

Follow-up and importance of support in patients after trauma and thoracic endovascular aortic repair for aortic dissection

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Trauma and aortic dissection are serious medical conditions that require prompt and precise intervention to prevent severe complications and a fatal outcome. Traumatic injuries, such as vehicular accidents, falls from great heights, or certain sports injuries, can lead to the separation of the inner layer (intima) from the middle layer (media) of the aorta, which is characteristic of aortic dissection. Injuries to the aorta can weaken its structure and integrity, predisposing it to later layer separation and the development of dissection. Thoracic endovascular aortic repair (TEVAR) has become the preferred approach for treatment of thoracic aortic pathology since the approval of the first endograft device by the U.S. Food and Drug Administration (FDA) in 2005¹. TEVAR has become a key treatment method, often requiring monitoring and support for patients after the procedure. Monitoring the patient after a TEVAR procedure is crucial for identifying potential postprocedural complications such as endoleaks, stent rupture or displacement, infection at the access site, or around the stent graft. Regular monitoring procedures include examinations such as CT angiography or ultrasound, vital signs monitoring, and laboratory tests. Early detection of complications allows for successful treatment and risk reduction.

TEVAR is a demanding procedure that can leave patients with physical challenges. The importance of supporting patients after a TEVAR procedure should not be underestimated. Patients often face physical, emotional, and psychological challenges following trauma and invasive surgery. The healthcare team, including nurses, doctors, and therapists, plays a crucial role in patient rehabilitation. Support in the form of physical therapy, medical supervision, and rehabilitation helps patients regain their strength and functionality. They are encouraged to gradually return to normal physical activities to improve their mobility and quality of life.

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LITERATURE

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