EDITORIALS

137 What a Vascular Surgeon Should Know About Familial Abdominal Aortic Aneurysm
K.M. van de Luijtgaarden and H.J.M. Verhagen

139 New Reporting Standards Are Required to Assess the Impact of Vascular Intervention on Patients with Diabetic Foot Ulceration
P. Chan, W. Stuart and R. Hinchliffe

CAROTID DISEASE

141 Management of Extracranial Carotid Artery Aneurysm

Management strategies for patients with extracranial carotid aneurysm are ill defined and poorly evaluated. This systematic review of the published literature has reported on basic outcome data, highlighting the need for a prospective registry to formulate optimal investigative and management strategies for the future.

148 Antithrombotic Treatment for Acute Extracranial Carotid Artery Dissections: A Meta-Analysis
M.M. Chowdhury, C.N. Sabbagh, D. Jackson, P.A. Coughlin and J. Ghosh

In a systematic review and meta-analysis of outcomes in patients suffering acute carotid dissection, there was no evidence that anti-thrombotic therapy conferred any clinical advantage over antiplatelet therapy (or vice versa); clearly a subject for a well-designed and adequately powered RCT.

AORTIC DISEASE

157 Endovascular Aneurysm Sealing for Infrarenal Abdominal Aortic Aneurysms: 30-Day Outcomes of 105 Patients in a Single Centre

In a series of 105 patients with an infra-renal/juxta-renal AAA (69% with adverse neck anatomy) undergoing endovascular aneurysm sealing (EVAS), the 30-day mortality was 1%, 4% had a type I endoleak (all successfully treated with transcatheter embolisation) and there were no peri-operative type II endoleaks.

Invited Commentary

165 Commentary on ‘Endovascular Aneurysm Sealing for Infrarenal Abdominal Aortic Aneurysms: 30 Day Outcomes of 105 Patients in a Single Centre’
M.J.W. Koelemay

167 Interaction of Biomechanics with Extracellular Matrix Components in Abdominal Aortic Aneurysm Wall

In abdominal aortic aneurysm wall specimens, increases in biomechanical stress and strain were associated with increased collagen and proteoglycans synthesis suggesting an adaptive biological process.
175 Surgical Infrarenal “Neo-neck” Technique During Elective Conversion after EVAR with Suprarenal Fixation
S. Bonvini, V. Wassermann, M. Menegolo, P. Scrivere, F. Grego and M. Piazza

Preservation of the proximal covered stent in a supra-renal fixed EVAR device served as a ‘neoneck’ for anastomosis to a conventional aortic prosthesis during open EVAR conversion, thereby avoiding a difficult proximal exposure and complete device removal.

181 Stent graft Surface Movement after Infrarenal Abdominal Aortic Aneurysm Repair: Comparison of Patients with and without a Type 2 Endoleak

The presence of a type II endoleak was associated with decreased surface movement (>9mm) of the proximal anchor zone and the distal modular limbs of bifurcated stent grafts.

189 Editor’s Choice – Thirty day Outcomes and Costs of Fenestrated and Branched Stent Grafts versus Open Repair for Complex Aortic Aneurysms
M. Michel, J.-P. Becquemin, M.-C. Clément, J. Marzelle, C. Que.len, I. Durand-Zaleski and on behalf of the WINDOW Trial Participants

The WINDOWS Registry concluded that fenestrated and branched EVAR may not be justified in patients with peri-renal or juxta-renal AAA who were otherwise fit enough to undergo open repair.

Invited Commentary
197 Commentary on ‘Thirty Day Outcomes and Costs of Fenestrated and Branched Stent Grafts Versus Open Repair for Complex Aortic Aneurysms’ An Innovative but Expensive Tool Requiring Further Evaluation
J.-B. Ricco and F. Schneider

199 Prevalence of Abdominal Aortic Aneurysm (AAA) in a Population Undergoing Computed Tomography Colonography in Canterbury, New Zealand
M. Khashram, G.T. Jones and J.A. Roake

In a series of 4644 patients undergoing computed tomographic colonography (virtual colonoscopy), the prevalence of AAA was 9% in males aged 65–74, increasing to 22% in males aged >85. This compares with 2% and 6% (respectively) for females. It remains unclear why the prevalence of AAA in male patients with colonic type symptoms was so high.

206 Surgical Treatment of Middle Aortic Syndrome with Takayasu Arteritis or Midaortic Dysplastic Syndrome
S.M. Kim, I.M. Jung, A. Han, S.-I. Min, T. Lee, J. Ha, S.J. Kim and S.-K. Min

Ten patients with mid-aortic syndrome secondary to inflammatory arteritis (mostly Takayasu) underwent surgical treatment (mainly for uncontrolled hypertension and/or claudication) with excellent early and late outcomes.

PERIPHERAL ARTERIAL DISEASE
213 One Year Health Status Benefits Following Treatment for New Onset or Exacerbation of Peripheral Arterial Disease Symptoms: The Importance of Patients’ Baseline Health Status

PAD patients with the lowest pre-procedural health status score benefitted most at one year from invasive treatment strategies, whilst those with the highest baseline health status scores benefitted least.

223 Strategies for Free Flap Transfer and Revascularisation with Long-Term Outcome in the Treatment of Large Diabetic Foot Lesions
M. Kallio, P. Vikatmaa, I. Kantonen, M. Lepäntalo, M. Venermo and E. Tukiainen

In a series of 63 diabetic patients with complex leg ulcers, free flap coverage was associated with high rates of amputation free survival with the best results being seen in those with a patent native artery down to the ulcer or in those undergoing concurrent revascularisation. Interestingly, half of those patients with uncorrectable PAD still avoided amputation at 5 or 10 years following free flap transfer.
Contents—continued

invited commentary

231 commentary on ‘strategies for free flap transfer and revascularisation with 10 year outcome in the treatment of large diabetic foot lesions’

v. ruppert

232 prothrombin g20210a mutation and lower extremity peripheral arterial disease: a systematic review and meta-analysis

f. vazquez, m. rodger, m. carrier, g. le gal, j.-l. reny, f. sofì, t. mueller, s. nagpal, p. jetty and e. gandara

in a systematic review and meta-analysis of case controlled studies, there was no association between the prothrombin g20210a mutation and pad. however, cli patients had a significantly higher prevalence of the prothrombin gene mutation compared with controls.

241 systematic review and meta-analysis of the efficacy of perineural local anaesthetic catheters after major lower limb amputation

d.c. bosanquet, j.c.d. glasbey, a. stimpson, i.m. williams and c.p. twine

in a systematic review and meta-analysis, perineural local anaesthetic catheters inserted during major limb amputation significantly reduced post-operative opiate requirements but had little effect on post-operative pain scores, mortality and phantom and/or stump pain.

venous disease

250 do blood constituents in varicose veins differ from the systemic blood constituents?

p. poredos, a. spirkoska, t. rucigaj, j. fareed and m.k. jezovnik

inflammatory markers and biomarkers of endothelial dysfunction were significantly increased in blood aspirated directly from varicose veins (compared to blood taken from upper limb cephalic veins) in patients presenting with primary varicose veins.

education section

257 how should i treat a patient with a tandem carotid artery atherosclerotic stenosis involving the internal carotid artery and the innominate/proximal common carotid artery?

g.j. de borst and c.e. hazenberg

259 multiple choice questions

262 correspondence

corrigendum

265 corrigendum to “angulation of the c-arm during complex endovascular aortic procedures increases radiation exposure to the head” [eur j vasc endovasc surg 49 (2015) 396–402]

m.a. albayati, s. Kelly, d. gallagher, r. dourado, a.s. patel, p. saha, a. bajwa, t. el-sayed, r. salter, p. gkoutzios, t. carrell, s. abisi and b. modarai

266 selected abstracts from the august issue of the journal of vascular surgery

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174 endovascular treatment of a traumatic distal internal carotid pseudoaneurysm

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h.s. rayt and a. nasim

editor’s choice: this paper has been selected by the editor to be made available online as open access.