

Fowkes G, Gillespie IN

**Cochrane** Database of Systematic Reviews

# Angioplasty (versus non surgical management) for intermittent claudication (Review)



Fowkes G, Gillespie IN.

Angioplasty (versus non surgical management) for intermittent claudication. *Cochrane Database of Systematic Reviews* 2018, Issue 3. Art. No.: CD000017. DOI: 10.1002/14651858.CD000017.pub2.

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[Intervention Review]

# Angioplasty (versus non surgical management) for intermittent claudication

Gerry Fowkes<sup>1</sup>, Ian N Gillespie<sup>2</sup>

<sup>1</sup>Department of Public Health Sciences, The University of Edinburgh, Edinburgh, UK. <sup>2</sup>Department of Radiology, New Royal Infirmary of Edinburgh, Edinburgh, UK

**Contact:** Gerry Fowkes, Department of Public Health Sciences, The University of Edinburgh, Teviot Place, Edinburgh, EH8 9AG, UK. gerry.fowkes@ed.ac.uk.

Editorial group: Cochrane Vascular Group.

**Publication status and date:** Withdrawn from publication for reasons stated in the review, published in Issue 3, 2018.

**Citation:** Fowkes G, Gillespie IN. Angioplasty (versus non surgical management) for intermittent claudication. *Cochrane Database of Systematic Reviews* 2018, Issue 3. Art. No.: CD000017. DOI: 10.1002/14651858.CD000017.pub2.

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#### REASON FOR WITHDRAWAL FROM PUBLICATION

9 March 2018: This review has been withdrawn as it has been replaced by a new review with an expanded scope. The citation for the new review is as follows: Fakhry F, Fokkenrood HJP, Spronk S, Teijink JAW, Rouwet EV, Hunink MGM. Endovascular revascularisation versus conservative management for intermittent claudication. Cochrane Database of Systematic Reviews 2018, Issue 3. Art. No.: CD010512. DOI: 10.1002/14651858.CD010512.pub2.

The editorial group responsible for this previously published document have withdrawn it from publication.

# FEEDBACK

#### **Angioplasty for intermittent claudication**

#### **Summary**

- 1. Under Characteristics of included trials it is noted that the method of randomisation in the Oxford trial is not stated. Were the authors asked about this? (If not, they should be asked.) The notes do not make it clear whether the additional 20 patients recruited later were randomised as well, and how this fitted into the study design. Did the controls in the Oxford study receive aspirin?
- 2. What dosage of aspirin was used in the trials and for how long?
- 3. It is puzzling that the Dunedin study (van Rij et al) is not in the CCTR, and that publication is still awaited. Have the authors been asked for details, or at least to inform the reviewers as soon as their paper has been accepted for publication?
- 4. The results state that "no mention is made of side effects in the [Edinburgh] paper". Were all the angioplasties in the Edinburgh study successful? Since the reviewer was an author of the Edinburgh paper he presumably knows.
- 5. What were the differences in the exercise taken by the patients



in the two trials? How far did the patients follow the "smoking /exercise advice" in the Edinburgh trial?

- 6. The influence of exercise in the trials deserves a comment in the discussion.
- 7. The Implications for Research mention cost-effectiveness, but neither trial says anything on costs. What does angioplasty cost, very approximately?
- 8. The conclusion that "Further trials are required" seems debatable, since angioplasty is only marginally effective and for a short time, and the Dunedin trial results should be out soon. It furthermore seems possible that local treatment methods other than balloon angioplasty may offer better prospects of improving claudication.
- 9. Under potential conflicts of interest it should be noted that one of the reviewers was also an author of one of the two trials.
- 10. The asterisks identifying the main publication for each trial should be inserted (though it is actually obvious which they are).

#### Reply

Amendments have been made to the updated review to take account of the criticisms. Another abstract reference to the Dunedin trial which has not been published in full yet, has been included.

#### **Contributors**

Andrew Herxheimer

#### WHAT'S NEW

Date	Event	Description
9 March 2018	Amended	This review has been withdrawn as it has been replaced by a new review with an expanded scope. The citation for the new review is as follows: Fakhry F, Fokkenrood HJP, Spronk S, Teijink JAW, Rouwet EV, Hunink MGM. Endovascular revascularisation versus conservative management for intermittent claudication. Cochrane Database of Systematic Reviews 2018, Issue 3. Art. No.: CD010512. DOI: 10.1002/14651858.CD010512.pub2.

#### HISTORY

Protocol first published: Issue 1, 1996 Review first published: Issue 3, 1996

Date	Event	Description
30 May 2008	Amended	Converted to new review format.
4 November 1999	Feedback has been incorporated	Feedback received and added to the review. In response to the feedback, the review authors contacted the authors of the Oxford trial for the method of randomisation. The randomisation-method of the Oxford trial was added to the Characteristics of included studies table (3 January 2000).



## **SOURCES OF SUPPORT**

## **Internal sources**

• University of Edinburgh, UK.

# **External sources**

• Chief Scientist Office, Scottish Government Health Directorates, The Scottish Government, UK.