Percutaneous closure devices: technique and literature review

E. Jean Baptiste, R. Hassen-Khodja (Nice, France)

CRITICAL ISSUES in aortic endografting 2012 Lille, May 25th



Why a percutaneous vessel closure?

Principle: totally percutaneous approach

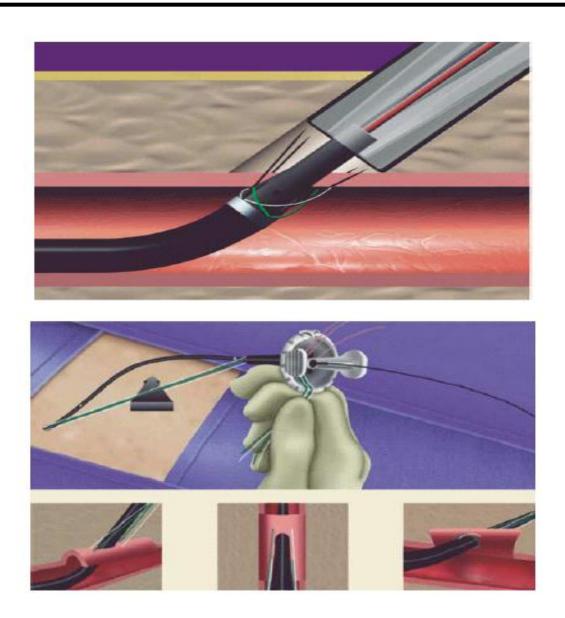
- Expectations :
 - > local complications
 - **≥** length of the hospital stay
 - **U** cost

- Technical experience of Prostar XL
- Literature review

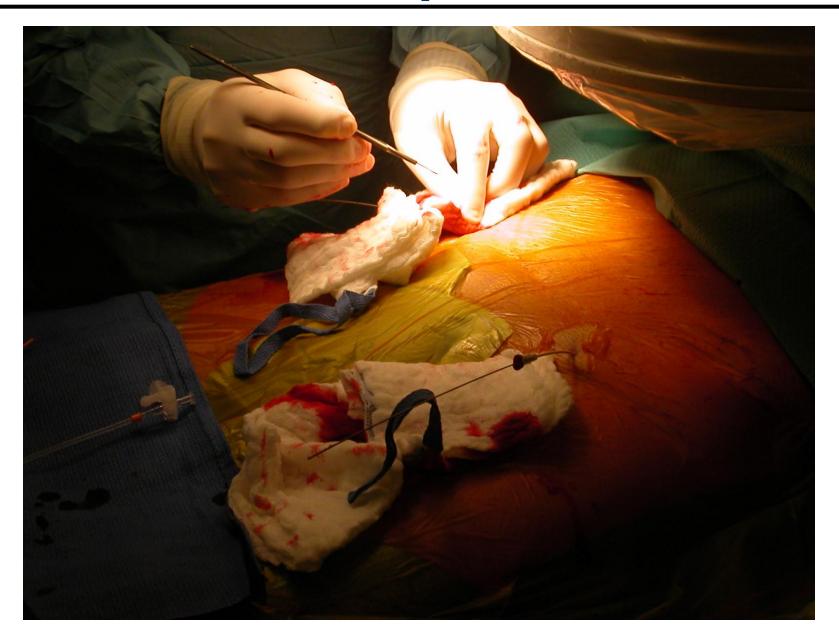
TECHNIQUE

- « Preclose technique »
- Learning curve +++
- > In case of technical failure, stressful situation
- Patient selection

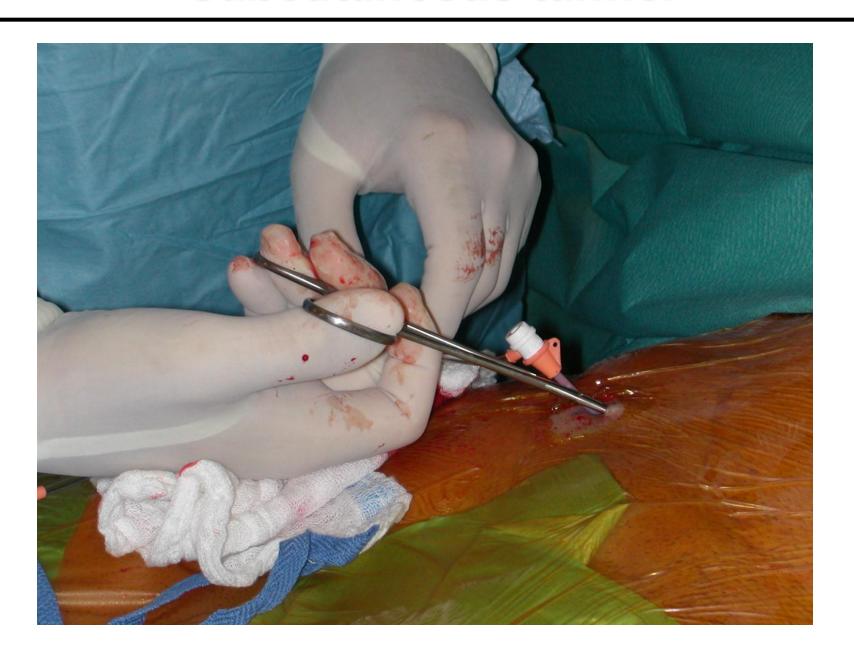
MATERIAL: Prostar XL® (Abbott)



Femoral puncture



Subcutaneous tunnel



7F introducer sheath



The Prostar XL® device (Abbott)



The Prostar XL® device (Abbott)



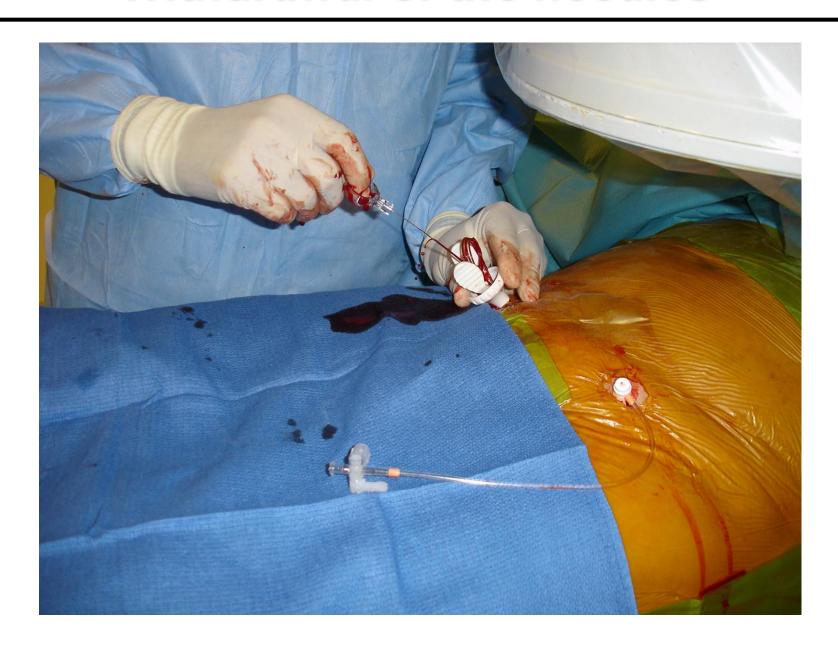
the guidewire is removed



Arterial flush, Prostar in place



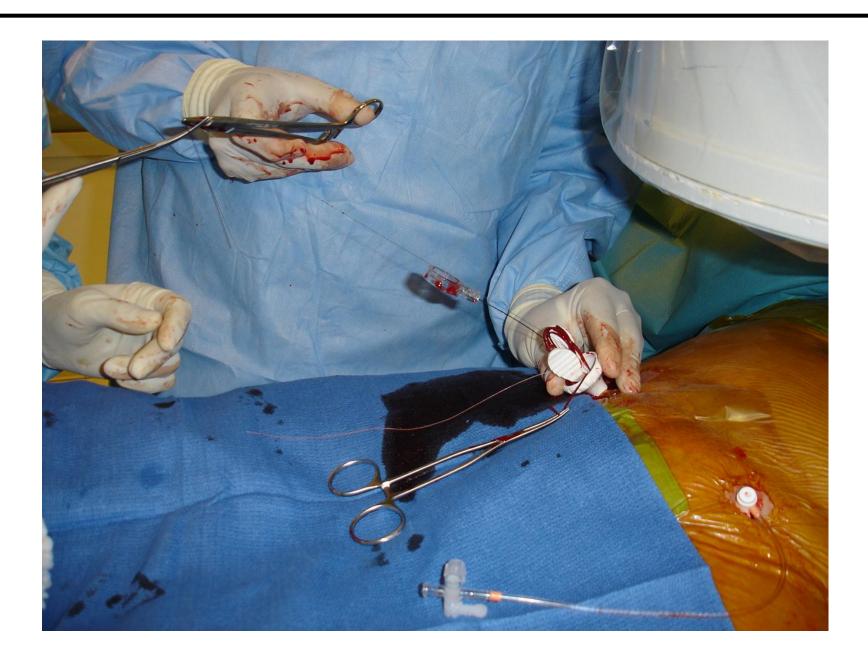
Withdrawal of the needles



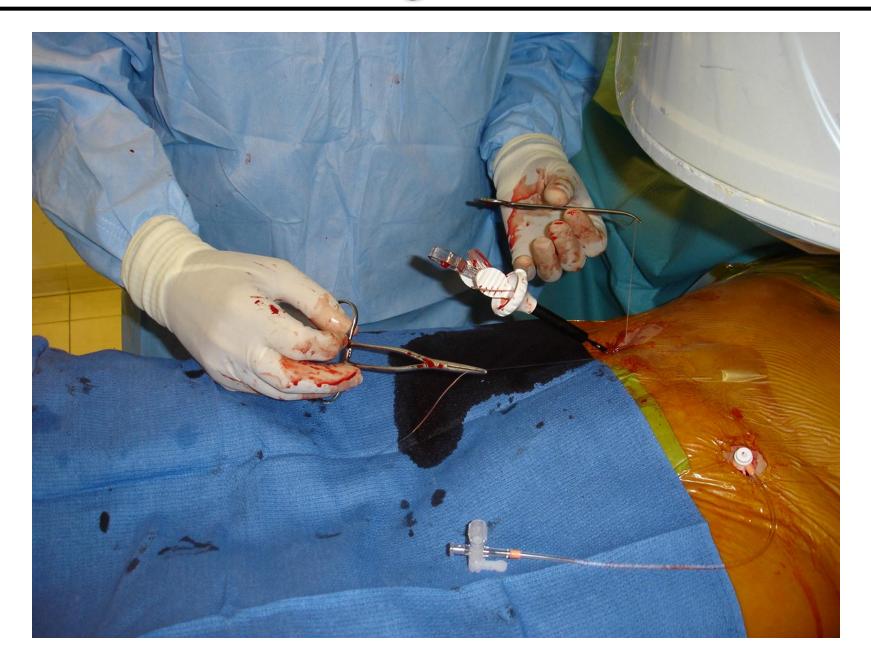
White thread



Green thread



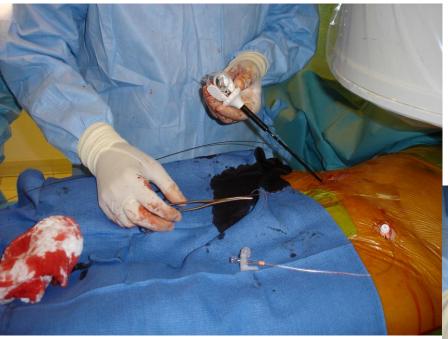
Marking strands



Prostar device removed (guidewire in place)



2nd Prostar



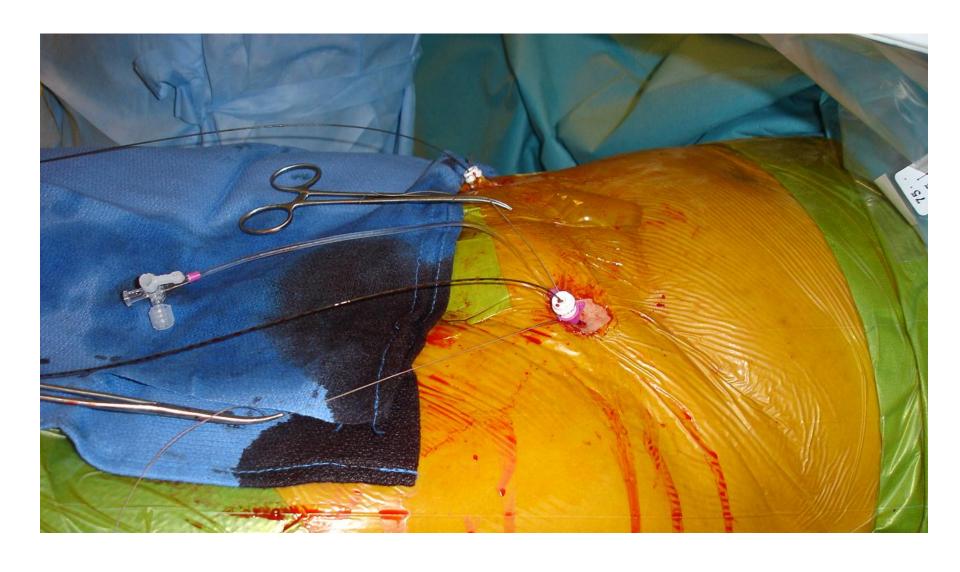
Location of the 4 threads



Contralateral Prostar



On both sides, 10F sheath



EVAR procedure



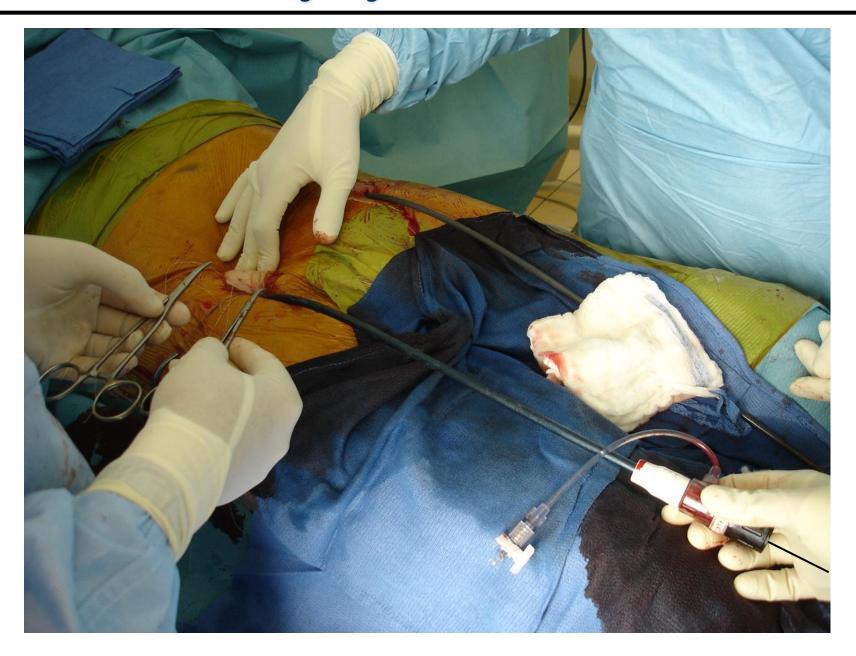
Knots tied



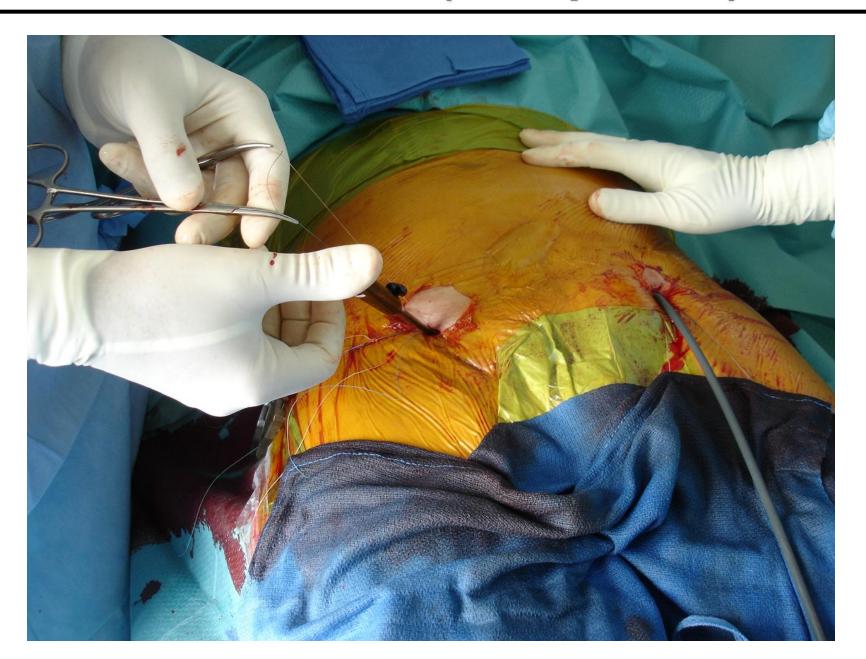
Making the knots



Delivery system removed



Knots locked (knot pusher)



Withdrawal of the delivery system



Final result



Result at D2

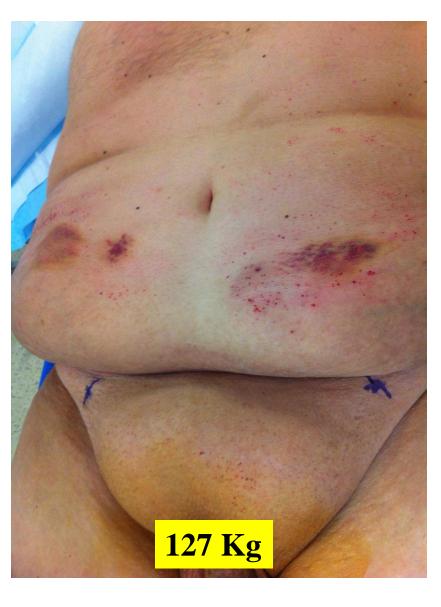


Results





Result (obese patient)





literature review

- Mostly retrospective, nonrandomised studies
- Selected groups of patients, heterogeneity

The results of the literature should be interpreted with caution

- 2 recent reviews of the literature:
 - Malkawi, EJVES 2010
 - Haulon, EJVES 2011





REVIEW

Percutaneous Access for Endovascular Aneurysm Repair: A Systematic Review

A.H. Malkawi, R.J. Hinchliffe*, P.J. Holt, I.M. Loftus, M.M. Thompson

- 22 studies, 1087 patients
- Success rate: 92%, complication rate: 4%





REVIEW

A Systematic Literature Review of the Efficacy and Safety of the Prostar XL Device for the Closure of Large Femoral Arterial Access Sites in Patients Undergoing Percutaneous Endovascular Aortic Procedures

- S. Haulon a,*, R. Hassen Khodja b, C.W. Proudfoot c, E. Samuels c
- 21 studies, Success rate: 91%

literature review (summary)

Prostar XL is as safe and effective as surgical cut-down

Considerable limitations in the evidence base

- Reduction in total operative time (statistically significant)
- Reduction in time to ambulation, to discharge, in length of stay, and potentially in costs (not statistically significant)

Technical failures (literature review)

Author	Traul	Teh	Torsello	Watelet	Starnes	Lee	Our
							series
Obesity	0	5	0	0	2	1	0
Device	4	0	1	4	2	6	2
Femoral calcifications	1	0	1	1	0	2	0
Iliac tortuosity	2	2	0	1	0	1	0
Puncture site	0	3	0	0	2	2	1
Fibrosis	0	1	0	0	0	1	0
Intoducer size	4	0	0	0	2	0	0
Other	0	1	0	2	1	3	0
Total	11/30	12/82	2/30	8/47	5/79	16/279	3/38

E. Jean Baptiste, Eur J Vasc Endovasc Surg 2008



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journal homepage: www.ejves.com

Unselected Percutaneous Access with Large Vessel Closure for Endovascular Aortic Surgery: Experience and Predictors of Technical Success

M.J. Metcalfe*, J.R.W. Brownrigg, S.A. Black, T. Loosemore, I.M. Loftus, M.M. Thompson

- non-selected, 186 common femoral a., Success rate: 95%
- Shorter procedures, decreased lengths of stay
- Operator experience was the only predictor of technical success

CONCLUSION

- **Evidence for reduced operative time**
- > A technology which allows local anesthesia, out patient
- **▶** Learning curve, experience +++
- More controlled studies are needed