



Sarah Clarke-Byrne has completed this personal reflection on **04/04/2024**

Paper: Spring 2022 CPD Questions

Personal Reflection:

I enjoyed reading these two studies, as we do a lot of EVAR work in our lab it was really interesting to see the results of the first study. We would have quite a stringent EVAR follow-up protocol with pretty much no patients follow-up being discontinued (and we have great patient compliance) so I was somewhat shocked at the results. It definitely sparked some questions around the reasons for poorer outcomes in the continued follow-up patient group. When thinking about the many reasons (other health concerns leading to more frequent imaging, adding to complications and generally aiding compliance with follow-up) I would definitely agree with the author that more research probably needs to be done on the long-term outcome of EVAR and the effect of secondary interventions (obviously the nature of these abnormalities would have to be considered carefully). Maybe more hesitation is needed when it comes to secondary interventions re: EVAR.

The second study shows very exciting prospects for the future of vascular ultrasound. How many times have we not agreed with CTA in relation to endoleaks so I always feel that having extra tools we can use to further instill confidence for both ourselves and our vascular surgeons is amazing! The SMI and CEUS are both tools I look forward to using and comparing in the future. In a lot of cases the very low flow velocity endoleaks can be challenging to investigate and evaluate so the CEUS could be very useful there, as well as your standard Type II endoleak when we have real-time directional information. Maybe it would be helpful in highlighting the endoleak's feeding vessel where CDUS might not. The fact that there were no false positive endoleaks identified by SMI would make it a great addition when you are just not convinced by the CDUS imaging. I feel it would be a really nice tool to have at your disposal in this scenario.