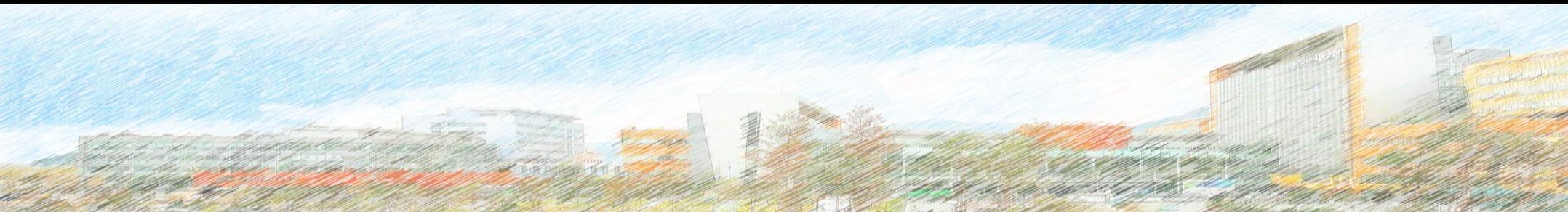


# Ruptured AAA into the IVC

Pusan National University Yangsan Hospital  
CardioVascular Center

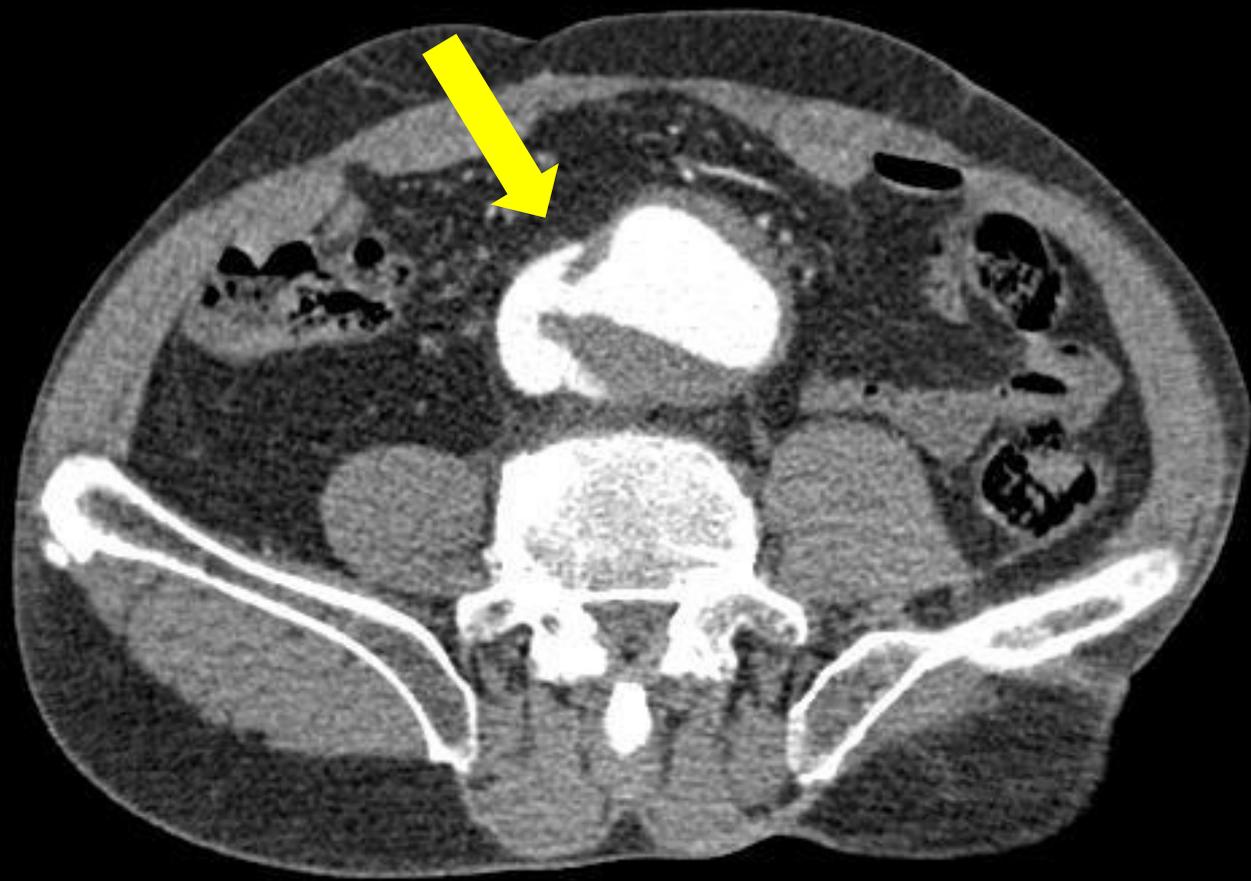
C



# Case presentation

- 66 year-old courier man was found lying on the floor at his office
- 119 team: no pulse → CPR and transferred to ER
- Clinical information
  - Hypertension
  - Surgery: thymectomy (1990), Panperitonitis (1995)
- At ER: ROSC state
  - Check ultrasound and CT scan







## **Ruptured AAA with Aortocaval Fistula**

Call surgical team and Prepare OP room, ASAP!

From OR

“Sorry, but prior surgery does not end. We need more time, about 1 or 2 hours...”

**Cardiac arrest, again!**



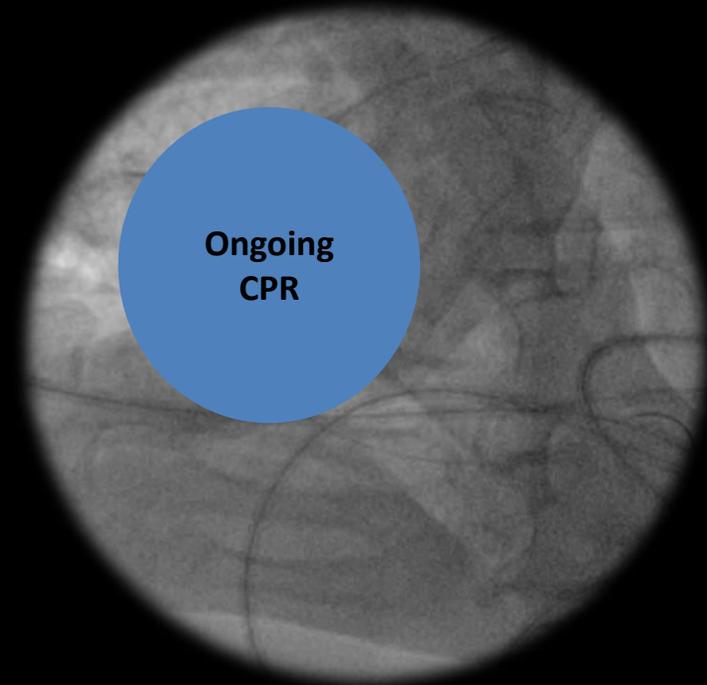
## Have to do something!

- Cause of cardiac arrest
  - 1) Hypovolemic shock
  - 2) Acute decompensation due to marked increase of venous return to the right side heart



## **Ruptured AAA with Aortocaval Fistula**

Bring the patient to Cath-room



Ongoing  
CPR



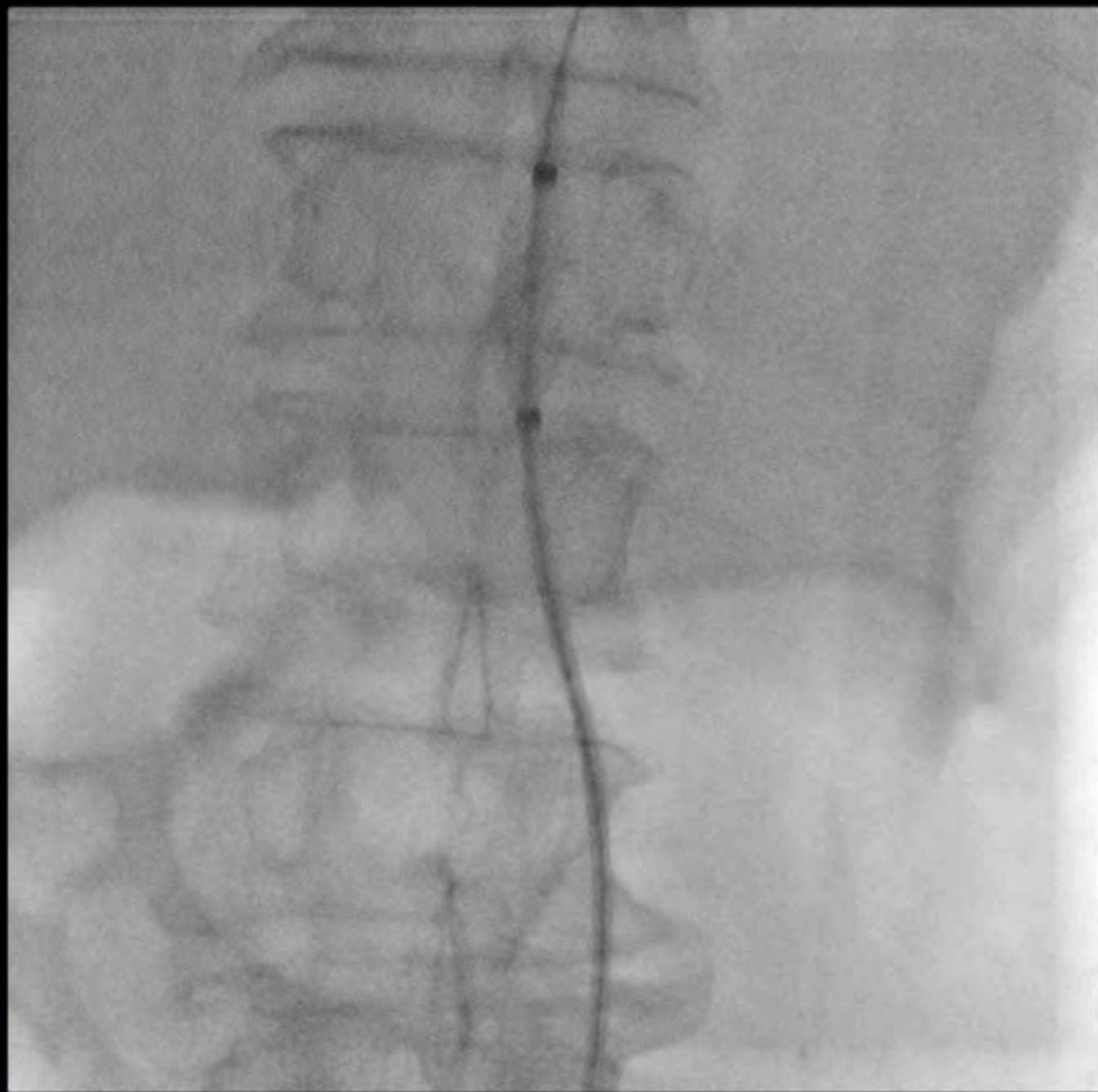
## Our Plan

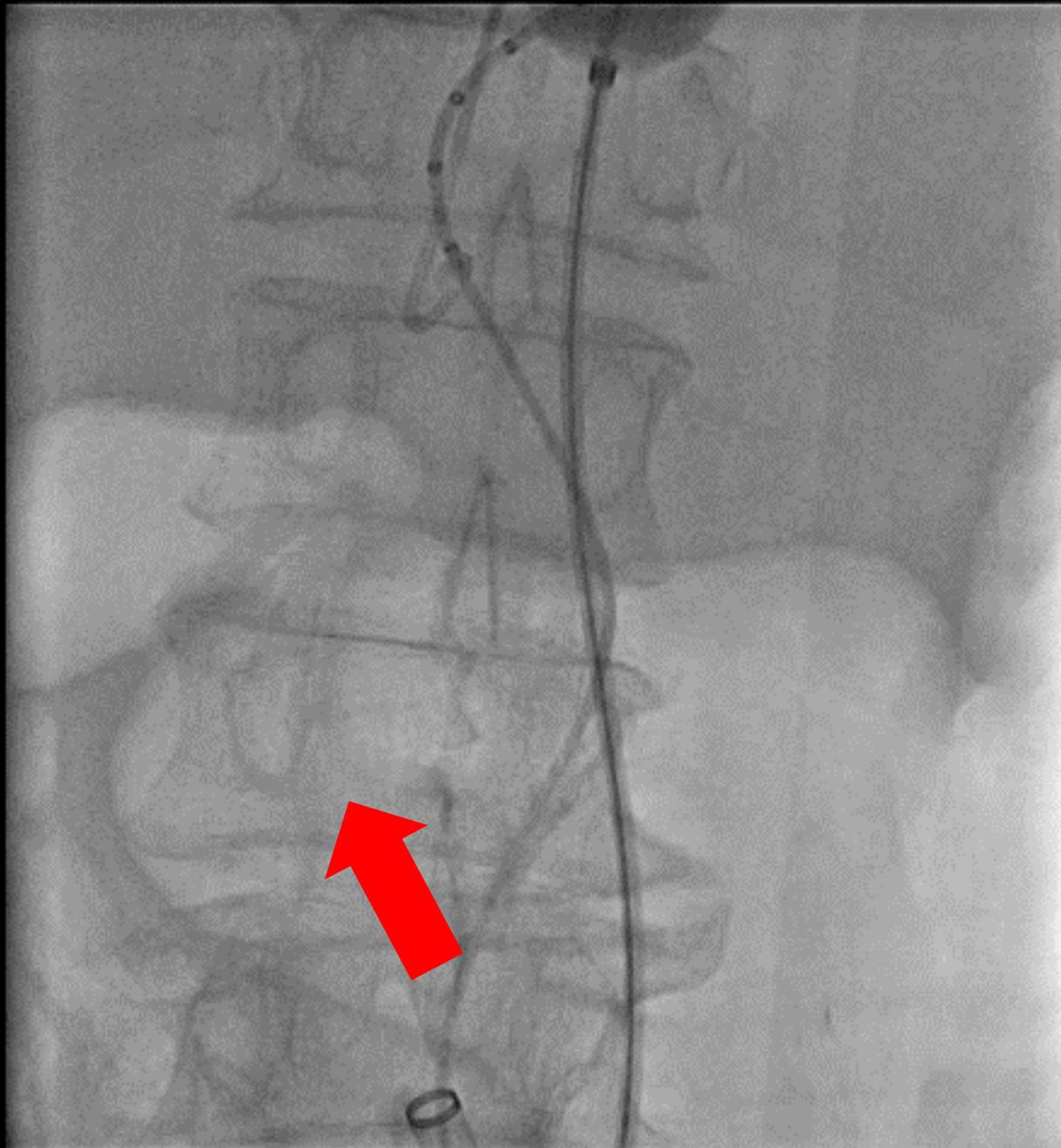
1. Endovascular balloon occlusion of the aorta  
→ Hypovolemic shock

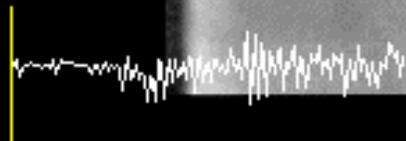
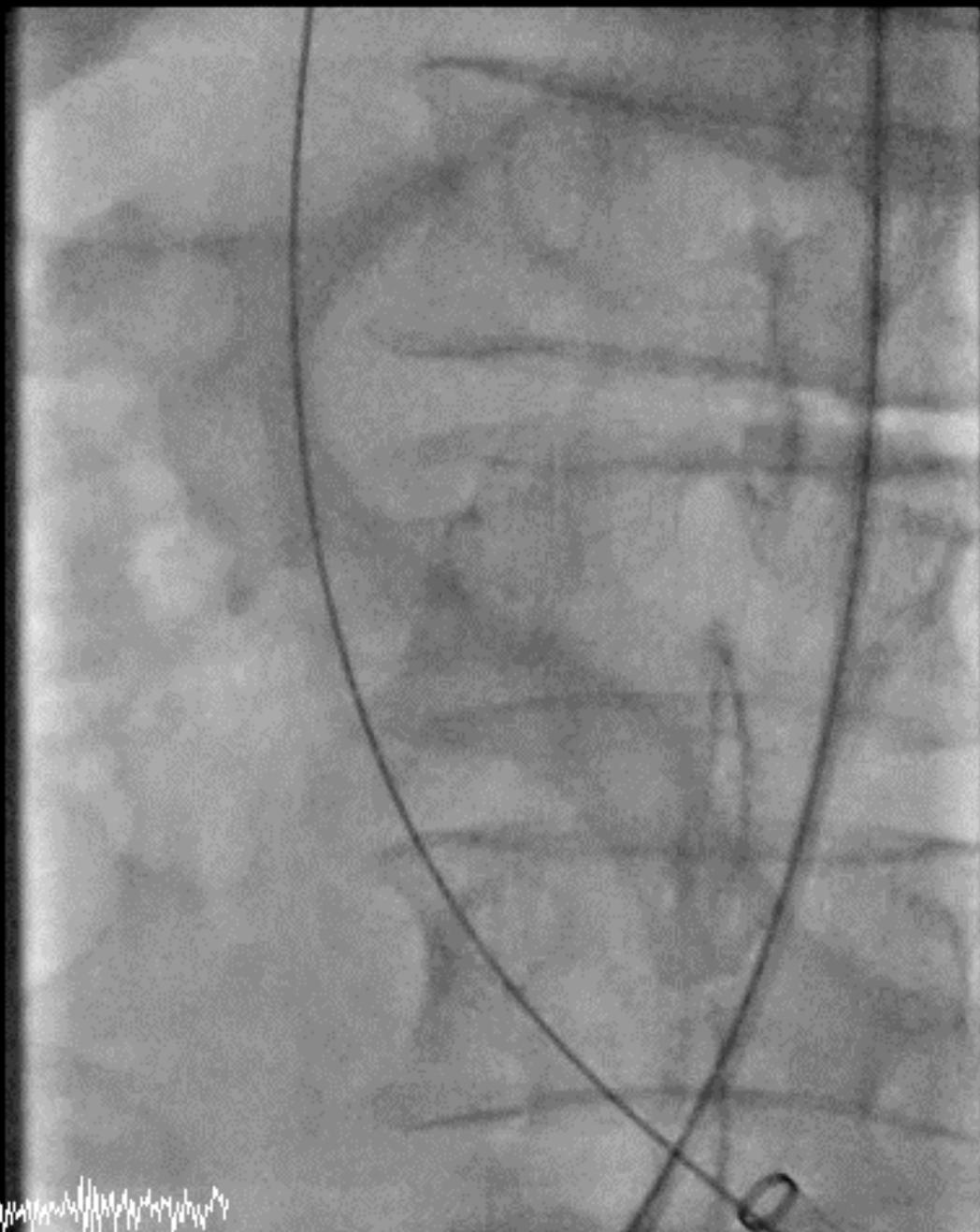


## Our Plan

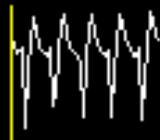
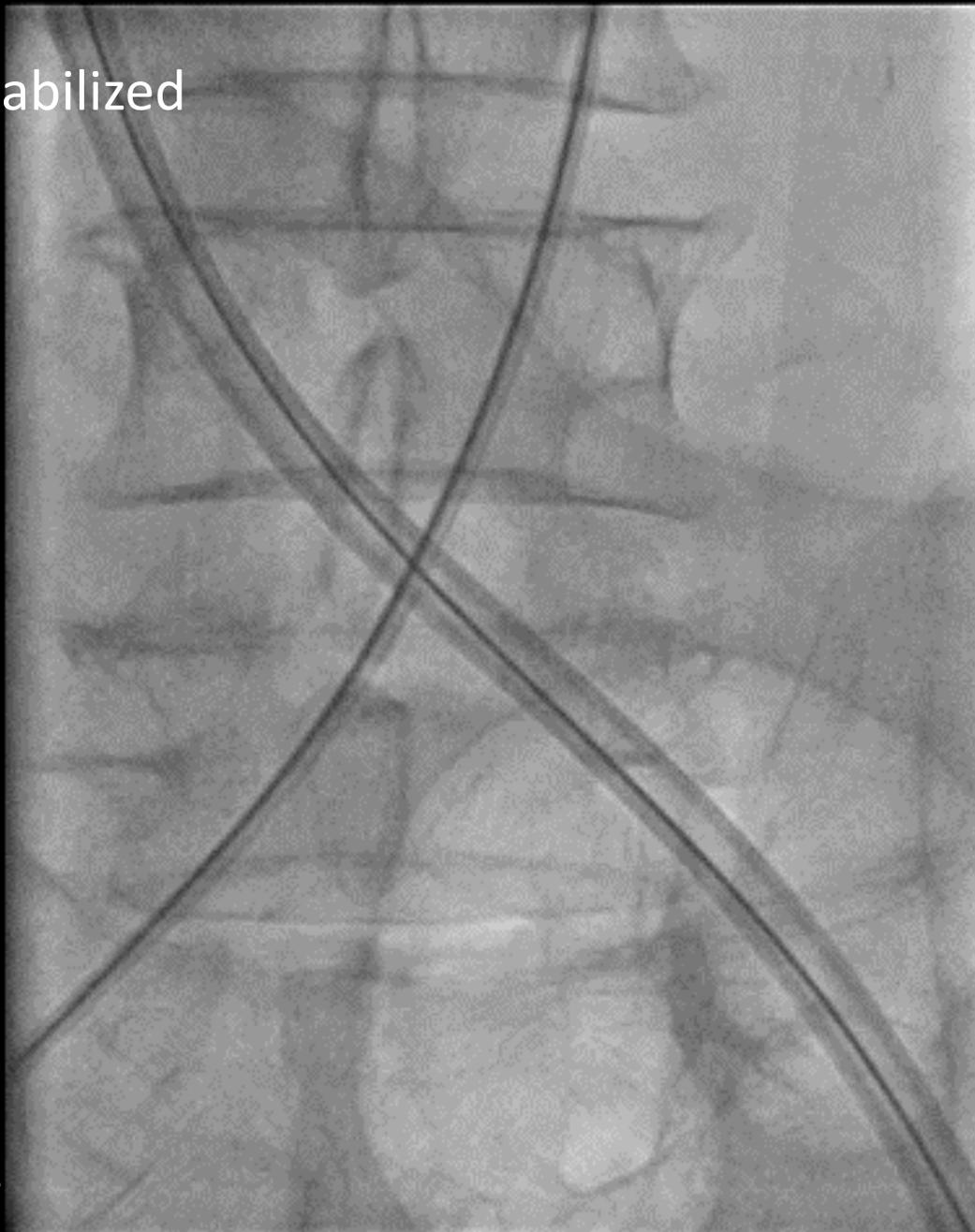
1. Endovascular balloon occlusion of the aorta  
→ Hypovolemic shock
2. Wire crossing through ACF and close the shunt using large sized insertion sheath or large balloon  
→ Aortocaval shunt



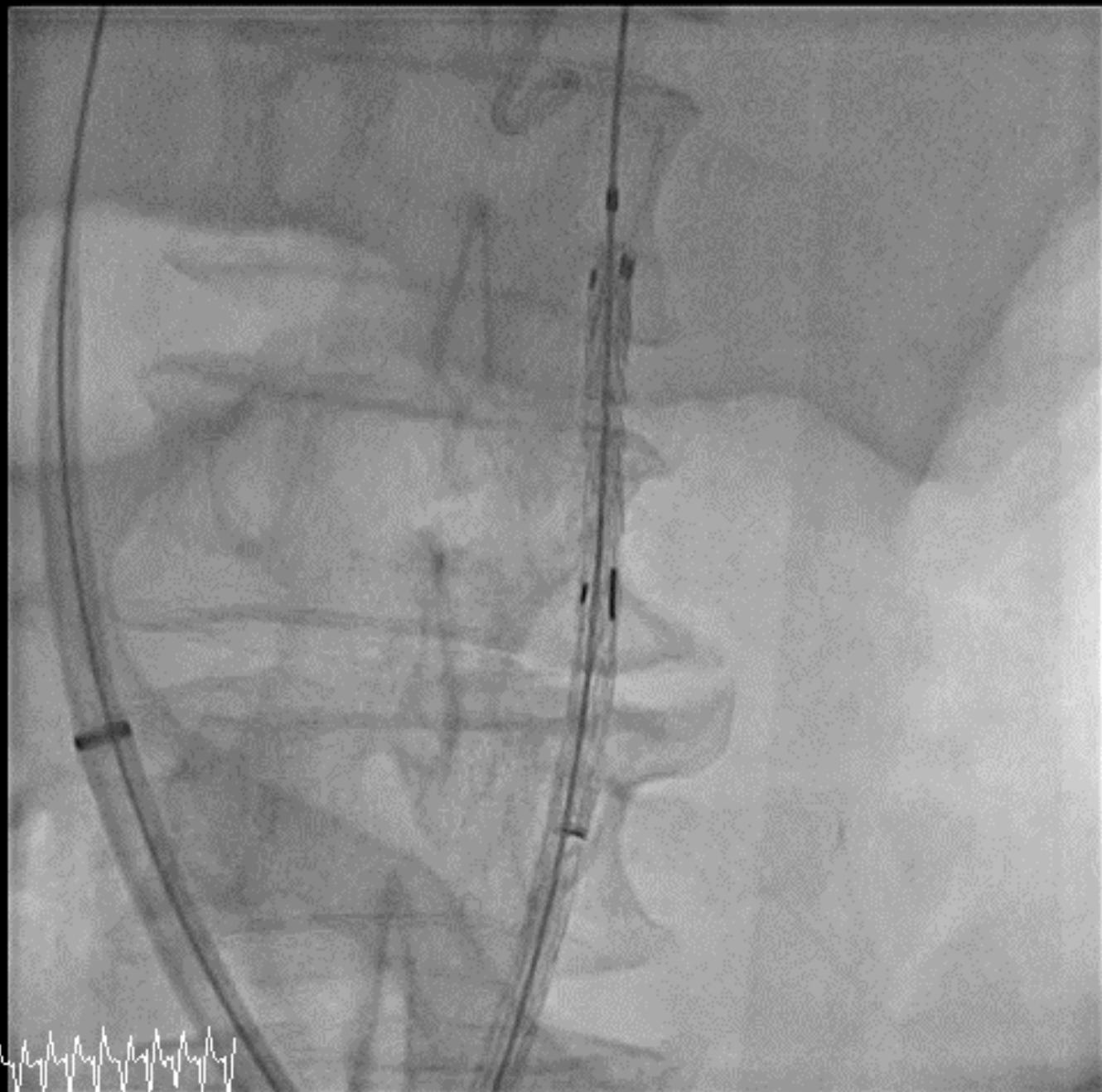


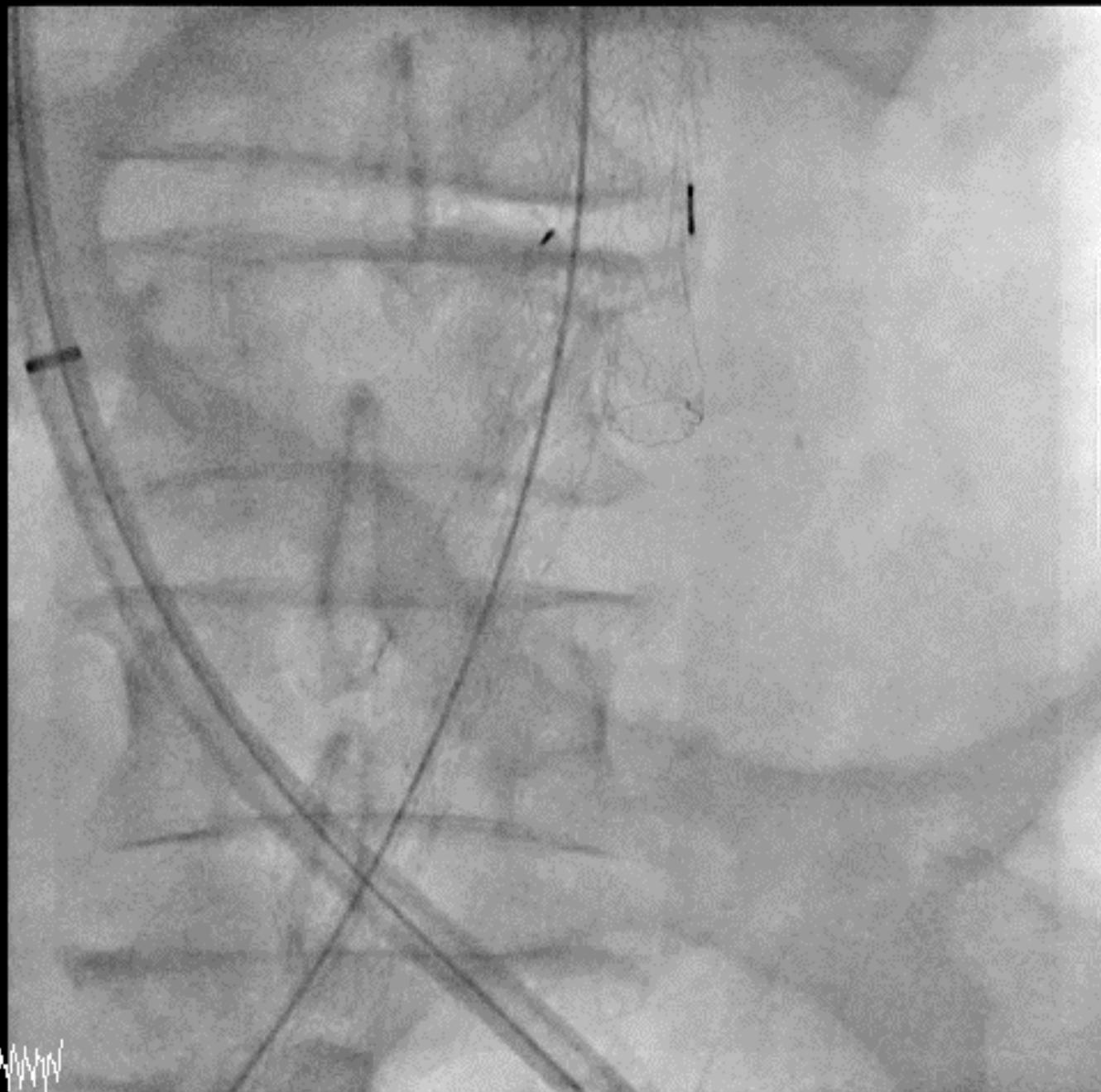


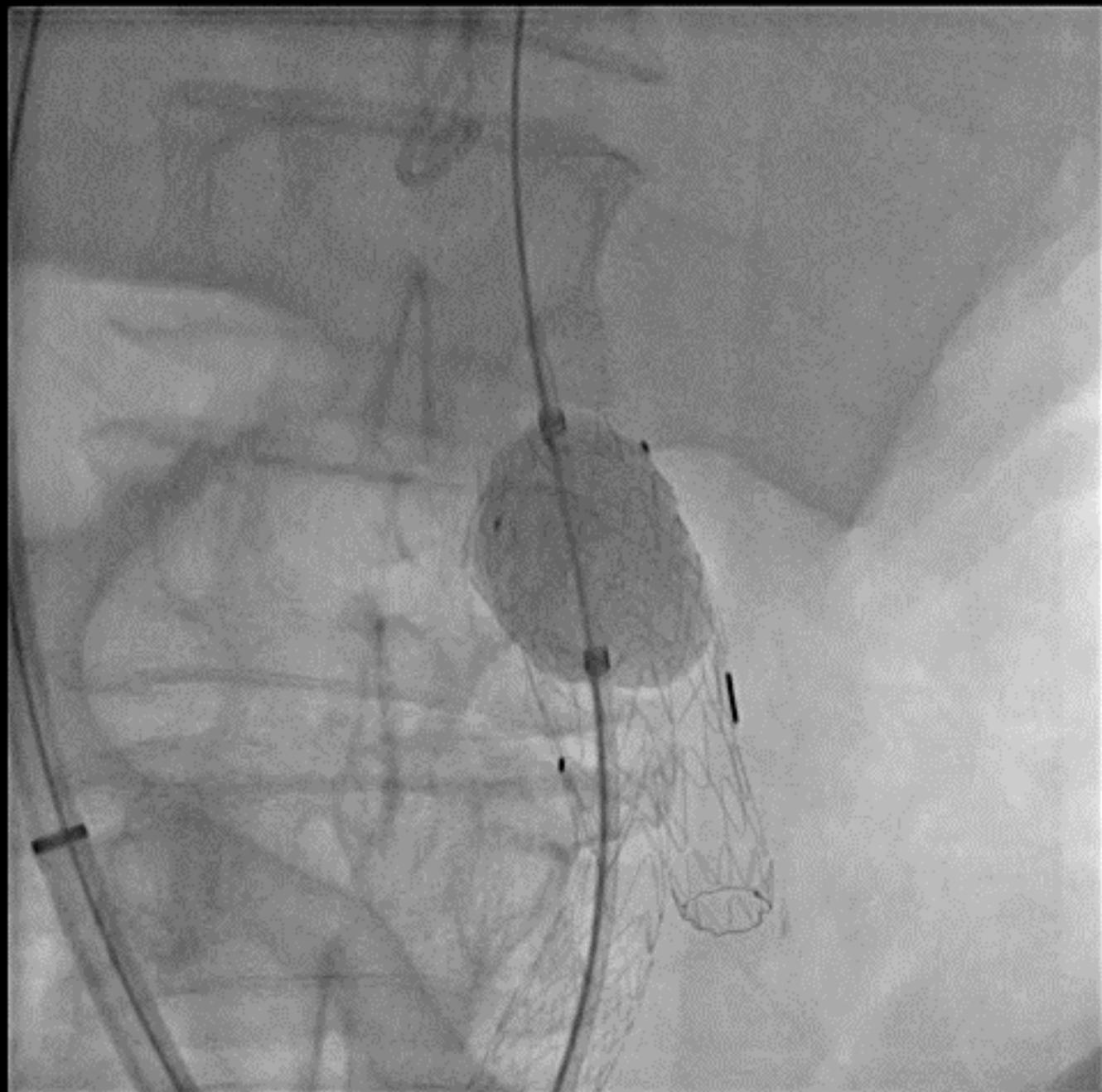
The patient was stabilized  
and  
we stopped CPR

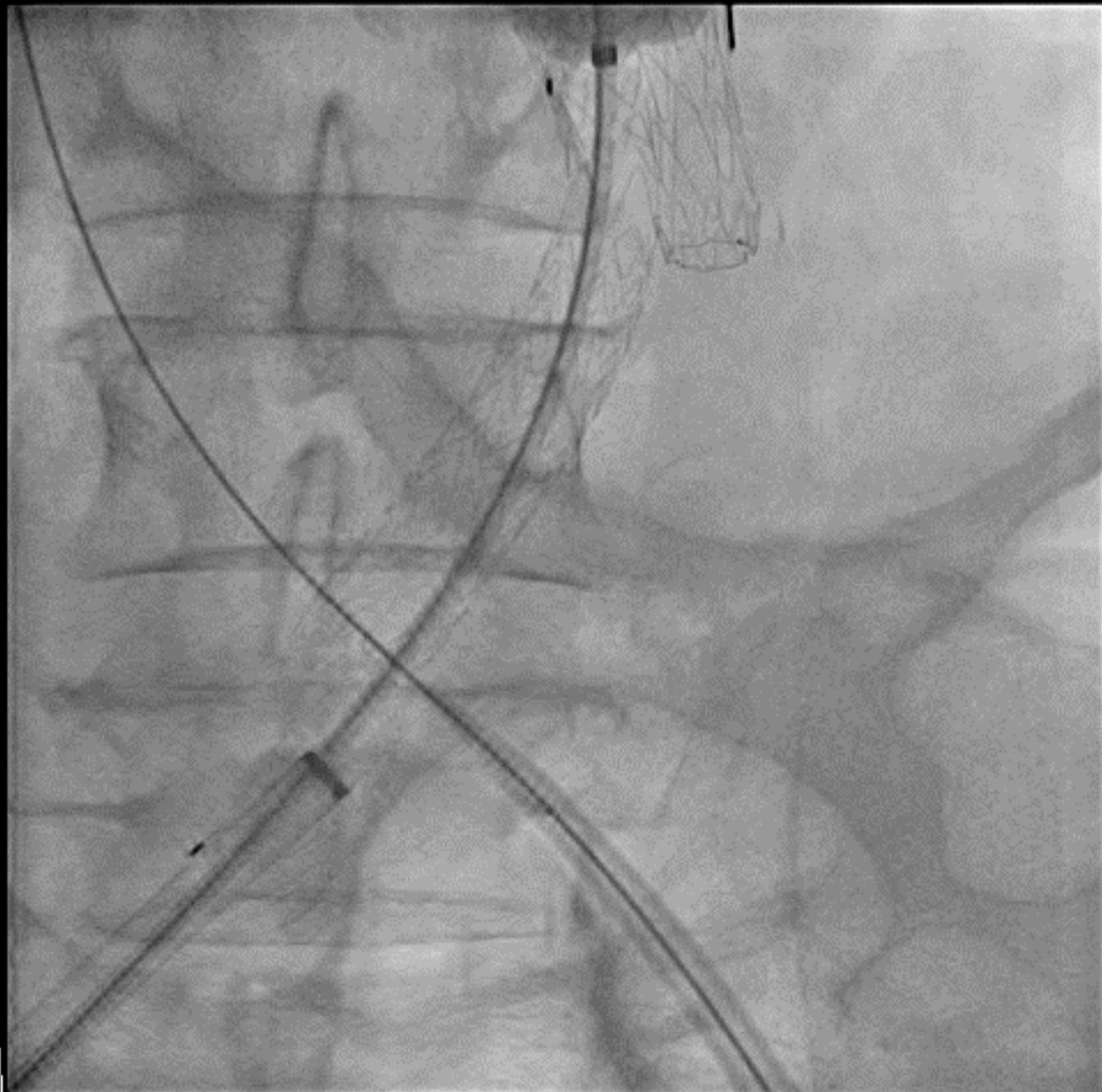


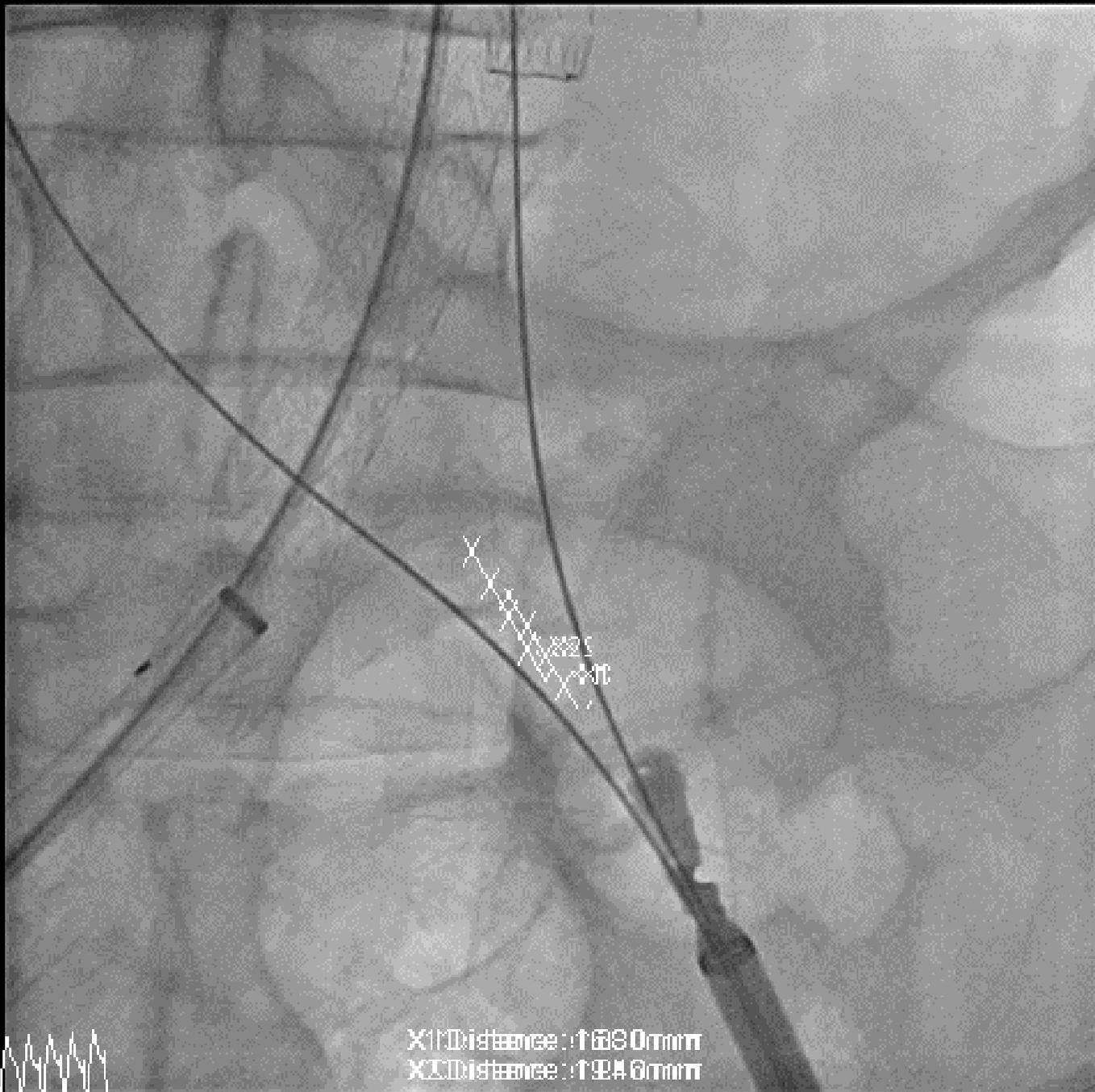
Decide to continue  
EVAR procedure



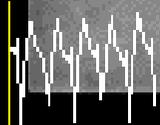


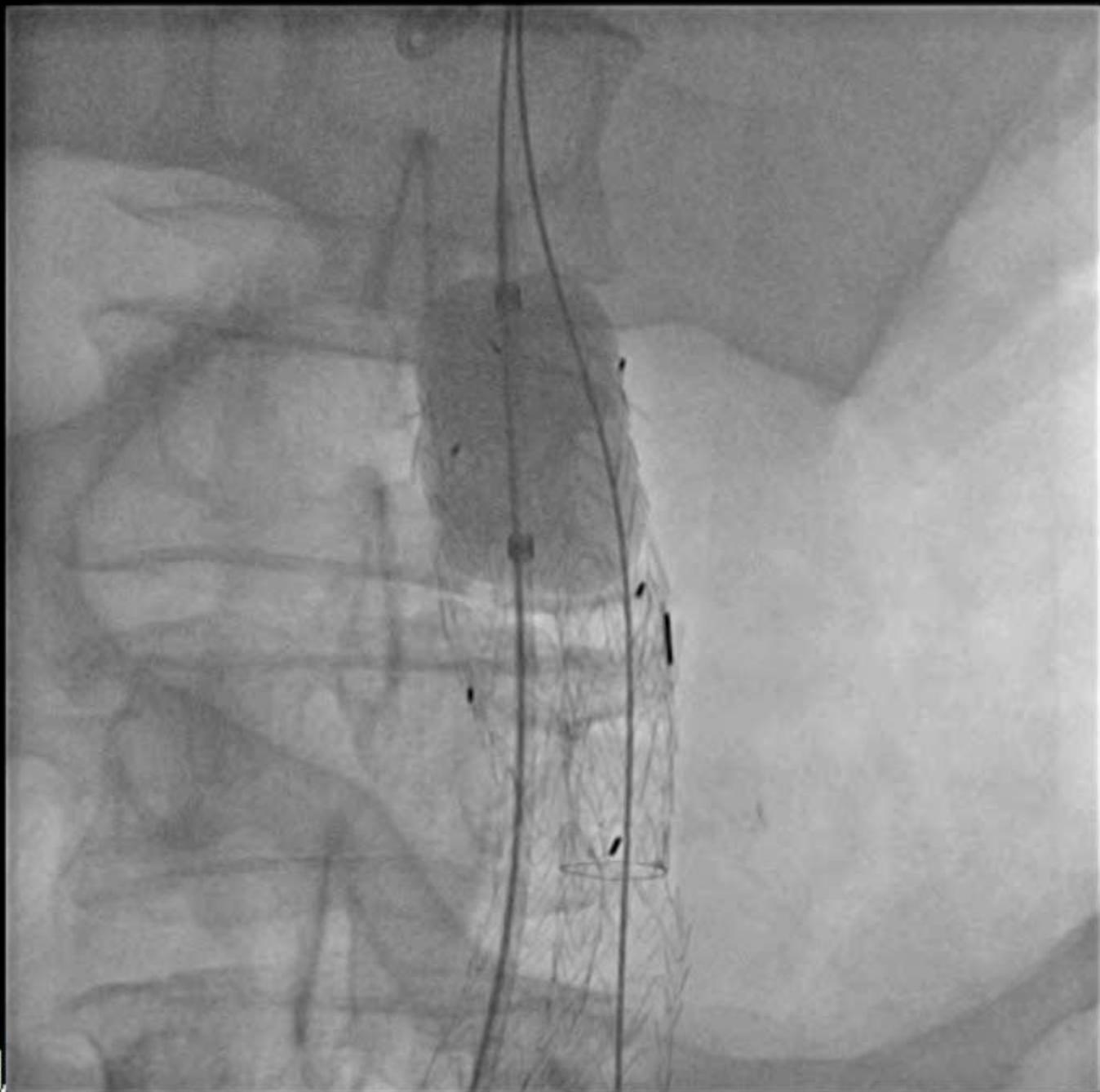






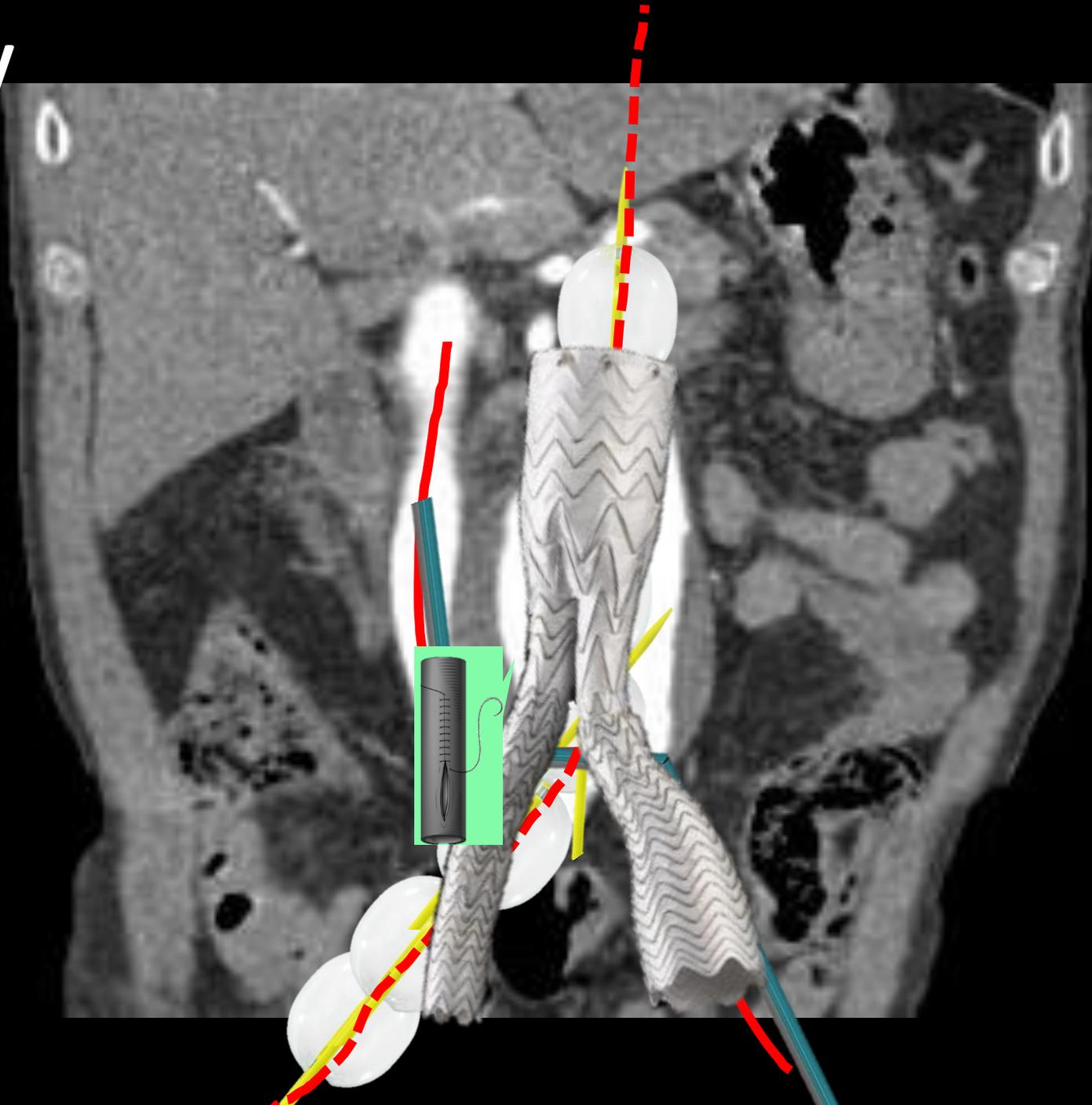
X1 Distance: ↑ 600mm  
X2 Distance: ↑ 948mm





- After EVAR procedure, the patient was send to OR for the repair of aortocaval fistula and hematoma evacuation
- The operation was finished successfully and the patient recovered his vital sign and consciousness
- The patient was hospitalized for 38 days
- Unfortunately, the patient died because of several serious complications

# Summary





감사합니다

