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Transradial approach for bronchial artery embolization

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Background Bronchial artery embolization (BAE) is considered the most effective nonsurgical emergent treatment for massive hemoptysis, which holds 50%-100% mortality rate if treated conservatively. The transradial approach (TRA) is becoming more popular than the transfemoral approach (TFA) in percutaneous coronary intervention.

Purpose To compare systematically transradial approach and the transfemoral approach in bronchial artery embolization.

Methods We had analyzed the clinical, angiographic and technical results of BAE performed between 2014 and 2017. In the present study 58 patients with massive hemoptysis that underwent BAE via the TRA (n=29) or the TFA (n=29) were analyzed. Clinical factors and outcomes in these two groups were compared.

Results The prevalence of artery vasospasm significantly higher (P<0.05) and the puncture time was significantly longer (P<0.05) in patients who underwent BAE via the TRA rather than via the TFA. However, the complication rate was significantly lower (P<0.05) and the time bedridden (P<0.05) and artery compression time (P<0.05) were significantly shorter via the TRA than via the TFA.

Conclusion These results suggest that BAE via the TRA was associated with a lower complication rate, and shorter artery compression time and bedridden time than BAE via the TFA. Transradial bronchial artery embolization is technically feasible and safe procedure.