

PROGRAMME

LEIPZIG
INTERVENTIONAL
COURSE

L I N C



Roger Greenhalgh

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Thursday, January 24, 2013

MAIN ARENA 2

13:30 – 15:00 **Symposium: 3D image guidance during endovascular procedures? Live case transmissions from Ludwigsburg**

partially supported with an unrestricted educational grant by Siemens

CHAIRMAN:

Giovanni Torsello

MODERATOR:

Roger Greenhalgh

13:30 – 13:40 New options for vascular surgeons by 3D CT in the angio-hybrid operation room
Markus Steinbauer

13:40 – 13:50 Hybrid rooms: only for advanced endovascular procedures?
Eric Verhoeven

13:50 – 14:10 Live case transmission from Ludwigsburg

14:10 – 14:20 Advances in robotic endovascular surgery– when and how can it be of help?

14:20 – 14:30 Translumbar glue embolization of type II endoleaks using the i-Guide software on Siemens Artis Zeego

14:30 – 14:50 Live case transmission from Ludwigsburg

14:50 – 15:00 3D endovascular guidance... what you really want to see during endovascular procedures
Lieven Maene

We are asking all faculty members to strictly respect the given time limits.

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Thursday, January 24, 2013

DISCUSSION FORUM

15:30 – 16:30 **CX @ LINC: Carotid stenting or carotid endarterectomy**

CHAIRMAN:

Roger Greenhalgh

15:30 – 15:35 Carotid stenting was good, is good and wins
Sriram Iyer

15:35 – 15:40 Look at the SVS guidelines!
Frank Veith

15:40 – 15:45 CREST puts stenting ahead
William Gray

15:45 – 15:50 You must be joking!
Michel Makaroun

15:50 – 15:55 Be reasonable – learn stenting properly!
Peter Gaines

15:55 – 16:00 Whatever for?
Peter Taylor

16:00 – 16:05 The half-way house may settle it
Sumaira Macdonald

16:05 – 16:10 Say what you like, I am unconvinced!
Frans Moll

16:10 – 16:30 Panel discussion and audience participation

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The logo for LINC (Leipzig Interventional Course) features the letters 'L I N C' in a bold, sans-serif font. A large, dark blue, brush-stroke-like graphic element curves behind the letters, starting from the bottom left and sweeping upwards and to the right, passing behind the 'I' and 'N'.

Roger Greenhalgh

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Friday, January 25, 2013

DISCUSSION FORUM

- 10:30 – 11:30** **CX @ LINC: Controversies in lower limb ischaemia**
CHAIRMAN:
Roger Greenhalgh
- 10:30 – 10:35 The crucial presenting symptom
Roberto Ferraresi
- 10:35 – 10:40 The MIMICS trial principles
Peter Gaines
- 10:40 – 10:45 Go for subintimal angioplasty whenever possible
Amman Bolia
- 10:45 – 10:50 Body of evidence for drug eluting therapies for intermittent claudication
Michael Dake
- 10:50 – 10:55 Drug coated balloons vs. drug eluting stents in the superficial femoral artery for claudication
- 10:55 – 11:00 Chronic ischaemia below the knee studies – gap in clinical practice evidence
Iris Baumgartner
- 11:00 – 11:05 Foot care saves legs
Michael Edmonds
- 11:05 – 11:30 Panel discussion and audience participation

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Roger Greenhalgh

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Friday, January 25, 2013

MAIN ARENA 2

15:00 – 16:30	CX @ LINC: Abdominal and thoracic aortic aneurysms <i>CHAIRMAN:</i> Roger Greenhalgh
15:00 – 15:15	Debate - Type 2 endoleak after EVAR is benign
15:00 – 15:05	For the motion Hence Verhagen
15:05 – 15:10	Against the motion Frans Moll
15:10 – 15:15	Discussion and vote
15:15 – 15:30	Debate: Chimney, snorkel, sandwich, periscope grafts are second best every time
15:15 – 15:20	For the motion Eric Verhoeven
15:20 – 15:25	Against the motion Michel Makaroun
15:25 – 15:30	Discussion and vote
15:30 – 16:00	Great Debate: For uncomplicated Type B dissecting of the thoracic aortic aneurysm, there is a subgroup needing surgery
15:30 – 15:35	For the motion Christoph Nienaber
15:35 – 15:40	For the motion Matt Thompson
15:40 – 15:45	Against the motion Jan Brunkwall
15:45 – 15:50	Against the motion Vincent Riambau
15:50 – 16:00	Discussion and vote
16:00 – 16:30	Great Debate: Level 1 evidence from randomised controlled trials discourages best practice

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Friday, January 25, 2013

16:00 – 16:05	For the motion Frank Veith
16:05 – 16:10	For the motion Michael Dake
16:10 – 16:15	Against the motion Peter Taylor
16:15 – 16:20	Against the motion Jean-Pierre Becquemin
16:20 – 16:30	Discussion and vote

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