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**Fox Chase Resident to Undergo Procedure at Jeanes Hospital
to Repair “Ticking Time Bomb” in Her Body**

PHILADELPHIA – On April 14, 74-year-old Fox Chase resident Anne Murphy will undergo a procedure to repair a “ticking time bomb” deep within her body – an abdominal aortic aneurysm (AAA), a common but life-threatening condition that kills 15,000 Americans a year.

Although the procedure is not uncommon – approximately 40,000 AAA repairs are performed each year in the U.S. – the location of the surgery is: Jeanes Hospital.

“This isn’t a procedure typically performed at a smaller community hospital,” says Dr. John Blebea, section chief of Vascular Surgery at Temple University Hospital and the surgeon who will perform the repair at Jeanes. Since 1997, Temple vascular surgeons have seen patients and performed surgery at Jeanes.

An aneurysm is a bulge in an artery, much like a bulge that forms in an over-inflated inner tube. Sometimes referred to as “ticking time bombs” because it’s impossible to know exactly when they will burst, aneurysms can cause serious bleeding within the body, often leading to sudden death.

Murphy, the mother of six and grandmother of 19, was first diagnosed with the aneurysm in 1999 when she had a CAT Scan for back pain. At the time, the aneurysm wasn’t very big, not large enough to operate on.

“Aneurysms typically develop slowly over many years and often have no symptoms,” says Blebea. “In most cases, they’re detected only because we’re looking for something else. In a case like Mrs. Murphys, it’s standard practice to ‘watch and wait.’ ”

That waiting ended this year when regular tests showed that Murphy’s AAA had grown to the point of concern. On the 14th, Blebea will perform what is called an endovascular aneurysm repair on Murphy.

During the procedure a tube-shaped “sleeve” contained inside a collapsed metal-mesh cylinder is inserted into the aorta, the artery that carries blood from the heart to the rest of the body. The sleeve, about six inches long, is guided through the arteries to the site of the aneurysm. Once in place, the sleeve is expanded like a spring and becomes anchored to the artery wall. The by-passed aneurysm then is shielded from the blood flow and typically shrinks over time, thus greatly reducing the chance of rupture.