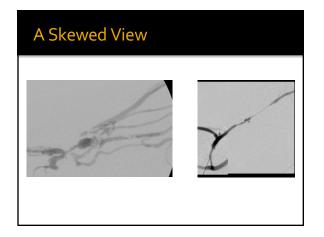




Sometime I get really good AVF.... From really bad surgeons Sometimes I get really bad AVF.... From really good surgeons



EndoAVF: Pros or Cons?

Controlled size and repeatable anastomosis

Low-Moderate flow

Multi-outflow

Reliant on native anatomy and vessel path

Here's the Question

Can we use the pros and lessons from the endoAVF experience to design a better sAVF?

Maturation is Flow Modulation

How much flow

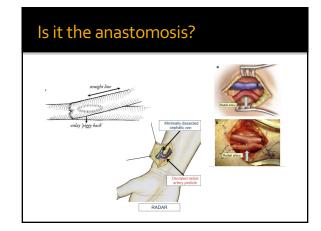
Where is the flow

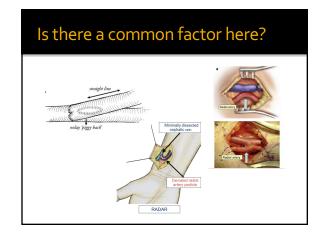


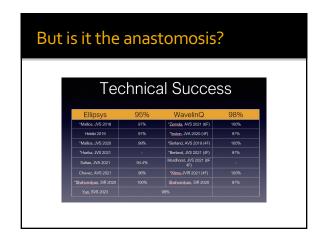
How much flow?

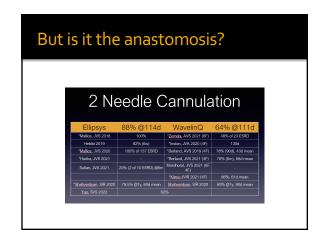
What's the ideal flow volume? <1000? <1500?

What factors dictate flow volume? Vessel size? Anastomosis type/size?









Where is the flow? John Ross says a polyfistula is bad But is a mono fistula really that good? Is there a middle ground that is better? 2 or 3 outflow vessels? Can we modulate that?

