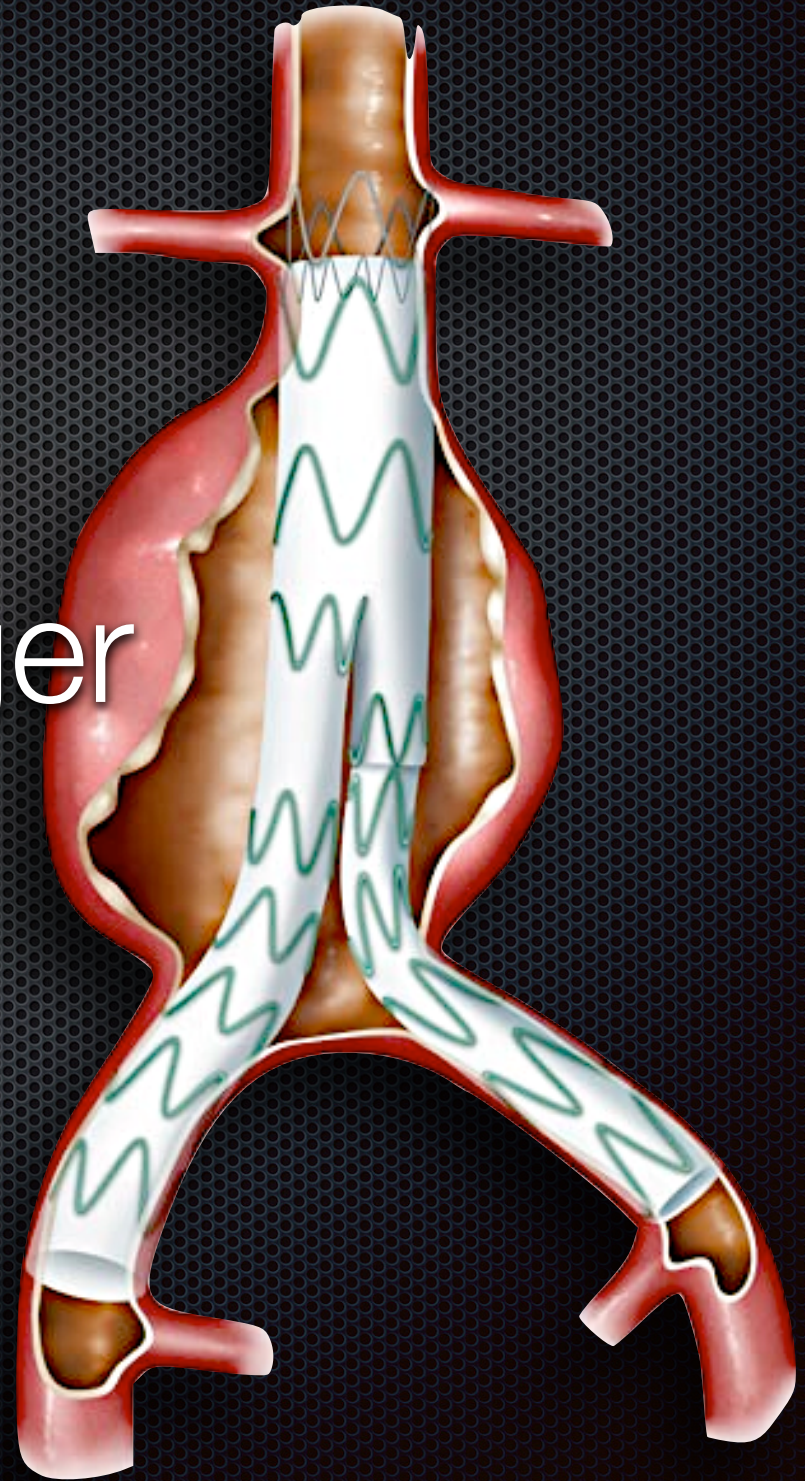


# Aortic Endografts Issues for the Imager

Geoffrey D. Rubin, MD

University of Arizona



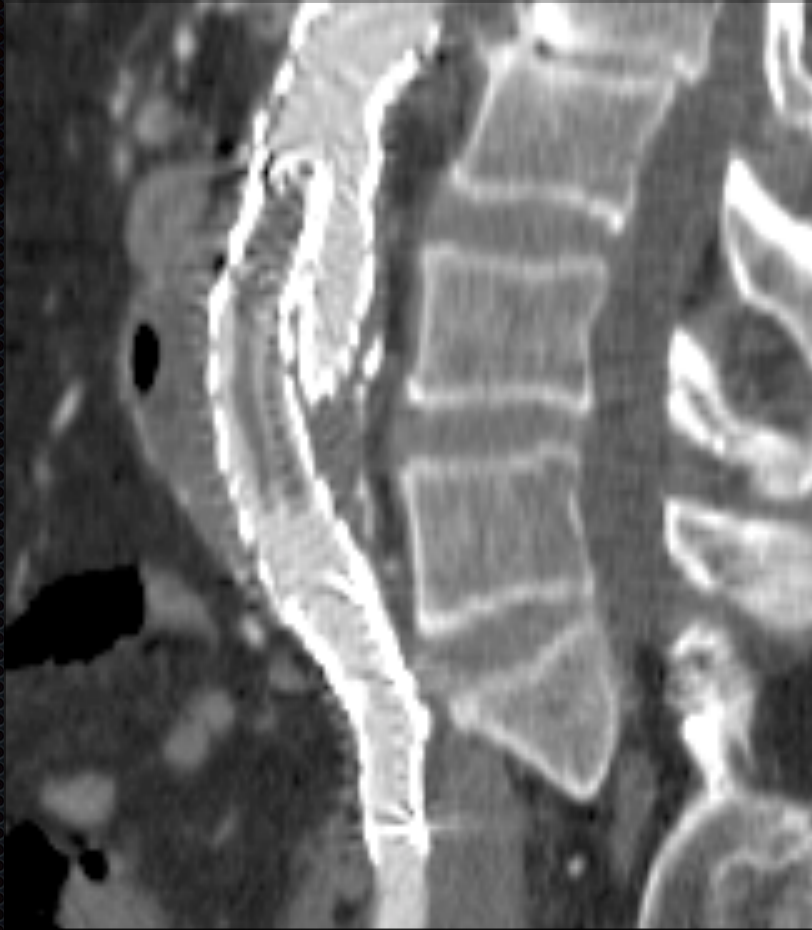


# Acute Assessment

- ✦ Stent-graft patency
- ✦ Endoleak
- ✦ Branch occlusion
- ✦ Iliac dissection
- ✦ Hematoma
- ✦ Atheroembolism

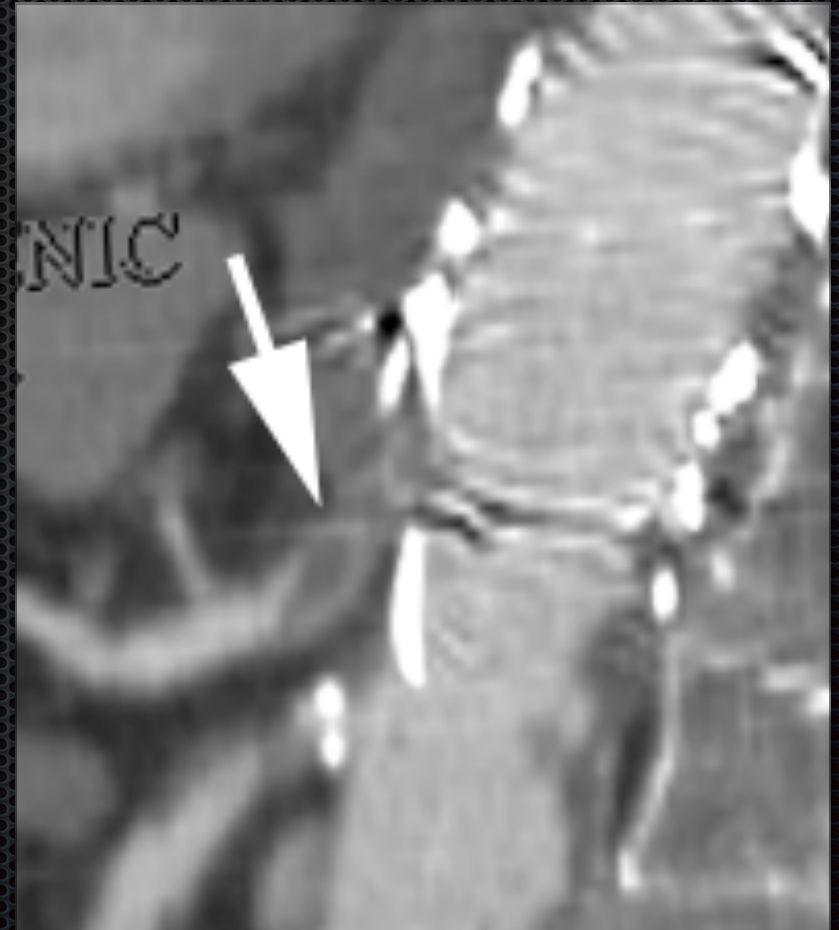


# Pulseless Leg

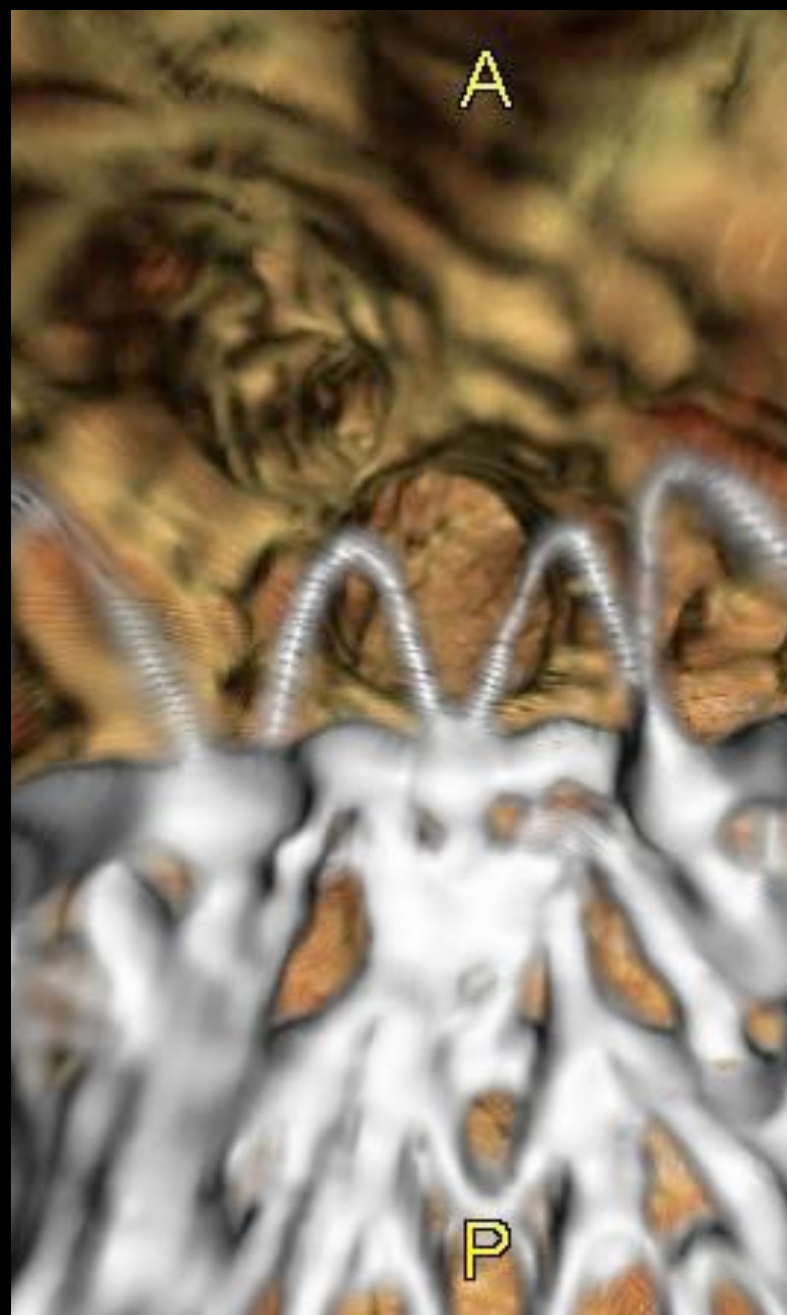
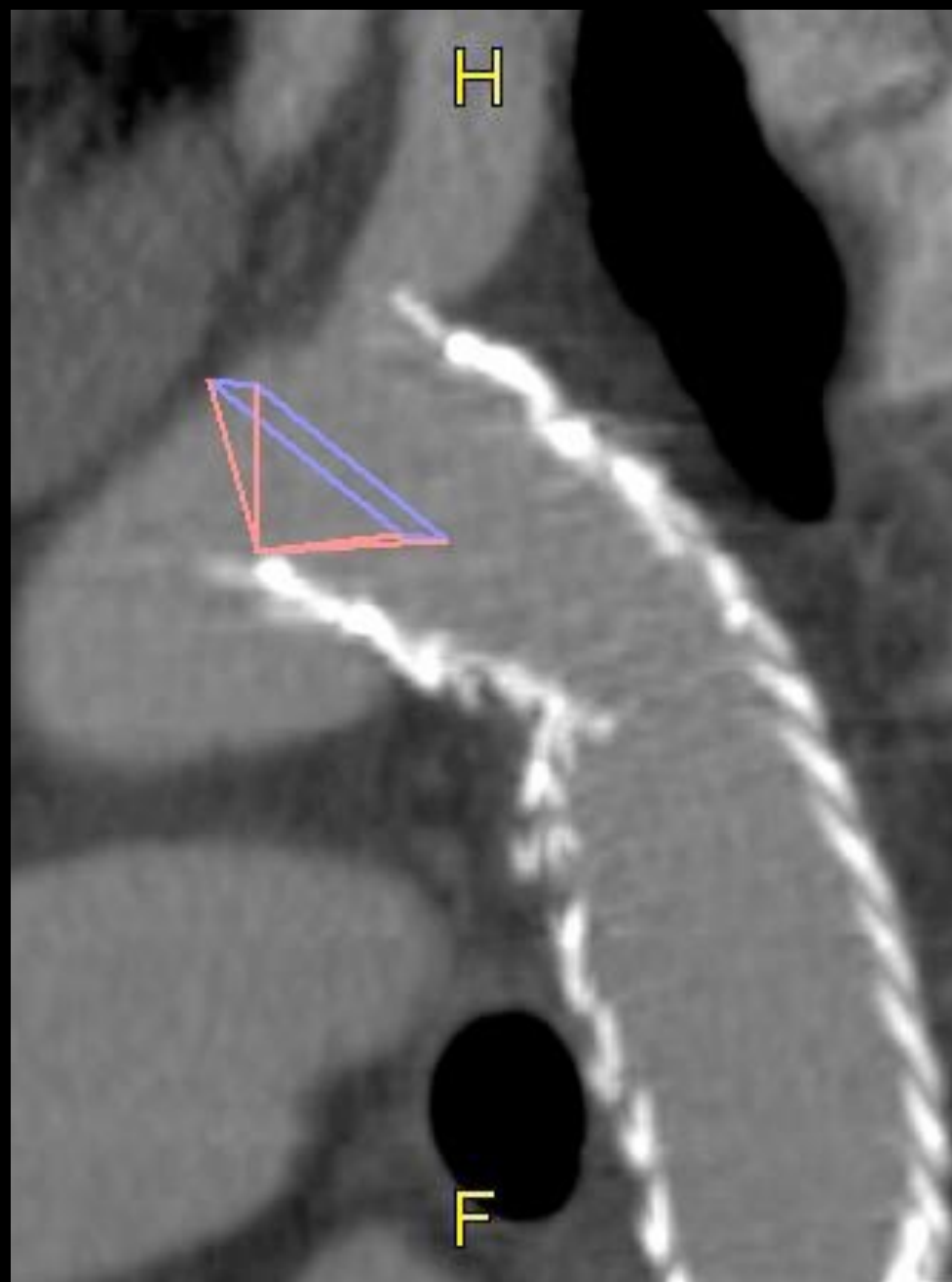




# Post-Deployment Celiac Occlusion



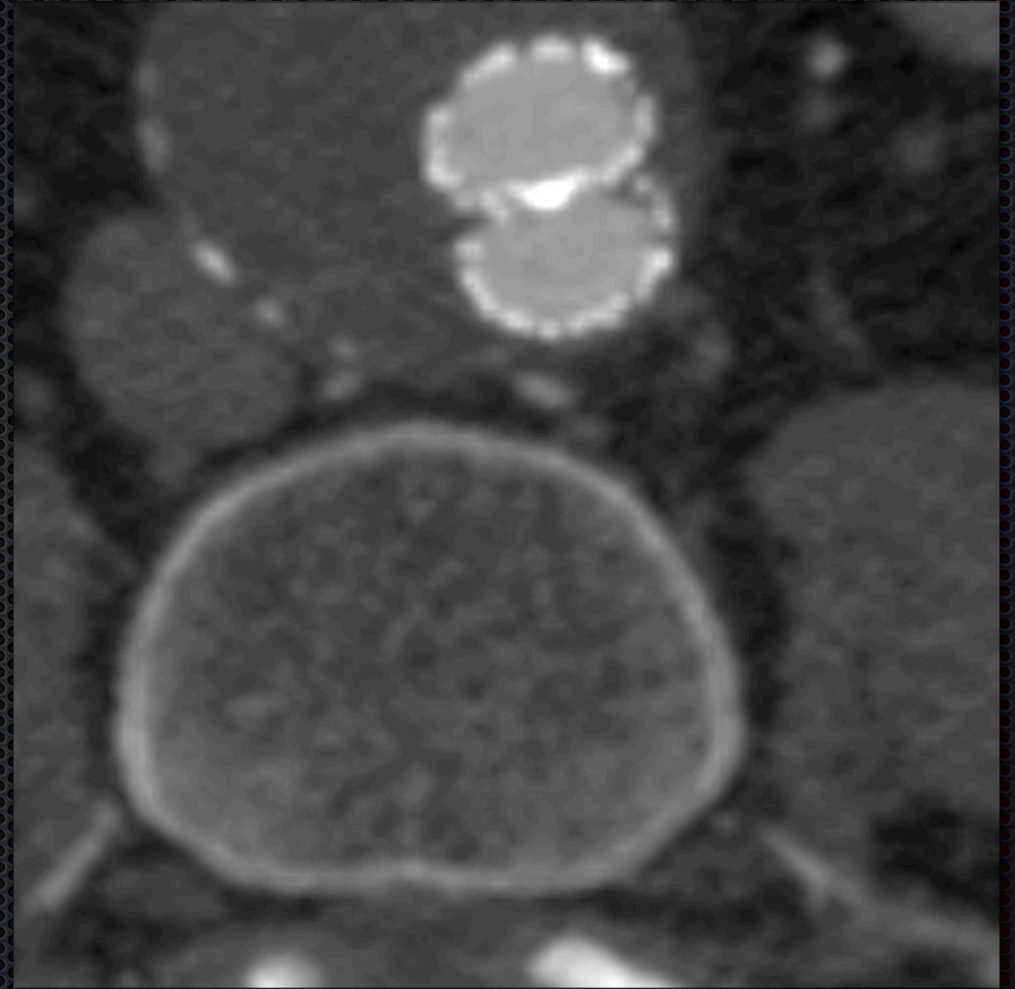






# Incomplete expansion of distal limb

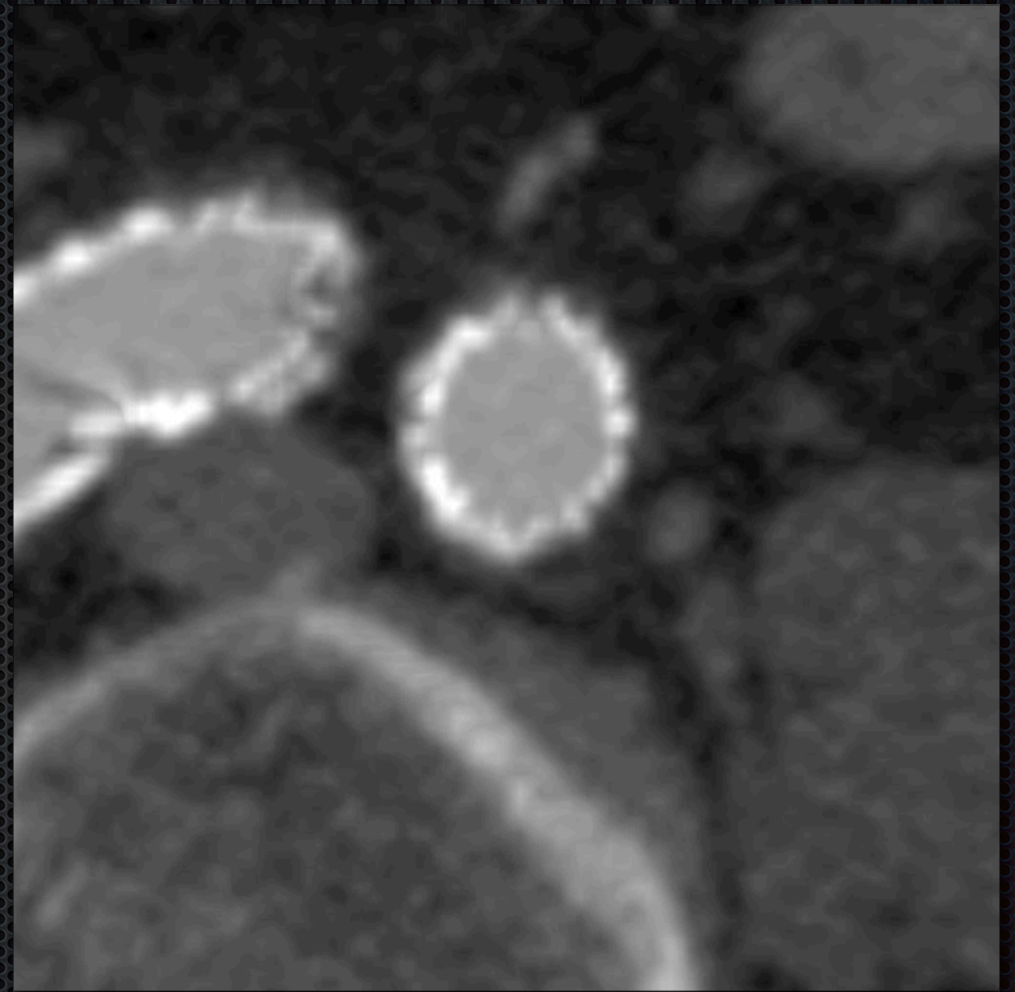
Risk of thrombosis or embolization





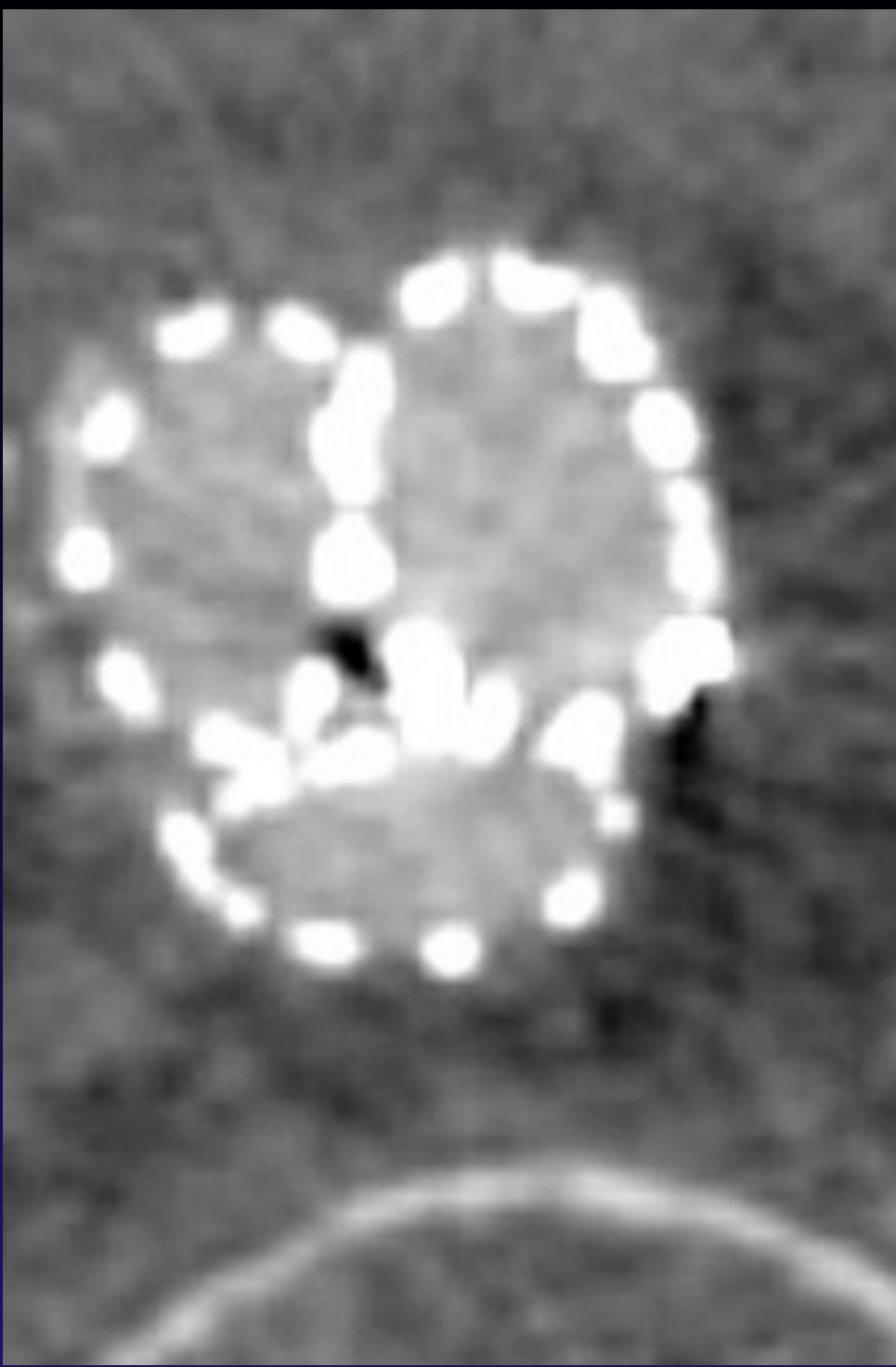
# Incomplete expansion of distal limb

Risk of thrombosis or embolization

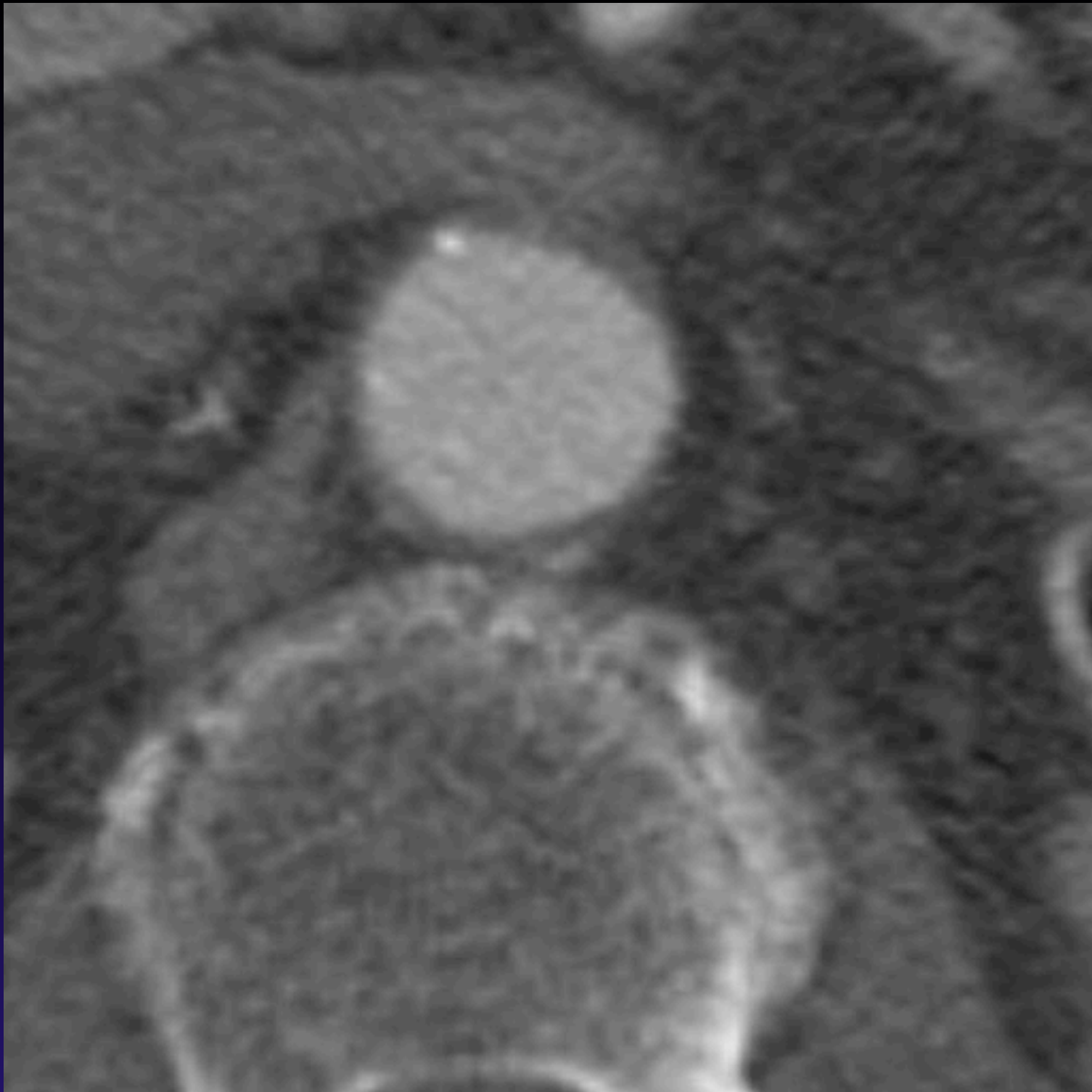


Oblique Reformation







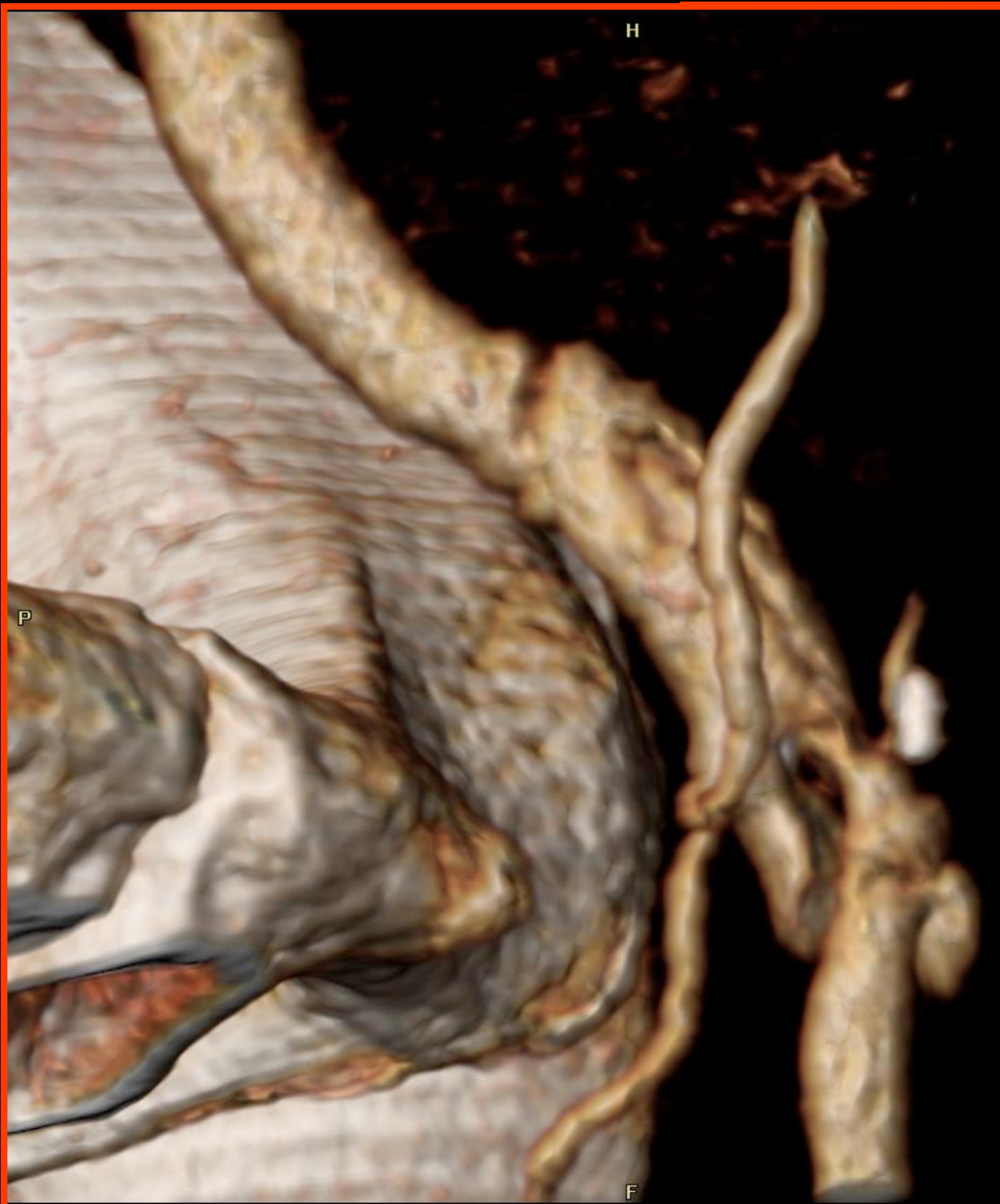




# 1 Day $\bar{p}$ Bifurcated Aortic Stent-Graft

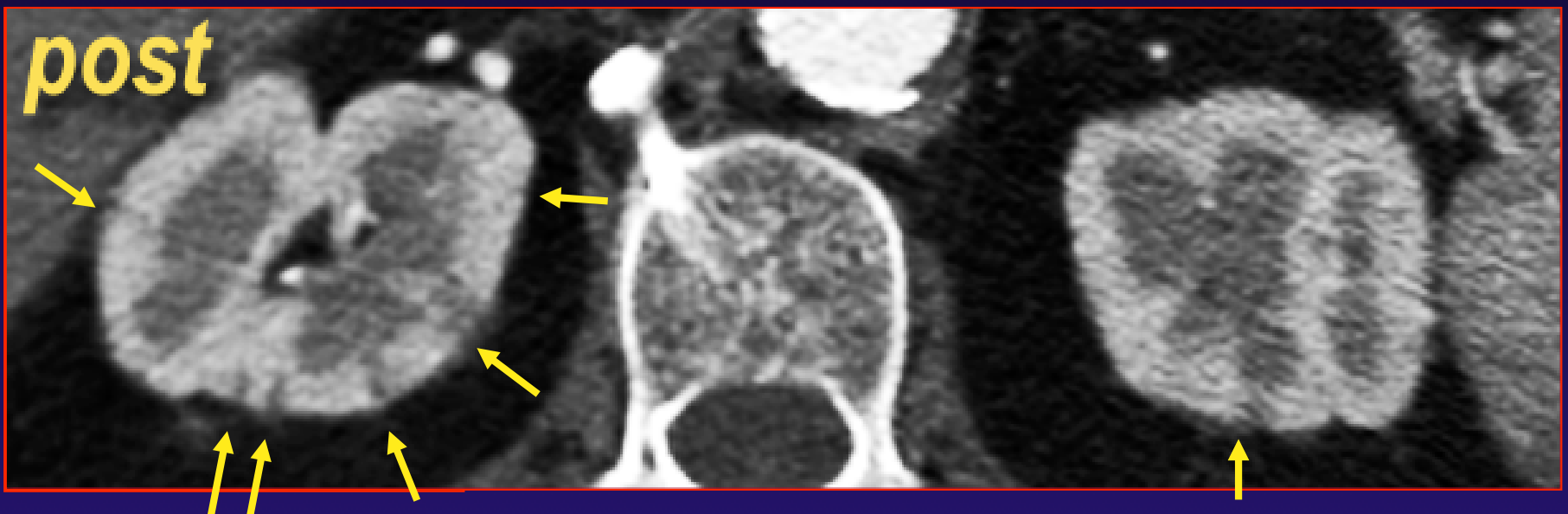






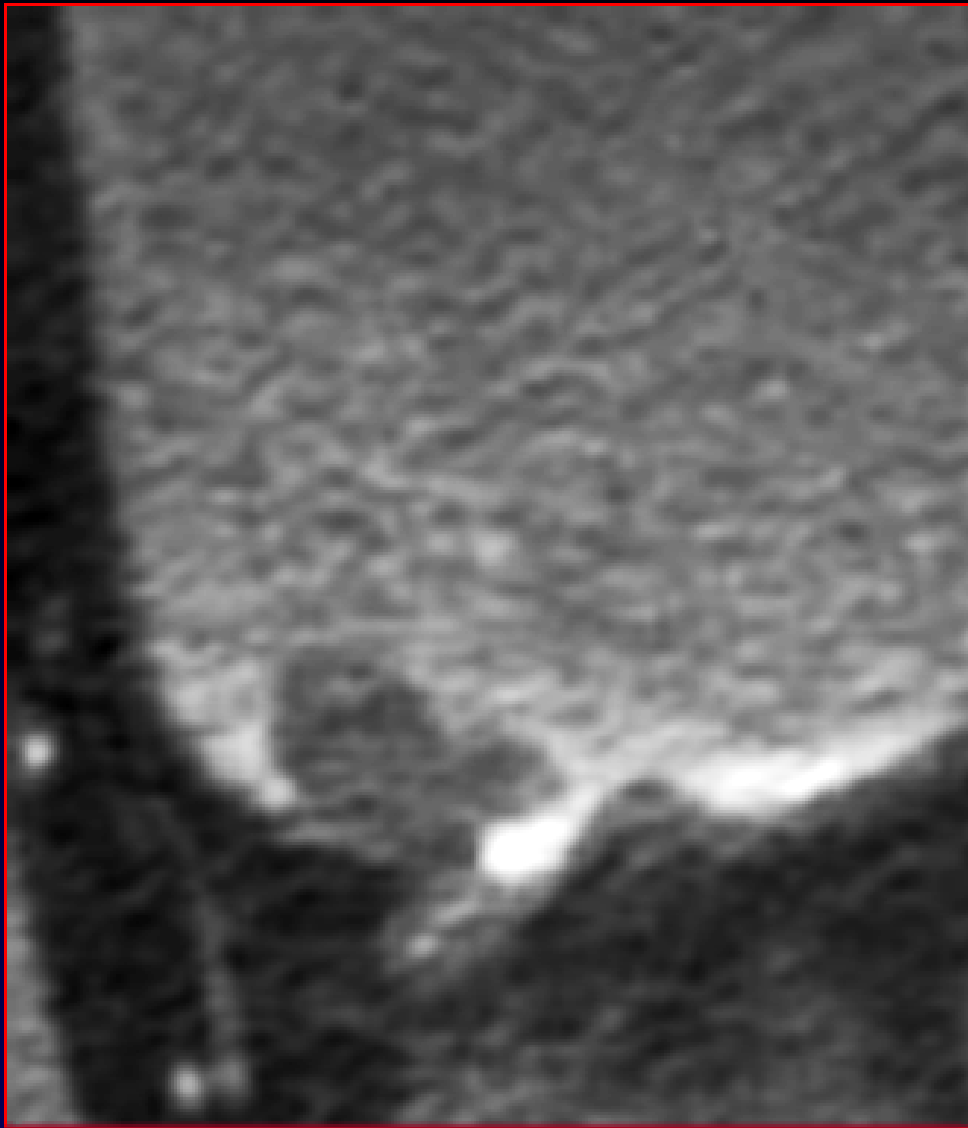


# ***Renal Infarcts***





# Thrombus in Urinary Bladder



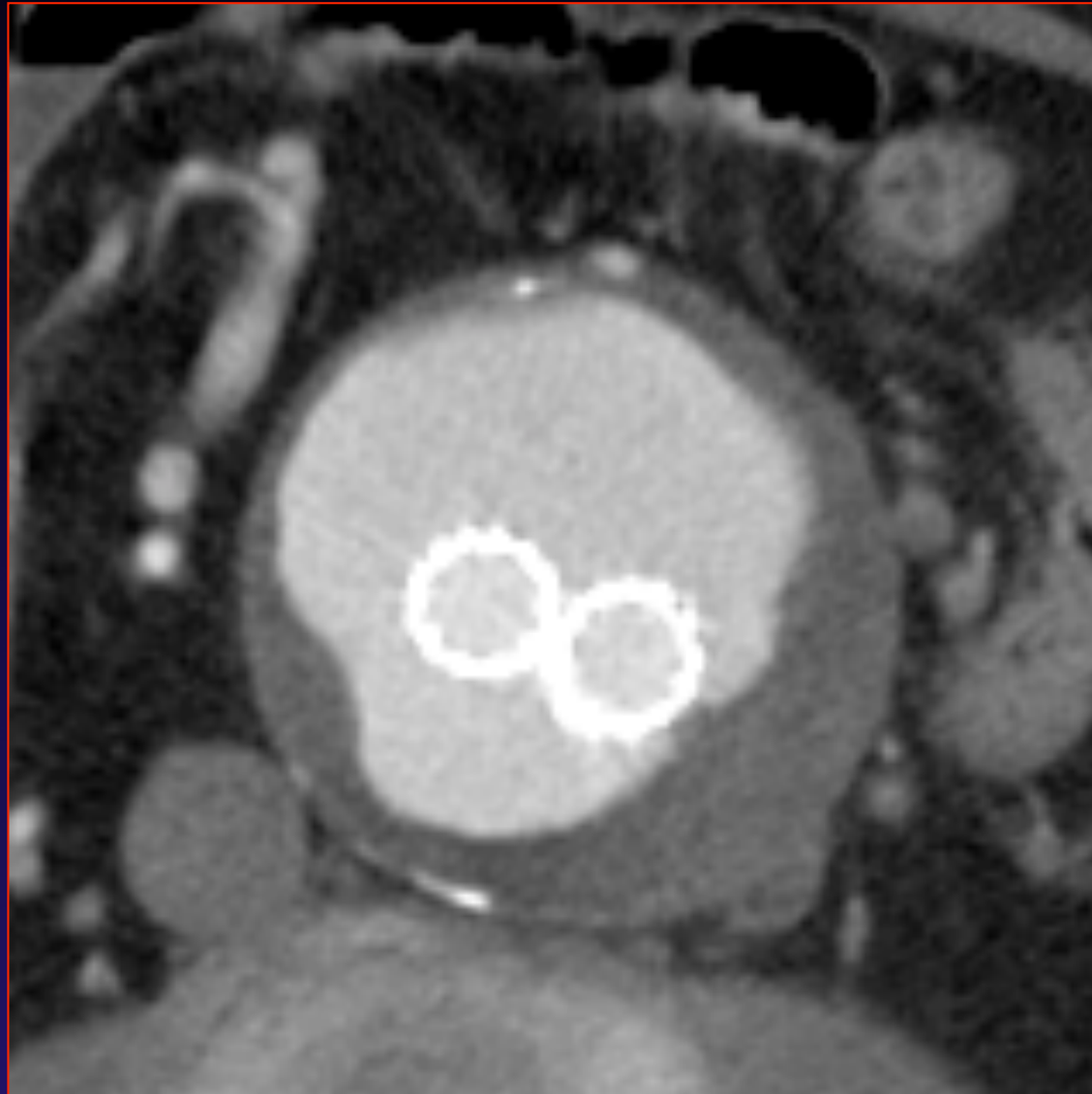


# Splenic Infarction





# ***Endoleak***



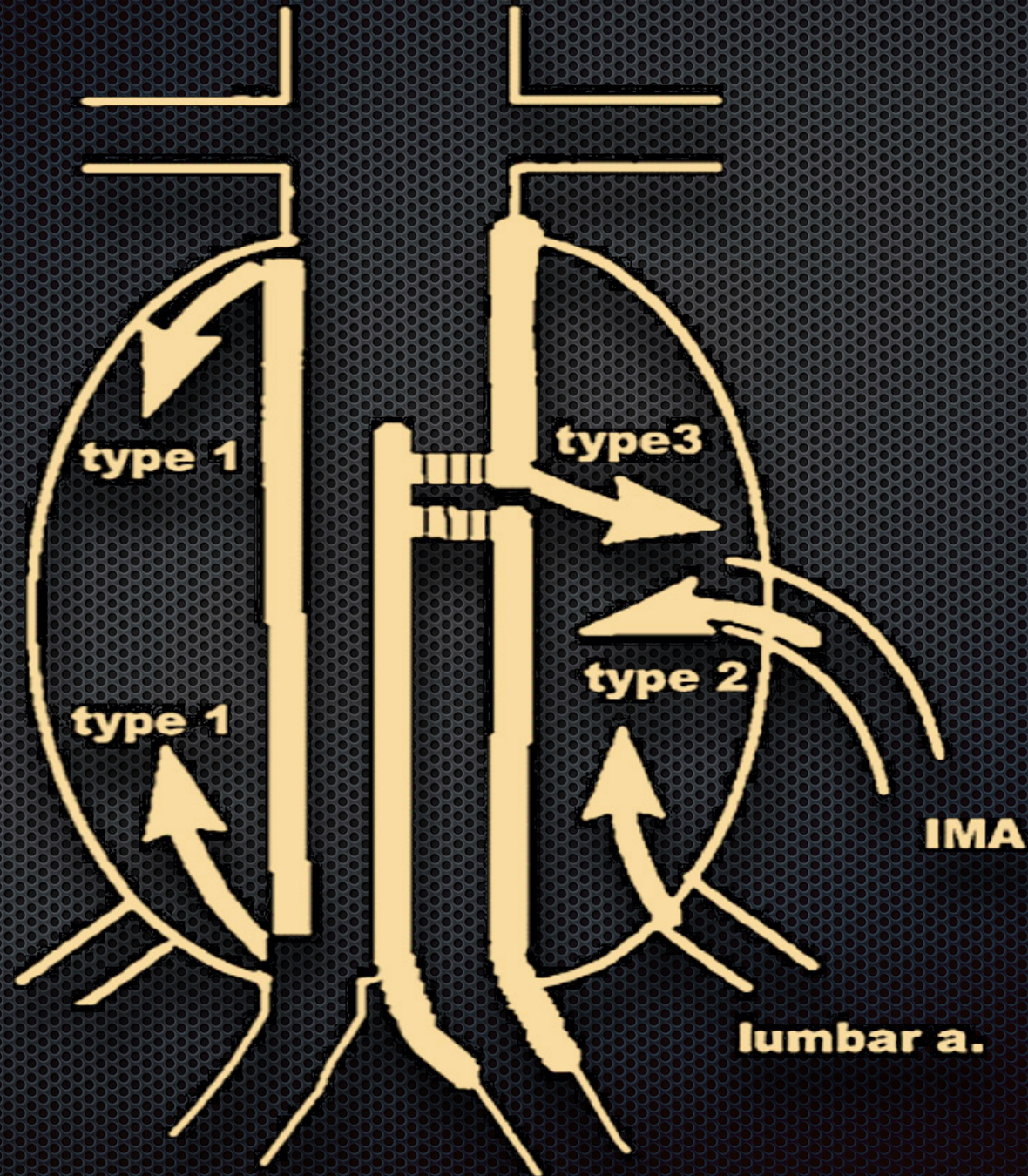


# Endoleak

- ✦ CT considered reference standard
- ✦ 5 Types described
  - 1: Attachment site
  - 2: side branch (lumbar, IMA, access renal)
  - 3: hole in graft or junction leak
  - 4: transient trans-graft flow (not a leak)
  - 5: endotension

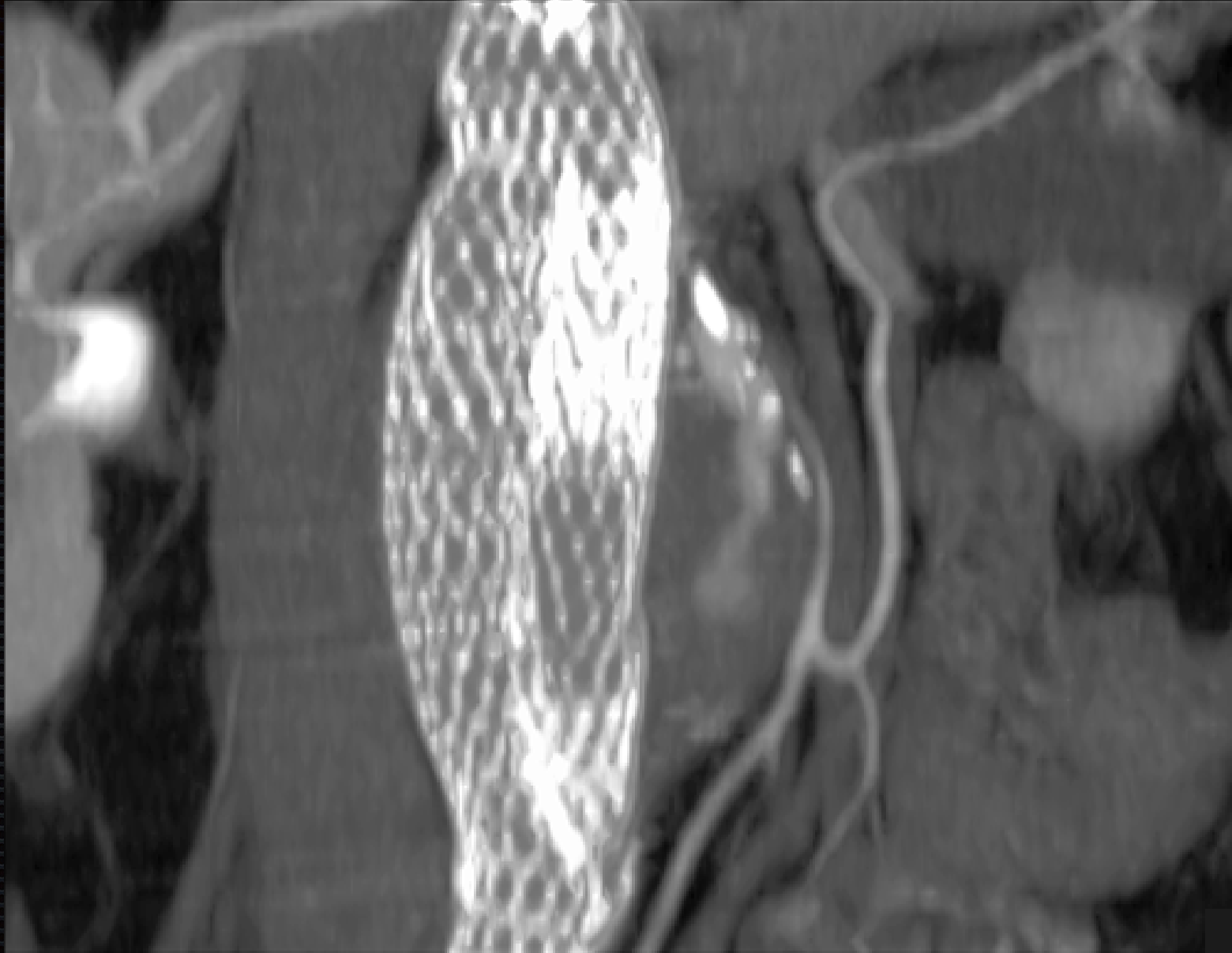


# Endoleak Classification





# Endoleak via Patent IMA

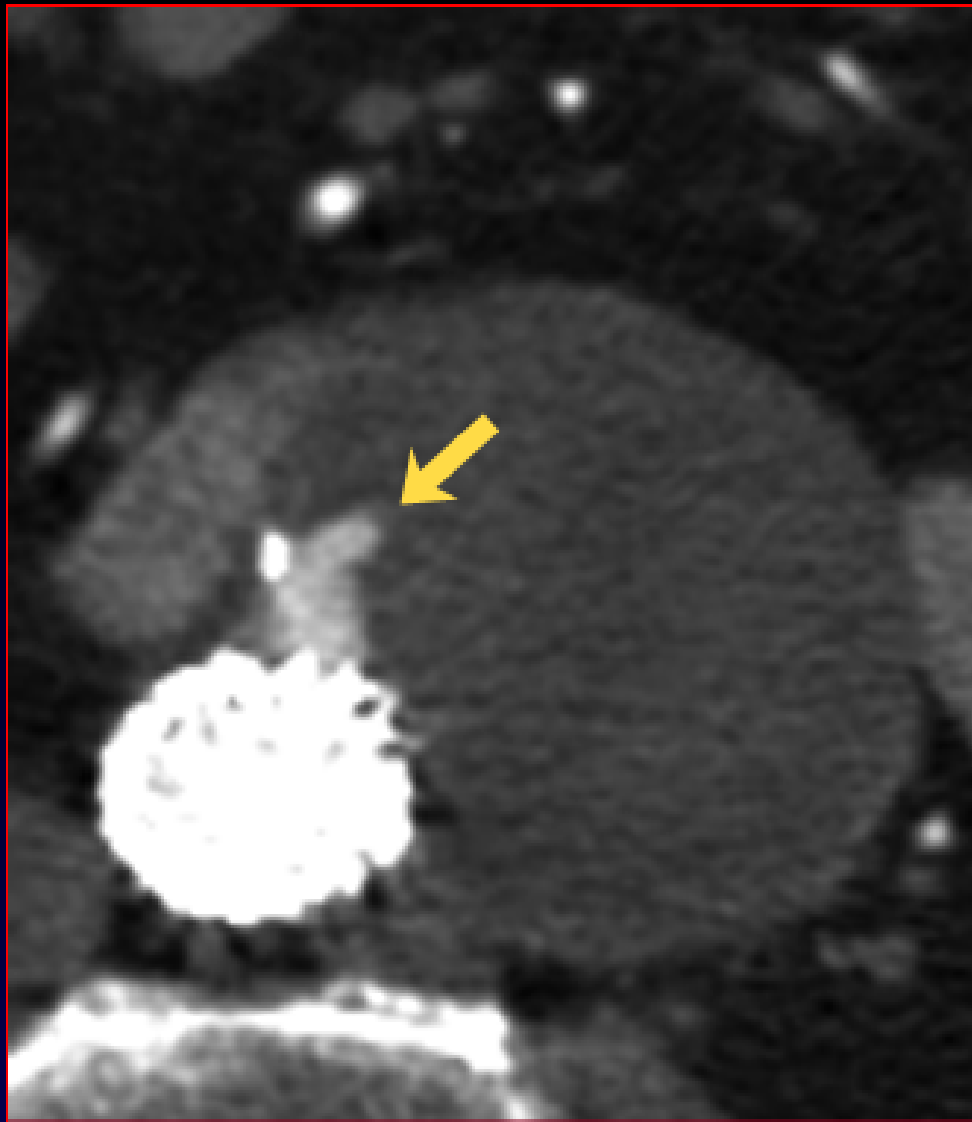




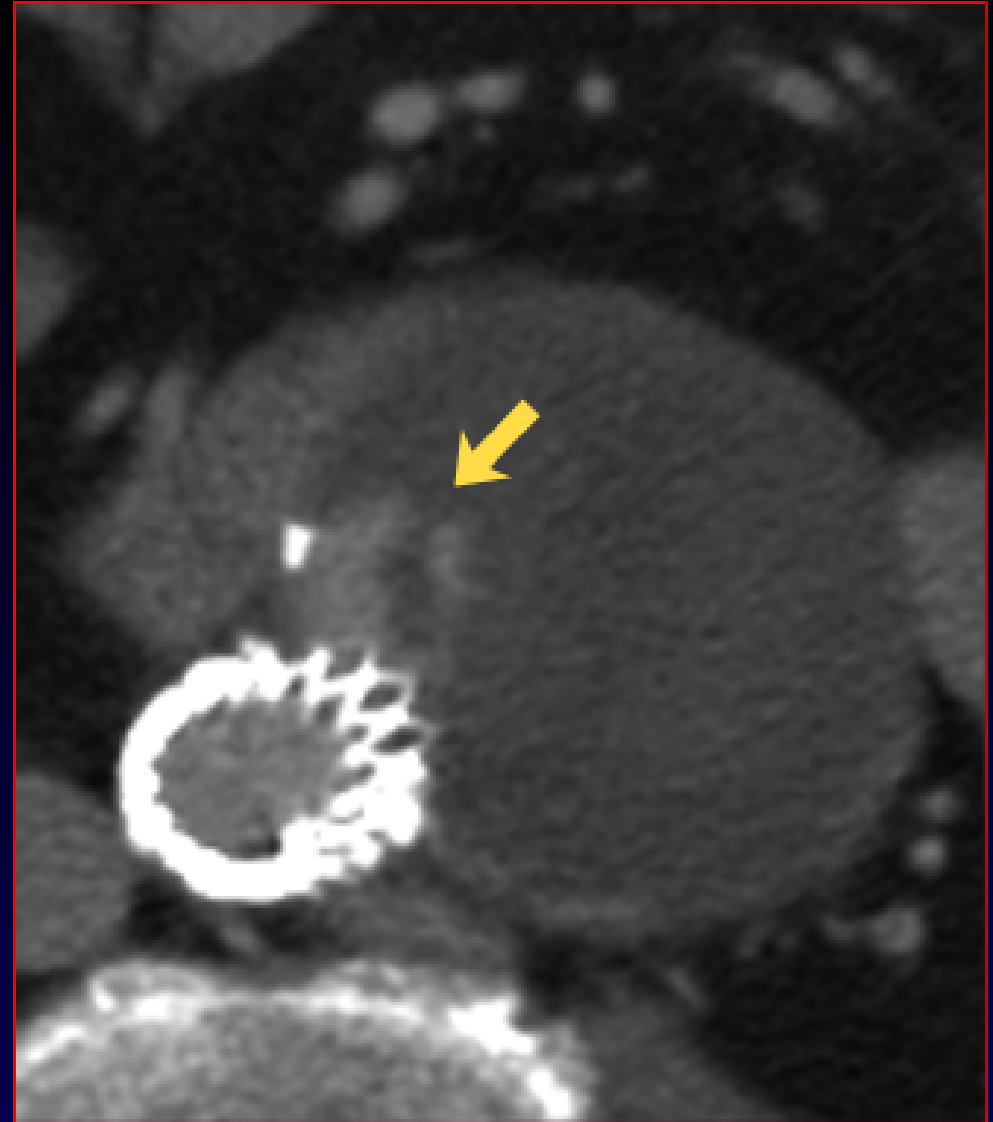
# Triphasic CT Technique

- **73 patients post stent-graft**
- **33 endoleaks reviewed by 2 radiologists**
  - 30 (91%) detected on unenhanced/arterial phase*
  - 32 (97%) detected on arterial/delayed phase*
  - 33 detected on complete set of all 3 phases*
- **20% of negative cases were “indeterminate” with biphasic technique**





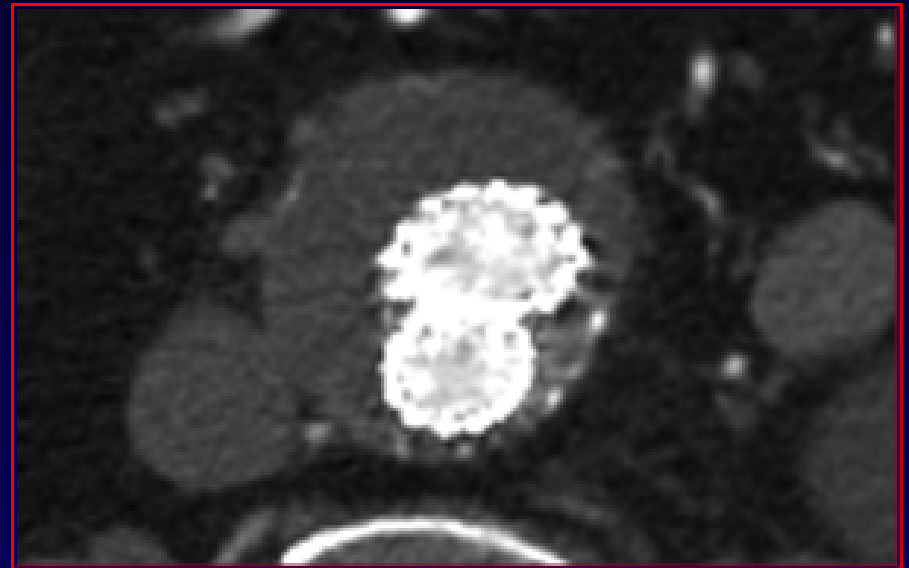
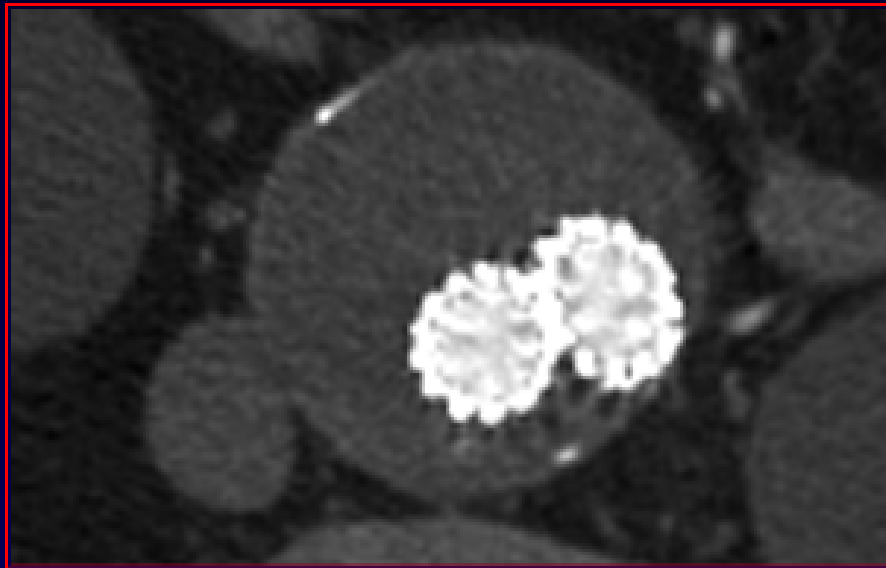
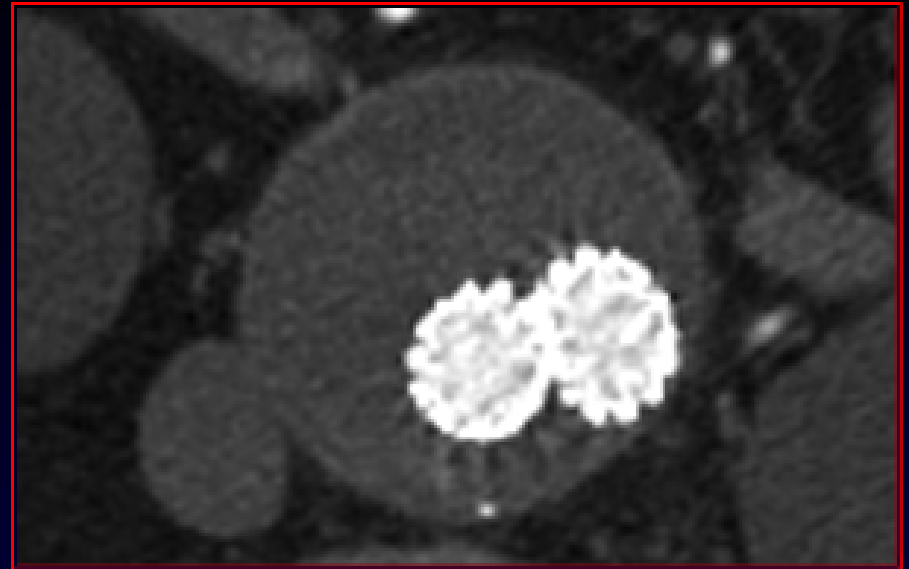
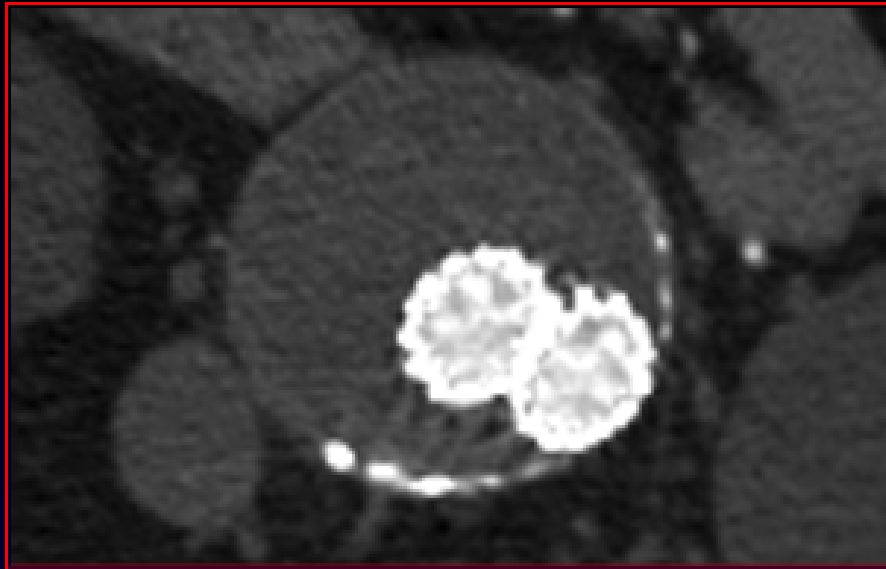
***30 sec post inj.***



***75 sec post inj.***

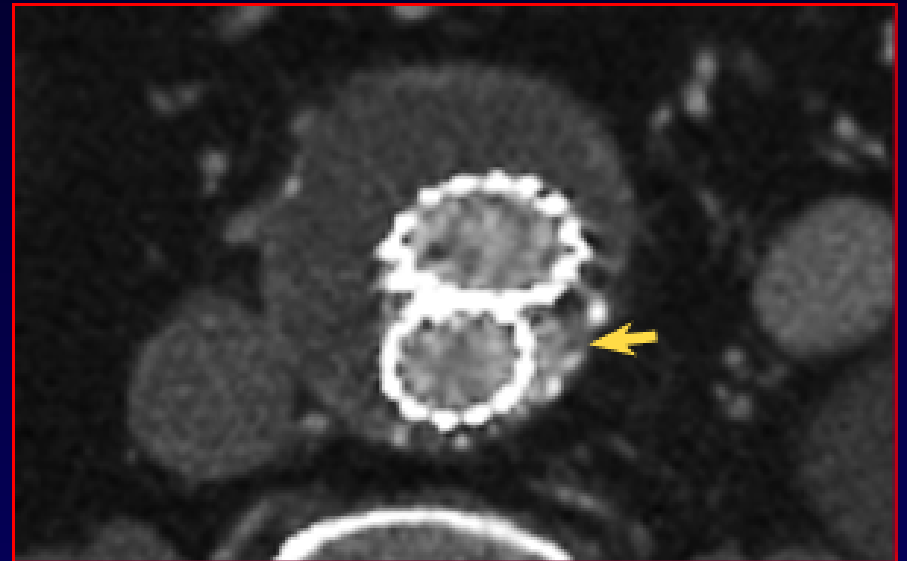


# 28 sec $\bar{p}$ Initiation of Contrast



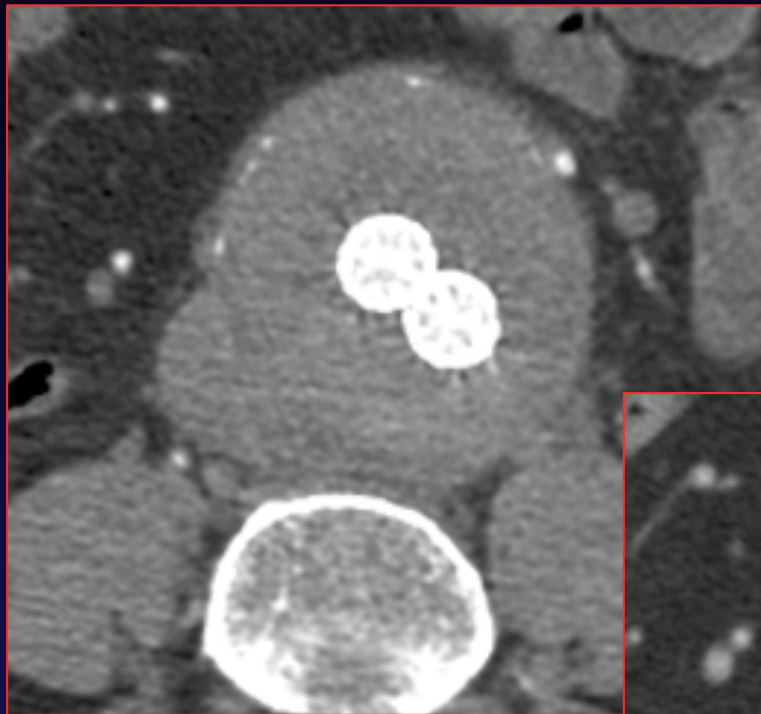


# 70 sec $\bar{p}$ Initiation of Contrast



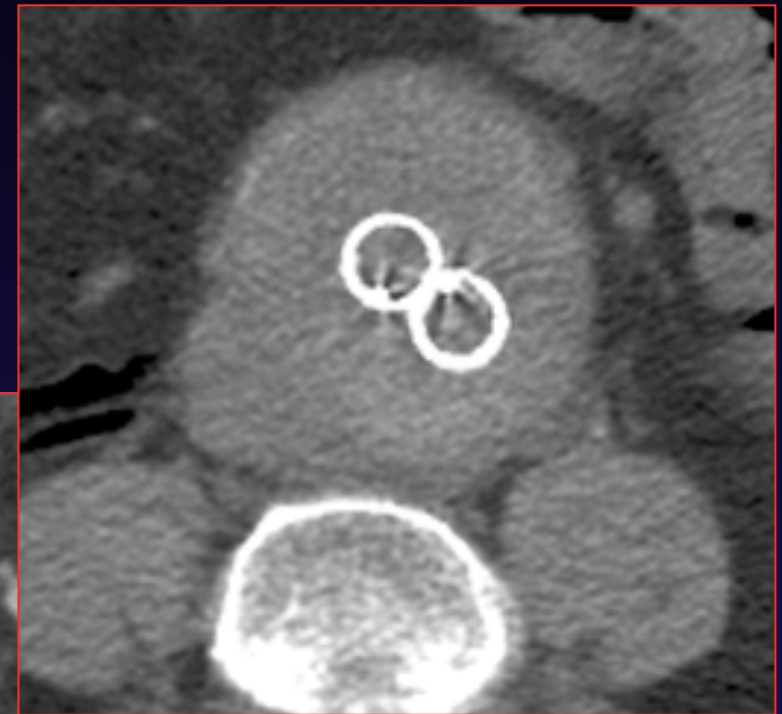


# ***24 hrs. after Deployment***



***24 sec***

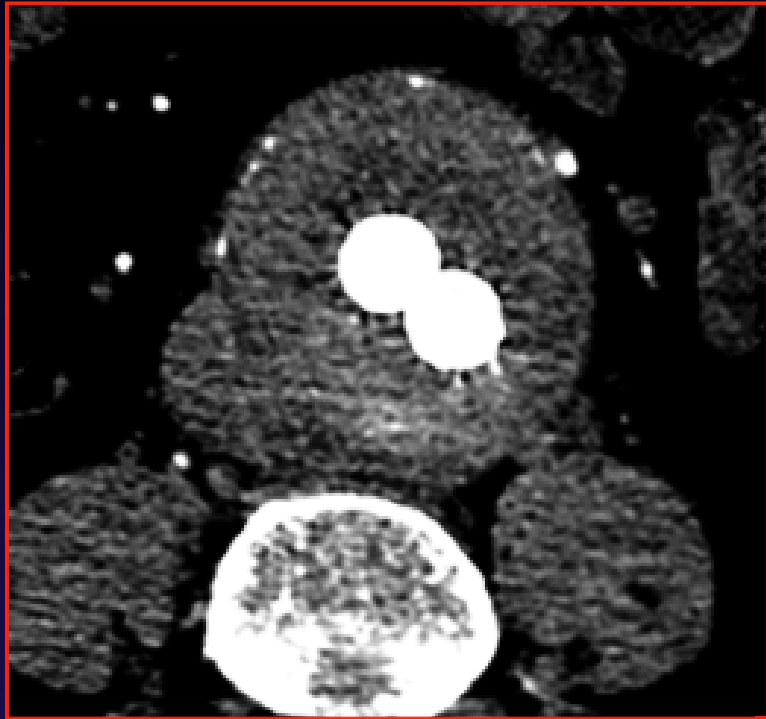
***100 sec***



***Pre-contrast***

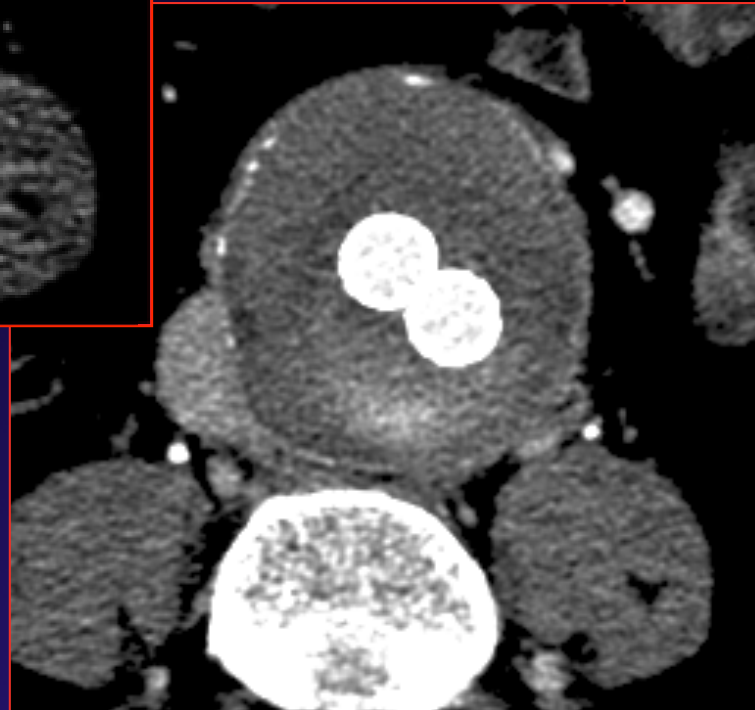


# ~~Endoleak~~



**24 sec**

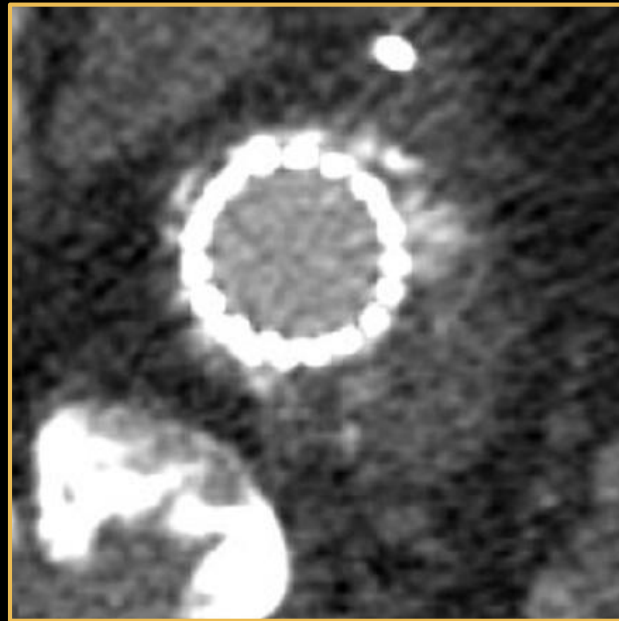
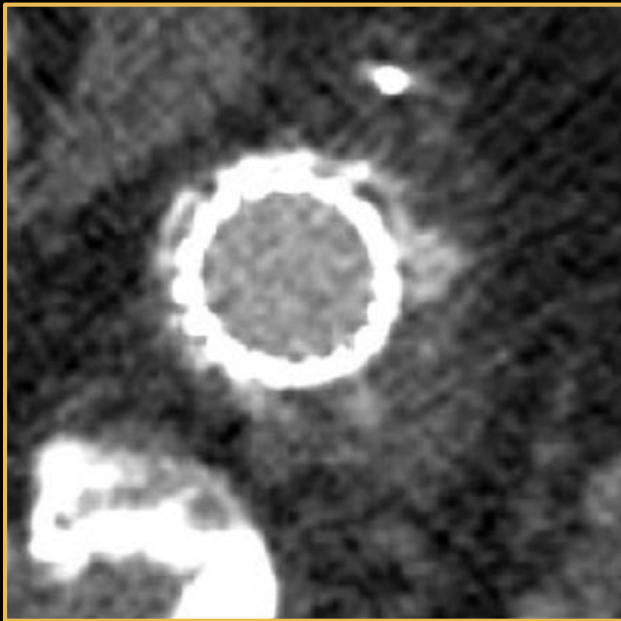
**100 sec**



**Pre-contrast**

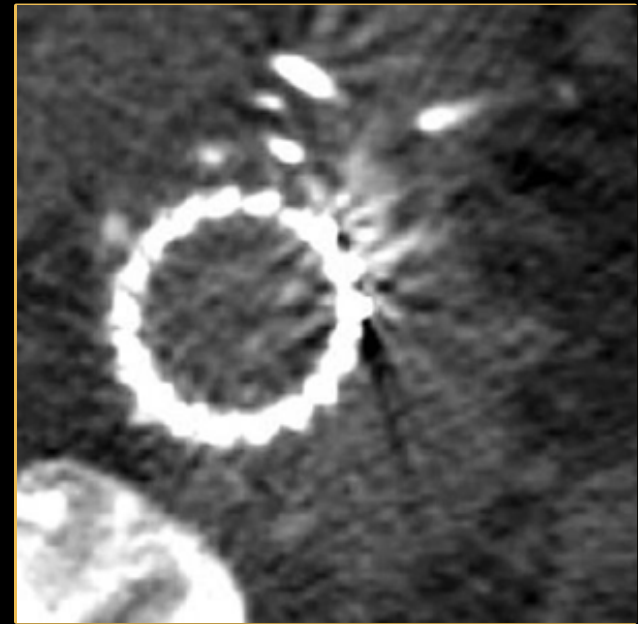
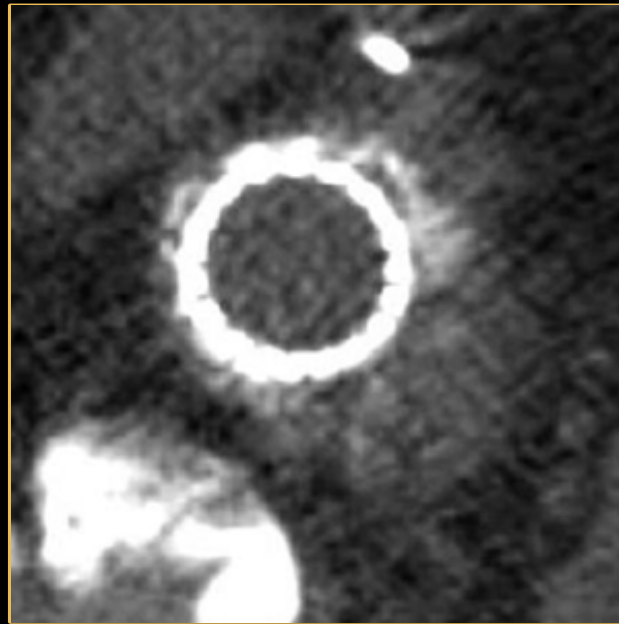
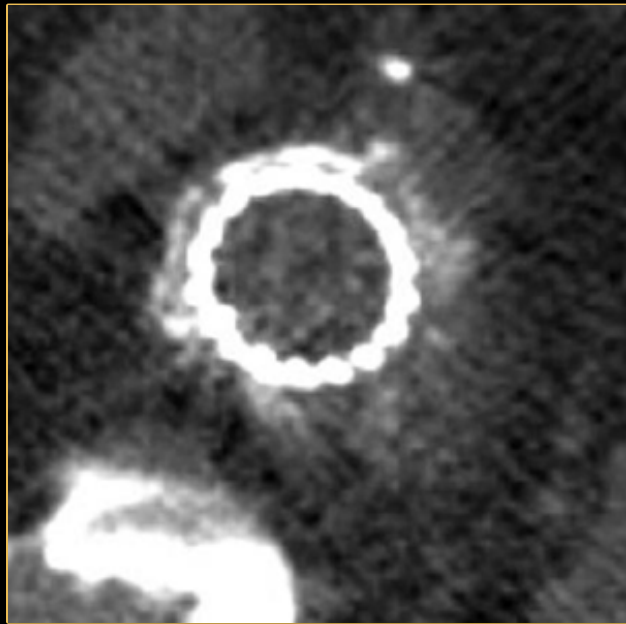


# Endoleak





# No Endoleak



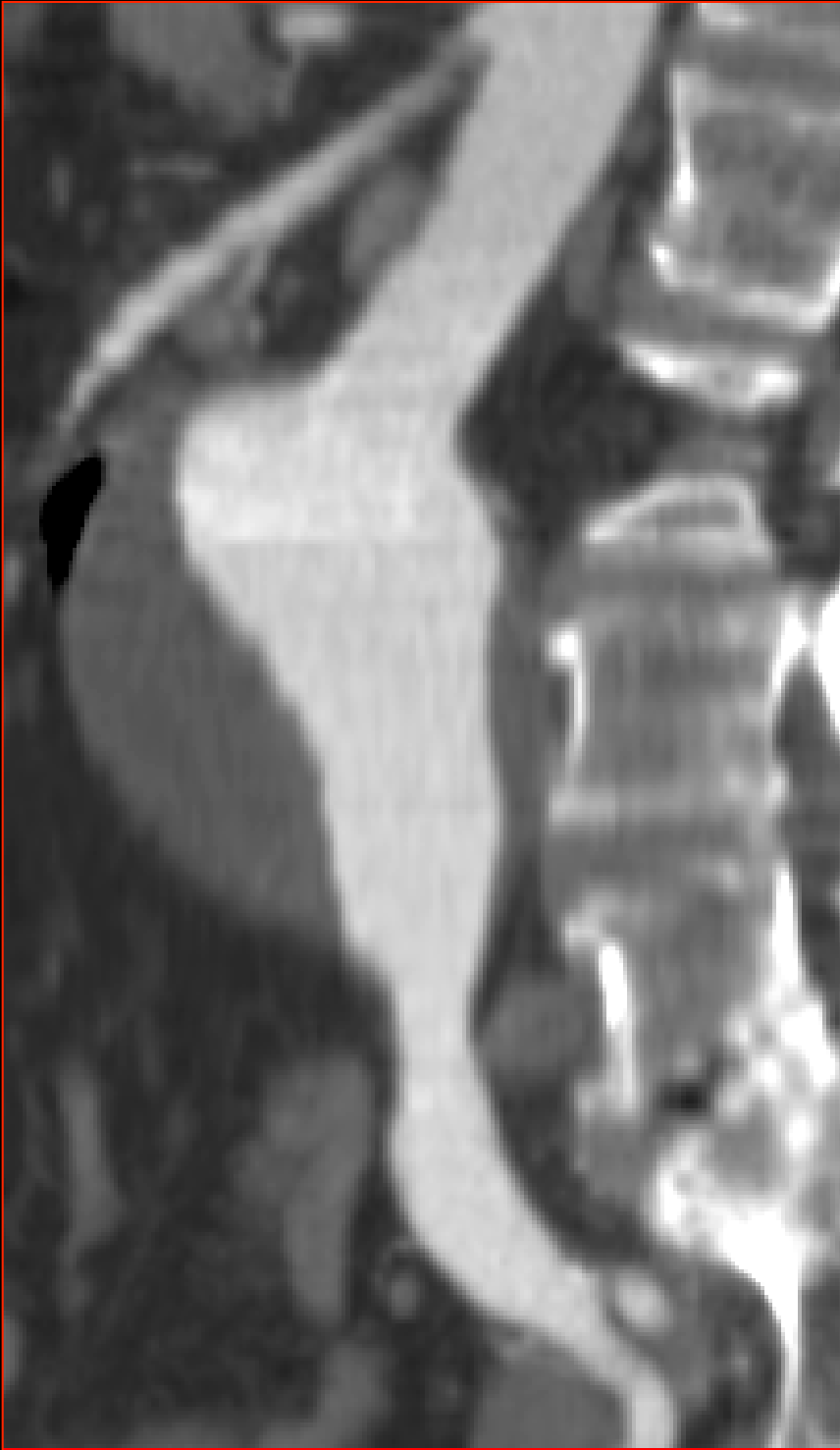


# Chronic Assessment

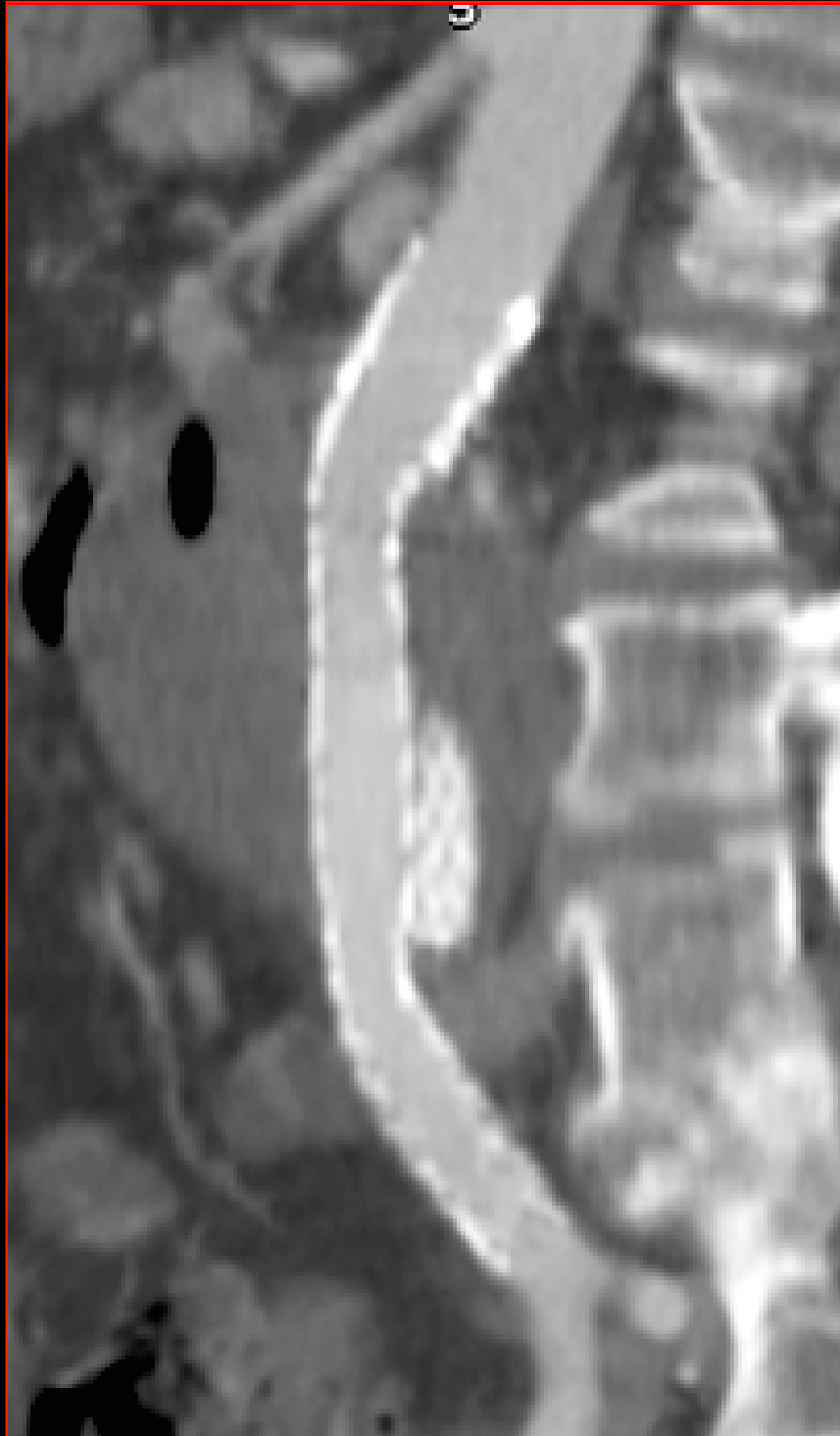
- ✦ Endoleak
- ✦ Stent-graft migration
- ✦ Stent-graft integrity
- ✦ Aortoiliac conformational changes
- ✦ Aneurysm size



***3 wks pre***

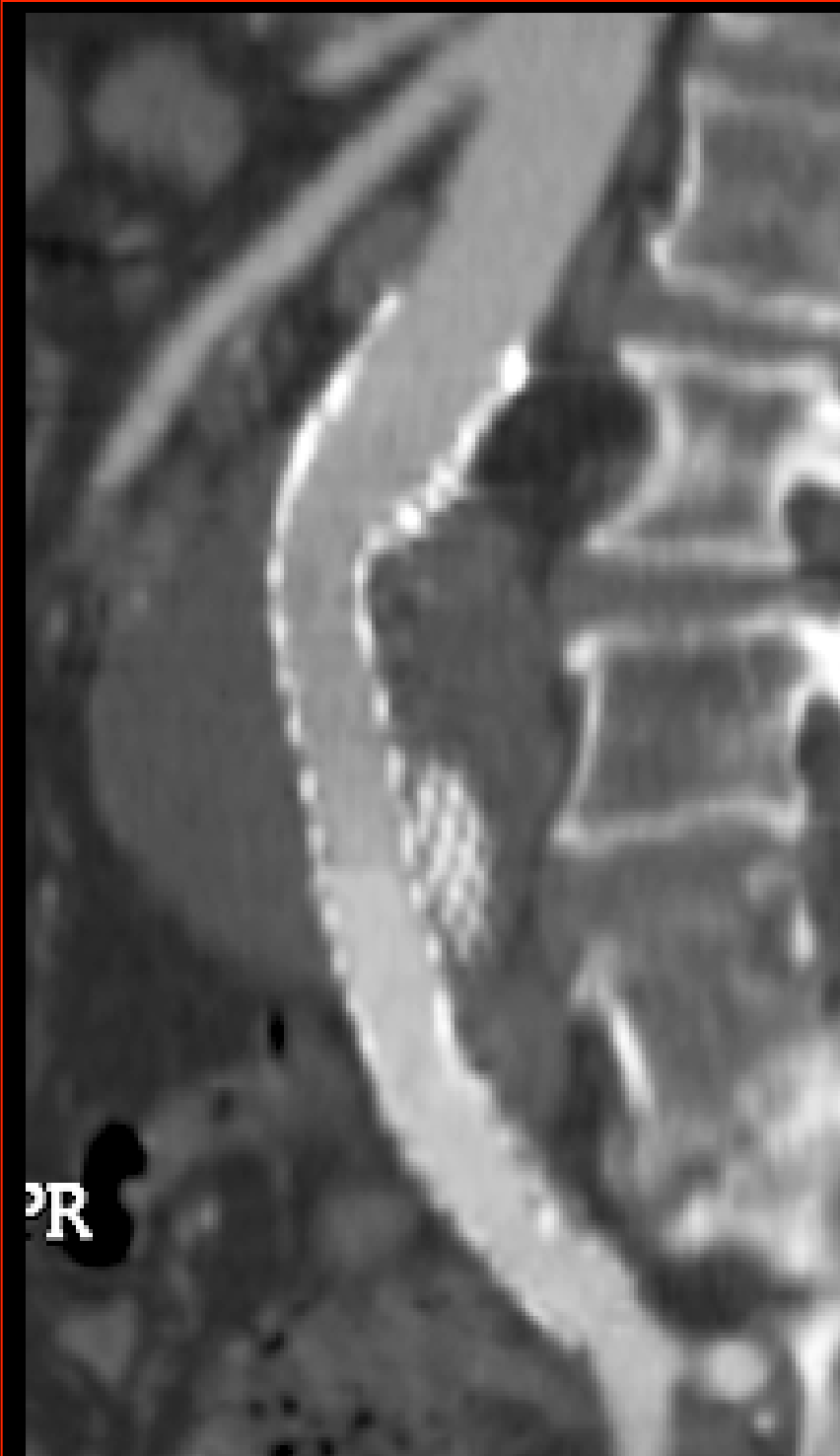






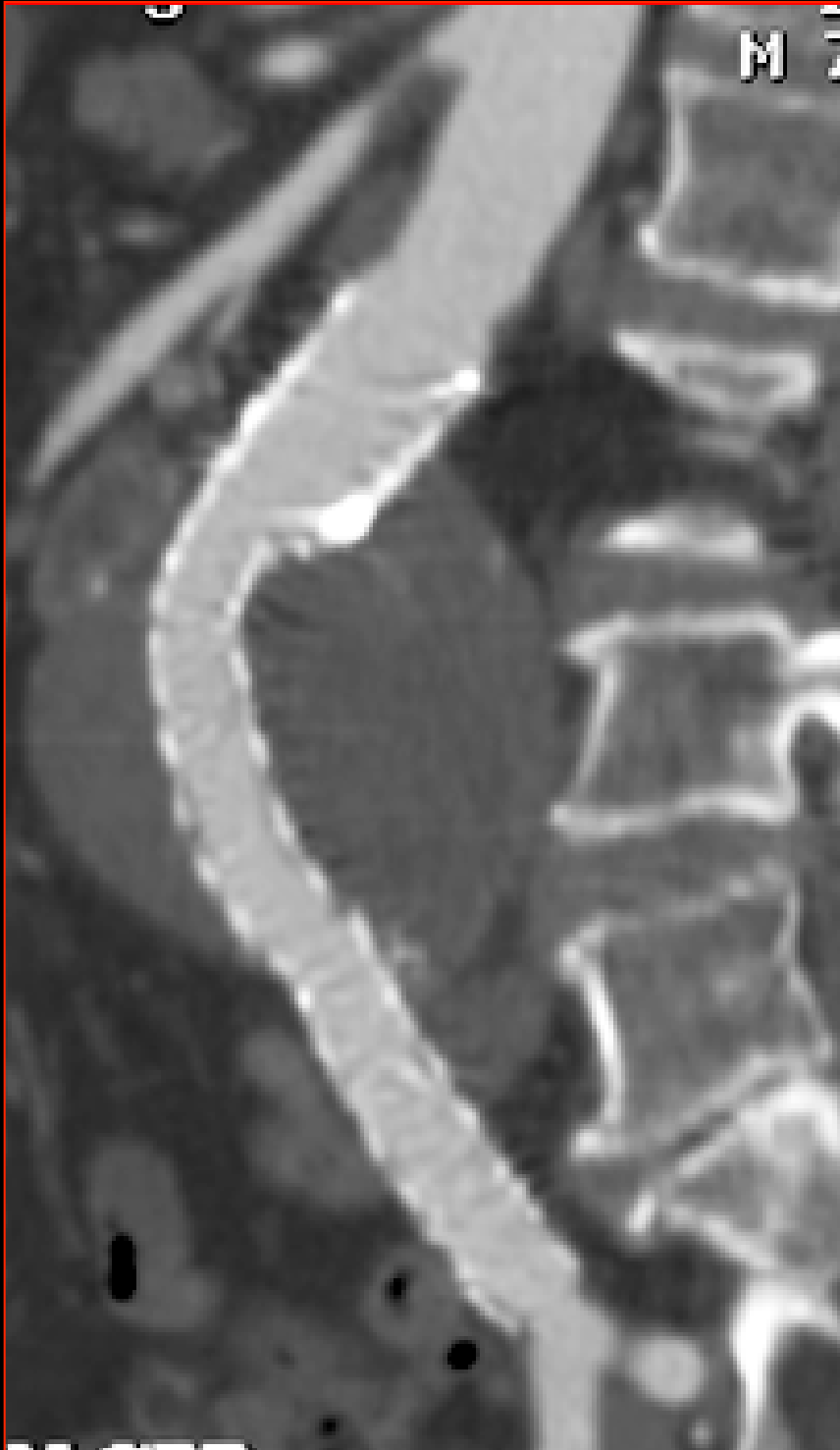
***1 day post***





***7 mos post***

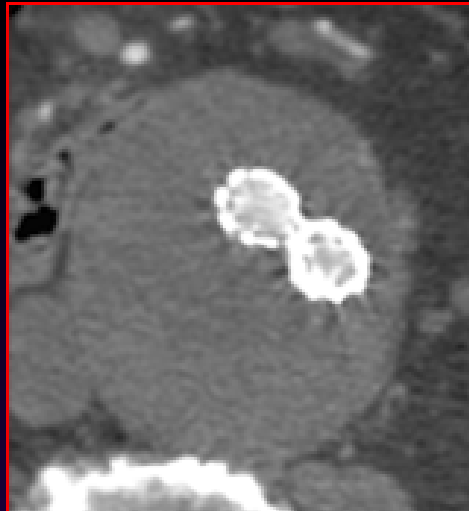
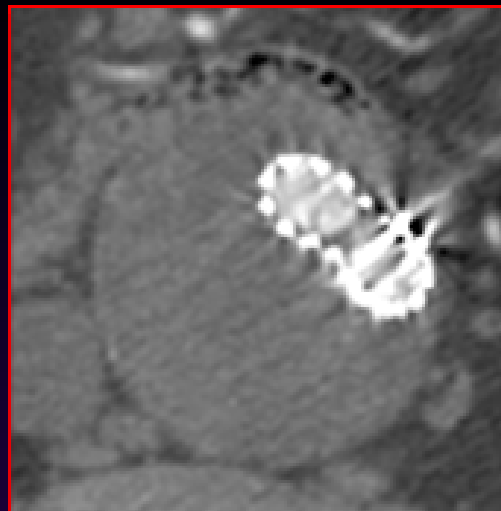




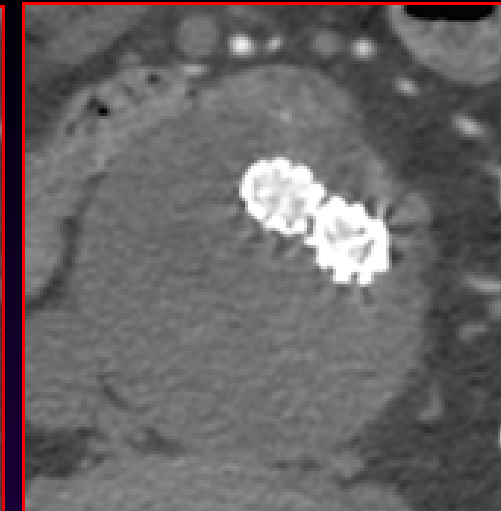
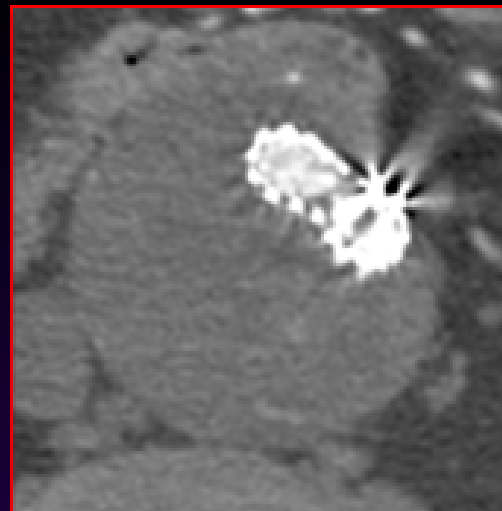
***25 mos post***



**7 mos. post**

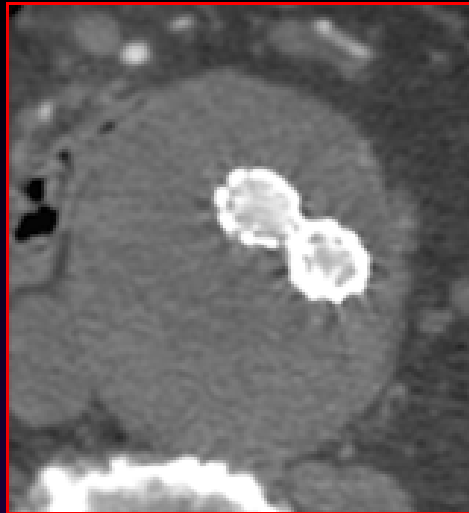
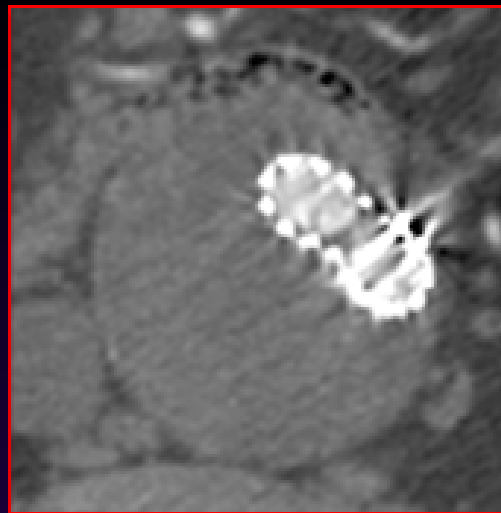


**25 mos. post**

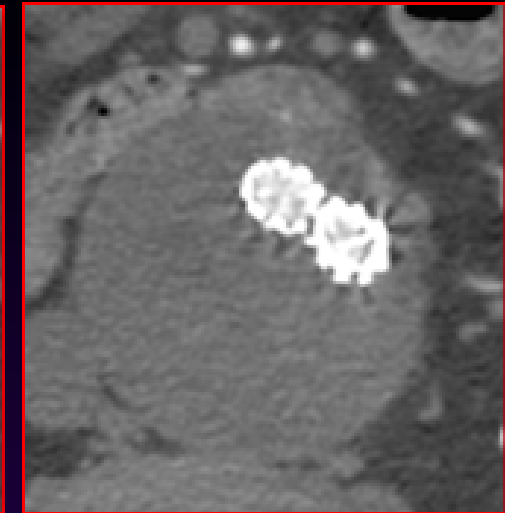
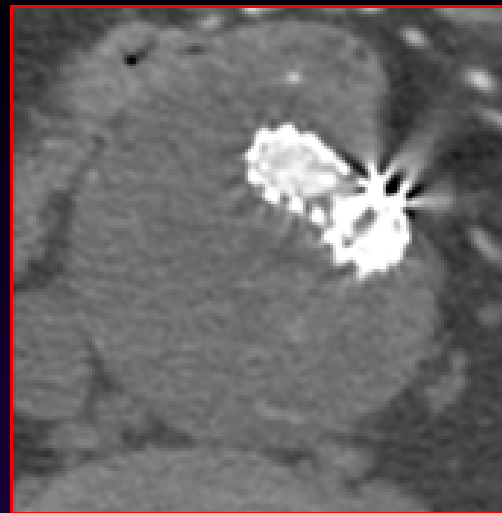


***arterial phase (25 seconds)***

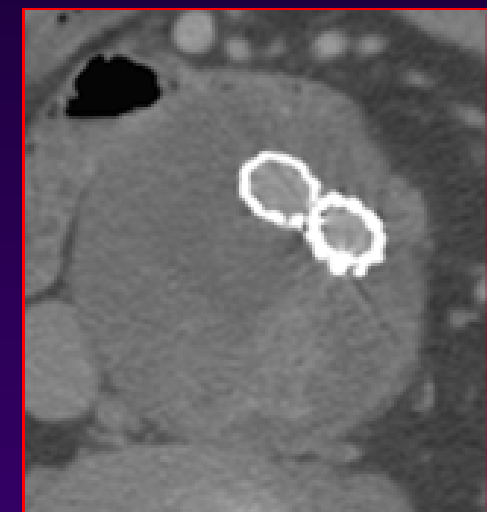
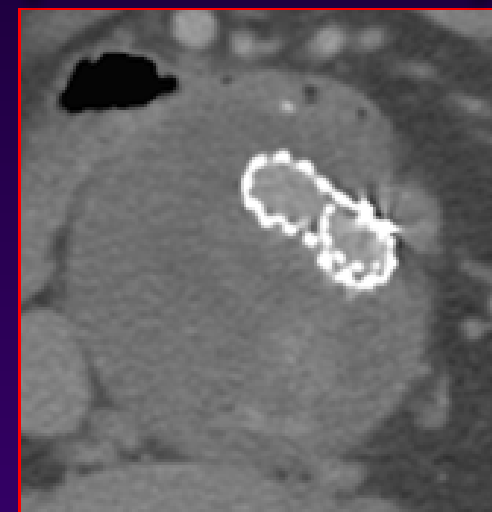
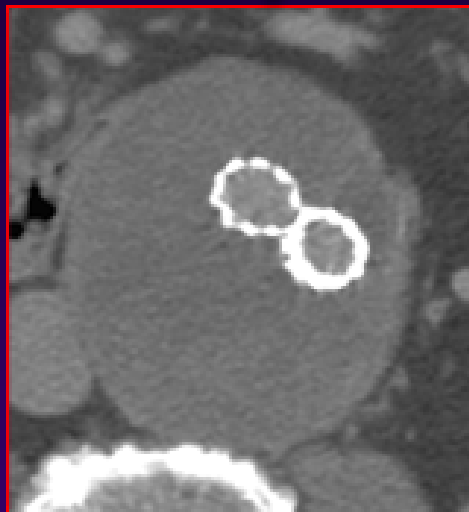
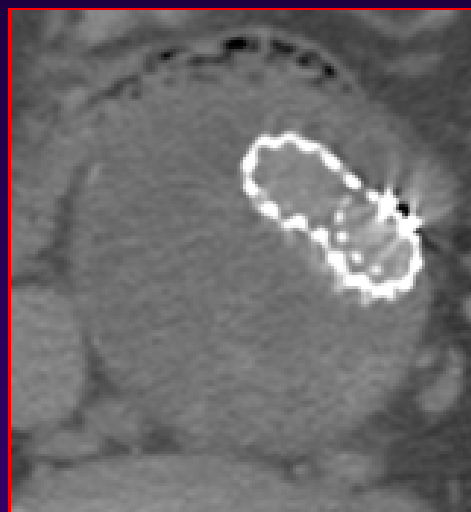
**7 mos. post**



**25 mos. post**



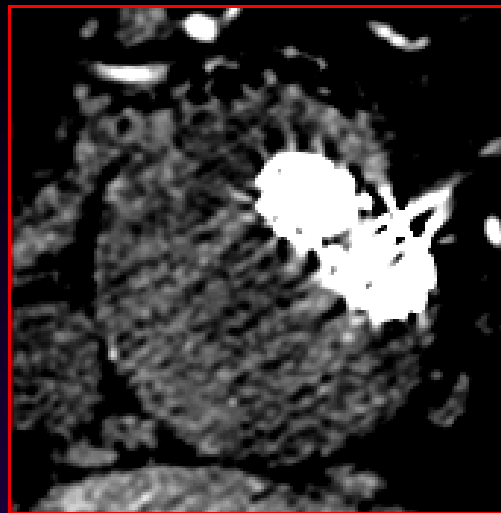
***arterial phase (25 seconds)***



***delay phase (75 seconds)***



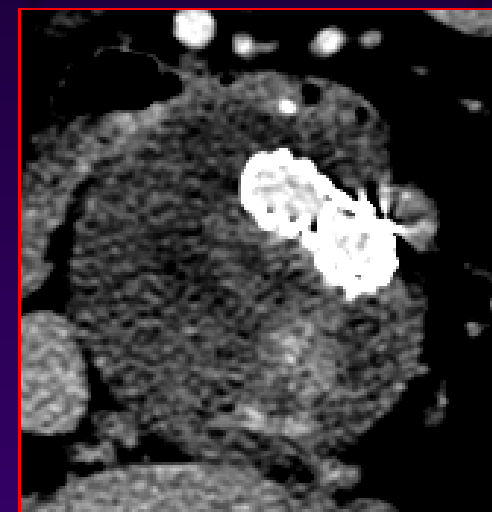
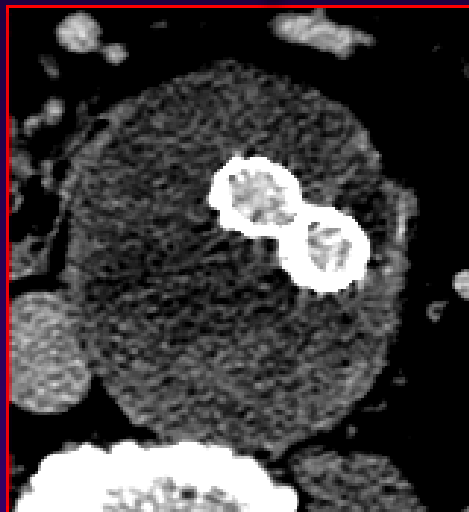
**7 mos. post**



**25 mos. post**



***arterial phase (25 seconds)***



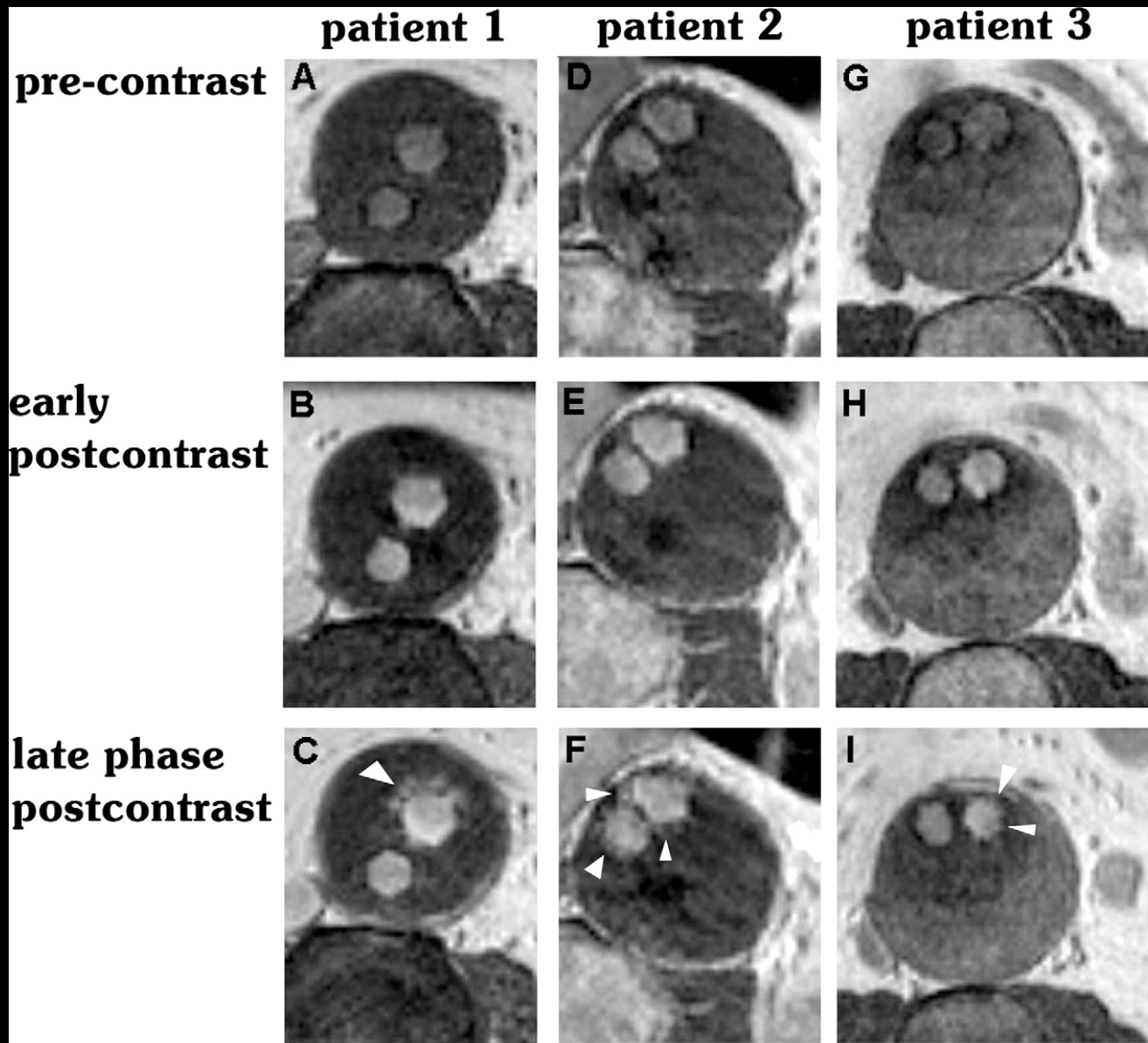
***delay phase (75 seconds)***

# ***Large Endoleak***

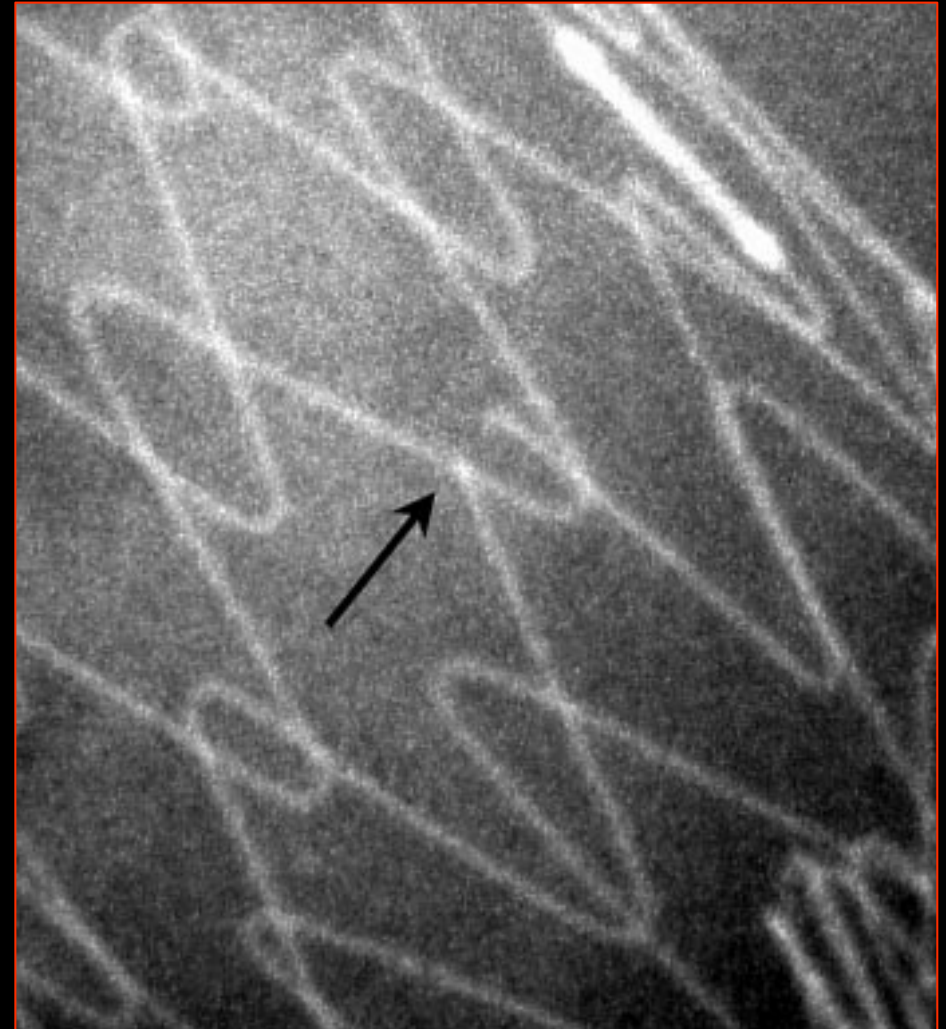
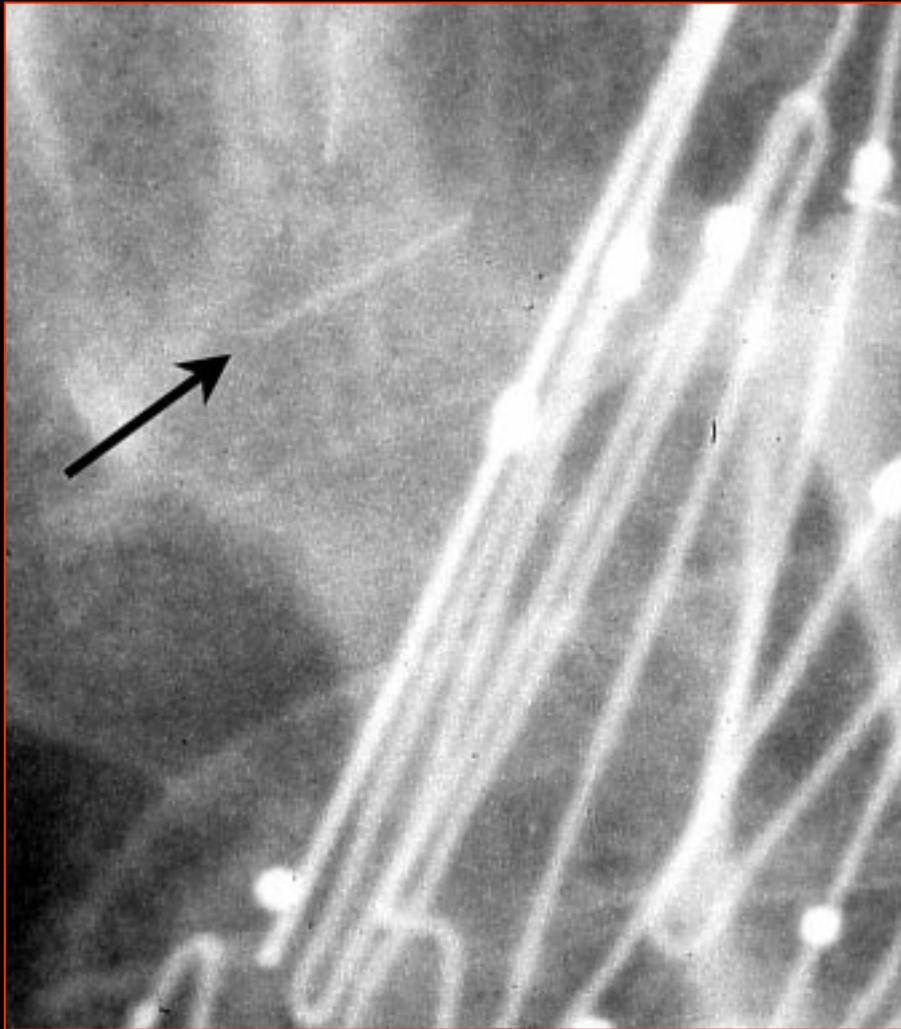




# *Delayed MR ~ 30 min.*



# Projectional Radiography







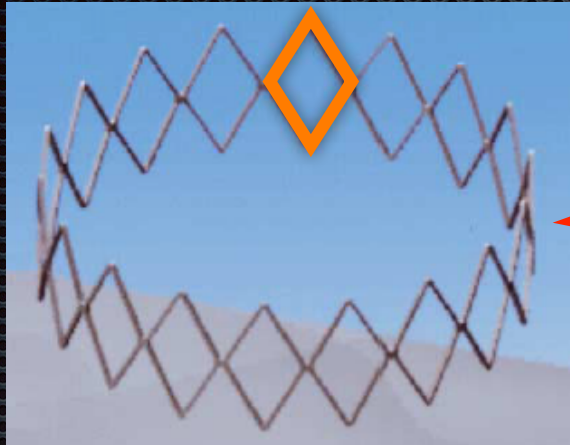
# Radiography Challenges

- **Overpenetration**
- **Underpenetration**
- **Scatter**
- **Motion**
- **Overlap with other device components**
- **Overlap with body tissues**
- **Landmarks**



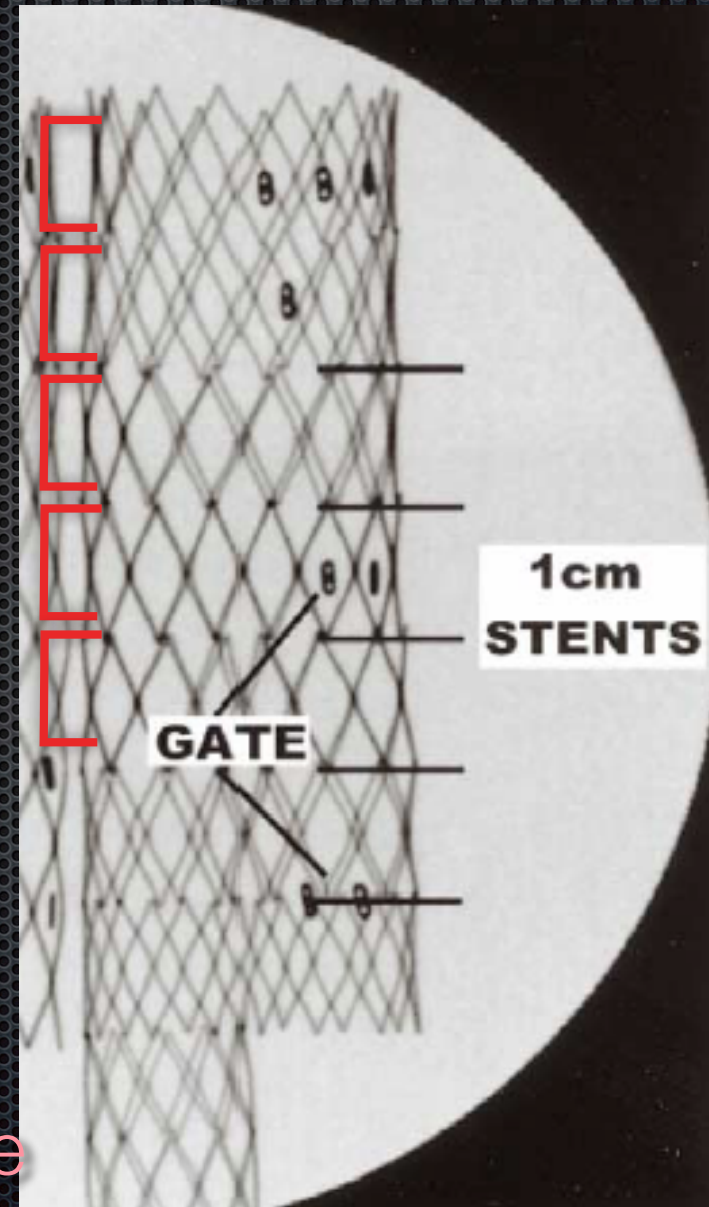
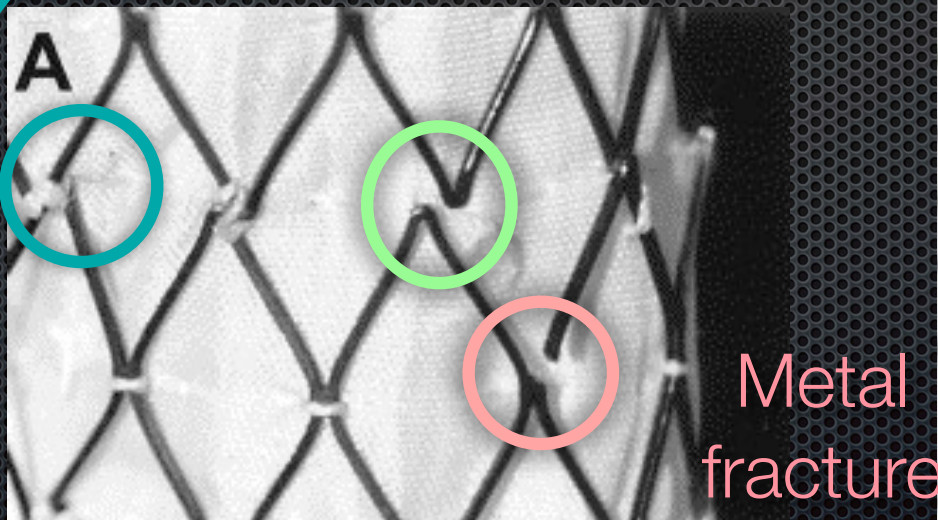
# Ring & Suture Design

Diamond-shaped lattices

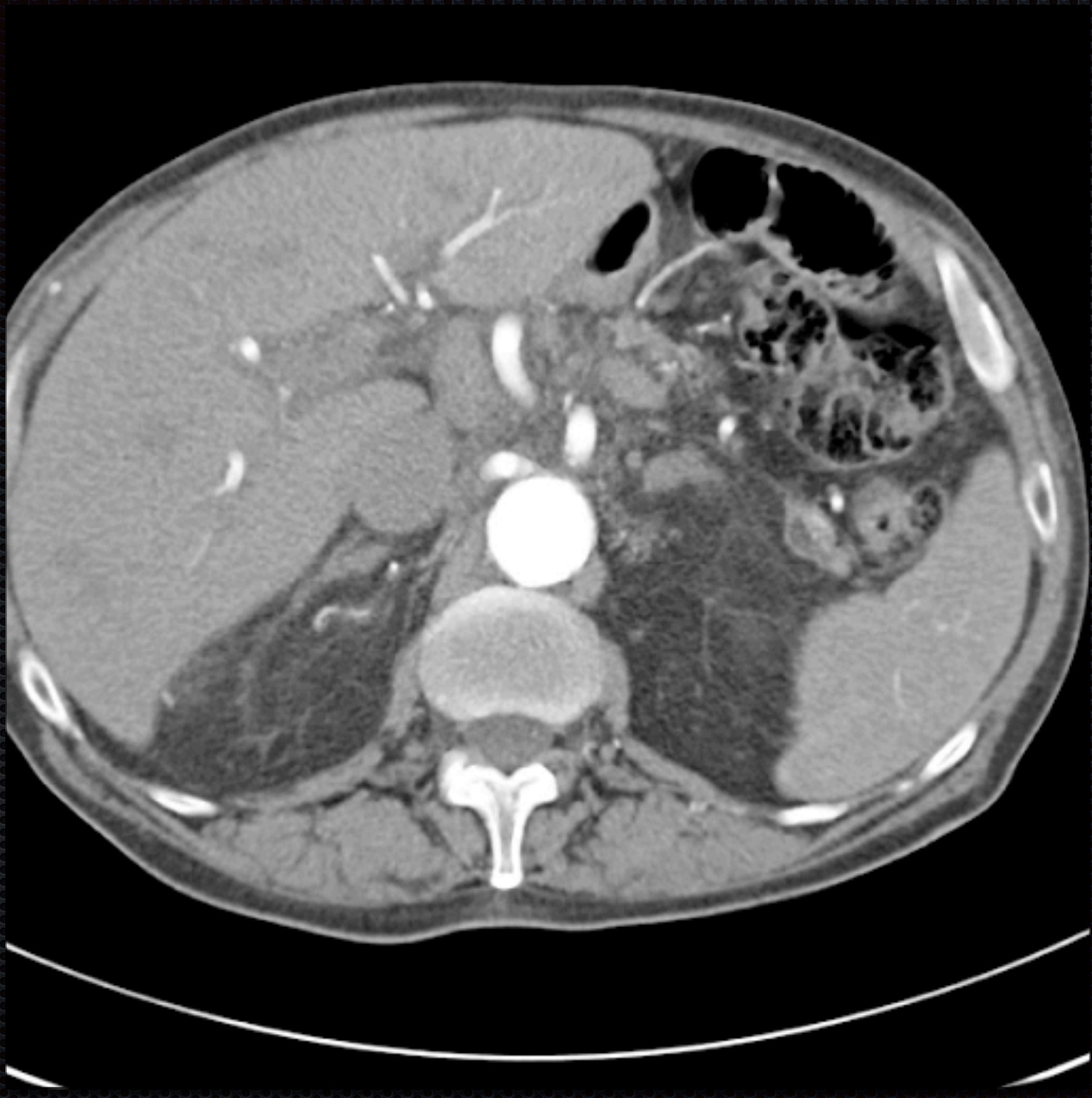


Sutures

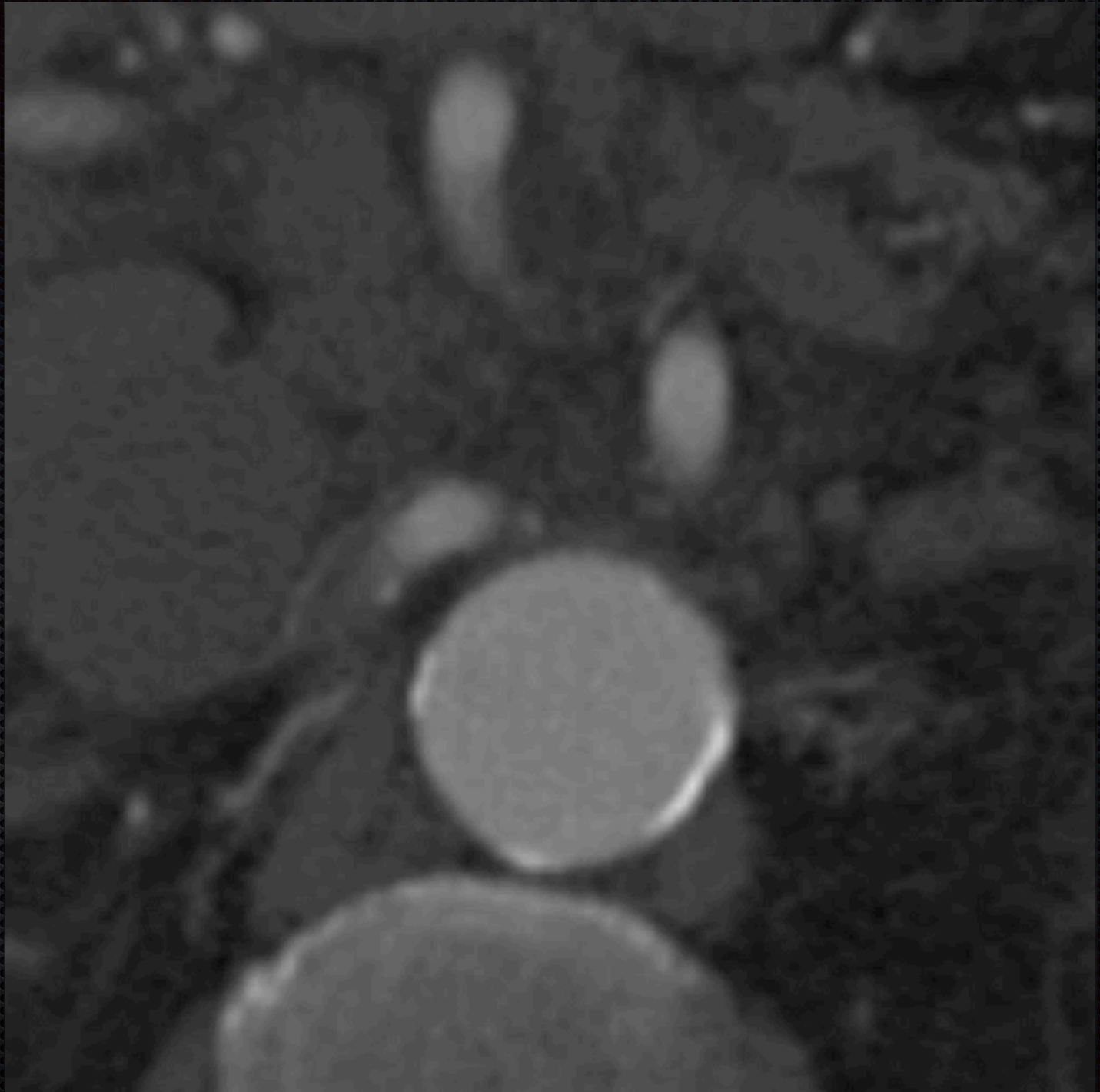
Suture break



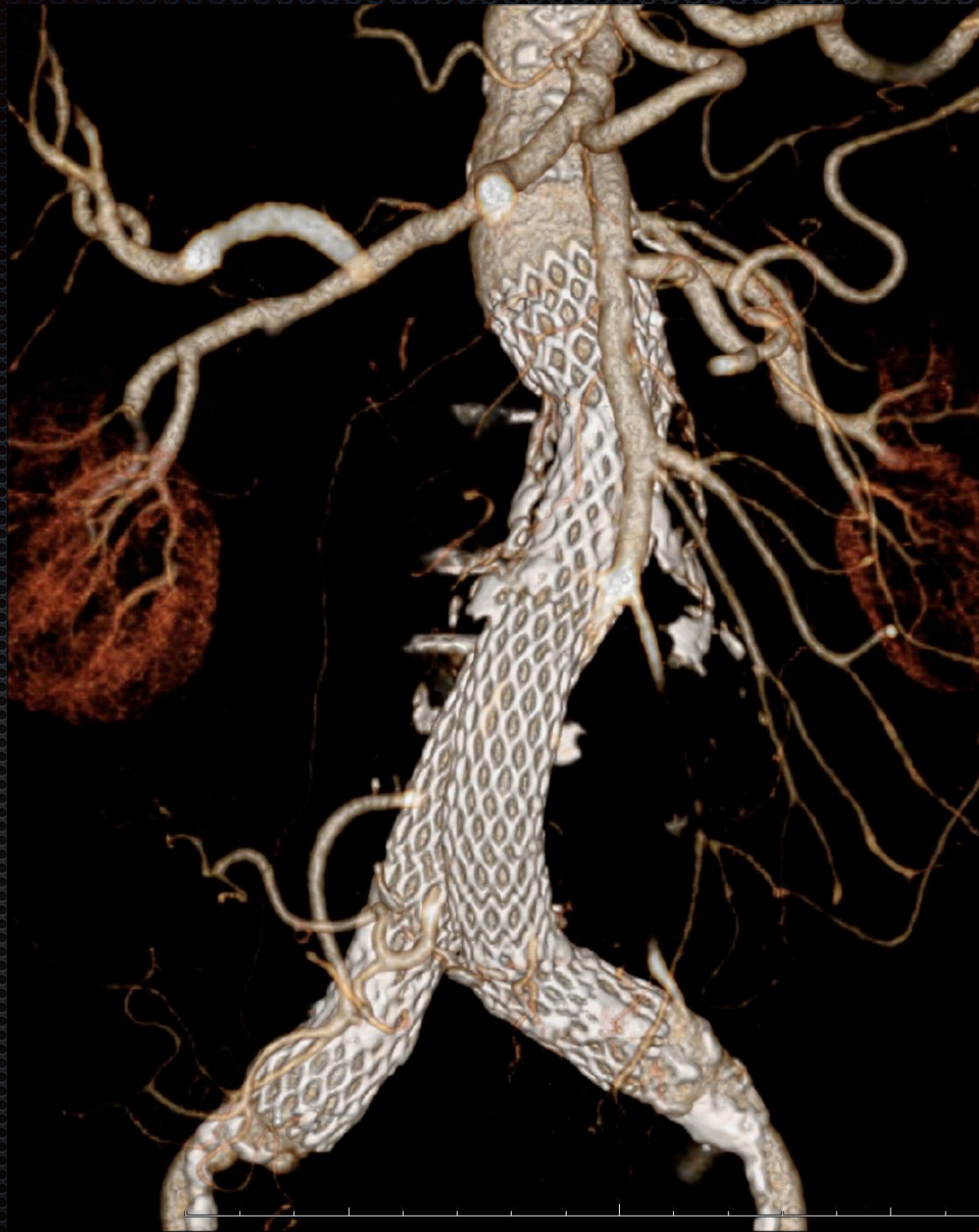




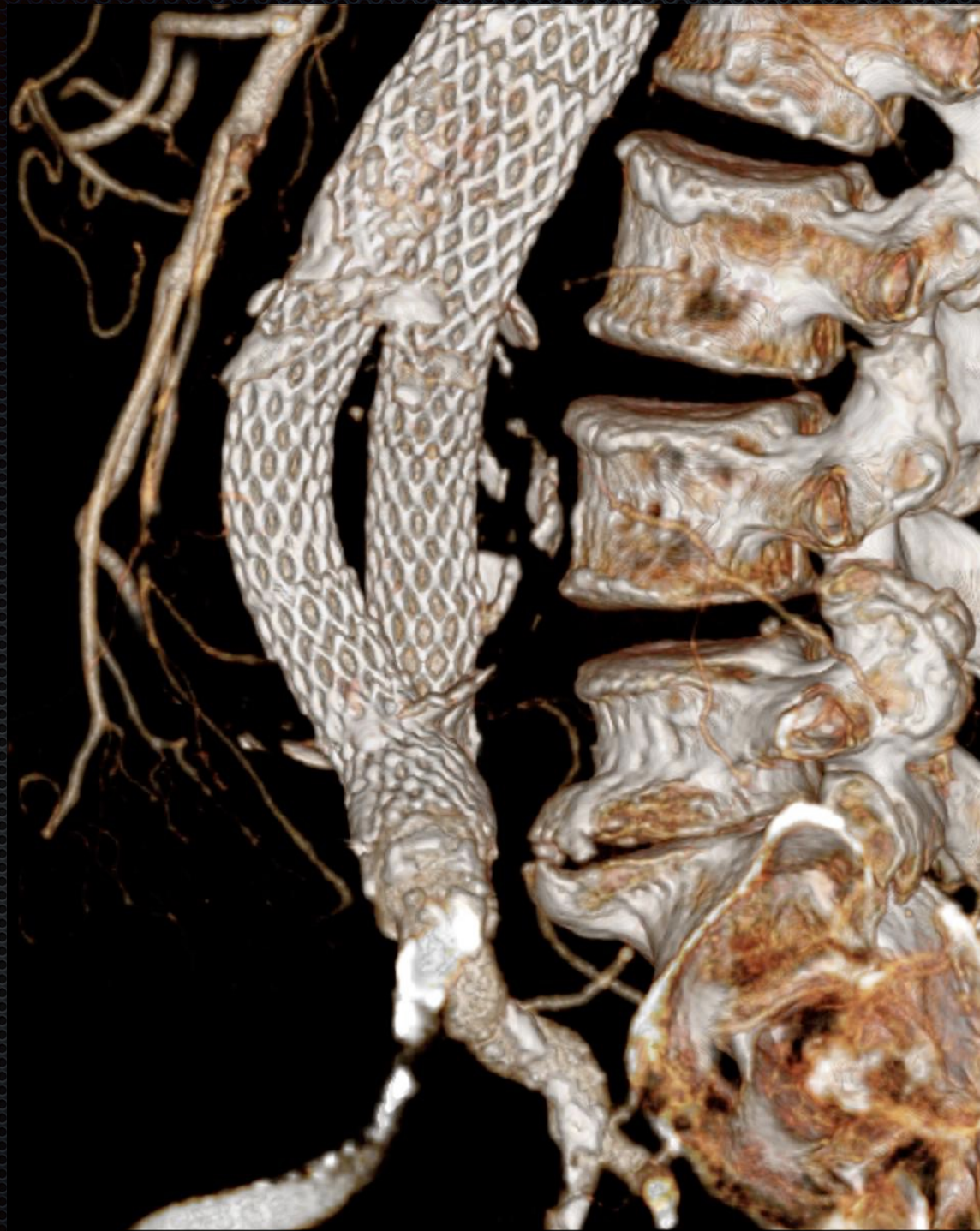
















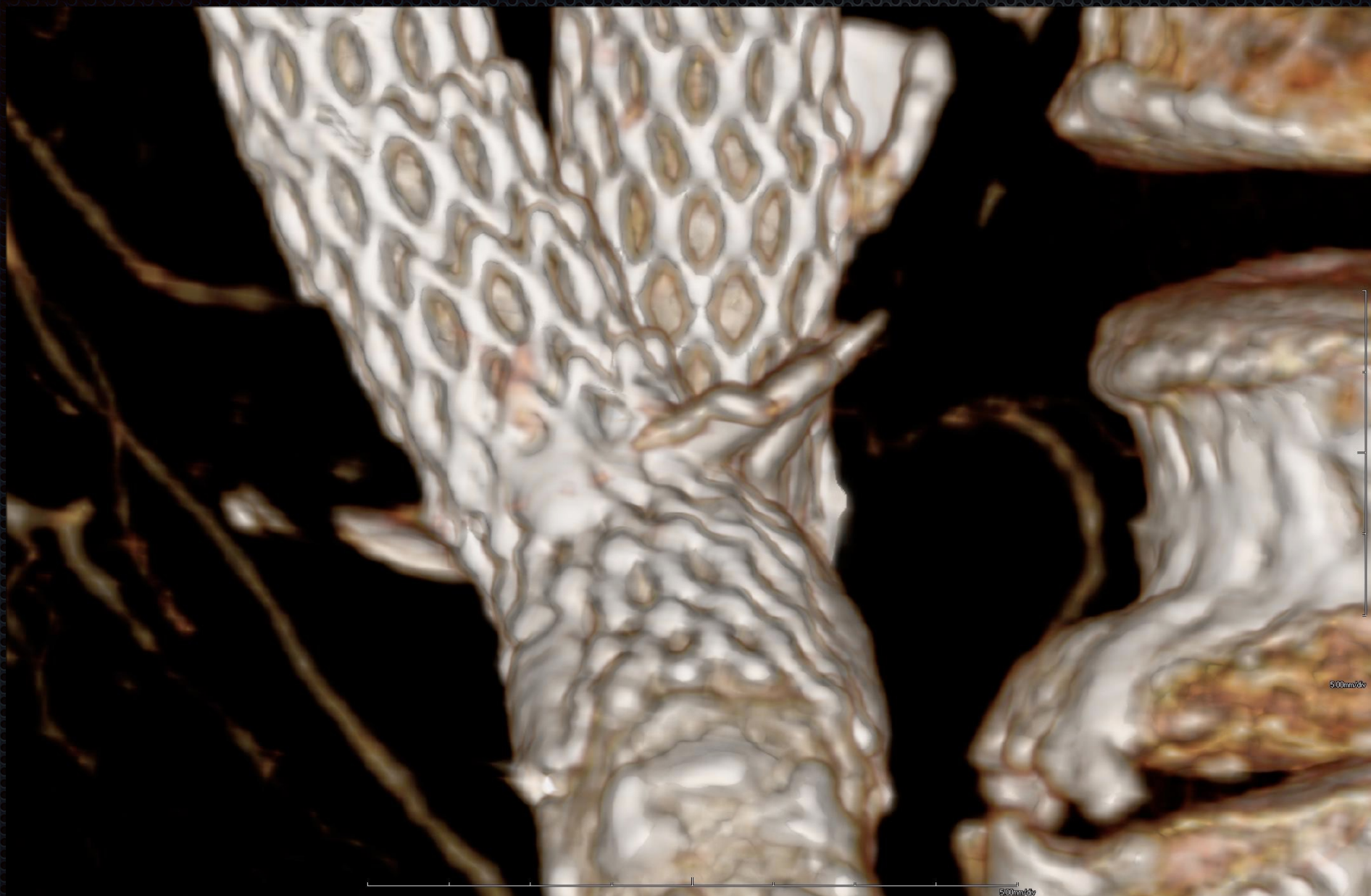




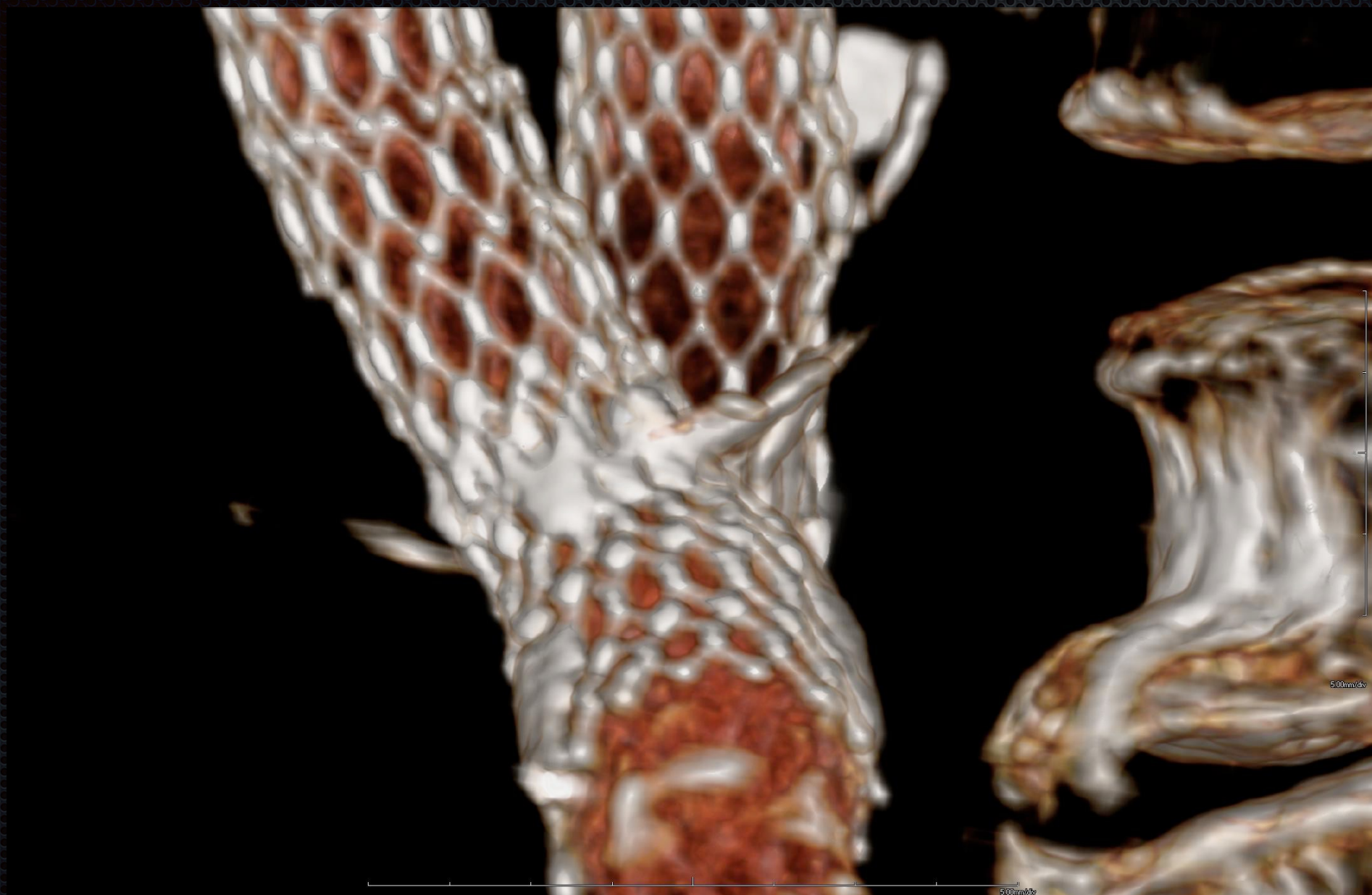




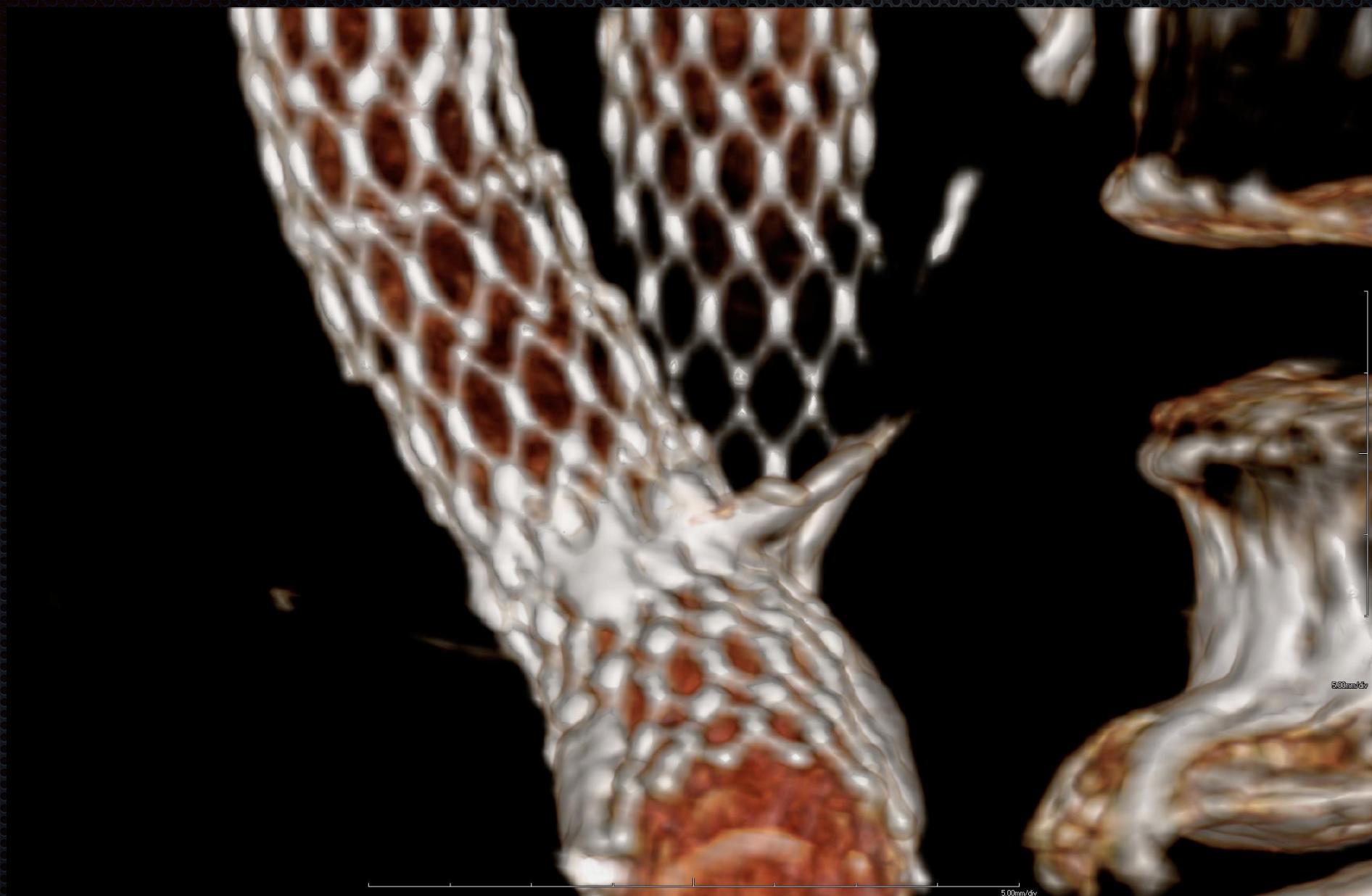




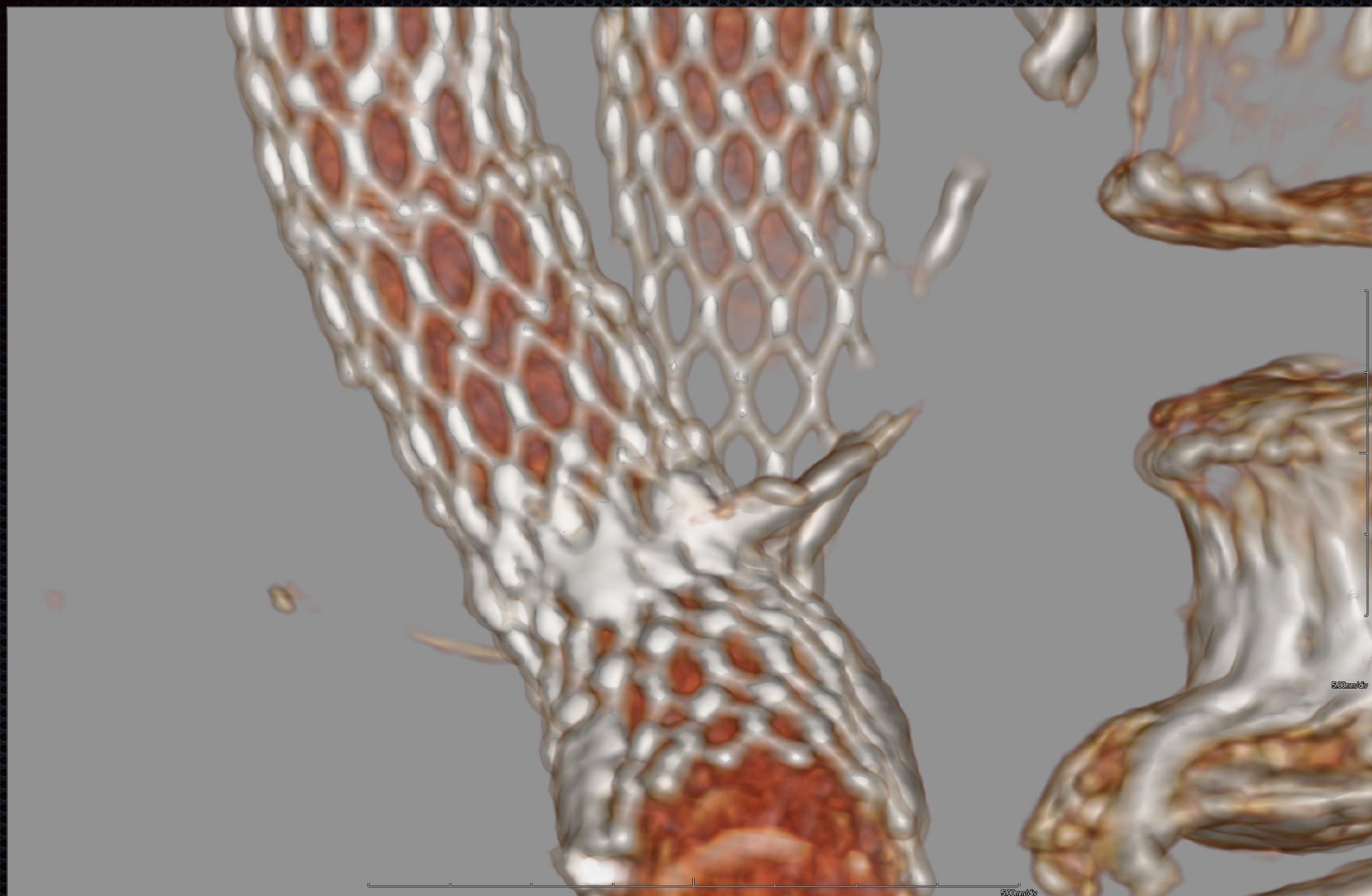














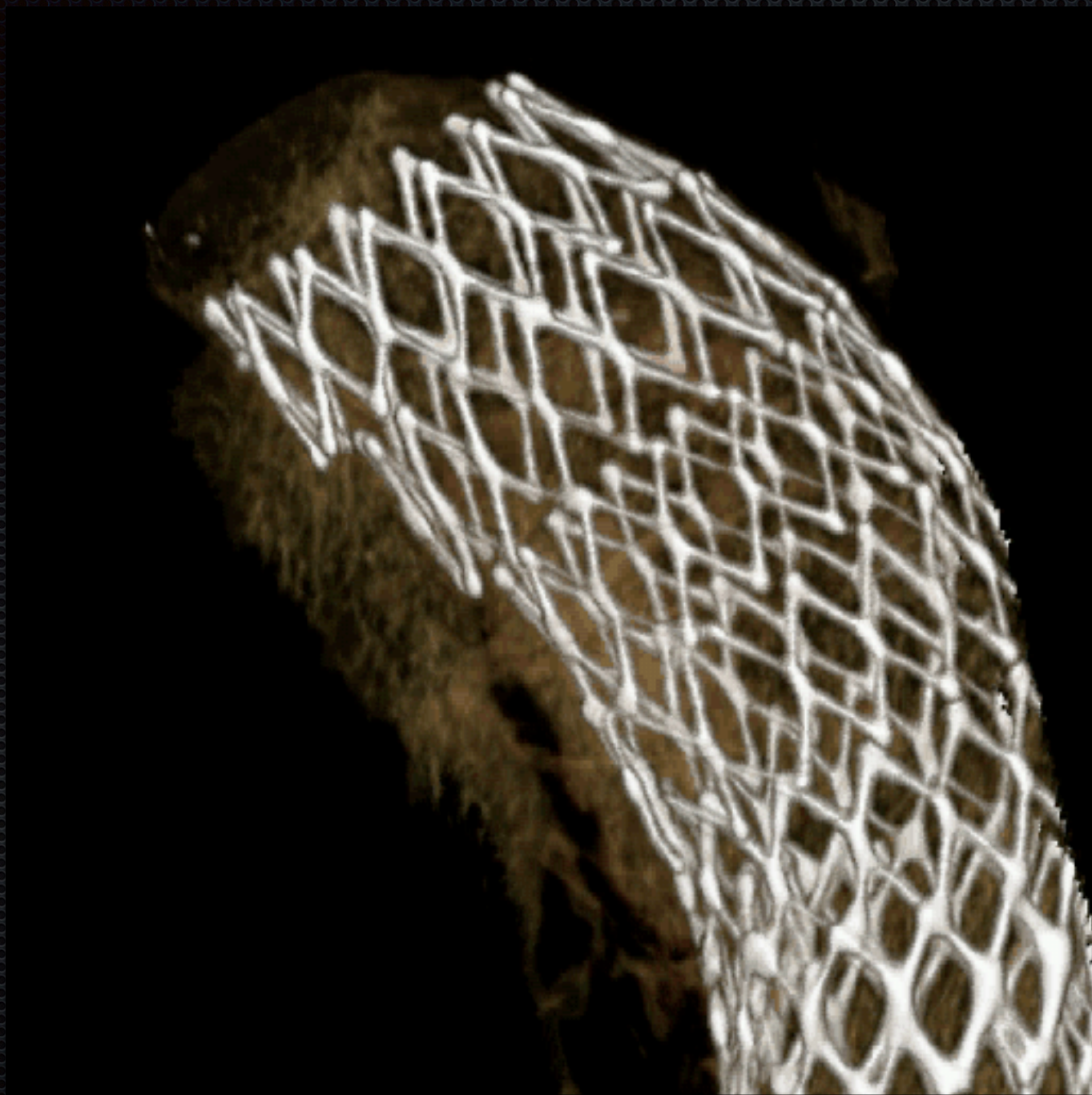
# Secondary Intervention in 15/62 Patients

Complication	Re-Intervention	Severe Bk or Fx	
		Yes	no
Type I EL with migration	SG extension	5	0
Type III EL	SG extension (3) Open repair (1)	4	0
Migration w/o EL	SG extension	2	0
Type II EL	SG extension	0	3
Iliac occlusion	Fem-Fem Bypass	0	1

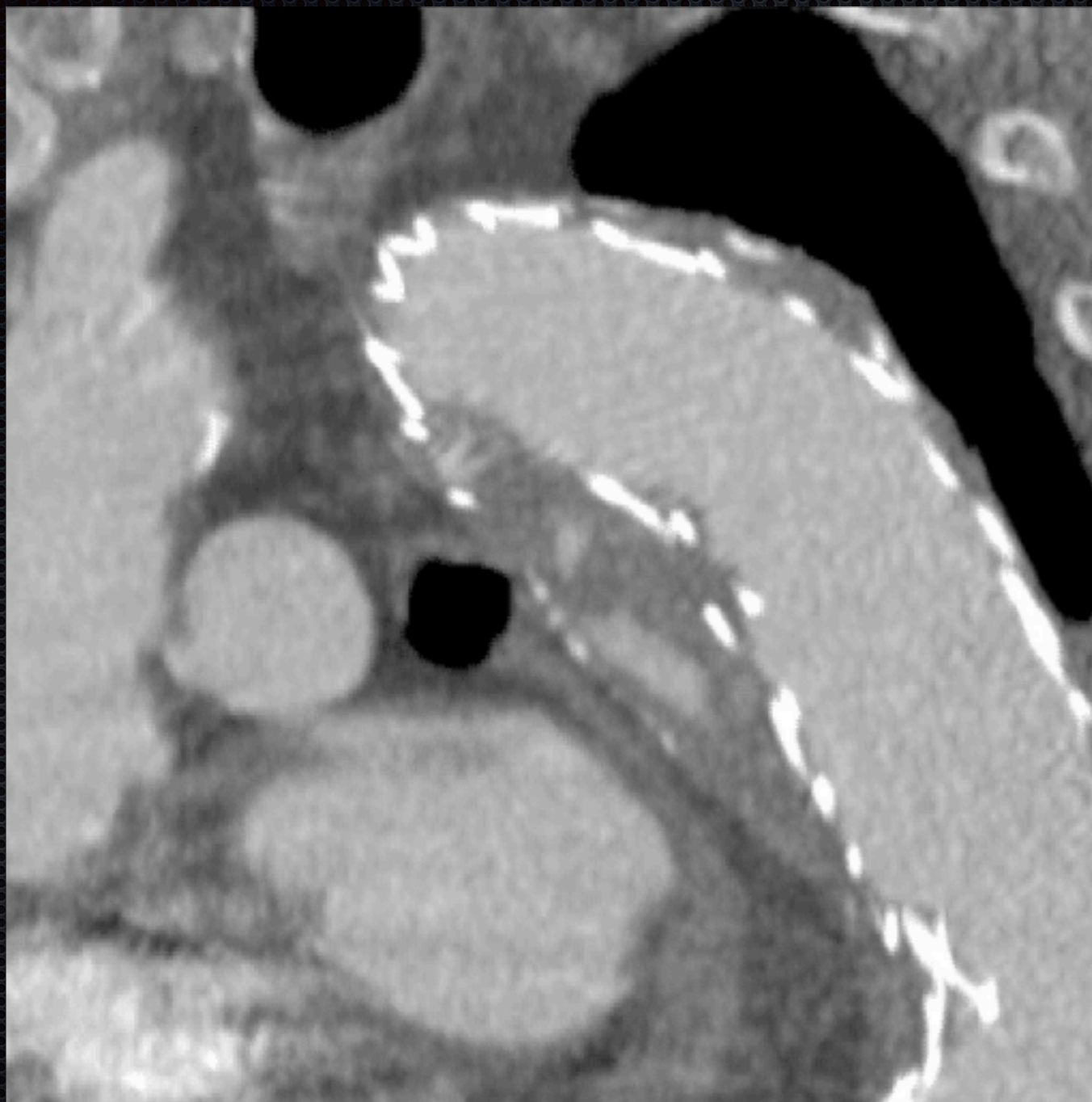




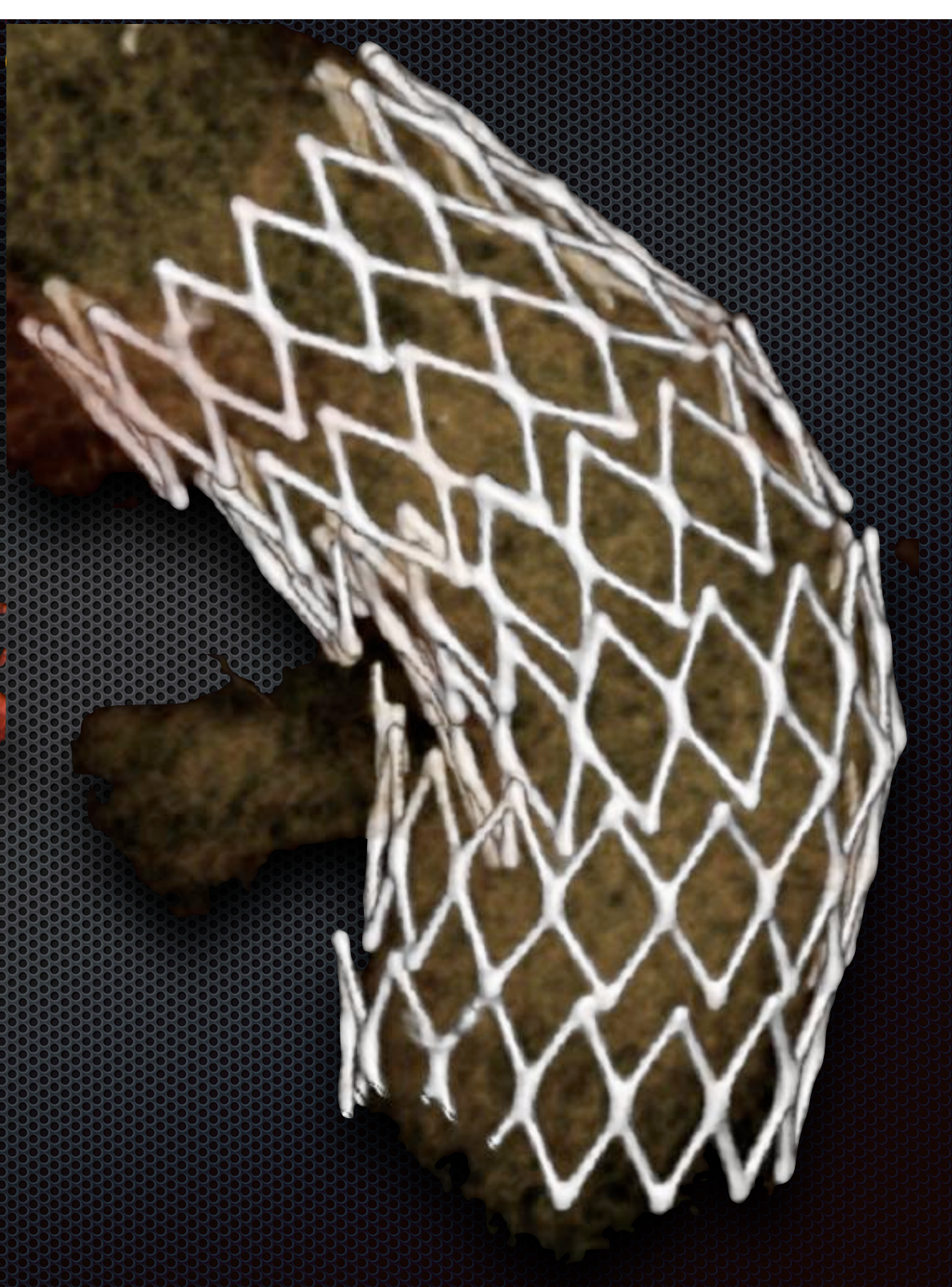




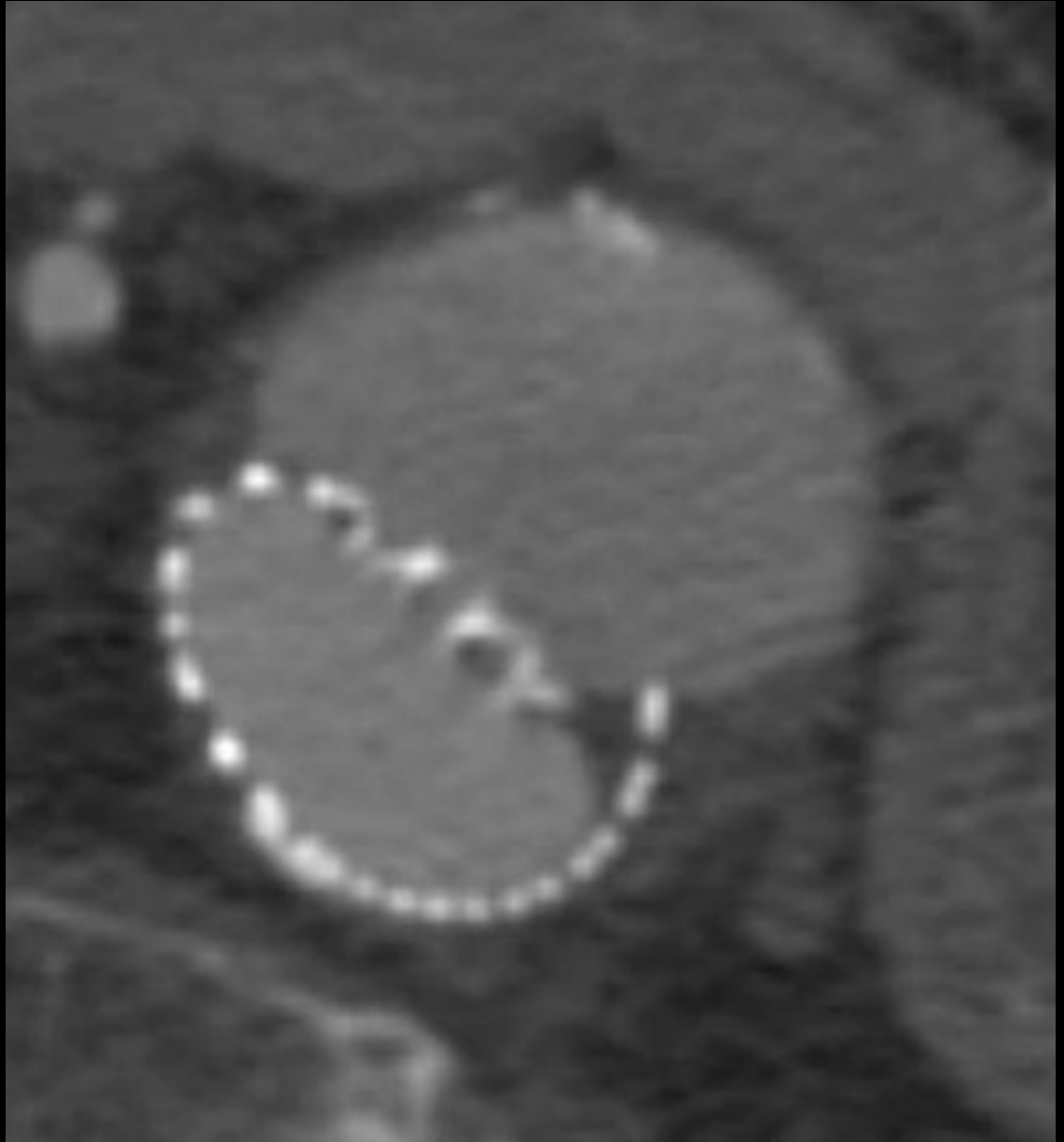
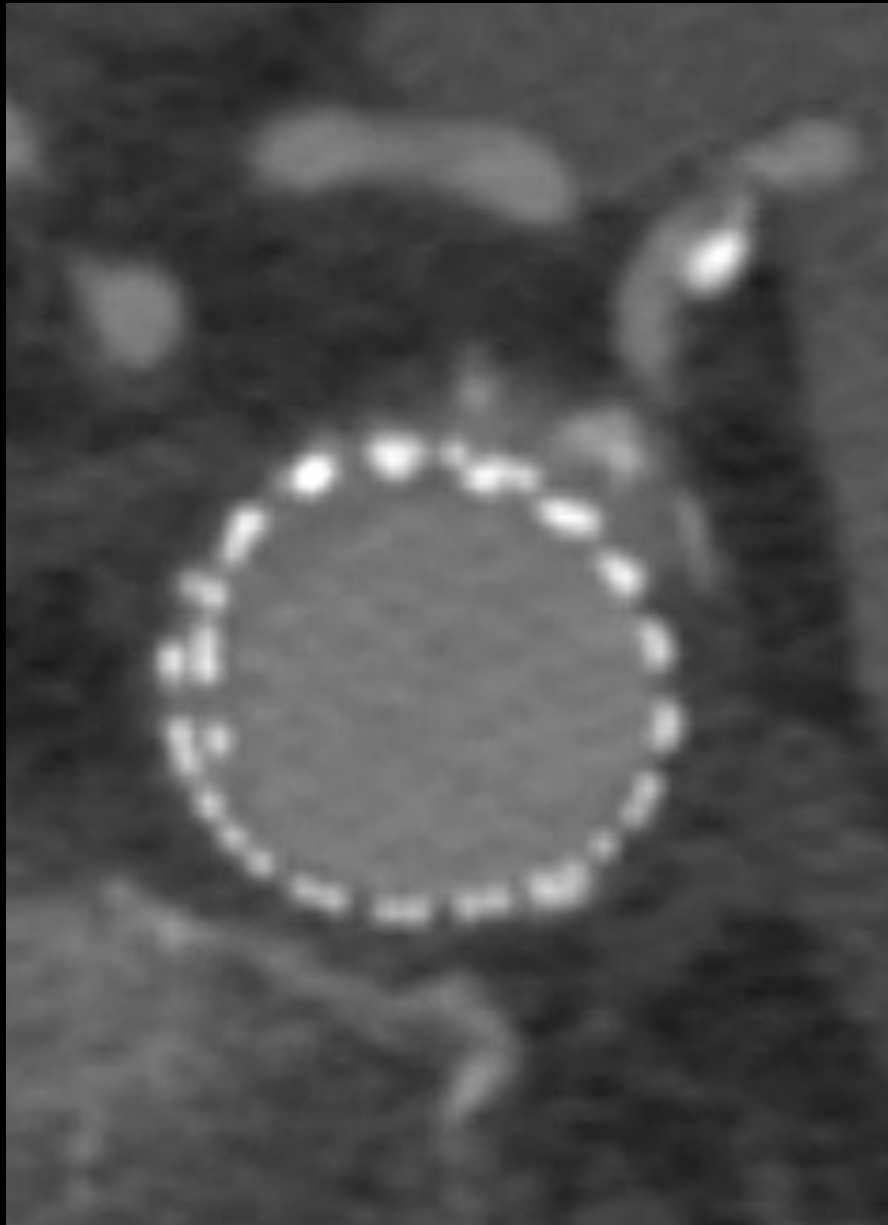




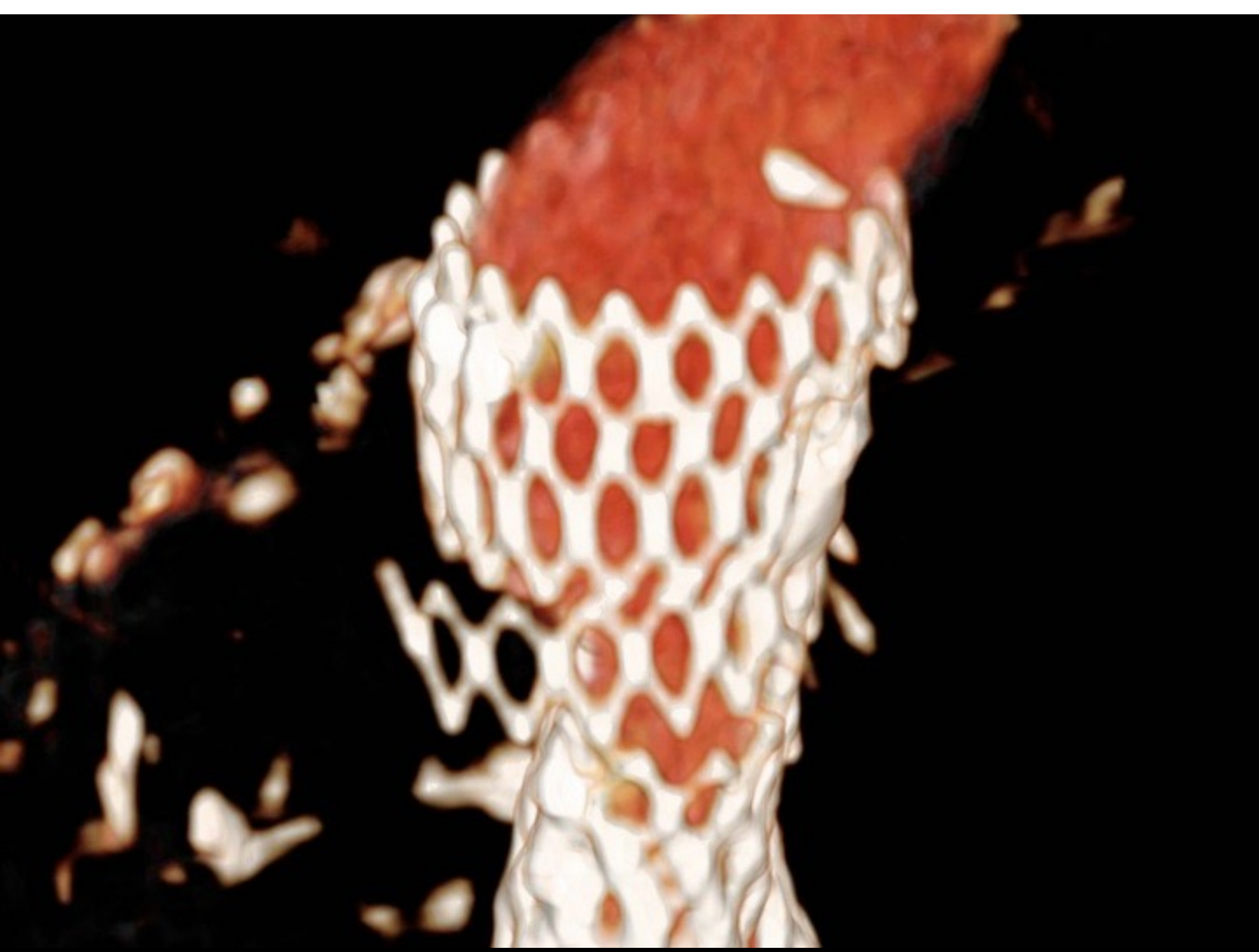






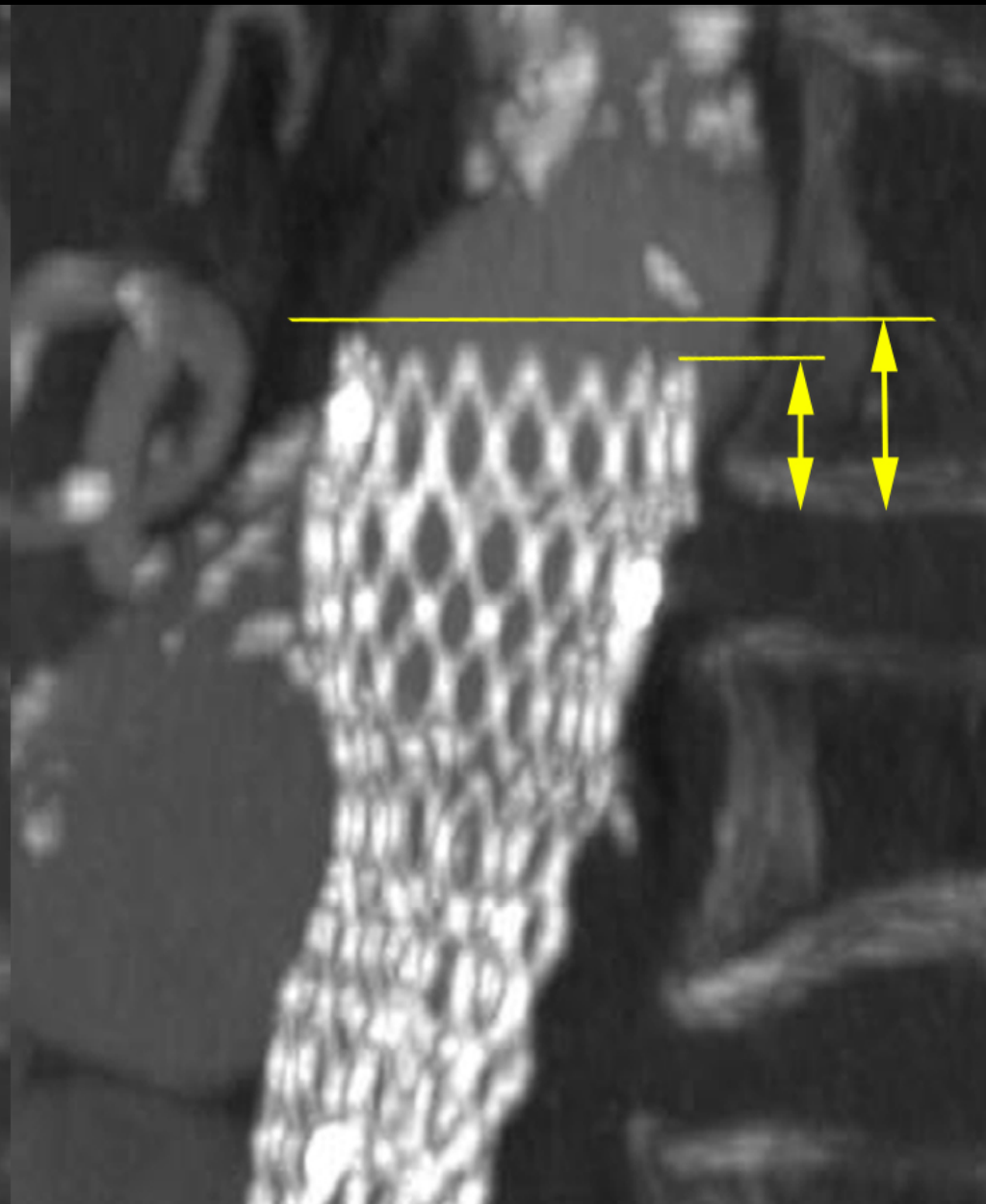
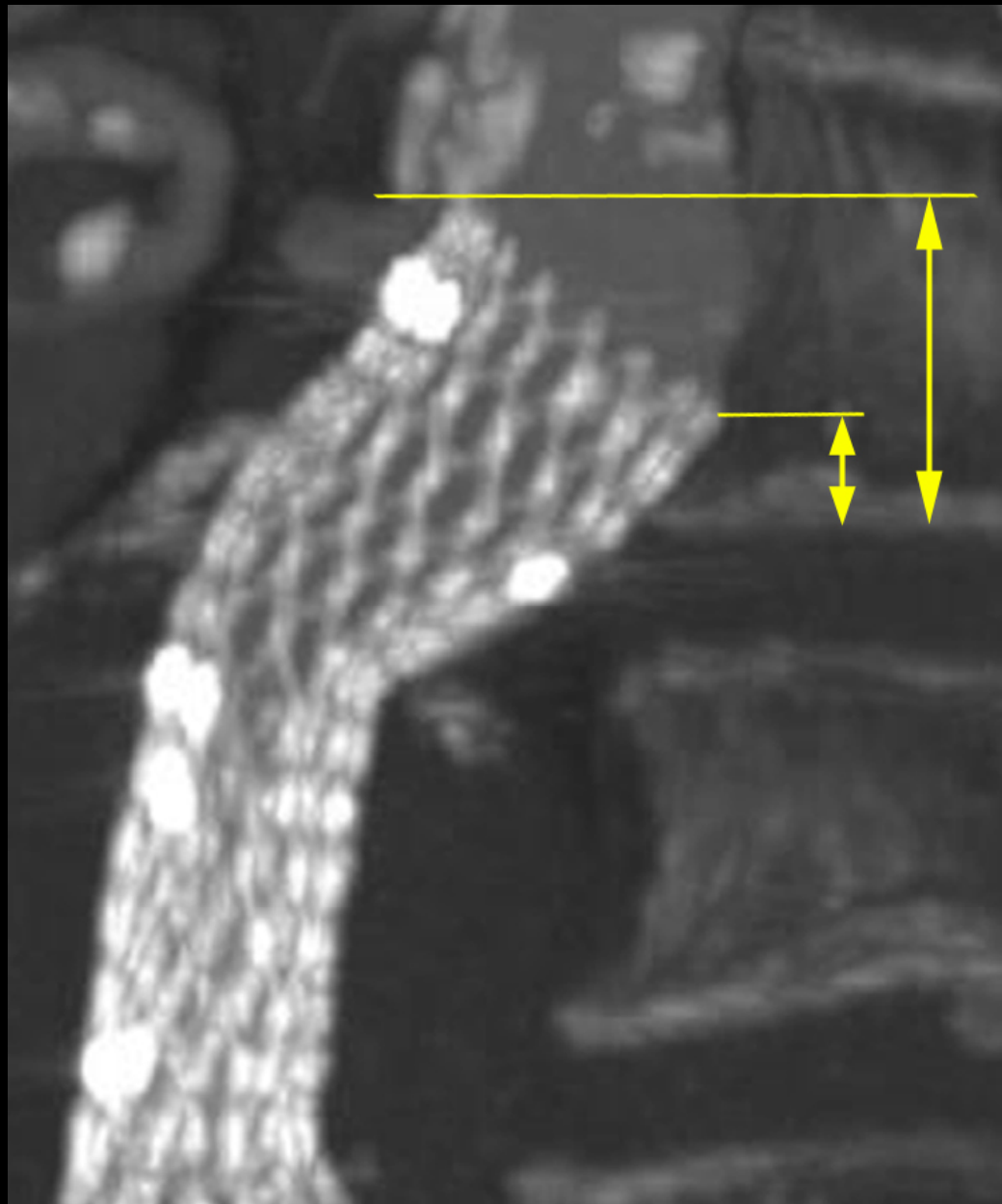




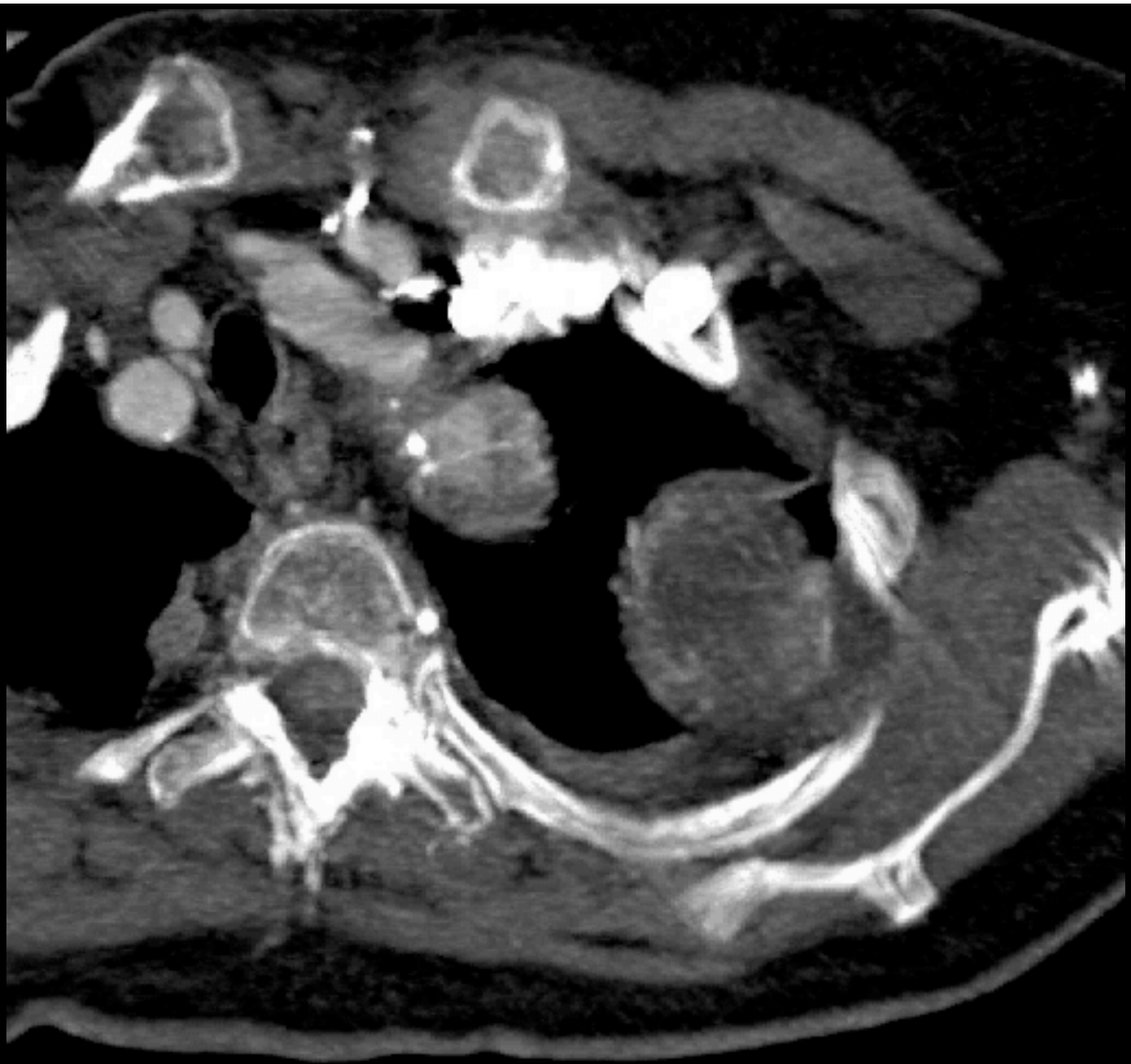




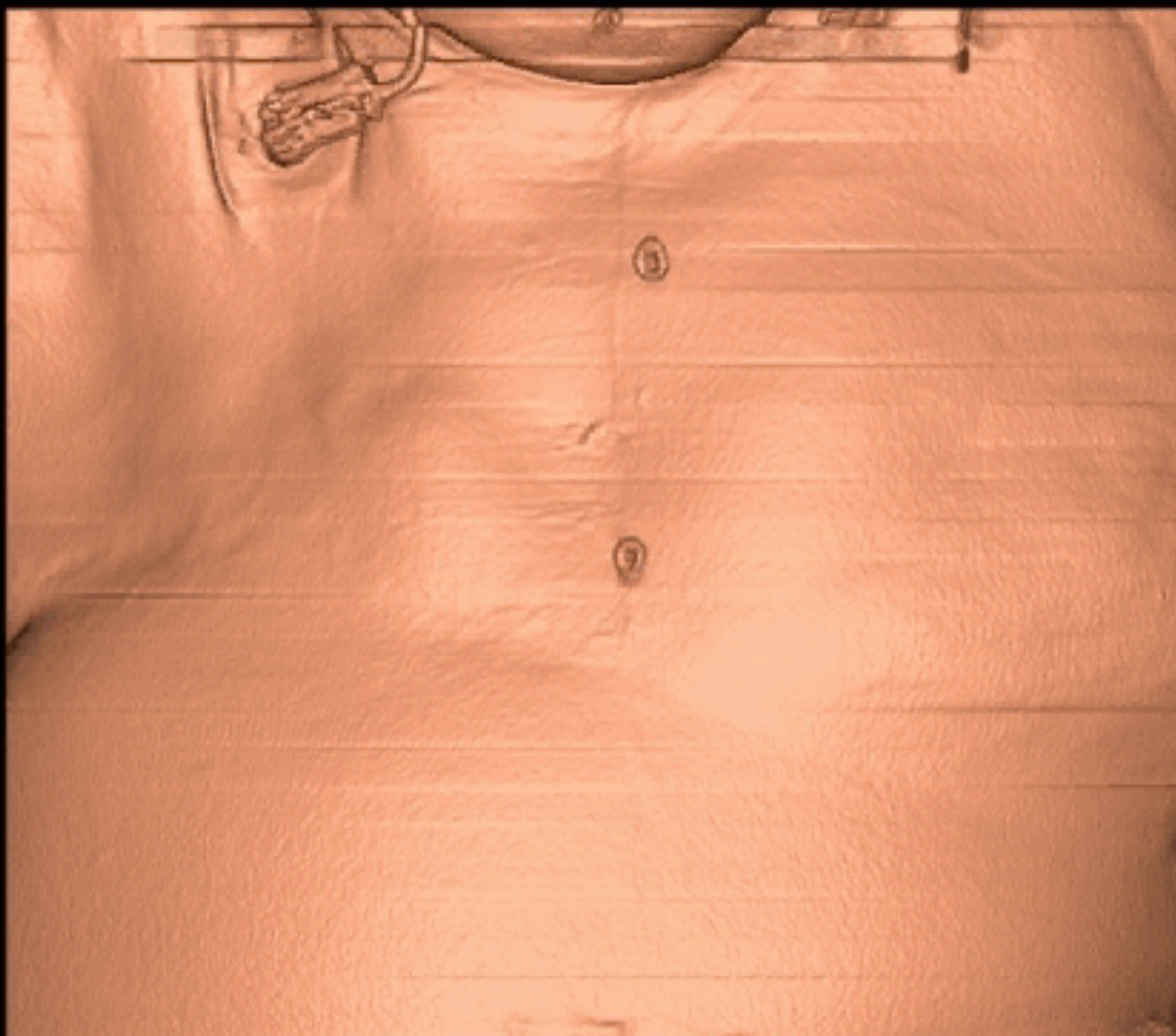
# ***25 month interval***













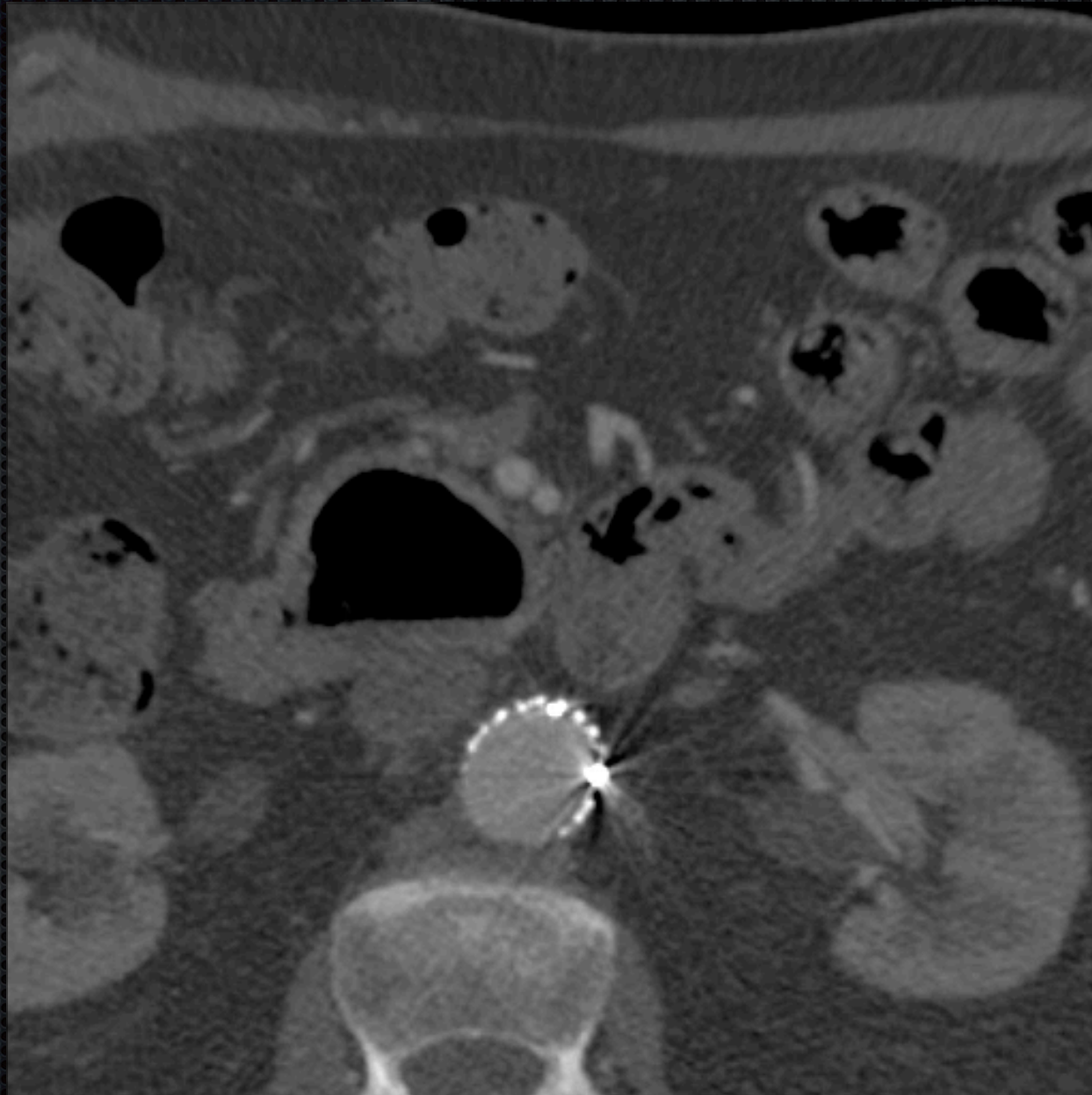






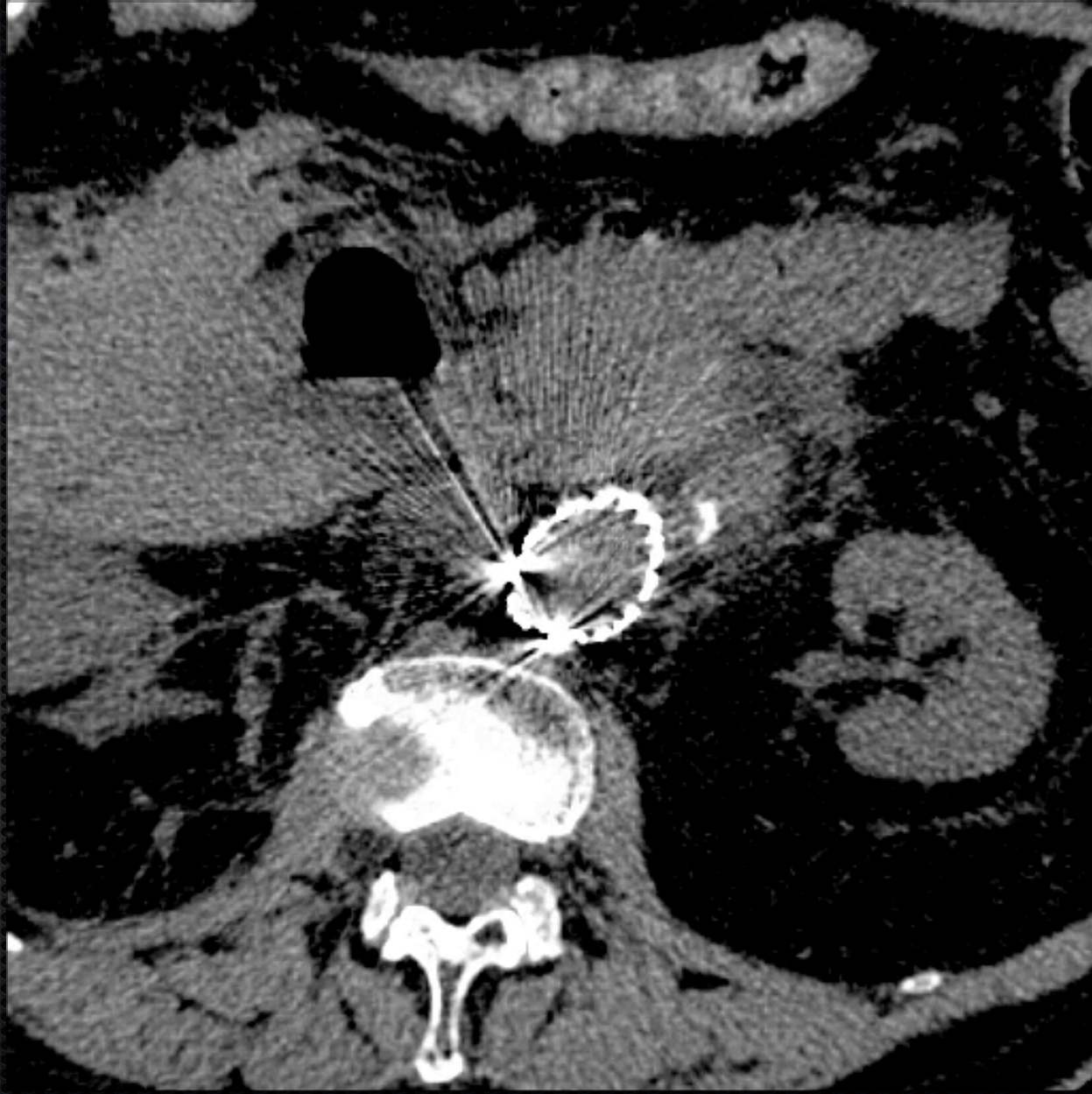


# 11 Months post-Deployment

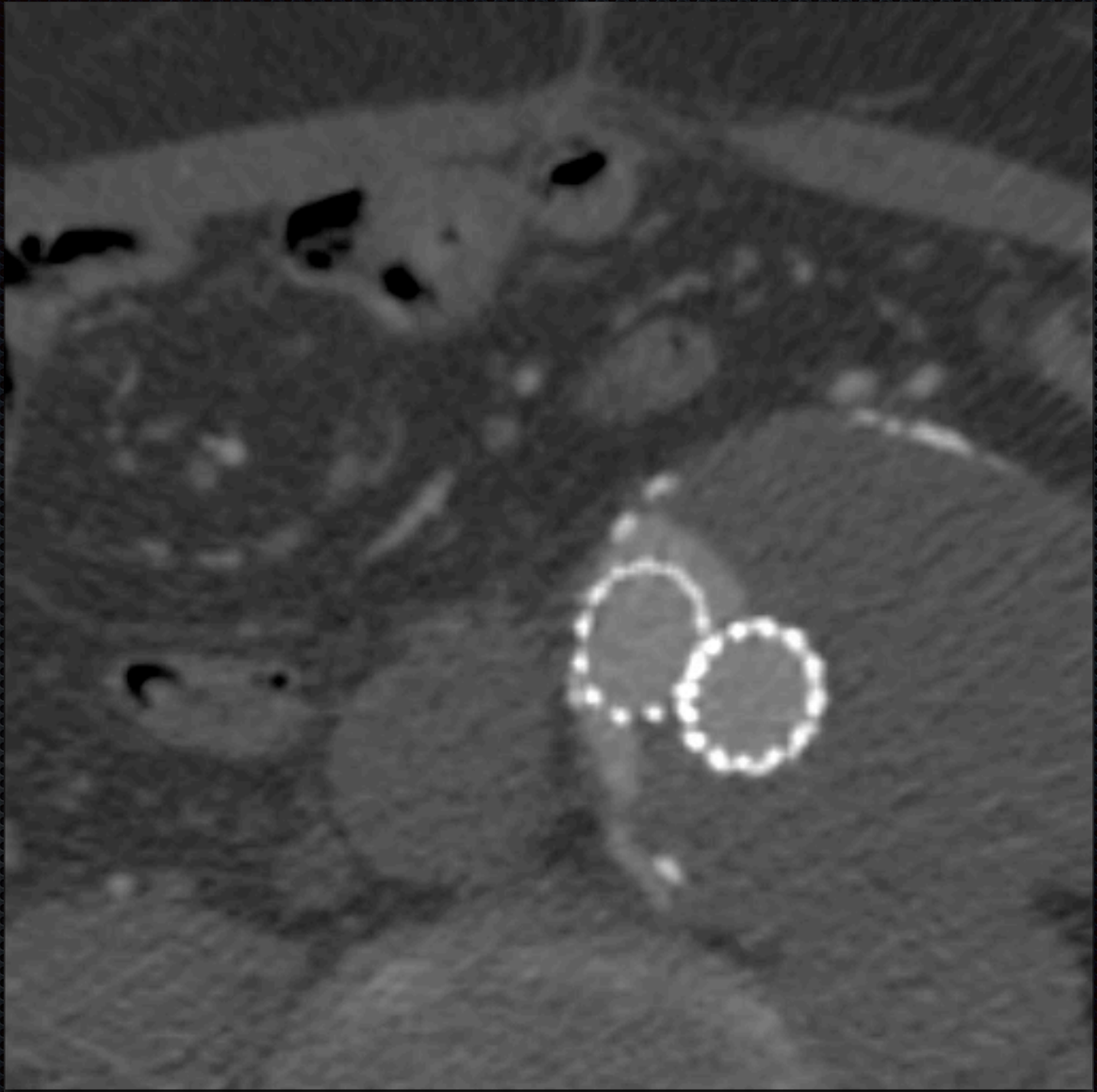




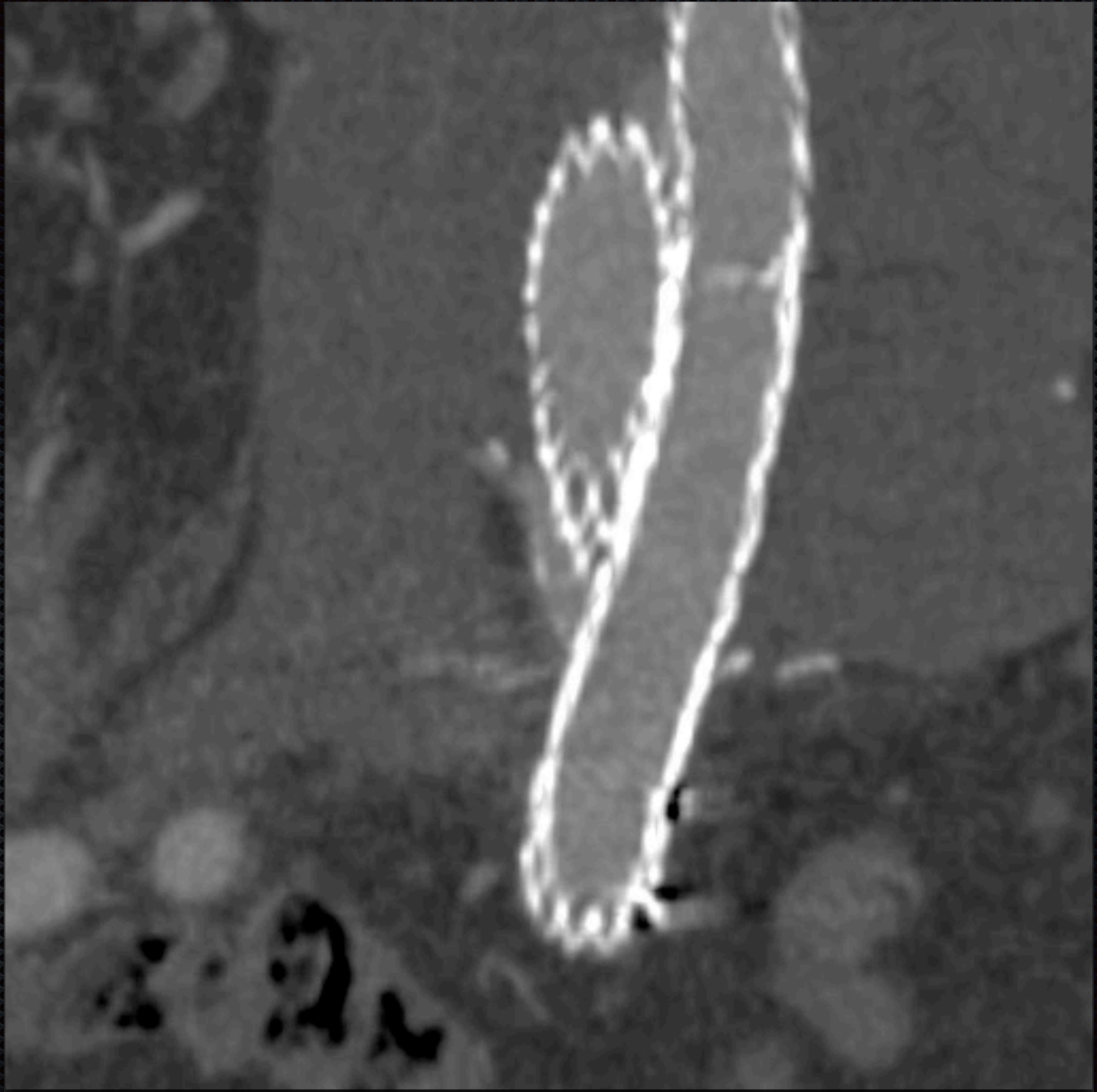
# Acute Abdomen 6 Months Later



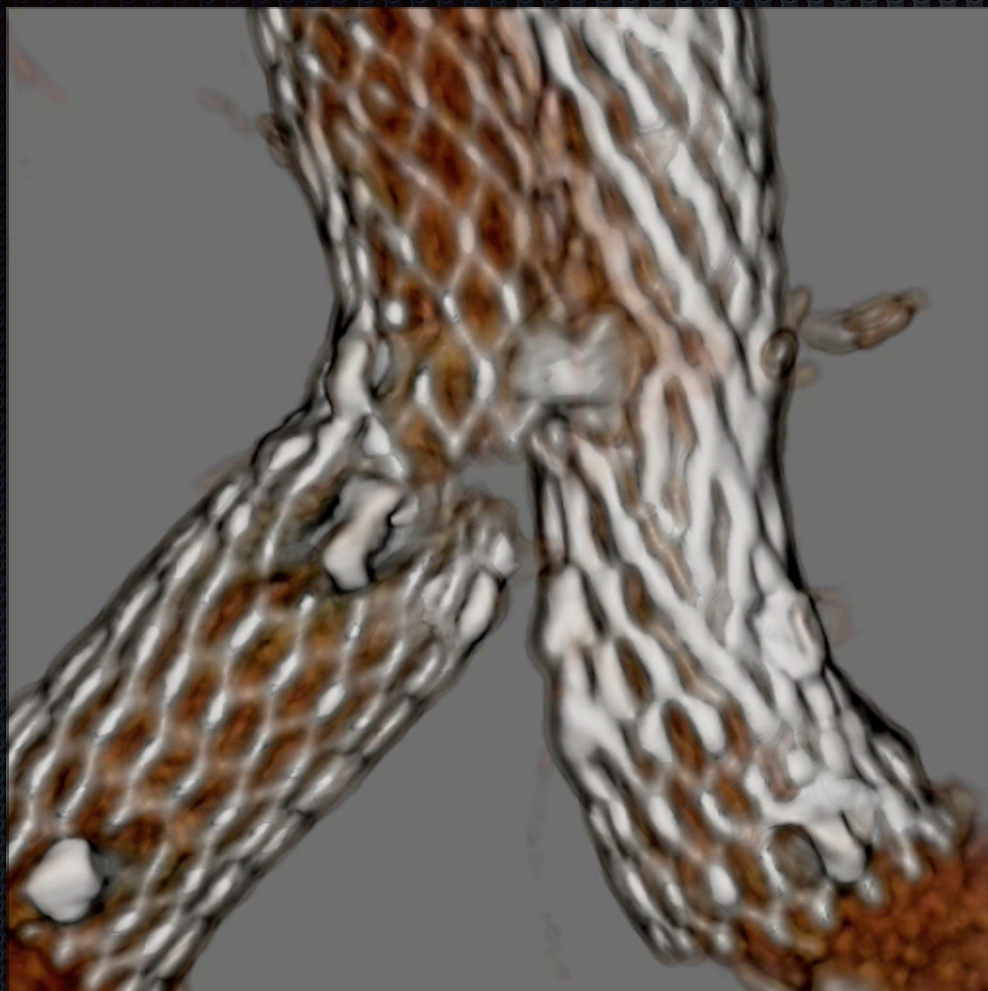












Near-complete  
limb fracture  
11 mos. post  
deployment

Likely fabric tear and  
Type III endoleak

Volume Rendering

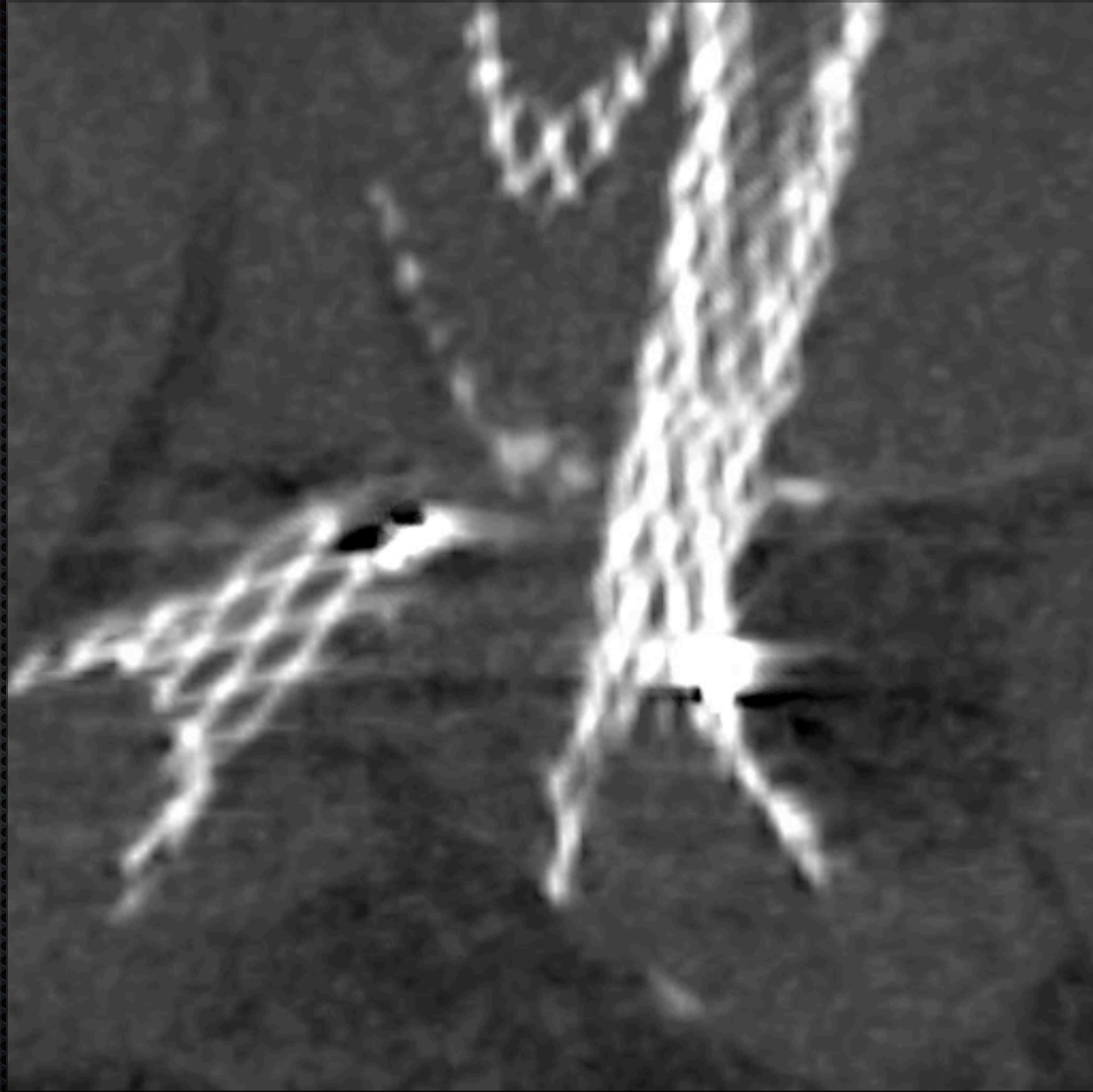


# Acute Abdomen 6 Months Later

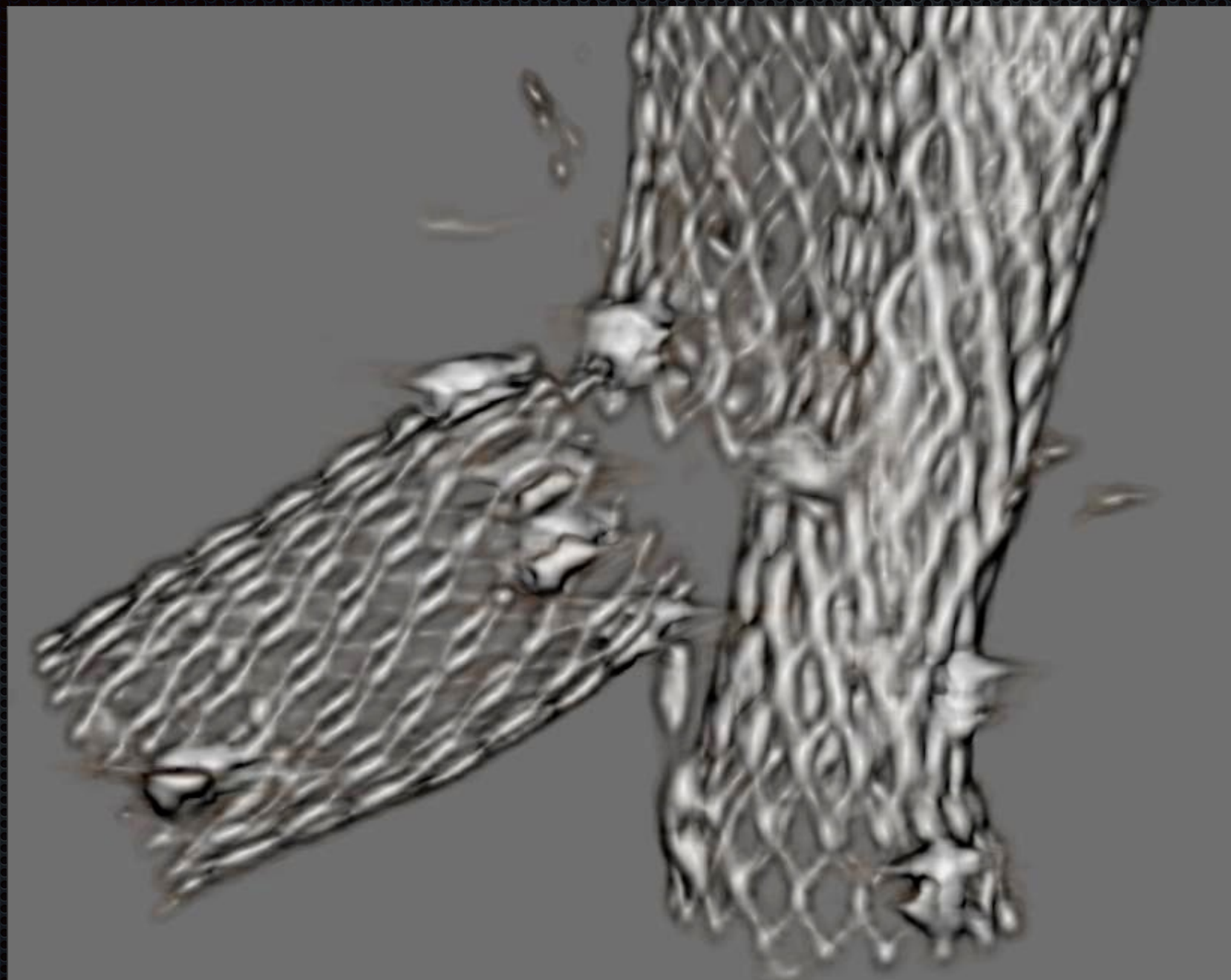




# Acute Abdomen 6 Months Later



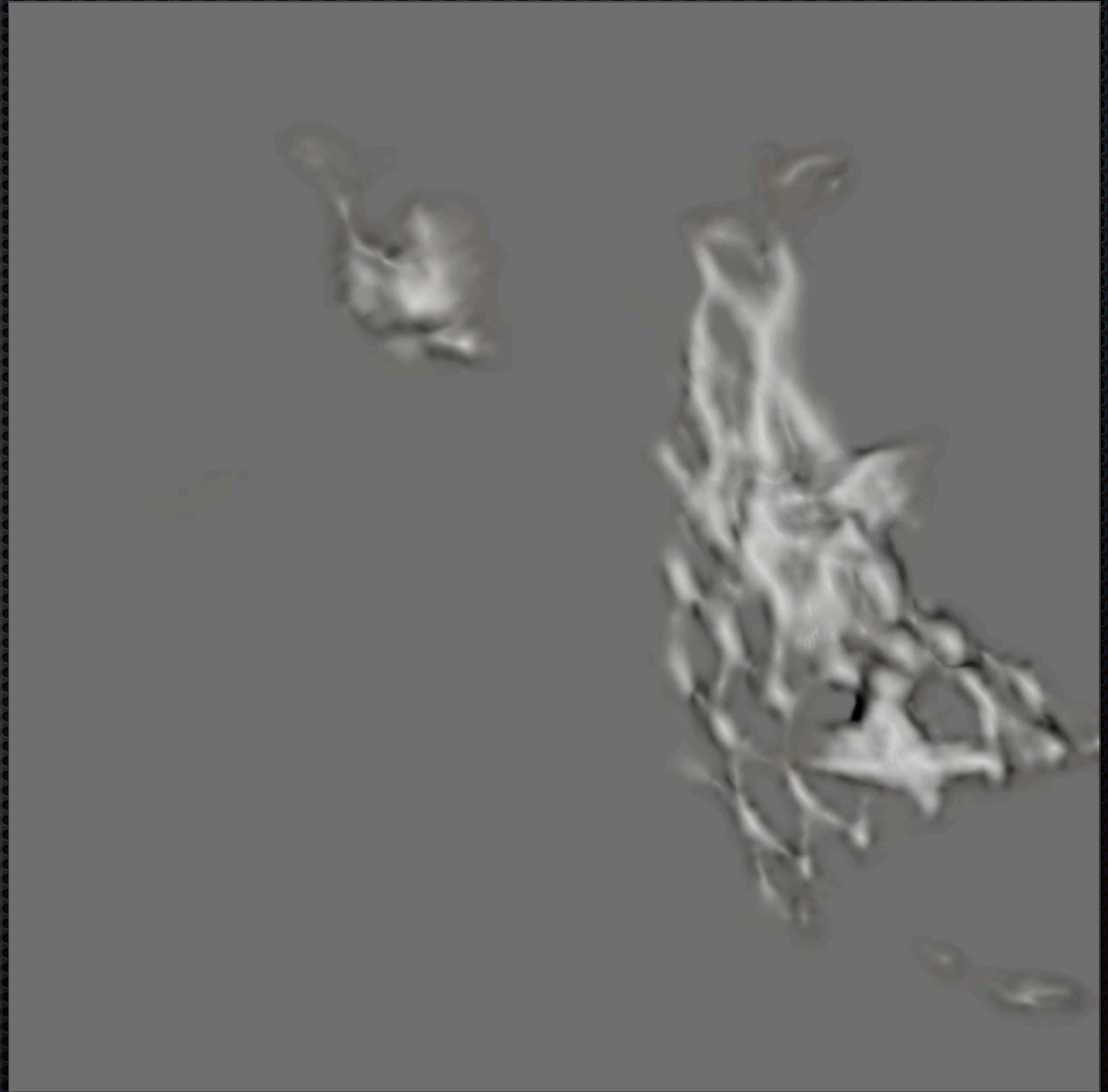






# Unenhanced CT: Aneurysm Rupture & Type III Endoleak

- ❖ Sac dimensions & character
- ❖ Stent-graft integrity & position
- ❖ Retroperitoneal hematoma

















# Main Message

The detection of important complications relating to stent-graft depolyment requires high-resolution triphasic acquisitions to detect the diverse abnormalities of the aneurysm sac, the aortic branches, parenchymal organs and the metallic endografts.



