

2022 MID-ATLANTIC CONFERENCE
10th ANNUAL CURRENT CONCEPTS IN
VASCULAR THERAPIES

2022

Hilton Virginia Beach Oceanfront
Virginia Beach, Virginia

APRIL 28-30



Sentara Vascular Specialists

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VASCULAR THERAPIES

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Percutaneous AV Fistula

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Specialists*

April 30th 2022

Disclosures



Outline

- What is a surgical AV fistula?
- What is a percutaneous AV fistula?
 - Ellipsys
 - WavelinQ
- What role does percutaneous AV fistula have?
 - Data



What is a Surgical AV Fistula?

- Direct connection made between an artery and a vein to create a dialysis access
 - Performed in the operating room
 - Anesthesia required
 - General vs Regional vs Local + sedation (MAC)
 - Different locations in arm
 - Outpatient surgery

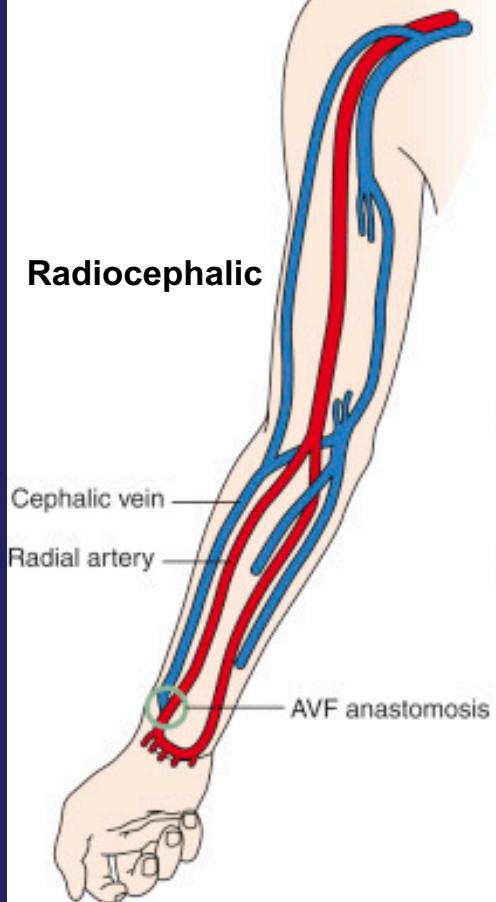


Options for a Surgical AV Fistula?

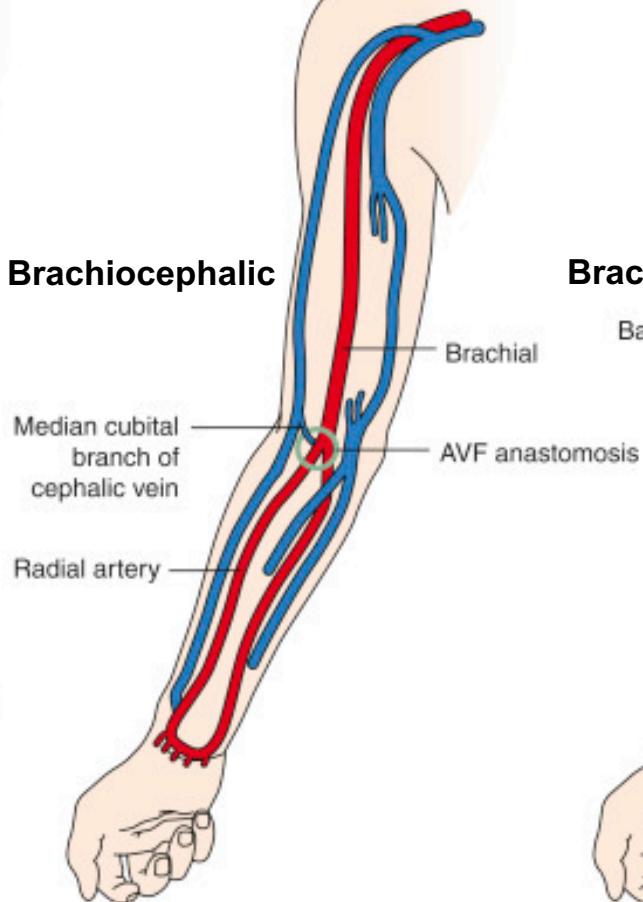
- Wrist
 - Radiocephalic “Brescia-Cimino”
- Antecubital Fossa
 - Brachiocephalic “Kaufman”
- Medial Upper Arm
 - Brachiobasilic “BVT”



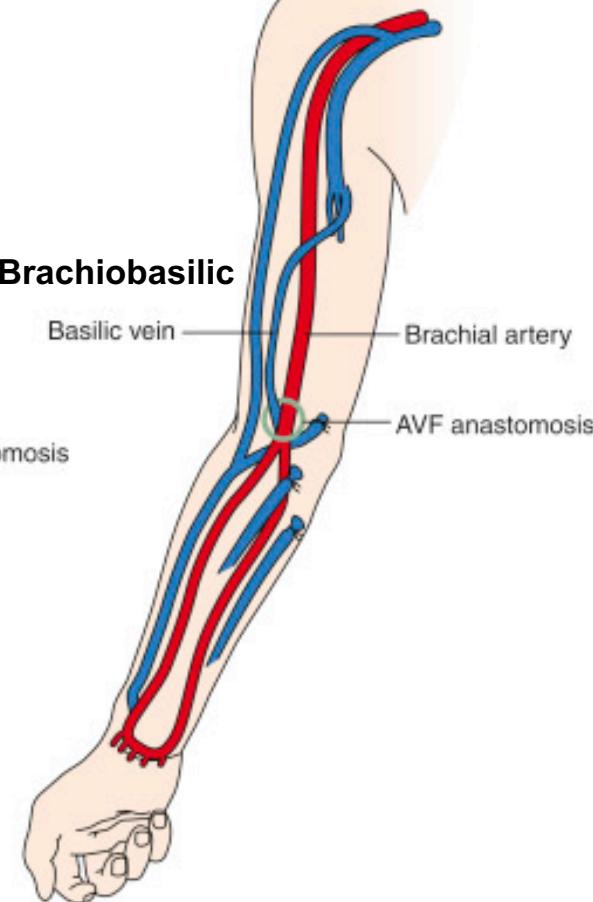
Radiocephalic



Brachiocephalic



Brachiobasilic









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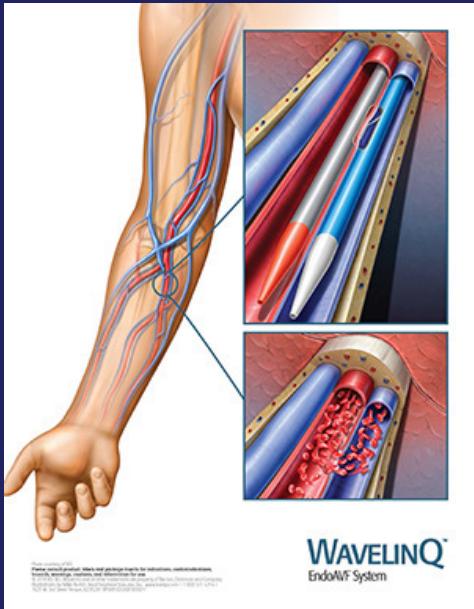
What is a percutaneous AV Fistula?

- Direct connection made between an artery and a vein to create a dialysis access WITHOUT AN INCISION
 - No need for operating room or anesthesia
 - Angio suite
 - Moderate sedation
 - Limited to Forearm only
 - Outpatient procedure

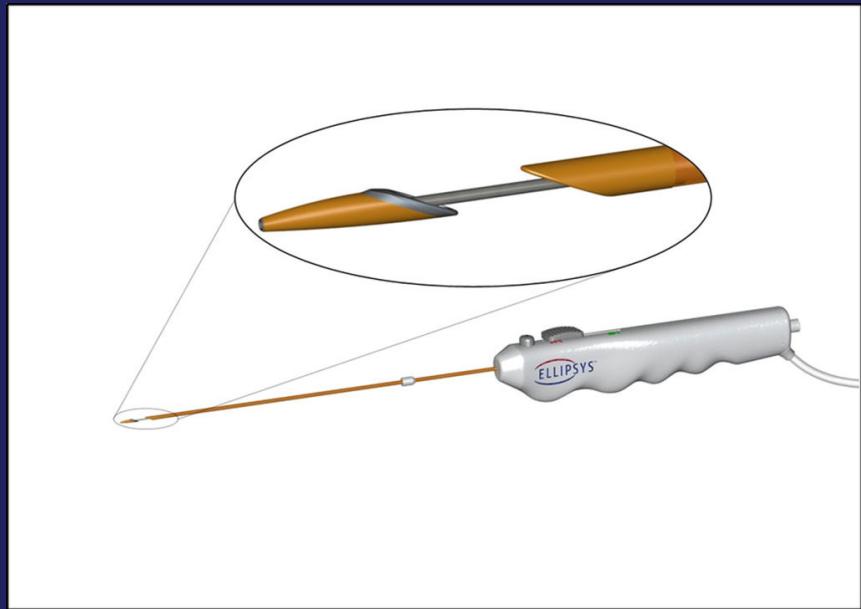


Percutaneous AV Fistula

BD WavelinQ



Medtronic Ellipsys



WavelinQ

- 4 French device
- 2-3 access sites
- Ultrasound guided artery and vein access
- Administer IV heparin
- Perform arm venogram and arteriogram (limit contrast)
- Place a catheter in artery and vein
- Confirm that catheters line up magnetically



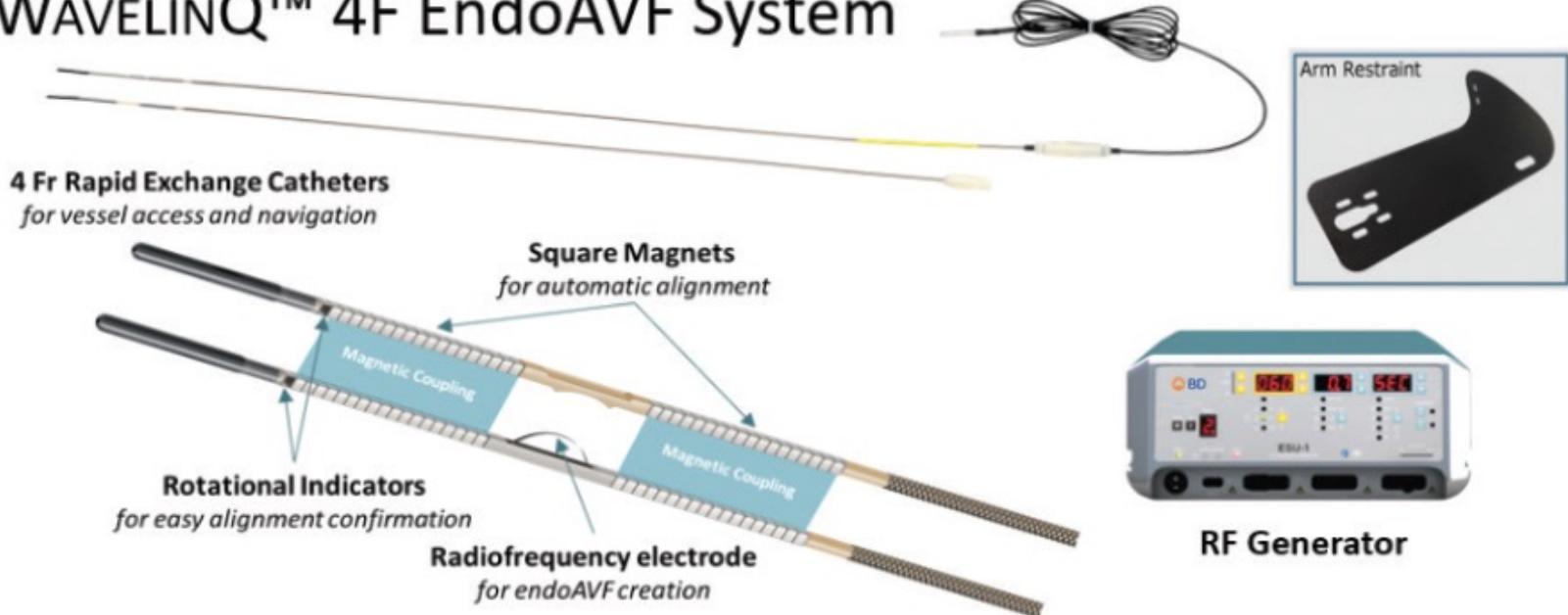
WavelinQ

- RF energy delivered to create the anastomosis
- Perform a arteriogram to check anastomosis and venous outflow veins (cephalic, basilic and brachial)
- Coil embolization of brachial vein to direct blood flow into superficial veins (cephalic/basilic)

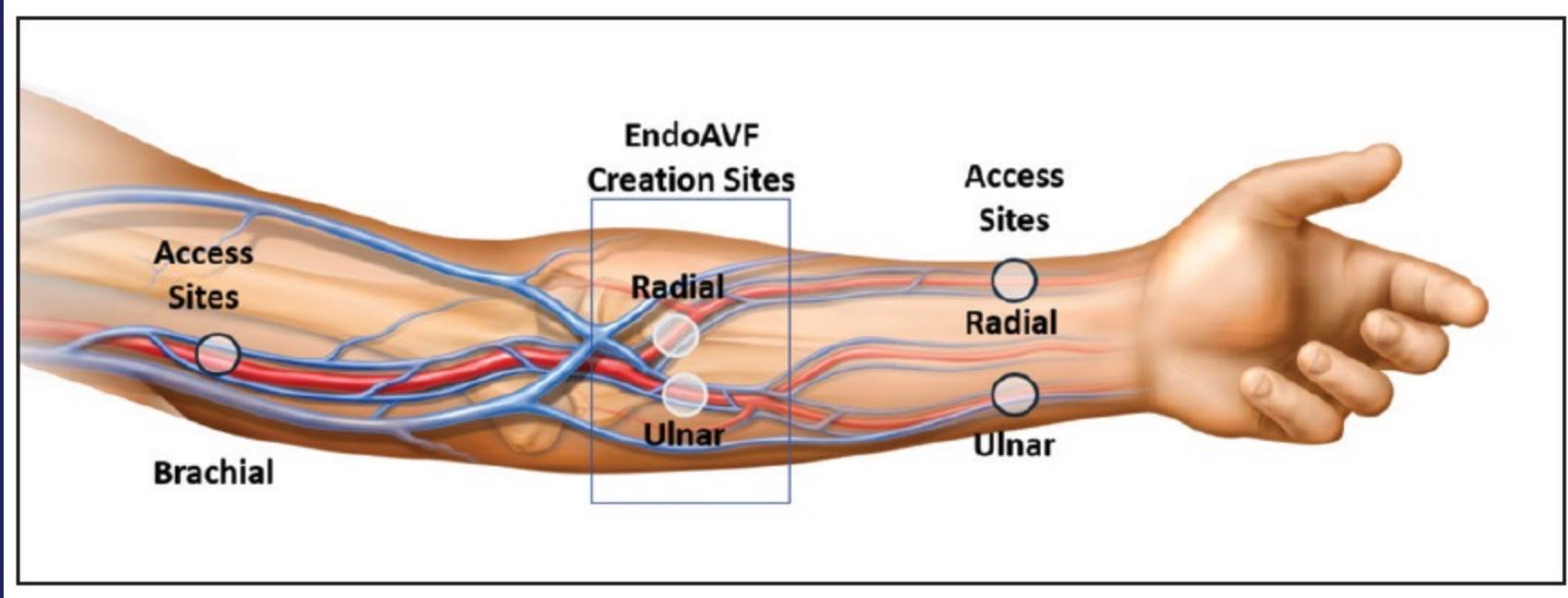


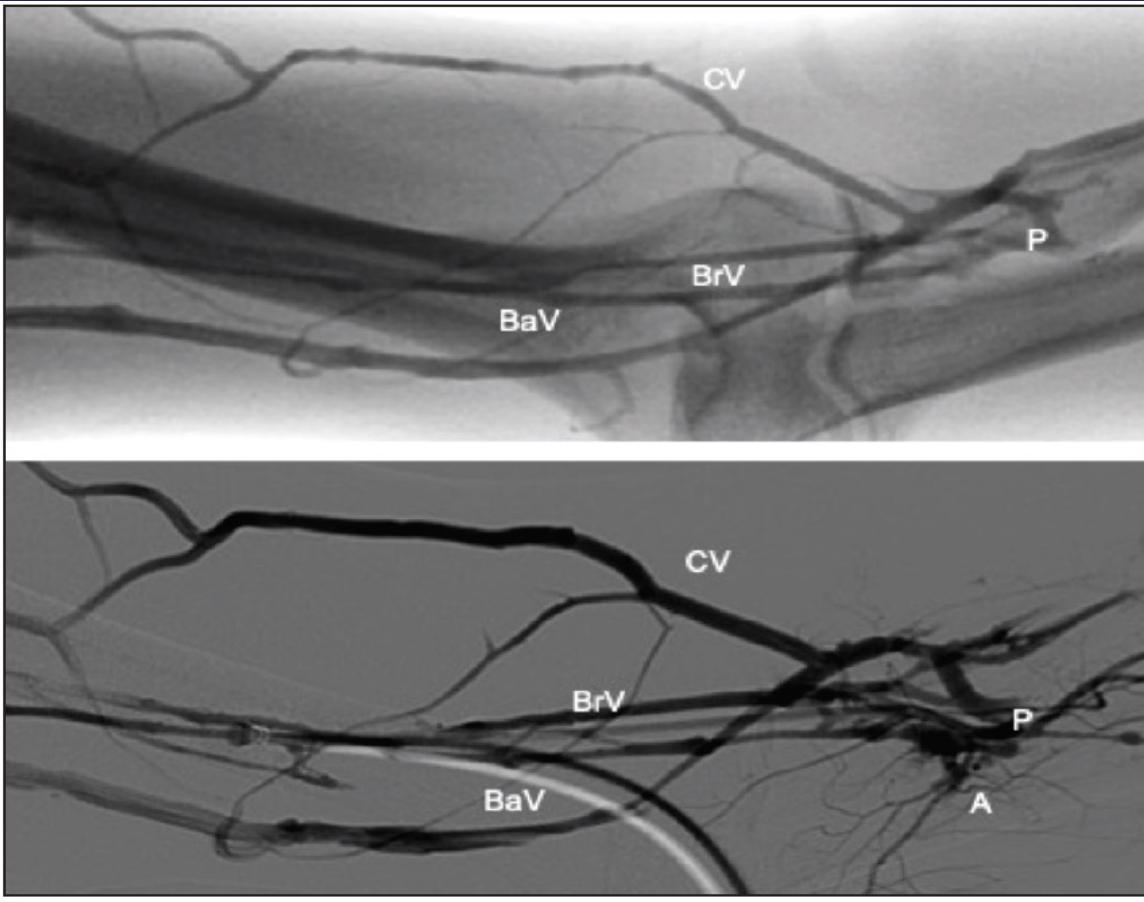
WavelinQ Device

WAVELINQ™ 4F EndoAVF System

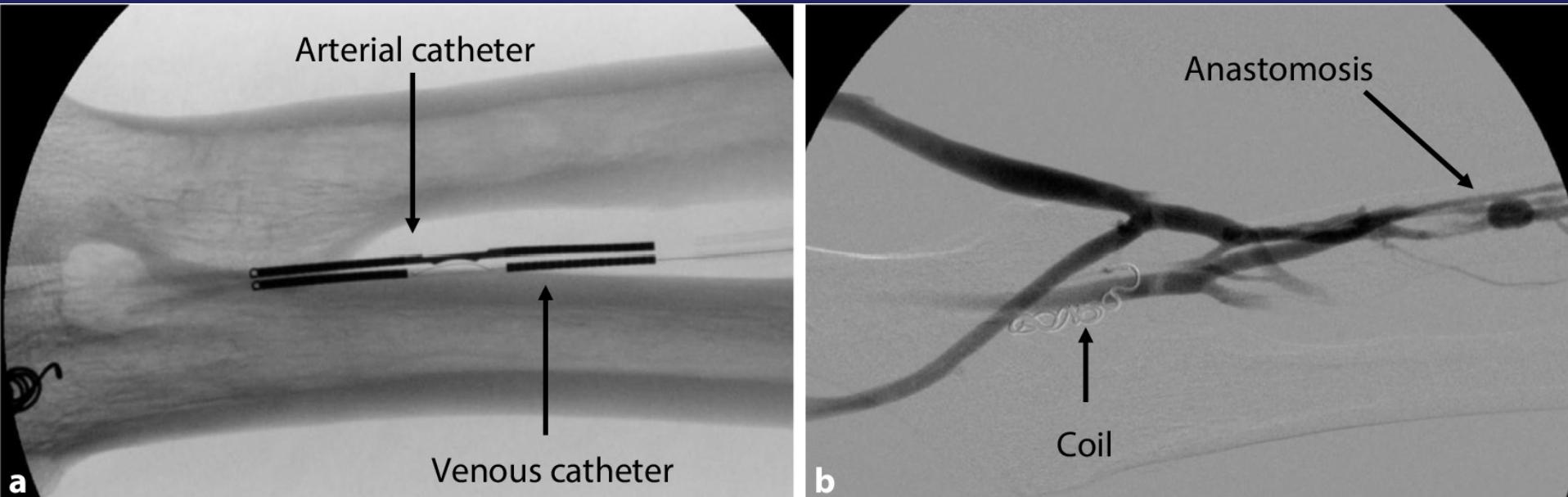


WavelinQ Device





WavelinQ Device



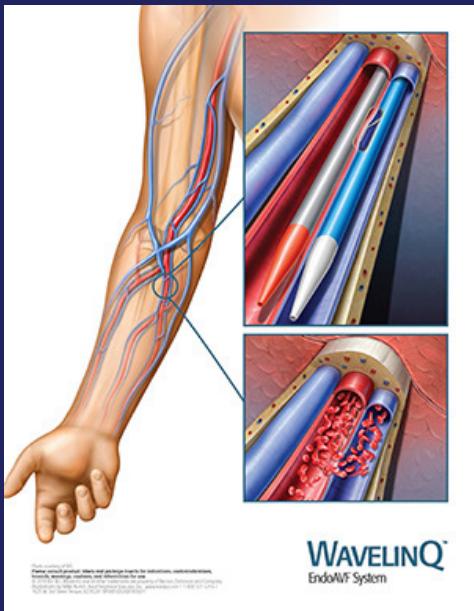
Split flow
fistula



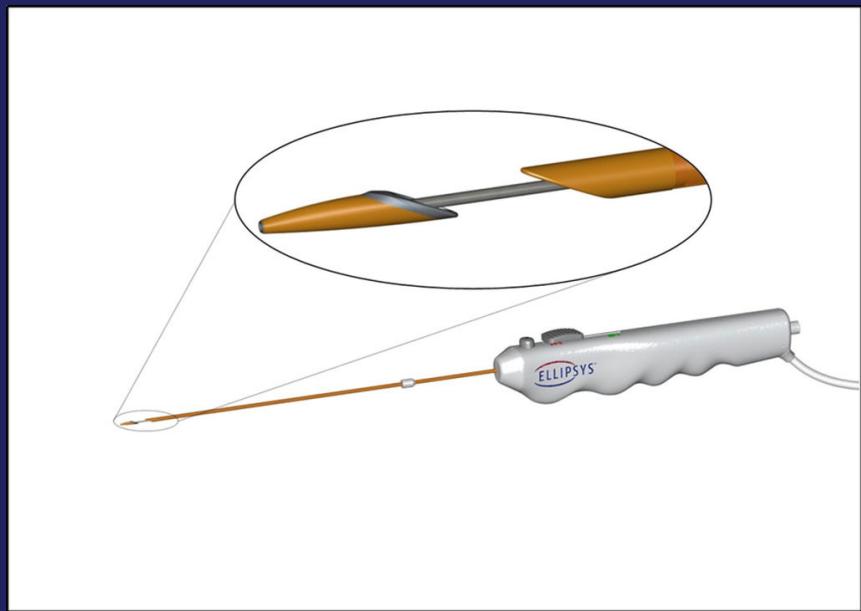
Single flow
fistula

Percutaneous AV Fistula

BD WavelinQ



Medtronic Ellipsys



Ellipsys

- 6 French device
- Single access site
- Ultrasound guided cephalic vein access into the proximal radial artery
 - No contrast, No fluoroscopy
- Administer IV heparin
- Place catheter through vein crossing into artery

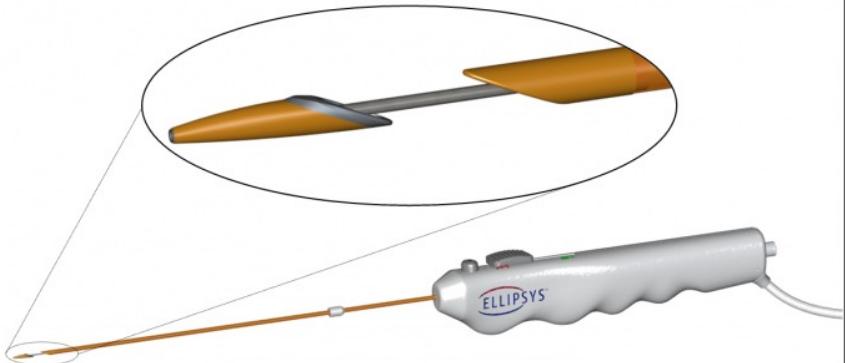


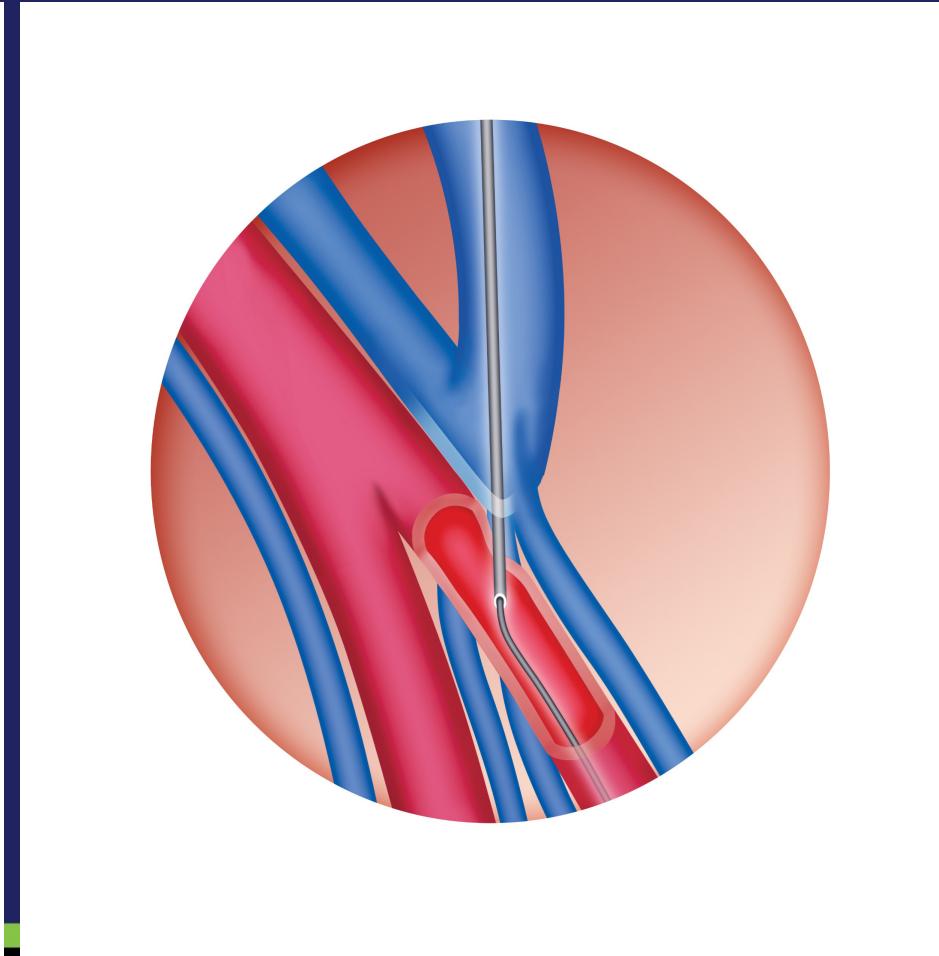
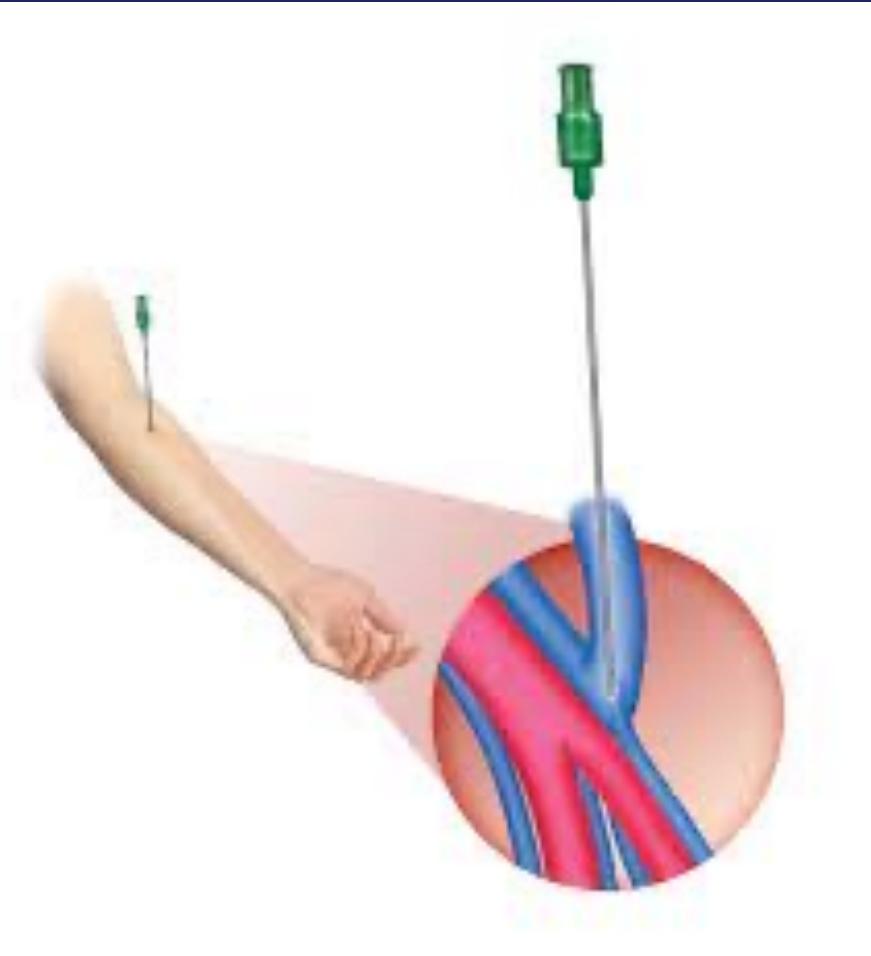
Ellipsys

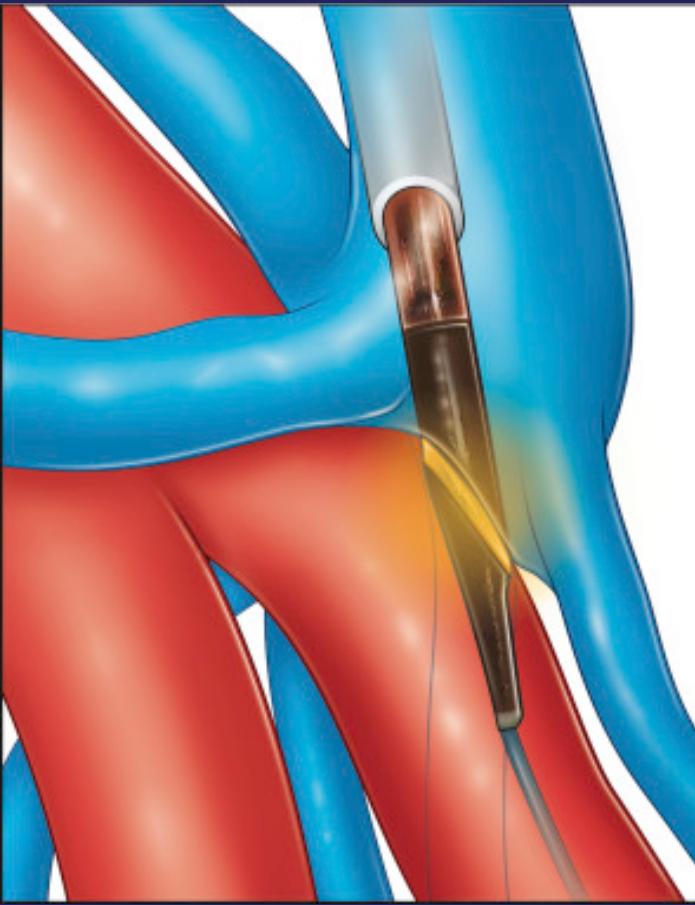
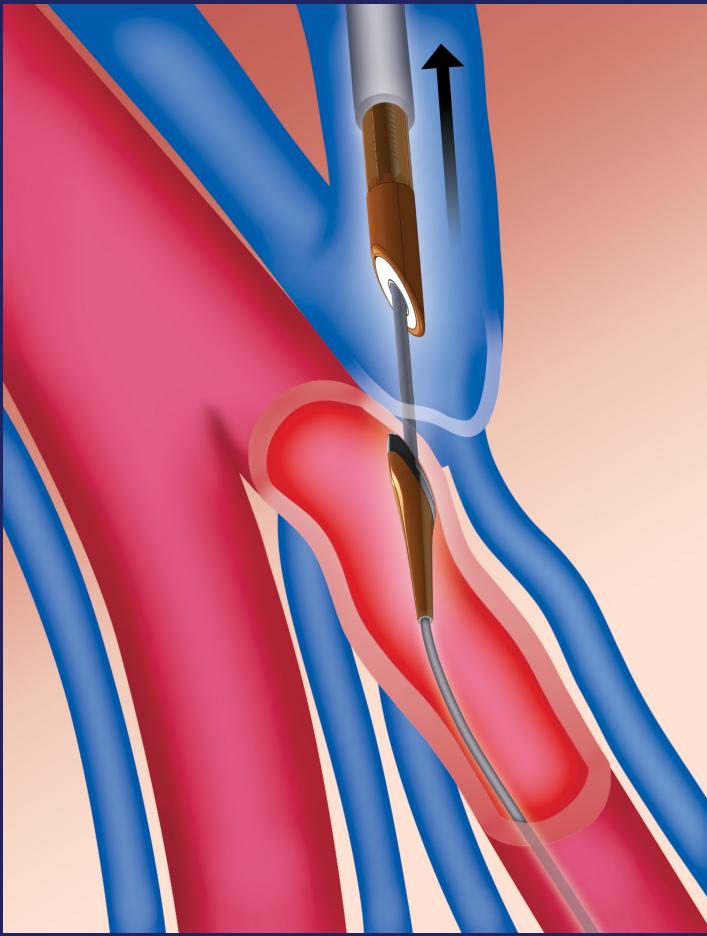
- Thermal energy delivered to create the anastomosis
- Mandatory PTA of anastomosis with 5mm
- On table fistula duplex to check fistula flow

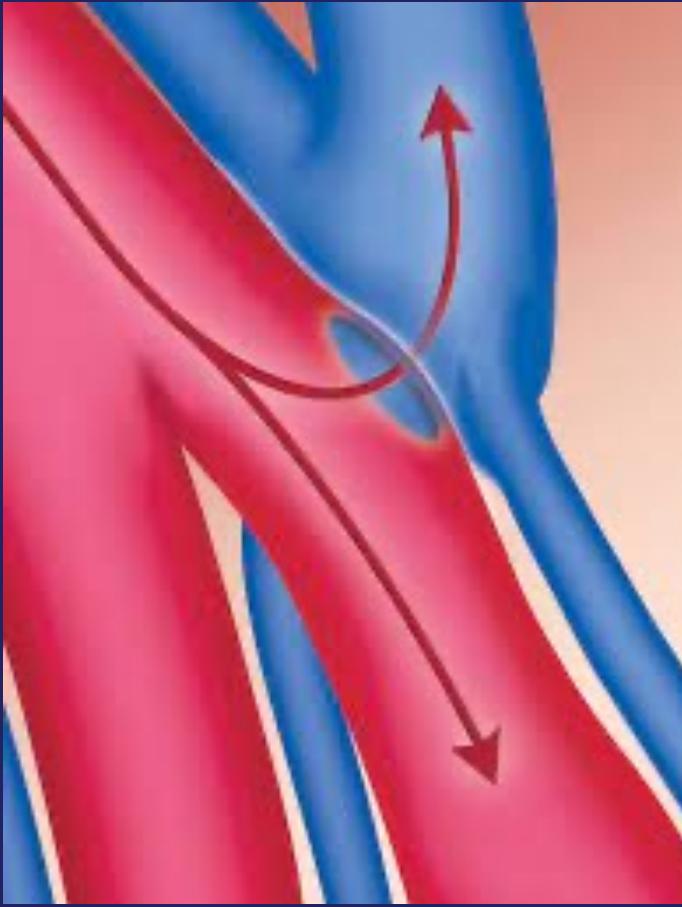


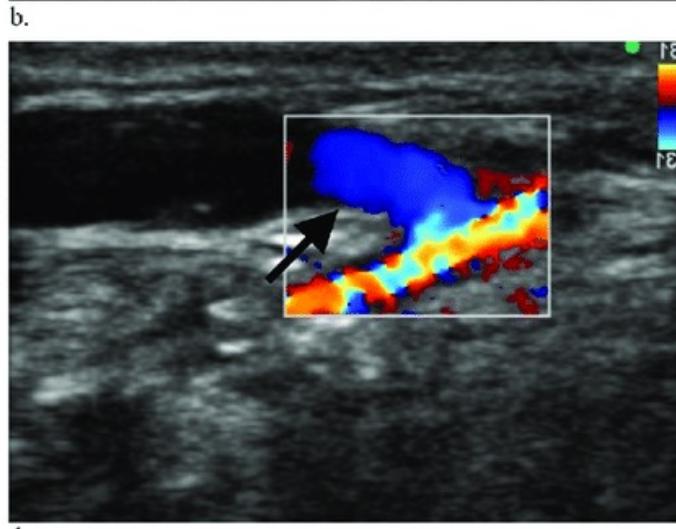
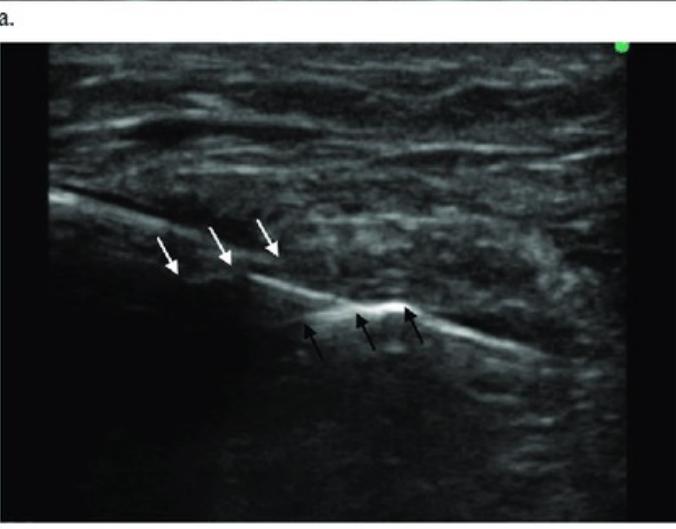
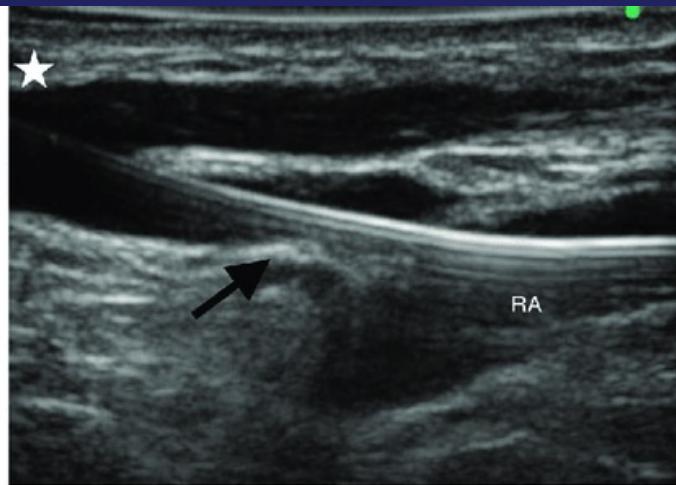
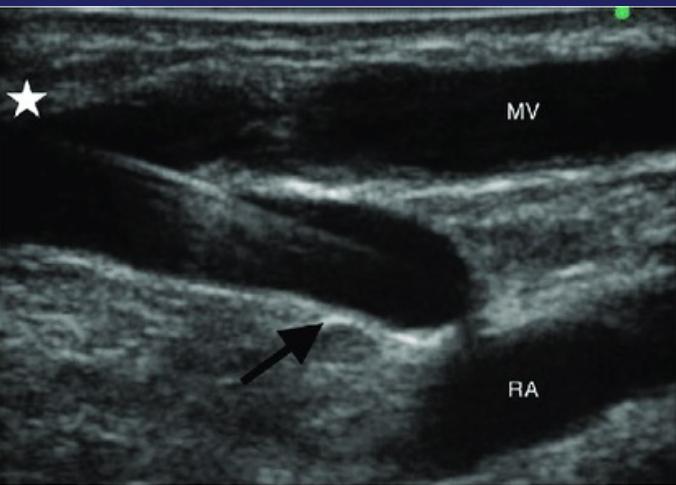
Ellipsys

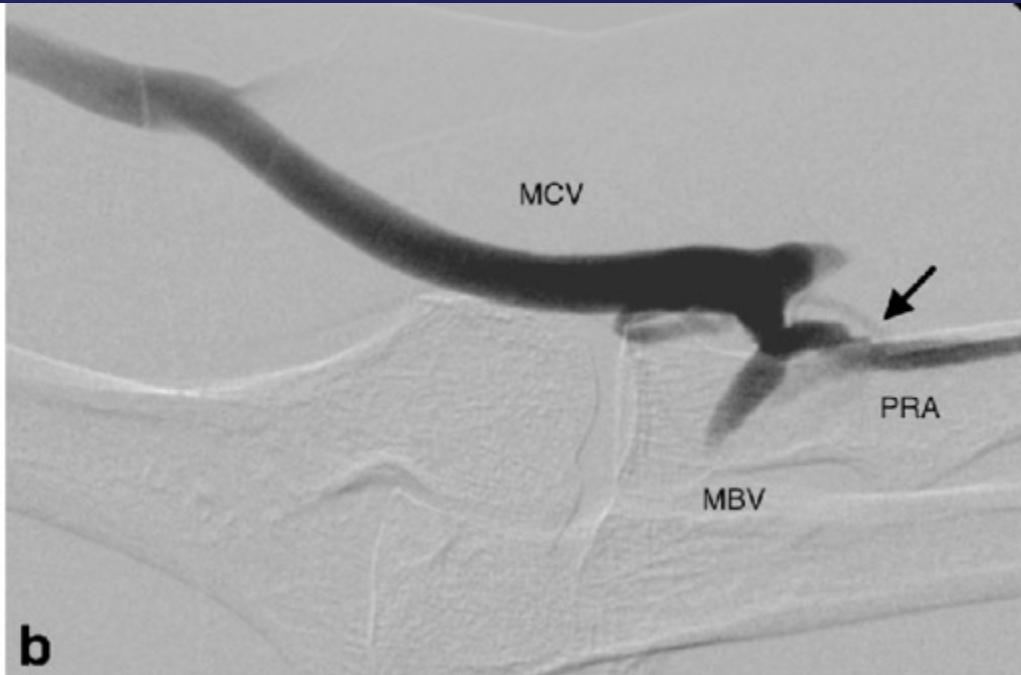
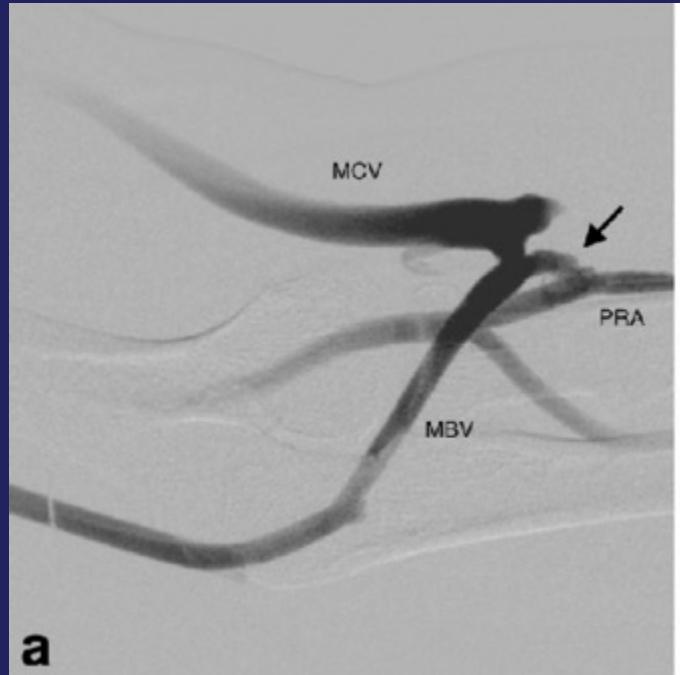












a

b



| | ELLIPSYS | WAVELINQ |
|----------------------|--|---|
| Sheath size | 6 French sheath | 4 French sheath |
| Access site | Single | 2-3 access sites |
| Location of AVF | Forearm - Superficial fistula (PRA-PV) | Forearm - Deep fistula (RA-RV or UA-UV) |
| Anesthesia | Moderate sedation | Moderate sedation |
| Fluoroscopy | No | Yes |
| Contrast | No | Yes |
| Post AVF angioplasty | Yes | No |



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Comparison of Outcomes of Percutaneous Arteriovenous Fistulae Creation by Ellipsys and WavelinQ Devices

Robert Shahverdyan, MD, Gerald Beathard, MD, PhD, Nasir Mushtaq, PhD, MBBS, MPH, Terry F. Litchfield, Peter R. Nelson, MD, MS, and William C. Jennings, MD

JVIR 2020

| RESULTS | ELLIPSYS | WAVELINQ |
|----------------------------|----------|----------|
| Technical Success | 100% | 97% |
| Median procedure time | 14 min | 63 min |
| Median time to cannulation | 60 days | 90 days |



Comparison of Outcomes of Percutaneous Arteriovenous Fistulae Creation by Ellipsys and WavelinQ Devices

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Conclusion:

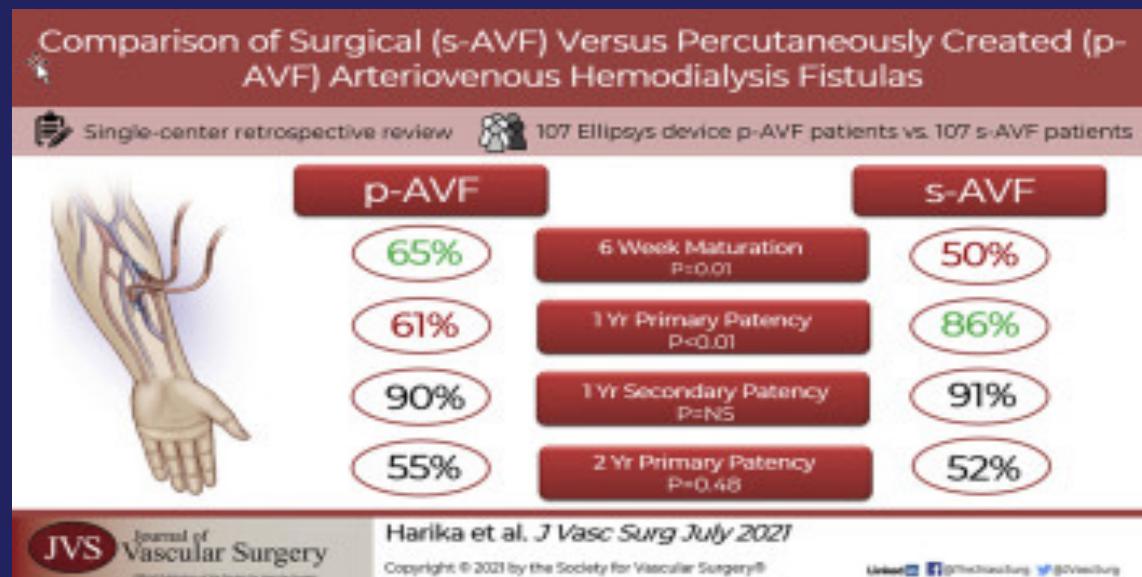
Both percutaneous AVF were created with high technical success. Ellipsys demonstrated shorter procedure times without need for fluoroscopy or contrast



Comparison of surgical versus percutaneously created arteriovenous hemodialysis fistulas

Ghazi Harika, MD, Alexandros Mallios, MD, Mahmoud Alouache, MD, Alessandro Costanzo, MD,
Romain de Blic, MD, Benoit Boura, MD, William C. Jennings, MD

JVS July 2021



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JVS July 2021

Conclusion:

Fistulas created percutaneously with the Ellipsys system showed superior maturation rates and similar patency with s-AVFs. Larger, prospective, randomized multicenter studies are needed to confirm these findings.



Take Home Points

- Percutaneous AV fistula WILL NOT replace surgical AV fistula
- Option to consider if patient has a failed radiocephalic fistula or no options for wrist fistula
- Convincing data is lacking currently
- In need of a large volume randomized controlled trial



Thank You

