

Maintaining Progress in Challenging Times



The field of end-stage renal disease (ESRD) care is a complex ecosystem encompassing as diverse a variety of specialties, practice types, and patient needs as you will find

anywhere in medicine. Recent editions of *Endovascular Today* focusing on ESRD and dialysis access creation and maintenance have explored the recent sea change in interest surrounding the field, which had been relatively ignored by the greater interventional community for some time.

Now, facing a virus that disproportionately affects the most vulnerable individuals, practices across the spectrum of the ESRD community are tasked with ensuring their own safety—and in some cases, their own viability—while continually finding ways to preserve the kidney function and lives of their patients. To do so, the community must leverage its recent progress and band together across specialty and regional borders. Collaboration must displace the competition that too often holds us back unnecessarily.

With this in mind, we have assembled an edition aimed at exploring best practices in some of our most common procedures, set against the inescapable realities of patient care during a pandemic.

To start, Dirk M. Hentschel, MD; Karen Woo, MD; and Prabir Roy-Chaudhury, MD, participate in a roundtable discussion on how to manage ESRD patients in the age of the COVID-19 pandemic.

Next, Charmaine E. Lok, MD, discusses the updated KDOQI guidance and its implications on interventional practices.

Bart Dolmatch, MD; Alexandros Mallios, MD; Neghae Mawla, MD; Tobias Steinke, MD; and Allison Tan, MD, provide their perspectives on what to expect in the learning curve when creating a percutaneous arteriovenous fistula (pAVF). Stephen Hohmann, MD, then provides some key points to consider when creating a pAVF to ensure future dialysis access options remain open.

In another roundtable discussion, Ziv Haskal, MD; Theodore F. Saad, MD; and Monnie Wasse, MD, share their tips on when and how to place covered stents in the setting of arteriovenous grafts and/or fistulas. Scott O. Trerotola, MD, rounds out the issue with a commentary on the keys to achieving a durable result in arteriovenous access with percutaneous transluminal angioplasty alone.

Outside of the dialysis discussion, we also have an interview with Meredith J. Englander, MD, who talks about her advocacy work with the Society of Interventional Radiology and the American Medical Association, focusing on topics such as gender and diversity disparities, health policy, and supporting interventional radiology services affected by COVID-19. ■

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