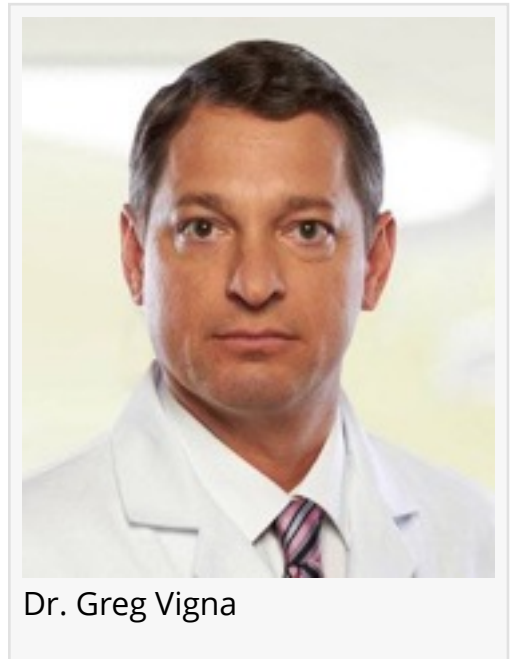


Drug-Eluting Resorbable Scaffold: Hope For Those with Below-knee Vascular Disease

Study calls into question the practice of repeat angioplasties for recurrent stenosis of arteries below the knee

SANTA BARBARA , CALIFORNIA , UNITED STATES , January 9, 2024 /EINPresswire.com/ -- "Among patients with chronic limb-threatening ischemia and infrapopliteal artery disease (below the knee), angioplasty has been associated with frequent reintervention and adverse limb outcomes from restenosis" ... Brian DeRubertis, MD, New England Journal of Medicine, January 4, 2024.

What else did Dr. DeRubertis report in "Drug-Eluting Resorbable Scaffold versus Angioplasty for Infrapopliteal Artery Disease" in NEJM 390; 1, January 4, 2024?



Dr. Greg Vigna

- 1) The use of an everolimus-eluting resorbable scaffold was superior to angioplasty with respect to primary efficacy endpoint.
- 2) Freedom from the following events at 1 year: Amputation above the ankle, occlusion of the target vessel, clinically driven revascularization of the target lesion, and binary restenosis of the target lesion.

“

The practice of repeat angioplasties for claudication is not uncommon even though its long-term therapeutic benefit is questionable. ”

Greg Vigna, MD, JD

To see Dr. DeRubertis' article:

<https://www.nejm.org/doi/10.1056/NEJMoa2305637>

[Greg Vigna, MD, JD](#), national pharmaceutical injury attorney, "This study is important as it calls into question the practice of repeat angioplasties for recurrent stenosis of arteries below the knee. Angioplasty is indicated for occluded or a partially occluded vessels where there is decreased blood flow. Unfortunately, any aggravation of

the cells at the internal lining of the blood vessels can trigger normal physiological events that stimulates platelet aggregation and will cause occlusion. I would think new devices, with properties shared by cardiac stents, should become the standard of care for patients with lesions below the knee and above the top one third of the lower leg, as the outcomes are

superior.”

Dr. Vigna states, “Virchow’s triad has always been fundamental to the study of vascular thrombosis and includes 1) Hypercoagulability of blood, 2) Alterations of blood flow in the vessels, and 3) Vessel wall injury also referred to as endothelial damage. Angioplasty can disrupt the endothelial lining causing vessel wall damage and can stimulate thrombosis and lead to worsening symptoms. This drug eluting scaffold placed at the time of angioplasty appears to be protective against thrombosis.”

Dr. Vigna concludes, “The practice of repeat angioplasties for claudication is not uncommon even though its long-term therapeutic benefit is questionable. This is an important study as it should displace the practice of recurrent treatment of lower extremity pain from decreased blood flow and chronic limb-threatening ischemia.”

To learn about Virchow’s triad:

<https://www.ncbi.nlm.nih.gov/books/NBK539697/#:~:text=In%20theory%2C%20Virchow's%20triad%20postulates,Vessel%20wall%20injury%2F%20Endothelial%20damage>

Dr. Vigna is a California lawyer who focuses on catastrophic neurological injuries, amputation, and other serious injuries and has a national litigation practice. He is Board Certified Physician in Physical Medicine and Rehabilitation, a Certified Life Care Planner, an expert on spinal cord injury, cerebral palsy, cauda equina syndrome, stroke, amputation, and traumatic brain injury. [Vigna Law Group](#) has a non-exclusive association with [Ben Martin Law Group](#), a firm in Dallas, Texas. Ben Martin is a national pharmaceutical attorney and personal injury attorney in Dallas, Texas.

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