



Regarding “Long-Term Evaluation of Percutaneous Groin Access for EVAR”

Alan D. White¹ · Can Hazar¹ · David Jarosz¹ · Paul Walker¹ · Costa Tingerides^{1,2}

Received: 12 January 2019 / Accepted: 30 January 2019 / Published online: 7 February 2019

© Springer Science+Business Media, LLC, part of Springer Nature and the Cardiovascular and Interventional Radiological Society of Europe (CIRSE) 2019

Dears Sirs

We read with great interest the article by Dwivedi et al [1]. The use of percutaneous access for endovascular aneurysm repair is associated with high success rate and low incident of complications. The authors observed that accessed vessels do not show evidence of stenosis or thrombosis on routine follow-up CT scans performed at 30 days and annually thereafter.

However, the authors do not report vessel diameter on the preoperative imaging. The comparison is between postoperative scans. It could be argued that any change in diameter secondary to the use of a closure device is best assessed by comparing scans before and after the use of the device. Additional review of the pre-procedure CT to

assess effect of the procedure on vessel diameter would be very informative.

Compliance with Ethical Standards

Conflicts of interest The authors declare no conflicts of interest.

Reference

1. Dwivedi K, Regi JM, Cleveland TJ, et al. Long-Term Evaluation of Percutaneous Groin Access for EVAR. *Cardiovasc Interv Radiol*. 2019;42:28. <https://doi.org/10.1007/s00270-018-2072-3>.

Publisher's Note Springer Nature remains neutral with regard to jurisdictional claims in published maps and institutional affiliations.

✉ Alan D. White
alanwhite2@nhs.net

¹ Department of Radiology, Leeds Teaching Hospital NHS Trust, Leeds, UK

² University of Leeds, Leeds, UK