GORE® VIABAHN®
Endoprosthesis with
PROPATEN Bioactive Surface*

RESTORING FLOW TO A BRACHIOAXILLARY AV GRAFT AFTER MULTIPLE FAILED PTA REVISIONS

Case submitted by Nicolas Mouawad, M.D.

Challenge

- 48-year-old male with end stage renal disease secondary to hypertensive nephrosclerosis and diabetic nephropathy
  - Relevant patient history:
    - Diabetes mellitus, chronic anemia, paroxysmal atrial fibrillation, coronary artery disease, hypertension, hyperlipidemia, COPD, tobacco use
    - Left brachioaxillary arteriovenous (AV) graft 4-7 mm implanted June 26, 2018. Two revisions, April 8, 2019 and August 23, 2019, each with an BD® ULTRASCORE® Focused Forced PTA Balloon followed by a 9 mm x 40 mm BD® LUTONIX® 035 Drug Coated Balloon PTA Catheter
- Presented after two failed percutaneous transluminal angioplasty (PTA) revisions of the venous anastomosis of an arteriovenous graft, preventing successful hemodialysis.

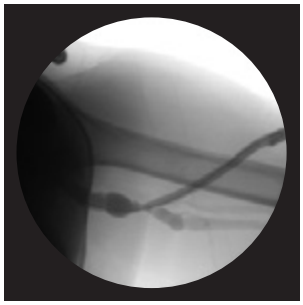


Image 1

Fistulography with recurrent stenosis noted at venous outflow anastomosis.

Procedure

- Planned definitive treatment with outflow stenting
- Advanced the TERUMO® RADIFOCUS® GLIDEWIRE® ADVANTAGE .035" Guidewire across the target lesion (*Image 2*)
- Pre-dilated the stenotic lesion with an 8 x 40 mm MEDTRONIC EVERCROSS PTA BALLOON Catheter (*Image 2*)
- Placed a 9 mm x 5 cm .035" guidewire compatible low profile VIABAHN® Device (*Image 3*)
- Post-dilated with a 9 x 40 mm MEDTRONIC EVERCROSS PTA BALLOON Catheter PTA (*Image 4*)

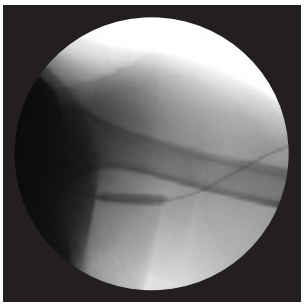


Image 2

Lesion preparation with pre-dilatation using 8 x 40 mm noncompliant balloon.

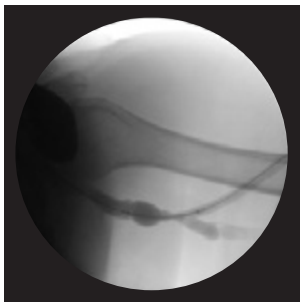


Image 3

Post-PTA outflow fistulography in preparation for GORE® VIABAHN® Endoprosthesis with PROPATEN Bioactive Surface deployment.

Images courtesy of Nicolas Mouawad, M.D. Used with permission.
* As used by Gore, PROPATEN Bioactive Surface refers to Gore's proprietary CBAS Heparin Surface.

Together, improving life

Result

- Excellent outflow without any recurrent complication at eight months post-intervention.

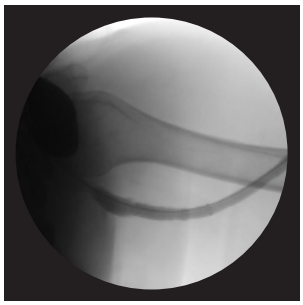


Image 4

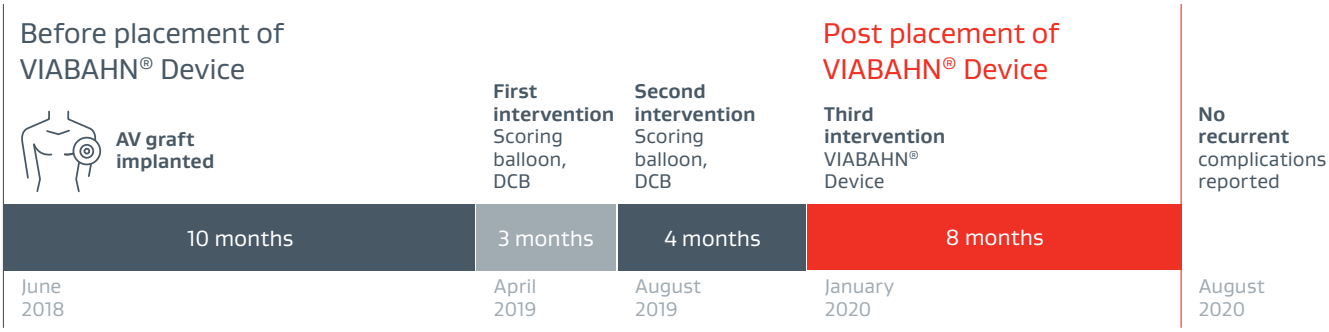
Fistulogram following stent deployment with complete resolution of stenosis.

Case Takeaways

The outcome of this case aligns to the well-established findings that the VIABAHN® Device offers value through reduced frequency of repeat interventions as compared to PTA.[1]

Enhanced access and visibility in challenging anatomies is enabled by a low profile and radiopaque markers on the proximal and distal ends of the device.

At eight months post-placement, the VIABAHN® Device has exceeded results achieved with prior PTA treatments; primary patency of the stent graft is maintained, with no circuit reinterventions post VIABAHN® Device placement to date.



1. Mohr BA, Sheen AL, Roy-Chaudhury P, Schultz SR, Aruny JE; REVISE Investigators. Clinical and economic benefits of stent grafts in dysfunctional and thrombosed hemodialysis access graft circuits in the REVISE Randomized Trial. *Journal of Vascular & Interventional Radiology* 2019;30(2):203-211.e4. https://www.jvir.org/article/S1051-0443(18)31772-X/fulltext

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