

THORACIC AORTA DISSECTING ANEURYSMS TYPE A SURGICAL TREATMENT EXPERIENCE

Ostrovskiy Yu.P., Shket A.P., Shumovets V.V., Androshchuk V.V., Spiridonov S.V., Komarovskiy A.A., Tokunov V.A.

Republican Scientific-practical center "Cardiology", city Minsk, Republic Belarus.

Aim: to evaluate treatment results of type A thoracic aorta dissecting aneurysms.

Materials and methods: 223 patients with thoracic aorta dissecting aneurysms type A (Stanford classification) were operated upon during 2000-2013. Patients mean age was 48.7 years, there were 81.3% males and 18.7% females. Dissection of type I according to De Bakey was determined in 168 patients and type II – in 55. 143 (64.1%) patients were operated because of urgent indications: 79 operations of ascending aorta grafting were performed. Ascending aorta and arch grafting (type "hemiarach") was fulfilled in 85 cases. Ascending aorta and aortic arch grafting was performed in 106 patients (Borst operation in 63, implantation of stent-graft "E-Vita open" – in 43).

Aortic valve was preserved in 60.5% of patients. Cerebral protection and protection of visceral organs was achieved in all patients with the help of unilateral perfusion of the brain through the right subclavian artery and perfusion of the lower part of the body through the additional contour of heart-lung bypass machine directly into the descendent aorta.

Moderate hypothermia to 28°C was used in 42% patients. The rest of patients were operated upon with the use of deep hypothermia.

Results. Hospital mortality composed 36 (16.1%) patients. Among the hospital mortality reasons acute heart and multiorgans failure dominated. According to the control CT data, which was obtained in the early postoperative period false lumen was preserved in the arch and descending aorta in 100% of patients with I type dissection after ascending aorta grafting (including operation of "hemiarach" type). It was found that closure of the false lumen in the descending aorta occurs in the majority of patients after implantation of a stent-graft. One and two years survival from 2000-2005 composed 86% and 80%, from 2006-2013 – it was over 90%.

Conclusion. Implantation of a stent-graft to patients with dissecting aneurysms type A of the thoracic aorta during operations on an open heart permits to fulfill more precisely reconstruction of the ascending aorta, of arch and of descending aorta, to eliminate false lumen in one stage on the maximum length with good results.