An Undescribed Pathophysiologic Mechanism: Redissection of the Remaining Adventitia of a False Lumen

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A patient was admitted to our hospital for acute back pain 12 years after aortic root and ascending replacement because of acute type A aortic dissection. Computed tomography angiography showed a new dissection of the remaining adventitial layer of the false lumen. The computed tomography scans show the last follow-up before the acute event (Fig 1A) as well as the new primary entry tear originating from the remaining adventitial scar tissue hours after the acute event (Fig 1B).

The patient underwent type II extent thoracoabdominal replacement [1]. This new mechanism of a new dissection in an already chronically dissected aorta has not yet been described.

Reference