

The coexistence of an unstable spinal fracture with a pending aortic lesion is potentially catastrophic and a therapeutic challenge as to timing of treatment, assigning priorities and selecting the best approach.

A 41 year-old healthy male victim of bike accident. Imaging revealed a fracture of 6th and 7th thoracic vertebrae with a bone fragment in close proximity to the descending thoracic aorta. After consultation with spine/vascular surgeons and interventional radiologists it was decided to secure the potential aortic injury with an endovascular stent-graft followed by posterior vertebral instrumentation for fracture's reduction.

A multi-specialists teamwork approach is mandatory. Vascular lesion is priority, followed by vertebral surgery. As to the treatment options, we suggest a “best but still safest” philosophy: endovascular repair and posterior spinal instrumentation should be considered first in the acute stage ¹⁾.

¹⁾

Cultrera F, Gamberini E, Iacono G, Turicchia GU, Agnoletti V, Tosatto L. Unstable thoracic spine fracture with aortic encroachment: A potentially fatal association and a suggested treatment. Int J Surg Case Rep. 2017 Aug 18;39:181-184. doi: 10.1016/j.ijscr.2017.08.015. [Epub ahead of print] PubMed PMID: 28846951.

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