



AB037. SOH22ABS124. Isolated internal iliac artery aneurysm: two case reports and systematic review

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Background: Isolated internal iliac artery aneurysms (IIAAs) are rare and their optimal treatment strategy is not well established.

Methods: We present two cases of IIAAs along with a systemic review.

Results: The first case presents an incidental finding of an isolated 6.8×4.8×4.6 cm IIAA. Treatment was by an endovascular approach with an Amplatzer-Plug inserted in the proximal neck of the IIAA and a stent-graft insertion from the proximal common iliac artery to the external iliac artery (EIA). In the second case, pre-operative angiography revealed recurrence of a ureteric-IIA fistula and persistent flow in a previously embolized IIAA. A stent-graft limb was used to exclude the IIA. A total of 303 publications were identified, with 78 included in the final review. Duplicate reports, and reports that described patients with concomitant AAAs, infected or traumatic aneurysms or children were all excluded. In total 162 patients (175 IIAAs) were identified. Abdominal pain was the most common presentation (31 cases) followed by urological symptoms (24 cases). Rupture was reported in 44 cases (27%) with a mean aneurysm diameter at rupture of 7.5 cm. Fifty-seven cases had open surgery, while 36 cases had embolization and coverage with a stent. Death was reported in 18 cases. Four deaths were pre-operative. The remaining 14 were

during or after open repair. There were no deaths after endovascular repair.

Conclusions: The management of IIAA's remains challenging due to their rarity, their often insidious presentation and the difficulties associated with their anatomical exposure. Endovascular treatment with coiling and a stent-graft is a safe and effective treatment method.

Keywords: Aneurysm rupture; endovascular repair; internal iliac artery aneurysm; hypogastric artery aneurysm; systematic review

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Footnote

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