Wednesday, January 28, 2015

MAIN ARENA 2
09:00 – 11:00  Controversies in endovascular aortic repair – EVAR outside the instructions for use

CHAIRMAN:
Frank Veith
Jean-Pierre Becquemin
MODERATOR:
Piotr Kasprzak
Giovanni Torsello
Andreas Gussmann
Mario Lachat

09:00 – 11:00  The great debate

09:00 – 09:05  EVAR for everyone: Are we going too far in the push to treat every aneurysm endovascularly?
Frank Criado

09:05 – 09:40  Live case transmission from Münster part I

09:40 – 09:45  EVAR should be the first choice treatment in young patients with good anatomy
Frans Moll

09:45 – 09:50  On label vs. off label indications: Are contemporary devices reducing the gap in clinical outcome?
Nicola Troisi

09:50 – 09:55  Treating more complex anatomies does not lead to higher re-intervention rates – the Eindhoven experience in 1000+ patients
Marc van Sambeek

09:55 – 10:00  AAA-repair in patients with chronic renal insufficiency: EVAR or open repair
Vicente Riambau

10:00 – 10:05  The scandal of long-term mortality after EVAR
Piergiorgio Cao

10:05 – 10:35  Live case transmission from Münster part II

10:35 – 10:40  How short aortic necks should be defined, re-defined and measured
Isabelle van Herzeele

10:40 – 10:45  Chimney procedures for juxtarenal aneurysms – technical considerations and outcomes
Giovanni Torsello

We are asking all faculty members to strictly respect the given time limits.
<table>
<thead>
<tr>
<th>Time</th>
<th>Session</th>
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| 10:45  | Fenestrated endovascular aortic grafts are still the best and most durable solution  
        | Eric Verhoeven                                                          |
| 10:50  | The Auckland experience with the Nellix EVAS system                       
        | Andrew Holden                                                            |
| 10:55  | Is EVAS going to change the practice with short neck and chimneys?        
        | Michel Reijnen                                                           |

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MAIN ARENA 2

11:00 – 12:30  Symposium: Meeting the challenges of EVAR with a unique design & proven indication: Early-, mid-, and late-term clinical experience with Aorfix supported with an educational grant from Lombard Medical

- CHAIRMAN: Dierk Scheinert
- MODERATOR: John Hardman
- Mahmoud Malas
- Vicente Riambau
- Andrew Holden

11:00 – 11:10  7-year experience with Aorfix for complex anatomy

- John Hardman

11:10 – 12:00  Live case transmission from Leipzig

12:00 – 12:10  Two-year outcomes from the US PYTHAGORAS PMA trial

- Mahmoud Malas

12:10 – 12:20  The ARCHYTAS worldwide post-market registry

-Vicente Riambau

12:20 – 12:30  Choosing the right device for your patients: When Aorfix meets the challenge

- Andrew Holden
Friday, January 30, 2015

MAIN ARENA 1

09:00 – 12:00 Critical issues in aortic endografting

CHAIRMAN:
Vicente Riambau

MODERATOR:
Reza Ghotbi
Piergiorgio Cao
Frank Veith
Armando Lobato
Giovanni Torsello

09:00 – 09:25 Live case transmission from Münster
09:25 – 09:32 Renaissance of the tube in EVAR – infrarenal double tubing with endo anchor augmentation
Johannes Gahlen
09:32 – 09:39 Innovative device design and delivery systeins – exploring current and future device capabilities
Dittmar Böckler
09:39 – 09:46 Total endovascular aortic arch replacement with the sandwich technique
Armando Lobato
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
10:00 – 10:07 EVAR is better than open repair for ruptured AAAs despite recent level one evidence: IMPROVE, AJAX & ECAR are misleading
Frank Veith
10:07 – 10:14 Improving care of patients with ruptured AAA: lessons from the USA and the UK
Matt Thompson
10:14 – 10:21 One hundred percent of ruptured abdominal aortic aneurysms can be treated endovascularly if adjunctive techniques are used
Thomas Larzon

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**Friday, January 30, 2015**

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<tr>
<th>Time</th>
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<tbody>
<tr>
<td>10:21 – 10:49</td>
<td>Live case transmission from Leipzig</td>
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<tr>
<td>10:49 – 10:56</td>
<td>How to implement a successful programme for EVAR of ruptured aneurysms</td>
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<td>10:56 – 11:03</td>
<td>Management of aortic disease in the state of infection or inflammation</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>
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<td>11:10 – 11:17</td>
<td>Re-do procedures after stent-graft migration or graft component disconnection</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>
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<td>11:24 – 11:55</td>
<td>Live case transmission from Münster</td>
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<td>11:55 – 12:00</td>
<td>Discussion and conclusion</td>
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