Long Term Outcomes of Infected Aortic Grafts
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Introduction: When it comes to graft retention, there is very little data on management with graft retention and no definitive studies on the duration of long term antibiotic therapy. The present study compares the survival between graft retention and graft explantation.

Methods: A single center retrospective study from 1995 to 2016 for abdominal aortic graft infection. The primary end point was aneurysm related mortality. Survival analysis was assessed by Kaplan Meier method.

Results: A total of 39 Infected aortic grafts, 34 were abdominal and 5 thoracic. Majority (77%) had graft retention and long term antibiotics therapy. Similar age at presentation and death and demographics were observed between these groups. A major portion of patients (61.5%) had no growth of organisms, those that did had mainly gram positive cocci (28%). There was no significant difference in long term survival between the two groups. The median survival time for graft retention was 52 months with a (95% CI of 31-72.9 months)

Conclusion: This is the largest report of infected aortic graft retention showing a median survival of 52 months. Graft retention with long term antibiotics is a viable long term management option for infected aortic grafts with comparable results to reported outcomes of ‘gold standard’ treatment.