



A SECURE TECHNIQUE FOR MICROVASCULAR ANASTOMOSIS IN ARTERIES WITH INTIMAL DISSECTION: **INTIMAL SLEEVE FOLD-OVER TECHNIQUE**

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Background

- Intimal dissection can cause an irregular internal surface with intimal flaps and subendothelial collagen exposure. This has been associated with a high risk of thrombosis.
- Trimming the artery to a healthy level is routinely recommended to avoid intimal dissection. However, this method is **limited when there is inadequate vascular length** to work with.



Methods

- We dealt with an artery exhibiting severe intimal dissection by using a new suture technique: **the intimal sleeve fold-over technique** (Figure 1&2).
- Severe arterial intimal dissections were observed in 6 of 130 (4.6%) arterial microvascular anastomoses in free flap reconstruction for oral cancer patients from January 2013 to December 2013.

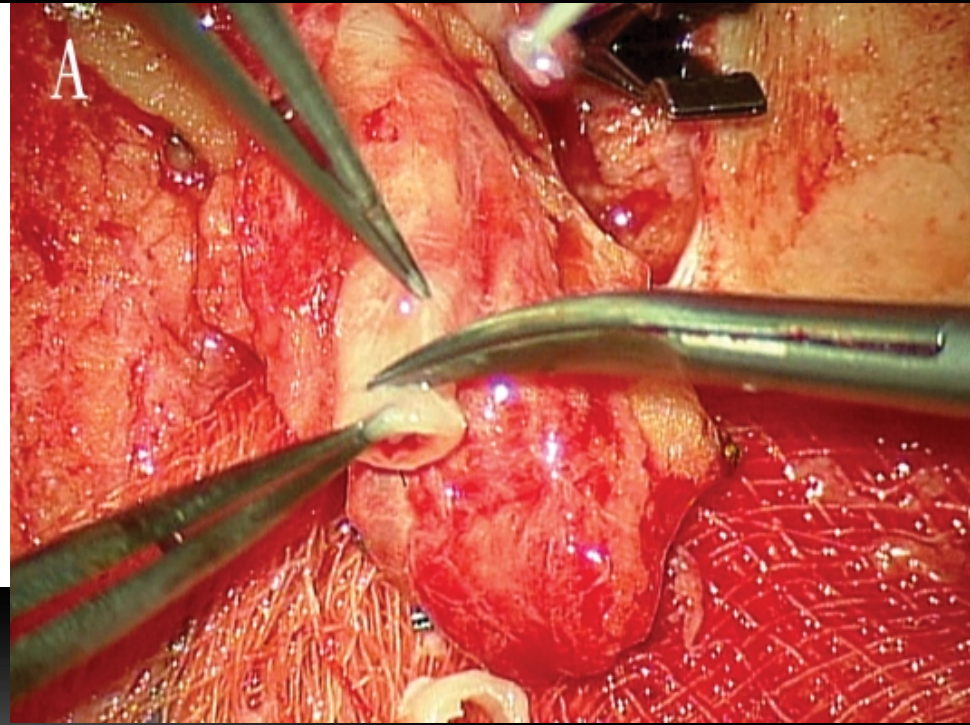
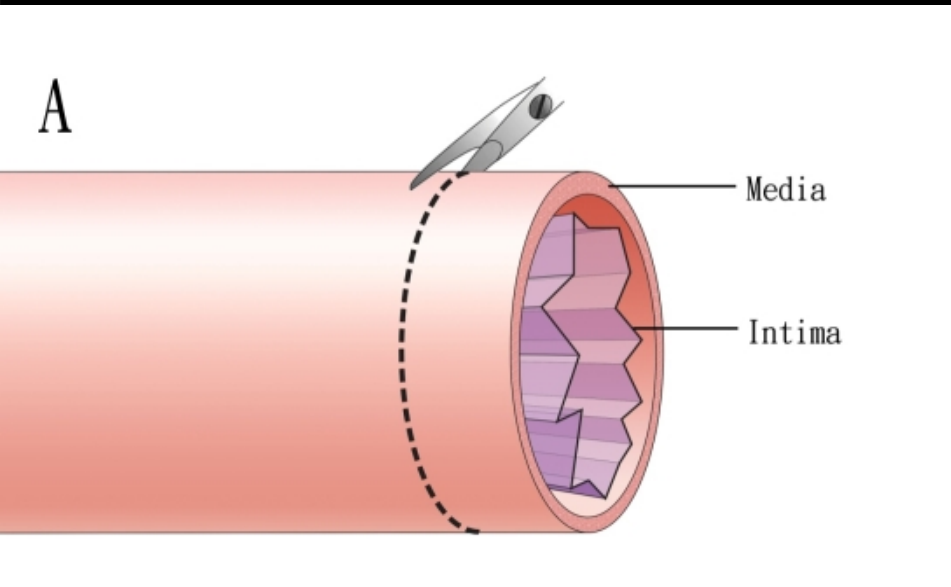


Step 1:

Circumferential excision of the media layer

- We removed a small end portion of the media layer circumferentially to expose the intima. The goal was to fold the intima layer inside out; thus, we sufficiently trimmed the media layer circumferentially.
- This was easily accomplished without injuring the intima because the dissection of the media and intima layers were clearly discernible.

Step 1: Circumferential excision of the media layer

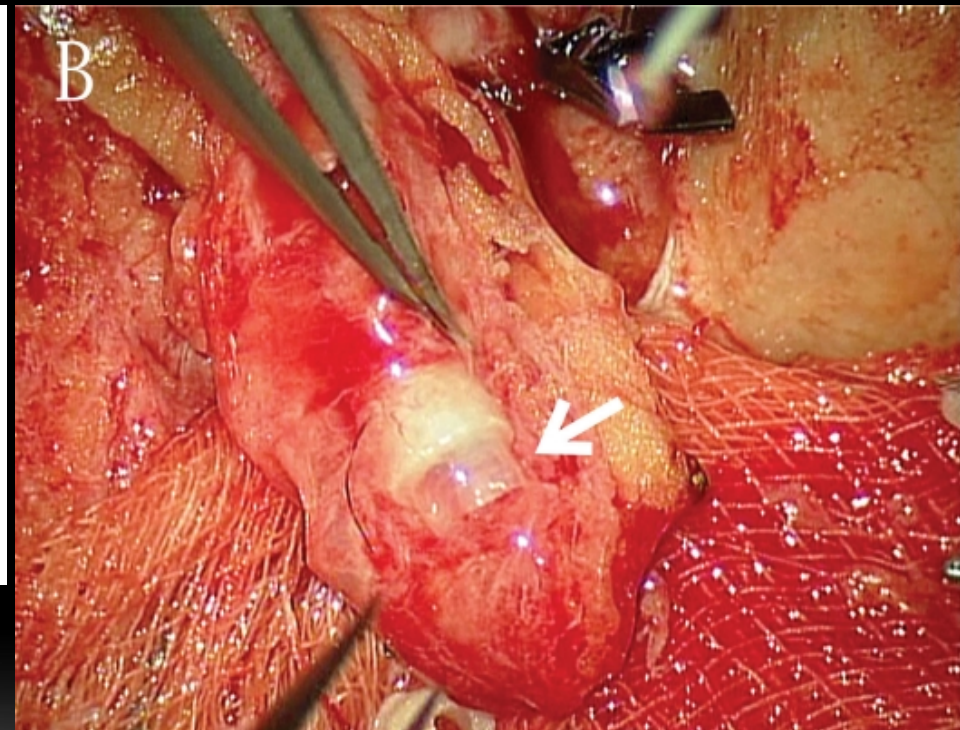
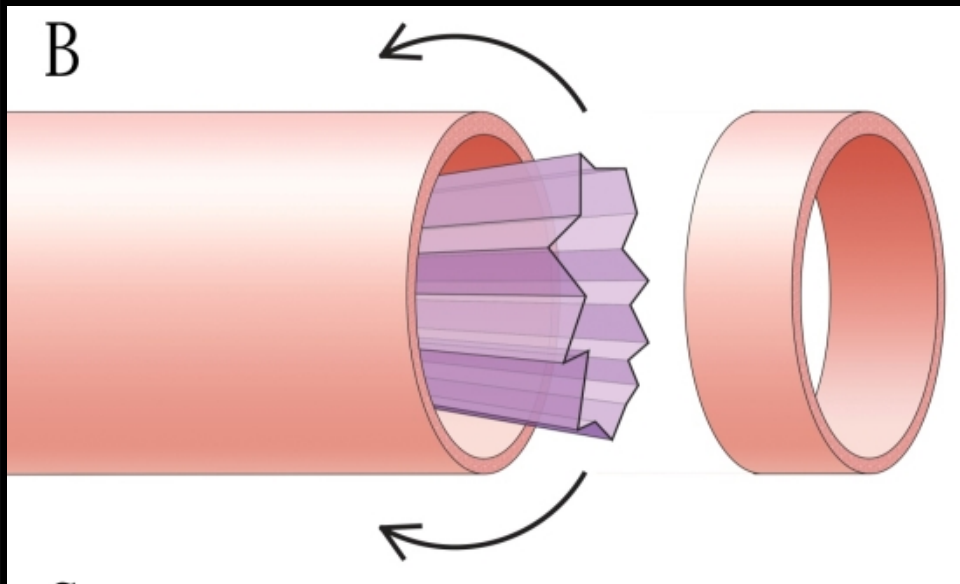




Step 2: Fold-over intimal sleeve

- We simply folded the intima over the media, similar to folding over a shirt sleeve. This allowed the 2 layers of tissue to remain in close contact.

Step 2: Fold-over intimal sleeve

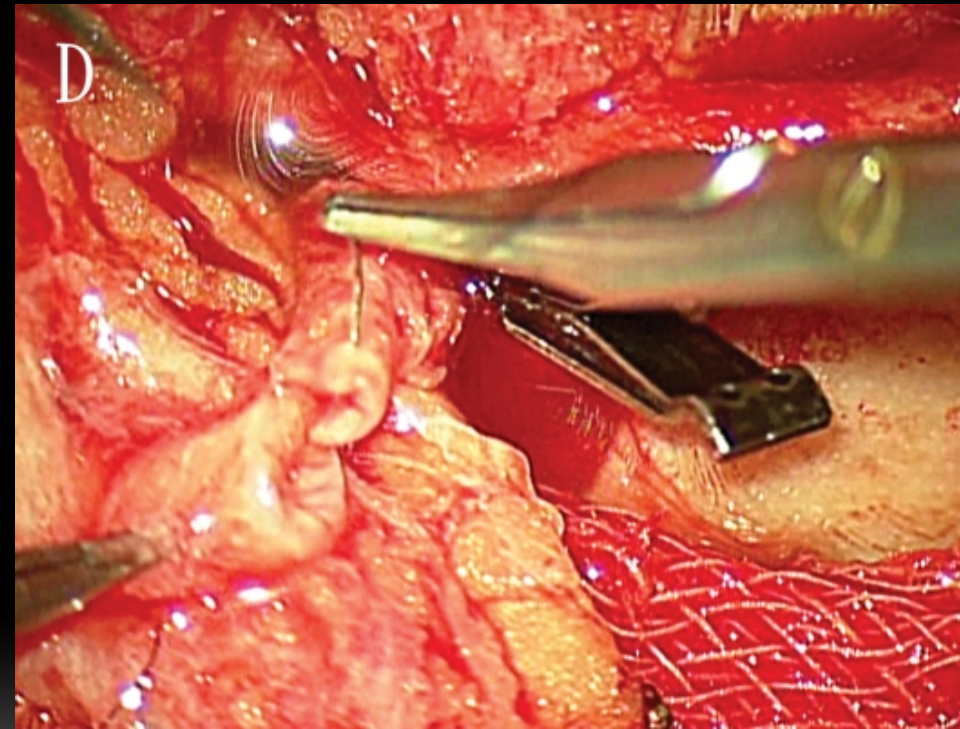
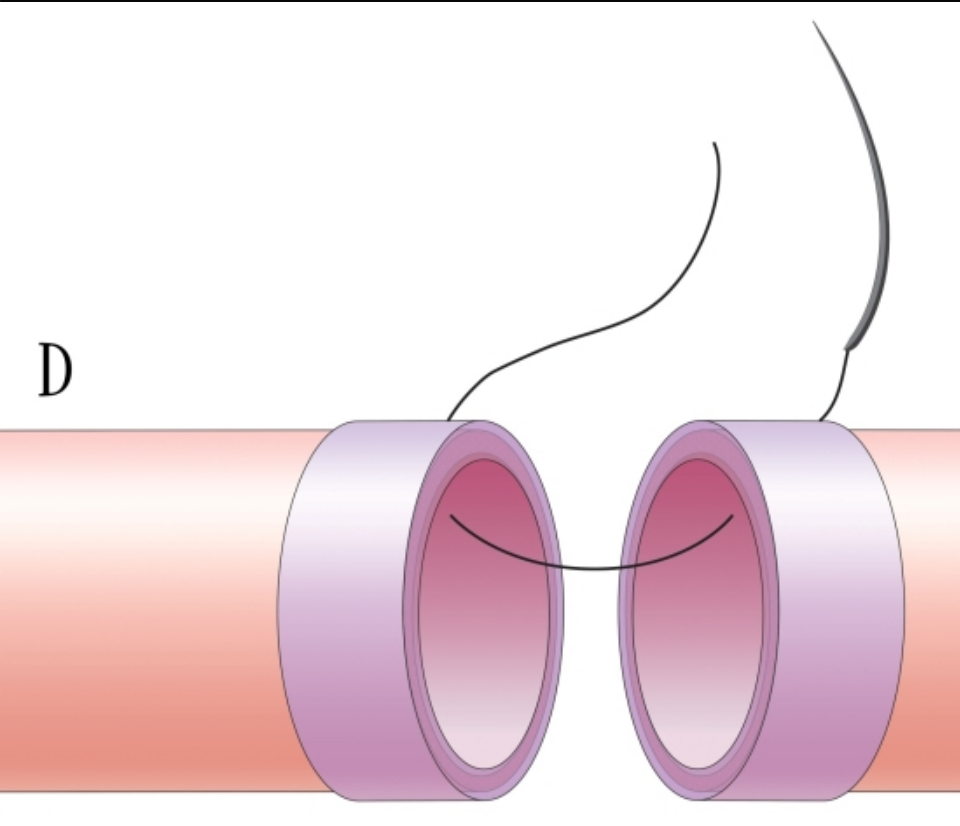




Step 3: Anastomosis

- A normal vascular anatomy was obtained using the fold-over technique by tenting the undulating intima to the media. We performed microvascular anastomosis, similar to normal vascular anatomy, which produced minimal turbulence and anastomosis failure.

Step 3: Anastomosis





Results

- All six patients were discharged as scheduled without perioperative problems and complications during following up.
- The mean diameter of the recipient and pedicle arteries with intimal dissection were 2.13 and 2.20 mm.
- The mean time for performing sleeve fold-over procedure of on each artery was **5.1 min.**



Conclusions

- A secure intima-to-intima contact can be achieved using this technique. This technique can provide an alternative method to **intimal dissection** when the length of the artery is limited.

Figure 1

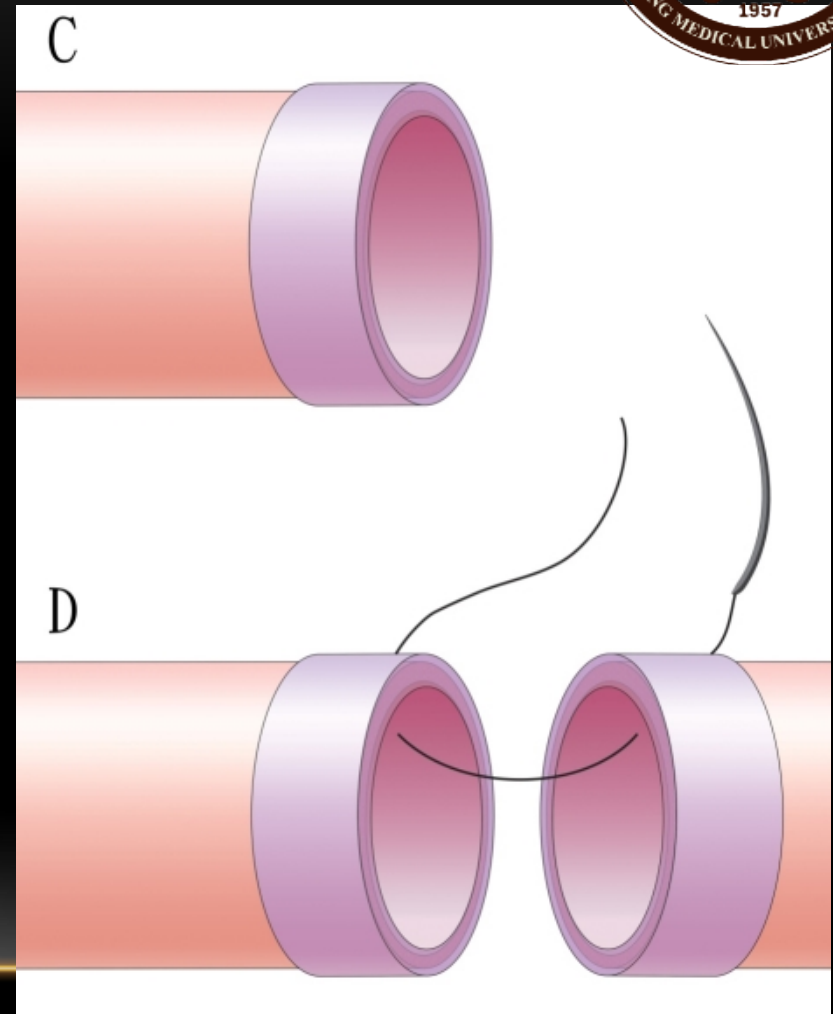
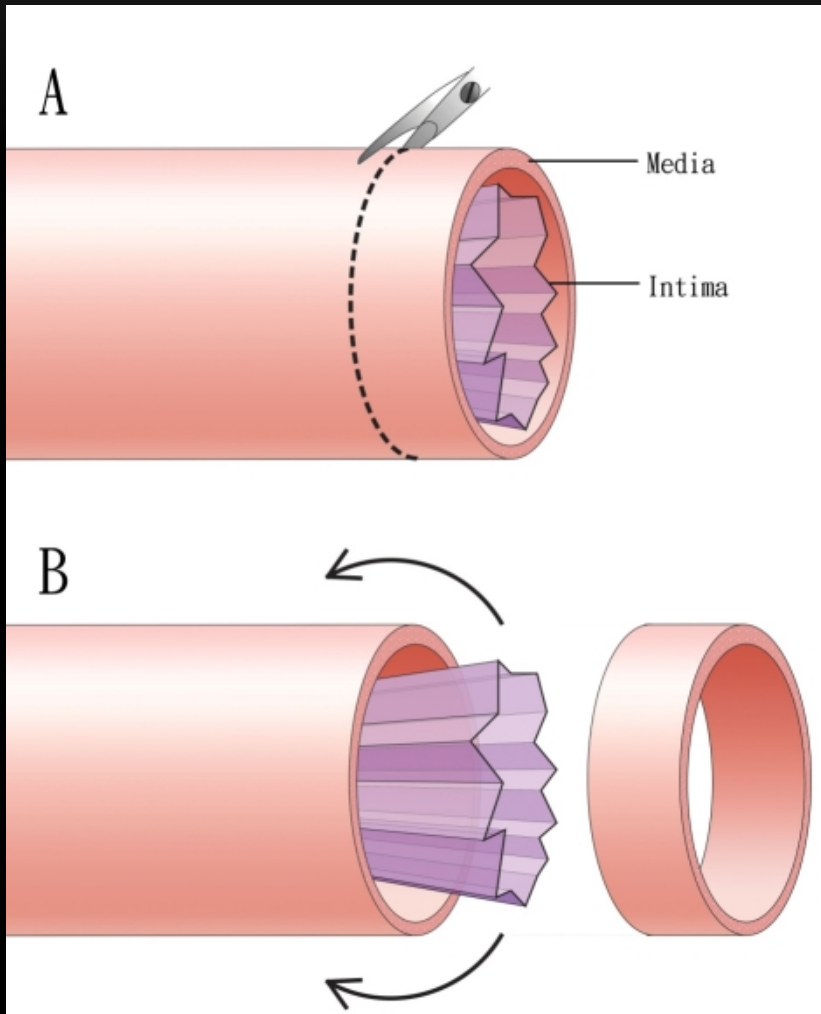


Figure 2

