Value of EndoAnchors in Complex TEVARs and F/B EVARs: indications and Technical Tips.

P.M. Kasprzak
Department of Vascular Surgery
Endovascular Surgery
University of Regensburg
Germany

Disclosures (grants, speaker fees, development, patents):
Cook, Gore, Vascutek, Bard, Atrium, Aptus-Medtronic, Maquet, UCB

- Aneurysm expansion, - rupture
- Endoleak Type Ia/b, II, III
- Migration
- Stent graft infolding, protrusion = coarctatio - collapse
- Side branch occlusion / organ dysfunction, ischemia
- Intraluminal thrombosis
- Spinal ischemia
- Acute dissection
- Stent graft infection
- Complications of the groin / back

Complications after TEVAR

Proximal Migration / Dislocation after 1 Year

EndoAnchoring for TEVAR

Problems at the Sealing Zone:
- Short neck / kinking
- Stent graft nonalignment
- Type I a/b Endoleak
- Migration
- Stent graft protrusion / infolding

Possible solution: EndoAnchoring?


Partial debranching for descendens aneurysm

Endoleak Ia after 6 months

Arch stent graft with scalop

Cook ®
Proximal Cuff-Extension with nonalignment and Fixation with EndoAnchors in Patient with Migration and Type I a Endoleak after multibranched BEVAR.

Proximal EndoAnchoring of the TEVAR with Scallop for Brachiocephalic Trunk and Fenestration for the left CCA in Patient with Multibranched Stentgraft for Type II TAAA.

10/2011 emergency TEVAR and EVAR.

Endoanchors in FEVAR

First EndoAnchors in TEVAR

March, 23 - 2011.
Value of EndoAnchors in Complex TEVARs and F / BEVARs

Limitation:
- Lack of apposition between stent graft and aortic wall
- Primary procedure or endoleak (distance to the aortic wall > 3mm)
- Thick thrombus formation
- Stent graft undersized

Possible solution: Extension Cuff and Endoanchors

Patients

University of Regensburg
2011 – 2015
25 Patients with EndoAnchors in TEVAR and F/EVARs
17 men, 8 women
Age 71 (43 – 88)
Elective 19, ruptured 6
Additional cuff or extension 6

Indication:
- Nonalignment
- Short neck / kinking
- Prevention of migration / side-branch malperfusion
- Stent graft protrusion
- Partial stent graft collaps
- Type I endoleak (ev. with Extension-Cuff / Stent graft)

as therapy option with promising early results
Stentgraft migration with RTAA after partial Debranching

Stentgraft migration with RTAA after partial Debranching
Stentgraft-Extension and EndoAnchors fixation

Technical tips: reintervention in the aortic arch

Value and Limitations of EndoAnchors in TEVAR

We consider EndoAnchors for treatment in:
- Nonalignment
- Short neck / kinking
- Prevention of migration / side-branch malperfusion
- Stent graft protrusion
- Partial stent graft collaps
- Typ I endoleak (ev. with Extension Cuff / Stentgraft)
- Proximal fixation of extensive TAAA Stentgrafting ?

as therapy option with promising early results

Migration of Fenestrated (LSA) TEVAR in BEVAR for TAAA

VEITHsymposium™
Connecting the Vascular Community