



GEN74 - Distal Aortic Growth Patterns and Aortic Complication Rates in Patients with Genetically-Associated Thoracic Aortic Aneurysms and Dissections

OBJECTIVE: To review the natural behavior of their distal aortic disease as well as how it responds to medical and surgical interventions.

ORGANIZATION

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BACKGROUND AND RATIONALE

The frequency of aortic interventions increases if a patient suffers an aortic dissection with a trend towards worse long-term survival. Elective prophylactic repair of the proximal aorta appears to reduce the number of late complications and distal aortic repairs. There is some evidence that more aggressive proximal aortic surgery may decrease the re-intervention rates and promote occlusion and absorption of the distal false lumen without significantly increasing the risk to the patient. Patients with genetically-triggered thoracic aortic aneurysms may need less aortic interventions in their lifetime if we can critically review the natural behavior of their distal aortic disease as well as how it responds to medical and surgical interventions.

DESIGN

- Method:*
- Describe the natural history of genetically-linked thoracic aortic aneurysms and aortic dissections in the aortic arch and distal aorta.
 - Examine the different growth patterns of patients who have had an aortic dissection versus the non-dissected patient population.
 - Critically analyze clinical variables which may have a positive or negative impact on aortic growth rate and aortic complications.

- Analyze the role of aggressive proximal surgery, such as total arch replacement, at the time of acute proximal aortic dissection on distal aortic disease progression.

Inclusion criteria:

- GenTAC subjects with Marfan, Turner, Ehlers-Danlos and Loeys-Dietz syndromes
- Ages 5 and older

Samples:

- None

Data:

- Surgical
- Organ system review
- Image
- Medication Use
- Pregnancy Data
- Demographics
- Genetic Data
- Family History

CONCLUSIONS

Results:

- Pending