How To Perform The Neo-Aortoiliac System (NAIS) Procedure For A Mycotic Aneurysm Effectively

15 November 2018
Veith Symposium, New York.

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Infected aortic / graft pathology N=34

Pathology
- Mycotic AAA  
- Aortoenteric Fistula  
- Grafts  
- Endografts

Procedures
- Femoral Vein Neo-Aorta  
- Silver Dacron Graft  
- Axillo-Fem Bypass w  
- Aortic debridement  
- Cryo Aorta

Disclosures
None

Microbiological Culture Results

- Staphylococcus
- Pseudomonas
- TB and others
- Salmonella
- No growth

Follow-up

MRA of Neo-Aorta  
MR Venogram showing Profundization
Femoral Vein Neo-Aorta

- N = 19
- Mortality 1 (5.2%)
  Blow out 1: treated with Aortic cuff stent graft. Died 6 months later with re-rupture and sepsis.
- Minimum 6 months of culture guided Antibiotics.
- 1 patient developed DVT in popliteal vein distal to the point of termination of harvest. Managed conservatively.
- Length of hospital stay 7-21 days

Conclusion

Femoral Neo-Aorta is a viable option for replacement of Aorta for infected aortic pathology not involving the neck and iliac arteries.

It can be performed with low morbidity and mortality in this difficult condition.