

Common Femoral artery (CFA) Stenosis

Common Femoral Endarterectomy (CFE)

Or

CFA SUPERA[®] Stenting ?

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Disclosure

Speaker name:

Dr. W. Lansink

I have the following potential conflicts of interest to report:

Consulting, Abbott, Bard, Be-Medical, Biotronic, Boston scientific, Medtronic

Employment in industry

Stockholder of a healthcare company

Owner of a healthcare company

Other(s)

I do not have any potential conflict of interest

CFA Endarterectomy is still golden standard

But is complication rate is low?

- Prolonged bleeding with blood loss
 - Hematomas
 - Lymph leaks
 - Infection
 - Post operative neuropathy
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- Immediate angiographic results ?
 - Long term patency rate ?

Common Femoral Endarterectomy (CFE)

The Gold standard ?

- Positive long term outcomes 5-15 yrs
- Ballotta et al. (Surgery 2010;147:268-274)
 - 8yr single center, prospect study 117pts
 - PPR@ 1,3,5 &7 yrs: 100 %, 99%, 96%, 96 %
- Kang et al. (J Vasc Surg2008;48:872-7)
 - 5yr single center, prospect study 58 pts
 - PPR@ 1 & 5 yrs: 93%, 91%
- Kechagias et al. (World J Surg 2008;32:51-54)
 - 15yrs single center, prospect study 111pts
 - Freedom –TLR@5, 10, 15 yrs 68%, 50,6%, 42,5%
- Dark side of CFE
- Ballotta et al. (Surgery 2010;147:268-274)
 - 6,6% minor complication rate
 - Mainly lymph leaks
- Kang et al. (J Vasc Surg2008;48:872-7)
 - 13,8% complication rate
 - 5% required reintervention
- Kechagias et al. (World J Surg 2008;32:51-54)
 - 17,1% wound infection rate
 - 9% hematomas

Yet only single center experiences with only 58-117 pts reported!!

Problem:

Almost never the surgeon

But almost always the patient

- That is true But Why ?

Problem with the patient is :

- Incidence of Diabetes Is rising very fast (35%)
- Incidence of Obesitas Is rising fast (25%)
- Incidence of renal failure patient on Dialysis Is rising (14%)

That is why the incidence of wound problems Is rising !

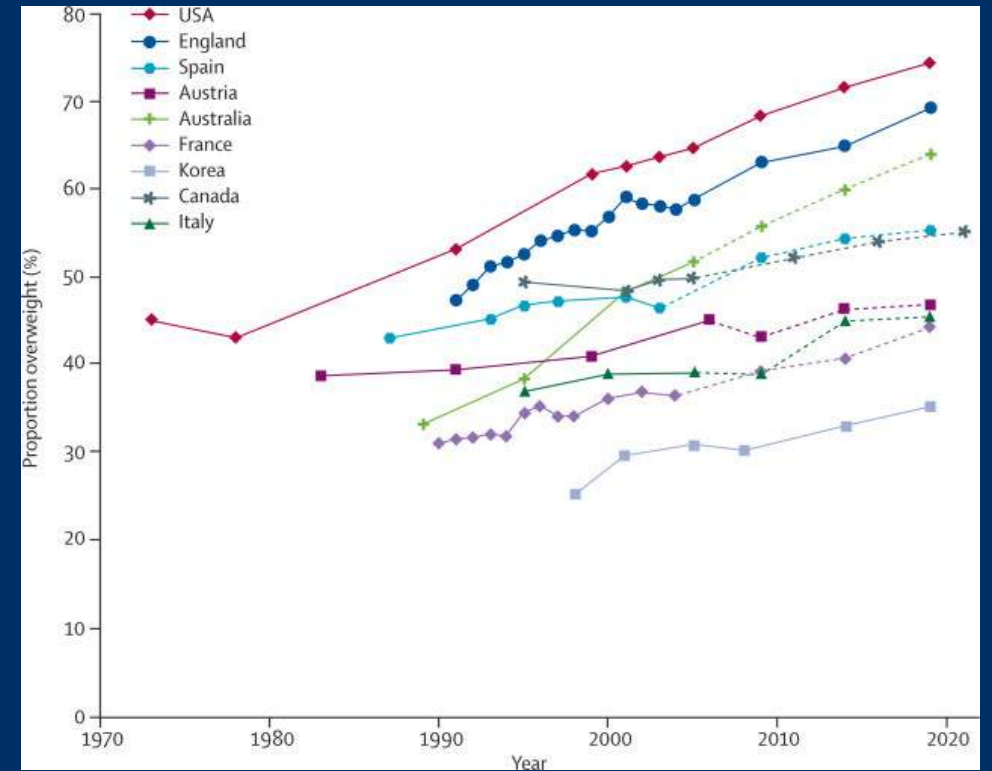
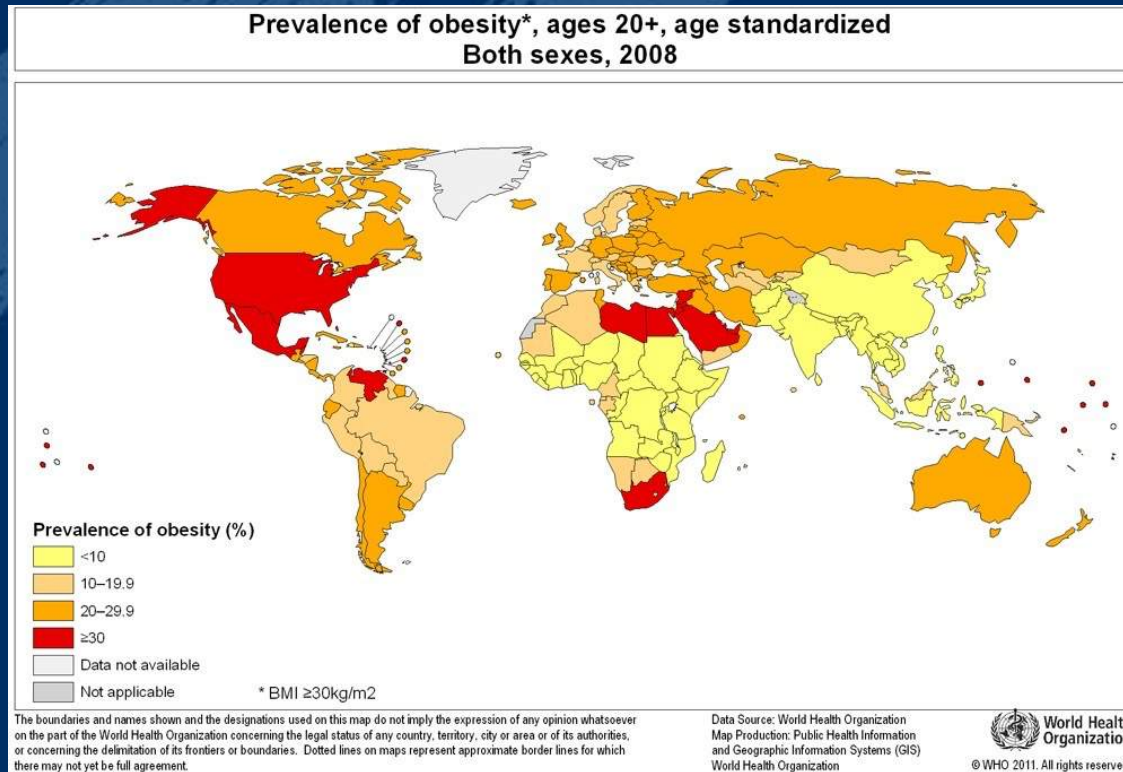
INCIDENTIE:

WHO DIABETES ESTIMATES: 1995-2025

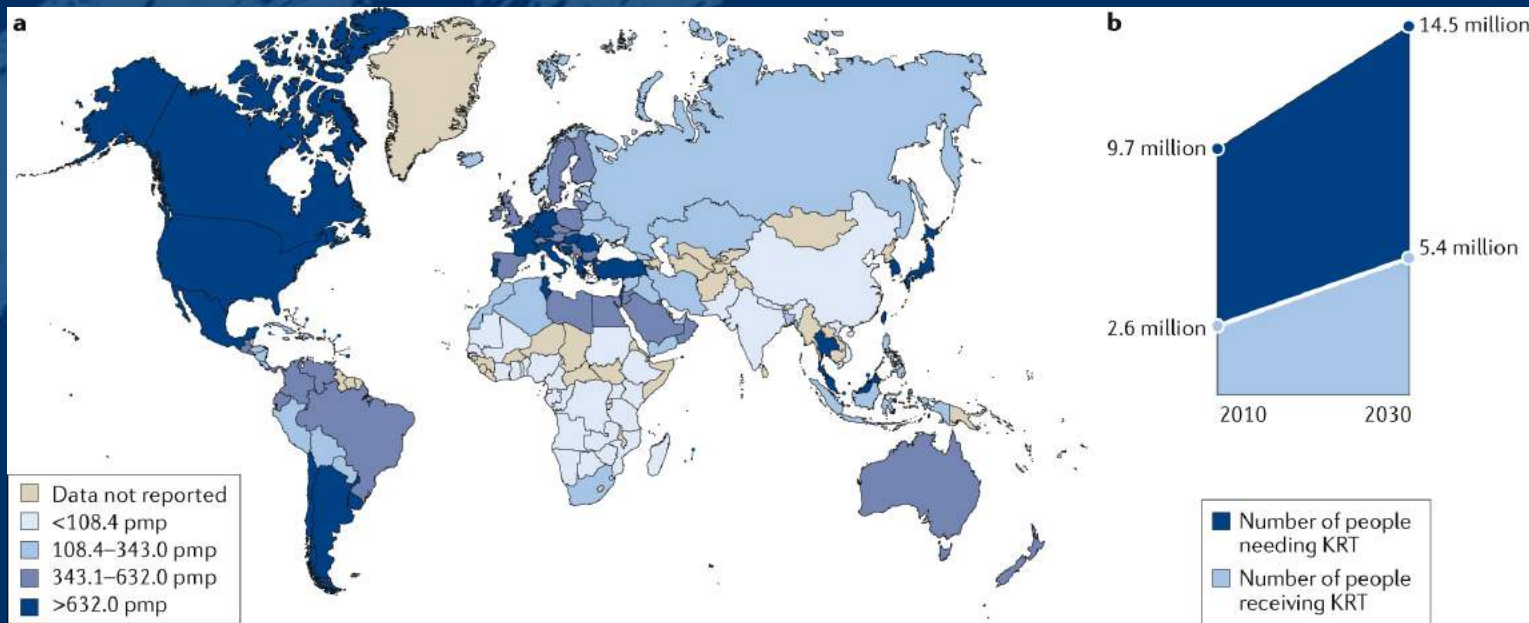
Numbers of cases (in thousands)

| region | 1995 | 2000 | 2025 |
|----------------|--------|--------|--------|
| United states | 30,711 | 34,795 | 63,526 |
| Europe | 33,002 | 35,469 | 47,761 |
| Southeast Asia | 27,642 | 32,667 | 70,517 |

INCIDENTIE: WHO OBESITY IN 2011 AND RISING



INCIDENTIE: KIDNEY REPLACEMENT THERAPY IS RISING



The effect of renal disease on woundhealing:

- Skin Atrophy
- Bacterial pathogens on skin (15%)
- Low Proteine levels

Is devastating !!

Problem with the surgeon is:

- Technique of Endarterectomy is not standardized
 - Plasty
 - Interposition
 - Controlled Endarterectomy
 - Blind Endarterectomy
- Intra operative Angiography is not standard

Problem with the surgeon is:

- It is a very nice controlled operation
 - Frequentle assisted to juniors in a training center
- We have to admit that there are wound complications
 - Closing the skin is not the end of the story

So the classic golden standard has to be evaluated in the world of today

New technology has to prove it self

But that can only be done in a randomised controlled way

Historical data can not suit as a control group

SUPERSURG multicenter randomised trial !!!

Will clarify the CFA treatment discussion

Evolution of a groin wound of an obese diabetes patient :



Complications of CFE
are not always benign!

Or groin puncture :



And Supera stent for CFA disease



I rest my case

