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Aortic Remodeling and Clinical Outcomes in Type B Aortic Dissection According to the Timing of Thoracic Endovascular Aortic Repair

[Purpose] We aimed to investigate the aortic remodeling and clinical outcomes after TEVAR in uncomplicated Type B AD according to timing of the procedure. [Methods] Patients were divided into acute/subacute (< 6 weeks, n=35), early chronic (6 weeks to 1 year, n=20) and late chronic (> 1 year, n=32) group according to the timing of TEVAR Changes in aortic dimensions on serial CT images and clinical outcomes were evaluated. [Results] At 1-year follow-up, the total aorta diameter was decreased in the acute/subacute group and the early chronic group, however increased in the late chronic group (Figure 1, A and B). The survival free from major adverse aortic events defined as death, aortic rupture, and reintervention at 5-years after TEVAR was lowest in the late chronic group (88.6% vs. 80.0% vs. 68.8%, p = .07), however it did not differ significantly between the acute/subacute and the early chronic group (p=.68). [Conclusion] TEVAR in within 1-year after initial diagnosis of Type B AD resulted in a favorable aortic remodeling and clinical outcomes.

