Pseudoaneurysm of the thoracoabdominal aortic graft due to intercostal nerve block by
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ABSTRACT
We present a rare late complication after thoracoabdominal aortic aneurysm (TAAA) repair. The patient is a 56-year-old male who underwent Extent I TAAA repair four years ago, presenting with persistent pain that has been unrelieved despite multiple intercostal nerve blocks. Physical exam was significant for unstable ribcage and a firm, pulsatile mass at the posterior thoracoabdominal incision site. The previous incision was opened in the OR and a pulsatile mass was encountered, continuous with the intercostal space. A false aneurysm related to the intercostal blocks was suspected, the procedure was aborted and the incision was closed. Chest CT demonstrated an elongated, kinked TAAA graft running adjacent to the chest wall, giving rise to the pseudoaneurysm at T7. The patient was taken back to the OR. Using left heart bypass, the pseudoaneurysm was opened longitudinally. A 3mm defect was observed at the posterior wall of the graft abutting the chest wall. The graft was excised and replaced from T4 to T9. The pseudoaneurysm was excised and the ribs were plated. Postoperatively, the patient experienced significant pain relief. Attention must be paid to the length of the aortic graft and intercostal nerve blocks must be performed with caution.