Newly FDA-approved device for central venous occlusions hailed as exciting advance

BY BRYAN KAY

HOUeTTON—These are exciting times in the theater of dialysis access, expert in the field Eric Peden, MD, noted in the latter part of last year—and that’s not always been easy to say because dialysis has had not too much change for many decades.”

That’s starting to change, the division chief and program director for vascular surgery at Houston Methodist DeBakey Heart & Vascular Center noted.

And so it was that, in the middle of February, one of those latest developments gained Food and Drug Administration (FDA) approval. The new device of technology named the Sherther inside-Out Access Catheter System and developed by private medical technology company Bluegum Vascular Technologies (BVT), was designed to help patients with central venous occlusions.

See Sherther - page 10

'No evidence' to suggest spinal cord injury is decreased by prophylactic drainage during EVAR procedures

BY BRYAN KAY

MIRAMAR—Cerebrospinal fluid (CSF) drainage is a key component in the treatment of spinal cord injury but the evidence that prophylactic drainage decreases such injury during endovascular repair (EVAR) is “at best weak,” Gustavo S. Oderich, MD, told the Critical Issues America annual meeting in Miami, Florida, held Feb. 7-8.

Last year, Oderich et al, of the Mayo Clinic in Rochester, Minnesota, published a study in the Journal of Vascular Surgery that discovered seven complications from placement of cerebrospinal fluid drains (CSFD) during first-stage thoracic endovascular aortic repair (TEVAR) and fenestrated-branched endovascular repair (F-DEBVAR) of paravascular thoracoabdominal aortic aneurysms (TAAA). As that note, Oderich and colleagues found they were occurring at an “alarming rate” in their prospective, nonrandomized study.

In this latest presentation, Oderich sought to answer the question: “Are preoperative spinal drains necessary”?

See Oderich - page 4
2020 March Specialist

Headlines
How SVS-STS tandem developed TBAD reporting standards
VRIC discussion agenda: Immune cell dysfunction and immunotherapy for vascular disease
VSIG webinar from APDVS coming soon?
Your SVS: Storming into 2020 and horizons beyond?
O Canada: VAM 2020 housing, registration now open?
Leadership: Developing mission, vision and strategy?
SVS PAC donations and Congressional committees of most impact?
Mysteries of market forces and surprise billing?
Purchase tickets today for 2020 VAM ‘Spectacular’ Gala?
CMS publishes 2020 round of coding changes for vascular surgeons

BY FRANCESCO AEELLO, MD, AND MATTHEW SIDEMAN, MD

The Centers for Medicare and Medicaid Services (CMS) has provided some light reading with the publication of the Physician Fee Schedule (PFS), Hospital Outpatient Prospective Payment and Ambulatory Surgical Center Payment Systems, as well as Quality Reporting Programs final rules for calendar year 2020. The combined updates are captured in thousands of pages, covering a wide variety of changes, updates and comments. We would like to focus our attention on those changes that will impact vascular surgeons.

The PFS lists all clinical services and procedures along with their relative value units (RVUs) for the fiscal year. Those RVUs are converted to dollar amounts using the annual Medicare conversion factor (CF). In

See Coding - page 4

Hotly-contested meta-analysis suggests a higher risk of death or amputation at one year when paclitaxel-coated balloons are used in infrapopliteal arteries

BY SUZE MARSHALL AND JOCELYN HUDDSON

A new meta-analysis, just published in the Journal of Vascular and Interventional Radiology (JVIR), suggests significantly reduced amputation-free survival at one year when paclitaxel-coated balloons are applied in arteries below the knee for critical limb-threatening ischemia (CLTI) treatment, but some experts advise cautious interpretation of the results and question whether these data will impact practice. The new systematic review and study-level meta-analysis of eight randomized controlled trials was conducted by Konstantinos Katsanos, MD, assistant professor in the School of Medicine, University of Patras, Patras, Greece, and colleagues.

Several physician thought-leaders believe that the conclusions are not yet definitive, with multiple peripheral vascular interventionists cautioning how these data should be interpreted. Most emphasized the challenge of teasing out scientifically meaningful information from a patient cohort that suffered...
2020 February Specialist

Headlines
VRIC agenda taking shape, poster sessions to return
New registry to keep track of vascular patients launched
Presenting public policy issues of importance to vascular surgeons: SVS PAC, Congress and you?
Deadline for Seed Grant applications falls March 1
Zero hour: SVS awards nominations come due
‘There is no perfect job’: Benefits of working across VA system outlined by current practitioners
SVS rolls out Leadership Development Program
Wider VAM 2020 schedule unveiled
Welcome to our new members
Bridging the gap to future surgical success: Surgeon-coaches can help colleagues thrive?
2020 January Specialist

Headlines
Leadership: Strengths and weaknesses of team members
Advocacy: Coding and Reimbursement Committee experiences lead to greater sense of awareness
Countdown: VESAP4 set to expire in six months
Learn all about coding updates at Jan. 22 webinar?
Vital importance of funding for pair of separate needs?
SVS launches key valuation study?
Registration open for VRIC?
Save the date for 2020 SVS Foundation Gala?
Burned out on burnout? Changing course with peer support?