

Tuesday – Saturday, November 19-23, 2024



PROGRAM OUTLINE AT A GLANCE

TUFSDAY PROGRAMS

Program A (SESSIONS 1-8)

7:02 A.M. - 6:02 P.M.

Progress In The Treatment Of Diseases Of The Heart Valves And The Thoracic And Abdominal Aorta

Location: Grand Ballroom East, 3rd Floor

Program B (SESSIONS 9-16)

6:47 A.M. - 5:59 P.M.

Progress In Wearable Remote Measurement Devices, 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 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 Approach

Location: Trianon Ballroom, 3rd Floor

Program C-2 (SESSIONS 19-22)

1:00 P.M. - 6:06 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. - 6:05 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 PM

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 Topics

Location: Trianon Ballroom, 3rd Floor

THURSDAY PROGRAMS

Program G (SESSIONS 47-54)

6:56 A.M. - 6:00 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)

7:00 A.M. - 5:59 P.M.

New Or Improved Devices For: Standard EVAR 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 64-73)

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

Location: Trianon Ballroom, 3rd Floor

Program J (SESSIONS 74-78)

7:30 A.M. - 12:15 P.M

Multidisciplinary Stroke Prevention And Treatment

Location: Murray Hill Suites, 2nd Floor

FRIDAY PROGRAMS

Program K (SESSIONS 79-86)

6:40 A.M. - 5:32 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 87-94)

6:52 A.M. - 4:56 P.M.

New Developments In The Treatment Of Popliteal Disease; 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 95-105)

7:30 A.M. - 6:45 P.M.

Deep Venous Disease

Location: Trianon Ballroom, 3rd Floor

SATURDAY PROGRAMS

Program N (SESSIONS 106-109)

7:00 A.M. - 12:06 P.M.

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

Location: Grand Ballroom East, 3rd Floor

Program O (SESSIONS 110-115)

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

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

Program P (SESSIONS 116-125)

6:50 A.M. - 5:35 P.M.

Advances In Vascular Imaging And Diagnosis Location: Murray Hill Suites, 2nd Floor



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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. **Boston Scientific** Cook Medical, LLC Cordis Endospan enVVeno Medical Gore & Associates **InspireMD** Medtronic, Inc. Penumbra **Philips** Reflow Medical Shockwave Medical, Inc. Silk Road Medical Terumo Aortic VentureMed Group Inc Xeltis



VASCULAR FELLOWS & RESIDENTS CAREER DEVELOPMENT PROGRAM

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

Friday, November 22, 2024 • 8:00 a.m. - 5:00 p.m. • New York Hilton-Midtown, New York City Americas Hall 1, 3rd Floor | This is a Non-CME activity.

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.

We are pleased to offer the 9th VEITHsymposium Fellows & Residents Career Development Program this year. This Program is dedicated to bringing together the June 2025 graduating vascular trainee and their potential employers right at the time that the trainees are looking for their first post-training position. The Career Development Program will also provide an environment for career counseling and easy interaction between vascular trainees, senior vascular specialists, and potential employers.

WHO SHOULD ATTEND:

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

ACKNOWLEDGMENTS

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

Gore & Associates, Medtronic, Inc, Shockwave Medical, and Terumo Aortic.

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

Program Director:
James F. McKinsey, MD
Program Co-Director:
Anahita Dua, MD, MS, MBA





Vascular Fellows & Residents Career Development Curriculum

	Vascul	lar Fellows & Residents C	areer Dev	elopment Curriculum
8	3:00 – 8:05	WELCOME	11:20 -11:25	Discussion
		James F. McKinsey, MD Anahita Dua, MD, MS, MBA	11:25 -11:33	Balancing Your Practice With
	SESSION 1	SELECTING YOUR FIRST JOB		Industry Relationships: From A Physician's Viewpoint
		James F. McKinsey, MD		Darren B. Schneider, MD
		Anahita Dua, MD, MS, MBA	11:33 -11:38	Discussion
8	3:05 – 8:13	What Does A Vascular Practice Look Like In The 21st	11:38 -11:44	What Industry Is Looking For In Collaboration With Vascular
		Century; Academic, Hybrid Or Community Practice? Brian G. DeRubertis, MD		Interventionalists Mr. Samuel Arbefeuille
8	3:13 - 8:18	Discussion	11:44-11:49	Discussion Buffet Lunch Available
8	3:18 - 8:26	What To Prioritize In Your First	Luncheon	INNOVATIONS IN VASCULAR
		Practice? Karan Gara, MD	Program	INTERVENTIONS
8	3:26 - 8:31	Discussion	12:05-12:20	Medtronic Data & Services: SmartPlan Pro
8	3:31 - 8:39	Things I Wish I Had Known		Ross Milner, MD
		When I Was Selecting My First Job	12:20-12:35	Insights To Developing Your Advanced Endovascular Skillset For Branched Technologies
,	3:39 – 8:44	Nicole Ilanzo, MD Discussion		During Your Fellowship
	3:44 - 8:52	How Much Should I Get Paid?		Alyssa J. Pyun, MD
		How Do I Know If I Am Getting Paid Fairly? Sherene Shalhub, MD, MPH	12:35-12:50	Advanced VTE Management With Lightning Flash 2.0 Computer Assisted Vacuum Thrombectomy (CAVT)
8	3:52 – 8:57	Discussion		Daniel K. Han, MD
9	SESSION 2	UNDERSTANDING OPTIONS AND INTERVIEWING FOR YOUR FIRST JOB	SESSION 4	LONG-TERM PRACTICE MANAGEMENT
,	Moderators:		Moderators:	James F. McKinsey, MD
	3:57 – 9:05	Anahita Dua, MD, MS, MBA Interviewing 101: The Right	1:05 – 1:13	Anahita Dua, MD, MS, MBA Incorporating Social-Media Into
٠	3.37 - 9.03	Questions To Ask When Interviewing		Your Vascular Practice Daniel K. Han, MD
		Jeffery J. Siracuse, MD, MBA	1:13 - 1:18	Discussion
	9:05 – 9:10 9:10 – 9:18	Discussion How To Find Out What The	1:18 – 1:26	Opportunities And Resources For Your Career Available To You
	7.10 - 7.10	Practice Is Really Like And Understand The Options Within The Practice		From the Society for Vascular Surgery Keith D. Calligaro, MD
		Anahita Dua, MD, MS, MBA	1:26 - 1:31	Discussion
9	9:18 – 9:23	Discussion	1:31 - 1:39	Opportunities And Resources
9	9:23 – 9:31	Do I Need To Do An Added Fellowship In Advanced Aortic Interventions Before Starting		For Your Career Available To You From Your Regional Vascular Societies Brajesh K. Lal, MD
		My First Job Adam Beck, MD	1:39 - 1:44	Discussion
9	9:31 - 9:36	Discussion	1:44 - 1:52	Tips And Tricks To Managing
9	9:36 - 9:51	How To Negotiate Your First Contract		Family, Wellness And Career Development
		James F. McKinsey, MD	1:52 - 1:57	Vincent I. Rowe, MD Discussion
	9:51 - 9:56 9:56 -10:10	Panel Discussion With Q&A Break - Visit Your Sponsors'	1:57 - 2:05	Medical Malpractice – How To
3	7.30-10.10	Exhibits And Pavilions (2nd and 3rd Floors)		Avoid A Lawsuit O. William Brown, MD, JD
9	SESSION 3	FIRST YEAR IN PRACTICE	2:05 – 2:10	Discussion
/	Moderators:	James F. McKinsey, MD Venita R. Chandra, MD	2:10 - 2:18	Incorporating Diversity, Inclusiveness And Equality Into Your Practice
1	10:10 -10:18	Keys To Building A Successful Practice		Dawn M. Coleman, MD
		Venita R. Chandra, MD	2:18 - 2:23	Discussion
1	10:18 -10:23	Discussion	2:23 – 2:31	Tips And Tricks To Manage Malignant Settings, Toxic
1	10:23 -10:47	Setting Up Dedicated Vascular Programs Within A Vascular Practice		Leadership, Difficult Partners And Turf Wars Shang Loh, MD
	10:23-	-10:31 PERT Programs Frank R. Arko, MD	2:31 - 2:36	Discussion
	10:31-	-10:39 Wound Care John C. Lantis, MD	2:36 - 2:44	Financial Planning Consideration, Tips And Tricks For The Young Surgeon
	10:39-	-10:47 Aortic Center Ross Milner, MD	2:44 - 2:49	Alan B. Lumsden, MD Discussion
1	10:47 -10:52	Discussion	2:44 - 2:49	Career Options Throughout
		Building Your Practice: Research Considerations	2.45 2.57	Your Career Peter Gloviczki, MD
		Michael C. Stoner, MD	2:57 - 3:02	Discussion
	1:00 - 11:05	Discussion Vascular Procedure Billing	3:02 – 4:15	Gloval IVUS Case Competition at VEITHsymposium
1	11.03-11:20	And Coding: What Do You Absolutely Need To Know Going Into Your First Job? Sean P. Roddy, MD	4:15 - 5:15	Interactive Cocktail Reception With Faculty, Fellows/Residents, Potential Employers, And Industry

SPECIAL CME, NON-CME, AND OTHER INDUSTRY SPONSORED EVENTS

(PLEASE VISIT WWW.VEITHSYMPOSIUM.ORG FOR AN UPDATED LISTING OF THESE ACTIVITIES.)

TUESDAY, NOVEMBER 19, 2024

ABBOTT

Luncheon: Esprit™ BTK: A Paradigm Shift in BTK Treatment

Time 12:00 P.M. – 1:00 P.M. **Location:** Americas Hall 1, 3rd Floor

GORE & ASSOCIATES

Lunch Symposium: Clinical Commercial Experience Using the GORE® EXCLUDER® Thoracoabdominal Branch Endoprosthesis (TAMBE)

Time: 12:00 P.M.

Location: Mercury Rotunda & Ballroom, 3rd Floor

PENUMBRA, INC.

Innovations in Venous & Arterial Thrombectomy: Penumbra Computer

Assisted Vacuum Thrombectomy (CAVT)

Time: 12:00 P.M.

Location: Murray Hill Suite, 2nd Floor

WEDNESDAY, NOVEMBER 20, 2024

BD

Lunch Symposium - Real World PAD Strategies for Complex Lesions

Time: 12:00 P.M. – 1:00 P.M. Location: Nassau Suites, 2nd Floor

CONTROVERSIES IN VENOUS DISEASE MANAGEMENT

Time: 10:00 A.M. – 12:00 P.M. Location: Americas Hall 1, 3rd Floor

EnVVeno Medical Corporation (NVNO)

Luncheon Symposium: VenoValve Surgical Replacement Venous Valve

1 Year Pivotal Trial Results Time: 12:00 P.M. – 1:30 P.M. Location: Madison Suite, 2nd Floor

GORE & ASSOCIATES

Lunch Symposium: Make Your Case: A Bare Metal vs. Covered Stent

Debate

Time: 12:00 P.M.

Location: Mercury Rotunda & Ballroom, 3rd Floor

INTERNATIONAL SOCIETY FOR WOMEN VASCULAR SURGEONS

Time: 7:30 A.M. – 9:30 A.M. Location: Americas Hall 1, 3rd Floor

MEDTRONIC

Lunch Symposium: New Evidence on Atherectomy for Vessel

Preparation Prior to Drug-Coated Balloon Therapy: Conversation with

the Experts

Time: 12:00 P.M. – 1:00 P.M. **Location:** Medtronic Pavilion, 2nd Floor

Location: Meditonic Pavillon, 2nd Floor

PENUMBRA, INC.

Ruby Embolization Coils: Innovation & Precision of Mechanical

Occlusion Technology Time: 12:00 P.M.

Location: Murray Hill Suite, 2nd Floor

SHOCKWAVE MEDICAL

Lunch Symposium: This Vessel is a Rock: Debating the Best Way to

Treat Vascular Calcium

Time: 12:00 P.M. - 1:00 P.M.

Location: Sutton Parlor Center, 2nd Floor

SPECIAL CME, NON-CME, AND OTHER INDUSTRY SPONSORED EVENTS

VVV@Vs - Venous Venous and More Venous $^{\circledR}$ WORKSHOP at VEITHsymposium $^{\circledR}$

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: 1:30 P.M. – 6:00 P.M. Location: Americas Hall 1, 3rd Floor

THURSDAY, NOVEMBER 21, 2024

BD

Lunch Symposium - Advancing Venous Care: My Past vs. Present

Algorithm

Time: 12:00 P.M. – 1:00 P.M. Location: Nassau Suites, 2nd Floor

GORE & ASSOCIATES

Lunch Symposium - Navigating Difficult Landing Zones in the

Abdominal and Thoracic Aorta

Time: 12:00 P.M.

Location: Mercury Rotunda & Ballroom, 3rd Floor

MEDTRONIC

Lunch Symposium: The Importance of Continuous Seal in the Dynamic

Aortic Environment

Time: 12:00 PM – 1:00 P.M.

Location: Medtronic Pavilion, 2nd Floor

WORLD FEDERATION OF VASCULAR SURGERY at VEITHsymposium



Moderators: Palma M. Shaw, MD, MBA, RVPI, Wei Zhou, MD and 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 8 member societies consisting of federated, national and affiliate vascular societies.

Time: 1:00 P.M. – 2:45 P.M.

Location: Murray Hill Suites, 2nd Floor

BEST-CLI- NEW DATA AND EVOLVING PERSPECTIVES



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

A Showcase sampling of the most impactful Secondary Analyses from BEST-CLI, including a discussion of novel statistical methodology; updates on BASIL-3 and SWEDE-PAD, and a highlight panel discussion, intentionally moving beyond the open-endo debate and led by leading endovascular specialists, "Who Should Not Get Endo".

Time: 3:15 P.M. – 5:15 P.M.

Location: Murray Hill Suites, 2nd Floor

SPECIAL CME, NON-CME, AND OTHER INDUSTRY SPONSORED EVENTS

FRIDAY, NOVEMBER 22, 2024

BD

Lunch Symposium: AV Access: Techniques, Challenges, and

Maintenance Strategies

Time: 12:00 P.M. – 1:00 P.M. **Location:** Nassau Suites, 2nd Floor

FELLOWS & RESIDENTS CAREER DEVELOPMENT PROGRAM

Time: 8:00 A.M – 5:15 P.M. **Location:** Americas Hall 1, 3rd Floor

GLOBAL IVUS CASE COMPETITION at VEITHsymposium

Join us for the first Global IVUS Case Competition at VEITH and the grand finale of the 2024 Societal IVUS case competition. Six finalists will be presenting their winning IVUS case for a chance to be named the global IVUS champion and win \$1,000.

Time: 3:00 P.M. – 4:15 P.M.

Location: Americas Hall 1, 3rd Floor

J. LEONEL VILLAVICENCIO LATIN-AMERICAN PROGRAM 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. Best Presentation Award will be given.

Time: 7:30 A.M. – 5:00 P.M. Location: Murray Hill Suites, 2nd Floor

OPEN VASCULAR TECHNIQUES

Time: 3:00 P.M. – 5:00 P.M. Location: Americas Hall 1, 3rd Floor

OUTPATIENT FACILITIES FOR VASCULAR PROCEDURES AND CLINICAL RESEARCH

Time: 1:00 P.M. – 2:40 P.M. **Location:** Americas Hall 1, 3rd Floor

THE SVS/ESVS/NICE/ACC/AHA DEBATES ON GUIDELINES FOR THE MANAGEMENT OF ABDOMINAL AORTIC ANEURYSMS

Time: 10:30 A.M. – 12:00 P.M. **Location:** Americas Hall 1, 3rd Floor

SATURDAY, NOVEMBER 23, 2024

GORE & ASSOCIATES

Lunch Symposium - Clinical Evidence and Considerations in Dialysis

Access Creation and Revision to Enhance Clinical Outcomes

Time: 12:00 P.M.

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.

In addition, by having numerous short (5-6 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 1,300 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
- Incorporate the Vascular Laboratory into the management of patients with vascular disease
- Identify and compare noninvasive tests that are available to aid in the diagnosis of vascular disease

GENERAL INFORMATION

TARGET AUDIENCE

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

ASSOCIATE FACULTY GLOBAL PODIUM PRESENTATIONS

Wednesday – Friday, November 20-22, 2024 **Location:** Gramercy Suite East, 2nd Floor

In order to have more younger and less familiar vascular surgeons and vascular specialists play an active role as Associate Faculty at our meeting, we have initiated programs whereby they can present their scientific work at the podium. Vascular surgeons and vascular specialists participating in these programs will have submitted abstracts for a podium presentation, and these abstracts will be posted on our website. 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.

ONE-DAY COMPONENT SESSIONS WILL BE HELD AS FOLLOWS:

Multidisciplinary Stroke Prevention and Treatment

Thursday, November 21, 2024

Location: Murray Hill Suites, 2nd Floor

Improving Outcomes in Hemodialysis Access

Saturday, November 23, 2024

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 50.75 *AMA PRA Category 1 Credits*TM. 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 50.75 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

GENERAL INFORMATION

the American Board of Surgery's Continuous Certification program. It is the CME activity provider's responsibility to submit learner 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 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, 2025.**

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 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.

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, select option 3.

HOTEL AND TRAVEL

A block of rooms has been reserved at the conference rate of \$369 plus taxes per night. This rate is available until the block is filled or until October 10, 2024. *Please request the VEITH rate when reserving your accommodations.*

New York Hilton-Midtown (Symposium Venue)

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: VEITHtravel@amexgbt.com

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TO GET THE MOST OUT OF YOUR VEITHsymposium EXPERIENCE, WE INVITE YOU TO DOWNLOAD THE VEITH 2024 MOBILE APP



With the App, you can:

- Access the Full VEITHsymposium 2024 Agenda
- Explore Event Programs, Faculty, Exhibitors & More
- View the Interactive Floorplan for Guidance
- Create a Personal Daily Schedule (with Reminders!)
- Download & Print Topical Course Materials
- Make Plans to Attend Non-CME Activities
- Receive the Latest News and Updates

To download the app, please visit to the Google Play Store or the Apple App Store and search for VEITH 2024. Or scan the QR Code to download the app to your Android, iPhone, iPad or Tablet.



This QR Code works for both Android and iOS devices.

TUESDAY, NOVEMBER 19, 2024

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 TUESDAY PROGRAMS

PROGRAM A (SESSIONS 1-8)

Progress In The Treatment Of Diseases Of The Heart Valves And The Thoracic And Abdominal Aorta

7:02 A.M. - 6:02 P.M.

Location: Grand Ballroom East, 3rd Floor

PROGRAM B (SESSIONS 9-16)

Progress In Wearable Remote Measurement Devices, 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 Vascular Surgery And Treatment Of Aortic Coarctation 6:47 A.M. - 5:59 P.M.

Location: Grand Ballroom West, 3rd Floor

PROGRAM C-1 (SESSIONS 17-18)

Management Of Pulmonary Embolism: The Ultimate Approach

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

Location: Trianon Ballroom, 3rd Floor Course Leader: Michael R. Jaff, DO

PROGRAM C-2 (SESSIONS 19-22)

Interesting Topics Related To Lower Extremity Occlusive Disease

And Its Treatments 1:00 P.M. - 6:06 P.M.

Location: Trianon Ballroom, 3rd Floor

PROGRAM A (SESSIONS 1-8)

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

Grand Ballroom East, 3rd Floor

SESSION 1 (Grand Ballroom East, 3rd Floor)
PROGRESS IN TRANSCATHETER VALVE
REPLACEMENT AND TREATMENT OF ASCENDING
DISEASE

Moderators: Roxana Mehran, MD Hazim I. Safi. MD

Hazim J. Safi, MD Rodney A. White, MD

7:02 – 7:07 Opening Remarks *Frank J. Veith, MD*

TRANSCATHETER HEART VALVES

7.08 – 7:13 Update On The Status Of Transcatheter Mitral And Tricuspid Valve Replacement/Repair

Roxana Mehran, MD

7:14 – 7:19 Udate On The Current Status Of Transcatheter Aortic Valve Replacement (TAVR)

Ali B. Khoynezhad, MD, PhD

THE ASCENDING AORTA AND ARCH

7.20 – 7.25 Novel Tri-Branch Endograft For Repair Of Ascending Aorta And Arch Aneurysms And Dissections: What Makes It Different And Initial Clinical Results Qingsheng Lu, MD

7:26 — 7:31	Progress In Endovascular Treatment Of Type A Aortic Dissections (TAADs) In 2024: What Is Here And What Is Coming: Experience With Ascending Aortic Endografting Including The Gore Device In The ARISE II Trial
7:32 — 7:37	Eric E. Roselli, MD Ali Azizzadeh, MD Current Status Of Endo-Bentall Procedures In Patients: Review Of Early Clinical Experiences: How Can It Be Done Without Left Ventricular Access Stephan Haulon, MD
7:38 — 7:43	Endovascular Graft Repair Of Ascending Aortic Dissections Including Endo-Bentall Procedures And Physician Modified Double Fenestrated Endografts (PMEGs) With Captiva From Medtronic: When Is It Possible And Results Ludovic Canaud, MD, PhD
7:44 - 7:50	Panel Discussion
PROGRES	(Grand Ballroom East, 3rd Floor) SS IN THE TREATMENT OF AORTIC ARCH AND AORTIC DISSECTIONS
	Alan B. Lumsden, MD
	Ali B. Khoynezhad, MD, PhD
7:50 — 7:55	Mark A. Farber, MD Primary And Redo Open Aortic Arch Repair: When Will They And Will They Not Be Replaced By Endo And Hybrid Techniques
7:56 — 8:01	Anthony L. Estrera, MD Current Status Of Hybrid Repair Of Aortic Arch And Thoracic Aortic Aneurysms Using ThoraFlex (Hybrid) And Relay Devices For Frozen Elephant Trunk (FET)
8:02 — 8:07	And TEVAR: Indications And Results Joseph S. Coselli, MD Endovascular Arch Repair With Cook 2 Or 3 Branched
0:02 — 0:07	Devices For Lesions Involving The Whole Aortic Arch: When Are They Indicated; When Contradicted And Tips For Making Them Work
8:08 — 8:13	Mark A. Farber, MD Comparative Late Results With 2-Branched Endograft (Relay – Terumo) And A Single Branched Device (Nexus – Endospan) Versus Debranching For
8:14 — 8:19	Treatment Of Zone 0 Arch Lesions Toru Kuratani, MD, PhD Current Status And Results Of The Terumo Relay
	Branched Endograft Device For Aortic Arch Lesion Repairs: Unique Features And When Will It Be Available In The US Vicente Riambau, MD, PhD
8:20 — 8:25	Ciro Ferrer, MD, PhD Martin Czerny, MD Update On 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, MD Himanshu Patel, MD
	Joseph E. Bavaria, MD
8:26 — 8:31	Physician Modified Endografts (PMEGs) For Treating Aortic Arch Lesions: When Are They Superior Options And Technical Tips
	Sukgu Han, MD

- 8.32 8.37 How Best To Treat Aortic Dissections (Type A Or Type B) Extending Into The Arch, Its Branches Or Ascending Aorta; When Open, When Endo, When Hybrid: More Updated Meta-Analysis Comparison Between Medical, Surgical And Endovascular Treatment In 2024 I-Hui Wu, MD, PhD
 8.38 8.43 How Best To Treat Aortic Arch Lesions: Is There Still
- 8:38 8:43 How Best To Treat Aortic Arch Lesions: Is There Still Ever An Indication For Chimney Endografting With OTS Devices For Aortic Arch Lesions, And How To Make Them Work Without Gutter Endoleaks: What Are Other Options For Emergent Patients Nicola Mangialardi, MD
- 8.44 8.49 Comparison Of Indication And Results For Treatment Of Aortic Arch Lesions With Branched Endografts, Fenestrated Endografts, Parallel Stent-Grafts, Hybrid Repairs, Or Open Repairs

 Chang Shu, MD
- 8.50 8.55 Techniques For Cerebral Protection During Ascending Aortic Arch Repairs – Endo And Open: The Value Of CO₂ Device Flushing Tilo Kölbel, MD, PhD
- 8:56 9:02 Panel Discussion

SESSION 3 (Grand Ballroom East, 3rd Floor)
PROGRESS IN THE ENDOVASCUL A

PROGRESS IN THE ENDOVASCULAR TREATMENT OF THE ASCENDING AORTA, AORTIC ARCH, AORTIC DISSECTIONS, REPORTING STANDARDS AND CLASSIFICATION SYSTEMS, STABILISE, GUIDELINES AND MORE

Moderators: Joseph V. Lombardi, MD, MBA Michael D. Dake, MD Christoph A. Nienaber, MD, PhD

- 9:02 9:07 Current Status Of The Relay Ascending Aortic Endograft From Terumo: What Makes It Different Adam Beck, MD
- 9:08 9:13 How And Why The Aortic Arch Is An Unhospitable Location For Endovascular Graft Treatments

 Piotr M. Kasprzak, MD
- 9:14 9:19 The SVS-STS Aortic Dissection Reporting Standards And Classification System: What Is It; What Are Its Advantages; How Widely Is It Being Adopted Joseph V. Lombardi, MD, MBA
- 9.20 9.25 What Is The STABILISE Concept For Treating Acute And Chronic TBADs By Disrupting The Intimal Flap By Overdilating The Distal Bare Stent: Current Results, And When Should It Be The Treatment Of Choice Jean-Marc Alsac, MD, PhD
- 9.26 9.31 New Developments With The STABILISE Technique For Acute And Subacute TBADs: How Is The STABILISE Registry Helping: Technical Tips, And Precautions

 Germano C.G. Melissano, MD

 Andrea Kahlberg, MD

 Roberto L.V. Chiesa, MD
- 9:32 9:37 Dual Lumen Interventions To Promote False Lumen Thrombosis In Chronic Aortic Dissections: The FLIRT Procedure: What Is It; When Is It Useful; How To Do It Christoph A. Nienaber, MD, PhD
- 9.38 9.43 When Is Open Repair For Post-Dissection TAAAs The Best Treatment Option Especially For Preventing SCI: Will There Be Surgeons Trained To Do It Hazim J. Safi, MD

9:44 — 9:49	Advances In Endograft Repair Of The Ascending Aorta Without And With Involvement Of The Aortic Valve (Endo-Bentall): What Lesions Are Or Will Be Suitable: World Clinical Experience With Endo-Bentall To Date Ali B. Khoynezhad, MD, PhD Shahab Toursavadkohi, MD
9:50 — 9:55	Distal Stent-Graft Induced New Entry Tears (SINEs): Do They Prevent Aortic Remodeling After TBAD Treatment: How To Prevent And Treat Them Chun Che Shih, MD, PhD
9:56-10:01	High Risk Features Of TEVAR For TBAD: Did The AHA Guidelines Get Them Right: TEVAR Outcomes For TBAD Are Worse Than For Degenerative Aneurysms
10:02-10:07	James H. Black, III, MD Multicenter International Study Shows That There Is A Role For Endovascular Treatment Of Complex Aortic Diseases From Marfans, Loeys-Dietz And Ehlers- Danlos Syndromes: What Is This Role Anders Wanhainen, MD, PhD
10:08-10:14	Panel Discussion
10:14-10:24	Break - Visit Exhibits And Pavilions (2nd and 3rd
	Floors)
OF TBAD	(Grand Ballroom East, 3rd Floor) EW DEVELOPMENTS IN THE TREATMENT s, THORACIC AORTIC DISEASE AND
	Oabdominal aneurysms (taaas)
Moderators:	Jean M. Panneton, MD
	Michael J. Jacobs, MD Eric L.G. Verhoeven, MD, PhD
10:24-10:29	When Should Hybrid Treatment (Endograft Proximal
10:30-10:35	+ Open Distal) Be The Preferred Treatment For TAAA Repair: Advantages And Technical Tips Gilbert R. Upchurch, MD New Strategies And Indications For Open TAAA Repair Including Failed EVAR And F/B/EVAR:
10:36-10:41	Technical Tips And Results Andrea Kahlberg, MD Germano C.G. Melissano, MD Roberto L.V. Chiesa, MD Open Repair Of TAAAs Following TEVAR Treatment Of TBAD: Technical Tips: Will This Procedure Survive The Endovascular Revolution
	Michael J. Jacobs, MD
10:42-10:47	Retrograde Inner Branched Devices (From Cook)
	To Treat Aortic Arch Lesions: Indications, Value,
	Technical Tips And Initial Experience Marcelo Ferreira, MD
10:48-10:53	Endovascular Treatment Of Ascending Aortic Diseases;
10.40 10.00	What Can Be Done Currently: What Cannot And
	What Does The Future Hold: From A Systematic
	Review
	Santi Trimarchi, MD, PhD
10:54-10:59	Update On F/B/EVAR For Degenerative And Post TBAD TAAAs: The Value Of Inner Branched Devices:
	Value Of The BeBack Catheter (Bentley) To Cross The
	Dissection Flap And For Other Purposes
	Eric L.G. Verhoeven, MD, PhD
	Athanasios Katsargyris, MD
11:00-11:05	Late Results Of Patients With TAADs Treated By Open
	Repair Of The Ascending Aorta And Arch With A FET
	And Completed By The STABILISE Technique Distally <i>Jean-Marc Alsac, MD, PhD</i>

11:06-11:12

Panel Discussion

11:12-11:17	Endovascular Procedures After Open Surgical Type
	A Aortic Dissection (TAAD) Repair Are Essential For Long-Term Success: Why And What Procedures Are
	Necessary
	Götz M. Richter, MD, PhD
11:18-11:23	The Anatomical And Hemodynamic Bases Of
	Obstruction In Branch Arteries And The True Lumen
	With Aortic Dissections: How They Can Be Treated
	Before And After Closure Of The Primary Tear: What Is The Value Of Fenestration Or Septotomy
	David M. Williams, MD
11:24-11:29	Endovascular Thermal Septotomy Of The Dissection
	Flap With An Electrocautery Activated Guidewire To
	Treat Chronic TBADs: When And How Does It Work:
	Complications And When It Should Be Avoided:
	Technical Tips And How To Avoid Pitfalls Carlos H. Timaran, MD
	Gustavo S. Oderich, MD
11:30-11:35	Update On The Current Status Of A Catheter Aortic
	Septotomy Device For Treating Aortic Dissections
	By Cutting The Septum From Below: Yes, There Is A
	Downside To Other Septotomies That Cut The Septum
	From Above Ramon Berguer, MD, PhD
11:36-11:41	In Situ Fenestration (Septotomy) Versus Multiple
	Chimneys For Urgent Endovascular Treatment Of
	Aortic Arch Pathologies: Technical Tips
	Ivo Petrov, MD, PhD
11:42-11:47	Update On Laser Fenestrated Endografts For Aortic
	Emergencies: Technical Tips And Long-Term Results <i>Jean M. Panneton, MD</i>
11:48-11:53	The Endopatch: A Promising Solution For
	Endovascular Repairs For Aortic Dissections: What Is
	It And How Does It Work: Clinical Experience
44 54 40 00	Wei Guo, MD (PowerPoint Presentation With Synched Audio)
11:54-12:00	Panel Discussion
12:00- 1:00	Lunch Break - Rhinelander Gallery, 2nd Floor Visit Exhibits And Pavilions (2nd and 3rd Floors)
	Visit Exhibits And Favinons (2nd and 3rd Pioors)
	(Grand Ballroom East, 3rd Floor)
	VELOPMENTS IN ABDOMINAL AORTIC
	SM (AAA) ETIOLOGY, DETECTION,
	ENT AND EVAR
Moderators:	Caron B. Rockman, MD Michel Makaroun, MD
	Grace J. Wang, MD, MSCE
1:00 - 1:05	Unexpected Small Bowel Necrosis When Performing
	EVAR In Patients With Visceral Artery (SMA)
	Occlusive Disease: How To Predict It And How To Avoid It
	Karan Garg, MD
	Neal S. Cayne, MD
	Carlos H. Timaran, MD
1.0/ 1.11	Frank J. Veith, MD
1:06 — 1:11	New Medical Therapies For AAA Disease And An Update On The Metformin Trials For Slowing
	Aneurysm Growth
	Ronald L. Dalman, MD
1:12 - 1:17	DEBATE : The Safe-AAA Study Emphasizes The

Importance Of Ongoing Surveillance And Continuing EVAR Device Risk: Some EVAR Endografts Have Been

Found To Have More Late Risks Than Others

Philip P. Goodney, MD, MS Eric A. Secemsky, MD, MSc

- **DEBATE:** Patient Survival After EVAR Was NOT 1:18 - 1:23Improved By Compliance With Surveillance Protocols: The EVAR Surveillance Paradox: From A Systematic Meta-Analysis: What Is The Explanation George A. Antoniou, MD, PhD, MSc 1:24 - 1:29Computer Analysis Of CT Factors Determining AAA Wall Weakness/Strength Of Areas In AAAs Predicts Rupture Risk Independent Of Size And Post EVAR Neck Behavior: The ViTAA System Randy D. Moore, MD Value Of Properly Performed Ch/EVAR For Juxtarenal 1:30 - 1:35AAAs: Results From A Single Center With The Longest Available Follow-Up Confirm Long-Term Safety And Effectiveness: Technique Is Vital Joost van Herwaarden, MD, PhD **Panel Discussion** 1:36 - 1:411:42 - 1:47Update On An Interesting New Endovascular Technology (Nectero - Intra-Sac Drug After AAA Balloon Isolation) To Slow AAA Growth: Updated Clinical Results Of The First-In-Human Trial Andrew Holden, MBChB Daniel G. Clair, MD Venkatesh G. Ramaiah, MD 1:48 - 1:53Short And Long-Term Results For Endovascular Therapy For Infected Aortic Aneurysms At Various Levels: An 18-Year, >163-Case Experience: EVAR Can Work Boonprasit Kritpracha, MD 1:54 - 1:59Size Thresholds For Repair Of AAAs Are Wrong On The Low Side: Data From Medicare And The VQI Indicate That Rupture Risk Only Increases With AAAs Over 6-6.9 cm David H. Stone, MD Sal Scali, MD Bjoern D. Suckow, MD Update On Long-Term Results From The Dream 2:00 - 2:05RCT Comparing EVAR With Open Repair For AAAs Suitable For Both: Adverse Neck Anatomy (Short, Wide, Angulated) Was Associated With Increased Reintervention And Mortality Rates Equally After Open And Endo Repairs: Neck Dilatation Only Occurs After Open Repair And In EVARs With Self-Expanding Endografts: How Should This Influence Today's Treatment Jan D. Blankensteijn, MD 2:06 - 2:11**DEBATE:** Mortality 30 Days And 3-5 Years After Endo Repair Of Juxtarenal And Complex AAAs In The UK Compass Trial (Real World) Is Double That Of Open Repairs: Why Is This So And Why Is This Different Than Results From US Single Centers And The ARC Registry S. Rao Vallabhaneni, MD Michael P. Jenkins, MBBS, BSc, MS 2:12 - 2:17**DEBATE:** Mortality Early And 3-5 Years After Endo
 - 2:12 2:17 **DEBATE:** Mortality Early And 3-5 Years After Endo Repair Of Juxtarenal And Complex AAAs In The US Aortic Research Consortium (ARC) Registry Is Less Than That Reported For Comparable Open Repairs Andres Schanzer, MD
 - 2:18 2:23 Why EVAR Should Be Preferred Over Open Repair In Young Patients With Suitable Anatomy: From A Meta-Analysis Of >50,000 Patients

 George A. Antoniou, MD, PhD, MSc
 - 2:24 2:30 Panel Discussion
 - 2:30 2:40 Break Visit Exhibits And Pavilions (2nd and 3rd Floors)

SESSION 6 (Grand Ballroom East, 3rd Floor)
MORE ABOUT TBADs, AAAs AND EVAR,
STANDARD AND COMPLEX: UPDATES ON
PHYSICIAN MODIFIED ENDOGRAFTS (PMEGs) AND
GUIDELINES

Moderators: Maarit Venermo, MD, PhD Dittmar Böckler, MD Qingsheng Lu, MD

- 2:40 2:45 Initial Experience With A Uniquely Designed Device (The Chinese Fabulous Stent) Designed To Treat TBADs: What Makes It Different And How Does It Work

 Weiguo Fu, MD
- 2.46 2.51 Why The NICE AAA Guidelines Favoring Open Repair Over EVAR Are The Way They Are: Bias Has Played A Role As It Does In Many Things: Randomized Controlled Trials (RCTs) Can Be Misleading Frans L. Moll, MD, PhD
- 2.52 2.57 Cancer Is Associated With AAAs: It's A Chicken And Egg Paradox; Which Came First, The Aneurysm Or The Cancer: Is It Related To Diagnostic And Therapeutic Radiation

Natzi Sakalihasan, MD, PhD

- 2:58 3:03 The Link Between Elevated Cancer Risk And EVARs: Evidence From Biological Studies And A Large Population Based Data Analysis Bijan Modarai, PhD
- 3:04 3:09 What Do The New ESVS Guidelines For Elective And Emergent AAA Treatment Add To Vascular Practice In 2024: Big Changes Are Coming Ian Loftus, MD
- 3:10 3:15 The SVS/ESVS/NICE/ACC/AHA Guidelines On AAA: Agreements, Conflicting Recommendations, And Omissions
 Peter Gloviczki, MD
- 3:16 3:21 Evolving Role For Physician Modified Endografts (PMEGs) For Complex AAA Repair: Why Are Poor Results Underreported And When Are They Justified *Javairiah Fatima*, MD
- 3:22 3:27 Hospitals Without Investigational Device Exemptions Have Worse Outcomes After PMEGs: These Are Often Unreported Caitlin W. Hicks, MD, MS
- 3:28 3:33 PMEGs For Juxta-And Para-Renal Aneurysms Come Out Of The Shadows And Are Now Mainstream: When Should They NOT Be Done Benjamin W. Starnes, MD
- 3:34 3:39 DEBATE: Population Screening With Ultrasound For Early Detection Of AAA Is Recommended For Women Age >65 Years, With A History Of Smoking Or A Family History Of AAA, And For Women Age >75 Years, With A History Of Smoking If They Are Otherwise In Good Health

 Marc L. Schermerhorn, MD
- 3.40 3.45 DEBATE: Population Screening With Ultrasound For Early Detection Of AAA Is NOT Recommended For Women Age >65 Years, Even If They Are Former Or Current Smokers Or Have Cardiovascular Disease Janet T. Powell, MD, PhD
- 3:46 3:56 Panel Discussion

SESSION 7 (Grand Ballroom East, 3rd Floor)
MORE NEW DEVELOPMENTS IN THE TREATMENT
OF THORACIC AORTIC PATHOLOGY

Moderators: Mark A. Farber, MD Manju Kalra, MBBS Thomas L. Forbes, MD

- 3:56 4:01 Use Of TEVARs For TBAD In Patients With Connective Tissue Disease: When Should They Be Done: How Durable Are They And When Are Open Repairs Better

 Martin R. Back, MD
- 4:02 4:07 How To Treat Aortic Dissections With Entry Tears In The Aortic Arch: Can They Be Treated Endovascularly: Technical Tips
 Santi Trimarchi, MD, PhD
- 4:08 4:13 With Aortic Dissections, How Can Pressures In The True And False Lumens Be Measured And How Should They Influence Treatment Decisions David M. Williams, MD
- 4:14 4:19 Chronic False Lumen Expansion In Aortic Dissection Requires Complete Flow And Pressure Exclusion: How To Do It With CT Guided Interventions Including Embolization With Polymer Plugs (From Shape Memory) Or Other Methods Götz M. Richter, MD, PhD
- 4:20 4:25 How To Classify Acute Aortic Intramural Hematomas (IMHs): How And When To Treat Them Safely By TEVAR: When And Why Are They So Dangerous Jean M. Panneton, MD
- 4:26 4:31 Causes And Management Of Retrograde Aortic Dissection After TEVAR For TBAD Boonprasit Kritpracha, MD
- 4:32 4:37 A Novel Off-The-Shelf (OTS) Endograft For All Aortic Arch Pathologies: What Makes It Unique And Promising: Early Clinical Results Wayne W. Zhang, MD
- 4:38 4:43 Long-Term (>5 Years) Good Results Of The Medtronic Valiant Captiva Endografts For TEVAR In TBAD Patients: Advantages And Disadvantages Nimesh Desai, MD, PhD Joseph E. Bavaria, MD
- 4:44 4:49 Motor Evoked Potentials (MEPs) Provide Highly Reliable Information On Spinal Cord Function During Open Thoracoabdominal Aortic Aneurysm (TAAA) Repair: Advantages, Requirements And Why It Hasn't Worked For Some Groups

 Michael J. Jacobs, MD
- 4:50 4:56 Panel Discussion

SESSION 8 (Grand Ballroom East, 3rd Floor)

MORE NEW DEVELOPMENTS REGARDING TBADS AND TEVAR: NEED FOR AND TIMING OF TEVAR FOR ACUTE UNCOMPLICATED TYPE B AORTIC DISSECTION (uTBADs) (For Important Related Talks See Session 8 In Our 2023 Program On Our Website VEITHsymposium.org)

Moderators: Jon S. Matsumura, MD William D. Jordan Jr., MD Jean M. Panneton, MD

4:56 – 5:01 DEBATE ROUND 2 (Updated From 2023): With Uncomplicated TBADs, The Case For Early TEVAR With Extensive Aortic Coverage In Most Patients: New Data

William D. Jordan Jr., MD

5:02 – 5:07 DEBATE ROUND 2 (Updated From 2023): With Uncomplicated Acute TBADs, The Case For Waiting 2-6 Weeks From Onset For TEVAR And Then Limiting Aortic Coverage: New Data Mark A. Farber, MD

DO WE NEED AN RCT COMPARING TEVAR VERSUS

DO WE NEED AN RCT COMPARING TEVAR VERSUS MEDICAL TREATMENT FOR uTBADs

- 5.08 5.13 Fate Of Medically Managed Acute TBADs: A Plea For Early Repair In Most Patients Including Those Who Appear Uncomplicated Fabio Verzini, MD, PhD
- 5:14 5:19

 TEVAR For Acute TBAD Significantly Reduces
 All-Cause Mortality At 3-Years Compared To Best
 Medical Management: New Data On Outcomes Of
 All Dissections In England: We Really Don't Need A
 Randomized Trial
 Jonathan R. Boyle, MD
- 5:20 5:25

 TEVAR To Treat Uncomplicated Acute/Subacute Type
 B Aortic Dissections (uTBADs) Must Still Be Justified
 By An RCT: Is An Appropriate One Possible Or Not
 Colin D. Bicknell, MD
- 5:26 5:31 Scandinavian (SUNDAY) RCT Comparing TEVAR Versus Medical Therapy In uTBAD: Justification, Rationale And Current Status

 Jacob Budtz-Lilly, MD, PhD
- 5:32 5:37 Status Of The Multicenter RCT (IMPROVE-AD) To
 Evaluate The Value Of TEVAR Versus Medical Therapy
 In Acute And Subacute uTBADs: Rationale And
 Recruitment To Date
 Firas F. Mussa, MD
 Panos Kougias, MD, MSc
 - 5:38 5:43 Advances In The Endovascular Repair Of Complex Aortic Dissections: Timing Of Interventions, Adjunctive Techniques And Outcomes Rami Tadros, MD
- 5:44 5:49 What Does Endovascular Aortic Repair Do To Cardiac And Coronary Artery Function: Does The Position Of The Graft In The Aorta Make A Difference: Do We Need A Compliant Endograft Rachel E. Clough, PhD, FRCS
- 5:50 5:55

 Re-Entry Specific Endovascular Therapy (RESET), i.e.
 TEVAR Plus Dealing With Re-Entry Tears: It Promotes
 False Lumen Thrombosis, Aortic Remodeling And
 Improves Outcomes: How To Do It
 Jean M. Panneton, MD
- 5:56 6:02 Panel Discussion End of Program A

PROGRAM B (SESSIONS 9-16)
PROGRESS IN WEARABLE REMOTE MEASUREMENT DEVICES, 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 VASCULAR SURGERY AND TREATMENT OF AORTIC COARCTATION Grand Ballroom West, 3rd Floor

SESSION 9 (Grand Ballroom West, 3rd Floor)

PROGRESS IN WEARABLE VASCULAR ROBOTICS, LAPAROSCOPY, GUIDANCE SYSTEMS AND SIMULATION

Moderators: Barry T. Katzen, MD Willem Wisselink, MD

Matthew J. Eagleton, MD

6:47 – 6:50 Opening Remarks *Enrico Ascher, MD*

WEARABLE REMOTE VASCULAR MONITORING SYSTEMS

- 6:50 6:55 Vascular Research And Innovation Priorities In The UK Should Be Applied Everywhere: They Include Wearable Sensors, And Telehealth Systems

 Celia Riga, MD
- 6:56 7:01 Remote Measurement Of Blood Flow In Any Artery
 Or Graft Using An Implantable Ultrasonic Sensor With
 Transmission To The Internet (From IntelVasc): How
 Does It Work, And Experimental Data
 Jean Bismuth, MD
- 7:02 7:07 Inside Out: Next Generation Technology That Transmits Physical Intelligence And Parameters Continuously From Within The Patient: How Will It Help In Vascular Treatment Barry T. Katzen, MD
- 7.08 7.13 Integrating Robotic Systems Back Into Vascular Surgery: Do Not Abandon Them Yet: We Must Be Involved Alan B. Lumsden, MD
- 7.14 7.19 Robotic And Laparoscopic Vascular Surgery: Where Do They Stand And Why Bother Continuing To Consider Them Willem Wisselink, MD

RADIATION REDUCING IMAGING GUIDANCE TECHNIQUES

7.20 – 7.25 Updated Experience With The Fiberoptic RealShape (FORS From Philips) System: Results From The Completed Multicenter LEARN Registry: What Are Its Limitations And Can FORS Work With Very Complex Anatomy

Joost van Herwaarden, MD, PhD

7.26 – 7.31 Improved Fiberoptic Based Imaging With The FORS
Lumiguide System (Philips): Fiberoptic Sensors Within
A Guidewire And A Special 3D Hub Allow Imaging
Guidance With Any Catheter: How Does It Work And
Experience

Carlos H. Timaran, MD

- 7.32 7.37 Update On The 3D Radiation Free Electromagnetic Intraoperative Positioning System (IOPS) From Centerline For Endovascular Guidance: New Developments, Advantages And Limitations Matthew J. Eagleton, MD Francis Caputo, MD
- 7.38 7.43 Cydar Technology And Its AI Modifications Enhance The Accuracy Of Fusion For F/B/EVAR For Complex AAA Treatment: How Does It Work And Reduce Radiation: Advantages And Limitations Murray L. Shames, MD Ross Milner, MD
- 7:44 7:50 Panel Discussion

SESSION 10 (Grand Ballroom West, 3rd Floor)
NEW DEVELOPMENTS IN CAROTID DISEASE
AND ITS TREATMENT; DIFFERING VIEWS ON
TREATMENT OF ASYMPTOMATIC CAROTID
STENOSIS (ACS) AND CAROTID SCREENING

Moderators: Ali F. AbuRahma, MD Bruce A. Perler, MD, MBA Thomas G. Brott, MD

7:50 – 7:55

A Data-Driven Look At Interventions For Carotid Disease: Do They Represent Exuberant Enthusiasm, Financial Opportunity For Industry, Doctors And Institutions, Or A Path To Excessive Risk Colin P. Derdeyn, MD

CORONARY DISEASE IN CAROTID STENOSIS (CS) PATIENTS

- 7.56 8.01 Ten-Year Results Of A Multicenter RCT Showing
 The Long-Term Benefit In CS Patients Of Pre CEA
 Coronary Angiography And Treatment In Preventing
 Late MIs And Death
 Jean-Baptiste Ricco, MD, PhD
- 8.02 8.07

 Asymptomatic Coronary Artery Disease Is Deadly In Patients With Carotid Stenosis (CS) Whether The CS Is Treated Invasively Or Not: An RCT Shows How The Coronary Artery Disease Can Be Quantified And Treated To Reduce Myocardial Infarction And Improve Long-Term Survival

 Dainis K. Krievins, MD

 Christopher K. Zarins, MD
- 8:08 8:13 Practice Patterns (CAS, CEA, Medical Treatment, TCAR) For Treatment Of CS Are Changing Dramatically From Those In Previous RCTs: Evidence From A Population Based Analysis Christian A. Behrendt, MD

VALUE OF CAROTID SCREENING

- 8:14 8:19 The Case Against Screening For ACS (Like Lifeline):
 Who Profits: It May Lead To Unnecessary And Possibly
 Harmful Invasive Treatments
 Anne L. Abbott, MD, PhD (PowerPoint Presentation With
 Synched Audio)
- 8:20 8:25 Screening For ACS: Its Main Value Is In Guiding
 Lipid Treatment: How Low Should LDL-Cholesterol
 (LDL-C) Be Pushed And What Will It Do To Carotid
 Plaques
 Stavros K. Kakkos, MD, PhD
 Andrew N. Nicolaides, MS, FRCS
- 8:26 8:32 Panel Discussion

DIFFERING VIEWS ON TREATMENT OF ACS AND REIMBURSEMENT POLICY

- 8:32 8:37 Plaque Progression In Asymptomatic Carotid Stenosis (ACS) Patients On Best Medical Therapy (BMT): Does It Mandate Invasive Therapy Or Continued BMT Gianluca Faggioli, MD
- 8.38 8.43 DEBATE: All ACS Patients Are Best Treated Medically: Invasive Treatment Causes More Harm Than Good And Should Not Have Been Widely Reimbursed By CMS
 - Anne L. Abbott, MD, PhD (PowerPoint Presentation With Synched Audio)
- 8:44 8:49 **DEBATE**: Not So: About 25% Of ACS Patients Can Benefit From CEA Or CAS And Should Be So Treated And Reimbursed Accordingly Bruce A. Perler, MD, MBA

8:50 — 8:55	DEBATE: Both Views Are Wrong: Severe ACS Has Declined As A Cause Of Ischemic Stroke To <1%
	Per Year: So Only <5% Of ACS Patients Should Be Treated Invasively And Reimbursed Accordingly: Can Computer Analysis Of Plaque CT Imaging Help
8:56 — 9:01	Robert W. Chang, MD CMS Expansion Of Reimbursement For CAS For Asymptomatic Disease: An Expensive And Potentially
	Harmful Decision: How Could CMS Disregard The Evidence, And Why Couldn't They Wait For CREST 2 Results
	Joseph L. Mills, MD
9:02 — 9:07	Is Transfemoral CAS Being Overused One Year After CMS Increased Reimbursement For Treating
	Asymptomatic Carotid Stenosis Sean P. Lyden, MD
9:08 — 9:14	Panel Discussion
9:15 — 9:27	Break – Visit Exhibits And Pavilions (2nd and 3rd Floors)
SESSION 11	(Grand Ballroom West, 3rd Floor)
	BOUT CAROTID DISEASE: UPDATE ON
	TREATMENT FOR ACUTE STROKES
	Klaus D. Mathias, MD
0.00 0.00	Allan L. Brook, MD
9:28 — 9:33	A System For Performing TCAR Percutaneously: How Does It Achieve Flow Reversal And How Can It Be
	Done Safely
	Wayne W. Zhang, MD
9:34 — 9:39	Acute Stroke Management: How Can A Vascular Surgeon Lead A Team That Provides Optimal Care And
	What Are Its Advanced Features
9:40 — 9:45	Laura Capoccia, MD, PhD The Current Status Of Intracranial Stroke
7:40 — 7:43	Thrombectomy: What's New With Devices And
	Indications: Technical Tips
9:46 — 9:51	Allan L. Brook, MD With Acute Strokes, What Is New With Endovascular
7:40 — 7:31	Intracranial Techniques And Indications For Arterial
	Clot Removal: How Can Improved Imaging, A
	Dedicated System With Artificial Intelligence (AI) And
	Intraarterial Thrombolysis With Alteplase (Genentech) Help: The Importance Of Keeping Stroke Patients Flat
	Adnan H. Siddiqui, MD, PhD
	L. Nelson Hopkins, MD
9:52 — 9:57	Current Optimal Treatment When Carotid Stenosis In The Neck Coexists With Intracranial Disease Or Clot
	Klaus D. Mathias, MD
9:58-10:03	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, MD, PhD
10.07 10.00	L. Nelson Hopkins, MD
10:04-10:09	With Tandem Carotid Lesions In The Neck And Supra- Aortic Trunks, How Should Acutely Symptomatic
	Patients Be Managed: What About Asymptomatic
	Patients With Such Lesions
	Francesco Speziale, MD W. Darrin Clouse, MD
10:10-10:15	Current Optimal Treatment Of Carotid Artery
	Dissections: When Anticoagulation And Antiplatelet
	Drugs; When CAS And When Open Surgery:
	Technical Tips Klaus D. Mathias MD

10:16-10:21 How Should Acute Stroke Severity (NIHSS) Influence
Timing To Therapeutic Intervention: For TPA Use; For
CEA And CAS; For Intracranial Arterial Clot Removal:
It Matters To Neurologic Outcomes
Hernan A. Bazan, MD

10:22-10:30 Panel Discussion

SESSION 12 (Grand Ballroom West, 3rd Floor)
PROGRESS IN THE TREATMENT OF AORTIC AND
AORTOILIAC OCCLUSIVE DISEASE; HYPOGASTRIC

REVASCULARIZATION

Moderators: Daniel G. Clair, MD Wayne W. Zhang, MD Zhong Chen, MD

10:30-10:35 The VORTEC Technique For Aortofemoral Bypass: What Is It And How To Do It: Why Is It Especially Valuable For Heavily Calcified And Scarred Aortas *Mario L. Lachat, MD*

10:36-10:41 What Is New In The Treatment Of External Iliac Artery Endofibrosis In Committed Cyclists: Is There A Role For Endovascular Treatment

Margaret Tracci, MD, JD

10.42-10.47 Iliac Endofibrosis In Elite Cyclists: What Are Its Symptoms Despite Normal Pulses: Diagnosis Is Difficult: Diagnostic Workup: Surgical Treatment And Prognosis

Jason T. Lee, MD

10.48-10.53

DEBATE: How To Treat Chronic Flush Juxtarenal Aortic Occlusions Endovascularly With Safety: Endo Is The Way To Go: How To Do It And What Is The Role Of Lysis

David J. Minion, MD

10.54-10.59 DEBATE: Not So: Open Or Hybrid Repairs Are Best For Complex Juxtarenal Aortoiliac Occlusive Disease: Technical Tips

Yamume Tshamba MD

Yamume Tshomba, MD Value Of Shockwaye Int

11:00-11:05

Value Of Shockwave Intravascular Lithotripsy (IVL)
For Calcified Aortoiliac Occlusive Disease Treatment
And For Facilitating Large Bore Access With Narrowed
Calcified Iliac Arteries
Daniel G. Clair, MD

11:06-11:12 Panel Discussion

COVERED ENDOVASCULAR RECONSTRUCTION OF THE AORTIC BIFURCATION (CERAB) PROCEDURE

11:12-11:17 Long-Term Outcomes Of The CERAB Technique
In Patients With Aortoiliac Occlusive Disease:
Advantages, Limitations, And Stent-Graft Choice: How
Can CERAB Be Used To Treat Juxtarenal Occlusions
Michel Reijnen, MD, PhD
Peter C.J. Goverde, MD

11:18-11:23 The CERAB Technique: From A Niche Procedure To A Better General Solution For Complex AortoIliac Occlusive Disease Based On The Updated Results Of The Physician Initiated Multicenter BeGlory Registry: Technical Tips And Precautions

Maria A. Ruffino, MD

11:24-11:29 Impact Of Female Gender And Smaller Arteries On Outcomes Of Endovascular Treatment Of Aortoiliac Occlusive Disease: When Is Open Repair Indicated Franco Grego, MD

11:30-11:35 Treatment Of Isolated Infrarenal And Pararenal Aortic Stenosis: Why Results Are Worse In Women: When Stents; When Stent-Grafts; When Open Bypasses Sigrid Nikol, MD

TUESDAY SESSIONS 12–13

44.04.44.44	
11:36-11:41	Radiation Free CERAB Procedures Are Possible Using FORS Technology (Philips) With Its 3-D Hub: How
	Is It Done And Technical Tips: Clinical Experience In
	Over 20 Patients
	Barend M.E. Mees, MD, PhD
11:42-11:47	Can Mesh Covered Stents Replace Stent-Grafts For
	The Treatment Of Complex Iliac Occlusive Lesions:
	Advantages And Disadvantages
	Piotr Myrcha, MD
11:48-11:53	How Can The VORTEC Technique Be Used To Simplify
	Hypogastric Revascularization With Open Repair Of
	Difficult Iliac Aneurysms: How To Do It Zoran Rancic, MD, PhD
11:54-12:00	Panel Discussion
12:00- 1:00	Lunch Break - Rhinelander Gallery, 2nd Floor
12.00	Visit Exhibits And Pavilions (2nd and 3rd Floors)
SESSION 13	(Grand Ballroom West, 3rd Floor)
	NCEPTS; MACHINE LEARNING AND
	AL INTELLIGENCE (AI); TO DECREASE
	ON (See Also Sessions 9 And 90)
	Kak Khee Yeung, MD, PhD
	Barry T. Katzen, MD
1:00-1:05	Revolutionizing Vascular Surgery: Navigating The
	AI And Multiomics Frontiers For Precision Care:
	Advantages And Limitations
1:06 — 1:11	Sherif A.H. Sultan, MD, PhD Why RCTs In Vascular Surgery In The Era Of AI Are
1:00 — 1:11	Unnecessary, Useless And Possibly Unethical
	Willem Wisselink, MD
1:12 - 1:17	What Is The VASCUL-AID Platform Which Uses AI
	To Predict Cardiovascular Disease Progression In
	AAA And Lower Extremity Lesion Patients (PAD):
	Interesting Findings To Date
1:18 - 1:23	Kak Khee Yeung, MD, PhD Focus On Radiation Protection During Simulation-
1:10 - 1:23	Based Training Improves Both Correct Behavior And
	Procedural Performance: Proven By A Randomized
	Comparison
	Lars B. Lonn, MD, PhD (PowerPoint Presentation With Synched Audio)
1:24 - 1:29	How Can AI Markedly Reduce Radiation, Contrast
	Usage And Complications For Complex TAAA Repair
	With PMEGs
100 100	Mahmoud B. Malas, MD, MHS
1:30 — 1:35	Use Of Virtual Reality 3-D Visualization With A Headset For Preoperative Optimization For Treatment
	Of Visceral Artery Aneurysms
	Dominique Fabre, MD, PhD
1:36 - 1:41	Benefit Of AI And AAA Volume Measurements After
	EVAR And F/B/EVAR: How Do They Improve Care
4.40 4.47	Stephan Haulon, MD
1:42 — 1:47	Is Image Fusion Advanced Guidance For Complex And
	Simple Aortic Procedures Really Worthwhile And Cost Effective: Why Is It A Question And Do We Need A
	Trial
	Rachel E. Clough, PhD, FRCS
1:48 - 1:53	Update On Siemens I-Flow: A New Intelligent
	Technology To Improve The Endo Treatment Of Lower
	Extremity Occlusive Disease And Predicting Stroke
	Risk With Carotid Disease; How Does It Work And
	How Reliable Is It Ravi K. Veeraswamy, MD
1:54 — 1:59	Update On How An AI Based Prediction Of Rupture
	Risk Is Better Than Size Based Predictions
	Jes S. Lindholt, MD

Remote Endovascular Proctoring And Mentoring Using

	An Augmented Reality Virtual Platform: How Does It Work And Experience Cherrie Z. Abraham, MD
2:06 — 2:12	Panel Discussion
ISSUES IN INDEPEN	(Grand Ballroom West, 3rd Floor) MPORTANT TO VASCULAR SURGERY'S DENCE, IDENTITY AND TRAINING; WE GET A COVID-19 VACCINATION
	James C. Stanley, MD
2:12 — 2:17	Keith D. Calligaro, MD Jerry Goldstone, MD Why Vascular Surgery Needs To Have An Independent
2:12 - 2:11	Board And What Is The SVS Doing To Pursue This Goal Joseph L. Mills, MD
2:18 — 2:23	What Is The ABVS Doing To Pursue An Independent Board And Why Hasn't It Done More Timur P. Sarac, MD
	Jeffrey H. Hsu, MD Sean P. Lyden, MD Alan M. Dietzek, MD
2:24 — 2:29	Why An Independent Board Of Vascular Surgery Was So Helpful To Patients And To Vascular Surgeons In France After It Was Created In 1974: What Organizations Resisted It And How Was The Resistance Overcome Jean Pierre Becquemin, MD
2:30 — 2:35	Five Issues Affecting Vascular Surgeons' Bargaining Power: Would An Independent Vascular Board Help Margaret Tracci, MD, JD
2:36 — 2:41	Status Of Cardiology's Independent Board For Cardiovascular Medicine: What Will Be Its Impact On Vascular Surgery And How Would An Independent Vascular Surgery Board Counteract This Alan M. Dietzek, MD
2:42 - 2:47	The SVS Public Marketing Initiative: Why It Will Help Overcome Vascular Surgery's Clouded Identity: In View Of Cardiology's Initiative To Obtain An Independent Board, Shouldn't Vascular Surgery Get One Too Matthew J. Eagleton, MD
2:48 - 2:53	Keith D. Calligaro, MD Joseph L. Mills, MD The Importance Of Mentorship In Vascular Surgery:
	How Best To Achieve It Malachi Sheahan, MD
2:54 — 2:59	How To Handle Bad Clinical Outcomes And Other Professional And Personal Adversity: It Really Matters For A Vascular Surgeon/Specialist
3:00 — 3:05	John F. Eidt, MD Evolution And Current Status Of Integrated Vascular

Surgery Residency (0+5) Training: Advantages And Limitations: A View From One Of The First Such

Important Developments In Vascular Surgery Training Programs: Changes In Numbers And Quality Of 0+5 And 5+2 Trainees; Why We Need More Qualified Vascular Surgeons And How Are We Going To Get

Trainees

Them

3:06 - 3:11

Daniel K. Han, MD

Dawn M. Coleman, MD

2:00 - 2:05

ce

3:12 — 3:17	How Safe And Effective Are Current COVID-19 Drugs For Vaccination: When And How Often Should Vascular Surgeons/Specialists Get Them If They Are <50, >50, >65 Or >75 Clayton J. Brinster, MD
3:18 - 3:24	Panel Discussion
3:25 - 3:35	Break - Visit Exhibits And Pavilions (2nd and 3rd
	Floors)
PROGRES AND REN	(Grand Ballroom West, 3rd Floor) SS IN THE TREATMENT OF VISCERAL IAL ARTERY DISEASE (For Important Related
	ession 15 In Our 2023 Program On Our Website
VEITHsymp	
Moderators:	Manju Kalra, MBBS Dawn M. Coleman, MD
	Timur P. Sarac, MD
3:36 - 3:41	Natural History Of Untreated Visceral And Renal
	Artery Aneurysms (Renal, Splenic, Celiac, Etc.): From
	Large Series With Mid-To Long-Term Follow Up
	Caron B. Rockman, MD
3:42 - 3:47	Multidisciplinary Consensus Statement On The
	Management Of Pediatric Renovascular Hypertension, Renal Artery Stenosis And Midaortic Syndrome:
	Optimal Conduits, Techniques And Results
	Dawn M. Coleman, MD
	James C. Stanley, MD
3:48 - 3:53	Treatment Of Visceral And Renal Artery Aneurysms:
	Technical Tips And When To Use Coils, Covered
	Stents Or Uncovered Stents: How To Maintain Critical
	Arterial Flow Paulo E. Ocke Reis, MD, PhD
3:54 - 3:59	Why Is Open Repair Always Indicated To Treat Long
0.04 0.07	Complex SMA Occlusions: Technical Tips
	Armando Mansilha, MD, PhD
4:00-4:05	Endovascular Mesenteric Artery Revascularization:
	Has It Improved Outcomes Of Acute Mesenteric
	Ischemia: Stents Versus Covered Stents
	Manju Kalra, MBBS
4:06 — 4:11	When Should SMA Endovascular Embolectomy Be The Standard Of Care: How To Do It
	Loay S. Kabbani, MD, MHSA
4:12 - 4:17	Visceral Artery Aneurysms: When To Treat Invasively,
	At What Size: When Endo, When Open
	Rabih A. Chaer, MD
4:18-4:23	Open Versus Endovascular Treatment For Visceral
	Artery Aneurysms And Acute Mesenteric Ischemia:
	When Is Open Surgery Mandatory
4:24 — 4:29	Timur P. Sarac, MD
4:24 — 4:27	Gastroduodenal Aneurysms Associated With Celiac Artery Occlusion – Patterns, Treatment (Endo Versus
	Open); Technical Tips To Maintain Flow Through The
	Gastroduodenal And Results
	Keith D. Calligaro, MD
	Samy S. Nitecki, MD
4:30 - 4:36	Panel Discussion
SESSION 16	(Grand Ballroom West, 3rd Floor)
	ON OPEN VASCULAR SURGICAL

PROCEDURES; PROGRESS IN THE TREATMENT
OF AORTIC COARCTATIONS (For Important Related Talks See Session 16 In Our 2023 Program On Our Website VEITHsymposium.org)

Moderators: R. Clement Darling III, MD James H. Black, III, MD Peter Gloviczki, MD

OPEN VASCULAR SURGERY

What Are The Symptoms And What Is Current Open

Surgical Treatment For Arterial Nutcracker Syndrome
(Compression Of The Duodenum By The SMA)
Keith D. Calligaro, MD
What Is ERAS (Early Recovery After [Open Aortic]
Surgery): How To Do It With AAAs And What Are Its
Advantages And Limitations
W. Anthony Lee, MD
Strategies And Technical Challenges In The Open
Treatment Of Large TAAAs In Patients With
Connective Tissue Disorders
James H. Black, III, MD
How To Perform All Vascular Operations Through
Small Incisions: Technical Tips, Why Is It
Advantageous And Results: When Is It Contraindicated
Robert M. Proczka, MD, PhD
The Role Of Open AAA Repair In The Era Of F/EVAR
And EVAR: Technical Tips
Francis Caputo, MD
The Right Retroperitoneal Approach For Open AAA
Repair: When To Do It, Advantages And Technical
Tips

Benign *Kimihiro Komori, MD, PhD*5.18 – 5.24 Panel Discussion

5:12 - 5:17

Ashraf Mansour, MD

4:36 - 4:41

UPDATE ON COARCTATION TREATMENT

Update On Renal Consequences Of Left Renal Vein Division During Open AAA Repair: It Is Not Always

- 5.24 5.29 Endovascular Repair Of Aortic Coarctation: Balloon Angioplasty Versus Bare Stents Versus Covered Stents And When Is Open Repair Necessary Tilo Kölbel, MD, PhD
- 5:30 5:35 Open And Endovascular Treatment Of Aortic Arch Aneurysms Following Aortic Coarctation Repairs Germano C.G. Melissano, MD Andrea Kahlberg, MD (Presenter) Roberto L.V. Chiesa, MD
- 5:36 5:41 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, MD, MBA
- 5:42 5:47 Technical Tips And Lessons Learned To Make In Situ Vein Bypasses More Effective And Better R. Clement Darling III, MD
- 5.48 5.53 Anterior Lumbar Spine Exposure: Technical Tips And How To Avoid Pitfalls

 Timothy K. Liem, MD, MBA
- 5:54 5:59 Panel Discussion End of Program B

PROGRAM C-1 (SESSIONS 17-18)

MANAGEMENT OF PULMONARY EMBOLISM: THE ULTIMATE APPROACH

Trianon Ballroom, 3rd Floor

SESSION 17 (Trianon Ballroom, 3rd Floor)

MANAGEMENT OF PULMONARY EMBOLISM: THE ULTIMATE APPROACH – PART 1

Moderator: Michael R. Jaff, DO

7:00 – 7:05 Introduction To The Symposium

Frank J. Veith, MD

7:05 — 7:15	Welcome And Introduction Michael R. Jaff, DO
7:15 — 7:25	The Basics Of Pulmonary Embolism Diagnosis: What Is The Role Of The History, Exam, Biomarkers
	Raghu Kolluri, MD
7:25 — 7:35	Echocardiography Is All You Need To Manage Acute Submassive PE David M. Dudzinski, MD
7:35 — 7:45	CTA Is All You Need To Manage Acute Submassive PE Brian B. Ghoshhajra, MD, MBA
7:45 — 7:55	Testing For Cancer And Other Hypercoagulable States In PE: Why, When, And What Tests Aditya Sharma, MD
7:55 — 8:10	Medical Treatment Of PE: When, Why, For How Long, And How Can I Remember
8:10 — 8:25	Geno J. Merli, MD An Overview Of Clinical Trials For PE: Will Any Of Them Move The Needle Rachel Rosovsky, MD, MPH
8:25 — 8:35	Intravenous Thrombolytic Therapy For PE: Why, When, And At What Dose Lauren Glassmoyer, MD
8:35 — 8:45	Ultrasound-Assisted Pharmacomechanical Thrombolysis: Emerging Data To Define Use In PE Assaf Graif, MD
8:45 — 8:55	Pharmacomechanical Thrombolysis With The Bashear Catheter: Unique And Differentiated Approach Eric A. Secensky, MD, MSc
8:55 — 9:05	Percutaneous Mechanical Thrombectomy Without Lytics: The FlowTriever System Mitchell D. Weinberg, MD
9:05 — 9:15	Percutaneous Mechanical Thrombectomy Without Lytics: The Indigo System Robert A. Lookstein, MD, MHCDL
9:15 — 9:25	Large Bore Aspiration Thrombectomy—Tips, Tricks And Pearls
9:25 — 9:40	Gary M. Ansel, MD Panel Discussion
	Michael R. Jaff, DO
Panelists:	Gary M. Ansel, MD Brian B. Ghoshhajra, MD, MBA Lauren Glassmoyer, MD Assaf Graif, MD
	Raghu Kolluri, MD Robert A. Lookstein, MD, MHCDL Geno J. Merli, MD Robert Roccycle, MD Robert Robert Roccycle, MD Robert Robert Roccycle, MD Robert Robert Robert Robert Robert Roccycle, MD Robert
	Rachel Rosovsky, MD, MPH Eric A. Secemsky, MD, MSc Aditya Sharma, MD
9:40-10:10	Mitchell D. Weinberg, MD Break – Visit Exhibits And Pavilions (2nd and 3rd Floors)
CECCIONI 10	(Triange Pallynam 2rd Flagra)
	(Trianon Ballroom, 3rd Floor) EMENT OF PULMONARY EMBOLISM: THE
	E APPROACH — PART 2
	Michael R. Jaff, DO
10:10-10:20	The AngioVac Strategy For The Treatment Of PE Christopher J. Kwolek, MD, MBA
10:20-10:30	ECMO-Assisted Pulmonary Embolectomy In Massive PE: Can It Replace Open Surgical Thrombo- Embolectomy A Professional Action (ACC)
10:30-10:40	Animesh Rathore, MD Do Statins Matter In The Treatment Of Patients With PE
	Anthony J. Comerota, MD

10:40-10:55 Your Referring Docs Think Heparin Is All They Need To Offer For PE - How To Tell The Intervention Story Patrick Troy, MD 10:55-11:10 Pulmonary Denervation: A New Frontier In The Treatment Of Pulmonary Hypertension Mark G. Davies, MD 11:10-11:25 Balloon Pulmonary Angioplasty For Chronic Thromboembolic Pulmonary Hypertension: Has This Become Mainstream Kenneth Rosenfield, MD The Team Approach To PE Management: The National 11:25-11:35 PERT Consortium Rachel Rosovsky, MD, MPH 11:35-12:00 Challenging The Experts: Interactive Q&A Moderator: Michael R. Jaff, DO Anthony J. Comerota, MD Mark G. Davies, MD Panelists: Christopher J. Kwolek, MD, MBA Robert A. Lookstein, MD, MHCDL Animesh Rathore, MD Kenneth Rosenfield, MD Rachel Rosovsky, MD, MPH Eric A. Secemsky, MD, MSc Patrick Troy, MD 12:00- 1:00 Lunch Break - Rhinelander Gallery, 2nd Floor 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 - MEDICAL AND NATURAL HISTORY **ISSUES** Moderators: William D. Jordan Jr., MD Vincent L. Rowe, MD 1:00 - 1:05Personalized Anticoagulation For Lower Extremity Revascularization Using The Distinctive Utilization Of Antiplatelets Protocol To Decrease Thrombosis (Failure) Rates: How To Do It Anahita Dua, MD, MS, MBA 1:06 - 1:11Why Are Patients Who Undergo Lower Extremity Revascularization At Risk For Major Bleeding: How To Estimate That Risk And What Should Be Done To Decrease It Christian A. Behrendt, MD 1:12 - 1:17Frailty With CLTI: How Best To Measure It And Can It Improve With Revascularization Mark G. Davies, MD 1:18 - 1:23How Atherosclerosis In Peripheral Arteries Differs From That In The Coronary Arteries: What Are The Therapeutic Implications Janet T. Powell, MD, PhD 1:24 - 1:29Premature Peripheral Artery Disease: What Factors Predispose To It: How Should Its Treatment Differ:

How Does It Influence Treatment Outcomes

Open And Endo Revascularization In Young Patients With PAD: What Works, What Doesn't, And How

Olamide Alabi, MD

Should Treatment Be Modified William P. Robinson, MD

1:30 - 1:35

1:36 — 1:41	'Low-Flow State' Induced Limb Ischemia: What's The Etiology: Is The Incidence Increasing In The Era Of ECMO, IMPELLA, LVADs And Heart Transplantation: How Should It Be Treated Satesh C. Babu, MD
1:42 — 1:47	Renal Failure In CLTI Patients Should Not Be A Contraindication To Limb Salvage Attempts Vincent L. Rowe, MD
1:48 — 2:04	Panel Discussion
MORE HOEXTREMITE TREATME AND TRE	(Trianon Ballroom, 3rd Floor) OT NEW TOPICS RELATED TO LOWER TY OCCLUSIVE DISEASE AND ITS ENT — EVALUATING ARTERIAL ANATOMY ATMENT OUTCOMES WITH CLTI Marianne Brodmann, MD
	Caron B. Rockman, MD
2:04 — 2:09	How To Accurately Evaluate Availability And Nonavailability Of Ipsilateral Or Contralateral Great Saphenous Vein For Use For Potential Bypasses In Patients Being Treated For Severe CLTI: How Can One Determine Optimal Treatment Caron B. Rockman, MD
2:10 — 2:15	Value Of Optical Coherence Tomography (OCT) In Treating BTK Arterial Lesions: How Does It Work And Indications Lee Bouwman, MD, PhD
2:16 — 2:21	The Value Of Distal Angiography, Selective And Subselective, In The Treatment Of Lesions Causing CLTI Jos C. van den Berg, MD, PhD
2:22 — 2:27	The Japanese SPINACH Registry Confirms That Open Bypasses Are Superior To Endovascular Treatments In CLTI Patients When Ischemia And Infection Are Advanced Nobuyoshi Azuma, MD (PowerPoint Presentation With Synched Audio)
2:28 — 2:33	What Is The Role Of IVUS In Peripheral Arterial Endovascular Procedures: When Is It Better Than Contrast Arteriography And When Can It Replace It Hany M. Zayed, MD
2:34 — 2:39	What Are The Best Ways To Evaluate CLTI Treatment Outcomes: Physiology (ABIs And PVRs), Wound Healing, Anatomy (Angiography Or Ultrasound), MACE Or MALE: Why It Matters Mitchell D. Weinberg, MD Ido Weinberg, MD, MSc
2:40 — 2:45	How Should We Define Success For CLTI Treatment: What Criteria Are Best: The UK Perspective: Why Is It Different <i>Jonathan R. Boyle, MD</i>
2:46 — 2:52	Panel Discussion
2:52 — 3:00	Break – Visit Exhibits And Pavilions (2nd and 3rd Floors)
SESSION 21	(Trianon Ballroom, 3rd Floor)
	V TOPICS RELATED TO LOWER
EXTREMI	TY OCCLUSIVE DISEASE AND ITS

TREATMENTS

3:00 - 3:05

Moderators: Neal S. Cayne, MD

Gary M. Ansel, MD

Important Is It Erwin Blessing, MD

Technical Tips For Vessel Prep For DCBs Or DESs: It Is Different And Not Simple: How To Do It And How

- 3:06 3:11Current Comparative Value Of Paclitaxel Coated DCBs Versus Uncoated Balloons In Below The Knee (BTK) Arteries: The SAMBA Trial Shows That DESs Can Work In This Location Gunnar Tepe, MD
- 3:12 3:17When Are Polymer Based Paclitaxel Eluting Stents (Eluvia, Boston Scientific) Superior To Other Endo Treatments For Lower Extremity Lesions Yann Gouëffic, MD, PhD
- 3:18 3:23Update On The Advantages Of The Chocolate Wire Constrained Uncoated Balloon (From Medtronic) For Treating Popliteal And BTK Lesions Gunnar Tepe, MD
- 3:24 3:29Tips For Treating Difficult BTK/BTA Lesions: How To Get A Guidewire Across A Long Calcified Occlusion, Getting A Resistant Balloon To Go Over The Wire And Tips For Retrograde Access Marco G. Manzi, MD
- 3:30 3:35Propensity Matched Comparison Of Uncoated And Paclitaxel-Coated Balloon Angioplasty For Isolated Popliteal Lesions Excluding Bail-Out Stenting: The DCBs Are Better Fabrizio Fanelli, MD Thomas Zeller, MD
- 3:36 3:42Panel Discussion
- 3:42 3:47Outcomes Following Profunda Revascularization Using Atherectomy And DCB Angioplasty: Technical Tips And Comparison With Open Surgery Giovanni B. Torsello, MD
- 3:48 3:53First-In-Human Experience With The Efemoral Bioresorbable Scaffold And New Sirolimus DCB (Provision DCB From BD) In FemPop Disease Andrew Holden, MBChB
- 3:54 3:59Why The Zilver PTX DES (Cook) Is A Durable Effective Treatment For Long FemPop Lesions: Based On Worldwide Trials And Experience Charles J. Bailey, MD
- 4:00 4:05Non-Aspiration Based Mechanical Thrombo-Embolectomy With The Pounce (From Surmodics) Or Rotarex (From BD) Devices: How Do They Work And How They May Lead To More Concrete Procedural End Points And Improved Value Analysis Gary M. Ansel, MD
- 4:06 4:11Local Anesthetic Injection Into A Lesion Site Facilitates Angioplasty (PTA) And Stent Placement: How To Do It Andrej Schmidt, MD
- 4:12 4:17Technical Tips For A Successful BTK Intervention In Patients With CLTI Including How To Perform An Antegrade Femoral Artery Puncture And Pass The Guidewire Easily Into The SFA And Not The Profunda Ali Amin, MD, RVT
- 4:18 4:23Panel Discussion

SESSION 22 (Trianon Ballroom, 3rd Floor) MORE HOT NEW TOPICS RELATED TO LOWER EXTREMITY OCCLUSIVE DISEASE, CLTI AND ITS TREATMENTS

Moderators: Brian G. DeRubertis, MD Caitlin W. Hicks, MD, MS

4:24 - 4:29How To Evaluate The Need For Below The Ankle (BTA) Recanalization In CLTI Patients: When Is It Important To Achieve Foot Healing: Technical Tips To Do It And How Durable Is Its Patency.

Lorenzo Patrone, MD (PowerPoint Presentation With Synched Audio)

4:30 — 4:35	Lymphatic Embolization For Postoperative Groin Wound Leaks: How To Do It And How Effective Is It
4:36 — 4:41	Lindsay Machan, MD When Is Endovascular Treatment For CLTI Justified And Better For Patients Classified As "Bypass Preferred" In The Global Vascular Guidelines: What
	Are The Guidelines Missing
4:42 - 4:47	Kimihiro Komori, MD, PhD A Radiologist's View Of Open Bypass Versus
	Endovascular As First Treatment For CLTI: Bypasses
	Still Have An Important Role Konstantinos Katsanos, MSc, MD, PhD
4:48 - 4:53	How To Size Lower Extremity Target Arteries For Endo
	Treatments Accurately Using Intravascular Ultrasound (IVUS): How Does It Help
	Jos C. van den Berg, MD, PhD
4:54 — 4:59	Do Diabetic Patients With CLTI And Extensive
	Foot Necrosis Have Time For An Endovascular First Strategy: Primary Open Bypass Is Better Treatment In
	This Setting
5:00 — 5:05	Katariina M. Noronen, MD Does Intravascular Lithotripsy (IVL) (Shockwave)
0.00	Eliminate The Need For Other Vessel Prep
5:06 — 5:11	Lawrence A. Garcia, MD Panel Discussion
5:12 - 5:17	Experience With >1500 Retrograde Recanalization
	For Chronic Total Occlusions (CTOs); What Predicts Technical Success And What Predicts Periprocedural Complications: Are Re-Entry Devices Ever Helpful
5:18 - 5:23	Erwin Blessing, MD Guillotine TMA After Arterial Revascularization:
0.10	When And Why Is It Helpful With CLTI And How Should It Be Done
5:24 — 5:29	Miguel F. Montero-Baker, MD (PowerPoint Presentation With Synched Audio) Value Of Pada Tibial Purposess, Technical Tipe For
3:24 — 3:27	Value Of Redo Tibial Bypasses: Technical Tips For Facilitating - Some Old And Some New Tricks Evan C. Lipsitz, MD, MBA
5:30 — 5:35	A New Technology (From AOTI) Combining Local Oxygen Therapy With Cycled Compression And Humidification Enhances Healing Of Diabetic Wounds And Ischemic Ulcers After Revascularization Anil P. Hingorani, MD Enrico Ascher, MD
5:36 - 5:41	When Lower Extremity Interventions Are Required In
	Patients With Prior EVAR Or Kissing Iliac Stents, How Can Contralateral Femoral Access Be Used: Technical Tips
5:42 — 5:47	Dipankar Mukherjee, MD Alternate Anatomic Approaches To Lower Extremity
0.42 0.47	Arteries When Standard Approaches Are Prevented By
	Scarring Or Infection
	Neal S. Cayne, MD Enrico Ascher, MD
F (0 F F0	Frank J. Veith, MD
5:48 — 5:53	Effects Of Atherectomy On Immediate Luminal Gain Ir Patients With In-Stent Restenosis/Thrombosis: Which
	Atherectomy Device Is Best Joseph J. Ricotta II, MD, MS
5:54 - 5:59	How To Do Bypass Surgery To Heavily Non-
	Compressible Calcified Target Arteries Enrico Ascher, MD
	Frank J. Veith, MD
5:59 — 6:00	End of Program C-2
	(No formal Panel Discussion will be held. Comments and Questions should be addressed to the Speakers on an individual

basis later in the meeting.)

WEDNESDAY, NOVEMBER 20, 2024

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 WEDNESDAY PROGRAMS

PROGRAM D (SESSIONS 23-30)

Progress In Lower Extremity Occlusive Disease And Its Treatment

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

Location: 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.

Location: 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 Topics**

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

Moderators: Enrico Ascher, MD Andrej Schmidt, MD

Christopher K. Zarins, MD

6:40 - 6:45How Do Prior Endovascular Interventions Affect Future Lower Extremity Bypass Outcomes For CLTI: Why Do The Results Of The BEST-CLI Trial Make This More Important Kenneth Rosenfield, MD

Alik Farber, MD, MBA Matthew T. Menard, MD

6:46 - 6:51The Effect Of Optimal Medical Therapy On Outcomes In Patients With CLTI In The BEST-CLI Trial: What Should This Therapy Be And How Should It Be Monitored

Vikram S. Kashyap, MD

6:52 - 6:57Five-Year Mortality In Medicare Patients Undergoing Interventions For CLTI And IC Is Worse Than We Thought: 67% For CLTI And 33% For IC Jeffrey J. Siracuse, MD, MBA

6:58 - 7:03**DEBATE**: An Endo First Approach Is Best For Treating CLTI In Almost All Patients: The Role For Open Bypasses Is Very Limited (What Percent): Why BEST-CLI And BASIL 2 Have Not Changed My Practice Christopher J. Abularrage, MD

- 7:04 7:09 DEBATE: Open Bypass Should Be The First Treatment For Many CLTI Patients: When Is This So And In What Percent Of CLTI Patients

 Michael S. Conte, MD
- 7:10 7:15 Is The Open Surgery First Or Endovascular First
 Approach Controversy Still Alive For CLTI: What
 Percentage Of An Interventionalist's Patients Should Be
 Treated First By Open Surgery
 Marianne Brodmann, MD
- 7:16 7:21 What Causes Small Foot Arteries To Have Decreased Blood Flow Resulting In CLTI: Medial Arterial Calcification (MAC) Causes Increased Vascular Stiffness And Decreased Blood Flow; Atheromatous And Non Atheromatous Lesions Further Obstruct Blood As Shown Pathologically: Can Any Of These Be Treated Roberto Ferraresi, MD
- 7.22 7.27 What Are The Best Current Techniques For Revascularizing BTK And Below-The-Ankle (BTA)
 Lesions Causing CLTI: Is Open Bypass Ever The Best Stefan Müller-Hülsbeck, MD
- 7.28 7.33 Microembolization During Complex Endovascular Procedures Is Causing More Damage Than We Think To The Already Compromised Pedal Runoff: Is Paclitaxel A Causal Agent Peter A. Schneider, MD
- 7:34 7:39 Is Preop CT Fractional Flow Reserve (FFRCT) Guided Coronary Revascularization Beneficial In Patients Requiring Invasive Treatment For Lower Extremity (LE) Lesions: An RCT Comparing Standard Care Versus Such Revascularization Is Showing The Benefit Of The Latter: What Is The Best Time For The Coronary Procedure—Before Or After The LE Treatment Christopher K. Zarins, MD Dainis K. Krievins, MD
- 7:40 7:45 Radial-to-Peripheral Interventions For Lower Extremity Arterial Lesions (PAD): An Update On Available Tools And Techniques And Precautions: What's Possible And What's Not Craig M. Walker, MD
- 7:46 7:53 Panel Discussion

SESSION 24 (Grand Ballroom East, 3rd Floor)

NEW DEVELOPMENTS IN ATHERECTOMY, STENTS (UNCOATED, COATED AND BIORESORBABLE)

Moderators: Craig M. Walker, MD

Ramon L. Varcoe, MBBS, MS, PhD

Peter A. Schneider, MD

PROGRESS IN ATHERECTOMY

- 7.53 7.58 Which Vascular Specialists Are Performing Tibial Atherectomies And Angioplasties For Intermittent Claudication And Are There Suboptimal Outcomes: Is Atherectomy Usage Overall Being Abused Caitlin W. Hicks, MD, MS
- 7.59 8.04 Update On Atherectomy Devices: Do They Still Have A Role In 2024: Which One Or Ones Are Best: Has Their Benefit Been Proven Todd R. Vogel, MD, MPH
- 8:05 8:10 Atherectomy In Patients With CLTI, In Stent Restenosis (ISR) And Diabetes: When Is It Helpful; How Durable Is It: Which Devices Are The Best Ignacio Escotto, MD

8:11 – 8:16 The Objective Benefits Of Directional Atherectomy In Treating Lower Extremity Occlusive Lesions Are Real: When And How Should It Be Used And When Should It Not

Dierk Scheinert, MD

Thomas Zeller, MD

8:17 – 8:22 What Is The Evidence That Atherectomy Is Effective In Femoropopliteal Interventions

Eric A. Secemsky, MD, MSc

DRUG ELUTING STENTS (DESs) FOR BTK LESIONS

- 8:23 8:28 For BTK Lesions, Results Justify A Change In The Role Of Stenting From Bailout Use To Primary Stenting: For Which Lesions And With Which Stents

 Marco G. Manzi, MD
- 8.29 8.34 An Update Of The 2-Year Results And Economic Cost Effectiveness Analysis Of The LIFE-BTK Randomized Controlled Comparison Of Abbott's Esprit Drug-Eluting Resorbable Stent (DERS) With Plain Old Balloon Angioplasty (POBA): When Will DERSs Make A Difference Ramon L. Varcoe, MBBS, MS, PhD Sahil A. Parikh, MD Brian G. DeRubertis, MD
- 8:35 8:40 Update On Bioresorbable Everolimus DESs To Treat BTK Lesions Causing CLTI: Promising Results Up To 5 Years: From The DISAPEAR Registry And A Meta-Analysis Of Other Bioresorbable BTK Stent Results Steven Kum, MD
- 8:41 8:46 Updated Experience With Everolimus And Other Nonabsorbable DESs To Treat Infrapopliteal BTK Lesions Long And Short Causing CLTI: What Are The Stents And When Do They Help: Why Will The DERSs Be Better Robert A. Lookstein, MD, MHCDL
- 8.47 8.52 Late-Breaking Final Patency And Wound Healing
 Results With A 3-French Compatible Microstent
 (From Micro Medical) Versus POBA For Antegrade Or
 Retrograde Insertion To Treat Tibial Artery Lesions:
 From The STAND RCT
 Robert E. Beasley, MD
 Marco G. Manzi, MD

8:53 – 9:00 Panel Discussion

SESSION 25 (Grand Ballroom East, 3rd Floor)

LOWER EXTREMITY TOPICS RELATED TO DRUG COATED BALLOONS (DCBs), AND DRUG ELUTING STENTS (DESs) AND OTHER INTERWOVEN (SUPERA) STENTS

Moderators: Kenneth Ouriel, MD, MBA Sahil A. Parikh, MD Michael S. Conte, MD

- 9:00 9:05 One View On The Final Result Of The Scare And Concern That Paclitaxel Coated Devices For Lower Extremity Treatments Increased Mortality And Amputation Rates: The Case Is Closed: What Were Its Costs

 Peter A. Schneider, MD
- 9:06 9:11 Another View On The Final Word: Is There Still Any Validity To The Increased Amputation And Mortality Rate Signals After Use Of Paclitaxel Coated Devices In The Lower Extremity: How Can We Explain These Signals In Older Studies And Their Disappearance In More Recent Data: The Case Is Not Yet Fully Closed Konstantinos Katsanos, MSc, MD, PhD

9:12 — 9:17	Update On DCBs For BTK Angioplasty: RCT Comparing A Paclitaxel DCB (Litos From Acotec) Versus A Sirolimus DCB (Magic Touch From Concept Medical): Update On Enrollment And Data In The DEBATE BTK DUELL RCT And The XTOSI Study Francesco Liistro, MD Edward T. Choke, MBBS, PhD
9:18 — 9:23	Progress With A Sustained Release Sirolimus DCB For FemPop Lesions: 1-Year Results With The Magic Touch DCB Compared To A Paclitaxel DCB: From The SIRONA Study Andrej Schmidt, MD Thomas Zeller, MD Dierk Scheinert, MD Marianne Brodmann, MD
9:24 — 9:29	Adventitial Drug Delivery With The BullFrog Device (From Mercator MedSystems) And The Spur Device (From Reflow): How Do They Work And How Will We Know They Improve Results William A. Gray, MD
9:30 — 9:35	To Reduce Injury In Post Balloon PTA Dissections: The Value Of Stents, Tacks, Etc. Michael K.W. Lichtenberg, MD
9:36 — 9:41	Late Breaking Information Shows That Higher Dose Of Statins Greatly Lessens The Risk Of SFA Stent Restenosis: Is It True With DESs Timothy W.I. Clark, MD
9:42 — 9:47	The Light And Darkness Of Fluoropolymer-Based Limus DESs In The Treatment Of Femoropopliteal Lesions. Osamu Iida, MD, PhD (PowerPoint Presentation With Synched Audio)
9:48 — 9:53	Updated And Long-Term Follow-Up Results With The Vasculomimetic Interwoven Supera Stent In Angulated And Tortuous Lower Extremity Anatomies <i>Rajiv Parakh</i> , <i>MBBS</i> , <i>MS</i>
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 Osamu Iida, MD, PhD (PowerPoint Presentation With Synched Audio)
10:00-10:08	Panel Discussion
10:08-10:18	Break – Visit Exhibits And Pavilions (2nd and 3rd Floors)
NEW DEV BALLOON (DESs): U TRIALS (R WITH DC	(Grand Ballroom East, 3rd Floor) VELOPMENTS IN DRUG COATED NS (DCBs) AND DRUG ELUTING STENTS PDATES ON RANDOMIZED CONTROLLED CCTs) AND BTK LESION TREATMENTS CBs AND DESS John R. Laird, MD Dierk Scheinert, MD Sean P. Lyden, MD

NEW INFORMATION ON DCBs AND DESS FOR FEMPOP LESIONS: UPDATES ON RCTs

10:18-10:23 How Should We Move Forward With Limus Coated Devices After FDA Has Cleared Paclitaxel Coated Devices: Are There Promising Results Currently With Limus Coated DCBs

Marianne Brodmann, MD

10:24-10:29	4-Year Results Of An RCT Comparing Surveil DCBs (Surmodics) With In.Pact DCBs (Medtronic) For Treating FemPop Lesions: From The TRANSCEND Trial
10:30-10:35	Peter A. Schneider, MD Paclitaxel-Eluting Devices Decrease Major Amputation Rates In Peripheral Arterial Disease Without Increasing Mortality: From The French Nationwide DETECT Study
10:36-10:41	Yann Gouëffic, MD, PhD Update On The Randomized Head-To-Head Comparison Of In.Pact (Medtronic) And Ranger (Boston Scientific) DCBs For Complex SFA Lesions: 5-Year Results Of The COMPARE RCT: Similar Results With Different Paclitaxel Dosages Dierk Scheinert, MD Sabine Steiner, MD
10:42-10:47	Update On The BioMimics 3D Spiral Flow Prosthetic Graft From Veryan Medical: Does It Prevent Neointimal Hyperplasia And Improve Patency: 3-Year Results With FemPop Lesions Robert E. Beasley, MD
10:48-10:53	One Year Results Of The SPORTS RCT – Comparing DESs (Eluvia – Boston Scientific) Versus Bare Metal Stents (BMSs) Versus DCBs: Which Device Is Best And In What Circumstances <i>Gunnar Tepe, MD</i>
10:54-10:59	Updated 5-Year Results Of The IMPERIAL RCT Head- To-Head Comparison Of The Eluvia DES (Boston Scientific) With The Zilver PTX DES (Cook): Both Are Safe And Effective: What Are The Differences Stefan Müller-Hülsbeck, MD William A. Gray, MD Thomas Zeller, MD
11:00-11:05	1-Year Results Of The DEBATE-BTK SHOCK RCT Evaluating The Impact Of Lithotripsy Prior To DCB Treatment In Diabetic Patients Undergoing BTK Revascularization Francesco Liistro, MD
11:06-11:11	Stellarex (Philips) DCBs With Low Dose Paclitaxel Is Safe And Has Higher Patency Rates Than POBA With De Novo Or Recurrent FemPop Lesions At 5 Years In The ILLUMENATE US And European RCTs Sean P. Lyden, MD Marianne Brodmann, MD Sahil A. Parikh, MD William A. Gray, MD
11:12-11:18	Panel Discussion
44.44.41.41	NEW INFORMATION ON BTK DCBs AND DESS
11:18-11:23	Why Some BTK DCB Trials Have Not Shown Uniformly Better Results: Technical And Balloon Factors Matter Francesco Liistro, MD
11:24-11:29	When, How And With What Devices Are Endovascular Treatments The Best Way To Treat BTK Disease Causing CLTI Brian G. DeRubertis, MD
11:30-11:35	5-Year Results From The AcoArt II BTK DCB RCT Show Safety With No Increased Mortality And Improved Patency Versus POBA To Treat BTK Lesions Francesco Liistro, MD Wei Guo, MD

11:36-11:41	Sirolimus DCBs For Infrapopliteal Interventions: The Cordis/MedAlliance Selution 4BTK IDE Trial Update: Overseas Results Have Been Promising
	Patrick J. Geraghty, MD
	George L. Adams, MD Michael K.W. Lichtenberg, MD
11:42-11:47	How Does The LIFE BTK Study With Esprit Bioresorbable DES (From Abbott) Change The BEST- CLI Conclusions For BTK Lesions
	Lawrence A. Garcia, MD
11:48-11:53	Below-The-Ankle Endo Interventions In 2024: Techniques, Devices And Should Balloons Be Drug Coated Or Not
11:54-12:00	Marianne Brodmann, MD Panel Discussion
12:00- 1:00	Lunch Break – Rhinelander Gallery, 2nd Floor
12.00 1.00	Visit Exhibits And Pavilions (2nd and 3rd Floors)
PROGRES	(Grand Ballroom East, 3rd Floor) SS IN EXOTIC AND EXTREME NEW ENTS FOR VERY DISTAL LOWER
EXTREMI	TY DISEASE CAUSING ADVANCED
CLTI: OP	TIONS TO SAVE THE "NO OPTION FOR
TREATME	ENT" LIMB AND THE "DESERT FOOT"
Moderators:	Richard F. Neville, MD
	Marco G. Manzi, MD Roberto Ferraresi. MD
1:00 — 1:05	Successful Bypasses To Foot Arteries And Their Branches Allowed Limb Salvage In What Were Thought To Be 'No Option For Treatment' CLTI Patients
	Enrico Ascher, MD Frank J. Veith, MD
1:06 — 1:11	What Presently Defines A No Option Or Desert Foot Before Or After Failed Endo Or Open Treatments: Under What Conditions Are Further Extreme Limb Salvage Procedures Possible Peter A. Schneider, MD
1:12 — 1:17	No Option CLTI Is Often A Misnomer: What
	Diagnostic And Therapeutic Procedures Can Result In Successful Limb Salvage In Many Of These Patients Hisham Rashid, FRCS
	VALUE OF PROSTHETIC (PTFE) TIBIAL BYPASSES
1:18 — 1:23	Why PTFE Bypasses To Infrapopliteal Arteries Have Been A Controversial Procedure For More Than 40 Years – And Why They Continue To Be
1:24 — 1:29	Matthew T. Menard, MD Long-Term Multicenter Outcomes Show That Prosthetic (PTFE) Bypasses To Tibial And Peroneal Arteries Are Worthwhile
	Hasan H. Dosluoglu, MD Richard F. Neville, MD Enrico Ascher, MD Frank J. Veith, MD
	UPDATE ON FOOT VEIN ARTERIALIZATION FOR CLTI
1.20 _ 1.25	
1:30 — 1:35	Value Of Open Surgical Vein Arterialization: When And How It Can Be Useful: Technical Tips From The First One To Make It Work Pramook Mutirangura, FRCS
1:36 — 1:41	Why Foot Vein Arterialization Can Save Limbs With Truly No Other Option: What Is The Physiology That Allows Successful Arterialization Into Small Veins And The Capillary Bed: What Is Necessary For This To
	Occur Roberto Ferraresi, MD

1:42 — 1:47	Update On The PROMISE Trials And Registry Results In No Option CLTI Patients With Foot Gangrene Shows That Deep Vein Arterialization (DVA) Using The
	LimFlow Device Can Produce Wound Healing And
	Limb Salvage: When Does It Work And When Doesn't
	It: Are There Drawbacks
	Daniel G. Clair, MD
	Hany M. Zayed, MD
	Andrej Schmidt, MD
	Daniela Branzan, MD
1:48 - 1:53	Technical Advances In (DVA) With The LimFlow
	Device: Improved Access, Better Post Procedural Care
	And Wound Management Are Essential
	Anahita Dua, MD, MS, MBA
1:54 - 1:59	Technical Tips For DVA: The Most Important Part
	Starts After The Procedure
	Frwin Blessing MD

- Blessing, ML 2:00 - 2:05Deep Venous Arterialization (DVA): Advantages Of Open Surgical Versus Endovascular Procedures Based On A Single Center Experience
- Novel Uses Of Selective Superficial Venous 2:06 - 2:11Arterialization To Achieve Lower Limb Salvage: Techniques, Indications, Precautions And Results Patrick J. Geraghty, MD

Richard F. Neville, MD

- Hybrid Superficial Venous Arterialization For No 2:12 - 2:17Option CLTI: Technical Tips: Causes And Patterns Of Failure - Which Is Common Miguel F. Montero-Baker, MD
- **Panel Discussion** 2:18 - 2:24

SESSION 28 (Grand Ballroom East, 3rd Floor) NEW DEVELOPMENTS IN PROSTHETIC GRAFTS; STENT-GRAFTS; PERCUTANEOUS ENDOVASCULAR BYPASSES; STENT OCCLUSIONS AND TREATMENT OF IN STENT RESTENOSIS (ISR)

Moderators: Timothy M. Sullivan, MD Patrick J. Geraghty, MD Anahita Dua, MD, MS, MBA

NEW CONCEPTS RE PTFE GRAFTS AND STENT-**GRAFTS**

- 2:25 2:30Heparin-Bonded Expanded PTFE Grafts For BTK Bypasses: What Is The Evidence That They Are Better And Are Propaten (Gore) Grafts The Best For Extensive FemPop Disease: Based On An RCT And A Systemic Review And Meta-Analysis Yann Gouëffic, MD, PhD
- 2:31 2:36Less Invasive And More Effective Hybrid Method For Restoring Patency To Occluded PTFE Bypasses Using A Fluoroscopically Guided Adherent Clot Remover (From Edwards)

Neal S. Cayne, MD Frank J. Veith, MD

2:37 - 2:425-Year Results Of Viabahn Stent-Graft For Complex FemPop Lesions: Technical Tips, Advantages And Limitations. Osamu Iida, MD, PhD (PowerPoint Presentation With

PERCUTANEOUS FEMPOP BYPASSES

2:43 - 2:483-Year Results With Percutaneous (PQ) Transvenous FemPop PTFE Bypasses Using The Torus 2 Endograft (From Endologix): How Is It Done And Updated Results From The US DETOUR Trial: Does It Have Limitations Sean P. Lyden, MD Daniel G. Clair, MD

2:49 - 2:545-Year Results With Percutaneous Transvenous PTFE FemPop Bypass (PQ From Endologix) The DETOUR 1 TRIAL: Will Open Bypasses Become Obsolete Dainis K. Krievins, MD

Peter A. Schneider, MD

2:55 - 3:00Percutaneous Extravascular FemPop PTFE Bypasses Without Traversing The Vein: Technique And 6-Year Experience In Patients: Is It More Cost Effective: What Are The Limitations Pierre G. Sarradon, MD Jean Pierre Becquemin, MD

STENT OCCLUSIONS AND TREATMENT OF IN STENT RESTENOSIS (ISR)

3:01 - 3:06Treatment Of SFA In Stent Occlusions: Technique Of Direct Stent Puncture: And Value Of The Excimer Laser To Cross And Treat The Occlusions: How Is It Done And Advantages Craig M. Walker, MD

3:07 - 3:12What Are The Best Current Treatment Options For ISR: What Are The Results Including Recurrence Rates Stefan Müller-Hülsbeck, MD

ROLE OF OPEN PTFE BYPASSES IN CLTI

3:13 - 3:18In The Endovascular Era, What Is The Current Role Of Open Bypasses In A Limb Salvage Program: What Percentage Of CLTI Patients Will Need One At Some Time In Their Course And What Percentage Of Those Will Require A PTFE Graft Niten Singh, MD

3:19 - 3:39Panel 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: Brian G. DeRubertis, MD Marco G. Manzi, MD Frank J. Veith, MD

3:40 - 3:45An Important Multicenter Propensity Matched Comparison Of Endo Versus Open Infrainguinal Treatment For CLTI Shows That Open Treatment Is Superior And Supports The Main Finding Of BEST-CLI Jean-Baptiste Ricco, MD, PhD

How To Reconcile The Different Primary Outcomes 3:46 - 3:51And Main Conclusion Of The BEST-CLI And BASIL-2 **RCTs**

Michael S. Conte, MD

3:52 - 3:57How The Data From BEST-CLI And BASIL-2 Can Be Combined To Produce Conclusions Superior To Those Of Either Trial Alone Alik Farber, MD, MBA Andrew W. Bradbury, MD Matthew T. Menard, MD Kenneth Rosenfield, MD

3:58 – 4:03 New Subanalysis Findings From The BEST-CLI RCT
Are Critically Important To The Treatment Of CLTI
Patients: Open Surgical Bypass Operations Still Have
A Critical Role: Open Versus Endo Treatment Of
Infrapopliteal Disease: Does Endo Treatment Burn
Bridges
Matthew T. Menard, MD
Alik Farber, MD, MBA
Kenneth Rosenfield, MD

4:04 – 4:09 Findings From BASIL-3, An RCT Comparing Clinical And Cost Effectiveness Of 3 Treatment Modalities For CLTI From FemPop Disease: POBA Versus DCBs Versus DESs

Andrew W. Bradbury, MD

METHODS FOR EVALUATING FOOT PERFUSION

- 4:10 4:15 Foot Perfusion Measurements Are The Best Method To Evaluate Treatment Effectiveness For CLTI: What Methods Are Available And Best Werner Lang, MD
- 4:16 4:21 How And Why To Measure Foot Perfusion During And After Endo Treatments: Hyperspectral Imaging, O₂ Sensors, Etc.: When Is The Angiosome Concept Helpful; When Not Marianne Brodmann, MD
- 4:22 4:27 New Methods For Evaluating The Significance Of Lower Extremity Arterial Lesions And Foot Perfusion Using Fractional Flow Reserve (FFR) And MRI; How They Work And Their Value In Assessing Therapeutic Success
- Bijan Modarai, PhD 4:28 – 4:35 Panel Discussion

SESSION 30 (Grand Ballroom East, 3rd Floor)

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

Moderators: Matthew T. Menard, MD Caitlin W. Hicks, MD, MS Thomas S. Maldonado, MD

INTERMITTENT CLAUDICATION (IC)

- 4:36 4:41 At 2 Years After Endovascular Interventions For IC, Only 32% Of Patients Were Free From Recurrent IC: From A VQI Multicenter Study: What Are The Implications Peter F. Lawrence, MD
- 4:42 4:47 Decreasing Unnecessary And Potentially Harmful Endovascular Procedures In Patients With IC Which Are Almost Never Justified And Should Not Be Reimbursed Caitlin W. Hicks, MD, MS
- 4:48 4:53 Under What Circumstances Could Tibial Endo Interventions Possibly Be Justified For IC Sahil A. Parikh, MD
- 4:54 4:59 When Do Outcomes For Lower Extremity
 Revascularizations Justify Their Use For IC In Patients
 >80 And >90
 Jeffrey J. Siracuse, MD, MBA
- 5:00 5:04 Panel Discussion

ACUTE LIMB ISCHEMIA (ALI) (See Also Session 63)

5:04 – 5:09 When And Why Is ALI Best Treated By Open Surgery: When Are Endovascular Treatments Best Peter Henke, MD

WEDNESDAY SESSIONS 30-3

- 5:10 5:15 The PROMOTE-ALI Study Shows That Open Surgery Is Still Number One In The Treatment Of ALI Katariina M. Noronen, MD
- 5:16 5:21 **DEBATE:** ALI Is Always Best Treated Endovascularly: Why And What Techniques May Be Required *Ali Amin, MD, RVT*
- 5:22 5:27 DEBATE: When Is Open Surgery Required To Treat ALI: When Is Mechanical Thrombectomy And Thrombo-Aspiration The Best Treatment: When Should Lytics Be Used: Based On A Systematic Review And Meta-Analysis

 Yann Gouëffic, MD, PhD
- 5:28 5:33 Characteristics Of All The Commercial Systems For Mechanically Removing Clot To Treat ALI: What Are The Advantages And Disadvantages Of Each Jos C. van den Berg, MD, PhD
- 5:34 5:39 What Is New With Penumbra Indigo Clot Aspiration Systems: Improved Mechanical Catheter And Computer Based Clot Removal Indigo Systems: Modulated Pulsed Aspiration Technology (Lightning Bolt) For The Treatment Of Acute Arterial Clot: How It Works And Why It Improves Clot Removal In Various Vascular Beds: Is Open Surgery Ever Needed James F. Benenati, MD
- 5:40 5:45 New Findings From The STRIDE Multicenter Trial:
 Mechanical Suction Thrombectomy With The Indigo
 Aspiration System (Penumbra) Had Few Complications
 And Excellent Limb Salvage: When Was It Contraindicated And When Was Angioplasty, Stenting Or
 Bypass Necessary
 Thomas S. Maldonado, MD
- 5:46 5:51 Endovascular Mechanical Thrombectomy Is Obviating
 The Need For Thrombolytics In ALI: What Devices
 Are Available And What Are Their Advantages And
 Limitations
 Patrick E. Muck, MD
- 5:52 5:57 Time To Perfusion In ALI: Which Is Faster, Lightning Bolt 7 (Penumbra) Or Open Surgical Embolectomy: When Is Open Surgery Necessary In 2024 Sean P. Lyden, MD
- 5:58 6:05 Panel Discussion End of Program D

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 Grand Ballroom West, 3rd Floor

SESSION 31 (Grand Ballroom West, 3rd Floor)
ADVANCES IN MEDICAL DIAGNOSIS AND
TREATMENTS IN VASCULAR PATIENTS; NEW ANTIATHEROGENIC DRUGS AND RIVAROXABAN

Moderators: Caron B. Rockman, MD Michael R. Jaff, DO

- 6:40 6:45 Postop Myocardial Infarctions (MIs) In Vascular Patients: What Are The New Options For Diagnosis, Prevention And Treatment Peter Henke, MD
- 6:46 6:51 What Is The Best Current Method For Evaluating The Heart In Patients Undergoing Open And Endo Vascular Surgery: When Is A Stress Test An Important Tool David H. Stone, MD
- 6:52 6:57 New Findings From The VOYAGER PAD And COMPASS RCTs With Low Dose Rivaroxaban (Xarelto [Janssen/J&J]) And Aspirin: How Do These Drugs Lower Major Adverse Limb And Cardiac Event Rates After Lower Extremity Revascularization (Endo And Open)

 Marianne Brodmann, MD
 Sebastian E. Debus, MD, PhD
- 6:58 7:03 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, MD
- 7:04 7:09 DEBATE: LDL Cholesterol (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, MD, PhD
- 7.10 7.15 DEBATE: Not So: Update On LDL-C Lowering With Statins And Other Drugs: They Are Proven To Stabilize And Shrink Plaques And Decrease Morbid Vascular Events: Stopping Statins Increases Patients' Risk Of MI And Death Ron Waksman, MD
- 7:16 7:21 The Risk Of Arteriosclerosis And Its Complications Are Increased By LDL Cholesterol (LDL-C) Levels, Elevated Lp(a) And Inflammation: What Are The Best Medical Strategies To Decrease These Parameters: Statins, Adjunctive LDL-C Lowering Drugs Inclisiran, Bempedoic Acid, Ezetimibe, PCSK-9 Inhibitors, Lepodisiran, Colchicine, Olezarsen, Etc. And Anti-Inflammatories: How They Should Be Administered Richard Bulbulia, MA, MD
- 7:22 7:27 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: Why And How Often Should LDL-C Levels Be Measured

 J. David Spence, MD
- 7:28 7:33 An Interesting New Anti-Atherosclerosis Vaccine (AtheroVax): A Drug To Produce Lifelong LDL-C Lowering With A Single Gene Modifying Treatment: The Heart-1 Gene-Editing Trial: How Does AtheroVax Work

 Nicholas Kipshidze, MD, PhD

7:34 – 7:42 Panel Discussion

SESSION 32 (Grand Ballroom West, 3rd Floor)
CATHETER BASED TREATMENTS FOR RESISTANT
HYPERTENSION; MANAGEMENT OF CARDIAC
PROBLEMS, CORONARY DESS, SMOKING
AND TRANSFUSION IN VASCULAR SURGERY
PATIENTS; PREVENTING VASCULAR AND CARDIAC
COMPLICATIONS

Moderators: Ron Waksman, MD Lindsay Machan, MD

UPDATE ON RENAL DENERVATION FOR HYPERTENSION

- 7.42 7.47 Renal Denervation For Resistant Hypertension Really Works As Shown By RCTs: What Are The Techniques And Devices: When Should They Be Used Eric A. Secensky, MD, MSc
- 7.48 7.53 The Role Of Pressure Wires And IVUS In The Assessment Of Renal Artery Stenosis In The Treatment Of Hypertension And Other Conditions Lindsay Machan, MD
- 7:54 7:59 Effect Of Increased Hydration And Protein Intake
 On Lower Extremity Arteriosclerotic Ischemia With
 Intermittent Claudication 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, MD (PowerPoint Presentation With Synched Audio)
 Samuel Fernandez, MD

OTHER TOPICS RELATED TO VASCULAR DISEASE AND ITS TREATMENT

- 8:00 8:05 When And To What Level Can Postoperative Anemia
 Be Tolerated After Major Vascular Surgery: When
 Should It Be Corrected By Transfusion And Do Cardiac
 Comorbidities Make A Difference
 Panos Kougias, MD, MSc
- 8:06 8:11 New Developments In Methods To Prevent Kidney
 Damage From Iodinated Contrast Agents
 Roxana Mehran, MD
- 8:12 8:17 How Important Is Inflammation As Determined By C-Reactive Protein (CRP) Levels In Predicting Adverse Cardiac Events: What Drugs Can Lower This Risk Ron Waksman, MD
- 8:18 8:23 When Should Smoking Be Stopped Before AAA Repair; Before Lower Extremity Bypass: At Least 4 Weeks: Why Does The Duration Of Cessation Matter Jeffrey J. Siracuse, MD, MBA
- 8:24 8:29 In Patients Undergoing Carotid Endarterectomy (CEA), What Should Best Medical Therapy (BMT) Be: Should Clopidogrel Be Part Of This BMT And Should It Be Continued During The Perioperative Period Timothy M. Sullivan, MD
- 8:30 8:35 How To Manage Patients With Recent Coronary DESs Who Require Vascular Operations Or Interventions: What To Do About Antiplatelet Medications: How Long To Wait Before Stopping Safely: What To Do With Urgent Or Emergent Cases To Avoid DES Thrombosis

 Caron B. Rockman, MD
- 8:36 8:42 Panel Discussion
- 8:42 8:54 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

(For Important Related Talks See Session 33 In Our 2023

Program On Our Website VEITHsymposium.org)

Moderators: Timur P. Sarac, MD Luis A. Sanchez, MD Mark W. Mewissen, MD

ALL ENDOLEAKS AFTER EVAR

8:54 – 8:59 Update On The Optimal Management Of Endoleaks: Key Points From A Systematic Review Bernardo C. Mendes, MD Dynamic CT Scanning – The Gold Standard For Evaluating Endoleaks: Technical Requirements And

9:00 - 9:05

	How To Make It Help In Diagnosis And Treatment Alan B. Lumsden, MD
9:06 — 9:11	How To Improve Endoleak Detection And Finding Its Source With Contrast Enhanced Sonography
	Thanila A. Macedo, MD
	TYPE 1 ENDOLEAKS
9:12 — 9:17	Major Systemic Trauma Can Lead To High-Flow (Type
	1) Endoleaks In EVAR Patients: Can They Occur With Endografts Fixed By Hooks Or Barbs And What Is The
	Best Treatment
	Carlo Setacci, MD
9:18 — 9:23	Update On Embolization Treatment For Type 1
	Endoleaks After EVAR: Indications And Technical Tips To Make It Work Successfully: Contraindications
	Robert A. Morgan, MD
9:24 — 9:29	How Can Type I Endoleaks Cause Sac Pressurization
	(Endotension) Without Contrast Visualization:
	How To Detect And Treat It: What Else Can Cause Endotension
	Kenneth Ouriel, MD, MBA
9:30-9:35	How To Treat Type 1 Endoleaks After EVAR: When
	Cuff, When F/EVAR, When Chimney, When Open Conversion: What About Embolization
	Matteo Orrico, MD
	Nicola Mangialardi, MD
9:36 — 9:41	Panel Discussion
	TYPE 2 ENDOLEAKS AFTER EVAR
9:41 — 9:46	Most Type 2 Endoleaks After EVAR Should Be Left
	Alone Because Treatments Have Poor Results, Have Complications And Do Not Improve Outcomes: What
	Are The Exceptions
	Hence J.M. Verhagen, MD, PhD
9:47 — 9:52	When Should We Reintervene And Keep Reintervening
	For Persistent Type 2 Endoleaks: What Factors With Persistent Type 2 Endoleaks Are Predictors Of AAA
	Rupture
	Naoki Fujimura, MD, PhD
9:53 — 9:58	When Do Type II Endoleaks Cause Type I Endoleaks After Standard EVAR: How To Best Diagnose And
	Treat Them: Does One Need Proximal Aortic Control
	If Treatment Is Open Conversion
9:59-10:04	Randall R. De Martino, MD
7:37-10:04	The Role Of Mural Thrombus In The Development Of Late Type II Endoleaks: How Best To Prevent Them
	And Treat Them
	Natzi Sakalihasan, MD, PhD
10:05-10:10	Patients On Anticoagulation Are More Likely To Develop Endoleaks After EVAR: How Does It Influence
	The Outcome Of Endoleak Treatment And Should It Be
	Stopped If Possible
40.44.40.47	Faisal Aziz, MD
10:11-10:16	How Can 3D Fusion And ASSIST Guidance (GE) Help In Type 2 Endoleak Treatment By Any Approach: How
	To Do It
	Mark W. Mewissen, MD
10:17-10:22	Panel Discussion
10:23-10:28	Transcaval Approach For Endoleak Embolization: A
	Minimally Invasive Hot Needle Approach And Other Technical Tips Including How To Close The Aortic

Technical Tips Including How To Close The Aortic

Access Site Sean P. Lyden, MD

10:29-10:34	Transgraft Treatment Of Type 2 Endoleaks After EVAR: When And How To Do It
10:35-10:40	James F. McKinsey, MD The Latest Advances In The Treatment Of Type 2 Endoleaks: A New Technique With The Taurus Device Will Be Better: What Is It And Results
10:41-10:46	Zvonimir Krajcer, MD Innovative Type 2 Endoleak Obliteration Via Collateral Networks: Technical Tips Palma M. Shaw, MD, MBA
10:47-10:52	An Algorithm For Diagnosing And Treating Challenging Endoleaks After F/B/EVAR For TAAAs Thomas F. Lindsay, MDCM
10:53-11:00	Panel Discussion
ISSUES IN SPECIALIS	
Moderators:	Kim J. Hodgson, MD Thomas L. Forbes, MD
11:00-11:05	A Tribute To James S. T. Yao, MD, PhD (1932-2023) Jon S. Matsumura, MD
11:06-11:11	How Human Behavior – Even With Vascular Surgeons/Specialists – Is Controlled By Biases And Rationalizations: How To Overcome These And Perform Better Scott L. Stevens, MD
	ISSUES RE EVIDENCE BASED PRACTICE
11:12-11:17	RCTs Are Too Often Underpowered With Other Serious Flaws: So They Are Misused As Evidence, Negatively Influencing Practice And Innovation In Health Care Frans L. Moll, MD, PhD
11:18-11:23	Why Systematic Reviews, Meta-Analyses And RCTs Can Be Misleading: What To Do About It: Does Current Wisdom Help Janet T. Powell, MD, PhD
11:24-11:29	Answering The Current Big Questions: Vascular Surgeons/Specialists Need To Develop High Quality Evidence To Improve Care: How And Why To Do It Jens Eldrup-Jorgensen, MD
	ISSUES IMPORTANT TO VASCULAR SURGEONS/ SPECIALISTS
11:30-11:35	How Can Vascular Surgeons/Specialists Become Successful Entrepreneurs: What To Do And What Not To Do
11:36-11:41	Jeffrey H. Lawson, MD, PhD The Distracted Surgeon: Lessons Learned From Running Multiple Rooms: Is It Really More Efficient Or A Bad Practice Resulting In Poor Patient Care Patrick A. Stone, MD
	ISSUES IN VASCULAR TRAINING
11:42-11:47	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, MD
11:48-11:53	Obtaining Cardiac Surgery Training After Vascular Surgery Training: I Did It, So It's Possible: Is It Worthwhile: Advantages And Disadvantages
11:54-12:00	Jennifer L. Perri, MD, MBA Panel Discussion

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

SESSION 35 (Grand Ballroom West, 3rd Floor)

RECORDED LIVE CHALLENGING CASES AND INNOVATIVE TECHNIQUES FROM THE PLINIO ROSSI AND LINC COMPONENTS

Moderators: Fabrizio Fanelli, MD Andrew Holden, MBChB Carlo Setacci, MD

THE PLINIO ROSSI COMPONENT

1:00 – 1:08

DES Versus DCB+BMS Versus BMS+DCB Versus DCB+DES: The Winner Is: Evaluation Of The Different Treatment Strategies With A Focus On The Now Increasingly Common Combination Of DCB Plus BMS

Fabrizio Fanelli, MD

1.08 – 1.16 Preservation Of Left Subclavian Artery In TEVAR With Off-The-Shelf Branch Stent-Graft Technology Dittmar Böckler, MD

1:16 – 1:24 The Knickerbocker Technique – An Underutilized And Highly Effective Strategy For False Lumen Management In Chronic Aortic Dissection

Andrew Holden, MBChB

1:25 - 1:30 Panel Discussion

THE LINC COMPONENT

Moderators: Dierk Scheinert, MD Andrej Schmidt, MD Daniela Branzan, MD

1:30 – 1:39 Recorded Case: Tibial Reconstruction With Enhanced Local Drug Delivery Using The Temporary Spur Stent System

Andrej Schmidt, MD

1:40 – 1:45 Distal Micro-Embolization During Complex Endovascular Procedures – The Underestimated Threat Peter A. Schneider, MD

1:46 – 1:55 Endovascular Reconstruction Of A Highly Calcified, Obstructed Tibial Trifurcation With Multivessel Distal Protection Andrej Schmidt, MD

1:55 – 1:59 Panel Discussion

SESSION 36 (Grand Ballroom West, 3rd Floor)

MORE ISSUES IMPORTANT IN VASCULAR SURGERY: HISTORY, PRACTICE PATTERNS, VALUE OF GUIDELINES AND RCTs. MALPRACTICE.

SCIENCE, TRAINING AND HUMAN BEHAVIOR

Moderators: Jack L. Cronenwett, MD Timothy M. Sullivan, MD Jerry Goldstone, MD

2:00 – 2:05 A Tribute To Hans-Henning Eckstein, MD, PhD (1955-2024)
Sebastian E. Debus, MD, PhD (PowerPoint Presentation with

Synched Audio)

VASCULAR HISTORY

2:06 – 2:11 Einstein And Nissen: A New York Story About An AAA Wrapped In Cellophane Frank J. Criado, MD

2:12 – 2:17 The SVS Digital History Archive: What Is It, Why It Is Important And Should Vascular Surgeons Contribute To It And Use It

Jerry Goldstone, MD

2:18 - 2:23Multispecialty Vascular Care Departments Or Units Within Institutions Are Best For Patients And Physicians: How Should The Dominant Specialty And Leader Be Chosen: How Should Rewards Be Distributed Barry T. Katzen, MD VASCULAR SURGERY'S ROLE AND RECOGNITION

- Vascular Surgery's Identity And Role Is Usually In A 2:24 - 2:29Subservient Position Within A Heart And Vascular Unit: What Should Be Done To Correct This Inequity In The Interest Of Better Patient Care Timur P. Sarac, MD
- 2:30 2:35Vascular Surgery Needs An Independent ABMS Approved Board And Associated RRC To Thrive As A Specialty In The Medical Hierarchy And To Have Its Value Appropriately Recognized Sean P. Lyden, MD
- 2:36 2:41The Negative Impact Of Hospital Administrators On Vascular Surgery And Vascular Surgeons' Careers: Why Is It Happening, Why Is It Worse For Vascular Surgeons Than Other Specialists And What Can Be Done To Counteract It Samuel R. Money, MD, MBA
- The Role Of Women In Vascular Surgery: What Has It 2:42 - 2:47Been And Where Is It Going Cynthia K. Shortell, MD
- 2.48 2.56**Panel Discussion**

ISSUES RE THE CONFLICT BETWEEN ETHICS AND **FINANCES**

- 2:56 3:01Simultaneous Overuse And Undertreatment Of Patients With PAD And CLTI: Why The Problem Exists And What Should Be Done To Fix It Joseph L. Mills, MD
- 3:02 3:07Physician And Industry Responsibility In Overuse Of Technology (Atherectomy, CAS, EVAR, Etc.): Especially Important In View Of The Recent Media Spotlight On This Issue Murray L. Shames, MD

UNIONIZATION FOR VASCULAR SURGEONS

- 3:08 3:13Why Vascular Surgeons Should Unionize: The Pros And Cons Enrico Ascher, MD
- Racial And Ethnic Disparities In Clinical Trials And 3:14 - 3:19The Treatment Of CLTI: What Are The Causes And What Can Be Done About Them Vincent L. Rowe, MD
- **Panel Discussion And Break** 3:20 - 3:32Visit Exhibits And Pavilions (2nd and 3rd Floors)

SESSION 37 (Grand Ballroom West, 3rd Floor) MORE ISSUE-RELATED TOPICS IMPORTANT TO VASCULAR SURGEONS AND VASCULAR SPECIALISTS; ISSUES RELATED TO OUTPATIENT CENTERS OR OFFICE BASED LABS (OBLs)

Moderators: Anton N. Sidawy, MD, MPH Krishna Jain, MD

3:32 - 3:37Vascular Spinoff Revenue In Tertiary Healthcare Systems: Substantially More Downstream Benefits From Vascular Surgeons: How To Make Hospital Administrators Appreciate The Value Of Vascular Surgeons And Reward Them Appropriately Joseph V. Lombardi, MD, MBA

- 3:38 3:43 The Significant Burden Of Iatrogenic Vascular Injury
 On The Vascular Surgery Workforce At A Tertiary Care
 Center: What Can And Should Be Done To Offset This
 Problem
 Caron B. Rockman, MD
 - 3:44 3:49 Current Medicare Reimbursement For Complex AAAs (F/B/EVAR) Is Inadequate For Physicians And Less Profitable For Hospitals: How Does It Harm Vascular Surgery

 Samuel R. Money, MD, MBA
- 3:50 3:55 How And Why Aortic And Lower Extremity Artery
 Gender Differences Matter In The Treatment Of
 Vascular Disease: What Can Be Done To Offset This
 Problem
 Linda M. Harris, MD
- 3:56 4:01 The Value Of Telehealth In Vascular Surgery: Reimbursement Issues And When Is It Misleading Misty D. Humphries, MD, MAS

ISSUES RELATED TO OUTPATIENT CENTERS AND

- 4:02 4:07 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, MD Robert M. Zwolak, MD, PhD
- 4:08 4:13 Limb Preservation Centers: Benefit To Patients,
 Physicians And Health Care Systems: How To Create
 One
 Krishna Jain, MD
- 4:14 4:19 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, MD
- 4:20 4:25 How To Make Outpatient Vascular Treatment Facilities (OBLs, ASCs) Safe, Effective And Profitable Without Doing Unjustified Procedures: How Can They Make Uniquely Important Vascular Research Contributions Christopher J. Kwolek, MD, MBA Enrico Ascher, MD

4:26 - 4:32 Panel Discussion

SESSION 38 (Grand Ballroom West, 3rd Floor)
UPDATES AND ISSUES IMPORTANT TO ALL
VASCULAR SURGEONS AND SPECIALISTS: FUTURE
REIMBURSEMENT; IMPROVING VASCULAR CARE
QUALITY; FIXING FALSE TESTIMONY; FLAWED
PEER REVIEW; FDA IMPROVEMENTS; LEARNING
HEALTH SYSTEMS

Moderators: Sean P. Roddy, MD Jack L. Cronenwett, MD Kim J. Hodgson, MD

VASCULAR REIMBURSEMENT ISSUES

- 4:32 4:37 What's Happening With Vascular Surgeon Reimbursement In 2024 And What Are The Prospects For 2025: For Hospital And OBL Procedures Sean P. Roddy, MD
- 4:38 4:43 Current Medicare Reimbursement For Ch/EVAR And F/EVAR Is Inadequate: The Situation Is Untenable: How Did We Get There And Can The Problem Be Fixed Clayton J. Brinster, MD

4:44 – 4:49 Reimbursement For Vascular Procedures Under CMS
Is Deeply Flawed And Subject To The Bias Of Others:
It Results In Unethical Compensatory Behavior: What
Can Be Done About It
Sean P. Roddy, MD

ISSUES RE QUALITY OF VASCULAR CARE

- 4:50 4:55 New Developments In And Benefits From VQI Participation: It Will Make For Better Doctors And Vascular Care And It Will Cut Hospital Costs Jens Eldrup-Jorgensen, MD
- 4.56 5.01 The SVS/ACS Vascular Verification Program (VVP)
 To Assure Quality Vascular Care In Inpatient And
 Outpatient Programs: What Is It And How Will It Help
 Vascular Surgery
 Anton N. Sidawy, MD, MPH
- 5:02 5:07 How Can The Insurance Industry Improve The Quality And Appropriateness Of Vascular Care And Help Vascular Surgery Survive In A Competitive World Russell H. Samson, MD, RVT

PUNISHING FALSE TESTIMONY

- 5:08 5:13 How Do We Hold Physicians Who Provide False Or Misleading Testimony Against Vascular Surgeons Accountable: Has The SVS Committee On This Topic Ever Done Anything To Do What Should Be Done O. William Brown, MD, JD
- 5:14 5:20 Panel Discussion

PEER REVIEW RELATED ISSUES

- 5.20 5.25 Our System Of Peer Reviews Is Flawed: Within Hospitals; Within Journal Reviews: How Might Artificial Intelligence (AI) Improve Them *Timothy M. Sullivan, MD*
- 5:26 5:34 What Is An Impact Factor For A Peer Reviewed Journal Or An Article: What Is Plum X And H-Index: How Are They Calculated And Why Are They Important: What Constitutes Plagiarism It's Not Simple (8-Minute Presentation)

 Peter F. Lawrence, MD
 Peter Gloviczki, MD

FDA RELATED ISSUES

- 5.35 5.40 I Was From The Government And I'm Here To Help:
 FDA Resources To Assure Safe And Effective Medical
 Devices In Vascular Disease: What Is The LEAF
 Initiative To Assure That Trials Are Appropriate For
 FDA Approval
 Robert E. Lee, MD
 Philip P. Goodney, MD, MS
- 5:41 5:46 Why Do IDEs Fail To Get FDA Approval: Updates
 To The FDA 510 (K) Program And Why They Are
 Important
 Valerie M. Merkle, PhD
- 5:47 5:52 Different Perspectives From Industry And The FDA Regarding The Importance Of Innovation, Engineering And Financial Rewards That Influence Innovation Dorothy B. Abel, BSBME
- 5:53 5:58 What Is A Learning Health System And Why Should It Matter To Vascular Surgery

 Charles C. Miller, PhD
- 5.59 6.05 Panel Discussion End of Program E

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 TOPICS

SESSION 39 (Trianon Ballroom, 3rd Floor)

Trianon Ballroom, 3rd Floor

MORE TOPICS RELATED TO THE THORACIC AORTA, AORTIC DISSECTIONS, INFLAMMATORY ANEURYSMS AND THEIR TREATMENT

Moderators: Ramon Berguer, MD, PhD Timothy A. Resch, MD, PhD

- 6:50 6:55

 A Novel Low Profile Stent-Graft For The Treatment Of All Thoracic Aortic Segments: What Makes It Unique And Clinical Status

 Francesco Setacci, MD
- 6:56 7:01 Options For Left Subclavian Revascularization
 During TEVAR: Laser Fenestration, Open Bypass,
 Single Branch Device (Gore), Etc.: Advantages And
 Limitations Of Each
 Timothy A. Resch, MD, PhD
- 7.02 7.07 Challenges And Successes With Endografts In The Treatment Of Ascending Aortic Dissections (TAADs), Penetrating Ulcers And Pseudoaneurysms Rodney A. White, MD
- 7:08 7:13 DEBATE: The STABILISE Technique To Eliminate The False Lumen And Relaminate The Aorta Will Change The Treatment Of Acute And Subacute TBADs And Will Replace Most False Lumen Occlusion Devices And F/B/EVAR Treatments: How To Do It And Precautions Igor A. Laskowski, MD, PhD Heepeel Chang, MD
- 7:14 7:19 DEBATE: Not So Fast! A Multimodular Approach To Treating Acute, Subacute And Chronic TBADs With TAAAs: Who Needs A F/B/EVAR; Who Needs A Candy-Plug Or Other Techniques

 Tilo Kölbel, MD, PhD

 Fiona Rohlffs, MD, PhD
- 7:20 7:25 Outer/Inner/Upward Branches Or Fenestrations: Strategies For Complex Aortic Repair For Patients With Chronic TBADs: Advantages And Limitations Of Each Bijan Modarai, PhD
- 7.26 7.31 Current Advances In The Treatment For Inflammatory
 Aneurysms: How Effective Are EVAR And TEVAR
 Furuzan Numan, MD
- 7.32 7.37 Update On The Experience With BeGrafts (From Bentley), A Balloon Expandable Covered Stent For Treating Aortic Coarctations, Aneurysms And Midaortic Syndrome: Advantages And Limitations Elchanan Bruckheimer, MBBS
- 7:38 7:43 Relay Custom Made Endografts (Terumo) For TEVAR, Scalloped, Etc.: When And Why Are They Advantageous And Do They Still Have A Role In View Of Other New Endografts

 Michael P. Jenkins, MBBS, BSc, MS
 Mo S. Hamady, MD
- 7:44 7:51 Panel Discussion

SESSION 40 (Trianon Ballroom, 3rd Floor)

MORE ADVANCES RELATED TO TREATING PATHOLOGY INVOLVING THE ASCENDING AORTA AND THE AORTIC ARCH; AORTIC DISSECTIONS, INTRAMURAL HEMATOMAS (IMHs) AND THEIR TREATMENT

Moderators: Rodney A. White, MD Tilo Kölbel, MD, PhD

- 7:52 7:57 Debranching Aortic Arch Branches: When And How To Do It; Technical Tips And How To Avoid Pitfalls Bernardo C. Mendes, MD
- 7.58 8.03 With TAADs When And How Should The Distal Aorta Be Treated By TEVAR Before Repair Of The Ascending Aorta Ourania Preventza, MD Joseph S. Coselli, MD
- 8.04 8.09 With TAADs Why And When Should TEVAR Of The Descending Thoracic Aorta Be Performed Prior To Open Type A Repair: Should The Procedures Be Staged Mazin Foteh, MD
- 8:10 8:15 The Present Status Of Endovascular Treatment For Lesions Of The Aortic Arch: What Can Be Done, What Can't Be Done: What Has Changed In The Last Decade Gustavo S. Oderich, MD
- 8:16 8:21 With Chronic TBADs Laser Assisted Resection Of The Dissection Septum Or Membrane Creates A Single Lumen TEVAR Landing Zone: How Is This Technique Performed And Updated Results

 Nuno V. Dias, MD, PhD

 Björn Sonesson, MD, PhD
- 8:22 8:27 Panel Discussion
- 8:27 8:32 Multicenter Study Of Physician Modified Endografts (PMEGs) For TAAA And Complex AAA Repairs: What Does It Show About Their Advantages And Limitations
 Nikolaos Tsilimparis, MD, PhD
- 8:33 8:38 Updated 5-Year Results From The European Experience With The Novel Nexus Single And Double (Duo) Branched (OTS) Endovascular Devices (From Endospan) For The Treatment Of Zone 0 And 1 Aortic Arch Aneurysms: What Makes This Device Unique Mario L. Lachat, MD
- 8:39 8:44 Status And Results From The US TRIOMPHE Trial Of The Endospan Nexus Endograft (OTS) For Treating Complex Aortic Arch Lesions Including Chronic Dissections

 Ross Milner, MD*
- 8:45 8:50 In Situ Fenestration For Endovascular Repair Of Aortic Arch Lesions: Does It Reduce Perioperative Strokes And How To Avoid Cerebral Ischemia During The Procedure Ralf R. Kolvenbach, MD
- 8:51 8:56 Origins Of Intramural Hematomas (IMHs): Why So Many Prove Benign And Do Well With Medical Treatment: When And How To Treat Them With TEVAR
 Frank J. Criado, MD
- 8:57 9:03 Panel Discussion
- 9:03 9:16 Break Visit Exhibits And Pavilions (2nd and 3rd Floors)

SESSION 41 (Trianon Ballroom, 3rd Floor)

OPEN AND ENDO TREATMENT OF COMPLEX AAAs (JUXTA, PARA- AND SUPRA-RENAL) AND TAAAS; INTERESTING NEW DEVICES FOR THEIR TREATMENT

Moderators: Christopher J. Kwolek, MD, MBA Gilbert R. Upchurch, MD

COMPLEX AAAs AND TAAAs

- 9:16 9:21 Does Open Repair Still Remain The Gold Standard For Complex AAA Repair: What The Updated And Good Studies That Bear On This Question Show: It's Not The Old RCTs (EVAR 1, DREAM And OVER)

 George Geroulakos, MD, PhD
- 9:22 9:27 TAAA Repairs For Aneurysms From Dissections And Degenerative Disease Are Best Treated By Combining Open And Endo Techniques: Technical Tips Yamume Tshomba, MD
- 9:28 9:33 Hybrid Repair Of A TAAA (Proximal Endograft +
 Distal Open Repair The Upchurch Procedure): When
 Is It Indicated; What Are The Advantages And Updated
 Results
 Gilbert R. Upchurch, MD
 Sal Scali, MD
 Dean Arnaoutakis, MD
- 9:34 9:39 Endovascular Solutions To Effectively Deal With Hostile Neck Anatomy Of AAAs Other Than F/B/ EVAR: Why They Should Be Favored Stavros K. Kakkos, MD, PhD
- 9:40 9:45

 French National (Real World) Comparison Of Results
 Of F/EVAR And Open Repair (ORFEVAR Trial)
 For The Treatment Of Complex AAA (Juxtarenal,
 Suprarenal And Type IV TAAAs): Do We Need An
 RCT
 Frederic Cochennec, MD, PhD
- 9:46 9:52 Panel Discussion
- 9.52 9.57 Optimal Surveillance Methods And Timing After F/B/ EVAR And EVAR Sara L. Zettervall, MD
- 9.58–10.03 Secondary Interventions Up To 30 Days Following F/B/ EVAR Of Complex AAAs: How Morbid Are They Jonathan R. Boyle, MD

TOPICS RELATED TO INTERESTING NEW DEVICES

- 10:04-10:09 Shape Memory Polymer Embolization Devices To Treat Gutter Endoleaks After Parallel Grafts: Technique And Results

 James F. McKinsey, MD
- 10:10-10:15 Update On The TAMBE Endograft Device (Gore)
 For Treating Complex AAAs And TAAAs: Current
 Configuration And Advantages, Technique For
 Insertion: Now Approved By The FDA
 Carlos H. Timaran, MD
- 10:16-10:21 Update On The WeFlow Device For Juxtarenal AAA, TAAA And Arch Repairs: A New Inner Branch And Outer Branch Approach: How Does It Work And Promising Results
- Wei Guo, MD (PowerPoint Presentation With Synched Audio)

 10:22-10:27 How To Prevent Patch Aneurysms After Open TAAA Repair With Long Antegrade Grafts: How To Treat Them When They Occur Endo, Open Manju Kalra, MBBS
- 10:28-10:33 Use Of FORS Technology (Philips) In The Treatment Of TAAAs: Technical Tips In Its Use: What Are Its Advantages, Limitations And Disadvantages

 Geert Willem H. Schurink, MD, PhD

10:34-10:40 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. Maldonado, MD Rodney A. White, MD

TREATMENT OF ILIAC ANEURYSMS WITH IBDs OR PARALLEL GRAFTS

- 10:40-10:45

 15-Year Experience With Iliac Branched Endografts For Aortoiliac Aneurysms: Advantages, Limitations: Long-Term Results Of The Various IBD Devices

 Giovanni Pratesi. MD
- 10.46-10.51 5-Year Outcomes Of The ICEBERG Study Of The Gore IBD (IBE Device) For Revascularizing The Hypogastric Artery With Aortoiliac Aneurysms: Advantages And Limitations

 Michel Reijnen, MD, PhD
- 10.52-10.57

 5-Year Outcomes Of The Cook PRESERVE II Study Of The Cook IBD (ZBIS): Why Is It Different From Other IBD Devices: When Is It Contraindicated W. Anthony Lee, MD
- 10:58-11:03 Advantages And Current Status Of The Artivion IBD Device For Treating Common And Internal Iliac Artery Aneurysms: From The PLIANT II Multicenter Study: When Will This Device Be Available In The US

 Lee Bouwman, MD, PhD
- 11:04-11:09 Parallel Endograft Techniques For Treating Common
 And Internal Iliac Artery Aneurysms: When And Why
 They Are Better Than IBDs And How To Make Them
 Work Effectively
 Armando C. Lobato, MD, PhD

11:10-11:15 Panel Discussion

UPDATE ON MULTILAYER FLOW MODULATING (MLFM) AND OTHER BARE STENTS

- 11:16-11:21 Why MLFM Bare Stents Should Be The Treatment Of Choice For Visceral, Peripheral And Iliac Aneurysms: Advantages And Has Rupture Been Universally Prevented: What About For TAAAs

 Michel C. Henry, MD
- 11:22-11:27 Treatment Of Aortic Dissections With Multilayer Bare Stents (MLFM) And 9 Years Of Follow Up: When Are They Effective And When Aren't They Victor S. Costache, MD, PhD Ivo Petrov, MD, PhD
- 11:28-11:33 Value Of Multilayer Bare Stents (MLFM Allay From Intressa) In The Treatment Of TBAD Patients With Or At High Risk Of End Organ Malperfusion: Long-Term Results

 Claude D. Vaislic, MD
- 11:34-11:39 Role Of Bare Metal AMDS Stents From Artivion
 (Formerly Cryolife/Jotec) For Repair Of Acute Type A
 Dissections: Indications, Results And Limitations.

 Wilson Y. Szeto, MD (PowerPoint Presentation With Synched Audio)
- 11:40-11:45 Thoraflex Hybrid Graft Rescue When Treatment Of
 Aortic Dissection In The Arch With Bare Stents (AMDS
 From Artivion And Allay From Intressa) Fails: What
 Is The Mechanism Of Failure And What Is The Bailout
 Procedure

Mazin Foteh, MD

11:46-11:51 Aortic Dissection In Pregnancy: Why Is The Mortality So High: Why Is Its Diagnosis Delayed: How Should Its Treatment Differ From Non-Pregnant Patients *Richard G.J. Gibbs, FRCS*

11:52-12:00 Panel Discussion

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

SESSION 43 (Trianon Ballroom, 3rd Floor)
MORE NEW DEVELOPMENTS IN AAA TREATMENT
AND STANDARD EVAR: A NEW DEVICE TO SLOW
AAA GROWTH; AAA NECK DILATATION AFTER
EVAR; VALUE OF LOW PROFILE AAA ENDOGRAFTS;
IMPROVED ULTRASOUND SURVEILLANCE AND
ALL AAAs ARE NOT TIME BOMBS WAITING TO
EXPLODE

Moderators: Michael L. Marin, MD Stephan Haulon, MD

- 1:00 1:05 Endovascular Strategies For Repairing Giant Hypogastric Artery Aneurysms (>6 cm): What Special Techniques Are Needed Jacques Busquet, MD
- 1:06 1:11 Debunking The Lingering Myths Of Asymmetrical Saccular Aneurysms: Are They All Ticking Time Bombs, How Should Their Diameter Be Measured To Include The Normal Aorta Or Not: Do They Rupture At A Smaller Diameter

 Frank J. Criado, MD
- 1:12 1:17 A Direct Comparison Of Major Contemporary EVAR
 Devices Looking At Long-Term Efficacy And Patient
 Survival Using Big Data And Linkage Techniques
 Ramon L. Varcoe, MBBS, MS, PhD
- 1:18 1:23 EVAR Patients On Anticoagulation Have Increased Mortality, Endoleaks, Sac Expansion And Reinterventions: From A Meta-Analysis Of >35,000 Patients

 George A. Antoniou, MD, PhD, MSc
- 1:24 1:29 Rapid Gate Cannulation During EVAR: A Technical Tip To Make It Quick And Easy Felice Pecoraro, MD
- 1:30 1:35 Panel Discussion
- 1:36 1:41 Update On Technical Tips To Perform SAFE Large Sheath Percutaneous Femoral Access And Closure For Complex AAA EVAR In Obese Or Scarred Groins – Even With Calcified Arteries: It Is Almost Always Possible Barend M.E. Mees, MD, PhD
- 1:42 1:47 Lessons Learned From The Nellix Experience: Why
 Sac Sealing Should Still Be Pursued For EVAR, But Not
 From The Nellix Platform: What Changes Would Make
 Sac Sealing Devices Work
 Matt M. Thompson, MD
- 1:48 1:53 How To Minimize Gutter Type 1A Endoleaks With Chimney EVAR (Ch/EVAR): How Does A Standard Protocol Help; How To Treat Them When They Occur David J. Minion, MD
- 1:54 1:59 **DEBATE:** Repairs Of Small AAAs (<5.5 cm) Are Justified By Many Evidence Based Reasons: What Are These Reasons And What Are The Downsides *Jessica P. Simons, MD, MPH*

2:00 – 2:05 DEBATE: There Is High Level Evidence That Men With AAAs <5.5 cm Should NOT Undergo Elective Repair: AAAs <6 cm In Men Rarely Rupture: The Thresholds For Repair Of Aortic And Iliac Aneurysms Need To Be Raised

Anders Wanhainen, MD, PhD

2:06 - 2:11 Panel Disccusion

SESSION 44 (Trianon Ballroom, 3rd Floor)

MORE NEW DEVELOPMENTS IN AAAS: WITH HERITABLE AORTIC DISEASE (CONNECTIVE TISSUE GENETIC DISORDERS): HOW DOES THROMBUS LOAD EFFECT PROGNOSIS AFTER EVAR; OTHER RELATED AAA TOPICS

Moderators: Evan C. Lipsitz, MD, MBA James H. Black, III, MD

TREATMENT OF AORTIC ANEURYSMS WITH HERITABLE AORTIC DISEASE AND CONNECTIVE TISSUE DISORDERS

- 2.12 2:17 In Patients With AAAs From Genetic Aortopathy
 (Heritable Aortic Disease): Is Active Exercise Beneficial
 Or Harmful
 James H. Black, III, MD
- 2:18 2:23 Results Of Endovascular Graft Aortic Repair In Mixed Connective Tissue Disease (Heritable Aortic Disease) Patients: Is It Time To Change The Guidelines: In What Circumstance Is Endovascular Repair Indicated Sal Scali, MD
- 2:24 2:29 Reasons To Change From Open To Endovascular Aortic Aneurysm Repair In Patients With Heritable Aortic Disease (Connective Tissue Disorders): When Is Open Repair Mandatory In This Setting; Technical Tips Michael J. Jacobs, MD
- 2:30 2:35 Value Of F/B/EVAR In The Management Of Failed Open Repairs Of Complex AAAs In Patients With Heritable Aortic Disease: Technical Tips Barend M.E. Mees, MD, PhD Geert Willem H. Schurink, MD, PhD Michael J. Jacobs, MD
- 2.36 2.41 Why Selection Of Bridging Stent-Graft Type Is Vitally Important For F/B/EVAR Treatment Of Complex AAAs In Patients With Heritable Aortic Disease: Which Stent-Graft Is Best Gustavo S. Oderich, MD Carlos H. Timaran, MD Andres Schanzer, MD

THE EFFECT OF AAA SAC THROMBUS LOAD

- 2:42 2:47 DEBATE: Large Flow Luminal Space In An AAA Sac With Minimal Mural Thrombus Is Associated With Adverse Events After EVAR: It Is More Important Than AAA Sac Size: Thrombus May Be Protective Hence J.M. Verhagen, MD, PhD
- 2:48 2:53 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 David H. Deaton, MD
- 2:54 2:59 An 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, MD, PhD Stephan Haulon, MD

3:00 - 3:05	Value Of Preemptive Embolization Of AAA Side
	Branches (IMA And Lumbars) Prior To EVAR:
	Objective Evidence That It Prevents Sac Enlargement Daniela Branzan, MD
	Andrej Schmidt, MD
3:06 - 3:12	Panel Discussion
3:12 - 3:24	Break - Visit Exhibits And Pavilions (2nd and 3rd
	Floors)
SESSION 45	(Trianon Ballroom, 3rd Floor)
	OT AORTIC TOPICS
	Peter Gloviczki, MD
	Jade S. Hiramoto, MD
3:24 — 3:29	What's New And What's Wrong With The New SVS Guidelines For Aortic Surgery Michael C. Stoner, MD
3:30 - 3:35	Aorto-Enteric Fistulas Associated With Infected EVAR
	Or Open Prosthetic Grafts: What Are The Differences
	Between Them And What Are The Implications For
	Treatment
0.07 0.71	Sal Scali, MD
3:36-3:41	Active AAA Sac Management With Polymer Plugs: How To Use Them To Improve Outcomes By
	Preventing Endoleaks After EVAR: Results From The
	SHAPE AAA Trial (From Shape Memory)
	Andrew Holden, MBChB
3:42 - 3:47	Fenestrated And Branched Graft Treatment Of Failed
	Open TAAA Repairs
2 (0 2 52	Mazin Foteh, MD
3:48 — 3:53	Aortic Dissection Tear Size And Morphology: Why Is It Important: How Do Bare Stents Prevent Stent-Graft
	Induced New Entry Tears (SINEs) After Treatment Of
	Aortic Dissections
	Shang Loh, MD
3:54 — 3:59	Panel Discussion
4:00-4:05	Coil Embolization To Treat Aortic 'Blebs', Entry-Tears
	And Pseudoaneurysms: How Does It Work, When Is I Indicated, And Results
	Jos C. van den Berg, MD, PhD
4:06 - 4:11	Endovascular Treatment In Patients With Connective
	Tissue Disorders: When Can This Be Considered First
	Choice Treatment: Technical Tips And Results
/ 40 / 45	Piergiorgio Cao, MD
4:12 — 4:17	Endovascular Management For Isolated Abdominal Aortic Dissection: When To Treat Invasively And
	When Not; What To Do If It Involves The Juxtarenal
	Aorta: How Does Treatment Differ From That Of
	AAAs
	Chang Shu, MD
4:18 — 4:23	What Modifications Of The Distal Components Of F/
	EVAR Endografts Help To Avoid Branch Vessel Stent-
	Graft Compression: Indications And Results Nuno V. Dias, MD, PhD
4:24 — 4:29	Lipophilic Statins Like Lipitor Increase Risk Of
4.24 4.27	Paraplegia More Than Hydrophilic Statins Like Creston
	After B/EVAR For TAAA Repairs: What Is The
	Mechanism
	Jade S. Hiramoto, MD
4:30 - 4:35	Panel Discussion

SESSION 46	(Trianon Ballroom, 3rd Floor)
	ORT HOT NEW TOPICS RELATED TO
AORTC D	ISEASE AND ITS TREATMENT
Moderators:	Andres Schanzer, MD
	Peter F. Lawrence, MD
4:36-4:41	DEBATE ROUND 3 (Updated From 2023): The
	Vast Majority Of Failed EVARs Can Be Treated
	Endovascularly
4:42 — 4:47	Ross Milner, MD DEPATE POLIND 3 (Undated From 2023), Not
4:42 - 4:47	DEBATE ROUND 3 (Updated From 2023): Not So: Many Failed EVARs Are Best Repaired By Open
	Conversion
	Michel Makaroun, MD
4:48 - 4:53	Are Low Profile Devices For EVAR And TEVAR
	Improving Or Worsening Their Outcomes
	Naoki Fujimura, MD, PhD
4:54 — 4:59	There Is No Doubt AAA Screening Saves Lives: Do We
	Need Changes In The Screening Criteria Maarit Venermo, MD, PhD
5:00 — 5:05	What Is The AS-Score And How Does It Influence SCI
J:00 — J:03	Risk After Endovascular TAAA Repair: What Can Be
	Done To Offset This
	Tilo Kölbel, MD, PhD
5:06 - 5:11	What Are The Differences Between The ACC/AHA
	And The European Guidelines On Ascending Aorta
	And Arch Disease Ourania Preventza, MD
5:12 — 5:17	Panel Discussion
5:18 — 5:23	10 Years Of PMEGs For Complex AAAs: How Do The
	Results Vary With And Without An IDE, The Extent Of
	The AAA And With And Without A Prior EVAR
	Marc L. Schermerhorn, MD
5:24 - 5:29	With Esophageal Cancer, When Is Prophylactic TEVAR
	Indicated To Prevent An Aorto-Esophageal Fistula: It Improves Palliation But Does It improve Survival
	I-Hui Wu, MD, PhD
5:30 — 5:35	Small Tips And Modifications In Radiation Safety Can
	Make A Huge Impact On Staff Exposure: What Are
	They And How Can They Be Enforced
	Maarit Venermo, MD, PhD
5:36 - 5:41	Pediatric Abdominal Aortic Aneurysms: What Is Their
	Etiology And How Should They Be Managed Sherene Shalhub, MD, MPH
5:42 - 5:47	B/EVAR In Patients With A Narrow Paravisceral Aorta
0.42 0.47	(<2.5 cm) Is Best Performed With Inner Branched
	Endografts: Technical Tips To Achieve Optimal Results
	Michele Antonello, MD, PhD
	Franco Grego, MD
5:48 - 5:53	ZFEN Versus Treo Endografts As Platforms For
	PMEG F/EVARs: Which Is Best And When: Technical
	Considerations, Advantages And Disadvantages Joshua D. Adams, MD
5:54 — 5:59	When Can Duplex Ultrasound Fully Replace CT
	Surveillance After EVAR: When Is CT Surveillance
	Necessary
	Sal Scali, MD
6:00 — 6:10	Panel Discussion
	End of Program F

THURSDAY, NOVEMBER 21, 2024

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

6:56 A.M. - 6:00 P.M.

Location: Grand Ballroom East, 3rd Floor

PROGRAM H (SESSIONS 55-63)

New Or Improved Devices For: Standard EVAR 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

7:00 A.M. - 5:59 P.M.

Location: Grand Ballroom West, 3rd Floor

PROGRAM I (SESSIONS 64-73)

Superficial Venous Disease

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

Location: Trianon Ballroom, 3rd Floor Course Leaders: Jose I. Almeida, MD Lowell S. Kabnick, MD

Lowell S. Kabnick, MD Peter Gloviczki, MD Thomas W. Wakefield, MD

Steve Elias, MD

PROGRAM J (SESSIONS 74-78)

Multidisciplinary Stroke Prevention And Treatment

7:30 A.M. - 12:15 P.M.

Location: Murray Hill Suites, 2nd Floor Course Leader: Allan L. Brook, MD

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, CONCEPTS

Moderators: Frank J. Veith, MD Michael B. Silva, Jr., MD

Richard F. Neville, MD

6:56 – 7:01 A Patient-Centric Smartphone App For Monitoring Vascular And Endovascular Procedures: What Does It

Measure And How Is It Helpful

Todd R. Vogel, MD, MPH

7:02 - 7:07

With Endovascular Treatments: It Can Accommodate 3 Devices At Once And Be Operated From A Great Distance Gary M. Ansel, MD 7:08 - 7:13Pediatric Vascular And Endovascular Surgery Is A New Subspecialty Within Vascular Surgery: In Pediatric Patients How Important Are Endovascular Techniques, What Modifications Are Needed And Why Most Aortic Lesions Need To Be Treated By Open Surgery Alex Fairman, MD 7:14 - 7:19Management Of Pediatric Arterial And Aortic Aneurysms In 2024: Differing Etiologies Necessitating Different Therapeutic Interventions James C. Stanley, MD 7:20 - 7:25Update On Remote Monitoring Of Vascular Graft Function And Other Parameters Including Blood Pressure: Where Is It At And Where Is It Going Richard F. Neville, MD 7:26 - 7:31**Panel Discussion** 7:32 - 7:37Provider Skill Is Not Appropriately Recognized And Rewarded In The Health Care Value Equation Of Value = Outcome/Cost: Even Within A Specialty All Doctors Are Not Equal: There Are Stars, Superstars And Journeymen: What To Do About It Lars B. Lonn, MD, PhD 7:38 - 7:43Can Advances In MRI Eliminate Radiation From AAA Diagnosis, Its Endovascular Treatment And Its Follow Up: The Zero Radiation Project And Where It Stands Kak Khee Yeung, MD, PhD 7:44 - 7:49How And Why Do Thoracic Endografts For TEVAR Negatively Affect The Blood Pressure And The Heart: Can A Compliant Endograft Prevent The Problem; How Should It Be Made

A New Robotic Device (From Sentante) To Assist

- Juan C. Parodi, MD (PowerPoint Presentation With Synched Audio)
 7.50 7.55
 The Negative Impact On Cardiovascular
 Hemodynamics: Lessons Of TEVAR, F/EVAR, B/EVAR
 And EVAR: What Causes The Problem And What Can
 Be Done To Fix It
 Sherif A.H. Sultan, MD, PhD
- 7:56 8:01 Current Status And Future Potential Of Pig To Human Organ Xenografting Robert A. Montgomery, MD, DPhil
- 8:02 8:07 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: Matthew J. Eagleton, MD James F. McKinsey, MD Jade S. Hiramoto, MD
- 8:08 8:13 Outcomes Of Leaving The Celiac Trunk Without A Stent Or Stent-Graft During 4 Vessel F/EVAR: Why A Stent Is Unnecessary And Can There Be Problems With Wires Across The Celiac Or SMA Orifices

 Timothy A. Resch, MD, PhD
- 8:14 8:19 Value Of Parallel Endografts In The Management Of TAAAs And Other Aortoiliac Pathology: Why Do They Fail And How To Make Them Work David J. Minion, MD

Complete Aortic Endovascular Repairs For Zones 0-10 Using Parallel Endografts With A Docking Station:

And Pararenal AAAs: Data From ARC Show That I Should Be The Procedure Of Choice Andres Schanzer, MD 8.32 – 8.37 DEBATE: Not So: Other Data Including A Meta-Analysis Indicates That We Still Need An RCT Vers Open Repair To Determine The Best Treatment For Juxta- And Pararenal AAAs Ian Loffus, MD 8.38 – 8.44 Panel Discussion 8.45 – 8.50 Why Balloon Expandable Bridging Stent-Grafts Are Best For F/B/EVAR: Which One Is Best And Why: US Perspective: Advantages Of The Gore VBX Sten Graft Mark A. Farber, MD 8.51 – 8.56 Which Bridging Covered Stents Or Stent-Grafts We Best For F/B/EVAR: A European Perspective: Why Renal Artery Bridging Stent-Grafts Are The Achille Heel In B/EVAR And What To Do About It Martin J. Austermann, MD 8.57 – 9.02 The Role Of Open Surgery As Both An Adjunct An Bailout For Failed F/B/EVAR Procedures For Comp AAAs: How To Choose Between Endo And Open Repairs As The Primary Procedure Bijan Modarai, PhD 9.03 – 9.08 Aneurysm Rupture During The Interval Of Staged Endovascular TAAA Repairs: How Frequent Is It A What Can Be Done To Prevent It: Optimal Delay For Stage 2 Randall R. De Martino, MD Bernardo C. Mendes, MD 9.09 – 9.14 Evolving Roles Of In Situ Laser F/EVAR For TAAA Repairs: Technical Tips And Results Sukgu Han, MD 9.15 – 9.23 Panel Discussion 9.23 – 9.38 Break – Visit Exhibits And Pavilions (2nd and 3re 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: Gustavo S. Oderich, MD Timothy A. Resch, MD, PhD Weiguo Fu, MD 9.38 – 9.43 The Value Of Intraoperative Cone Beam CT During F/B/EVAR: What Defects Can Be Detected That Wo Otherwise Be Missed: What Equipment Is Required Nuno V. Dias, MD, PhD 9.44 – 9.49 Causes Leading To Branch Leaks And Occlusions AF/B/EVAR: What Forces Are Important And What Be Done To Prevent Them Thomas L. Forbes, MD 9.50 – 9.55 Update On Optimal Bridging Stent-Grafts For F/B/EVAR		How And Why To Make Them Work Effectively Despite Doubts About Parallel Grafts: What Are The Limitations
And Pararenal AAAs: Data From ARC Show That I Should Be The Procedure Of Choice Andres Schanzer, MD 8.32 – 8.37 DEBATE: Not So: Other Data Including A Meta-Analysis Indicates That We Still Need An RCT Vers Open Repair To Determine The Best Treatment For Juxta- And Pararenal AAAs Ian Loffus, MD 8.38 – 8.44 Panel Discussion 8.45 – 8.50 Why Balloon Expandable Bridging Stent-Grafts Are Best For F/B/EVAR: Which One Is Best And Why: US Perspective: Advantages Of The Gore VBX Sten Graft Mark A. Farber, MD 8.51 – 8.56 Which Bridging Covered Stents Or Stent-Grafts We Best For F/B/EVAR: A European Perspective: Why Renal Artery Bridging Stent-Grafts Are The Achille Heel In B/EVAR And What To Do About It Martin J. Austermann, MD 8.57 – 9.02 The Role Of Open Surgery As Both An Adjunct An Bailout For Failed F/B/EVAR Procedures For Comp AAAs: How To Choose Between Endo And Open Repairs As The Primary Procedure Bijan Modarai, PhD 9.03 – 9.08 Aneurysm Rupture During The Interval Of Staged Endovascular TAAA Repairs: How Frequent Is It A What Can Be Done To Prevent It: Optimal Delay For Stage 2 Randall R. De Martino, MD Bernardo C. Mendes, MD 9.09 – 9.14 Evolving Roles Of In Situ Laser F/EVAR For TAAA Repairs: Technical Tips And Results Sukgu Han, MD 9.15 – 9.23 Panel Discussion 9.23 – 9.38 Break – Visit Exhibits And Pavilions (2nd and 3re 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: Gustavo S. Oderich, MD Timothy A. Resch, MD, PhD Weiguo Fu, MD 9.38 – 9.43 The Value Of Intraoperative Cone Beam CT During F/B/EVAR: What Defects Can Be Detected That Wo Otherwise Be Missed: What Equipment Is Required Nuno V. Dias, MD, PhD 9.44 – 9.49 Causes Leading To Branch Leaks And Occlusions AF/B/EVAR: What Forces Are Important And What Be Done To Prevent Them Thomas L. Forbes, MD 9.50 – 9.55 Update On Optimal Bridging Stent-Grafts For F/B/EVAR		Manish Mehta, MD, MPH
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		Update On Optimal Bridging Stent-Grafts For F/B/ EVAR: Advantages And Disadvantages Of The BeGraft BeGraft Plus (Bentley) And Advanta (iCast – Getinge) Experience With >2,000 Target Vessels

Athanasios Katsargyris, MD

8:20 - 8:25

9:56—10:01	AAA Sac Behavior After F/B/EVAR: What Is Its Impact On Overall Survival And What Are Its Predictors: From The US Aortic Research Consortium (ARC)
10:02-10:07	Darren B. Schneider, MD Prediction Of 1-Year Mortality After Endovascular TAAA Repair: When Should We NOT Offer The Procedure Adam Beck, MD
10:08-10:13	Panel Discussion
10:14-10:19	Reasons For And Outcomes Of Open AAA Repair In A
	High Volume Endovascular Center Athanasios Katsargyris, MD Eric L.G. Verhoeven, MD, PhD
10:20-10:25	F/EVAR Versus Ch/EVAR For Juxtarenal AAAs: How Do The Results Compare After Up To 8 Years Follow- Up In A Real World Experience Ignacio Escotto, MD
10:26-10:31	Parallel Endografts For Aortoiliac Lesions: The Good, The Bad And The Ugly: A Balanced View Grace J. Wang, MD, MSCE
10:32-10:37	Why Is A Distal AUI The Preferred Approach For ZFEN F/EVAR Treatment Of Failed EVAR Devices: When And How To Do It And Outcomes Martin R. Back, MD
10:38-10:43	With Failed EVAR, When Is F/EVAR The Best Treatment: Tips And Tricks For Performing It Successfully
10:44-10:49	Andres Schanzer, MD Tips For Beginners To Avoid Traps When Starting A F/BEVAR Program: It Is Doable But Not Simple
10:50-10:56	Piotr Myrcha, MD Panel Discussion
SESSION 50	(Grand Ballroom East, 3rd Floor)
	È TO OUR MILITARY AND MILITARY
PHYSICIA	NS: SOME MILITARY HISTORY;
TREATME	NT OF MILITARY AND CIVILIAN
VASCULA	ar injuries and control of
HEMORR	hage; update on reboa
Moderators:	Todd E. Rasmussen, MD Wayne F. Yakes, MD
10:56-11:06	The Battle of Midway: How It Saved The United States And The World (10-Minute Presentation) Wayne F. Yakes, MD
11:07-11:12	Update On A Vascular Surgeon's Impressions About The Devastating Ukraine War: What Is Happening With Major Vascular Injuries Andriy O. Nykonenko, MD
11:13-11:18	Oleksandr Sokolov, MD, PhD What Is Happening With Major Vascular Injuries To Civilians During The Ukraine War: Are The Resources And Medical Personnel Adequate: Are The US And Western Europe Doing Enough
11:19-11:24	Yuliia Nahaliuk, MD New Developments In Clinical Results After 2 Years With Tissue Engineered Human Biological Arterial Grafts (Humacyte) In Military And Civilian Studies Todd E. Rasmussen, MD
11:25-11:30	Charles J. Fox, MD Randall R. De Martino, MD Lessons Learned On Treating Major Military And Civilian Vascular Trauma From The October 7, 2023 Attack On Israel And Its Combat Aftermath Samy S. Nitecki, MD

11:31-11:36 How The US Military Pursued A Policy Of Zero Preventable Combat Deaths From Wounds In Iraq And Afghanistan: Leave No One Behind: How It Applies To Civilian Casualties Todd E. Rasmussen, MD Update On Isolated Limb Perfusion To Enable 11:37-11:42 Traumatically Amputated Limb Reimplantation Zachary M. Arthurs, MD 11:43-11:48 Progress In Resuscitation And Endovascular Trauma Management With Catheter Based Treatments Including REBOA And Other Devices: What Is Partial And Intermittent REBOA And What Is Their Value Tal M. Hörer, MD, PhD When Is REBOA A Valuable Procedure And When Is It 11:49-11:54 Not: Limitations And Precautions: Does It Have Value In Conditions Other Than Trauma Joseph J. DuBose, MD 11:55-12:00 **Panel Discussion** 12:00- 1:00 Lunch Break - Rhinelander Gallery, 2nd Floor 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, MD Martin Björck, MD, PhD Frank J. Veith, MD 1:00 - 1:05How Can The Turndown Rate For Invasive Treatment Of Ruptured AAAs Be Decreased And Is It Worthwhile Matthew W. Mell, MD, MS 1:06 - 1:11Selection Of Patients With Ruptured AAAs For Noninvasive (Comfort) Care Based On Scoring System Or Advanced Age Is Inappropriate And Unfair To Some Patients Isabelle Van Herzeele, MD, PhD (PowerPoint Presentation With Synched Audio) 1:12 - 1:17Only One-Third Of Ruptured AAA Patients In The 3 RCTs Comparing EVAR With Open Repair Were Randomized: Why Does This And Other Flaws Invalidate The RCT Conclusions: RCTs Can Be Misleading Thomas L. Forbes, MD Long-Term Results Of The AJAX RCT Comparing 1:18 - 1:23EVAR With Open Repair For Ruptured AAAs: Despite Its Flaws, EVAR Wins In The End - Especially In Patients >80 Willem Wisselink, MD Reasons Why The Use Of Open Repair Versus EVAR 1:24 - 1:29For Ruptured AAAs Still Varies Greatly Even Though EVAR Has Been Proven Superior: Bias Rules Martin Malina, MD, PhD 1:30 - 1:35Update On Treating All (100%) Ruptured AAAs, Complex AAAs And Thoracic Aneurysms Endovascularly: A 15-Year Experience Shows This Is The Best Treatment And Lowers The Turndown Rate: What Adjuncts May Be Necessary To Achieve This David T. McGreevy, MD, PhD Tal M. Hörer, MD, PhD

> Aortic Endograft Diameter Sizing With Ruptured Aneurysms: Why Is It Different And How To Do It

Zoran Rancic, MD, PhD

1:36 - 1:41

- 1:42 1:47 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, MD, PhD
- 1:48 1:53

 AAA Rupture After EVAR Behaves Differently From De Novo Rupture: How Should Treatment Be Modified In Patients With Post EVAR Ruptures

 Piotr Szopinski, MD, PhD
- 1:54 1:59 Panel Discussion

SESSION 52 (Grand Ballroom East, 3rd Floor)
MORE NEW DEVELOPMENTS IN TECHNIQUES
OF ENDO TREATMENT OF RUPTURED AAAS,
COMPLEX AAAS AND TAAAS; WHAT IS AND
SHOULD BE HAPPENING WITH AAA SCREENING

Moderators: Keith D. Calligaro, MD Mario L. Lachat, MD Manish Mehta, MD, MPH

CURRENT TECHNIQUES FOR TREATING RUPTURED ANEURYSMS

- 2:00 2:05 With Ruptured Complex AAAs And TAAAs Parallel Grafts Are The Best Treatment: They Are Simpler, More Effective And Less Costly Than Other Treatments Manish Mehta, MD, MPH
- 2:06 2:11 In Situ Laser Fenestration For Endovascular Treatment Of Complex Ruptured AAAs: What Equipment Is Needed: When Is It Feasible And Why Is It Better Than Other Treatments: Technical Tips

 Anders Wanhainen, MD, PhD
- 2:12 2:17 Physician Modified Endografts (PMEGs) And Off-The-Shelf (OTS) Devices Are Both Options For Urgent/ Emergent Treatment Of Ruptured Complex AAAs: Technical Tips Bernardo C. Mendes, MD Gustavo S. Oderich, MD
- 2:18 2:23 Modifications Of The TREO-FIT Endograft (Terumo)
 For EVAR That Make It Suitable For Physician
 Modification (PMEGs) For Use In Emergent And
 Ruptured Juxtarenal AAAs
 Benjamin W. Starnes, MD
- 2:24 2:29 Applicability And Results Of Cook t-Branch OTS Endograft In Complex Ruptured AAAs: Advantages And Limitations Ciro Ferrer, MD, PhD Rocco Giudice, MD
- 2:30 2:35 Outcomes Of A Novel Off-The-Shelf Inner Branch Stent-Graft (E-nside From Artivion) For Urgent TAAA Repair: Insights From An Italian Multicenter Registry Rocco Giudice, MD
- 2:36 2:41 For Treatment Of Ruptured Complex AAAs A Short Custom Made Single Fenestrated Graft Can Be Used To Revascularize The SMA Followed By A Bifurcated Graft And Laser Fenestration For The Renal Arteries: Technique And Experience

 Nuno V. Dias, MD, PhD
- 2:42 2:47 Panel Discussion
- 2.48 2.53 A Transvenous (Transcaval) Approach To Endovascular Repair Of Ruptured Thoracic Aneurysms And TAAAs In Patients With Poor Arterial Access: Technical Tips And Can One Deal With Aortic Bifurcation Lesions *Tilo Kölbel, MD, PhD*

2:54 — 2:59	Open Retroperitoneal Aortic Approach For Ruptured AAAs: Technical Tips, Advantages And Limitations: When Is It Better Than EVAR And F/EVAR R. Clement Darling III, MD
	NEW DEVELOPMENTS IN AAA SCREENING
3:00 — 3:05	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, MD
3:06 — 3:11	Thomas F.X. O'Donnell, MD New Developments In AAA Screening: Should We Change Who Is Being Screened Jes S. Lindholt, MD
3:12 — 3:17	The Future Of AAA Screening: The Changing Epidemiology Especially Persistent Declining Prevalence Mandates Changes In Screening Recommendations Anders Wanhainen, MD, PhD
3:18 — 3:23	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 <i>Neal S. Cayne, MD</i>
3:24 - 3:36	Björn Sonesson, MD, PhD Panel Discussion And Break Visit Exhibits And Pavilions (2nd and 3rd Floors)
EXCITING TECHNIC	(Grand Ballroom East, 3rd Floor) G NEW OR UPDATED CONCEPTS, QUES AND TREATMENTS
Moderators:	Fred A. Weaver, MD, MMM
3:36 — 3:41	Matt M. Thompson, MD Update On External Sirolimus Patch Wrap-Arounds For PTFE Graft Anastomoses: Do They Decrease Intimal Hyperplasia And Improve Prosthetic Graft
3:42 — 3:47	Patency Sriram S. Iyer, MD Implantable Carotid Stent-Like Device To Stimulate The Carotid Sinus Nerve (Of Hering) And Treat Intractable CHF And Hypertension (The Barostim System): Current Clinical Status Fred A. Weaver, MD, MMM
3:48 - 3:53	John F. Eidt, MD Miguel Manzur, MD Reducing Fiber And Lint Contamination During Endovascular And Surgical Procedures: Why Is It Important And How To Prevent it
3:54 — 3:59	John R. Laird, MD Value Of Prostate Artery Embolization For BPH: Indications, Technique And Results Lars B. Lonn, MD, PhD
4:00 — 4:05	Peripheral Embolization With TEVAR And EVAR Procedures: How Widespread And Important Is It And An Update On Devices To Prevent It
/ 0/ / 11	Ralf R. Kolvenbach, MD

Cancer Incidence After Lower Extremity Bypass Surgery: How Does It Affect Long-Term Outcome In Patients With CLTI: Why The Relationship With

4:06 - 4:11

Cancer Exists

Dittmar Böckler, MD

4:12 – 4:17	Special Technical Tips For The Management Of Pediatric Vascular Trauma And Emergencies: Evolving Endovascular Strategies, Expanded Device Availability, And How To Deal With Spasm Dawn M. Coleman, MD
4:18 — 4:23	Visceral Arterial Compression Syndromes And Their Relationship To Genetic Disorders: Current Optimal Diagnosis And Treatment Wilhelm Sandmann, MD
4:24 — 4:29	High Resolution Infrared Thermography To Detect Vascular Pathology: How Does It Work And How Does It Help
4:30 - 4:37	Ivo Petrov, MD, PhD Panel Discussion
CECCIONI EA	(Crand Ballroom East 3rd Floor)
	(Grand Ballroom East, 3rd Floor) SS IN RADIATION SAFETY AND MORE
	ncepts, devices and techniques
Moderators:	Lindsay Machan, MD Jacob Cynamon, MD
4:38 - 4:43	Intravascular Lithotripsy (From Shockwave): A New Valuable Tool To Facilitate Access For Large Sheaths In F/B/EVAR <i>Eric L.G. Verhoeven, MD, PhD</i>
	Athanasios Katsargyris, MD
	WHAT'S NEW IN RADIATION SAFETY
4:44 — 4:49	The Occupational Hazards Of The Pregnant Surgeon: What Modifications In Practice And Techniques Are Necessary To Avoid Or Minimize Them Venita R. Chandra, MD
4:50 — 4:55	Myths And Facts Regarding Radiation Protection And Safety: Imperfections In Protection From Leaded Glasses, Caps, Gloves And Light Weight Leaded Gowns Lindsay Machan, MD
4:56 — 5:01	Improved Radiation Protection With The Protego System: What Is It, How Does It Work; Experience And Results With Operators, Staff And Patients Venkatesh G. Ramaiah, MD
	NEW CONCEPTS, ETC.
5:02 — 5:07	Endovascular Options For The Control Of Submassive And Massive Hemoptysis: It Is Lifesaving: When And How To Do It: Coils Are Required <i>Jacob Cynamon</i> , <i>MD</i>
5:08 — 5:13	What's New In Gene And Stem Cell Therapy For No Option CLTI In 2024: Are There Technologies And Trials That Hold Promise – Like BioGenCell Richard J. Powell, MD Yael Porat, PhD
5:14 - 5:19	Panel Discussion
5:20 — 5:25	The Aortyx Aortic Patch: A More Compliant Way Than TEVAR To Seal Aortic Defects With TBADs And Other Lesions: A New Endovascular Approach: How Does It Work: Improved Delivery System And Progress To Date <i>Vicente Riambau, MD, PhD</i>
5:26 — 5:31	Disseminated Fungal Infections Of The Vascular System: Why Are They Important And How Should They Be Diagnosed And Treated Sateesh C. Babu, MD
5:32 - 5:37	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., MD

5:38 – 5:43 Gore Excluder Iliac Branch Endoprosthesis (IBE)
Extension Into The Gluteal Artery To Treat Hypogastric
Aneurysms: Technique And Mid-Term Results
Mark W. Mewissen, MD

5:44 – 5:49 Best Bridging Stent Selection For The Gore Excluder Iliac Branch Endoprosthesis (IBE): What Works And What Doesn't Steven Maximus, MD Gustavo S. Oderich, MD

5:50 – 6:00 Panel Discussion End of Program G

PROGRAM H (SESSIONS 55-63)
NEW OR IMPROVED DEVICES FOR: STANDARD
EVAR 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

SESSION 55 (Grand Ballroom West, 3rd Floor)

NEW OR IMPROVED DEVICES FOR INFRARENAL AAA REPAIR WITH STANDARD EVAR

Moderators: Eric L.G. Verhoeven, MD, PhD Enrico Ascher, MD Rossi M. Silva, MD

- 7:00 7:05 Updated Results From The AFX 2-LIVE European Registry: An Experience With The Outcomes Of >500 AFX EVAR Cases: Benefits, Complications, Conversions And Technical Considerations Francesco Speziale, MD
- 7:06 7:11 Current Status Of The AFX 2 Endograft (From Endologix) For EVAR: Is Increased Surveillance Indicated Robert W. Chang, MD
- 7:12 7:17 Are We Overtreating AAAs: The Current Diameter Thresholds For AAA Repair (5.5 cm For Men; 5.0 cm For Women) Are No Longer Relevant: Based On New Scrutiny Of Old Trials And A Meta-Analysis Of AAA Rupture Risk

 Timothy A. Resch, MD, PhD
- 7:18 7:23 Mid-Term Results Of The Alto (Ovation) Low Profile Endograft (From Endologix): Advantages And Current Role In Treating AAAs Gianmarco de Donato, MD
- 7:24 7:29 Comparison Of Excluder Versus Endurant Endografts
 For EVAR: Which Graft Is Best And In What
 Circumstances: From A Multicenter Propensity Score
 Matched Study
 Naoki Fujimura, MD, PhD
- 7:30 7:35 Panel Discussion
- 7:36 7:41 Gore Conformable Excluder For EVAR: Advantages And Indications: From The European EXCeL Registry Marc R.H.M. van Sambeek, MD, PhD
- 7:42 7:47 How To Optimize Infrarenal Aortic Neck Sealing With Short Or Angulated Necks (>60-90 Degrees) Without Placing Branches In The Renals: The Unique Features Of The Gore Excluder Conformable AAA Endograft: >1 Year Results Robert Y. Rhee, MD

- 7:48 7:53New Polymer Filled Low Profile Endograft Device With O-Ring Sealing: Advantages, How Does It Work And Why Is It Better In Patients With Complex Proximal Neck Anatomy Piotr Szopinski, MD, PhD 7:54 - 7:5910-Year Results With The Gore Excluder Endograft For EVAR Show Its Durability: From The GREAT Registry Eric L.G. Verhoeven, MD, PhD Athanasios Katsargyris, MD Mid-Term Results Of EVAR With Endoanchors In 8:00 - 8:05Patients With Hostile Neck Anatomy: Do They Work Better When Used Prophylactically Or Therapeutically: Do They Work Equally Well With All Endografts Apostolos K. Tassiopoulos, MD 8:06 - 8:11**Panel Discussion** SESSION 56 (Grand Ballroom West, 3rd Floor) NEW OR UPDATED DEVICES FOR STANDARD EVAR OR F/B/EVAR Moderators: Christopher J. Kwolek, MD, MBA Margaret Tracci, MD, JD STANDARD EVAR DEVICES 8:12 - 8:17Five-Year Results And Advantages Of The TREO (Terumo) Endograft For Standard EVARs: Status In The US Matthew J. Eagleton, MD 8:18 - 8:23Real World Outcomes With The TREO Endograft (Terumo Aortic): Results From The European TIGER Registry Vicente Riambau, MD, PhD 8:24 - 8:29Status Of The Low Profile Alto Endograft (From Endologix) With More Proximal Polymer Sealing Rings For Standard EVAR: Up To 5-Year Results Show Its Advantages: Status Of The JAGUAR RCT Comparing It With Standard EVAR Endografts Sean P. Lyden, MD Christopher J. Kwolek, MD, MBA Andrew Holden, MBChB 8:30 - 8:35AFX 2 Anatomically Fixed (On The Aortic Bifurcation) Endografts For AAA Repair: The LEOPARD RCT 5-Year Results Show It Has Similar Outcomes To Other Widely Used Proximally Fixed Endografts Christopher J. Kwolek, MD, MBA F/B/EVAR TOPICS FOR COMPLEX AAAs 8:36 - 8:41Comparison Of Various Fenestrted Endografts From Cook, Terumo, Etc.: Advantages And Limitations Of Each Sonia Ronchey, MD, PhD 8:42 - 8:47Real World Evaluation Of The OTS Pre-Cannulated Inner Branched Endograft (E-nside From Artivion) For Pararenal Aortic Aneurysms: Advantages And Limitations Lee Bouwman, MD, PhD Theodosios Bisdas, MD 8:48 - 8:53One-Year Outcomes Of The Fenestrated Anaconda (Terumo Aortic) Endograft For Treating Complex AAAs From The GLOBAL FACT Study: What Makes
 - 8:54 8:59 Retrospective Analysis Of Laser In Situ Fenestration Of All Endografts: What Does The LIFE Registry Show Jonathan Bath, MD
 9:00 9:06 Panel Discussion

Clark J. Zeebregts, MD, PhD

This Endograft Different: Advantages And Limitations

9:06 – 9:19 Break - Visit Exhibits And Pavilions (2nd and 3rd Floors)

SESSION 57 (Grand Ballroom West, 3rd Floor)
NEW OR IMPROVED DEVICES FOR
THORACOABDOMINAL ANEURYSM (TAAA)
REPAIRS AND THORACIC AORTIC LESION REPAIRS
(TEVAR)

Moderators: Ross Milner, MD Carlos H. Timaran, MD

IMPROVED DEVICES FOR TAAA REPAIRS

- 9:20 9:25 Progress With A New Hybrid Device (Thoracoflo From Terumo Aortic) For TAAA Repair: How It Works, Clinical Experience And Advantages

 Sebastian E. Debus, MD, PhD

 Sabine H. Wipper, MD, PhD

 Randy D. Moore, MD
- 9.26 9.31 Value Of Endo TAAA Repair In Patients With Connective Tissue Disorders: Which Device Or Devices Are Best And Why Gustavo S. Oderich, MD
- 9.32 9.37 Comparison Of The Cook t-Branch OTS Endograft
 Device With The E-nside (Artivion) Multibranched
 Device For Juxta- And Pararenal AAAs And TAAAs:
 Advantages And Limitations Of Each
 Matteo Orrico, MD
 Nicola Mangialardi, MD
- 9.38 9.43 Optimizing Endovascular Treatment Of TAAAs With The Cook OTS t-Branch Endograft: Technical Tips And Contraindications

 Marcelo Ferreira, MD
- 9:44 9:49 Current Status And Results With Manifold Branched Grafts For TAAA Repairs: What Are They: What Are Their Limitations And Why Haven't They Been Commercialized Murray L. Shames, MD Patrick W. Kelly, MD
- 9.50 9.55 Treatment Of Narrow True Lumen In Chronic Aortic Dissection Using i-BEVAR E-nside OTS Endograft With Inner Branches (From Artivion): How Does IVUS Help Giovanni Tinelli, MD, PhD Dittmar Böckler, MD
- 9.56–10.01 Twinbranch A New Approach: Evolution Of The Colt Manifold Device For TAAA Repairs To An Inner Branched Technology Piotr Szopinski, MD, PhD
- 10:02-10:07 Panel Discussion

IMPROVED DEVICES FOR TEVAR

- 10:08-10:13 Low Profile Devices For TEVAR And B/EVAR:
 Disadvantages And Advantages Based On A 10-Year
 Experience With Matched Patients
 Giovanni B. Torsello, MD
- 10:14-10:19 Current US Status And Results With The RelayPro NBS Endograft For TEVAR: Advantages And Limitations Frank R. Arko, MD
- 10:20-10:25 Details Of A Novel Low Profile Stent-Graft For The TEVAR Treatment Of All Thoracic Aortic Segments: What Makes It Unique And Clinical Status Francesco Setacci, MD
- 10:26-10:31 Hybrid Repair Of Arch And Descending Aorta Lesions With The Thoraflex Device And RelayPro TEVAR Device: Technical Tips And Clinical Experience Francis Caputo, MD

10:32-10:37 Real World, Long-Term Results With Cook Zenith Alpha Thoracic Low-Profile Endograft: What Have We Learned Germano C.G. Melissano, MD Roberto L.V. Chiesa, MD 10:38-10:43 The New Cook Custom Single Branch Endograft For TEVAR Of Lesions Close To Or Involving The LSA: Advantages And Results Tilo Kölbel, MD, PhD 10:44-10:49 Status Of And When And How To Use The Gore Conformable CTAG Endograft With Variable Angulation Control Optimally: Advantages And Limitations Sukgu Han, MD 10:50-11:00 **Panel Discussion** SESSION 58 (Grand Ballroom West, 3rd Floor) NEW OR IMPROVED DEVICES FOR THE ASCENDING AORTA, THE AORTIC ARCH OR NEAR THE ARCH AND TAAAs (See Also Sessions 1, 2, 3 And 40 For Related Topics) Moderators: Rodney A. White, MD Weiguo Fu, MD Current Status And Results With Terumo Ascending 11:00-11:05 Aorta Endograft: What Makes It Different And What Lesions Can It Treat Vicente Riambau, MD, PhD Afshin Assadian, MD Mo S. Hamady, MD Current Status In The US Of The Relay Branch 11:06-11:11 Investigational Device (Terumo Aortic) For Endo Repair Of Aortic Arch Lesions: How Many Branches Can And Should Be Revascularized: Advantages And Limitations Luis A. Sanchez, MD Eric E. Roselli, MD 11:12-11:17 Aortic Arch Endovascular Repairs: Which Device Is Best For Degenerative Aneurysms And For Dissection: Technical Tips Javairiah Fatima, MD 11:18-11:23 Update On Fenestrated Endovascular Aortic Repair Plus Chimney Graft For TAAA Repairs: The FEVAR/ Ch Technique: When And How Is It Beneficial Ross Milner, MD 11:24-11:29 Changes In The Aortic Valve And Aortic Morphometrics After Ascending Aorta And Arch Endograft Placement: Why Are They Important And How Can They Be Avoided Jean Bismuth, MD Ross Milner, MD 11:30-11:35 How To Manage Dissected Supra Aortic Trunks During Arch Branch Endovascular Repair Stephan Haulon, MD 11:36-11:41 Preloaded Fenestrated Endografts With A Modified Biport Handle (From Cook): A Way To Make F/EVAR Easier: Results From An International Multicenter Study Nikolaos Tsilimparis, MD, PhD 11:42-11:47 What Devices Are Best For Enabling Laser Fenestration For The Endo Treatment Of Arch Lesions: Is The Laser Hole In The Main Graft Made From Below Or Above: How Is The Brain Perfused After The Aortic Graft Is Deployed And Before The Hole Is Made Jean M. Panneton, MD

11:48-11:53 How To Accommodate For Main Endograft Length Discrepancy And Avoid Errant Coverage Of The Supra Aortic Trunks During Emergency Repair Of Ascending Aortic Lesions Coverage Gustavo S. Oderich, MD Steven Maximus, MD

11:54-12:00 **Panel Discussion**

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

SESSION 59 (Grand Ballroom West, 3rd Floor) NEW OR UPDATED INFORMATION ON RE-ENTRY DEVICES, LOWER EXTREMITY PROSTHETIC GRAFTS (See Also Session 28) AND MANAGEMENT OF PERIGRAFT SEROMAS

Moderators: Samuel R. Money, MD, MBA Patrick J. Lamparello, MD

A NEW LOOK AT RE-ENTRY DEVICES

- 1:00 1:05Pros And Cons Of Re-Entry Devices In Treating CTOs: Why, Where And When To Use Them: Are They Worth The Cost And Have Other Techniques Like Retrograde Access Largely Replaced Them Maria A. Ruffino, MD
- 1:06 1:11Re-Entry Devices Are Currently Almost Never Necessary: Techniques To Treat Lower Extremity Lesions Successfully Without Them: When Might They Be Needed Ali Amin, MD, RVT

PROSTHETIC GRAFTS

- Final 5-Year Results Of The ZILVERPASS RCT 1:12 - 1:17Comparing Prosthetic PTFE Bypasses With Zilver PTX (Cook) Stents To Treat Long FemPop Lesions: Clinical And Financial Results And Their Implications Michel J. Bosiers, MD Marc Bosiers, MD
- 1:18 1:23PTFE Bypasses To Infrapopliteal Targets Can Be Worthwhile For Limb Salvage In Patients With End Stage CLTI: When Is This So And Technical Tips To Make Them Work Matthew T. Menard, MD
- 1:24 1:29Heparin Coated (Propaten) PTFE Grafts (Gore) Versus Autologous Vein Grafts For Bypasses To Targets Above And Below The Knee: The Heparin Coated Grafts Are Better And Worth The Cost: Based On A Propensity Matched Analysis
- David J. Dexter, MD 1:30 - 1:35
- Which Patients With CLTI Should Be Treated Primarily With A Heparin Bonded PTFE Graft And Why: How Can An Amputation-Free Survival Score Be Helpful Carlo Pratesi, MD Giovanni Pratesi, MD
- 1:36 1:41Update On Novel Supramolecular Polymer Technology To Create Endogenous Tissue With Host Collagen And Endothelium Compatible With Flowing Blood: 2-Year Clinical Results Of The aXess Graft (From Xeltis) Frans L. Moll, MD, PhD
- Perigraft Seromas After PTFE Lower Extremity And 1:42 - 1:47Aortic Arterial Grafts: Frequency, Etiology, When Do They Need To Be Treated And How Jae S. Cho, MD
- **Panel Discussion** 1:48 - 1:54

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

Also Sessions 23-27)

Moderators: Maciej L. Dryjski, MD, PhD Sateesh C. Babu, MD

ATHERECTOMY AND LITHOTRIPSY RELATED TOPICS

- 1:54 1:59A Balanced View Of The Value Of Atherectomy For Treatment Of Lower Extremity Lesions: Has It Been Overutilized And Why: When Can It Be Helpful And Which Device Is Best John R. Laird, MD
- 2:00 2:05The Value Of Directional Atherectomy Followed By DCBs For Long Calcified FemPop Lesions As Demonstrated By The Results Of The REALITY Trial Brian G. DeRubertis, MD
- Update On Orbital And Laser Atherectomy: 2:06 - 2:11Indications, Advantages And Precautions With Above And Below Knee De Novo Lesions And ISR Craig M. Walker, MD
- 2:12 2:17A New More Complex Device For Treating Calcified Arterial Lesions With Lithotripsy (From BOLT Medical): How Does It Work And Advantages Marianne Brodmann, MD
- 2:18 2:23Aortobifemoral Bypass For Aortoiliac Disease Has Gone From A Favored Procedure To A Rarity Because Of Endovascular Techniques Including Intravascular Lithotripsy (Shockwave): Options And Indications Christopher J. Smolock, MD
- 2:24 2:30**Panel Discussion**

ANCILLARY TECHNIQUES AND RELATED TOPICS

- 2:30 2:35An Update On The Soundbite Technology For Traversing And Treating Calcified Arterial Lesions: How Does It Work, Advantages, And Clinical Experience Marianne Brodmann, MD
- How Do The Results Of Invasive Treatment Of FemPop 2:36 - 2:41Disease Differ In Women And Minorities: The ELEGANCE Global Registry Of Such Treatment With Eluvia DESs And Ranger DCBs Shows How Eric A. Secensky, MD, MSc (PowerPoint Presentation With Synched Audio) Lee Kirksey, MD

NEW INFORMATION ON STENTS AND COVERED STENTS

- 2:42 2:475-Year Results With The VBX Covered Stent For Aortoiliac Disease: Patency Rates, Advantages And Cost Effectiveness. Ramon L. Varcoe, MBBS, MS, PhD (PowerPoint Presentation With Synched Audio)
- 2:48 2:53The Eiffel Tower Technique For Endovascular Treatment Of Common Femoral Artery Bifurcation Lesions: What Is It And What Are Its Results: Lessons From The TECCO RCT

Yann Gouëffic, MD, PhD

- 2:54 2:59Advantages Of Supera VMI Stent For Complex FemPop Occlusive Lesions: Technical Tips: They Work Even In The Subintimal Position Erwin Blessing, MD
- 3:00 3:06**Panel Discussion**
- 3:06 3:18Break - Visit Exhibits And Pavilions (2nd and 3rd Floors)

SESSION 61 (Grand Ballroom West, 3rd Floor)
NEW OR IMPROVED ENDOVASCULAR DEVICE
COMBINATIONS FOR LOWER EXTREMITY
TREATMENTS: ANGIOPLASTY BALLOON
IMPROVEMENTS

Moderators: John R. Laird, MD Steven Kum, MD

- 3.18 3.23 The Value Of High-Pressure PTA Balloons And Long-Term Results Of pDVA (Percutaneous Deep Vein Arterialization): Practice Changing Techniques For CLTI: pDVA Produces Sustained Increased TcPO2 Steven Kum, MD
- 3:24 3:29 Update On The Temporary Stent Assisted DCB
 Angioplasty In BTK Lesions With The Spur Spiked
 Stent System (Reflow Medical): The DEEPER OUS
 Trial
 Michael K.W. Lichtenberg, MD
 Thomas Zeller, MD
- 3:30 3:35 Update On The TOBA Trials Of The Tack Device (From Philips): Indications, Advantages In Improving Outcomes And Limitations

 Patrick J. Geraghty, MD
 - 3:36 3:41 The Serranator® Balloon Catheter (From Cagent Vascular) For Vessel Prep In BTK Arteries: It Makes Microserrations, Prevents Dissections, Lessens Elastic Recoil With PTA: Current Status Steven Kum, MD Andrew Holden, MBChB
 - 3:42 3:47 Intravascular Lithotripsy (From Shockwave) In BTK Arteries: Updated Data And New Technologies Andrew Holden, MBChB
 - 3:48 3:53 IVUS Studies Before And After PTAs With The Ultrascore Scoring Balloons (From BD) Show The Benefits Of Such Balloons And How They Work Robert E. Beasley, MD
 - 3:54 3:59 Progress In Developing A Curved Angioplasty Balloon: How It Works And Why It's Important: When Will It Be Available Timothy A.M. Chuter, MD
- 4:00 4:05 Unfavorable Balloon (Candy) Wrap Can Cause Dissections With Angioplasty: What Is The Mechanism: How Can It Be Recognized And Dissection Avoided: When Does Dissection Have To Be Treated And When Not Jos C. van den Berg, MD, PhD

4:06 – 4:12 Panel Discussion

SESSION 62 (Grand Ballroom West, 3rd Floor)
NEW OR IMPROVED DEVICES AND TECHNIQUES
TO PREVENT OR TREAT ENDOLEAKS OR DEVICE
MIGRATION: ENDOANCHORS, ETC.

Moderators: William D. Jordan Jr., MD David H. Deaton, MD

- 4:12 4:17 New Findings From The ANCHOR Study Support The Prophylactic Use Of Heli-FX Endoanchor (Medtronic) Fixation: Use Of Its Variable Curve Sheath As A Rescue Tool To Fix Poorly Deployed Endografts William D. Jordan Jr., MD
- 4:18 4:23

 5-Year Results Of Endoanchors In The Global
 ANCHOR Registry To Treat Complications With Focus
 On Preventing And Treating Type IA Endoleaks: Can
 Virtual Techniques Predict The Need For Endoanchors
 Jean-Paul de Vries, MD, PhD

4.24 - 4.29Endoanchors Improve Seal Zones And Outcomes With Fenestrated Endografts: When And Where Should They Be Used And Technical Tips Shadi J. Abu-Halimah, MD 4:30 - 4:35Prophylactic Endoanchors In TEVAR For Complex Anatomy Decrease Endoleaks And Reintervention Rates: Indications And Technical Tips For Their Use Jean M. Panneton, MD Novelrad Percutaneous Endovascular Suturing Device: 4:36 - 4:41How Does It Work And Clinical Experience Elchanan Bruckheimer, MBBS Update On The VESTECK Catheter Based 4:42 - 4:47Endosuturing Technology For EVAR And TEVAR Fixation: How Does It Work; How Is It Different From Endoanchors And Successful Clinical Results Dainis K. Krievins, MD Sean P. Lyden, MD David H. Deaton, MD 4:48 - 4:54 **Panel Discussion** SESSION 63 (Grand Ballroom West, 3rd Floor) NEW OR IMPROVED ENDOVASCULAR DEVICES FOR CLOT REMOVAL OR EMBOLIZATION (See Also Session 30) Moderators: James F. Benenati, MD Frank R. Arko, MD **CLOT REMOVING DEVICES** Endovascular Arterial Thrombo-Embolectomy Devices: 4.54 - 4.59What's The Difference Between Them: Jeti, Penumbra, AngioJet, Pounce, Etc.: What's Coming Down The Road Loay S. Kabbani, MD, MHSA 5:00 - 5:05 Newer Pharmacomechanical Endovascular Clot Removal Systems: When And Why Is Each Device Best To Use: When Is Open Surgery Needed Guillermo A. Escobar, MD 5:06 - 5:11Different Options For Thrombosuction Treatment In ALI: Which Device For Which Case And When To Go For Open Surgery Athanasios Katsargyris, MD 5:12 - 5:17Endovascular Hydrodynamic Thrombectomy Of Occluded Visceral Vessels/Stents: Device Description And Clinical Experience Marco V. Usai, MD 5:18 - 5:23Rotarex Device Is A Treatment For Subacute Or Chronic Lower Extremity Thrombosed Bypasses Or Stents: How And When Does It Work And When Does Animesh Rathore, MD 5:24 - 5:29**Panel Discussion ENDOVASCULAR OCCLUSIVE DEVICES** Embolization Device Selection: The Pros And Cons Of 5:30 - 5:35Liquid Agents Versus Coils, Or Plugs Frank R. Arko, MD 5:36 - 5:41How Can Shape Memory Polymer Plug Embolization Devices Be Used To Improve Results After TEVAR For Degenerative Aneurysms And TBADs By False Lumen Obliteration Virendra I. Patel, MD, MPH Fibered And Non-Fibered Coil Embolism Technology: 5:42 - 5:47

Which Type Of Coils Are Best For Different Indications

James F. Benenati, MD

5:48 - 5:53	Indications And Outcomes Of The Impede Embolization Plug (From Shape Memory) For Treatment Of Peripheral And Visceral Artery Lesions: What Makes It Unique Robert A. Morgan, MD
5:54 — 5:59	Panel Discussion End of Program H
SUPERFIC	I (SESSIONS 64-73) CIAL VENOUS DISEASE Proom, 3rd Floor
VENOUS	(Trianon Ballroom, 3rd Floor) CLINICAL EXAMINATION AND
HEMODY	
Moderators:	Jose I. Almeida, MD Thomas F. O'Donnell, Jr., MD
7:00 — 7:04	Introduction To Veins At VEITH Jose I. Almeida, MD
7:05 — 7:10	Overview Of Lymphatic Anatomy, And Physiology <i>Thomas F. O'Donnell, Jr., MD</i>
7:11 — 7:16	Inflammatory Pathways In Chronic Venous Disease Joseph D. Raffetto, MD
7:17 — 7:22	Genetics And Venous Disease Sarah Onida, MD, PhD
7:23 — 7:28	Different Types Of Venous Reflux Identified In 100 Consecutive Patients And Their C Classification And Percentage
7:29 - 7:34	Ayman Fakhry, MD We Should Revise The Definition Of Venous Reflux:
7:35 — 7:40	What Other Modality Should We Consider Fedor Lurie, MD, PhD Factors Impacting Venous Return
7:41 - 7:46	Jose I. Almeida, MD Venous Thermography And Its Clinical Use
	Dale Maharaj, MBBS Panel Discussion
VENOUS	(Trianon Ballroom, 3rd Floor) GUIDELINES, IMPORTANT PAPERS, AND
REIMBUR	SEMENT
Moderators:	Ruth L. Bush, MD, MPH
750 750	Armando Mansilha, MD, PhD
7:53 — 7:58	Are Venous Maps Standard Of Care: What Should They Include <i>Jan M. Sloves, RVT</i>
7:59 — 8:04	SVS, AVF, AVLS Varicose Vein Guidelines Peter Gloviczki, MD
8:05 — 8:10	A Comparison Of The Revised SVS/AVF/ASVL/ESVS Clinical Practice Guidelines In The Management Of Varicose Veins: Contact And Agree II Analysis
8:11 — 8:16	Thomas F. O'Donnell, Jr., MD Summary Of Important Venous And Lymphatic Articles – International Angiology Armando Mansilha, MD, PhD
8:17 — 8:22	Summary Of Important Venous And Lymphatic Articles – Journal of Phlebology – Editor's Choice
8:23 — 8:28	Alun H. Davies, MA, DM, DSc Summary Of Important Venous And Lymphatic
	Articles – Journal of Vascular Surgery Venous and Lymphatic Disorders – Editor's Choice Ruth L. Bush, MD, MPH
8:29 — 8:34	Primary Venous Insufficiency Increases Risk Of Deep Vein Thrombosis Maxim Shaydakov, MD, PhD
	IVIDALITE SHUVUMUNUV, IVII J. I III J

8:35 — 8:40	Compression: Does It Work: What Data Do You Have To Support William A. Marston, MD
8:41 — 8:46	Latin American Consensus On Superficial And Perforating Venous Mapping Oscar H. Bottini, MD
8:47 - 8:52	Panel Discussion
SUPERFIC	(Trianon Ballroom, 3rd Floor) IAL VEIN TREATMENT STRATEGIES I
Moderators:	Kursat A. Bozkurt, MD Sergio Gianesini, MD, PhD
8:53 — 8:58	The Length Of Treated Great Saphenous Vein As A Marker Of Post-Procedural Improvement In Clinical And Patient Reported Outcomes Windsor Ting, MD
8:59 — 9:04	Update On Fovelass – French Society of Phlebology Study: RCT Comparing Foam And EVLA In SSV Incompetence
9:05 — 9:10	Claudine M. Hamel-Desnos, MD What Do You Treat First In C2s With Reflux Of The GSV, SSV, And Vein Of Giacomini Jean Luc Gerard, MD
9:11 — 9:16	Saphenous Sparing: Why And Instructions For Users Sergio Gianesini, MD, PhD
9:17 — 9:22	Thermal Saphenous Vein Recanalization: Risk Factors <i>Ruth L. Bush, MD, MPH</i>
9:23 — 9:28	Ultrasound Aspects Of The Vein Over Time After Foam Sclerotherapy, And Clinical Consequences Claudine M. Hamel-Desnos, MD
9:29 — 9:34	Thrombus Extension After Cyanoacrylate Closure Versus Endovenous Glue Induced Thrombosis: What Is The Difference Nuttawut Sermsathanasawadi, MD, PhD
9:35 — 9:40	Synchronous Trial 12 Months Follow-Up Data (Simultaneous AASV Treatment For Patients Undergoing GSV Ablation) Tobias Hirsch, MD
9:41 — 9:46	Effects Of Truncal Ablation On Pregnancy Kursat A. Bozkurt, MD
9:47 — 9:52	Saphenous Ablation On Direct Oral Anticoagulants: Safe, Effective And Durable Glenn Jacobowitz, MD
9:53 — 9:57	Panel Discussion
SUPERFIC	(Trianon Ballroom, 3rd Floor) IAL VEIN TREATMENT STRATEGIES II Lowell S. Kabnick, MD
9:58-10:03	Kathleen J. Ozsvath, MD Decision Making In Saphenous Ablation: What To Use And When
10:04-10:09	Steve Elias, MD Diameters Of The Great Saphenous Vein In Phlebological Practice In France: Report Of The
10:10-10:15	DIAGRAVES Study By The French Society of Phlebology Matthieu M.J. Josnin, MD Non-Compounded Polidocanol 1% Endovenous Microfoam (Varithena) Or Thermal Ablation: A Network Meta-Analysis Lowell S. Kabnick, MD
10:16-10:21	The Persistent Sciatic Vein Julianne Stoughton, MD
10:22-10:27	SVT Treatment During Pregnancy: Treatment Choices Kathleen J. Ozsvath, MD

10:28-10:33	Would Treatment Of The Whole Length Of The GSV Reduce Recurrence And Reinterventions
	Alun H. Davies, MA, DM, DSc
10:34-10:39	Thermal Versus Nonthermal: Is It Time To Stop The FIRE
	Sergio Gianesini, MD, PhD
10:40-10:44	African American Patient Outcomes After Saphenous Ablation For Advanced Venous Disease
10 / 5 10 / 0	Faisal Aziz, MD
10:45-10:49	The Use Of Simultaneous Foam Sclerotherapy And Thermal Treatment In Varicose Vein Treatment: Why Tobias Hirsch, MD
10:50-10:54	Complications Of Endovenous Thermal Ablation Of The GSV
	Dale Maharaj, MBBS
10:55-11:00	Panel Discussion
	(Trianon Ballroom, 3rd Floor)
	CIAL VEIN TREATMENT STRATEGIES III
Moderators:	Manj S. Gohel, MD
11 01 11 05	Houman Jalaie, MD, PhD
11:01-11:05	When Is It OK To Ablate The Truncal Leg Veins With Chronic Iliofemoral Outflow Obstruction Houman Jalaie, MD, PhD
11:06-11:10	SVT Medical Management In 2024: Is There A Role
11.00	For Surgical Intervention And When Manj S. Gohel, MD
11:11-11:15	Management Of Labial And Vulvar Veins
	Julianne Stoughton, MD
11:16-11:20	VEINS – An International Platform Trial Collaboration Sarah Onida, MD, PhD
11:21-11:25	What You Should Know About Klippel-Trenaunay
11.21	Syndrome Syndrome
	Byung-Boong Lee, MD
11:26-11:30	Treatment And Pitfalls: Lateral Marginal Vein Peter Gloviczki, MD
11:31-11:35	Overview Of Multicenter Venclose Study And Early
	Results
	Erin H. Murphy, MD
11:36-11:40	Great Saphenous Vein Crossectomy: Why
	Ayman Fakhry, MD
11:41-11:45	What Is Maven: Is There Any Data
	Jeffrey G. Carr, MD
11:46-11:50	Does Vein Stenting Reduce Great And Small Saphenous
	Venous Reflux
	Natalie A. Marks, MD, RPVI, RVT
11:51-11:55	Safety And Efficacy Of Endovenous Ablation In Patients With A History Of Deep Venous Thrombosis
	Mikel Sadek, MD
11:56-12:00	Value And Limitations Of Postoperative Duplex Scans After Endovenous Thermal Ablation
	Natalie A. Marks, MD, RPVI, RVT
12:01-12:05	VEINRESET: US Multicenter HIFU Trial: 6-Month Results
	Steve Elias, MD
12:06-12:11	Panel Discussion
12:12 - 1:12	Lunch Break - Rhinelander Gallery, 2nd Floor
	Visit Exhibits And Pavilions (2nd and 3rd Floors)

2F22IOIN 68	(Trianon Ballroom, 3rd Floor)
SUPERFIC	IAL VEIN TREATMENT STRATEGIES IV
Moderators:	Lowell S. Kabnick, MD
	Jose I. Almeida, MD
1:13 — 1:18	Cyanoacrylate And The Small Saphenous Vein: How
	To Treat The Various Anatomy
	Janna Bentley, MD
1:19 — 1:24	Lack Of Symptom Improvement: Why
4.05 4.00	Jeffrey G. Carr, MD
1:25 - 1:30	Is There Any Evidence For Compression
101 107	William A. Marston, MD
1:31 — 1:36	New Superficial Venous Devices: Pre FDA Approval Lowell S. Kabnick, MD
1:37 - 1:42	Forecast For Venous Reimbursement 2025
1:37 — 1:42	John Blebea, MD, MBA
1:43 — 1:48	Factors Associated With Recanalization And
1.40 1.40	Reintervention Following Below Knee Polidocanol
	Endovenous Microfoam
	Natalie A. Marks, MD, RPVI, RVT
1:49 - 1:54	Which Saphenous Vein Recanalization Should Be
	Treated And By What Method: Evidence Based
	Jose I. Almeida, MD
1:55-2:00	Varithena Meta-Analysis "RELOADED", The Living
	Approach
	Lowell S. Kabnick, MD
2:01-2:06	Accessory Veins And Their Impact On Recurrence
	Kerstin S. Schick, MD
2:07 - 2:12	Deviation Operation In Patients With Deep Venous
	Reflux And CVI: First Clinical Results
0.10 0.10	Sebastian E. Debus, MD, PhD
2:13 — 2:18	Do You Need To Treat Venous Tributaries: Pros And
	Cons
2.10 2.27	Kerstin S. Schick, MD Venous VQI: Ten Years Of Improving Venous
2:19 — 2:24	
	Outcomes And Quality
	Outcomes And Quality Marc A. Passman, MD
2:25 — 2:30	Outcomes And Quality Marc A. Passman, MD Panel Discussion
2:25 – 2:30 SESSION 70	Outcomes And Quality Marc A. Passman, MD Panel Discussion (Trianon Ballroom, 3rd Floor)
2:25 – 2:30 SESSION 70	Outcomes And Quality Marc A. Passman, MD Panel Discussion
2:25 – 2:30 SESSION 70 SUPERFIC	Outcomes And Quality Marc A. Passman, MD Panel Discussion (Trianon Ballroom, 3rd Floor) CIAL VEIN TREATMENT STRATEGIES V Victor M. Canata, MD, PhD
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3:13 — 3:18	How To Avoid Complications From Sclerotherapy Jean Luc Gerard, MD
3:19 - 3:24	Comparison Of Laser And Chemical Sclerosant Versus
0.17	Sclerosant
	Kasuo Miyake, MD, PhD
3:25 - 3:30	Quick Case 1: Ask The Panel Or Audience What
	Would You Do (Cosmetic)
3:31 - 3:36	Edward G. Mackay, MD Quick Case 2: Ask The Panel Or Audience What
3:31 - 3:30	Would You Do (Cosmetic)
	Janna Bentley, MD
3:37 - 3:42	Panel Discussion
SESSION 71	(Trianon Ballroom, 3rd Floor)
	CIAL VEIN TREATMENT STRATEGIES VI
	Kathleen D. Gibson, MD
	Sarah Onida, MD, PhD
3:43 - 3:48	Global Epidemiology Of Chronic Venous Disease: A
	Systematic Review With Pooled Prevalence Analysis
0.40 0.54	Sarah Onida, MD, PhD
3:49 - 3:54	When Evaluating Superficial Disease, When Do You
	Look For Deep Venous Obstruction Gloria Salazar, MD
3:55 — 4:00	Not All C2 Disease Should Be Treated: An Algorithm
0.00 4.00	To Predict Severity
	Mikel Sadek, MD
4:01 - 4:06	Ablative Risks Prior To And After Flying: What Do You
	Tell Your Patients
	Sarah Onida, MD, PhD
4:07 - 4:12	Body Mass Index And CEAP Clinical Severity Score
/ 10 / 10	Oscar H. Bottini, MD
4:13 — 4:18	How Do We Assess Quality Of Life After Venous Interventions: Patient-Reported Outcomes For
	Chronic Venous Insufficiency
	Kathleen D. Gibson, MD
4:19 - 4:24	Optimal Thromboprophylaxis And Post-Op Duplex
	Imaging Following Superficial Venous Procedures:
	Evidence Based
	Andrea T. Obi, MD
4:25 - 4:30	Mechanical Chemically Assisted Ablation Of Varicose
	Veins For Venous Insufficiency: American Vein And Lymphatic Society Position Statement
	John Blebea, MD, MBA
4:31 - 4:36	Radiofrequency Ablation Versus Polidocanol
	Endovenous Microfoam Ablation Of Large Diameter
	Saphenous And Tributary Veins
	Juan Carlos Jimenez, MD, MBA
4:37 - 4:42	Outcome Of Early CAC And Compression Therapy In
	Healing Of VLU
4:43 - 4:48	Nuttawut Sermsathanasawadi, MD, PhD
4:43 — 4:40	Randomized Clinical Trial Comparing Cyanoacrylate Glue Closure With Surgical Striping: 30D And 6M
	Outcomes
	Manj S. Gohel, MD
4:49 - 4:54	How To Avoid Complications Of The Small Saphenous
	Vein
/ EE F 00	Jean Luc Gerard, MD
4:55 — 5:00	Mechanical Occlusion Segmental Chemical Ablation (MOSCA): Animal Study With Wavella Device
	Steve Elias, MD
5:01 - 5:06	Panel Discussion

LIPEDEMA, LYMPHEDEMA, PHLEBOLYMPHEDEMA Moderators: Raghu Kolluri, MD Ayman Fakhry, MD 5.07 – 5.12 Lower Extremity Edema Workup Maxim Shaydakov, MD, PhD 5.13 – 5.18 What Is Lipedema And The Current Management Steven M. Dean, DO 5.19 – 5.24 Risks And Contraindications Of Medical Compression Treatment – A Critical Reappraisal: An International Consensus Statement Tomasz Urbanek, MD, PhD 5.25 – 5.30 Venolymphatic Edema And Its Treatment Options Raghu Kolluri, MD 5.31 – 5.42 Venolymphatic Edema, And Edema Related Steven M. Dean, DO 5.37 – 5.42 Role Of Hydrotherapy In Lymphedema Treatment Ayman Fakhry, MD 5.43 – 5.48 Update On Pharmacological Treatment For Lymphedema Monika L. Gloviczki, MD, PhD 5.49 – 5.54 Panel Discussion SESSION 73 (Trianon Ballroom, 3rd Floor) VENOUS ULCERS Moderators: Anil P. Hingorani, MD Monika L. Gloviczki, MD, PhD 5.55 – 6.00 Turkish Glue And Perforating Veins In VLU Patients Kursat A. Bozkurt, MD 6.01 – 6.06 Factors That Influence Venous Leg Ulcer Healing And Recurrence Rate After Endovenous Ablation Of Truncal Veins Nuttawut Sermsathanasawadi, MD, PhD 6.07 – 6.12 Review Of Current Evidence For Topical Treatment For Venous Leg Ulcers Yuri A. Casseres, MD, MSc 6.13 – 6.18 Why Venous Leg Ulcers Have Difficulty Healing Joseph D. Raffetto, MD 6.19 – 6.24 Role Of Superficial Venous Therapies In Improving Venous Ulcer Healing: Choice Of Techniques And Use Of Adjunctive Strategies Sung Yup Kim, MD 6.25 – 6.30 Venous Ulcers: The Contributions Of Deep, Perforator, And Superficial Procedures On Wound Healing Peter F. Lawrence, MD 6.31 – 6.36 Skin Substitutes To Promote Venous Leg Ulcer Healing: What Is The Evidence Yuri A. Casseres, MD, MSc 6.37 – 6.42 Compression, Oxygen, And Humidification – Improves Venous Would Healing And Reduces Venous Ulcer Recurrence Joann M. Lohr, MD 6.43 – 6.48 Update On Pharmacological Treatment For Venous Ulcers Monika L. Gloviczki, MD, PhD 6.55 – 7.00 Panel Discussion		(Trianon Ballroom, 3rd Floor)
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Sundaram Ravikumar, MD 6:55 – 7:00 Panel Discussion	0:47 — 6:54	
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	6:55 - 7:00	Panel Discussion
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PROGRAM J (SESSIONS 74-78) MULTIDISCIPLINARY STROKE PREVENTION AND TREATMENT Murray Hill Suites, 2nd Floor

	(Murray Hill Suites, 2nd Floor) ES IN STROKE AND THE NEXT FRONTIER
Moderators:	Allan L. Brook, MD
	Joshua A. Hirsch, MD
7:30 — 7:40	Introduction Allan L. Brook, MD
7:41 — 7:48	Evidence Of Acute Stroke Care And What Gaps Are Left To Fill
	Daniel Antoniello, MD
7:49 — 7:56	Stroke Imaging Triage: Pearls And Nuances Of Daily Practice
	Rajiv Gupta, MD
7:57 — 8:04	Should ELVO Patients Go Directly To The Angio Suite Fawaz Al-Mufti, MD
8:05 - 8:12	Next Generation Thrombectomy Devices And How
	They Impact Clinical Outcomes David Fiorella, MD, PhD
8:13 - 8:20	Tandem Occlusions: Should We Stent - Above, Below,
	Both, Or Neither Adnan H. Siddiqui, MD, PhD (PowerPoint Presentation With Synched Audio)
8:21 - 8:28	Carotid Access: Is It Time For This Time Saving
	Approach Guilherme Dabus, MD
8:29 - 8:36	Imaging Pearls That Save Time
0.07 0.77	Lawrence N. Tanenbaum, MD
8:37 — 8:44	Aspirations In Aspiration Thrombectomy James Milburn, MD
8:45 — 8:52	Distal/Middle Intracranial Occlusion Can Lead To Significant Morbidity: Should They Be Treated
	Johanna Seiden, MD, MPH
SESSIONI 75	(Murray Hill Suites, 2nd Floor)
	ANIAL HEMORRHAGE, VESSEL WALL
	S AND NEW DEVELOPMENTS
Moderators.	Gregg H. Zoarski, MD David Gordon, MD
8:53 — 9:00	Radial And Ulnar Anatomy/Access; Complication
	Management Sudhakar R. Satti, MD
9:01 — 9:08	Literature That Has Changed Over The Last Year And
	How It Has Changed Our Practice
9:09 — 9:16	Chirag D. Gandhi, MD INTRASACCULAR DEVICES: For SAH, Or Only
7:07 — 7:10	Elective Cases Ansaar T. Rai, MD
9:17 — 9:24	A Neiman Fellow Analyzes How The No Surprises Act
7.17 7.24	Interests With MT 4 ELVO Stroke Joshua A. Hirsch, MD
9:25 — 9:32	Is There Any Imaging To Distinguish Intracranial
7.20 7.02	Athero Versus Embolic Thrombus
	Richard L. Zampolin, MD
SESSION 76	(Murray Hill Suites, 2nd Floor)
CAROTID	AND CEREBRAL ANEURYSMS LATER
TRENDS /	AND POTPOURRI
Moderators:	Reade A. De Leacy, MBBS
	Amichai J. Erdfarb, MD
9:33 — 9:40	Robots Are A Bust In The Brain, Or Are We Waiting For Next Generation Devices And Insights
0./1 0./0	Aquilla S. Turk, DO
9:41 — 9:48	Intracranial Aneurysm Literature: What Has ARISEn David S. Liebeskind, MD
9:49 — 9:56	Basilar Artery Thrombectomy: Planning For Efficient
	Revascularization Maksim Shapiro, MD
	TITURSHII SHUPHO, IND

9:57-10:04	SDH And MMA Embolization: What Is The Standard Of Care
	Deepak Khatri, MD MMA Embolization: Does The Embolic Material Really Matter And Why J Mocco, MD, MS
PEDIATRI	(Murray Hill Suites, 2nd Floor) C STROKE AND LESSONS TO BE LEARNED JE CEREBROVASCULAR ARENAS
Moderators:	Allan L. Brook, MD
10:13-10:20	Peter K. Nelson, MD Great Pediatric Neurointerventional Cases Amanda Baker, MD
10:21-10:36	70 Years Of NI Practice: My Most Interesting Case Pearls For All To Enjoy
	Peter K. Nelson, MD Dural Sinus Stenosis: Is There A Standard Of Care Athos Patsalides, MD, MPH
	Carotid Blowout: Evidence And Treatment Options <i>Guilherme Dabus, MD</i>
10:53-11:00	Artificial Intelligence: Relevance In Stroke And How It Will Impact Our Lives Allan L. Brook, MD
	(Murray Hill Suites, 2nd Floor) ARTERY THERAPY STARS AND
LATEST T	rends
Moderators:	Thomas G. Brott, MD Don Heck, MD
11:01-11:08	Carotid Artery Disease: New Trials And Best Literature 2023 Thomas G. Brott, MD
11:09-11:16	TCAR Is Better Than True Percutaneous Carotid Stenting: Myth Or Reality Peter A. Schneider, MD
11:17-11:24	CAS Versus TCAR Versus CEA: They Cannot Be Equal And Why Don Heck, MD
11:25-11:32	CEA Done Through A Microincision Versus TCAR: Why Do So Few Perform This Enrico Ascher, MD
11:33-11:40	Latest Stenting Technology For The Carotid Artery: Does It Match The Evidence Michele Antonello, MD, PhD
11:41-11:56	Encore: Why Does Everybody Outside Of Australia Overtreat Carotids (15-Minute Presentation) Anne L. Abbott, MD, PhD (PowerPoint Presentation With Synched Audio)
11:57-12:15	Panel Discussion End of Program J

FRIDAY, NOVEMBER 22, 2024

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 79-86)

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. - 5:32 P.M.

Location: Grand Ballroom East, 3rd Floor

PROGRAM L (SESSIONS 87-94)

New Developments In The Treatment Of Popliteal Disease; 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 6:52 A.M. - 4:56 P.M.

Location: Grand Ballroom West, 3rd Floor

PROGRAM M (SESSIONS 95-105)

Deep Venous Disease

7:30 A.M. - 6:45 P.M. **Location:** Trianon Ballroom, 3rd Floor

PROGRAM K (SESSIONS 79-86)

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 79	(Grand Ballroom East, 3rd Floor)
	SS IN THE PREVENTION AND TREATMENT
	AL CORD ISCHEMIA (SCI) ASSOCIATED
	IE TREATMENT OF THORACIC,
THORAC	OABDOMINAL AND COMPLEX
ABDOMI	NAL ANEURYSMS
Moderators:	: Germano C.G. Melissano, MD
	Christian D. Etz, MD, PhD
	Adam Beck, MD
6:40 - 6:45	New Experimental Work In Avoiding SCI After TAAA
	Repair: How Can A Sheep Model Of TEVAR Be
	Helpful
	Hamdy Awad, MD
6:46 — 6:51	With Complex AAAs And Type IV TAAAs,
	The Incidence Of SCI Is 3 Times Greater With
	Endovascular Repairs Than Open Repairs: Why Is This
	A Controversial Finding And How Can It Be So
	George Geroulakos, MD, PhD
6:52 — 6:57	Prediction Of Spinal Cord Ischemia With AI After
	Aortic Procedures: Combinations Of Anatomic
	Features Accurately Predict Risk
	Kak Khee Yeung, MD, PhD
6:58 - 7:03	What Is The Münster Strategy To Avoid SCI After F/B/
	EVAR For TAAA: What Is The Proof That It Works
T.0/ T.00	Martin J. Austermann, MD
7:04 - 7:09	How To Use Motor Evoked Potentials (MEPs) To
	Decrease The Incidence Of SCI After Open And Endo
	TAAA Repairs: What Else Is Important
710 715	James H. Black, III, MD
7:10 — 7:15	Role Of Direct Segmental Artery Revascularization To
	Prevent SCI After Endovascular TAAA Repairs: When
	And How To Do It
7:16 — 7:21	Sukgu Han, MD
7:10 - 7:21	Current Strategies To Minimize SCI With TAAA Repairs (Endo And Open) By Improving The
	Intraspinal Collateral Arterial Network: Status Of
	Intercostal Embolization As Preconditioning To
	Prevent Ischemia (MIS2ACE): Progress Of The PAPA-
	ARTIS RCT
	Christian D. Etz, MD, PhD
7:22 - 7:27	Extensive Single Center Clinical Experience With
7.22 7.27	Intercostal Coil Embolization (MIS2ACE) To Prevent
	SCI With Endovascular TAAA Repair: How And
	When To Do It: Why We Still Need An RCT
	Daniela Branzan, MD
	Andrej Schmidt, MD
7:28 - 7:33	Why Cerebrospinal Fluid (CSF) Drainage To Decrease
	SCI With TAAA Repair Is Not A Benign Procedure:
	When To Use It And When Not
	Gustavo S. Oderich, MD
7:34 - 7:39	Prevention Of SCI After Endovascular TAAA Repairs:
	Lessons Learned From The US Aortic Research
	Consortium (ARC)
	Adam Beck, MD
	Mark A. Farber, MD
	Andres Schanzer, MD
7:40 - 7:45	Shifts In Prevention Protocols For SCI During Open
	And Endovascular TAAA Repairs: What Is Agreed On
	And What Remains Controversial
	Germano C.G. Melissano, MD
	Roberto L.V. Chiesa, MD

7:46 - 7:54

Panel Discussion

SESSION 80 (Grand Ballroom East, 3rd Floor)

NEW DEVELOPMENTS IN THE TREATMENT OF CAROTID STENOSIS: UPDATE ON MESH COVERED STENTS AND TCAR (TRANSCERVICAL CAROTID ARTERY REVASCULARIZATION)

Moderators: Klaus D. Mathias, MD Marc L. Schermerhorn, MD Bruce A. Perler, MD, MBA

7:54 – 7:59 Carotid Webs: An Important Etiology Of Devastating Strokes Especally In Young Women: How Should They Be Diagnosed And Treated Bruce A. Perler, MD, MBA

MESH COVERED STENTS

- 8:00 8:05 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

 D. Christopher Metzger, MD

 Max Amor, MD
- 8:06 8:11 When You Can Do All, How To Decide Between CEA, TCAR And TFCAS: Will Mesh Covered Stents Like CGuard Make A Difference

 Adnan H. Siddiqui, MD, PhD (PowerPoint Presentation With Synched Audio)

 L. Nelson Hopkins, MD
- 8:12 8:17 Outcome Of TCAR Combined With A Mesh-Covered Stent (CGuard From InspireMD): The Best Of All Worlds: What Is The Proof Ralf R. Kolvenbach, MD
- 8:18 8:23 Update On All Trial Results With CGuard And CGuard Prime MicroMesh Covered Stents (InspireMD): Are They Making A Difference And Limitations With Transfemoral/Transradial CAS: Evidence Summary And Long-Term Outcomes

 Piotr Musialek, MD, DPhil
 D. Christopher Metzger, MD
 Stefan Müller-Hülsbeck, MD
- 8:24 8:29 US Studies And Status Of The CGuard And CGuard Prime MicroMesh Stents: Can They Be Used In TCAR And Are They Making A Difference Patrick J. Geraghty, MD
- 8:30 8:35 Latest Real-World Results Of >2,000 Patients Treated With The Roadsaver (Terumo) Dual-Layer Micromesh Carotid Stent Stefan Müller-Hülsbeck, MD
- 8:36 8:42 Panel Discussion

TCAR RELATED TOPICS

- 8:42 8:47 Update On Comparative Performance And Risks Of TCAR, Transfemoral CAS (TFCAS) And CEA With >50K TCAR, 25K TFCAS, And 100K CEA: This Population Based Study Shows That CEA Is Better Than TCAR Which Is Better Than TFCAS Marc L. Schermerhorn, MD Mahmoud B. Malas, MD, MHS
 - 8:48 8:53 Is TCAR Ready To Replace CEA: What About The Clinical Results To Date: What About The Impact Of Clever Marketing: How Will We Find Out Bruce A. Perler, MD, MBA
 - 8:54 8:59 DEBATE: CEA Versus TCAR In A Single Center Propensity Matched Study: The Outcomes Of The Two Treatments Are Comparable At 30 Days But TCAR Has A Higher Mortality At 2 Years Zach AbuRahma, DO Ali F. AbuRahma, MD

And Beyond

Sumaira Macdonald, MD, PhD

9:00 - 9:05

9:06 - 9:11

9:06 — 9:11	Favorable 30-Day Results Of TCAR In Good Risk
	Symptomatic And Asymptomatic Patients: Late
	Breaking Trial Results From ROADSTER 3 Shows That
	The Stroke, Death And MI Rates Are Lower Than In
	High Risk Patients
	Marc L. Schermerhorn, MD
9:12 — 9:17	TCAR Is Safe In Recently Symptomatic Patients And
	Those With Contralateral Carotid Occlusions: Why
	TCAR Should Be The Procedure Of Choice In These
	Conditions
0.10 0.00	Peter A. Schneider, MD
9:18 — 9:23	Panel Discussion
9:24 — 9:34	Break - Visit Exhibits And Pavilions (2nd and 3rd
	Floors)
SESSION 81	(Grand Ballroom East, 3rd Floor)
	AROTID HOT TOPICS RELATED TO TCAR,
	EFFECTS OF INTERVENTIONS ON
	VE FUNCTION
Moderators:	Thomas G. Brott, MD
	Peter L. Faries, MD
0.25 0.70	Michael B. Silva, Jr., MD
9:35 — 9:40	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, MD, MPH
9:41 — 9:46	Intracranial Angiography During TCAR: Why It
7:41 — 7:40	Can Be Valuable And How To Do It In View Of Flow
	Reversal
	Peter L. Faries, MD
9:47 — 9:52	Best Device Selection For CAS: What Stent Type And
7:47 — 7:32	Design, What Type Of Cerebral Protection, What
	Approach And Delivery System: A Review Of The
	Evidence
	Carlo Setacci, MD
	Francesco Setacci, MD
9:53 — 9:58	Comparison Of SVS Versus ESVS Carotid Guidelines
7.00 7.00	For Treatment Of Asymptomatic Carotid Artery
	Stenosis: What Is Known For Sure And What Remains
	Controversial
	Ali F. AbuRahma, MD
9:59- 10:04	Management Of Anticoagulants And Antiplatelet
	Therapy In TCAR Patients
	Michael C. Stoner, MD
	CAROTID STENOSIS AND COGNITIVE FUNCTION
10.05 10.10	
10:05-10:10	Preservation Of Cognition: The New Role For Carotid
	Artery Interventions For Asymptomatic Disease: Will
	CREST 2 Confirm Or Deny Its Importance: Findings
	To Date
	Wesley S. Moore, MD
	Brajesh K. Lal, MD
10 11 10 17	Thomas G. Brott, MD
10:11-10:16	DEBATE: Carotid Intervention Improves Cognitive
	Function Of Patients With Severe Asymptomatic
	Carotid Stenosis (ACS): What About In Octogenarians:
	Should More Or Fewer ACS Patients Undergo Invasive
	Treatment
	Wei Zhou, MD

DEBATE: Not So: TCAR Like TFCAS Has Durable Effectiveness Without Increased Mortality At 2 Years

Favorable 30-Day Results Of TCAR In Good Risk

10:17-10:22 **DEBATE:** 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 Anne L. Abbott, MD, PhD (PowerPoint Presentation With

Synched Audio)

10:23-10:30 **Panel Discussion**

SESSION 82 (Grand Ballroom East, 3rd Floor) MORE CAROTID RELATED NEW DEVELOPMENT TOPICS RELATED TO TCAR, CAS AND CEA, NEW DEVICES, MESH COVERED STENTS, MINI-INCISION CEA, SIGNIFICANCE OF DW MRI DEFECTS, TIMING OF TREATMENT, MEDICAL TREATMENT AND DEALING WITH DISTAL (HIGH) CAROTID LESIONS

Moderators: Richard J. Powell, MD Wei Zhou, MD Frank J. Veith, MD

10:30-10:35 Transradial CAS Using Novel Low-Profile Double-Mesh Stents (Roadsaver, Terumo): Results And Technical Tips Andrea Kahlberg, MD (PowerPoint Presentation With Synched Audio)

10:36-10:41 Selecting Patients For Carotid Intervention Is Getting Harder: Candidates Are Older (And Sicker), Anatomic Imaging Is Not Standardized, Medical Therapy Is Improving, More Options For Intervention Exist And Cries For Non-Operative Management Are Getting Louder: Is Consensus Even Possible Reese A. Wain, MD

SIGNIFICANCE OF SMALL DW MRI DEFECTS AFTER CEA/CAS

10:42-10:47 **DEBATE:** Silent DWI MRI Brain Lesions (Small Infarcts) After CEA/CAS Don't Matter Thomas G. Brott, MD

10:48-10:53 **DEBATE:** Not So: Silent Brain Infarcts (DW MRI Defects) After CEA/CAS Really Matter And Affect Cognitive Changes: The Size And Number Of DW MRI Defects Are Critical Wei Zhou, MD

10:54-10:59 Neuroguard 3-In-1 Carotid Stent System (Contego Medical) With Integrated Balloon, Stent And Distal Filter: Trial Results And Advantages Including Preventing Particulate Emboli Released During Presumed Flow Reversal Protected CAS From Reaching The Brain (Or Distal Filter) Sean P. Lyden, MD

Aleandros Mallios, MD

11:00-11:05 Minimal Incision CEA (MICE) Versus TCAR: Technical Tips For MICE, Cost Effectiveness, Advantages And Limitations Of Both Enrico Ascher, MD

For Symptomatic Carotid Stenosis Invasive Treatment 11:06-11:11 (TFCAS, CEA, TCAR) On Weekends Is More Risky: This Is Especially True For TFCAS Which Probably Should Not Be Performed On Weekends Heepeel Chang, MD

11:12-11:18 Panel Discussion

11:18-11:23 What Is The Best Medical Treatment For Patients With Carotid Stenosis (Asymptomatic And Symptomatic): Can High Risk Plaques Be Made Low Risk And Smaller: All Stroke Patients Should Be On Statins Because They Markedly Decrease Recurrent Stroke And Mortality Rates

J. David Spence, MD

- 11:24-11:29 Technical Tips And Maneuvers To Make Treatment Of High Carotid Lesions Safe And Relatively Simple Richard J. Powell, MD
- 11:30-11:35 What Are The Real Risk Factors For CEA, TFCAS And TCAR: Why Has CMS Gotten Their Risk Factors Wrong And How Have They Messed Up Their Reimbursement Incentives

 Mahmoud B. Malas, MD, MHS

TIMING OF CAROTID INTERVENTIONS AFTER SYMPTOM ONSET

11:36-11:41 When Is Urgent (Within 48 Hours) CEA Or CAS
Fairly Indicated After A Stroke: How Does Use Of tPA
Influence Indications And Neurologic Outcomes In
This Setting

Hernan A. Bazan, MD

- 11:42-11:47 When Is It Reasonable To Perform CEA Within 48 Hours After Stroke Symptoms Starts: Under What Conditions And What Precautions Should Be Taken R. Clement Darling III, MD
- 11:48-11:53 With Crescendo TIAs And Thrombus Overlying A
 Plaque What Is The Best Invasive Treatment And When
 Should It Be Performed
 Domenico Valenti, DMChir, PhD
- 11:54-12:00 Panel Discussion
- 12:00- 1:00 Lunch Break Rhinelander Gallery, 2nd Floor Visit Exhibits And Pavilions (2nd and 3rd Floors)

SESSION 83 (Grand Ballroom East, 3rd Floor)
MORE HOT CAROTID AND SUBCLAVIAN TOPICS:
UPDATES ON KEY CAROTID RCTs

Moderators: Brajesh K. Lal, MD Wesley S. Moore, MD Glenn M. LaMuraglia, MD

1:00 – 1:05 Lipid Management For High Risk Carotid Lesions: Statins, Ezetimibe, PCSK9 And What Else: Should LDL-C Be Monitored Christos D. Liapis, MD

UPDATE ON CAROTID RCTs

- 1:06 1:11 Update On CREST 2: CEA Versus Best Medical Treatment (BMT) And CAS Versus BMT For Asymptomatic Carotid Stenosis (ACS): Recruitment And Findings To Date: Why Not Present The 30-Day And 1-Year Results: If BMT Showed No Difference In Stroke And Death Rates With Those Of CAS Or CEA, Wouldn't This Remove Justification For Invasive Treatment Of ACS Until A Benefit Was Shown Thomas G. Brott, MD Brajesh K. Lal, MD
- 1:12 1:17 Why The Carotid RCTs Fail To Support The Recent CMS Expansion Of Reimbursement For CAS To Treat Asymptomatic Disease (ACS): Do The 5-Year SPACE-2 Results Suggest That Such Expanded Reimbursement Be Delayed Until CREST-2 Data Is In Caitlin W. Hicks, MD, MS
- 1:18 1:23 Why CREST-2 May Not Provide Any Valid Answers:
 Because Of Bad Patient Selection In CREST-2, And
 Because BMT May Not Be Optimal Without GLP-1
 Agonists Which Decrease Stroke Rates: What Is The
 Evidence
 Sumaira Macdonald, MD, PhD

Update On ACST-2: This RCT Found That CEA And CAS For ACS Had Comparable Adverse Event Rates Up To 10 Years And Implied That Both Invasive Treatments Were Superior To Now Obsolete BMT Richard Bulbulia, MA, MD Alison Halliday, MS 1:30 - 1:35Not So Fast! ACST-2 - Like CREST - Has Flaws That Invalidate Their Conclusions: Invasive Therapies May NOT Be Better Than BMT: What Are These Flaws J. David Spence, MD 1:36 - 1:41What Is The Proof That CAS Is Ever Indicated For ACS: The Evidence Does Not Yet Support It Franco Grego, MD 1:42 - 1:47Panel Discussion Consecutive Monocenter Results With CAS For 1:48 - 1:53Asymptomatic Carotid Stenosis (ACS): We Should Not Need An RCT: But Why We Still Do Klaus D. Mathias, MD Anna Zeller, MD 1:54 - 1:59The 2nd European Carotid Surgery Trial (ECST-2): What Will It Tell Us About Best Medical Therapy Versus Invasive Therapy And Progress To Date Gert J. de Borst, MD, PhD 2:00 - 2:05When A Duplex Scan Detects Subclavian Steal, Symptomatic Or Asymptomatic, What Is The Natural History And How Should It Be Managed Ali F. ÁbuRahma, MD 2:06 - 2:11**DEBATE:** Completion Imaging After CEA Is Unnecessary And Potentially Harmful Ali F. AbuRahma, MD **DEBATE:** Not So: Completion Imaging (Angiography Or Duplex) After CEA Is Necessary And Helpful 2:12 - 2:17Keith D. Calligaro, MD 2:18 - 2:23Panel Discussion SESSION 84 (Grand Ballroom East, 3rd Floor) MORE HOT CAROTID TOPICS: TREATMENT IN 2024 OF RECURRENT CAROTID STENOSIS; STROKES DURING CAROTID TREATMENT; CAROTID NEAR OCCLUSIONS; SILENT CORONARY ISCHEMIA IN CAROTID PATIENTS Moderators: Keith D. Calligaro, MD Klaus D. Mathias, MD Ali F. AbuRahma, MD 2:24 - 2:29Most Recurrent Carotid Stenosis Is Benign: When Is Intervention Justified And What Intervention Should Be Used Ashraf Mansour, MD 2:30 - 2:35Current Best Treatment For Strokes Apparent During Or Right After CEA, CAS Or TCAR: Best Diagnostic Modalities And Treatments: Who Should Be Involved And What Skills Are Needed Gert J. de Borst, MD, PhD 2:36 - 2:41Can TCAR Be Helpful In The Management Of Carotid String Sign Lesions Or Near Occlusions Of The Internal Carotid Artery: When Is Its Use Justified, Advantage And Technical Tips Animesh Rathore, MD 2:42 - 2:47Advances In The Diagnosis And Treatment Of Near Total Occlusions And String Signs Of The

> Internal Carotid Artery (ICA) In Symptomatic And Asymptomatic Patients: How Are They Best Treated:

What Do The Current Guidelines Say

Christos D. Liapis, MD

1:24 - 1:29

2:48 — 2:53	Optical Coherence Tomography (OCT) Proves CAS Is Rendered Safer Because Mesh Covered Stents Decrease
	Emboli: The Imaging Evidence And What It Shows About The Interaction Between Stent And Plaque Carlo Setacci, MD
	Francesco Setacci, MD
2:54 - 2:59	Silent Coronary Ischemia As Detected By FFRCT Is
	Common In Carotid Stenosis Patients: Coronary
	Revascularization In Such Patients Decreases Mortality:
	When Should It Be Done – Before Or After Carotid
	Treatment Christopher K. Zarins, MD
	Dainis K. Krievins, MD
3:00 - 3:05	Technical Tips To Enable TCAR In Difficult Anatomic
	Circumstances Including Use Of A Prosthetic Conduit
0.07 0.11	Ashraf Mansour, MD
3:06 — 3:11	Compared To CEA, TCAR Improves Operating Room (OR) Throughput But Is More Costly: Tips To Improve
	OR Efficiency
	Gregg S. Landis, MD
3:12 - 3:19	Panel Discussion
3:19 - 3:30	Break – Visit Exhibits And Pavilions (2nd and 3rd
	Floors)
	(Grand Ballroom East, 3rd Floor)
	ENDOVASCULAR CONCEPT AND MORE
	D CONTROVERSIAL CAROTID TOPICS
Moderators:	Mark Conrad, MD, MMSc Jacob Cynamon, MD
	Michael H. Wholey, MD, MBA
3:30 - 3:35	Update On Transvenous Liver Biopsies: What
	Equipment Is Needed And How To Do Them
3:36 - 3:41	Jacob Cynamon, MD Floating Clot At The Carotid Bifurcation Is A Prime
0:00 — 0:41	Indication For Flow Reversal Technology During
	Treatment Of Carotid Stenosis: How Can Flow
	Reversal Best Be Achieved In This Setting
0/0 0/7	Juan C. Parodi, MD (PowerPoint Presentation With Synched Audio)
3:42 - 3:47	In Stent Stenosis After CAS: How Can It Be Predicted: When Is It Threatening And How Is It Best Managed
	Jacques Busquet, MD
3:48 - 3:53	Anatomic And Procedural Correlates Of Intra- And
	Postoperative Hypotension With CAS: What Should Be
	Done About It Michael C. Stoner, MD
3:54 - 3:59	DEBATE : CAS Is The Best Treatment For Young
	Healthy Patients With High Grade Asymptomatic
	Carotid Stenosis (ACS)
/00 /05	D. Christopher Metzger, MD
4:00 — 4:05	DEBATE: Not So: Even Young Patients With A High Grade ACS Should Not Be Treated By CAS Or CEA:
	BMT Should Suffice: Are There Any Exceptions
	Anne L. Abbott, MD, PhD (PowerPoint Presentation With Synched Audio)
4:06 — 4:11	Why We Need An RCT Comparing TCAR With
	TFCAS, Transradial CAS And Best Medical Treatment
	For ACS And Symptomatic Carotid Stenosis
L 10 L 17	Michael H. Wholey, MD, MBA
4:12 — 4:17	New Technical Tips To Make Minimal Incision CEA (MICE) Easier And Better: Can Same Day Discharge Be
	Safe
	Robert M. Proczka, MD, PhD
4:18-4:23	Risks And Causes Of Non-Ipsilateral Stroke
	Complicating CEA And CAS: How To Decrease Them Mark Conrad, MD, MMSc
	W. Darrin Clouse, MD
4:24 - 4:30	Panel Discussion

SESSION 86 (Grand Ballroom East, 3rd Floor)

NEW CONCEPTS AND NEW DEVELOPMENTS IN PERCUTANEOUS ACCESS CLOSURE AND WOUND CARE

Moderators: Zvonimir Krajcer, MD Zach AbuRaĥma, DO Kenneth Ouriel, MD, MBA

PROGRESS IN PERCUTANEOUS ACCESS AND **CLOSURE**

- Update On Large Bore Percutaneous Access Closure: 4:30 - 4:35Current Status, New Devices, How To Avoid Complications And Where Do We Go From Here Zvonimir Krajcer, MD
- Large Bore Percutaneous Arterial Closure: Which 4:36 - 4:41Device Is Best: Advantages And Disadvantages Of The Manta Device Michael J. Singh, MD
- 4:42 4:47Current Approaches For Large Bore Device Arterial Closure After Percutaneous EVAR And TEVAR: Technical Tips And Causes Of Failure Gianmarco de Donato, MD
- How To Use Fascial Suture Technique To Control 4:48 - 4:53Percutaneous Large Vessel Access: Technical Tips And When To Use Tal M. Hörer, MD, PhD Thomas Larzon, MD, PhD
- 4:54 4:59Results And Benefits Of The CELT ACD Femoral Arteriotomy Closure Device In The Office-Based Laboratory And Hospital Joseph J. Ricotta II, MD, MS

PROGRESS IN WOUND CARE

- 5:00 5:05Update/Review Of Recently Published AHA Guidelines For Treatment Of Diabetic Wounds In The Setting Of PAD Katherine A. Gallagher, MD
- 5:06 5:11A Single Device (From AOTI) For Triple Therapy (Local Oxygen, Compression And Humidification) Enhances Healing Of Non-Healing Lower Extremity Wounds And Incisions David I. Dexter, MD
- New Developments With The TAVITA System To 5:12 - 5:17Predict Wound And Amputation Healing And To Monitor The Effectiveness Of Revascularization Procedures: Hyperspectral Imaging Can Non-Invasively Determine Oxygenation And Perfusion: How Does It Work And Results Jan-Willem Elshof, MD
- 5:18 5:23Optimal Treatment For Deep Groin Infection After Prosthetic Bypasses From The Common Femoral Artery: How To Save The Graft And The Leg Hosam F. El Sayed, MD
- 5:24 5:32**Panel Discussion End of Program K**

PROGRAM L (SESSIONS 87-94)
NEW DEVELOPMENTS IN THE TREATMENT OF
POPLITEAL DISEASE; 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

SESSION 87 (Grand Ballroom West, 3rd Floor)
POPLITEAL DISEASE TOPICS RELATED TO
ANEURYSM TREATMENT, ENTRAPMENTS,
ADVENTITIAL CYSTIC DISEASE AND TRAUMA

Moderators: Jason T. Lee, MD Martin Björck, MD, PhD

Grand Ballroom West, 3rd Floor

POPLITEAL ANEURYSMS AND THEIR BEST CURRENT TREATMENTS

6:52 – 6:57 Endovascular Repair For Popliteal Artery Aneurysm:
Pitfalls And Complications: When Is Open Surgery
Best

Irwin V. Mohan, MBBS, MD

- 6:58 7:03 Treatment Of Popliteal Aneurysms: When Conservative, When Open, When Endovascular: What Are The Hard Data

 Martin Björck, MD, PhD
- 7:04 7:09 Endovascular Versus Open Repair: Why After 20 Years Of Selective Endografting, I Now Favor Open Repair In Most Patients Martin R. Back, MD
- 7:10 7:15 Outpatient Endovascular Repair Of Popliteal Artery Aneurysms With Bare Metal Stents: It Shouldn't Work, But Does: What Is The Evidence Sam S. Ahn, MD, MBA
- 7.16 7.21 Popliteal Artery Aneurysms Back To Basics:
 Indications For Open Surgery And Rescue Procedures
 For Failed Endovascular Repairs
 Jose Fernandes e Fernandes, MD, PhD

ENTRAPMENTS, ADVENTITIAL CYSTIC DISEASE AND TRAUMA

- 7.22 7.27 Updates On The Diagnosis And Treatment Of Popliteal Entrapments: What Are Their Misleading (Doppelganger) Diagnoses Katherine A. Gallagher, MD
- 7.28 7.33 Management Of Functional Popliteal Artery Entrapment Syndrome In Athletes: What Is The Pathological Anatomy And What Symptoms Does It Cause: Technique Of Surgical Repair Jason T. Lee, MD
- 7.34 7.39 Adventitial Cystic Disease Of The Popliteal Artery: Pathogenesis, Symptoms And Optimal Treatment *Irwin V. Mohan, MBBS, MD*
- 7.40 7.45 What Is The Surgical Approach And Best Graft Usage For Popliteal Artery Injury From Posterior Knee Dislocation: How Can Associated Vein Injury Be Detected And What Should Its Treatment Be Charles J. Fox, MD
- 7:46 7:56 Panel Discussion

SESSION 88 (Grand Ballroom West, 3rd Floor)

NEW DEVELOPMENTS IN TREATING ARTERIAL (INCLUDING AORTIC) GRAFT INFECTIONS

Moderators: Keith D. Calligaro, MD Manju Kalra, MBBS

7.56 – 8.01 Update On The NAIS Procedure (Deep Vein Reconstruction) For Infected Aortic Grafts: How To Make The Operation Easier And Faster: When Is It Indicated John F. Eidt, MD

TREATMENT OF MYCOTIC ANEURYSMS

- 8:02 8:07 What Is The Best Treatment For Mycotic Aneurysms: Open, Endo, Or Hybrid: When Is EVAR Helpful Yamume Tshomba, MD
- 8:08 8:13 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, MD

TREATMENT OF AORTIC AND ARTERIAL GRAFT AND ENDOGRAFT INFECTIONS

- 8:14 8:19 For Many Infected Prosthetic Arterial/Aortic Grafts,
 Endografts And Mycotic Aneurysms Less Than The
 Current Standard Radical Graft Excisional Treatment
 Is Best: Details And Examples Of This Less Radical
 Treatment
 Martin Malina, MD, PhD
- 8:20 8:25 Support For The Graft Preservation Concept For Treating Prosthetic Aortic Graft Infections From A European Multicenter Study (VASGRA): All Or Part Of The Infected Graft May Be Preserved: Under What Circumstances

 Zoran Rancic, MD, PhD
- 8.26 8.31 Optimal Techniques In 2024 For Treating Infected Aortoiliac Prosthetic Grafts And Endografts (Including EVAR, TEVAR, F/B/EVAR): From A Large National Cohort And The GRANDPA Global Registry Anders Wanhainen, MD, PhD
- 8:32 8:37 Panel Discussion
- 8:38 8:43 With Aortic Graft Infection, How Can Inline (In Situ) Flow Be Reestablished: Indications: What Grafts: Technical Tips: Results
 Peter F. Lawrence, MD
- 8:44 8:49 Infected Endografts After EVAR: Etiological Factors, Diagnosis, Treatment: Does The Endograft Always Have To Be Removed

 Mohammad H. Eslami, MD, MPH
- 8:50 8:55 The Real Truth About Use Of Cryopreserved Conduits (CryoGraft-Artivion) To Treat Infected Aortic/Arterial Reconstructions: From A Large Single Center Experience: There Are Advantages And Limitations Randall R. De Martino, MD
 Manju Kalra, MBBS
- 8.56 9.01 Update On Surgical Treatment For Infected Thoracic Aortic Grafts And Endografts, With Or Without Aorto-Esophageal Or Aorto-Bronchial Fistulas: Optimal Techniques And Results From A Committed Center Germano C.G. Melissano, MD
 Andrea Kahlberg, MD
 Roberto L.V. Chiesa, MD

9:02 - 9:07

Abdomen And Extremities: When Does The Entire Graft Need To Be Excised And When Can All Or Part Of The Graft Be Preserved: How To Make That **Judgment** Waclaw B. Kuczmik, MD, PhD 9:08 - 9:13Treatment Of Infected Aortic Grafts (Endo And Open): Explantation Or Preservation: Technical Tips Javairiah Fatima, MD 9:14 - 9:20 Panel Discussion 9:20 - 9:34Break - Visit Exhibits And Pavilions (2nd and 3rd Floors) SESSION 89 (Grand Ballroom West, 3rd Floor) PROGRESS IN VASCULAR IMAGING AND **GUIDANCE FOR ENDOVASCULAR TREATMENTS** WITH LESS RADIATION EXPOSURE OR CONTRAST TOXICITY Moderators: Matthew J. Eagleton, MD Jan M.M. Heyligers, MD, PhD Advantages And Disadvantages Of The Three Main 9:34 - 9:39Hybrid OR Suites (GE, Siemens, Philips): How To Pick The Best One For Your Institution Bjoern D. Suckow, MD ADVANCED ENDOVASCULAR GUIDANCE WITH LESS **RADIATION** 9:40 - 9:453-Dimensional Advanced Guidance Systems For Endovascular Procedures: How Do The IOPS (Centerline), FORS (Philips), And Cydar (Medtronic) Systems Work And Reduce The Need For Radiation . Mark A. Adelman, MD 9:46 - 9:51 With F/B/EVAR For Complex AAAs, FORS Lumiguide Fiberoptic Guidance (Philips) Reduces Radiation Exposure Compared To Standard Imaging Marc L. Schermerhorn, MD 9:52 - 9:57New Facts And Myths About Decreasing Radiation Exposure: Leaded Caps And Glasses Don't Help; The Egg Nest System Of Shields Does: What Is It Melissa L. Kirkwood, MD 9:58-10:03 What Is Redo Fusion And How Does It Help After Failed Endovascular Complex Aortic Procedures Giovanni Tinelli, MD, PhD 10:04-10:09 **Panel Discussion** DUPLEX AND INTRAVASCULAR ULTRASOUND 10:10-10:15 Duplex Ultrasound Guidance: When Can It Replace Fluoroscopy For Endovascular Procedures: Requirements, Advantages, Limitations: Is Its Use Becoming Widespread Enrico Ascher, MD Natalie A. Marks, MD, RPVI, RVT 10:16-10:21 Intraprocedural Duplex Ultrasound Guidance May Be Better And Cheaper Than IVUS For Most Endovascular Cases: When Is It Not Eric A. Secemsky, MD, MSc (PowerPoint Presentation With Synched Audio) **EKG-GATED CTA**

EKG-Gated CTA And Its Added Value For Sizing EVAR And TEVAR Endografts: How It Decreases Failures

Frans L. Moll, MD, PhD

New Concepts In Prosthetic Graft Infection In The

10:22-10:27

VASCULAR HOLOGRAPHY

	77.00025 IK 77020 010 II 777
10:28-10:33	Update On The ARCUS System Of Augmented Reality (Derived From A Contrast CT) And Its Value In Vascular And Endovascular Procedures: How Does It Work And Experience To Date
10:34-10:39	Jan M.M. Heyligers, MD, PhD Update On Holographic Guidance Of Endovascular Procedures (With Augmented Reality Goggles And No Screen): How Does It Work And Clinical Experience: What Is Possible And What Is Not
10:40-10:48	Claude Mialhe, MD Panel Discussion
SESSION 90	(Grand Ballroom West, 3rd Floor)
	AL INTELLIGENCE WORKFLOWS IN
	CARE: HOW TO DO THE MOST COMPLEX
	CASES BY EXPERTS IN THE FIELD
	Gustavo S. Oderich, MD
	Alan B. Lumsden, MD
	Kak Khee Yeung, MD, PhD
10:49-10:54	Generative AI For Aortic Imaging: The Promise And Perils
40 55 44 00	Elsie Ross, MD, MSc
10:55-11:00	Personalized Treatment Of AAAs With AI: The Development Of The First Prediction Models Of The
	Vascul-Aid Project
11.01.11.07	Kak Khee Yeung, MD, PhD
11:01-11:06	AI Based Facial Analysis Identifies Phenotypic Features Of Heritable Aortic Diseases
	David R. Murdock, MD
	Dianna M. Milewicz, MD, PhD
11:07-11:12	AI Prediction Of Type I Endoleaks
	Jean-Noel Albertini, MD
	Stephan Haulon, MD
11:13-11:21	Panel Discussion
	HOW TO DO THE MOST COMPLEX AORTIC CASES BY EXPERTS IN THE FIELD (VIDEO PRESENTATIONS)
11:22-11:27	Best Approach To Total Transfemoral TAAA Repair
11.22 11.27	Using TAMBE Device Sukgu Han, MD
11:28-11:33	Hybrid Intercostal Artery Bypass For TAAA Repair
	Shahab Toursavadkohi, MD
11:34-11:39	Bidirectional Branch For Complex AAA
	Nuno V. Dias, MD, PhD
11:40-11:45	Transcatheter Electrosurgical Septotomy 1-0-1
	Mirza S. Baig, MD
11:46-11:51	Retrograde 3-Vessel Arch Branch Repair
	Giuseppe Panuccio, MD
	Tilo Kölbel, MD, PhD
11:52-12:00	Panel Discussion
12:00- 1:00	Lunch Break - Rhinelander Gallery, 2nd Floor Visit Exhibits And Pavilions (2nd and 3rd Floors)
SESSION 91	(Grand Ballroom West, 3rd Floor)

PRESENTATIONS AND CHALLENGING RECORDED LIVE CASES FROM MÜNSTER, GERMANY

Moderators: Martin J. Austermann, MD Giovanni B. Torsello, MD Marco V. Usai, MD

1:00 - 1:10Endovascular Aortic Arch Repair With Double In Situ Fenestration Marco V. Usai, MD

ΒY

4.40 4.00	C. I. D. I.
1:10 — 1:20	Single Branched TEVAR In A Complex Thoraco-
	abdominal Dissection
1 20 1 20	Martin J. Austermann, MD
1:20 — 1:30	Emergency B/EVAR To Treat A Covered Aortic
	Rupture After EVAR With Type I Endoleak
1.00 1.07	Martin J. Austermann, MD
1:30 — 1:37	Endovascular Treatment Of TAAA 4 Via Branched
	CMD With Short Proximal Sealing – Münster
	Experiences (5-Minute Presentation With 2-Minute
	Discussion) Marco V. Usai, MD
	Marco v. Osai, MD
SESSION 92	(Grand Ballroom West, 3rd Floor)
	ELOPMENTS IN THE TREATMENT OF
	IC OUTLET SYNDROMES (TOSs)
	Mark A. Adelman, MD
moderators.	Michael J. Singh, MD
1:38 - 1:43	For Venous TOS An Anterior Infraclavicular Approach
	Permits Resection Of The Anterior Third Of The First
	Rib Which Is Sufficient: Technique, Limitations And
	Results
	Keith D. Calligaro, MD
	Matthew J. Dougherty, MD
1:44 - 1:49	Minimal Invasive Transaxillary First Rib Resection
	Under Local And Regional Anesthesia For TOSs: How
	To Do It, Limitations And Precautions
	Francesco Spinelli, MD
1:50 — 1:55	To Treat Various Forms Of TOSs, Resection Of The
	Middle Third Of The First Rib Is Sufficient: A 30-Year
	Experience: How To Do It And When Not To
	Claude D. Vaislic, MD
1:56 — 2:01	Robotic Approach To Thoracic Outlet Decompression:
	How To Do It: Limitations And Contraindications
0.00 0.07	Katherine A. Teter, MD
2:02 — 2:07	Supraclavicular Approach To Arterial And Neurogenic
	TOS: Technical Tips Mark A. Adelman, MD
2:08 — 2:13	*
2:00 — 2:13	Botox Injections In The Treatment Of Neurogenic TOS: How Does It Work, When To Do It, How To Do It And
	Results
	Jason T. Lee, MD
2:14 - 2:19	Adolescent Neurogenic And Vascular TOSs: They
2.14 2.17	Are Different And Uniquely Challenging: How To
	Diagnose Them And How Best To Treat Them In
	Athletes And Non-Athletes
	Michael J. Singh, MD
2:20 - 2:25	Subclavian Artery Aneurysms In Patients With Genetic
	Arteriopathy: How Should They Be Worked Up And
	Treated
	Sherene Shalhub, MD, MPH
2:26 - 2:32	Panel Discussion
2:32 - 2:42	Break - Visit Exhibits And Pavilions (2nd and 3rd
	Floors)
CECCIONI 03	(Grand Ballroom West 3rd Floor)
	(Grand Ballroom West, 3rd Floor)
	FIPLATELET REGIMENS UPDATE ON RARE
	AR DISEASES; NEW DEVELOPMENTS
	LATELET AND ANTICOAGULATION
REGIMEN	IS AND MEDICAL AND DRUG

Moderators: Caron B. Rockman, MD Kellie R. Brown, MD

TREATMENTS

UPDATE ON TREATMENT OF RARE VASCULAR DISEASES

- 2.42 2.47 Optimal Current Management Of Takayasu's Disease Involving The Supra-Aortic Branches: Technical Details For Open Surgical Management And What Is The Role For Endo Treatment With Bare Or Covered Stents Kellie R. Brown, MD
- 2.48 2.53 The Present Status Of Buerger's Disease: Does It Still Exist; How To Diagnose And Treat It Kamphol Laohapensang, MD
- 2:54 2:59 How To Make Operations For Complications Of Vascular Ehlers Danlos Syndrome Go Well *James H. Black, III, MD*
- 3:00 3:05 Medical Treatment Of Patients With Vascular Ehlers
 Danlos Syndrome: How Does Celiprolol Treatment
 Work And How Does It Help
 Martin Björck, MD, PhD (PowerPoint Presentation With
 Synched Audio)

ANTIPLATELET AND ANTICOAGULATION TREATMENT

- 3.06 3.11 Current Optimal Antiplatelet And Anticoagulation
 Treatment For Various Vascular Procedures In Various
 Vascular Beds: What Newer Drugs And DOACs Are
 Useful And What Is The Optimal Timing Of Treatment
 Peter Henke, MD
- 3:12 3:17 Understanding The Barriers To Antiplatelet And Statin Adherence Following Vascular Interventions: What Should Be Done About It

 Wei Zhou, MD
- 3:18 3:23 Panel Discussion
- 3:24 3:29 Next Generation Antithrombotic Agents: What's On The Horizon For Anticoagulant And Antithrombotic Drugs: How Will They Work And How Helpful Will They Be
 - Elliot L. Chaikof, MD, PhD
- 3.30 3.35 Lowering LDL-C And Controlling Elevated Blood
 Pressure And Lipoprotein Little A [Lp(a)] Can Lower
 Cardiovascular Risk 80%: What To Do If Patients Can't
 Tolerate A Statin Dose: Ezetimibe (Zetia), A PCSK9
 Inhibitor, Inclisiran, Bempedoic Acid (Nexletol), Etc.
 Richard Bulbulia, MA, MD

NEW DEVELOPMENTS IN MEDICAL MANAGEMENT

- 3:36 3:41 What Are The Best Medical Treatments After Carotid, Aortic And Lower Extremity Endovascular And Open Procedures Maciej L. Dryjski, MD, PhD
- 3.42 3.47 Value And Limitations Of Statins And Non-Statin Lipid Lowering Agents And Other Medical Treatments In Patients With Carotid Artery Stenosis: Should They Be The Same Or Different In Patients Undergoing Invasive Procedures Kosmas I. Paraskevas, MD
- 3:48 3:52 Panel Discussion

SESSION 94 (Grand Ballroom West, 3rd Floor)

ADVANCES IN THE ENDO AND OPEN TREATMENT

OF VASCULAR TRAUMA

Moderators: Todd E. Rasmussen, MD

Gilbert R. Upchurch, MD

3:52 – 3:57 Vascular Injuries After Blunt Abdominal Trauma: Diagnosis And Management: When Endo, When Open

Treatment

Dittmar Böckler, MD

3:58 — 4:03	New Developments In The Endovascular Management Of Vascular Injuries: How Can A Hybrid Suite Be Helpful
	Ravi R. Rajani, MD UPDATE ON BLUNT THORACIC AORTIC INJURY (BTAI
4:04 — 4:09	How To Manage Heparin In TEVAR For BTAI When Head Or Other Injuries Are Also Present: Some, None Or Just Sheath Flushing
4:10 - 4:15	Charles J. Fox, MD Oucomes Of BTAI In >1,000 Patients: When Is Observation The Best Treatment; When Is TEVAR Best: When Is It Not: Technical Tips: From The Aortic Trauma Foundation Registry
4:16 — 4:21	Ali Azizzadeh, MD Acute Thoracic Aortic Pseudo-Coarctation After BTAI: What Is It: How Does It Produce Distal Organ Ischemia: How Should It Be Diagnosed And Treated Emergently By TEVAR: Technical Tips
4:22 - 4:27	Erica L. Mitchell, MD, MEd Classification Of BTAIs In Adults And Pediatric Patients: The Evidence Shows That Grades I And II Lesions Can Be Treated Conservatively Whereas Grades III And IV Should Be Treated Endovascularly: Recommendations For Graft Sizing In Children
4:28 - 4:33	Elina Quiroga, MD, MPH Update On The Retrievable Rescue Stent-Graft For Treating Aortic And Vena Cava Injuries: What Is It: How Does It Work And Current Status
4:34 — 4:39	Bryan W. Tillman, MD, PhD Update On Resuscitative Endovascular Balloon Occlusion Of The Aorta (REBOA): When Is It A Valuable Procedure And When Is It Not: Limitations And Precautions
4:40 — 4:45	Gilbert R. Upchurch, MD Evolving Techniques In Pediatric Vascular And Endovascular Trauma Surgery: What Special Precautions Are Needed: How To Deal With Arterial Spasm: When And How Can Endovascular Grafts Be Used
4:46 - 4:56	Michael C. Dalsing, MD Panel Discussion End of Program L
DEEP VEN	M (SESSIONS 95-105) NOUS DISEASE Iroom, 3rd Floor
DEEP VEN	(Trianon Ballroom, 3rd Floor) NOUS PHYSIOLOGY AND VENOUS STENT
Moderators:	Jose I. Almeida, MD Lowell S. Kabnick, MD
7:30 — 7:34	Introduction: Deep System Lowell S. Kabnick, MD
7:35 — 7:40	Why Do We Call It Venous Hypertension Brajesh K. Lal, MD
7:41 — 7:46	Appropriate Patient Selection For Iliac Vein Stenting Jose I. Almeida, MD
7:47 — 7:52	Is 50% Stenosis The Cutpoint For Stenting
7:53 — 7:58	Mark H. Meissner, MD Iliocaval Duplex Ultrasound With Image Optimization
7:59 — 8:04	Jan M. Sloves, RVT Physiologic Assessment Of The Severity Of Iliac Vein Obstruction Fedor Lurie, MD, PhD

8:05 — 8:10	Approaching The NIVL Patient: How To Ensure
	Success Malamand Barani, MD
8:11 — 8:16	Mahmood Razavi, MD An Ultrasound Imaging And Computational Fluid Dynamic Protocol To Assess Hemodynamics In Iliac
	Vein Compression Syndrome
0.47 0.00	Carlos Alberto Figueroa, PhD
8:17 — 8:22	Panel Discussion
	(Trianon Ballroom, 3rd Floor) STENT TRIALS
Moderators:	Alun H. Davies, MA, DM, DSc
0.22 0.20	Erin H. Murphy, MD
8:23 — 8:28	RCT: Venous Stenting Versus Conservative Treatment In Deep Venous Obstruction House Inlain MD, Ph.D.
8:29 — 8:34	Houman Jalaie, MD, PhD Early Experience With The Gore Viafort Venous Stent
0.27 0.04	Andrew Holden, MBChB
8:35 — 8:40	The BEYOND Venous Stent Registry Michael K.W. Lichtenberg, MD
8:41 — 8:46	Criteria To Predict Mid-Term Outcome After Stenting Of Chronic Iliac Vein Obstructions (PROMISE Trial)
	Iris Baumgartner, MD
8:47 — 8:52	Will The BEST Trial Answer The Question On Iliac Stenting
	Alun H. Davies, MA, DM, DSc
8:53 - 8:58	A Look At Long-Term Venous Stent Data: ABRE Study
	36-Month Clinical Outcome
8:59 — 9:04	Erin H. Murphy, MD Zilver Vena Stent Trial: 4-Year Outcomes
0.07 7.04	Anthony J. Comerota, MD
9:05 — 9:10	Venovo Venous Registry: 36-Month Data Report From
	A Real World Registry
	Michael K.W. Lichtenberg, MD
9:11 — 9:16	Michael K.W. Lichtenberg, MD Panel Discussion
	Panel Discussion
SESSION 97	9
SESSION 97 FEMORO	Panel Discussion (Trianon Ballroom, 3rd Floor)
SESSION 97 FEMORO OCCLUSI	Panel Discussion (Trianon Ballroom, 3rd Floor) -ILIOCAVAL CHRONIC TOTAL
SESSION 97 FEMORO OCCLUSI AND OTH	Panel Discussion (Trianon Ballroom, 3rd Floor) -ILIOCAVAL CHRONIC TOTAL ONS, RECANALIZATION TECHNIQUES HER CONSIDERATIONS Jose I. Almeida, MD
SESSION 97 FEMORO OCCLUSI AND OTH Moderators:	Panel Discussion (Trianon Ballroom, 3rd Floor) -ILIOCAVAL CHRONIC TOTAL ONS, RECANALIZATION TECHNIQUES HER CONSIDERATIONS Jose I. Almeida, MD Lowell S. Kabnick, MD
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SESSION 97 FEMORO OCCLUSI AND OTH Moderators: 9:17 - 9:22 9:23 - 9:28 9:29 - 9:34 9:35 - 9:40 9:41 - 9:46 9:47 - 9:52 9:53 - 9:58	Panel Discussion (Trianon Ballroom, 3rd Floor) -ILIOCAVAL CHRONIC TOTAL ONS, RECANALIZATION TECHNIQUES HER CONSIDERATIONS Jose I. Almeida, MD Lowell S. Kabnick, MD Steps To Minimize Complications During Central Venous Recanalization Marcelo Guimaraes, MD, MBA Ruptured IVC And Iliac Vein: Now What Jose I. Almeida, MD Outcomes And Predictors Of Failure Of Iliac Vein Stenting Rabih A. Chaer, MD Preclinical Data On Sirolimus Coated Balloons In Deep Veins: Results From The vSTRIDE Trial Andrea T. Obi, MD Results Of Revcore For Use In Chronic Deep Vein Stent Occlusion Steven D. Abramowitz, MD Hybrid Open And Endovascular Techniques For Complex Iliofemoral Disease Erin H. Murphy, MD Endovascular Brachiocephalic And IVC Bypass Graft Creation: Changing What Is (Im)Possible Marcelo Guimaraes, MD, MBA
SESSION 97 FEMORO OCCLUSI AND OTH Moderators: 9:17 - 9:22 9:23 - 9:28 9:29 - 9:34 9:35 - 9:40 9:41 - 9:46 9:47 - 9:52	Panel Discussion (Trianon Ballroom, 3rd Floor) -ILIOCAVAL CHRONIC TOTAL ONS, RECANALIZATION TECHNIQUES HER CONSIDERATIONS Jose I. Almeida, MD Lowell S. Kabnick, MD Steps To Minimize Complications During Central Venous Recanalization Marcelo Guimaraes, MD, MBA Ruptured IVC And Iliac Vein: Now What Jose I. Almeida, MD Outcomes And Predictors Of Failure Of Iliac Vein Stenting Rabih A. Chaer, MD Preclinical Data On Sirolimus Coated Balloons In Deep Veins: Results From The vSTRIDE Trial Andrea T. Obi, MD Results Of Revcore For Use In Chronic Deep Vein Stent Occlusion Steven D. Abramowitz, MD Hybrid Open And Endovascular Techniques For Complex Iliofemoral Disease Erin H. Murphy, MD Endovascular Brachiocephalic And IVC Bypass Graft Creation: Changing What Is (Im)Possible

10:05-10:10 Panel Discussion

	(Trianon Bailroom, 3rd Floor)
VENOUS	THROMBOSIS SCIENCE AND TREATMENT
STRATEG	IFS
	Thomas W. Wakefield, MD
	Peter Henke, MD
10:11-10:16	Have Venous Trials Changed The Management Of The
	Ilio-Femoral DVT In 2024
	Ali Amin, MD, RVT
10:17-10:22	Update Of Post-Thrombotic Syndrome Prevention
	Tomasz Urbanek, MD, PhD
10:23-10:28	Update On Experimental DVT Vein Wall Injury
10.20 10.20	Peter Henke, MD
10:29-10:34	Venous Thromboembolism In The Context Of Chronic
10:27-10:34	Venous Disease
10.05 10.70	Thomas W. Wakefield, MD
10:35-10:40	Inflow Assessment In PTS Patients
10 /1 10 //	Jose I. Almeida, MD
10:41-10:46	Why Do VTE Risk Scores Fail To Prevent VTE
40 / 5 40 50	Peter Henke, MD
10:47-10:52	Inflammation, Selectins And Venous Thrombosis
	Thomas W. Wakefield, MD
10:53-10:58	Predictive Modeling For Post-Thrombotic Syndrome In
	DVT Patients
	Steven D. Abramowitz, MD
10:59-11:04	Assessing Radiation Exposure To Patients During
	Recanalization Of Chronic Venous Obstruction
	Houman Jalaie, MD, PhD
11:05-11:10	Panel Discussion
CECCIONI 00	(Trianon Ballroom, 3rd Floor)
	US REMOVAL THROMBECTOMY DEVICES
	HER ISSUES TO CONSIDER
Moderators:	Patrick E. Muck, MD
11 11 11 14	Robert B. McLafferty, MD, MBA D. May Study, Machanial Thrombottomy For
11:11-11:16	P-Max Study: Mechanical Thrombectomy For Iliofemoral DVT With Aspirex – 24-Month Results
11 17 11 00	Michael K.W. Lichtenberg, MD
11:17-11:22	Tips And Tricks With Lightning FLASH For PE And DVT Patients
11:23-11:28	Patrick E. Muck, MD
11:23-11:20	New Percutaneous Thrombectomy Reperfusion System
11 00 11 0/	Patrick E. Muck, MD
11:29-11:34	CLOUT Registry For The Inari CloTriever
44.05.44.40	David J. Dexter, MD
11:35-11:40	Obstruction Or Reflux: What To Treat First In Venous
	Ulcers
11 /1 11 //	Robert B. McLafferty, MD, MBA
11:41-11:46	Venous Stent Thrombosis: Insights From The ABRE
	Study
44 / 5 44 50	Erin H. Murphy, MD
11:47-11:52	Thrombolysis For Acute DVT: Guidance From Current
	Clinical Trials
44 50 44 50	Brian G. DeRubertis, MD
11:53-11:58	Panel Discussion
11:59- 1:03	
	Lunch Break - Rhinelander Gallery, 2nd Floor
	Lunch Break – Rhinelander Gallery, 2nd Floor Visit Exhibits And Pavilions (2nd and 3rd Floors)
SESSIONI 100	Visit Exhibits And Pavilions (2nd and 3rd Floors)

1:04 - 1:09

Moderators: Cynthia K. Shortell, MD

Mark H. Meissner, MD

Mark H. Meissner, MD

The Role Of Conservative Pelvic Vein Management

1:10 — 1:15	Management Of Symptomatic Vulvar Varices With And Without Pelvic Symptoms
1:16 — 1:21	Steve Elias, MD Pelvic Venous Disease: New Terminology, New Treatment Approach, Still No Level 1 Data
1:22 — 1:27	Lindsay Machan, MD Ovarian Vein Embolization: Which Patients Benefit Mark H. Meissner, MD
1:28 — 1:33	Treatment Algorithm For Left Renal Vein Compression Cynthia K. Shortell, MD
1:34 — 1:39	Outcomes Of Left Renal Vein Stenting In Patients With Nutcracker Syndrome
1:40 — 1:45	Rabih A. Chaer, MD Open Surgical And Endovascular Treatment Of
1:46 — 1:51	Nutcracker Syndrome: Do We Have The Answer Now Manju Kalra, MBBS RCT Of Pelvic Venous Embolization Versus Sham Procedure For Venous Origin Chronic Pelvic Pain In
1:52 — 1:57	Women Neil M. Khilnani, MD Management Of Combined Iliac Vein Obstruction And Ovarian Reflux
1:58 — 2:03	Kush R. Desai, MD Panel Discussion
	(Trianon Ballroom, 3rd Floor) ENOUS THROMBOSIS
Moderators:	Timothy K. Liem, MD, MBA Steve Elias, MD
2:04 — 2:09	Anticoagulation In Childhood, The Role For DOACs Dawn M. Coleman, MD
2:10 — 2:15	Management Of Venous Thoracic Outlet Syndrome Robert J. Beaulieu, MD
2:16 — 2:21	Which DOAC For What Disease: Review Of Ongoing Trials Andrea T. Obi, MD
2:22 — 2:27	Hypercoagulable Work Up, Thrombophilia Testing, And Duration Of Anticoagulation Rachel Rosovsky, MD, MPH
2:28 — 2:33	SVT Treatment Options: DOAC, LMWH, Nothing Steve Elias. MD
2:34 — 2:39	Update On Reversal Agents For The DOACs Timothy K. Liem, MD, MBA
2:40 — 2:45	Factor XI Inhibitors: What Are They Alex C. Spyropoulos, MD
2:46 — 2:51	Panel Discussion
	(Trianon Ballroom, 3rd Floor) RS AND MORE ISSUES WITH STENTS
Moderators:	William A. Marston, MD Timothy K. Liem, MD, MBA
2:52 — 2:57	IVC Filter Retrieval: Basic And Advanced Ripal T. Gandhi, MD
2:58 — 3:03	Bertram D. Cohn's Contributions To The Development Of The Original IVC Filter Enrico Ascher, MD
3:04 — 3:09	Getting Out Of A Pinch: A Technique To Remove Frozen Central Venous Catheters Scott L. Stevens, MD
3:10 — 3:15	Laser-Assisted IVC Filter Retrieval: When And How Kush R. Desai, MD
3:16 — 3:21	Denali Filter Experience Eric Hager, MD
3:22 — 3:27	Surgical Removal Of IVC Filters: Perforation Or Infiltration Timothy K. Liem, MD, MBA

3:28 — 3:33	Rethinking Filters: The Latest Evidence From The Cook IVC Filter Study <i>Rabih A. Chaer, MD</i>
3:34 — 3:39	Migration Of Iliac And Renal Vein Stents: T-Stent Might Be A Solution To The Problem Peter Gloviczki, MD
3:40 - 3:45	Outcome Of Venous Stents In Adolescents, Teenagers, And Pregnancy
3:46 — 3:51	Mahmood Razavi, MD Acute Iliofemoral DVT In Adolescents And Young Adults And Whether They Should Undergo Stenting For May Thurner At The Time Of DVT Intervention William A. Marston, MD
3:52 - 3:57	Panel Discussion
MORE DE	(Trianon Ballroom, 3rd Floor) EP VENOUS OBSTRUCTION, VENA CAVA,
AND STEI	
3:58 - 4:03	Erin H. Murphy, MD Efthymios (Makis) Avgerinos, MD IVC Reconstruction Options
	Erin H. Murphy, MD
4:04 — 4:09	Tips And Tricks For Optimal Management Of Primary And Secondary IVC Tumors Jill J. Colglazier, MD
4:10 - 4:15	Stenting Across The IVC Filter Is A Safe And Effective Alternative To Complex Removal Efthymios (Makis) Avgerinos, MD
4:16 — 4:21	Techniques For Open Removal Of Occluded Open And Closed Cell IVC And Iliofemoral Venous Stents Steven D. Abramowitz, MD
4:22 — 4:27	Popliteal Venous Aneurysm Repair: How And When To Treat
4:28 — 4:33	Heron E. Rodriguez, MD Effect Of Venoactive Compounds In Post-Thrombotic Syndrome
4:34 - 4:39	Monika L. Gloviczki, MD, PhD Does Reducing Venous Hypertension By Ablation Or Venous Stenting "Cure" Edema In Patients With Venous Ulcers
4:40 - 4:45	Thomas F. O'Donnell, Jr., MD Hemodynamic Consequences After Venous Stenting: An In Vitro Assessment
4:46 — 4:51	Houman Jalaie, MD, PhD Measurement Of Edema Using Volumetric Plethysmography Seshadri Raju, MD
4:52 - 4:57	Panel Discussion
	(Trianon Ballroom, 3rd Floor)
	PORTANT DEEP VENOUS CONCEPTS
Moderators:	Arjun Jayaraj, MD
4:58 — 5:03	Rabih A. Chaer, MD Ambulatory Venous Pressure Measurement Via Column Interruption Duration
5:04 — 5:09	Seshadri Raju, MD Outcomes Of Acute Superior Mesenteric Venous Thrombosis Rabih A. Chaer, MD
5:10 — 5:15	Suprainguinal Lymphatic Disease In Patients Undergoing Stenting For Chronic Iliofemoral Venous
5:16 — 5:21	Obstruction Arjun Jayaraj, MD Open Surgical And Endovascular Treatment Of Superior Vena Cava Syndrome Manju Kalra, MBBS

5:22 — 5:27	Treatment Effectiveness Of A Non-Pneumatic
	Compression Device Versus An Advanced
	Pneumatic Compression Device For Lower Extremity
	Lymphedema Swelling (TEAYS Study)
5:28 - 5:33	Thomas S. Maldonado, MD
J:20 — J:33	Indications, Technical Aspects, And Outcomes Of Stent Placement In Chronic Iliofemoral Venous Obstruction
	Maxim Shaydakov, MD, PhD
5:34 - 5:39	NIVL Management: Highlights From VIVA, AVF,
	AVLS, SCAI Consensus Statement
	Kush R. Desai, MD
5:40 — 5:45	Panel Discussion
SESSION 105	(Trianon Ballroom, 3rd Floor)
	REFLUX ISSUES AND DEEP VEIN VALVE
TECHNO	
	Jorge H. Ulloa, MD
	Paul J. Gagne, MD
5:46 — 5:51	Long-Term Results Of The SAVVE Trial: A
	Bioprosthetic Valve
5:52 — 5:57	David J. Dexter, MD An Update On The Cook Venous Valve Project
J:JZ — J:J/	Paul J. Gagne, MD
5:58 - 6:03	Endovenous Delivery Of New Valve Prosthesis In
	Humans: The New Trend
	Jorge H. Ulloa, MD
6:04 - 6:09	When Deep Venous Reflux Repair Is Not Effective:
	What Next
/ 10 / 15	Marzia Lugli, MD
6:10 — 6:15	Deep Venous Reflux In Patients Undergoing Venous Treatments
	Mikel Sadek, MD
6:16 — 6:21	Deep Reflux: What Happens After Concomitant
	Obstruction Correction
	Marzia Lugli, MD
6:22 - 6:27	Deep Vein Valve Devices: What Outcome Measures
	Should Be Used
6:28 - 6:33	Fedor Lurie, MD, PhD Initial Experience With Ultrasound-Facilitated,
0:20 — 0:33	Thrombolytic Enhanced Thrombectomy (Sono
	Thrombectomy), In Patients With Acute Proximal Deep
	Vein Thrombosis
	William A. Marston, MD
6:34 - 6:39	Venous Stent For The Iliofemoral Vein Investigational
	Clinical Trial Using The Duo Venous Stent System: The
	VIVID Trial Mahmood Razavi, MD
6:40 — 6:45	Panel Discussion
0.40 0.40	End of Program M
	Line of Frogram in



SATURDAY, NOVEMBER 23, 2024

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 106-109)

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

7:00 A.M. - 12:06 P.M.

Location: Grand Ballroom East, 3rd Floor

PROGRAM O (SESSIONS 110-115)

Improving Outcomes In Hemodialysis Access

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

Location: Grand Ballroom West, 3rd Floor

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

Haimanot (Monnie) Wasse, MD, MPH

PROGRAM P (SESSIONS 116-125)

Advances In Vascular Imaging And Diagnosis

6:50 A.M. - 5:35 P.M.

Location: Murray Hill Suites, 2nd Floor Course Leaders: George L. Berdejo, BA, RVT Natalie A. Marks, MD, RPVI, RVT

PROGRAM N (SESSIONS 106-109)

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

Grand Ballroom East, 3rd Floor

SESSION 106 (Grand Ballroom East, 3rd Floor)

MISCELLANEOUS/GENERAL TOPICS AND LOWER EXTREMITY TOPICS TOO IMPORTANT TO MISS

Moderators: Peter A. Schneider, MD Venita R. Chandra, MD Vikram S. Kashyap, MD

7:00 – 7:05 Current Status Of An Endovascular First Approach To Lower Extremity Revascularization For CLTI In The Context Of The BEST-CLI Trial: What Are The Exceptions Justin George, MD

7:06 – 7:11 Radial Access Should Be In The Armamentarium Of Every Vascular Surgeon: Why, When And How To Use It: Equipment Needed And Technical Tips Heron E. Rodriguez, MD

7:12 – 7:17 Essential Angiographic Skills For Endovascular Surgeons: Must Include Gantry Angle Projections, Image Settings, Contrast Dilution, Injection Pressure And Flow Rates, Frame Rates, Cone Beam CTs, Fusion, Etc.

Martin Malina, MD, PhD

7:18 – 7:23 Severe Iatrogenic Injuries: Etiologies, Locations, Diagnosis And Safe Endo Treatment Techniques: Precautions And Prevention Samy S. Nitecki, MD

7:24 – 7:29 Novel Wire Fixation Device: How It Works, Where It Can Help And Advantages

Patrick E. Muck, MD

7:30 - 7:35	Does Hyperbaric Oxygen Therapy Really Work For Ischemic And Nonischemic Wounds In Vascular Patients: Is There Proof And Is It Worth The Cost Robert B. McLafferty, MD, MBA
7:36 — 7:41	Panel Discussion
	IMPORTANT LOWER EXTREMITY TOPICS
7:42 — 7:47	With Prograde CFA Punctures, How To Easily Get The Guidewire Down The SFA Rather Than The Deep Femoral Ali Amin, MD, RVT
7:48 — 7:53	Prograde SFA Access Can Be Safe And Effective For Lower Extremity Endo Procedures; When And How To Do It And Obtain Secure Closure Karan Garg, MD Todd Berland, MD
7:54 — 7:59	Endovascular Treatment Of CFA Lesions Is Proving Superior To Endarterectomy Because Of Improvements In Technology And Technique And The Complications Of Endarterectomy: How To Do It And When Is Endarterectomy Still Mandatory Martin Malina, MD, PhD
8:00 — 8:05	Ambulation Physical Therapy For PAD Is Now Covered By Medicare: Why Is It So Poorly Prescribed And What Can Be Done To Enhance Its Use Caron B. Rockman, MD Jeffrey S. Berger, MD, MS
8:06 — 8:11	Paclitaxel Use In CLTI Patients: Is There Still Any Evidence Of An Increased Amputation Risk Peter A. Schneider, MD
8:12 — 8:17	Open Treatment First For CLTI In The Era Of BEST- CLI: When Is It Best: It's Not Just For Patients With Good Ipsilateral Great Saphenous Veins Yana Etkin, MD
8:18 — 8:26	Panel Discussion
MORE LC	7 (Grand Ballroom East, 3rd Floor) DWER EXTREMITY TOPICS TOO
	NT TO MISS
Moderators:	Vikram S. Kashyap, MD Richard F. Neville. MD
	Miguel F. Montero-Baker, MD
8:26 — 8:31	CLTI Nomenclature And Data End-Points Need Refurbishing: A Call To Action For The Next Decade Of Care
8:32 — 8:37	Miguel F. Montero-Baker, MD Outcomes Of Interventions For PAD In African American Female Patients And Asian Patients: Is It
0.20 0.72	Different And Why: Can Anything Be Done About It Caron B. Rockman, MD The Different Of Ontire I Medical Theorem On Ontonne
8:38 — 8:43	The Effect Of Optimal Medical Therapy On Outcomes In Patients With CLTI In The BEST-CLI Trial Vikram S. Kashyap, MD
8:44 — 8:49	When Is Primary Amputation Ever Appropriate For Patients With CLTI: It's Much Less Common Than You Think Christopher J. Abularrage, MD (PowerPoint Presentation With Synched Audio)
8:50 — 8:55	Duplex Ultrasound For Diagnosis Of Failing Stents Placed For Arterial Occlusive Disease: Why Is It Important And How Often Should It Be Done After Treatment In Claudicants; In CLTI Patients
8:56 — 9:01	Keith D. Calligaro, MD Panel Discussion

9:02 — 9:07	Perfusion Imaging With Near-Infrared Spectroscopy (NIRS): How Is It Done And What Is Its Value In Patients Requiring Interventions For Lower Extremity
	Ischemia
	Richard F. Neville, MD
9:08 — 9:13	Can The BEST-CLI Trial Tell Us Whether Saving A
	Limb Also Prolongs Survival Peter A. Schneider, MD
9:14 — 9:19	Never Say Never: Endovascular Profundaplasty Is Possible And Effective: How To Do It And Results Pasqualino Sirignano, MD, PhDS Francesco Speziale, MD
9:20 — 9:25	Value Of Duplex Gray Scale In Predicting Successful SFA CTO Crossing, Re-Entry And The Need For Dista Access
	Natalie A. Marks, MD, RPVI, RVT Enrico Ascher, MD
9:26 — 9:31	Aggressive Interventions Including Atherectomy In Claudicants Leads To More Harm Than Good Dipankar Mukherjee, MD
9:32 - 9:38	Panel Discussion
9:38 - 9:48	Break - Visit Exhibits And Pavilions (3rd Floor)
SESSION 108	(Grand Ballroom East, 3rd Floor)
	OPICS TOO IMPORTANT TO MISS AND
SPINE EX	POSURE
Moderators:	David J. Minion, MD William P. Robinson, MD Kenneth Ouriel, MD, MBA
9:48 — 9:53	Contemporary Management Of Kommerell's Diverticulum And Aberrant Subclavian Artery: From The International Vascular Low Frequency Disorders
	Consortium Peter F. Lawrence, MD Jonathan Bath, MD
9:54 — 9:59	Retroperitoneal Bleeding Is A Catastrophic And Poorly Detected Complication Of Groin Access Above The Inguinal Ligament: Early Bird Bioimpedance Monitoring (From Saranas) Can Detect Early Retroperitoneal Access Bleeding: How Does It Work And Results
	David O'Connor, MD
10:00-10:05	Outcomes Of EVAR In Over 18,000 High-Risk Patients Ineligible For Open Repair: When Is EVAR Justified Over No Intervention In Such Patients: Why Is EVAR 2 No Longer Relevant
	George A. Antoniou, MD, PhD, MSc
10:06-10:11	Improved System For Evaluating Aortic Neck Anatomy And Suitability For EVAR And Need For F/EVAR David J. Minion, MD
	SPINE EXPOSURE SURGERY (6-Minute Presentations
10:12-10:18	Technical Tips And Tools For The Vascular Surgeon To Provide Anterior Exposure For Spine Procedures (6-Minute Presentation)
10:19-10:25	Jeffrey Jim, MD, MPHS Vascular Complications Of Anterior Spine Exposures; How To Avoid Them And How To Treat Them If They Occur (6-Minute Presentation)
10:26-10:32	William P. Robinson, MD Panel Discussion
10:20-10:32	1 and Discussion

SESSION 109 (Grand Ballroom East, 3rd Floor)

AORTIC AND CAROTID TOPICS TOO IMPORTANT TO MISS

Moderators: Frank J. Veith, MD Enrico Ascher, MD Mark A. Adelman, MD

TOPICS RELATED TO THE AORTA AND ITS BRANCHES

- 10.32- 10.37 Isolated Mesenteric Artery Dissections Should Be Managed Medically In Most Cases: When Is Open Or Endo Treatment Needed And How To Do It Heron E. Rodriguez, MD
- 10.38-10.43 Retroperitoneal Exposure Of The Visceral Aorta And Its Branches: It's Not Simple; Technical Tips

 R. Clement Darling III, MD
- 10.44-10.49 Performance Of Newer Generation Endografts
 (Endologix) Anatomically Fixed On The Aortic
 Bifurcation For AAA Repair: Long-Term Outcomes In
 The Medicare Population
 Mark Conrad, MD, MMSc
- 10:50-10:55 Fenestrated EVAR Versus Chimney EVAR For Juxtarenal AAAs: When Is One Better Than The Other And What Are The Critical Considerations *Piergiorgio Cao, MD*
- 10:56-11:01 Balloon Optimized Molding For Better Deployment
 And Sealing Of Alto (From Endologix) Low Profile
 Endografts For EVAR: How To Do It And How It Helps
 Prevent Endoleaks And Migration
 David J. Minion, MD
- 11:02- 11:07 The Vascular Surgeon's Role In TAVR Procedures Via The Common Carotid Artery: Pitfalls And Technical Tips

 Gregg S. Landis, MD

11:08-11:13 Panel Discussion

CAROTID TOPICS

- 11:13-11:18 Tips And Tricks For Successful TCAR And When Is CEA And Best Medical Treatment Better Than TCAR Jeffrey Jim, MD, MPHS
- 11:19-11:24 Techniques For Dealing With Challenging Carotid Lesions: How Does TCAR Facilitate Treatment When Nothing Else Could Work

 Joseph J. Ricotta II, MD, MS
- 11:25-11:30 Shaking Limb Syndrome: What Is Its Symptoms And Why Is It A Good But Uncommon And Overlooked Indication For CEA Or CAS Bruce A. Perler, MD, MBA
- 11:31-11:36 Value Of Lithotripsy (Shockwave) For TCAR Or CAS
 In Heavily Calcified Lesions: How To Do It Safely And
 Technical Tips: Limitations And Precautions

 Jeffrey Jim, MD, MPHS
 Peter A. Schneider, MD
 Max Amor, MD
- 11:37-11:42 Carotid Intervention Improves Mood In Depressed
 Patients With Carotid Stenosis: What Is The Evidence
 And Should All Depressed Patients With Carotid
 Disease Undergo Carotid Intervention
 Wei Zhou, MD
- 11:43-11:48 Management Of Carotid Infections Including Post CEA With Patches: Outcomes Of Ipsilateral Carotid Bypass In Hostile Necks: Technical Tips

 Heron E. Rodriguez, MD

11:49-11:54 Eagle Syndrome: Internal Carotid Artery Compression By A Hypertrophic Styloid Process: What Symptoms Does It Cause, How To Diagnose It And How To Fix It Peter F. Lawrence, MD
 11:55-12:00 Cerebral Hyperfusion Syndrome After Carotid Interventions: Who Is At Risk; How To Avoid And How To Treat

12:01-12:06 Panel Discussion End of Program N

Enrico Ascher, MD

VEITHsymposium continues with the A-V Access Program in the Grand Ballroom West, 3rd floor, and the Advances in Vascular Imaging and Diagnosis Program in the Murray Hill Suites on the 2nd floor.

program o (sessions 110-115) IMPROVING OUTCOMES IN HEMODIALYSIS ACCESS

Grand Ballroom West, 3rd Floor

SESSION 110 (Grand Ballroom West, 3rd Floor)
IMPORTANT ISSUES IN HEMODIALYSIS ACCESS
(7-MINUTE TALKS)

Moderators: Larry A. Scher, MD
Anton N. Sidawy, MD, MPH
8-00 - 8-05 Introduction

8.00 – 8.05 Introduction

Larry A. Scher, MD

Anton N. Sidawy, MD, MPH

8.06 – 8.13 It's Really All About The Patie

8:06 – 8:13 It's Really All About The Patient!

Dori R. Schatell, MS
8:14 – 8:21 How To Improve The Patient Exp

8:14 – 8:21 How To Improve The Patient Experience And 'Ace' The CMS Patient Experience Surveys Terry Litchfield, MPA
8:22 – 8:29 What Is The Optimal Time For Access Placement In

8:22 – 8:29 What Is The Optimal Time For Access Placement In Patients With Chronic Kidney Disease Charmaine Lok, MD
8:30 – 8:37 "Optimal Start" In The Era Of "Value Based Care"

8:30 – 8:37 "Optimal Start" In The Era Of "Value Based Care"
Theodore F. Saad, MD

8:38 – 8:45 Does Inflow Reduction Improve Outflow Patency

Haimanot (Monnie) Wasse, MD, MPH

The Importance Of Vascular Access Registries In

Ine Importance Of Vascular Access Registries In
Improving Clinical Outcomes
Robert Shahverdyan, MD

8:54 – 9:04 Panel Discussion

9.05 – 9:12 Update On Access Cannulation: Is There Anything New On The Horizon

Deborah Brouwer-Maier, RN, CNN

9:13 – 9:20 Ultrasound Guided Cannulation For Hemodialysis
Access – A Paradigm Shift
Vandana D. Niyyar, MD
9:21 – 9:28 Noval Methods To Predict And Access AV Fictula

9:21 – 9:28 Novel Methods To Predict And Assess AV Fistula Maturation
Peter Kotanko, MD

9:29 – 9:36 Early Follow Up After AV Fistula Creation Improves Access Related Outcomes Yana Etkin, MD

9:37 – 9:44 Vascular Access Monitoring: Can We Do It Better Charmaine Lok, MD

9:45 – 9:52 Tips And Techniques For The Use Of Ultrasound In AV Access Robert Shahverdyan, MD

9:53-10:03 Panel Discussion

10:04-10:25 Break - Visit Exhibits And Pavilions (3rd Floor)

	(Grand Ballroom West, 3rd Floor) IPORTANT ISSUES IN HEMODIALYSIS
	7-MINUTE TALKS)
	Haimanot (Monnie) Wasse, MD, MPH
	Evan C. Lipsitz, MD, MBA
10:26-10:33	Strategies For Development Of A Health Care Network Dialysis Access Program John R. Ross, Sr., MD
10:34-10:41	AV Fistula Maturation: Going Beyond Creation To Successful Cannulation
10:42-10:49	Neghae Mawla, MD Access Surgery In The Breast Cancer Patient Vicki J. Teodorescu, MD
10:50-10:57	Dialysis History: William J. Kolff, MD And The 80-Year Anniversary Of The First Dialysis
10:58-11:05	Theodore F. Saad, MD Lessons Learned From Three Decades Of Dialysis Access Care
11.07.11.17	Sanford D. Altman, MD Panel Discussion
11:06-11:16	Panel Discussion
	(Grand Ballroom West, 3rd Floor)
	IPOSIUM: HEMODIALYSIS ACCESS
	distal ischemia (7-minute talks)
Moderators:	Larry A. Scher, MD Yana Etkin, MD
11:17-11:24	Steal Syndrome: More Than A Blood Flow Problem Sal Scali, MD
11:25-11:32	Can We Predict (And Prevent) Steal Syndrome Matthew J. Dougherty, MD
11:33-11:40	Proximalization Should Replace DRIL For Treatment Of HAIDI Homayoun Hashemi, MD, RVT
11:41-11:48	Contemporary Outcomes Of Distal Radial Artery Ligation For HAIDI
11 /0 11 00	Mohamad A. Hussain, MD, PhD
11:49-11:59	Panel Discussion
12:00- 1:00	Lunch Break - Mercury Rotunda & Ballroom (3rd Floor)
SESSION 113	(Grand Ballroom West, 3rd Floor)
POLITICA	AL, ECONOMIC AND LEGAL ISSUES IN
HEMODIA	ALYSIS ACCESS (7-MINUTE TALKS)
	Larry A. Scher, MD
1:00 — 1:07	Anton N. Sidawy, MD, MPH Reimbursement And Regulatory Update In Dialysis Access
1:08 — 1:15	Terry Litchfield, MPA DEBATE: What Is Optimal For FDA Approval Of
	Novel Vascular Access Devices: Single Arm Clinical Trials Are Adequate To Support Approval Of Novel Vascular Access Devices Ellen D. Dillavou, MD
1:16 — 1:23	DEBATE: Regulatory Approval Of Novel Vascular Access Devices: When A Randomized Clinical Study Could Help Robert E. Lee, MD
1:24 — 1:31	Is Value Based Access Care Finally Ready For Prime Time Evan C. Lipsitz, MD, MBA
1:32 — 1:39	Expanding Dialysis Innovations And Care Choices: Patients Say 'If Not Us, Who'; 'If Not Now, When' Paul T. Conway, BA (PowerPoint Presentation With Synched Audio)

1:40 - 1:50

Panel Discussion

SESSION 114	(Grand Ballroom West, 3rd Floor)
	ECHNOLOGIES IN HEMODIALYSIS
	7-MINUTE TALKS)
	Haimanot (Monnie) Wasse, MD, MPH
wioderators.	Clifford M. Sales, MD, MBA
1:51 - 1:58	Update On The Velocity Percutaneous AV Fistula
1.01 1.00	(Venova Medical)
	Robert Shahverdyan, MD
1:59 — 2:06	Use Of Bioengineered Vascular Wrap (SelfWrap) To
1.07 2.00	Improve AV Fistula Outcomes (VenoStent)
	Ellen D. Dillavou, MD
2:07 - 2:14	Safety And Efficacy Of HemoWrap Device For Post
2.07	Cannulation Hemostasis
	Sundaram Ravikumar, MD
2:15 - 2:22	Results Of A Phase 3 Study Comparing Efficacy And
	Safety Of Humacyte Tissue-Engineered Vessel With
	Autologous AV Fistulas In Patients With End Stage
	Renal Disease
	C. Keith Ozaki, MD
2:23 - 2:30	Results Of Wrapsody Arteriovenous Access Efficacy
	(WAVE) PIVOTAL Trial
	Mahmood Razavi, MD
2:31-2:38	Xeltis Vascular aXess Graft: Preliminary Results Of The
	US IDE Trial
	John F. Lucas III, MD
2:39 - 2:49	Panel Discussion
CECCIONI 115	(Grand Ballroom West, 3rd Floor)
	ON CLINICAL CHALLENGES IN
	ALYSIS ACCESS (7-MINUTE TALKS)
Moderators:	Larry A. Scher, MD
2 50 2 57	Surendra Shenoy, MD, PhD
2:50 — 2:57	Dear Surgeons: Design Me A Better Access – Observations Of An Interventional Nephrologist
	Neghae Mawla, MD
2:58 — 3:05	
2:30 — 3:03	Creating Autogenous Hemodialysis Access In Children And Adolescents
	William Jennings, MD (PowerPoint Presentation With Synched Audio)
3:06 - 3:13	Should We Be Performing More Lower Extremity
J:00 — J:13	Access Procedures
	Jeremy S. Crane, MBChB, MD
3:14 - 3:21	Safe And Effective HeRO Graft Placement: Technique
0.14 0.21	And Results
	Karl A. Illig, MD
3:22 - 3:29	Treatment Options For Venous Thoracic Outlet
0.22	Syndrome In Dialysis Patients
	Mark G. Davies, MD
3:30 - 3:37	Current Strategies For Selection Of Biologic Versus
0.00	Prosthetic Grafts For Hemodialysis Access
	Jesse Garcia, MD
3:38 - 3:45	Can We Make A Fistula Last Forever
	Surendra Shenoy, MD, PhD
3:46 - 4:00	Panel Discussion

End of Program O

PROGRAM P (SESSIONS 116-125) ADVANCES IN VASCULAR IMAGING AND DIAGNOSIS

Murray Hill Suites, 2nd Floor

SESSION 116 (Murray Hill Suites, 2nd Floor) MANAGING THE PATIENT WITH PERIPHERAL ARTERIAL OCCLUSIVE DISEASE (PAD): STRENGTHS AND WEAKNESSES OF THE DIAGNOSTIC

TECHNIQUES, WHO NEEDS WHICH TESTS AND WHEN

(PAD is a very complex disease with many available diagnostic modalities. Armed with the right information, a thorough history and physical exam, and the appropriate diagnostic/imaging modality, the patient will be on the right track to getting the help and care he or she needs. How Much is Enough? What

	for Diagnosis, Management and Treatment of PAD?)
Moderator:	Ann Marie Kupinski, PhD, RVT
6:50 - 7:00	Welcome And Opening Remarks: Navigating The
	Meeting And Optimizing Your Experience
	George L. Berdejo, BA, RVT
7:00 - 7:08	The History And Physical Examination Matters And
	Guides The Workup
	Anahita Dua, MD, MS, MBA
7:08 - 7:16	Still Important Role Of Physiologic Testing
	Ann Marie Kupinski, PhD, RVT
7:16 — 7:24	Role Of Duplex Ultrasound In The PAD Workup
	Natalie A. Marks, MD, RPVI, RVT
7:24 - 7:32	Evolving And Expanding Role Of Pedal Artery Imaging
	Jill S. Sommerset, BS, RVT
7:32 - 7:40	What About CTA And MRA
7/0 7/0	David L. Dawson, MD
7:40 — 7:48	Strategic Use Of Contrast Arteriography John Carson, MD
7:48 — 8:05	
7:40 — 0:03	Panel Discussion: Putting It All Together
	(Murray Hill Suites, 2nd Floor)
V B D O V VI	
ADDOM	NAL IMAGING TIPS AND TRICKS:
LESSONS	LEARNED FROM CASE STUDY
LESSONS PRESENT	S LEARNED FROM CASE STUDY ATIONS
LESSONS PRESENT	S LEARNED FROM CASE STUDY ATIONS Laurence Needleman, MD
LESSONS PRESENT Moderator:	ELEARNED FROM CASE STUDY ATIONS Laurence Needleman, MD Renal Artery Scanning
LESSONS PRESENT Moderator:	S LEARNED FROM CASE STUDY ATIONS Laurence Needleman, MD
LESSONS PRESENT Moderator: 8:05 – 8:15	S LEARNED FROM CASE STUDY ATIONS Laurence Needleman, MD Renal Artery Scanning Patrick A. Washko, BS, BSRT, RDMS, RVT
LESSONS PRESENT Moderator: 8:05 – 8:15	LEARNED FROM CASE STUDY ATIONS Laurence Needleman, MD Renal Artery Scanning Patrick A. Washko, BS, BSRT, RDMS, RVT 5 Tips For A Liver Duplex Exam Robert De Jong, RDMS, RVT
LESSONS PRESENT Moderator: 8:05 – 8:15 8:15 – 8:25	S LEARNED FROM CASE STUDY ATIONS Laurence Needleman, MD Renal Artery Scanning Patrick A. Washko, BS, BSRT, RDMS, RVT 5 Tips For A Liver Duplex Exam
LESSONS PRESENT Moderator: 8:05 – 8:15 8:15 – 8:25	ATIONS Laurence Needleman, MD Renal Artery Scanning Patrick A. Washko, BS, BSRT, RDMS, RVT 5 Tips For A Liver Duplex Exam Robert De Jong, RDMS, RVT Mesenteric With Focus On Median Arcuate Ligament Syndrome
LESSONS PRESENT Moderator: 8:05 – 8:15 8:15 – 8:25	ATIONS Laurence Needleman, MD Renal Artery Scanning Patrick A. Washko, BS, BSRT, RDMS, RVT 5 Tips For A Liver Duplex Exam Robert De Jong, RDMS, RVT Mesenteric With Focus On Median Arcuate Ligament Syndrome Phillip J. Bendick, PhD, RVT
LESSONS PRESENT Moderator: 8:05 – 8:15 8:15 – 8:25 8:25 – 8:35	ATIONS Laurence Needleman, MD Renal Artery Scanning Patrick A. Washko, BS, BSRT, RDMS, RVT 5 Tips For A Liver Duplex Exam Robert De Jong, RDMS, RVT Mesenteric With Focus On Median Arcuate Ligament Syndrome
LESSONS PRESENT Moderator: 8:05 – 8:15 8:15 – 8:25 8:25 – 8:35	ATIONS Laurence Needleman, MD Renal Artery Scanning Patrick A. Washko, BS, BSRT, RDMS, RVT 5 Tips For A Liver Duplex Exam Robert De Jong, RDMS, RVT Mesenteric With Focus On Median Arcuate Ligament Syndrome Phillip J. Bendick, PhD, RVT Duplex Sureillance After Complex Aortic Endovascular Repair R. Eugene Zierler, MD, RPVI
LESSONS PRESENT Moderator: 8:05 – 8:15 8:15 – 8:25 8:25 – 8:35	ATIONS Laurence Needleman, MD Renal Artery Scanning Patrick A. Washko, BS, BSRT, RDMS, RVT 5 Tips For A Liver Duplex Exam Robert De Jong, RDMS, RVT Mesenteric With Focus On Median Arcuate Ligament Syndrome Phillip J. Bendick, PhD, RVT Duplex Sureillance After Complex Aortic Endovascular Repair R. Eugene Zierler, MD, RPVI Bonus Lecture: Who Is The Right Patient For The Renal
LESSONS PRESENT Moderator: 8:05 – 8:15 8:15 – 8:25 8:25 – 8:35	ATIONS Laurence Needleman, MD Renal Artery Scanning Patrick A. Washko, BS, BSRT, RDMS, RVT 5 Tips For A Liver Duplex Exam Robert De Jong, RDMS, RVT Mesenteric With Focus On Median Arcuate Ligament Syndrome Phillip J. Bendick, PhD, RVT Duplex Sureillance After Complex Aortic Endovascular Repair R. Eugene Zierler, MD, RPVI

al Laurence Needleman, MD

8:55 - 9:10**Panel Discussion** 9:10 - 9:30Visit Exhibits And Pavilions (2nd and 3rd Floors)

SESSION 118 (Murray Hill Suites, 2nd Floor)

CEREBROVASCULAR

Moderator: R. Eugene Zierler, MD, RPVI 9:30 - 9:40Evolution And Review Of Carotid Duplex Criteria: From Strandness To IAC Consensus R. Eugene Zierler, MD, RPVI

Review Of IAC Consensus Criteria: How To Transition 9:40 - 9:50And Incorporate It Into Your Practice

Heather L. Gornik, MD

The Role Of Alternative Imaging For Carotid Disease; 9:50 - 10:00What's Best And When Is It Necessary Leslie M. Scoutt, MD 10:00-10:10 **Panel Discussion** SESSION 119 (Murray Hill Suites, 2nd Floor) PRACTICE ENHANCEMENTS AND PHILOSOPHICAL **ISSUES I** Moderator: George L. Berdejo, BA, RVT 10:10-10:20 Variability Of Practice Patterns From A Survey Of International Vascular Specialists: Lessons Learned And How We Can Be More Value Added Jill S. Sommerset, BS, RVT 10:20-10:30 How To Recruit, Train, And Retain Vascular Sonographers George L. Berdejo, BA, RVT State Of Vascular Ultrasound Education And Training 10:30-10:40 Traci B. Fox, EdD, RDMS, RVT 10:40-10:50 Is There A Role For Advanced Practice Vascular Sonography Joseph P. Hughes, MBA, RVT, RVS, RPhS, NVS 10:50-11:00 Sonographer Burnout: How Real Is This And How Can It Be Addressed Aubrey J. Rybyinski, BS, RDMS, RVT 11:00-11:10 What's Happening With The Workforce: Is The Projected Sonographer Shortage Real, How Can It Be Addressed Traci B. Fox, EdD, RDMS, RVT 11:10-11:25 **Panel Discussion** 11:25-11:40 Lunch Break - South Corridor, 2nd Floor SESSION 120 (Nassau Suites, 2nd Floor) TECHNICAL SKILLS LAB (This session will allow you to visit with recognized experts in the field in an informal setting with opportunity for "hands-on" time and conversation to glean technical tips in various areas of vascular ultrasound and physiologic testing.) Moderators: Fernando Amador, RVT Richard Dubin, AAS-DMS, RVT, RDMS Station 1: Pedal Artery Imaging 11:40-12:40 Jill S. Sommerset, BS, RVT 11:40-12:40 Station 2: Carotid Artery Imaging William N. Del Valle, RVT 11:40-12:40 Station 3: Transcranial Duplex Joseph P. Hughes, MBA, RVT, RVS, RPhS 11:40-12:40 Station 4: Pelvic Vein Imaging Jan M. Sloves, RVT 11:40-12:40 Station 5: Renal Artery Imaging Patrick A. Washko, BS, BSRT, RDMS, RVT 11:40-12:40 Station 6: Physiologic Test Traci B. Fox, EdD, RDMS, RVT 11:40-12:40 Station 7: Hemodialysis Access Ann Marie Kupinski, PhD, RVT Station 8: Hepato-Portal Imaging 11:40-12:40 Robert De Jong, RDMS, RVT 12:40-12:45 Transition To Plenary Sessions (Murray Hill Suites, 2nd Floor)

SESSION 121 (Murrary Hill Suites, 2nd Floor) INTERPRETING WITH THE MASTERS

Moderator: Laurence Needleman, MD

12:45 - 1:50 Panel Discussion: Interpreting With The Masters

Panelists: Phillip J. Bendick, PhD, RVT

David L. Dawson, MD Anahita Dua, MD, MS, MBA Heather L. Gornik, MD Ann Marie Kupinski, PhD, RVT

Leslie M. Scoutt, MD

R. Eugene Zierler, MD, RPVI

SESSION 122 (Murray Hill Suites, 2nd Floor) WHAT THE VASCULAR SPECIALIST SHOULD EXPECT FROM A WELL-DONE VASCULAR **ULTRASOUND EVALUATION**

Moderator: David L. Dawson, MD

The Lower Extremity Arterial Mapping 1:50 - 2:00Jill S. Sommerset, BS, RVT

The Lower Extremity Vein Evaluation For Reflux

2:00 - 2:10Nicos Labropoulos, BSc (Med), PhD, RVT

2:10 - 2:20The Ilio-Caval Evaluation In Chronic Venous

Insufficiency

Jan M. Sloves, RVT

SESSION 123 (Murray Hill Suites, 2nd Floor)

VENOUS IMAGING: TESTING FOR CHRONIC VENOUS INSUFFICIENCY, LEG REFLUX AND PELVIC VEIN DISORDERS

Moderators: David L. Dawson, MD

Nicos Labropoulos, BSc (Med), PhD, RVT

2:20 - 2:30The Anterior Saphenous Vein: Anatomic And Clinical Considerations For The Vascular Sonographer Nicos Labropoulos, BSc (Med), PhD, DIC, RVT

The Role Of Duplex Ultrasound In The Evaluation Of 2:30 - 2:40The Post-Thrombotic Syndrome

Jan M. Sloves, RVT

2:40 - 2:50Evaluation For Pelvic Vein Reflux Nicos Labropoulos, BSc (Med), PhD, DIC, RVT

Duplex Ultrasound Follow-up After Interventions: 2:50 - 3:00When, How Often, What To Look For

Neil M. Khilnani, MD

3:00 - 3:15Panel Discussion (Combined Sessions 122 And 123)

3:15 - 3:30**Break**

SESSION 124 (Murray Hill Suites, 2nd Floor)

THE EVOLVING HEALTHCARE ENVIRONMENT:

IMPACT ON PAYMENT, POLICY, LAB MANAGEMENT AND SVU UPDATES

Moderator: Anne M. Jones, BSN, RVT, RDMS

3:30 - 3:40Current Critical Issues For The Vascular Professional Anne M. Jones, BSN, RVT, RDMS

3:40 - 3:50SVU Updates, Where Are We With The Strategic Plan, And Highlights Of The 2024 SVU Annual Conference Josh D. Lee, MBA

Update On The Status Of The Journal of Vascular 3:50 - 4:00Ultrasound (JVU) David L. Dawson, MD

> Reimbursement Updates: Is There Any Good News Joseph P. Hughes, MBA, RVT, RVS, RPhS, NVS

4:10 - 4:30**Panel Discussion**

4:00 - 4:10



	(Murray Hill Suites, 2nd Floor) ALYSIS ACCESS, CURVEBALLS AND
CONTRO	VERSIES
Moderator:	Joseph P. Hughes, MBA, RVT, RVS, RPhS
4:30 - 4:40	What Do I Do When I Find Non-Vascular Pathology
	On My Vascular Ultrasound Study
	Patrick A. Washko, BS, BSRT, RDMS, RVT
4:40 - 4:50	Utility Of The Toe-Brachial Index
	William N. Del Valle, RVT
4:50 - 5:00	Current Applications For Contrast Enhanced
	Ultrasound In The Vascular Laboratory
	Leslie M. Scoutt, MD
5:00 - 5:10	'Volume Flow: Is This A Wild Goose Chase'
	Ann Marie Kupinski, PhD, RVT
5:10 - 5:20	Noninvasive Evaluation Of Arterial Steal After Dialysis
	Access
	Phillip J. Bendick, PhD, RVT
5:20 - 5:30	Panel Discussion
5:30 - 5:35	Raffle (You Must Be Present To Win)

End of Program P

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- Advances in Vascular Imaging and Diagnosis Friday Saturday, November 22-23, 2024
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