

TEVAR DOES NOT PREVENT ANEURYSMAL DEGENERATION OF TYPE B AORTIC DISSECTION

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Background: Promising results of TEVAR in patients with complicated type B aortic dissection (TBAD) have been well-documented. Although many hypothesize a benefit of TEVAR in uncomplicated patients, the natural history of TEVAR for TBAD has yet to mature. Here we investigate whether TEVAR warrants enthusiasm for all-comers with TBAD.

Methods: A review of the literature was performed searching for studies assessing medium and long-term outcomes after TEVAR for TBAD. Studies were included if changes in aortic volume or diameter were recorded.

Results: Fifteen studies, representing 1108 patients, examined growth in the thoracic aorta. This occurred in 6.6%-84% of patients. When compiled, 33.8% of patients experienced growth. Six studies, representing 397 patients, examined growth in the abdominal aorta, occurring in 10-54% of patients. Compiled, 34.5% of patients experienced abdominal aortic growth. Fourteen publications were excluded as the percentage of patients experiencing growth was unreported.

Conclusions: There is evidence that TEVAR does not stabilize the dissected aorta and can result in growth. The development of reporting standards is necessary to homogenize data and strengthen our understanding of this complex disease process.