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Summary

# TWO ROADS TO OBLITERATION: EUS-GUIDED COILING OF GASTRIC VARICES -DIRECT VARICEAL SAC VERSUS FEEDER VESSEL (ARAKAWA-1) APPROACH

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**Video demonstration compares two EUS-guided strategies for gastric varices—direct variceal puncture versus feeder vessel embolization (Arakawa-1)—both using combined coil and cyanoacrylate glue therapy, showing that feeder vessel targeting may provide better flow control with less glue.**

KEY POINTS

- Both techniques were technically successful with no immediate complications, and post-procedure EUS showed echogenic coil-glue complexes with reduction in variceal lumen suggesting effective obliteration.
- The feeder vessel (Arakawa-1) approach required less glue and achieved upstream flow control compared to the direct variceal approach.
- The direct variceal approach targets the variceal sac for local obliteration and is technically simpler, while the feeder vessel approach targets the source vessel for upstream flow interruption and is more technically precise.
- Linear EUS with Doppler was used to delineate variceal anatomy and confirm active blood flow prior to intervention in both techniques.
- Feeder vessel targeting is best suited to Arakawa-1 anatomy and may be considered for up to two or three feeders, while direct sac targeting may be preferable when multiple collaterals and feeders are present.

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