Special features of the Cook Zenith Dissection Specific Endograft for treating TBADs

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Endovascular repair of type B aortic dissection
Zenith TX2 Dissection Endovascular Graft

- Modular
- Tapered devices
- No barbs
- No bare stent
- Pro-Form: conformability/apposition

Retrograde Type A Aortic Dissection After Thoracic Endovascular Aortic Repair: A Systematic Review and Meta-Analysis
Fangfang Chen, MD, Siqian Zhao, MD, Lin Li, MD, Chuan Li, MD, Shengping Lu, MD, Jiazhang Zhou, MD, Zhoping Jia, MD

- Proximal bare stent: Increased RTAD (RR) = 2.06; CI 1.22–3.50
- Bare stent RTAD: 2.31% (40 of 1738)
- Non bare stent RTAD: 1.24% (14 of 1126)
- Mortality RTAD: 37.1%

Disclosures
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Getinge: Educational grant support

Chen et al. J Am Heart Assoc 2017
- Retrograde arch extension: 8% (24% in subacute)
- Type 3 arch 38%
- Landing zone: 2.6mm (SD 1.4)
- Proximal oversizing 13% (SD 0.1)

30 day mortality: 5% (chronic 7.1%)
Retrograde dissection: 0.8% (acute 1.3%)
Paraplegia: 4.1% (acute 6.6%)
Stroke: 2.5% (acute 3.9%)
Type Ia endoleak: 6.6%

Endoleak and proximal landing zone characteristics

<table>
<thead>
<tr>
<th>Type a</th>
<th>Type b</th>
</tr>
</thead>
<tbody>
<tr>
<td>No Cases</td>
<td>8 (6.6%)</td>
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</tbody>
</table>

LSA coverage in up to 50%
No revascularization doubles stroke risk/increases paraplegia
"Consider" LSA revascularization
Need for revascularization "controversial" in acute cases

Procedures using bare stent

<table>
<thead>
<tr>
<th>No. patients (% total)</th>
<th>Bare stent (28.1%)</th>
<th>Covered graft only (87.1.9%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Timing of intervention</td>
<td>24 (70.6%)</td>
<td>52 (59.8%)</td>
</tr>
<tr>
<td>Acute</td>
<td>6 (17.6%)</td>
<td>11 (12.6%)</td>
</tr>
<tr>
<td>Subacute</td>
<td>4 (11.8%)</td>
<td>24 (27.6%)</td>
</tr>
<tr>
<td>Chronic</td>
<td>187.7 (SD 56.8)</td>
<td>246.6 (SD 99.5)</td>
</tr>
<tr>
<td>Total covered graft length (mm)</td>
<td>0.002*</td>
<td></td>
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</tbody>
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Distal oversizing (%)
Paraplegia
Permanent dialysis

LSA Covered
LSA Revascularised

Persistent flow false lumen

Surgical series: STABLE II
White et al. [JVS 2011]
Bavaria et al. [Ann Thorac Surg (2015)]

Patients (n)
Mortality
Retrograde type A
Stroke
Paraplegia

Current Series
STABLE II
White et al. [JVS 2011]
Bavaria et al. [Ann Thorac Surg (2015)]

50
8
8
8
Summary

- Favorable real world results with Zenith Dissection Graft
- Low rate of retrograde type A dissection
- Type B dissection: Proximal landing zone challenging
- Persistent false lumen flow → Plan for re-interventions
- Bare stent expansion of true lumen → clinical benefits?