

2/2016

INFORMATION FOR MEMBERS

SOCIETY MEETING FOUNDATION

Interview on
EBIR Exam

Your guide to
CIRSE 2016

Inside
perspectives
at ICCIR

EBIR
news



CIRSE 2016: Back to Barcelona

I N N O V A T I O N E D U C A T I O N I N T E R V E N T I O N

Join us for the second IDEAS symposium, included in
the CIRSE 2016 Annual Meeting from September 10-14

Cardiovascular and Interventional Radiological Society of Europe

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LINES FROM THE PRESIDENT

"This year's Annual Meeting promises to have all the features past participants have come to know and love about the CIRSE congress, but will also include many first-time features for those looking to experience something new."

Dear colleagues,

We are only halfway through the year and so many wonderful learning opportunities have already taken place, from the European Conference on Interventional Oncology (ECIO) to the International Conference on Complications in Interventional Radiology (ICIR) and many others worldwide. Now, it's time to look forward as we put the final touches on the biggest IR congress of the year: CIRSE 2016. This edition of IR News will give you a glimpse of what to expect this year in Barcelona.

CIRSE 2016 Highlights

This year's Annual Meeting promises to have all the features past participants have come to know and love about the CIRSE congress, but will also include many first-time features for those looking to experience something new. Headed by Christoph Binkert and Fabrizio Fanelli, the CIRSE Scientific Programme Committee has worked diligently to ensure an exciting and well-rounded programme for us all. With two new session types, Expert Round Tables and Expert Case Discussions, CIRSE aims to widen the interdisciplinary discussions around a variety of topics. Add to this the new "Super Tuesday" Free Paper session, which aims to expand awareness on current, important research in IR by presenting six fascinating scientific papers, and I cannot wait to participate in the conversations these new sessions will inspire!

IDEAS

Following last year's success, CIRSE 2016 will again include the adjoining Interdisciplinary Endovascular Aortic Symposium (IDEAS), along with a new feature: the IDEAS Training Village. This area will allow delegates the chance to get hands-on experience with many of the thoracic and abdominal aortic devices on the market. A kick-off event on Saturday afternoon will explain the set up and key features of the Training Village, and it will remain open for delegates to utilise until Tuesday evening.

CIRSE Meets...

One of my favourite parts of the programme is always the interesting presentations and discussions that occur during the "CIRSE meets..." sessions. This year, with prostate artery embolisation increasing in popularity, we welcome the European Association of Urology (EAU). Presentations will be given by both interventionalists and urologists, encouraging discussion between the disciplines on PAE and patient selection.

Honorary Lecture

Having grown up in Greece along the Mediterranean, I was excited to hear that this year's

Honorary Gruentzig Lecture, given by Johannes Lammer, will be on "Vascular IR and sailing the ocean"! Be sure to join me there regardless of whether or not you are a water sport enthusiast!

Student Programme and European Trainee Forum

The Annual Meeting will once more be a place to encourage the growth of IR, as we invite all European medical students to attend for free. If you are currently teaching, be sure to inform your students of this great opportunity to learn more about IR!

The CIRSE congress aims to create an environment where all generations can meet and learn from each other. This is why CIRSE 2016 will see the beginning of the European Trainee Forum, with a designated trainee lounge available for networking. The aim of the forum will be to bridge the gap from CIRSE's Student Programme to the programmes for experienced physicians by offering educational and training opportunities tailored to residents' needs. Much is still in the works, but this initiative is sure to be the start of another great chapter for CIRSE, and I am personally looking forward to meeting and engaging with the young interventionalists-in-training who attend this year's congress.

Around the Globe

Following the energetic ECIO conference in Dublin, which you can read more about on the following pages, my colleagues from the Executive Board and I attended the APCCVIR congress in Suzhou, China, for a special "APSCVIR meets..." session. We were all proud to be invited to join and were impressed by the large number of colleagues who attended, showing us that IR continues to be an expanding global community.

Speaking of CIRSE initiatives around the globe, after a positive reception in Australia last year, the EBIR exam recently had its second round in the southern hemisphere, which took place in Queenstown, New Zealand during the IRSA conference. Read more on pages 6-7 about the value of this exam from Examination Council Chairperson Otto van Delden and Deputy Chairperson Raman Uberoi.

And so, on that note, I'll let you explore the pages ahead. I hope to see you all in Barcelona in September!

Elias Broutzos



S O C I E T Y

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"Following last year's success, CIRSE 2016 will again include the adjoining Interdisciplinary Endovascular Aortic Symposium (IDEAS)"

With over 1,100 participants and roughly 30% attendance from non-radiologists, ECIO proved itself a truly multidisciplinary congress.

European Conference on Interventional Oncology in Dublin

Michelle Weiss, CIRSE Office

Interventional oncology continues to make significant advances both within its field and through its global recognition as a treatment route for an increasing number of cancers. At the annual European Conference on Interventional Oncology (ECIO), held this year in Dublin, Ireland from April 17-20, participants were provided the perfect opportunity to interact with leaders in cancer treatment while discovering and discussing the newest research on medical procedures and devices.

featured step-by-step demonstrations on how to perform treatments in the lung, kidney and bone as well as the liver.

After the success of last year's new session *Best IO Papers*, this year introduced another feature called Invited Scientific Papers. Rather than operating as its own separate session, this new addition brought some of the top research papers into corresponding clinical focus sessions for presentation.



Diverse Educational Programme

This year's conference included 45 hours of education, 28 exhibitors and sponsors and 11 industry symposia. The main themes of the programme were colorectal metastases, lung cancer and bone interventions. With hands-on workshops, multidisciplinary tumour boards, video learning sessions and clinical as well as technical focus sessions, the programme was filled with a variety of topics and session types, catering to various learning methods.

Four of this year's five hands-on workshops were dedicated to localised tumour ablation. Locations covered liver, lung, kidney, and a special session which went "beyond the mainstream" to cover thyroid, prostate and lymph nodes. The new hands-on workshop on supportive procedures included gastric and duodenal tube placement, central venous access and port PICC lines.

The ever-popular multidisciplinary tumour boards provided engaging case discussions on the topics of colorectal hepatic metastases and lung tumours, while video learning sessions

The Honorary Lecture "Intra-arterial treatment of hepatocellular carcinoma at the dawn of systemic therapy" was given by Dr. Bruno Sangro and was a major highlight of the congress. During his discussion of HCC, he brought up a theme of increasing interest: immunotherapy. This new realm of IO also received further exploration in a clinical focus session devoted to the topic.

Interdisciplinary and International

A collection of expert faculty from many disciplines ensured thorough discussion of hot topics at this year's conference. This interdisciplinary communication was supported and increased even further through CIRSE's popular Collaborating Against Cancer Initiative. This grant option allows interventionalists to bring along a non-radiologist colleague, at no extra cost, in order for the colleague to see the variety of interventional oncology options available and for positive relationships to be fostered.

A joint session with the Indian Society of Vascular and Interventional Radiology (ISVIR) invited five presenters to discuss various aspects of *Meeting*

A session on immunotherapy highlighted the potential of this new option in cancer care

Hands-on workshops, multidisciplinary tumour boards and video learning sessions were some of the various session types offered.



the diverse challenges of interventional oncology. Topics included the current situation of IO in India, thermal ablation of lung tumours, hepatobiliary interventions in liver transplants, selective ophthalmic arterial chemoinfusion for retinoblastoma and the Indian registry data for interventions in the management of HCC.

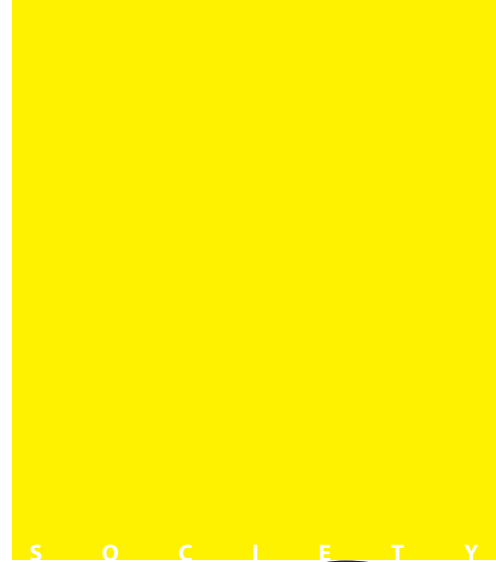
Featured speakers throughout the scientific programme also included members from the European Society of Medical Oncology (ESMO) and the European Society of Surgical Oncology (ESSO).

Looking Ahead

After another successful conference, we are looking forward to next year's meeting in Bilbao, and hope to see many of the same faces and many new!

To view presentations from ECIO 2016, visit www.esir.org.

The ECIO 2016 Review is available on www.ecio.org/review



Presentations from ECIO 2016 can be viewed online at www.esir.org



ECIO 2017

European Conference
on Interventional Oncology

April 23-26
Bilbao, Spain

www.ecio.org



**LEADERS IN ONCOLOGIC
INTERVENTIONS**

CIRSE

Cardiovascular and Interventional Radiological Society of Europe

This year, three members of the Executive Board were invited to take part in the APCCVIR congress for a special APSCVIR meets CIRSE session.

CIRSE Goes to China

Michelle Weiss, CIRSE Office

With IR continually growing in all regions of the world, CIRSE is always happy to partake in educational events outside of Europe in order to serve as an active voice for the European IR community. This April, members of the CIRSE Executive Board were all given the opportunity to represent the society during the 12th Asian-Pacific Congress of Cardiovascular and Interventional Radiology (APCCVIR), the premier IR event in the Asia-Pacific region. Currently occurring every two years, this year's APCCVIR congress was held over four days in the beautiful garden city of Suzhou, China, and welcomed experts and scholars from around the globe to join together to help advance this fast-growing medical field.



APSCVIR meets CIRSE

This year's APCCVIR congress invited the CIRSE leadership to partake in a special *APSCVIR meets CIRSE* session, where members of CIRSE's Executive Board, President Elias Broutzos, Past President Anna Belli and Vice-President Robert Morgan, were able to introduce the organisation and give presentations on IR. Presentation topics included "CIRSE: a global voice for interventional radiology",

"The role of IR in preventing post-partum haemorrhage", "The role of embolisation for the management of type 1 and type 2 endoleaks after EVAR" and "Carotid artery stents: an update on a controversial treatment". This unique session also provided a space for leaders from both societies to mingle and discuss IR on a global level.



Women in IR

Another unique session at APCCVIR was *Women and IR*. This social session invited six female interventional experts from different countries to discuss the development patterns of IR in their culture from their perspective. The discussion covered the social position and role of female interventional physicians, the current training system and the challenges and opportunities that have been met in daily clinical practice. Experts included Miyuki Sone (Japan), Anna Belli (UK), Hongshan Zhong (China), Farah Irani (Singapore), Brigid Connor (New Zealand) and Thazin Than (Myanmar).

To find out more about the congress, please visit www.apccvir2016.org



S O C I E T Y

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Building bonds
between IRs in the
Asia-Pacific region
and Europe

EBIR is changing with the times, says Examination Council Chairperson Otto van Delden and Deputy Chairperson Raman Uberoi.

An Inside Perspective on the EBIR Exam

Michelle Weiss, CIRSE Office

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"The changes in the exam will improve how it is seen internationally as a quality exam, assessing the key areas for interventional radiologists"

CIRSE: The EBIR exam recently updated its format for the oral section of the exam to include 10 ten-minute case discussions with experts; what inspired the change?

Van Delden: There are actually two main drives: one is to improve the quality and validity of the exam, and the second is to examine the whole spectrum of IR. In every practice you'll choose a focus, but, to start out, you have to know the whole curriculum and specialise from there.

Uberoi: We've reduced the variability so people receive a specific standard and then can develop beyond that in a specialist area. This way you ensure the quality of the operators and the interventional radiologists in Europe. The changes in the exam more closely reflect that ambition, and they will improve how the exam is seen internationally as a quality exam, assessing the key areas for interventional radiologists.

CIRSE: Last year the EBIR was adopted by the Interventional Radiology Society of Australasia (IRSA); how do you think the expansion is going so far?

Uberoi: I'm going to IRSA this year in New Zealand with Colin Nice, where the two of us will be representing CIRSE. So we'll be able to see first-hand how it's working. It's a really positive step that the Australasian society has adopted the EBIR. I think the more countries and societies that adopt it the better, because it will strengthen it and allow for engagement with those societies to enhance and improve the exam, but, ultimately, it will make the exam much more respected and desired by interventional radiologists.

Van Delden: It's probably the best example of where the exam is already turning into *the exam* for IRs. They're frontrunners in that respect. For instance, we're not that far yet, but we're working on making EBIR the official IR exam in the Netherlands. We thought of having our own exam, but there's 10, 20 candidates per year. It's much more practical and more useful to join it with EBIR. And I know of other countries that are thinking about doing the same. This will all help in making it a more recognised, standardised, accepted exam.

CIRSE: With your busy clinical schedules, how much time do you devote to the EBIR?

Van Delden: Once we have an exam coming up, we're probably working on it every day: returning emails, correcting and discussing questions, phone conferences, standard-setting conferences...

Uberoi: It's a heavy commitment, and there are peaks and troughs. There's a good amount of frenetic activity three to four months before an exam, trying to get everything ready. But there's also work going on in between. The others on the committee are also busy people. It's a large time commitment on everyone's part and having CIRSE coordinate it and make sure that we're hitting our deadlines is key, because otherwise it would be chaos.

CIRSE: What's your incentive to dedicate this time?

Uberoi: It's five things. We feel a responsibility for our specialty to thrive, for our trainees' and young consultant colleagues' future survival within a competitive world of medicine. The second thing is that it is key to getting the young people into it. The medical students and young trainees are used to having a structure for training and development. They see that this is an organisation which they can get involved with, and the EBIR helps set that up. The third thing is, we have busy jobs, but this is a real interest. It can be quite hard work, but it can be good fun as well. The fourth thing is it actually brings us together. We have made lots of friends and colleagues from various countries, and getting everyone working together is really positive. It brings harmonisation across the European Union and brings the national societies together. And finally, I think it is a focus for CIRSE. It's a function which CIRSE can do well, which none of the other societies can do on their own. On this scale, it's worth putting in the effort for the whole organisation.

Van Delden: You put a lot of work into this and a lot of out-of-office hours and weekends and nights, but the rewards are being part of the CIRSE community and having all these international friends and meetings. So CIRSE gives you back a lot as well.

Recent developments include new format changes and the adoption of the exam by the Australasian IR society.

CIRSE: What would you say to an IR who hasn't received EBIR accreditation yet?

Van Delden: It would be good to do this, because, in the very near future, you're going to have to show what you're worth and that you're certified. This is rapidly evolving and becoming more relevant. Look at job applications now: people are asking for EBIR certification at many places, and this goes faster than you think. In a few years, if things go the way I predict, most will ask for EBIR accreditation.

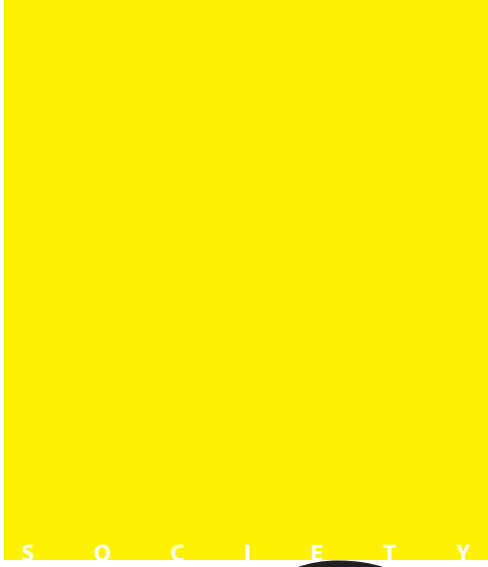
Uberoi: It may not be immediately beneficial, but what it shows is that they have achieved a certain standard and accreditation within their specialty. We separate them from others who haven't got that distinction.

CIRSE: Do you think further recognition is coming for IR, and does the EBIR will help with that?

Van Delden: It is coming, but we have to work really hard at it, because it's not going to come

by itself. Certainly the exam alone is not enough. Training programmes have to be improved and harmonised throughout Europe. The EBIR exam and the IR curriculum, which the exam is based on, are both drivers to synchronise training programmes across Europe.

Uberoi: These things take time to bed down. It is a juggernaut. There are a lot of differences in culture, in the education programmes, in training, from medical students through to senior training examinations, and trying to bring that all together over time will happen, but it's a slow, iterative process. It comes back to making the exam much more professional and internationally recognised. It's a chicken and egg situation: the more credible the exam, the more people that want to do it, the more importance it gains. And, similarly, those that then have the EBIR also gain credibility. It's a sort of symbiotic process, where one leads to the other, and then they perpetuate. But it has to start somewhere, and I think these recent changes make the exam better.



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"You put a lot of work into this... but the rewards are being part of the CIRSE community"



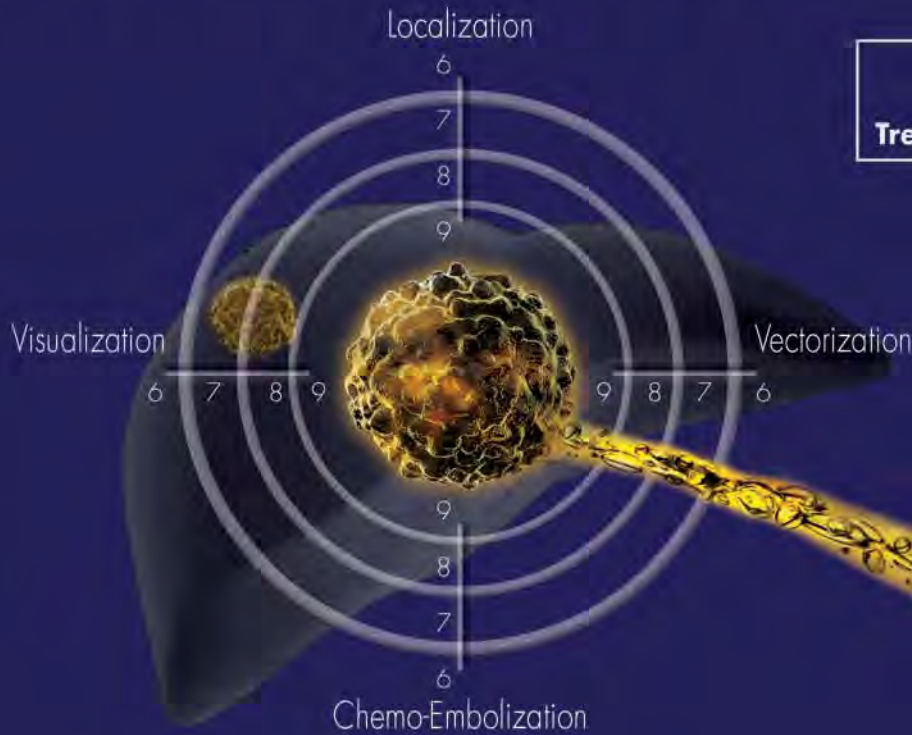
Raman Uberoi (Deputy Chairperson) and Otto van Delden (Chairperson)



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EUROPEAN TRAINEE FORUM

The European Trainee Forum (ETF), CIRSE's newest education and training initiative, will hold its first official activities at the annual meeting in Barcelona!

The European Trainee Forum Kicks Off at CIRSE 2016

Helen Hemblade, CIRSE Office

The European Trainee Forum (ETF), formed by CIRSE in 2015 and led by Chairperson Dr. Gregory Makris, focuses on the development and further growth of the new generation of IR trainees across Europe. The main objective of this forum is to bring the trainees closer together at the early stages of their careers and create a dynamic community that will share the same values and aspirations. Establishing this network early on is important for improving the quality of IR training in Europe, raising public awareness with regard to the subspecialty and, of course, creating opportunities for collaboration with other European societies and associations.

While the subspecialty grows at an encouraging rate, the pathway for young interventional radiologists still has much room for improvement. It is therefore important to confront current education for the subspecialty to keep striving for a better-structured, more homogenous training as well as to remain competitive as a subspecialty and contribute to exceptional patient care. The Forum aims to provide a solid support network for interventionalists at the start of their career while continuing to support those in training. Furthermore, the ETF Subcommittee functions on a highly inclusive level, encouraging input from all those interested in interventional radiology training. Current members of the Forum come from all over Europe, representing IR societies

from the UK, Croatia, Turkey, the Czech Republic, Switzerland, Denmark, Russia, Poland, Italy, Spain and Portugal.

The Subcommittee had its first official meeting in Dublin during ECIO 2016 and plans to regularly meet at CIRSE congresses.

ETF activities planned for CIRSE 2016

- European Trainee Forum meeting
- IR Trainee session: building an IR career
- Special ETF lounge
- Other networking activities

Be inspired

As part of CIRSE's initiatives for young interventionalists, the CIRSE Student Programme will again be an important feature of the CIRSE Annual Meeting. Since 2010, undergraduate European medical students have been invited to attend CIRSE congresses free of charge. Aside from the meetings being a fantastic opportunity to engage with experts from all over the world, the students get an opportunity to discover the broad range of clinical issues addressed by IR through unique hands-on workshops, special sessions and fundamental courses. Furthermore, a published curriculum on IR practices is given to students in order to provide them with a clear overview of the subspecialty.



European Trainee Forum meeting at ECIO 2016

S O C I E T Y

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Establishing this network is essential to improve the quality of IR training in Europe, raise public awareness and create opportunities for collaboration

COROLLARY STUDY

A new study examining the use of renal artery stents is calling for co-investigators and enrolling centres to join.

COROLLARY Study Currently Recruiting

One of the aims of CIRSE is to collaborate on research that is relevant to the society. With this goal in mind, we would like to inform our members of an opportunity to participate in research being conducted by Dr. Tim Murphy, Principal Investigator of the COROLLARY study in the USA.

Since 2009, two large multicentre, randomised clinical trials, CORAL and ASTRAL, have both reported negative results for renal artery stenting. After exploratory analyses of the CORAL study data revealed interesting relationships between

a baseline variable and treatment outcomes, the question of whether patients with renal artery stenosis should be treated with renal artery stents arose. The COROLLARY study seeks to find an answer to this.

If you are interested in getting involved, the study is currently recruiting co-investigators and enrolling centres to assist in their efforts to collect a robust data set on this treatment.

To learn more or to register to become a co-investigator, visit www.corollarystudy.org



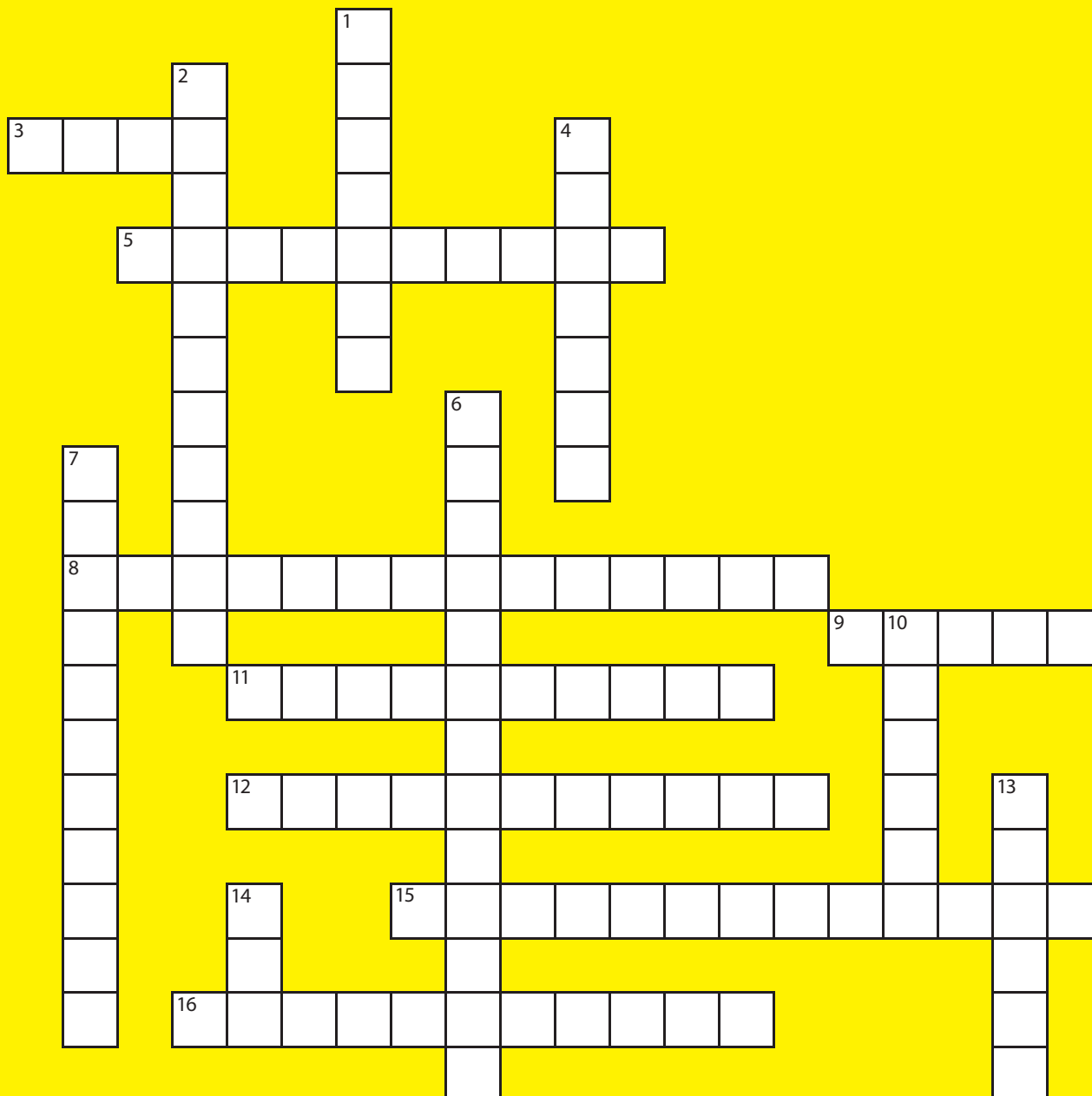
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Crossword Puzzle

Helen Hemblade, CIRSE Office

Horizontal

3. Abbr: 13k member strong (4)
5. Narrowing, again and again (10)
8. Open up (14)
9. CIRSE amici (5)
11. Acute ischaemia (10)
12. Waves wash stones away (11)
15. A radiation protection principle for everybody (13)
16. Anagram: hearty comet (11)

Vertical

1. Abbr: spotless stroke data (2,5)
2. Much loved IR pioneer (5,6)
4. Sooty graft (7)
6. Anagram: belonged in sun (6,7)
7. EU's biggest research programme (7,4)
10. Touch down here in September (2,4)
13. Named by Ernest Besnier in 1879 (6)
14. Abbr: a common cause of obstruction in the veins (3)

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- NEW** cover design
- NEW** monthly issues
- NEW** and improved manuscript management system
- NEW** simplified guidelines for authors
- NEW** awards and competitions during CIRSE 2016
- NEW** impact factor – 2.144

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CVIR

CardioVascular and Interventional Radiology

New packages and presentations are regularly being added to ESIRonline, further developing its position as an integral collection of IR knowledge.

ESIRonline: New Packages and Online Videos

As IR continues to grow as a subspecialty, ESIRonline provides a learning space for medical students and physicians alike to expand their knowledge of new procedures and recent research. This educational platform allows webcasts and presentations to be uploaded from all of CIRSE's meetings and many other IR conferences around the world.

One particularly valuable aspect of this platform is the compilation of packages which cover essential information on selected topics. Each package includes presentations from a diverse range of speakers often across a variety of events. This year, six new packages have already been compiled:

- Colorectal liver metastases
- Oncologic interventions: bone
- Oncologic interventions: lung
- Embolisation of peripheral and pulmonary AVMs: an update
- SIRT for HCC and liver metastases: an update
- Prostate embolisation

These packages not only keep members updated on a wide variety of IR treatments and techniques, but also assist those interested in studying to pass the EBIR exam. The database contains more than 9,000 presentations and is regularly updated to encompass the best IR learning materials.

A further project of CIRSE has also been to delve into subjects of specific interest with videos interviewing expert physicians in that field. This year at the European Conference on Interventional Oncology, three videos interviewed prominent interventionalists on both bone interventions and lung interventions, as well as the treatment of colorectal liver metastases. These and many other videos can be viewed on our CIRSE Society YouTube channel: www.youtube.com/CIRSEsociety

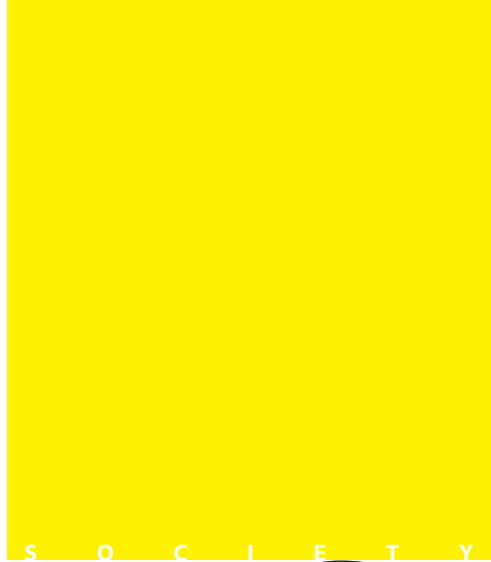


left:
Dr. Julien Garnon, "Bone cancer interventions" video



right:
Dr. Alice Gillams, "Ablation of lung cancers" video

To explore packages, events and webcasts, visit www.esir.org



Over 9,000 presentations are available to view online at www.esir.org

The Industry News section aims to keep readers abreast of relevant launches, approvals, mergers and acquisitions within the IR industry.

Abbott to Acquire St. Jude Medical

Abbott and St. Jude Medical, Inc. announced a definitive agreement for Abbott to acquire St. Jude Medical. The combined company expects to deliver a steady stream of new medical device products across cardiovascular, diabetes, vision and neuromodulation patient care.

St. Jude Medical's positions in heart failure devices, atrial fibrillation and cardiac rhythm management complement Abbott's positions in coronary intervention and transcatheter mitral repair. The combined pipelines are expected to bring new medical device products to key markets this year, including St. Jude's Proclaim™ Elite recharge-free Spinal Cord Stimulation System and Prodigy™ Chronic Pain System, which are used for treating chronic pain and are MRI safe, upgradeable, and feature its proprietary Burst

technology, and Abbott's Absorb™, the world's first bioresorbable coronary stent.

The transaction, which has been approved by the boards of directors of St. Jude Medical and Abbott, is subject to the approval of St. Jude Medical shareholders and the satisfaction of customary closing conditions, including specified regulatory approvals. The transaction is expected to close in the fourth quarter of 2016.

www.abbott.com



First implant completed in thoraco-abdominal aortic aneurysm clinical study

The first US implant of the Gore Excluder thoracoabdominal branch endoprosthesis took place during a clinical study of the treatment of aortic aneurysms involving the visceral branch vessels. Gustavo Oderich, professor of Surgery, Department of Vascular and Endovascular Surgery, Mayo Clinic, Rochester, USA, performed the procedure as part of an initial feasibility study. The study has FDA permission to enrol up to 10 patients, and will assess the safety of the use of this device for such procedures. This study follows an ongoing phase 1 clinical study which began in Brazil in 2014.

This new device is being investigated in order to eventually offer surgeons a complete, off-the-shelf endovascular product for aortic aneurysms which encroach on, or involve, the visceral part of the aorta.

Deployed via an intuitive staged delivery system, the device is designed to provide vascular surgeons the ability to reposition the partially deployed graft to aid in selective catheterisation of the branches. With four pre-cannulated portals for placement of stent-graft branches for the visceral branch vessels, the device is intended to enable a faster implantation procedure.

www.gore.com



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A new AAA endoprosthesis device has been implanted as part of a feasibility study

Barcelona, Spain
September 10-14
CIRSE 2016

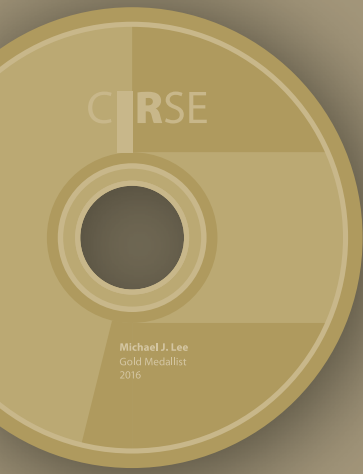
This September, Barcelona will once again host the largest IR congress of the year, and with all that's in store, you won't want to miss it!

- 16 Opening and Awards Ceremony**
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- 18 Super Tuesday**
- 19 Satellite Symposia**
- 23 Charity Sports Event**
- 24 IDEAS**
- 26 CIRSE App**
- 27 Transportation in Barcelona**
- 28 Radiation Protection Pavilion**
- 29 CIRSE 2016 Farewell Party**

As we get closer to CIRSE 2016, this guide is intended to feature the essential information on this year's Annual Meeting.

More information can be found on:

- www.cirse.org/cirse2016
- www.facebook.com/CIRSEsociety
- CIRSE 2016 App
- RSS feeds



Michael J. Lee



Peter A. Gaines



Lizbeth M. Kenny



Manuel Maynar



CIRSE 2016 Opening and Awards Ceremony

Join us at the Opening and Award Ceremony which will take place from 14:30-16:00 on Saturday, September 10 in Auditorium 1.

Kick off
CIRSE 2016 with
a celebration of
distinction in IR!

To open proceedings, a welcome address will be given by CIRSE President Elias Brountzos, Local Host Committee Chairpersons Marta Burrell and José Urbano, and Scientific Programme Committee Chairperson Christoph Binkert, after which, six awards will be presented, including the Award of Excellence and Innovation in IR (kindly sponsored by the R.W. Guenther Foundation), the CVIR Editor's Medal, three Distinguished Fellow awards and the CIRSE Gold Medal.

CIRSE Gold Medal

This year's Gold Medallist is Michael J. Lee. Currently a Fellow of the Royal College of Physicians in Ireland, Prof. Lee is one of the original founders of the Irish Society of Interventional Radiology and served as their first president. He has been influential in Ireland through his introduction of an eight-hour IR teaching curriculum to the Royal College of Surgeons in Ireland (RCSI), which is now taught to medical students to inform them about IR at an early stage in their careers. He is also currently writing a book on IR for medical students. He has published almost 200 peer-reviewed publications and 80 chapters and reviews and has many research interests. Prof. Lee is a past president of CIRSE, having served in that position from 2011-2013, and is an Honorary Fellow of the Chinese Society of Interventional Radiology (CSIR), the Interventional Radiology Society of Australasia (IRSA), the Hellenic Society of IR and the Czech Society of IR. His laudation will be given by Dr. Robert A. Morgan.

Distinguished Fellows

The Distinguished Fellows for this year are Peter A. Gaines, Lizbeth M. Kenny and Manuel Maynar.

Prof. Gaines spent 24 years working at the Sheffield Hospital, during which he developed the Sheffield Vascular Institute as the first autonomous combined surgical and IR unit. He has contributed 125 peer-reviewed original scientific publications, and his textbook *Vascular and Endovascular Surgery* is in its fourth edition. Prof. Gaines has worked as a device entrepreneur for the last ten years and developed the Emboshield carotid protection system with MedNova. He is now Chief Medical Officer with Veryan and Novate, developing novel stent and IVC filter devices. Prof. Anthony F. Watkinson will give his laudation.

Prof. Kenny is a Senior Radiation Oncologist at the Royal Brisbane and Women's Hospital with a strong commitment to improving cancer services in Queensland. She serves as Vice-Chair of the Asia/Oceania Regional Committee for the RSNA, and as a member of CIRSE has assisted in the development of a quality assurance framework. She also served as the youngest and longest President in the history of the Royal Australian and New Zealand College of Radiologists. Prof. Kenny's laudation will be given by Prof. Andy Adam.

Prof. Maynar is one of the most experienced specialists in Spain, where he has collaborated in multidisciplinary teams to introduce new techniques, including TIPS and fenestrated aortic grafting. He is an active contributor in the continuing education of IRs and directs training programmes on endovascular, endoluminal and interventional radiology for specialists from all around the world. He has sought to remain innovative in the medical field, with the patient's needs always foremost. Prof. José I. Bilbao will give Prof. Maynar's laudation.

The Award of Excellence and Innovation in IR



We Have a Winner!

The Award of Excellence and Innovation in IR is sponsored by the R.W. Guenther Foundation, and seeks to reward and encourage exceptional research in the field of interventional radiology. The award is presented during the Opening and Awards Ceremony of the CIRSE Annual Meeting, bestowing recognition and a €5,000 prize to the best applicant.

This year, the award will go to Prof. Francisco Carnevale for his pioneering research on prostate artery embolisation (PAE) as an alternative treatment for symptomatic patients due to enlarged benign prostate hyperplasia.

The Winner

This research was performed primarily by Prof. Francisco Carnevale from the University of São Paulo Faculty of Medicine Clinics Hospital in Brazil. Prof. Carnevale first performed the PAE procedure there in June of 2008 and has since conducted several studies on this therapy which have been published in *CardioVascular and Interventional Radiology (CVIR)* and the *Journal of Vascular and Interventional Radiology (JVIR)*. These papers describe his innovative technique, and many other teams have been inspired to begin their own studies based on his well-established work.

The Innovation

Prostate artery embolisation uses microspheres to embolise the prostatic artery, blocking the blood supply to the prostate in order to improve lower urinary tract symptoms caused by benign prostatic hyperplasia. This procedure has been gaining recognition and popularity around the world since it was first performed, with patient benefits already shown in short- and mid-term results with long-term results now beginning to be published; however, more research and follow-up studies are needed to determine the most appropriate indications for this procedure and to achieve the best results.

Prof. Carnevale has been fundamental in providing thorough research and training on this new therapy through workshops, presentations and scientific papers. His published studies have analysed the benefits of the PAE procedure as well as the variations between transurethral resection of the prostate, original PAE and his self-designed, PERFECTED PAE technique. He has significantly facilitated the establishment of PAE to help patients who are unsuitable for surgery to experience relief from the discomfort caused by symptoms of benign prostatic hyperplasia.

The prize will be presented to Prof. Carnevale during the Opening and Awards Ceremony of the CIRSE Annual Meeting on September 10, 2016. There will also be a session on prostate embolisation on Saturday morning from 08:30-09:30, where Prof. Carnevale will discuss anatomical variants. We extend our hearty congratulations to him!

Francisco Cesar Carnevale

Prof. Francisco Carnevale received his degree in medicine from the University of Mogi das Cruzes in São Paulo in 1990, after which he began his medical residency. His many research and clinical fellowships brought him from Charleston, Chicago, Pennsylvania, Houston and San Diego in the U.S. to Las Palmas and San Sebastian in Spain.

In 1999, he earned his PhD in Interventional Radiology from the Faculty of Medicine of the University of São Paulo. He is the editor and author of the book *Interventional Radiology and Endovascular Surgery*, has published over 50 peer-reviewed publications and has presented over 100 lectures all over the world.

From 2009-2010, he served as the President of the Brazilian Society of Interventional Radiology and Endovascular Surgery, and he is currently the Chief of Interventional Radiology at his institution. For the last three years, Prof. Carnevale has also served as a co-organiser of the Prostate Artery Embolisation course for the European School of Interventional Radiology, educating physicians on the PAE treatment.



CIRSE Opening and Awards Ceremony

**Francisco C. Carnevale will be awarded on
Saturday, September 10
14:30-16:00, Auditorium 1**

With CIRSE 2016 just around the corner, the Super Tuesday session is just one of the highlights you can look forward to, according to Programme Chairperson, Christoph Binkert.

Get Ready for Super Tuesday

Michelle Weiss, CIRSE Office



Super Tuesday is geared toward everyone and is not to be missed!

As September draws closer, we hope you are getting prepared for another thrilling CIRSE congress. To keep that enthusiasm up, we wanted to share some of the new sessions you may want to take note of in your programme!

One of the new features in this year's schedule is what Programme Chairperson, Christoph Binkert, has dubbed the "Super Tuesday" session. Similar in format to a Free Paper Session, this special session aims to emphasise abstracts that "have the most impact on IR or that should be known to most IRs," says Binkert, "The goal of the Super Tuesday session is to make real science more popular and increase the importance of the scientific work in IR."

With a broad range of topics included in the session, one of the papers which will be presented covers the 10-year results of the EMMY Trial, a randomised trial comparing the clinical outcome between uterine artery embolisation and hysterectomy. Regarding this abstract's inclusion in the Super Tuesday session, Binkert noted: "This is one of these very important trials because it's randomised and compares an important procedure in IR over a long time. It's often a problem that we have very good short-term success, but the question is: will it last? A 10-year follow-up is an outstanding achievement to see that success is sustained in the long run. This is a perfect example of an ideal paper for the Super Tuesday session."

This session is geared toward everyone, IRs young and old, and is not to be missed! It will take place on **Tuesday, September 13, from 16:15-17:15.**

New Session Formats

Two other new formats to look forward to at CIRSE 2016 are the Expert Round Tables and Expert Case Discussions. These session types will be spread throughout the programme and have been established with the belief in mind that "it is essential to have interdisciplinary interaction to discuss the strengths and weaknesses of IR procedures and patient care." Binkert anticipates that these new interdisciplinary discussion formats will stimulate interesting conversations and different viewpoints.

This year, the poster presentations have also increased to offer a much wider poster selection. Binkert says that by selecting more poster presentations, the hope is that new, interesting research, like preliminary studies and feasibility studies, will reach a broader audience.

With many positive changes and a variety of tracks and session formats to choose from, CIRSE 2016 promises to have something enriching for every participant. If this will be your first time attending CIRSE, as the Programme Chairperson puts it, "Look at the programme carefully. It is very well-structured. Pick different types of sessions in order to get the full benefit of the CIRSE meeting."

Check out the Preliminary Programme and plan your sessions for CIRSE 2016 on www.cirse.org/cirse2016

Organised by various medical companies, Satellite Symposia offer cutting-edge information on IR equipment and techniques.

Satellite Symposia



Saturday, September 10, 2016

- 13:00-14:00, Room 117
SY 401 Abbott Vascular
New evidence for Supera in a broad spectrum of peripheral indications
- 13:00-14:00, Room 112
SY 402 Philips (in partnership with BTG)
The next generation of image-guided therapy in interventional oncology: guiding tomorrow's innovations today
- 13:00-14:00, Auditorium 2
SY 403 Surefire Medical
New frontiers in transarterial therapy: tumour penetration and response
- 16:15-16:55, Auditorium 2
SY 609 Medtronic
New embolisation materials and treatment techniques for congenital heart disease and pelvic congestion syndrome
- 17:30-17:50, Room 113
SY 709 TVA Medical
Creating the endovascular arteriovenous fistula (endoAVF) with the everlinQ™ endoAVF system

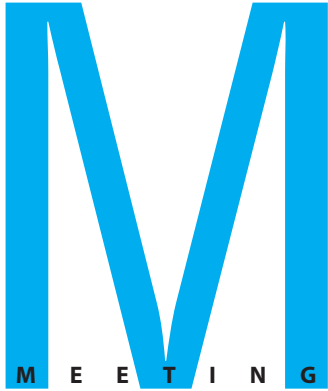
Sunday, September 11, 2016

- 08:00-08:20, Auditorium 2
SY 801 GORE & Associates
Fit the anatomy rather than alter it!
- 08:00-08:20, Room 134
SY 802 Medtronic
Advances in procedural sedation – preventing respiratory compromise
- 11:30-12:30, Auditorium 2
SY 1103 Biotronik
BIOTRONIK combination therapy: stent, drug-coated balloon or both?
- 11:30-12:30, Auditorium 1
SY 1104 BTG
See more. Reach further. Treat smarter. Illuminating the future of TACE
- 11:30-12:30, Room 117
SY 1105 Penumbra
Expanding the horizon: Penumbra's embolisation and thrombectomy technology
- 13:00-14:00, Auditorium 1
SY 1201 Boston Scientific
The revolution of drug-eluting technology in peripheral arterial disease: from clinical evidence to health economic benefit
- 13:00-14:00, Auditorium 2
SY 1202 Medtronic
From bench to bedside: technology, evidence and treatment algorithms in peripheral arterial disease

Stop into
symposiums
offered throughout
the day

Satellite Symposia will take place throughout the congress, discussing a range of new technologies.

Satellite Symposia



Monday, September 12, 2016

Attend Satellite Symposia to gather data on a variety of new devices

13:00-14:00, Room 117
SY 1203 Terumo Europe
Generating clinical evidence in interventional oncology

14:30-15:30, Room 117
SY 1303 Medtronic
Thermosphere ablation: the easy way to become a superhero

14:30-15:30, Auditorium 2
SY 1304 Straub Medical AG
Mechanical debulking in arterial and venous occlusions – an important step in the optimisation of endovascular therapy

16:15-16:35, Room 114
SY 1404 Toshiba Medical Systems Europe
Revolutionise intervention with Infinix-4D-CT

16:15-16:45, Room 112
SY 1409 C.R. Bard
BARD innovations for tomorrow – arterial & venous endovascular interventions

16:15-17:00, Room 113
SY 1410 GE Healthcare
New applications in planning and guidance of interventions with cone-beam CT

07:40-08:20, Room 114
SY 1601 GORE & Associates
Why, when and what patients will benefit from TIPS? Introducing the new GORE TIPS Set and TIPS innovations

08:00-08:20, Auditorium 2
SY 1602 Bolton Medical
Proximal scallops in endovascular repair of thoracic and abdominal aorta

08:00-08:20, Room 113
SY 1603 PharmaCept
DSM-TACE for a better flexibility in liver cancer treatment

11:30-12:30, Auditorium 1
SY 1902 Cook Medical
Drug elution in the SFA: leave the right thing behind. Debating evidence to provide the answers

11:30-12:30, Room 117
SY 1903 Sirtex
Building for the future with SIR-Spheres® Y-90 resin microspheres

11:30-12:30, Auditorium 2
SY 1904 Terumo Europe
Pushing boundaries in the treatment of PAD

Organised by various medical companies, Satellite Symposia offer cutting-edge information on IR equipment and techniques.

Satellite Symposia



Tuesday, September 13, 2016

13:00-14:00, Auditorium 2
SY 2001 C.R. Bard
Lutonix® Drug Coated Balloon
evidence in SFA, BTK and AV

13:00-14:00, Auditorium 1
SY 2002 Cordis, a Cardinal Health Company
New technologies to monitor your
vascular patient

13:00-14:00, Room 117
SY 2003 Guerbet
Conventional TACE: unique & undis-
putable standard-of-care for HCC
stage B patients

14:30-15:30, Room 117
SY 2104 Boston Scientific
Clinical insights and practical solutions
for intervention in HCC and mCRC with
TANDEM™ small diameter uniform
beads

14:30-15:30, Room 114
SY 2105 Shockwave Medical, Inc.
Treating calcified peripheral vascular
arteries with the Shockwave Medical
Lithoplasty® System

16:15-16:35, Room 114
SY 2208 Veryan Medical
BioMimics 3D: a new generation
swirling flow fempop stent

13:00-14:00, Room 117
SY 2801 BTG
European experiences with the EKOS™
system for arterial occlusion, deep vein
thrombosis and pulmonary embolism
treatment: share the best practice

13:00-14:00, Room 115
SY 2802 Medtronic
Acute ischaemic stroke treatment:
from clinical evidence to practice

13:00-14:00, Auditorium 2
SY 2803 Siemens Healthineers
High end imaging solutions for
challenges in interventional work

14:30-15:30, Room 117
SY 2904 Merit Medical
Reach the unreachable with
SwiftNINJA® Steerable Microcatheter!

Sit in for one of
the many lunch
symposiums!

The logo for the European Board of Interventional Radiology (EBIR) features the acronym 'EBIR' in a bold, sans-serif font. It is surrounded by a circular arrangement of stars, with larger stars at the top and bottom and smaller ones in between, mimicking the European Union flag.

European Board of Interventional Radiology

**All eligible CIRSE members are warmly invited
to take the exam!**

**Register now for the EBIR examinations
to be held in Europe in 2017:**

VIENNA, March 1-2

COPENHAGEN, September 15-16

**Join a global community of over 400
interventional radiologists!**

CERTIFY YOUR EXPERTISE!

For more information, please visit www.cirse.org/ebir

European Board of Interventional Radiology

c/o CIRSE

Neutorgasse 9, 1010 Vienna, Austria

ebir@cirse.org

www.cirse.org/ebir

The logo for the European Society of Interventional Radiology (CIRSE) consists of the letters 'CIRSE' in a bold, sans-serif font. The letter 'I' is replaced by a vertical bar with a small square at its base, resembling a stylized 'I' or a medical symbol.



Run for the Health of it!

Join us for the CIRSE 2016 Charity Sports Event and help support the work of Médecins Sans Frontières.



Once again, CIRSE is offering you a fun way of supporting charity and getting to know your colleagues better – join us for the annual Charity Sports Event! The opening night of the congress will feature a 3-km fun run and a fiercely contested football cup: can anyone wrest the trophy from last year's winners, Italy?

Whether you compete in the race, go head to head in the football cup or cheer from the stands, your involvement matters!

The last few years of the Charity Sports Event have been extremely popular and resulted in a positive and fun experience for everyone, allowing participants the chance to show their support for an important charity group.

This year's event will support *Ärzte ohne Grenzen*, part of the Médecins Sans Frontières, an international, independent, medical humanitarian organisation that delivers emergency aid to

people affected by armed conflict, epidemics, natural disasters and exclusion from healthcare. For more information, please visit www.msf.org

The evening will also include a delicious buffet, which will be provided from 19:45 until the end of the football cup.



You can already register for this event at www.cirse.org/charityevent



To sign up, complete the registration form on www.cirse.org/charityevent and send it to travel@cirse.org.

CIRSE supports compliance with ethical standards. Therefore, CIRSE emphasises that the present invitation is directed to participants of CIRSE 2016, and recommends that participants who want to take part in the Charity Sports Event bear any and all costs in this context (including donations) themselves.

Kindly note that participation in the Charity Sports Event is NOT included in the CIRSE 2016 registration fee!

IDEAS

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Interdisciplinary
Endovascular
Aortic Symposium

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The Interdisciplinary Endovascular Aortic Symposium Returns!

As we gear up for the CIRSE 2016 annual congress, we are excited to be presenting another IDEAS meeting alongside it, and this year's Aortic Symposium promises to be even better than last year!

This year offers many new features, such as the IDEAS Training Village

This year's meeting will introduce the IDEAS Training Village, an interactive, open forum where industry partners involved in the treatment of the thoracic and abdominal aorta can showcase their devices in order to provide physicians with hands-on training across a range of products. This new feature will open on Saturday, September 10 with a kick-off event hosted by IDEAS Programme Chairperson Fabrizio Fanelli from 16:15-17:45. The Training Village will run through Tuesday, September 13.

Taking place this year will also be a special chimney technique workshop. Coordinated by vascular surgeon Konstantinos Donas and head of vascular nurses Francisco Azevedo, this workshop will take participants through all aspects of performing the chimney technique, including pre-operative planning, necessary materials and logistics, the procedure, post-operative management and the current status in the literature.

Don't miss out!

With a variety of lectures, workshops, satellite symposia and a special Hot Topic Symposium on aortic emergencies, the IDEAS programme offers three days of education on key topics, including endoleak prevention and management, emergency aortic treatment, arch disease management, new generation devices for EVAR, and new techniques for thoraco-abdominal aneurysms, such as inner branch, FEVAR, multilayer and sandwich.

To find out more on how the IDEAS 2015 meeting went and why this interdisciplinary symposium has come to the forefront at an ideal time, check out our video interview with last year's faculty members Frank Veith, Jim Reekers, Eric Verhoeven and Mike Dake on the CIRSE Society's YouTube channel!



For more information, please visit www.aorticideas.org

Key to session types opposite:

SY = Satellite Symposium
LS = Lecture Session
ERT = Expert Round Table
HTS = Hot Topic Symposium
WS = Workshop
ECD = Expert Case Discussion
AC = Aortic Complications



M

M E E T I N G

Sunday, September 11

- 08:00-08:20
SY 801 GORE & Associates: Fit the anatomy rather than alter it!
- 08:30-09:30
LS 905 Thoracic dissections
- 10:00-11:00
ERT 1005 Thoracic aorta – uncomplicated acute type B dissections
- 15:00-16:00
HTS 1302 Aortic emergencies
- 16:15-17:15
LS 1406 Arch and ascending thoracic aorta
- 17:30-18:30
LS 1505 Endoleaks / complications

Monday, September 12

- 08:00-08:20
SY 1602 Bolton Medical: Proximal scallops in endovascular repair of thoracic and abdominal aorta
- 08:30-09:30
LS 1705 Abdominal aorta 1
- 10:00-11:00
ERT 1805 Abdominal aorta – challenging proximal neck
- 14:30-15:30
ECD 2103 Thoracic cases
- 16:15-17:15
LS 2205 Thoraco-abdominal aortic disease
- 17:30-18:30
WS 2308 Thoracic aorta

Tuesday, September 13

- 08:30-09:30
LS 2505 Abdominal aorta 2
- 10:00-11:00
ECD 2605 Abdominal cases
- 11:30-12:30
AC 2705 A bad day in the angio-suite: case-based discussion
- 14:30-15:30
LS 2903 Tips and tricks
- 16:15-17:15
WS 3006 Abdominal aneurysm

Join us in Barcelona
for three days of
exciting discussion
and debate

Available from late August 2016:

The CIRSE 2016 event in the CIRSE Society app



Get the best toolkit for the
2016 Annual Meeting in Barcelona:

- browse the programme
- build your personal schedule
- complete the paperless session evaluation
- participate in e-voting polls
- send questions to the moderators
- find your way around using the interactive floor plans
- browse the exhibition by product category
- and much more...



Available for iOS and Android



Bustling through Barcelona



Arriving in a new city can be a challenge, so CIRSE is committed to ensuring that meeting participants are provided with helpful travel information before they get there. To make sure that everyone can have a stress-free journey to the congress centre, all fully registered CIRSE 2016 delegates will receive a complimentary 5-day Hola BCN! travel card that offers unlimited use on all metro, bus, train and tram services throughout the city, including the service between the airport and the city centre.

Arriving

From El Prat airport, the metro line L9 Sud runs to the city centre (Fira Gran Via) from both terminals. The metro stop at Terminal 1 is inside the building and Terminal 2 is outside, next to the train station.

From Terminal 2, the Rodalies train line R2 will take you into the city central stations (Barcelona-Sants, Passeig de Gracia and El Clot) in 20-30 minutes. From any of these stations, you can change to the metro.

A taxi from the airport into the city centre costs about 35 EUR and will take roughly 20-35 minutes.

Public Transportation

Barcelona has a well-connected network of transportation which will make it easy to travel between the conference centre, your accommodation and downtown restaurants and amenities.

If you are looking to purchase additional Hola BCN! travel cards, they can be pre-ordered for a 10% discount and delivered prior to the congress. There are two-, three-, four- and five-day cards priced at 14, 20.50, 26.50 and 32 EUR.

To order Hola BCN! travel cards, go to www.tmb.cat/en/barcelona-travel-card

For more information or to plan your route, visit www.tmb.cat/en/home

Getting to the Congress Centre

The Centre de Convencions Internacional de Barcelona (CCIB) is easily accessible by a range of public transport. The El Maresme/Fòrum metro stop is only a 5-minute walk from the congress centre, and can be reached by both the metro line 4 and the tram line 4. You can also get to the CCIB by bus lines 7 and H16, exiting at the Fòrum stop.

Taxis

Licensed taxis are black with yellow doors. All are metred, and cab drivers are required to provide you with a receipt, upon request. Taxis can be booked online through Barnataxi (www.barnataxi.com) or Ràdio Taxi Barcelona (www.barcelonataxiradio.com), or via a number of apps, such as Hailo or Ey! TAXI.

More detailed travel information can be found by visiting www.cirse.org/barcelona

With the Hola BCN!
travel card, moving
through the city
will be a breeze



M

E E I N

Ready for the Risk: Radiation Protection Pavilion 2016

Helen Hemblade, CIRSE Office

Live mini-talks will cover topics such as radiation protection for pregnant staff, dosimetry in paediatric IR and robotic catheter assistance

Since the creation of the multidisciplinary Radiation Protection Subcommittee in 2012, much has been done to raise awareness of the risks of occupational radiation for IRs as well as patients. At the past two CIRSE meetings, there has been a Radiation Protection Pavilion featuring live talks, eye-checks and a prize draw. The pavilions were a great success and contributed to increasing delegates' awareness of the health risks related to occupational exposure to radiation.

CIRSE collaborates with the European Society of Radiology on its EuroSafe Campaign, which aims to create a network of imaging departments committed to improving radiation safety. For the past two years, CIRSE has presented a poster at the annual European Congress of Radiology and EuroSafe will once again have a booth set up at the Radiation Protection Pavilion during CIRSE 2016.

What is the risk?

Radiation protection, in particular the risk of cataracts, is a genuine health concern for all those working in radiology. At the RPP in 2015, lens opacities were detected in 13% of the 73 eye-checks that took place and even young people were found to have cataracts. Furthermore, scientific findings have confirmed that high occupational exposure to ionising radiation increases the risk of developing lens opacities. It is therefore important to thoroughly discuss and analyse protective equipment, review dose settings and encourage new research. The live mini-talks at CIRSE 2016 will cover a range of topics such as training in radiation protection for pregnant staff, dosimetry in paediatric inter-

ventional radiology and the use of robotic catheter assistance as well as a review on current research by Professor Vorwerk.

RPP 2016

- Radiation safety simulator
- Live mini-talks
- Eye-checks from an ophthalmologist
- Best practice guides and informative material to take away

The Radiation Protection Pavilion is kindly supported by:



We look forward to seeing you at the 2016 Radiation Protection Pavilion in Barcelona!

For more information, please visit: www.cirse.org/rpp

Cardiovascular and Interventional Radiological Society of Europe

Tuesday, September 13
Doors open at 19:30

Dinner & Farewell Party

CIRSE 2016

Join us at Can Travi Nou restaurant, an authentic Catalan farmhouse, for a three-course gala dinner followed by a party in its beautiful gardens!

Dinner tickets (cocktail reception, dinner, complimentary drinks, entertainment): EUR 75 each

Party only (doors open 22:00, includes free drinks and entertainment): EUR 25 each

Reserve online:
www.cirse.org/CIRSEparty

CIRSE supports compliance with ethical standards. Therefore, CIRSE emphasises that the present offer (made by KUONI Congress Destination Management) is directed to participants of CIRSE 2016 and recommends that the participants who want to accept the present offer shall bear any and all costs in this context themselves.

Kindly note that entrance to the CIRSE 2016 Party is NOT included in the CIRSE 2016 registration fee!

Three ESIR courses coming up at the end of the year will offer experienced IRs a chance to improve their skills for specific procedures.

ESIR 2016 Clinical Procedure Training Courses

F O U N D A T I O N

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If you are looking for an educational course this autumn, sign up for one of our CPT courses!

As autumn and winter inch closer, the European School of Interventional Radiology has planned a select number of Clinical Procedure Training courses to keep your innovative mind active during the chillier seasons.

These courses are designed to provide a collaborative environment for IRs who are already familiar with the topic's theory and literature. Each course will include case discussions, practical, hands-on exercises, and "tips and tricks" from distinguished faculty on performing the procedure and preferred devices.



Prostate Embolisation Paris/FR, November 29-30

Discover more about PAE by discussing aspects of benign prostatic hyperplasia, patient selection and the role of urodynamic testing. Live cases will take place along with a step-by-step explanation of the procedure.



Critical Limb Ischaemia Amsterdam/NL, October 21-22

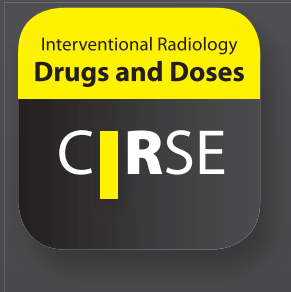
Master a variety of endovascular approaches to treat CLI. Emphasis will be placed on modern procedural training and practical exercises. Highlights include a group discussion on working in a multidisciplinary team and a guided visit of the hospital.



Mechanical Thrombectomy in Acute Ischaemic Stroke The Hague/NL, December 9-10

Expand your knowledge of stroke therapy strategies, including available options, therapeutic windows, techniques and managing complications. The course will include extensive hands-on workshops and device presentations.

For more information, visit www.cirse.org/esir2016



IR Drugs and Doses – crucial pharmacology details at your fingertips!

CIRSE's newest app contains essential information on pharmacological agents used by interventional radiologists in everyday clinical practice.

The app:

- Covers over 60 commonly encountered agents
- Information is divided into eight main categories: cardiovascular, contrast, embolic/thrombotic agents, GI-hepatic-pancreatic, haematologic, infection control, oncology and pain management
- Entries outline the agent's pharmacological properties, indications and contraindications, its proper administration, and, where applicable, available reversal agents
- Available for iPhone, iPad and Android



Prepared by experienced CIRSE members, IR Drugs and Doses serves as a handy guide for medical practitioners, trainees and students alike!

This year's ICCIR meeting in Poertschach, Austria brought around 300 IRs together for a collective discussion on managing complications.

International Conference on Complications in IR

Michelle Weiss, CIRSE Office

As IRs, it is vital to be aware of how to avoid or manage procedural complications as they occur. With this ambition in mind, the International Conference on Complications in Interventional Radiology was highly successful again this year in creating a space for doctors of all levels of experience to share cases and discuss options to determine the best future outcomes for patients.

Each session in the programme was packed full of participants, and highlights included the case sessions on embolisation, venous/IVC filters and neurointerventions, as well as the keynote lectures by Otto van Delden, Fabrizio Fanelli and Werner Jaschke.

During the conference, CIRSE sat down with several of the case presenters and faculty members and got their insights on the conference:

CIRSE: What do you think of ICCIR and the format?

Uberoi: It's a great opportunity for learning for everybody: seniors and juniors. You may only have one complication or two complications but when you start to see the same sorts of complications, you start to get a feel for how these things happen and learn about how to avoid them in the future. That's really the purpose and the value of this meeting. Having this spirit of openness is really useful.

Little: This is my first time here at ICCIR. I think that having such a distinguished panel is really useful to get ideas and bounce potential solutions off of. So from that perspective, it's really very interesting, and it's a very unique conference compared to others. Obviously, no one likes to discuss complications, but having all of the senior CIRSE faculty here to get ideas from, for a junior interventionalist such as myself, is very useful.

Van Delden: There's no blaming and shaming at all. You can stand up there and say, "I did this case and I made mistakes here and there," and then just go through improvement and constructive comments.

CIRSE: How important do you find it for IRs to discuss complications?

Leati: I think it's very important. Sometimes you have a surgeon behind you who can help you with some kind of complication, but sometimes you have to solve it by yourself. So knowing in advance what the complication could be and how to treat it is fundamental. That's the importance of this conference.

Little: It can't be underestimated. We are always discussing our successes and our failures. I think that's the only way that we progress. We can benefit our patients by discussing when things go well and trying to emulate that, but, perhaps we learn

"Knowing in advance what the complication could be and how to treat it is fundamental"



Raman Uberoi



Mark Little



Otto M. van Delden



Giovanni Leati

Both senior and junior interventional radiologists benefitted from a wide range of perspectives during the discussion of various cases.



most when things go badly, and ICCIR has highlighted the importance of reflection, appraisal and alteration in practice as we strive to do the best for our patients. One of my senior colleagues once remarked that the best way to learn from a complication is to learn from someone else's mistake. So if you can avoid doing it yourself, but someone else can tell you about it, that has to be preferable!

CIRSE: What do you think the most valuable thing you've learned here has been or the best take-away tip?

Little: I think Jim Reekers' point about when and when not to intervene is very pertinent within a lot of these cases, and I think that comes with experience: knowing sometimes the best intervention is no intervention. But, in addition to that,

talking to others about some of the new novel techniques and how we would change tack and try different devices is very exciting as well.

Uberoi: Pay attention to the imaging before, during and after procedures. Be familiar with the materials you have, know how to use them and in which situations. Sometimes we try to use things that we want to use rather than what's probably best in that situation. One particular system or device isn't suitable for everything, and you need to tailor the treatment to the patients and the particular problem rather than the other way around.

"Having such a distinguished panel is really useful to get ideas"

