Recorded Case Presentation:

Fenestrated Arch Repair in Chronic Type B Aortic Dissection

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Consultant: Cook Medical, Philips, Getinge, Terumo Aortic, Arterica, Medyria

Research-grants: Cook Medical, Philips, Terumo Aortic, Medtronic

Travel-grants: Cook Medical, Getinge proctoring speaking-fees,

Speaking fees: Cook Medical, Philips, Getinge

Shares: Mokita-Medical, Arterica, Medyria, Siemens, Philips

IP: Cook Medical, Terumo Aortic, Mokita Medical

Royalties: Cook Medical, Terumo Aortic
Complex Arch Endografts

Branched SG ≠ Fenestrated SG
Fenestrated TEVAR
Fenestrated Arch Anatomical Suitability

- Diameter ≤ 40mm
- Proximal landing zone ≥ 20mm
- Appropriate access vessels
- Landing zone in mid-arch
Patient Characteristics

85y, female

Diagnosis

Aortic arch aneurysm (78mm) with local dissection
Summary

- Endovascular aortic arch repair offers valid alternative to open surgery in patients with increased surgical risk.

- Endovascular arch repair is probably first choice in patients with a graft-replaced ascending aorta.

- Significant progress in device development recently.
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- Endovascular, hybrid, and open aortic surgery:
  - Aortic valve reconstruction
  - Ascending aorta
  - Aortic arch
  - Thoracoabdominal aorta
  - Aortoiliac disease

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