

# Left ventricular aneurysm repair

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# Pre Op

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- 79 year male Patient history of recent stroke 15days
- Rt LL monoplegia
- LV aneurysm measuring 6.5x5cm neck 1.9cm,Normal RV ,mild TR, Trace MR, IVC normal, No PH
- CT chest PAN Acinar Emphysematous Lung disease



# MRI Brain

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## IMPRESSION:

### The MRI findings are suggestive of:

- Acute infarct with hemorrhagic transformation in the left high frontal parafalcine region.
- Chronic lacunar infarct in the right caudate nucleus.
- Microhemorrhages in right thalamus, bilateral occipital and left temporal regions.
- Chronic ischemic changes in bilateral fronto-parietal subcortical and deep white matter and pons.

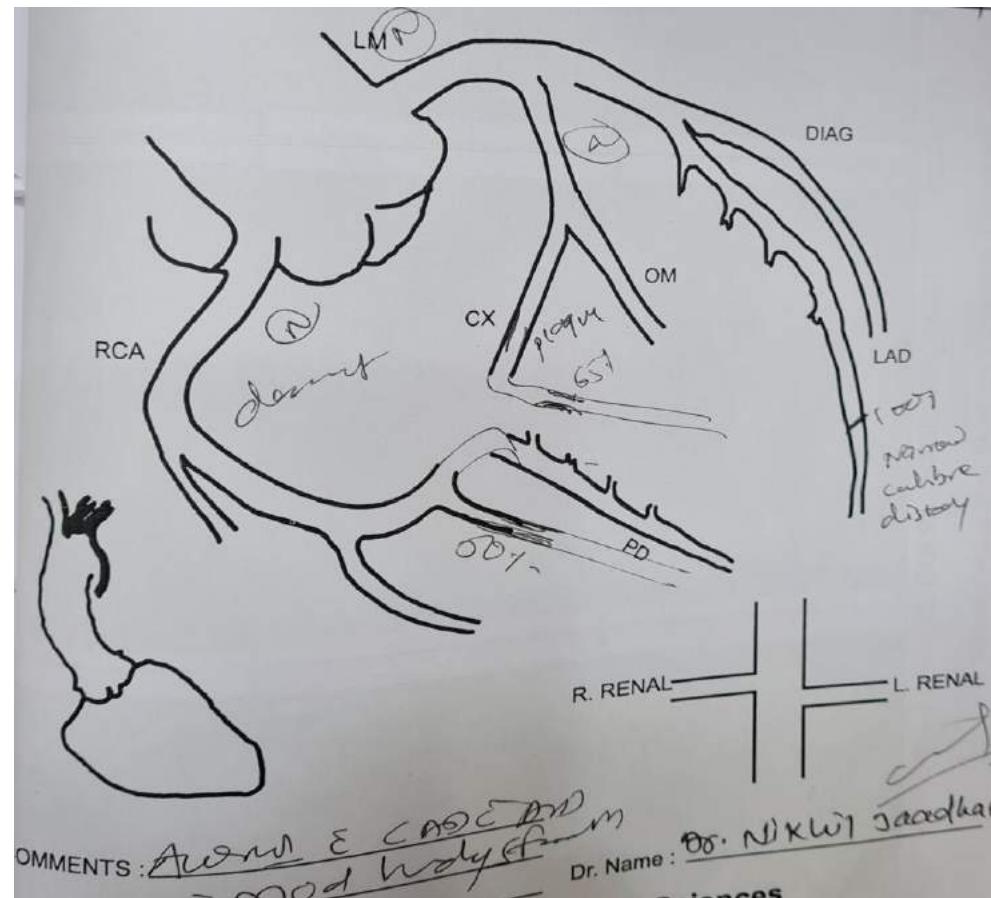
### The MR Angiography findings are suggestive of:

- Atherosclerotic irregular wall in bilateral CCA (left > right).
- A small saccular aneurysm in the region of anterior communicating artery.



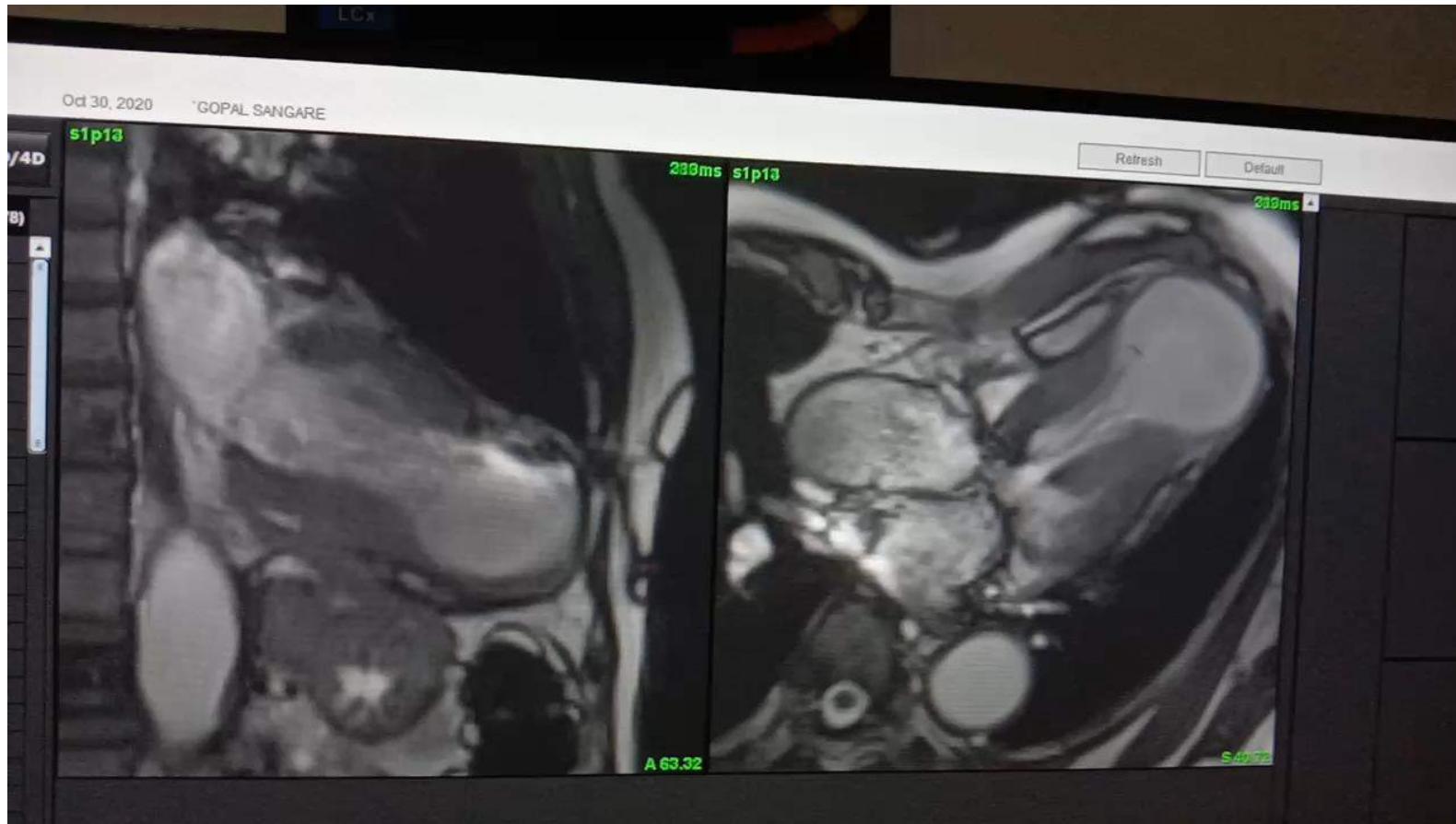
# Coronary angiography

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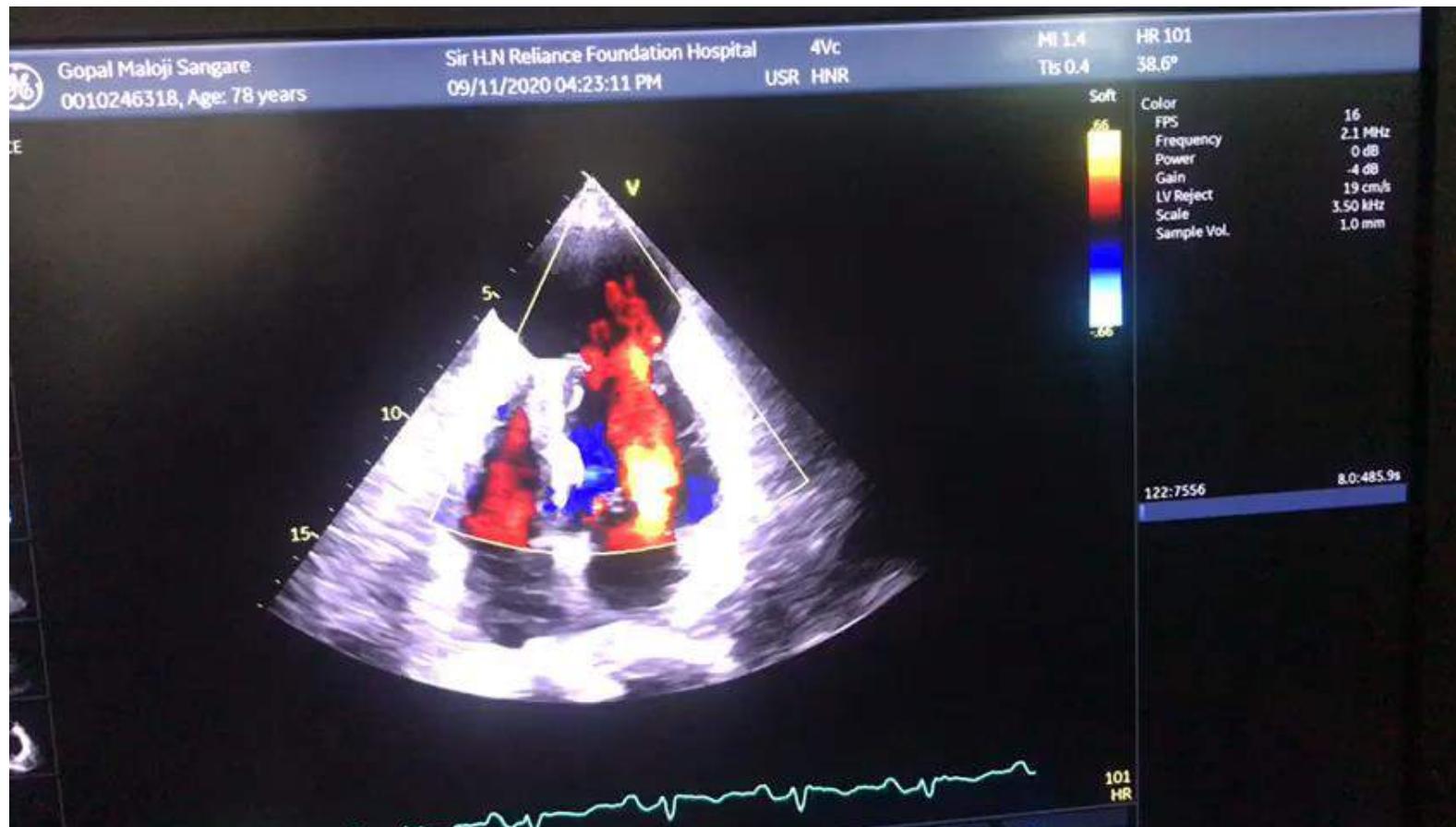
# Cardiac MRI

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# Pre Op 2D Echo

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# Risks Vs Benefits

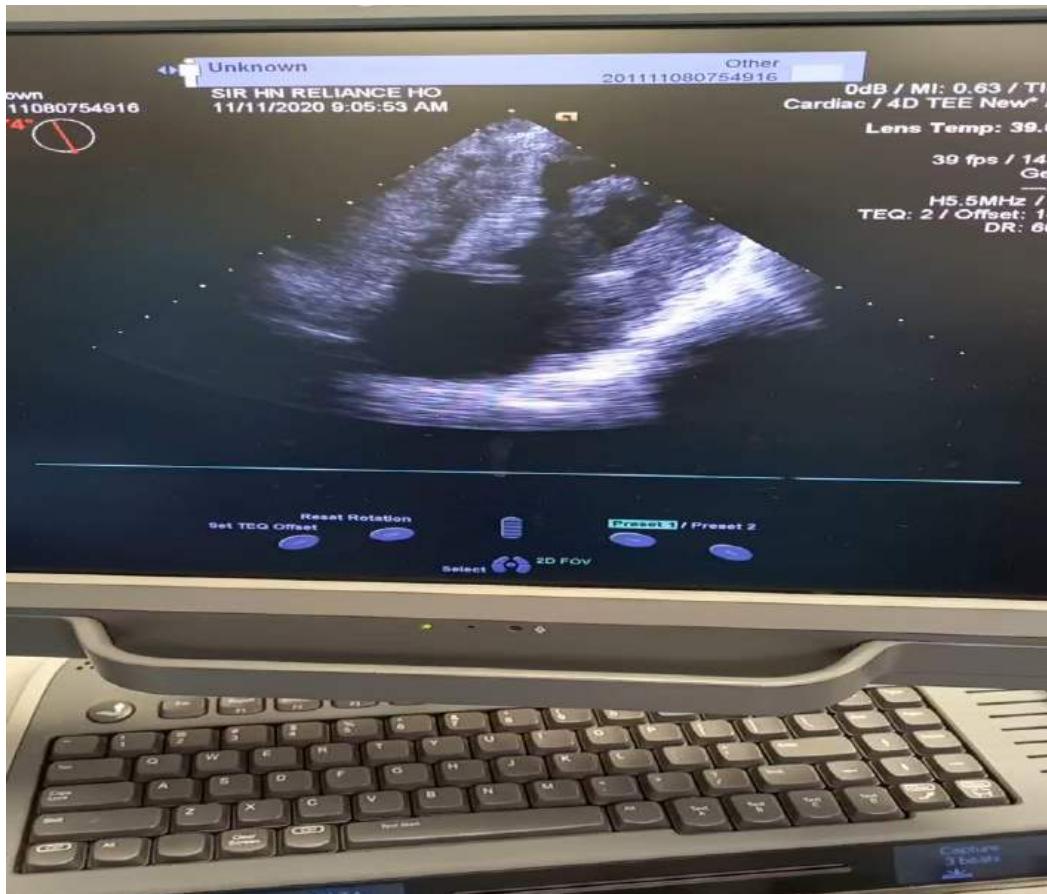
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- **Risks**
- 79 year old
- Recent stroke
- Emphysematous lung disease
- **Benefits**
- To prevent Risk of Rupture of LV
- To prevent Recurrent emboli.....Stroke
- Remodel LV for better function



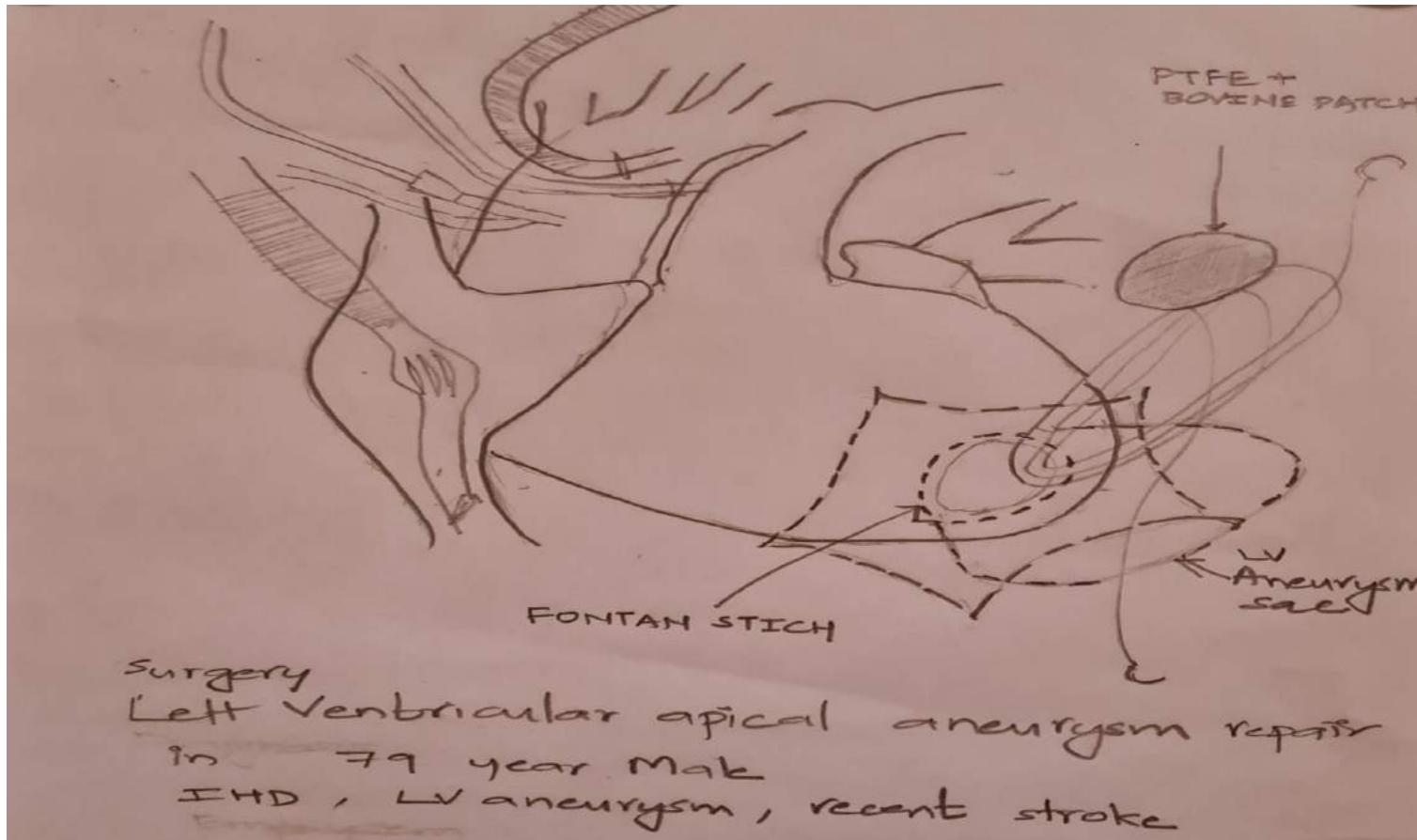
# Intra Op TEE

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# Operative Diagram

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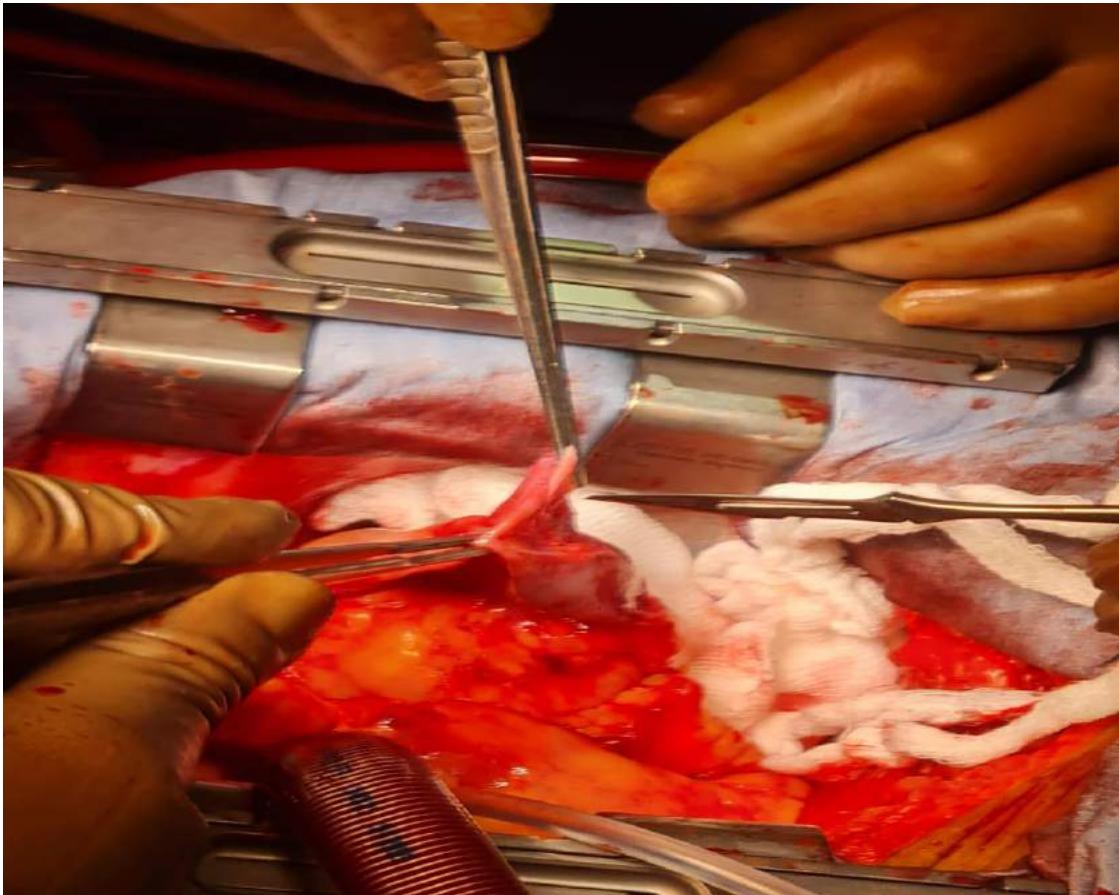
# Intra Op Pericardial Adhesions

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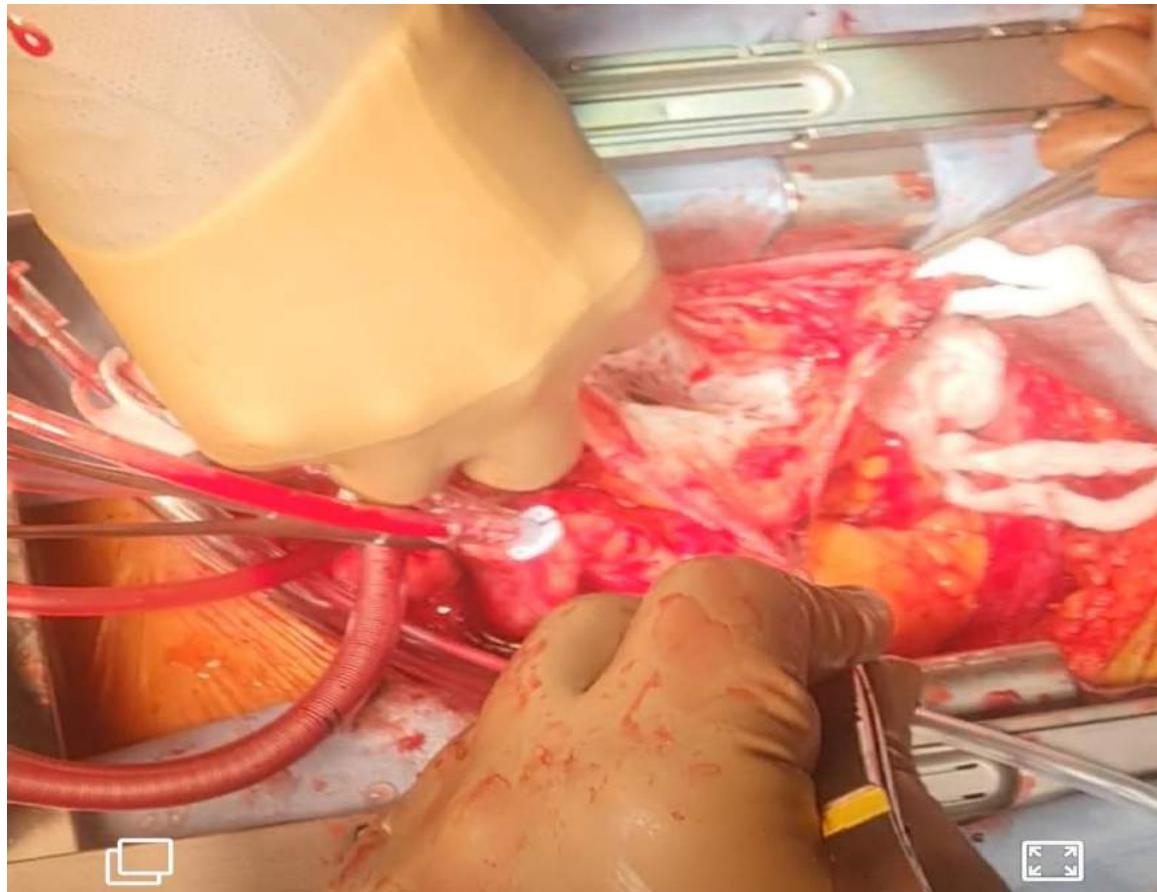
# LV Aneurysmal Sac

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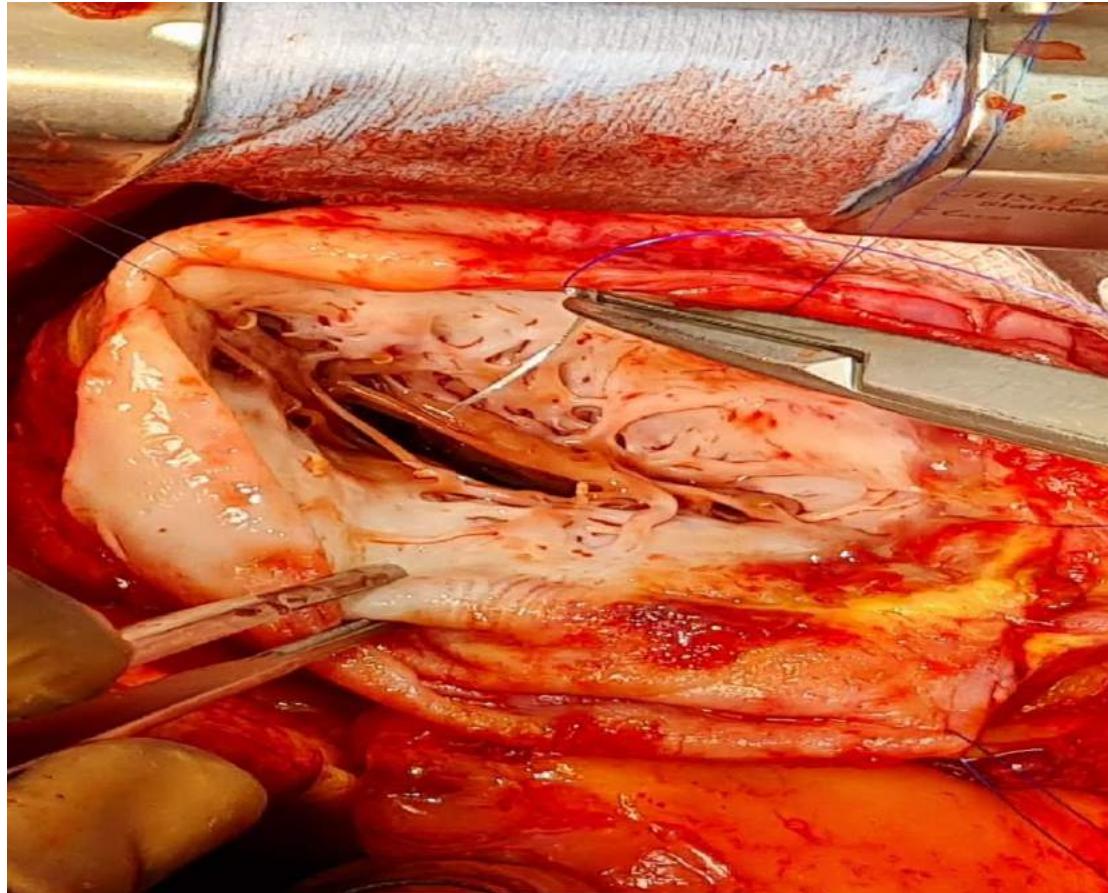
# Inside of LV aneurysm

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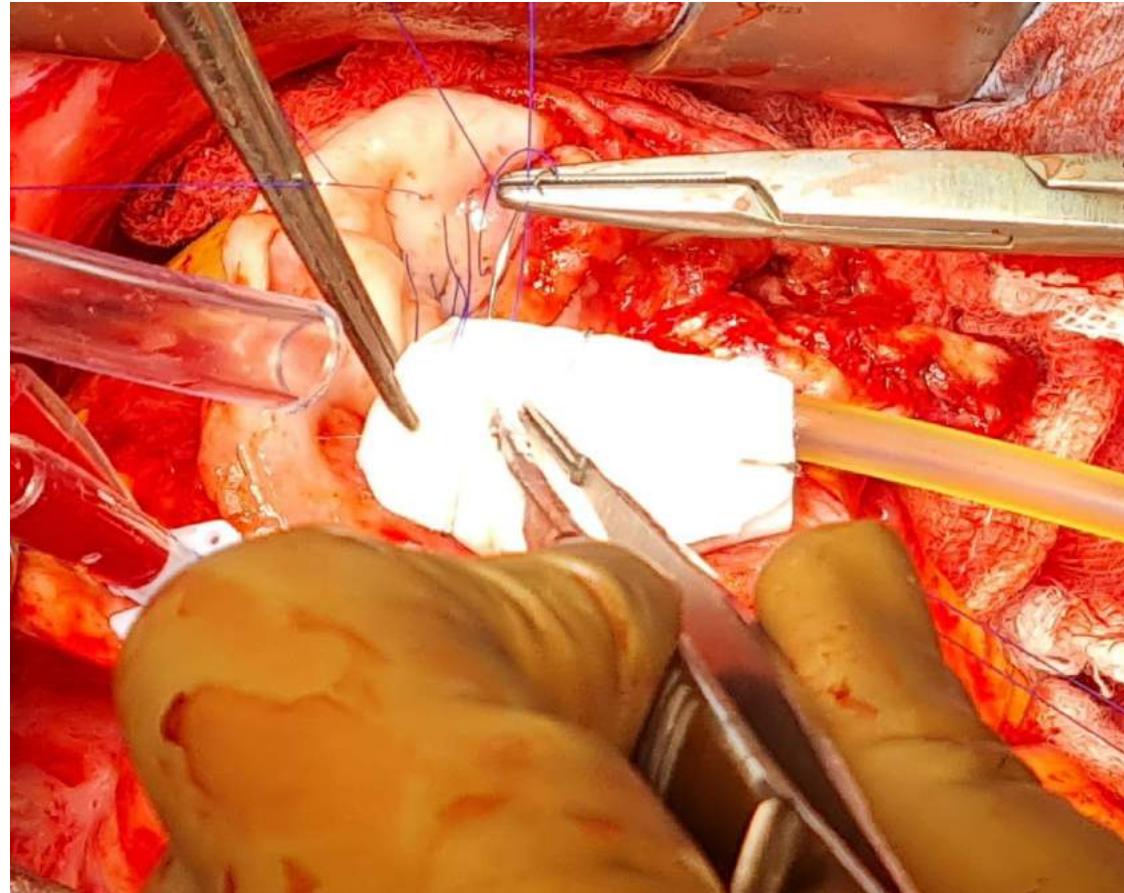
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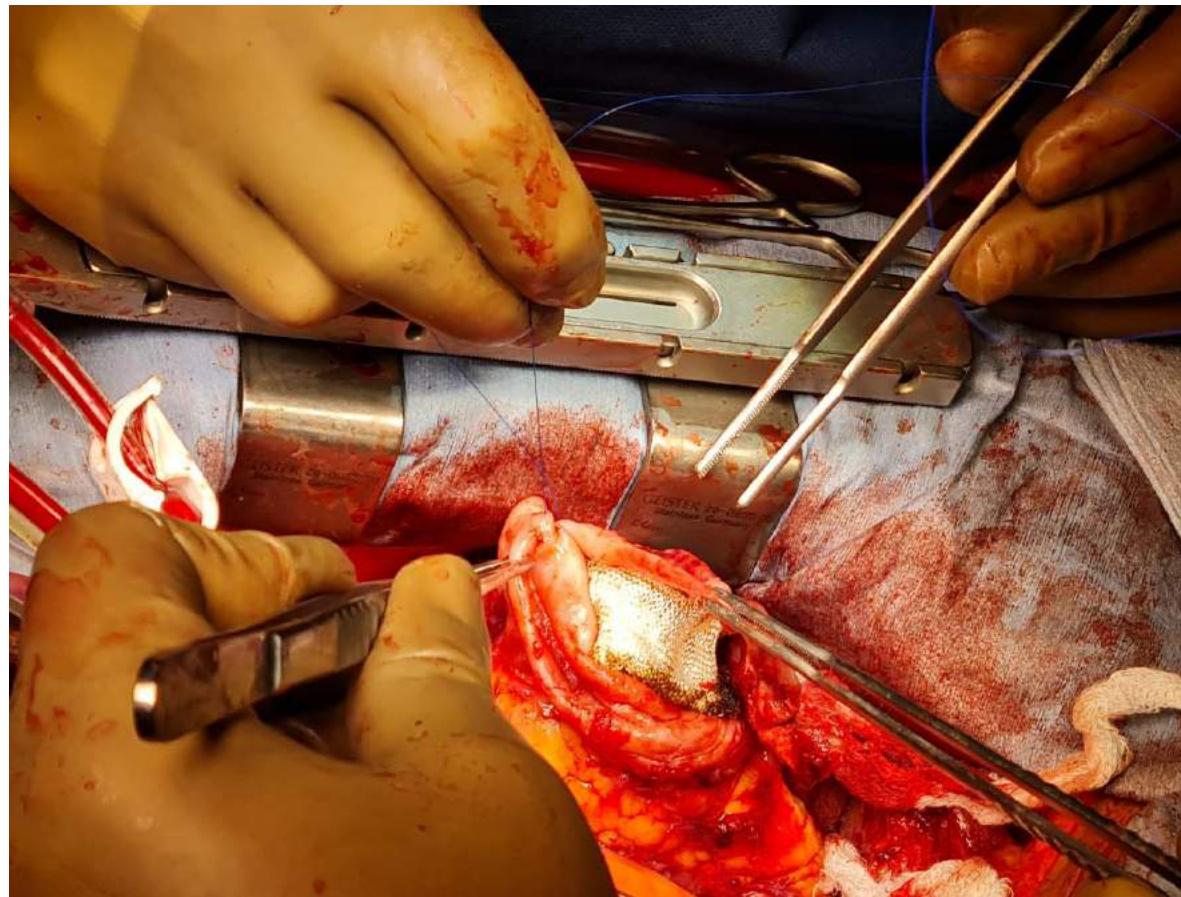
# PTFE and Bovine pericardial patch

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# Double breasting of Sac Closure

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# POD 1

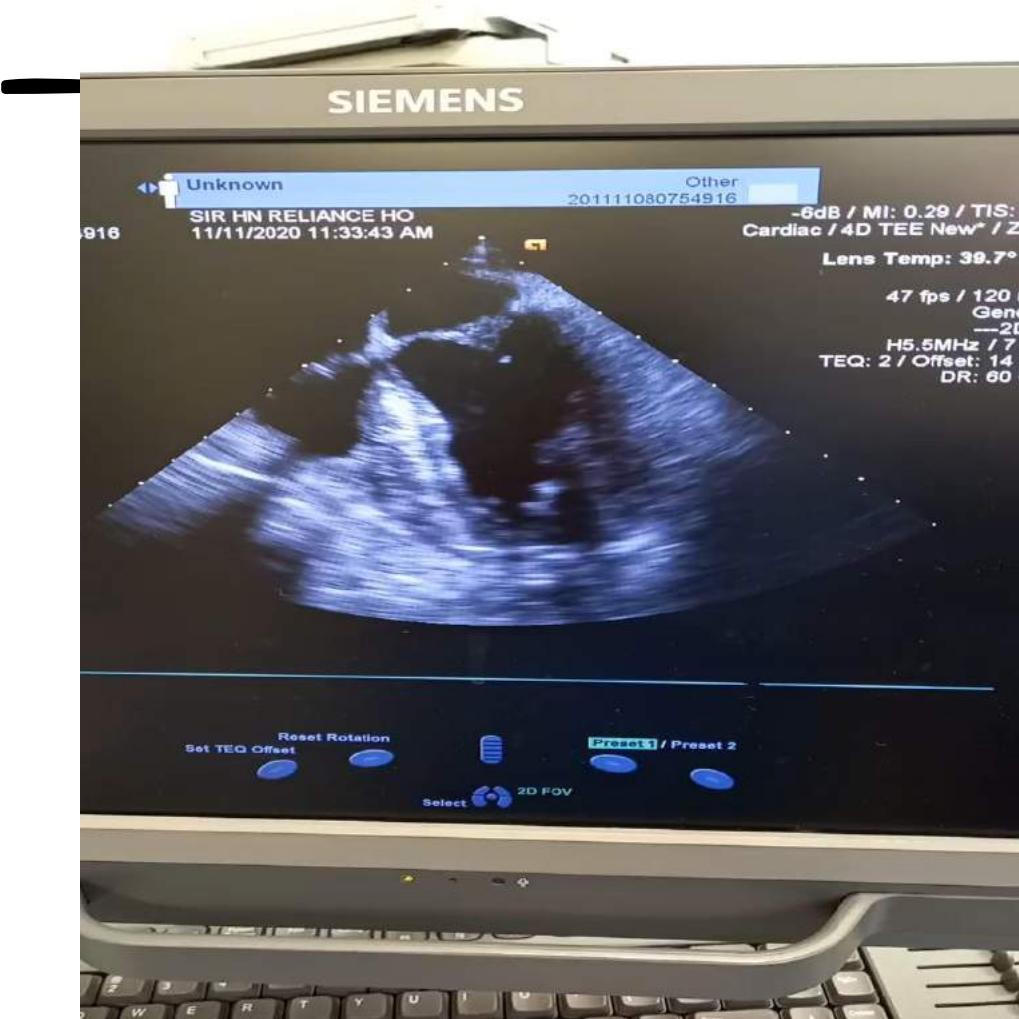
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# POD2



# Post aneurysm repair ECHO



# Thank You

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