The OIS as an IR Center of Excellence

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Founder and CMO
Comprehensive Integrated Care

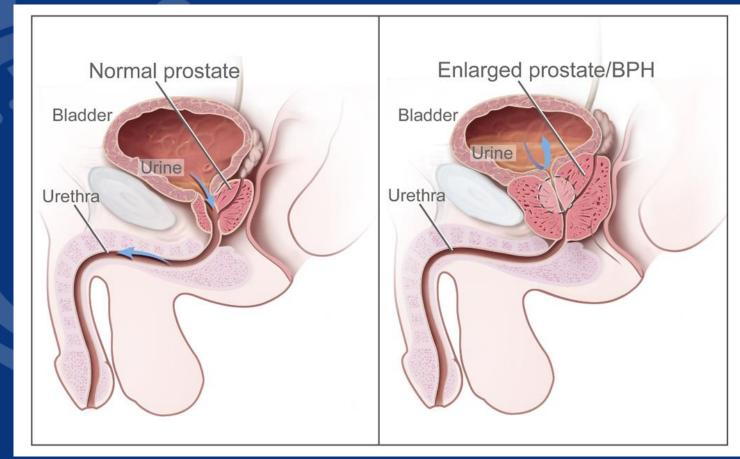


Disclosure Statement of Financial Interest

CiC provides education, consultation and training for industry partners, including: SIRTEX, Philips, Abbott, Bard/BD, and Ra Medical

COE: PAE

- 76 year old gentleman with BPH
- Severe LUTS with PSS of 34 (severe)
- Desires PAE for treatment



Benign Prostatic Hypertrophy

- Most Common Male tumor
- Prevalance: Greater and 50% of men have histolopathologic BPH by age 60
- Initial development in the 40s, increasing to 90% of men by age 80
- 50% of men have LUTS by age 60
- Affects QOL and sleep patterns



Meta-Analysis of Prostatic Artery Embolization for Benign Prostatic Hyperplasia

Andre Uflacker, MD, Ziv J Haskal, MD, Tiago Bilhim, MD, James Patrie, MS, Timothy Huber, MD, and João Martins Pisco, MD

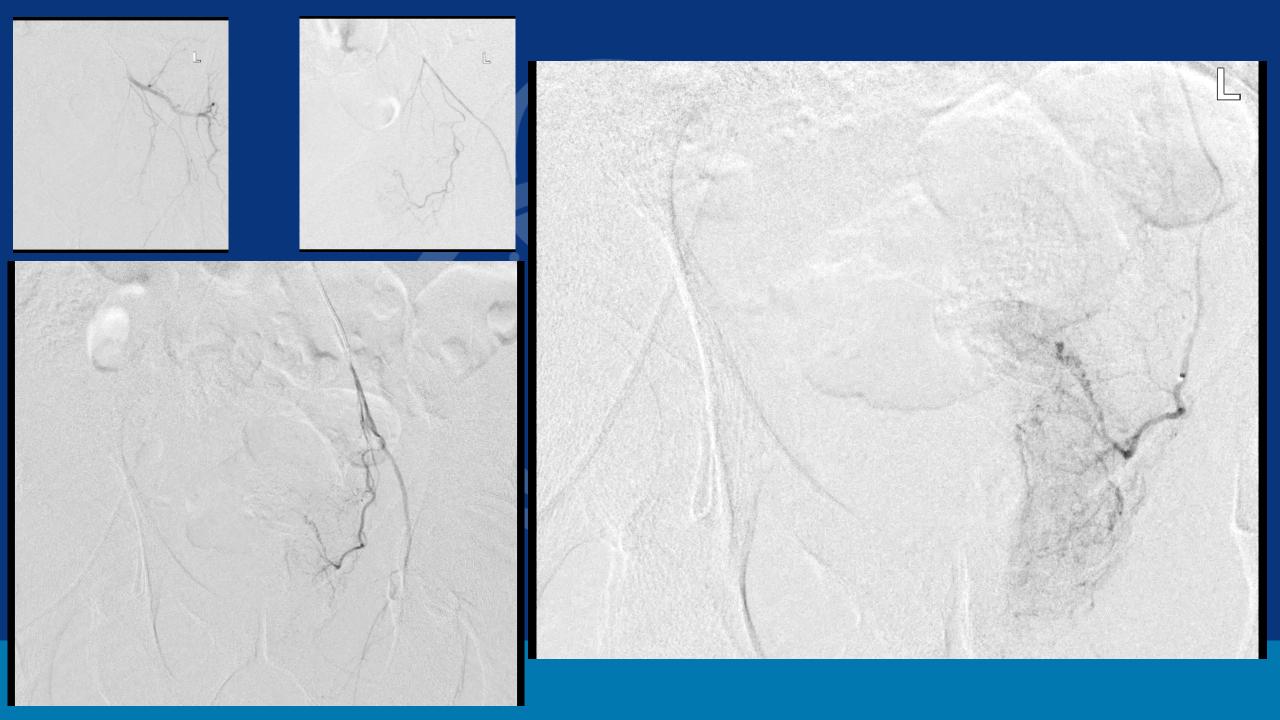
ABSTRACT

Purpose: To perform meta-analysis of available data on prostatic artery embolization (PAE).

Materials and Methods: Meta-analysis was conducted on articles published between November 2009 and December 2015. Peer-reviewed studies with > 5 patients and standard deviations and/or individual-level data on one or more of the following outcomes were included: prostate volume (PV), peak flow rate (Qmax), postvoid residual (PVR), International Prostate Symptom Score (IPSS), quality of life (QOL) score, International Index of Erectile Function (IIEF) score, and prostate-specific antigen (PSA) level. A random-effects meta-analysis was performed on the outcomes at 1, 3, 6, and 12 months after PAE compared with baseline values, with a P < .05 decision rule as the null hypothesis rejection criterion.

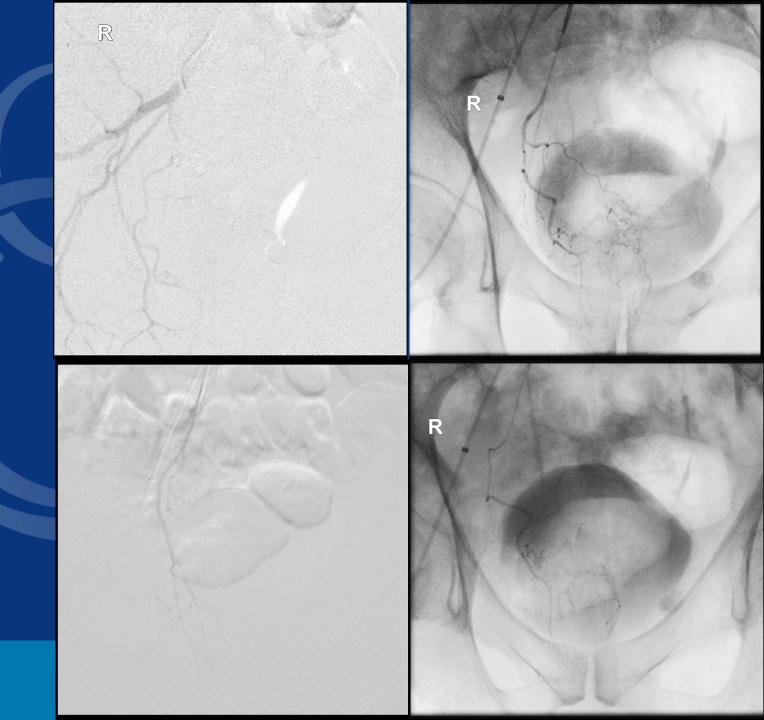
Results: Nineteen of 268 studies were included in data collection, with 6 included in the meta-analysis. At 12 months, PV decreased by 31.31 cm³ (P < .001), PSA remained unchanged (P = .248), PVR decreased by 85.54 mL (P < .001), Qmax increased by 5.39 mL/s (P < .001), IPSS improved by 20.39 points (P < .001), QOL score improved by -2.49 points (P < .001), and IIEF was unchanged (P = 1.0). There were a total of 218 adverse events (AEs) among 662 patients (32.93%), with 216 being Society of Interventional Radiology class A/B (99%). The most common complications were rectalgia/dysuria (P = 0.00) and acute urinary retention (P = 0.00). No class D/E complications were reported.

Conclusions: PAE provided improvement in Qmax, PVR, IPSS, and QOL endpoints at 12 months, with a low incidence of serious AEs (0.3%), although minor AEs were common (32.93%). There was no adverse effect on erectile function.



How to "Get Out of Trouble" During Prostatic Artery Embolization

Ari J. Isaacson, MD Rachel L. Piechowiak, DO, MS Charles Nutting, DO, FSIR Sandeep Bagla, MD



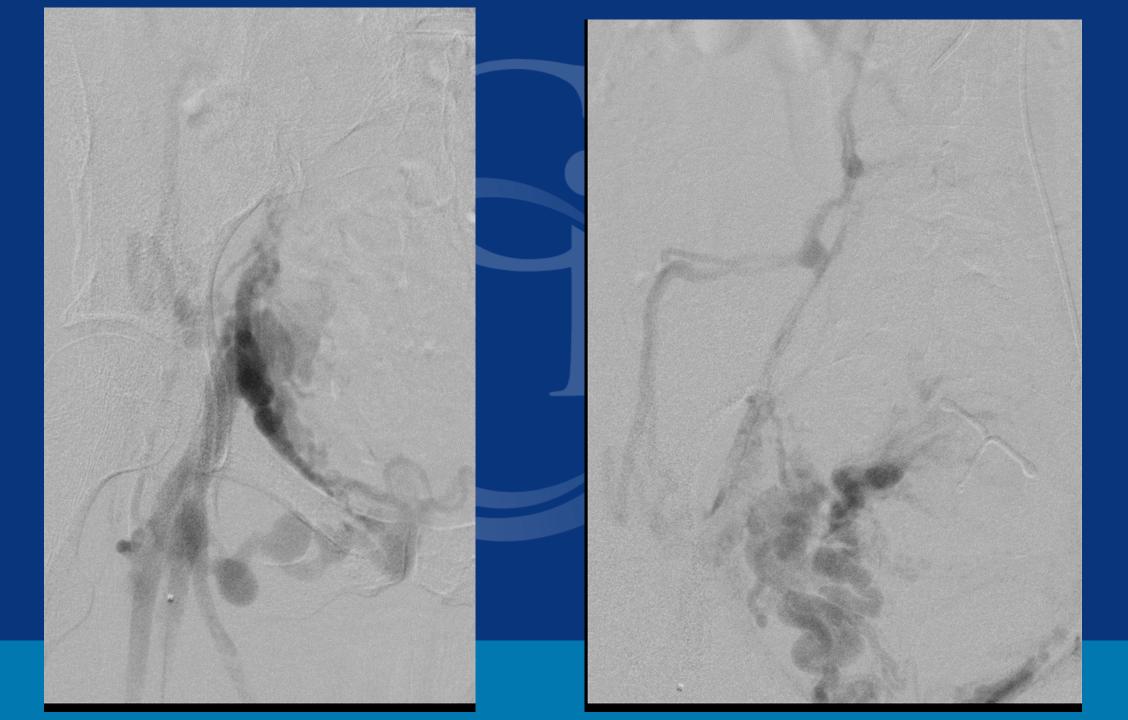
Results

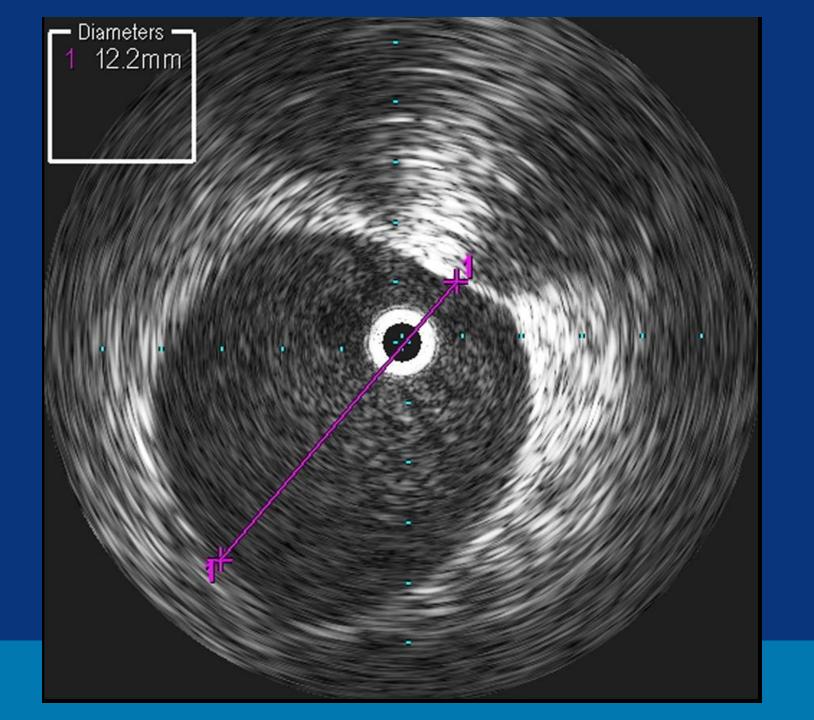
- Post PAE, 97% of patients reported a reduction of their IPSS score by at least 3 points
- 90% of patients dropped at least 1 symptom category, from severe to moderate or moderate to mild.
- Most patients also experienced an improvement in their Quality of Life score and a substantial decrease in prostate volume.
- 80% of men can stop one or all LUTS medications within 3 months.

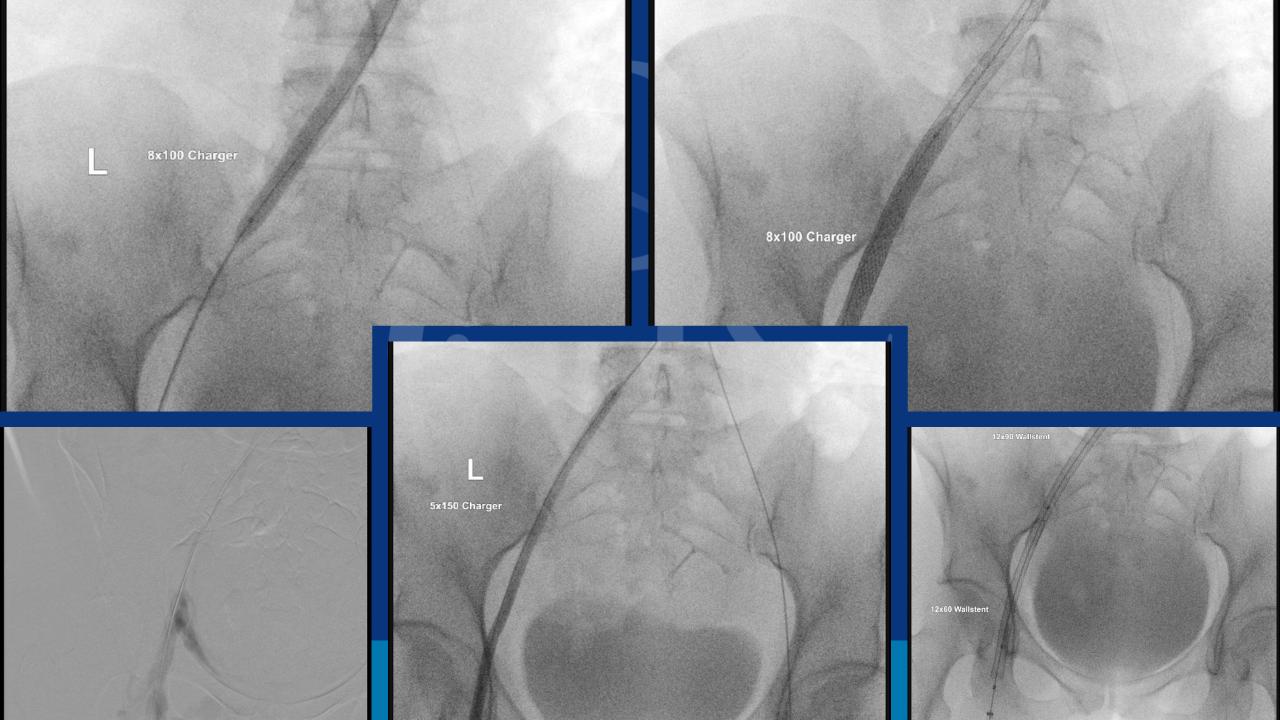
COE: Iliac Vein Reconstruction

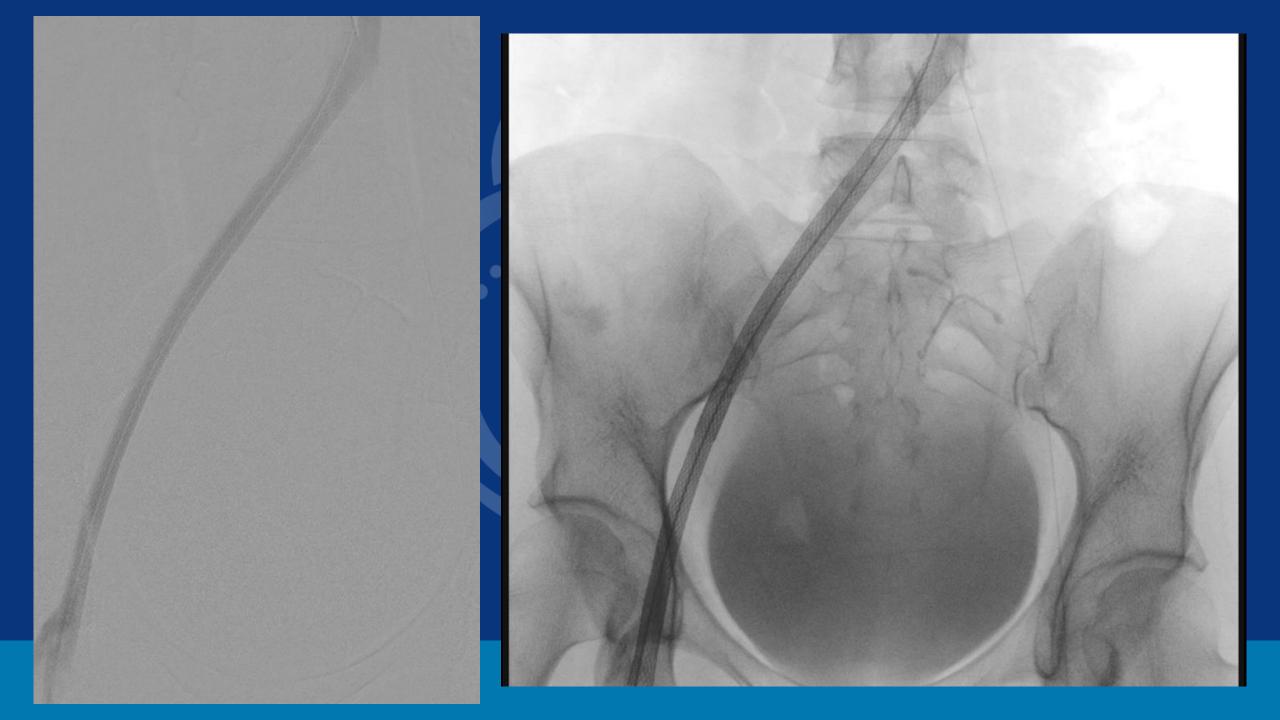
- 37 yo woman
- Massive DVT during pregnancy 6 years prior
- Continued Pelvic Pain and Left leg swelling





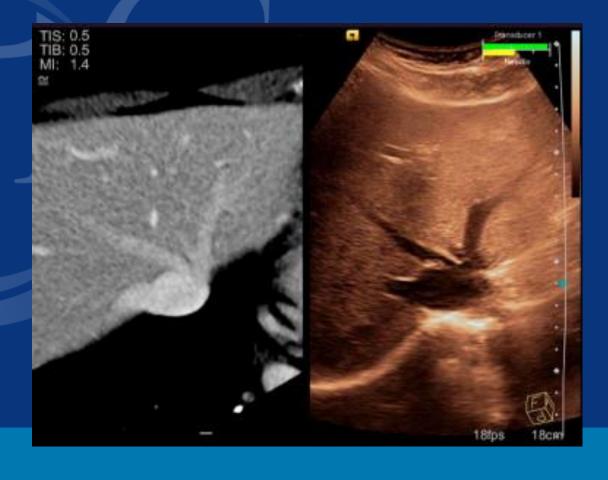


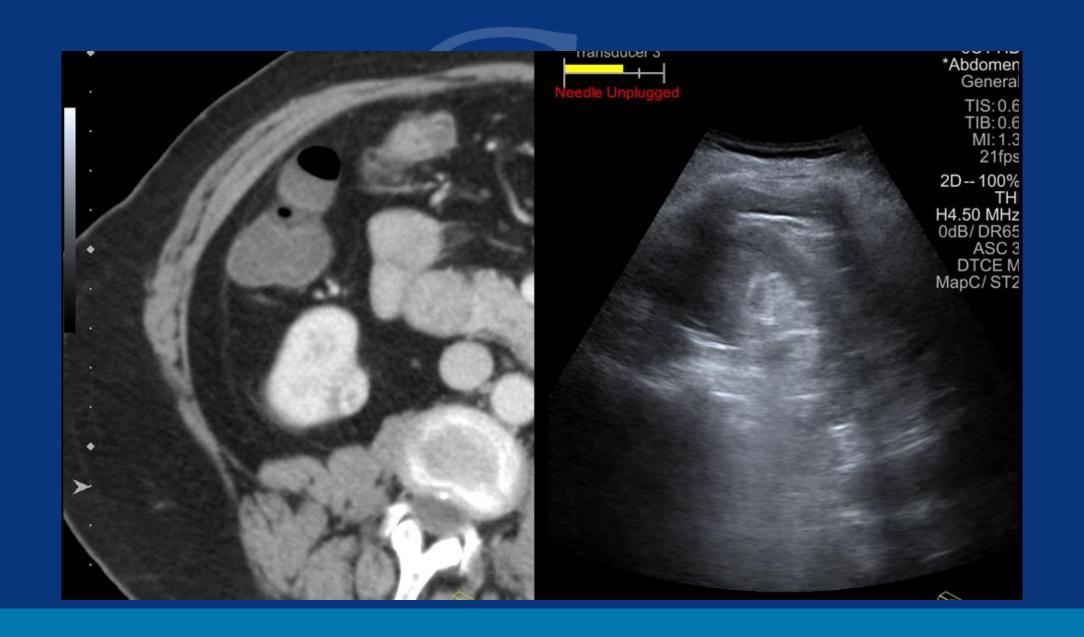


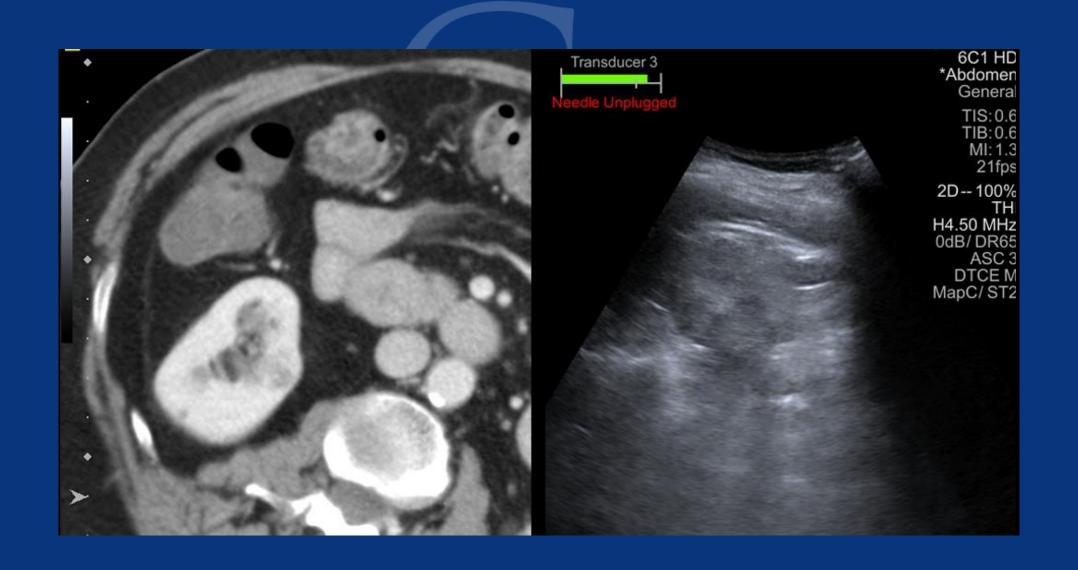


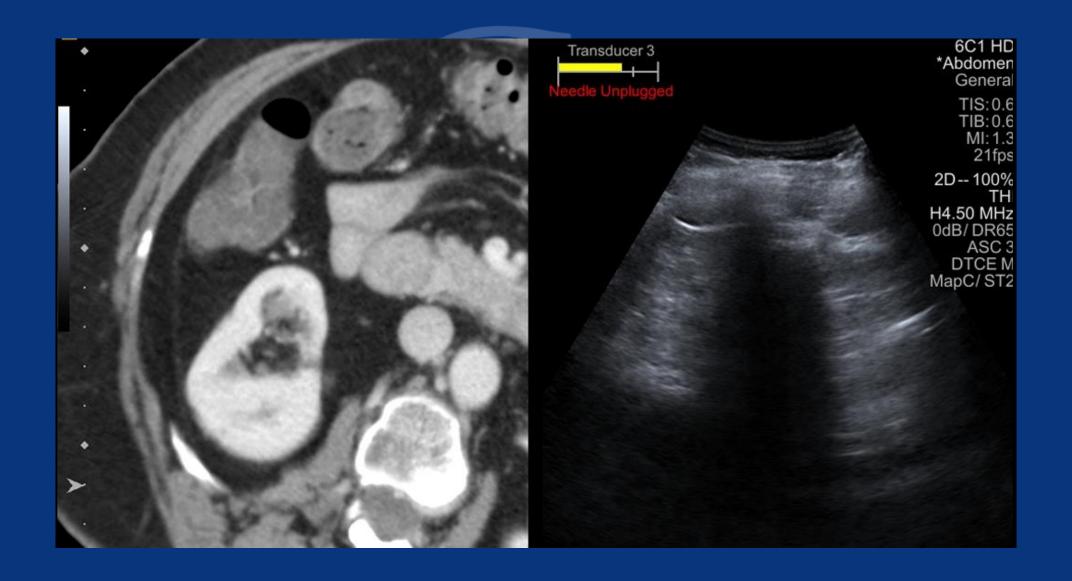
COE: Thermal Ablation of Tumor

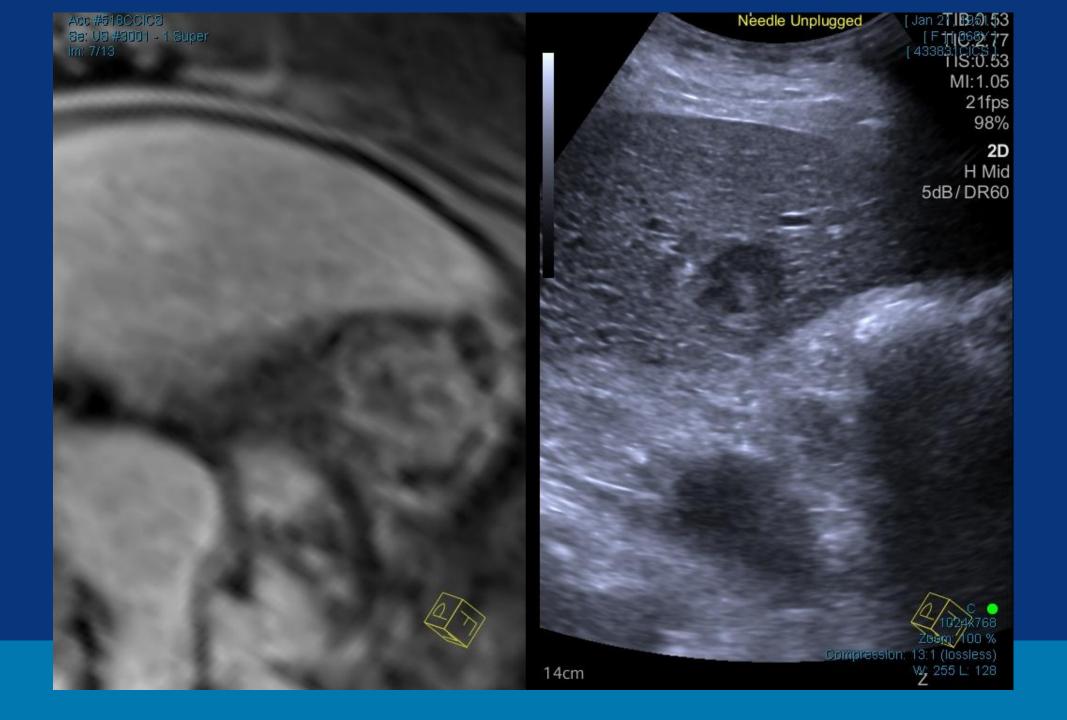
- Best For:
- Renal Malignacies in unfit surgical or nephron-sparing cases
- Liver Primary or Metastases as an adjuct to systemic therapy

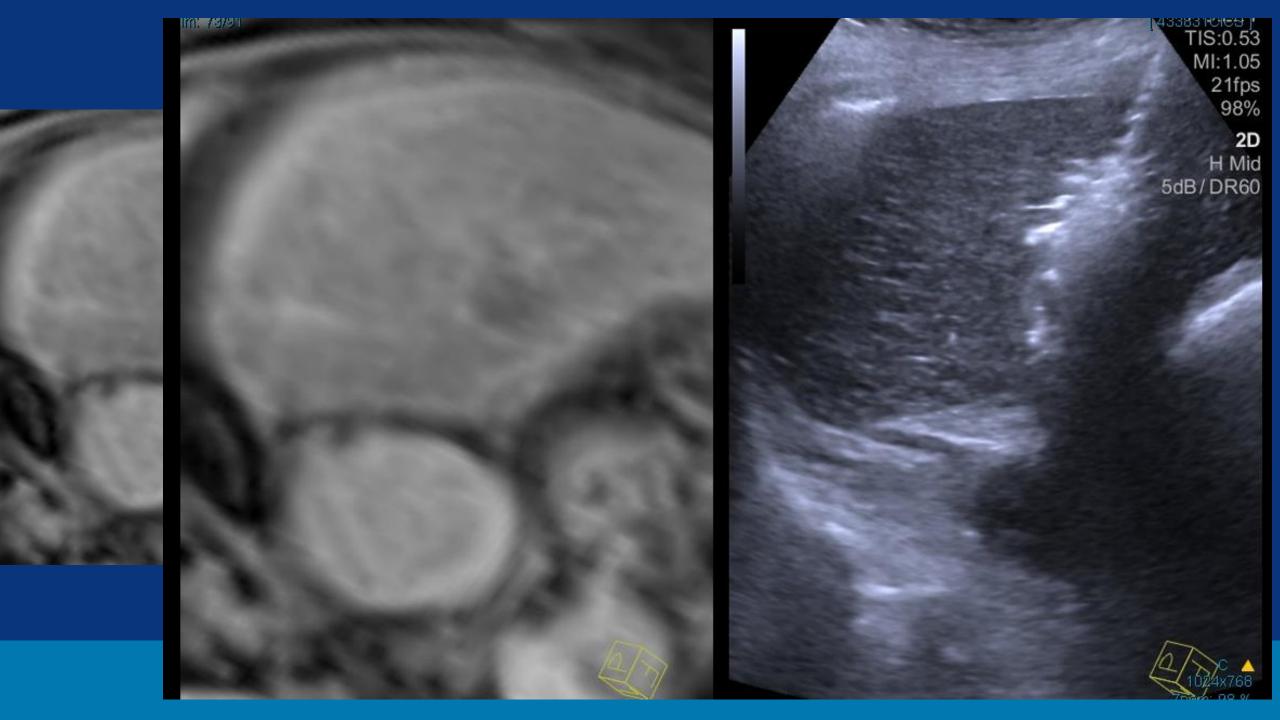










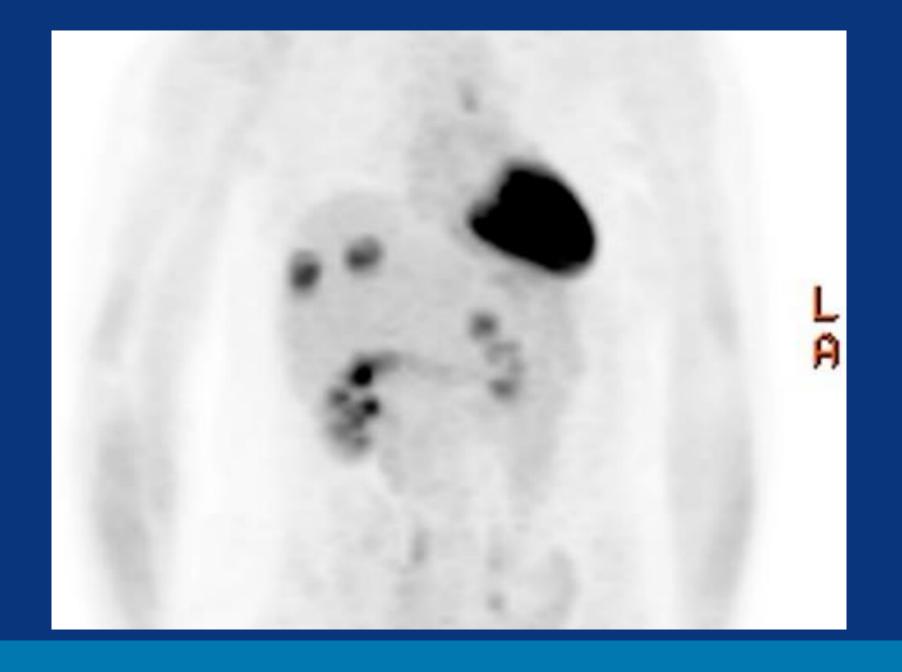


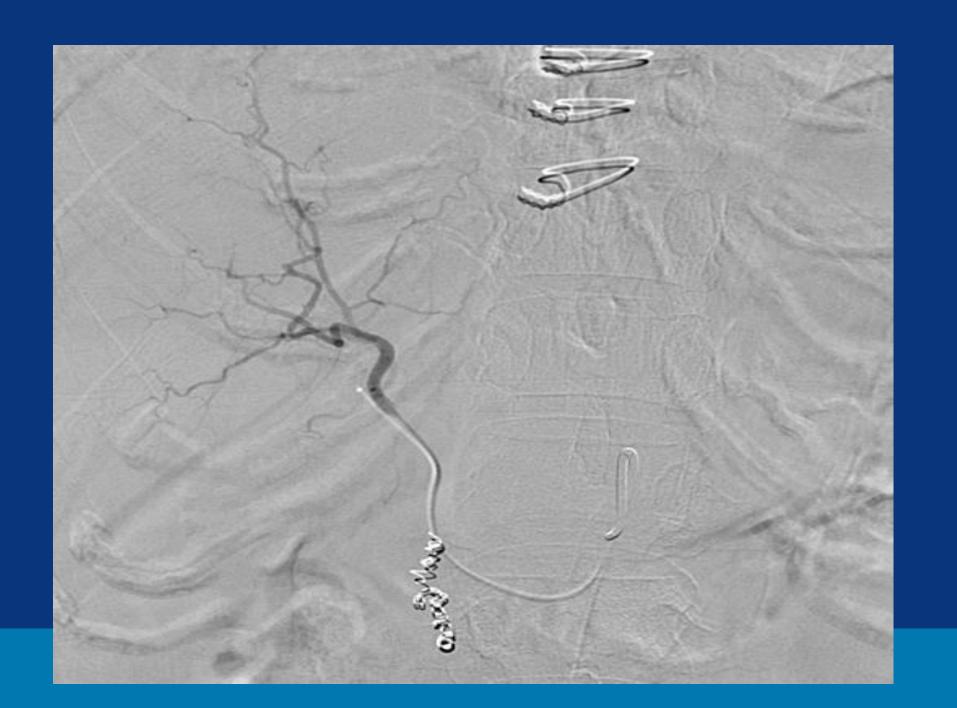


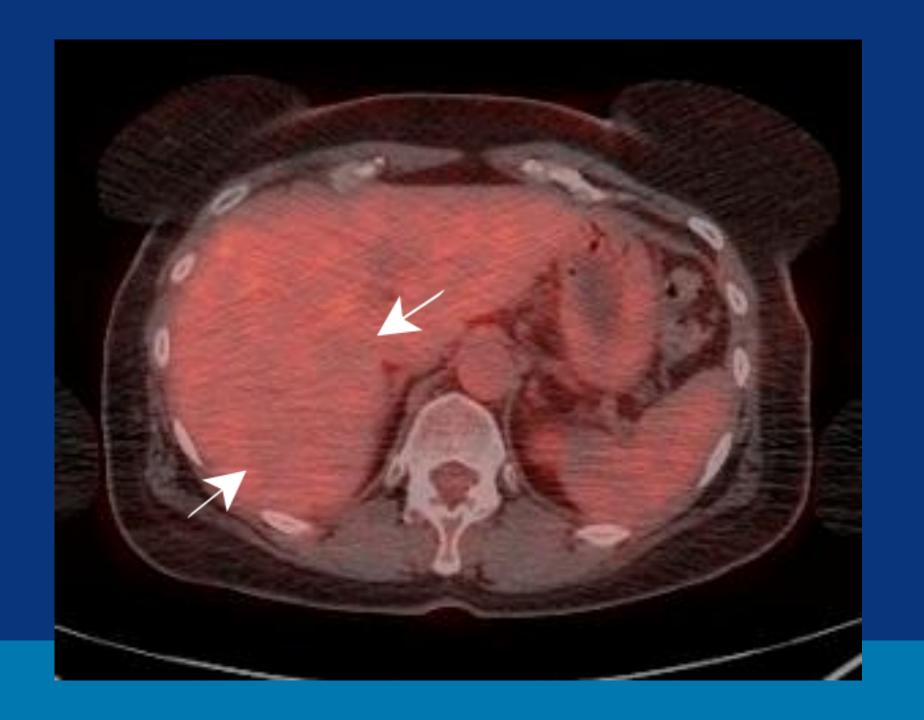
COE: Y90 & TACE

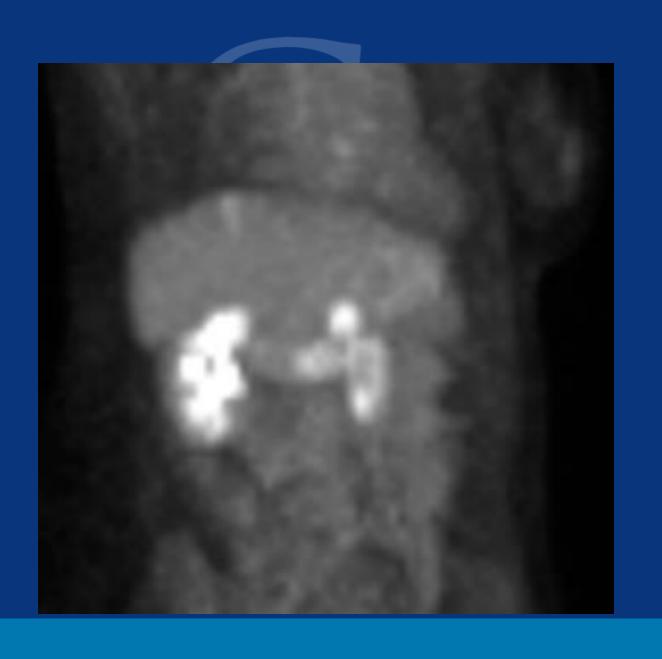
- 47 yo woman
- Colorectal CA s/p partial Colectomy
- Two large Right hepatic metastatic lesions on surveillance post FOLFOX chemotherapy











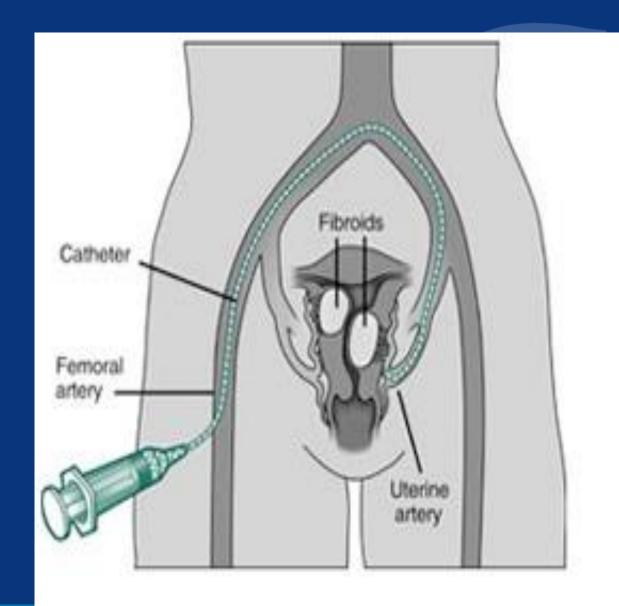
COE: UFE

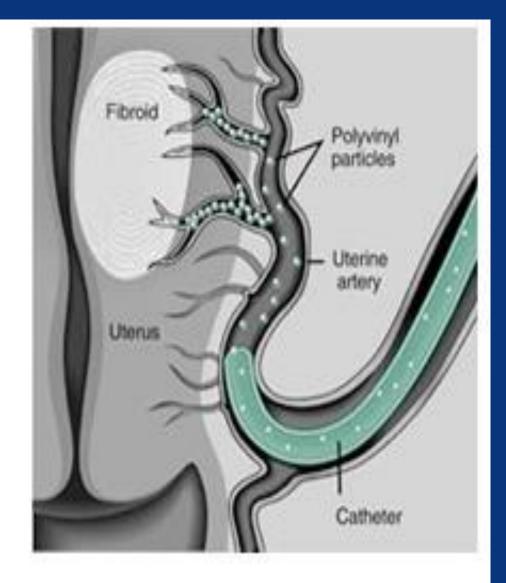
U.S. STATISTICS

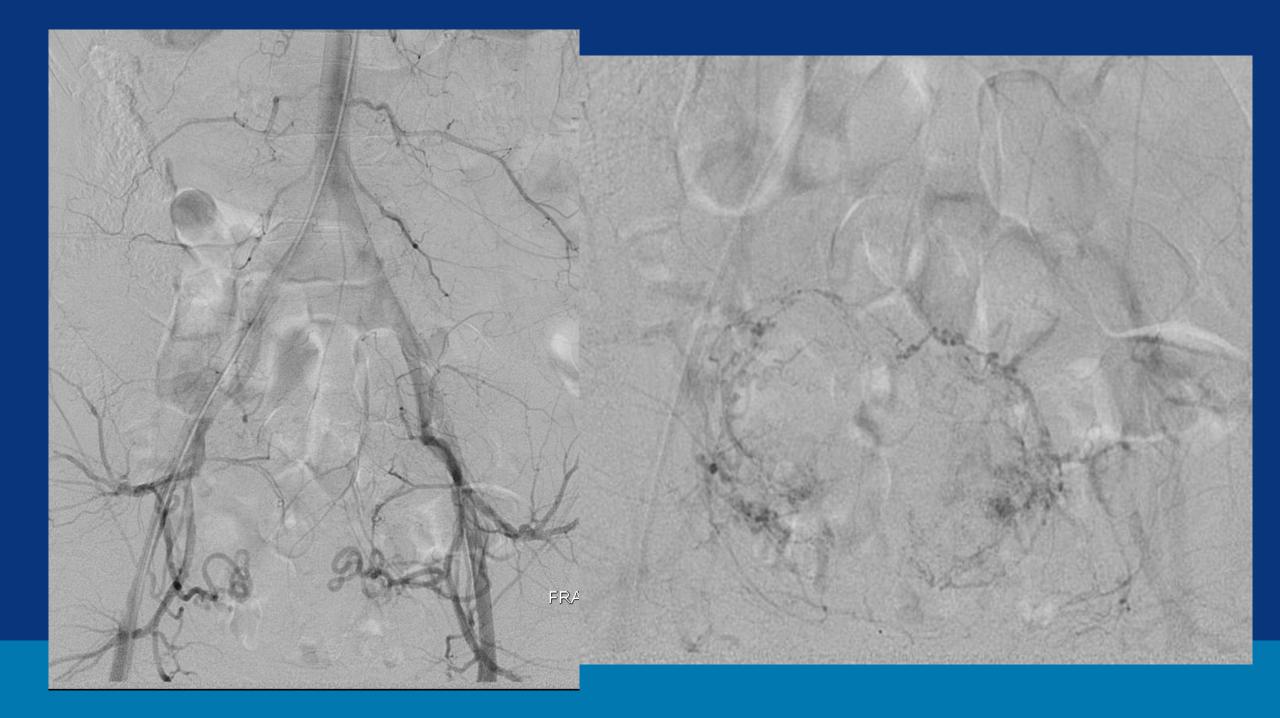
Most common pelvic mass in women

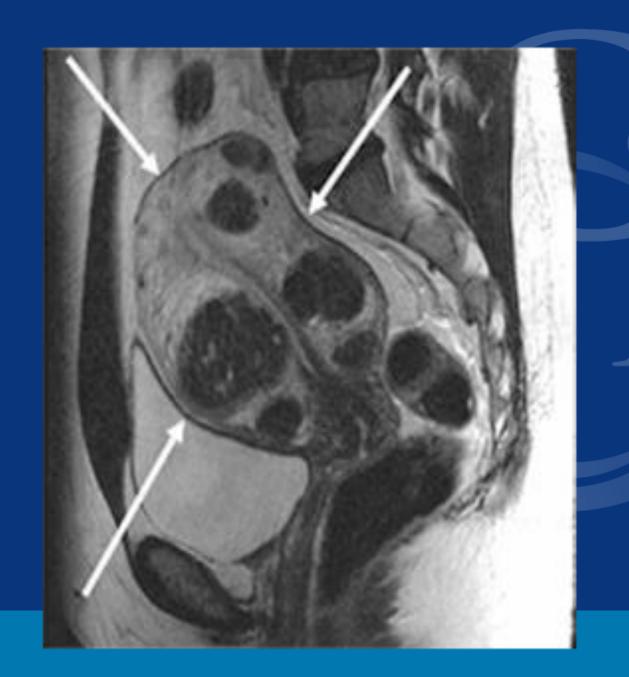
- prevalence: 20-40% (= millions)
- 75%: asymptomatic
- 25%: bleeding, pain, bulk symptoms
- 600,000 Hysterectomies annually
- approximately 1/3 for fibroids
- cost: \$4 Billion

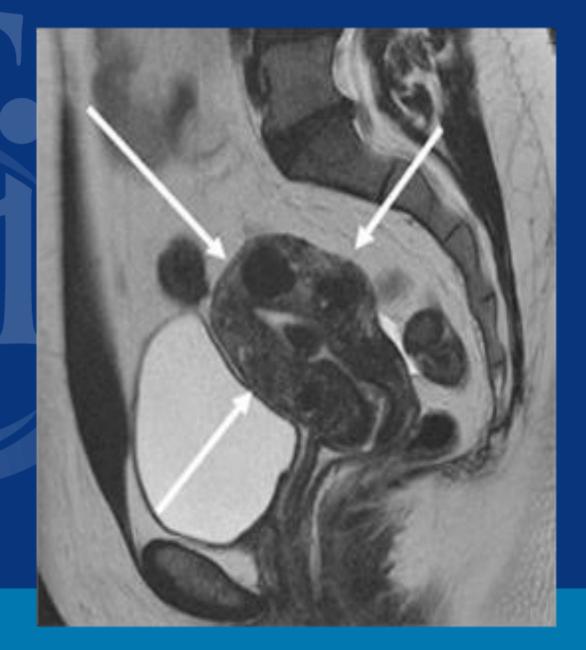
















Outpatient Interventional Procedures:

- -Are appropriate and Safe
- -Effective
- -Durable
- -Cost Efficient
- -Convenient
- -Result in High Patient Satisfaction

Thank You!

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