With Chronic TBADs Laser Assisted Resection Of The Dissection Septum or Membrane Creates A Single Lumen TEVAR Landing Zone: How Is This Technique Performed And Updated Results

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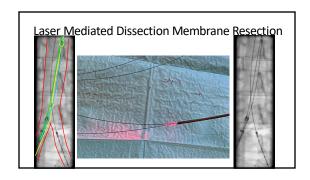


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Disclosures / Conflict of Interest

- Proctor, IP, Research collaboration and/or Speaker:
 - Cook Medical
 - Angiodroid
 - Boston Scientific
 - Gore
 - Medtronic
 - Siemens Healthneers



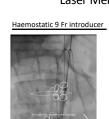


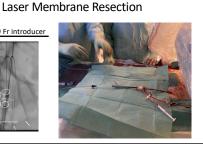
Laser Mediated Dissection Membrane Resection

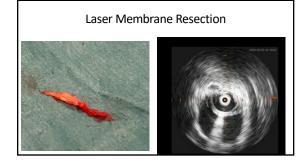














Potential advantages Debulking Septum after resection • Improve aposition of graft to aortic wall? 2 yrs CTA

Possible limitations

- Lead Extraction Catheter
 - Short length: 50 cm (19.7 inches)
 - Relatively stiff
- Cost
- Fate of the aortic wall after membrane is resected
 - Uncertainty if the selaing zone will dilatate more

Results

Selective application:

- 1 Prox TAAA IV: 4 yrs
- 2 EVAR + IBD: 1.5 + 3 yrs
- 1 aorto iliac stenting: 2.5 yrs
- Clinical Success for resection area in all

Conclusion

- Laser Mediated Dissection Septum or Membrane Resection
 - is a feasible technique with debulking of the septum
 - -can limit the extent of the repair
- Early results are promising
 - In selected patients

