Value Of Internal Branched Endografts For Treatment Of TAAAs And "Snare Ride" Technique For Difficult Sheath Advancement During F/B/EVAR

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INNER BRANCHES
PRO
• More contact with the aortic wall for sealing
• More flexibility
• Accept misalignment
• Can be used with BE or SE Stents
• More versatile in renal anatomy

AGAINST
• Less durable specifically for renal
• Needs more vascular coverage
• Needs an arm access

PERSONAL VIEW!!

Possible advantages of each design

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PERSONAL VIEW!!

INNER BRANCHES
PRO
• More contact with the Aortic wall for sealing
• More flexibility
• Accept misalignment
• Can be used with BE or SE Stents
• Can be used with BE or SE Stents
• More versatile to renal anatomy
• Can be more difficult to catheterize
• Needs an arm access

AGAINST
• Durability, not completely known yet
• Needs an arm access

INNER BRANCHES
PRO
• More contact with the Aortic wall for sealing
• More flexibility
• Accept misalignment
• Can be used with BE or SE Stents
• Can be more difficult to catheterize
• Needs an arm access

AGAINST
• Durability, not completely known yet
• Needs an arm access
Complex late Type B dissection

Multiple procedures mainly trying to put the visceral vessel into the TRUE LUMEN

First graft done with 04 INNER BRANCHES
ALL PRELOADED

INTRA-OP VESSELS CATHETERIZATION

Final Angio
First 04 inner branches device done
05 years result – DURABILITY

2y Arch device with 02 branches - 06 INNER BRANCHES

The bridge stent is advanced while the upper wire is hold safely by the snare

Final control - 04 inner branches device done

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Final comments
• The Inner Branches makes the procedure easier, faster and works particularly well in small lumen aortas.
• We are reviewing our 05 y experience with Inner Branches in Justa and Para renal AAAs to be publish very shortly, until that we still have to wait to recommend its liberal use.
• It fits perfectly to the next generation of OTS device for Justa and Para renal AAAs
• The Snare–Ride technique provides you an adequate tool to “Hold” your position/wire inside a target vessel even in an adverse anatomic situations to complete a branch or fenestration with a bridge stent.

Role Of Branched EVAR (B/EVAR) To Treat Visceral Segment TAAAs With Chronic TBADs: Challenges And How To Overcome Them

Thank you for your kind attention
Thank you Frank for accepting my talk recorded
I’ll very pleased to answer questions by email or WhatsApp

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