CENTRO HOSPITALAR UNIVERSITÁRIO LISBOA NORTE, EPE

HOSPITAL DE SANTA MARIA

Hospital Pulido Valente

CENTRO ACADÉMICO DE MEDICINA DE LISBOA

FACULDADE DE MEDICINA LISBOA

IX Congresso
Novas Fronteiras em Medicina Cardiovascular
22 a 24 de Fevereiro 2019
The Village Praia D'El Rey - Óbidos

TYPE A AORTIC DISSECTION:

MALPERFUSION SYNDROME

FROZEN ELEPHANT TECHNIQUE + ENDOVASCULAR STABILISE TECHNIQUE

Ângelo Nobre
FMUL / CHULN – Hosp. Sta Maria

CASO CLINICO

- ACP ♂
- 70 anos

- AP
  - EAM 2017
  - HTA
  - Neo próstata sob tratamento médico

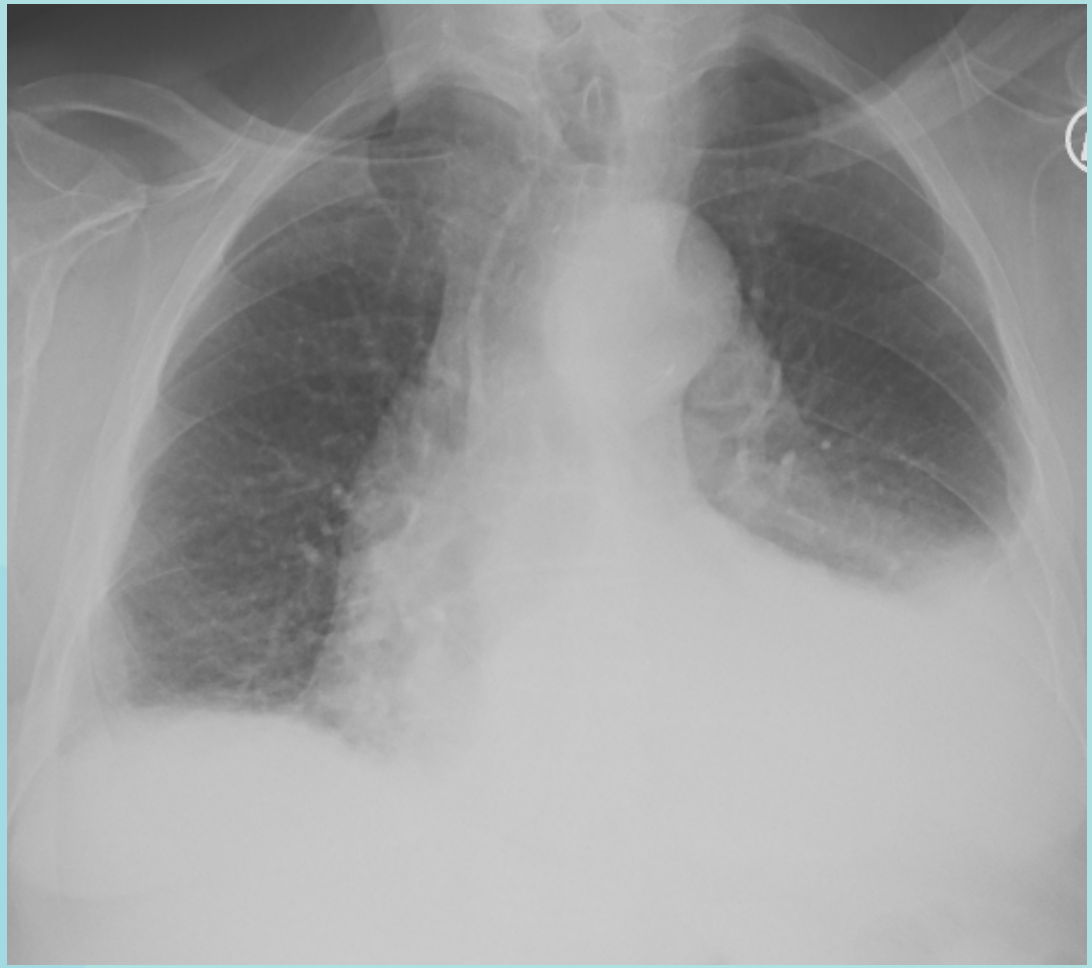
CASO CLINICO

Motivo de internamento:

Queixas respiratórias e febre.

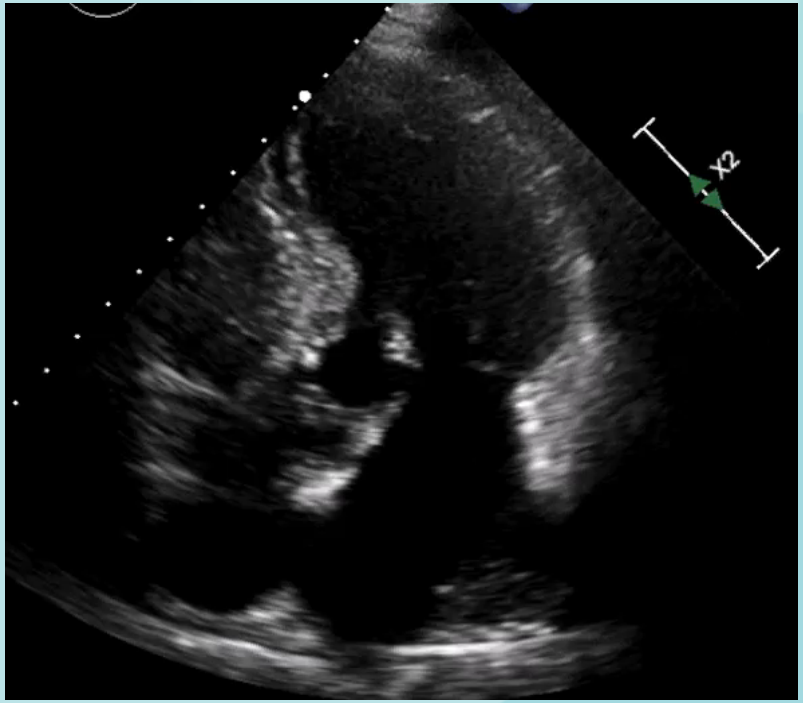
Diagnóstico: Pneumonia Base esquerda → internamento Serviço Pneumologia

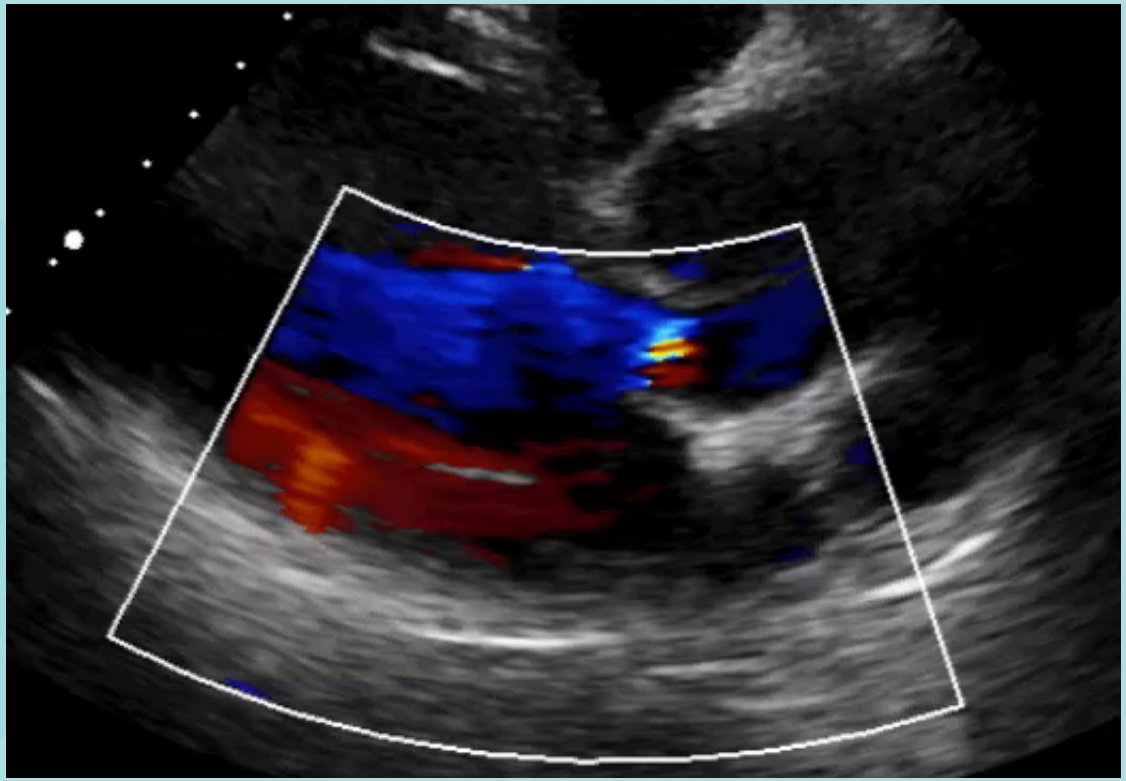
Rx com alargamento mediastinico → **TAC torax**



ESTUDO PRÉ-OPERATÓRIO

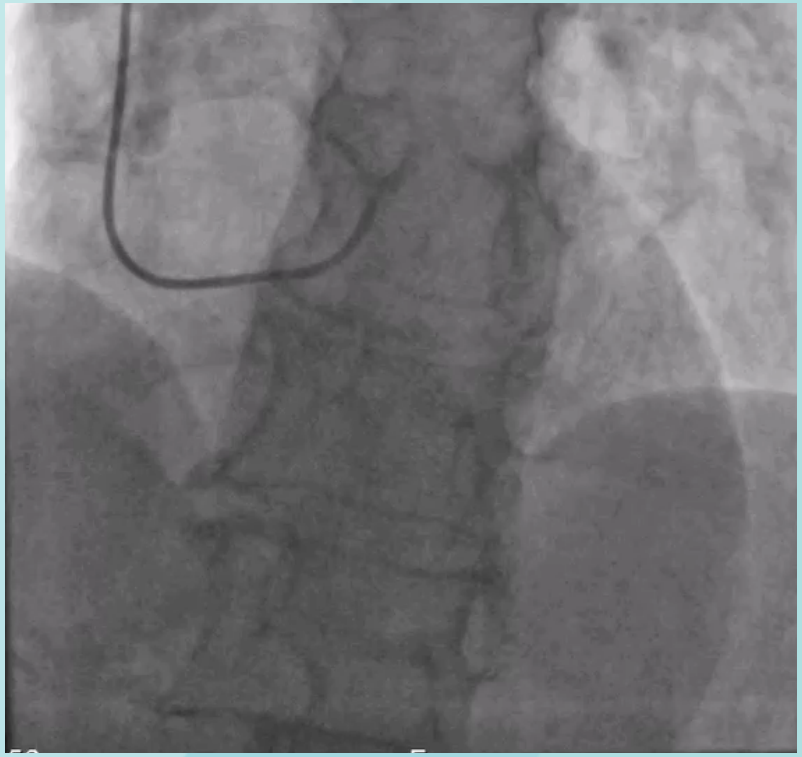
- - Ecocardiograma
  - Sem insuficiência aórtica significativa
  - FEV conservada

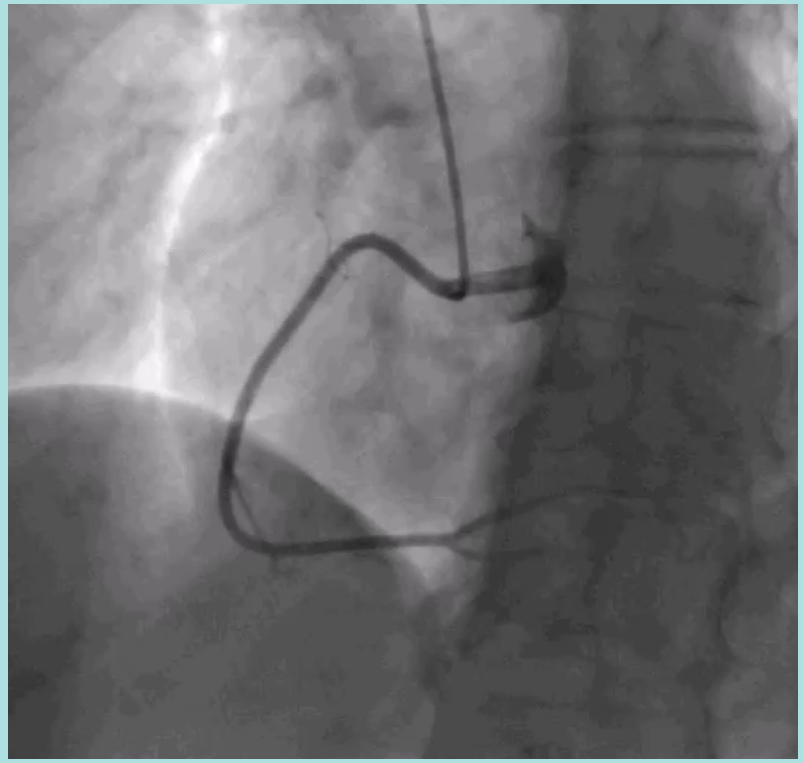




ESTUDO PRÉ-OPERATÓRIO

- - Ecocardiograma
  - Sem insuficiência aórtica
  - FEV conservada
- Cateterismo
  - Sem lesões
- Laboratório
  - Sem alterações





TYPE A AORTIC DISSECTION

FROZEN ELEPHANT TRUNK

+

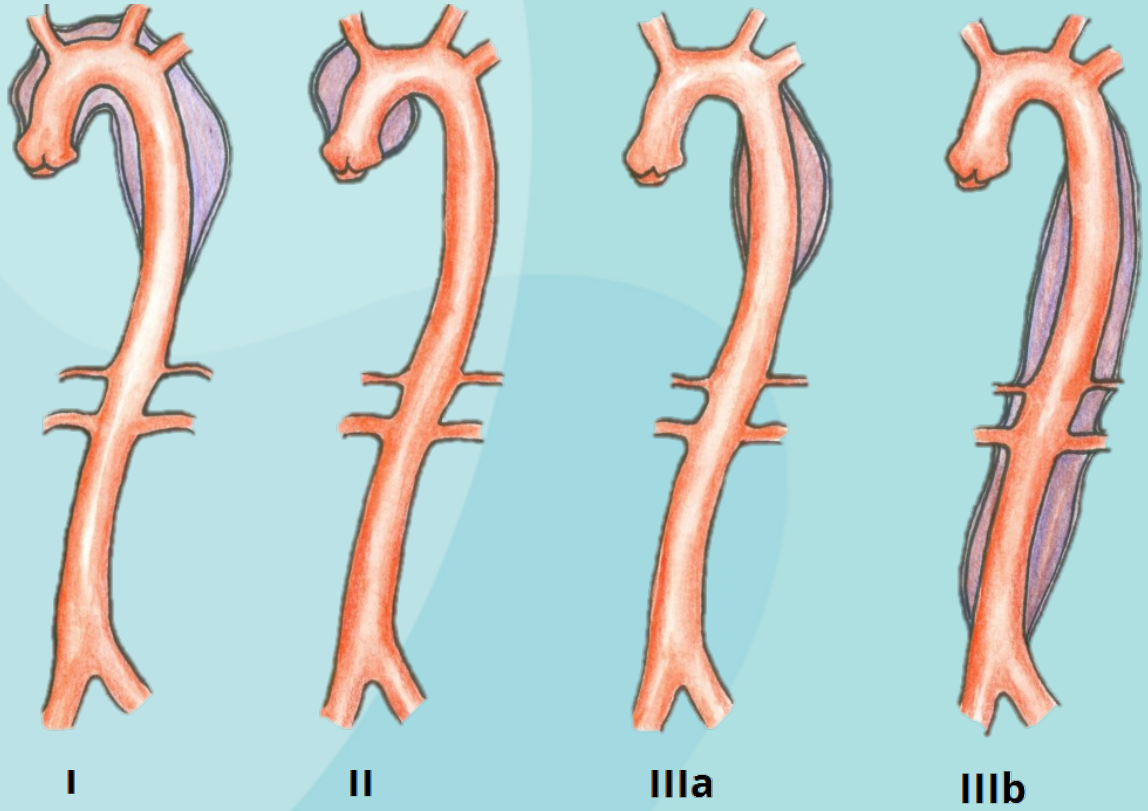
ENDOVASCULAR STABILISE TECHNIQUE

(STENT-ASSISTED BALLOON-INDUCED INTIMAL DISRUPTION AND RELAMINATION IN AORTIC DISSECTION REPAIR)

DEPARTAMENTO
CORAÇÃO e VASOS
CIRURGIA CARDIOTORÁCICA

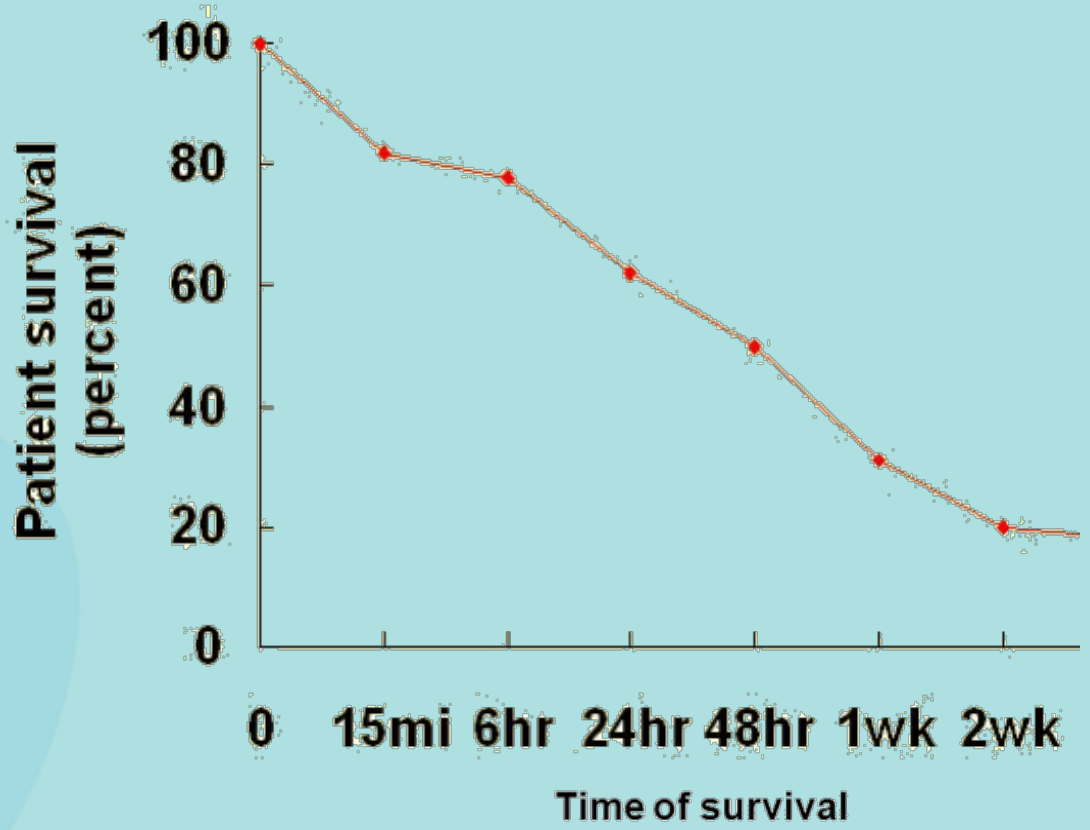
DEPARTAMENTO
CORAÇÃO e VASOS
CIRURGIA VASCULAR

DISSECÇÃO AORTA



DISSECÇÃO AORTA TIPO A

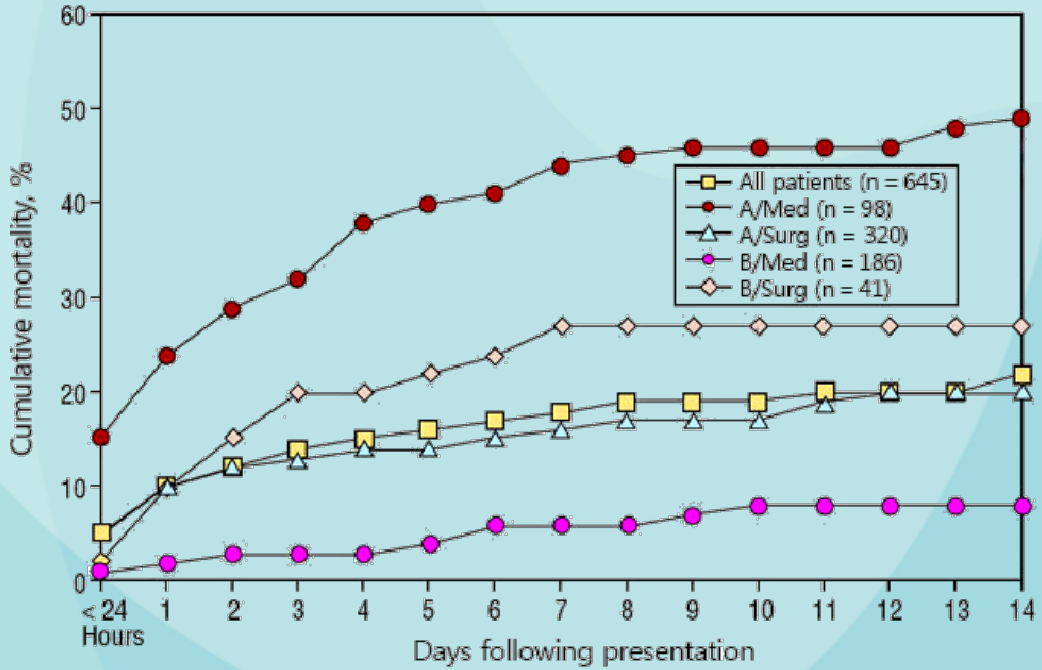
- Disseção aguda
  - Até 48h após primeiros sintomas
  - Alta mortalidade
- Subaguda
- Crónica
  - Mais de 2 semanas de evolução
  - Melhor prognostico

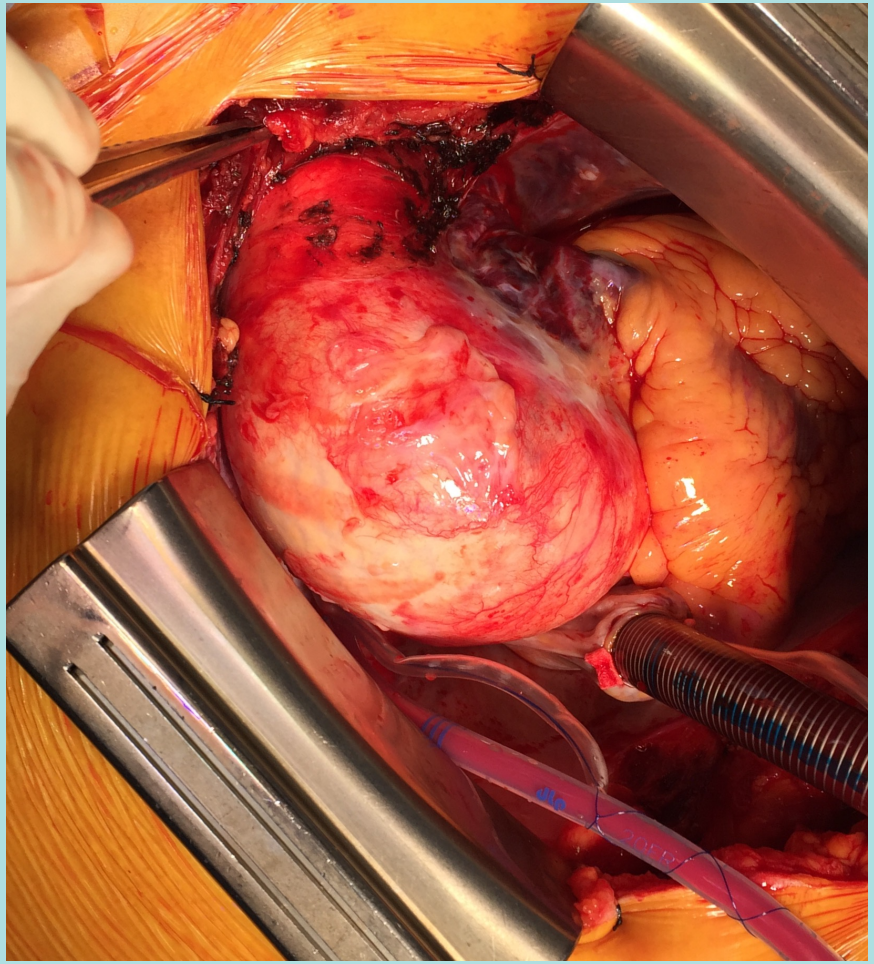


DISSECÇÃO AORTA TIPO A

Elevada mortalidade

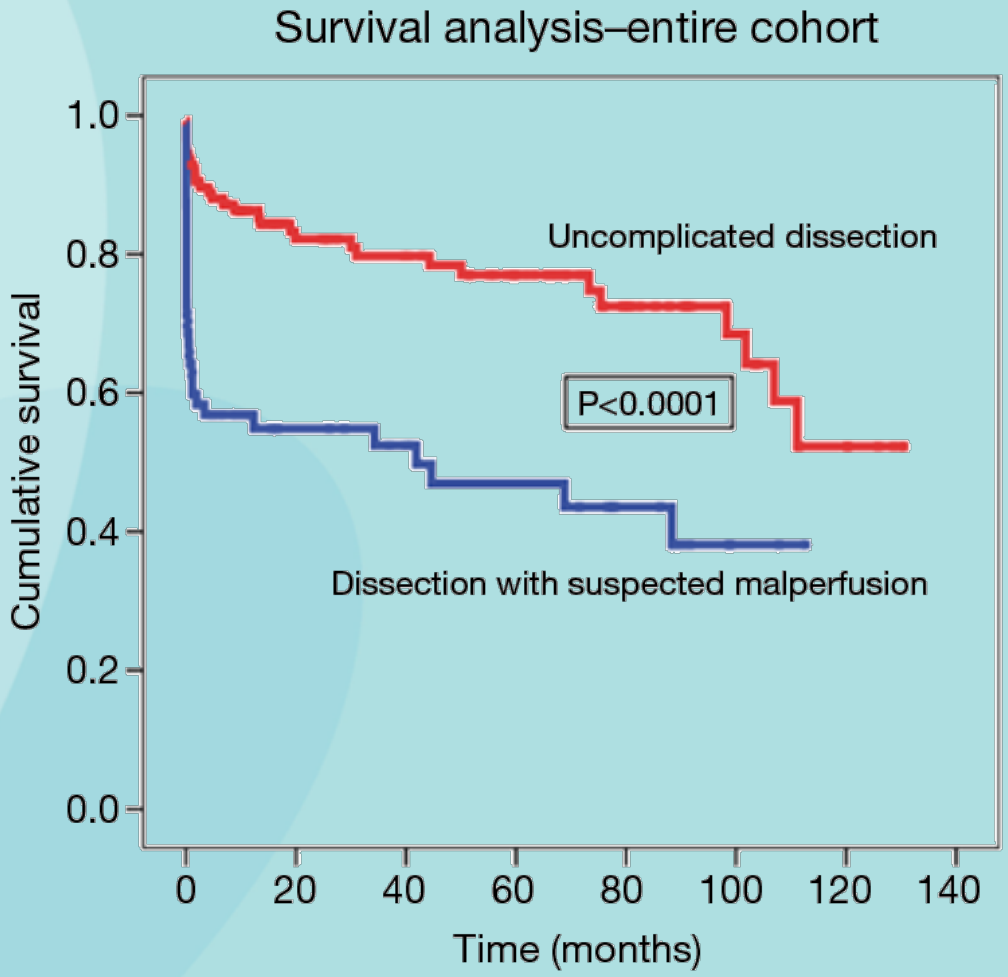
- Mortalidade hospitalar ≈ 30%
- Terapêutica conservadora ≈ 60%





CAUSAS DE MORTALIDADE

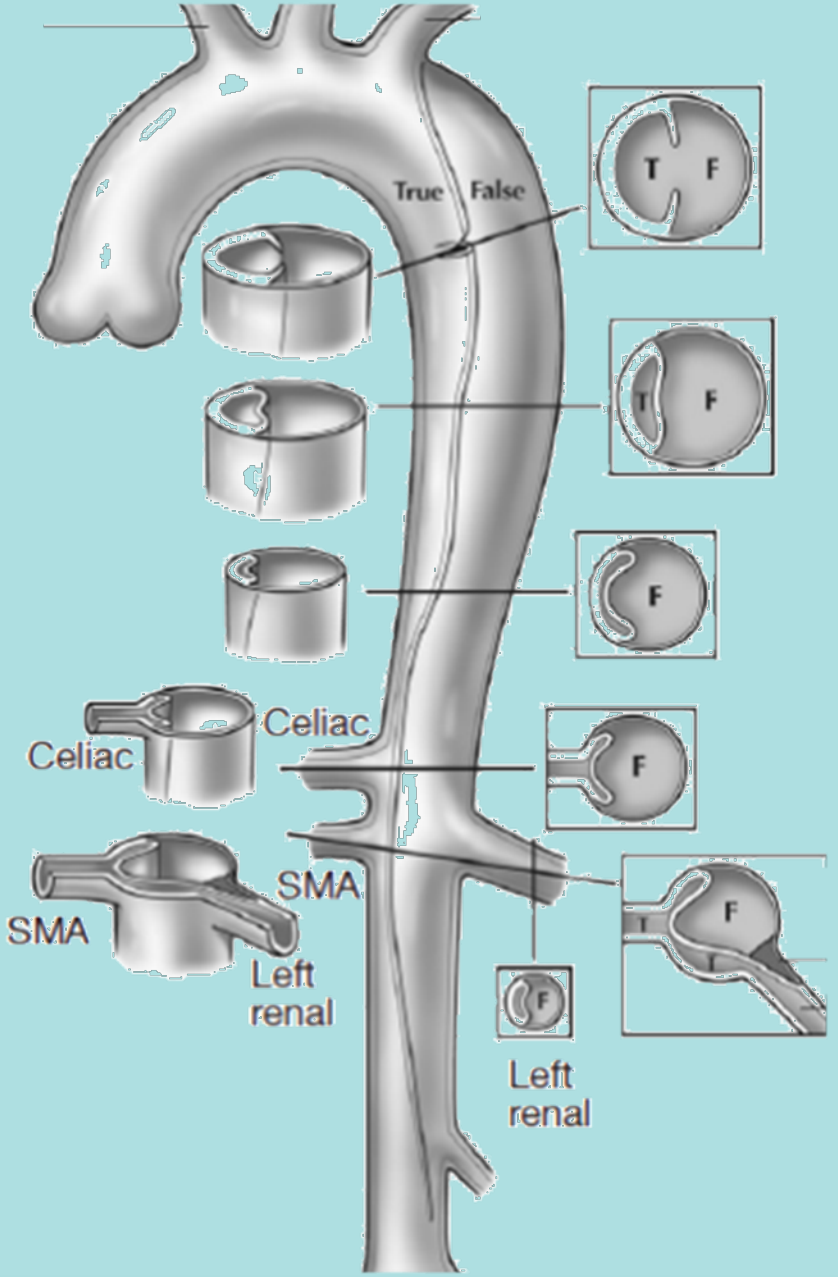
- **Síndrome de Má Perfusão**



- Uncomplicated dissection (n=126) Median survival 95.9 months
- Malperfusion syndrome (n=70) Median survival 53.7 months P<0.001

CAUSAS DE MORTALIDADE

- **Síndrome de Má Perfusão**
  - Compressão do verdeiro lúmen pelo falso lúmen



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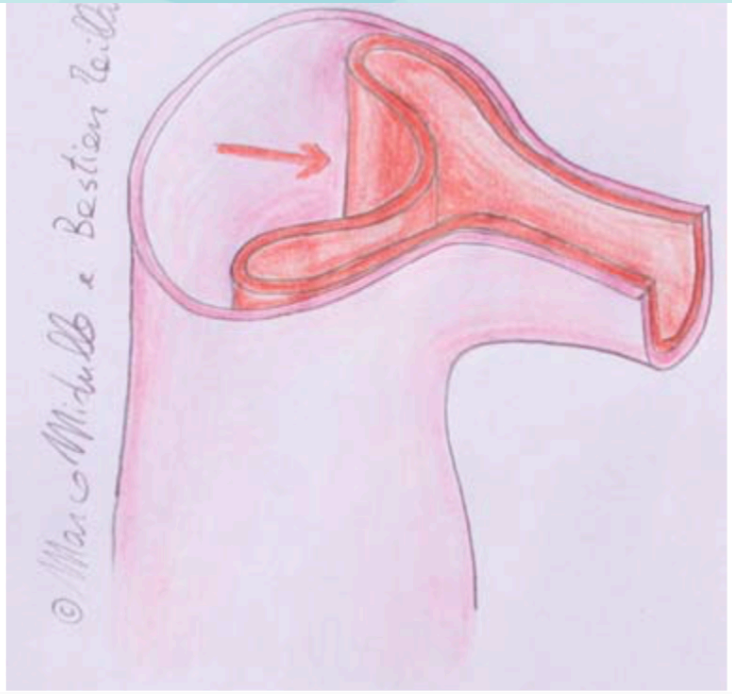

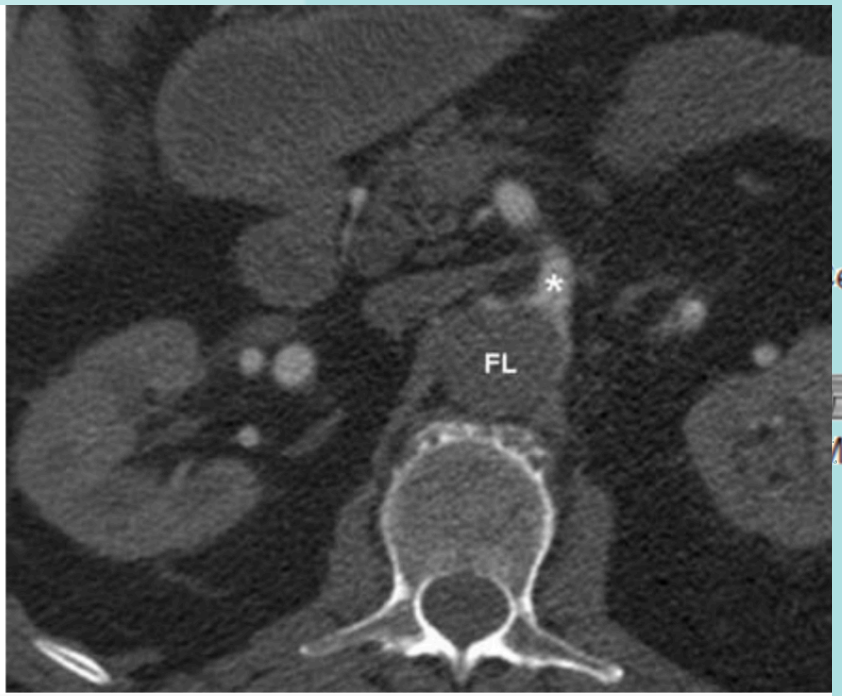

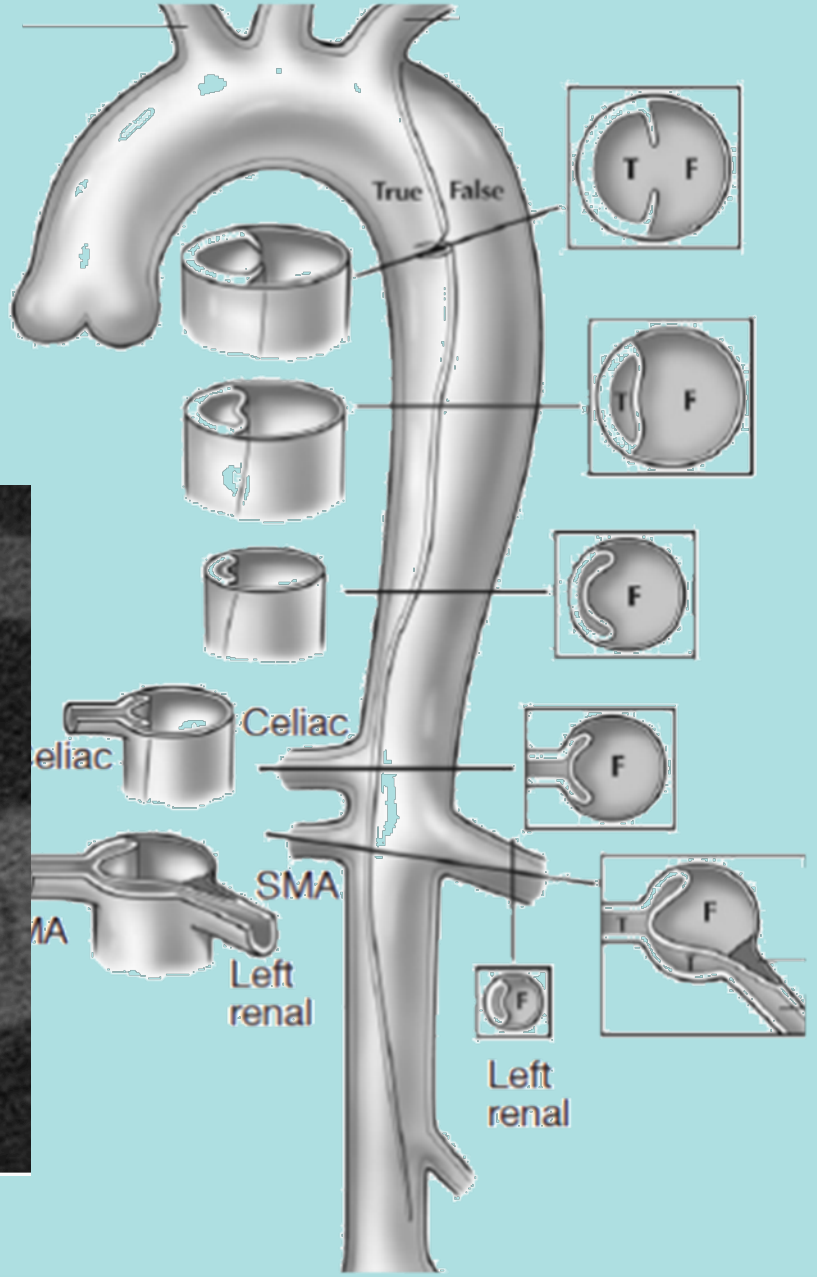

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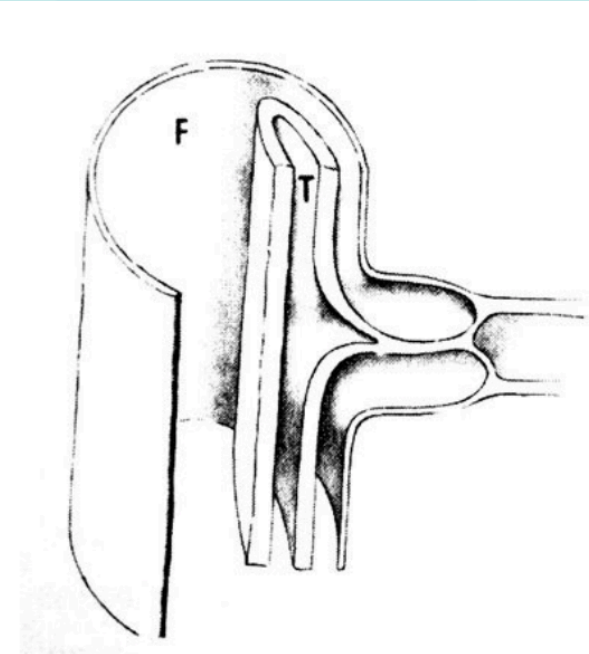

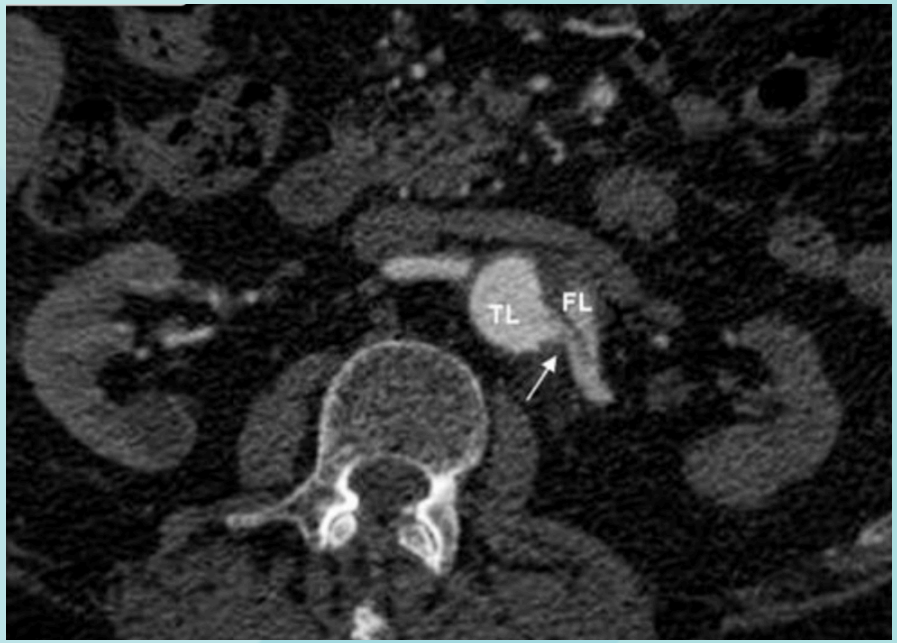

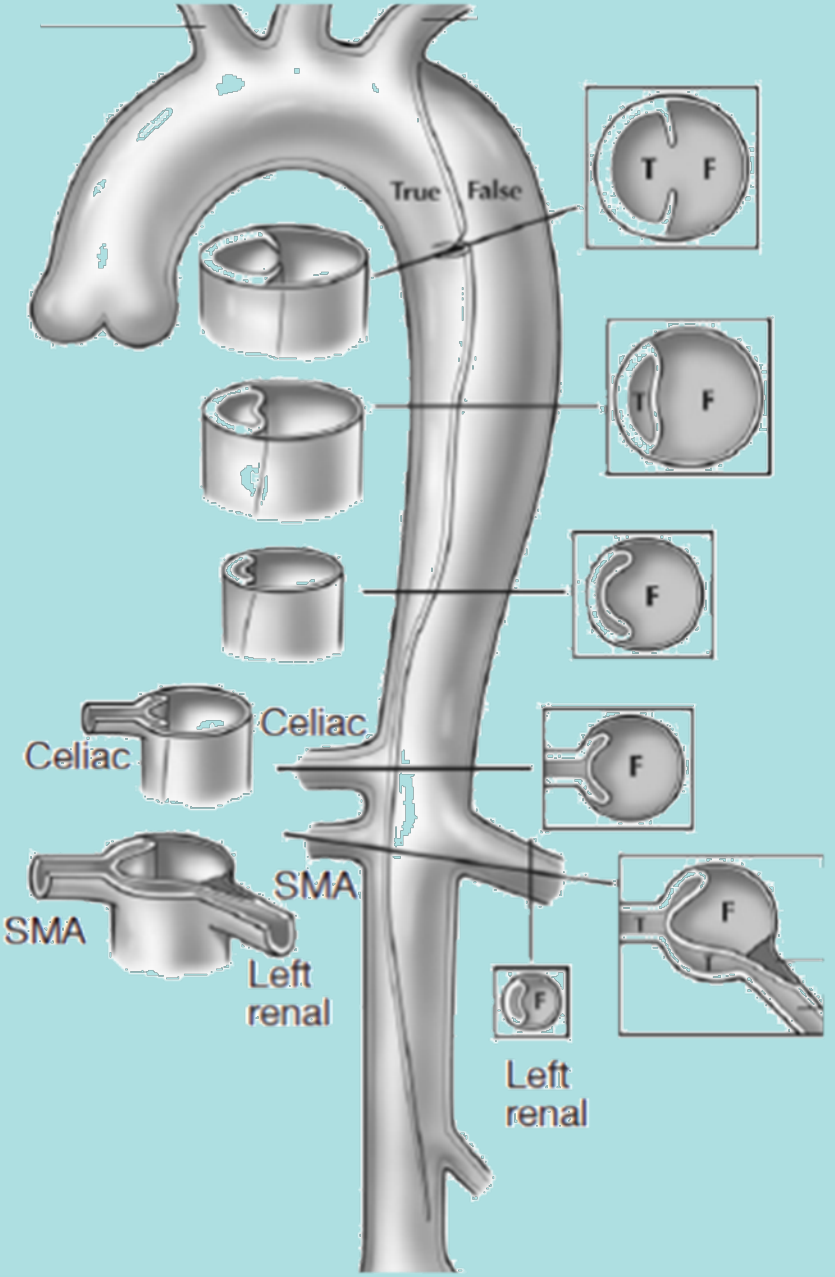

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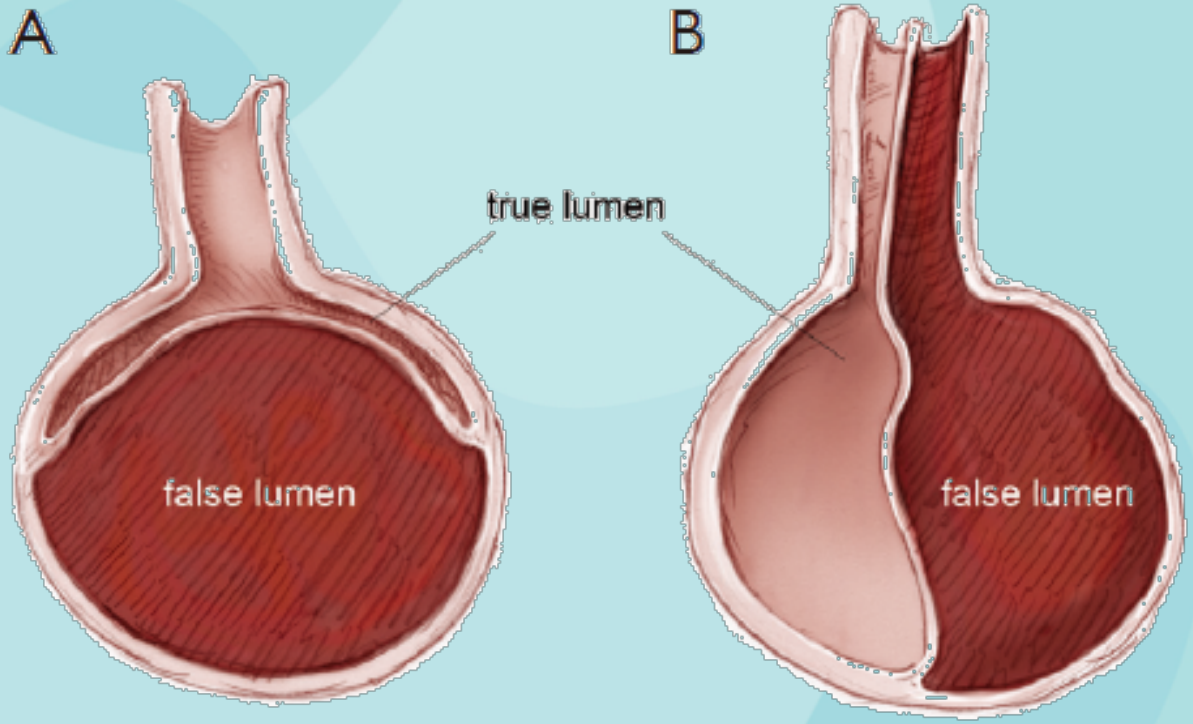
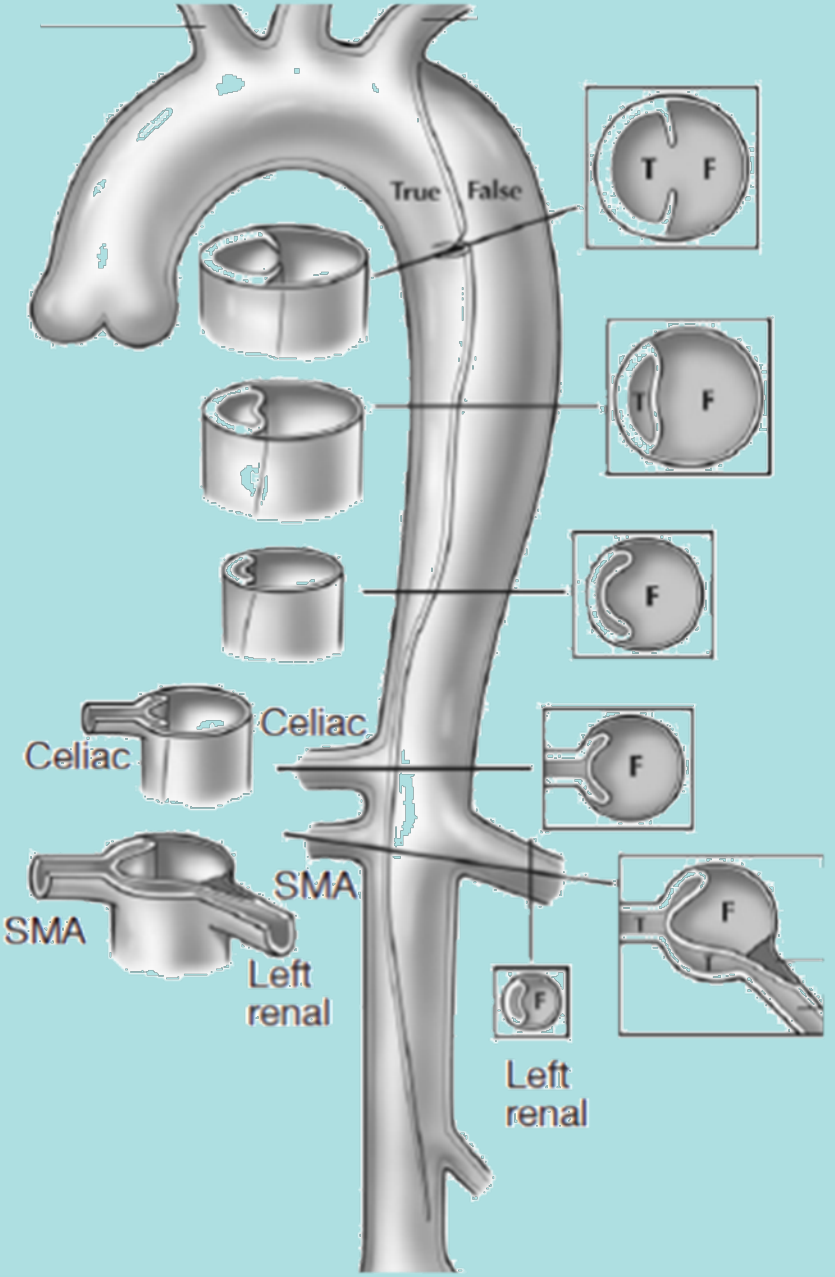
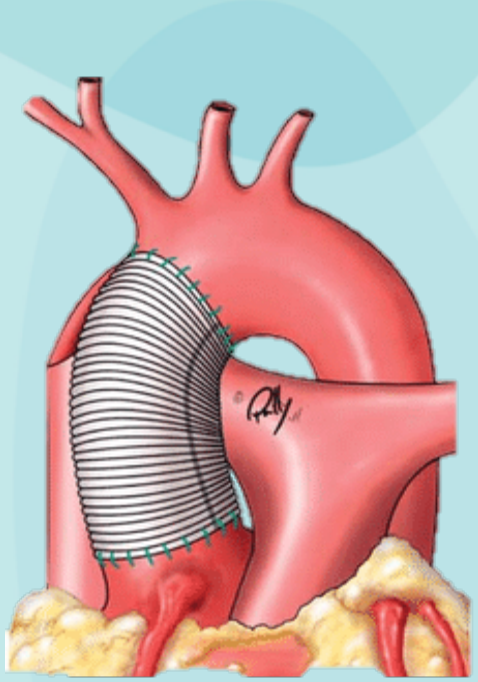
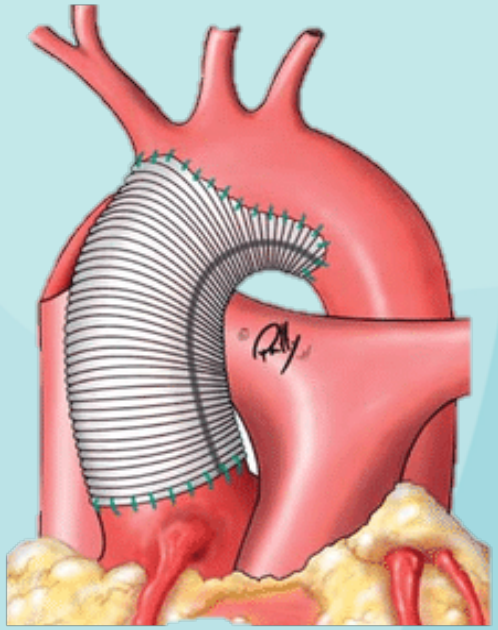


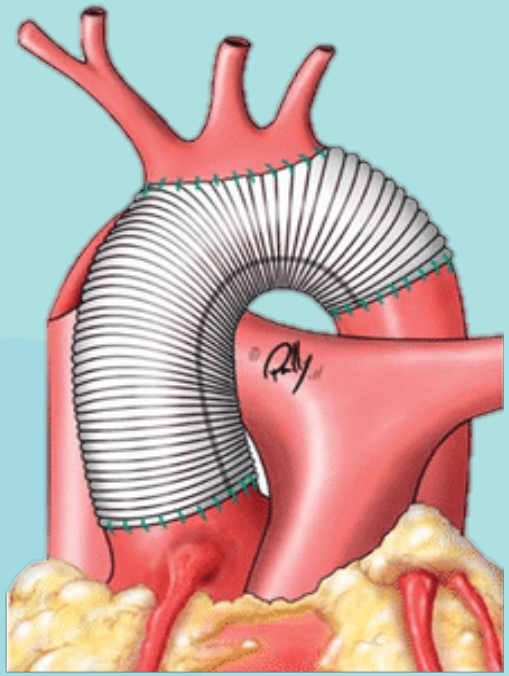
- Perfundidos pelo verdadeiro lúmen → compressão dinâmica (A)
- Perfundido pelo falso lúmen → compressão estática (B)

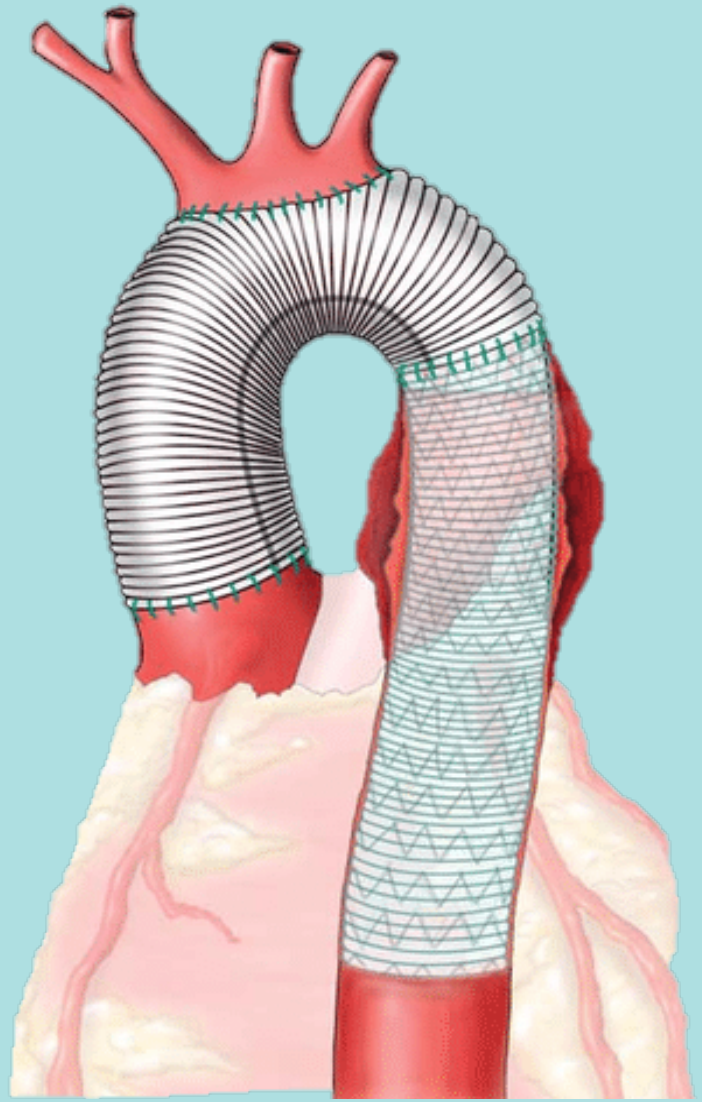


TRATAMENTO CIRÚRGICO









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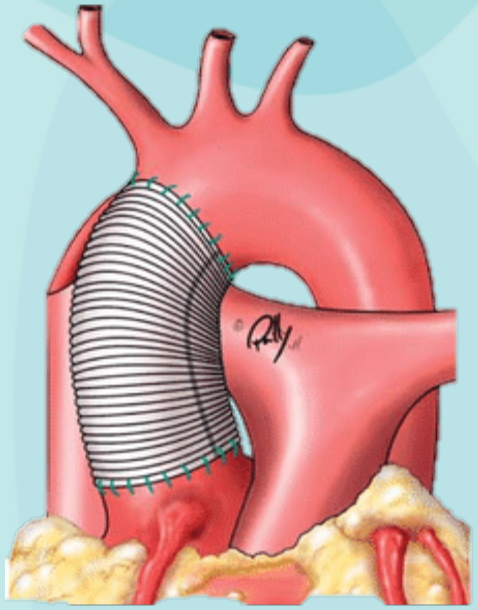
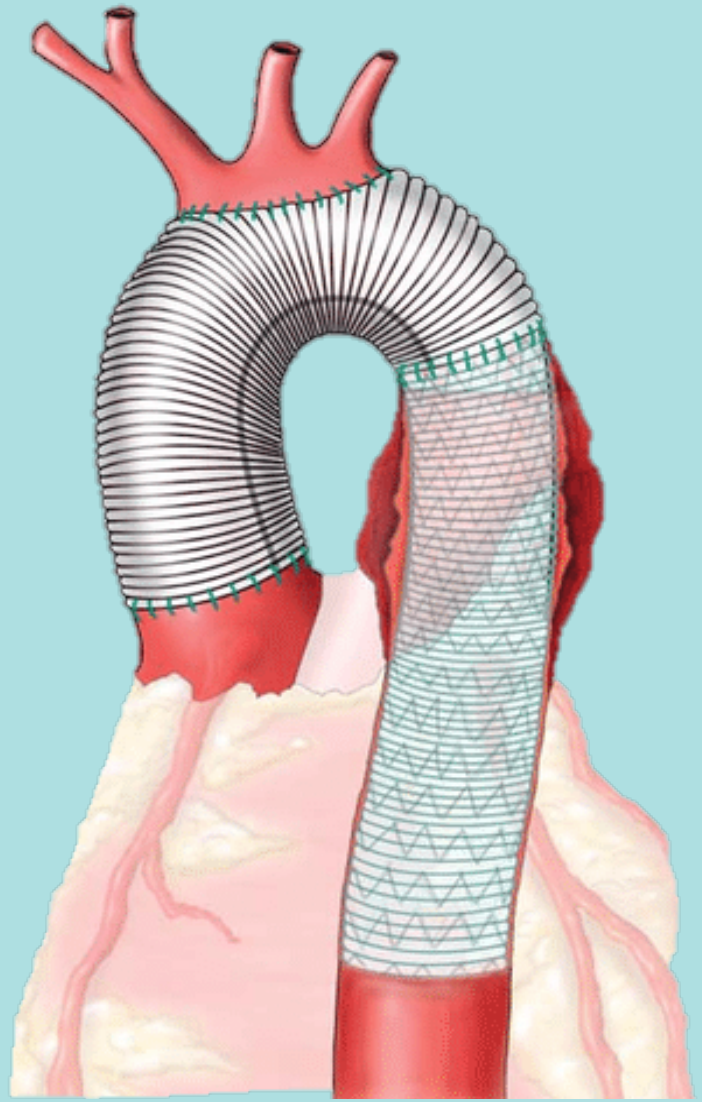
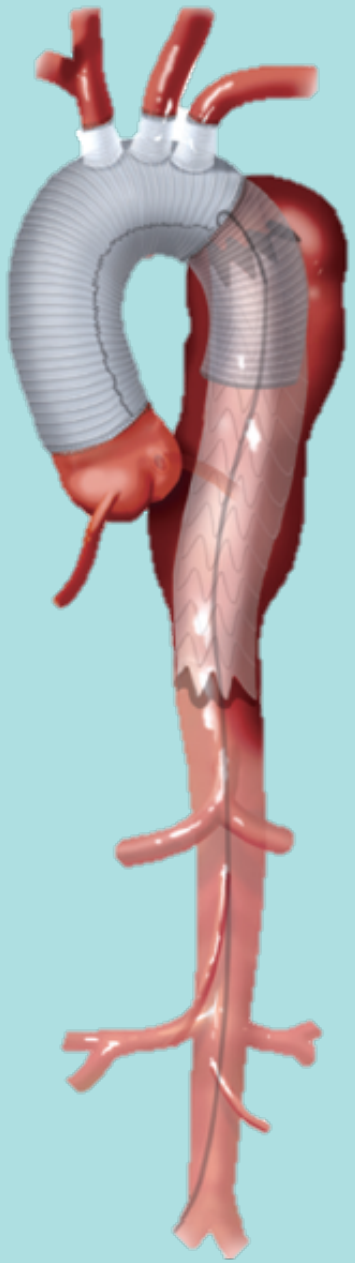
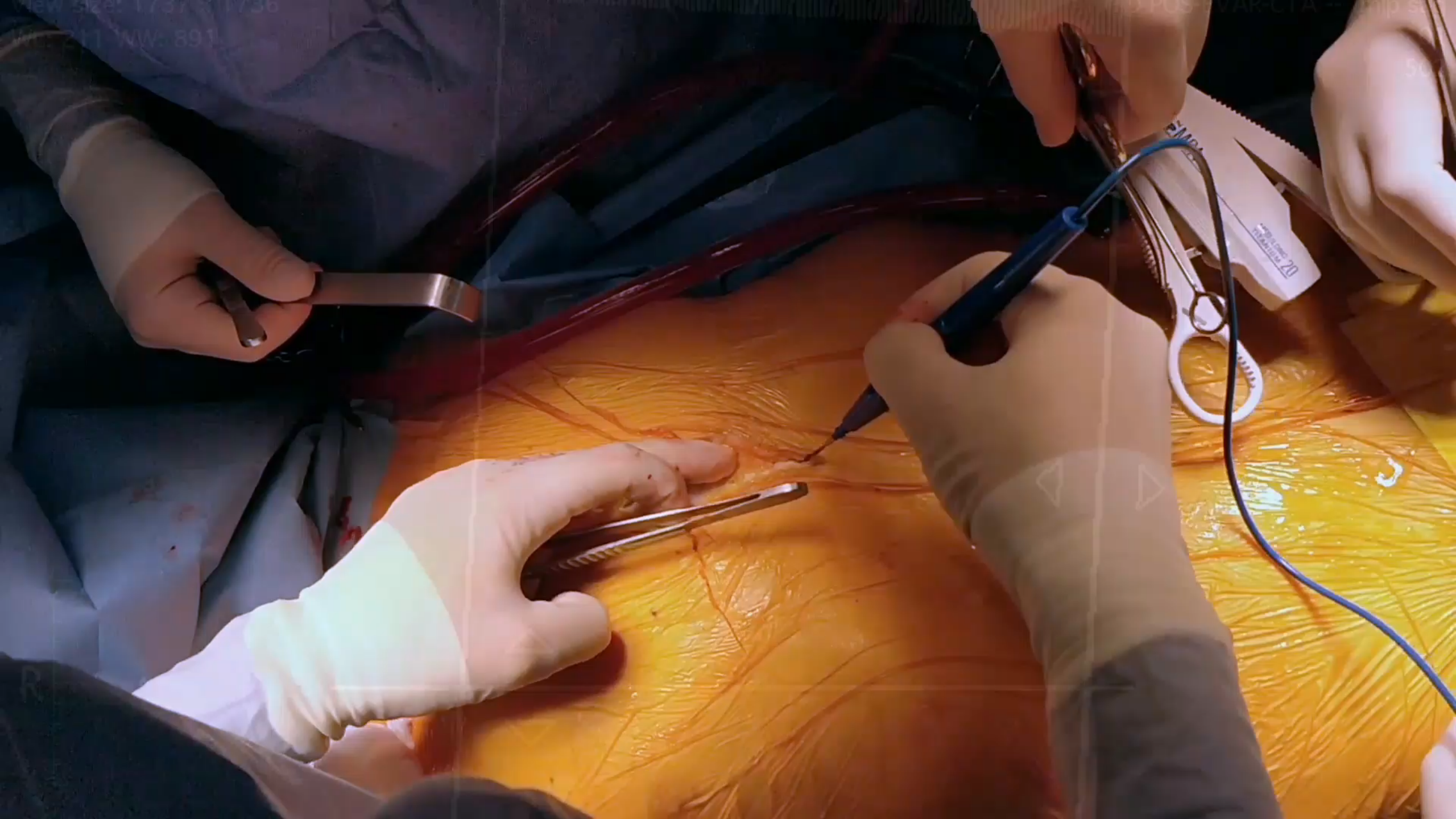


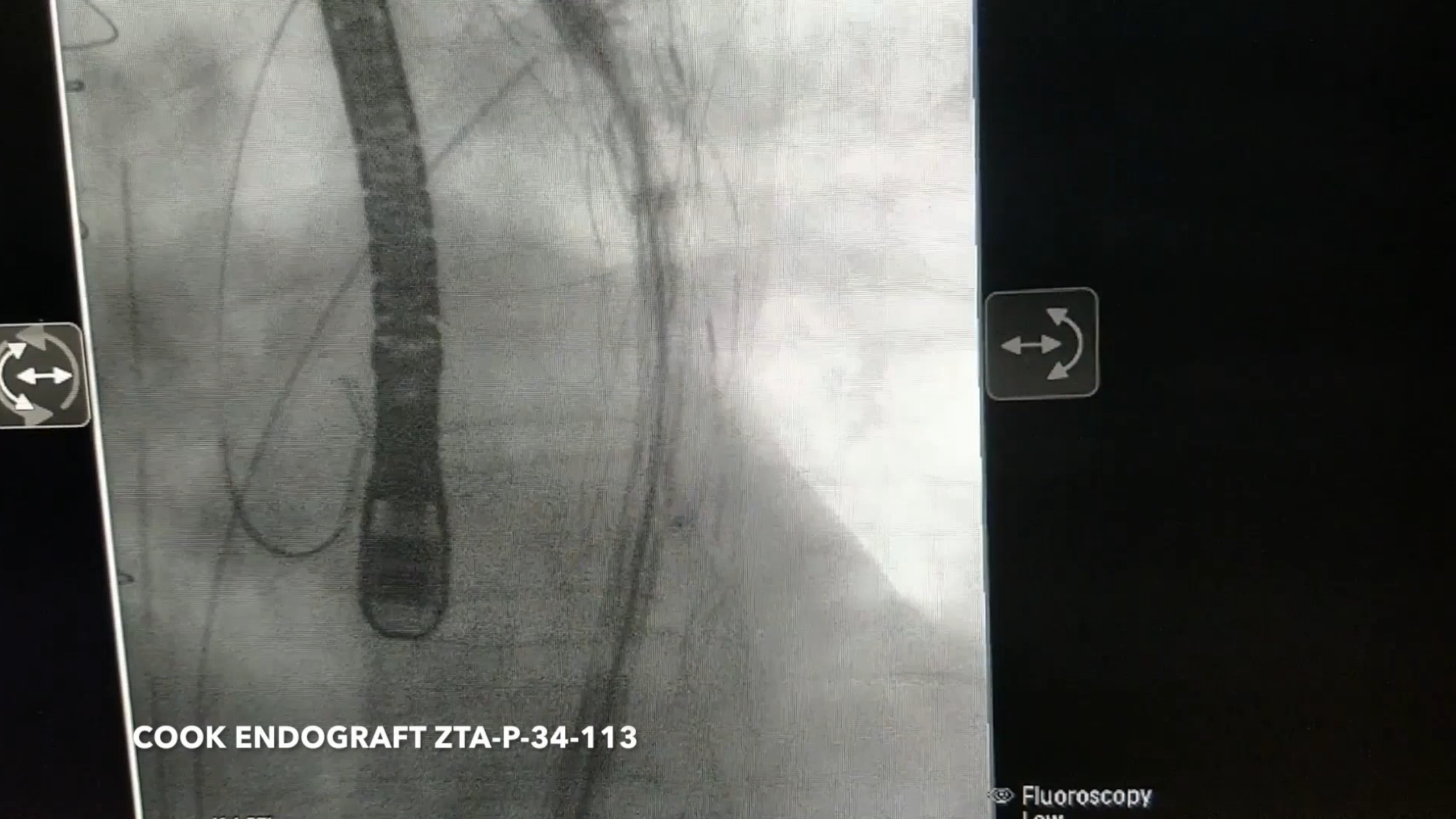


SÍNDROME DE MÁ PERFUSÃO

- Cirurgia vascular em 2º tempo
- Isquémia muito avançada com lesão órgão
  - Cirurgia de resseção de órgão alvo.
- Mau prognóstico
  - Doente geralmente já em acidose.
  - Elevada taxa de mortalidade → >30%






COOK ENDOGRAFT ZTA-P-34-113
Fluoroscopy

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