The Radial Shift

In our annual issue on radial artery access, we highlight the growing adoption of this technique in practice in the United States. We have reviews that detail the basics and fine points of the technique, staff training and education, radial-specific equipment, and outcomes from using the radial approach in STEMI. This issue also contains a commentary on the pros and cons of radial versus femoral access, which highlights why there remains some debate about this subject. As usual, we touch on several other topics, including stem cell therapy and cardiac support devices.

For those seeking an introduction or—just a refresher—on the basics of radial artery access, Sameer Gupta, MD; Sandeep Nathan, MD, MSc, FACC, FSCAI; and Alice A. Perlowski, MD, FACC, review the basics of radial artery cannulation, patient setup and positioning, and the available radial-specific equipment.

Although the majority of radial access procedures are performed from the right side, it is important not to overlook the potential applications of a left-sided approach. Hector Martinez, MD, and Christopher T. Pyne, MD, discuss the differences between the left and right radial anatomy, data comparing these approaches, as well as technical tips and advice on room setup for left radial cases.

Ready to start or expand your radial practice, but need some advice? Arun K. Thukkani, MD, PhD, and Pinak B. Shah, MD, share their experience and recommendations for how to successfully educate, train, and ultimately transition your staff into performing a greater load of transradial cases. One specific aspect of this approach that should be carefully considered is radial hemostasis management. Samir B. Pancholy, MD, FACP, FACC, FSCAI, details the technical aspects involved and offers a step-by-step guide for utilizing the patent hemostasis technique.

To help ease into radial access adoption, it is advisable to become familiar with the tools of the trade. Using the correct guidewire shape and size is essential, and thus Jimmy MacHaalany, MD; Eltigani Abdelaal, MD; and Olivier F. Bertrand, MD, PhD, provide an overview of the types of guidewires that are available and in which clinical scenarios they may be best utilized.

So why undertake the potential difficulties inherent in changing your protocol? Does radial access really offer a tangible benefit to patients? Sinny Delacroix, MD; Peter J. Psaltis, MBBS, PhD; Matthew I. Worthley, MBBS, PhD; and Stephen G. Worthley, MBBS, PhD, review the available literature to date, showing a cogent basis for the sea change toward transradial access for imaging and intervention in ACS and STEMI patients. Clearly, for such a large shift to occur, the pros must strongly outweigh the cons. In assessing these factors, Rohan R. Wagle, MD, and Ralph Brindis, MD, MPH, MACC, FSCAI, take a look at both the benefits and difficulties associated with the radial approach and describe how operator familiarity is key to overcoming the negatives.

In order to shed as much light on the many aspects of this debate as possible, Purushothaman Muthusamy, MD, and David H. Wohns, MD, FACC, FSCAI, offer an economic- and quality-based analysis of radial versus femoral access for PCI.

Within this issue, we also check in on the cardiac side of practice. Navin K. Kapur, MD, FSCAI, FACC, explains how the ever-increasing prevalence of heart failure will soon require interventionists to integrate the use of cardiac support devices into their practice. We also have a literature review of stem cell therapy for coronary disease by Vincent Varghese, DO, and Jon C. George, MD.

Finally, a past president of SCAI, Morton J. Kern, MD, speaks with us about a variety of pressing issues in the interventional cardiology community, including trends in access, imaging, and TAVR uptake.

We hope you will enjoy this issue of *Cardiac Interventions Today*. The discussion of radial therapy is timely, and the commentary on radial versus femoral access should be stimulating. Our approach remains to synthesize the vast interventional literature into manageable summaries, and we hope you find this helpful! ■

Ted E. Feldman, MD, FESC, FACC, FSCAI
Chief Medical Editor
citeditorial@bmctoday.com