



INSTITUT UNIVERSITAIRE
DE CARDIOLOGIE
ET DE PNEUMOLOGIE
DE QUÉBEC

AFFILIÉ À  UNIVERSITÉ
LAVAL

Canadian Association
of Interventional Cardiology



Association Canadienne
de cardiologie d'intervention

FOR IMMEDIATE RELEASE

Press release

RADIAL APPROACH FOR CORONARY ANGIOGRAPHY AND ANGIOPLASTY: RESULTS PRESENTED DURING THE AMERICAN COLLEGE OF CARDIOLOGY MEETING CONFIRM CANADIAN LEADERSHIP

Quebec, April 13, 2011, 3:00 PM • During the last scientific sessions of the American College of Cardiology (April 2-5, 2011, New Orleans, USA), Dr S. Jolly from McMaster University (Hamilton, Canada) has presented the results of the RIVAL trial. Under Canadian leadership, this study compared the radial approach (using the artery in the wrist) to the standard femoral approach (using one artery in the groin) for the site of the catheter entry to perform percutaneous diagnostic coronary angiography followed by angioplasty if required. This multicenter international trial enrolled 7,021 patients in 32 countries. Overall, procedural success was similar with both approaches, and complications characterized by death, myocardial infarction (heart attack) stroke or severe bleeding were limited and similar in both groups. However, as expected, the investigators found less vascular access site complications and better outcomes with the radial approach in patients undergoing coronary interventions for acute myocardial infarctions (complications of 3.1% in the radial group vs 5.2% in the femoral group, a statistically significant 40% reduction). Importantly, they also observed that better results were obtained in centers and by operators using the radial approach most frequently. During the same sessions, Dr OF Bertrand and his colleagues from Laval University (Quebec, Canada) presented a large meta-analysis reviewing data comparing radial and femoral approaches for percutaneous coronary angioplasty and stenting. With data accumulated in more than one million patients, they showed that radial approach was associated with 80% reduction in the risk of bleeding or receiving transfusion compared to the femoral approach. Dr O'Brien and his group from Ottawa University (Ottawa, Canada) also showed interesting results confirming several advantages for the radial approach in obese patients.

The radial approach for diagnostic coronary angiography was first described by a Canadian cardiologist, Dr Lucien Campeau (Montreal, Canada) in 1989. Since then, several Canadian institutions have adopted the technique and have contributed to demonstrate its safety and benefits for the patients.

Canadian and international radial operators and researchers have demonstrated over the last 15 years that the radial approach is preferred by patients as it reduces the risks of access-site related bleeding and complications, accelerates ambulation post-procedure, reduces costs and in many cases it allows patients to leave the hospital the same-day of the procedure.

In Canada, 200,000 patients undergo percutaneous coronary diagnostic procedures annually and it is estimated that more than 60,000 coronary angioplasties are performed each year.

The Canadian Association of Interventional Cardiology (CAIC) is an official affiliated organization of the Canadian Cardiovascular Society (CCS) and regroups more than 130 interventional cardiologists from 44 cardiac catheterization laboratories.

Recognizing the importance of education and proper training, the CAIC has launched a radial working group during the last CCS scientific sessions (October 2010). The radial working group includes dedicated radial operators and its goal is to demonstrate the benefits of the radial approach and to promote it as the main technique for diagnostic angiography and coronary interventions.

Since 1994 interventional cardiologists at the Institut Universitaire de Cardiologie et de Pneumologie de Québec (IUCPQ) have begun to use the radial approach. Since then, more than 70,000 coronary procedures have been performed using the radial approach, which is now the preferred technique for diagnostic angiography and interventions.

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About Institute

Annually, more than 14,000 people are hospitalized and 92,000 visits are made in outpatients. The catchment population is over 2 million people, or approximately 30% of the population of Quebec. Affiliated with Laval University, establishment relies on the cooperation and dedication of nearly 3,000 employees, doctors, professionals, researchers, managers and volunteers to provide care and quality services to clients in hospital and outpatient services. The Institute programs include care and highly specialized services for the treatment of cardiopulmonary diseases and diseases related to obesity. Doctors and health professionals of the Institute have extensive expertise and contribute to advancing the science of medicine. The Institute also has a mission to evaluate technologies and methods of health intervention.

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The Institute, now on social media



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