WORSENING OF CHRONIC AORTIC DISSECTION IN A PATIENT WITH MARFAN SYNDROME: 10 YEARS AFTER SURGERY

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ABSTRACT None

KEYWORDS Chronic aortic dissection, Marfan syndrome

Introduction
Marfan syndrome is a hereditary disorder affecting the connective tissue caused by a fibrillin-1 (FBN1) gene mutation. Aortic root dilatation is the most frequent cardiovascular manifestation, and its complications, including aortic regurgitation, dissection, and rupture, are the main cause of morbidity and mortality[1].

Case report
Female, 68 years old, diagnosed with Marfan syndrome at the age of 20 and identified type A aortic dissection in 2011. She underwent surgery with replacement of the aortic valve and ascending aorta by valved conduit, maintaining postoperative residual aortic dissection. The 2021 control computed tomography angiography image shows aortic dissection after conduction extending to the right common iliac artery and marked dilation of the false lumen (figures 1 and 2).

Discussion/Conclusion
The relevance of this case and image is linked to the importance of recognizing aortic dissection as a manifestation of Marfan’s syndrome - present in 50% of these patients under 40 years of age - and of maintaining its follow-up, even in the postoperative period, given the risk of dissection progression, responsible for the death of 80% of patients[2].

Conflict of interest
There are no conflicts of interest to declare by any of the authors of this study.

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References