



IX Congresso
Novas Fronteiras
em Medicina
Cardiovascular
23 a 24 de fevereiro 2019
The Village Paula
9/11 Rev - Ódides

GESTÃO DA HEMOSTASE EM CIRURGIA ARTERIAL

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Particularidades demográficas

- Idosos
- Múltiplas patologias
 - Sob terapêutica anti-plaquetária e anti-coagulante
 - Com disfunção plaquetária (ex. disfunção renal)

Particularidades Cirúrgicas

- Heparina no intraoperatório
- Clampagem Ao

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Eur J Vasc Endovasc Surg (2016) 51, 682–689

REVIEW

Presenting Baseline Coagulation of Infra Renal Ruptured Abdominal Aneurysm: A Systematic Review and Pooled Analysis

A. Kardashev^{1,2,3}, A.D. Parra¹, A. Aslari¹, B. Maddison¹, V.P. Panayiotopoulos⁴

¹Department of Vascular & Endovascular Surgery, Broomfield Hospital, Chelmsford, UK
²Department of Anaesthesia and Perioperative Care, Broomfield Hospital, Chelmsford, UK
³Faculty of Medical Sciences, Anglia Ruskin University, Chelmsford, UK
⁴Department of Surgery, Health Research, Ipswich, UK

Conclusion: This first systematic review of literature on baseline coagulation of rAAAs suggests that the majority of these patients do not present with coagulopathy and only a minor proportion of patients present with significant coagulopathy.

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Cirurgia ATA

- 1º - Um grande campo cirúrgico
- 2º - Hemorragias severas
- 3º - Abordagem cirúrgica
 - X Ao → sequestro de plaquetas e trombocitopenia
 - Hiperfibrinogenemia e trombocitose – compl.trombóticas!!!
 - Se X Ao supracelíaca → Isquemia visceral
 - Isquemia mesentérica → lesão reperfusão

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Coagulation changes during thoracoabdominal aneurysm repair

Jonathan P. Gertler, MD, Richard P. Cambria, MD, David C. Brewster, MD, J. Kenneth Davison, MD, Peter Purcell, MD, Simona Zannetti, MD, Stephen Johnson, BS, Gil L'Italien, PhD, George Koustas, MD, Glenn M. LaMuraglia, MD, Michael Laposata, MD, PhD, and William M. Abbott, MD, *Boston, Mass.*

Activation of fibrinolytic pathways is associated with duration of supraceliac aortic cross-clamping (Haithcock B. Et al, J Vasc Surg 2004)

Clinical Relevance: The coagulopathy frequently associated with thoracoabdominal aortic aneurysm repair (...)The current study demonstrates that the major hemostatic alteration associated with supraceliac aortic cross-clamping is activation of fibrinolytic pathways. The magnitude of this fibrinolytic response is directly related to the duration of supraceliac aortic occlusion. **Future efforts to treat this coagulopathy may well include judicious use of antifibrinolytic agents.**

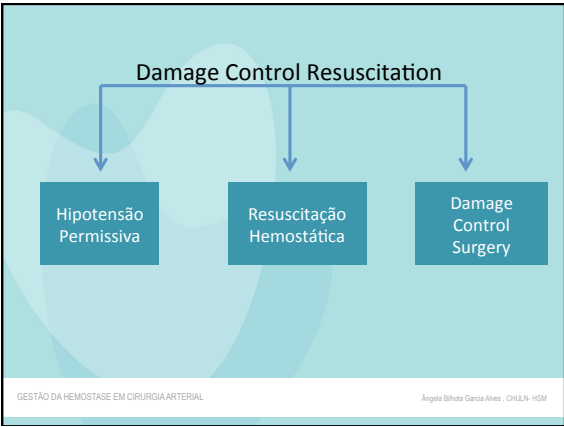
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Gestão anti-agregantes e anti-plaquetares

Recomendação:
Manter AAS na D. cardíaca isquêmica; cerebrovascular; DAP
Gerstein NS et al. Should more patients continue AAS therapy perioperatively? Clinical impact of AAS withdrawal syndrome. Ann Sur 2012; 255:811-9

Recomendação:
Suspender Antagonistas da Vitamina K, novos anticoagulantes orais

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esvs
European Journal of
Vascular & Endovascular Surgery

Management of Abdominal Aortic Aneurysms Clinical Practice Guidelines of the European Society for Vascular Surgery
F.L. Moll et al

As guidelines europeias no controle de hemorragia
Sibylle A. Kozek-Langenecker Eur J Anaesthesiol 2017; 34:332–395

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EJA

Management of severe perioperative bleeding: guidelines from the European Society of Anaesthesiology - Sibylle A. Kozek-Langenecker
Eur J Anaesthesiol 2017; 34:332–395

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