

Endovascular Repair of Atypical Coarctation of the Descending Aorta with a Self-Expanding Covered Stent: Long-Term Follow-Up

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A 61-year-old patient with previous myocardial revascularization surgery, hypertension of difficult control despite several therapeutic methods and, in the physical examination, difference in blood pressure between upper and lower extremities. In the computed tomography (CT) serious aortic stenosis and heavily calcified plaques in descendant aorta above the level of the diaphragm were diagnosed. And, in the angiography great development of collateral circulation from the right mammary and intercostals were observed (Figure 1). The mean gradient through the stenosis was of 150 mmHg. Percutaneous treatment was performed implanting two self-expanding covered stents (Jostent, Jomed, Abbot Laboratories) of 6 x 12 x 58 mm, which were progressively expanded with angioplasty balloons reaching a diameter of 12 mm, obtaining an adequate endoprosthesis expansion (Figure 2) despite the calcified plaques (Figure 3, white arrows): the posterior gradient descended to 33 mmHg.

At two years of the follow-up, the patient was asymptomatic, with normal blood pressure and good endoprosthesis expansion in the tomographic control.

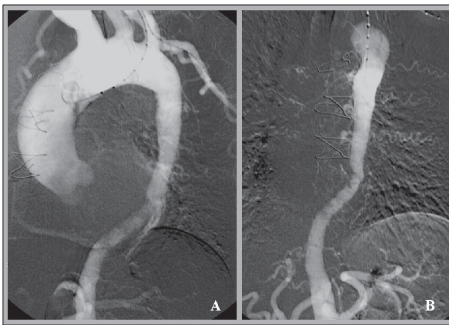


Fig. 1.

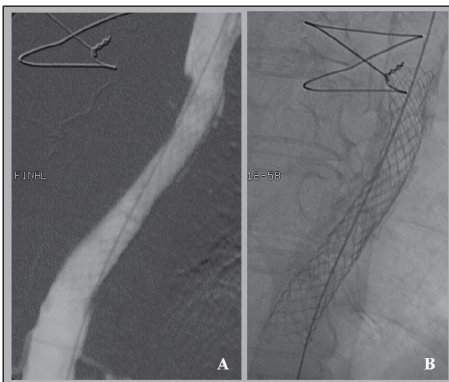


Fig. 2.



Fig. 3.

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