Early Single-Institution Experience with Hemodialysis Reliable Outflow (HeRO) Vascular Access Device

Woolard, JD. Hohmann, SE. Kedora, JC. Grimsley, BR. Fisher, TL. Barnes, SA. Cedillo, VE. Shutze, WP.



## Background

- Difficult, end-stage access patients
- Exhaustion of upper and lower extremity options
- Central venous stenosis
- Catheter dependent



Central venous stenosis

Hemodialysis Reliable Outflow (HeRO) vascular access device

- Solution for access-challenged and catheter dependent patients
- Patency study (Enrollment 7/04)
- Bacteremia study (Enrollment 3/06)
- FDA approval January 2008

#### HeRO<sup>TM</sup> vascular access device



## Purpose

#### • To evaluate our early results

- Patency
- Time to access
- Adequacy of dialysis
- Adverse events



## Methods

- Retrospective chart review
- Primary endpoints
  - Primary patency
  - Secondary patency
  - Adequacy of dialysis
- Kaplan-Meier method

- 24 HeRO catheters in 21 patients

  April 2009-February 2010

  Mean age = 54 years

  Women = 13
  Men = 8

  Median follow up = 234 days
- Median follow-up = 234 days

- Mean duration of procedure = 102 minutes
- Days to first cannulation = 48.41 (Range= 14-244)
- Total HeRO days = 4,011 (Median = 180)
- Total HeRO interventions = 16 (11 patients)



# Primary patency



## Secondary patency



## Survival



Adequacy of dialysis (Kt/V)
HeRO—1.65 (Range = 0.72-2.48)
AV grafts—1.37-1.62
Tunneled dialysis catheter—1.29-1.46







## Adequacy of dialysis



- Adverse events
  - Steal in one patient
  - Bleeding in one patient
  - Early infection in two patients



## Discussion

- HeRO introduced as alternative for end-stage access patients
- Patency and adequacy of dialysis equivalent/superior to tunneled catheters and AV grafts
- Each 0.1 decrease in Kt/V = 7% increase in annual mortality

## Discussion

- Retrospective
- Small number of patients
- Further study warranted



## Conclusion

- End-stage access challenges
- HeRO vascular access device excellent adjunct
  - Patency
  - Adequacy of dialysis
  - Reduction in catheter dependency