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Redo Surgery for Extensive Chronic Type A Dissecting Aneurysm Following a Bentall Operation

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Highlights

- The results of redo surgery on aortic arch are still not satisfactory.
- Type A aortic dissection after Bentall operation was experienced in this case.
- Visceral perfusion was maintained only from false lumen without reentry.
- Modified total arch replacement with long elephant trunk was utilized.
- Aortic fenestration was done for visceral perfusion after closing primary entry.

Manuscript type: Case report

Abstract

Introduction

Despite the technical improvements, redo surgery on the aortic root and arch is still associated with high morbidity and mortality due to the trauma of repeat open-heart surgery and technical complexity. We present the case of extended chronic type A dissecting aneurysm that developed after a Bentall operation, which was successfully treated by applying a modified long elephant trunk technique and surgical aortic fenestration.

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