Manual compression of the femoral artery remained the only method of achieving hemostasis following arterial puncture.

In the 1990s the first generation of arterial closure devices was introduced.

These devices were relatively unsophisticated and were plagued by significant complication rates.

This led many interventionalists to abandon their use.

In recent years, advances in design have addressed many of the problems associated with the early closure devices. Before supplanting manual compression as the desired method of achieving puncture site hemostasis, closure devices ideally should be safe, be easy to deploy, and demonstrate benefits such as increased patient comfort as well as early ambulation and hospital discharge.

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**Angioseal** 

Minx...

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