Alternatives for endovascular treatment of patients with abdominal aortic aneurysm (AAA) and hostile anatomy: technique used for two cases

Garcia-Valencia L.F; Caceres-Castrillon D.A; Nieto-Bonilla L.A; Molano-Chavarria F.O; Bautista-Vacca C.A; Cabrera F; Orozco-Martin V.

**Introduction:**
EVAR as standard treatment for infrarenal aortic aneurysm

Neck angulation > 90° and severe comorbidities

Challenge for vascular surgeon

**Cases:**
Two patients in their eighties
Infrarenal aorta aneurism
Diameter > 50 mm and pain
Neck angulation > 90 degrees.

Access: bilateral common femoral artery and right brachial artery.

Large introducer in thoracic aorta (protecting left subclavian artery)

Through-and-through maneuver correcting neck angulation.

Remove early as possible the delivery system of the endoprosthesis once this is deployed.

**Conclusion:** Endovascular management is still an option in patients with severe aortic neck angulations, with satisfactory and safe outcomes. This technique has not been standardized, and further research is required to present results.