

For some women facing angioplasty, wrist entry may be better, study finds

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Likelihood of bleeding issues much lower than when procedure done through the groin, researchers say.

(HealthDay)—For women at high risk for bleeding during angioplasty, the wrist may be a better entry site than the groin, a new study indicates.

It included more than 1,700 [women](#) who underwent angioplasty to clear a blocked heart artery and have a stent inserted to keep the artery open.

The Duke Medicine researchers decided to conduct the study after noting that American doctors are much less likely than those in other countries to use the wrist as an angioplasty entry site.

The study participants were randomly selected to have [coronary angioplasty](#) through the wrist or groin. Most of the women in both groups were taking a blood thinner to reduce the potential for clots.

Bleeding or other vascular issues occurred in 1.2 percent of patients in the wrist-entry group and 2.9 percent of those in the groin-entry group, a 60 percent difference, according to the study presented Oct. 29 at the annual Transcatheter Cardiovascular Therapeutics meeting in San Francisco.

Far more women in the wrist-entry group said they would prefer to use that site again if a repeat angioplasty was needed.

However, wrist entry did not work for all women. In more than 6 percent of cases, doctors had to abandon the wrist access attempt and use the groin entry method, typically because of spasms in the wrist artery or because the blood vessel was too small.

Because this study was presented at a medical meeting, the data and conclusions should be viewed as preliminary until published in a peer-reviewed journal.

"We have a lot of information comparing wrist-versus-leg approaches for [coronary [angioplasty](#)], but we haven't had the data in women, and this is pretty consistent with what we've known for men," study author Dr. Sunil Rao, an associate professor of medicine at Duke University School of Medicine, said in a Duke news release.

"The radial [wrist] approach appears to be safer for women at high risk for bleeding. At the same time, we need to let our patients know that if we try this approach and there are issues such as spasms, we'll have to switch and go to the leg," Rao added.

More information: The U.S. National Heart, Lung, and Blood Institute has more about [coronary angioplasty](#).

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