



## CRMC Offers Less Invasive Surgery for Aortic Aneurysm

TEVAR procedure decreases risk and healing time

Ray Spencer of Rickman didn't have any idea he might have an aortic aneurysm, but that's what his doctor discovered on a chest X-ray he performed during a routine yearly physical because he wanted to make sure Spencer's cold had not turned to pneumonia.

Spencer was referred to R. Lewis Wilson, M.D., a cardiac, vascular and thoracic surgeon at CRMC, who began regularly monitoring the aneurysm, which was, at the time, only 4 cm in diameter — not large enough to require surgery. Within about a year, the aneurysm grew to about 6 cm, the size at which surgical intervention is recommended.

Spencer had a choice between having his surgery done at Cookeville Regional or the University of Tennessee Medical Center in Knoxville.

"We said no to UT because of the fact that our kids are all right here, and it would have been difficult for me to stay down there or worry about my dog here while going back and forth," said Spencer's wife, Esther.

Dr. Wilson informed Spencer that he was a candidate for the thoracic endovascular aneurysm repair (TEVAR) procedure, a less invasive surgery that greatly reduces the risk of mortality and other



Dr. R. Lewis Wilson

complications.

"With TEVAR, patients are in the hospital two or three days and back to activity within a couple of weeks," said Dr. Wilson.

And, according to Wilson, once the TEVAR procedure is complete,

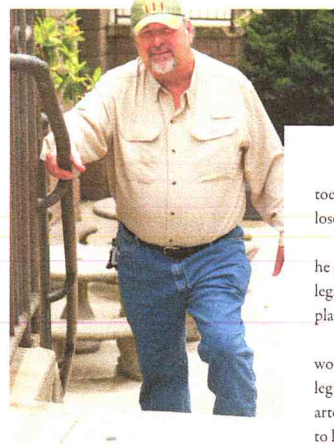
there is less than a 10 percent chance that the patient will have future problems with the same aneurysm.

Spencer agreed to undergo the procedure, becoming CRMC's first TEVAR patient on February 24, 2015. The surgery took two hours, and Spencer was only in the hospital for three days.

"Considering what I went through, I feel good," said Spencer, who's back to enjoying his woodworking hobby. "I don't think you could ask for a better doctor."

Added Esther, "We put our faith in Dr. Wilson, and we're glad we did. Ray had wonderful care here at Cookeville Regional."

(Above) Ray Spencer, at his home in Rickman, Tennessee.



LeRoy Johnson is enjoying a much more active life since Dr. Thomas Little addressed the circulation problems in his legs.

toes, then you lose half your foot, then you lose your leg."

When Dr. Little saw Johnson's injury, he ordered a CT angiogram of Johnson's legs, discovered arterial blockages, and placed five stents to correct them.

"Unless we fixed the circulation, he would have probably ended up losing his leg," said Dr. Little. "We opened up the arteries in his legs, and he's got blood going to his feet again."

On follow-up visits, Dr. Little performs Doppler tests to check Johnson's circulation. If problems develop later, he can place more stents or can perform angioplasty, atherectomy (a procedure to remove plaque from vessels) and even vascular surgery to bypass some of the blood vessels in the legs and restore circulation.



Dr. Thomas Little

"If we can see these patients before they start having surgery done, we can avoid some surgery, and we can make the surgery safer and more effective

with fewer complications for folks," said Dr. Little. "I think Mr. Johnson is the poster child for that."

Now, Johnson is enjoying a much better quality of life than before, and certainly better than if he had required further amputations.

"As far as I'm concerned," said Johnson, "Dr. Little saved my leg and saved my life."

## Peripheral angioplasty helped patient avoid major amputation

It started as an abscess that led to a partial toe amputation, then the whole toe. And when the wound wouldn't heal and infection spread into the bone, it looked like LeRoy Johnson of Crossville was going to lose a whole lot more.

Dr. Thomas Little, a cardiologist with Tennessee Heart, frequently sees this kind of problem when physicians don't address circulation problems before amputating.

"He went to a podiatrist who cut the toes off but never checked his circulation to know if it would heal," said Dr. Little, who has a special interest in peripheral arterial disease. "This is a typical scenario we see, where someone says, 'We're just going to take a little piece of this off or that off, and then it won't heal, and it just snowballs. So you lose a toe, then you lose a couple of

Watch for Signs!

## Symptoms of Circulation Problems

### EARLY SIGNS

- Pain in the calf  
When walking that causes you to become less active
- Pain with exercise  
That usually strikes at about the same distance and level of exercise and stops with rest

### LATER SIGNS

- Resting pain  
With little or no activity
- Night pain  
Pain that strikes at night while lying in bed that improves with sitting up or standing

### ADVANCED SIGNS

- Ulcers
- Wounds  
Or even small injuries that won't heal
- Gangrene

Screenings are offered regularly through Cookeville Regional's health fairs, so there's no reason not to have your circulation checked. Visit [crmchealth.org/healthfair](http://crmchealth.org/healthfair).