Acute Aortic Dissection

What is an acute aortic dissection?
Acute aortic dissection is a medical emergency. It is caused by a tear in the inner layer of the aortic wall. When the tear occurs, blood can enter the wall of the aorta. This creates a new channel for blood, called the false lumen. Aortic dissection can cause major complications. It can prevent blood from flowing to crucial organs. It may cause aortic rupture, which is when the aorta, which brings blood from your heart, bursts open. It can also cause the aorta to become enlarged, known as an aneurysm.

What are symptoms of aortic dissection?
If you are having an aortic dissection, you may feel severe chest, back or stomach pain, along with weakness or fainting.

Type A dissections start between the part of your aorta closest to your heart and the artery which supplies blood to your left arm (left subclavian artery).

Type B dissections occur in the area of the aorta between the left subclavian artery and the part of the aorta that branches into the leg arteries (aortic bifurcation).
What is the treatment?

Treatment options depend on dissection type, complications, and the site of tear.

- **Surgery** is when the surgeon removes part of your damaged aorta and replaces it with a graft (a tube of synthetic material). This is a complex procedure. It is suitable for most Type A patients and some complicated Type B patients.

- **Endovascular** management, or TEVAR, is a less invasive surgery. The surgeon inserts a covered stent graft through a large artery in your arm or leg. The goal of this procedure is to cover the torn portion of the aorta. It is most suitable for some Type B patients.

- **Medicines** are given with the goal of reducing blood pressure. This helps to prevent an increase in the dissection or aortic rupture. All patients should work with their doctor to control their blood pressure. Many Type B patients do very well with medication and do not need a procedure.

How can I take care of myself after having an aortic dissection?

You now have a higher risk for aneurysm or new tear. You may have changes in the original dissection that require more treatment. Call your doctor if you note symptoms similar to what you felt during your dissection or have chest or back pain. You have a chronic condition that requires attention and care.

Here are some ways you can monitor your health to reduce risk:

- **Schedule follow-up visits** with your surgeon or doctor to check your medications and review any growth or changes in your aorta. Also, make sure you get regular imaging of your aorta, usually done using CT or MRI.

- **Check your blood pressure** and take all of your medications. Blood pressure control helps reduce stress on the aortic wall.

- **Exercise regularly.** Talk to your doctor about what forms of exercise are suitable for you. Generally, heavy lifting should be avoided to prevent putting too much stress on your aorta.

Disclaimer: This document is for information purposes only and is not intended to take the place of the care and attention of your personal physician or other professional medical services. If you have questions about individual health concerns or specific treatment options, please discuss them with your doctor.