

INTERNATIONAL CONGRESS ON
ENDOVASCULAR INTERVENTIONS

iCON 2014

February 9-13, 2014 | The Arizona Biltmore | Phoenix, AZ



**Wednesday,
February 12**



Attendees view the first-ever live case procedure using the VELA™ Proximal Endograft System, transmitted from Arizona Heart Institute.

iCON Attendees View Two Live Case Presentation “Firsts”

iCON attendees viewed two live case “firsts” on Wednesday morning, including the first-ever worldwide broadcast of a case using an Endologix device brand-new to the United States market. The second case was transmitted from Auckland, New Zealand, showing, for the first time at a U.S. conference, a procedure with the Nellix® Endovascular Aneurysm Sealing System (EVAS).

Julio Rodriguez-Lopez, MD, FACS, performed the first-ever live case using the VELA™ Proximal

Endograft System, which Endologix launched in the United States on February 10, 2014.

The VELA Proximal Endograft is specifically designed for the treatment of proximal aortic neck anatomies during an endovascular aneurysm repair (EVAR) procedure using the Endologix AFX® Endovascular AAA System.

Dr. Rodriguez also used the VELA stent to treat a ruptured aneurysm on Tuesday night.

Continued on page 4

THURSDAY'S HIGHLIGHTS

Industry Breakfast Symposium

Exploring the Future
of Interventional Office
Practice (non-CME)
7:00 a.m.

Exhibits Open

7:45 a.m. – 12:15 p.m.

Registration

6:30 a.m. – 11:00 a.m.

Save the Dates:

ISES Regional Meeting:
Mid-Atlantic
Aortic Symposium
Saturday, May 3, 2014
Philadelphia, PA

iCON 2015
February 9-12, 2015
Arizona Biltmore
Phoenix, AZ

iCON Poster Session

Ten posters were selected for presentation at the iCON poster session. Poster authors presented their work to the judges on Wednesday afternoon. The winners were then announced by judges Donald Reid, MD, and Jacques Busquet, MD. (Not pictured: Rodney White, MD)

1st place: Rex Teeslink, MD, T-Med, Inc., “A New Closure Device.”

2nd place: Koen Keirse, MD, Regional Hospital Heilig Hart, Tienen, Belgium, “Mid-Aortic Syndrome.”

3rd place: Ramesh Tripathi, MD, FICS, FRCS, Narayana Institute of Vascular Sciences, “Are Stent Grafts the Solution for In-Stent Restenosis After SFA Stenting?”



ISES president Dr. Donald Reid, left, laughs as Dr. Rex Teeslink, center, is asked by Dr. Jacques Busquet how he will spend his prize money!



Clockwise, from top left – Dr. Eric Dippel presents his poster to the judges; Dr. Marcos Alvarez answers questions during his poster presentation; and second place winner Dr. Koen Keirse, Regional Hospital Heilig Hart, Tienen, Belgium, center, poses with Drs. Reid, left and Busquet.



ISES to Hold Aortic Conference in Philadelphia

The International Society of Endovascular Specialists (ISES) continues to expand its educational offerings with the first ISES Regional Meeting: Mid-Atlantic Aortic Symposium on Saturday, May 3, at the Philadelphia Marriott, Philadelphia, PA.

This one-day, CME-accredited course will be geared towards the medical specialties performing aortic endovascular procedures, including vascular surgeons, cardiologists, cardiac surgeons, interventional radiologists and family care physicians.

"This is an excellent opportunity to bring physicians doing excellent aortic work and procedures together to learn from each other and collaborate," said Grayson Wheatley, III, MD, conference chairman. "We want to cut through the specialty

barriers and provide opportunities to learn and collaborate."

Dr. Wheatley invites healthcare professionals from throughout the region, including Delaware, Maryland, New Jersey and Pennsylvania, to hear presentations on hot topics in aortic interventions, chimney stents and thoracic and aortic stent repair.

"Philadelphia has a long-standing history for providing excellent care to patients with aortic disease," said Dr. Wheatley. "We want to build on this tradition that's already established and help people that are working parallel start to work together. It also provides a forum for speakers to present their excellent work."

Symposium attendees will also have the opportunity to learn more about ISES.

"ISES is an international organization devoted to excellence in endovascular interventions that is not biased towards one specialty or another," said Dr. Wheatley. "ISES could be a great common dominator to facilitate continued dialogue and interaction among attendees."

Dr. Wheatley also sees benefits for industry supporters to connect with area healthcare professionals in a new setting.

"Some of the regional industry representatives may not be familiar with ISES," he said. "It is an opportunity for them to learn more about ISES while attendees can learn about new technologies and products from exhibitors."

To learn more about the meeting, including registration information, please visit www.isesonline.org.



iCON in Action: Exhibitor Reception



Live Cases

Continued from page 1

“It’s very unique for the audience to be able to hear about an acute case and then see the follow-up and result in morning,” said Dr. Diethrich.

Including live case presentations focused on large vessel disease, along with critical limb ischemia (CLI) cases, provides the meeting a balanced focus on both large and small vessel disease.

“It is a unique opportunity for attendees to see all of this under one roof,” said Dr. Diethrich.

Live from New Zealand

Andrew Holden, MBChB, and Andrew Hill, MD, were the operators for the Nellix case, which was performed at Auckland City Hospital.

Before beginning the case, Dr.



Attendees view the first live case transmission in the United States of a procedure with the Nellix® EndoVascular Aneurysm Sealing System (EVAS).

Holden presented a review of the technology and some of the proposed advantages:

- Procedural simplicity
- Can treat adverse anatomies
- By filling entire aneurysmal sac,

absence of endoleaks, including type 2 endoleaks

- Absence of secondary intervention could translate into cost savings

The case transmitted to iCON was a 73-year-old female patient with a 5.8cm AAA, with hypertension and hyperlipidaemia but had normal renal function.

It was standing-room only in the session, as attendees were eager to get a look at this new technology and hear first-hand from both Dr. Holden and Jeff Carpenter, MD, principal investigator, for Endologix’ clinical trial, EVAS FORWARD-IDE. The trial received Investigational Device Exemption (IDE) approval from the United States Food and Drug Administration (FDA) and is approved to enroll 180 patients at up to 30 sites in the U.S., Canada and Europe.

“We appreciate the opportunity to collaborate with iCON on the live case demonstrations of VELA and Nellix,” said John McDermott, chairman and chief executive officer, Endologix. “Most importantly, the physicians in Arizona and New Zealand achieved excellent clinical results in their patients.”



Attendees view live case transmissions from the Arizona Heart Institute, Phoenix, AZ, (left), and Auckland City Hospital, Auckland, New Zealand, on Thursday morning.

Tackling the Hot Topic of CCSVI and MS

Wednesday morning's session include discussion about the role of chronic cerebrospinal venous insufficiency (CCSVI) in the treatment of multiple sclerosis (MS).

iCON Chairman Edward Diethrich, MD, introduced the session's first speaker, Paolo Zamboni, MD, as the "father of this concept."

Dr. Zamboni's research is internationally-known, and has been widely-debated both in the United States and around the world.

Pathology, prevalent studies and pathophysiology were topics of Dr. Zamboni's presentation. He said that only six of 19 eligible studies didn't find a connection between CCSVI and MS.

"We do not have clear strong evidence to link CCSVI to MS," he said. "But there's evidence that there is a neglected vascular component."

John Sutherland, MD, presented preliminary trial data from the REVAMP Study, which was shut down prior to completion. He reviewed the study protocols, as well as best and worst-case patient results in terms of symptom improvements. The study had a quality-of-life component.

"Grip showed the least improvement, and 74 percent said their

balance was improved," said Dr. Sutherland. "Average improvement at one month was good – but modest."

Donald Reid, MD, ISES president, commented that, prior to the session, an attendee questioned why a CCSVI session was on the iCON program because it is not currently approved in the United States.

"Someone asked me what's the point?," said Dr. Reid. "If it can show some benefit, it is very much worthwhile."

Dr. Reid's presentation included a review of the techniques and challenges of venous angioplasty, and said the latter underlies why the results are so variable.

"I tried to show you some of the difficulties of treating veins that don't open up," he said. "In a patient group as a whole we found improvement but the effects were variable."

Kenneth Snyder, MD, PhD, presented results from the the Prospective Randomized Endovascular Therapy in MS (PREMiSe) trial,

which was IRB approved, with no physician reimbursement or cost to the patient for any procedure.

He reviewed the study objectives, inclusion/exclusion criteria, demographics and the primary, secondary and tertiary outcomes.

"The procedure was deemed safe," said Dr. Snyder. "MRI evidence showed that, in the treatment arm, there was a significance difference in T2 lesion."

Mark Wholey, MD, spoke on why "it's time to declare a moratorium" on CCSVI in MS research.

According to Dr. Wholey, there are 12 million patients in the United States with right heart failure and venous hypertension but do not have MS. He said the Food and Drug Administration (FDA) has received reports of the complications, which has caught the agency's attention.

"This is an experimental procedure without proven benefits," said Dr. Wholey. "All of these trials conducted were ultimate failures. We don't have a respected randomized trial with any volume for statistical significance."

iCON Online Education

Conference attendees can continue to learn from iCON presenters. All presentations will be online in approximately three weeks for viewing and downloading. iCON attendees will receive email notification when presentations are available.



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