Outcomes of an Ethylene-Vinyl-Alcohol-Copolymer Liquid Embolic Agent in the treatment of type 2 endoleaks following endovascular aneurysm repair

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Introduction
Type 2 endoleak = Achilles’ heel of EVAR
Evidence concerning best treatment is missing

Methods
• Retrospective analysis
• January 2010 - June 2016
• Aneurysm sac growth >5mm
• Primary endpoint: absence of aneurysm growth
• Secondary endpoints:
  - technical success
  - 30-day mortality
  - in-hospital adverse events

Results
• 55 patients
• Mean follow up 21,7 months
• primary endpoint 67% (n=37)
  - 5 patients (9%) open conversion
  - 6 (11%) secondary embolization
  - 3 (5.4%) endotension
  - 4 (7%) stable, close surveillance
• Technical success 95%
• 30-day mortality 1,8% (n=1)
• In-hospital adverse events: 11% (n=6)
  - ruptured internal iliac artery (n=1),
  - dislocation of Onyx (n=2)
  - tear off of a catheter in the SMA (n=1)
  - retroperitoneal haematoma (n=1)
  - paraparesis (n=1).

Conclusions
Onyx embolization for the treatment of type 2 endoleaks:
✓ acceptable clinical and radiological outcomes
✓ minimizing the risk of rupture and open conversion following EVAR