

The Battle Against CLI

Despite continued advances in techniques, innovative new technologies, and improved collaboration between vascular specialists and general medical physicians, critical limb ischemia (CLI) still too often leads to limb loss. As we all know, amputation dramatically impacts the lives and lifestyles of many patients (and their families) worldwide, and it is often the beginning of a downward spiral that leads to premature death due to the ravages of atherosclerosis. If we are ultimately going to make a significant impact in the battle against CLI, education is the first step. Our focus must be on primary care physicians, podiatrists, and even husbands, wives, sons, and daughters, who are the first line of defense against a disease that grows more deadly with each day, yet can be effectively treated or even reversed if discovered promptly.

In our efforts to address CLI, we must keep this global concept of education in mind, and we must of course remain up to date on the lessons our colleagues have learned about how best to incorporate today's expanding treatment options. For this edition of *Endovascular Today*, we have asked a panel of experts in this field to provide background into the nature, incidence, and progression of CLI, the devices currently at our disposal, innovative alternatives, and new methods of expanding CLI awareness.

First, Aravinda Nanjundappa, MD, RVT; Theodore Tan, MD; Thach Nguyen, MD; and Robert S. Dieter, MD, RVT, provide an overview of CLI and explain how a multidisciplinary approach to treatment can optimize patient outcomes. David E. Allie, MD; Raghotham R. Patlola, MD; Agostino Ingraldi, MD; Chris J. Hebert, RT(R), RCIS; and Craig M. Walker, MD, discuss the many current and emerging options available for treating CLI.

Jessica Nevins Morse, MD, and Bruce H. Gray, DO, share their approach to treating ulcerations

with the help of noninvasive methods of assessing circulation and through aggressive wound care techniques. Dr. Krishna Rocha-Singh, on behalf of the VIVA Physicians team, updates us on the VIVA I: Xcell trial. This trial will provide interventionists with important data regarding the results of self-expanding stent implantation for infrapopliteal arterial occlusive disease.

Marco Manzi, MD, explains the pedal-plantar loop technique and how it is a safe, promising alternative to surgery for many patients with CLI. Marge Lovell, RN; Joseph Caporusso, DPM; and Gwen Twillman discuss the PAD Coalition's national campaign aimed at enhancing awareness of PAD and improving health care to PAD patients.

This month we also present you with two challenging case discussions. In the first, Parag Doshi, MD, FACC, FSCAI, performs revascularization of the celiac trunk on a patient with an atretic inferior mesenteric artery. In our second case, Mojtaba Gashti, DO, FACOS; Giancarlo McEvenue, BSc, MSIII; and Jason M. Radecke, MD, opt for endovascular repair of an aorto-esophageal fistula in a patient at prohibitive risk for open surgical repair.

Our featured interview is with vascular surgeon Mark A. Farber, MD, who shares his thoughts on the current state of TEVAR and EVAR, future clinical trials, and how to prepare new physicians for this field.

As always, we hope that this issue of *Endovascular Today* is a helpful addition to the expanding array of resources available to you. We welcome your comments or questions. ■



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