Nellix EVAS:
What Are The Anatomic Restrictions?
Can Chimney Grafts Be Used With It?
How To Detect And Fix Gutter Endoleaks

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Disclosures

• Endologix: Proctor, training and speaker
  – Strictly off IFU
  – Performed at surgeons discretion
• Medtronic: Research and speaker
• Abbott: Speaker

Anatomy: EVAS Does Need A Neck

Stomach Shaped Aneurysm I

Stomach Shaped Aneurysm II
EVAS and Parallel Grafts

- FEVAR/OR turndown
- To increase seal zone to 2cm
- Limit to 3 chimneys
- Left axillary access

EVAS and Parallel Grafts

Visceral Stenting/Placement of Protection Balloons/ EVAS
Failing EVAR

Draft Results: SGVI

- 47 patients
  - 8 triple, 7 double, 32 single
- 3 rAAA, 4 mycotic, 7 EVAR revisions
- 2 deaths (1 rAAA, 1 elective)
- 3 endoleaks- all treated
- 1 limb occlusion
- 1 renal stent stenosis

Gutter Endoleaks: Technical Points

- Dual Imaging
- Early recognition and treatment
- Combination of coil and onyx embolisation
Conclusions

- Beware adverse neck anatomy outside of IFU
- Consider ch-EVAS if no neck
- Ch-EVAS offers a novel therapy for para-renal aneurysms unsuitable for other interventions
- Dual modality surveillance is important
- Assume no type 1 endoleak is benign
- Coil embolisation with onyx is technically simple but needs to be durable