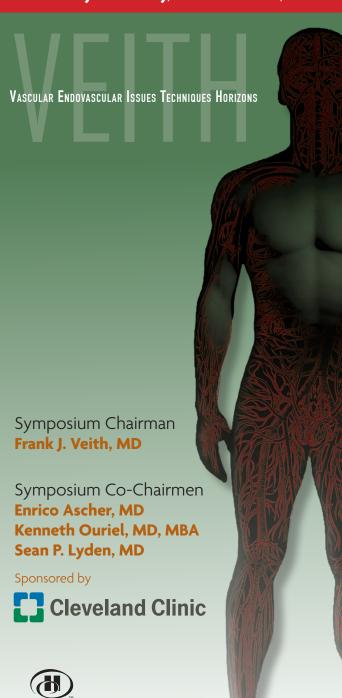




Tuesday – Saturday, November 15-19, 2022



Hilton

# PROGRAM OUTLINE AT A GLANCE

#### TUFSDAY PROGRAMS

# Program A (Sessions 1-8)

6:45 A.M. - 6:02 P.M.

Progress In The Treatment Of Diseases Of The Coronary Arteries, Heart Valves And The Thoracic And Abdominal Aorta Location: Grand Ballroom East, 3rd Floor

Program B (Sessions 9-16)

6:44 A.M. - 6:05 P.M.

Progress In Vascular Robotics, Guidance Systems, Laparoscopy, Simulation And COVID; New Developments In Carotid Disease And Acute Stroke Treatment; Abdominal Aortic Branch Treatment; New Technology Concepts And Artificial Intelligence (AI); Vascular Surgery Identity, Training, Manpower And Mentorship; Updates On Open And Hybrid Vascular Surgery And Treatment Of Aortic Coarctation Location: Grand Ballroom West, 3rd Floor

#### Program C-1 (Sessions 17-18)

7:00 A.M. - 12:00 P.M.

Management Of Pulmonary Embolism: The Ultimate Team Approach

Location: Trianon Ballroom, 3rd Floor

Program C-2 (Sessions 19-22)

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

Interesting Topics Related To Lower Extremity Occlusive Disease And Its Treatments Location: Trianon Ballroom, 3rd Floor

#### WEDNESDAY PROGRAMS

#### Program D (Sessions 23-30)

6:40 A.M. - 6:02 P.M.

Progress In Lower Extremity Occlusive Disease And Its Treatment

Location: Grand Ballroom East, 3rd Floor

# Program E (Sessions 31-38)

6:40 A.M. - 6:05 P.M.

New Developments In Medical Treatments And New Drugs; Progress In Anti-Atherogenic And Anti-Hypertensive Treatments; Management Of Endoleaks; Recorded Live Cases From Leading Centers In The US And EU; Issues Of Interest, Outpatient And Office Based Vascular Treatment; Topics Related To Government, Reimbursement, The SVS, VQI, FDA, Guidelines, Trials And Evidence Based Medicine

Location: Grand Ballroom West, 3rd Floor

# Program F (Sessions 39-46)

6:50 A.M. - 6:10 P.M.

More New Developments In Thoracic Aortic Disease, TEVAR, Aortic Dissections, TAAAs, Juxta- And Pararenal AAAs, Parallel Grafts, Fenestrated And Branched EVAR (F/B/ EVAR), Multilayer Bare Stents, Infrarenal AAAs And Standard EVAR, And Hot New Aortic And Carotid Topics

Location: Trianon Ballroom, 3rd Floor

# THURSDAY PROGRAMS

# Program G (Sessions 47-54)

6:50 A.M. - 6:07 P.M.

Exciting New Or Rediscovered Techniques, Concepts Or Devices; Progress In F/B/EVAR And Parallel Grafts For Complex AAAs; Tribute To Our Military; Progress In The Treatment Of Ruptured AAAs; More About New Devices, Techniques Or Concepts; Progress In Radiation Safety

Location: Grand Ballroom East, 3rd Floor

#### Program H (Sessions 55-63)

6:50 A.M. - 5:52 P.M.

New Or Improved Devices For: Standard EVAR, EVAS And More Complex AAAs; Repairs Of TAAAs, The Ascending Aorta, The Aortic Arch, And The Descending Aorta (TEVAR); New Devices For Treating Lower Extremity Lesions By Endo Or Open Techniques; Update On Endoanchors And Fixation Devices And New Or Improved Devices For Endovascularly Removing Clot And Occluding Blood Vessels

Location: Grand Ballroom West, 3rd Floor

# Program I (Sessions 64-71)

7:00 A.M. - 6:25 P.M Superficial Venous Disease

Location: Trianon Ballroom, 3rd Floor

# Program J (Sessions 72-75)

8:00 A.M. -12:15 P.M.

Multidisciplinary Acute Stroke Management Location: Murray Hill Suites, 2nd Floor

#### **FRIDAY PROGRAMS**

### Program K (Sessions 76-83)

6:40 A.M. - 6:02 P.M.

Progress In The Prevention And Treatment Of Spinal Cord Ischemia (SCI) With TAAAs And Complex Aortic Aneurysm Repairs; New Developments In Carotid Artery Disease And Its Treatment: Mesh Covered Stents And TCAR, Cognitive Changes, Timing Of Treatment, Medical Treatment, Update On Carotid Trials, Treatment Of Asymptomatic Carotid Stenosis (ACS), String Sign, Carotid Clot, Significance Of MRI Lesions, Carotid Controversies And More Carotid Topics; Other New Endovascular Treatment Concepts, Techniques; Update On Percutaneous Access Closure Devices And Wound Care

Location: Grand Ballroom East, 3rd Floor

# Program L (Sessions 84-91)

7:00 A.M. - 5:42 P.M.

New Developments In The Treatment Of Popliteal Disease: Aneurysms, Entrapment And Occlusive Lesions; Advances In Treating Arterial And Graft Infections; Advances In Vascular Imaging And Guidance; Augmented Reality And Artificial Intelligence; Recorded Live Complex Endovascular Cases From Münster, Germany; New Developments In Thoracic Outlet Syndrome Management; Advances In Medical, Drug, Anticoagulant And Rare Vascular Disease Treatment; And Advances In The Treatment Of Vascular Trauma

Location: Grand Ballroom West, 3rd Floor

# Program M (Sessions 92-101)

6:30 A.M. - 4:57 P.M.

Deep Venous Disease

Location: Trianon Ballroom, 3rd Floor

### SATURDAY PROGRAMS

# Program N (Sessions 102-106)

6:55 A.M. - 1:30 P.M.

Topics Too Important To Miss In The Treatment Of Lower Extremity, Aortic Or Carotid Disease

Location: Grand Ballroom East, 3rd Floor

# Program O (Sessions 107-112)

8:00 A.M. - 4:05 P.M.

Improving Outcomes In Hemodialysis Access Location: Grand Ballroom West, 3rd Floor



Hans-Henning Eckstein, MD, PhD Peter Gloviczki, MD Alison Halliday, MS, FRCS Krassi Ivancev, MD, PhD Sriram S. Iyer, MD Manju Kalra, MBBS Mario L. Lachat, MD Christos D. Liapis, MD Evan C. Lipsitz, MD, MBA Germano Melissano, MD Frans L. Moll, MD, PhD Samuel R. Money, MD, MBA Juan C. Parodi, MD Vicente Riambau, MD, PhD Caron B. Rockman, MD Timur P. Sarac, MD Dierk Scheinert, MD Carlo Setacci, MD Cynthia K. Shortell, MD Sherif A.H. Sultan, MD, PhD Giovanni Torsello, MD Carol La Mantia Veith, RN, BA, MA Eric L.G. Verhoeven, MD, PhD Wayne W. Zhang, MD

CENTER FOR CONTINUING MEDICAL EDUCATION Steven M. Kawczak, PhD

# CONTENTS

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# **ACKNOWLEDGMENTS**

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

Abbott Artivion, Inc. BD **Boston Scientific Corporation** Cook Medical, LLC Cordis **Endologix LLC** Gore & Associates Inari Medical InspireMD LimFlow, Inc. Medtronic **NAMSA Philips** Shockwave Medical, Inc. Silk Road Medical Terumo Aortic



# Vascular Fellows' Career Development Program

An Interactive Symposium for Vascular Surgery Fellows and Residents Preparing to Enter the Job Market!

Friday, November 18, 2022 • 8:00 a.m. - 5:00 p.m. • New York Hilton-Midtown, New York City

Concourse A, Concourse Level | This is a Non-CME

**VEITHsymposium** provides vascular surgeons and other vascular specialists with a unique and exciting format to learn the most current information about what is new and important in the treatment of vascular disease. The 5-day event features rapid-fire presentations from world renowned vascular specialists with emphasis on the latest advances, changing concepts in diagnosis and management, pressing controversies and new techniques.

Complimentary Tuition is provided through an Educational Grant by W.L. Gore & Associates, Inc. for finishing Vascular Surgery Fellows and Residents in the US and Canada. An Educational Grant from Medtronic provides travel and lodging for finishing Vascular Surgery Fellows and Residents in the US. Graduating Vascular Surgery Fellows and Residents seeking travel and/or lodging stipend must send CV and Personal Statement no later than October 4, 2022 to admin@ veithsymposium.org. Successful applicants must attend the Career Development Program in its entirety, and must be present at the end of the day reception. Travel and/or lodging must be arranged through admin@veithsymposium. org. Lodging must be at the Symposium venue or designated hotel. Other rules apply. Stipends are limited so apply early. Please call (845-368-0069) or email admin@veithsymposium. org for more information.

# WHO SHOULD ATTEND:

- Graduating Fellows and Residents in Vascular Surgery
- Attending Vascular Specialists seeking new opportunity
- Potential Employers of Vascular Specialists
- Wound Care Specialists
- Vascular Career Recruiters and Potential Employer

Join us in New York City this November.
Register online for VEITH at: www.VEITHsymposium.org

**Program Director:** James F. McKinsey



# Vascular Fellows' Career Development Curriculum

8:00 - 8:05	<b>WELCOME</b> James F. McKinsey, MD Venita Chandra, MD	11:15 -11:25	Vascular Procedure Billing and Coding Sean P. Roddy, MD
SESSION 1 Moderator:	SELECTING YOUR FIRST JOB  James F. McKinsey, MD	11:25 -11:35	Balancing Your Practice with Industry Relationships - From a Physician's Viewpoint
8:05 – 8:15	What a 21st Century Private Practice Looks Like Clifford M. Sales, MD	11:35 -11:45	Gustavo S. Oderich, MD  What Industry Is Looking for in Collaboration with Vascular
8:15 - 8:25	What a 21st Century Academic Practice Looks Like James H. Black III, MD		Interventionalists Samuel Arbefeuill
8:25 - 8:35	What to Prioritize in Your First	11:45 -12:00	Panel Discussion with Q&A
	Practice? Karan Garg, MD	12:00 - 1:00	Lunch Break – 2nd Floor Promenade
8:35 - 8:45	What Should You Prioritize in Your First 5 Years in Practice? Katherine A. Gallagher, MD	SESSION 4  Moderator:	LONG-TERM PRACTICE MANAGEMENT James F. McKinsey, MD
8:45 - 9:00	Panel Discussion with Q&A	1:00 - 1:10	COVID19! While We All Want
SESSION 2	INTERVIEWING FOR YOUR FIRST JOB		to Move on from This, What Are Important Lessons We Need to Remember?
Moderator:	James F. McKinsey, MD		Thomas S. Maldonado, MD
9:00 – 9:10	Increasing Opportunities in Vascular Surgery for the New Graduate Anahita Dua, MD, MS, MBA	1:10 – 1:20	Resources Available to You from the Society for Vascular Surgery Michael C. Dalsing, MD
9:10 - 9:20	Interviewing 101: The Right Questions to Ask When Interviewing Jeffrey J. Siracuse, MD	1:20 - 1:30	How Do You Incorporate GME and Being a Program Director into Your Practice Caron B. Rockman, MD
9:20 - 9:30	How to Find Out What the Practice Is Really Like Luis A. Sanchez, MD	1:30 - 1:40	Medical Malpractice – How to Avoid a Lawsuit Christopher J. Abularrage, MD
9:30 - 9:40	Do I Need to Hire a Lawyer to Review My Employment Contract? Ellen D. Dillavou, MD	1:40 - 1:50	Incorporating Diversity, Inclusiveness and Equality into Your Practice Caitlin W. Hicks, MD, MS
9:40 - 9:50	How to Negotiate Your First Contract James F. McKinsey, MD	1:50 - 2:00	How to Incorporate Clinical Innovation and Change into Your Practice
9:50-10:00	Healthcare Delivery in the US and Vascular Surgery - You Made the Right Choice Mark A. Adelman, MD	Christopher J. Kwolek, MD, MBA Long-Term Career Planning: What Are Your Long-Term	
			Goals? Timur P. Sarac, MD
10:00-10:15	Panel Discussion with Q&A	2:10 - 2:20	Resources Available to You
10:15-10:25	Break		from Your Regional Vascular
SESSION 3  Moderator:	FIRST YEAR IN PRACTICE  James F. McKinsey, MD		Societies Peter L. Faries, MD
10:25-10:35	Keys to Building a Successful Practice Venita Chandra, MD	2:20 - 2:30	Tips/Tricks to Manage Malignant Settings, Toxic Leadership, Difficult Partners
10:35-10:45	Building Your Practice: Clinical Practice Joann Lohr, MD	2:30 - 2:40	And Turf Wars Shang Loh, MD Career Options throughout
10:45-10:55	Building Your Practice: Research Programs		Your Career Kenneth J. Cherry, MD
	Wei Zhou, MD	2:40 – 3:00	Panel Discussion with Q&A
10:55-11:05	Building Your Practice: Outcomes Research Marc L. Schermerhorn, MD	3:00 – 5:00	Interactive Cocktail Reception with Faculty, Fellows/Residents,
11:05-11:15	Things I Wish I Had Known When I Was Selecting My First Job Jason T. Lee, MD		Potential Employers and Industry

# SPECIAL NON-CME AND OTHER INDUSTRY SPONSORED EVENTS

(PLEASE VISIT WWW.VEITHSYMPOSIUM.ORG FOR A FULL AND UPDATED LISTING OF THESE ACTIVITIES.)

# TUESDAY, NOVEMBER 15, 2022

# ABBOTT

Lunch Symposium

Time: 12:00 PM - 1:00 PM

Location: Americas Hall 1, 3rd Floor

# **GORE & ASSOCIATES**

Hot topics spanning 25 years of EVAR experience: What can we learn from past and present challenges to better inform EVAR device

selection in the future? **Time:** 12:00 PM – 1:00 PM

Location: Mercury Rotunda & Ballroom, 3rd Floor

# PENUMBRA, INC.

Lunch Symposium

Time: 12:00 PM - 1:30 PM

Location: Gramercy Suite East, 2nd Floor

# WEDNESDAY, NOVEMBER 16, 2022

#### CAGENT VASCULAR

Lunch Symposium: Serration Angioplasty - The Complete Lower

**Extremity Solution** 

Time: 12:00 PM - 1:00 PM

Location: Gramercy Suite East, 2nd Floor

# CONCEPT MEDICAL

Lunch Symposium

Time: 12:00 PM - 1:00 PM

Location: Sutton Parlor Center, 2nd Floor

# **GORE & ASSOCIATES**

Compelling insights from long-term follow-up of the GORE®

VIABAHN® Device family of covered stents

Time: 12:00 PM - 1:00 PM

Location: Mercury Rotunda & Ballroom, 3rd Floor

# JANSSEN PHARMACEUTICALS, INC.

Luncheon: Clinical Insights in CAD and/or PAD: Reducing the Risk of Major Cardiovascular and Major Thrombotic Vascular Events

**Time:** 11:45 AM – 1:00 PM

Location: Madison Suite, 2nd Floor

# **MEDTRONIC**

Vessel Preparation and Treatment Algorithms for Complex Peripheral

Artery Disease

Time: 12:00 PM – 1:00 PM

Location: Medtronic Pavilion - Beekman Parlor, 2nd Floor

# VENOUS VENOUS WORKSHOPS at

# VEITHsymposium

Workshops will include Video Case Presentations, Lectures and Demonstration on vein management by experts, plus Hands-On opportunities where participants can rotate through multiple training stations staffed by professionals to assist with your experience.

**Time:** 1:00 PM – 6:00 PM

Location: Americas Hall 2, 3rd Floor

# SPECIAL NON-CME AND OTHER INDUSTRY SPONSORED EVENTS

# THURSDAY, NOVEMBER 17, 2022

# **EnVVeno Medical Corporation (NVNO)**

Lunch and Learn on New Modalities for Treatment of Chronic Venous Disease (3-Year Data on VenoValve Implant in Colombia - Introduction and Early Results of the Percutaneous enVVE Valve for CVI).

Time: 12:00 PM - 1:30 PM

Location: Madison Suite, 2nd Floor

# **GORE & ASSOCIATES**

Innovations for the Thoracic Aorta: 1st to market TEVAR solutions

for complex anatomies **Time:** 12:00 PM – 1:00 PM

Location: Mercury Rotunda & Ballroom, 3rd Floor

# **MEDTRONIC**

Redefining EVAR Success: A Global Perspectives Discussion

Time: 12:00 PM - 1:00 PM

Location: Medtronic Pavilion - Beekman Parlor, 2nd Floor

#### MIMEDX

Lunch Symposium: Introducing the AMNIOEFFECT and AXIOFILL PURION® Processed Placental-Based Allografts in Vascular Surgery

Time: 12:00 PM - 1:30 PM

Location: Gramercy Suite East, 2nd Floor

# FRIDAY, NOVEMBER 18, 2022

# Vascular Fellows' Career Development Program

Time: 8:00 AM - 5:00 PM

Location: Concourse A, Course Level

# LATIN AMERICAN SESSION at VEITHsymposium



Course Leaders: Enrico Ascher, MD (USA), Jorge H. Ulloa, MD (COL), Rebeca Reachi, MD (MEX), Tulio P. Navarro, MD, PhD (BRA) and Frank J. Veith, MD (USA).

Five-minute presentations in English, Spanish, or Portuguese. Submit abstracts to easchermd@gmail.com no later than October 15, 2022. Best Presentation Award will be given.

Time: 7:30AM - 10:30AM

Location: Sutton Parlor Center, 2nd Floor

# THE BEST CLI TRIAL: A REVIEW AND DISCUSSION OF PRIMARY OUTCOMES

Moderators: Alik Farber, MD, MBA, Matthew T. Menard, MD and

Kenneth Rosenfield, MD **Time:** 1:00 PM - 2:30 PM

Location: Sutton Parlor Center, 2nd Floor

# SPECIAL NON-CME AND OTHER INDUSTRY SPONSORED EVENTS

# WORLD FEDERATION OF VASCULAR SURGERY at VEITHsymposium



Moderators: Palma M. Shaw, MD, MBA, RVPI & Enrico Ascher, MD

The World Federation of Vascular Societies (WFVS) exists to improve the quality of care of vascular patients worldwide, by providing a forum for the international exchange of scientific and educational knowledge related to the diagnosis, treatment and prevention of vascular diseases. The WFVS is composed of member societies consisting of federated, national and affiliate vascular societies.

Time: 5:00 PM - 6:30 PM

Location: Trianon Ballroom, 3rd Floor

SATURDAY, NOVEMBER 19, 2022

# **GORE & ASSOCIATES**

Updates to KDOQI guidelines and their influence on my patient

algorithm

**Time**: 12:00 PM – 1:00 PM

Location: Mercury Rotunda & Ballroom, 3rd Floor

# **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, Cardiac Surgeons and all others interested in the management of vascular disease.

# ASSOCIATE FACULTY GLOBAL PODIUM PRESENTATIONS

Wednesday – Thursday, November 16-18, 2022 **Location:** Concourse A, Concourse Level

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. The best three abstracts will receive cash prizes of \$1,000 (1st place), \$500 (2nd place) and \$250 (3rd place). Please visit www.veithsymposium.org for additional information about the Associate Faculty Global Podium Presentations component of VEITHsymposium.

# **COMPONENT SESSIONS WILL BE HELD AS FOLLOWS:**

# **Multidisciplinary Acute Stroke Management**

Thursday, November 17, 2022

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

# Hemodialysis Access

Saturday, November 19, 2022

Location: Grand Ballroom West, 3rd Floor

### **ACCREDITATION STATEMENT**

In support of improving patient care, Cleveland Clinic Center for Continuing Education is jointly accredited by the Accreditation Council for Continuing Medical Education (ACCME), the Accreditation Council for Pharmacy Education (ACPE), and the American Nurses Credentialing Center (ANCC), to provide continuing education for the healthcare team.

# Credit Designation

# American Medical Association (AMA)

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

# American Nurses Credentialing Center (ANCC)

Cleveland Clinic Center for Continuing Education designates this live activity for a maximum of 48.5 ANCC contact hours.

# Certificate of Participation

A certificate of participation will be provided to other healthcare professionals for requesting credits in accordance with their professional boards and/or associations.

# **ABS CONTINUOUS CERTIFICATION**

Successful completion of this CME activity, which includes participation in the evaluation component, enables the learner to earn credit toward the CME and Self-Assessment requirements of the American Board of Surgery's Continuous Certification program. It is the CME activity provider's responsibility to submit learner

# **GENERAL INFORMATION**

completion information to the ACCME for the purpose of granting ABS credit.

# ETHICAL MEDTECH COMPLIANCE

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

# **CME CERTIFICATES AND COURSE EVALUATION FORMS**

Your CME certificate will be available online within two weeks after the meeting. An e-mail with instructions on how to obtain the certificate and complete a brief, optional course evaluation will be sent to all registered attendees. 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, 2023.** 

# **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 Integrity and Independence requiring mitigation of all faculty conflicts of interest. Faculty declaring a relevant financial relationship will be identified in the activity syllabus.

# **ADA STATEMENT**

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

# **ONLINE CONFERENCE LIBRARY**

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

# **ONLINE ACCESS TO ABSTRACTS**

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

# HOTEL AND TRAVEL

A block of rooms has been reserved at the conference rate of \$349 plus taxes per night. This rate is available until the block is filled or until October 10, 2022. 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)

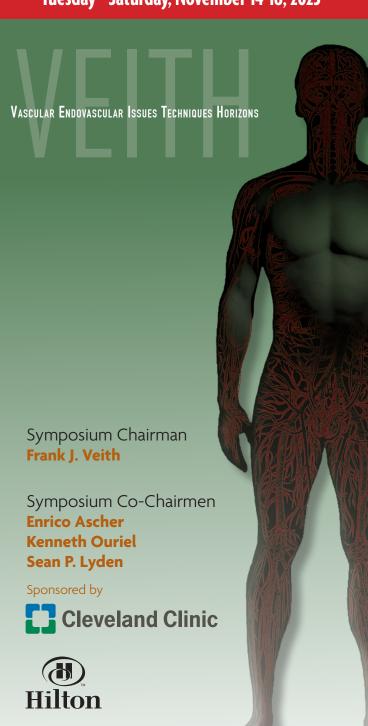
American Express Global Business Travel at The Cleveland Clinic

Phone: (216) 444-2564, Extension 62134971 E-mail: diane.m.geneva@amexgbt.com



# **SAVE THE DATE**

Tuesday - Saturday, November 14-18, 2023





# TUESDAY, NOVEMBER 15, 2022

6:00 A.M. General Registration — Rhinelander Gallery, 2nd Floor 6:00 A.M. Faculty Registration — Gramercy Suite West, 2nd Floor Continental Breakfast - Rhinelander Gallery, 2nd Floor 6:15 A.M.

# **CONCURRENT TUESDAY PROGRAMS**

PROGRAM A: (SESSIONS 1-8)

Progress In The Treatment Of Diseases Of The Coronary Arteries, Heart Valves And The Thoracic And Abdominal Aorta 6:45 A.M. - 6:02 P.M.

Grand Ballroom East, 3rd Floor

PROGRAM B: (SESSIONS 9-16)

Progress In Vascular Robotics, Guidance Systems, Laparoscopy, Simulation And COVID; New Developments In Carotid Disease And Acute Stroke Treatment; Abdominal Aortic Branch Treatment; New Technology Concepts And Artificial Intelligence (AI); Vascular Surgery Identity, Training, Manpower And Mentorship; Updates On Open And Hybrid Vascular Surgery **And Treatment Of Aortic Coarctation** 

6:44 A.M. - 6:05 P.M.

Grand Ballroom West, 3rd Floor

PROGRAM C-1: (SESSIONS 17-18)

Management Of Pulmonary Embolism: The Ultimate

**Team Approach** 

7:00 A.M. - 12:00 P.M. Trianon Ballroom, 3rd Floor Course Leader: Michael R. Jaff

PROGRAM C-2: (SESSIONS 19-22)

Interesting Topics Related To Lower Extremity Occlusive Disease And Its Treatments

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

Trianon Ballroom, 3rd Floor

PROGRAM A (SESSIONS 1-8)

PROGRESS IN THE TREATMENT OF DISEASES OF THE CORONARY ARTERIES, HEART VALVES AND THE THORACIC AND ABDOMINAL AORTA

Grand Ballroom East, 3rd Floor

6:45 - 6:50Opening Remarks Frank J. Veith

(Grand Ballroom East, 3rd Floor)

SESSION 1 PROGRESS IN CORONARY ARTERY STENTING, TRANSCATHETER VALVE REPLACEMENT, AND TREATMENT OF ASCENDING AORTIC DISEASE

Moderators: Hazim J. Safi Roxana Mehran

# **CORONARY STENTS**

6:50 - 6:55What Is New In Coronary Artery Stenting: How Good Are New Drug Eluting Stents: Is There A Role For Bare Metal Stents

Martin B. Leon

6:56 - 7:01Left Main PCI With Drug-Eluting Stents Versus CABG: Clinical Trial Synthesis And Take-Home Messages Gregg W. Stone

	TRANSCATHETER HEART VALVES
7:02 — 7:07	Update On Status Of Transcatheter Mitral Valve Replacement/Repair (TMVR) Juan F. Granada
7:08 — 7:13	<b>DEBATE:</b> Update On Transcatheter Aortic Valve Replacement (TAVR): A Cardiologist's View <i>Martin B. Leon</i>
7:14 — 7:19	<b>DEBATE:</b> Update On Current State Of TAVR: A Cardiac Surgeon's View: What Is The Role Of Surgery In Aortic Valve Disease Treatment And How To Avoid The Need For Alternative Access Sites <i>Ali Khoynezhad</i>
	THE ASCENDING AORTA
7:20 — 7:25	Progress In Endovascular Graft Treatment Of Ascending Aortic Lesions: What Is The Status Of IDEs And Industry Made Graft Rodney A. White
7:26 — 7:31	Progress In Endovascular Combined Devices For Repairing Lesions Of The Ascending Aorta And The Aortic Valve: The Endo-Bentall Concept Ali Khoynezhad
7:32 — 7:37	Endo-Bentall Using A Rendezvous-Access: Why A Combined Transfemoral/Transapical Access Is The Way To Go: How To Do It And Results <i>Tilo Kölbel</i>
7:38 — 7:43	Endovascular Treatment Of Type A Aortic Dissections (TAADs) In 2022: What Is Here And What Is Coming Ali Azizzadeh
7:44 — 7:50	Panel Discussion
LESIONS	(Grand Ballroom East, 3rd Floor) SS IN THE TREATMENT OF AORTIC ARCH AND AORTIC DISSECTIONS SE Alan B. Lumsden Anthony L. Estrera
7:50 — 7:55	Hybrid Repair Of Aortic Arch And Thoracic Aortic Aneurysms Using ThoraFlex (Hybrid) And Relay Devices For Frozen Elephant Trunk (FET) And TEVAR: Indications And Results Joseph S. Coselli Ourania Preventza
7:56 — 8:01	Current Status Of Hybrid Arch Repair With Elephant Trunk And FET: What Does The Future Hold And How Often Are Secondary Procedures Required Anthony L. Estrera
8:02 — 8:07	Update On Endovascular Arch Repair With Cook 2- Or 3-Branched Device For Lesions Involving The Entire Aortic Arch: Indications, Results And Can It Be Combined With An Endo-Bentall: When Is Open Repair The Best Treatment Stephan Haulon
8:08 — 8:13	Comparison Of Early And Mid-Term Results With 2-Branched Endograft (Relay – Terumo Aortic) And Single Branched Device (Nexus – Endospan) For Treatment Of Zone 0 Arch Lesions Toru Kuratani

8:14 — 8:19	Update On Relay Branch For Arch Lesion Endovascular Repairs: Advantages, Limitations And Results <i>Vicente Riambau</i>
	Ciro Ferrer
8:20 — 8:25	Martin Czerny Direction-Turnover Technique For Endovascular
0:20 — 0:23	Repair Of Aortic Arch Lesions With Branched Or In Vitro Fenestrated Endografts
	Qingsheng Lu (PowerPoint Presentation With Synched Audio)  Zaiping Jing
8:26 — 8:31	Total And Partial Aortic Arch Lesion Repairs With The Gore TAG Single Branch Endograft: An Off-The-Shelf (OTS) Device For Revascularizing Arch Branches: Experience To Date, Advantages And Limitations Michael D. Dake Himanshu Patel
8:32 — 8:37	How Best To Treat TBADs Extending Into The Arch Or Ascending Aorta; When Open, When Endo, When Hybrid
	I-Hui Wu
8:38 — 8:43	How To Prevent Complications During Partial Or Total Endovascular Aortic Arch Repairs: Value Of Special Radiopaque Markers
	Chang Shu (PowerPoint Presentation With Synched Audio)
8:44 — 8:49	How Best To Treat Aortic Arch Lesions: Customized Versus Chimney Versus Physician Modified Endografts: When Open: Role Of Each Nicola Mangialardi
8:50 — 8:55	Value Of Ascending Aortic Banding As Primary Or Adjunctive Treatment For Aortic Arch Lesions Chun Che Shih
8:56 <b>-</b> 9:02	Panel Discussion
PROGRES OF AOR STANDA	(Grand Ballroom East, 3rd Floor) SS IN THE ENDOVASCULAR TREATMENT FIC DISSECTIONS: REPORTING RDS, CLASSIFICATION SYSTEMS, STABILISE,
PROGRES OF AOR STANDA AND MO	SS IN THE ENDOVASCULAR TREATMENT FIC DISSECTIONS: REPORTING RDS, CLASSIFICATION SYSTEMS, STABILISE, DRE
PROGRES OF AOR STANDA AND MO	SS IN THE ENDOVASCULAR TREATMENT FIC DISSECTIONS: REPORTING RDS, CLASSIFICATION SYSTEMS, STABILISE,
PROGRES OF AOR STANDA AND MO	SS IN THE ENDOVASCULAR TREATMENT FIC DISSECTIONS: REPORTING RDS, CLASSIFICATION SYSTEMS, STABILISE, DRE SI: Michael D. Dake Joseph V. Lombardi New SVS-STS Aortic Dissection Reporting Standards And Classification System: How Do They Help In Determining Precisely High Risk TBAD Patients
PROGRE OF AOR STANDA AND MC Moderators	SS IN THE ENDOVASCULAR TREATMENT FIC DISSECTIONS: REPORTING RDS, CLASSIFICATION SYSTEMS, STABILISE, DRE  :: Michael D. Dake Joseph V. Lombardi  New SVS-STS Aortic Dissection Reporting Standards And Classification System: How Do They Help In Determining Precisely High Risk TBAD Patients Joseph V. Lombardi  The TEM Aortic Dissection Classification System: What Is It And How Does It Improve Clinical Practice
PROGRE OF AOR STANDA AND MC Moderators 9:02 – 9:07	SS IN THE ENDOVASCULAR TREATMENT FIC DISSECTIONS: REPORTING RDS, CLASSIFICATION SYSTEMS, STABILISE, DRE  :: Michael D. Dake Joseph V. Lombardi  New SVS-STS Aortic Dissection Reporting Standards And Classification System: How Do They Help In Determining Precisely High Risk TBAD Patients Joseph V. Lombardi  The TEM Aortic Dissection Classification System:
PROGRE OF AOR' STANDA AND MC Moderators 9:02 – 9:07 9:08 – 9:13	SS IN THE ENDOVASCULAR TREATMENT FIC DISSECTIONS: REPORTING RDS, CLASSIFICATION SYSTEMS, STABILISE, DRE  :: Michael D. Dake Joseph V. Lombardi  New SVS-STS Aortic Dissection Reporting Standards And Classification System: How Do They Help In Determining Precisely High Risk TBAD Patients Joseph V. Lombardi  The TEM Aortic Dissection Classification System: What Is It And How Does It Improve Clinical Practice Martin Czerny  Current Advances And Trends In TEVAR Treatment For Type B Aortic Dissection In China: More Or Less Liberal Use; More Or Less Aortic Coverage; What Adjunctive Procedures Are Used More  Weiguo Fu (PowerPoint Presentation With Synched Audio)  Update On The STABILISE Concept For Treating Acute And Chronic TBADs By Disrupting The Intimal Flap By Overdilating The Distal Bare Stent: How It Works, Precautions, And Should It Be The Treatment Of
PROGRE OF AOR' STANDA AND MC Moderators 9:02 – 9:07 9:08 – 9:13 9:14 – 9:19	SS IN THE ENDOVASCULAR TREATMENT FIC DISSECTIONS: REPORTING RDS, CLASSIFICATION SYSTEMS, STABILISE, ORE  SIMICHARD D. Dake  Joseph V. Lombardi  New SVS-STS Aortic Dissection Reporting Standards And Classification System: How Do They Help In Determining Precisely High Risk TBAD Patients  Joseph V. Lombardi  The TEM Aortic Dissection Classification System:  What Is It And How Does It Improve Clinical Practice  Martin Czerny  Current Advances And Trends In TEVAR Treatment  For Type B Aortic Dissection In China: More Or Less  Liberal Use; More Or Less Aortic Coverage; What  Adjunctive Procedures Are Used More  Weiguo Fu (PowerPoint Presentation With Synched Audio)  Update On The STABILISE Concept For Treating Acute  And Chronic TBADs By Disrupting The Intimal Flap  By Overdilating The Distal Bare Stent: How It Works,

9:26 — 9:31	Considerations For Parallel Endografts In The Management Of Arch Vessels In Very Proximal Type B Aortic Dissections David J. Minion
9:32 — 9:37	Dual Lumen Interventions To Promote False Lumen Thrombosis In Chronic Aortic Dissections: The FLIRT Procedure: Indications, Technique And Results Christoph A. Nienaber
9:38 — 9:43	There Will Always Be A Need For Open Repair For Post-Dissection TAAAs: In What Circumstances Hazim J. Safi Anthony L. Estrera
9:44 — 9:49	Distal Stent-Graft Induced New Re-Entry Tears (SINEs) With TEVAR Treatment Of TBADs: Prevention By Avoiding Oversizing And Ballooning And Using Tapered Endografts  Ludovic Canaud
9:50 - 9:55	The Impact Of Distal Stent-Graft Induced New Entry Tears On Aortic Remodeling Of Chronic TBADs: How To Prevent And Treat Them Chun Che Shih
9:56 -10:01	Highlights From The New AHA, ACC, AATS, SVS, ACR, STS, SVM, SCAI, SCA Aortic Disease Guidelines <i>James H. Black, III</i>
10:02-10:07	The Global Experience With Endovascular Aortic Repair In >200 Patients With Connective Tissue Disease: Is There A Role Anders Wanhainen
10:08-10:14	Panel Discussion
10:14-10:24	Break - Visit Exhibits And Pavilions (2nd and 3rd Floors)
MORE N	(Grand Ballroom East, 3rd Floor) EW DEVELOPMENTS IN THE TREATMENT
THORAC	Ds, THORACIC AORTIC DISEASE AND COABDOMINAL ANEURYSMS (TAAAs) II: Hazim J. Safi Ali Khovnezhad
THORAC	COABDOMINAL ANEURYSMS (TAAAs)
THORAC Moderators	COABDOMINAL ANEURYSMS (TAAAs)  E Hazim J. Safi Ali Khoynezhad  Long-Term Durability Of Open Repair Of Type I-IV  TAAAs Remains Excellent: When Should It Be The First Line Treatment And When Should A Hybrid  (Endo + Open) Down-Staging Approach Be Used To Improve Outcomes: How To Do The Latter  Mark Conrad
THORAC Moderators 10:24-10:29	COABDOMINAL ANEURYSMS (TAAAs)  :: Hazim J. Safi Ali Khoynezhad  Long-Term Durability Of Open Repair Of Type I-IV TAAAs Remains Excellent: When Should It Be The First Line Treatment And When Should A Hybrid (Endo + Open) Down-Staging Approach Be Used To Improve Outcomes: How To Do The Latter Mark Conrad Richard P. Cambria  New Strategies And Indications For Open TAAA Repair Including Failed EVAR And F/B/EVAR: Technical Tips And Results Andrea Kahlberg Roberto Chiesa

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10:48-10:53	Changing Current Trends In Management And Outcomes With Acute TBADs: Based On 3000 Patients In The IRAD Registry Over 25 Years: What Is Helping
	And What Is Not
	Santi Trimarchi
10:54-10:59	Why Is F/B/EVAR The Best Treatment For Post TBAD TAAAs: Challenges And Results From A 10-Year Experience  Eric L.G. Verhoeven  Athanasios Katsargyris
11:00-11:05	Roles Of Inner And Outer Branched Endografts And The t-Branch OTS Device (Cook) To Treat TAAAs After TBADs: Technical Tips And Results Marcelo Ferreira
11:06-11:12	Panel Discussion
11:12-11:17	Gore TAMBE Endovascular Graft Device For TAAA Repair: How Does It Work: Advantages And Limitations Michel S. Makaroun Mark A. Farber
11:18-11:23	Unitary Manifold Endograft System For Complex Type 4 TAAAs, Aneurysms With Chronic TBADs, Ruptured Complex AAAs And Failed Prior EVAR Repairs: How Does It Work And Up To 9-Year Results Patrick W. Kelly
11:24-11:29	Type A Aortic Dissection With Malperfusion: When Should TEVAR Be The First Order Of Business Before Fixing The Ascending Aorta: Where Should The TEVAR Be Placed And What Are The Advantages And Dangers Firas F. Mussa
11:30-11:35	Improved Aortic Remodeling With TEVAR And A Distal Bare Metal Stent In Acute Complicated TBAD Christoph A. Nienaber
11:36-11:41	Embolization And Other Strategies To Achieve Complete False Lumen Exclusion With Endovascular Repair Of Dissecting Aneurysms With TAAAs Carlos H. Timaran
11:42-11:47	Varying Solutions To Treat Type 1 Endoleaks After TEVAR And EVAR Nicola Mangialardi
11:48-11:53	High Failure Rate Of Best Medical Treatment For Intramural Hematoma Mandates Increased Use Of TEVAR: Does This Help Outcomes  Jean M. Panneton
11:54-12:00	Panel Discussion Publisher
12:00- 1:00	Lunch Break - Visit Exhibits And Pavilions (2nd and 3rd Floors)
SESSION 5	(Grand Ballroom East, 3rd Floor)
NEW DE	VELONE DAMENTS IN ABDOMINAL AORTIC

ANEURYSM (AAA) ETIOLOGY AND TREATMENT, EVAR AND EVAS (ENDOVASCULAR ANEURYSM

SEALING) (5 AND 4 ¾-MINUTE [SS] TALKS) Moderators: Ronald L. Dalman Grace J. Wang

1:00 — 1:05	Current Pros And Cons Of The Nellix EVAS Endograft For AAA Repair: Latest Update Of The EVAS 2 IDE Trial Of The Modified Improved Nellix Endograft With 2-Year Results: Why Is Mid-Term Mortality Better With EVAS Than EVAR Marc L. Schermerhorn Jeffrey P. Carpenter
1:06 — 1:11	What Is The Best Type Of Evidence To Evaluate The Relative Value Of EVAR Versus Open Repair: RCTs May Not Reflect Reality As Well As Other Methods: The NICE Guidelines Prove It Matt M. Thompson
1:12 — 1:17	Failing EVARs Are An Enlarging Epidemic: Etiology And How Best To Avoid And Treat The Problem Murray L. Shames
1:18 — 1:23	Diabetes And AAAs: Facts, Clues And Potential Treatment Opportunities Ronald L. Dalman
1:24 — 1:29	[SS] Further Thoughts About The Odd Relationship Between Diabetes And AAA Disease: How Should It Influence Treatment Christos D. Liapis
1:29 — 1:34	[SS] How Does Metformin Work To Slow AAA Growth At The Cellular Level: Could It Be Effective Treatment For Small AAAs: Is It The Reason For Decreased AAA Incidence In Diabetics Kak Khee Yeung
1:34 — 1:39	[SS] The Metformin For AAA Growth Inhibition (MAAGI) Multicenter Trial: Design And 3-Year Results  Anders Wanhainen
100 1//	
1:39 — 1:46	Panel Discussion
	: Michel S. Makaroun Caron B. Rockman
1:46 — 1:51	Evolved Treatment Algorithm For Aortic Graft Infections Endo And Open: Lessons Learned From A Large Tertiary Experience Martin R. Back
1:52 — 1:57	Decreased AAA Sac Diameter After EVAR Is Associated With Good Outcomes While Sac Stability Is Not Andres Schanzer
1:57 — 2:02	Sac Dynamics After EVAR Influence Long-Term Survival: What Can Be Done To Improve AAA Sac Shrinkage: Can Filling The Sac With Polymer Plugs From Shape Memory Medical Promote Shrinkage: The AAA-SHAPE-NLD Study Michel M.P. Reijnen Andrew Holden
2:03 — 2:08	In Patients Suitable For EVAR Or Open Repair, Adverse Neck Anatomy (Short, Wide, Angulated) Is Associated With Increased Reintervention And Mortality Rates Equally After Open And Endo Repairs: From The DREAM RCT: How Should This Influence Treatment <i>Jan B. Blankensteijn</i>
2:09 — 2:14	How Best To Treat Iliac Aneurysms In 2022: When Endo; Open Repair Is Sometimes Essential: Technical Tips  Heron E. Rodriguez

2:15 — 2:20	EVAR Surveillance Models Have Failed: How They Should Be Changed Ian Loftus Pete Holt
2:21 — 2:26	Which AAA Patients Should Get Open Repair (OR) In 2022: Young Healthy Patients With Large AAAs Do Better With OR: But EVAR Outcomes Are Improving While OR Outcomes Are Not Marc L. Schermerhorn
2:27 — 2:40	Panel Discussion And Break Visit Exhibits And Pavilions (2nd and 3rd Floors)
MORE A UK NICE	(Grand Ballroom East, 3rd Floor) BOUT AAAS AND EVAR: UPDATES ON THE AAA GUIDELINES AND SACCULAR AAAS S: Matt M. Thompson Bhama Ramkhelawon Maarit Venermo
2:40 — 2:45	Are Key Points In The NICE Guidelines For Treatment Of AAAs Still Valid And Should They Be Applied And Used More Widely Or Less Widely Nicholas J.W. Cheshire
2:46 — 2:51	Review Of All AAA Guidelines: Do They Support Or Refute The NICE AAA Guidelines Alun H. Davies
2:52 — 2:57	Why Are The NICE AAA Guidelines So Flawed: Has Bias Played A Role Frans L. Moll (PowerPoint Presentation With Synched Audio)
2:58 — 3:03	Are The NICE AAA Guidelines The End Of EVAR In The UK: Why The Guidelines Are Wrong And Can They Be Fixed Michael P. Jenkins, BSc
3:04 — 3:09	Impact Of NICE AAA Draft And Final Guidelines On Complex AAA Endovascular Repair: Will They Be Good For Patients Tara M. Mastracci
3:10 — 3:15	What Has Been The Impact Of The UK NICE AAA Guidelines In Germany And Elsewhere – Despite Their Flaws Dittmar Böckler
3:16 — 3:21	Long-Term Results Of The OVER RCT: Pertinence To NICE AAA Guidelines: How Operator Training And Experience Influence EVAR Outcomes Jon S. Matsumura
3:22 — 3:27	Why EVAR Is Not The Best Treatment For All AAAs – Especially In Young Patients (<70) With A Long Life Expectancy Fabio Verzini
3:28 — 3:33	Spontaneous Infrarenal Acute Aortic Syndrome: What Is It And How Should It Be Treated Felice Pecoraro
3:34 - 3:39	Should Saccular AAAs Be Fixed At A Smaller Diameter Than Fusiform AAAs: How Should Saccular AAA Diameter Be Measured: To Include The Normal Aorta Or Not  Frans L. Moll (PowerPoint Presentation With Synched Audio)
3:40 — 3:45	With Failed EVAR, When Is F/EVAR The Best Treatment: Tips And Tricks For Performing It Successfully Andres Schanzer
3:46 — 3:56	Panel Discussion

SESSION 7 (Grand Ballroom East, 3rd Floor) MORE NEW DEVELOPMENTS IN THE TREATMENT OF AORTIC DISSECTIONS AND THORACIC PATHOLOGY; STROKE PREVENTION WITH TEVAR		
Moderators	s: Mark A. Farber Manju Kalra	
3:56 - 4:01	Update On Prevention Of Gas Emboli And Stroke With TEVAR And Other Cardiovascular Interventions: Why It's Such A Big Deal: What Is The STEP 2 Study Telling Us Tilo Kölbel Stephan Haulon	
4:02 — 4:07	How Well Do Young/Old Patients Recover Mentally And Physically After Treatment For Type A And Type B Aortic Dissections: What Can Be Done To Improve This Recovery Richard G.J. Gibbs	
4:08 — 4:13	Update On Value Of Embolic Brain Protection Devices For Proximal TEVAR And TAVR Procedures: When Are They Indicated And When Not Joseph V. Lombardi Jeffrey P. Carpenter	
4:14 – 4:19	Physician Modified Double Fenestrated Stent-Grafts For Total Aortic Arch Repair: Results In 100 Patients: Advantages And Limitations Ludovic Canaud	
4:20 - 4:25	Will More Oversizing Of Thoracic Endografts Prevent Bird Beaking And Type I Endoleaks With TEVAR In The Aortic Arch: Will Oversizing Cause Other Problems: What Is The Optimal Sizing In This Location <i>Thomas L. Forbes</i>	
4:26 — 4:31	Natural History Of Aortic Intramural Hematomas (IMHs) And Predictors Of Need For TEVAR Treatment: Which IMH Patients Do Not Need TEVAR <i>I-Hui Wu</i>	
4:32 — 4:37	How To Deal With An Uncontrolled And Enlarging False Lumen After TEVAR For TBADs Cherrie Z. Abraham	
4:38 — 4:43	Long-Term (>5 Years) Good Results Of Valiant Captiva Endografts For TEVAR In TBAD Patients: Advantages And Disadvantages Joseph E. Bavaria	
4:44 — 4:49	How To Treat Aortic Dissections With An Entry Tear In The Aortic Arch Santi Trimarchi	
4:50 - 4:56	Panel Discussion	
MORE N AND TEV	(Grand Ballroom East, 3rd Floor) IEW DEVELOPMENTS REGARDING TBADS VAR: NATURAL HISTORY; NEED FOR AND OF TEVAR FOR ACUTE UNCOMPLICATED	
	s: Joseph E. Bavaria Thomas L. Forbes	
4:56 — 5:01	Long-Term Outcomes Of Medically Managed Acute TBADs: How Were Patients Selected For This Treatment Thomas C. Bower	

# MEGA DEBATE ON TREATMENT OF ACUTE UNCOMPLICATED TBADS

5:02 — 5:07	<b>DEBATE:</b> Many Uncomplicated Acute TBADs Never Need Invasive Interventions And Are Better Treated Medically; How To Select Such Patients Rachel E. Clough
5:08 — 5:13	<b>DEBATE:</b> With Uncomplicated Acute TBADs, The Case For Waiting 2-6 Weeks From Onset And Then Limiting Aortic Coverage With TEVAR <i>Mark A. Farber</i>
5:14 — 5:19	<b>DEBATE</b> : With Uncomplicated TBADs, The Case For Early TEVAR With Extensive Aortic Coverage In Most Patients  William D. Jordan, Jr.  Brad Leshnower
5:20 — 5:25	<b>DEBATE:</b> Early Intervention For Acute TBADs (7-30 Days After Onset) With TEVAR For Acute TBADs Prevents Abdominal Extension Of False Lumen And TAAA Formation Rodney A. White
5:26 — 5:31	Impact Of Timing On Outcomes After TEVAR For Acute Uncomplicated TBAD Patients: When Is Medical Treatment Indicated Ali Azizzadeh
5:32 - 5:37	Incidence And Importance Of Reinterventions Following F/B/EVAR: Are They A Marker Of Bad Care Or Good Care: From The Aortic Research Consortium (ARC) Sara L. Zettervall Benjamin W. Starnes Andres Schanzer
5:38 - 5:43	With TBADs Distal Fenestrations Are As Important As The Primary Tear: What Can And Should Be Done About Them Frank R. Arko
5:44 — 5:49	Techniques For And Advantages Of Rerouting A Misplaced TEVAR Which Is Leading To A Growing False Lumen And Malperfusion In Acute TBAD Patients David M. Williams
5:50 — 5:55	Re-Entry Specific Endovascular Therapy (RESET), i.e., TEVAR Plus Dealing With Re-Entry Tears Improves Outcomes: How To Do It <i>Jean M. Panneton</i>
5:56 — 6:02	Panel Discussion
	End of Program A
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PROGRAM B (SESSIONS 9-16)
PROGRESS IN VASCULAR ROBOTICS, GUIDANCE
SYSTEMS, LAPAROSCOPY, SIMULATION AND
COVID; NEW DEVELOPMENTS IN CAROTID
DISEASE AND ACUTE STROKE TREATMENT;
ABDOMINAL AORTIC BRANCH TREATMENT;
NEW TECHNOLOGY CONCEPTS AND ARTIFICIAL
INTELLIGENCE (AI); VASCULAR SURGERY IDENTITY,
TRAINING, MANPOWER AND MENTORSHIP;
UPDATES ON OPEN AND HYBRID VASCULAR
SURGERY AND TREATMENT OF AORTIC
COARCTATION

Grand Ballroom West, 3rd Floor

6:44 **–** 6:49 Opening Remarks

0:44 — 0:47	Enrico Ascher
PROGRE LAPAROS SIMULAT	(Grand Ballroom West, 3rd Floor) SS IN VASCULAR ROBOTICS, SCOPY, GUIDANCE SYSTEMS AND FION S: Willem Wisselink Celia Riga
6:50 — 6:55	Update On Endovascular Robotics: They Have A Promising Future Joseph J. Ricotta II
6:56 — 7:01	Laparoscopic Assisted Aortofemoral Bypasses For Juxtarenal Aortic Occlusions: Why It Is The Best Treatment Method As Indicated By Long And Short Term Outcomes: What Are The Risks <i>Joseph S. Giglia</i>
7:02 — 7:07	Laparoscopic Robotic Assisted Aortic Surgery: Is It Worthwhile And Cost Effective In The Endovascular Era: Based On A 7-Year Experience In 87 Patients Pierre-Olivier Thiney
7:08 — 7:13	Laparoscopic Aortic Surgery: How I Did It Routinely And Why I Stopped After More Than 150 Cases Laurent Chiche
7:14 — 7:19	Present Status And Future Potential Of Radiation Free Guidewire And Catheter Guidance: The Fiber Optic RealShape (FORS) From Philips: What Are Microbots And How Do They Work Barry T. Katzen
7:20 — 7:25	Updated Experience With The Fiberoptic 3D Endovascular Guidance With The FORS System (Philips): How Does It Work, Advantages And Limitations  Joost A. van Herwaarden
7:26 - 7:31	Update On The 3D Radiation Free Intraoperative Positioning System (IOPS) From Centerline For Endovascular Guidance: How Does It Work, Advantages And Limitations  Matthew J. Eagleton
7:32 – 7:37	The MAZE BOX: A Simple Table Top Endovascular Simulator For Training In Endovascular Tasks And Procedures  Barend M.E. Mees
7:38 — 7:44	Panel Discussion
NEW DE AND ITS TREATM STENOS	(Grand Ballroom West, 3rd Floor) VELOPMENTS IN CAROTID DISEASE TREATMENT; DIFFERING VIEWS ON ENT OF ASYMPTOMATIC CAROTID IS (ACS) AND CAROTID SCREENING S: Ali F. AbuRahma Anne L. Abbott Adnan H. Siddiqui
7:44 — 7:49	International Variations In Carotid Stenosis Treatment Within Countries And Between Countries Is Huge Despite All The RCTs On Which They Are Based Being The Same: What Are The Implications  Macrit Venermo

Maarit Venermo

7:50 — 7:55	Current Optimal Treatment For Carotid Artery Dissection: When Best Medical Therapy (BMT), When Open Surgery, When Carotid Stenting (CAS) With Proximal Embolic Protection Felice Pecoraro
7:56 — 8:01	What Vascular Surgeons And Vascular Specialists Need To Know About What Can Be Learned From MRI And MRA Studies Of The Head And Neck Allan L. Brook
8:02 — 8:07	Update On Near Total Occlusions And String Signs Of The Internal Carotid Artery (ICA): How Are They Best Treated: When Conservatively; When Invasively By CEA; By CAS: How Does Newer Imaging Help Christos D. Liapis
8:08 — 8:13	Update On Isolated Carotid Webs As A Cause Of Cryptogenic Stroke: How Best To Diagnose And Treat: How Should Asymptomatic Webs Be Treated Evan C. Lipsitz
8:14 - 8:20	Panel Discussion
	DIFFERING VIEWS ON TREATMENT OF ACS
8:20 — 8:25	<b>DEBATE:</b> ALL Asymptomatic Carotid Stenosis (ACS) Patients Are Best Treated Medically: Invasive Treatment Causes More Harm Than Good <i>Anne L. Abbott</i>
8:26 — 8:31	<b>DEBATE:</b> Not So: About 25% Of ACS Patients Can Benefit From CEA Or CAS And Should Be So Treated <i>Bruce A. Perler</i>
8:32 — 8:37	<b>DEBATE:</b> Both Views Are Wrong: Severe Carotid Stenosis Has Declined As A Cause Of Ischemic Stroke To <1% Per Year: So <5% Of ACS Patients Should Be Treated Invasively <i>Robert W. Chang</i>
8:38 — 8:43	With ACS: When Not To Treat Invasively And When To Treat Invasively: A Balanced Logical View – But No One Knows Which View Is Right Or Best Martin Storck
	DIFFERING VIEWS ON CAROTID SCREENING
8:44 — 8:49	<b>DEBATE:</b> The Case For Widespread Carotid Screening <i>George S. Lavenson</i>
8:50 — 8:55	<b>DEBATE:</b> The Case Against Carotid Screening: It Leads To Unneeded And Possibly Harmful Treatment Anne L. Abbott
8:56 — 9:01	What Are The Effects Of A Minor Stroke With Apparent Full Recovery: Minor Strokes Are By No Means Minor: Why Is This Important In Evaluating The Conclusions Of The CREST Trial Emmanuel M. Houdart
9:02 — 9:07	Screening For ACS And Common Femoral Artery Disease: How Can It Guide Lipid Treatment: How Low Should LDL-Cholesterol (LDL-C) Be Pushed And What Will It Do To Carotid Plaques Stavros Kakkos Andrew N. Nicolaides
9:08 — 9:15	Panel Discussion
9:15 — 9:30	Break – Visit Exhibits And Pavilions (2nd and 3rd Floors)

SESSION 11 (Grand Ballroom West, 3rd Floor) MORE ABOUT CAROTID AND VERTEBRAL DISEASE: UPDATE ON INVASIVE TREATMENT FOR ACUTE STROKES Moderators: Allan L. Brook Klaus D. Mathias Thomas G. Brott	
9:30 — 9:35	Carotid Artery Aneurysms: What Etiologies Cause Them; When Is Endovascular Treatment Best And Technical Tips For Doing So Successfully Klaus D. Mathias
9:36 — 9:41	When After Thrombolysis Treatment For A Stroke Should Carotid Endarterectomy (CEA) Be Performed And What Is The Best Timing For Those CEAs: Delay Has Consequences: But CEA Within 48 Hours Of Symptom Onset Has A Higher Complication Rate Maarit Venermo
9:42 — 9:47	Why Vascular Surgeons Should Become Involved In Intracranial Endovascular Treatments For Acute Strokes: How To Learn These Procedures And Benefit Patients Laura Capoccia
9:48 — 9:53	With Acute Strokes What Is New With Endovascular Intracranial Techniques For Arterial Clot Removal: How Can Artificial Intelligence (AI) And Intraarterial Thrombolysis With Alteplase (Genentech) Help – From The CHOICE RCT Adnan H. Siddiqui L. Nelson Hopkins
9:54 — 9:59	How Can Intolerance To Carotid Clamping Be Predicted Before CEA: It Is An Indication For CAS Piotr Myrcha
10:00-10:05	Acute Stroke Interventions: What Is New: Who Should Do Them And Lessons Learned Horst Sievert
10:06-10:11	How Best To Treat An ICA Occlusion With Distal Embolization: Sequence And Timing Of Treatment: Site Of Treatment (OR Versus Angio Suite Versus Hybrid Room): Technical Tips Adnan H. Siddiqui L. Nelson Hopkins
10:12-10:17	Differences In Outcomes Of Carotid Interventions (CEA And CAS) In Women And Younger Patients: What Is The Impact Of These Differences On Patient Management  Caron B. Rockman
10:18-10:23	Endovascular Interventions In The Vertebro-Basilar System For Acute Strokes: A New Horizon, What Is Involved And Results Ivo Petrov
10:24-10:30	Panel Discussion
SESSION 12 (Grand Ballroom West, 3rd Floor) PROGRESS IN THE TREATMENT OF AORTIC AND AORTO-ILIAC OCCLUSIVE DISEASE Moderators: Daniel G. Clair Wayne W. Zhang	

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10:30-10:35	Current Concepts And Techniques For Treating External Iliac Artery Endofibrosis In Committed Athletes: What Works And Doesn't Work: Is There A Role For Endovascular Treatment Kenneth J. Cherry
10:36-10:41	Iliac Stenosis In Professional Cyclists: How To Diagnose And Treat: ABIs Don't Help Gabriel Szendro
10:42-10:47	Value Of VBX Balloon Expandable Covered Stents In Treating Complex Aorto-Iliac Occlusive Disease: Advantages And Limitations Palma Shaw
COVERED ENDOVASCULAR RECONSTRUCTION OF THE AORTIC BIFURCATION (CERAB) PROCEDURE	
10:48-10:53	Long-Term Outcomes Of The CERAB Procedure With Covered Stents For Complex Aorto-Iliac Occlusive Disease: Why It's Better Than Kissing Stents And Which Covered Stent Works Best Michel M.P. Reijnen Peter C.J. session
10:54-10:59	The CERAB Technique: From A Niche Procedure To A Worldwide Solution For Complex Aorto-Iliac Occlusive Disease  Maria A. Ruffino
11:00-11:05	Covered Endovascular Reconstruction Of The Aortic Bifurcation (CERAB) Technique: Multicenter UK Experience Hany Zayed
11:06-11:11	Value Of Shockwave Intravascular Lithotripsy (IVL) For Calcified Aorto-Iliac Occlusive Disease Treatment And Other Lower Extremity Arterial Lesions: The DISRUPT PAD III RCT Andrew Holden Gunnar Tepe William A. Gray
11:12-11:18	Panel Discussion
11:18-11:23	Treatment Of Infrarenal And Pararenal Aortic Stenosis: When Stents; When Stent-Grafts; When Open Bypass Or Endarterectomy Sigrid Nikol
11:24-11:29	Endovascular Treatment Of Difficult Aorto-Iliac Occlusions: Technical Tips And Late Results: Is Open Repair Ever Needed Sonia Ronchey
11:30-11:35	<b>DEBATE</b> : How To Treat Chronic Flush Juxtarenal Aortic Occlusions Endovascularly With Safety: Endo Is The Way To Go  David J. Minion
11:36-11:41	<b>DEBATE</b> : Not So: Open Surgery Is The Best Way To Treat Flush Juxtarenal Aortic Occlusions Safely: Technical Tips On How To Do It Transperitoneally And Retroperitoneally <i>Thomas C. Bower</i>
11:42-11:47	<b>DEBATE:</b> Both Wrong: Hybrid Repairs Are Best For Complex Aorto-Iliac Occlusive Disease: Technical Tips On How To Do It <i>Yamume Tshomba</i>

11:48-11:53	Impact Of Female Gender On Outcomes Of Endovascular Treatment Of Aorto-Iliac Occlusive Disease: When Is Open Repair Indicated
	Franco Grego
11:54-12:00	Panel Discussion
12:00 - 1:00	Lunch Break - Visit Exhibits And Pavilions (2nd and 3rd Floors)
NEW CC ARTIFICI (SEE ALS	(Grand Ballroom West, 3rd Floor) DNCEPTS, MACHINE LEARNING AND AL INTELLIGENCE (AI) O SESSION 87) s: Barry T. Katzen Lindsay Machan Frank J. Veith
1:00 — 1:05	What Is Big Data In Vascular Surgery: How Can It Be Used With Artificial Intelligence (AI) In Evidence Based Medicine: Could It Replace Randomized Controlled Trials (RCTs) Jean-Baptiste Ricco (PowerPoint Presentation With Synched Audio)
1:06 — 1:11	What Is The Bright Future Of AI And Robotic Technology In Vascular Surgery Willem Wisselink
1:12 - 1:17	How AI Will Change The Way We Practice Medicine Lindsay Machan
1:18 — 1:23	Update On How Vascular Treatment Will Intersect With Other New Technologies: Wearable Trackers, AI, And Using CT Scans To Predict Plaque Histology (ElucidVivo) David H. Deaton
1:24 — 1:29	How 3D And 4D Machine Learning Is Changing Vascular Surgery Matthew T. Menard
1:30 — 1:35	Is Image Fusion Guidance For Complex And Simple Aortic Procedures Really Worthwhile And Cost Effective: Why Is It A Question Rachel E. Clough
1:36 — 1:41	How Can AI Facilitate AAA Monitoring And Volume Measurement Before And After EVAR Stephan Haulon
1:42 — 1:47	High Fidelity Computer Modeling: How Can It Help In Graft Selection And Procedural Performance With TEVAR And EVAR Santi Trimarchi
1:48 — 1:53	Siemens I-Flow: A New Intelligent Technology To Improve The Endo Treatment Of Lower Extremity Occlusive Disease Ravi K. Veeraswamy
1:54 — 1:59	Dual Fluoroscopy With Digital Zooming And Other Strategies To Decrease Radiation During Complex AAA Repairs Carlos H. Timaran
2:00 — 2:05	How Can AI Be Used To Predict Endoleaks And AAA Growth: Will It Have Clinical Value Kak Khee Yeung
2:06 — 2:12	Panel Discussion

SESSION 14 (Grand Ballroom West, 3rd Floor)
PART 1: VASCULAR SURGERY'S NUMBERS AND
IDENTITY AND HOW TO MEET THE
SPECIALTY'S NEEDS FOR ITS SERVICES; THE
IMPORTANCE OF MENTORSHIP IN VASCULAR
SURGERY

PART 2: LATE BREAKING DEVELOPMENTS IN COVID RELATED VASCULAR DISEASE ISSUES

PART 1 – VASCULAR SURGERY'S NUMBERS AND IDENTITY AND HOW TO MEET THE SPECIALTY'S NEEDS FOR ITS SERVICES; THE IMPORTANCE OF MENTORSHIP IN VASCULAR SURGERY

Moderators: Samuel R. Money Jerry Goldstone

- 2:12 2:17 What Makes Vascular Surgery Different, Why Are There Insufficient Numbers Of Vascular Surgeons: How Can We Expand Our Numbers Evan C. Lipsitz
- 2:18 2:23

  Update On Applicants For 0+5 And 5+2 Vascular Surgery Training Programs: The Number Of Applicants Is Up: What About Their Quality: Do We Need More Programs

  Peter L. Faries

  Murray L. Shames
- 2.24 2.29 Increased Diversity In Vascular Surgery And Will It Improve The Shortage Of Vascular Surgeons

  Dawn M. Coleman
- 2.30 2.35 Why US News & World Report Cannot And Does Not Rank Vascular Surgery Programs: Vascular Surgery Needs To Be An Independent ABMS Approved Specialty: Why Isn't It
- 2:36 2:41 The Key To More Vascular Surgeons Is Better Exposure
  To Medical Students: We Are A Hidden Specialty
  Because Of Our Subordinate Specialty Status Which
  Also Limits Our Training Programs
- 2.42 2.47

  Jerry Goldstone

  The Importance Of Mentorship In Vascular Surgery:
  How Best To Achieve It

  Audra Duncan
- 2:48 2:53 Panel Discussion

PART 2 – LATE BREAKING DEVELOPMENTS IN COVID RELATED VASCULAR DISEASE ISSUES

Moderators: Michel S. Makaroun Ronald L. Dalman

- 2:54 2:59 The COVID Pandemic And Its Effects On The Staffing And Economics Of A Hospital System: How Best To Deal With These Effects

  Samuel R. Money
- 3:00 3:05

  Late Breaking Factual Developments In The Prophylaxis
  And Treatment Of COVID-19: Update On The Real

Value Of Vaccines, Boosters And Antivirals
Clayton J. Brinster

3:06 – 3:11 Impact Of COVID-19 On The Extra- And Intracranial

Circulation: How Effective Are Endovascular Treatments

Allan L. Brook

3:12 - 3:17	How Does COVID Influence The Occurrence Of Luminal Thrombus During CEA And CEA Timing; What Should Be Done During Invasive Treatment Domenico Valenti
0.10 0.00	
3:18 - 3:23 3:24 - 3:36	Panel Discussion Break - Visit Exhibits And Pavilions (2nd and 3rd Floors)
PROGRES RENAL A	(Grand Ballroom West, 3rd Floor) SS IN THE TREATMENT OF VISCERAL AND ARTERY DISEASE SE James C. Stanley Michael C. Dalsing
3:36 — 3:41	<b>DEBATE:</b> All Visceral And Renal Artery Aneurysms Can Be Treated Endovascularly Robert A. Lookstein
3:42 - 3:47	<b>DEBATE:</b> Open Treatment Of Visceral And Renal Artery Aneurysms Is Sometimes Best: When Is This <i>Timur P. Sarac</i>
3:48 — 3:53	Open Retrograde SMA Stenting: When Is It Indicated And How To Do It Richard J. Powell
3:54 — 3:59	With Acute Mesenteric Ischemia With Peritoneal Signs, Laparotomy And Retrograde SMA Stenting Is The Best Treatment: Technical Tips To Do It Safely And Quickly Markus K. Furrer
4:00 - 4:05	Technical Tips For Recanalizing Long Complex Visceral Artery (SMA) Occlusions Armando Mansilha
4:06 — 4:11	Renal And Visceral Arterial Interventions: How To Get Into Trouble And How To Get Out Of Trouble Benjamin M. Jackson Ronald M. Fairman
4:12 — 4:17	Update On New SVS Practice Guidelines For Treating Visceral Artery Aneurysms; When Endo; When Open Rabih A. Chaer
4:18 — 4:23	The Vascular Low Frequency Consortium: What Is It And What Does It Tell Us About The Size When Renal Artery Aneurysms Become Dangerous: It Is >3 cm In Diameter  Peter F. Lawrence
4:24 — 4:29	Optimal Current Treatment Of Renal Artery Aneurysms: When Endo; When Open; Technical Tips Fred A. Weaver
4:30-4:36	Panel Discussion
UPDATE AND HY TREATM	(Grand Ballroom West, 3rd Floor) ON OPEN VASCULAR SURGICAL BRID PROCEDURES; PROGRESS IN THE ENT OF AORTIC COARCTATIONS SIE Linda M. Harris Jerry Goldstone
	OPEN AND HYBRID VASCULAR SURGERY
4:36 — 4:41	Coral Reef Atherosclerotic Lesions Of The Aorta And Common Femoral Artery Are Best Treated By Open Repair Laurent Chiche
4:42 — 4:47	Technical Tips For Performing Retroperitoneal Aorto-Bifemoral Bypass (Video Presentation)  William J. Quinones-Baldrich

4:48 — 4:53	Tips And Tricks For Open Retroperitoneal Exposure Of The Aorta And All Its Abdominal Branches Kamphol Laohapensang (PowerPoint Presentation With Synched
	Audio)
4:54 — 4:59	Update On Minimal Incision For Retroperitoneal Aorto-Bifemoral Bypass And Other Procedures: Technical Tips And Limitations Robert M. Proczka
5:00 — 5:05	Duplex Surveillance Should Be Used After All Open Aorto-Bifemoral Bypasses: It Improves Outcomes Keith D. Calligaro
5:06 — 5:11	Thoraco-Bifemoral Bypass: A Good Option After All Endo And Open Standard Approaches Have Failed: Technical Tips Manju Kalra
5:12 — 5:17	Update On Renal Consequences Of Left Renal Vein Division During Open AAA Repair: It Is Not Always Benign Kimihiro Komori (PowerPoint Presentation With Synched Audio)
5:18 — 5:23	Panel Discussion
0.10 0.20	UPDATE ON COARCTATION TREATMENT
5:23 — 5:28	The Importance Of Microanatomy In Endovascular And Open Surgical Treatment Of Abdominal Aortic Coarctations James C. Stanley
5:29 - 5:34	
5:27 - 5:34	<b>DEBATE:</b> Endovascular Techniques Are The Best Treatment For Aortic Coarctations: When Bare Stents; When Covered Stents; Precautions Zvonimir Krajcer
5:35 — 5:40	<b>DEBATE:</b> Not So: Open Surgery Is Sometimes Needed: What Are The Indications <i>Michael J. Jacobs</i>
5:41 — 5:46	Value Of BeGraft (From Bentley), A Balloon Expandable Covered Stent In Treating Aortic Coarctations: Can It Treat All Cases Elchanan Bruckheimer
5:47 — 5:52	Positive Aortic Remodeling In Aortic Coarctations Following TEVAR From The Ascending Aorta As Well As Distally Frank R. Arko
5:53 — 5:58	Axillo-Unifemoral And Axillo-Bifemoral Bypasses Have Equal Patency For More Than A Year: Why The Bilateral Procedure Should Only Be Used When Bilateral Ischemia Exists
	Jeffrey J. Siracuse
5:59 — 6:05	Panel Discussion
	End of Program B
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PROGRAM C-1 (SESSIONS 17-18)

MANAGEMENT OF PULMONARY EMBOLISM: THE

ULTIMATE TEAM APPROACH

Trianon Ballroom, 3rd Floor

Course Leader: Michael R. Jaff

SESSION 17 (Trianon Ballroom, 3rd Floor)

MANAGEMENT OF PULMONARY EMBOLISM: THE

**ULTIMATE APPROACH – PART 1** 

Moderator: Michael R. Jaff

7:00 — 7:05	Introduction To The Symposium  Frank J. Veith
7:05 — 7:15	Welcome And Introduction
7:15 — 7:25	Michael R. Jaff  The Period Of Pulmonery Embeliam Diagnosis, What
7:15 — 7:25	The Basics Of Pulmonary Embolism Diagnosis: What Is The Role Of The History, Exam, Biomarkers Raghu Kolluri
7:25 — 7:35	Do We Need An Echocardiogram To Manage Acute Submassive PE David M. Dudzinski
7:35 — 7:45	Advanced Imaging For PE: What Is The Optimal Strategy For The Diagnosis Of Acute And Chronic PE <i>Brian B. Ghoshhajra</i>
7:45 — 7:55	Testing For Cancer And Other Hypercoagulable States In PE Rachel Rosovsky
7:55 — 8:05	The First Opportunity – The Emergency Physician Algorithm For Acute PE Management D. Mark Courtney
8:05 — 8:20	Medical Treatment Of PE: When, Why, For How Long, And How Can I Remember Geno J. Merli
8:20 — 8:30	Intravenous Thrombolytic Therapy For PE: No Need For Catheter-Based Intervention  Jay Giri
8:30 — 8:45	An Overview Of Technologies For Management Of High-Risk PE Eric A. Secensky
8:45 — 8:55	Ultrasound-Assisted Pharmacomechanical Thrombectomy: Does This Really Work Linda Le
8:55 — 9:05	Percutaneous Mechanical Thrombectomy Without Lytics: The Indigo System Robert A. Lookstein
9:05 — 9:15	Percutaneous Mechanical Thrombectomy Without Lytics: The FlowTriever System Mitchell D. Weinberg
9:15 — 9:25	Step-By-Step Technical Tips For Pharmacomechanical Intervention For PE
9:25 — 9:40	Gary M. Ansel Panel Discussion
7120 7110	Michael R. Jaff
moderator.	Panelists: Gary M. Ansel
	D. Mark Courtney
	David M. Dudzinski Brian B. Ghoshhajra
	Jay Giri
	Raghu Kolluri
	Linda Le Robert A. Lookstein
	Geno J. Merli
	Rachel Rosovsky Eric A. Secemsky
	Mitchell D. Weinberg
9:40 — 10:10	Break – Visit Exhibits And Pavilions (2nd and 3rd Floors)

SESSION 18 (Trianon Ballroom, 3rd Floor)

MANAGEMENT OF PULMONARY EMBOLISM: THE

ULTIMATE APPROACH – PART 2

Moderator: Michael R. Jaff

10:10-10:20 Large Bore Aspiration Thrombectomy: Tips, Tricks And

Pearls

Ripal T. Gandhi

10:20-10:30 Vortex Strategy For Massive PE

Christopher J. Kwolek

10:30-10:40 ECMO And Surgical Thromboembolectomy For

Massive PE: When, How, And Why

Mark G. Davies

10:40-10:55 What Algorithm Is Best For Acute PE Intervention

Keith M. Sterling

10:55-11:10 Vena Cava Filters In PE Treatment: Do We Need To Do

This, And If So, When

John A. Kaufman

11:10-11:25 Balloon Pulmonary Angioplasty For Chronic

Thromboembolic Pulmonary Hypertension: Has This

Become Mainstream Kenneth Rosenfield

11:25-11:35 The Team Approach To PE Management: The National

PERT Consortium William B. Keeling

11:35-12:00 Challenging Cases And "PERT" Decisions

Moderator: Michael R. Jaff

Panelists: Mark G. Davies

John A. Kaufman William B. Keeling Christopher J. Kwolek Kenneth Rosenfield Keith M. Sterling

Ido Weinberg

12:00 – 1:00 Lunch Break – Visit Exhibits And Pavilions (2nd and

3rd Floors)

End of Program C-1

PROGRAM C-2 (SESSIONS 19-22)

INTERESTING TOPICS RELATED TO LOWER EXTREMITY OCCLUSIVE DISEASE AND ITS

TREATMENTS

Trianon Ballroom, 3rd Floor

SESSION 19 (Trianon Ballroom, 3rd Floor)

HOT NEW TOPICS RELATED TO LOWER EXTREMITY OCCLUSIVE DISEASE AND ITS

**TREATMENTS** 

Moderators: Cynthia K. Shortell

Iris Baumgartner

1:00 – 1:05 Key Points From The SVS Appropriate Use Criteria For

Management Of Intermittent Claudication

Karen Woo Jessica P. Simons

1:06 — 1:11	Endovascular Treatments Including Atherectomy For Lower Extremity Occlusive Disease Are Associated With Poorer Long-Term Patient Survival: How Is It Related To Their Endovascular Treatments And/Or Their Underlying Atherosclerosis: Based On A VQI Study Dipankar Mukherjee
1:12 — 1:17	Real Five-Year Single Center Results With Atherectomy For De Novo Lower Extremity Lesions And In Stent Restenosis: How Good Or Bad Are They Russell H. Samson
1:18 - 1:23	Intravascular Lithotripsy For Peripheral Arterial Occlusive Lesions: Theory, Data, And What We Don't Know Scott L. Stevens
1:24 — 1:29	How Do SoundBite Wires (From SoundBite Medical) Help To Cross Calcified Lesions, Especially BTK Marianne Brodmann (PowerPoint Presentation With Synched Audio)
1:30 — 1:35	Alternate Approaches To Lower Extremity Arteries When Standard Approaches Are Prevented By Scarring Or Infection Ramesh K. Tripathi
1:36 — 1:41	Current Status And Prospects For Sirolimus Coated Devices And Bioresorbable Stents ATK And BTK Marianne Brodmann (PowerPoint Presentation With Synched Audio)
1:42 — 1:47	Natural Progression Of High-Risk Chronic Limb Threatening Ischemia (CLTI): The CLariTI Study: How Can Deep Vein Arterialization (DVA) And Pedal Loop Revascularization Alter This Progression
	Anahita Dua
1:48 — 2:04	Panel Discussion
SESSION 20 MORE H EXTREMI TREATMI	O (Trianon Ballroom, 3rd Floor) OT NEW TOPICS RELATED TO LOWER OCCLUSIVE DISEASE AND ITS ENT IN Vincent 1. Rowe
SESSION 20 MORE H EXTREMI TREATMI	O (Trianon Ballroom, 3rd Floor) OT NEW TOPICS RELATED TO LOWER OCCLUSIVE DISEASE AND ITS ENT
SESSION 20 MORE HI EXTREMI TREATMI Moderators	O (Trianon Ballroom, 3rd Floor) OT NEW TOPICS RELATED TO LOWER ITY OCCLUSIVE DISEASE AND ITS ENT :: Vincent I. Rowe Patrick J. Geraghty Ten Golden Rules To Train Vascular Surgeons In Distal Bypass Procedures In 2022
SESSION 20 MORE HI EXTREMI TREATMI Moderators 2:04 – 2:09	O (Trianon Ballroom, 3rd Floor) OT NEW TOPICS RELATED TO LOWER ITY OCCLUSIVE DISEASE AND ITS ENT :: Vincent I. Rowe Patrick J. Geraghty  Ten Golden Rules To Train Vascular Surgeons In Distal Bypass Procedures In 2022 Francesco Spinelli  Free Tissue Flap Transfer For CLTI With Deep Venous Arterialization: Indications, Precautions And Results John M. Felder
SESSION 20 MORE HI EXTREMI TREATMI Moderators 2:04 – 2:09	OT NEW TOPICS RELATED TO LOWER ITY OCCLUSIVE DISEASE AND ITS ENT :: Vincent I. Rowe Patrick J. Geraghty Ten Golden Rules To Train Vascular Surgeons In Distal Bypass Procedures In 2022 Francesco Spinelli Free Tissue Flap Transfer For CLTI With Deep Venous Arterialization: Indications, Precautions And Results John M. Felder Patrick J. Geraghty New Developments In How To Determine High Risk Stents And Bypass Grafts For Post Procedural Thrombosis: Selective Anticoagulation To Prevent Such Thrombosis
SESSION 20 MORE HI EXTREMI TREATMI Moderators 2:04 – 2:09 2:10 – 2:15	OT NEW TOPICS RELATED TO LOWER ITY OCCLUSIVE DISEASE AND ITS ENT  "Vincent I. Rowe Patrick J. Geraghty  Ten Golden Rules To Train Vascular Surgeons In Distal Bypass Procedures In 2022 Francesco Spinelli  Free Tissue Flap Transfer For CLTI With Deep Venous Arterialization: Indications, Precautions And Results John M. Felder Patrick J. Geraghty  New Developments In How To Determine High Risk Stents And Bypass Grafts For Post Procedural Thrombosis: Selective Anticoagulation To Prevent Such Thrombosis Anahita Dua  Near Infrared Spectroscopy (NIRS) For Real-Time Monitoring Of Deep Tissue Oxygenation During Peripheral Angioplasty For CLTI Treatment: Intra- Procedural Value And Follow-Up Results

2:34 — 2:39	What Are The Best Ways To Evaluate CLTI Treatment Outcomes: Physiology, Wound Healing, Anatomy (Angiography Or Ultrasound), MACE Or MALE: Why
	It Matters Ido Weinberg Mitchell D. Weinberg
2:40 — 2:45	Head To Head Comparison Of The SUPERA Interwoven Stent And Drug Eluting Stents For The
	Treatment Of Femoropopliteal Lesions: Advantages, Disadvantages And Specific Indications For Each Iris Baumgartner
2:46 - 2:52	Panel Discussion
2:52 — 3:00	Break – Visit Exhibits And Pavilions (2nd and 3rd Floors)
HOT NE	(Trianon Ballroom, 3rd Floor) W SHORT SUMMARY TOPICS RELATED TO EXTREMITY OCCLUSIVE DISEASE LKS ARE 4 3/4 MINUTES)
(	s: Neal S. Cayne Gary M. Ansel
3:00 — 3:05	Key Steps For Success With Radial Artery Access For Remote Visceral, Renal Or Lower Extremity Lesion Treatment Marcelo Guimaraes
3:05 — 3:10	Value And Technical Tips To Make The Supera Stent
3:03 — 3:10	Work In Curved And Angulated Non-SFA Lesion Locations Rajiv Parakh
3:10 - 3:15	Why And When Angiographic Final Evaluation Of Interventional Treatment Is Inadequate: What Else Is Needed And When <i>Gary M. Ansel</i>
3:15 — 3:20	How Should COVID-19 Change The Approach To Managing Acute Limb Ischemia Palma M. Shaw
3:20 — 3:25	Patient Reported Outcomes For Treatments For Intermittent Claudication: What Are They And Why Are They Important  Jessica P. Simons
3:25 — 3:30	12 Commandments For A Successful BTK Intervention In Patients With CLTI Including How To Perform An Antegrade Femoral Artery Puncture And Easily Pass The Guidewire Into The SFA Ali Amin
3:30 — 3:35	Importance Of Technical Factors In Use Of Drug Coated Balloons (DCBs): Value Of IVUS And DCB Undersizing: Are There Differences With Chronic Total Occlusions (CTOs) Eric A. Secemsky Jihad A. Mustapha
3:35 — 3:40	Local Anesthetic Injection Into Lesion Site Facilitates PTA And Stent Placement: How To Do It (Video Presentation) Andrej Schmidt
3:40 - 3:45	Panel Discussion
3:45 — 3:50	Value Of Tack Optimized Balloon Angioplasty In Lower Extremity Interventions: When Should They Be Used And When Not (Tacks From Intact Vascular) Lawrence A. Garcia

3:50 — 3:55	Three-Year Results Of The Lutonix DCB BTK Trial: Final Results Of This Landmark Trial Missed Its Primary Endpoint: Among Lessons Learned Is That Duplex Lacks Sensitivity For Critical Findings: How To Improve BTK IDE Trial Design Patrick J. Geraghty
3:55 — 4:00	The Optimal Stent And Techniques For Treating Occlusive Lesions In Heavily Calcified Superficial Femoral Arteries Hany Zayed
4:00 — 4:05	How Best To Use DCBs To Treat Femoro-Popliteal Lesions Fabrizio Fanelli
4:05 — 4:10	What Is Small Artery Disease (SAD) Below The Ankle: With CLTI How Should This Be Treated: With Or Without DEBs  Marianne Brodmann (PowerPoint Presentation With Synched Audio)
4:10 — 4:15	Heel Ulceration And Ischemic Gangrene Involving The Achilles Tendon Should Not Be An Indication For A BTK Amputation: How To Save Such A Limb Mark G. Davies
4:15 — 4:20	Popliteal Artery-To-Distal Bypass For Limb Salvage: Current Status, Technical Tips And Value: When Is It Better Than Endovascular Treatments Francesco Spinelli
4:20 — 4:25	Hybrid Lower Extremity Revascularizations: When And Why Are They Better Than Endo Approaches <i>Joseph S. Giglia</i>
4:25 — 4:30	Panel Discussion
MORE H RELATED DISEASE ISCHEMI	2 (Trianon Ballroom, 3rd Floor) OT NEW SHORT SUMMARY TOPICS D TO LOWER EXTREMITY OCCLUSIVE AND CHRONIC LIMB THREATENING A (CLTI) [ALL TALKS ARE 4 ¾ MINUTES] S: Brian G. DeRubertis Lawrence Garcia
4:30 - 4:35	CLTI Is A Global Epidemic; How Can A CLTI Program Decrease Its Morbidity  Barry T. Katzen
4:35 — 4:40	Technical Tips For Open Tibial And Pedal Artery Exposures And Open Venous Exposures For Deep Venous Arterialization William P. Robinson
4:40 — 4:45	Bare Metal Stents (BMSs) Still Have A Role In The Superficial Femoral Artery (SFA): In Precisely What Circumstances  Lawrence A. Garcia
4:45 — 4:50	Intravascular Lithotripsy And DCB Versus DCB Alone In The Treatment Of Infrapopliteal Lesions In Diabetics: The Rationale And Design Of The DEBATE- BTK SHOCK RCT Francesco Liistro
4:50 — 4:55	How To Size Lower Extremity Target Arteries For Endo Treatments Accurately Using Intravascular Ultrasound (IVUS): Why It Is Important Jos C. van den Berg
4:55 — 5:00	Lower Extremity Interventions (PTA, Stents, Atherectomy) Under IVUS Guidance: Its Costs, Value And Limitations
	Ignacio Escotto

5:00 — 5:05	Panel Discussion
5:05 — 5:10	Best Treatment For Heavily Calcified Occlusive Lesions And When Are Re-Entry Devices Needed With Retrograde Recanalizations: Tips On How To Use Them Erwin Blessing
5:10 — 5:15	Knowing When Not To Do A Major Amputation After All Possibilities Are Exhausted: Understanding How Bias Affects Your Professional Decision-Making Robert B. McLafferty
5:15 — 5:20	How To Do Bypass Surgery To Heavily Non-Compressible Calcified Target Arteries Enrico Ascher Frank J. Veith
5:20 — 5:25	Early Failure Of Endovascular Treatment Of Tibial Disease With CLTI Is Associated With Increased Amputation Rates: How Can It Be Predicted And Is A Primary Open Bypass A Solution Mark G. Davies
5:25 — 5:30	2-Year Results With Sirolimus Coated Drug Eluting Stents (DESs) For Fempop Lesions: The ILLUMINA Trial Andrea Kahlberg
5:30 - 5:35	Contemporary Comparative Results Of BTK Open Bypass Revascularization: Heparin Bonded PTFE Grafts Versus In Situ Or Reversed Vein Grafts: When Are PTFE Grafts To Tibial/Peroneal Arteries Worthwhile Carlo Pratesi Giovanni Pratesi
5:35 — 5:40	Distal Bypasses Under Nerve Block Without General Anesthesia Improves Results Of Bypasses For CLTI Nobuyoshi Azuma
5:40 — 5:45	Techniques For Overcoming Problems With Subintimal Angioplasty For Chronic Total Occlusions (CTOs): Like Inability To Re-Enter The True Lumen: Fancy Gadgets (Outback, Pioneer, Enteer, OffRoad) Are Almost Never Needed Ali Amin
E/E EE0	The Constitute Decreasition Of Tibid And Dedd
	WEDNESDAY, NOVEMBER 16, 2022

General Registration nte Rhinelander Gallery, 2nd Floor 6:00 A.M. 6:00A.M.6:0FaculReDegistristicussio Gramercy Suite West, 2nd Floor

Continental Breakfastam Romelander Gallery, 2nd Floor 6:15 A.M.

#### **CONCURRENT WEDNESDAY PROGRAMS**

PROGRAM D: (SESSIONS 23-30)

**Progress In Lower Extremity Occlusive Disease And Its Treatments** 6:40 A.M. - 6:02 P.M.

Grand Ballroom East, 3rd Floor

PROGRAM E: (SESSIONS 31-38)

New Developments In Medical Treatments And New Drugs; Progress In Anti-Atherogenic And Anti-Hypertensive Treatments; Management Of Endoleaks; Recorded Live Cases From Leading Centers In The US And EU; Issues Of Interest; **Outpatient And Office Based Vascular Treatment; Topics** Related To Government, Reimbursement, The SVS, VQI, FDA, Guidelines, Trials And Evidence Based Medicine 6:40 A.M. - 6:05 P.M.

#### Grand Ballroom West, 3rd Floor

PROGRAM F: (SESSIONS 39-46)

More New Developments In Thoracic Aortic Disease, TEVAR, Aortic Dissections, TAAAs, Juxta- And Pararenal AAAs, Parallel Grafts, Fenestrated And Branched EVAR (F/B/EVAR), Multilayer Bare Stents, Infrarenal AAAs And Standard EVAR, And Hot New **Aortic And Carotid Topics** 

6:50 A.M. - 6:10 P.M.

Trianon Ballroom, 3rd Floor

PROGRAM D (SESSIONS 23-30) PROGRESS IN LOWER EXTREMITY OCCLUSIVE DISEASE AND ITS TREATMENT

Grand Ballroom East, 3rd Floor

SESSION 23 (Grand Ballroom East, 3rd Floor)

GENERALITIES IN THE ENDOVASCULAR AND OPEN TREATMENT OF LOWER EXTREMITY OCCLUSIVE DISEASE AND CLTI (5 AND 43/4-MINUTE SHORT SUMMARY [SS] TALKS)

Moderators: Enrico Ascher Andrej Schmidt

- 6:40 6:45How Do Prior Endovascular Interventions Affect Future Lower Extremity Bypass Outcomes For CLTI Ramesh K. Tripathi
- 6:46 6:51
- Do Diabetic Patients With CLTI And Substantial Foot Necrosis Have Time For An Endovascular First Strategy: Why Primary Open Bypass Treatment Is Better

Katariina M. Noronen

- 6:52 6:57Presenting Symptoms Of Lower Extremity Occlusive Disease And Intermittent Claudication In Women: How Do They Differ From Those In Men Linda M. Harris
- 6:58 7:03Selective Coronary Revascularization Based On Preop CT Fractional Flow Reserve (FFRct) Improves 3-Year Survival Of CLTI Patients After Revascularization: Are Current Cardiac Evaluation Guidelines Out Of Date Christopher K. Zarins

Dainis K. Krievins 7:04 - 7:09Small Artery Disease (SAD), Medial Artery

Calcification (MAC) And Below The Ankle (BTA) Disease: Major Causes Of CLTI With A Poor Prognosis: How Are They Best Treated Endovascularly Roberto Ferraresi

#### OPTIMAL TECHNIQUES FOR VESSEL PREP FOR **ENDOVASCULAR TREATMENTS**

- 7:10 7:15[SS] Optimal Different Techniques Of Vessel Prep For Plain Old Balloon Angioplasty (POBA), Drug Coated Balloon (DCB) Treatment And Drug Eluting Stent (DES) Treatment Fabrizio Fanelli
- 7:15 7:20[SS] Technical Tips For Vessel Prep Before DCBs And DESs: It Is Different And Not Simple Erwin Blessing
- 7:20 7:25Tips And What Is New For Safe Radial Access For Renal/Visceral And Lower Extremity Interventions: How Far Distally In The Leg Can Lesions Be Treated Craig M. Walker

7:26 — 7:31	What Are The Downsides To Trans-Radial Or Pedal Access Gary M. Ansel
	TECHNICAL TIPS ON GUIDEWIRE CHOICE AND USAGE
7:32 — 7:37	[SS] Tips For Treating Difficult BTK/BTA Lesions: How To Get A Guidewire Across A Long Calcified Occlusion And Getting A Resistant Balloon To Go Over The Wire Marco G. Manzi
7:37 — 7:42	[SS] Guidewire Tips For Treating BTK And Crural Artery Lesions Craig M. Walker
7:42 — 7:47	[SS] Guidewire Tips For Treating Lesions Below The Ankle (BTA): Sliding, Piercing, Dissecting, Retrograde Maneuvers Roberto Ferraresi
7:47 — 7:53	Panel Discussion
NEW DE (UNCOA [ALL TAL	(Grand Ballroom East, 3rd Floor) VELOPMENTS IN ATHERECTOMY, STENTS TED, COATED AND BIORESORBABLE) LKS ARE 5 MINUTES] E: Craig M. Walker Iris Baumgartner
	PROGRESS IN ATHERECTOMY
7:53 — 7:58	New Developments In Laser Atherectomy: What Makes It Different: When Is It Beneficial With Certainty  George L. Adams
7:59 — 8:04	Index Atherectomy Interventions For Intermittent Claudication Are Associated With Higher Reintervention Rates Than Other Endovascular Treatments: Is This Device Specific Caitlin W. Hicks
8:05 — 8:10	Update On Optical Coherence Tomography (OCT) Guided Atherectomy (Pantheris) For In Stent Restenosis (ISR): Why It Is More Effective Treatment: From The INSIGHT Trial Todd R. Vogel
8:11 — 8:16	Current Role Of Atherectomy In Treating Lower Extremity CLTI: A Vascular Surgeon's View James F. McKinsey
	UPDATE ON THE SUPERA STENT
8:17 — 8:22	Update On The Advantages Of The Supera Vasculomimetic (VMI) Stent For Treating Long Complex Fempop Occlusive Lesions: Is There Value To DCB Vessel Prep First Peter C.J. Goverde (PowerPoint Presentation With Synched Audio)
8:23 — 8:28	The Supera Interwoven Stent: When Is It The Best Treatment And How To Optimally Deploy This Unique Stent D. Christopher Metzger Craig M. Walker
	DRUG ELUTING STENTS (DESs) FOR BTK LESIONS
8:29 — 8:34	Updated 10-Year Experience With Everolimus DESs To Treat Long Infrapopliteal Lesions Causing CLTI: Indications, Results, Value And Limitations

Robert A. Lookstein

8:35 — 8:40	Bioresorbable Everolimus DESs To Treat BTK Lesions Causing CLTI: Promising Results Up To 5-7 Years: From The DISAPEAR Registry And A Meta-Analysis Of The Absorb Stent From Abbott Steven Kum Ramon L. Varcoe
8:41 — 8:46	An Update Of Long-Term Outcomes For Drug-Eluting Resorbable Scaffolds Below-The-Knee (BTK) And Progress Of The LIFE-BTK Trial With The Esprit Stent From Abbott Ramon L. Varcoe Sahil A. Parikh Brian G. DeRubertis
8:47 — 8:52	Update On A 3-French Compatible Microstent (From Micro Medical) For Antegrade Or Retrograde Insertion To Treat Tibial Artery Lesions: The STAND And HEAL Trials Robert E. Beasley
8:53 — 9:00	Panel Discussion
LOWER I DRUG CO MORTAL COATED DEB AND RELATED	G (Grand Ballroom East, 3rd Floor) EXTREMITY TOPICS RELATED TO THE OATED DEVICES CAUSING INCREASED LITY CONTROVERSY: DO PACLITAXEL DEVICES CAUSE INCREASED MORTALITY: D DES ALTERNATIVES TO PACLITAXEL AND D ISSUES EXEMPLE MAINER Sahil A. Parikh
9:00 — 9:05	Older And More Recent Meta-Analyses Still Reveal An Increased Mortality Signal In Patients Receiving Paclitaxel Coated Devices Compared To Uncoated Devices: The More Recent Study Of DCBs In BTK Arteries Showed Increased Mortality And Amputation Rates After Only 1 Year Konstantinos Katsanos
9:06 — 9:11	An Update Of The Real-World Evidence Evaluating Paclitaxel Coated Device Safety In Treating Fempop And Crural Artery Lesions: The SAFE-PAD Study Eric A. Secensky
9:12 — 9:17	The Paclitaxel Increased Mortality Effect Reported By Dr. Katsanos et al. Seems Not To Be Confirmed By Added Data: Let's Put 4 Years Of Frenetic Activity Into Perspective  Peter A. Schneider
9:18 - 9:23	Large Population Based German Multicenter Study Of Paclitaxel Coated BTK DCBs And DESs Indicates Decreased Mortality And Amputation Rates Compared To Uncoated Devices Christian A. Behrendt (PowerPoint Presentation With Synched Audio)
9:24 — 9:29	The SWING Study: First In Human Use Of A Sirolimus DCB In Arteries Below-The-Knee Ramon L. Varcoe Andrew Holden Peter A. Schneider
9:30 — 9:35	Alternatives To Paclitaxel Coated Devices For Limiting Intimal Hyperplasia After Treatment: Sirolimus Coating, Bioresorbables And Adventitial Drug Delivery With The Bullfrog Device: How Do Paclitaxel And Limus Drugs Work And How Do They Differ William A. Gray

9:36 — 9:41	Progress And Problems With A Sustained Release Limus DCB: 3-Year Results With The Magic Touch DCB: From The SIRONA Study Dierk Scheinert Thomas Zeller
9:42 — 9:47	The Light And Darkness Of Fluoropolymer-Based Limus DESs In The Treatment Of Femoropopliteal Lesions Marianne Brodmann (PowerPoint Presentation With Synched Audio)
9:48 — 9:53	Key New Developments In Endovascular Treatments For CLTI Sahil A. Parikh
9:54 — 9:59	Are DESs Ever Associated With Aneurysmal Degeneration: Is It Related To The Drug (Paclitaxel Or Limus) Or To The Fluoropolymer Excipient To Which The Drug Is Attached Theodosios Bisdas
10:00-10:08	Panel Discussion
10:08-10:18	Break – Visit Exhibits And Pavilions (2nd and 3rd Floors)

SESSION 26 (Grand Ballroom East, 3rd Floor)

NEW DEVELOPMENTS IN DRUG COATED BALLOONS (DCBs) AND DRUG ELUTING STENTS (DESs): UPDATES ON RANDOMIZED CONTROLLED TRIALS (RCTs) AND BTK LESION TREATMENTS WITH DCBs AND DESs

Moderators: Joseph L. Mills John R. Laird

## NEW INFORMATION ON DCBs AND DESs FOR FEMPOP LESIONS: UPDATES ON RCTs

	FEMPOP LESIONS: UPDATES ON RCTs
10:18-10:23	Cost Effectiveness Analysis Of Drug Eluting Technologies For Femoropopliteal Lesions Show That They Are Worth The Increased Device Costs Stefan Müller-Hülsbeck
10:24-10:29	Stellarex (Philips) DCBs With Low Dose Paclitaxel Is Safe And Has Higher Patency Rates Than POBA With Fempop Lesions At 5 Years In The ILLUMENATE US And European RCTs: There Was No Paclitaxel Mortality Signal Sean P. Lyden Marianne Brodmann Sahil A. Parikh William A. Gray
10:30-10:35	Pooled Data From The In.Pact RCT And Real World DCB Trials For SFA-Pop Lesions Show Safety And Efficacy For 5 Years Compared To POBA: Will The Advantage Of DCBs Diminish With Time Peter A. Schneider John R. Laird Thomas Zeller
10:36-10:41	New Findings From The DRASTICO Study Comparing DESs To DCBs For Fempop Lesions: 5-Year Results With TASC A/B Lesions Versus TASC C/D Lesions Francesco Liistro
10:42-10:47	Value Of In.Pact DCBs For Long Complex SFA-Pop Lesions Including ISR And CTOs: Technical Tips And Contraindications: From The Global Registry: What Is The Best Endo Treatment For These Lesions

Gunnar Tepe Marianne Brodmann

10:48-10:53	Update On The Randomized Head To Head Comparison Of In.Pact (Medtronic) And Ranger (Boston Scientific) DCBs For Complex SFA Lesions: 2-Year Results Of The COMPARE RCT: Similar Results With Different Paclitaxel Dosages Dierk Scheinert Sabine Steiner
10:54-10:59	Update On The Global RANGER II RCT Comparing Ranger DCBs With POBA: How Does It Help Us Determine The Best Treatment For Long Complex ATK Lesions Marianne Brodmann (PowerPoint Presentation With Synched Audio)
11:00-11:05	New Information On The Safety And Effectiveness Of The Cook Zilver PTX DES Based On Global Trials Including A RCT: When Is It The Best Treatment Michael D. Dake
11:06-11:11	2-Year Results Of The IMPERIAL RCT Head To Head Comparison Of The Zilver PTX DES (Cook) With The Eluvia DES (Boston Scientific): Both Are Safe And Effective: Is There A Difference Stefan Müller-Hülsbeck William A. Gray Thomas Zeller
11:12-11:18	Panel Discussion
	NEW INFORMATION ON BTK DCBs AND DESs
11:18-11:23	Advances In BTK Drug Delivery Technology And DCBs: What Have We Learned From The In.Pact Deep BTK DCB Trial And New Challenges With Treating CLTI Patients  Thomas Zeller
11:24-11:29	The Sirolimus DCB BTK Era Begins – Current Experience With The Selution DEB And Design Of The SELUTION SLR .014 BTK IDE Trial: Early Results From Singapore And Europe Patrick J. Geraghty
11:30-11:35	Orbital Vessel Preparation To Maximize DCB Efficacy In Calcified BTK Lesions: OPTIMIZE BTK RCT 1-Year Results Thomas Zeller
11:36-11:41	3-Year Results From The AcoArt II BTK DCB RCT Show Safety With No Increased Mortality And Improved Patency Versus POBA Wei Guo (PowerPoint Presentation With Synched Audio) Francesco Liistro
11:42-11:47	Why Some BTK DCB Trials Have Not Shown Uniformly Better Results: Technical And Balloon Factors Matter Francesco Liistro
11:48-11:53	Update On The SAVAL Trial With A Self-Expanding DES (From Boston Scientific) For BTK Occlusive Lesions  Miguel F. Montero  Jihad A. Mustapha
11:54-12:00 12:00- 1:00	Panel Discussion Lunch Break – Visit Exhibits And Pavilions (2nd and 3rd Floors)

SESSION 27 (Grand Ballroom East, 3rd Floor) PROGRESS IN EXOTIC AND EXTREME NEW TREATMENTS FOR VERY DISTAL LOWER EXTREMITY DISEASE CAUSING ADVANCED CLTI: HOW TO SAVE THE "NO OPTION FOR TREATMENT" LIMB OR THE "DESERT FOOT" WITH NO PATENT TARGET ARTERIES

Moderators: Joseph L. Mills . Marco G. Manzi Hasan H. Dosluoglu

- No Option CLTI: What Is It: What Are The Actual 1:00 - 1:05Options For Treatment Hisham Rashid
- 1:06 1:11Contemporary Survival After Below-Knee Amputation (BKA), Above-Knee Amputation (AKA), Bilateral Amputations For Trauma; For Vascular Disease: It Is Definitely Worthwhile Saving Limbs Especially In Vascular Patients Philip P. Goodney

#### VALUE OF PROSTHETIC (PTFE) TIBIAL BYPASSES

- 1:12 1:17Value Of Spliced Vein Grafts Versus PTFE Grafts For Bypasses When A Single Autologous Vein Is Inadequate Joseph L. Mills
- 1:18 1:23PTFE Tibial And Peroneal Artery Bypasses Can Save No Option Limbs Which Would Otherwise Require Amputation: They Have Worthwhile Long-Term Patency Rates And Limb Salvage Rates Hasan H. Dosluoglu Gregg S. Landis Richard F. Neville Enrico Ascher Frank I. Veith
- 1:24 1:29PTFE Tibial And Peroneal Bypasses: Cases With Ultra-Long-Term Patency And Limb Salvage Prove Their Value When There Are No Other Options: Why Do They Work For Some Surgeons But Not Others Gregg S. Landis Richard F. Neville Hasan H. Dosluoglu Frank J. Veith
- 1:30 1:35For Patients Facing Amputation With No Endo Options Or Useable Vein, PTFE Tibial Bypasses Are A Worthwhile Option That Yields Acceptable Mid-Term Patency And Long-Term Limb Salvage Rates R. Clement Darling III
- Current Outcomes With PTFE Bypasses To 1:36 - 1:41Infrapopliteal (Tibial) Targets: Is There Variability Between Surgeons And Institutions Matthew T. Menard

#### UPDATE ON FOOT VEIN ARTERIALIZATION FOR CLTI

- 1:42 1:47Role And Value Of Vein Arterialization: Best Way To Do It And Long-Term Results: From The Pioneer Pramook Mutirangura
- 1:48 1:53Pathophysiology Of Venous Arterialization And Neo Angiogenesis For No Option CLTI: How To Predict When It Will Work And When It Won't: What Is The Medial Arterial Calcification (MAC) Score And Its Significance Roberto Ferraresi

1:54 — 1:59	Pivotal US Trial (PROMISE II), US Feasibility Study (PROMISE I) And European 2-Year Registry Results With Deep Vein Arterialization With The LimFlow Device For CLTI With Gangrene Shows Reasonable Limb Salvage And Wound Healing Daniel G. Clair Andrej Schmidt Daniela Branzan
2:00 — 2:05	How To Perform The LimFlow Procedure: Equipment Required And Technical Tips  Miguel F. Montero
2:06 — 2:11	Deep Vein Arterialization And Valve Lysis By Surgical Means For No Option Desert Feet With Gangrene: How To Do It And Results Richard F. Neville
2:12 — 2:18	Panel Discussion
NEW DE GRAFTS; GRAFTS RESTENC	3 (Grand Ballroom East, 3rd Floor) VELOPMENTS IN STENTS; PROSTHETIC ENDOVASCULAR BYPASSES; STENT AND TREATMENT OF IN STENT DSIS (ISR) :: Linda M. Harris Mark A. Adelman
2:18 — 2:23	Why The BioMimics 3D Stent Should Be The Treatment Of Choice In Complex Patients And Lesions <i>Peter A. Gaines</i>
	Michael K.W. Lichtenberg
	ARTERIAL PTFE BYPASSES
2:24 — 2:29	RCT Comparing Heparin Bonded PTFE (Propaten) Grafts With Plain PTFE Grafts For BTK CLTI Bypasses: Is Heparin Bonding Helpful Yann Gouëffic
2:30 — 2:35	Hybrid Fluoroscopically Guided Improved Method For Restoring Patency To Occluded PTFE Bypasses: It's Less Invasive And More Effective Neal S. Cayne
	Frank J. Veith
	PERCUTANEOUS BYPASSES
2:36 — 2:41	Percutaneous (PQ) Transvenous Fempop PTFE Bypasses With The Torus 2 Device (Now From Endologix): How It Works And Status Of The DETOUR And TORUS Trials In The US: 1-Year Results Sean P. Lyden Daniel G. Clair Peter A. Schneider
2:42 — 2:47	4-Year Results Of The Detour PQ Fempop Arterial Bypass Routed Through The Femoral Vein: Will It Make Open Bypass Obsolete Dainis K. Krievins
2:48 - 2:53	A Novel Technique For Percutaneous Extravascular Fempop Bypass - Routing A PTFE Graft Through The Soft Tissue Of The Thigh: It Is A Transcatheter Technique That Is Clampless, Sutureless And Without External Exposure: How Does It Work And Results Pierre G. Sarradon Jean-Pierre Becquemin
2:54 — 2:58	Panel Discussion

	NEW INFORMATION ON STENT-GRAFTS
2:58 — 3:03	Can Viabahn Stent-Grafts Be Used Safely And Effectively In The SFA For CLTI: From Pooled Multicenter Data: What Are The Limitations Of These Devices Michel M.P. Reijnen
3:04 — 3:09	How Can IVUS Improve Outcomes When Self- Expanding Stent-Grafts (Viabahn) Are Used To Treat SFA Occlusive Lesions Eric A. Secensky
3:10 — 3:15	Advantages, Limitations And Results Of Gore VBX BE Stent-Graft For Occlusive Disease In Various Vascular Beds And For F/B/EVAR Branches Rocco Giudice Ciro Ferrer
	TREATMENT OF IN STENT RESTENOSIS (ISR)
3:16 - 3:21	Laser Atherectomy May Facilitate Endovascular Treatment Of ISR But Does Not Provide Long-Term Benefit: How Should ISR Be Treated Russell H. Samson
3:22 — 3:27	The Excimer Laser For Treating ISR: It Has A Role In Crossing And Debulking Difficult Lesions: Technical Tips Craig M. Walker
3:28 — 3:33	How Best To Treat Long Difficult Complex SFA Lesions Including Those From ISR Sonia Ronchey
3:34 — 3:46	Panel Discussion And Break (Visit Exhibits And Pavilions – 2nd and 3rd Floors)
SESSION 29 (Grand Ballroom East, 3rd Floor) LOWER EXTREMITY TRIALS; GUIDELINES; FOOT PERFUSION EVALUATION METHODS AND VALUE OF ANGIOSOMES Moderators: Mark K. Eskandari Jacques Busquet Frank J. Veith	
3:46 - 3:51	The Japanese SPINACH Registry Shows Why WIfI Wound Severity Helps To Select Open Versus Endovascular Treatment And Predicts Patient Survival Nobuyoshi Azuma
3:52 - 3:57	The New Global Vascular Guidelines And WIfI Staging For CLTI Are Better Than Obsolete TASC Guidelines Because Treatment Recommendations, Revascularization Strategies And Needs For The Future Are Not Based On Lesion Anatomy But Are Nuanced By Other Factors: What Are They Michael S. Conte
3:58 - 4:03	The Main Outcomes Of The BEST-CLI RCT Comparing Endovascular And Open Treatment Of Lower Extremity Ischemia: Limitations And What Will Be Its Value Alik Farber

#### 4:04 - 4:13Panel Discussion On Meaning And Significance Of **Best-CLI Results**

Panelists: Marianne Brodmann

Michael S. Conte Matthew T. Menard Kenneth Rosenfield

#### METHODS FOR EVALUATING FOOT PERFUSION

4:13 - 4:18Value Of Perfusion Assessment Of The CLTI Foot Before Treatment And For Quality Control After Revascularization: How Best To Do It

Maarit Venermo

4:19 - 4:24 How And Why To Measure Foot Perfusion During Endo Treatments: Hyperspectral Imaging, O2 Sensors, etc: When Is The Angiosome Concept Helpful; When Not

Marianne Brodmann (PowerPoint Presentation With Synched Audio)

4:25-4:30 New Methods For Evaluating Lower Extremity Arterial Lesions And Foot Perfusion Using Fractional Flow (FFR) And MRI; How They Work And Their Value In Assessing Therapeutic Success Bijan Modarai

Pedal Arch Patency Is Key To Predicting Limb Salvage 4:31 - 4:36With Endovascular Treatment For CLTI With Tissue Necrosis: How Is It Best Evaluated Hasan H. Dosluoglu Linda M. Harris

4:37 - 4:42Foot Perfusion Measurements Are Invaluable In CLTI And Predicting Amputation Healing: They Also Show Why Open Bypasses Are Often Better Than **Endovascular Treatments** Werner Lang

4:43 - 4:48**Panel Discussion** 

SESSION 30 (Grand Ballroom East, 3rd Floor) NEW DEVELOPMENTS IN THE TREATMENT OF INTERMITTENT CLAUDICATION AND ACUTE LIMB **ISCHEMIA** 

Moderators: Michael S. Conte Matthew T. Menard

#### INTERMITTENT CLAUDICATION (IC)

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4:48 — 4:53	<b>DEBATE</b> : A RCT After 2 Years Shows That Stent Treatment For Intermittent Claudication (IC) Improves Quality Of Life More Than Medical Treatment And Exercise And Is Cost Effective Hans Lindgren
4:54 — 4:59	<b>DEBATE:</b> Interventions For IC Are Safe But Lead To Greater Decreased Function And Increased Limb Loss <i>Jeffrey J. Siracuse</i>
5:00 — 5:05	Overuse Of Vascular Interventions For IC Is A Measure

Of Poor Care: How Is This Determined Caitlin W. Hicks James H. Black, III

5:06 - 5:11 Endovascular Interventions For IC: At 2 Years Only 32% Are Free From IC Recurrence: What Factors Decrease This Recurrence Rate: From A VQI Study Karen Woo

Peter F. Lawrence Michael S. Conte Adam Beck

Mark L. Schermerhorn

5:12 <b>—</b> 5:16	Panel Discussion
	ACUTE LIMB ISCHEMIA (ALI) (See Also Session 63)
5:16 — 5:21	Key Points From The 2020 New European Guidelines For Diagnosis And Treatment Of ALI In The Upper And Lower Limbs: When To Use Which Treatments: How Have These Guidelines Been Modified Recently Martin Björck
5:22 — 5:27	Update On Thrombosuction Devices For Treating ALI: Which Device In Which Circumstance: Advantages And Limitations Athanasios Katsargyris Eric L.G. Verhoeven
5:28 — 5:33	Endovascular Mechanical Thrombectomy Is Obviating The Need For Thrombolytics In ALI: Which Device Is Best – When And Why Patrick E. Muck
5:34 — 5:39	Percutaneous Vacuum Thrombectomy For ALI: Devices And Techniques: In 2022 What Is The Residual Role For Thrombolytics And Open Balloon Catheter Thrombectomy Scott L. Stevens
5:40 — 5:45	Penumbra Indigo Clot Aspiration System: What Makes It Different: Indications And Contraindications: What Is New In 2022  James F. Benenati
5:46 — 5:51	Value And Technical Tips For Using The Indigo Clot Removal System Before And After Treating ISR And Other Lesions With Balloon And Stents Frank R. Arko
5:52 - 5:57	How To Treat ALI Under Duplex Ultrasound Guidance: Advantages And Limitations Natalie A. Marks Enrico Ascher
5:58 - 6:02	Panel Discussion
	End of Program D
DDOCDANA F (CECCIONIC 21 20)	

PROGRAM E (SESSIONS 31-38)
NEW DEVELOPMENTS IN MEDICAL TREATMENTS
AND NEW DRUGS; PROGRESS IN ANTIATHEROGENIC AND ANTI-HYPERTENSIVE
TREATMENTS; MANAGEMENT OF ENDOLEAKS;
RECORDED LIVE CASES FROM LEADING CENTERS
IN THE US AND EU; ISSUES OF INTEREST;
OUTPATIENT AND OFFICE BASED VASCULAR
TREATMENT; TOPICS RELATED TO GOVERNMENT,
REIMBURSEMENT, THE SVS, VQI, FDA, GUIDELINES,
TRIALS AND EVIDENCE BASED MEDICINE
Grand Ballroom West, 3rd Floor

SESSION 31 (Grand Ballroom West, 3rd Floor)
ADVANCES IN MEDICAL TREATMENTS, NEW ANTIATHEROGENIC DRUGS, VALUE OF RIVAROXABAN
AND PREVENTING MIS IN VASCULAR SURGERY
PATIENTS

Moderators: Caron B. Rockman Ido Weinberg

6:46 — 6:51	New Information From The VOYAGER And COMPASS Trials With Rivaroxaban (Xarelto From Janssen And J&J) And Aspirin: How Does It Help In The Management Of Patients With Arterial And Venous Disease: With And Without Kidney Disease And With And Without Statins  Marianne Brodmann (PowerPoint Presentation With Synched Audio)
6:52 — 6:57	New Strategies On How To Avoid And Treat Perioperative Myocardial Infarctions (MIs) In Open Vascular Surgery Patients Peter Henke
6:58 — 7:03	Update On LDL-C Lowering During A Lifetime: How Low To Strive For With Intensive Drug Therapy: How Young To Start If High; How Old To Continue Statins J. David Spence (PowerPoint Presentation With Synched Audio)
7:04 — 7:09	<b>DEBATE:</b> LDL-C Lowering And Statins For Prophylaxis Of Vascular Events Are Dangerous And Not Helpful: What Does The Latest Evidence Show Sherif A.H. Sultan
7:10 — 7:15	<b>DEBATE:</b> Not So: Update On LDL-C Lowering With Statins And Other Drugs Stabilizes And Shrinks Plaques And Decreases Morbid Vascular Events: Stopping Statins Increases Patients' Risk Of MI And Death Ron Waksman
7:16 - 7:21	Low Dose Rivaroxaban (Xarelto From Janssen And J&J) And Aspirin Improve Survival And Decrease Major Adverse Limb Events (MALE) After Endo And Open Treatments For PAD/CLTI: From The VOYAGER RCT: What Does The XATOA Prospective Registry Add Sebastian E. Debus Marianne Brodmann
7:22 — 7:27	How Does The Morbidity And Pathology Of Adverse Events With Arteriosclerosis Depend On Thrombosis: This Explains The Benefits Of Rivaroxaban And Aspirin Seen In The VOYAGER And COMPASS Trials Anthony J. Comerota (PowerPoint Presentation With Synched Audio)
7:28 - 7:33	New Adjunctive Drugs (Plus Statins) To Lower LDL-Cholesterol (LDL-C) In Vascular Patients: Inclisiran, Bempedoic Acid And Ezetimbe: How Do They Work And When And How To Use Them: Level Of LDL-C To Strive For Richard Bulbulia
7:34 — 7:42	Panel Discussion
SESSION 32	(Grand Ballroom West, 3rd Floor)

CATHETER BASED TREATMENTS OF RESISTANT HYPERTENSION; MANAGEMENT OF CARDIAC PROBLEMS, SMOKING AND TRANSFUSION IN VASCULAR SURGERY PATIENTS; MORTALITY RISK IN STROKE PATIENTS; VASCULAR AND CARDIAC COMPLICATIONS OF COVID-19

Moderators: Ron Waksman Michael R. Jaff

#### UPDATE ON RENAL DENERVATION FOR HYPERTENSION

	HYPERTENSION
7:42 — 7:47	Current Status Of Renal Denervation For Drug Resistant Hypertension: Why The Simplicity Spyral Radiofrequency Denervation System Is Different: Status Of The SPYRAL HTN-OFF MED RCT (Versus Sham) Sahil A. Parikh
7:48 — 7:53	Updates On Other Methods Of Renal Denervation: Chemical (Alcohol) Infusion Via The Peregrine Catheter (Ablative Solutions) And Ultrasound Via The Paradise Catheter (ReCor Medical) Horst Sievert
7:54 — 7:59	Update On The Status Of Renal Denervation For Hypertension: Is It Here To Stay: Where Is It Going <i>Eric A. Secensky</i>
	OTHER TOPICS RELATED TO VASCULAR DISEASE AND ITS TREATMENT
8:00 — 8:05	How Does The Female Sex Impact The Occurrence Of Lower Extremity Atherosclerosis, Its Treatment And Results Of Treatment Katherine A. Gallagher
8:06 — 8:11	How And Why Do Thoracic Stent-Grafts For TEVAR Negatively Affect The Heart Frans L. Moll (PowerPoint Presentation With Synched Audio)
8:12 — 8:17	When Should Smoking Be Stopped Before AAA Repair; Before Lower Extremity Bypass: At Least 4 Weeks Because Duration Of Cessation Matters Jeffrey J. Siracuse
8:18 - 8:23	Limiting Transfusion And Permitting Anemia After Major Vascular Operations Increases Mortality And Serious Adverse Events Especially In Patients With Cardiac Co-Morbidities Panos Kougias
8:24 — 8:29	How To Quantitate Late Mortality Risk In Asymptomatic Carotid Stenosis (ACS) Patients: Why It's Important In Decision Making And What To Do About It Other Than Treating ACS Patients Non- Invasively Stavros Kakkos Andrew N. Nicolaides
8:30 — 8:35	Update On Vascular Complications Of COVID-19 Infections: What Is Known And Unknown: How To Diagnose And Treat: Endo Versus Open Michael E. Barfield
8:36 — 8:41	Update On Cardiac Complications Of COVID-19 Infections: What Is Their Genesis: Diagnosis And Treatment Roxana Mehran
8:42 — 8:50	Panel Discussion
8:50 — 9:06	Break – Visit Exhibits And Pavilions (2nd and 3rd Floors)

SESSION 33 (Grand Ballroom West, 3rd Floor)
PROGRESS IN MANAGING ENDOLEAKS:

UNDERSTANDING THEIR CONSEQUENCES AND

PREDICTING, PREVENTING AND TREATING THEM

Moderators: Timur P. Sarac Peter L. Faries

	TO TREAT OR NOT TO TREAT TYPE 2 ENDOLEAKS
9:06 — 9:11	Most Type 2 Endoleaks Are Benign: The Case Can Be Made That By Treating Type 2 Endoleaks The Harm And Cost Of Such Treatment Outweighs The Benefits: When If Ever Should They Be Treated: Is There A Relationship With AAA Remodeling Michel M.P. Reijnen
	TREATING TYPE 1 ENDOLEAKS
9:12 — 9:17	Type 1A Endoleaks After EVAR: Predictability Does Not Equate To Preventability: How Are They Best Treated Michael J. Singh
9:18 — 9:23	When And How To Treat Type 1 Endoleaks With Embolization: Technical Tips  Robert A. Morgan
9:24 — 9:29	When And How To Use Embolization Coils To Treat Type 1A Endoleaks Successfully: When Won't Coils Work: How To Diagnose Type 1A Endoleaks Accurately Sigrid Nikol
9:30 — 9:35	How To Minimize Gutter Type 1A Endoleaks With Chimney EVAR (Ch/EVAR): A Standard Protocol Helps David J. Minion
9:36 — 9:41	Fibrin Glue Sac Filling Technique During EVAR To Prevent All Endoleaks: It Should Be Routine And Is A Game Changer Based On A Multicenter Trial: How To Do It Qingsheng Lu (PowerPoint Presentation With Synched Audio)
9:42 — 9:48	Panel Discussion
	PREVENTION OF TYPE 2 ENDOLEAKS AFTER EVAR
9:49 — 9:54	A RCT Shows The Advantages Of Inferior Mesenteric Artery (IMA) And Lumbar Embolization: The Next Generation Of EVAR Endografts Must Prevent Endoleaks: How Can It Be Done Dominique Fabre
9:55-10:00	Stephan Haulon  Preventing Threatening Type 2 Endoleaks By IMA Embolization When AAA Sac And IMA Are Large: Indications And Technical Tips And Evidence Toru Kuratani
10:01-10:06	With A Large IMA (>3 mm), When Should It Be Embolized; When Should It Be Revascularized And Why Piotr M. Kasprzak
10:07-10:12	Selective Coiling Of IMA And Lumbar Arteries Decrease Harmful Type 2 Endoleaks After EVAR: When And How To Do It Götz M. Richter
10:13-10:19	Panel Discussion
	TREATMENT OF TYPE 2 ENDOLEAKS AND ENDOTENSION AFTER EVAR
10:20-10:25	How Duplex Ultrasound Velocities In Type 2 Endoleaks Determine Behavior And Help In Treatment: Technical Tips

Tips Ross Milner

10:26-10:31 Glue Embolization Is Effective Treatment For Most Threatening Type 2 Endoleaks: When And How Best To Do It Neal S. Cayne 10:32-10:37 New Concepts In Post EVAR Endoleaks And Endotension: The Role Of Fabric Fatigue, Concealed Endoleaks And AAA Sac Hygromas: How Can These Be Detected And Best Treated Sherif A.H. Sultan 10:38-10:43 How To Best Leverage 3D Fusion Software (GE) To Get Into The Nidus And Treat Type 2 Endoleaks: Best Embolic Agent And Value Of Transcaval Access For Type 1 And 2 Endoleaks Mark W. Mewissen 10:44-10:49 Transgraft Approach To Treat Type 2 Endoleaks: Indications, Equipment, Advantages And Precautions James F. McKinsey 10:50-10:55 Laser Assisted Transgraft Onyx Embolization Of Type 2 Endoleaks: Indications, Equipment And Technique Zvonimir Kraicer 10:56-11:01 With Type 2 Endoleaks And Sac Expansion Open Sacotomy And Branch Ligation Is The Best Treatment: Why And What Precautions Are Needed To Be Sure There Is No Occult Type 1 Leak Zachary M. Arthurs **Panel Discussion** 11:02-11:11 SESSION 34 (Grand Ballroom West, 3rd Floor) TCT AND PLINIO ROSSI RECORDED LIVE COMPLEX AND CHALLENGING ENDOVASCULAR CASES TCT RECORDED LIVE CHALLENGING **ENDOVASCULAR CASES** Moderators: Juan F. Granada Sahil A. Parikh 11:12-11:36 PROGRAM TO BE DETERMINED

# PLINIO ROSSI RECORDED LIVE COMPLEX AND CHALLENGING ENDOVASCULAR CASES

Moderators: Fabrizio Fanelli Andrew Holden Carlo Setacci

11:36–11:48 Reconstruction Of Symptomatic And Chronically Occluded Iliac Veins And IVC (Video Presentation And

Discussion)
Marcelo Guimaraes

11:48–12:00 A Complex Below-The-Knee Occlusive Case And Management Of Multiple Complications (Video

Presentation And Discussion)

resentation And Discussion)

Marco G. Manzi

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

SESSION 35 (Grand Ballroom West, 3rd Floor)

RECORDED LIVE CHALLENGING CASES AND INNOVATIVE TECHNIQUES FROM THE LINC GROUP

Moderators: Dierk Scheinert

Andrej Schmidt Daniela Branzan

1:00 – 1:32 PROGRAM TO BE DETERMINED

ISSUES IN	6 (Grand Ballroom West, 3rd Floor) MPORTANT IN VASCULAR SURGERY: SHIP, HISTORY, EFFICIENCY, MALPRACTICE,
	, TRAINING AND HUMAN BEHAVIOR s: Kim J. Hodgson Dawn M. Coleman
1:33 — 1:38	How To Succeed In Academic Vascular Surgery: Don't Be A Revolutionary Ronald L. Dalman
1:39 — 1:44	Surgeons In The Time Of Pandemics: How Does Our Current COVID Crisis For Surgeons Compare To The Plague And Guy de Chauliac In 14th Century France <i>Cynthia K. Shortell</i>
1:45 — 1:50	How To Improve Operating Room Efficiency For Vascular Surgical Operations: Why Is Inefficiency In This Setting So Widespread And Hard To Fix Panos Kougias
1:51 — 1:56	Patient Reported Outcomes (PROs): What Are They: Importance And Pitfalls: How Do They Differ From Patient Satisfaction Christopher J. Smolock
1:57 — 2:02	In A Malpractice Proceeding Or Trial What Recourse Does A Physician-Defendant Have When An Expert Witness Provides Inaccurate Or False Testimony O. William Brown
2:03 — 2:08	RCTs And Meta-Analyses Can Be Flawed And Biased: They Should Only Be Viewed With Other Evidence And Common Sense George S. Lavenson
2:09 — 2:14	Why Systematic Reviews And Meta-Analyses Can Be Misleading: What To Do About It Janet T. Powell
	ISSUES IN VASCULAR TRAINING
2:15 -2:20	Optimal New Training Paradigm For Vascular Surgeons: 0+5 Vascular Surgery Residency Followed By 2 Years Of Cardiac Surgery Residency Training: Why Is It Better Than 2 Extra Years Of Laboratory Research Alan B. Lumsden
2:21 — 2:26	Coming Crisis In Vascular Surgical Training – In Both 5+2 And 0+5 Programs: What Can Be Done About It <i>Michael B. Silva, Jr.</i>
2:27 — 2:32	How To Remedy The Deficiency Vascular Fellows And Residents Have In Their Numbers Of Open Vascular Surgical Operations Malachi Sheahan
2:33 — 2:38	Negative Impact Of The COVID Pandemic On Vascular Surgical Training: How Long Will They Last <i>Jason T. Lee</i>
2:39 — 2:44	How Human Behavior Is Controlled By Biases And Rationalizations: How To Overcome These And Perform Better Scott L. Stevens
2:45 — 2:58	Panel Discussion And Break Visit Exhibits And Pavilions (2nd and 3rd Floors)

	(Grand Ballroom West, 3rd Floor)	
MORE ISSUE-RELATED TOPICS IMPORTANT		
	CULAR SURGEONS AND VASCULAR	
	ISTS; ISSUES RELATED TO OUTPATIENT	
	S OR OFFICE BASED LABS (OBLs) :: Anton N. Sidawy	
moderators	Krishna Jain	
2:58 - 3:03	The Wellness Of Vascular Surgeons: Physical And	
	Mental: How To Monitor And Promote It: The	
	Importance Of Intraoperative Posture Samuel R. Money	
3:04 -3:09	Unfilled Promises With Devices, Drugs And	
0.04 0.07	Treatments: Initial Hype That Is Not Fulfilled: It Is	
	Often Hidden: More Transparency Is Needed: A Few	
	Examples Sherif A.H. Sultan	
3:10 — 3:15	Heart And Vascular Centers Are Artificial Entities That	
0:10 - 0:10	Disadvantage Vascular Surgeons	
	Malachi Sheahan	
3:16 - 3:21	Effect Of Increased Hydration And Protein Intake On	
	Lower Extremity Arteriosclerotic Ischemia With IC And CLTI: What Is The Evidence And The Mechanism:	
	Will It Change The Game And Decrease The Need For	
	Stents And Bypasses	
	Juan C. Parodi (PowerPoint Presentation With Synched Audio)	
3:22 - 3:27	Vascular Spinoff Revenue In Tertiary Healthcare	
	Systems: More Downstream Benefits From Vascular Surgeons: How To Make Hospital Administrators	
	Appreciate The Value Of Vascular Surgeons	
	Joseph V. Lombardi	
3:28 - 3:33	The Ever Changing Reimbursement For Lower	
	Extremity Endovascular Therapies In Hospitals And OBLs: Why It's Happening And Where Is It Going	
	Sean P. Roddy	
	Robert M. Zwolak	
3:34 - 3:39	Panel Discussion	
	ISSUES RELATED TO OUTPATIENT CENTERS AND OBLS	
3:39 - 3:44	A Balanced View Of Atherectomy In Ambulatory	
	Surgicenters (ASCs) And OBLs In 2022: Are There	
	Differences And Is The Procedure Overused  Krishna Jain	
3:45 — 3:50	Why And How Do Outpatient Angio Suites And OBLs	
0.40	Fail	
	Sam S. Ahn	
3:51 — 3:56	How Can OBLs Provide Good Vascular Care With	
	Excellent Results, Be Profitable And Still Allow Vascular Surgeons To Only Work From 8 AM to 5 PM	
	Mark A. Mattos	
3:57 — 4:02	Tips And Tricks For Performing High-Risk Lower	
	Extremity Endovascular Procedures Safely And	
	Successfully In An Outpatient Setting	
	Anil P. Hingorani Enrico Ascher	
4:03 — 4:08	OBL Audits: What Are They Looking For And How To	
	Avoid Civil And Criminal Penalties	
	O. William Brown	
4:09 — 4:13	Panel Discussion	

UPDATES VASCULA FUTURE ACCESS; VALUE C RELATIO REGULA	G (Grand Ballroom West, 3rd Floor) S AND ISSUES IMPORTANT TO ALL AR SURGEONS AND SPECIALISTS: REIMBURSEMENT; ETHICS OF FDA VASCULAR REGISTRIES AND THE VQI, DF GUIDELINES, ENDPOINTS; INDUSTRY NS; IMPACT OF GOVERNMENT (ACA) AND TORY AGENCIES (FDA) SI: Robert M. Zwolak Sean P. Roddy
4:13 – 4:18	What Obstacles And Blows Are Vascular Surgeons And Other Vascular Specialists Facing In 2022: Will Planned Increased Reimbursement For Office And Hospital Visits Cause Decreases In Procedural Reimbursements Sean P. Roddy
4:19 – 4:24	How Can Vascular Surgeons Identify High Risk, High- Cost Patients And Help Health Care Systems Control Costs: How To Prevent Inappropriate Treatments In These Patients Lee Kirksey (PowerPoint Presentation With Synched Audio)
4:25 — 4:30	International Consortium of Vascular Registries (ICVR) And The Use Of Real World Evidence To Evaluate Aortic Endograft Performance In Ruptured Aneurysms  Adam Beck
4:31 — 4:36	The Role And Value Of Guidelines In Vascular Practice; Why Guidelines Can Be Misleading; How Should They Be Written To Not Be Anders Wanhainen
4:37 — 4:42	Non-Compliance With The SVS AAA Practice Guidelines Is Common: How Does It Impact Outcomes Elliot L. Chaikof
4:43 — 4:48	Ethics Of Limiting Access To Potentially Promising Technology: At What Point Is It Ethical To Use And Evaluate An Innovative Technology In A Patient/ Clinical Study  Valerie M. Merkle
4:49 — 4:54	Managing Various Specialties And Generations Of Specialists In A Multi-Specialty Vascular Institute Or Center: How To Optimize Patient Outcomes Gary M. Ansel
4:55 — 5:00	Despite What The New York Times And Others Say, Close Relationships Of Vascular Surgeons With Industry Are Mostly Ethical And Beneficial To Patients And Society: Pitfalls To Avoid Bruce A. Perler
5:01 — 5:06	How Do Surgeons Drive Vascular Innovation: What Are The Critical Steps Leading To Success Jeffrey H. Lawson
5:07 — 5:14	Panel Discussion
Moderators	s: Jack L. Cronenwett Sean P. Roddy
	EVIDENCE BASED MEDICINE ISSUES
5:14 — 5:19	Propensity Score Matching Studies: How Do They Work And What Are Their Strengths And Weaknesses Charles C. Miller

5:20 - 5:25	Registry Based RCTs: What Are They And Why Are They Better Than Other Evidence Based Techniques Jens Eldrup Jorgensen Jack L. Cronenwett
	REGULATORY ISSUES
5:26 - 5:31	Historical Perspective Over The Last 25 Years On FDA Approvals Of EVAR Devices Submitted By Investigators And Industry: Lessons Learned To Guide Future Applications Dorothy B. Abel
	JOURNAL ISSUES
5:32 — 5:37	How To Get A Paper Accepted In A High Impact Journal Like The JVS: Does Bias Ever Matter Peter Gloviczki Peter F. Lawrence
	SVS, GOVERNMENT AND MEDICAL INSURANCE TOPICS
5:38 — 5:43	The SVS Foundation: How Does It Serve Vascular Surgeons And Their Patients Peter F. Lawrence
5:44 — 5:49	Effects Of The Affordable Care Act (ACA) On Vascular Surgical Outcomes: Does The Medicaid Expansion Of The ACA Improve Outcomes Or Not Mohammad H. Eslami
5:50 — 5:55	If You Want Medicare For All Look At The NHS First Firas F. Mussa
5:56 — 6:05	Panel Discussion End of Program E
MORE N AORTIC TAAAs, JU GRAFTS, EVAR (F/ INFRARE HOT NEV Trianon Bal SESSION 39 MORE TO	EW DEVELOPMENTS IN THORACIC DISEASE, TEVAR, AORTIC DISSECTIONS, UXTA- AND PARARENAL AAAS, PARALLEL FENESTRATED AND BRANCHED B/EVAR), MULTILAYER BARE STENTS, NAL AAAS AND STANDARD EVAR, AND W AORTIC AND CAROTID TOPICS Ilroom, 3rd Floor  (Trianon Ballroom, 3rd Floor) DPICS RELATED TO THE THORACIC AORTIC DISSECTIONS, INTRAMURAL
HEMATC ULCERS ( Moderators	MORTIC DISSECTIONS, INTRAMORAL DMAS (IMHs), PENETRATING AORTIC (PAUs) AND THEIR TREATMENT SER Ramon Berguer Paulo E. Ocke-Reis
6:50 — 6:55	False Lumen Thrombosis Is An Overused And Meaningless Endpoint In The Treatment Of Uncomplicated TBAD Firas F. Mussa
6:56 — 7:01	Acute Aortic Dissection (Type A And B) Is More Common Than We Think: From A Swedish Population Based Study: Why Are We Missing Cases And What Can Be Done About It Johnny Steuer
7:02 — 7:07	Value Of Stent-Grafts In Genetically Triggered Aortopathy Cherrie Z. Abraham

7:08 — 7:13	What Is Best Medical Treatment For TBAD Patients: How Best To Control Blood Pressure And To Get Patients To Comply: They Don't Colin D. Bicknell
7:14 — 7:19	Multimodular Approach To Treating Chronic TBADs With TAAAs: Who Needs A F/B/EVAR; Who Needs A Candy-Plug Tilo Kölbel Fiona Rohlffs
7:20 - 7:25	Panel Discussion
7:25 — 7:30	Comparison Of The STABILISE And Petticoat Techniques For Treatment Of Acute And Subacute TBADs: Preliminary Results Suggest STABILISE Achieves Better False Lumen Obliteration Igor A. Laskowski Josh B. Goldberg Heepeel Chang
7:31 — 7:36	Reinterventions After TEVAR For TBADs: How To Plan For The Future At The Index Procedure And Strategies For Successful Repair In The Chronic Phase Bijan Modarai
7:37 — 7:42	Requirement For Adjunctive Branch Stents After TEVAR For Complicated TBADs Is An Indicator Of Poor Prognosis: What Can Be Done To Offset It Mark K. Eskandari
7:43 — 7:48	Update On Intramural Hematoma (IMH): The Majority Can Be Managed With Medical Treatment And Close Observation, But Some Require Urgent Intervention: Which Ones Frank J. Criado
7:49 — 7:54	Natural History And Optimal Treatment For Penetrating Aortic Ulcers (PAUs): When To Observe And When To Treat With TEVAR Colin D. Bicknell
7:55 — 8:00	Panel Discussion
MORE A PATHOLO AND TH AND TH	D) (Trianon Ballroom, 3rd Floor) DVANCES RELATED TO TREATING OGY INVOLVING THE ASCENDING AORTA E AORTIC ARCH; AORTIC DISSECTIONS EIR TREATMENT 5: Rodney A. White Joseph E. Bavaria
8:00 — 8:05	The Majority Of TBAD Patients – Complicated And Uncomplicated – Require Secondary Endovascular Procedures After TEVAR: What Secondary Procedures And When Götz M. Richter
8:06 — 8:11	Antegrade Stent-Graft Delivery For Treating Acute Type A Dissections: When Is It Advantageous And How To Do It Ourania Preventza Joseph S. Coselli
8:12 — 8:17	Status Of A Catheter Aortic Septotomy Device For Treating Aortic Dissections: Why And How Should It Work As A Treatment Ramon Berguer Juan C. Parodi

8:18 — 8:23	Caval Balloon Occlusion: A Better Way Than Rapid Pacing To Permit Precise Stent-Graft Placement In The Proximal Aorta: How To Do It And Is It Better For The
	Heart Nuno V. Dias Björn Sonesson
8:24 — 8:29	Updated Experience For Precise TEVAR Placement In Or Near The Arch By Valsalva And PEEP: It Is Safe And Effective: Adenosine, Rapid Pacing And Caval Occlusion Are NOT Needed: How To Do It And How To Do It With A Prosthetic Aortic Valve Nikolaos Tsilimparis
8:30 - 8:35	Panel Discussion
8:35 — 8:40	Arch Lesion Repair With Single, Double Or 3-Branched Devices: When Is Each Best And Why: How To Do It From A Totally Femoral Approach  Gustavo S. Oderich (PowerPoint Presentation With Synched Audio)
8:41 — 8:46	Chimney Technique For Dealing With Total Arch Lesions And Dissections: How To Make It Work, Limitations And Results <i>Ivo Petrov</i>
8:47 — 8:52	Laser Fenestrations And Total Percutaneous Techniques For Endovascular Arch Repair Timothy A. Resch
8:53 — 8:58	In Situ Fenestration With Life Tech Technology For Aortic Arch Aneurysms: An Alternative To Branched Graft Devices And Parallel Grafts: Results In >50 Cases And How Does The New Technology Work Ralf R. Kolvenbach (PowerPoint Presentation With Synched Audio)
8:59 — 9:04	Multicenter International Study On Preloaded Fenestrated Endografts With A Modified Biport Handle (Cook): A Way To Make F/EVAR Easy: How Does The System Work Nikolaos Tsilimparis
9:05 — 9:11	Panel Discussion
9:11 — 9:24	Break – Visit Exhibits And Pavilions (2nd and 3rd Floors)
(JUXTA, F	(Trianon Ballroom, 3rd Floor) ND ENDO TREATMENT OF COMPLEX AAAS PARA- AND SUPRA-RENAL) AND TAAAS; VICES FOR THEIR TREATMENT
	: Nuno V. Dias Tara M. Mastracci
	COMPLEX AAAs AND TAAAs
9:24 — 9:29	Lower Extremity Ischemic Complications After F/B/ EVAR: Etiology And How To Avoid Them Thomas S. Maldonado
9:30 — 9:35	Long-Term Survival Results After Type II TAAA Endovascular Repair: When Is The Procedure Contraindicated Matthew J. Eagleton
9:36 — 9:41	How To Make 3 Chimney EVAR With Involvement Of The SMA Safe And Effective Manish Mehta
9:42 — 9:47	Value Of Ch/EVAR For Juxtarenal AAAs: They Are As Safe And Effective As Any Other Procedure And Simpler: Based On A Meta-Analysis Of Mid-Term Outcomes Joost A. van Herwaarden

9.48 – 9.53 Risk Factors Associated With Long-Term Mortality And Complications After Open And Endovascular TAAA Repair: What Is The Role Of Open Repair In 2022 Thomas F. Lindsay 9.54 – 9.59 Comparison Of Endo And Open Repair Of Post Dissection TAAAs: Which Procedure Is Best And When Fabio Verzini 10.90-10.95 Comparative Morbidity And Mortality Outcomes Of Open, Hybrid And F/B/EVAR For Type II And III TAAAs Justify Greater Use Of F/B/EVAR For These Complex Lesions Gilbert R. Upchurch Salvatore T. Scali Dean Arnaoutakis 10.96-10.12 Panel Discussion  TOPICS RELATED TO INTERESTING NEW DEVICES 10.12-10.17 Update Of A New Hybrid Device (Thoracoflo From Terumo Aortic) For TAAA Repair: How It Works, Clinical Experience And Advantages Sebastian E. Debus 10.18-10.23 How To Prevent Patch Aneurysms After Open TAAA Repair With Long Antegrade Grafts: How To Treat Them When They Occur Thomas C. Bower Manju Kahra 10.24-10.29 Update On The Role Of Device Engineering And Components On Sac Regression: Failed Regression After EVAR Are Device Related Not Patient Related Michael C. Stoner 10.30-10.35 WeFlow Device For Juxtarenal AAA, TAAA And Arch Repairs: A New Inner Branch And Outer Branch Approach: How Does It Work And Early Results Wei Guto (PowerPoint Presentation With Synched Audio) 10.36-10.40 Panel Discussion  SESSION 42 (Trianon Ballroom, 3rd Floor) PROGRESS IN TREATING ILIAC ANEURYSMS; ILIAC BRANCHED DEVICES (IBDs); UPDATE ON MULTILAYER FLOW MODULATING (MLFM) AND OTHER BARE STENTS FOR TREATING ANEURYSMS AND DISSECTIONS Moderators: Thomas S. Moldonado Nicholas J.W. Cheshire  TREATMENT OF ILIAC ANEURYSMS AND IBDs Surprisingly, Occlusion Of 1 Or Both Hypogastric Arteries During EVAR Does NOT Result In Serious Adverse Events: From A Large VQI Study Heepeel Chang  10.52-10.57 Experience With Cook IBD For The Treatment Of Common Iliac Aneurysms: Including After Previous EVAR And In Octogenarians Giovanni B. Torsello		<u>.</u>
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	10:52-10:57	Common Iliac Aneurysms: Including After Previous EVAR And In Octogenarians

	10:58-11:03	Long-Term Comparison Of The Cook Zenith And Gore Excluder IBDs: Advantages And Limitations Of Both: What Is The Best Bridging Stent Giovanni Pratesi
	11:04-11:09	An Iliac Customized Fenestrated Device (From Terumo Aortic): When And How Can It Work In Anatomies Unsuitable For Branched Endografts: Advantages And Limitations Fadi Taher Afshin Assadian
	11:10-11:15	Advantages Of The Artivion (Formerly CryoLife/Jotec) IBD Device Now From Artivion For Treating Common And Internal Iliac Artery Aneurysms: When Bell Bottom Technique; When IBD Lee Bouwman
	11:16-11:22	Panel Discussion
		UPDATE ON MULTILAYER FLOW MODULATING (MLFM) AND OTHER BARE STENTS
	11:22-11:27	Systematic Review And Meta-Analysis Of The Multilayer Flow Modulating Bare Stent (From Cardiatis) For Complex Aortic Lesions: Early And Mid-Term Results Are Still Interesting: Does This Technology Have A Future George Geroulakos
	11:28-11:33	Resurgence Of Interest In Uncovered Bare Stents As A Promising Treatment For Acute Aortic Dissections: What Is Their Future Rodney A. White
	11:34-11:39	Role Of Bare Metal AMDS Stents From Artivion (Formerly CryoLife/Jotec) For Repair Of Acute Type A Dissections: Indications And Results Wilson Y. Szeto Grayson H. Wheatley
	11:40-11:45	MLFM Bare Stents Will Be Effective Treatment For Aortic Dissections: How Extensive A Portion Of The Aorta Needs To Be Treated Claude A. Vaislic
	11:46-12:00	Panel Discussion
	12:00- 1:00	Lunch Break – Visit Exhibits And Pavilions (2nd and 3rd Floors)
AND STANDARD EVAR: A NEW DE AAA GROWTH; AAA NECK DILATA EVAR; VALUE OF LOW PROFILE AAA LINK TO CANCER; IMPROVED ULTR SURVEILLANCE AND ALL AAAS ARE BOMBS WAITING TO EXPLODE Moderators: Thomas S. Maldonado		EW DEVELOPMENTS IN AAA TREATMENT ANDARD EVAR: A NEW DEVICE TO SLOW OWTH; AAA NECK DILATATION AFTER ALUE OF LOW PROFILE AAA ENDOGRAFTS; CANCER; IMPROVED ULTRASOUND LANCE AND ALL AAAS ARE NOT TIME WAITING TO EXPLODE
	1:00 — 1:05	Update On A Novel New Technology (Nectero) To Slow
		AAA Growth; How Does It Work And Early Clinical Results
		Venkatesh G. Ramaiah
		AAA NECK BEHAVIOR AFTER EVAR
	1:06 — 1:11	Optimal Stent Design And Optimal Degree Of Oversizing To Avoid Neck Dilatation And Why It

Matters Carlos Bechara

1:12 — 1:17	Aortic Neck Dilatation Is Different After F/EVAR And EVAR: What Is The Reason And Why Is It Important For Outcomes  Thomas S. Maldonado
1:18 — 1:23	Major Aortic Neck Dilatation Occurs Equally After EVAR And Open Repair: From The DREAM RCT: This ONLY Occurs After EVAR With Self-Expanding Endografts Jan D. Blankensteijn
1:24 — 1:29	Do AAA Necks And Sacs Dilate After F/EVAR For Juxtarenal AAAs At 1 And 5 Years: What Are The Good Or Bad Consequences Of Neck And Sac Enlargement: What Can Be Done To Improve Results Benjamin W. Starnes
1:30 — 1:35	<b>DEBATE:</b> Low Profile Devices For EVAR Are Failing: Their Future Is Questionable <i>Hence J.M. Verhagen</i>
1:36 - 1:41	<b>DEBATE:</b> Not So: Ovation Stent-Grafts (From Endologix) Have Good 5-Year Results With No Neck Dilatation Or Migration Even With Challenging Neck Anatomy: Based On A Multicenter International Study Of A Low Profile Endograft <i>Mahmoud B. Malas</i>
1:42 — 1:47	Why We Need A New RCT Comparing EVAR With Watchful Surveillance In Women With Small AAAs <i>Janet T. Powell</i>
1:48 — 1:53	Causes And Treatment Of Ureter-To-Iliac Artery Fistula: When Open, When Endo Treatment And Results Piotr M. Kasprzak
1:54 — 1:59	Presenting Small AAAs As Ticking Time Bombs Or Unexploded Grenades Is Wrong-Headed And Harmful: Diameter-Based Indications For AAA Repair May Lead To Unnecessary Procedures Frank I. Criado
2:00 — 2:06	Panel Discussion
MORE N DOES TH AFTER EV	4 (Trianon Ballroom, 3rd Floor) EW DEVELOPMENTS IN AAAs: HOW HROMBUS LOAD EFFECT PROGNOSIS VAR AND EVAS; OTHER RELATED AAA
TOPICS Moderators	
	s: Ali F. AbuRahma Janet T. Powell
Moderators	s: Ali F. AbuRahma Janet T. Powell AAA SAC THROMBUS LOAD
	s: Ali F. AbuRahma Janet T. Powell
Moderators	S: Ali F. AbuRahma Janet T. Powell  AAA SAC THROMBUS LOAD  Impact Of Thrombus In AAA Sac And Neck On AAA Behavior And EVAR Outcomes: How To Quantitate Thrombus Load And Distribution
Moderators 2:06 – 2:11	Si: Ali F. AbuRahma Janet T. Powell  AAA SAC THROMBUS LOAD  Impact Of Thrombus In AAA Sac And Neck On AAA Behavior And EVAR Outcomes: How To Quantitate Thrombus Load And Distribution Nicos Labropoulos  DEBATE: Large Amount Of AAA Sac Thrombus Promotes Morbidity Without Rupture And With Rupture: By What Mechanisms Is Thrombus Harmful And How Can Thrombus Load Be Quantitated

#### OTHER AAA RELATED TOPICS

2:24 — 2:29	Graft Infolding: A Unique EVAR Complication: How To Prevent It And How To Treat It  Ashraf Mansour
2:30 — 2:35	Perioperative Mortality With F/EVAR And B/EVAR Is Inversely Related To Hospital Volume For These Procedures: What About Surgeon Volume From A National Audit Database Hence J.M. Verhagen
2:36 — 2:41	Favorable Anatomy For Endovascular Repair Is Preserved During Two Years Of Observation Of Small AAAs Jon S. Matsumura
2:42 — 2:47	1-Year Sac Dynamics Predict Survival, Rupture And Need For Re-Intervention Long-Term After EVAR: Shrinkage Is Better Than Stable: Stable Is Better Than Expansion In Population Based Studies Marc L. Schermerhorn
2:48 — 2:53	Technical Tips To Perform SAFE Large Sheath Percutaneous Femoral Access For Complex AAA EVAF In Obese Or Scarred Groins – Even With Calcified Arteries Barend M.E. Mees
2:54 - 2:59	4X Increased 18F FDG Uptake On PET CT In Female AAA Patients Compared To Males Indicates Increased Aortic Wall Inflammations: Does This Explain Increased Rupture Risk In Females: Implications For Treatment  Natzi Sakalihasan
3:00 - 3:06	Panel Discussion
3:06 - 3:15	Break - Visit Exhibits And Pavilions (2nd and 3rd Floors)
J:00 - J:1J	break - visit Exhibits And I avinons (2nd and 3rd 11001s)
SESSION 45 SHORT F PACED T	5 (Trianon Ballroom, 3rd Floor) HOT AORTIC TOPICS (4 ¾-MINUTE FAST ALKS) 5: Timothy A.M. Chuter
SESSION 45 SHORT F PACED T	5 (Trianon Ballroom, 3rd Floor) HOT AORTIC TOPICS (4 ¾-MINUTE FAST FALKS)
SESSION 45 SHORT I PACED T Moderators	5 (Trianon Ballroom, 3rd Floor) HOT AORTIC TOPICS (4 ¾-MINUTE FAST FALKS) 5: Timothy A.M. Chuter Luis A. Sanchez  Large Diameter AAA Necks (>34 mm) Negatively Impact Patient Survival After EVAR: Is Inflammation Involved: How Should Such Patients Be Treated
SESSION 45 SHORT I PACED T Moderators 3:15 – 3:20	G (Trianon Ballroom, 3rd Floor) HOT AORTIC TOPICS (4 <sup>3</sup> / <sub>4</sub> -MINUTE FAST ALKS) SE Timothy A.M. Chuter Luis A. Sanchez  Large Diameter AAA Necks (>34 mm) Negatively Impact Patient Survival After EVAR: Is Inflammation Involved: How Should Such Patients Be Treated Matt M. Thompson  A Large Proportion Of EVARs Are Performed On AAAs Smaller Than The SVS Guideline: What Is The Long-Term Effect And What Should Be Done About It
SESSION 45 SHORT I PACED T Moderators 3:15 – 3:20 3:20 – 3:25	G (Trianon Ballroom, 3rd Floor) HOT AORTIC TOPICS (4 3/4-MINUTE FAST ALKS) SE Timothy A.M. Chuter Luis A. Sanchez  Large Diameter AAA Necks (>34 mm) Negatively Impact Patient Survival After EVAR: Is Inflammation Involved: How Should Such Patients Be Treated Matt M. Thompson  A Large Proportion Of EVARs Are Performed On AAAs Smaller Than The SVS Guideline: What Is The Long-Term Effect And What Should Be Done About It Salvatore T. Scali  Late Delayed Renal Artery Revascularization After Inadvertent Occlusion For Many Days Is Worthwhile: Collaterals Keep The Kidney Viable Although No Urine Is Produced
SESSION 45 SHORT I PACED T Moderators 3:15 – 3:20 3:20 – 3:25 3:25 – 3:30	G (Trianon Ballroom, 3rd Floor) HOT AORTIC TOPICS (4 <sup>3</sup> / <sub>4</sub> -MINUTE FAST ALKS)  SE Timothy A.M. Chuter Luis A. Sanchez  Large Diameter AAA Necks (>34 mm) Negatively Impact Patient Survival After EVAR: Is Inflammation Involved: How Should Such Patients Be Treated Matt M. Thompson  A Large Proportion Of EVARs Are Performed On AAAs Smaller Than The SVS Guideline: What Is The Long-Term Effect And What Should Be Done About It Salvatore T. Scali  Late Delayed Renal Artery Revascularization After Inadvertent Occlusion For Many Days Is Worthwhile: Collaterals Keep The Kidney Viable Although No Urine Is Produced Nikolaos Tsilimparis Giant Hypogastric Artery Aneurysms: Strategies And Techniques For Treating Them Endovascularly

3:40 — 3:45	TEVAR For Acute Complicated TBAD: Improved Outcomes When The Endograft Is Extended To Zone 2 Versus Zone 3: Why Is This So <i>Jean M. Panneton</i>
3:45 — 3:50	Long-Term Propensity Matched Comparison Of Open Repair And F/B/EVAR For Pararenal And Paravisceral AAAs Giovanni G.T. Tinelli
	Yamume Tshomba
3:50-4:00	Panel Discussion
4:00 — 4:05	Visceral Debranching With A Simple Aortic Endograft Is The Best Way To Treat TAAAs In Good Risk Patients: How To Do It Safely Guillermo A. Escobar
4:05 — 4:10	Shaggy Aortic Score: What Is It: How Is It Associated With Postoperative Lower Extremity Weakness After F/B/EVAR Jade S. Hiramoto
4:10 — 4:15	Laser In Situ F/EVAR As An Off-The-Shelf Option For Ruptured Complex Or Short Necked AAAs And Failed EVAR: Experience And Technical Tips Timothy A. Resch
4:15 — 4:20	Advantages And Disadvantages Of The BeGraft, BeGraft Plus (Bentley) And Advanta (iCAST™ – Getinge) Bridging Stents For F/B/EVAR: Experience With >2000 Target Vessels
	Eric L.G. Verhoeven Athanasios Katsargyris
4:20 — 4:25	Update On Performing EVAR With Only IVUS Guidance To Decrease Radiation: Technical Tips And 4-Year Results Jörg Tessarek
4:25 – 4:30	Risk Factors And Late Clinical Consequences Of AAA Neck Dilatation After EVAR With Self-Expanding Endografts: What Are The Differences In Neck Behavior After Excluder And Endurant Endografts Hence J.M. Verhagen
4:30 — 4:35	Panel Discussion
SESSION 46	5 (Trianon Ballroom, 3rd Floor)
	HORT HOT NEW TOPICS RELATED TO
AORTO-	ILIAC AND CAROTID DISEASE AND THEIR
	ENTS (4 3/4-MINUTE FAST PACED TALKS)
Moderators	s: Fred A. Weaver Michael L. Marin
4:35 — 4:40	Are Low Profile Devices For EVAR And TEVAR Improving Or Worsening Outcomes Naoki Fujimura
4:40 — 4:45	Endovascular Repair Of Thoracic Aneurysms With TEVAR Outside IFUs: Value And Limitations: From A Multicenter Study Fabio Verzini
4:45 — 4:50	How To Avoid 'Lost To Follow Up' After Invasive Treatment Of AAAs And Why Is It Important Matthew W. Mell
4:50 — 4:55	The VORTEC Technique For Revascularizing Hypogastric Arteries Without Clamping Or Suturing: How Does It Work And Advantages Zoran Rancic
	Mario L. Lachat

4:55 — 5:00	Impact Of Iliac Aneurysms On The Treatment Of Complex AAAs Matthew J. Eagleton
5:00 — 5:05	Isolated Iliac Artery Aneurysms Do NOT Need To Be Treated Until They Are At Least 4 Centimeters In Diameter Christopher J. Smolock
5:05 — 5:10	How To Safely Stent The Large Fenestration Of A ZFEN Endograft When It Is Crossed By Struts: Indications For Doing So And Late Results  Luis A. Sanchez
5:10 — 5:15	3-Stage Concept For Treating Mega-Aortic Syndrome: Frozen Elephant Trunk (FET), TEVAR, Distal Open Repair: Results Martin Czerny (PowerPoint Presentation With Synched Audio)
5:15 <b>—</b> 5:20	Panel Discussion
	CAROTID RELATED TOPICS
5:20 - 5:25	New Findings Regarding Carotid In-Stent Restenosis: What Is Its Rate Of Progression And Its Clinical Significance Zachary AbuRahma Ali F. AbuRahma
5:25 — 5:30	Intracranial Angiography During TCAR: Technique
3:23 — 3:30	And Value Peter L. Faries
5:30 — 5:35	Clinical Results Of A Micronet Covered Carotid-Stent (C-GUARD): Analysis Of 145 Patients At Two Sites: Advantages And Disadvantages  Christian Wissgott (PowerPoint Presentation With Synched Audio)  Christoph Kopetsch  Reimer Andresen
	MORE AORTA RELATED TOPICS
5:35 — 5:40	
5:55 — 5:40	Improved Survival After Implementation Of A Large Scale Dedicated Network For Aortic Emergencies: Why The SOS Aorta System Works Jean-Marc Alsac
5:40 — 5:45	Physician Modified Gore C3 Excluder Endograft For
0.40	TAAA Repair Wayne W. Zhang
5:45 — 5:50	The Sandwich-Periscope Technique For Left Subclavian Revascularization With Zone 2 TEVAR: It May Be The Best Way And How To Do It Sukgu Han
5:50 — 5:55	Role Of Endovascular And Open Treatment For Mid Aortic Syndrome In Children, Teenagers And Young Adults Ramesh K. Tripathi
5:55 — 6:00	Supra-Aortic Trunk Revascularization Of Any Sort With TEVAR Increases Stroke Risk Mark K. Eskandari
6:00 — 6:05	An Unrecognized Mechanism For Causing Aortic Dissections: Shock Wave Energy Rather Than Increased Arterial Pressure Causes The Tear: How Does It Work And How To Decrease The Risk Erno Remsey-Semmelweis
6:05 — 6:10	Panel Discussion
	End of Program F



### THURSDAY, NOVEMBER 17, 2022

6:00 A.M. General Registration — Rhinelander Gallery, 2nd Floor 6:00 A.M. Faculty Registration — Gramercy Suite West, 2nd Floor 6:15 A.M. Continental Breakfast — Rhinelander Gallery, 2nd Floor

#### **CONCURRENT THURSDAY PROGRAMS**

PROGRAM G: (SESSIONS 47-54)

Exciting New Or Rediscovered Techniques, Concepts Or Devices; Progress In F/B/EVAR And Parallel Grafts For Complex AAAs; Tribute To Our Military; Progress In The Treatment Of Ruptured AAAs; More About New Devices, Techniques Or Concepts; Progress In Radiation Safety

6:50 A.M. - 6:07 P.M.

Grand Ballroom East, 3rd Floor

PROGRAM H: (SESSIONS 55-63)

New Or Improved Devices For: Standard EVAR, EVAS And More Complex AAAs; Repairs Of TAAAs, The Ascending Aorta, The Aortic Arch, And The Descending Aorta (TEVAR); New Devices For Treating Lower Extremity Lesions By Endo Or Open Techniques; Update On Endoanchors And Fixation Devices And New Or Improved Devices For Endovascularly Removing Clot

**And Occluding Blood Vessels** 

6:50 A.M. - 5:52 P.M.

Grand Ballroom West, 3rd Floor

PROGRAM I: (SESSIONS 64-71)

**Superficial Venous Disease** 

7:00 A.M. - 6:25 P.M.

Trianon Ballroom, 3rd Floor

PROGRAM J: (SESSIONS 72-75)

Multidisciplinary Acute Stroke Management

8:00 A.M. - 12:15 P.M.

Murray Hill Suites, 2nd Floor

PROGRAM G (SESSIONS 47-54)

EXCITING NEW OR REDISCOVERED TECHNIQUES, CONCEPTS OR DEVICES; PROGRESS IN F/B/EVAR AND PARALLEL GRAFTS FOR COMPLEX AAAS; TRIBUTE TO OUR MILITARY; PROGRESS IN THE TREATMENT OF RUPTURED AAAS; MORE ABOUT NEW DEVICES, TECHNIQUES OR CONCEPTS; PROGRESS IN RADIATION SAFETY

Grand Ballroom East, 3rd Floor

SESSION 47 (Grand Ballroom East, 3rd Floor)

EXCITING NEW OR REDISCOVERED TECHNIQUES,

DEVICES OR CONCEPTS

Moderators: Richard F. Neville Frank J. Veith

Evan C. Lipsitz

6:50 – 6:55 Combating Bias In Medical And Vascular Studies And Therapeutic Decision Making: Why It Is Such A Big

Deal And What To Do About It

Matthew T. Menard

6:56 – 7:01 Update On Remote Monitoring Of Vascular Grafts:

Where Is It At And Where Is It Going

Richard F. Neville

	7:02 — 7:07	New Wearable Technologies For Telemonitoring Vascular Diseases And Their Treatments: How Will Innovation Improve Care During And After The COVID-19 Pandemic Celia Riga
	7:08 — 7:13	Value Of Digital Health In Vascular Disease Management: Virtual And Otherwise Tony S. Das (PowerPoint Presentation With Synched Audio)
	7:14 – 7:19	Update On Tissue Engineered Biological Arterial Grafts (Humacyte): How Well Are They Working In Patients And In What Vascular Bed Todd E. Rasmussen Alexander Kersey Jeffrey H. Lawson
	7:20 — 7:25	Why Carotid Plaque Morphology Differs In Patients With An Acute MI And Those With Intermittent Claudication: Why It Matters Henrik Sillesen
	7:26 - 7:31	Panel Discussion
	7:31 — 7:36	Relining Occluded Vein Grafts With Viabahn (Gore) Stent-Grafts Or Supera (Abbott) Bare Stents Can Restore Patency And Avoid Thrombolysis: Techniques And Results Hans Lindgren
	7:37 — 7:42	Measuring Aortic Diameters Is Inaccurate And Subjective: Even With Newer Imaging Technology, One Can Make The Diameter What You Want: What Are The Implications Janet T. Powell
	7:43 — 7:48	Provider Skill Is Not Getting Appropriate Attention In The Health Care Value Equation Of Value = Outcome/ Cost: What To Do About It  Lars B. Lonn (PowerPoint Presentation With Synched Audio)
	7:49 — 7:54	Why Are Pig Organ Xenografts Now Feasible In Man: Update On Successes, Their Potential Role And What Are Their Limitations Robert A. Montgomery
	7:55 — 8:00	Non-Compliant Endografts For TEVAR Have A Detrimental Effect On Systolic Blood Pressure And Cardiac Function; Compliant Endografts Are The Remedy Juan C. Parodi (PowerPoint Presentation With Synched Audio)
	8:01 — 8:06	Update On Isolated Limb Perfusion To Enable
		Amputated Limb Reimplantation  Zachary M. Arthurs
	8:07 — 8:12	Panel Discussion
SESSION 48 (Grand Ballroom East, 3rd Floor) PROGRESS IN FENESTRATED AND BRANCHED EVAR (F/B/EVAR) AND PARALLEL GRAFTS FOR COMPLEX AAAs AND TAAAs; AND RELATED TOPICS Moderators: James F. McKinsey Timothy A.M. Chuter Andres Schanzer		
	8:12 — 8:17	The "Shaggy Aorta": What Is It; How Is It Determined; How Shaggy Does It Have To Be To Matter <i>Germano Melissano</i>

8:18 — 8:23	The US Aortic Research Consortium (US-ARC): What Is It And How Can It Better Answer Questions About F/B/EVAR Like "Does The Aortic Neck Dilate After F/EVAR And If So, What Are Its Consequences" <i>Andres Schanzer</i>
8:24 — 8:29	Updated Experience With The STABILISE Technique For Acute And Subacute TBADs: Indications, Technical Tips, Precautions And Results Germano Melissano Andrea Kahlberg Roberto Chiesa
8:30 — 8:35	Branched EVAR For TAAA Repair Can Be Performed With Only Transfemoral Access Using Steerable Sheaths: How To Do It And What Is The Best Device For Stable Access <i>Tilo Kölbel</i>
8:36 — 8:41	With Steerable Sheaths Upper Extremity Access With B/EVAR Is Unnecessary: Which Sheath Is Best And Pitfalls To Be Avoided <i>Eric L.G. Verhoeven</i>
8:42 — 8:47	Why Balloon Expandable Bridging Stent-Grafts Are Best For F/B/EVAR: Which One Is Best And Why: A US Perspective Mark A. Farber
8:48 — 8:53	Why Balloon Expandable Bridging Stent-Grafts Are Best For F/B/EVAR: Which One Is Best And Why: A European Perspective Eric L.G. Verhoeven
8:54 — 8:59	What Is The Best Bridging Covered Stent (Stent-Graft) For F/B/EVAR Based On An In Vitro Fatigue Testing Model And Other Considerations Martin J. Austermann Giovanni B. Torsello
9:00 — 9:05	With Complex AAAs, When F/B/EVAR; When Parallel Grafts; When Open Repair: All Have Their Pros And Cons Chang Shu (PowerPoint Presentation With Synched Audio)
9:06 — 9:11	How To Deal With Bad Necks In AAA Treatment: We Need All Options: Chimneys, Endoanchors, Fenestrated And Branched Solutions: Case Selection Is The Key: How To Do It <i>Götz M. Richter</i>
9:12 — 9:17	How To Simply, Safely And Effectively Treat TAAAs With Off-The-Shelf (OTS) Devices Including Chimney And Sandwich Stent-Grafts: The Docking Station And Staging Approach: How To Do It And Mid-Term Results  Manish Mehta
9:18 — 9:26	Panel Discussion
9:26 — 9:38	Break – Visit Exhibits And Pavilions (2nd and 3rd Floors)
SESSION 49 (Grand Ballroom East, 3rd Floor) MORE PROGRESS IN F/B/EVAR AND PARALLEL GRAFTS FOR COMPLEX AAAs AND TAAAs; AND RELATED TOPICS Moderators: Frank J. Veith Nuno V. Dias Marcelo Ferreira	

Does Aortic Neck Dilatation Occur After F/EVAR And

9:38 - 9:43

Is It A Problem
Michael P. Jenkins

9:44 — 9:49	Percutaneous Femoral And Axillary Access For Complex Endovascular AAA Repair: How To Do It Safely And To Safely Downsize Femoral Sheaths To Restore Lower Extremity Flow Darren B. Schneider
9:50 — 9:55	The Lobato Parallel Graft Technique For Type B Aortic Dissection Complicated With Thoracoabdominal Aortic Aneurysm And Total True Lumen Occlusion Of The Infrarenal Aorta <i>Armando C. Lobato</i>
9:56 -10:01	Value And Advantages Of Preloaded Wires And Catheters For F/B/EVAR: How Do They Work; Are There Pitfalls Mark A. Farber
10:02-10:07	<b>DEBATE:</b> The Case Against Ch/EVAR And Parallel Grafts For Complex AAA And TAAA Repairs: F/B/EVAR Is Much Better <i>Adam Beck</i>
10:08-10:13	<b>DEBATE:</b> Nonsense! Ch/EVAR And Parallel Grafts If Done Right Are As Safe And Effective As F/B/EVAR And In Some Cases Better And Cheaper <i>Manish Mehta</i>
10:14-10:19	Indications For And Challenges With Inner Branched B/EVAR: Why The Choice Of Bridging Grafts Matters In This Setting <i>Eric L.G. Verhoeven</i>
10:20-10:25	Pros And Cons Of Inner Versus Outer Branches In Off- The-Shelf Endovascular TAAA Repair Timothy A. Resch
10:26-10:31	Technical Tips To Deploy F/EVAR Endografts Precisely With Tortuous Anatomy: How To Compensate For Endograft Rotation And Still Match Fenestrations To Branch Orifices Perfectly  Nuno V. Dias  Björn Sonesson
10:32-10:37	Advantages Of Steerable (Variable Curve) Sheaths For Complex AAA And TAAA Repairs And TBADs: Which One Is Best And Why: Pitfalls And How To Prevent Them W. Anthony Lee
10:38-10:43	Technical Tips And Precautions For Using Steerable (Variable Curve) Sheaths For B/EVAR: Why They May Not Work And How To Make Them Work Geert Willem H. Schurink
10:44-10:52	Panel Discussion
SESSION 50 (Grand Ballroom East, 3rd Floor) A TRIBUTE TO OUR MILITARY AND MILITARY PHYSICIANS: SOME MILITARY HISTORY; TREATMENT OF MILITARY AND CIVILIAN VASCULAR INJURIES AND CONTROL OF HEMORRHAGE; INNOVATIVE TECHNOLOGIES SUPPORTED BY THE DEFENSE DEPARTMENT	

Moderators: Todd E. Rasmussen

10:52-11:02

Brandon Propper

Wayne F. Yakes

The World War II Naval Battle At Guadalcanal And Its Impact On The US Navy & Marines And The Japanese Imperial Navy: A Turning Point (10-Minute Talk)

Department of Defense Effort To Support Vascular Surgery Research And US National Preparedness For Mass Casualties Todd E. Rasmussen	
A Vascular Surgeon's Impressions About War In The Ukraine (15-Minute Talk)  Andriy O. Nykonenko (PowerPoint Presentation With Synched Audio)	
Update On REBOA (Resuscitative Endovascular Balloon Occlusion Of The Aorta) For Treatment Of Hemorrhage, Trauma And Other Conditions: What Is New And Different: When And Where Should It Be Used And By Whom <i>Tal M. Hörer</i>	
New Improvements In REBOA: How Will They Make It Worthwhile For Battlefield Hemorrhage Brandon Propper Zachary M. Arthurs Todd E. Rasmussen	
How Will We Train The Next Generation Of Surgeons To Treat Vascular Trauma: For Military Practice: For Civilian Practice: What Issues Complicate It Paul W. White	
What Vascular Injury Killed Martin Luther King, Jr. And Why He Might Have Survived Today Cynthia K. Shortell	
Major Amputation Prosthetics Can Be Fixed Into Bone: How Does Osteointegration Work And How Is Infection Avoided Zachary M. Arthurs Todd E. Rasmussen	
Panel Discussion	
Lunch Break – Visit Exhibits And Pavilions (2nd and 3rd Floors)	
SESSION 51 (Grand Ballroom East, 3rd Floor) PROGRESS IN THE TREATMENT OF RUPTURED INFRARENAL AAAs, COMPLEX AAAs, TAAAS AND RELATED TOPICS Moderators: Thomas L. Forbes Timur P. Sarac Frank I. Veith	
Value, Limitations And Technical Tips For Using The Nellix Endograft For Ruptured AAAs <i>Tal M. Hörer</i>	
The Incidence Of Ruptured AAAs Is Decreasing And So Is Their Mortality: Why Are These 2 Facts So Ross Milner	
Statins Decrease The Growth Rate And Rupture Risk Of AAAs As Well As The Perioperative Mortality: Statins Should Be Given To All AAA Patients: When And What Dose Thomas L. Forbes	
A New System For Estimating AAA Wall Weakness From Gated Dynamic CT Scans: A Better Way To Predict Rupture Risk (From ViTAA Medical) Randy D. Moore	
Long-Term Results Of The AJAX RCT Comparing EVAR With Open Repair For Ruptured AAAs: EVAR Wins In The End – Especially In Patients >80 Willem Wisselink	

1:30 — 1:35	Variation In Use Of EVAR Versus Open Repair For Ruptured AAAs Depends On Training And Bias Rather Than Data, Logic Or Facts: EVAR Is Clearly The Best Treatment If It Can Be Done Martin Malina	
1:36 — 1:41	EVAR Should Be The Standard Of Care For Most Ruptured AAAs: Reasons Why It Is Not So And How To Overcome Them Hans-Henning Eckstein	
1:42 — 1:47	Outcomes Of Ruptured AAA Repair Are Better In High Volume Institutions Both For EVAR And Open Repair: From A Meta-Analysis With >120,000 Cases George A. Antoniou	
1:48 — 1:53	<b>DEBATE:</b> With Ruptured Complex AAAs And TAAAs, Off-The-Shelf F/B/EVAR Is The Best Treatment <i>Mark A. Farber</i>	
1:54 — 1:59	<b>DEBATE:</b> Not So: With Ruptured Complex AAAs And TAAAs Parallel Grafts Are Simpler, More Effective And Less Costly <i>Manish Mehta</i>	
2:00 — 2:06	Panel Discussion	
SESSION 52 (Grand Ballroom East, 3rd Floor) MORE NEW DEVELOPMENTS IN RUPTURED AAAS AND TAAAS; WHAT IS AND WHAT SHOULD BE HAPPENING WITH AAA SCREENING Moderators: Keith D. Calligaro Benjamin W. Starnes Matthew J. Eagleton		
	NEW DEVELOPMENTS IN AAA SCREENING	
2:06 — 2:11	Why The Current US PSTF Guidelines For AAA Screening Are Insufficient: Many At Risk Patients Are Not Screened Malachi Sheahan	
2:12 — 2:17	Update On Current Screening For AAAs In The US: Most Ruptured AAAs Occur In Patients Not Being Screened: How Should US PSTF Recommendations Be Changed And How Should Screening Groups Be Expanded Marc L. Schermerhorn Thomas EX. O'Donnell	
2:18 — 2:23	New Developments In AAA Screening: What Is Its Value And Who Should Be Screened Jes S. Lindholt	
	MORE ABOUT AAA RUPTURES AND THEIR TREATMENT	
2:24 — 2:29	With Ruptured Abdominal Aortic Aneurysms: How To Decrease Turn Down Rates And Procedural Mortality By Greatly Decreasing Delays Before Treatment: How To Do It  Maarit Venermo	
2:30 — 2:35	AAA Rupture After EVAR Behaves Differently From De Novo Rupture: How Should Treatment Be Modified In Patients With Post EVAR Ruptures	
	Piotr Szopinski	

2:36 — 2:41	Update On Treating All (100%) Ruptured AAAs With EVAR: The Orebro/Zurich 12-Year Experience Shows It Is The Best Treatment And Lowers The Turndown
	Rate
	David T. McGreevy
	Thomas Larzon
	Mario L. Lachat Tal M. Hörer
2:42 — 2:47	Applicability And Results Of Cook t-Branch OTS Endograft In Complex Aortic Aneurysms (Ruptured And Elective) With Narrow Internal Aortic Lumens: Advantages And Limitations Ciro Ferrer Rocco Giudice
2:48 — 2:53	In Situ Laser Fenestration To Facilitate Endograft
2:40 — 2:55	Treatment Of Ruptured TAAAs: When Is It Needed; How To Do It And Results Stephan Haulon
	Dominique Fabre
2:54 — 2:59	Open Repair For AAAs Should Not Be Used In Patients >80 Unless Their AAA Is >6 cm And They Are At Risk Of Rupture Or Ruptured: These Restrictions Do Not Apply To EVAR Hence J.M. Verhagen
3:00 - 3:05	How Can The Turndown Rate For Invasive Treatment Of Ruptured AAAs Be Decreased And Is It Beneficial Matthew W. Mell
3:06 — 3:11	Urgent And Emergent Treatment Of Symptomatic And Ruptured Thoracoabdominal And Juxtarenal Aortic Pathologies Using Physician Modified Stent-Graft Based On 3D Aortic Models Daniela Branzan Andrej Schmidt
3:12 — 3:17	Update On Advances In Treatment Of Abdominal Compartment Syndrome Associated With Ruptured AAAs: When And How To Treat Medically And When And How To Treat With Opening The Abdomen Martin Björck
3:18 — 3:20	Panel Discussion
3:20 — 3:30	Break – Visit Exhibits And Pavilions (2nd and 3rd Floors)
EXCITING	Grand Ballroom East, 3rd Floor) G NEW OR UPDATED CONCEPTS, DUES AND TREATMENTS
TECHNIQUES AND TREATMENTS  Moderators: Nicholas J.W. Cheshire  Reese A. Wain	
3:30 — 3:35	The Spur Stent System (Reflow Medical): A Temporary Stent With Pins To Penetrate The Arterial Wall And Facilitate DCB Drug Delivery: How Does It Work And Results To Date  Gunnar Tepe
	Marianne Brodmann Andrew Holden Thomas Zeller
3:36 — 3:41	The Serranator Balloon Catheter (From Cagent Vascular) For Vessel Prep In BTK Arteries: It Makes Microserrations And Prevents Dissections With PTA: Current Status: The PRELUDE BTK Trial Andrew Holden

3:42 — 3:47	The No Intervention Option For Treatment Is More Commonly Elected For Women Than Men With CLTI, AAAs, Ruptured AAAs And Thoracic Aneurysms: It Is Wrong Headed And Unfair Janet T. Powell
3:48 — 3:53	Update On The Retrievable Rescue Stent-Graft To Control Massive Aortic Or Caval Bleeding: How Does It Work, How Is The Device Retrieved And Present Status: How Can It Be Used For Elective Aortic Repair Bryan W. Tillman
3:54 — 3:59	Transradial Approaches For Abdominal And Lower Extremity Interventions Including CTOs And As An Adjunct For EVARs And TEVARs: How To Make Them Work And Advantages Of The Terumo R <sub>2</sub> P System  David O'Connor
4:00 — 4:05	Improving The Function Of A Hybrid Room: What Are The Elements And How Does The OR Black Box System Help Isabelle Van Herzeele
4:06 — 4:11	Update On A Clampless Sutureless Technique For Performing Aorto-Iliac Anastomoses Using Endograft Connectors: The VORTEC Technique – Useful When Arterial Control And Suturing Is Impossible Mario L. Lachat (PowerPoint Presentation With Synched Audio)
4:12 – 4:17	Endovascular Treatment Of Hepatic Artery Stenosis After Liver Transplantation: Indications, Techniques And Precautions To Make It Safe W. Charles Sternbergh III
4:18 — 4:23	Bariatric Left Gastric Artery Embolization Using The Novel Endobar Device For The Treatment Of Obesity: A Prospective Multicenter Randomized, Controlled IDE Trial
4:24 - 4:29	Robert E. Beasley  The Many Possible Uses Of Femoral Veins For Arterial Procedures: How To Harvest Them Safely And Expeditiously  Timur P. Sarac
4:30 - 4:38	Panel Discussion
PROGRES	(Grand Ballroom East, 3rd Floor) SS IN RADIATION SAFETY AND MORE DNCEPTS, DEVICES AND TECHNIQUES : Lindsay Machan
	Glenn Jacobowitz
100 110	PROGRESS IN RADIATION SAFETY
4:38 — 4:43	Endovascular Team Radiation Safety Performance: How To Monitor It: It Is More Than Dose Measurement Isabelle Van Herzeele
4:44 - 4:49	Myths And Facts Regarding Radiation Protection And Safety: Light Weight Leaded Gowns Offer Less Protection Lindsay Machan
4:50 — 4:55	What Is New In Radiation Safety: Modern Standards For Optimal Radiation Protection During Endovascular Procedures And The Role Of Radiation Protection Guidelines Bijan Modarai
	,

4:56 — 5:01	Small Tips And Modifications In Radiation Safety Can Make A Huge Impact On Staff Exposure: What Are They Maarit Venermo
5:02 — 5:05	Panel Discussion
	NEW CONCEPTS, ETC.
5:05 — 5:10	With Esophageal Cancer, When Is Prophylactic TEVAR Indicated To Prevent An Aorto-Esophageal Fistula $I\text{-}Hui\ Wu$
5:11 — 5:16	Endovascular Emergency Treatment Of Carotid Blowout From Head And Neck Cancer Or Carotid Patch Infections: Planning, Preparation And Technical Tips Are Essential Michael B. Silva, Jr.
5:17 — 5:22	What Is New In Gene And Stem Cell Therapy In 2022 Richard J. Powell
5:23 — 5:28	Minimizing Contrast Induced Nephropathy With EVAR By Contrast Dilution Naoki Fujimura
5:29 — 5:34	Endovascular Options For The Control Of Submassive Hemoptysis: When And How To Do It Jacob Cynamon
5:35 — 5:40	Vascular Access Considerations For Children: How To Do It Dawn M. Coleman
5:41 — 5:46	Aortic Patch For Focal Aortic Lesions: A New Endovascular Approach: How Does It Work And What Is The Progress To Date Vicente Riambau
5:47 — 5:52	Current Status Of AFX-3 And Ovation (With Anatomy Adaptive Sealing) Endografts (Both From Endologix) For AAA Repairs: Advantages And Limitations Of Each Francesco Speziale Pasqualino Sirignano
5:53 — 5:58	From Concept To Company: The Challenges, The Pain, The Rewards And How To Do It  Peter A. Schneider
5:59 — 6:07	Panel Discussion End of Program G

PROGRAM H (SESSIONS 55-63)
NEW OR IMPROVED DEVICES FOR: STANDARD
EVAR, EVAS AND MORE COMPLEX AAAS; REPAIRS
OF TAAAS, THE ASCENDING AORTA, THE AORTIC
ARCH, AND THE DESCENDING AORTA (TEVAR);
NEW DEVICES FOR TREATING LOWER EXTREMITY
LESIONS BY ENDO OR OPEN TECHNIQUES;
UPDATE ON ENDOANCHORS AND FIXATION
DEVICES AND NEW OR IMPROVED DEVICES
FOR ENDOVASCULARLY REMOVING CLOT AND
OCCLUDING BLOOD VESSELS
Grand Ballroom West, 3rd Floor

	5 (Grand Ballroom West, 3rd Floor) R IMPROVED DEVICES FOR INFRARENAL
	PAIR WITH STANDARD EVAR (5-MINUTE
TALKS)	
Moderators	s: Thomas L. Forbes Rossi M. Silva Enrico Ascher
6:55 — 7:00	Treo Endograft (Terumo Aortic) For Standard Infrarenal EVAR: Status Of Approval In US And Japan Matthew J. Eagleton
7:01 — 7:06	Real World Outcomes With The TREO Endograft (Terumo Aortic): Results From The TIGER Registry Vicente Riambau
7:07 — 7:12	Update On The Gore Conformable Excluder With Variable Neck Angulation Control For AAAs With Imperfect Necks In The US: Mid-Term Data And FDA Status Robert Y. Rhee
7:13 — 7:18	Status Of The Gore Conformable Excluder For EVAR In Europe: 2-Year Results From The EXCeL Registry With 150 Implants Marc R.H.M. van Sambeek Colin D. Bicknell
7:19 — 7:24	Altura Endograft With Kissing Proximal Stents For Standard EVAR: Advantages And Limitations: From An Experience With 150 Patients And Up To 5-Year Follow-Up Dainis K. Krievins
7:25 — 7:31	Panel Discussion
7:32 — 7:37	Advantages And Limitations Of The Cook ZENITH Alpha (Low Profile) Endograft For EVAR: Based On 2-Year Results Of The European Multicenter ZEPHYR TRIAL Philippe W.M. Cuypers Marc R.H.M. van Sambeek Dittmar Böckler
7:38 — 7:43	How And Why Do The Endurant Endograft Results For EVAR In France Differ From The Global Results: What Are The Implications  Jean-Pierre Becquemin (PowerPoint Presentation With Synched Audio)
7:44 — 7:49	AAA Repairs With The Endurant Endograft Outside The IFU Can Provide Acceptable Results In Some Patients: When Is This So And When Not: From The EAGLE Registry Marc R.H.M. van Sambeek
7:50 — 7:55	Head To Head Comparison Of Endurant And Excluder Endografts For EVAR In Challenging Asian AAA Anatomy Naoki Fujimura
7:56 — 8:01	Updated LEOPARD RCT Results Show That AFX Endografts Compare Favorably To Standard Proximally Fixed Endografts For AAA Repair Christopher J. Kwolek
8:02 — 8:07	AFX Endografts Work Well In Conical (Flared) AAA Necks: Why, Results And Are There Disadvantages Naoki Fujimura
8:08 — 8:14	Panel Discussion

SESSION 56 (Grand Ballroom West, 3rd Floor) NEW OR UPDATED DEVICES FOR STANDARD EVAR, EVAS (ENDOVASCULAR ANEURYSM SEALING) AND F/EVAR Moderators: Cynthia K. Shortell Ramon Berguer 8:14 - 8:19Alto Endograft (From Endologix) For Standard EVAR: This Latest Modification Of The Ovation Endograft Has More Proximal Polymer Sealing Rings: Results From The ELEVATE Trial And 3-4-Year Results From The New Zealand Experience Show Advantages: What Is The JAGUAR RCT Sean P. Lyden Andrew Holden 8:20 - 8:25Update On The Ovation/Alto Ultra Low-Profile Endograft (Now From Endologix): Advantages, Long-Term Results, New Modifications And Limitations Gianmarco de Donato 8:26 - 8:31Experience With The Nellix Endograft In 120 Patients With Up To 10 Years Follow-Up: What Is The Device's Future Dainis K. Krievins 8:32 - 8:37Novel 5-Branch Custom Made Endograft (From Cook) For Treating Type 1A Endoleaks After EVAR Or Open Repair With Short Aortic Body Grafts Below The Renal Arteries Piotr M. Kasprzak 8:38 - 8:43Comparison Of Ch/EVAS And Ch/EVAR: When Is Ch/ EVAS Indicated: Advantages And Limitations Barend M.E. Mees 8:44 - 8:49Update On Multicenter Results With F/EVAR Using The Fenestrated Anaconda Endograft: Advantages And Limitations: From The Global FACT Registry Clark J. Zeebregts Michel M.P. Reijnen 8:50 - 8:55Value Of The Fenestrated Anaconda Endograft For Treating Failed EVAR Fadi Taher Afshin Assadian 8:56 - 9:01 Update On The Incraft Endograft For Standard Infrarenal EVAR: Is Its Low Profile An Advantage Giovanni B. Torsello Jean-Pierre Becquemin Matteo Orrico

Floors)

SESSION 57 (Grand Ballroom West, 3rd Floor)

NEW OR IMPROVED DEVICES FOR THE

ASCENDING AORTA, THE AORTIC ARCH OR NEAR

THE ARCH

Are We Overtreating AAAs: Based On New Scrutiny Of Old Trials And Current Practice, And New Data On

Break - Visit Exhibits And Pavilions (2nd and 3rd

Moderators: Tilo Kölbel Rodney A. White

Nicola Mangialardi

Rupture Risk Timothy A. Resch

Panel Discussion

9:02 - 9:07

9:08 - 9:15

9:15 - 9:26

9:26 — 9:31	Changes In The Aortic Valve And Aortic Morphometrics After Ascending Aorta And Arch Endograft Placement Jean Bismuth Ross Milner	
9:32 — 9:37	Outcomes Of The Custom Relay Ascending Aorta Endograft (Terumo Aortic): The European Experience Vicente Riambau Afshin Assadian Mo S. Hamady	
9:38 — 9:43	Status In The US Of The Relay Branch Investigational Device For Repair Of Aortic Arch Lesions: How Many Branches Can And Should Be Revascularized: Advantages And Limitations  Luis A. Sanchez  Eric E. Roselli	
9:44 — 9:49	Long-Term Safety And Durable Effectiveness Of Relay (Terumo Aortic) Scalloped Endograft For TEVAR Treatment Of Lesions In Or Near The Aortic Arch Mo S. Hamady Jean-Marc Alsac	
9:50 — 9:55	Nexus OTS Endograft From Endospan For Treating Zone 0 And 1 Lesions Of The Aortic Arch: How Does It Work And 3-Year Clinical Results: Status In The US Felice Pecoraro Mario L. Lachat Ross Milner Andrew Holden Daniel G. Clair Nicola Mangialardi	
9:56 -10:01	Status Of And When And How To Use The Gore Conformable CTAG Endograft With Variable Angulation Control Optimally: Advantages And Limitations Sukgu Han	
10:02-10:07	Value Of Endo TAAA Repair In Patients With Connective Tissue Disorders And Why Is The Gap Between Fenestration And Aortic Wall Important In F/EVAR Gustavo S. Oderich	
10:08-10:15	Panel Discussion	
SESSION 58 (Grand Ballroom West, 3rd Floor) NEW OR IMPROVED DEVICES FOR THORACIC AORTIC LESION REPAIRS WITH TEVAR, AND FOR THORACOABDOMINAL ANEURYSM (TAAA) REPAIRS (ALL TALKS ARE 4 ¾-MINUTES) Moderators: Giovanni B. Torsello James F. McKinsey		
	DEVICES FOR TEVAR	
10:15-10:20	Low Profile Devices For TEVAR: Disadvantages And Advantages Based On A 10-Year Experience Giovanni B. Torsello	
10:20-10:25	Mid-Term Results With The Cook ZENITH Alpha Thoracic Endograft For TEVAR In 500 Patients In A Real World Experience Germano Melissano Roberto Chiesa	

A Modified Candy Plug Technique For False Lumen Treatment After TEVAR For TBAD

10:25-10:30

Ali Azizzadeh

10:30-10:35	Fenestrated Endovascular Aortic Repair Plus Chimney Graft For TAAA Repairs: The FEVARCh Technique Ross Milner
10:35-10:40	The Gore TAMBE Device: Lessons Learned To Facilitate Its Use For TAAA And Complex AAA Repairs Bernado C. Mendes
10:40-10:46	Panel Discussion
10:46-10:51	The Relay Pro (Terumo Aortic) Endograft For TEVAR And Its Advantages In Treating TBADs: Why Is It Better Than The Older Relay Plus Device Steven D. Abramowitz Edward Y. Woo
10:51-10:56	Patient Specific Custom Designed Relay Pro Endografts (Terumo Aortic): How Do They Work And What Are Their Advantages In Various Circumstances David M. Williams
10:56-11:01	Relay Custom-Made Endografts (Terumo Aortic) For TEVAR: Why Do They Provide Better Wall Apposition For Sealing Fadi Taher (PowerPoint Presentation With Synched Audio) Afshin Assadian
	NEW OR IMPROVED ENDO DEVICES FOR TAAA REPAIRS
11:01-11:06	The Novel Artivion (Formerly CryoLife/Jotec) Off-The-Shelf (OTS) Inner Branched Device For TAAAs: Why Is It Better Than Outer Branched OTS Devices: Are There Limitations  Lee Bouwman
11:06-11:11	Colt Concept And Its Evolution Towards The Inner Branch Endograft For Complex AAAs: Colt 2.0: How It Works And Early Outcomes Piotr Szopinski
11:11-11:17	Panel Discussion
11:17-11:22	To Treat Complex TAAAs: Combination Of Relay (Terumo) TEVAR And Fenestrated And Branched EVAR Is Best: Technical Tips And Outcomes Mo Hamady
11:22-11:27	Target Vessel Outcomes With The Cook t-Branch OTS Endograft For TAAA Repair At 2 Years From A Multicenter Registry – Which Stent-Graft Types Are Better For Which Vessels Nikolaos Tsilimparis
11:27-11:32	Experience With The Cook t-Branch OTS Endograft Device For Juxta- And Pararenal AAAs: Advantages And Limitations Matteo Orrico Nicola Mangialardi
11:32-11:37	Comparison Of 3 OTS Endografts For Urgent TAAA Repairs: TAMBE (Gore) Versus E-nside (Jotec) Versus t-Branch (Cook): Advantages And Disadvantages Of Each Luca Bertoglio Roberto Chiesa
11:37-11:42	Germano Melissano  Valiant Manifold OTS Endograft Device (Medtronic) For Repairing TAAAs: How Does It Work; Update On Clinical Experience And Future Prospects Murray L. Shames

11:42-11:47	Innovative Treatment Of Thoracoabdominal And Pararenal Aortic Aneurysms Using Treovance Endografts (Terumo) And Parallel VBX Stent-Grafts (Gore) James F. McKinsey
11:48-11:53	Is There A Role For Hyperbaric Oxygen Therapy In Preventing Or Treating Spinal Cord Ischemia After TAAA Repair Thomas F. Lindsay
11:53-12:00	Panel Discussion
12:00- 1:00	Lunch Break – Visit Exhibits And Pavilions (2nd and 3rd Floors)
SESSION 59 (Grand Ballroom West, 3rd Floor) NEW OR UPDATED INFORMATION ON MRI SAFETY WITH COVERED STENTS, A NEW EMBOLIC AGENT FOR BLEEDING, LOWER EXTREMITY PROSTHETIC GRAFTS, PERIGRAFT SEROMA AND VALUE OF A PROSTHETIC PERIGRAFT SIROLIMUS PATCH (SEE ALSO SESSION 28) Moderators: Ali F. AbuRahma Patrick J. Lamparello	
	MRI SAFETY WITH STENT-GRAFTS
1:00 — 1:05	Safety Of MRI Early After Deployment Of Various Covered Stents Maria A. Ruffino
	A NEW EMBOLIC AGENT
1:06 — 1:11	A New Liquid Embolic Agent (Lava LES) To Control Bleeding; How Does It Work And Pivotal Trial Results Mahmood Razavi
	PROSTHETIC GRAFTS
1:12 – 1:17	3-Year Results Of The ZILVERPASS RCT Comparing Prosthetic PTFE Bypasses With Zilver PTX (Cook) Stents To Treat Long Fempop Lesions: Clinical And Financial Results And Their Implications Michel J. Bosiers Marc Bosiers
1:18 — 1:23	The 3DH Spiral Flow Prosthetic Graft: Does It Prevent Neointimal Hyperplasia In Leg Bypasses Or A-V Access Hosam F. El Sayed
1:24 — 1:29	Heparin Coated (Propaten) PTFE Grafts (Gore) Versus Autologous Vein Grafts For Bypasses To Targets Above And Below The Knee: Are The Heparin Coated Grafts Better And Worth The Cost David J. Dexter
1:30 — 1:35	Perigraft Seromas After PTFE Lower Extremity And Aortic Arterial Grafts: Frequency, Etiology And What To Do About Them Jae S. Cho
1:36 — 1:41	Update On External Sirolimus Patch Wrap-Arounds For PTFE Graft Anastomoses: Do They Decrease Neointimal Hyperplasia Sriram S. Iyer
1.10 1.10	Devel Discouries

1:42 - 1:48

**Panel Discussion** 

SESSION 60 (Grand Ballroom West, 3rd Floor)
NEW OR IMPROVED ENDOVASCULAR DEVICES
FOR LOWER EXTREMITY TREATMENTS:
ATHERECTOMY, STENTS, TACKS, ACCESSORIES,

ETC. (SEE ALSO SESSIONS 23-27)

Moderators: Kenneth Ouriel Enrico Ascher

		Enrico Ascher
ATHERECTOMY RELATED TOPICS		
	1:48 — 1:53	Value And Limitations Of The Rotarex Device (From BD) For Atherectomy, Clot Removal And Treating ISR Miguel Montero
	1:54 — 1:59	Atherectomy: When Is It The Best Vessel Prep: What Are Its Complications: How To Prevent And Treat Them Theodosios Bisdas
	2:00 — 2:05	Value And Limitations Of 355 nm Auryon B-Laser <sup>™</sup> (From AngioDynamics): It Enables Safe Crossing Of Difficult Lesions Not Crossed With A Guidewire: How Does It Work And Clinical Results <i>Luis R. Leon, Jr.</i>
	2:06 — 2:11	Orbital And Laser Atherectomy: Indications, Advantages And Precautions With Above And Below Knee De Novo Lesions And ISR Craig M. Walker
	2:12 — 2:17	Value Of Atherectomy And DCBs: Interim Results Of The REALITY Trial Brian G. DeRubertis
		ANCILLARY TECHNIQUES
	2:18 - 2:23	Value Of Wingman Catheter (Reflow Medical) For Crossing Difficult Lesions: How Does It Work And Results John R. Laird
	2:24 — 2:29	Value Of New Dedicated Special Tools And Devices To Facilitate Trans-Radial Access For Lower Extremity Lesion Treatments: How Far Distally Can They Be Effective Ramon L. Varcoe
	2:30-2:36	Panel Discussion
		NEW INFORMATION ON STENTS
	2:36 — 2:41	Advantages Of Supera (Vasculomimetic – VMI) Stent For Complex Fempop Occlusive Lesions: Technical Tips: They Work Even In The Subintimal Position Erwin Blessing
	2:42 - 2:47	Value Of The Supera VMI Stent For Common Femoral Artery (CFA) Occlusive Lesions: Better Than Endarterectomy: 2-Year Results And Status Of The SUPERSURG RCT (Versus Open Surgery) Yann Gouëffic Koen Deloose
	2:48 — 2:53	Temporary Stent Assisted DCB Angioplasty In BTK Lesions: Update On The DEEPER OUS Trial <i>Thomas Zeller</i>
	2:54 — 2:59	Value And Advantages Of Eluvia DESs (Boston Scientific) For Lower Extremity Occlusive Lesions:

When To Use Them And How To Optimize Their

Results Steven Kum

3:00 — 3:05	RCT Comparing A New Bare Metal Stent – Misago Versus Zilver PTX DESs For Fempop Lesions: 2-Year Results Of The BATTLE Trial: Misago Stents Can Be Deployed Via Radial Access Yann Gouëffic
3:06 - 3:12	Panel Discussion
3:12 — 3:24	Break – Visit Exhibits And Pavilions (2nd and 3rd Floors)
NEW OR FOR LOV ANGIOP	(Grand Ballroom West, 3rd Floor) R IMPROVED ENDOVASCULAR DEVICES WER EXTREMITY TREATMENTS: LASTY BALLOONS SI John R. Laird Thomas Zeller
3:24 — 3:29	3-Year Results Of TOBA II BTK Trial Of The Tack Device To Decrease Dissections With Balloon Angioplasty Of BTK Lesions Show Safety And 80% Patency Patrick J. Geraghty
3:30 — 3:35	Value Of High-Pressure Non-Compliant Balloons For BTK Arterial Lesion Treatment: Why They Work Better And Other Technical Tips Steven Kum
3:36 — 3:41	Update On The TANGO Trial Using The Bullfrog Balloon Device (Mercator Medical Systems) To Inject Sirolimus Drug Into Lesion Wall Before Angioplasty: How Does It Work And Updated Results William A. Gray
3:42 — 3:47	Value Of The Passeo-18Lux DCB For Treating BTK Lesions With Or Without Bare Metal Stents Gunnar Tepe
3:48 — 3:53	Unfavorable Balloon (Candy) Wrap Can Cause Dissections With Angioplasty: What Is The Mechanism: How Can It Be Recognized And Dissection Avoided Jos C. van den Berg (PowerPoint Presentation With Synched Audio)
3:54 — 3:59	The Importance Of Dissection In Angioplasty Treatment Of BTK Lesions: How To Prevent And Treat Such Dissections: The Value Of Tacks (From Intact Vascular): How Do They Work Andrew Holden
4:00 — 4:05	Chocolate Touch DCBs (From TriReme Medical): How Do They Work, Advantages And Updated Clinical Results Andrew Holden
4:06 - 4:12	Panel Discussion
NEW OR TO PREV MIGRATI	2 (Grand Ballroom West, 3rd Floor) R IMPROVED DEVICES AND TECHNIQUES ENT OR TREAT ENDOLEAKS OR DEVICE ON: ENDOANCHORS, ETC. S: William D. Jordan, Jr. Jean-Paul de Vries
4:12 — 4:17	Everything I Learned In Training Was Wrong: Endoanchors Work For Short Necks  Mathew D. Wooster

Mathew D. Wooster

	4:18 – 4:23	New Developments From The ANCHOR Registry With Over 5 Years Of Follow-Up Show The Value Of Endoanchors When Used Prophylactically For Certain Indications Prevent Endoleaks And Migration: Large Diameter Necks Are One Of Those Indications William D. Jordan, Jr.
	4:24 – 4:29	New Developments From The ANCHOR Registry With >5 Years Follow-Up Show That Endoanchors Can Be Used To Treat Endoleaks And Migration Effectively In Hostile Neck Anatomy: The Proof <i>Jean-Paul de Vries</i>
	4:30 — 4:35	Vesteck – The Next Generation Of Endoanchor (Endosuturing) Technology: How Does It Work And Where Does It Stand David H. Deaton
	4:36 — 4:41	Balloon Optimized Molding For Better Deployment And Sealing Of Ovation Alto Low Profile Endografts For EVAR: How To Do It And How It Helps Prevent Endoleaks And Migration David J. Minion
	4:42 — 4:48	Panel Discussion
SESSION 63 (Grand Ballroom West, 3rd Floor) NEW OR IMPROVED ENDOVASCULAR DEVICES FOR CLOT REMOVAL OR EMBOLIZATION (SEE ALSO SESSION 30) Moderators: Neal S. Cayne James F. Benenati Andrew Holden		
		CLOT REMOVING DEVICES
	4:48 — 4:53	Percutaneous Embolectomy Or Thrombectomy With The Indigo System (From Penumbra): What Makes It Different, Technical Tips, Results And Limitations David J. Dexter
	4:48 - 4:53 4:54 - 4:59	The Indigo System (From Penumbra): What Makes It Different, Technical Tips, Results And Limitations
		The Indigo System (From Penumbra): What Makes It Different, Technical Tips, Results And Limitations David J. Dexter  Newer Pharmaco-Mechanical Endovascular Clot Removal Systems: When And Why Is Each Device Best To Use
	4:54 — 4:59	The Indigo System (From Penumbra): What Makes It Different, Technical Tips, Results And Limitations David J. Dexter  Newer Pharmaco-Mechanical Endovascular Clot Removal Systems: When And Why Is Each Device Best To Use Guillermo A. Escobar  Catheter Based Vacuum Assisted Thrombectomy For Acute Limb Ischemia: How Does It Work: Advantages And Limitations: From A Multicenter Study: Key Findings From The INDIAN Trial Carlo Setacci
	4:54 — 4:59	The Indigo System (From Penumbra): What Makes It Different, Technical Tips, Results And Limitations David J. Dexter  Newer Pharmaco-Mechanical Endovascular Clot Removal Systems: When And Why Is Each Device Best To Use Guillermo A. Escobar  Catheter Based Vacuum Assisted Thrombectomy For Acute Limb Ischemia: How Does It Work: Advantages And Limitations: From A Multicenter Study: Key Findings From The INDIAN Trial Carlo Setacci Gianmarco de Donato
	4:54 - 4:59 5:00 - 5:05	The Indigo System (From Penumbra): What Makes It Different, Technical Tips, Results And Limitations David J. Dexter  Newer Pharmaco-Mechanical Endovascular Clot Removal Systems: When And Why Is Each Device Best To Use Guillermo A. Escobar  Catheter Based Vacuum Assisted Thrombectomy For Acute Limb Ischemia: How Does It Work: Advantages And Limitations: From A Multicenter Study: Key Findings From The INDIAN Trial Carlo Setacci Gianmarco de Donato  VASCULAR OCCLUSIVE DEVICES  Technical Tips For Effective Coil Embolization: Importance Of Dense Packing; Why Non-Fibered Coils Are Better Than Fibered Coils James F. Benenati

5:24 — 5:29	How To Treat Type 1A Endoleaks And Enlarging TBAD False Lumens With Ruby Coils: When Will They Work; When Will They Not: Technical Tips Mazin Foteh
5:30 — 5:35	How To Insert Large Vessel Embolization Devices (PODs) Through Low Profile Access Frank R. Arko
5:36 — 5:41	Newer Vascular Occlusion Devices: Caterpillar And Azur Devices: Advantages And Limitations Karthik Kasirajan
5:42 — 5:52	Panel Discussion
	End of Program H
SUPERFIC Trianon Ba	II (SESSIONS 64-71) CIAL VENOUS DISEASE Ilroom, 3rd Floor ders: Jose I. Almeida
VENOUS	F (Trianon Ballroom, 3rd Floor) 5 CLINICAL EXAMINATION AND YNAMICS
	: Jose I. Almeida Lowell S. Kabnick Thomas W. Wakefield Steve Elias
7:00 — 7:04	Introduction To Veins At VEITH Jose I. Almeida
7:05 — 7:10	AVF CEAP Revision And Workbook  Marc A. Passman
7:11 — 7:16	CEAP, VCSS, HASTI: Their Significance And How To Utilize Lowell S. Kabnick
7:17 — 7:22	Physiology Of Venous Return Brajesh K. Lal
7:23 — 7:28	Causation Of Symptoms In C0 Patients: Implications For Therapy Marc A. Passman
7:29 — 7:34	Evaluation Of Venous Reflux: Going Beyond The Reflux Duration Nicos Labropoulos
7:35 — 7:40	Hemodynamics Of Reflux Jose I. Almeida
7:41 — 7:46	An Algorithm To Predict Disease Severity In C2 Patients Mikel Sadek
7:47 — 7:52	Pathophysiology Of Varicose Veins: Evidence Summary Thomas W. Wakefield
7:53 — 7:58	The Importance Of Glycocalyx: Veins And Lymphatics Joseph D. Raffetto
7:59 — 8:04	Saphenous And Sural Nerve Anatomy Jean Luc Gerard
8:05 — 8:10	Genetics In Varicose Vein Disease Sarah Onida

8:11 — 8:16	Quality Of Life Tools Reflect Disease Severity, But They Can Be Improved <i>Alun H. Davies</i>
8:17 — 8:22	Panel Discussion
VENOUS	5 (Trianon Ballroom, 3rd Floor) 5 AND LYMPHATIC, IMAGING, AND
BIOLOG' Moderators	४ s: Antonios P. Gasparis Joseph D. Raffetto
8:23 — 8:28	Identifying Reflux Pathways With Duplex Ultrasound Mapping Neil M. Khilnani
8:29 — 8:34	How Common Are And Why Care About Ancillary Findings During Lower Extremity Venous Duplex Imaging Michael C. Dalsing
8:35 — 8:40	Duplex Imaging: Is It Helpful For Reticular Or Telangiectatic Veins Pauline Raymond-Martimbeau
8:41 — 8:46	Ambulatory Venous Pressure, Air Plethysmography, And The Role Of Calf Venous Pump In Chronic Venous Disease Taimur Saleem Seshadri Raju
8:47 — 8:52	Role Of Foot Static Disorders In Chronic Venous Disease Nicos Labropoulos
8:53 — 8:58	Inflammation And CVD Joseph D. Raffetto
8:59 — 9:04	Does Deep Venous Reflux Matter With Superficial Ablation Mikel Sadek
9:05 — 9:10	Genetics Involving Venous Leg Ulcers Joseph D. Raffetto
9:11 — 9:16	Pharmacologic And Cell Based Therapies For Lymphedema Monika Gloviczki
9:17 — 9:22	Superficial Venous Disease Versus Outflow Obstruction: Treat Which First And Why Antonios P. Gasparis
9:23 — 9:28	Panel Discussion
	6 (Trianon Ballroom, 3rd Floor) CIAL VEIN TREATMENT STRATEGIES AND
TECHNIC Moderators	QUES s: Glenn Jacobowitz Alun H. Davies
9:29 — 9:34	Results Of The Recent Randomized Controlled Superficial Venous Device Trials And Their Importance Alun H. Davies
9:35 — 9:40	"Choosing Wisely" Items For Chemical Or Thermal Ablation In The Treatment Of The Incompetent Saphenous Veins And Recurrence Claudine M. Hamel-Desnos
9:41 — 9:46	Rethinking Endovenous Techniques To Define Cost- Effectiveness Armando Mansilha
9:47 — 9:52	Saphenous Sparing: Instructions For Users Erika Mendoza

9:53 — 9:58	Thermal Saphenous Vein Recanalization: Risk Factors Omar L. Esponda
9:59 —10:04	What Drugs Do I Recommend For Symptomatic Venous Disease Jorge H. Ulloa
10:05-10:10	Ablative Procedures And Cost Effectiveness Alun H. Davies
10:11-10:16	Chronic Venous Disease And Diabetic Microangiopathy: Pathophysiology And Commonalities Armando Mansilha
10:17-10:22	Anterior Accessory Saphenous Vein Ablation: Our Experience And Should We Continue <i>John F. Charitable</i>
10:23-10:28	Saphenous Ablation On Anticoagulation; Is It Safe, Effective And Durable Glenn Jacobowitz
10:29-10:34	Panel Discussion
TRUNCA	7 (Trianon Ballroom, 3rd Floor) AL ABLATION OF THE SAPHENOUS S SYSTEM
	s: Edward G. Mackay
	Cees H.A. Wittens
	THERMAL AND NON-THERMAL TRUNCAL VEIN ABLATION I
10:35-10:40	Decision Making In Saphenous Ablation: What To Use
	When Ellen D. Dillavou
10:41-10:46	HIFU: Is It Ready For Prime Time Mark S. Whiteley
10:47-10:52	Which Variables In Superficial Venous Interventions Will Improve QOL?  Cees H. A. Wittens
10:53-10:58	Tips, Tricks And Limitations: Perforator Ablation Steve Elias
10:59-11:04	Tips, Tricks And Limitations: Varithena Edward G. Mackay
11:05-11:10	Tips, Tricks, And Limitations: Ultrasound Guided Foam Sclerotherapy Jean Luc Gerard
11:11-11:16	Panel Discussion
	THERMAL AND NON-THERMAL ABLATION II
Moderators	s: Lowell S. Kabnick Alan M. Dietzek
11:17-11:22	Tips, Tricks, And Limitations: Liquid Sclerotherapy <i>Victor M. Canata</i>
11:23-11:28	Tips, Tricks And Limitations: ClariVein Steve Elias
11:29-11:34	Tips, Tricks And Limitations: Laser Truncal Ablation <i>Lowell S. Kabnick</i>
11:35-11:40	Tips, Tricks And Limitations: Radiofrequency Ablation Alan M. Dietzek
11:41-11:46	Tips, Tricks And Limitations: Phlebectomy Gutenburg A. Gurgel
11:47-11:52	Tips, Tricks And Limitations: Venaseal Alun H. Davies

11:53-11:58	Superficial Devices In Clinical Trials (Before Governmental Approval) Lowell S. Kabnick	
11:59-12:04	Safety And Efficacy Of Endovenous Ablations In Octogenarians, Nonagenarians, And Centenarians Anil P. Hingorani Enrico Ascher	
12:05-12:10	SVT Management: Anything New In 2022 Manj S. Gohel	
12:11-12:16	Panel Discussion	
12:17-12:45	Lunch Break – Visit Exhibits And Pavilions (2nd and 3rd Floors)	
SESSION 68 (Trianon Ballroom, 3rd Floor) SPIDER VEINS, TRUNCAL VEINS, TRIBUTARY VEINS, PELVIC VEIN TREATMENT Moderators: Kathleen D. Gibson Aleksandra Jaworucka-Kaczorowska		
12:45-12:50	Foam Therapies (PCF Versus PEM): When To Use And Does It Make A Difference <i>Edward G. Mackay</i>	
12:51-12:56	Risks And Contraindications Of Medical Compression Treatment - A Critical Reappraisal - An International Consensus Statement Mark H. Meissner	
12:57- 1:02	Randomized Controlled Study Of EVLA And Foam In The SSV-Fovelass Study: 3-Year Results Claudine M. Hamel-Desnos	
1:03 — 1:08	CLACS In Paraguay Results Of The Aesthetic Phlebology Trial Victor M. Canata	
1:09 — 1:14	Which Saphenous Vein Recanalization Should Be Treated Kathleen D. Gibson	
1:15 — 1:20	Pelvic Origin Labial And Leg Varices: Choices And How I Do It Aleksandra Jaworucka-Kaczorowska	
1:21 — 1:26	Is Combination Therapy Laser And Sclerotherapy More Efficacious For Telangiectatic Treatment Gutenberg A. Gurgel	
1:27 — 1:32	How To Treat Pelvic Veins: Top Down Or Bottom Up <i>Aleksandra Jaworucka-Kaczorowska</i>	
1:33 — 1:38	Panel Discussion	
SESSION 69 (Trianon Ballroom, 3rd Floor) VENOUS SOCIETAL AND GOVERNANCE Moderators: Kathleen J. Ozsvath Mark D. Iafratii		
1:39 — 1:44	What Happened With 2022 CMS Reimbursement And The Future <i>John Blebea</i>	
1:45 — 1:50	Economic Venous Reimbursement Impact: Now And Through 2025 John Blebea	
1:51 — 1:56	The Future Of Venous Reimbursement: Non CMS Insurance Mark D. Iafrati	
1:57 — 2:02	What Evidence Is There For Compression Prior To Insurance Approval Omar L. Esponda	

2:03 — 2:08	Who Should Fund The Management Of C2 Disease And Why Sarah Onida
2:09 — 2:14	The Irony Of Overtreatment And Undertreatment In Venous Disease: What Can Be Done Manj S. Gohel
2:15 — 2:20	Tackling The "Grey Areas" Of Appropriate Use For Chronic Venous Disease <i>Elna M. Masuda</i>
2:21 — 2:26	AVF Venous Patient Outreach Survey Lowell S. Kabnick
2:27 — 2:32	Insurance Coverage Gaps In Venous Disease Kathleen J. Ozsvath
2:33 — 2:38	Focused Practice Designation – Venous Disease Treatment Brajesh K. Lal
2:39 — 2:44	Prior Authorization As A Utilization Management Tool For Elective Superficial Venous Procedures Is Worthless Todd Berland
2:45 — 2:50	Panel Discussion
SESSION 70 (Trianon Ballroom, 3rd Floor) MORE SUPERFICIAL VEIN TREATMENT STRATEGIES AND TECHNIQUES Moderators: Raghu Kolluri Anil P. Hingorani	
2:51 — 2:56	EHIT Recommendations
	Lowell S. Kabnick
2:57 — 3:02	Physician Compounded Foam Sclerotherapy: To Use Or Not And When Pauline Raymond-Martimbeau
3:03 — 3:08	C2 Intervention: Evidence Summary Peter Gloviczki
3:09 — 3:14	Technical Aspects Of Sclerotherapy For Telangiectasia Pauline Raymond-Martimbeau
3:15 — 3:20	Unrecognized Consequences Of Superficial Venous Disease Alun H. Davies
3:21 — 3:26	Varithena® VLU Registry: The Effects Of Polidocanol Endovenous Microfoam On Wound Healing And Recurrence Raghu Kolluri
3:27 — 3:32	Phlebectomy And Foam Sclerotherapy For Varicose Veins: Which Is Better And When Felipe Coelho Neto
3:33 — 3:38	EHIT Analysis – 10,000 Cases Anil P. Hingorani Enrico Ascher
3:39 — 3:44	Ambulatory Phlebectomy: A Useful And Beneficial Procedure (AVKS Registry – 2,800 Procedures) John Blebea
3:45 — 3:50	Treatment of Leg Veins For Restless Leg Syndrome: Does It Work Omar L. Esponda
3:50 — 3:55	Panel Discussion

VENOUS TREATM	(Trianon Ballroom, 3rd Floor) 5 CLINICAL TRIALS, LYMPHATIC, VEIN ENT STRATEGIES 5: Manj S. Gohel Nicholas H. Osborne
3:56 — 4:01	Update: SVS And AVF Varicose Vein Guidelines Peter Gloviczki
4:02 — 4:07	Ablation Of Incompetent Perforators In Patients With Chronic Insufficiency: Is It Worthwhile And What Is The Evidence  Ellen D. Dillavou
4:08 — 4:13	Venaseal Spectrum Study: RCT Study Overview Manj S. Gohel
4:14 — 4:19	Update: Turkish Cyanoacrylate Lowell S. Kabnick
4:20 — 4:25	Treating Low And Moderate Severity Venous Disease Is Beneficial – Data From The VQI VVR Nicholas H. Osborne
4:26 — 4:31	Global Epidemiology Of Chronic Venous Disease: A Systematic Review With Pooled Prevalence Analysis Sarah Onida
4:32 - 4:37	What Are The Differences Between The SVS/AVF Venous Guidelines And The European Society for Vascular Surgery Anil P. Hingorani
4:38 - 4:43	
	LIPEDEMA, LYMPHEDEMA, PHLEBOLYMPHEDEMA
Moderators	s: Thomas F. O'Donnell, Jr. Mark D. Iafrati
4:44 — 4:49	Diagnosis Of Lipedema And Treatment Steven Dean
4:50 — 4:55	Overview Of Lymphatic Anatomy, Physiology And Imaging Techniques Thomas F. O'Donnell, Jr.
4:56 — 5:01	The American Venous Forum, American Vein And Lymphatic Society And The Society for Vascular Medicine Expert Opinion Consensus On Lymphedema Diagnosis And Treatment Mark D. Iafrati
5:02 — 5:07	Lymphedema And Compression: Evidence Felipe Coelho-Neto
5:08 — 5:13	Recurrence Of Varicose Veins After Endovenous Ablation Mark D. Iafrati
5:14 — 5:19	Management Of Phlebolymphedema – A Dual Problem Steven Dean
5:20 — 5:25	Long-Term Treatment Of Lymphedema: Compression With Manual Lymphatic Drainage Or Intermittent Apparative Compression: A Randomized Cross Over Study B. Erika Mendoza
5:26 - 5:31	Panel Discussion
	EXAMINING THE EVIDENCE

Moderators: Jean Luc Gerard Gloria Salazar

5:32 — 5:37	What Data Can We Use From VQI VVR To Advocate For Coverage Of Venous Procedures Nicholas H. Osborne	
5:38 - 5:43	When Evaluating Superficial Disease When Do You Look For Deep Venous Obstruction Gloria Salazar	
5:44 — 5:49	Ablative Risks Prior And After Flying: What Do You Tell Your Patients Sarah Onida	
5:50 — 5:55	When To Use Dry Foam, Regular Foam, And Wet Foam: What Are The Differences Alvaro Orrego	
5:56 — 6:01	Bone Perforator: What Is The Significance  Jean Luc Gerard	
6:02 — 6:07	Update: Outcomes After Truncal Ablation With Or Without Phlebectomy - C2 (VQI Registry) Andrea T. Obi	
6:08 — 6:13	Are All Laser And RFA Devices Equivalent: Review Of The Literature Alvaro Orrego	
6:14 — 6:19		
6:20 — 6:25	Panel Discussion End of Program I	
MULTIDISCIPLINARY ACUTE STROKE MANAGEMENT Murray Hill Suites, 2nd Floor Course Leader: Allan L. Brook  SESSION 72 (Murray Hill Suites, 2nd Floor) EMERGING TRENDS IN ISCHEMIC STROKE TREATMENT Moderators: Allan L. Brook		
8:00 — 8:10	Joshua A. Hirsch Introduction	
8:11 — 8:18	Allan L. Brook  Access Issues: Radial Artery And Arch Nuances: When To Go Groin Sudhakar R. Satti	
8:19 — 8:26	Neurology: Latest Trials And Discoveries  Michael D. Hill	
8:27 — 8:34	Unique Anatomy That Influences Stroke Care Peter K. Nelson	
8:35 — 8:42	Techniques To Deal With Tandem Lesions And When Is Stenting Appropriate  Mario Muto	
8:43 — 8:50	Why Anesthesia Participation Is Important In Stroke <i>James Milburn</i>	
8:51 — 8:58	Stroke Access Is One Thing, But Closure Is Another Problem: My Solution Ajay K. Wakhloo	
8:59 — 9:06	Healthcare Systems And Stroke Reimbursement: Is It Worth It <i>Joshua A. Hirsch</i>	

9:07 — 9:14	Acute Stroke Imaging: Factors Leading To Brain Hemorrhage Richard L. Zampolin	
	3 (Murray Hill Suites, 2nd Floor) NG TRENDS IN HEMORRHAGIC STROKE ENT	
Moderators	s: David Gordon Joshua A. Hirsch	
9:15 — 9:20	Update On MMA Embolization Trials  David Fiorella	
9:21 — 9:26	Subdural Hemorrhage: MMA Embolization Is A New Standard Of Care, Or An Unproven Trend: Show Me The Data  Adam S. Arthur	
9:27 — 9:34	How To Minimize Intracranial Hemorrhage During And After Thrombectomy Fawaz Al-Mufti	
SESSION 74 (Murray Hill Suites, 2nd Floor) LATEST TRENDS IN NEUROINTERVENTIONAL		
SURGER'	Y s: Peter K. Nelson Allan L. Brook	
9:35 — 9:42	Direct To Angio And Other Stroke Triage And Trials  J Mocco	
9:43 — 9:48	<b>DEBATE</b> : Subarachnoid Hemorrhage: Wide Necked Aneurysms Should Go To Open Surgery Howard A. Riina	
9:49 — 9:54	<b>DEBATE</b> : Subarachnoid Hemorrhage: Wide Neck Aneurysms Can Be Treated Endovascularly David J. Altschul	
9:55 —10:02	Recent Endovascular Devices And Those In The Pipeline: Clinical Difference Or A Disruptive Force Aquilla S. Turk	
10:03-10:10	Head And Neck Cancer And Hemorrhage: Role Of Endovascular Care Guilherme Dabus	
10:11-10:18	The Posterior Circulation Is Different And Why It Matters Seon-Kyu Lee	
10:19-10:26	Basilar Artery Thrombectomy: Latest Trials And Trends Joshua A. Hirsch	
10:27-10:34	Stroke Imaging Triage: Pearls And Nuances Of Daily Practice R. Gilberto Gonzalez	
10:35-10:42	When Patients Live Far From A Stroke Center: Options For Advanced Care Christopher Kellner Reade A. De Leacy	
10:43-10:50	Understanding And Optimizing Imaging In Acute Stroke Patients Lawrence N. Tanenbaum	
10:51-10:58	Management Of Complications Breehan Chancellor	
10:59-11:07	Dural Sinus Stenosis: Is There A Standard Of Care Athos Patsalides	

11:08-11:15 Artificial Intelligence And Telemedicine: How It Is Changing And Influencing Our Daily Practice Allan L. Brook
 11:16-11:23 Intraarterial Chemotherapy: What Needs To Improve

And Future Areas Of Growth

Pascal Jabbour (PowerPoint Presentation With Synched Audio)

SESSION 75 (Murray Hill Suites, 2nd Floor)
CAROTID ARTERY LATEST TRENDS

Moderators: Neil Haranhalli Don Heck

11:24-11:31 Carotid Artery Disease: New Trials And Best Literature 2022

James F. Meschia

11:32-11:39 TCAR Is Better Than True Percutaneous Carotid

Stenting: Myth Or Reality Peter A. Schneider

11:40-11:47 New Micromesh CAS Improves Outcomes And

Overrides Benefit Of TCAR

Don Heck

11:48-11:55 Judging The New Techniques, Devices, And Medical

Treatment For Treating Carotid Stenosis

Thomas G. Brott

11:56-12:03 Neurovascular Robotic Infiltration: What Is Real And

What Is Missing Vitor Mendes Pereira

12:03-12:15 Discussion

12:15 Stroke Program Adjourns

12:15 – 1:00 Lunch Break – Visit Exhibits And Pavilions (2nd and

3rd Floors)

End of Program J

### FRIDAY, NOVEMBER 18, 2022

6:00 A.M. General Registration - Rhinelander Gallery, 2nd Floor 6:00 A.M. Faculty Registration - Gramercy Suite West, 2nd Floor 6:15 A.M. Continental Breakfast - Rhinelander Gallery, 2nd Floor

#### **CONCURRENT FRIDAY PROGRAMS**

PROGRAM K: (SESSIONS 76-83)

Progress In The Prevention And Treatment Of Spinal Cord Ischemia (SCI) With TAAAs And Complex Aortic Aneurysm Repairs; New Developments In Carotid Artery Disease And Its Treatment: Mesh Covered Stents And TCAR, Cognitive Changes, Timing Of Treatment, Medical Treatment, Update On Carotid Trials, Treatment Of Asymptomatic Carotid Stenosis (ACS), String Sign, Carotid Clot, Significance Of MRI Lesions, Carotid Controversies And More Carotid Topics; Other New Endovascular Treatment Concepts, Techniques; Update On Percutaneous Access Closure Devices And Wound Care

6:40 A.M. - 6:02 P.M.

Grand Ballroom East, 3rd Floor

PROGRAM L: (SESSIONS 84-91)

New Developments In The Treatment Of Popliteal Disease: Aneurysms, Entrapment And Occlusive Lesions; Advances In Treating Arterial And Graft Infections; Advances In Vascular Imaging And Guidance; Augmented Reality And Artificial Intelligence; Recorded Live Complex Endovascular Cases From Münster, Germany; New Developments In Thoracic Outlet Syndrome Management; Advances In Medical, Drug, Anticoagulant And Rare Vascular Disease Treatment; And Advances In The Treatment Of Vascular Trauma

7:00 A.M. - 5:42 P.M.

Grand Ballroom West, 3rd Floor

PROGRAM M: (SESSIONS 92-101)

**DEEP VENOUS DISEASE** 6:30 A.M. - 4:57 P.M.

Trianon Ballroom, 3rd Floor

Course Leaders: Jose I. Almeida Lowell S. Kabnick

Peter Gloviczki Thomas W. Wakefield

Steve Elias

PROGRAM K (SESSIONS 76-83)

PROGRESS IN THE PREVENTION AND TREATMENT OF SPINAL CORD ISCHEMIA (SCI) WITH TAAAS AND COMPLEX AORTIC ANEURYSM REPAIRS; NEW DEVELOPMENTS IN CAROTID ARTERY DISEASE AND ITS TREATMENT: MESH COVERED STENTS AND TCAR, COGNITIVE CHANGES, TIMING OF TREATMENT, MEDICAL TREATMENT, UPDATE ON CAROTID TRIALS, TREATMENT OF ASYMPTOMATIC CAROTID STENOSIS (ACS), STRING SIGN, CAROTID CLOT, SIGNIFICANCE OF MRI LESIONS, CAROTID CONTROVERSIES AND MORE CAROTID TOPICS; OTHER NEW ENDOVASCULAR TREATMENT CONCEPTS, TECHNIQUES; UPDATE ON PERCUTANEOUS ACCESS CLOSURE DEVICES AND WOUND CARE

Grand Ballroom East, 3rd Floor

SESSION 76 (Grand Ballroom East, 3rd Floor)

PROGRESS IN THE PREVENTION AND TREATMENT OF SPINAL CORD ISCHEMIA (SCI) ASSOCIATED WITH THE TREATMENT OF THORACIC, THORACOABDOMINAL AND COMPLEX

ABDOMINAL ANEURYSMS Moderators: Richard P. Cambria

Germano Melissano Christian D. Etz

6:40 – 6:45 Progress In Complex Aneurysm Repair And Preventing Associated SCI: How To Apply Lessons Learned

About Risk Factors And Experience With Advanced

Technology Patrick W. Kelly

6:46 – 6:51 Strategies To Minimize Paraplegia After TAAA Repairs:

Prediction And Prognostic Evaluation Of Spinal Cord

Ischemia After TAAA Repair

Bijan Modarai Adam Beck

6:52 — 6:57	New Developments In Preventing SCI With Endo And Open TAAA Repairs And Complex TEVARs
	Germano Melissano Roberto Chiesa
6:58 — 7:03	Update On The Value Of Motor Evoked Potentials To Decrease SCI With TAAA Repairs: What Is The Difference Between Peripheral And Central SCI Geert Willem H. Schurink Barend M.E. Mees Michael J. Jacobs
7:04 — 7:09	<b>DEBATE</b> : Cerebrospinal Fluid (CSF) Drainage To Decrease SCI With TAAA Repair Is Not A Benign Procedure: Why: When Not And When To Use It <i>Gustavo S. Oderich</i>
7:10 — 7:15	<b>DEBATE</b> : Cerebrospinal Fluid Drains Need Not Be Associated With High Rates Of Complications: How To Prevent Them And The Case For Prophylactic Placement Salvatore T. Scali
7:16 — 7:21	Prevention Of Spinal Cord Ischemia In TAAA Repair: Lessons Learned And Results Achieved In The US Aortic Research Consortium Mark A. Farber Adam Beck
7:22 — 7:27	Near Infrared Spectrometry (NIRS) Monitoring Is Helpful In Decreasing SCI And Avoiding Spinal Drainage With TAAA Repairs Carlos H. Timaran
7:28 — 7:33	The Intraspinal Collateral Arterial Network And Its Importance In Preventing SCI And Paraplegia With Complex Aortic Repairs  Martin Czerny (PowerPoint Presentation With Synched Audio)
7:34 — 7:39	Current Strategies To Minimize SCI With TAAA Repairs, Endo And Open: Updated Status Of Intercostal Embolization As Preconditioning To Prevent Ischemia (MIS2ACE): Status Of PAPA-ARTIS RCT Christian D. Etz
7:40 — 7:45	Updated Clinical Experience With Intercostal Coil Embolization (MIS2ACE) To Prevent SCI With Endovascular TAAA Repair Daniela Branzan Andrej Schmidt Christian D. Etz
7:46 - 7:53	Panel Discussion
SESSION 77 (Grand Ballroom East, 3rd Floor) NEW DEVELOPMENTS IN THE TREATMENT OF CAROTID STENOSIS WITH MESH COVERED	

#### MESH COVERED STENTS

7:53 – 7:58

Long-Term Results Of Micromesh Stents Show Their Value In Carotid Artery Stenting (CAS): Are There Limitations: Do The Differences In The 3 Micromesh Stents Matter

Piotr Musialek

Max Amor

STENTS AND TCAR (TRANSCERVICAL CAROTID

ARTERY REVASCULARIZATION)

Sumaira Macdonald

Moderators: Frank J. Veith Klaus D. Mathias

7:59 — 8:04	Update On Carotid And Other Uses Of MicroNet-Covered Stents (C-Guard) In High-Risk Lesions And Aneurysms: What Are The Long-Term Outcomes – And Are There Downsides  Piotr Musialek Stefan Müller-Hülsbeck
8:05 — 8:10	New Multicenter Data Showing The Long-Term Value Of The C-Guard MicroNet Mesh Covered Stent For CAS In High Risk Carotid Lesions (Thrombotic, Calcified And Symptomatic) From The FLOW-GUARD And Other Trials D. Christopher Metzger Piotr Musialek
8:11 — 8:16	Results From A Multicenter Italian Study Of The C-Guard Micromesh Stent For CAS: Advantages And Complications Francesco Speziale Gianmarco de Donato Wassim Mansour Pasqualino Sirignano Carlo Setacci
	TCAR RELATED TOPICS
8:17 — 8:22	TCAR Versus Transfemoral CAS (TFCAS) And CEA (Carotid Endarterectomy): From Propensity Matched VQI Studies: What Do They Show Re Stroke, Death And Complication Rates: TCAR Approval Should Be Expanded To Non-High-Risk Patients  Marc L. Schermerhorn  Mahmoud B. Malas
8:23 — 8:28	Real World Single Center (100-Patient Experience) With TCAR: How And Why 30-Day And One Year Outcomes Differ From Those In ROADSTER 1 And ROADSTER 2 Zach AbuRahma Ali F. AbuRahma
8:29 — 8:34	<b>DEBATE:</b> TCAR Is Better Than TFCAS And Brachial/ Radial Access For CAS: TCAR Approval Should Be Expanded To Non-High-Risk Patients Mahmoud B. Malas Marc L. Schermerhorn
8:35 — 8:40	<b>DEBATE:</b> Not So: TCAR Is No Better And Is More Costly Than TFCAS And Brachial/Radial Access CAS If One Has Appropriate Skills D. Christopher Metzger William A. Gray
8:41 — 8:46	Adjunctive EEG Can Help With TCAR And Decrease The Stroke Rate: When And How <i>Todd R. Vogel</i>
8:47 — 8:52	<b>DEBATE:</b> Based On Data To Date Including 1-Year Results From ROADSTER 2, TCAR Should Replace CEA In Most Cases: When Is TCAR Contraindicated <i>Vikram S. Kashyap</i>
8:53 — 8:58	<b>DEBATE:</b> Not So: CEA Is Routinely Better Than TCAR And Remains The Gold Standard: It Should Be Used In Most Cases Requiring Invasive Treatment <i>Michel S. Makaroun</i>
8:59 — 9:07	Panel Discussion
9:07 — 9:17	Break – Visit Exhibits And Pavilions (2nd and 3rd Floors)

SESSION 78 (Grand Ballroom East, 3rd Floor) MORE CAROTID HOT TOPICS RELATED TO TCAR, MINI-INCISION CEA, SIGNIFICANCE OF DW MRI DEFECTS AND COGNITIVE FUNCTION Moderators: Thomas G. Brott Ross Naylor Michael B. Silva, Jr		
9:17 — 9:22	TCAR Is Safe In Recently Symptomatic Patients And Those With Contralateral Carotid Occlusions: Why It Should Be The Procedure Of Choice In Those Conditions Peter A. Schneider	
9:23 — 9:28	Pre-Dilatation And Post Dilatation Strategies For TCAR: Do They Differ From TFCAS Vikram S. Kashyap	
9:29 — 9:34	TCAR Has A Steeper Learning Curve Than Commonly Thought: Some Precautions To Prevent Adverse Events Michael B. Silva, Jr. Charles Thang	
9:35 — 9:40	Image Analysis Using AI Can Improve Prediction Of Stroke Risk In Carotid Disease: How Does It Work And How Reliable Is It Ravi K. Veeraswamy	
	CAROTID STENOSIS AND COGNITIVE FUNCTION	
9:41 — 9:46	Asymptomatic Carotid Stenosis (ACS) Is Associated With Cognitive Impairment In CREST 2: Is There Evidence That Invasive Intervention Will Stop Or Improve It: Will CREST 2 Provide Answers Wesley S. Moore (PowerPoint Presentation With Synched Audio) Brajesh K. Lal Thomas G. Brott	
9:47 — 9:52	<b>DEBATE:</b> Carotid Intervention Improves Cognitive Function Of Patients With Severe Carotid Atherosclerosis: Should More ACS Patients Undergo Invasive Treatment Wei Zhou	
9:53 — 9:58	<b>DEBATE</b> : Not So Fast: There Is Still Great Doubt That Eliminating ACS Improves Cognitive Function: It Should Not Be A Reason For Treating More ACS Patients  *Ross Naylor*	
	SIGNIFICANCE OF SMALL DW MRI DEFECTS AFTER CEA/CAS	
9:59 -10:04	<b>DEBATE</b> : Silent DW MRI Brain Lesions (Small Infarcts) After CEA/CAS Don't Matter <i>James F. Meschia</i>	
10:05-10:10	<b>DEBATE</b> : Not So: How Size And Number Of Silent Brain Infarcts (DW MRI Defects) After CEA/CAS Affect Cognitive Changes: They Really Do Matter Wei Zhou	
10:11-10:16	Highlights of the 2022 SVS US Guidelines For the Management Of Carotid Disease <i>Ali F. AbuRahma</i>	
10:17-10:22	Highlights Of The 2023 European Guidelines For The Management Of Carotid Disease And How They Differ From The US Guidelines Ross Naylor	
10:23-10:30	Panel Discussion	

SESSION 79 (Grand Ballroom East, 3rd Floor) MORE CAROTID NEW DEVELOPMENT TOPICS RELATED TO TCAR, NEW DEVICES, MESH COVERED STENTS, MINI-INCISION CEA, TIMING OF TREATMENT, MEDICAL TREATMENT AND DEALING WITH DISTAL (HIGH) CAROTID LESIONS Moderators: Richard J. Powell Wei Zhou Frank J. Veith 10:30-10:35 Comparative Cost Effectiveness Of TCAR, CEA, TFCAS: CEA Is More Cost Effective Than TCAR And TCAR Is More Cost Effective Than TFCAS Mohammad H. Eslami 10:36-10:41 Is TCAR Yet Ready To Replace CEA: Not So Fast: We Still Need Further Proof And More Studies Including An RCT Bruce A. Perler Value Of Lithotripsy (Shockwave) For CAS In Heavily 10:42-10:47 Calcified Lesions: How To Do It Safely And Technical Tips: Limitations And Precautions: A Quick Word About The Value Of Lithotripsy In All Vascular Beds Karthik Kasirajan Max Amor Value Of Mesh Covered Stents With TCAR: Is It The 10:48-10:53 Best Of All Worlds: Limitations Ralf R. Kolvenbach (PowerPoint Presentation With Synched Audio) 10:54-10:59 OCT Proves CAS Is Rendered Safer Because Emboli Are Decreased By Mesh Covered Stents: The Evidence And What It Shows About The Interaction Between Stent And Plaque Carlo Setacci Francesco Setacci Minimal Incision CEA (MICE) Versus TCAR: Cost 11:00-11:05 Effectiveness, Advantages And Limitations Of Both Robert M. Proczka 11:06-11:12 **Panel Discussion** TIMING OF CAROTID INTERVENTIONS AFTER SYMPTOM ONSET 11:12-11:17 Optimal Timing Of Carotid Revascularization (CEA, TFCAS, TCAR) After Symptom Onset: Within 48 Hours Risk Is Increased For All Procedures; After 48 Hours Risk Is Less With CEA And TCAR Than With TFCAS: Based On A Large National Database Study Mahmoud B. Malas 11:18-11:23 **DEBATE:** It's Reasonable To Perform CEA Within 48 Hours After A Stroke's Symptoms Start: Under What Conditions And What Precautions Should Be Taken R. Clement Darling III 11:24-11:29 **DEBATE:** Not So Fast: If The Presenting Stroke Is Severe By NIH Severity Score, The Outcome Of Urgent Interventions (CEA, CAS, TCAR, Etc.) Is Poor: Should They Be Avoided Hernan A. Bazan 11:30-11:35 When Is CEA Within 48 Hours Of Stroke Symptom Onset Necessary: What Are The Risks: How To Make It Reasonably Safe: When Is It Totally Contraindicated Domenico Valenti

11:36-11:41	What Is The Best Medical Treatment For Patients With Carotid Stenosis (Asymptomatic And Symptomatic): Can High Risk Plaques Be Made Low Risk And Can They Be Made Smaller: Are Some Plaques Resistant To Medical Treatment And Why  J. David Spence (PowerPoint Presentation With Synched Audio)	
11:42-11:47	Technical Tips And Maneuvers To Make Treatment Of High Carotid Lesions Safe And Relatively Simple Richard J. Powell	
11:48-11:53	CEA And CAS For Asymptomatic Carotid Stenosis (ACS) Cause More Cognitive Impairment Than They Prevent: How To Get Non-Compliant ACS Patients To Comply With Medical Treatment By Showing Them Their Duplex Scans And Pictures Of Threatening Plaques  J. David Spence (PowerPoint Presentation With Synched Audio)	
11:54-12:00	Panel Discussion	
12:00- 1:00	Lunch Break – Visit Exhibits And Pavilions (2nd and 3rd Floors)	
SESSION 80 (Grand Ballroom East, 3rd Floor) MORE HOT CAROTID TOPICS: UPDATES ON KEY CAROTID RCTs; NEW INFORMATION ON TREATMENT OF TANDEM LESIONS, CAROTID ANEURYSMS AND STROKES DURING INTERVENTION Moderators: Sriram S. Iyer Christopher J. Kwolek Anne L. Abbott		
1:00 — 1:05	How Best To Treat Strokes Apparent During Or Right After CEA, CAS Or TCAR: Best Diagnostic Modalities And Treatments: What Skills Are Needed Gert J. de Borst	
	UPDATE ON CAROTID RCTs	
1:06 — 1:11	Update On SPACE 2: CEA Versus Best Medical Treatment (BMT) And CAS Versus BMT For ACS: Interesting 5-Year Results From A Stopped RCT Hans-Henning Eckstein	
1:12 – 1:17	Update On ACST 2: This RCT Found That CEA And CAS For ACS Had Comparable Adverse Event Rates And Implied That Both Invasive Treatments Were Superior To BMT: Does CEA Prevent Dementia Richard Bulbulia Alison Halliday	
1:18 — 1:23	Not So Fast! ACST 2 Has Flaws That Invalidate Its Conclusions: Invasive Therapies May NOT Be Better Than BMT J. David Spence (PowerPoint Presentation With Synched Audio)	
1:24 — 1:29	Update On CREST 2: CEA Versus BMT And CAS Versus BMT For ACS: Findings To Date And When Will We Have Final Results  Brajesh K. Lal Thomas G. Brott	
1:30 — 1:35	CEA Versus CAS For High-Grade ACS: RCTs (ACT 1 And CREST) Analyzed By Age And Sex: Are There Important Differences  Jon S. Matsumura	

	TANDEM CAROTID LESIONS	
1:36 — 1:41	<b>DEBATE:</b> Tandem Lesions At The Carotid Bifurcation Plus The Common Carotid Or Innominate Arteries: Stroke And Mortality Risks With Treatment Are Higher Than For Simple Bifurcation Lesions: How Best To Treat: Endo, Open, Staged, Hybrid W. Darrin Clouse Mark Conrad	
1:42 - 1:47	<b>DEBATE:</b> Tandem Carotid Lesions: Treatment Risks Need NOT Be Increased: Based On A Meta-Analysis: How Best To Treat To Minimize Risk Ross Naylor	
1:48 — 1:53	Silent Coronary Ischemia As Detected By FFRct Is Common In CEA Patients: What Does It Mean, What Should Be Done About It And When Christopher K. Zarins Dainis K. Krievins	
1:54 — 2:02	Panel Discussion	
SESSION 81 (Grand Ballroom East, 3rd Floor) MORE HOT CAROTID TOPICS: TREATMENT IN 2022 OF PATCH INFECTIONS, STRING SIGN, CAROTID DISSECTIONS; MANAGEMENT OF ARTERIAL INJURIES DURING CENTRAL VENOUS CATHETERIZATION; OPTIMAL PLATELET AND PROTAMINE STRATEGIES; BENIGNANCY OF ACS; VALUE OF LOCAL ANESTHESIA; STROKE RISK WITH ACS PLAQUES - A WAY TO PREDICT HIGH RISK PLAQUES Moderators: Glenn M. LaMuraglia Samuel R. Money		
2:02 — 2:07	Optimal Management Of Carotid Patch Infections Clark J. Zeebregts	
2:08 — 2:13	How Best To Diagnose And Treat Near Occlusion Of The Internal Carotid Artery (ICA) In 2022: Based On A Meta-Analysis: Is This The ICA String Sign Of Past Descriptions Gert J. de Borst	
2:14 — 2:19	Management Of Arterial Injuries During Placement Of Central Venous Catheters: Techniques For Avoiding Major Complications Oscar J. Ojeda	
2:20 — 2:25	Are Patients With 80-99% Asymptomatic Carotid Stenoses (ACS) At Greater Risk For Stroke Than Patients With <80% Stenoses: Should Any ACS Patient Undergo Invasive Treatment Ross Naylor	
2:26 — 2:31	Value Of Protamine Use During CEA, CAS And TCAR: How Should It Be Used And With What Precautions <i>David H. Stone</i>	
2:32 — 2:38	Panel Discussion	
2:38 — 2:43	Restenosis After CEA And CAS Is Benign And Should Rarely Be Treated: When Can It Cause Strokes Justifying Prophylactic Treatment Ross Naylor	
2:44 — 2:49	<b>DEBATE:</b> Local Anesthesia And Intraoperative Control With Duplex Or Angiography Is Key To Safe CEA: How To Do Them	

Hans-Henning Eckstein

2:50 — 2:55	<b>DEBATE:</b> Not So: CEA Can Be Performed Safely And Optimally Under General Anesthesia And Without Completion Duplex Or Angio Control: What Is Required To Do So And Are There Downsides To Duplex Or Angio Controls <i>Ali F. AbuRahma</i>
2:56 — 3:01	Are Symptomatic And Asymptomatic Carotid Stenosis Really 2 Different Diseases As Some Suggest James F. Meschia Thomas G. Brott
3:02 — 3:07	What Vascular Surgeons And Vascular Specialists Need To Know About What Can Be Learned From MRI And MRA Studies Of The Head And Neck Emmanuel M. Houdart
3:08 — 3:13	When An Asymptomatic Carotid Stenosis (ACS) Patient Has A Stroke What Is Its Magnitude: Does It Make The Case For More Or Fewer Prophylactic CEAs And CASs Gianluca Faggioli
3:14 - 3:20	Panel Discussion
3:20 — 3:30	Break – Visit Exhibits And Pavilions (2nd and 3rd Floors)

SESSION 82 (Grand Ballroom East, 3rd Floor)

MORE HOT AND CONTROVERSIAL CAROTID TOPICS AND NEW OR UPDATED CONCEPTS FOR ENDOVASCULAR TREATMENTS

Moderators: Anne L. Abbott Ali F. AbuRahma

Michael H. Wholey

#### NEW OR UPDATED CONCEPTS FOR ENDO **TREATMENTS**

3:30 — 3:35	Transvenous Transcaval Liver Biopsy: A Better Way And How To Do It: Transfemoral Versus Transjugular Jacob Cynamon
3:36 — 3:41	Endovascular Suturing Devices At The Tip Of An 8-9 French Catheter To Close Large Bore Sheath Access From Inside: The NovelRad Device: How Does It Work And Present Status Elchanan Bruckheimer
3:42 — 3:47	Clinical Judgment Is Required In The Application Of Evidence Based Medicine: RCTs Can Have Flaws Leading To Misleading Conclusions J. David Spence (PowerPoint Presentation With Synched Audio)
3:48 — 3:53	Progress In Open And Endovascular Treatment For Erectile Dysfunction: Diagnosis And Treatment Of Cavernous Leak And Other Pathology: A New Horizon Eric Allaire
3:54 - 3:59	Panel Discussion
	HOT CAROTID TOPICS
3:59 - 4:04	Risks And Causes Of Non-Ipsilateral Stroke Complicating CEA W. Darrin Clouse Mark Conrad
4:05 — 4:10	Why Is CTA An Imperfect And Non-Objective Way To

Assess Degree Of Carotid Stenosis

Reese A. Wain

4:11 – 4:16	Floating Clot At The Carotid Bifurcation Is A Prime Indication For Flow Reversal Technology During Treatment Of Carotid Stenosis: How Can Flow	
	Reversal Best Be Achieved In This Setting Juan C. Parodi (PowerPoint Presentation With Synched Audio)	
4:17 — 4:22	What Is Carotid Near Occlusion And How Is It Best Treated Currently: Conservatively, CEA, CAS Weiguo Fu (PowerPoint Presentation With Synched Audio)	
4:23 — 4:28	<b>DEBATE:</b> CAS Is The Best Treatment For Young Patients With A High-Grade Asymptomatic Carotid Stenosis (ACS)  D. Christopher Metzger	
4:29 — 4:34	<b>DEBATE:</b> Not So: Young Patients With A High-Grade ACS Should Not Be Treated With CEA, CAS Or TCAR Anne L. Abbott	
4:35 — 4:40	Why We Need A RCT Comparison Of TCAR With TFCAS, Transradial CAS And Best Medical Treatment For ACS And Symptomatic Carotid Stenosis <i>Michael H. Wholey</i>	
4:41 - 4:46	What Percent Of The Carotid Plaques Are Really High Stroke Risk: How To Detect Them With Ultrasound To See Neovascularization: Can High Risk Plaques Be Made Low Risk By Lipid Lowering Henrik Sillesen	
4:47 - 4:54	Panel Discussion	
SESSION 83 (Grand Ballroom East, 3rd Floor) NEW CONCEPTS AND NEW DEVELOPMENTS IN PERCUTANEOUS ACCESS CLOSURE AND WOUND		
CARE Moderators	s: Mark A. Adelman Kenneth Ouriel	
4:54 — 4:59	The Femoral Fascial Suture Technique For Percutaneous Access Closure: Technique, Value And Contraindications Tal M. Hörer	
5:00 — 5:05	Thomas Larzon  Embolic Treatment Of Hemorrhoids: How To Do It  And How Well Does It Work	
5:06 — 5:11	Gloria Salazar	
3:00 — 3:11	Update On Large Bore Percutaneous Access Closure Devices Including Perclose, ProGlide, Manta, PerOseal, InSeal And Others: Which Device Is Best For Which Application: There Are Serious Complications And How To Avoid Them Zvonimir Krajcer	
5:12 — 5:17	Access Complications Despite Old And New Closure Devices And Endovascular Suturing: Strategies For Best Outcomes Martin Storck Peter Reimer	
5:18 — 5:23	RCT Comparing Collagen Versus Suture Based Vascular Closure Devices After Lower Extremity Endo Arterial Revascularizations	

#### PROGRESS IN WOUND CARE

5:24 - 5:29	Best Treatment Strategies For Complex Infected Groin Wounds After Vascular Surgery: When To Do What: Wide Debridement, Antibiotics, Muscle Flap Reconstruction Or Graft Removal Jan-Willem Elshof
5:30 - 5:35	Optimal Treatment For Groin Infection After Prosthetic Bypasses From The Common Femoral Artery: How To Save The Graft And The Leg Hosam F. El Sayed
5:36 — 5:41	New Developments In The Treatment Of Mixed Arterial And Venous Wounds And Ulcers Katherine A. Gallagher (PowerPoint Presentation With Synched Audio)
5:42 — 5:47	Interface Pressure Delivered by Air-Inflated Inelastic Compression Wrap Antonios P. Gasparis Sundaram Ravikumar
5:48 — 5:53	A New More Efficient Method (TWO2) For Administering Localized Oxygen Therapy To Facilitate Wound Healing Anil P. Hingorani Enrico Ascher
5:54 - 6:02	Panel Discussion End of Program K

PROGRAM L (SESSIONS 84-91)

NEW DEVELOPMENTS IN THE TREATMENT OF POPLITEAL DISEASE: ANEURYSMS, ENTRAPMENT AND OCCLUSIVE LESIONS; ADVANCES IN TREATING ARTERIAL AND GRAFT INFECTIONS; ADVANCES IN VASCULAR IMAGING AND GUIDANCE; AUGMENTED REALITY AND ARTIFICIAL INTELLIGENCE; RECORDED LIVE COMPLEX ENDOVASCULAR CASES FROM MÜNSTER, GERMANY; NEW DEVELOPMENTS IN THORACIC OUTLET SYNDROME MANAGEMENT; ADVANCES IN MEDICAL, DRUG, ANTICOAGULANT AND RARE VASCULAR DISEASE TREATMENT; AND ADVANCES IN THE TREATMENT OF VASCULAR TRAUMA

Grand Ballroom West, 3rd Floor

SESSION 84 (Grand Ballroom West, 3rd Floor)

POPLITEAL DISEASE TOPICS RELATED TO NEW GUIDELINES, ANEURYSM TREATMENT (PRIMARY AND REDO), ENTRAPMENTS AND ATHERECTOMY FOR OCCLUSIVE LESIONS

Moderators: Enrico Ascher

Martin Björck

#### POPLITEAL ANEURYSMS AND THEIR BEST CURRENT TREATMENTS

7:00 – 7:05

High Points Of New SVS Guidelines For The Treatment Of Popliteal Aneurysms: Roles Of Endo And Open Repairs

Alik Farber

Patrick J. Geraghty

7:06 — 7:11	Contemporary Treatment Of Popliteal Aneurysms In 14 Countries: There Is Great Variation In Treatment, Techniques, Complications And Outcomes: When To
	Repair Endo; When Open: The Take Home Message Is Martin Björck
7:12 — 7:17	<b>DEBATE:</b> Endovascular Repair Is The Best Option For Most Popliteal Aneurysms Requiring Repair: Recent Progress In The Procedure: When Is Open Repair Indicated <i>Irwin V. Mohan</i>
7:18 — 7:23	<b>DEBATE:</b> Open Repair With Prosthetic Bypass Graft Is Better Than Endovascular Treatment For Popliteal Aneurysms Requiring Repair <i>Laurent Chiche</i>
7:24 — 7:29	Update On Optimal Treatment For Popliteal Aneurysms: When Observation; When Endo Repair; When Open Repair And How Fred A. Weaver
7:30 - 7:36	Panel Discussion
7:36 — 7:41	What Are Complex Popliteal Aneurysms And How Should They Be Fixed: When Endo; When Open <i>Jacques Busquet</i>
7:42 — 7:47	Rescue Procedures For Failed Endovascular Repairs Of Popliteal Aneurysms: Observation May Be Enough: If Not, Hybrid Versus Open Repair: Technical Tips Jose Fernandes e Fernandes
	POPLITEAL ENTRAPMENTS
7:48 — 7:53	Surgical Management Of Functional Popliteal Artery Entrapment Syndrome In Athletes Jason T. Lee
	POPLITEAL ARTERY INJURY
7:54 — 7:59	Surgical Approach And Graft Usage For Popliteal Artery Injury From Posterior Knee Dislocation Charles J. Fox
	POPLITEAL ARTERY ATHERECTOMY
8:00 — 8:05	Value Of Orbital Atherectomy For Popliteal Artery Occlusive Lesions: New Developments And Expanded Versatility Of The Device <i>Brian G. DeRubertis</i>
8:06 — 8:12	Panel Discussion
NEW DE (INCLUD	5 (Grand Ballroom West, 3rd Floor) VELOPMENTS IN TREATING ARTERIAL ING AORTIC) GRAFT INFECTIONS 5: Keith D. Calligaro Peter F. Lawrence
010 017	
8:12 — 8:17	Update On The NAIS Procedure (Deep Vein Reconstruction For Infected Aortic Grafts): How To Make The Operation Easier And Better John F. Eidt
	TREATMENT OF MYCOTIC ANEURYSMS
8:18 — 8:23	Optimal Treatment Of Mycotic AAAs In 2022: Value Of And Precautions With EVAR: Is It Ever A Stand-Alone Treatment <i>Timur P. Sarac</i>

8:24 — 8:29	Rifampin Soaked Endografts To Treat Mycotic AAAs: How To Prepare Them And When To Use Them: Are They Stand-Alone Treatment Or Do They Need Adjunctive Techniques
	Guillermo A. Escobar
8:30 — 8:35	Why Open Repair Is The Best Treatment For Mycotic AAAs: Is EVAR Ever Of Value <i>Yamume Tshomba</i>
8:36 — 8:41	Updated Best Treatment For Mycotic Aortic Aneurysms In The Thorax And Abdomen Based On Long-Term Results
0.40	Samy S. Nitecki
8:42 — 8:48	Panel Discussion
	TREATMENT OF AORTIC AND ARTERIAL GRAFT AND ENDOGRAFT INFECTIONS
8:48 — 8:53	Infected Endografts After EVAR: Etiological Factors, Diagnosis, Treatment, Outcomes Mohammad H. Eslami
8:54 — 8:59	Optimal Techniques For Treating Aorto-Iliac Graft And Endograft Infections In 2022 Anders Wanhainen
9:00 — 9:05	Update Of Surgical Treatment For Infected Aortic Grafts And Aortic-Enteric And Aortic-Bronchial Fistulas: Current Results In A Committed Center: Value Of An Antimicrobial Silver/Triclosan Graft Luca Bertoglio Roberto Chiesa Germano Melissano Andrea Kahlberg
9:06 — 9:11	Update On Progress In The Optimal Treatment Of
7.00	Aortic And Arterial Graft Infections: What's New In 2022: When Is Percutaneous Drainage Acceptable And Helpful Jean-Paul de Vries
9:12 — 9:17	Semi-Conservative Therapy – Saving All Or Part Of An Infected Aortic Graft: When Is It The Best Treatment And How To Make It Work: From The MAGIC Registry And VASGRA Study Zoran Rancic
9:18 — 9:23	EVAR Endograft Infections Can Be Treated By Local Catheter Techniques: How, When And When Not <i>Tal M. Hörer</i>
9:24 — 9:29	Open Repair Of Suprarenal Aortic Graft Infections: Technical Tips And Long-Term Results Thomas C. Bower Manju Kalra
9:30 — 9:35	Management Of Mid-Visceral Aortic Infections (Mycotic Suprarenal And TAAAs Before And After Repair) Salvatore T. Scali
	Gilbert R. Upchurch
9:36 — 9:52	Panel Discussion And Break (Visit Exhibits And Pavilions – 2nd and 3rd Floors)

SESSION 86 (Grand Ballroom West, 3rd Floor)
PROGRESS IN VASCULAR IMAGING AND
GUIDANCE FOR ENDOVASCULAR TREATMENTS
WITH LESS RADIATION EXPOSURE OR CONTRAST
TOXICITY

Moderators: Barry T. Katzen Matthew J. Eagleton

#### VASCULAR HOLOGRAPHY

9:52 — 9:57	How Will The Microsoft Hololens Look Through
	Patients' Bodies And Facilitate Endovascular
	Interventions: The ARCUS System Of Augmented
	Reality And Its Value In Vascular Surgery
	Jan M.M. Heyligers
9:58 -10:03	Real View Holographic Imaging: How Will It Help In
	Endovascular Treatments: Is It Available In The US
	Elchanan Bruckheimer
10:04-10:09	Holographic Guidance Of Endovascular Procedures
	Guidance (With Augmented Reality Goggles And No
	Screen): How Does It Work: What Is Possible And
	What Is Not
	Claude Mialhe

#### **DUPLEX AND INTRAVASCULAR ULTRASOUND**

10:10-10:15	Duplex Ultrasound Guidance: How, Where And When Can It Replace Fluoroscopy For Endovascular Procedures: Advantages, Limitations, And Why Its Use Is Increasing Enrico Ascher Natalie A. Marks
10:16-10:21	Intravascular Ultrasound (IVUS) Assistance In EVAR And TEVAR: Advantages And Limitations - Based On A Multicenter Study Jean-Baptiste Ricco (PowerPoint Presentation With Synched Audio)
10.22-10.28	Panel Discussion

#### 10:22-10:28 Panel Discussion

# IMPROVED IMAGING 10:28-10:33 Contrast Induced Nephropathy Is Over-Exaggerated: When Patients Need A Contrast Study, They Should Get It: How To Minimize Consequences Lindsay Machan

10:34-10:39	Totally Radiation Free Deployment Of A Complex
	AAA Endograft Using An Intraoperative Positioning
	System (IOPS From Centerline) And Positional
	Markers On Graft Components As Well As Catheters
	And Wires To Enable Accurate 3D Guidance: It Is
	Analogous To Precise GPS Targeting
	Gustavo S Oderich

Update On Cydar Medical System's Evolution To
Facilitate Fusion With All Digital Fluoroscopes: How
The System Uses AI To Improve EVAR Planning,
Guidance And Deployment
Jan M.M. Heyligers

10:46-10:51 The Cydar System Deformation Tool For Improving Image Fusion Accuracy: How Does It Work And Why Does It Help

Cynthia K. Shortell

10:52-10:57

New Imaging And Navigation Technologies To Facilitate And Improve Complex AAA Repair: Comparison Of Cydar, FORS (Philips) And Centerline Biomedical IOPS Systems

Venkatesh G. Ramaiah

10:58-11:05	Panel Discussion
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SESSION 87 (Grand Ballroom West, 3rd Floor)
AUGMENTED REALITY (AR), MIXED REALITY
AND ARTIFICIAL INTELLIGENCE (AI): HOW WILL
THEY IMPROVE VASCULAR IMAGING AND
ENDOVASCULAR DEVICE GUIDANCE WHILE
MINIMIZING RADIATION

Moderators: Gustavo S. Oderich Alan B. Lumsden

11:05-11:10 IOPS Guidance For In Situ Fenestrations Without Fluoroscopy

Animesh Rathore

11:11-11:16 Intra-Operative Prediction Of Endoleaks With Deep Learning

Kak Khee Yeung (PowerPoint Presentation With Synched Audio)

11:17-11:22 Automated Measurements Of Aortic Diameter Simplify Follow Up Of Complex Aneurysms

Stephan Haulon

11:23-11:28
Can Computational Fluid Dynamics Predict Which Patients Will Fail Complex Aortic Repair
Kenneth Tran

11.29-11:34 Virtual Reality And Intraoperative Position System During Aortic Aneurysm Repair
Aleem Mirza

11.35-11:40 Leveraging Machine Learning And Artificial Intelligence To Improve Cardiovascular Outcomes In Peripheral Arterial Disease

Elsie Ross

11:41-11:46
Will Virtual Reality Simulation Offsets Decrease
Number Of Cases For Vascular Trainees
Isabelle Van Herzeele

11:47-12:00 Panel Discussion

12:00-1:00 Lunch Break - Visit Exhibits And Pavilions (2nd and 3rd Floors)

SESSION 88 (Grand Ballroom West, 3rd Floor)
TWO PRESENTATIONS AND CHALLENGING
RECORDED LIVE CASES FROM MÜNSTER,
GFRMANY

Moderators: Martin J. Austermann Giovanni B. Torsello

1:00 – 1:05

F/B/EVAR In The Treatment Of Chronic TBADs With TAAAs: Comparative Indications And Results For B/EVAR And F/EVAR

Michel J. Bosiers

Giovanni B. Torsello

Martin J. Austermann

1:06 – 1:11

An Update On The EMINENT RCT Comparing The Eluvia DES Versus Bare Metal Stents

Giovanni B. Torsello

1:12 – 1:44 Complex Cases From Münster With Questions And Discussion: Huge Ruptured AAA Involving Iliac Arteries And Thoracic Aneurysm After Failed Open Repair Treated Endovascularly With Parallel Graft Chimps

Martin J. Austermann Giovanni B. Torsello

SESSION 89 (Grand Ballroom West, 3rd Floor) NEW DEVELOPMENTS IN THE TREATMENT OF THORACIC OUTLET SYNDROMES (TOSs) Moderators: Mark A. Adelman Robert W. Thompson		
1:44 — 1:49	Minimal Access Transaxillary First Rib Resection Under Loco-Regional Anesthesia: How To Do It And Advantages Francesco Spinelli	
1:50 — 1:55	Supraclavicular Approach To Arterial And Neurogenic TOSs (Video Presentation)  Ramesh K. Tripathi	
1:56 — 2:01	New Developments In The Diagnosis And Treatment Of Neurogenic TOS: The Roles Of Physical Therapy And Surgical Decompression: Based On The STOPNTOS RCT Joep Teijink Marc R.H.M. van Sambeek	
	VENOUS TOSs	
2:02 — 2:07	Current Optimal Management Of Venous Thoracic Outlet Syndromes Robert W. Thompson	
2:08 — 2:13	Spectrum Of Treatment Options For Venous TOS: What Are The Outcomes And How Do They Differ Jason T. Lee	
2:14 — 2:19	Thoracic Outlet Syndrome: Trials And Tribulations Of Pectoralis Minor Syndrome Michael J. Singh	
2:20 - 2:26	Panel Discussion	
2:26 — 2:36	Break – Visit Exhibits And Pavilions (2nd and 3rd Floors)	
SESSION 90 (Grand Ballroom West, 3rd Floor) NEW DEVELOPMENTS IN MEDICAL AND DRUG TREATMENTS: BEST ANTIPLATELET REGIMENS; UPDATE ON RARE VASCULAR DISEASES Moderators: Caron B. Rockman James H. Black, III		
	ANTIPLATELET REGIMENS	
2:36 - 2:41	Current Optimal Anticoagulation And Antiplatelet Treatment For High Risk Lower Extremity Bypasses – Vein And PTFE: How Are DOACs Useful Peter Henke	
2:42 — 2:47	Why One Should Have A Stock On Hand Of Balloon- Expandable And Self-Expandable Covered Stents To Deal With Emergencies From Iatrogenic And Other Traumatic Vascular Injuries: What Should Be In The Stock Maria A. Ruffino	
2:48 — 2:53	Why Clopidogrel Is Effective In <50% Of Patients At Standard Doses: How To Identify And Fix This Problem Karthik Kasirajan	
2:54 — 2:59	Optimal Antiplatelet Management With CEAs, Lower Extremity Bypasses And Open AAA Repairs David H. Stone	

## NEW DEVELOPMENTS IN LIPID MANAGEMENT – STATINS

	STATINS
3:00 — 3:05	Safety And Benefit Of Statins And Medical Treatment In Vascular Patients: Shockingly These Treatments Are Underutilized – Especially In Women: Why Is This So: Statin Intolerance Has Been Over Emphasized Christian A. Behrendt (PowerPoint Presentation With Synched Audio)
3:06 — 3:11	The Importance Of Lipoprotein Little a [Lp(a)] Levels In Determining Atherosclerotic Risk: When Should It Be Measured And If High, How Treated: Do PCSK-9 Inhibitors Help: Will An Oral PCSK-9 Inhibitor Be Available  Caron B. Rockman  Jeffrey S. Berger
3:12 — 3:17	Value And Limitations Of Statins And Non-Statin Lipid Lowering Agents In Patients With Carotid Artery Stenosis Kosmas I. Paraskevas
3:18 — 3:23	Lowering LDL-C And Controlling Elevated Blood Pressure Can Lower Cardiovascular Risk 80%: Doing These Things Should Be A Lifetime Goal Richard Bulbulia
3:24 - 3:32	Panel Discussion
	OTHER DISEASE RELATED TOPICS
3:32 — 3:37	Current (2022) Status Of Diagnosis And Treatment Of Buerger's Disease: Does It Exist Or Is It Just A Variant Of Atherosclerosis Kamphol Laohapensang
3:38 - 3:43	How To Make Operations For Complications Of Vascular Ehlers Danlos Syndrome Go Well James H. Black, III
3:44 — 3:49	Medical Treatment Of Patients With Vascular Ehlers Danlos Syndrome: How Does Celiprolol Treatment Work And How Does It Help Martin Björck
3:50 — 3:55	Temporary Diaphragm Pacing For Patients At Risk Of Prolonged Mechanical Ventilation To Maintain Muscular Integrity Of The Diaphragm: How Does It Work And Value Jae S. Cho
3:56 - 4:00	Panel Discussion
ADVANC OF VASC	(Grand Ballroom West, 3rd Floor) CES IN THE ENDO AND OPEN TREATMENT CULAR TRAUMA ST. Timur P. Sarac Todd E. Rasmussen
4:00 - 4:05	Resuscitative Endovascular Balloon Occlusion Of The Aorta (REBOA): When Is It A Valuable Procedure And When Is It Not: Limitations And Precautions Gilbert R. Upchurch
4:06 — 4:11	Value Of REBOA For Pending And Actual Cardiac Arrest: What Is Partial And Intermittent REBOA And How Is It Helpful <i>Tal M. Hörer</i>
4:12 – 4:17	Value Of Simulator Based Training For REBOA: How Does It Work: Can It Improve Results And Decrease Mishaps Lars B. Lonn (PowerPoint Presentation With Synched Audio)

4:18 – 4:23	Advances In Endovascular Control Of Hemorrhage: Techniques: When Should They Be Used And When Not Ravi R. Rajani
4:24 — 4:29	Most Effective Antiplatelet Management After Lower Extremity Interventional Treatments For CLTI – POBA, DCBs, Stents, Etc.  Maciej L. Dryjski
4:30 – 4:35	Contrary To Current Teaching, With Complex Extremity Injuries Involving Fractures And Large Blood Vessels, Revascularization Should PRECEDE External Bone Fixation: How To Get The Vascular Repair Length Right Erica L. Mitchell
4:36 — 4:41	For Major Venous Injuries: Repair Versus Ligation – Which Is Currently Best And When Samy S. Nitecki
4:42 – 4:47	Update On Best Current Management Of Pediatric Vascular Injuries: When Conservative; When Open; When Endo And Precautions  Michael C. Dalsing
4:48 — 4:54	Panel Discussion
	BLUNT THORACIC AORTIC INJURY (BTAI)
4:54 — 4:59	Blunt Traumatic Injuries Can Occur At Unusual Aortic Locations: What Are These Locations, What Are The Mechanisms Of Injury And What Are The Best Treatments  James W. Dennis
5:00 — 5:05	When Can Minor BTAI Be Treated By Observation Without TEVAR: What Precautions Are Necessary Elina Quiroga
5:06 — 5:11	Are We Overtreating BTAI – Especially Lesser Injuries Pedro Teixeira Joseph DuBose
5:12 - 5:17	How To Manage Heparin In TEVAR For BTAI When Head Or Other Injuries Are Also Present: Some, None Or Just Sheath Flushing Charles J. Fox
5:18 - 5:23	Why Rapid And Complete Aortic Healing After TEVAR For BTAI Allows Minimization Of The Seal Zone And Endograft Length Used Shang Loh
5:24 — 5:29	New Findings From The Aortic Trauma Foundation Global Registry On Outcomes Of TEVAR For Repair Of Traumatic Aortic Injuries: Do Lesser Degrees Of BTAI Require TEVAR Ali Azizzadeh (PowerPoint Presentation With Synched Audio)
5:30 — 5:35	Advantages Of An Endovascular Trauma Service: How To Set One Up And How To Finance It: Who Does The Cases Requiring Open Repairs Or Other Surgery <i>Charles J. Fox</i>
5:36 — 5:42	Panel Discussion
	End of Program L

PROGRAM M (SESSIONS 92-101) DEEP VENOUS DISEASE

Trianon Ballroom, 3rd Floor

Jose I. Almeida Course Leaders:

Lowell S. Kabnick Peter Gloviczki Thomas W. Wakefield

Steve Elias

SESSION 92 (Trianon Ballroom, 3rd Floor)

VENOUS IMAGING, CHRONIC VENOUS

OBSTRUCTION, PELVIC VENOUS DISORDERS

Moderators: Jose I. Almeida Lowell S. Kabnick Peter Gloviczki Thomas W. Wakefield

6:30-6:34 Introduction: Deep System Lowell S. Kabnick

6:35 - 6:40Defining The Role Of Risk Stratification And Duplex Ultrasound In The Diagnosis Of Acute Lower Extremity

Deep Vein Thrombosis

Fedor Lurie

6:41-6:46 The Conundrum Of 50% Stenosis In Veins

Arjun Jayaraj Seshadri Raju

6:47 - 6:52Outcome Of Venous Stents In Adolescents, Teenagers,

And Pregnancy Mahmood Razavi

6:53-6:58 The Pitfalls And Confusion About IVUS Measurements

For Deep Vein Stenting: How To Avoid Migration Paul J. Gagne

6:59 - 7:04Iliac Vein Post-Thrombotic Disease Stent

Considerations Jose I. Almeida

7:05 - 7:10Iliocaval Duplex Ultrasound With Image Optimization

Jan M. Sloves

7:11 - 7:16Tilt Table Plethysmography - A Must Prior To Stenting

> Venous Obstructions B. Erika Mendoza

7:17 - 7:22Venographic Techniques To Identify Pelvic Anatomy

> And Escape Points Mark H. Meissner

7:23 - 7:28Ovarian Vein Embolization: Which Patient Benefits

> And Reimbursement Kathleen D. Gibson

7:29 - 7:34Open Surgery For Nutcracker: Techniques And Results

Cynthia K. Shortell

7:35 - 7:40We Need Dedicated Venous Stents For Nutcracker

Syndrome And Why We Need Them

Peter Gloviczki

7:41 - 7:46Panel Discussion

#### CHRONIC VENOUS OBSTRUCTION

Moderators: Marzia Lugli Patrick E. Muck

7:47 - 7:52Using The Femoral Vein As A Tunneling Conduit For

An Arterial Bypass: Venous Outcomes In PQ Bypass-

1 And 2-Year Results Mark A. Adelman

7:53 — 7:58	Deep Reflux: What Happens After Concomitant Obstruction Correction Marzia Lugli	
	ů	
7:59 — 8:04	Does Vein Stenting Reduce Great And Small Saphenous Venous Reflux Natalie A. Marks	
8:05 — 8:10	Contralateral Limb Improvement After Unilateral Iliac Vein Stenting: Argument Against Simultaneous Bilateral Stenting Arjun Jayaraj Seshadri Raju	
8:11 — 8:16	Utilizing The Radiofrequency Power Wire To Vaporize A Channel Through Chronic Iliocaval Venous Obstructions (CICVO)  Patrick E. Muck	
8:17 — 8:22	Complex Iliocaval Reconstruction: How I Do It Kush R. Deasi	
8:23 — 8:28	Panel Discussion	
FEMORO STRATEG	3 (Trianon Ballroom, 3rd Floor) D-ILIOCAVAL INTERVENTIONAL GIES TO REDUCE VENOUS HYPERTENSION 5: Ellen D. Dillavou Rabih A. Chaer	
8:29 — 8:34	Outcomes And Predictors Of Failure Of Iliac Vein	
	Stenting Rabih A. Chaer	
8:35 — 8:40	Validation Of A Chronic Venous Obstruction Classification System Houman Jalaie	
8:41 — 8:46	Best Anticoagulation After Deep Venous Stenting Ellen D. Dillavou	
8:47 — 8:52	Impact Of Stent Structure On Venous Flow (In Vitro Investigations With A Designed Fluid Dynamic Model) Houman Jalaie	
8:53 — 8:58	What Should The 3rd Generation Stents Look Like Cees H.A. Wittens	
8:59 — 9:04	Does PMT Now Lead To Over-Stenting Stephen A. Black	
9:05 — 9:10	Panel Discussion	
SESSION 94 (Trianon Ballroom, 3rd Floor) HYBRID TECHNIQUES AND STENT PROBLEMS POST-IMPLANTATION Moderators: Houman Jalaie Steven D. Abramowitz		
9:11 — 9:16		
7:11 — 7:10	A Randomized Controlled Trial Comparing Venous Stenting With Conservative Treatment In Patients With Deep Venous Obstruction Houman Jalaie	
9:17 — 9:22	Neointima Formation Following Venous Placement Of Self-Expanding Nitinol Stents Of Different Porosity: Clinical And Experimental Results Houman Ialaie	
9:23 — 9:28	My Worst Venous Complications  Erin H. Murphy	
9:29 — 9:34	Reinterventions Following Vein Stent Placements – Lessons Learned From 166 Cases Windsor Ting	
	TIPLEVELLI I THE	

9:35 — 9:40	Techniques For Endovenectomy And Concomitant Iliocaval Stenting With And Without Adjuvant Arteriovenous Fistula Creation
9:41 — 9:46	Steven D. Abramowitz Panel Discussion
	5 (Trianon Ballroom, 3rd Floor)
	OS AND NEW HORIZONS s: Peter F. Lawrence William A. Marston
9:47- 9:52	What Is The Standard Of Care For Venous Wounds William A. Marston
9:53 — 9:58	Adjuvant Pharmacologic Treatment Of Venous Ulcers Monika L. Gloviczki
9:59 -10:04	Treatment Of Superficial And Perforator Reflux And Deep Venous Stenosis Improves Healing Of Chronic Venous Leg Ulcers Peter F. Lawrence
10:05-10:10	Skin Substitutes To Promote Venous Leg Ulcer Healing Sarah Onida
10:11-10:16	Do The EVRA Study Results Apply For Ulcers >6 Months Chronicity Manj S. Gohel
10:17-10:22	The Economic Impact Of Infections In Venous Leg Ulcer Patients Thomas F. O'Donnell, Jr.
10:23-10:28	Panel Discussion
VENOUS	6 (Trianon Ballroom, 3rd Floor) 5 STENT TRIALS AND CONCEPTS 5: Jose I. Almeida Lowell S. Kabnick
10:29-10:34	Aspect Ratio Of Iliac Stenosis: Does It Matter Jose I. Almeida
10:35-10:40	What Is Aspect Ratio And What Does The Clinical Data Reveal  Lowell S. Kabnick
10:41-10:46	VERNACULAR Trial: 3-Year Update Michael K.W. Lichtenberg
10:47-10:52	What Can The Arnsberg Registry Tell Us Michael K.W. Lichtenberg
10:53-10:58	Zilver Vena Stent Trial: Three-Year Outcomes Anthony J. Comerota (PowerPoint Presentation With Synched Audio)
10:59-11:04	ABRE Trial Results Stephen A. Black
11:05-11:10	Update On The IGUIDEU (Philips) Trial Paul J. Gagne
11:11-11:16	Panel Discussion
MORE IL SERVICE	7 (Trianon Ballroom, 3rd Floor) .IOFEMORAL FLOW, PELVIC, AND SITE OF ISSUES s: Paul J. Gagne Erin H. Murphy
11:17-11:22	Models Of OBL Development: Start And Finance Paul J. Gagne
11:23-11:28	Home Care Of Venous Leg Ulcers Using A Novel, Self-Applied, Inelastic Air Compression Garment And Air-Bolster Wound Dressings Sundaram Ravikumar

11:29-11:34	Do Venous Stent Fractures Matter David J. Dexter
11:35-11:40	Criteria To Predict Mid-Term Outcome After Stenting Of Chronic Iliac Vein Obstructions (PROMISE Trial) Iris Baumgartner
11:41-11:46	Complications From Landing Iliofemoral Stents On A Curve Erin H. Murphy
11:47-11:52	A Novel Technique And Outcomes For Iliocaval Extravascular Reconstruction (TIER) For Iliocaval Agenesis Steven D. Abramowitz
11:53-11:58	Deep Venous Reflux In Patients Undergoing Venous Treatments Mikel Sadek
11:59-12:04	Stent Complications In The ABRE Trial At 24 Months Erin H. Murphy
12:05 -12:10	Male Pelvic Congestion And Varicose Veins: How Much Of A Problem Mark S. Whiteley
12:11-12:16	Shortcomings Of Stents: Positioning, Migration, Patency And Anticoagulation Cees H.A. Wittens
12:17-12:22	When Deep Venous Reflux Repair Is Not Effective: What Next Marzia Lugli
12:23-12:28	Panel Discussion
12:29- 12:45	Lunch Break – Visit Exhibits And Pavilions (2nd and 3rd Floors)
STRATEG AND VEI	3 (Trianon Ballroom, 3rd Floor) GIES FOR THROMBOEMBOLIC EVENTS NOUS ANEURYSMS 5: Thomas W. Wakefield David J. Dexter
	VTE INTERVENTIONAL
12:46-12:51	CLOUT Registry For The Inari CloTriever David J. Dexter
12:52-12:57	DVT Removal Without Thrombolytics – Mechanical Thrombectomy Is Now The Standard Of Care For Both Upper And Lower Extremity DVT Constantino Pena
12:58-1:03	P-Max Study: Mechanical Thrombectomy For Iliofemoral DVT With The Aspirex Device Michael K.W. Lichtenberg
1:04 — 1:09	Thrombolysis For Acute DVT: Utilization And Guidance From Current Clinical Trials Brian G. DeRubertis
1:10 — 1:15	Why Iliofemoral Deep Venous Stents Fail, And How To Manage It Kush R. Desai
1:16 — 1:21	Angiovac Venous Thrombectomy: Where, When, And How David J. Dexter
1:22 — 1:27	Venous Aneurysms: Should They Be Treated Peter F. Lawrence
1:28 — 1:33	Closed Plication Is A Safe And Effective Method For Treating Popliteal Venous Aneurysms Thomas W. Wakefield

SESSION 99 (Trianon Ballroom, 3rd Floor) COVID-19; VENOUS THROMBOSIS Moderators: Jose I. Almeida Mikel Sadek
1:40 – 1:45 Our Experience With DVT/PE During The COVID En Young Erben
1:46 – 1:51 Treatment Of Venous Thrombosis In Hospitalized Patients With COVID-19  Mikel Sadek
1:52 – 1:57 We Need To Pay More Attention To The Microcirculation  Jose I. Almeida
1:58 – 2:03 Duration Of Anticoagulation Rachel Rosovsky
2:04 – 2:09 Inflammation, Selectins And Venous Thrombosis Thomas W. Wakefield
2:10 – 2:15 Thoracic Outlet Acute VTE: What To Do And When <i>Thomas S. Maldonado</i>
2:16 – 2:21  Venous Thromboembolism In The Context Of Chroni Venous Disease  Thomas W. Wakefield
2:22 – 2:27 Should All Patients With Acute VTE Be Treated With Statin: When And Dose Anthony J. Comerota (PowerPoint Presentation With Synched Audio)
2:28 – 2:33 The Dexterity Study: Anti-Inflammatory Potential In Treating Venous Disease Stephen A. Black
2.34 – 2.39 Panel Discussion
SESSION 100 (Trianon Ballroom, 3rd Floor) MORE VENOUS THROMBOSIS STRATEGIES
Moderators: Joann Lohr Peter Henke Jose I. Almeida
2:40 – 2:45 Pediatric DVT: An Evidence Based Summary Dawn M. Coleman
2:46 – 2:51 DOAC Revolution – Which Drug For What Disease: Review Of Ongoing Trials  Andrea T. Obi
2.52 – 2.57 Update In Experimental DVT Pathogenesis And Resolution Peter Henke
2:58 – 3:03 Role Of Thrombophilia Testing Rachel Rosovsky
3:04 – 3:09  Mesenteric Vein Thrombosis: What Is The Best Strategy For Management  Mark G. Davies
3:10 – 3:15 Update On Reversal Agents For The DOACs Timothy K. Liem
3:16 – 3:21 IVC Clot Management In Pregnant Patients  Joann Lohr
3:22 – 3:27 Open Removal Of Chronically Occluded IVC And Iliofemoral Stents  Steven D. Abramowitz

3:28 - 3:33	What To Do When Iliac Vein Stenting As Well As Endovenous Ablation Fail To Heal The Venous Ulcer: Tips And Tricks Ramesh K. Tripathi
3:34 — 3:39	Panel Discussion
DEEP VEI OF IVC F WHEN IL ABLATIC SYNDRC	1 (Trianon Ballroom, 3rd Floor) IN VALVE TECHNOLOGIES; MANAGEMENT FILTER PROBLEMS AND TUMORS; LIAC VEIN STENTING PLUS SUPERFICIAL ON; TREATMENT OF SUPERIOR VENA CAVA OME SI: Paul J. Gagne Jorge H. Ulloa
3:40 — 3:45	Advanced IVC Filter Retrieval: When And How  Kush R. Desai
3:46 — 3:51	Why Temporary Filters Are Not Removed: Clinical Predictors In 1,000 Consecutive Cases  Kush R. Desai  Heron E. Rodriguez
3:52 — 3:57	Safety And Efficacy Report On The Venovalve (First In Man) IDE Feasibility Study  Jorge H. Ulloa
3:58 - 4:03	Tips And Tricks For Optimal Management Of Primary And Secondary IVC Tumors Jill J. Colglazier
4:04 — 4:09	Surgical Removal Of IVC Filters For Perforation Or Infiltration Timothy K. Liem
4:10 - 4:15	An Update On The Cook Venous Valve Project Paul J. Gagne
4:16 — 4:21	The Preserve IVC Filter Study Results  David L. Gillespie
4:22 — 4:27	Combining Iliac Vein Stenting With Superficial Vein Ablation: When Are They Both Indicated <i>Elna M. Masuda</i>
4:28 — 4:33	Deep Vein Valve Devices; What Outcome Measures Should Be Used Fedor Lurie
4:34 — 4:39	What To Do With Fractured Filters And Embolic Filter Fragments Constantino Pena
4:40 — 4:45	US Experience Of The BlueLeaf® Endovenous Valve Formation: Update William A. Marston
4:46 — 4:51	Open Surgical And Endovascular Treatment Of Superior Vena Cava Syndrome Manju Kalra
4:52 — 4:57	Panel Discussion End of Program M

# SATURDAY, NOVEMBER 19, 2022

6:15 A.M. General Registration — Gramercy Suite East, 2nd Floor

6:00 A.M. Faculty Registration - Gramercy Suite West, 2nd Floor

6:30 A.M. Continental Breakfast - 3rd Floor Promenade/Foyer

#### **CONCURRENT SATURDAY PROGRAMS**

PROGRAM N: (SESSIONS 102-106)

Topics Too Important To Miss In The Treatment Of Lower **Extremity, Aortic Or Carotid Disease** 

6:55 A.M. - 1:30 P.M.

Grand Ballroom East, 3rd Floor

PROGRAM O: (SESSIONS 107-112)

Improving Outcomes In Hemodialysis Access

8:00 A.M. - 4:05 P.M.

Grand Ballroom West, 3rd Floor

PROGRAM N (SESSIONS 102-106)

TOPICS TOO IMPORTANT TO MISS IN THE TREATMENT OF LOWER EXTREMITY, AORTIC OR CAROTID DISEASE

Grand Ballroom East, 3rd Floor

SESSION 102 (Grand Ballroom East, 3rd Floor)

LOWER EXTREMITY TOPICS TOO IMPORTANT TO

MISS (4 3/4-MINUTE TALKS)

Moderators: Keith D. Calligaro Brian G. DeRubertis

Late Breaking Trial With FLEX Vessel Prep And DCBs 6:55 - 7:00 Show Better 12-Month Results With Fempop Lesions Eric A. Secemsky (PowerPoint Presentation With Synched Audio) 7:00 - 7:05How To Achieve And Maintain Skills In Tibial And

Pedal Bypasses Peter A. Schneider

7:05 - 7:10When Should Endovascular Treatments Be The First Choice For Common Femoral Artery (CFA) Occlusive Lesions

Brian G. DeRubertis

7:10 - 7:15Technical Tips For Retrograde Tibial And Pedal Access Under Ultrasound (Duplex) Guidance: Contraindications When Fluoro Is Better Steven Kum (PowerPoint Presentation With Synched Audio)

7:15 - 7:20How Does Dynamic Imaging With Angiography Or Ultrasound Help In The Diagnosis And Treatment Of Popliteal Entrapment Syndromes

Niten Singh

7:20 - 7:25**DEBATE:** An Endo First Approach Is Best For Treating CLTI In All Patients: Is There Any Role For Open **Bypasses** 

Christopher J. Abularrage

7:25 - 7:30**DEBATE:** Not So: Open Bypass Should Be The First Treatment For Some CLTI Patients: When Is This So And In What Percentage Of CLTI Patients Karan Garg

Panel Discussion

7:30 - 7:35

7:35 - 7:40When Is Pedal Loop Recanalization And Below The Ankle Angioplasty Indicated, And How Do I Do Them Venita Chandra

7:40 — 7:45	Isolated Pedal Interventions For CLTI: When Are They Worthwhile And Who Should Do Them <i>Mark G. Davies</i>
7:45 — 7:50	<b>DEBATE:</b> Multivessel Tibial Revascularization Does Not Improve Limb Salvage In CLTI Patients: From A VQI Study Venita Chandra
7:50 — 7:55	<b>DEBATE:</b> Not So: In Some Circumstances Multivessel Tibial Revascularization Does Improve Outcomes In CLTI Patients: Which Circumstances <i>Brian G. DeRubertis</i>
7:55 - 8:00	Panel Discussion
8:00 — 8:05	Indication And Technical Tips For Performing Retrograde Popliteal Artery Access Jeffrey J. Siracuse
8:05 — 8:10	Prograde SFA Access Can Be Safe And Effective For Lower Extremity Endo Procedures; When And How To Do It Safely Karan Garg
8:10 — 8:15	Infrainguinal Revascularization In Young Patients With PAD: What Works, What Doesn't, And What Factors Impact Outcome William P. Robinson
8:15 — 8:20	What Defines The No-Option CLTI Foot As A Candidate For Venous Arterialization: What Is The Medial Arterial Calcium (MAC) Score And How Does It Help  Miguel F. Montero
8:20 — 8:25	
	3 (Grand Ballroom East, 3rd Floor)
IMPORTA	OWER EXTREMITY TOPICS TOO ANT TO MISS (4 ¾-MINUTE TALKS) :: Kim J. Hodgson Alan M. Dietzek
IMPORTA	ANT TO MISS (4 ¾-MINUTE TALKS) s: Kim J. Hodgson
IMPORTA Moderators	ANT TO MISS (4 ¾-MINUTE TALKS)  :: Kim J. Hodgson     Alan M. Dietzek  How To Cross Any CTO And Technical Tips For Retrograde Access Via The Popliteal, Tibial And Peroneal Arteries: How To Do It
MPORTA Moderators 8:25 – 8:30	ANT TO MISS (4 ¾-MINUTE TALKS)  S: Kim J. Hodgson Alan M. Dietzek  How To Cross Any CTO And Technical Tips For Retrograde Access Via The Popliteal, Tibial And Peroneal Arteries: How To Do It Lorenzo Patrone  Vascular Lesion Recurrence: How To Monitor And When To Re-Intervene: Are There Differences Between Lesion Recurrence After Endo And After Open Procedures
MPORTA Moderators 8:25 – 8:30 8:30 – 8:35	ANT TO MISS (4 3/4-MINUTE TALKS)  Example Missing Miss
MPORTA Moderators 8:25 - 8:30 8:30 - 8:35 8:35 - 8:40	ANT TO MISS (4 3/4-MINUTE TALKS)  SI: Kim J. Hodgson Alan M. Dietzek  How To Cross Any CTO And Technical Tips For Retrograde Access Via The Popliteal, Tibial And Peroneal Arteries: How To Do It Lorenzo Patrone  Vascular Lesion Recurrence: How To Monitor And When To Re-Intervene: Are There Differences Between Lesion Recurrence After Endo And After Open Procedures Venita Chandra  Impact Of A Dedicated Limb Preservation/Limb Salvage Service On Amputation Rates: Must It Include An Open Bypass Surgery Component Niten Singh  Limb Salvage In Patients With Neuroischemic Diabetic Feet: How To Do It From Start To Finish
MPORTA Moderators  8:25 - 8:30  8:30 - 8:35  8:35 - 8:40  8:40 - 8:45	ANT TO MISS (4 ¾-MINUTE TALKS)  SE KIM J. Hodgson Alan M. Dietzek  How To Cross Any CTO And Technical Tips For Retrograde Access Via The Popliteal, Tibial And Peroneal Arteries: How To Do It Lorenzo Patrone  Vascular Lesion Recurrence: How To Monitor And When To Re-Intervene: Are There Differences Between Lesion Recurrence After Endo And After Open Procedures Venita Chandra  Impact Of A Dedicated Limb Preservation/Limb Salvage Service On Amputation Rates: Must It Include An Open Bypass Surgery Component Niten Singh  Limb Salvage In Patients With Neuroischemic Diabetic Feet: How To Do It From Start To Finish Ignacio Escotto  Endo Versus Open Reinterventions To Assist In Maintaining Patency Of Distal Vein Grafts: Both Are Needed And When
MPORTA Moderators  8:25 - 8:30  8:30 - 8:35  8:35 - 8:40  8:40 - 8:45  8:45 - 8:50	ANT TO MISS (4 3/4-MINUTE TALKS)  Exim J. Hodgson Alan M. Dietzek  How To Cross Any CTO And Technical Tips For Retrograde Access Via The Popliteal, Tibial And Peroneal Arteries: How To Do It Lorenzo Patrone  Vascular Lesion Recurrence: How To Monitor And When To Re-Intervene: Are There Differences Between Lesion Recurrence After Endo And After Open Procedures Venita Chandra  Impact Of A Dedicated Limb Preservation/Limb Salvage Service On Amputation Rates: Must It Include An Open Bypass Surgery Component Niten Singh  Limb Salvage In Patients With Neuroischemic Diabetic Feet: How To Do It From Start To Finish Ignacio Escotto  Endo Versus Open Reinterventions To Assist In Maintaining Patency Of Distal Vein Grafts: Both Are Needed And When Francesco Spinelli

9:00 — 9:05	Open Versus Endo Revascularizations In Dialysis Patients With CLTI: What Is The Role Of Each Rabih A. Chaer
9:05 — 9:10	Value Of Leg Open Bypasses After Multiple Endo Treatment Failures For CLTI: They Can Produce Long- Term (>10 Years) Limb Salvage Julien G. Sfeir
9:10 — 9:15	What Is The Real World Role Of Drug-Eluting Stents In Patients With CLTI And Infrapopliteal Arterial Disease: Which Stents To Use In A Single-Center Experience Ali F. AbuRahma
9:15 — 9:25	Panel Discussion
9:25 — 9:30	Value Of Duplex Gray Scale In Predicting Successful SFA CTO Crossing, Re-Entry And The Need For Distal Access Natalie A. Marks
9:30 — 9:35	Effect Of Short-Term Complications Of Lower Extremity Revascularizations On Long-Term Outcomes And Patient Survival Panos Kougias Sherene E. Sharath Joseph L. Mills
9:35 — 9:40	Endovascular Diagnosis And Control Of Hemorrhage After Fempop Open Operations: It Is A Better Way And How To Do It Francesco Setacci Carlo Setacci
9:40 — 9:45	How To Use Microcatheters To Facilitate Complex Peripheral Interventions
	Jos C. van den Berg
9:45 — 9:50	
9:45 — 9:50 9:50 -10:00	Panel Discussion
9.50 - 10.00 SESSION NEW D AND T VASCU INCLUI OF CO SURGE TOPICS	Panel Discussion Break - Visit Exhibits And Pavilions (3rd Floor)  104 (Grand Ballroom East, 3rd Floor) DEVELOPMENTS IN COVID-19 TREATMENTS HE EFFECTS OF COVID-19 ON THE FLAR SYSTEM AND MISCELLANEOUS TOPICS DING TRAINING ISSUES, THE VALUE MBINED VASCULAR AND CARDIAC RY RESIDENCIES AND MORE CAROTID
9.50 - 10.00 SESSION NEW D AND T VASCU INCLUI OF CO SURGE TOPICS	Panel Discussion Break - Visit Exhibits And Pavilions (3rd Floor)  104 (Grand Ballroom East, 3rd Floor) DEVELOPMENTS IN COVID-19 TREATMENTS HE EFFECTS OF COVID-19 ON THE FLAR SYSTEM AND MISCELLANEOUS TOPICS DING TRAINING ISSUES, THE VALUE MBINED VASCULAR AND CARDIAC RY RESIDENCIES AND MORE CAROTID
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9:50 -10:00 SESSION NEW E AND T VASCU INCLUI OF CO SURGE TOPICS Moderate	Panel Discussion Break - Visit Exhibits And Pavilions (3rd Floor)  104 (Grand Ballroom East, 3rd Floor)  DEVELOPMENTS IN COVID-19 TREATMENTS HE EFFECTS OF COVID-19 ON THE FLAR SYSTEM AND MISCELLANEOUS TOPICS DING TRAINING ISSUES, THE VALUE MBINED VASCULAR AND CARDIAC RY RESIDENCIES AND MORE CAROTID  Sors: Mark A. Adelman Ronald L. Dalman  Update On The Relationship Between COVID-19 And AAAs Ronald L. Dalman
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9:50 -10:00 SESSION NEW E AND T VASCU INCLUI OF CO SURGE TOPICS Moderate 10:06-10:1	Panel Discussion Break - Visit Exhibits And Pavilions (3rd Floor)  104 (Grand Ballroom East, 3rd Floor) DEVELOPMENTS IN COVID-19 TREATMENTS HE EFFECTS OF COVID-19 ON THE DLAR SYSTEM AND MISCELLANEOUS TOPICS DING TRAINING ISSUES, THE VALUE MBINED VASCULAR AND CARDIAC RY RESIDENCIES AND MORE CAROTID Sobres: Mark A. Adelman Ronald L. Dalman  Update On The Relationship Between COVID-19 And AAAs Ronald L. Dalman  What Will Be The Post-Pandemic Steady State Of Novel Infection And Acquired Immunity: Is "Herd Immunity" A Realistic Concept Clayton J. Brinster How Is COVID-19 Affecting Vascular Surgery Practice And Training Ashraf Mansour

Indovascular Management Of COVID-19 Induced Arterial Pathologies: When Are They Effective And When Not Karthik Kasirajan    MISCELLANEOUS TOPICS		
10.30-10.35  The Impact Of COVID-19 On Vascular Surgical Training: Are We On The Road To Recovery Celia Riga  10.36-10.41  Integrated (0+5) Vascular Residency Plus CT Surgery Fellowship – How Many Are There; Are They Over Trained And Underutilized: What Are The Advantages Jennifer L. Perri  10.42-10.47  Lifeline Proprietary Carotid Screening: Who Profits: Is It A Good Thing Or A Hoax: What Can It Tell Us About The Prevalence Of ACS Peter A. Schneider William A. Gray  10.46-10.54  Panel Discussion  SESSION 105  (Grand Ballroom East, 3rd Floor)  AORTIC TOPICS TOO IMPORTANT TO MISS (4  34-MINUTE TALKS) AND SPINE EXPOSURE  (7-MINUTE TALKS)  Moderators: Timur P. Sarac Jesse M. Manunga  10.54-10.59  Fenestrated EVAR Versus Chimney EVAR For Juxtarenal AAAs: When Is One Better Than The Other And What Are The Critical Considerations Piergiorgio Cao  11.00-11.05  Improved System For Evaluating Aortic Neck Anatomy And Suitability For EVAR And Need For F/EVAR David J. Minion  11.05-11.10  First-In-Man Evaluation Of A Novel Endovascular Robotic-Assisted Aortic Repair Qingsheng Lu (PowerPoint Presentation) With Synched Audio) Zaiping Jing  SPINE EXPOSURE SURGERY  11.10-11.17  Technical Tips And Tools For The Vascular Surgeon To Provide Anterior Exposure For Spine Procedures (7-Minute Presentation)  pleffrey Jim  11.18-11.25  Vascular Complications Of Anterior Spine Exposures; How To Avoid Them And How To Treat Them If They Occur (7-Minute Presentation)  william P. Robinson  11.25-11.30  Outcomes Of EVAR In 18,416 High-Risk Patients Ineligible For Open Repair: When Is EVAR Justified Over No Intervention In Such Patients: Is EVAR 2 Still Relevant George A. Antoniou  11.30-11.35  Should The Celiac Artery Be Stented Or Not During Complex Aortic Aneurysm Repair In Patients With Median Arcuate Ligament Syndrome (MALS) Or In Any Patients With MALS Jesse M. Manunga  11.30-11.40  Panel Discussion  11.40-11.45  How To Avoid Axillary Artery Complications After Large Sheath Use In Complex AAA Repairs	10:24-10:29	Arterial Pathologies: When Are They Effective And When Not
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11:18-11:25  Vascular Complications Of Anterior Spine Exposures; How To Avoid Them And How To Treat Them If They Occur (7-Minute Presentation)  William P. Robinson  11:25-11:30  Outcomes Of EVAR In 18,416 High-Risk Patients Ineligible For Open Repair: When Is EVAR Justified Over No Intervention In Such Patients: Is EVAR 2 Still Relevant  George A. Antoniou  11:30-11:35  Should The Celiac Artery Be Stented Or Not During Complex Aortic Aneurysm Repair In Patients With Median Arcuate Ligament Syndrome (MALS) Or In Any Patients With MALS  Jesse M. Manunga  11:35-11:40  Panel Discussion  11:40-11:45  How To Avoid Axillary Artery Complications After Large Sheath Use In Complex AAA Repairs	11:10-11:17	To Provide Anterior Exposure For Spine Procedures (7-Minute Presentation)
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Large Sheath Use In Complex AAA Repairs	11:35-11:40	
	11:40-11:45	Large Sheath Use In Complex AAA Repairs

11.45-11.50 Reasons For And Proportion Of Open Repair In A High Volume Center With Good F/B/EVAR Results Athanasios Katsargyris Eric L.G. Verhoeven  11.50-11.55 How To Optimize Blood Pressure Management With TBADs: It Is Not Simple Loay S. Kabbani, MHSA  11.55-12.00 Left Subclavian Revascularization With TEVAR: Technical Tips And Tools To Make In Situ Fenestration Easy Wayne W. Zhang  12.00-12.05 9-Year Safety And Effectiveness Of Endoanchors For Fenestrated EVAR: They Support Shortening Main Endograft Length And Reducing Procedural Complexity Jorg Tessarek  12.05-12.10 Transcaval Access For TEVAR: When And How To Do It Ross Milner  12.10-12.15 Panel Discussion Lunch Available (3rd Floor Foyer)  SESSION 106 (Grand Ballroom East, 3rd Floor) AORTIC AND CAROTID TOPICS TOO IMPORTANT TO MISS (4 3/4-MINUTE TALKS) Moderators: Sean P. Lyden Enrico Ascher Frank J. Veith  AORTIC AND ITS BRANCHES TOPICS  12.15-12.20 When And How To Treat Isolated Visceral Artery Dissections Paulo E. Ocke-Reis  12.20-12.25 Venous Anomalies Around The Neck Of AAAs – How To Diagnose Them: What Are The Pitfalls And How To Deal With Injuries If They Occur Ramesh K. Tripathi  12.25-12.30 Techniques For Improving Proximal Landing Zones For TEVARs And Aortic Dissections Involving The Aortic Arch; Parallel Grafts And Extra-Anatomic Bypasses R. Clement Darling III  12.30-12.35 Upper Extremity Access For Complex Endo AAA Repairs Is Associated With A High Rate Of Stroke: From A VQI Study Mark L. Schermerhorn  12.35-12.40 DEBATE: The Vast Majority Of Failed EVARs Can Be Treated Endovascularly Ross Milner  12.40-12.45 DEBATE: The Vast Majority Of Failed EVARs Are Best Repaired By Open Conversion Michel S. Makaroun  12.45-12.50 FIEVARS With Larger Diameter Aortas (34-36 mm) Are Associated With Higher Incidence Of Type 1 And 3 Endoleaks: How Can These Be Prevented Jason T. Lee  12.50-12.55 Value Of 3D Flow Models To Analyze The Cause Of Failure After F/EVAR And TEVAR Maciej L. Dryjski  12.55-1.00 Panel Discussion		
### ### ### ### ### ### ### ### ### ##	11:45-11:50	High Volume Center With Good F/B/EVAR Results
TBADs: It Is Not Simple Loay S. Kabbani, MHSA  11.55-12.00  Left Subclavian Revascularization With TEVAR: Technical Tips And Tools To Make In Situ Fenestration Easy Wayne W. Zhang  12.00-12.05  9-Year Safety And Effectiveness Of Endoanchors For Fenestrated EVAR: They Support Shortening Main Endograft Length And Reducing Procedural Complexity Jörg Tessarek  12.05-12.10  Transcaval Access For TEVAR: When And How To Do It Ross Milner  12.10-12.15  Panel Discussion Lunch Available (3rd Floor Foyer)  SESSION 106 (Grand Ballroom East, 3rd Floor)  AORTIC AND CAROTID TOPICS TOO IMPORTANT TO MISS (4 34-MINUTE TALKS)  Moderators: Sean P. Lyden Enrico Ascher Frank J. Veith  AORTIC AND ITS BRANCHES TOPICS  12.15-12.20  When And How To Treat Isolated Visceral Artery Dissections Paulo E. Ocke-Reis  12.20-12.25  Venous Anomalies Around The Neck Of AAAs – How To Diagnose Them: What Are The Pitfalls And How To Deal With Injuries If They Occur Ramesh K. Tripathi  12.25-12.30  Techniques For Improving Proximal Landing Zones For TEVARS And Aortic Dissections Involving The Aortic Arch; Parallel Grafts And Extra-Anatomic Bypasses R. Clement Darling III  12.30-12.35  Upper Extremity Access For Complex Endo AAA Repairs Is Associated With A High Rate Of Stroke: From A VQI Study Mark L. Schermerhorn  12.35-12.40  DEBATE: The Vast Majority Of Failed EVARs Can Be Treated Endovascularly Ross Milner  12.40-12.45  DEBATE: Not So: Many Failed EVARs Are Best Repaired By Open Conversion Michel S. Makaroun  12.45-12.50  12.50-12.55  Value Of 3D Flow Models To Analyze The Cause Of Failure After F/EVAR And TEVAR Maciej L. Dryjski		C,
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12:55- 1:00 Panel Discussion	12:50-12:55	Failure After F/EVAR And TEVAR
	12:55- 1:00	Panel Discussion

#### CAROTID TOPICS

	CAROTID TOPICS
1:00 - 1:05	Optimal Anticoagulant And Antiplatelet Treatment For Symptomatic And Asymptomatic Patients With Carotid Stenosis
	Anne L. Abbott
1:05 - 1:10	How To Use The Silk Road TCAR Device In The Treatment Of Tandem Carotid Lesions: Technical Tips And Results Michael C. Stoner
1:10 - 1:15	Radiation And Carotid Stenosis: What Is The Relationship And How Is Radiation Stenosis Best Treated When Asymptomatic And When Symptomatic Cynthia K. Shortell
1:15 - 1:20	Mini-Incision CEA With Standard Or Eversion Techniques: How To Do It Safely: It's Better Than Transfemoral CAS Or TCAR Alan M. Dietzek
1:20 - 1:25	Tips And Tricks For Successful TCAR And When Is CEA And Best Medical Treatment Better Than TCAR Jeffrey Jim
1:25 - 1:30	Panel Discussion
	End of Program N
	VEITHsymposium continues with the Hemodialysis
	Access Program in the Grand Ballroom West.
PROGRAM IMPROV ACCESS	no (sessions 107-112) ING OUTCOMES IN HEMODIALYSIS
	lroom West, 3rd Floor
	nders: Larry A. Scher
Course Lea	Anton N. Sidawy Haimanot (Monnie) Wasse
8:00 — 8:05	Introduction
	Anton N. Sidawy Larry A. Scher
	Haimanot (Monnie) Wasse
<b>IMPORT</b>	17 (Grand Ballroom West, 3rd Floor) ANT ISSUES IN HEMODIALYSIS ACCESS ITE TALKS)
	s: Larry A. Scher Anton N. Sidawy
8:06 — 8:13	Role Of The Surgeon In Educating Patients For
0.00	Hemodialysis Access  Dori R. Schatell
8:14 — 8:21	Update On VasQ Device: The Economic Impact Of Better Fistulasse Ellen D. Dillavou
8:22 — 8:29	FLEX Vessel Prep System: Clinical Outcomes And Utility In HD Access Practice John E. Aruny
8:30 — 8:37	Selecting The Right Access In The Chronically Hypotensive Patient Aisha Shaikh
8:38 — 8:45	Current KDOQI Recommendations Regarding Use Of Ultrasound In Hemodialysis Access Charmaine Lok
8:46 — 8:53	Management Of Central Venous Stenosis: To Stent Or Not To Stent

Theodore F. Saad

9.05 - 9.12 Use Of Plastic Cannulas For Hemodialysis Access Dori R. Schatell 9.13 - 9.20 Wearable Technology For Remote Patient Monitoring During Home Hemodialysis Richard F. Neville 9.21 - 9.28 Point Of Care Ultrasound In The Practice Of Nephrology Vandana D. Niyyar 9.29 - 9.36 Challenges To Endovascular AV Fistula Maturation Neghae Mawla 9.37 - 9.44 Novel Hemostatic Device For Management Of Hemodialysis Access Cannulation Sites Sundaram Ravikumar 9.45 - 9.52 Creating Successful Hemodialysis Access In Children William Jennings 9.53 - 10.03 Panel Discussion 10.04 - 10.25 Break - Visit Exhibits (3rd Floor) SESSION 108 (Grand Ballroom West, 3rd Floor) MORE IMPORTANT ISSUES IN HEMODIALYSIS ACCESS (7-MINUTE TALKS) Moderators: Haimanot (Monnie) Wasse Evan C. Lipsitz 10.26 - 10.33 DEBATE: Reducing Flow In High Flow AV Fistulas In Asymptomatic Patients Moro Salifu 10.34 - 10.41 DEBATE: There Is No Role For Routine Flow Reduction In High Flow Fistulas Surendra Shenoy 10.42 - 10.49 Use Of The Frame FR External Stent For AV Fistula Flow Reduction Robert Shahwerdyan 10.50 - 10.57 Post-Transplant Management Of The Hemodialysis Access Haimanot (Monnie) Wasse 10.58 - 11.05 Telemedicine For Vascular Access Patients - Preop Planning, Postoperative Visits, Access Maintenance Aisha Shaikh 11.06 - 11.13 Outpatient Vascular Access Disasters: Help! John E. Aruny 11.14 - 11.24 Panel Discussion SESSION 109 (Grand Ballroom West, 3rd Floor) MINISYMPOSIUM ON PREVENTION AND MANAGEMENT OF DIALYSIS ACCESS STEAL SYNDROME Moderators: John E. Aruny Clifford M. Soles 11.25 - 11.32 Avoiding Hemodialysis Access Induced Ischemia: An Ounce Of Prevention Is Worth A Pound Of Cure Williams Jennings 11.33 - 11.40 Modified Banding For Treatment Of Vascular Access Induced Digital Ischemia Yana Etkin		
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Induced Digital Ischemia	11:33-11:40	Steal And Neuropathy
	11:41-11:48	Induced Digital Ischemia

11:49-11:56	Vascular Access Hemorrhage: Prevalence, Prevention And Medicolegal Issues Theodore F. Saad
11:57-12:04	Panel Discussion
12:05- 1:00	Lunch Break – Visit Exhibits And Pavilions (3rd Floor)
POLITICA HEMODI	O (Grand Ballroom West, 3rd Floor) AL, ECONOMIC AND LEGAL ISSUES IN IALYSIS ACCESS (7-MINUTE TALKS) SE Larry A. Scher Anton N. Sidawy
1:00 — 1:07	How To Survive In An OBL In The Current Economic Climate Clifford M. Sales
1:08 — 1:15	Who Is Best Served By Using An Early Cannulation AV Graft David Kingsmore
1:16 — 1:23	Clinical And Economic Strategy For Building An Outpatient Peritoneal Dialysis Program Jason K. Wagner
1:24 - 1:31	Miniaturized Kidney Dialysis: Issues And Challenges With Blood Compatibility And Vascular Access Buddy D. Ratner
1:32 — 1:39	CMS Reevaluation Of Cost And Quality Measures For Hemodialysis Access Evan C. Lipsitz
1:40 — 1:50	Panel Discussion
NEW TEG (7-MINU)	(Grand Ballroom West, 3rd Floor) CHNOLOGIES FOR AV ACCESS CREATION TE TALKS) :: Haimanot (Monnie) Wasse Theodore F. Saad
1:51 — 1:58	Use Of The Surfacer Device (Inside-Out Technique) In Occluded Central Veins: What Are The Results <i>Dirk M. Hentschel</i>
1:59 — 2:06	Choosing The Best Endo AV Fistula Device Robert Shahverdyan
2:07 — 2:14	Holly <sup>TM</sup> : A Fully Implantable Continuous Hemodialysis Device <i>Dirk M. Hentschel</i>
2:15 — 2:22	A Non-Biologic Vascular Prosthesis That Heals And Integrates: Applications For Hemodialysis Access Buddy D. Ratner
2:23 — 2:30	Polymer Based Platform For Endogenous Tissue Restoration: FIH Study Of The aXess Dialysis Graft Frans L. Moll (PowerPoint Presentation With Synched Audio)
2:31 — 2:38	Amplifi Vein Dilatation For AV Access Surendra Shenoy
2:39 - 2:49	Panel Discussion
UPDATE HEMODI	2 (Grand Ballroom West, 3rd Floor) ON CLINICAL CHALLENGES IN IALYSIS ACCESS (7-MINUTE TALKS) 5: Larry A. Scher Surendra Shenoy
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2:50 — 2:57	Results Of A Randomized Multicenter AV Fistula Trial Using An Intraoperative Sirolimus Formulation To Improve Clinical Outcomes Sriram S. Iyer
2:58 — 3:05	Tips And Tricks For Avoiding Early Access Failure William Jennings
3:06 — 3:13	Percutaneous Sutureless Anastomosis In Hemodialysis Access: How I do It <i>John R. Ross, Sr.</i>
3:14 — 3:21	Creating The Perfect Basilic Vein Transposition Karl A. Illig
3:22 — 3:29	The Challenges Of Obesity In Hemodialysis Access <i>Mark G. Davies</i>
3:30 — 3:37	HeRO Graft Modifications To Optimize Hemodialysis Access Jesse Garcia
3:38 — 3:45	LIMA Steal Syndrome After Ipsilateral AV Fistula – Is It Real Jeffrey E. Indes
3:46 — 3:53	Challenges To Endovascular AV Fistula Cannulation Deborah Brouwer-Maier (PowerPoint Presentation With Synched Audio)
3:54-4:05	Panel Discussion
	End of Program O

Anne·L: Abbott, MD, PhD, FRACP ·· Melbourne, Australia

**Dorothy B. Abel, BSBME** New York, New York

**Cherrie Z. Abraham, MD** *Portland, Oregon* 

**Steven D. Abramowitz, MD** *Washington, District Of Columbia* 

**Christopher J. Abularrage, MD** *Baltimore, Maryland* 

**Ali F. AbuRahma, MD** Charleston, West Virginia

**Zach AbuRahma, DO** Charleston, West Virginia

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