

Venous Pathways

This month, leaders from the venous arena share their insights about the assessment, management, and prevention of this disease state. While there has been growing focus on venous disease in recent years, it still presents a unique set of procedural and medical challenges.

What is the optimal course for post-procedural care after endovascular DVT therapy? Suresh Vedantham, MD, reports on how to maintain venous patency with drug and compression therapy to preserve the results you worked so hard to achieve.

John N. Makaryus, MD, and Joe F. Lau, MD, PhD, FACC, FSVM, RPVI, review the current data on pharmacologic agents for VTE prevention and treatment, as well as the novel treatment concepts and oral anticoagulants that are in the pipeline.

Next, Vinit B. Amin, MD; Robert H. Siegelbaum, MD; Aaron M. Fischman, MD; and Robert A. Lookstein, MD; describe patient selection, current approaches, techniques, and equipment for achieving successful outcomes with deep vein thrombosis interventions.

In a select group of patients, medical therapy alone may be insufficient to reduce the immediate risk or to prevent recurrent venous thromboembolism. Paul Kim, MD, provides an overview of catheter-based treatments for massive and submassive PE, which could offer more rapid clinical improvement with a low risk of adverse events.

On the hospital management side, it may be beneficial to look toward instituting your own lysis team that is focused on pulmonary embolism care. Akhilesh K. Sista, MD; Oren A. Friedman, MD; James M. Horowitz, MD; and Arash Salemi, MD, explain how they formed an effi-

cient system based on the current best practices.

While the debate regarding routine use of inferior vena cava filters continues on, Gerard O'Sullivan, MD, shares the limited available data to date, as well as his center's filter placement criteria and a case report that explains their rationale.

A panel of experts including Mahmood K. Razavi, MD, FSIR; Brooke Spencer, MD, FSIR; David M. Williams, MD; and Seshadri Raju, MD, FACS, discuss their views on patient selection, follow-up, and ideal technologies for venous stenting.

CCSVI has come under increased scrutiny, but is it time to abandon its connection to MS? PREMISE study Principal Investigator Adnan H. Siddiqui, MD, PhD, weighs in on the trial's surprising findings.

In order to present as much expert opinion on venous therapies as possible, we have also posed two separate questions to some experts in the field: "What parameters should be used to differentiate whether management of superficial venous disease is medically necessary?" and "How is venous training best incorporated into the programs of specialties currently treating the disease?"

In our ongoing coverage on reimbursement coding updates, Katharine Krol, MD, FSIR, FACR, shares clinical examples that demonstrate how to successfully use the newest renal diagnostic angiography and intervention codes.

Finally, we wrap up our July issue with an interview with Marianne Brodmann, MD, who shares a unique view on treatment protocols for endovascular disease at her center in Graz, Austria.

We hope that you enjoy this issue and find it helpful in your daily practice. ■



A handwritten signature in black ink that reads "Barry Katzen MD". The signature is fluid and cursive, with a small flourish at the end.

Barry Katzen, MD
Chief Medical Editor