

JOINT EVENT

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Combined transcatheter aortic valve implantation and endarterectomy of the ipsilateral internal carotid artery**Mahmoud Fouda**

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Over last few years, transcatheter TAVI has proved to be an acceptable substitute to other known approaches of TAVI, mainly transfemoral and transapical TAVI whenever the later ones are unfavorable due to severe femoral arteriopathy or previous iliofemoral surgery or when the patient is too frail to withstand transapical TAVI as in case of severe pulmonary or ventricular dysfunction for instance. When transcatheter TAVI becomes a must in case of inappropriate other approaches of TAVI, the presence of critical stenosis in the ipsilateral internal carotid artery as comorbidity could expose such fragile patients to be operated twice in two separate settings, for ICA endarterectomy at the first setting then for TAVI, which may entail double risk of bleeding, severe vascular and neurological complications, long hospital stay and mortality. " We report cases of transcatheter aortic valve implantation (TAVI) with the self-expanding Medtronic CoreValve bioprosthesis (Medtronic, Minneapolis, MI) through a left common carotid (LCC) artery in patients with a diseased ipsilateral internal carotid artery and high EUROSCORE risk who were rejected to undergo surgery and a transcatheter approach was planned. Due to severe peripheral vascular disease with iliofemoral lesions, significant calcifications and unfavourable angulations of the innominate artery as well as prior heart surgery precluding a direct aortic and subclavian approach, none of the established access sites were suitable. Therefore, we considered a left carotid access, which had to be combined with a surgical endarterectomy for treatment of a significant ipsilateral internal carotid artery. The procedure was successful without cardiac, cerebrovascular, or access complications. These cases illustrate a true heart team approach, establishing a unique access for TAVI for patients without regular access options".

Biography

Mahmoud Fouda has completed his PhD at the age of 24 years from the faculty of medicine Tanta University "Egypt" and postdoctoral studies from Ain Shams University "Egypt" and Paris Descartes "France". He is a cardiac surgeon with many years of experience in France, Germany and Egypt. He has acquired good experience in the newest surgical techniques over many years working at many hospitals in Paris, Lyon and Hamburg. His main interest is the minimal invasive surgery of cardiac valves as well as the total arterial coronary revascularization.

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