

Open surgery of AAA in the endovascular era will it survive?

**Beate Lindberg
Rikshospitalet Oslo Norway**

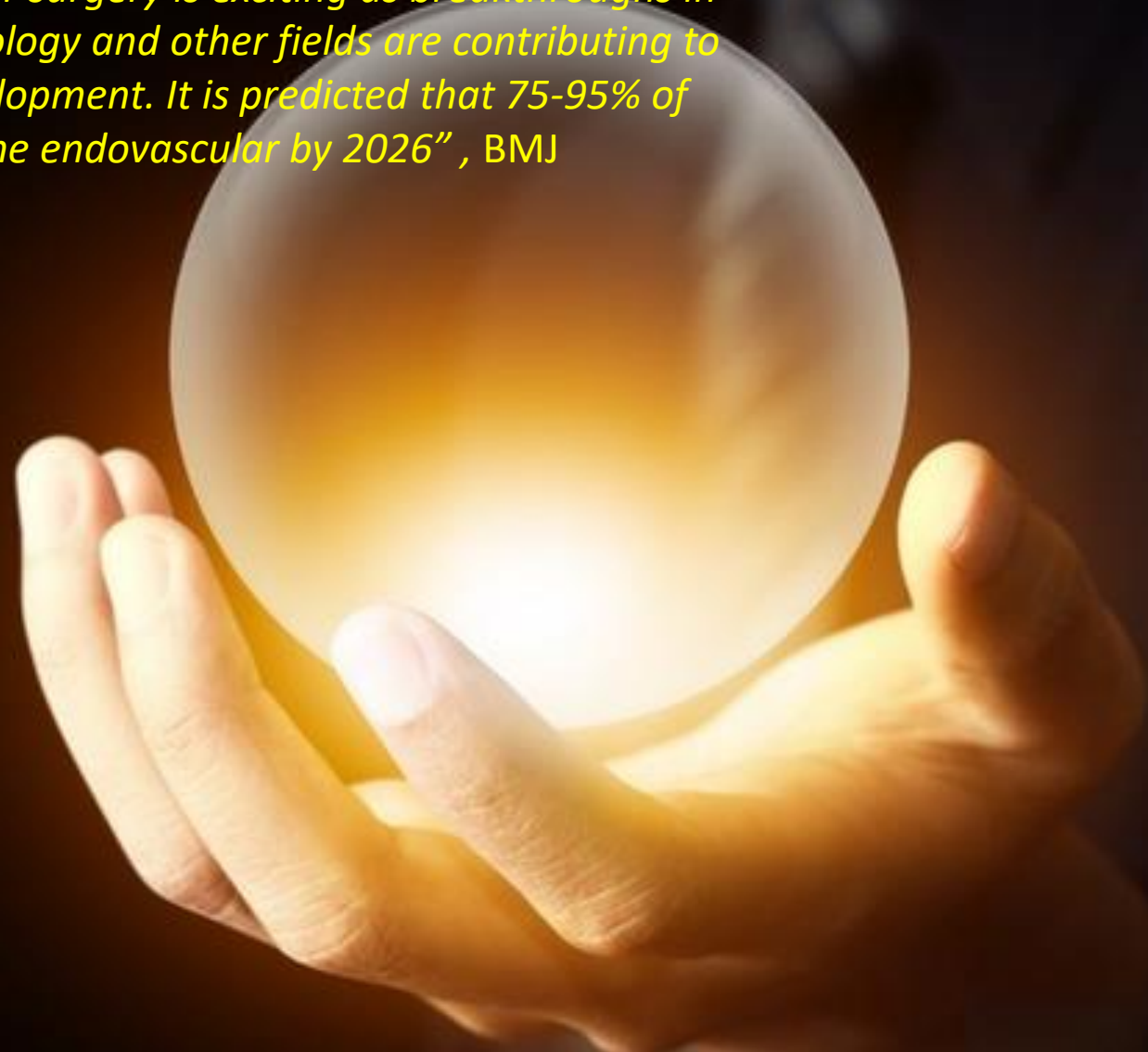


Disclosures

- Gore
- Medtronic



“The future of vascular surgery is exciting as breakthroughs in pharmacology, technology and other fields are contributing to vascular surgery development. It is predicted that 75-95% of procedures will become endovascular by 2026” , BMJ





**Open surgery of AAA in
the endovascular era
SHOULD IT survive?**

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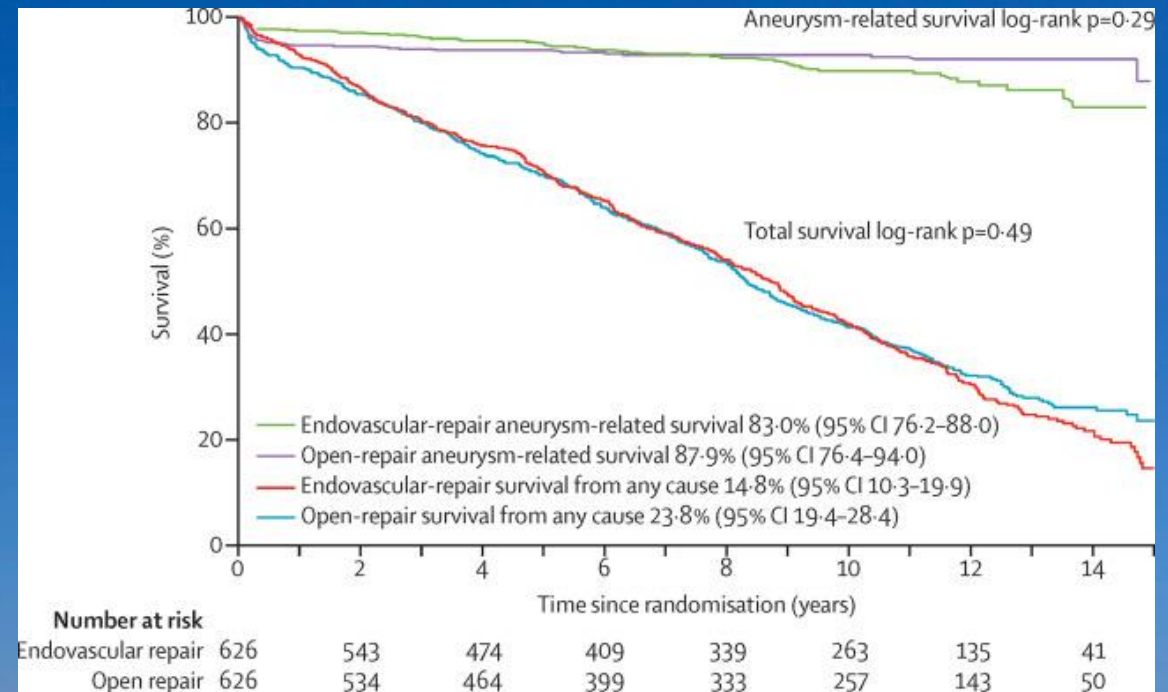
EACTS/STS Guidelines for diagnosing and treating acute and chronic syndromes of the aortic organ 2024

- In patients with intact AAA with suitable anatomy for either open or EVAR, a shared decision-making process for each approach, including life expectancy, is recommended. **REC I**
- In patients with long life expectancy, open AAA repair should be considered the preferred treatment modality. **REC IIa**
- In patients with suitable anatomy and reasonable life expectancy, endovascular AAA repair should be considered the preferred treatment modality. **REC IIa**



Endovascular versus open repair of abdominal aortic aneurysm in 15-years' follow-up of the UK endovascular aneurysm repair trial 1 (EVAR trial 1): a randomised controlled trial, 2016

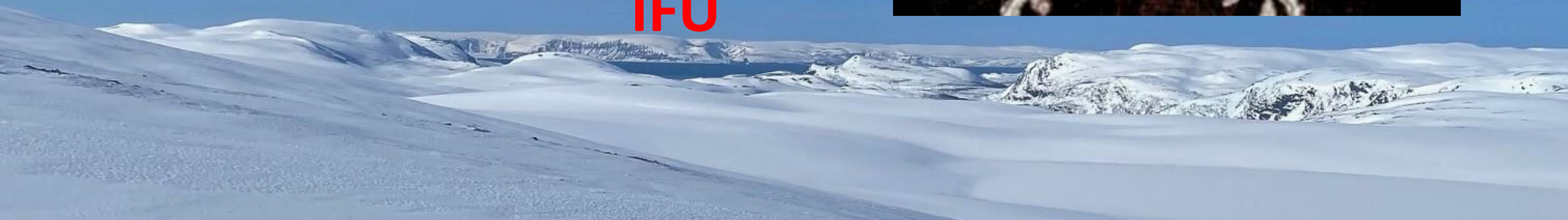
- “...the mean total and aneurysm-related mortality **were not significantly different between groups**. The significant late divergence of the survival curves in favor of open repair can be partly explained through greater increase in late mortality from aneurysm-related deaths in the EVAR group”



Standard AAA

- Easy open
- Easy endo
- Either way it is good results

Hostile neck
Dissections
Landing zones
Access
Endoleaks
IFU



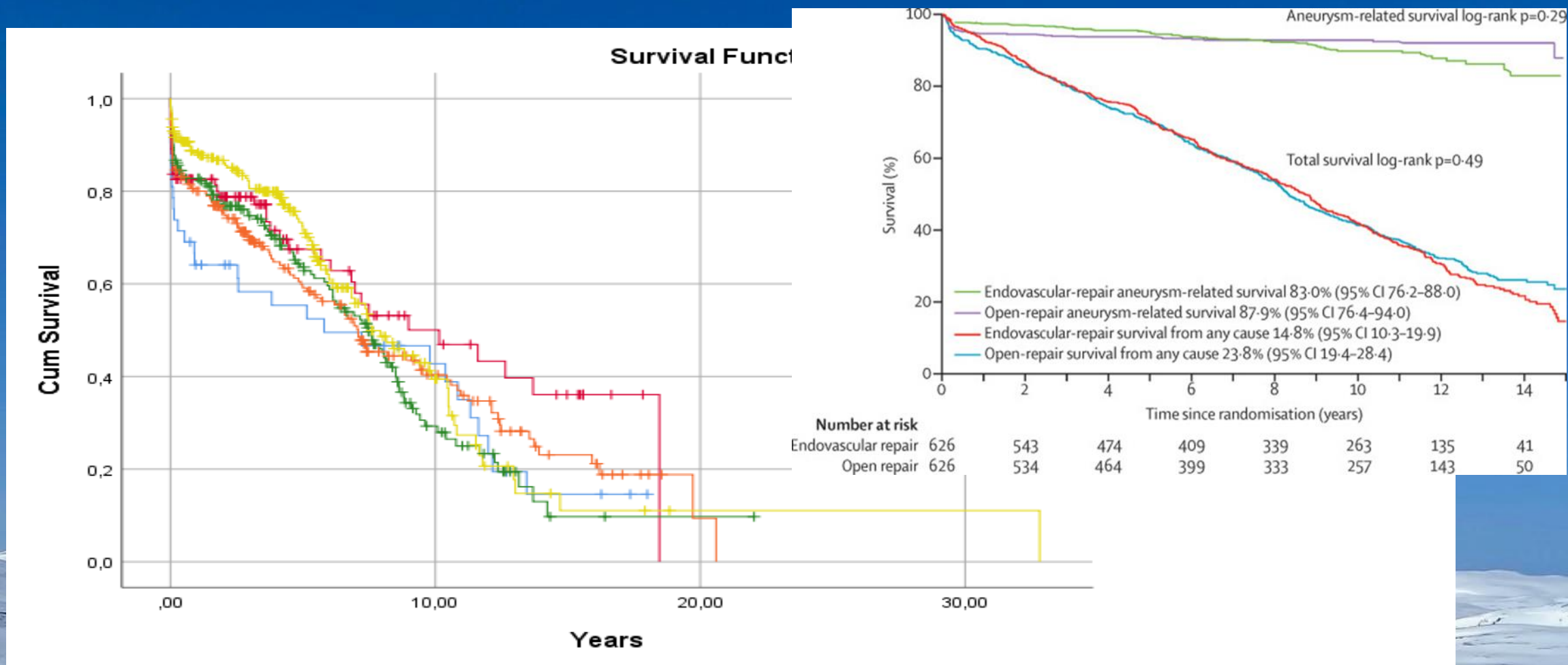
Rikshospitalet, Oslo

	2018-2022
Infrarenal AAA	108
30 day mortality	0

	2015-2019
OPEN TAAA	n=254
CRAWFORD 4	n=148
30 day mortality (%)	4,0
SCI (%)	3,4

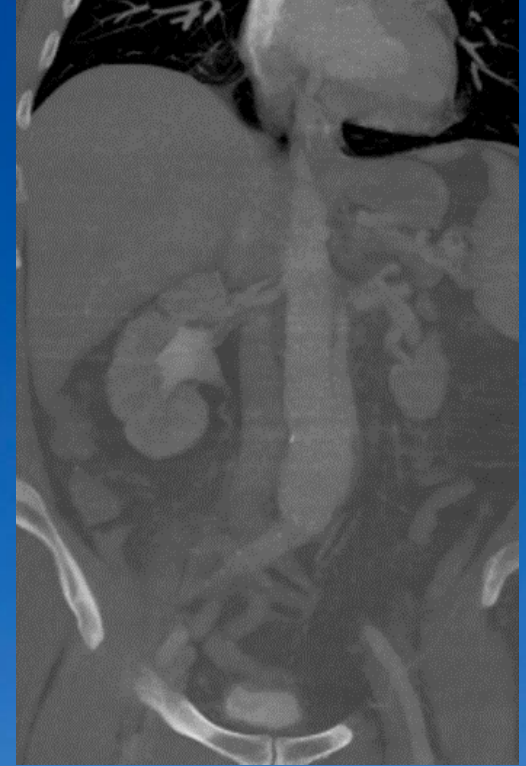


1997- 2019 n=774 Thoracoabdominal OSR



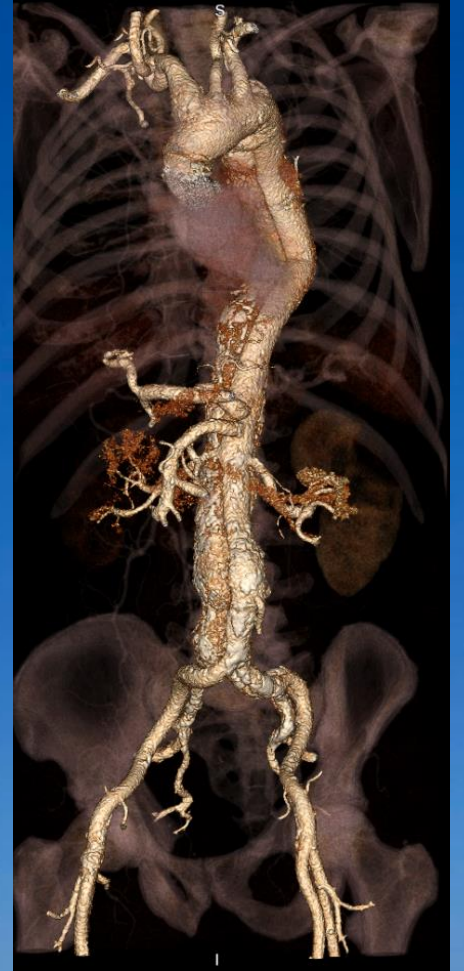
Open surgery

- **Connective tissue disease**
- Dissections
- Converting endovascular
- Technically not suitable or more complex repair with endo



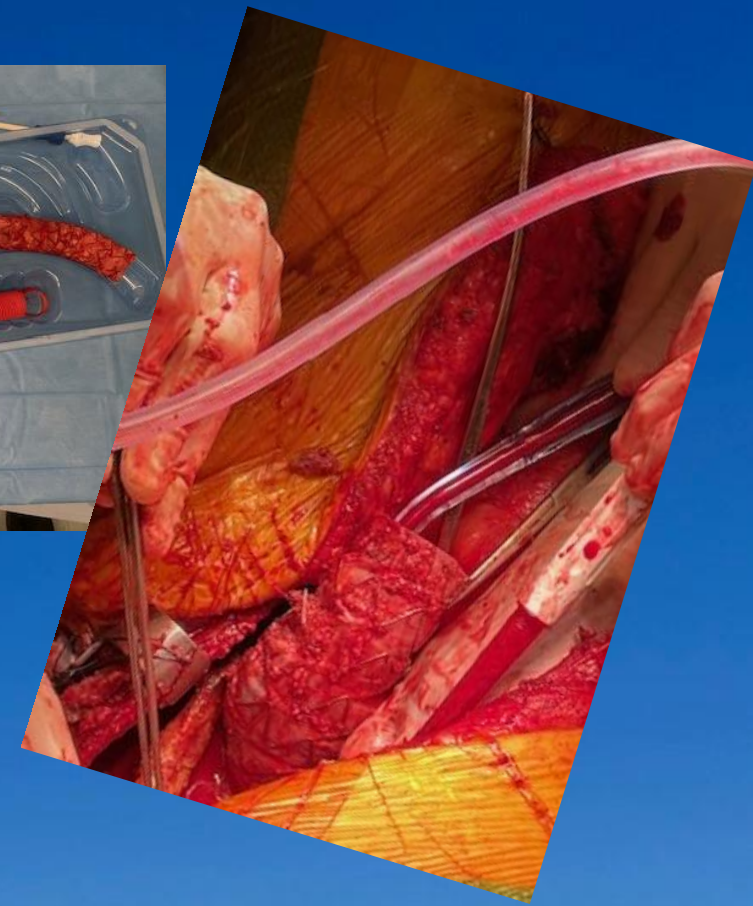
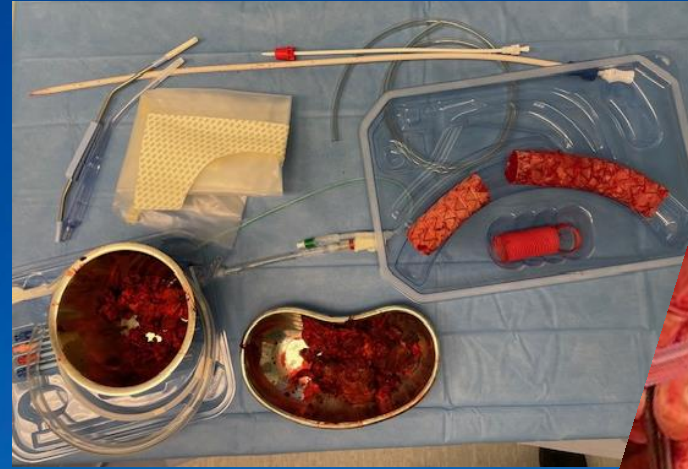
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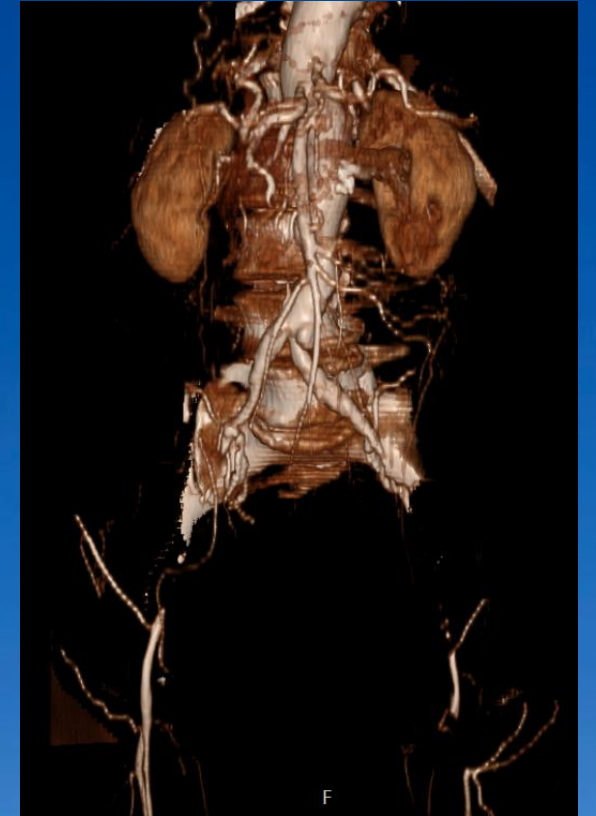
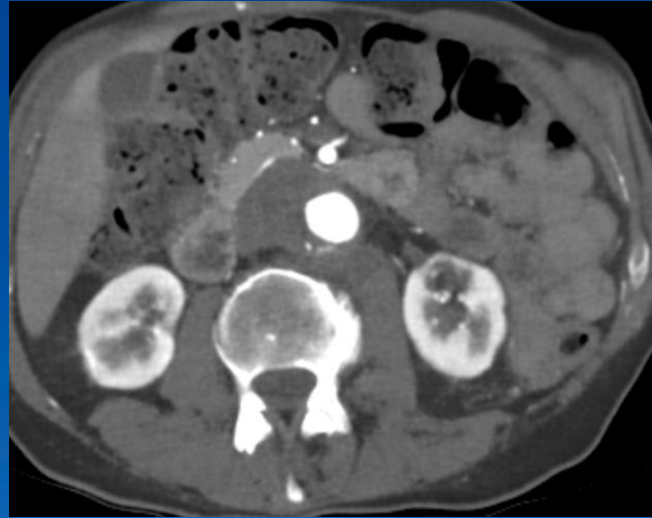


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Open surgery



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The greatest challenge?



How can we make open surgery survive?

Simulation Based Training and Assessment in Open Vascular Surgery: A Systematic Review

Jonathan Lawaetz et al Eur J Vasc Endovasc Surg (2021) 61, 502e509

- Education
- Centralization
- Attitude

Open Vascular Surgery Education: Need for the Second Step

Lazar B. Davidovic et al , Eur J Vasc Endovasc Surg (2021) 61, 155e156

“This is the result of not only the extensive surgical experience but also the perioperative system built around these patients to facilitate excellent outcomes”

Francis Caputo, Cleveland Clinic

**Vascular surgeons need to want open surgery to survive
It is not a suboptimal alternative!**



THE ANSWER?

YES

