



MEET 2014
MULTIDISCIPLINARY EUROPEAN
ENDOVASCULAR THERAPY

Branch Case In the Arch

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Faculty disclosure

Tim Resch

I disclose the following financial relationships:

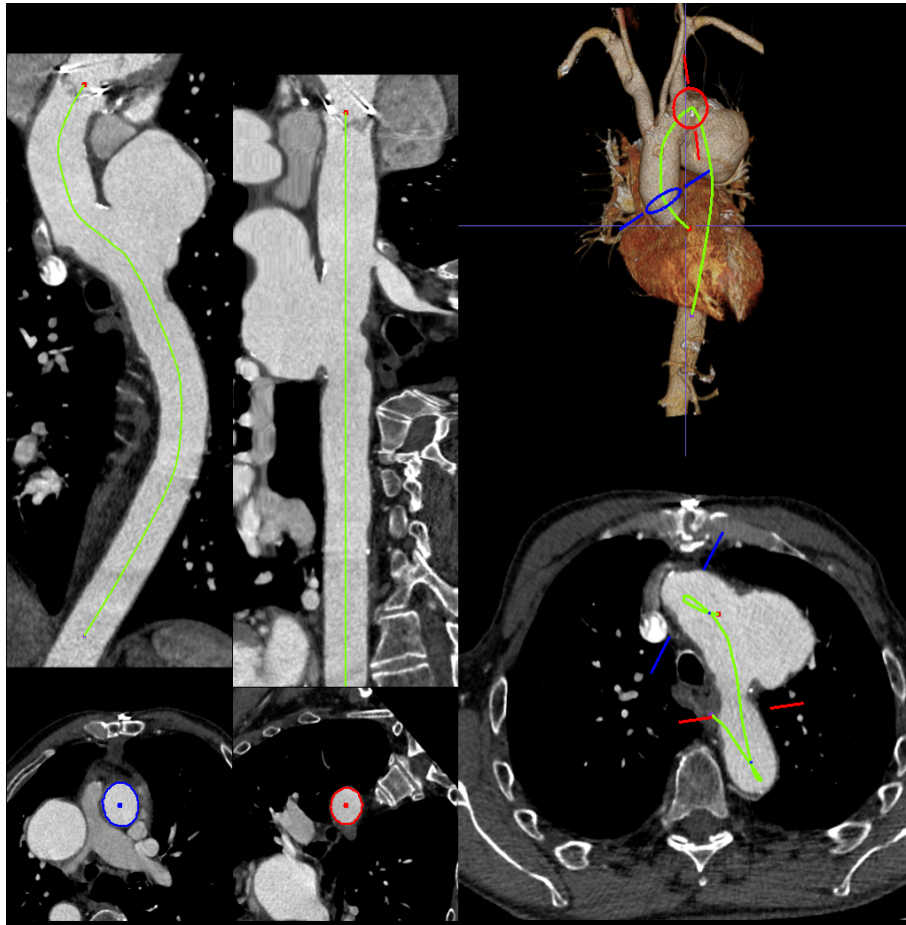
Consultant for **COOK Medical**

Receive grant/research support from **COOK Medical**

Advisory board of **COOK Medical**

Paid speaker for **COOK Medical**

1. Planning

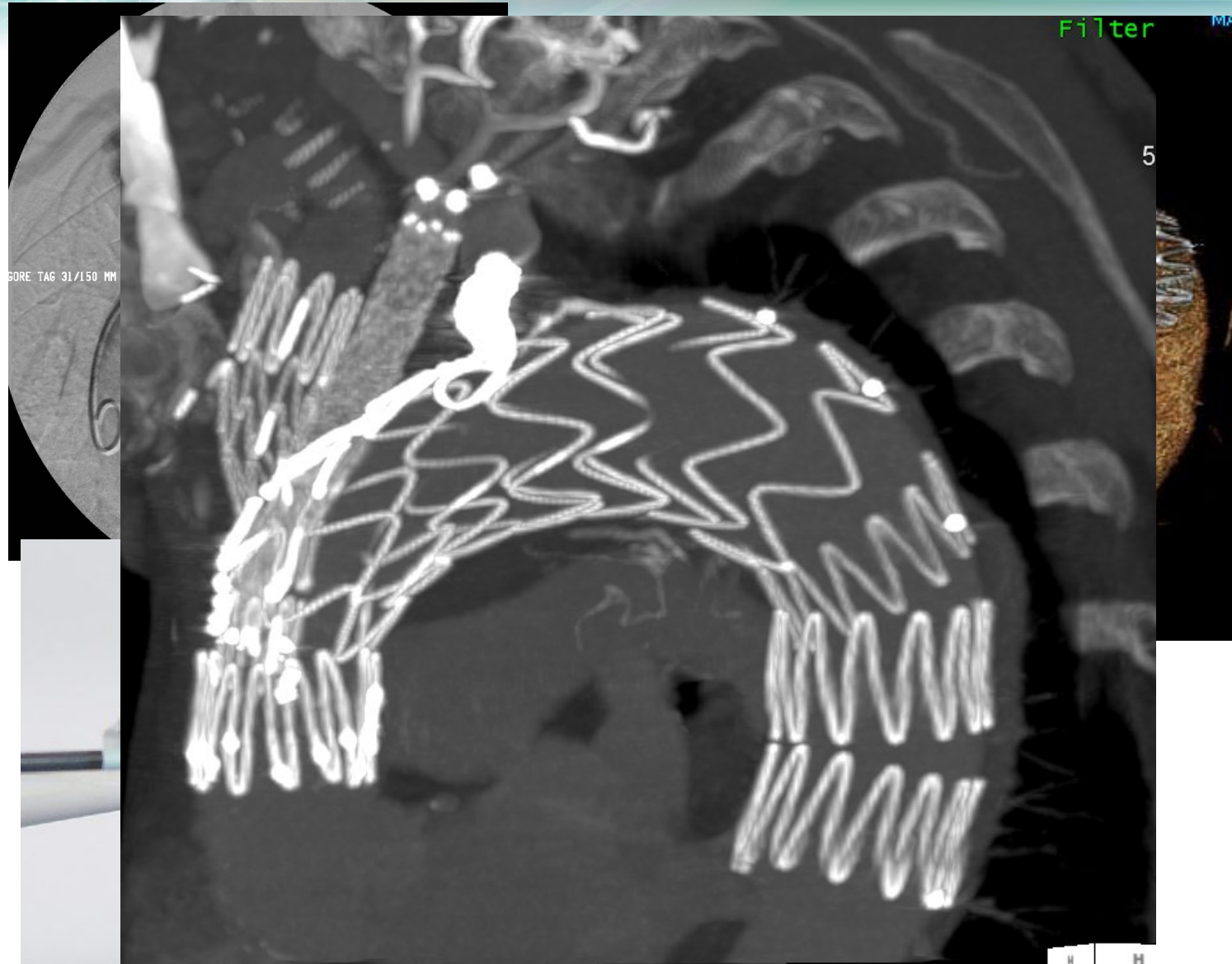


- 3D Workstation
- Ascending aorta
- Coronaries
- Aortic Valve!
- Cervical Vessel Landing Zone



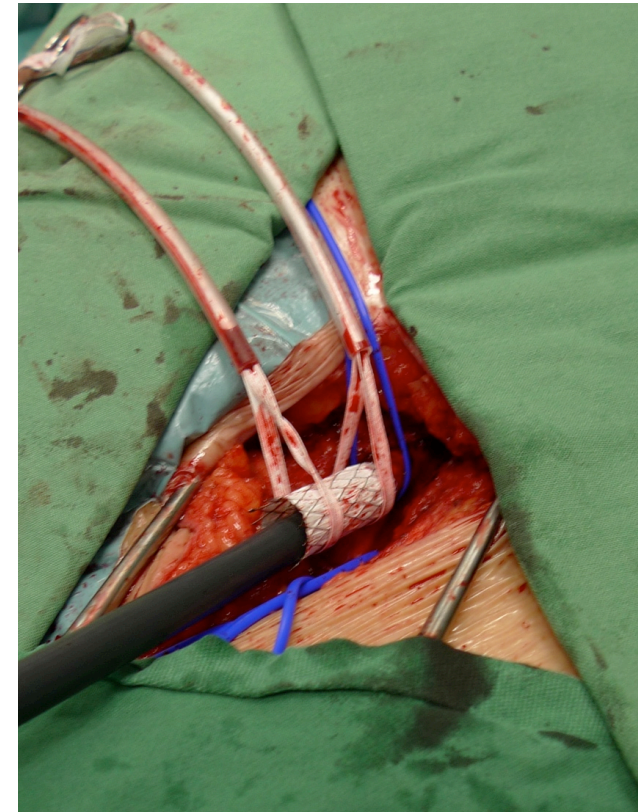
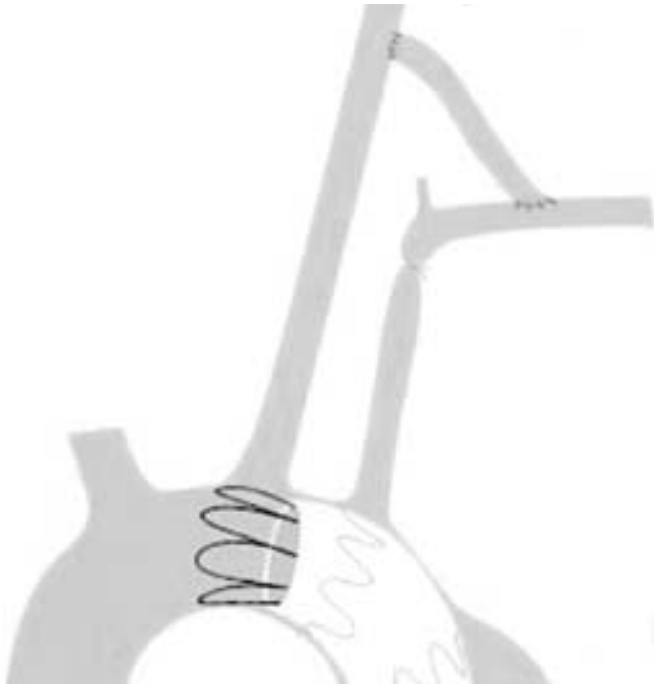
- Access (conduit?)
- Tortuosity
- Previous device
- Shaggy Aorta!

2. Procedure Choice

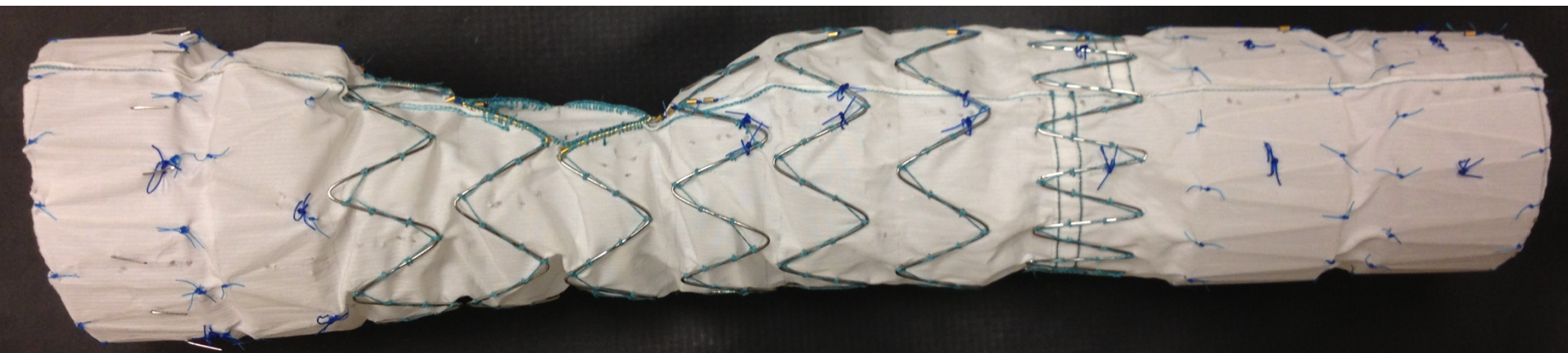


3. Staging

- Carotid Subclavian Bypass
- Iliac Access



ARCH BRANCH IMPLANTATION





Arch Branch Implantation

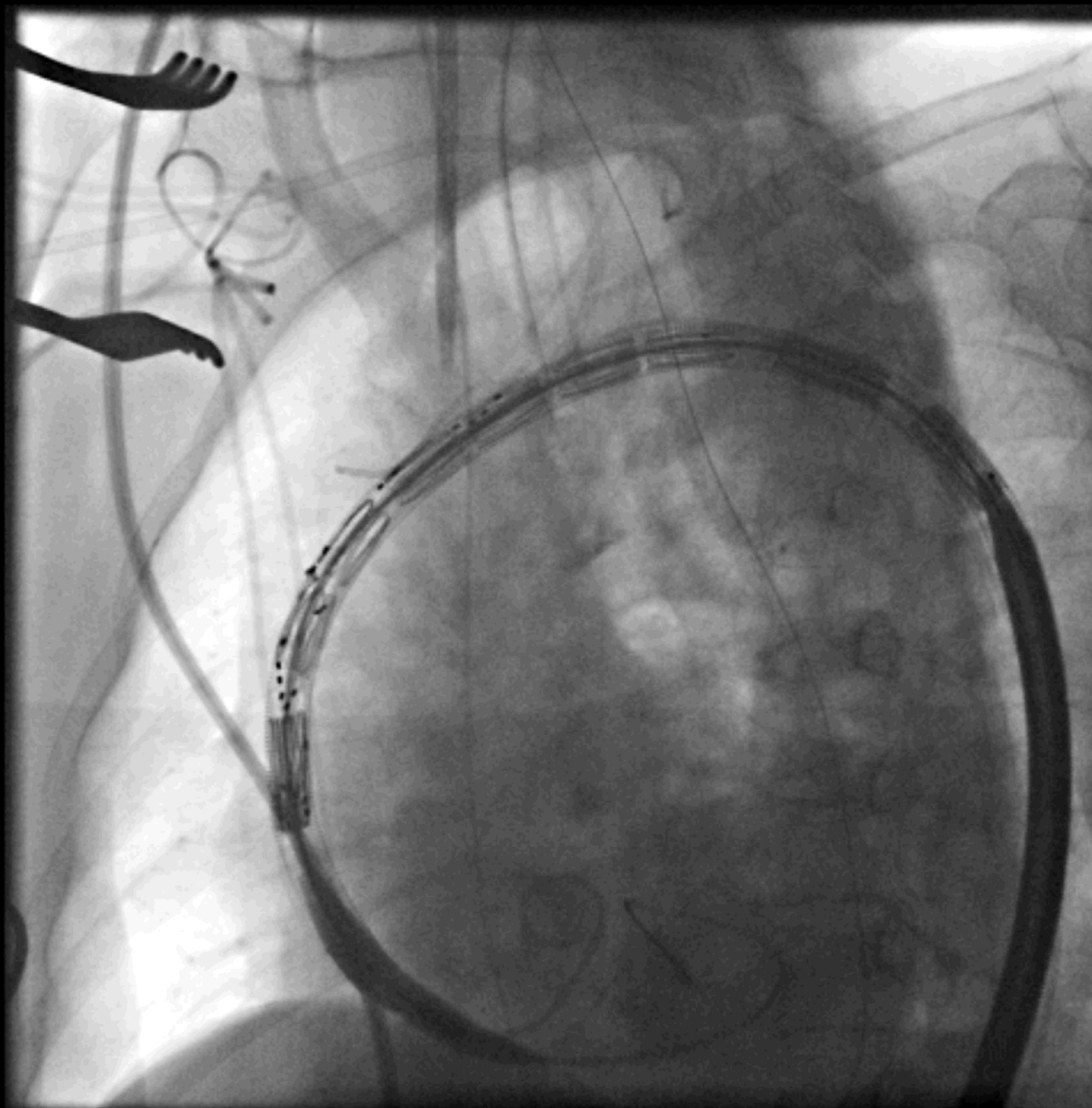
- Temporary Pacemaker
 - Femoral or Jugular
- Access to Branches
 - Left High Brachial (via bypass)
 - Right Carotid (allows clamping)

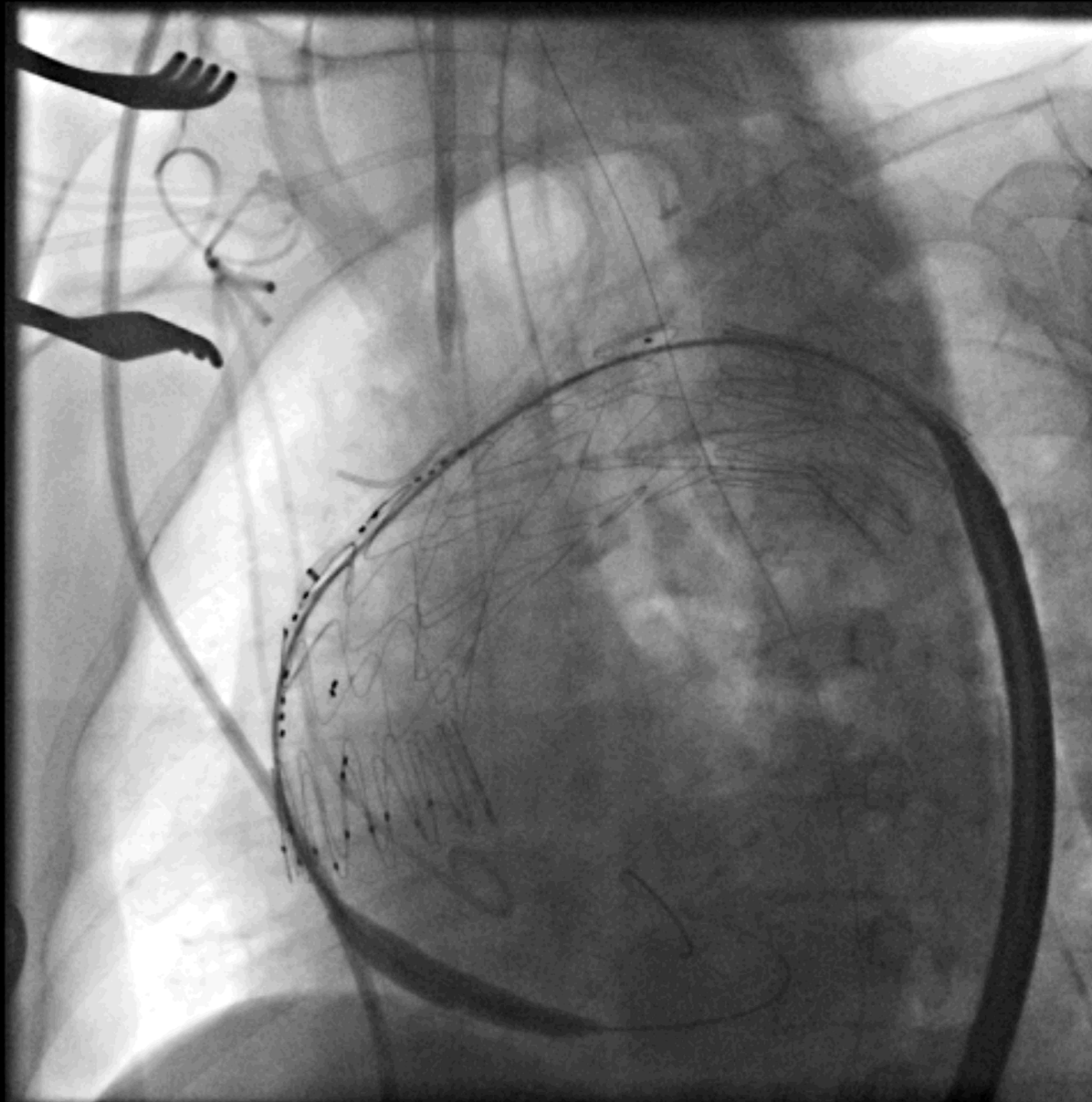
Stentgraft Positioning

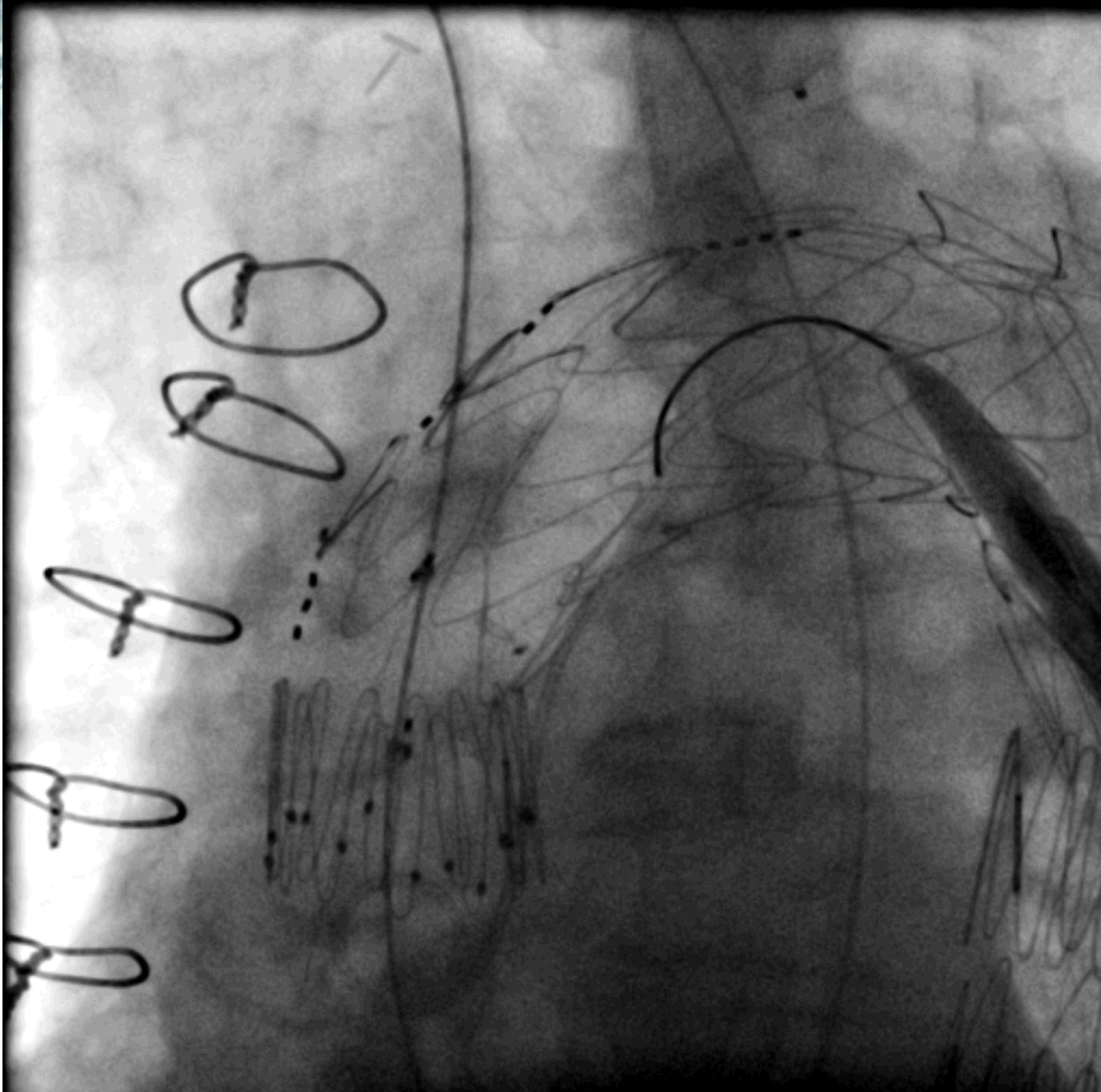
- Place Marker Catheters in TV
- Use Fusion!

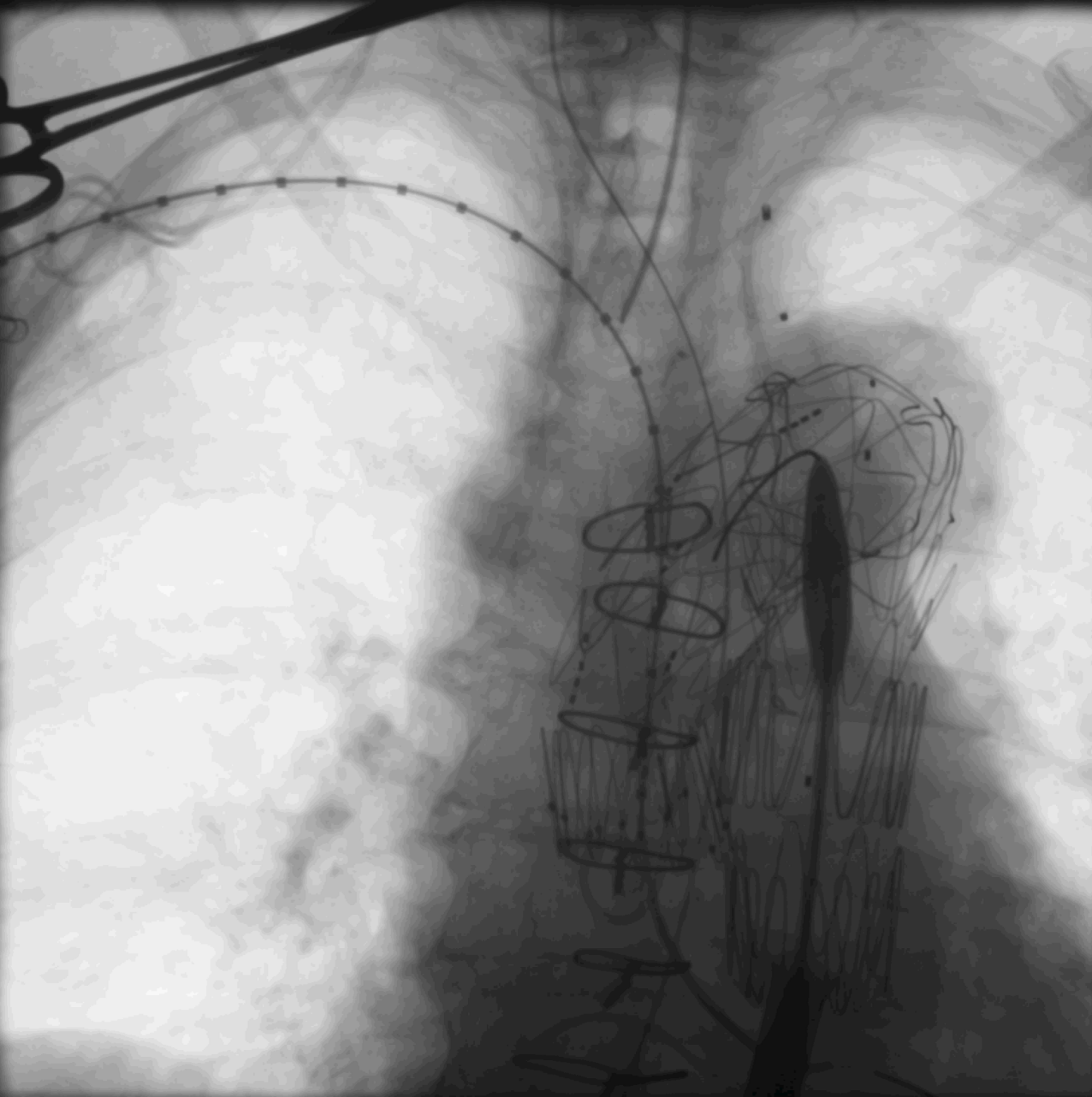


Video courtesy S. Haulon







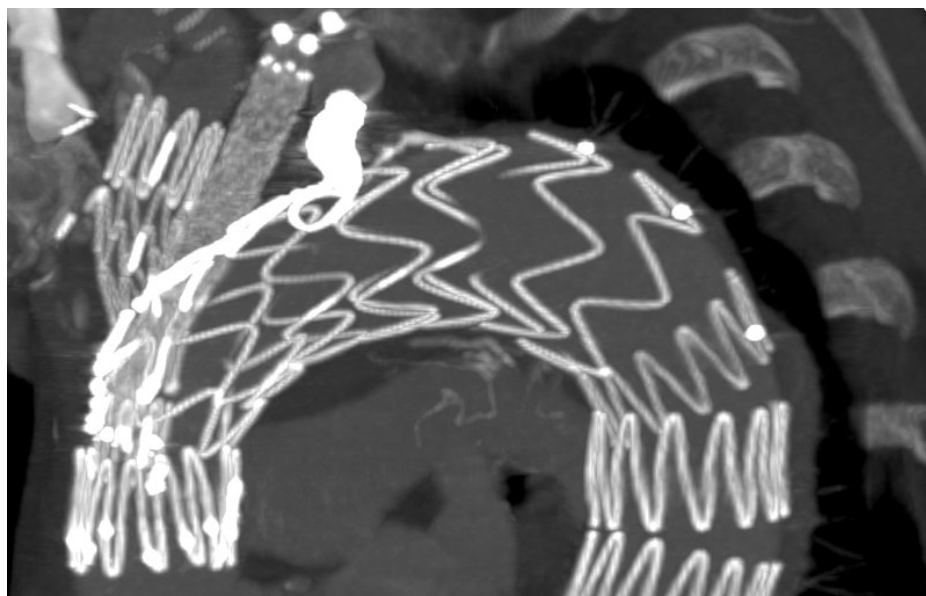






Summary

- Total Arch Repair Feasible
- Learning Curve
 - Patient Selection
 - Stentgraft Implant



Global experience with an inner branched arch endograft

Stéphan Haulon, MD, PhD,^a Roy K. Greenberg, MD,^b Rafaëlle Spear, MD,^a Matt Eagleton, MD,^b Cherrie Abraham, MD,^c Christos Lioupis, MD,^c Eric Verhoeven, MD, PhD,^d Krassi Ivancev, MD,^e Tilo Kölbel, MD, PhD,^f Brendan Stanley, MD,^g Timothy Resch, MD,^h Pascal Desgranges, MD, PhD,ⁱ Blandine Maurel, MD,^a Blayne Roeder, PhD,^j Timothy Chuter, MD,^k and Tara Mastracci, MD^b

June 27& 28
Malmö, Sweden

COURSE DIRECTORS

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