

Critical Assessment of Outcomes in Acute Aortic Dissection (Type A) at a Community Hospital: A 10 year review

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Critical Assessment of Outcomes in Acute Aortic Dissection (Type A) at a Community Hospital: A 10 year review

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Introduction: Type A aortic dissection is a potentially life threatening condition. Patients who present with acute aortic dissections represent a great challenge to the clinical teams caring for them. Successful outcomes depend heavily on the correct diagnosis and complex decision making. There is perception that some community hospitals may not have the surgical expertise or the appropriate resources to perform complex aortic surgery.

Methods: Patients were identified through an IRB approved retrospective database review of our electronic hospital record. Information was collected from patients who presented from January 2000 to March 2010 with acute Type A aortic dissection. Data included the initial treatment approach, 30 day survival and major postoperative morbidity.

Results: 87 patients identified with acute Type A dissection. Of these, 66 were treated with surgery and 19 were treated non-operatively. Of the non-operative group, 1 patient died prior to the surgery starting, 12 were judged to be at a prohibitive risk and were treated medically, 4 patients elected for palliative care and 3 were transferred to other institutions. 1 patient with left the hospital against medical advice. The rate of acute renal failure was 26%. The overall stroke rate was 18.8%. 30 day survival was 71% overall.

Conclusion(s): After reviewing our results and comparing them to the International Registry of Acute Aortic Dissections (IRAD), it is clear that the treatment of patients at this community hospital is of high quality and on par with other major institutions.

Results

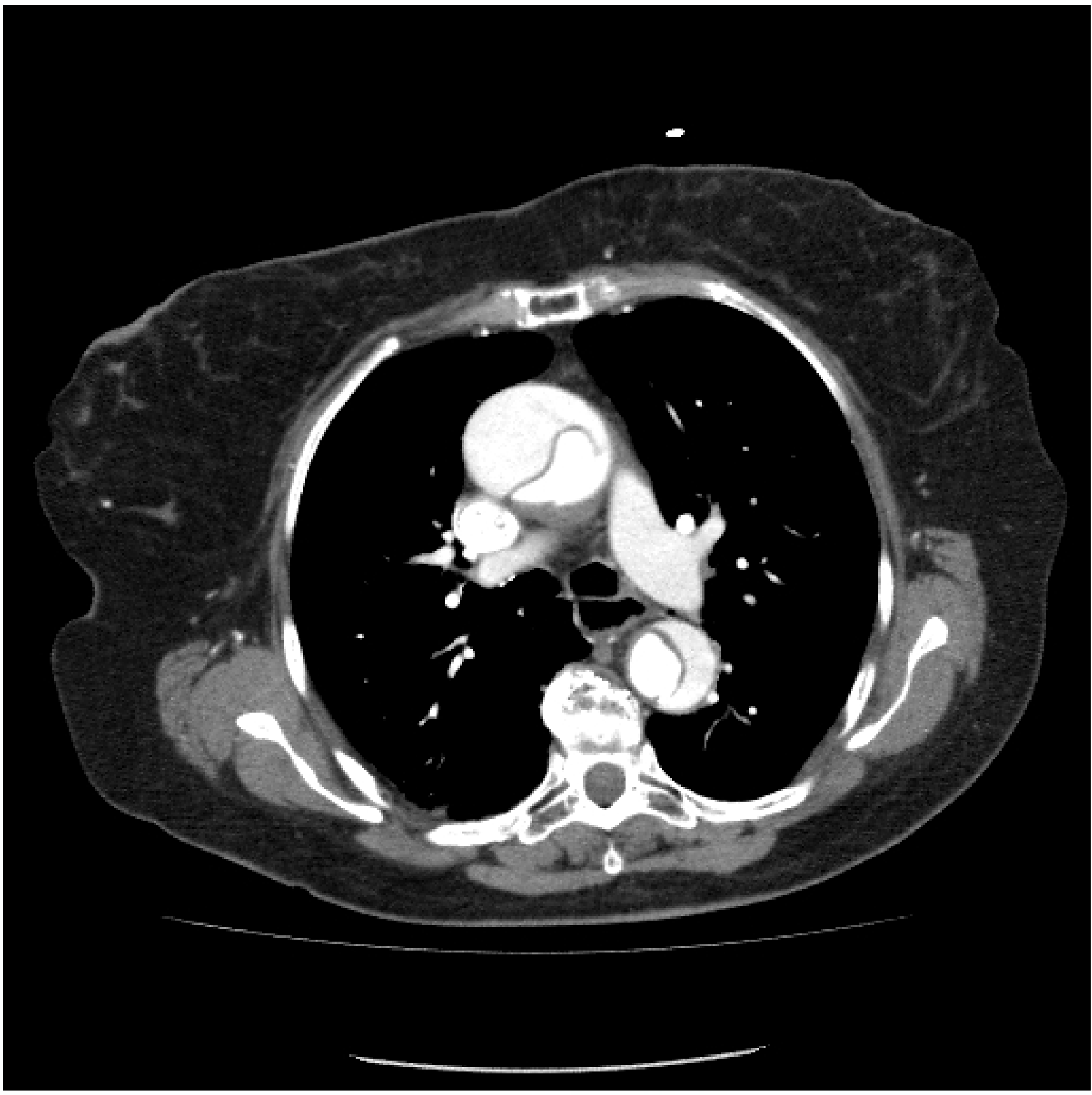
In-hospital Complications in Patients with Type A Dissection

Complications	No	Incidence Overall (%)
Acute Renal Failure	23	26.43
Stroke	16	18.39

Examples of Aortic Dissections



Type A in arch



Type A dissection



Type A dissection 2