MEET2015 Nice, June 8-9 2015

#### Late endoleak management – case discussions

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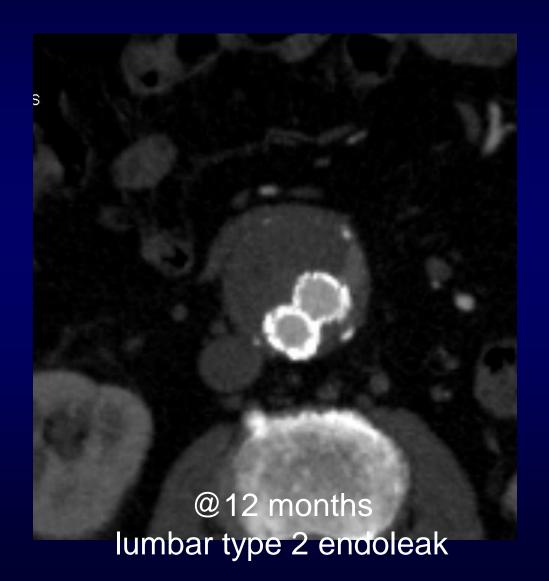


#### Late endoleak

- Type 1 and 3
  - Immediate treatment
- Type 2
  - Wait-and-see
  - Catheter-based embolization
  - Direct puncture

### Choice of treatment modality

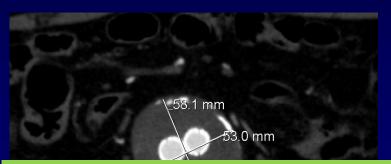
- Ease of access
  - Direct from A-B
  - From A-B through C-D....
- Availability hardware
  - Cone-beam CT
  - Navigational tools
  - Catheters, wires,...

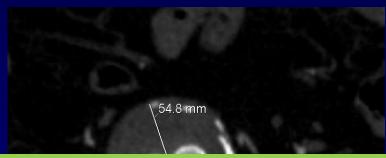


#### What to do?

- Wait-and-see
- Catheter-based embolization
- Direct puncture

#### Persistent endoleak





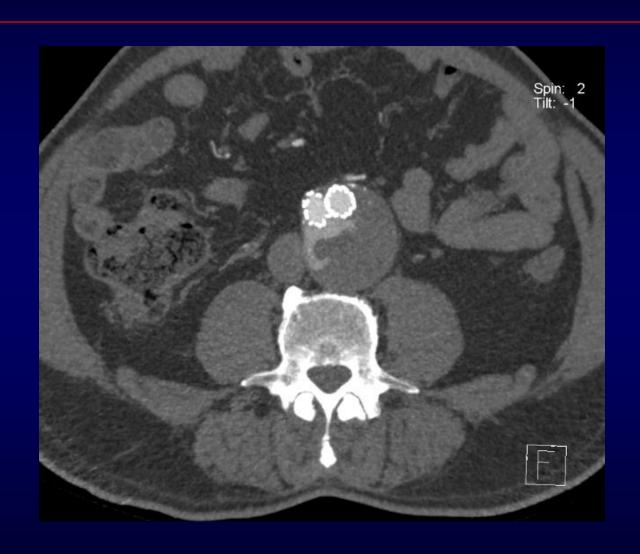
### NOT ALL ENDOLEAKS ARE HARMFUL





@6 months

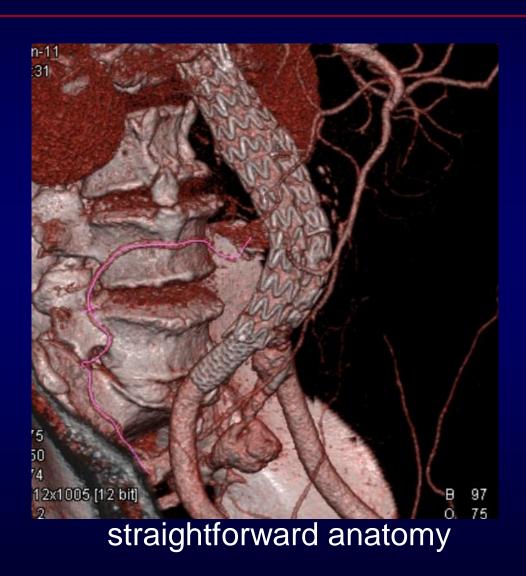
@12 months

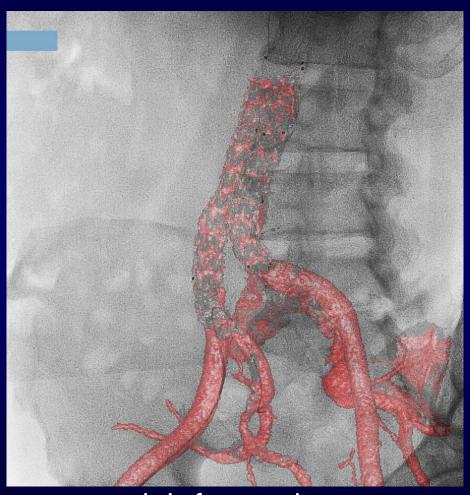


#### What to do?

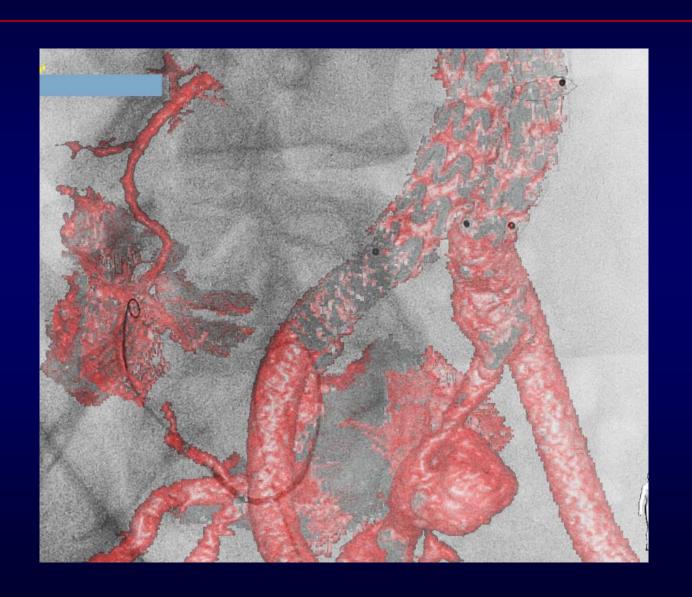
- Wait-and-see
- Catheter-based embolization
- Direct puncture

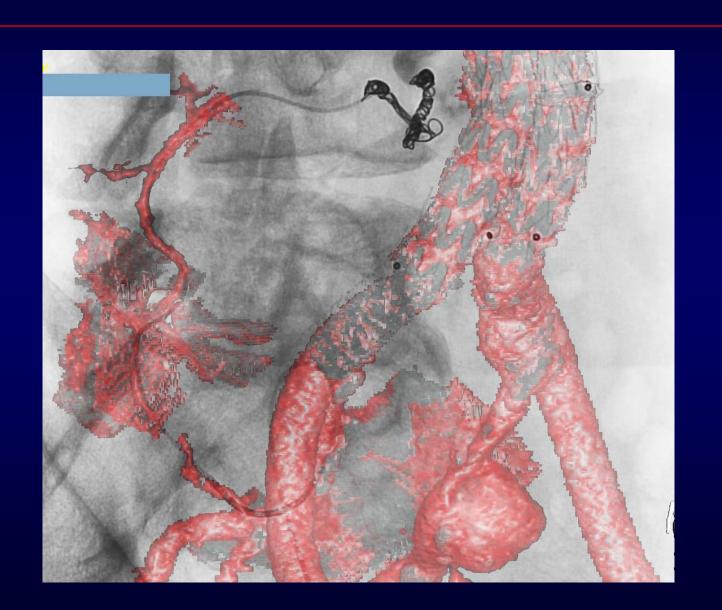






straightforward anatomy catheter-based approach







#### What to do?

- Wait-and-see
- Catheter-based embolization
- Direct puncture



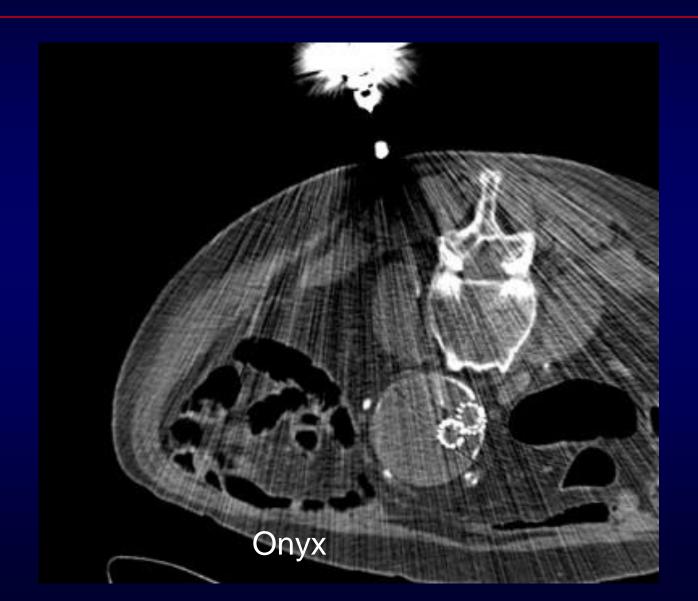
# Glue-translumbar (CT fluoroscopy)

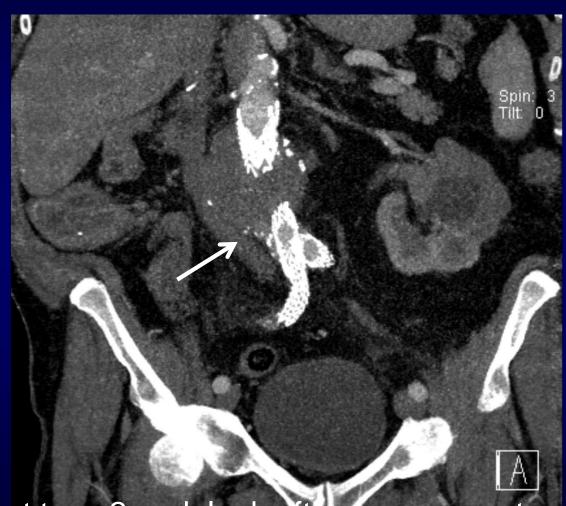






### Glue-translumbar (CT fluoroscopy)

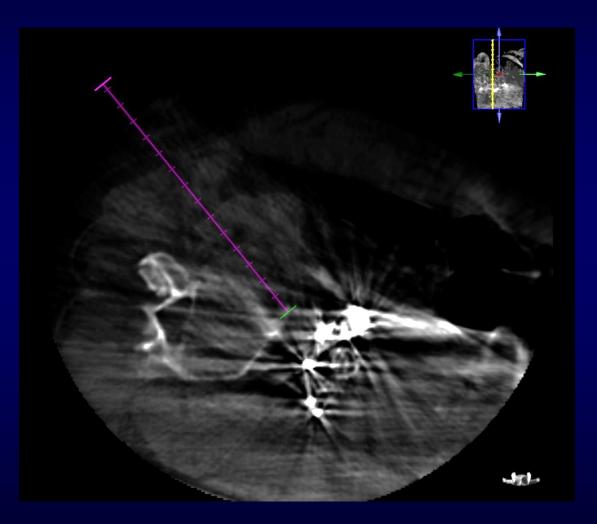




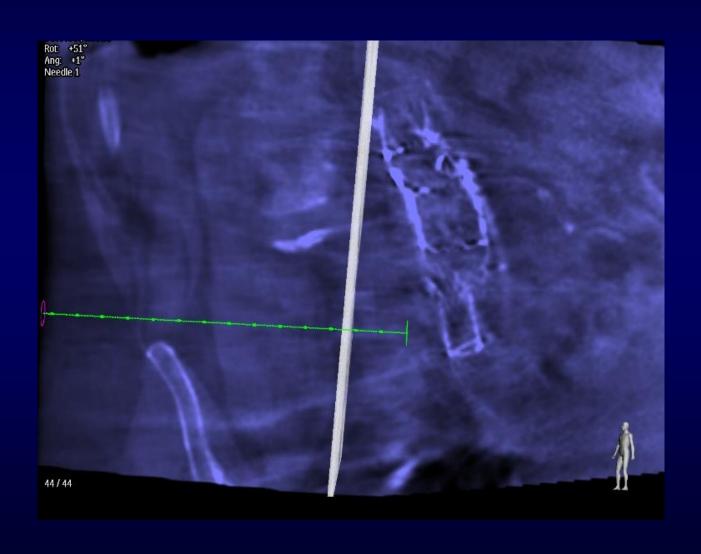
persistent type 2 endoleak after emergency type I repair

#### What to do?

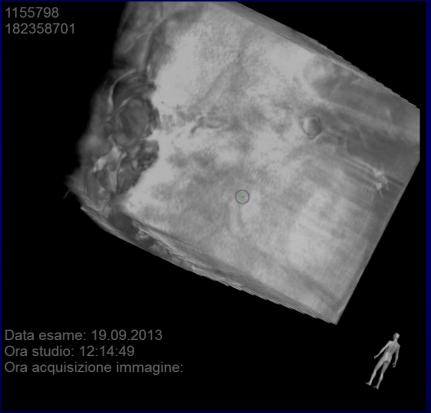
- Wait-and-see
- Catheter-based embolization
- Direct puncture



Planning



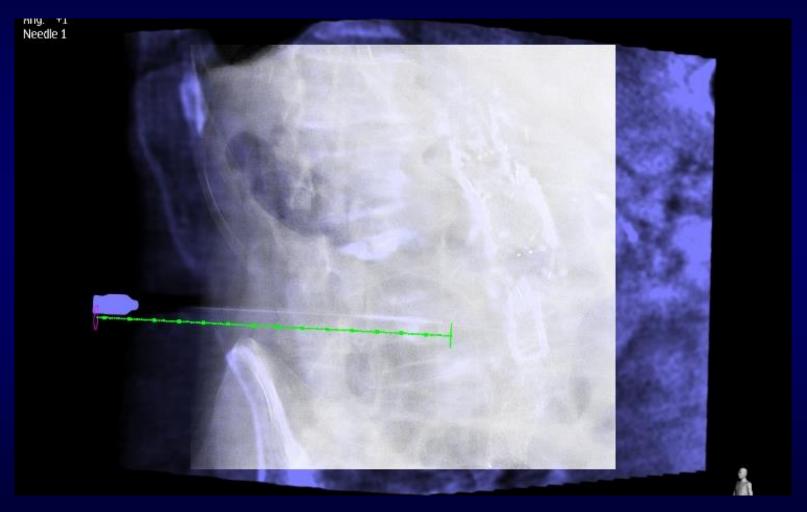




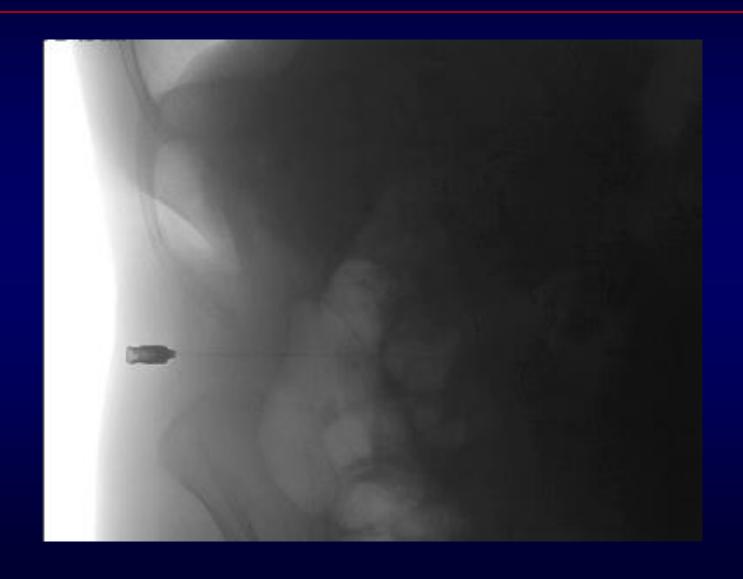
Entry view (bull's eye)

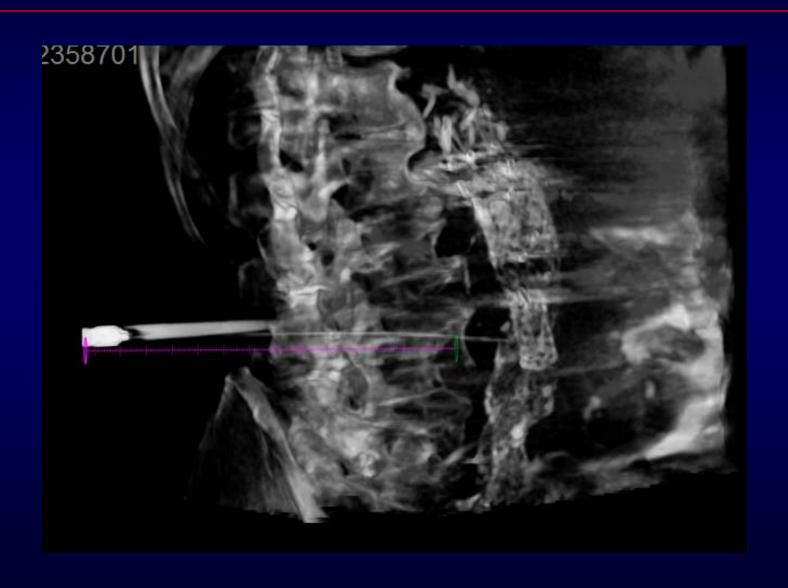


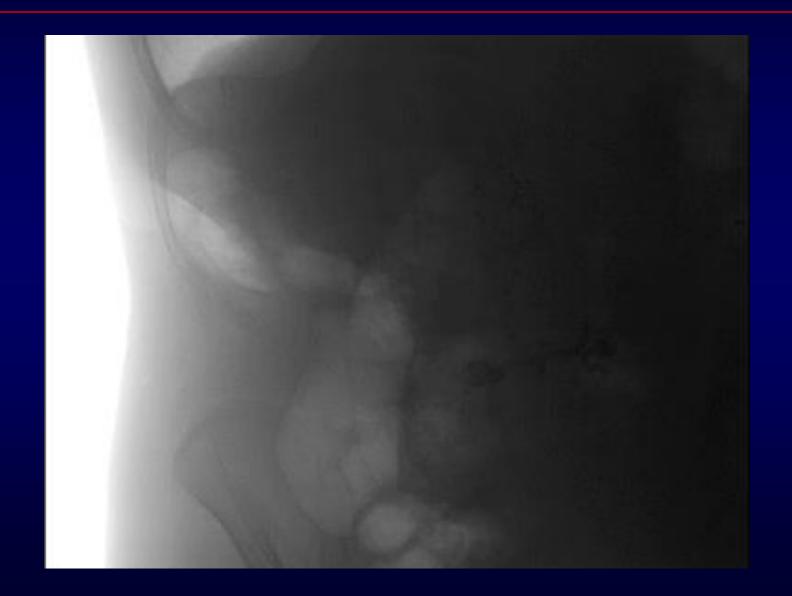
Rotating to 'needle view'



Needle view with merging fluoroscopy/CBCT





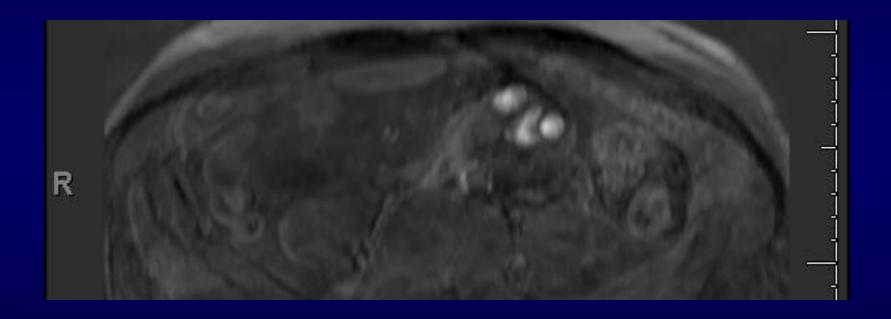




pre-operative embolisation of IMA and lumbar arteries 07/2005 ("St. Elsewhere")

persistent type 2 endoleak (a. sacralis media)

growing aneurysm 2007 55 n.m 2011 68 mm



#### What to do?

- Wait-and-see
- Catheter-based embolization
- Direct puncture

