VEITH SYMPOSIUM®

Connecting The Vascular Community

53rd

Tuesday – Saturday, November 17-21, 2026

VEITH

Vascular Endovascular Issues Techniques Horizons



Symposium Chairman
Frank J. Veith, MD

Symposium Executive Director
Gustavo S. Oderich, MD, PhD

Symposium Co-Chairmen
Enrico Ascher, MD
Kenneth Ouriel, MD, MBA
Sean P. Lyden, MD

Sponsored by

Cleveland Clinic

Hilton

www.VEITHsymposium.org

INTERNATIONAL SOCIETY FOR WOMEN VASCULAR SURGEONS

ISWVS Session at VEITHsymposium 2026

Wednesday, November 18, 2026

7:00 A.M.- 9:00 A.M.

Murray Hill Suite East, 2nd Floor

Moderators:	*Misaki Kiguchi, MD and Daniela Branzan, MD*
7:00 – 7:02	Introduction ***Kathleen Ozsvath, MD***
7:02 – 7:10	6-Year Outcomes of Carotid Revascularization for Asymptomatic Disease ***Caitlin Hicks, MD, MS***
7:10 – 7:18	Vessel Preparation Before Treatment in PAD: Which Lesions Actually Need It ***Misty Humphries, MD, MAS***
7:18 – 7:26	Innovation in Cardiovascular Surgery - Outlook for the Next Decade ***Celia Riga, MD***
7:26 – 7:34	Impact of Endovascular Protocol Adoption on Ruptured Aortic Aneurysm Outcomes Institutional Lessons Learned ***Grace Mulatti, MD, PhD***
7:34 – 7:42	Vascular Trauma Training: Have We Missed the Boat? ***Erica Mitchell, MD , MEd***
7:42 – 7:51	Discussion
Moderators:	*Kellie Brown, MD and Celia Riga, MD*
7:51 – 7:59	New Lessons from VEDS: From Skin Biopsy to Femoral Access ***Sherene Shalhub, MD, MPH***
7:59 – 8:07	Personalized Multi-Model Prediction Models in Vascular Diseases (Aneurysms and Peripheral Arterial Diseases). Results From the VASCUL-AID Platform ***Kak Khee Yeung, MD, PhD***
8:07 – 8:15	The Changing Landscape of Access Care: New Data for Women, the Elderly and Our Care Delivery Model ***Ellen Dillavou, MD***
8:15 – 8:23	Iliac Vein Compression and Pelvic Pain: Who Benefits from Intervention ***Kathleen Gibson, MD***
8:23 – 8:31	Decision-Making in Complex Aortic Disease: Experience, Judgement and Teamwork ***Daniela Branzan, MD***
8:31 – 8:39	Ablative Risks Before and After Flying – What Do You Tell Your Patients? ***Sarah Onida, BSc, MBBS, PhD***
8:39 – 8:47	Beyond Aortic Diameter, Can Advanced Hemodynamic Imaging Improve Aortic Risk Assessment During Pregnancy? ***Rana Afifi, MD***
8:47 – 8:56	Discussion
8:56 – 9:00	Closure ***Kathleen Ozsvath, MD***

This is a Non-CME activity.

VEITH SYMPOSIUM®
Connecting The Vascular Community
53rd

SYMPOSIUM CHAIRMAN
Frank J. Veith, MD

SYMPOSIUM EXECUTIVE DIRECTOR
Gustavo S. Oderich, MD, PhD

SYMPOSIUM CO-CHAIRMEN
Enrico Ascher, MD
Kenneth Ouriel, MD, MBA
Sean P. Lyden, MD

SYMPOSIUM MANAGING DIRECTOR
Jacqueline M. Simpson, BBA

SYMPOSIUM ASSOCIATE MANAGING DIRECTORS
Steven J. Feld, MSW
Mel Loftis, BBA

EXPERT PROGRAM ADVISORS
Jacob Cynamon, MD – Interventional Radiology
Gustavo S. Oderich, MD, PhD – Aorta
Caron B. Rockman, MD – Medical & Issues
Marc L. Schermerhorn, MD – Carotid
Peter A. Schneider, MD – Lower Extremity

ADVISORY COMMITTEE
Ali F. AbuRahma, MD
Keith D. Calligaro, MD
Timur P. Sarac, MD
Jacqueline M. Simpson, BBA
Carol La Mantia Veith, RN, BA, MA

COMPONENT MEETING LEADERS
Jose I. Almeida, MD
Allan L. Brook, MD
Jacob Cynamon, MD
Anahita Dua, MD, MS, MBA
Steve Elias, MD
Peter Gloviczki, MD
Lowell S. Kabnick, MD
James F. McKinsey, MD
Peter Monteleone, MD
Larry A. Scher, MD
Anton N. Sidawy, MD, MPH
Thomas W. Wakefield, MD
Haimanot (Monnie) Wasse, MD, MPH

VIRTUAL LIBRARY
Evan C. Lipsitz, MD, MBA

CONTENTS

International Society for Women Vascular Surgeons ..... Inside Front Cover
Acknowledgments 4
Optional Non-CME & Industry Sponsored Events 6-8
Point–Counterpoint: Controversies in Modern Venous Disease Management 9
BEST-CLI 10
Physicians as Industry Employees 11
World Federation of Vascular Societies 12
Fellows & Residents Career Development Program 13-14
General Information 15-17
Accreditation 16
Faculty Disclosure 17
Hotel and Travel 17
Program Outline at a Glance 18
Agenda 19-126
Faculty Listing 127-136
Registration 137

ACKNOWLEDGMENTS

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

Abbott
Artivion, Inc.
BD
Boston Scientific Corporation
Cook Medical, LLC
Cordis
Gore & Associates
Innova Vascular, Inc.
Medtronic, Inc.
Penumbra, Inc.
Reflow Medical
Shape Memory Medical
Shockwave Medical, Inc.
Terumo Medical Corporation

VEITH SYMPOSIUM®
Connecting The Vascular Community
53rd

ASSOCIATE FACULTY PODIUM PRESENTATIONS COMMITTEE

Enrico Ascher, MD
Zach AbuRahma, DO
Sateesh C. Babu, MD
Venita Chandra, MD
Zhong Chen, MD
Anahita Dua, MD, MS, MBA
Alex S. Fairman, MD
Daniel K. Han, MD
Jan M.M. Heyligers, MD, PhD
Anil P. Hingorani, MD
Paulo Eduardo Ocke Reis, MD, PhD
Caron B. Rockman, MD
Jessica P. Simons, MD, MPH
Sherif A.H. Sultan, MD, PhD
Wayne W. Zhang, MD

LATAM COMMITTEE

Enrico Ascher, MD
Tulio Navarro, MD
Rebeca Reachi Lugo, MD
Jorge H. Ulloa, MD

CENTER FOR CONTINUING MEDICAL EDUCATION

Steven M. Kawczak, PhD

OPTIONAL NON-CME AND INDUSTRY SPONSORED EVENTS

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

TUESDAY, NOVEMBER 17, 2026

ABBOTT
Lunch Symposium: Where Evidence Meets Experience: The Latest Advancements in Drug-Eluting Resorbable Scaffolds
Time: 12:00 P.M. – 1:00 P.M.
Location: Americas Hall 1 North, 3rd Floor

COOK MEDICAL
Morphology Matters: Understanding the Impact of Stent Design on Restenosis
Time: 12:00 P.M. – 1:00 P.M.
Location: Petit Rendezvous and Petit Trianon - 3rd Floor

GORE & ASSOCIATES
Lunch Symposium: From Material Innovation to Clinical Performance: Advancing Branched Aortic Repair
Time: 12:00 P.M. – 1:00 P.M.
Location: Mercury Rotunda & Ballroom, 3rd Floor

ViTAA MEDICAL
The AORTA REVEALED: From Anatomy to Intelligence
Time: 4:30 P.M. – 8:30 P.M.
Location: Americas Hall 1 North, 3rd Floor

WEDNESDAY, NOVEMBER 18, 2026

BD
Restoring FLOW: The Rotarex XTRACT Journey From Europe to the U.S. and Evolution to DCB
Time: 12:00 P.M. – 1:00 P.M.
Location: Nassau Suites East & West - 2nd Floor

GE HEALTHCARE
Advances, Workflows, and Case-Based Decision-Making From the Neck Down: The Great Imaging Debate
Time: 5:45 P.M. – 7:15 P.M. *(Reception to Follow)*
Location: Americas Hall 1 North, 3rd Floor

COOK MEDICAL
Dissecting the Evidence: Reshaping Your TBAD Treatment Algorithm With the Cook Zenith Dissection System
Time: 12:00 P.M. – 1:00 P.M.
Location: Petit Rendezvous and Petit Trianon - 3rd Floor

GORE & ASSOCIATES
Lunch Symposium: Advancing Aortic Arch Therapy: Contemporary Techniques and Early Clinical Evidence
Time: 12:00 P.M. – 1:00 P.M.
Location: Mercury Rotunda & Ballroom, 3rd Floor

IMPROVE-AD INVESTIGATOR MEETING
Time: 5:00 P.M.
Location: Concourse A, Concourse Level

INQUIS MEDICAL
360° Directional Aspiration: A New Era in VTE Thrombectomy With Aventus
Time: 12:00 P.M. – 1:00 P.M.
Location: Clinton Suite, 2nd Floor

JOHNSON & JOHNSON MEDTECH - CIRCULATORY RESTORATION
Time: 12:00 P.M. – 1:00 P.M.
Location: Johnson & Johnson MedTech Pavilion, Sutton Parlor Center, 2nd Floor

MEDTRONIC
Lunch Symposium: Beyond the Femoropopliteal Artery: Can the Science of Paclitaxel DCBs Translate to BTK Disease?
Time: 12:00 P.M. – 1:00 P.M.
Location: Beekman Parlor & Sutton Parlor North, 2nd Floor

OPTIONAL NON-CME AND INDUSTRY SPONSORED EVENTS

PENUMBRA
Luncheon: Exploring Penumbra's CAVT & Embolization Technologies: Physician Perspectives on Managing ALI, Endoleaks and Aneurysms
Time: 12:00 P.M. – 1:00 P.M.
Location: Murray Hill Suite East, 2nd Floor

POINT–COUNTERPOINT: CONTROVERSIES IN MODERN VENOUS DISEASE MANAGEMENT
Time: 10:00 A.M. – 12:00 P.M.
Location: Americas Hall 1 South, 3rd Floor

PHYSICIANS AS INDUSTRY EMPLOYEES
Time: 1:00 P.M. – 2:30 P.M.
Location: Americas Hall 1 North, 3rd Floor

VVV@VS - Venous Venous and More Venous® WORKSHOP at VEITHsymposium®
Workshop 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: 1:00 P.M. – 6:00 P.M.
Location: Americas Hall 1 South, 3rd Floor

THURSDAY, NOVEMBER 19, 2026

BD
Venous Voices: Advancing Care, Restoring Flow
Time: 12:00 P.M. – 1:00 P.M.
Location: Nassau Suites East & West - 2nd Floor

COOK MEDICAL
Global Grand Rounds at VEITH – Why Compromise? Consider Your Visceral Solutions
Time: 12:00 P.M. – 1:00 P.M.
Location: Petit Rendezvous and Petit Trianon - 3rd Floor

GORE & ASSOCIATES
Bridging Perspectives: Three-Year EMBRACE Outcomes With the VBX Stent Graft in FEVAR and BEVAR
Time: 12:00 P.M. – 1:00 P.M.
Location: Mercury Rotunda & Ballroom, 3rd Floor

PENUMBRA
Luncheon: Exploring Penumbra's VTE CAVT & Embolization Technologies: Physician Perspectives on the Evidence, Innovation and Clinical Impact
Time: 12:00 P.M. – 1:00 P.M.
Location: Gibson Suite, 2nd Floor

STRYKER
Luncheon: How Much Clot Is Enough? New Clot Sub-Analysis Focuses on the Open Vein Theory
Time: 12:00 P.M. – 1:00 P.M.
Location: Madison Suite, 2nd Floor

MEDTRONIC
Lunch Symposium: Purpose Driven Innovation: Advancing Aortic Patient Care
Time: 12:00 P.M. – 2:30 P.M
Location: Beekman Parlor & Sutton Parlor North, 2nd Floor

COOK MEDICAL
A Night of Innovation at VEITH, Fellows + Residents
Time: 5:00 P.M. – 7:00 P.M.
Location: Petit Rendezvous and Petit Trianon - 3rd Floor

OPTIONAL NON-CME AND INDUSTRY SPONSORED EVENTS

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.
Time: Thursday, November 19, 2026 – 7:30 A.M. - 5:00 P.M.
Friday, November 20, 2026 – 7:30 A.M. - 6:10 P.M.
Location: Murray Hill Suite East, 2nd Floor

FRIDAY, NOVEMBER 20, 2026

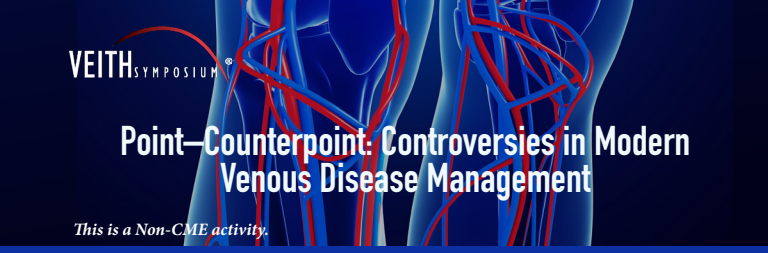
FELLOWS & RESIDENTS CAREER DEVELOPMENT PROGRAM
Time: 8:00 A.M. – 5:00 P.M.
Location: Americas Hall 1 North, 3rd Floor

GORE & ASSOCIATES
The Evolution of Venous Stenting: From Clinical Need to Purpose-Built Innovation
Time: 12:00 P.M. – 1:00 P.M.
Location: Mercury Rotunda & Ballroom, 3rd Floor

MEDTRONIC
Lunch Symposium: Integrated Embolic Protection During Carotid Artery Stenting: PERFORMANCE Trial - Data and Case Discussion
Time: 12:00 P.M. – 1:00 P.M
Location: Beekman Parlor & Sutton Parlor North, 2nd Floor

SATURDAY, NOVEMBER 21, 2026

GORE & ASSOCIATES
KDOQI in Action: Evidence-Based Approaches to Dialysis Access Management
Time: 12:00 P.M. – 1:00 P.M.
Location: Mercury Rotunda & Ballroom, 3rd Floor



VEITH SYMPOSIUM®

Point—Counterpoint: Controversies in Modern Venous Disease Management

This is a Non-CME activity.

Wednesday, November 18, 2026 | Time: 10:00 A.M. – 12:00 P.M.
Location: Americas Hall 1 South, 3rd Floor

Moderators: Jose I. Almeida, MD | Enrico Ascher, MD

Panel: *Lowell S. Kabnick, MD*
Peter Gloviczki, MD, PhD
Thomas W. Wakefield, MD
Steve Elias, MD

10:00 - 10:05 The SVS Vascular Verification Program Will End Unnecessary Procedures
Kim J. Hodgson, MD

10:05 - 10:10 Unnecessary Procedures Only End If They Don't Get Reimbursed: Accreditation Doesn't Matter – The IAC Experience
Mark H. Meissner, MD

10:10 - 10:15 Panel Discussion

10:15 - 10:20 AI-Driven Vacuum Thrombectomy (CAVT) For Lower Extremity DVT & PE: Breakthrough Or Overhyped?
Adam C. Reichard, MD

10:20 - 10:25 Lytics Are Still The Gold Standard For Iliofemoral-Caval DVT & PE
Rabih A. Chaer, MD

10:25 - 10:30 Panel Discussion

10:30 - 10:35 Stop Watching NIVLs Worsen – Stent Them Now
Arjun Jayaraj, MD

10:35 - 10:40 Stenting NIVLs Is A Solution Chasing A Problem
Zbigniew Krasinski, MD

10:40 - 10:45 Panel Discussion

10:45 - 10:50 Endovascular Heroics Won't Save PTS Patients – Stick With Anticoagulation
Timothy K. Liem, MD, MBA

10:50 - 10:55 Pills Alone Are A Disservice To Iliofemoral PTS Patients
Erin H. Murphy, MD

10:55 - 11:00 Panel Discussion

11:00 - 11:05 Since The Introduction Of RF Saphenous Ablation In 1999: New Innovations Have Been Good For Investors But Not Patients
Alan M. Dietzek, MD, RPVI

11:05 - 11:10 New Technologies For Varicose Veins Continue To Improve Patient Experience And Outcomes
Kathleen D. Gibson, MD

11:10 - 11:15 Panel Discussion

11:15 - 11:20 If You Need A Scan To Diagnose Lymphedema, You Shouldn't Be Treating It
Thomas F. O'Donnell, Jr., MD

11:20 - 11:25 Diagnosing Lymphedema Without Lymphoscintigraphy Is Guesswork
Peter Gloviczki, MD, PhD

11:25 - 11:30 Panel Discussion

11:30 - 11:35 Treating Spider Veins Without A Workup Is Malpractice
Mark S. Whiteley, MS, FRCS

11:35 - 11:40 Stop Pretending Spider Veins Are A Disease – Sclerose And Move On
Alun H. Davies, MA, DM, DSc

11:40 - 11:45 Panel Discussion

11:45 - 11:50 We're Overtreating Pelvic Veins – Try A Pill First
Neil M. Khilnani, MD

11:50 - 11:55 You Can't Pill Your Way Out Of Pelvic Venous Disease
Gloria Salazar, MD

11:55 - 12:00 Panel Discussion

The International BEST-CLI Collaborative:
Mastering Endovascular Care
Thursday, November 19, 2026 1:30 P.M. - 3:30 P.M.
Americas Hall North, 3rd Floor

Tibial Interventions in BEST-CLI: Is One Sufficient or Is More Than One Better? **5 min**

- Jeff Siracuse 3 min Discussant: Venita Chandra 2 min
  Moderator: Alik Farber

Re-Defining the Narrative of "No-Option" CLTI Patients **22 min**

Moderators: Michael Conte, Neal Barshes

- Neal Barshes: How Should We Be Thinking About Patients with Advanced Pedal Disease In 2026? 4 min
- Anahita Dua: A Rallying Cry for a New Classification Schema 4 min
- Michael Siah: A Thinking Man's Thoughts on the Role of DVA in Current Practice 4 min
- Panel Discussion: Rick Powell, Pat Geraghty, Parag Patel 10 min

Comparative Specialty Performance In BEST-CLI **5 min**

- Rick Powell 3 min Discussant: Brian DeRubertis 2 min
  Moderator: Alik Farber

All Things Endovascular Excellence **55 min**

Moderators: Matthew Menard, Peter Schneider, Ken Rosenfield

Endovascular Strategy: Toward a Data-Driven future

- Matthew Popplewell: Conceiving an "Endo Strategy" Adaptive Platform Trial 4 min

Defining and Democratizing PVI Technical Mastery: Moving the Entire Endovascular Workforce to the Promised Land (shoulder to shoulder with PCI)

- Sahil Parikh: The Untold Story of the Birth and Evolution of PCI 5 min
- Peter Schneider/Ramon Varcoe: An "Endo Playbook": How do we get there? 6 min
- Panel Discussion: Liz Genovese, Rob Lookstein, Niten Singh, Venita Chandra 40 min

Global efforts in PAD /Building the Global Evidence Base **33 min**

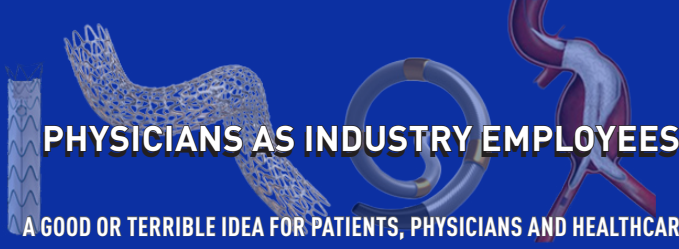
- Phil Goodney Strikes Again: A Global Amputation Heat Map 4 min
- Taylor Orwig: Mapping the Global Vascular Community Workforce 3 min
- Iman Bayat: The Vision that is Global Vascular Companions 4 min
- Palma Shaw: The Growth of the World Federation of Vascular Societies 3 min
- Marc Bonaca: An update on the ROXI-PALISADE Trial (Come join the effort!) 4 min
- Panel Discussion 15 min

Reception 3:30 – 4:15 PM Open Bar and Refreshments 45 min

Co-hosted by CPC and the International BEST-CLI Collaborative



This is a Non-CME activity.



PHYSICIANS AS INDUSTRY EMPLOYEES

A GOOD OR TERRIBLE IDEA FOR PATIENTS, PHYSICIANS AND HEALTHCARE: INSIGHTS AND SECRETS FROM "THE DARK SIDE"

Wednesday, November 18, 2026 | 1:00 P.M. - 3:00 P.M.
Americas Hall 1 North, 3rd Floor

This is a Non-CME activity.

Course Directors: James F. Benenati, MD / Michael R. Jaff, DO

1:00-1:05	Introduction To This Unique Symposium *Frank J. Veith, MD*
1:05-1:14	Course Introduction And Reflections Of A Corporate CMO *James F. Benenati, MD*
1:14-1:23	The Checklist: What Questions Must You Consider Before Signing On The Dotted Line? *John R. Laird, MD*
1:23-1:32	Personal Financial Impact Of Moving To Industry? What's The Upside Potential? What Are The Downside Risks? *John A. Kaufman, MD, MS*
1:32-1:41	What Is The Value Of A Physician Working Inside Industry? *Sumaira Macdonald, MD, PhD*
1:41-1:50	The First 90 Days As An Industry-Employed Physician: What Must You Do To Be Successful? *Simona Zannetti, MD*
1:50-1:59	Do You Need An Attorney To Negotiate With Industry? Key Questions To Ask. . . *Steve Cagnetta, Esq.*
1:59-2:08	The Ethical Architect: The Strategic Impact Of Medical Science In Industry And The Role Of The Medical Affairs Department *Alessandro Marucchini, MD*
2:08-2:17	The Stuff I Wish I Had Known Before I Joined Industry *Michael R. Jaff, DO*
2:17-2:30	**Panel Discussion/Q&A** Moderators: James F. Benenati, MD Michael R. Jaff, DO

World Federation of Vascular Societies

WFVS

WFVS Session at VEITHsymposium 2026

November 18, 2026

9:15 A.M. – 10:55 A.M.

New York Hilton Midtown

Murray Hill Suite East, 2nd Floor

Moderators: Palma M. Shaw, MD, MBA, RPVI
Iman Bayat, MD

9:15 – 9:21	Training The Next Generation Of Vascular Trauma Surgeons (SVS) *Manuel Garcia-Toca, MD*
9:22 – 9:28	Aspiration vs. Surgical Thrombectomy For Thrombolysis-Free Treatment Of Acute Lower Limb Ischemia: A Nationwide Propensity-Matched Analysis In Japan (JSVS) *Hideaki Obara, MD*
9:29 – 9:35	Oncovascular Surgery: Pushing Boundaries With (Critical) Multidisciplinary (ESVS) *Vikatmaa Pirkka, MD*
9:36 – 9:42	An Endovascular First Approach To Acute Limb Ischemia (SVS) *Britt Tonnessen, MD*
9:43 – 9:49	Establishing A FEVAR/ BEVAR Service In A Resource Limited Setting (VASSA) *Legae Mogase, MD*
9:50 – 9:56	Accessibility And Affordability Of Vascular Surgery: An Australia And New Zealand Perspective (ANZSVS) *Roxanne Wu, MD*
9:57–10:03	The Oddball Of Isolated Abdominal Aortic Dissection (VSI) *Prem Gupta, MD*
10:04–10:10	Backing-Balloon Technique: A Novel Strategy To Stabilize Target Vessel Catheterization In Complex Aortic Repair (ALCVA) *Cristina Ribeiro Riguetti Pinto, MD*
10:11–10:17	What We Have Learned From The VLFDC About Aortic Graft Infection (VLFDC) *Matthew Smeds, MD*
10:18–10:24	Spectrum Of Open Aortic Reconstructions In Takayasu Arteritis In A High Volume Aortic Centre In India (VSI) *Prajna B. Kota, MD*
10:25–10:55	Discussion

This is a Non-CME activity.



VASCULAR FELLOWS & RESIDENTS CAREER DEVELOPMENT PROGRAM

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

Friday, November 20, 2026 • 8:00 A.M. - 5:00 P.M. • New York Hilton Midtown, New York City

Americas Hall 1 North, 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 11th VEITHsymposium Fellows & Residents Career Development Program this year. This Program is dedicated to bringing together the June 2027 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 grants in support of this activity from W.L. Gore & Associates, Inc., Cook 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

8:00 – 8:05 Welcome
James F. McKinsey, MD
Anahita Dua, MD, MS, MBA

SESSION 1 **SELECTING YOUR FIRST JOB**

Moderators: ***James F. McKinsey, MD***
Anahita Dua, MD, MS, MBA

8:05 – 8:13 What Does A Vascular Practice Look Like In The 21st Century; Academic, Hybrid Or Community Practice?
Caron B. Rockman, MD

8:14 – 8:22 What To Prioritize In Your First Practice?
Karan Garg, MD

8:23 – 8:31 Role Of An Outpatient Vascular Laboratory In Your Vascular Practice
Mark A. Mattos, MD

8:32 – 8:40 Incorporating Social Media Into Your Vascular Practice
Caitlin W. Hicks, MD, MS

8:41 – 8:49 Do I Need To Do An Added Fellowship In Advanced Aortic Interventions Before Starting My First Job?
Adam Beck, MD

8:50 – 9:05 **Panel Discussion**

SESSION 2 **UNDERSTANDING OPTIONS AND INTERVIEWING FOR YOUR FIRST JOB**

Moderators: James F. McKinsey, MD
Anahita Dua, MD, MS, MBA

9:06 – 9:14 Interviewing 101: The Right Questions To Ask When Interviewing
Jeffrey J. Siracuse, MD, MBA

9:15 – 9:23 How Much Should I Get Paid? How Do I Know If I Am Getting Paid Fairly?
Sherene Shalhub, MD, MPH

9:24 – 9:48 Vascular Procedure Billing And Coding – What Do You Absolutely Need To Know Going Into Your First Job?
Sean P. Roddy, MD

9:49-10:04 **Panel Discussion**

SESSION 3 **FIRST YEAR IN PRACTICE**

Moderators: ***James F. McKinsey, MD***
Anahita Dua, MD, MS, MBA

10:05-10:13 Role Of Artificial Intelligence In Your Vascular Practice
Ross Milner, MD

10:14-10:22 Wound Care Management Program
John C. Lantis, MD

10:23-10:31 Aortic Center
Jason T. Lee, MD

10:32-10:40 Privademics: Community Practice/ Hybrid Practice Model
Joseph J. Ricotta II, MD, MSS

10:41-10:49 Building Your Practice: Research Considerations
Marc L. Schermerhorn, MD

10:50-10:58 Opportunities And Resources For Your Career Available To You From The Society for Vascular Surgery
Linda M. Harris, MD

10:59-11:20 How To Negotiate Your First Contract
James F. McKinsey, MD

11:21-11:29 Balancing Your Practice WithIndustry Relationships – From A Physician's Viewpoint
Peter A. Schneider, MD

11:30-11:38 Building Collaboration Between Specialties
Robert Y. Rhee, MD

11:39-11:52 **Panel Discussion**

11:53-12:10 **Buffet Lunch Available**

LUNCHEON PROGRAM **NEW INNOVATIONS IN THE MANAGEMENT OF COMPLEX VASCULAR DISEASE**

12:10-12:25 Developing Advanced Endovascular Skills: Integrating Off-The-Shelf Branched Solutions Into Clinical Practice
Alyssa Pyun, MD

12:25-12:40 Rethinking Limb Salvage: LimFlow And Lessons For The Next Generation
Michael C. Siah, MD

12:40-12:55 Use Of Artificial Intelligence In Your Practice
Daniel K. Han, MD

12:55 – 1:10 From Experience To Innovation: Leading What's Next In Endovascular
Mike Hardert
(Director of R&D Aortic, Cook Medical)

1:10 – 1:25 Managing Arterial Thrombus With CAVT: Case Based
Misty D. Humphries, MD, MAS

1:25 – 1:45 **Panel Discussion**

SESSION 4 **LONG-TERM PRACTICE MANAGEMENT**

Moderators: ***James F. McKinsey, MD***
Anahita Dua, MD, MS, MBA

1:45 – 1:53 Keys To Building A Successful Practice
Venita R. Chandra, MD

1:54 – 2:02 Medical Malpractice – How To Avoid A Lawsuit
Margaret Tracci, MD, JD

2:03 – 2:11 Opportunities And Resources For Your Career Available To You From Your Regional Vascular Societies
Palma M. Shaw, MD, MBA, RPVI

2:12 – 2:20 Tips And Tricks To Managing Family, Wellness And Career Development
Gregory A. Magee, MD, MSc

2:21 – 2:31 **Panel Discussion**

2:32 – 2:40 Balancing Between Academia/ Research And Finance: Financial Mistakes For Early/Mid-Career Vascular Surgeons
Thomas S. Maldonado, MD

2:41 – 2:49 How To Find Out What The Practice Is Really Like And Understand The Options Within The Practice
Anil P. Hingorani, MD

2:50 – 2:58 Tips And Tricks To Managing Malignant Settings,Toxic Leadership, Difficult Partners And Turf Wars
Shang Loh, MD

2:59 – 3:07 Career Options Throughout Your Career
Kenneth Ouriel, MD, MBA

3:08 – 4:02 Resident/Fellow Case Presentation Competition (6-minute presentation and 3-minute discussion)

Judges: Kenneth Ouriel, MD, MBA
Venita R. Chandra, MD
Jeff J. Siracuse, MD, MBA
Margaret Tracci, MD, JD

4:02 – 5:00 **Interactive Cocktail Reception With Faculty, Fellows/Residents, Potential Employers And Industry**

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

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 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 18-20, 2026
Location: Concourse A, Concourse Level

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 published in the May 2027 *Journal of Vascular Surgery supplement*. 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:

AIMsymposium at VEITHsymposium
Thursday, November 19, 2026
Location: Americas Hall 1 South, 3rd Floor

Multidisciplinary Stroke Prevention And Treatment
Thursday, November 19, 2026
Location: Americas Hall 1 North, 3rd Floor

Improving Outcomes In Hemodialysis Access
Saturday, November 21, 2026
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 Center for Continuing Education designates this live activity for a maximum of 46.25 *AMA PRA Category 1 Credits™*. 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 46.25 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.

GENERAL INFORMATION

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 requirements of 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, 2027.**

FACULTY DISCLOSURE

The Cleveland Clinic 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 program materials.

ADA STATEMENT

The Cleveland Clinic 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 New York Hilton Midtown at the conference rate of $384 plus taxes per night. This rate is available until the block is filled or until October 17, 2026. *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)

Nearby Hotel
SHERATON New York Times Square Hotel
811 7th Avenue
New York, NY 10019
Reserve online at https://book.passkey.com/e/51349261

PROGRAM OUTLINE AT A GLANCE

TUESDAY PROGRAMS

PROGRAM A (SESSIONS 1-8)
7:04 A.M. - 5:56 P.M.
Progress In The Treatment Of Diseases Of Heart Valves And The Thoracic And Abdominal Aorta
Location: Grand Ballroom East, 3rd Floor

PROGRAM B (SESSIONS 9-16)
6:50 A.M. - 6:00 P.M.
Progress In 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 (PE)
Location: Trianon Ballroom, 3rd Floor

PROGRAM C-2 (SESSIONS 19-22)
1:00 P.M. - 5:59 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)
6:52 A.M. - 5:50 P.M.
Progress In Lower Extremity Occlusive Disease And Its Treatment
Location: Grand Ballroom East, 3rd Floor

PROGRAM E (SESSIONS 31-38)
6:52 A.M. - 6:00 P.M.
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. - 6:06 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; The Norman M. Rich Military Session; 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)
6:54 A.M. - 6:00 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)
6:55 A.M. - 6:04 P.M.
Superficial Venous Disease And Venous Ulcers
Location: Trianon Ballroom, 3rd Floor

PROGRAM J (SESSIONS 74-78)
7:45 A.M. - 12:20 P.M.
Multidisciplinary Stroke Prevention And Treatment
Location: Americas Hall 1 North, 3rd Floor

PROGRAM K (SESSIONS 79-84)
7:50 A.M. - 6:00 P.M.
AIMsymposium At VEITHsymposium: Topics Of Interest To Interventional Radiologists
Location: Americas Hall 1 South, 3rd Floor

FRIDAY PROGRAMS

PROGRAM L (SESSIONS 85-92)
6:46 A.M. - 5:36 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 M (SESSIONS 93-100)
6:52 A.M. - 5:12 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 N (SESSIONS 101-111)
7:30 A.M. - 5:59 P.M.
Deep Venous Disease
Location: Trianon Ballroom, 3rd Floor

SATURDAY PROGRAMS

PROGRAM O (SESSIONS 112-115)
7:00 A.M. - 12:35 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 P (SESSIONS 116-120)
8:00 A.M. - 4:05 P.M.
Improving Outcomes In Hemodialysis Access
Location: Grand Ballroom West, 3rd Floor

TUESDAY, NOVEMBER 17, 2026

6:15 A.M. General Registration – Rhinelander Gallery, 2nd Floor
6:15 A.M. Faculty Registration – Gramercy Suite West, 2nd Floor
6:30 A.M. Continental Breakfast – Rhinelander Gallery, 2nd Floor

CONCURRENT TUESDAY PROGRAMS

PROGRAM A (SESSIONS 1-8)
PROGRESS IN THE TREATMENT OF DISEASES OF HEART VALVES AND THE THORACIC AND ABDOMINAL AORTA
Location: Grand Ballroom East, 3rd Floor

PROGRAM B (SESSIONS 9-16)
PROGRESS IN 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)
MANAGEMENT OF PULMONARY EMBOLISM (PE)
Location: Trianon Ballroom, 3rd Floor

PROGRAM C-2 (SESSIONS 19-22)
INTERESTING TOPICS RELATED TO LOWER EXTREMITY OCCLUSIVE DISEASE AND ITS TREATMENTS
Location: Trianon Ballroom, 3rd Floor

PROGRAM A (SESSIONS 1-8)

PROGRESS IN THE TREATMENT OF DISEASES OF 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 AORTIC AND ARCH DISEASE

Moderators: *Hazim J. Safi, MD*
Sahil A. Parikh, MD
Ali Azizzadeh, MD

7:04 – 7:07 Opening Remarks
Frank J. Veith, MD

TRANSCATHETER HEART VALVES

7:08 – 7:13 Progress In Transcatheter Aortic Valve Replacement (TAVR) Including Alternate Access And When Is Open Surgical Valve Replacement Currently Indicated
Ali B. Khoynezhad, MD, PhD

7:14 – 7:19 Progress In Transcatheter Mitral And Tricuspid Valve Replacement/Repair
Mahesh V. Madhavan, MD, MS
Sahil A. Parikh, MD

7:20 – 7:25 Endovascular Wheat Procedure (Treating Ascending Aorta And Valve Leaving Coronary Ostia Intact) For Type A Aortic Dissection (TAAD): How And When To Do It And Results
Ludovic Canaud, MD, PhD

THE ASCENDING AORTA AND ARCH

7:26 – 7:31 Challenges And Progress With Ascending Aortic And Arch Endografts: Industry Made Devices Are Proving To Be Effective For The Treatment Of TAADs, Aneurysms And Other Lesions: When Will Open Surgery Be Required
Rodney A. White, MD

7:32 – 7:37 Advances In The Endovascular Treatment Of TAADs In 2026: What Is Here And What Is Coming: Trial Experience With Ascending Aortic Endografting Including The Gore (ARISE Trials) And Other Devices
Ali Azizzadeh, MD
Eric E. Roselli, MD

7:38 – 7:43 What Is New With Ascending And Arch Endografting Including The Status Of Endo-Bentall Procedures For Combined Ascending Aorta And Valve Disease
Stephan Haulon, MD

7:44 – 7:49 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

7:50 – 7:55 Combined Ascending Aorta And Valve Disease Is Still And Will Mostly Be Best Treated By Open Surgery
Anthony L. Estrera, MD

7:56 – 8:02 **Panel Discussion**

SESSION 2 (Grand Ballroom East, 3rd Floor)

PROGRESS IN THE TREATMENT OF AORTIC ARCH LESIONS, AORTIC DISSECTIONS AND TEVAR

Moderators: ***Ali B. Khoynezhad, MD, PhD***
Stephan Haulon, MD
Mark A. Farber, MD

8:02 – 8:07 Experience With Three Types Of Branch Devices To Treat Aortic Arch Diseases (Terumo Relay, Endospan Nexus, Gore Single Branched Thoracic Endograft [TBE]): What Are The Advantages And Limitations Of Each
Toru Kuratani, MD, PhD

8:08 – 8:13 Total Endovascular Treatment Of Aortic Arch Lesions Is Possible: What Are The Best Devices And Techniques: Open Surgery Is No Longer Needed: Is There Any Role For Chimney Grafts And Management Of False Lumen Enlargement After Initial Treatment
Nicola Mangialardi, MD

8:14 – 8:19 Percutaneous Endovascular Repair Of Aortic Arch Lesions With Double Fenestrated Endografts (Valiant Captiva From Medtronic) Or Physician Modified Endografts (PMEGs): Advantages And Limitations Of Each
Ludovic Canaud, MD, PhD

8:20 – 8:25 Total Endovascular Repair Of Aortic Arch Aneurysms Entirely From The Femoral Approach And Without Cervical Access: Devices, Technique And Results In Patients
Marcelo Ferreira, MD

8:26 – 8:31 Endovascular Arch Repair With Retrograde In Situ Fenestration For Branches Can Be Safe And Durable: How To Do It And 10-Year Results
Jean M. Panneton, MD

8:32 – 8:37 Evolution Of Open Repair Of The Aortic Arch With Frozen Elephant Trunk (FET) Technique: How The ThoraFlex (Terumo) Device Has Helped: Indications And Results From A 20-Year Experience
Joseph S. Coselli, MD

8:38 – 8:43 Triple-Branch Graft For Endovascular Repair Of Aortic Arch Aneurysms And Dissections: How Does It Work, What Makes It Different: Advantages In Difficult Cases And Challenges
Qingsheng Lu, MD *(PowerPoint Presentation With Synched Audio)*

8:44 – 8:49 Multibranched Arch Endografts Are Not Harmless And Can Have Several Complications: What Are They And How Can They Be Minimized: From A World Experience With Cook Arch Devices
Nikolaos Tsilimparis, MD, PhD

8:50 – 8:55 Stroke Prevention In Arch Repair And TEVAR: What Is The Role Of Air, What Are The Outcomes Of RCTs On CO_2 Flushing And How Can A New Device Help To Eliminate The Risks Associated With Air-Embolism
Tilo Kölbel, MD, PhD

8:56 – 9:02 **Panel Discussion**

SESSION 3 (Grand Ballroom East, 3rd Floor)

PROGRESS IN THE ENDOVASCULAR TREATMENT OF THE ASCENDING AORTA, AORTIC ARCH, AORTIC DISSECTIONS, STABILISE, THORACIC AORTA AND MORE

Moderators: Christoph A. Nienaber, MD, PhD
Rodney A. White, MD
Michael D. Dake, MD

9:02 – 9:07 How And Why The Aortic Arch Is An Unhospitable Location For Endovascular Graft Treatments
Piotr M. Kasprzak, MD

9:08 – 9:13 Endovascular Aortic Arch Repairs: Moving From Single To Triple Branched Devices And Percutaneous Femoral Access To All Supra Aortic Branches: For What Lesions, Contraindications, Technical Tips And Results
Timothy A. Resch, MD, PhD

9:14 – 9:19 Total Percutaneous Endovascular Aortic Arch Repair Made Simple With A Three Inner Branched Device (Cook) For Retrograde Branch Graft Insertion: How Does It Work And Results
Andres Schanzer, MD
Stephan Haulon, MD

9:20 – 9:25 Multicenter Experience With Endovascular Aortic Arch Repair Primarily Via Percutaneous Femoral Access: But Percutaneous Carotid Access Is Feasible: Indications, Technical Tips And Results: Value Of Steerable Sheaths
Nuno V. Dias, MD, PhD
Gustavo S. Oderich, MD, PhD
Luca Bertoglio, Professor

9:26 – 9:31 A Critical Look At Asymmetrical Saccular Aneurysms Of The Thoracic Aorta: How To Best Measure And Define Diameter: Do They Rupture When Small: Should They All Be Considered Ticking Time Bombs Regardless Of Size
Frank J. Criado, MD

THE STABILIZE TECHNIQUE

9:32 – 9:37 What Is The STABILISE Technique For Treating Acute And Chronic TBADs By Disrupting The Intimal Flap And Overdilating The Distal Bare Stent: Updated Results, When Should It Be The Treatment Of Choice And When Are Visceral Stents Needed
Jean-Marc Alsac, MD, PhD

9:38 – 9:43 Final Results With The STABILISE Technique For Acute And Subacute TBADs: How The STABILISE Registry Is Helping: Technical Tips, Indications And Precautions
Andrea Kahlberg, MD
Germano C.G. Melissano, MD
Roberto L.V. Chiesa, MD

9:44 – 9:49 Technical Aspects To Enhance Successful Distal Dissection Stents In Petticoat And STABILISE Configurations To Treat Aortic Dissections: How To Assure Precise Stent Deployment, Avoid Aortic Injury, And Maximize Late Remodeling
Rodney A. White, MD

9:50 – 9:55 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 *(PowerPoint Presentation With Synched Audio)*

9:56-10:01 Update On Endovascular Aortic Arch Repair With NEXUS Device (From Enduron And Artivion): Worldwide Results, Current Status And Tips On Cervical Debranching Techniques
Ross Milner, MD
Mario L. Lachat, MD
Nikolaos Tsilimparis, MD, PhD

10:02-10:07 Updated Results With Total And Partial Aortic Arch Lesion Repairs With The Gore TAG Thoracic Branch Endograft (TBE): An Off-The-Shelf (OTS) Device For Revascularizing Arch Branches: Experience To Date Across Zones 0 And 1: Advantages And Limitations
Michael D. Dake, MD
Joseph E. Bavaria, MD
Michel S. Makaroun, MD

10:08-10:14 **Panel Discussion**

10:14-10:24 **Break – Visit Exhibits And Pavilions (2nd and 3rd Floors)**

SESSION 4 (Grand Ballroom East, 3rd Floor)

MORE NEW DEVELOPMENTS IN THE TREATMENT OF AORTIC DISSECTIONS, THORACIC AORTIC DISEASE AND THORACOABDOMINAL ANEURYSMS (TAAAs)

Moderators: *Jean M. Panneton, MD*
Eric L.G. Verhoeven, MD, PhD
Joseph V. Lombardi, MD, MBA

UNCOVERED STENT TREATMENTS

10:24-10:29 The Multilayered Uncovered Allay Aortic Stent (Intressa Vascular) To Treat Aortic Dissections: Indications And How To Use, Advantages, Precautions And Results
Claude D. Vaislic, MD

10:30-10:35 Use Of A Bare Stent (AMDS – Artivion) In The Aortic Arch After Open Ascending Aortic Repair Of Type A Dissections To Alleviate End Organ Malperfusion: How Does It Work And Promising Mid-Term Results From The PERSEVERE IDE Trial
Arminder S. Jassar, MBBS
Wilson Y. Szeto, MD

10:36-10:41 Value Of Multilayer Uncovered Stents To Treat Aortic Dissections (Type A And B): Indications And Limitations, Long-Term Results And When Are They The Easiest And Best Treatment
Victor S. Costache, MD, PhD

10:42-10:47 Proximal Aortic Coverage With TBADs: Should Proximal Deployment Of TEVAR Be Focused On The Entry Tear To Limit Supra Aortic Trunks And Arch Coverage: How Best To Secure Distal False Lumen Sealing
Jean-Marc Alsac, MD, PhD

10:48-10:53 How Best To Treat TBADs Extending Into The Arch, Its Branches Or Ascending Aorta; When Open, When Endo, When Hybrid
I-Hui Wu, MD, PhD

10:54-10:59 Updated Experience With Endovascular Thermal Septotomy Of The Dissection Flap With An Electrocautery Activated Guidewire To Treat Subacute And Chronic TBADs: How Does It Optimize Landing Zones: Technical Tips And How To Avoid Pitfalls And Complications
Carlos H. Timaran, MD
Gustavo S. Oderich, MD, PhD

11:00-11:05 Update On The Status Of A Catheter Aortic Septotomy Device For Treating Aortic Dissections By Cutting The Septum From Below: How Does It Work And Advantages: Limitations To Other Septotomies That Cut The Septum From Above
Ramon Berguer, MD, PhD
Jonathan L. Eliason, MD

11:06-11:11 Extensive Cold Wire Septal Fenestration To Treat Malperfusion In Acute Aortic Dissection: It Is Also A Better Alternative Than TEVAR To Induce Favorable Aortic Remodeling: When And How To Do It
Jade S. Hiramoto, MD
Timothy A.M. Chuter, MD

11:12-11:18 **Panel Discussion**

11:18-11:23 With Post-Dissection TAAAs When Is Open Repair The Best Treatment Option And Why: What Qualifications Will Be Needed To Do These Procedures, And How To Attain Them: Will There Be Qualified Surgeons In The Future
Hazim J. Safi, MD

11:24-11:29 Updated Experience With F/B/EVAR For Post TBAD TAAAs: Technical Tips And The Value Of Inner Branched Devices And New Covered Stents For Branches (From Bentley)
Eric L.G. Verhoeven, MD, PhD
Athanasios Katsargyris, MD

11:30-11:35 Value Of The PETTICOAT Procedure In Treating Aortic Dissections: Relief Of Mal-Perfusion, Improved Remodeling Or Both: Indications And How To Do It Effectively
Christoph A. Nienaber, MD, PhD

11:36-11:41 The Role Of In Situ Fenestration In The Treatment Of TAAAs: When Is It Indicated: How To Do It Safely And Effectively: What Are The Pitfalls
Ralf R. Kolvenbach, MD *(PowerPoint Presentation With Synched Audio)*

11:42-11:47 The Artery Of Adamkiewicz: Does It Still Matter
Joseph S. Coselli, MD

11:48-11:53 Update On The SVS-STS Aortic Dissection Reporting Standards And Classification System: What Is It; What Are Its Advantages And Limitations; How Is It Being Used To Help Understand The Disease Process And Improve Treatment
Joseph V. Lombardi, MD, MBA

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

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

SESSION 5 (Grand Ballroom East, 3rd Floor)

NEW DEVELOPMENTS IN ABDOMINAL AORTIC ANEURYSM (AAA) ETIOLOGY, DETECTION, TREATMENT AND EVAR

Moderators: *Ronald L. Dalman, MD*
Michael L. Marin, MD
Grace J. Wang, MD, MSCE

CHANGING AAA SIZE THRESHOLDS

1:00 – 1:05 Size 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
Salvatore Scali, MD
Bjoern D. Suckow, MD

1:06 – 1:11 Should We Reconsider AAA Size Threshold For Infrarenal AAA: Why Many Patients With AAAs >5 cm In Diameter Should NOT Have Any Invasive Treatment: The Guidelines Should Be Changed
Grace J. Wang, MD, MSCE
Nicos Labropoulos, PhD

1:12 – 1:17 Rethinking AAA Rupture Risk: How Aging-Related Elongation Shapes Rupture Susceptibility, Insights From Computational Fluid Analysis And Regional Weakness Mapping
Frans L. Moll, MD, PhD

1:18 – 1:23 The ViTAA AI System For Analysis Of CT Factors Determining AAA Wall Weakness/Strength Of Areas In AAAs Predicts Rupture Risk Independent Of Size And Post EVAR Neck Behavior: How Does It Work And How Accurate Is It
Adam Beck, MD
Randy D. Moore, MD

1:24 – 1:29 Update On Medical Treatments To Slow AAA Growth: What Treatments Or Drugs Show Promise And Why: What About Metformin And The MAAAGI And MAT Trials
Ronald L. Dalman, MD
Anders Wanhainen, MD, PhD

1:30 – 1:35 Is It Diabetes Or Antidiabetic Drugs That Reduce The Growth Rate Of Abdominal Aortic Aneurysm: From A Large Meta-Analysis: What Is The Mechanism
George A. Antoniou, MD, PhD, MSc

1:36 – 1:41 High Dose Statin Therapy Has A Profound Influence On The Clinical Course Of AAA Disease: From Two Prospective Screening Trials
Jes S. Lindholt, MD *(PowerPoint Presentation With Synched Audio)*

1:42 – 1:47 **Panel Discussion**

1:48 – 1:53 When Is EVAR An Effective Treatment For Infected AAAs: From A 20-Year Experience With >200 Cases: EVAR Can Work Long-Term: What Is The Best Endograft When Renal/Visceral Arteries Are Involved
Boonprasit Kritpracha, MD

1:54 – 1:59 Optimal Management Strategies For Aorto-Enteric Fistulas: When And How Can Endografts Be Helpful
Peter F. Lawrence, MD

2:00 – 2:05 A Novel Endovascular Technology (Nectero – Intra-Sac Drug After AAA Balloon Isolation) To Slow AAA Growth: Updated Results Of The stAAAble RCT
Andrew Holden, MBChB
Ramon L. Varcoe, MBBS, MS, PhD, MMed
Daniel G. Clair, MD
Venkatesh G. Ramaiah, MD

2:06 – 2:11 Rethinking Success After EVAR: The Significance Of Aneurysm Sac Shrinkage And The Future Role Of Active Sac Management
Michel Reijnen, MD, PhD

2:12 – 2:17 Does Early EVAR In Women With Small AAAs Reduce The Incidence Of AAA Rupture And Aneurysm-Related Mortality At 5 Years (From The WARRIOR Trial)
Colin D. Bicknell, MD

2:18 – 2:23 Understanding Why Some EVAR Devices Perform Better Than Others: Based On Reintervention Data From The UK National Vascular Registry: Which Devices Are Better
Jonathan R. Boyle, MD, MA (Cantab)

2:24 – 2:30 A Memorial Tribute To Giorgio Biasi: A Superstar Vascular Surgeon And A Valued Friend To Many Around The World
Christos D. Liapis, MD

2:30 – 2:39 **Panel Discussion And Break**
Visit Exhibits And Pavilions (2nd and 3rd Floors)

SESSION 6 (Grand Ballroom East, 3rd Floor)

MORE ABOUT AAAs AND EVAR, STANDARD AND COMPLEX: UPDATES ON PHYSICIAN MODIFIED ENDOGRAFTS (PMEGs) AND GUIDELINES

Moderators: ***Michel S. Makaroun, MD***
Maarit Venermo, MD, PhD
Dittmar Böckler, MD

2:39 – 2:44 Myths And Truths About Small AAA Behavior: And Why AAA Treatment Outcomes Are Worse For Women Than For Men
Jon S. Matsumura, MD

2:45 – 2:50 A Novel Aortic Neck Anatomic Classification System That Can Predict Late EVAR Success, Failure And The Need For F/EVAR
David J. Minion, MD

2:51 – 2:56 >5-Year Results Of Heli-FX Endoanchor (Medtronic) Fixation To Prevent Or Fix EVAR Complications Including Type 1A Endoleaks: From The Global ANCHOR Registry: What Virtual Techniques Can Predict The Need For Endoanchors
William D. Jordan Jr., MD
Jean-Paul de Vries, MD, PhD

2:57 – 3:02 Does EVAR Increase Cancer Risk: The Answer From A National Data Analysis
Bijan Modarai, PhD, FRCS

3:03 – 3:08 Inflammatory AAAs: When Can Medical Treatment Be Effective As Endo Or Open Invasive Treatment: From Results Of A 5-Year Study
Julien G. Sfeir, MD

3:09 – 3:14 **Panel Discussion**

3:15 – 3:20 Comparison Of EVAR vs. Open Repair In The Young: From A Meta-Analysis Of Over 48,000 Patients: Why EVAR Should Be Considered In All Young Patients With AAAs
George A. Antoniou, MD, PhD, MSc

3:21 – 3:26 Sailing Against The Tide – A Recent Meta-Analysis Of Comparative Studies On 11,298 Patients With Complex AAA Demonstrates Almost Equivalent Perioperative Results For Endovascular Repairs (F/B/EVAR) And Long-Term Results Favoring Open Surgery
George Geroulakos, MD, PhD

3:27 – 3:32 A Partially Off-The-Shelf Endograft For Urgent Repair Of Complex AAAs With Inner Branches For Renals And SMA But Requiring PMEG For The Celiac: Advantages And Results
Michele Piazza, MD

3:33 – 3:38 Open EVAR Conversion For Enlarging AAA Sac: Technical Challenges And Solutions: How Do The Results Compare With Those Of Primary Repairs
Andrea Kahlberg, MD
Germano C.G. Melissano, MD

3:39 – 3:44 Colonic Ischemia Following EVAR Repair: Current Concepts About Etiology, Diagnosis, Prevention, Treatment And Outcomes
Jean Pierre Becquemin, MD

3:45 – 3:50 What Is The LEAF Initiative For Assessing Long-Term Outcomes For EVAR Devices From Various Manufacturers: Interesting Findings To Date And How They Should Influence Clinical Practice
Philip P. Goodney, MD, MS
Robert E. Lee, MD

3:51 – 3:56 **Panel Discussion**

SESSION 7 (Grand Ballroom East, 3rd Floor)

MORE NEW DEVELOPMENTS IN THE TREATMENT OF TBADs, THORACIC AORTIC PATHOLOGY AND CORAL REEF AORTA

Moderators: ***Sean P. Lyden, MD***
Manju Kalra, MBBS
Ali Azizzadeh, MD

3:56 – 4:01 How Does The Heart And Proximal Aorta Respond To TEVAR: Why It Matters And What To Do About It
Rachel E. Clough, PhD, FRCS

4:02 – 4:07 How Aortic Dissection And Entry Tear Morphology Should Influence The Decision To Perform TEVAR For uTBADs Or Not: What Is The Evidence To Date
Shang Loh, MD

4:08 – 4:13 Progress With The IMPROVE-AD And SUNDAY RCTs Comparing TEVAR vs. Best Medical Treatment Of Acute And Subacute uTBADs: Recruitment And Findings To Date
Firas F. Mussa, MD
Jacob Budtz-Lilly, MD, PhD
Panos Kougias, MD, MSc

4:14 – 4:19 The Science Behind The High Risk Features Of Uncomplicated Acute Type B Dissections (uTBADs) Is Shaky At Best: Until We Have Better Evidence They Should Not Be Used As A Basis To Treat These Patients Invasively (As Some Guidelines Suggest): Until Then An RCT Will Be Difficult Or Impossible
Hence J.M. Verhagen, MD, PhD

4:20 – 4:25 For uTBAD An AI Analysis Of EPIC Data Shows That Best Medical Treatment With BP Control Has Better Survival And Fewer Complications Than Early TEVAR: We May Not Need The IMPROVE-AD And SUNDAY RCTs
Mahmoud B. Malas, MD, MHS

4:26 – 4:31 With Acute Type A Dissections And Severe SMA Malperfusion, What Is The Optimal Treatment Sequence: When Should Descending Aortic TEVAR To Restore SMA Flow Precede Open Repair Of The Ascending Aorta
Martin R. Back, MD

UPDATES ON CORAL REEF AORTA TREATMENT

4:32 – 4:37 **DEBATE:** Open Surgery Should Still Be The Treatment Of Choice For Coral Reef Aorta With Visceral Involvement: Why Is Endovascular Treatment Inappropriate
Jean-Baptiste Ricco, MD, PhD

4:38 – 4:43 **DEBATE:** The Value Of Endovascular Treatment Of Thoracoabdominal Coral Reef Aorta: Technical Tips, Results And When And How Can It Be Used
Mark A. Farber, MD

4:44 – 4:49 Value Of Endo TAAA Repair In Patients With Connective Tissue Disorders: Which Device Or Devices Are Best And Why: How To Get Good Results
Gustavo S. Oderich, MD, PhD

4:50 – 4:56 **Panel Discussion**

SESSION 8 (Grand Ballroom East, 3rd Floor)

MORE NEW DEVELOPMENTS REGARDING TBADs, TEVAR AND BLUNT THORACIC AORTIC INJURY (BTAI): NEED FOR AND TIMING OF TEVAR FOR ACUTE UNCOMPLICATED TYPE B AORTIC DISSECTION (uTBADs)

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

4:56 – 5:01 **DEBATE ROUND 4:** With Acute Uncomplicated TBADs, The Case For Early TEVAR With Extensive Aortic Coverage In Most Patients: New Data Supports It
William D. Jordan Jr., MD

5:02 – 5:07 **DEBATE ROUND 4:** With Acute Uncomplicated TBADs, The Case For Waiting 2-6 Weeks From Onset For TEVAR And Then Limiting Aortic Coverage: The Facts Support It
Mark A. Farber, MD

5:08 – 5:13 Classification And Management Of BTAI: An Update From The Revised SVS Clinical Practice Guidelines: When Is Medical Management The Best Treatment
Ali Azizzadeh, MD

5:14 – 5:19 Transposition vs. Bypass vs. Endovascular Procedure: What Is The Best Option For Revascularization Of The Left Subclavian Artery (LSA) During TEVAR For TBADs Or Other Lesions: When Is Each Best
Giovanni Pratesi, MD

5:20 – 5:25 Surprisingly Good Mid-Term Results From The STABILISE Technique To Treat Complications Of Complex TBDs: How To Do It Safely, Indications, Advantages And Pitfalls
Igor A. Laskowski, MD, PhD

5:26 – 5:31 Long-Term Outcomes Of Endovascular Treatment For TBADs: Failure Modes: What Secondary Interventions Are Required: Is Late Graft Migration An Issue
Dittmar Böckler, MD

5:32 – 5:37 IVUS-Guided TEVAR For Acute Type B Dissection: Why It Will Improve Treatment Outcomes
Francesco Setacci, MD *(PowerPoint Presentation With Synched Audio)*

5:38 – 5:43 Re-Entry Specific Endovascular Therapy (RESET) For TBAD Features Treatment Of Re-Entry Tears And Improves Remodeling And Outcomes With TBADs: When And How To Do It
Jean M. Panneton, MD

5:44 – 5:49 How Important Is The Conformability Of Thoracic Endografts: The Real-Life Performance Of A More Conformable Device
Vicente Riambau, MD, PhD

5:50 – 5:56 **Panel Discussion**
End of Program A

PROGRAM B (SESSIONS 9-16)

PROGRESS IN 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 VASCULAR ROBOTICS AND IMAGING AND GUIDANCE SYSTEMS WITH LESS RADIATION AND CONTRAST

Moderators: *Alan B. Lumsden, MD*
Matthew J. Eagleton, MD

6:50 – 6:55 Opening Remarks
Enrico Ascher, MD

VASCULAR ROBOTICS CURRENT AND FUTURE

6:56 – 7:01 A Look Back And A Look Forward At Vascular Robotics: Lessons Learned And Current Innovations Will Bring Success
Celia Riga, MD

7:02 – 7:07 A Unique Magnetic Robotic Navigational System To Cannulate Vessels And Cross Occlusions With Catheters And Guidewires (From Flux Robotics): Initial European And US Experience: How Does It Work And Advantages
Robert E. Beasley, MD

7:08 – 7:13 Update On The Sentante Robotic System Which Allows For Remote Endovascular Procedures: How Does It Work: Other Advantages And Limitations
Gary M. Ansel, MD
Dainis K. Krievins, MD

7:14 – 7:19 What Is The Future For Vascular Robotics: What Clinical Benefits Are Needed To Make It Successful And What Improved Techniques Are On The Horizon: How Can They Help In Training
Willem Wisselink, MD

IMPROVED IMAGING GUIDANCE SYSTEMS

7:20 – 7:25 The Cydar System And Its AI Modifications Allows Image Fusion Even With Mobile C-Arms And Enhances Fusion Accuracy As Intravascular Hardware Modifies Vascular Anatomy: How Does The System Work: Results And Advantages From A UK Multicenter Trial
Rachel E. Clough, PhD, FRCS
Murray L. Shames, MD

7:26 – 7:31 Improved Fiberoptic Based Radiation Free 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 Updated Experience
Carlos H. Timaran, MD

7:32 – 7:37 Fiber Optic Real Shape (FORS) Technology Reduces Time And Radiation Exposure In Complex AAA Repairs: What Are The Cost And Other Limitations
Geert Willem H. Schurink, MD, PhD

7:38 – 7:43 Updated Status Of The 3D Radiation Free Electromagnetic Intraoperative Positioning System (IOPS From Centerline) For Endovascular Guidance: How Does It Work, Advantages And Limitations: How Widespread Is Its Usage
Matthew J. Eagleton, MD
Francis Caputo, MD

7:44 – 7:50 **Panel Discussion**

SESSION 10 (Grand Ballroom West, 3rd Floor)

NEW DEVELOPMENTS IN CAROTID DISEASE AND ITS TREATMENT: A NEW LOOK AT THE TREATMENT OF ASYMPTOMATIC CAROTID STENOSIS (ACS) AND OTHER CAROTID TOPICS

Moderators: *Colin P. Derdeyn, MD*
Christopher K. Zarins, MD
Robert W. Chang, MD

A NEW LOOK AT IMAGING TO EVALUATE THE ASYMPTOMATIC CAROTID STENOSIS (ACS)

7:50 – 7:55 AI Assisted Analysis Of Duplex, CT Or MRI Characteristics Of Carotid Plaques Can Predict Stroke Risk And Help Select Asymptomatic Patients For Invasive Treatment
Robert W. Chang, MD

7:56 – 8:01 New Developments In Carotid Plaque Imaging (Duplex, CT, MRI) Can Predict Stroke Risk Reliably In ACS Patients To Facilitate Highly Selective Invasive Treatment
Stavros K. Kakkos, MD, PhD
Andrew N. Nicolaides, MS, FRCS

8:02 – 8:07 Carotid Plaque Biology And Instability Can Predict Stroke Risk In ACS Patients Better Than Luminal Narrowing On Angiography Or Duplex: How Can This Be Determined And Why Haven't Practice And Trials Changed Accordingly
Reese A. Wain, MD

8:08 – 8:13 Why Recent Carotid Trials Including ACS RCTs Have Been Misleading: It's All About Newer Methods For Assessing Plaque Morphology Rather Than The Percentage Of Lesion Stenosis
Kosmas I. Paraskevas, MD

8:14 – 8:19 In View Of All This And Recent Trials, How Should ACS Patients Be Managed: Which Patients Should Be Advised To Undergo Invasive Treatment: Should Patients And Their Families Be Informed And Make The Decision
Martin Storck, MD, PhD

8:20 – 8:25 Current Status Of Intracranial Angioplasty, Stenting And EC - IC Bypasses: How To Manage Tandem High-Grade Lesions In Extracranial And Intracranial Arteries
Colin P. Derdeyn, MD

8:26 – 8:32 **Panel Discussion**

CORONARY DISEASE IN CAROTID STENOSIS (CS) PATIENTS

8:32 – 8:37 Asymptomatic Carotid Stenosis Is Deadly Whether Treated Invasively Or Medically: A 5-Year Study Shows That Coronary CT Angiography With Fractional Flow Reserve (FFR_{CT}) Can Lead To Treatment Which Lowers Mortality: Are There Limitations To The Study And Cost Issues
Christopher K. Zarins, MD
Dainis K. Krievins, MD

8:38 – 8:43 Late Outcomes Of Young Patients Undergoing Carotid Interventions (CEA Or CAS): Do They Have A High Incidence Of Morbidity And Mortality From Coronary Artery Disease
Caron B. Rockman, MD

8:44 – 8:49 Why Amaurosis Fugax Should No Longer Be Considered As Strong An Indication For CEA Or CAS As Other Neurological Symptoms: When Can It Be Treated Medically
David H. Stone, MD

8:50 – 8:55 Elongated Styloid Process (Eagle's Syndrome): How Can It Cause Cervical Carotid Artery Dissections And Strokes: How To Diagnose It And How To Treat It
Domenico Valenti, DMChir, PhD

8:56 – 9:01 Why A Common Carotid Artery Balloon Guide Catheter Is A Valuable Adjunct For Transfemoral Or Transradial CAS: How To Use It Effectively
Adnan H. Siddiqui, MD, PhD *(PowerPoint Presentation With Synched Audio)*

9:02 – 9:07 Duplex Ultrasound May Be Inaccurate In Assessing The Degree Of Carotid Stenosis: How Can This Be Recognized And Dealt With
Fedor Lurie, MD, PhD

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)

MORE NEW DEVELOPMENTS IN CAROTID DISEASE AND ITS TREATMENT: ENDOVASCULAR TREATMENT OF ACUTE STROKES (SPONTANEOUS OR AFTER TREATMENT); MANAGEMENT OF CAROTID DISSECTIONS, STRING SIGN, CALCIFICATION; ESTIMATING ATHERO-SCLEROTIC RISK

Moderators: *Caron B. Rockman, MD*
Allan L. Brook, MD
Enrico Ascher, MD

9:28 – 9:33 What Is New About Devices For Intracranial Endovascular Clot Removal: Current Role Of Systemic Or Intraarterial Thrombolysis To Treat Acute Strokes
Allan L. Brook, MD

9:34 – 9:39 With Acute Strokes, What Is New With Endovascular Intracranial Techniques And Indications For Arterial Clot Removal: Do The Recent Trials Expand Treatment Options Regarding Time To Treatment Or More Distal Clot
Colin P. Derdeyn, MD

9:40 – 9:45 How To Treat Acute Strokes Incurred During Or Right After CEA Or CAS: What Imaging Is Needed: What To Do Next: What To Do About Intracranial Embolization: What Skills (Specialties) Are Required
Adnan H. Siddiqui, MD, PhD *(PowerPoint Presentation With Synched Audio)*

9:46 – 9:51 How To Manage Acute Strokes In Patients With Carotid Bifurcation Disease And Intracranial Clot: What Is The Best Imaging And Sequence For Treatment: Who Should Do The Procedures
Laura Capoccia, MD, PhD

CAROTID ARTERY DISSECTIONS

9:52 – 9:57 Current Optimal Treatment Of Spontaneous Or Post-Traumatic Carotid Artery Dissections: When Anticoagulation And When Antiplatelet Drugs; When CAS And When Open Surgery: Technical Tips
Allan L. Brook, MD

9:58-10:03 Carotid Near Total Occlusion (String Sign): It Is Time To Rethink The Diagnosis And Management: When Conservative, When CEA, CAS Or TCAR
Christos D. Liapis, MD

10:04-10:09 How Can Duplex Identification Of Carotid Bifurcation And Femoral Artery Bifurcation Plaque Predict Arteriosclerotic Morbidity And Mortality Risk: How Should It Influence Treatment
Stavros K. Kakkos, MD, PhD
Andrew N. Nicolaides, MS, FRCS

10:10-10:15 Intravascular Lithotripsy (IVL) To Facilitate TfCAS And TCAR In Heavily Calcified Carotid Arteries: Technical Tips And Contraindications
Adnan H. Siddiqui, MD, PhD *(PowerPoint Presentation With Synched Audio)*

10:16-10:23 **Panel Discussion**

SESSION 12 (Grand Ballroom West, 3rd Floor)

PROGRESS IN THE TREATMENT OF AORTIC AND AORTO-ILIAC OCCLUSIVE DISEASE (AIOD) AND PRESERVING HYPOGASTRIC FLOW

Moderators: David J. Minion, MD
Wayne W. Zhang, MD
Zhong Chen, MD

THE CERAB PROCEDURE OR COVERED ENDOVASCULAR RECONSTRUCTION OF THE AORTIC BIFURCATION FOR AIOD

10:24-10:29 5-Year Durability Of CERAB In TASC C/D AIOD: Patency, Reinterventions, And Clinical Benefits
Ignacio Escotto, MD

10:30-10:35 Advantages, Limitations And Long-Term Results Of The CERAB Procedure: Pushing The Limits Of CERAB To Include Juxta- And Pararenal Aorto-Iliac Occlusive Disease (AIOD) And Results
Michel Reijnen, MD, PhD

10:36-10:41 Should Mesh Covered Stents Replace Fully Covered Stents To Treat Complex Iliac Occlusive Lesions: Advantages, Disadvantages And Results With The Various Devices
Piotr Myrcha, MD

10:42-10:47 The Importance Of Lysis With CERAB In The Endovascular Treatment Of Chronic Flush Juxtarenal Aortic Occlusions Endovascularly: How To Do It And Is There Ever A Need For Open Surgery
David J. Minion, MD

10:48-10:53 Redo AIOD Interventions After Failed CERAB Or Aorto-Bifemoral Bypass Procedures: How To Recanalize Native Vessels And Restore Durable Patency: What Devices Are Best
Christopher J. Smolock, MD

10:54-10:59 Intravascular Lithotripsy (IVL - Shockwave-J&J) Improves The Endovascular Treatment Of Aorto-Iliac Lesions: Indications, New Technology (L6 And E8 IVL Catheters) And Technical Tips For Use
Daniel G. Clair, MD *(PowerPoint Presentation With Synched Audio)*

11:00-11:05 New Large Balloon Intravascular Lithotripsy Catheter L6 (Shockwave-J&J) Facilitates The Treatment Of Isolated Aortic Lesions And Reduces The Need For Stents And Covered Stents: When Are They Necessary: Lessons Learned From The Global CERAB Registry
Maria Antonella Ruffino, MD

11:06-11:12 **Panel Discussion**

11:12-11:17 **DEBATE**: For AIOD Or Leriche Syndrome There Is No Need For Open Surgery In The Endovascular Era Based On The Results Of Full Percutaneous Treatment With Stents Or Stent-Grafts
Nicola Mangialardi, MD

11:18-11:23 **DEBATE:** When Open Surgery For AIOD May Be The Best Treatment For AIOD Because Aorto-Femoral Bypasses Are More Durable In Young Patients And Failed Endovascular Repair Reduces The Long-Term Success Of Aorto-Femoral Bypasses
Zach AbuRahma, DO

11:24-11:29 Why There Is No Role For Endovascular Therapy In The Treatment Of External Iliac Artery Endofibrosis In Committed Athletes (Cyclists): What Is The Next Frontier In The Diagnosis And Management Of This Entity
Margaret Tracci, MD, JD

11:30-11:35 For An Aorto-Femoral Bypass The VORTEC Technique Eliminates The Need For Aortic Circumferential Dissection, Clamping And Suturing: How To Do It: It Is Especially Valuable For Heavily Calcified And Scarred Aortas
Mario L. Lachat, MD

11:36-11:41 The VORTEC Technique Is Valuable To Simplify Hypogastric Revascularization With Open Repair Of Difficult Iliac Aneurysms: How To Do It
Zoran Rancic, MD, PhD

NEW METHOD TO PRESERVE HYPOGASTRIC FLOW

11:42-11:47 Covered Stent Endovascular Reconstruction Of The Iliac Bifurcation (CERIB) For Treatment Of Aorto-Iliac Occlusive Disease With Hypogastric Preservation: How To Do It: Advantages And Results
Joshua D. Adams, MD

11:48-11:53 Radiation Free Endovascular Procedures To Treat AIOD Are Possible Using FORS Technology (Philips) With Its 3-D Hub: How Is It Done And Technical Tips: Updated Clinical Experience
Barend M.E. Mees, MD, 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 13 (Grand Ballroom West, 3rd Floor)

VALUE OF SIMULATION AI, ARTIFICIAL INTELLIGENCE (AI), MACHINE LEARNING AND ROBOTICS: THEY WILL ALL CHANGE VASCULAR TREATMENT, EVIDENCE-BASED MEDICINE AND DECREASE RADIATION
(SEE ALSO SESSIONS 9, 54 & 95)

Moderators: Alan B. Lumsden, MD
Kak Khee Yeung, MD, PhD

1:00 – 1:05 From Proof-Of-Concept To Practice: How AI Technologies Are Transforming Tomorrow's Vascular Care
Oliver O. Aalami, MD

1:06 – 1:11 Precision Medicine To Better Treat Vascular Patients: What Are Vasc-Omics And The Digital Twin Surgeon: How Are They And AI The New Operating System In Vascular Surgery
Sherif A.H. Sultan, MD, PhD

1:12 – 1:17 The VASCUL-AID Platform: Using Multimodal AI To Predict Cardiovascular Disease Progression In AAA Patients And Lower Extremity Arterial Occlusive Disease From Imaging, Omics And Clinical Data: How Will It Improve Patient Care
Kak Khee Yeung, MD, PhD

1:18 – 1:23 Can AI Reliably Improve The Diagnosis Of Lower Extremity Occlusive Disease: Large Language Models (AI) Can Improve The Interpretation And Accuracy Of Duplex Ultrasound, Segmental Pressures, And Pulse Volume Recordings
Michael H. Wholey, MD, MBA

1:24 – 1:29 AI Can Improve Treatment Strategies Before And After AAA Procedures: Will It Improve Outcomes And Be Widely Available
Apostolos K. Tassiopoulos, MD

1:30 – 1:35 **Panel Discussion**

1:36 – 1:41 Simulation Based Training Can Improve Radiation Protection, Operator Performance And Procedural Outcomes: Proven By An RCT
Lars B. Lonn, MD, PhD *(PowerPoint Presentation With Synched Audio)*

1:42 – 1:47 AI Can Enable More Precise EVAR By Better Defining AAA Anatomy And Morphology And By Facilitating Robotic Assisted Endovascular Repairs
Qingsheng Lu, MD *(PowerPoint Presentation With Synched Audio)*

1:48 – 1:53 Can Microchips, Wireless Technology And AI Come Together To Alter Workflow For Peripheral Interventions And Improve Treatment Outcomes
William A. Gray, MD

1:54 – 1:59 What New Developments In Vascular Robotics Will Lead To Their Serious Comeback: How Can Single Port Robotic Surgery Help: What Does The Future Hold
Willem Wisselink, MD

2:00 – 2:05 The Flux Robotics System: How A Magnetic Tip Catheter Can Facilitate Complex Robotic Endovascular Aortic Procedures: Early Clinical Results
Jean-Paul de Vries, MD, PhD

2:06 – 2:12 **Panel Discussion**

SESSION 14 (Grand Ballroom West, 3rd Floor)

ISSUES IMPORTANT TO VASCULAR SURGERY: ITS IDENTITY, WELL BEING AND TRAINING

Moderators: James C. Stanley, MD
Kim J. Hodgson, MD

2:12 – 2:17 The ABVS Is An Organization Whose Goal Is To Establish An Independent ABMS Approved Board of Vascular Surgery: What Has The ABVS Been Doing To Reach This Goal: Why Such A Board Should Be Important To All Vascular Surgeons In North America
Alan M. Dietzek, MD, RPVI

2:18 – 2:23 The Importance Of Sub-Specialization In Vascular Surgery: How An Independent Board Can Help Subspecialization And Improve Patient Care
Anil P. Hingorani, MD

2:24 – 2:29 Why Are The SVS And Vascular Surgery Not Moving Forward More Rapidly To Get An Independent ABMS Approved Board Of Vascular Surgery: What Are The Issues
Keith D. Calligaro, MD

2:30 – 2:35 Why The SVS Has Been Reluctant To Support An Independent Board Of Vascular Surgery Recently And Over The Past Two Decades
Benjamin W. Starnes, MD

2:36 – 2:41 The ABS Vascular Surgery Board Should Transition To An Independent ABMS Approved American Board Of Vascular Surgery: Why Not
James C. Stanley, MD

2:42 – 2:47 The Current Society for Vascular Surgery (SVS): What Are Its Assets And Deficiencies: What Can Be Done To Improve It: Is It Too Late
Firas F. Mussa, MD

2:48 – 2:53 **Panel Discussion**

TRAINING AND WELL BEING RELATED ISSUES

2:54 – 2:59 Training Opportunities To Mitigate The Limited Vascular Surgery Workforce Crisis: Updates From The APDVS Workforce Initiative: VASCULAR FORWARD
Dawn M. Coleman, MD *(PowerPoint Presentation With Synched Audio)*

3:00 – 3:05 How To Promote Vascular Surgeon/Specialist Wellness And Prevent Burnout In These Trying Times
Giuseppe Papia, MD

3:06 – 3:11 How To Deal With Bad Clinical Outcomes And Other Professional And Personal Adversity: It Really Matters For A Vascular Surgeon/Specialist/Trainee
John F. Eidt, MD

3:12 – 3:17 Vascular Surgery Is An Undervalued Specialty: How Can We Fix The Problem
Animesh Rathore, MD

3:18 – 3:24 **Panel Discussion**

3:25 – 3:36 **Break – Visit Exhibits And Pavilions (2nd and 3rd Floors)**

SESSION 15 (Grand Ballroom West, 3rd Floor)

PROGRESS IN THE TREATMENT OF RENAL AND VISCERAL ARTERY DISEASE

Moderators: ***Randall DeMartino, MD***
Paulo E. Ocke Reis, MD, PhD
James C. Stanley, MD

3:36 – 3:41 Update On Median Arcuate Ligament Syndrome (MALS): What Is Its Non-Vascular Pathogenesis: How Is It Best Diagnosed And Treated - By Laparoscopy, By Open Surgery: Is Celiac Axis Stent Or Bypass Ever Justified
Benjamin W. Starnes, MD

3:42 – 3:47 Advantages Of A New Covered Stent (Revello From BD) For Complex Iliac Occlusive Disease: From The AGILITY Study
Sean P. Lyden, MD

3:48 – 3:53 Isolated Dissection Of The Celiac Axis Or Superior Mesenteric Artery (SMA) May Be Symptomatic Or Asymptomatic: Natural History And When Is Anticoagulation Or Invasive Treatment Needed
I-Hui Wu, MD, PhD

3:54 – 3:59 Current Optimal Treatment Of Gastroduodenal And Pancreaticoduodenal Artery Aneurysms In Patients With Occlusion Of The Celiac Axis: Open Or Endovascular
Keith D. Calligaro, MD

4:00 – 4:05 Management Of Chronic Complex SMA Athero-Occlusive Disease: When Open; When Endo; When Retrograde Open Mesenteric Stenting (ROMS): Technical Tips And Results
Salvatore Scali, MD

4:06 – 4:11 When Is Open Surgery Needed To Treat Long Complex SMA Occlusions: Technical Tips On How To Do It
Armando Mansilha, MD, PhD

4:12 – 4:17 Current Diagnosis And Treatment Of Acute Mesenteric Ischemia: When Endo, When Open, When ROMS: What Is The Value Of Angiography
Timur P. Sarac, MD

4:18 – 4:23 Treatment Of Pediatric Renal Artery Aneurysms: The Importance Of Open Surgical And Endovascular Interventions And What Is The Best Arterial Graft For Use In Pediatric Patients
James C. Stanley, MD

4:24 – 4:29 Current Role Of Renal Artery Angioplasty And Stenting: In View Of The RCT Data When Is It Justifiably Indicated
Robert A. Lookstein, MD, MHCDL
Michael R. Jaff, DO

4:30 – 4:35 Natural History Of Visceral Aneurysms: Renal, Splenic, Celiac: Some Thoughts On Optimal Treatment
Caron B. Rockman, MD

4:36 – 4:42 **Panel Discussion**

SESSION 16 (Grand Ballroom West, 3rd Floor)

PROGRESS IN THE TREATMENT OF AORTIC COARCTATIONS; EXPERT TECHNICAL SKILLS FOR OPEN VASCULAR OPERATIONS AND EXPOSURE FOR ANTERIOR SPINE OPERATIONS

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

NEW DEVELOPMENTS IN THE TREATMENT OF AORTIC COARCTATION

4:42 – 4:47 Techniques And Long-Term Outcomes Of Endovascular Repair For Post-Coarctation Surgery Aneurysm
Colin D. Bicknell, MD

4:48 – 4:53 Experience With The Gore TBE (Thoracic Single Branched Endograft) For Treatment Of Recurrent Aortic Coarctation Or Aneurysm Formation: Technical Tips
Bernardo C. Mendes, MD

4:54 – 4:59 Long-Term Results Of Covered Stents To Treat Coarctation Of The Aorta: Value Of The Aortic BeGraft Stent-Graft (Bentley): How To Deal With Complications
Elchanan Bruckheimer, MBBS

OPEN VASCULAR SURGERY

5:00 – 5:05 When Are Complex AAAs Best Treated With Open Surgery: Technical Tips To Make These Operations Simpler And Safer
Audra A. Duncan, MD

5:06 – 5:11 Role And Indications For Open Vascular Surgery To Treat Standard And Complex AAAs Including TAAAs When EVAR And F/B/EVAR Are Available: Who Should Be Doing The Open Procedures And When Are They The Best Treatment
Francis Caputo, MD

5:12 – 5:17 The Right Retroperitoneal Approach For Open AAA Repair: When To Do It, Advantages And Technical Tips
Ashraf Mansour, MD

5:18 – 5:23 Midline Transperitoneal Infra-Pancreatic Approach To The Visceral And Supra-Celiac Aorta: How To Do It And When: Advantages And Limitations
Jae S. Cho, MD

IMPROVEMENTS IN VASCULAR MANAGEMENT FOR ANTERIOR SPINE EXPOSURE

5:24 – 5:29 Minimal Incisions For Open Vascular Operations On The Aorta And For Anterior Spine Exposure: How To Do Them: Advantages And Limitations Of Small Incision Surgery
Robert M. Proczka, MD, PhD

5:30 – 5:35 Technical Tips For Advanced Spine Exposure Including Bilateral Approaches: Managing Unusual Complications And Venous Anomalies
Heron E. Rodriguez, MD

5:36 – 5:41 Technical Tips And Precautions For Safe And Effective Anterior Spine Exposure At Various Levels: What Hemorrhagic Complications Can Occur And How Are They Best Managed
Bernadette Aulivola, MD

5:42 – 5:47 Catastrophic Vascular Complications Of Anterior Spine Exposures; How To Avoid Them And How To Salvage The Situation If They Occur
William P. Robinson, MD

5:48 – 5:53 Anterior Lumbar Spine Exposures: Variation Of Standard Approaches, Tips, Tricks, And Tools For Dealing With Difficult Circumstances: Causes And Management Of Unexpected Venous Injury
Andrew H. Schulick, MD, MBA

5:54 – 6:00 **Panel Discussion**

End of Program B

PROGRAM C-1 (SESSIONS 17-18)

MANAGEMENT OF PULMONARY EMBOLISM (PE)

Trianon Ballroom, 3rd Floor

SESSION 17 (Trianon Ballroom, 3rd Floor)

MANAGEMENT OF PULMONARY EMBOLISM (PE) – PART 1

Moderator: Peter Monteleone, MD

7:00 – 7:10 Welcome And Introduction
Peter Monteleone, MD

7:10 – 7:15 Introduction To The Symposium
Kenneth Ouriel , MD, MBA
Frank J. Veith, MD

OVERVIEW AND UPDATES

7:15 – 7:25 Risk Stratification Of Acute Pulmonary Embolism: ESC 2019 vs. The 2026 Guidelines
Hillary Johnston-Cox, MD

7:25 – 7:35 Application Of The New Guidelines To A Large Healthcare Network
Nicolas Mouawad, MD

7:35 – 7:45 Counterpoint: "Too Little Too Soon": What The 2026 Guidelines Should Have Considered
Peter Monteleone, MD

7:45 – 7:55 **Panel Discussion**

IDENTIFICATION AND TESTING

7:55 – 8:05 CTA In PE: Foundational Use And Future Applications
Brian B. Ghoshhajra, MD, MBA

8:05 – 8:15 Testing For Cancer And Other Hypercoagulable States: When And How
Rachel Rosovsky, MD, MPH

8:15 – 8:25 Artificial Intelligence In The Future Of PE Care
Charles A. Taylor, PhD

8:25 – 8:35 Medical Treatment Of Acute PE In 2026: A Focus On Outlier Cases
Seanna R. Daves, MD

8:35 – 8:45 **Panel Discussion**

TOOLS AND CAVEATS (SEPARATE FROM CLINICAL TRIAL SCIENCE)

8:45 – 8:53 Mechanical Thrombectomy With The FlowTriever System: Strengths, Weaknesses, Caveats
Mitchell D. Weinberg, MD

8:53 – 9:01 Mechanical Thrombectomy With The Indigo System: Strengths, Weaknesses, Caveats
Robert A. Lookstein, MD, MHCDL

9:01 – 9:09 Mechanical Thrombectomy With The Angiovac/ Alphavac Systems: Strengths, Weaknesses, Caveats
Brian Stegman, MD

9:09 – 9:19 Safety And Effectiveness Of Laguna Thrombectomy System™ For Treatment Of Pulmonary Embolism: Outcomes From The TRUST Pivotal Study
Bhavraj Khalsa, MD

9:19 – 9:27 Complications In PE Mechanical Thrombectomy: Avoidance And Urgent Treatment
Samuel E. Horr, MD

9:27 – 9:35 Ultrasound-Assisted Thrombolysis With The EKOS Catheter: Strengths, Weaknesses, Caveats
Michael N. Young, MD

9:35 – 9:45 Avoiding Complications In Catheter-Delivered Thrombolysis: Dose, Monitoring And Concurrent Anticoagulation
Geno J. Merli, MD, MACP

9:45 – 9:55 **Panel Discussion**

9:55- 10:05 **Break – Visit Exhibits And Pavilions (2nd and 3rd Floors)**

SESSION 18 (Trianon Ballroom, 3rd Floor)

MANAGEMENT OF PULMONARY EMBOLISM (PE) – PART 2

Moderator: Peter Monteleone, MD

CLINICAL SCIENCE IN PULMONARY EMBOLISM TREATMENT

10:05-10:15 Clinical Trials In Mechanical Thrombectomy: Foundational And Future
Robert A. Lookstein, MD, MHCDL

10:15-10:25 The HI-PEITHO Landmark Analysis And The Next Steps In The Study Of CDT
Peter Monteleone, MD

10:25-10:35 Expanding Access: Disparities Of Care And Outcomes In PE Therapy
Eric A. Secemsky, MD, MSc

10:35-10:45 **Panel Discussion**

TREATING THE HIGHEST RISK PATIENTS

10:45-10:55 Predicting And Preventing Acute Decompensation In PE
F. Mae West, MD

10:55-11:05 ECMO-Assisted PE Therapies: When And How
Animesh Rathore, MD

11:05-11:15 IV Thrombolytic For PE In 2026: When, Where, How
Daniella Kadian-Dodov, MD

11:15-11:25 **Panel Discussion**

BEYOND THE ACUTE PULMONARY EMBOLISM

11:25-11:33 After The Storm: Considerations For Duration And Type Of Anticoagulation After Acute PE
Jessica C. Mintz, DO

11:33-11:41 Balloon Pulmonary Angioplasty For Chronic Thromboembolic Pulmonary Hypertension
Kenneth Rosenfield, MD

11:41-11:49 The Team Approach To PE Management: The National PERT Consortium
Rachel Rosovsky, MD, MPH

11:49-12:00 **Panel Discussion**
12:00- 1:00 **Lunch Break — Rhinelander Gallery, 2nd Floor**
Visit Exhibits And Pavilions (2nd and 3rd Floors)

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

Moderators: *Richard J. Powell, MD*
Vincent L. Rowe, MD
Michael S. Conte, MD

1:00 – 1:05 Amputation Rates In The US Are Rising Even Though Interventions For Ischemia Are Increasing: Why Is This So And What Can Be Done To Fix The Problem
Panos Kougjas, MD, MSc
Joseph L. Mills, MD

1:06 – 1:11 Technical Tips For Deep Venous Arterialization (DVA): To Make It Work What Are The Critically Important Aspects Of Care Which Start After The Procedure: Which Patients Should Get The Procedure And Which Should Not
Erwin Blessing, MD

1:12 – 1:17 Open vs. Endovascular Deep Venous Arterialization (DVA): Advantages And Limitations Of Each: How To Choose One Or The Other
Richard F. Neville, MD

1:18 – 1:23 Progress In The Value Of Stem Cell And Gene Therapies For CLTI: There Are New Developments Indicating That They May Be Helpful For "No Option" Patients: How Many Such Patients Still Exist: Update On The BioGenCell System
Richard J. Powell, MD
Michael S. Conte, MD
Yael Porat, PhD

1:24 – 1:29 Tissue Necrosis Persisting Despite A Patent Endovascular Intervention Can Be Healed By An Additional Bypass: What Is The Mechanism And The Experience
Hasan H. Dosluoglu, MD

1:30 – 1:35 Popliteal To Crural Or Pedal Bypass Even With Incomplete Plantar Arches Can Save Threatened Limbs Even After Failed Endovascular Treatments: Technical Tips
Francesco Spinelli, MD

1:36 – 1:41 What Is The Global Limb Anatomic Staging System (GLASS): How Can It Help To Plan Revascularization Strategies In CLTI Patients
Michael S. Conte, MD

1:42 – 1:47 Optimal Vessel Preparation For Various Lesions, Locations And Endo Treatments (Drug Coated Balloon [DCBs], Drug Eluting Stents [DESs], Uncoated Balloons, Intravascular Lithotripsy [IVL], Etc.): What About For In-Stent Restenosis (ISR)
Fabrizio Fanelli, MD

1:48 – 2:04 **Panel Discussion**

SESSION 20 (Trianon Ballroom, 3rd Floor)

MORE HOT NEW TOPICS RELATED TO LOWER EXTREMITY OCCLUSIVE DISEASE AND ITS TREATMENT – EVALUATING TREATMENT OUTCOMES WITH CLTI

Moderators: *Marianne Brodmann, MD*
Caron B. Rockman, MD
Jos C. van den Berg, MD, PhD

2:04 – 2:09 Despite BASIL-2 And BEST-CLI, Treatment Often Needs To Be Individualized For Each CLTI Patient: A Trans-Atlantic Delphi Consensus Document On CLTI Treatment Helps To Do It
Kosmas I. Paraskevas, MD

2:10 – 2:15 Marketing, Money, And Limb Salvage With SFA, Popliteal And Below-The-Knee (BTK) Endovascular Treatments Over The Past 25 Years: Is It A Good Thing For Patients, Doctors, Companies Or A Bad Thing Or Both: What Should Be Done To Fix This Part Of Our Health Care System
Michael H. Wholey, MD, MBA

2:16 – 2:21 Determining Fractural Flow Reserve During Infrainguinal Interventions: How To Do It And How It Can Be Helpful: From The FLOW-PAD Study
Konstantinos Katsanos, MSc, MD, PhD

2:22 – 2:27 Intra-Operative Graft Flow Measurement For Completion Control Of Infra-Inguinal Vein Grafts Predicts Their Prognosis: How To Do It And Does It Replace Or Supplement Angiography
Manju Kalra, MBBS

2:28 – 2:33 The Expanding Role Of PCSK-9 Inhibitor Drugs In Patients With Lower Extremity Atherosclerotic Occlusive Disease: What Drugs Are Available Or On The Horizon: When And How Should They Be Used In These And All Vascular Patients
Joseph Shalhoub, MBBS, PhD

2:34 – 2:39 Limus vs. Paclitaxel Drug Coating For Lower Extremity Devices: Advantages And Limitations Of Each Drug Depending On Lesion Location And Characteristics And The Device
Eric A. Secemsky, MD, MSc

2:40 – 2:45 Sirolimus DCBs For The Treatment Of Lower Extremity Lesions: What Are The Results From The SUCCESS Trial
Michael K.W. Lichtenberg, MD

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)

HOT NEW TOPICS RELATED TO LOWER EXTREMITY OCCLUSIVE DISEASE AND ITS TREATMENTS

Moderators: *Neal S. Cayne, MD*
Gary M. Ansel, MD
Dennis R. Gable, MD

3:00 – 3:05 Renal Failure Is Not A Contraindication To Limb Salvage In CLTI Patients: Endovascular And Open Treatments Are Justified Despite Increased Risks: For Long Lesion Multilevel Occlusive Disease Open Bypass Is Usually The Best Option
Vincent L. Rowe, MD

3:06 – 3:11 Deep Femoral And Pedal Punctures And Access Are Possible To Treat Lower Extremity Lesions: How To Do Them Safely And When Are They Useful
Lorenzo Patrone, MD

3:12 – 3:17 Crossing Uncrossable Chronic Total Occlusions (CTOs) Of Lower Limb Arteries With New Supporting And Crossing Catheters: What Are These Catheters And How To Use Them
Maria Antonella Ruffino, MD

3:18 – 3:23 CLTI Is Usually Associated With Small Artery Disease (SAD) And Medial Arterial Calcification (MAC): How Are These Conditions Defined And Diagnosed: How Should They Influence Our Treatments And Can They Be Overcome
Osamu Iida, MD, PhD

3:24 – 3:29 Why Intravascular Lithotripsy (IVL - Shockwave-J&J) Is A Game Changer In The Treatment Of BTK Vascular Lesions: What Is The Evidence, What Are The Indications And Techniques
Palma M. Shaw, MD, MBA, RPVI

3:30 – 3:35 Laser And Optics Based Intravascular Lithotripsy (SEISMIQ - Boston Scientific) System For The Treatment Of Below-The-Knee (BTK) Calcified Lesions: How Does It Work And Results Of The RESTORE BTK Trial
Michael K.W. Lichtenberg, MD

3:36 – 3:41 **Panel Discussion**

3:42 – 3:47 Advantages Of The Chocolate Wire Constrained Uncoated Balloon (From Medtronic) For Treating Popliteal And BTK Lesions Include Prevention Of Vessel Recoil And Dissections: Updated Results (From The CHOCO CABANA Trial)
Gunnar Tepe, MD

3:48 – 3:53 **DEBATE:** Endovascular Treatment Of Common Femoral Artery (CFA) Bifurcation Lesions Should Be The Intervention Of Choice: What Is The Eiffel Tower Technique: What Vessel Prep Should Be Used And What Results Can Be Achieved
Yann Gouëffic, MD, PhD

3:54 – 3:59 **DEBATE:** Not So: Why Endarterectomy Is Still The Best Approach For All CFA Lesions Needing Invasive Treatment
Timur P. Sarac, MD

4:00 – 4:05 A Modified Technique For Patchless Deep Femoral Profundaplasty In The Endovascular Era: It Can Facilitate Future Endovascular Access
Gabriele Maritati, MD

4:06 – 4:11 **DEBATE:** Limb Preservation Services/Centers: Why They Improve Care And Save Limbs And Lives: How To Put One Together
Niten Singh, MD

4:12 – 4:17 **DEBATE:** Not So Fast: Centralizing CLTI Treatment In Centers Can Limit Access To High Quality Care And Lead To Poorer Outcomes
Jonathan R. Boyle, MD, MA (Cantab)

4:18 – 4:23 **Panel 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
Venita R. Chandra, MD

4:24 – 4:29 Value Of Intravascular Lithotripsy (IVL Shockwave - J&J) For Treatment Of CLTI For BTK Lesions: What Does New Data Show: Technical Tips
Venita R. Chandra, MD

4:30 – 4:35 Why And When Clot Aspiration With The BOLT 7 Device (Penumbra) Should Precede Endovascular Treatments For CLTI: Technical Tips
Frank R. Arko, MD

4:36 – 4:41 An Algorithm For Crossing And Treating Uncrossable Lower Extremity Lesions Including Long CTOs: How To Do It Successfully
Erwin Blessing, MD
Stefan Müller-Hülsbeck, MD

4:42 – 4:47 What Is The Woundosome Concept, How Is It Different And More Important Than The Angiosome Concept To Achieve Wound Healing
Lorenzo Patrone, MD

4:48 – 4:53 Antegrade SFA vs. Pedal Access: Technical Tips And When To Use Each: Value Of Ultrasound Guidance
Todd Berland, MD

4:54 – 4:59 Influence Of Various Endovascular Treatment Techniques On Outcomes In The BEST-CLI RCT: It Made A Difference
Alik Farber, MD, MBA
Matthew T. Menard, MD
Kenneth Rosenfield, MD

5:00 – 5:05 When Is Delay In Revascularization Beneficial For CLTI With Diabetic Foot Ulcer And When Is Delay Harmful
Katariina M. Noronen, MD, PhD

5:06 – 5:11 **Panel Discussion**

5:12 – 5:17 With Endovascular Treatments For CLTI, Does Single-Vessel Or Multi-Vessel Revascularization Yield Better Results
Jos C. van den Berg, MD, PhD

5:18 – 5:23 A New Multifunctional Catheter For Crossing Complex Lower Extremity CTOs And IVL Is Possible For Lesions At Or Below The Ankle: What Are The Results
Gianmarco de Donato, MD

5:24 – 5:29 After Invasive Treatment For CLTI In One Limb, Adverse Ischemic Limb Events In The Contralateral Limb Are Common: This Requires Careful Observation And Often Invasive Treatment: Data From The Japanese SPINACH Trial
Nobuyoshi Azuma, MD *(PowerPoint Presentation With Synched Audio)*

5:30 – 5:35 Machine Learning Analysis (AI) Of Angiographic Contrast Washout Postoperatively Can Predict Bypass Patency
Carlos Alberto Figueroa, PhD

5:36 – 5:41 The ArtAssist Intermittent Compression Device Can Help With Microvascular Recruitment And Improve Results With Deep Vein Arterialization (DVA) In No Option CLTI Patients: Technical Tips And Results
Sherif A.H. Sultan, MD, PhD

5:42 – 5:47 Critical Evaluation Of Platelet Rich Plasma For The Treatment Of Diabetic Foot Ulcers: Does It Really Work And How To Use It
Carlo Setacci, MD *(PowerPoint Presentation With Synched Audio)*

5:48 – 5:53 Mid-Term Outcomes Of Hybrid Revascularization Techniques For Complex Multi-Level Lower Limb Arterial Disease Causing CLTI: When And Why Is It Superior To Other Techniques
Hany M. Zayed, MD

5:54 – 5:59 **Panel Discussion**

End of Program C-2

WEDNESDAY, NOVEMBER 18, 2026

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
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
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
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 TREATMENT OF LOWER EXTREMITY OCCLUSIVE DISEASE, CLTI AND THEIR MEDICAL TREATMENT: SOME NEW CONCEPTS

Moderators: *Enrico Ascher, MD*
Andrej Schmidt, MD
Christopher K. Zarins, MD

6:52 – 6:57 What Are The Best Medications To Improve Patency Of Bypass Grafts And Endovascular Treatments: Good Blood Pressure Control Improves Amputation Free Survival After Lower Extremity Revascularization Procedures: What Is The Mechanism
Peter Henke, MD

6:58 – 7:03 When And How Do Prior Endovascular Treatments Worsen The Possibility For A Successful Lower Extremity Bypass: How To Prevent This Problem
Jeffrey J. Siracuse, MD, MBA

7:04 – 7:09 When And How Important Is The Urgency Of Revascularization In CLTI Patients: What Can We Learn From The UK NHS
Michael S. Conte, MD

7:10 – 7:15 An Interventional Cardiologist's Perspective On The Primary And Secondary Outcomes Of BEST-CLI: Why Does It Differ From That Of Most Vascular Surgeons
Kenneth Rosenfield, MD

7:16 – 7:21 How Should Patient Age Impact The Choice Of Bypass vs. Endovascular Therapy For CLTI: An Analysis Of Outcomes In The BEST-CLI Trial According To Patient Age
William P. Robinson, MD

7:22 – 7:27 With CLTI Patients Silent Coronary Ischemia Is Deadly: Coronary CT Angiography And FFR_{CT} (Heartflow) Facilitates Detection And Treatment Of High Risk Coronary Plaques Which Decreases Mortality As Shown By An RCT: The Coronary Intervention Can Precede Or Follow The Lower Extremity Procedure
Dainis K. Krievins, MD
Christopher K. Zarins, MD

7:28 – 7:33 How Prevalent Is Thrombus In CLTI: What Is Its Impact, How To Detect It And Should It Influence Treatment
Gary M. Ansel, MD

7:34 – 7:39 Pave And Crack Technique For Extremely Calcified Femoropopliteal CTOs: Long-Term Results And Technical Tips
Andrej Schmidt, MD

7:40 – 7:45 The Importance Of Lesion/Vessel Prep Before Endovascular Treatments: It May Differ For POBA, DCBs, Uncoated Stents, DESs, Atherectomy, Etc: Technical Tips And New Findings
Erwin Blessing, MD

7:46 – 7:53 **Panel Discussion**

SESSION 24 (Grand Ballroom East, 3rd Floor)

NEW DEVELOPMENTS IN ATHERECTOMY, INTRAVASCULAR LITHOTRIPSY AND STENTS

Moderators: *Craig M. Walker, MD*
Ramon L. Varcoe, MBBS, MS, PhD, MMed
Peter A. Schneider, MD

PROGRESS IN ATHERECTOMY AND IVL

7:53 – 7:58 Revisiting The Value And Limitations Of Lower Extremity Atherectomy: Lessons Learned From The BEST-CLI RCT: When Is Atherectomy Justified And When Not
Caitlin W. Hicks, MD, MS

7:59 – 8:04 The Available Atherectomy Devices: Which One Is Best For What Lesions: What Is The Solid Evidence That Atherectomy Is Effective: From A Systematic Review And Meta-Analysis
Eric A. Secemsky, MD, MSc

8:05 – 8:10 Optimal Treatment For Calcified FemPop Lesions: Why Intravascular Lithotripsy (IVL - Shockwave-J&J) And When Aperta High Pressure PTA Balloons (Braun): What About Atherectomy - Their Limitations And Advantages
Craig M. Walker, MD

8:11 – 8:16 New Insights Into Shockwave's Intravascular Lithotripsy Mechanism Of Action
Andrew Holden, MBChB

8:17 – 8:22 Treating Acute And Subacute Lower Extremity Occlusive Lesions With The Rotarex Device: How Does It Work To Remove Clot And Atheromatous Material: Results From A Systematic Literature Review And Meta-Analysis
Michael K.W. Lichtenberg, MD

8:23 – 8:28 Advantages And Limitations Of Supera Vasculomimetic (VMI Stents From Abbott) For Complex FemPop Occlusive Lesions: They Even Work In The Subintimal Position: When And Why Are They The Best Treatment
Erwin Blessing, MD

8:29 – 8:34 Long-Term Results With The Vasculomimetic, Interwoven Supera Stent (Abbott) To Treat Occlusive Disease In The Aorta, Iliac And Other Tortuous Arteries: Advantages And Limitations: When Should It Be The Preferred Treatment
Rajiv Parakh, MBBS, MS

8:35 – 8:40 New Evidence That The BioMimics 3D Spiral Flow Stents (From Veryan Medical) Have Patency Results Equal To DESs: How Does It Work
Robert E. Beasley, MD

8:41 – 8:46 Updated 4-YEAR Results With The Spur Spiked Temporary Stent System (Reflow Medical) Followed By DCB Angioplasty, And As Definitive Treatment: Data From The DEEPER OUS And DEEPER REVEAL Trials
Thomas Zeller, MD
Anahita Dua, MD, MS, MBA
Sean P. Lyden, MD
Michael K.W. Lichtenberg, MD

8:47 – 8:53 **Panel Discussion**

SESSION 25 (Grand Ballroom East, 3rd Floor)

LOWER EXTREMITY TOPICS RELATED TO BTK LESION, DCBs AND STENTING – ESPECIALLY NEW BIORESORBABLE

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

8:53 – 8:58 Bioabsorbable Stent Scaffolds: Everything You Need To Know
Eric A. Secemsky, MD, MSc

8:59 – 9:04 Long-Term Results Of The Esprit (Abbott) Drug Eluting Resorbable Stent (DERs) In The LIFE-BTK RCT Comparing It With Plain Old Balloon Angioplasty (POBA): This And Other Trials (Pre- And Post-Approval) Show That DERSs Make A Difference
Ramon L. Varcoe, MBBS, MS, PhD, MMed
Sahil A. Parikh, MD
Brian G. DeRubertis, MD
D. Christopher Metzger, MD

9:05 – 9:10 3-Year Results Of The Magnitude Sirolimus Eluting Bioresorbable Stent (From R3 Vascular): For BTK Lesions: How Does It Compare With Other Treatments: When To Use Intravascular Lithotripsy (IVL Shockwave-J&J) To Prep Or Treat BTK Lesions
Marianne Brodmann, MD

9:11 – 9:16 Other BTK Resorbable Stent Platforms Including A Sirolimus Coated One From R3 Vascular: What Will Be The Impact Of BTK DRSs And How Will Vessel Prep Differ With BTK Bioresorbable Stent Platforms
Sahil A. Parikh, MD

9:17 – 9:22 Bioresorbable Magnesium Scaffold (Stent) – (From Biotronik) To Treat Lower Extremity BTK Lesions: Current Status, Advantages And Limitations
Ron Waksman, MD

9:23 – 9:28 How Does The LIFE BTK Study With Esprit Bioresorbable DERs (From Abbott) Change The BEST-CLI Conclusions For BTK Lesions
Lawrence A. Garcia, MD

9:29 – 9:34 The BeBack Catheter (Bentley): A Unique Crossing And Re-Entry Device For Multiple Intraluminal Or Subintimal Endovascular Treatment Options: How Does It Work; What Makes It Different And Advantages
Andrej Schmidt, MD

9:35 – 9:40 With The Good Results Of The DERSs: After Their Approval What Unmet Needs In The Treatment Of BTK Disease Remain To Be Met
Brian G. DeRubertis, MD

9:41 – 9:46 The Role Of Everolimus (Xience – Abbott) And Other Nonabsorbable Coronary DESs To Treat Infrapopliteal BTK Lesions (Short, Long, In Vein Grafts, And For Bailout): What Will It Be When DERSs Are Available
Robert A. Lookstein, MD, MHCDL
Christopher J. Abularrage, MD
Yann Gouëffic, MD, PhD

9:47 – 9:52 Update On DCBs For BTK Angioplasty Including A RCT Comparison Of A Sirolimus DCB (Magic Touch – Concept Medical) vs. A Paclitaxel DCB (Lithos – Acotec): There Will Always Be A Role For DCBs And POBA Even With The Good Results With DERSs: What Will It Be
Dierk Scheinert, MD

9:53 – 9:59 **Panel Discussion**

10:00-10:12 **Break – Visit Exhibits And Pavilions (2nd and 3rd Floors)**

SESSION 26 (Grand Ballroom East, 3rd Floor)

NEW DEVELOPMENTS IN DRUG COATED BALLOONS (DCBs) AND DRUG ELUTING STENTS (DESs): UPDATES ON PACLITAXEL TOXICITY, RANDOMIZED CONTROLLED TRIALS (RCTs) AND BTK LESION TREATMENTS WITH DCBs AND DESs

Moderators: *Marianne Brodmann, MD*
Dierk Scheinert, MD
Sean P. Lyden, MD

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

10:12-10:17 Although Paclitaxel Coated Devices Confer No Increase In Mortality Rates, They Still May Increase Amputation Rates When Used To Treat CLTI Patients: What Mechanism May Be Responsible
Konstantinos Katsanos, MSc, MD, PhD

10:18-10:23 Higher Amputation Rates From Paclitaxel Coated Devices May Be A Methodological Artifact But May Be Real: Paclitaxel Coating Has Other Bad Effects (Embolization Or Post Atherectomy Aneurysm): The SWEDEPAD 2 Study Showed No Paclitaxel Benefit And Possibly Increased Mortality: So When Should Paclitaxel Coated Devices Be Used And When Not
Peter A. Schneider, MD

10:24-10:29 Comparative Long-Term Outcomes With DESs And DCBs To Treat FemPop Lesions: Unique Observations After 2-12 Years In 1000 Patients: What Is The Best Technique For Vessel Preparation
Fabrizio Fanelli, MD

10:30-10:35 Treatment Of FemPop Lesions With DCBs vs. DESs: Findings From A 3-Year Propensity Score-Matched Analysis: Which Device Is Best And When: A Novel Method For Preventing Distal Emboli During Endovascular Treatments: The Flow-Controlled Anti-Embolic Technique
Osamu Iida, MD, PhD

10:36-10:41 Systematic Review And Meta-Analysis Of FemPop Endovascular Treatments With DESs, DCBs, Covered Stents And Bare Metal Stents (BMSs): When Is Each Best And Which Gives The Best Quality Of Life: What Is The Hard Evidence
Yann Gouëffic, MD, PhD

10:42-10:47 Comparative Long-Term Performance Of Zilver PTX (Cook) And Eluvia (Boston Scientific) DESs For FemPop Disease: Both Are Effective: Advantages And Limitations Of Each Regarding Cost And Need For Redo Procedures
Charles J. Bailey, MD
Jean Bismuth, MD

10:48-10:53 3-Year Results Of The SPORTS RCT Comparing DESs (Eluvia – Boston Scientific) vs. DCBs And BMSs: Which Treatment Is Best And In What Circumstances: Why Do DCBs Fail In TASC C And D Lesions
Gunnar Tepe, MD

10:54-10:59 Long-Term Results Of An RCT Comparing SurVeil DCBs (Surmodics) With In.Pact DCBs (Medtronic) For Treating FemPop Lesions: From The TRANSCEND Trial: How Do The Two Devices Differ
Peter A. Schneider, MD

11:00-11:05 Directional Atherectomy As Vessel Prep For DCB Use For FemPop Lesions: For Which Lesion Characteristics Is It The Best Treatment: What Is The Evidence For Its Superiority
Brian G. DeRubertis, MD
Thomas Zeller, MD

11:06-11:11 **Panel Discussion**

NEW DEVELOPMENTS IN THE ENDOVASCULAR TREATMENT OF BTK LESIONS

11:12-11:17 What's New And What's Next For The Treatment Of BTK Lesions: When Is POBA Still Acceptable And What About Drug Eluting And Non-Drug Eluting Devices, Resorbable Or Not
Lawrence A. Garcia, MD

11:18-11:23 Updated Results Of The DEBATE-BTK SHOCK And DUELL RCTs Evaluating The Value Of Lithotripsy (Shockwave-J&J) Prior To DCB Treatment For BTK Lesions: Deep Drug Release Is The Key To Success Of BTK Drug Eluting Treatments
Francesco Liistro, MD

11:24-11:29 1-Year Good Patency, Wound Healing And Low Binary Restenosis Results Of The 3-French Compatible Microstent (From Micro Medical): They Compare Favorably With POBA For BTK Lesions: From The STAND RCT In CLTI Patients: Antegrade And Retrograde Insertions Are Possible
Robert E. Beasley, MD
Marco G. Manzi, MD

11:30-11:35 Late (5-Year) Good Results From The AcoArt II BTK DCB RCT Show Safety With No Increased Mortality And Improved Patency vs. POBA To Treat BTK Lesions
Francesco Liistro, MD
Wei Guo, MD

11:36-11:41 Updated Results Of The SELUTION4BTK RCT Comparing A Sirolimus-Coated DCB (From Cordis/ Medalliance) With POBA For BTK Lesions: Primary Results Of The SELUTION4SFA Trial Show Its Value
Patrick J. Geraghty, MD
Marianne Brodmann, MD
George L. Adams, MD

11:42-11:47 The SWEDEPAD 2 Study: What It Tells About The Value And Risks Of Paclitaxel Coated Devices and How Intermittent Claudication Should Be Treated: What It Doesn't Tell Us And What Questions Does It Raise
Christian A. Behrendt, MD

IMPROVED TECHNIQUE FOR DEEP VENOUS ARTERIALIZATION (DVA)

11:48-11:53 Improved Hybrid Technique For DVA: In Situ Open Saphenous Vein Bypass From Popliteal Artery To A Foot Vein With Duplex Guided Saphenous, Foot And Toe Vein Le Maitre Valvulotomy And Branch Coiling: Other Tips To Get Good 10-Year Results
Marco G. Manzi, 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 27 (Grand Ballroom East, 3rd Floor)

PROGRESS IN EXOTIC AND EXTREME NEW TREATMENTS FOR VERY DISTAL LOWER EXTREMITY DISEASE CAUSING ADVANCED CLTI: OPTIONS TO SAVE THE "NO OPTION FOR TREATMENT" LIMB AND THE "DESERT FOOT"

Moderators: *Patrick J. Geraghty, MD*
Marco G. Manzi, MD
Hasan H. Dosluoglu, MD

1:00 – 1:05 What Currently Is A No Option Or Desert Foot Before Or After Failed Endo Or Open Treatments: How Common Is It In CLTI Patients: With Better Arterial Imaging It Is Rare And Most Have An Option For Arterial Revascularization
Peter A. Schneider, MD

1:06 – 1:11 Extreme New Endovascular Treatments For Otherwise Untreatable "No Option" CLTI: Plantar Loop And Other Techniques: How To Do Them, Specialized Equipment And Results
Marco G. Manzi, MD

1:12 – 1:17 More Distal Angioplasty Can Salvage Some "No Option" Limbs: Below-The-Ankle Endo Interventions: Techniques, Devices And Should Balloons Be Drug Coated Or Not
Marianne Brodmann, MD

VALUE OF PROSTHETIC (PTFE) BYPASSES IN CLTI PATIENTS

1:18 – 1:23 Vein Grafts Have Limitations When Needed For Bypasses In CLTI Patients: What Are They And How Can They Be Overcome With Prosthetic Grafts: Based On A Study With 5-Year Follow-Up
Michel J. Bosiers, MD

1:24 – 1:29 Contemporary Systematic Review And Meta-Analysis Of Prosthetic Lower Extremity Bypass Outcomes: PTFE Bypasses ATK, BTK And Tibial Are Not So Bad And Have A Role For Limb Salvage
Peter A. Schneider, MD

1:30 – 1:35 Long-Term Multicenter Outcomes Show That Prosthetic (PTFE) Bypasses To Tibial And Peroneal Arteries Are Worthwhile
Heepeel Chang, MD
Hasan H. Dosluoglu, MD
Neal S. Cayne, MD
Richard F. Neville, MD
Frank J. Veith, MD

1:36 – 1:41 **Panel Discussion**

UPDATE ON DEEP VEIN ARTERIALIZATION (DVA) FOR CLTI

1:42 – 1:47 Understanding The DVA Mechanism Of Action For Desert Foot Is Key To The Development Of An Enduring Therapy: What We Know So Far From Hemodynamic And Angiographic Data
Peter A. Schneider, MD

1:48 – 1:53 Update On Surgical Deep Vein Arterialization In CLTI From The Pioneer Of DVA: Where Does It Stand And The Current Hemodynamic Information
Pramook Mutirangura, FRCS (Edinburgh)

1:54 – 1:59 Open DVA With A Prosthetic (PTFE) Graft: How To Do It And Make It Work: Advantages Over Endovascular Techniques
Richard F. Neville, MD

2:00 – 2:05 Results With LimFlow (Inari-Stryker) DVA Are Good Enough That There Are Few CLTI Patients That Are Truly "No Option" For Invasive Treatment (From The PROMISE Trials): What Are The Adjuncts That Contribute To Procedural Success: When Won't It Work
Anahita Dua, MD, MS, MBA
Daniel G. Clair, MD

2:06 – 2:11 Not So Fast: Results With DVA May Not Be As Good Universally As Reported In The PROMISE And Other Trials: DVA May Have Some Downsides Leaving Room For Other Treatments Of "No Option" CLTI Patients
Lars Stangenberg, MD, PhD
Marc L. Schermerhorn, MD

2:12 – 2:17 Long-Term 5-Year Experience With LimFlow DVA For CLTI: Optimal Case Selection, Technical And Post Procedure Pearls To Improve Results: Role And Methods Of Vein Branch Embolization
Steven Kum, MD *(PowerPoint Presentation With Synched Audio)*

2:18 – 2:23 Is LimFlow DVA A Durable Treatment: What Happens When The Arteriovenous Connection Thromboses: Are New Arterial Connections Recruited: After What Interval
Richard J. Powell, MD

2:24 – 2:30 **Panel Discussion**

SESSION 28 (Grand Ballroom East, 3rd Floor)

PROGRESS IN EVALUATING FOOT PERFUSION AFTER TREATMENT; NEW DEVELOPMENTS IN PROSTHETIC GRAFTS; STENT GRAFTS; PERCUTANEOUS ENDOVASCULAR BYPASSES; AND TREATMENT OF IN STENT RESTENOSIS (ISR)

Moderators: *Miguel F. Montero-Baker, MD*
Niten Singh, MD
Anahita Dua, MD, MS, MBA

2:31 – 2:36 Pedal Pulse Acceleration Time (PAT) And More Detailed Reliance On Toe Pressures To Evaluate Improved Foot Perfusion That Will Enable Wound Healing After Treatment Of CLTI: When Do These Techniques Indicate The Need For Further Interventions: Equipment Needed, How To Do And Interpret PATs
Maarit Venermo, MD, PhD

NEW CONCEPTS RE PTFE GRAFTS AND STENT-GRAFTS

2:37 – 2:42 In Centers With Skilled Endo And Open Operators, What Percentage Of CLTI Patients Will Need An Open Bypass As Their Primary Treatment: What Percentage At Some Time In Their Course: What Percentage Will Need A PTFE Graft Primarily Or Secondarily
Niten Singh, MD

PERCUTANEOUS FEMPOP BYPASSES

2:43 – 2:48 5+ Year Results With Percutaneous (PQ) Transvenous FemPop PTFE Bypasses (From Endologix): How Is It Done: Updated Results From The DETOUR Trials Compare Favorably To Open FemPop Bypasses: What Are The Limitations
Sean P. Lyden, MD
Dainis K. Krievins, MD
Lars Stangenberg, MD, PhD

2:49 – 2:54 Percutaneous Extravascular FemPop PTFE Bypasses Without Traversing The Vein: Technique And 8-Year Experience In >100 Patients: Others Are Doing The Procedure: Indications, Limitations And Pitfalls
Pierre G. Sarradon, MD
Jean Pierre Becquemin, MD

TREATMENT OF RESTENOSIS AFTER DCBs AND AFTER STENTING (ISR)

2:55 – 3:00 What Are The Best Treatment Options For Restenosis After DCBs And How They Differ From Those For Restenosis After Angioplasty And Stenting
Gunnar Tepe, MD

3:01 – 3:06 Comparative Performance Of Zilver PTX (COOK) And Eluvia (Boston Scientific) DESs With Regard To ISR And Its Treatment From The REAL ISR Study
Naoki Fujimura, MD, PhD

3:07 – 3:12 Atherectomy Followed By DCB To Treat Severe In-Stent Restenosis (ISR): Why Is Excimer Laser The Best Atherectomy Tool: Technical Tips And Late Results
Craig M. Walker, MD

3:13 – 3:23 **Panel Discussion And Break**
Visit Exhibits And Pavilions (2nd and 3rd Floors)

SESSION 29 (Grand Ballroom East, 3rd Floor)

LOWER EXTREMITY RCTs: NEW CONCLUSIONS PRO AND CON

Moderators: *Marco G. Manzi, MD*
Kenneth Rosenfield, MD
Frank J. Veith, MD

NEW FINDINGS AND INTERPRETATIONS FROM THE BIG RCTs

3:24 – 3:29 Summary Of The Primary Findings And Limitations In The BEST-CLI, BASIL 2 And Basil 3 RCTs
Michael S. Conte, MD

3:30 – 3:35 Findings And Interpretations From The BASIL 2 And BASIL 3 RCTs: What Are Their Strengths And Weaknesses
Matthew Popplewell, MD
Andrew W. Bradbury, MD

3:36 – 3:41 The Reason Why The Apparently Opposite Results From BEST-CLI And BASIL 2 RCTs Are Actually Consistent And Reflect Everyday Clinical Practice: As Shown By Results From A Large Multicenter Prospective Cohort Study
Christian A. Behrendt, MD

3:42 – 3:47 How Can We Understand And Best Use The Diverging Results Of The BEST-CLI, BASIL 2, And BASIL 3 RCTs For The Treatment Of CTLI Patients: How Can The SWEDEVASC Study HELP
Anders Wanhainen, MD, PhD

3:48 – 3:53 New Findings And Interpretations From Sub Analyses Of The BEST-CLI RCT: Do The Outcomes Change For Separate Specialties And Is Treating Multiple Involved Arteries Better Than Treating A Single Artery
Alik Farber, MD, MBA
Matthew T. Menard, MD
Kenneth Rosenfield, MD

3:54 – 3:59 If More Than One Crural Artery Is Stenotic In A CLTI Patient, Is It Better To Treat One Artery Or Multiple Arteries: What Does The Data Show
Lorenzo Patrone, MD

4:00 – 4:05 Some Other New Findings And Interpretations From Sub Analyses Of The BEST-CLI RCT: How Do They Relate To Real World Clinical Practice: Is More Than 1 Crural Artery Treatment Justified
Matthew T. Menard, MD
Alik Farber, MD, MBA
Kenneth Rosenfield, MD

4:06 – 4:11 The Impact Of Prior Endovascular Failure On Subsequent Open And Endo Treatment Outcomes In The BEST-CLI RCT: It's Not Good
Richard J. Powell, MD

4:12 – 4:17 What New Conclusions Can Be Reached By Combining The Data From BEST-CLI And BASIL Trials: When Are They Applicable And When Are They Not
Alik Farber, MD, MBA
Andrew W. Bradbury, MD
Matthew T. Menard, MD
Kenneth Rosenfield, MD

4:18 – 4:23 Why CLTI Patients At Many Hospitals Could Not Be Included In The BEST-CLI Trial: Why This Weakens The Trial's Conclusions And Make Them Non-Applicable To Much Real-World Practice: What To Do About It
Niten Singh, MD

4:24 – 4:31 **Panel Discussion**

SESSION 30 (Grand Ballroom East, 3rd Floor)

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

Moderators: ***Alik Farber, MD, MBA***
Alexandra N. Ascher, MD, RPVI, RVT
Caitlin W. Hicks, MD, MS

INTERMITTENT CLAUDICATION (IC)

4:32 – 4:37 Drug Treatment With GLP-1 Receptor Agonists (Ozempic, WeGovy, Etc.) Can Increase Walking Ability And ABIs In Diabetics With IC: From The STRIDE RCT
Caitlin W. Hicks, MD, MS

4:38 – 4:43 The Epidemic Of Lower Extremity Interventions For Intermittent Claudication Is Unnecessary And Harmful: Who Is Responsible And Why: What Can And Should Be Done About It And By Whom
Dipankar Mukherjee, MD

4:44 – 4:49 Perfusion Measurements To Detect Muscle Perfusion In Claudicants Are More Accurate In Assessing Severity Than Walking Tests: How Is This Test Performed And How Can It Be Used To Select Patients For Invasive Treatment
Werner Lang, MD

4:50 – 4:55 Physiologic Testing Can Determine Disease Severity In IC: How Is It Performed And How Can It Help Determine When Invasive Treatment Is Justified
Caitlin W. Hicks, MD, MS

4:56 – 5:01 How Can AI Predict Rapid Disease Progression In Patients With Intermittent Claudication Using Electronic Health Record Data: How Should This Influence Treatment
Bijan Modarai, PhD, FRCS

5:02 – 5:07 With IC Short Chronic Occlusions (CTOs) <5cm When Treated Endovascularly Are Associated With Poor Outcomes: How Should This Influence Therapeutic Decisions
William P. Robinson, MD

5:08 – 5:13 **Panel Discussion**

NEW DEVELOPMENTS IN TREATMENT OF ACUTE LIMB ISCHEMIA (ALI) (See Also Session 63)

5:14 – 5:19 Endovascular Arterial Thrombo-Embolectomy Devices: Percutaneous Mechanical Thrombectomy: What's The Difference Between Them: Penumbra, AngioJet, Pounce, Artix, Rotarex, Jeti, Aventus, Excipio, Prodigy, Symphony, Versalio, Etc.: What's Coming Down The Road
Loay S. Kabbani, MD, MHSA

5:20 – 5:25 New Developments And Devices To Treat ALI: How Do The Newer Devices Work: What Is The Current Need For Thrombolytics: When Is Open Treatment Or A Bypass Necessary
Patrick E. Muck, MD

5:26 – 5:31 Open Surgery Is Still Effective And May Be The Best Treatment For ALI Because Emboli And Thrombosis Are Usually Superimposed On Underlying Arteriosclerosis: From The PROMOTE-ALI Study
Katariina M. Noronen, MD, PhD

5:32 – 5:37 Updated Findings From The STRIDE Multicenter Trial Shows That Mechanical Computer Assisted Suction Thrombectomy With The Indigo Aspiration System (Penumbra) Is Safe And Effective Treatment For All Causes Of ALI: When Was Angioplasty, Stenting Or Bypass Necessary
Thomas S. Maldonado, MD

5:38 – 5:43 What Is New With Penumbra Indigo Clot Aspiration Systems: Improved Mechanical Catheter And Computer Based Clot Removal Indigo Systems: New Size Catheters For The Treatment Of Acute Arterial Clot: How The Systems Work And Why They Improve Clot Removal In Various Vascular Beds: Is Open Surgery Ever Needed
Frank R. Arko, MD
Charles J. Bailey, MD

5:44 – 5:50 **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 ANTI-ATHEROGENIC DRUGS AND LIPID MANAGEMENT

Moderators: *Caron B. Rockman, MD*
Ron Waksman, MD
Horst Sievert, MD

6:52 – 6:57 LDL-C Lowering Should Be Achieved In Which Patients During Their Lifetime: How Low A Level To Strive For With Drug Therapy: How Young To Start If High; How Old To Continue Statins: Should LDL-C Levels Be Titrated And How Often Should They Be Measured
Clayton J. Brinster, MD

6:58 – 7:03 How Does Rivaroxaban, An Antithrombotic Agent, Work In Vasculopathic Patients: Thrombosis Is Involved In Strokes, MIs And ALI: Rivaroxaban Decreased All These And Other Adverse Events In The VOYAGER And COMPASS RCTs: When And How Should This Drug Be Used
Caron B. Rockman, MD
Anthony J. Comerota, MD

7:04 – 7:09 Current Optimal Antiplatelet, Anticoagulation And Antithrombotic Treatment For Various Vascular Procedures In Various Vascular Beds: What Newer Drugs And DOACs Are Useful And What Is The Optimal Timing Of Treatment
Elliot L. Chaikof, MD, PhD

7:10 – 7:15 How To Prevent Postoperative Myocardial Infarctions (MIs) With Open Or Endovascular Interventions: What Tests, What Drugs, What Invasive Coronary Procedures Before Or After The Vascular Procedure
Peter Henke, MD

7:16 – 7:21 Arteriosclerotic Complication Risks Correlate With LDL Cholesterol (LDL-C) Levels: What Are The Best Medical Strategies To Decrease These Risks: Statins, Adjunctive LDL-C Lowering Drugs - Inclisiran, Bempedoic Acid, Ezetimibe, PCSK-9 Inhibitors, Lepodisiran, Colchicine, Olezarsen: How They Should Be Used And In Whom
Richard Bulbulia, MA, MD

7:22 – 7:27 Update On The New Anti-Atherosclerosis Drug (AtheroVax Or VERVE-102): A Drug To Produce Lifelong LDL-C Lowering With A Single Gene Modifying Treatment To Lower PCSK-9: The Heart-1 Gene-Editing And VERVE-102 Trials: How Does The Drug Work And Results To Date
Ron Waksman, MD

7:28 – 7:33 Beyond Statins And Other LDL-C Lowering Drugs: What New Drugs Are Being Developed To Modify The Molecular Mechanisms Underlying Carotid And Coronary Plaque Rupture
Hernan A. Bazan, MD

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
Horst Sievert, MD

UPDATE ON RENAL DENERVATION FOR HYPERTENSION

7:42 – 7:47 What Is The Definition Of Resistant Hypertension: How Should It Be Managed In 2026: Renal Denervation Works And Should Be Widely Available: What Is The Evidence And What Devices Are Proven Effective
Eric A. Secemsky, MD, MSc

7:48 – 7:53 Renal Artery Denervation Is Back: New Evidence; New Devices, New Applications And Adjuncts (Sensors And Feedback Loops) To Facilitate The Treatment: Why Does It Work And When Should It Be Used
Lindsay Machan, MD

OTHER TOPICS RELATED TO VASCULAR DISEASE AND ITS TREATMENT

7:54 – 7:59 Lowering LDL-C And Controlling Elevated Blood Pressure And Lipoprotein Little A [Lp(a)] With Mulvalapin And Zerlasiran 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

8:00 – 8:05 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 It Safely: What To Do With Urgent Or Emergent Cases To Avoid DES Thrombosis
Caron B. Rockman, MD

8:06 – 8:11 The Best Current Methods To Prevent Kidney Damage From Iodinated Contrast Agents: Are Any Drugs Truly Protective
Sahil A. Parikh, MD

8:12 – 8:17 How To Manage Postoperative Anemia After Major Vascular Surgery: What Hemoglobin Level Is Acceptable And When Should It Be Corrected By Transfusion
Panos Kougias, MD, MSc

8:18 – 8:23 Pulmonary Denervation: What Conditions Can Be Helped By It And How To Do It
Horst Sievert, MD

8:24 – 8:29 A Cardiologist's Response To The New Health Department Dietary Guidelines Featuring Meat And Dairy Products With More Saturated Fats: Will It Have A Detrimental Effect On Arteriosclerosis And Its Complications: Have We Been Given The Wrong Dietary Advice For Decades
Ron Waksman, MD

8:30 – 8:35 A Tribute To Bruce A. Perler, MD, MBA (1950-2006): An Icon In Vascular Surgery
Ali F. AbuRahma, 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)

A) PROGRESS IN MANAGING ENDOLEAKS: UNDERSTANDING THEIR CONSEQUENCES AND PREDICTING, PREVENTING AND TREATING THEM; B) DR. CYNAMON'S GAME CHANGING INNOVATIONS

Moderators: Luis A. Sanchez, MD
Mark W. Mewissen, MD, RVT
Jacques Busquet, MD

PART A: ALL ENDOLEAKS AFTER EVAR

8:54 – 8:59 Improving Endoleak Detection And Accurately Defining Their Source With Contrast Enhanced Sonography: Especially Valuable With Indeterminate Endoleaks On CTA: Equipment Needed And How To Do It
Thanila A. Macedo, MD

TYPE 1 ENDOLEAKS

9:00 – 9:05 How To Treat Type 1 Endoleaks After EVAR: When Cuff, When F/EVAR, When Chimney, When Open Conversion: What About Embolization
Andres Schanzer, MD

9:06 – 9:11 Current Status Of Embolization To Treat Type 1 Endoleaks After EVAR: Indications And Contraindications: How To Do It And Embolic Agents
Robert A. Morgan, MD

9:12 – 9:17 How To Minimize Gutter Type 1 Endoleaks With Chimney EVAR: How Does A Standard Protocol Help; How To Treat Them When They Occur
David J. Minion, MD

ENDOTENSION AFTER EVAR

9:18 – 9:23 The Mystery Of Post EVAR Endotension: What Causes It: When And How Is It Best Treated
Jacques Busquet, MD

9:24 – 9:29 **Panel Discussion**

TYPE 2 ENDOLEAKS AFTER EVAR

9:30 – 9:35 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

9:36 – 9:41 What Is A Moyamoya Type 2 Endoleak: Why Is It Best Treated By Open Operation: Poor Results With Endo Treatments Of Type 2 Endoleaks Should Mandate An Open Operation More Often When An Intervention Is Needed
Athanasios Katsargyris, MD

9:42 – 9:47 Glue Embolization Is Effective Treatment For Most Threatening Type 2 Endoleaks: When And How To Do It: How Can Fusion Help: Limitations And Incidence Of Failure And What To Do About It
Neal S. Cayne, MD

9:48 – 9:53 Transcaval Access To AAA Sacs For Treatment Of Type 2 Endoleaks After EVAR: When And How To Do It
Adam Beck, MD

9:54 – 9:59 Transgraft Treatment Of Type 2 Endoleaks After EVAR: When And How To Do It: Advantages: How To Make And Seal The Graft Puncture Site
James F. McKinsey, MD

10:00-10:05 Active AAA Sac Management With Shape Memory Polymers: They Can Be Placed Prophylactically Or To Treat Endoleaks And Improve Outcomes After EVAR: Technique And Updated Results (From The shAAApe And TOP SHAPE Trials)
Andrew Holden, MBChB
Michel Reijnen, MD, PhD
Marc L. Schermerhorn, MD

10:06-10:11 AneurFix Polymer Is A New Injectable AAA Sac Filling Agent To Prevent Or Treat Type 2 Endoleaks: Early Mid-Term Results And Advantages
Arjan W.J. Hoksbergen, MD, PhD
Michael J. Jacobs, MD, PhD

10:12-10:17 Another Novel Technology For Active AAA Sac Management: Life Seal Vascular's Cygnum Is Placed Outside An Endograft: The ASCEND Trial Shows It Minimizes Type 2 Endoleaks And Promotes Sac Stability: First In Human Study Shows 30-Day Safety And Mid-Term Efficacy
Sean P. Lyden, MD
Andrew Holden, MBChB

10:18-10:23 **Panel Discussion**

PART B: CYNAMON'S GAME CHANGING INNOVATIONS

Moderators: *Jacob Cynamon, MD*
Mark W. Mewissen, MD, RVT

10:24-10:29 Robotics In Interventional Radiology: The State-Of-The-Art In 2026
Ripal T. Gandhi, MD
Barry T. Katzen, MD

10:30-10:35 The Evolution And Variety Of Liquid Embolic Agents
Ziv J. Haskal, MD

10:36-10:41 Drug Eluting Balloons And Stents: From Concept To Market To Where We Are Today
Lindsay Machan, MD

10:42-10:47 Large Bore Thrombectomy Devices: From First Generation To Current Generation: What Has Changed
Ripal T. Gandhi, MD

10:48-10:53 Transvenous Liver Biopsies: From Dotter To Today
Jacob Cynamon, MD

10:54-11:00 **Panel Discussion**

SESSION 34 (Grand Ballroom West, 3rd Floor)

ISSUES IMPORTANT TO VASCULAR SURGEONS/ SPECIALISTS

Moderators: *Vikram S. Kashyap, MD*
Kim J. Hodgson, MD
Evan C. Lipsitz, MD, MBA

11:00-11:05 The Changing Face Of Vascular Surgery In The Post-Smoking Era: What Will Be The Role Of Vascular Surgeons And Aortic Vascular Surgeons
Michael P. Jenkins, MBBS, BSc, MS

11:06-11:11 What Is Implementation Science And What Should Vascular Surgeons/Specialists Know About It: Why It Will Be Important
Charles C. Miller, PhD

11:12-11:17 Sculpting The Future Of Vascular Surgery: Leading And Leaning Forward
Kenneth M. Slaw, PhD

VASCULAR SURGEONS IN A HEART AND VASCULAR CENTER

11:18-11:23 **DEBATE:** Why Heart And Vascular Centers Benefit All Stakeholders Including Vascular Surgeons: How To Assure That Vascular Surgery Has A Fair Role In Leadership And Allocation Of Resources
Vikram S. Kashyap, MD

11:24-11:29 **DEBATE:** In Current Heart And Vascular Centers, The Heart Dominates And Vascular Surgeons Are Often Undervalued And Subordinated: What Can We Do About It: Getting Our Own Independent Board Will Help
Malachi Sheahan, MD

ISSUES IMPORTANT TO VASCULAR INNOVATORS

11:30-11:35 Principles Physicians Need To Follow When Innovating Medical Devices: It's More Than Securing Intellectual Property: How To Make Your Pathway To Success
Gary M. Ansel, MD

UNIONIZATION FOR VASCULAR SURGEONS/ SPECIALISTS

11:36-11:41 **DEBATE:** Why Vascular Surgeons And Vascular Specialists Should Unionize: It Will Solve Many Of The Problems They Currently Face Due To Hospital Administrators And The Current Status Of Health Care
Enrico Ascher, MD

11:42-11:47 **DEBATE:** Unionization Is NOT The Best Strategy For Physician Autonomy And Promoting Optimal Healthcare Delivery: A Better Strategy Is For Vascular Physicians To Become Engaged In Hospital Administration To Make A Stronger Case For Their Interests
Samuel R. Money, MD, MBA

11:48-11:53 Why Vascular Surgeons/Specialists Must Participate In Hospital Management/Administration To Optimize Their Working Conditions And The Care They Provide
Gert J. de Borst, MD, 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 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

THE PLINIO ROSSI COMPONENT

1:00 – 1:05 Introduction
Fabrizio Fanelli, MD

1:05 – 1:15 No One Size Fits All
Hany M. Zayed, MD

1:15 – 1:25 Infrarenal Aortic Total Occlusion Treated By Endovascular Revascularization And Unibody Endograft Placement
Pasqualino Sirignano, MD, PhD

1:25 – 1:30 Q & A

THE LINC COMPONENT

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

1:30 – 1:32 Introduction
Dierk Scheinert, MD

1:32 – 1:46 Real-World Application Of Bioresorbable Scaffold: What Is Doable And What Is On The Horizon
Tim Wittig, MD

1:46 – 1:59 The Value Of Crossing- And Reentry-Catheter For Complex BTK-CTOs Recanalization
Andrej Schmidt, MD

SESSION 36 (Grand Ballroom West, 3rd Floor)

MORE ISSUES IMPORTANT IN VASCULAR SURGERY: HISTORY, HUMAN BEHAVIOR, VALUE OF GUIDELINES, MALPRACTICE, PRACTICE PATTERNS, AND RCTs, SCIENCE AND TRAINING

Moderators: *Jack L. Cronenwett, MD*
Jerry Goldstone, MD
Michael C. Stoner, MD

IN MEMORIAM AND VASCULAR HISTORY

2:00 – 2:05 A Tribute To Tom Fogarty: Innovator, Icon, Iconoclast
Jerry Goldstone, MD

2:06 – 2:11 Alexis Carrel: Pioneer Or Thief: A Look At A Surgeon Who Got The Noble Prize
Peter F. Lawrence, MD

2:12 – 2:17 Charles T. Stent: The Story Of A 19th Century London Dentist Whose Name Was To Encapsulate Technological Innovation In Modern Cardiovascular Treatment: How Was His Name Attached To Stents
Frank J. Criado, MD

THE IMPORTANCE AND CONSEQUENCE OF BIASES

2:18 – 2:23 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

2:24 – 2:29 Professional Society Guidelines: How Are They Influenced By Group/Specialty Biases: How Well Are They Followed: What Benefits Or Harm Do They Provide
Jens Eldrup-Jorgensen, MD

2:30 – 2:35 How Vascular Guidelines Can Be Used To Support Unjustified Malpractice Claims: What Can Be Done About It
Larry A. Scher, MD

2:36 – 2:41 After CREST 2, Could A Physician Be Vulnerable To A Malpractice Suit For Performing A CEA Or Giving Only Medical Treatment In A Patient With A High Grade Asymptomatic Carotid Stenosis: How To Guard Against It
O. William Brown, MD, JD

2:42 – 2:47 **Panel Discussion**

ISSUES RELATING TO EVIDENCE-BASED STUDIES AND RCTs

2:48 – 2:53 Flaws In RCTs And Evidence-Based Medical Studies: They Can Be Misleading Because Of Bias, Being Outdated, Statistical Mischief And Other Design Defects: RCTs May Be Good But They Are Not Always The Holy Grail
Frans L. Moll, MD, PhD

2:54 – 2:59 Vascular Surgeons/Specialists Need To Develop High Quality Evidence To Improve Care: Why And How To Do It: How Registry-Based RCTs Can Help: What Are They, Why Are They Different From And Better Than Standard RCTs
Jens Eldrup-Jorgensen, MD

AI AND ANOTHER ISSUE

3:00 – 3:05 How Artificial Intelligence Can Greatly Help A Vascular Practice: Ways It Works And How Do Machine Learning, Algorithmic Learning And Enhanced Reality Fit In
Benjamin S. Brooke, MD, PhD

3:06 – 3:11 Despite What Many Organizations And Institutions Say, Most Partnerships And Close Relations Between Industry And Physicians Are Ethical, Benefit Society, Save Lives, And Improve The Healthcare System: It's Common Sense
Samuel R. Money, MD, MBA

3:12 – 3:17 **Panel Discussion**

3:18 – 3:28 **Break – Visit 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 – THE EHR FIASCO AND GENDER DIFFERENCES; ISSUES RELATED TO OUTPATIENT CENTERS OR OFFICE-BASED LABS (OBLs) AND AMBULATORY SURGERY CENTERS (ASCs)

Moderators: Krishna Jain, MD
Malachi Sheahan, MD
Jerry Goldstone, MD

3:28 – 3:33 The Current Electronic Health Care System (EHR) Has Many Problems And Is A Great Time Waster For Physicians: Some Call It A Technical Nightmare: Can It Be Fixed And: How Can AI Help
Leila Mureebe, MD

3:34 – 3:39 Women Have Worse Outcomes Than Men When They Are Treated For Aortic And Lower Extremity Arterial Disease: Why Is This So And What Can Be Done To Remedy The Deficiencies That Exist
Linda M. Harris, MD

ISSUES RELATED TO OBLs AND ASCs

3:40 – 3:45 The Endovascular Revolution Is Associated With Unnecessary And Inappropriate Treatments Often In Outpatient Facilities: What Are The Causes And What Can Vascular Surgeons And Other Specialists Do About It
Russell H. Samson, MD, RVT

3:46 – 3:51 What Will Happen In 2027 With Global Reimbursement For OBLs And Component Reimbursement In ASCs: How Will It Change Whether And Where Operators Should Do Procedures: How Will Reimbursement Suffer
Sean P. Roddy, MD

3:52 – 3:57 How Can Viable OBLs Be Maintained In The Coming Environment: For What Procedures In General And In CLTI: When And Why Is An ASC A Better Solution: What Are The Advantages And Limitations
Krishna Jain, MD

3:58 – 4:03 How Can OBLs Still Provide Good Vascular Care With Excellent Results, Be Profitable, Do Research: Why Must A Hospital Affiliation Be Mandatory
Mark A. Mattos, MD

4:04 – 4:09 How In 2026 And Beyond 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

4:10 – 4:15 How To Build An Outpatient Center Of Excellence Committed To The Treatment Of CLTI: When Is An OBL Better And When Is An ASC Better – For Patients, For Surgeons: What Are The Obstacles And Limitations
Miguel F. Montero-Baker, MD

4:16 – 4:21 Providing Good Care For Elderly Patients In An OBL: What Is Different; What Are The Dangers And What Extra Precautions Must Be Taken
Anil P. Hingorani, MD

4:22 – 4:28 **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; FDA IMPROVEMENTS; LEARNING HEALTH SYSTEMS

Moderators: *Sean P. Roddy, MD*
Anton N. Sidawy, MD, MPH
Evan C. Lipsitz, MD, MBA

VASCULAR REIMBURSEMENT ISSUES

4:28 – 4:33 What Is Happening With CPT Codes And Physician Reimbursement In Late 2026 And 2027: What's Good And What's Bad: Some Vascular Surgeons/Specialists Are Being Paid As Well As They Are Because Hospitals Are Supplementing Poor CPT Reimbursement With DRG Receipts: How To Negotiate For This
Sean P. Roddy, MD

4:34 – 4:39 Call Pay For Vascular Surgeons: Why 95% Take Call, But Only 20% Receive Compensation: How To Get Paid Or Receive Compensatory Time Off
Malachi Sheahan, MD

4:40 – 4:45 Update On The Merit Based Incentive Payment System (MIPS) For Value Based Reimbursement: How Does It And Other Value Based Reimbursement Systems Work For Vascular Surgeons: Are They Good Or Bad
Evan C. Lipsitz, MD, MBA

4:46 – 4:51 The Difference Between Reporting Standards, Practice Guidelines, And Appropriate Use Criteria: Why Does It Matter: When And How Can They Be Most Useful In Practice; In Research
Peter F. Lawrence, MD

VASCULAR QUALITY INITIATIVE (VQI) ISSUES

4:52 – 4:57 How VQI Registry Data Can Optimize DRG Coding For CEA And Lower Extremity Interventions: This Can Substantially Improve Revenue While Avoiding Medicare Audits: How Is AI Involved
Jack L. Cronenwett, MD

4:58 – 5:03 How To Use The VQI To Reduce Length Of Stay Following EVAR And CEA
Ronald L. Dalman, MD

5:04 – 5:09 **Panel Discussion**

VALUE OF VASCULAR SURGEONS AND QUALITY OF CARE ISSUES

5:10 – 5:15 The Roles Of Vascular Surgeons In Nonvascular Conditions Add Greatly To Their Value To An Institution And Other Specialties
Sateesh C. Babu, MD

5:16 – 5:21 Insurance Company Preauthorizations Delay Care, Compromise Clinical Quality And Outcomes And Increase Costs: How Surgical Societies Can Provide Solutions
Sean P. Roddy, MD

5:22 – 5:27 Update On The SVS/ACS Vascular Verification Program (VVP) To Assure Quality Vascular Care In Outpatient And Inpatient Programs: What Is It And How Will It Help Vascular Surgery
R. Clement Darling III, MD
Anton N. Sidawy, MD, MPH

IMPROVING VASCULAR SURGERY'S IDENTITY

5:28 – 5:33 The Importance Of Mentorship In Vascular Surgery: How Should We Be Telling Medical Students And Others What We Do And Our Critical Role To Patients And Most Other Specialties
Malachi Sheahan, MD

FDA RELATED ISSUES

5:34 – 5:39 Why Do We Not Have More FDA Approved Devices For F/B/EVAR In The US: Is The FDA Doing Its Job Or Failing
Murray L. Shames, MD

5:40 – 5:45 The Importance Of Communicating With The FDA Before Submitting An IDE Or Marketing Application: How To Do It: What Are The Advantages And Limitations
Dorothy B. Abel, BSBME

5:46 – 5:51 The FDA Is Doing Its Job: Why Does The FDA Evaluation And Time To Market For Endografts Take So Long: How To Expedite The Process With Breakthrough Fast Track And 510(k) Processes: Why Some IDEs Fail To Get FDA Approval
Valerie M. Merkle, PhD

5:52 – 6:00 **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

Trianon Ballroom, 3rd Floor

SESSION 39 (Trianon Ballroom, 3rd Floor)

MORE TOPICS RELATED TO THE THORACIC AORTA, AORTIC DISSECTIONS, LEFT SUBCLAVIAN ARTERY (LSA) AND FALSE LUMEN MANAGEMENT; SINGLE BRANCHED ENDOGRAFTS

Moderators: *Jason T. Lee, MD*
Timothy A. Resch, MD, PhD

6:50 – 6:55 Improved False Lumen Management In Chronic Aortic Dissections With A Novel Shape Memory Technology (The Impede Plug): How Does It Work And Experience To Date In The FLAGSHIP Trial
Andrew Holden, MBChB
Virendra I. Patel, MD, MPH

6:56 – 7:01 In-Situ Needle Fenestration For Endograft Treatment Of Various Thoracic Aortic Pathologies Involving The LSA: How To Do It, Advantages And Mid-Term Results
Marco V. Usai, MD

7:02 – 7:07 Role Of The Various Single Branched TEVAR Devices In Treating TBADs: What Are These Devices: What Are Their Advantages And Limitations And How Do They Compare With Custom Made (Scalloped) Devices
Michael P. Jenkins, MBBS, BSc, MS
Mo S. Hamady, MD

7:08 – 7:13 Prevention Of Cerebral Embolization During Aortic Valve And Arch Instrumentation By Promoting Aortic Flow Caudally From An Aortic Sheath Into A Femoral Venous Sheath: Experimental And Clinical Experience
Jason N. MacTaggart, MD
Juan C. Parodi, MD

7:14 – 7:19 **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
Andrea Kahlberg, MD
Germano C.G. Melissano, MD

7:20 – 7:25 **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: What Is The Role For STABILISE
Tilo Kölbel, MD, PhD
Fiona E.V. Rohlffs, MD, PhD

7:26 – 7:31 Double Candy Plug Technique For Managing False Lumen Problems With Chronic Aortic Dissections: Advantage, Limitations And Technical Tips
Raghu Motaganahalli, MD

7:32 – 7:37 Strategies For Persistent False Lumen Management In The Endovascular Treatment Of Complex Aortic Dissections: Including Custom Made Stent-Grafts
Cherrie Abraham, MD

7:38 – 7:45 **Panel Discussion**

SESSION 40 (Trianon Ballroom, 3rd Floor)

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

Moderators: Ross Milner, MD
Tilo Kölbel, MD, PhD

7:45 – 7:50 Current Consensus On Best Management Of Kommerell's Diverticula And Related Aortic Arch Anomalies: Indications, Techniques And Pitfalls
Frank J. Criado, MD

7:51 – 7:56 Expert Consensus From The ESVS On The Use Of TEVAR For Ascending Aortic Disease: Optimal Devices And Results For Complicated And Uncomplicated Aortic Dissections And Other Pathologies: When Is Endo Treatment Indicated And When Is Open Surgery Required
Santi Trimarchi, MD, PhD
Irene Fulgheri, MD

7:57 – 8:02 Optimal Current Treatment Of Type A Aortic Dissections (TAADs): When Should The Distal Aorta Be Treated By TEVAR Before Repair Of The Ascending Aorta: Lessons Learned, Complications And Their Resolution
Joseph S. Coselli, MD

8:03 – 8:08 Complete Endovascular Repair Of Aortic Arch Disease: How Do Industry Made Customized Endografts Compare To PMEGs And In Situ Fenestrated Endografts: Technical Tip, Best Endografts, Complications And Their Treatment
Andrea Kahlberg, MD
Germano C.G. Melissano, MD

8:09 – 8:14 Endovascular In Situ Fenestration And Extracorporeal Femoro-Carotid Bypass To Facilitate TEVAR For Aortic Pathology Involving The Arch
Ivo Petrov, MD, PhD

8:15 – 8:20 **Panel Discussion**

8:21 – 8:26 Updated Results From The US TRIOMPHE Trial Of The Endospan Nexus Endograft (Artivion - OTS) For Treating Complex Aortic Arch Lesions Including Chronic Dissections: Advantages, Limitations And Will It Have A Major Role
Ross Milner, MD

8:27 – 8:32 Debranching vs. Single Branched Or Fenestrated Endografts For The Arch: How To Best Choose The Right Device (Nexus, Gore, Cook, Etc.)
Nikolaos Tsilimparis, MD, PhD
Mario L. Lachat, MD

8:33 – 8:38 Stroke After Endovascular Aortic Arch Repair: Insights From The TRIOMPHE Study: Etiology And Best Current Prevention Methods
Adam Beck, MD

8:39 – 8:44 Management Strategies For Residual Arch Dissections After TAAD Open Repairs: Evaluation, Techniques, Pitfalls
Mathew D. Wooster, MD, MBA

INTRAMURAL HEMATOMAS (IMHs) AND PENETRATING AORTIC ULCERS (PAUs)

8:45 – 8:50 Management Strategies For IMHs And PAUs: Etiology And Risk Factors For Progression: When To Treat And When Not To
Randall DeMartino, MD

8:51 – 8:56 When And How To Treat Aortic IMHs And PAUs By TEVAR: Technical Tips, Precautions And Results: Why Very Early Treatment Yields Worse Results
Jean M. Panneton, MD

8:57 – 9:02 International Consensus Of Experts On The Management Of Acute Aortic Syndrome Presenting With An IMH Or PAU: How Should Management Differ From Incidentally Found IMHs Or PAUs
Michele Piazza, MD

9:03 – 9:10 **Panel Discussion And 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; DECREASING SPINAL CORD ISCHEMIA (SCI), OTHER INTERESTING TOPICS AND NEW DEVICES FOR THEIR TREATMENT

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

COMPLEX AAAs AND TAAAs

9:10 – 9:15 Aortic Mural Thrombus And Statin Usage: What Is Their Effect On SCI Risk With Complex AAA And TAAA Repairs: How Should They Change Management: What Mechanisms Are Involved: How To Detect And Quantitate Mural Thrombus
Jade S. Hiramoto, MD

9:16 – 9:21 Target Branch Vessel Instability In F/B/EVAR For Post-Dissection TAAAs: What Is The Impact Of True Or False Lumen Origins: What Are The Consequences: How To Prevent Them Or Treat Them
Mark A. Farber, MD

9:22 – 9:27 Key Messages From The New ESVS Guidelines And Thresholds For Thoracic And Thoracoabdominal Aneurysms: Should The New Recommendation Be Followed Or Ignored
Ian Loftus, MD
Anders Wanhainen, MD, PhD

9:28 – 9:33 With Regard To Fenestrated vs. Branched Endografts For Complex AAAs And Type IV TAAAs, Which Is Best And Which Type 2 Endoleaks To Treat And Which To Ignore
Carlos H. Timaran, MD

9:34 – 9:39 With Regard To Endograft Repairs Of TAAAs, Inner And Outer Branches Perform Equally Well If Done Right And Local Anesthesia May Sometimes Be Sufficient: Technical Tips
Nikolaos Tsilimparis, MD, PhD

9:40 – 9:45 Technical Tips For Doing F/B/EVAR For Complex AAAs And TAAAs Safely And Effectively: Should There Be Institutional And Operator Volume Thresholds: Should They Be Enforced And How
Sara L. Zettervall, MD *(PowerPoint Presentation With Synched Audio)*

9:46 – 9:51 Aneurysm Sac Dynamics After F/B/EVAR And Its Prognostic Significance: How Should It Be Measured And How Often
Sonia Ronchey, MD, PhD

9:52 – 9:57 **Panel Discussion**

9:58-10:03 Technical Tips For Performing Physician Modified Endografts (PMEGs) For Chronic TBADs With TAAAs And A Small True Lumen: What Is The Magic Belt Suture And How Does It Help
Kenichi Hashizume, MD, PhD

10:04-10:09 TEVAR - The Storm After The Quiet: Mid-Term And Long-Term Complications After Thoracic Endovascular Repairs And What To Do To Prevent And Treat Them
Giovanni Tinelli, MD, PhD

10:10-10:15 Late Complications Of F/B/EVAR: What Are The Causes And How Are They Best Treated
Athanasios Katsargyris, MD
Eric L.G. Verhoeven, MD, PhD

10:16-10:21 Aneurysms Of Visceral Or Intercostal Patches After Open Repair Of TAAAs: Feasibility Of Endovascular Repair: How To Do It: Is Open Repair Ever Needed
Bernardo C. Mendes, MD
Manju Kalra, MBBS

TOPICS RELATED TO NEW DEVICES

10:22-10:27 The Gore TAMBE Device For Complex AAAs And TAAAs: Advantages, Limitations, Technical Tips And Lessons Learned
Jason T. Lee, MD

10:28-10:33 An Off-The-Shelf (OTS) Inner Branched Endograft (E-nside From Artivion) For The Treatment Of Juxtarenal And Pararenal Aortic Aneurysms: Advantages, Limitations, Technical Tips And Results From A Multicenter Italian Registry
Michele Antonello, 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 FLOW MODULATING AND BARE STENTS FOR TREATING ANEURYSMS AND DISSECTIONS

Moderators: *Thomas S. Maldonado, MD*
Rodney A. White, MD
Claude D. Vaislic, MD

TREATMENT OF ILIAC ANEURYSMS WITH IBDs, PARALLEL GRAFTS OR OTHER TECHNIQUES

10:40-10:45 Surprisingly, Occlusion Of One Or Both Internal Iliac Arteries During EVAR Does Not Result In Colon Ischemia Or Other Serious Consequences: From A Large VQI Study
Heepeel Chang, MD

10:46-10:51 EVAR With Internal Iliac Artery Branched Devices (IBDs): Comparison Of FDA Approved Devices With Regard To Cost, Performance And Reinterventions
Michael J. Singh, MD, MBA

10:52-10:57 Updated Experience With Endovascular Internal Iliac Artery Preservation Using The GORE IBE IBD Device: How Does It Fit Chinese Patient Anatomy: Technical Tips And Follow-Up Results From A Multi-Center Experience Led By Shanghai Zhongshan Hospital
Weiguo Fu, MD

10:58-11:03 5-Year Outcomes Of The Gore IBD Device For Revascularizing The Internal Iliac Artery With Aorto-Iliac Aneurysms: How Do The Results From The US IDE Study Compare With Those From The GREAT Registry And ICEBERG Study: Advantages And Limitations Of The Device
Ross Milner, MD
Michel Reijnen, MD, PhD

11:04-11:09 Long-Term Outcomes With The Cook PRESERVE LT Study Of The Cook IBD (ZBIS) Device To Treat Aorto-Iliac AAAs: Why Is It Different And Better Than Other IBD Devices: When Is It Contraindicated
W. Anthony Lee, MD
Fabio Verzini, MD, PhD

11:10-11:15 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

11:16-11:21 **Panel Discussion**

PARALLEL GRAFTS AND OTHER TECHNIQUES TO MAINTAIN INTERNAL ILIAC FLOW

11:21-11:26 Long-Term Results Of The Lobato Parallel Graft Technique For Treating Iliac Artery Aneurysms: What Makes It Different: Advantages, Limitations And Technical Tips
Armando C. Lobato, MD, PhD

11:27-11:32 Avoiding Pelvic Ischemia And Erectile Dysfunction During Endovascular Repair Of Internal Iliac Artery Aneurysms Using The BIS^{2}T Technique: How To Do It
Gustavo Paludetto Oliveira, PhD

11:33-11:38 Physician-Modified Endografts (PMEGs) To Preserve Internal Iliac Artery Flow With Endograft Repair Of INTERNAL Iliac Artery Aneurysms: When Are They Uniquely Valuable And How To Do Them
Dean Yamaguchi, MD

UPDATE ON FLOW MODULATING BARE (UNCOVERED) STENTS

11:39-11:44 Treatment With 10 Years Of Follow-Up Of Aortic Dissections With Multilayer Bare Stents: When Are They Effective And When Aren't They
Victor S. Costache, MD, PhD
Ivo Petrov, MD, PhD

11:45-11:50 While Flow Modulating Bare Stents Do Not Prevent Aneurysm Enlargement And Rupture With TAAAs, Bare Stents (Allay From Intressa) May Be Effective Treatment For Peripheral And Visceral Aneurysms: What Are Their Indications And Results
Arno von Ristow, MD, PhD

11:51-11:56 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

11:56-12:00 **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)

NEW DEVELOPMENTS IN AAA BEHAVIOR, TREATMENT OF STANDARD INFRARENAL AND COMPLEX AAAs: THE INFLUENCE OF DIABETES, BLOOD PRESSURE, AGE, ETC. ON AAA GROWTH; IMPROVED ULTRASOUND SURVEILLANCE, LOCAL ANESTHESIA FOR EVAR, 3D CTA ANALYSIS, CONSEQUENCES OF AAAs LOST TO FOLLOW-UP AND ALL AAAs ARE NOT TIME BOMBS WAITING TO EXPLODE

Moderators: *James F. McKinsey, MD*
Stephan Haulon, MD
Yuehong Zheng, PhD

1:00 – 1:05 Asymmetrical Saccular AAAs: Do They Behave Differently From Standard Fusiform AAAs: How To Measure Them – To Include The Normal Aorta Or Not
Frank J. Criado, MD

1:06 – 1:11 How To Deal With Failed EVARs: When To Treat Endo: When To Treat Open By Endograft Removal: When To Open And Leave All Or Part Of The Graft (Semiconversion): How To Get Aortic Control: Technical Tips
Michael P. Jenkins, MBBS, BSc, MS

1:12 – 1:17 How Do Arterial Blood Pressure Levels Influence AAA Growth Rates: Does Controlling The Blood Pressure Slow Growth Rates
Colin D. Bicknell, MD

1:18 – 1:23 How Can The VQI Be Used To Decrease The Length Of Hospital Stay For EVAR And How Should Patient Age Influence The Choice Of Endo vs. Open Repair For AAAs
Ronald L. Dalman, MD

1:24 – 1:29 Why It Is Important To Avoid "Lost To Follow-Up" For Patients With AAAs (Pre- Or Post-Treatment): How To Minimize The Problem
Matthew W. Mell, MD, MS

1:30 – 1:35 **Panel Discussion**

1:36 – 1:41 Late Rescue For Renal Artery Occlusion After EVAR: How To Do It And Why There Are No Time Limits
James F. McKinsey, MD

1:42 – 1:47 What Is The Relationship Between AAAs, Inflammation (On PET/CTs), Cancer And Mortality: How Should These Variables Influence Treatment
Natzi Sakalihasan, MD, PhD

1:48 – 1:53 Diabetes Reduces The Growth Rate Of AAAs: What Is The Mechanism: Is It Just Metformin Treatment: From A Large Meta-Analysis
George A. Antoniou, MD, PhD, MSc

1:54 – 1:59 The Influence Of Endograft Covering Material On The Occurrence And Behavior Of Type 2 Endoleaks And Sac Remodeling After EVAR: There Are Device Differences And They Affect Outcomes
Michel Reijnen, MD, PhD

2:00 – 2:05 Current Role Of Hybrid Repair Of A TAAA (Proximal TEVAR With Distal Open Repair – The Upchurch Procedure): When Is It Indicated; What Are The Advantages And Updated Results
Gilbert R. Upchurch, MD, DHA
Salvatore Scali, MD
Dean Arnaoutakis, MD

2:06 – 2:11 **Panel Discussion**

SESSION 44 (Trianon Ballroom, 3rd Floor)

MORE NEW DEVELOPMENTS IN AAAs: ENDOVASCULAR TREATMENTS WITH HERITABLE AORTIC DISEASE (CONNECTIVE TISSUE GENETIC DISORDERS - CTDs): HOW DOES INTRASAC THROMBUS LOAD AFFECT AAA BEHAVIOR AND PROGNOSIS AFTER EVAR

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

TREATMENT OF AORTIC ANEURYSMS WITH HERITABLE AORTIC DISEASE AND CONNECTIVE TISSUE DISORDERS (CTDs)

2:12 – 2:17 With Family Clusters Of Patients With Heritable Thoracic Aortic Disease What Open Or Endovascular Interventions May Be Required
Joseph S. Coselli, MD

2:18 – 2:23 New Techniques And Technologies Facilitate Endovascular Aortic Repair For Genetic Aortic Syndromes: An Overview And Critical Review
Tilo Kölbel, MD, PhD

2:24 – 2:29 When Can Endovascular Management Of Patients With Marfan Syndrome Be The Best Treatment
Christoph A. Nienaber, MD, PhD

2:30 – 2:35 Why And How Should AAAs And Iliac Pathology Be Treated Differently In Patients With Heritable Vascular Syndromes (Marfan, Loeys-Dietz And Ehlers-Danlos
Sherene Shalhub, MD, MPH

2:36 – 2:41 Endograft Treatment Of Complex Aortic Diseases In Patients With CTDs: When Is It Indicated And When Not: From A Multicenter Study Of Patients With Marfan, Vascular Ehlers-Danlos And Loeys-Dietz Syndromes
Anders Wanhainen, MD, PhD

2:42 – 2:47 Persistent Indications For Open TAAA Repairs In Young Patients With CTDs And The Value Of F/B/EVAR In The Management Of Failed Open Repairs Of Complex AAAs In CTD Patients: Technical Tips
Barend M.E. Mees, MD, PhD
Michael J. Jacobs, MD, PhD
Geert Willem H. Schurink, MD, PhD

2:48 – 2:53 Endovascular (Endograft) Therapy For Marfan And Other CTDs: When Is It Indicated As The Primary Treatment Or After Failed Open Repair And When Is It Not: Is It Time For A Guideline Change
James H. Black, III, MD

2:54 – 2:59 Results Of The STABILISE Technique In Patients With Connective Tissue Disorder Related TBADs: When Can It Work And When Is It Contraindicated
Jean-Marc Alsac, MD, PhD

THE EFFECT OF AAA SAC THROMBUS LOAD

3:00 – 3:05 **DEBATE:** Intraluminal Thrombus Within AAAs Is Harmful: It Promotes An Increased Growth Rate Before Treatment And Type 2 Endoleaks After EVAR: What Is The Mechanism
Natzi Sakalihasan, MD, PhD

3:06 – 3:11 **DEBATE:** Intraluminal Thrombus Within An AAA Is Protective: 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
Hence J.M. Verhagen, MD, PhD

3:12 – 3:24 **Panel Discussion And Break**
Visit Exhibits And Pavilions (2nd and 3rd Floors)

SESSION 45 (Trianon Ballroom, 3rd Floor)

MORE HOT AORTIC TOPICS, PMEGs AND IDEs, GRAFT CHOICES FOR COMPLEX AAAs AND TAAAs

Moderators: *Michel S. Makaroun, MD*
David H. Deaton, MD

PMEGs AND IDEs

3:24 – 3:29 How To Navigate The Many Choices Of Endografts For Pararenal And Type IV TAAAs: Zenith Fenestrated, TAMBE, In Situ Laser F/EVARs, PMEGs Or Parallel Grafts
Ravi K. Veeraswamy, MD

3:30 – 3:35 How To Get An IDE For PMEGs: What About PMEGs Outside Of IDE Trials: How To Make Delayed-Release Diameter Reduction For PMEGs
Bjoern D. Suckow, MD

3:36 – 3:41 How To Perform In Situ Fenestration For F/B/EVAR Using A Radiofrequency Powerwire (From Baylis) And Biplane Angiography: Advantages And Limitations
Patrick E. Muck, MD

3:42 – 3:47 How To Start A PMEG Program: What Industry Doesn't Tell You (But You Need To Know): Disadvantages, Limitations And Pitfalls
Clark J. Zeebregts, MD, PhD

3:48 – 3:53 NEW 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

3:54 – 3:59 Use Of The Aptus Endoanchor Variable Curve Sheath (Medtronic) As A Rescue Tool To Fix Maldeployed EVAR Endografts: When And How To Do It: Technical Tips
William D. Jordan Jr., MD

4:00 – 4:05 **Panel Discussion**

4:06 – 4:11 RCT Comparing CO_2 vs. Saline Flushing For Stroke Prevention With TEVAR: Do We Really Need CO_2: From The INTERCEPT Multicenter Study
Richard G.J. Gibbs, FRCS

4:12 – 4:17 Penta-Galloyl-Glucose (PGG) To Strengthen The Aortic Wall: What Is It And How Does It Work: Will It Be The Holy Grail For The Management Of Small Aortic Aneurysm Disease
Michel S. Makaroun, MD

4:18 – 4:23 Pediatric AAAs: What Is Their Etiology And How Should They Be Managed: What Is The Best Arterial Graft In This Setting
Sherene Shalhub, MD, MPH

4:24 – 4:29 Tips And Tricks To Perform Peripheral Interventions In Patients Having Undergone Prior EVAR
Dipankar Mukherjee, MD

4:30 – 4:35 Early Outcomes With Preemptive Sac Embolization With Shape Memory Polymer During Endovascular Repair Of Complex AAAs: How Effective Is It: What Is The Proof Of Its Value
Virendra I. Patel, MD, MPH

4:36 – 4:41 **Panel Discussion**

SESSION 46 (Trianon Ballroom, 3rd Floor)

MORE HOT NEW TOPICS RELATED TO AORTC DISEASE AND ITS TREATMENT

Moderators: *Andres Schanzer, MD*
Peter F. Lawrence, MD

4:42 – 4:47 Technique For Accessing And Placing The Contralateral Limb Of A Bifurcated EVAR Device Simply, Rapidly And Dependably Even In Difficult Circumstances
Willem Wisselink, MD

4:48 – 4:53 Improved Method For Treating A Penetrating Abdominal Aortic Ulcer (PAU) With A Single Stent-Graft And Embolization: Technical Tips And Why It Is Better
Piotr Myrcha, MD

PREVENTION AND TREATMENT OF COMPLICATIONS

4:54 – 4:59 Fate Of Renal Arteries After Complex AAA Endo Repairs: What Are The Potential Obstacles Or Threats: How To Overcome Them And Maintain Renal Function
Matteo Orrico, MD, PhD
Nicola Mangialardi, MD

5:00 – 5:05 How To Perform F/EVAR With Full Renal Perfusion In Patients With An Early Renal Artery Bifurcation By Inserting Two Grafts Through One Fenestration Without A Gutter Endoleak
Joshua D. Adams, MD
Mathew D. Wooster, MD, MBA

DECREASING TYPE 2 ENDOLEAKS

5:06 – 5:11 With So Many Type 2 Endoleaks After EVAR, Why Are Ruptures So Rare: Are They Really So Benign: How Should This Influence Their Management
Jan D. Blankensteijn, MD

5:12 – 5:17 EVAR Optimization Through An Endoleak Prediction Tool: How Does It Work And How Does It Help: When Is There Value To Preemptive Embolization Of AAA Side Branches (IMA And Lumbars) Prior To EVAR
Daniela Branzan, MD
Andrej Schmidt, MD

5:18 – 5:23 How To Resolve The Conflicting Results Of The RCTs Showing Or Not Showing A Benefit From Preoperative Embolization Of The IMA And Other Branches In Preventing Type 2 Endoleaks
Neal S. Cayne, MD

5:24 – 5:29 **Panel Discussion**

5:30 – 5:35 The Incidence Of AAAs Is Lower In Women Than Men But The Risk Of Rupture Is Higher: What Is The Reason For This: Could It Be Due To A Higher Metabolism As Reflected In PET/CT Scans: How Should It Influence Treatment
Natzi Sakalihasan, MD, PhD

5:36 – 5:41 F/B/EVARs Can Be Effective Treatments For Patients With Connective Tissue Disorders: When Are Such Treatments Justified And When Are They Not: Results From A National Multicenter Study
Ciro Ferrer, MD, PhD

5:42 – 5:47 Endovascular Management Can Be Effective For Treating Stenotic Or Occlusive Lesions In The Renovisceral Segment Of A Coral Reef Aorta: How To Do Them And Results
Sigrid Nikol, MD

5:48 – 5:53 Outcomes Of Total Endovascular Repair Of The Entire Aorta From Zone 0 To 9: When Is It Necessary: How To Minimize Complications
Sukgu M. Han, MD, MS

5:54 – 5:59 Endovascular Solutions To Treat An Iliac Artery-To-Ureter Fistula: Long-Term Outcomes
Patrick A. Stone, MD

6:00 – 6:06 **Panel Discussion**

End of Program F

THURSDAY, NOVEMBER 19, 2026

6:00 A.M. General Registration – Rhinelander Gallery, 2nd Floor
6:10 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; The Norman M. Rich Military Session; 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)
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)
Superficial Venous Disease And Venous Ulcers
Location: Trianon Ballroom, 3rd Floor

PROGRAM J (SESSIONS 74-78)
Multidisciplinary Stroke Prevention And Treatment
Location: Americas Hall 1 North, 3rd Floor

PROGRAM K (SESSIONS 79-84)
AIMsymposium At VEITHsymposium: Topics Of Interest To Interventional Radiologists
Location: Americas Hall 1 South, 3rd Floor

PROGRAM G (SESSIONS 47-54)
EXCITING NEW OR REDISCOVERED TECHNIQUES, CONCEPTS OR DEVICES; PROGRESS IN F/B/EVAR AND PARALLEL GRAFTS FOR COMPLEX AAAs; THE NORMAN M. RICH MILITARY SESSION; 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 L. Marin, MD
Richard F. Neville, MD

6:56 – 7:01 Current Status Of The Retrievable Rescue Stent-Graft To Control Massive Aortic Or Caval Bleeding: How Does It Work, How Is The Device Retrieved And When Will It Be Widely Available
Bryan W. Tillman, MD, PhD

7:02 – 7:07 How A Biodegradable Polymer Scaffold (From Xeltis) Can Be Endogenous Tissue In Growth Transform After Implantation Into A Durable, Functional Living Arterial Graft: How Does It Work, Current Status And Potential Advantages
Frans L. Moll, MD, PhD

7:08 – 7:13 How And Why TEVAR Endografts Negatively Affect The Blood Pressure And The Heart: Is A Compliant Endograft Needed To Prevent The Problem
Jason N. MacTaggart, MD
Juan C. Parodi, MD

7:14 – 7:19 Long-Term (Up To 20-Years) Follow-Up Of 95 TEVAR Patients With Non-Compliant Endografts For Blunt Traumatic Aortic Injury (BTAI): Was There A Detrimental Effect On The BP Or Heart In These Patients
Johnny Steuer, MD, PhD

7:20 – 7:25 An In Vivo Analysis Of Aortic Stiffness After Endovascular Graft Repairs Of The Thoracic And Abdominal Aorta: Do We Need Endografts That Remain Compliant
Santi Trimarchi, MD, PhD

7:26 – 7:31 **Panel Discussion**

7:32 – 7:37 Combatting Bias In Medical And Vascular Studies And Decision Making: Why It Is Such A Big Deal And What To Do About It
Matthew T. Menard, MD

7:38 – 7:43 Physician Skill Is Not Appropriately Recognized And Rewarded In Health Care Systems: Within A Specialty All Doctors Are Not Equal: There Are Journeymen, Stars, Superstars And Laggards: What To Do About It
Lars B. Lonn, MD, PhD *(PowerPoint Presentation With Synched Audio)*

7:44 – 7:49 How Can GLP-1 A Receptor Agonists And Other Anti-Obesity Drugs Benefit Vascular Patients And Vascular Procedures: How May They Decrease Vascular Disease Progression, Symptoms And Cardiovascular Risk
Henrik Sillesen, MD, DMSc

7:50 – 7:55 Update On The Current Status And Future Potential Of Pig To Human Organ Xenografting: When Will Porcine Heart, Kidney And Liver Transplants Become A Successful Clinical Reality
Robert A. Montgomery, MD, D.Phil

7:56 – 8:01 Update On The Therapeutic Value Of Denervation In Various Vascular Beds: Renal, Hepatic, Pulmonary And More: How Can It Be Accompanied By Endovascular Treatments
Horst Sievert, MD

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: *Gustavo S. Oderich, MD, PhD*
James F. McKinsey, MD

UPDATE ON PARALLEL GRAFTS AND HOW TO MAKE THEM WORK

8:08 – 8:13 Using Parallel Endografts With A Docking Station For Endovascular Repairs Of Complex AAAs And TAAAs: How And Why To Make Them Work Effectively Despite Doubts About Parallel Grafts: What Are The Limitations
Manish Mehta, MD, MPH

8:14 – 8:19 Value Of Parallel Endografts In The Management Of TAAAs And Complex AAAs: Why Do They Fail And Have A Bad Reputation: How To Make Them Work Using The Point Of Reference System With Near 100% Long-Term Success
David J. Minion, MD

8:20 – 8:25 Ch/EVAR For Juxtarenal AAAs: Results From A Single Center With The Longest Available Follow-Up Confirm Long-Term Safety And Effectiveness: Technique Is Vital: How To Do It Right
Joost van Herwaarden, MD, PhD

F/B/EVAR IS BEST FOR COMPLEX AAAs AND TAAAs

8:26 – 8:31 F/B/EVAR Is The Best Way To Treat Most Patients With Complex AAAs And TAAs Large Enough To Treat: When And Why Should Another Technique Be Used
Timothy A. Resch, MD, PhD

8:32 – 8:37 20 Years Of F/B/EVAR Repairs Of Complex AAAs And TAAAs In >6500 Patients In The International Multicenter Aortic Research Group (IMARG) Reveal Stunning Improvement In Outcomes With Striking Decreasing Mortality, Complications And Spinal Cord Ischemia (SCI): Reasons For These Improvements
Hence J.M. Verhagen, MD, PhD

8:38 – 8:43 Latest Findings From The Aortic Research Consortium (ARC) Show Progressively Improving F/B/EVAR Outcomes Despite Growing Disease Complexity: Key Technical Tips And Reasons For This Improvement In >4000 Consecutive Patients
Andres Schanzer, MD

8:44 – 8:50 **Panel Discussion**

8:51 – 8:56 The Fen+ Device (From Cook): How Will It Make F/B/EVAR Simpler And Better For The Treatment Of Complex AAAs And TAAAs: Advantages, Limitations And Results
Gustavo S. Oderich, MD, PhD

IMPORTANCE OF BRIDGING STENT-GRAFTS

8:57 – 9:02 Which Bridging Covered Stents Or Stent-Grafts Work Best For F/B/EVAR: What Is The Best Way To Reopen Occluded Bridging Stent-Grafts And How Long After One In A Renal Artery Occludes Is Reopening It Worthwhile
Martin J. Austermann, MD

9:03 – 9:08 Why Balloon Expandable Bridging Stent-Grafts Are Best For F/B/EVAR: Which One Is Best For F/EVAR And For B/EVAR And Why: Advantages Of The Gore VBX Stent-Graft
Mark A. Farber, MD

9:09 – 9:14 Longer-Term Outcomes Of Inner Branches To Address Visceral Target Arteries In F/EVAR And B/EVAR: What Are The Correct Indications For Them And Which Bridging Stent-Graft Is Best For Inner Branches
Eric L.G. Verhoeven, MD, PhD
Athanasios Katsargyris, MD

9:15 – 9:23 **Panel Discussion**

9:23 – 9:38 **Break – Visit Exhibits And Pavilions (2nd and 3rd 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: *Manish Mehta, MD, MPH*
Carlos H. Timaran, MD
Weiguo Fu, MD

F/B/EVAR FOR FAILED EVARs AND OPEN AAA REPAIRS

9:38 – 9:43 **DEBATE**: Outcomes Of F/B/EVAR For Failed EVAR And Failed Open Complex AAA Repairs Are Excellent: So It Should Be The Procedure Of Choice For These Failures: Technical Tips, Creative Designs And Results
Andres Schanzer, MD

9:44 – 9:49 **DEBATE:** For Failed EVAR Open Conversion Has Better Results Than F/B/EVAR And Should Be The Procedure Of Choice With Few Exceptions
Michel S. Makaroun, MD

9:50 – 9:55 Late Results Of F/EVAR For Failed EVAR: Although Technically Successful, Late Mortality Is Disappointingly High: Why Is This So: When Should It Be Used And When Open Conversion
Barend M.E. Mees, MD, PhD
Geert Willem H. Schurink, MD, PhD
Michael J. Jacobs, MD, PhD

9:56-10:01 When Should The TAMBE Device Replace F/EVAR Devices For Failed EVAR Treatment: Advantages, Limitations And Results Of Each In This Setting
Clayton J. Brinster, MD

10:02-10:07 Comparative Outcomes Of The t-Branch (Cook) vs. TAMBE (Gore) For Repairs Of Complex AAAs And Type IV TAAAs: Advantages And Limitations Of Each: When Should Each Be Used And Why
Carlos H. Timaran, MD

10:08-10:13 With Complex AAAs And TAAAs What Is The Best Endovascular Treatment And When: F/B/EVAR (Custom Or OTS), Inner Branched B/EVAR, TAMBE Or Parallel Graft (Chimney Or Sandwich)
Rocco Giudice, MD

10:14-10:19 **Panel Discussion**

10:20-10:25 Antegrade In Situ Laser Fenestration Of Visceral Branches For TAAA And Pararenal AAA Repairs: How To Do It Effectively: How To Avoid Pitfalls And Long-Term Results
Jean M. Panneton, MD

10:26-10:31 Open Surgical Adjuncts To Facilitate F/B/EVAR In Complex Anatomies
Bernardo C. Mendes, MD

10:32-10:37 Outcomes Of IBDs In The Aortic Research Consortium (ARC): Results And Insights Concerning Their Use In Complex Cases
Darren B. Schneider, MD

10:38-10:43 Parallel Endograft Techniques For Repair Of Aortic And Iliac Aneurysms Can Be Effective Treatments: How To Make Them Work: Advantages, Pitfalls, Limitations And Results
Armando C. Lobato, MD, PhD

10:44-10:49 F/EVAR And B/EVAR In Chronic Dissections May Not Be Successful Mid- And Long-Term In All Patients: Further Interventions Are Often Needed: What Are They
Götz M. Richter, MD, PhD

10:50-10:55 For Repair Of TAAAs: When Endo, When Open: Experience From 2 Large Volume Aortic Centers With Expertise In Both Is Revealing
Tilo Kölbel, MD, PhD

10:56-11:02 **Panel Discussion**

SESSION 50 (Grand Ballroom East, 3rd Floor)

THE NORMAN M. RICH MILITARY SESSION: A TRIBUTE TO OUR MILITARY AND MILITARY PHYSICIANS: SOME MILITARY HISTORY; TREATMENT OF MILITARY AND CIVILIAN VASCULAR INJURIES AND CONTROL OF HEMORRHAGE; UPDATE ON REBOA (RESUSCITATIVE ENDOVASCULAR BALLOON CONTROL OF THE AORTA)

Moderators: Todd E. Rasmussen, MD
Wayne F. Yakes, MD

11:03-11:13 A Look At Current US Military Actions In The Western Hemisphere And Middle East: Including How US Forces And Army Rangers Captured Nicolas Maduro From A Strongly Fortified Army Base With No Loss Of Life
Wayne F. Yakes, MD

11:14-11:19 Partial REBOA: What Is It And How Does It Work: It's A New Military Clinical Practice Guideline That Aligns Aortic Control In Hemorrhagic Shock And Other Conditions: Does It Have Any Role In Civilian Care
Todd E. Rasmussen, MD

11:20-11:25 Advances In Endovascular Resuscitation And Bleeding Control: Maximizing Endovascular Tools For Resuscitation In Trauma, After Open Surgery And Other Conditions: Latest Results And Pitfalls Of Partial REBOA
Tal M. Hörer, MD, PhD

11:26-11:31 When Is Endovascular Therapy A First Line Treatment In The Management Of Arterial And Venous Injuries – Civilian And Military: What Are The Requirements And Resources Needed
Charles J. Fox, MD

11:32-11:37 How War Is Reshaping Ukrainian Vascular Surgery Which Was Already Advanced Based On The Legacy Of Ukrainian Surgical Pioneers
Andriy O. Nykonenko, MD, PhD

11:38-11:43 Evolving Experience In The Surgical Treatment Of Major Vessel Injuries In The Ukrainian War: How To Avoid Erosive Bleeding, Amputations And Other Complications: When Are Tourniquets Helpful, When Harmful In Extremity Wounds
Yuliia Nahaliuk, MD

11:44-11:49 Progress In Dealing With Vascular Trauma – Military And Civilian – During The Gaza/Israeli And Iranian Wars: How Has Treatment Improved At The Injury Site And In Hospitals
Samy S. Nitecki, MD

11:50-11:55 Update On The Clinical Results And The Future Of A Tissue Engineered Biologic Vascular Conduit (Formerly The Human Acellular Vessel – Now Symvess) In Military And Civilian Settings
Todd E. Rasmussen, MD
Charles J. Fox, MD

11:56-12:00 Memorial Tribute To Norman M. Rich, An Icon And Unique Leader In Vascular Surgery
Todd E. Rasmussen, MD

12:01-12:10 Acknowledgment Of The Ambroise Paré Honorary Medal From The French National Academy of Surgery
Armando Mansilha, MD, PhD
Claude D. Vaislic, MD
Jacques Busquet, MD

12:10- 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 STANDARD INFRARENAL AAAs

Moderators: *Frank J. Veith, MD*
Michel S. Makaroun, MD
Heepeel Chang, MD

FOR STANDARD INFRARENAL RUPTURED AAAs

1:00 – 1:05 Evolving Treatment For Ruptured AAAs Over 20 Years At A High Volume Center: How Has This Moved From Open To Endovascular Techniques: What Has Happened To Early And Late Outcomes: Current Proportion Of Endo/Open
Drosos Kotelis, MD

1:06 – 1:11 Updated 17-Year Experience With 100% EVAR Treatment Of Ruptured AAAs: How To Do It: What And How Often Are Accessory Procedures Needed: Comparison With Selective Use Of EVAR In Swedvasc National Database Shows Superiority Of 100% EVAR
David T. McGreevy, MD, PhD
Tal M. Hörer, MD, PhD

WHAT ABOUT THE RCTs

1:12 – 1:17 Only One-Third Of Ruptured AAA Patients Were Randomized In The 3 RCTs Comparing EVAR With Open Repair (OR): This And Other Flaws Invalidate RCT Conclusions That EVAR Is No Better Than OR: EVAR Should Now Be The Preferred Treatment For Most Ruptured AAAs
Martin Malina, MD, PhD

1:18 – 1:23 The RCTs Comparing EVAR And OR Outcomes For Ruptured AAAs Are Outdated, Flawed And No Longer Relevant: Moreover, Late RCT Results Show The Superiority Of EVAR When It Can Be Done
Willem Wisselink, MD

1:24 – 1:29 Why EVAR Is Currently The Best Treatment For All Or Most Ruptured Infrarenal AAAs: Why The RCTs Comparing Open And Endo Repair Are Misleading: When In 2026 Might Open Repair Be The Best Treatment
Panos Kougias, MD, MSc

OTHER RELATED RUPTURED AAA TREATMENT TOPICS

1:30 – 1:35 Why Selection Of Patients With Ruptured AAAs For Noninvasive (Comfort) Care Based On Scoring Systems Or Advanced Age Is Inappropriate And Unfair To Some Patients
Matthew W. Mell, MD, MS

1:36 – 1:41 Update On Advances In The Treatment Of Abdominal Compartment Syndrome (ACS) Associated With Ruptured AAAs: When And How Can It Be Treated Medically And When Must The Abdomen Be Opened
Anders Wanhainen, MD, PhD

1:42 – 1:47 Technique To Facilitate Quick Contralateral Gate Cannulation During Ruptured AAA EVAR Even With Proximal Balloon Control
Ross Milner, MD

1:48 – 1:53 AAA Rupture After EVAR Behaves Differently From De Novo Rupture: How Should Treatment Be Modified In Patients With Ruptures After EVAR
Piotr Szopinski, MD, PhD

1:54 – 1:59 **Panel Discussion**

SESSION 52 (Grand Ballroom East, 3rd Floor)

PROGRESS IN ENDO AND OPEN TREATMENT TECHNIQUES FOR RUPTURED INFRARENAL AAAs, COMPLEX AAAs AND TAAAs; NEW DEVELOPMENTS IN SURVEILLANCE AND SCREENING

Moderators: Keith D. Calligaro, MD
Zoran Rancic, MD, PhD
Manish Mehta, MD, MPH

2:00 – 2:05 Aortic Endograft And Branch Diameter Sizing For Ruptured AAAs: How To Compensate For Size Changes Due To Hypotension: Does Patient Age Matter
Zoran Rancic, MD, PhD

2:06 – 2:11 During Ruptured AAA Treatments: How To Manage Coagulopathies – Role Of Tranexamic Acid (Antifibrinolytic): How To Manage Heparin During EVAR
Elina Quiroga, MD, MPH

2:12 – 2:17 Experience With The Off-The-Shelf (OTS) Inner Branched Endograft (E-nside From Artivion) For The Treatment Of Complex Ruptured AAAs: Advantages, Limitations And Results To Date
Said Abisi, MD

2:18 – 2:23 Use Of A Modified OTS t-Branch Endograft (From Cook) To Treat Ruptured And Urgent Complex AAAs And TAAAs Even With Hostile Access: Features And How It Works: Advantages And Limitations
Mauro Gargiulo, MD
Nuno V. Dias, MD, PhD
Nikolaos Tsilimparis, MD, PhD

2:24 – 2:29 In Situ Laser Fenestration To Facilitate Urgent F/EVARs For Ruptured Complex AAAs: Technical Considerations And Equipment Needed
W. Anthony Lee, MD

2:30 – 2:35 Laser In Situ Fenestrated Endograft (LIFE) Repair For Symptomatic, Ruptured And Complex Aortic Arch Pathologies: How To Do It Safely And Efficiently
Jonathan Bath, MD

2:36 – 2:41 **Panel Discussion**

2:42 – 2:47 For Ruptured Complex AAAs And TAAAs, Parallel Grafts Are The Best Treatment: How To Do Them Effectively: They Are Simpler, Better And Less Costly Than Other Treatments: Results To Date
Manish Mehta, MD, MPH

2:48 – 2:53 Open Retroperitoneal Aortic Approach For Ruptured Complex And Standard AAAs: How To Do It; Advantages And Limitations: When Is It Better Than EVAR And F/EVAR
R. Clement Darling III, MD

2:54 – 2:59 Progress In The Management Of Ruptured AAAs With Aorto-Enteric Fistulas: How To Improve Survival Using Endo And Open Techniques
Salvatore Scali, MD

NEW DEVELOPMENTS IN AAA SCREENING AND SURVEILLANCE

3:00 – 3:05 Current AAA Screening Programs Are Insufficient In Preventing AAA Rupture: How Should They Be Improved To Prevent More Ruptures
Apostolos K. Tassiopoulos, MD

3:06 – 3:11 AI Assisted Analysis Of Current Aortic Imaging Can Improve The Effectiveness Of Aneurysm Screening And Post Treatment Surveillance: It Can Also Improve Our Understanding Of AAA Natural History
Robert W. Chang, MD

3:12 – 3:24 **Panel Discussion And Break**
Visit Exhibits And Pavilions (2nd and 3rd Floors)

SESSION 53 (Grand Ballroom East, 3rd Floor)

EXCITING NEW OR UPDATED CONCEPTS, TECHNIQUES AND TREATMENTS

Moderators: Michael B. Silva, Jr., MD
Virendra I. Patel, MD, MPH
Timur P. Sarac, MD

3:24 – 3:29 Progress In The Treatment Of Vascular Ehlers Danlos Syndrome (EDS): How To Make Operations For Complications More Successful: Technical Tips: Can Beta Blockers Prevent Complications
James H. Black, III, MD

3:30 – 3:35 What Vascular Complications Can Occur During TAVR: How A Vascular Surgeon Can Help In Their Management
Ashraf Mansour, MD

3:36 – 3:41 How To Use Radial Access To Treat Visceral And Lower Extremity Lesions: Equipment Needed, Technical Tips, Limitations And Precautions
Marcelo Guimaraes, MD, MBA

3:42 – 3:47 How An Interventional Radiologist Can Stop Uncontrollable Hemoptysis And Massive Bleeding After Some Open Surgical Operations Using Specialized Endovascular Techniques
Jacob Cynamon, MD

3:48 – 3:53 Special Endovascular Techniques For Removing Lost Or Malpositioned Intravascular Stents, Wires And Other Devices: How To Do It
Guillermo A. Escobar, MD

3:54 – 3:59 How Extracorporeal Circulatory Assist Devices Can Be Helpful In Vascular Surgical Procedures: When And How To Use Them
Jae S. Cho, MD

4:00 – 4:05 The Barostim System: An Implantable Stent-Like Device To Stimulate The Carotid Sinus Nerve (of Hering) To Treat Intractable Heart Failure And Hypertension: How Does It Work And Current Clinical Status
John F. Eidt, MD
Fred A. Weaver, MD, MMM
Luis A. Sanchez, MD

4:06 – 4:11 **Panel Discussion**

4:12 – 4:17 Aneurysm Sac Dynamics/Changes After F/B/EVARs: Are They Important Prognostically: What Beside Endoleaks Can Cause Enlargement: When And How Should Enlargement Be Treated: From The USARC And Rotterdam
Darren B. Schneider, MD
Hence J.M. Verhagen, MD, PhD

4:18 – 4:23 The Role Of The Vascular Surgeon In Treating Perinatal Hemorrhage: Endovascular Iliac Balloon Occlusion Can Be Life Saving: How And Where Balloons Should Be Placed
Dittmar Böckler, MD

4:24 – 4:29 The Mangled Extremity Severity Score (MESS) Is A Poor Predictor Of Limb Salvage: The Importance Of Having Expert Vascular Care In Complex Extremity Trauma
Malachi Sheahan, MD

4:30 – 4:35 Why It Is Important To Have A Vascular Surgeon Participate In Major Tumor Surgery Involving Large Arteries And Veins: This Is True With Tumors Treated By Multiple Other Specialties (General, Pediatric, Orthopedic, Gynecologic And Urologic Surgery)
Samy S. Nitecki, MD

4:36 – 4:41 Near-Infrared Spectroscopy (NIRS) As A Noninvasive Method To Screen/Quantify Vascular Disease And Assess Tissue Perfusion
Richard F. Neville, MD

4:42 – 4:47 Why Are Arch Cerebral Protection Devices Not Decreasing Stroke Rates With TAVR And Aortic Arch Endograft Repairs: A Novel Brain Protection Device That May Make A Difference: How Does It Work And Results
Wayne W. Zhang, MD

4:48 – 4:53 Hyperbaric Oxygen Therapy And Its Applications In Vascular Surgery: What Is The Proof That It Works: When Is It Indicated, When Is It Not: How Can It Benefit A Vascular Practice
Robert B. McLafferty, MD, MBA

4:54 – 4:59 What Is 4D CTA And How Can It Better Clarify Endoleaks And Improve Their Treatment
Lindsay Machan, MD

5:00 – 5:05 **Panel Discussion**

SESSION 54 (Grand Ballroom East, 3rd Floor)

PROGRESS IN RADIATION SAFETY, DEVICES AND TECHNIQUES

Moderators: Jacob Cynamon, MD
Alan B. Lumsden, MD
Jason N. MacTaggart, MD

5:06 – 5:11 New Facts And Myths About Decreasing Radiation Exposure: What Works And What Doesn't
Melissa L. Kirkwood, MD

5:12 – 5:17 New Complete Flex EggNest System For Staff Radiation Protection To Prevent Eye Damage, Cancer, Osteoporosis, Etc. During Endovascular Procedures: How And How Well Does The System Work: Can Lead Aprons Be Eliminated
Javairiah Fatima, MD

5:18 – 5:23 The Rampart IC Staff Radiation Protection System: What Is It And Proof It Is Effective For The Entire Hybrid OR Or Angio Suite Staff
Jan M.M. Heyligers, MD, PhD

5:24 – 5:29 EVAR Without Lead Using Rampart's New Guardian Radiation Mitigation System: How Does It Work And How Well Does It Work
Patrick E. Muck, MD

5:30 – 5:35 New Strategies To Reduce Radiation Exposure To Staff And Patients During Complex Endovascular Aortic Procedures
Bijan Modarai, PhD, FRCS

5:36 – 5:41 The Zero Radiation (MARVY) Project: MRI Can Totally Replace Radiation In The Diagnosis, Treatment And Follow-Up Of EVAR Treated AAA Patients: How It Works And Validation
Kak Khee Yeung, MD, PhD

5:42 – 5:47 Techniques To Minimize Radiation Exposure And Contrast Use To Reduce Nephropathy: CO_2 Angiography Is Unnecessary
Ali Amin, MD, RVT

5:48 – 5:53 How Can C-Arm System Settings Be Used To Minimize Radiation Exposure
Maarit Venermo, MD, PhD

5:54 – 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)

UPDATES ON ENDOGRAFT DEVICES FOR STANDARD INFRARENAL AAA REPAIRS

Moderators: Eric L.G. Verhoeven, MD, PhD
Michel S. Makaroun, MD
Rossi M. Silva, MD

6:54 – 6:59 The E-Tegra Endograft (From Artivion) For Infrarenal AAA Treatment: Advantages, Limitations And Results
Michel Reijnen, MD, PhD

7:00 – 7:05 A Device To Facilitate The Safe Removal Of Failed EVAR Endografts: The XplantaR (From Hjarta Care): How Does It Work, Advantages And Results
Kellie R. Brown, MD

7:06 – 7:11 New Insights From The 10-Year Results With The Endurant Endograft (Medtronic) From The ENGAGE EVAR Registry: What Does It Tell Us About EVAR Durability
Hence J.M. Verhagen, MD, PhD

7:12 – 7:17 Long-Term Results Of EVAR In Severely Angulated Necks (62° - 166°): A 17-Year Experience With The Endurant Endograft: What Are The Limitations
Boonprasit Kritpracha, MD

7:18 – 7:23 5-Year Results And Advantages Of The TREO (Terumo) Endograft For Standard Infrarenal EVARs: Its Status In The US
Matthew J. Eagleton, MD

7:24 – 7:29 5-Year US Results Of The Gore Conformable Excluder For EVAR: How Does It Work And Durability In Complex Anatomy (Angulated And Short Necks)
Robert Y. Rhee, MD

7:30 – 7:35 3-Year European Results With The Gore Conformable Excluder Endograft (From The EXCEL Registry): Advantages In Adverse Anatomy And Limitations
Philippe W.M. Cuypers, MD, PhD
Eric L.G. Verhoeven, MD, PhD

7:36 – 7:41 **Panel Discussion**

7:42 – 7:47 Updated Experience With The AFX 2 Unibody Endograft (Endologix): Advantages And Limitations: From The AFX 2 LIVE Multicenter Study
Pasqualino Sirignano, MD, PhD
Francesco Speziale, MD

7:48 – 7:53 Current Status Of The AFX 2 Endograft: What Is Its Present Role And Advantages For AAAs With Conical Necks; For Aorto-Iliac Occlusive Disease
Piotr Szopinski, MD, PhD

7:54 – 7:59 Update On The Polymer O-Ring Based ALTO Endograft (Endologix): Advantages With Short Necks And Small Iliac Arteries And Limitations
Gianmarco de Donato, MD

8:00 – 8:05 Updated Results And New Findings From The JAGUAR Trial, A Randomized Comparison Of The ALTO Endograft (Endologix) With Other Standard EVAR Devices To Treat AAAs: ALTO Advantages Include Better Adaptive Polymer Sealing And Less Aortic Neck Degeneration
Todd R. Vogel, MD, MPH
Sean P. Lyden, MD

8:06 – 8:11 **Panel Discussion**

SESSION 56 (Grand Ballroom West, 3rd Floor)

NEW OR UPDATED EVAR DEVICES FOR STANDARD AND COMPLEX AAAs, TAAAs OR ARCH TEVARs

Moderators: *Christopher J. Kwolek, MD, MBA*
Margaret Tracci, MD, JD
Fei Mei, MD, PhD

MORE ABOUT EVAR DEVICES FOR STANDARD AAAs

8:12 – 8:17 Update On An Ultra Low Profile (11 Fr), Fully Retractable And Repositionable Transaxillary Endovascular Graft Device (Major Medical) For Infrarenal AAA Repair: How Does It Work And Advantages: Will It Be Robust Enough To Be Durable
Anahita Dua, MD, MS, MBA

8:18 – 8:23 EVAR Devices For Treating AAAs With Conical Necks: Which Devices Are Best And Why: Conformable Excluder, AFX 2, Endurant, Alto, Others: What Are The Limits And What To Do When They Are Exceeded
Ramesh K. Tripathi, MD

8:24 – 8:29 AFX 2 (Endologix) And Excluder (Gore) Endografts For AAA Treatment Had Comparable 5-Year Outcomes: However The AFX 2 Graft Was Best With Conical Necks: From The Japanese AXTIVSEAL Multicenter Study
Naoki Fujimura, MD, PhD

EVAR DEVICES FOR COMPLEX AAAs AND TAAAs

8:30 – 8:35 Pushing The Boundaries Of The TAMBE Device (Gore) For Treating Narrow Visceral Aortas And Pararenal Aneurysms: Technical Tips And Adjuncts For Making It Effective In Compromised Anatomy
Jonathan Bath, MD

8:36 – 8:41 What Are The TREO-Fit And Fenestrated TREO Platforms (Terumo): How Do They Work To Standardize Repairs OF Juxta- And Para-Renal AAAs: Advantages And Results
Benjamin W. Starnes, MD
Vicente Riambau, MD, PhD

8:42 – 8:47 Comparison Of Cook And Treo (Terumo) Fenestrated Devices For Juxta- And Pararenal AAAs: Results, Advantages And Limitations Of Both
Christopher J. Kwolek, MD, MBA
Sonia Ronchey, MD, PhD

8:48 – 8:53 Update On The WeFlow Endografts For Treatment Of Complex AAAs And TAAAs: A Combined Inner Branch And Outer Branch Device: What Makes It Different And Promising: Results To Date
Wei Guo, MD *(PowerPoint Presentation With Synched Audio)*

8:54 – 8:59 The BeGraft And BeGraft Plus (Bentley) As Bridging Covered Stents For F/B/EVAR With All Devices: Advantages And Mid-Term Outcomes: What Is The New Beflared Covered Stent And Why Is It Better
Athanasios Katsargyris, MD
Eric L.G. Verhoeven, MD, PhD

9:00 – 9:05 TAA Repairs For Aneurysms From Dissections And Degenerative Disease Are Best Treated By Combining Open And Endo Techniques: Technical Tips And What Endografts Are Best In This Setting
Yamume Tshomba, MD

9:06 – 9:14 **Panel Discussion And Break**
Visit Exhibits And Pavilions (2nd and 3rd Floors)

SESSION 57 (Grand Ballroom West, 3rd Floor)

NEW OR IMPROVED DEVICES FOR THORACIC AORTIC LESION REPAIRS (PATCHES AND TEVAR), THORACOABDOMINAL ANEURYSM (TAAA) REPAIRS AND DEVICES TO SLOW SMALL AAA GROWTH

Moderators: *Vicente Riambau, MD, PhD*
Shadi J. Abu-Halimah, MD
Benjamin W. Starnes, MD

A NEW SYSTEM FOR ENDOVASCULAR ACCESS TO THE HEART AND GREAT VESSELS

9:14 – 9:19 A System For Percutaneous Endovascular Access To Heart Valves, The Ascending Aorta, Arch And Pulmonary Artery Via The Apex Of The Heart: How Does It Work And Advantages
Douglas M. Overbey, MD
Jeffrey H. Lawson, MD, PhD

AORTIC PATCH DEVICES

9:20 – 9:25 Updated Clinical Experience With The Endopatch: A Promising Solution For Endovascular Repairs For Aortic Dissections: What Is It And How Does It Work
Wei Guo, MD *(PowerPoint Presentation With Synched Audio)*

9:26 – 9:31 The Aortyx Aortic Patch: A More Compliant Way Than TEVAR To Seal Aortic Entry Tears With TBADs: A New Endovascular Approach: How Does It Work: Improved Delivery System And Progress To Date
Vicente Riambau, MD, PhD

TEVAR ENDOGRAFT DEVICES: NEW OR UPDATED

9:32 – 9:37 Valiant Captiva (Medtronic) For TEVAR: Advantages, Limitations And Durable 5-Year Results For Various Aortic Lesions To 5-Years And Beyond
Jean Pierre Becquemin, MD

9:38 – 9:43 10-Year Experience With The Active-Control Conformable cTAG Endograft (Gore): How It Has Improved Outcomes Of TEVAR In Or Near The Aortic Arch: When It Makes A Difference And What Are Its Limitations
Mo S. Hamady, MD

9:44 – 9:49 A Stent To Produce Pulse Wave Modulation To Stabilize Small To Medium Sized AAAs: A First In Human Experience
Tilo Kölbel, MD, PhD

9:50 – 9:55 Clinical Experience With Thoracic Branched Endografts: Which Devices Are Best And What Are The Indications For Their Use
Randy D. Moore, MD

9:56-10:01 **Panel Discussion**

IMPROVED DEVICES FOR TAAAs AND COMPLEX AAAs

10:02-10:07 TAMBE Via A Totally Transfemoral Deployment Using Variable Angled Sheaths With A Locking Wire: How To Do It And Results
Shang Loh, MD

10:08-10:13 What Are Semi Branches In The Artivion Inner Branched Custom-Made Aortic Endograft (E-xtra Design MultiBranch) For Complex AAAs: How Do They Reduce Aortic Coverage And Improve Treatment Of Failed EVAR With Major Type 1A Endoleaks: Advantages, Limitations And Mid-Term Results
Lee Bouwman, MD, PhD

10:14-10:19 Outcomes Of Retrograde Branches In B/EVAR For TAAAs: Technical Tips And How To Predict Subsequent Problems: From A Multicenter Study
Fiona E.V. Rohlffs, MD, PhD

10:20-10:25 t-Branch OTS Endografts (Cook) For The Treatment Of Failed EVAR: Indications, Advantages, Limitations And Clinical Experience
Mauro Gargiulo, MD

10:26-10:31 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, PhD
Nicola Mangialardi, MD

10:32-10:37 A New Endograft System With And Without Branches Or Fenestrations For Treating Aneurysms At All Levels Of The Aorta: It Is Fully Repositionable Even After Deployment - How Does It Work And Updated Clinical Experience
Arno von Ristow, MD, PhD

10:38-10:43 Updated Clinical Experience And Advantages Of The Thoracoflo Graft (Terumo) For The Hybrid Repair Of TAAAs (Proximal TEVAR; Distal Open): How And Why To Preserve IMA Flow And Other Technical Tips
Sebastian E. Debus, MD, PhD
Sabine H. Wipper, MD, PhD

10:44-10:52 **Panel Discussion**

SESSION 58 (Grand Ballroom West, 3rd Floor)

MORE ABOUT IMPROVED DEVICES FOR TEVAR, TAAAs, ARCH AND ASCENDING AORTIC LESIONS

Moderators: *Rodney A. White, MD*
Frank R. Arko, MD
Yuehong Zheng, PhD

TEVAR DEVICE RELATED TOPICS

10:52-10:57 Why It Is Important To Avoid Excessive Oversizing Of TEVAR Endografts: How To Determine The Optimal Diameter For A TEVAR Device
Salvatore Scali, MD

10:58-11:03 The TREO Relay Endograft System (Terumo) For TEVAR: What Makes It Different And Especially Suited For Treating Aortic Dissections: Advantages, Limitations And Results
Frank R. Arko, MD

11:04-11:09 The Distal Landing Zone Of TEVARs Is Particularly Vulnerable To Complications: What Are They: How To Prevent Them And Treat Them
Santi Trimarchi, MD, PhD

TAAA AND COMPLEX AAA DEVICE RELATED TOPICS

11:10-11:15 Off-The-Shelf (OTS) Endografts And Physician Modified Endografts (PMEGs) Are Complementary In The Treatment Of TAAAs And Complex AAAs: Indications And Contraindications For Each
Bernardo C. Mendes, MD

11:16-11:21 How To Improve The Learning Curve For Using The TAMBE Device To Treat TAAAs And Complex AAAs More Safely And With Better Outcomes: What Are The Pitfalls To Avoid
Sukgu M. Han, MD, MS

11:22-11:27 Standardized 4-Vessel Fenestrated PMEGs For TAAAs Using The Medtronic Captiva Endograft: Technical Tips And Advantages: From The SPHERE Registry
Michele Piazza, MD

11:28-11:33 Treatment Of Chronic TBADs With An Enlarging Complex AAA By Performing A Thermal Septotomy And Deploying A TAMBE Endograft: How To Do It: Advantages And Pitfalls To Be Avoided
Mazin Foteh, MD

DEVICES FOR ENDOGRAFT TREATMENT OF ARCH AND ASCENDING AORTIC LESIONS

11:34-11:39 How To Do A Total Endovascular Aortic Arch Repair With A 3 Retrograde Branch Device: What Lesions Can Be Treated: Advantages Of Using Reinforced Steerable Sheaths Via Totally Transfemoral Access: Which Devices Are Best And Results
Andres Schanzer, MD

11:40-11:45 Current Status In The US Of The Relay Branched Endovascular Graft (Terumo) For Endo Repair Of Aortic Arch Lesions: How Many Branches Can And Should Be Revascularized: Advantages, Limitations And Clinical Experience To Date
Luis A. Sanchez, MD
Eric E. Roselli, MD

11:46-11:51 The Terumo Relay Aortic Ascending Aorta Endovascular Graft: What Makes It Different And Current Status
Vicente Riambau, 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 59 (Grand Ballroom West, 3rd Floor)

UPDATED INFORMATION ON LOWER EXTREMITY PROSTHETIC GRAFTS (SEE ALSO SESSION 28), STENT-GRAFTS AND RE-ENTRY DEVICES

Moderators: *Samuel R. Money, MD, MBA*
Brian G. DeRubertis, MD
Dennis R. Gable, MD

PROSTHETIC GRAFTS AND STENT-GRAFTS

1:00 – 1:05 Use Of VBX (Gore) Balloon Expandable Stent-Grafts For The Management Of Complex Aorto-Iliac Aneurysmal And Occlusive Disease: Advantages, Why They Make A Difference And Limitations
Luis A. Sanchez, MD

1:06 – 1:11 The Value Of Viabahn Self-Expanding Stent-Grafts (Gore) For Treating Long And Complex SFA Lesions: Advantages, Limitations And Results (From The INSIGHT Study)
Michel Reijnen, MD, PhD

1:12 – 1:17 Spiral Laminar Flow Prosthetic Vascular Grafts (From Vascular Flow Technologies): Do They Improve Patency By Controlling Neo-Intimal Hyperplasia At Their Ends: What Is The Mechanism And Their Current Status
Hosam F. El Sayed, MD

1:18 – 1:23 Perigraft Seromas After PTFE Arterial Grafts In The Lower Extremity Or Abdomen: Frequency, Etiology And Prognosis: When Can They Just Be Observed; When Do They Need To Be Treated And How
Jae S. Cho, MD

1:24 – 1:29 Heparin Coated PTFE Grafts (Propaten - Gore) vs. 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 An Alternate Catheter-Based System For Deep Vein Arterialization (DVA): The Boomerang Device And Trial (Cardiva Medical) Creates An Endovascular A-V Fistula Without Needing A Stent-Graft: How Does It Work: Advantages And Results To Date
Brian G. DeRubertis, MD

RE-ENTRY DEVICES REEXAMINED

1:36 – 1:41 Pros 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 Antonella Ruffino, MD

1:42 – 1:47 The BeBack Catheter (From Bentley): A New Re-Entry Device: How Does It Work: What Makes It Different, Advantages And Results
Athanasios Katsargyris, MD
Eric L.G. Verhoeven, MD, PhD

1:48 – 1:54 **Panel Discussion**

SESSION 60 (Grand Ballroom West, 3rd Floor)

NEW OR IMPROVED ENDOVASCULAR DEVICES FOR LOWER EXTREMITY TREATMENTS: ATHERECTOMY, INTRAVASCULAR LITHOTRIPSY (IVL), THE SERRANATOR® DEVICE (SEE ALSO SESSIONS 23-27)

Moderators: *Maciej L. Dryjski, MD, PhD*
Marianne Brodmann, MD
George L. Berdejo, BA, RVT

ATHERECTOMY RELATED TOPICS

1:54 – 1:59 Value Of Laser Atherectomy With The Auryon Laser (From AngioDynamics): When And How Is It Helpful: What Is The Evidence
Anahita Dua, MD, MS, MBA

2:00 – 2:05 Updated Results With The Revolution Atherectomy System (From Rex Medical) For Treating Complex Lower Extremity Lesions: When And How Is It Helpful
Robert E. Beasley, MD

2:06 – 2:11 The Rotarex Rotational Excisional Atherectomy System (From BD): Findings From The XTRACT Trial Regarding Its Value, Advantages And Limitations
Todd Berland, MD

2:12 – 2:17 Long-Term Outcomes After Atherectomy For In-Stent Restenosis (ISR): Which Device Is Best: From A Device-Specific Analysis
Joseph J. Ricotta II, MD, MS

2:18 – 2:23 **Panel Discussion**

INTRAVASCULAR LITHOTRIPSY (IVL) RELATED TOPICS

2:24 – 2:29 A New Laser-Based IVL Technology For Treating Arterial Lesions: The SEISMIQ IVL In PAD: What Is It And How Does It Work: Advantages And Early Results
Marianne Brodmann, MD *(PowerPoint Presentation With Synched Audio)*

2:30 – 2:35 Intravascular Lithotripsy (IVL) In Tibial Arteries: Updates From The Shockwave BTK II And Javelin Trials: New Technology Is Available
Andrew Holden, MBChB

2:36 – 2:41 IVL vs. Atherectomy As Optimal Vessel Prep For DCB Treatment Of Calcified FemPop Lesions: Comparative Results
Ignacio Escotto, MD

2:42 – 2:47 Laser And Optics Based Intravascular Lithotripsy (SEISMIQ - Boston Scientific) System For The Treatment Of Below-The-Knee (BTK) Calcified Lesions: How Does It Work, What Makes It Different And Updated Results Of The RESTORE BTK Trial
Michael K.W. Lichtenberg, MD

THE SERRANATOR® BALLOON DEVICE

2:48 – 2:53 The Serranator Balloon Catheter (From Cagent Vascular) For Vessel Prep And Treatment In Lower Extremity Arteries (From The PRELUDE And PRELUDE BTK Trials): Updated Results, Current Status And How Will It Make A Difference
Andrew Holden, MBChB
Steven Kum, MD

2:54 – 2:59 Serration Angioplasty With The Serranator Balloon vs. POBA: Does The Serranator Prevent Or Lessen Dissections And Vessel Recoil: Will It Make A Difference And Lessen The Need For Bailout Stenting
Venita R. Chandra, MD

3:00 – 3:06 **Panel Discussion**

3:06 – 3:18 **Break – Visit Exhibits And Pavilions (2nd and 3rd Floors)**

SESSION 61 (Grand Ballroom West, 3rd Floor)

NEW OR IMPROVED ENDOVASCULAR DEVICES FOR LOWER EXTREMITY TREATMENTS: NEW BIORESORBABLE STENTS; UPDATED INFORMATION ON STANDARD DESs AND A DCB; AND A NEW PERCUTANEOUS BYPASS (SEE ALSO SESSIONS 24-26)

Moderators: *Richard J. Powell, MD*
Ramon L. Varcoe, MBBS, MS, PhD, MMed
Thomas Zeller, MD

NEW BIORESORBABLE STENTS

3:18 – 3:23 A New Drug Eluting Bioresorbable Stent (Motiv From REVA) To Treat BTK Lesions: Results Up To 4 Years: How Is This Device Different And Possibly Better
Konstantinos Katsanos, MSc, MD, PhD
Michel J. Bosiers, MD

3:24 – 3:29 Experience To Date With A New Bioresorbable Stent Scaffold (Efemoral From Efemoral Medical) To Treat FemPop Disease: What Makes It Different
Ramon L. Varcoe, MBBS, MS, PhD, MMed
Andrew Holden, MBChB

INFORMATION ON A NEW STENT

3:30 – 3:35 Xact Carotid Stent (Abbott) With A Short-Transcarotid Access Delivery System For TCAR Procedures: Advantages And Results
Peter L. Faries, MD

UPDATED INFORMATION ON STANDARD DESs AND DCBs

3:36 – 3:41 Why The Zilver PTX DES (Cook) Is A Durable Effective Treatment For Long FemPop Lesions: Based On Worldwide Trials And Experience
Charles J. Bailey, MD

3:42 – 3:47 Long-Term Results With Drug Elution Continue To Show Superior Results With No Downsides: Novel Data On Eluvia DESs And Ranger DCBs (From Boston Scientific)
Anahita Dua, MD, MS, MBA

3:48 – 3:53 Updated Mid-Term Results In >1000 Patients From The Lutonix SAFE Registry Demonstrate The Advantages Of The Lutonix DCB (BD): In Which Specific Patient Subgroups Do They Apply
Peter A. Schneider, MD

3:54 – 3:59 A Prospective Multicenter Worldwide Study Of The IN.PACT Admiral DCB (Medtronic) In Real-World Contemporary Practice Shows Results Equivalent To Those In The RCTs: Paclitaxel DCBs Are Effective And Worth The Increased Cost
Thomas Zeller, MD

A NEW PERCUTANEOUS FEMPOP BYPASS

4:00 – 4:05 Update On A New Device For Minimally-Invasive FemPop Bypass With End-To-Side Sutureless And Clampless Anastomosis In 3 Minutes: How Does It Work And Early Experimental Results
Yves Alimi, Professor
Steven Kum, MD

4:06 – 4:12 **Panel Discussion**

SESSION 62 (Grand Ballroom West, 3rd Floor)

NEW OR ESTABLISHED DEVICES TO PREVENT OR TREAT ENDOGRAFT DEVICE MIGRATION OR TYPE 1 ENDOLEAKS: ENDOANCHORS AND ENDOVASCULAR SUTURING DEVICES

Moderators: William D. Jordan Jr., MD
Jean-Paul de Vries, MD, PhD

4:12 – 4:17 A New Fixation Device (Aortoseal From Endoron) To Improve Aortic Endograft Seal And Fixation: How Does It Work, When Is It Indicated And What Are Its Advantages: Updated Clinical Trial Experience
Ross Milner, MD

4:18 – 4:23 Progress With The VESTECK Catheter-Based Endosuturing Technology For EVAR And TEVAR Fixation: How Does It Work: How Is It Different From EndoAnchors: Advantages And Successful Clinical Results
Dainis K. Krievins, MD
Sean P. Lyden, MD
David H. Deaton, MD
Venkatesh G. Ramaiah, MD

4:24 – 4:29 New Findings From The Global ANCHOR Registry Of The Heli-FX EndoAnchor (Medtronic) Fixation Device To Prevent And Treat EVAR Complications Including Migration And Type 1A Endoleaks: When Can The Device Work And When Can It Not: Can Virtual Techniques Predict The Need For EndoAnchors
Jean-Paul de Vries, MD, PhD
William D. Jordan Jr., MD
Michel Reijnen, MD, PhD

4:30 – 4:35 Heli-FX EndoAnchors Are An Effective Way To Improve EVAR Outcomes With Challenging AAA Neck Anatomy: A Real World Experience Confirms The Positive ANCHOR Registry Findings: Indications And Contraindications
Michele Antonello, MD, PhD

4:36 – 4:41 Heli-FX EndoAnchors (Medtronic) Offer Durable Fixation And Protection Of EVAR Proximal Seal Zones In Patients With What Kinds Of Hostile Neck Anatomy: How An AI Tool Can Support Clinical Decision Making And Long-Term Outcomes
Apostolos K. Tassiopoulos, MD

4:42 – 4:47 Update On The Novelrad Percutaneous Endovascular Suturing Device: How And In What Situations Can It Work: Advantages And Clinical Experience To Date
Elchanan Bruckheimer, MBBS

4:48 – 4:54 **Panel Discussion**

SESSION 63 (Grand Ballroom West, 3rd Floor)

NEW OR IMPROVED ENDOVASCULAR DEVICES FOR TREATING ACUTE LIMB ISCHEMIA (ALI) AND CLOT REMOVAL (SEE ALSO SESSION 30); NEW DEVICES FOR EMBOLIZATION

Moderators: *Patrick E. Muck, MD, FACS*
Frank R. Arko, MD
Sateesh C. Babu, MD

4:55 – 5:00 **DEBATE**: Open Surgery Is Often The Best Treatment For ALI Because Emboli And Thrombosis Are Usually Superimposed On Underlying Arteriosclerosis
Katariina M. Noronen, MD, PhD

ENDOVASCULAR CLOT REMOVING DEVICES

5:01 – 5:06 **DEBATE**: Not So: Endovascular Treatment With The Many New Devices Now Available For Removing Clot Is Usually The Best Way To Manage ALI: What Are These Devices, How Do They Work And Advantages
Charles J. Bailey, MD

5:07 – 5:12 An Endovascular First Approach Is Currently The Best Way To Manage Arterial Thromboembolic Conditions: How The Newer And Older (Penumbra Indigo, AngioJet, Rotarex) Clot Removing Devices Work: When Are Thrombolytic Agents Or Open Surgery Required
Patrick E. Muck, MD

5:13 – 5:18 Artix All-In-One Endovascular Thrombectomy System (From Stryker-Inari) Provides Mechanical Clot Extraction And Aspiration: Advantages And Clinical Experience For Treating ALI
Yana Etkin, MD
Anahita Dua, MD, MS, MBA

5:19 – 5:24 New Endovascular Thrombectomy Devices: Prodigy, Symphony, Pounce, Aventus, Excipio And Vesalio: How Do They Work And What Are Their Advantages Over Other Endo Clot Removing Technologies
Venkatesh G. Ramaiah, MD

5:25 – 5:30 **Panel Discussion**

5:31 – 5:36 Comparison Of Endovascular Thrombectomy Devices For Acute Mesenteric Ischemia: Indications, Contraindications, Which Device Works Best And Results: When Is Open Treatment Necessary
Marco V. Usai, MD

ENDOVASCULAR OCCLUSIVE DEVICE

5:37 – 5:46 What Are The Newer Endovascular Devices Or Agents For Occluding Blood Vessels: How Do They Work, Advantages And Limitations
Ziv J. Haskal, MD

5:43 – 5:48 Fibered And Non-Fibered Coil Embolism Technology: Which Type Of Coils Are Best For Different Indications: When Are Liquid Agents Best: What About The EmboSci Device, A Spongy Material Deliverable Through A Catheter: It May Be Useful To Occlude False Lumens
Frank R. Arko, MD

5:49 – 5:54 FluidX: A New Conformable Liquid Occlusive Agent: What Makes It Different, Indications, Advantages And Precautions
Andrew Holden, MBChB *(PowerPoint Presentation With Synched Audio)*

5:55 – 6:00 **Panel Discussion**

End of Program H

PROGRAM I (SESSIONS 64-73)

SUPERFICIAL VENOUS DISEASE AND VENOUS ULCERS

Trianon Ballroom, 3rd Floor

SESSION 64 (Trianon Ballroom, 3rd Floor)

VENOUS CLINICAL EXAMINATION AND WORK-UP

Moderators: *Jose I. Almeida, MD, RPVI, RVT*
Dale Maharaj, FACS
Caron B. Rockman, MD

6:55 – 6:58 Introduction To VEITH Venous Venous Venous
Jose I. Almeida, MD, RPVI, RVT

6:59 – 7:04 Is Venous Intima-Media Thickness Affected In Both The Deep And Superficial Veins With GSV Reflux
Dimitrios Kontothanassis, MD

7:05 – 7:10 Air Travel Thrombosis: Hypoxia And Rheologic Explanation
Ayman M. Fakhry, MD

7:11 – 7:16 Cardiovascular Risk Assessment In Venous Disease
Sarah Onida, BSc, MBBS, PhD

7:17 – 7:22 When Should You Duplex Both Lower Extremity And Pelvic Veins
Jan M. Sloves, RVT

7:23 – 7:28 Is Bilateral Lower Extremity Ultrasound Necessary In Patients With Symptoms Of Unilateral Disease
Caron B. Rockman, MD

7:29 – 7:34 What Have We Learned: Venous Thermography
Dale Maharaj, FACS

7:35 – 7:40 H.O.T. Study: Temperature Impact On Venous-Lymphatic Drainage
Sergio Gianesini, MD, PhD

7:41 – 7:46 Phlebolymphedema: Diagnosis And Treatment Algorithm
Antonios P. Gasparis, MD

7:47 – 7:52 Patient With Lower Extremity Edema: How To Make The Diagnosis
Nicos Labropoulos, PhD

7:53 – 7:58 What Promotes Symptoms And Signs In CVD: SFJ Or Tributary Reflux
Tomasz Urbanek, MD, PhD

7:59 – 8:04 **Panel Discussion**

SESSION 65 (Trianon Ballroom, 3rd Floor)

IMPORTANT PAPERS, GUIDELINES

Moderators: *Lowell S. Kabnick, MD*
Alun H. Davies, MA, DM, DSc
Armando Mansilha, MD, PhD

8:05 – 8:10 Systematic Review Of Adverse Events After Interventions For Superficial Venous Insufficiency
Erin H. Murphy, MD

8:11 – 8:16 Summary (2025) Of Important Venous And Lymphatic Articles: International Angiology: Editor's Choice
Armando Mansilha, MD, PhD

8:17 – 8:22 Summary (2025) Of Important Articles: Journal of Phlebology: Editor's Choice
Alun H. Davies, MA, DM, DSc

8:23 – 8:28 Summary (2025) Of Important Articles: Journal of Vascular Surgery Venous and Lymphatic Disorders: Editor's Choice
Anil P. Hingorani, MD

8:29 – 8:34 China's Venous Guidelines
Jinsong Wang, MD, PhD

8:35 – 8:40 Latin American Consensus On Chronic Venous Disease And Diabetes
Oscar H. Bottini, MD

8:41 – 8:46 Lack Of Improvement After Venous Ablation: Can Guidelines Impact Outcomes
Elna M. Masuda, MD

8:47 – 8:52 Venous Ulcer Guidelines: AVF Update
Alisha Oropallo, MD, PhD

8:53 – 8:58 Compression Therapy After Truncal Ablation: Evidence
Maxim Shaydakov, MD, PhD

8:59 – 9:04 RCT Trial: CEDAR RF vs. CLOSURE FAST
Lowell S. Kabnick, MD

9:05 – 9:10 **Panel Discussion**

SESSION 66 (Trianon Ballroom, 3rd Floor)

SUPERFICIAL VEIN TREATMENT STRATEGIES I

Moderators: *Kursat A. Bozkurt, MD*
Randolph Todd C. Jones, MD
Jinsong Wang, MD, PhD

9:11 – 9:16 Update On Minimally Invasive Therapy On Varicose Veins In China
Jinsong Wang, MD, PhD

9:17 – 9:22 During Saphenous Ablation And Or Phlebectomy, Where And When Do You Have To Worry About Saphenous, Sural, And Peroneal Nerves
Shoaib F. Padaria, MD, DM

9:23 – 9:28 Thrombus Extension After Cyanoacrylate Closure vs. Endovenous Glue Induced Thrombosis: What Is The Difference And Treatment
Nuttawut Sermsathanasawadi, MD, PhD

9:29 – 9:34 Simultaneous ASV Ablation For Recurrence Prevention In Patients Undergoing GSV Treatment: 3-Year Results Of The Synchronous Trial
Tobias Hirsch, MD

9:35 – 9:40 Combined Treatment Of Varicose Veins: When, Where, And How
Andriy O. Nykonenko, MD, PhD

9:41 – 9:46 Varicose Vein Procedures And Prophylactic Anticoagulation: Do We Have Consensus
Randolph Todd C. Jones, MD

9:47 – 9:52 Foam Or Phlebectomy: Which Is Better For Varicose Veins
Kerstin Simons, MD, MBChB

9:53 – 9:58 How To Manage The Varicose Veins Before, During Or After Endovenous Thermal Ablation Of Saphenous Vein: Evidence
Matthieu M.J. Josnin, MD

9:59-10:04 Small Saphenous Vein Treatment: What Have I Learned
Sherry D. Scovell, MD

10:05-10:10 The Length Of Treated Great Saphenous Vein As A Marker Of Post-Procedural Improvement In Clinical And Patient Reported Outcomes
Windsor Ting, MD

10:11-10:16 **Panel Discussion**

SESSION 67 (Trianon Ballroom, 3rd Floor)

SUPERFICIAL VEIN TREATMENT STRATEGIES II

Moderators: ***Jose I. Almeida, MD, RPVI, RVT***
Peter Gloviczki, MD, PhD
Manj S. Gohel, MD

10:17-10:22 Conservative Treatment Effectiveness On Chronic Venous Disease Symptoms And Quality Of Life In Patients With Obesity: Results From An Observational Study
Alejandro J. Gonzalez Ochoa, MD

10:23-10:28 Factors Associated With Recanalization And Reintervention Following Below-Knee Polidocanol Endovenous Microfoam Ablation For Great Saphenous And Small Saphenous Veins
Anil P. Hingorani, MD

10:29-10:34 ARME (Ablation Material Deep Vein Extension) – A New Term To Describe EHIT, EGIT, EFIT, EMIT, EHIFU, EMOCA
Peter F. Lawrence, MD

10:35-10:40 ARME (Ablation Material Deep Vein Extension) – Do We Know The Natural History Of EHIT, EGIT, EFIT, EMIT, EHIFU, EMOCA
Lowell S. Kabnick, MD

10:41-10:46 Venclose (RFA): Multicenter Clinical Update
Erin H. Murphy, MD

10:47-10:52 Management Of Labial And Vulvar Veins: Phlebectomy And/Or Sclerotherapy: Tips And Tricks
Aleksandra Jaworucka-Kaczorowska, MD, PhD

10:53-10:58 How To Treat Superficial Venous Disease In Patients With KTS
Peter Gloviczki, MD, PhD

10:59-11:04 Can We Prevent Varicose Vein/Venous Insufficiency Recurrence
Yung-Wei Chi, DO

11:05-11:10 Which Saphenous Vein Recanalization Should Be Treated And By What Method: Evidence-Based
Jose I. Almeida, MD, RPVI, RVT

11:11-11:16 **Panel Discussion**

SESSION 68 (Trianon Ballroom, 3rd Floor)

SUPERFICIAL VEIN TREATMENT STRATEGIES III

Moderators: ***Lowell S. Kabnick, MD***
Kathleen J. Ozsvath, MD
Matthieu M.J. Josnin, MD

11:17-11:22 Physician Compounded Foam Comparing Different Manufacturing Techniques: Reproducible, Efficacious, And Safety
Matthieu M.J. Josnin, MD

11:23-11:28 Is It Safe To Ablate The GSV With A History Of DVT/DVR (Iliofemoral; Femoral Vein: Evidence-Based
Mikel Sadek, MD

11:29-11:34 Why Use Venaseal With Ultrasound Guided Sclerotherapy
Kathleen J. Ozsvath, MD

11:35-11:40 If I Have A 1470nm Wavelength, Should I Discard And Buy A 1940nm Wavelength Laser
Nicolas Neaume, MD

11:41-11:46 Venous Issues And Treatment Of The Elderly: What Must Be Done And When
Kerstin S. Schick, MD

11:47-11:52 Vein Step: A Prospective, Observational, International Study To Assess Effectiveness Of Conservative Treatments In Chronic Venous Disease
Jorge H. Ulloa, MD

11:53-11:58 Update On Living Meta-Analysis Of Non-Compounded Polidacanol 1% Endovenous Microfoam (Varithena) Or Thermal Ablation
Lowell S. Kabnick, MD

11:59-12:04 **Panel Discussion**

12:04- 1:04 **Lunch Break — Rhinelander Gallery, 2nd Floor**
Visit Exhibits And Pavilions (2nd and 3rd Floors)

SESSION 69 (Trianon Ballroom, 3rd Floor)

SUPERFICIAL VEIN TREATMENT STRATEGIES IV

Moderators: ***Steve Elias, MD***
Lowell S. Kabnick, MD
Ahmed Gaweesh, MD, MSc, PhD

1:05 – 1:10 Is Morbid Obesity A Contraindication To Superficial Vein Treatment
Andrea T. Obi, MD

1:11 – 1:16 Entire Great Saphenous Vein Treatment With Non-Thermal Ablation vs. Staged Thermal And Non-Thermal Ablation In C6 Patients: Which Is Better
Juan Carlos Jimenez, MD, MBA

1:17 – 1:22 TOTEM Trial: Total Endovenous Laser Ablation: Update
Luca Palombi, MD

1:23 – 1:28 Comparative Analysis Of VenaBlock And VenaSeal In Treating Chronic Venous Insufficiency: Efficacy And Adverse Events
Kursat A. Bozkurt, MD

1:29 – 1:34 Comparison Of Different Venous Clips And Clamps That Are Under Development
Steve Elias, MD

1:35 – 1:40 Cyanoacrylate: French Indications
Nicolas Neaume, MD

1:41 – 1:46 Thermal Ablation: How To Minimize Postoperative Pain
Ahmed Gaweesh, MD, MSc, PhD

1:47 – 1:52 Physician Compounded Foam For Truncal Vein Disease: When, Why And How
Sarah Onida, BSc, MBBS, PhD

1:53 – 1:58 What New Superficial Devices Are Approved Or Pending Approval For Truncal Ablation
Lowell S. Kabnick, MD

1:59 – 2:04 **Panel Discussion**

SESSION 70 (Trianon Ballroom, 3rd Floor)

SUPERFICIAL VEIN TREATMENT STRATEGIES V

Moderators: ***Manj S. Gohel, MD***
Misaki M. Kiguchi, MD
Julianne Stoughton, MD

2:05 – 2:10 A Systematic Review And Meta-Analysis Of Randomized Controlled Trials Comparing Thermal And Non-Thermal Endovenous Ablation
Armando Mansilha, MD, PhD

2:11 – 2:16 When Not To Ablate The GSV In Patients With Femoropopliteal PTS
Misaki M. Kiguchi, MD

2:17 – 2:22 Foam Sausage Technique: What Is It: 1 Year Follow-Up
Victor M. Canata, MD, PhD

2:23 – 2:28 Body Mass Index And CEAP Clinical Severity Score
Oscar H. Bottini, MD

2:29 – 2:34 Truncal Ablation Plus Foam Sclerotherapy Is Not Superior To Staged Tributary Treatment
Tomasz Urbanek, MD, PhD

2:35 – 2:40 Tips And Tricks For Ultrasound Guided Foam Sclerotherapy: Varicose Veins
Alvaro Orrego, MD

2:41 – 2:46 Hypersensitivity Reactions In Patients Undergoing Cyanoacrylate In Superficial Veins: What To Avoid
Julianne Stoughton, MD

2:47 – 2:52 Venous Thrombosis After Foam: What To Do
Kerstin S. Schick, MD

2:53 – 2:58 Randomized Controlled Outcomes Comparing Cyanoacrylate To Endothermal Ablation: 36-Month VenaSeal Spectrum Results
Manj S. Gohel, MD

2:59 – 3:04 **Panel Discussion**

SESSION 71 (Trianon Ballroom, 3rd Floor)

VENOUS ULCERS

Moderators: Ahmed Gaweesh, MD, MSc, PhD
Monika L. Gloviczki, MD, PhD
Mark D. Iafrati, MD

VENOUS ULCERS - PART 1

3:05 – 3:10 Dermal Ulcers: Differential And How To Make The Diagnosis
Raghu Kolluri, MD

3:11 – 3:16 Treatment Algorithm For Venous Leg Ulcers
Eric Hager, MD

3:17 – 3:22 Evidence Gaps In Treating Venous Leg Ulcers
Mark D. Iafrati, MD

3:23 – 3:28 Venous Ulcer Healing In Morbidly Obese Patients: What Is The Best Therapy
Mark H. Meissner, MD

3:29 – 3:34 Venous Ulcer Registry Study (Indian): What Did We Learn
Ravul Jindal, FRCS *(PowerPoint Presentation With Synched Audio)*

3:35 – 3:40 Cold Atmospheric Plasma: A New Approach In VLU Treatment: CAPTURE TRIAL
Tobias Hirsch, MD

3:41 – 3:46 Underwater Sonography: What Have We Learned About Venous Physiology
Dimitrios Kontothanassis, MD

3:47 – 3:52 **Panel Discussion**

VENOUS ULCERS – PART 2

Moderators: Kathleen D. Gibson, MD
Joann M. Lohr, MD
Nuttawut Sermsathanasawadi, MD, PhD

3:53 – 3:58 Customized Pressure Guided Bandage For Treatment Of Venous Ulcers
Nuttawut Sermsathanasawadi, MD, PhD

3:59 – 4:04 What's New Regarding Pharmacological Treatment For Venous Ulcers
Monika L. Gloviczki, MD, PhD

4:05 – 4:10 Sub-Ulcer Venous Plexus Treatment: How, When And Results
Ahmed Gaweesh, MD, MSc, PhD

4:11 – 4:16 Skin Substitutes To Promote Venous Leg Ulcer Healing: What Is The Evidence
Joann M. Lohr, MD

4:17 – 4:22 Prospective Clinical Trial Evaluating Cyanoacrylate Closure In Patients With C6: Spectrum VLU Results
Kathleen D. Gibson, MD

4:23 – 4:28 Compression, Oxygen, And Humidification: Improves Venous Wound Healing And Reduces Venous Ulcer Recurrence
Joann M. Lohr, MD

4:29 – 4:34 Duplex Surveillance For C5: Why
Alun H. Davies, MA, DM, DSc

4:35 – 4:40 **Panel Discussion**

SESSION 72 (Trianon Ballroom, 3rd Floor)

AESTHETICS AND FOAM I

Moderators: ***Victor M. Canata, MD, PhD***
Mark S. Whiteley, MS, FRCS

4:41 – 4:46 Imaging Of The "Fine Veins" For Aesthetic Treatment
Nicos Labropoulos, PhD

4:47 – 4:52 The Role Of Mini-EVLA And Micro-EVLA In The Treatment Of Aesthetic Veins On The Face
Mark S. Whiteley, MS, FRCS

4:53 – 4:58 How To Avoid Complications From Sclerotherapy
Victor M. Canata, MD, PhD

4:59 – 5:04 Management Of Actual Or Suspected Inadvertent Intra-Arterial Injection Of Sclerosants
Shoaib F. Padaria, MD, DM

5:05 – 5:10 Venous Lesions Of The Face
Anelise Rodrigues, MD, MHSc

5:11 – 5:16 Quick Case 1: Ask The Panel Or Audience What Would You Do (Aesthetics)
Luca Palombi, MD

SESSION 73 (Trianon Ballroom, 3rd Floor)

AESTHETICS AND FOAM II

Moderators: ***Lina M. Vargas, MD, RPVI***
Sergio Gianesini, MD, PhD
Jorge H. Ulloa, MD

5:17 – 5:22 Incorporating An Aesthetic Practice Into A Phlebology Practice: Where Do You Draw The Line
Lina M. Vargas, MD, RPVI

5:23 – 5:28 Sclero-Pharmacology Of Microfoam: Science From The Bench To The Bedside
Sergio Gianesini, MD, PhD

5:29 – 5:34 Foam Differences: Is There Any Major Consideration At Time Of Treatment For C1 Patients
Jorge H. Ulloa, MD

5:35 – 5:40 Treatment Of Reticular Veins With EVLA: Is It Possible
Luca Palombi, MD

5:41 – 5:46 Ugly Hand And Foot Veins: What To Do
Mark S. Whiteley, MS, FRCS

5:47 – 5:52 Telangiectasias Are Not Simple To Treat: Consider Expertise, Strategy And Safety
Gutenberg A. Gurgel, MSc, MD

5:53 – 5:58 Treatment Of Telangiectasias And Reticular Veins: Laser And Or Sclerotherapy
Anelise Rodrigues, MD, MHSc

5:59 – 6:04 Quick Case 2: Ask The Panel Or Audience What Would You Do (Aesthetics)
Lina M. Vargas, MD, RPVI

End of Program I

PROGRAM J (SESSIONS 74-78)

MULTIDISCIPLINARY STROKE PREVENTION AND TREATMENT

Americas Hall 1 North, 3rd Floor

SESSION 74 (Americas Hall 1 North, 3rd Floor)

NEXT GENERATION ACUTE STROKE TRIAGE, ARTIFICIAL INTELLIGENCE (AI) AND THROMBECTOMY

Moderators: ***Allan L. Brook, MD***
Joshua A. Hirsch, MD

7:45 – 7:50 Welcome And State Of Acute Stroke Care In 2026
Allan L. Brook, MD

7:51 – 7:59 What Have Large-Core Trials Truly Changed: Focus On SELECT2, ANGEL-ASPECT, RESCUE-Japan LIMIT Evolution
David S. Liebeskind, MD, MBA *(PowerPoint Presentation With Synched Audio)*

8:00 – 8:08 Direct-To-Angio Suite Stroke Care: Prime Time Or Still Experimental
Reade A. De Leacy, MBBS

8:09 – 8:17 DMVO/MEVO Stroke: Which Patients Truly Benefit From Medical Perspective: Focus On Distal Thrombectomy Patient Selection
Paul Lleva, MD

8:18 – 8:26 AI Stroke Triage: Helpful Tool Or Dangerous Dependency: Focus On Viz.ai, RapidAI, Automated LVO/ICH Detection
Kevin J. Abrams, MD

8:27 – 8:35 Low NIHSS Stroke: Treat Aggressively Or Observe
Oleg Otlivanchik, MD, PhD

8:36 – 8:44 Treatment Of Vertebral Artery Injuries: When Open; When Endo: Technical Tips And What Specialties Need To Be Involved
Domenico Valenti, DMChir, PhD

8:45 – 8:55 **Panel Discussion: Who Should NOT Get Thrombectomy In 2026**
Panelist(s): Paul Lleva, MD; Reade A. De Leacy, MBBS; Colin P. Derdeyn, MD

SESSION 75 (Americas Hall 1 North, 3rd Floor)

CAROTID REVASCULARIZATION: CEA, TCAR, CAS AND BEYOND

Moderators: ***Thomas G. Brott, MD; Colin P. Derdeyn, MD***

8:56 – 9:04 Asymptomatic Carotid Disease In 2026: Who Should Actually Be Treated
Anne L. Abbott, MD, PhD *(PowerPoint Presentation With Synched Audio)*

9:05 – 9:13 TCAR vs. CAS vs. CEA: The Real-World Data Debate
Peter A. Schneider, MD

9:14 – 9:22 Carotid Web: The Underrecognized Stroke Etiology
Evan C. Lipsitz, MD, MBA

9:23 – 9:31 Intracranial Atherosclerosis: Medical Therapy Alone Is Not Enough
Thomas G. Brott, MD

9:32 – 9:40 Cost, Value And The Future Of Carotid Intervention
William A. Gray, MD

9:41 – 9:56 GRAND FINALE PANEL: What Will Stroke And Carotid Intervention Look Like In 2030
Panelist(s): Peter K. Nelson, MD; William A. Gray, MD; Seon-Kyu Lee, MD, PhD

SESSION 76 (Americas Hall 1 North, 3rd Floor)

INTRACRANIAL HEMORRHAGE, MMA EMBOLIZATION AND EMERGINC THERAPIES

Moderators: ***Deepak Khatri, MD; David Gordon, MD; Seon-Kyu Lee, MD, PhD***

9:57-10:05 MMA Embolization In 2026: Is This Now Standard Of Care
Jared Knopman, MD

10:06-10:14 Best Embolic Agent For Chronic SDH: Particles, Liquid Embolics Or Both
Chirag D. Gandhi, MD

10:15-10:23 How Much Technological Complexity Translates Into Meaningful Benefit For Patients, And At What Cost
Carlos Clayton Macedo de Freitas, MD, PhD

10:24-10:32 AI In Practice: Foundational Models And Draft Head CT Reporting
Lawrence N. Tanenbaum, MD

10:33-10:41 Reimbursement, No Surprises Act And Stroke Economics
Joshua A. Hirsch, MD

SESSION 77 (Americas Hall 1 North, 3rd Floor)

HEADACHE, VENOUS DISEASE AND THE EXPANDING NIR TOOLBOX

Moderators: ***Peter K. Nelson, MD***
Allan L. Brook, MD

10:42-10:50 Venous Sinus Stenting: Expanding Indications Or Overutilization
Athos Patsalides, MD, MPH

10:51-10:59 Pulsatile Tinnitus: Diagnostic Algorithm And Interventional Solutions
Seon-Kyu Lee, MD, PhD

11:00-11:08 CSF Leak, Low Pressure And High Pressure Headaches: Imaging Pearls And Expedited Care
Amanda Baker, MD

11:09-11:17 Circulatory Rearrangement In The Treatment Of Cerebral Aneurysms
Peter K. Nelson, MD

11:18-11:26 Imaging Of Headaches: Do We Have A Clue Or Algorithm: Latest Treatment Trends . . .
Richard L. Zampolin, MD

11:27-11:35 Best Neurointerventional Literature Of 2026
Neil Haranhalli, MD

SESSION 78 (Americas Hall 1 North, 3rd Floor)

ACCESS, DEVICES, ROBOTICS AND PROCEDURAL INNOVATION

Moderators: ***Sudhakar R. Satti, MD***
Chirag D. Gandhi, MD

11:36-11:44 Transradial First Neurointervention: Has Femoral Become Secondary
Sudhakar R. Satti, MD

11:45-11:53 Intracranial Atherosclerosis: Is It Time For A New Trial
Colin P. Derdeyn, MD

11:54-12:02 Aspiration vs. Sentriever vs. Combined Approach: What Actually Wins
Deepak Khatri, MD

12:03-12:11 Endovascular Emergency Treatment Of Carotid Blowout: Planning, Preparation And Technical Tips Are Essential
Michael B. Silva, Jr., MD

12:12-12:20 The Evolution Of Neuro Endovascular Procedures To The Ambulatory Setting
Elad I. Levy, MD, MBA

12:21-12:22 **End of Program J**

PROGRAM K (SESSIONS 79-84)

AIMsymposium AT VEITHsymposium: TOPICS OF INTEREST TO INTERVENTIONAL RADIOLOGISTS

Americas Hall 1 South, 3rd Floor

SESSION 79 (Americas Hall 1 South, 3rd Floor)

INNOVATIONS IN INTERVENTIONAL RADIOLOGY AND VASCULAR SURGERY

Moderators: ***Ziv J. Haskal, MD***
Lawrence Hofmann, MD

7:50 – 8:00 Opening Remarks
Jacob Cynamon, MD

8:00 – 8:10 Ideas Are Common, Implementation Is Not: What It Takes To Succeed
Michael G. Tal, MD, MBA

8:10 – 8:20 I Have An Idea What Do I Do Next
Mark W. Mewissen, MD, RVT

8:20 – 8:30 Patent Pending vs. Patent Issued
Jacob Cynamon, MD

8:30 – 8:40 Start A Company Or Try To Sell Your Idea: Best Strategy
Lawrence Hofmann, MD

8:40 – 8:50 Are Venture Capitalists (VCs) Your Friend
Lindsay Machan, MD

8:50 – 9:00 Obstacles To Success
Ziv J. Haskal, MD
Barry T. Katzen, MD

9:00 – 9:10 Regulatory Hurdles: Yesterday And Today
Timothy P. Murphy, MD

9:10 – 9:20 My Product Is Available, Why Won't It Sell
Michael G. Tal, MD, MBA

9:20 – 9:40 **Panel Discussion**

SESSION 80 (Americas Hall 1 South, 3rd Floor)

THROMBECTOMY DEVICES

Moderators: Robert A. Lookstein, MD, MHCDL
Kapil Wattamwar, MD

9:40 – 9:50 What Were The Medical Needs That Drove The Industry
Robert A. Lookstein, MD, MHCDL

9:50-10:00 Early History Of Clot Management And Small Devices – Part 1
Jacob Cynamon, MD

10:00-10:10 Early History And Rationale For Large Bore Devices: From Benchtop To Sales
Ripal T. Gandhi, MD

10:10-10:20 Evolution Of Later Generation Large Bore Devices
Paul M. Armenta, MD

10:20-10:45 **Case Presentations/Panel Discussion**

10:45-11:00 **Break – Visit Exhibits And Pavilions (2nd and 3rd Floors)**

SESSION 81 (Americas Hall 1 South, 3rd Floor)

EMBOLIZATION DEVICES

Moderators: Ziv J. Haskal, MD
Timothy P. Murphy, MD

11:00-11:10 In The Beginning: From Autologous Clot To Pushable Coils To Stop Bleeding
Richard A. Baum, MD, MPA, MBA

11:10-11:20 Particle Embolization: From Gelfoam To Dissolving Beads, Extending The IR Footprint
Dan Shilo, MD

11:20-11:30 Detachable Coils: How They Differ (Fibered, Non-Fibered, Hydrogel, Pushing Wire, Detachment Method): Is The Expense Justified
Kapil Wattamwar, MD

11:30-11:40 Liquid Embolics: Uses And Abuses (Glue, Onyx, LAVA, Obsideo, Instylla)
Ziv J. Haskal, MD

11:40-12:00 **Case Presentations And Panel Discussion**

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

SESSION 82 (Americas Hall 1 South, 3rd Floor)

INNOVATIONS IN STENT GRAFTS

Moderators: Mark W. Mewissen, MD, RVT
Robert A. Lookstein, MD, MHCDL
Marcelo Guimaraes, MD, MBA

1:00 – 1:10 Physician-Made Devices Of The 1980s: Medical Legal Challenges That Needed To Be Overcome
Michael L. Marin, MD

1:10 – 1:20 The Beginning Of Industry Grafts: Early Failures Lead To Later Success
Kenneth Ouriel, MD, MBA

1:20 – 1:30 Aortic Aneurysms, New Devices: Fenestrated, Elephant Trunk, Component Devices, Etc.: Regulatory Hurdles
Michael D. Dake, MD

1:30 – 1:40 Thoracic Aneurysms, New Devices: Fenestrated, Elephant Trunk, Component Devices, Etc.: Regulatory Hurdles
Michael D. Dake, MD

1:40 – 1:50 Stent Grafts, Drug Eluting Stents Or Balloons For Peripheral Vascular Disease
John H. Rundback, MD

1:50 – 2:00 Stent Grafts, Drug Eluting Stents Or Balloons For AVGs And Fistulas
Bart L. Dolmatch, MD

2:00 – 2:20 **Case Presentations And Panel Discussion**

2:20 – 3:10 **Break – Visit Exhibits And Pavilions (2nd and 3rd Floors)**

SESSION 83 (Americas Hall 1 South, 3rd Floor)
INNOVATIONS IN ONCOLOGY

Moderators: Jeff H. Geschwind, MD
Resmi A. Charalel, MD, MPH

3:10 – 3:20 The Innovation Of Ablative Therapy For Liver Cancer And How It Evolved
Jonathan Susman, MD

3:20 – 3:30 Did Conventional TACE Improve Outcomes And What Are The New Developments
Julius Chapiro, MD, PhD

3:30 – 3:40 Is There A Role For Embolization Prior To Ablation In The Management Of Renal Cell Cancer
David C. Madoff, MD

3:40 – 3:50 Advances In Radiotherapy Embolization (Y-90): What Is New
Edward Kim, MD

3:50 – 4:00 New Percutaneous Interventions In Oncology: Drug Stimulating Immunotherapy And Radiation Delivery Platforms
Joshua L. Weintraub, MD

4:00 – 4:10 Is Outpatient Histotripsy The Future Treatment Of Localized Liver Cancer
Mikhail T. Silk, MD

4:10 – 4:20 Is There A Role For Selective Hyperthermia
Jeff H. Geschwind, MD

4:20 – 4:30 Designing The Best Trial To Advance A Drug Or Device From Concept To Market
Ziv J. Haskal, MD

4:30 – 4:40 New Devices To Facilitate Local Drug Delivery In Liver And Pancreatic Cancer
Ripal T. Gandhi, MD

4:40 – 4:50 Advances In TIPS And Transvenous Liver Biopsies: What Worked And What Didn't
Jacob Cynamon, MD

4:50 – 5:00 **Panel Discussion**

SESSION 84 (Americas Hall 1 South, 3rd Floor)
IR INNOVATIONS IN PAIN MANAGEMENT

Moderators: Allan L. Brook, MD
Joshua A. Hirsch, MD

5:00 – 5:10 Basivertebral Nerve Ablation: Evidence, Patient Selection And Long-Term Outcomes
Stefano Marcia, MD

5:10 – 5:20 Image-Guided Spine Interventions: What Truly Works In 2026
Chiara Zini, MD, PhD

5:20 – 5:30 Percutaneous Innovations For Sacroiliac And Facet-Mediated Pain
Joshua A. Hirsch, MD

5:30 – 5:40 Vertebral Augmentation And Beyond: New Technologies For Compression Fractures
Allan L. Brook, MD

5:40 – 5:50 Regenerative And Biologic Therapies In Interventional Pain Medicine: Hype Or Reality
Douglas P. Beall, MD

5:50 – 6:00 **Panel Discussion: Future Directions In IR-Based Pain Management: Robotics, AI And Next Generation Therapies**

Panelist(s): Allan L. Brook, MD
Joshua A. Hirsch, MD
Stefano Marcia, MD
Chiara Zini, MD, PhD

End of Program K

FRIDAY, NOVEMBER 20, 2026

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 L (SESSIONS 85-92)

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 M (SESSIONS 93-100)

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 N (SESSIONS 101-111)

Deep Venous Disease
Location: Trianon Ballroom, 3rd Floor

PROGRAM L (SESSIONS 85-92)

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 85 (Grand Ballroom East, 3rd Floor)

PROGRESS IN THE PREVENTION AND TREATMENT OF SPINAL CORD ISCHEMIA (SCI) ASSOCIATED WITH THE TREATMENT OF THORACIC, THORACOABDOMINAL AND COMPLEX ABDOMINAL ANEURYSMS

Moderators: ***Adam Beck, MD***
Germano C.G. Melissano, MD
Christian D. Etz, MD, PhD

6:46 – 6:51 How Cerebrospinal Fluid (CSF) And Blood Biomarkers Can Predict SCI And Help In Its Prevention With Thoracic Aortic Aneurysm And TAAA Repairs (Endo And Open)
Hamdy Awad, MD

6:52 – 6:57 Extra Anatomic Bypasses To Preserve Segmental Spinal Artery Flow And Protect Against SCI With Endo TAAA Repairs: When And How To Do Them
Sukgu M. Han, MD, MS

6:58 – 7:03 How AI Can Help In The Prediction Of SCI After Complex Endovascular Aortic Repairs: Can It Be An Indication For CSF Drainage
Kak Khee Yeung, MD, PhD

7:04 – 7:09 Complications Of CSF Drainage To Decrease SCI With TAAA Repairs: It Is Not A Benign Procedure: When To Use It And When Not: How To Decrease These Complications
Gustavo S. Oderich, MD, PhD

7:10 – 7:15 Evolution And Value Of Motor Evoked Potentials (MEPs) In Preventing SCI With Open TAAA Repairs: A 20-Year Experience In The Largest Global TAAA Series: How Can The Method Guide Surgical And Other Treatment To Minimize SCI
Geert Willem H. Schurink, MD, PhD
Michael J. Jacobs, MD, PhD

7:16 – 7:21 Update On The Value Of MEPs To Decrease SCI With Endovascular TAAA Repairs: Technical Tips And Pitfalls In Their Use
Geert Willem H. Schurink, MD, PhD
Michael J. Jacobs, MD, PhD

7:22 – 7:27 Update On Optimal Protocols To Prevent SCI During Open And Endo TAAA Repairs Including The Role Of CSF Drainage: What Is Known, What Is Unknown And What Remains Controversial
Germano C.G. Melissano, MD
Andrea Kahlberg, MD

7:28 – 7:33 What Findings From The US Aortic Research Consortium (ARC) Tell Us About SCI And CSF Drainage: Its Prophylactic Use And Its Therapeutic Use: When It Is Beneficial And When It Is Not
Adam Beck, MD

7:34 – 7:39 Minimizing SCI With TAAA Repairs (Endo And Open) By Improving The Intraspinal Collateral Arterial Network By Intercostal Embolization As Preconditioning To Prevent Ischemia (MIS2ACE): Update On Progress Of The PAPA-ARTIS RCT To See If This Helps
Christian D. Etz, MD, PhD

7:40 – 7:45 A Single Center Clinical Experience With Intercostal Coil Embolization (MIS2ACE) To Prevent SCI With Endo TAAA Repairs: Do We Still Need An RCT: How To Do The Procedure And When Is It Indicated
Daniela Branzan, MD
Andrej Schmidt, MD

7:46 – 7:54 **Panel Discussion**

SESSION 86 (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: *Frank J. Veith, MD*
Marc L. Schermerhorn, MD
D. Christopher Metzger, MD

MESH COVERED STENTS (MCSTs)

7:54 – 7:59 The 3 Micromesh Stents For Carotid Artery Stenting (CAS): What Are The Differences Between Them: Do These Differences Matter And What Are Their Long-Term Results To Date
D. Christopher Metzger, MD
Max Amor, MD

8:00 – 8:05 Latest Findings From The ROADSAVER CAROTID ARTERY STENT Trial: Advantages Of This Dual-Layer Micromesh Covered Stent From Terumo: What Is The Laterality Phenomenon In Carotid Artery Stenting
Stefan Müller-Hülsbeck, MD *(PowerPoint Presentation With Synched Audio)*

8:06 – 8:11 Progress And Updated Clinical Trials With The CGuard And CGuard Prime MicroMesh Covered Stents (From InspireMD) Including 3-Year Follow-Up Data On 621 Asymptomatic Patients: Are These MCSTs Making A Positive Difference Without Downsides: Should They Become First Line Therapy For All CAS And TCAR Procedures
Piotr Musialek, MD, DPhil

8:12 – 8:17 Primary Endpoint Results Of The InspireMD C-GUARDIANS II MICROMESH STENT TCAR Trial, And Update On C-GUARDIANS III Trial Status: Will This System Optimize Carotid Stenting
Patrick J. Geraghty, MD

8:18 – 8:23 New Devices And Techniques In Carotid Artery Stenting: How Are They Reducing Brain Microembolism And Procedural Strokes
Laura Capoccia, MD, PhD

8:24 – 8:29 Selecting The Best Invasive Treatment For Carotid Stenosis (CEA vs. TCAR vs. TFCAS) With A New AI Statistical Method That Is Cheaper And Quicker Than An RCT: It Picks The Best Procedure For Each Patient Based On Their Own Medical And Anatomic Features: Validation And Results
Mahmoud B. Malas, MD, MHS

8:30 – 8:35 **Panel Discussion**

TCAR RELATED TOPICS

8:36 – 8:41 Comparative Contemporary Performance And Risks Of TCAR And CEA Show Them To Be Superior To Transfemoral CAS (TFCAS) For The Treatment Of Symptomatic Carotid Artery Stenosis
Marc L. Schermerhorn, MD

8:42 – 8:47 For Symptomatic Carotid Stenosis Can Some Highly Skilled And Experienced Operators Perform TFCAS With Stroke Rates Comparable To TCAR And CEA: What Would Be Their Qualifications And Would There Be Anatomic Or Other Restrictions
William A. Gray, MD

8:48 – 8:53 Results Of Intravascular Lithotripsy (IVL — Shockwave — J&J) To Enable TCAR For Surgically Inaccessible Heavily Calcified Symptomatic Carotid Stenosis: Technical Tips
Peter L. Faries, MD

8:54 – 8:59 Use Of IVL In Calcified Carotid Arteries Prior To Stent Placement In TCAR Is Feasible But What Are The Pitfalls And Which Lesions Should Be Avoided: Can IVL Be Used With TFCAS
Peter A. Schneider, MD

9:00 – 9:05 What Is An Isolated Middle Cerebral Artery And How Does It Increase The Risk Of Stroke With TCAR: How Can This Risk Be Avoided
Frank R. Arko, MD

9:06 – 9:11 Carotid Dissections With TCAR: Causes; How Often; How Morbid; How To Avoid; How To Fix
Richard J. Powell, MD

9:12 – 9:17 TCAR With Flow Reversal Combined With Mesh Covered Stents Is The Best Invasive Treatment For Carotid Stenosis In Most Symptomatic Patients: What Are The Long-Term Results, The Limitations Or Downsides
Ralf R. Kolvenbach, MD *(PowerPoint Presentation With Synched Audio)*

9:18 – 9:23 **Panel Discussion**

9:24 – 9:34 **Break — Visit Exhibits And Pavilions (2nd and 3rd Floors)**

SESSION 87 (Grand Ballroom East, 3rd Floor)

MORE CAROTID HOT TOPICS RELATED TO TCAR, CEA, CAS, ARE PROCEDURE NUMBERS INCREASING OR DECREASING, EFFECTS OF INTERVENTIONS ON COGNITIVE FUNCTION AND MCSTs

Moderators: *Thomas G. Brott, MD*
Mahmoud B. Malas, MD, MHS
Jon S. Matsumura, MD

9:35 – 9:40 **DEBATE:** TCAR Results To Date May Not Be As Good As They Seem: It Is Why We May Still Need An RCT Comparing TCAR With CEA To Treat Carotid Stenosis: CREST 2 Doesn't Change This
Ali F. AbuRahma, MD

9:41 – 9:46 **DEBATE:** Not So: We Do NOT Need An RCT Comparing TCAR With Other Treatments: Real-World Data Prove Its Safety, Efficacy, And Superiority As A Treatment For Carotid Stenosis
Charles J. Bailey, MD

ARE CAROTID PROCEDURAL NUMBERS INCREASING OR DECREASING

9:47 – 9:52 Surprising Trends In Usage Of CEA, TFCAS, And TCAR Before And After Medicare's Expansion Of Reimbursement For Carotid Stenting: CEA And TCAR Usage Decreased; TFCAS Increased: What Will The Impact Of CREST 2 Be
Jesse A. Columbo, MD, MS

FIXING CAROTID STENOSIS AND COGNITIVE FUNCTION

9:53 – 9:58 **DEBATE:** Invasive Treatment Of Asymptomatic Carotid Stenosis (ACS) Improves Cognitive Function: The Evidence And What Future Studies Are Needed
Wei Zhou, MD

9:59-10:04 **DEBATE**: Not So: A Systematic Review Shows NO Benefit In Cognitive Function From Invasive Treatment Of Asymptomatic Carotid Stenosis
Gianluca Faggioli, MD

10:05-10:10 How Was Cognitive Function Assessed In CREST 2 And CREST H: CAS Or CEA Did NOT Improve Cognitive Function Outcomes Even When Carotid Flow Was Impaired
Brajesh K. Lal, MD
Thomas G. Brott, MD

PERCUTANEOUS TCAR

10:11-10:16 A System For Percutaneous TCAR With Reversal Of Flow Protection: How Does It Work And Multicenter Clinical Experience To Date: What About Other Similar PQ Systems Including The One From Pylon Medical
Wayne W. Zhang, MD

MORE ABOUT MESH COVERED STENTS

10:17-10:22 CGuard Micronet-Covered Stents (From InspireMD) Trap Plaque Particles Between The Stent And Vessel Wall (Plaque Sequestration): When Is It Valuable With High-Risk Lesions Other Than Those In The Carotids
Piotr Musialek, MD, DPhil

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

SESSION 88 (Grand Ballroom East, 3rd Floor)
MORE CAROTID RELATED NEW TOPICS DEALING WITH TFCAS, CEA FOR HIGH LESIONS, BEST EMBOLIC BRAIN PROTECTION WITH CAS, TRANSRADIAL CAS, AND INTERPRETATIONS OF CREST 2

Moderators: ***Brajesh K. Lal, MD***
D. Christopher Metzger, MD
Michael B. Silva, Jr., MD

10:30-10:35 There Is Still A Major Role For TFCAS: What Is It: How Much Does Operator Experience And Skill Matter With TFCAS: Current Optimal Strategies For Embolic Protection During TFCAS
D. Christopher Metzger, MD

HIGH EXPOSURE OF THE ICA

10:36-10:41 Maneuvers And Technical Tips To Make Open CEA Treatment Of High Carotid Lesions Relatively Simple And Safe
Richard J. Powell, MD

10:42-10:47 How To Expose Very High Lesions Of The ICA And Treat Them Safely Without Help From ENT Surgeons: Technical Tips
Ramesh K. Tripathi, MD

10:48-10:53 With TFCAS In Asymptomatic Patients, Proximal Balloon Occlusion Cerebral Embolic Protection Has Lower Stroke And Death Rates Than Distal Filter Protection: This Explains Why TCAR With Carotid Occlusion And Reversal Of Flow Has Lower Stroke Rates Than Filter Protected TFCAS
Mahmoud B. Malas, MD, MHS

10:54-10:59 Transradial CAS Using Novel Low-Profile Double-Mesh Stents (Roadsaver - Terumo): Results And Technical Tips
Germano C.G. Melissano, MD
Andrea Kahlberg, MD

11:00-11:07 **Panel Discussion**

CREST 2 IS A GREAT RCT: HERE ARE SOME OF ITS MANY VARIED INTERPRETATIONS

11:08-11:13 How Operator Skill And Patient Selection May Influence CREST 2 And Other Carotid Trial Results: How They Can Overshadow Other Factors And Render CREST 2 And Other Trials Misleading
Gary M. Ansel, MD *(PowerPoint Presentation With Synched Audio)*

11:14-11:19 Beware CREST 2 May Lead To Massive Over-Treatment By CAS Of Asymptomatic Carotid Stenosis (ACS) If Risk Stratification By Imaging And Plaque Analysis Is Not Performed: Medical Treatment Is Best For Most (>90%) ACS Patients
Henrik Sillesen, MD, DMSc

11:20-11:25 CREST 2 Should Not Change What Is Deemed The Best Treatment For Most If Not All ACS Patients: Why Medical Treatment Is Better Than Any Invasive Procedure
Anne L. Abbott, MD, PhD *(PowerPoint Presentation With Synched Audio)*

11:26-11:31 CREST 2 Was A Good RCT But With A Serious Flaw: Strokes And Deaths Were Included For The 44-Day Perioperative Period; But In The 4-Year Results Only Stroke Data Without Death Data Were Included: Why And How Might This Influence CREST 2 Conclusions
Christopher K. Zarins, MD

11:32-11:37 CREST 2 Has Strengths And Raises Important Questions: What Are Its Weaknesses, How Should It Influence Practice And Why ACS Patients And Their Families Should Play A Big Role In Therapeutic Decision Making
Caitlin W. Hicks, MD, MS

11:38-11:43 CREST 2 Only Included Low Anatomic Risk Patients In The CAS Arm: I Now Start My ACS Patients On Intensive Medical Therapy: In Some Their Plaque Shrinks: Only If It Worsens, Do I Treat Them Invasively
Wesley S. Moore, MD

11:44-11:49 What Should Be The Role Of TCAR In The Treatment Of Asymptomatic Carotid Stenosis (ACS) Patients Since TCAR Was Not Included In CREST 2 And Medical Treatment Keeps Improving: Most ACS Patients Should Be Treated Medically
Jeffrey Jim, MD, MPHS

11:50-12:00 **Panel Discussion**

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

SESSION 89 (Grand Ballroom East, 3rd Floor)

MORE HOT CAROTID TOPICS: UPDATES ON KEY CAROTID RCTs (ECST 2, ACST 2 AND CREST 2) AND TREATMENT OF ASYMPTOMATIC CAROTID STENOSIS (ACS) AND POST RADIATION STENOSIS

Moderators: *Frank J. Veith, MD*
Wesley S. Moore, MD
Thomas G. Brott, MD

UPDATE ON ECST 2 AND ACST 2 RCTs

1:00 – 1:05 Update On ECST 2 RCT: In Carotid Stenosis Patients, Asymptomatic And Symptomatic, With Low Or Intermediate Stroke Risk, There Was No Benefit Of CEA Or CAS Over Optimal Medical Treatment With 2 Years Of Follow-Up
Gert J. de Borst, MD, PhD

CREST 2: MORE INTERPRETATIONS, COMMENTS OR NEW FINDINGS

1:06 – 1:11 Update From ACST 2 Shows A Higher Restenosis Rate With CAS Than CEA In Randomized Asymptomatic Carotid Stenosis Patients: How Might This Temper The Conclusions Of CREST 2
Richard Bulbulia, MA, MD

1:12 – 1:17 Why Did TFCAS Do So Well In CREST 2: Was It Credentialing, Site Selection, Lesion Selection; Anatomy Selection Or All Of The Above: How Should CREST 2 Impact On The Real World Treatment Of ACS Patients
Brajesh K. Lal, MD
Thomas G. Brott, MD

1:18 – 1:23 CREST 2: My Insights, New Findings And Future Studies Needed To Optimize The Treatment Of ACS Patients: What Was Left Out Of The Main CREST 2 Article That Should Have Been Included
Thomas G. Brott, MD

1:24 – 1:29 Despite The Results Of CREST 2, CEA Is Still Indicated For Some Patients With ACS: When And Why Is This So Dependent On Patient Factors And Skill Sets Available
Ali F. AbuRahma, MD

1:30 – 1:35 How Does CREST 2 Impact The Utilization Of TCAR To Treat ACS: When Is It Indicated And Why Is It The Best Treatment
Marc L. Schermerhorn, MD

1:36 – 1:41 Excellent Results With TFCAS To Treat ACS Have Been Reported Elsewhere And Corroborate The CREST 2 Findings
William A. Gray, MD

1:42 – 1:47 How Should Patients With High-Grade ACS Best Be Treated: Why CREST 2 Results Should Not Be Used To Influence Management Of Many ACS Patients In Real World Practice
Keith D. Calligaro, MD

1:48 – 1:54 **Panel Discussion**

IMPERFECTIONS AND WEAKNESSES IN CREST 2

1:54 – 1:59 Important Interpretations Of CREST 2 Are Related To Technical Prowess Of Operators, Discontinued Intervention, And Analysis Methods In The Trial's CEA And TFCAS Arms
Jon S. Matsumura, MD

2:00 – 2:05 What Is Imperfect In CREST 2 That Makes Its Results Subject To Misinterpretation With Regard To Practice Decisions In Patients With ACS
Charles J. Bailey, MD
W. Charles Sternbergh III, MD

2:06 – 2:11 Late Carotid And Vertebral Neurological Events In CREST 2: Understanding These Precluded A Significant Benefit From CEA vs. Medical Therapy In The Trial
Vikram S. Kashyap, MD

2:12 – 2:17 Issues With CREST 2 Which Made Me Withdraw From The Trial: How They Influence The Results And Its Interpretation
Michel S. Makaroun, MD

TREATMENT OF POST RADIATION CAROTID STENOSIS

2:18 – 2:23 Optimal Current Management Of Symptomatic And Asymptomatic Carotid Stenosis After Radiation Therapy For Cancer: What Is The Pathology: How Is It Best Treated And How Results Differ From Treatment Of Standard Carotid Stenosis
Peter L. Faries, MD

2:24 – 2:29 **Panel Discussion**

SESSION 90 (Grand Ballroom East, 3rd Floor)

MORE HOT TOPICS RELATED TO CAROTID DUPLEX, RECURRENT STENOSIS, INFECTIONS, BEST GRAFT, WEBS, IMPERFECT TCAR REVERSAL OF FLOW AND TFCAS FOR STRING SIGN

Moderators: *Keith D. Calligaro, MD*
William A. Gray, MD
Jacques Busquet, MD

2:30 – 2:35 What Are The Various Duplex Ultrasound Criteria For Determining High-Grade (>80%) Carotid Stenosis: Which Is Best: How Often Are They Misleading: Why Confirmatory Imaging And Ultrasonic Plaque Analysis Should Be Part Of Therapeutic Decision Making
R. Eugene Zierler, MD, RPVI

2:36 – 2:41 Why Duplex Surveillance Is Unnecessary After TFCAS And TCAR In Contrast To CEA
Ali F. AbuRahma, MD
Zach AbuRahma, DO

2:42 – 2:47 Most Recurrent Carotid Stenosis After CEA Is Benign: When Is Intervention Justified And What Intervention Should Be Used
Ashraf Mansour, MD

2:48 – 2:53 In Stent Restenosis After CAS Is Usually Benign: Can It Be Predicted: When Is It Threatening And How Is It Best Managed
Jacques Busquet, MD

2:54 – 2:59 Treatment Of Carotid Artery Infections Complicating Open Or Interventional Treatments: When A Bypass Is Needed For Infection, Tumor Or Trauma, What Graft Is Best: Technical Tips
Heron E. Rodriguez, MD

3:00 – 3:05 Carotid Webs: A Commoner Cause Of Strokes In Young Patients Than Realized: How To Diagnose, Treat And Follow It Up: Is Invasive Treatment Ever Justified For Asymptomatic Webs
Evan C. Lipsitz, MD, MBA

3:06 – 3:11 Neuroguard 3-In-1 Carotid Stent System (Contego Medical - Medtronic) With Integrated Balloon, Stent And Distal Filter: Updated Results From The PERFORMANCE III Trial With TCAR: Its Advantages Include Catching Emboli Escaping During TCAR's Incomplete Flow Reversal
Michael C. Siah, MD
Sean P. Lyden, MD
William A. Gray, MD

3:12 – 3:17 TFCAS In Symptomatic Patients With A Near Total Carotid Occlusion (String Sign): When Is It Indicated: How To Do It, Pitfalls To Be Avoided And Results
Ivo Petrov, MD, PhD

3:18 – 3:25 **Panel Discussion**

3:25 – 3:35 **Break – Visit Exhibits And Pavilions (2nd and 3rd Floors)**

SESSION 91 (Grand Ballroom East, 3rd Floor)

MORE HOT AND CONTROVERSIAL CAROTID TOPICS RELATED TO TANDEM LESIONS, MINIMAL INCISION CAROTID ENDARTERECTOMY (MICE), ANEURYSMS, VERTEBRAL ARTERY LESIONS AND CERVICAL ACCESS FOR ENDO TREATMENTS

Moderators: *Glenn M. LaMuraglia, MD*
Maciej L. Dryjski, MD, PhD
Michael H. Wholey, MD, MBA

MANAGEMENT OF TANDEM LESIONS

3:35 – 3:40 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: Controversies And Optimal Strategy
W. Darrin Clouse, MD

3:41 – 3:46 How To Manage Symptomatic Patients With Significant Tandem Lesions In The Neck And Intracranial Arteries: It Is Not Simple And Depends On Many Variables
Adnan H. Siddiqui, MD, PhD

MINIMALLY INCISION CAROTID ENDARTERECTOMY (MICE)

3:47 – 3:52 Minimal Incision CEA (MICE) vs. TCAR: Technical Tips For MICE, Cost Effectiveness, Advantages And Limitations Of Both
Enrico Ascher, MD

3:53 – 3:58 New Technical Steps To Perform MICE Safely And Quickly: How Can It Enable Same Day Discharge: What Are The Contraindications And Pitfalls
Robert M. Proczka, MD, PhD

3:59 – 4:04 When And How To Treat Cervical Carotid Artery Aneurysms: What Is Their Natural History, Contralaterality And Etiology: When Open Surgery, When Endo Treatment: Results Of Each: From An International Registry
Gert J. de Borst, MD, PhD

4:05 – 4:10 Why We Need An RCT Comparing TCAR With TFCAS, Transradial CAS And Best Medical Treatment For Asymptomatic And Symptomatic Carotid Stenosis: Why They Won't Happen And Bias Will Continue To Rule
Michael H. Wholey, MD, MBA

CURRENT TREATMENT OF VERTEBRAL ARTERY LESIONS

4:11 – 4:16 Optimal Current Treatment Of Vertebral Artery Stenotic Or Occlusive Lesions: When Best Left Alone: When Do They Need An Invasive Procedure; When Endovascular; When Open: Technical Tips
Adnan H. Siddiqui, MD, PhD

4:17 – 4:22 Optimal Current Treatment Of Vertebral Artery Injuries: When Open; When Endo: Technical Tips And What Specialties Need To Be Involved
Domenico Valenti, DMChir, PhD

CERVICAL ARTERY OPEN ACCESS

4:23 – 4:28 Cervical Carotid Artery Open Access Approaches For TAVR, TCAR And TEVAR: Technical Tips, Complications And How To Avoid Them
Gregg S. Landis, MD

4:29 – 4:35 **Panel Discussion**

SESSION 92 (Grand Ballroom East, 3rd Floor)

NEW CONCEPTS AND NEW DEVELOPMENTS IN PERCUTANEOUS (PQ) ACCESS CLOSURE AND WOUND CARE

Moderators: *Zvonimir Krajcer, MD*
Ali F. AbuRahma, MD
Kenneth Ouriel, MD, MBA

PROGRESS IN PERCUTANEOUS ACCESS AND CLOSURE

4:35 – 4:40 New Devices (Including PerQseal And A Device From Arterica) For Large Bore Arterial And Venous Closure: Advantages And Limitations Of Each And How To Avoid And Treat Complications
Zvonimir Krajcer, MD

4:41 – 4:46 How To Do EVAR, F/B/EVAR And TEVAR Percutaneously Without Complications: What Device Is Best And Technical Tips To Avoid Pitfalls: When Is Open Exposure Needed
Manish Mehta, MD, MPH

4:47 – 4:52 How To Prevent And Treat Complication Of Large Bore Arterial Access: Comparative Analysis Of Manta, Prostar XL And Perclose ProGlide Devices
Michael J. Singh, MD, MBA

4:53 – 4:58 Closure Techniques And Devices For Percutaneous Brachial And Axillary Access: What's Different, What Works, Results And Preventing Complications
W. Anthony Lee, MD

4:59 – 5:04 Vascular PQ Access Bleeding Can Best Be Managed By Endovascular Tools: What Are They And How To Do It: When Is Open Surgery Required
David T. McGreevy, MD, PhD
Tal M. Hörer, MD, PhD

PROGRESS IN WOUND CARE

5:05 – 5:10 Why A Wound Care Center Can Benefit A Vascular Service: How To Establish It And Make It Profitable: Should It Include Hyperbaric Oxygen: Does Hyperbaric Oxygen Work Or Is It Just A Money Maker
Robert B. McLafferty, MD, MBA

5:11 – 5:16 Does Local Oxygen Therapy Combined With Compression And Humidification (AOTI) Help With Wound Healing: With What Sort Of Wounds And What Is The Mechanism: What Are Its Limitations
Joann M. Lohr, MD

5:17 – 5:22 A New Technology (From AOTI) Combining Local Oxygen Therapy With Cycled Compression And Humidification Enhances Healing Of Diabetic Wounds And Ischemic Ulcers But Only After Revascularization
Anil P. Hingorani, MD
Enrico Ascher, MD

5:23 – 5:28 Technical Tips To Treat Deep Groin Infection After Prosthetic Bypasses From The Common Femoral Artery: How To Save The Graft, The Patient And The Extremity: It Is Not Easy And The Details Matter
Hosam F. El Sayed, MD

5:29 – 5:36 **Panel Discussion**

5:37 – 5:38 **End of Program L**

PROGRAM M (SESSIONS 93-100)

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

Grand Ballroom West, 3rd Floor

SESSION 93 (Grand Ballroom West, 3rd Floor)

POPLITEAL DISEASE TOPICS RELATED TO ANEURYSM TREATMENT, ENTRAPMENTS, ADVENTITIAL CYSTIC DISEASE AND TRAUMA

Moderators: *Jason T. Lee, MD*
Katherine A. Gallagher, MD
Russell H. Samson, MD, RVT

TREATMENT OF POPLITEAL ANEURYSMS

6:52 – 6:57 Comparison Of Results With Endovascular And Open Surgical Repair Of Popliteal Artery Aneurysms: When Is Endovascular Repair Indicated And Justified: From A Meta-Analysis Of Global Data On Over 13,000 Patients
George A. Antoniou, MD, PhD, MSc

6:58 – 7:03 With Popliteal Artery Aneurysms, Why After 20 Years Of Selective Endograft Treatment Do I Now Favor Open Repair In Most Patients: Which Ones Still Get An Endograft
Martin R. Back, MD

7:04 – 7:09 Given A Patient With CLTI And A Popliteal Aneurysm: How To Assess And How To Treat: Endo vs. Open
Jos C. van den Berg, MD, PhD

7:10 – 7:15 Endovascular vs. Open Repair Of Popliteal Aneurysms: Indications And Contraindications For Each: Comparable Long-Term (5 Years) Durability Can Be Achieved: From The VISION Database
Philip P. Goodney, MD, MS

ADVENTITIAL CYSTIC DISEASE

7:16 – 7:21 Popliteal Adventitial Cystic Disease: Pathogenesis, Symptoms, And Optimal Treatment: Endo Or Open; Which Surgical Approach
Irwin V. Mohan, MBBS, MD

ENTRAPMENTS AND TRAUMA

7:22 – 7:27 Updates And New Concepts In The Diagnosis And Treatment Of Popliteal Entrapments: Value Of Ultrasound And MRI In The Diagnosis: Surgical Approach And What To Do If The Artery Is Occluded
Katherine A. Gallagher, MD

7:28 – 7:33 Posterior Approach For Full Decompression In Popliteal Entrapment Syndromes: Modern Diagnostic Workup, Surgical Techniques And Outcomes
Randall DeMartino, MD

7:34 – 7:39 Pathogenesis And Management Of Functional Popliteal Entrapment In Athletes: How To Diagnose And Treat: How To Know What Structure Needs To Be Addressed To Get Arterial Decompression: Surgical Approach And Techniques
Jason T. Lee, MD

7:40 – 7:45 Optimal Surgical Approach And Graft For Popliteal Artery Injuries: How Best To Treat Associated Popliteal Venous Injuries: Best Venous Graft
Charles J. Fox, MD

7:46 – 7:56 **Panel Discussion**

SESSION 94 (Grand Ballroom West, 3rd Floor)

NEW DEVELOPMENTS IN TREATING ARTERIAL (INCLUDING AORTIC) GRAFT AND ENDOGRAFT INFECTIONS

Moderators: Keith D. Calligaro, MD
Manju Kalra, MBBS
Sateesh C. Babu, MD

7:56 – 8:01 Current Optimal Treatment And Mid-Term Results Of Aortic Graft Infection After EVAR And Open Repair: When Does The Entire Graft Have To Be Removed And When Can All Or Part Of It Be Left
Jean-Paul de Vries, MD, PhD

8:02 – 8:07 Current Concepts In Treatment Of Aortic Graft And Endograft Infections, Including EVAR, F/EVAR, TAAA And Arch Endografts: From The GRANDPA Registry: Is Total Graft Excision Required
Anders Wanhainen, MD, PhD

8:08 – 8:13 Infected Thoracic Aortic Grafts And Endografts, With Or Without Aorto-Esophageal Fistulas Are Difficult Problems But Can Be Successfully Treated With Open Surgery: What Techniques Are Needed And Current Results
Germano C.G. Melissano, MD
Andrea Kahlberg, MD

8:14 – 8:19 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: Update On The European Aortic Graft Infection Guidelines
Zoran Rancic, MD, PhD
Kak Khee Yeung, MD, PhD

8:20 – 8:25 For Some Infected Prosthetic Arterial/Aortic Grafts, Endografts And Mycotic Aneurysms Less Than Standard Radical Graft Excisional Treatment Is Best: The Role Of CT-Guided Drainage And Antibiotic Irrigation: How To Do It And Results
Martin Malina, MD, PhD

8:26 – 8:31 Improvements In The NAIS Procedure (Graft Removal And In-Line Deep Vein Reconstruction) For Infected Aortic Grafts: How To Make The Operation Easier And Faster: When Is It Indicated And When Not
John F. Eidt, MD

8:32 – 8:37 Treatment Of Mycotic Aneurysms Or Infected Aortic Grafts Using The Great Saphenous Veins As An Alternative To The NAIS Procedure: How To Do It, Advantages And Long-Term Results
Jan M.M. Heyligers, MD, PhD

8:38 – 8:43 **Panel Discussion**

8:44 – 8:49 Treatment Of Infected Aortic Grafts Or EVARs By In Situ Replacement With Rifampin-Soaked Dacron Or Cryopreserved Conduits: What Adjunctive Surgical Steps Are Needed For Success: When Is Each Graft The Best Treatment And What Is The Requirement For Surveillance
Randall DeMartino, MD
Manju Kalra, MBBS

8:50 – 8:55 Results Of In Situ Rifampin Soaked Endografts To Treat Mycotic AAAs: When To Use Them And When Not: How To Prepare Them And Surgical Requirements On How To Use Them
Guillermo A. Escobar, MD

8:56 – 9:01 When Removing Infected Axillofemoral Prosthetic Grafts: How Can A Graft Stump Be Left On The Axillary Artery: Why Is It The Best Treatment
Sateesh C. Babu, MD

9:02 – 9:07 The Incidence Of Infection After Operations On The Common Femoral Artery (CFA) Is Increased By Prior Operations Or Endovascular CFA Procedures: These Infections Can Be Avoided By Using The External Iliac Or Deep Femoral Arteries For The Secondary Procedure
Anil P. Hingorani, MD
Enrico Ascher, MD

9:08 – 9:13 Concomitant Infections Of Aorto-Iliac Vessels/Grafts And Elements Of The Spine: What Makes Them Different And Dangerous: How To Diagnose And Treat Them To Make Them Less Morbid
Louise Koskas, MD, MSc

9:14 – 9:20 **Panel Discussion**

9:20 – 9:34 **Break — Visit Exhibits And Pavilions (2nd and 3rd Floors)**

SESSION 95 (Grand Ballroom West, 3rd Floor)

PROGRESS IN VASCULAR IMAGING AND GUIDANCE FOR ENDOVASCULAR TREATMENTS; DECREASING RADIATION EXPOSURE OR CONTRAST TOXICITY

Moderators: *Jacob Cynamon, MD*
Mark W. Mewissen, MD, RVT
George L. Berdejo, BA, RVT

IMAGING AND GUIDANCE

9:34 – 9:39 How To Choose The Best Hybrid OR/Suite For Your Institution: Advantages, Disadvantages, Accessories And Costs Of The Three Main Systems (GE, Siemens, Philips)
Bjoern D. Suckow, MD

9:40 – 9:45 The Role Of Advanced CT Imaging To Better Target And Treat A Type 2 Endoleak Nidus: How It Facilitates Access And Embolization Of Feeding Branches
Mark W. Mewissen, MD, RVT

9:46 – 9:51 Improvements In The Intra-Operative Positioning System (IOPS From Centerline) That Help Navigation During F/B/EVAR: They Allow For Better Graft Positioning And Facilitate Branch And Contralateral Gate Cannulation
Francis Caputo, MD

9:52 – 9:57 The Current Status Of CO_2 Contrast Angiography: Indications, Contraindications, Precautions And Advantages: Vascular Beds Where It Can Be Used And Where It Cannot Be: How To Do It Simply And Effectively
Sigrid Nikol, MD

9:58-10:03 What Conditions Can Cause Increased 18F FDG (Fluorodeoxyglucose) Uptake In Positron Emission CT: How Reliable Is It In Diagnosing Aortic And EVAR Graft Infection And Predicting AAA Rupture
Clark J. Zeebregts, MD, PhD

RADIATION PROTECTION

10:04-10:09 Skills That Vascular Surgeons/Specialists Must Have To Decrease Radiation Exposure And Improve Imaging Include Control Of Gantry Angle Projections, All Image Settings, Columniation, Contrast Dilution, Mechanical Injection Pressure And Flow Rates, Frame Rates, Cone Beam CT, Fusion Setup And More
Martin Malina, MD, PhD

10:10-10:15 Basic Radiation Protection Techniques That All Vascular Surgeons And Interventionalists Must Use: New Developments In Improving Radiation Safety By Room Mitigation And Personal Protection: What Is Here Now And What Is Coming
Ripal T. Gandhi, MD

10:16-10:21 Radiation Hazards To Pregnant Vascular Surgeons And Specialist: What Practice Modifications And Techniques Are Needed To Minimize Them
Venita R. Chandra, MD

VASCULAR HOLOGRAPHY

10:22-10:27 Progress With 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: Results On The Digital Twin With The Use Of The Cydar EV Technology
Jan M.M. Heyligers, MD, PhD

10:28-10:33 Holographic Guidance Of Endovascular Procedures (With Augmented Reality Goggles And No Screen): How Does It Work And Clinical Experience: What Is Possible And What About The Future
Claude Mialhe, MD

10:34-10:39 **Panel Discussion**

SESSION 96 (Grand Ballroom West, 3rd Floor)

ARTIFICIAL INTELLIGENCE WORKFLOW IN AORTIC DISEASE MANAGEMENT

Moderators: ***Gustavo S. Oderich, MD, PhD***
Kak Khee Yeung, MD, PhD
Alan B. Lumsden, MD

10:40-10:46 Artificial Intelligence Is Already Influencing Every Step In Aortic Management: An Overview
Ying Huang, MD, PhD

10:47-10:53 Aortic Segmentation To Simplify The Workflow Of Preoperative Planning And Follow-Up
Stephan Haulon, MD

10:54-11:00 Regional Aortic Weakness Score Predicts Risk Of Endoleak, Enlargement And Rupture And Can Be Done Without CTA Gating
Randy D. Moore, MD

11:01-11:07 Early Diagnosis Of Heritable Aortic Diseases Through AI-Powered Facial Analysis
Dianna M. Milewicz, MD, PhD

11:08-11:14 Digital Twin Analysis Of Neck Morphology To Predict Endoleak Risk
Ross Milner, MD

11:15-11:21 Computational Fluid Analysis To Predict Risk Of Renal Branch Occlusion
Kenneth Tran, MD

11:22-11:28 Analysis Of Intercostal Artery Flow May Predict Risk Of Spinal Cord Injury
Bijan Modarai, PhD, FRCS

11:29-11:35 VASCUL-AID Update
Kak Khee Yeung, MD, PhD

11:36-11:59 **Panel Discussion**

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

SESSION 97 (Grand Ballroom West, 3rd Floor)

CHALLENGING RECORDED LIVE CASES FROM MÜNSTER, GERMANY: IMPACT OF NEW DEVICES ON OUR PRACTICE

Moderators: ***Martin J. Austermann, MD***
Charlott Elise Köhler, MD

1:00 – 1:37 Recorded Cases Showing Different Endovascular Techniques For Repair Of Late EVAR Failures
Martin J. Austermann, MD
Charlott Elise Köhler, MD

SESSION 98 (Grand Ballroom West, 3rd Floor)

NEW DEVELOPMENTS IN THE TREATMENT OF THORACIC OUTLET SYNDROMES (TOSs)

Moderators: ***Michael J. Singh, MD, MBA***
Jason T. Lee, MD
Hugh A. Gelabert, MD

1:38 – 1:43 Pearls In The Management Of Neurogenic, Arterial And Venous TOSs: How To Diagnose And Treat Patients Most Effectively: From A Pioneer's Experience
Hugh A. Gelabert, MD

1:44 – 1:49 Supraclavicular Approach To Arterial And Neurogenic TOS Syndromes: How To Do It (Video) And Advantages
Ramesh K. Tripathi, MD

1:50 – 1:55 Simplified Transaxillary First Rib Resection For TOS Under Local And Regional Anesthesia: How To Do It Safely: What Are The Limitations
Francesco Spinelli, MD

1:56 – 2:01 Optimal Treatment For Venous TOS: Role Of Thrombolysis: For Decompression Why An Anterior Infraclavicular Approach With Resection Of The Anterior Third Of The First Rib Is Best: Technique, Limitations And Results
Keith D. Calligaro, MD
Matthew J. Dougherty, MD

2:02 – 2:07 Robotic Approach To Thoracic Outlet Decompression: Equipment Required And How To Do It: Advantages, Limitations And Results
Katherine A. Teter, MD

2:08 – 2:13 Percutaneous Transluminal Venous Balloon Angioplasty As Treatment For Neurogenic TOS: How And Why Can It Possibly Help: Technique And Results
Sam S. Ahn, MD, MBA

2:14 – 2:19 TOS Disorders In Athletes: What Is The Pathogenesis Of Arterial And Venous Involvement: What Treatment May Be Required: Technique And Results
Margaret Tracci, MD, JD

2:20 – 2:25 Current Optimal Diagnosis And Management Of Neurogenic TOS: When And How To Use Botox: When Is Surgical Treatment Necessary And How Best To Do It
Jason T. Lee, MD

2:26 – 2:31 Enhancing Diagnostic Accuracy For Neurogenic TOS With Extended Duration Muscle Blocks: How To Do Them And How Should They Help To Modify Surgical And Other Treatments
Michael J. Singh, MD, MBA

2:32 – 2:40 **Panel Discussion**

2:40 – 2:50 **Break – Visit Exhibits And Pavilions (2nd and 3rd Floors)**

SESSION 99 (Grand Ballroom West, 3rd Floor)

MEDICAL ISSUES WITH VASCULAR TREATMENTS; MEDICAL AND ADJUNCTIVE (DRUG) TREATMENTS IN VASCULAR PATIENTS; UNUSUAL VASCULAR DISEASES AND VASCULAR PROCEDURES TO FACILITATE OTHER SURGERIES

Moderators: *Alexandra N. Ascher, MD, RPVI, RVT*
Karan Garg, MD
Rabih A. Chaer, MD

MEDICAL ISSUES WITH VASCULAR TREATMENTS

2:51 – 2:56 Significance Of Perioperative Myocardial Injury Following Complex Endovascular Aortic Repair (F/B/EVAR): How Can Preop Troponin Levels Help
Jorg L. de Bruin, MD, PhD

2:57 – 3:02 Long-Term Hemodynamic And Cardiac Outcomes Of TEVAR For Blunt Aortic Traumatic Injuries (BTAIs): Are There Problems From Non-Compliant Endografts: What To Do About Them
Rabih A. Chaer, MD

3:03 – 3:08 Congestive Heart Failure And A Low Ejection Fraction Negatively Influence The Duration Of Patency Following Lower Extremity Bypasses: What To Do About It
Maciej L. Dryjski, MD, PhD

NEW DEVELOPMENTS IN MEDICAL MANAGEMENT

3:09 – 3:14 Optimizing Medical Management In Vascular Patients: 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 Statins: Ezetimibe (Zetia), A PCSK9 Inhibitor, Inclisiran, Bempedoic Acid (Nexletol), Etc.
Benjamin S. Brooke, MD, PhD

3:15 – 3:20 Update On The Periprocedural Value Of Beta Blockers In Patients Undergoing Open Or Endovascular Aortic Repairs, Lower Extremity Or Carotid Procedures: When Are They Beneficial And When Are They Not: How Should They Be Used
Faisal Aziz, MD

3:21 – 3:26 How Do Glucagon Like Peptide Receptor Agonists Drugs (GLP-1 – Ozempic, Wegovy, Etc.) Work: Is It By Decreasing Glucagon: What Effects Do These Drugs Have On Vascular Diseases And By What Mechanism: When Should They Be Given To Vascular Patients
Mohammad H. Eslami, MD, MPH

UPDATE ON TREATMENT OF RARE VASCULAR DISEASES AND VASCULAR PROCEDURES TO FACILITATE OTHER SURGERIES

3:27 – 3:32 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 In 2026
Kellie R. Brown, MD

3:33 – 3:38 Twenty Years Of Large Blood Vessel Management In The Treatment Of Retroperitoneal Sarcomas, Pancreatic And Other Tumors: Lessons Learned And Why A Vascular Surgeon Is Critical To Successful Treatment
Elizabeth L. George, MD, MS
Karan Garg, MD

3:39 – 3:45 **Panel Discussion**

SESSION 100 (Grand Ballroom West, 3rd Floor)

ADVANCES IN THE ENDO AND OPEN TREATMENT OF VASCULAR TRAUMA

Moderators: Todd E. Rasmussen, MD
Joseph J. DuBose, MD
Ravi R. Rajani, MD

3:46 – 3:51 Endovascular Treatment Of Vascular Trauma: What We Got Right; What We Got Wrong And What Comes Next: Based On 25 Years Of Experience And Lessons Learned
Michael H. Wholey, MD, MBA

3:52 – 3:57 Decision Making And Techniques For Salvaging Mangled Extremities With The Worst Injuries
Misty D. Humphries, MD, MAS

3:58 – 4:03 Revascularization Before Orthopedic Fixation For Concomitant Major Vascular And Orthopedic Injuries Should Be The Norm: Why Isn't It: Technical Tips For Doing It Right
Erica L. Mitchell, MD, MEd

4:04 – 4:09 Angioembolization For Unstable Pelvic Fractures: How, When, And With What Materials
Charles J. Fox, MD

PEDIATRIC VASCULAR TRAUMA

4:10 – 4:15 Evolving Endo And Open Techniques In Pediatric Vascular Trauma: What Special Precautions Are Needed: How To Deal With Arterial Spasm: What Arterial Graft Is Best: When And How Can Endovascular Grafts Be Used
Dawn M. Coleman, MD *(PowerPoint Presentation With Synched Audio)*

4:16 – 4:21 Management Of Iatrogenic Pediatric Vascular Injuries: Techniques And Avoiding Pitfalls
Alex Fairman, MD

4:22 – 4:28 **Panel Discussion**

4:29 – 4:34 Update On The Civilian And Military Status Of Endovascular Procedures For Treating Traumatic Arterial Injuries - Including REBOA: What Are The Requirements: Where Can They Be Carried Out And By Whom: What Are The Limitations And Pitfalls
Joseph J. DuBose, MD

4:35 – 4:40 In Patients With Vascular Trauma Needing Repair And A Head Or Solid Organ Injury, What Should Be The Sequence Of Reparative Procedures: When And How To Use Heparin, Endo Or Open Vascular Procedure
Elina Quiroga, MD, MPH

4:41 – 4:46 Emergency Management Of Major Arterial And Venous Injuries During Interventional Cardiology Procedures: Diagnosis, Technical Tips, And Outcomes
Pasqualino Sirignano, MD, PhD
Francesco Speziale, MD

4:47 – 4:52 Vascular Injuries After Blunt Abdominal Trauma: Diagnosis And Management: When Endo, When Open Treatment
Dittmar Böckler, MD

MANAGEMENT OF BLUNT THORACIC AORTIC INJURY (BTAI)

4:53 – 4:58 Update On Management Of Blunt Thoracic Aortic Injury (BTAI) In Adult And Pediatric Patients: When Is TEVAR Indicated And When Not: Lessons Learned And Technical Tips
Elina Quiroga, MD, MPH

4:59 – 5:04 Pseudo-Coarctation After BTAI: What Is It: How Does It Produce Distal Organ Ischemia: How Should It Be Diagnosed And Treated By TEVAR: Is It Ever An Emergency: Technical Tips
Erica L. Mitchell, MD, MEd

5:05 – 5:12 **Panel Discussion**

5:13 – 5:14 **End of Program M**

PROGRAM N (SESSIONS 101-111)
DEEP VENOUS DISEASE
Trianon Ballroom, 3rd Floor

SESSION 101 (Trianon Ballroom, 3rd Floor)
DEEP VENOUS PHYSIOLOGY, IMAGING AND NIVLs

Moderators: ***Jose I. Almeida, MD, RPVI, RVT***
Lowell S. Kabnick, MD

7:30 – 7:34 Introduction To Deep System
Lowell S. Kabnick, MD

7:35 – 7:40 Area Reduction, Pressure Gradient And Flow Resistance Across Iliac Vein Stenosis: New Experimental Data With Direct Measurements Of The Flow Resistance And Pressure Gradient Show The Lack Of Relationship Between The Degree Of Venous Stenosis And The Hemodynamic Parameters
Fedor Lurie, MD, PhD

7:41 – 7:46 How To Treat Patients With Both Deep And Superficial Venous Insufficiency And Expected Outcomes
Jose I. Almeida, MD, RPVI, RVT

7:47 – 7:52 Relationship Of Obstruction And Deep Vein Reflux
Mikel Sadek, MD

7:53 – 7:58 The Root Cause Of Venous Phasicity Is Not From The Abdominal Thoracic Pump But Due To Vena Cava Distortion During Respiration
Seshadri Raju, MD

7:59 – 8:04 The Role Of The Venous Foot Pump In Chronic Venous Insufficiency
Julianne Stoughton, MD

8:05 – 8:10 Static Venogram Reveals Non-Thrombotic Iliac Vein Lesions, Not Detected With Venogram Or IVUS
Paul J. Gagne, MD

8:11 – 8:16 Iliocaval Duplex Ultrasound With Image Optimization
Jan M. Sloves, RVT

8:17 – 8:22 **Panel Discussion**

SESSION 102 (Trianon Ballroom, 3rd Floor)
VENOUS STENT ISSUES AND CLINICAL TRIALS

Moderators: ***Elna M. Masuda, MD***
Alun H. Davies, MA, DM, DSc

8:23 – 8:28 Why Do Iliac Venous Stenting Work Very Well In Most, Whereas Others Find No Clinical Improvement
Elna M. Masuda, MD

8:29 – 8:34 Venous Stenting: Needs To Be Reconsidered
Alun H. Davies, MA, DM, DSc

8:35 – 8:40 Endovascular Management Of NIVL: Guidance From Multidisciplinary Consensus
Raghu Kolluri, MD

8:41 – 8:46 Role Of Surveillance – Thresholds For Re-Intervention In Patients After Venous Stenting
Houman Jalaie, MD, PhD

8:47 – 8:52 Results Of The VIABAHN FORTEGRA Venous Stent Trial For The Treatment Of Symptomatic IVC Obstruction With Or Without Combined Iliofemoral Obstruction
Stephen A. Black, MD

8:53 – 8:58 Venovo Long-Term Follow-Up: A Deeper Dive
Michael K.W. Lichtenberg, MD

8:59 – 9:04 Zilver Vena Stent Trial: Long-Term Follow-Up
Paul J. Gagne, MD

9:05 – 9:10 ABRE Stent Trial: Long-Term Follow-Up
Stephen A. Black, MD

9:11 – 9:16 **Panel Discussion**

SESSION 103 (Trianon Ballroom, 3rd Floor)

FEMORO-ILIOCAVAL CHRONIC TOTAL OCCLUSIONS, RECANALIZATION TECHNIQUES AND OTHER CONSIDERATIONS

Moderators: *Jose I. Almeida, MD, RPVI, RVT*
Arjun Jayaraj, MD

9:17 – 9:22 When Anatomy Dictates Strategy: Treating Pelvic Venous Disorders In IVC Anomalies
Andriy O. Nykonenko, MD, PhD

9:23 – 9:28 Imaging Required For Safe Central Venous Recanalization
Marcelo Guimaraes, MD, MBA

9:29 – 9:34 IVUS Guided Restoration Of Inline Flow Argues Against Comprehensive Thrombus Removal Strategies And For Selective Stenting In Acute Symptomatic DVT
Arjun Jayaraj, MD

9:35 – 9:40 Debulking Inflow And Outflow Obstructions: Multicenter Analysis With Mechanical Thrombectomy Toolkit
Steven D. Abramowitz, MD

9:41 – 9:46 Chasing Inflow: When Does Deep Venous Recanalization Go Too Far
Jose I. Almeida, MD, RPVI, RVT

9:47 – 9:52 Endovenectomy Of Common Femoral Vein: When And How
Houman Jalaie, MD, PhD

9:53 – 9:58 Reconstruction Of Challenging And Chronic IVC Occlusion With Minimization Of Potential Complications
Marcelo Guimaraes, MD, MBA

9:59-10:04 **Panel Discussion**

SESSION 104 (Trianon Ballroom, 3rd Floor)

VENOUS THROMBOSIS SCIENCE AND TREATMENT STRATEGIES

Moderators: *Peter Henke, MD*
Thomas W. Wakefield, MD

10:05-10:10 Cell Types In Venous In-Stent Restenosis
Andrea T. Obi, MD

10:11-10:16 Tracking Endothelial Coverage Of Deep Vein Stents Over Time Using Electron Microscopy
Thomas W. Wakefield, MD

10:17-10:22 Update In Experimental Post-Thrombotic Syndrome
Peter Henke, MD

10:23-10:28 AI Improves Bleeding Risk Prediction In Hospitalized Patients Being Considered For VTE Pharmacological Prophylaxis
Brajesh K. Lal, MD

10:29-10:34 Extending Mechanical Thrombectomy Safely To Chronic Clots Several Weeks Or Even Months After Onset
Taimur Saleem, MD

10:35-10:40 Can Vaccine Adjuncts Be Harnessed To Improve DVT Resolution
Andrea T. Obi, MD

10:41-10:46 Factor XI Inhibitors: What Are They
Timothy K. Liem, MD, MBA

10:47-10:52 Inflammation, Selectins And Venous Thrombosis
Thomas W. Wakefield, MD

10:53-10:58 **Panel Discussion**

SESSION 105 (Trianon Ballroom, 3rd Floor)

THROMBUS REMOVAL THROMBECTOMY DEVICES AND OTHER ISSUES TO CONSIDER

Moderators: ***Steven D. Abramowitz, MD***
David J. Dexter, MD

10:59-11:04 Translating Preclinical Evidence Into Clinical Practice: The New Recana System For Venous In-Stent Stenosis
Steven D. Abramowitz, MD

11:05-11:10 Dexamethasone Injection In The Perivenous Space Decreases Post-Thrombotic Syndrome
David J. Dexter, MD

11:11-11:16 Propensity Score Matched Comparison Of 2-Year Outcomes In Isolated Femoropopliteal DVT Treated With Mechanical Thrombectomy Or Anticoagulation
Steven D. Abramowitz, MD

11:17-11:22 Aspirex: 36-Month Update From A Multi-Center Clinical Study
Patrick E. Muck, MD

11:23-11:28 ClotTriever And Clout Registry Update
Nicolas J. Mouawad, MD, MPH, MBA

11:29-11:34 Ichor Device: Next-Gen Fogarty For Venous Thrombectomy
Edward J. Arous, MD, MPH

11:35-11:40 BOLT IDE Study: Primary Results And 30-Day Outcomes
Patrick E. Muck, MD

11:41-11:46 Beyond Technical Success: The Blood Loss Question In Venous Thrombectomy
David J. Dexter, MD

11:47-11:52 Lytics For DVT: When To Use If At All
Nicolas J. Mouawad, MD, MPH, MBA

11:53-11:58 Non-Anticoagulant Therapies For DVT
Andrea T. Obi, MD

11:59-12:04 **Panel Discussion**

12:50- 1:05 **Lunch Break — Rhinelander Gallery, 2nd Floor**
Visit Exhibits And Pavilions (2nd and 3rd Floors)

SESSION 106 (Trianon Ballroom, 3rd Floor)

PELVIC VEIN DISORDERS

Moderators: ***Kathleen D. Gibson, MD***
Peter Gloviczki, MD, PhD

1:06 – 1:11 When Is A Left Renal Vein Compression Hemodynamically Significant: Clues Offered By Duplex Ultrasound
Kathleen D. Gibson, MD

1:12 – 1:17 A Dual-VENC (Velocity Encoding) 4D Flow MRI Protocol For Assessing Hemodynamics In The Pelvic Veins
Carlos Alberto Figueroa, PhD

1:18 – 1:23 Treatment Of Nutcracker Syndrome With Ovarian Vein Transposition
Bernadette Aulivola, MD

1:24 – 1:29 Outcomes Of Left Renal Vein Stenting In Patients With Nutcracker Syndrome
Rabih A. Chaer, MD

1:30 – 1:35 Migration Of Iliac And Renal Vein Stents: T-Stent Might Be A Solution To The Problem
Peter Gloviczki, MD, PhD

1:36 – 1:41 RCT Of Pelvic Venous Embolization vs. Sham Procedure For Venous Origin Chronic Pelvic Pain In Women
Neil M. Khilnani, MD

1:42 – 1:47 Iliac Vein Stenting Or Embolizing An Ovarian Vein(s) For Pelvic Pain: How Much Improvement Should One Expect
Mark H. Meissner, MD

1:48 – 1:53 POTS And Pelvic Venous Disorders – Is There Really A Link
Mark S. Whiteley, MS, FRCS

1:54 – 2:05 **Panel Discussion**

SESSION 107 (Trianon Ballroom, 3rd Floor)

VALVES, AND MORE VENOUS THROMBOSIS

Moderators: *Arjun Jayaraj, MD*
Steve Elias, MD

2:06 – 2:11 The Venous Valve: An Overlooked Determinant Of Arterio-Venous Fistula Failure
Matthew S. Sussman, MD

2:12 – 2:17 Current Status Of Prosthetic Deep Venous Valves: Experience To Date And What's On The Horizon
Jorge H. Ulloa, MD

2:18 – 2:23 Deep Vein Valve Devices: What Outcome Measures Should Be Used
Fedor Lurie, MD, PhD

2:24 – 2:29 Computer Aided (AI) Vacuum Thrombectomy (CAVT) For Lower Extremity Deep Venous Thrombosis: How Beneficial Is It
Adam C. Reichard, MD

2:30 – 2:35 SVT Treatment Options: DOAC, LMWH, Nothing
Steve Elias, MD

2:36 – 2:41 Successful Wallstent Exclusion Of Iliofemoral Venous Aneurysms: A New Treatment Paradigm
Arjun Jayaraj, MD

2:42 – 2:47 A Comparative Analysis Of Hospital And Post-Hospital Outcomes: Computer-Assisted Vacuum Thrombectomy vs. Anticoagulation For The Treatment Of Iliofemoral Deep Vein Thrombosis
Raghu Kolluri, MD

2:48 – 2:53 **Panel Discussion**

SESSION 108 (Trianon Ballroom, 3rd Floor)

IVC FILTERS AND IVC TUMORS

Moderators: *Stefan Kenel-Pierre, MD*
Anil P. Hingorani, MD

2:54 – 2:59 Management Of IVC Reconstruction, Tips And Tricks
Timur P. Sarac, MD

3:00 – 3:05 Long-Term Mortality Of Trapease Filter vs. Greenfield Filter: 20-Year Results Of A RCT
Anil P. Hingorani, MD

3:06 – 3:11 A Look At Longer Indwell Times: The Denali Filter Experience
Eric Hager, MD

3:12 – 3:17 3-Year Experience Of The VenoValve And Evolution To The Percutaneous Valve, EnVVE, For Deep Venous Reflux
David J. Dexter, MD

3:18 – 3:23 Surgical Removal Of IVC Filters: When, How
Stefan Kenel-Pierre, MD

3:24 – 3:29 Tips And Tricks For Optimal Management Of Primary And Secondary IVC Tumors
Jill J. Colglazier, MD

3:30 – 3:35 Rethinking Filters: The Latest Evidence From The Cook IVC Filter Study
Rabih A. Chaer, MD

3:36 – 3:41 Off-Label Use Of Amplatzer Septal Occlusion Device For Post-Traumatic IVC Aneurysm: A Case Report
Arash Bornak, MD

3:42 – 3:47 **Panel Discussion**

SESSION 109 (Trianon Ballroom, 3rd Floor)

THORACIC VENOUS OBSTRUCTION AND ISSUES WITH STENTS IN YOUNG PATIENTS

Moderators: ***Mark H. Meissner, MD***
Glenn Jacobowitz, MD

3:48 – 3:53 Management Of Paget-Shroetter Syndrome
Timothy K. Liem, MD, MBA

3:54 – 3:59 Venacaval Ligation For Trauma Is A Futile And Fatal Decision: Time To Adopt Endovascular Approaches For Caval Trauma
Erica L. Mitchell, MD, MEd

4:00 – 4:05 Open Surgical And Endovascular Treatment Of Superior Vena Cava Syndrome
Manju Kalra, MBBS

4:06 – 4:11 Common Iliac Vein Stenting And Subsequent Pregnancy - Durability And Need For Anticoagulation
Glenn Jacobowitz, MD

4:12 – 4:17 Acute Iliofemoral DVT In Adolescents And Young Adults And Whether They Should Undergo Stenting For May-Thurner At The Time Of DVT Intervention
Mark H. Meissner, MD

4:18 – 4:23 Updates In The Management Of Venous Thoracic Outlet Syndrome
Robert J. Beaulieu, MD, MSE

4:24 – 4:29 **Panel Discussion**

SESSION 110 (Trianon Ballroom, 3rd Floor)

OTHER VENOUS ISSUES IMPORTANT TO VASCULAR SURGEONS

Moderators: ***Brajesh K. Lal, MD***
Timothy K. Liem, MD, MBA

4:30 – 4:35 JURY-2 Trial Results
Brajesh K. Lal, MD

4:36 – 4:41 Utility Of Venoactive Compounds In Post-Thrombotic Syndrome: A Systematic Review
Monika L. Gloviczki, MD, PhD

4:42 – 4:47 Is Post-Thrombotic Syndrome Now A Surgical Disease
Nicolas J. Mouawad, MD, MPH, MBA

4:48 – 4:53 Endovascular Therapy For Post-Thrombotic Syndrome: A Randomized Trial
Suresh Vedantham, MD

4:54 – 4:59 Superior Vena Cava Syndrome
Zbigniew Krasiński, MD, PhD

5:00 – 5:05 **Panel Discussion**

SESSION 111 (Trianon Ballroom, 3rd Floor)

LYMPHEDEMA AND THE SWOLLEN LEG

Moderators: ***Thomas F. O'Donnell, Jr., MD***
Thomas S. Maldonado, MD

5:06 – 5:11 GLP1 Receptor Agonist Therapy In The Setting Of Lipedema And Lymphedema
Steven M. Dean, DO

5:12 – 5:17 Treatment Effectiveness Of A Non-Pneumatic Compression Device vs. An Advanced Pneumatic Compression Device For Lower Extremity Lymphedema Swelling (TEAYS Study)
Thomas S. Maldonado, MD

5:18 – 5:23 Update On The Phlebolymphedema Unavoidable Outcome Of 'Combined' Failure Of Inseparable Venous-Lymphatic Dual Outflow System
Byung-Boong Lee, MD

5:24 – 5:29 Update On Pharmacological Treatment For Lymphedema
Monika L. Gloviczki, MD, PhD

5:30 – 5:35 A 12-Month Follow-Up Focused On Health Related Quality Of Life For Patients With Secondary Lower Extremity Lymphedema
Frank T. Padberg Jr, MD

5:36 – 5:41 The New American Venous And Lymphatic Society And American Venous Forum Clinical Practice Guidelines For Lymphedema Of The Lower Extremities
Thomas F. O'Donnell, Jr., MD

5:42 – 5:47 Evaluation Of Patient-Reported Outcomes In Over 10,000 Patients Using Pneumatic Compression Therapy For Lower-Extremity Lymphedema
Nicos Labropoulos, PhD

5:48 – 5:53 Computed Tomography Scanning In The Diagnosis Of Lower Extremity Phlebolymphedema
Arjun Jayaraj, MD

5:54 – 5:59 **Panel Discussion**

5:59 – 6:00 **End of Program N**

SATURDAY, NOVEMBER 21, 2026

6:00 A.M. General Registration – Rhinelander Gallery, 2nd Floor
6:00 A.M. Faculty Registration – Gramercy Suite East, 2nd Floor
6:30 A.M. Continental Breakfast – Grand Ballroom Foyer, 3rd Floor

CONCURRENT SATURDAY PROGRAMS

PROGRAM O (SESSIONS 112-115)
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 P (SESSIONS 116-120)
Improving Outcomes In Hemodialysis Access
Location: Grand Ballroom West, 3rd Floor

PROGRAM O (SESSIONS 112-115)

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

Grand Ballroom East, 3rd Floor

SESSION 112 (Grand Ballroom East, 3rd Floor)

LOWER EXTREMITY TOPICS TOO IMPORTANT TO MISS

Moderators: *Vikram S. Kashyap, MD*
Jean Bismuth, MD
Peter A. Schneider, MD

7:00 – 7:05 The Majority Of Patients Undergoing Major Leg Amputations For CLTI Do Not Undergo Revascularization Prior To Amputation And Have Increased Mortality: Why Is This So And How Can Vascular Surgeons/Specialists Fix The Problem
Faisal Aziz, MD

7:06 – 7:11 Bailout Techniques And Strategies When Problems Arise During Complex Subintimal Angioplasty And Crossing Total Occlusions: With Prograde CFA Punctures, How To Easily Get The Guidewire Down The SFA
Ali Amin, MD, RVT

7:12 – 7:17 When And Why Is Antegrade Access Via The SFA Better Than Common Femoral Access: How To Do It Safely: Technical Tips
Karan Garg, MD
Todd Berland, MD

7:18 – 7:23 Vascular Imaging Grossly Overestimates The Length Of Arterial Occlusions: How Does This Invalidate Current Classifications And Guidelines
Martin Malina, MD, PhD

7:24 – 7:29 Outpatient Common Femoral Artery Stenting Occlusive Disease: How To Do It Safely And Early And Long-Term Results
Sam S. Ahn, MD, MBA

7:30 – 7:35 Percutaneous (PQ) Transvenous FemPop PTFE Bypasses (Detour - From Endologix): Tips To Simplify The Procedure And Avoid Tibial Venous Access: Will It Eliminate Open PTFE FemPop Bypasses
Venkatesh G. Ramaiah, MD

7:36 – 7:41 **Panel Discussion**

7:42 – 7:47 Releasing The Jailed Profunda Femoris Improves Outcomes In Recurrent CLTI: How To Do It
Mark G. Davies, MD

MORE ABOUT DEEP VEIN ARTERIALIZATION (DVA)

7:48 – 7:53 Technical Innovations And Improved Strategies With DVA In 2026: How Can It Be Done Without A Stent-Graft, Better Patient Selection, Tips To Improve Durability
Elizabeth A. Genovese, MD, MS

7:54 – 7:59 When With CLTI Should DVA Be Performed Earlier – Even Just For Rest Pain: When Is DVA Superior To Below The Ankle (BTA) Angioplasty
Michael C. Siah, MD

8:00 – 8:05 Intraoperative Optimization Of DVA (LimFlow From Inari-Stryker) For No Option CLTI: Flow Volume In The Lateral Plantar Vein Is A Crucial Parameter To Measure And Modulate For DVA Success: How To Do It And How To Use It
Miguel F. Montero-Baker, MD *(PowerPoint Presentation With Synched Audio)*

REMOTE MONITORING OF GRAFT OR STENT FLOW

8:06 – 8:11 Update On Remote Wireless Monitoring (IntelVasc) Of Any Lower Extremity Vascular Treatment: How Does It Work, Results And How Can It Help Patients
Jean Bismuth, MD

8:12 – 8:17 Remote Wireless Monitoring Of Stent Blood Flow Is Possible With The Vesselsens Flow System: How Does It Work And Results
Michael K.W. Lichtenberg, MD

8:18 – 8:26 **Panel Discussion**

SESSION 113 (Grand Ballroom East, 3rd Floor)

MORE LOWER EXTREMITY TOPICS TOO IMPORTANT TO MISS

Moderators: *William P. Robinson, MD*
Jeffrey J. Siracuse, MD, MBA
Yana Etkin, MD

8:26 – 8:31 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

8:32 – 8:37 **DEBATE:** All CLTI Patients Should Undergo Endovascular Treatment As The First Procedure: What Is The Role For Bypass Surgery
Iris Baumgartner, MD

8:38 – 8:43 **DEBATE**: Not So: Some Patients Should Undergo A Bypass As The First Procedure: Which Ones
Michael S. Conte, MD *(PowerPoint Presentation With Synched Audio)*

8:44 – 8:49 How Should Occlusive Disease Severity (GLASS Score) And Patient Age Impact The Choice Of Bypass vs. Endovascular Therapy For CLTI: Bypass Is Best For Severe Disease
William P. Robinson, MD

8:50 – 8:55 New Developments In Intravascular Lithotripsy (IVL): Emerging IVL Technologies (Including A New Philips System); Differences Between Systems And Matching Systems To Differing Anatomy And Lesion Morphology
Elizabeth A. Genovese, MD, MS

8:56 – 9:01 Comparison Of Atherectomy And DCB Treatment With Open Surgery For Symptomatic Deep Femoral Artery Lesions: When Is Each Indicated
William P. Robinson, MD

9:02 – 9:07 **Panel Discussion**

9:08 – 9:13 Techniques To Save CLTI Afflicted Limbs From Advanced Arterial Occlusive Disease When No Further Revascularization Procedure Is Possible
Robert B. McLafferty, MD, MBA

9:14 – 9:19 Popliteal Artery Aneurysm Repairs With Bare Metal Stents: Which Stent Is Best: Proof That It Works And That It Can Be Done Successfully And Effectively As An Outpatient Procedure
Sam S. Ahn, MD, MBA

9:20 – 9:25 Update On External Sirolimus Patches Around AV Fistulas And AV Graft Vascular Anastomoses: Will It Prevent Intimal Hyperplasia In These And Other Circumstances
Sriram S. Iyer, MD

9:26 – 9:31 **DEBATE:** IVUS-Guided Endovascular Revascularization Of FemPop Lesions: Advantages, Limitations And Why It's Better Than Duplex Guided Treatment
Eric A. Secemsky, MD, MSc *(PowerPoint Presentation With Synched Audio)*

9:32 – 9:37 **DEBATE:** Not So: Duplex Guidance Is Better Than IVUS Guidance For FemPop Revascularization: Requirements, Advantages And Limitations
Enrico Ascher, MD
Alexandra N. Ascher, MD, RPVI, RVT

9:38 – 9:44 **Panel Discussion**

9:44 – 9:54 **Break – Visit Exhibits And Pavilions (3rd Floor)**

SESSION 114 (Grand Ballroom East, 3rd Floor)

AORTIC TOPICS TOO IMPORTANT TO MISS

Moderators: *David J. Minion, MD*
Kenneth Ouriel, MD, MBA

9:54 – 9:59 Use Of A Repositionable Aortic Technology To Manage Type I Endoleaks And Related Complications After Endovascular TAAA Repairs: How Does It Work, When Should It Be Used And Success Rates
Edwaldo E. Joviliano, MD, PhD

10:00-10:05 When Is TEVAR Associated With Decreased Ejection Fraction And Increased Diastolic Dysfunction: What Is The Mechanism And What Can Be Done About It
Christopher J. Smolock, MD

10:06-10:11 Trans Needle Aorto-Iliac Bypass: How To Do It; Indications, Contraindications And Early Clinical Experience
Pierre G. Sarradon, MD

10:12-10:17 Left Carotid Transposition To Increase Anatomic Applicability Of Single Branched Aortic Arch Endografts: How To Do It, Indications, Limitations And Results
Luis A. Sanchez, MD

10:18-10:23 New Concepts Regarding Type 2 Endoleaks After EVAR And F/B/EVAR: How Are They Different: Which Ones Are Dangerous And Need To Be Treated And Which Ones Can Be Observed: How Best To Treat
Jessica P. Simons, MD, MPH *(PowerPoint Presentation With Synched Audio)*

10:24-10:29 Chimney EVAR Is A Dependable And Durable (Over 2 Years) Way To Treat Pararenal AAAs: Endografts To Use And Technical Tips To Minimize Type 1A Gutter Endoleaks
Felice Pecoraro, MD

10:30-10:35 EndoHub Concept For Parallel Grafts: What Is It; What Is Its Value And Does It Decrease Gutter Endoleaks: From A Phase I Clinical Trial
Grace C. Mulatti, MD, PhD

10:36-10:41 Managing Organ Malperfusion With Type A Aortic Dissections (TAAD): When And How To Intervene: Optimal Sequence Of Invasive Treatment
Ourania Preventza, MD

10:42-10:47 Targeted Type IA Endoleak Management Utilizing A Repositionable Endograft And Enhanced Bridging Stent Techniques During F/EVAR: Technical Tips, Indications And Results
Julio Peclat, MD, PhD

10:48-10:54 **Panel Discussion**

SESSION 115 (Grand Ballroom East, 3rd Floor)

AORTIC AND CAROTID TOPICS TOO IMPORTANT TO MISS

Moderators: *Frank J. Veith, MD*
Enrico Ascher, MD
Karan Garg, MD

AORTIC RELATED TOPICS

10:54-10:59 Accessory Renal Arteries Can Be Covered With Almost Certain Impunity During EVAR: Why Doesn't Renal Infarction Occur And How To Identify Accessory Vessels That Should Not Be Excluded
Frank J. Criado, MD

11:00-11:05 Prevention Of SCI During Endo Repair Of TAAAs By Adding An Additional Branch To Revascularize The "Adamkiewicz Artery": How To Identify The Artery And Do The Procedure
Waclaw B. Kuczmik, MD, PhD

11:06-11:11 Factors Increasing The Risk Of Major Complications From Lumbar Spinal Fluid Drains Include Repeat Drain Placements And Obesity: What Are These Risks And How Can They Be Prevented And Treated
Gregory A. Magee, MD, MSc
Anastasia Magee, MD

11:12-11:17 Traumatic And Iatrogenic Aorto-Esophageal Fistulas: Etiology, Diagnosis And Optimal Emergency And Surgical Management Can Yield Positive Results
Salim Lala, MD, MBA

11:18-11:23 Arch Lesions Requiring Zone 0 And 1 TEVAR Can Be Treated By Physician Modified Endografts (PMEGs) Using Low Profile Devices Without Strokes And Endoleaks: Which Lesions, Which Endografts And Technical Tips
Shinnosuke Okuma, MD, PhD

11:24-11:29 Ultrasonic Emulsification And Aspiration For Coral Reef Atherosclerosis As A Novel Alternative To Transaortic Endarterectomy And Thoracic Aorta-Based Bypass Grafting
Jae S. Cho, MD

11:30-11:35 AAA Ruptures Are Not Always A Catastrophic Event: What Is The Best Treatment For Ruptured Aneurysms, Catastrophic And Non Catastrophic In 2026
Felice Pecoraro, MD

11:36-11:41 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
Frank J. Veith, MD

11:42-11:48 A Novel Single-Branched Stent-Graft System For Aortic Dissection Involving The Aortic Arch: Experience With And Advantages Of The Sure-Cham Endograft
s, MD *(PowerPoint Presentation With Synched Audio)*

11:49-11:54 **Panel Discussion**

CAROTID RELATED TOPICS

11:55-12:00 Retropharyngeal Internal Carotid Artery With A Stenotic Lesion Requiring Treatment: What Is The Anatomy And How Should It Be Approached For Open Surgery: For Imaging And Stenting
Francesco Setacci, MD *(PowerPoint Presentation With Synched Audio)*

12:01-12:06 Coronary Calcium Scores May Stratify Distinct Phenotypes Of Carotid Artery Stenosis: How Should This Influence Management
Thomas S. Maldonado, MD

12:07-12:12 TCAR Is Safe In Symptomatic And Other High Risk Patients And Technical Tips To Make TCAR Safe With Adverse Anatomy
Jeffrey Jim, MD, MPHS

12:13-12:18 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

12:19-12:24 AI-Based Auto Image Analysis Systems To Evaluate Carotid CT Scans Determine Lesion Progression And Risk Factors: Will It Work And Current Status: Will It Work For Aortic Lesions
Ravi K. Veeraswamy, MD

12:25-12:35 **Panel Discussion**

End of Program O
VEITHsymposium continues with the A-V Access Program in the Grand Ballroom West, 3rd Floor.

PROGRAM P (SESSIONS 116-120)
IMPROVING OUTCOMES IN HEMODIALYSIS ACCESS
Grand Ballroom West, 3rd Floor

SESSION 116 (Grand Ballroom West, 3rd Floor)
IMPORTANT ISSUES IN HEMODIALYSIS ACCESS

Moderators: *Larry A. Scher, MD*
Anton N. Sidawy, MD, MPH

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

8:06 – 8:13 Patient Education, Engagement And Empowerment In Hemodialysis Access
Terry Litchfield, MPA

8:14 – 8:21 Why Have We Failed To Reduce The Number Of ESRD Patients Starting Dialysis With Tunneled Catheters
Michael G. Tal, MD, MBA

8:22 – 8:29 What's New In The Prevention Of Dialysis Catheter Infections
Charmaine Lok, MD

8:30 – 8:37 Cannulation Challenges: Can We Do Better
Jennifer Ravert, RN

8:38 – 8:45 Vascular Access Surveillance: Update On New Technologies
Deborah J. Brouwer-Maier, RN, CNN

8:46 – 8:53 Patency And Reintervention Patterns Of Stent Graft Placement For AV Graft Outflow Stenosis (Results Of The Japanese Viabahn Study)
Ellen D. Dillavou, MD

8:54 – 9:04 **Panel Discussion**

9:05 – 9:12 The Importance Of Precision Imaging In Vascular Access Interventions
Theodore F. Saad, MD

9:13 – 9:20 Is There A Role For IVUS In Hemodialysis Access
Neghae Mawla, MD

IMPORTANT ULTRASOUND ISSUES IN ACCESS PLANNING AND MANAGEMENT

9:21 – 9:28 The Role Of The Vascular Laboratory In Preop Mapping For Hemodialysis Access
George L. Berdejo, BA, RVT

9:29 – 9:36 Robotic Ultrasound For AV Fistula Mapping: Results Of The CANSCAN Study
Varshi Broumand, MD

9:37 – 9:44 Bedside 3D Ultrasound Fistula Maturation Assessment Using A Bioresorbable Implant
Jason S. Burgess, MD, RVT

9:45 – 9:52 Ultrasound Guided Balloon Maturation
Alexandra N. Ascher, MD, RPVI, RVT

9:53-10:03 **Panel Discussion**

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

SESSION 117 (Grand Ballroom West, 3rd Floor)

MORE IMPORTANT ISSUES IN HEMODIALYSIS ACCESS

Moderators: Haimanot (Monnie) Wasse, MD, MPH
Evan C. Lipsitz, MD, MBA

10:26-10:33 The Japanese Paradox: Why Is Dialysis In Japan Different Than In The US
Surendra Shenoy, MD, PhD

10:34-10:41 From Europe To The US: Designing A Successful Academic Dialysis Access Program
Robert Shahverdyan, MD, PhD

10:42-10:49 Recipe For Long-Term Success In Access Creation And Maintenance
Sanford D. Altman, MD

10:50-10:57 Dialysis Access Education In The United States: Current Status And Ideas For The Future
Karl A. Illig, MD

10:58-11:05 Improving Dialysis Access Outcomes With Artificial Intelligence
Ari Kramer, MD

11:06-11:16 **Panel Discussion**

MANAGING FLOW IN HEMODIALYSIS ACCESS

11:17-11:24 Measuring Volume Flow Access Flow: Clinical Challenges
George L. Berdejo, BA, RVT

11:25-11:32 Managing High Flow AV Fistulas: When And How To Intervene
Moro Salifu, MD

11:33-11:40 High Flow AV Fistulas And Pulmonary Hypertension: A Practical Approach To Diagnosis And Management
Mrinalini Krishnan, MD

11:41-11:48 Managing Access Flow: Will Your Heart Appreciate Your Efforts
Jeffrey H. Lawson, MD, PhD

11:49-11:59 **Panel Discussion**

12:00- 1:00 **Lunch Break - Mercury Rotunda And Ballroom (3rd Floor)**

SESSION 118 (Grand Ballroom West, 3rd Floor)

POLITICAL, ECONOMIC AND LEGAL ISSUES IN HEMODIALYSIS ACCESS

Moderators: Larry A. Scher, MD
Anton N. Sidawy, MD, MPH

1:00 – 1:07 In God We Trust: Everyone Else Needs Documentation
Terry Litchfield, MPA

1:08 – 1:15 EMR And Litigation: Navigating The Digital Record
Joshua Cohen, JD

1:16 – 1:23 Designing Pivotal Trials For Commercial Success: Why FDA Approval Alone Does Not Guarantee Adoption Or Coverage Of New Technology
Robert E. Lee, MD

1:24 – 1:31 Innovative Partnerships For Next Generation Hemodialysis Access Devices
Prabir Roy-Chaudhury, MD, PhD

1:32 – 1:39 Regional And Specialty Specific Medicare Reimbursement Trends For Open And Endovascular Dialysis Access Interventions
Jeffrey J. Siracuse, MD, MBA

1:40 – 1:50 **Panel Discussion**

SESSION 119 (Grand Ballroom West, 3rd Floor)

NOVEL TECHNOLOGIES IN HEMODIALYSIS ACCESS

Moderators: Haimanot (Monnie) Wasse, MD, MPH
Clifford M. Sales, MD, MBA

1:51 – 1:58 Biologic, Bioabsorbable Or Biointerface: Can Novel AV Conduits Improve Dialysis Access Outcomes
Robert E. Lee, MD

1:59 – 2:06 Improving Fistula Maturation With Novel Technologies
Ari Kramer, MD

2:07 – 2:14 Use Of Sirolimus-Eluting Stents In Hemodialysis Access: Results Of The DEScover Trial
Leonardo O. Harduin, MD, MSc, PhD

2:15 – 2:22 Xeltis Endogenous Tissue Restoration: The Future Of Bioengineered Vessels
Mohamad A. Hussain, MD, PhD

2:23 – 2:30 Bioabsorbable Perivascular Wrap To Enhance AV Fistula Maturation: Current Status
Yana Etkin, MD

2:31 – 2:38 Novel Ultrasound Guided System For Improved Dialysis Access Cannulation
Eb Bright, BS, MBA, JD

2:39 – 2:49 **Panel Discussion**

SESSION 120 (Grand Ballroom West, 3rd Floor)

UPDATE ON CLINICAL CHALLENGES IN HEMODIALYSIS ACCESS

Moderators: Larry A. Scher, MD
Surendra Shenoy, MD, PhD

2:50 – 2:57 Pediatric Vascular Access
Dawn M. Coleman, MD *(PowerPoint Presentation With Synched Audio)*

2:58 – 3:05 Strategies For Management Of Deep AV Fistulas
John F. Lucas III, MD

3:06 – 3:13	How Does Access Flow Dictate Management Strategies For Hemodialysis Access Induced Distal Ischemia *Robert Shahverdyan, MD, PhD*
3:14 – 3:21	'End-Of-The-Line' Options For Hemodialysis Access *Matthew J. Dougherty, MD*
3:22 – 3:29	Is There A Role For Early Cannulation Grafts *John R. Ross, Sr., MD*
3:30 – 3:37	Use Of Brachial Plexus Block With Intraoperative Duplex To Expand Possibilities For AV Fistula Creation *Joann M. Lohr, MD*
3:38 – 3:45	Management Strategies For SVC Occlusion With Functioning Access And Massive Swelling *Sateesh C. Babu, MD*
3:46 – 3:53	Where To Push Through In Central Venous Stenosis *Mark G. Davies, MD*
3:54 – 4:05	**Panel Discussion**
4:05 – 4:06	**End of Program P**

FACULTY

VISIT WWW.VEITHSYMPOSIUM.ORG FOR FULL FACULTY LISTING

A

Oliver O. Aalami, MD
Palo Alto, California

Anne L. Abbott, MD, PhD
Melbourne, Australia

Dorothy B. Abel, BSBME
Columbia, Maryland

Said Abisi, MD
London, United Kingdom

Cherrie Abraham, MD
Portland, Oregon

Steven D. Abramowitz, MD
Washington, District of Columbia

Kevin J. Abrams, MD
Miami, Florida

Shadi J. Abu-Halimah, MD
Charleston, West Virginia

Ali F. AbuRahma, MD
Charleston, West Virginia

Zach AbuRahma, DO
Charlotte, North Carolina

Joshua D. Adams, MD
Roanoke, Virginia

Sam S. Ahn, MD, MBA
Dallas, Texas

Yves Alimi, Professor
Marseille, France

Jose I. Almeida, MD, RPVI, RVT
Miami, Florida

Jean-Marc Alsac, MD, PhD
Paris, France

Sanford D. Altman, MD
Miami, Florida

Ali Amin, MD, RVT
Reading, Pennsylvania

Gary M. Ansel, MD
Columbus, Ohio

Michele Antonello, MD, PhD
Padua, Italy

George A. Antoniou, MD, PhD, MSc
Manchester, United Kingdom

Frank R. Arko, MD
Charlotte, North Carolina

Paul M. Armenta, MD
Bronx, New York

Edward J. Arous, MD, MPH
Worcester, Massachusetts

Alexandra N. Ascher, MD, RPVI, RVT
Brooklyn, New York

Enrico Ascher, MD
New York, New York

Bernadette Aulivola, MD
Maywood, Illinois

Martin J. Austermann, MD
Muenster, Germany

Hamdy Awad, MD
Upper Arlington, Ohio

Faisal Aziz, MD
Hershey, Pennsylvania

Ali Azizzadeh, MD
Los Angeles, California

Nobuyoshi Azuma, MD
Asahikawa, Hokkaido, Japan

B

Sateesh C. Babu, MD
Valhalla, New York

Martin R. Back, MD
Gainesville, Florida

Charles J. Bailey, MD
Atlanta, Georgia

Amanda Baker, MD
Bronx, New York

Jonathan Bath, MD
Columbia, Missouri

Richard A. Baum, MD, MPA, MBA
Boston, Massachusetts

Iris Baumgartner, MD
Bern, Switzerland

Hernan A. Bazan, MD
San Francisco, California

Douglas P. Beall, MD
Oklahoma City, Oklahoma

Robert E. Beasley, MD
Miami, Florida

Robert J. Beaulieu, MD, MSE
Ann Arbor, Michigan

Adam Beck, MD
Birmingham, Alabama

Jean Pierre Becquemin, MD
Saint-Clément-de-Rivière, France

Christian A. Behrendt, MD
Hamburg, Germany

George L. Berdejo, BA, RVT
White Plains, New York

Ramon Berguer, MD, PhD
Ann Arbor, Michigan

Todd Berland, MD
New York, New York

Colin D. Bicknell, MD
London, United Kingdom

Jean Bismuth, MD
Tampa, Florida

Stephen A. Black, MD
London, United Kingdom

James H. Black, III, MD
Baltimore, Maryland

Jan D. Blankensteijn, MD
Amsterdam, The Netherlands

Erwin Blessing, MD
Hamburg, Germany

Dittmar Böckler, MD
Heidelberg, Germany

Arash Bornak, MD
Miami, Florida

Michel J. Bosiers, MD
Bern, Switzerland

Oscar H. Bottini, MD
Buenos Aires, Argentina

Lee Bouwman, MD, PhD
Spaubeek, The Netherlands

Jonathan R. Boyle, MD, MA (Cantab)
Cambridge, United Kingdom

Kursat A. Bozkurt, MD
Istanbul, Turkey

Daniela Branzan, MD
Munich, Germany

Eb Bright, BS, MBA, JD
Wallingford, Connecticut

FACULTY

VISIT WWW.VEITHSYMPOSIUM.ORG FOR FULL FACULTY LISTING

Clayton J. Brinster, MD
Los Angeles, California

Marianne Brodmann, MD
Graz, Austria

Allan L. Brook, MD
Bronx, New York

Benjamin S. Brooke, MD, PhD
Park City, Utah

Thomas G. Brott, MD
Jacksonville, Florida

Varshi Broumand, MD
San Antonio, Texas

Deborah J. Brouwer-Maier, RN, CNN
Lansdale, Pennsylvania

Kellie R. Brown, MD
Milwaukee, Wisconsin

O. William Brown, MD, JD
Royal Oak, Michigan

Elchanan Bruckheimer, MBBS
Petah-Tikva, Israel

Richard Bulbulia, MA, MD
Oxford, United Kingdom

Jason S. Burgess, MD, RVT
Charlotte, North Carolina

Jacques Busquet, MD
Paris, France

C

Keith D. Calligaro, MD
Philadelphia, Pennsylvania

Victor M. Canata, MD, PhD
Asuncion, Paraguay

Ludovic Canaud, MD, PhD
Montpellier, France

Laura Capoccia, MD, PhD
Frosinone, Italy

Francis Caputo, MD
Cleveland, Ohio

Neal S. Cayne, MD
New York, New York

Rabih A. Chaer, MD
New York, New York

Elliot L. Chaikof, MD, PhD
Boston, Massachusetts

Venita R. Chandra, MD
Stanford, California

Heepeel Chang, MD
Hackensack, New Jersey

Robert W. Chang, MD
San Francisco, California

Julius Chapiro, MD, PhD
New Haven, Connecticut

Resmi A. Charalel, MD, MPH
New York, New York

Zhong Chen, MD
Beijing, China

Yung-Wei Chi, DO
Sacramento, California

Jae S. Cho, MD
Cleveland, Ohio

Daniel G. Clair, MD
Nashville, Tennessee

Rachel E. Clough, PhD, FRCS
London, United Kingdom

W. Darrin Clouse, MD
Charlottesville, Virginia

Joshua Cohen, JD
New York, New York

Dawn M. Coleman, MD
Durham, North Carolina

Jill J. Colglazier, MD
Rochester, Minnesota

Jesse A. Columbo, MD, MS
Lebanon, New Hampshire

Michael S. Conte, MD
San Francisco, California

Joseph S. Coselli, MD
Houston, Texas

Victor S. Costache, MD, PhD
Bucuresti, Romania

Frank J. Criado, MD
Baltimore, Maryland

Jack L. Cronenwett, MD
Lebanon, New Hampshire

Philippe W.M. Cuypers, MD, PhD
Eindhoven, The Netherlands

Jacob Cynamon, MD
New York, New York

D

Michael D. Dake, MD
Tucson, Arizona

Ronald L. Dalman, MD
Stanford, California

R. Clement Darling III, MD
Albany, New York

Seanna R. Daves, MD
Austin, Texas

Alun H. Davies, MA, DM, DSc
London, United Kingdom

Mark G. Davies, MD
Houston, Texas

Gert J. de Borst, MD, PhD
Utrecht, The Netherlands

Jorg L. de Bruin, MD, PhD
Rotterdam, The Netherlands

Gianmarco de Donato, MD
Siena, Italy

Reade A. De Leacy, MBBS
New York, New York

Jean-Paul de Vries, MD, PhD
Groningen, The Netherlands

Steven M. Dean, DO
Columbus, Ohio

David H. Deaton, MD
Crownsville, Maryland

Sebastian E. Debus, MD, PhD
Hamburg, Germany

Randall DeMartino, MD
Rochester, Minnesota

Colin P. Derdeyn, MD
Charlottesville, Virginia

Brian G. DeRubertis, MD
New York, New York

David J. Dexter, MD
Norfolk, Virginia

Nuno V. Dias, MD, PhD
Malmö, Sweden

Alan M. Dietzek, MD, RPVI
Neptune, New Jersey

Ellen D. Dillavou, MD
Durham, North Carolina

FACULTY

VISIT WWW.VEITHSYMPOSIUM.ORG FOR FULL FACULTY LISTING

Bart L. Dolmatch, MD
Mountain View, California

Hasan H. Dosluoglu, MD
Buffalo, New York

Matthew J. Dougherty, MD
Philadelphia, Pennsylvania

Maciej L. Dryjski, MD, PhD
Buffalo, New York

Anahita Dua, MD, MS, MBA
Boston, Massachusetts

Joseph J. DuBose, MD
Austin, Texas

Audra A. Duncan, MD
London, Ontario, Canada

E

Matthew J. Eagleton, MD
Boston, Massachusetts

John F. Eidt, MD
Dallas, Texas

Hosam F. El Sayed, MD
Norfolk, Virginia

Jens Eldrup-Jorgensen, MD
Portland, Maine

Steve Elias, MD
Englewood, New Jersey

Guillermo A. Escobar, MD
Cleveland, Ohio

Ignacio Escotto, MD
Mexico City, Mexico

Mohammad H. Eslami, MD, MPH
Charleston, West Virginia

Anthony L. Estrera, MD
Houston, Texas

Yana Etkin, MD
Lake Success, New York

Christian D. Etz, MD, PhD
Rostock, Germany

F

Gianluca Faggioli, MD
Bologna, Italy

Alex Fairman, MD
Philadelphia, Pennsylvania

Ayman M. Fakhry, MD
Alexandria, Egypt

Fabrizio Fanelli, MD
Florence, Italy

Alik Farber, MD, MBA
Boston, Massachusetts

Mark A. Farber, MD
Chapel Hill, North Carolina

Peter L. Faries, MD
New York, New York

Javairiah Fatima, MD
Danbury, Connecticut

Marcelo Ferreira, MD
Rio de Janeiro, Brazil

Ciro Ferrer, MD, PhD
Rome, Italy

Carlos Alberto Figueroa, PhD
Ann Arbor, Michigan

Aaron M. Fischman, MD
New York, New York

Mazin Foteh, MD
Dallas, Texas

Charles J. Fox, MD
Baltimore, Maryland

Weiguo Fu, MD
Shanghai, China

Naoki Fujimura, MD, PhD
Tokyo, Japan

G

Dennis R. Gable, MD
Dallas, Texas

Paul J. Gagne, MD
Darien, Connecticut

Katherine A. Gallagher, MD
Ann Arbor, Michigan

Chirag D. Gandhi, MD
Valhalla, New York

Ripal T. Gandhi, MD
Miami, Florida

Lawrence A. Garcia, MD
Roslyn, New York

Karan Garg, MD
New York, New York

Mauro Gargiulo, MD
Bologna, Italy

Antonios P. Gasparis, MD
Huntington, New York

Ahmed Gaweesh, MD, MSc, PhD
Giza, Egypt

Hugh A. Gelabert, MD
Los Angeles, California

Elizabeth A. Genovese, MD, MS
Philadelphia, Pennsylvania

Elizabeth L. George, MD, MS
Stanford, California

Patrick J. Geraghty, MD
Saint Louis, Missouri

George Geroulakos, MD, PhD
Athens, Greece

Jeff H. Geschwind, MD
Westport, Connecticut

Brian B. Ghoshhajra, MD, MBA
Boston, Massachusetts

Sergio Gianesini, MD, PhD
Ferrara, Italy

Richard G.J. Gibbs, FRCS
London, United Kingdom

Kathleen D. Gibson, MD
Seattle, Washington

Rocco Giudice, MD
Rome, Italy

Monika L. Gloviczki, MD, PhD
Scottsdale, Arizona

Peter Gloviczki, MD, PhD
Scottsdale, Arizona

Manj S. Gohel, MD
Cambridge, United Kingdom

Jerry Goldstone, MD
Stanford, California

Alejandro J. Gonzalez Ochoa, MD
San Luis Río Colorado, Mexico

Philip P. Goodney, MD, MS
Lebanon, New Hampshire

David Gordon, MD
Mt. Kisco, New York

FACULTY

VISIT WWW.VEITHSYMPOSIUM.ORG FOR FULL FACULTY LISTING

Yann Gouëffic, MD, PhD
Paris, France

William A. Gray, MD
Philadelphia, Pennsylvania

Marcelo Guimaraes, MD, MBA
Charleston, South Carolina

Wei Guo, MD
Beijing, China

Gutenberg A. Gurgel, MSc, MD
Natal, Rio Grande do Norte, Brazil

H

Eric Hager, MD
Pittsburgh, Pennsylvania

Mo S. Hamady, MD
London, United Kingdom

Sukgu M. Han, MD, MS
Los Angeles, California

Neil Haranhalli, MD
Bronx, New York

Leonardo O. Harduin, MD, MSc, PhD
Niterói, Rio de Janeiro, Brazil

Linda M. Harris, MD
Buffalo, New York

Kenichi Hashizume, MD, PhD
Shinjuku, Tokyo, Japan

Ziv J. Haskal, MD
Charlottesville, Virginia

Stephan Haulon, MD
Paris, France

Peter Henke, MD
Ann Arbor, Michigan

Jan M.M. Heyligers, MD, PhD
Tilburg, The Netherlands

Caitlin W. Hicks, MD, MS
Baltimore, Maryland

Anil P. Hingorani, MD
Brooklyn, New York

Jade S. Hiramoto, MD
San Francisco, California

Joshua A. Hirsch, MD
Boston, Massachusetts

Tobias Hirsch, MD
Halle, Germany

Kim J. Hodgson, MD
Springfield, Illinois

Tal M. Hörer, MD, PhD
Örebro, Sweden

Lawrence Hofmann, MD
Stanford, California

Arjan W.J. Hoksbergen, MD, PhD
Amsterdam, The Netherlands

Andrew Holden, MBChB
Auckland, Australia

Samuel E. Horr, MD
Nashville, Tennessee

Ying Huang, MD, PhD
Houston, Texas

Misty D. Humphries, MD, MAS
Sacramento, California

Mohamad A. Hussain, MD, PhD
Boston, Massachusetts

I

Mark D. Iafrati, MD
Nashville, Tennessee

Osamu Iida, MD, PhD
Osaka, Japan

Karl A. Illig, MD
Houston, Texas

Sriram S. Iyer, MD
New York, New York

J

Glenn Jacobowitz, MD
New York, New York

Krishna Jain, MD
Chicago, Illinois

Houman Jalaie, MD, PhD
Berlin, Germany

Arminder S. Jassar, MBBS
Boston, Massachusetts

Aleksandra Jaworucka-Kaczorowska, MD, PhD
Gorzów Wielkopolski, Poland

Arjun Jayaraj, MD
Jackson, Mississippi

Michael P. Jenkins, MBBS, BSc, MS
London, United Kingdom

Jeffrey Jim, MD, MPHS
Minneapolis, Minnesota

Juan Carlos Jimenez, MD, MBA
Los Angeles, California

Ravul Jindal, FRCS
Chandigarh, India

Hillary A. Johnston-Cox, MD, PhD
New York, New York

Randolph Todd C. Jones, MD
Washougal, Oregon

William D. Jordan Jr., MD
Augusta, Georgia

Matthieu M.J. Josnin, MD
La Roche sur Yon, France

Edwaldo E. Joviliano, MD, PhD
Ribeirão Preto, São Paulo, Brazil

K

Loay S. Kabbani, MD, MHSA
Detroit, Michigan

Lowell S. Kabnick, MD
Lake Worth Beach, Florida

Daniella Kadian-Dodov, MD
New York, New York

Andrea Kahlberg, MD
Milano, Italy

Stavros K. Kakkos, MD, PhD
Patras, Greece

Manju Kalra, MBBS
Rochester, Minnesota

Vikram S. Kashyap, MD
Grand Rapids, Michigan

Piotr M. Kasprzak, MD
Regensburg, Germany

FACULTY

VISIT WWW.VEITHSYMPOSIUM.ORG FOR FULL FACULTY LISTING

Konstantinos Katsanos, MSc, MD, PhD
Patras, Greece

Athanasios Katsargyris, MD
Nuremberg, Germany & Athens, Greece

Stefan Kenel-Pierre, MD
Miami, Florida

Bhavraj Khalsa, MD
Torrance, California

Deepak Khatri, MD
Bronx, New York

Neil M. Khilnani, MD
New York, New York

Ali B. Khoynezhad, MD, PhD
Bel Air, California

Misaki M. Kiguchi, MD
Washington, District of Columbia

Edward Kim, MD
New York, New York

Melissa L. Kirkwood, MD
Dallas, Texas

Jared Knopman, MD
New York, New York

Charlott Elise Köhler, MD
Münster, Germany

Tilo Kölbel, MD, PhD
Hamburg, Germany

Raghu Kolluri, MD
Columbus, Ohio

Ralf R. Kolvenbach, MD
Duesseldorf, Germany

Dimitrios Kontothanassis, MD
Ferrara, Italy

Louise Koskas, MD, MSc
Paris, France

Drosos Kotelis, MD
Bern, Switzerland

Panos Kougias, MD, MSc
Brooklyn, New York

Zvonimir Krajcer, MD
Houston, Texas

Ari Kramer, MD
Spartanburg, South Carolina

Zbigniew Krasiński, MD, PhD
Poznan, Poland

Dainis K. Krievins, MD
Riga, Latvia

Mrinalini Krishnan, MD
Philadelphia, Pennsylvania

Boonprasit Kritpracha, MD
Hat Yai, Songkhla, Thailand

Waclaw B. Kuczmik, MD, PhD
Katowice, Poland

Steven Kum, MD
Singapore

Toru Kuratani, MD, PhD
Osaka, Japan

Christopher J. Kwolek, MD, MBA
Boston, Massachusetts

L

Nicos Labropoulos, PhD
Stony Brook, New York

Mario L. Lachat, MD
Zurich, Switzerland

Brajesh K. Lal, MD
Baltimore, Maryland

Salim Lala, MD, MBA
Washington, District of Columbia

Glenn M. LaMuraglia, MD
Boston, Massachusetts

Gregg S. Landis, MD
New Hyde Park, New York

Werner Lang, MD
Erlangen, Germany

Igor A. Laskowski, MD, PhD
Valhalla, New York

Peter F. Lawrence, MD
Los Angeles, California

Jeffrey H. Lawson, MD, PhD
Durham, North Carolina

Byung-Boong Lee, MD
Washington, District of Columbia

Jason T. Lee, MD
Stanford, California

Robert E. Lee, MD
Grosse Pointe Shores, Michigan

Seon-Kyu Lee, MD, PhD
New York, New York

W. Anthony Lee, MD
Boca Raton, Florida

Elad I. Levy, MD, MBA
Buffalo, New York

Christos D. Liapis, MD
Athens, Greece

Michael K.W. Lichtenberg, MD
Arnsberg, Germany

David S. Liebeskind, MD, MBA
Los Angeles, California

Timothy K. Liem, MD, MBA
Portland, Oregon

Francesco Liistro, MD
Arezzo, Italy

Jes S. Lindholt, MD
Odense, Denmark

Evan C. Lipsitz, MD, MBA
New York, New York

Terry Litchfield, MPA
Blanchardville, Wisconsin

Paul Lleva, MD
White Plains, New York

Armando C. Lobato, MD, PhD
São Paulo, Brazil

Ian Loftus, MD
London, United Kingdom

Shang Loh, MD
Philadelphia, Pennsylvania

Joann M. Lohr, MD
Columbia, South Carolina

Charmaine Lok, MD
Toronto, Ontario, Canada

Joseph V. Lombardi, MD, MBA
Pomona, New Jersey

Lars B. Lonn, MD, PhD
Copenhagen, Denmark

Robert A. Lookstein, MD, MHCDL
New York, New York

Qingsheng Lu, MD
Shanghai, China

John F. Lucas III, MD
Greenwood, Mississippi

FACULTY

VISIT WWW.VEITHSYMPOSIUM.ORG FOR FULL FACULTY LISTING

Alan B. Lumsden, MD
Houston, Texas

Fedor Lurie, MD, PhD
Toledo, Ohio and Ann Arbor, Michigan

Sean P. Lyden, MD
Cleveland, Ohio

M

Thanila A. Macedo, MD
Houston, Texas

Carlos Clayton Macedo de Freitas, MD, PhD
Botucatu, Brazil

Lindsay Machan, MD
Vancouver, British Columbia, Canada

Jason N. MacTaggart, MD
Omaha, Nebraska

Mahesh V. Madhavan, MD, MS
New York, New York

David C. Madoff, MD
New Haven, Connecticut

Gregory A. Magee, MD, MSc
New York, New York

Dale Maharaj, FACS
Port of Spain, Trinidad and Tobago

Michel S. Makaroun, MD
Pittsburgh, Pennsylvania

Mahmoud B. Malas, MD, MHS
San Diego, California

Thomas S. Maldonado, MD
New York, New York

Martin Malina, MD, PhD
London, United Kingdom

Nicola Mangialardi, MD
Rome, Italy

Armando Mansilha, MD, PhD
Porto, Portugal

Ashraf Mansour, MD
Grand Rapids, Michigan

Marco G. Manzi, MD
Abano Terme, Italy

Stefano Marcia, MD
Cagliari, Italy

Michael L. Marin, MD
New York, New York

Gabriele Maritati, MD
Rome, Italy

Elna M. Masuda, MD
Honolulu, Hawaii

Jon S. Matsumura, MD
Aurora, Colorado

Mark A. Mattos, MD
Michigan, United States

Neghae Mawla, MD
Dallas, Texas

David T. McGreevy, MD, PhD
Orebro, Sweden

James F. McKinsey, MD
New York, New York

Robert B. McLafferty, MD, MBA
Portland, Oregon

Barend M.E. Mees, MD, PhD
Maastricht, The Netherlands

Manish Mehta, MD, MPH
Latham, New York

Fei Mei, MD, PhD
Yichang City, Hubei Province, China

Mark H. Meissner, MD
Seattle, Washington

Germano C.G. Melissano, MD
Milano, Italy

Matthew W. Mell, MD, MS
Sacramento, California

Matthew T. Menard, MD
Boston, Massachusetts

Bernardo C. Mendes, MD
Los Angeles, California

Valerie M. Merkle, PhD
Silver Spring, Maryland

Geno J. Merli, MD, MACP
Philadelphia, Pennsylvania

D. Christopher Metzger, MD
Kingsport, Tennessee

Mark W. Mewissen, MD, RVT
Milwaukee, Wisconsin

Claude Mialhe, MD
Le Tholonet, France

Dianna M. Milewicz, MD, PhD
Houston, Texas

Charles C. Miller, PhD
Houston, Texas

Joseph L. Mills, MD
Houston, Texas

Ross Milner, MD
Chicago, Illinois

David J. Minion, MD
Lexington, Kentucky

Jessica C. Mintz, DO
Boston, Massachusetts

Erica L. Mitchell, MD, MEd
Memphis, Tennessee

Bijan Modarai, PhD, FRCS
London, United Kingdom

Irwin V. Mohan, MBBS, MD
Sydney, Australia

Frans L. Moll, MD, PhD
Utrecht, The Netherlands

Samuel R. Money, MD, MBA
New Orleans, Louisiana

Peter Monteleone, MD
Austin, Texas

Miguel F. Montero-Baker, MD
Houston, Texas

Robert A. Montgomery, MD, DPhil
New York, New York

Randy D. Moore, MD
Chestermere, Alberta, Canada

Wesley S. Moore, MD
Los Angeles, California

Robert A. Morgan, MD
London, United Kingdom

Raghu Motaganahalli, MD
Indianapolis, Indiana

Nicolas J. Mouawad, MD, MPH, MBA
Bay City, Michigan

Patrick E. Muck, MD
Cincinnati, Ohio

Stefan Müller-Hülsbeck, MD
Flensburg, Germany

Dipankar Mukherjee, MD
Falls Church, Virginia

Grace C. Mulatti, MD, PhD
São Paulo, Brazil

FACULTY

VISIT WWW.VEITHSYMPOSIUM.ORG FOR FULL FACULTY LISTING

Leila Mureebe, MD
Durham, North Carolina

Erin H. Murphy, MD
Charlotte, North Carolina

Timothy P. Murphy, MD
Boston, Massachusetts

Piotr Musialek, MD, DPhil
Krakow, Poland

Firas F. Mussa, MD
Houston, Texas

Pramook Mutirangura, FRCS (Edinburgh)
Bangkok, Thailand

Piotr Myrcha, MD
Warsaw, Poland

N

Yuliia Nahaliuk, MD
Kiev, Ukraine

Nicolas Neaume, MD
Toulouse, France

Peter K. Nelson, MD
New York, New York

Richard F. Neville, MD
Fairfax, Virginia

Christoph A. Nienaber, MD, PhD
London, United Kingdom

Sigrid Nikol, MD
Hamburg, Germany

Samy S. Nitecki, MD
Haifa, Israel

Katariina M. Noronen, MD, PhD
Helsinki, Finland

Andriy O. Nykonenko, MD, PhD
Zaporizhzhia, Ukraine

O

Thomas F. O'Donnell, Jr., MD
Boston, Massachusetts

Andrea T. Obi, MD
Ann Arbor, Michigan

Paulo E. Ocke Reis, MD, PhD
Rio de Janeiro, Brazil

Gustavo S. Oderich, MD, PhD
Houston, Texas

Shinnosuke Okuma, MD, PhD
Tokyo, Japan

Sarah Onida, BSc, MBBS, PhD
London, United Kingdom

Alisha Oropallo, MD, PhD
Lake Success, New York

Alvaro Orrego, MD
Vina del Mar, Chile

Matteo Orrico, MD, PhD
Cosenza, Italy

Oleg Otlivanchik, MD, PhD
New York, New York

Kenneth Ouriel, MD, MBA
New York, New York

Douglas M. Overbey, MD
Durham, North Carolina

Kathleen J. Ozsvath, MD
Troy, New York

P

Shoaib F. Padaria, MD, DM
Mumbai, India

Frank T. Padberg Jr, MD
Newark, New Jersey

Luca Palombi, MD
Mestre Venezia, Veneto, Italy

Gustavo Paludetto Oliveira, PhD, Professor
Brasilia, Brazil

Jean M. Panneton, MD
Miami, Florida

Giuseppe Papia, MD
Toronto, Canada

Rajiv Parakh, MBBS, MS
Gurgaon, India

Kosmas I. Paraskevas, MD
Warsaw, Poland

Sahil A. Parikh, MD
New York, New York

Virendra I. Patel, MD, MPH
New York, New York

Lorenzo Patrone, MD
Florence, Italy

Athos Patsalides, MD, MPH
New York, New York

Julio Peclat, MD, PhD
Rio de Janeiro, Brazil

Felice Pecoraro, MD
Palermo, Italy

Ivo Petrov, MD, PhD
Sofia, Bulgaria

Michele Piazza, MD
Padova, Italy

Matthew Popplewell, MD
Edgmond, United Kingdom

Richard J. Powell, MD
Lebanon, New Hampshire

Giovanni Pratesi, MD
Genoa, Italy

Ourania Preventza, MD
San Antonio, Texas

Robert M. Proczka, MD, PhD
Warsaw, Poland

Q

Elina Quiroga, MD, MPH
Seattle, Washington

R

Ravi R. Rajani, MD
Atlanta, Georgia

Seshadri Raju, MD
Jackson, Mississippi

Venkatesh G. Ramaiah, MD
Scottsdale, Arizona

Zoran Rancic, MD, PhD
Lachen, Switzerland

Todd E. Rasmussen, MD
Rochester, Minnesota

Animesh Rathore, MD
Norfolk, Virginia

FACULTY

VISIT WWW.VEITHSYMPOSIUM.ORG FOR FULL FACULTY LISTING

Jennifer Ravert, RN
South Glens Falls, New York

Adam C. Reichard, MD
Cincinnati, Ohio

Michel Reijnen, MD, PhD
Arnhem, The Netherlands

Timothy A. Resch, MD, PhD
Copenhagen, Denmark

Robert Y. Rhee, MD
Brooklyn, New York

Vicente Riambau, MD, PhD
Barcelona, Spain

Jean-Baptiste Ricco, MD, PhD
Poitiers, France

Götz M. Richter, MD, PhD
Stuttgart, Germany

Joseph J. Ricotta II, MD, MS
Boca Raton, Florida

Celia Riga, MD
London, United Kingdom

William P. Robinson, MD
Springfield, Illinois

Caron B. Rockman, MD
Hackensack, New Jersey

Sean P. Roddy, MD
Albany, New York

Anelise Rodrigues, MD, MHSc
Cuiabá, Brazil

Heron E. Rodriguez, MD
Chicago, Illinois

Fiona E.V. Rohlffs, MD, PhD
Regensburg, Germany

Sonia Ronchey, MD, PhD
Rome, Italy

Kenneth Rosenfield, MD
Boston, Massachusetts

Rachel Rosovsky, MD, MPH
Boston, Massachusetts

John R. Ross, Sr., MD
Orangeburg, South Carolina

Vincent L. Rowe, MD
Los Angeles, California

Prabir Roy-Chaudhury, MD, PhD
Chapel Hill, North Carolina

Maria Antonella Ruffino, PD, MD
Lugano, Switzerland

John H. Rundback, MD
Hoboken, New Jersey

S

Theodore F. Saad, MD
Newark, Delaware

Mikel Sadek, MD
New York, New York

Hazim J. Safi, MD
Houston, Texas

Natzi Sakalihasan, MD, PhD
Sart Tilman, Liege, Belgium

Taimur Saleem, MD
Jackson, Mississippi

Clifford M. Sales, MD, MBA
Livingston, New Jersey

Moro Salifu, MD
Brooklyn, New York

Russell H. Samson, MD, RVT
Sarasota, Florida

Luis A. Sanchez, MD
St. Louis, Missouri

Timur P. Sarac, MD
Clearwater, Florida

Pierre G. Sarradon, MD
Toulon, France

Sudhakar R. Satti, MD
Newark, Delaware

Salvatore Scali, MD
Gainesville, Florida

Andres Schanzer, MD
Worcester, Massachusetts

Dierk Scheinert, MD
Leipzig, Germany

Larry A. Scher, MD
Bronx, New York

Marc L. Schermerhorn, MD
Boston, Massachusetts

Kerstin S. Schick, MD
Munich, Germany

Andrej Schmidt, MD
Leipzig, Germany

Darren B. Schneider, MD
Philadelphia, Pennsylvania

Peter A. Schneider, MD
San Francisco, California

Andrew H. Schulick, MD, MBA
Bethesda, Maryland

Geert Willem H. Schurink, MD, PhD
Maastricht, The Netherlands

Sherry D. Scovell, MD
Boston, Massachusetts

Eric A. Secemsky, MD, MSc
Boston, Massachusetts

Nuttawut Sermsathanasawadi, MD, PhD
Bangkok, Thailand

Carlo Setacci, MD
Siena, Italy

Francesco Setacci, MD
Rome, Italy

Julien G. Sfeir, MD
Beirut, Lebanon

Robert Shahverdyan, MD, PhD
Nashville, Tennessee

Joseph Shalhoub, MBBS, PhD
London, United Kingdom

Sherene Shalhub, MD, MPH
Portland, Oregon

Murray L. Shames, MD
Tampa, Florida

Palma M. Shaw, MD, MBA
Syracuse, New York

Maxim Shaydakov, MD, PhD
York, Pennsylvania

Malachi Sheahan, MD
New Orleans, Louisiana

Surendra Shenoy, MD, PhD
St. Louis, Missouri

Dan Shilo, MD
New York, New York

Chang Shu, MD
Beijing, China and ChangSha, Hunan Province, China

Michael C. Siah, MD
Dallas, Texas

Anton N. Sidawy, MD, MPH
Washington, District of Columbia

FACULTY

VISIT WWW.VEITHSYMPOSIUM.ORG FOR FULL FACULTY LISTING

Adnan H. Siddiqui, MD, PhD
Buffalo, New York

Horst Sievert, MD
Frankfurt, Germany

Mikhail T. Silk, MD
New York, New York

Henrik Sillesen, MD, DMSc
Copenhagen, Denmark

Rossi M. Silva, MD
Rio de Janeiro, Brazil

Michael B. Silva, Jr., MD
Galveston, Texas

Jessica P. Simons, MD, MPH
Worcester, Massachusetts

Kerstin Simons, MD, MBChB
Kreuzlingen, Switzerland

Michael J. Singh, MD, MBA
Lexington, Kentucky

Niten Singh, MD
Seattle, Washington

Jeffrey J. Siracuse, MD, MBA
Boston, Massachusetts

Pasqualino Sirignano, MD, PhD
Rome, Italy

Kenneth M. Slaw, PhD
Rosemont, Illinois

Jan M. Sloves, RVT
New York, New York

Christopher J. Smolock, MD
New York, New York

Francesco Spinelli, MD
Rome, Italy

Lars Stangenberg, MD, PhD
Boston, Massachusetts

James C. Stanley, MD
Ann Arbor, Michigan

Benjamin W. Starnes, MD
Seattle, Washington

Brian Stegman, MD
Minneapolis, Minnesota

Johnny Steuer, MD, PhD
Stockholm, Sweden

Scott L. Stevens, MD
Knoxville, Tennessee

David H. Stone, MD
Hanover, New Hampshire

Patrick A. Stone, MD
Nashville, Tennessee

Michael C. Stoner, MD
Rochester, New York

Martin Storck, MD, PhD
Karlsruhe, Germany

Julianne Stoughton, MD
Boston, Massachusetts

Bjoern D. Suckow, MD
Lebanon, New Hampshire

Sherif A.H. Sultan, MD, PhD
Galway, Ireland

Jonathan Susman, MD
New York, New York

Matthew S. Sussman, MD
Miami, Florida

Piotr Szopinski, MD, PhD
Warsaw, Poland

T

Michael G. Tal, MD, MBA
Miami Beach, Florida

Lawrence N. Tanenbaum, MD
Riverside, Connecticut

Apostolos K. Tassiopoulos, MD
Stony Brook, New York

Charles A. Taylor, PhD
Austin, Texas

Gunnar Tepe, MD
Rosenheim, Germany

Katherine A. Teter, MD
Hackensack, New Jersey

Bryan W. Tillman, MD, PhD
Columbus, Ohio

Carlos H. Timaran, MD
Atlanta, Georgia

Giovanni Tinelli, MD, PhD
Rome, Italy

Windsor Ting, MD
New York, New York

Margaret Tracci, MD, JD
Charlottesville, Virginia

Kenneth Tran, MD
Stanford, California

Santi Trimarchi, MD, PhD
Milano, Italy

Ramesh K. Tripathi, MD
Brisbane, Australia

Yamume Tshomba, MD
Roma, Italy

Nikolaos Tsilimparis, MD, PhD
Munich, Germany

U

Jorge H. Ulloa, MD
Bogota, Colombia

Gilbert R. Upchurch, MD
Gainesville, Florida

Tomasz Urbanek, MD, PhD
Katowice, Poland

Marco V. Usai, MD
Münster, Germany

V

Claude D. Vaislic, MD
Le Chesnay, France

Domenico Valenti, DMChir, PhD
London, United Kingdom

Jos C. van den Berg, MD, PhD
Lugano, Switzerland

Joost van Herwaarden, MD, PhD
Utrecht, The Netherlands

Ramon L. Varcoe, MBBS, MS, PhD, MMed
Sydney, Australia

Lina M. Vargas, MD, RPVI
Windermere, Florida

Suresh Vedantham, MD
Saint Louis, Missouri

Ravi K. Veeraswamy, MD
Charleston, South Carolina

FACULTY

VISIT WWW.VEITHSYMPOSIUM.ORG FOR FULL FACULTY LISTING

Frank J. Veith, MD
Cleveland, Ohio and New York, New York

Maarit Venermo, MD, PhD
Helsinki, Finland

Hence J.M. Verhagen, MD, PhD
Rotterdam, The Netherlands

Eric L.G. Verhoeven, MD, PhD
Nuremberg, Germany

Todd R. Vogel, MD, MPH
Columbia, Missouri

Arno von Ristow, MD, PhD
Rio de Janeiro, Brazil

W

Reese A. Wain, MD
New York, New York

Thomas W. Wakefield, MD
Ann Arbor, Michigan

Ron Waksman, MD
Washington, District of Columbia

Craig M. Walker, MD
Houma, Louisiana

Grace J. Wang, MD, MSCE
Philadelphia, Pennsylvania

Jinsong Wang, MD, PhD
Guangzhou, China

Anders Wanhainen, MD, PhD
Uppsala, Sweden

Haimanot (Monnie) Wasse, MD, MPH
Chicago, Illinois

Kapil Wattamwar, MD
Jersey City, New Jersey

Mitchell D. Weinberg, MD
Staten Island, New York

Joshua L. Weintraub, MD
New York, New York

F. Mae West, MD
Philadelphia, Pennsylvania

Rodney A. White, MD
Long Beach, California

Mark S. Whiteley, MS, FRCS
Guildford, United Kingdom

Michael H. Wholey, MD, MBA
San Antonio, Texas

Willem Wisselink, MD
Chicago Illinois

Tim Wittig, MD
Leipzig, Germany

Mathew D. Wooster, MD, MBA
Columbia, South Carolina

I-Hui Wu, MD, PhD
Taipei, Taiwan

Y

Wayne F. Yakes, MD
Englewood, Colorado

Dean Yamaguchi, MD
New Orleans, Louisiana

Kak Khee Yeung, MD, PhD
Amsterdam, The Netherlands

Michael N. Young, MD
Lebanon, New Hampshire

Z

Richard L. Zampolin, MD
New York, New York

Christopher K. Zarins, MD
Stanford, California

Hany M. Zayed, MD
London, United Kingdom

Clark J. Zeebregts, MD, PhD
Groningen, The Netherlands

Thomas Zeller, MD
Bad Krozingen, Germany

Sara L. Zettervall, MD
Seattle, Washington

Wayne W. Zhang, MD
Seattle, Washington

Yuehong Zheng, PhD
Beijing, China

Wei Zhou, MD
Tucson, Arizona

R. Eugene Zierler, MD, RPVI
Seattle, Washington

Chiara Zini, MD, PhD
Firenze, Italy

REGISTRATION

Tuesday, November 17 - Saturday, November 21, 2026
New York Hilton Midtown

FULL REGISTRATION (TUESDAY - SATURDAY)

Tuition

Tuition includes access to any Thursday and Saturday Only Component.

Registration fee includes breakfast, lunch and breaks

Physicans (excluding Fellows/Trainees and Residents) — **$1449**

US 2nd-Year Fellows in an RRC-approved 2-Year Vascular Fellowship **OR** 5th-Year Vascular Resident in an approved Vascular Surgery Residency as of November 2026 AND Canadian Vascular Surgery Fellows in Training. (Tuition is provided through an Educational Grant by W.L. Gore & Associates Inc.) Letter of verification from Chief of Service must be obtained prior to registration and sent by email to registrar@veithsymposium.org. Upon receipt of the letter, a discount code will be provided so that you may register complimentary. The letter must include the start and end dates of vascular fellowship. — **Complimentary**

Non-US Fellows and Residents (Trainees) — **$729**
Letter of verification from Chief of Service must be obtained prior to registration and emailed to registrar@veithsymposium.org.

Non-Finishing U.S. Fellows/Residents, Nurses, Technologists — **$679**

Physician Assistant (non-physician, clinician) and Nurse Practitioners — **$729**

Medical Students — **$529**
(Letter of verification from Dean must be obtained prior to registration and emailed to registrar@veithsymposium.org.)

Allied Health Care Professionals, Venture Capitalists, and All Others — **$979**

Venous Venous and More Venous® Workshop
Wednesday, November 18, 2026 from 1:00 p.m. - 6:00 p.m.
(This is a non-CME Activity.)
(Registration is limited to 200 fully paid VEITHsymposium registrants.)
Clinicians (Non-industry) — **$25**
Industry, Including Exhibitors — **$100**

THURSDAY ONLY - NOVEMBER 19, 2026

AIMsymposium at VEITHsymposium — **$349**
7:50 A.M. to 6:00 P.M.
Tuition includes access to any VEITHsymposium Thursday Sessions.

Multidisciplinary Stroke Prevention And Treatment — **$349**
7:45 A.M. to 12:20 P.M.
Tuition includes access to any VEITHsymposium Thursday Sessions.

FRIDAY ONLY - NOVEMBER 20, 2026

VEITHsymposium Fellows & Residents Career Development Program
8:00 A.M. to 5:00 P.M.
(This is a non-CME Activity.)

Potential Employer/Recruiter — **$500**
(For Employers/Recruiters not registered at VEITHsymposium)
Tuition includes access to VEITHsymposium Friday Sessions.

SATURDAY ONLY COMPONENTS - NOVEMBER 21, 2026

VEITHsymposium (Miscellaneous Topics) — **$349**
7:00 A.M. – 12:30 P.M.
Tuition includes access to any Saturday Only Component.

Hemodialysis Access (Physicians only) — **$349**
8:00 A.M. – 4:05 P.M.
Tuition includes access to any Saturday Only Component.

Hemodialysis Access (Non-Physicians) — **$150**
8:00 A.M. – 4:05 P.M.
(This rate is not available to industry personnel.)
Tuition includes access to Hemodialysis Access Only.

Cancellation Policy: There is a $95 cancellation fee if canceled in writing by October 19, 2026. No refunds will be made thereafter.

Online: www.veithsymposium.org/registration

Phone: 800-987-9314, (select option 1) with payment information

Mail: Please make checks payable to the Cleveland Clinic Educational Foundation and print and mail your receipt to:

The Cleveland Clinic Educational Foundation
Attn: EMCC104
P.O. Box 931653
Cleveland, OH 44193-1082

Please notify registrar@veithsymposium.org if sending by overnight mail.

Email: registrar@veithsymposium.org

Checks must be received by October 31, 2026

REGISTER ONLINE AT
WWW.VEITHSYMPOSIUM.ORG/REGISTRATION

VEITHSYMPOSIUM ON DEMAND

www.veithondemand.com



Purchase all the Talks, Slides, and Videos - fully synchronized - and all the Panels. This Library or Components thereof can be used as an Educational Resource or Teaching Tool.

For more information on how to obtain the VEITHsymposium Online Library, please call 800-987-9314 (select option 3).

www.veithsymposium.org

VEITH SYMPOSIUM®

Connecting The Vascular Community

SAVE THE DATE

Tuesday - Saturday, November 16-20, 2027

VEITH

Vascular Endovascular Issues Techniques Horizons



Symposium Chairman
Frank J. Veith, MD

Symposium Executive Director
Gustavo S. Oderich, MD, PhD

Symposium Co-Chairmen
Enrico Ascher, MD
Kenneth Ouriel, MD, MBA
Sean P. Lyden, MD

Sponsored by

Cleveland Clinic

Hilton

www.VEITHsymposium.org

Cleveland Clinic

THE CLEVELAND CLINIC EDUCATIONAL FOUNDATION
PO BOX 931653
CLEVELAND, OH 44193-1082

VEITHsymposium®
Connecting The Vascular Community
www.veithsymposium.org

Tuesday - Saturday
November 17-21, 2026

Download The VEITHsymposium App To Stay Up To Date

iOS and Android

NEW THIS YEAR

GE Healthcare - Advances, Workflows, and Case-Based Decision-Making From the Neck Down: The Great Imaging Debate - Wednesday, November 18, 2026

AGAIN THIS YEAR

- Physicians As Industry Employees - Wednesday, November 18, 2026
- Point - Counterpoint: Controversies in Modern Venous Disease - Wednesday, November 18, 2026
- VVVs @ Vs® - Venous Venous and More Venous® Workshop at VEITHsymposium - Wednesday, November 18, 2026
- AIMsymposium at VEITHsymposium - Topics Of Interest To Interventional Radiologists - Thursday, November 19, 2026
- Multidisciplinary Stroke Prevention and Treatment - Thursday, November 19, 2026
- Associate Faculty Global Podium Presentations Program - Wednesday - Friday, November 18-20, 2026
- The Frank J. Veith International Society Associate Faculty Global Podium Presentations Program at VEITHsymposium - Friday, November 20, 2026
- J. Leonel Villavicencio Latin American Program at VEITHsymposium - Thursday - Friday, November 19-20, 2026
- Vascular Fellows & Residents Career Development Program (Including Case Presentations) - Friday, November 20, 2026
- International Society for Women Vascular Surgeons - Wednesday, November 18, 2026
- World Federation of Vascular Societies at VEITHsymposium - Wednesday, November 18, 2026
- The International BEST-CLI Collaborative: Mastering Endovascular Care - Thursday, November 19, 2026

VEITHsymposium is Compliant with the MedTech Europe Code of Ethical Business Practice.