

Ortner's syndrome secondary to penetrating aortic arch ulcer treated with TEVAR

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Disclosure

Speaker name: Pablo Aragón

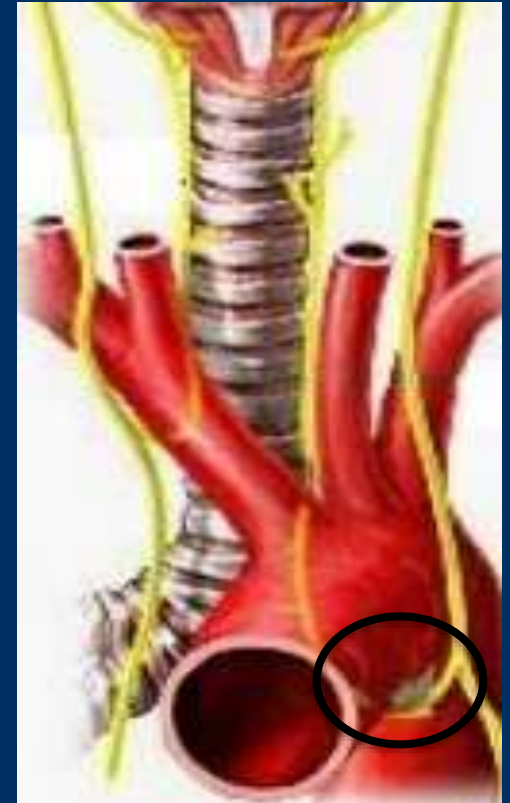
I have the following potential conflicts of interest to report:

- Consulting
- Employment in industry
- Stockholder of a healthcare company
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- Other(s)

- I do not have any potential conflict of interest

INTRODUCTION

- Ortner's syndrome: vocal cord paralysis caused by left recurrent laryngeal nerve (LRLN) compression with cardiovascular origin.
- LRLN provides ipsilateral motor innervation to the phonatory muscles.
- Hoarseness of voice
- Uncommon cause : a pseudoaneurysm secondary to a penetrating aortic arch ulcer.



CLINICAL CASE

- 80 years old male
- PA:
 - Hypertensive
 - Ex-smoker
- 3 months evolution hoarseness of voice
- No other signs or symptoms.
- ORL exploration : left vocal cord paralysis at paramedian position

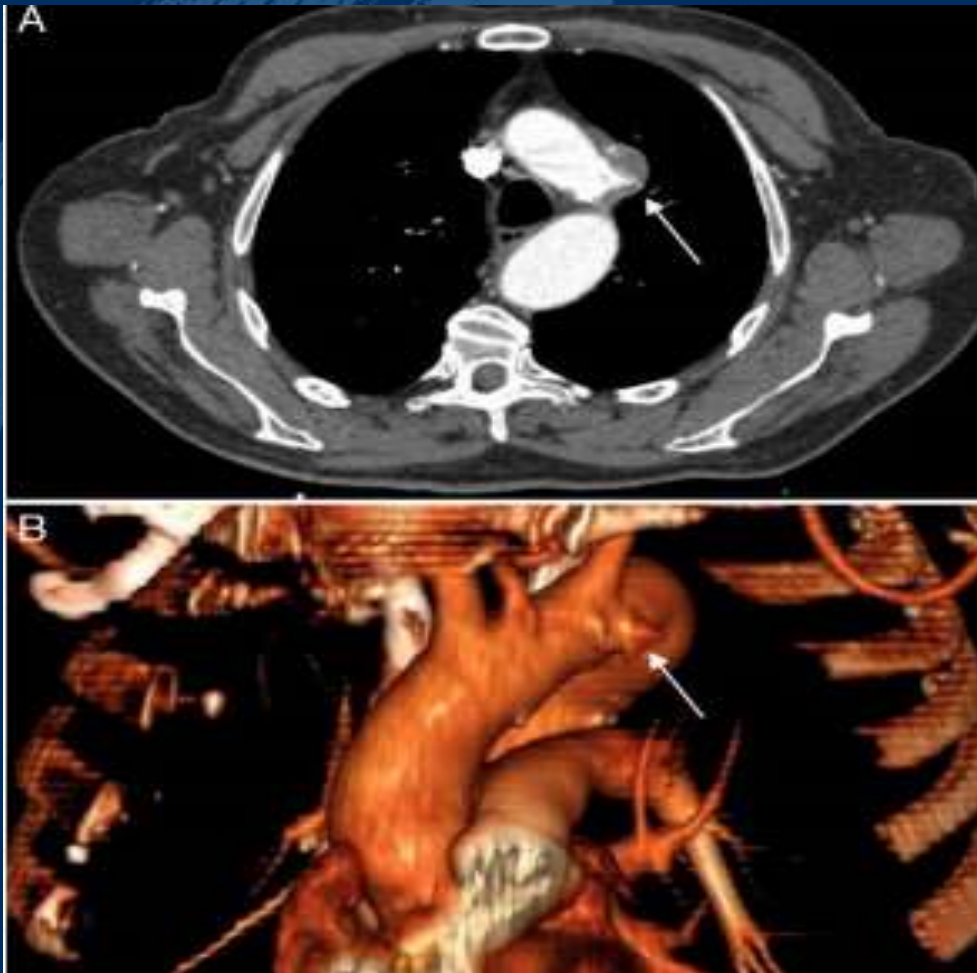
CLINICAL CASE: DIAGNOSTIC



ORL exploration

Left vocal cord
paralysis at
paramedian
position.

CLINICAL CASE: DIAGNOSTIC



Cervical and thoracic

Angio-CT :

Penetrating aortic
arch ulcer with 5 cm
diameter

pseudoaneurysm

CLINICAL CASE. TREATMENT

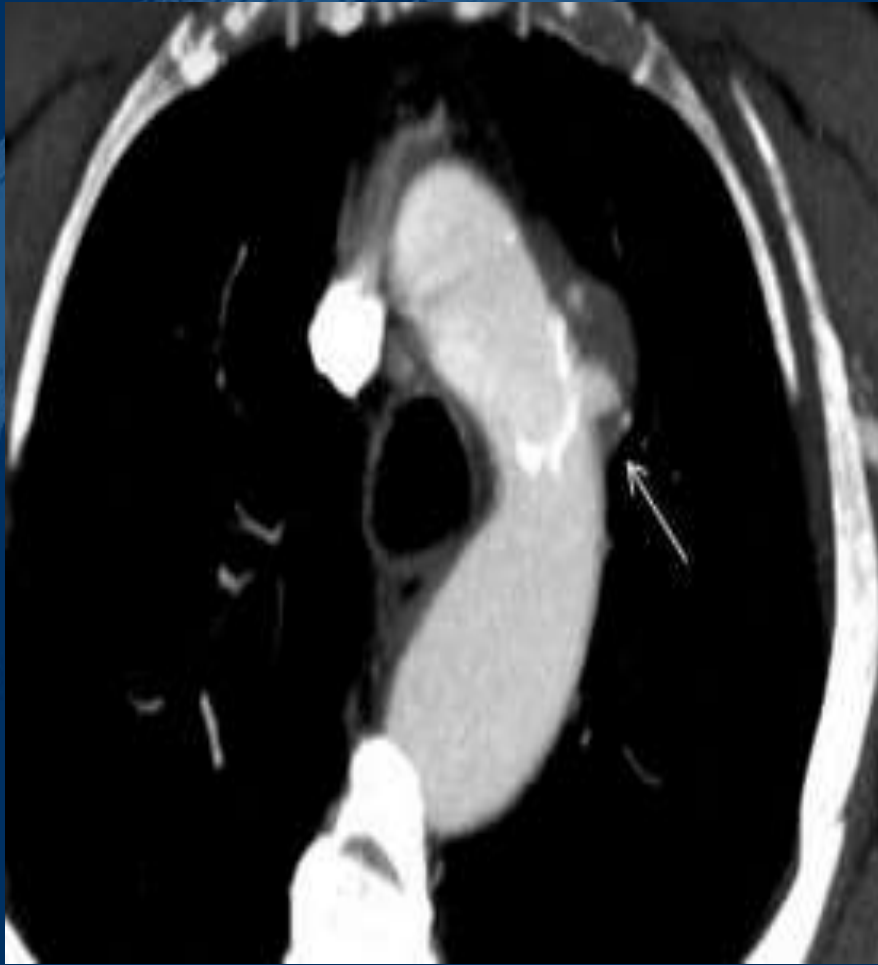
Endovascular reparation was decided by
TEVAR treatment



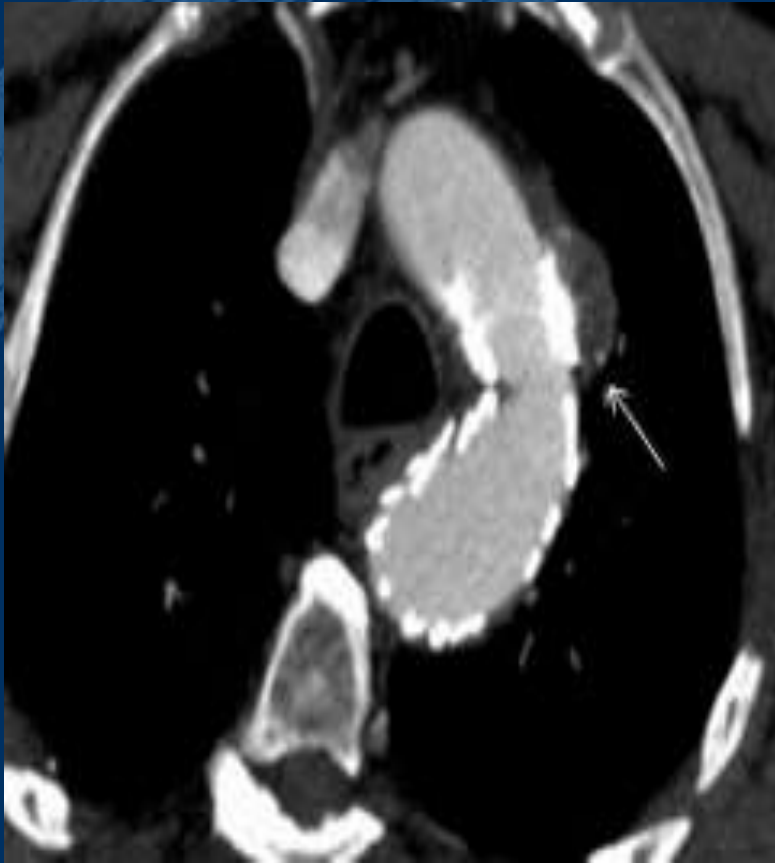
RELAY Plus Endograft
(Bolton Medical)
120 x 30 mm



CLINICAL CASE. TREATMENT



CINICAL CASE . RESULTS



- I. Next Angio-CT controls (6-12 months) showed no endoleaks, complete exclusion of the ulcer and pseudoaneurysm, and left subclavian artery patency. Shrinkage pseudaneurysm sac.
- II. Symptoms (hoarseness of voice) disappeared completely 14 months after the intervention.

DISCUSSION

- Very few Ortner's syndrome cases are described secondary to penetrating thoracic aortic ulcer.
- Other vascular causes of LRLN paralysis : left atrium dilatation, mitral valve disease, aortic arch aneurysm, aberrant subclavian artery, aortic dissection, pulmonary hypertension and ductus arteriosus persistence.
- Neoplastic or inflammatory lesions are the most common cause of left recurrent paralysis but we must remember also to evaluate aorta and mediastinal
- TEVAR could be a definitive treatment for both: penetrating ulcer and the hoarseness of voice ,in these cases.

LINC

THANK YOU SO MUCH



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