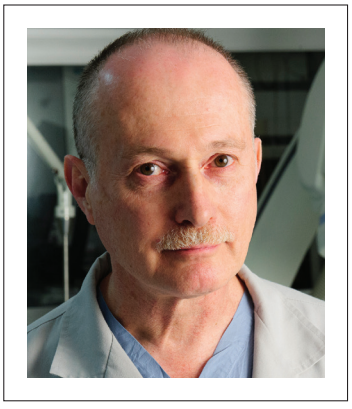
Radial Access

Radial access for cardiac catheterization continues to increase in practice in the United States, and thus the discussion of this topic evolves as well. In this issue, we explore several aspects of radial access, including its use for managing coronary artery disease in patients who are undergoing transcatheter aortic valve replacement.



We begin our feature coverage with an article by Amir Solomonica, MD, and Shahar Lavi, MD, who discuss the factors that influence radial artery occlusion and the differing methods for its prevention. Next, Samer Mowakeaa, MD, and Robert S. Dieter, MD, review the literature associated with compartment syndrome after radial artery catheterization. We then explore transulnar access, as Safi U. Khan, MD; Michael Depersis, DO; and Edo Kaluski, MD, explain how and when radial operators should consider transulnar access as an alternative to transfemoral access.

Todd Novak, MD, and Luke Janik, MD, provide a brief summary of radial artery catheterization and the factors that anesthesiologists must consider before and during placement, with an emphasis on ultrasound guidance. Sandeep Nathan, MD, then presents a case for deconstructing perceived barriers to transradial adoption and asks if transradial access can rise to become more than just another option for percutaneous access.

In addition to our feature articles, Jubin Joseph, MA, BMBCh, and Simon R. Redwood, MD, make the case for managing coronary artery disease in patients who are undergoing transcatheter aortic valve replacement. In our Technology Update article, Giora Weisz, MD, discusses robotic percutaneous coronary intervention technologies and how remote control technologies can benefit patients and interventionalists alike. Our continuing Coding & Reimbursement column explores the upcoming 2018 changes regarding percutaneous coronary intervention within the context of the episodic payment model. Is your practice prepared?

We close our issue with an interview with Didier Tchétché, MD, who discusses what is on the horizon for valvular disease interventions, new features at the Clinique Pasteur, and how he prepares for live case presentations.

As always, we strive to distill the large volume of new cardiology literature into practical and relevant reviews. Please let us know if we are achieving our goal, and send suggestions for future topics. ■

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