

VEITH SYMPOSIUM[®]

Connecting The **Vascular** Community

45th

Tuesday - Saturday, November 13-17, 2018

VASCULAR ENDOVASCULAR ISSUES TECHNIQUES HORIZONS

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Frank J. Veith, MD

Symposium Co-Chairmen

Enrico Ascher, MD

Kenneth Ouriel, MD, MBA

Sean P. Lyden, MD

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www.VEITHsymposium.org

PROGRAM OUTLINE AT A GLANCE

TUESDAY PROGRAMS

Program A: (Sessions 1-8)

6:40 A.M. – 6:02 P.M.

Progress In The Treatment Of Heart Valve, Coronary And Thoracic And Abdominal Aortic Diseases

Location: 3rd Floor

Grand Ballroom East (Sessions 1-4)

Grand Ballroom West (Sessions 5-8)

Program B: (Sessions 9-16)

6:40 A.M. – 5:57 P.M.

New Developments In Robotics, Laparoscopy, Simulation, Guidance, Carotid Disease And Aortic Branch Disease; New Techniques And Concepts; Vascular Surgery Governing Bodies And Training And Open And Hybrid Vascular Procedures

Location: Grand Ballroom West, 3rd Floor

(Sessions 9-12); Grand Ballroom East, 3rd

Floor (Sessions 13-16)

Program C: (Sessions 17-18)

7:00 A.M. – 12:00 P.M.

Management Of Pulmonary Embolism: A Complex Team Sport

Course Leader: Michael R. Jaff, DO

Location: Trianon Ballroom, 3rd Floor

Program D: (Sessions 19-22)

1:00 P.M. – 5:45 P.M.

More Hot Topics Related To The Treatment Of Aortic, Iliac Artery, Lower Extremity And Carotid Diseases

Location: Trianon Ballroom, 3rd Floor

WEDNESDAY PROGRAMS

Program E: (Sessions 23-30)

6:40 A.M. – 6:09 P.M.

Progress In Lower Extremity Occlusive Disease And Its Treatment

Location: Grand Ballroom East, 3rd Floor

Program F: (Sessions 31-38)

6:40 A.M. – 6:03 P.M.

New Developments In Medical, Anti-Atherogenic And Anti-Hypertensive Treatments; Management Of Complications And Endoleaks; Issues And Other Important Topics Related To Outpatient Centers, Government, Reimbursement, Ethics, Practice And Vascular Care

Location: Grand Ballroom West, 3rd Floor

Program G: (Sessions 39-46)

6:45 A.M. – 5:50 P.M.

More New Developments In Thoracic Aortic Disease, Dissections, TAAAs, Juxta- And Pararenal AAAs, Parallel Grafts, Fenestrated And Branched EVAR (F/B/EVAR), Multilayer Bare Stents, Infraarenal AAAs And EVAR, And Recorded Live Complex Cases

Location: Trianon Ballroom, 3rd Floor

THURSDAY PROGRAMS

Program H: (Sessions 47-54)

6:45 A.M. – 6:00 P.M.

New Or Updated Techniques And Concepts; Advances In F/B/EVAR And Parallel Grafts For Complex AAAs; Tribute To Our Military; New Developments In The Treatment Of Ruptured AAAs; More Hot Aortic Topics; New Developments In Telemedicine, Prevention Of Contrast Renal Toxicity, And Radiation Safety

Location: Grand Ballroom East, 3rd Floor

Program I: (Sessions 55-62)

6:40 A.M. – 5:44 P.M.

New Devices For Standard EVAR And More Complex AAA Endovascular Treatments; TEVAR And TAAA Repair; New Lower Extremity Treatments And Devices; Updates On Endoanchors And New Devices For Clot Removal

Location: Grand Ballroom West, 3rd Floor

Program J: (Sessions 63-67)

7:00 A.M. – 2:05 P.M.

Superficial Venous Disease

Course Leaders: Jose I. Almeida, MD, RPVI, RVT, Lowell S. Kabnick, MD, RPhS, Kenneth Ouriel, MD, MBA, Thomas W. Wakefield, MD

Location: Trianon Ballroom, 3rd Floor

Program K: (Sessions 68-70)

2:25 P.M. – 5:30 P.M.

Additional Interesting Or Late Breaking Hot Topics In The Treatment Of Aortic, Lower Extremity And Carotid Disease

Location: Trianon Ballroom, 3rd Floor

FRIDAY PROGRAMS

Program L: (Sessions 71-78)

6:50 A.M. – 5:59 P.M.

New Developments In The Prevention And Treatment Of Spinal Cord Ischemia (SCI) With TEVAR And TAAA Repairs; Carotid Related Topics: New And Improved Devices And Techniques, Risk And Causes Of Strokes, Disease And Treatment Effects On Cognition, Effects Of Medical Treatment, Timing Of CEA/CAS; CAS Optimism; Updates On Guidelines; Trials; Controversies; New And Updated Techniques And Concepts; Percutaneous Closure Devices And Wound Care

Location: Grand Ballroom East, 3rd Floor

Program M: (Sessions 79-87)

6:45 A.M. – 5:30 P.M.

New Developments In Popliteal Diseases And Their Treatment; Management Of Infected Arteries, Prosthetic Grafts And EVAR Grafts; Advances In Imaging And Guidance, Medical Conditions And Treatments, Treatment Of Thoracic Outlet Syndromes (TOSs), Vascular Trauma And REBOA; Recorded Challenging Live Cases From Münster And The Mayo Clinic

Location: Grand Ballroom West, 3rd Floor

Program N: (Sessions 88-92)

8:05 A.M. – 5:04 P.M.

Deep Venous Disease

Course Leaders: Jose I. Almeida, MD, RPVI, RVT; Lowell S. Kabnick, MD, RPhS; Kenneth Ouriel, MD, MBA, Thomas W. Wakefield, MD

Location: Trianon Ballroom, 3rd Floor

Program O: (Sessions 93-96)

7:00 A.M. – 12:00 P.M.

Diagnosis And Treatment Of Vascular Malformations

Course Leaders: Wayne F. Yakes, MD, Krassi Ivancev, MD, PhD, Robert L. Vogelzang, MD

Location: Gramercy Suites, 2nd Floor

SATURDAY PROGRAMS

Program P: Part 1 (Sessions 97-101)

6:50 A.M. – 2:05 P.M.

Program P: Part 2 (Sessions 102-103)

7:00 A.M. – 8:45 A.M.

Topics Too Hot To Miss Or Late Breaking: Related To The Lower Extremities, The Aorta, Its Branches, Carotid Arteries Or Assorted Vascular Subjects

Location: Grand Ballroom East, 3rd Floor

Program Q: (Sessions 104-108)

9:00 A.M. – 4:00 P.M.

Improving Outcomes In Hemodialysis Access

Course Leaders: Larry A. Scher, MD, Anton N. Sidawy, MD, MPH

Location: Grand Ballroom West, 3rd Floor

Program R: (Sessions 109-114)

9:05 A.M. – 4:11 P.M.

Venous Disease

Course Leads: Jose I. Almeida, MD, RPVI, RVT, Lowell S. Kabnick, MD, RPhS, Kenneth Ouriel, MD, MBA, Thomas W. Wakefield, MD

Location: Trianon Ballroom, 3rd Floor



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23rd European Vascular Course



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2019

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COMPONENT MEETING LEADERS

Jose I. Almeida, MD, RPVI, RVT
George L. Berdejo, BA, RVT
Allan L. Brook, MD
Jacob Cynamon, MD
Krassi Ivancev, MD, PhD
Michael R. Jaff, DO
Lowell S. Kabnick, MD, RPhS
Natalie A. Marks, MD, RPVI, RVT
Larry A. Scher, MD
Anton N. Sidawy, MD, MPH
Robert L. Vogelzang, MD
Thomas W. Wakefield, MD
Wayne F. Yakes, MD

VASCULAR DISEASE MANAGEMENT COMPONENT LEADERS

Michael R. Jaff, DO
Raghu Kolluri, MD
Geno J. Merli, MD, MACP
Mehdi H. Shishehbor, DO, MPH, PhD
Ido Weinberg, MD, MSc

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Kenneth Ouriel, MD, MBA
Sherif A.H. Sultan, MD, PhD
Frank J. Veith, MD

ACKNOWLEDGMENTS

The Cleveland Clinic Foundation Center for Continuing Education and VEITHsymposium acknowledge educational grants in support of this activity from:

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Vascular & Endovascular Challenges Update

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GENERAL INFORMATION

NEEDS ASSESSMENT

Vascular disease in all of its manifestations is a leading cause of death and disability affecting a large percentage of Americans over the age of 50. There is a critical need for physicians who diagnose, treat and manage patients with vascular disease to receive continuing medical education in this area. The latest pharmacologic, radiologic, surgical and endovascular techniques and technologies will be presented, along with discussions of when these treatments are justified and indicated and when they are not. Updates on clinical trials and opportunities for dialogue with experts in the field provide insight along with the latest data on the results of the various treatment modalities.

There is an enormous gap between actual practice and the current state of knowledge. This gap is filled imperfectly with material in books and published articles. These sources are also often negatively influenced by the biases of authors, reviewers and editors. VEITHsymposium attempts to fill this gap more perfectly and more currently by enlisting speakers with up-to-date information and data, and also those on both sides of controversial issues. In this way, the audience gets a current view of the state-of-the-art in vascular disease management as of the date of the meeting. All important topics are covered at the meeting and for further reference in the web-based library, a long-term permanent resource.

In addition, by having numerous short (4.5-7 minutes) talks followed by panel discussions and capturing the entire meeting on the web-based library, the meeting will provide an electronic reference source to help vascular specialists in their practice decisions throughout the year. It will also provide the most up-to-date unbiased information possible to help with these decisions.

FOCUS

The VEITHsymposium provides Vascular Surgeons and other Vascular Specialists with a five-day conference on the most current information about new developments in clinical practice and relevant research. Beginning Tuesday, the symposium offers over 900 fast-paced presentations on what is new and important in the treatment of vascular disease. Important updates and reevaluations, as well as the latest significant advances, changing concepts in diagnosis and management, pressing controversies and new techniques, agents and diagnostic modalities will be presented. Video case presentations will also be included.

OBJECTIVES

Upon completion of the VEITHsymposium, the participants will, after learning about a wide array of topics, be able to:

- Explain the practical implications of clinical trial data on new technologies and techniques for endovascular repair of abdominal aortic aneurysm and thoracic aortic disease
- Summarize the impact of data on therapeutic advances for stroke and carotid disease management
- Compare the safety, efficacy, and therapeutic indications of pharmacologic agents to the management of vascular disease
- Assess data on the latest state-of-the-art for the treatment of superficial femoral and tibial artery disease and describe potential implications for clinical care
- Summarize recent data on treatment advances for venous disease and explain their clinical implications
- Provide new information about the latest developments in hemodialysis access and vascular malformations and tumors

GENERAL INFORMATION

TARGET AUDIENCE

Vascular Surgeons, Interventional Radiologists, Interventional Cardiologists, Vascular Medicine Specialists and all others interested in the management of vascular disease.

ASSOCIATE FACULTY GLOBAL PODIUM PRESENTATIONS

Wednesday – Thursday, November 14-15, 2018

Location: Sutton Parlor Center, 2nd Floor

In order to have more younger and less familiar vascular surgeons and vascular specialists play an active role as Associate Faculty at our meeting, we have initiated programs whereby they can present their scientific work at the podium. Vascular surgeons and vascular specialists participating in these programs will have submitted abstracts for a podium presentation, and these abstracts will be posted on our website. Please visit www.veithsymposium.org for additional information about the Associate Faculty Global Podium Presentations component of VEITHsymposium.

INTERNATIONAL GUEST FACULTY PROGRAM

Thursday, November 15, 2018

Location: Sutton Parlor Center, 2nd Floor

The VEITHsymposium, which is sponsored and accredited by the Cleveland Clinic, offers a new opportunity to join the International Guest Faculty Program (IGFP), to participate in our important international program, alongside world renowned faculty and key opinion leaders.

COMPONENT SESSIONS WILL BE HELD AS FOLLOWS:

Hemodialysis Access

Saturday, November 17, 2018

Location: Grand Ballroom West, 3rd floor

AIMsymposium Multidisciplinary Acute Stroke Management

Thursday, November 15, 2018

Location: Murray Hill Suites East and West, 2nd floor

VEITHsymposium registrants are welcome to attend at no additional cost.

ACCREDITATION STATEMENT

The Cleveland Clinic Foundation Center for Continuing Education is accredited by the Accreditation Council for Continuing Medical Education to provide continuing medical education for physicians.

The Cleveland Clinic Foundation Center for Continuing Education designates this live activity for a maximum of 46.75 *AMA PRA Category 1 Credits*[™]. Physicians should claim only the credit commensurate with the extent of their participation in the activity.

Participants claiming CME credit from this activity may submit the credit hours to the American Osteopathic Association for Category 2 credit.

ABS MAINTENANCE OF CERTIFICATION

VEITHsymposium provides Category 1 CME and self-assessment credits toward Part 2 of the ABS MOC Program.

GENERAL INFORMATION

ETHICAL MEDTECH COMPLIANCE

VEITHsymposium is Compliant with the MedTech Europe Code of Ethical Business Practice.

CME CERTIFICATES AND COURSE EVALUATION FORMS

CME certificates will be available online at www.veithsymposium.org. An e-mail with a unique password and instructions on how to obtain the certificate and complete a brief, optional course evaluation will be sent to all registered attendees after the meeting. The e-mail will be sent to the e-mail address that was used to register the attendee. Please note that CME Certificates must be claimed by **February 28, 2019**.

FACULTY DISCLOSURE

The Cleveland Clinic Foundation Center for Continuing Education has implemented a policy to comply with the current Accreditation Council for Continuing Medical Education Standards for Commercial Support requiring resolution of all faculty conflicts of interest. Faculty declaring a relevant commercial interest will be identified in the activity syllabus.

ADA STATEMENT

The Cleveland Clinic Foundation Center for Continuing Education complies with the legal requirements of the Americans with Disability Act. If any participant of the VEITHsymposium requires special assistance, please send written request at least one month prior to the activity to admin@veithsymposium.org.

ONLINE CONFERENCE LIBRARY

The entire program with almost all the talks, slides, audio and videos - fully synchronized - and the panels, will be available in an Online Conference Library, which can be obtained at a nominal cost. For more information on how to obtain the VEITHsymposium Online Library, please visit www.veithondemand.com or call (800) 987-9314, ext. 300.

ONLINE ACCESS TO ABSTRACTS

Presentation slides will be used as abstracts and will be available on the program page of the VEITHsymposium website at www.veithsymposium.org after the meeting. Abstracts will be available on the website for one full year.

VEITHsymposium NON-CME ACTIVITIES

Chimney EVAR Workshop at VEITHsymposium

Wednesday, November 14, 2018

3:00 p.m. - 6:00 p.m.

Location: Americas Hall 1, 3rd Floor

VENOUS VENOUS VENOUS® WORKSHOPS AT VEITHsymposium - ASK THE EXPERTS!

Thursday, November 15, 2018

2:15 P.M. - 6:15 P.M.

Location: Americas Hall 2, 3rd floor

Workshops will include video case presentations, lectures, and demonstrations on vein management by experts, and hands-on opportunities where participants can rotate through multiple training stations staffed by professionals to assist with your experience.

Registration Fee: \$25 (available to fully paid VEITHsymposium Clinicians); \$100 for all others (including Exhibitors). Space is Limited.

GENERAL INFORMATION

Module 1: Thrombus Management

Thrombolysis and Thrombectomy, Stents and Filters, Difficult Recanalizations, Anticoagulation

Module 2: Superficial Venous Disease and Compression Management

Ablation, Phlebectomy Sclerotherapy, Lymphedema, Lipedema, Venous Edema, Wound Care, Compression

Visit www.veithsymposium.org for details.

(This is a non-CME activity.)

SOCIAL EVENTS

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For more information or to arrange your social events while at VEITHsymposium, please contact:

Warren Schreiber at wschreiber@firsthandtickets.com

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HOTEL AND TRAVEL

A block of rooms has been reserved at the conference rate of \$399 plus taxes per night. This rate is available until the block is filled or until October 8, 2018. *Please request the VEITH rate when reserving your accommodations.*

New York Hilton-Midtown (Symposium Site)

1335 Avenue of the Americas

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TUESDAY, NOVEMBER 13, 2018

- 6:00 A.M. General Registration – Rhinelander Gallery, 2nd Floor
 6:00 A.M. Faculty Registration – Morgan Suite, 2nd Floor
 6:00 A.M. Assoc and Int'l Guest Faculty Reg – Rhinelander Gallery, 2nd Floor
 6:15 A.M. Continental Breakfast – Rhinelander Gallery, 2nd Floor

CONCURRENT TUESDAY PROGRAMS

PROGRAM A: SESSIONS 1-8

Progress In The Treatment Of Heart Valve, Coronary, And Thoracic And Abdominal Aortic Diseases

6:40 A.M. – 6:02 P.M.

Grand Ballroom East (Sessions 1-4), 3rd Floor

Grand Ballroom West (Sessions 5-8), 3rd Floor

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New Developments In Robotics, Laparoscopy, Simulation, Guidance, Carotid Disease And Aortic Branch Disease; New Techniques And Concepts; Vascular Surgery Governing Bodies And Training And Open And Hybrid Vascular Procedures

6:40 A.M. – 5:57 P.M.

Grand Ballroom West (Sessions 9-12), 3rd Floor

Grand Ballroom East (Sessions 13-16), 3rd Floor

PROGRAM C: SESSIONS 17-18

Management Of Pulmonary Embolism: A Complex Team Sport

7:00 A.M. – 12:00 P.M.

Trianon Ballroom, 3rd Floor

Course Leader: **Michael R. Jaff, DO**

PROGRAM D: SESSIONS 19-22

More Hot Topics Related To The Treatment Of Aortic, Iliac Artery, Lower Extremity And Carotid Diseases

1:00 P.M. – 5:45 P.M.

Trianon Ballroom, 3rd Floor

PROGRAM A (SESSIONS 1-8)

PROGRESS IN THE TREATMENT OF HEART VALVE AND CORONARY ARTERY DISEASE AND THORACIC AND ABDOMINAL AORTIC DISEASES

Grand Ballroom East, 3rd Floor (Sessions 1-4)

Grand Ballroom West, 3rd Floor (Sessions 5-8)

6:40 – 6:44 Opening Remarks

Frank J. Veith, MD

SESSION 1 (Grand Ballroom East, 3rd Floor)

PROGRESS IN TRANSCATHETER VALVE IMPLANTATION, CORONARY ARTERY STENTING AND ASCENDING AORTIC DISEASE TREATMENT

Moderators: **Hazim J. Safi, MD**

Lars G. Svensson, MD, PhD

6:45 – 6:50 Status Of Transcatheter Tricuspid Valve Implantation: Initial Experience

Horst Sievert, MD

6:51 – 6:56 Progress In Transcatheter Aortic Valve Implantation (TAVI): A Cardiac Surgeon's Perspective: Which Patients Still Need Open Valve Surgery

Allan Stewart, MD

6:57 – 7:02 Progress In TAVI: An Interventional Cardiologist's View: Which Patients Still Need Open Valve Surgery

George Dangas, MD

Roxana Mehran, MD

- 7:03 – 7:08** Key New Developments In Coronary Artery Stenting: Are Too Many Patients Receiving Coronary Stents As Indicated By The ORBITA Trial
Gregg W. Stone, MD
- 7:09 – 7:14** Highlights Of Optimal Current Management Of Type A Aortic Dissections
Joseph S. Coselli, MD
- 7:15 – 7:20** Dynamic Imaging Of The Ascending Aorta: What Are The Implications For Endograft Treatment
Rachel E. Clough, MD, PhD
- 7:21 – 7:26** Advances In Ascending Aortic And Arch Endografting
Eric E. Roselli, MD
Lars G. Svensson, MD, PhD
- 7:27 – 7:32** Progress And Challenges In Ascending Aortic Endograft Treatment
Rodney A. White, MD
- 7:33 – 7:38** Feasibility And Status Of A Combination Endovascular Aortic Valve Plus Stent Graft Conduit For Treatment Of Type A Aortic Dissections: What Patients Are Candidates
Martin Czerny, MD
Bartosz Rylski, MD, PhD
- 7:39 – 7:44** Is Endovascular Treatment Of The Aortic Valve And Root Feasible (An Endo-Bentall Procedure): Where Does It Stand
Ali Khojenezhad, MD, PhD
- 7:45 – 7:51** **Panel Discussion**

SESSION 2 (Grand Ballroom East, 3rd Floor)

NEW DEVELOPMENTS IN THE TREATMENT OF AORTIC ARCH LESIONS AND AORTIC DISSECTIONS

Moderators: *Eric E. Roselli, MD*

Michael D. Dake, MD

- 7:52 – 7:57** Choice Of Treatment For Aortic Arch Aneurysms: Open, Hybrid, Frozen Elephant Trunk, Endo: When And How
Roberto Chiesa, MD
- 7:58 – 8:03** Options For Treatment Of Aortic Arch Pathology: When Open, Hybrid, Fenestrated Or Branched TEVAR (F/B TEVAR) Or Chimney TEVAR (Ch/TEVAR)
Chang Shu, MD
- 8:04 – 8:09** Caval Balloon Occlusion To Enable Accurate Deployment Of Arch And Ascending Aortic Endograft: It May Be Better Than Rapid Pacing: How To Do It
Timothy A. Resch, MD, PhD
Björn Sonesson, MD, PhD
- 8:10 – 8:15** Update On Total Endovascular Aortic Arch Repair With 2 And 3 Branch Endograft Designs (Global Experience): When Does The Procedure Work And When Doesn't It
Stephan Haulon, MD
- 8:16 – 8:21** Branched And Fenestrated Endografts For Treatment Of Complex Arch Lesions
Qingsheng Lu, MD
Zaiping Jing, MD
- 8:22 – 8:27** New Developments In Branched Arch Endografting: How To Deal With Dissected Branches
Tilo Kölbel, MD, PhD
- 8:28 – 8:33** Update On Improved Precurved Fenestrated N2X Endograft For Aortic Arch Lesions: Advantages And Results: When Available Outside Japan
Yoshihiko Yokoi, MD

- 8:34 – 8:39** Updated Experience With Chimney TEVAR (Ch/TEVAR) To Repair Aortic Arch Lesions: Midterm Results And How To Make Them Work
Mario L. Lachat, MD
Nicola Mangialardi, MD
- 8:40 – 8:45** How To Treat Acute Type B Aortic Dissections (TBADs) With Retrograde Intramural Hematoma (IMH) Extending Into The Arch And Ascending Aorta
I-Hui Wu, MD, PhD
- 8:46 – 8:51** Surgeon Modified Endografts For Treatment Of Ascending And Arch Aneurysms And Dissections: Value Of A Transapical Approach
Ludovic Canaud, MD, PhD
- 8:52 – 8:58** **Panel Discussion**

SESSION 3 (Grand Ballroom East, 3rd Floor)

AORTIC DISSECTIONS (TYPE B AND TYPE A) AND THEIR TREATMENTS

Moderators: *Christoph A. Nienaber, MD, PhD*
Richard P. Cambria, MD

- 8:58 – 9:03** New Findings From IRAD On Management Of Uncomplicated TBAD Patients: Predictors Of Progression; When Early TEVAR; When Medical Treatment And Observation
Santi Trimarchi, MD, PhD
- 9:04 – 9:09** New Developments And Horizons In The Treatment Of TBADs: Predictors Of Progression: Which Patients Should Not Have Early TEVAR
Michael D. Dake, MD
- 9:10 – 9:15** A New Classification System For Aortic Dissections: Implications For Treatment
Mark A. Farber, MD
- 9:16 – 9:21** Optimal Management Of Type A Aortic Dissections (TAADs): New Developments In Frozen Elephant Trunk Grafts
Joseph S. Coselli, MD
- 9:22 – 9:27** Frozen Elephant Trunks Combined With TEVAR: Why Is It The Best Treatment For Some Acute TBADs: Which Ones
Martin Czerny, MD
Bartosz Rylski, MD, PhD
- 9:28 – 9:33** Why TEVAR Alone Is Not Enough For The Long-Term Management Of Type B Aortic Dissections (TBAD): Update On The Advantages And Disadvantages Of The PETTICOAT Composite Device Concept
Joseph V. Lombardi, MD
- 9:34 – 9:39** Update On The STABILISE Technique For Treating TBADs: Balloon Over-Dilatation Of The Distal Open Stent To Disrupt The Dissection Flap And Seal The False Lumen: Midterm Results And Precautions In >100 Patients
Jean-Marc Alsac, MD, PhD
- 9:40 – 9:45** Update On DISTAL EXTENDED BRANCH PETTICOAT Technique To Treat False Lumen Dilatation In Complex Aortic Dissections By Placing Covered Balloon Expandable Stents In Renal And Visceral Branches: Technique And Improved Results
Lars R. Kock, MD

- 9:46 – 9:51** Long-Term Success After TEVAR For TBAD Or Ascending Aortic Replacement For TAAD Usually Requires Secondary Adjunctive Measures: What Are They And What Are The Implications
Götz M. Richter, MD, PhD
- 9:52 – 9:57** Retrograde Arch Branch TEVAR vs. In Situ Fenestration: Advantages And Limitations Of Each
Jean M. Panneton, MD
- 9:58 – 10:04** **Panel Discussion**
- 10:04 – 10:15** **Break – Visit Exhibits And Pavilions (2nd and 3rd Floors)**

SESSION 4 (Grand Ballroom East, 3rd Floor)

MORE NEW DEVELOPMENTS IN THE TREATMENT OF TBADs AND THORACIC AORTIC DISEASE; TEVAR AND THORACOABDOMINAL ANEURYSMS (TAAAs)

Moderators: *Nicholas J.W. Cheshire, MD*
Joseph S. Coselli, MD

- 10:15 – 10:20** Highlights Of The New SVS Guidelines For TEVAR
Guillermo A. Escobar, MD
Gilbert R. Upchurch, MD
Thomas L. Forbes, MD
- 10:21 – 10:26** Update On Natural History Of Intramural Hematomas (IMHs) And Penetrating Aortic Ulcers (PAUs): When Should They Be Treated By TEVAR And When Not: Prognosis After Treatment
Frank R. Arko, MD
- 10:27 – 10:32** Most Focal Thoracic Disease (IMHs, PAUs And Pseudoaneurysms) Should Be Treated By Endografts (TEVAR)
Robert S. Crawford, MD
- 10:33 – 10:38** Long-Term Results Of Cervical Debranching Procedures With TEVAR: Patency, Complications And Tips For Performing
Ashraf Mansour, MD
- 10:39 – 10:44** What Preop CTA Features Can Predict Outcome Of TEVAR For TBAD In Terms Of Remodeling And Distal Endograft Induced Re-Entry Tears
Wei Guo, MD
- 10:45 – 10:50** Distal Endograft Induced Re-Entry Tears After TEVAR For TBADs: What Factors Cause Them: How Can They Be Prevented And Treated
Chun Che Shih, MD, PhD
- 10:51 – 10:56** How To Prevent And Treat Retrograde Aortic Dissection Occurring With TEVAR
Ali Azizzadeh, MD
- 10:56 – 11:04** **Panel Discussion**
Moderators: *Ramon Berguer, MD, PhD*
Götz M. Richter, MD, PhD
- 11:04 – 11:09** Most Patients Requiring TEVAR Fall Outside IFUs: Does It Matter
Dittmar Böckler, MD
- 11:10 – 11:15** Staged Hybrid Repairs Of Type II TAAAs With Proximal TEVAR And Open Limited Distal Repair: Advantages And Results
Gilbert R. Upchurch, MD
- 11:16 – 11:21** Importance Of Air Emboli In Causing Strokes After TEVAR: New Technology (Flush Solution) And Techniques To Prevent Air Emboli From Devices
Tilo Kölbel, MD, PhD
Fiona Rohlfss, MD

- 11:22 – 11:27** When Are Endografts The Right Option For Treatment Of Marfans Patients
James H. Black III, MD
- 11:28 – 11:33** Secondary Aortic Interventions After TEVAR: How Can They Be Prevented; Why Are They Necessary And Do They Improve Outcomes
Salvatore T. Scali, MD
Martin R. Back, MD
Adam Beck, MD
- 11:34 – 11:39** New Findings Regarding Re-Interventions For Failed TEVARs
Ronald M. Fairman, MD
Grace Wang, MD
- 11:40 – 11:45** Open Conversion For Failed TEVARs And Endograft TAAA Repairs: Tips And Tricks: When Indicated And When Should Open Repair Be Done Primarily
Michael J. Jacobs, MD
- 11:46 – 11:51** Number, Size And Location Of Dissection Entry Tears Influences Flap Motion And False Lumen Flows: What Is The Clinical Significance: Studies In An In Vitro TBAD Model
Ravi K. Veeraswamy, MD
- 11:52 – 12:00** **Panel Discussion**
- 12:00 – 1:00** **Lunch Break – 2nd Floor Promenade**
Visit Exhibits And Pavilions (2nd and 3rd Floors)

SESSION 5 (Grand Ballroom West, 3rd Floor)

NEW DEVELOPMENTS IN EVAR AND AAA

Moderators: *Kenneth Ouriel, MD, MBA*
Peter Gloviczki, MD

- 1:00 – 1:05** Decades Of AAA RCTs And Registries: What Do They Tell Us; What Do They Tell Us That Is Wrong; And What Don't They Tell Us
Frank J. Criado, MD
- 1:06 – 1:11** Maintenance Of Durability Of All Types Of Endovascular Repair By A Simple, Safe And Patient Friendly Method Recommended To The NICE Aortic Guidelines
Roger M. Greenhalgh, MD
- 1:12 – 1:17** Late Results Of The DREAM And OVER RCTs Did Not Show The Same Late Survival Benefit For OR As EVAR 1: Possible Reasons And Should EVAR Be The Treatment Of Choice For All Anatomically Suitable AAA Patients
Jan D. Blankensteijn, MD
- 1:18 – 1:23** EVAR Results Have Improved Since 2004: EVAR Should Be The Treatment Of Choice For All AAA Patients With Suitable Anatomy
Jean-Pierre Becquemin, MD
- 1:24 – 1:29** Drugs To Slow AAA Growth: Will Metformin Do It And How Is Metformin Related To Decreased AAA Incidence In Diabetes
Ronald L. Dalman, MD
- 1:30 – 1:35** High LDL Cholesterol (LDL-C) And Triglycerides Can Promote AAA Growth: Could Statins And PCSK-9 Inhibitors Slow It
Richard Bulbulia, MA, MD

- 1:36 – 1:41** Different Patterns Of AAA Neck Dilatation After OR And EVAR With Various Self-Expanding Or Polymer Sealing Devices: Why It Matters And Which Is Best With Short Sealing Zones
David J. Minion, MD
- 1:42 – 1:48** **Panel Discussion**
Moderators: *Enrico Ascher, MD*
Keith D. Calligaro, MD
- 1:48 – 1:53** AAA Rupture After EVAR: Etiology, Best Treatment And Outcomes
Eric Ducasse, MD, PhD
- 1:54 – 1:59** Value Of 3D Contrast Enhanced Duplex Ultrasound (CEDU) In Evaluating AAAs: It Can Quantitate Thrombus Volume As A Biomarker And Follow AAA Volume To Monitor Growth More Accurately
Henrik Sillesen, MD, DMSc
- 2:00 – 2:05** **DEBATE:** Patient Compliance After EVAR: Can Poor Compliance Be Predicted: Is It Bad And Should Non-Compliant Patients Have Open Surgery
Ali F. AbuRahma, MD
- 2:06 – 2:11** **DEBATE:** Non-Compliance After EVAR Is No Big Deal: It Does Not Increase Aneurysm Related Or All Cause Mortality
Pete Holt, MD, PhD
Matthew J. Grima, MD, MRCSEd, MSc, ChM
Ian Loftus, MD
- 2:12 – 2:17** Update On Predicting AAA Growth Rates And Rupture Risk From Smooth Muscle Behavior (Grown From Skin Biopsies): This Correlates With AAA Wall Strength
Kak Khee Yeung, MD, PhD
- 2:18 – 2:23** Intrasac Thrombus In AAAs May Lower Wall Strength And Increases Rupture Risk: What Is The Mechanism
Gregory L. Moneta, MD
Gregory J. Landry, MD
- 2:24 – 2:29** How Is MR Evaluated Mural Thrombus In AAAs Associated With Predicting Their Growth Rates
Jes S. Lindholt, MD
- 2:30 – 2:36** **Panel Discussion**

SESSION 6 (Grand Ballroom West, 3rd Floor)

NEW DEVELOPMENTS IN THE MANAGEMENT OF SHORT-NECKED (JUXTARENAL) AAAs AND PARARENAL AAAs

Moderators: *Matt M. Thompson, MD*
Jean-Pierre Becquemin, MD

- 2:36 – 2:41** **DEBATE:** With Short-Necked AAAs Or Those With Undesirable Necks Outside IFUs, Poor EVAR Outcomes Can Be Expected With All Endograft Devices
Andres Schanzer, MD
- 2:42 – 2:47** **DEBATE:** Not So: Some Short Necked (4-8 mm) AAAs And Those With Other Undesirable Necks Outside IFUs Can Sometimes Be Well Treated With Standard EVAR Devices And Good 5-Year Results Can Be Obtained (From The ENGAGE Trial): When Is This So
Hence J.M. Verhagen, MD, PhD

- 2:48 – 2:53** Why Chimney EVAR (Ch/EVAR) Is The Best Treatment For Juxtarenal And Pararenal Aneurysms
Konstantinos P. Donas, MD
Giovanni Torsello, MD
- 2:54 – 2:59** Why Fenestrated EVAR (F/EVAR) Is The Best Treatment For Juxtarenal And Pararenal AAAs - Although There Are Limitations
Thomas L. Forbes, MD
- 3:00 – 3:05** F/EVAR With The Cook ZFEN Device Plus 2 Chimney Grafts Is A Good Option For Some Pararenal AAAs: Which Ones
Ravi K. Veeraswamy, MD
- 3:06 – 3:11** Does F/EVAR Solve The Durability Problem Of Using Standard EVAR Devices To Treat AAAs With Short Or Difficult Necks: The GLOBALSTAR Registry Says YES
Michael P. Jenkins, MBBS, BSc, MS
- 3:12 – 3:17** Endoanchors As Adjuncts To EVAR With Standard Endograft Devices In Patients With Short Or Poor AAA Necks Can Provide Effective And Durable Results: What Are The Limitations: From The ANCHOR Registry
William D. Jordan, Jr., MD
- 3:18 – 3:23** Open Surgery Is The Best Treatment For Juxtarenal And Pararenal AAAs In Good Risk Patients
Kimihiko Komori, MD, PhD
- 3:24 – 3:29** Ch/EVAR, F/EVAR, Combinations And Open Repair All Have A Role In Treating Short And No Necked AAAs: When Is Each The Best
Jason T. Lee, MD
- 3:30 – 3:37** **Panel Discussion**
- 3:37 – 3:48** **Break – Visit Exhibits And Pavilions (2nd and 3rd Floors)**

SESSION 7 (Grand Ballroom West, 3rd Floor)

MORE NEW DEVELOPMENTS IN TBADs, TEVAR, THORACIC AND THORACOABDOMINAL AORTIC ANEURYSMS (TAAAs)

Moderators: *Michael J. Jacobs, MD*

Michel Makaroun, MD

- 3:48 – 3:53** When Is Open Repair Of TAAAs The Only Solution: When Is It The Best Solution: When Is No Repair The Best Solution
Hazim J. Safi, MD
- 3:54 – 3:59** With Acute Or Ruptured TAAAs An Off-The-Shelf (OTS) Endograft Is A Solution For One-Third Of Patients – But For Two-Thirds Of Patients Open Repair Is The Best Treatment
Roberto Chiesa, MD
Germano Melissano, MD
Chiara Mascoli, MD
- 4:00 – 4:05** For Acute Or Ruptured TAAAs Parallel Endografts (Ch/EVAR) Are The Best Solution And Can Provide Durable Repairs If Done Right
Nicola Mangialardi, MD
Mario L. Lachat, MD
- 4:06 – 4:11** What Is New With Cerebral Embolic Protection Devices For TEVAR And TAVI Procedures: Which Device Is Best And When Should They Be Used: What Are The Limitations
Jeffrey P. Carpenter, MD

- 4:12 – 4:17 How To Prevent Particulate Embolic Strokes During TEVAR: How Do The Protection Devices Work And When Should They Be Used
Richard G.J. Gibbs, FRCS
- 4:18 – 4:23 Why Analyzing The Nature Of The False Lumen And The Origins Of Visceral (And Renal) Arteries Is Critical To The Treatment Of Acute TBADs: How To Do It And What To Do About It
Herve Rousseau, MD, PhD (Power Point Presentation With Synched Audio)
- 4:24 – 4:29 Fenestrated And Branched EVAR (F/B/EVAR) Is The Best Way To Treat TAAAs After TEVAR For TBADs: Value Of Inner Branched Grafts And The BeGraft Plus For Bridging Endografts
Eric L.G. Verhoeven, MD, PhD
Athanasios Katsargyris, MD
- 4:30 – 4:35 Role Of Branched EVAR (B/EVAR) To Treat Visceral Segment TAAAs With Chronic TBADs: Challenges And How To Overcome Them
Marcelo Ferreira, MD (Power Point Presentation With Synched Audio)
- 4:36 – 4:41 The Initial False Lumen To True Lumen (FL/TL) Ratio On CTs Is A Most Accurate Predictor Of The Need For Interventions With Acute TBADs
Jean M. Panneton, MD
- 4:42 – 4:48 **Panel Discussion**

SESSION 8 (Grand Ballroom West, 3rd Floor)

CONTROVERSIES AND NEW DEVELOPMENTS IN THE MANAGEMENT OF UNCOMPLICATED TBADs

Moderators: *Rodney A. White, MD*
Frank J. Veith, MD

- 4:48 – 4:53 New Developments In The Endovascular Treatment Of Uncomplicated TBAD Patients: The FLIRT Concept: What Has Changed: TEVAR Is Indicated In Most At 2-8 Weeks After Onset: Who Are They And What Else Is Needed
Christoph A. Nienaber, MD, PhD
- 4:54 – 4:59 Trends In US National Treatment For Asymptomatic Uncomplicated TBADs: From The National Inpatient Sample Through 2015
Raghuveer Vallabhaneni, MD
- 5:00 – 5:05 When Should Acute Uncomplicated TBADs Be Treated By TEVAR: How Can Imaging Help
Rachel E. Clough, MD, PhD
- 5:06 – 5:11 Outcomes Of Endovascular Repair Of Multi-Channeled Aortic Dissection With And Without Full True Lumen Collapse
Weiguo Fu, MD
- 5:12 – 5:17 **DEBATE:** The Case For Treating All Uncomplicated Acute TBAD Patients With TEVAR
Ross Milner, MD
- 5:18 – 5:23 **DEBATE:** The Case Against TEVAR For All Uncomplicated Acute TBAD Patients And For Good Medical Treatment Alone For Most: What Constitutes Good Medical Treatment
Ali Azizzadeh, MD
- 5:24 – 5:29 Patient Compliance With Good Medical Therapy For TBADs Is Poor: How Can This Be Improved And What Is Its Impact On The Debate Over Optimal Treatment For These Patients
Colin D. Bicknell, MD

- 5:30 – 5:35** Another Controversial Opinion: Why TEVAR Should Be Performed On All Acute TBAD Patients
Mark Conrad, MD, MMSc
- 5:36 – 5:41** A Different Controversial Opinion: Not So: Why TEVAR Should Only Be Performed Selectively On Patients With Uncomplicated Acute TBADs
Michel Makaroun, MD
- 5:42 – 5:47** **DEBATE:** Why A Randomized Controlled Trial (RCT) Of TEVAR And Medical Treatment vs. Medical Treatment Alone Is Needed For Acute Uncomplicated TBADs: Such A Trial (INTACT-AD) Has Been Designed With The Following Features . . .
Firas F. Mussa, MD
- 5:48 – 5:53** **DEBATE:** We Don't Need Such A RCT: Data From The SVS Registry And Other Sources Will Suffice
Richard P. Cambria, MD
- 5:54 – 6:02** **Panel Discussion**
End of Program A

PROGRAM B (SESSIONS 9-16)
PROGRESS IN VASCULAR ROBOTICS,
LAPAROSCOPY, SIMULATION AND GUIDANCE;
NEW DEVELOPMENTS IN CAROTID DISEASE,
ACUTE STROKE AND AORTIC BRANCH
TREATMENTS; NEW TECHNIQUES AND
CONCEPTS; GOVERNING BODIES (BOARD AND RRC)
ISSUES; OPEN AND HYBRID VASCULAR SURGERY
Grand Ballroom West, 3rd Floor (Sessions 9-12)
Grand Ballroom East, 3rd Floor (Sessions 13-16)

- 6:40 – 6:44** Opening Remarks
Enrico Ascher, MD

SESSION 9 (Grand Ballroom West, 3rd Floor)
PROGRESS IN VASCULAR ROBOTICS,
LAPAROSCOPY, SIMULATION AND IMPROVED
GUIDANCE SYSTEMS IN VASCULAR SURGERY
Moderators: *Thomas S. Riles, MD*
Nicholas J.W. Cheshire, MD

- 6:45 – 6:50** How A Robotic Program With The DaVinci Robot For Aortic Surgery Can Be Safe, Clinically Valuable, And Cost Effective
Jean-Marc Alsac, MD, PhD
- 6:51 – 6:56** Update On The Value Of Laparoscopy And Robotic Techniques In Vascular Surgery: Will They Be Widely Applicable And Beneficial
Willem Wisselink, MD
- 6:57 – 7:02** Laparoscopic Techniques For Aortic Procedures (AAA Repair) Has No Future And Is Not Worth Training For
Jean-Baptiste Ricco, MD, PhD
- 7:03 – 7:08** Value Of Robotics For Endovascular Procedures: What Does The Future Hold
Celia Riga, BSc, MBBS, MD
Nicholas J.W. Cheshire, MD

SIMULATION FOR VASCULAR PROCEDURES

- 7:09 – 7:14** How To Use Virtual Reality Simulation To Train More Interventional Doctors To Safely And Effectively Perform Intracranial Thrombectomy For Acute Strokes
Lars B. Lönn, MD, PhD

- 7:15 – 7:21** Use Of Simulation To Improve Ultrasound Guided Arterial And Venous Access Of Difficult Vessels
Afshin Assadian, MD
- 7:22 – 7:27** Whole Task Simulator For Improved Training In Carotid Procedures: Carotid Endarterectomy (CEA) Or TransCarotid Artery Revascularization (TCAR)
Michael C. Stoner, MD

IMPROVED GUIDANCE

- 7:28 – 7:33** Advances In Imaging And Robotic Guidance For Treating Complex AAAs And TBADs
Alan B. Lumsden, MD
- 7:34 – 7:39** Intraoperative Positioning System (IOPS - From Centerline Biomedical): A Non-X-ray 3D Imaging And Navigation System For Guiding Endovascular Procedures: How It Works And Future Potential
Mark A. Farber, MD
Matthew J. Eagleton, MD
- 7:40 – 7:46** **Panel Discussion**

SESSION 10 (Grand Ballroom West, 3rd Floor)

NEW DEVELOPMENTS IN THE MANAGEMENT OF CAROTID DISEASE AND ASYMPTOMATIC CAROTID STENOSIS (ACS)

Moderators: *Ali F. AbuRahma, MD*
L. Nelson Hopkins, MD

- 7:46 – 7:51** Risk Of Stroke In Patients With High Grade Asymptomatic Re-Stenoses After Carotid Endarterectomy (CEA) Is Low And Even Lower After Carotid Stenting (CAS): Invasive Treatment Is Rarely Justified
Ross Naylor, MD
- 7:52 – 7:57** New Findings From The SAMMPRIS RCT Comparing Intracranial Stenting To Best Medical Treatment (BMT): BMT Is Feasible And There Is A High Incidence Of In Stent Restenosis (ISR) Causing Strokes
Colin P. Derdeyn, MD
- 7:58 – 8:03** What Is The Significance Of Subclinical DW MRI Brain Lesions After CAS And CEA: Do They Impair Brain Function
Laura Capoccia, MD, PhD
- 8:04 – 8:09** Minor Strokes Are Not Benign – Whether From Carotid Disease Or Other Causes
Emmanuel M. Houdart, MD
- 8:10 – 8:15** What Other Than Emboli From Carotid Lesions Can Cause Strokes: What Percentage Of Strokes Are Caused By Carotid Bifurcation Disease
Thomas G. Brott, MD
- 8:16 – 8:21** What Is The Value Of The CREST-2 Registry And What Will It Tell Us
Kenneth Rosenfield, MD
- 8:22 – 8:28** **Panel Discussion**
Moderators: *Ross Naylor, MD*
Sumaira Macdonald, MD, PhD
- 8:28 – 8:33** **DEBATE:** Near Total Occlusion Of The Internal Carotid Artery (ICA) – A “String Sign” Should Not Be Treated Invasively Even If Symptomatic: Medical Treatment Is Best
George Geroulakos, MD, PhD

8:34 – 8:39 **DEBATE: Not So: Some Symptomatic Patients With An ICA String Sign Need Urgent Invasive Treatment: Which Ones; What Treatment: What Outcome Can Be Expected**

Hans-Henning Eckstein, MD, PhD

ACS MEGA DEBATE

8:40 – 8:45 **In Patients With Asymptomatic Carotid Stenosis (ACS) Risks Of Invasive Treatment (CEA/CAS) Outweigh Any Potential Benefit: None Should Undergo CEA Or CAS**

Anne L. Abbott, MD, PhD

8:46 – 8:51 **Patients With High Risk ACS – Even If Elderly – Should Undergo Invasive Treatment, Usually CEA: What Percentage Of ACS Patients Should Get CEA: It Is At Least 20%**

Bruce A. Perler, MD, MBA

8:52 – 8:57 **That Percentage Is Too High: Approximately 10% of ACS Patients Should Undergo Invasive Treatment: How Can They Reliably Be Selected**

Kosmas I. Paraskevas, MD

Jean-Baptiste Ricco, MD, PhD

8:58 – 9:03 **Invasive Treatment Of ACS Is Rarely Indicated: ACS Patients Need Good Medical Treatment And A Low LDL Cholesterol (LDL-C): How Low: Less Than 3% Of ACS Patients Should Have Invasive Treatment And These Are Hard To Select**

Henrik Sillesen, MD, DMSc

9:04 – 9:09 **Statins And Omega 3 Can Stabilize Carotid Plaques And Render Them Less Harmful And Embologenic: How Often And How Low Does The LDL-C Have To Go For This To Occur**

Andrew N. Nicolaidis, MS, FRCS

9:10 – 9:16 **Panel Discussion**

9:16 – 9:28 **Break – Visit Exhibits And Pavilions (2nd and 3rd Floors)**

SESSION 11 (Grand Ballroom West, 3rd Floor)

PROGRESS IN THE INTERVENTIONAL MANAGEMENT OF ACUTE STROKES – A NEW HORIZON

Moderators: *Allan L. Brook, MD*

Sriram S. Iyer, MD

9:28 – 9:33 **Acute Stroke Treatment In 2018: Highlights Of Progress And How Best To Treat Strokes From Acute ICA Occlusion**

Klaus D. Mathias, MD

9:34 – 9:39 **Treating Strokes From Acute ICA Occlusion Is Not Simple And Requires A Multidisciplinary Approach With Removal Of Clot In The Neck And Intracranial Arteries And Fixing The Causative Lesion: Technical Plan And Results**

Timothy M. Sullivan, MD

9:40 – 9:45 **Tips And Tricks For Acute Stroke Interventions**

Horst Sievert, MD

9:46 – 9:51 **The COMPASS RCT Shows That New Aspiration Systems Are Equal To Stentrievors For Removing Intracranial Clot To Treat Acute Strokes: When Are They Better**

Alejandro M. Spiotta, MD

- 9:52 – 9:57** Optimal Current Strategies And Techniques For Treating An Acute Stroke After CEA: The Treatment Paradigm Has Changed
Colin P. Derdeyn, MD
- 9:58 – 10:03** Update On Value Of Intracranial Clot Removal For Acute Strokes: When Is A Longer Window After Symptom Onset (Up to 24 Hours) Acceptable: From The DAWN, DIFFUSE And EXTEND-IA TNK Randomized Controlled Trials
L. Nelson Hopkins, MD
- 10:04 – 10:09** Interventional Treatment Of Acute Strokes: Stroke Patients Should Be Admitted Directly To Neuro-EndoCompetent Centers: What Tests Can Predict When Clot Removal May Be Helpful And When Not
Emmanuel M. Houdart, MD
- 10:10 – 10:15** What Training Is Needed For A Vascular Surgeon Or Specialist To Be Qualified To Perform Intracranial Interventions For Acute Strokes: Such Training Is Mandatory
Thomas Haldis, DO
- 10:16 – 10:21** How Does Targeted Temperature Management And Induced Hypothermia Help In The Treatment Of Acute Strokes
Sherif A.H. Sultan, MD, PhD
- 10:22 – 10:28** **Panel Discussion**

SESSION 12 (Grand Ballroom West, 3rd Floor)

PROGRESS IN THE TREATMENT OF AORTO-ILIAC OCCLUSIVE DISEASE

Moderators: *Thomas C. Bower, MD*
Martin Malina, MD, PhD

- 10:28 – 10:33** When Is Open Aorto-Bifemoral Bypass The Procedure Of Choice For Aorto-Iliac Occlusive Disease
Domenico Valenti, DMChir, PhD
- 10:34 – 10:39** Can Duplex Ultrasonography Evaluate Unsuspected Subclinical Axillary/Subclavian Stenosis Before Axillo-Bifemoral Bypasses Or Is Angiography Always Mandatory
Keith D. Calligaro, MD
Matthew J. Dougherty, MD
- 10:40 – 10:45** When Endovascular Treatments Are Not Feasible For Aorto-Iliac Occlusive Disease, Axillofemoral Bypass Should Be The Procedure Of Choice
Russell H. Samson, MD, RVT
- 10:46 – 10:51** Thoracic Aorto-Bifemoral Bypasses Are Useful When Other Revascularizations Have Failed: Tips And Tricks To Make The Procedure Simple
Manju Kalra, MBBS
- 10:52 – 10:57** None Of These Open Operations Should Ever Be Necessary: Endovascular Treatments Should Suffice For All Aorto-Iliac Occlusive Lesions Needing Treatment: Tips And Tricks
Sonia Ronchey, MD, PhD
Nicola Mangialardi, MD
- 10:58 – 11:03** Advances In Stent Treatment For Aorto-Iliac Occlusive Disease
Jos C. van den Berg, MD, PhD

- 11:04 – 11:09** Tips And Tricks For Optimal Iliac Stenting: How To Maximize Patency And Avoid Rupture: Image Fusion Can Help
Klaus M. Overbeck, MD, MPhil
- 11:10 – 11:17** **Panel Discussion**
Moderators: *Sean P. Lyden, MD*
Daniel G. Clair, MD
- 11:17 – 11:22** Isolated Aortic Stenosis/Occlusion: A Disease Of Women Best Treated With A Balloon Expandable Stent-Graft
Sigrid Nikol, MD
- 11:23 – 11:28** Incidence And Treatment Techniques For Iliac Artery Rupture And Acute Limb Ischemia During Endovascular Treatment Of Aorto-Iliac Occlusive Disease
Francesco Setacci, MD
- 11:29 – 11:34** Challenges Of Treating Heavily Calcified Aorto-Iliac Occlusive Lesions: How Can Intravascular Lithotripsy (Shockwave Medical) Be Helpful
Fabrizio Fanelli, MD
- 11:35 – 11:40** Importance Of Hip Flexion And Extension In External Iliac Stenting: How To Minimize Its Detrimental Effects: Are Covered Stents Advantageous
Franco Grego, MD
- 11:41 – 11:46** Hybrid Approach To Treat Severe And Extensive External Iliac Artery Occlusive Disease Using Viabahn Stent-Grafts And Femoral Endarterectomy: Technique And Advantages
Frederic Cochennec, MD, PhD
- 11:47 – 11:52** Reconstruction Of The Aortic Bifurcation For Occlusive Disease: The CERAB Procedure: 3-Year Good Results; Advantages; Best Available Stent Grafts
Peter C.J. Goverde, MD
Michel M.P. Reijnen, MD, PhD
- 11:53 – 12:00** **Panel Discussion**
- 12:00 – 1:00** **Lunch Break –2nd Floor Promenade**
Visit Exhibits And Pavilions (2nd and 3rd Floors)

SESSION 13 (Grand Ballroom East, 3rd Floor)

NEW IMPROVED OR CONTROVERSIAL CONCEPTS OR TECHNIQUES

Moderators: *Craig M. Walker, MD*
George H. Meier III, MD

- 1:00 – 1:05** Radial Artery Access: First And Best Option For Intra-Abdominal And Lower Extremity Interventions: Tips, Tricks, Equipment Needed And Pitfalls: How To Make It Safe
Marcelo Guimaraes, MD
- 1:06 – 1:11** Minimizing Risks When Using Upper Extremity Access For Treating Abdominal And Lower Extremity Lesions
Matthew W. Mell, MD, MS
- 1:12 – 1:17** All CTOs In Iliac And Lower Extremity Arteries Can Be Crossed With Catheters And Guidewires: How To Do It And How To Deal Simply With Failed Re-Entry
Ali Amin, MD, RVT
- 1:18 – 1:23** **DEBATE:** Triple Screening For AAAs, PVD, And Hypertension Saves Lives: From The VIVA Danish Trial
Jes S. Lindholt, MD

- 1:24 – 1:29** **DEBATE:** Value Of The Quick Carotid Scan For Screening: Is It Ready For Widespread Use To Detect Asymptomatic Carotid Stenosis (ACS) If Most Patients With It Are Best Treated Medically
George S. Lavenson, MD
- 1:30 – 1:35** **DEBATE:** Widely Advertised Non-Invasive Vascular Screening Seems Like A Good Idea But Causes More Harm Than Benefit
Frank J. Criado, MD
- 1:36 – 1:41** Use Of 2D Vector Velocity And 3D Ultrasound Can Non-Invasively Measure Intravascular Pressure Changes, Gradients And Flow Abnormalities
Lars B. Lönn, MD, PhD
- 1:42 – 1:47** Bariatric Gastric Artery Embolization For Weight Management: How Is It Done: How Effective Is It (The LOSE-IT RCT) And Will It Replace Bariatric Surgery
Nickolas Kipshidze, MD, PhD
- 1:48 – 1:53** The Post-Implantation Syndrome After EVAR: What Is It And How Should It Be Diagnosed And Treated
Erik E. Debing, MD, PhD
- 1:54 – 2:00** **Panel Discussion**

SESSION 14 (Grand Ballroom East, 3rd Floor)

VASCULAR SURGERY'S GOVERNING BODIES, BOARDS, RESIDENCY REVIEW COMMITTEES, TRAINING, THE NEED FOR INDEPENDENCE AND BRANDING OF THE SPECIALTY

Moderators: *James C. Stanley, MD*
Kim J. Hodgson, MD

- 2:00 – 2:05** Vascular Surgery Is A Separate Independent Specialty In The UK And Most Of Europe: How Has The European Vascular Surgery Board Benefited Patients And Vascular Surgeons
David McLain, FEBVS
- 2:06 – 2:11** Integrated Vascular Surgery Residencies (0+5 Programs): How Many Exist; How Are They Working; Why More Would Help: Should Vascular Surgery Be An Independent Specialty
Murray L. Shames, MD
- 2:12 – 2:17** How To Remedy The Projected Shortage Of Vascular Surgeons In The US By Increasing The Number Of 0+5 Training Programs: Would An Independent Board Help
Andres Schanzer, MD
- 2:18 – 2:23** Training The Vascular Surgery Workforce Of The Future: How Is It Changing: What Are The Challenges In Recruiting And Training So Vascular Surgery Can Thrive: Would Independent Specialty Status Help
William D. Jordan, Jr., MD
- 2:24 – 2:29** Why An Independent Board And Residency Review Committee In Vascular Surgery (RRC-VS) Would Help The Specialty And Patients: What Is Wrong With The Status Quo
John F. Eidt, MD
- 2:30 – 2:36** **Panel Discussion**
- 2:36 – 2:41** What Vascular Surgery Needs To Do To Thrive: We Need Better Branding: Being An Independent Specialty Would Help In Many Ways
Alan M. Dietzek, MD, RPVI

- 2:42 – 2:47** Why Vascular Surgery Needs An Independent ABMS Approved Board Now: How Can We Get There
Timur P. Sarac, MD
- 2:48 – 2:53** Why Vascular Surgery Needs Separate Governing Bodies: A Group Practice Leader’s Perspective
Jeffrey H. Hsu, MD
- 2:54 – 2:59** On The Path To Vascular Surgery Independence: The role Of Independent Fellowships And The Urgent Need For An RRC-VS And An Independent Approved Board (ABVS): A Program Director And Division Chief’s Perspective
Timothy M. Sullivan, MD
- 3:00 – 3:05** The Need For Autonomy In Vascular Surgical Training: We Need An Autonomous Board And RRC: A Younger Vascular Surgery Program Director’s Perspective
Jean E. Starr, MD
- 3:06 – 3:11** Why An Independent ABMS Approved Specialty Board Is Critically Important For The Branding Of Vascular Surgery And The Well Being Of Its Patients
Scott L. Stevens, MD
- 3:12 – 3:17** Vascular Surgery Has Evolved Into A Specialty Separate And Distinct From General Surgery: It Should Now Have Its Own Separate Governing Bodies: Many Benefits Will Accrue
O. William Brown, MD, JD
- 3:18 – 3:23** Dramatic Evolutionary Changes In Vascular Surgery Include: An Endovascular Focus In Most Treatments And Widespread Integrated Training Programs: Do These Changes Require That Governing And Credentialing Bodies Take A New Look At Independence For The Specialty
Bruce A. Perler, MD, MBA
- 3:24 – 3:38** **Panel Discussion And Break**
Visit Exhibits And Pavilions (2nd and 3rd Floors)

SESSION 15 (Grand Ballroom East, 3rd Floor)

PROGRESS IN THE TREATMENT OF RENAL AND VISCERAL ARTERY DISEASE

Moderators: *Mark A. Adelman, MD*
Gustavo S. Oderich, MD

- 3:38 – 3:43** When Is Renal Artery Stenting A Worthwhile Procedure – Despite The RCTs Showing It Has No Value
Thomas A. Sos, MD
- 3:44 – 3:49** New Developments In The Treatment Of The Nutcracker Syndromes – Arterial (Duodenal Compression) And Venous (Renal Vein Compression)
Irwin V. Mohan, MBBS, MD
- 3:50 – 3:55** Endovascular vs. Open Treatment Of Renal And Visceral Artery Aneurysms: When Is Each Needed And When Is Observation Best
Timur P. Sarac, MD
- 3:56 – 4:01** New Detachable Coils Facilitate The Treatment Of Renal And Visceral Artery Aneurysms: Technical Tips
Michele Rossi, MD
- 4:02 – 4:07** Current Optimal Treatment Of Visceral And Renal Artery Aneurysms: Lessons Learned And Pitfalls
Jean-Pierre Becquemin, MD

- 4:08 – 4:13** Isolated Spontaneous Mesenteric Artery Dissections (Of SMA And Celiac Axis): Etiology, Natural History, Diagnosis And Treatment: Most Are Benign
Heron E. Rodriguez, MD
- 4:14 – 4:20** **Panel Discussion**
- 4:20 – 4:25** Open Retrograde SMA Stenting: When Is It Indicated And How To Do It
Richard J. Powell, MD
- 4:26 – 4:31** Value Of Penumbra Indigo Suction Thrombectomy Device In Treating Acute Bowel Ischemia: Advantages And Precautions
Claudio J. Schonholz, MD
- 4:32 – 4:37** Median Arcuate Ligament Syndrome: Is It Real And How Best To Diagnose And Treat It
Alun H. Davies, MA, DM, DSc
- 4:38 – 4:43** Endovascular vs. Open Treatment Of Acute And Chronic Mesenteric Ischemia: When Is Each Best
Timur P. Sarac, MD
- 4:44 – 4:49** Prevention And Endovascular Treatment Of Hepatic Artery Stenoses After Liver Transplantation: Tips And Precautions: How To Manage Complications
W. Charles Sternbergh III, MD
- 4:50 – 4:56** **Panel Discussion**

SESSION 16 (Grand Ballroom East, 3rd Floor)

OPEN AND HYBRID SURGICAL PROCEDURES

Moderators: *Ramon Berguer, MD, PhD*

Alan M. Dietzek, MD, RPVI

- 4:56 – 5:01** Distal Vertebral Bypass: It Can Be Easier Than You Think: Indications And How To Do It
Enrique Criado, MD
- 5:02 – 5:07** When Should Open Surgery Be The First Option For Popliteal Aneurysm Repair: What Approach Is Best – Medial Or Posterior
Jose Fernandes e Fernandes, MD, PhD
- 5:08 – 5:13** Open Surgical Treatment Of Splenic Artery Aneurysms In The Endo Era: Indications And Technical Tips
Armando Mansilha, MD, PhD
- 5:14 – 5:19** Tips And Tricks For Open Surgical Treatment Of Vascular Emergencies In The Porta Hepatis With Whipple And Other Procedures
James H. Black III, MD
- 5:20 – 5:25** Techniques For Controlling Intraoperative Bleeding During Aortic Operations: Surviving Nightmares
Kenneth J. Cherry, MD
- 5:26 – 5:31** Acute Abdominal Aortic Occlusions: A Misleading Catastrophe: When Should Treatment Be Open, Endo Or Hybrid
Gabriel Szendro, MD
- 5:32 – 5:37** Tips And Tricks For Vascular Control And Reconstructions (Arteries And Veins) During Big Cancer Operations
Ashraf Mansour, MD
- 5:38 – 5:43** Why The Role Of Open Surgery For AAAs Is Increasingly Important: What Are The Current Indications And How Will Vascular Trainees Learn To Do It
Michael P. Jenkins, MBBS, BSc, MS

5:44 – 5:49 How To Prevent And Treat Graft Related Complications During And After Aortic Surgery
James H. Black III, MD

5:50 – 5:57 Panel Discussion
End of Program B

PROGRAM C (SESSIONS 17-18)
MANAGEMENT OF PULMONARY EMBOLISM: A COMPLEX TEAM SPORT

Trianon Ballroom, 3rd Floor

Course Leader: **Michael R. Jaff, DO**

SESSION 17 (Trianon Ballroom, 3rd Floor)

MANAGEMENT OF PULMONARY EMBOLISM: A COMPLEX TEAM SPORT – PART 1

Moderator: **Michael R. Jaff, DO**

7:00 – 7:05 Introduction To The Symposium
Frank J. Veith, MD

7:05 – 7:15 Welcome And Introduction
Michael R. Jaff, DO

7:15 – 7:25 The Basics Of Pulmonary Embolism: What Is The Role Of The History, Exam, Biomarkers
Raghu Kolluri, MD

7:25 – 7:35 CT For PE: What Does This Actually Tell Us: Is There Any Role For MR In Acute Or Chronic PE
Brian B. Ghoshhajra, MD, MBA

7:35 – 7:50 Medical Treatment Of PE: When, Why, For How Long, And How Can I Remember How Long
Geno J. Merli, MD, MACP

7:50 – 8:00 Testing For Cancer And Other Hypercoagulable States In PE
Rachel Rosovsky, MD, MPH

8:00 – 8:10 Setting The Stage – The Emergency Physician Algorithm For Acute PE Management
D. Mark Courtney, MD

8:10 – 8:25 Intravenous Thrombolytic Therapy For PE: No Need For Catheter-Based Intervention
Jeffrey W. Olin, DO

8:25 – 8:35 Advancing The Science In PE Treatment – What Do We Need To Know, And How Will We Learn
Akhilesh K. Sista, MD

8:35 – 8:45 Percutaneous Pharmaco-Mechanical Intervention For PE: Is There A Rationale
Robert A. Lookstein, MD, MHCDL

8:45 – 8:55 Step-By-Step Technical Tips For Pharmaco-Mechanical Intervention For PE
Gary M. Ansel, MD

8:55 – 9:05 Percutaneous Mechanical Thrombectomy Without Lytics: The Results Of The FLARE Study
Thomas M. Tu, MD

9:05 – 9:15 Panel Discussion

Moderator: *Michael R. Jaff, DO*

Panelists: *Gary M. Ansel, MD*
D. Mark Courtney, MD
Brian B. Ghoshhajra, MD, MBA
Raghu Kolluri, MD
Robert A. Lookstein, MD, MHCDL
Geno J. Merli, MD, MACP
Jeffrey W. Olin, DO
Rachel Rosovsky, MD, MPH
Akhilesh K. Sista, MD
Thomas M. Tu, MD

**9:15 – 9:45 Break – Visit Exhibits And Pavilions
(2nd and 3rd Floors)**

SESSION 18 (Trianon Ballroom, 3rd Floor)

**MANAGEMENT OF PULMONARY EMBOLISM: A
COMPLEX TEAM SPORT – PART 2**

Moderator: *Michael R. Jaff, DO*

**9:45 – 9:55 Pulmonary Embolism Intervention With Angiojet
Thrombectomy**

Jeffrey Y. Wang, MD

9:55 – 10:05 Vortex Strategy For Massive PE

Christopher J. Kwolek, MD

**10:05 – 10:20 ECMO And Surgical Thrombo-Embolectomy For
Massive PE: When, How And Why**

Mark G. Davies, MD

**10:20 – 10:35 Putting It All Together: What Is The Modern
Algorithm For Management Of Massive And
Submassive PE**

Ido Weinberg, MD, MSc

**10:35 – 10:50 Vena Cava Filters In PE Treatment: Do We Need
Them, And If So, When**

Sanjay Misra, MD

**10:50 – 11:05 Balloon Angioplasty For Chronic Thromboembolic
Pulmonary Hypertension - Does This Really Work**

Kenneth Rosenfield, MD

**11:05 – 11:20 The Team Approach To PE Management: The National
PERT Consortium**

Victor F. Tapson, MD

11:20 – 11:35 Is There A Role For Vascular Surgery On PERTs

Rabih A. Chaer, MD

11:35 – 12:00 Challenging Cases And “PERT” Decisions

Moderator: *Michael R. Jaff, DO*

Panelists: *Rabih A. Chaer, MD*
Mark G. Davies, MD
Christopher J. Kwolek, MD
Sanjay Misra, MD
Victor F. Tapson, MD
Kenneth Rosenfield, MD
Jeffrey Y. Wang, MD
Ido Weinberg, MD, MSc

**12:00 – 1:00 Lunch Break – 2nd Floor Promenade
Visit Exhibits And Pavilions (2nd and 3rd Floors)**

End of Program C

PROGRAM D (SESSIONS 19-22)
MORE HOT NEW RAPID PACED TOPICS RELATED
TO THE TREATMENT OF AORTIC, ILIAC ARTERY,
LOWER EXTREMITY AND CAROTID DISEASES
Trianon Ballroom, 3rd Floor

SESSION 19 (Trianon Ballroom, 3rd Floor)
HOT NEW TOPICS RELATED TO THE AORTA AND
ITS BRANCHES AND AORTIC COARCTATIONS (4 ½
MINUTE FAST PACED TALKS)

Moderators: *Juan C. Parodi, MD*
Patrick J. Lamparello, MD

THORACIC AORTIC TOPICS

- 1:00 – 1:05** Natural History Of Patients With Aortic Intramural Hematoma (IMH) With And Without Treatment: Aortic Mortality Is Low; All Cause Mortality Is Substantial: When Should TEVAR Be Done
Jürg Schmidli, MD
Martin Czerny, MD
- 1:05 – 1:10** Extensive Flap Fenestration To Treat TBADs: When Indicated: When Not And A Tool For Doing It To Prevent Problems With Other Methods
Ramon Berguer, MD, PhD
Juan C. Parodi, MD
- 1:10 – 1:15** Why Bovine Aortic Arches Are Predictive Of A Bad Outcome With TBADs
Jan S. Brunkwall, MD, PhD
- 1:15 – 1:20** Ascending Aortic TEVAR: Where Is It And What Is Its Future Potential
Tilo Kölbel, MD, PhD
- 1:20 – 1:25** Importance, Prevention And Treatment Of Vascular Complications Of TAVI
Ali Khoynezhad, MD, PhD
- 1:25 – 1:30** **Panel Discussion**

MANAGEMENT OF AORTIC COARCTATION

- 1:30 – 1:35** Current Optimal Treatment Of Aortic Coarctation: When Endo, When Open: Bare vs. Covered Stents: Which Covered Stent Is Best: Precautions And Long-Term Results
Elchanan Bruckheimer, MBBS
- 1:35 – 1:40** Aortic Coarctations And Related Aneurysms: When Is Endovascular Treatment Best: Bare Stent vs. Covered Stent: When Is Open Operation Required
Christoph A. Nienaber, MD, PhD

ABDOMINAL AORTIC AND BRANCH TOPICS

- 1:40 – 1:45** Trans Endograft Approach To Treat Type 2 Endoleaks: Technique, Precautions And Results
Mazin Foteh, MD
- 1:45 – 1:50** **DEBATE:** With Ectatic Common Iliac Arteries (18-25 mm) During EVAR, Bell Bottom Techniques Are A Good Treatment In What Circumstances: It Is Simpler And Cheaper
Kim J. Hodgson, MD
- 1:50 – 1:55** **DEBATE:** Not So: In Most Patients With Ectatic Iliac Arteries, Iliac Branched Devices (IBDs) Should Be Used To Prevent Failure From Common Iliac Dilatation
Fabio Verzini, MD, PhD

1:55 – 2:00 EVAR With Flared Limbs >20 mm Or Bell Bottom Grafts Have A High Rate Of Failure And Type 1b Endoleaks
Jan S. Brunkwall, MD, PhD

2:00 – 2:05 **Panel Discussion**

SESSION 20 (Trianon Ballroom, 3rd Floor)

HOT NEW TOPICS RELATED TO THE AORTA AND ILIAC ARTERIES (4 ½ MINUTE FAST PACED TALKS)

Moderators: *Frans L. Moll, MD, PhD*
Ronald L. Dalman, MD

2:05 – 2:10 Some Patients With Large AAAs And Complex Anatomy Are Sometimes Best Not Treated Invasively Or Best Treated By Open Repair
Frank J. Criado, MD

2:10 – 2:15 How To Manage A Dissection Flap In The AAA Neck When Treating An Infrarenal AAA
Ronald L. Dalman, MD

2:15 – 2:20 Why Does EVAR For AAA Patients Increase Their Cancer Risk: Is It From The Radiation During The Primary Procedure, Surveillance Or Both
Matt M. Thompson, MD

2:20 – 2:25 When Renal Arteries Are Covered During EVAR Or F/EVAR, Delayed Kidney Salvage Is Possible Due To Collaterals Keeping The Kidney Viable
James F. McKinsey, MD

2:25 – 2:30 AAA Polymer Sac Filling To Treat Recalcitrant Endoleaks: How Does It Work, Technique And Results
Michael J. Jacobs, MD

2:30 – 2:35 **Panel Discussion**

2:35 – 2:40 At What Diameter Do Internal Iliac (Hypogastric) Aneurysms Rupture: It Is Larger Than Commonly Thought: Inflow Occlusion Into The Hypogastric Aneurysm Alone Is Inadequate Treatment
Maarit Venermo, MD, PhD

2:40 – 2:45 Technical Tips For Placement Of An IBD After Prior EVAR: Why Is It Difficult And How To Overcome The Difficulty
Gustavo S. Oderich, MD

2:45 – 2:50 When Are Parallel Grafts The Best Way To Preserve Hypogastric Flow With Common Iliac Aneurysms
Vicente Riambau, MD, PhD

2:50 – 2:55 What Branch Stent-Grafts And Techniques Should Be Used For Parallel (Sandwich) Grafts To Revascularize Hypogastric Arteries: When Are Such Grafts The Only Way To Do So Because IBDs Won't Work
Claude Mialhe, MD

2:55 – 3:00 With IBDs, Are Self-Expanding Or Balloon Expanding Covered Stents Best For The Hypogastric Branch: Based On Results Of 900 Patients In The ELVIS Registry
Fabio Verzini, MD, PhD

3:00 – 3:05 How To Prevent And Treat Spinal Cord Ischemia (SCI) With Endovascular TAAA Repairs
Salvatore T. Scali, MD

3:05 – 3:10 Kissing Covered Stents To Facilitate EVAR In AAA And Other Aortic Disease Patients With Small Necks And Small Iliac Access Arteries: Technique And Results
Guangqi Chang, MD

3:10 – 3:15 Panel Discussion

**3:15 – 3:25 Break – Visit Exhibits And Pavilions
(2nd and 3rd Floors)**

SESSION 21 (Trianon Ballroom, 3rd Floor)
**HOT NEW TOPICS RELATED TO LOWER
EXTREMITY OR CAROTID TREATMENTS
(4½ MINUTE FAST PACED TALKS)**

*Moderators: Ali F. AbuRahma, MD
John H. Furtek, BS, RT(r)*

3:25 – 3:30 Advantages Of Fusion Imaging Techniques For Iliac And Extremity Interventions: The Philips Vessel Navigator Can Reduce Operator And Patient Radiation Exposure And Contrast Dose And Improve Guidance
Yann Gouëffic, MD, PhD

3:30 – 3:35 10-Year Experience With 4 French Systems For SFA Stenting: Tips, Tricks, Advantages And Durability
Jos C. van den Berg, MD, PhD

3:35 – 3:40 Propensity Matched Comparison Of Endo And Open Bypasses In 3800 Critical Limb Threatening Ischemia (CLTI) Patients: Bypasses Yield Superior Limb Outcomes With Equal Morbidity
William P. Robinson, MD

3:40 – 3:45 Single vs. Multiple Artery Revascularization For Infrapopliteal Interventional Treatments: Is There Proof Fixing Multiple Vessels Is Better
James F. McKinsey, MD

3:45 – 3:50 Delay In Treatment With Diabetic Foot Ulcers With Ischemia Has A Big Negative Impact On Outcomes: What To do About It
Katariina M. Noronen, MD, PhD

3:50 – 3:55 Panel Discussion

3:55 – 4:00 Value Of Antegrade Femoral Artery Access And How To Perform It Safely
Todd Berland, MD

4:00 – 4:05 Extended Value Of The Zilver PTX Drug Eluting Stent In Treating Femoro-Popliteal (Fempop) Occlusive Lesions: New Findings From The Chinese Post-Market Registry
Wei Guo, MD

4:05 – 4:10 Unique Assets Of The Zilver PTX Drug Eluting Stent For Treating Long Complex Fempop Disease: Based On 5-Year Results Of The Japanese Post-Market Surveillance Study
Hiroyoshi Yokoi, MD

4:10 – 4:15 Additional Lessons Learned About The Value Of The Zilver PTX Drug Eluting Stent For Fempop Disease With Calcified Lesions, Poor Runoff And In Patients With Diabetes And Renal Failure: From The 5-Year Results Of The Japanese Post-Market Registry
Kimihiko Komori, MD, PhD

CAROTID TOPICS

4:15 – 4:20 Outcomes Of TCAR (TransCarotid Artery Revascularization) Compare Favorably With Those Of CEA In Symptomatic And Asymptomatic Patients Despite The Higher Medical Risk Of The TCAR Patients: From The SVS/VQI Registry
Marc L. Schermerhorn, MD

- 4:20 – 4:25** A New Implantable Carotid Intraluminal Coil Device (Javelin Vine) To Prevent Embolic Strokes In High Risk Atrial Fibrillation Patients: Device Description And Scientific Rationale
Vivek Reddy, MD
- 4:25 – 4:30** Is Redo CEA More Risky For Stroke And Cranial Nerve Injury Than Primary CEA In Asymptomatic Patients; In Symptomatic Patients: Should This Influence The Choice Of Treatment - Medical Alone Or CAS
Mahmoud B. Malas, MD, MHS
Christopher J. Abularrage, MD
- 4:30 – 4:35** The Natural History Of Patients With Bilateral Internal Carotid Artery (ICA) Occlusion Is Bad: How Can It Be Treated
Ali F. AbuRahma, MD
- 4:35 – 4:40** **Panel Discussion**

SESSION 22 (Trianon Ballroom, 3rd Floor)

HOT NEW TOPICS RELATED TO LOWER EXTREMITY TREATMENTS OR MEDICAL ISSUES (4 ½ MINUTE PAST PACED TALKS)

Moderators: *Jon S. Matsumura, MD*
Iris Baumgartner, MD

- 4:40 – 4:45** Next Version Of The Supera Interwoven Vascular Mimetic Nitinol Stent (Supera Pro From Abbott): Why It Might Be A Game Changer
Brian G. DeRubertis, MD
- 4:45 – 4:50** Value Of The Supera Interwoven Stent (Abbott) For Common Femoral Artery (CFA) Lesions: 1-Year Results
Koen R. Deloose, MD
- 4:50 – 4:55** Meta-Analysis Comparing Results Of Supera Interwoven Stents vs. Drug Eluting Stents For Treatment Of SFA Lesions: Which Is Best And When
Konstantinos Katsanos, MSc, MD, PhD
- 4:55 – 5:00** Optimal Technique (PRESTO) For Deploying Supera Stents To Maximize Their Value And Give The Best Outcomes
Marco G. Manzi, MD
- 5:00 – 5:05** Drug Eluting Stents (DESs - Zilver PTX And Eluvia) Are Changing The Paradigm For Treating Long Complex SFA/Pop Lesions: The Trials And Registries Show Why
Iris Baumgartner, MD
- 5:05 – 5:10** **Panel Discussion**
- 5:10 – 5:15** New Improved Image Guided (OCT) Directional Atherectomy System (Pantharis Lumivascular From Avinger): Advantages And Limitations: A Possible Game Changer
Konstantinos P. Donas, MD
Arne G. Schwindt, MD
- 5:15 – 5:20** 1-Year Results Of The BATTLE Multicenter RCT Comparing Zilver PTX (Cook) DESs vs. Misago (Terumo) Bare Metal Stents (BMSs) For SFA Lesions
Yann Gouëffic, MD, PhD
William A. Gray, MD
- 5:20 – 5:25** Patterns Of Calcification In Below The Knee (BTK) Arteries: Implications For Atherectomy And Vessel Prep
Jos C. van den Berg, MD, PhD
Jihad A. Mustapha, MD

5:25 – 5:30 Optimal Endovascular Technique For Extremely Calcified Femoropopliteal Lesions: Advantages And Precautions: From The CRACK And PAVE Registry
Andrej Schmidt, MD

MEDICAL ISSUES

5:30 – 5:35 Sarcopenia (Loss Of Muscle): A Biomarker Of Frailty: How To Measure It With CT: How Is It Helpful In The Treatment Of Thoracic Aortic Patients
Jon S. Matsumura, MD

5:35 – 5:40 Why We Should Switch From ASA To Plavix For Postoperative And Post-Procedure Care Of Patients Having Lower Extremity Treatments
Iris Baumgartner, MD

5:40 – 5:45 Panel Discussion
End of Program D

WEDNESDAY, NOVEMBER 14, 2018

6:00 A.M. General Registration – Rhinelander Gallery, 2nd Floor

6:00 A.M. Faculty Registration – Morgan Suite, 2nd Floor

6:00 A.M. Assoc and Int'l Guest Faculty Reg – Rhinelander Gallery, 2nd Floor

6:15 A.M. Continental Breakfast – Rhinelander Gallery, 2nd Floor

CONCURRENT WEDNESDAY PROGRAMS

PROGRAM E: SESSIONS 23-30

Progress In Lower Extremity Occlusive Disease And Its Treatment

6:40 A.M. – 6:09 P.M.

Grand Ballroom East, 3rd Floor

PROGRAM F: SESSIONS 31-38

New Developments In Medical, Anti-Atherogenic And Anti-Hypertensive Treatments; Management Of Complications And Endoleaks; Issues And Other Important Topics Related To Outpatient Centers, Government, Reimbursement, Ethics, Practice And Vascular Care

6:40 A.M. – 6:03 P.M.

Grand Ballroom West, 3rd Floor

PROGRAM G: SESSIONS 39-46

More New Developments In Thoracic Aortic Disease, Dissections, TAAAs, Juxta- And Pararenal AAAs, Parallel Grafts, Fenestrated And Branched EVAR (F/B/EVAR), Multilayer Bare Stents, Infrarenal AAAs And EVAR, And Recorded Live Complex Cases

6:45 A.M. – 5:50 P.M.

Trianon Ballroom, 3rd Floor

PROGRAM E (SESSIONS 23-30)

PROGRESS IN LOWER EXTREMITY OCCLUSIVE DISEASE AND ITS TREATMENT

Grand Ballroom East, 3rd Floor

SESSION 23 (Grand Ballroom East, 3rd Floor)

TOPICS RELATED TO GENERALITIES IN THE ENDOVASCULAR AND OPEN TREATMENT OF LOWER EXTREMITY OCCLUSIVE LESIONS

Moderators: Enrico Ascher, MD

Craig M. Walker, MD

- 6:40 – 6:45** Status Of The Global Vascular Guideline For The Treatment Of CLTI And The Global Limb Anatomic Staging System: How Will They Help
Michael S. Conte, MD
- 6:46 – 6:51** How Have Drug Delivery (Coating) And Retrograde Access Changed The Paradigm For SFA/Pop Treatment: The Game Has Changed
Peter A. Schneider, MD
- 6:52 – 6:57** The Class Effect vs. The Specific Device Effect Of Drug Eluting Devices And Other Treatments For Arterial Occlusive Lesions: Why Is The Difference Important
Thomas Zeller, MD
- 6:58 – 7:03** **DEBATE:** In The Near Future Almost All Lower Extremity Treatment For Occlusive Lesions Will Be Endovascular And Endo-First Will Be The Rule
Craig M. Walker, MD
- 7:04 – 7:09** **DEBATE:** Not So: Many Patients Will Be Better Served By A Bypass At Some Point In Their Course, And Some With A Bypass As Their Primary Procedure
Joseph L. Mills, MD
- 7:10 – 7:15** Overuse Of Endo-First Treatment For CLTI With Tissue Necrosis Jeopardizes Last Chance Bypasses And Limb Salvage
Jean-Baptiste Ricco, MD, PhD
- 7:16 – 7:21** Importance Of Adequate Vessel Prep Before Stenting And DCBs: How Best To Do It And Proof Of Its Value
D. Christopher Metzger, MD
- 7:22 – 7:27** Value Of Local Anesthesia In The Adventia Of Arteries During Interventions: How To Do It: For SFA/Pop Lesions
Andrej Schmidt, MD
- 7:28 – 7:33** Optimal Current Treatment For SFA/Pop Occlusive Lesions: What Technology Is Best And When
Gary M. Ansel, MD
- 7:34 – 7:39** Below The Ankle (BTA) PTA: When Is It Helpful: When Harmful: Should 1 Or More Arteries Be Treated; Other Pearls
Roberto Ferraresi, MD
- 7:40 – 7:46** **Panel Discussion**

SESSION 24 (Grand Ballroom East, 3rd Floor)

PROGRESS IN LOWER EXTREMITY STENT BASED TREATMENTS FOR OCCLUSIVE LESIONS

Moderators: *Frank J. Veith, MD*

Dierk Scheinert, MD

- 7:46 – 7:51** Optimal Treatment For Crural Artery Lesions In 2018 In The US And Elsewhere: Value Of Coronary Drug Eluting Stents (DEs): When And How To Use Them
Robert A. Lookstein, MD, MHCDL
- 7:52 – 7:57** Endovascular Stent Treatment Of Common Femoral Artery (CFA) Is Best For All Lesions: Based On The TECCO RCT (Stent vs. Open Endarterectomy): Classification Of Lesions And Subsequent Access Through Stents Is OK
Yann Gouëffic, MD, PhD

- 7:58 – 8:03** Value Of Multiple Short Stents For Treating Fempop Long Lesions: Better Than A Full Metal Jacket: The LOCOMOTIVE Trial Of Vascuflex System (From B. Braun)
Thomas Zeller, MD
Peter C.J. Goverde, MD
- 8:04 – 8:09** New Findings From The Zilver PTX DES 5-Year RCT And Other Studies Show The Advantages Of This Stent For Fempop Lesions
Michael D. Dake, MD
- 8:10 – 8:15** Value And Limitations Of Zilver PTX DESs: How Do They Change The Pattern And Volume Of In-Stent Restenosis (ISR) Compared To Other Stents
Gary M. Ansel, MD
- 8:16 – 8:21** ZILVER PASS RCT Comparing ZILVER PTX DES To PTFE Fempop Bypasses: For TASC C And D Lesions: Zilver PTX Is As Good Or Better At 2 Years
Marc Bosiers, MD
Koen R. Deloose, MD
- 8:22 – 8:27** Progress In The Use Of The Supera Stent (Vasculomimetic Implant-VMI From Abbott) For Long Complex Fempop Lesions: When Is It The Best Stent And When Does Use With A DCB Help: Technical Tips: From The DAWN Trial
Peter C.J. Goverde, MD
Dierk Scheinert, MD
- 8:28 – 8:33** 2-Year Results Of The RAPID RCT Comparing Supera Stent Treatment For SFA Lesions With And Without A DCB
Jean-Paul de Vries, MD, PhD
- 8:34 – 8:39** MAJESTIC DES Trial: 3-Year Results For Treatment In Superficial Femoral And Proximal Popliteal Lesions: How Does Eluvia Differ From Other DES
Stefan Müller-Hülsbeck, MD
Thomas Zeller, MD
Dierk Scheinert, MD
- 8:40 – 8:45** IMPERIAL Head To Head RCT: 1 Year Results Of The Eluvia DES vs. Zilver PTX For Fempop Lesions
William A. Gray, MD
Andrew Holden, MBChB
- 8:46 – 8:51** Status Of Bioresorbable DESs For Treating BTK Arteries: Though They Failed In The Coronary Arteries They Show Promise In The Leg: The ABSORB BTK Trial 4-Year Results Show Why
Ramon L. Varcoe, MBBS, MS, PhD
- 8:52 – 8:58** **Panel Discussion**

SESSION 25 (Grand Ballroom East, 3rd Floor)

MORE TOPICS RELATED TO COMPLEX LOWER EXTREMITY DISEASE AND ITS TREATMENT: ATHERECTOMY, LITHOPLASTY, OVERCOMING CALCIFICATION BELOW THE KNEE (BTK), TIBIAL ARTERY TREATMENTS, AND COMBINATIONS OF TREATMENTS

Moderators: *Joseph L. Mills, MD*
Barry T. Katzen, MD

- 8:58 – 9:03** Atherectomy 2018: When Indicated; Which Device(s) Are Best; Downsides; Precautions; Are Complementary DCBs Necessary
Lawrence A. Garcia, MD

- 9:04 – 9:09** Histological Evaluation Of Adventitial Injury From Directional Atherectomy: Value Of OCT Guidance
Theodosios Bisdas, MD
- 9:10 – 9:15** Debulking Atherectomy: Is There Proof It Has Value: In What Circumstances: Which Device Is Best And Why
Konstantinos Katsanos, MSc, MD, PhD
- 9:16 – 9:21** Importance Of Debulking And Other Lesion Preparation Strategies With All Drug Eluting Treatments: Why It Is Critical
Erwin Blessing, MD
- 9:22 – 9:27** Value Of Intravascular Lithotripsy (Shockwave Medical) With And Without DCBs For Treatment Of Calcified Lesions: Single Center Studies And The DISRUPT I, II And III Trial Results
Gunnar Tepe, MD
Andrew Holden, MBChB
Thomas Zeller, MD

BTK TREATMENTS

- 9:28 – 9:33** Present And Future Status Of DCBs: Successes, Failures, Adjuncts Needed, Problems And Solutions: They Will Have A Role In All Vascular Beds Including BTK Arteries
Brian G. DeRubertis, MD
Krishna J. Rocha-Singh, MD
- 9:34 – 9:39** Shockwave Intravascular Lithotripsy In Calcified Tibial Artery Lesions: How Well Does It Work
Andrew Holden, MBChB
Thomas Zeller, MD
- 9:40 – 9:45** DCBs vs. DESs For SFA/Pop Lesions: Which Is Best And When With Midterm Follow-Up: From The DRASTICO Trial
Francesco Liistro, MD
- 9:46 – 9:51** Combination Lesion Treatment With Passeo-18 Lux DCB And Pulsar-18 Uncoated Stent: Advantages And Good Results
Koen R. Deloose, MD
- 9:52 – 9:58** When Is Distal Embolic Protection Needed During Lower Extremity Interventions: How Should It Be Performed
Peter A. Schneider, MD
- 9:58 – 10:04** **Panel Discussion**
- 10:04 – 10:16** **Break – Visit Exhibits And Pavilions (2nd and 3rd Floors)**

SESSION 26 (Grand Ballroom East, 3rd Floor)
NEW DEVELOPMENTS IN DRUG COATED BALLOONS (DCBs), OTHER DEVICES FOR TREATMENT OF LOWER EXTREMITY OCCLUSIVE LESIONS, RANDOMIZED TRIALS (RCTs) AND BTK TREATMENTS

Moderators: *Michael S. Conte, MD*
Antonio Micari, MD, PhD

- 10:16 – 10:21** Impact And Significance Of Downstream Embolization And Restenosis With Different DCBs
Aloke Finn, MD
Renu Virmani, MD

- 10:22 – 10:27** DCBs Are Changing The Landscape And Algorithm For Treating Long Complex SFA/Pop Lesions And Minimizing The Need For Stents: Advantages Of Sirolimus vs. Paclitaxel Coatings
Thomas Zeller, MD
- 10:28 – 10:33** Update On In.Pact SFA I And II RCTs Show Benefit Of In.Pact (Medtronic) DCBs Persisting And Increasing Over POBA At 4 Years With Fem/Pop Lesions
John R. Laird, MD
Peter A. Schneider, MD
Gunnar Tepe, MD
- 10:34 – 10:39** Update On Persistent Benefit Of Lutonix DCB (Bard/BD) For Fempop Lesions As Shown By A RCT vs. Plain Balloon Angioplasty (POBA): Long Lesions (>14 cm) Were Included
Kenneth Rosenfield, MD
Dierk Scheinert, MD
- 10:40 – 10:45** COMPARE Pilot RCT: 1 Year Results Of A Randomized Comparison Of RANGER DCB vs. IN.PACT DCB In Complex SFA Lesions
Dierk Scheinert, MD
- 10:46 – 10:51** Update On ILLUMINATE RCTs With Stellarex DCBs (Spectranetics/Philips): 2- And 3-Year Results For SFA/Pop Lesions And ISR Are Equal To Other DCBs: Advantages Over Other DCBs
Sean P. Lyden, MD
Timothy M. Sullivan, MD
Thomas Zeller, MD
Stefan Müller-Hülsbeck, MD
- 10:52 – 10:57** Lessons Learned From The In.Pact DCB GLOBAL Registry - Chronic Total Occlusion (CTO) Cohort: How To Make DCBs Work Best With CTOs
Marianne Brodmann, MD
Gunnar Tepe, MD
- 10:58 – 11:03** In.Pact DCBs Have Equal Benefits When Treating Long SFA/Pop Lesions As When Treating Shorter Lesions
Antonio Micari, MD, PhD

11:04 – 11:11 Panel Discussion

Moderators: *Sean P. Lyden, MD*
Giancarlo Biamino, MD, PhD

- 11:11 – 11:16** What Is The Long-Term Durability Of The Benefits Of The Different DCBs: What Is The Value Of Spot Stenting Of Residual Stenoses With DCBs
Gunnar Tepe, MD
- 11:17 – 11:22** Present Role For DCBs And DESs For SFA Lesions: Updated Treatment Algorithm And How To Deal With Severe Calcification
Fabrizio Fanelli, MD
- 11:23 – 11:28** Update On Evaluation Of DCBs: When Are They Worthwhile And Advantages Of Different DCBs
Gary M. Ansel, MD

DCBS FOR BTK LESIONS

- 11:29 – 11:34** Value Of DCBs In BTK And Crural Arteries: Reasons For Past Failures: New Technology, New Results And Promising Future Prospects
Francesco Liistro, MD
- 11:35 – 11:40** Value Of Stellarex DCBs (Spectranetics/Philips) In BTK And Infrapopliteal Artery Lesions
Gunnar Tepe, MD

- 11:41 – 11:46** > 1-Year Safety And Effectiveness Results Of Lutonix DCBs (Bard/BD) For Treating BTK And Crural Artery Lesions: Late Breaking Update And 6-Month Results Of Lutonix Below-The-Knee Global DBC IDE RCT Study
Patrick J. Geraghty, MD
Michael K.W. Lichtenberg, MD
- 11:47 – 11:52** Update On Value Of The Chocolate Touch (Restrained) DCB (QT Vascular And TriReme Medical): What Makes It Different And 2-Year Results From The ENDURE Trial
Gunnar Tepe, MD
D. Christopher Metzger, MD
Andrew Holden, MBChB
Wei Guo, MD
- 11:53 – 12:00** **Panel Discussion**
- 12:00 – 1:00** **Lunch Break – 2nd Floor Promenade**
Visit Exhibits And Pavilions (2nd and 3rd Floors)

SESSION 27 (Grand Ballroom East, 3rd Floor)

EXOTIC AND EXTREME NEW TREATMENTS AND TECHNIQUES FOR SEVERE LOWER EXTREMITY OCCLUSIVE DISEASE AND CHRONIC LIMB THREATENING ISCHEMIA (CLTI): DEALING WITH THE “NO OPTION” FOR TREATMENT OR “UNSALVAGEABLE” LIMB AND THE “DESERT FOOT”

Moderators: *Daniel G. Clair, MD*

Giancarlo Biamino, MD, PhD

- 1:00 – 1:05** Is No Option CLTI Ever Real: Yes, But Rarely: How To Decrease The Major Amputation Rate: Open Bypasses Have A Role
Hisham Rashid, FRCS
- 1:06 – 1:11** Primary Open Bypass Is Better Than Endo-First Approach For CLTI Patients With Extensive Gangrene And Advanced Wifi Lesions
Francesco Spinelli, MD
- 1:12 – 1:17** Latest Techniques And New Developments In Treating Leg And Foot Artery Lesions Causing CLTI With Extensive Ischemic Gangrene And Ulceration
Marco G. Manzi, MD
- 1:18 – 1:23** Interventional Strategies For Treating So-Called No Option CLTI Patients: Such Patients Are Becoming Very Rare
Erwin Blessing, MD
- 1:24 – 1:29** PQ (Percutaneous) Transvenous Arterial Fempop Bypass Procedure: Concept And Technique For Performing (Video)
Andrej Schmidt, MD
Dierk Scheinert, MD
James D. Joye, DO
- 1:30 – 1:35** Percutaneous (PQ) Transvenous Fempop Arterial Bypass For Long (> 15 cm) SFA Occlusions: The DETOUR I And II Trial 2-Year Results: When Can It Work And When Can It Not
Sean P. Lyden, MD
Jihad A. Mustapha, MD

ARTERIALIZATION OF FOOT VEINS

- 1:36 – 1:41** Open Surgical Arterial Bypasses To Deep Ankle Veins With Distal Vein Valve Disruption For CLTI With No Distal Target Arteries: Technique And Long-Term Results: It Works
Pramook Mutirangura, FRCS

- 1:42 – 1:47** Percutaneous Deep Vein Arterialization (pDVA) With The LimFlow Device For The No Option Patient With A “Desert” Foot: Technique, Results And Limitations
Steven Kum, MD
Daniel G. Clair, MD
- 1:48 – 1:53** Pros And Cons Of Hybrid Deep Vein Arterialization Of Foot Veins For No Option CLTI Patients: It Can Work But . . .
Roberto Ferraresi, MD
- 1:54 – 1:59** Hybrid Venous Arterialization: What Is It: How To Do It And When To Use It For No Option CLTI Patients
Miguel F. Montero-Baker, MD
- 2:00 – 2:06** **Panel Discussion**

SESSION 28 (Grand Ballroom East, 3rd Floor)

NEW DEVELOPMENTS IN LOWER EXTREMITY TREATMENTS WITH STENT-GRAFTS AND PROSTHETIC BYPASS GRAFTS; PROGRESS IN TREATING IN STENT RESTENOSIS (ISR)

Moderators: *Richard F. Neville, MD*
Kenneth Ouriel, MD, MBA

- 2:06 – 2:11** 8-Year Results Of Heparin Bonded PTFE Viabahn Stent Grafts For The Treatment Of Long TASC C And D Fempop Lesions: Advantages And Limitations
Maria Antonella Ruffino, MD
- 2:12 – 2:17** **DEBATE:** PTFE Grafts With Bonded Heparin (Propaten) Have Patencies Approaching Those Of Saphenous Vein Grafts For Lower Extremity Bypasses: The Bonded Heparin Makes A Difference
Russell H. Samson, MD, RVT
- 2:18 – 2:23** **DEBATE:** Not So: The Heparin Bonding Is Not The Reason For The Good Results: Other Factors Are More Important
Jonathan D. Beard, ChM, MEd
- 2:24 – 2:29** The SUPER B RCT Shows Viabahn Endografts Perform As Well As Open Surgical Fempop Bypass Grafts For 2 Years: Will DCBs To Prevent Edge Stenosis Improve The Viabahn Results
Michel M.P. Reijnen, MD, PhD
- 2:30 – 2:35** What Is The Best Current Treatment For ISR: DCBs Delay Re-Restenosis But There Is Catch-Up (From The COPA CABANA Trial): So What Is The Solution
Gunnar Tepe, MD
- 2:36 – 2:41** Value Of Gore Viabahn Endografts To Treat ISR: Tips And Tricks For Successful Durable Use In This Setting
Marc Bosiers, MD
Koen R. Deloose, MD
- 2:42 – 2:47** New Covered Balloon Expandable Stents: Which Ones Are Available (VBX-Gore; Lifestream-Bard/Becton Dickinson; BeGraft – Bentley): Advantages And Limitations Of Each: Tips For Use
Claudio J. Schonholz, MD
- 2:48 – 2:53** Comparison Of 4 Balloon Expandable Covered Stents For Treatment Of Aorto-Iliac Occlusive Lesions: iCAST Or Advanta V12 Atrium (Maquet/Getinge); VBX (Gore); Lifestream (Bard/BD); BeGraft (Bentley); Which, Where And When
Andrew Holden, MBChB
- 2:54 – 3:00** **Panel Discussion**

**3:00 – 3:10 Break – Visit Exhibits And Pavilions
(2nd and 3rd Floors)**

SESSION 29 (Grand Ballroom East, 3rd Floor)

**LOWER EXTREMITY CLTI AND ITS TREATMENT:
WHAT IS ITS BEST TREATMENT; RCTs; METHODS
TO ASSESS FOOT PERFUSION AND TREATMENT
SUCCESS; VALUE OF ANGIOSOME CONCEPT**

Moderators: Gary M. Ansel, MD

Joseph L. Mills, MD

RCTs AND REGISTRIES OF CLTI TREATMENT

3:10 – 3:15 Update On The BEST-CLI RCT Comparing Open And Endo Treatments Of CLTI: Recruitment To Date: Successes And Problems To Date: What Will It Tell Us And When

Matthew T. Menard, MD

Alik Farber, MD

Kenneth Rosenfield, MD

3:16 – 3:21 Status Of The BASIL 2 And 3 RCTs: 2 Compares Crural Vein Bypasses With Endo Treatments; 3 Compares DCBs/DESs With PTA And Uncoated Stents: What Will They Tell Us And When

Robert J. Hinchliffe, MD

Andrew W. Bradbury, MD

3:22 – 3:27 These Trials Will Have Big Problems And May Tell Us Little About Their Primary End Points, But Will Provide Other Valuable Information

Mehdi H. Shishehbor, DO, MPH, PhD

3:28 – 3:33 New Findings From The SPINACH Study Of CLTI Treatments Show Bypass First Is Better With Extensive Gangrene And Infection: Otherwise Endo First Is Justified

Nobuyoshi Azuma, MD

Osamu Iida, MD

3:34 – 3:39 Open Bypass Improves Perfusion More Than Endovascular Treatments: The Angiosome Concept Usually Does Not Matter: When Does It

Maarit Venermo, MD, PhD

3:40 – 3:45 Duplex Ultrasound Is The Best Technique For Following BTK Interventions: Why It Improves Outcomes Big Time

Francesco Liistro, MD

3:46 – 3:52 Panel Discussion

ASSESSING FOOT PERFUSION

3:52 – 3:57 Value Of Lumea Implantable Micro Oxygen Sensors In The Treatment Of CLTI Patients

Miguel F. Montero-Baker, MD

3:58 – 4:03 Can Perfusion Angiography Judge Foot Perfusion And Predict Wound Healing In Patients With CLTI: From The REPEAT Trial

Jean-Paul de Vries, MD, PhD

4:04 – 4:09 Perfusion Angiography (From Philips Health Care) To Assess The Functionality Of Sympathetic Activity And Foot Perfusion: It Is A Strong Predictor For Early Amputation In Ischemic Diabetic Foot Disease And A Way To Assess The Effects Of Revascularization Treatments

Jim Reekers, MD, PhD

- 4:10 – 4:15** How To Measure Foot Perfusion After Tibial Interventions: These Measurements Are More Important Than Angiosomes
Werner Lang, MD
- 4:16 – 4:21** Near Infrared Spectroscopy (NIRS) Is A Novel Non-Invasive Way To Measure Foot Perfusion When Other Methods Fail: How Does It Work And How Does It Help
Paolo Zamboni, MD
- 4:22 – 4:27** **DEBATE:** Angiosome Directed Revascularization Improves Wound Healing With CLTI: When Does It Matter
Richard F. Neville, MD
- 4:28 – 4:33** **DEBATE:** Why The Angiosome Concept Is Irrelevant In Most CLTI Patients With Tissue Necrosis
Jean-Baptiste Ricco, MD, PhD
- 4:34 – 4:39** Pros And Cons About The Angiosome Concept: What Is Its Real Value And How Can It Improve Limb Salvage
Kenneth R. Ziegler, MD
Fred A. Weaver, MD
- 4:40 – 4:45** Angiosomes Have Little Value In Diabetic Limb Salvage: Wifl Staging Is A Better Predictor Of Wound Healing Than “Direct” Revascularization
Christopher J. Abularrage, MD
- 4:46 – 4:52** **Panel Discussion**

SESSION 30 (Grand Ballroom East, 3rd Floor)

NEW DEVELOPMENTS IN THE TREATMENT OF LOWER EXTREMITY INTERMITTENT CLAUDICATION (IC) AND ACUTE LIMB ISCHEMIA (ALI)

Moderators: *Peter L. Faries, MD*
John R. Laird, MD

INTERMITTENT CLAUDICATION

- 4:52 – 4:57** Update On Value And Logistics Of Exercise Treatment For Intermittent Claudication (IC): Things Are Getting Better And Why
Jonathan D. Beard, ChM, MEd
- 4:58 – 5:03** How To Get Patients To Recognize That Exercise And Neuromuscular Stimulation (NMES) Are Good Treatments For IC And To Comply With Them
Alun H. Davies, MA, DM, DSc
- 5:04 – 5:09** A Recently Completed RCT Of Endovascular Revascularization vs. Supervised Exercise For IC: The SUPER Trial Results: Outcomes, QOL And Cost Effectiveness; How Does It Compare With The Other IC RCTs
Mark J.W. Koelemay, MD, PhD
- 5:10 – 5:15** Exercise TcPO₂ Can Distinguish Buttock IC From The Symptoms Of Spinal Stenosis: How Should Buttock IC Be Treated
Manju Kalra, MBBS
- 5:16 – 5:21** New And Current Data On All Cause And Cardiovascular Mortality In Patients With IC And CLTI: Have Recent Improvement In Medical Treatment And Statins Made A Difference
Gert J. de Borst, MD, PhD
- 5:22 – 5:27** Differences In Decision Making For The Treatment Of IC In Europe And The US: Based On Data From The PORTRAIT Registry
Jan M.M. Heyligers, MD, PhD

5:28 – 5:33 Panel Discussion

ACUTE LIMB ISCHEMIA (ALI)

5:33 – 5:38 **DEBATE:** All ALI Patients Should Be Treated With An Endo First Policy And Over 90% Can Be Treated Entirely Endovascularly

Ali Amin, MD, RVT

5:39 – 5:44 **DEBATE:** Not So: Some Patients With ALI Should Have An Open Procedure First And Over 10% Will Require Some Open Component: Which Ones

Joseph L. Mills, MD

5:45 – 5:50 More Effective Treatment Of ALI By Thrombolysis With Microbubbles And Ultrasound

Kak Khee Yeung, MD, PhD

5:51 – 5:56 Current And New Data On Morbidity And Mortality Risks After Lower Extremity Embolectomy/Thrombectomy For ALI Open And Endo: Is It Less Than In The Past And Why

Alik Farber, MD

5:57 – 6:02 Advances In The Endovascular Treatment Of ALI: Equipment, Techniques And Results

Athanasios Katsargyris, MD

Eric L.G. Verhoeven, MD, PhD

6:03 – 6:09 Panel Discussion

End of Program E

PROGRAM F (SESSIONS 31-38)

NEW DEVELOPMENTS IN MEDICAL, ANTI-ATHEROGENIC AND ANTI-HYPERTENSIVE TREATMENTS; MANAGEMENT OF COMPLICATIONS AND ENDOLEAKS; ISSUES AND OTHER IMPORTANT TOPICS RELATED TO OUTPATIENT CENTERS, GOVERNMENT, REIMBURSEMENT, ETHICS, PRACTICE AND VASCULAR CARE

Grand Ballroom West, 3rd Floor

Course Leaders: Michael R. Jaff, DO

Geno J. Merli, MD, MACP

Raghu Kolluri, MD

Mehdi H. Shishehbor, DO, MPH, PhD

Ido Weinberg, MD, MSc

SESSION 31 (Grand Ballroom West, 3rd Floor)

NEW DEVELOPMENTS AND ADVANCES IN MEDICAL AND ANTI-ATHEROGENIC TREATMENTS FOR PATIENTS WITH ARTERIAL DISEASE

Moderators: Mehdi H. Shishehbor, DO, MPH, PhD

Geno J. Merli, MD, MACP

6:40 – 6:45 How Long Should Patients With DVT Be Kept On Anticoagulants: A Review Of The Data

Geoffrey Barnes, MD, MSc

6:46 – 6:51 What Are The New AHA Hypertension Guidelines And Why All PAD Patients Should Be Treated According To These Guidelines

Jeffrey W. Olin, DO

6:52 – 6:57 Benefits Of Cilostazol Before And After Peripheral Endovascular Procedures: What Regimen And Dosage Should Be Given Routinely

Gary M. Ansel, MD

- 6:58 – 7:03** What Is Anacetrapib: Do CETP Inhibitors To Reduce LDL Cholesterol (LDL-C) More Than Statins Have A Role In PAD Patients: What About Ezetemibe (Zetia): How Low An LDL-C Should We Try To Get
Kavita S. Sharma, MD
- 7:04 – 7:09** PCSK-9 Inhibitors: Highlights For The Vascular Specialist In 2018
Pradeep Natarajan, MD, MMSc
- 7:10 – 7:15** **DEBATE:** Statins Are Dangerous Drugs: Lowering LDL-C Does No Good And Is Harmful In Most Patients
Sherif A.H. Sultan, MD, PhD
- 7:16 – 7:21** **DEBATE:** Not So: Lowering LDL-C Levels With Statins And PCSK-9 Inhibitors In At Risk Patients With PAD Prevents Cardiovascular Events And Deaths; It Is Safe And Prolongs Life
Ron Waksman, MD
- 7:22 – 7:27** How Important Is It To Give High Intensity Statins To PAD Patients: How Low Should We Push Their LDL-C, To <50 mg/dL; What About Adding Other Drugs: What About Statins In Older (>80) PAD Patients
Jeffrey S. Berger, MD, MS
Caron B. Rockman, MD
- 7:28 – 7:33** **DEBATE:** What Did The COMPASS RCT Show: After This Trial, Rivaroxaban Plus Aspirin Should Be Given To All PAD Patients To Lower Their Risk Of Stroke, MI And Death: What Doses
Jay Giri, MD, MPH
- 7:34 – 7:39** **DEBATE:** Not So Fast: We Still Need To Know More Before Adding Rivaroxaban For PAD Patients
Brian H. Annex, MD
- 7:40 – 7:46** **Panel Discussion**

SESSION 32 (Grand Ballroom West, 3rd Floor)

MORE ON MEDICAL TREATMENTS AND NEW TECHNIQUES FOR TREATING RESISTANT HYPERTENSION; PREDICTIONS FOR THE FUTURE

Moderators: *David H. Deaton, MD*
Michael R. Jaff, DO

- 7:46 – 7:51** Can Renal Denervation Still Be An Effective Treatment For Resistant Hypertension: Results With The Spyral-HTN Device (Medtronic) In A Sham Controlled RCT Suggest It Can: What About Other Endovascular Treatments
Horst Sievert, MD
- 7:52 – 7:57** The Mobius HD Intra-Arterial Implant (From Vascular Dynamics) To Stimulate Baroreceptor Activity And Lower BP (The CALM-2 Trial): How Does It Work And Results To Date
Kim J. Hodgson, MD
- 7:58 – 8:03** The ROX Coupler To Create An Iliac A-V Fistula And Control Resistant Hypertension: Positive Results Of The CONTROL HTN-2 Sham Controlled RCT: Will Blood Pressure Measurement With Light-Sensitive Finger Photoplethysmography Become A Reality
David H. Deaton, MD
Krishna J. Rocha-Singh, MD
- 8:04 – 8:09** **DEBATE:** Beta Blockers Lower The Postoperative Mortality Of Patients Undergoing Open Repair Of AAAs: What Drug Dose And Timing Should Be Used
Mahmoud B. Malas, MD, MHS

- 8:10 – 8:15** **DEBATE:** The Evidence Supporting The Value Of Peri-Operative Beta Blockers In Lowering Morbidity Of Vascular Procedures Is Weak And They May Be Harmful: What Should We Do: Is It Just A Dosage Problem
Peter Henke, MD
- 8:16 – 8:21** What Is The Optimal Medical Treatment For Patients With CLTI; With PAD: How Much Will Medical Treatment Replace Invasive Interventions By 2028
Michael R. Jaff, DO
- 8:22 – 8:28** **Panel Discussion**
- 8:28 – 8:33** Adherence To Lipid Guidelines (Which Ones) In CLTI Patients Undergoing Open And Endo Revascularization Leads To A Decrease In Mortality And Major Adverse Limb Events (MALEs): How Low Should The LDL-C Be Pushed
Marc L. Schermerhorn, MD
- 8:34 – 8:39** Implications Of The CANTOS Trial Showing That An Anti-Inflammatory Drug (Canakinumab From Novartis) Reduces Strokes, MIs And Deaths Without Changing LDL-C Levels
Jeffrey S. Berger, MD, MS
Caron B. Rockman, MD
- 8:40 – 8:45** PCSK-9 Inhibitor (Evolocumab) Plus Statins Decreases MI, Stroke, MALE And Death More In PAD And Recent MI Patients Than Others: From A FOURIER RCT Trial Subanalysis: What LDL-C Level Should We Aim For
Caron B. Rockman, MD
Jeffrey S. Berger, MD, MS
- 8:46 – 8:51** The Best Antiplatelet And Anticoagulant Medications For Patients With Aggressive PAD: How Important Are LDL-C Levels: When Should Ezetemibe (Zetia) And PCSK-9 Inhibitors Be Added To Statins
Peter Henke, MD
- 8:52 – 8:57** Is There A Future For Bioresorbable Stents In The Coronary Arteries Or Elsewhere
Ron Waksman, MD
- 8:58 – 9:04** **Panel Discussion**

SESSION 33 (Grand Ballroom West, 3rd Floor)
**PROGRESS IN THE MANAGEMENT OF
COMPLICATIONS AND ENDOLEAKS**

Moderators: *Michel Makaroun, MD*
Frans L. Moll, MD, PhD

- 9:04 – 9:09** Retroperitoneal Hemorrhage Is Life-Threatening: Vascular Specialists Should Never Cause It: How To Prevent It: How To Diagnose And Treat It
Russell H. Samson, MD, RVT
- 9:10 – 9:15** Lower Extremity Ischemic Complications With EVAR And F/EVAR: Causes And Treatment
Thomas S. Maldonado, MD

ENDOLEAKS AFTER EVAR

- 9:16 – 9:21** Management Strategies For Type 1a Endoleaks After EVAR: When Can They Be Ignored And When Must They Be Treated: What Treatment Is Best And When
Murray L. Shames, MD

- 9:22 – 9:27** When Can Embolization Techniques Fix Type 1 Endoleaks After EVAR: Which Agents Are Best And Technical Tips
Robert A. Morgan, MD
- 9:28 – 9:33** **DEBATE:** Type 2 Endoleaks With Increasing AAA Sac Size Are Dangerous And Usually Must Be Treated: Here Is The Evidence
Jean-Pierre Becquemin, MD
- 9:34 – 9:39** **DEBATE:** There Is No Evidence That Treating Type 2 Endoleaks Is Beneficial And Such Treatment May Be Harmful
Hence J.M. Verhagen, MD, PhD
- 9:40 – 9:45** Transcaval Embolization Of Type 2 Endoleaks After EVAR: Indications, Technique, Precautions And Results
Clifford M. Sales, MD, MBA
- 9:46 – 9:51** Contrast Enhanced Ultrasound (CEUS) To Facilitate Effective Treatment Of Type 2 Endoleaks
Thanila A. Macedo, MD
Gustavo S. Oderich, MD
- 9:52 – 9:57** When And How To Treat Type 2 Endoleaks: How Often Is Treatment Effective; How Often Is It Not
Marc L. Schermerhorn, MD
- 9:58 – 10:03** Onyx To Treat Type 2 Endoleaks: Technique And Precautions To Do It Safely And Effectively And Be Sure It Gets Into The Nidus
Mark W. Mewissen, MD, RVT
- 10:04 – 10:12** **Panel Discussion**
- 10:12 – 10:28** **Break – Visit Exhibits And Pavilions (2nd and 3rd Floors)**

SESSION 34 (Grand Ballroom West, 3rd Floor)

TRIBUTES TO VASCULAR GREATS; ISSUES RELATED TO A VASCULAR PRACTICE – PROBLEMS TO BE FACED AND HOW TO DEAL WITH THEM AND SUCCEED: ARTIFICIAL INTELLIGENCE AND HISTORY

Moderators: *R. Clement Darling III, MD*
Kim J. Hodgson, MD

A BIT OF HISTORY

- 10:28 – 10:33** My Diversion To Gander, Newfoundland On 9/11/2001 And What It Taught Me: The Play “Come From Away” Brought Back Memories
Klaus D. Mathias, MD

TRIBUTES TO GIANTS

- 10:34 – 10:39** A Tribute To Frank A. Lederle, MD (1952-2018)
Jerry Goldstone, MD
- 10:40 – 10:45** A Tribute To Anthony (Tony) M. Imparato (1922-2018)
Mark A. Adelman, MD

ISSUES FOR VASCULAR SURGEONS

- 10:46 – 10:51** Is The Double Booked Vascular Surgeon A Thing Of The Past: Not Totally: What Are The Limitations
Vincent J. Santo III, MD
- 10:52 – 10:57** White Coat Crime In Vascular Surgery: What Is It And How Can It Be Stopped
Russell H. Samson, MD, RVT

- 10:58 – 11:03** Physical Ailments That Accrue To Vascular Surgeons From Their Work: What Are The Causes: How To Measure And Prevent Them
Samuel R. Money, MD, MBA
- 11:04 – 11:11** **Panel Discussion**
- 11:11 – 11:16** Life After Being A Busy Successful Surgeon: When And How To Stop Operating And Still Have A Useful Enjoyable Life
Simran B. Singh, MD, MBA
- 11:17 – 11:22** How Can Vascular Surgeon-Scientists Survive In Today's Unfriendly DRG/RVU Climate
Peter Henke, MD
- 11:23 – 11:28** Key Personal Qualities That Help One To Achieve Success In Vascular Surgery And Other Vascular Specialties
Tej M. Singh, MD, MBA
- 11:29 – 11:34** Challenges And Keys To Success For Women In Vascular Surgery
Rebeca Reachi Lugo, MD
- 11:35 – 11:40** What Measures Need To Be Taken To Promote The Well-Being Of Vascular Surgeons In Today's Medical Climate
Cynthia K. Shortell, MD

ARTIFICIAL INTELLIGENCE IN MEDICINE

- 11:41 – 11:46** Role Of Artificial Intelligence And Big Data In Health Care: Are Doctors' Jobs In Danger
Ido Weinberg, MD, MSc
- 11:47 – 11:52** How Innovation Is Changing Health Care: Artificial Intelligence, Amazon, Google, Etc. Will Revolutionize Things In the Future
Eugene M. Langan III, MD
- 11:53 – 12:00** **Panel Discussion**
- 12:00 – 1:00** **Lunch Break – 2nd Floor Promenade**
Visit Exhibits And Pavilions (2nd and 3rd Floors)

SESSION 35 (Grand Ballroom West, 3rd Floor)

ISSUES RELATED TO OUTPATIENT CENTERS, PODIATRY, REIMBURSEMENTS, PERFORMANCE AND COST CONTROL

Moderators: *Enrico Ascher, MD*

Manish Mehta, MD, MPH

- 1:00 – 1:05** Office Or Outpatient Centers Are The Best Place To Perform Most Arterial And Venous Interventional Treatments: Precautions And Current Status Of Their Accreditation And Reimbursement
Krishna Jain, MD, PhD
- 1:06 – 1:11** What Is The OEIS (Outpatient Endovascular And Interventional Society); How Can It Help Vascular Surgeons And Specialists And Their Patients
Jeff G. Carr, MD
- 1:12 – 1:17** **DEBATE:** Outpatient Atherectomy For IC (Claudication) Leads To Worse Outcomes And More Amputations Than The Natural History Of The Disease: From Medicare Billing Data
Dipankar Mukherjee, MD
- 1:18 – 1:23** **DEBATE:** Not So: Why Outpatient Atherectomy Should Not Increase Amputation Rates But Should Decrease Them: Why The Medicare Data Is Misleading
Lawrence A. Garcia, MD

1:24 – 1:29 New Concepts In Podiatry Important To Vascular Surgeons/Specialists: Game Changing Single Dose Antibiotic (Dalbavancin) For Foot Infections And How To Avoid Opioids For Pain
Wayne J. Caputo, DPM

1:30 – 1:35 Panel Discussion

REIMBURSEMENT AND COST ISSUES

1:35 – 1:40 What Is Happening With MACRA And The Other Alphabet Soup Entities Impacting On Reimbursement
Timothy F. Kresowik, MD

1:41 – 1:46 Why Endovascular Treatments For CLTI Are More Cost Effective Than Open Surgery Or Amputation In The Drug Eluting Era
Ramon L. Varcoe, MBBS, MS, PhD

1:47 – 1:52 Strategies For Decreasing Costs Without Decreasing Success In A PVD Practice
Robert A. Lookstein, MD, MHCDL

1:53 – 1:58 What Are The Latest Objective SFA-Pop Performance Goals: How Do They Influence Patient Care And Costs
Jack L. Cronenwett, MD

1:59 – 2:04 V-HEALTHY: A Program To Increase Vascular Disease Awareness And The Role And Importance Of Vascular Surgeons: How Does It Work
Manish Mehta, MD, MPH

2:05 – 2:11 Innovation In Vascular Surgery: What Does It Take To Develop A New Treatment And Change The Standard Of Care
Frank J. Criado, MD

2:11 – 2:16 Panel Discussion

SESSION 36 (Grand Ballroom West, 3rd Floor)

MORE ISSUES RELATED TO QUALIFICATIONS, GOVERNMENT, COMPENSATION OR INCOMES, INCENTIVES, PUBLIC REPORTING OF OUTCOMES, PROCEDURAL USAGE AND VALUE OF VASCULAR SURGEONS

Moderators: *Keith D. Calligaro, MD*
Bruce A. Perler, MD, MBA

2:16 – 2:21 Why European Qualifications In Vascular Surgery Will Have Increasing Importance: How Will It Help Vascular Surgeons And Patients
Armando Mansilha, MD, PhD

2:22 – 2:27 What Is Happening With Vascular Device Evaluation And Approval At The FDA: How Is It Helping Vascular Surgeons Develop And Get To Use New Devices
Dorothy B. Abel, BSBME

2:28 – 2:33 How Is The SVS Coding And Government Relations Committees And The SVS PAC Helping Vascular Surgeons' Incomes
Sean P. Roddy, MD

2:34 – 2:39 How To Design A Fair Compensation Package For Academic Vascular Surgeons: It Should Not Just Be About RVUs And DRGs
Mark G. Davies, MD

- 2:40 – 2:45** Pay For Performance (P4P) Incentive Systems Are Flawed: What Frustrations Do They Cause For Vascular Surgeons/Specialists Dealing With High Risk Patients And How Can These Be Overcome
James W. Jones, MD, PhD, MHA
- 2:46 – 2:52** **Panel Discussion**
- 2:52 – 2:57** **DEBATE:** Public Reporting Of Individual Vascular Surgeons And Other Vascular Specialists Is A Good Thing For Patients
Bruce A. Perler, MD, MBA
- 2:58 – 3:03** **DEBATE:** No: Such Reporting Is Bad For Patients, Society And Specialists: Here Is Why
Ian Loftus, MD
- 3:04 – 3:09** Factors Influencing Usage Of Procedures (Like Carotid Revascularizations) By Doctors: Maintenance Of Incomes Is A Major Factor And Could Be Detrimental To Patients
Philip P. Goodney, MD, MS
- 3:10 – 3:15** Why Do Some Alleged Vascular Surgeons Perform 1 Or 2 AAA Repairs Per Year: What Is The Result And How Can The Problem Be Fixed
Jack L. Cronenwett, MD
- 3:16 – 3:21** Urgent Operative Consultations Provided By Vascular Surgeons - Usually To Stop Bleeding: Skills We Have That Others Need: Can Our Value Be Compensated And Is It
Michael Belkin, MD
- 3:22 – 3:27** **Panel Discussion**
- 3:27 – 3:36** **Break - Visit Exhibits And Pavilions (2nd and 3rd Floors)**

SESSION 37 (Grand Ballroom West, 3rd Floor)

ISSUES RELATED TO MALPRACTICE, VASCULAR CARE AND THE VALUE AND WELL-BEING OF VASCULAR SURGEONS

Moderators: *Michel Makaroun, MD*
R. Clement Darling III, MD

- 3:36 – 3:41** How To Neutralize And Unmask Hostile Medical Expert Witnesses And Their Testimony
O. William Brown, MD, JD
- 3:42 – 3:47** Why Is The EPIC EHR System Currently Such A Problem For Vascular Surgeons/Specialists: Can It Be Improved: Are There Better Systems
Timothy F. Kresowik, MD
- 3:48 – 3:53** How To Decrease The Cost Of Vascular Care Delivery For Lower Extremity And EVAR Procedures Without Impairing Quality
Richard J. Powell, MD
- 3:54 – 3:59** How To Let Vascular Patients Share More In Their Treatment Decisions: What Tools Are Available: The OVIDIUS Trial
Dirk T. Ubbink, MD, PhD
- 4:00 – 4:05** EVAR And Carotid Interventions Can Have Durable Good Results In Patients Over 80: How Can Results Be Improved In Elderly Patients
B. Patrice Mwipatayi, MMed, MClinEd
- 4:06 – 4:11** Eliminating Avoidable Disasters In The OR And Managing Them When They Occur
Robert B. McLafferty, MD
- 4:12 – 4:17** **Panel Discussion**

- 4:17 – 4:22** Why We Need To Centralize Vascular Care For AAAs And CLTI: Will It Happen
Michael C. Stoner, MD
- 4:23 – 4:28** How A Certification Plan For Vascular Centers Will Be Structured: Will It Happen And How Will It Help Vascular Surgery
Anton N. Sidawy, MD, MPH
- 4:29 – 4:34** Recognition Of Burnout In Vascular Surgeons: Strategies To Prevent And Overcome It
John (Jeb) W. Hallett, MD
- 4:35 – 4:40** How To Optimize And Reward The Value Of A Vascular Surgeon In A Large Health Care System
Ronald M. Fairman, MD
- 4:41 – 4:46** **Panel Discussion**

SESSION 38 (Grand Ballroom West, 3rd Floor)

ISSUES RELATED TO THE SVS, VQIs, GUIDELINES, TRIALS, ETHICS AND THE JVS

Moderators: *Kenneth Ouriel, MD, MBA*

Anton N. Sidawy, MD, MPH

- 4:46 – 4:51** Current Status, Advantages And Limitations Of The SVS VQI
Larry W. Kraiss, MD
- 4:52 – 4:57** How VQIs Can Be Used To Help Set Ethical Standards
Thomas W. Wakefield, MD
- 4:58 – 5:03** How VQIs Can Help To Develop Good RCTs
Mohammad H. Eslami, MD, MPH
- 5:04 – 5:09** Highlights And Key Messages From The New SVS Practice Guidelines For Care Of AAA Patients
Elliot L. Chaikof, MD, PhD
- 5:10 – 5:15** Highlights And Key Messages From The UK Guidance Document On AAA Treatment
Alun H. Davies, MA, DM, DSc
- 5:16 – 5:21** SVS Guidelines For Hospital Privileges For Vascular Surgeons In The US
Keith D. Calligaro, MD
- 5:22 – 5:27** **Panel Discussion**
- 5:27 – 5:32** Why Registries Can Be Better Than RCTs For Evaluating Vascular Devices
Jean-Baptiste Ricco, MD, PhD
- 5:33 – 5:38** Traditional Clinical Trials In Vascular Disease Have Problems: How Can We Fix This With Bayesian Trial Designs
Charles C. Miller, PhD
- 5:39 – 5:44** Why Do So Many Trials Of Treatments For CLTI Fail: What Is The Best Design To Prevent Failure In This Setting
Mahmood Razavi, MD
- 5:45 – 5:50** Update On Status Of And Improvements In The JVS: How To Review A Paper For The JVS
Peter F. Lawrence, MD
Peter Gloviczki, MD
- 5:51 – 5:56** How To Make A Paper Have The Best Chance Of Getting Published In The JVS Despite A High Rejection Rate
Peter Gloviczki, MD
Peter F. Lawrence, MD
- 5:57 – 6:03** **Panel Discussion**
End of Program F

PROGRAM G (SESSIONS 39-46)
MORE NEW DEVELOPMENTS IN THORACIC
AORTIC DISEASE, DISSECTIONS, TAAAs,
JUXTA- AND PARARENAL AAAs, PARALLEL GRAFTS,
FENESTRATED AND BRANCHED EVAR
(F/B/EVAR), MULTILAYER BARE STENTS,
INFARENAL AAAs AND EVAR, AND RECORDED
LIVE COMPLEX CASES

Trianon Ballroom, 3rd Floor

SESSION 39 (Trianon Ballroom, 3rd Floor)
MORE TOPICS RELATED TO THE THORACIC
AORTA, TEVAR, AORTIC DISSECTIONS AND THEIR
TREATMENT

Moderators: *ShenMing Wang, MD, PhD*
William D. Jordan, Jr., MD

- 6:45 – 6:50** Why Left Subclavian Artery (LSA) Revascularization With TEVAR Is Best Accomplished With A Carotid-To-Axillary Bypass Rather Than By A Carotid-To-LSA Bypass Or Transposition: Technical Tips
Frank J. Criado, MD
- 6:51 – 6:56** System For Preoperative Risk Assessment For TEVAR Outcomes
Richard G.J. Gibbs, FRCS
- 6:57 – 7:02** How Best To Size (Diameter) Endografts For TEVAR: For Treatment Of Aneurysms, TBADs And Traumatic Aortic Injuries
Thomas S. Maldonado, MD
- 7:03 – 7:08** At What Size (Diameter) Should Asymptomatic Thoracic Aortic Aneurysms (TAAAs) Undergo Treatment By TEVAR
Robert J. Hinchliffe, MD
- 7:09 – 7:14** Impact Of TEVAR On Pulsatile Aortic Strain In Acute TBAD: What Is Its Clinical Significance
Frans L. Moll, MD, PhD
- 7:15 – 7:20** **Panel Discussion**
- TBAD RELATED TOPICS**
- 7:20 – 7:25** 4-Year Outcomes Of TBAD Treatment With The Valiant Device (From Medtronic) For TEVAR
Ali Azizzadeh, MD
- 7:26 – 7:31** Invasive Treatment In Patients With Genetically Triggered Aortopathy (Like Marfan's): When Is Endovascular Treatment Acceptable And When Not
Cherrie Z. Abraham, MD
- 7:32 – 7:37** Risk Factors For New Distal Endovascular Graft Induced Re-Entry Tears After TEVAR For TBADs: How To Avoid Them
Ludovic Canaud, MD, PhD
- 7:38 – 7:43** Importance Of The Primary Tear Distance From The LSA In Predicting Aortic Growth With TBADs
William D. Jordan, Jr., MD
- 7:44 – 7:49** When And How To Intervene For Endoleaks And False Lumen Perfusion After TEVAR For TBADs
Manish Mehta, MD, MPH
- 7:50 – 7:55** How Can False Lumen Intentional Placement (FLIP) Of An Endograft Facilitate Repair Of A Chronic TBAD With TAAA Formation: Techniques And Results
William J. Quinones-Baldrich, MD

7:56 – 8:01 Panel Discussion

SESSION 40 (Trianon Ballroom, 3rd Floor)

MORE NEW DEVELOPMENTS IN THE TREATMENT OF LESIONS OF THE ASCENDING AORTA AND THE AORTIC ARCH

Moderators: Joseph S. Coselli, MD

Nicholas J.W. Cheshire, MD

- 8:01 – 8:06** Risk Factors For Retrograde Type A Dissections After TEVAR Procedures And How To Avoid Them And Treat Them
Frank R. Arko, MD
- 8:07 – 8:12** Ascending Aortic Aneurysms Are Over-Diagnosed Using Cardiology Guidelines: When Is The Ascending Aorta Really Aneurysmal
Jes S. Lindholt, MD
- 8:13 – 8:18** Early Multicenter Experience With The Gore Ascending Aortic Off-The-Shelf (OTS) Endograft: Indications, Contraindications, Advantages And Results
Jean Bismuth, MD
- 8:19 – 8:24** Technical Tips For Open Arch Replacement In Type A Aortic Dissections (TAADs) To Facilitate Subsequent TAAA Repair
Christian D. Etz, MD, PhD
- 8:25 – 8:30** Chimney TEVAR (Ch/TEVAR) To Treat Aortic Arch Lesions: Long-Term Good Outcomes And How To Achieve Them
Martin R. Back, MD
- 8:31 – 8:36** How To Prevent Gutter Endoleaks With Arch Chimney Grafts (Ch/TEVAR)
Jan S. Brunkwall, MD, PhD
- 8:37 – 8:43** **Panel Discussion**
- 8:43 – 8:48** New Concepts For Better Understanding Aortic Arch Pathology, Its Progression And Treatment
Santi Trimarchi, MD, PhD
- 8:49 – 8:54** Retrograde Type A Aortic Dissections After TEVAR: Etiologic Factors Can Be Operator Dependent; Device Dependent And/Or Disease Dependent: How To Prevent And Treat Them
Ourlia Preventza, MD
Joseph S. Coselli, MD
- 8:55 – 9:00** Open vs. Endo Arch Reconstructions In 2018: What Is Evidence-Based And What Is Anecdote-Based
Nicholas J.W. Cheshire, MD
- 9:01 – 9:06** Update On The Gore Retrograde Single Branched Endograft Device For Treating Aortic Arch Lesions: Advantages, Precautions And Results
Michael D. Dake, MD
Michel Makaroun, MD
- 9:07 – 9:12** Percutaneous Transapical Approach For Placing Arch And Other Devices: How Is It Possible
Ross Milner, MD
- 9:13 – 9:18** How To Manage A Chronically Diseased Aorta Distal To A Previous Surgical Or Endograft Treated TAAD
Jean-Marc Alsac, MD, PhD
- 9:19 – 9:25** **Panel Discussion**
- 9:25 – 9:40** **Break – Visit Exhibits And Pavilions (2nd and 3rd Floors)**

SESSION 41 (Trianon Ballroom, 3rd Floor)

**MORE ABOUT JUXTA- AND PARARENAL AAAs,
F/B/EVAR, TAAAs, NEW ENDOGRAFTS,
SANDWICH GRAFTS AND HYBRID GRAFTS**

Moderators: *Mark A. Adelman, MD*
Mark A. Farber, MD

9:40 – 9:45 New Advances In Open TAAA Repair Especially After Endovascular Treatment Failures: Technical Tips And Results

Roberto Chiesa, MD

9:46 – 9:51 **DEBATE:** Endovascular Repair Is The Best Treatment For Most TAAAs – Especially With The Availability Of Some Newer Endograft Systems

Mark A. Farber, MD

9:52 – 9:57 **DEBATE:** Not So: Many TAAAs Are Best Treated By Open Surgery: Technical Pearls To Improve Results

Virendra I. Patel, MD, MPH

9:58 – 10:03 Why Open Surgery Is Still The Best Treatment For Juxta- And Pararenal AAAs In Good Risk Patients: Technical Tips

Kimihiko Komori, MD, PhD

10:04 – 10:09 Update On The Sandwich Technique For Treating Complex TAAAs: Technical Tips, Precautions And Results

Armando C. Lobato, MD, PhD

10:10 – 10:15 Endovascular Options For Treating TAAAs: What Off-Label Options Are Safe And Effective

Murray L. Shames, MD

10:16 – 10:21 Propensity Matched Comparison Of F/B/EVAR And Open Repair For TAAAs Shows That Endovascular Treatment Is Best

Piergiorgio Cao, MD

10:22 – 10:27 Tips And Tricks For Performing B/EVAR Without Axillary Access

Stephan Haulon, MD

10:28 – 10:34 **Panel Discussion**

Moderators: *Stephan Haulon, MD*
Ali F. AbuRahma, MD

10:34 – 10:39 Visceral Manifold Endograft System From Medtronic For Treating Complex AAAs And TAAAs: Advantages, Precautions And Midterm Results: When Will It Be Available Commercially

Patrick W. Kelly, MD

10:40 – 10:45 Update On A New Manifold Multibranched Endo Device (Colt Device) For Improving TAAA Treatment: Concept, Advantages And Results

Piotr Szopinski, MD, PhD

10:46 – 10:51 Update On The Spider Hybrid Graft For Partially Open TAAA Repair Without A Thoracotomy: How It Works, Clinical Experience, Advantages And Limitations

Sebastian E. Debus, MD, PhD

10:52 – 10:57 Open Repair For Visceral Segment TAAAs After TEVAR: The Reverse Cactus Operation: A Good Option When Endo Treatment Is Not Possible: Technique And 1-Year Results

Francesco Spinelli, MD

- 10:58 – 11:03** Chimney EVAS (Ch/EVAS) With The Nellix Device For Juxta- And Pararenal AAAs: Tips And Tricks For Performing And Results Of The ASCEND Trials 1 And 2 (IDE)
Ian Loftus, MD
Pete Holt, MD, PhD
- 11:04 – 11:09** Branched EVAR (B/EVAR) Through The False Lumen For Chronic TBADs With TAAAs: Why Is It Necessary: How To Do It And Results
Piotr M. Kasprzak, MD
- 11:10 – 11:15** Adjuncts To Achieve Better Sealing And AAA Exclusion With F/EVAR And Ch/EVAR: Value Of Viabahn BX (Balloon Expandable) Branch Grafts As Shown In An In Vitro Model
Jan D. Blankensteijn, MD
- 11:16 – 11:22** **Panel Discussion**

SESSION 42 (Trianon Ballroom, 3rd Floor)

UPDATE ON MULTILAYER FLOW MODULATING BARE STENTS FOR THE TREATMENT OF PERIPHERAL AND VISCERAL ANEURYSMS, COMPLEX AORTIC ANEURYSMS AND DISSECTIONS

Moderators: *Rodney A. White, MD*
Wayne W. Zhang, MD

- 11:22 – 11:27** Why Multilayer Flow Modulating Bare Stents (From Cardiatis) Are The Treatment Of Choice For Peripheral And Visceral Aneurysms: What Is The Evidence: These Are The Results
Michel Henry, MD
- 11:28 – 11:33** Update On The Value Of Treating Aortic Aneurysms And Dissections With A Combination Of Multilayered Uncovered Stents Together With Covered Stents: Indications, Techniques And Results
Qingsheng Lu, MD
Zaiping Jing, MD
- 11:34 – 11:39** When Is The Multilayered Flow Modulating Bare Stent A Good Treatment For TBADs And The Treatment Of Choice For Penetrating Aortic Ulcers (PAUs): Indications, Precautions And Results
Ralf R. Kolvenbach, MD
- 11:40 – 11:45** Multilayer Flow Modulating Bare Stents: Long-Term Results In Aortic Dissections And Complex AAAs And TAAAs: When Do They Work And When Don't They: From The DRAGON Multicenter Trial
Claude D. Vaislic, MD
- 11:46 – 11:51** Value Of Multilayer Flow Modulating Stents In Treating Complex Aortic Pathology: They Are Effective In Aortic Dissections: What About With Complex AAAs
Ivo Petrov, MD, PhD
- 11:52 – 12:00** **Panel Discussion**
- 12:00 – 1:00** **Lunch Break – 2nd Floor Promenade**
Visit Exhibits And Pavilions (2nd and 3rd Floors)

SESSION 43 (Trianon Ballroom, 3rd Floor)

**MORE INTERESTING TOPICS RELATED TO
INFRARENAL AAAs, STANDARD EVAR AND TBADs**

Moderators: *Frans L. Moll, MD, PhD*
Juan C. Parodi, MD

- 1:00 – 1:05** Off-Label Use Of EVAR Devices For Treating AAAs With Challenging Neck Anatomy Is Safe And Effective Under Certain Conditions: What Are They
Martin Malina, MD, PhD
- 1:06 – 1:11** Should Mesh Reinforcement Of Abdominal Incisions Be The Standard Of Care For Open AAA Surgery To Prevent Wound Complications: Based On RCTs
Mark J.W. Koelemay, MD, PhD
- 1:12 – 1:17** Multilayer Flow Modulating (MFM) Stents Are A Safe And Effective Option For Treating Complex Type B Aortic Dissections (TBADs): Based On A 4-Year Experience
Victor S. Costache, MD, PhD
- 1:18 – 1:23** EVAR 2's Level 1 Evidence No Longer Applies For Many Reasons: Why EVAR Is Currently Indicated In Many Patients Unfit For Open Repair: Which Ones
Frank E.G. Vermassen, MD, PhD
- 1:24 – 1:29** Of Course EVAR Is Indicated In Many Patients Who Could Not Undergo An Open Repair: This Is An Example Of RCT Level 1 Evidence Being Outdated And No Longer Applicable To Current Practice
Edward Y. Woo, MD
- 1:30 – 1:35** How To Treat Patients With Large AAAs Who Are Unfit For Open Repair In 2018: When Should They Undergo EVAR
Katariina M. Noronen, MD, PhD
- 1:36 – 1:41** Why EVAR 2 Level 1 Evidence May Not Apply In 2018 And Why Patients Unfit For Open Repair May Now Benefit From EVAR
Cynthia K. Shortell, MD
Leila Mureebe, MD
- 1:42 – 1:47** New Insights Into Long-Term Reintervention And AAA Rupture Rates After EVAR And Open Repair: From The SVS VQI
Philip P. Goodney, MD, MS
- 1:48 – 1:54** **Panel Discussion**

SESSION 44 (Trianon Ballroom, 3rd Floor)

**MORE NEW DEVELOPMENTS RELATING TO AAAs
AND EVAR**

Moderators: *Jan D. Blankensteijn, MD*
Edward Y. Woo, MD

- 1:54 – 1:59** The Gamesmanship And Subjectivity Involved In Measuring AAA Diameter: You Can Make It What You Want
Janet T. Powell, MD, PhD
- 2:00 – 2:05** Significance Of Infraarenal Aortas Measuring 25-29 mm In Diameter: They Will Likely Become Aneurysmal And They Require Follow-Up: At What Intervals
Martin Björck, MD, PhD
- 2:06 – 2:11** **DEBATE:** EVAR With Large Diameter Devices (Up To 36 mm) Can Be Effective And Are Associated With Acceptable Risks: Special Tips For Treatment
Michael J. Singh, MD

- 2:12 – 2:17** **DEBATE:** Not So. Large Diameter AAA Necks And Devices Over 28 mm Have Higher EVAR Failure Rates: How Should They Be Treated
Ali F. AbuRahma, MD
- 2:18 – 2:23** EVAR With Large Diameter Devices Have Increased Risks Of Failure: When Should Ch/EVAR Or F/EVAR Be Used Instead Of Standard EVAR With Large Diameter Devices
Jason T. Lee, MD
- 2:24 – 2:29** How And When To Treat Thrombus Within Endografts And The Native Aorta
Barend M.E. Mees, MD, PhD
Geert Willem H. Schurink, MD, PhD
- 2:30 – 2:36** **Panel Discussion**
- 2:36 – 2:41** Value And Limitations Of EVAR For Inflammatory AAAs And Other AAAs Of Rare Etiologies
Furuzan Numan, MD
- 2:42 – 2:47** How Best To Treat Inflammatory AAAs: When Is EVAR Best And When Is It Not
Sonia Ronchey, MD, PhD
- 2:48 – 2:53** What Is The Association Between AAAs, TBADs And Cancer: What Is It Due To
Natzi Sakalihan, MD, PhD
- 2:54 – 2:59** Bare Stent Suprarenal Fixation For EVAR: Is It Harmful Or Beneficial: What Are The Pros And Cons
Claude Mialhe, MD
- 3:00 – 3:05** Fenestrated Iliac Limbs To Preserve Hypogastric Flow When IBDs Won't Work: How To Obtain Them Or Make Them
Afshin Assadian, MD
- 3:06 – 3:11** Do We Have The Right Endograft To Treat AAAs In Women: What Is The Best Device For EVAR In Women: Should Open Repair Be Used More
Sigrid Nikol, MD
- 3:12 – 3:17** EVAR Explantation And Revascularization For Failure And Infection: Technical Tips And Results
Thomas C. Bower, MD
- 3:18 – 3:23** **Panel Discussion**
- 3:24 – 3:30** **Break – Visit Exhibits And Pavilions (2nd and 3rd Floors)**

SESSION 45 (Trianon Ballroom, 3rd Floor)

CHALLENGING RECORDED LIVE CASES AND THOSE EMPLOYING INNOVATIVE TECHNIQUES

Moderators: *Plinio Rossi, MD*

Andrew Holden, MBChB

Carlo Setacci, MD

Fabrizio Fanelli, MD

Frank J. Veith, MD

- 3:30 – 3:40** Internal Iliac Artery Preservation Using Parallel Grafts: Successes And Mistakes
Andrew Holden, MBChB
- 3:40 – 3:50** Hybrid Arterialization Of The Venous System Of The Foot In No Option CLI Patients
Roberto Ferraresi, MD
- 3:50 – 4:00** Complex TAAA Endovascular Repair
Stephan Haulon, MD
- 4:00 – 4:10** Retrograde BTK Micro-Stenting: Initial Experience
Marco G. Manzi, MD

- 4:10 – 4:20** TEVAR: Step-By-Step
Dittmar Böckler, MD
- 4:20 – 4:30** Treatment Of A Type 3B Endoleak With Off-Label Use Of A Device Used In Structural Heart Disease
Jos C. van den Berg, MD, PhD
- 4:30 – 4:40** What Kind Of Drug Do We Need To Treat BTK Arteries In CLI Patients
Marianne Brodmann, MD

SESSION 46 (Trianon Ballroom, 3rd Floor)
RECORDED COMPLEX LIVE CASES FROM LEIPZIG AND LINC; INTERESTING TECHNICAL CHALLENGES AND SOLUTIONS

Moderators: *Dierk Scheinert, MD*
Andrej Schmidt, MD
Giancarlo Biamino, MD, PhD

- 4:40 – 5:50** LINC PROGRAM
Please visit www.veithsymposium.org for updates.
End of Program G

THURSDAY, NOVEMBER 15, 2018

- 6:00 A.M. General Registration – Rhinelander Gallery, 2nd Floor**
6:00 A.M. Faculty Registration – Morgan Suite, 2nd Floor
6:00 A.M. Assoc and Int'l Guest Faculty Reg – Rhinelander Gallery, 2nd Floor
6:15 A.M. Continental Breakfast – Rhinelander Gallery, 2nd Floor

CONCURRENT THURSDAY PROGRAMS

PROGRAM H: SESSIONS 47-54

New Or Updated Techniques And Concepts; Advances In F/B/EVAR And Parallel Grafts For Complex AAAs; Tribute To Our Military; New Developments In The Treatment Of Ruptured AAAs; More Hot Aortic Topics; New Developments In Telemedicine, Prevention Of Contrast Renal Toxicity, And Radiation Safety

6:45 A.M. – 6:00 P.M.

Grand Ballroom East, 3rd Floor

PROGRAM I: SESSIONS 55-62

New Devices For Standard EVAR And More Complex AAA Endovascular Treatments, TEVAR And TAAA Repair; New Lower Extremity Treatments And Devices; Updates On Endoanchors And New Devices For Clot Removal

6:40 A.M. – 5:44 P.M.

Grand Ballroom West, 3rd Floor

PROGRAM J: SESSIONS 63-67

Superficial Venous Disease

7:00 A.M. – 2:05 P.M.

Trianon Ballroom, 3rd Floor

Course Leaders: *Jose I. Almeida, MD, RPVI, RVT*

Lowell S. Kabnick, MD, RPhS

Kenneth Ouriel, MD, MBA

Thomas W. Wakefield, MD

PROGRAM K: SESSIONS 68-70

Additional Interesting Or Late Breaking Hot Topics In The Treatment Of Aortic, Lower Extremity And Carotid Disease

2:25 P.M. – 5:30 P.M.

Trianon Ballroom, 3rd Floor

PROGRAM H (SESSIONS 47-54)

NEW OR UPDATED TECHNIQUES OR CONCEPTS;
ADVANCES IN F/B/EVAR & PARALLEL GRAFTS
FOR COMPLEX AAAS, TRIBUTE TO OUR MILITARY;
NEW DEVELOPMENTS IN THE TREATMENT OF
RUPTURED AAAS; MORE HOT AORTIC TOPICS; NEW
DEVELOPMENTS IN TELEMEDICINE, PREVENTION
OF CONTRAST RENAL TOXICITY AND RADIATION
SAFETY

Grand Ballroom East, 3rd Floor

SESSION 47 (Grand Ballroom East, 3rd Floor)

EXCITING NEW OR UPDATED TECHNIQUES,
CONCEPTS AND TECHNOLOGIES

Moderators: *Kenneth Ouriel, MD, MBA*

Jerry Goldstone, MD

- 6:45 – 6:50** New In Vitro System For Evaluating Optimal Techniques, Main And Branch Endografts, Sizing, Etc. For Ch/EVAR: How It Will Improve Results And Decrease Complications By Leading To Standardized Techniques And Endograft Components
Konstantinos P. Donas, MD
Taneva Gergana, MD
Martin J. Austermann, MD
Giovanni Torsello, MD
- 6:51 – 6:56** Pudendal Angioplasty (PTA) For Erectile Dysfunction: How To Diagnose It To Optimize Results Of Treatment
Frederic A. Baumann, MD
- 6:57 – 7:02** Non-Interventional Management Of CLTI: With Optimal Medical Treatment And Good Wound Care Many Amputations Can Be Prevented: When Is It The Best And Most Cost Effective Treatment
William A. Marston, MD
- 7:03 – 7:08** **DEBATE:** There Is A Future For Stem Cell Technology For Treating CLTI: What Does It Depend On
Dong-ik Kim, MD
- 7:09 – 7:14** **DEBATE:** There Is No Future For Stem Cell Technology To Treat CLTI: Sequential Compression Is Better And Cheaper And Beats Revascularization In Some Cases
Sherif A.H. Sultan, MD, PhD
- 7:15 – 7:20** Update On Arterial Reconstructions With Bioengineered Vascular Grafts: How Well Are They Working
Jeffrey H. Lawson, MD, PhD
- 7:21 – 7:26** Why All DCBs Are Not The Same: Underlying Material Differences Are Important: Some Thoughts About Differences Between In.Pact, Lutonix, Stellarex, Ranger, Etc. And How They May Matter
Frank E.G. Vermassen, MD, PhD
- 7:27 – 7:32** Proper Hydration And Supplemental Oral Protein Administration Improves All Lower Extremity Ischemic Symptoms: It May Replace Stenting And Bypasses For Many Patients: The Evidence
Juan C. Parodi, MD
- 7:33 – 7:38** A New Computer Controlled Balloon Catheter To Improve Treatment For Cardiac Arrest And Massive Bleeding: How Does It Work And Results
Lars B. Lönn, MD, PhD

7:39 – 7:44 Update On GraftWorx Implantable Piezoelectric Sensors For Remotely Measuring Vascular Graft And Stent Flows And Other Parameters: When Will They Be Available
Richard F. Neville, MD

7:45 – 7:50 New Exciting Developments In Coronary Artery Evaluation By Non-Invasive FFRCT: Incidence Of Unexpected Lesions In Vascular Patients: Detection Lowers Myocardial Infarction And Mortality Rates: Who Should Get The Test
Christopher K. Zarins, MD

7:51 – 7:58 **Panel Discussion**

SESSION 48 (Grand Ballroom East, 3rd Floor)

ADVANCES IN FENESTRATED AND BRANCHED EVAR (F/B/EVAR) AND PARALLEL GRAFTS FOR COMPLEX AAAs

Moderators: *Frank J. Veith, MD*

Stephan Haulon, MD

7:58 – 8:03 Long-Term Outcomes Of F/EVAR: Where Is The Technology Going
Matthew J. Eagleton, MD

8:04 – 8:09 Where Is F/EVAR Going: Custom-Made By Industry vs. Off-The-Shelf (OTS) Devices vs. Surgeon Modified
Andres Schanzer, MD

8:10 – 8:15 Techniques To Salvage F/EVAR Procedures When The Fenestrations Don't Align With Branch Orifices
Gustavo S. Oderich, MD

8:16 – 8:21 Renal Fenestration Misalignment With F/EVAR Leads To Bad Outcomes: Prevention And Treatment
Thomas L. Forbes, MD

8:22 – 8:27 How To Make Endografts Fit And Align With Branch Orifices Perfectly Using Automated 3D Software From Aortica: It Will Improve Results And Increase F/EVAR Utilization
Benjamin W. Starnes, MD

8:28 – 8:33 Managing Branch Complications Of F/B/EVAR: Incidence And Outcomes
Burkhardt Zipfel, MD, PhD

8:34 – 8:40 **Panel Discussion**

8:40 – 8:45 **DEBATE:** The Evidence For The Success And Durability Of Ch/EVAR Is Poor: F/EVAR Is Clearly The Gold Standard
Tara M. Mastracci, MD

8:46 – 8:51 **DEBATE:** Nonsense: The Evidence To Support The Success And Durability Of Ch/EVAR Is Solid – If The Procedure Is Done Right: Ch/EVAR Is Better Than F/EVAR In Some Circumstances
Konstantinos P. Donas, MD
Jason T. Lee, MD
Giovanni Torsello, MD

8:52 – 8:57 Parallel Grafts Work Well To Treat Aortic Lesions Involving The Visceral Segment And The Arch: The Mid- And Long-Term Results Demonstrate Durability Although Re-Interventions May Be Required
Mario L. Lachat, MD
Felice Pecoraro, MD
Nicola Mangialardi, MD

- 8:58 – 9:03** Conformable Sheaths And Other New Techniques To Simplify And Improve The Outcomes Of F/B/EVAR: Upper Extremity Access May Become Largely Unnecessary
Joshua D. Adams, MD
- 9:04 – 9:09** Comparative Renal Outcomes After F/EVAR, Ch/EVAR And Open Repair: What Is The Best Renal Protective Agent And Regimen
Mark A. Farber, MD
- 9:10 – 9:16** **Panel Discussion**
- 9:16 – 9:26** **Break – Visit Exhibits And Pavilions (2nd and 3rd Floors)**

SESSION 49 (Grand Ballroom East, 3rd Floor)

MORE ABOUT F/B/EVAR AND PARALLEL GRAFTS FOR COMPLEX AAAs AND TAAAs

Moderators: *Timothy A.M. Chuter, DM*
Giovanni Torsello, MD

- 9:26 – 9:31** When Are F/B/EVAR Procedures Better And More Cost Effective Than Open Repairs Of Complex AAAs And TAAAs: The French National Experience
Jean-Pierre Becquemin, MD
- 9:32 – 9:37** 2-Year Comparison Of F/B/EVAR And Ch/EVAR For Complex Aneurysms In A Single Institution: Both Are Effective And Have A Role In Their Treatment: Advantages And Limitations Of Each
James F. McKinsey, MD
- 9:38 – 9:43** F/B/EVAR For Complex AAA Treatment In High Risk vs. Standard Risk Patients: These Procedures Should Be Used To Treat All Anatomically Suitable Patients
Carlos H. Timaran, MD
- 9:44 – 9:49** New Findings From The PERICLES Registry Shed Light On Ways To Improve Outcomes Of Parallel Grafts To Treat Complex Aneurysms
Konstantinos P. Donas, MD
Jason T. Lee, MD
Mario L. Lachat, MD
Giovanni Torsello, MD
David J. Minion, MD
- 9:50 – 9:55** Mid- And Long-Term Data From The PERICLES Registry Show Mortality, Branch Patency And Freedom From Endoleak For Ch/EVAR To Be Similar To Those Of F/EVAR
Jason T. Lee, MD
Konstantinos P. Donas, MD
- 9:56 – 10:01** Tips And Tricks To Facilitate F/EVAR In Challenging Circumstances
Cherrie Z. Abraham, MD
- 10:02 – 10:10** **Panel Discussion**
- 10:10 – 10:15** Advantages And Limitations Of Inner Branches In F/B/EVAR
Eric L.G. Verhoeven, MD, PhD
- 10:16 – 10:21** Preloaded Catheters And Guidewires To Facilitate Branch Access During F/B/EVAR: How Do They Work: Advantages And Disadvantages
Timothy A. Resch, MD, PhD
- 10:22 – 10:27** How To Overcome Difficult Branch Artery Access In Parallel Grafting Techniques: Tips And Tricks
Edward Y. Woo, MD

- 10:28 – 10:33** How To Obtain Percutaneous Axillary Access For F/B/EVAR: It Is Not Simple But It Can Be Safe: How To Prevent Bleeding And Nerve Injury
Luca Bertoglio, MD
Germano Melissano, MD
Roberto Chiesa, MD
- 10:34 – 10:39** Bilateral Common Iliac Aneurysms With Endo Repair Of Complex AAAs Are Troublesome And Associated With Higher Spinal Cord Ischemia And Reintervention Rates
Matthew J. Eagleton, MD
- 10:40 – 10:48** **Panel Discussion**

SESSION 50 (Grand Ballroom East, 3rd Floor)

A TRIBUTE TO OUR MILITARY AND SERVICE PHYSICIANS; TOPICS RELATED TO MILITARY HISTORY, A NATIONAL TRAUMA PLAN, VASCULAR TRAUMA, CONTROL OF HEMORRHAGE AND RESUSCITATIVE ENDOVASCULAR BALLOON OCCLUSION OF THE AORTA (REBOA)

Moderators: Eric A. Elster, MD

Todd E. Rasmussen, MD

- 10:48 – 11:00** The Battle Of Midway During WW II And The Impact It Had On Our Civilization (12-Minute Talk)
Wayne F. Yakes, MD
- 11:01 – 11:08** The US Military's Role In The National Trauma Action Plan To Increase Homeland Security And Our Country's Response To Mass Casualties (7-Minute Talk)
Todd E. Rasmussen, MD
- 11:09 – 11:16** Highlights From The 2018 International Resuscitation Trauma And Bleeding Management (EVTM) Meeting: What Is The EVTm And Why It Is Important (7-Minute Talk)
Tal M. Hörer, MD, PhD
- 11:17 – 11:24** Highlights Of How The US Military Transformed And Improved Combat Casualty Care In Iraq And Afghanistan (7-Minute Talk)
Eric A. Elster, MD
- 11:25 – 11:31** Progress In Civilian And Military Vascular Trauma Care – Endovascular And Open (6-Minute Talk)
Joseph J. DuBose, MD
- 11:32 – 11:38** REBOA Is A New Tool For Resuscitation And Treatment For Medical As Well As Hemorrhagic Cardiac Arrest: Who Should Use It And Can It Help Outcomes (6-Minute Talk)
Tal M. Hörer, MD, PhD
- 11:39 – 11:45** The Military's Experience With Extending The Use Of REBOA To Forward Surgical Settings: How Well Is It Working: Who Is Performing It (6-Minute Talk)
Todd E. Rasmussen, MD
- 11:46 – 11:52** Emerging REBOA Technologies: Lower Profile And Improved Balloon Catheters; Simpler Insertion Methods Without Imaging (Fluoro) And Partial Balloon Occlusion Techniques (6-Minute Talk)
Joseph J. DuBose, MD
- 11:53 – 12:00** **Panel Discussion**
(See Session 85 For More Talks On REBOA)
- 12:00 – 1:00** **Lunch Break – 2nd Floor Promenade**
Visit Exhibits And Pavilions (2nd and 3rd Floors)

SESSION 51 (Grand Ballroom East, 3rd Floor)

RUPTURED AAAs AND TAAAs: RELATED ISSUES AND CONTROVERSIES

Moderators: Frank J. Veith, MD

Roger M. Greenhalgh, MD

- 1:00 – 1:05** Quality Of Life In Survivors After Open And Endo Repair Of Ruptured AAAs (RAAAs): It Is Better After EVAR
Julien G. Sfeir, MD
- 1:06 – 1:11** Longer-Term Results Of The IMPROVE RCT (EVAR vs. Open Repair [OR]) Finally Shows EVAR Is Better Than OR For Ruptured RAAAs: In Terms Of Late Survival, Cost And Fewer Amputations
Janet T. Powell, MD, PhD
Roger M. Greenhalgh, MD
- 1:12 – 1:17** Why Did It Take So Long To Show The Obvious: EVAR Is Superior To OR For The Treatment Of RAAAs If It Can Be Done
Martin Malina, MD, PhD
- 1:18 – 1:23** The IMPROVE RCT Shows EVAR Is Superior To OR For RAAA Treatment: What About The Dutch AJAX RCT Long-Term Results Of EVAR vs. OR
Willem Wisselink, MD
- 1:24 – 1:29** EVAR For RAAAs Is The Best Treatment: All Patients Should Be Treated By Some Endovascular Procedure: The Benefits Are Clear
Benjamin W. Starnes, MD
- 1:30 – 1:35** With Adjuncts (Chimney Grafts And Onyx) 100% Of RAAAs Can Be Treated By EVAR With Low 30-Day Mortality And Turn Down Rates: Technical Tips
Thomas Larzon, MD, PhD
Dieter O. Mayer, MD
Mario L. Lachat, MD
- 1:36 – 1:41** Long-Term Survival After EVAR For RAAAs Is Better Than After Open Repair: What Factors Are Predictive
Felice Pecoraro, MD
Mario L. Lachat, MD
- 1:42 – 1:47** Update On Abdominal Compartment Syndrome (ACS) After EVAR For RAAAs: Its Diagnosis And Treatment Should Be Better Than It Is In Most Centers
Martin Björck, MD, PhD
- 1:48 – 1:54** **Panel Discussion**
- 1:54 – 1:59** **DEBATE:** There Are Criteria Which Allow Preoperative Prediction Of Certain Non-Survival After EVAR Or OR In RAAA Patients: Invasive Treatment Should Be Denied For Such Patients
Benjamin W. Starnes, MD
- 2:00 – 2:05** **DEBATE:** Not So: Non-Survival After EVAR Or OR For RAAAs Cannot Be Predicted With Certainty: Turndown Rates Should Be Extremely Low – Especially If EVAR Is Used For Most Patients
Matthew W. Mell, MD, MS
- 2:06 – 2:11** What Re-Interventions Have Been Required After EVAR For RAAAs In The IMPROVE Trial: How Common Are Type 2 Endoleaks; How Often Are They Fatal
Janet T. Powell, MD, PhD
- 2:12 – 2:17** Predictors Of Bowel (Large And Small) Ischemia After EVAR For RAAAs: When Is Colonoscopy Indicated
Willem Wisselink, MD

- 2:18 – 2:23** Fully Percutaneous EVAR For RAAAs: Advantages, Contraindications And Technical Tips
Roy M. Fujitani, MD
- 2:24 – 2:29** New Developments In Radioactive Sodium Fluoride (18F-FBG) Imaging On PET CT To Predict AAA And TAAA Growth And Rupture
Natzi Sakalihan, MD, PhD
- 2:30 – 2:35** Off-The-Shelf (OTS) Endografts To Treat Ruptured TAAAs: How Often Are They Applicable: Technical Tips And Results
Mauro Gargiulo, MD
Andrea Stella, MD
- 2:36 – 2:42** **Panel Discussion**

SESSION 52 (Grand Ballroom East, 3rd Floor)

MORE INTERESTING HOT AORTIC TOPICS

Moderators: *Manish Mehta, MD, MPH*
Timur P. Sarac, MD

- 2:42 – 2:47** Sandwich Graft Technique For Treating TAAAs: How To Make It Work Even In Urgent Or Ruptured Cases
James F. McKinsey, MD
- 2:48 – 2:53** The Best Branch Bridging Stent-Grafts For F/B/EVAR: What Is Available In The US And Elsewhere: Problems And Unmet Needs
Timothy A.M. Chuter, DM
- 2:54 – 2:59** Value Of Internal Branched Endografts For Treatment Of TAAAs And “Snare Ride” Technique For Difficult Sheath Advancement During F/B/EVAR
Marcelo Ferreira, MD (Power Point Presentation With Synched Audio)
- 3:00 – 3:05** Decades Of EVAR RCTs And Registries: What Do They Tell Us Of Value; What Do They Tell Us That Is Wrong; And What Don't They Tell Us
Frank J. Criado, MD
- 3:06 – 3:11** Changes In AAA Neck Morphology After Standard EVAR, Ch/EVAR And F/EVAR: There Are Differences And Why
Jean-Paul de Vries, MD, PhD
- 3:12 – 3:17** Tips And Tricks To Perform Successful Standard EVAR In AAAs With Severely Angled Necks: Neck Length Is Key
Boonprasit Kritpracha, MD
- 3:18 – 3:23** Technical Tips For Open Retroperitoneal Exposure And Repair Of Complex AAAs: Maneuvers To Make It Relatively Simple
R. Clement Darling III, MD
- 3:24 – 3:32** **Panel Discussion**
- 3:33 – 3:46** **Break - Visit Exhibits And Pavilions (2nd and 3rd Floors)**

SESSION 53 (Grand Ballroom East, 3rd Floor)

NEW TECHNIQUES, TREATMENTS, TECHNOLOGIES AND UPDATES IN TELEMEDICINE, RENAL PROTECTION, ROBOTICS, ETC.

Moderators: *Kenneth Ouriel, MD, MBA*
Glenn Jacobowitz, MD

- 3:46 – 3:51** Robotic Assisted Left Renal Vein Transposition For The Treatment Of Nutcracker Syndrome (Video)
Samuel R. Money, MD, MBA

- 3:52 – 3:57** Telehealth Methods To Improve The Care And Follow-Up Of Vascular Patients: Current Status And Future Potential
John (Jeb) W. Hallett, MD
- 3:58 – 4:03** Value Of Cloud Based Telemedicine To Treat Vascular Patients: Especially In Emergencies Like RAAAs Or Thoracic Aneurysms And Dissections
Nobuyoshi Azuma, MD
- 4:04 – 4:09** Wearable Technologies And Telemonitoring For Vascular Diseases: How To Keep Vascular Patients Out Of Hospitals
Celia Riga, BSc, MBBS, MD
- 4:10 – 4:15** Why Is Genetic Susceptibility To Radiation Injury Important For Doctors, Staff And Patients: How Can It Be Assessed And What Can Be Done About It
Kieran Murphy, MD
- 4:16 – 4:21** NaHCO₃ Plus Hydration Decreases Acute Kidney Failure After EVAR: Based On A Pilot RCT (The HYDRA Trial) Comparing It To Hydration Alone: Why Is It Different From Other Negative NaHCO₃ RCTs
Asif Mahmood, MD
- 4:22 – 4:27** Status Of Left Atrial Appendage Exclusion (Endo And Open) For Stroke Prevention With Atrial Fibrillation: Techniques And Results
Ali Khoynzhad, MD, PhD
- 4:28 – 4:33** Present Status Of The Use Of EVAR Devices For The Treatment Of Aorto-Iliac Occlusive Disease
Jonathan A. Cardella, MD
- 4:34 – 4:39** Why Iliac Branched Devices (IBDs) Do Not Decrease The Incidence Of Ischemic Colitis After Iliac Aneurysm Treatment: Micro-Emboli Not Ischemia Are A Major Cause Of Colon Necrosis In This Setting
Robyn A. Macsata, MD
- 4:40 – 4:45** **Panel Discussion**

SESSION 54 (Grand Ballroom East, 3rd Floor)

NEW CONDITIONS, IDEAS, UPDATED CONCEPTS AND RADIATION SAFETY (4 ½ MINUTE FAST PACED TALKS)

Moderators: *Evan C. Lipsitz, MD, MBA*
Lars B. Lönn, MD, PhD

- 4:45 – 4:50** Radiation Induced Arterial Disease Causing CLTI: Endovascular Treatments Are Often Effective
Palma M. Shaw, MD
- 4:50 – 4:55** Operation “Grey Doc”: Using Retired Vascular Surgeons To Train Residents
Niten Singh, MD
- 4:55 – 5:00** Thin May Be In, But Fat Is Where It’s At: The Obesity Paradox With Vascular Surgical Procedures: Why Moderately Obese Patients Have Better Outcomes
Bruce A. Perler, MD, MBA

CCSVI-CURRENT STATUS

- 5:00 – 5:05** Update On Chronic Cerebrospinal Venous Insufficiency (CCSVI): Although The BRAVE DREAMS RCT Showed No Benefit For Balloon Venoplasty vs. Sham Control, The CCSVI Concept May Have Value In Multiple Sclerosis (MS) Treatment
Paolo Zamboni, MD

- 5:05 – 5:10** Why Venous Balloon Angioplasty Still Has A Role In The Treatment Of MS: Patient Selection
Donald B. Reid, MD
- 5:10 – 5:15** When Is MS Treatable By Venous Interventions: Why The BRAVE DREAMS RCT Is Misleading
Ivo Petrov, MD, PhD
- 5:15 – 5:20** How Does Relief Of Venous Congestion By Venous Angioplasty Relieve Intractable Headaches In Some Patients: How To Select Them
Pierfrancesco Veroux, MD
- 5:20 – 5:25** **Panel Discussion**

**PROGRESS IN RADIATION SAFETY
(5-MINUTE TALKS)**

- 5:25 – 5:30** New Developments In Radiation Safety: How Good Or Bad Is Radiation Protection Gear (Caps And Light-Weight Lead Gowns): Importance Of Gantry Angle In Radiation Exposure
Lindsay Machan, MD (Power Point Presentation With Synched Audio)
- 5:31 – 5:36** Proper Use Of Shields Protects The Eyes From Radiation Damage Whereas Lead Glasses Do So Poorly
Anders Wanhainen, MD, PhD
- 5:37 – 5:42** Radiation To Operators During Complex And Standard EVAR Can Cause Cellular DNA Damage: What Is The Significance And What Can Be Done To Lessen It
Bijan Modarai, PhD
- 5:43 – 5:48** How To Decrease Radiation Exposure To Operators And Assistants During Standard And Complex EVARs
Gustavo S. Oderich, MD
- 5:49 – 5:54** New Techniques To Decrease Radiation Exposure To Surgeons And Staff During Complex Aortic Procedures
Mark A. Farber, MD
- 5:55 – 6:00** **Panel Discussion**
End of Program H

PROGRAM I (SESSIONS 55-62)

NEW DEVICES FOR STANDARD EVAR AND MORE COMPLEX AAA ENDOVASCULAR TREATMENTS, TEVAR AND TAAA REPAIR; NEW LOWER EXTREMITY TREATMENTS AND DEVICES; UPDATES ON ENDOANCHORS AND NEW DEVICES FOR CLOT REMOVAL

Grand Ballroom West, 3rd Floor

SESSION 55 (Grand Ballroom West, 3rd Floor)

NEW OR UPDATED DEVICES FOR STANDARD EVAR, F/EVAR AND ILIAC BRANCHED DEVICES (IBDs) (4 ½ MINUTE FAST PACED TALKS)

Moderators: *Venkatesh G. Ramaiah, MD*

Thomas S. Maldonado, MD

NEW OR UPDATED EVAR DEVICES

- 6:40 – 6:45** EVAR Device With More Cranial Sealing Rings And A New Polymer (From Endologix): Status Of The ALTO Device
Sean P. Lyden, MD

- 6:45 – 6:50** The Ovation Endograft Is An Effective Option For EVAR In Patients With Complex Neck Anatomy Unfit For FEVAR
Gianmarco de Donato, MD
- 6:50 – 6:55** Multicenter Italian Results With The Ovation Endograft For EVAR: Advantages And Limitations: From The EXTREME Trial
Francesco Speziale, MD
- 6:55 – 7:00** Value And 4-Year Results Of The Ovation Endograft For EVAR In Women: The Low Profile Makes A Difference
Martin Storck, MD, PhD
- 7:00 – 7:05** The Altura Double D Endograft Device For EVAR: Advantages, Limitations And 4-Year Results
Dainis K. Krievins, MD
- 7:05 – 7:10** Update On The Treovance Endograft (Terumo Aortic) For EVAR: Advantages And Results From The RATIONALE Registry
Vicente Rimbau, MD, PhD
- 7:10 – 7:15** **Panel Discussion**
- UPDATE ON ILIAC BRANCH DEVICES TO REVASCULARIZE HYPOGASTRIC ARTERIES**
- 7:15 – 7:20** Propensity Matched Comparison Of 2 IBDs (1 From Cook And 1 From Gore): Advantages And Limitations Of Each
Carlo Pratesi, MD
Giovanni Pratesi, MD
- 7:20 – 7:25** New Information With Longer Follow-Up From The Multicenter Trial Of The Gore IBD For Iliac Aneurysms
Darren B. Schneider, MD
- 7:25 – 7:30** Technical Tips And Multicenter Results With The Use Of Bilateral Gore IBDs In Patients With Bilateral Common Iliac Aneurysms
Thomas S. Maldonado, MD
- 7:30 – 7:35** 12-Year Experience With The Cook IBD Show Its Effectiveness And Durability: How To Improve The Poor Results Of Others When There Are Associated Hypogastric Aneurysms: From The pELVIS Registry
Giovanni F. Torsello, MD
Giovanni Torsello, MD
Konstantinos P. Donas, MD
- 7:35 – 7:40** New Developments With The Cook IBD: Experience And Results In >900 Patients: Which Bridging Endograft To The Hypogastric Artery Is Best
Fabio Verzini, MD, PhD
Piergiorgio Cao, MD
- 7:40 – 7:45** Results Of IBDs To Treat Isolated Iliac Artery Aneurysm: When Is It Possible And When Is It Not
Giovanni Pratesi, MD
- 7:45 – 7:50** Tips And Tricks To Treat With An IBD Common Iliac Aneurysms Developing After An EVAR Procedure: It Is Not Simple
James F. McKinsey, MD
- 7:50 – 7:55** **Panel Discussion**
- 7:55 – 8:00** 15-Year Outcomes With Zenith Endografts For Standard Infrarenal EVAR: The Grafts Are Durable
Jade S. Hiramoto, MD

- 8:00 – 8:05** Update On The Fenestrated Anaconda Endograft For F/EVAR: Worldwide Experience From The GLOBAL FACT Registry
Clark J. Zeebregts, MD, PhD
- 8:05 – 8:10** Advantages Of The Gore Excluder Conformable Device (CEXC Device) For EVAR With Unfavorable Neck Anatomy: The European Experience From The EXCEL Registry
Marc R.H.M. van Sambeek, MD, PhD
- 8:10 – 8:15** Early Experience With The New Gore Conformable Excluder With Active Neck Angulation Control: It Provides Better Treatments For AAAs With Severely Angled Necks: How It Works And IDE Trial Results
Robert Y. Rhee, MD
- 8:15 – 8:20** How To Treat Failed Open AAA Repairs And Failed EVARs With The Cook ZFEN Device: Indications, Contraindications And Technical Tips
Andres Fajardo, MD
- 8:20 – 8:25** **Panel Discussion**

SESSION 56 (Grand Ballroom West, 3rd Floor)

NEW AND UPDATED DEVICES FOR ENDOVASCULAR ANEURYSM SEALING (EVAS) AND EVAR FOR STANDARD AND COMPLEX AAAs (4 ½ MINUTE FAST PACED TALKS)

Moderators: *Jeffrey P. Carpenter, MD*
Mark A. Adelman, MD

- 8:25 – 8:30** Downsides (Disadvantages) And Upsides (Advantages) Of Low Profile Devices For EVAR And TEVAR: There Are Tradeoffs
Michel Makaroun, MD

NEW DEVELOPMENTS IN EVAS

- 8:30 – 8:35** Update On The Nellix Endograft For EVAS: How Has Refinement Of The IFU Improved Outcomes: From The FORWARD IDE Trial
Jeffrey P. Carpenter, MD
- 8:35 – 8:40** Importance Of Good Seal Zones And Procedural Accuracy In Getting Good Results With Nellix Endografts And EVAS
Matt M. Thompson, MD
- 8:40 – 8:45** How Does EVAS With The Nellix Device Perform For Treating AAAs In Women: Data From The DEVASS Group
Jan M.M. Heyligers, MD, PhD
- 8:45 – 8:50** Worldwide Update On The Nellix Endograft For EVAS: From The GLOBAL 2 Registry And EVAS IDE 2 Trial: Both Assess New Improvements In The Device And Its IFU
Andrew Holden, MBChB
- 8:50 – 8:55** Value And Limitations Of Using The Nellix Endograft And EVAS To Treat Ruptured AAAs
Thomas Larzon, MD, PhD
- 8:55 – 9:00** Nellix-In-Nellix With Proximal Extension For Failed EVAS: Technique And Multicenter Results
Michel M.P. Reijnen, MD, PhD
- 9:00 – 9:05** How To Preserve Hypogastric Flow With Iliac Aneurysms When Using Nellix EVAS: Technique And Results
Dainis K. Krievins, MD

- 9:05 – 9:10 Panel Discussion**
- 9:10 – 9:15** All-Cause Mortality Is Lower After EVAS Than Standard EVAR: Possible Mechanisms: Is It Because Of A Decreased Post-Implant Inflammatory Response
Marc L. Schermerhorn, MD
- 9:15 – 9:20** The ZFEN And ZFEN Plus Endografts From Cook For F/EVAR: Changes In The ZFEN Plus And Its Advantages, Limitations And Status In The US And Elsewhere
Jason T. Lee, MD
- 9:20 – 9:25** Long-Term Results With The Zenith Alpha AAA Endograft (From Cook): A Low Profile EVAR Device That Is Working
Thomas L. Forbes, MD
- 9:25 – 9:30** Latest 5-Year Results With The INCRAFT Device (From Cordis/Cardinal Health – Recently FDA Approved) For Standard EVAR: Advantages And Limitations
Dierk Scheinert, MD
Giovanni Torsello, MD
- 9:30 – 9:35** Update On The Cook P-Branch OTS Device For Treating Juxta- And Pararenal AAAs: Value, Limitations And Results
Mark A. Farber, MD
- 9:35 – 9:40 Panel Discussion**
- 9:40 – 9:55 Break - Visit Exhibits And Pavilions (2nd and 3rd Floors)**

SESSION 57 (Grand Ballroom West, 3rd Floor)

NEW DEVICES FOR TREATMENT OF ASCENDING AORTIC AND ARCH LESIONS AND AORTIC DISSECTIONS; TEVAR AND CH/TEVAR (4 ½ MINUTE FAST PACED TALKS)

Moderators: *Rodney A. White, MD*
Frank R. Arko, MD

- 9:55 – 10:00** Updated Experience With The Nexus Device For Treating Aortic Arch Lesions: How Does It Work And Midterm Results
Nicola Mangialardi, MD
Mario L. Lachat, MD
- 10:00 – 10:05** Current Status Of Endovascular Treatment Of Ascending Aorta And Arch Lesions: Experience With The Cook And Terumo Aortic Arch Branch Devices And Parallel Grafts
Michael P. Jenkins, MBBS, BSc, MS
- 10:05 – 10:10** Update On The Advantages, Limitations And Midterm Results With The Terumo Aortic 3 Branch Arch Device: What Lesions Can It Treat
W. Anthony Lee, MD
- 10:10 – 10:15** Experience With The New Terumo Aortic Relay Plus DB (Double Branched) Device To Treat Arch Lesions: What Makes It Different And Early Results
Herve Rousseau, MD, PhD
- 10:15 – 10:20** Update On Experience With The Valiant MONA LSA Single Branched TEVAR Device (From Medtronic) To Treat Lesions Involving The Aortic Arch
Eric E. Roselli, MD
Frank R. Arko, MD
- 10:20 – 10:25 Panel Discussion**

- 10:25 – 10:30** 4-Year Experience With The Zenith Alpha Low Profile Endograft For TEVAR: Advantages And Results
Germano Melissano, MD
Giovanni Torsello, MD
Eric L.G. Verhoeven, MD, PhD
- 10:30 – 10:35** New Medtronic Valiant™ Navion Low Profile Endograft For TEVAR: Advantages And Results
Fabio Verzini, MD, PhD
- 10:35 – 10:40** Terumo Aortic Relay Thoracic Endograft For TEVAR In Complex Aortic Pathology With Angles >90°: Advantages And Results
Patrick E. Muck, MD
- 10:40 – 10:45** Advances For Endograft Treatment Of Type A Aortic Dissections: Why And How Are The Next Generation Endografts Better
Naoki Fujimura, MD, PhD
- 10:45 – 10:50** Special Features Of The Cook Zenith Dissection Specific Endograft (TX2) For Treating TBADs: How Does It Decrease Retrograde Type A Dissections And Other Advantages
Bijan Modarai, PhD
- 10:50 – 10:55** Stent-Graft Induced New Entry Tears (SINETs) Are Common Proximally And Distally After TEVAR For TBADs – Especially With Connective Tissue Disease: Cook Has A New Dissection Specific Endograft To Decrease These SINETs: How Does It Work
Anders Wanhainen, MD, PhD
- 10:55 – 11:00** **Panel Discussion**

SESSION 58 (Grand Ballroom West, 3rd Floor)

NEW DEVICES OR TECHNIQUES FOR THORACIC AORTIC LESIONS OR TAAAs (4 ½ MINUTE FAST PACED TALKS)

Moderators: *Gustavo S. Oderich, MD*
Germano Melissano, MD

- 11:00 – 11:05** Update On The Terumo Aortic Relay Thoracic Stent-Graft System For TEVAR: How Important Is Stiffness Of The Device In Determining Ease Of Deployment And Outcomes: Why Relay Is Superior
Vicente Rimbau, MD, PhD
- 11:05 – 11:10** Gore TAG Conformable Thoracic Aortic Endograft With Active Control Of Proximal Angulation: How It Works; Advantages And Results: From The SURPASS Trial
Giovanni Torsello, MD
Martin J. Austermann, MD
- 11:10 – 11:15** When Should The Left Subclavian Artery (LSA) Be Revascularized And When Can It Be Covered During TEVAR: Update From National Inpatient Sample
Wayne W. Zhang, MD
- 11:15 – 11:20** Why The “Stabilize Technique” With Overexpansion Of The Distal Uncovered Stent Component Of The Petticoat Endograft (Proximal Covered, Distal Uncovered) Is A Major Advance In Treating TBADs: When And How To Do It
Germano Melissano, MD
- 11:20 – 11:25** The “Turtle Heading Technique” For Improving Endograft Fixation And Sealing Of TEVARs In Patients With Lesions That Have Difficult Or Short Necks: How Does It Work And Results
Jerry Matteo, MD

11:25 – 11:30 Panel Discussion

NEW ENDOGRAFT DEVICES FOR TAAAs

11:30 – 11:35 Update On The Gore Excluder TAMBE Multibranched Endovascular Device For Treating TAAAs: Recent Technical Modifications And Clinical Experience

Mark A. Farber, MD
Gustavo S. Oderich, MD

11:35 – 11:40 Expanding The Role Of The OTS t-Branch Multibranched Device From Cook For Treating TAAAs Endovascularly

Marcelo Ferreira, MD (Power Point Presentation With Synched Audio)

11:40 – 11:45 How To Perform Endograft Repair Of TAAAs Using Branched Endografts Entirely Via Femoral Access: The Secret Is The Use Of Steerable Sheaths

Tilo Kölbel, MD, PhD

11:45 – 11:50 Value Of An OTS t-Branched Graft To Treat TAAAs: How Often Is It Possible Based On Results From 3 Large Centers

Michel J. Bosiers, MD

11:50 – 11:55 Use Of A Power Wire To Create Fenestrations In A Dissection Flap To Access And Stent Branches Arising From The False Lumen: How To Do It And Equipment Required

Thomas F. Lindsay, MDCM

11:55 – 12:00 Panel Discussion

12:00 – 1:00 Lunch Break – 2nd Floor Promenade

Visit Exhibits And Pavilions (2nd and 3rd Floors)

SESSION 59 (Grand Ballroom West, 3rd Floor)

NEW OR IMPROVED DEVICES FOR TREATING LOWER EXTREMITY LESIONS: STENT-GRAFTS; OTHER ENDOVASCULAR TREATMENTS; PROSTHETIC ARTERIAL GRAFTS; HEPARIN COATED PROSTHETIC GRAFTS

Moderators: *Enrico Ascher, MD*

Eric L.G. Verhoeven, MD, PhD

NEW STENT-GRAFTS

1:00 – 1:05 Viabahn BX Balloon Expandable Stent-Graft (Gore) For SFA Lesions: Indications And 2-Year Results: Advantages And Limitations

D. Christopher Metzger, MD

1:06 – 1:11 Advantages Of Various Covered Stents In The CERAB Procedure For Aorto-Iliac Occlusive Lesions: What Stent-Grafts Work Best In Ch/CERAB Procedures

Peter C.J. Goverde, MD
Michel M.P. Reijnen, MD, PhD

1:12 – 1:17 Advantages Of The Gore VBX Balloon Expandable Stent-Graft For F/EVAR, Ch/EVAR And Aorto-Iliac Occlusive Disease

James F. McKinsey, MD

1:18 – 1:23 Many New Balloon Expandable Stent-Grafts Are Now Available: Why Are They Different: Which Is Best For Various Uses: What About The BeGraft And BeGraft Plus From Bentley

Eric L.G. Verhoeven, MD, PhD

1:24 – 1:29 Panel Discussion

- 1:29 – 1:34** The Phoenix Hybrid Atherectomy System: How It Works And Why It Is Different And Possibly Better Than Older Atherectomy Systems: Indications And Initial Results
George L. Adams, MD
- 1:35 – 1:40** Endovascular Treatment Of Chronically Occluded Saphenous Vein Grafts: A New Treatment Horizon That Can Be Effective: Techniques And Results
Claudio Rabbia, MD
- 1:41 – 1:46** Value Of Drug Eluting Stents (DESS) To Salvage Failed Or Failing Vein Grafts
Benjamin M. Jackson, MD
- 1:47 – 1:52** Comparable Long-Term (4-Year) Outcomes Of Grafts Of Greater Saphenous Vein And PTFE With Bonded Heparin (Propaten) For Tibial Artery Bypasses: Does A Distal Vein Patch Make A Difference
Peter H. Lin, MD
- 1:53 – 1:58** Are Fempop Bypasses With Heparin Bonded PTFE (Propaten) Durable Treatment For Long SFA-Pop Occlusions: When Are They The Best Treatment And Why
Walter Dorigo, MD
Carlo Pratesi, MD
Raffaele Pulli, MD
- 1:59 – 2:04** **Panel Discussion**

SESSION 60 (Grand Ballroom West, 3rd Floor)

NEW OR IMPROVED DEVICES AND DEVELOPMENTS FOR LOWER EXTREMITY ENDOVASCULAR TREATMENT: STENTS, BALLOONS, DCBs, DESS AND TACKS

Moderators: *Timothy M. Sullivan, MD*
Craig M. Walker, MD

- 2:04 – 2:09** The Flex Scoring Catheter (From Ventura Med): A Simple Cost-Effective Method For Lesion Preparation Prior To DCB Use: How It Works, Advantages And Early Results
Thomas Zeller, MD
- 2:10 – 2:15** The Serranator Balloon Catheter (From Cagent Vascular) To Score Lesions, Facilitate Their Dilatation Without Dissection And Possibly Improve Drug Delivery: How It Works And Results Of The PRELUDE Trial
William A. Gray, MD
Krishna J. Rocha-Singh, MD
Andrew Holden, MBChB
Thomas Zeller, MD
- 2:16 – 2:21** The Vanguard IEP Balloon PTA System With An Integrated Embolic Protection Filter: How It Works And When It Should Be Used
Thomas Zeller, MD
- 2:22 – 2:27** The Tigris Dual Component Stent (From Gore): Advantages And 1-Year Results In Treating SFA-Pop Occlusive Lesions: From The Austrian Registry
Martin Werner, MD
- 2:28 – 2:33** More About The Value And Limitations Of The Tigris Dual Component Stent For SFA-Pop Lesion Treatment: What Makes It Different
Maria Antonella Ruffino, MD

2:34 – 2:39 Update On The Value Of The Bullfrog Catheter (From Mercator Medical Systems) To Infuse Dexamethasone Into The Adventitia Of Lesions: Status And Results Of The DANCE Trial And The LIMBO-ATX RCT In Patients With CLTI Due To BTK Lesions
George L. Adams, MD

2:40 – 2:45 Update On The Value Of Tack Assisted Balloon Angioplasty (TOBA) (From Intact Vascular): Results Of The TOBA II Study: Do The Tacks Improve PTA Patency In The Femoropopliteal Segment
Marianne Brodmann, MD
Christian Wissgott, MD
William A. Gray, MD

2:46 – 2:52 **Panel Discussion**

MORE ABOUT NEW OR IMPROVED STENTS AND DCBs

2:52 – 2:57 The Advantages Of The BioMimics 3D Helical Swirling Flow Stent (Veryan Medical): How It Works And Why It Is Better Than Straight Stents
Peter Gaines, MD

2:58 – 3:03 Update On The BioMimics 3D Helical Swirling Flow Stent: The MIMICS-2 Trial Results Show It Works Well With Complex Lesions (CTOs, Heavy Calcification And Long Lesions)
Timothy M. Sullivan, MD

3:04 – 3:09 Based On 3-Year Results, Supera Interwoven Biomimetic Stents (From Abbott) Are Superior For Treating Lesions In Angulated Arteries And Those In The CFA
Rajiv Parakh, MBBS, MS

3:10 – 3:15 Value And Limitations Of The New Smart Flex Stent (From Cordis/Cardinal Health) In Treating Lower Extremity And Iliac Artery Occlusive Lesions
Peter C.J. Goverde, MD

3:16 – 3:21 Progress In Developing A Site Specific Self-Expanding DES For Use In The Crural Arteries: The SAVAL Trial
Miguel F. Montero-Baker, MD
Jihad A. Mustapha, MD

3:22 – 3:27 Experimental And Preclinical Advantages Of A New DCB (From Abbott): The Surmodics DCB
Renu Virmani, MD
Aloke V. Finn, MD

3:28 – 3:33 1-Year Results With The New Kanshas DCB (From Terumo): What Makes It Different And Potentially Better
Michael K.W. Lichtenberg, MD

3:34 – 3:40 **Panel Discussion**

3:40 – 3:54 **Break - Visit Exhibits And Pavilions (2nd and 3rd Floors)**

SESSION 61 (Grand Ballroom West, 3rd Floor)

NEW OR IMPROVED DEVICES AND DEVELOPMENTS TO TREAT ENDOLEAKS AND PREVENT MIGRATION: ENDOANCHORS

Moderators: *Jean M. Panneton, MD*
Mark A. Adelman, MD

- 3:54 – 3:59** 2-Year Results From The ANCHOR Registry Show When Endoanchors (Medtronic) Should Be Used: How They Improve EVAR Results And When They Can Salvage Failed EVARs
William D. Jordan, Jr., MD
Jean-Paul de Vries, MD, PhD
- 4:00 – 4:05** Which Ugly AAA Necks Can Be Treated By Standard EVAR Devices Plus Endoanchors And Which Cannot: What Are The Failure Modes Of Endoanchors And How To Avoid Them
Jean-Paul de Vries, MD, PhD
- 4:06 – 4:11** 2-Year ANCHOR Registry Data Show That Endoanchors Can Prevent Neck Dilatation After EVAR With Self-Expanding Devices
Apostolos K. Tassiopoulos, MD
- 4:12 – 4:17** Tips And Tricks To Use Endoanchors Optimally And Avoid Failures
Giovanni Pratesi, MD
- 4:18 – 4:23** Why Does Cranial Migration Occur With Thoracic Endografts: How Can Endoanchors Prevent It If Used Appropriately
Vicente Rimbau, MD, PhD
- 4:24 – 4:29** Endoanchors Can Improve The Outcomes Of Difficult TEVARs: What Is The Proof They Really Help And How To Use Them
Jean M. Panneton, MD
- 4:30 – 4:35** How To Use Endoanchors To Treat Type 1 Endoleaks After TEVAR And EVAR
Colin D. Bicknell, MD
- 4:36 – 4:42** **Panel Discussion**

SESSION 62 (Grand Ballroom West, 3rd Floor)

NEW OR UPDATED DEVICES OR TECHNIQUES FOR REMOVING IATROGENIC OR DISEASE GENERATED CLOT

Moderators: *James F. Benenati, MD*
Patrick E. Muck, MD

- 4:42 – 4:47** More Effective Techniques Of Thrombolysis With Microbubbles And Ultrasound: Feasibility, Safety And Effectiveness In A Clinical Study (The MUST Trial)
Kak Khee Yeung, MD, PhD
- 4:48 – 4:53** Advantages And Limitations Of The Various Pharmaco-Mechanical Thrombectomy Devices: When And Why Is Each Device The Best One To Use
Guillermo A. Escobar, MD
- 4:54 – 4:59** Improved Endovascular Mechanical Vacuum Assisted Indigo Clot Extraction System From Penumbra: When Is It The Treatment Of Choice For Arterial Thrombo-Embolectomy: From The PRISM Trial
James F. Benenati, MD
- 5:00 – 5:05** Vacuum Assisted Thrombectomy With The Penumbra Indigo System For Visceral And Lower Limb Artery Occlusions
Michele Rossi, MD
- 5:06 – 5:11** Single Session Continuous Aspiration Thrombectomy With The Penumbra Indigo System For Occluded Aortic Stent Grafts And Limbs: Technical Tips, Precautions And Results
Patrick E. Muck, MD

- 5:12 – 5:17** Vacuum Assisted Catheter Based Thrombo-Embolectomy For Acute Limb Ischemia (ALI): How Does It Work And Results: From The INDIAN Registry
Gianmarco de Donato, MD
- 5:18 – 5:23** New Techniques In Endovascular Aspiration Thrombectomy: The World Has Changed For Treatment And Rescue Clot Extraction With Penumbra Indigo Suction Devices In Various Vascular Beds
Claudio J. Schonholz, MD
- 5:24 – 5:29** Tips And Tricks For Thrombo-Embolectomy For Clot Removal From All Arteries Using The Indigo System: How To Measure Success
Scott L. Stevens, MD
- 5:30 – 5:35** Simplifying Treatment Of ALI With The Use Of The Indigo Thrombectomy System: When Is Open Surgery Required
Mazin Foteh, MD
- 5:36 – 5:44** **Panel Discussion**
End of Program I

PROGRAM J (SESSIONS 63–67)
SUPERFICIAL VENOUS DISEASE

Trianon Ballroom, 3rd Floor

Course Leaders: *Jose I. Almeida, MD, RPVI, RVT*
Lowell S. Kabnick, MD, RPhS
Kenneth Ouriel, MD, MBA
Thomas W. Wakefield, MD

SESSION 63 (Trianon Ballroom, 3rd Floor)
VENOUS CLINICAL EXAMINATION AND HEMODYNAMICS

Moderators: *Jose I. Almeida, MD, RPVI, RVT*
Lowell S. Kabnick, MD, RPhS
Thomas W. Wakefield, MD

- 7:00 – 7:04** Introduction To Veins At VEITH
Jose I. Almeida, MD, RPVI, RVT
- 7:05 – 7:10** Classification Of Chronic Venous Disease: CEAP, VCSS And Beyond
Marc A. Passman, MD
- 7:11 – 7:16** Prevalence And Risk Factors For The Chronic Venous Disease – ZEUS Study
Tomasz Urbanek, MD, PhD
- 7:17 – 7:22** Venous Flow And Pressure-Modern Concepts
Seshadri Raju, MD
- 7:23 – 7:28** Physiology Of Venous Return
Brajesh K. Lal, MD
- 7:29 – 7:34** Lower Limb Venous Kinetics And Impact On Venous Drainage
Sergio Giancesini, MD, PhD
- 7:35 – 7:40** Summary Of Thermal Ablation RCTs
Bo G. Eklof, MD, PhD
- 7:41 – 7:46** Venous Symptoms Consensus (SYM Vein)
Armando Mansilha, MD, PhD
- 7:47 – 7:52** Understanding Effects Of External Positive And Negative Pressure On The Venous System
Seshadri Raju, MD
- 7:53 – 7:58** Evidence Summary On The Pathophysiology Of Varicose Veins
Thomas W. Wakefield, MD

- 7:59 – 8:04** What Is The Significance Of Venous Signs And Symptoms In Chronic Venous Disease
Andrew N. Nicolaides, MS, FRCS
- 8:05 – 8:10** Quality Of Life Tools Reflect Disease Severity, But They Can Be Improved
Alun H. Davies, MA, DM, DSc
- 8:11 – 8:16** Analysis Of Biofluids From Patients With CVD
Sarah Onida, MD, PhD
- 8:17 – 8:22** **Panel Discussion**

SESSION 64 (Trianon Ballroom, 3rd Floor)

VENOUS IMAGING TECHNIQUES

Moderators: *William A. Marston, MD*
Kenneth Ouriel, MD, MBA

- 8:23 – 8:28** Optimization Of Duplex Exam Image
Jan M. Sloves, RVT
- 8:29 – 8:34** Can You Predict Venous Severity Based On Reflux Time
William A. Marston, MD
- 8:35 – 8:40** Identifying Reflux Pathways With Duplex Ultrasound Mapping
Neil M. Khilnani, MD
- 8:41 – 8:46** C1 Feeding Vein Treatment Based On The 18mhz US Diagnostics And Imaging: A Valuable Management Approach When Transillumination Or Virtual Reality Imaging Is Not Sufficient
Tomasz Urbanek, MD, PhD
- 8:47 – 8:52** How To Recognize Variants On The Venous Duplex Exam
Neil M. Khilnani, MD
- 8:53 – 8:58** How To Grade Iliac Vein Stenoses
Seshadri Raju, MD
- 8:59 – 9:04** Aspect Ratio: A New Concept For Grading Venous Stenosis
Lowell S. Kabnick, MD, RPhS
- 9:05 – 9:10** The VIDIO Trial Comparing IVUS vs. Multiplanar Venogram For Diagnosing Iliofemoral Vein Obstruction
Paul J. Gagne, MD
- 9:11 – 9:16** What Do The Recent Meta-Analyses Tell Us Of The Effect Of Venoactive Medications On Individual Symptoms In Chronic Venous Disease
Andrew N. Nicolaides, MS, FRCS
- 9:17 – 9:22** Surveillance After Venous Stenting: How And When
Kenneth Ouriel, MD, MBA
- 9:23 – 9:28** MRV And Major Venous Interventions
Mark G. Davies, MD
- 9:29 – 9:34** Thrombus Aging Using MRI
Stephen A. Black, MD
- 9:35 – 9:40** Getting A Look At Inflow With Duplex Ultrasound Prior To Endovascular Reconstruction Of Post-Thrombotic Iliocaval Disease
Jose I. Almeida, MD, RPVI, RVT
- 9:41 – 9:46** **Panel Discussion**

SESSION 65 (Trianon Ballroom, 3rd Floor)

SUPERFICIAL VEIN TREATMENT STRATEGIES AND TECHNIQUES

Moderators: *Peter F. Lawrence, MD*
Lowell S. Kabnick, MD, RPhS

- 9:47 – 9:52** Cryo-Laser And Cryo-Sclerotherapy Techniques (CLACS)
Kasuo Miyake, MD, PhD
- 9:53 – 9:58** Is It Safe To Do GSV Ablation, Phlebectomy And
Cosmetic Sclerotherapy All At Once
Gutenberg A. Gurgel, MD
- 9:59 – 10:04** Step-By-Step: Phlebectomy
Paul Pittaluga, MD
- 10:05 – 10:10** Do You Need To Treat EHIT Or EnHIT 2
Lowell S. Kabnick, MD, RPhS
- 10:11 – 10:16** Venous Ulcers – An Algorithm For Treating Deep
And Superficial Venous Occlusion And Incompetence
– Study Completed
Peter F. Lawrence, MD
- 10:17 – 10:22** Treatment By ASVAL/Saphenous Sparing Technique
Paul Pittaluga, MD
- 10:23 – 10:28** **Panel Discussion**

SESSION 66 (Trianon Ballroom, 3rd Floor)

THERMAL AND NON-THERMAL ABLATION

Moderators: *Edward G. Mackay, MD*
Kathleen D. Gibson, MD

THERMAL AND NON-THERMAL ABLATION – PART 1

- 10:29 – 10:34** Ultrasound Guided Foam Sclerotherapy: What We
Should Know
Jean Luc Gerard, MD
- 10:35 – 10:40** RFA (VenClose): What We Should Know
Edward G. Mackay, MD
- 10:41 – 10:46** RFA (RFiT): What We Should Know
Isaac K. Nyamekye, MD
- 10:47 – 10:52** Secure Trial Update
Mark A. Adelman, MD
- 10:53 – 10:58** Proprietary Polidocanol Microfoam: What We Should
Know
Edward G. Mackay, MD
- 10:59 – 11:04** Glue Ablation For Recurrent Truncal Reflux After
Thermal Ablation
Kursat A. Bozkurt, MD
- 11:05 – 11:10** Using Cyanoacrylate Without Compression: Short
And Midterm Outcome
Kathleen D. Gibson, MD
- 11:11 – 11:16** Contraindications And Limits: Cyanoacrylate
Raghu Kolluri, MD
- 11:17 – 11:22** Contraindications And Limits: MOCA
Michel M.P. Reijnen, MD, PhD
- 11:23 – 11:28** Contraindications And Limits: Laser
Jose I. Almeida, MD, RPVI, RVT
- 11:29 – 11:34** Contraindications And Limits: Proprietary
Polidocanol Microfoam
Kathleen D. Gibson, MD
- 11:35 – 11:40** Contraindications And Limits: Radiofrequency
Ablation
Alan M. Dietzek, MD, RPVI
- 11:41 – 11:46** **Panel Discussion**

Moderators: *Alun H. Davies, MA, DM, DSc*
Lowell S. Kabnick, MD, RPhS

THERMAL AND NON-THERMAL ABLATION – PART 2

- 11:47 – 11:52** Mechanochemical Ablation: The Five-Year Outcome Of A Prospective Trial On 100 Patients With GSV Incompetence
Michel M.P. Reijnen, MD, PhD
- 11:53 – 11:58** Quality Of Life After SeCure PERFect
Kathleen D. Gibson, MD
- 11:59 – 12:04** Comparison Study Of Radiofrequency Procedures
Isaac K. Nyamekye, MD
- 12:05 – 12:10** Results Of The EVRA Randomized Clinical Trial
Alun H. Davies, MA, DM, DSc
- 12:11 – 12:16** Commentary: Results Of The EVRA Randomized Clinical Trial
Raghu Kolluri, MD
- 12:17 – 12:21** **Panel Discussion**
- 12:22 – 1:00** **Lunch Break – 2nd Floor Promenade**
Visit Exhibits And Pavilions (2nd and 3rd Floors)

SESSION 67 (Trianon Ballroom, 3rd Floor)

VENOUS SOCIETAL AND GOVERNANCE

Moderators: *Elna M. Masuda, MD*

Marc A. Passman, MD

- 1:00 – 1:05** CMS Policy Update On Nonthermal Ablation
Harold J. Welch, MD
- 1:06 – 1:11** Appropriateness In Venous Care: Challenges And Solutions
Elna M. Masuda, MD
- 1:12 – 1:17** RUC And Revaluation Of Phlebectomy: Why, How, And Outcome
Sean P. Roddy, MD
- 1:18 – 1:23** What Do You Need To Know About MACRA
Kathleen J. Ozsvath, MD
- 1:24 – 1:29** Is The Vein Center Accreditation Important For MACRA
Kathleen J. Ozsvath, MD
- 1:30 – 1:35** Update On Deep Venous Accreditation
Alan M. Dietzek, MD, RPVI
- 1:36 – 1:41** New European College Of Phlebology Guidelines For Truncal Ablation
Kursat A. Bozkurt, MD
- 1:42 – 1:47** From Standard Vein Center To High Tech Venous Endovascular Suite: Moving Towards The Future
Kasuo Miyake, MD, PhD
- 1:48 – 1:53** Can VQI Be Used As A Benchmark For Setting Ethical Standards
Nicholas H. Osborne, MD, MS
- 1:54 – 1:59** The Principal Agent Dilemma: A Conflict Of Interest In Endovascular Surgery
S. Scott Tapper, MD
- 2:00 – 2:05** **Panel Discussion**
End of Program J

PROGRAM K (SESSIONS 68-70)

ADDITIONAL INTERESTING OR LATE BREAKING HOT TOPICS IN THE TREATMENT OF AORTIC, LOWER EXTREMITY AND CAROTID DISEASE

Trianon Ballroom, 3rd Floor

SESSION 68 (Trianon Ballroom, 3rd Floor)

MORE HOT OR LATE BREAKING TOPICS RELATED TO DISEASES OF THE AORTA OR ITS BRANCHES (4 ½ MINUTE FAST PACED TALKS)

Moderators: *Ali F. AbuRahma, MD*
Keith D. Calligaro, MD

- 2:25 – 2:30** **DEBATE:** Why It Is Time To Abandon 2 Branch F/EVAR For 3 Or 4 Branch F/EVAR
Eric L.G. Verhoeven, MD, PhD
- 2:30 – 2:35** **DEBATE:** Not So: 3 And 4 Branch F/EVARs Should Be Avoided If Possible Because They Result In Higher Complication And Mortality Rates: From The UK GLOBALSTAR Registry
S. Rao Vallabhaneni, MD
- 2:35 – 2:40** Causes Of Lower Extremity Neurologic Impairment After F/EVAR: Prevention And Treatment
Joseph L. Mills, MD
- 2:40 – 2:45** How Onyx Can Eliminate Gutter Endoleaks After Parallel Grafts Used In AAA Repairs: When To Fix And Technical Tips
Ralf R. Kolvenbach, MD
- 2:45 – 2:50** Surveillance Protocol And Reinterventions After F/B/EVAR
Rocco Giudice, MD
- 2:50 – 2:55** Redo F/EVAR For Failed F/EVAR Due To Aortic Neck Degeneration And Dilatation: Technical Tips And Results
Afshin Assadian, MD
- 2:55 – 3:00** **Panel Discussion**
- 3:00 – 3:05** Value Of Parallel Grafts To Treat Chronic TBADs With Extensive TAAAs: Technical Tips And Results
Edward Y. Woo, MD
Tareq M. Massimi, MD
- 3:05 – 3:10** Octopus Technique To Treat Urgent Or Ruptured TAAAs With OTS Components: What Is It, Technical Tips And Results
Jason T. Lee, MD
- 3:10 – 3:15** How To Predict Aortic Wall Damage And Rupture In Aortic Disease: The Role Of Turbulence And How To Measure It
Erno Remsey-Semmelweis, MD
- 3:15 – 3:20** Celiac Compression Syndrome: Myth Or Reality: How To Diagnose It And Treat It
Michael G. Wyatt, MD
- 3:20 – 3:25** Median Arcuate Ligament (Or Celiac Compression) Syndrome: Is It Real And What To Do If There Is Intrinsic Celiac Axis Disease
John F. Eidt, MD
- 3:25 – 3:30** **Panel Discussion**

SESSION 69 (Trianon Ballroom, 3rd Floor)

MORE HOT OR LATE BREAKING TOPICS RELATED TO DISEASES OF THE LOWER EXTREMITY; OPEN SURGERY OR NEW TECHNIQUES (4 ½ MINUTE FAST PACED TALKS)

Moderators: *Neal S. Cayne, MD*
Fred A. Weaver, MD

- 3:30 – 3:35** **DEBATE:** All SFA Lesions Can Be Treated Endovascularly: Should They Be: Open Bypass Should Rarely Be Used
Maxime M.S. Sibe, MD

- 3:35 – 3:40** **DEBATE:** Distal Bypasses Have An Important Role In The Treatment Of CLTI In The Endovascular Era: What Is That Role
Ramesh K. Tripathi, MD
- 3:40 – 3:45** How To Treat Acute Limb Ischemia (ALI) With Only Duplex Ultrasound Control And No Angiography: Feasibility And Advantages
Enrico Ascher, MD
Natalie A. Marks, MD, RPVI, RVT
- 3:45 – 3:50** Unusual Open Surgical Exposures Of Lower Extremity Arteries When Primary Approaches Are Scarred Or Infected: They Facilitate Redo Open Procedures
Neal S. Cayne, MD
Enrico Ascher, MD
Frank J. Veith, MD
- 3:50 – 3:55** Impact Of Glucose Control And Its Regimen On Limb Salvage In Patients Undergoing Endo Or Open Interventions For CLTI
Adam Beck, MD
- 3:55 – 4:00** **Panel Discussion**
- 4:00 – 4:05** How The BEST-CLI Trial Has Changed Our CLTI Practice
Vincent L. Rowe, MD
Fred A. Weaver, MD
- 4:05 – 4:10** Optimal Anticoagulation Regimen For Patients Being Treated For ALI
Timothy K. Liem, MD, MBA
- 4:10 – 4:15** Dorsalis Pedis Entrapment: What Is It And What Is Its Clinical Importance
Roberto Ferraresi, MD
- 4:15 – 4:20** How To Use Optimally The Supera Interwoven Vasculomimetic Stent (Abbott): How Important Is It To Achieving Good Outcomes
D. Christopher Metzger, MD
- 4:20 – 4:25** Why Open Endarterectomy Is Still The Best Treatment For Patients Requiring Invasive Therapy For Common And Deep Femoral Artery Lesions
Jean-Baptiste Ricco, MD, PhD
- 4:25 – 4:30** **Panel Discussion**

SESSION 70 (Trianon Ballroom, 3rd Floor)

HOT OR UPDATED TOPICS RELATED TO THE AORTA, TAKAYASU'S DISEASE, INFECTIONS AND CAROTID DISEASE (4 ½ MINUTE FAST PACED TALKS)

Moderators: *Samuel R. Money, MD, MBA*

Luis A. Sanchez, MD

- 4:30 – 4:35** Update On Status And Results Of The LEOPARD RCT Comparing Outcomes Of AFX (From Endologix) EVAR With Distal Anatomic Fixation vs. EVAR With Standard Proximally Fixed Endografts
Christopher J. Kwolek, MD

VASCULAR GRAFT INFECTION TOPICS

- 4:35 – 4:40** Rifampin Soaked Endografts For Treating Prosthetic Graft Infections: When Can They Work And What Associated Techniques Are Important
Guillermo A. Escobar, MD
- 4:40 – 4:45** Value And Limitations Of Cryopreserved Allografts For The Treatment Of Arterial Prosthetic Graft Infections
Mark K. Eskandari, MD

TAKAYASU'S DISEASE TOPICS

- 4:45 – 4:50** When Treating Takayasu's Disease Lesions, When Are Endovascular Treatments Helpful And When Are Open Surgical Procedures Required: Technical Tips
Samuel R. Money, MD, MBA
- 4:50 – 4:55** With Takayasu's Lesions Requiring Invasive Treatment, When Endo, When Open: Tips And Results
Byung-Boong Lee, MD
- 4:55 – 5:00** **Panel Discussion**
- 5:00 – 5:05** Advantages Of And Results With The Terumo Aortic Multibranch Device For Treating Aortic Arch Lesions: From The US Multicenter Feasibility Trial
Luis A. Sanchez, MD
- 5:05 – 5:10** TIAs And Silent Brain Infarction Before CAS Or CEA Are Predictive Of Poorer Long-Term Patient Survival
Gianluca Faggioli, MD
- 5:10 – 5:15** New Risk Stratification System For High Grade Asymptomatic Carotid Stenoses
Fedor Lurie, MD, PhD
- 5:15 – 5:20** Translumbar Puncture With Advanced Imaging To Gain Retrograde Access To Renal Arteries When Prograde Access Fails During F/EVAR: How To Do It
Stephan Haulon, MD
- 5:20 – 5:25** RAAAs Should Be Treated In A High Volume Center; The German National Registry Data Shows Why
Hans-Henning Eckstein, MD, PhD
- 5:25 – 5:30** **Panel Discussion**
End of Program K

FRIDAY, NOVEMBER 16, 2018

- 6:00 A.M. General Registration – Rhinelander Gallery, 2nd Floor**
6:00 A.M. Faculty Registration – Morgan Suite, 2nd Floor
6:00 A.M. Assoc and Intl Guest Faculty Reg – Rhinelander Gallery, 2nd Floor
6:15 A.M. Continental Breakfast – Rhinelander Gallery, 2nd Floor

CONCURRENT FRIDAY PROGRAMS

PROGRAM L: SESSIONS 71-78

New Developments In The Prevention And Treatment Of Spinal Cord Ischemia (SCI) With TEVAR And TAAA Repairs; Carotid Related Topics: New And Improved Devices And Techniques, Risk And Causes Of Strokes, Disease And Treatment Effects On Cognition, Effects Of Medical Treatment, Timing Of CEA/CAS; CAS Optimism; Updates On Guidelines; Trials; Controversies; Percutaneous Closure Devices And Wound Care

6:50 A.M. – 5:59 P.M.

Grand Ballroom East, 3rd Floor

PROGRAM M: SESSIONS 79-87

New Developments In Popliteal Diseases And Their Treatment; Management Of Infected Arteries, Prosthetic Grafts And EVAR Grafts; Advances In Imaging And Guidance, Medical Conditions And Treatments, Treatment Of Thoracic Outlet Syndromes (TOSs), Vascular Trauma And REBOA; Recorded Challenging Live Cases From Münster And The Mayo Clinic

6:45 A.M. – 5:30 P.M.

Grand Ballroom West, 3rd Floor

PROGRAM N: SESSIONS 88-92

Deep Venous Disease

8:05 A.M. – 5:04 P.M.

Trianon Ballroom, 3rd Floor

Course Leaders: Jose I. Almeida, MD, RPVI, RVT
Lowell S. Kabnick, MD, RPhS
Kenneth Ouriel, MD, MBA
Thomas W. Wakefield, MD

PROGRAM O: SESSIONS 93-96

Diagnosis And Treatment Of Vascular Malformations

7:00 A.M. – 12:00 P.M.

Gramercy Suites East and West, 3rd Floor

Course Leaders: Wayne F. Yakes, MD
Krassi Ivancev, MD, PhD
Robert L. Vogelzang, MD

PROGRAM L (SESSIONS 71-78)

NEW DEVELOPMENTS IN THE PREVENTION AND TREATMENT OF SPINAL CORD ISCHEMIA (SCI) WITH TEVAR AND TAAA REPAIRS; CAROTID RELATED TOPICS: NEW AND IMPROVED DEVICES AND TECHNIQUES, RISK AND CAUSES OF STROKES, DISEASE AND TREATMENT EFFECTS ON COGNITION, EFFECTS OF MEDICAL TREATMENT, TIMING OF CEA/CAS AND CAS OPTIMISM, UPDATES ON GUIDELINES, TRIALS, CONTROVERSIES; NEW AND UPDATED TECHNIQUES AND CONCEPTS; PERCUTANEOUS CLOSURE DEVICES AND WOUND CARE

Grand Ballroom East, 3rd Floor

SESSION 71 (Grand Ballroom East, 3rd Floor)

NEW DEVELOPMENTS IN THE PREVENTION AND TREATMENT OF SPINAL CORD ISCHEMIA (SCI) ASSOCIATED WITH TEVAR AND TREATMENT OF TAAAs

Moderators: *Germano Melissano, MD*
Firas F. Mussa, MD

- | | |
|--------------------|--|
| 6:50 – 6:55 | The Value Of Hyperbaric Oxygen As A Rescue Treatment For SCI After F/B/EVAR For TAAAs
<i>Thomas F. Lindsay, MDCM</i> |
| 6:56 – 7:01 | Update On The Value Of Tight Glucose Control To Minimize SCI From TEVAR And F/B/EVAR Treatment Of TAAAs
<i>Jade S. Hiramoto, MD</i> |
| 7:02 – 7:07 | Why Spinal Fluid Drainage Should Not Be Used Routinely In All TAAA Repairs: Why Its Use Should Be Restricted To Specific Indications Or SCI Symptoms: What Are These Indications
<i>Carlos H. Timaran, MD</i> |
| 7:08 – 7:13 | Spinal Cord Hematoma After Spinal Fluid Drainage: Etiology, Clinical Course, Prevention And Treatment
<i>Hamdy Awad, MD</i> |
| 7:14 – 7:19 | What Are The Complications Of Spinal Fluid Drainage: How Can They Be Prevented: Optimal Strategies For Preventing Or Minimizing SCI
<i>Gustavo S. Oderich, MD</i> |

- 7:20 – 7:25** New Developments In The Prevention And Treatment Of SCI With Open And Endo TAAA Repairs
Geert Willem H. Schurink, MD, PhD
Michael J. Jacobs, MD
- 7:26 – 7:31** Current Status Of Ischemic Preconditioning To Decrease SCI With TAAA Repairs: Status Of Minimally Invasive Staged Segmental Artery Coil Embolization (MIS2ACE) And Studies To Evaluate It: The PAPA-ARTIS Trial
Christian D. Etz, MD, PhD
- 7:32 – 7:37** Technical Issues And Experience With MIS2ACE In 50 Patients Undergoing Endo TAAA Repair
Daniela Branzan, MD
Andrej Schmidt, MD
Christian D. Etz, MD, PhD
- 7:38 – 7:43** A New Simplified Method To Precondition The Spinal Cord By Occluding Intercostal Arteries Without Selective Catheterization: Technique And Experience
Björn Sonesson, MD, PhD
- 7:44 – 7:49** Near Infrared Spectrometry (NIRS) Monitoring Of Spinal Muscles To Reflect SCI With TAAA Repairs: How It Works And Early Experience
Christian D. Etz, MD, PhD
- 7:50 – 8:00** **Panel Discussion**

SESSION 72 (Grand Ballroom East, 3rd Floor)
NEW AND IMPROVED TECHNOLOGY AND TECHNIQUES FOR CAROTID TREATMENT AND CAS: MESH COVERED STENTS AND TRANSCERVICAL TRANSCAROTID ARTERY REVASCULARIZATION (TCAR)

Moderators: Frank J. Veith, MD
Wesley S. Moore, MD

MESH COVERED STENTS

- 8:00 – 8:05** Update On The 3 Mesh Covered Stents For CAS: What Are The Differences Between Them And What Is The Status Of Their Safety And Efficacy
Max Amor, MD
- 8:06 – 8:11** Update On Results With The C-Guard Micronet Mesh Covered Stent For CAS (From Inspire MD): Does It Prevent Strokes: Does It Cause ISR Or Other Long-Term Problems: Can It Have Value In Other Vascular Beds
Piotr Musialek, MD, DPhil
- 8:12 – 8:17** Status Of Dual Layer Stents For CAS: Is Acute Occlusion An Issue And How To Avoid It
Stefan Müller-Hülsbeck, MD
- 8:18 – 8:23** Are Mesh Covered Stents Living Up To Their Potential For Improving CAS Outcomes: Results Of A RCT
Laura Capoccia, MD, PhD

UPDATE ON TCAR

- 8:24 – 8:29** TCAR With Flow Reversal Is Equal To Or Better Than CEA For Treating High Risk Symptomatic Patients With Carotid Stenosis: DW MRI Findings Prove It (From The PROOF Trial)
Ralf R. Kolvenbach, MD

- 8:30 – 8:35** Update On Recent Results And Trials With TCAR: Why Is It Gaining Acceptance And Its Use Increasing: Lessons Learned
Vikram S. Kashyap, MD
- 8:36 – 8:41** Technical Tips For Optimizing Outcomes With TCAR: Precautions And Contraindications To Its Use: Does It Decrease Stroke Rates (From The SV Registry)
Mahmoud B. Malas, MD, MHS
- 8:42 – 8:47** **DEBATE:** TCAR Is A Game Changer For CAS And Should Replace Transfemoral CAS Procedures
Richard P. Cambria, MD
- 8:48 – 8:53** **DEBATE:** Not So: Transfemoral Access Should Be The First Option For Most CAS Procedures In Most Low Risk And Many High Risk Patients: Why It Is Better Than TCAR
Giancarlo Biamino, MD, PhD
- 8:54 – 8:59** Why A Reinvigoration Of CAS Is Justified By Better Embolic Protection And Newer Mesh Covered Stents; OCT Proves It
Carlo Setacci, MD
- 9:00 – 9:10** **Panel Discussion**
- 9:10 – 9:22** **Break – Visit Exhibits And Pavilions (2nd and 3rd Floors)**

SESSION 73 (Grand Ballroom East, 3rd Floor)

MORE CAROTID TOPICS: CAUSES OF STROKE, RISK FACTORS, IMPACT ON COGNITION AND BEST TREATMENT WITH CONTRALATERAL ICA OCCLUSION

Moderators: *Ross Naylor, MD*
Frank J. Veith, MD

- 9:22 – 9:27** Stroke And Death Rates After CEA Are Decreasing Over The Last 10 Years: This Is Not Yet So After CAS: Will This Change For CAS
Richard Bulbulia, MA, MD
Alison Halliday, MS
- 9:28 – 9:33** US Medicare Population Trends From 1999-2014 Show Decreasing Usage And Adverse Event Rates For CEA And Increasing Usage Of CAS With No Change In CAS Adverse Event Rates: Will The Latter Change
Brajesh K. Lal, MD

COGNITION ISSUES

- 9:34 – 9:39** What Are The Problems With The Accuracy Of Cognitive Testing Before And After Carotid Invasive Treatment: They Can Invalidate Study Conclusions
J. David Spence, MD
- 9:40 – 9:45** What Is The Evidence For CEA Or CAS Reducing Cognitive Decline In Patients: Actually Both Procedures Make It Worse: Based On A Meta-Analysis
Ross Naylor, MD
- 9:46 – 9:51** Effects Of Diabetes On Changes In Cognition After CAS And CEA: Why Is This So
Wei Zhou, MD
- 9:52 – 9:57** Modern Outcomes Of Redo CEA Are Worse Than Older Single Center Results Indicate: What Are The Implications For Treatment
Jeffrey J. Siracuse, MD, RPVI
Alik Farber, MD

- 9:58 – 10:03** Styloid-Carotid Artery Syndrome Can Cause TIAs: What Is It: How Should It Be Diagnosed And Treated
Domenico Valenti, DMChir, PhD
- 10:04 – 10:10** **Panel Discussion**
WITH CONTRALATERAL CAROTID OCCLUSIONS – DIVERGENT VIEWS
- 10:10 – 10:15** Patients Needing Invasive Carotid Treatment In The Face Of A Contralateral Internal Carotid Artery (ICA) Occlusion Should Have CAS Rather Than CEA
Sriram S. Iyer, MD
- 10:16 – 10:21** With Patients Needing Invasive Carotid Treatment In The Face Of A Contralateral ICA Occlusion CEA Can Be Done With Acceptably Low Risks: What Precaution Should Be Taken
Gert J. de Borst, MD, PhD
- 10:22 – 10:27** In Patients With A Symptomatic Carotid Stenosis On One Side And A Contralateral ICA Occlusion, CAS Has A Higher Stroke Rate Than CEA In A Population Based Analysis
Mahmoud B. Malas, MD, MHS
- 10:28 – 10:33** A Meta-Analysis Tells The True Story: Both CEA And CAS Have Greater Risks In Patients With A Contralateral ICA Occlusion
Cynthia K. Shortell, MD
Leila Mureebe, MD
- 10:34 – 10:39** How Can These Divergent Opinions And Results Be Explained And Patients With Contralateral ICA Occlusions Be Best Cared For By CEA Or CAS With No Increased Risks
Carlos Saadeh, MD
- 10:40 – 10:45** Contemporary Treatment Of Carotid Aneurysms: Optimal Use Of Endo And Open Techniques
Peter L. Faries, MD
- 10:46 – 10:52** **Panel Discussion**

SESSION 74 (Grand Ballroom East, 3rd Floor)

MORE CAROTID TOPICS RELATED TO TIMING OF TREATMENT, MEDICAL TREATMENTS AND FUTURE CAS OPTIMISM

Moderators: *Alik Farber, MD*
Cynthia K. Shortell, MD

OPTIMAL TIMING FOR TREATMENT – SOME DIFFERENT OPINIONS

- 10:52 – 10:57** Optimal Timing Of CEA Or CAS After A Stroke Or TIA
Ross Naylor, MD
- 10:58 – 11:03** **DEBATE:** Why The Optimal Timing For CEA In Patients Who Have Had A TIA Or Minor Stroke Is 8-15 Days After The Event
Mark Conrad, MD, MMSc
- 11:04 – 11:09** **DEBATE:** CEA From 2-5 Days After Onset Of The Index Neuro Symptom Has No Increased Risk But CEA <48 Hours After Symptom Onset Has Increased Risk: From The VSGNE
Mohammad H. Eslami, MD, MPH
Alik Farber, MD

- 11:10 – 11:15** Carotid Interventions After Ischemic Strokes Should Be Delayed 6-8 Weeks Only If The Cerebral Lesion Is Large (>4000 mm³) On CT
Gianluca Faggioli, MD
Andrea Stella, MD
Mauro Gargiulo, MD
- 11:16 – 11:21** **DEBATE:** CAS Is Justified Soon After Neurologic Symptoms If Certain Precautions Are Taken: How Soon: What Precautions
Carlo Setacci, MD
- 11:22 – 11:27** **DEBATE:** Early CAS From 2-7 Days After Neurologic Symptom Onset Has Increased Risk: CEA From 2-7 Days After Symptom Onset Has No Increased Risk: When Safe; When Not
Hans-Henning Eckstein, MD, PhD
- 11:28 – 11:33** Urgent Carotid Intervention In Patients With Mild To Moderate Strokes Is Associated With Improved Functional Independence On Discharge: How Long After A Stroke Should A Patient Undergo CEA: How About For CAS
Hernan A. Bazan, MD

MEDICAL ISSUES

- 11:34 – 11:39** In Patients With Carotid Disease Or A Stroke, What Level Of BP Maintenance Is Too Low: A Note Of Caution: What About LDL-C: Where Should It Be And Can It Be Too Low
J. David Spence, MD
- 11:40 – 11:45** The Currently Widely Used Antiplatelet Regimens For CAS Patients Are Not The Right Ones: How Should They Be Changed
Christos D. Liapis, MD
- 11:46 – 11:51** What Is On The Horizon For Improving CAS Outcomes: A Vascular Surgeon's Epiphany: How TCAR, CREST 2 And New Stents Will Change The Game
Wesley S. Moore, MD
- 11:52 – 12:00** **Panel Discussion**
- 12:00 – 1:00** **Lunch Break – 2nd Floor Promenade**
Visit Exhibits And Pavilions (2nd and 3rd Floors)

SESSION 75 (Grand Ballroom East, 3rd Floor)

CAROTID TOPICS RELATED TO NEW DEVELOPMENTS, IMPROVED TECHNIQUES AND TECHNOLOGY, CAS VS. CEA AND CAROTID BODY TUMORS

Moderators: *Ali F. AbuRahma, MD*
Wesley S. Moore, MD

- 1:00 – 1:05** Frailty Has Different Effects On The Outcomes For Patients Undergoing CAS And CEA: Frail Patients Needing Treatment Should Preferentially Get CAS
Wei Zhou, MD
- 1:06 – 1:11** Diagnosis Of ICA String Sign, Pseudo-Occlusion Or True Occlusion: Is Duplex Ultrasound Sufficient To Determine Accurately Patency And Operability
Natalie A. Marks, MD, RPVI, RVT
- 1:12 – 1:17** How CAS Can Be Performed Safely With Just Duplex Ultrasonography And No Contrast: What About Evaluating The Intracranial Circulation
Enrico Ascher, MD
Natalie A. Marks, MD, RPVI, RVT

- 1:18 – 1:23** New Devices For CAS: The Gore Embolic Filter: What Makes It Better And A New 3-In-1 Device With An Integrated Balloon, Filter And Stent: How Does It Work And Results
William A. Gray, MD
- 1:24 – 1:29** Midterm Comparative Results Of CAS With 2 Mesh Covered Stents – The C-Guard (InspireMD) And The Roadsaver (Terumo)
Maria Antonella Ruffino, MD
- 1:30 – 1:35** **DEBATE:** Intraoperative Completion Control By Duplex Or Angiography Is A Must After CEA: From The German National Registry
Hans-Henning Eckstein, MD, PhD
- 1:36 – 1:41** **DEBATE:** Not So: If One Uses Careful Technique, Intraoperative Completion Control Studies Are Unnecessary And May Be Misleading Or Harmful
Christopher J. Kwolek, MD
- 1:42 – 1:47** Late Results (Up To 12 Years) Show That CEA Treated Patients Have A Lower Risk Of Late Adverse Events Or Death Than CAS Treated Patients: Are There Confounders
Thomas L. Forbes, MD
Mohammad A. Hussain, MD
- 1:48 – 1:53** Large Propensity Matched Case Comparison Study Of CAS vs. CEA (Up To 2016) Shows That CAS Has More Adverse Events And Restenosis Than CEA With 2 Years Follow-Up
Dong-ik Kim, MD
- 1:54 – 1:59** New Techniques For Improving The Surgical Treatment Of Large Carotid Body Tumors: Embolization Is Helpful If Done Right: Technical Tips From A High Altitude High Volume Ecuadorian Center
Oscar L. Ojeda, MD
- 2:00 – 2:08** **Panel Discussion**

SESSION 76 (Grand Ballroom East, 3rd Floor)
CAROTID TRIAL AND GUIDELINE UPDATES,
TREATMENT OF ASYMPTOMATIC CAROTID
STENOSIS (ACS) AND COMBINED CAROTID AND
CORONARY DISEASE

Moderators: *Mark A. Adelman, MD*
Frank J. Veith, MD

- 2:08 – 2:13** Highlights Of The ESVS 2018 Carotid Guidelines: Advice Re Optimal Treatment Of Asymptomatic Patients With Carotid Stenosis (ACS)
Jean-Baptiste Ricco, MD, PhD
Ross Naylor, MD
- 2:14 – 2:19** Update On Indications For Invasive Treatment Of Carotid Disease (Symptomatic And Asymptomatic) By CEA Or CAS Before Major Surgery Or Coronary Bypass
Ross Naylor, MD
- 2:20 – 2:25** New Subanalysis Findings From The ACT-1 Trial: What It Tells Us About The Treatment Of ACS And What It Does Not Tell Us
Jon S. Matsumura, MD
- 2:26 – 2:31** Update On The Status Of CREST 2 RCTs In ACS Patients (Best Medical Treatment [BMT] Alone vs. BMT Plus CEA Or CAS): Problems And Progress: When Will We Have Answers And How Definitive Will They Be
Thomas G. Brott, MD
Brajesh K. Lal, MD

- 2:32 – 2:37** Update On The ACST 2 RCT Comparing CAS And CEA For Treatment Of ACS: How Is Recruitment Going And When Will We Have Definitive Answers
Richard Bulbulia, MA, MD
Alison Halliday, MS
- 2:38 – 2:43** Why CREST 2 And ACST 2 May Have Little Definitive Value Although They May Provide Useful Information
Anne L. Abbott, MD, PhD
- 2:44 – 2:49** Status Of The ECST 2 RCT Comparing CEA Or CAS And BMT To BMT Alone In Symptomatic And ACS Patients: What Will It Tell Us And When
Jonathan D. Beard, ChM, MEd
Martin M. Brown, MD
Leo H. Bonati, MD
- 2:50 – 2:55** A New System For Stroke Prediction In ACS Patients: When Is Invasive Treatment (CEA/CAS) Mandatory And Justified
Jean M. Panneton, MD
- 2:56 – 3:08** **Panel Discussion And Break**
Visit Exhibits And Pavilions (2nd and 3rd Floors)

SESSION 77 (Grand Ballroom East, 3rd Floor)

NEW TECHNIQUES AND CONCEPTS; CAROTID PATCHES; UPDATES AND CONTROVERSIES

Moderators: *Neal S. Cayne, MD*

Anil P. Hingorani, MD

- 3:08 – 3:13** Compliant Balloon Assisted Branch Entry To Facilitate Difficult Branch Artery Wire And Catheter Entry During F/EVAR: How It Works
Andrew Holden, MBChB
- 3:14 – 3:19** Minimally Invasive CEA Through An Incision < 3 cm In Length: Technique, Results, Precautions And Contraindications
Robert M. Proczka, MD, PhD
- 3:20 – 3:25** Advantages And Technical Tips For Mini-Incision CEAs
Timothy M. Sullivan, MD
- 3:26 – 3:31** **DEBATE:** Prosthetic Patches Should Be Used For All CEAs: The Level 1 Evidence Is Clear
Ali F. AbuRahma, MD
- 3:32 – 3:37** **DEBATE:** All CEAs Should Be Closed With A Patch: Bovine Pericardium Or Saphenous Vein Is The Best Patch Material
Domenico Valenti, DMChir, PhD
- 3:38 – 3:43** **DEBATE:** Both Are Wrong: Most CEAs Should Be Closed Without A Patch: How To Do This With Good Outcomes: Patches Can Cause Several Major Problems
Sherif A.H. Sultan, MD, PhD
- 3:44 – 3:49** Improper And Suboptimal Antiplatelet Treatment Casts Doubt On All CAS Trials: What Are The Implications
Karthikeshwar Kasirajan, MD
- 3:49 – 3:54** **Panel Discussion**
- 3:55 – 4:00** How To Reduce Lymphedema With Liposuction: Technique, Precautions And Long-Term Results
Håkan Brorson, MD, PhD
- 4:01 – 4:06** **DEBATE:** Endo-First Is Best For All CLTI Patients: Rarely Are Open Bypasses Helpful: How Often
Craig M. Walker, MD

- 4:07 – 4:12** **DEBATE:** Not So: Why Open Bypass First Is Best In Some CLTI Patients: Which Ones: What Percent Of CLTI Patients Will Require An Open Procedure At Some Point In Their Course
Michael S. Conte, MD
- 4:13 – 4:18** Continued Tobacco Use Is Bad For PAD Patients But Does Not Negatively Affect Outcomes Of Endo Treatments For Intermittent Claudication
Alan M. Dietzek, MD, RPVI
- 4:19 – 4:24** Current Treatment Options For Limb Threatening Hand Ischemia: How Good Are Their Results
Roberto Ferraresi, MD
- 4:25 – 4:30** **Panel Discussion**

SESSION 78 (Grand Ballroom East, 3rd Floor)

NEW DEVELOPMENTS IN PERCUTANEOUS CLOSURE DEVICES, HYPERBARIC OXYGEN AND WOUND CARE

Moderators: *Glenn Jacobowitz, MD*
Gregg S. Landis, MD

PERCUTANEOUS CLOSURE DEVICES

- 4:30 – 4:35** What Are The Next Generation Large Sheath Closure Devices (Manta, Per Q Seal, In-Seal And NxT): How Do They Work And How Good Will They Be
Zvonimir Krajcer, MD
- 4:36 – 4:41** Pitfalls Of Percutaneous EVAR (PEVAR) And How To Avoid Them
Maciej L. Dryjski, MD, PhD
- 4:42 – 4:47** New Developments In Access Site Closure For Small Sheaths; For Large Sheaths
Syed M. Hussain, MD
- 4:48 – 4:53** Updates On Perclose And Perglide For Access Site Closure: Why They Are Better And More Cost Effective Than Open Techniques And Will Be Hard To Beat
Zvonimir Krajcer, MD

HYPERBARIC OXYGEN THERAPY

- 4:54 – 4:59** What Is The Evidence That Hyperbaric Oxygen Therapy Improves Wound Healing
Robert B. McLafferty, MD
- 5:00 – 5:05** **Panel Discussion**

UPDATE IN WOUND TREATMENT AND HEALING

- 5:05 – 5:10** The Impact Of Distal Drug Migration On Wound Healing After PTAs With DCBs: A Model To Measure Drug Levels In Tissues
Ignacio Escotto, MD
- 5:11 – 5:16** Value Of Closed Incision Negative Pressure Dressings In Preventing Groin Wound Infections In Vascular Operations
Michael Engelhardt, MD
- 5:17 – 5:22** Negative Pressure Wound Therapy (NPWT) With The Provena System To Decrease Groin And Lower Extremity Wound Infections: How Well Does It Work
Ellen D. Dillavou, MD
- 5:23 – 5:28** Importance Of Toe Pressure In Predicting Healing Of Toe And Foot Wounds And In Indicating The Need For Revascularization
Patrick A. Stone, MD

- 5:29 – 5:34** Telehealth Electronic Monitoring To Reduce Post-Discharge Wound Complications And Infections After Groin Incisions For Bypasses
Albeir Y. Mousa, MD, RPVI, MPH, MBA
- 5:35 – 5:40** The Value Of Mesh Augmentation To Prevent Incisional Hernias After Open AAA Repair: The AIDA RCT Shows It Works
Sebastian E. Debus, MD, PhD
- 5:41 – 5:46** The Importance Of Cold Plasma In Wound Healing And Wound Infections: What Is Cold Plasma And How Does It Work
Max Zegelman, MD
- 5:47 – 5:52** The Value Of Fish Skin Matrix (Kerecis) And NPWT To Promote Healing Of Vascular Wounds
Martin Storck, MD, PhD
- 5:53 – 5:59** **Panel Discussion**
End of Program L

PROGRAM M (SESSIONS 79-87)
NEW DEVELOPMENTS IN POPLITEAL DISEASES AND THEIR TREATMENT; MANAGEMENT OF INFECTED ARTERIES, PROSTHETIC GRAFTS AND EVAR GRAFTS; ADVANCES IN IMAGING AND GUIDANCE, MEDICAL CONDITIONS AND TREATMENTS, TREATMENT OF THORACIC OUTLET SYNDROMES (TOSs), VASCULAR TRAUMA AND REBOA; RECORDED CHALLENGING LIVE CASES FROM MÜNSTER AND THE MAYO CLINIC
Grand Ballroom West, 3rd Floor

SESSION 79 (Grand Ballroom West, 3rd Floor)
NEW DEVELOPMENTS IN POPLITEAL DISEASES AND THEIR TREATMENT: POPLITEAL ADVENTITIAL CYSTIC DISEASE, ENTRAPMENT SYNDROMES AND ANEURYSMS

*Moderators: George Hamilton, MD
Patrick J. Lamparello, MD*

- 6:45 – 6:50** New Developments In The Diagnosis And Treatment Of Popliteal Adventitial Cystic Disease
Peter F. Lawrence, MD

POPLITEAL ENTRAPMENTS

- 6:51 – 6:56** New Developments In The Diagnosis Of Popliteal Entrapment Syndromes And How They Should Be Treated – Including Functional Entrapment
Niten Singh, MD
- 6:57 – 7:02** Management Of Functional Popliteal Entrapment In Athletes
Jason T. Lee, MD
- 7:03 – 7:08** Value Of IVUS And Other New Techniques To Improve The Diagnosis And Treatment Of Popliteal Entrapments
Katherine A. Gallagher, MD

POPLITEAL ANEURYSMS

- 7:09 – 7:14** With Popliteal Aneurysms: When Observe; When Endovascular Treatment; When Open Repair And What Approach
Raffaele Pulli, MD

- 7:15 – 7:20** **DEBATE:** Endovascular Grafts Should Be The First Choice For Treating Popliteal Aneurysms: When Are They Contraindicated: Technical Tips To Get Good Results
Irwin V. Mohan, MBBS, MD
- 7:21 – 7:26** **DEBATE:** Not So: Prosthetic Open Bypasses Should Be Used To Treat Most Popliteal Aneurysms: When Are They Mandatory
Laurent Chiche, MD
- 7:27 – 7:32** Long-Term Outcomes Of Endovascular Popliteal Aneurysm Repairs With Stent-Grafts: Good But Not Perfect: When Is Open Repair Best
Clark J. Zeebregts, MD, PhD
- 7:33 – 7:38** Outcomes Of Treatment Of Popliteal Aneurysms Causing Acute Limb Ischemia (ALI): How Are They Best Treated
Martin Björck, MD, PhD
- 7:39 – 7:45** **Panel Discussion**

SESSION 80 (Grand Ballroom West, 3rd Floor)

NEW DEVELOPMENTS IN VASCULAR INFECTIONS AND THEIR TREATMENT: INFECTED VASCULAR GRAFTS AND EVARs; MYCOTIC AAAs

Moderators: *Keith D. Calligaro, MD*
Peter F. Lawrence, MD

- 7:45 – 7:50** Advances In The Treatment Of Infected Femoral Pseudoaneurysms In Drug Addicts
Raghuveer Vallabhaneni, MD
- 7:51 – 7:56** Lateral External Iliac-To-Femoral Or Distal Bypasses To Treat Prosthetic Graft And Other Groin Infections: They Can Be Routed Medial Or Lateral To The Pelvic Anterior Superior Spine
Keith D. Calligaro, MD
Enrico Ascher, MD
Frank J. Veith, MD
- 7:57 – 8:02** Update On Treatment Of Mycotic AAAs And Infected EVARs: Use Of EVAR For Mycotic AAAs, And When Is Non-Excision Of Infected EVARs Acceptable Treatment
Kamphol Laohapensang, MD
- 8:03 – 8:08** Best Current Methods To Re-Establish Distal Flow After Excision Of An Infected Aortic Graft: When In Situ And How; When Extra-Anatomic
Peter F. Lawrence, MD
- 8:09 – 8:14** The NAIS Procedure With Autologous Deep Thigh Vein Grafts Is The Best Treatment For Infected Aortic Prosthetic Grafts: Technical Tips
James H. Black III, MD
- 8:15 – 8:20** How To Perform The NAIS Procedure For A Mycotic Aneurysm Effectively (Video Presentation)
Ramesh K. Tripathi, MD
- 8:21 – 8:26** Infected Aortic Prosthetic Grafts And Endografts From EVAR May Not Require Graft Excision: When And How Can These Infected Grafts Be Treated Without Their Removal
Martin Malina, MD, PhD
- 8:27 – 8:32** How Can Aorto-Esophageal Fistulas After TEVAR Or An Open Thoracic Prosthetic Graft Be Treated Effectively And Give The Patient A Chance At Survival
Geert Willem H. Schurink, MD, PhD
Michael J. Jacobs, MD

- 8:33 – 8:38** How To Treat Infected Suprarenal Aortic Grafts Or Endografts By Graft Excision With Restoration Of Distal And Critical Branch (Visceral And Renal) Flows: Not Simple But Doable
Thomas C. Bower, MD
Manju Kalra, MBBS (Presenter)
- 8:39 – 8:44** A New System For Treating Prosthetic Arterial And Aortic Graft Infections
Zoran Rancic, MD, PhD
- 8:45 – 8:53** **Panel Discussion**

SESSION 81 (Grand Ballroom West, 3rd Floor)

ADVANCES IN IMAGING AND IMPROVED GUIDANCE SYSTEMS

Moderators: *Enrico Ascher, MD*
Michael B. Silva, Jr., MD

- 8:53 – 8:58** How Can Duplex Ultrasound Reliably Predict Stent Thrombosis Before It Occurs And Improve Results
Keith D. Calligaro, MD
- 8:59 – 9:04** Value Of Transcranial Doppler In Improving Results Of Transcatheter Aortic Valve Implantation (TAVI)
Zsolt Garami, MD
- 9:05 – 9:10** Why Every Vascular Open Procedure Should Be Performed In A Fluoro Equipped Operating Room: Mobile C-Arms Have Some Advantages Over Fixed Fluoro Equipment: What Are They
Daniel K. Han, MD
Michael L. Marin, MD
- 9:11 – 9:16** Cloud Based System For Image Fusion Techniques With Mobile C-Arms (The Cydar System): How Does It Work And Advantages For All Vascular Interventions
Cynthia K. Shortell, MD
- 9:17 – 9:22** Experience With The Cydar 3D Overlay Fusion System Using A Cloud Based Upgrade To Mobile C-Arms: Advantages And Limitations
Peter C.J. Goverde, MD
Michel M.P. Reijnen, MD, PhD
- 9:23 – 9:28** How To Use Hybrid Operating Rooms Optimally Beyond Vascular Procedures: How The Availability Of Mobile C-Arms Can Help
Alan B. Lumsden, MD
- 9:29 – 9:34** Value Of Intraprocedural Completion Cone Beam CT After Standard EVARs And Complex EVARs (F/B/ EVARs): What To Do If One Does Not Have The Technology
Gustavo S. Oderich, MD
- 9:35 – 9:40** Augmented Virtual Realty With High Resolution 3D-3D Imaging: What Is It, What Will It Add And How Does It Relate To Artificial Intelligence
Jan M.M. Heyligers, MD, PhD
- 9:41 – 9:46** How Can Medical Holograms And 3D Imaging Be Helpful During Endovascular Procedures
Elchanan Bruckheimer, MBBS
- 9:47 – 9:52** 4D Ultrasound Evaluation Of AAAs: What Is It; How Can It Help To Predict Growth And Rupture Rates
Marc R.H.M. van Sambeek, MD, PhD
- 9:53 – 10:00** **Panel Discussion**
- 10:00 – 10:15** **Break – Visit Exhibits And Pavilions (2nd and 3rd Floors)**

SESSION 82 (Grand Ballroom West, 3rd Floor)

MORE NEW DEVELOPMENTS IN MEDICAL TREATMENTS IN VASCULAR PATIENTS

Moderators: *Michael L. Marin, MD*
Anton N. Sidawy, MD, MPH

- 10:15 – 10:20** Value Of Troponin Measurements Before All Vascular Procedures – Open Or Endo
Caron B. Rockman, MD
Jeffrey S. Berger, MD, MS
- 10:21 – 10:26** Novel Oral Anticoagulants (NOACs) Use After Lower Extremity Bypass Is Associated With Increased Graft And Limb Events And Results Do Not Look Better Than With Warfarin
William P. Robinson, MD
- 10:27 – 10:32** Is Coronary Stenting (PCI) Overused As The ORBITA RCT (Comparing Stenting To Medical Treatment Suggests)
Roxana Mehran, MD
- 10:33 – 10:38** How Should Lipids And Medical Therapy Be Managed In CTLI Patients And Those Undergoing Interventions
John R. Laird, MD
- 10:39 – 10:44** Tips And Tricks For Managing Patients “Presumed” To Be Intolerant To Statins: What Proportion Of These Patients Are Truly Intolerant
Anthony J. Comerota, MD
- 10:45 – 10:50** Statins Improve Survival And Decrease Amputation Rates After Endo And Open Treatments For CLTI: From The CRITISCH Registry
Theodosios Bisdas, MD
- 10:51 – 10:56** What Does The Vascular Surgeon/Specialist Need To Know About Other Important Drugs That Interact With Statins And How To Deal With This Issue
Anthony J. Comerota, MD
- 10:57 – 11:02** Importance Of Optimal Postoperative Glucose Management After Vascular Surgery: Why It Matters And What Are The Keys
Todd R. Vogel, MD, MPH
- 11:03 – 11:08** How TEVAR And EVAR Can Have A Detrimental Effect On The Heart: What Can Be Done About It
Christos D. Liapis, MD
- 11:09 – 11:17** **Panel Discussion**

SESSION 83 (Grand Ballroom West, 3rd Floor)

ADVANCES IN THE TREATMENT OF THORACIC OUTLET SYNDROMES (TOSs)

Moderators: *Evan C. Lipsitz, MD, MBA*
Sean P. Lyden, MD

- 11:17 – 11:22** New Developments In The Treatment Of Neurogenic Thoracic Outlet Syndrome (NTOS): Improvements In Its Diagnosis And Treatment
Karl A. Illig, MD
- 11:23 – 11:28** Treatment Of Recurrent NTOS: Role Of The Pectoralis Minor: Tips And Tricks In Diagnosis And Treatment
Michael J. Singh, MD
- 11:29 – 11:34** New Developments In The Treatment Of Arterial Thoracic Outlet Syndromes: A New Algorithm For Treatment
Jacques Busquet, MD

- 11:35 – 11:40** New Developments In The Treatment Of Venous Thoracic Outlet Syndromes
Benjamin M. Jackson, MD
- 11:41 – 11:46** A RCT Comparing Medical Treatment vs. Thrombolysis And First Rib Resection For Venous TOS – Paget Schroetter Syndrome With Subclavian Vein Thrombosis
Gert J. de Borst, MD, PhD
- 11:47 – 11:52** Progress In Robotic First Rib Resection For TOSs: Advantages, Limitations And Cost
Hans M.E. Coveliers, MD, PhD
- 11:53 – 12:00** **Panel Discussion**
- 12:00 – 1:00** **Lunch Break – 2nd Floor Promenade**
Visit Exhibits And Pavilions (2nd and 3rd Floors)

SESSION 84 (Grand Ballroom West, 3rd Floor)

BEYOND INTERVENTION: NOVEL IDEAS AND NEW USES FOR OLD THERAPIES IN VASCULAR MEDICINE

Moderators: *Raghu Kolluri, MD*
Ido Weinberg, MD, MSc
Roxana Mehran, MD

- 1:00 – 1:05** Measures Of Frailty And Their Importance In PAD Patients
Ido Weinberg, MD, MSc
- 1:06 – 1:11** Readmissions After PAD Procedures: What Can We Learn From New Data
Eric A. Secemsky, MD, MSc
- 1:12 – 1:17** How Accurate Is Ulcer Healing Assessment And What Happens When We Are Wrong
Mehdi H. Shishehbor, DO, MPH, PhD
- 1:18 – 1:23** How To Tailor Activity Recommendations To Patients After Cervical Artery Dissection
Daniella Kadian-Dodov, MD
- 1:24 – 1:29** **DEBATE:** Direct Oral Anticoagulants (DOAC) Are Ready For Prime Time Use In Cancer Patients Who Suffer Acute Venous Thrombo-Embolism (VTE)
Geno J. Merli, MD, MACP
- 1:30 – 1:35** **DEBATE:** Recent Data Show That Low Molecular Weight Heparins Are Still The Only Way To Go When Cancer Patients Suffer Clots Or VTE
Thomas Ortel, MD, PhD
- 1:36 – 1:41** Modern Compression Stocking Studies (SOX, IDEAL, DVT And OCTAVIA) And Pharmaco-Mechanical Catheter Directed Clot Lysis (ATTRACT) Failed To Prevent Post-Thrombotic Syndrome (PTS): Is There Now No Role For Compression And Interventional Treatment For Patients With Acute DVT
Susan R. Kahn, MD, MSc
- 1:42 – 1:47** Physical Activity And A Good Diet Are The Best Medicines For Vascular Patients With Arterial And Venous Disease: Evidence And Practical Tips For Implementation By Vascular Surgeons/Specialists
Mary McDermott, MD
- 1:48 – 1:53** The Fall Of Primary Intervention
Eric A. Secemsky, MD, MSc
- 1:54 – 2:06** **Panel Discussion**

SESSION 85 (Grand Ballroom West, 3rd Floor)

NEW DEVELOPMENTS IN THE MANAGEMENT OF VASCULAR TRAUMA AND REBOA

Moderators: *Tal M. Hörer, MD, PhD*
Ravi Rajani, MD

REBOA TOPICS

- 2:06 – 2:11** Update And Results Of The REBOA Ongoing Trials In Europe, Japan And The US
Tal M. Hörer, MD, PhD
- 2:12 – 2:17** Strategies For Introducing A Successful Institutional REBOA Program: It's Not Simple: How To Avoid Complications
Charles J. Fox, MD
- 2:18 – 2:23** REBOA Can Save Lives But . . . When Can REBOA Cause Spinal Cord Ischemia And Intermittent Partial Balloon Deflation Can Prevent It: How To Do It
Jonathan L. Eliason, MD
- 2:24 – 2:29** Complications Of REBOA When Performed By Inexperienced Operators Can Be Disastrous: What Can Be Done To Avoid The Problem
Gregory A. Magee, MD, MSc
- 2:30 – 2:35** Limb Salvage And Functional Outcome After Traumatic Acute Limb Ischemia (ALI)
Niten Singh, MD
- 2:36 – 2:41** Technical Tips For The Management Of Cervical And Mediastinal Iatrogenic Artery Injuries: How To Avoid Disasters
Mark K. Eskandari, MD
- 2:42 – 2:47** Current Priorities And Treatment Strategies When Trauma Causes Simultaneous Orthopedic And Vascular Injuries
Markus K. Furrer, MD
- 2:48 – 2:53** Vascular Injuries From Orthopedic Operations: How To Prevent Catastrophes: Beware The Dangers Of Orthopedic Cement: What Are They
Joann Lohr, MD

2:54 – 3:00 Panel Discussion

Moderators: *Tal M. Hörer, MD, PhD*
Mark K. Eskandari, MD

- 3:00 – 3:05** Value Of CO₂ DSA For Abdominal And Pelvic Trauma: Why And How To Use CO₂ Angiography With Massive Bleeding And When To Supplement It With Iodinated Contrast
Kyung J. Cho, MD
- 3:06 – 3:11** Vascular Emergencies Due To IV Drug Use: Tips And Tricks For Management
Elina Quiroga, MD

TRAUMATIC AORTIC INJURIES

- 3:12 – 3:17** Progress In Blunt Thoracic Aortic Injury: Changing Classification Systems And Philosophy Of Treatment: What Is The Aortic Trauma Foundation And What Does It Do
Joseph J. DuBose, MD

3:18 – 3:23 With Grade III Traumatic Aortic Injuries (Blood Outside The Aortic Wall), When Is It Appropriate To Observe Temporarily Without Interventional Treatment And To Fix More Pressing Problems First: Management Tips

Robert S. Crawford, MD

3:24 – 3:29 Traumatic Aortic Injuries And Disruptions At Unusual Sites: Diagnosis, Treatment And Why Do They Occur Where They Do

James W. Dennis, MD

PEDIATRIC VASCULAR TRAUMA

3:30 – 3:35 How Best To Treat Pediatric Vascular Injuries

Mohammad H. Eslami, MD, MPH

3:36 – 3:41 Role Of Endovascular Treatments For Pediatric Vascular Trauma

Michael J. Singh, MD

3:42 – 3:47 Microvascular Techniques To Treat Vascular Injuries In Small Children And Infants: Indications, Technical Tips And Results: How To Deal With Spasm

Jean Bismuth, MD

3:48 – 3:53 Pediatric Brachial Artery Injury From Supracondylar Fractures Of The Humerus: Aggressive Revascularization Is Sometimes Necessary: Indications, Technical Tips And Results

Dipankar Mukherjee, MD

3:54 – 4:01 Panel Discussion

4:01 – 4:12 Break – Visit Exhibits And Pavilions (2nd and 3rd Floors)

SESSION 86 (Grand Ballroom West, 3rd Floor)

RECORDED LIVE COMPLEX CASES FROM MÜNSTER

Moderators: *Giovanni Torsello, MD*

Martin J. Austermann, MD

4:12 – 4:50 Complex Cases From Münster With Questions And Discussion

Giovanni Torsello, MD

Martin J. Austermann, MD

SESSION 87 (Grand Ballroom West, 3rd Floor)

RECORDED LIVE COMPLEX CASES FROM THE MAYO CLINIC

Moderator: *Gustavo S. Oderich, MD*

4:50 – 5:30 Complex Cases From The Mayo Clinic With Questions And Discussion

Gustavo S. Oderich, MD

End of Program M

PROGRAM N (SESSIONS 88-92)

DEEP VEIN DISEASE

Trianon Ballroom, 3rd Floor

Course Leaders: *Jose I. Almeida, MD, RPVI, RVT*

Lowell S. Kabnick, MD, RPhS

Kenneth Ouriel, MD, MBA

Thomas W. Wakefield, MD

SESSION 88 (Trianon Ballroom, 3rd Floor)

PELVIC VENOUS DISORDERS

Moderators: *Jose I. Almeida, MD, RPVI, RVT*
Lowell S. Kabnick, MD, RPhS
Thomas W. Wakefield, MD
Kenneth Ouriel, MD, MBA

- 8:05 – 8:10** Introduction: Deep System
Lowell S. Kabnick, MD, RPhS
- 8:11 – 8:16** Venographic Techniques To Identify Pelvic Anatomy And Escape Points
Mark H. Meissner, MD
- 8:17 – 8:22** Duplex Patterns Of Pelvic Vein Reflux
Nicos Labropoulos, BSc (Med), PhD, DIC, RVT
- 8:23 – 8:28** Pelvic Reflux: Is Coil Embolization The Answer
Alun H. Davies, MA, DM, DSC
- 8:29 – 8:34** Acute Or Chronic Ovarian Vein Thrombosis: What To Do
Mikel Sadek, MD
- 8:35 – 8:40** Complications And Bailouts Of Renal Vein Stenting For Nutcracker Syndrome
Peter Gloviczki, MD
- 8:41 – 8:46** Open Surgery For Nutcracker: Techniques And Results
Cynthia K. Shortell, MD
- 8:47 – 8:52** Does Ovarian Vein Embolization Work For Pelvic Venous Insufficiency: A Multicenter Study
Peter J. Pappas, MD
- 8:53 – 8:58** **Panel Discussion**

SESSION 89 (Trianon Ballroom, 3rd Floor)

FEMORO-ILIOCAVAL INTERVENTIONAL STRATEGIES TO REDUCE VENOUS HYPERTENSION, HOT IDEAS FOR RECANALIZING CHRONIC TOTAL OCCLUSIONS

Moderators: *Anthony J. Comerota, MD*
Peter Gloviczki, MD

- 8:59 – 9:04** Exactly What Is The Tissue Causing Post-Thrombotic Venous Obstruction
Anthony J. Comerota, MD
- 9:05 – 9:10** Contralateral Deep Vein Thrombosis After Iliac Vein Stenting: A Clear And Present Danger
Peter Gloviczki, MD
- 9:11 – 9:16** Tips And Tricks To Treat Complex Central Venous Occlusion
Marcelo Guimaraes, MD
- 9:17 – 9:22** Endovenectomy And Iliac Vein Stent Placement: How I Do It (Video Technique Demonstration)
Ramesh K. Tripathi, MD
- 9:23 – 9:28** Imaging Tools To Increase The Safety/Accuracy Of Endovascular Procedures And Reduce Radiation And Contrast Media
Marcelo Guimaraes, MD
- 9:29 – 9:34** Challenging Deep Venous Recanalization: Go-To Tools And Approaches
Kush R. Desai, MD
- 9:35 – 9:40** **Panel Discussion**

Moderators: *William A. Marston, MD*
Gerard J. O'Sullivan, MD

STENTS AND STENT TRIALS

- 9:41 – 9:46** Importance Of Stent Shape And Area On Clinical Outcome After Iliofemoral Venous Stenting (VICI Feasibility Trial)
Lowell S. Kabnick, MD, RPhS
- 9:47 – 9:52** Venovo Venous Stent Trial: Update
Michael D. Dake, MD
- 9:53 – 9:58** Zilver/Vena Stent Trial: Update
Gerard J. O’Sullivan, MD
- 9:59 – 10:04** VICI Stent Trial Update
Mahmood Razavi, MD
- 10:05 – 10:10** Abre: Stent And Trial Design
Erin H. Murphy, MD
- 10:11 – 10:16** Restenosis Of Venous Stents After Implantation: Etiology, Prevention And Treatment Options
William A. Marston, MD
- 10:17 – 10:22** What Is The Nature Of The Material Inside Stents With Restenosis
David M. Williams, MD
- 10:23 – 10:28** **Panel Discussion**
*Moderators: Jose I. Almeida, MD, RPVI, RVT
Rick De Graaf, MD, PhD*

OFF-LABEL STENT USE

- 10:29 – 10:34** The Single Inflow Vein Stenting Alternative: Hybrid vs. Endovascular For Extensive Deep Venous Obstruction
Houman Jalaie, MD
- 10:35 – 10:40** Crossing Chronic Femoro-Iliocaval Occlusions With Cone Beam CT
Jose I. Almeida, MD, RPVI, RVT
- 10:41 – 10:46** The Importance Of Stent Flexibility In Venous Stenting
Houman Jalaie, MD
- 10:47 – 10:52** Femoral Vein Stenting Lessons Learned
Jose I. Almeida, MD, RPVI, RVT
- 10:53 – 10:58** Lymphatic Intervention: Thoracic Duct Embolization, Pulmonary Lymphatic Perfusion Syndrome, And Hepatic Lymphatic Disorders
Rick De Graaf, MD, PhD
- 10:59 – 11:04** **Panel Discussion**

SESSION 90 (Trianon Ballroom, 3rd Floor)

STRATEGIES FOR CORRECTING SEVERE DEEP VENOUS REFLUX AND/OR OBSTRUCTION, WOUNDS AND NEW HORIZONS FOR VENOUS DISEASE MANAGEMENT

*Moderators: Cees H.A. Wittens, MD, PhD
Marzia Lugli, MD*

- 11:05 – 11:10** What Are The Challenges In The Deep System; What Is The Role Of Venous Valves
Erin H. Murphy, MD
- 11:11 – 11:16** May-Husni Procedure In The Management Of Severe Symptomatic Femoral Vein Occlusion
Evgeny Shaydakov, MD, PhD
- 11:17 – 11:22** 90% Well-Recognized Venographic Signs Of Significant Iliac Vein Compression In Asymptomatic Young Volunteers
Cees H.A. Wittens, MD, PhD

11:23 – 11:28 When Venous Stents Are Not Enough
Marzia Lugli, MD

11:29 – 11:34 Panel Discussion

*Moderators: Jose I. Almeida, MD, RPVI, RVT
Joseph D. Raffetto, MD*

WOUNDS AND NEW HORIZONS

11:35 – 11:40 Superficial Reflux With Obstructed Deep Veins:
When And When Not To Treat
Jose I. Almeida, MD, RPVI, RVT

11:41 – 11:46 Optimal Treatment Of Venous Leg Ulcers: What Do
We Know Now That We Didn't Know 5 Years Ago
Manj S. Gohel, MD

11:47 – 11:52 Different Biochemical Profiles In Inflammatory And
Granulating Wounds
Joseph D. Raffetto, MD

11:53 – 11:58 Important RCTs For Venous Wound Healing
William A. Marston, MD

11:59 – 12:04 The Recalcitrant Venous Ulcer – An Analysis Of
Factors In 22 Of 60 That Failed To Heal After A 52-
Week Period Of Treatment In Our Wound Center
Thomas F. O'Donnell, Jr., MD

12:05 – 12:10 Proteomics And Degradomics In Venous Leg Ulcers
Joseph D. Raffetto, MD

12:11 – 12:16 Pathophysiology Update On Venous Ulcers
Peter J. Pappas, MD

12:17 – 12:22 Panel Discussion

12:23 – 1:00 Lunch Break – 2nd Floor Promenade
Visit Exhibits And Pavilions (2nd And 3rd Floors)

SESSION 91 (Trianon Ballroom, 3rd Floor)

STRATEGIES FOR THROMBOEMBOLIC EVENTS IN THE VENOUS SYSTEM INCLUDING THE AXILLO SUBCLAVIAN SYSTEM

*Moderators: Peter Henke, MD
Joann Lohr, MD*

VTE MEDICAL

1:00 – 1:05 Appropriate Use Of Venous Imaging And Analysis
Of The D-Dimer/Clinical Probability Testing Paradigm
In The Diagnosis And Location Of Deep Venous
Thrombosis
Albeir Y. Mousa, MD, RPVI, MPH, MBA

1:06 – 1:11 Anti-Selectin Therapy For Treatment Of DVT: First
Clinical Treatment
Thomas W. Wakefield, MD

1:12 – 1:17 Update On Reversal Agents For The DOACs
Timothy K. Liem, MD, MBA

1:18 – 1:23 How To Manage Below Knee Venous Thrombosis
After Ultrasound Guided Foam Sclerotherapy For
Incompetent Venous Tributaries
Irwin V. Mohan, MBBS, MD

1:24 – 1:29 Lysis In The Upper Arm: Does The ATTRACT Trial
Results Influence Our View
Alun H. Davies, MA, DM, DSc

1:30 – 1:35 Pulmonary Embolism While On Therapeutic
Rivaroxaban
Joann Lohr, MD

1:36 – 1:41 Experimental Insights In Acute DVT And Post-Thrombotic Syndrome
Peter Henke, MD

1:42 – 1:47 Are There Any Clots That I Do Not Need To Treat: Superficial Thrombosis, Distal DVT Or Incidental PE
Rachel Rosovsky, MD, MPH

1:48 – 1:53 **Panel Discussion**

Moderators: *Mikel Sadek, MD*

Mark J. Garcia, MD

VTE INTERVENTIONAL

1:54 – 1:59 Single Session Continuous Aspiration Thrombectomy (SSCAT) For All DVT Utilizing Indigo Thrombectomy System
Patrick E. Muck, MD

2:00 – 2:05 Inari CloTrier Device For Acute DVT
William A. Marston, MD

2:06 – 2:11 Thrombolysis For Acute DVT: Utilization And Guidance From Current Clinical Trials
Brian G. DeRubertis, MD

2:12 – 2:17 Predictors Of, And Acceptable Rates For, And Outcome Of Venous Stent Fracture
Mahmood Razavi, MD

2:18 – 2:23 Finish Treatment Of Acute DVT In The Lab
Michael K.W. Lichtenberg, MD

2:24 – 2:29 Ultrasound-Accelerated Thrombolysis For Chronic DVT: The ACCESS Trial
Mark J. Garcia, MD

2:30 – 2:35 Treating Venous Thromboembolism Without Lytic Medications
Constantino Pena, MD

2:36 – 2:41 Angiovac Venous Thrombectomy: Where, When, And How
Mikel Sadek, MD

2:42 – 2:47 Endovascular Thrombus Removal In Patients With Paget-Schroetter Syndrome: Use Of The Indigo System
Thomas S. Maldonado, MD

2:48 – 2:53 Venous Issues In Thoracic Outlet Syndrome: Lysis, Venoplasty, First Rib Resection: Staged Or Same Setting
Enrique Criado, MD

2:54 – 2:59 Interventional Treatment Of Iliofemoral And Caval DVT In The Office Based Lab
Jeffrey Y. Wang, MD

3:00 – 3:05 Methods Of Opening A Thrombosed Iliac Venous Stent
Akhilesh K. Sista, MD

3:06 – 3:11 Outcome Of Venous Stents In Adolescents, Teenagers, And Pregnancy
Mahmood Razavi, MD

3:12 – 3:17 **Panel Discussion**

SESSION 92 (Trianon Ballroom, 3rd Floor)

ENDOASCULAR AND OPEN SOLUTIONS FOR INFERIOR VENA CAVA TUMORS AND OCCLUSIONS, VENA CAVA FILTRATION STRATEGIES, PITFALLS, AND COMPLICATIONS AND MORE ABOUT ILIAC VEIN STENTING

Moderators: *R. Clement Darling III, MD*

Bo G. Eklof, MD, PhD

MORE FEMORAL-ILIOCAVAL FLOW ISSUES

- 3:18 – 3:23** How Can We Evaluate Flow; When Is It Good Enough
Kathleen D. Gibson, MD
- 3:24 – 3:29** Is An Open Popliteal Vein A Prerequisite For Success; Does PMT Now Lead To Over-Stenting
Stephen A. Black, MD
- 3:30 – 3:35** How Important Is Rapid Flow Restoration In DVT
Robert A. Lookstein, MD, MHC DL
- 3:36 – 3:41** Thrombosed IVC Filter: How To Recanalize The Cava And Manage The Filter
Jose I. Almeida, MD, RPVI, RVT
- 3:42 – 3:47** Long-Term Patency Of Primary Inferior Vena Cava Reconstructions
Mark K. Eskandari, MD
- 3:48 – 3:53** IVC Replacement For Malignancy: How I Do It
R. Clement Darling III, MD
- 3:54 – 3:59** 15-Year Experience With Renal Cell Carcinoma Caval Tumor Thrombus
Mark K. Eskandari, MD
- 4:00 – 4:05** **Panel Discussion**

Moderators: *John E. Rectenwald, MD, MS*
David L. Gillespie, MD

CAVAL INTERRUPTION

- 4:06 – 4:11** Update On The PRESERVE Vena Cava Filter Study
David L. Gillespie, MD
- 4:12 – 4:17** Retrievable Inferior Vena Cava Filters – Removed But Not Forgotten
Joann Lohr, MD
- 4:18 – 4:23** Multicenter Experience With Celect Platinum Vena Caval Filter In The UK
Richard G. McWilliams, FRCR
- 4:24 – 4:29** The PREPIC Trial: Fact Or Fiction
John E. Rectenwald, MD, MS
- 4:30 – 4:35** Why Temporary Filters Are Not Removed: Clinical Predictors In 1,000 Consecutive Cases
Mark K. Eskandari, MD
- 4:36 – 4:41** What To Do With Fractured Filters And Embolic Filter Fragments
Constantino Pena, MD
- 4:42 – 4:47** The Novate Sentry Trial With A Novel Bio-Convertible IVC Filter: Follow-Up At 2 Years
Michael D. Dake, MD
- 4:48 – 4:53** Surgical Removal Of Perforated IVC Filters
Timothy K. Liem, MD, MBA
- 4:54 – 4:59** Avoiding And Managing IVC Disruption During Difficult IVC Filter Removal
Brian G. DeRubertis, MD
- 5:00 – 5:04** **Panel Discussion**
End of Program N

PROGRAM O (SESSIONS 93-96)
DIAGNOSIS AND TREATMENT OF VASCULAR MALFORMATIONS

Gramercy Suites, 2nd Floor

Course Leaders: *Wayne F. Yakes, MD*
Krassi Ivancev, MD, PhD
Robert L. Vogelzang, MD

SESSION 93 (Gramercy Suites, 2nd Floor)

BASICS

Moderators: *Krassi Ivancev, MD, PhD*
Scott A. Resnick, MD
Wayne F. Yakes, MD

- 7:00 – 7:08** The ISSVA Classification Of Vascular Malformations And Vascular Tumors
Laurence M. Boon, MD, PhD
- 7:08 – 7:16** MR Imaging In Vascular Malformations: Pre- And Post-Treatment
Scott A. Resnick, MD
- 7:16 – 7:24** Is It Cured? MR And Angiographic Imaging After Treatment With Radiopaque Embolizing Agents (Onyx)
Walter A. Wohlgemuth, MD
- 7:24 – 7:32** The Genetics Of Vascular Malformations
Laurence M. Boon, MD, PhD
- 7:32 – 7:40** The Yakes AVM Classification System: Its Curative Therapeutic Endovascular Implications
Fiona Rohlfs, MD
- 7:40 – 7:48** My Journey Into The Arteries Of The Brain And The First Carotid Angioplasty
Charles Kerber, MD

SESSION 94 (Gramercy Suites, 2nd Floor)

LOW-FLOW VASCULAR MALFORMATIONS

Moderators: *Robert L. Vogelzang, MD*
Laurence M. Boon, MD, PhD
Fiona Rohlfs, MD

- 7:48 – 7:56** Important Tips And Tricks Regarding The Technical Aspects Of Treating Low-Flow Malformations
Krassi Ivancev, MD, PhD
- 7:56 – 8:04** Avoiding Disaster: Identification And Management Of Connections To Deep Veins In Superficial Venous Malformations
Scott A. Resnick, MD
- 8:04 – 8:12** Surgical Results Of Treating Hepatic Hemangioma And Literature Review
Massimo Malagó, MD, PhD
- 8:12 – 8:20** Diagnosis And Treatment Of “Hepatic Hemangiomas”: A Misnomer
Wayne F. Yakes, MD
- 8:20 – 8:28** Clinically Relevant Hematologic Concerns In Venous Malformations
Gerald Legiehn, MD
- 8:28 – 8:36** Overview Of Sclerotherapy Liquid Embolic Agents: A World In Endovascular Confusion And Chaos
Wayne F. Yakes, MD
- 8:36 – 8:44** Low-Flow Vascular Malformation Management
Gerald Legiehn, MD
- 8:44 – 8:52** Histology And Treatment Of Glomangioma: Also Known As Glomovenous Malformations
Laurence M. Boon, MD, PhD
- 8:52 – 9:00** Going Rogue: Off The Grid Venous Malformation Sclerotherapeutic Techniques
Gerald Legiehn, MD

9:00 – 9:08 Curative Endovascular Management Of Extensive Venous And Lymphatic Malformations In Complex Anatomies
Wayne F. Yakes, MD

9:08 – 9:23 **Break – Visit Exhibits And Pavilions (2nd and 3rd Floors)**

SESSION 95 (Gramercy Suites, 2nd Floor)

HIGH-FLOW MALFORMATIONS

Moderators: *Walter A. Wohlgemuth, MD*

Antoinette S. Gomes, MD

Xingdong Fan, MD

9:23 – 9:31 HHT: Endovascular Management Techniques And Results
Mollie Meek, MD

9:31 – 9:39 “Acquired” AVMs: More Common Than We Think
Robert L. Vogelzang, MD

9:39 – 9:47 Building A Malformation Program: 10 Years Of Experience At The Cairo International Medical Center
Tarek M.S. Radwan, FRCS

9:47 – 9:55 Preparatory Endovascular Treatment For Definitive Surgical Cure Of Intra-Lipomatosis Capillary Venous Malformation
Tanya M. Oswald, MD

9:55 – 10:03 When, And What Type Of Surgery Is Needed In Treatment Of Vascular Malformation In Problematic Anatomies Of The Head & Neck
Randolph C. Robinson, MD, DDS

10:03 – 10:11 Yakes Type I, IIb, IIIa And IIIb: The Curative Retrograde Vein Approach
Robert L. Vogelzang, MD

10:11 – 10:19 Yakes Type IV Infiltrative AVMs Curative Treatment Strategies: A New Entity
Fiona Rohlffs, MD

10:19 – 10:27 Ethanol Endovascular Repair Of AVMs Of The Mandible And Ear
Xindong Fan, MD

10:27 – 10:35 100 Consecutive AVM Cases: Results Using The Yakes AVM Classification System
Fiona Rohlffs, MD

SESSION 96 (Gramercy Suites, 2nd Floor)

ENDOVASCULAR CONTROVERSIES IN AVM MANAGEMENT STRATEGIES

Moderators: *Mollie Meek, MD*

Gerald Legiehn, MD

Tanya M. Oswald, MD

10:35 – 10:43 Polymerizing Agents For AVM Treatment: Is It Curative Alone And How Often Is Surgery Required
Mollie Meek, MD

10:43 – 10:51 Treating Complex AVM Cases With Multiple Embolic Agents
Walter A. Wohlgemuth, MD

10:51 – 10:59 Ethylene Vinyl Alcohol Copolymer In The Treatment Of AVMs: Long-Term Results And Histology
Antoinette S. Gomes, MD

10:59 – 11:07 Long-Term Histologic Evaluation Of Resected AVMs In Head And Neck Post-Onyx Embolization
Mollie Meek, MD

- 11:07 – 11:15** Ethanol Curative Endovascular Treatment Of Hand & Foot AVMs
Xindong Fan, MD
- 11:15 – 11:23** Ethanol And Coils AVM Endovascular Bail-Out Procedures For Post-Onyx Failures
Wayne F. Yakes, MD
- Moderators:** *Wayne F. Yakes, MD*
Charles Kerber, MD
- DEBATE: AVMs**
- 11:23 – 11:28** Polymerizing Agents Can And Do Cure AVMs And Are Now The Agents Of Choice: Ethanol Is Too Dangerous - FOR
Antoinette S. Gomes, MD
- 11:28 – 11:33** Polymerizing Agents Can And Do Cure AVMs And Are Now The Agents Of Choice: Ethanol Is Too Dangerous - FOR
Walter A. Wohlgenuth, MD
- 11:33 – 11:38** Polymerizing Agents Can And Do Cure AVMs And Are Now The Agents Of Choice: Ethanol Is Too Dangerous - AGAINST
Krassi Ivancev, MD, PhD
- 11:38 – 11:43** Polymerizing Agents Can And Do Cure AVMs And Are Now The Agents Of Choice: Ethanol Is Too Dangerous - AGAINST
Robert L. Vogelzang, MD
- 11:43 – 11:45** **Rebuttal**
Antoinette S. Gomes, MD
- 11:45 – 11:47** **Rebuttal**
Walter A. Wohlgenuth, MD
- 11:47 – 11:49** **Rebuttal**
Krassi Ivancev, MD, PhD
- 11:49 – 11:51** **Rebuttal**
Robert L. Vogelzang, MD
- 11:51 – 12:00** Session Summation
Wayne F. Yakes, MD
End of Program O

SATURDAY, NOVEMBER 17, 2018

6:15 A.M. General Registration – 2nd Floor Promenade

6:15 A.M. Faculty Registration – Morgan Suite – 2nd Floor

6:15 A.M. Continental Breakfast – 3rd Floor Promenade/Foyer

CONCURRENT SATURDAY PROGRAMS

PROGRAM P: SESSIONS 97-103

Topics Too Hot Or Late Breaking To Miss: Related To The Lower Extremities, The Aorta, Its Branches, Carotid Arteries Or Assorted Vascular Subjects

Grand Ballroom East, 3rd Floor

Part 1: 6:50 A.M. – 2:05 P.M. (Sessions 97-101)

Grand Ballroom West, 3rd Floor

Part 2: 7:00 – 8:45 A.M. (Sessions 102-103)

PROGRAM Q: SESSIONS 104-108

Improving Outcomes In Hemodialysis Access

9:00 A.M. – 4:00 P.M.

Grand Ballroom West, 3rd Floor

Course Leaders: *Larry A. Scher, MD*

Anton N. Sidawy, MD, MPH

PROGRAM R: SESSIONS 109-114

Venous Disease

9:05 A.M. – 4:11 P.M.

Trianon Ballroom, 3rd Floor

Course Leaders: Jose I. Almeida, MD, RPVI, RVT
Lowell S. Kabnick, MD, RPhS
Kenneth Ouriel, MD, MBA
Thomas W. Wakefield, MD

PROGRAM P (SESSIONS 97-103)

TOPICS TOO HOT OR LATE BREAKING TO MISS: RELATED TO THE LOWER EXTREMITIES, THE AORTA, ITS BRANCHES, CAROTID ARTERIES OR ASSORTED VASCULAR SUBJECTS (4 ½ MINUTE FAST PACED TALKS)

Part 1: Grand Ballroom East, 3rd Floor (Sessions 97-101)

Part 2: Grand Ballroom West, 3rd Floor (Sessions 102 and 103)

PROGRAM P – PART 1

SESSION 97 (Grand Ballroom East, 3rd Floor)

LOWER EXTREMITY TOPICS TOO HOT TO MISS (4 ½ MINUTE FAST PACED TALKS)

Moderators: *Enrico Ascher, MD*

Jose Fernandes e Fernandes, MD, PhD

- | | |
|--------------------|---|
| 6:50 – 6:55 | Flush Occlusions Of The SFA Are Best Treated By Distal Access Together With Proximal Access: How To Do It
<i>Timothy W.I. Clark, MD</i> |
| 6:55 – 7:00 | Why The Poor Results Of Bioresorbable Stents In Coronary Arteries Should Not Apply To Their Great Potential In BTK And Crural Arteries
<i>Brian G. DeRubertis, MD</i> |
| 7:00 – 7:05 | Extensive Heel Gangrene With Advanced Arterial Disease: How To Achieve Limb Salvage: The Achilles Tendon Is Expendable And Patients Can Walk Well Without It
<i>Palma M. Shaw, MD</i>
<i>Frank J. Veith, MD</i> |
| 7:05 – 7:10 | Cryoamputation: Still A Useful And Lifesaving Procedure For Advanced CLTI And Infections In Critically Ill Patients: How To Do It And When
<i>Kenneth R. Ziegler, MD</i>
<i>Fred A. Weaver, MD</i> |
| 7:10 – 7:15 | Crush Stenting: A Better Technique For Treating Occluded Fempop Stents: Indications, Technique And Results
<i>Stefan Müller-Hülsbeck, MD</i> |
| 7:15 – 7:20 | Shockwave Energy To Facilitate Guidewire Crossing Of Difficult And Calcified CTOs (From Sound Bite Medical Solutions): Early Clinical Experience And Precautions
<i>Marianne Brodmann, MD</i>
<i>Andrew Benko, MD</i>
<i>Eric Therasse, MD</i> |
| 7:20 – 7:25 | Panel Discussion |
| 7:25 – 7:30 | Long-Term Results Of Inframalleolar Bypasses For CLTI
<i>Vikram S. Kashyap, MD</i> |
| 7:30 – 7:35 | Technical Tips To Make Distal Bypasses Work
<i>Hisham Rashid, FRCS</i> |

- 7:35 – 7:40** Why Open Endarterectomy Is The Best Treatment For Common Femoral Artery Lesions: It Is Still The Gold Standard In Most Cases Despite What You May Read And Hear
Jeffrey J. Siracuse, MD, RPVI
- 7:40 – 7:45** Importance Of Toe Pressures For Limb Salvage And Patient Survival: How They Can Be An Indication For High Doses Of High Potency Statins
Maarit Venermo, MD, PhD
- 7:45 – 7:50** Tips, Tricks, Equipment And Precautions For Transradial Artery Peripheral And Visceral Interventions
Furuzan Numan, MD
- 7:50 – 7:55** Comparative Cost Effectiveness Of DCBs vs. DESs Favor DESs
Francesco A. Aiello, MD
- 7:55 – 8:00** **Panel Discussion**

SESSION 98 (Grand Ballroom East, 3rd Floor)

MORE ABOUT LOWER EXTREMITY TOPICS TOO HOT TO MISS (4 ½ MINUTE FAST PACED TALKS)

Moderators: *Joseph L. Mills, MD*

Keith D. Calligaro, MD

- 8:00 – 8:05** WIfI Scoring With CLTI Patients Has Important Predictive Value Beyond Amputation Risk
William P. Robinson, MD
- 8:05 – 8:10** Update On How To Diagnose And Treat Mixed Arterial And Venous Ulcers
Katherine A. Gallagher, MD
- 8:10 – 8:15** Extreme Access For Treating CLTI Patients With Extensive Necrosis: Technical Tips
Miguel F. Montero-Baker, MD
- 8:15 – 8:20** High And Immeasurable ABIs In CLTI Patients With Infrapopliteal Occlusive Disease Is A Predictor Of Poor Amputation Free Survival: Why Is This So
Gert J. de Borst, MD, PhD
- 8:20 – 8:25** Endoscopic vs. Open Vein Harvest For Bypasses: What Are The Advantages And Disadvantages Of Each
Stephen M. Bauer, MD
- 8:25 – 8:30** Importance Of Maintaining Or Restoring Deep Femoral Artery Flow In Open And Endo Revascularizations For CLTI
Wayne W. Zhang, MD
- 8:30 – 8:35** **Panel Discussion**
- 8:35 – 8:40** How To Avoid And Treat Pitfalls In Fempop Endovascular Treatments: Dissections, Difficult Lumen Re-Entry And Knowing When To Stent
Eric Ducasse, MD, PhD
- 8:40 – 8:45** Endovascular Treatment Of Berger's Disease: Techniques And Results
Kamphol Laohapensang, MD
- 8:45 – 8:50** What Constitutes Severe Calcification In Fempop Arteries And How Does It Influence DCB Effectiveness: What Can Be Done About It
Fabrizio Fanelli, MD (Power Point Presentation With Synched Audio)
- 8:50 – 8:55** The Biolux Paseo-18 Lux DCB: Advantages And Good Patency Results In Difficult Fempop Lesions
Marianne Brodmann, MD
Gunnar Tepe, MD

- 8:55 – 9:00** Tips And Tricks For Crossing, Wiring And Treating BTK CTOs: It Isn't Simple And Technical Details Matter
Hiroyoshi Yokoi, MD
- 9:00 – 9:05** Combination Of Atherectomy (With Stealth 360 Device From CSI) And DCB For Treating Calcified Occlusions In BTK Arteries: How The Device Works And Preliminary Results
Marianne Brodmann, MD
- 9:05 – 9:10** **Panel Discussion**
- 9:10 – 9:20** **Refreshment Break – Visit Exhibits And Pavilions (3rd Floor)**

SESSION 99 (Grand Ballroom East, 3rd Floor)

AORTA AND ITS BRANCHES – HOT TOPICS TOO GOOD TO MISS (4 ½ MINUTE FAST PACED TALKS)

Moderators: *Timur P. Sarac, MD*
Daniel G. Clair, MD

- 9:20 – 9:25** Computational Seal Zone Mechanics Model For Predicting EVAR Failure In Neck Fixation And Seal: Value And Correlation With Real Results
Ross Milner, MD
- 9:25 – 9:30** Rapid Transport For Acute Aortic Syndrome Patients: When Should It Be Used And When Not
Fred A. Weaver, MD
- 9:30 – 9:35** Conversion And Explantation After Failed TEVAR: Indications, Technical Tips, Precautions
Robyn A. Macsata, MD
- 9:35 – 9:40** Patient Preferences For Open vs. Endo Repair For AAAs: How Are Patients Influenced And How Do Their Preferences Influence The Choice Of Procedure (From The PROVE-AAA RCT)
Philip P. Goodney, MD, MS
- 9:40 – 9:45** How To Treat By EVAR Complex Aorto-Iliac AAAs In Patients With Renal Transplants, Horseshoe Or Pelvic Kidneys: Technical Tips
Martin R. Back, MD
- 9:45 – 9:50** **DEBATE:** More Small AAAs (45-55 mm In Diameter) Should Be Fixed: Which Ones
Athanasios D. Giannoukas, MSc, MD, PhD
- 9:50 – 9:55** **DEBATE:** Too Many Small (45-55 mm) AAAs Are Treated By EVAR – At Least In The US
Daniel G. Clair, MD
- 9:55 – 10:00** Sandwich Technique For Treating AAAs Involving The Common Iliac Bifurcations: Experience With 151 Hypogastric Revascularizations: Lessons Learned
Armando C. Lobato, MD, PhD
- 10:00 – 10:05** **Panel Discussion**
- 10:05 – 10:10** New ESVS Guidelines For Treatment Of Occlusive Disease Of The Celiac Trunk And SMA: What Do They Tell Us About The Best Current Treatment
Martin Björck, MD, PhD
- 10:10 – 10:15** When And How Endovascular Treatment Can Be Helpful For Middle Aortic Syndrome And Renovascular Hypertension: Tips And Tricks To Make It Work: When Can It Not
George Hamilton, MD
- 10:15 – 10:20** Long-Term Patency Of Renal And Splanchnic Arteries After TAAA Open Repair
Germano Melissano, MD

- 10:20 – 10:25** Strategies And Technical Tips For Endovascular Treatment Of A Giant Hypogastric Artery Aneurysm
Jacques Busquet, MD
- 10:25 – 10:30** F/EVAR For Failed Open AAA Repair And Failed EVAR: Indications, Technical Tips, Precautions And Results
Athanasios Katsargyris, MD
Eric L.G. Verhoeven, MD, PhD
- 10:30 – 10:35** Status And Future Of ZFEN FEVAR: Advantages, Effect Of Using Outside Its IFU, Limitations
Gustavo S. Oderich, MD
- 10:35 – 10:40** Gutter Endoleaks On Completion Angiography With Ch/EVAR: When To Ignore; How To Prevent; When And How To Treat
Giovanni Torsello, MD
Konstantinos P. Donas, MD
- 10:40 – 10:45** **Panel Discussion**

SESSION 100 (Grand Ballroom East, 3rd Floor)

MORE AORTIC AND ITS BRANCHES TOPICS – TOO GOOD TO MISS (4 ½ MINUTE FAST PACED TALKS)

Moderators: *Fred A. Weaver, MD*
Gustavo S. Oderich, MD

- 10:45 – 10:50** Status Of Aortic Wrapping For Ascending Aortic Aneurysms: A Less Invasive Approach: Indications And Results
Ralf R. Kolvenbach, MD
- 10:50 – 10:55** New Devices For False Lumen Obliteration With TBADs: Indications And Results
Nikolaos Tsilimparis, MD PhD
Tilo Kölbel, MD, PhD
- 10:55 – 11:00** Value Of Fibrin Glue Sac Filling To Treat Type 1a Endoleaks After Standard EVAR With Bad Necks: Indications, Technique And 10-Year Results
Qingsheng Lu, MD
Zaiping Jing, MD
- 11:00 – 11:05** When Is Aortic Septotomy Indicated In Complicated TBADs: How To Do It Safely, Precautions And Results
Manish Mehta, MD, MPH
- 11:05 – 11:10** Single Branch Carotid Ch/TEVAR With Cervical Bypasses: A Simple Solution For Some Complex Aortic Arch Lesions: Technical Tips And Results
Luis A. Sanchez, MD
- 11:10 – 11:15** Long-Term Results Of Carotid Subclavian Bypasses In Conjunction With TEVAR: Complications And How To Avoid Them
Richard L. McCann, MD
- 11:15 – 11:20** Why Is Vertebral Artery Perfusion Important During TEVAR: With Normal And Abnormal Anatomy
Tareq M. Massemi, MD
- 11:20 – 11:25** **Panel Discussion**
- 11:25 – 11:30** Status Of Aortic Endografts For Occlusive Disease: Indications, Precautions, Technical Tips And Value
Robyn A. Macsata, MD
- 11:30 – 11:35** With Complex AAAs, How To Make Decisions Re Fenestrations vs. Branches: Which Bridging Branch Endografts Are Best
Timothy A. Resch, MD, PhD

- 11:35 – 11:40** Estimation Of Long-Term Aortic Risk After EVAR: The LEAR Model: How Can It Guide And Modulate Surveillance Protocols
Pete Holt, MD, PhD
Ian Loftus, MD
- 11:40 – 11:45** Value And Optimal Technique For Upper Extremity Access In Standard And Complex Endo AAA Repairs
Fred A. Weaver, MD
- 11:45 – 11:50** Advantages Of Cook Zenith Spiral Z Limbs For EVARs Landing In The External Iliac Artery
Naoki Fujimura, MD, PhD
- 11:50 – 11:55** Technical Tips And Results With Detachable Coils To Treat Visceral Artery Aneurysms: How To Maintain Critical Artery Flow: When Are Covered Stents Required
Paulo E. Ocke Reis, MD, PhD
- 11:55 – 12:00** Fast Track EVAR, TEVAR And TAVR: How To Do Them And Decrease Costs Safely
Zvonimir Krajcer, MD
- 12:00 – 12:05** **Panel Discussion**
- 12:05 – 1:00** **Lunch Break (3rd Floor Foyer and Promenade)**
Visit Exhibits And Pavilions (3rd Floor)

SESSION 101 (Grand Ballroom East, 3rd Floor)

HOT CAROTID AND VERTEBRAL TOPICS – TOO GOOD TO MISS (4 ½ MINUTE FAST PACED TALKS)

Moderators: *Frank J. Veith, MD*
Enrico Ascher, MD

- 1:00 – 1:05** Current Optimal Treatment For Vertebral Artery Disease: Indications And When Is Open Surgery The Best Option
Robert B. McLafferty, MD
- 1:05 – 1:10** Bailout Rescue Procedures When CEA Is Failing In A Critical Unstable Patient: ICA Stent Or Gore Hybrid Graft Or Standard PTFE Bypass: Indications For Each
Domenico Valenti, DMChir, PhD
- 1:10 – 1:15** Eversion vs. Standard CEA: A View Without Bias
Ross Naylor, MD
- 1:15 – 1:20** Why Are Carotid Stenoses Under- And Over-Estimated By Duplex Ultrasonography: How To Prevent These Problems
Nicos Labropoulos, BSc (Med), PhD, DIC, RVT
- 1:20 – 1:25** Results Of A Multicenter Italian Registry Of Real World CAS With The C-Guard Mesh Covered Stent: The IRONGUARD 2 Study
Francesco Speziale, MD
- 1:25 – 1:30** **Panel Discussion**
- 1:30 – 1:35** Is Drug Neuroprotection After Thrombectomy For Acute Stroke Or Other Ischemic Cerebral Insults Feasible: Future Prospects
Hernan A. Bazan, MD
- 1:35 – 1:40** What Clinical And Procedural Variables Increase The Risk Of Peri-Operative Stroke With CEA In Symptomatic Patients
Hans-Henning Eckstein, MD, PhD
- 1:40 – 1:45** Extracranial Carotid Aneurysms: Natural History, Diagnosis And Optimal Treatment: From A Registry Of 350 Cases
Gert J. de Borst, MD, PhD

- 1:45 – 1:50** Why The Differences In RCT And Registry Results For CAS Are Important In Determining Who Benefits From CAS And Who Does Not
Kosmas I. Paraskevas, MD
Frank J. Veith, MD
- 1:50 – 1:55** Why Indications For Invasive Treatment Of Carotid Stenosis Is Much Less In Women Than Men
Anne L. Abbott, MD, PhD
- 1:55 – 2:00** Value Of Statins In CAS Patients: What Drug, What Dose And When: How Do They Help
Mahmoud B. Malas, MD, MHS
- 2:00 – 2:05** **Panel Discussion**

PROGRAM P – PART 2

SESSION 102 (Grand Ballroom West, 3rd Floor)

MORE AORTIC AND AORTIC BRANCH TOPICS – TOO GOOD TO MISS (4 ½ MINUTE FAST PACED TALKS)

Moderators: *Ali F. AbuRahma, MD*
Sherif H. Ellozy, MD

AORTIC TOPICS

- 7:00 – 7:05** Do Re-Interventions Cause EVAR Infections
Michael J. Singh, MD
- 7:05 – 7:10** What Morphological Changes On CT After EVAR Predict The Need For Re-Interventions: From The DREAM Trial
Jan D. Blankensteijn, MD
- 7:10 – 7:15** Italian National Registry Results With Inner Branch Devices For Aortic Arch Disease
Ciro Ferrer, MD
- 7:15 – 7:20** Right Axillary Access For Complex EVARs And TEVARs: Advantages, Technical Tips And Preventing Strokes
Ross Milner, MD
- 7:20 – 7:25** Technical Tips For Open Conversion After Failed EVAR
William J. Quinones-Baldrich, MD
- 7:25 – 7:30** With Large Iliac Arteries, When Are Flared Limbs Acceptable And When Are IBDs Needed For Good Results
Gianluca Faggioli, MD
- 7:30 – 7:35** New Developments In The Management Of Blunt Aortic Injuries Using A Practical Grading System: Why It Matters
Elina Quiroga, MD
- 7:35 – 7:40** **Panel Discussion**
- 7:40 – 7:45** Selective SMA Stenting With F/EVAR: When Indicated, Value, Best Bridging Stent, Technical Tips
Mark A. Farber, MD
- 7:45 – 7:50** Technical Tips For Maintaining Carotid Flow During Branch Revascularization When Performing Zone 1 TEVARs
David J. Minion, MD
- 7:50 – 7:55** Successes And Limitations Of Endograft Treatment Of Aortic Infections: When Can It Be Effective Definitive Treatment And When It Can Only Be A Bridge To Definitive Open Treatment
Colin D. Bicknell, MD

- 7:55 – 8:00** New Facts, Issues And Treatment For Kommerell's Diverticula Of The Aorta With Anomalous Origin Of The Right Subclavian Artery
Frank J. Criado, MD
- 8:00 – 8:05** Indications And Advantages Of Antegrade In Situ Fenestration For F/EVAR: How To Do It
Dominique Fabre, MD
- 8:05 – 8:10** **Panel Discussion**

SESSION 103 (Grand Ballroom West, 3rd Floor)
MISCELLANEOUS TOPICS TOO GOOD TO MISS (4 ½ MINUTE FAST PACED TALKS)

Moderators: *Kenneth Ouriel, MD, MBA*
Enrico Ascher, MD

- 8:10 – 8:15** Thrombo-Embolic Complications Of Inflammatory Bowel Disease: Nature, Etiology And Significance
Joanelle Z. Lugo, MD
- 8:15 – 8:20** Importance Of Flexion/Extension Movements In The Treatment Of Tibial Artery Lesions: Especially When Stents Are Used
Brian G. DeRubertis, MD
- 8:20 – 8:25** How Vascular Surgeons/Specialists Can Help Tobacco Addicted Patients: It Is Not Simple
Scott L. Stevens, MD
- 8:25 – 8:30** Non-Fasting Lipid Profiles Are A Simplification With No Negative Consequences For Diagnosis, Risk Evaluation And Treatment
Peter Henke, MD
- 8:30 – 8:35** An Anti-Inflammatory Diet: What Is It And What Is Its Value In Vascular Disease
Daniel G. Clair, MD
- 8:35 – 8:40** Below-The-Elbow Angioplasty For CLTI Of The Hand: Indications, Techniques Results
Timothy W.I. Clark, MD
- 8:40 – 8:45** **Panel Discussion**
- 8:45 – 9:00** **Refreshment Break**
End of Program P
(Program P continues in the Grand Ballroom East.)

PROGRAM Q (SESSIONS 104-108)
IMPROVING OUTCOMES IN HEMODIALYSIS ACCESS

Grand Ballroom West, 3rd Floor

Course Leaders: *Larry A. Scher, MD*
Anton N. Sidawy, MD, MPH

- 9:00 – 9:05** Introduction
Anton N. Sidawy, MD, MPH
Larry A. Scher, MD

SESSION 104 (Grand Ballroom West, 3rd Floor)
IMPORTANT ISSUES IN HEMODIALYSIS ACCESS

Moderators: *Larry A. Scher, MD*
Anton N. Sidawy, MD, MPH

- 9:06 – 9:13** 2018 Update On KDOQI Guidelines For Dialysis Access
Surendra Shenoy, MD, PhD
- 9:14 – 9:21** International Differences In The Location And Use Of AV Access Created For Hemodialysis: Results Of The DOPPS
Haimanot (Monnie) Wasse, MD, MPH

SATURDAY SESSIONS 104–105

- 9:22 – 9:29** When To Refer Patients For Hemodialysis Access And Who Should Monitor The Maturation Process
Theodore F. Saad, MD
- 9:30 – 9:37** Educating Your Patients To Advocate For Themselves In The Dialysis Clinic
Scott S. Berman, MD, MHA
- 9:38 – 9:45** Fistula First Access Planning And Weekly Assessment Tools
Deborah Brouwer-Maier, RN, CNN
- 9:46 – 9:54** **Panel Discussion**
- 9:55 – 10:02** Pump Speed, Needle Size, And Fistula Flow: Means To What End
Theodore F. Saad, MD
- 10:03 – 10:10** Cannulation Mapping: How Does It Help The Dialysis Staff
Surendra Shenoy, MD, PhD
- 10:11 – 10:18** “Threading The Needle”: An Innovative Approach To Teaching Fistula Cannulation Skills
David L. Cull, MD
- 10:19 – 10:26** Utility Of Duplex Ultrasound For Hemodialysis Access Volume Flow And Velocity Measurements
Clifford M. Sales, MD, MBA
- 10:27 – 10:35** Selecting End Points For Pivotal Hemodialysis AV Fistula Clinical Trials: Functional Suitability vs. Anatomical Surrogates
Sriram S. Iyer, MD
- 10:36 – 10:44** **Panel Discussion**
- 10:45 – 11:00** **Break – Visit Exhibits And Pavilions (3rd Floor)**

SESSION 105 (Grand Ballroom West, 3rd Floor)

OPTIMIZING OUTCOMES IN HEMODIALYSIS ACCESS

Moderators: *Haimanot (Monnie) Wasse, MD, MPH*
Clifford M. Sales, MD, MBA

- 11:00 – 11:07** Routine Use Of Ultrasound To Avoid Complications During Placement Of Tunneled Dialysis Catheters: Analysis Of 2805 Cases
Anil P. Hingorani, MD
- 11:08 – 11:15** Minimizing Risks From Long-Term Central Venous Catheter Use In Dialysis Patients
Ellen D. Dillavou, MD
- 11:16 – 11:23** Inflow, Outflow, Conduit: Algorithms For Optimizing Vascular Access Placement
John R. Ross, Sr., MD
- 11:24 – 11:31** Vascular Access Procedure Selection (VAPS) Mobile App: Current Status And Future Directions
David L. Cull, MD
- 11:32 – 11:39** Long-Term Results Of AV Fistulas And Grafts
Samy S. Nitecki, MD
- 11:40 – 11:47** Novel Intermittent Pneumatic Compression Is The Future Of Cost Effective Fistula Maturation
Tej M. Singh, MD, MBA
- 11:48 – 11:56** **Panel Discussion**
- 11:56 – 12:35** **Lunch Break – Visit Exhibits And Pavilions (3rd Floor)**

SESSION 106 (Grand Ballroom West, 3rd Floor)

POLITICAL, ECONOMIC AND LEGAL ISSUES IN HEMODIALYSIS ACCESS

Moderators: *Theodore F. Saad, MD*
David L. Cull, MD

- 12:36 – 12:43** Developing Efficient And Effective Regulatory Pathways For Patient Centered Device Innovation
Prabir Roy-Chaudhury, MD, PhD
- 12:44 – 12:51** Converting Your Access Center From An Office-Based Surgery Center To An Ambulatory Care Facility
Gregg A. Miller, MD
- 12:52 – 12:59** Episode Based Payment Models For Dialysis Access Creation
Evan C. Lipsitz, MD, MBA
- 1:00 – 1:07** Providing Long-Term Value In The Treatment Of The Thrombosed Dialysis Access Circuit
John E. Aruny, MD
- 1:08 – 1:15** Use Of SVS/VQI Data To Facilitate Development Of New Vascular Access Treatments
Fred A. Weaver, MD
- 1:16 – 1:24** **Panel Discussion**

SESSION 107 (Grand Ballroom West, 3rd Floor)

NEW TECHNOLOGIES AND CONCEPTS IN HEMODIALYSIS ACCESS

Moderators: *Larry A. Scher, MD*
John E. Aruny, MD

- 1:25 – 1:32** Local Drug Delivery For AV Access Dysfunction: Opportunities And Challenges
Prabir Roy-Chaudhury, MD, PhD
- 1:33 – 1:40** Use Of Clarivein Catheter For Pharmacomechanical Thrombolysis Of Thrombosed Dialysis Access Grafts
Steven Kum, MD
- 1:41 – 1:48** Flow Forward Technology To Increase Usable Veins And Improve AV Fistula Outcomes
Surendra Shenoy, MD, PhD
- 1:49 – 1:56** Results Of Phase 3 Trials Of Vonapanitase In Vascular Access
C. Keith Ozaki, MD
- 1:57 – 2:04** Healionics: A New Dialysis Access Graft That Resists Infection And Remains Patent
Benjamin W. Starnes, MD
- 2:05 – 2:12** Early Results Of Percutaneous Arteriovenous Fistula Creation With The Ellipsys Vascular Access System
Alexandros Mallios, MD
- 2:13 – 2:20** Update On The everlinQ[®] Percutaneous Fistula Device
Paul B. Kreienberg, MD
- 2:21 – 2:29** **Panel Discussion**

SESSION 108 (Grand Ballroom West, 3rd Floor)

UPDATE ON CLINICAL CHALLENGES IN HEMODIALYSIS ACCESS

Moderators: *Larry A. Scher, MD*
Anton N. Sidawy, MD, MPH

- 2:30 – 2:37** Surgical vs. Endovascular Management Of Cephalic Arch Syndrome
Mark G. Davies, MD

- 2:38 – 2:45** Algorithms For Managing Steal Syndrome: When Is Banding Appropriate
Matthew J. Dougherty, MD
- 2:46 – 2:53** Current Management Of Bleeding Hemodialysis Fistulas: Can The Fistula Be Salvaged
Christian Ochoa, MD
- 2:54 – 3:01** Challenges And Solutions In Complex Dialysis Access Cases
Scott S. Berman, MD, MHA
- 3:02 – 3:09** Use Of Indirect Access Sites For AV Intervention
David Fox, MD, RPVI
- 3:10 – 3:18** **Panel Discussion**
- 3:19 – 3:26** Elevation Or Retunneling For Second Stage Basilic Vein Transposition
Mark G. Davies, MD
- 3:27 – 3:34** AV Access Options In Patients With Bilateral Innominate Vein Occlusion
Karl A. Illig, MD
- 3:35 – 3:42** Use Of Right Atrial Bypasses For Permanent AV Access In ESRD Patients With Central Venous Occlusion: Indications, Technical Tips And Precautions
Robyn A. Macsata, MD
- 3:43 – 4:00** **Panel Discussion**
End of Program Q

PROGRAM R (SESSIONS 109-114)

VENOUS DISEASE

Trianon Ballroom, 3rd Floor

Course Leaders: *Jose I. Almeida, MD, RPVI, RVT*
Lowell S. Kabnick, MD, RPhS
Kenneth Ouriel, MD, MBA
Thomas W. Wakefield, MD

SESSION 109 (Trianon Ballroom, 3rd Floor)

VENOUS IMAGING, THROMBOPHILIA

Moderators: *Jose I. Almeida, MD, RPVI, RVT*
Lowell S. Kabnick, MD, RPhS
Thomas W. Wakefield, MD
Kenneth Ouriel, MD, MBA

MORE THROMBOPHILIA

- 9:05 – 9:10** Duration Of Anticoagulation For DVT: The Forgotten Trifecta
Joseph A. Caprini, MD
- 9:11 – 9:16** Bridging Anticoagulation With The Direct Oral Anticoagulants
Timothy K. Liem, MD, MBA
- 9:17 – 9:22** Venous Thrombophlebitis: Anticoagulation, Compression, Follow-Up
Sarah Onida, MD, PhD
- 9:23 – 9:28** Managing Anticoagulation To Avoid Postoperative Hemorrhage
Timothy K. Liem, MD, MBA
- 9:29 – 9:34** Post-Thrombotic Syndrome: Do We Know The Predictive Factors
Tomasz Urbanek, MD, PhD
- 9:35 – 9:40** **Panel Discussion**

SESSION 110 (Trianon Ballroom, 3rd Floor)

EXAMINING THE EVIDENCE

Moderators: *Thomas F. O'Donnell, Jr., MD*
Glenn Jacobowitz, MD

- 9:41 – 9:46** Compression Post-Ablation Is Unnecessary
Todd Berland, MD
- 9:47 – 9:52** Phlebolympheidema: Hallmark Of Combined Insufficiency Of Venous-Lymphatic System
Byung-Boong (B.B.) Lee, MD
- 9:53 – 9:58** Thrombosis Prophylaxis Following Venous Ablation
Joseph A. Caprini, MD
- 9:59 – 10:04** Why Graduated Compression Is An Insurance Requirement
Thomas F. O'Donnell, Jr., MD
- 10:05 – 10:10** Thermal Ablation In Anticoagulated Patients: Is It Safe And Effective
Glenn Jacobowitz, MD
- 10:11 – 10:16** Evidence Based Compression Recommendations For Lymphedema
Fedor Lurie, MD, PhD
- 10:17 – 10:22** Is C2 Disease Progressive
Mark H. Meissner, MD
- 10:23 – 10:28** Glue vs. MOCA: Which Is Best, Preliminary Data From An RCT
Alun H. Davies, MA, DM, DSc
- 10:29 – 10:34** **Panel Discussion**

SESSION 111 (Trianon Ballroom, 3rd Floor)

DEEP SYSTEM: ATTRACT TRIAL, NEW TECHNOLOGIES, VENOUS STENTING CHALLENGES

Moderators: *Jose I. Almeida, MD, RPVI, RVT*
Marzia Lugli, MD

- 10:35 – 10:40** The Role Of Extravascular Correction Of Deep Vein Valves
Evgeny Shaydakov, MD, PhD
- 10:41 – 10:46** Original Model Of Autologous Deep Venous Neovalve (An Experimental Study)
Evgeny Shaydakov, MD, PhD
- 10:47 – 10:52** Surgical Creation Of A Moncuspid Valve
Marzia Lugli, MD
- 10:53 – 10:58** Surgical Creation Of “Rival” Bicuspid Valve And Its Place In The Treatment Of Venous Ulceration
Ramesh K. Tripathi, MD
- 10:59 – 11:04** Prosthetic Venous Valve Changes Until Now
Jose I. Almeida, MD, RPVI, RVT
- 11:05 – 11:10** Blueleaf Endovenous Valve: Potential Benefits Of An All-Autogenous Solution
Mikel Sadek, MD
- 11:11 – 11:16** Sail Valve
Steve Elias, MD
- 11:17 – 11:22** **Panel Discussion**

Moderators: *Kenneth Ouriel, MD, MBA*
Fedor Lurie, MD, PhD

ATTRACT TRIAL AND TRIBULATIONS

11:23 – 11:28 Does The ATTRACT Trial Result Change How You Manage Patients With Acute DVT
Michael R. Jaff, DO

11:29 – 11:34 The Open Vessel Hypothesis: Applicability To DVT
Kenneth Ouriel, MD, MBA

11:35 – 11:40 Is ATTRACT The Final Word On Lysis Of Proximal Deep Vein Thrombosis
Brian G. DeRubertis, MD

11:41 – 11:46 Subgroup Analyses Of The ATTRACT Trial
Anthony J. Comerota, MD

11:47 – 11:52 **Panel Discussion**

Moderators: *Gerard J. O'Sullivan, MD*
Lowell S. Kabnick, MD, RPhS

NEW CHALLENGES IN VENOUS STENTING

11:53 – 11:58 Oh My: The Stent Got Away, Now What
Gerard J. O'Sullivan, MD

11:59 – 12:04 What Is The Optimal Anticoagulant/Antithrombotic Regimen For Patients Undergoing Iliac Vein Stent
Michael R. Jaff, DO

12:05 – 12:10 Non-Invasive 24/7 Flow Augmentation In Deep Venous Pathology
Cees H.A. Wittens, MD, PhD

12:11 – 12:16 Which Stent Would I Use In: Malignancy, Across Inguinal Ligament, IVC, Into Profunda Femoris Vein
Gerard J. O'Sullivan, MD

12:17 – 12:22 **Panel Discussion**

12:23 – 1:00 **Lunch Break (3rd Floor Foyer and Promenade)**
Visit Exhibits And Pavilions (3rd Floor)

SESSION 112 (Trianon Ballroom, 3rd Floor)

MORE USEFUL SUPERFICIAL VEIN INFORMATIONS

Moderators: *Harold J. Welch, MD*
Cees H.A. Wittens, MD, PhD

1:00 – 1:05 Laser Or Ohmic Devices For Telangiectasia: When And Why
Edward G. Mackay, MD

1:06 – 1:11 Outcome Assessment Of Venous Disease
Lowell S. Kabnick, MD, RPhS

1:12 – 1:17 How To Treat Labial Varices: Sclerotherapy, USG Sclerotherapy And Or Phlebectomy
Ellen D. Dillavou, MD

1:18 – 1:23 Iliocaval Duplex Ultrasound With Image Optimization Instead Of Cross-Sectional
Jose I. Almeida, MD, RPVI, RVT

1:24 – 1:29 SVT In The Pregnant Patient
Ellen D. Dillavou, MD

1:30 – 1:35 Innovative Assessment Of Perforating Vein Incompetence: The Difference Between Outward And Net Flow
Sergio Giancesini, MD, PhD

1:36 – 1:41 Standardized Aquatic Protocol For Phlebolymphe'dema Patients
Sergio Giancesini, MD, PhD

- 1:42 – 1:47** The Optimal Dataset To Evaluate Venous Treatments (Clinical Scores And QOL) In Collaboration With ICHOM
Cees H.A. Wittens, MD, PhD
- 1:48 – 1:53** The Fate Of The Below Knee Deep Veins After Ultrasound Guided Foam Sclerotherapy For Incompetent Venous Tributaries
Irwin V. Mohan, MBBS, MD
- 1:54 – 1:59** **Panel Discussion**

SESSION 113 (Trianon Ballroom, 3rd Floor)

SCLEROTHERAPY/PHLEBECTOMY

Moderators: *Edward G. Mackay, MD*
Ellen D. Dillavou, MD

- 2:00 – 2:05** Step-By-Step Treatment For Corona Phlebectatica
Alberto C. Duque, MD
- 2:06 – 2:11** How To Treat The Foot Varicose Veins
Gutenberg Gurgel, MD
- 2:12 – 2:17** Step-By-Step Treatment Using Foam Sclerotherapy For Varicose Veins
Jean Luc Gerard, MD
- 2:18 – 2:23** Frustrating Results Of Sclerotherapy And How To Avoid Them
Kasuo Miyake, MD, PhD
- 2:24 – 2:29** Sclerotherapy For Telangiectasia
Edward G. Mackay, MD
- 2:30 – 2:35** Sclerotherapy Foam vs. Liquid For Reticular Veins
Ellen D. Dillavou, MD
- 2:36 – 2:41** **Panel Discussion**

SESSION 114 (Trianon Ballroom, 3rd Floor)

SUPERFICIAL VENOUS ABLATION, COMPRESSION, AND RESEARCH

Moderators: *Joseph A. Caprini, MD*
Peter J. Pappas, MD

- 2:42 – 2:47** When To Use Inelastic Compression
Joseph A. Caprini, MD
- 2:48 – 2:53** Liposuction For Lymphedema
Håkan Brorson, MD, PhD
- 2:54 – 2:59** Lipedema: A Common Clinical Entity Rarely Diagnosed
S. Scott Tapper, MD
- 3:00 – 3:05** Lower Limb Volume And Perceived Exertion Variation In Standardized Walk With And Without Graduated Compression
Sergio Giancesini, MD, PhD
- 3:06 – 3:11** Newer Diagnostic Modalities In The Evaluation Of Lymphedema
Thomas F. O'Donnell, Jr., MD
- 3:12 – 3:17** Flying And VTE Risks
Sarah Onida, MD, PhD
- 3:18 – 3:23** Risk Assessment For Thrombosis Prophylaxis In Vascular Surgery – Necessary Or A Nuisance
Joseph A. Caprini, MD
- 3:24 – 3:29** Venous Outcomes In Medicare Beneficiaries: Multicenter Study
Peter J. Pappas, MD

- 3:30 – 3:35** Drugs For Venous Symptoms
Alberto C. Duque, MD
- 3:36 – 3:41** The Future Of Venous Reimbursement In A Non-Fee
For Service Environment
Thomas F. O'Donnell, Jr., MD
- 3:42 – 3:47** Which Patients Benefit From A Lymphedema Pump
Thomas S. Maldonado, MD
- 3:48 – 3:53** Is Thermal Ablation Obsolete
Lowell S. Kabnick, MD, RPhS
- 3:54 – 4:10** **Panel Discussion**
- End of Program R*

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Baltimore, Maryland

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Roanoke, Virginia

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Worcester, Massachusetts

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RVT**
Miami, Florida

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Reading, Pennsylvania

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B

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Florence, Italy

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**Jose Fernandes e Fernandes, MD,
PhD, FRCS (Eng), FACS, FESC,
FEBVS**
Lisbon, Portugal

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Tokyo, Japan

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Chur, Switzerland

John H. Furtek, BS RT(r)
Charleston, South Carolina



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MD, PhD, FEBVS**
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Paris, France

Peter Henke, MD
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Luxembourg and Hyderabad, India

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FEBVS**
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Orangeburg, South Carolina

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Krassi Ivancev, MD, PhD
Hamburg, Germany

Sriram S. Iyer, MD, FACC
New York, New York

J

Benjamin M. Jackson, MD
Philadelphia, Pennsylvania

Glenn Jacobowitz, MD
New York, New York

Michael J. Jacobs, MD
Maastricht, The Netherlands

Michael R. Jaff, DO
Boston, Massachusetts

Krishna Jain, MD
Kalamazoo, Michigan

Houman Jalaie, MD
Aachen, NRW, Germany

**Michael P. Jenkins, MBBS, BSc, MS,
FRCS, FEBVS**
London, United Kingdom

James W. Jones, MD, PhD, MHA
Houston, Texas

William D. Jordan, Jr., MD
Atlanta, Georgia

K

**Lowell S. Kabnick, MD, RPhS,
FACS, FACPh**
New York, New York

Daniella Kadian-Dodov, MD
New York, New York

Susan R. Kahn, MD, MSc
Montreal, Canada

Manju Kalra, MBBS
Rochester, Minnesota

Vikram S. Kashyap, MD
Cleveland, Ohio

Karthikeshwar Kasirajan, MD
Alamo, California

Piotr M. Kasprzak, MD
Regensburg, Germany

**Konstantinos Katsanos, MSc, MD,
PhD, EBIR**
Patras, Greece

Athanasios Katsargyris, MD
Nuremberg, Germany

Barry T. Katzen, MD
Miami, Florida

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Charles Kerber, MD
San Diego, California

Neil M. Khilnani, MD
New York, New York

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New York, New York
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Hamburg, Germany

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Amsterdam, The Netherlands

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Columbus, Ohio

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Larry W. Kraiss, MD
Salt Lake City, Utah

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Riga, Latvia

Boonprasit Kritpracha, MD
Hat Yai, Songkhla, Thailand

Steven Kum, MD
Singapore

Christopher J. Kwolek, MD
Boston, Massachusetts

L

**Nicos Labropoulos, BSc (Med),
PhD, DIC, RVT**
Stony Brook, New York

Mario L. Lachat, MD
Zurich, Switzerland

John R. Laird, MD
St. Helena, California

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Baltimore, Maryland

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Kamphol Laohapensang, MD
Chiang Mai, Thailand

Thomas Larzon, MD, PhD
Örebro, Sweden

George S. Lavenson, MD
*Bethesda, Maryland and
Honolulu, Hawaii*

FACULTY

Peter F. Lawrence, MD
Los Angeles, California

Jeffrey H. Lawson, MD, PhD
Durham, North Carolina

Byung-Boong Lee, MD
Washington, District of Columbia

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Stanford, California

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**Thomas F. Lindsay, MDCM, FRCS,
FACS**
Toronto, Ontario, Canada

Evan C. Lipsitz, MD, MBA
New York, New York

Armando C. Lobato, MD, PhD
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London, United Kingdom

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Cincinnati, Ohio

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Copenhagen, Denmark

**Robert A. Lookstein, MD, MHC DL,
FSIR, FAHA**
New York, New York

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Shanghai, China

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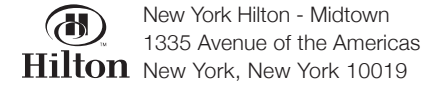
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