

AORTIC CENTER

Complex Aneurysm Care, Above the Belt

When Robert Struck went out to dinner with his fiancée, he never expected the night would end in the Intensive Care Unit at Robert Wood Johnson University Hospital (RWJ). The 58-year-old resident of Kinnelon, went to the emergency department with severe back pain, and found out he had a life-threatening thoraco-abdominal aortic aneurysm with dissection.

Aortic aneurysms are bulges in the wall of the blood vessel (the aorta) that carries blood from the heart to other parts of the body. They happen in the abdomen or the chest and sometimes, as with Mr. Struck, in both places. Aortic aneurysms rarely cause symptoms.

Mr. Struck's pain was from the inner layer of the aorta wall peeling away from the outer layer (dissection). This weakens the aorta, which like aortic aneurysms, can rupture and cause deadly bleeding.

Cardiothoracic surgeon Leonard Y. Lee, MD, FACC, FCCP, and vascular surgeon Saum Rahimi, MD, FACS, worked together through the Aortic Center at RWJ to treat Mr. Struck. "We made sure his aorta wasn't getting worse. Once he was stabilized and relatively pain free, we sent him home to allow the aorta to heal somewhat before surgery," said Dr. Lee, Professor of Surgery, James W. Mackenzie MD Endowed Chair in Surgery, Interim Chair of the Department of Surgery and Chief of the Division of Cardiothoracic Surgery at Rutgers Robert Wood Johnson Medical School.

Dr. Rahimi is Interim Chief of the Division of Vascular Surgery and Assistant Professor of Surgery at Rutgers Robert Wood Johnson Medical School.

Many aortic aneurysms are treated with minimally invasive endovascular procedures. But Mr. Struck needed open surgery. "The aneurysm was complex and involved all of the major blood vessels to the kidney and the intestines. This required an open repair," said Dr. Rahimi.

In June 2014, Drs. Lee and Rahimi removed the aneurysm and repaired the aorta with a graft, fabric sewn from one end of the aorta to the other and into the arteries feeding the kidneys, liver, and intestines. This required an incision that started between Mr. Struck's shoulder blades, then went down his back and across his rib cage to his abdomen. To protect Mr. Struck's organs and spinal cord during the procedure, the surgeons used a heart-lung machine and cooled his body to 90 degrees. "This is about as complex as it gets in cardiovascular disease, and one of the biggest operations you can have," said Dr. Lee.

"I'm quite fortunate," said Mr. Struck. "If it wasn't for Dr. Lee and the other doctors, I wouldn't be here today." He also noted the excellent care and coordination provided by the RWJ nursing staff. About three months after the surgery, Mr. Struck returned to work as a production mechanic for Coca-Cola. He and his fiancée were making final plans for their wedding in October and fly-fishing together in local trout streams.

Vascular and cardiothoracic surgeons in RWJ's Aortic Center are leaders in repairing the aorta, aneurysms, and dissections using endovascular and open procedures.

Visit www.rwjuh.edu/aorticcenter or call 1-844-RWJ-AORTA.