



Un garrot étroit est utile pour le 2ème temps de superficialisation des veines basiliques ou brachiales

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Disclosure

Speaker name: Nicola Pirozzi

I do not have any potential conflict of interest



Humero-basilic AVF + vein superficialisation

Dagher F, Gelbert R, Ramos E, Sadler J.

The use of basilic vein and brachial artery as an A-V fistula for long term hemodialysis.

J Surg Res 1976;20:373–6.



***The Brachial Artery-basilic Vein Arterio-venous Fistula in Vascular Access for Haemodialysis—
A Review Paper***

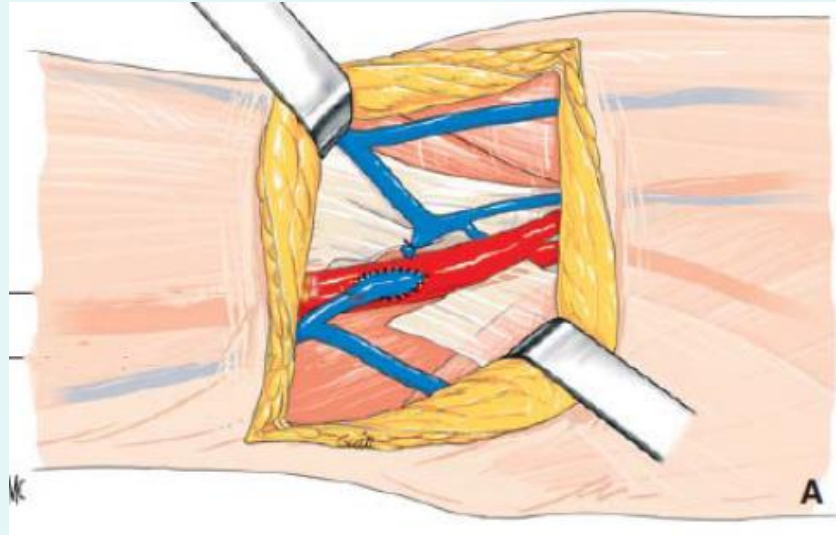
F.P. Dix, Y. Khan, H. Al-Khaffaf

European Journal of Vascular and Endovascular Surgery

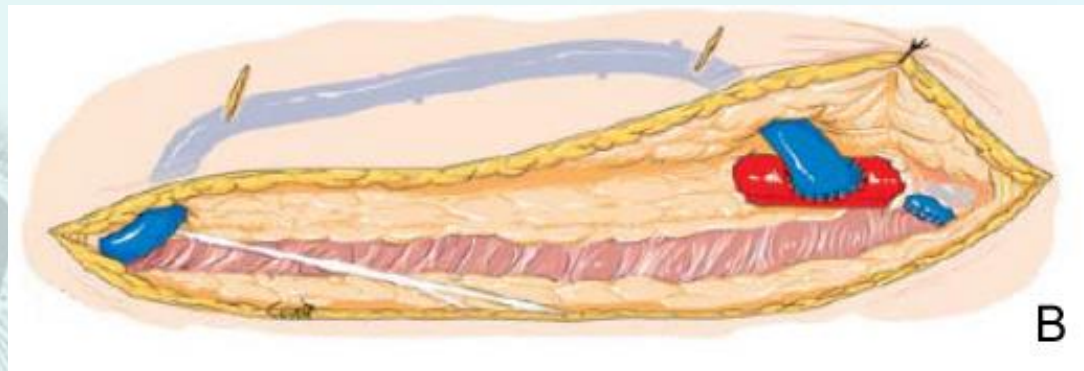
Volume 31, Issue 1, Pages 70-79 (January 2006)



Humero-basilic AVF



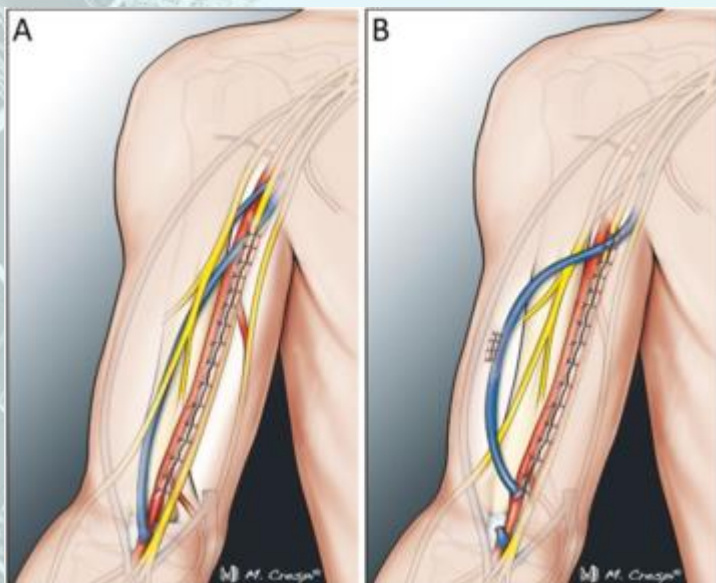
+ vein superficialisation





A Comparison of Two Surgical Techniques for the Second Stage of Brachiobasilic Arteriovenous Fistula Creation

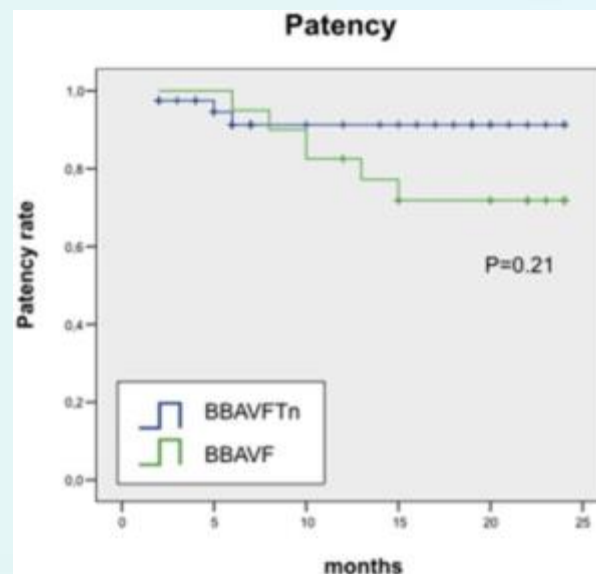
Mauro R et al Artif Organs. 2016



Days	BBAVFTn	BBAVF	P
Mean length of hospital stay	2(1)	3(2)	0.52
Time of venipuncture	11(10)	23(8)	0.01
Blood transfusion	0/40 (0%)	1/40 (3%)	1
Ease of cannulation	32/40 (80%)	15/40 (38%)	<0.001

FUSH, fistula used successfully for hemodialysis; BBAVF, second stage of brachiobasilic arteriovenous fistula; BBAVFTn, second stage of brachiobasilic arteriovenous fistula with tunneling of the basilic vein.

« elevation » VS « transposition »





[J Vasc Surg.](#) 2015 Mar;61(3):809-16.

Similar failure and patency rates when comparing one- and two-stage basilic vein transposition.

[Cooper J](#)¹, [Power AH](#)¹, [DeRose G](#)¹, [Forbes TL](#)¹, [Dubois L](#)².

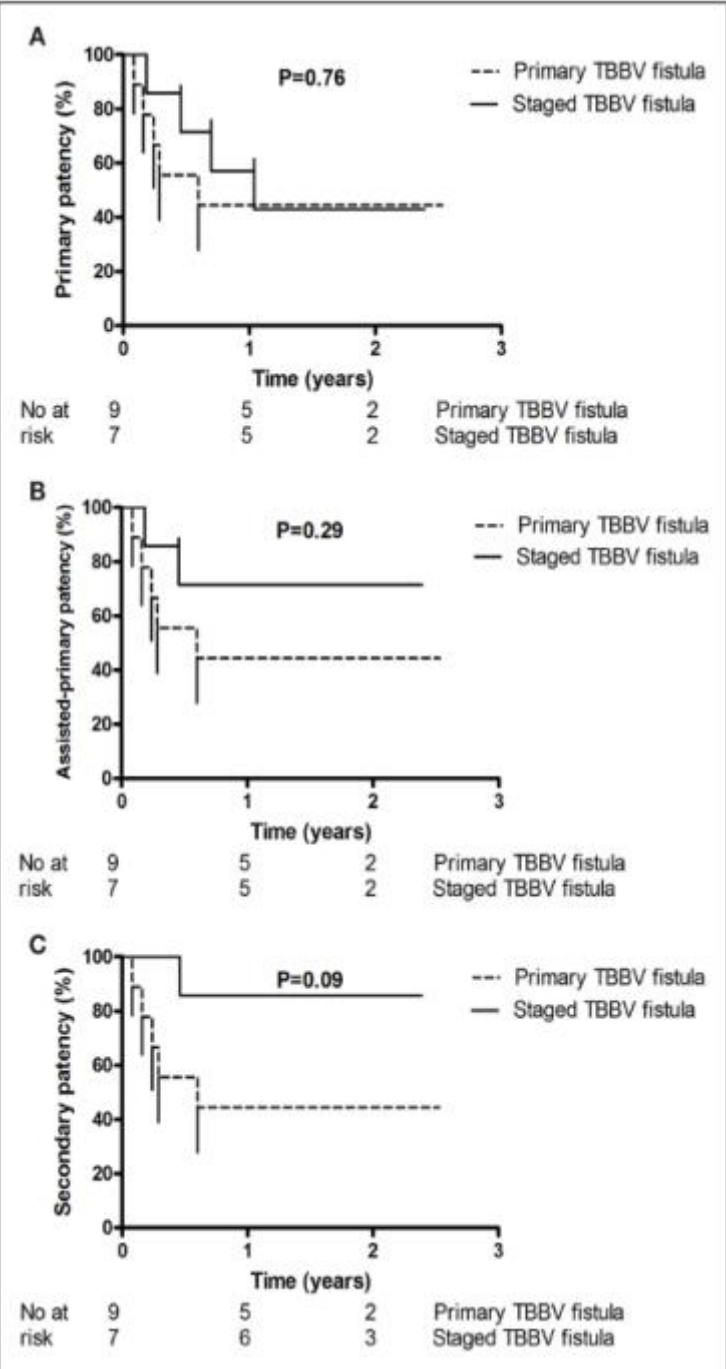
CONCLUSIONS:

Meta-analysis of the existing literature comparing one-stage and two-stage basilic vein transposition suggests no difference in failure and patency rates, despite the two-stage procedure's being used in patients with smaller basilic veins. These findings are limited by the small size, observational design, and inconsistent quality of included studies. **Reserving a two-stage procedure for patients with smaller basilic veins appears justified, although the strength of the evidence is limited.**

Front Surg. 2015 Apr 29;2:14.

Randomized controlled trial comparing primary and staged basilic vein transposition.

Kakkos SK, Tsolakis IA, Papadoulas SI, Lampropoulos GC, Papachristou EE, Christeas NC, Goumenos D, Lazarides MK.





J Vasc Access. 2008

Brachial vein transposition arteriovenous fistula: is it an acceptable option for chronic dialysis vascular access?

Torina PJ, Westheimer EF, Schanzer HR.

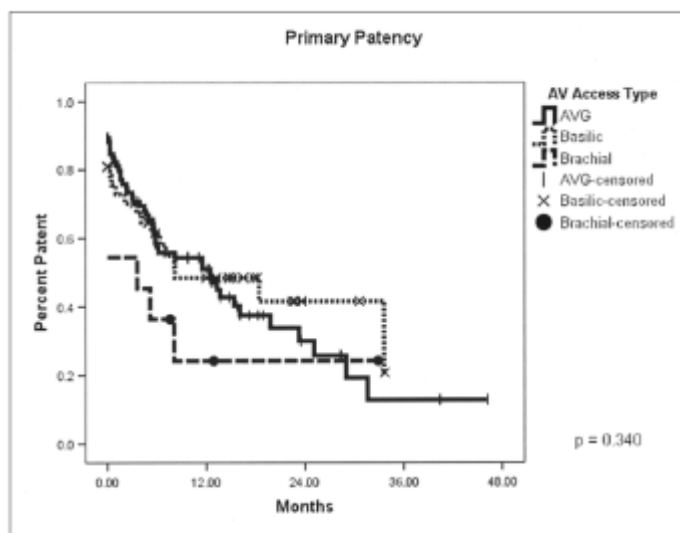


Fig. 1 - Kaplan-Meier survival analysis of the primary patency rates for one-stage brachial vein AVFs, basilic vein transposition fistulas, and AVGs.

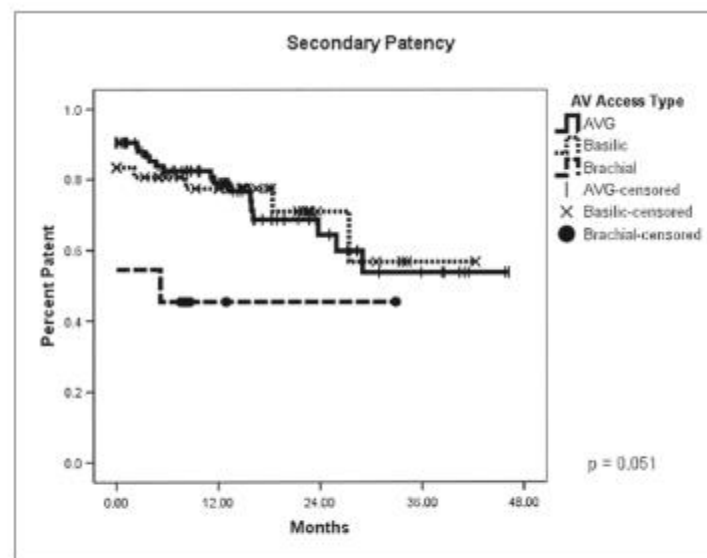


Fig. 3 - Kaplan-Meier survival analysis of the secondary patency rates for one-stage brachial vein AVFs, basilic vein transposition fistulas, and AVGs.

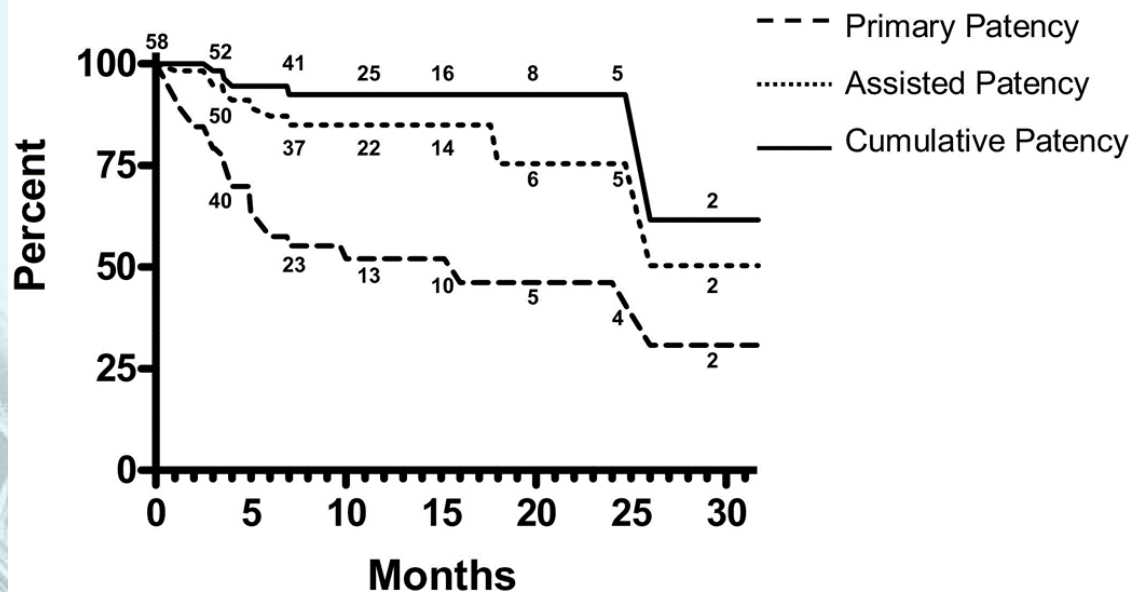


Jour Vasc Surg 2009

Brachial vein transposition arteriovenous fistulas for hemodialysis access

William C. Jennings, MD, Matthew J. Sideman, MD, Kevin E. Taubman, MD, Thomas A. Broughan, MD

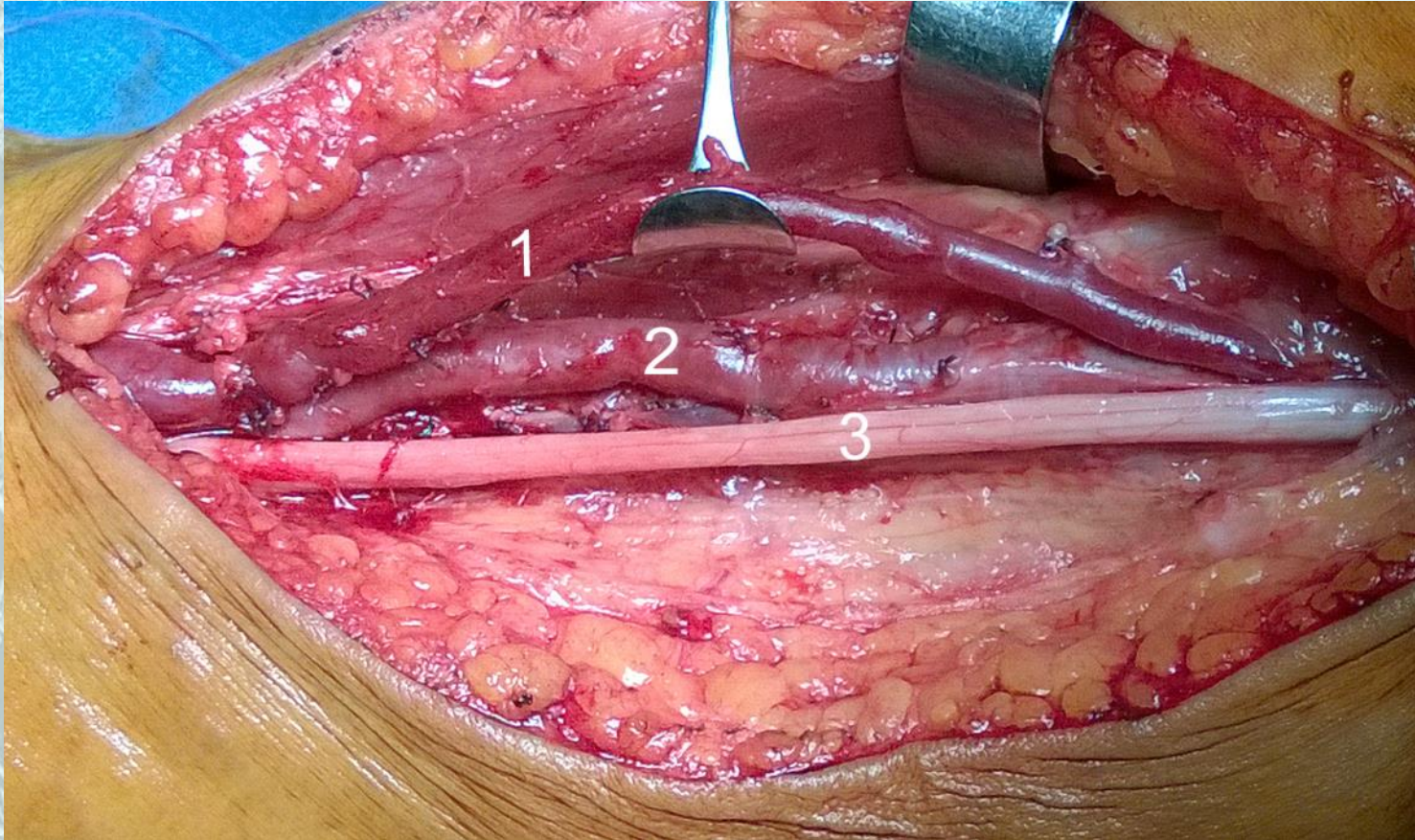
Brachial Vein-AVF Transposition Patency

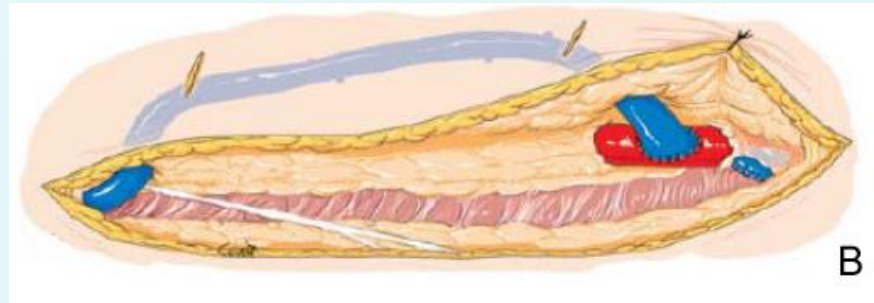




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Procedures requiring incision up to the axilla



Impossible to use preventive haemostasis





Preventive Haemostasis

Bloodless operative field

- Sharp and minimally invasive procedure
- Reduced risk (bleeding, nerve injury etc)
- Reduced operative time

Bourquelot PD.

Preventive haemostasis with an inflatable tourniquet for microsurgical distal arteriovenous fistulas for haemodialysis.

Microsurgery. 1993;14(7):462-463.

Pirozzi N et al

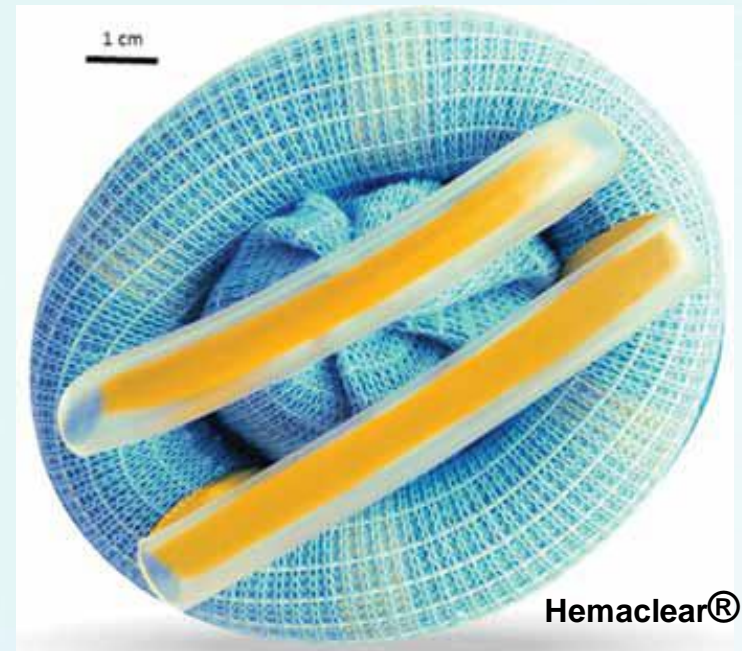
Preventive hemostasis for hemodialysis vascular access surgical reinterventions.

J Vasc Access. 2013;14(2):193-195.



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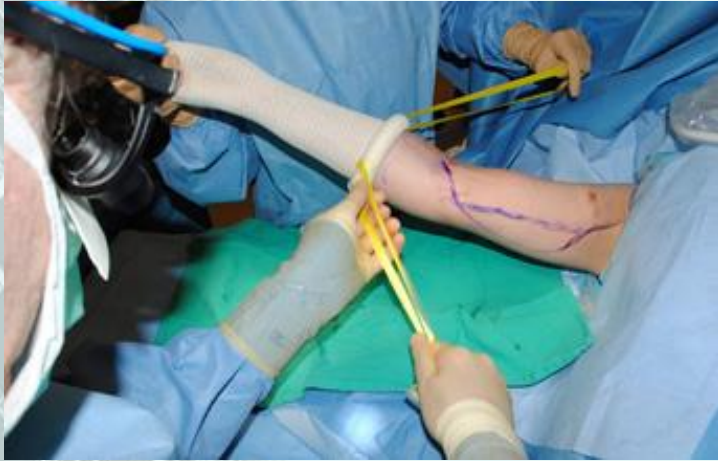
Hemaclear®



Ladenheim E et al

A sterile elastic exsanguination tourniquet is effective in preventing blood loss during hemodialysis access surgery.

J Vasc Access. 2013;14(2):116-119.



Bourquelot P, Levy BI.

Narrow elastic disposable tourniquet (Hemaclear®) vs. traditional wide pneumatic tourniquet for creation or revision of hemodialysis angioaccesses.

J Vasc Access. 2016 May 7;17(3):205-9



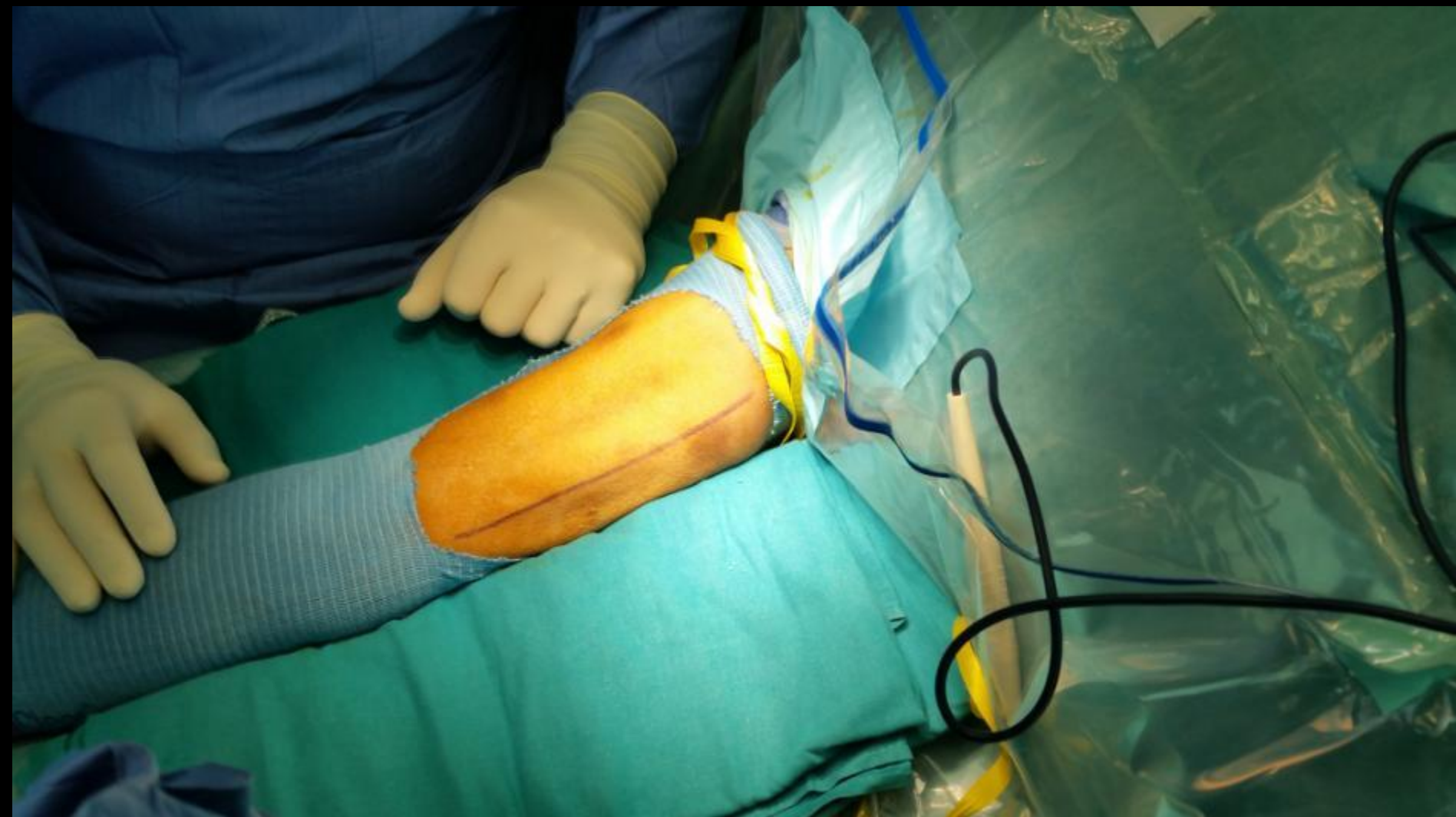






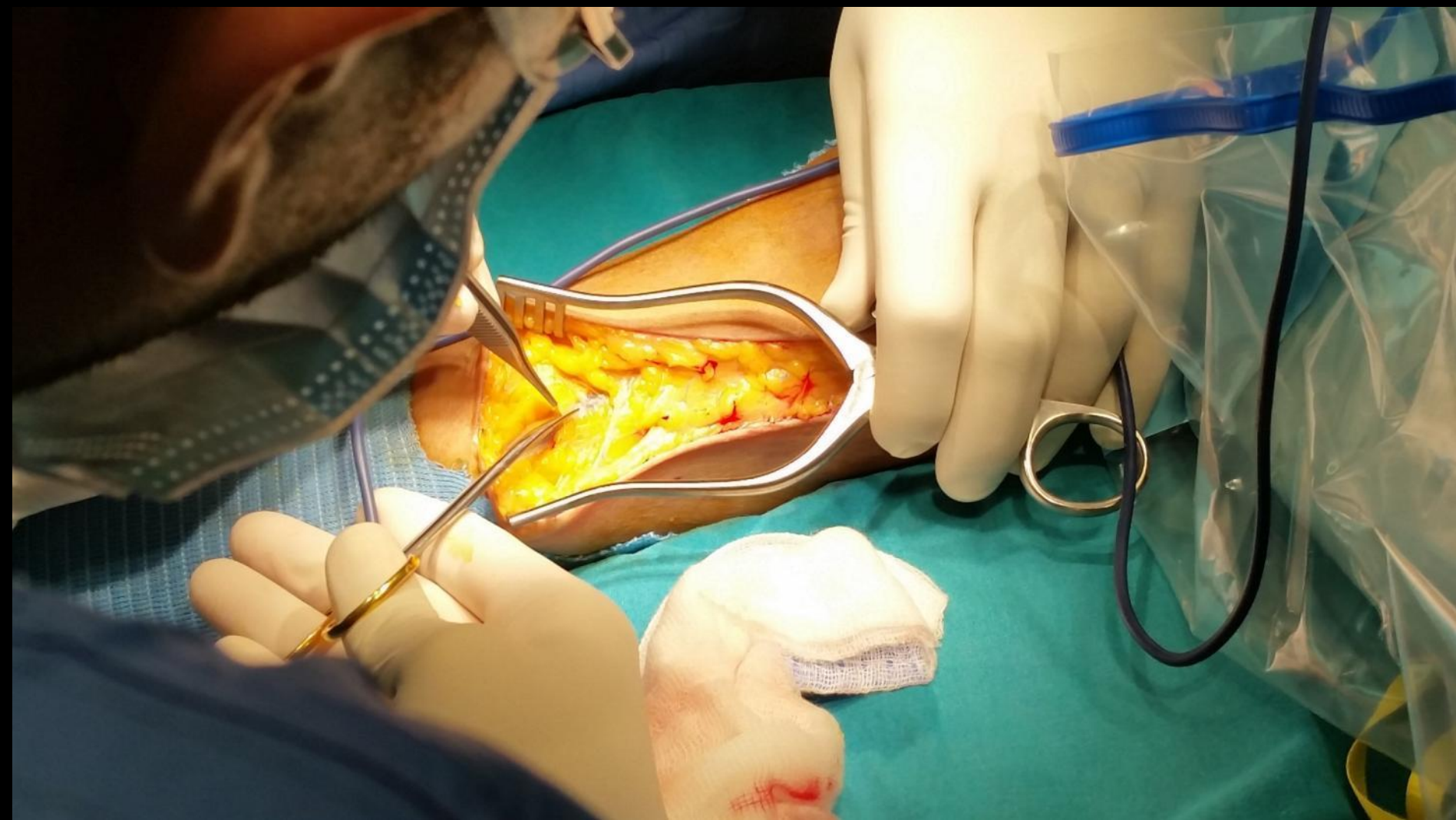




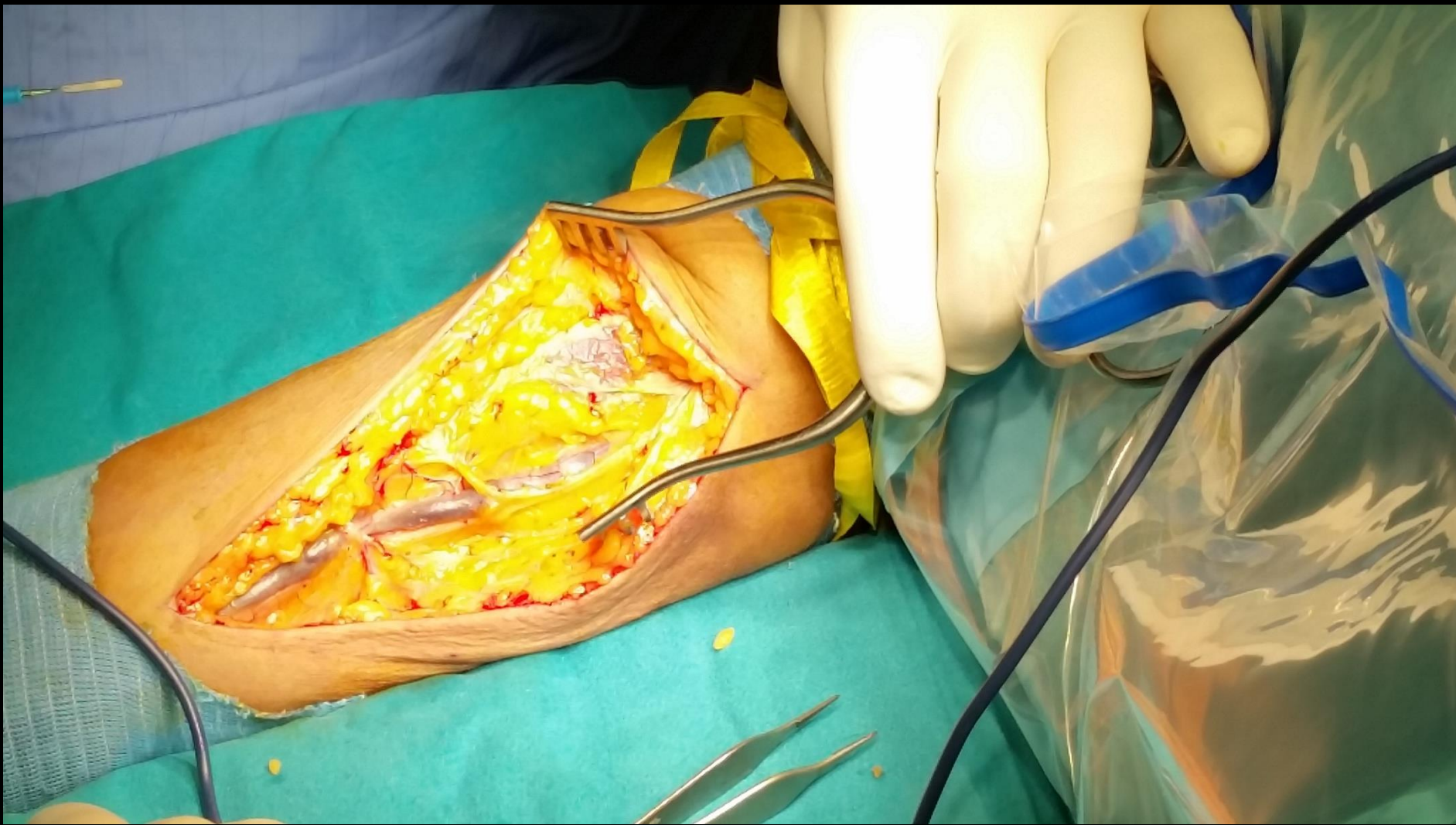




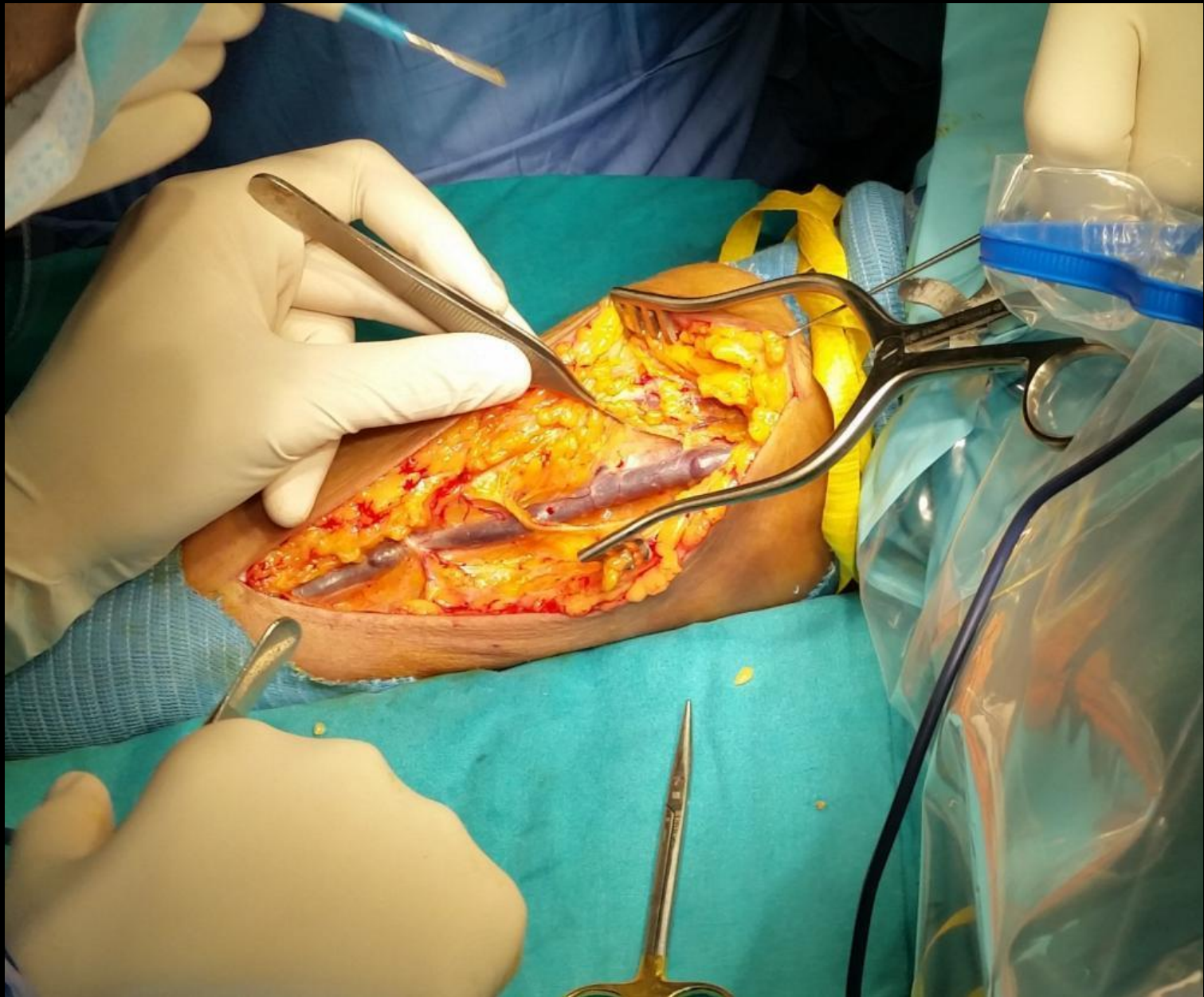


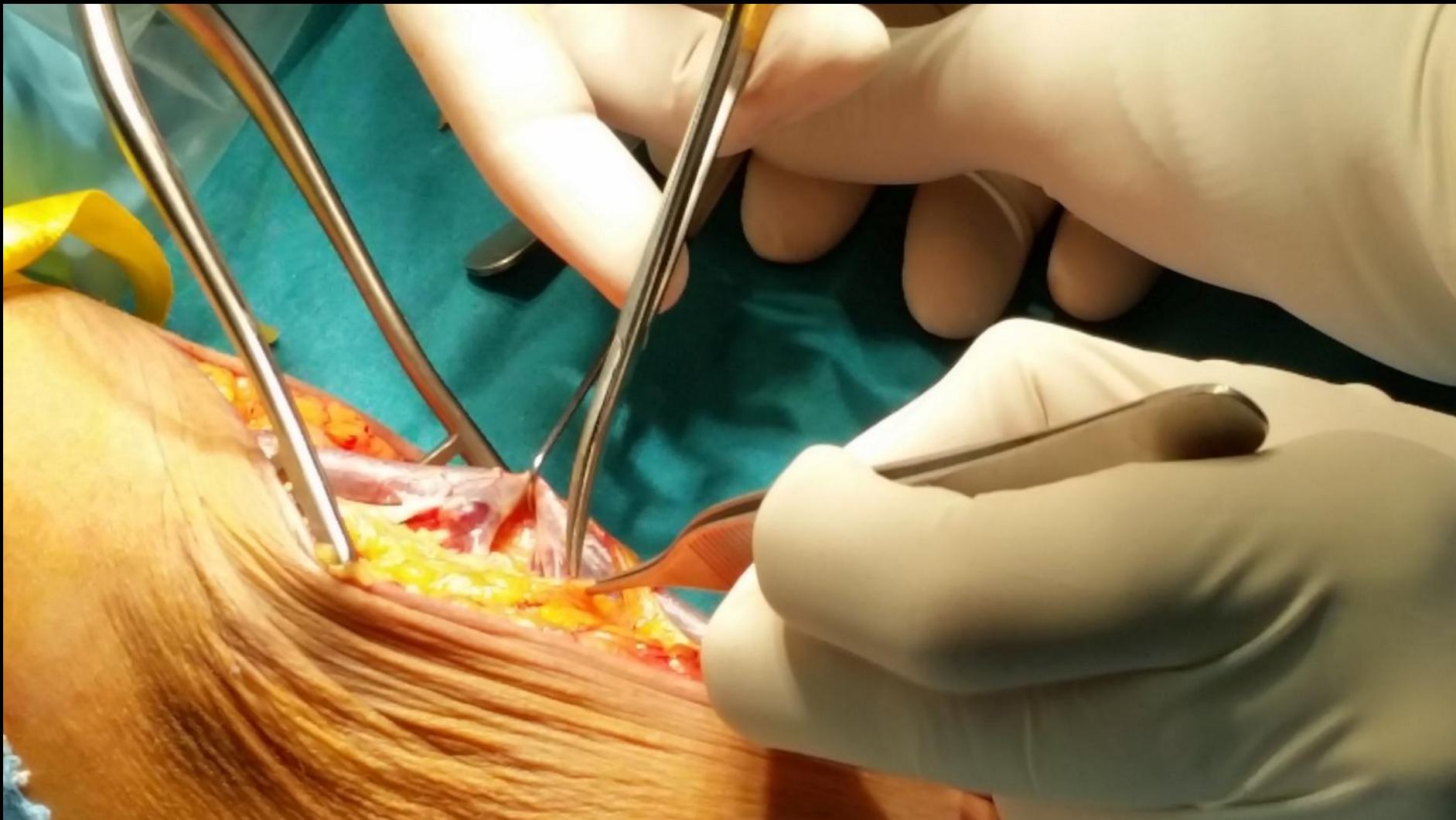






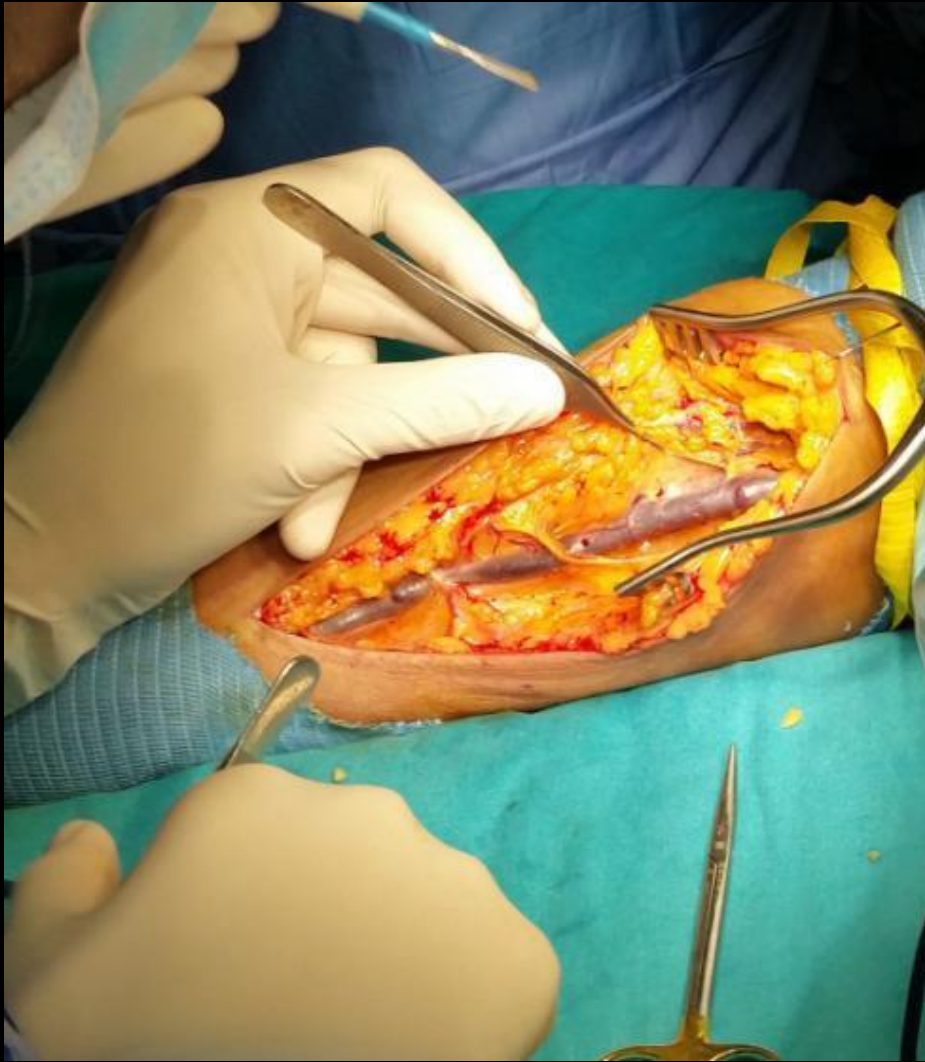


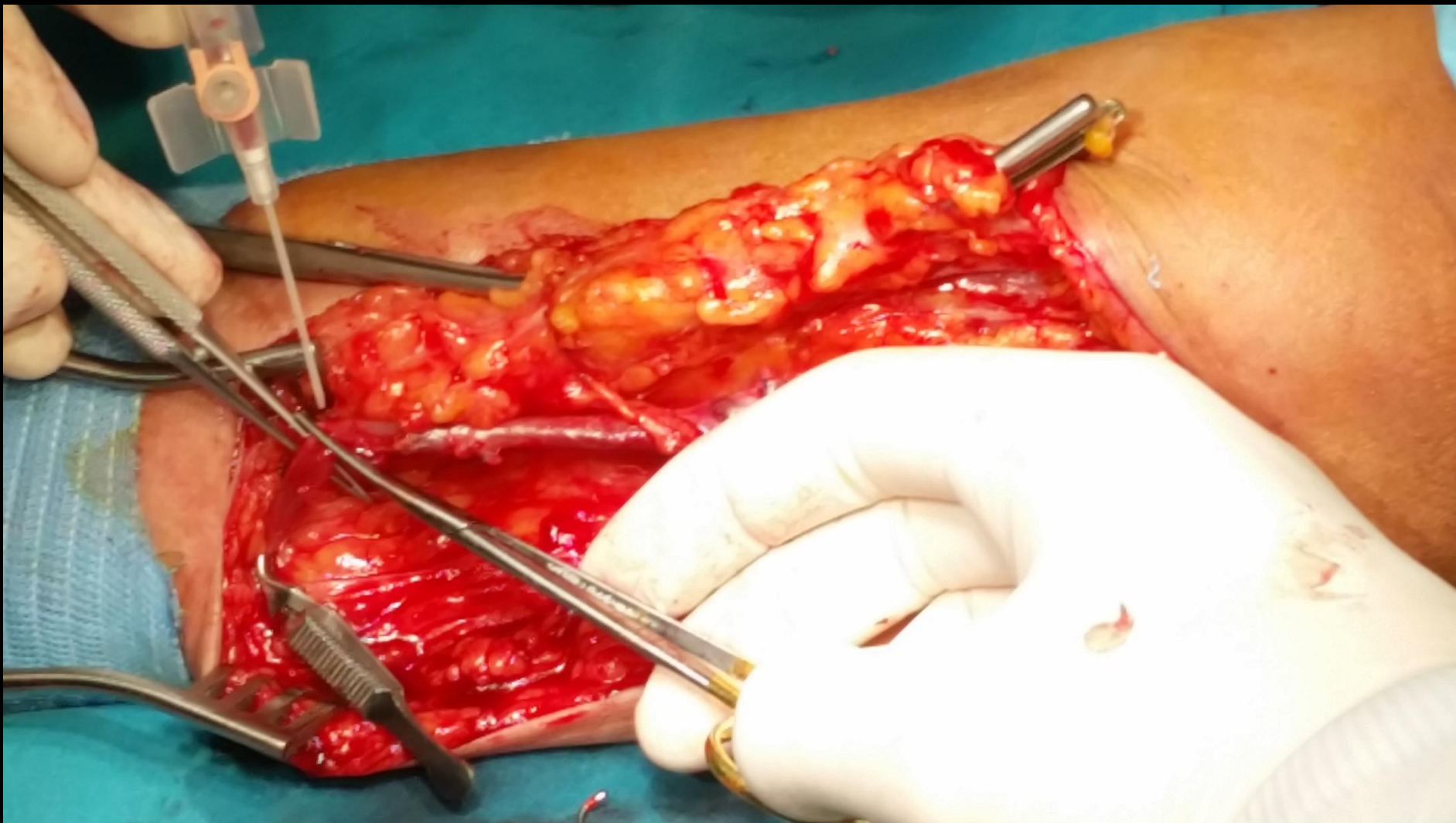






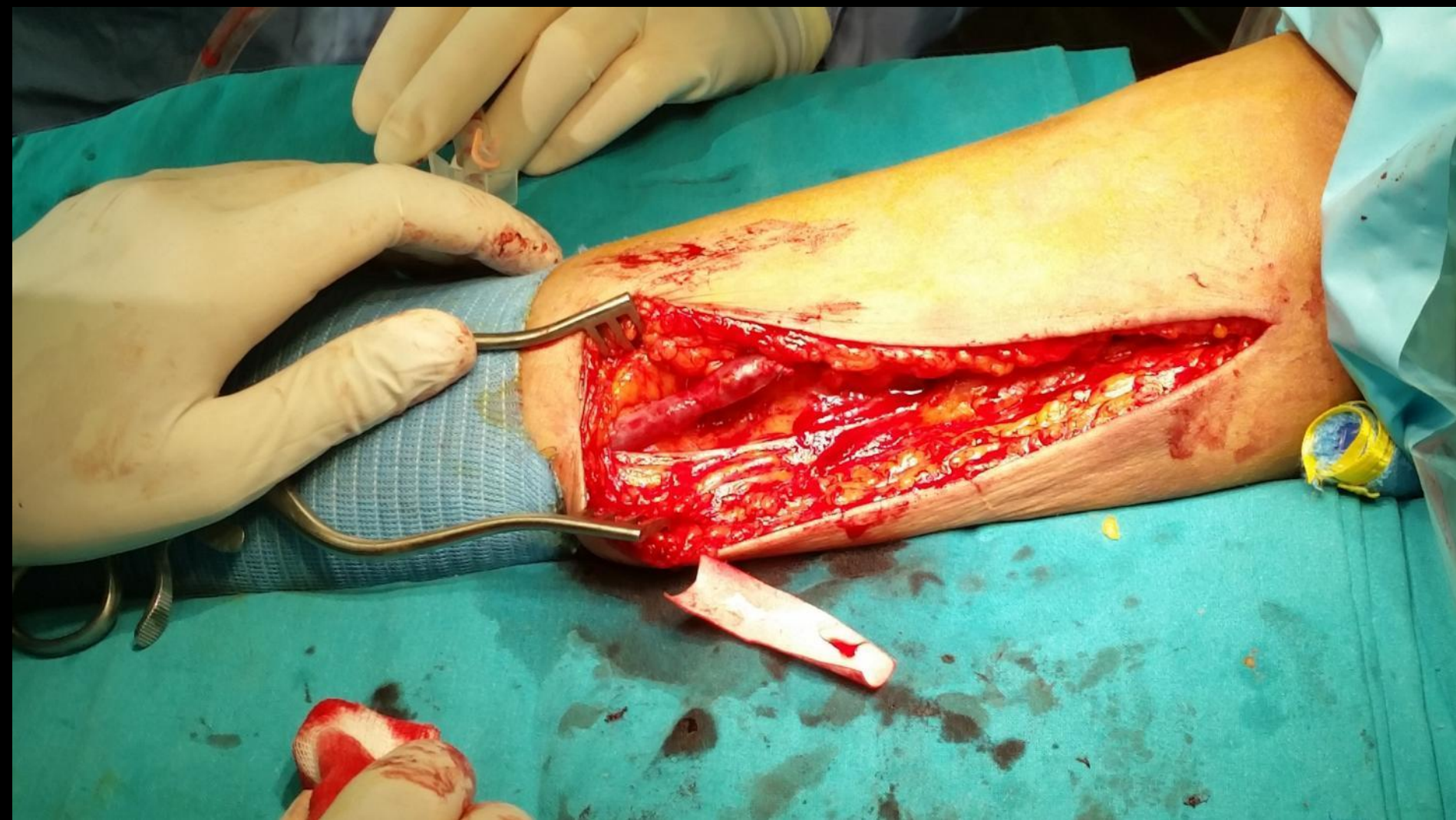


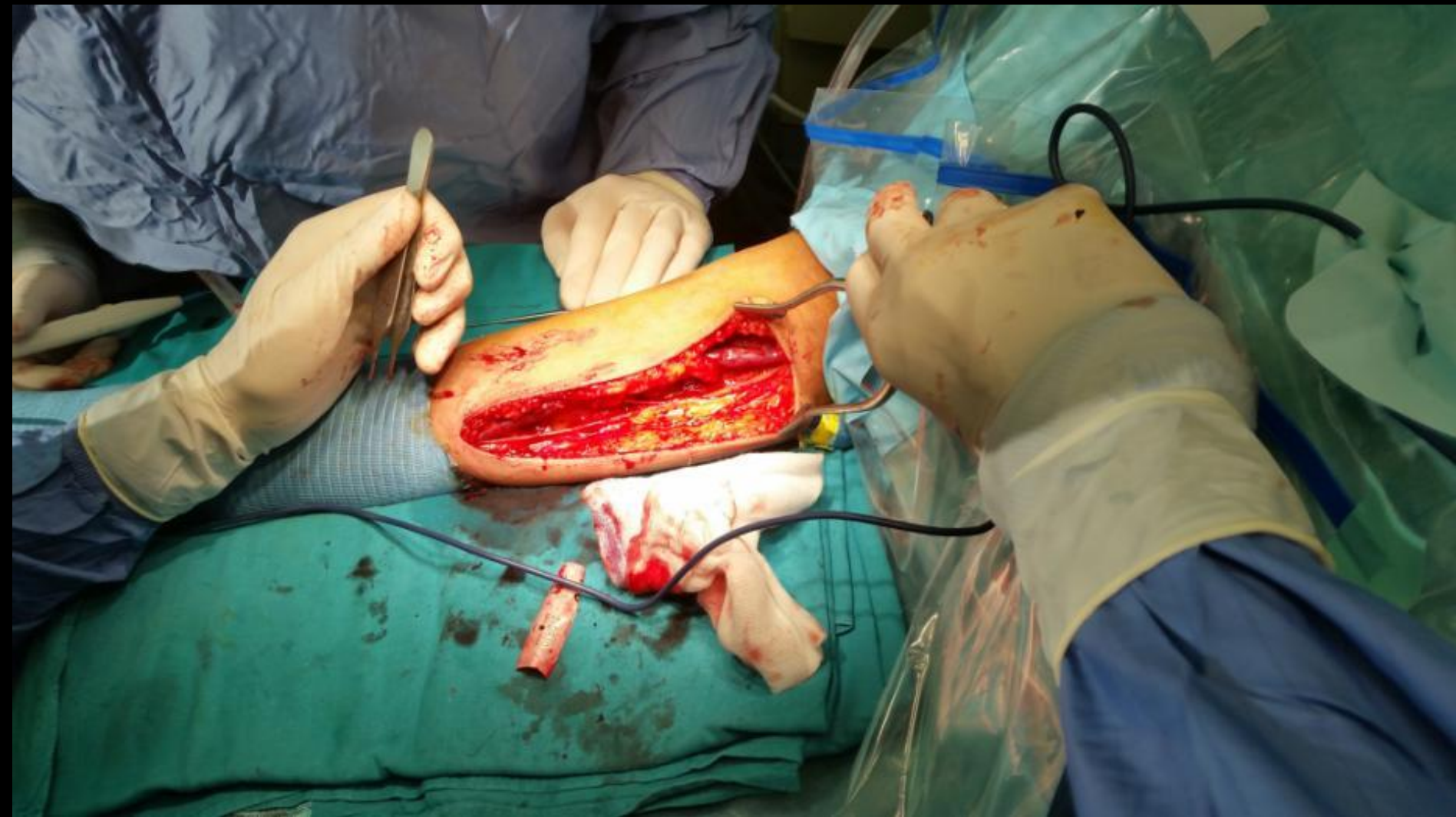














CONCLUSIONS

Preventive haemostasis is safe and effective for AVF surgery

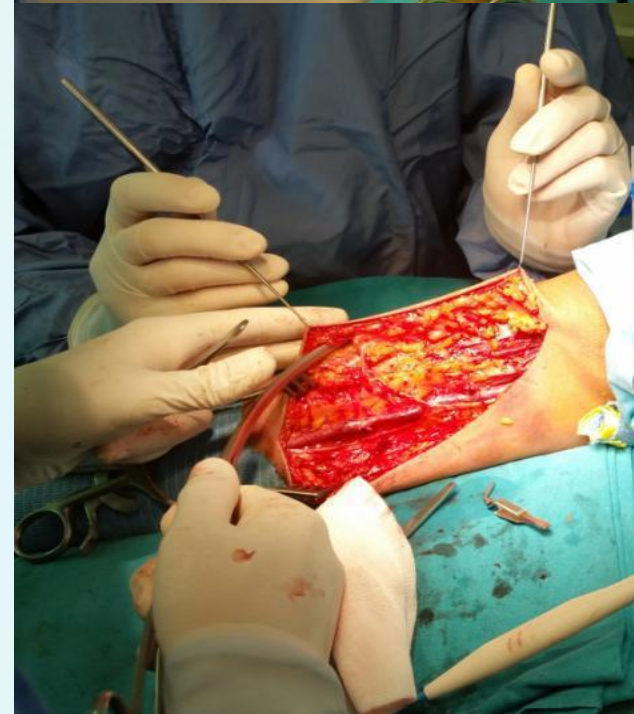
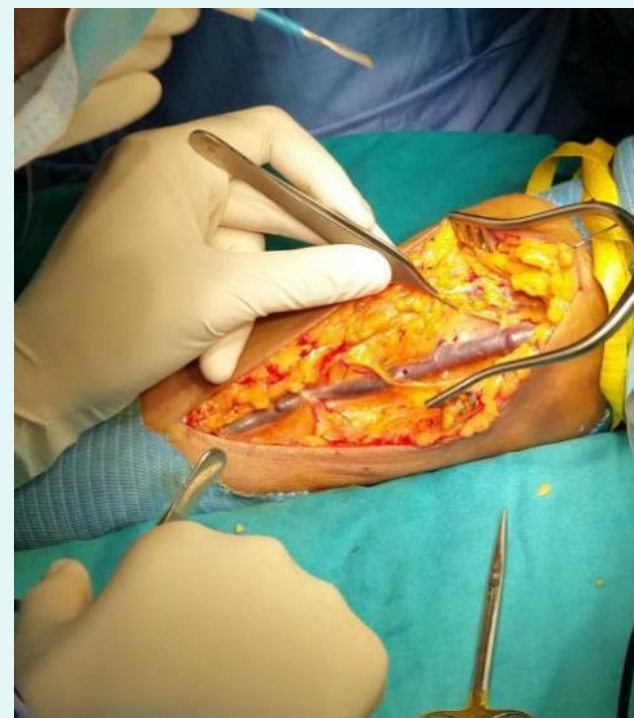
The new device (Hemaclear®) allow the use of this technique even for arm deep vein superficialisation surgery

Favorable personal experience

An extended use and collection of data would provide interesting evidence (nicola.pirozzi@uniroma1.it)

CONCLUSIONS#2

- Better operative field visualization
- Reduced operative time
- Sharpness of the procedure
- Reduced risk of bleeding and nerve injury





Merci beaucoup...

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