VEITH S Y M P O S I U M Connecting The Vascular Community

Real-world ten-year experience with a low profile thoracic endograft

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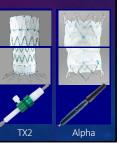
Disclosures

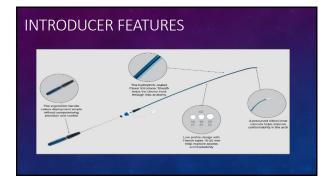
- Speaker name: Germano Melissano
- Receipt of grants/research support
- Receipt of honoraria and travel support
- Participation in a company-sponsored speaker bureau
- Employment in industry
- Shareholder in a healthcare company
 Owner of a healthcare company
- □ I do not have any potential conflict of interest

2013 - ZENITH ALPHA: MODULAR DESIGN

DIFFERENCES BETWEEN TX2 AND ALPHA

- 1. Stainless steel -> Nitinol
- 2. No top bare stent -> bare stent
- 3. Dacron dense weave
- 4. Barbs location
- 5. Distal bare metal stent
- 6. Release trigger wires mechanism







• 42 procedures

MID-TERM CLINICAL EXPERIENCE

Single-center mid-term results with the low profile Zenith Alpha Thoracic Endovascular stent-graft

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November 2013 → December 2019

• 270 procedures

FIRST DECADE RESULTS

November 2013 \rightarrow November 2023

463 procedures

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• 455 patients



NDICATIONS		
	N	(%)
TAA	138	(29.8)
Aortic Arch	77	(16.6)
TAAA (1 st step of F/B- EVAR)	123	(26.6)
Redo	48	(10.4)
Type B aortic dissection	37	(8.0)
PAU / IMH	24	(5.2)
Emergency	16	(3.5)
Total	463	(100.0)



STENT-GRAFT ARRANGEMENT IN 463 PROCEDURES

538 ZTA	N	(%)
Single proximal component	340	(63.2)
Two or more proximal components	141	(26.2)
One or more proximal components + distal component	39	(7.2)
Single distal component	18	(3.3)
Mean stent-graft / procedure	1	.2

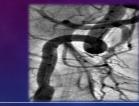
FEMORAL ARTERY ACCESS				
Period	Surgical N(%)	Percutaneous N(%)	Total	
2013-2015	82 (100)	0 (0)	82	
2016-2019	30 (16.0)	158 (84.0)	188	
2020-2023	3 (1.6)	190 (98.4)	193	
Total	115 (24.8)	348 (75.2)	463	
8 (1.7%) groin surgical conversions after percutaneous approach				

ANCILLARY PROCEDURES

- Iliac a. PTA-stenting <u>before</u> TEVAR: 11 pts (2.4 %)
- Brachio-femoral wire: 18 pts (3.9 %)
- Iliac a. PTA-stenting after TEVAR : 17 pts (3.7 %)
- TEVAR advanced in a introducer: 4 pts (0.9 %)

Stent-grafts were introduced and released from the intended common femoral access in 99.8 % of cases

LOW-PROFILE ADVANTAGES



4 pts were treated with Zenith Alpha Thoracic after previous failed attempt with other thoracic stent graft

ANESTHESIOLOGIC MANAGEMENT

- General anaesthesia: 252 pts (54.4 %)
- Local anaesthesia: 211 pts (45.6 %)





ZENITH ALPHA THORACIC IN 37 TBD

- 14 acute / subacute TBD*
- 23 chronic (9 with candy plug)
- Low radial force proximal bare stent
- High conformability
- One case of retrograde dissection (subacute)



30-DAY RESULTS – MAJOR OUTCOMES

Procedures: 463	N	(%)	
Technical success	455	(98.3)	
Clinical success	425	(91.8)	
Mortality*	18 *	(3.9)*	
Type IA Endoleaks	5	(1.1)	
Type IB Endoleaks**	3 (/340)**	(0.9)**	
* 11 pts. treated in urgent/emergent settings ** 123 first steps for F/B-EVAR not included			

30-DAY RESULTS – SECONDARY OUTCOMES

Procedures: 463	N	(%)
Type II Endoleaks	8	(1.7)
AKI with dyalisis	2	(0.4)
Major stroke	7	(1.5)
Any SCI	16	(3.5)
Permanent SCI	3	(0.6)

FOLLOW-UP: 62.3 MONTHS (RANGE: 5-120)*

- 407 pts available at FU
- No stent fracture
- 1 new onset type IA
- 2 new onset type IB
- 1 stent-graft migration
- No intra-graft thrombosis



FOLLOW-UP: 62.3 MONTHS (RANGE: 5-120)*

- 31 deaths at FU, 3 aortic related**
- 1 open conversion with FET for persistent
 Type IA EL
- 2 TAAA open conversions for distal progression of disease
- 14 secondary unplanned endovascular procedures



CONCLUSIONS

- Zenith Alpha allowed extended indications and a safe navigation also through calcified and tortuous vessels
- It retained the precision and control of previous generation device with high conformability in a "real world" scenario
- Satisfactory long-term follow-up were obtained

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