Technical success for managing tortuous aorto-iliac aneurysm with 90-degree neck combining Anaconda and Zenith iliac branch device: Extension and reinforcement of overlapping zone at bridging stents

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Disclosure

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I have the following potential conflicts of interest to report:

- Consulting
- Employment in industry
- Stockholder of a healthcare company
- Owner of a healthcare company
- Other(s)

☒ I do not have any potential conflict of interest
Introduction

- Iliac artery involvement for abdominal aortic aneurysm has been reported up to 30%.
- Preservation of internal iliac artery is important to reduce morbidity.
- Severe angulated neck is one of the challenging issues for endovascular aortic repair.
- Different stent-grafts with their own advantages tackle specific challenging issues.
- The combination of different brand stent-graft is generally not recommended according to IFU?
Introduction

• Violation of IFU is not uncommon
• Combination of aortic stent-graft is feasible
• How to ensure good sealing between the endografts
Our patient

- 74 y.o. male
- History of ischemic heart disease
- Incidental finding of 6.5cm infra-renal AAA with CIA involvement
Angulated neck
Tortuosity & Iliac aneurysm
Anaconda
Iliac Branch Device

- Common option to iliac aneurysm
- The importance of preservation of internal iliac artery
Tailor for tortuous iliacs

- Special consideration for bridging stent in angulated or tortuous case
• How to bridge the mainbody and IBD?
• Iliac limb from Anaconda
• Spiral-Z from Cook
Planning

20mm
87mm
24mm
20mm
75mm
11mm
9mm
11mm
Planning
Spiral-Z iliac limb

- 13mm
- 16mm
- 17mm
- 14mm
- 12mm
- 61 or 45mm
- >12mm
Planning
Iliac branch deployment
Mainbody Deployment
Bridging Stent – Spiral Z
Bridging stent – iliac limb (Anaconda)
Left iliac limb placement
Balloon molding
Completion Aortogram
Another similar case
Mainbody Anaconda
Completion aortogram
Post op CT scan
Conclusion

• Combination of specific features from different endograft maybe one of the solution for complex cases

• Extending the length of overlapping zone may minimize the chance of type III endoleak or provide additional strength for tortuous anatomy
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