

Forearm Vascular Access

The Next Step After Distal Radio-cephalic Failure

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Background

Autologous forearm vascular access created at different levels represents a valuable alternative prior to upper arm access following distal radiocephalic fistula failure. However, the evidence regarding its outcomes remains limited

Methods: Retrospective observational study including proximal radiocephalic (RC) and radio-perforating fistulas performed at our center between January 2020 and December 2025, with follow-up to date. **Objective:** To analyze primary, assisted primary, and secondary patency of forearm arteriovenous fistulas created at our institution.

Results

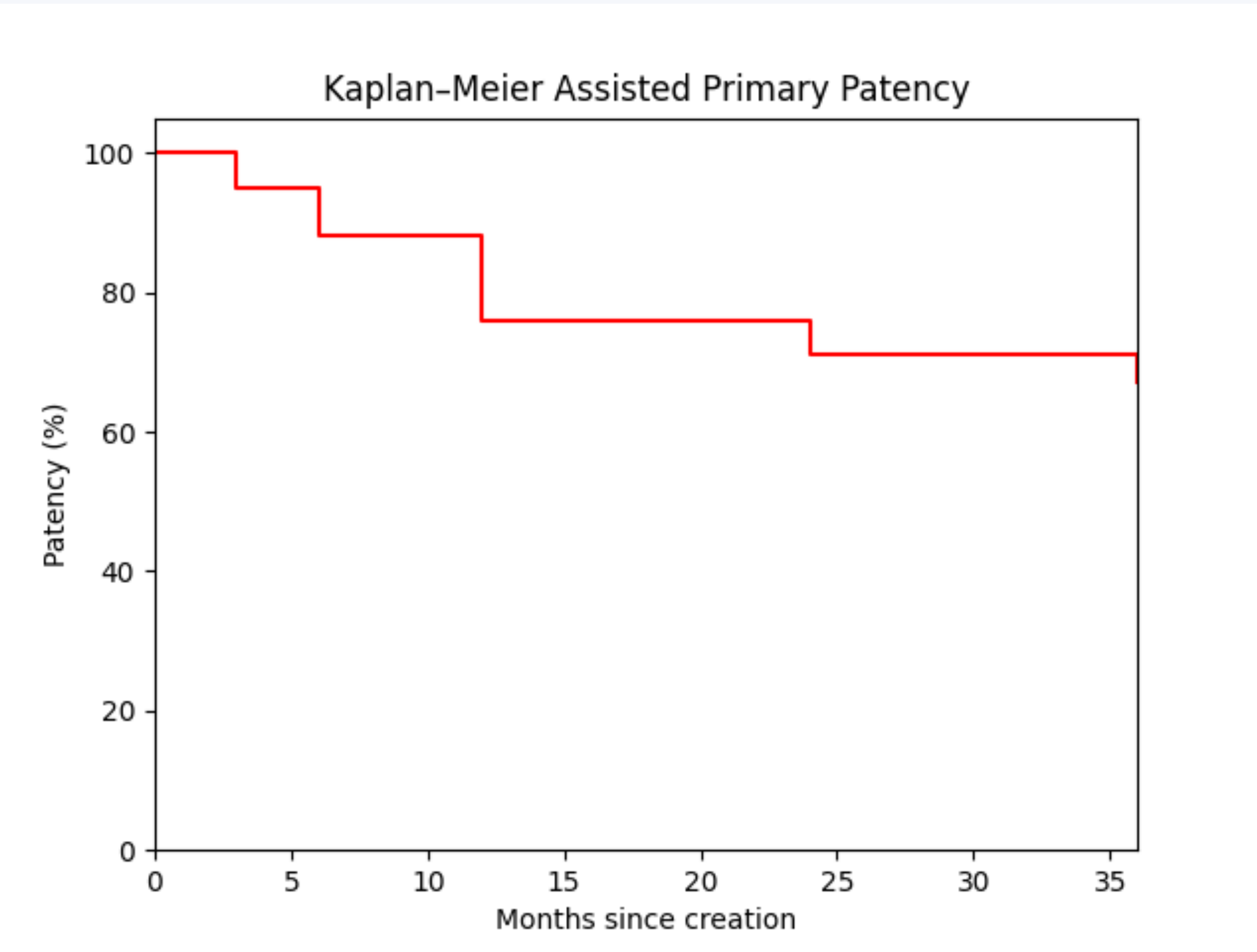
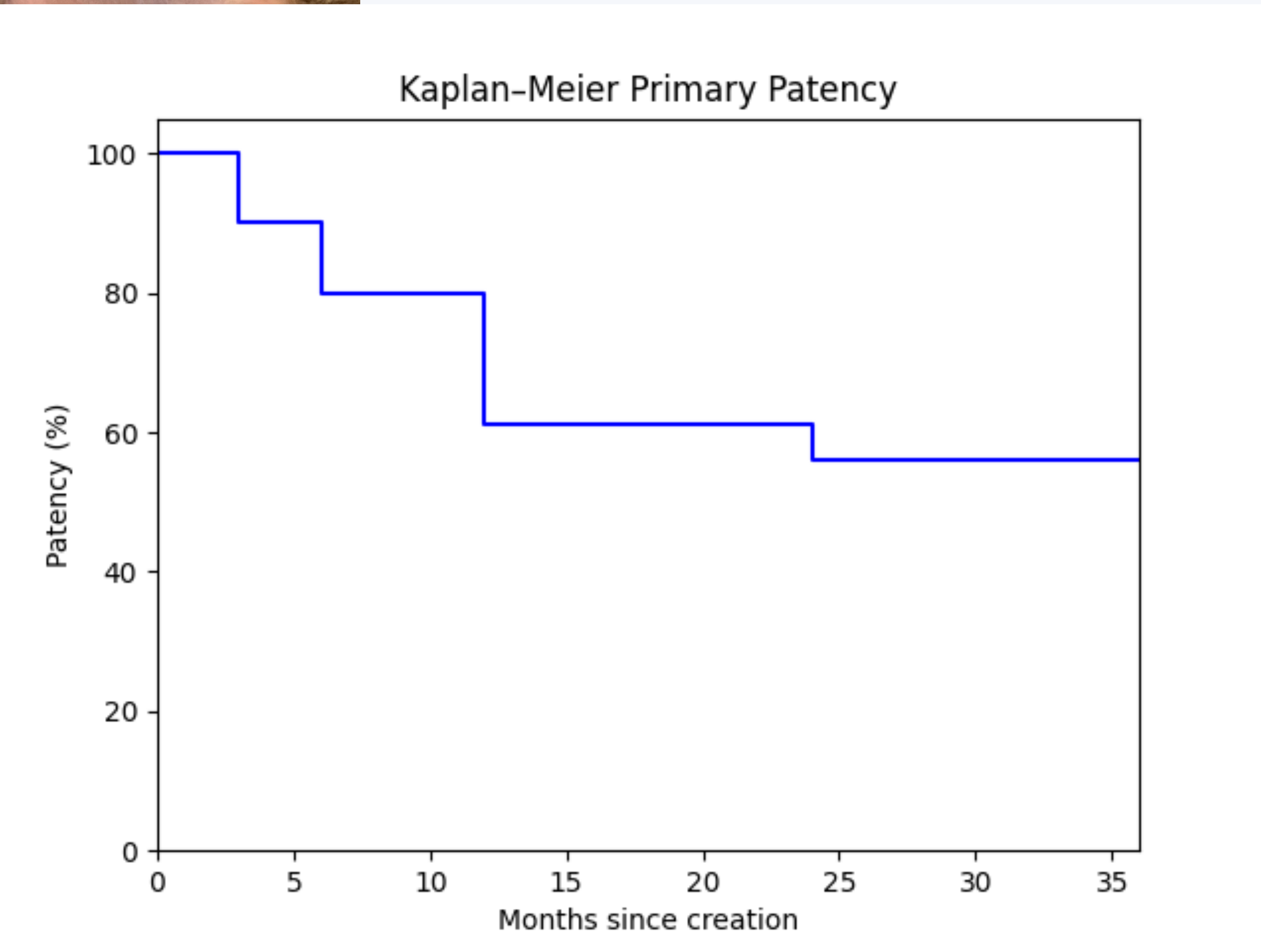
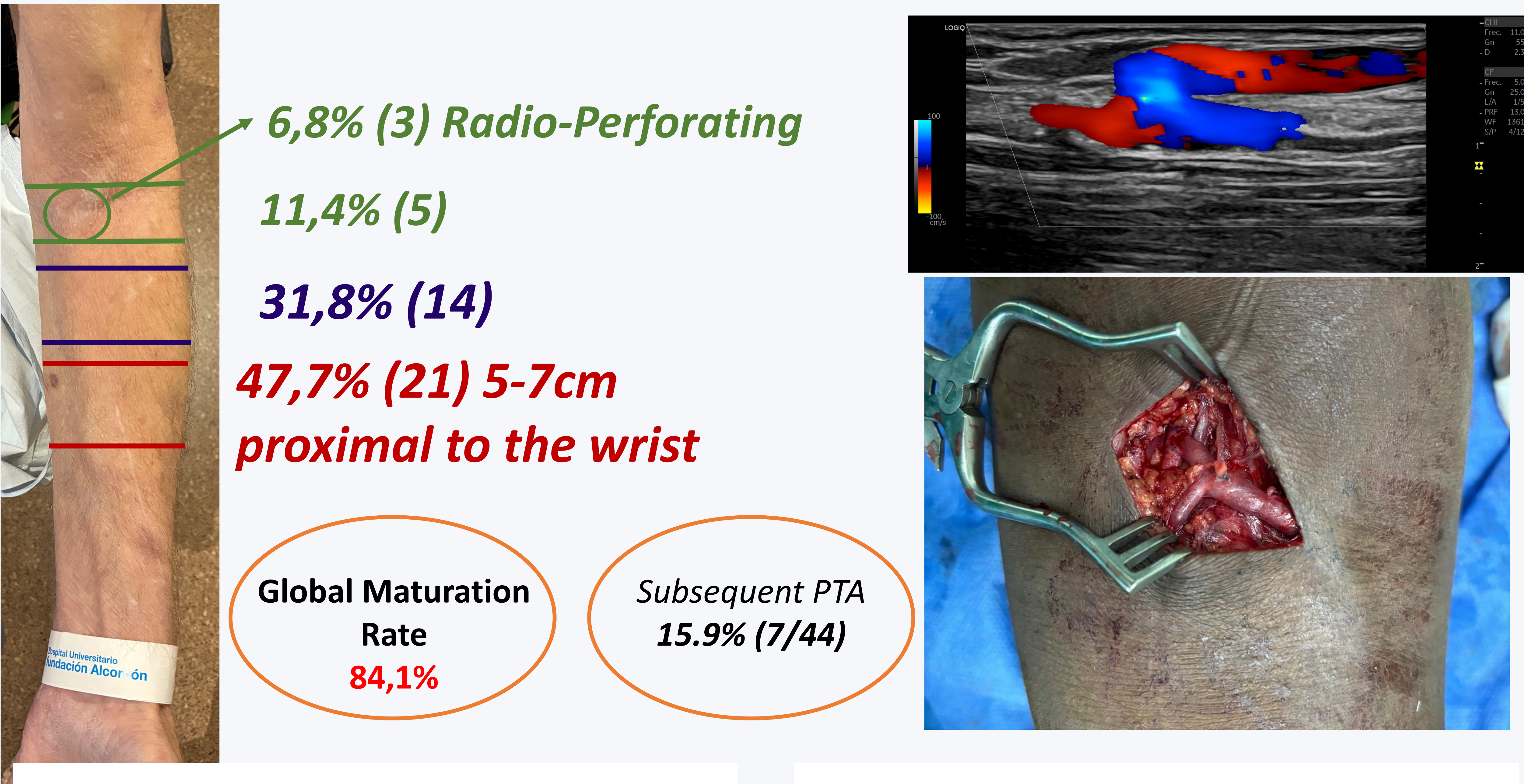
- ✓ 44 vascular accesses in 43 patients
- ✓ Mean age: 69.5 ± 11.6 years

Renal Function	n	%
Pre-Dialysis	28	63,6%
On Dialysis	16	36,4%

- ✓ 67.4% male, 32.6% female
- ✓ 39.5% (17/43) diabetes mellitus (all type 2)

Group	n	%
First access	11	25,0%
Previous Radio-Cephalic	32	72,7%

13.6% (6/44) had undergone previous PTA



CONCLUSION

Following failure of a distal radiocephalic fistula at the wrist, forearm vascular access should be considered the next step in access planning before proceeding to upper arm access.