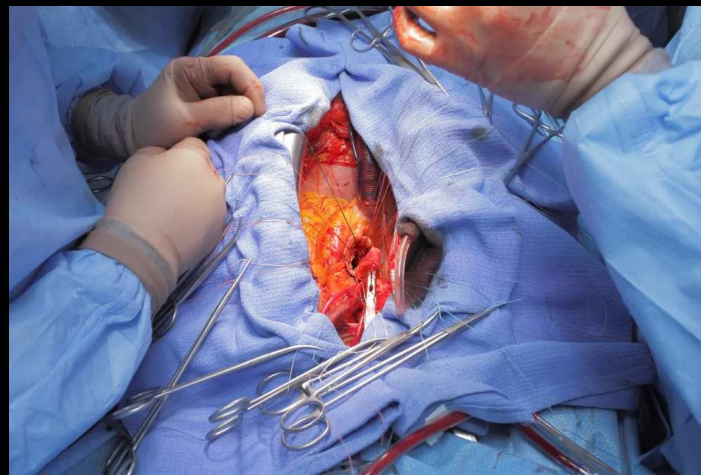
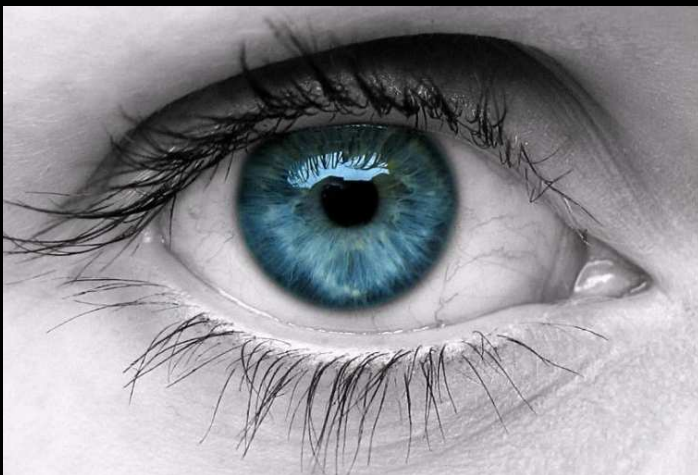


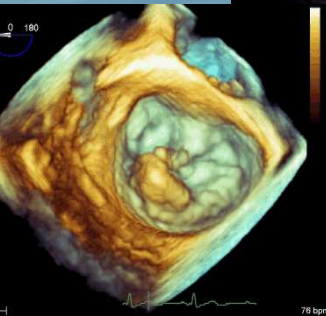
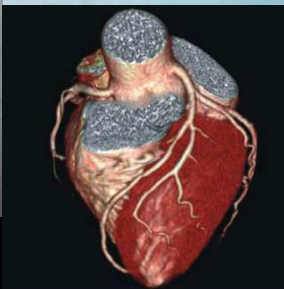
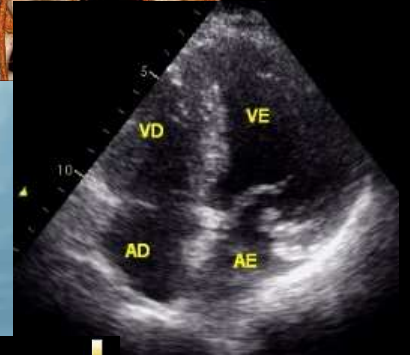
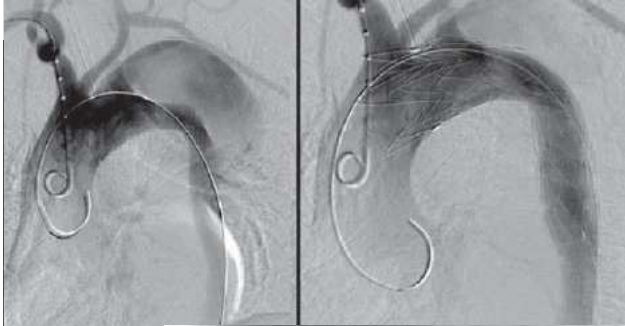
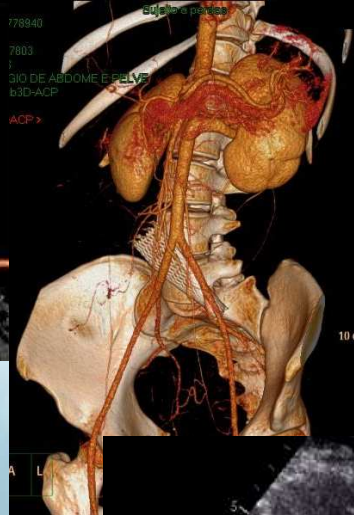
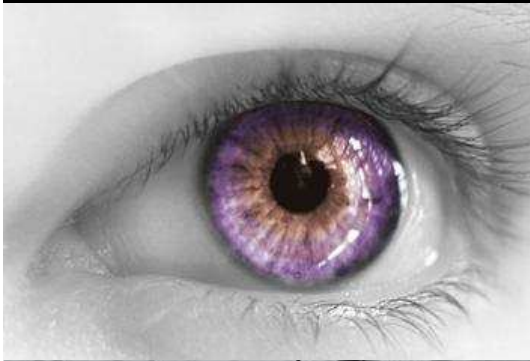


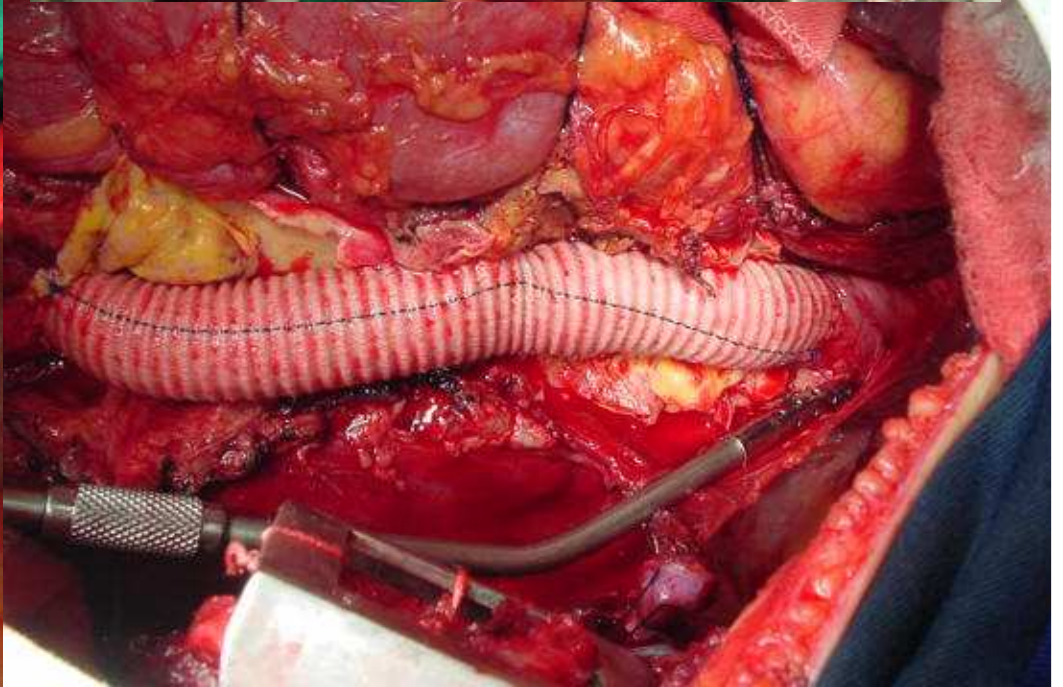
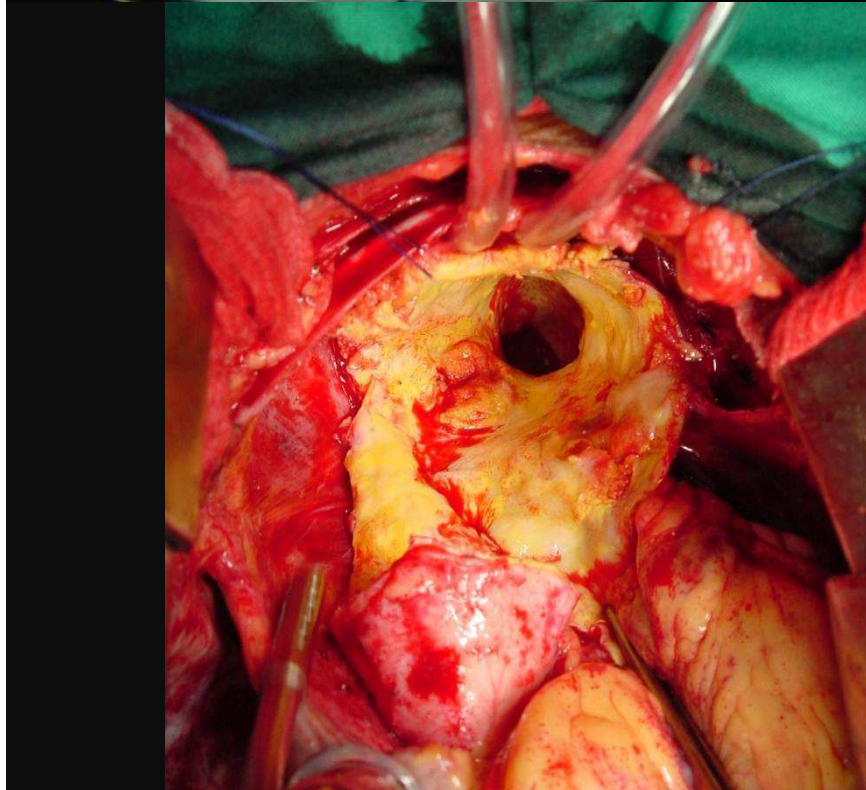
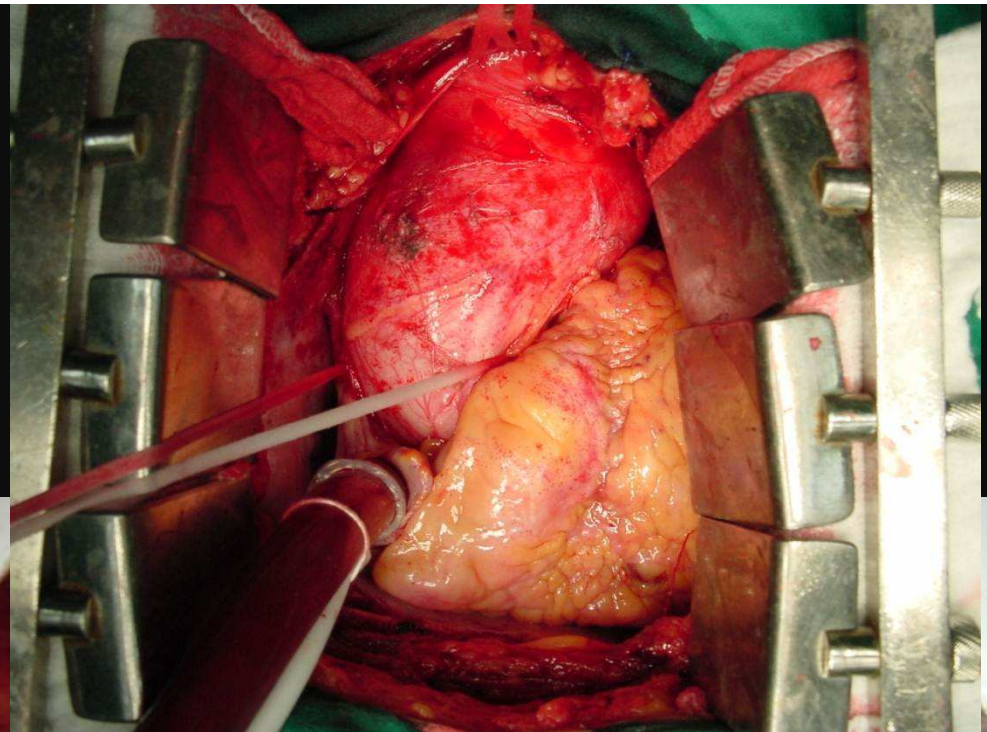
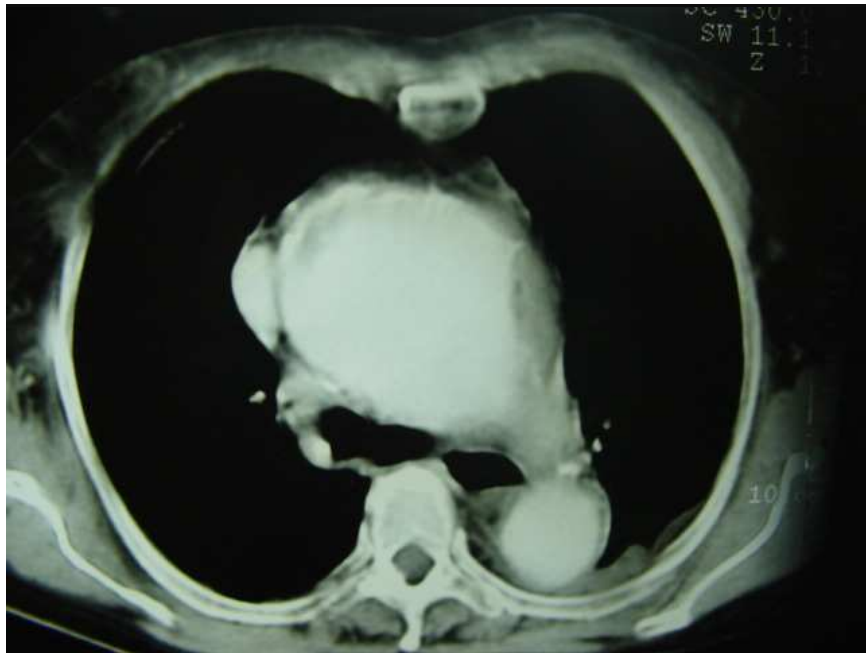
Intervenção nas Doenças da Aorta

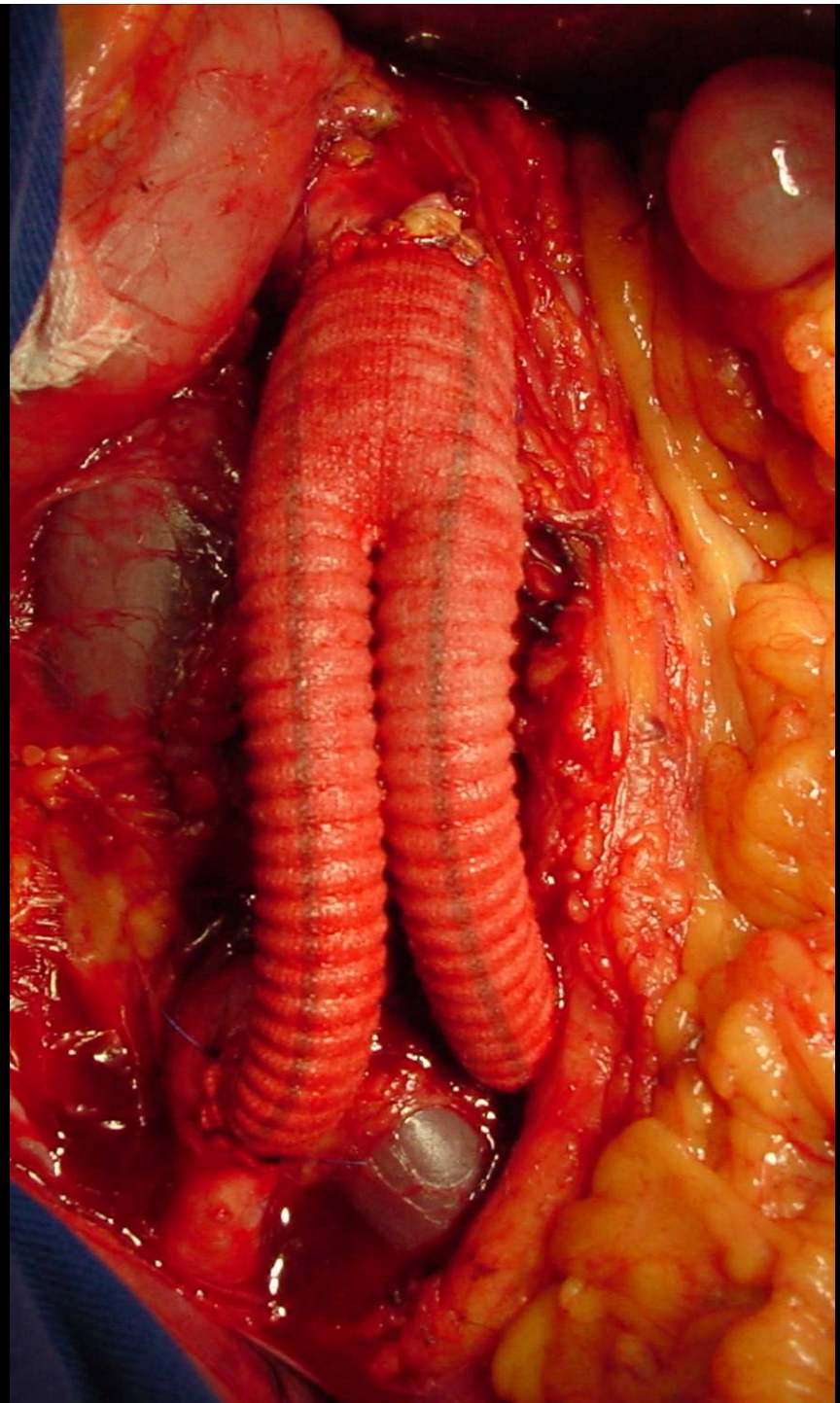
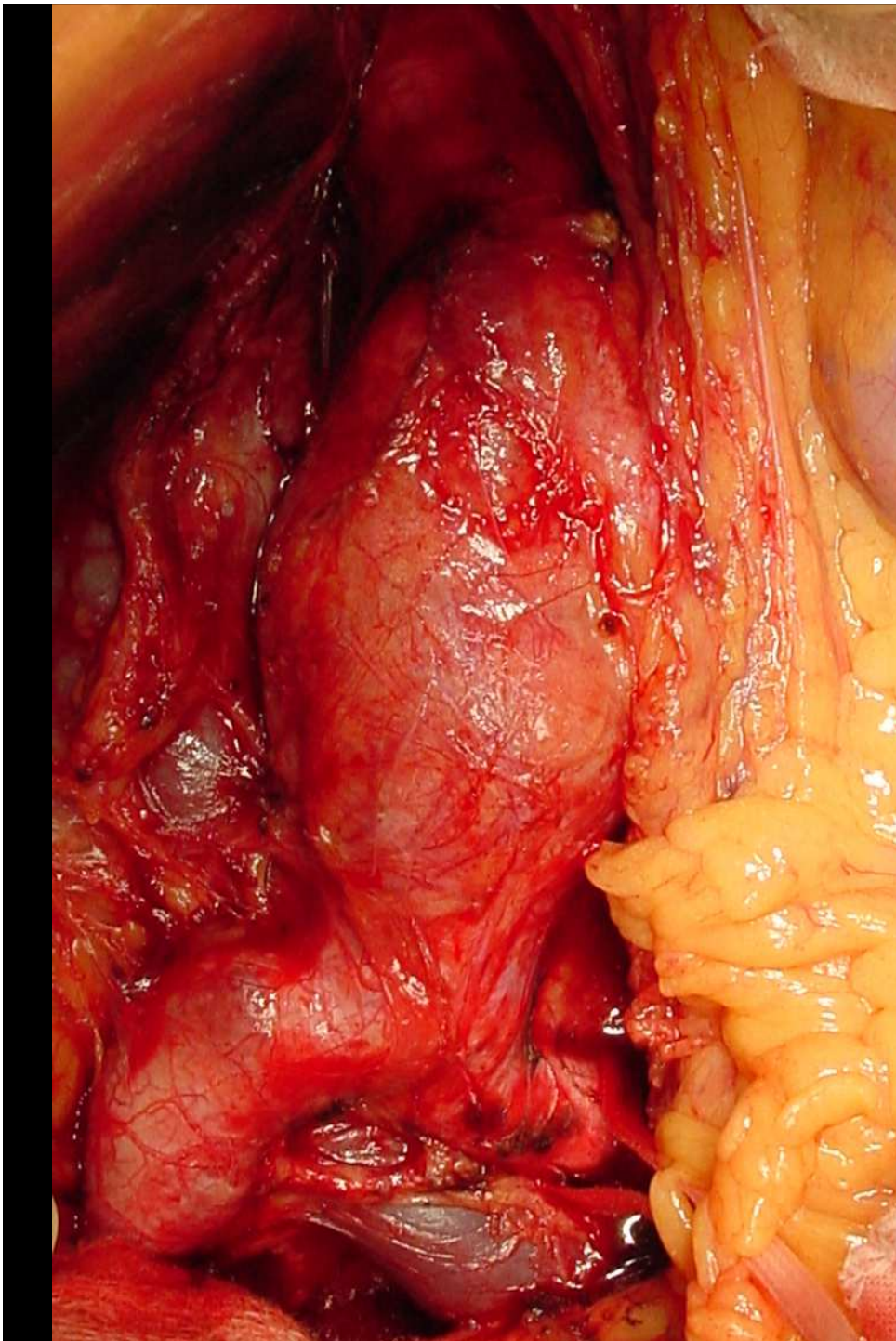
Prof. José Honório Palma
jhpalma@terra.com.br

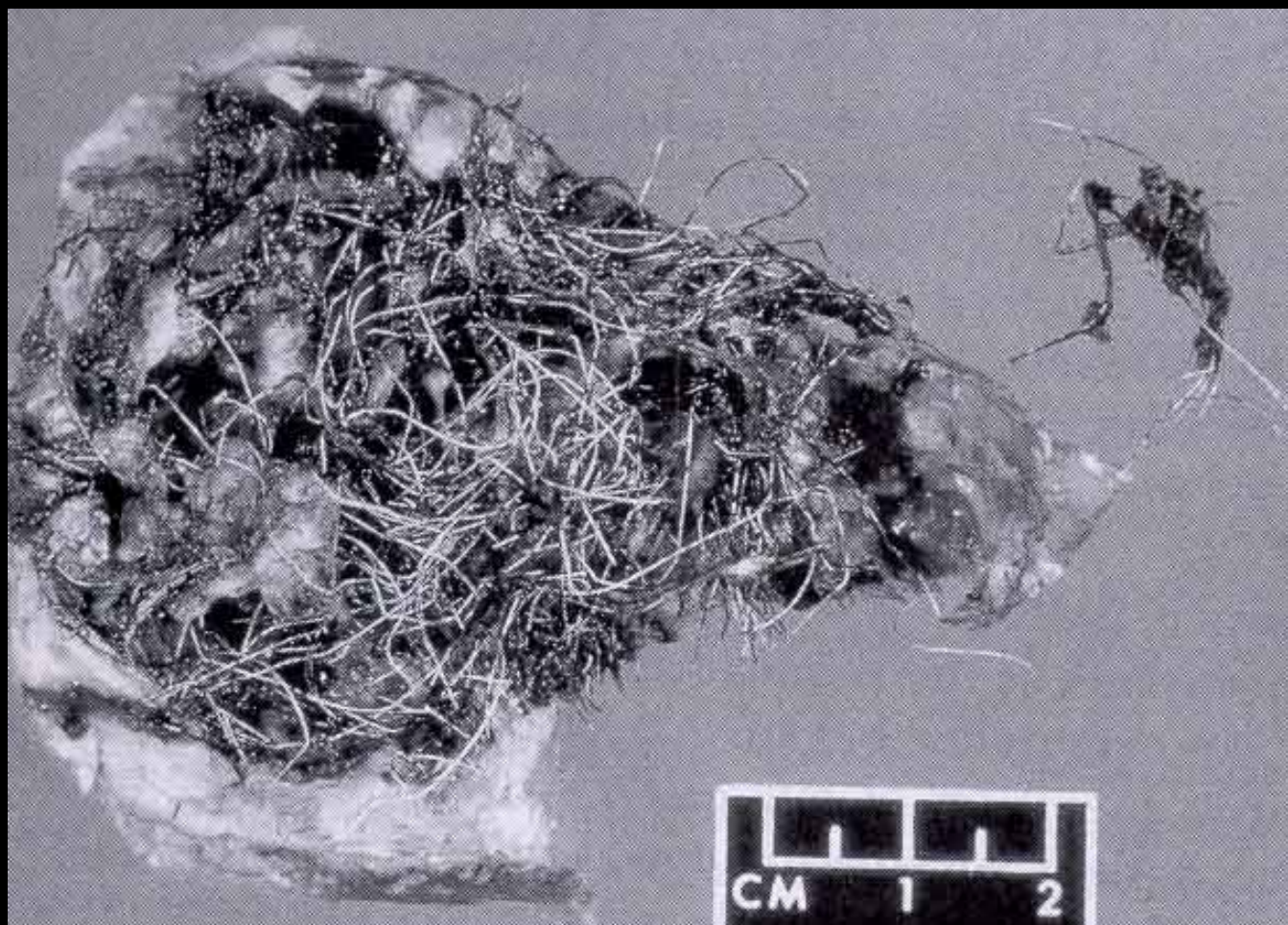


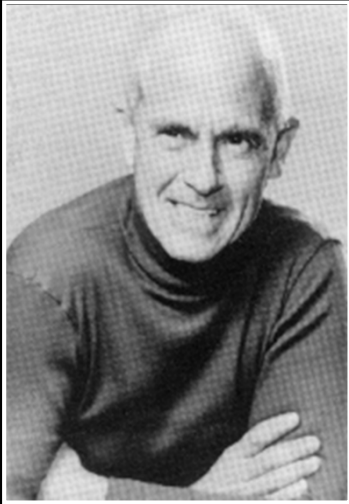




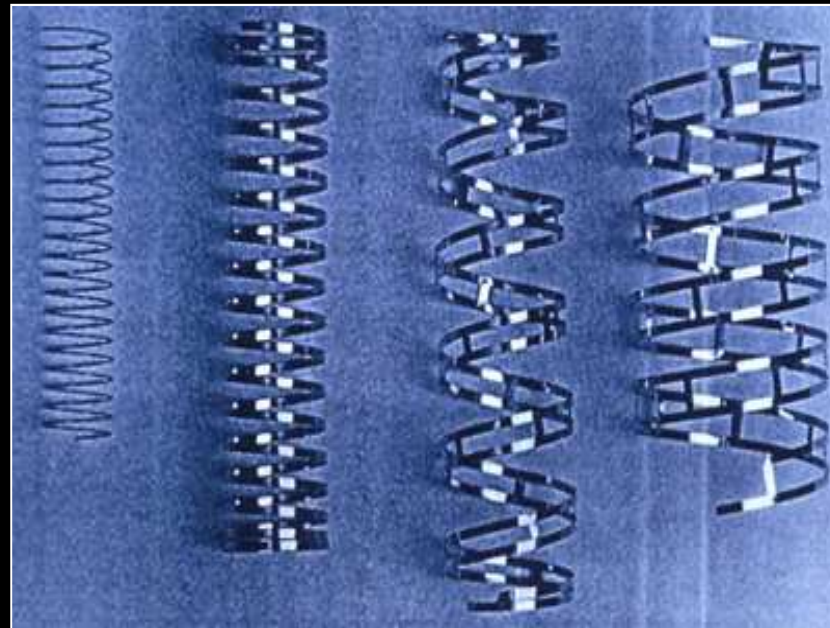
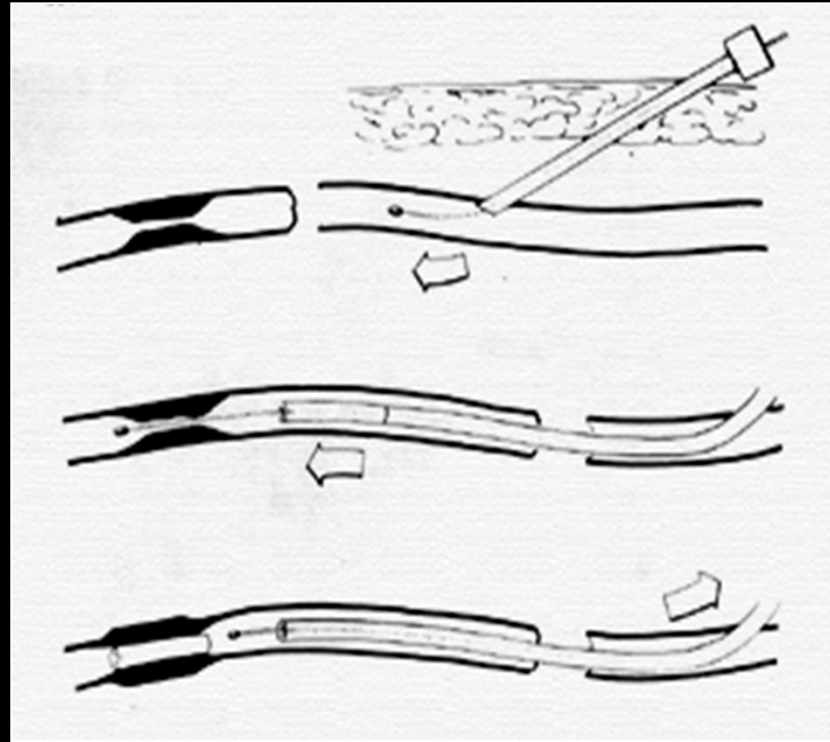


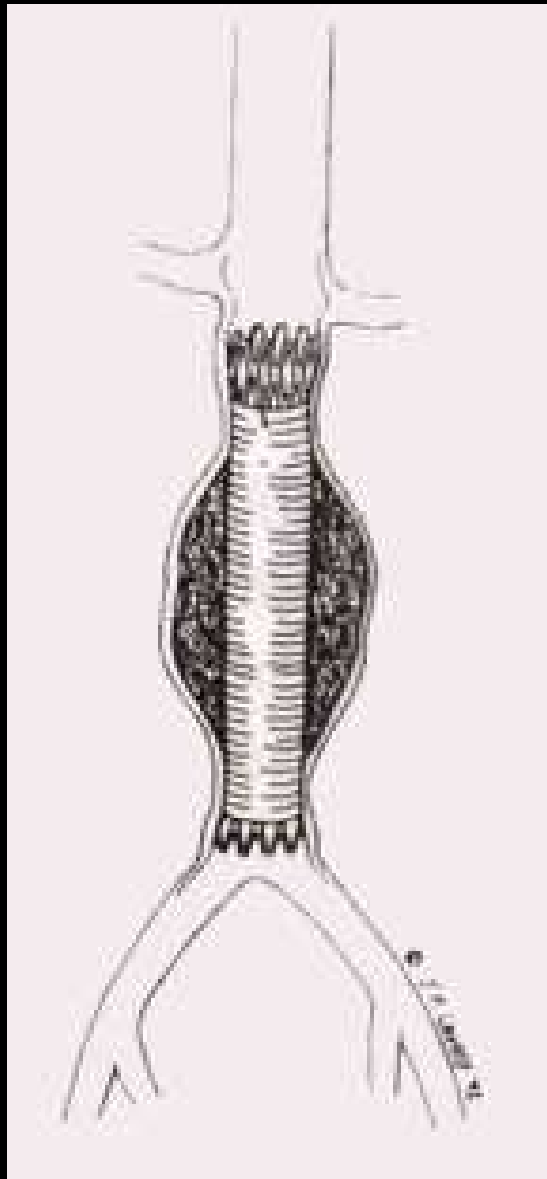






Dotter et al 1969

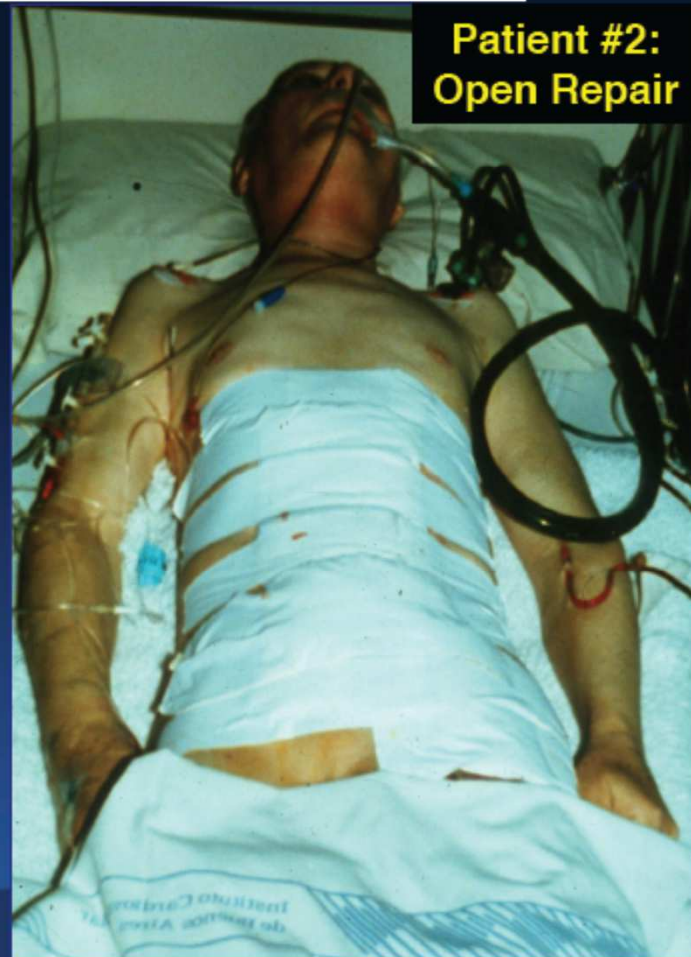
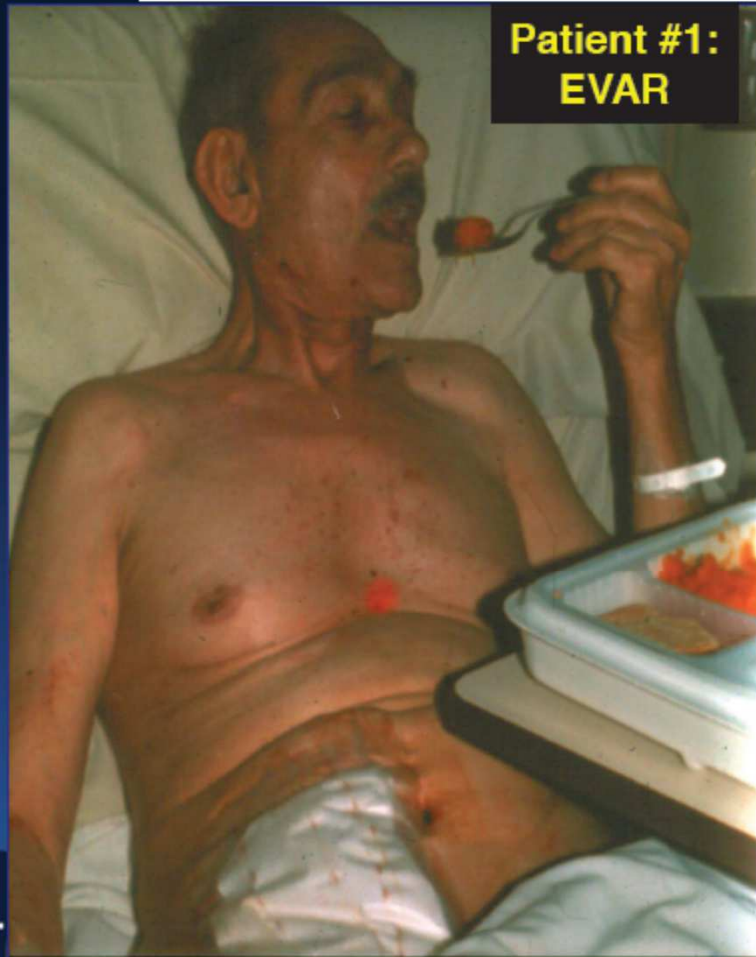


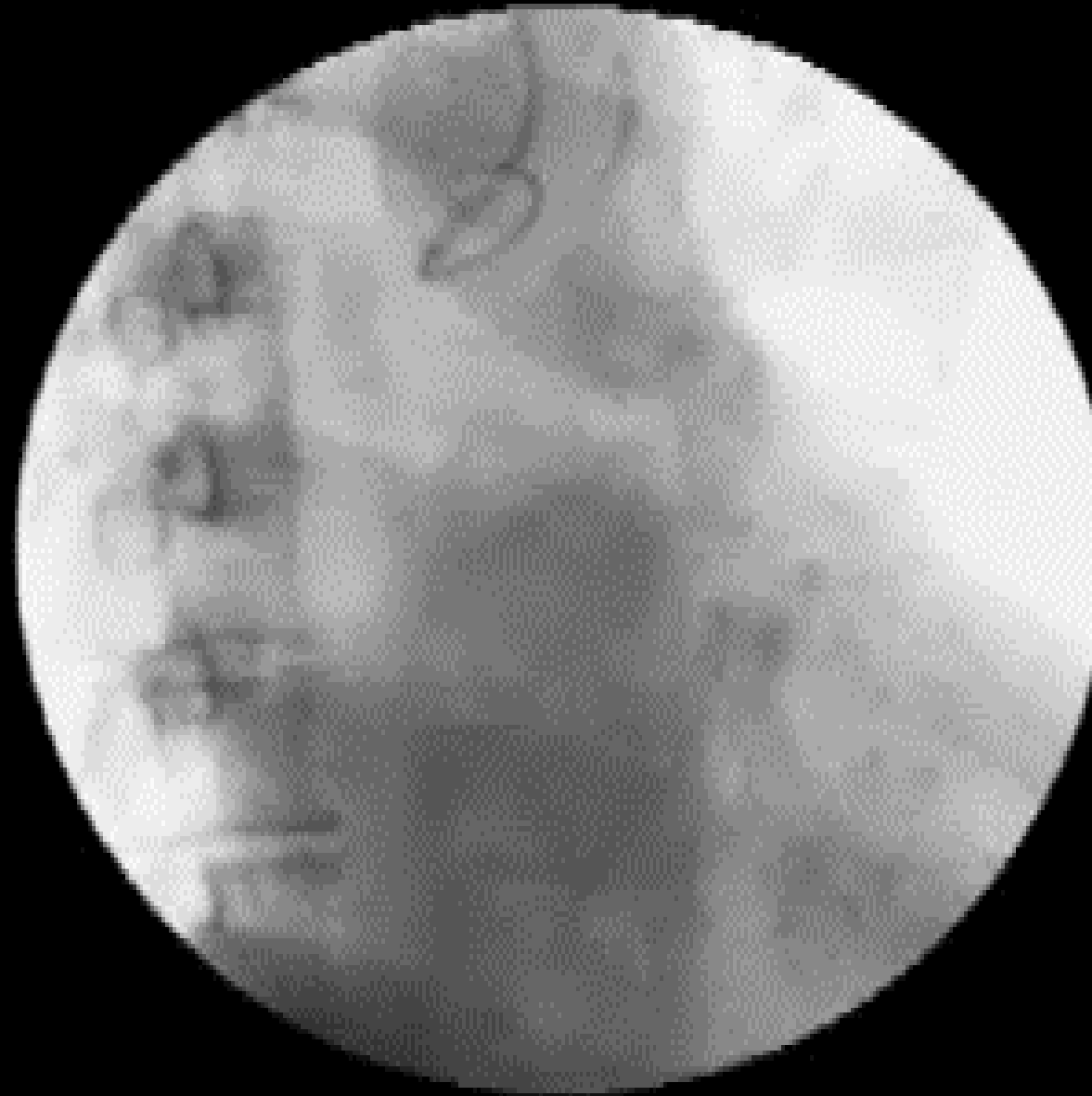


PARODI'S FIRST PATIENT

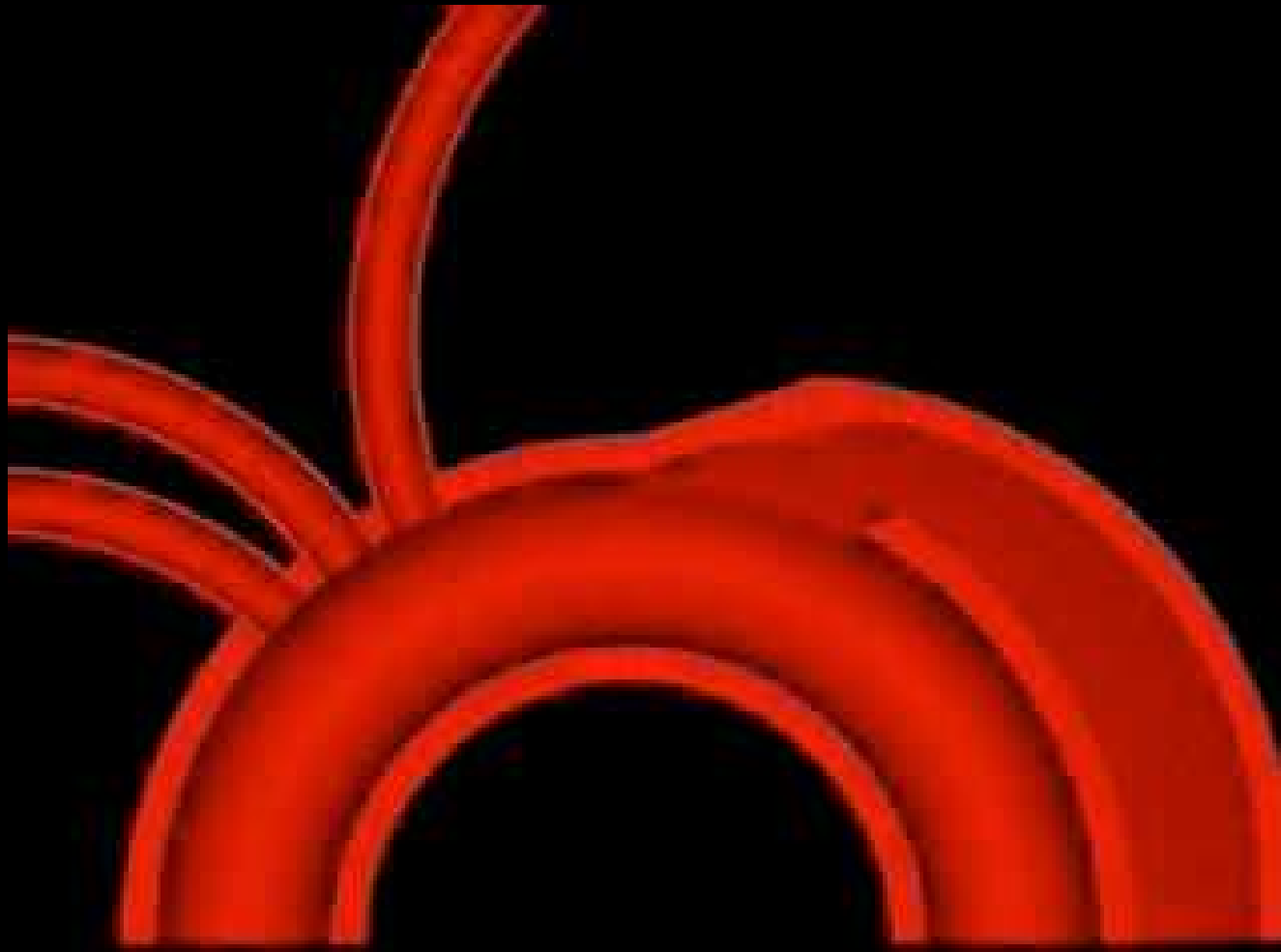


Morning of Saturday September 8, 1990: ICU of the ICBA

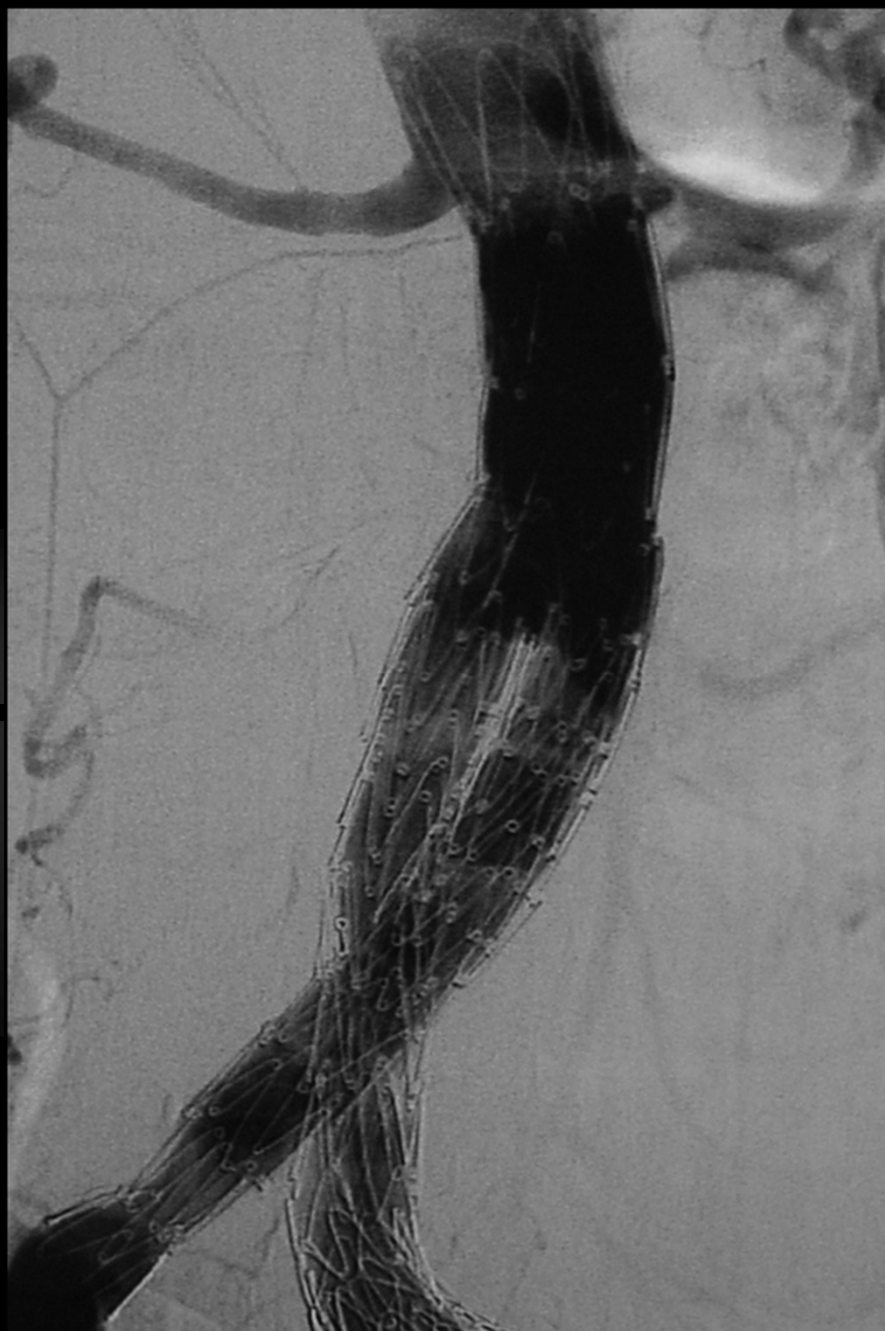








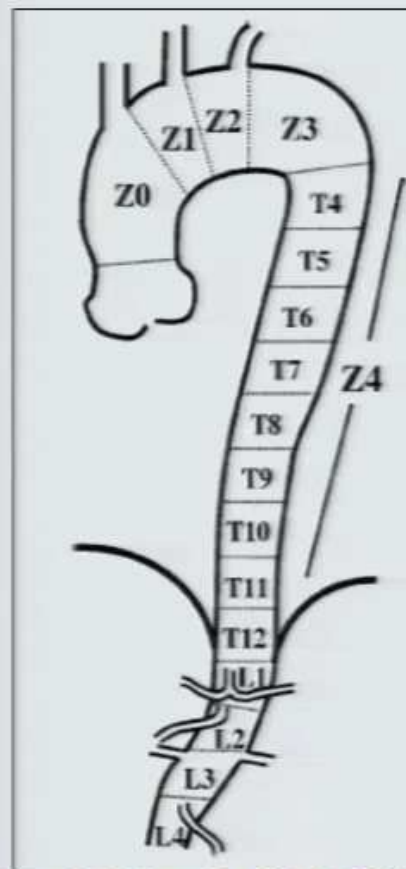
1



Endovascular Approaches to Complex Thoracic Aortic Disease

G. Chad Hughes, MD, Christopher F. Sulzer, MD,
 Richard L. McCann, MD, and Madhav Swaminathan, MD, FASE, FAHA

Semin Cardiothorac Vasc Anesth. 2008;12:298-319



Ishimaru S. J Endovasc Ther 2004; 11:462-71



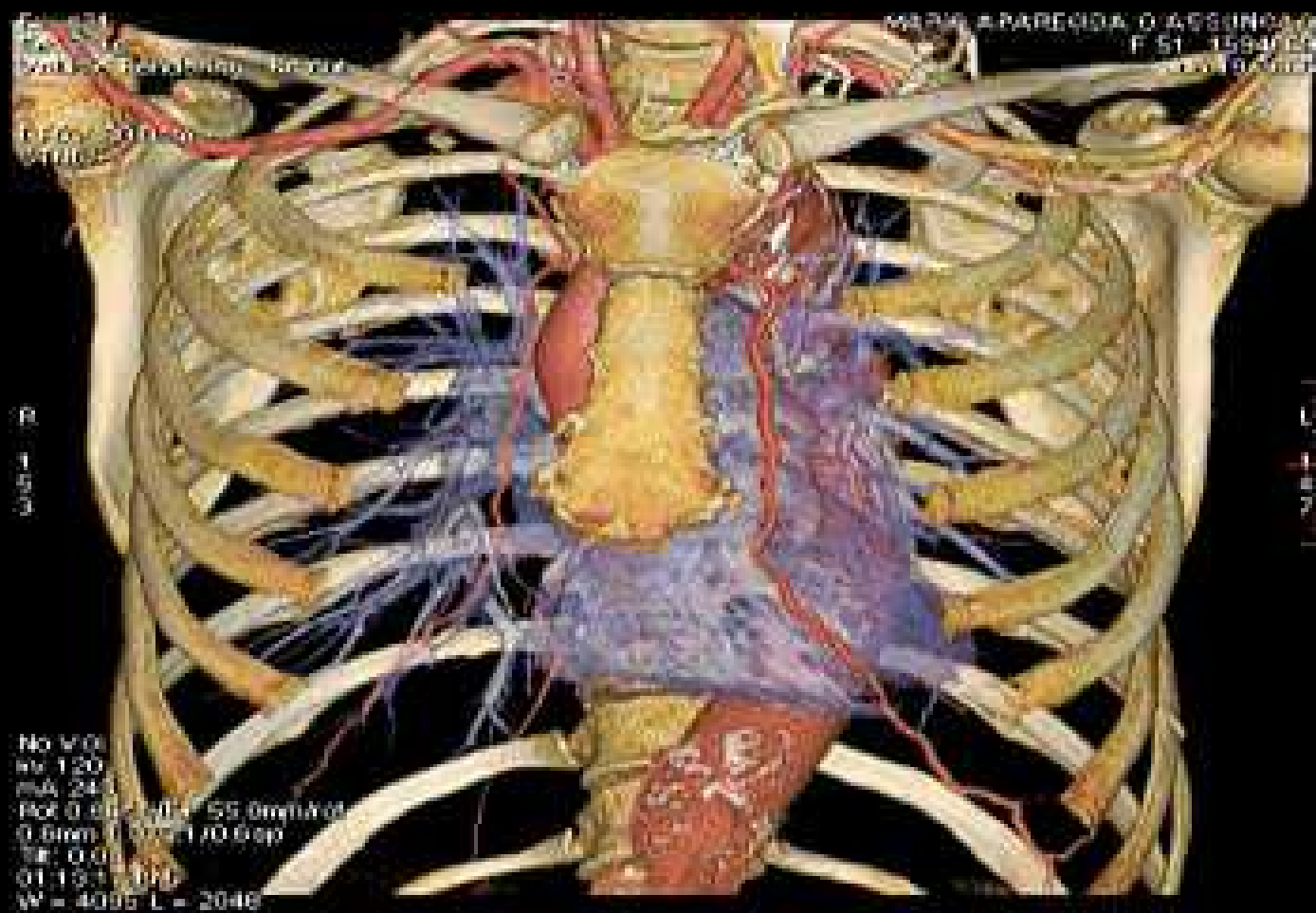
Off label

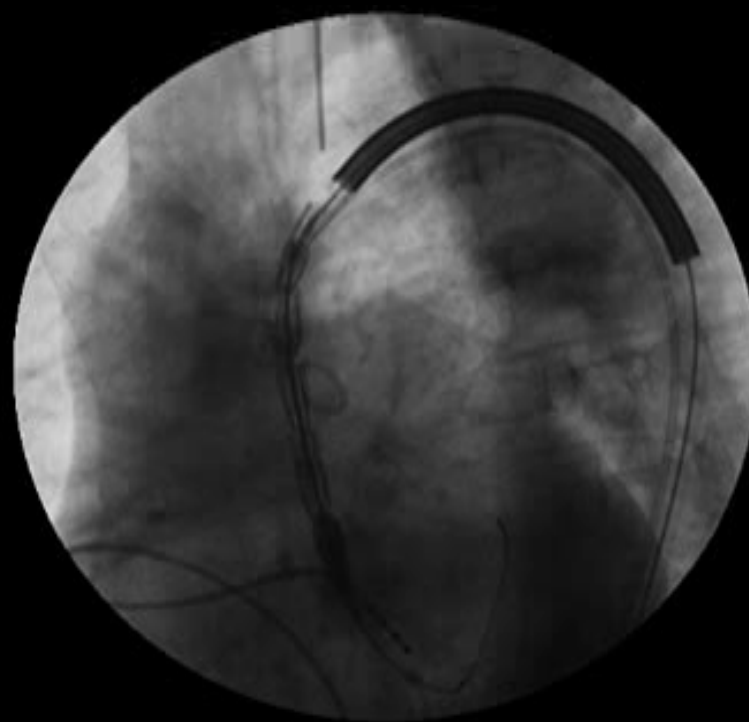
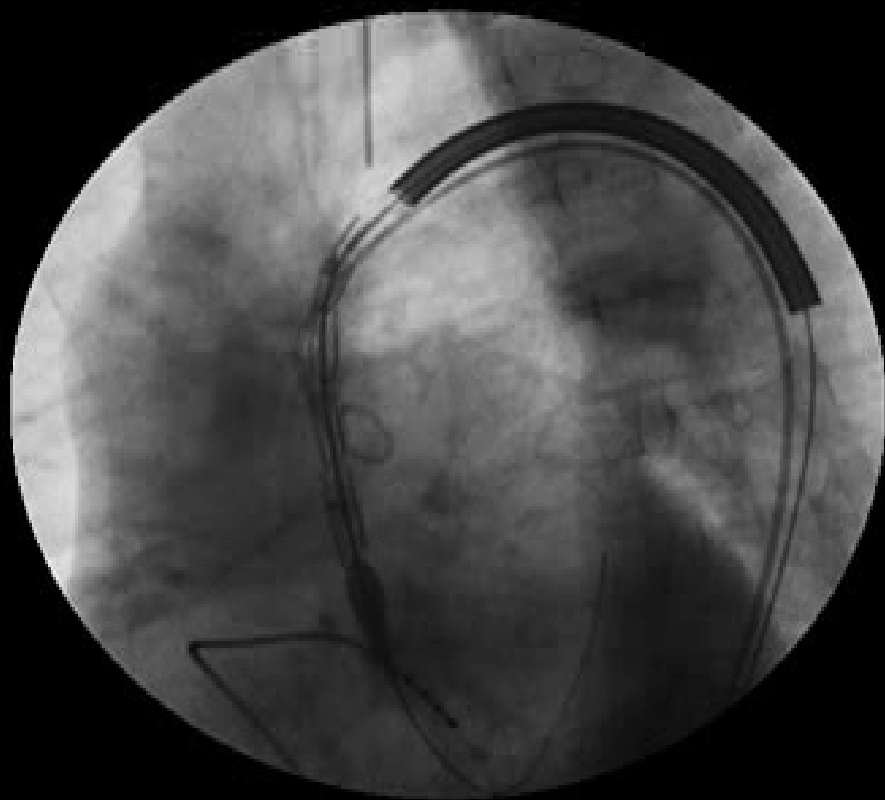


- Hybrid repair of vessels with **Potential Advantages**
- Reduced mortality
- Allow repair of complex aortic disease

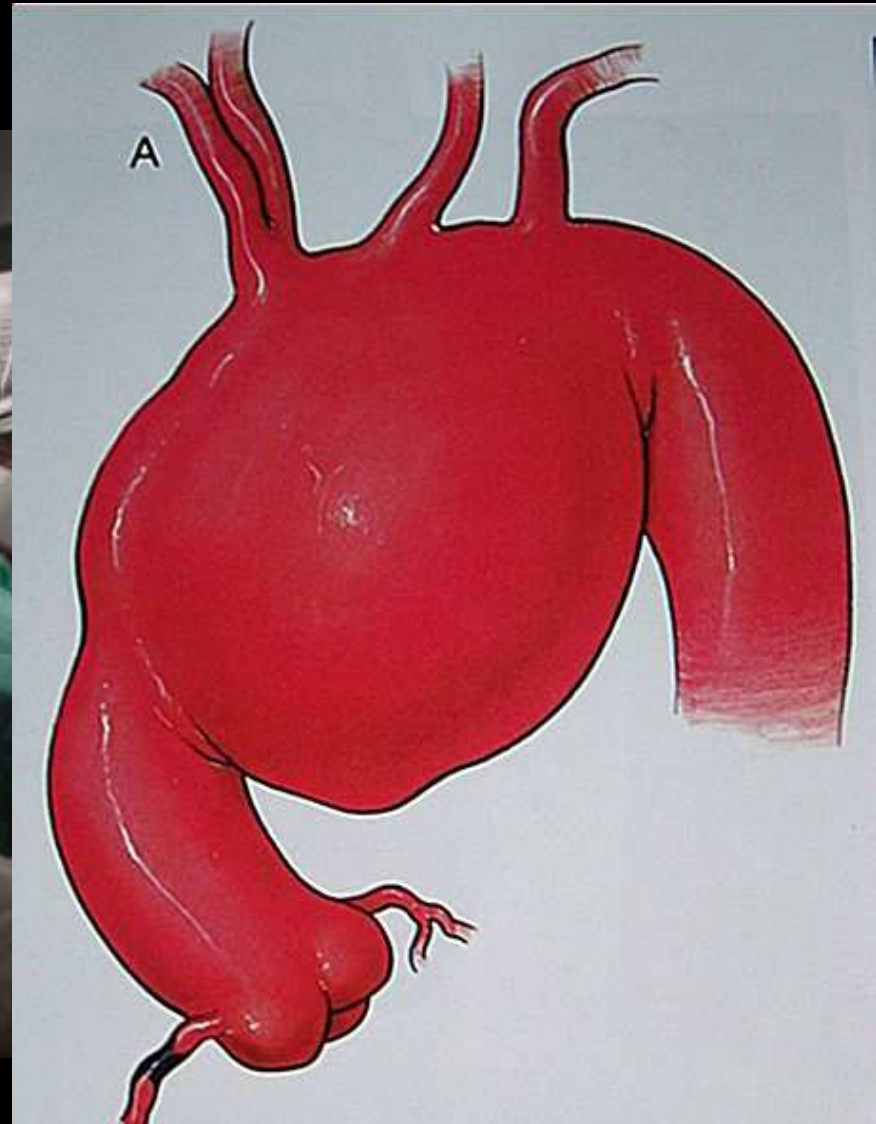
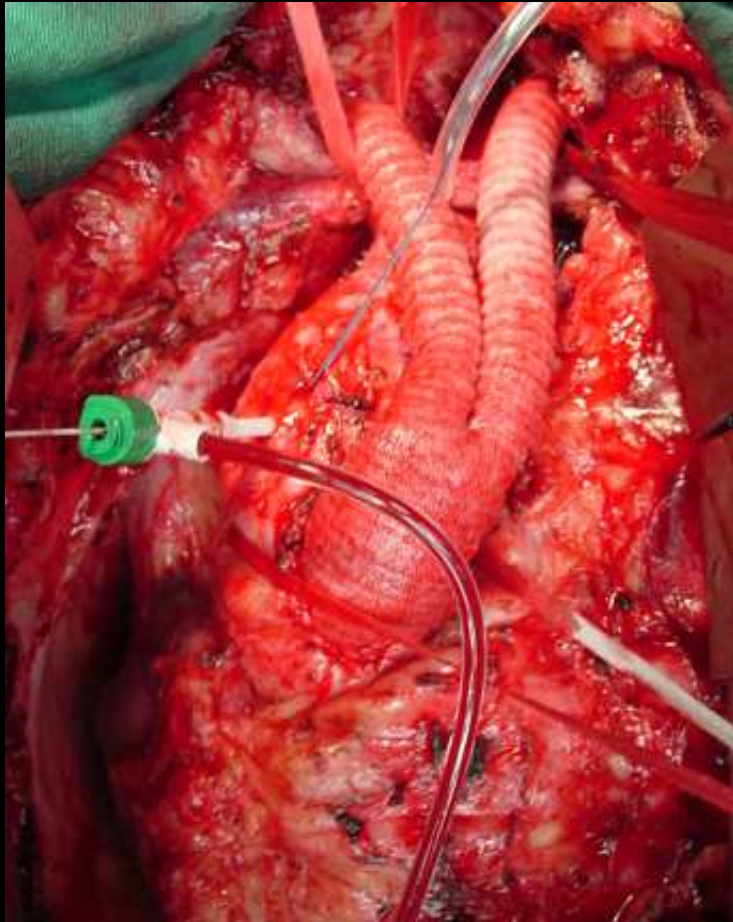
) of aortic
 ology

surgery









WL: 257 WW: 296

S

AL

AR

PL



S-I: 6.3
L-R: 48.5
Roll: -5.7

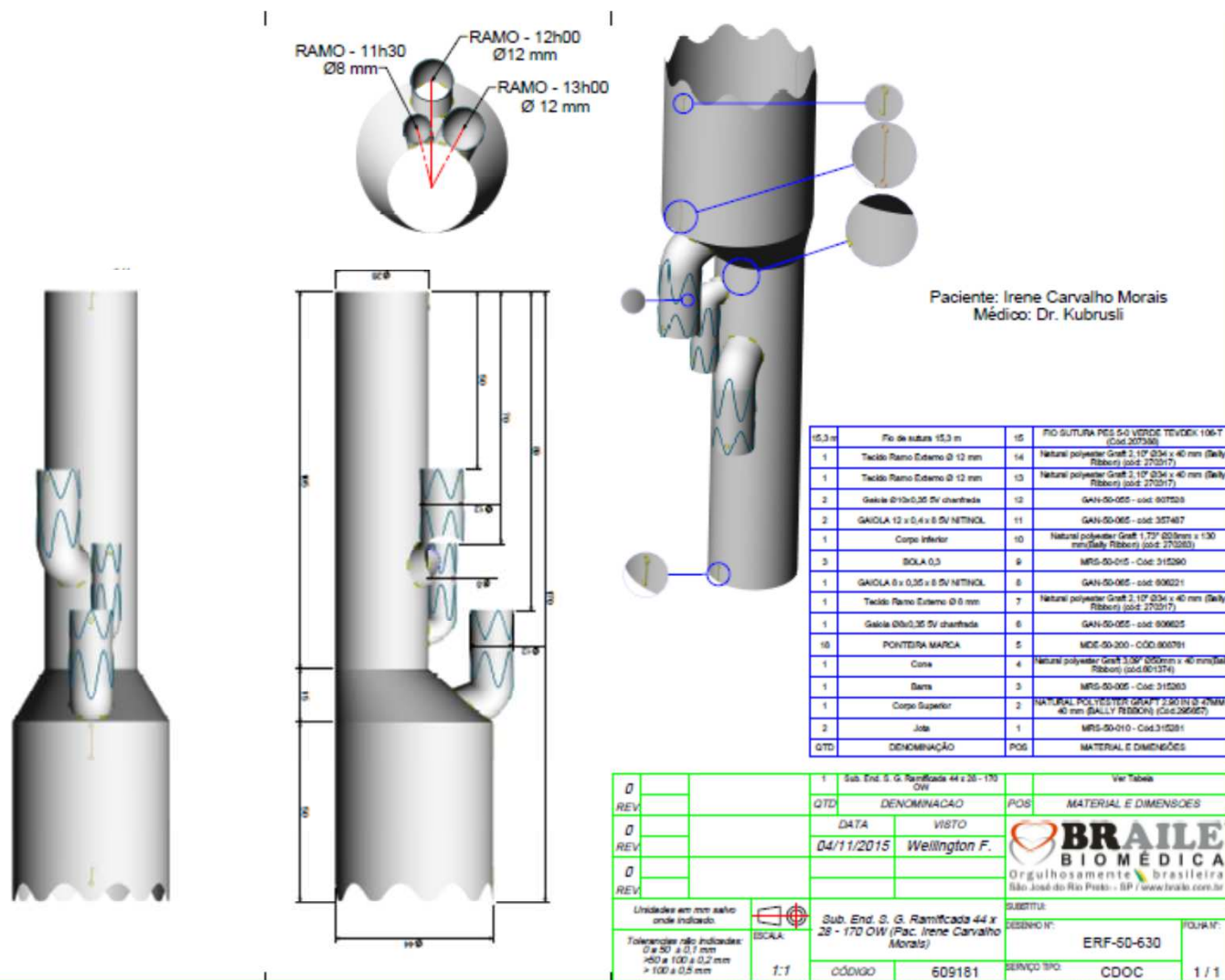
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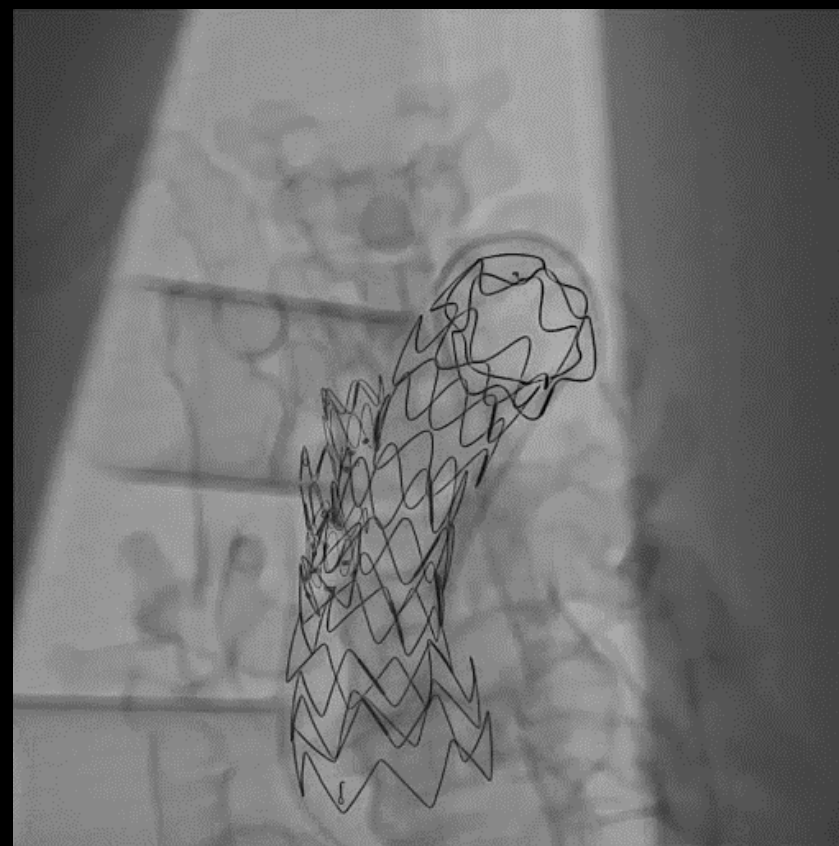
PRÓTESE CUSTOMIZADA

Fabricação -> 6 dias

Teste -> 2 dias

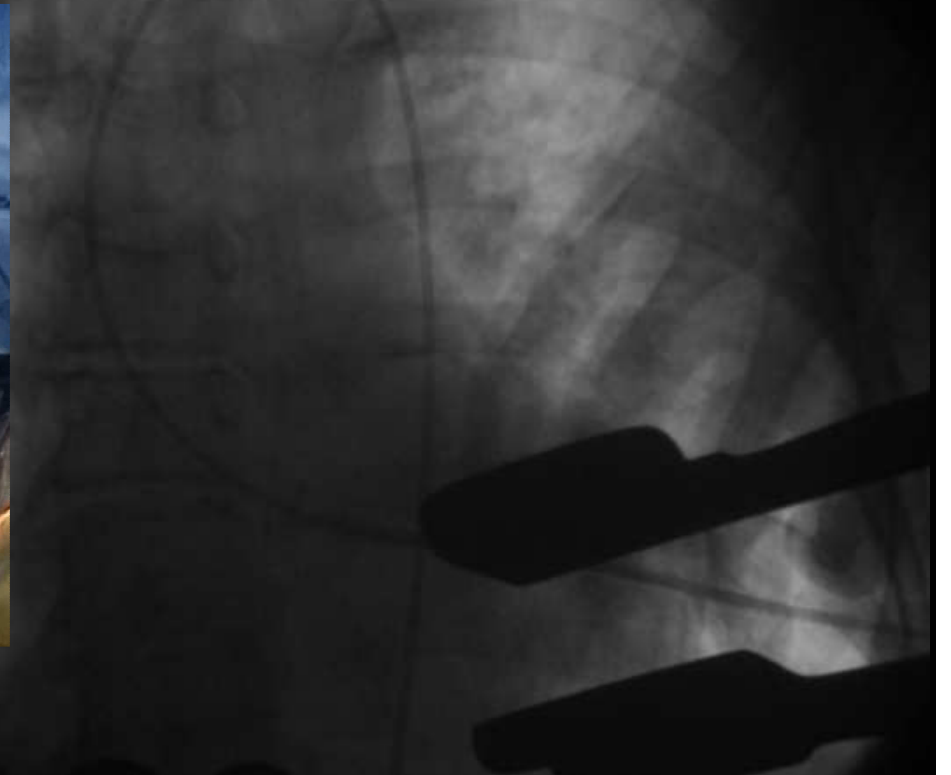
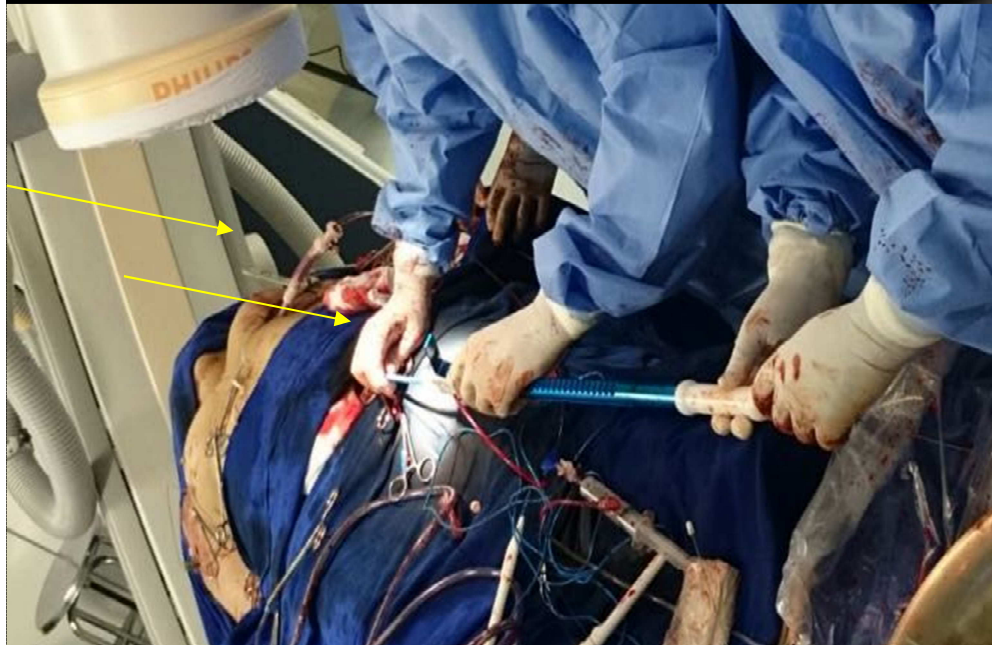
Reajustes -> 20 dias





Tamanho da Imagem: 512 x 512
WL: 128 WW: 256

Irene Carvalho Morais 8944 (66 y , 66 y)
Unnamed
15 Coronary



WL: 300 WW: 152

S

AL

AR



I

S-I: 1.4
L-R: 45.5
Roll: 0.3

WL: 304 WW: 270

S

A

PL

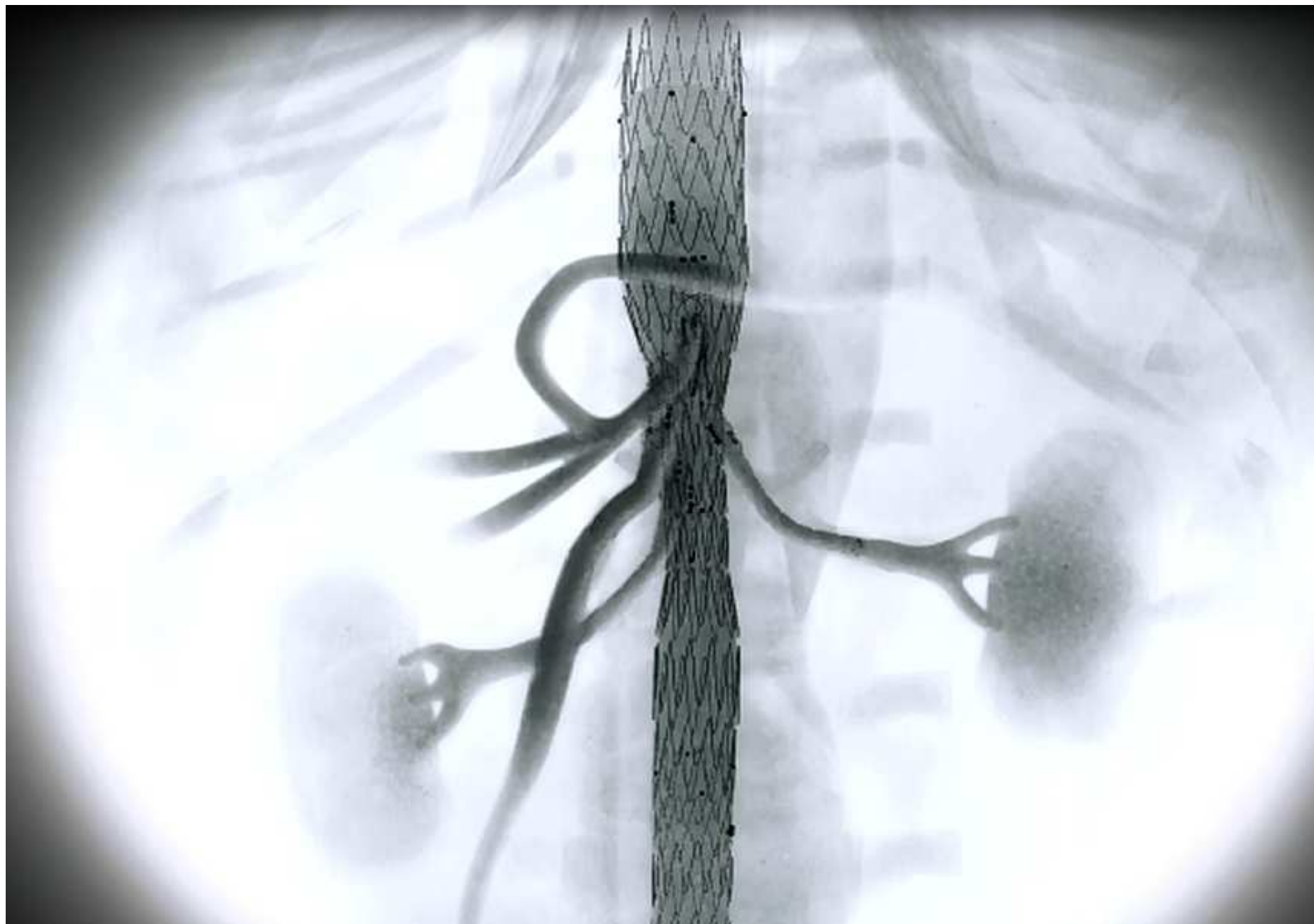
R

L



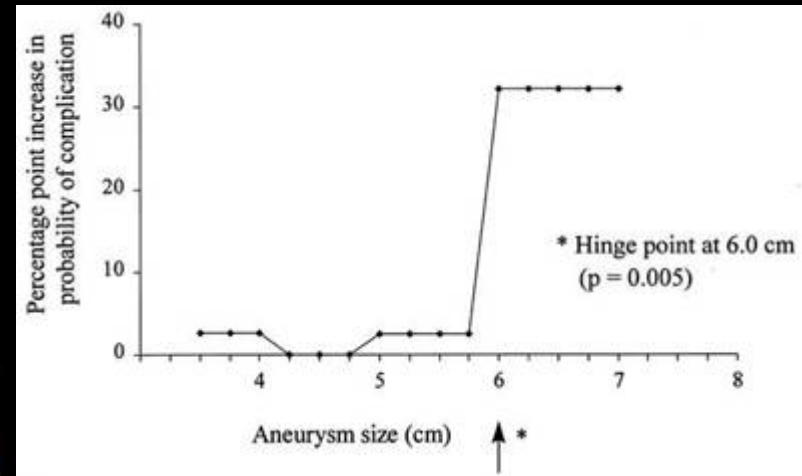
I

S-I: 10.3
L-R: -7.6
Roll: 2.7



WHAT IS THE APPROPRIATE SIZE CRITERION FOR RESECTION OF THORACIC AORTIC ANEURYSMS?

Michael A. Coady, MD
John A. Rizzo, PhD
Graeme L. Hammond, MD
Divakar Mandapati, MD
Umer Darr, MD
Gary S. Kopf, MD
John A. Elefteriades

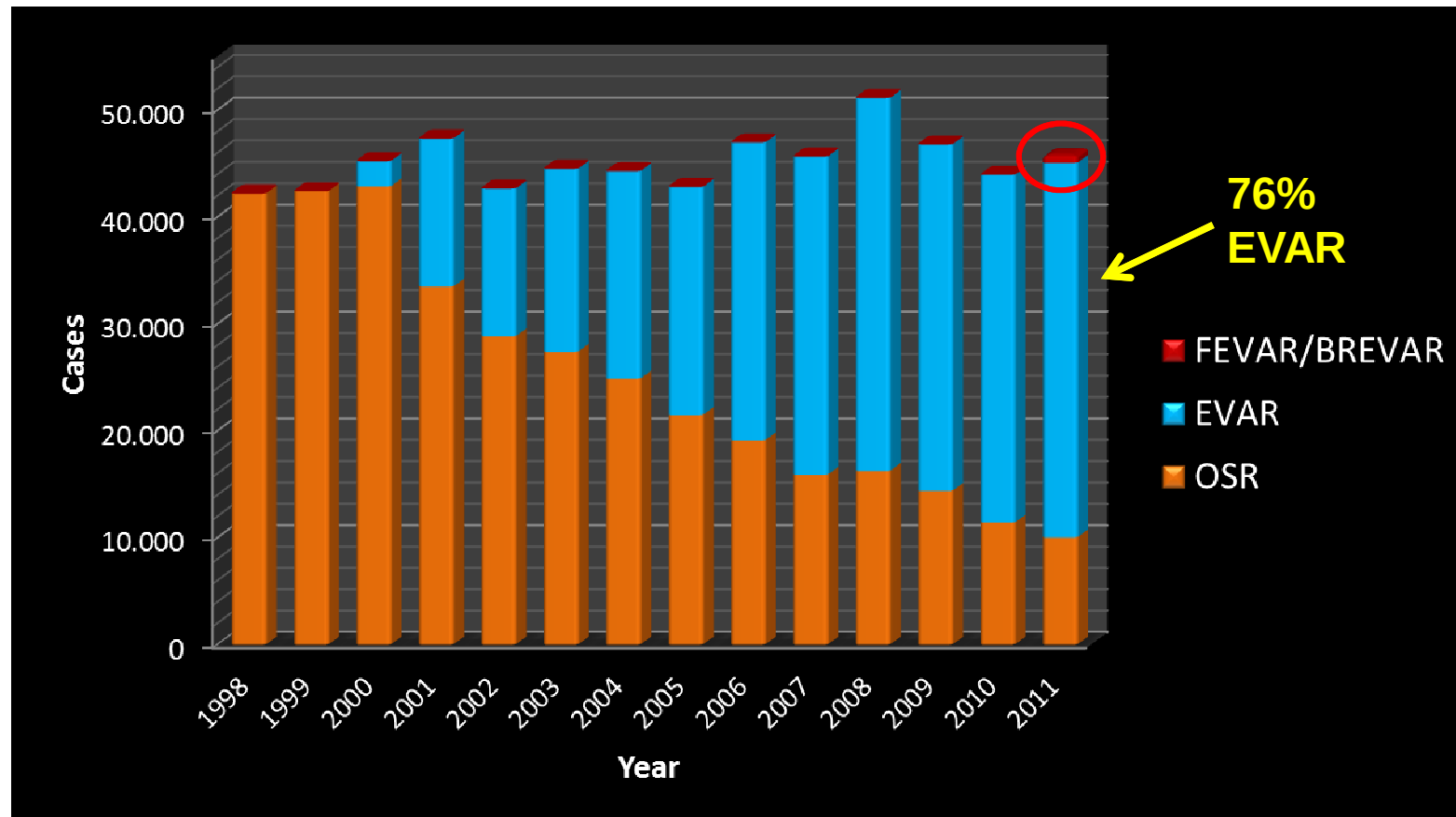


THE NATURAL HISTORY OF THORACIC AORTIC ANEURYSMS

Otto E. Dapunt, MD
Jan D. Galla, MD
Ali M. Sadeghi, MD
Steven L. Lansman, MD
Craig K. Mezrow, MS
Richard A. de Asla, BA
Cid Quintana, MD
Sylvan Wallenstein, PhD
Arisan M. Ergin, MD
Randall B. Griepp, MD



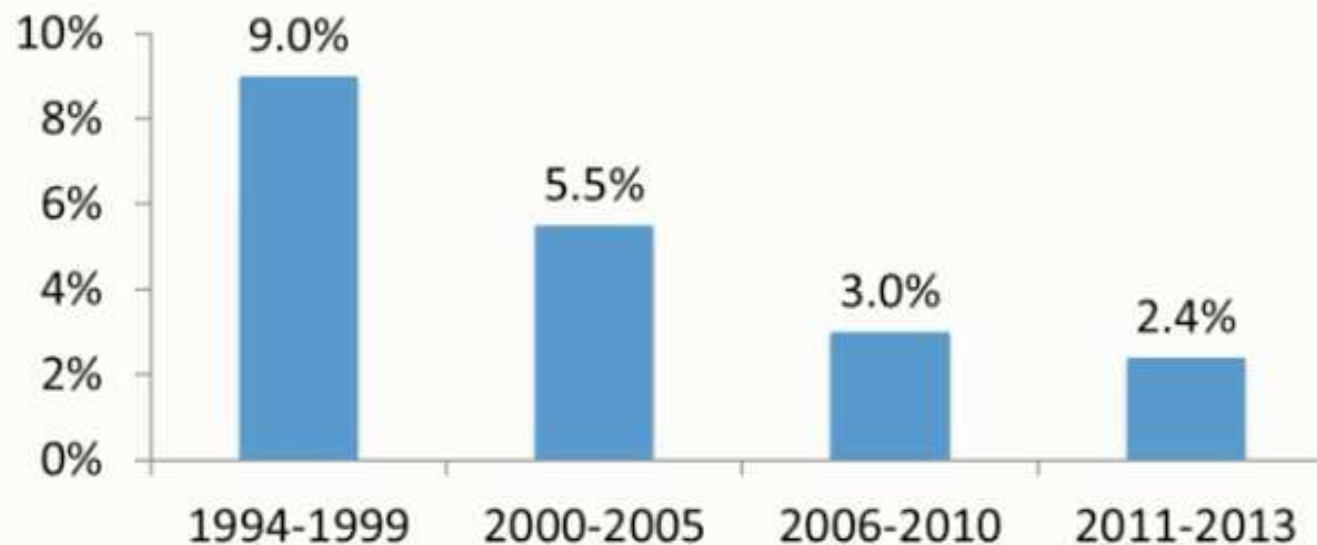
The Decline of Open Aneurysm Repair



based upon: Nationwide Inpatient Sample
Dua JVS 2014

Perioperative mortality in ≥ 80 is decreasing thanks to EVAR

30-day mortality, elective AAA repair ≥ 80 Sweden



EVAR

4%

38%

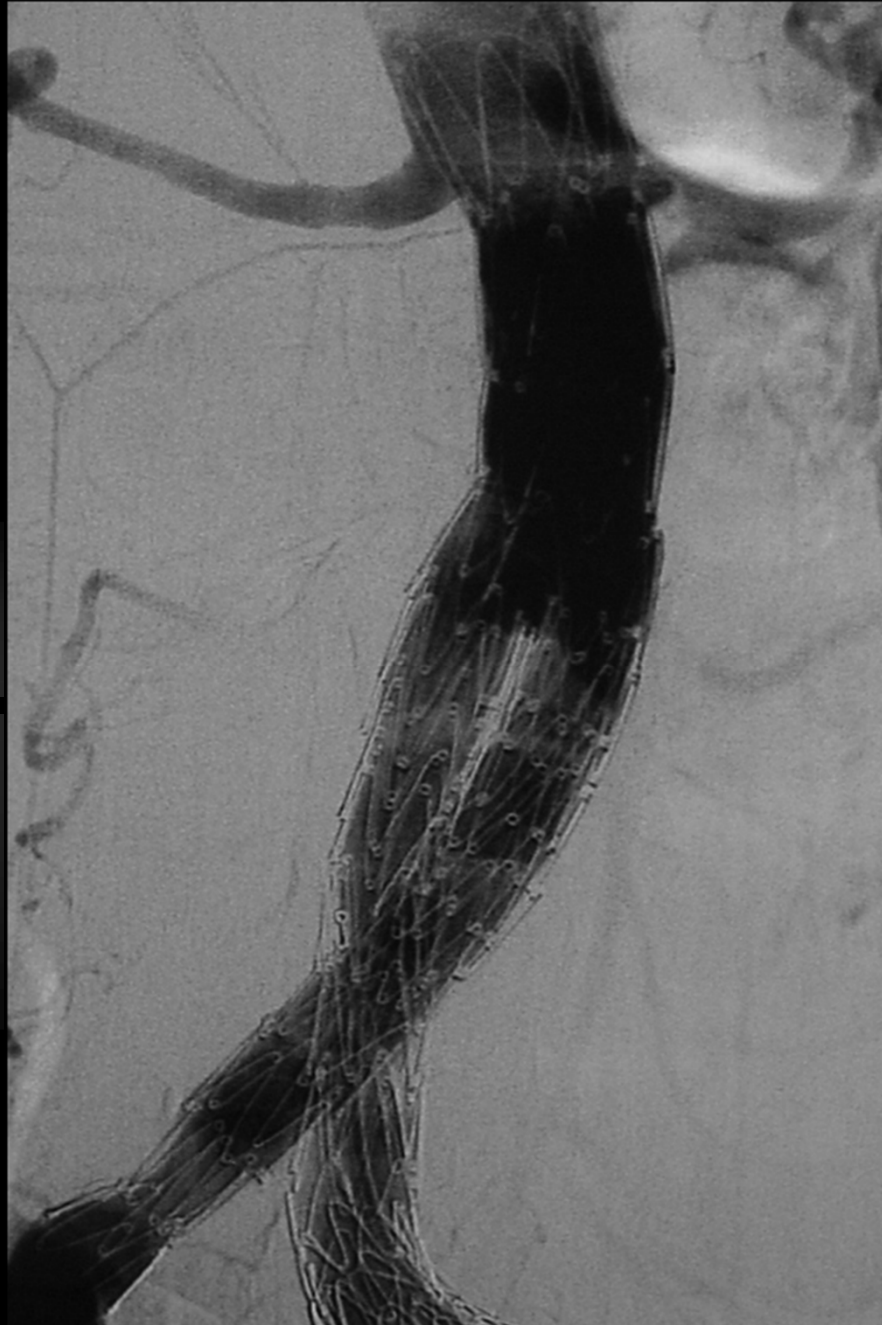
73%

79%

Swedvasc database 1994-2013







obrigado



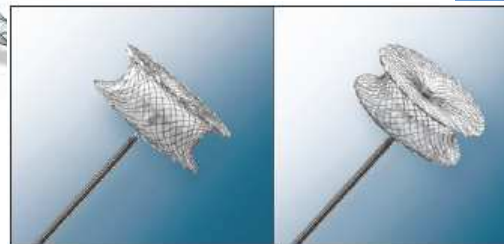
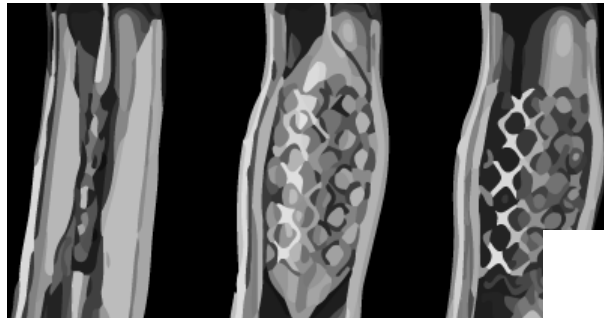
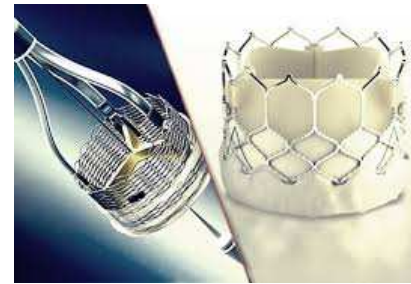
Weill Cornell Medical College

— **NewYork-Presbyterian**
— **Weill Cornell Medical Center**



Weill Cornell Medical College

NewYork-Presbyterian
Weill Cornell Medical Center



Weill Cornell Medical College

NewYork-Presbyterian
Weill Cornell Medical Center

WL: 304 WW: 269

S

R



I



A



S-I: -
L-R: -
Roll: -