Successful prolonged arrest with antegrade cerebral perfusion – a case report

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We present a case of a 60 year old male who was admitted to our hospital with re-aortic dissection from the arcus, into the left subclavian, through the descending aorta and continuing into both iliac arteries. CT-scan showed adissection at basis cranii bilat, ectasia of both carotids and the left vertebral artery. The operation was carried out using deep hypothermia and circulatory arrest. Arrest time was 140 minutes, of these 126 minutes with antegrade cerebral perfusion. Total CPB time 289 minutes, cross clamp time 168 minutes. The patient was weaned from CPB without problems, and on post-op day one he was awake and alert, mobilized to a chair. The patient had no neurological dysfunction, and he also had normal bowel function.

On day seven he developed high temperature and developed a sternal infection for which he received prolonged treatment. Two months after surgery he was discharged to the referring hospital.

Keywords: CPB, DHCA, antegrade cerebral perfusion