

Radial Update

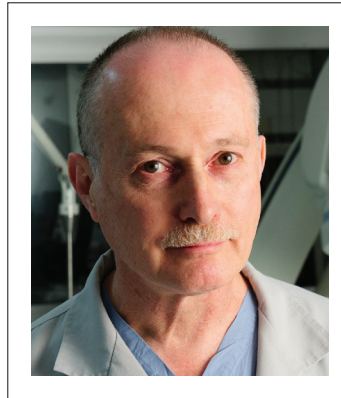
Radial access has continued to expand in United States practice. This has been driven by enhancements in technology, improvements in technique, and growing experience among operators. In this issue of *Cardiac Interventions Today*, we look at all of these components.

First, Vinayak Nagaraja, MBBS; Jim Nolan, MD; and Mamas A. Mamas, BM BCh, examine operator experience and center volume in radial access. They cover the contemporary evidence suggesting that radial access is associated with more favorable outcomes in comparison to femoral access in coronary intervention, with a helpful table that illustrates the key studies on radial volume and clinical outcomes.

The advances being made in sheathless technology are an exciting addition to radial access. Accordingly, Dr. Ian C. Gilchrist provides an overview on the use of larger catheters in smaller spaces, providing an overview of the use of sheathless guide catheters during transradial percutaneous coronary intervention. Next, Stefano Rigattieri, MD, and Alessandro Sciahbasi, MD, explore the use of a radial approach in patients with previous coronary artery bypass grafting, while emphasizing that appropriate selection of vascular access in these patients should be determined by both the operator's experience and patient characteristics.

Concluding our coverage on radial intervention is an article by Kintur Sanghvi, MD, and colleagues in which they discuss how a transradial approach can be utilized as a primary or secondary access strategy to reduce morbidity and major adverse cardiac events in various structural interventions.

In this issue, we also ask experts John A. Bittl, MD; Robert Yeh, MD; Eric A. Secemsky, MD; Eric R. Bates, MD; and Issam D. Moussa, MD, to share their thoughts on whether the new DAPT guidelines result in any real changes in clinical practice.



As part of our ongoing Today's Practice series, Anne Beekman, RN, and Ginger Biesbrock, PA-C, make us aware of disease-based programs as solutions to population health. Also appearing in this issue is a valve update about managing the risk of coronary occlusion during TAVR by Carlos E. Sanchez, MD; Arash Arshi, MD; and Steven J. Yakubov, MD. They discuss why effectively planning for valve retrieval and coronary protection is essential.

Concluding the issue is an interview with Ian C. Gilchrist, MD, in which he discusses the current state of radial access as a first-line approach in the United States. He also provides keys to develop a same-day discharge program.

As is always our mission, we hope to help synthesize the vast interventional literature in a timely and useful manner. If there are topics you would like covered in future issues, let us know. ■

A stylized, handwritten signature in black ink, appearing to read 'Ted E. Feldman'.

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