« Problems after percutaneous AVF creation - Ellipsys”

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Disclosures

• Speaker name: Alexandros Mallios, MD

• I have the following potential conflicts of interest to report:

  Consulting and/or Stockholder of a healthcare company:

  Avenu Medical, BD-Bard, Medtronic, Fujifilm-Sonosite, Spectranetics
• May 2017 – January 2020 - 283 patients
• 99% technical success
• Mean Follow-up 295 days (11-873 months)
• 62% Primary patency
• 88% Primary assisted patency
• 96% Secondary patency
• No Serious Adverse Events

• Mean access flow: 925ml/min (brachial artery / range: 425-1440)

• No steal syndrome

• 12% superficializations (14 patients)

• Average maturation time: 4,1 weeks

• 10% - early cannulation (<2 weeks)
Kaplan-Meier Survival Analysis

Jennings et al – Surgical PRA –AVF, JVS-2017
“Problems”

• May 2017 – January 2020 - **283 patients**

• 38% PTA – post-anastomotic segment / pre-anastomotic radial artery

• 3 conversions (1%)

• 2 distal radial artery occlusions (<1% - asymptomatic)
Good Palpable Anastomotic Thrill - >600 ml/min flow

- Palpable arm Veins with Tourniquet <6mm depth
  - Mark Cephalic and/or Basilic vein that are appear accessible for average dialysis personnel with tourniquet and send photos to the dialysis unit

Flow through anastomosis under ultrasound
- Distal radial artery access PTA of DCV and anastomosis with 6x40 compliant balloon
- Double puncture access PTA of DCV and anastomosis 6x40 compliant balloon

Consider:
1. Puncture of Median cephalic and Median basilique veins with plastic cannulas
2. Ligation of competitive branches (basilic or brachial based on ultrasound evaluation of flow)
3. Vein Superficialisation

Good Palpable Anastomotic Thrill - >600 ml/min flow

PTA of preanastomotic radial artery with 4x40mm compliant balloon
Cannulation

Mark Cephalic and basilic vein that are apparent for average dialysis with tourniquet photos to the distal.

Considet the following:
1. Puncture of Median basilique.
2. Ligation of common carotid (basilic or brachial) ultrasound evaluation.
3. Vein Superficialization.
THANK YOU FOR YOUR ATTENTION