

# Embolization: Delivering Results

In the past 5 years, the embolization field has grown significantly in terms of the available embolic materials, tools used to deliver these agents, and innovative techniques that allow this therapy to be utilized in treating many different forms of disease. With building momentum and commitment from industry, as well as the dedication from pioneers in the field, this growth will surely continue over the next decade, contributing to exciting development in the entire peripheral vascular area. I discuss the details of this assertion in the opening article of *Endovascular Today's* annual issue on embolization.

The articles that follow cover other pertinent topics, such as the latest applications of this therapy, reimbursement issues, and many new technology that will attempt to address the unmet needs.

In order to deliver this therapy, careful consideration must be made in accessing the targeted anatomy. Parag J. Patel, MD, and Quinton S. Kelly, MD, present their practical approach to achieving access and the technology available to help in doing so.

The first specific application of embolization reviewed is transarterial radioembolization using yttrium-90 to treat colorectal liver metastases. Drs. Siobhan Flanagan, Donna D'Souza, and I present the currently available data on this therapy and the information we need to move forward.

John Moriarty, MD, and Mahmood K. Razavi, MD, FSIR, FSVN, discuss the use of embolics as one means to help resolve refractory type I endoleaks.

As embolization utilization expands, sufficient data are required to prove its benefit in certain applications and patient populations. The aims of the EmboCoh visceral aneurysm prospective cohort study are shared by Marc Sapoval, MD, PhD, and Gert Andersen, BSE—specifically, their goal to create a global database on the use of embolization devices and procedural outcomes.

The final article on this topic is one that has recently attracted attention as a new option for treating obesity: gastric embolization therapy. Michael Wolf, MD; Susie Park, MD; and Gary Siskin, MD, FSIR, share the rationale behind this therapy and where it stands in terms of the evidence to date, which will clearly have an effect on our patients experiencing blood pressure and diabetes caused by excessive weight.

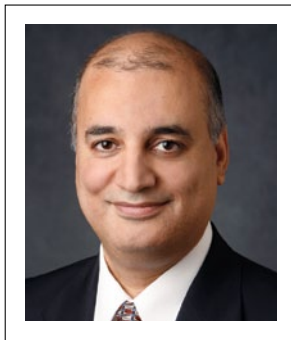
Next, Ajay J. Kirtane, MD; Krishna J. Rocha-Singh, MD; and Prof. Darrel Francis provide their perspectives on the recently published data from the SYMPPLICITY HTN-3 trial and the implications on further renal denervation study and practice.

In this month's Invention and Intellectual Property article, Gerard von Hoffmann, JD, and Bryan Wahl, MD, JD, present potential considerations when beginning the process of seeking a patent for your medical device idea. Steven J. Cagnetta, Esq, and Steven K. Ladd then continue their ongoing Physician Counsel column, this time, explaining the importance of clarifying the payments one receives to avoid information from being misinterpreted by the media and the public at large.

To update us on the new embolization codes taking effect this year, Katharine L. Krol, MD, FSIR, FACR, provides several clinical case examples of how these changes might affect the way you report embolization procedures for payment.

In closing this issue of *Endovascular Today*, we speak with Arthur C. Lee, MD, regarding tools to combat critical limb ischemia and the latest and forthcoming data from several important trials.

We hope that you find our synopsis of these developments to be timely and useful in your practice. If you have any suggestions for topics you'd like to read about in future issues, please let us know. ■



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Jafar Golzarian, MD  
Guest Chief Medical Editor