

Visceral Branches Aneurism of the Abdominal Aorta: Anatomical Layout and Choice of Treatment

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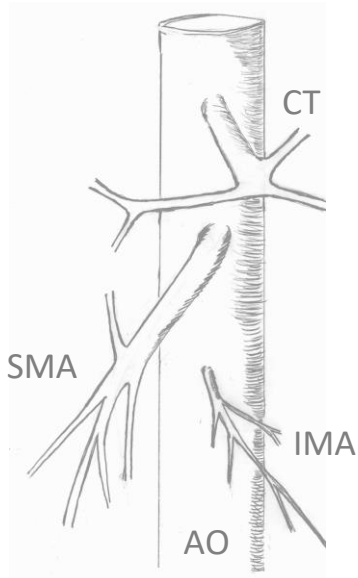
Disclosure

Speaker's name:

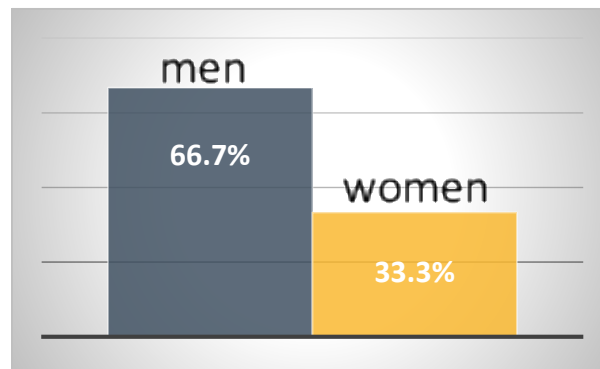
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I do not have any potential conflict of interest

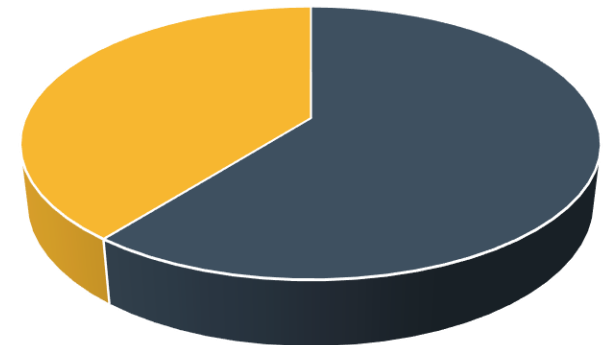
- Visceral artery aneurysms are rare, with an incidence of just 0.01% to 0.2% in routine autopsies (Y.-K. Huang, 2006)
- 22% of all visceral artery aneurysms present as clinical emergencies; 8.5% result in death (Stanley, 1986)
- There is high probability of rupture in visceral artery aneurysms less than 1 cm (Jibiki M., 2005).



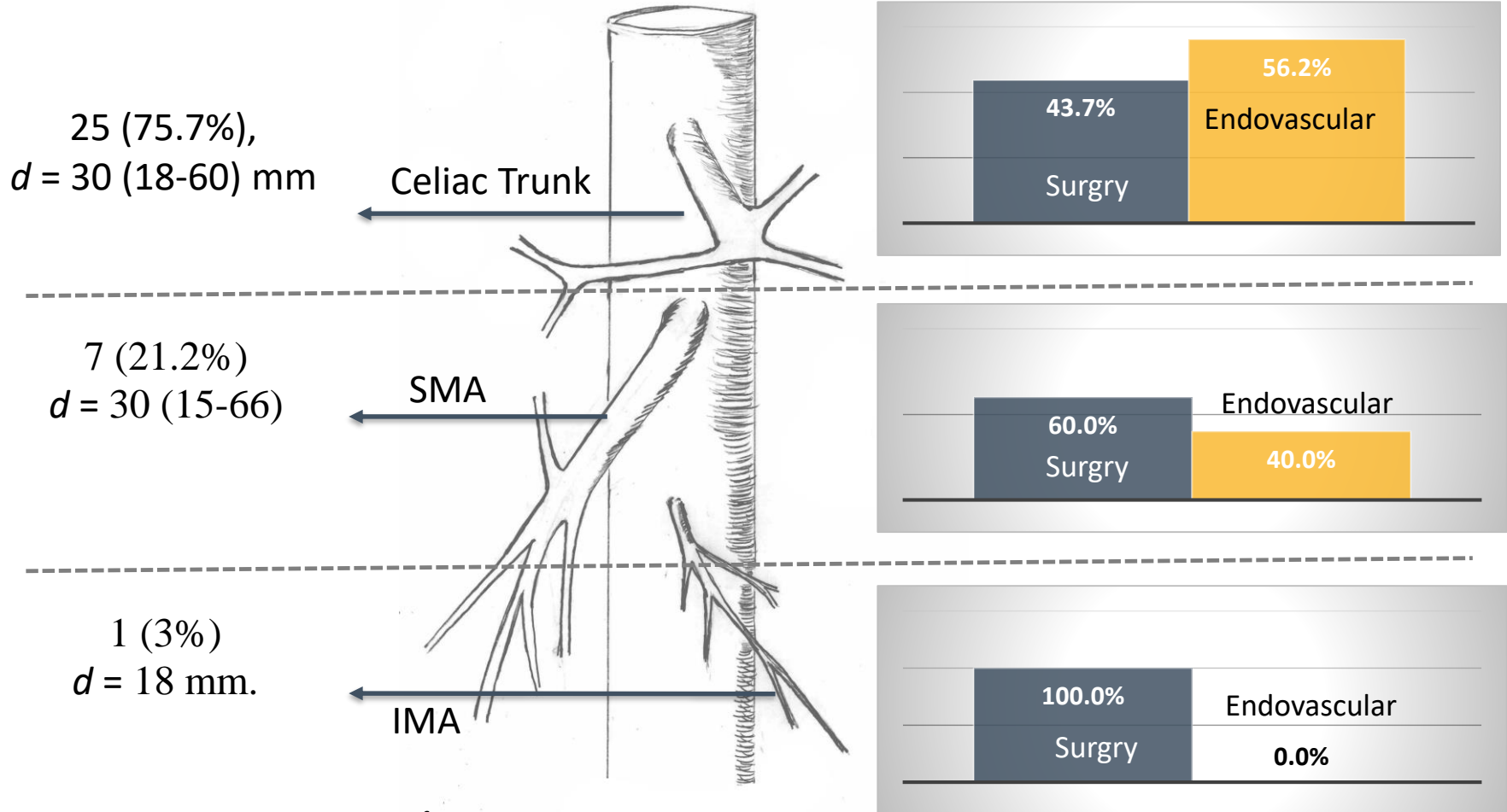
33 patients
55.2 ± 8.2 years



- Epigastric pain/discomfort
- Increase of blood pressure

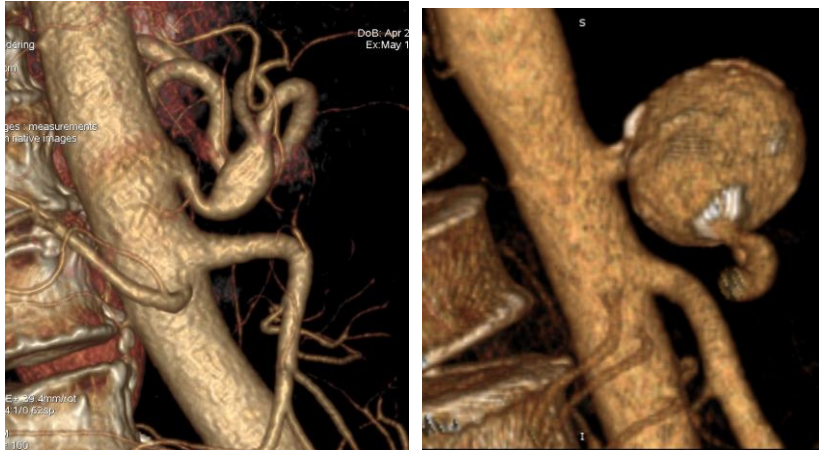


Results



SMA: superior mesenteric artery; IMA: inferior mesenteric artery;

Conclusion



- CT angiography is the best management for visceral aneurysm and evaluation of collateral flow
- The most frequent location - in the celiac trunk and its branches
- In our opinion any diameter of visceral branches aneurysm must be an indication for surgery treatment
- Management of surgical treatment should be endovascular in second and third branches of the main artery with adequate collateral flow
- In case of aneurism location in the main artery trunk bypass surgery or stent graft therapy should be performed.