

论著

新型三分支型主动脉弓腔内覆膜支架在 DeBakey I 型主动脉夹层中的应用

唐滔, 申康军, 唐浩, 周新民, 杨进福

中南大学湘雅二医院胸心外科,长沙 410011

摘要: 目的: 应用新型三分支型主动脉弓覆膜支架治疗DeBakey I 型主动脉夹层,并与传统手术比较,以评价其疗效。方法: 2010年1月至2010年11月38例DeBakey I 型主动脉夹层患者在中南大学湘雅二医院胸心外科接受手术治疗,其中16例采用新型三分支型主动脉弓覆膜支架治疗(支架组),22例采用传统四分支人工血管治疗(血管组)。结果: 与血管组相比,支架组体外循环时间[(138.1±56.42) vs (179.21±67.64) min]、阻断时间[(98.56±28.08)vs (134.36±46.46) min] 和选择性脑灌注时间[(27.3±14.76) vs (48.74±18.22) min] 均明显缩短($P<0.05$); 术后24 h 引流量也明显减少[(608.93±308.15) vs (899.04±437.79) mL, $P<0.05$]; 喉返神经损伤发生率降低(6.25% vs 27.3%),住院天数减少[(16.15±6.68) vs (21.18±12.69) d, $P<0.05$]。随访14~24个月,复查主动脉CT 血管造影显示主动脉弓及分支动脉内支架舒展良好,贴壁满意,相应部位假腔消失,远端假腔内血栓填充,生活质量良好。结论: 新型三分支主动脉弓覆膜支架适合于大多数DeBakey I 型主动脉夹层患者的治疗,它可以简化主动脉弓部操作,降低手术风险,早中期疗效满意。

关键词: 主动脉夹层 DeBakey I 型 三分支主动脉弓覆膜支架 外科手术

A new triple-branched aortic arch covered stent graft in DeBakey Type I aortic dissection

TANG Tao, SHEN Kangjun, TANG Hao, ZHOU Xinmin, YANG Jinfu

Department of Thoracic and Cardiac Surgery, Second Xiangya Hospital, Central South University, Changsha 410011, China

Abstract: Objective: To explore the effect of a new triple-branched aortic arch covered stent graft on DeBakey Type I aortic dissection, and to assess its efficacy in comparison with traditional surgery. Methods: From January 2010 to November 2010, 38 patients of DeBakey Type I aortic dissection were treated surgically in the Second Xiangya Hospital of Central South University, in which 16 operations used triple-branched aortic arch covered stent grafts (stent graft group, SG group), 22 operations used traditional 4 sides branches aortic arch grafts (arch graft group, AG group). Results: Compared with AG group, the cardiopulmonary bypass time[(138.1±56.42) vs (179.21±67.64) min], the clamp time [(98.56±28.08) vs (134.36±46.46) min] and the selective cerebral perfusion time[(27.3±14.76) vs (48.74±18.22) min] in SG group were obviously shortened($P<0.05$). The volume of drainage 24 hours after operation in SG group also reduced [(608.93±308.15) vs (899.04±437.79) mL]($P<0.05$). The SG group had a lower rate of recurrent laryngeal nerve injury (6.25% vs 27.3%) and duration of hospitalization[(16.15±6.68) vs (21.18±12.69) d]($P<0.05$). During a following-up period of 14 to 24 months, reexamination of aortic CT angiography showed that the triple-branched aortic arch covered stent graft expanded well, and attached to the wall satisfactorily, while the corresponding false lumen of the aortic artery disappeared and the distal false lumen was filled with thrombus. The life quality of patients were good. Conclusion: The new triple-branched aortic arch covered stent graft is appropriated for most patients with DeBakey Type I aortic dissection. Its use can simplify the aortic arch procedure, decrease the operation risk and has satisfactory results in early and middle stage after operation.

Keywords: aortic dissection DeBakey Type I triple-branched aortic arch covered stent graft surgery

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通讯作者: 杨进福, Email: yjf19682005@yahoo.com.cn

作者简介: 唐滔, 博士, 主治医师, 主要从事成人心脏及大血管临床和基础研究。

作者Email: yjf19682005@yahoo.com.cn

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