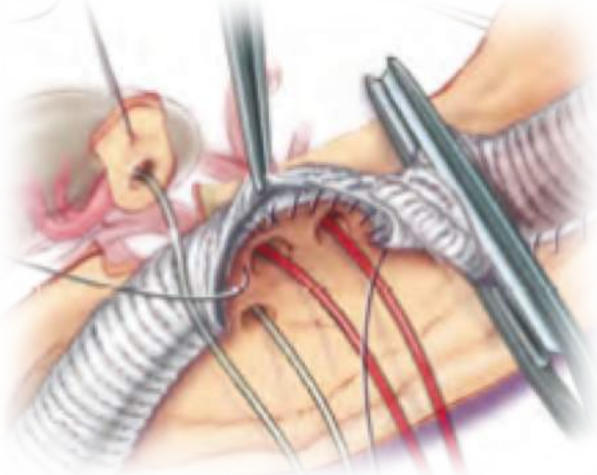
TAAA open repair steps



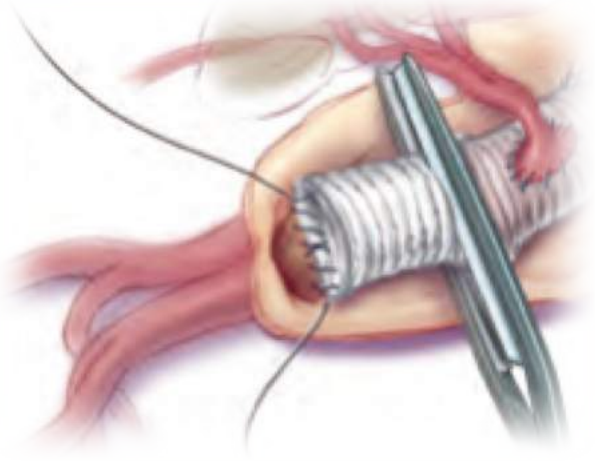
1. Proximal anastomosis



2. Intercostal a. reimplant



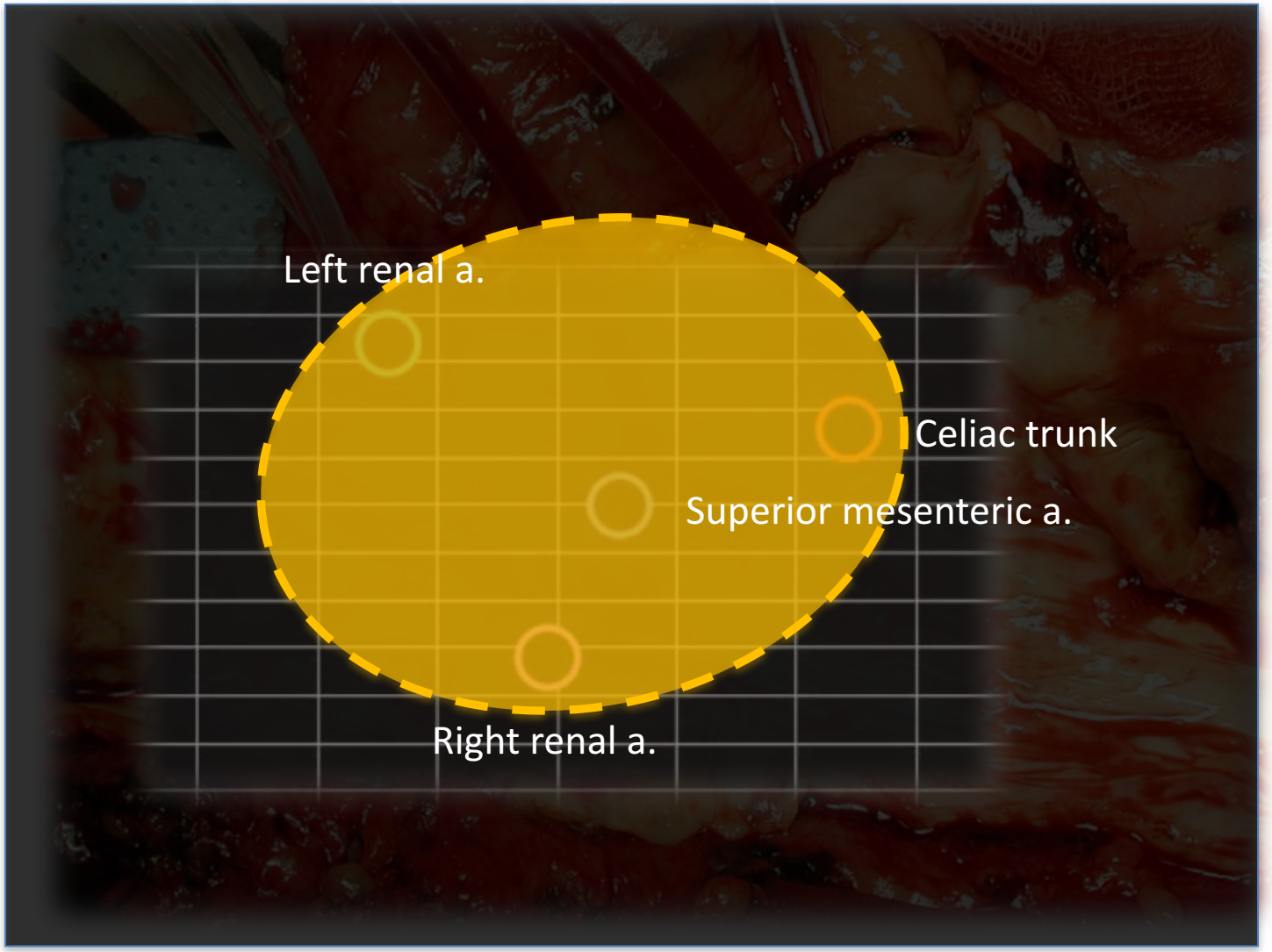
3. Visceral a. reimplant



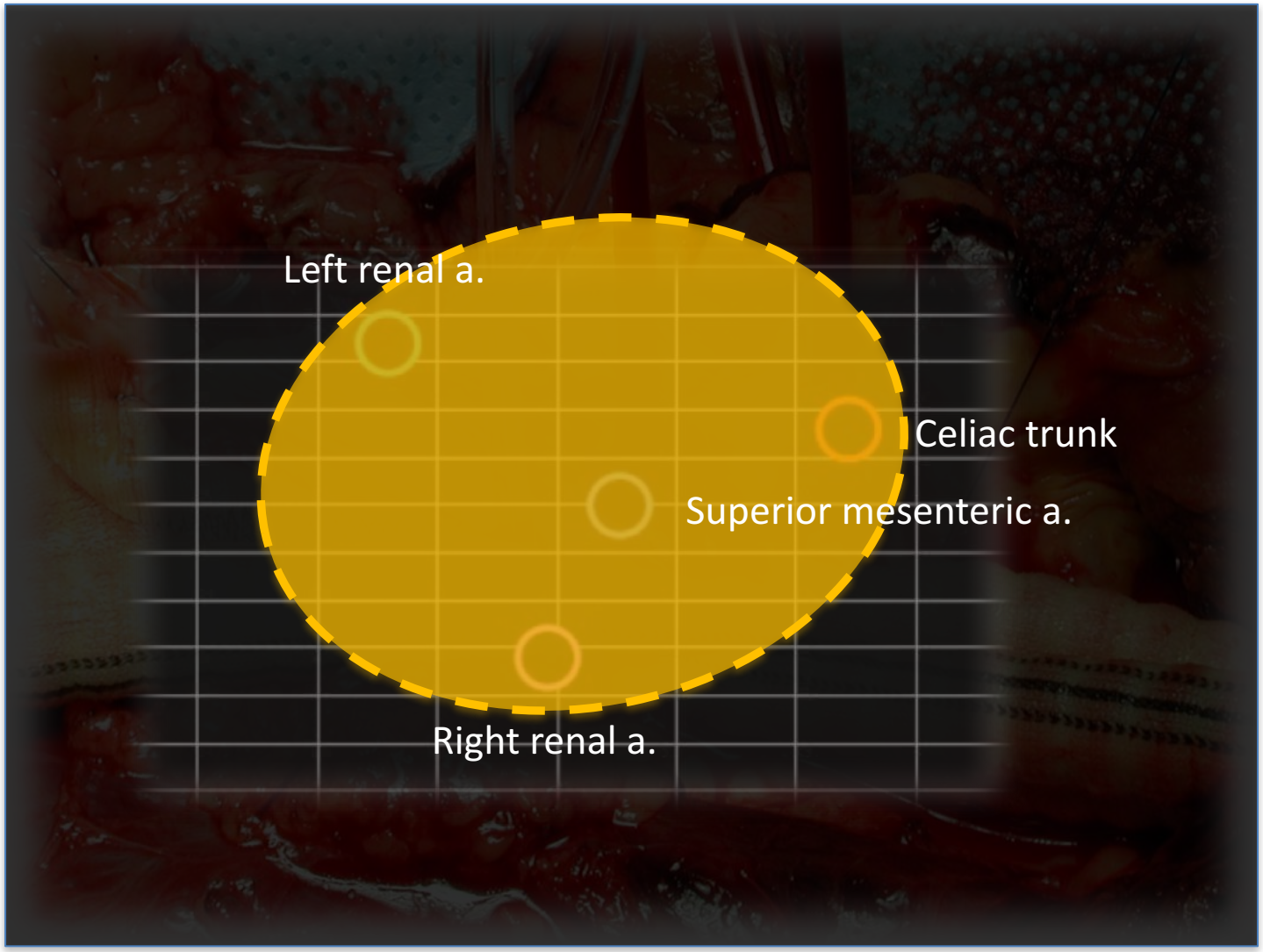
4. Distal anastomosis

Coselli JS. In: Thoraco-Abdominal Aorta: Surgical and Anesthetic Management. Springer edition 2010

Visceral aortic patch

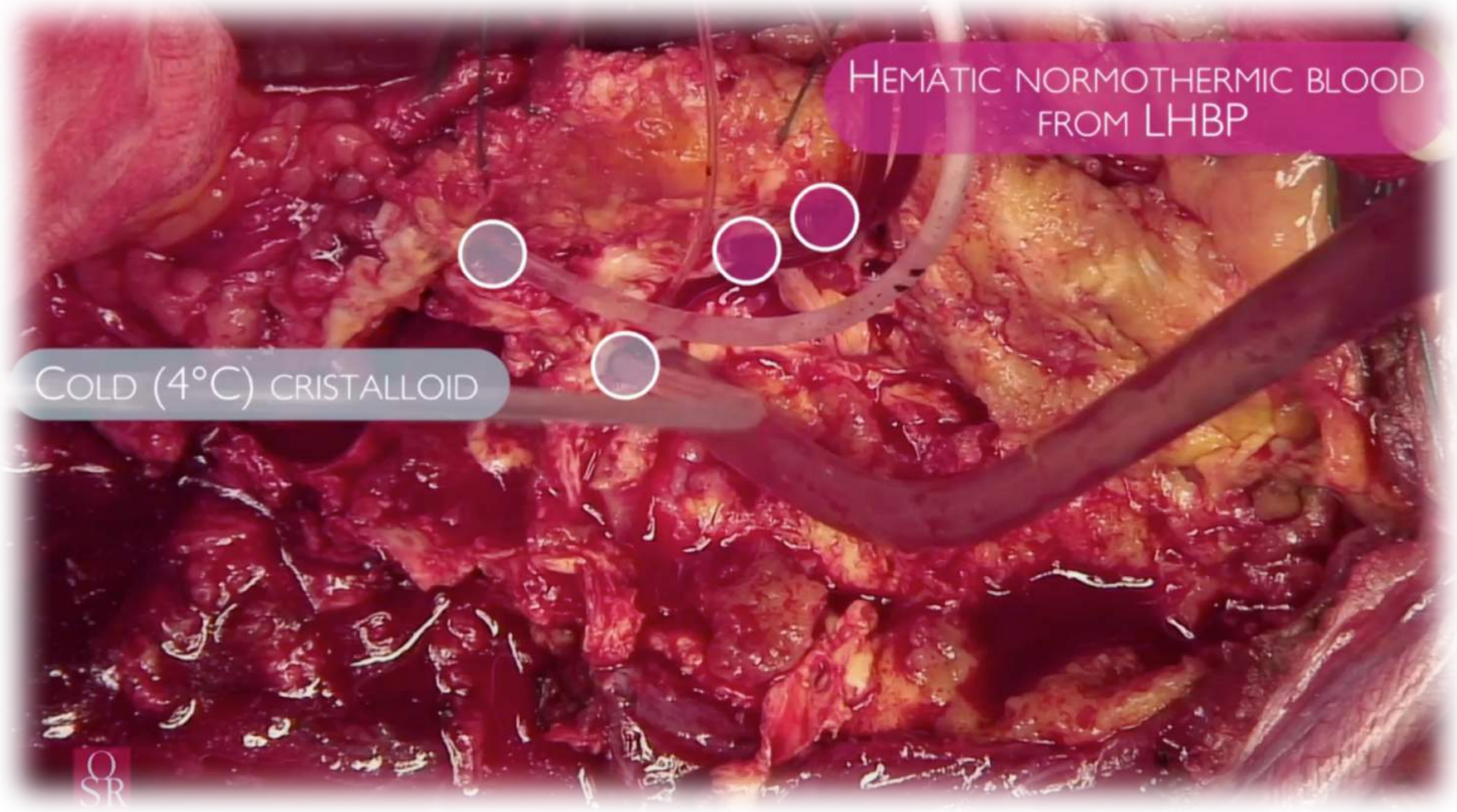


Inclusion technique



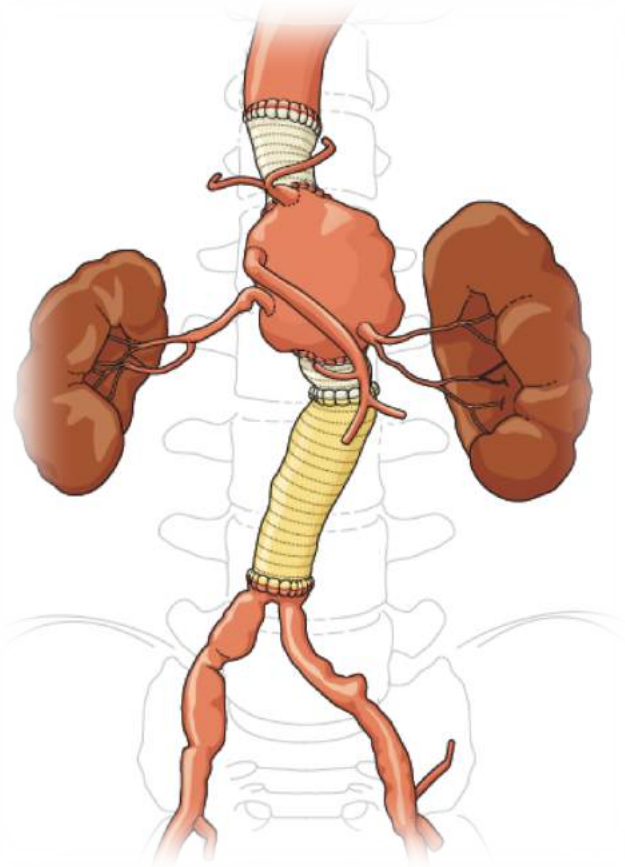
Crawford ES et al. Ann Surg 1974

Inclusion technique



Visceral aortic patch aneurysms formation

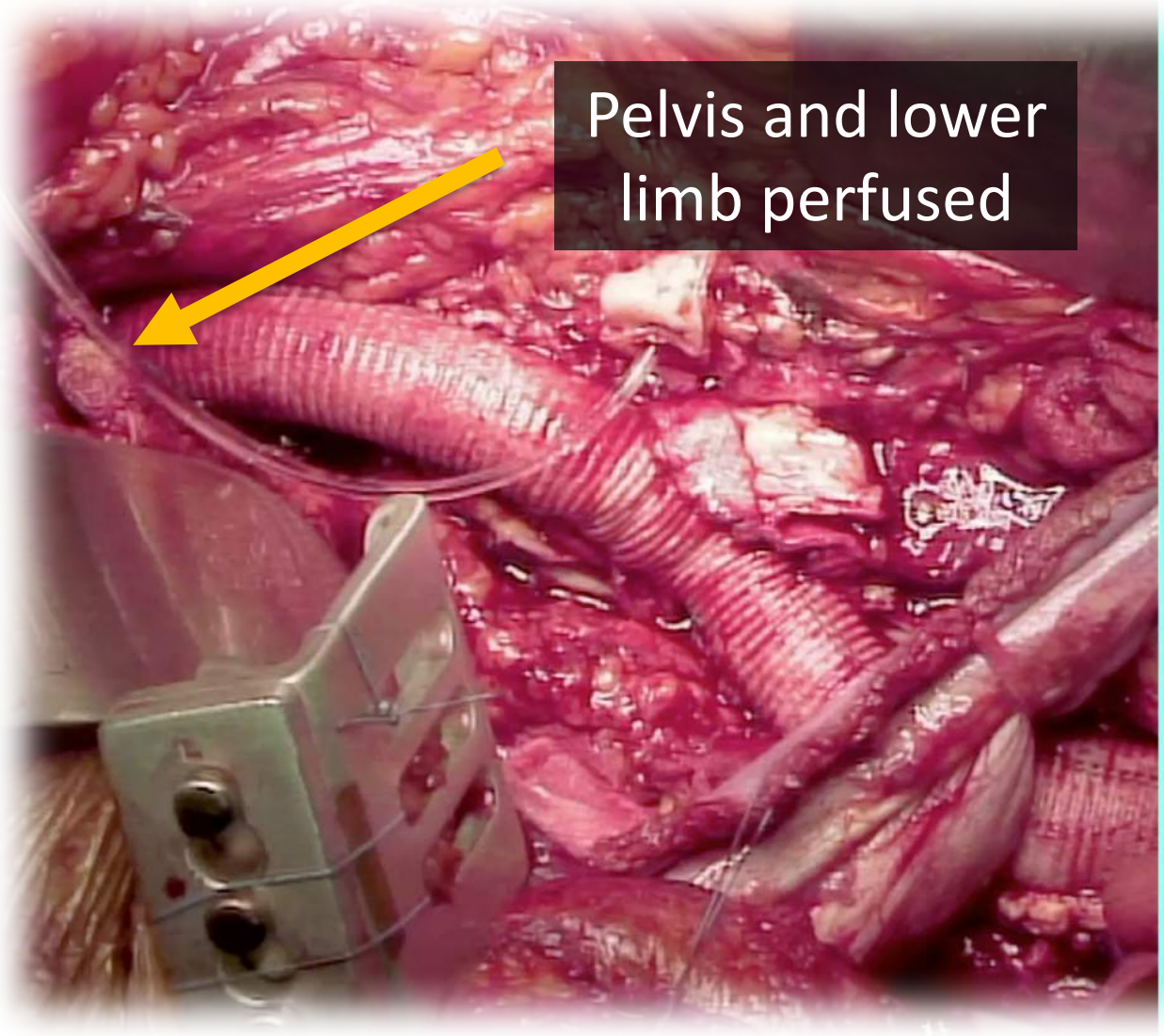
	Period	TAAAs	Prevalence
Johns Hopkins	‘92- ‘00	107	7.7%
Baylor College	‘86 – ‘14	3309	1.1%
San Raffaele	‘93 – ‘16	872	2.2%



Bertoglio L,…., Chiesa R et al. J Vasc Surg 2017 [In Press]

3-vessel visceral aortic pacth + left renal artery (LRA)

LRA reimplant: suturless anastomosis (1st choice)

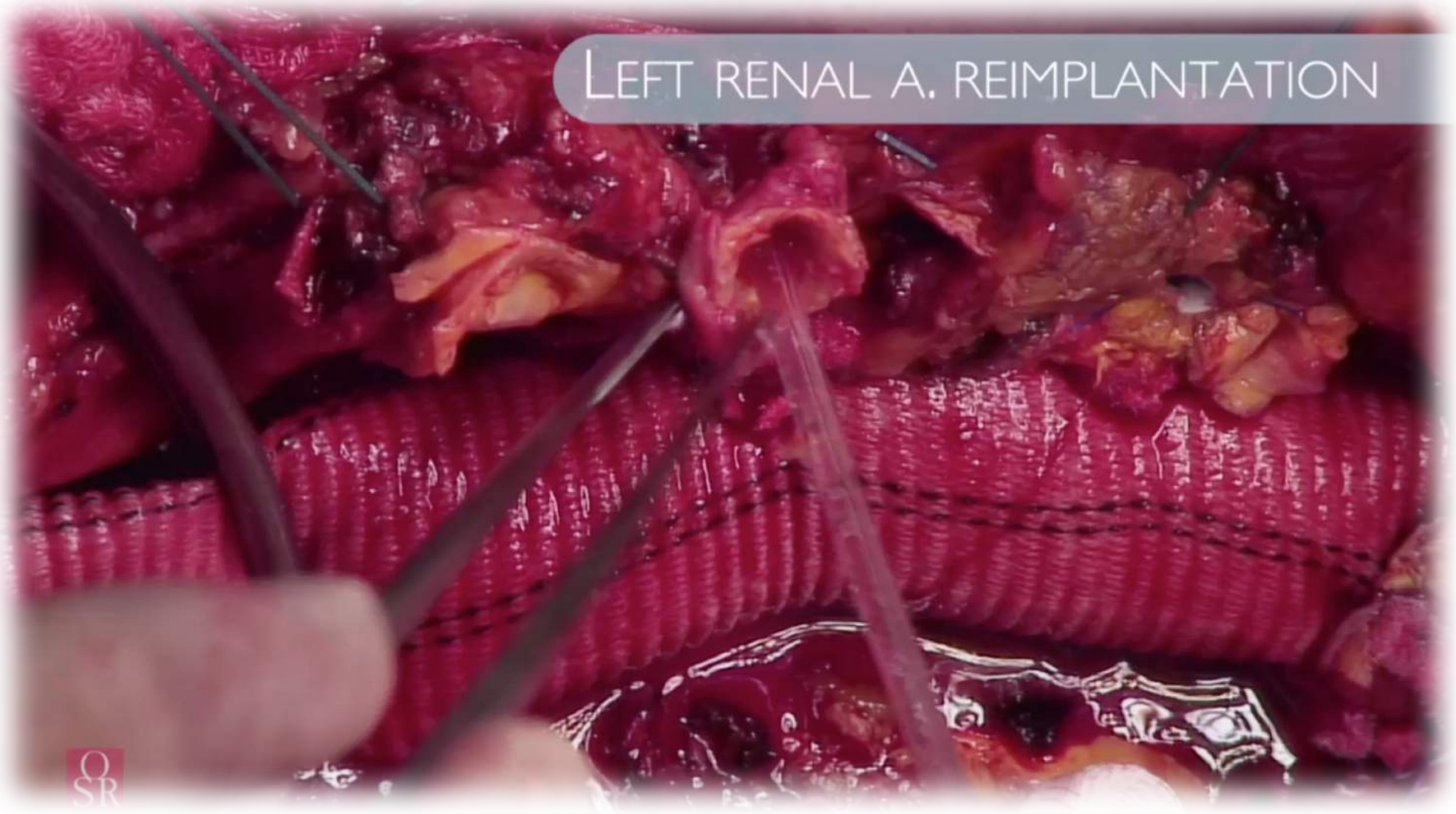


LRA selective perfusion with Custodiol™

Suturless anastomosis limitation

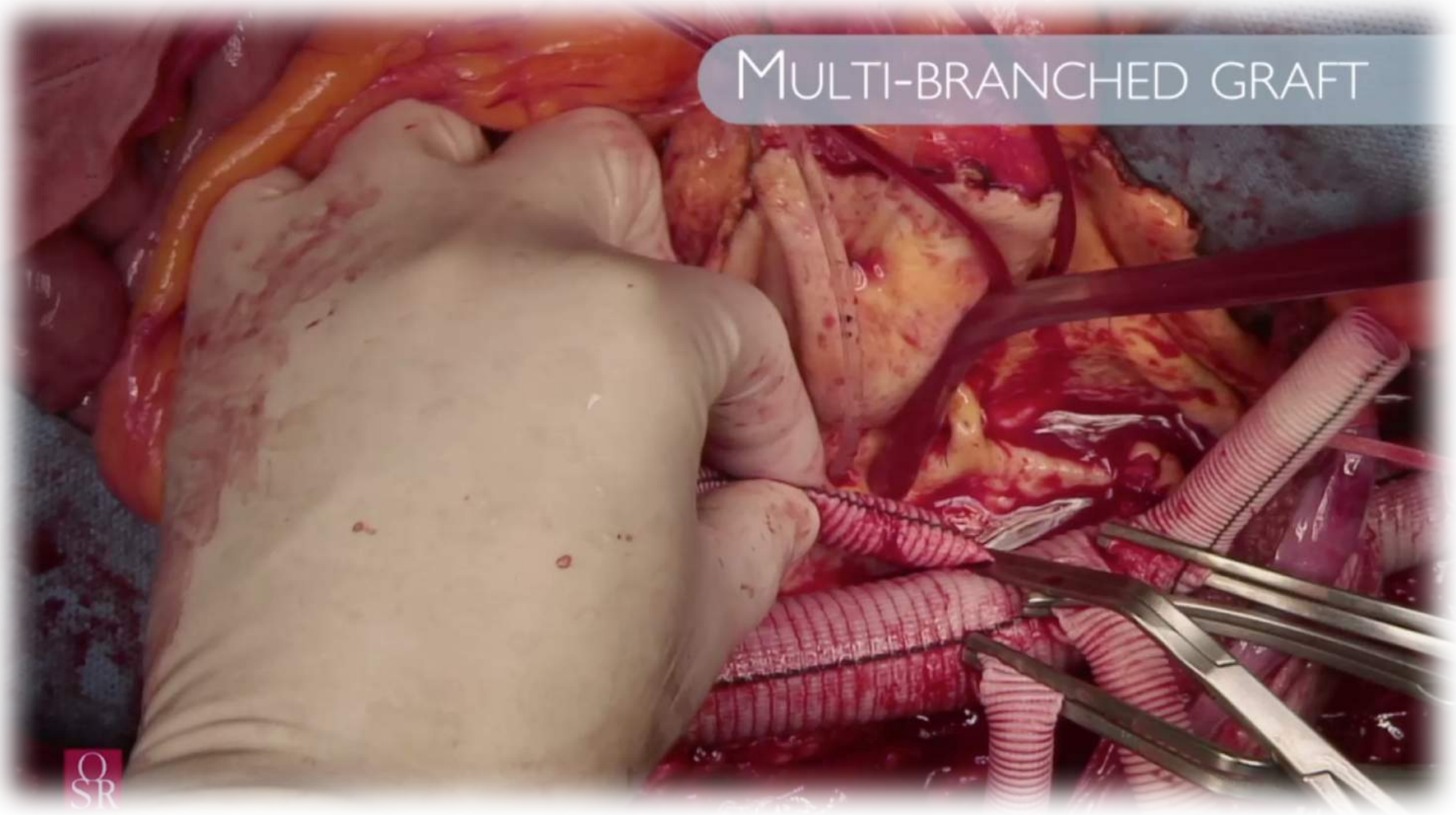
- Small vessels diameter (smallest graft 6 mm)
- Short vessel trunk or early bifurcations

LRA reimplant: graft interposition (2nd option)



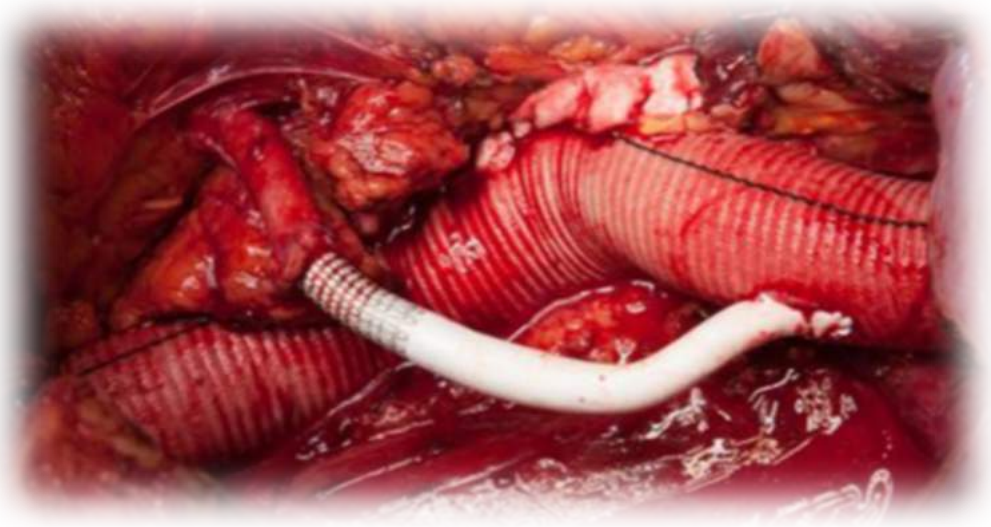
Multibranched separate reimplant

Multi-branched separate reimplant



Conclusions

3-vessel patch + LRA reimplant



Routinary technique

Multi-branched separate reimplant

Connective tissue disorders
Young patients
Distant vessel origin
Immediate Loss of MEPs during repair