

DESCENDING AORTA – OPEN REPAIR

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Chairman & Chief Surgeon

Institute of Cardiac and Advanced Aortic Disorders

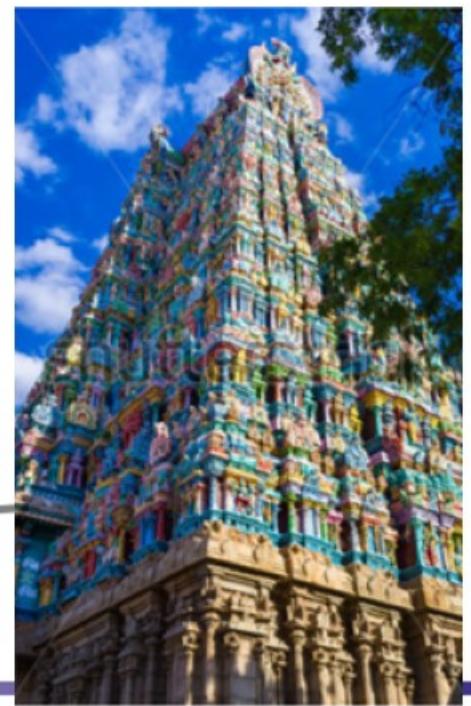
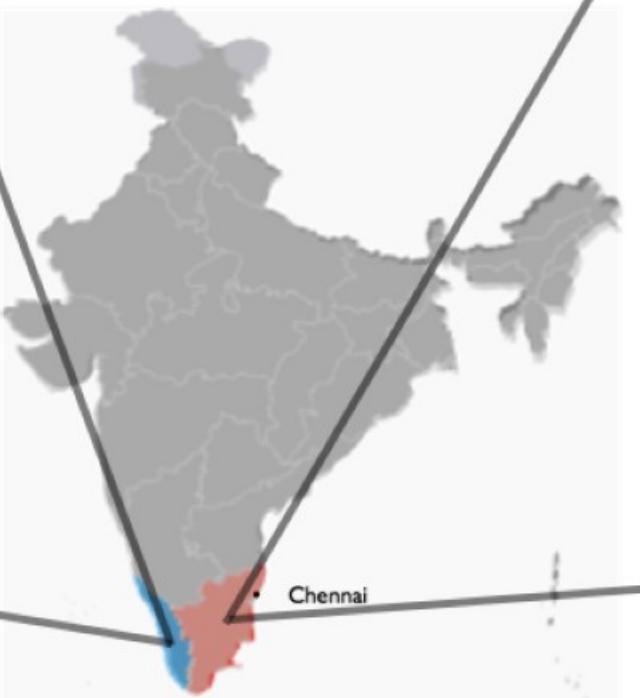
SIMS Hospitals, Chennai, India





AORTIC
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29–30 October 2018
Congress Center Essen, Germany



Disclosure

Speaker name:

Dr. Bashi V Velayudhan

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)

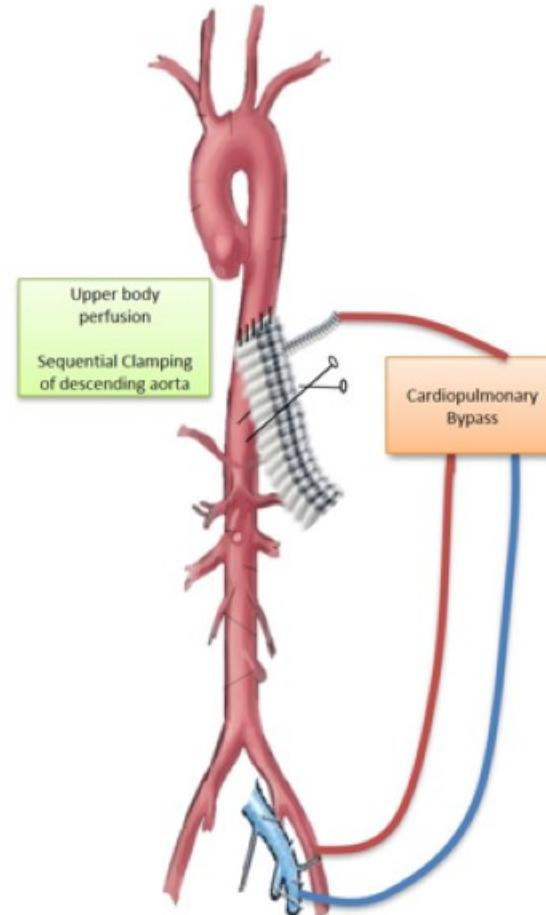
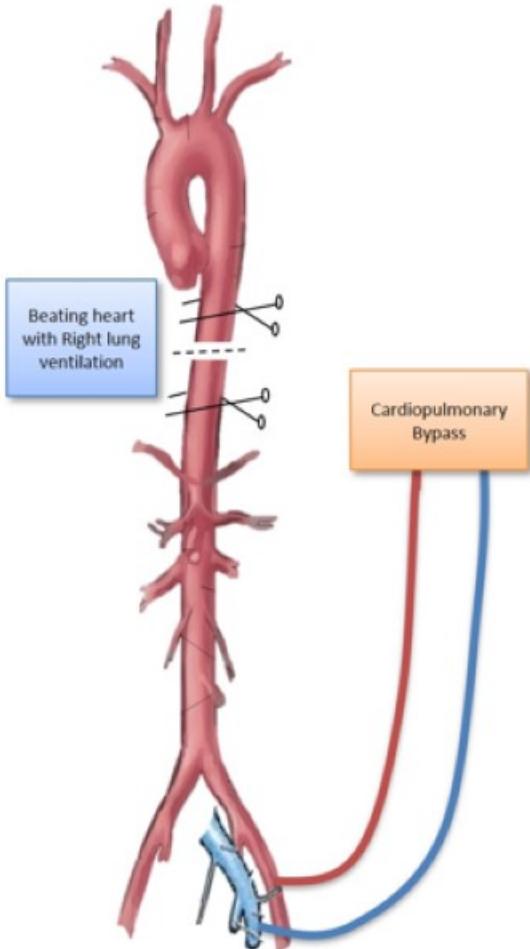
- I do not have any potential conflict of interest

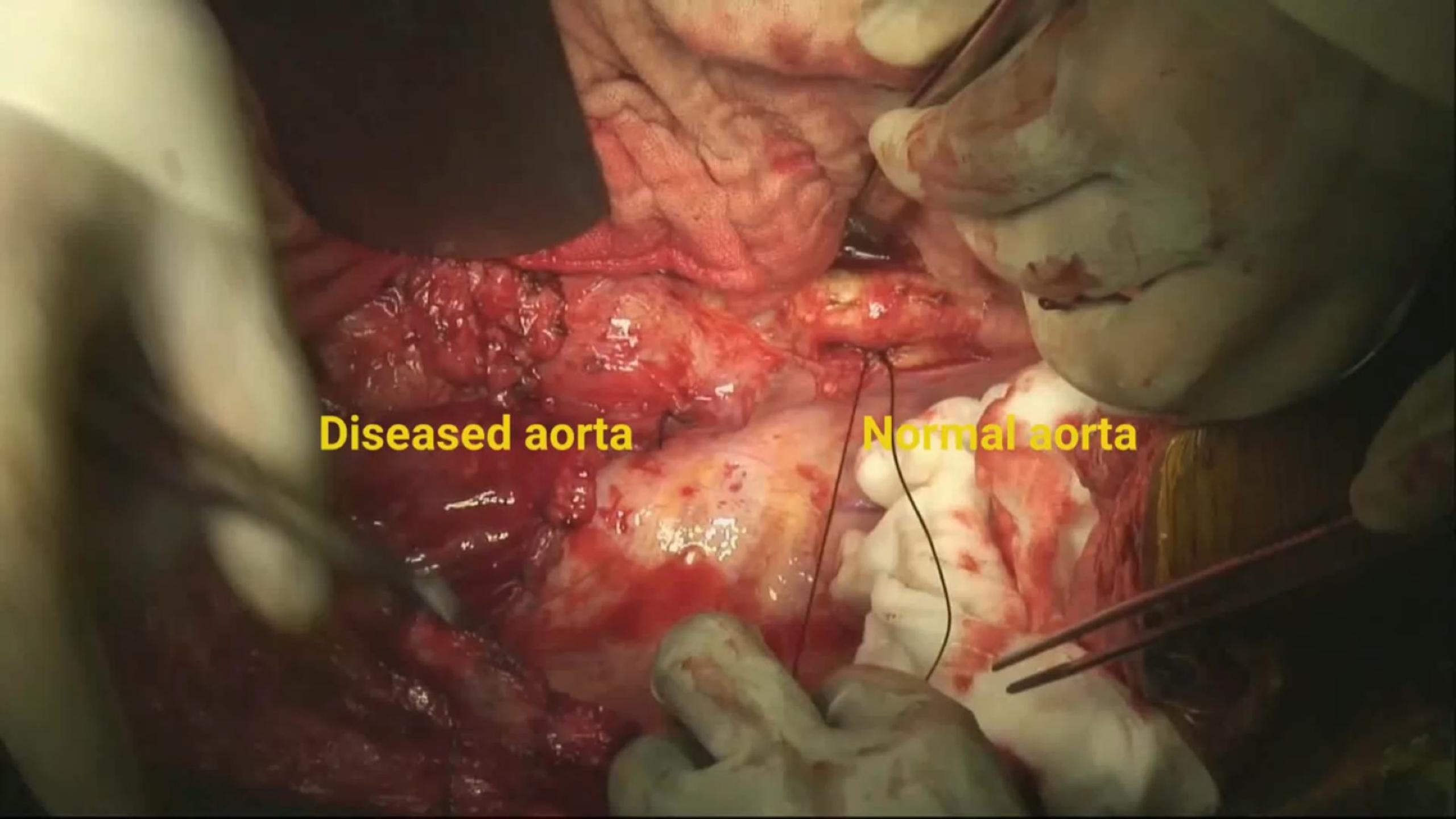
Aortoarteritis - TAAA



- 22 yr old female
- Multiple fusiform aneurysm of the aorta from mid thoracic level to bifurcation
- Occluded right renal and inferior mesenteric artery
- Thoracoabdominal repair

Aortoarteritis - TAAA

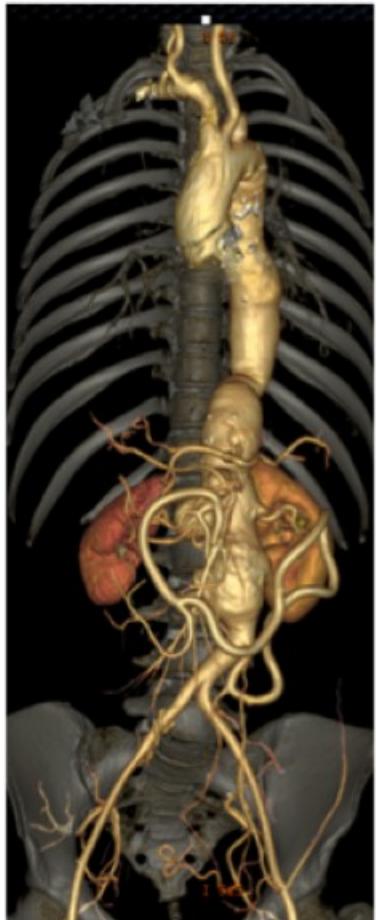




Diseased aorta

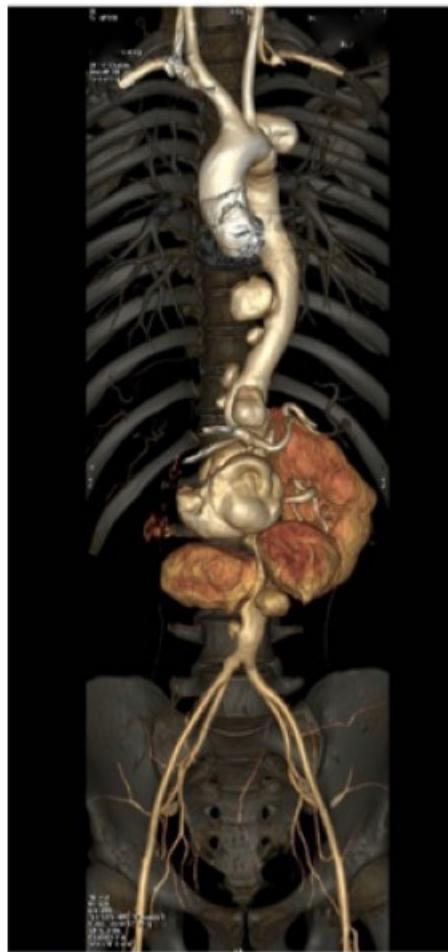
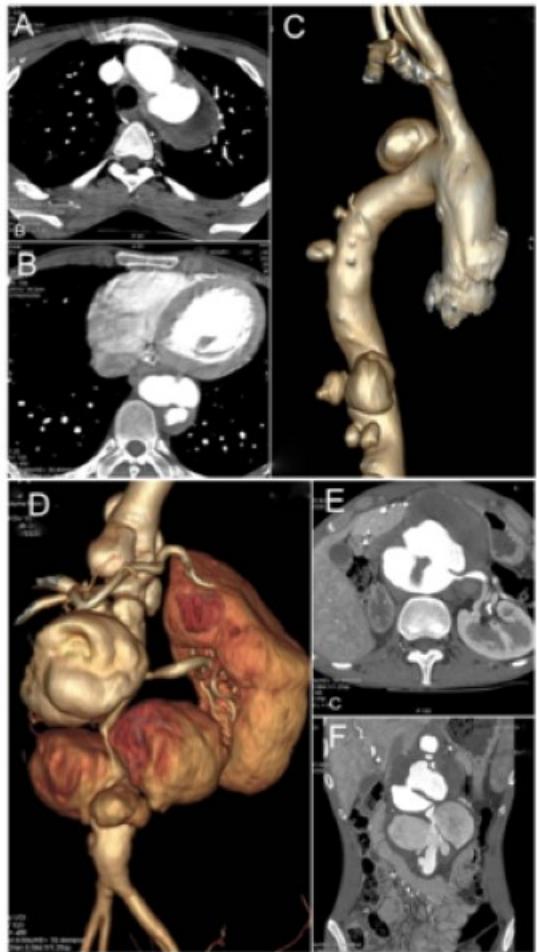
Normal aorta

Aortoarteritis - TAAA



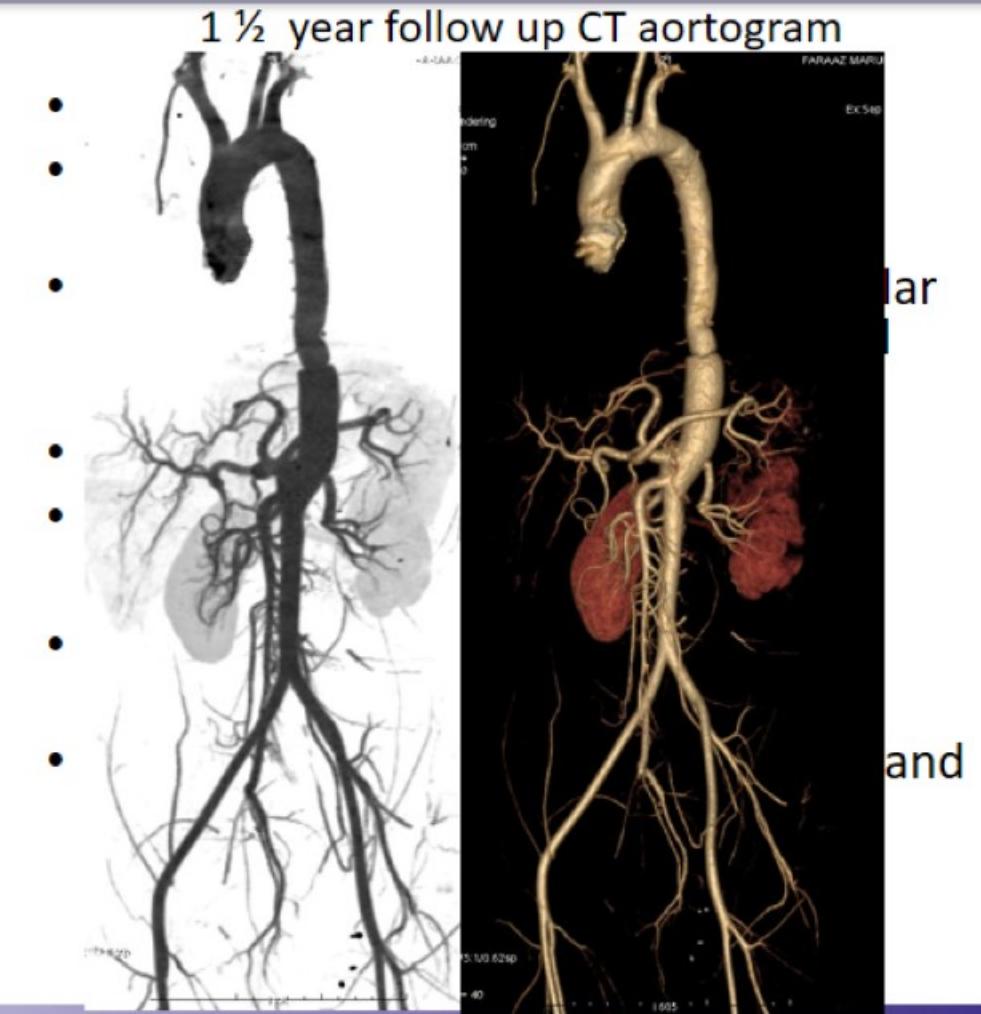
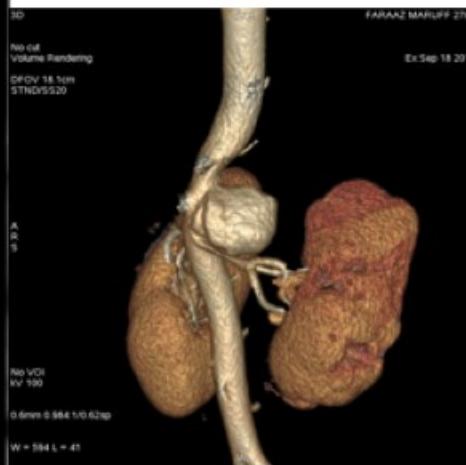
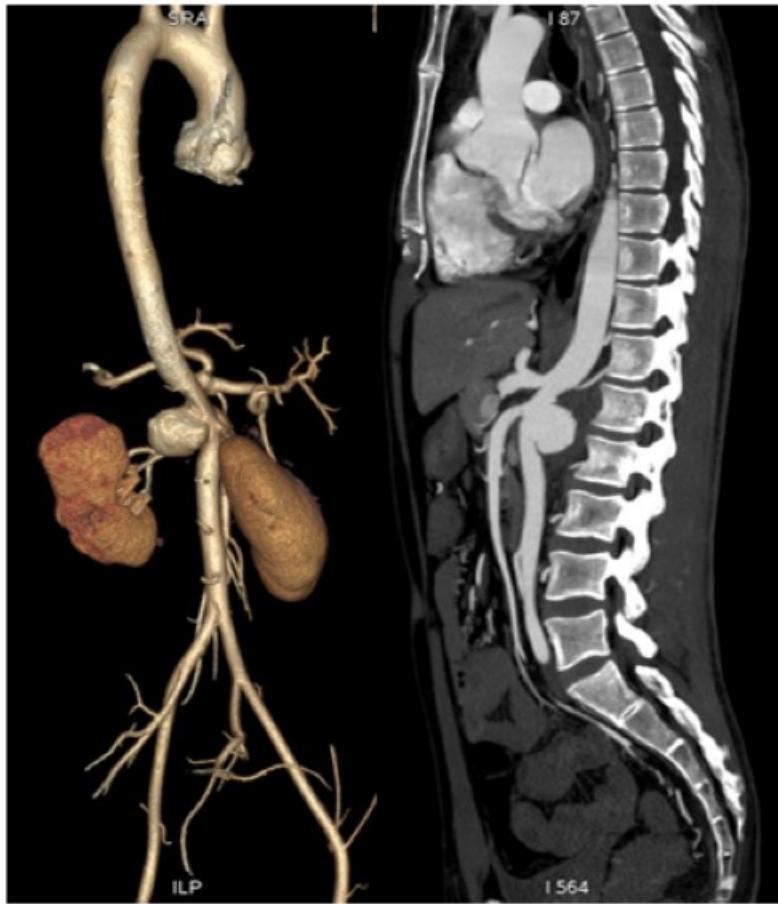
- 25 years old male
 - Blood pressure 160/100 mmHg
 - Ocular fundus changes
 - Superior mesenteric artery, renal artery, common iliac artery
 - Pseudoaneurysm of the left renal artery
 - Thoracic endovascular abdominal aortic repair
-
- A 3D anatomical model of the abdominal aorta and its major branches. The renal arteries are highlighted in red, showing their origin from the posterior aspect of the abdominal aorta. The model is set against a dark background.

Tuberculous Aortoarteritis



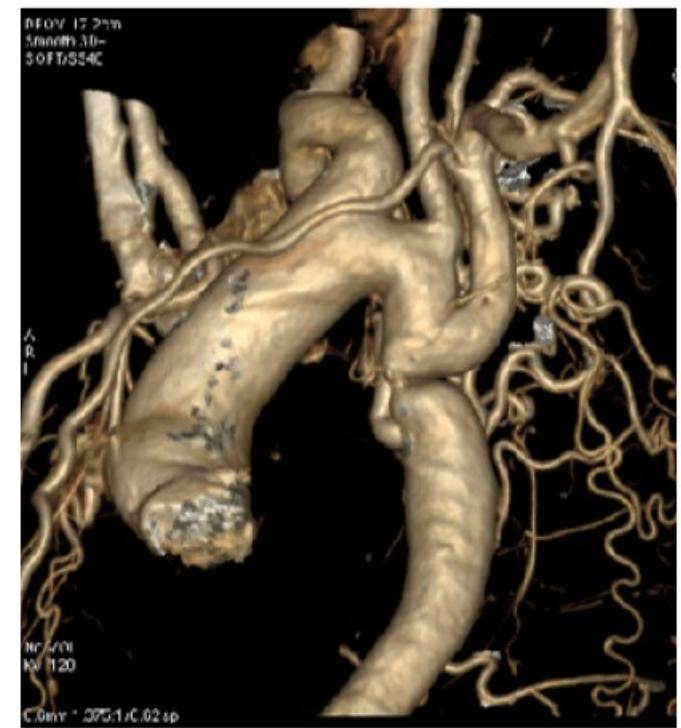
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Inflammatory aneurysm of descending aorta



Coarctation of aorta – Case 1

- 28 yr female
- Dyspnoea on exertion x 3 months
- Hypertensive on two Anti-HTN drugs
- Tight COA



A close-up, low-light photograph of a surgeon's gloved hands performing surgery on a patient's chest. The surgeon is using a scalpel and a blue-tipped hemostat to work on the skin and underlying tissue. The patient's skin is a mottled brown color. The background is dark, showing the surgeon's scrubbed arms.

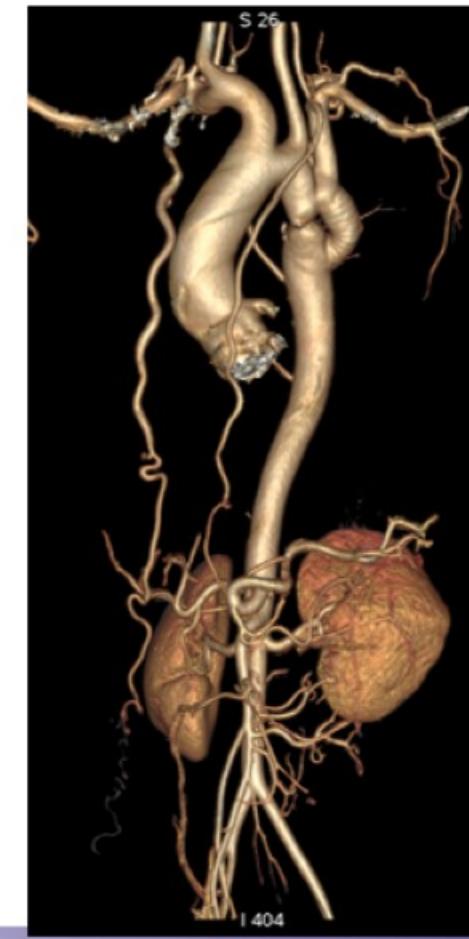
LEFT THORACOTOMY

Marked regression of Collaterals within 1 week after surgery

Preop CT aortogram

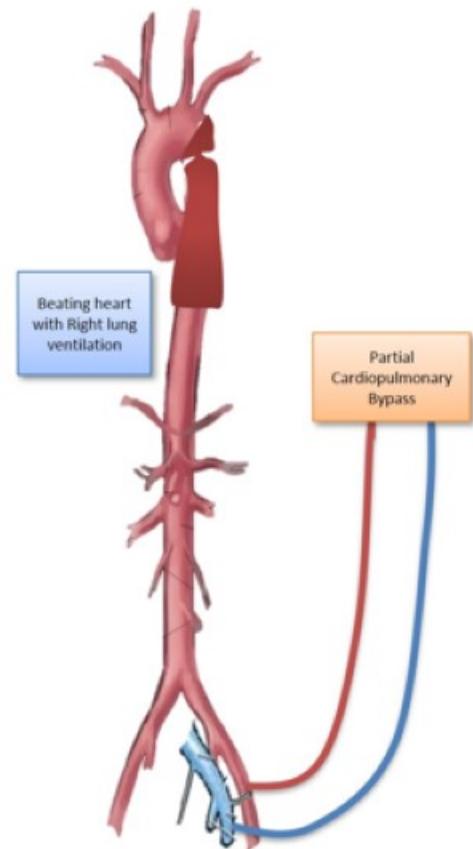


1 week postop CT aortogram



Coarctation of aorta – Case 2

- 36 yr male
- Dyspnoea on exertion x 3 months
- Back pain x 2 months
- COA with aneurysm (5 cm x 15cm) of the descending thoracic aorta



An intraoperative photograph showing a close-up view of a patient's ribcage. The skin and underlying tissue have been surgically exposed, revealing the bone structure of the ribs. A blue surgical retractor or suture is visible along the lower edge of the ribcage, providing lateral support and exposure for the procedure.

Lateral thoractomy through 3rd intercostal space
Additional exposure through the 6th intercostal space

Coarctation of aorta – pre and post op CT scan

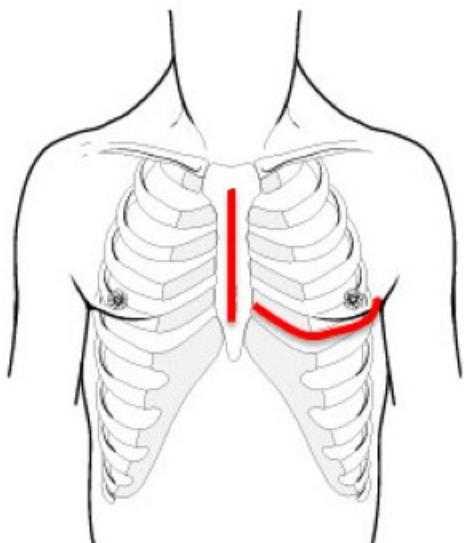


Single stage retrograde DTA repair

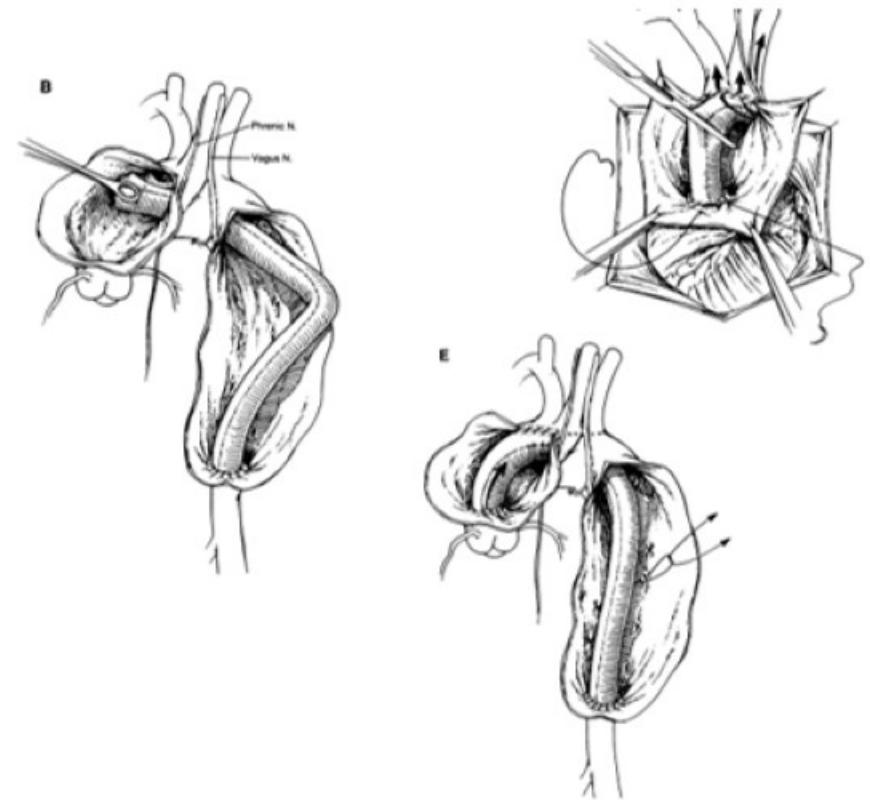
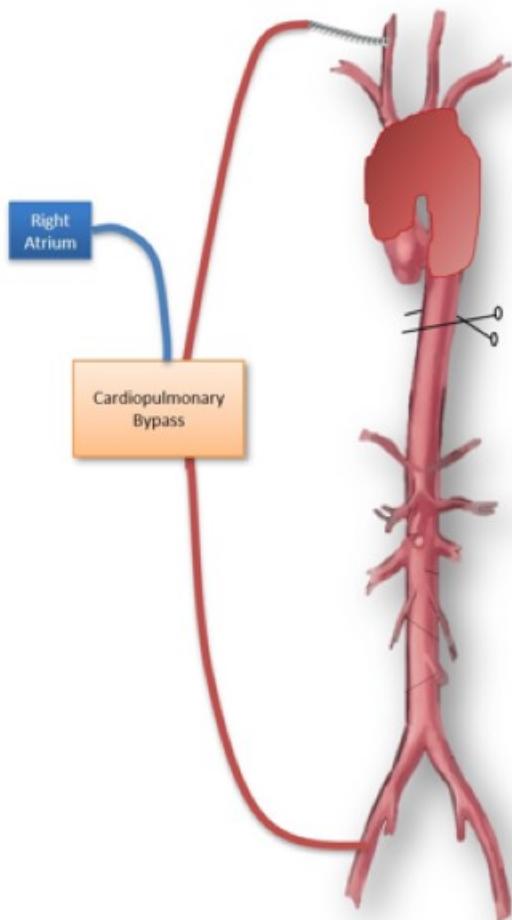
- 33 year male
- Hoarseness of voice
- Intermittent low grade fever
- Anti-TB treatment x 3 months
- Aneurysm involving the ascending, arch & DTA

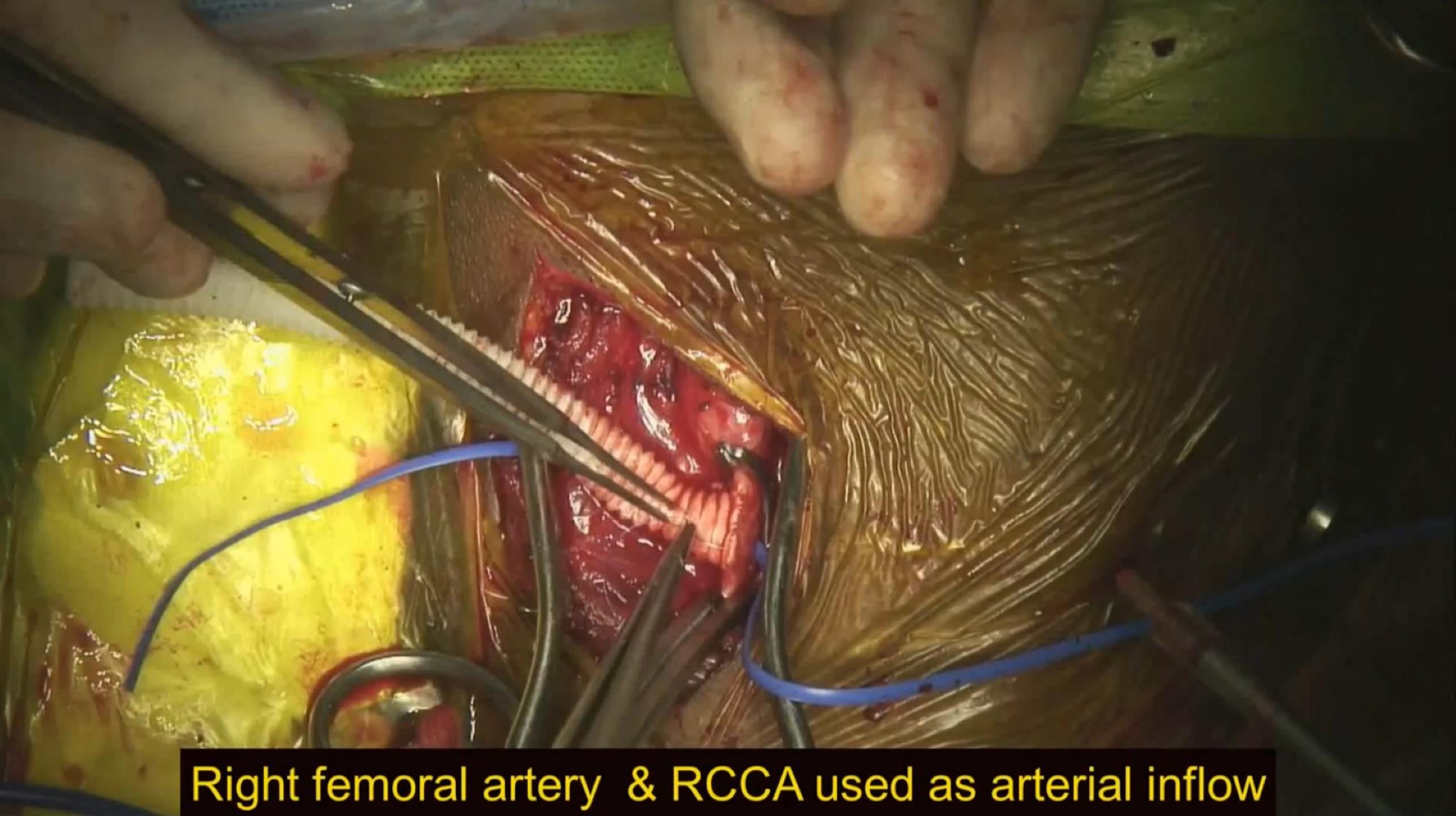


Operative strategy



OTS16-01





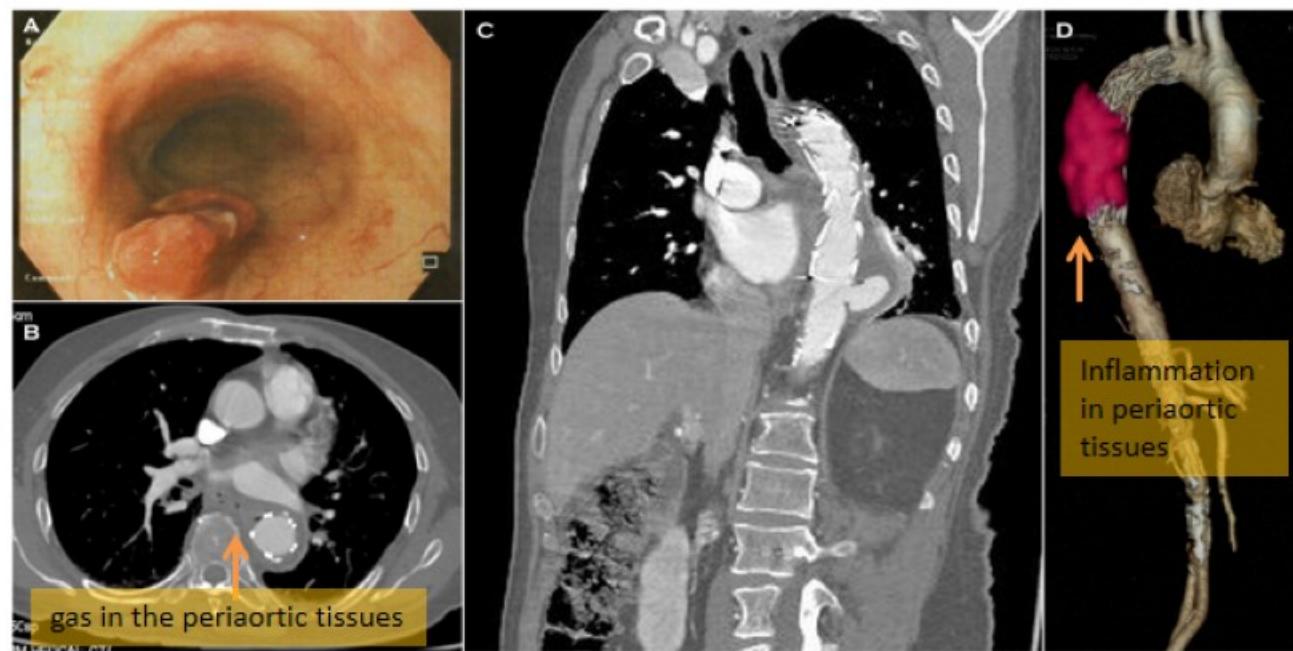
Right femoral artery & RCCA used as arterial inflow

Single stage retrograde DTA repair



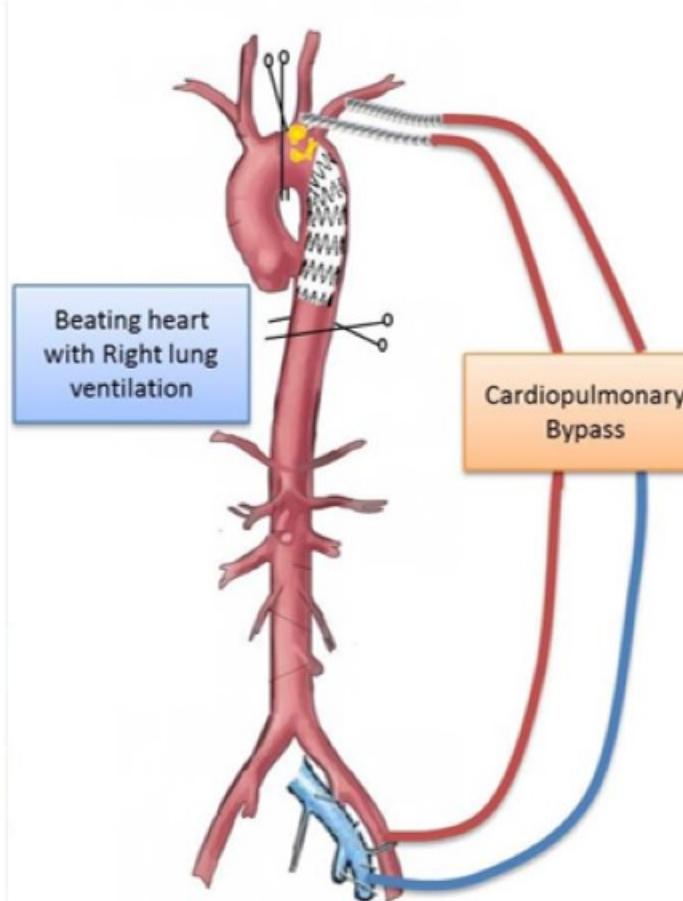
Aortoesophageal fistulae following TEVAR

- 73 yr, male
- Haematemesis & malena x 2 weeks with Hb of 6 g%
- 11 months ago underwent TEVAR to DTA
- CABG 11 years ago with functioning LIMA
- Mid esophageal fistulae in OGD
- Pseudoaneurysm distal to the endograft

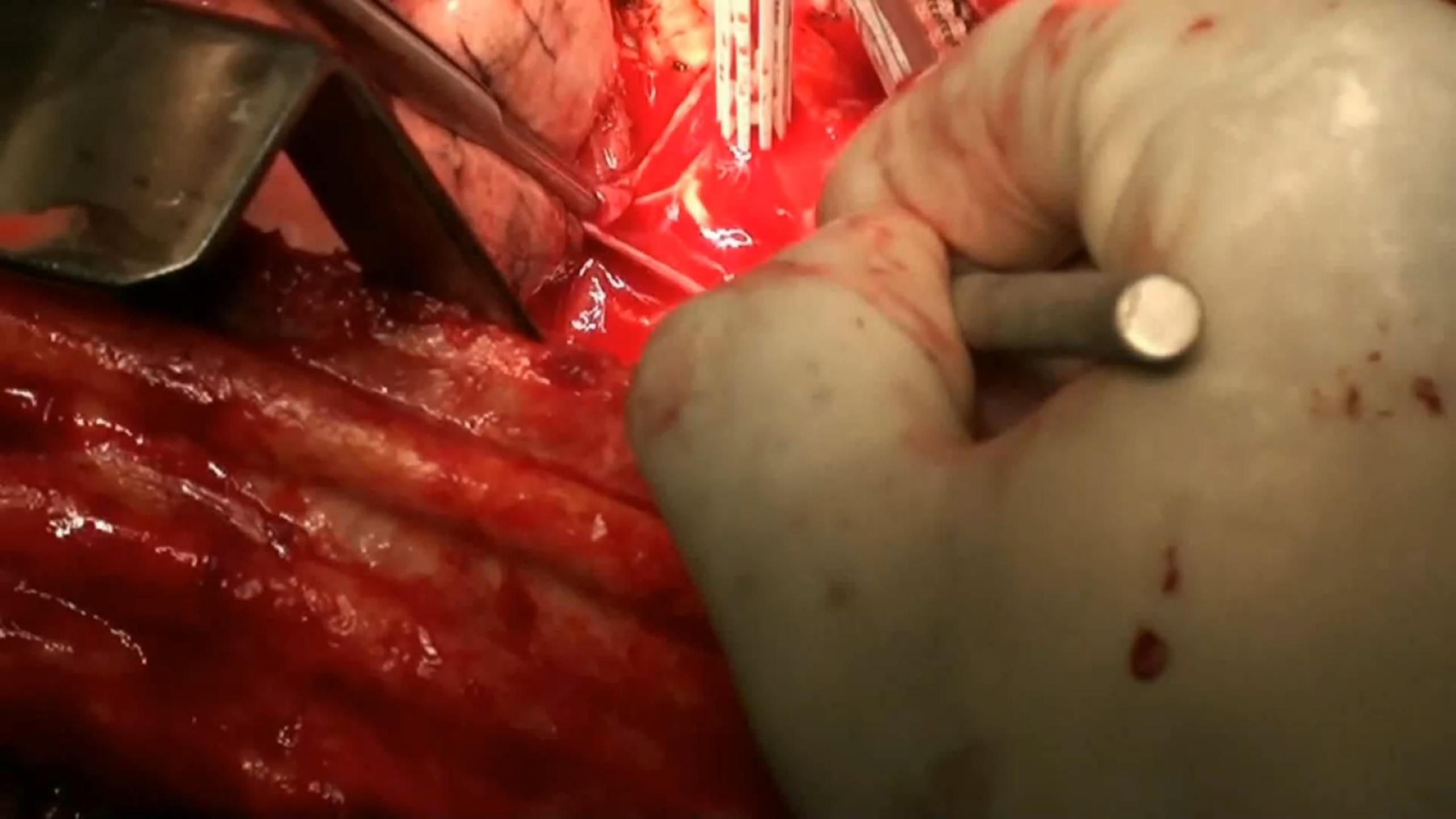


Operative strategy

- Aortic Cross clamp
- Between IA & LCCA
- Perfusion of the native coronary artery & IA
- Through the beating heart with right lung ventilation
- Perfusion of the LCCA & LSA (functioning LIMA)
- Through the anastomosed vascular graft

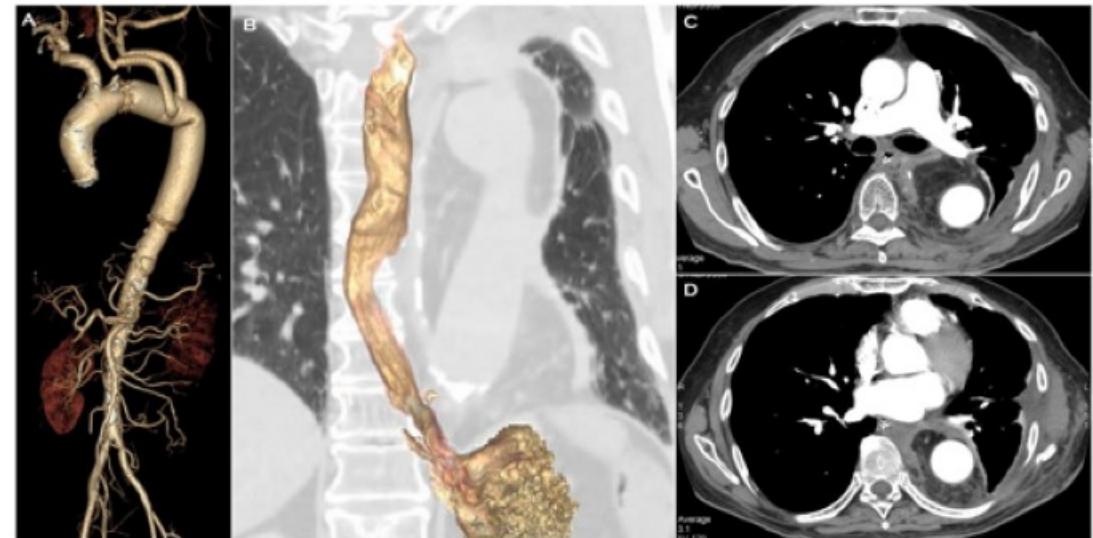


- Supine position
- Laparoscopic omental harvesting with pedicle based on left gastroepiploic artery
- Left lateral position
- Left 6th intercostal space
- Additional exposure through the left 3rd intercostal space



Postoperative period

- Nil by mouth for 5 days with Ryle's tube (RT) in place
- Feeding started through RT from 6th postoperative day
- On confirming there is no leak from the oesophagus, oral feeds was started 5 weeks after surgery



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23rd & 24th NOV'18
AORTIC CONGRESS

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8th INTERNATIONAL AORTIC SUMMIT
22nd - 25th NOVEMBER 2018

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Chennai - 600 026

Venue-II: 23rd - 24th Nov'18
Ramada Plaza
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