Not So:
3 And 4 Branch F/EVARs Should Be Avoided If Possible
Because
They Result In Higher Complication And Mortality Rates:
From The UK GLOBALSTAR Registry

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Disclosure
Speaker name: S.R.Vallabhaneni
I have the following potential conflicts of interest to report:

□ Consulting
□ Employment in industry
□ Shareholder in a healthcare company
□ Owner of a healthcare company
□ Other(s)
[ ] I do not have any potential conflict of interest

It Is Time To Abandon
2 Branch F/EVAR
For
3 / 4 Branch F/EVAR

3 And 4 Branch F/EVARs Result In Higher Complication And Mortality Rates
Should Be Avoided If Possible

Critical Issues

• Do 4-fens carry higher risk?
• Are they worth it?
• Has my opponent got a point?

My plan

• To give you a balanced view based on multicentre data
• Keep it clean
• After all, my opponent is a charming individual!

Risk with 4-fens

• More operating time
• Technically challenging
• Centre and team experience
• Take more lumbars

Anaconda multicentre

Total n=101
Renal  n= 21  Death 0  (0%)
SMA  n= 47  Death 1  (2.1%)
CA  n= 33  Death 2  (6.1%)
BSET GLOBALSTAR

Total n= 533
2 fen n=259 Death 7 (2.7%)
3 fen n= 177 Death 15 (8.5%)
4 fen n= 97 Death 9 (9.3%)
The chi-square statistic :8.9894. p-value 0.01

Follow-up

Paraplegia

- GLOBALSTAR = 6
- 5 were in four fen repairs

Conclusion

- Complexity of device should not be compared without the context of anatomy
- Frequently you do need four fens to get durable seal
- Four fens are definitely more dangerous
- Risk of death with open repair could well be even higher

Are they worth it ?

- Satisfactory seal zone is of primary concern (number of fens is secondary)
- 3 or 4 Fens are not worth it if you can get durable seal with fewer fens