Thoracic endovascular aortic repair as emergency therapy despite suspected aortic infection

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OBJECTIVES
To evaluate thoracic endovascular aortic repair (TEVAR) as emergency therapy despite suspected aortic infection.

METHODS
Within a 5-year period, we treated 6 patients with a strategy of primary TEVAR despite suspected aortic infection in patients with symptomatic or already ruptured thoracic aortic pathology.

RESULTS
In-hospital mortality was 16.7%. The reason for death was septic multiorgan failure. During follow-up, 2 patients were converted to secondary open surgery in a stable elective setting. The median follow-up was 42.5 months. All surviving patients are not receiving continuing antibiotic therapy. Freedom from infection is 100% to date.

CONCLUSIONS
TEVAR as emergency therapy despite suspected aortic infection is feasible and may well serve as a definite treatment option in selected cases. As recurring infection cannot be entirely excluded, life-long clinical and morphological surveillance remains mandatory.