

Arterial Cannulation Strategy for Type A Aortic Dissection: A Network Meta-Analysis

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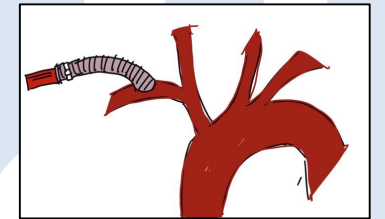
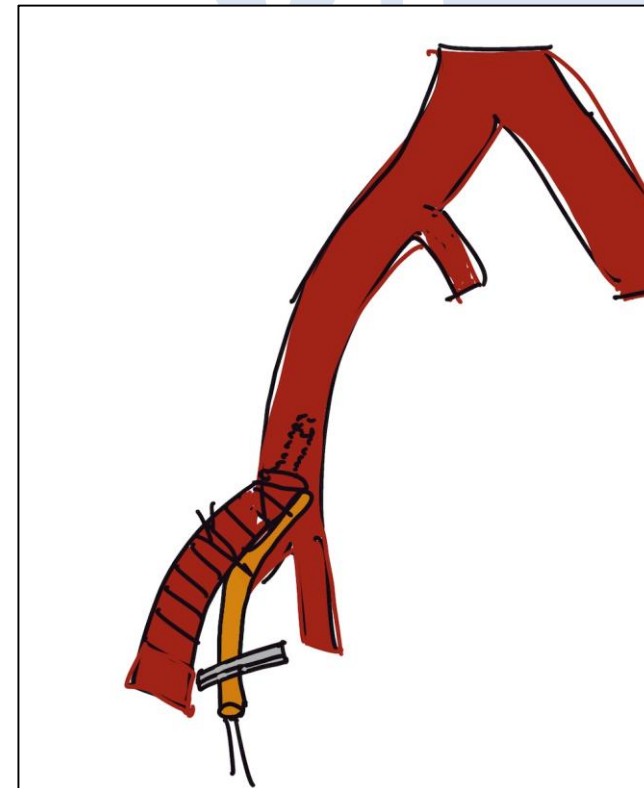
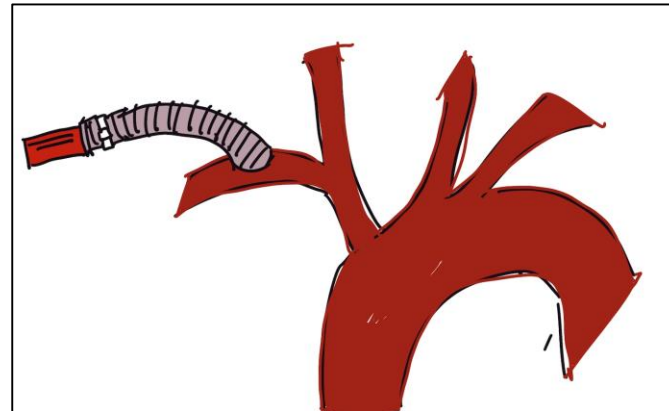
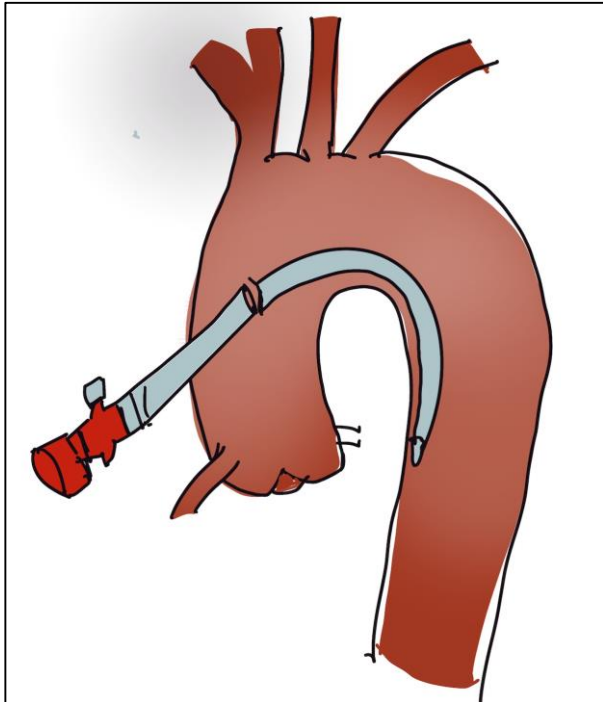
Shinichi Fukuhara: Department of Cardiac Surgery, University of Michigan

Disclosures

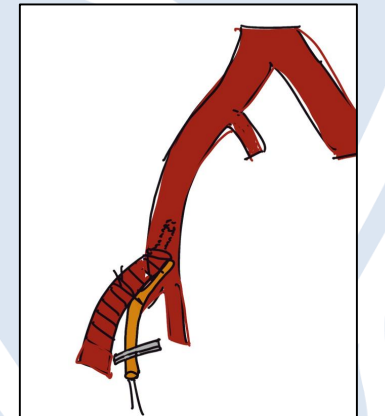
- **Dr. Fukuhara serves as a consultant and research investigator for Terumo Aortic, Artivion and Medtronic Inc.**
- **Others have nothing to disclose.**

Introduction

- Cannulation strategy for acute type A dissection is controversial



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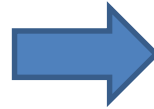


Methods

Network Meta-Analysis

Literature search

- Acute type A dissection
- Cannulation strategies
- Aortic, axillary, femoral or DAC (dual arterial cannulation)



Outcomes of interest

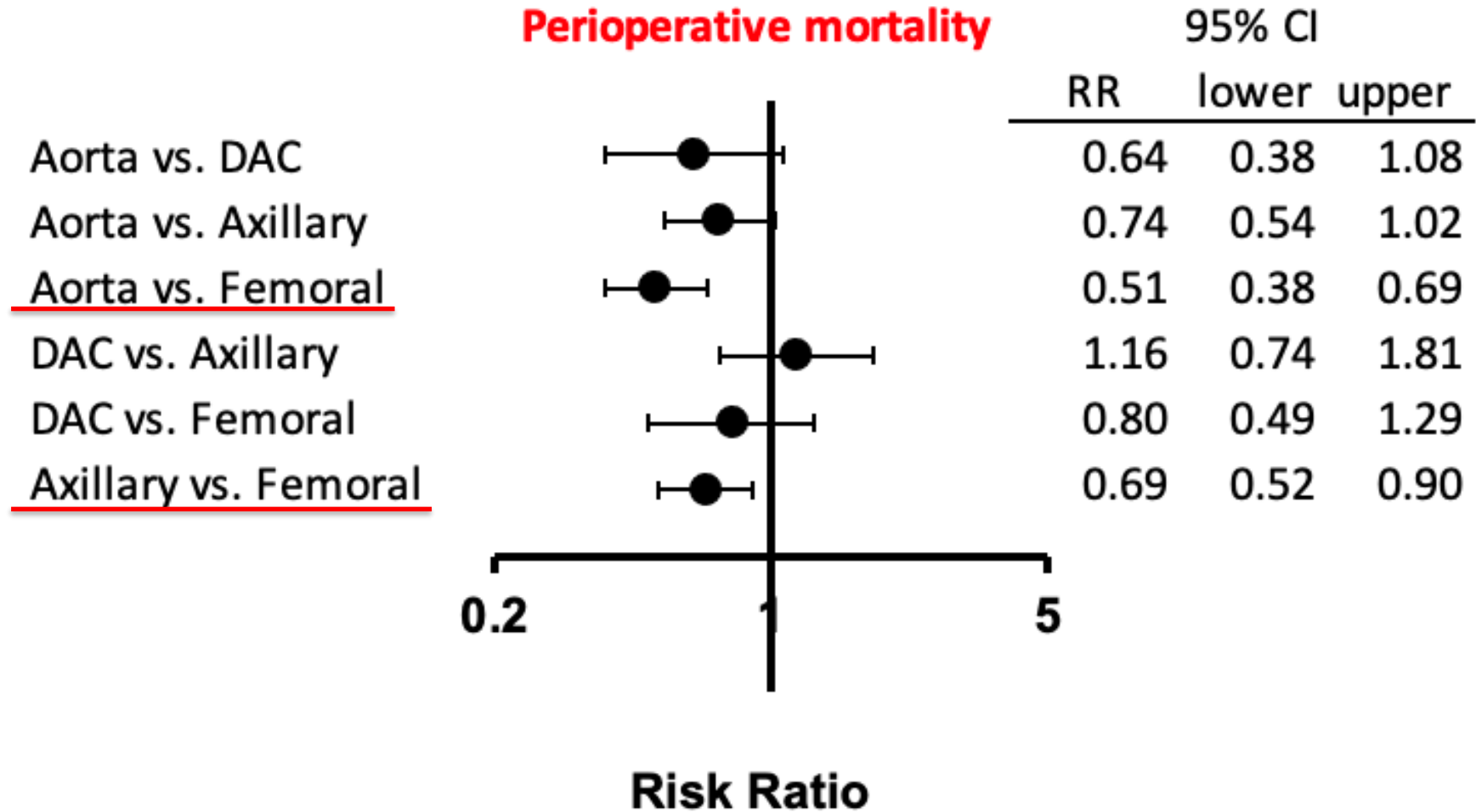
- Perioperative mortality
- Stroke
- Spinal cord injury
- Reoperation for bleeding
- Renal failure requiring HD
- Visceral malperfusion

Results

Author	Year	Adjustment	Patients (n)	Aortic (n)	DAC (n)	Axilla (n)	Femoral (n)
Pasic	2003	None	70	N/A	N/A	20	50
Reuthebuch	2004	None	122	N/A	N/A	62	60
Etz	2008	None	869	157	N/A	451	261
Kamiya	2009	None	235	82	N/A	N/A	153
Haldenwang	2012	None	122	15	N/A	92	15
Lee	2012	None	111	N/A	N/A	58	53
Schurr	2013	None	290	N/A	N/A	114	176
Klotz	2015	None	177	94	N/A	N/A	83
Hsu	2016	None	51	N/A	N/A	25	26
Klotz	2016	None	235	127	N/A	N/A	108
Stamou	2018	None	305	N/A	N/A	107	198
Gegouskov	2018	None	117	85	N/A	N/A	32
Ma	2018	None	62	33	N/A	N/A	29
Kreibich	2019	IPW	584	355	N/A	101	128
Kusadokoro	2020	PSM	805	52	104	104	104
Ram	2019	None	135	N/A	N/A	51	84
Rosinski	2019	None	775	65	N/A	617	93
Gokalp	2020	None	52	N/A	N/A	30	22
Tong	2021	PSM	646	N/A	N/A	85	85
Zhang	2021	PSM	231	N/A	154	77	N/A
Chang	2022	PSM	776	N/A	388	388	N/A
Liang	2022	IPW	488	N/A	171	217	100
Li	2022	PSM	274	N/A	137	137	N/A
Yousef	2022	Cox	577	490	N/A	54	33
Lemaire	2023	None	135	16	N/A	21	98
Juvonen	2023	PSM	1228	614	N/A	614	N/A
Total			9742	954	850	3425	1991

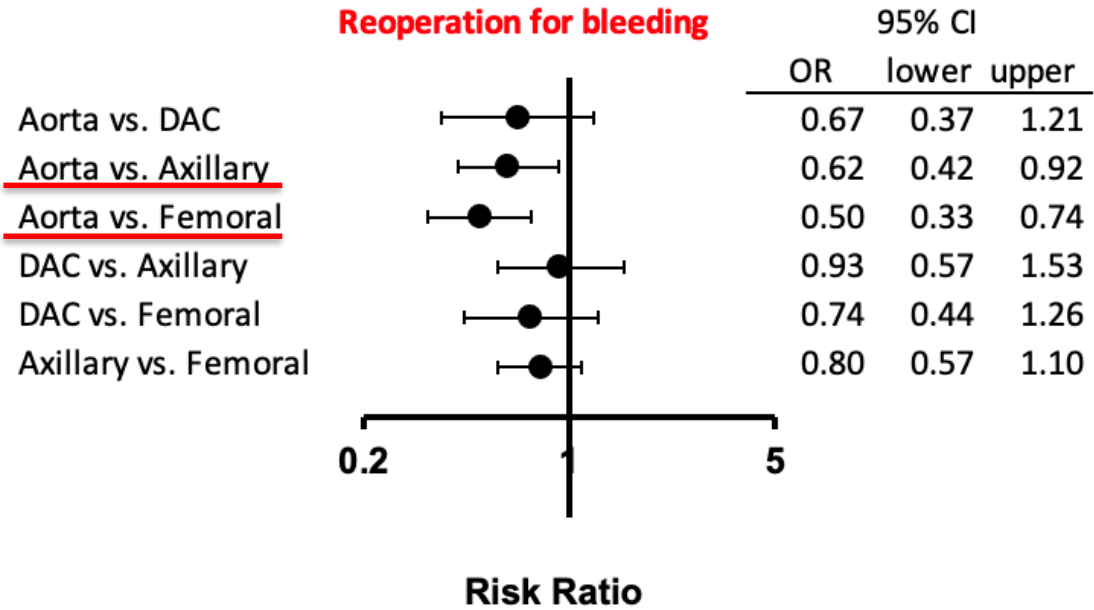
DAC: dual arterial cannulation, IPW: inverse probability weighting, PSM: propensity-score matched

Preoperative outcome

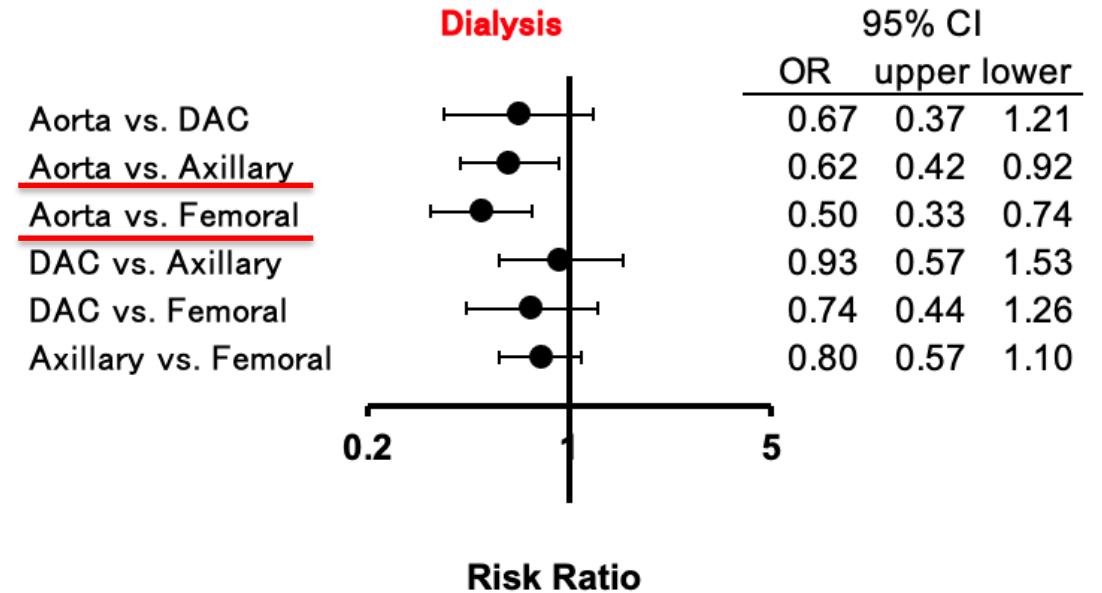


Preoperative outcome

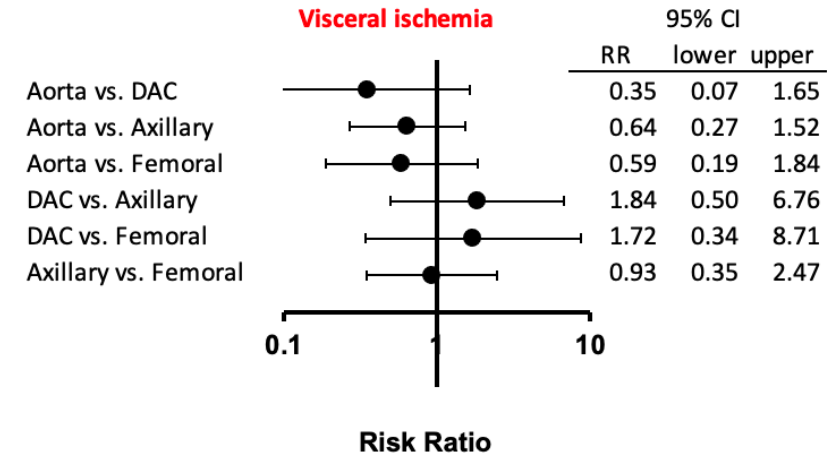
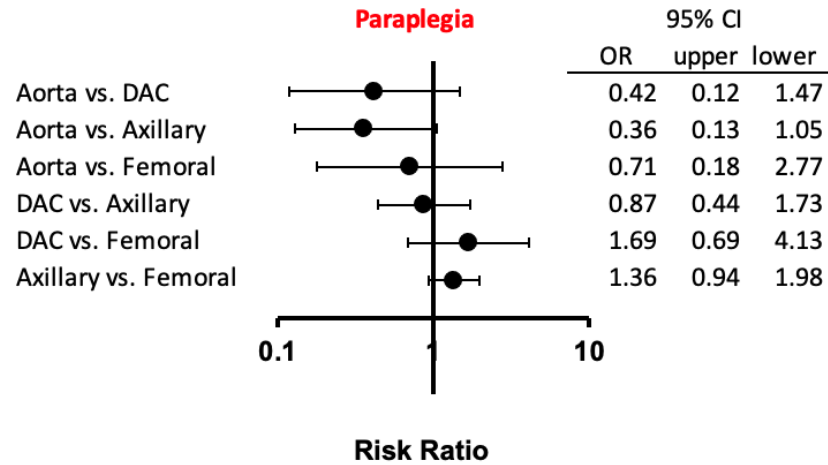
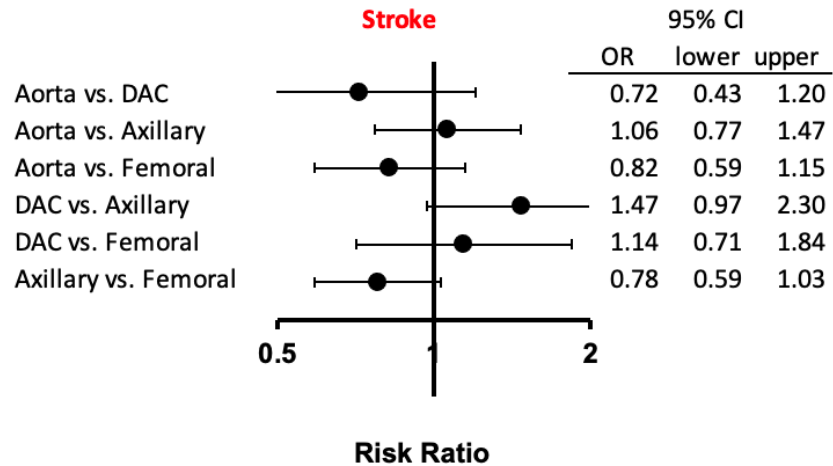
Reoperation for bleeding



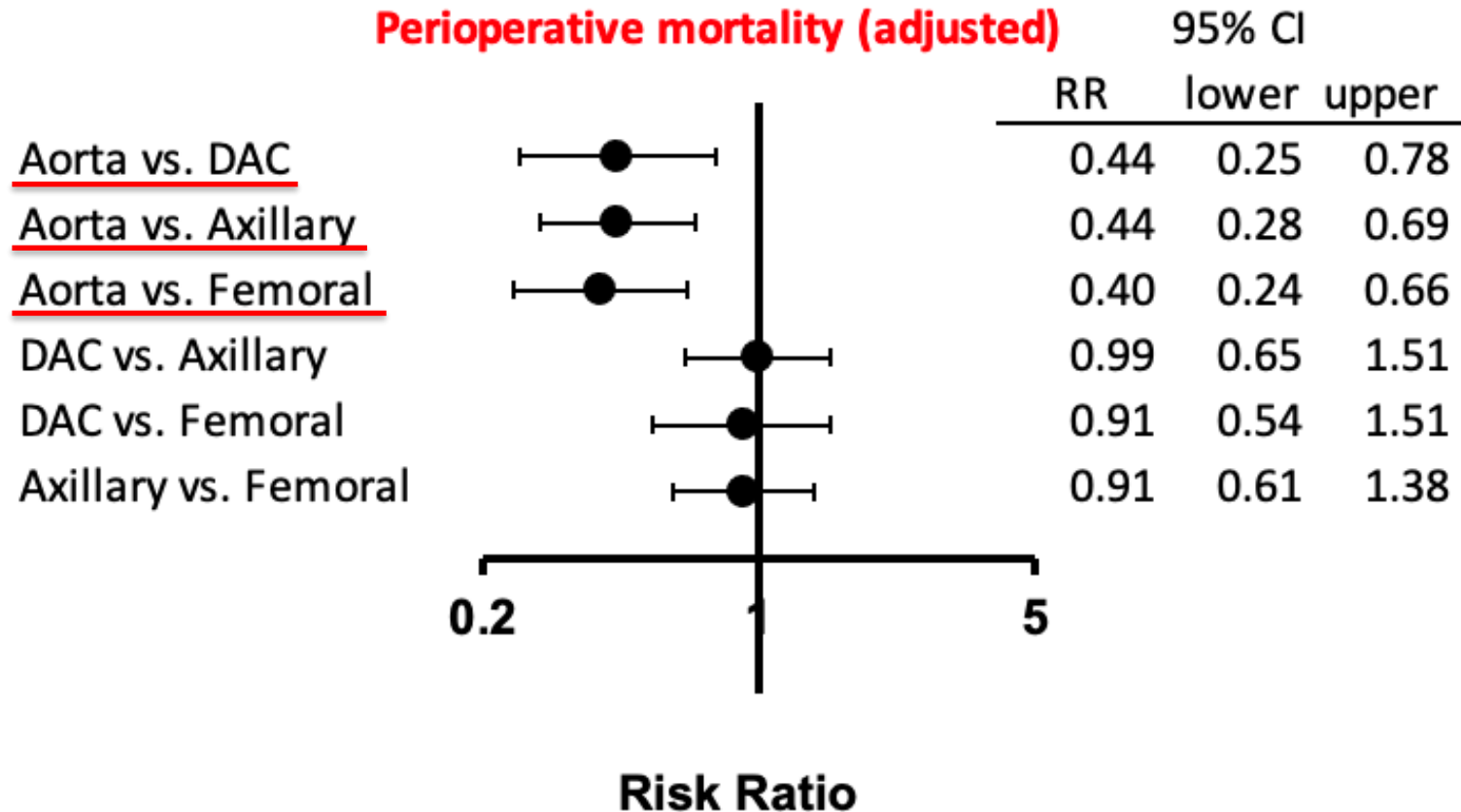
Dialysis



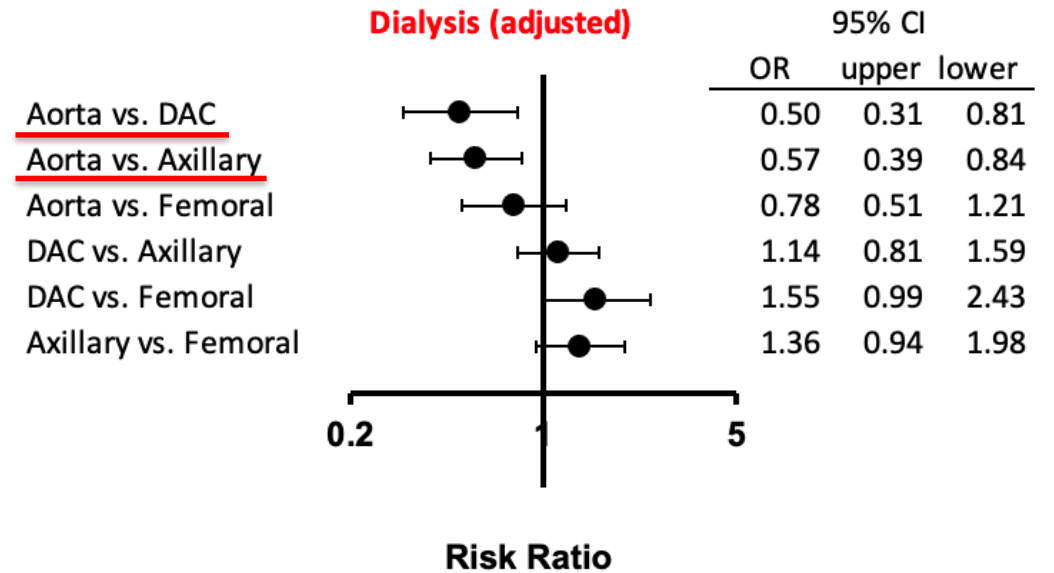
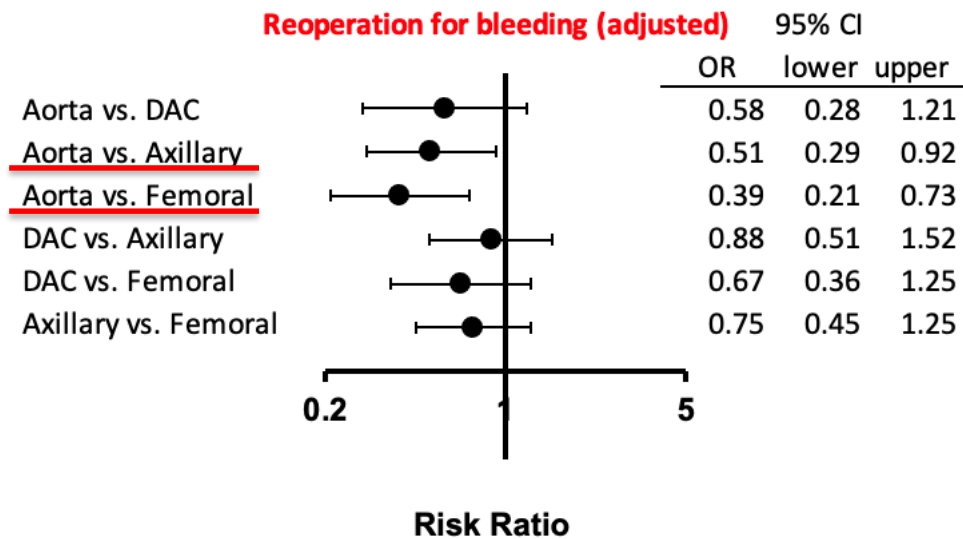
Preoperative outcome



Adjusted outcome only

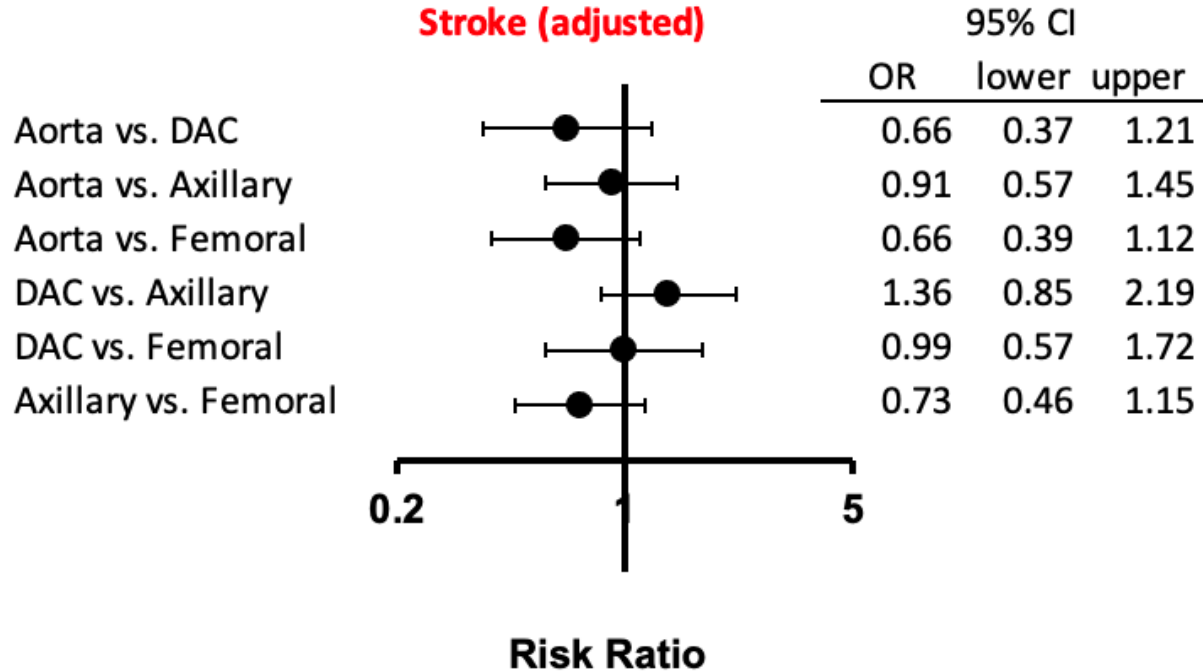


Adjusted outcome only

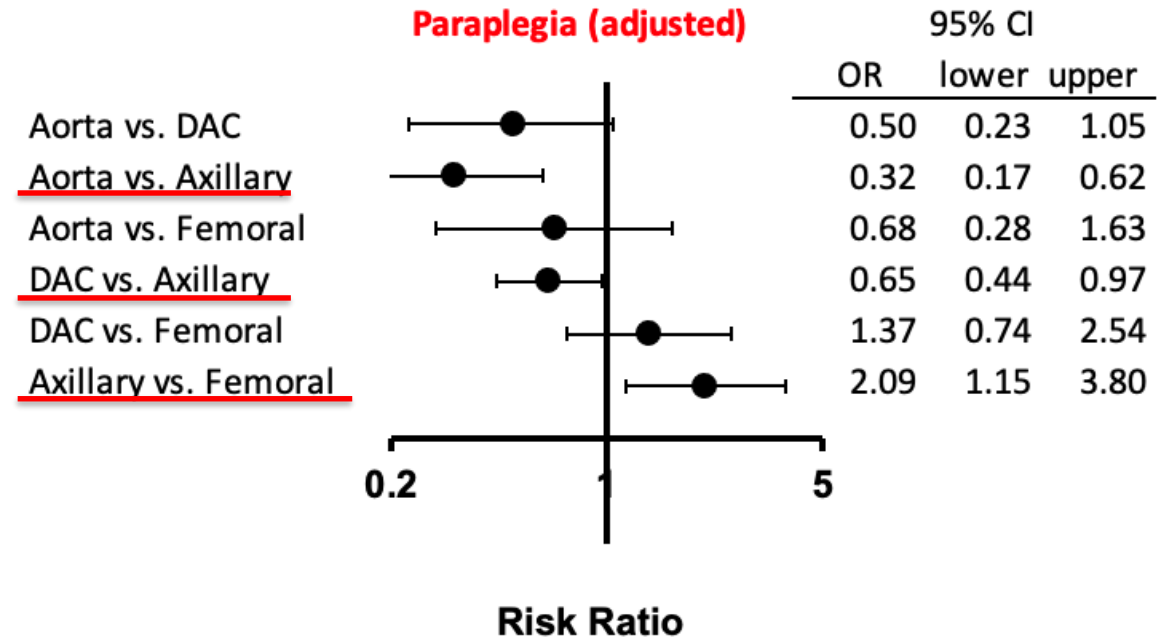


Adjusted outcome only

Stroke (adjusted)



Paraplegia (adjusted)



Conclusion

- **Ascending aortic cannulation for acute type A cannulation might be associated with improved perioperative outcomes compared with other cannulation strategies**

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