Endotension after Abdominal Aortic Aneurysm Endovascular Repair in Cirrhotic Patients

T. Cambiaghi, A. Kahlberg, A. Grandi, E. Rinaldi, D. Baccellieri, G. Melissano, R. Chiesa
Vascular Surgery Dept, San Raffaele Scientific Institute, Milan, Italy

Purpose:
To report two cases of late surgical conversion due to type V endoleak (endotension) and consequent sac enlargement, following endovascular aortic repair (EVAR) of infrarenal abdominal aortic aneurysm (AAA) in patients affected by liver cirrhosis.

Case report:
Significant and progressive AAA sac enlargement, without radiological signs of endoleaks, was observed in two patients during a 3-year follow-up after EVAR. The first was a 70-year-old man affected by viral liver cirrhosis (Child-Pugh score A) with a 12mm sac expansion in the last year; the second was a 71-year-old man with cirrhosis due to alcoholic liver disease (Child-Pugh score A) presenting with a 14mm increase in sac diameter. Both patients, despite high surgical risk, underwent successful conversion to open AAA repair; intraoperative findings confirmed the diagnosis of endotension.

Conclusions:
EVAR should be carefully evaluated in patients with cirrhosis-induced plasmatic alterations. Surgical conversion is feasible despite the high procedural risk associated with liver disease.