The Supera stent In retrograde vascular access for SFA ostium treatment: The SUPRA-FAST Registry

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Disclosure

Speaker name:

......PESTRICHELLA VINCENZO..................................

I have the following potential conflicts of interest to report:

☐ Consulting

☐ Employment in industry

☐ Stockholder of a healthcare company

☐ Owner of a healthcare company

☐ Other(s)

☐ I do not have any potential conflict of interest
• Different RCTs showed high patency rates and freedom from TLR at one and **three years** follow-up of the biomimetic SUPERA stent

• appropriate stent selection, adequate vessel preparation and deployment technique are mandatory to obtain these results.
No studies have still demonstrated procedural feasibility and stent patency rate when long occlusions recanalizations begin at *SFA ostium*.

Furthermore, in this particular subset of patients, a precise stent apposition to the SFA ostium is mandatory obtained only through a retrograde vascular access.
Stimulated by this consideration..

SUPRAFAST REGISTRY

“SUPera™ Stent in Retrograde vascular Access for SFA ostium Treatment“

Now Enrolling
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**SUPRAFAST REGISTRY**

“SUPera™ Stent in Retrograde vascular Access for SFA ostium Treatment”

- Complete SFA ostial occlusion
- Antegrade or retrograde (or both) recanalization
- Antegrade or retrograde PTA balloon vessel preparation
- Only retrograde ostial SUPERA™ Stent implantation
- For 2nd (or more) stent, antegrade or retrograde implantation
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Some examples..
1. Retrograde ATA procedure
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Retrograde ATA procedure

Kissing technique
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Retrograde ATA procedure
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Retrograde ATA procedure

FINAL RESULT
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2. Retrograde occluded DORSALIS PEDIS procedure

- CXI 2,3 Fr Catheter
- Command 14 ES
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Retrograde DORSALIS PEDIS procedure

Vascular access control, hemostasis and FINAL RESULT
Retrograde DORSALIS PEDIS procedure.... follow-up

6 months Doppler Follow Up

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2. Retrograde ATA procedure and femoral bifurcation stent
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Re-Entry Technique

AND

Prolonged Vessel Predilatation (Armada 18 5.5-200mm)

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2. Retrograde ATA procedure and femoral bifurcation stent

Angio Post- SFA PTA

Bail-out WIRING of Profunda femoral artery and PTA
2. Retrograde ATA procedure and femoral bifurcation stent

Simultaneous Supera Kissing stent
2. Retrograde ATA procedure and femoral bifurcation stent
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2. Retrograde ATA procedure and femoral bifurcation stent

Access hemostasis

FINAL RESULT
CONCLUSIONS

33 pz treated with complete SFA ostial occlusion

25 pz with 6 month follow up

- 100% TASC D lesions
- 100% Long Lesions (> 20 cm)
- 100% CTO
- 100% procedural success
- 100% RETROGRADE ostial stent implantation
- 0.5 % vascular access complications (0 bleeding, 1 hematoma, (3 AVF)
- 0% conversions to surgery
- 1 pz (with AAA) developed aneurysmal degeneration at proximal SFA
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