

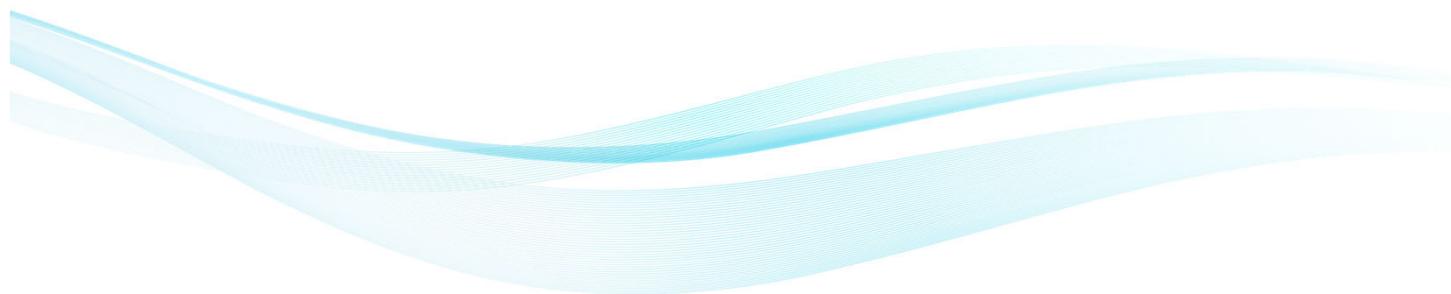
# Percutaneous AV Fistula Creation

## Ellipsys EndoAVF® System



Presented by Forest Rawls Jr CHT,CCHT-A ,FNKF

- No Disclosures



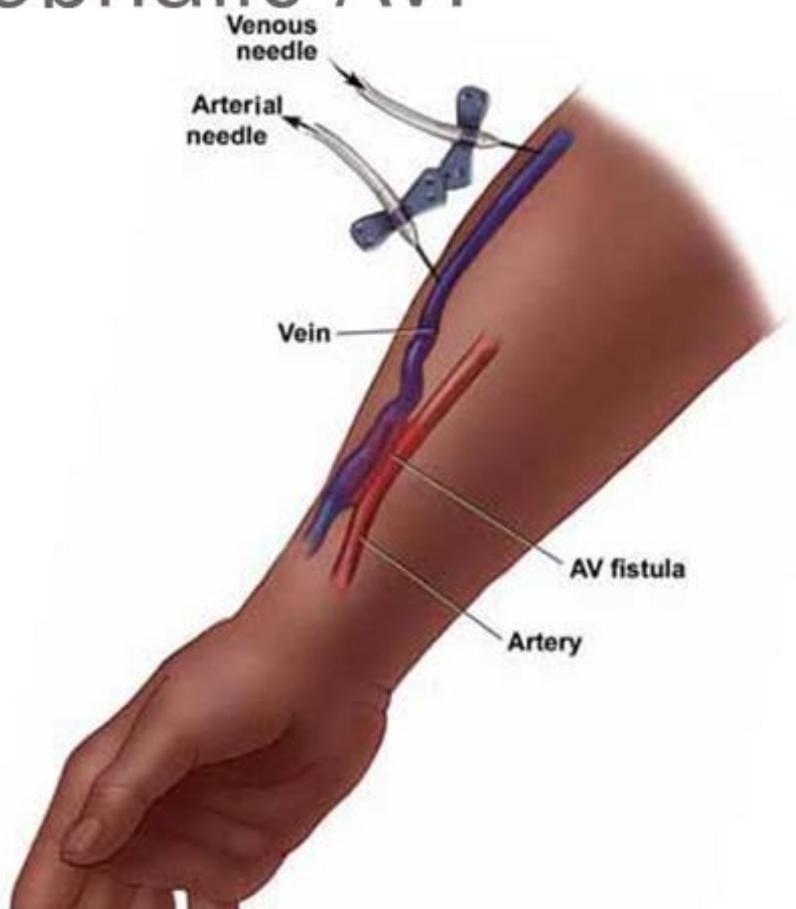
# Various Access Types

Some old

Some new

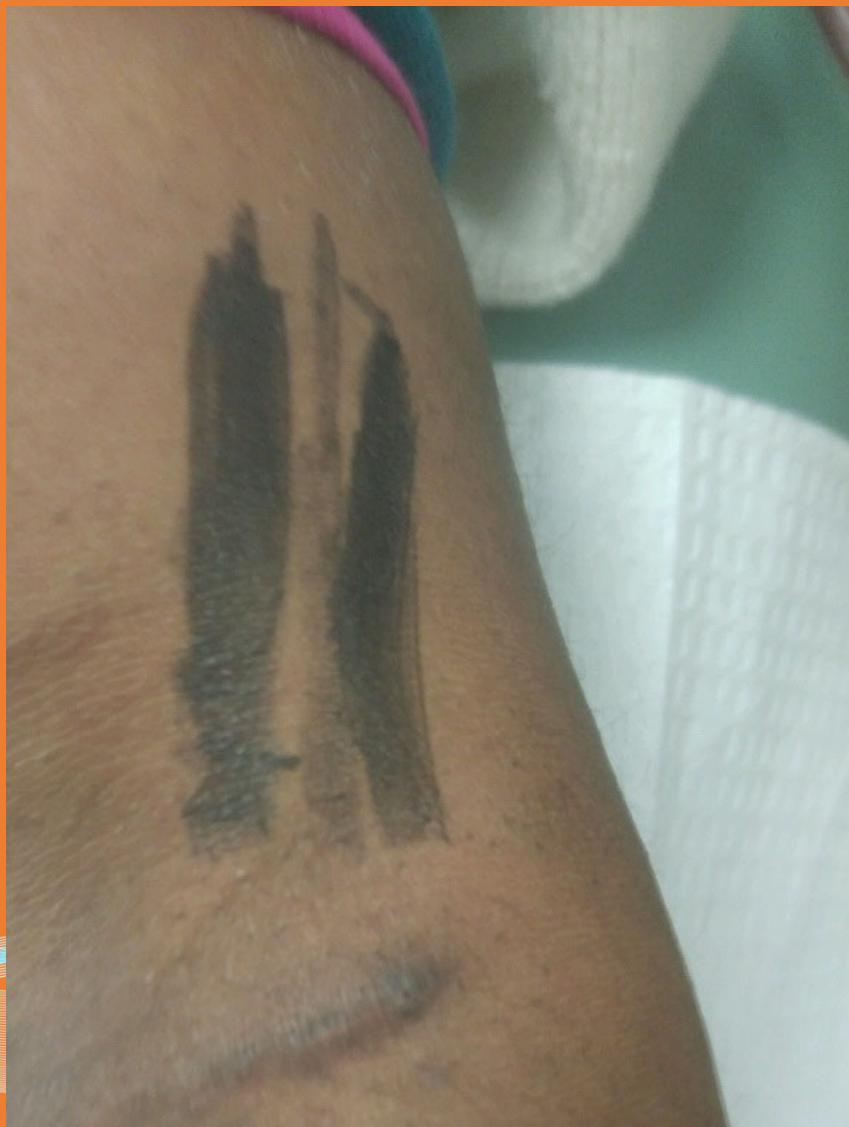


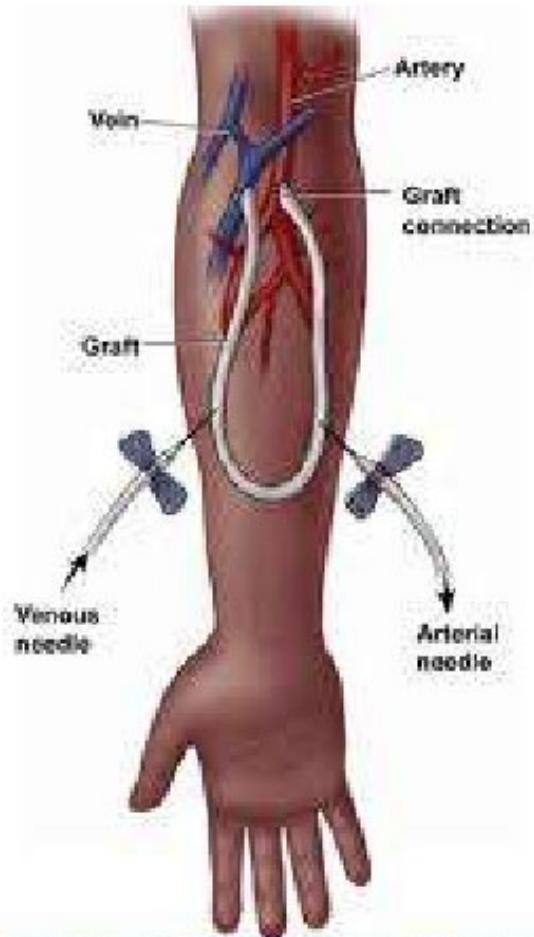
# Radiocephalic AVF











# AV Grafts



NEPHROLOGY  
HOSPITAL KUALA LUMPUR

200 Hours Course for Person In  
Charge

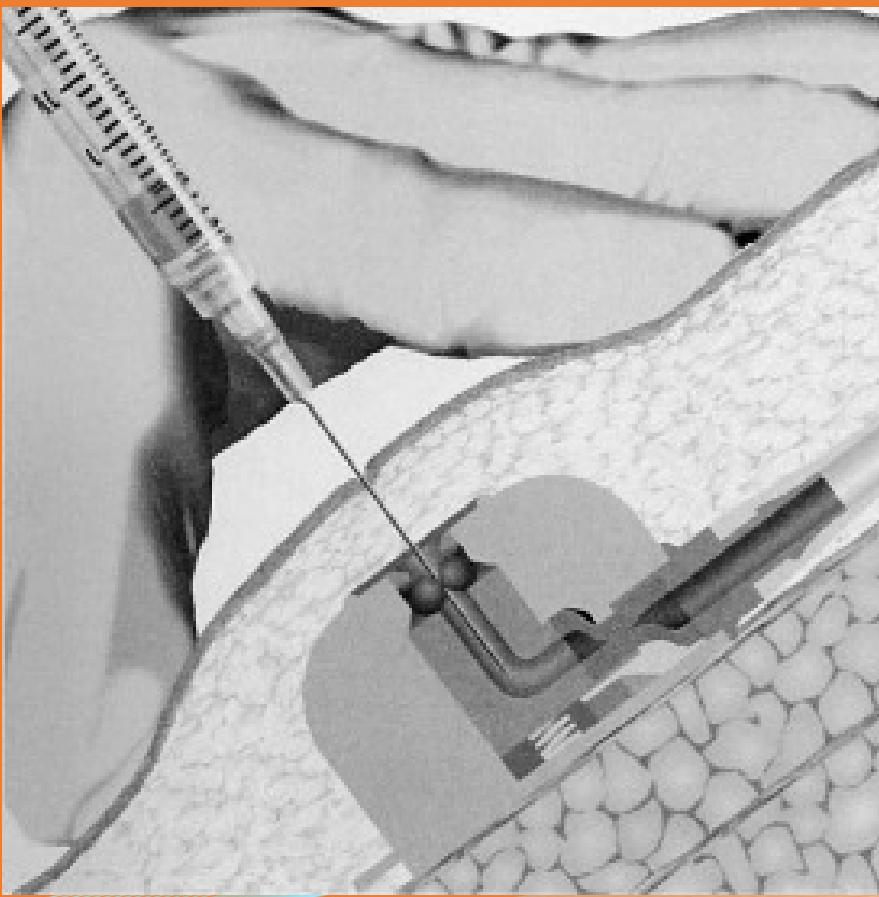


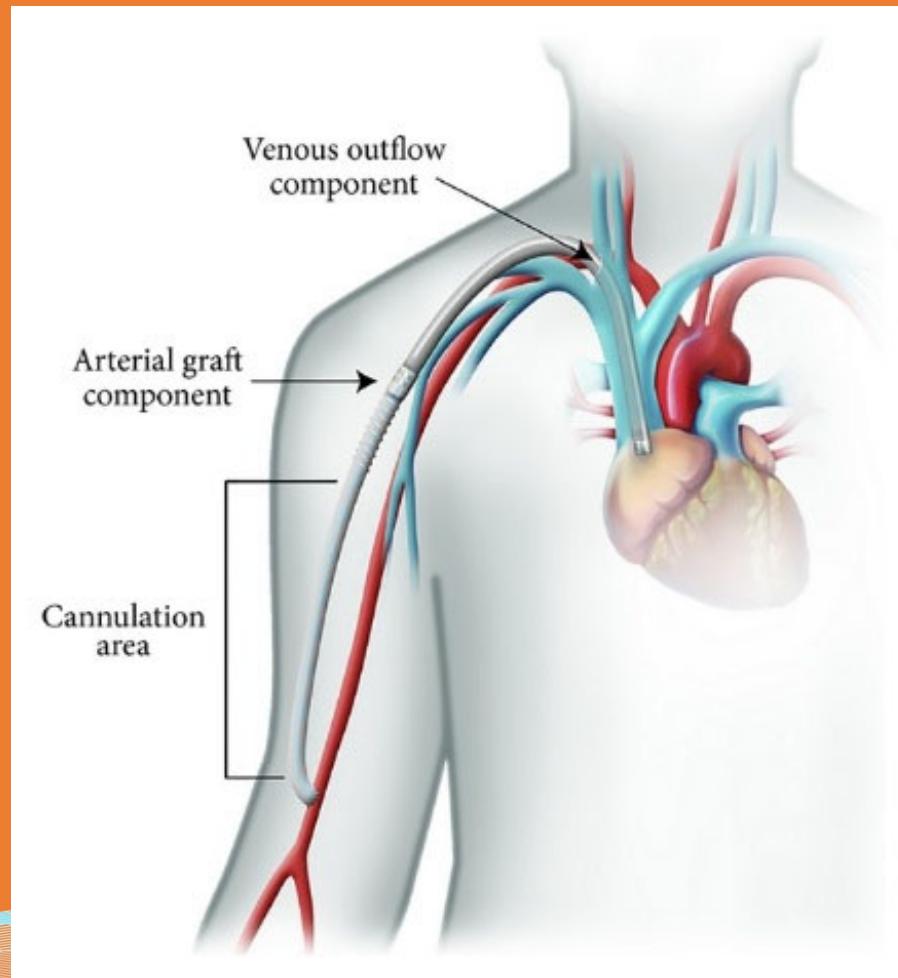
# OUR OLD DEPENDABLE FRIEND



DTX19









# Replace Incision with Puncture

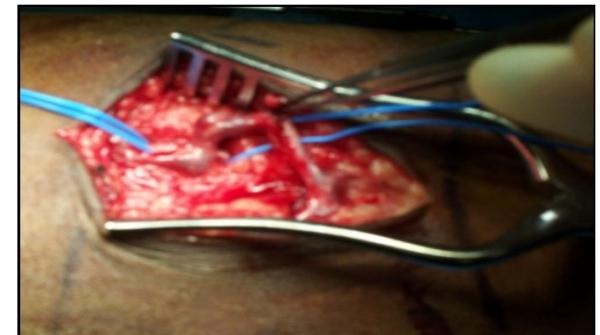


Hull JE, Elizondo-Rojas G, Bishop W, Voneida-Reyna YL. Thermal Resistance Anastomosis Device for the Percutaneous Creation of Arteriovenous Fistulae for Hemodialysis. *J Vasc Interv Radiol* 2017; 28:380-7.



# AVF: Current Gold Standard

- Has not changed since 1966
- Exacting and tedious open surgery
  - 45-90 mins
- High failure/non-maturity rate
  - 30-60% at 1 year

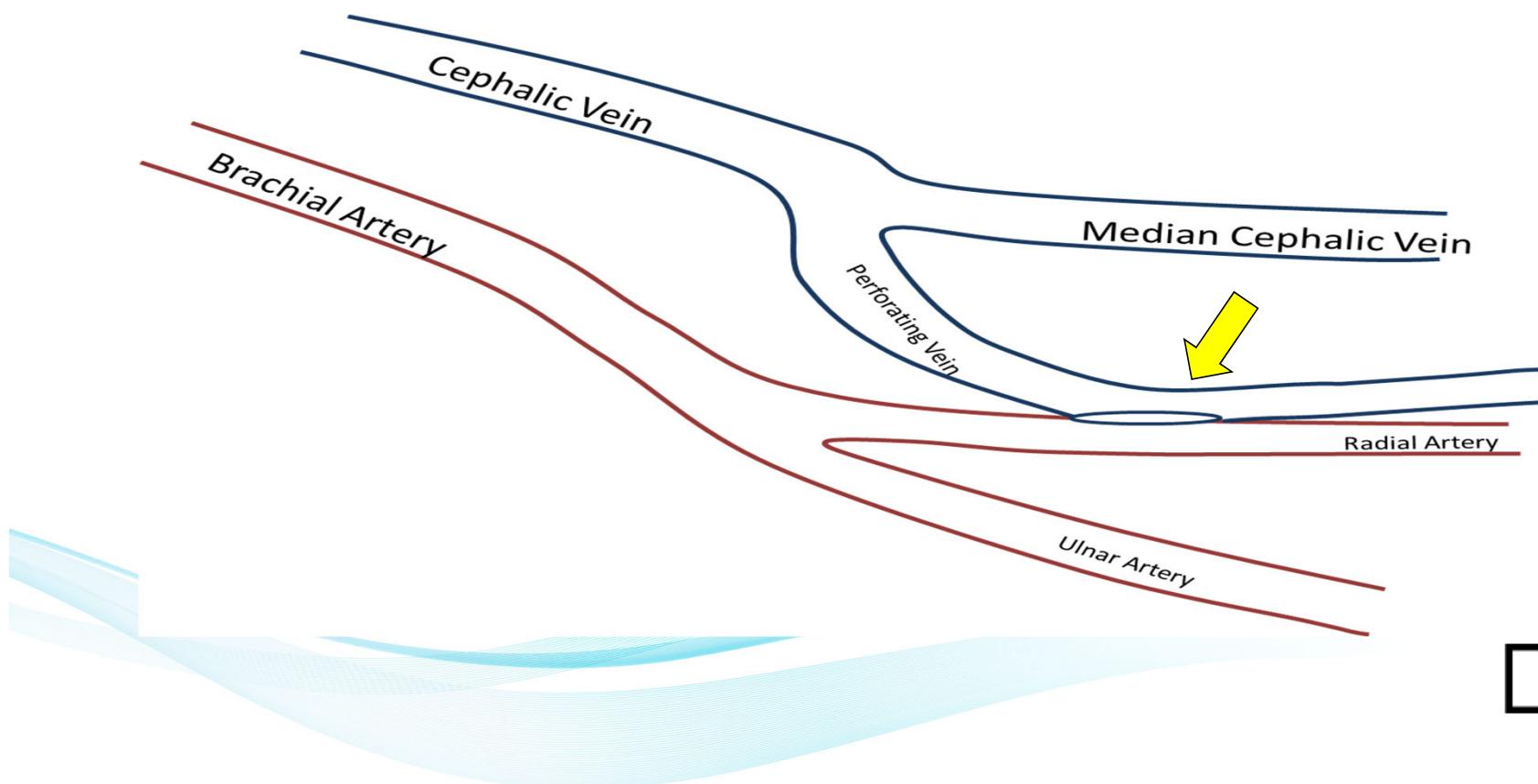


# *Ellipsys® Vascular Access System*

- 6F, single catheter
- Ultrasound guided
- Venous access
- Immediate and permanent fused anastomosis
- FDA and CE Mark approved



# Perforating Vein/Proximal Radial Artery (PRA) Fistula



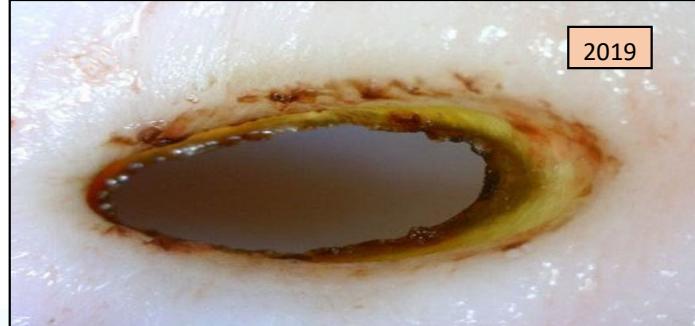
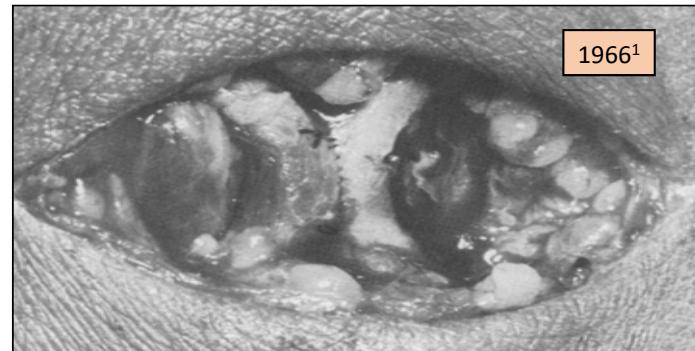
## *EndoAVF®*

- Minimally invasive
- Short maturation time – useable quickly
  - Reduce CVC time
- Dramatic reduction in failures – early or late
- Improved functionality, patency
- Less need for ongoing maintenance procedures (angioplasty, stenting, etc.)



# Surgical vs EndoAVF

- Minimally invasive
- AVF between in-situ vessels
  - No vessel mobilization – twisting, dislocation
  - No surgical trauma – dissection
- Consistent anastomosis geometry



<sup>1</sup>Brescia MJ, Cimino JE, Appel K, Hurwich BJ. Chronic hemodialysis using venipuncture and a surgically created arteriovenous fistula. *N Engl J Med* 1966; 275:1089-92.

# The ELLIPSYS SYSTEM

- Under high frequency ultrasound guidance The Ellipsys System uses a novel outer access cannula guidewire and vessel capture construct that creates a connection of the vein to the artery using an intravascular approach

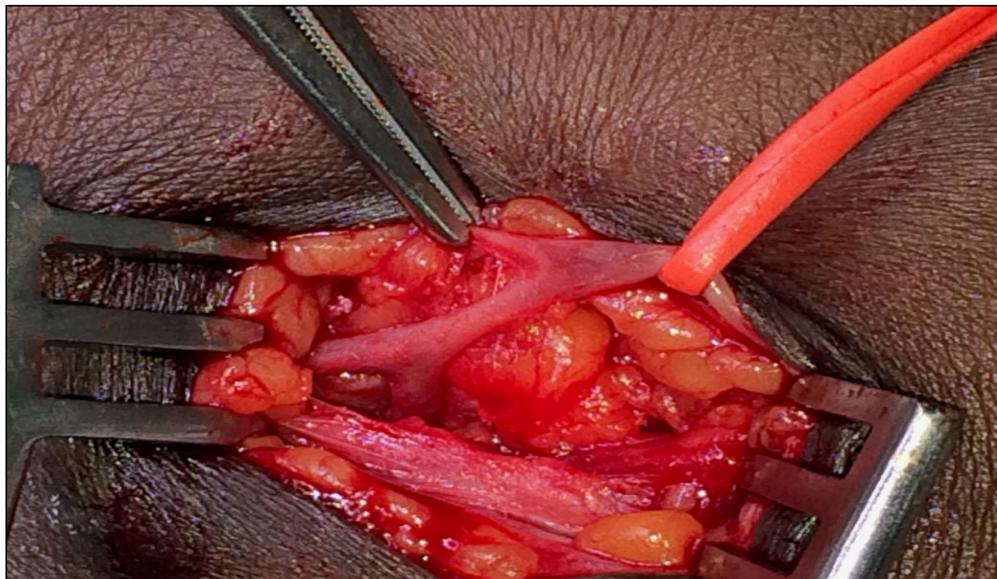


# The Ellipsys System

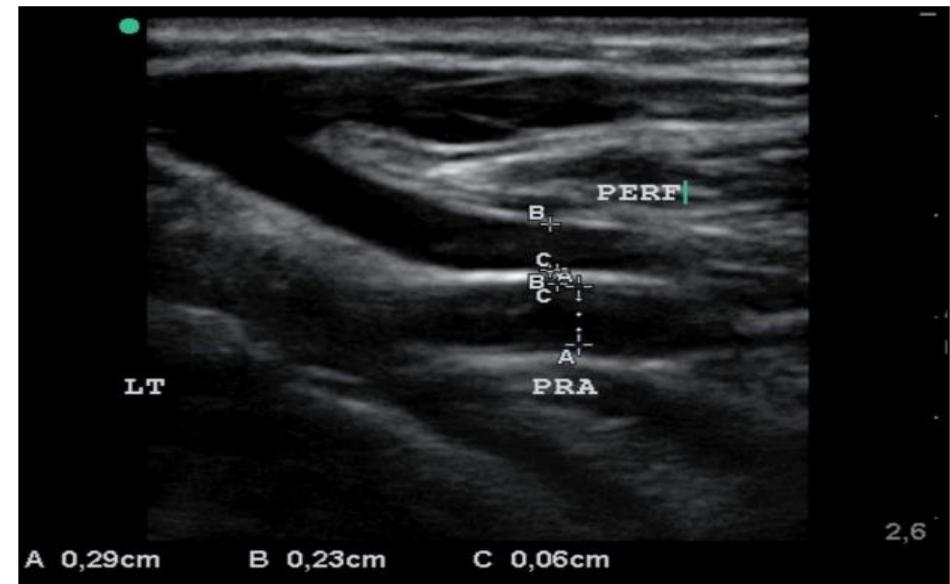
- A select amount of low power thermal energy is used to cut the walls of the vessels and fuse the tissue creating an in-vivo anastomosis without leaving any foreign material in the resulting AV Fistula



# Replace Dissection with Ultrasound



Vessels dissected



Vessels in-situ

Hull JE, Elizondo-Riojas G, Bishop W, Voneida-Reyna YL. Thermal Resistance Anastomosis Device for the Percutaneous Creation of Arteriovenous Fistulae for Hemodialysis. *J Vasc Interv Radiol* 2017; 28:380-7.



## *Results of U.S. FDA Trial*

- Primary efficacy endpoint 86% (92/107) vs. surgical target goal > 49% ( $p=0.0001$ )
- Primary safety endpoint: No device related serious adverse events
- Secondary endpoints:
  - Two-needle dialysis in 88% (71/81)
  - Number of days to dialysis: 100

Hull JE, Jennings WC, Cooper RI, Waheed U, Schaefer ME, Narayan R. The Pivotal Multicenter Trial of Ultrasound-Guided Percutaneous Arteriovenous Fistula Creation For Hemodialysis Access. JVIR 2018 Feb.



# Surgery vs. Ellipsys

	<b>Surgery AVF</b>	<b>Ellipsys<sup>1</sup></b>
12 Month Functional Patency	60%	92%
Functional usability @ 12 months	50%	83%
Time to Dialysis	136 days	100 days
Technical Success	100%	99%
Primary Efficacy Success	60-70%	89%
Device Related SAEs	0%	0%
Procedure Related SAEs	1%	1%
Maintenance Rate Pt./Yr.	3.5	3.1

<sup>1</sup>Hull JE, Jennings WC, Cooper RI, Waheed U, Schaefer ME, Narayan R. The Pivotal Multicenter Trial of Ultrasound-Guided Percutaneous Arteriovenous Fistula Creation For Hemodialysis Access. JVIR 2018 Feb.



# BASIC PHYSICAL EXAM

- LOOK

- LISTEN

- FEEL



# Physical Examination for all AVF

## 20 SECOND PROCEDURE

- Pulse
- Thrill
- Arm Elevation Test
- Augmentation Test

## Normal Access

- Soft pulse/easily compressible
- Inflow area thrill
- Continuous Bruit outflow
- Detects Stenosis
- Ensures adequate inflow



# Ultrasound of AVF



DTX19

# Marked AVF



# *Ellipsys Vascular Access System*

- **Less Invasive**

- Percutaneous vs. open

- **Faster**

- 23 mins vs. 45-90 mins

- **Better**

- No implant or sutures left behind
- Lower complications

- **Cost Effective**

- Decrease catheter prevalence
- Reduces mortality, morbidity and hospitalization



## *Ellipsys Patients @ 1 year*



DT 19

# THANK YOU

