Pitfalls in F/BEVAR: How to Deal With Them

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Disclosures:

1st European Siemens Reference Center for Interventional Radiology and Oncology
Research grant recipient from Medtronic

Immediate Sidebranch Occlusion (0-3%) SMA Could be Catastrophic

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Late Sidebranch Occlusion (1 - 7%)

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Immediate Sidebranch Occlusion (0-3%)

Late Sidebranch Occlusions (1 - 7%)

3 months later
2 days back pain

10mg rt-PA

20mg rt-PA

30mg rt-PA
Late Leg Occlusion: IBD + EVAR (1 - 7%)  

6 mo later buttock pain: direct lysis + PTA

2 Years Follow-Up + Platelet Inhibition

Malappositioning of Sidebranches: Leakage, Thrombosis, Disintegration
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3 mo later, routine CT

Malappositioning of Sidebranches: Leakage, Thrombosis, Disintegration

Bailout and Emergency Way-Out

Adequate planning is a must
Adequate graft deployment is another must
Avoid distal sidebranch graft over dilation
Avoid proximal sidebranch graft malpositioning
Avoid ballerinas
Establish adequate long term anticoagulation
Secondary interventions carefully applied