“Rising Sun”, Minimally Invasive TRI from Japan to the Rest of the World

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Initially, as a proud interventional cardiologist, I would like to congratulate the 20th anniversary of Transradial Intervention (TRI), and please let me show my sincere gratitude for the great work by Kiemeneij and Laarman [1]. Twenty years have past since TRI was performed for the first patient in order to prevent bleeding complications. In that time, one out of ten patient's experienced major bleeding complication after a stent was implanted to a coronary artery. These bleeding complications sometimes caused fatal outcome, and there was a need for finding a safer entry site such as a radial artery. At that time, anything about TRI was not found in textbooks. However, since then, many beneficial evidences about TRI have accumulated, and nowadays it is the case that TRI provides enormous benefit to society by reducing major bleeding and vascular complications and enabling early ambulation. Without Dr Kiemeneij and Laarman [1] innovative passion, we could not have come this far.

In addition, on behalf of “Radialists”, I salute the pioneer; Dr. Saito et al. [2] for his half a lifetime of service to TRI. He has crossed the seven seas and educated physicians about TRI worldwide as a representative of evangelist.

Their feat is great works, and certainly many patients have been saved by them [2]. In fact, evidence level of TRI has greatly improved for STEMI patients [3].

Following the two great pioneers, many Japanese physicians published a lot of manuscripts about advanced TRI techniques including slender devices. They approached the subject from 3 different angles: minimizing diameter of guiding catheters, guide wires and puncture sites.

Why should they be minimized?

It is not necessary to use 6Fr GC for all patients [4].

TRI by slender guiding catheter delivers relief of discomfort feeling of patient [5].

The procedure and the clinical success rate were similar between in 5 and 6 Fr TRI, but post procedural radial occlusion was significantly lower in 5FrTRI [6].

Actually, slender TRI has some degree of positive significance [7-14], although there exists only a little amount of significant evidences so far. In Japan, we have experienced and advanced technological evolution from genesis of TRI. However, only Japan is not capable of moving the world. So, we have to work cooperatively for the development of new devices and creative techniques. Moreover, through such cooperation, we will be able to save more patients by slender TRI.

References


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