The use of fibrin and gelatin fixation to repair a kinked internal carotid artery in carotid endarterectomy.

Authors: Kubota H., Sanada Y., Tanikawa R., Kato A.

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Abstract:

Background: The kinking of the internal carotid artery (ICA) after final closure in carotid endarterectomy (CEA) is thought to be uncommon. When it occurs, it is mandatory to reconstruct ICA to preserve normal blood flow. We herein present a case in which a fixation technique was applied to repair an ICA that became kinked during CEA. Case Description: A 68-year-old man presented with cerebral infarction due to an artery-to-artery embolism from the right cervical ICA stenosis. CEA was performed 12 days after admission. After final closure, a distal portion of ICA was found to have been kinked following plaque resection in CEA procedure. Fixation with fibrin glue and gelatin was used to reinforce the arterial wall and repair the kink. Postoperative magnetic resonance angiography demonstrated the release of the kink in ICA. Conclusion: Fixation with fibrin and gelatin is a salvage armamentarium that can be considered in CEA for the repair of kinked or tortuous ICA.