

## BACKGROUND

Anastomotic aneurysm and infection of arterial graft are complications that occur late after aorto-femoral bypass graft surgery. Open techniques has been proposed for the treatment, but involves high risks of bleeding, wound infection, and mortality. Endovascular techniques have been used to decrease these risks by reducing bleeding, the need for blood transfusion, operative time, and infection.

## PURPOSE

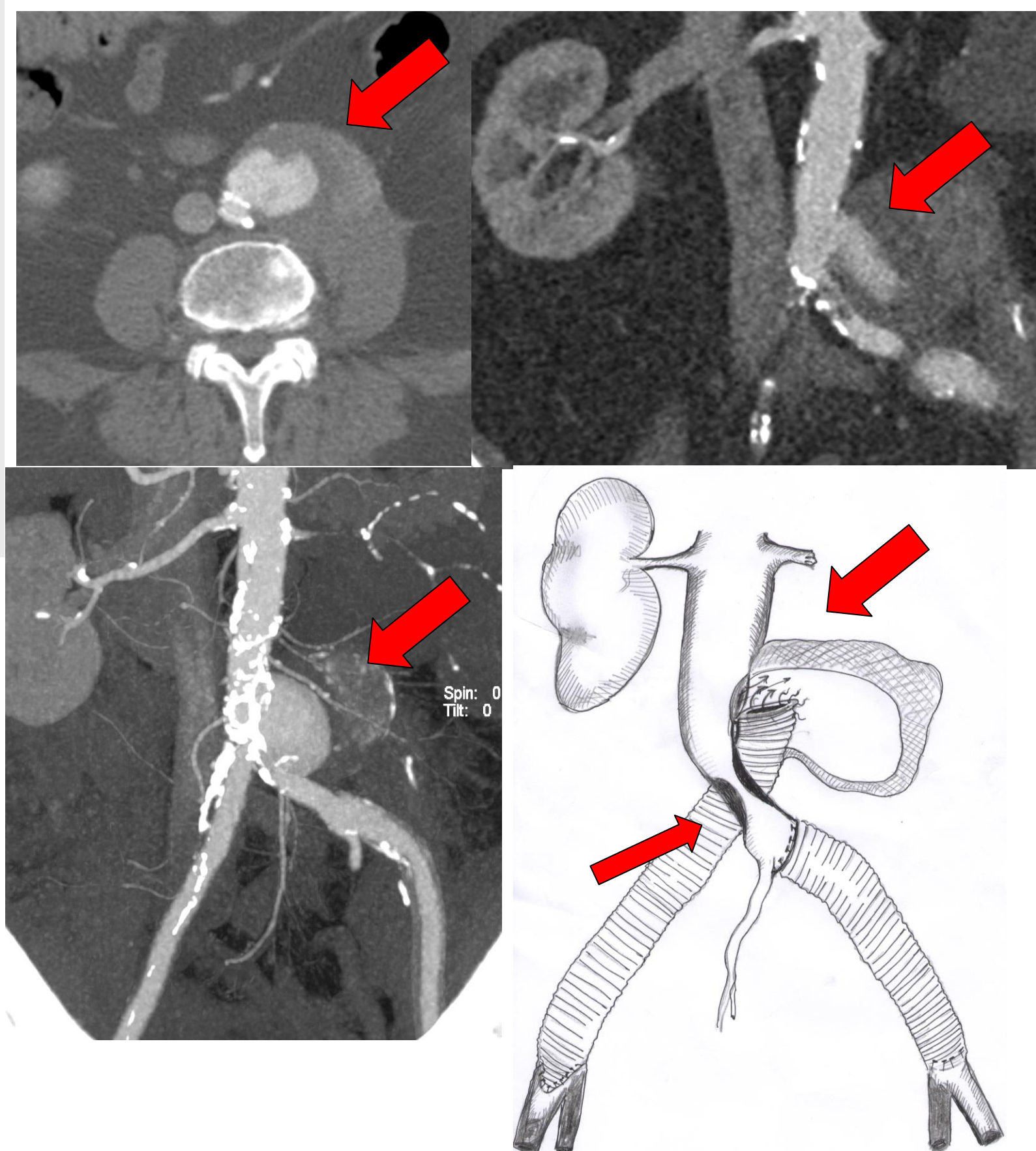
The Autors report succssefull hybrid treatment option of aortic false aneurysm, which developed after 25 years of aortobifemoral bypass in high surgery risk patient.

## Case Presentation

Male 75 years old:

- ❖ Acute Pain in abdomen (occured few weeks ago);
- ❖ Hypertension, Dislipidemia;
- ❖ CAD (Coro PCI), PAD – Fontane IIb (claudication >50 meter distance) R- Aorto-femoral Bypass, L - Ilio-Femoral Bypass 1994 (25 years ego);
- ❖ Nephrectomy – 1992 (renal tumor)
- ❖ CT angio – false aneurysm (aorto-femoral bypass anastomosis insufficiency, stenosis of left CIA <75%); bilateral fem-pop segment CTO.
- ❖ ABI – L 0.4 R – 0.6.

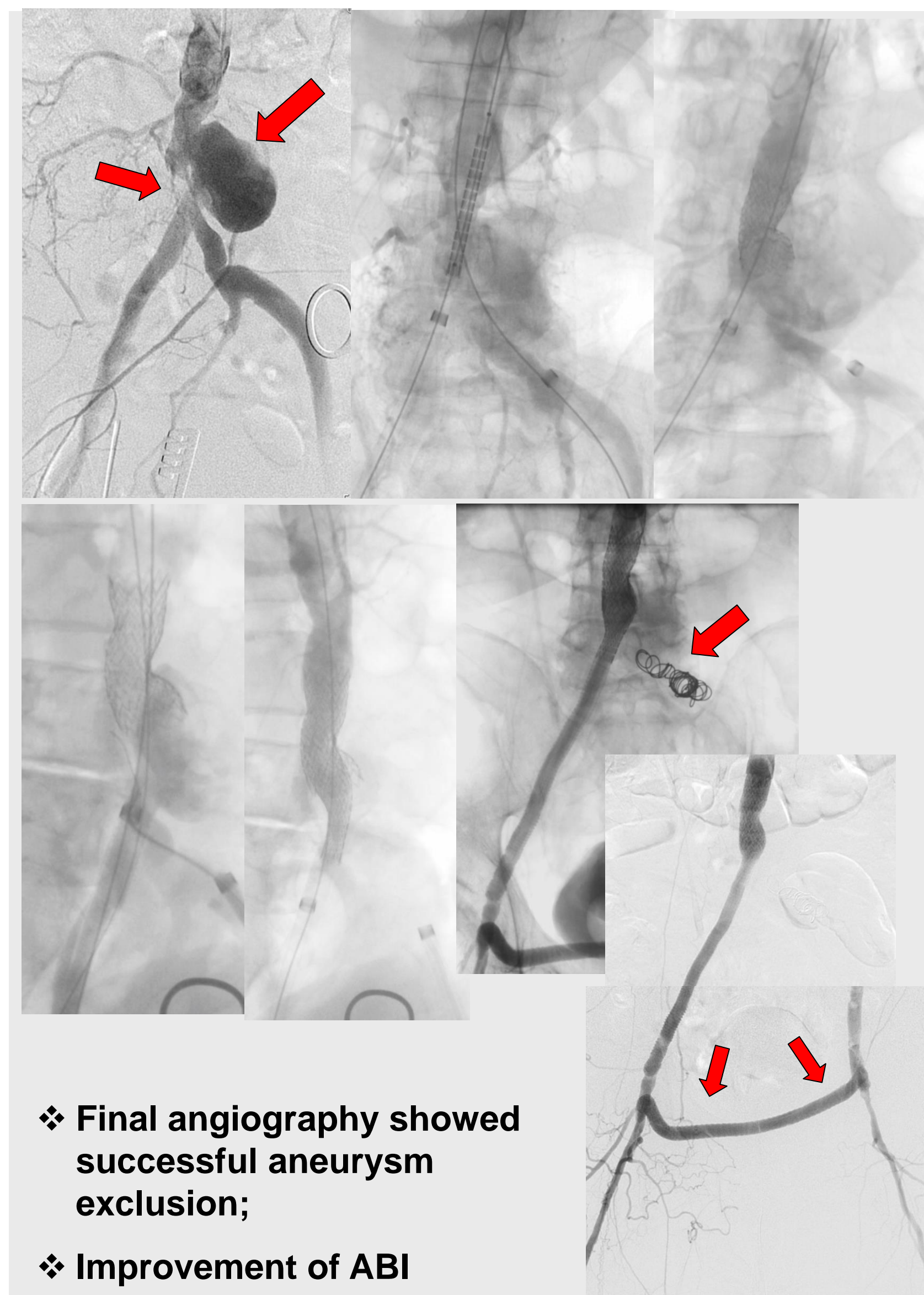
## CT – Angio at Administration



## Treatment Method

### ❖ Hybrid Treatment was Chosen:

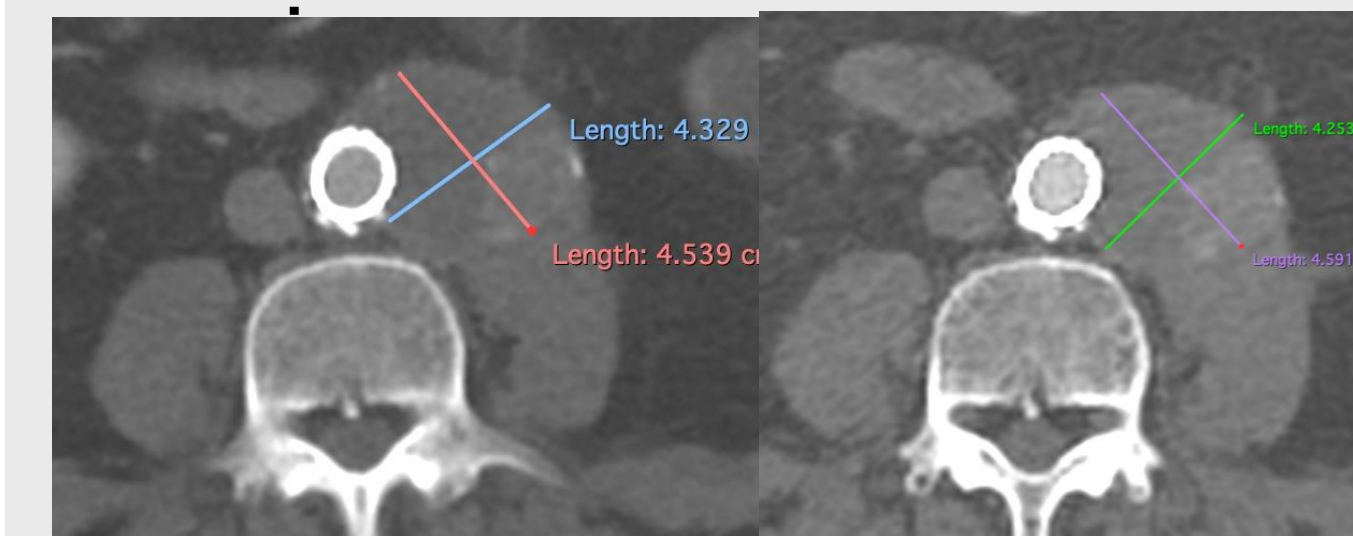
*Aorto – Uni-femoral covered endovascular reconstruction (balloon expandable (Bently inc. Aortic) and self expandable (Viabahn) stents , detachable coiles + fem-fem bypass;*



- ❖ Final angiography showed successful aneurysm exclusion;
- ❖ Improvement of ABI (L-0.6, R- 0.7);
- ❖ No any signs of pain in back after treatment;

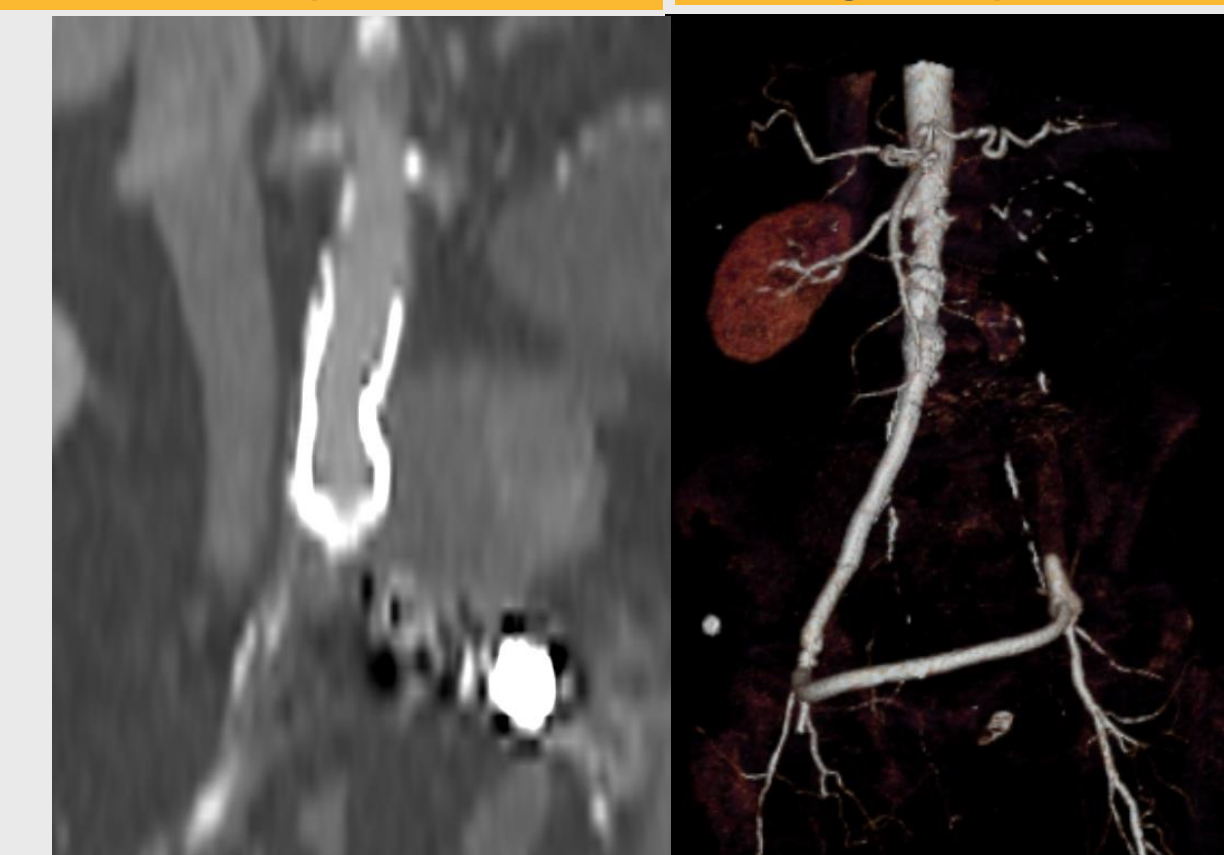
## RESULTS

- ❖ Regular follow up CTA (1 & 6 months) showed successful aneurysm exclusion with no signs of endoleak and aneurysmal suck



1 Month

6 Month



## CONCLUSION

- ❖ In late follow up complication after surgery, endovascular and hybrid techniques are safe, effective and minimaly invasive method of treatment ;
- ❖ Covered large lumen stents technology is safe efacive way of treatment aortic pseudo aneurysms;

## DISCLOSURES

I have no any actual or potential conflict of interest in relation of this presentation.