

A COMPARATIVE STUDY OF THE RADIAL ACCESS TO THE FEMORAL ACCESS AT THE CAROTIDE STENTING

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BACKGROUND

Radial access now replaces femoral one, and in some countries is used as the dominant technique for PCI.

OBJECTIVES

To estimate the duration of hospitalization of patients and the safety of radial and femoral approaches in endovascular treatment of carotid arteries stenosis.

METHODS

A prospective multicentered randomized controlled study was performed in 2015-2016 in 92 patients who underwent endovascular treatment of stenosis of carotid arteries with the radial and femoral approach.

RESULTS

Patients were divided into 2 groups: group 1 (control group) with femoral access patients 46 patients. Mean hospitalization duration was $7.4 \pm 2,1$ days. In 6 cases there were various complications related to access. 45 patients with radial access was in the 2 group. Group 2 patients activation was carried out one hour after the procedure, whereas in the control group was at least 12 hours since the end of the procedure. In the 2 group no access-related complications during hospital stay have been identified.

CONCLUSIONS

We have proved the significant decrease in hospital stay in $1.9 \pm 1,1$ ($p < 0.05$) days in radial access compared to femoral in endovascular treatment in asymptomatic and symptomatic patients with carotid arteries stenosis. Also radial access demonstrated safety advantage over femoral.