

CONTROVERSES ET ACTUALITÉS EN CHIRURGIE VASCULAIRE
CONTROVERSIES & UPDATES
IN VASCULAR SURGERY



JANUARY 23-25 2014

MARRIOTT RIVE GAUCHE & CONFERENCE CENTER PARIS, FRANCE

Off the shelf grafts: Are they needed and up to the job? Against the Motion

Colin Bicknell

Imperial College London, UK

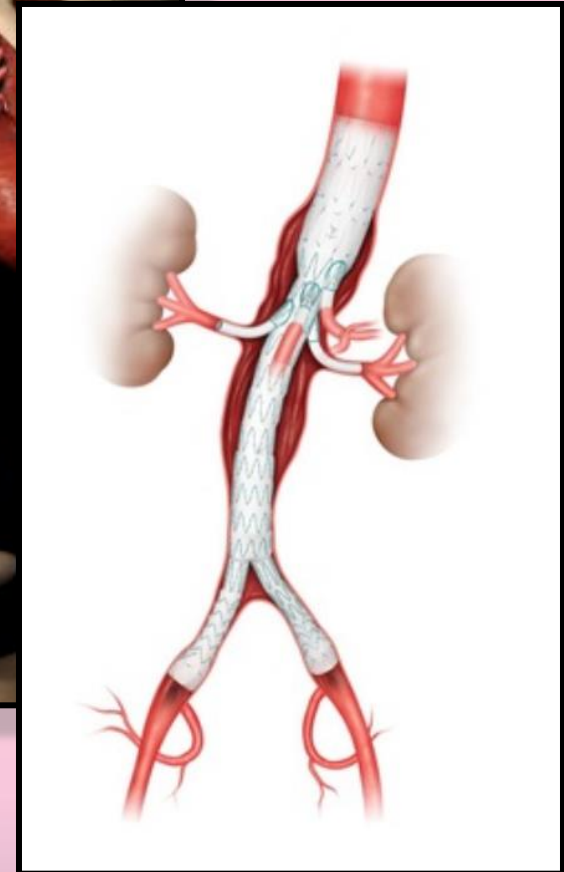
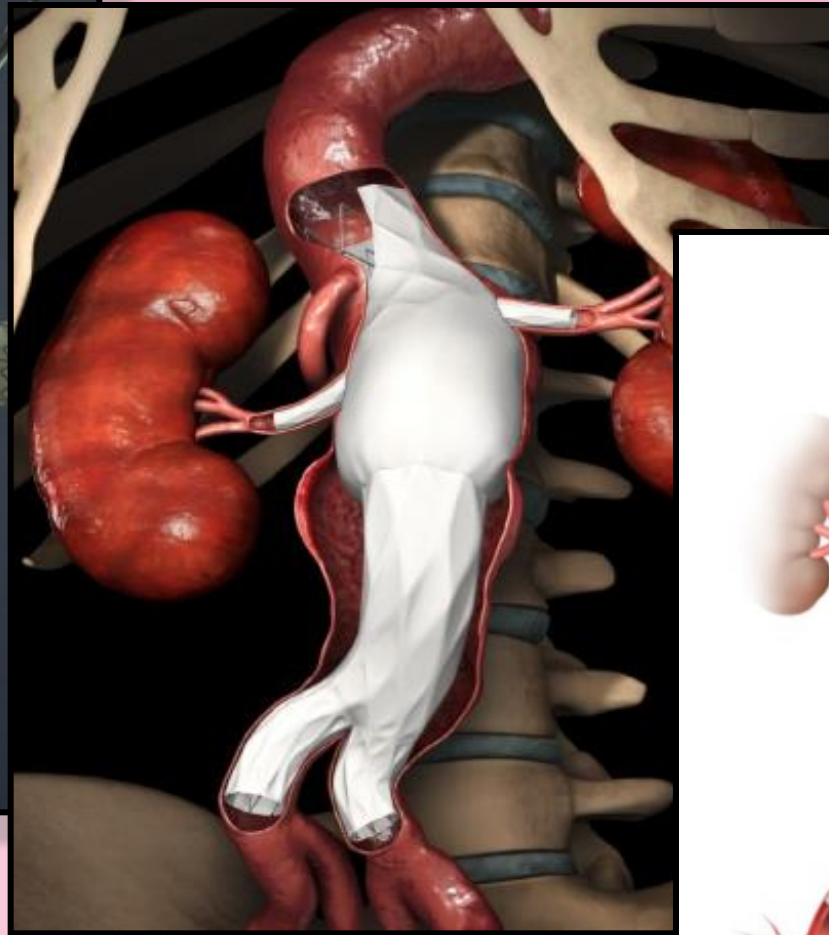
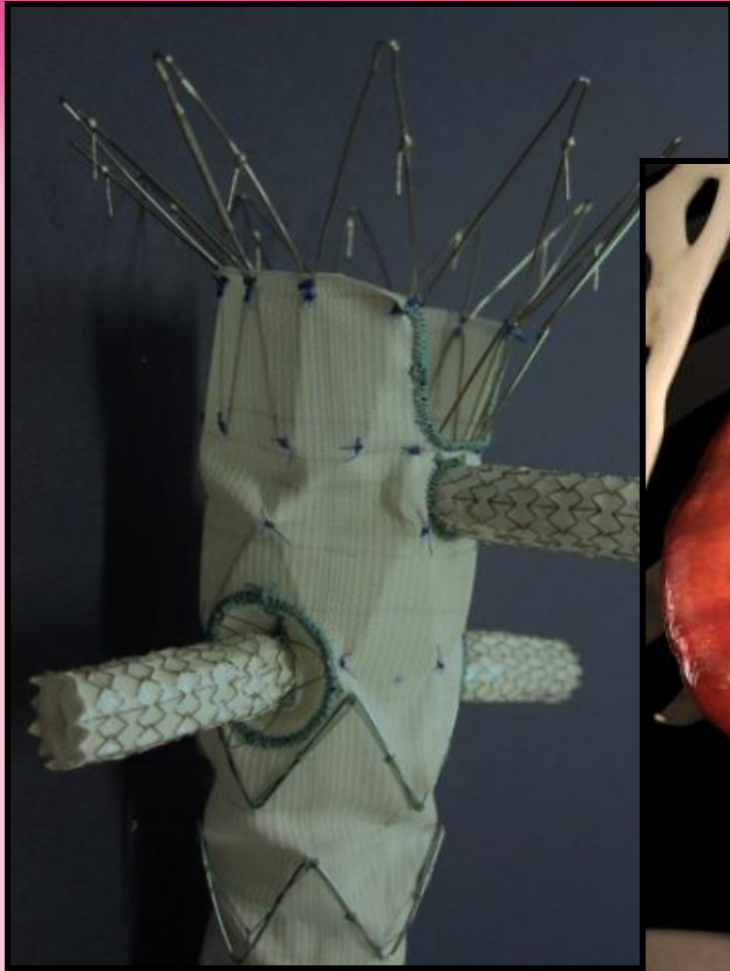
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Disclosure

Speaker name: Colin Bicknell

- ☐ I have the following potential conflicts of interest to report:
- ☒ Consulting (Hansen Medical, Bolton Medical)
- ☐ Employment in industry
- ☐ Shareholder in a healthcare company
- ☐ Owner of a healthcare company
- ☐ Other(s)

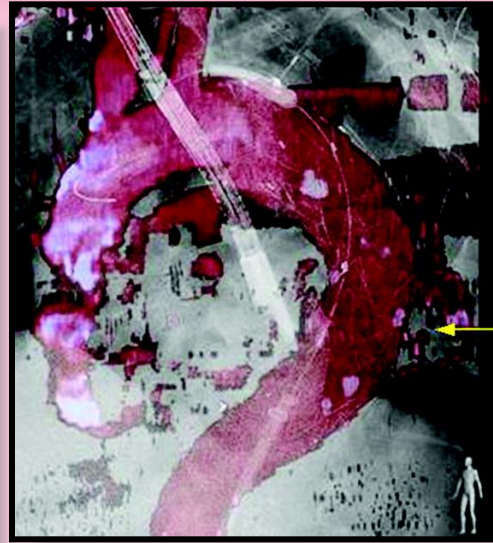


Current “Off-the-shelf” Grafts

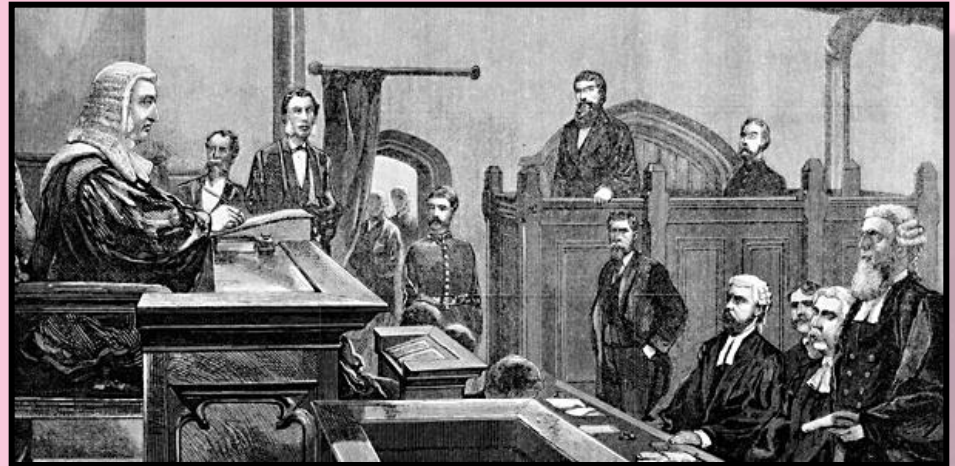
Advancing Technologies

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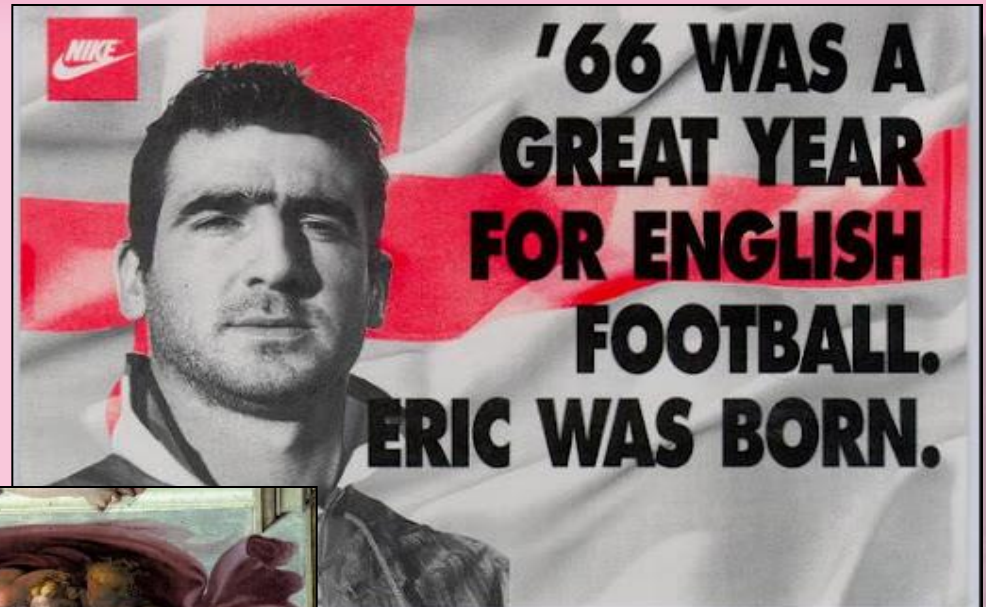
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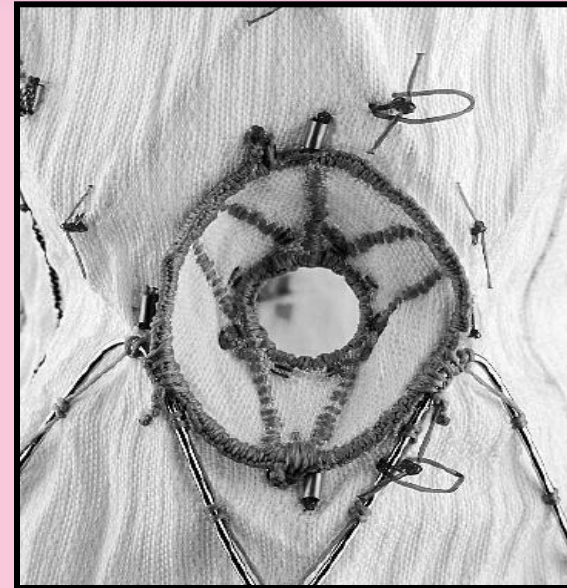
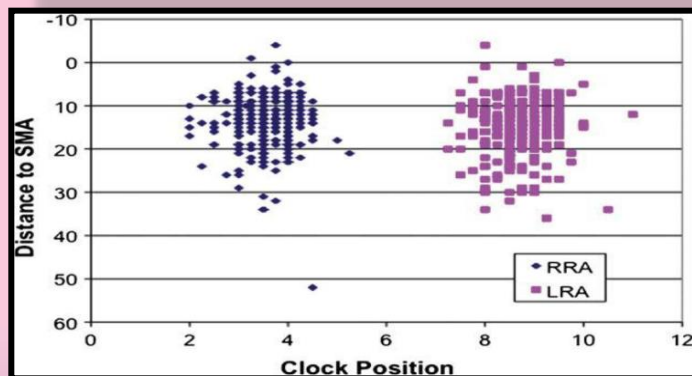
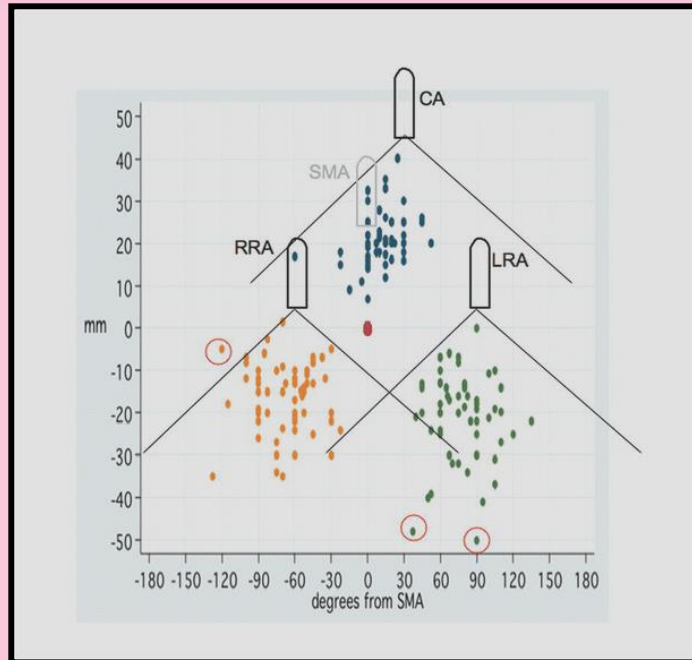
The British Culture



Worth it and up to
the job



How many patients are *really* suitable?



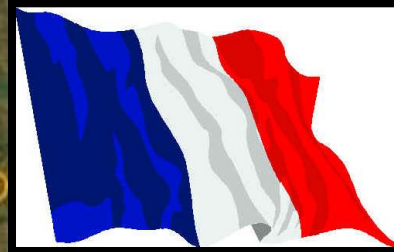
◆ CLINICAL INVESTIGATION ◆

Off-the-Shelf Fenestrated Endografts: A Realistic Option for More Than 70% of Patients With Juxtarenal Aneurysms

Jonathan Sobocinski, MD¹; Guillermo d'Utra, MD¹; Noel O'Brien, MD¹; Marco Midulla, MD²; Blandine Maurel, MD¹; Matthieu Guillou, MD¹; Richard Azzaoui, MD¹; Blayne Roeder³; Timothy A. Resch, MD, PhD⁴; and Stéphan Haulon, MD, PhD¹

¹Vascular Surgery and ²Radiology, Hôpital Cardiologique, CHRU de Lille, France. ³Cook MED Institute, West Lafayette, Indiana, USA. ⁴Vascular Center, Skåne University Hospital, Malmö, Sweden.

How many patients are *really* suitable?



Wight

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Do

Calais

Jersey

Clinical Reports

CLINICAL RESEARCH STUDIES

From the Western Vascular Society

Prospective, multicenter experience with the Ventana Fenestrated System for juxtarenal and pararenal aortic aneurysm endovascular repair

William J. Quiñones-Baldrich, MD,^a Andrew Holden, MD,^b Renato Mertens, MD,^c Matt M. Thompson, MD,^d Alan P. Sawchuk, MD,^e Jean-Pierre Becquemin, MD,^f Matthew Eagleton, MD,^g and Daniel G. Clair, MD,^h *Los Angeles, Calif; Auckland, New Zealand; Santiago, Chile; London, United Kingdom; Indianapolis, Ind; Paris, France; and Cleveland, Ohio*

Zenith p-branch standard fenestrated endovascular graft for juxtarenal abdominal aortic aneurysms

Atsushi Kitagawa, MD,^a Roy K. Greenberg, MD,^{a,b} Matthew J. Eagleton, MD,^a and Tara M. Mastracci, MD,^a *Cleveland, Ohio*

◆ RAPID COMMUNICATION ◆

Early Experience With the First Commercially Available Off-the-Shelf Multibranched Endograft (t-Branch) in the Treatment of Thoracoabdominal Aortic Aneurysms

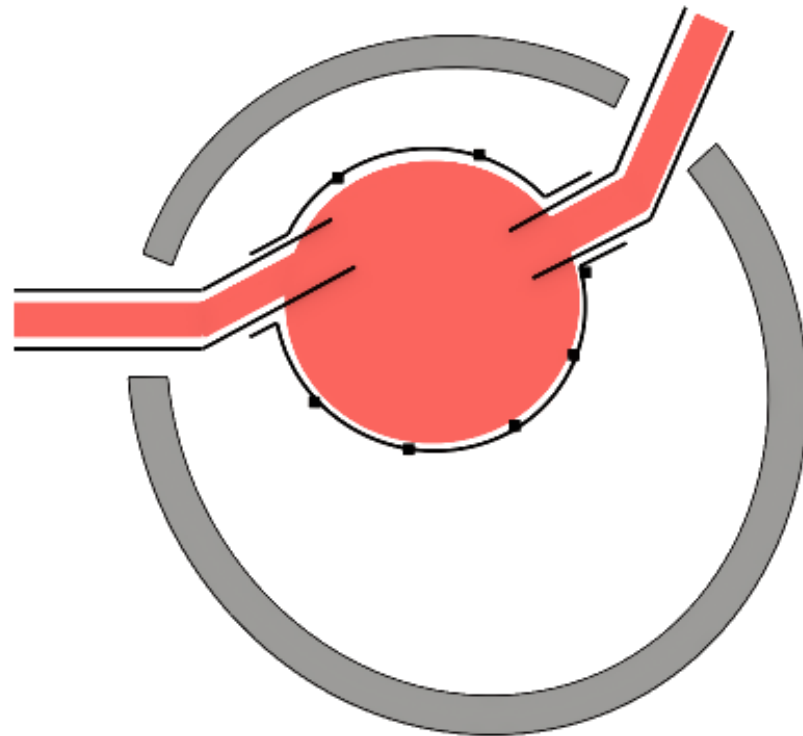
Michel J. Bosiers, MD¹; Theodosios Bisdas, MD²; Konstantinos P. Donas, MD¹; Giovanni Torsello, MD^{1,2}; and Martin Austermann, MD¹

TOLERANCE for Mis-alignment

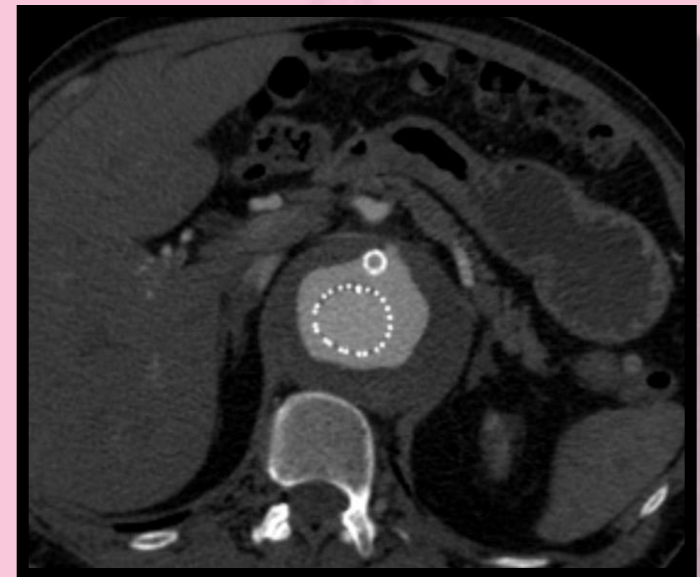
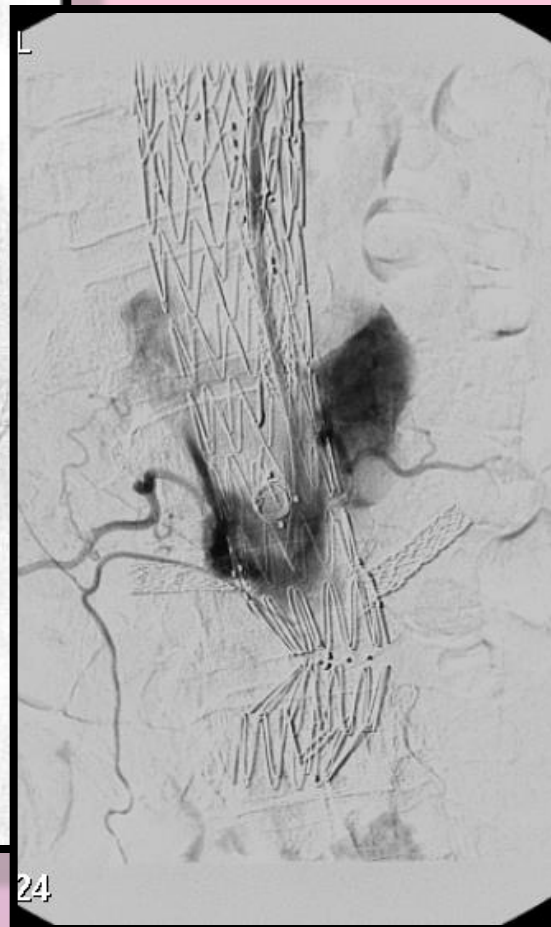
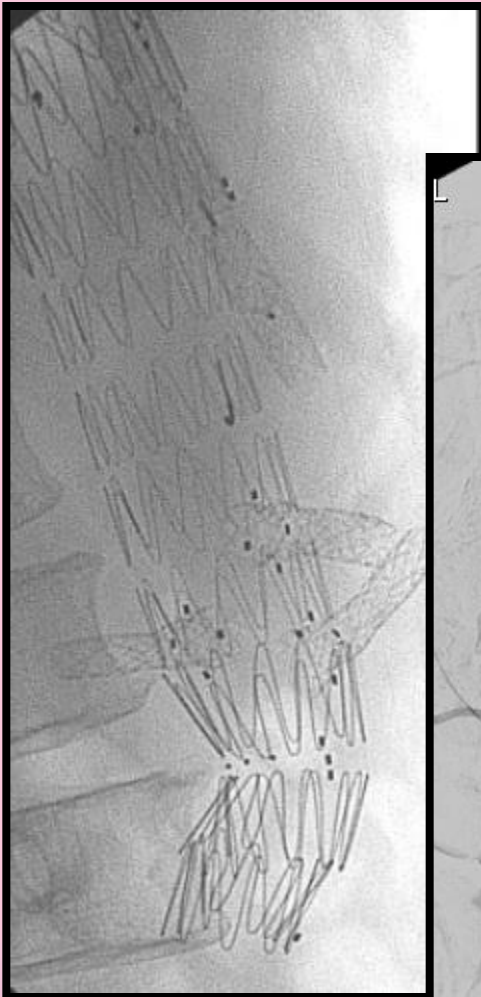
Anatomical Criteria for an Off-the-Shelf Fenestrated Stent-Graft

	Stent-Graft Design 1	Stent-Graft Design 2
Proximal aortic sealing zone diameter, mm	22-31	22-31
Lengths		
Top of the graft to the aortic bifurcation, mm	≥164	≥165
Bottom of the CT to the center of the SMA, mm	>9	>7
Center of the LRA to the center of the SMA, mm	5-19	13-27
Center of the RRA to the center of the SMA, mm	5-19	9-23
Clock positions		
Center of the CT	11:30-13:30	10:30-13:30
Center of the LRA	02:00-03:00	02:00-03:00
Center of the RRA	09:00-10:00	09:00-10:00

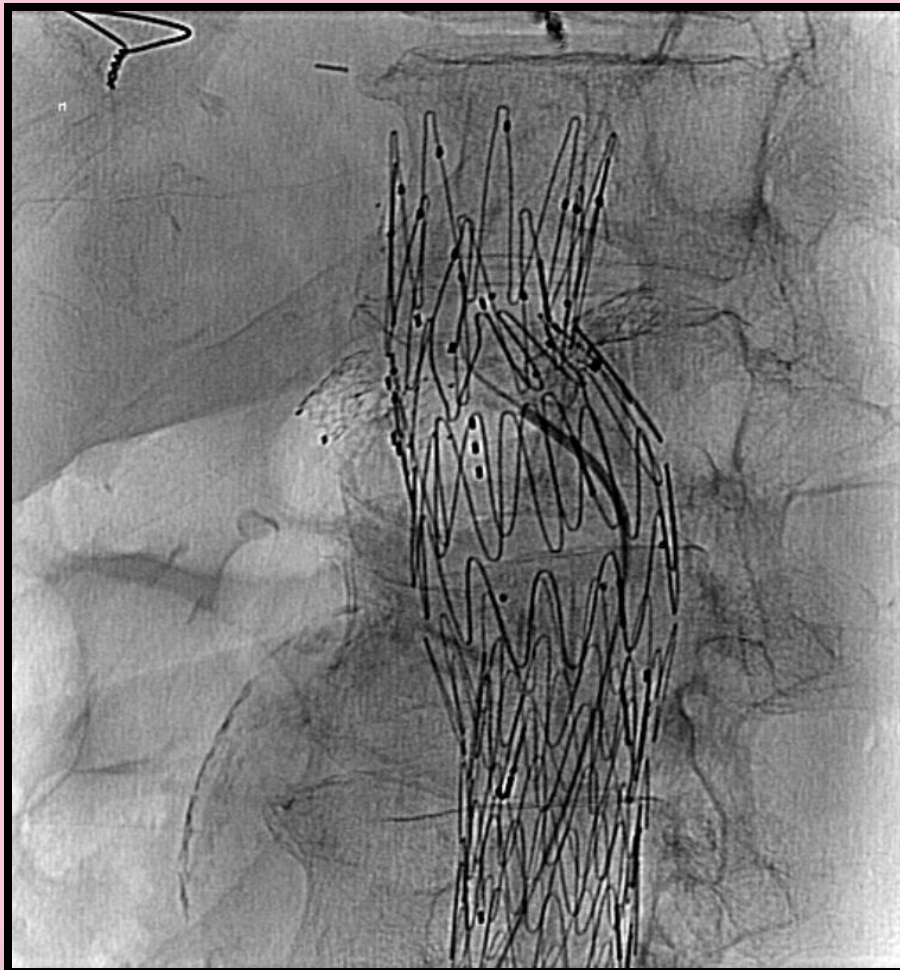
◆ —◆
CT: celiac trunk, LRA: left renal artery, RA: renal
artery, RRA: right renal artery, SMA: superior
mesenteric artery.

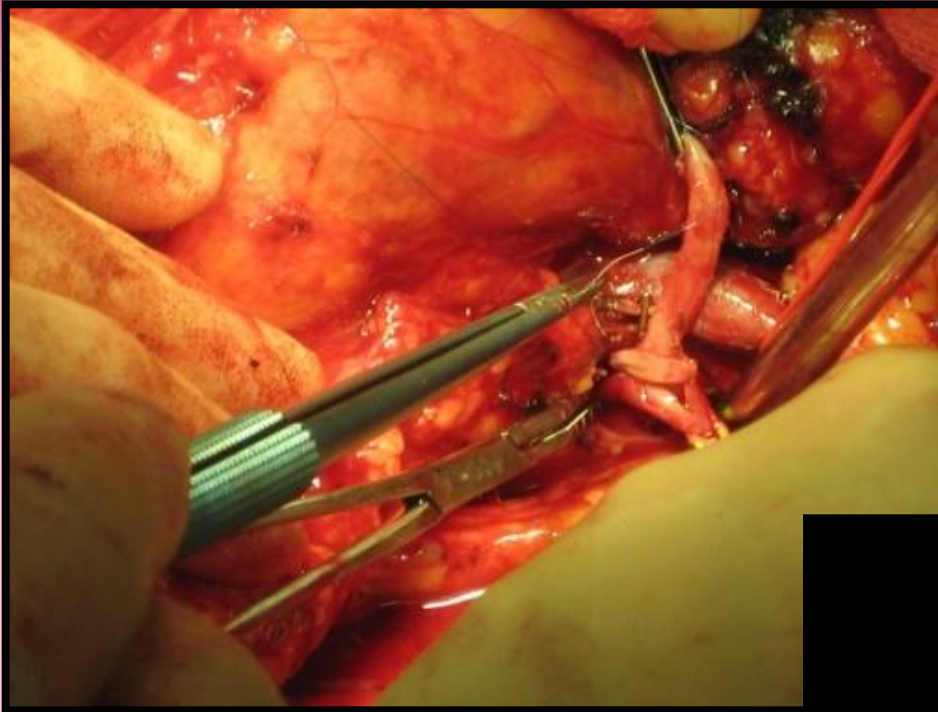


Branch Stent Dislocation

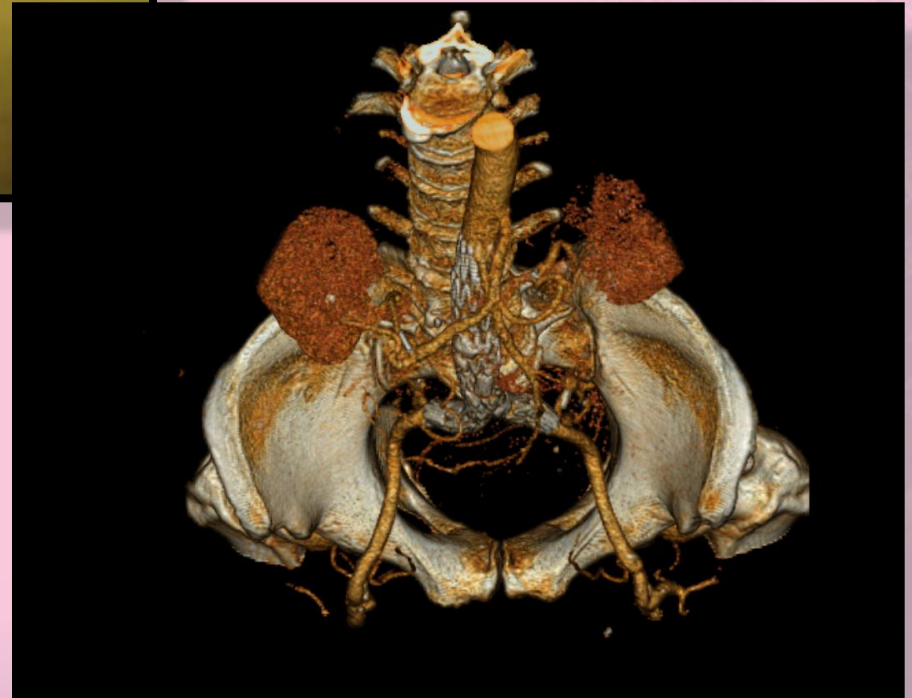


Significant Kinking





Hepato-renal, spleno-renal bypass surgery for unsalvageable occluded renal branches



Conclusions

- The range of aneurysms that these grafts can treat is limited
- The data relating to the number of patients that can be treated is fundamentally flawed
- There is no data on durability.
- There is no proof that these grafts are what is needed or that they are up to the job at this time.

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