

Acute Superior Mesenteric Artery Thrombosis from Necrotic Pancreatitis as a Complication of Endovascular Abdominal Aortic Aneurysm Repair

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Clinical Image

A 53-year-old male had a 3.1 cm of aortic abdominal aneurysm (AAA) with high-grade bilateral common iliac artery stenoses. Endovascular stent grafting of AAA and bilateral common iliac arteries was performed with Gore C3 excluder aortic endograft and selfexpanding iliac stents. On post-operative day 1, he developed an acute episode of severe, stabbing abdominal pain, and soon became unresponsive. He was found to have severe lactic acidosis and hypotensive shock. He received high-dose vasopressor therapy and was placed on ventilator. CT-abdomen showed severe necrotic pancreatitis (Figure 1). Exploratory laparotomy revealed nonviable ischemic transverse and right colon. These sections of bowel were expeditiously resected. Emergency mesenteric angiogram visualized a thrombosis completely occluding the superior mesenteric artery (SMA). Embolectomy of SMA with bovine patch angioplasty was performed to restore blood supply to viable small intestine. Postoperatively, patient continued to decline with severe hypoxia, septic shock, and multiorgan failure. He expired 3 days after endovascular stent grafting of AAA.

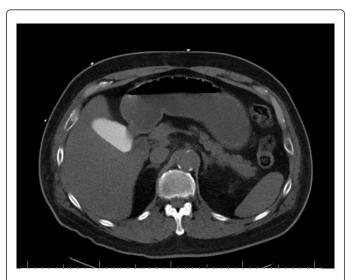


Figure 1: Necrotic pancreatitis of 53-year-old male demonstrated on CT.