

Traumatic Aortic Dissection with Confounding Factors - A Case Study

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This project describes a single case report of a 58-year-old male with Stanford type B traumatic aortic dissection with aneurysmal expansion of the descending aorta. A study of the risk vs. benefits of surgical treatment of a Stanford type B aortic dissection, subtrochanteric femur fracture, and burst fracture of the lumbar spine have been reviewed. In contrast to the 72% of patients with Stanford type A dissection who are considered to have a medical emergency and treated surgically, only 20% of patients with a type B dissection undergo surgery. These recommendations do not appear to be as concise, when the dissection is considered to be complicated. The significance of this case demonstrates that there is minimal medical benefit in early treatment of the aortic dissection. Current literature suggests there is benefit in early surgical repair of a subtrochanteric femur fracture and lumbar burst fracture.