



We aimed to determine a better understanding of the current practice patterns around vascular access thrombosis in France, with 4 axes: incidence, surveillance protocol, treatment, and time to treatment” Sadaghianloo et al (2015).

Reference:

Sadaghianloo, N., Jean-Baptiste, E., Islam, M.S., Dardik, A., Declémy, S. and Hassen-Khodja, R. (2015) Vascular Access Thrombosis in France: Incidence and Treatment Patterns. Annals of Vascular Surgery. May 21st. .

Review of vascular access related thrombosis in France [@ivteam](http://ctt.ec/2e9e1+) #ivteam

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Abstract:

INTRODUCTION: Vascular access thrombosis lacks the implementation of a treatment algorithm at large scale, involving all the actors. We aimed to determine a better understanding of the current practice patterns around vascular access thrombosis in France, with 4 axes: incidence, surveillance protocol, treatment, and time to treatment.

MATERIAL AND METHODS: A comprehensive survey of all the nephrologists staffing all hemodialysis centers in France during April 2013 included 266 of 269 (99%) centers, treating 27798 patients with arteriovenous fistula or graft.

RESULTS: In 104 centers treating 11088 patients, there were 905 documented episodes of vascular access thrombosis (8.8%) in 1 year; in the other 162 centers that supplied a range of events, the mean incidence was 8.4%. Use of in-line access flow monitoring as part of surveillance program was not correlated with better outcome compared to Doppler ultrasound (thrombosis: 7,9% vs. 10%, respectively, $P=.09$). 53% of centers referred the patients to a vascular surgeon and 32% to an interventional radiologist (2% to urologist, 13% variable referral depending on case complexity). Time to treatment was 48h (9%) occurred mainly in rural zones ($P=.04$). The specialty of the treating physician did not influence time to treatment ($P>.05$).

CONCLUSION: In France, vascular access thrombosis rate is low, and not influenced by surveillance protocol type. Most patients can receive timely treatment by vascular surgeons or interventional radiologists.

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