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EJVES Extra Abstracts[☆]

Pseudoaneurysm of the Thoracic Aorta as a Complication of Pancreatic Pseudocyst

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Pseudocyst formation is a recognised complication of acute pancreatitis. Rarely, they result in pseudoaneurysm formation of neighbouring vessels which can be rapidly fatal if rupture occurs. We report a case of a pseudoaneurysm of the descending thoracic aorta in a mediastinal pancreatic pseudocyst and its management with endovascular prosthetic stent graft. This is the first reported case of a thoracic aortic pseudoaneurysm complicating a thoracic pseudocyst.

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The Use of an Endovascular Stent Graft with 'Home-made' Fenestrations to Treat an Infected Aortic Endograft in an Emergency Setting: A Short Report

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Introduction: The treatment options for an infected fenestrated endovascular aneurysm repair (FEVAR) are limited.

Report: A patient with a bi-renal FEVAR developed a type 1a and type 3 endoleak, with destruction of the neck of the aneurysm, likely due to infection. In a tapered thoracic aortic stent, "home-made" fenestrations were created for the renal arteries and superior mesenteric artery. Successful coverage of the infected aorta excluded the endoleaks. Life-long antibiotics were commenced.

Discussion: There was a risk of imminent rupture, thus ruling out waiting for a custom-made FEVAR. This technique facilitated emergent treatment, and obviated the need for open surgery.

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Successful Use of the HeRO Device to Salvage a Functional Arteriovenous Fistula and Resolve Symptoms of Venous Hypertension

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Introduction: Hemodialysis Reliable Outflow (HeRO) (Hemisphere Inc, Minneapolis, MN, USA) vascular access device is a new long-term subcutaneous access designed for patients who have exhausted traditional peripheral access sites.

Report: We describe the use of the HeRO device not to create new access but to resolve symptoms of venous hypertension and salvage still functional arteriovenous fistula (AVF) in a patient refractory to endovascular treatment of recurrent central venous occlusive disease (CVOD).

Conclusion: This report reinforces the experience of other authors that the HeRO device is an effective means to salvage an AV access and relieve symptoms of venous hypertension.

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