

# Surgery for Abdominal Aortic Aneurysm



During surgery for abdominal aortic aneurysm (AAA), the weakened aortic wall is replaced with a hollow manmade tube (graft).

## Reaching the aneurysm

The aorta can be reached through open surgery. Or a less invasive endovascular procedure may be done. Your surgeon will choose the best approach for you.

## Open surgery

An incision is made in your abdomen. Once inside, your surgeon gently moves aside your organs to reach the damaged section of the aorta.

## Endovascular procedure

Near your groin, the surgeon makes 2 small cuts (incisions). Then they thread a thin, flexible tube (catheter) into the artery at the incision. The surgeon places a graft inside the catheter and guides it toward the damaged part of the aorta.

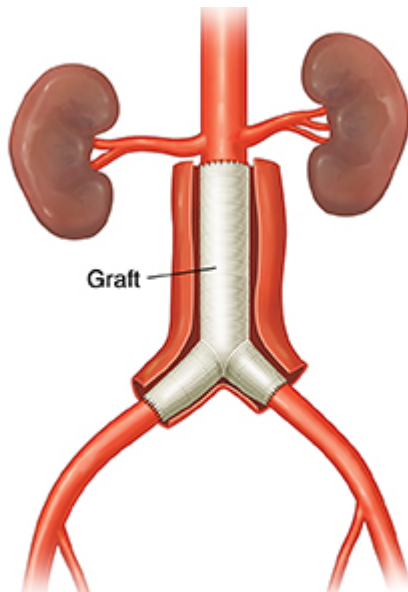
## Placing the graft

The goal is to safely route blood past the aneurysm.

## During open surgery

Here is what to expect:

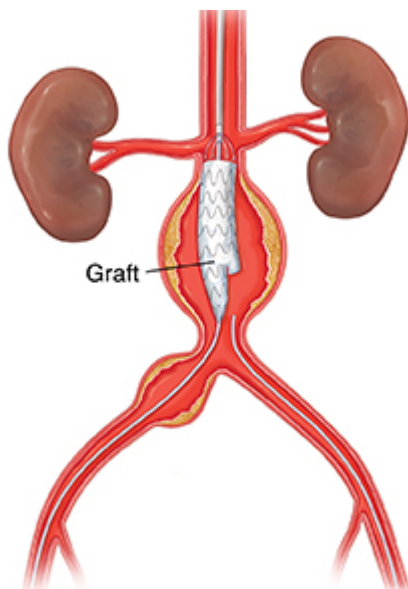
- The aneurysm is opened and cleaned of any blood clots.
- The graft is sewn to the aorta.
- The wall of the aorta is wrapped around the graft to protect it. The wall is then sewn up.
- The incision site is closed with stitches or staples.



## During an endovascular procedure

Here is what to expect:

- Watching the catheter on a video monitor, the surgeon places a catheter in the best position. This position is confirmed by a dye study (angiogram).
- The surgeon guides the graft through the catheter and expands it so blood can flow through it.
- The blood is now re-routed through the graft and no longer fills the aneurysm.
- The graft is attached inside the artery. It's held in place with metal springs (stents), hooks, or pins.
- The catheter is removed. The incision sites are closed with stitches or staples.



## Risks and possible complications

Here are potential problems to be aware of:

- Infection

- Blood clots in legs
- Bleeding
- Kidney failure
- Respiratory failure
- Injury to the colon's blood supply
- Erectile dysfunction
- Spinal cord injury
- Heart attack, stroke, or death

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