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A NEW TOOL IN THE ARSENAL

To the Editor:

We would like to clarify 3 important issues regarding the AV Flow (MedEurope Srl, Bologna, Italy), a new cannula for antegrade selective cerebral perfusion (ASCP). Its unique feature consists in the possibility of guidewire introduction.

First of all, we want to discuss about the novelty of the AV Flow. This is not a modification of the well-known TRUE FLOW RDB cannula (MedEurope Srl). The concept behind them is completely opposite to each other, even if their aim (performing ASCP) is identical (Figure 1). Adjunctive surgical details have been previously published.¹

Second, Murana and colleagues² highlighted the “keep-it-simple” principle. We agree with them in general. However, no doubt, aortic arch surgery is far from being simple, both in terms of surgical technique and devices to be chosen. Many different strategies have been described, with great variability distinguishing each major aortic center. In other words, even if the transverse arch is a “simple” anatomic structure (just a short vessel with 3 branches), aortic arch surgery is absolutely complex and far from being standardized. In some selected situations, nicely evidenced in the “hammers and nails” commentary,³ the use of the AV Flow can really simplify the procedure. Moreover, the Seldinger technique is one of the tools in the aortic surgeon’s box. For this specific reason, our newly described surgical strategy is not complicated or somewhat uncertain at all.

Third, we briefly comment on the “time-consuming issue.” The new cannula takes no more than a few minutes to be introduced. Furthermore, we strongly believe that the time spent for the ASCP setup before the circulatory arrest is well spent if the arrest time is consequently shorter (cannulas already in place plus potentially faster reimplantations being the AV Flow out of the anastomotic site).

Finally, every patient and surgical situation is different; therefore, we need a cannulation system that provides flexibility and options, like a good shop has lots of hammers for

FIGURE 1. The author’s original first schematic freehand drawing of the AV Flow cannula.

lots of nails. However, the commentary’s criticism is important, to dot the i’s on the contraindications of the procedure that must be kept in mind for safety reasons. In conclusion, these are not hair-splitting controversies because it’s fundamental for any surgeon who wants to approach the aortic arch to have clear and precise indications and contraindications of all the tools in the ASCP arsenal.

Andrea Venturini, MD, PhD^a

Alan Galligani, MD^{a,b}

^aCardiac Surgery Department
Ospedale dell’Angelo
Venice-Mestre

^bCardiac Surgery Department
Ospedale Maggiore di Parma
Parma, Italy

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