Lobato Technique for the Endovascular Treatment of Complicated Dissections of the Thoracic Aorta and Common Iliac Artery

Armando Lobato MD, PhD
Disclosure

Speaker name: Armando Lobato

I have the following potential conflicts of interest to report:

- Consulting
- Employment in industry
- Stockholder of a healthcare company
- Owner of a healthcare company
- Other(s)

- [x] I do not have any potential conflict of interest
• Complete occlusion of the abdominal aorta is an extremely rare complication of TBAD.

• However, TEVAR is considered the standard reference treatment of TBAD complicated by malperfusion syndrome.

• Aortic occlusion can impair or even prevent navigation and implantation of the stent through the femoral or iliac access.

• Immediate surgical intervention may be required to avoid fatal outcomes in these cases.
We describe a new endovascular technique, the Lobato technique (LT), to overcome anatomical and current device restrictions and expand the limits of TEVAR in a safe, easy-to-perform, and cost-effective way.

A 63-year-old white man with hypertension was admitted to a public hospital with acute TBAD.

The patient was being treated conservatively for 12 days, when acute onset malperfusion of the right lower limb occurred.
He was transferred to our Center for specialist treatment. The patient was complaining of pain, paleness and paresthesia in the right lower limb.

Emergency computed tomography angiography was performed on admission and revealed complete collapse of the true lumen of the infrarenal aorta and right common iliac artery.
Case Report

- All visceral arteries emerged from the true lumen
- Thoracoabdominal aneurysm with a maximum diameter of 63 mm at the level of the superior mesenteric artery
- Total occlusion of the true lumen of the aorta immediately below the renal arteries
- Total occlusion of the right common iliac artery
- Patency of the right internal and external iliac arteries
- Total occlusion of the true lumen of the left common iliac artery
- Left internal iliac artery total occlusion
- False lumen along the entire course of the common and left external iliac arteries
- Common femoral arteries patency bilaterally
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Conclusions

• LT was developed to overcome current anatomical and device constraints, expanding the limits of TEVAR for the (catastrophic) rescue of complicated TBAD and Isolated Common Iliac Artery Dissection cases in a safe, easy-to-perform and cost-effective manner
• LT appears to be a promising tool in the TEVAR Armamentary;
• However, more experience with LT is needed.