Gore Conformable CEXC Excluder endograft for EVAR: The angle of the proximal graft body can be actively changed to conform to the neck angulation.

Marc RHM van Sambeek, Hence Verhagen, Dittmar Böckler
Department of Vascular Surgery
Catharina Hospital Eindhoven

Disclosure
Marc RHM van Sambeek
I have the following potential conflicts of interest to report:
Consulting and speakers fee
WL Gore & Associates
Medtronic
Unrestricted research grants
Medtronic
Abbott Vascular
Philips Medical Systems

Anatomical challenges

Re-interventions after EVAR

What is challenging anatomy?

There’s no univocal definition.
In general:
- Neck length ≤ 15 mm
- Neck angulation ≥ 60°
- Double angled necks
- Irregular (thrombus, bulge, calcium)
- Wide (> 28 mm)

Anatomical challenges

The literature on hostile neck
Liberalized interpretation of the instructions for use is associated with increased risk of aneurysm sac enlargement, which can lead to re-intervention and rupture of the aneurysm.

In a meta-analysis it was demonstrated that patients treated with hostile neck anatomy were at significantly increased risk for operative morbidity, additional adjunctive procedures at treatment, Type I endoleak at one year, and aneurysm related mortality at one year.
The literature on hostile neck

Emergency EVAR provides excellent results for treatment of RAAA patients with both FNA and HNA. EVAR in RAAAs with HNA is technically feasible and safe in experienced endovascular centres.
Broos PP, et al. EJVES 2015;50:313-319

Real-world, global experience shows promising results and indicates that endovascular AAA repair is safe and effective in patients with challenging aortic neck anatomy.

EVAR continues to evolve as a treatment option for AAA. New devices which are specifically designed to perform adequately across the spectrum of potential anatomic presentations for infra-renal EVAR are needed.

New developments

GORE® EXCLUDER® Conformable AAA Endoprosthesis

The IFU anatomic criteria
- ≥15mm proximal neck length and ≤90˚ proximal neck angulation
- ≥10mm proximal neck length and ≤60˚ proximal neck angulation

Minimum neck length 10mm 10mm 15mm 15mm 15mm 10mm
Maximum angulation 60˚ 75˚ 60˚ 60˚ 60˚ 90˚

Delivery system features allow:
- Device angulation
- Device repositioning
EVAR continues to evolve as a treatment option for AAA

<table>
<thead>
<tr>
<th>Size (in)</th>
<th>2 Yr. Incidence</th>
<th>5 Yr. Incidence</th>
<th>10 Yr. Incidence</th>
</tr>
</thead>
<tbody>
<tr>
<td>5.5-6.4</td>
<td>Challenging</td>
<td>Challenging</td>
<td>Challenging</td>
</tr>
<tr>
<td>6.5-7.4</td>
<td>5</td>
<td>10</td>
<td>20</td>
</tr>
<tr>
<td>&gt;7.4</td>
<td>Challenging</td>
<td>Challenging</td>
<td>Challenging</td>
</tr>
</tbody>
</table>

EXCeL Registry