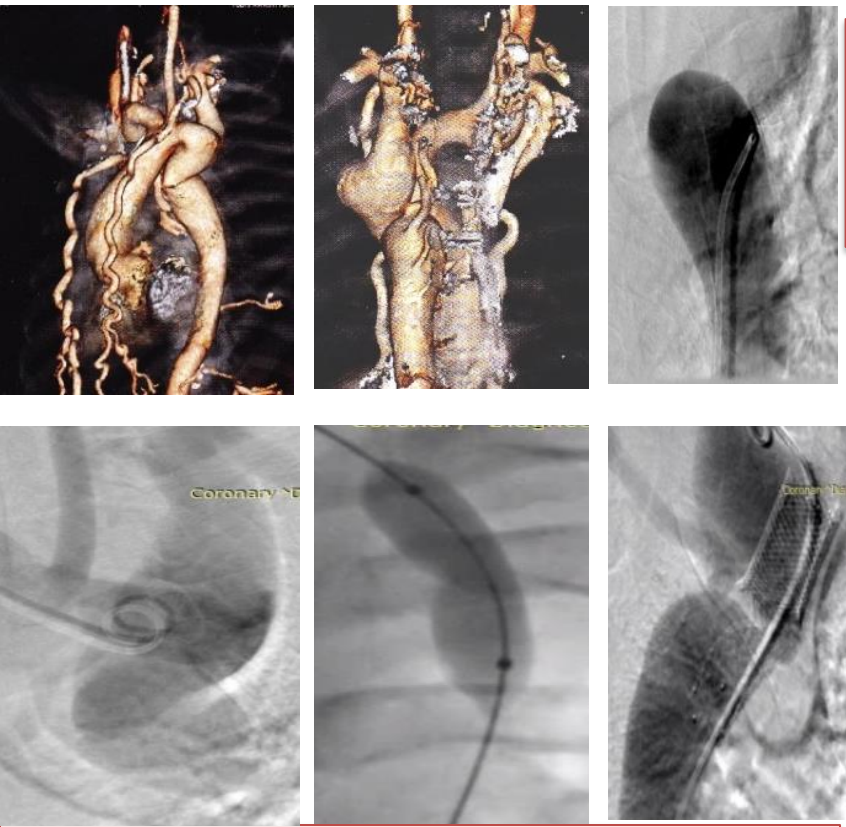
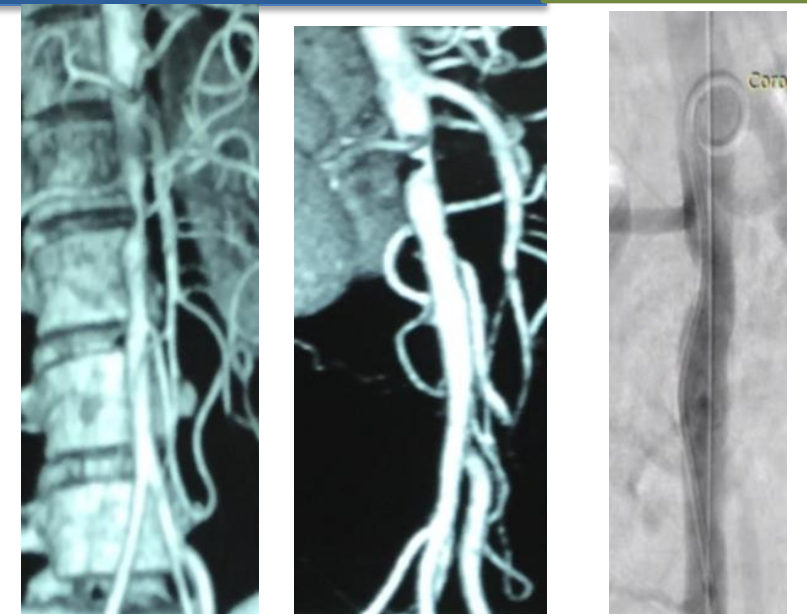


# Adult thoracic and abdominal aortic coarctation, combined value of MDCT and conventional angiography in the chosen modality of treatment.

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**Background:** Aortic coarctation (COA) is a relatively rare disease being either congenital or less commonly due to acquired etiology. The abdominal aorta may be involved by the disease in a variety that is also referred to as middle aortic syndrome (MAS). Uncorrected patients suffer from serious eventual morbidities.



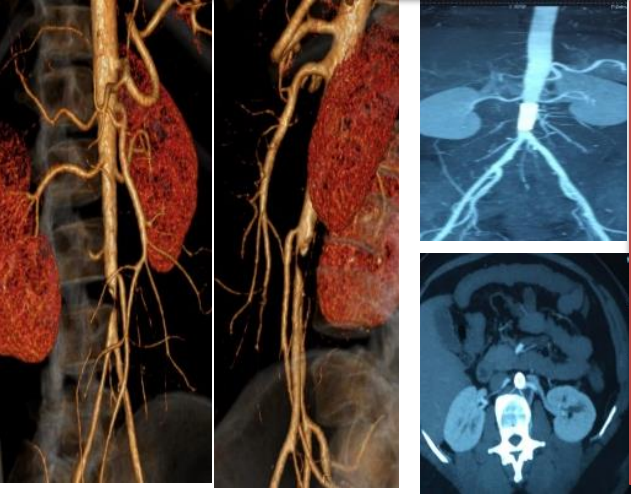
Juxtarenal Mid-Aortic Syndrome, Abdominal CoA



Mid-thoracic Thoracic Aortic COA.

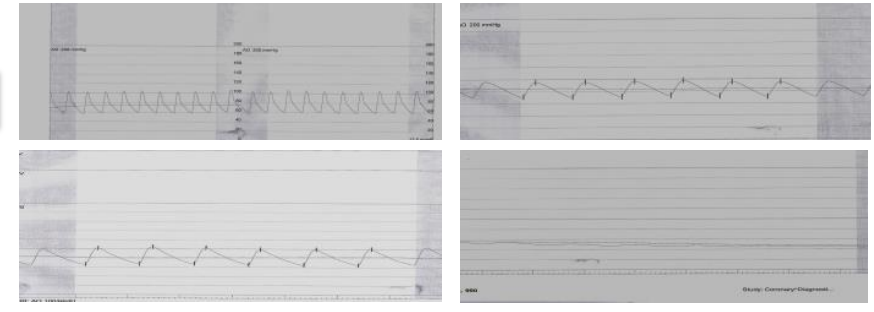
High-Mid-Aortic Abdominal COA.

**Ductal Thoracic Aortic COA.**

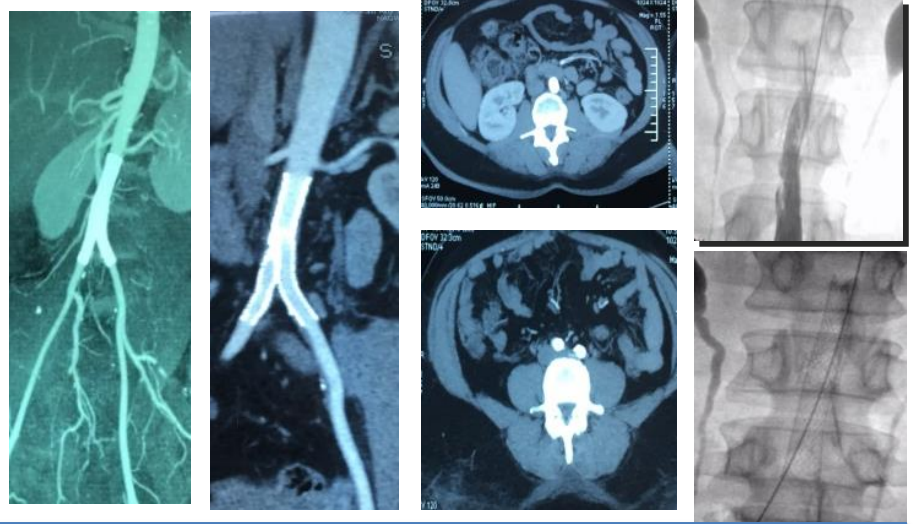


The Classic infra-renal Mid-aortic Syndrome

Re-Coarctation With Stent Occlusion



PTA guided by pressure gradients measurements across the lesion.



**Patients and methods**

- ❑ This study included 22 patients, 9 females and 13 males with age range from 17 to 49 years.
- ❑ The main clinical presentations were hypertension in 15 patients, lower limb ischemia in 7 cases and combination of both in 19.

**Results**

- ❑ Successful endovascular repair was the treatment modality in 15 patients, PTA alone in 6 patients and PTA & stenting in 9 patients.
- ❑ No perioperative mortality or major complications were encountered.
- ❑ Endovascular Re-intervention was needed in 3 patients. Aorto-aortic (thoraco-abdominal bypass) was done in 2 patients.

**Aim of the study**

- ❑ Evaluate the value of MSCT angiography in diagnosis and preplanning in endovascular management of adult aortic coarctation.
- ❑ The additional value of conventional angiography before or during the procedures is explained.

**Conclusion:** Aortic COA could be found in any segment of the Aorta. Proper identification of the anatomical details and pressure gradient studies are important factors affecting the plan of management.