

# VEITH SYMPOSIUM®

Connecting The **Vascular** Community

**44<sup>th</sup>**

**Tuesday - Saturday, November 14-18, 2017**

VASCULAR ENDOVASCULAR ISSUES TECHNIQUES HORIZONS

Symposium Chairman

**Frank J. Veith, MD**

Symposium Co-Chairmen

**Enrico Ascher, MD**

**Kenneth Ouriel, MD, MBA**

**Sean P. Lyden, MD**

Sponsored by



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IN COLLABORATION WITH

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Society for  
Vascular Surgery

[www.VEITHsymposium.org](http://www.VEITHsymposium.org)

# PROGRAM OUTLINE AT A GLANCE

## TUESDAY PROGRAMS

### Program A: (Sessions 1-8)

6:40 A.M. – 5:22 P.M.

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

**Location:** Grand Ballroom East, 3rd Floor

### Program B: (Sessions 9-16)

6:40 A.M. – 5:54 P.M.

New Developments In The Treatment Of AAAs (EVAR), Aortic Branch Lesions (Iliac, Visceral, Renal); Outpatient And Practice Issues; Laparoscopy, Robotics And Simulation; Complex AAAs; New Techniques And Concepts And Open Or Hybrid Vascular Surgical Techniques

**Location:** Grand Ballroom West, 3rd Floor

### 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. – 6:00 P.M.

Diagnosis And Management Of Vascular Malformations

Course Leaders: Wayne F. Yakes, MD,

Krassi Ivancev, MD, PhD, Robert L.

Vogelzang, MD

**Location:** Trianon Ballroom, 3rd Floor

## WEDNESDAY PROGRAMS

### Program E: (Sessions 23-30)

6:40 A.M. – 5:52 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. – 6:06 P.M.

New Developments In Medical, Anti-Atherogenic And Anti-Hypertensive Treatments; Endoleak Management; Issues And Other Important Topics Related To History, Government, Reimbursement, Ethics, Practice And Vascular Care

**Location:** Grand Ballroom West, 3rd Floor

### Program G: (Sessions 39-46)

6:50 A.M. – 5:57 P.M.

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

**Location:** Trianon Ballroom, 3rd Floor

## THURSDAY PROGRAMS

### Program H: (Sessions 47-54)

6:50 A.M. – 5:54 P.M.

New Techniques, Technology, Concepts: Advances In F/B/EVAR And Parallel Grafts For Complex AAAs And TAAAs; Tribute To Our Military; Advances In Management Of Ruptured AAAs; New Developments In Robotics, Guidance And Imaging Systems; Radiation Safety, New Concepts And Devices

**Location:** Grand Ballroom East, 3rd Floor

### Program I: (Sessions 55-62)

6:40 A.M. – 5:32 P.M.

New Devices For EVAR And Complex AAA Repair; TEVAR And TAAA Repair; Lower Extremity Treatment; Prevention Of Endoleaks And Migration (EndoAnchors); Clot Removal And Embolization

**Location:** Grand Ballroom West, 3rd Floor

### Program J: (Sessions 63-70)

7:20 A.M. – 5:11 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

## FRIDAY PROGRAMS

### Program K: (Sessions 71-78)

6:40 A.M. – 6:00 P.M.

New And Improved Old Techniques; Carotid Related Topics; New Developments In Spinal Cord Ischemia (SCI); Updates And Continuing Controversies; New Techniques, Updates And Concepts; Advances In Wound Care And PEVAR

**Location:** Grand Ballroom East, 3rd Floor

### Program L: (Sessions 79-87)

6:40 A.M. – 5:25 P.M.

New Developments In Popliteal Aneurysms And Disease; Management Of Infected Arteries, Prosthetic Grafts And Endografts; Advances In Imaging, Guidance, Hybrid Suites, Thoracic Outlet Syndromes, Medical Diseases And Treatment, Vascular Trauma Treatment And Radiation Safety

**Location:** Grand Ballroom West, 3rd Floor

### Program M: (Sessions 88-92)

7:55 A.M. – 5:06 P.M.

Deep Venous Disease

**Location:** Trianon Ballroom, 3rd Floor

## SATURDAY PROGRAMS

### Program N: (Sessions 93-100)

6:50 A.M. – 4:25 P.M.

New Developments And Hot Topics In The Treatment Of Lower Extremity, Carotid And Aortic Disease; Vascular Trauma And Key Miscellaneous Hot Topics

**Location:** Grand Ballroom East, 3rd Floor

### Program O: (Sessions 101-105)

7:55 A.M. – 4:25 P.M.

New Developments In Vascular Access For Hemodialysis

Course Leaders: Larry A. Scher, MD,

Anton N. Sidawy, MD, MPH

**Location:** Grand Ballroom West, 3rd Floor

### Program P: (Sessions 106-109)

8:00 A.M. – 12:25 P.M.

More Hot Venous Disease Topics

**Location:** Trianon Ballroom, 3rd Floor



**SYMPOSIUM CHAIRMAN**  
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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

#### ACKNOWLEDGMENTS

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24–27 APRIL 2018

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Vascular & Endovascular  
Controversies Update

CONTROVERSIES CHALLENGES CONSENSUS

YEARS  
OF LOOKING  
FORWARD

EDUCATION INNOVATION EVIDENCE

Aortic  
Controversies

Peripheral  
Arterial  
Controversies

10 Years of  
ileg

Venous  
Controversies

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CX Venous  
Workshop

Acute  
Stroke  
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Dittmar Böckler, *Heidelberg, Germany*

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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

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 our website at [www.veithsymposium.org](http://www.veithsymposium.org) for additional information and instructions on how to submit an abstract to the Associate Faculty Global Podium Presentations component of VEITHsymposium.

## GENERAL SESSIONS

General Sessions will be held in the Grand Ballroom East, Grand Ballroom West, and in the Trianon Ballroom on the 3rd floor on Tuesday, Wednesday, Thursday, Friday and Saturday.

## COMPONENT SESSIONS WILL BE HELD AS FOLLOWS:

### **Innovation and Investment Roundtable**

Thursday, November 16, 2017

**Location:** Concourse A, Concourse Level

### **Hemodialysis Access**

Saturday, November 18, 2017

**Location:** Grand Ballroom West, 3rd floor

### **AIMSymposium Multidisciplinary Acute Stroke Management**

Thursday, November 16, 2017

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

VEITHsymposium registrants are welcome to attend at no additional cost.

The VEITHsymposium Innovation and Investment (I&I) Roundtable, now in its fourth year, is a session dedicated to the presentation of novel medical products that have the potential to truly change patient care and the management of complex cardiovascular diseases. The presentations are by invitation only. Manufacturers and their topics are chosen by the VEITHsymposium Organizing Committee based upon knowledge of unique products that are at various stages of development. The roundtable session provides opportunities for manufacturers to showcase technology that, in many cases, will require further investment to complete development and clinical research. Similarly, the session provides an interactive setting for investors and investment firms to see novel technologies and probe the challenges and potential for each, with ample time for question and answer period that follows each presentation. Lastly, key cardiovascular thought leaders, physicians and scientists alike, are invited by the Organizing Committee to be in attendance and provide candid views on each innovation.

The VEITHsymposium Organizing Committee believes that the I&I Roundtable offers a unique opportunity to see the latest in novel, game-changing cardiovascular technology, all in one place and over the course of a half-day. This is an event that should not be missed by anyone with scientific or financial interests in emerging cardiovascular technology. (This is a non-CME activity.)



# GENERAL INFORMATION

## **VENOUS VENOUS VENOUS WORKSHOPS AT VEITHSymposium - ASK THE EXPERTS!**

Wednesday, November 15, 2017

1:00 P.M. - 6:00 P.M.

**Location:** Americas Hall II, 3rd floor

Workshops will include lectures and demonstrations on vein management by experts, and hands-on opportunities where participants can rotate through multiple training stations staffed by faculty.

Registration Fee: \$25 (available to fully paid VEITHSymposium Clinicians). Space is Limited.

### **Module 1: Acute DVT and Venous Obstruction**

IVUS, Thrombolysis & Thrombectomy, Stents & Filters, Difficult Recanalizations (How to do Stenting)

### **Module 2: Superficial Cluster Vein Treatment**

Ambulatory Phlebectomy, TIPP, Sclerotherapy

### **Module 3: Medical Therapy**

Lymphedema, Lipedema, Venous Edema, Wound Care, Anticoagulation

### **Module 4: Superficial Truncal Disease – Thermal & Non-Thermal**

EVLT, RFT, PAPS, Ohmic Devices, Mechanochemical, Chemical Adhesives (Glues and Microfoam)

Visit [www.veithsymposium.org](http://www.veithsymposium.org) for details.

(This is a non-CME activity.)

## **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 48.5 *AMA PRA Category 1 Credits*<sup>TM</sup>. 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.

## **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](http://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, 2018**.

## **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.

## GENERAL INFORMATION

### 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](mailto:admin@veithsymposium.org), or by fax to (845) 368-2324.

### 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](http://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](http://www.veithsymposium.org) after the meeting. Abstracts will be available on the website for one full year.

## SOCIAL EVENTS

### FIRST HAND TICKETS

The love of live entertainment is what drives us. Specializing in hard to find, and sold out events - our mission is to get everyone a great seat. With a seasoned staff, we guarantee to exceed your expectations. Most importantly we ensure a safe and friendly transaction. At **First Hand Tickets** we are proud to be the leading Ticket Agency in New York focusing in all Sports, Theater and Concert events around the world. From single tickets to large groups, we will accommodate your needs with professionalism and attention to detail. Experience a new level of entertainment with First Hand Tickets.

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

Warren Schreiber at [wschreiber@firstrandtickets.com](mailto:wschreiber@firstrandtickets.com)  
Phone: 516-376-8092 or (866) 375-7591

## 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, 2017. *Please request the VEITH rate when reserving your accommodations.*

### New York Hilton-Midtown (Symposium Site)

1335 Avenue of the Americas  
New York, NY 10019  
(212) 586-7000 or  
1-800-HILTONS (toll free U.S. only)

### American Express Global Business Travel at The Cleveland Clinic

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E-mail: [Diane.M.Geneva@aexp.com](mailto:Diane.M.Geneva@aexp.com)

## TUESDAY, NOVEMBER 14, 2017

6:00 A.M. General Registration – Rhinelander Gallery, 2nd Floor  
 6:00 A.M. Faculty Registration – Morgan Suite, 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, Aortic And Carotid Diseases**

6:40 A.M. – 5:52 P.M.

Grand Ballroom East, 3rd Floor

#### PROGRAM B: SESSIONS 9-16

##### **New Developments In The Treatment Of AAAs (EVAR), Aortic Branch Lesions (Iliac, Visceral, Renal); Outpatient And Practice Issues; Laparoscopy, Robotics And Simulation; Complex AAAs; New Techniques And Concepts And Open Or Hybrid Vascular Techniques**

6:40 A.M. – 5:54 P.M.

Grand Ballroom West, 3rd Floor

#### PROGRAM C: SESSIONS 17-18

##### **Management Of Pulmonary Embolism: A Complex Team Sport: The Momentum For Effective Treatment Is Real**

7:00 A.M. – 12:00 P.M.

Trianon Ballroom, 3rd Floor

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

#### PROGRAM D: SESSIONS 19-22

##### **Diagnosis And Management Of Vascular Malformations**

1:00 P.M. – 6:00 P.M.

Trianon Ballroom, 3rd Floor

Course Leaders: **Wayne F. Yakes, MD**

**Krassi Ivancev, MD, PhD**

**Robert L. Vogelzang, MD**

#### PROGRAM A (SESSIONS 1-8)

##### **PROGRESS IN THE TREATMENT OF HEART VALVE, CORONARY, AORTIC AND CAROTID DISEASES**

Grand Ballroom East, 3rd Floor

**6:40 – 6:44** Opening Remarks

*Frank J. Veith, MD*

SESSION 1 (Grand Ballroom East, 3rd Floor)

##### **PROGRESS IN TRANSCATHETER AORTIC VALVE IMPLANTATION (TAVI), CORONARY STENTING AND ASCENDING AORTIC DISEASE TREATMENT**

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

*Lars G. Svensson, MD, PhD*

**6:45 – 6:50** Current Status Of Transcatheter Aortic Valve Implantation (TAVI): Is It Indicated In All Patients Needing Invasive Treatment For Aortic Stenosis: An Interventional Cardiologist's View

*Horst Sievert, MD*

*Dietmar H. Koschyk, MD*

**6:51 – 6:56** A Cardiac Surgeon's View Of Progress In TAVI: Which Patients Are Still Best Treated By Open Valve Surgery

*Allan Stewart, MD*

- 6:57 – 7:02** New Developments In Coronary Artery Stenting Including The Status Of Bioresorbable Drug Eluting Stents  
*Ron Waksman, MD*  
*Gregg W. Stone, MD*
- 7:03 – 7:08** Why Will The Ascending Aorta Be Hard To Treat Endovascularly: Its Anatomy And Physiology Can Be Problematic Based On Advanced Imaging  
*Rachel E. Clough, MD, PhD*
- 7:09 – 7:14** Status Of An Endovascular Valve-Carrying Conduit For The Treatment Of Type A Aortic Dissections: It Is Coming Soon And Challenges  
*Martin Czerny, MD*  
*Bartosz Rylski, MD*
- 7:15 – 7:20** 25-Year Experience With Composite Open Grafting Of The Aortic Root For Aneurysms And Other Pathologies: A Remarkably Durable Operation  
*John A. Elefteriades, MD*
- 7:21 – 7:26** Present Status And Future Prospects For Endovascular Repair Of Ascending Aortic Lesions  
*Eric E. Roselli, MD*
- 7:27 – 7:32** Update On Ascending Aortic Endografting With A Physician Sponsored IDE Device: Who Can Benefit And Who Cannot: Will An Endograft Valve Combination Be Possible  
*Ali Khojnejhad, MD, PhD*
- 7:33 – 7:38** Progress In Ascending Aortic Endografting Using An Improved Valiant Device: Patient Selection, Durability And Future Prospects  
*Rodney A. White, MD*  
*Carlos E. Donayre, MD*
- 7:38 – 7:46** 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*  
*Christoph A. Nienaber, MD, PhD*

- 7:46 – 7:51** Highlights From The European SVS Guidelines For Management Of TBAD Patients  
*Vicente Riambau, MD, PhD*
- 7:52 – 7:57** Key New Developments And Progress In The Treatment Of TBAD Patients  
*Michael D. Dake, MD*
- 7:58 – 8:03** Technical Tips, Tricks And Pitfalls In Surgical Debranching Of Aortic Arch Branches: When Is It The Best Option For Treating Arch Aneurysms  
*Sebastian E. Debus, MD, PhD*
- 8:04 – 8:09** Update On Endovascular Arch Repairs With The Cook 2-Branched Endograft: Advantages, Results, Precautions And Limitations  
*Stephan Haulon, MD*
- 8:10 – 8:15** Choice Of Optimal Treatment For Aortic Arch Lesions: Open Hybrid, Chimney: Which Is Best And When  
*Chang Shu, MD*
- 8:16 – 8:21** 4-Year Results With The Bolton Relay 2-Branched Endograft For Aortic Arch Lesions: Indications, Advantages And Limitations  
*Toru Kuratani, MD, PhD*

- 8:22 – 8:27** Experience With The Improved Precurved Fenestrated N2X Endograft For Aortic Arch Lesions: Results, Advantages And Limitations  
*Yoshihiko Yokoi, MD*
- 8:28 – 8:33** Branched Endografts vs. In Situ Fenestrated Endografts For Complex Aortic Arch Lesions: Advantages And Limitations Of Both  
*Qingsheng Lu, MD*  
*Zaiping Jing, MD*
- 8:34 – 8:39** 13-Year Experience With Parallel Grafts (Chimneys) To Treat Arch Aneurysms: They Can Be Durable Up To 11 Years: Tips And Tricks To Make Them Work  
*Thomas Larzon, MD, PhD*
- 8:40 – 8:46** Panel Discussion

SESSION 3 (Grand Ballroom East, 3rd Floor)

**TYPE B AORTIC DISSECTIONS (TBADs) AND THEIR TREATMENT: THORACIC AND THORACO-ABDOMINAL ANEURYSMS (TAAAs)**

**Moderators:** *Michael D. Dake, MD*  
*Nicholas J.W. Cheshire, MD*

- 8:47 – 8:52** Comparison Of Morbidity And Mortality After Open And Endovascular TAAA Repair: They Are Substantial For Both Even In A High Volume Center  
*Michael J. Jacobs, MD*  
*Geert Willem H. Schurink, MD, PhD*
- 8:53 – 8:58** Keys To Optimal Medical Treatment For Patients With TBADs: Where Does It Usually Go Wrong  
*Christoph A. Nienaber, MD, PhD*
- 8:59 – 9:04** **DEBATE:** New Information From The STABLE I & II Trials: What Do They Tell Us About The Value Of Proximal Covered And Distal Bare Stents For The Treatment Of TBADs: When Is The Petticoat Technique Helpful  
*Joseph V. Lombardi, MD*
- 9:05 – 9:10** **DEBATE:** The Petticoat Technique For TBAD Treatment Does Not Decrease Mortality: Is It Ever Indicated And Helpful  
*Andrea Kahlberg, MD*  
*Roberto Chiesa, MD*  
*Germano Melissano, MD*
- 9:11 – 9:16** Distal Extended Branched Petticoat Technique To Treat Complex Aortic Dissections With False Lumen Dilatation: Technical Details, What Makes It Different And Favorable 2-Year Results  
*Lars R. Kock, MD*
- 9:17 – 9:22** Balloon Assisted Overdilatation Of The Bare Stent In Petticoat TEVAR Disrupts The Dissection Flap And Decreases Subsequent False Lumen Aneurysm Formation: Technique, Precautions And Results In 150 TBAD Patients  
*Jean-Marc Alsac, MD, PhD*
- 9:23 – 9:28** How To Prevent, Diagnose And Treat Retrograde Type A Dissections Complicating TEVAR Procedures: What Factors Predispose To It  
*Ludovic Canaud, MD, PhD*

- 9:29 – 9:34** **DEBATE:** Natural History Of Intramural Hematomas (IMHs) And Penetrating Ulcers (PAUs) Of The Thoracic Aorta: When Should They Be Treated By TEVAR And Technical Tips For Doing So  
*Dittmar Böckler, MD*
- 9:35 – 9:40** **DEBATE:** Most Incidentally Discovered PAUs And IMHs Of The Thoracic Aorta Do Not Need TEVAR: Such Treatment Does Not Improve Survival  
*Kenneth J. Cherry, MD*  
*Gilbert R. Upchurch, MD*
- 9:41 – 9:46** How To Treat Acute TBAD With Retrograde Intramural Hematoma Extending Into The Arch And Ascending Aorta: When Open, When Endo: Prognostic Implications  
*I-Hui Aaron Wu, MD, PhD*
- 9:47 – 9:53** Panel Discussion
- 9:54 – 10:05** Break – Visit Exhibits And Pavilions (2nd and 3rd Floors)

SESSION 4 (Grand Ballroom East, 3rd Floor)

**MORE NEW DEVELOPMENTS IN THE TREATMENT OF TBADs, THORACIC AORTIC DISEASE, TAAAs AND RELATED TOPICS**

**Moderators:** *Eric L.G. Verhoeven, MD, PhD*  
*Michael J. Jacobs, MD*

- 10:05 – 10:10** Present Status Of Embolic Protection For TAVI And TEVAR: What Devices Are Available And How Well Do They Decrease Strokes And Diffusion Weighted (DW) MRI Lesions  
*Jeffrey P. Carpenter, MD*
- 10:11 – 10:16** Why Particulate Emboli Are A Cause Of Stroke, Spinal Cord Ischemia (SCI) And Silent Brain Damage With TEVAR And TAVI: What Progress Is Being Made To Prevent These Problems  
*Richard G.J. Gibbs, FRCS*
- 10:17 – 10:22** Update On Air Emboli As A Cause Of Stroke After TEVAR: What Percentage Of Strokes Comes From This Cause And What Can Be Done To Prevent Them  
*Tilo Kölbel, MD, PhD*
- 10:23 – 10:28** In Situ Fenestration With A Special Proprietary Puncture Needle To Revascularize Supra-Aortic Branches During TEVAR For TBAD: Technique And 1-Year Results  
*Weiguo Fu, MD*
- 10:29 – 10:34** New Concepts Regarding TBADs And Their Treatment: Importance Of The False Lumen Origin Of Visceral And Renal Branches; Reappraisal Of Proximal Landing Zone For TEVAR; And New Unrecognized Parameters Indicating Need For TEVAR  
*Santi Trimarchi, MD, PhD*
- 10:35 – 10:40** Update On Predictors Of The Need For Intervention And Mortality With Acute Uncomplicated TBAD; Impact Of Ascending Aorta And Arch Involvement: How Should It Change Treatment  
*Ali Azizzadeh, MD*
- 10:41 – 10:46** How Should The Stage (Acute, Subacute And Chronic) Of TBADs Be Determined: Time Since Onset Of Symptoms Is A Poor Criterion: There Is A Need For 4D Imaging To Assess Flap Motility  
*Thomas L. Forbes, MD*

- 10:47 – 10:52** Rationale And Indications For Fenestration/Septotomy To Treat TBADs: An Endovascular Device To Do It Safely  
*Ramon Berguer, MD, PhD*  
*Juan C. Parodi, MD*
- 10:53 – 10:58** Impact Of Endograft Induced Entry Tears After TEVAR For TBAD: They Can Prevent Aortic Remodeling: What Can Be Done To Offset Them  
*Chun Che Shih, MD, PhD*
- 10:59 – 11:05** Panel Discussion
- Moderators:** *Richard P. Cambria, MD*  
*Frank J. Veith, MD*
- 11:06 – 11:11** False Lumen To True Lumen Volume Ratio At Presentation Can Predict The Natural History Of Uncomplicated TBADs And Which Patients Need TEVAR: How To Measure It And How To Use It  
*Jean M. Panneton, MD*
- 11:12 – 11:17** Increasing Need For Open Conversions After TEVAR: Indications, Techniques And Results  
*Michael J. Jacobs, MD*
- 11:18 – 11:23** Advances In Adjuncts To Induce False Lumen Thrombosis After TEVAR For TBADs: Indications, Devices, Techniques And Precautions  
*Tilo Kölbel, MD, PhD*
- 11:24 – 11:29** What Is New With Open TAAA Repair: When Is Open Repair The Best Treatment  
*Hazim J. Safi, MD*
- 11:30 – 11:35** Recent Improvements In Open TAAA Repair And Preop And Postop Management: Value Of Gore Hybrid Graft For Sutureless Anastomoses To Branch Arteries  
*Andrea Kahlberg, MD*  
*Roberto Chiesa, MD*  
*Germano Melissano, MD*
- 11:36 – 11:41** Open Repair To Treat Endovascular Treatment Failures Of Thoracic Aneurysms And TAAAs: There Will Always Be A Need For Open Repairs  
*Hazim J. Safi, MD*
- 11:42 – 11:47** Long Antegrade Renal And Visceral Grafts During Open TAAA Repairs To Prevent Visceral Patch Aneurysms: How To Do Them  
*Manju Kalra, MBBS*
- 11:48 – 11:53** Early TEVAR For Uncomplicated TBADs: Is There Enough Evidence For Doing It And When Is It Too Late To Perform It  
*Michael P. Jenkins, MBBS, BSc, MS*
- 11:54 – 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 East, 3rd Floor)

## NEW KEY DEVELOPMENTS IN THE MANAGEMENT OF PATIENTS WITH CAROTID DISEASE

**Moderators:** *L. Nelson Hopkins, MD*  
*Frank J. Veith, MD*

- 1:00 – 1:05** Risk Of Carotid Intervention (CEA Or CAS) For Carotid Stenosis Is A Function Of Symptom Status Within 6 Months: Risk Is Equal In Asymptomatic Patients And Those With Symptoms > 6 Months Ago: From CREST  
*Wesley S. Moore, MD*
- 1:06 – 1:11** CEA Patients Have 30% Lower Risk Of Adverse Events Or Death Than CAS Patients After 12 Years: A Propensity Matched Population Based Analysis  
*Thomas L. Forbes, MD*  
*Mohammad A. Hussain, MD*
- 1:12 – 1:17** Carotid Stent Fractures After CAS: How Often Do They Occur, How To Diagnose Them And What Is Their Significance  
*Jon S. Matsumura, MD*
- 1:18 – 1:23** In Patients Undergoing CEA Or CAS For A Stroke The Volume Of The Ischemic Lesion On CT Or MRI Correlates With A Poor Outcome: If The Stroke Is Large Revascularization Should Be Delayed  
*Andrea Stella, MD*

**MEGA-DEBATE**

- 1:24 – 1:29** **DEBATE:** The Risk Of Stroke In Asymptomatic Carotid Stenosis Patients On Good Medical Management Is So Low That All Should Be Treated Medically: Stratification Of Risk Is Of Little Value  
*Anne L. Abbott, MD, PhD*
- 1:30 – 1:35** **DEBATE:** Not So: Many Asymptomatic Patients With High Grade Carotid Stenosis Need To Be Treated Invasively By CEA Or CAS: What % Of Such Patients Should Be Treated And Which Ones  
*Bruce A. Perler, MD, MBA*
- 1:36 – 1:41** **DEBATE:** Wrong: With Good Medical Treatment The Incidence Of Carotid Occlusion And Stroke In Asymptomatic Carotid Stenosis Patients Is Very Low: Rarely Should Such Patients Be Treated By CEA Or CAS: What Is The % And How Should They Be Identified  
*J. David Spence, MD*
- 1:42 – 1:48** Panel Discussion

**Moderators:** *Colin P. Derdeyn, MD*  
*Wesley S. Moore, MD*

- 1:49 – 1:54** What Is Good Medical Treatment For Asymptomatic Patients With Carotid Stenosis: What Can It Do To The Plaque: How Low Should The LDL Cholesterol (LDL-C) Be Pushed: How To Get There: SAMMPRIS Proves It Can Be Done  
*Richard Bulbulia, MA, MD*  
*Colin P. Derdeyn, MD*
- 1:55 – 2:00** Can Decreasing LDL-C Sharply Produce Plaque Regression In The Coronary Arteries; In Carotid Arteries: What Drugs Should Be Used And What Should The LDL-C Goal Be  
*Ron Waksman, MD*
- 2:01 – 2:06** Effect Of Statins And PCSK-9 Inhibitors (Repatha) On Carotid Plaque Volume And Characteristics: Can Plaques Regress: How Low Should We Push The LDL-C: The GLAGOV Trial  
*James F. Meschia, MD*  
*Thomas G. Brott, MD*



- 2:07 – 2:12** Carotid Stenosis Patients And Their Arteries Should Be Treated On The Basis Of Their Carotid Plaque Burden: How Is It Measured: Can It Be Changed By Drugs And Diet: Factors Associated With Resistant Arteriosclerosis: How Low Should We Push The LDL-C  
*J. David Spence, MD*
- 2:13 – 2:18** Benefit Of Statins On Restenosis And Cardiovascular Events After CEA: Importance Of Drug Dose And Decreased LDL-C Levels: Sudden Cessation Of Statins Can Destabilize Plaques  
*Christos D. Liapis, MD*
- 2:19 – 2:24** Causes Of Perioperative Strokes After CEA: How Should They Be Managed  
*Caron B. Rockman, MD*
- 2:25 – 2:30** Endovascular Techniques Are The Best Treatment For A Stroke After CEA, CAS Or Other Catheter Procedures: What Is The Best Current Way To Remove Clots Or Debris At The Carotid Bifurcation Or Intracranially  
*Colin P. Derdeyn, MD*
- 2:31 – 2:37** Panel Discussion

SESSION 6 (Grand Ballroom East, 3rd Floor)

## NEW DEVELOPMENTS IN THE INVASIVE INTRACRANIAL TREATMENT OF ACUTE STROKES AND RELATED CAROTID AND VERTEBRAL ARTERY TOPICS

**Moderators:** *Sriram S. Iyer, MD*  
*Allan L. Brook, MD*

### **INTRACRANIAL TREATMENT OF ACUTE STROKE**

- 2:38 – 2:43** Progress In The Endovascular Treatment Of Acute Strokes: Key Equipment Required (Stentriever, Balloon Tipped Sheaths, Etc.): Lessons Learned  
*Horst Sievert, MD*
- 2:44 – 2:49** Update On Endovascular Treatment Of Acute Stroke: Skills Required, Pretesting, Indications, Contraindications, Time Window  
*L. Nelson Hopkins, MD*
- 2:50 – 2:55** Future Prospects For The Endovascular Treatment Of Acute Strokes: Can The Indications Be Broadened And The Equipment/Devices Be Improved  
*Colin P. Derdeyn, MD*

### **TREATMENT OF ACUTE STROKES WITH POSSIBLE CAROTID BIFURCATION DISEASE**

- 2:56 – 3:01** Urgent Intervention For Acute Strokes: What Is The Best Preop Imaging For Evaluation: When And How To Treat Extracranial Carotid Occlusions And Intracranial Occlusions: When Not To Intervene  
*Hernan Bazan, MD*
- 3:02 – 3:07** Which Acute Stroke Patient Should Be Treated By CEA And Which By Intracranial Thrombus Extraction: How To Decide  
*Laura Capoccia, MD, PhD*

**3:08 – 3:13** For Strokes With Internal Carotid (ICA) Occlusion Some Patients Will Need Intracranial Thrombus Removal: ICA Clot Aspiration And Ballooning Allows Distal Clot Retrieval Followed By CEA Or CAS Of The ICA Lesion: Indications And Results  
*Timothy M. Sullivan, MD*

**OTHER RELATED TOPICS**

**3:14 – 3:19** DW-MRI New Lesions After CAS: What Do They Mean And Will Membrane Or Mesh Covered Stents And Other Techniques Decrease Them  
*Sumaira Macdonald, MBChB, PhD*

**3:20 – 3:25** Vertebral Artery Lesions Should Sometimes Be Treated: When And How To Do So  
*Klaus D. Mathias, MD*

**3:26 – 3:32** Panel Discussion

**3:32 – 3:44** Break – Visit Exhibits And Pavilions  
(2nd and 3rd Floors)

SESSION 7 (Grand Ballroom East, 3rd Floor)

**MORE NEW DEVELOPMENTS IN TBADs, TEVAR AND TAAAs**

**Moderators:** *Michel Makaroun, MD*  
*Mark A. Farber, MD*

**3:44 – 3:49** TEVAR Alone Is Not Sufficient To Treat TBAD Patients Long Term: What Secondary Procedures May Be Required And When  
*Götz M. Richter, MD, PhD*

**3:50 – 3:55** In All Patients With TBADs Treated By TEVAR An Attempt Should Be Made To Cover All Secondary Tears: How To Do This  
*Chang Shu, MD*

**3:56 – 4:01** Which Preop CTA Features Predict Which TBAD Patients Will Have Aortic Remodeling And A Favorable Outcome After TEVAR: How Best To Deal With Re-Entry Tears After TEVAR  
*Wei Guo, MD*

**4:02 – 4:07** False Lumen Obliteration By A Physician Modified Device: When Is It Needed, Technique For Making And Using The Device: Results  
*I-Hui Aaron Wu, MD, PhD*

**4:08 – 4:13** How To Distinguish Between Acute And Chronic TBAD Functionally And How To Identify Patients With Uncomplicated TBADs Who Will Need And Benefit From TEVAR  
*Johnny Steuer, MD, PhD*

**4:14 – 4:19** Which Treatment (Open Or Endo) Is Best For Acute And Ruptured TAAAs: Long-Term Survival Is Possible  
*Roberto Chiesa, MD*  
*Germano Melissano, MD*

**4:20 – 4:25** Results With Open vs. Endo Repairs In A Propensity Matched Series Of Patients With TAAAs  
*Ciro Ferrer, MD*

**4:26 – 4:31** Use Of T-Branched Off-The-Shelf (OTS) Device (Cook Medical) To Treat TAAAs From Chronic TBADs: Technical Tips For Treating Patients With Small True Lumens And Results  
*Carlos H. Timaran, MD*

**4:32 – 4:37** Panel Discussion

SESSION 8 (Grand Ballroom East, 3rd Floor)

**MORE ABOUT TBADs, CONTROVERSIES ABOUT TIMING, INDICATIONS AND VALUE OF TEVAR TREATMENT FOR PATIENTS WITH UNCOMPLICATED TBADs**

**Moderators:** *Matt M. Thompson, MD*  
*Mark A. Adelman, MD*

- 4:38 – 4:43** Best Definition For Acute, Subacute And Chronic TBADs: Why Is TEVAR Treatment In The Subacute Phase (From 8-30 Days After Symptom Onset) Best And Safest  
*Guangqi Chang, MD*
- 4:44 – 4:49** **DEBATE:** The Case For Treating All Acute Uncomplicated TBAD Patients With TEVAR: Optimal Timing For The Procedure  
*William D. Jordan, Jr., MD*
- 4:50 – 4:55** **DEBATE:** Why Most Acute Uncomplicated TBAD Patients Should Not Be Treated By TEVAR: Which Ones Should Be And When  
*Michel Makaroun, MD*
- 4:56 – 5:01** New Information From The IRAD Registry: Optimal Timing Of TEVAR For TBAD; Predictors Of Remodeling Complications And Need For Additional Procedures After TEVAR: Best Treatment For Visceral Ischemia  
*Santi Trimarchi, MD, PhD*
- 5:02 – 5:07** Uncomplicated TBAD Is A Misnomer: Most TBAD Patients Will Benefit From TEVAR: Importance Of Aortic Remodeling: Optimal Timing Of TEVAR  
*Christoph A. Nienaber, MD, PhD*
- 5:08 – 5:13** **DEBATE:** With Uncomplicated TBAD Patients TEVAR Should Be Delayed For 2-12 Weeks After Symptom Onset To Decrease Risk Of Retrograde Type A Dissection  
*Peter J.E. Holt, MD, PhD*  
*Ian Loftus, MD*
- 5:14 – 5:19** **DEBATE:** Not So: TEVAR Treatment Of Uncomplicated TBADs In First 10 Days After Symptom Onset Is Best And Safe Under Certain Conditions And With Certain Precautions  
*Edward Y. Woo, MD*  
*Tareq M. Massimi, MD*
- 5:20 – 5:25** Do We Need Another Randomized Controlled Trial (RCT) Comparing Good Medical Treatment Alone With TEVAR And Good Medical Treatment For Uncomplicated TBADs  
*Richard P. Cambria, MD*
- 5:26 – 5:31** Need For, Status Of And Required Elements For A RCT Comparing Good Medical Management With And Without Early TEVAR For The Treatment Of Uncomplicated TBADs  
*Firas F. Mussa, MD*
- 5:32 – 5:37** Risks Of TEVAR For Asymptomatic Uncomplicated TBAD Patients And How Does TEVAR Change Cardiac Function: How Does Advanced Aortic Imaging Help Decision Making  
*Rachel E. Clough, MD, PhD*

**5:38 – 5:43** Favorable Impact Of Early TEVAR On 5-Year Survival Of Patients With Uncomplicated TBADs: From A Statewide (CA) Registry: But We Still Need A RCT  
*Virendra I. Patel, MD, MPH*  
*Mark Conrad, MD, MMSc*  
*Richard P. Cambria, MD*

**5:44 – 5:52** Panel Discussion  
**End of Program A**

PROGRAM B (SESSIONS 9-16)  
NEW DEVELOPMENTS IN THE TREATMENT OF AAAs (EVAR), AORTIC BRANCH LESIONS (ILIAC, VISCERAL, RENAL); OUTPATIENT AND PRACTICE ISSUES; LAPAROSCOPY, ROBOTICS, SIMULATION; COMPLEX AAAs; NEW TECHNIQUES AND CONCEPTS AND OPEN OR HYBRID VASCULAR SURGICAL TECHNIQUES  
Grand Ballroom West, 3rd Floor

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

SESSION 9 (Grand Ballroom West, 3rd Floor)  
NEW DEVELOPMENTS IN THE MANAGEMENT OF AAAs AND EVAR

**Moderators:** *Timur P. Sarac, MD*  
*Ali F. AbuRahma, MD*

**6:45 – 6:50** Inflammatory AAAs Are Best Treated By EVAR Plus Immunosuppressive Drugs: What Is The Evidence  
*Sonia Ronchey, MD, PhD*  
*Nicola Mangialardi, MD*

**6:51 – 6:56** **DEBATE:** EVAR Performed Outside Devices' IFUs Have Worse Outcomes With High Rates Of Endoleaks And Sac Growth  
*Andres Schanzer, MD*

**6:57 – 7:02** **DEBATE:** Not So: With Modern Endografts And Improved Techniques EVAR Outside IFUs Can Have Good Outcomes With Low Rates Of Endoleaks And Sac Growth  
*Dittmar Böckler, MD*

**7:03 – 7:08** **DEBATE:** Differences In Outcomes Of AAA Repair Between The US And The UK Support Fixing AAAs At Diameters < 5.5 cm In Men And < 5.0 cm In Women: Landmark RCTs And Guidelines Are Wrong  
*Matt M. Thompson, MD*  
*Mark L. Schermerhorn, MD*  
*Ian Loftus, MD*

**7:09 – 7:14** **DEBATE:** Nonsense: The RCTs Are Right And The Guidelines Are Fine: AAAs Should Only Be Fixed At Or Above 5.5 cm In Diameter In Men And 5.0 cm In Women – Except In Unusual Circumstances  
*Janet T. Powell, MD, PhD*

**7:15 – 7:20** Panel Discussion

**Moderators:** *Juan C. Parodi, MD*  
*Enrico Ascher, MD*

- 7:20 – 7:25** Status Of The LEOPARD Trial: A RCT Comparing The AFX Endologix Graft For EVAR To Other Standard EVAR Endografts  
*Christopher J. Kwolek, MD*
- 7:26 – 7:31** 15-Year Results Of EVAR 1 RCT Point The Way To A Clinical And Cost-Effective Benefit For EVAR  
*Roger M. Greenhalgh, MD*
- 7:32 – 7:37** Long-Term Results Of The DREAM RCT Differ From Those Of EVAR 1: EVAR Is Therefore Superior To Open Repair: Why The Difference  
*Jan D. Blankensteijn, MD*
- 7:38 – 7:43** There Are Flaws In Interpreting The EVAR 1 Long-Term Results To Show EVAR Is Not Superior To Open Repair: EVAR 1 15-Year Result Plus Other Data Show EVAR To Be Better Than Open Repair Short And Long-Term  
*Frank E.G. Vermassen, MD, PhD*
- 7:44 – 7:49** Why The Long-Term Data From The EVAR RCTs Comparing EVAR With Open Repair Are Negatively Biased Toward EVAR: EVAR Should Currently Be The First Option For Most AAA Patients  
*Vicente Riambau, MD, PhD*
- 7:50 – 7:55** 15-Year Results Of EVAR With The Zenith Flex AAA Endograft Show Better EVAR Outcomes Than In The EVAR 1 Trial At All Time Points  
*Fabio Verzini, MD, PhD*  
*Piergiorgio Cao, MD*
- 7:56 – 8:07** Panel Discussion

SESSION 10 (Grand Ballroom West, 3rd Floor)

## NEW DEVELOPMENTS IN THE TREATMENT OF AORTIC BRANCH LESIONS – ESPECIALLY OF THE AORTO-ILIAC SEGMENT AND THE HYPOGASTRIC ARTERIES

**Moderators:** *Kenneth Ouriel, MD, MBA*  
*Barry T. Katzen, MD*

### AORTO-ILIAC DISEASE

- 8:08 – 8:13** Treatment Of Iliac Artery Endofibrosis In Cyclists And Other Competitive Athletes: Etiology, Optimal Treatment And Long-Term Outcomes  
*Jason T. Lee, MD*
- 8:14 – 8:19** Matched Comparison Of Open And Endovascular Techniques For Treatment Of Aorto-Iliac Occlusive Disease: Which Is Best And When  
*Konstantinos P. Donas, MD*
- 8:20 – 8:25** Endovascular Aorto-Bi-Iliac Stent-Grafting For Juxta-Renal Aorto-Iliac Occlusive Disease: Technique, Devices, Precautions And Results: Is There Any Role For Open Surgery  
*Michael B. Silva, Jr., MD*
- 8:26 – 8:31** Propensity Matched Comparison Of Bare Metal Stents (BMSs) And Covered Stents For Aorto-Iliac Occlusive Lesions  
*Franco Grego, MD*
- 8:32 – 8:37** Tips, Tricks And Precautions For The CERAB Covered Stent Treatment Of Aorto-Iliac Occlusive Disease: Available Stent-Graft Options And 3-Year Results  
*Peter C.J. Goverde, MD*  
*Michel M.P. Reijnen, MD, PhD*

**8:38 – 8:43** Clamless, Sutureless Technique For Performing Open Aorto-Iliac Bypass With Endograft Connectors When The Aorta Is Difficult To Dissect Or Clamp  
*Zoran Rancic, MD, PhD*  
*Mario L. Lachat, MD*

**8:44 – 8:49** Improved Patency With Axillo-Femoral Bypass Grafts Make Them The Open Procedure Of Choice When Endovascular Treatments Fail: Tips And Tricks That Account For The Improved Results  
*Russell H. Samson, MD, RVT*

### **HYPOGASTRIC ARTERY DISEASE**

**8:50 – 8:55** Hypogastric Artery Aneurysms Only Rupture At A Larger Size Than Previously Thought: Guidelines For Treatment Should Be Changed To > 4 cm In Diameter  
*Maarit Venermo, MD, PhD*

**8:56 – 9:01** Real World Multicenter Experience With The Gore Iliac Branched Devices (IBDs) For The Treatment Of Bilateral Iliac Aneurysms: Technical Tips And Results  
*Thomas S. Maldonado, MD*  
*Michel M.P. Reijnen, MD, PhD*

**9:02 – 9:07** How To Perform A Sandwich Graft Into The Hypogastric Artery For Common Iliac Aneurysm Without Brachial Access  
*Claudio J. Schonholz, MD*

**9:08 – 9:15** Panel Discussion

**9:15 – 9:26** Break - Visit Exhibits And Pavilions (2nd and 3rd Floors)

SESSION 11 (Grand Ballroom West, 3rd Floor)

## **NEW DEVELOPMENTS IN VASCULAR LAPAROSCOPY, ROBOTICS AND SIMULATION**

**Moderators:** *Jean-Baptiste Ricco, MD, PhD*  
*Peter F. Lawrence, MD*

**9:26 – 9:31** How An Endovascular Retroperitoneoscopic Technique Facilitates Laparoscopic Aorto-Femoral Bypass Procedures  
*Bernard J. Segers, MD*

**9:32 – 9:37** Status Of Robotic Devices To Facilitate Endovascular Procedures: They Are Helpful But Will They Be Available  
*Barry T. Katzen, MD*

**9:38 – 9:43** Endovascular Robotics: Present Status And Prospects For The Future  
*Joseph J. Ricotta II, MD, MS*

**9:44 – 9:49** What Is The Future Of Robotics In Vascular Surgery And Endovascular Procedures – Including Nanorobots Or Nanobots: Where Are We Now  
*Willem Wisselink, MD*

**9:50 – 9:55** Advances In Robotic Laparoscopic Treatment Of AAAs And Other Lesions: Value Of The Gore Hybrid Graft To Revascularize Branch Arteries  
*Fabien Thaveau, MD, PhD*

### **PROGRESS IN SIMULATION**

**9:56 – 10:01** How To Use Simulation To Teach Endovascular Techniques In Trauma: Resuscitative Endovascular Balloon Occlusion Of The Aorta (REBOA) And Pelvic Embolization  
*Lars B. Lönn, MD, PhD*

- 10:02 – 10:07** Patient CT Scan Specific Simulation For TEVAR And EVAR: How Does It Work And How Does It Improve Outcomes  
*Celia Riga, MBBS, MD, BSc*
- 10:08 – 10:13** Value Of Patient Specific Simulator Rehearsal Prior To Elective And Emergency EVAR: Advantages, Limitations And Costs From A Multicenter Trial  
*Isabelle van Herzezele, MD, PhD*  
*L. Desender, MD, PhD*
- 10:14 – 10:19** Panel Discussion

SESSION 12 (Grand Ballroom West, 3rd Floor)

**NEW DEVELOPMENTS IN THE TREATMENT OF JUXTARENAL AND PARARENAL AAAs AND TAAAs**

**Moderators:** *Kim J. Hodgson, MD*  
*Giovanni Torsello, MD*

- 10:20 – 10:25** Update On Advantages Of Staged Hybrid (Proximal Endograft/Distal Open Repair) Over Other Techniques For Type II TAAAs  
*Gilbert R. Upchurch, MD*  
*Kenneth J. Cherry, MD*
- 10:26 – 10:31** Delphi Consensus On The Best Treatment Of Thoracic Aortic Aneurysms (TAAAs) And TAAAs: Endo vs. Open vs. Observation  
*S. Rao Vallabhaneni, MD*
- 10:32 – 10:37** Comparative Stroke Risk After Fenestrated And Branched EVAR (F/B/EVAR) And Chimney EVAR (Ch/EVAR): Which Is Safer And Which Brachial Access Is Better  
*Carlos H. Timaran, MD*
- 10:38 – 10:43** Gutter Endoleaks After Ch/EVAR: Etiology, Prevention And Treatment  
*Jason T. Lee, MD*
- 10:44 – 10:49** A Gutterless Chimney Endograft: How Does It Work  
*Timur P. Sarac, MD*
- 10:50 – 10:55** After F/EVAR, When Is Aortic Neck Dilatation Harmless And When Is It Not: How Can It Be Treated If Necessary  
*Benjamin W. Starnes, MD*
- 10:56 – 11:01** Technical Challenges In Treating Juxta- And Pararenal Problems After Open Repair And EVAR: How To Do It; Precautions And Results  
*Piotr M. Kasprzak, MD*
- 11:02 – 11:08** Panel Discussion

**Moderators:** *Keith D. Calligaro, MD*  
*James F. McKinsey, MD*

**BEST TREATMENT OPTIONS FOR JUXTARENAL AAAs**

- 11:09 – 11:14** Which Juxtarenal AAAs Are Best Treated By Open Repair: Technical Tips  
*Laurent Chiche, MD*
- 11:15 – 11:20** F/EVAR Is An Overrated Procedure In Terms Of Cost And Outcomes: In Fit, Young Patients (<70 Years) Open Repair Is Best  
*Alun H. Davies, MA, DM, DSc*
- 11:21 – 11:26** What Is A Hostile Infrarenal AAA Neck: When Should F/EVAR Be Chosen Over Other Options And Why  
*Neal S. Cayne, MD*

- 11:27 – 11:32** For Short Or No Neck (Juxtarenal) AAAs Ch/EVAR Is The Best Treatment Option: Why And Technical Tips  
*Claude Mialhe, MD*
- 11:33 – 11:38** For Juxtarenal AAAs Chimney Endovascular Aneurysm Sealing With The Nellix Device (Ch/EVAS) Is The Best Treatment Option: Tips And Tricks To Get Good Long-Term Results  
*Peter J.E. Holt, MD, PhD*  
*Ian Loftus, MD*
- 11:39 – 11:44** For Short Necked AAAs Standard EVAR Plus Fixing With EndoAnchors Is The Best Treatment For Many Patients; What Are The Limits  
*William D. Jordan, Jr., MD*
- 11:45 – 11:50** A Manifold Multibranched Off-The-Shelf (OTS) Device For Treating Short Or No Neck AAAs Or Type 1A Endoleaks After Standard EVAR: How Will It Work, Advantages And Limitations  
*Patrick W. Kelly, MD*
- 11:51 – 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 West, 3rd Floor)

## OUTPATIENT PRACTICE AND BUSINESS ISSUES

**Moderators:** *Enrico Ascher, MD*  
*Krishna Jain, MD, PhD*

- 1:00 – 1:05** Reimbursement Not Evidence-Based Data Drives Interventions, Particularly Atherectomy, For Lower Extremity Occlusive Disease – Especially In Office Based Practices  
*Dipankar Mukherjee, MD*
- 1:06 – 1:11** How To Incorporate A Medical Treatment Program To Stabilize And Reverse Arteriosclerotic Lesions In An Outpatient Setting: Tips And Results  
*Sam S. Ahn, MD, MBA*
- 1:12 – 1:17** Value Of IVUS In Vascular Surgical Practices – Including Those In An Outpatient Setting: Why All Should Have It  
*Donald B. Reid, MD*
- 1:18 – 1:23** When Are Arterial Procedures Safe In An Office Based Surgery Center And When Are They Unsafe  
*Anil P. Hingorani, MD*
- 1:24 – 1:29** Safety Of 4 French Angioplasty System In An Office Based Setting: Tools, Tips, Tricks And Experience Prove Its Advantages  
*Jos C. van den Berg, MD, PhD*
- 1:30 – 1:35** How To Make Outpatient Supervised Exercise Programs Work To Treat Intermittent Claudication  
*Tej M. Singh, MD, MBA*
- 1:36 – 1:41** Fast Track Clot Lysis And Removal For Acute Arterial And Venous Occlusions: Techniques And Advantages In An Office Setting  
*Enrico Ascher, MD*
- 1:42 – 1:47** Access Issues: Access Through A Common Femoral Or Other Stent: What Can Be Done Through Radial Access And What Cannot Be  
*Sam S. Ahn, MD, MBA*
- 1:48 – 1:53** Role Of VQI In An Office Based Practice: How To Do It  
*Krishna Jain, MD, PhD*



**1:54 – 2:00** Panel Discussion

SESSION 14 (Grand Ballroom West, 3rd Floor)

**NEW ENDOVASCULAR TECHNIQUES, USAGE AND CONCEPTS**

**Moderators:** *Sean P. Lyden, MD*  
*Dierk Scheinert, MD*

- 2:00 – 2:05** A New Treatment For Occluded Fempop Stents: ‘Crush Stenting’: How To Do It And Advantages  
*Stefan Müller-Hülsbeck, MD*
- 2:06 – 2:11** Value, Limitations And Precautions Of Using Mid-SFA Access For Various Arterial Interventions: Technical Tips And Precautions  
*Kenneth J. Cherry, MD*
- 2:12 – 2:17** New Better Percutaneous Approach To Treat Femoral False Aneurysms Involving The Superficial And Deep Femoral Arteries: Technique And Results  
*Klaus M. Overbeck, MD, MPhil*
- 2:18 – 2:23** **DEBATE:** Open Endarterectomy Is Still The Procedure Of Choice For Common Femoral Artery (CFA) Lesions And Why  
*Dittmar Böckler, MD*
- 2:24 – 2:29** **DEBATE:** Not So: Some CFA Lesions Can Be Effectively Treated By Stenting: When And When Not: Technical Tips And Value Of The Supera Stent,  
*Koen Deloose, MD*  
*Michel M.P. Reijnen, MD, PhD*
- 2:30 – 2:35** Stenting Of The CFA Is A Safe Durable Option To Treat Occlusive Lesions: Tips And Tricks And When Is It Contraindicated: Based On A RCT  
*Yann Gouëffic, MD, PhD*
- 2:36 – 2:41** Panel Discussion

**Moderators:** *Kenneth Ouriel, MD, MBA*  
*Gary Giangola, MD*

- 2:42 – 2:47** Value Of Variable Curvature Guiding Sheaths For Endovascular Procedures: What Devices And Sizes Are Available: How Do They Help In F/B/EVAR, etc.: The Poor Man’s Robot  
*Joshua D. Adams, MD*
- 2:48 – 2:53** When Is Endovascular Treatment Of Erectile Dysfunction Indicated And Justified: Technique And Results  
*Narendra N. Khanna, MD, DM*
- 2:54 – 2:59** Update On Use Of The AFX Bifurcated Endograft From Endologix For The Treatment Of Aorto-Iliac Occlusive Disease: Results And Thrombogenicity Assessment With Computational Fluid Dynamics  
*Thomas S. Maldonado, MD*
- 3:00 – 3:05** Why Did The RCTs Of Drug Coated Balloons (DCBs) In Infrapopliteal Arteries Fail To Show Benefit Over Plain Balloon Angioplasty (POBA) While Single Center Trials Indicated Benefit  
*Thomas Zeller, MD*
- 3:06 – 3:11** Should DCBs Be Used With Subintimal Or Intraluminal Guidewire Passage: What Is The Outlook For Success With DCBs In Infrapopliteal Arteries: Why Are These Arteries Different  
*Francesco Liistro, MD*

**3:12 – 3:17** Is There Still A Need For IVUS In The World Of Optical Coherence Tomography (OCT): OCT Can Do Everything That IVUS Can And More: What Are The Downsides

*Carlo Setacci, MD*  
*Dietmar H. Koschyk, MD*

**3:18 – 3:23** Bariatric Embolization: An Endovascular Treatment For Obesity: A Promising New Horizon For Vascular Specialists

*Nickolas Kipshidze, MD, PhD*  
*Horst Sievert, MD*

**3:24 – 3:34** Panel Discussion And Break  
Visit Exhibits And Pavilions (2nd and 3rd Floors)

SESSION 15 (Grand Ballroom West, 3rd Floor)

## PROGRESS IN THE TREATMENT OF RENAL AND VISCERAL ARTERY DISEASE

**Moderators:** *Ronald M. Fairman, MD*  
*Rajabrata Sarkar, MD, PhD*

**3:34 – 3:39** When Does Renal Artery Stenting With Renal Artery Stenosis Benefit Patients – Despite The Negative Results Of The CORAL And ASTRAL RCTs

*Gary M. Ansel, MD*

**3:40 – 3:45** Contemporary Surgical Treatment For Pediatric Renovascular Hypertension: Is Balloon Angioplasty (PTA) Ever Indicated And Importance Of Age And Anatomy

*Dawn M. Coleman, MD*  
*Jonathan L. Eliason, MD*  
*James C. Stanley, MD*

**3:46 – 3:51** Value Of PTA For Middle Aortic Syndrome And Renal Artery Stenosis In Children And Young Adults

*George Hamilton, MD*

**3:52 – 3:57** Current Treatment Trends And Outcomes For Mesenteric Ischemia (Acute And Chronic): When Endo; When Open: Technical Tips

*Timur P. Sarac, MD*

**3:58 – 4:03** Tips And Tricks To Recanalize Chronic Total Occlusions Of Mesenteric Arteries: When Is Open Bypass The Best Option

*Armando Mansilha, MD, PhD*

**4:04 – 4:09** Intestinal Angina In Children: How To Recognize It And How Best To Treat It

*James C. Stanley, MD*

**4:10 – 4:15** Significance, Diagnosis And Endovascular Treatment Of Spontaneous Renal Artery Dissection

*Thomas A. Sos, MD*

**4:16 – 4:21** Panel Discussion

**Moderators:** *James C. Stanley, MD*  
*George H. Meier III, MD*

**4:22 – 4:27** Retrograde Superior Mesenteric Artery (SMA) Stent Placement During Open Treatment Of Acute Mesenteric Ischemia With Bowel Necrosis: Technical Tips

*Richard J. Powell, MD*

**4:28 – 4:33** How To Endovascularly Treat Life-Threatening Bleeding From Hepatic And Visceral True And False Aneurysms: When Embolization; When Stent-Grafts And How To Do Them

*Kyung Cho, MD*

- 4:34 – 4:39** Celiac Compression Syndrome: Myth Or Reality; When And How Should It Be Treated  
*Alan M. Dietzek, MD, RPVI*
- 4:40 – 4:45** Duodenal And Renal Vein Compression By The SMA: The Nutcracker Syndromes: How To Diagnose And Treat Them By SMA Transposition Or Other Surgical Procedures  
*Laurent Chiche, MD*
- 4:46 – 4:51** Renal And Visceral Artery Aneurysms: When And How To Treat Invasively And When To Observe  
*Jean-Pierre Becquemin, MD*
- 4:52 – 4:57** Natural History And Optimal Treatment (Endovascular) For Aneurysms Of The Pancreatico-Duodenal Arcade: Pitfalls And Results: When Is Open Operation Needed  
*Mark Conrad, MD, MMSc*
- 4:58 – 5:03** Panel Discussion

SESSION 16 (Grand Ballroom West, 3rd Floor)

**TOPICS RELATED TO NEW DEVELOPMENTS IN AORTIC COARCTATION, OPEN SURGICAL AND HYBRID TECHNIQUES**

**Moderators:** *Thomas C. Bower, MD*  
*Sebastian E. Debus, MD, PhD*

- 5:04 – 5:09** Indications And Results With Balloon Expandable Stents (BESs) For The Treatment Of Aortic Coarctation: Advanta V12 LD (Atrium/Maquet) Covered Stent And CP (Numed) Bare And Covered Stents And BeGraft (Bentley) Covered Stent: Tips And Tricks For Usage  
*Elchanan Bruckheimer, MBBS*
- 5:10 – 5:15** Value Of A Decision Aid To Help AAA Patients Fairly Choose Between EVAR And Open Repair  
*Philip P. Goodney, MD, MS*
- 5:16 – 5:21** The Gore Hybrid Partially Stented Graft In Renovisceral Debranching For Hybrid Treatment Of Complex AAAs: Advantages And Technical Tips  
*Francesco Setacci, MD*
- 5:22 – 5:27** Long-Term Multicenter Propensity Based Comparison Of Open Repair vs. F/EVAR For Pararenal AAAs: Which Is Best And When  
*Fabio Verzini, MD, PhD*
- 5:28 – 5:33** Preparation For And Technical Tips To Make Open Conversion After Failed EVAR Safer  
*Piotr Szopinski, MD*
- 5:34 – 5:39** What Is The Current Role For Open Repair Of AAAs: Is Open Repair Obsolete For Infrarenal AAAs  
*Jürg Schmidli, MD*
- 5:40 – 5:45** Open Surgery Is The Best Treatment For Coral Reef Lesions Of The Visceral Aorta And Aorto-Iliac Occlusive Disease: Why Endovascular Treatments Don't Work  
*Laurent Chiche, MD*
- 5:46 – 5:54** 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** What Does The CT For PE Actually Tell Us  
*Brian B. Ghoshhajra, MD, MBA*
- 7:35 – 7:50** What Do The Experts Really Use For Medical  
Treatment Of PE, When And For How Long  
*Geno J. Merli, MD, MACP*
- 7:50 – 8:00** Just Tell Me What I Need To Know: When Do I Look  
For Cancer And Perform Hypercoagulable Tests In PE  
*Rachel Rosovsky, MD, MPH*
- 8:00 – 8:10** Setting The Stage: The Emergency Physician  
Algorithm For Acute PE Management  
*Christopher Kabrhel, MD, MPH*
- 8:10 – 8:25** Intravenous Thrombolytic Therapy For PE: Does It  
Actually Work, And Safely  
*Mitchell D. Weinberg, MD*
- 8:25 – 8:35** Catheter-Directed Thrombolysis For PE: What Are  
The Outcomes  
*Akhilesh K. Sista, MD*
- 8:35 – 8:45** Percutaneous Pharmacomechanical Intervention For  
PE: Is There A Rationale  
*Robert A. Lookstein, MD, MHC DL*
- 8:45 – 8:55** Technical Tips For Pharmacomechanical Intervention  
For PE: How Do I Do It  
*Gary M. Ansel, MD*
- 8:55 – 9:15** Case Presentation – The Master Stumps The Experts  
*Gary M. Ansel, MD*  
*Michael R. Jaff, DO*

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

Panelists: *Brian B. Ghoshhajra, MD, MBA*  
*Christopher Kabrhel, MD, MPH*  
*Raghu Kolluri, MD*  
*Robert A. Lookstein, MD, MHC DL*  
*Geno J. Merli, MD, MACP*  
*Rachel Rosovsky, MD, MPH*  
*Akhilesh K. Sista, MD*  
*Mitchell D. Weinberg, 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 Thromboembolectomy 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 To Do This, And If So, When  
*John A. Kaufman, MD, MS*
- 10:50 – 11:05** Balloon Angioplasty For Chronic Thromboembolic Pulmonary Hypertension - Does This Really Work  
*Rabih A. Chaer, MD*
- 11:05 – 11:20** The Team Approach To PE Management: The National PERT Consortium  
*Kenneth Rosenfield, MD*
- 11:20 – 11:35** Is There A Role For Vascular Surgery On PERTs  
*Rabih A. Chaer, MD*
- 11:35 – 11:42** Small Catheter-Wire Techniques For Rescue Treatment Of Massive PEs (Video Presentation)  
*Manish Mehta, MD, MPH*
- 11:42 – 12:00** Challenging Cases And “PERT” Decisions

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

**Panelists:** *Rabih A. Chaer, MD*  
*Mark G. Davies, MD*  
*John A. Kaufman, MD, MS*  
*Christopher J. Kwolek, MD*  
*Manish Mehta, MD, MPH*  
*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)

**DIAGNOSIS AND TREATMENT OF VASCULAR MALFORMATIONS**

Trianon Ballroom, 3rd Floor

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

SESSION 19 (Trianon Ballroom, 3rd Floor)

**IMAGING AND PEDIATRIC VASCULAR MALFORMATIONS; LYMPHATIC AND VENOUS MALFORMATIONS**

**Moderators:** *Robert L. Vogelzang, MD*  
*James Donaldson, MD*

**1:00 – 1:05** Welcome  
*Krassi Ivancev, MD, PhD*

**IMAGING AND PEDIATRIC MALFORMATIONS**

**1:05 – 1:13** How I Select Patients And Plan For Vascular Malformation Endovascular Treatment In My Pediatric Patients  
*Patricia E. Burrows, MD*

**1:13 – 1:21** The Role Of MR Imaging In Diagnosis And Follow-Up Of Vascular Malformation Treatment  
*Martin Köcher, MD*

**1:21 – 1:29** Multidisciplinary Malformation Management At Children's Memorial  
*James Donaldson, MD*

**1:29 – 1:37** Choice Of Embolic Agents In Pediatric Malformations: A Risk Benefit Analysis  
*Anil P. Hingorani, MD*

**1:37 – 1:45** What I Know: Head And Neck Vascular Malformation Complications Due To Dangerous Anastomoses  
*Guilherme Dabus, MD*

**Moderators:** *Guilherme Dabus, MD*  
*Mollie Meek, MD*

**LYMPHATIC AND VENOUS MALFORMATIONS**

**1:47 – 1:55** Pros And Cons Of The Use Of Ethanol For Treatment Of Low-Flow Vascular Malformations – Strategies To Minimize Complications  
*Martin Köcher, MD*

**1:55 – 2:03** Use Of Sotradecol, Foam, And Other Sclerosants In Low-Flow Malformations: Long-Term Follow-Up And Complications  
*James Donaldson, MD*

**2:03 – 2:11** The Beijing Experience And Results: Comparative Use Of Bleomycin And Ethanol In Low-Flow Malformation Treatment  
*Xindong Fan, MD*

**2:11 – 2:19** A Brief History Of Ethanol: How Did I Get Here  
*Wayne F. Yakes, MD*

SESSION 20 (Trianon Ballroom, 3rd Floor)

**SURGICAL ISSUES IN VASCULAR MALFORMATION MANAGEMENT**

**Moderators:** *Krassi Ivancev, MD, PhD*  
*Randolph C. Robinson, MD, DDS*  
*Tarek M.S. Radwan, FRCS*

**2:21 – 2:29** Soft Tissue Injury After Sclerotherapy Procedures  
*Dong-ik Kim, MD*

**2:29 – 2:37** Surgical Strategies For Lymphatic Malformations  
*Jia Wei Zheng, PhD*

**2:37 – 2:45** Surgical Reconstructions And Patient Normalization Post-Endovascular Sclerotherapy Of Head And Neck Vascular Malformations  
*Randolph C. Robinson, MD, DDS*

**2:45 – 2:53** Otolaryngology Surgical And Endoscopic Issues In Vascular Malformation Management  
*Edward J. Hepworth, MD*

**2:53 – 3:01** Plastic Surgery Reconstruction Issues In Complex Vascular Malformation Management  
*Tanya M. Oswald, MD*

**3:01 – 3:09** Surgical Management Of Hand AVMs  
*Dong-ik Kim, MD*

**DEBATE**

**3:09 – 3:14** Today, In Most Cases, Vascular Malformations Can Be Managed Endovascularly Without The Need For Open Surgery: FOR  
*Randolph C. Robinson, MD, DDS*

**3:14 – 3:19** Today, In Most Cases, Vascular Malformations Can Be Managed Endovascularly Without The Need For Open Surgery: FOR  
*Edward J. Hepworth, MD*

**3:19 – 3:24** Today, In Most Cases, Vascular Malformations Can Be Managed Endovascularly Without The Need For Open Surgery: AGAINST  
*Dong-ik Kim, MD*

**3:24 – 3:29** Today, In Most Cases, Vascular Malformations Can Be Managed Endovascularly Without The Need For Open Surgery: AGAINST  
*Tanya M. Oswald, MD*

**3:29 – 3:31** Rebuttal

**3:31 – 3:33** Rebuttal

**3:33 – 3:34** Conclusion And Vote

**3:34 – 3:41** Break – Visit Exhibits And Pavilions (2nd and 3rd Floors)

SESSION 21 (Trianon Ballroom, 3rd Floor)

**ENDOASCULAR MANAGEMENT OF HIGH-FLOW VASCULAR MALFORMATION**

**Moderators:** *Patricia E. Burrows, MD*

*Dong-ik Kim, MD*

*Mikolaj Wojtaszek, MD, PhD*

*Martin Köcher, MD*

**3:41 – 3:49** The Yakes AVM Classification System: A Powerful Tool To Drive Treatment Strategies  
*Krassi Ivancev, MD, PhD*

**3:49 – 3:57** AVM Nidus: Search, Identify And Destroy  
*Robert L. Vogelzang, MD*

**3:57 – 4:05** The Retrograde Vein Approach To AVMs – The Lublin Method  
*Krzysztof Pyra, MD, PhD*

**4:05 – 4:13** Why I Use Onyx And Not Ethanol In AVM Management  
*Furuzan Numan, MD*

**4:13 – 4:21** Onyx Under The Microscope: Limited Role In AVM Embolotherapy  
*Mollie Meek, MD*

**4:21 – 4:29** A Warsaw Odyssey: From Onyx To Ethanol In AVM Embolotherapy  
*Mikolaj Wojtaszek, MD, PhD*

**4:29 – 4:37** Results And Complications In Ethanol Embolotherapy Of AVMs: Cairo Lessons  
*Tarek M.S. Radwan, FRCS*

- 4:37 – 4:45** The Long View From Seoul: Complications And Endovascular Treatment Results; 20-Year Follow-Up For Body And Extremity AVMs  
*Kwang Bo Park, MD, PhD*
- 4:45 – 4:53** “Untreatable” Chest, Shoulder, And Upper Extremity AVMs: Successfully Managed By New Endovascular Treatment Strategies  
*Wayne F. Yakes, MD*
- 4:53 – 5:01** Curative Endovascular Treatment Of Scalp, Ear, And Mandible AVMs: Evolution From Polymerizing Embolic Agents To Liquid Sclerosant Embolic Agents  
*Xindong Fan, MD*
- 5:01 – 5:07** Break

SESSION 22 (Trianon Ballroom, 3rd Floor)

**THE WORST COMPLICATION I HAVE EVER HAD AND WHAT I LEARNED (6-MINUTE CASE PRESENTATIONS)**

**Moderators:** *Kwang Bo Park, MD, PhD*  
*Xindong Fan, MD*  
*Wayne F. Yakes, MD*

- 5:09 – 5:51** Panel Discussion: The Worst Complications I Have Ever Had And What I Learned  
**Panelists:** *James Donaldson, MD*  
*Krassi Ivancev, MD, PhD*  
*Tomasz Jargiello, MD, PhD*  
*Dong-ik Kim, MD*  
*Robert L. Vogelzang, MD*  
*Mikolaj Wojtaszek, MD, PhD*
- 5:51 – 6:00** Conclusions  
*Wayne F. Yakes, MD*  
**End of Program D**

**WEDNESDAY, NOVEMBER 15, 2017**

- 6:00 A.M. General Registration – Rhinelander Gallery, 2nd Floor**  
**6:00 A.M. Faculty Registration – Morgan Suite, 2nd Floor**  
**6:00 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. – 5:52 P.M.

Grand Ballroom East, 3rd Floor

**PROGRAM F: SESSIONS 31-38**

**New Developments In Medical, Anti-Atherogenic And Anti-Hypertensive Treatments; Endoleak Management; Issues And Other Important Topics Related To History, Government, Reimbursement, Ethics, Practice And Vascular Care**

6:40 A.M. – 6:06 P.M.

Grand Ballroom West, 3rd Floor

**PROGRAM G: SESSIONS 39-46**

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

6:50 A.M. – 5:57 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)

OCCLUSIVE DISEASE MANAGEMENT – HOT  
TOPICS, NEW DEVELOPMENTS AND IMPORTANT  
GENERALITIES

*Moderators: Enrico Ascher, MD*

*Craig M. Walker, MD*

- 6:40 – 6:45** Role And Comparative Value Of All Access Sites And Routes For Lower Extremity Endovascular Treatments: Which Are Best And When  
*Jihad A. Mustapha, MD*
- 6:46 – 6:51** 12 Commandments For Successful BTK Intervention In Chronic Limb Threatening Ischemia (CLTI) Patients: Including Technical Tips For Antegrade Femoral Artery Puncture  
*Ali Amin, MD, RVT*
- 6:52 – 6:57** Role Of BMSs, Supera Stents, DCBs, DESs And Atherectomy For Various SFA/Pop Lesions: What Works For Which Lesion And What Is The Evidence  
*Brian G. DeRubertis, MD*
- 6:58 – 7:03** Relationship Between Vessel Size And Clinical Outcomes Of Endovascular Treatments Of Fem-Pop Lesions: Small Diameter Arteries Have Worse Outcomes  
*Seiichi Hiramori, MD*
- 7:04 – 7:09** Differing Patterns Of Restenosis With Various Endovascular Treatments: What Are The Implications For Determining The Best Treatment  
*Lawrence A. Garcia, MD*
- 7:10 – 7:15** New Global Multidisciplinary Guideline For Chronic Limb Threatening Ischemia (CLTI): A Better Evidence-Based Framework For Staging Decision Making, Treating And Reporting  
*Michael S. Conte, MD*
- 7:16 – 7:21** **DEBATE:** Endovascular Treatments Should Be The First Option For Most Patients With CLTI – Today And In The Future  
*Peter A. Schneider, MD*
- 7:22 – 7:27** **DEBATE:** Not So: Open Procedures Should Be The First Therapeutic Option In Many CLTI Patients: What Is The Percentage Today: What Will It Be In 5 Years As Techniques Improve  
*Joseph L. Mills, MD*
- 7:28 – 7:33** What Are The Many Variables In Drug Eluting Technologies Which May Influence Their Ability To Prevent Restenosis: Where Are They Today And Where Are They Going  
*William A. Gray, MD*
- 7:34 – 7:39** Tips And Tricks For Plain Old Balloon Angioplasty (POBA) Of Infrapopliteal Artery Lesions: Details Matter And How To Do It Optimally  
*Roberto Ferraresi, MD*
- 7:40 – 7:45** Panel Discussion

SESSION 24 (Grand Ballroom East, 3rd Floor)

**MORE ON LOWER EXTREMITY OCCLUSIVE DISEASE – NEW DEVELOPMENTS AND HOT TOPICS RELATING TO STENTS**

**Moderators:** *Kenneth Ouriel, MD, MBA*  
*Edward Y. Woo, MD*

- 7:46 – 7:51** When Are Stents Required In The Era Of DCBs: Is It Best To Leave No Metal Behind  
*Koen Deloose, MD*
- 7:52 – 7:57** Paradigm For Optimal Treatment Of Various Types Of SFA-Pop Occlusive Disease: Which Treatment For Which Lesion: Role Of Multiple Stents And Zilver PTX DESs (Cook) For Long Lesions  
*Gary M. Ansel, MD*
- 7:58 – 8:03** Overview Of Stents For SFA-Pop Lesions: Which Is Best And When: Value Of Local Adventitial Anesthesia And The Presto Technique To Assure Optimal Supera (Abbott) Stent Delivery  
*Andrej Schmidt, MD*  
*Dierk Scheinert, MD*
- 8:04 – 8:09** BMSs vs. Biomimetic (Supera) Stents vs. DESs vs. Covered Stents To Treat Fem-Pop Lesions; Comparative Long-Term Performance: Which Device For Which Lesion  
*Konstantinos Katsanos, MSc, MD, PhD*
- 8:10 – 8:15** Comparison Of BMSs vs. DESs For SFA Lesions: Results Of The BATTLE RCT  
*Yann Gouëffic, MD, PhD*
- 8:16 – 8:21** Update On New Developments With The Zilver PTX DES (Cook) For SFA-Pop Lesions: Its Effectiveness Is Maintained In Longer Lesions; Patients With Poor Run-Off, Diabetes And Chronic Renal Failure; And Asian Patient Groups  
*Michael D. Dake, MD*  
*Hiroyoshi Yokoi, MD*  
*Kimihiko Komori, MD, PhD*
- 8:22 – 8:27** IMPERIAL RCT Study Design Comparing Eluvia DESs (Boston Scientific) vs. Zilver PTX DESs (Cook) For The Treatment Of SFA-Pop Lesions  
*William A. Gray, MD*
- 8:28 – 8:33** 3-Year Results Of The Eluvia DES (Boston Scientific) Shows Maintained Safety And Efficacy In The MAJESTIC RCT With Fem-Pop Lesions: Advantages Of This DES And Why It Is A Better Option Than DCBs For These Lesions  
*Stefan Müller-Hülsbeck, MD*
- 8:34 – 8:39** Update On 3-Year Experience With The Absorb Everolimus Drug Eluting Bioresorbable Stent (BRS) From Abbott For BTK Lesions: Promising Results Beyond 2 Years And Future Prospects  
*Ramon L. Varcoe, MBBS, MS, PhD*
- 8:40 – 8:45** Advantages Of The Supera Interwoven Biomimetic Stent (Abbott) For Treating Fem-Pop Lesions With Good 5-Year Primary Patency Even With Long And Calcified Lesions  
*Peter C.J. Goverde, MD*

**8:46 – 8:51** Current Needs And Solutions In The Treatment Of Severe CLTI (Rutherford 5 And 6) Due To Occlusive Lesions In The Thigh, Leg And Foot: Value Of The Supera Interwoven Stent (Abbott) And The Absorb Drug Eluting BRS (Abbott)

*Steven Kum, MD*

**8:52 – 8:57** Panel Discussion

SESSION 25 (Grand Ballroom East, 3rd Floor)

**MORE ON COMPLEX LOWER EXTREMITY OCCLUSIVE DISEASE AND ITS TREATMENT – LITHOPLASTY, ATHERECTOMY, TREATMENT FOR CALCIFICATION AND COMBINATIONS OF TREATMENT**

**Moderators:** *Andrej Schmidt, MD*

*Fabrizio Fanelli, MD*

**8:58 – 9:03** Shockwave Lithoplasty - Indications And Results: Use In Combination With DCBs And Other Treatments

*Gunnar Tepe, MD*

*Andrew Holden, MBChB*

*Marianne Brodmann, MD*

**9:04 – 9:09** How To Prep Vessels For Endovascular Treatments With BMSs, DESs, DCBs: Value Of Prolonged And High Pressure Balloon Inflation, Scoring Balloons And Atherectomy

*Erwin Blessing, MD*

**9:10 – 9:15** Vessel Prep May Cause Increased Distal Embolization And Be Harmful: How To Manage This Problem

*Mark W. Mewissen, MD, RVT*

**9:16 – 9:21** Atherectomy For Intermittent Claudication From Infrainguinal Occlusive Lesions Results In Worse Outcomes Than The Natural History Of The Disease: From Medicare Data

*Dipankar Mukherjee, MD*

**9:22 – 9:27** Zilver PTX DES Stent (Cook) Treatment vs. Prosthetic Open Bypass For TASC C/D Lesions: Results Of The ZILVERPASS RCT

*Patrick Peeters, MD*

*Koen Deloose, MD*

*Marc Bosiers, MD*

**9:28 – 9:33** What Is The Value Of Adding A DCB To A BMS To Treat Fem-Pop Occlusive Disease: It Depends On The DCB Used (Passeo-18 Lux DCB [Biotronik]): 1-Year Results Of The BIOLUX 4 EVER Trial

*Koen Deloose, MD*

*Marc Bosiers, MD*

*Patrick Peeters, MD*

**9:34 – 9:39** Value Of Lesion Preparation With Directional Atherectomy In Improving Outcomes Of DCB Treatment: From The DEFINITIVE AR Trial

*Thomas Zeller, MD*

*Gunnar Tepe, MD*

**9:40 – 9:45** Comparison Of DCBs (In.Pact) vs. DESs (Zilver PTX) 1-Year Results With Treatment Of TASC A/B And C/D Lesions: From The DRASTICO Trial Of Fem-Pop Lesions

*Francesco Liistro, MD*

- 9:46 – 9:51** Role Of POBA vs. DEBs vs. DESs For Infrapopliteal Artery Lesion Treatment: An Evidence-Based Meta-Analysis  
*Konstantinos Katsanos, MSc, MD, PhD*
- 9:52 – 9:57** Character And Localization Of Arterial Calcification: What Significance Does It Have For Producing Ischemia And Making Endovascular Treatments Difficult  
*Renu Virmani, MD*  
*Aloke Finn, MD*
- 9:58 – 10:03** Calcified Arteries Are Hard To Clamp And Sew In Bypass Surgery: Technical Tips And Tricks To Deal With These Problems Successfully  
*Enrico Ascher, MD*  
*Frank J. Veith, MD*
- 10:04 – 10:10** Panel Discussion
- 10:10 – 10:20** Break – Visit Exhibits And Pavilions (2nd and 3rd Floors)

SESSION 26 (Grand Ballroom East, 3rd Floor)

**MORE ON LOWER EXTREMITY OCCLUSIVE DISEASE: NEW DEVELOPMENTS IN DRUG COATED BALLOONS (DCBs), OTHER DEVICES AND BELOW-THE-KNEE (BTK) DISEASE**

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

- 10:20 – 10:25** Evolution Of Optimal DCB Technology: Where Is It Currently And Where Can It Go  
*Juan Granada, MD*
- 10:26 – 10:31** With DCBs For CLTI Distal Drug Migration May Adversely Affect Wound Healing: Has It Ever Happened  
*Ignacio Escotto, MD*
- 10:32 – 10:37** Current Status Of All DCBs For Fem-Pop Lesions: RCTs And Other Evidence: Comparative Performance: All DCBs Are Not Equal  
*John R. Laird, MD*
- 10:38 – 10:43** Current Value Of DCBs For Fem-Pop And BTK Lesions: What Are The Prospects For Improvement In The Future: New 1-Year Chinese In.Pact Results With SFA Lesion  
*Gunnar Tepe, MD*  
*Zhong Chen, MD*
- 10:44 – 10:49** How Well Will DCBs Work For Calcified And Long Lesions; For Total Occlusions: Will Adjuncts And Improvements Help  
*Fabrizio Fanelli, MD*
- 10:50 – 10:55** 4-Year Results Of The IN.PACT SFA RCT Comparing The In.Pact Admiral DCB (Medtronic) vs. POBA In Fem-Pop Lesions: The Patency Benefits Persist And With Various Lesions In Different Patient Groups  
*Peter A. Schneider, MD*  
*John A. Laird, MD*
- 10:56 – 11:01** Real World Value Of The In.Pact Admiral DCB (Medtronic) For Fem-Pop Lesions: From The In.Pact Global Registry: What Else Does It Tell Us  
*Marianne Brodmann, MD*
- 11:02 – 11:07** Panel Discussion

**Moderators:** *John R. Laird, MD*  
*Antonio Micari, MD, PhD*

- 11:08 – 11:13** 2-Year Value Of The Lutonix DCB (Bard) For the Treatment Of Fem-Pop Occlusive Lesions In A RCT vs. POBA: Do The Benefits Persist And What Are They In Long Complex Lesions  
*Dierk Scheinert, MD*
- 11:14 – 11:19** Safety And Benefits Of The Lutonix DCB (Bard) For The Treatment Of BTK And Infrapopliteal Artery Lesions: > 1-Year Results From A Global Registry  
*Michael K.W. Lichtenberg, MD*
- 11:20 – 11:25** 1-Year Results With The Ranger DCB (Boston Scientific) For The Treatment Of Fem-Pop Lesions: Equivalent Benefits In Diabetic Patients  
*Dierk Scheinert, MD*
- 11:26 – 11:31** Update On The > 1-Year Results With The Stellarex DCB (Spectranetics) For Fem-Pop Lesions: From The European And US ILLUMENATE RCTs vs. POBA: It Is Effective With Long Complex Occlusive Lesions And In Diabetics  
*Sean P. Lyden, MD*  
*Stefan Müller Hülsbeck, MD*
- 11:32 – 11:37** Comparison Of 4 Different DCBs (Including A New One From Acotec) In BTK And Infrapopliteal Arteries: Why Results Have Differed And What Are Prospects For DCB Benefits BTK: Insights From The ACO-ART BTK Registry  
*Francesco Liistro, MD*
- 11:38 – 11:43** Will DCBs Ever Work Effectively In BTK And Crural Artery Occlusive Disease: Sizing Matters: How Can Ultrasound Help And How To Predict Performance  
*Antonio Micari, MD, PhD*
- 11:44 – 11:49** Drug Coated “Low Trauma”: Chocolate Touch PTA Balloon (TriReme Medical & QT Vascular): Advantages And 1-Year Results: From The ENDURE Trial  
*Gunnar Tepe, MD*  
*Andrew Holden, MBChB*  
*Thomas Zeller, MD*  
*Wei Guo, MD*
- 11:50 – 11:55** DCBs And DESs Produce Equivalent Results At 2-3 Years With Short SFA Lesions But DESs Are Better For Long Lesions: From The REAL-PTX RCT  
*Dierk Scheinert, MD*
- 11:56 – 12:03** Panel Discussion
- 12:03 – 1:00** Lunch Break – 2nd Floor Promenade  
Visit Exhibits And Pavilions (2nd and 3rd Floors)

SESSION 27 (Grand Ballroom East, 3rd Floor)

**MORE ABOUT CHRONIC LIMB THREATENING ISCHEMIA (CLTI); THE “NO-OPTION FOR TREATMENT” LIMB AND EXTREME LIMB SALVAGE TECHNIQUES AND RESULTS**

**Moderators:** *Craig M. Walker, MD*  
*Richard F. Neville, MD*

- 1:00 – 1:05** Unusual Open Surgical Limb Salvage Techniques To Save Limbs Deemed “Unsalvageable”: They Often Work  
*Enrico Ascher, MD*  
*Neal S. Cayne, MD*  
*Frank J. Veith, MD*

- 1:06 – 1:11** All Patients With CLTI Should Have An Attempt At Revascularization: The Angiosome Concept Is Not Usually Helpful: Tips And Tricks For Success And Who Should Have A Primary BTK Amputation  
*Hisham Rashid, FRCS*
- 1:12 – 1:17** Value Of PTFE Femoro-Tibial/Peroneal Bypasses To Salvage Limbs: Long-Term Patency Is Possible Although Redo Procedures May Be Needed  
*Carlo Pratesi, MD*  
*Raffaele Pulli, MD*
- 1:18 – 1:23** PTFE Tibial And Peroneal Bypasses For Limb Salvage Are Worthwhile: Patients Having Them Have Better Short And Long-Term Cardiovascular Morbidity And Mortality (Up To 5 Years) Than Those Undergoing Amputation  
*Nicholas J. Gargiulo III, MD, RPVI, RVT, RDMS*  
*Gregg S. Landis, MD*  
*Neal S. Cayne, MD*  
*Frank J. Veith, MD*  
*Evan C. Lipsitz, MD, MBA*
- 1:24 – 1:29** Indications And Techniques For And Midterm Results Of Below The Ankle Angioplasty For CLTI  
*Roberto Ferraresi, MD*
- 1:30 – 1:35** Indications, Techniques And Results Of Pedal-Plantar Loop And Transcollateral Angioplasty: Tips And Tricks For Metatarsal Artery Access  
*Marco G. Manzi, MD*

#### **ARTERIALIZING FOOT VEINS**

- 1:36 – 1:41** How To Salvage Unsalvageable Limbs By Arterializing The Venous Circulation Of The Foot By Bypasses, Etc.: Technical Steps And Long-Term Results  
*Pramook Mutirangura, FRCS*
- 1:42 – 1:47** Percutaneous Endovascular Arterialization Of Ankle And Foot Veins For End Stage No Option CLTI (The Desert Foot) Using The Limflow System: How It Works (Video) And Results  
*Steven Kum, MD*
- 1:48 – 1:53** The Limflow Venous Arterialization System Via Percutaneous Punctures: Technical Tips, Precautions, Hybrid Modifications And Results: How To Make It Work To Salvage The Otherwise Unsalvageable CLTI Foot  
*Roberto Ferraresi, MD*
- 1:54 – 2:00** US Experience With The Limflow Procedure For Percutaneous Venous Arterialization For Limb Salvage  
*Daniel G. Clair, MD*  
*Jihad A. Mustapha, MD*
- 2:00 – 2:06** Panel Discussion

SESSION 28 (Grand Ballroom East, 3rd Floor)

### **NEW DEVELOPMENTS IN LOWER EXTREMITY STENT-GRAFTS, PROSTHETIC (PTFE) GRAFTS AND TREATMENT FOR IN-STENT RESTENOSIS (ISR)**

**Moderators:** *Daniel G. Clair, MD*  
*Michael S. Conte, MD*

- 2:06 – 2:11** Selective Open And Endovascular Treatment Achieves The Best Results With CLTI: Tips And Tricks To Achieve Good Distal Bypass Results And The Value Of PTFE Grafts To Crural Arteries When Vein Is Unavailable  
*Francesco Spinelli, MD*
- 2:12 – 2:17** With Blue Toe Syndrome Atheroemboli Are Not The Commonest Cause: Lysis, PTA And Stent Can Be Acceptable Treatment: When Are Covered Stents Necessary: A 10-Year Experience  
*Thomas O. McNamara, MD*
- 2:18 – 2:23** Advantages Of And Indications For The Viabahn VBX Balloon Expandable Covered Stent (Gore): Technical Tips, Limitations And Value In Treating Aorto-Iliac Disease  
*Jean Bismuth, MD*
- 2:24 – 2:29** Percutaneous Transvenous Prosthetic Arterial Bypass For Long Complicated Fem-Pop Occlusions: The PQ Bypass Procedure: Concept And Technique For Performing (Video)  
*Andrej Schmidt, MD*  
*Dierk Scheinert, MD*  
*James D. Joye, DO*
- 2:30 – 2:35** 1-Year Results Of The PQ Transvenous Bypass Procedure: From The Multicenter DETOUR Trial  
*Sean P. Lyden, MD*
- 2:36 – 2:41** Update On Endoluminal Bypass With Viabahn Stent Grafts (Gore): How To Prevent And Treat Edge Stenosis Failures: Results Of The SUPER B RCT Comparing Endoluminal Bypasses vs. Standard Vein Bypasses For SFA Occlusions  
*Michel M.P. Reijnen, MD, PhD*

### IN STENT RESTENOSIS (ISR)

- 2:42 – 2:47** **DEBATE:** Long Segment SFA ISR Is Best Treated Endovascularly: What Are The Best Current Endovascular Tools  
*Craig M. Walker, MD*
- 2:48 – 2:53** **DEBATE:** Not So: Endovascular Techniques Have Poor Results In This Setting: Open Bypass Should Be The First Invasive Option  
*Niten Singh, MD*
- 2:54 – 2:59** What Is The Best Current Treatment In The US For ISR: How Can OCT Improve Outcomes  
*Todd R. Vogel, MD, MPH*
- 3:00 – 3:05** DCBs For ISR: Does Double Dosing Help: 2-Year Results Of The COPA CABANA Trial With The Cotavance DCB (Medrad-Bayer)  
*Gunnar Tepe, MD*
- 3:06 – 3:11** Brachy Therapy For Severe Or Extensive ISR: It Is Still A Viable Treatment Option For A Difficult Problem: Advantages And Limitations  
*Matthew T. Menard, MD*
- 3:12 – 3:19** Panel Discussion
- 3:19 – 3:28** Break – Visit Exhibits And Pavilions (2nd and 3rd Floors)

SESSION 29 (Grand Ballroom East, 3rd Floor)

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

**Moderators:** *Kenneth Ouriel, MD, MBA*  
*Michael L. Marin, MD*

### **NEW DEVELOPMENTS RELATED TO INTERMITTENT CLAUDICATION (IC)**

- 3:28 – 3:33** Drugs And Neuromuscular Stimulation (NMES) Can Improve Walking Distance With IC: How To Do It  
*Alun H. Davies, MA, DM, DSc*
- 3:34 – 3:39** The Financial Side Of Invasive Treatments For IC  
*Robert M. Zwolak, MD, PhD*
- 3:40 – 3:45** Drug Eluting Devices Are The New Standard For Fem-Pop Endovascular Treatments For IC: The Timing Of Development Of Restenosis Is A Guide To Why Extended Drug Release Is Important With DESs: Which DES Has It  
*Peter A. Schneider, MD*
- 3:46 – 3:51** How To Differentiate With Certainty Ischemic Buttock Claudication From Spinal Stenosis  
*Manju Kalra, MBBS*
- 3:52 – 3:57** RCTs Of Supervised Exercise Therapy vs. PTA For IC Due To Iliac Occlusive Disease: What Do The CLEVER And The Newly Finished SUPER RCTs Tell Us  
*Mark J.W. Koelemay, MD, PhD*
- 3:58 – 4:03** What Is Venous Claudication: How Should It Be Diagnosed And Treated  
*Nicos Labropoulos, BSc (Med), PhD, DIC, RVT*

### **PROGRESS IN THE TREATMENT OF ACUTE LIMB ISCHEMIA (ALI)**

- 4:04 – 4:09** Endovascular Treatment Of ALI Is Better Than Open Surgical Treatment: When Is It Not: From A Nationwide Swedish Study  
*Martin Björck, MD, PhD*
- 4:10 – 4:15** Acute Limb Ischemia (ALI): What Is The Best Current Treatment Approach: Predictors Of Limb Loss And Salvage In This Setting: When Is Open Treatment The Best Option  
*Niten Singh, MD*
- 4:16 – 4:21** Large Caliber Percutaneous Vacuum Assisted Thrombectomy In ALI: How Does It Work: Benefits And Limitations: Will It Replace Thrombolysis And Open Surgery  
*Michele Rossi, MD*
- 4:22 – 4:27** New Tips And Tricks For Managing ALI: Value Of Duplex Ultrasound In This Setting  
*Michael H. Wholey, MD, MBA*
- 4:28 – 4:37** Panel Discussion

SESSION 30 (Grand Ballroom East, 3rd Floor)

## IMPORTANCE OF FOOT ARTERIES AND PERFUSION IN CLTI: HOW TO ASSESS AND TREAT; VALUE OF ANGIOSOMES; METHODS TO EVALUATE EFFECTIVENESS OF TREATMENT

**Moderators:** *Marco G. Manzi, MD*  
*Steven Kum, MD*



- 4:38 – 4:43** Anatomical Variability And Pathology Of Foot Arteries: When And How To Treat And Results: Value Of Angiosomes: Is There A Role For Bypass  
*Roberto Ferraresi, MD*  
*Marco G. Manzi, MD*
- 4:44 – 4:49** **DEBATE:** The Angiosome Concept Has Little Value: Never Deny A Patient With CLTI A Revascularization For Limb Salvage Based On It  
*Frank E.G. Vermassen, MD, PhD*
- 4:50 – 4:55** **DEBATE:** When Does The Angiosome Concept Make A Difference And When Not: What Explains Discordant Results And Opinions  
*Richard F. Neville, MD*
- 4:56 – 5:01** When Does The Angiosome Concept Matter: With Open Surgery For Limb Salvage; For Endovascular Treatments For Limb Salvage: How Does Indocyanine Green Fluorescence Imaging (IGFI) Help  
*Maarit Venermo, MD, PhD*
- 5:02 – 5:07** Effective Non-Invasive Treatment Of CLTI By The Art-Assist Sequential Compression Device: How Does It Work By Improving The Capillary Circulation: Indications And Results  
*Sherif A.H. Sultan, MD*
- 5:08 – 5:13** 3-Year Results Of The SPINACH Trial Show What Factors Are Important For Selecting Open Or Endovascular Treatments For CLTI  
*Nobuyoshi Azuma, MD*
- 5:14 – 5:19** Treatment Strategy For CLTI Should Depend On The Degree Of Ischemia And The Extent Of The Gangrene: This May Explain Different Opinions On Angiosomes  
*Joseph L. Mills, MD*

**NON-INVASIVE IMAGING**

- 5:20 – 5:25** Modalities To Determine The Adequacy Of Pedal Revascularization In CLTI  
*Krishna J. Rocha-Singh, MD*
- 5:26 – 5:31** DZAM: A Software Based System For Assessing Foot Perfusion From Doppler Signals: How Does It Work And Advantages  
*Cynthia K. Shortell, MD*
- 5:32 – 5:37** Value Of The Profusa Lumee Implantable O<sub>2</sub> Microsensors And Indocyanine Green Angiography To Assess Foot Perfusion Before And After Treatment For CLTI  
*Miguel F. Montero-Baker, MD*
- 5:38 – 5:43** 2D Perfusion Angiography To Assess The Effectiveness Of Treatments On Foot Perfusion: How To Do It And Quantitate Its Results  
*Jos C. van den Berg, MD, PhD*
- 5:44 – 5:52** Panel Discussion  
**End of Program E**

**PROGRAM F (SESSIONS 31-38)**

**NEW DEVELOPMENTS IN MEDICAL, ANTI-ATHEROGENIC AND ANTI-HYPERTENSIVE TREATMENTS; ENDOLEAK MANAGEMENT; ISSUES AND OTHER IMPORTANT TOPICS RELATED TO HISTORY, GOVERNMENT, REIMBURSEMENT, ETHICS, PRACTICE AND VASCULAR CARE**  
Grand Ballroom West, 3rd Floor

SESSION 31 (Grand Ballroom West, 3rd Floor)

**MEDICAL TREATMENTS; LIPID MANAGEMENT BY DRUGS; HEART AND CORONARY STENT RELATED TOPICS**

**Moderators:** *Russell H. Samson, MD, RVT*  
*Karthikeshwar Kasirajan, MD*

- 6:40 – 6:45** Value And Limitations Of Cannabis (Marijuana) In Vascular Patients: What Is The Drug's Effect On Blood Vessels  
*Karthikeshwar Kasirajan, MD*
- 6:46 – 6:51** How Does A Cardiology Evaluation Before Major Vascular Surgery Decrease Perioperative Myocardial Infarction Rates  
*Ashraf Mansour, MD*
- 6:52 – 6:57** Value Of Statins, Diet, Ezetimibe And PCSK-9 Inhibitors In Vascular Patients: Update On The Importance Of LDL Cholesterol (LDL-C) Levels: How Low Should They Be Pushed: What Drugs And Dosages  
*Peter Henke, MD*
- 6:58 – 7:03** Are LDL-C Levels And Statin Induced Decreases In LDL-C Levels Important (As In Europe) Despite AHA Guidelines: How To Treat Patients Needing Lipid Lowering Who Appear Statin Intolerant  
*Jeffrey S. Berger, MD, MS*
- 7:04 – 7:09** **DEBATE:** Lowering LDL-C Levels With Statins And PCSK-9 Inhibitors In Vascular And At Risk Patients Prevents Cardiovascular Events And Deaths, Is Reasonably Safe And Helps Patients To Have Longer And Better Lives  
*Ron Waksman, MD*
- 7:10 – 7:15** **DEBATE:** Not So: Statins Are Dangerous Drugs And Lowering LDL-C Levels Does No Good And May Be Harmful  
*Sherif A.H. Sultan, MD*
- 7:16 – 7:21** Why Are PCSK-9 Inhibitors A Game-Changer For PAD Patients: Coronary Plaques Can Stabilize With Lower LDL-C Levels Produced By High Dose Statins Plus PCSK-9: The GLAGOV Trial: How Low Should The LDL-C Be Lowered To  
*Ido Weinberg, MD, MSc*
- 7:22 – 7:27** The Less Than Stellar 3-Year Results Of The Absorb Drug Eluting Bioresorbable Stent (BRSs) (Abbott) In Coronary Lesions May Be Due To Variable And Imperfect Implantation Techniques And Sizing: Small Arteries May Be A Problem: What Is The Future For BRSs  
*Ron Waksman, MD*  
*Gregg W. Stone, MD*
- 7:28 – 7:33** Update On When If Ever After A Coronary BMS Or DES Can Vascular Surgery Safely Be Performed And How Should Antiplatelet Drugs Be Managed Perioperatively In Coronary Stent Patients  
*Caron B. Rockman, MD*  
*Jeffrey S. Berger, MD, MS*
- 7:34 – 7:39** Effect Of Frailty Assessment On Preoperative Risk Predictive Models For Various Vascular Surgical Procedures In Various Vascular Beds  
*Mohammad H. Eslami, MD, MPH*

**7:40 – 7:48** Panel Discussion

SESSION 32 (Grand Ballroom West, 3rd Floor)

**MEDICAL AND INTERVENTIONAL TREATMENT OF HYPERTENSION; REGENERATIVE TREATMENTS; STENOSIS ASSESSMENT BY FRACTIONAL FLOW RESERVE (FFR); VALUE OF FISH OILS**

*Moderators: Ron Waksman, MD*

*Jeffrey S. Berger, MD, MS*

- 7:49 – 7:54** Update On Recent Trials Of Drug Treatment For Control Of Hypertension: What Is Optimal Medical Treatment And What Level Of Blood Pressure Should Be Maintained In Patients  
*Natalie A. Marks, MD, RPVI, RVT*
- 7:55 – 8:00** How To Manage Hypertension In Patients With Atherosclerotic Renal Artery Stenosis: When Is Medical Treatment Indicated: When Stenting Or Bypass Despite The CORAL And ASTRAL Trials  
*Jean-Baptiste Ricco, MD, PhD*
- 8:01 – 8:06** Status Of Renal Denervation And Other New Invasive Catheter-Based Treatments For Drug Resistant Hypertension  
*Horst Sievert, MD*
- 8:07 – 8:12** Endovascular Creation Of An Iliac Arterio-Venous Fistula To Treat Drug Resistant Hypertension: Rationale And Results Of The ROX Trial Of The ROX Coupler Device  
*Krishna J. Rocha-Singh, MD*
- 8:13 – 8:18** A Promising New Device To Treat Drug Resistant Hypertension By Reshaping The Carotid Sinus And Enhancing Baroreceptor Activity: The Mobius HD Device (Vascular Dynamics): How It Works And Results From The CALM II Trial  
*Mark C. Bates, MD*  
*Gregg W. Stone, MD*
- 8:19 – 8:24** Stem Cell And Gene Treatment For CLTI Is Not Dead Yet: Results Of The MOBILE Trial Of Bone Marrow Aspirate Cells  
*Richard J. Powell, MD*
- 8:25 – 8:30** Regenerative Medicine For CLTI: What Is The Future For Stem Cell Therapy In Vascular Disease: Current Highlights  
*Dong-ik Kim, MD*
- 8:31 – 8:36** Image Based Coronary Computational Flow Analysis (FFR<sub>ct</sub>) Can Reduce Perioperative Myocardial Infarctions And Improve Outcomes In Vascular Patients With AAAs And Occlusive Disease: How Does It Work  
*Christopher K. Zarins, MD*
- 8:37 – 8:42** Fish Oil (Omega 3) May Be Good For The Heart But Bad For AAA Development: Why This Is So  
*Jes S. Lindholt, MD*
- 8:43 – 8:48** Compensatory Arterial Enlargement In Diabetics: Mechanism And Significance For Treatments  
*Nicos Labropoulos, BSc (Med), PhD, DIC, RVT*
- 8:49 – 8:55** Panel Discussion

SESSION 33 (Grand Ballroom West, 3rd Floor)

## ENDOLEAKS AND ENDOTENSION: THEIR NATURAL HISTORY AND TREATMENT

**Moderators:** *Matt M. Thompson, MD*  
*Barry T. Katzen, MD*

- 8:56 – 9:01** The Underlying Mechanism Of Type 2 Endoleaks Associated With Sac Enlargement: What Is Its Impact On How They Should Be Diagnosed And Treated: Type 2 Endoleaks Can Be Dangerous  
*Michel Makaroun, MD*
- 9:02 – 9:07** **DEBATE:** Type 2 Endoleaks With AAA Sac Enlargement Can Be Dangerous And Should Be Treated: What Is The Best Treatment Method  
*Jean-Pierre Becquemin, MD*
- 9:08 – 9:13** **DEBATE:** Not So: Type 2 Endoleaks With Sac Growth Should Rarely Be Treated: They Infrequently Lead To Rupture: And Treatment Is More Dangerous Than The Rupture Risk  
*Hence J.M. Verhagen, MD, PhD*
- 9:14 – 9:19** What Should Be Done When An AAA Sac Enlarges After EVAR: What Should Be Done Diagnostically And For Treatment: Is Endotension Without An Endoleak Real  
*Frans L. Moll, MD, PhD*
- 9:20 – 9:25** Present Status Of Endotension: What Mimics It: When Is It Real: What Causes It And What To Do About It  
*Luis A. Sanchez, MD*
- 9:26 – 9:31** How Increasing Intrasac Pressure Within AAAs Can Eliminate Endoleaks: How To Do It And Does It Work  
*David H. Deaton, MD*
- 9:32 – 9:37** With Type 1A Endoleaks After EVAR The Type Of The Original Endograft Influences The Secondary Repair Technique: When Are Cuffs, Chimney Or Sandwich Grafts The Best Approach: A Classification System Of EVAR Failures To Direct Secondary Treatment  
*Claude Mialhe, MD*
- 9:38 – 9:43** Value Of Preliminary Selective Lumbar And Inferior Mesenteric Artery Embolization To Prevent Type 2 Endoleaks After EVAR: When Is It Indicated, Risks And 3-Year Results  
*Andrej Schmidt, MD*  
*Daniela Branzan, MD*
- 9:44 – 9:49** Technique And Value Of Endoleak Treatment With Microcatheters: Value Of And Technique For Transgluteal Artery And Transcaval Approaches  
*Michele Rossi, MD*
- 9:50 – 9:55** Perigraft Sac Embolization To Treat Difficult Type 2 And Other Hard-To-Treat Endoleaks: Technical Tips And Results  
*William J. Quinones-Baldrich, MD*
- 9:56 – 10:02** Panel Discussion
- 10:03 – 10:16** Break – Visit Exhibits And Pavilions (2nd and 3rd Floors)

SESSION 34 (Grand Ballroom West, 3rd Floor)

**TRIBUTES TO VASCULAR SURGERY GREATS;  
ISSUES RELATED TO HISTORY, ETHICS,  
INNOVATION, VASCULAR SURGERY LEADERSHIP,  
PRACTICE PROBLEMS AND THEIR SOLUTION**

**Moderators:** *Michel Makaroun, MD*  
*Frank J. Veith, MD*

**TRIBUTES TO GIANTS**

**10:16 – 10:21** A Tribute To Richard F. (Dick) Kempczinski (1940-2017)  
*Jerry Goldstone, MD*

**10:22 – 10:27** A Tribute To Edward B. (Ted) Diethrich (1935-2017)  
*Ali F. AbuRahma, MD*

**NEW CONCEPT**

**10:28 – 10:33** New Concept For The Linkage Between Chemotherapy  
And Strokes: The Edgar Allen Poe Effect  
*Emmanuel M. Houdart, MD*

**VASCULAR SURGERY LEADERSHIP**

**10:34 – 10:39** Strategies To Facilitate Vascular Surgeons Maintaining  
A Leadership Position In The Care Of Vascular  
Patients  
*Scott L. Stevens, MD*

**10:40 – 10:45** How To Maintain Proficiency In Open And  
Endovascular Procedures  
*Jose Fernandes e Fernandes, MD, PhD*

**10:46 – 10:51** Increasing Importance And Influence Of Women  
In Vascular Surgery: Is The Endovascular Revolution  
Partly Responsible  
*Rebeca Reachi Lugo, MD*

**10:52 – 10:57** Bitter Lessons Learned From A Vascular Surgeon  
Inventor About Patents, Big Companies And Lawyers:  
MD Inventors Are Often Fleeced  
*Juan C. Parodi, MD*

**10:58 – 11:04** Panel Discussion

**Moderators:** *Cynthia K. Shortell, MD*  
*R. Clement Darling III, MD*

**11:05 – 11:10** What Are The Causes Of “Burn Out” Among Vascular  
Surgeons And Other Vascular Specialists: Are  
Institutions, Health Care Systems Or The Affordable  
Care Act To Blame: What Can Be Done To Prevent  
And Manage It  
*Peggyann Nowak-Berguer, MD*

**11:11 – 11:16** How MDs Should Deal With Life’s Problems Like  
Drug Use, Career Dissatisfaction, Job Loss, Divorce  
And Depression  
*Simran B. Singh, MD, MBA*

**11:17 – 11:22** How To Live Better As You Get Older: Good Advice  
For Vascular Surgeons And Vascular Specialists  
*James W. Jones, MD, PhD, MHA*

**11:23 – 11:28** What Is The Best Master’s Degree For The Vascular  
Surgeon/Specialist To Get And Why: MBA, MHA, MPH  
*Robert B. McLafferty, MD*

**11:29 – 11:34** What Serious Complications Should Vascular  
Surgeons/Specialists Discuss With Patients Before A  
Vascular Intervention To Reach Truly Informed  
Consent: Results Of A Delphi Consensus Study  
*Dirk T. Ubbink, MD, PhD*

- 11:35 – 11:40** Gender Differences In EVAR And TEVAR Outcomes: Can They Be Eliminated By Better Devices And Technique  
*Erik E. Debing, MD, PhD*
- 11:41 – 11:46** Highlights From The Australian VERVE Symposium December 2016: EVAR At 25 Years: Where Is It Going  
*Ramon L. Varcoe, MBBS, MS, PhD*  
*Hence J.M. Verhagen, MD, PhD*
- 11:47 – 11:52** The Injustice Of Honoring One Individual For A Landmark Contribution While Ignoring Others And Circumstances That Made It Possible  
*Frank J. Criado, 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)

**MORE ISSUES FOR VASCULAR SURGEONS AND VASCULAR SPECIALISTS: THE HEALTH CARE SYSTEM, WHERE IT'S GOING; REIMBURSEMENT, VASCULAR MDs' HEALTH AND ETHICS**

**Moderators:** *Hans-Henning Eckstein, MD, PhD*  
*Sean P. Roddy, MD*

- 1:00 – 1:05** Drivers Of Innovation And New Developments In Medical AAA Treatments: Metformin Is The Newest Drug Of Interest  
*Ronald L. Dalman, MD*
- 1:06 – 1:11** The Importance Of Ethics In Vascular Surgery: How To Resolve Interspecialty Conflicts And Remove Bad Doctors With Poor Outcomes: Turf Issues Cannot Be Allowed To Trump Quality Care  
*Tej M. Singh, MD, MBA*  
*Will Faber, MD*
- 1:12 – 1:17** Do Real Treatments Of Vascular Lesions Conform To Guidelines: What Motivates Doctors To Do Procedures: From The IDOMENEO Study  
*Sebastian E. Debus, MD, PhD*
- 1:18 – 1:23** Serious Causes Of Aches, Pains And Ailments To Which Vascular Surgeons And Specialists Are Vulnerable To From Their Procedures: What Can Be Done To Minimize Them Or Treat Them  
*Samuel R. Money, MD, MBA*
- 1:24 – 1:29** Why Vascular Surgeons And Specialists Should Always Be Looking And Planning For Their Next Job: Firing Or Forced Exit Is Always A Possibility: We Should Be Ready  
*Sigrid Nikol, MD*
- 1:30 – 1:35** **DEBATE:** Obamacare (The ACA) Has Been A Worse Problem For Patients, Doctors And Health Care Than Even Its Opponents Ever Thought Possible: Will What Comes After It Be Better  
*Clifford J. Buckley, MD*
- 1:36 – 1:41** **DEBATE:** Obamacare May Not Be So Bad After All: The Maryland Experience Shows Why  
*James H. Black III, MD*
- 1:42 – 1:47** What Factors In New Health Care Systems Affect Reimbursement: How Can These Be Modified To Improve Vascular Surgeons' Incomes  
*Francesco A. Aiello, MD*

- 1:48 – 1:53** Where Is Health Care Reform Going: Will MACRA Continue: What Will Happen To Vascular Surgeons'/ Specialists' Incomes  
*Timothy F. Kresowik, MD*
- 1:54 – 1:59** What Is Going To Pay For Expensive Vascular Care As The US Shifts From Obamacare (The ACA) To Whatever Is Next: Are Alternate Payment Plans An Answer  
*Sean P. Lyden, MD*
- 2:00 – 2:05** Pay For Performance (PFP) Does Not Benefit Vascular Patients: It Induces Vascular Surgeons And Specialists To Intervene On Easy Cases That Need No Procedure And To Avoid Difficult Cases That Really Need Treatment  
*James W. Jones, MD, PhD, MHA*
- 2:06 – 2:12** Panel Discussion

SESSION 36 (Grand Ballroom West, 3rd Floor)

**FDA; VASCULAR SURGERY'S GOVERNING BODIES, BOARDS, RRCs, EDUCATION AND TRAINING**

**Moderators:** *James C. Stanley, MD*  
*Bruce A. Perler, MD, MBA*

- 2:13 – 2:18** Expedited Access Pathway (EAP) To Accelerate FDA Approval Of Especially Innovative Medical Treatments Or Devices  
*Dorothy B. Abel, BSBME*
- 2:19 – 2:24** How Can The APDVS Help Vascular Surgery Maintain And Enhance Its Clout: The Combined Match For Vascular And Cardiac Surgery Trainees Shows That Vascular Surgery Should Be A Separate Specialty With Its Own Independent Board And RRC  
*William D. Jordan, Jr., MD*
- 2:25 – 2:30** Vascular Surgeons Are Not Appropriately Valued And Compensated In Hospitals For Their Unique Consultant Services: Being A Separate Independent Specialty Would Help  
*Fred A. Weaver, MD*
- 2:31 – 2:36** Heart And Vascular Centers Or Institutes Do Not Benefit Vascular Surgery: Vascular Surgery Is Often The Poor Sister: The Effort To Become A Fully Independent Specialty Should Be Revived  
*Jerry Goldstone, MD*
- 2:37 – 2:42** Why Vascular Surgery Needs A Separate Independent Residency Review Committee (RRC-VS); The American Board of Surgery (ABS) Needs To Support Vascular Surgery's Independence  
*John F. Eidt, MD*
- 2:43 – 2:48** Why Vascular Surgery Must Have Its Own Independent RRC And American Board of Medical Specialties (ABMS) Approved Board: How Can The Specialty Get It  
*O. William Brown, MD, JD*
- 2:49 – 2:54** Why Full Vascular Surgery Independence Is Justified And Badly Needed: Why Hasn't It Happened  
*David H. Deaton, MD*
- 2:55 – 3:00** Why Vascular Surgery Needs Its Own Independent ABMS Approved Board And RRC-VS More Than Ever: Recent Developments And Where Is The Resistance Coming From  
*Timothy M. Sullivan, MD*

- 3:01 – 3:06** Will The ABS Ever Support A Fully Independent Board Of Vascular Surgery As “A Board Down The Hall”: If Not, Why Not Since Vascular And General Surgery Are Now Different Specialties  
*Spence M. Taylor, MD*
- 3:07 – 3:12** What Numbers Of Open Surgical Cases Should Be Adopted For Vascular Surgical Certification: Are They Sufficient For Competence: What Are The Solutions To This Problem  
*Ronald L. Dalman, MD*
- 3:13 – 3:18** How Many 0+5 Vascular Surgery Programs Currently Exist: Is There A Demand For More: How Successful Are These Programs And How Competent Are The Finishing Trainees  
*Murray L. Shames, MD*
- 3:19 – 3:25** Panel Discussion
- 3:25 – 3:35** Break - Visit Exhibits And Pavilions (2nd and 3rd Floors)

SESSION 37 (Grand Ballroom West, 3rd Floor)

**VASCULAR CARE AND ITS VALUE; REIMBURSEMENT; VOLUME AND MALPRACTICE ISSUES**

**Moderators:** *Robert M. Zwolak, MD, PhD*

*Timothy M. Sullivan, MD*

- 3:35 – 3:40** Value Of A Vascular Surgeon To The Practice Of Other Specialties And To An Institution: How Can Vascular Surgeons Be Adequately Compensated By Institutions For Their Unique And Vital Contributions  
*Richard J. Powell, MD*
- 3:41 – 3:46** Diminishing Reimbursement Trends In Vascular Surgery: What Is The Cause And Who Stands To Lose  
*Jennifer L. Perri, MD, MBA*  
*Robert M. Zwolak, MD, PhD*
- 3:47 – 3:52** Outlook For Vascular Surgeons’ Incomes In A Changing Health Care Environment  
*Sean P. Roddy, MD*
- 3:53 – 3:58** What Is The Best Value Care For The Treatment Of SFA Lesions: For Intermittent Claudication; For CLTI  
*Gary M. Ansel, MD*
- 3:59 – 4:04** Vascular Telecare Can Expand The Reach And Effectiveness Of A Vascular Surgeon’s Or Specialist’s Practice And Benefit Patients: How To Do It And Get Paid For It  
*John (JEB) W. Hallett, MD*
- 4:05 – 4:10** Hospital Readmissions After Endovascular Treatments For CLTI Are Surprisingly Frequent: Predictors, Consequences And How To Prevent Some Of Them  
*Mehdi H. Shishehbor, DO, MPH, PhD*
- 4:11 – 4:16** When Are Outcomes In Vascular Treatment Related To Hospital Volumes And Surgeon Volumes; And When Are They Not  
*Marc L. Schermerhorn, MD*
- 4:17 – 4:22** How Electronic Medical Records Have Increased Medical Malpractice Litigation: What Precautions Can Diminish The Problem  
*O. William Brown, MD, JD*



4:23 – 4:28 Late Treatment Leads To Limb Loss With Diabetic Foot Lesions: Education Of Physicians And Patients Can Prevent Amputations  
*Oscar L. Ojeda, MD*

4:29 – 4:35 Panel Discussion

SESSION 38 (Grand Ballroom West, 3rd Floor)  
ISSUES WITH TRIALS; RCTs; GUIDELINES;  
STANDARDS; REGISTRIES; QUALITY INITIATIVES;  
THE SVS AND THE JVS

Moderators: *Anne L. Abbott, MD, PhD*  
*Joseph L. Mills, MD*

4:36 – 4:41 Interpreting RCTs Of AAA Or Carotid Treatments: Why And How They Can Be Misleading Or Misinterpreted  
*Thomas L. Forbes, MD*

4:42 – 4:47 Propensity Matched Clinical Trials Have Value: But They Can Also Have Limitations And Flaws: How To Maximize Their Value  
*Charles C. Miller, PhD*

4:48 – 4:53 **DEBATE:** Status Of The BEST Trial – A RCT Of CLI Treatments (Endo vs. Open): Laudable But Difficult: It Will Provide Useful Information  
*Alik Farber, MD*  
*Matthew T. Menard, MD*  
*Kenneth Rosenfield, MD*

4:54 – 4:59 **DEBATE:** The BASIL 2 And 3 Trials; RCTs Of (2) Vein Bypasses vs. Endovascular First Treatments For CLI; And (3) DCBs And DESs vs. PTA With BMS Bailout: They Will Provide Useful Information  
*Andrew W. Bradbury, MD*

5:00 – 5:05 **DEBATE:** These Trials Will Be Fraught With Problems And May Provide Little Useful Information  
*Mehdi H. Shishehbor, DO, MPH, PhD*

5:06 – 5:11 The WIFI Grading System For CLTI Is Meaningful: WIFI Scores Correlate Well With The Risks Of Amputation And Death Following Treatment  
*Marc L. Schermerhorn, MD*

5:12 – 5:17 How Can The WIFI Grading System Influence Patient Outcomes With CLTI  
*Robert S. Crawford, MD*

5:18 – 5:23 Panel Discussion

Moderators: *Michael S. Conte, MD*  
*Peter Gloviczki, MD*

5:24 – 5:29 What Is The SVS/VQI/FDA TEVAR For Aortic Dissection Registry: What New And Useful Information Will It Provide  
*Richard P. Cambria, MD*

5:30 – 5:35 What Is The International Consortium Of Vascular Registries (ICVR): What Unique And Valuable Information Can Be Learned From It  
*Jack L. Cronenwett, MD*

5:36 – 5:41 New Reporting Standards For Lower Extremity Endovascular Treatments For Ischemia: How Will They Help Bring Order Out Of Chaos  
*Michael C. Stoner, MD*

5:42 – 5:47 New Developments In The SVS VQI And How It Can Benefit Patients And Vascular Surgeons  
*Larry W. Kraiss, MD*

- 5:48 – 5:53** Increasing Disparity Between SVS AAA Guidelines And Real World Practice For AAA Repair: The Guidelines Are No Longer Relevant: What Harm Can This Cause And What Is The Solution  
*Alan M. Dietzek, MD, RPVI*
- 5:54 – 5:59** New Developments With The Journal Of Vascular Surgery And How They Can Be Beneficial  
*Peter F. Lawrence, MD*  
*Peter Gloviczki, MD*
- 6:00 – 6:06** Panel Discussion  
**End of Program F**

PROGRAM G (SESSIONS 39-46)  
NEW DEVELOPMENTS IN ARCH AND THORACIC AORTIC DISEASE: DISSECTIONS, TAAAs, JUXTA- AND PARARENAL AAAs, PARALLEL GRAFTS, FENESTRATED AND BRANCHED EVAR (F/B/EVAR), MULTILAYER FLOW MODULATING BARE STENTS, AAAs, 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, TAAAs AND THEIR TREATMENT

**Moderators:** *Michael D. Dake, MD*  
*Wayne W. Zhang, MD*

- 6:50 – 6:55** With Mural Thrombi In The Thoracic Aorta, When Do They Have To Be Treated Invasively: If They Do, TEVAR Is The Best Treatment: Precautions  
*Ramesh K. Tripathi, MD*
- 6:56 – 7:01** During TEVAR For TBADs, How And Why Should The Arterial Blood Pressure Be Controlled And Manipulated  
*Cherrie Z. Abraham, MD*
- 7:02 – 7:07** TEVAR Under Local Anesthesia: How To Do It: Advantages And Limitations  
*Zvonimir Krajcer, MD*
- 7:08 – 7:13** **DEBATE:** Left Subclavian Artery (LSA) Perfusion Is Critical And Should Be Maintained Whenever Possible With TEVAR  
*Daniel G. Clair, MD*
- 7:14 – 7:19** **DEBATE:** No: LSA Perfusion Is Not Always Necessary With TEVAR: When May It Be Unnecessary And What Are The Risks And Downsides Of LSA Revascularization  
*Thomas S. Maldonado, MD*
- 7:20 – 7:25** Revascularizing The LSA By In Situ Fenestration After TEVAR: How To Do It When The LSA Origin Needs To Be Covered To Extend Proximal Landing Zone Or When The LSA Is Covered Inadvertently  
*Wayne W. Zhang, MD*
- 7:26 – 7:31** A New Non A, Non B Classification For Aortic Dissections Involving The Arch: Why Is It Better And How To Treat Such Dissections  
*Martin Czerny, MD*  
*Bartosz Rylski, MD*

- 7:32 – 7:37** Fate Of The Distal (Abdominal)Aorta After Endovascular Or Open Treatment Of TBADs: What Secondary Treatment May Be Required And Which Treatment Is Best  
*Geert Willem H. Schurink, MD, PhD*  
*Michael J. Jacobs, MD*
- 7:38 – 7:43** Open Repair Is The Best Option For Treating Visceral Segment AAAs After TEVAR For TBADs: Technique Video Showing How To Do It With A “Reversed Cactus” Branched Graft  
*Francesco Spinelli, MD*
- 7:44 – 7:52** Panel Discussion

SESSION 40 (Trianon Ballroom, 3rd Floor)

**TREATMENT OF LESIONS OF THE ASCENDING AORTA; THE AORTIC ARCH; PARALLEL GRAFTS; AORTIC DISSECTIONS AND RELATED TOPICS**

**Moderators:** *Nicholas J.W. Cheshire, MD*  
*Ronald M. Fairman, MD*

- 7:53 – 7:58** Early Experience With The Gore Endograft For Treating Lesions Of The Ascending Aorta: Advantages And Limitations  
*Jean Bismuth, MD*  
*Michael J. Reardon, MD*
- 7:59 – 8:04** Progress In The Endovascular Treatment Of Type A Aortic Dissections  
*Carlos H. Timaran, MD*
- 8:05 – 8:10** New Concepts And Data Regarding Frozen Elephant Trunk Procedures And The Thoraflex Graft (Vascutek/ Terumo) In The Treatment Of Thoracic Aortic Disease  
*Ourania Preventza, MD*  
*Joseph S. Coselli, MD*
- 8:11 – 8:16** In Type A Aortic Dissection Repairs, Open Ascending Aorta Graft Replacement Alone Is Not Effective Long-Term Treatment In Most Patients: What Are The Implications  
*Götz M. Richter, MD, PhD*
- 8:17 – 8:22** Current Status Of Brain Perfusion Adjuncts And Techniques For Open Aortic Arch Repairs  
*Lars G. Svensson, MD, PhD*
- 8:23 – 8:28** Hybrid Procedures For Aortic Arch Lesions Are Effective And Durable: Tips And Tricks To Make Them Work Effectively  
*Colin D. Bicknell, MD*
- 8:29 – 8:34** Chimney And Periscope Grafts To Facilitate Repair Of Aneurysms In And Near The Aortic Arch: Tips To Make Them Safe, Effective And Durable  
*Mario L. Lachat, MD*
- 8:35 – 8:40** Value And Limitations Of Aortic Arch Chimneys With Mid And Long-Term (> 5 Years) Follow Up: How To Make Them Work  
*Nicola Mangialardi, MD*  
*Sonia Ronchey, MD, PhD*
- 8:41 – 8:46** How To Make Chimney And Sandwich Grafts Work For Treatment Of Aortic Arch Lesions: Technical Tips, Precautions And Midterm Results  
*Armando C. Lobato, MD, PhD*
- 8:47 – 8:55** Panel Discussion

SESSION 41 (Trianon Ballroom, 3rd Floor)

**NEW GRAFTS FOR TAAAs; MORE ON JUXTA- AND PARARENAL AAAs; FENESTRATED AND BRANCHED EVAR (F/B/EVAR) AND PARALLEL GRAFTS**

**Moderators:** *Michel Makaroun, MD*  
*Gustavo S. Oderich, MD*

- 8:56 – 9:01** The “Spider Graft”: A New Hybrid Graft For Treatment Of TAAAs: How Does It Work: Advantages And Results  
*Sebastian E. Debus, MD, PhD*
- 9:02 – 9:07** The TAMBE Multibranching Device (Gore) For Treating TAAAs: Device Description, Advantages, Limitations And 1-Year Results  
*Mark A. Farber, MD*  
*Michel Makaroun, MD*  
*Gustavo S. Oderich, MD*
- 9:08 – 9:13** A New Valiant Manifold Based Device (Medtronic) With Multiple Branches For Treating TAAAs: How Does It Work And 2-Year Results  
*Patrick W. Kelly, MD*
- 9:14 – 9:19** A “Barrel” Stent-Graft For F/B/EVAR: Device Description And How It Minimizes Aortic Coverage To Protect Against Spinal Cord Ischemia  
*Piotr M. Kasprzak, MD*

**CHIMNEY GRAFTS FOR EVAR (CH/EVAR)**

- 9:20 – 9:25** How To Prevent Cerebrovascular Events (Strokes And TIAs) When Using Upper Extremity Access For Ch/EVAR And F/B/EVAR: What Factors Increase Stroke Risk  
*Michel J. Bosiers, MD*  
*Konstantinos P. Donas, MD*
- 9:26 – 9:31** A New Classification System For Type 1A Endoleaks After Ch/EVAR: How It Can Help To Determine The Best Secondary Procedure To Fix Them  
*David J. Minion, MD*
- 9:32 – 9:39** Panel Discussion

**Moderators:** *Benjamin W. Starnes, MD*  
*Konstantinos P. Donas, MD*

**MORE ON PARALLEL GRAFTS, TAAAs AND COMPLEX AAAs**

- 9:40 – 9:45** Technical Tips To Successful Sandwich Graft Treatment Of TAAAs And When Is This Method The Best Treatment: Results To Date  
*Armando C. Lobato, MD, PhD*
- 9:46 – 9:51** When Should Parallel Grafts Be The First Treatment Choice For Complex AAA Repair  
*Edward Y. Woo, MD*
- 9:52 – 9:57** Simple Retrograde Parallel (Periscope) Grafts To Preserve Left Subclavian Artery Flow During TEVAR: How To Do It With Off-The-Shelf (OTS) Components: They Never Leak And Other Advantages  
*David J. Minion, MD*
- 9:58 – 10:03** When Are Open Repair Or No Repair The Best Option For Some Patients With Complex And Large AAAs And Unfavorable Anatomy  
*Frank J. Criado, MD*

- 10:04 – 10:09** What Are The Options For Treating Type 3 And Type 4 TAAAs And When Should They Be Used  
*Michel Makaroun, MD*
- 10:10 – 10:15** 3D Printed AAA Phantoms Generated From CTAs: How They Can Facilitate Training In And Performance Of Complex AAA Repairs  
*Maciej L. Dryjski, MD, PhD*
- 10:16 – 10:24** Panel Discussion
- 10:24 – 10:40** Break – Visit Exhibits And Pavilions (2nd and 3rd Floors)

SESSION 42 (Trianon Ballroom, 3rd Floor)

**TREATMENT OF VISCERAL AND RENAL ANEURYSMS, COMPLEX AAAs, TAAAs AND AORTIC DISSECTIONS: MULTILAYER FLOW MODULATING (MLFM) BARE STENTS: PROS AND CONS: 15-YEAR RESULTS OF THE EVAR 2 TRIAL: FUTURE OF EVAR**

**Moderators:** *Rodney A. White, MD*  
*Frans L. Moll, MD, PhD*

- 10:40 – 10:45** Flow Diverting Bare Stents With And Without Coils For Treating Visceral And Renal Artery Aneurysms: Technical Tips And Results  
*Michele Rossi, MD*
- 10:46 – 10:51** Multilayer Flow Modulating (MLFM) Bare Stents For The Treatment Of Peripheral (Iliac) And Visceral/ Renal Artery Aneurysms: Do The Aneurysms Shrink In Size: Long-Term Results In 47 Patients: When Is This Treatment Preferred  
*Michel Henry, MD*
- 10:52 – 10:57** Long-Term Results Of MLFM Bare Stents For The Treatment Of Aortic Dissection And Aortic Aneurysms: The French Multicenter Experience  
*Claude D. Vaislic, MD*
- 10:58 – 11:03** Update On Experience Treating Aortic Dissections And Complex AAAs With MLFM Bare Stents: When Do They Work And When Don't They  
*Victor S. Costache, MD, PhD*
- 11:04 – 11:09** Update On The Value And Limitations Of Multilayered Uncovered And Covered Stents For Treating Aortic Aneurysms And Dissections: Indications And Results  
*Qingsheng Lu, MD*  
*Zaiping Jing, MD*
- 11:10 – 11:15** Effectiveness Of MLFM Bare Stents In The Treatment Of Type B Dissections And Aortic Aneurysms: Long-Term Follow-Up  
*Amira Benjelloun, MD*
- 11:16 – 11:21** Update On Indications, Contraindications, Value And Results Of MLFM Bare Stents To Treat Various Aortic Lesions  
*Sherif A.H. Sultan, MD*
- 11:22 – 11:27** Why MLFM Bare Stents Are An Effective Treatment For Some Aortic Dissections: What Is The Evidence  
*Ivo Petrov, MD, PhD*
- 11:28 – 11:33** MLFM Bare Stents Are An Effective Treatment For Some Aortic Dissections: They Preserve Branch Flow And Promote Aortic Remodeling: What Is The Evidence  
*Ralf R. Kolvenbach, MD*

**EVAR 2 15-YEAR RESULTS AND THE FUTURE OF AAA REPAIR**

- 11:34 – 11:41** 15-Year Results Of The EVAR 2 Trial Comparing EVAR With Expectant Treatment In Patients “Unfit” For Open Repair: Improved Aneurysm-Related Mortality Gives Us An Ethical Dilemma  
*Roger M. Greenhalgh, MD*
- 11:42 – 11:49** A Look At The Future Of AAA Repair: Insights And Predictions From An Aortic Surgeon At The Mid-Point Of His Career  
*Frans L. Moll, MD, PhD*
- 11:50 – 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 THE ABDOMINAL AORTA, AAAs AND EVAR**

**Moderators:** *Timur P. Sarac, MD*  
*Kenneth Ouriel, MD, MBA*

- 1:00 – 1:05** Variations In AAA Juxtarenal Landing Zones And Their Suitability For Various Commercial Endografts: Which Graft Is Best In Which Circumstance  
*Jan D. Blankensteijn, MD*
- 1:06 – 1:11** Predicting AAA Growth And Rupture With A Skin Biopsy: It Can Reflect Smooth Muscle Behavior, Genes, Biomarkers And Aortic Wall Behavior  
*Kak Khee Yeung, MD, PhD*
- 1:12 – 1:17** EVAR Can Be Performed Safely And Effectively In Severely Angled Necks: What Adjuncts May Be Required And When  
*Boonprasit Kritpracha, MD*
- 1:18 – 1:23** **DEBATE:** Nationwide AAA Screening Programs Are Worthwhile, Save Lives And Improve Quality Of Life (QOL)  
*Anders Wanhainen, MD, PhD*
- 1:24 – 1:29** **DEBATE:** Why Nationwide Population Based AAA Screening Programs Are Of Limited Value And A Challenge For Public Health Systems  
*Vicente Riambau, MD, PhD*
- 1:30 – 1:35** **DEBATE:** Why AAA Screening And Detection Programs Can Be Harmful  
*Jes S. Lindholt, MD*
- 1:36 – 1:41** Impact Of Large Proximal Aortic Necks (> 31 mm) On Midterm EVAR Results: Should Such Patients Be Treated By Ch/EVAR Or F/EVAR  
*Ali F. AbuRahma, MD*
- 1:42 – 1:47** When Can AAAs With Necks > 35 mm In Diameter Be Effectively And Durably Treated By EVAR: Tips And Tricks For Doing So  
*Michael J. Singh, MD*
- 1:48 – 1:53** Current Best Treatment For Secondary Aorto-Enteric Fistulas After Open AAA Repair; After EVAR  
*Fabien F.P. Koskas, MD, PhD*
- 1:54 – 2:00** Panel Discussion

SESSION 44 (Trianon Ballroom, 3rd Floor)

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

**Moderators:** *Jan D. Blankensteijn, MD*  
*Elliot L. Chaikof, MD, PhD*

- 2:01 – 2:06** Preoperative Exercise Training Prior To AAA Repair: It Improve Outcomes  
*Gerard Danjoux, MD*
- 2:07 – 2:12** What Is The Relationship Between AAA Disease And Cancer: What Are Possible Mechanisms  
*Natzi Sakalihasan, MD, PhD*
- 2:13 – 2:18** Increased Risk Of Cancer In EVAR-Treated AAA Patients vs. Those Treated By Open Repair After 8 Years In The EVAR 1 Trial: Is A Practice Change Suggested  
*Roger M. Greenhalgh, MD*
- 2:19 – 2:24** Many AAAs With A Stable Diameter After EVAR Actually Grow In Volume: What Are The Implications And How Should Volume Be Determined Without CT Scans  
*Henrik Sillesen, MD, DMSc*
- 2:25 – 2:30** Surveillance Compliance After EVAR: Non-Compliance Is Associated With Worse Outcomes: What Can Improve Compliance  
*Keith D. Calligaro, MD*
- 2:31 – 2:36** AAA Sac Filling: How Does This New Treatment Modality Work: Technique And Early Results  
*Michael J. Jacobs, MD*
- 2:37 – 2:42** Why Women Are Underrepresented In EVAR Trials And Why They Have Worse Outcomes Than Men With AAA Repair: Why The OVATION And Other New Devices Can Improve EVAR Outcomes In Women  
*Martin Storck, MD, PhD*  
*Giovanni Pratesi, MD*
- 2:43 – 2:48** Mechanism And Prevention Of Abdominal Incision Dehiscence After Open AAA Repair: Why Is It A Worse Problem Than After Open Aorto-Bifemoral Bypass For Occlusive Disease  
*Eric Allaire, MD, PhD*
- 2:49 – 2:54** Tips And Tricks For EVAR Treatment Of AAAs With Small Distal Aortic Necks To Avoid Limb Thrombosis  
*Rocco Giudice, MD*
- 2:55 – 3:00** Fibrin Glue Sac Embolization To Allow Safe Durable (10 Years) Standard EVAR For AAAs With Shorter More Challenging Proximal Necks: Technique And Results  
*Qingsheng Lu, MD*  
*Zaiping Jing, MD*
- 3:01 – 3:06** AFX Unibody Bifurcated Endograft (Endologix) To Treat Patients With TASC D Aorto-Iliac Disease And An AAA: Technical Tips And Results  
*Francesco Speziale, MD*
- 3:07 – 3:17** Panel Discussion (Refreshments Available)

SESSION 45 (Trianon Ballroom, 3rd Floor)

**CHALLENGING RECORDED LIVE CASES AND  
THOSE EMPLOYING INNOVATIVE AND NEW  
TECHNIQUES**

**Moderators:** *Plinio Rossi, MD*  
*Andrew Holden, MBChB*  
*Fabrizio Fanelli, MD*  
*Carlo Setacci, MD*  
*Frank J. Veith, MD*

- 3:17 – 3:27** Changed Workflow With Fusion In A 3 Fenestration FEVAR Case  
*Eric L.G. Verhoeven, MD, PhD*
- 3:27 – 3:37** The Use Of A Compliant Balloon To Facilitate EVAR And EVAS Procedures  
*Andrew Holden, MBChB*
- 3:37 – 3:47** Kissing Lithoplasty And DCB For Common Iliac Artery Stenoses  
*Fabrizio Fanelli, MD*
- 3:47 – 3:57** Arch Aneurysm Repair With A 3-Branch Endograft  
*Stephan Haulon, MD*
- 3:57 – 4:07** Cracking And Paving Of Extremely Calcified Femoropopliteal Lesions  
*Andrej Schmidt, MD*
- 4:07 – 4:17** How To Perform An Optimal DCB Angioplasty From Anatomy To Function  
*Francesco Liistro, MD*
- 4:17 – 4:27** Below Knee Deep Vein Thrombosis As Part Of Ilio-Femoral DVT: How I Deal With It  
*Gerard J. O'Sullivan, MD*
- 4:27 – 4:37** Panel Discussion

SESSION 46 (Trianon Ballroom, 3rd Floor)

**RECORDED LIVE CASES FROM LEIPZIG AND LINC;  
INTERESTING TECHNICAL CHALLENGES AND  
SOLUTIONS**

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

- 4:37 – 5:57** LINC PROGRAM  
Please visit [www.veithsymposium.org](http://www.veithsymposium.org) for updates.  
**End of Program G**

**THURSDAY, NOVEMBER 16, 2017**

- 6:00 A.M. General Registration – Rhinelander Gallery, 2nd Floor**  
**6:00 A.M. Faculty Registration – Morgan Suite, 2nd Floor**  
**6:00 A.M. Continental Breakfast – Rhinelander Gallery, 2nd Floor**

**CONCURRENT THURSDAY PROGRAMS**

PROGRAM H: SESSIONS 47-54

**New Techniques, Technology And Concepts; Advances In F/B/EVAR And Parallel Grafts For Complex Aortic Aneurysms And TAAAs; Tribute To Our Military; Endo vs. Open Treatment For Ruptured AAAs; Vascular Robotics And Guidance Systems; New Concepts And Controversies**

6:50 A.M. – 5:54 P.M.

Grand Ballroom East, 3rd Floor



**PROGRAM I: SESSIONS 55-62**

**New Devices For EVAR And Juxtarenal AAA Repair; TEVAR And TAAA Repair; Lower Extremity Treatment; Updates On EndoAnchors; New Devices For Embolectomy And Clot Removal**

6:40 A.M. – 5:32 P.M.

Grand Ballroom West, 3rd Floor

**PROGRAM J: SESSIONS 63-70**

**Venous Topics – Superficial - Improved Treatment Of Varicose Veins**

7:20 A.M. – 5:11 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 H (SESSIONS 47-54)**

**NEW TECHNIQUES, TECHNOLOGY, CONCEPTS; ADVANCES IN F/B/EVAR AND PARALLEL GRAFTS FOR COMPLEX AAAs AND TAAAs; TRIBUTE TO OUR MILITARY; ADVANCES IN MANAGEMENT OF RUPTURED AAAs; NEW DEVELOPMENTS IN ROBOTICS, GUIDANCE AND IMAGING SYSTEMS; RADIATION SAFETY, NEW CONCEPTS AND DEVICES**

Grand Ballroom East, 3rd Floor

SESSION 47 (Grand Ballroom East, 3rd Floor)

**EXCITING NEW OR UPDATED TECHNIQUES, CONCEPTS AND TECHNOLOGIES**

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

Kenneth Ouriel, MD, MBA

- |                    |   |
|--------------------|---|
| <b>6:50 – 6:55</b> | How To Make AAA Walls Rupture Resistant Or Rupture Free With Glycation: How Does It Work And Current Status<br><i>Frans L. Moll, MD, PhD</i>  |
| <b>6:56 – 7:01</b> | Carotid Webs: They Can Cause Strokes: How To Diagnose And Treat Them: Should They Be Treated If Asymptomatic<br><i>Evan C. Lipsitz, MD, MBA</i>   |
| <b>7:02 – 7:07</b> | High Pressure Angioplasty Balloons Which Can Have A Curved Configuration When Inflated: How Do They Work And Why They Will Be Helpful<br><i>Timothy A.M. Chuter, DM</i>                                   |
| <b>7:08 – 7:13</b> | Importance Of Velocity Ratios Determined By Vector Velocity Ultrasound To Evaluate SFA Occlusive Disease And Its Treatment<br><i>Lars B. Lönn, MD, PhD</i>  |
| <b>7:14 – 7:19</b> | How To Make Thrombolysis Faster And More Accurate With Microbubbles And Other Techniques: How Do They Work<br><i>Kak Khee Yeung, MD, PhD</i>  |
| <b>7:20 – 7:25</b> | Status Of Humacyte Tissue Engineered Arterial Vessels For SFA Injury And Other Uses: How Durable Are These Vessels<br><i>Jeffrey H. Lawson, MD, PhD</i>   |
| <b>7:26 – 7:31</b> | A New Treatment For Intermittent Claudication And Rest Pain Without Drugs, PTA, Stents Or Bypass: It Will Be A Game-Changer: How Does It Work<br><i>Juan C. Parodi, MD</i><br><i>Samuel Fernandez, MD</i> |

- 7:32 – 7:37** Progress With An Implanted Piezoelectric Sensor (GraftWorx) To Detect Graft And Stent Flows Remotely; And Wound Assessment With A Cell Phone App  
*Richard F. Neville, MD*
- 7:38 – 7:43** Advances In Computer Generated Vascular Navigation (VPS) Without Fluoroscopy: How Does It Work: Results To Date: Future Prospects And Costs  
*Matthew J. Eagleton, MD*
- 7:44 – 7:49** Game Changing Simplification Of F/EVAR By Automated Planning Software And 3D Printed Patient Specific Templates (Aortica): How Do They Work; How Do They Improve Outcomes; And How Will They Make F/EVAR More Widely Available  
*Benjamin W. Starnes, MD*
- 7:50 – 7:57** Panel Discussion

SESSION 48 (Grand Ballroom East, 3rd Floor)

**ADVANCES IN FENESTRATED AND BRANCHED EVAR (F/B/EVAR) AND PARALLEL GRAFTS FOR COMPLEX AAAs AND TAAAs; RELATED CONTROVERSIES**

**Moderators:** *James F. McKinsey, MD*  
*Frank J. Veith, MD*

- 7:58 – 8:03** How To Best Treat Complex AAAs: F/EVAR, B/EVAR, Ch/EVAR Or Open Repair: An Evidenced-Based Algorithm For Decision Making  
*Jean-Pierre Becquemin, MD*
- 8:04 – 8:09** Fenestrated vs. Branched EVAR For Complex AAAs: Which Is Best And When: How To Avoid Limb Ischemia From Prolonged Sheath Placement  
*Matthew J. Eagleton, MD*
- 8:10 – 8:15** Long-Term Results Of Ch/EVAR And Other Parallel Grafts For Juxta- And Pararenal AAAs And TAAAs: What Are The Keys To Sustained Success: Are There Concerns: Based On A 10-Year Experience  
*Mario L. Lachat, MD*
- 8:16 – 8:21** Ch/EVAR And F/EVAR For Complex AAAs Have Comparable Results At 30 Days And 1 Year In A Multicenter (VQI) Registry Although Ch/EVAR Was Performed By Lower Volume Surgeons And In More Urgent Settings  
*Virendra I. Patel, MD, MPH*  
*Adam Beck, MD*  
*Marc L. Schermerhorn, MD*
- 8:22 – 8:27** Optimal Aortic And Branch Endograft Devices And Configurations For Ch/EVAR To Prevent Gutter Endoleaks: From The PERICLES Registry  
*Salvatore T. Scali, MD*  
*Konstantinos P. Donas, MD*
- 8:28 – 8:33** F/EVAR And B/EVAR To Treat Failed EVAR Or Open Repair: Tips And Tricks But They Are Not Easy  
*Timothy A. Resch, MD, PhD*
- 8:34 – 8:39** Panel Discussion

**Moderators:** *Konstantinos P. Donas, MD*  
*Frank J. Veith, MD*

- 8:40 – 8:45** Chimney Grafts For Treatment Of Type 1A Endoleaks After EVAR: Collected World Experience From The PERICLES Registry Shows Good Results  
*Sonia Ronchey, MD, PhD*  
*Konstantinos P. Donas, MD*  
*Nicola Mangialardi, MD*  
*Giovanni Torsello, MD*
- 8:46 – 8:51** How To Use Onyx To Fix Gutter Endoleaks After Ch/EVAR: Technical Tips And Precautions  
*Arne G. Schwindt, MD*  
*Martin J. Austermann, MD*  
*Konstantinos P. Donas, MD*
- 8:52 – 8:57** **DEBATE:** The More Chimney Grafts One Has With Ch/EVAR The More Endoleaks And Complications One Will Have  
*Jason T. Lee, MD*
- 8:58 – 9:03** **DEBATE:** Ch/EVAR Can Be Done Effectively With 4 Chimney Grafts If It Is Done Right: How To Do It  
*Manish Mehta, MD, MPH*
- 9:04 – 9:09** A New Manifold Multi-Branched Device To Improve And Simplify The Endovascular Treatment Of TAAAs: The Colt Device Concept And Early Clinical Results  
*Piotr Szopinski, MD*
- 9:10 – 9:15** Panel Discussion

SESSION 49 (Grand Ballroom East, 3rd Floor)

**MORE ABOUT F/B/EVAR AND PARALLEL GRAFTS FOR COMPLEX AAAs AND TAAAs: RELATED TOPICS**

**Moderators:** *Ronald L. Dalman, MD*  
*Marcelo Ferreira, MD*

- 9:16 – 9:21** 10-Year Experience With Multibranched Endograft (Cook) Repair Of TAAAs: Indications For Use, Contraindications, Results And Unsolved Issues  
*Timothy A.M. Chuter, DM*
- 9:22 – 9:27** F/B/EVAR Is The Best Way To Treat Post Dissection TAAAs: Results To Date And Technical Tips And Value Of Inner Branched Grafts  
*Eric L.G. Verhoeven, MD, PhD*
- 9:28 – 9:33** **DEBATE:** For Juxta And Pararenal AAAs Ch/EVAR Can Be A Good Treatment In Certain Situations And If Certain Precautions Are Taken  
*Jason T. Lee, MD*  
*Konstantinos P. Donas, MD*  
*David J. Minion, MD*
- 9:34 – 9:39** **DEBATE:** Not So: Failure Modes Of Ch/EVAR And Poor Long-Term Durability Make It A Second Rate Procedure  
*Adam Beck, MD*
- 9:40 – 9:45** **DEBATE:** Both Wrong! With Juxta And Pararenal AAAs Ch/EVAR Should Be The First Treatment Option: Late Results Justify This Opinion If The Procedures Are Done Right  
*Mario L. Lachat, MD*
- 9:46 – 9:51** Panel Discussion
- 9:52 – 9:57** In Vitro Studies Show How To Improve The Results Of Ch/EVAR And Ch/EVAS With The Nellix Graft  
*Jan D. Blankensteijn, MD*
- 9:58 – 10:03** Bailout Techniques When F/EVAR Procedures Fail  
*Martin Malina, MD, PhD*

- 10:04 – 10:09** Off-The-Shelf (OTS) Grafts For F/B/EVAR Procedures In Multiple Aortic Pathologies: How Can They Be Modified To Extend Their Applicability; Technical Tips And How To Deal With Small True Lumens  
*Marcelo Ferreira, MD*
- 10:10 – 10:15** What Defines And Assures A “Healthy” Aortic Seal Zone With Complex AAAs And AAAs: When Is It Critical And When Can Compromises Be Made  
*Matthew J. Eagleton, MD*
- 10:16 – 10:21** **DEBATE:** Ch/EVAR Works In Only A Small Proportion Of Juxtarenal AAAs: F/EVAR Should Be The Preferred Option For Treatment  
*Afshin Assadian, MD*
- 10:22 – 10:27** **DEBATE:** Not So: Ch/EVAR Is Effective For Treatment Of Most Juxtarenal AAAs If Some Technical Tips Are Followed  
*David J. Minion, MD*  
*Konstantinos P. Donas, MD*
- 10:28 – 10:34** Panel Discussion
- 10:34 – 10:52** Break – Visit Exhibits And Pavilions (2nd and 3rd Floors)

SESSION 50 (Grand Ballroom East, 3rd Floor)

**TRIBUTE TO OUR MILITARY AND SERVICE PHYSICIANS EVERYWHERE; NEW DEVELOPMENTS IN VASCULAR TRAUMA (9-MINUTE TALKS)**

**Moderators:** *Eric Elster, MD*  
*Wayne F. Yakes, MD*

- 10:52 – 11:01** New Information And Highlights From The “Endovascular And Hybrid Trauma And Bleeding Management Symposium”: A Hot Area Of Military And Civilian Innovation And Collaboration  
*Tal M. Hörer, MD, PhD*  
*Todd E. Rasmussen, MD*  
*Joseph J. DuBose, MD*
- 11:02 – 11:11** Update On The Status Of Resuscitative Endovascular Balloon Occlusion Of The Aorta (REBOA) For Bleeding Control: New Technical Developments (Like Lower Profile Balloons): Where Is REBOA Going In The US And Internationally: Status Of The Trauma Foundation  
*Joseph J. DuBose, MD*  
*Tal M. Hörer, MD, PhD*
- 11:12 – 11:21** Status And Value Of REBOA In Germany: In The Military And In The Civilian Population: Advances In The Technology And In Training: Who Can Do It  
*Michael Engelhardt, MD*
- 11:22 – 11:31** Preparing For The Next Terror Attack: How Wartime Lessons Can Shape A National Trauma Action Plan: Status Of The Civilian/Military “Stop The Bleeding Campaign”: Unskilled Bystander Involvement With Pressure And Tourniquets Can Be Effective – As In The Boston Marathon Terror Attack  
*Todd E. Rasmussen, MD*
- 11:32 – 11:41** The Naval Battle At Guadalcanal And What It Meant To The Marines Fighting There And To The US Victory In The Pacific  
*Wayne F. Yakes, MD*

- 11:42 – 11:51** Risks And Dangers Of Long Duration Missions In Deep Space: Based On A Study In Twin Astronauts  
*Lee M. Morin, 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 51 (Grand Ballroom East, 3rd Floor)

**NEW DEVELOPMENTS IN THE TREATMENT OF RUPTURED AAAs (RAAAs); RELATED CONTROVERSIES**

**Moderators:** *Matt M. Thompson, MD*  
*Thomas Larzon, MD, PhD*

- 1:00 – 1:05** The Degree Of Aortic Calcification Is Predictive Of AAA Rupture: How Can It Be Quantitated  
*Clark J. Zeebregts, MD, PhD*
- 1:06 – 1:11** How AAA Rupture Can Be Predicted By MRI And By 18F-FDG Uptake On PET CT  
*Natzi Sakalihan, MD, PhD*
- 1:12 – 1:17** **DEBATE:** Open Repair Is As Good Or Better Than EVAR For The Treatment Of RAAAs  
*Jürg Schmidli, MD*
- 1:18 – 1:23** **DEBATE:** Not True: EVAR Is A Better Treatment Than Open Repair For RAAAs: It Is Obvious That EVAR Should Be The Gold Standard  
*Sherif A.H. Sultan, MD*
- 1:24 – 1:29** New Concepts And Trends In The Treatment Of RAAAs: EVAR Use Is Increasing: Are Outcomes Improving As A Result  
*Anders Wanhainen, MD, PhD*
- 1:30 – 1:35** New Tips And Tricks For Open Abdomen Treatment (OAT) For Abdominal Compartment Syndrome With RAAAs: How To Diagnose And Treat It: How To Avoid Hernias With OAT  
*Martin Björck, MD, PhD*
- 1:36 – 1:41** Panel Discussion

**Moderators:** *James F. McKinsey, MD*  
*Jean-Baptiste Ricco, MD, PhD*

- 1:42 – 1:47** In AAA Patients, Distal Aortic Or Iliac Occlusive Disease Increases The Risk Of Rupture And Should Be An Indication For Earlier Elective Repair  
*Gregory L. Moneta, MD*
- 1:48 – 1:53** **DEBATE:** 3-Year Results From The IMPROVE Trial: Have Any Conclusions Changed Or Is EVAR Still No Better Than Open Repair For RAAA Patients  
*Janet T. Powell, MD, PhD*
- 1:54 – 1:59** **DEBATE:** Of Course EVAR Is Better Than Open Repair For RAAAs: More Patients Can Be Treated And Procedural Mortality And Turn-Down Rates Are Lower  
*Benjamin W. Starnes, MD*
- 2:00 – 2:05** Tips And Tricks For Gaining Arterial Access In Hypotensive Unstable AAA Patients  
*Martin Malina, MD, PhD*

- 2:06 – 2:11** **DEBATE:** EVAR Offers Real Survival Advantages Over Open Repair For RAAAs: Almost All RAAA Patients Should Be Treated By EVAR And How To Do This  
*Mario L. Lachat, MD*
- 2:12 – 2:17** **DEBATE:** Not So: There Is Still A Role For Open Repair With Some RAAA Patients: What Is It  
*Germano Melissano, MD*  
*Roberto Chiesa, MD*
- 2:18 – 2:24** Panel Discussion

SESSION 52 (Grand Ballroom East, 3rd Floor)

**MORE RUPTURED ANEURYSM (AAA & TAA)  
TOPICS AND CONTROVERSIES**

**Moderators:** *Ali F. AbuRahma, MD*  
*Michael B. Silva, Jr., MD*

- 2:24 – 2:29** Natural History Of Type 2 Endoleaks After EVAR For RAAAs: They Are Surprisingly Benign  
*John E. Rectenwald, MD, MS*
- 2:30 – 2:35** Significance Of Type 2 Endoleaks After EVAR And RAAA With An Aorto-Caval Fistula  
*Markus K. Furrer, MD*
- 2:36 – 2:41** Curriculum And Benefits From The European SVS Course On Treatment Of RAAAs And Related Adjuncts  
*Zoran Rancic, MD, PhD*  
*Mario L. Lachat, MD*
- 2:42 – 2:47** Tips And Tricks For Optimal Supraceliac Aortic Balloon Control With RAAAs: It's Not Simple  
*Julio A. Rodriguez-Lopez, MD*
- 2:48 – 2:53** **DEBATE:** Which RAAA Patients Should Be Denied Repair Because Their Outlook For Survival With Repair Is Hopeless – Based On What Criteria Of Futility  
*Willem Wisselink, MD*
- 2:54 – 2:59** **DEBATE:** This Is Wrong: Predictive Models For A Hopeless Outlook For RAAA Repair Are Misleading And Should Not Be Used For Clinical Decision Making Not To Attempt Repair: Turn-Down Rates Should Be Lower Than They Are  
*Matthew W. Mell, MD, MS*
- 3:00 – 3:05** OTS Branched Devices vs. Parallel Grafts For Juxta- And Pararenal RAAAs And Ruptured TAAAs  
*Bijan Modarai, PhD*
- 3:06 – 3:11** Endovascular Treatment Of Ruptured TAAAs With Sandwich Or Branched Endografts: Which Technique For Which Patients  
*Giovanni Torsello, MD*
- 3:12 – 3:17** **DEBATE:** With RAAAs Hostile Neck Anatomy Predicts Outcome No Matter What Technique Of Repair Is Used  
*Janet T. Powell, MD, PhD*
- 3:18 – 3:23** **DEBATE:** Not True: With Current Improved Techniques And Adjuncts EVAR Can Be Performed Successfully In RAAA Patients With Hostile Neck Anatomy And With Good Outcomes  
*Marc R.H.M. van Sambeek, MD, PhD*
- 3:24 – 3:30** Panel Discussion
- 3:30 – 3:40** Break - Visit Exhibits And Pavilions (2nd and 3rd Floors)

SESSION 53 (Grand Ballroom East, 3rd Floor)

**VASCULAR ROBOTICS; IMAGING SYSTEMS; VIRTUAL REALITY AND GUIDANCE; HYBRID ROOMS**

**Moderators:** *Mark A. Farber, MD*  
*Jean Bismuth, MD*

- 3:40 – 3:45** Advances In Robotic Laparoscopic Treatment Of AAAs: Value Of The Gore Hybrid Graft In Dealing With Complex AAAs  
*Fabien Thaveau, MD, PhD*
- 3:46 – 3:51** New Developments In Robotics And Electromagnetic Guidance For Endovascular Procedures: What Does The Future Hold  
*Nicholas J.W. Cheshire, MD*
- 3:52 – 3:57** How To Build A Hybrid OR: What Equipment And Staffing Are Needed: How To Assure Fair And Optimal Usage  
*Mark A. Adelman, MD*
- 3:58 – 4:03** How To Convince Institutional Administration And Management To Build A Hybrid OR And How To Make It Profitable  
*Alan B. Lumsden, MD*
- 4:04 – 4:09** Role Of 3D Fusion Imaging And Guidance With The Siemens Artis Zeego System For Complex Vascular Interventions: Advantages And Limitations  
*Neal S. Cayne, MD*
- 4:10 – 4:15** New Developments In Advanced Fusion Imaging (Track Vision, GE) For Better Translumbar Type 2 Endoleak Treatment And Percutaneous Distal Branch Puncture And Retrograde Wiring When Prograde Techniques Fail During F/B/EVAR  
*Stephan Haulon, MD*
- 4:16 – 4:21** Benefits Of Fusion Imaging For Treating TBADs: It Can Be Essential  
*Herve Rousseau, MD, PhD*
- 4:22 – 4:27** Value Of Fusion, Re-Entry Devices And Variable Curvature Sheath For Treating Complex Aorto-Iliac Occlusive Disease Endovascularly  
*Klaus M. Overbeck, MD, MPhil*
- 4:28 – 4:33** Differences Between 2D-3D Fusion And 3D-3D Fusion Imaging: Why It Matters For Endovascular Procedures  
*Giovanni F. Torsello, MD*  
*Giovanni Torsello, MD*
- 4:34 – 4:39** CTA Image Fusion With The Philips Vessel Navigator To Facilitate F/EVAR (Video)  
*Marc L. Schermerhorn, MD*
- 4:40 – 4:46** Panel Discussion

SESSION 54 (Grand Ballroom East, 3rd Floor)

**RADIATION SAFETY; IMAGING; NEW CONCEPTS AND DEVICES**

**Moderators:** *Lindsay Machan, MD*  
*Evan C. Lipsitz, MD, MBA*

- 4:47 – 4:52** How To Reduce Radiation Exposure During Complex Aortic Procedures: Virtual Guidance Systems Will Help: How Do They Work  
*Götz M. Richter, MD, PhD*

- 4:53 – 4:58** Endovascular Repair Of AAAs With Common Iliac Aneurysms: Comparison Of Sandwich Grafts vs. Hypogastric Exclusion vs. Bell Bottom Technique  
*Armando C. Lobato, MD, PhD*
- 4:59 – 5:04** “Light Weight” Radiation Protective Gear (Caps, Glasses, Lead Gowns) Is A Misnomer: These Devices Fall Short: How Should Vascular Specialists Best Protect Their Brain, Eyes And Body From Radiation  
*Lindsay Machan, MD*
- 5:05 – 5:10** New Techniques In Radiation Exposure Monitoring And Protection For Operators And Others  
*Mark A. Farber, MD*
- 5:11 – 5:16** CO<sub>2</sub> Angiography And CO<sub>2</sub> Guided Interventions For Treatment Of Lower Extremity And Abdominal Arterial Lesions: Tips And Tricks To Do Them Simply And Safely  
*Kyung Cho, MD*
- 5:17 – 5:22** Promoting Operator Radiation Safety: How A Simulation System Can Help  
*Lars B. Lönn, MD, PhD*
- 5:23 – 5:28** Virtual Reality, Augmented Reality And High Resolution 3D-3D Imaging: What Are They And What Will Their Value Be  
*Jan M.M. Heyligers, MD, PhD*
- 5:29 – 5:34** The Tour Guide System (Medtronic) To Facilitate Difficult Catheterizations And Procedures: What Is It And What Is Its Value  
*Fabien Thaveau, MD, PhD*
- 5:35 – 5:40** Managing Anticoagulation When Needed To Avoid Postop Hemorrhage  
*Timothy K. Liem, MD, MBA*
- 5:41 – 5:46** A Pressurized Cadaver Model To Augment Open Vascular Training  
*Christian Ochoa, MD*
- 5:47 – 5:54** Panel Discussion  
**End of Program H**

PROGRAM I (SESSIONS 55-62)

NEW DEVICES FOR EVAR AND COMPLEX AAA REPAIR; TEVAR AND TAAA REPAIR; LOWER EXTREMITY TREATMENT; PREVENTION OF ENDOLEAKS AND MIGRATION; CLOT REMOVAL AND EMBOLIZATION

Grand Ballroom West, 3rd Floor

SESSION 55 (Grand Ballroom West, 3rd Floor)

UPDATE ON NEW DEVICES FOR EVAR AND JUXTA- AND PARARENAL AAAs; AND ILIAC BRANCHED DEVICES (4 ½ MINUTE TALKS)

*Moderators: Timur P. Sarac, MD  
Ali F. AbuRahma, MD*

- 6:40 – 6:45** New Horizon Single Sided Access Endograft For EVAR: How It Works And Early Clinical Results  
*Felice Pecoraro, MD  
Mario L. Lachat, MD*
- 6:45 – 6:50** The Altura Endograft (Lombard Medical) For EVAR: 5-Year Favorable Results: Advantages And Limitations  
*Albrecht H. Krämer, MD*



- 6:50 – 6:55** Long-Term Results Of The Repositionable C3 Gore Excluder For EVAR: Value And Limitations  
*Eric L.G. Verhoeven, MD, PhD*  
*Athanasios Katsargyris, MD*
- 6:55 – 7:00** How Do The Long-Term Results Of The OVER RCT Reflect On The Issue Of Worse Late Deterioration In The Survival Of Its EVAR Patients  
*Frank A. Lederle, MD*
- 7:00 – 7:05** When The AFX Endograft (Endologix) Is Used With A Large Diameter Proximal Cuff To Treat AAAs With A Large Diameter Proximal Neck: There Is A Possibility Of Type 3 Endoleaks At The Cuff-Endograft Junction  
*Gregg S. Landis, MD*
- 7:05 – 7:10** Experience With The Low Profile InCraft Endograft (Cordis – Cardinal Health) For EVAR: Advantages And Limitations  
*Germano Melissano, MD*  
*Roberto Chiesa, MD*
- 7:10 – 7:15** Panel Discussion
- Moderators:** *Keith D. Calligaro, MD*  
*John H. Furtek, BS, RT(r)*
- 7:15 – 7:20** The Ovation (Prime And Alto) Endograft (TriVascular/Endologix) For EVAR: Unique Advantages, Clinical Experience And Limitations: Why Neck Enlargement Does Not Occur  
*Sean P. Lyden, MD*  
*Carlo Setacci, MD*  
*Andrew Holden, MBChB*
- 7:20 – 7:25** EVAR With The Zenith Flex AAA Endograft (Cook) Results In Greater AAA Sac Shrinkage Than With Other Grafts  
*Naoki Fujimura, MD, PhD*
- 7:25 – 7:30** The Treovance Endograft (Bolton Medical) For EVAR: Advantages, Clinical Experience And Status In The US  
*Matthew J. Eagleton, MD*
- 7:30 – 7:35** The Value Of A Customized Treo EVAR Device (cEVAR) For Unusual AAA Treatment: Does It Have A Place Between F/EVAR And Standard EVAR  
*Fabrizio Fanelli, MD*  
*Vicente Rimbau, MD, PhD*
- 7:35 – 7:40** Long-Term Good Results With The Aorfix Endograft (Lombard) For EVAR In Patients With Highly Angled Proximal Necks And Tortuous Iliac Arteries  
*Mark F. Fillinger, MD*
- 7:40 – 7:45** New Enhanced Conformable Excluder (Gore) Endograft For EVAR With Hostile Neck Anatomy: How Does It Work And Results Of The European EXCEL Registry  
*Robert Y. Rhee, MD*  
*Marc R.H.M. van Sambeek, MD, PhD*  
*Dittmar Böckler, MD*
- 7:45 – 7:50** Panel Discussion

**ILIAC BRANCHED DEVICES (IBDs)**

- 7:50 – 7:55** Algorithm For Optimal Usage Of The Gore Iliac Branched Device (IBD) To Revascularize Hypogastric Arteries In Patients With Common Iliac Aneurysms  
*Darren B. Schneider, MD*

- 7:55 – 8:00** 10-Year Experience And Results With The Zenith IBD (Cook) For Hypogastric Artery Revascularization: Advantages And Limitations  
*Fabio Verzini, MD, PhD*  
*Piergiorgio Cao, MD*
- 8:00 – 8:05** Update On The Status Of The Zenith IBD (Cook) For Hypogastric Artery Revascularization In The US: From The PRESERVE II Trial  
*W. Anthony Lee, MD*
- 8:05 – 8:10** Multicenter Results With The Jotec IBD Show It To Be Safe And Effective For Treating Hypogastric Artery Aneurysms  
*Jan S. Brunkwall, MD, PhD*

#### **DEVICES FOR F/EVAR**

- 8:10 – 8:15** How Routine Preop 3D Model Testing Can Optimize Fenestrated Anaconda Device (Vascutek/Terumo) Design And F/EVAR  
*Afshin Assadian, MD*  
*Juergan Falkensammer, MD*
- 8:15 – 8:20** Advantages Of And Clinical Experience With The Repositionable Anaconda Endograft For F/EVAR  
*Donald B. Reid, MD*
- 8:20 – 8:25** Comparison Of Anaconda And Zenith Endografts For F/EVAR: Advantages Of Each  
*Jan S. Brunkwall, MD, PhD*
- 8:25 – 8:31** Panel Discussion

SESSION 56 (Grand Ballroom West, 3rd Floor)

### **ENDOVASCULAR ANEURYSM SEALING (EVAS) FOR SIMPLE AND COMPLEX AAAs; ASPECTS OF OTHER NEW DEVICES FOR COMPLEX AAAs (4 ½-MINUTE TALKS)**

**Moderators:** *Kenneth Ouriel, MD, MBA*  
*Andrew Holden, MBChB*

- 8:32 – 8:37** Midterm Results With The P-Branch OTS Fenestrated Endograft (Cook) For Complex AAAs  
*Mark A. Farber, MD*
- 8:37 – 8:42** Is Polymer Technology With AAA Endografts (Nellix And Ovation) An Advantage To Achieve Endograft Sealing: Without And With Chimney Grafts  
*Venkatesh G. Ramaiah, MD*
- 8:42 – 8:47** Failure Modes With Nellix EVAR: What Can Be Done To Prevent Them: Evolution Of The Nellix Graft And Its IFU: A New Non-Binary IFU And Algorithm Improves Results  
*Matt M. Thompson, MD*
- 8:47 – 8:52** The Nellix Endograft And EVAR For AAA Treatment: Where Has It Lived Up To Its Promise And What Are Its Limitations  
*Jeffrey P. Carpenter, MD*
- 8:52 – 8:57** How To Preserve Hypogastric Artery Flow With Nellix EVAS In Patients With Iliac Aneurysms  
*Dainis K. Krievins, MD*
- 8:57 – 9:02** New Technique For Using Nellix Endograft To Treat Failed EVARs With Migration And Type 1A Endoleak: Technical Tips  
*Barend M.E. Mees, MD, PhD*

- 9:02 – 9:07** Technical Tips For Open Conversion After Failed Nellix EVAS: Reasons For Failure And Results  
*Dittmar Böckler, MD*
- 9:07 – 9:12** Panel Discussion
- Moderators:** *Peter L. Faries, MD*  
*Patrick J. Lamparello, MD*
- 9:12 – 9:17** Technical Tips For Performing Chimney Grafts With Nellix EVAS (Ch/EVAS): And How To Get Good And Durable Long-Term Results  
*Ian Loftus, MD*  
*Peter J.E. Holt, MD, PhD*
- 9:17 – 9:22** Incidence Of Type 1A Endoleaks After Nellix EVAS Is Low; How To Prevent Them And How Best To Treat Them With Ch/EVAS  
*Andrew Holden, MBChB*
- 9:22 – 9:27** Lessons Learned From Using Ch/EVAS And Other Techniques To Treat Type 1A Endoleaks: When Is Open Conversion Necessary  
*Fabio Verzini, MD, PhD*
- 9:27 – 9:32** How To Detect Endoleaks After Nellix EVAS: How To Prevent, Diagnose And Treat Them  
*Michel M.P. Reijnen, MD, PhD*
- 9:32 – 9:37** How To Precisely Place A Nellix Graft To Treat An AAA With Tortuous Unfavorable Anatomy  
*Thomas Larzon, MD, PhD*
- 9:37 – 9:42** Tips And Tricks For Treating Endovascularly Endoleaks Of All Types: Open Conversion Is Almost Never Necessary  
*Robert A. Morgan, MD*
- 9:42 – 9:48** Panel Discussion
- 9:49 – 10:05** 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; TEVAR; CH/TEVAR AND OTHER MODIFICATIONS OF TEVAR (4 ½ MINUTE TALKS)**

**Moderators:** *Ali Khojnejhad, MD, PhD*  
*Rodney A. White, MD*

- 10:05 – 10:10** Advantages Of Low Profile Endograft Systems For TEVAR: Are There Any Disadvantages  
*Giovanni F. Torsello, MD*  
*Giovanni Torsello, MD*
- 10:10 – 10:15** The New Gore TAG Conformable Thoracic Aortic Endograft System With Active Control For More Precise Graft Placement In Highly Curved Arches: How It Works And Early Clinical Experience  
*Dittmar Böckler, MD*
- 10:15 – 10:20** Transapical Approach For Deploying A Branched Endograft (Braille Medical) To Treat An Aortic Arch Aneurysm  
*Diego F. Gaia, MD, PhD*
- 10:20 – 10:25** Advantages Of The Bolton Relay Pro Low Profile Endograft For Thoracic Aortic Lesions: Why They Make A Difference  
*Vicente Rimbau, MD, PhD*

- 10:25 – 10:30** Branched Endografts For Aortic Arch Pathology: Comparative Advantages Of The 2 Available Commercial Arch Endografts From Cook And Bolton  
*Tilo Kölbel, MD, PhD*
- 10:30 – 10:35** Panel Discussion
- 10:35 – 10:40** Advantages Of Custom Made Thoracic Endografts With Proximal Or Distal Scallops (Bolton) For Complex TEVARs  
*Michael P. Jenkins, MBBS, BSc, MS*  
*Jean-Marc Alsac, MD, PhD*  
*Clark J. Zeebregts, MD, PhD*
- 10:40 – 10:45** Update On The Novel Nexus Single Fenestrated Endograft System For Treating Aortic Arch Lesions: Concept And Clinical Results  
*Thomas F. Lindsay, MDCM*  
*Mario L. Lachat, MD*  
*Nicola Mangialardi, MD*
- 10:45 – 10:50** Early Clinical Results And Experience With Next Generation (Valiant Navion) Low Profile TEVAR Device  
*Frank R. Arko, MD*  
*Eric E. Roselli, MD*
- 10:50 – 10:55** The Gore Single Branched TAG Thoracic Endograft For Treating Aortic Arch Lesions: Initial Clinical Results And Future Potential: Will It Supersede Multibranched Arch Endografts  
*Michel Makaroun, MD*  
*Michael D. Dake, MD*
- 10:55 – 11:00** In Situ Fenestration Of Thoracic Endografts To Enable Supra-Aortic Branch Revascularization And Facilitate Endovascular Treatment Of Aortic Arch Lesions: Technique And Results  
*Wei Guo, MD*
- 11:00 – 11:05** Panel Discussion

SESSION 58 (Grand Ballroom West, 3rd Floor)

**NEW DEVICES FOR THE TREATMENT OF THORACIC AORTIC LESIONS AND TAAAs (4 ½ MINUTE TALKS)**

**Moderators:** *Nicholas J.W. Cheshire, MD*  
*Zhong Chen, MD*  
*Wayne W. Zhang, MD*

- 11:05 – 11:10** How Has Progress In Large Sheath Technology Improved TEVAR, F/B/EVAR And Other Complex Endo Procedures  
*Benjamin W. Starnes, MD*
- 11:10 – 11:15** How Endograft Device Design Influences TEVAR Outcomes When Treating For TBADs  
*Mark A. Farber, MD*
- 11:15 – 11:20** Changing Spectrums Of Reinterventions After TEVAR With Different Evolving Commercial Devices  
*Ronald M. Fairman, MD*
- 11:20 – 11:25** What Late Complications And Failures Of Open Thoraco-Abdominal Bypass Can Best Be Treated Endovascularly: Technical Tips For Doing So  
*Albrecht H. Krämer, MD*
- 11:25 – 11:30** How To Choose Thoracic Endografts For TEVAR For Various Lesions: What Are The Differences Between Devices  
*Ludovic Canaud, MD, PhD*

- 11:30 – 11:35** Performance Advantages Of The Conformable Gore TAG Endograft  
*Santi Trimarchi, MD, PhD*
- 11:35 – 11:40** Bolton Relay Endograft For TEVAR: Advantages; Status And Availability In The US  
*Christopher J. Kwolek, MD*
- 11:40 – 11:45** Value Of Custom Made Proximal Scallop Endografts (Bolton Medical) For Patients Requiring TEVAR After Ascending Aortic Repair For Type A Dissections: Is An OTS Device Coming  
*Jean-Marc Alsac, MD, PhD*
- 11:45 – 11:50** Advantages Of The Cook Low Profile Alpha Endograft System For TEVAR: Clinical Results To Date  
*Athanasios Katsargyris, MD*  
*Eric L.G. Verhoeven, MD, PhD*
- 11:50 – 11:55** TEVAR With And Without Left Subclavian Artery Coverage: Advantages And Disadvantages Of Both: From The VALOR Trial  
*Carlos E. Donayre, MD*  
*Rodney A. White, MD*
- 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 DEVICES FOR TREATING LOWER EXTREMITY ARTERIAL LESIONS: NEW ENDOVASCULAR TREATMENTS, PROSTHETIC GRAFTS, HEPARIN BONDING TO GRAFTS (5-MINUTE TALKS)**

**Moderators:** *Enrico Ascher, MD*  
*Yann Gouëffic, MD, PhD*

- 1:00 – 1:05** Improved Atherectomy For Treatment Of Complex And Calcified Lesions With The Phoenix Front-Cutting And Aspirating Device (Philips-Volcano): How Does It Work And Results  
*Michael K.W. Lichtenberg, MD*
- 1:06 – 1:11** Advantages And Limitations Of The OCT Guided Atherectomy Device (Panthera And Ocelot Systems From Avinger) In The Treatment Of Iliac And Lower Extremity Arterial Lesions: Concepts, Indications And Results  
*Patrick E. Muck, MD*  
*Matthew Recht, MD*  
*Marianne Brodmann, MD*
- 1:12 – 1:17** Over-The-Wire Endarterectomy And Relining System With DCB For SFA Lesions: The DEF AR Study (An RCT): Concept And Clinical Results  
*Patrick Peeters, MD*
- 1:18 – 1:23** Spiral Laminar Flow Prosthetic Vascular Grafts For Bypasses And A-V Access: Concept, Advantages And Results  
*Hosam F. El Sayed, MD*
- 1:24 – 1:29** The Chocolate (Restrained Balloon – TriReme Medical & QT Vascular): Concept, Why It Is Better Than Other Angioplasty Balloons, And Results  
*Francesco Speziale, MD*  
*Lawrence A. Garcia, MD*

**PTFE VASCULAR GRAFTS AND HEPARIN BONDING**

- 1:30 – 1:35** Propensity Matched 5-Year Comparison Of Propaten PTFE Grafts (Gore) And ASV Grafts For Below-The-Knee (BTK) Fem-Pop Bypasses  
*Raffaele Pulli, MD*  
*Carlo Pratesi, MD*
- 1:36 – 1:41** **DEBATE:** Propaten Grafts With Bonded Heparin (Gore) Yield Better 5-Year Results For Fem-Pop Bypass Than Those Of Similar PTFE Grafts Without Heparin Bonding  
*Russell H. Samson, MD, RVT*
- 1:42 – 1:47** **DEBATE:** The Evidence Is Not Convincing That Heparin Bonding With Propaten PTFE Grafts Improves Bypass Patency  
*Jonathan D. Beard, ChM, MEd*
- 1:48 – 1:53** Are Propaten Heparin Bonded PTFE Grafts Better Than Standard PTFE Grafts For Lower Extremity Bypasses: What Do The 5-Year Results Of A RCT Tell Us And Do We Need Another RCT  
*Jes S. Lindholt, MD*
- 1:54 – 2:00** Panel Discussion

SESSION 60 (Grand Ballroom West, 3rd Floor)

**NEW DEVELOPMENTS AND DEVICES FOR LOWER EXTREMITY STENTS, BALLOONS, ATHERECTOMY AND STENT-GRAFTS; TECHNICAL ADVANCES TO IMPROVE THEIR USE (5-MINUTE TALKS)**

**Moderators:** *Kim J. Hodgson, MD*  
*Giancarlo Biamino, MD, PhD*

- 2:00 – 2:05** Are There Late Problems With Current DESs And DCBs For The Treatment Of SFA Lesions: Can Improved Technology With Sustained Release From Drug Reservoirs Overcome Them: What Else Offers Promise  
*Dierk Scheinert, MD*
- 2:06 – 2:11** Status Of Bioresorbable Stents To Treat Lower Extremity Lesions: 3-Year Results Of The ESPRIT Trial: Advantages, Limitations And Future Prospects  
*Michael D. Dake, MD*  
*Michael R. Jaff, DO*
- 2:12 – 2:17** Value And Availability In The US Of DESs To Treat BTK Popliteal And Crural Arteries: Indications And Future Prospects  
*Robert A. Lookstein, MD, MHC DL*
- 2:18 – 2:23** A New 2-Component Tigris Stent (Gore) For Treatment Of Lower Extremity Occlusive Lesions: Advantages And Limitations  
*Thomas Zeller, MD*
- 2:24 – 2:29** Advantages Of Swirling Flow Induced By The BioMimics 3D Helical Stent (Veryan): How Does It Work And 2-Year Results Of A RCT vs. Standard Stents  
*Michael K.W. Lichtenberg, MD*  
*Thomas Zeller, MD*

- 2:30 – 2:35** A New Different DCB – The Luminor (iVascular) For Treating BTK Popliteal And Crural Artery Lesions Causing CLTI: What Makes It Different And Favorable 1-Year Results  
*Vicente Rimbau, MD, PhD*
- 2:36 – 2:41** Value To Date And Potential Value Of The Bullfrog Microinfusion Balloon Device (Mercator MedSystem) For Better Local Drug Delivery Into The Vessel Wall To Treat Arterial Lesions: 1-Year Plus Results Of The DANCE Trial With Dexamethasone Delivery  
*George L. Adams, MD*  
*Mahmood Razavi, MD*
- 2:42 – 2:47** 2-Year Results Of The Tack Optimized Balloon Angioplasty (TOBA) Trial For Fem-Pop And BTK Lesions Demonstrates Safety, Efficacy And Cost Effectiveness Of Tack Device (Intact Vascular) In Repairing Focal PTA Dissections  
*Christian Wissgott, MD*  
*Marianne Brodmann, MD*  
*Marc Bosiers, MD*  
*Thomas Zeller, MD*  
*Michael R. Jaff, DO*
- 2:48 – 2:53** What Special Forces Do Infrapopliteal Arteries Exert On Stents And Why Will The Tack Device (Intact Vascular) Be Better Able To Resist These Forces Than Stents  
*John H. Rundback, MD*
- 2:54 – 3:02** Panel Discussion
- 3:03 – 3:15** Break - Visit Exhibits And Pavilions (2nd and 3rd Floors)

SESSION 61 (Grand Ballroom West, 3rd Floor)

**NEW DEVICES TO PREVENT AND TREAT ENDOLEAKS AND ENDOGRAFT MIGRATION; ENDOTENSION; ENDOANCHORS (4 ½-MINUTE TALKS)**

**Moderators:** *Luis A. Sanchez, MD*  
*William D. Jordan, Jr., MD*

- 3:15 – 3:20** Endotension Is Real: Pathophysiology, Prevention, Diagnosis And How To Manage  
*Edmo A. Gabriel, MD, PhD*
- 3:20 – 3:25** When Can Onyx Be Used Effectively To Seal Type 1A Endoleaks And When It Won't Work: Technical Tips On How To Use It  
*Mark Conrad, MD, MMSc*

**ENDOANCHORS: INDICATIONS AND VALUE**

- 3:25 – 3:30** Long-Term (8-10 Years) Effectiveness With EndoAnchors (Aptus/Medtronic) On Proximal Neck Outcomes After EVAR: From The STAPLE 1 And 2 Trials  
*David H. Deaton, MD*
- 3:30 – 3:35** Value And Cost Effectiveness Of EndoAnchors In EVAR: In What Circumstances Do Their Prophylactic Use Prevent Type 1A Endoleaks And Migration: Can They Help With Short (4-10 mm) Necks: Based On 4-Year Results  
*Jean-Paul de Vries, MD, PhD*

- 3:35 – 3:40** When Can EndoAnchors Be Used To Treat And Eliminate Type 1A Endoleaks And When Won't They Work: Technical Tips To Make Them Work  
*William D. Jordan, Jr., MD*
- 3:40 – 3:45** Do EndoAnchors Prevent Aortic Neck Dilation After EVAR With Self-Expanding Endografts  
*Apostolos K. Tassiopoulos, MD*
- 3:45 – 3:50** EndoAnchors To Prevent And Treat Type 1A Gutter Endoleaks With Ch/EVAR: Technical Tips And Use Of IVUS To Avoid Pitfalls  
*Frank R. Arko, MD*

**ENDOANCHORS WITH TEVAR**

- 3:50 – 3:55** Value Of EndoAnchors In TEVAR Procedures With Imperfect Landing Zones: Technical Tips To Make Them Avoid Pitfalls  
*Jean M. Panneton, MD*
- 3:55 – 4:00** Indications And Value Of EndoAnchors In TEVAR Procedures And Endovascular TAAA Repairs  
*Piotr M. Kasprzak, MD*
- 4:00 – 4:05** EndoAnchors Can Prevent Cranial Migration Of Thoracic Endografts: When And How Should They Be Used  
*Vicente Rimbau, MD, PhD*
- 4:05 – 4:12** Panel Discussion

SESSION 62 (Grand Ballroom West, 3rd Floor)

**NEW DEVICES FOR EMBOLECTOMY CLOT REMOVAL AND EMBOLIZATION AND THEIR COMPLICATIONS (4 ½ MINUTE TALKS)**

**Moderators:** *Kim J. Hodgson, MD*  
*Keith D. Calligaro, MD*

- 4:12 – 4:17** Advantages, Downsides And Risks Of Percutaneous Mechanical Clot Removal  
*Guillermo A. Escobar, MD*
- 4:17 – 4:22** Renal Failure After Percutaneous Mechanical Clot Removal: Causes, Prevention And Treatment  
*Vikram S. Kashyap, MD*
- 4:22 – 4:27** An Improved Device For Clot Fragmentation And Aspiration With Less Hemolysis: How Does The JETI System (Walk Vascular) Work  
*Mahmood Razavi, MD*
- 4:27 – 4:32** Rotational Thrombectomy With The Rotarex Device (Straub Medical) Combined With DCBs As Treatment For ISR: Is It Better Than Other Techniques  
*Sigrid Nikol, MD*
- 4:32 – 4:37** Catheter Based Vacuum Assisted Thrombectomy With The Indigo System (Penumbra): How Does It Work, Advantages, Limitations And Technical Tips For Usage  
*James F. Benenati, MD*
- 4:37 – 4:42** New Endovascular Approaches To Deal With Distal Embolization And Thrombosis Complicating Endovascular Treatments: The Indigo CAT System (Penumbra): Concept, Advantages And Limitations: Value In ISR  
*Frank R. Arko, MD*



- 4:42 – 4:47 Value And Limitations Of Thrombo-Suction For Acute Limb Ischemia: Devices, Technical Tips, Precautions And Complications  
*Athanasios Katsargyris, MD*  
*Eric L.G. Verhoeven, MD, PhD*
- 4:47 – 4:52 Simple Techniques To Clear Thrombotic Occlusions Occurring With Retrograde Tibial Distal Access  
*Thomas O. McNamara, MD*
- 4:52 – 4:57 Clearing Intraprocedural Thrombotic And Embolic Complications Of Endovascular Procedures With The Indigo System: Technical Tips, Precautions And Results  
*Sharif H. Ellozy, MD*
- 4:57 – 5:04 Panel Discussion

**NEW TECHNIQUES FOR THERAPEUTIC EMBOLIZATION**

- 5:05 – 5:10 Recent Advances In Embolotherapy  
*Mahmood Razavi, MD*
- 5:10 – 5:15 A New Liquid Embolic Agent – 34 L Onyx: Concept, Advantages And Limitations In The Treatment Of Various Vascular Pathologies  
*Furuzan Numan, MD*
- 5:15 – 5:20 Alternative Embolization Strategies For Treating Challenging Type 2 Endoleaks With POD And POD Packing Coils (Penumbra): How To Do It  
*Mazin Foteh, MD*
- 5:20 – 5:25 Why Coil Embolization Packing Density Matters: Based On Results Of A Large Volume Coil Embolization Study  
*Frank R. Arko, MD*
- 5:25 – 5:32 Panel Discussion
- End of Program I**

PROGRAM J (SESSIONS 63-70)  
SUPERFICIAL VENOUS DISEASE AND VARICOSE VEINS

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*  
*Kenneth Ouriel, MD, MBA*  
*Thomas W. Wakefield, MD*

- 7:20 – 7:24 Introduction To Veins At VEITH  
*Jose I. Almeida, MD, RPVI, RVT*
- 7:25 – 7:30 Establishing The Treatment Plan With CEAP & VCSS  
*Jose I. Almeida, MD, RPVI, RVT*
- 7:31 – 7:36 Venous Symptoms Consensus (SYMVein): European Venous Forum And The International Working Group  
*Bo G. Eklof, MD, PhD*
- 7:37 – 7:42 Outcome Assessment Of CVD  
*Lowell S. Kabnick, MD, RPhS*

- 7:43 – 7:48** Evidence Summary On The Pathophysiology Of Varicose Veins  
*Thomas W. Wakefield, MD*
- 7:49 – 7:54** Venous Flow And Pressure: Modern Concepts  
*Seshadri Raju, MD*
- 7:55 – 8:00** Identifying Reflux Pathways With Duplex Ultrasound Mapping  
*Neil M. Khilnani, MD*
- 8:01 – 8:06** Physiology Of Venous Return  
*Brajesh K. Lal, MD*
- 8:07 – 8:12** Contemporary Concept Of Hemodynamic Changes In CVD: IUP Consensus-2016  
*Byung-Boong (B.B.) Lee, MD*
- 8:13 – 8:18** Treatment Of Varicose Veins By ASVAL: Results At 10 Years  
*Sylvain Chastanet, MD*
- 8:19 – 8:24** Influence Of The Competence Of The SFJ On The Mode Of Treatment Of Varicose Veins  
*Paul Pittaluga, MD*
- 8:25 – 8:30** Panel Discussion

SESSION 64 (Trianon Ballroom, 3rd Floor)

## VENOUS IMAGING TECHNIQUES

**Moderators:** *William A. Marston, MD*  
*Brajesh K. Lal, MD*

- 8:31 – 8:36** Optimization Of Duplex Exam Image  
*Jan M. Sloves, RVT*
- 8:37 – 8:42** How To Recognize Variants On The Venous Duplex Exam  
*Neil M. Khilnani, MD*
- 8:43 – 8:48** What Should The Venous Duplex Examination Include And How Should It Be Performed  
*Mark H. Meissner, MD*
- 8:49 – 8:54** Can You Predict Venous Severity Based On Reflux Time  
*William A. Marston, MD*
- 8:55 – 9:00** Vein Diameter Is Not The Key For Stratifying Interventional Strategies For Superficial Venous Disease  
*Alun H. Davies, MA, DM, DSc*
- 9:01 – 9:06** Reflux Elimination Test For Saphenous Sparing Technique  
*Sylvain Chastanet, MD*
- 9:07 – 9:12** The Argument Against Routine Duplex Ultrasound After Truncal Ablation: An Evidence-Based Cost-Benefit Analysis  
*Thomas F. O'Donnell, Jr., MD*
- 9:13 – 9:18** Panel Discussion

SESSION 65 (Trianon Ballroom, 3rd Floor)

## SUPERFICIAL VEIN TREATMENT STRATEGIES AND TECHNIQUES

**Moderators:** *Jose I. Almeida, MD, RPVI, RVT*  
*Edward G. Mackay, MD*

- 9:19 – 9:24** Lower Limb Venous Kinetics And Impact On Venous Drainage  
*Sergio Giancesini, MD, PhD*

- 9:25 – 9:30** Tributary Avulsions/Foam Sclerotherapy Should Be Done At The Same Time As Truncal Ablation  
*Alun H. Davies, MA, DM, DSc*
- 9:31 – 9:36** EHIT 2, 3, 4: Management Recommendations  
*Lowell S. Kabnick, MD, RPhS*
- 9:37 – 9:42** 17 Years Of Lessons Learned From Laser Ablation  
*Jean Luc Gerard, MD*
- 9:43 – 9:48** Step By Step: Phlebectomy  
*Paul Pittaluga, MD*
- 9:49 – 9:54** Superficial Reflux With Obstructed Deep Veins: When And When Not To Treat  
*Jose I. Almeida, MD, RPVI, RVT*
- 9:55 – 10:00** Incidence, Causes, And Treatment Of Recurrent Varicose Veins Following Endovenous Thermal Ablation  
*Edward G. Mackay, MD*
- 10:01 – 10:06** Panel Discussion

**Moderators:** *Alun H. Davies, MA, DM, DSc*  
*Raghu Kolluri, MD*

**NON-THERMAL ABLATION**

- 10:07 – 10:12** Ultrasound Guided Foam Sclerotherapy: Tips And Tricks  
*Sergio Giancesini, MD, PhD*
- 10:13 – 10:18** Meta-Analysis Of 1000 Truncal Vein Ablations With Cyanoacrylate Glue  
*Kursat A. Bozkurt, MD*
- 10:19 – 10:24** Cyanoacrylate Embolic Adhesive vs. RFA: Three-Year Follow-Up Pivotal Trial  
*Raghu Kolluri, MD*
- 10:25 – 10:30** Perforating Vein Ablation With Turkish Glue: 1 Year Follow-Up Data  
*Kursat A. Bozkurt, MD*
- 10:31 – 10:36** Updates On The Cost Effectiveness Of Glue And MOCA Techniques vs. Thermal Ablation  
*Alun H. Davies, MA, DM, DSc*
- 10:37 – 10:42** Mechanochemical Ablation: The Three-Year Outcome Of A Prospective Trial On 100 Patients With GSV Incompetence  
*Michel M.P. Reijnen, MD, PhD*
- 10:43 – 10:48** What Is New In The MOCA Treatment - Old Concept, New Solution - Flebogrif  
*Tomasz Urbanek, MD*
- 10:49 – 10:54** Polidocanol Endovenous Microfoam: Current Use  
*Edward G. Mackay, MD*
- 10:55 – 11:00** Panel Discussion

SESSION 66 (Trianon Ballroom, 3rd Floor)

**VENOUS GOVERNANCE**

**Moderators:** *Lowell S. Kabnick, MD, RPhS*  
*R. Clement Darling III, MD*

- 11:01 – 11:06** IAC Vein Center Accreditation: Is It Important  
*Alan M. Dietzek, MD, RPVI*
- 11:07 – 11:12** CMS Policy, Payments And Pitfalls  
*Harold J. Welch, MD*

- 11:13 – 11:18** The Process For New Devices - CPT Code, RUC, Insurance  
*Jose I. Almeida, MD, RPVI, RVT*
- 11:19 – 11:24** Quality Metrics For OBLs  
*Paul J. Gagne, MD*
- 11:25 – 11:30** Using The VVR VQI To Evaluate The Effect Of Age On Outcomes In Varicose Vein Surgery  
*Nicholas H. Osborne, MD, MS*
- 11:31 – 11:36** The Unthinkables In Venous Practice: Is There A Solution  
*Elna M. Masuda, MD*
- 11:37 – 11:42** How To Have A Paper Accepted To JVS Venous And Lymphatic And JVS Case Report  
*Peter F. Lawrence, MD*
- 11:43 – 11:48** Joint Venous Council Progress Update  
*Jose I. Almeida, MD, RPVI, RVT*
- 11:49 – 11:54** MACRA For A Vein Practice  
*Lowell S. Kabnick, MD, RPhS*
- 11:55 – 12:00** Panel Discussion
- 12:01 – 12:59** Lunch Break – 2nd Floor Promenade  
Visit Exhibits And Pavilions (2nd and 3rd Floors)

SESSION 67 (Trianon Ballroom, 3rd Floor)

### EXAMINING THE EVIDENCE

**Moderators:** *Marc A. Passman, MD*  
*Glenn Jacobowitz, MD*

- 1:00 – 1:05** Recent Consensus Update: Venous Symptoms  
*Armando Mansilha, MD, PhD*
- 1:06 – 1:11** Phlebolympheidema: Hallmark Of Combined Insufficiency Of Venous-Lymphatic System  
*Byung-Boong (B.B.) Lee, MD*
- 1:12 – 1:17** Is The Vein Wall Thickness A Useful Indicator Of Response In Patients With Chronic Venous Disease  
*Ignacio Escotto, MD*
- 1:18 – 1:23** The Varicose Vein Registry And Its Role In The Future Of Vein Care  
*Thomas W. Wakefield, MD*
- 1:24 – 1:29** Thermal Ablation On Anticoagulated Patients: Is It Safe And Effective  
*Glenn Jacobowitz, MD*
- 1:30 – 1:35** Is There A Need To Correct A Refluxing Accessory Thigh Vein  
*Lowell S. Kabnick MD, RPhS*
- 1:36 – 1:41** Is C2 Disease Progressive  
*Mark H. Meissner, MD*
- 1:42 – 1:47** Why Graduated Compression Is An Insurance Requirement  
*Fedor Lurie, MD, PhD*
- 1:48 – 1:53** Panel Discussion

SESSION 68 (Trianon Ballroom, 3rd Floor)

### MORE USEFUL SUPERFICIAL VEIN INFORMATION

**Moderators:** *Elna M. Masuda, MD*  
*Ellen D. Dillavou, MD*

- 1:54 – 1:59** Standardized Aquatic Protocol For Phlebolympheidema Patients  
*Sergio Giancesini, MD, PhD*

- 2:00 – 2:05** Importance Of The Posterior Accessory Saphenous Vein In The Calf And Its Effect On Pathologic Perforators  
*Elna M. Masuda, MD*
- 2:06 – 2:11** The Fate Of The Below Knee Deep Veins After Ultrasound Guided Foam Sclerotherapy For Incompetent Venous Tributaries  
*Irwin V. Mohan, MBBS, MD*
- 2:12 – 2:17** How To Treat Labial Varices: Sclerotherapy, USG Sclerotherapy And/Or Phlebectomy  
*Ellen D. Dillavou, MD*
- 2:18 – 2:23** Marangoni Effect And Foam Stability  
*Jorge H. Ulloa, MD*
- 2:24 – 2:29** Laser Or Ohmic Devices For Telangiectasia: When And Why  
*Ian J. Franklin, MS*
- 2:30 – 2:35** Management Of Calf Vein Thrombosis After Venous Procedures  
*Elna M. Masuda, MD*
- 2:36 – 2:41** SVT In The Pregnant Patient  
*Ellen D. Dillavou, MD*
- 2:42 – 2:47** Paradoxical Embolism with CO<sub>2</sub>/O<sub>2</sub> Foam  
*Jorge H. Ulloa, MD*
- 2:48 – 2:53** Panel Discussion

SESSION 69 (Trianon Ballroom, 3rd Floor)

## SUPERFICIAL VENOUS ABLATION, COMPRESSION, AND RESEARCH

**Moderators:** *Joseph A. Caprini, MD*  
*Mark A. Adelman, MD*

- 2:54 – 2:59** How To Properly Design And Interpret Clinical Trials  
*Thomas W. Wakefield, MD*
- 3:00 – 3:05** Neovascularization After Endo-Venous Laser Ablation: A Cause Of Truncal Recurrence  
*Irwin V. Mohan, MBBS, MD*
- 3:06 – 3:11** Creating WAVES: First U.S. Post Market Results Using Cyanoacrylate Adhesive Closure Without Compression  
*Kathleen D. Gibson, MD*
- 3:12 – 3:17** What Should You Advise Patients Undergoing Truncal Ablation And Flying  
*Alan M. Dietzek, MD, RPVI*
- 3:18 – 3:23** Cyanoacrylate Adhesive For The Treatment Of Saphenous Vein Incompetence: 3-Year Follow-Up In The First- in- Human Feasibility Trial  
*Jose I. Almeida, MD, RPVI, RVT*
- 3:24 – 3:29** Does The Absence Of The GSV In The Saphenous Compartment At The Thigh Have An Influence On Chronic Venous Insufficiency  
*Sylvain Chastanet, MD*
- 3:30 – 3:35** The SECURE Trial: Update On Perforator Ablation  
*Mark A. Adelman, MD*
- 3:36 – 3:41** When Should We Use Prophylactic Anticoagulation In Saphenous Ablation  
*Joseph A. Caprini, MD*
- 3:42 – 3:47** Newer Diagnostic Modalities In The Evaluation Of Lymphedema  
*Thomas F. O'Donnell, Jr., MD*

## THURSDAY/FRIDAY SESSIONS 69–70

- 3:48 – 3:53** Which Patients Benefit From A Lymphedema Pump  
*Thomas S. Maldonado, MD*
- 3:54 – 3:59** When To Use Inelastic Compression  
*Joseph A. Caprini, MD*
- 4:00 – 4:05** Hypothyroidism: Association With Chronic Venous Disease  
*Jorge H. Ulloa, MD*
- 4:06 – 4:11** Which DOAC For Which DVT: Can We Stratify Yet  
*Timothy K. Liem, MD, MBA*
- 4:12 – 4:17** Panel Discussion

SESSION 70 (Trianon Ballroom, 3rd Floor)

### VENOUS PRACTICE MANAGEMENT . . . AND A LITTLE FUN

**Moderators:** *Thomas F. O'Donnell, Jr., MD*  
*Bo G. Eklof, MD, PhD*

- 4:18 – 4:23** Non-Thermal Devices Are Available For Truncal Ablation: How To Implement In Practice Without Dedicated CPT Codes  
*Steve Elias, MD*
- 4:24 – 4:29** **DEBATE:** C2 Disease Should Not Be A Covered Insurance Benefit  
*Jose I. Almeida, MD, RPVI, RVT*
- 4:30 – 4:35** **DEBATE:** C2 Disease Should Be A Covered Insurance Benefit  
*Alun H. Davies, MA, DM, DSc*
- 4:36 – 4:41** The Future Of Venous Reimbursement In A Non-Fee For Service Environment  
*Thomas F. O'Donnell, Jr., MD*
- 4:42 – 4:47** Response To MEDCAC: Mining Combined Multicenter EMR  
*Peter J. Pappas, MD*
- 4:48 – 4:53** For Learners: New And Different Learning Experiences  
*Bo G. Eklof, MD, PhD*
- 4:54 – 4:59** Advantages And Disadvantages Of Joining A Venous Conglomerate  
*Peter J. Pappas, MD*
- 5:00 – 5:05** What Separates One Vein Center From Another  
*Christopher M. Banoub, MPA*
- 5:06 – 5:11** Panel Discussion
- End of Program J**

## FRIDAY, NOVEMBER 17, 2017

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

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

**6:00 A.M. Continental Breakfast – Rhinelander Gallery, 2nd Floor**

### CONCURRENT FRIDAY PROGRAMS

PROGRAM K: SESSIONS 71-78

**New And Improved Old Techniques; Carotid Related Topics; New Developments In Spinal Cord Ischemia (SCI); Updates And Continuing Controversies; New Techniques, Updates And Concepts; Advances In Wound Care And PEVAR**

6:40 A.M. – 6:00 P.M.

Grand Ballroom East, 3rd Floor

PROGRAM L: SESSIONS 79-87

**New Developments In Popliteal Aneurysms And Disease; Management Of Infected Arteries, Prosthetic Grafts And Endografts; Advances In Imaging, Guidance, Hybrid Suites, Thoracic Outlet Syndromes, Medical Diseases And Treatment, Vascular Trauma Treatment And Radiation Safety**

6:40 A.M. – 5:25 P.M.

Grand Ballroom West, 3rd Floor

PROGRAM M: SESSIONS 88-92

**Deep Venous Disease**

7:55 A.M. – 5:06 P.M.

Trionan 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 71-78)

**NEW AND IMPROVED OLD TECHNIQUES; CAROTID RELATED TOPICS; NEW DEVELOPMENTS IN SPINAL CORD ISCHEMIA (SCI); UPDATES AND CONTINUING CONTROVERSIES; NEW TECHNIQUES, UPDATES AND CONCEPTS; ADVANCES IN WOUND CARE AND PEVAR**

Grand Ballroom East, 3rd Floor

SESSION 71 (Grand Ballroom East, 3rd Floor)

**NEW AND IMPROVED OLD TECHNIQUES; CAROTID TOPICS RELATED TO RADIATION STENOSIS, RISK ASSESSMENT, COMBINED CAROTID/CORONARY DISEASE AND IMPROVED OPEN TREATMENT TECHNIQUES (5-MINUTE TALKS)**

**Moderators:** Enrico Ascher, MD

Mark A. Adelman, MD

- |                    |  |
|--------------------|--|
| <b>6:40 – 6:45</b> | Radial Access For Interventional Treatment Of Non-Coronary Lesions: Which Can Be Treated And Which Not: Equipment Needed: Technical Tips And Advantages<br><i>Marcelo Guimaraes, MD</i>              |
| <b>6:46 – 6:51</b> | How To Prevent Complications And Disasters With Femoral Arterial Access: Avoiding Improper Punctures And Those Above The Inguinal Ligament: Duplex Guidance Is A Must<br><i>Scott L. Stevens, MD</i> |
| <b>6:52 – 6:57</b> | Post Radiation Carotid Stenosis: Treatment Strategies: CAS vs. CEA And Their Outcomes: Technical Tips And Precautions<br><i>Robyn A. Macsata, MD</i>   |
| <b>6:58 – 7:03</b> | How Is 3D Volumetric Analysis Of Carotid Plaques A “Game Changer”: Why Is Carotid Plaque Morphology Only Relevant In Symptomatic Patients<br><i>Henrik Sillesen, MD, DMSc</i>                        |
| <b>7:04 – 7:09</b> | Hybrid Open/Endo Carotid Treatment For Long Diffuse Or Multilevel Disease: Technical Tips And Indications<br><i>Martin R. Back, MD</i>   |
| <b>7:10 – 7:15</b> | Gore Hybrid Grafts Or Stents As Rescue Procedures For Problems With CEA: Technical Tips And Results<br><i>Domenico Valenti, DMChir, PhD</i>  |

**7:16 – 7:21** Best Current Management Options For Patients With Combined Coronary And Carotid Disease When One Or Both Require Treatment: An Interventional Cardiologist's View

*D. Christopher Metzger, MD*

**7:22 – 7:27** Update On Carotid Treatment Prior To CABG: Prophylactic CAS Or CEA Is Unnecessary In Asymptomatic Patients; What Is Best For Symptomatic Patients: A Vascular Surgeon's View

*Ross Naylor, MD*

### **UPDATE ON OPEN SURGICAL APPROACHES TO NECK ARTERIES**

**7:28 – 7:33** Unusual Open Surgical Approaches To Arteries In The Neck

*Ramon Berguer, MD, PhD*

**7:34 – 7:39** Optimal Surgical Technique For Subclavian Transposition And Its Advantages Over Carotid-To-Subclavian Bypass: When Is The Latter Indicated

*Mark D. Morasch, MD, RPVI*

**7:40 – 7:47** Panel Discussion

SESSION 72 (Grand Ballroom East, 3rd Floor)

## **SPINAL CORD ISCHEMIA (SCI) WITH TREATMENT OF THORACIC ANEURYSMS, TAAAs AND COMPLEX AAAs; NEW DEVELOPMENTS IN PATHOGENESIS PREVENTION AND TREATMENT**

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

*Michael J. Jacobs, MD*

**7:48 – 7:53** Real Incidence And Consequences Of Spinal Cord Ischemic Injury After Endovascular TAAA And Complex AAA Repairs

*Nicholas J.W. Cheshire, MD*

**7:54 – 7:59** New Developments In Prevention Of SCI With TAAA Repairs: Systolic BP Should Be Maintained Over 140 mmHg; SCI Is Associated With A High Mortality Even With Neurological Recovery

*Hazim J. Safi, MD*

*Anthony L. Estrera, MD*

**8:00 – 8:05** Advances In The Prevention And Treatment Of SCI During TAAA Repairs

*Germano Melissano, MD*

*Roberto Chiesa, MD*

**8:06 – 8:11** New Developments In The Prevention And Treatment Of SCI: Minimally Invasive Staged Segmental Artery Coil Embolization (MIS<sup>2</sup>ACE) And Its Role In Ischemic Preconditioning To Improve Collateral Circulation And SCI With TAAAs: The PAPA-ARTIS Trial

*Christian D. Etz, MD, PhD*

**8:12 – 8:17** Preconditioning By Segmental Intercostal Artery Embolization To Prevent SCI With Endovascular TAAA Repairs: Initial Clinical Experience

*Daniela Branzan, MD*

*Andrej Schmidt, MD*

*Christian D. Etz, MD, PhD*

**8:18 – 8:23** Near Infrared Spectrometry (NIRS) Monitoring Of Paraspinal Muscles To Reflect SCI: How Does It Work And Results Of This New Method

*Christian D. Etz, MD, PhD*



- 8:24 – 8:29** Current Improved Strategies Using Motor Evoked Potentials (MEPs), Sac Pressure Measurements And Angiography To Reduce SCI With Endovascular TAAA Repairs  
*Geert Willem H. Schurink, MD, PhD*
- 8:30 – 8:35** The Importance Of Optimization Of Blood Pressure And Cardiac Function In Preventing SCI With TAAA Repairs  
*Armando Mansilha, MD, PhD*
- 8:36 – 8:41** Preoperative Risk Score Model For Predicting SCI With TEVAR And TAAA Repairs: How Accurate Is It  
*Albeir Y. Mousa, MD*  
*Ali F. AbuRahma, MD*
- 8:42 – 8:49** Panel Discussion
- 8:50 – 9:06** Break – Visit Exhibits And Pavilions (2nd and 3rd Floors)

SESSION 73 (Grand Ballroom East, 3rd Floor)

NEW DEVELOPMENTS IN CAROTID TOPICS RELATED TO RISK FACTORS, CAUSES OF STROKES, COGNITIVE DECLINE, SIGNIFICANCE OF MICROEMBOLI, PATCH CLOSURES AND ANEURYSMS

**Moderators:** *Frank J. Veith, MD*  
*Jon S. Matsumura, MD*

- 9:06 – 9:11** Patients With Stenotic Carotid Plaques Can Get Strokes From Causes Other Than Their Carotid Plaque: What Are These Other Causes: What Impact Should They Have On Our Decision Making  
*Thomas G. Brott, MD*  
*James F. Meschia, MD*
- 9:12 – 9:17** Is Patch Closure Always Needed With CEA: Why Are All The RCTs Misleading  
*Anthony J. Comerota, MD*
- 9:18 – 9:23** Complications From Carotid Patches With CEA: They Are Not Always Indicated Despite The RCTs  
*Sherif A.H. Sultan, MD*
- 9:24 – 9:29** Optimal Treatment For Infected Carotid Patches With And Without False Aneurysm Formation: Vein Grafts May Not Always Be The Best Treatment  
*Mark K. Eskandari, MD*
- 9:30 – 9:35** Tips And Tricks In The Treatment Of Carotid Aneurysm: A Surgeon's Perspective  
*Laurent Chiche, MD*
- 9:36 – 9:41** Endovascular Treatment Of Carotid Aneurysm: When Should It Be The First Option And When Is Open Surgery Required: An Interventionalist's Perspective  
*Klaus D. Mathias, MD*
- 9:42 – 9:47** Why Endovascular Treatment Of Carotid Aneurysms May Be A Poor Treatment Option  
*James May, MD, MS*
- 9:48 – 9:53** Panel Discussion

**Moderators:** *Hans-Henning Eckstein, MD, PhD*  
*Brajesh K. Lal, MD*

- 9:54 – 9:59** How To Perform Minimal Incision (2-3 cm) CEA Safely: Advantages, Limitations And Results  
*Robert M. Proczka, MD, PhD*

**10:00 – 10:05** Mini-Incision CEA (MICEA) May Be Better Than CAS Or TCAR (TransCarotid Artery Revascularization): How To Do MICEA Safely  
*Enrico Ascher, MD*

**UPDATE ON CAROTID INTERVENTIONS AND COGNITION**

**10:06 – 10:11** Volume Of Subclinical Microembolization After CAS Or CEA Correlates With Long-Term Cognitive Changes: CAS More So Than CEA: DW MRI Defects Have Consequences  
*Wei Zhou, MD*

**10:12 – 10:17** What Is The Impact Of CAS And CEA On Intellectual Function: Does It Correlate With The Embolic Load Produced  
*Peter L. Faries, MD*

**10:18 – 10:23** What Is The Significance Of Asymptomatic Microemboli Produced During Carotid Treatments: What Harm Do They Cause  
*Mark H. Wholey, MD*

**10:24 – 10:29** In A Patient Needing Treatment For An Ipsilateral Carotid Stenosis, How Should Contralateral Carotid Occlusion Influence Treatment Decisions: Are Such Patients Different  
*Cynthia K. Shortell, MD*

**10:30 – 10:35** The Increased Mortality Risk After Procedural Strokes And MIs Is Equal For 90 Days; After 90 Days The Mortality Risk After An MI Is Worse Than After A Stroke; Why: Data From The CREST Trial  
*Brajesh K. Lal, MD*  
*Thomas G. Brott, MD*

**10:36 – 10:41** Panel Discussion

SESSION 74 (Grand Ballroom East, 3rd Floor)

**MORE NEW DEVELOPMENTS IN CAROTID TOPICS RELATED TO MEDICAL TREATMENT, PLAQUE CHANGES WITH TREATMENT, CAS/CEA STROKE RISKS, POST CAS ISR AND VERTEBRAL ARTERY DISSECTIONS**

**Moderators:** *Ross Naylor, MD*  
*James May, MD, MS*

**10:42 – 10:47** Periprocedural Statins Decrease Stroke Rates And Early Cognitive Dysfunction After CEA For Asymptomatic Carotid Stenosis, And May Increase Long-Term Patient Survival: What Drug And Dose Is Best  
*E. Sander Connolly, MD*  
*Eric J. Heyer, MD, PhD*

**10:48 – 10:53** What Is Optimal Medical Treatment For Patients With Carotid Stenosis: How Low Should LDL-C Go: Value Of Mediterranean And Nordic Diets  
*J. David Spence, MD*

**10:54 – 10:59** The Risk Of Stroke In Asymptomatic Carotid Stenosis Patients On Good Medical Management Is So Low That All Should Be Treated Medically: Stratification Of Risk Is Of Little Value: Is Stenosis Or Plaque Progression A Reason To Treat Asymptomatic Patients With CEA Or CAS  
*Henrik Sillesen, MD, DMSc*

- 11:00 – 11:05** How To Predict Procedural Stroke Risk With CEA For Asymptomatic Carotid Stenosis (The ACER Score): What Percentage Of Such Patients Should Undergo CEA Or CAS  
*Richard Bulbulia, MA, MD*
- 11:06 – 11:11** How To Decrease The Risks Of CAS: What New Techniques And Devices May Help: How Does The Double Filter Paladin Device (Contego Medical) Work  
*William A. Gray, MD*
- 11:12 – 11:17** CAS In The Real World Has Higher Stroke And Death Rates Than In Reported Trials: National Registry Data Proves It In Both Symptomatic And Asymptomatic Patients  
*Kosmas I. Paraskevas, MD*  
*Ross Naylor, MD*
- 11:18 – 11:23** Panel Discussion
- Moderators:** *Wesley S. Moore, MD*  
*Enrico Ascher, MD*
- 11:24 – 11:29** Strokes (Clinical And Subclinical) After CAS And Other Interventional Procedures Have Much Greater Cognitive Deficits Than Previously Thought – Even With Full Neurological Recovery: What Are The Implications  
*L. Nelson Hopkins, MD*
- 11:30 – 11:35** Periprocedural Statin Usage Reduces Mortality After CAS And Promotes Recovery When Complications (Stroke And MI) Occur  
*Mahmoud B. Malas, MD, MHS*
- 11:36 – 11:41** The Restenosis Rate After CAS Is Probably Higher Than After CEA In The RCTs: When Should Restenosis Be Treated Invasively  
*Ali F. AbuRahma, MD*
- 11:42 – 11:47** Variations In National Trends For CEA And CAS Indication, Usage And Outcomes In Low And High Risk Patients: What Are The Implications  
*Mohammad H. Eslami, MD, MPH*
- 11:48 – 11:53** Vertebral Artery Dissections: Etiology, Diagnosis And How To Treat Them  
*Mark H. Wholey, MD*
- 11:54 – 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 IMPROVED  
DEVICES FOR CAS; MEMBRANE OR MESH  
COVERED STENTS AND TRANSCAROTID ARTERY  
REVASCULARIZATION (TCAR)

**Moderators:** *Peter A. Schneider, MD*  
*Michel Makaroun, MD*

- 1:00 – 1:05** Relationship Between Carotid Plaque Activity And New DW MRI Ischemic Brain Lesions After CAS With Dual Layer Micromesh Stents: They Make A Difference At 1 And 24 Hours And 30 Days  
*Maria Antonella Ruffino, MD*

- 1:06 – 1:11** Comparison Of Micromesh Carotid Artery Stents: Characteristics, Specific Indications And Results Of RoadSaver (Terumo) And C-Guard Carotid Stents  
*Max Amor, MD*
- 1:12 – 1:17** > 1-Year Results With The C-Guard MicroNet Stent (InspireMD) For CAS: Good Results And No ISR Observed: Are There Downsides  
*Piotr Musialek, MD, DPhil*  
*Christian Wissgott, MD*  
*Francesco Speziale, MD*
- 1:18 – 1:23** Update On Status And Value Of The Scaffold Micromesh 2-Component Stent (Gore) For CAS: Unique Advantages And Results To Date  
*Claudio J. Schonholz, MD*  
*Peter A. Schneider, MD*
- 1:24 – 1:29** The Silk Road System For Transcervical Access With Reversal Of Flow To Perform CAS-TCAR: Results Of The ROADSTER Trial Demonstrate Safety And Efficacy Of The Enroute Version Of The System: Lessons Learned  
*Christopher J. Kwolek, MD*  
*Richard P. Cambria, MD*
- 1:30 – 1:35** Recent Modifications Of The TCAR System (Silk Road) And Status Of The ROADSTER 2 Trial To Evaluate Real World Usage And Value Of The FDA Approved Device For TCAR In Normal Risk And High Risk Carotid Stenosis Patients  
*Vikram S. Kashyap, MD*  
*Peter A. Schneider, MD*
- 1:36 – 1:41** All This Buzz About TCAR Is Unnecessary: Transfemoral Access With Filters Or Flow Cessation (MoMa) Is Still The Best Way To Perform CAS In Most Patients Needing The Procedure  
*Giancarlo Biamino, MD, PhD*
- 1:42 – 1:47** Technical Tips For Safe, Effective TCAR With The Enroute System (Silk Road): When Is The Procedure Contraindicated  
*Mahmoud B. Malas, MD, MHS*
- 1:48 – 1:53** Technical Modifications And Other Steps To Facilitate TCAR With The Enroute System (Silk Road) When The Carotid Bifurcation Is Low In The Neck And The Common Carotid Artery Is Short  
*Michael C. Stoner, MD*
- 1:54 – 2:00** Panel Discussion

SESSION 76 (Grand Ballroom East, 3rd Floor)

## CAROTID TOPICS RELATED TO TRIALS, TIMING OF CEA, CONTROVERSIES, DIFFERING RISKS

**Moderators:** *Jon S. Matsumura, MD*  
*Frank J. Veith, MD*

- 2:01 – 2:06** Update On The ACST 2 RCT Comparing CAS And CEA In Patients With Asymptomatic Carotid Stenosis: Will Improvements In CAS Invalidate The Results In The First 2500 Randomized Patients  
*Alison Halliday, MS*

- 2:07 – 2:12** Status Of The ECST 2 RCT Comparing Revascularization (CEA Or CAS) And Best Medical Treatment (BMT) To BMT Alone In Symptomatic And Asymptomatic Carotid Stenosis Patients: What Does It Tell Us To Date And What Will It Tell Us  
*Jonathan D. Beard, ChM, MEd*  
*Martin M. Brown, MD*  
*Leo H. Bonati, MD*
- 2:13 – 2:18** Status Of The CREST 2 Two Armed RCT: 1) CAS With BMT vs. BMT Alone; And 2) CEA With BMT vs. BMT Alone In Asymptomatic Patients With High-Grade (>70%) Carotid Stenosis: What Will It Tell Us And When  
*Brajesh K. Lal, MD*  
*Thomas G. Brott, MD*
- 2:19 – 2:24** Why CREST 2 May Have Little Value In Guiding Treatment Of Carotid Stenosis In Asymptomatic Patients: Especially If Results Are Negative  
*Anne L. Abbott, MD, PhD*
- 2:25 – 2:30** Why CREST 2 May Not Help Us Much With Treatment Decisions In Asymptomatic Carotid Stenosis Patients: But It Still May Be Bad For CAS  
*Mark H. Wholey, MD*
- 2:31 – 2:36** RCTs Comparing CEA And CAS In Symptomatic Patients Are Invalidated By The Delays Between Symptom Onset And Revascularization  
*Gert J. de Borst, MD, PhD*
- 2:37 – 2:43** Panel Discussion
- 2:44 – 2:49** What Valuable Information Has The CREST Trial Provided: What Are The Prospects That CREST 2 Will Be Helpful  
*Anthony J. Comerota, MD*
- 2:50 – 2:55** Single TIAs vs. Multiple Or Crescendo TIAs Are 2 Different Diseases Requiring Different Treatment Strategies: What Are These Strategies  
*Andrea Stella, MD*

#### TIMING OF CEA AFTER SYMPTOM ONSET

- 2:56 – 3:01** **DEBATE:** Best Medical Treatment With Antiplatelet Agents And Statins Decrease Recurrent Neurological Events After An Index Symptom Event With Carotid Stenosis: But It Does Not Change The Need To Perform Early CEA After Symptom Onset  
*Ross Naylor, MD*
- 3:02 – 3:07** **DEBATE:** CEA Should Be Delayed At Least 2 Weeks After The Index Symptom Event: Why And What Are The Exceptions  
*Martin Björck, MD, PhD*
- 3:08 – 3:13** Delayed vs. Early Intervention (CEA/CAS) In Patients With Carotid Stenosis And Recent Strokes: Patients Should Be Individualized: In What % Is The Stroke Not Due To The Carotid Lesion  
*Tommaso Donati, MD*
- 3:14 – 3:28** Panel Discussion And Break  
Visit Exhibits And Pavilions (2nd and 3rd Floors)

SESSION 77 (Grand Ballroom East, 3rd Floor)

#### UPDATES, NEW TECHNIQUES AND CONCEPTS

Moderators: *Evan C. Lipsitz, MD, MBA*  
*Glenn Jacobowitz, MD*

- 3:28 – 3:33** Reconstructive Endovascular Treatment Of Carotid Artery Blowout From Trauma Or Tumor: Techniques And Results  
*I-Hui Aaron Wu, MD, PhD*
- 3:34 – 3:39** Surgical Exposure Of The Distal Internal Carotid Artery: Technical Tips To Obtain Exposure To The Skull Base  
*R. Clement Darling III, MD*
- 3:40 – 3:45** How A Physician Can Modify A Blank ZFEN Device To Enable Urgent Treatment Of Complex Juxta And Pararenal Aneurysms: Requirements, Advantages, Results And Limitations  
*Joshua D. Adams, MD*
- 3:46 – 3:51** Simplified Technique For And 4-Year Results With In Situ Fenestration To Revascularize The Left Subclavian Artery With TEVARs  
*Björn Sonesson, MD, PhD*
- 3:52 – 3:57** Update On In Situ Laser Fenestration For TEVARs In Or Near The Aortic Arch: Technique, Pitfalls And Results  
*Jean M. Panneton, MD*
- 3:58 – 4:03** New Developments In The Treatment Of Lower Extremity Ischemia And Trauma In Infants, Children And Adolescents  
*Jonathan L. Eliason, MD*  
*Dawn M. Coleman, MD*  
*James C. Stanley, MD*
- 4:04 – 4:09** 2-Year Results With The Supera Stent (Abbott Vascular) In Non SFA-Pop Territories: Advantages And Limitations  
*Rajiv Parakh, MBBS, MS*
- 4:10 – 4:15** Transfemoral, Transcaval Liver Biopsy And Portal Pressure Measurement: Technique And Experience In > 100 Patients  
*Jacob Cynamon, MD*
- 4:16 – 4:21** Progress In Medical Treatments To Delay The Growth Of AAAs: Does Anything Work In Patients  
*Frank A. Lederle, MD*
- 4:22 – 4:27** Regional Differences In AAA Morphology And EVAR Outcomes Around The World  
*Tulio P. Navarro, MD, PhD*
- 4:28 – 4:34** Panel Discussion

SESSION 78 (Grand Ballroom East, 3rd Floor)

**NEW CONCEPTS; UPDATES IN WOUND CARE AND PERCUTANEOUS EVAR (PEVAR) (4 ½-MINUTE TALKS)**

**Moderators:** *William J. Quinones-Baldrich, MD*  
*Clifford M. Sales, MD, MBA*

- 4:35 – 4:40** Predicting Perioperative Myocardial Infarctions (MIs) With A Smart Phone VQI App  
*Jack L. Cronenwett, MD*

**NEW DEVELOPMENTS IN WOUND HEALING**

- 4:40 – 4:45** Insights On Failure To Heal Ischemic Wounds After Revascularization In CLTI Patients: What Can Predict It And What To Do About It  
*Robert B. McLafferty, MD*

- 4:45 – 4:50** Healing Can Be Achieved With Gangrenous Infected Heel Wounds Involving The Achilles Tendon And Part Of The Os Calcis (Calcaneus): Both Can Be Excised Without Disabling Walking Ability  
*Palma M. Shaw, MD*
- 4:50 – 4:55** Patients Can Walk Effectively After Excision Of A Necrotic Or Infected Achilles Tendon And Calcaneal Tuberosity  
*Wayne J. Caputo, DPM*
- 4:55 – 5:00** Optimal Treatment Of Wounds Due To Combined Venous And Arterial Disease: How Best To Achieve Healing  
*Katherine A. Gallagher, MD*
- 5:00 – 5:05** What Factors, Conditions And Treatments Can Enhance Tissue Regeneration In Ischemic Foot Wounds After Revascularization  
*Magdiel Trinidad Vasquez, MD*
- 5:05 – 5:10** Pedal Bypass vs. Endovascular Tibial Interventions: Which Is Better To Heal Ischemic Foot Wounds  
*Rabih A. Chaer, MD*
- 5:10 – 5:15** RCT Of Negative Pressure Wound Treatment vs. Standard Wound Care In Chronic Diabetic Foot Wounds  
*Martin Storck, MD, PhD*
- 5:15 – 5:20** Value And Cost Effectiveness Of Hyperbaric Oxygen In The Treatment Of Diabetic Ulcers: The DAMOCLES Trial  
*Katrien T.B. Santema, MD, PhD*
- 5:20 – 5:25** Panel Discussion

**PERCUTANEOUS TECHNIQUES FOR EVAR (PEVAR) AND TEVAR (PTEVAR)**

- 5:25 – 5:30** Update On Large Bore Sheath Closure Devices: What New Devices Are Coming And Will They Be Better: The MANTA Trial  
*Zvonimir Krajcer, MD*
- 5:30 – 5:35** PEVAR Is Cheaper And Safer Than Open Surgical Femoral Exposure: Why The Resistance And Can It Be Used In All Cases  
*Afshin Assadian, MD*
- 5:35 – 5:40** Endovascular Management Of Failed 2-Device PEVAR With A Third Device: Technical Tips (Video)  
*Ross Milner, MD*
- 5:40 – 5:45** How To Do A PEVAR Through A Surgical Graft To Or From The Femoral Artery: Technical Tips  
*Mario L. Lachat, MD*
- 5:45 – 5:50** How To Do PEVAR In 100% Of EVAR Patients: Technical Tips And Predictor Of Good Outcomes  
*Giovanni Pratesi, MD*
- 5:50 – 5:55** Percutaneous Axillary Artery Access For Fenestrated And Branched Thoracoabdominal Endovascular Repair  
*Germano Melissano, MD*  
*Roberto Chiesa, MD*
- 5:55 – 6:00** Panel Discussion  
**End of Program K**

PROGRAM L (SESSIONS 79-87)  
NEW DEVELOPMENTS IN POPLITEAL ANEURYSMS AND DISEASE; MANAGEMENT OF INFECTED ARTERIES, PROSTHETIC GRAFTS AND ENDOGRAFTS; ADVANCES IN IMAGING, GUIDANCE, HYBRID SUITES, THORACIC OUTLET SYNDROMES, MEDICAL DISEASES AND TREATMENT, VASCULAR TRAUMA TREATMENT AND RADIATION SAFETY

Grand Ballroom West, 3rd Floor

SESSION 79 (Grand Ballroom West, 3rd Floor)

NEW DEVELOPMENTS IN POPLITEAL ENTRAPMENTS, ANEURYSMS AND OCCLUSIVE LESIONS AND THEIR TREATMENT

*Moderators: Peter Gloviczki, MD  
Cynthia K. Shortell, MD*

#### **ENTRAPMENT SYNDROMES**

**6:40 – 6:45** New Developments In Popliteal Entrapment Syndromes And Their Treatment  
*Niten Singh, MD*

#### **POPLITEAL ANEURYSMS**

**6:46 – 6:51** Endograft Or Bypass For Popliteal Aneurysms: Which Is Best And When  
*Fred A. Weaver, MD*

**6:52 – 6:57** When And How Can Endografts Be Used To Treat Thrombosed Popliteal Aneurysms: Technical Tips  
*Giovanni Pratesi, MD*

**6:58 – 7:03** **DEBATE:** Is Endovascular Repair Of Popliteal Aneurysms A Failed Experiment: Technical Tips For Open Repair And When Is It Clearly Better Than Endo Repairs  
*Martin Björck, MD, PhD*

**7:04 – 7:09** **DEBATE:** Not So: An Endovascular Approach Is Better In Most Cases  
*Eric L.G. Verhoeven, MD, PhD  
Athanasios Katsargyris, MD*

#### **POPLITEAL OCCLUSIVE DISEASE**

**7:10 – 7:15** Value Of In.Pact DCBs For The Treatment Of Popliteal Lesions: From The FLEXION Trial  
*Patrick Peeters, MD  
Marc Bosiers, MD*

**7:16 – 7:21** Have Improved Stents (Supera [Abbott] And Tigris [Gore]) Changed The Outlook For Treatment Of Complex Popliteal Occlusive Lesions  
*Maxime M.S. Sibe, MD*

**7:22 – 7:27** Panel Discussion

SESSION 80 (Grand Ballroom West, 3rd Floor)

NEW DEVELOPMENTS IN THE TREATMENT OF INFECTED ANEURYSMS, PROSTHETIC ARTERIAL GRAFTS AND AORTIC ENDOGRAFTS

*Moderators: Keith D. Calligaro, MD  
Thomas C. Bower, MD*



## MYCOTIC ANEURYSMS

- 7:28 – 7:33** With Mycotic AAAs There Has Been A Paradigm Shift In Treatment: A Propensity Matched Multicenter Study Shows That EVAR Is Better Than Open Repair As A Durable Or Bridge Treatment  
*Anders Wanhainen, MD, PhD*  
*Martin Björck, MD, PhD*
- 7:34 – 7:39** Intraabdominal Extra-Anatomic Bypass For Para- Or Supra-Renal Aortic Infections: Techniques And Results  
*Manju Kalra, MBBS*
- 7:40 – 7:45** Role Of EVAR For Mycotic AAAs: How Does The Bacteriology Matter  
*Fred A. Weaver, MD*
- 7:46 – 7:51** **DEBATE:** EVAR Should Be The First Choice In Treating Mycotic AAAs: Based On A 10-Year Experience  
*Boonprasit Kritpracha, MD*
- 7:52 – 7:57** **DEBATE:** Not So: Why Open Repair Should Be The First Choice In Treating Most Mycotic AAAs  
*Thomas C. Bower, MD*
- 7:58 – 8:03** Technical Tips For Facilitating Deep Vein Grafts For Aortoiliac Arterial And Graft Infections: The NAIS Procedure  
*James H. Black III, MD*
- 8:04 – 8:09** Panel Discussion

**Moderators:** *Martin Malina, MD, PhD*  
*Thomas S. Riles, MD*

## ARTERIAL GRAFT AND ENDOGRAFT INFECTIONS

- 8:10 – 8:15** In Situ Repair Of Infected Prosthetic Arterial Grafts: New Techniques And Possibilities In The Era Of Negative Pressure Wound Therapy (NPWT)  
*Max Zegelman, MD*
- 8:16 – 8:21** Diagnosis And Treatment Of Infected Endografts After EVAR: Is Graft Excision Mandatory  
*Jean-Baptiste Ricco, MD, PhD*
- 8:22 – 8:27** **DEBATE:** Definitive Excisional Graft Removal Is A Must For All Infected Aortic Grafts And Endografts  
*Colin D. Bicknell, MD*
- 8:28 – 8:33** **DEBATE:** Not So: More Conservative Graft Saving May Sometimes Be The Best Treatment For Infected Aortic Grafts And Endografts If Certain Technical Steps And Adjuncts Are Used  
*Keith D. Calligaro, MD*
- 8:34 – 8:39** How To Treat Infected Endografts After EVAR And When Are Endografts Effective Treatment For Mycotic AAAs  
*Kamphol Laohapensang, MD*
- 8:40 – 8:45** Update On Advances In The Treatment Of Infections Of The Native Aorta And TEVAR Endografts  
*Germano Melissano, MD*  
*Roberto Chiesa, MD*
- 8:46 – 8:51** Aortic Endograft Infection Is A New Epidemic: What Are The Best Treatment Options  
*Peter F. Lawrence, MD*
- 8:52 – 8:57** How Can 18F-FDB PET/CT Help In The Management Of Patients With Possible Infected Endografts After EVAR And TEVAR  
*Natzi Sakalihasan, MD, PhD*

**8:58 – 9:03** Panel Discussion

SESSION 81 (Grand Ballroom West, 3rd Floor)

**ADVANCES IN IMAGING, GUIDANCE SYSTEMS,  
HYBRID SUITES AND FLUOROSCOPY EQUIPMENT**

**Moderators:** *Stephan Haulon, MD*

*Matthew J. Eagleton, MD*

**9:04 – 9:09** Progress In Imaging For Vascular And Endovascular Surgery: What Other Advances Are On The Horizon  
*Alan B. Lumsden, MD*

**9:10 – 9:15** New Dynamic Imaging Technology And Techniques To Help In The Management Of Thoracic Aortic Disease  
*Rachel E. Clough, MD, PhD*  
*Christoph A. Nienaber, MD, PhD*

**9:16 – 9:21** Advantages Of Biplane Imaging Plus Fusion (Siemens Zee System) For Complex AAA And Thoracic Aneurysm Repairs: How Does It Decrease X-ray Exposure And Contrast Use  
*Burkhardt Zipfel, MD, PhD*

**9:22 – 9:27** The CYDAR 3D Fusion System For Cloud Based Imaging: It Can Work With Any Portable C-Arm Digital Fluoroscope: Availability In The US, Advantages And Limitations  
*Cynthia K. Shortell, MD*

**9:28 – 9:33** The Philips Allura Xper FD20 Imaging System Halves The Radiation Dose During EVAR And Lower Extremity Endovascular Procedures  
*Maria Antonella Ruffino, MD*

**9:34 – 9:39** Modern Non-Contrast MRA: One Stop Complete Anatomic And Hemodynamic Evaluation Of All Lower Extremity Arteries: Advantages And Limitations  
*Konstantinos Katsanos, MSc, MD, PhD*

**9:40 – 9:45** How The Vessel Navigator System (Philips) Can Facilitate TEVAR And EVAR Procedures: And How It Can Reduce Radiation Exposure For Patients And Operators  
*Jan S. Brunkwall, MD, PhD*

**9:46 – 9:52** Panel Discussion

**9:52 – 10:06** Break – Visit Exhibits And Pavilions (2nd and 3rd Floors)

SESSION 82 (Grand Ballroom West, 3rd Floor)

**ADDITIONAL LOWER EXTREMITY, MEDICAL AND OTHER TOPICS**

**Moderators:** *Enrico Ascher, MD*

*Rabih A. Chaer, MD*

**10:06 – 10:11** Duplex Ultrasound As An Imaging Modality To Replace Angiography And Fluoroscopy In EVAR And Lower Extremity Interventions: Advantages And Limitations  
*Attila G. Krasznai, MD*

**10:12 – 10:17** Tibial Artery Duplex Derived Peak Systolic Velocities To Evaluate The Effectiveness Of Endovascular Treatments  
*Gregory L. Moneta, MD*

**10:18 – 10:23** Viabahn (Gore) Stent-Grafts For Long Complex SFA Lesions: When And Why Are They Better Than Other Emerging Endovascular Treatments  
*Thomas Zeller, MD*

**10:24 – 10:29** When Is A Distal Embolic Filter Required During Lower Extremity Procedures: Equipment Needed And How To Do It  
*Marcelo Guimaraes, MD*

**MEDICAL AND OTHER HOT TOPICS**

**10:30 – 10:35** Current Status Of Perioperative Beta Blockade In Vascular Surgery Patients: When Is It Beneficial, When Harmful: Optimal Dosing  
*Salvatore T. Scali, MD*

**10:36 – 10:41** There Is No Evidence That Dual Antiplatelet Treatment Is Beneficial After Lower Extremity Interventions Or Operations: What Drug Should Be Given And When  
*Gert J. de Borst, MD, PhD*

**10:42 – 10:47** Is Statin Intolerance In Patients Always Real: How To Confirm It And How Best To Manage It When Patients Need Statins  
*Don Poldermans, MD*

**10:48 – 10:53** Computational Fluid Dynamic Studies To Predict Aneurysm Formation After TBADs Treated With TEVAR  
*Benjamin M. Jackson, MD*

**10:54 – 11:01** Panel Discussion

SESSION 83 (Grand Ballroom West, 3rd Floor)

**NEW DEVELOPMENTS IN THORACIC OUTLET SYNDROMES (TOSs) AND THEIR TREATMENT**

**Moderators:** *Robert W. Thompson, MD*  
*Mark A. Adelman, MD*

**11:02 – 11:07** New Developments In The Management Of Thoracic Outlet Syndromes (TOSs): Neurogenic, Venous And Arterial  
*Karl A. Illig, MD*

**11:08 – 11:13** Robotic First Rib Resection For TOSs: Advantages And How To Do It  
*Hans M.E. Coveliers, MD, PhD, MBA*

**11:14 – 11:19** Differing Presentations Of Arterial TOS: Optimal Approach To Treatment  
*Enrique Criado, MD*

**11:20 – 11:25** Treatment Strategies, Approaches, Technical Tips And Outcomes With Subclavian Artery Aneurysms  
*Robyn A. Macsata, MD*

**11:26 – 11:31** **DEBATE:** Why Is Transaxillary First Rib Resection The Preferred Approach For Venous TOS: Rarely Does The Subclavian Vein Need To Be Reconstructed  
*Benjamin M. Jackson, MD*

**11:32 – 11:37** **DEBATE:** Not So: Advantages And Limitations Of The Supraclavicular And Infraclavicular Approaches For Venous TOS: Which Approach And When But Never Transaxillary  
*Robert W. Thompson, MD*

**11:38 – 11:43** The Value Of The Infraclavicular Approach For Venous TOS: Technical Tips  
*Joseph J. Ricotta II, MD, MS*

**11:44 – 11:49** New Developments In The Treatment Of Venous TOS: When Is Stenting Helpful: Diagnosis And Treatment Of Compression By The Pectoralis Minor  
*Michael J. Singh, MD*

11:50 – 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)

## NEW DEVELOPMENTS IN THE MANAGEMENT OF VASCULAR TRAUMA AND TAKAYASU'S DISEASE

**Moderators:** *Todd E. Rasmussen, MD*  
*Benjamin W. Starnes, MD*

1:00 – 1:05 Tips And Tricks For Gaining Arterial Access In  
Unstable Hypotensive Trauma Patients  
*Martin Malina, MD, PhD*

1:06 – 1:11 New Developments In Resuscitative Endovascular  
Balloon Occlusion Of The Aorta (REBOA): Improved  
Technology (Smaller Profile Balloon): How Can  
REBOA Be Done Reliably Without Imaging: Value Of  
Partial Aortic Control  
*Tal M. Hörer, MD, PhD*  
*Joseph J. DuBose, MD*  
*Todd E. Rasmussen, MD*

1:12 – 1:17 Advances In REBOA Around The World: Should  
Unskilled Personnel Be Trained To Do It Without  
Imaging And How: What Is Its Role In The Military  
*Todd E. Rasmussen, MD*

1:18 – 1:23 What Can Go Wrong When Unskilled Personnel  
Perform REBOA: Such Usage Should Be Approached  
With Caution: Is There A Solution  
*Charles J. Fox, MD*

1:24 – 1:29 Can Arterial Access And REBOA Be Automated To  
Facilitate Usage By Unskilled Or Less Skilled  
Personnel: Concept And Device Description  
*Rajabrata Sarkar, MD, PhD*

1:30 – 1:35 New Findings From The Aortic Trauma Foundation  
(An International Registry) On Blunt Traumatic Aortic  
Injury (BTAI)  
*Joseph J. DuBose, MD*

1:36 – 1:41 **DEBATE:** Non-Operative, Non-Interventional  
Management Of Grade III BTAI (Aortic  
Pseudoaneurysm) Is Appropriate In Selected Patients:  
TEVAR Has No Better Results  
*John F. Eidt, MD*

1:42 – 1:47 **DEBATE:** Not So: TEVAR Is Indicated In All Patients  
With Grade III BTAIs And Some With Grade II BTAIs:  
How Durable Is TEVAR For These Indications  
*Ali Azizzadeh, MD*

1:48 – 1:53 Delayed TEVAR Is The Best Treatment For Some  
BTAIs - Even Some With Grade III: Why Is This So  
*Robert S. Crawford, MD*

1:54 – 1:59 With Takayasu's Disease When Is Interventional  
Treatment Indicated, Justified And Predictive Of A  
Good Outcome  
*Zoubida Tazi Mezalek, MD*

2:00 – 2:06 Panel Discussion

SESSION 85 (Grand Ballroom West, 3rd Floor)

**PROGRESS IN THE MEDICAL TREATMENTS OF VASCULAR DISEASE; VASCULAR DISEASES AND RISK PREDICTION**

**Moderators:** *Bruce A. Perler, MD, MBA*  
*Caron B. Rockman, MD*

- 2:07 – 2:12** Why ACE Inhibitors And Angiotension Receptor Blockers Should Be Stopped 24 Hours Before Vascular Surgery And What Is Optimal Antiplatelet Drug Therapy In Vascular Patients: Based On The EUCLID Trial  
*Caron B. Rockman, MD*  
*Jeffrey S. Berger, MD, MS*
- 2:13 – 2:18** Cilostazol Improves Outcomes After Lower Extremity Endo And Open Procedures: When And How Should It Be Used  
*Anthony J. Comerota, MD*
- 2:19 – 2:24** New Developments In Troponin Testing: What Is Its Value As A Risk Predictor In Patients Undergoing Endo And Open Vascular Procedures: Value Of New High Sensitivity Troponin Assay  
*Jeffrey S. Berger, MD, MS*  
*Caron B. Rockman, MD*
- 2:25 – 2:30** Which Patients Should Receive Primary Prevention Lipid Lowering Statin Therapy: What Drug And Dose: How Do The HOPE 3 Trial Findings Help  
*Roxana Mehran, MD*
- 2:31 – 2:36** How Do PCSK-9 Inhibitors Work: When And How Should They Currently Be Used: Advantages And Limitations  
*Natalie A. Marks, MD, RPVI, RVT*
- 2:37 – 2:42** Importance Of Tight Glucose Control To Minimize Neurological Complications Of Branched Endografts For TAAAs And TEVAR  
*Jade S. Hiramoto, MD*
- 2:43 – 2:48** Smoking Cessation In Vascular Surgery Patients: How Well Do Drugs And Interventions Work And How To Make Them Work Better: From The VAPOR Trial  
*Philip P. Goodney, MD, MS*
- 2:49 – 2:54** New Biomarkers (Advanced Glycation End Product) To Identify High Risk Vascular Patients Who Need Intensified Lipid Lowering Treatment  
*Clark J. Zebregs, MD, PhD*
- 2:55 – 3:00** Segmental Arterial Mediolytic: What Is It: How To Diagnose And Treat It  
*Samuel R. Money, MD, MBA*
- 3:01 – 3:06** 8 Markers Or Indicators To Make One Look For Asymptomatic Thoracic Aneurysm Disease  
*John A. Eleftheriades, MD*
- 3:07 – 3:12** Does Raising HDL-Cholesterol (HDL-C) Levels Help To Prevent Cardiovascular Events In High Risk Patients: New Results From Recent HDL-Raising Trials  
*Richard Bulbulia, MA, MD*
- 3:13 – 3:25** Panel Discussion And Break  
Visit Exhibits And Pavilions (2nd and 3rd Floors)

SESSION 86 (Grand Ballroom West, 3rd Floor)

**INTERESTING TOPICS RELATED TO RADIATION SAFETY, AORTIC OR LOWER EXTREMITY DISEASE**

**Moderators:** *Nicholas J.W. Cheshire, MD*  
*Lars B. Lönn, MD, PhD*

- 3:25 – 3:30** How To Achieve Optimal Imaging And Reduce Radiation Exposure In A Hybrid Operating Room  
*Stephan Haulon, MD*
- 3:31 – 3:36** How Operator Behavior During EVAR Can Minimize Radiation Exposure: When And Why Does Most Unnecessary Exposure Occur  
*Bijan Modarai, PhD*
- 3:37 – 3:42** Real Time Measurement Of Radiation Dose To Endovascular Operators: New Devices And Their Value  
*Celia Riga, BSc, MBBS, MD*

**AORTA RELATED TOPICS**

- 3:43 – 3:48** Inflammatory Responses To EVAR And How To Minimize Them: What Is The Benefit  
*Edmo A. Gabriel, MD, PhD*
- 3:49 – 3:54** Declining World Incidence Of AAAs, AAA Rupture And AAA Mortality Is Mainly Related To A Decline In Smoking  
*Frank A. Lederle, MD*
- 3:55 – 4:00** How To Avoid Limb Ischemia During Prolonged Sheath Insertion For Complex Aneurysm Repairs  
*Thomas Larzon, MD, PhD*

**LOWER EXTREMITY RELATED TOPICS**

- 4:01 – 4:06** Prevention And Treatment Of Complications During Endovascular Treatment Of Complex High Risk Lower Extremity Lesions  
*Andrew Holden, MBChB*
- 4:07 – 4:12** Paseo-18 Lux DCBs; The Latest 1-Year Results In CLI Patients  
*Thomas Zeller, MD*  
*Marianne Brodmann, MD*
- 4:13 – 4:18** Value Of Frailty Assessment In Vascular Surgical Patients: What Can Be Done To Decrease Morbidity And Mortality In Frail Patients  
*Anton N. Sidawy, MD, MPH*
- 4:19 – 4:25** Panel Discussion

SESSION 87 (Grand Ballroom West, 3rd Floor)

**RECORDED LIVE CASES OF COMPLEX ENDOVASCULAR AORTIC ANEURYSM TREATMENT FROM MÜNSTER AND THE MAYO CLINIC**

**Moderators:** *Giovanni Torsello, MD*  
*Martin J. Austermann, MD*

- 4:25 – 4:55** Complex Cases From Münster With Questions And Discussion  
*Martin J. Austermann, MD*  
*Giovanni Torsello, MD*
- 4:55 – 5:25** Complex Cases From The Mayo Clinic With Questions And Discussion  
*Gustavo S. Oderich, MD*

**End of Program I**

PROGRAM M (SESSIONS 88-92)

DEEP VEIN DISEASE

Location: 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 VEIN DISORDERS

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

- 7:55 – 7:58 Introduction: Deep System  
*Lowell S. Kabnick, MD, RPhS*
- 7:59 – 8:04 Reasons New Nomenclature Is Needed For Pelvic Venous Disorders  
*Mark H. Meissner, MD*
- 8:05 – 8:10 Building Your Pelvic Congestion Practice: Educating The Community And Using Large Volume Coils For Efficient Embolizations  
*Joseph J. Ricotta II, MD, MS*
- 8:11 – 8:16 Venographic Techniques To Identify Pelvic Anatomy And Escape Points  
*Mark H. Meissner, MD*
- 8:17 – 8:22 Approaches To Pelvic Venous Congestion: Evidence Based  
*Melvin Rosenblatt, MD*
- 8:23 – 8:28 Ovarian Vein Incompetence Or Renal Vein Compression  
*Jose I. Almeida, MD, RPVI, RVT*
- 8:29 – 8:34 Acute Or Chronic Ovarian Vein Thrombosis: What To Do  
*Mikel Sadek, MD*
- 8:35 – 8:40 **DEBATE:** Renal Vein Transposition (With Patch) Is The Ideal Treatment For Nutcracker Syndrome, Not Stenting  
*Olivier Hartung, MD*
- 8:41 – 8:46 **DEBATE:** Gonadal Vein Transposition Is The Ideal Treatment For Nutcracker Syndrome  
*Cynthia K. Shortell, MD*
- 8:47 – 8:52 **DEBATE:** Stenting Is The Ideal Treatment For Nutcracker Syndrome  
*Thomas S. Maldonado, MD*
- 8:53 – 8:58 **DEBATE:** Hybrid Endo-Open Surgery Is The Ideal Treatment For Nutcracker Syndrome  
*Manju Kalra, MBBS*
- 8:59 – 9:04 Panel Discussion

SESSION 89 (Trianon Ballroom, 3rd Floor)

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

Moderators: Anthony J. Comerota, MD  
*Paul J. Gagne, MD*

- 9:05 – 9:10 Exactly What Is The Tissue Causing Post-Thrombotic Venous Obstruction  
*Anthony J. Comerota, MD*

- 9:11 – 9:16** Contralateral Limb Improvement After Venous Stenting Suggests A Limited Need For Initial Bilateral Stenting  
*Erin H. Murphy, MD*
- 9:17 – 9:22** Hyperdilatation As A Reinterventional Technique  
*Seshadri Raju, MD*
- 9:23 – 9:28** Endovenectomy And Iliac Vein Stent Placement - How I Do It (Video Technique Demonstration)  
*Ramesh K. Tripathi, MD*
- 9:29 – 9:34** Surgical Reconstruction Of Deep Veins: Do I Do It To Improve Inflow Of Obstructive Disease Or To Control Reflux  
*Stephen A. Black, MD*

**Moderators:** *Anthony J. Comerota, MD*  
*Paul Gagne, MD*  
*Christopher Cheng, PhD*

### **STENTS AND STENT TRIALS**

- 9:35 – 9:40** Veins Are Not Round: Diagnostic And Stenting Implications Of Elliptical Structures  
*Erin H. Murphy, MD*
- 9:41 – 9:46** Patency Rates And Clinical Results Of The Veniti VICI Stent For The Treatment Of Iliac Vein Lesion  
*Michael K. W. Lichtenberg, MD*
- 9:47 – 9:52** Abre: Stent And Trial Design  
*Erin H. Murphy, MD*
- 9:53 – 9:58** Patency Rates And Clinical Results Of The Venovo Venous Stent In Complicated Cases  
*Michael K. W. Lichtenberg, MD*
- 9:59 – 10:04** Does Stent Lumen Shape Matter: A Look At The VIRTUS Feasibility Study Examines Measurement Methods Of Area vs. Diameter For Impact On Clinical Outcomes  
*Lowell S. Kabnick, MD, RPhS*
- 10:05 – 10:10** Panel Discussion

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

### **OFF-LABEL STENT USE**

- 10:11 – 10:16** Z-Stent Extension Into The Cava: Less Contra-Iliac Thrombosis: Short Term Data  
*Seshadri Raju, MD*
- 10:17 – 10:22** Crossing Femoro-Iliocaval Chronic Total Occlusions: From Soft Wires To Sharp Harpoons  
*Jose I. Almeida, MD, RPVI, RVT*
- 10:23 – 10:28** Confluence Stenting, Technical Considerations  
*Rick De Graaf, MD, PhD*
- 10:29 – 10:34** Femoral Vein Stenting Lessons Learned  
*Jose I. Almeida, MD, RPVI, RVT*
- 10:35 – 10:40** Recurrent Obstruction After Hybrid Deep Venous Interventions, Single Inflow Vein Stenting  
*Rick De Graaf, MD, PhD*
- 10:41 – 10:46** 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:** *Lowell S. Kabnick, MD, RPhS*  
*Stephen A. Black, MD*

**10:47 – 10:52** Improved Deep Venous Flow Using The Geko System In Patients With A Deep Venous Obstruction  
*Cees H.A. Wittens, MD, PhD*

**10:53 – 10:58** Why Are So Many Venous Stents Deployed For Swollen Legs  
*Lowell S. Kabnick, MD, RPhS*

**10:59 – 11:04** Venous Nitinol Series With Data Subset Of Stents Placed Under The Inguinal Ligament  
*Stephen A. Black, MD*

**11:05 – 11:10** When Venous Stents Are Not Enough  
*Marzia Lugli, MD*

**11:11 – 11:16** Panel Discussion

**Moderators:** *Peter F. Lawrence, MD*  
*William A. Marston, MD*

### WOUNDS AND NEW HORIZONS

**11:17 – 11:22** Venous Ulcers - An Algorithm For Treating Deep And Superficial Venous Occlusion And Incompetence - Study Completed  
*Peter F. Lawrence, MD*

**11:23 – 11:28** What Do We Know About The Pathophysiology Of Venous Ulcers  
*Peter J. Pappas, MD*

**11:29 – 11:34** Different Biochemical Profiles In Inflammatory And Granulating Wounds  
*Joseph D. Raffetto, MD*

**11:35 – 11:40** Important RCTs For Venous Wound Healing  
*William A. Marston, MD*

**11:41 – 11:46** Surgical Intervention On Venous Ulcer Based On Cost-Effectiveness: Is It Different Than C2  
*Thomas F. O'Donnell, Jr., MD*

**11:47 – 11:52** Proteomics And Degradomics In Venous Leg Ulcers  
*Joseph D. Raffetto, MD*

**11:53 – 11:58** Not All Leg Ulcers Are Venous  
*Raghu Kolluri, MD*

**11:59 – 12:04** Panel Discussion

**12:05 – 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:** *Thomas W. Wakefield, MD*  
*Joann Lohr, MD*

### VTE MEDICAL

**1:00 – 1:05** Are There Still Any Valid Indications For Thrombophilia Screening In DVT  
*Joann Lohr, MD*

- 1:06 – 1:11** Update On The Latest RCTs For Calf Vein Thrombosis  
*Elna M. Masuda, MD*
- 1:12 – 1:17** Anti-Selectin Therapy For Treatment Of DVT: First Clinical Treatment  
*Thomas W. Wakefield, MD*
- 1:18 – 1:23** Update On Reversal Agents For The DOACs  
*Timothy K. Liem, MD, MBA*
- 1:24 – 1:29** How Should We Manage Extrinsic Compression, Venous Aneurysms And Other Incidental Venous Anomalies  
*Manj S. Gohel, MD*
- 1:30 – 1:35** Biomarkers Of Venous Thromboembolism: Do They Have A Current Role  
*Peter Henke, MD*
- 1:36 – 1:41** Experimental Insights In Acute DVT And Post-Thrombotic Syndrome  
*Peter Henke, MD*
- 1:42 – 1:48** Compression To Prevent PTS - The Evidence Is Flimsy  
*Alun H. Davies, MA, DM, DSc*
- 1:49 – 1:54** Panel Discussion

**Moderators:** *Mikel Sadek, MD*  
*Mark J. Garcia, MD*

#### **VTE INTERVENTIONAL**

- 1:55 – 2:00** Use Of Indigo Device For All Acute DVT Including Occluded IVC Filters  
*Patrick E. Muck, MD*
- 2:01 – 2:06** Novel Up And Over Approach For Managing Acute Extensive Thrombosis From The Tibials To The Common Iliac Veins  
*Enrico Ascher, MD*
- 2:07 – 2:12** Thrombolysis For Acute DVT: Utilization And Guidance From Current Clinical Trials  
*Brian G. DeRubertis, MD*
- 2:13 – 2:18** More Thrombus Removal Can Lead To Better Outcomes - My DVT Patient Selection Criteria, And Techniques  
*Michael K. W. Lichtenberg, MD*
- 2:19 – 2:24** Ultrasound-Accelerated Thrombolysis For Chronic DVT: The ACCESS Trial  
*Mark J. Garcia, MD*
- 2:25 – 2:30** Treatment Of Complex Central Venous Occlusions: Tips And Tricks To Improve Outcomes And Reduce Complications  
*Marcelo Guimaraes, MD*
- 2:31 – 2:36** Angiovac Venous Thrombectomy: Where, When, And How  
*Mikel Sadek, MD*
- 2:37 – 2:42** Endovascular Thrombus Removal In Patients With Paget-Schroetter Syndrome -Use Of The Indigo System  
*Thomas S. Maldonado, MD*
- 2:43 – 2:48** Venous Issues in Thoracic Outlet Syndrome: Lysis, Venoplasty, First Rib Resection: Staged Or Same Setting  
*Enrique Criado, MD*
- 2:49 – 2:54** Interventional Treatment Of Iliofemoral And Caval DVT In The Office Based Lab  
*Jeffrey Y. Wang, MD*

- 2:55 – 3:00** Evolution Of Venous In-Stent Stenosis: Do Anti-Platelet Agents Help Mitigate  
*David M. Williams, MD*
- 3:01 – 3:06** Treating Venous Thromboembolism Without Lytic Medications  
*Constantino Pena, MD*
- 3:07 – 3:12** 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:** *Jose I. Almeida, MD, RPVI, RVT*  
*Seshadri Raju, MD*

- 3:13 – 3:18** How Does Compliance Affect Peripheral Venous Pressure  
*Seshadri Raju, MD*
- 3:19 – 3:24** QALY Gain After Deep Venous Reconstructions: A Four-Year Follow-Up  
*Cees H.A. Wittens, MD, PhD*
- 3:25 – 3:30** How Important Is Rapid Flow Restoration In DVT  
*Robert A. Lookstein, MD, MHCDDL*
- 3:31 – 3:36** Thrombosed IVC Filter: How To Recanalize The Cava And Manage The Filter  
*Jose I. Almeida, MD, RPVI, RVT*
- 3:37 – 3:42** Long-Term Patency Of Primary Inferior Vena Cava Reconstructions  
*Mark K. Eskandari, MD*
- 3:43 – 3:48** IVC Replacement For Malignancy: How I Do It  
*R. Clement Darling III, MD*
- 3:49 – 3:54** 15-Year Experience With Renal Cell Carcinoma Caval Tumor Thrombus  
*Mark K. Eskandari, MD*
- 3:55 – 4:00** Panel Discussion

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

**CAVAL INTERRUPTION**

- 4:01 – 4:06** Update On The PRESERVE Vena Cava Filter Study  
*David L. Gillespie, MD*
- 4:07 – 4:12** Indications For IVC Filters – Are They Being Observed  
*John E. Rectenwald, MD, MS*
- 4:13 – 4:18** Surveillance, Anticoagulation, Or Filter In Calf Vein Thrombosis  
*Heron E. Rodriguez, MD*
- 4:19 – 4:24** The PREPIC Trial – Fact Or Fiction  
*John E. Rectenwald, MD, MS*
- 4:25 – 4:30** Why Temporary Filters Are Not Removed: Clinical Predictors In 1,000 Consecutive Cases  
*Heron E. Rodriguez, MD*
- 4:31 – 4:36** Inferior Vena Cava Filters For Prevention Of Venous Thromboembolism In Obese Patients Undergoing Bariatric Surgery – What Is The Evidence  
*Alun H. Davies, MA, DM, DSc*

- 4:37 – 4:42** The NOVATE SENTRY Trial With A Novel Bio-Convertible IVC Filter: 130 Patients Enrolled With CTV Follow-Up At 1-Year  
*Michael D. Dake, MD*  
*David Rosenthal, MD*
- 4:43 – 4:48** Major Complications After IVC Filter Placement And How To Avoid Them  
*Clifford M. Sales, MD, MBA*
- 4:49 – 4:54** Difficult Caval Filter Retrieval: Tips And Tools  
*Brian G. DeRubertis, MD*
- 4:55 – 5:00** What To Do With Fractured Filters And Embolic Filter Fragments  
*Constantino Pena, MD*
- 5:01 – 5:06** Panel Discussion  
**End of Program M**

## SATURDAY, NOVEMBER 18, 2017

- 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 N: SESSIONS 93-100

**New Developments And Hot Topics In The Treatment Of Lower Extremity, Carotid And Aortic Disease; Vascular Trauma And Key Miscellaneous Hot Topics**

6:50 A.M. – 4:25 P.M.

Grand Ballroom East, 3rd Floor

#### PROGRAM O: SESSIONS 101-105

**New Developments In Vascular Access For Hemodialysis**

7:55 A.M. – 4:25 P.M.

Grand Ballroom West, 3rd Floor

**Course Leaders:** *Larry A. Scher, MD*

*Anton N. Sidawy, MD, MPH*

#### PROGRAM P: SESSIONS 106-109

**More Hot Venous Disease Topics**

8:00 A.M. – 12:25 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 N (SESSIONS 93-100)

**NEW DEVELOPMENTS AND HOT TOPICS IN THE TREATMENT OF LOWER EXTREMITY, CAROTID AND AORTIC DISEASE; VASCULAR TRAUMA AND KEY MISCELLANEOUS HOT TOPICS**

Grand Ballroom East, 3rd Floor

#### SESSION 93

**LOWER EXTREMITY NEW DEVELOPMENTS AND FAST PACED HOT TOPICS (4 ½-MINUTE TALKS)**

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

*Frank J. Veith, MD*

- 6:50 – 6:55** Real World Results In The First 1000 US Patients Treated With The Lutonix (Bard) DCB  
*Edward Y. Woo, MD*

- 6:55 – 7:00** 1-Year Results With The B-Laser Mechanical Atherectomy System For Lower Extremity Lesions: Why Is It Different  
*John R. Laird, MD*
- 7:00 – 7:05** 2-Year Japanese Results Of The Heparin Bonded Viabahn (Gore) Graft: Indications And How To Make It More Effective  
*Hiroyoshi Yokoi, MD*
- 7:05 – 7:10** Complex BTK Revascularization For Limb Salvage Is Worthwhile In Patients > 80 And > 90: Endovascular vs. Bypass – Which Is Better And When  
*Hosam F. El Sayed, MD*
- 7:10 – 7:15** Role Of Tibial Bypass In The Era Of Tibial And Pedal PTA  
*Ramesh K. Tripathi, MD*
- 7:15 – 7:20** High Intensity Usage Of Statins Periop And Periprocedurally Decreases Amputation And Death Rates In CTLI Patients: What Dosage And When  
*Caron B. Rockman, MD*  
*Jeffrey S. Berger, MD, MS*
- 7:20 – 7:25** Dorsalis Pedis Artery Entrapment – What Is It: Role In CLTI; How To Diagnose And Treat It  
*Roberto Ferraresi, MD*
- 7:25 – 7:30** Panel Discussion
- 7:30 – 7:35** Knowns And Unknowns In The Endovascular Treatment Of Lower Extremity Ischemia  
*Mehdi H. Shishehbor, DO, MPH, PhD*
- 7:35 – 7:40** Diabetes Does Not Worsen The Outcomes Of BTK Bypasses Or Endo Interventions For CLTI: But The Cost Of Readmissions For Diabetic Foot Wounds Is High  
*Christopher J. Abularrage, MD*
- 7:40 – 7:45** Delay In Treatment And Overuse Of Endovascular Techniques Leads To Disaster With Ischemic Diabetic Foot Ulcers And Gangrene: Open Bypasses Have Better Wound Healing And Limb Salvage Outcomes  
*Katariina M. Noronen, MD, PhD*
- 7:45 – 7:50** Close Follow-Up After Endo Revascularizations For CLTI With Gangrene And Ulceration Is Essential: Duplex Ultrasound Is Best: How To Do It  
*Francesco Liistro, MD*
- 7:50 – 7:55** **DEBATE:** Multivessel Revascularization For Infrapopliteal Disease Causing CLTI Yields Better Outcomes Than Single Artery Revascularization  
*Craig M. Walker, MD*
- 7:55 – 8:00** **DEBATE:** Not So: Multiple Artery Revascularization For CLTI From Infrapopliteal Disease Is No Better Than Single Artery Revascularization: The Data Prove It  
*Marc L. Schermerhorn, MD*
- 8:00 – 8:05** Poor Pedal Run-Off Does Not Matter In Limb Salvage Situations: Salvage Is Almost Always Possible  
*Mark G. Davies, MD*
- 8:05 – 8:10** Panel Discussion

SESSION 94 (Grand Ballroom East, 3rd Floor)

**FAST-PACED NEW DEVELOPMENTS AND HOT TOPICS IN CAROTID DISEASE (4 ½-MINUTE TALKS)**

**Moderators:** *Enrico Ascher, MD*

*Ali F. AbuRahma, MD*

- 8:10 – 8:15** Variation In The Treatment Of Carotid Stenosis Between Centers And Between Countries Is Enormous: From The Interventional Consortium Of Vascular Registries (ICVR): What Are The Implications  
*Maarit Venermo, MD, PhD*
- 8:15 – 8:20** In Patients Undergoing CAS Or CEA, Blood Pressure In The 2 Arms Should Be Checked: What Is The Significance If There Is A Difference  
*Gert J. de Borst, MD, PhD*
- 8:20 – 8:25** What Is A Carotid String Sign And When Should Patients With It Be Treated By CEA Or CAS  
*Christos D. Liapis, MD*
- 8:25 – 8:30** **DEBATE:** With CEAs Completion Quality Control With Duplex Or Angiography Is Indicated And Decreases Stroke Risk  
*Hans-Henning Eckstein, MD, PhD*
- 8:30 – 8:35** **DEBATE:** Not So: If Careful Technique Is Used, Completion Duplex Or Angiography Control Is Unnecessary And May Be Misleading  
*Russell H. Samson, MD, RVT*
- 8:35 – 8:40** When Is Supplemental Carotid Stenting An Aid To Safe CEA And A Rescue Technique For Operative Mishaps: How To Do It  
*Yves Alimi, MD*
- 8:40 – 8:45** Panel Discussion
- 8:45 – 8:50** Invasive Treatment Is Almost Never Needed For Asymptomatic Restenosis After CEA Or CAS: It Is A Benign Condition  
*Ross Naylor, MD*
- 8:50 – 8:55** Endovascular Treatment Of Carotid Artery – Jugular Vein Injury With An A-V Fistula: Technical Tips  
*Jacques Busquet, MD*
- 8:55 – 9:00** Which Patient With An Asymptomatic Carotid Stenosis Should Be Treated Invasively: Which By CEA; Which By CAS  
*Carlo Setacci, MD*
- 9:00 – 9:05** Silent Cerebral Infarcts On CT Or MRI Influence Outcomes Of CEA: How About Outcomes With CAS: Should All Asymptomatic Carotid Stenosis Patients Get A Head CT  
*Gianluca Faggioli, MD*
- 9:05 – 9:10** Indications For CEA Should Not Be Based On Consensus Statement Velocity Criteria Or Duplex Alone: They Lead To Unnecessary Procedures  
*Mark F. Fillinger, MD*
- 9:10 – 9:15** A New Model For Evaluating Stroke And Other Risks In Patients With Asymptomatic Carotid Stenosis  
*Alison Halliday, MS*
- 9:15 – 9:20** Panel Discussion
- 9:20 – 9:30** Break – Visit Exhibits And Pavilions (3rd Floor)

SESSION 95 (Grand Ballroom East, 3rd Floor)  
**NEW DEVELOPMENTS AND HOT TOPICS IN  
DISEASES OF THE AORTA AND ITS BRANCHES  
(4 ½-MINUTE TALKS)**

**Moderators:** *Bauer E. Sumpio, MD, PhD*  
*Caron B. Rockman, MD*

- 9:30 – 9:35** What Is The Physics And Physiology Underlying Intimal Tears Leading To Type A And B Aortic Dissections  
*Erno Ramsey-Semmelweis, MD*
- 9:35 – 9:40** Do New Low Profile Endografts For EVAR Have Higher Complication Rates Than Standard EVAR Devices  
*Giovanni Pratesi, MD*
- 9:40 – 9:45** Negative Impact Of MIs On Life Expectancy After AAA Repair: What Can Be Done To Improve It  
*Bijan Modarai, PhD*
- 9:45 – 9:50** Tips And Tricks To Perform EVAR, TEVAR And TAVI In Patients With Disadvantaged Access: Conduits, Transaortic And Transcaval Access Techniques  
*Jeffrey P. Carpenter, MD*
- 9:50 – 9:55** Does Ticagrelor Inhibit The Growth Of Small AAAs: Results Of A Recent RCT  
*Anders Wanhainen, MD, PhD*
- 9:55 – 10:00** Long-Term Estimation Of Aortic Risk (LEAR) After EVAR Can Safely Guide The Frequency Of Surveillance  
*Peter J.E. Holt, MD, PhD*  
*Ian Loftus, MD*
- 10:00 – 10:05** The Future Of Aortic Endografts May Be Low Profile But We Have To Get The Technology Right  
*Hence J.M. Verhagen, MD, PhD*
- 10:05 – 10:10** Panel Discussion
- 10:10 – 10:15** Value Of Upper Extremity And Femoral Access During Difficult Mesenteric Endovascular Interventions: Technical Tips  
*Jade S. Hiramoto, MD*
- 10:15 – 10:20** Technical Tips For Hepatic Artery Interventions After Liver Transplantation: Results, Complications And How To Deal With Them  
*W. Charles Sternbergh III, MD*
- 10:20 – 10:25** Unexpected Complications During EVAR And How To Deal With Them To Reduce Morbidity And Mortality  
*Andrea Stella, MD*
- 10:25 – 10:30** Role Of Aortofemoral Bypasses In The Endovascular ERA: When Is It Really The Best Option  
*Michael Belkin, MD*
- 10:30 – 10:35** Ascending Aortic Wrapping To Treat Smaller Aneurysms; Technique, Advantages And Results  
*Ralf R. Kolvenbach, MD*  
*Mario L. Lachat, MD*
- 10:35 – 10:40** The Descending Aorta As An Inflow Source: It Has Multiple Applications: Technical Tips  
*Enrique Criado, MD*
- 10:40 – 10:45** Panel Discussion

SESSION 96 (Grand Ballroom East, 3rd Floor)

**MISCELLANEOUS HOT TOPICS IN MEDICAL  
TREATMENT AND VASCULAR DISEASE  
(4½-MINUTETALKS)**

**Moderators:** *Alan Dardik, MD, PhD*

*Gustavo S. Oderich, MD*

- 10:45 – 10:50** Update On The Endovascular Treatment Of Chronic Cerebrospinal Venous Insufficiency (CCSVI) To Improve Multiple Sclerosis Symptoms: Status And Results Of The BRAVE DREAMS Randomized Sham Controlled Trial  
*Paolo Zamboni, MD*
- 10:50 – 10:55** 4D Ultrasound As A Means To Evaluate Wall Stress And To Predict Rupture In AAAs  
*Marc R.H.M. van Sambeek, MD, PhD*
- 10:55 – 11:00** Retroperitoneal Hematomas Are A Big Deal: Etiology, Demographics, Presentation, Treatment And Outcomes  
*Caron B. Rockman, MD*
- 11:00 – 11:05** The Guidewire Fixator: A New Tool To Facilitate Treatment Of Complex AAAs And F/EVAR: How Does It Work  
*Krister C.B. Liungman, PhD*
- 11:05 – 11:10** Use, Validation And Value Of A Frailty Index To Estimate Perioperative Risk In Vascular Patients  
*Christopher J. Abularrage, MD*
- 11:10 – 11:15** Technical Tips And Equipment For Pedal Access: Update On The Value Of The Vasostat Device To Aid Hemostasis After Tibial, Pedal And Radial Access  
*Timothy W.I. Clark, MD*
- 11:15 – 11:20** Does Berger's Disease Really Exist: What Is The Current Best Treatment: Do Bypasses Or Endo Treatments Work  
*Kamphol Laohapensang, MD*
- 11:20 – 11:25** Panel Discussion
- 11:25 – 11:30** What Is Happening With Exercise Programs For Intermittent Claudication: How Well Do They Work And How To Make Them Work Better  
*Jonathan D. Beard, ChM, MEd*
- 11:30 – 11:35** Diagnosis And Treatment Of Arterial Injuries During Hip And Knee Replacement Surgery: They Can Be Catastrophic And Easily Missed  
*Matthew J. Dougherty, MD*  
*Keith D. Calligaro, MD*
- 11:35 – 11:40** Endovascular Treatment Of Celiac Artery Aneurysms: Technique And When Is Open Repair Necessary  
*Jacques Busquet, MD*
- 11:40 – 11:45** Value Of Embolic Protection Devices During Mesenteric Artery Stenting: How To Do It  
*Gustavo S. Oderich, MD*
- 11:45 – 11:50** A Better Approach To Treat Complex Type 2 Endoleaks After EVAR: Transfemoral Inside The Artery And Outside The Endograft: How To Do It  
*Peter A. Schneider, MD*
- 11:50 – 11:55** Value Of Chemical Sympathectomy: Indications, Technique And Results  
*Donald B. Reid, MD*
- 11:55 – 12:00** Panel Discussion



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

SESSION 97 (Grand Ballroom East, 3rd Floor)

**MORE FAST-PACED LOWER EXTREMITY HOT TOPICS (4 ½-MINUTE TALKS)**

**Moderators:** *Joseph L. Mills, MD*  
*Michael S. Conte, MD*

- 1:00 – 1:05** Technical Tips To Treat Iliac Occlusive Disease And To Cross Chronically Occluded Iliac Arteries Safely  
*Ali Amin, MD, RVT*
- 1:05 – 1:10** Zilver PTX DESs (Cook) Are Effective Treatment For Fem-Pop Occlusive Lesions In Patients With Poor Or Absent Tibial Runoff And Those With Chronic Renal Failure: From The Japanese Zilver PTX Trial  
*Kimihiko Komori, MD, PhD*
- 1:10 – 1:15** Patients With Intermittent Claudication Who Smoke Have Higher Rates Of Major Adverse Limb Events After Infrainguinal Bypasses Than Former Smokers Or Non-Smokers: Is This Also True With Endo Treatments  
*Raghuveer Vallabhaneni, MD*
- 1:15 – 1:20** **DEBATE:** In Patients With Lower Extremity Ischemia Endovascular Treatment Is Associated With Improved Amputation Free Survival But Higher Reintervention Rates At 30 Days And 4 Years: From A Population Based Study  
*K. Craig Kent, MD*
- 1:20 – 1:25** **DEBATE:** This Study Is Misleading Because Many Patients Benefit From An Open Revascularization First Policy And Are Harmed By An All Endo First Policy  
*Michael S. Conte, MD*
- 1:25 – 1:30** Technical Tips To Treat Aorto-Iliac Disease With Covered Stents: What Devices Are Available And Which Work Best  
*Michel M.P. Reijnen, MD, PhD*  
*Peter C.J. Goverde, MD*
- 1:30 – 1:35** Step By Step Technical Approach To Extreme Tibial Interventions  
*Mahmood Razavi, MD*
- 1:35 – 1:40** Value Of Gore Hybrid Graft For Simplifying The Distal Anastomosis Of An Open Fem-Pop Bypass  
*Gianmarco de Donato, MD*  
*Carlo Setacci, MD*
- 1:40 – 1:49** Panel Discussion

SESSION 98 (Grand Ballroom East, 3rd Floor)

**MORE FAST-PACED AORTA AND AORTIC BRANCH RELATED TOPICS (4 ½-MINUTE TALKS)**

**Moderators:** *Nicholas J.W. Cheshire, MD*  
*Kenneth Ouriel, MD, MBA*

- 1:50 – 1:55** Supraceliac Aorta To Hepatic Artery And SMA Bypass For Chronic Mesenteric Ischemia (Operative Video)  
*Keith D. Calligaro, MD*
- 1:55 – 2:00** Laser Transgraft Access For Treating Type 2 Endoleaks: Technique, Advantages And Results  
*Mark W. Mewissen, MD, RVT*

- 2:00 – 2:05** A Method To Define Type 2 Endoleak Risk Before EVAR: Can It Direct Intra- Or Pre-Procedure Treatment: Does Such Treatment Work  
*Franco Grego, MD*
- 2:05 – 2:10** Equipment And Technical Tips For Transcaval Access To Treat Type 2 Endoleaks: Indications, Advantages And Results  
*Edward Y. Woo, MD*  
*Tareq H. Massimi, MD*
- 2:10 – 2:15** Long-Term Outcomes Of TEVAR For Traumatic Aortic Injuries In A Closely Followed Cohort Of Patients  
*Johnny Steuer, MD, PhD*
- 2:15 – 2:20** Moderately Hostile Necks (Conical, Angulated, Calcified And With Thrombus) Do Not Negatively Influence EVAR Outcomes With Newer Endografts (Endurant – Medtronic): 4-Year Results  
*Hence J.M. Verhagen, MD, PhD*
- 2:20 – 2:30** Panel Discussion (Refreshments Available)

SESSION 99 (Grand Ballroom East, 3rd Floor)

**MORE FAST-PACED AORTA RELATED HOT TOPICS**  
**(4 ½-MINUTE TALKS)**

**Moderators:** *Ronald M. Fairman, MD*  
*James H. Black III, MD*

- 2:30 – 2:35** Open Surgical vs. Endovascular Revascularization For Subclavian Artery Atherosclerotic Occlusive Disease: Which And When  
*Theodosios Bisdas, MD*  
*Giovanni Torsello, MD*
- 2:35 – 2:40** IVUS Or Other 4D Imaging Techniques Are The Only Ways To Accurately Assess Aortic Dissection Flap Mobility  
*Ross Milner, MD*
- 2:40 – 2:45** Surgeon Modified Fenestrated Endograft For Aortic Arch Repairs: Technique, Results And Limitations  
*Ludovic Canaud, MD, PhD*
- 2:45 – 2:50** When Do Stent-Grafts Have Value In Marfan's Disease And Other Connective Tissue Disorders  
*James H. Black III, MD*
- 2:50 – 2:55** Why Chimney And Especially Periscope Grafts For Left SCA Revascularization May Be A Better Option Than Cervical Bypasses And Perhaps Branched Grafts  
*Frank J. Criado, MD*
- 2:55 – 3:00** Changing Spectrum Of Secondary Procedures Required After TEVAR: When Is Open Conversion Necessary  
*Ronald M. Fairman, MD*
- 3:00 – 3:05** Panel Discussion
- 3:05 – 3:10** There Is Great Variability In AAA Treatment Within And Between Countries: Key Findings, Causes And Implications: From The International Consortium Of Vascular Registries (ICVR)  
*Adam Beck, MD*
- 3:10 – 3:15** Can Earthquakes Trigger AAA Ruptures  
*Gianmarco de Donato, MD*  
*Carlo Setacci, MD*

- 3:15 – 3:20** Double-Barreled Stent-Grafts (In The True And False Lumens) To Treat Chronic TBADs: When Can It Work: Advantages And Limitations  
*Mahmoud B. Malas, MD, MHS*
- 3:20 – 3:25** A Small Diameter Aortic Bifurcation Increases The Chances Of Serious Type 2 Endoleaks After EVAR: Possible Mechanisms  
*Ross Milner, MD*
- 3:25 – 3:30** Treatment Of Median Arcuate Ligament Syndrome With Celiac Artery Involvement: Supraceliac Aorta-To-Celiac-Bypass (Operative Video)  
*Joseph L. Mills, MD*
- 3:30 – 3:35** Panel Discussion

SESSION 100 (Grand Ballroom West, 3rd Floor)  
**FAST-PACED HOT TOPICS RELATED TO TRAUMA AND LOWER EXTREMITY PROCEDURES (4 ½ MINUTE TALKS)**

**Moderators:** *R. Clement Darling III, MD*  
*Joanelle Z. Lugo, MD*

**TRAUMA RELATED TOPICS**

- 3:35 – 3:40** Endovascular Treatment For Pediatric Vascular Trauma: When Is It Indicated And How Well Does It Work  
*Michael J. Singh, MD*
- 3:40 – 3:45** REBOA For Exsanguinating Bleeding In Pelvic Trauma: How Well Does It Work  
*Charles J. Fox, MD*
- 3:45 – 3:50** New Developments In The Treatment Of Vascular Trauma  
*R. Clement Darling III, MD*

**LOWER EXTREMITY RELATED TOPICS**

- 3:50 – 3:55** Can Biomarkers Help Predict Endovascular Treatment Failure And The Need For Amputation In Diabetics With CTLI And Extensive Gangrene Or Ulceration  
*Ignacio Escotto, MD*
- 3:55 – 4:00** Novel Strategy For Percutaneous Access Closure In Patients With Zero Tolerance For Bleeding  
*Dipankar Mukherjee, MD*
- 4:00 – 4:05** Role Of Digital And Tibial Artery Calcification In The Treatment Of Patients With CLTI: It Is Not All Bad  
*Wei Zhou, MD*
- 4:05 – 4:10** Post-Procedure Duplex Volume Flow In The Popliteal Artery Is The Best Predictor Of Early And Late Patency After Fem-Pop PTAs  
*Natalie A. Marks, MD, RPVI, RVT*  
*Enrico Ascher, MD*
- 4:10 – 4:15** A Novel Front-Cutting Atherectomy Device With Plaque Fragment Aspiration: How Does It Work And Value In Crossing CTOs And Lowering Plaque Burden  
*Miguel F. Montero-Baker, MD*
- 4:15 – 4:25** Panel Discussion
- End of Program N**

PROGRAM O (SESSIONS 101-105)  
NEW DEVELOPMENTS IN VASCULAR ACCESS  
FOR HEMODIALYSIS

Grand Ballroom West, 3rd Floor

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

**7:55 – 8:00** Introduction

*Anton N. Sidawy, MD, MPH*

*Larry A. Scher, MD*

SESSION 101 (Grand Ballroom West, 3rd Floor)  
IMPORTANT ISSUES IN HEMODIALYSIS ACCESS  
(7-MINUTE TALKS)

Moderators: **Larry A. Scher, MD**

**Anton N. Sidawy, MD, MPH**

**8:00 – 8:07** Review Of The 2016 And 2017 Hemodialysis  
Literature: What's Really New

*Jack Work, MD*

**8:08 – 8:15** Impact Of CKD Stage 4 And 5 On Cognitive Function  
And Memory: Why Do Patients Get Lost To Follow-Up

*Dori Schatell, MS*

**8:16 – 8:23** Kidney Health International: Advancing The Science  
Of Vascular Access

*Prabir Roy-Chaudhury, MD, PhD*

**8:24 – 8:31** The Importance Of Measuring Cardiac Output In The  
Dialysis Center: Making Dialysis Safer For The Patient

*Deborah Brouwer-Maier, RN, CNN*

**8:32 – 8:39** Importance Of Blood Flow And Pump Speed To  
Achieve Effective Hemodialysis: Why Is The United  
States Different

*Dori Schatell, MS*

**8:40 – 8:51** Panel Discussion

**8:52 – 8:59** What Are The Most Important Factors Affecting AV  
Fistula Maturation

*Prabir Roy-Chaudhury, MD, PhD*

**9:00 – 9:07** Use Of Ultrasound For Preoperative Planning And  
Postoperative Assessment In Hemodialysis Access  
Surgery

*Surendra Shenoy, MD, PhD*

**9:08 – 9:15** Use Of A Handheld Ultrasound Device To Optimize  
Vascular Access Cannulation

*Seth Johnson, MSN, RN*

**9:16 – 9:23** Hospital Readmissions After Outpatient Access Creation

*Alik Farber, MD*

**9:24 – 9:35** Panel Discussion

**9:36 – 10:00** Break - Visit Exhibits And Pavilions (3rd Floor)

SESSION 102 (Grand Ballroom West, 3rd Floor)  
OPTIMIZING OUTCOMES IN HEMODIALYSIS ACCESS  
(7- MINUTE TALKS)

Moderators: **Clifford M. Sales, MD, MBA**

**Haimanot (Monnie) Wasse, MD, MPH**

**10:01 – 10:08** Role Of IVUS In Dialysis Access Interventions

*David Fox, MD, RPVI*

- 10:09 – 10:16** Percutaneous Salvage Of The Thrombosed And Immature Fistula  
*Gregg A. Miller, MD*
- 10:17 – 10:24** Is There A Role For Drug Eluting Balloons And Stents In Dialysis Access  
*Theodore F. Saad, MD*
- 10:25 – 10:32** Early Use Of Stent Grafts For Failed Or Failing AV Fistulas And Grafts  
*John E. Aruny, MD*
- 10:33 – 10:40** Outcomes Of Interventions For Cephalic Arch Stenosis  
*Mark G. Davies, MD*
- 10:41 – 10:48** Repeated Endovascular Interventions Can Increase Life Span Of Autogenous Fistulas  
*Alan M. Dietzek, MD, RPVI*
- 10:49 – 11:00** Panel Discussion
- 11:01 – 11:08** Central Venous Catheter Exchange For Infection: When And How  
*Haimanot (Monnie) Wasse, MD, MPH*
- 11:09 – 11:16** Placement Issues For Hemodialysis Catheters In Patients With Preexisting Central Lines Or Implantable Cardiac Devices  
*Anil P. Hingorani, MD*
- 11:17 – 11:24** Importance Of Measuring Access Flow In The Interventional Suite  
*John E. Aruny, MD*
- 11:25 – 11:32** Update On The HeRO And Super HeRO For Challenging Hemodialysis Access  
*Eric K. Peden, MD*
- 11:33 – 11:40** Femoral Vein Transposition  
*Alik Farber, MD*
- 11:41 – 11:55** Panel Discussion
- 11:55 – 12:40** Lunch Break – Visit Exhibits And Pavilions (3rdFloor)

SESSION 103 (Grand Ballroom West, 3rd Floor)

**POLITICAL, ECONOMIC AND LEGAL ISSUES IN HEMODIALYSIS ACCESS (7 & 15-MINUTE TALKS)**

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

- 12:40 – 12:55** **Honored Guest Lecture:** Revolution In Renal Replacement Therapy: Current Status Of The Bioartificial Kidney  
*Harald C. Ott, MD*
- 12:56 – 1:03** Impact Of AV Fistula Outcomes On Medicare Costs In US Hemodialysis Patients  
*Haimanot (Monnie) Wasse, MD, MPH*
- 1:04 – 1:11** Reimbursement Changes For Office Based Access Centers vs. Ambulatory Surgery Centers  
*Sean P. Roddy, MD*
- 1:12 – 1:19** Training Vascular Access Surgeons: Fellowship Or Apprenticeship  
*O. William Brown, MD, JD*
- 1:20 – 1:27** Health Economics And Early Cannulation Grafts  
*Sapan S. Desai, MD, PhD, MBA*
- 1:28 – 1:37** Panel Discussion

SESSION 104 (Grand Ballroom West, 3rd Floor)  
**NEW TECHNOLOGIES AND CONCEPTS IN  
HEMODIALYSIS ACCESS (7-MINUTE TALKS)**

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

- 1:38 – 1:45** Updated Results Of Proteon (Elastase) Clinical Trial  
*C. Keith Ozaki, MD*
- 1:46 – 1:53** Updated Results Of Vascular Therapies (Sirolimus) Trial  
*Sriram S. Iyer, MD*
- 1:54 – 2:01** Updated Results Of VasQ Device To improve AV  
Fistula Maturation  
*Vladimir Matoussevitch, MD*
- 2:02 – 2:09** Endovascular AV Fistula Creation: Update On  
Clinical Trials  
*Todd Berland, MD*
- 2:10 – 2:17** Importance Of Hemodynamics In AV Fistula  
Maturation: Pathophysiology Of The RADAR (Radial  
Artery Deviation And Reimplantation) Technique  
*Alan Dardik, MD, PhD*
- 2:18 – 2:25** Utilization Of Flow Measurements As A Guide For AV  
Access Surgery  
*Alexander Meyer, MD*
- 2:26 – 2:33** Noninvasive Remote Monitoring Of AV Fistula And  
Graft Flow With A GraftWorx Sensor  
*Richard F. Neville, MD*
- 2:34 – 2:43** Panel Discussion

SESSION 105 (Grand Ballroom West, 3rd Floor)  
**UPDATE ON CLINICAL CHALLENGES IN  
HEMODIALYSIS ACCESS (7-MINUTE TALKS)**

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

- 2:44 – 2:51** Role Of Biologic Grafts In Hemodialysis Access  
*Matthew J. Dougherty, MD*
- 2:52 – 2:59** Dialysis Access In Challenging Patient Populations:  
The Obese Patient  
*David L. Cull, MD*
- 3:00 – 3:07** Dialysis Access In Challenging Patient Populations:  
The Elderly Patient  
*Clifford M. Sales, MD, MBA*
- 3:08 – 3:15** Dialysis Access In Challenging Patient Populations:  
The Hypercoagulable Patient  
*Jeffrey H. Lawson, MD, PhD*
- 3:16 – 3:23** Dialysis Access In Challenging Patient Populations:  
The Patient With An Implantable Cardiac Device  
*Theodore F. Saad, MD*
- 3:24 – 3:34** Panel Discussion
- 3:35 – 3:42** Management Of Dialysis Access Complications: Steal  
Syndrome  
*Karl A. Illig, MD*
- 3:43 – 3:50** Management Of Dialysis Access Complications: High  
Flow Fistulas  
*John R. Ross, Sr., MD*

- 3:51 – 3:58** Management Of Dialysis Access Complications:  
Central Venous Stenosis  
*Eric K. Peden, MD*
- 3:59 – 4:06** Management Of Dialysis Access Complications:  
Aneurysms  
*Sidney M. Glazer, MD*
- 4:07 – 4:14** Management Of Dialysis Access Complications:  
Infection  
*Surendra Shenoy, MD, PhD*
- 4:15 – 4:25** Panel Discussion  
**End of Program O**

PROGRAM P (SESSIONS 106-109)  
**MORE HOT VENOUS DISEASE TOPICS**

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 106 (Trianon Ballroom, 3rd Floor)

**VENOUS IMAGING, THROMBOPHILIA**

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

**CROSS-SECTIONAL IMAGING**

- 8:00 – 8:05** Air Plethysmography: Measuring Reflux And Venous  
Outflow Obstruction  
*David L. Gillespie, MD*
- 8:06 – 8:11** Getting A Look At Inflow With Duplex Ultrasound  
Prior To Endovascular Reconstruction Of Post-  
Thrombotic Iliocaval Disease  
*Jose I. Almeida, MD, RPVI, RVT*
- 8:12 – 8:17** How To Grade Iliac Vein Stenosis  
*Seshadri Raju, MD*
- 8:18 – 8:23** Inflow To CFV: IVUS, CDUS, CTV, MRV  
*Gerard J. O'Sullivan, MD*
- 8:24 – 8:29** Novel Imaging Techniques With MRI For Thrombus  
Aging  
*Stephen A. Black, MD*
- 8:30 – 8:35** Surveillance After Venous Stenting: Venography And  
Duplex Ultrasound  
*Kenneth Ouriel, MD, MBA*
- 8:36 – 8:41** The VIDIO Trial Comparing IVUS vs. Multiplanar  
Venogram For Diagnosing Iliofemoral Vein  
Obstruction  
*Paul J. Gagne, MD*
- 8:42 – 8:47** MRV And Major Venous Interventions  
*Mark G. Davies, MD*
- 8:48 – 8:53** MRV And CTV In Imaging Of Pelvic And Abdominal  
Venous Compressive Syndromes: Which Is Better  
And Why  
*Akhilesh K. Sista, MD*
- 8:54 – 8:59** Diagnostic Venous IVUS During Saphenous Ablation:  
How, When And Why  
*Todd Berland, MD*
- 9:00 – 9:05** Panel Discussion

**MORE THROMBOPHILIA**

**Moderators:** *Timothy K. Liem, MD, MBA*  
*Ian J. Franklin, MS*

- 9:06 – 9:11** Venous Thrombophlebitis: It Is Very Common Yet There Is Much Uncertainty And Variation In Practice Between Primary And Secondary Care: Grading Of Severity  
*Ian J. Franklin, MS*
- 9:12 – 9:17** Bridging Anticoagulation With The Direct Oral Anticoagulants  
*Timothy K. Liem, MD, MBA*
- 9:18 – 9:23** Venous Thrombophlebitis: When Is Anticoagulation Necessary And For How Long; Does Compression Help; What Follow-Up Is Indicated  
*Ian J. Franklin, MS*
- 9:24 – 9:29** Managing Anticoagulation To Avoid Postoperative Hemorrhage  
*Timothy K. Liem, MD, MBA*
- 9:30 – 9:35** PTS: Do We Know The Predictive Factors  
*Tomasz Urbanek, MD*
- 9:36 – 9:41** Panel Discussion

SESSION 107 (Trianon Ballroom, 3rd Floor)

**HOW THE EXPERTS WOULD MANAGE RETICULAR AND TELANGIECTASIA: CASE DISCUSSION**

**Moderator:** *Steve Elias, MD*

- 9:42 – 10:01** Case Discussion  
**Panelists:** *Ian J. Franklin, MS*  
*Kathleen D. Gibson, MD*  
*Lowell S. Kabnick, MD, RPhS*  
*Paul Pittaluga, MD*  
*Jorge H. Ulloa, MD*

SESSION 108 (Trianon Ballroom, 3rd Floor)

**ASK THE EXPERT**

**Moderator:** *Steve Elias, MD*

- 10:02 – 10:41** Challenging Cases And “PERT” Decisions  
**Panelists:** *Jose I. Almeida, MD, RPVI, RVT*  
*Alun H. Davies, MA, DM, DSc*  
*Alan M. Dietzek, MD, RPVI*  
*Ellen D. Dillavou, MD*  
*Ian J. Franklin, MS*  
*Kathleen D. Gibson, MD*  
*Lowell S. Kabnick, MD, RPhS*  
*Marc A. Passman, MD*

SESSION 109 (Trianon Ballroom, 3rd Floor)

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

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

- 10:42 – 10:47** Prosthetic Venous Valve Challenges 'Til Now  
*Jose I. Almeida, MD, RPVI, RVT*



- 10:48 – 10:53** Surgical Creation Of A Monocusp Valve  
*Marzia Lugli, MD*
- 10:54 – 10:59** Blue Leaf Endovenous Valve: Potential Benefits Of An All-Autogenous Solution  
*Mikel Sadek, MD*
- 11:00 – 11:05** Sail Valve  
*Steve Elias, MD*
- 11:06 – 11:11** Panel Discussion

**Moderators:** *Kenneth Ouriel, MD, MBA*  
*Thomas W. Wakefield, MD*

**ATTRACT TRIAL AND TRIBULATIONS**

- 11:12 – 11:17** Final Outcome Of The ATTRACT Trial  
*Suresh Vedantham, MD*
- 11:18 – 11:23** Why The ATTRACT Trial Failed  
*Fedor Lurie, MD, PhD*
- 11:24 – 11:29** The Open Vessel Hypothesis: Applicability To DVT  
*Kenneth Ouriel, MD, MBA*
- 11:30 – 11:35** **DEBATE:** ATTRACT- A Well-Designed Trial With Clinically Important Findings – Pro  
*Suresh Vedantham, MD*
- 11:36 – 11:41** **DEBATE:** ATTRACT- A Well-Designed Trial With Clinically Important Findings – Con  
*Fedor Lurie, MD, PhD*
- 11:42 – 11:47** Panel Discussion

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

**NEW CHALLENGES IN VENOUS STENTING**

- 11:48 – 11:53** Which Stent Would I Use In: Malignancy, Across Inguinal Ligament, IVC, Into PFV  
*Gerard J. O'Sullivan, MD*
- 11:54 – 11:59** Crush Resistance For Iliac Stenting: Does It Matter  
*Lowell S. Kabnick, MD, RPhS*
- 12:00 – 12:05** In-Stent Restenosis After Venous Stenting: Understanding The Pathology Guides Prevention  
*Antonios P. Gasparis, MD*
- 12:06 – 12:11** Venous Stent Fracture  
*Stephen A. Black, MD*
- 12:12 – 12:17** Predictors Of And Acceptable Rates For Venous Stent Fracture  
*Mahmood Razavi, MD*
- 12:18 – 12:25** Panel Discussion  
**End of Program P**

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TUESDAY, NOVEMBER 14 -  
SATURDAY, NOVEMBER 18, 2017

NEW YORK HILTON - MIDTOWN  
1335 Avenue Of The Americas | New York, NY 10019

**Meeting Registration**  
(See Registration Form on reverse side)



**VEITHsymposium Registration**

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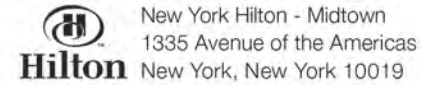
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<input type="checkbox"/> Full Registration (Tuesday - Saturday) Tuition includes access to all Saturday Only Components:	
<input type="checkbox"/> Physicians (excluding Fellows/Trainees and Residents)	\$1399
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<input type="checkbox"/> <b>US 2nd-Year</b> Fellows in an RRC-approved 2-Year Vascular Fellowship <b>OR</b> 5th-Year Vascular Resident in an approved Vascular Surgery Residency as of November 2017, <b>AND</b> Canadian Vascular Surgery Fellows in Training ( <b>Tuition is provided through an Educational Grant by W.L. Gore &amp; Associates Inc.</b> ) Letter of verification on official hospital stationery must be obtained prior to registration and faxed to (888) 418-7043. The letter must include the start and end date of vascular fellowship.	Complimentary
<input type="checkbox"/> Non-US Fellows (Trainees) Letter of verification from Chief of Service must be obtained prior to registration and faxed to (888) 418-7043.	\$699
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<input type="checkbox"/> <b>I will attend the Venous Venous Venous Workshop</b> Wednesday, November 15, 2017, 1pm-6pm, Americas Hall 1, 3rd Floor (Registration is limited to 125 fully paid VEITHsymposium registrants excluding Industry Personnel.)	\$25
<input type="checkbox"/> <b>I will attend the Chimney EVAR Workshop with Endurant and V 12 Devices</b> Wednesday 15, 2017; 3:00 p.m. to 6:00 p.m. Location: New York Suite, 4th Floor (This is a Non-CME Activity, limited to 35 fully paid VEITHsymposium registered Physicians, excluding Fellows/Residents.)	Complimentary

Associate Faculty Global Podium Presentations Program (AFGPP): If you are submitting to the AFGPP Program, please contact the Registrar at registrar@veithsymposium.org for registration fee.



**VEITH**symposium Registration



**ONE DAY ONLY COMPONENT MEETING**

**Innovation & Investment Summit**  
 Thursday, November 16, 2017, 8:30 a.m. to 4:00 p.m., Concourse A, Concourse Level  
*(This is a Non-CME Activity. Registration fee is complimentary for fully paid VEITHsymposium Registrants, including Fellows and Industry Personnel.)*

**VEITHsymposium JOB FAIR**  
 Friday, November 17, 2017, 8:00 a.m. to 4:00 p.m.; Americas Hall 1, 3rd Floor  
*(This is a Non-CME Activity.)*

**Potential Employer/Recruiter**  
 For Employers/Recruiters not registered at VEITHsymposium  
*Tuition includes access to VEITHsymposium Friday sessions only (excluding the Innovation and Investment Summit).*

**If you are a VEITHsymposium registrant you have complimentary access to the JOB FAIR:**

- I will not be attending the JOB FAIR
- I am a Potential Employer/Recruiter who is already registered for VEITHsymposium
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**SATURDAY ONLY COMPONENTS**

- VEITHsymposium (Miscellaneous Topics) *Tuition includes access to any Saturday Only Component.*
- Hemodialysis Access *Tuition includes access to any Saturday Only Component.*

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