

PROGRAMME

LEIPZIG
INTERVENTIONAL
COURSE

L I N C



Peter Taylor

Page 1/4

Thursday, January 24, 2013

DISCUSSION FORUM

- 14:00 – 15:00** **To treat or not to treat: open questions in endovascular grafting**
CHAIRMAN:
Peter Taylor
DISCUSSANT:
Jan Brunkwall
Alan Lumsden
Santi Trimarchi
Mohammad Hamady
- 14:36 – 14:43 Minimizing emboli during endovascular treatment of the thoracic aorta possibilities and open questions
Alan Lumsden
- 14:43 – 15:00 Discussion and conclusion by the chairman
- 14:25 – 14:36 Discussion
- 14:18 – 14:25 Roughly 25% of acute uncomplicated dissections get complicated later are there indicators which allow to treat them early?
Peter Taylor
- 14:07 – 14:18 Discussion
- 14:00 – 14:07 Is there an option to treat acute uncomplicated dissection by endovascular means?
Jan Brunkwall

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

PROGRAMME

LEIPZIG
INTERVENTIONAL
COURSE

LINC



Peter Taylor

Page 2/4

Thursday, January 24, 2013

DISCUSSION FORUM

- 15:30 – 16:30** **CX @ LINC: Carotid stenting or carotid endarterectomy**
CHAIRMAN:
Roger Greenhalgh
- 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
- 15:55 – 16:00 Whatever for?
Peter Taylor
- 15:50 – 15:55 Be reasonable – learn stenting properly!
Peter Gaines
- 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
- 15:30 – 15:35 Carotid stenting was good, is good and wins
Sriram Iyer

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

PROGRAMME

LEIPZIG
INTERVENTIONAL
COURSE

L I N C

The logo for LINC (Leipzig Interventional Network 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'.

Peter Taylor

Page 3/4

Friday, January 25, 2013

MAIN ARENA 2

15:00 – 16:30	CX @ LINC: Abdominal and thoracic aortic aneurysms <i>CHAIRMAN:</i> Roger Greenhalgh
16:00 – 16:30	Great Debate: Level 1 evidence from randomised controlled trials discourages best practice
15:50 – 16:00	Discussion and vote
15:45 – 15:50	Against the motion Vincent Riambau
15:40 – 15:45	Against the motion Jan Brunkwall
16:00 – 16:05	For the motion Frank Veith
16:05 – 16:10	For the motion Michael Dake
16:20 – 16:30	Discussion and vote
16:15 – 16:20	Against the motion Jean-Pierre Becquemin
16:10 – 16:15	Against the motion Peter Taylor
15:35 – 15:40	For the motion Matt Thompson
15:30 – 15:35	For the motion Christoph Nienaber
15:10 – 15:15	Discussion and vote
15:05 – 15:10	Against the motion Frans Moll
15:00 – 15:05	For the motion Hence Verhagen

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

PROGRAMME

LEIPZIG
INTERVENTIONAL
COURSE

L I N C



Peter Taylor

Page 4/4

Friday, January 25, 2013

- | | |
|---------------|--|
| 15:15 – 15:30 | Debate: Chimney, snorkel, sandwich, periscope grafts are second best every time |
| 15:15 – 15:20 | For the motion
Eric Verhoeven |
| 15:30 – 16:00 | Great Debate: For uncomplicated Type B dissecting of the thoracic aortic aneurysm, there is a subgroup needing surgery |
| 15:25 – 15:30 | Discussion and vote |
| 15:20 – 15:25 | Against the motion
Michel Makaroun |
| 15:00 – 15:15 | Debate - Type 2 endoleak after EVAR is benign |

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