Wednesday, January 28, 2015

MAIN ARENA 1

16:30 – 18:00  The last frontiers: Interventional treatment of the popliteal artery
CHAIRMAN:
Jörn Balzer
Tony Das
MODERATOR:
Patrick Peeters
Peter Gaines
Reza Ghotbi
Lawrence Garcia
Eberhard Wedell

17:17 – 17:24  Treatment of popliteal aneurysms: Endo or open?
Jürgen Verbist

17:24 – 18:00  Live case transmission from Münster

17:10 – 17:17  1 year results of the Gore TIGRIS® vascular stent in femoropopliteal lesions
Martin Werner

16:42 – 17:10  Live case transmission from Leipzig

16:37 – 16:42  The utility of the retrograde proximal anterior tibial access for challenging femoropopliteal occlusions
Michael Piorkowski

16:30 – 16:37  Balloon, DCB or stent? What is standard of interventional treatment in the popliteal artery?
Martin Werner

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

12:30 – 13:25 Challenging EVAR cases and complications – Part II
Chairman: Piergiorgio Cao
Martin Malina
Moderator: Sven Seifert
Reza Ghotbi
Spiridon Botsios

13:06 – 13:12 Treatment of successful arch aneurysms cases: Outcome from over ten cases using handcrafted LSA branch fenestrated valiant captivia stentgrafts
Yoshihiko Kurimoto

13:12 – 13:18 Aorto-esophageal and aorto-bronchial fistula after TEVAR
Igor Konar

13:18 – 13:25 What do you do with a patient having a AAA with unilateral groin access and a very high risk of general anesthesia
Gioachino Coppi

13:00 – 13:06 Endovascular treatment of complex thoracic dissection in Mexico
Guering Eid Lidt

12:54 – 13:00 Endovascular treatment for thoracic aortic trauma
Cristina Riguetti-Pinto

12:36 – 12:42 Cheesewire fenestration of a chronic juxtarenal dissection flap to facilitate proximal neck fixation during EVAR
Venita Chandra

12:42 – 12:48 Respiratory tract bleeding secondary to Kommerell’s diverticulum: endovascular management
Ivan Arismendi Ortiz

12:48 – 12:54 TEVAR with celiac trunk embolization to expand short distal landing zone
Hwan-Jun Jae

12:30 – 12:36 TEVAR for embolizing lesions of the aorta
Michel Makaroun

We are asking all faculty members to strictly respect the given time limits.
**Friday, January 30, 2015**

### MAIN ARENA 1

<table>
<thead>
<tr>
<th>Time</th>
<th>Session</th>
<th>Speaker(s)</th>
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<tbody>
<tr>
<td>09:00 – 12:00</td>
<td><strong>Critical issues in aortic endografting</strong></td>
<td>Vicente Riambau, Reza Ghotbi, Piergiorgio Cao, Frank Veith, Armando Lobato, Giovanni Torsello</td>
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<tr>
<td>09:32 – 09:39</td>
<td>Innovative device design and delivery systems – exploring current and future device capabilities</td>
<td>Dittmar Böckler</td>
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<td>09:39 – 09:46</td>
<td>Total endovascular aortic arch replacement with the sandwich technique</td>
<td>Armando Lobato</td>
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<td>09:46 – 09:58</td>
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<td>09:58 – 10:09</td>
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<td>10:14 – 10:21</td>
<td>One hundred percent of ruptured abdominal aortic aneurysms can be treated endovascularly if</td>
<td>Thomas Larzon</td>
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<td>adjunctive techniques are used</td>
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<td>10:21 – 10:49</td>
<td>Live case transmission from Leipzig</td>
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<td>10:49 – 10:56</td>
<td>Management of aortic disease in the state of infection or inflammation</td>
<td>Martin Malina</td>
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<td>11:03 – 11:10</td>
<td>Experience with re-do procedures in patients with infected endovascular or surgical aortic grafts</td>
<td>Olaf Richter</td>
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<td>11:10 – 11:17</td>
<td>Re-do procedures after stent-graft migration or graft component disconnection</td>
<td>Andreas Gussmann</td>
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<td>11:17 – 11:24</td>
<td>When are stent-grafts a reasonable option for aneurysm patients with connective tissue disease?</td>
<td>Vicente Riambau</td>
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<td>11:24 – 11:55</td>
<td>Discussion and conclusion</td>
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<td>11:55 – 12:00</td>
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| 09:25 – 09:32 | Renaissance of the tube in EVAR – infrarenal double tubing with endo anchor augmentation  
|           | Johannes Gahlen                                                      |
| 09:46 – 09:53 | Long-term results of chimneys and sandwich grafts in the aortic arch  
|           | Ralf Kolvenbach                                                      |
| 09:53 – 10:00 | Concurrent comparison between hypogastric artery interruption, bell- bottom and sandwich techniques: Long-term follow-up  
|           | Armando Lobato                                                      |
| 10:07 – 10:14 | Improving care of patients with ruptured AAA: lessons from the USA and the UK  
|           | Matt Thompson                                                      |
| 10:00 – 10:07 | EVAR is better than open repair for ruptured AAAs despite recent level one evidence: IMPROVE, AJAX & ECAR are misleading  
|           | Frank Veith                                                      |
| 09:00 – 09:25 | Live case transmission from Münster                                 |

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