When Should Parallel Grafts be the First Treatment Choice for Complex AAA Repair

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Disclosures
• None

Parallel Grafts
Snorkel/Chimney/Periscope
Sandwich

When Should Parallel Grafts be the First Treatment Choice for Complex AAA Repair??

• Options
  – Open repair
  – Other Endovascular

• Parallel Grafting should ALWAYS be considered
Benefits-Anatomic Extent of Landing Zone

- No limitation on anatomic landing zones
  - Arch, Thoracic, Abdominal
  - Recreate landing zones
    - Sandwich technique

Benefits-Timing

- Immediate
  - Only dependent on endografts and branch stents
- Various combinations can be used to accommodate

Benefits-Branch Vessel Orientation

- Vessel Orifice
  - Anterior/Posterior
- Vessel Course
  - Caudal/Cephalad
  - Tortuosity

Benefits-Access/Aortic Anatomy

- Standard access

Parallel Grafting

- Patient-essentially no limitations
- Anatomy-few restrictions
- Can be used in almost any situation

Relative Contraindications

- Very narrow aorta
- Infection
- Need for too many branch stents
- Can’t tolerate antiplatelets
- Difficult arch
  - Debranch
  - Type III
  - Severely diseased
- ?Rupture
Gutter Leak

- Post-mark registry of the Nellix System with Chimney Stents
- Open-label, single-arm, no prospective screening
- 200 patients, 10 international centers, 5y F/U

Conclusions

- Parallel grafting offers technical solution to complex aneurysms
- Rare anatomic limitations
- Acceptable primary therapy