

EVAR's Continued Progress and Questions on the Horizon

With each passing year, there are new technological innovations in the endovascular world. Aortic endografting is certainly no exception to these changes. Older devices give way to new iterations or new platforms altogether. With new technologies and techniques, problems that have plagued the field in previous years can now be treated, but we must also evaluate the degree to which emerging options meet or exceed current standards. With this in mind, we have tried to address some of these challenges and their potential solutions in this edition of *Endovascular Today*.

To open our feature on endovascular abdominal aortic aneurysm repair (EVAR), Hence J. M. Verhagen, MD, PhD, and colleagues provide a comprehensive update on the state of this therapy, describing available technologies and sifting through the strengths and weaknesses of landmark datasets.

Endoleaks, both type I and type II, continue to persist, and all interventionists should have an algorithm for treating these. Short necks and access, although less troublesome, are two areas where the technology continues to improve. We are fortunate to have a feature on early detection of type I endoleaks by Jason Lee, MD, and

Benjamin Colvard, MD, and another on managing type II endoleaks by Ali Azizzadeh, MD, FACS, and colleagues.



It would seem that most vascular specialists agree that aneurysm rupture is best treated via endovascular repair, if suitable, and Manish Mehta, MD, MPH, and Jeffrey C. Hnath, MD, discuss strategies and lessons learned in their large experience. Next, Amir H. Malkawi, MD, FRCS; Matt Thompson, MD, FRCS; and Ian Loftus, MD, FRCS, describe their strategy for using standard EVAR to treat 10-mm necks.

In addition, with the ever-changing world of health care economics (reimbursement, cost-effectiveness, health care reform...), we've invited Sean Lyden, MD, to offer his unique insight as to what the future may bring.

Finally, with the multitude of devices available at this time and the long-awaited availability of fenestrated devices in the United States, we asked an esteemed panel of expert physicians to explain their platform preferences, as well as how fenestrated endograft devices have affected their practices.

In addition to this edition's focus on EVAR, we also include a look at bioabsorbable peripheral stents, and an engaging interview with A. Ross Naylor, MD. We hope you enjoy this issue. ■

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