



# Primary Aortoenteric fistula: A rare presentation of a Herald Bleed

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### Learning Objectives

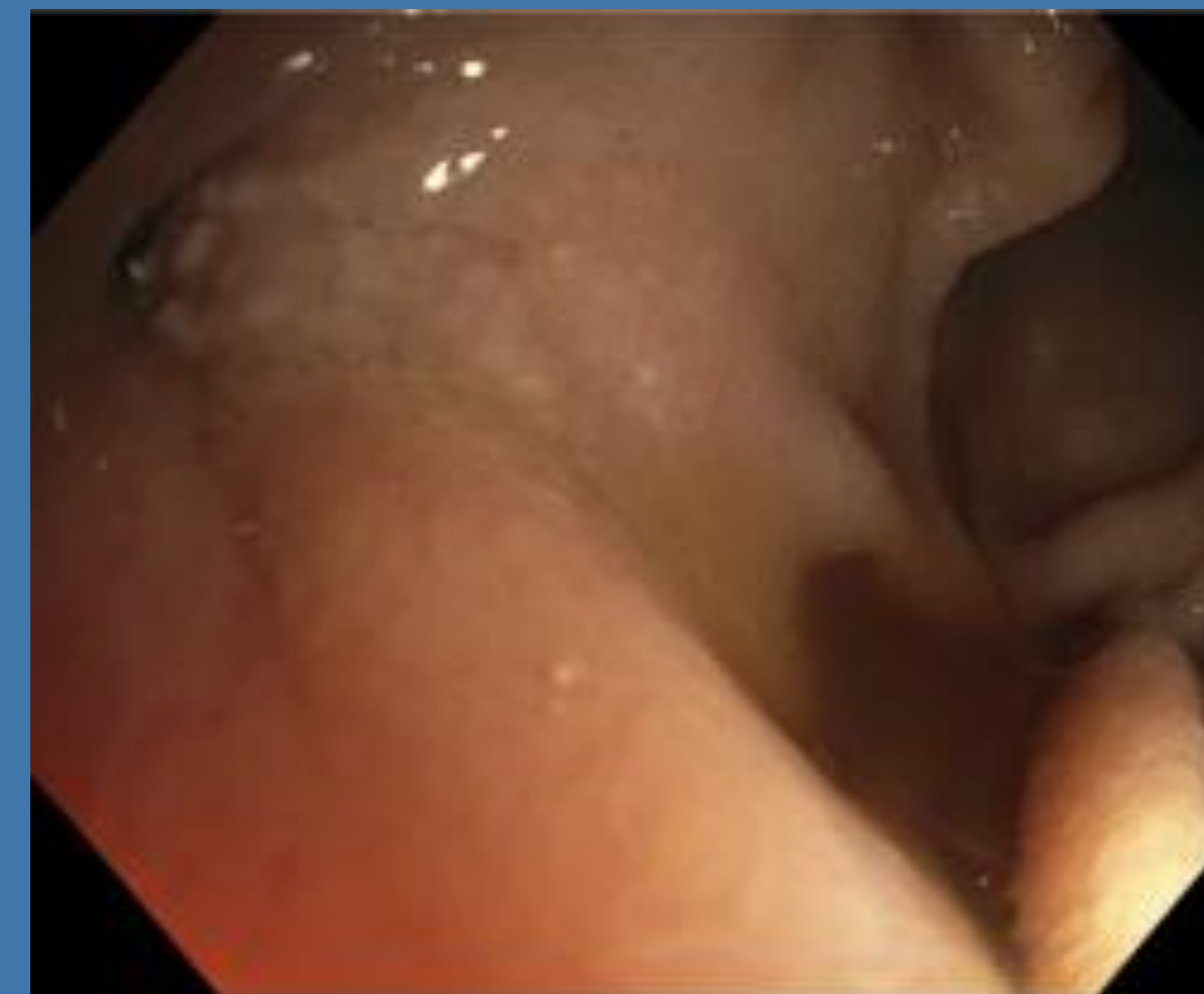
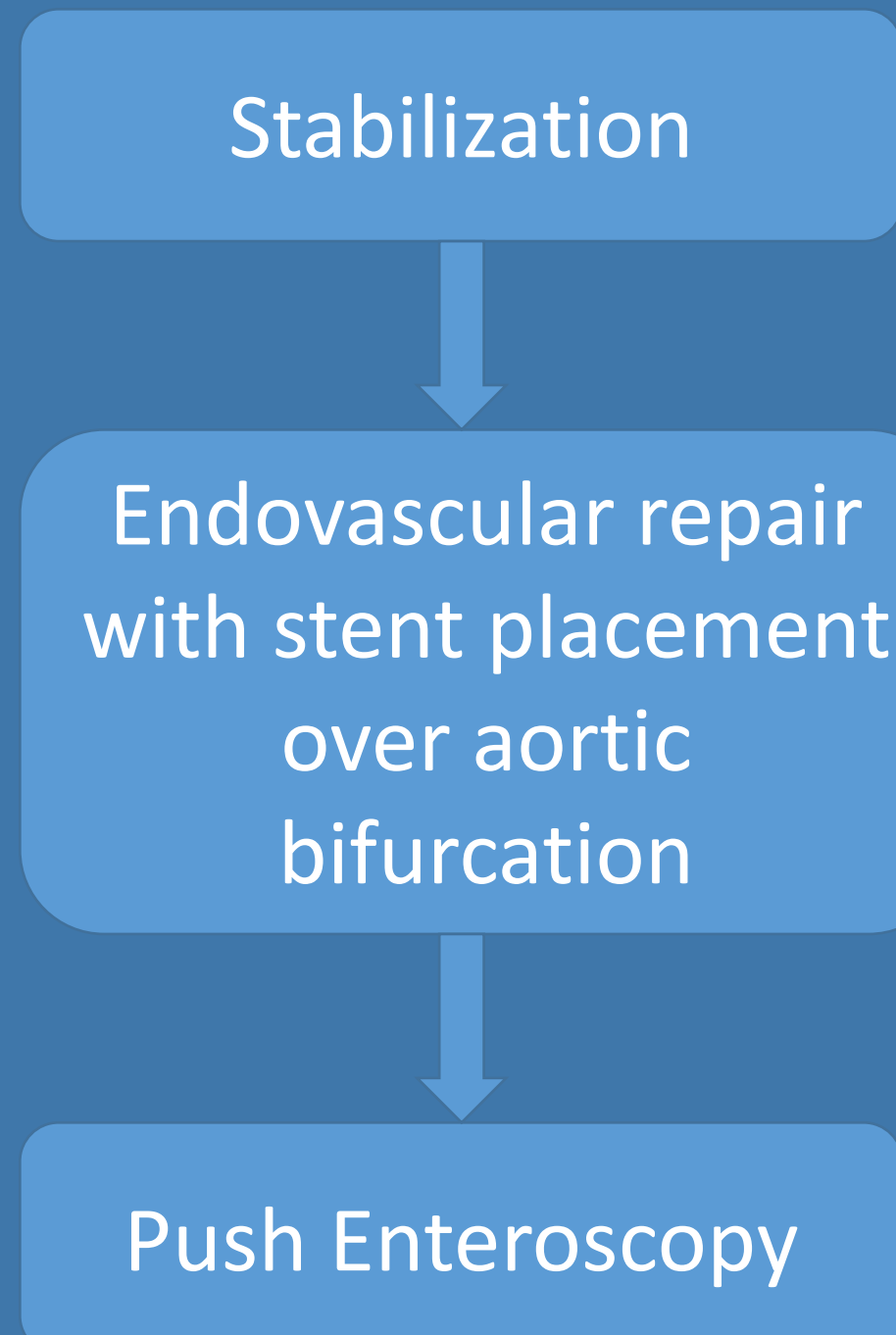
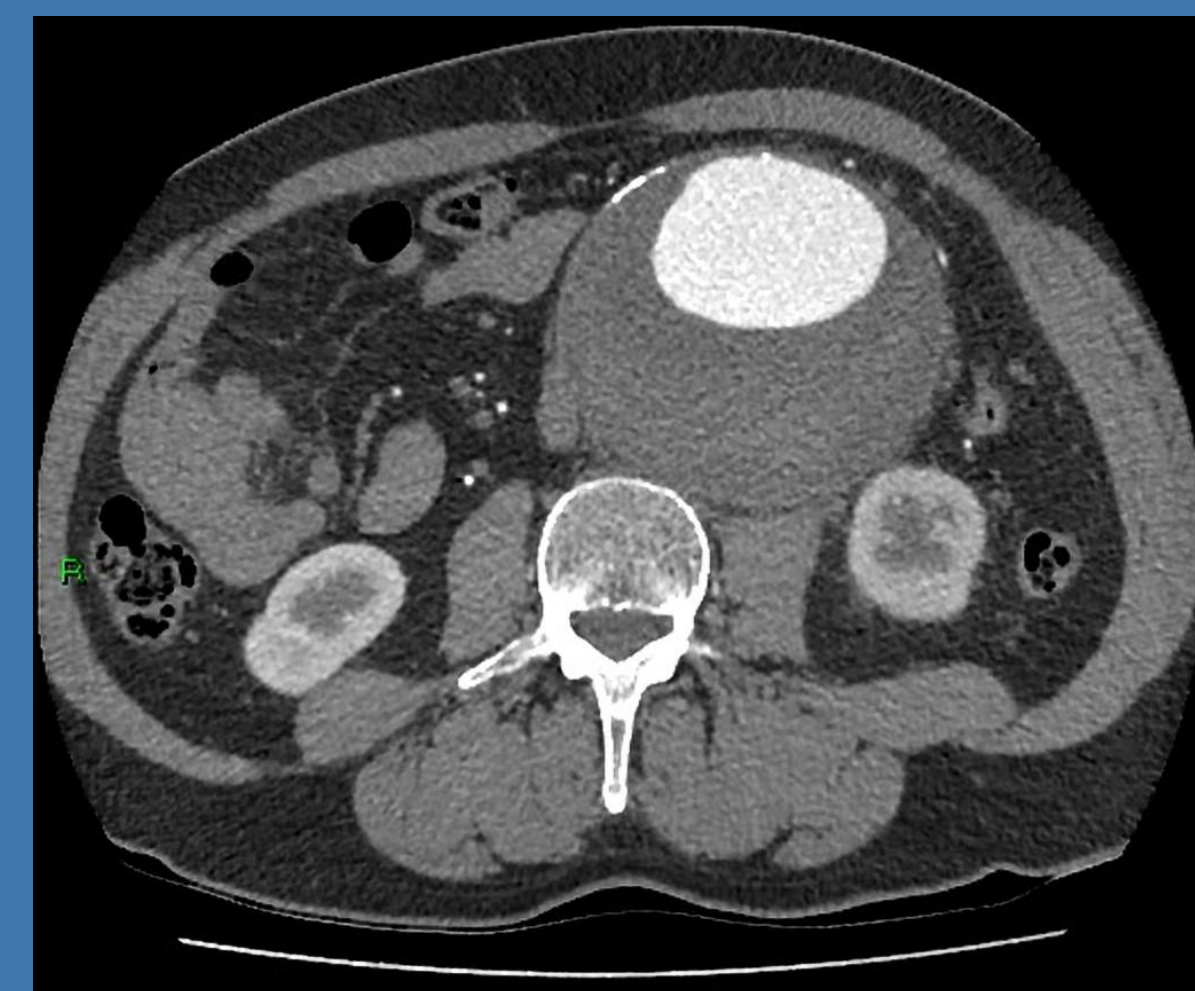
- High (34-36%), though decreasing mortality.
- Early recognition, confirmation, surgical intervention paramount.
- AAA screening (UPSTF recommendations)

### Case:

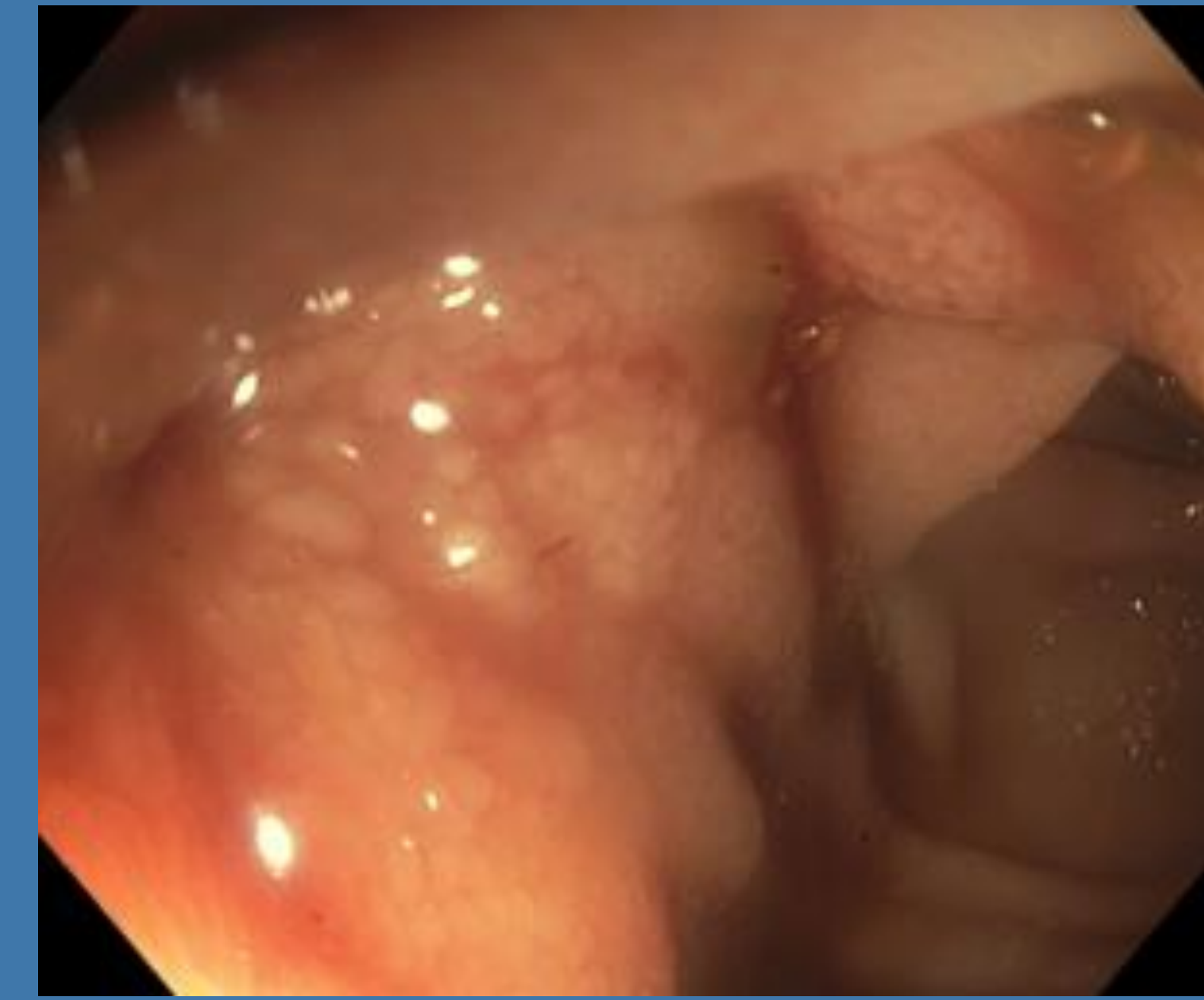
69 yo female presents with hematemesis and abdominal pain.

Prior hx of abdominal aortic aneurysm

CT: "Irregular shaped infrarenal AAA 9.6-7.5 cm with evidence of contained rupture."



"Herald Bleed"



Locations	
Duodenum	54% - 2/3 third portion - 1/3 4 <sup>th</sup> portion
Esophagus	28%
Other parts of small bowel	15%
Large Bowel	2%

Primary Associations	
Aneurysmal aorta	83%
Foreign body	
Tumor	
Radiotherapy	
Infection (TB)	

### Discussion:

- Primary AEF:
  - Incidence 0.04 – 0.07% at autopsy
  - Mechanism



- Secondary AEF:
  - To aortic vascular procedures
  - Median interval 16 months
  - Type 1 vs Type 2

- Diagnosis:
  - CT angiogram (50%-94%)
  - EGD
    - poor, technically difficult
    - 25-50% sensitivity
  - Ultrasound

- Surgical Options:
  - In-situ graft
  - Extra-anatomic bypass
  - Closure of defect alone
  - Endovascular stent graft

