

3/2015

INFORMATION FOR MEMBERS

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committees!

A round-up
of CIRSE 2015

Educational
grant reports

news

Our community turns 30!



The 30th annual CIRSE meeting saw the introduction
of a parallel aortic symposium – IDEAS 2015.

Cardiovascular and Interventional Radiological Society of Europe

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IR News is designed to provide information on the activities, congresses and educational ventures of the Cardiovascular and Interventional Radiological Society of Europe (CIRSE). While the information in this publication is believed to be true, neither the Editorial Board nor the Editorial Team can accept any legal responsibility for any errors or omissions made. All contributors are responsible for ensuring that submitted articles are their own original work. Contributed articles do not necessarily reflect the views of the IR News or of CIRSE.



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"A dedicated CIRSE Task Force has recently published an excellent overview of pharmacological agents commonly used in IR, presented in a user-friendly mobile app."

Dear colleagues,

It is my great pleasure to address you as CIRSE President. It is a society that has played a huge role in my professional and personal life, and it is an honour to follow in the footsteps of so many noted experts and advocates.

Luckily my task is made easier by the groundwork done by the outgoing committees, notably Anna Belli, and I thank them for their dedication to the society and specialty, and for their inspirational leadership. I feel confident that my new Executive and Standing Committee colleagues will continue this sterling work, and look forward to reporting further advances and successes to you all over the coming years.

The 30th Annual Meeting

Our term of office begins on a high: CIRSE 2015 was another runaway success, attracting a record number of delegates. The positive feedback received shows that the Scientific Programme Committee once again achieved the perfect balance of basics and high-end techniques, of rigorous data and novel therapies. Especially well-received were the expanded venous sessions and the new IDEAS Symposium, which attracted an unexpected number of delegates – so much so, that the lecture room was filled to bursting point on several occasions!

The meeting also offered many important peripheral events and projects, including the EBIR exam, student programme, charity sports evening and an expanded Radiation Protection Pavilion. I will not elaborate on these too much, as more details can be found within the congress report on pages 13–23.

However I would like to focus on a unique aspect of the event in Lisbon – CIRSE's thirtieth anniversary. It has offered us an opportunity to reflect on how far we've come as a profession and a community. This milestone was a running theme throughout the congress, which featured a one-off "X-Session" where ex-presidents discussed seminal moments from their own careers, and a dedicated "30 Years of CIRSE" lounge where visitors could view the newly launched commemorative website, www.cirse.org/30years, which I urge you all to visit.

Our international community

While the CIRSE meeting offers the global IR community a chance to come together, much important work is being done at a local or regional level by

our colleagues. The Italian-European Society of Interventional Radiology (IESIR) celebrated its first birthday during the congress in Lisbon, and used the opportunity to host a number of strategic meetings. Likewise it has been a great pleasure to welcome the Italian College of Interventional Radiology (ICIR) as a new group member in 2015. Together they have more than 800 members, making Italy the second largest CIRSE national group member.

Similarly, our colleagues in France have been working hard to gain more recognition for IR. These efforts have paid off, as the *Société Française de Radiologie* (SFR) has recently established a dedicated IR wing (FRI), and included a special "Interventional Village" at their annual meeting in Paris. They also used this event to formalise their group membership of CIRSE, whose representatives also hosted a special CIRSE-SFR-FRI joint session. More details about the advances of our Italian and French colleagues can be found inside the newsletter.

Drugs and Doses App

With the growing recognition of IR as a clinical specialty, CIRSE felt that easily accessible yet robust clinical practice tools should be made more widely available. Thus, a dedicated task force led by Leo Lawler from Dublin has recently published an excellent overview of pharmacological agents commonly used in IR, presented in an easy-to-navigate digital app. This app is now available for purchase in the Apple and Google stores, and we hope that it will prove useful to our members, no matter their level of experience.

ECIO 2016

Of course, the next big event for the IR community is ECIO 2016, which will be held in the welcoming city of Dublin from April 17–20. Interdisciplinary collaboration will again be a cornerstone of the meeting, and an introduction to the highlights can be found on page 4. I remind you all that registration is already open, and those wishing to get the best deals should not delay!

As the year draws to a close, I invite you all to join me in reflecting on the successes of 2015, and in looking forward to further activities next year. I wish you happy reading!

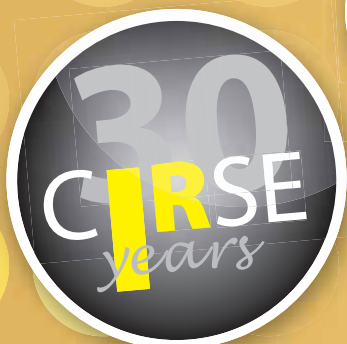
Elias Brountzos



S O C I E T Y

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CIRSE's
30th anniversary
offered us an
opportunity to
reflect on how far
we've come as a
profession and a
community



CIRSE's first congress was held in 1986 in Jerusalem with just 300 attendees. Thirty years later, this number has swelled to over 6,600. Interventional radiology has made great gains during this time, thanks to a dedicated community of committed professionals.



Take a journey through 30 years of CIRSE

A dedicated website charts the history of this community: the professional milestones reached, and the new friends made along the way. Over the years, many of you have volunteered your time, your energy and your inspired ideas, and this has transformed CIRSE into a global voice that can strongly advocate for interventional radiology and its patients.



The website was launched as part of our 30th anniversary celebrations, and was available to view at a special "30 Years of CIRSE" Lounge at the annual meeting in Lisbon. Much of the material was submitted by members, who generously opened their archives to us. The result is a rich and textured pictorial history of the society and the subspecialty, divided into four easy-to-navigate chapters. Viewers can browse videos, photos and detailed background information on CIRSE's exciting history.



We thank you all for your commitment, and invite you all to revisit some of the most memorable moments of our shared history.



We wish you a bon voyage on your time travel!

www.cirse.org/30years

CIRSE's 30th birthday made for a very special General Assembly this year.

Great turnout to welcome the new CIRSE President

Helen Hemblade, CIRSE Office

With so many members gathered together, the Annual Meeting once again proved an ideal occasion to host the General Assembly. For the second time, the Executive Committee elections had taken place online in June. The new e-voting system was introduced in 2013 as an improvement on the former voting process, in which the election took place during the General Assembly, limiting participation to those who could physically attend.

Following a warm welcome from Local Host Committee Chairperson Élia Coimbra, outgoing President Anna-Maria Belli announced the newly elected officers and their positions, as well as the members of the various committees. She also paid tribute to the outgoing members and thanked them for their excellent collaboration. The elected Members of the Executive Committee and of the Standing Committees' roles became effective at the end of the General Assembly.

Positive Outlook

On behalf of CVIR Editor-in-Chief Dierk Vorwerk, CIRSE's Executive Director Daniel Waigl gave a brief report on CVIR statistics. He reported that approximately 1,000 manuscript submissions were expected by the end of the year, with the acceptance rate of all manuscripts falling from 22% to 15% in 2015. The top submitting countries so far have been the USA, China, Italy, Japan, Germany, Korea, UK and France. Further developments included a decrease in the period between submission and Editor's initial decision and a slight increase in the impact factor.

Daniel Waigl then presented the audited financial report for the year 2014 and informed the General Assembly that pursuing a conservative financial strategy, CIRSE continues to present sound financial results and the outlook for 2015/2016 remains positive. It was further reported that the major financial resources in 2014 were allocated to scientific and educational events; online learning resources; further development of CIRSE's research infrastructure and finally, certification and representation activities. The financial report was approved unanimously by the General Assembly.

Continuing the Legacy

Before handing over to the new President, Elias Brountzos, Anna-Maria Belli outlined the importance of the values CIRSE stands for, and presented the society's strategic aims and achievements, such as the status of IR, and underlining the importance of safe IR practice, education and science. She then went on to talk about collaborating with other societies and industry partners at a global level.



Elias Brountzos thanked Anna-Maria Belli for being an inspirational leader of the society over the past two years and for the work she had dedicated to CIRSE, and to her fellow committee members and friends. He subsequently introduced the topics on which he will put emphasis during his term of office, which include continuing the legacy of the IR leadership, and supporting CIRSE's friendly and collaborative spirit. He furthermore encouraged the organising of more activities relevant to members and moreover, the interventional radiology community.

We wish Elias Brountzos all the best in his new role as CIRSE President!

The General Assembly saw Anna Belli formally hand over the reins to Elias Brountzos

Registration for the Seventh European Conference on Interventional Oncology, taking place in Dublin from April 17-20, is now open – secure your early bird discount!

Bridging the gap between research and practice – ECIO 2016

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Don't miss out:
reduced
registration rates
are available
until January 21!

The annual ECIO meeting offers all physicians interested in image-guided oncological therapies an opportunity to learn about new developments and discuss best practice. Since the early days of image-guided biopsies and palliative stenting, the field has expanded to cover a staggering range of clinical options.

Next year's meeting, to be held Dublin, Ireland, will endeavour to cover a broad cross-section of these therapies, focusing on the most recent advances. A number of innovative session types will again be employed, including video-learning sessions, a new Hands-on Workshop on supportive procedures, and the *Best IO papers session*, which was introduced last year to great acclaim.

Colorectal liver metastases

A core theme will be metastatic colorectal liver cancer. More than one million new colorectal patients are seen each year worldwide: approximately 15% of these have liver metastases at diagnosis and around 60% develop these during follow-up. Recent interventional oncology data demonstrate some promising adjuvant therapies, as well as increased survival time and improved quality of life in unresectable patients. These treatments and their clinical application will be thoroughly examined in a number of Clinical Focus Sessions and a Multidisciplinary Tumour Board.

A varied programme

Other topics of discussion include staples such as imaging, HCC, lung cancers, new developments and the clinical management of patients. The 2016 meeting will also feature a dedicated immunotherapy session – an exciting field which deserves the attention of the oncology community. The conference will also address newer clinical territories such as neuroendocrine tumours and cholangiocarcinoma, as well as hosting a discussion on quality assurance in the IO field.

A diverse faculty

These discussions will all take place within a multidisciplinary framework – the vast array of

therapies available mean that interdisciplinary collaboration is an essential part of modern oncology, and ECIO strives to both reflect that reality and promote its wider adoption. We are delighted to once again count a number of oncologists, radiotherapists and surgeons amongst the ECIO faculty, and are confident that this will lead to balanced and fruitful discussions on a number of clinical themes, especially within the Multidisciplinary Tumour Boards. CIRSE also acknowledges the input of partner societies such as ESMO, ESSO and the WCIO in providing recommendations – we are grateful for their specialist knowledge and kind support.

Honorary Lecture

We are especially proud to welcome Prof. Bruno Sangro to deliver this year's Honorary Lecture – his expertise in medical oncology and internal medicine, and his tireless collaboration with other disciplines including interventional radiology have resulted in valuable contributions to the study of intra-arterial treatment of HCC and other primary and secondary liver tumours.

Bring your team members

We are confident that this scientific programme, although focused on IO, will also provide plenty of learning opportunities for specialists from other disciplines, and look forward to welcoming many participants under the Collaborating Against Cancer Initiative.

Join us in Dublin!

This comprehensive programme will be hosted in the Convention Centre Dublin, the first carbon-neutral convention centre in the world, whose striking glass frontage and curved walls offer the perfect backdrop to a field as dynamic and forward-thinking as interventional oncology. We hope to see you there!

A wide range of video-learning sessions, lectures and workshops will be offered at next year's conference.



S O C I E T Y

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7 YEARS OF ECIO – 7 REASONS TO ATTEND

1. Video Learning Sessions

This interactive session format has become a firm favourite in the ECIO programme. This year, two sessions will be offered, one taking you through a wide variety of liver interventions; the other demonstrating the practical application of lung, kidney and bone therapies.

2. Best IO Papers

First introduced last year to great acclaim, this cutting-edge session will summarise some of the most interesting research from the past year, allowing you a concise overview of current trends in interventional oncology.

3. Expert Faculty

ECIO features not only the most well-respected interventional oncology researchers and teachers, it also invites noted specialists from other disciplines, ensuring a balanced discussion of therapeutic advances and clinical management.

4. Multidisciplinary Tumour Boards

These tumour boards enable participants to actively discuss treatment strategies for lung cancer and colorectal hepatic metastases cases. Guided by the mixed-specialty panel, the audience can vote on optimal therapeutic approaches and discuss the likely outcomes.

5. Collaborating Against Cancer Initiative

For many years, this initiative has been enabling interventionists to bring their non-radiologist colleagues to the meeting, where they can see the range of therapies on offer, and the evidence for their use, first-hand. Invite your colleagues to join you!

6. New: Supportive Procedures

Places at the Hands-on Workshops are always snapped up fast, and we expect the same for a new Hands-on Workshop on supportive procedures, which will instruct participants in the use of devices for the management of ascites and pleural effusion, ports and central lines.

7. Dublin's Fair City

Famed for its poets, playwrights and pubs, Dublin is a city built upon conversation and conviviality. We hope this welcoming atmosphere will kick-start a lively discussion amongst faculty and audience, helping further refine the practice of interventional oncology.

To register for the congress and to book your hotel room, please visit www.ecio.org/2016

Why not bring
your colleagues?
Our incentive
programme allows
you to do so at no
extra cost!



European Board of Interventional Radiology

Branching out beyond Europe

Places now available for corresponding members!

Register for the EBIR examinations to be held in Europe in 2016:

VIENNA, March 2-3

BARCELONA, September 9-10

Colleagues from Australia and New Zealand can also register
for the EBIR examination held in cooperation with IRSA:

QUEENSTOWN, August 1-2, 2016

CERTIFY YOUR EXPERTISE!

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

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www.cirse.org/ebir

CIRSE was well represented at the French Society of Radiology's annual meeting, and helped celebrate the establishment of a new interventional radiology division.

Official recognition for interventional radiology in France

Birgit Tkalec-Bekina, CIRSE Office

France has long been a driver of IR innovation, with a great number of groups and individuals actively contributing to its evolution, especially within the field of interventional oncology. Thus it is hugely welcome that after years of internal discussions, the French Society of Radiology (*Société Française de Radiologie*, or SFR) has fully endorsed interventional radiology and has started promoting IR as an integral part of its annual meeting.

Following the establishment of the SFR's Interventional Radiology Federation (*Fédération de Radiologie Interventionnelle* or FRI), the society has decided to sign up for CIRSE group membership, which was announced on the occasion of the annual *Journées Françaises de Radiologie* meeting (JFR) in Paris from October 16-19, 2015.

The election of the first French member of the CIRSE Executive Board, Prof. Afshin Gangi, in 2015 further strengthened ties between the societies, paving the way for a fruitful collaboration.

Against this background, CIRSE was pleased and honoured to take part in JFR 2015, the largest francophone meeting in both diagnostic and interventional imaging, with a society booth and a joint session with SFR-FRI. The CIRSE booth was part of the 'Interventional Village', a special area of the congress dedicated to IR, with live demonstrations of new materials and techniques, hands-on workshops and a competition for junior members. The prominent location helped to promote the society's activities and educational offerings, and explain the many benefits SFR members will soon be able to enjoy at reduced rates due to SFR's group membership.

In the CIRSE-SFR-FRI joint session on *Interventional Radiology in Europe – Today and Tomorrow*, both societies agreed that IR needed the support of the whole radiology community to further its central role in modern healthcare, strengthen the unity of the discipline and increase the visibility of IR to attract young doctors. CIRSE Past President Prof. Anna-Maria Belli opened the session with an overview of IR in Europe, illustrating the exponential

growth of interventional therapies in many areas and presenting the main challenges this young clinical discipline faces. The mind-set for a successful future has to be that the interventional radiologist is a clinical expert, who takes care of patient management after consultation with the patient, and performs follow-up on that patient.

Prof. Afshin Gangi discussed the future of interventional oncology, while Prof. Jean-Michel Bartoli, the head of SFR's Interventional Radiology Federation, discussed endovascular procedures and AAA treatment. They agreed that interventional radiologists had all the necessary tools to enhance IR's role as a successful clinical discipline, but needed to actively influence this development. Prof. Marc Sapoval concluded the session by postulating that close cooperation between CIRSE and SFR will allow the building of a strong alliance at a European and national level, and create new opportunities to further develop and support IR.



It was a particular honour for CIRSE that an interventional radiologist and Past President, Prof. Anna-Maria Belli, was awarded with the *médaille d'honneur*, the honorary medal and membership of the SFR for her outstanding achievements in interventional radiology.

JFR 2015 marked a milestone in the collaboration between the two societies. CIRSE is delighted to support SFR-FRI in its efforts to further the role of IR in France and looks forward to welcoming new French members to its global network!

S O C I E T Y

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Anna Belli
was awarded the
honorary medal
at this year's JFR
meeting in Paris





DEUTSCHE RÖNTGENGESELLSCHAFT
Gesellschaft für medizinische Radiologie e.V.

GEBURTSHAUS
WILHELM CONRAD RÖNTGEN
STIFTUNG 



In 2011,
the German Röntgen Society
bought the house
where Wilhelm Conrad Röntgen,
discoverer of the X-Rays,
was born in 1845.

The plan is to turn the birthplace into a valuable memorial
and an international meeting place by the year 2017.

Find out more on www.roentgen-geburtshaus.de/en
and learn about the beginnings of radiology
in our film "Röntgen – An X-Ray Journey".

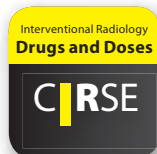


Support our project and help saving Röntgen's memory.

CIRSE's handy guide to pharmacological agents is released on iOS and Android.

Introducing the New Drugs and Doses App

Helen Hemblade, CIRSE Office



CIRSE is very proud to introduce the *Interventional Radiology Drugs and Doses* app, available on iOS and Android. The IR Drugs and Doses app provides practical information on pharmacological agents used by interventional radiologists in everyday clinical practice. Prepared by experienced practitioners who are members of CIRSE, it is intended to serve as a useful training and support tool for physicians, medical trainees and medical students alike. Using the simple and intuitive interface, physicians can easily reference queries surrounding common pharmacological agents in the space of a few seconds; and what's more, the app content is even accessible offline.

IR Drugs and Doses Content

From adrenaline to heparin to Yttrium-90, the app covers the essentials of over 60 commonly encountered agents in clinical practice. These are divided into eight main categories and can be found quickly with the app's simple search function:

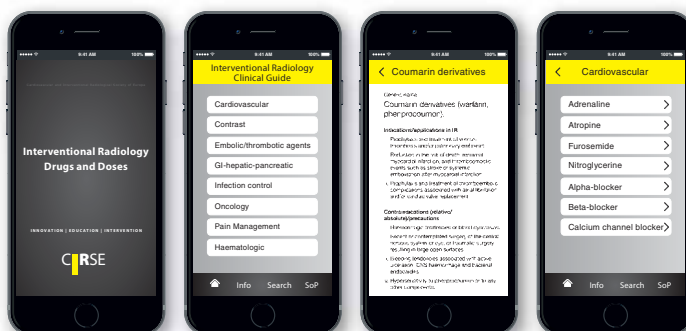
- Cardiovascular
- Contrast
- Embolic/thrombotic agents
- GI-hepatic-pancreatic
- Haematologic
- Infection control
- Oncology
- Pain management

Each agent has an individual entry, which provides the generic name, a brief summary of the agent's pharmacological properties, applications in interventional radiology and precautions. The agent's proper administration is outlined, and where applicable, available reversal agents are detailed. The "How I do it" examples provide practitioners with cases in which the agent could be used and recommended dosages.

The IR Drugs and Doses Task Force

CIRSE was honoured to have interventional specialists from around Europe on board for this exciting project. The Task Force combined their years of experience and expertise to produce concise and accurate content for this app.

Chairing the Task Force was Dr. Leo Lawler, consultant radiologist at Mater Misericordiae University Hospital, Dublin. The rest of the Task Force included his Irish colleagues Tony Geoghegan, also of the Mater Hospital, and John Kirby from Connolly Hospital Blanchardstown; Lars Kamper from the Helios Kliniken in Germany; Roberto Marcello, director of the Interventional Radiology Department at San Filippo Neri Hospital in Rome; and Florian Wolf, deputy head of the Department of Cardiovascular Imaging and Interventional Radiology at Vienna General Hospital (AKH Wien).



IR Drugs and Doses Features

- Simple interface
- Easy usability
- Search function
- No in-app purchases
- Works offline

The app is available to download on iOS and Android, priced at EUR 3.99. If you have any questions or comments, please do not hesitate to get in touch at publications@cirse.org. We hope you will find the IR Drugs and Doses App a useful addition to your daily practice!

Disclaimer: CIRSE does not take responsibility for the contents of this app. This is not a pharmacopeia. Readers should refer to standard guidance books/formularies/regulatory agencies and local pharmacy advice, as well as to local practice guidelines. All dosing etc. must be individualised to patients and this is only a guide. If you are not familiar with drug, you must check with a pharmacist.

The app covers over 60 agents commonly encountered in clinical practice

The IESIR celebrated its first birthday during CIRSE 2015, and used the opportunity to host some strategic meetings.

An open forum for Italian IR

Fabrizio Fanelli, "Sapienza" University of Rome

On the opening day of CIRSE 2015, the first IESIR@CIRSE meeting took place in Lisbon. About sixty interventional radiologists from Italy (mostly IESIR members) and representatives from several companies played an active part in the event. The day's activities included an important scientific meeting and an equally important IESIR Members' assembly.

The scientific meeting saw the involvement of a large number of young Italian interventional radiologists who presented on the following topics: liver embolisation and ablation; ablation of kidney tumour lesions; endoleak management; BTK and limb salvage; vertebroplasty; and the management and organisation of a dedicated interventional radiology department.



IESIR Assembly

The IESIR Assembly was conducted in an atmosphere of great friendliness, frankness and enthusiasm. It was the first opportunity for a lot of the participants to discuss the future of IESIR in particular and of Italian interventional radiology in general. Francesco Florio and Luigi Solbiati were moderators during the discussion of each item on the agenda:

- IESIR's first year of life – F. Fanelli
- Introducing IESIR App – W. Lauriola
- Vote on the new IESIR corporate design – F. Orsi
- What will IESIR be? – IESIR members
- Industry comments – Industry representatives

The Assembly was extremely fruitful and showed a strong unity among the attendees. As a result, two fundamental decisions regarding IESIR were taken by members, namely its scientific values and its goal as a professional association.

The IESIR scientific values were agreed to be that the society is dedicated to professional post-graduate training through a complete formative didactic programme, in which young physicians shall act in the dual role of teachers and learners at the same time.

The formal goals of the IESIR society are the identification of the demarcation line of interventional radiologists' professional role, and the increase the clinical standing of this specialty.

During the meeting it was affirmed that IESIR's first future task will be to positively influence institutional bodies responsible for healthcare plans at national and international levels. In addition, attendees were reminded that since the election of its first Executive Committee, IESIR has aimed to give great importance to transparency and to "home democracy" and so each interventional radiologist is offered the opportunity of mutual cooperation and support.

IESIR's European inclination was highlighted more than once by the participants, who were all in agreement about the great importance of the firm bond existing between IESIR and CIRSE. IESIR members said they hope the new IESIR Executive Committee might lay the foundations for an even tighter and mutually profitable collaboration with CIRSE.

The device companies present at the meeting clearly and openly stressed the necessity of arranging and creating activity registries at a national level, which is the only way to give transparency to the high volume of clinical activity in the many Italian centres and to let companies plan their work accordingly. All companies showed their inclination to support IESIR's didactic programme, because they said it stands out from all others for its rationality and excellent use of economic resources.

All in all, the CIRSE 2015 meeting was a great opportunity for our fledgling society to host important strategic meetings, and celebrate our first birthday. We look forward to reporting further progress next year!

The IESIR
Assembly allowed
decisions to be
made about the
society's goals
and scientific
values

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

Abbott announce positive clinical results from ABSORB Study in Japan

Abbott announced today positive one-year clinical results from ABSORB Japan, a multi-centre, randomised trial comparing the safety and effectiveness of Abbott's fully dissolving Absorb™ heart stent to XIENCE®, Abbott's market-leading, permanent drug-eluting stent. The trial was conducted across 38 sites in Japan and enrolled 400 people with coronary artery disease. The results were later featured at the European Society of Cardiology Congress 2015, and the data was simultaneously published in the European Heart Journal.

Absorb functions like a permanent, metallic stent by opening a blocked artery in the heart, aiming to restore blood flow and provide relief from symptoms of CAD. Absorb is made of a naturally

dissolvable material that leaves behind a restored vessel free of permanent implant, with the potential to flex, pulse and dilate in response to various demands on the heart, based on people's lifestyle and activities.

Currently, Absorb is an investigational device in the United States and Japan, and it is not approved for commercial use in these countries.

www.abbott.com



Lombard Medical acquires Altura Medical

Medical device company Lombard Medical, which focuses on endovascular aneurysm repair (EVAR) of abdominal aortic aneurysms (AAAs), today announced the acquisition of Silicon Valley-based Altura Medical, a privately held, venture-backed company that has developed an innovative ultra-low profile endovascular stent-graft technology that offers a simple and predictable solution for the treatment of standard AAA anatomies.

The Altura endograft system received CE Mark in 2015 and Lombard plans to launch the device in Europe in January 2016 with a broader inter-

national roll-out later the same year. In the USA, Lombard intends to file for Investigational Device Exemption from the FDA in early 2016 with the intent to begin recruitment for a US clinical study later in 2016.

www.lombardmedical.com



Lombard's stent-graft portfolio is expanded by the acquisition of Altura Medical

FDA approval is granted to two new Boston Scientific stent systems.

Boston Scientific receives FDA approval for Innova SES System

Boston Scientific has received Food and Drug Administration (FDA) approval for the Innova™ Vascular Self-Expanding Stent System, an advanced treatment option for patients with narrowing or blockages in the superficial femoral artery or proximal popliteal artery, often causing peripheral artery disease. The company has commenced a full commercial launch of the Innova Stent System in the USA.

The Innova stent platform consists of a Nitinol self-expanding bare metal stent with an advanced delivery system, and is available in a range of sizes.

It features hybrid cell architecture with open-cells along the stent body and closed cells at each end for uniform and accurate deployment. This stent platform serves as the foundation for the new Eluvia™ Drug-Eluting Vascular Stent, designed specifically for the superficial femoral artery. The Innova Stent System received CE-Mark approval in May 2012.

FDA approval means these innovative stent platforms are now available in the US

Boston Scientific receives FDA approval for SYNERGY™

In early October, Boston Scientific received FDA approval for the SYNERGY™ Bioabsorbable Polymer Drug-Eluting Stent System (BP-DES) for the treatment of coronary artery disease. The SYNERGY stent provides synchronised drug and polymer absorption. It is designed with the aim to enable more rapid and complete arterial healing, and to thereby reduce the risk of complications associated with long-term polymer exposure.

Boston Scientific plans the EVOLVE Short Dual Anti-Platelet Therapy (DAPT) Study for early 2016, which is designed to assess the safety of three-month use of DAPT in patients at high risk for

bleeding undergoing percutaneous coronary intervention (PCI) with the SYNERGY Stent. The SYNERGY Stent received CE-Mark in 2012.

www.bostonscientific.com

**Boston
Scientific**
Advancing science for life™



CIRSE 2015 Congress Report

| | |
|----------------------|---------------------|
| 6,629 | Delegates from |
| 85 | Countries |
| 250 | Hours of Education |
| 1,324 | Abstracts |
| 5,800 m ² | of Exhibition Space |
| 119 | Exhibitors |
| 521 | Online Participants |
| 8 | Product Launches |
| 28 | Industry Symposia |
| 32 | Hands-on Workshops |
| 10 | Learning Centres |



CIRSE 2015 Celebrating 30 years of excellence in IR

Petra Mann, CIRSE Office

More than
70 hours of
educational
content are still
available on
demand and
free of charge

From September 26-30 Lisbon became the epicentre of interventional radiology once more, as it hosted CIRSE's largest annual meeting to date. More than 6,600 delegates poured into Europe's westernmost capital for a fantastic meeting offering a whopping 250 hours of education.

Introducing IDEAS

The 2015 scientific programme was more comprehensive than ever, featuring not only the usual core themes of interventional oncology, neuro-interventions, transcatheter embolisation, non-vascular interventions, IR management and vascular interventions, but for the first time ever the Interdisciplinary Endovascular Aortic Symposium (IDEAS). This two-and-a-half day stand-alone programme running parallel to CIRSE offered 14 hours of targeted education, with its faculty of renowned interventional radiologists, vascular surgeons, cardiologists and anaesthesiologists highlighting the interdisciplinary nature of minimally invasive aortic interventions. Delegates were able to sign up for IDEAS individually or enjoy its sessions as part of their CIRSE registration.

Live Stream and On-Demand

CIRSE also offered live-streaming for the fourth year running, allowing doctors and other interested parties to view all sessions taking place in the four main auditoria online. The available sessions amounted to more than 70 hours of educational content. Following their live streaming, the lectures were immediately available on demand and can still be viewed free of charge. With this service CIRSE can cater not only to the many IRs who cannot come to the meeting due to their clinical obligations, but also enable referring physicians and industry

partners to stay up to date with the latest developments in interventional radiology, thus strongly contributing to IR's visibility. 521 unique users joined us via the Live Stream and On-Demand services.

Scientific Programme Highlights

The highly educational yet light-hearted **Film Interpretation Quiz** once again proved to be the most popular session. Following the "last man standing" format, quiz masters Dr. Otto van Delden and Dr. Tony Watkinson presented the audience with two possible answers to each of the presented problems, with those choosing incorrectly having to sit down. Dr. William Clark from Australia read all images correctly and could take home the winning prize of free registration for CIRSE 2016.

This lively session followed directly on the heels of a one-off jubilee session, the X-Session, where six past-presidents shared seminal moments from their careers. The subjects were as diverse as the presidents themselves, with Dierk Vorwerk reflecting on the evolution of hydrophilic guidewires, Andy Adam recalling a patient case that opened his eyes to the importance – and limits – of patient guidelines, and Mick Lee explaining why IR education was such an important goal during his presidency. Johannes Lammer, Jim Reekers and Jan Peregrin also had many entertaining yet illuminating anecdotes to share.

As the treatment of many conditions becomes increasingly interdisciplinary, the format of **Multi-disciplinary Expert Boards** – an already well-established format type in interventional oncology – was also introduced for the discussion of aortic disease and carotid stenosis, giving physicians from



various specialties the opportunity to discuss their approaches to the same cases.

In the always-popular **Hot Topic Symposia**, experts from various fields met to discuss some of IR's most pressing issues. The format not only included short talks by the individual experts, but also a round-table discussion open to contributions from the audience.

As part of IDEAS, the first Hot Topic Symposium focused on the future of aortic intervention, with the high-profile panel of interventional radiologists and vascular surgeons examining the various aortic pathologies and the status quo of treatment options. Interventional radiologists Patrick Warren, Maxim Itkin, Anne Marie Cahill and Alex Barnacle discussed the treatment of predominantly paediatric conditions in the second Hot Topic Symposium.

A focus of this year's programme were the four **Venous Fora**, with each dedicated to a different aspect of venous interventions: varicose veins, DVT, pulmonary embolism and IVC placement, and portal hypertension. Two Hands-on Workshops were also offered on varicose vein treatment.

Venous disease was also discussed within the **Controversies in IR** series, where dialysis access, permanent filters and how to treat Pagett-Schroetter syndrome were hotly debated. Two further sessions were dedicated to arterial interventions and radiation safety, respectively, asking difficult questions and giving way to lively discussions on what exact methods yield the best short- and long-term results.

In the **Evidence Fora** on peripheral angioplasty and drug-eluting devices, renowned experts summarised with the most up-to-date research on the

various therapies, such as the suitability of balloon angioplasty as a first-line treatment for aorto-iliac occlusive, femoropopliteal, infrapopliteal or visceral artery occlusive disease, or whether drug-eluting devices provided benefit in haemodialysis access or supra-aortic, SFA or BTK lesions.

At the **Interactive Case Sessions**, which covered a large array of IR treatments ranging from trauma bleeding to tumour ablations, the audience had the chance to weigh in on treatment options and possible complications for the cases presented by the speakers.

During the **Amazing Interventions** session, a panel of ten interventionists discussed their most challenging cases and innovative solutions.

The ever popular **Hands-on Workshops** covered numerous aspects of a wide array of interventions, providing tips and tricks on tool selection, patient management, possible techniques and many more.

One of this year's new **Workshops** focused on the hot topic of radial access, discussing indications, clinical evaluation and technique for this new approach which is favoured by many patients. In a workshop entitled *Preparation for EBIR and the use of ESIRonline*, delegates were able to familiarise themselves with the CIRSE online learning tool and EBIR certification process. In another workshop, speakers Michiel de Haan and Mark Bratby analysed the paradigm shift in complex DVT treatment.

All CIRSE 2015 presentations can be viewed at www.esir.org free of charge for CIRSE members.

For more photos of the meeting, please go to www.gallery.cirse.org.

Top 5 Best Attended Scientific Sessions

- Film Interpretation Quiz
- Andreas Gruentzig Lecture: Advanced image modelling of abdominal aortic aneurysm: impact on EVAR management
- IDEAS: Aortic intervention – quo vadis?
- Josef Roesch Lecture: CLI beyond pipe fitting
- Controversies in venous disease treatment



M M E E T I N G



For the 30 year
jubilee, it was
fitting that the
Gold Medal was
awarded to none
other than
Prof. Josef Rösch



Honorary Lectures and Awards

Being the highlight of the interventional year, the CIRSE meeting is also the ideal platform for the interventional community to honour those who have made outstanding contributions to the field throughout their careers.

The CIRSE 2015 **Gold Medal** was awarded to none other than one of the founding fathers of interventional radiology, Prof. Josef Rösch. In a heartfelt laudation, Prof. Jan Peregrin focused not so much on the pioneer's well-known innovations as on the giant impact his work has had on modern medicine. Prof. Peregrin pointed out that Prof. Rösch was one of the first doctors to embolise gastrointestinal bleedings, developed the TIPS procedure as well as fallopian tube recanalisation, and co-developed clinically used self-expanding metal stents, among many others. Saying that there could not be a more deserving recipient, outgoing CIRSE President Anna-Maria Belli then presented the award which was accepted by Prof. Fred Keller on behalf of Prof. Rösch, as he was unable to make the journey to Lisbon.

The Leman Research Group from Lausanne won the **Award of Excellence and Innovation in IR** for their research exploring the possibility of combining embolic beads with a multi-targeted tyrosine kinase inhibitor that inhibits tumour vessel growth instead of relying on standard doxorubicin-eluting beads.

As part of its 30-year jubilee, CIRSE awarded four **Distinguished Fellowships**. The first member presented with this honour was Prof. Riccardo Lencioni, whose research has laid some of the foundations for interventional oncology and whose

work on guidelines has had a great impact on clinical practice around the world. Laudator Prof. Andy Adam also pointed out that Prof. Lencioni was the principal investigator of two first global studies in interventional oncology with 1,000 patients enrolled in almost 200 centres worldwide.

Prof. Elias Brountzos gave the laudation for Distinguished Fellow Prof. Katerina Malagari, highlighting her strong focus on liver tumour treatment which led her to establish the Greek National Referral Centre for Liver Disease and publishing the first phase I and phase II studies on DEB-TACE with a total of 135 patients.

Distinguished Fellow Prof. Hannu Manninen was introduced by Prof. Poul Erik Andersen, who pointed out his many accomplishments in his native Finland as well as abroad through his publications and strong involvement in CIRSE.

CVIR Editor-in-Chief Prof. Dierk Vorwerk gave the laudation for the fourth Distinguished Fellow: Prof. Gao-Jun Teng from China, emphasising the fact that Prof. Teng has pioneered numerous interventional procedures in his home country. Prof. Teng has also served as the Chinese editor for CVIR and took part in the memorable *CIRSE meets China* session that was held during the congress.

In his **Andreas Gruentzig Lecture**, Prof. Gilles Soulez examined advanced image modelling of abdominal aortic aneurysms, arguing that in order to improve EVAR performance, new imaging paradigms must be introduced, combining biomechanical information and specific biomarkers of AAA growth with anatomical imaging to optimise patient selection based on rupture risk.



Prof. Jim Reeker's **Josef Roesch Lecture** focused on the evolution of CLI treatment, highlighting perfusion angiography as a promising new way to show functionality of the diseased foot and the disease burden in microcirculation.

CVIR at CIRSE 2015

As part of the opening and award ceremony, the **CVIR Editor's Medal 2015** was presented to Volkan Cakir et al. for their paper *Use of Percutaneous Aspiration Thrombectomy vs. Anticoagulation Therapy to Treat Acute Iliofemoral Venous Thrombosis: 1 Year Follow-up Results of a Randomised, Clinical Trial*.

At the CVIR reception, some of the most outstanding authors and reviewers of the year were recognised. The **Award for Most Cited Article** went to two author groups; Sanjeeva P. Kalva et al. for their article *Safety and Effectiveness of Chemoembolization with Drug-Eluting Beads for Advanced-Stage Hepatocellular Carcinoma* and Madhava Pai et al. for their article *Percutaneous Intraductal Radiofrequency Ablation for Clearance of Occluded Metal Stent in Malignant Biliary Obstruction: Feasibility and Early Results*.

Luca Saba et al. received the **Award for Most Often Downloaded Article** for their *Imaging of the Carotid Artery Vulnerable Plaque* which was downloaded 649 times in 2014 alone. Reviewers Miguel de Gregorio, Gerard Goh, Ali Haydar and Raman Uberoi were honoured for their untiring work for CVIR, carrying out the **highest number of reviews** in 2014.

Throughout the congress CVIR offered a dedicated lounge where CIRSE members could enjoy complimentary drinks and free copies of the journal, as well as CVIR terminals where congress delegates could browse the CVIR website.

The Industry Exhibition at CIRSE – The World's Top Device Platform

Forming an essential part of the CIRSE congress, the industry exhibition has also substantially grown over the years, each time offering more possibilities for companies to connect with the CIRSE community. At CIRSE 2015 no less than **119 exhibitors** showcased their products on an exhibition area covering 5,800m², including booths, demonstration areas and learning centres. Taking advantage of having the world's largest crowd of interventionists present, companies launched eight new products during the four-day exhibition.

At the **28 Satellite Symposia** the companies offered an outstanding programme as well, introducing or further familiarising delegates with cutting-edge information on equipment and new techniques. The overall attendance to the satellite symposia amounted to 7,810: an average of 278 delegates at each symposium including morning and evening slots.

Ten industry partners hosted dedicated **Learning Centres** in which they offered talks and the opportunity for congress delegates to learn about the company's latest tools and devices more individually.

Congress delegates: top 15 countries of origin

1. Italy
2. Germany
3. United Kingdom
4. United States of America
5. France
6. Netherlands
7. Poland
8. Russian Federation
9. Portugal
10. Austria
11. China
12. Belgium
13. Spain
14. Switzerland
15. Turkey

IDEAS

Interdisciplinary
Endovascular
Aortic Symposium

2 0 1 5

M
M E E T I N G

New multidisciplinary symposium explores endovascular aortic treatments

This new
stand-alone
aortic programme
featured a
renowned
multidisciplinary
faculty

Amongst the many innovations introduced at CIRSE 2015, none garnered as much attention as the Interdisciplinary Endovascular Aortic Symposium (IDEAS). Aortic interventions have long been a staple feature of the annual congress, as part of its broad vascular track, but their highly complex nature means that a truly multidisciplinary approach is needed.

In order to facilitate this kind of cross-specialty discussion, it was decided to both expand the aortic sessions on offer, and to offer them as a distinct package, to appeal to surgical or cardiologist colleagues who may not wish to avail of the broader CIRSE programme.



An instant hit

The first Interdisciplinary Endovascular Aortic Symposium met with great enthusiasm: so much so, that many of the sessions were jam-packed, with interested delegates standing in the aisles and backed out into the corridor. To overcome this issue, an additional room was quickly found, and the sessions were live-streamed directly to it, increasing the audience capacity substantially.

Many sessions were organised as round-table forums or debates, and the audience were not shy about getting involved in the discussions! Interestingly, many of the opinions were not split along radiologist-surgical lines – rather, both groups showed a fairly even division of opinion when it came to interpreting some of the clinical data available.

Hot Topic Symposium

The Hot Topic Symposia were introduced to the CIRSE programme in 2013, and are an ideal platform for examining controversial treatment issues. With aortic interventions gaining such prominence, it was decided to devote one of these to *Aortic interventions – quo vadis?* This fascinating discussion followed directly on the heels of this year's Honorary Gruentzig Lecture, which Prof. Gilles Soulez (Montreal, QC/CA) used to explore *Advanced image modelling of abdominal aortic aneurysm: impact on EVAR management*.

The Hot Topic Symposium featured four key speakers: noted interventional radiologist Prof. Hervé Rousseau (Toulouse/FR) addressed thoracic aortic trauma; complicated acute type B dissection was tackled by Prof. Richard Gibbs (London/UK), who valiantly attempted to bring clarity to the diverse range of diagnostic criteria for identifying these, before discussing what treatment strategies are best pursued in these cases. Leading on from this, Prof. Jean-Paul Beregi (Nîmes/FR) discussed the mechanisms and management of malperfusion syndrome; while renowned vascular surgeon Dr. Frank Veith (New York, NY/US), discussed the management of ruptured abdominal aortic aneurysms, and which patients are suitable for endovascular repair.



Aortic Round Tables

To allow for open discussion, IDEAS featured several Aortic Round Table sessions, at which key opinion leaders from both vascular surgery and interventional radiology outlined their views regarding select "hot topics", before engaging in lively discussions with both their fellow speakers and the audience.

The first of these addressed clinical issues pertaining to the abdominal aorta. Although EVAR is now widely used for treating AAA, there remains a lack of clarity on its value in all patients, and the indications and limitations of EVAR need further discussion. Kicking off this discussion, Dr. Jos van den Berg presented risk-adapted strategies for EVAR follow-up that minimise radiation exposure for the patient and reduce costs compared to the typical CT follow-up. After Prof. Barry Katzen's analysis of technique selection in the proximal neck, vascular surgeons Dr. Eric Ducas and Prof. Vincent Riambau compared the risks and benefits of EVAR vs. open repair in ruptured AAA and aorto-iliac aneurysms, respectively, asking the key question for the ensuing discussion: can new generation devices influence EVAR's long-term outcomes, and are more RCTs required to analyse those outcomes?

The second Aortic Round Table dealt with treatment options in the thoracic aorta, and opened with Prof. Mike Dake's breakdown of the challenges faced in arch aneurysm management, such as curvature, increased pressure and branching arteries of the arch. In their talks, vascular surgeons Prof. Jean-Pierre Becquemin and Prof. Santi Trimarchi analysed the risk factors for paraplegia and the management of acute type B dissections, respectively. Adding a cardiologist's perspective,

Prof. Christoph Nienaber gave his take on the management of complications of chronic dissections – although newer percutaneous devices entail a smaller entry wound than traditional cut-downs, large introducer systems mean that bleeding complications are an inherent risk in current practice. Practitioners must also beware of converting type B to type A dissections, uncontrolled tearing of the intimal flap, and most especially, aortic rupture.

A comprehensive programme

The inaugural programme aimed to not only cover a diverse range of clinical issues, but also to ensure that learning was enhanced by a good mix of session types. In addition to the sessions detailed above, lecture sessions, interactive case sessions and multidisciplinary expert boards were offered, while both Bolton Medical and Cordis hosted Satellite Symposia.

All presentations are available to view on ESIRonline – simply visit **www.esir.org**.

IDEAS 2016

Based on the high attendance figures, and the hugely positive feedback from those attending, it has been decided to continue with the IDEAS programme in 2016. A preliminary programme has already been devised, and announcements will follow in the New Year. The Symposium will again be hosted parallel to the CIRSE Annual Meeting, and will run from September 11-13 in Barcelona, Spain.

We look forward to seeing you there!

For updates on what is planned for IDEAS 2016, please visit **www.aorticideas.org**

IDEAS 2016
will be held in
Barcelona from
September 11-13



M E E T I N G

The CIRSE 2015 Student Programme – bringing inspiRation to Lisbon

Ben Raho, CIRSE Office

92.9% of respondents indicate that the programme has made IR more attractive as a career choice

Every year the CIRSE Student Programme offers hundreds of medical students from around Europe the possibility to attend the largest IR congress in the world. It was officially launched in 2011 to provide undergraduate students with an insight into IR and to mitigate the fact that most medical students around Europe go through university without being confronted with the subspecialty.

Over the years it has grown into an important part of the congress and participant surveys show that it not only increases awareness and knowledge of IR but also plays a significant role in later career choices: students opting for IR overwhelmingly state that attending CIRSE had played a decisive role for them. But even those students undecided or not pursuing a career in IR feel that it proved valuable for their professional future.

This year the programme aimed to maintain its excellent track record and provide attending students with a unique educational experience. As in previous years, student entrance to the congress was free and the first 150 students to register were awarded a travel grant to make congress attendance more affordable even on a student budget. Students joined us from 23 different European countries, with strongest attendance from the host country Portugal, followed by Poland, Austria, Spain, Ireland and the United Kingdom.

Once again, the Student Programme officially opened with an introductory lecture, which featured short talks by outgoing CIRSE President Prof. Anna-Maria Belli, incoming President Prof. Elias Brountzos, Prof. Christoph Binkert and Prof. Klaus Hausegger, and gave students ample time to ask questions and interact with prominent mem-

bers of the European IR community. Students were also given a list of recommended congress sessions which contained content suitable for IR novices. An introduction lecture in Portuguese was also offered with talks from Dr. Gomes, Dr. Pereira and Dr. Lopes

As well as food for the mind, programme participants were also provided with free lunch in the Students' Lounge, where students could meet their peers and form personal and professional relationships. Another highlight of the programme was undoubtedly the Students' Evening, which was very well attended.

However, the most popular feature of the Student Programme were, as always, the hands-on workshops, which gave students the chance to leave aside the familiar lecture room setting and delve into the clinical side of IR in the simulator gallery or get their hands dirty trying out ablation devices on chicken filets and porcine livers.

In light of this year's extensive CIRSE Student Programme, it is hardly surprising that in our evaluation survey, feedback from participants was overwhelmingly positive. 92.9% of respondents indicate that interventional radiology had become more or much more attractive as a career choice for them, vindicating CIRSE's strong commitment to help grow the next generation of interventional radiologists.

- Over 150 student participants
- Students from 23 different countries
- 4 Dedicated Student Hands-on Workshops
- 55 hours of recommended sessions



The Radiation Protection Pavilion at CIRSE 2015

Birgit Tkalec-Bekina, CIRSE Office



The second Radiation Protection Pavilion, CIRSE's interactive awareness campaign for radiation protection and dose management, was unveiled at CIRSE 2015 in Lisbon. Featuring exciting elements such as live talks, eye-checks and a prize draw, the pavilion was a great success and contributed to increasing delegates' awareness of the health risks related to occupational exposure to radiation.

Can you handle the risk?

Following the very successful pilot project in Glasgow, CIRSE's Radiation Protection Subcommittee further extended this year's pavilion to make it an even more interactive and engaging experience. Beyond a broad range of take-home information materials on optimal radiation protection in IR procedures – of which more than 800 copies were handed out – the 2015 Radiation Protection Pavilion offered a number of new elements.

A very popular new feature were the mini-talks, which were hosted by Subcommittee Members and industry partners in an open space directly within the pavilion area. Distinguished speakers held a total of twenty talks that touched upon topics such as medical simulators in patient and staff dose management, optimal angiography equipment settings, robotic catheter assistance and dose reduction through novel devices based on eye-controlled regions of interest.

Having gained new insights from these talks, delegates could test their knowledge with the online self-assessment quiz or check their practical skills at the two radiation safety simulators, which visualised their radiation exposure in real time. A more playful approach was provided by two interactive Kinect games, set up by industry partners.

Keeping an eye on cataracts

In its endeavour to further awareness of radiation-induced cataract formation, CIRSE again offered free ophthalmological check-ups to members. Two senior Portuguese ophthalmologists, Dr. Augusto Barbosa and Dr. Filipe Mira, performed a total of 73 eye-checks with in the pavilion. Lens opacities were detected in 13% of all eye-checks, and even very young participants were diagnosed with cataracts. The radiation risk is real, so please remember to stay protected!

Successful collaboration with all stakeholders

The project was supported by 13 select industry partners, who were on hand to discuss their latest protective equipment and advice for optimal dose settings, or presented thrilling scientific discoveries in the mini-talks. EuroSafe Imaging and Image Wisely also contributed to the success of the project, with EuroSafe presenting their online learning tools in a dedicated booth in the pavilion.

Finally, collaboration with industry partners allowed the Subcommittee to organise the first Radiation Protection Pavilion prize draw. Sixty lucky winners were drawn on Tuesday and could take home quality protective garments and equipment, including a CIRSE-branded lead apron, lead goggles, thyroid protectors or even a full visor.

Congress delegates' interest in the second Radiation Protection Pavilion, and in particular the mini-talks, the eye-check service and the information materials, showed that the campaign met a real demand in the IR community, and that it is here to stay. Stay tuned for the next pavilion in Barcelona!

If you missed a mini-talk, you can download the presentations at www.cirse.org/rpp



CIRSE 2015 Charity Evening: making a racket for children with cancer

Helen Hemblade, CIRSE Office

A fun-filled evening of sports helped raise over €6,500 for charity

The charity run is a long-standing feature of CIRSE meetings, and in recent years this concept has expanded to include a hugely popular football tournament. This year's charity evening also saw the introduction of the first-ever tennis tournament, providing great opportunities for some friendly competition between colleagues.

The event took place in Lisbon's University Stadium. There were some excellent performances, with Alena Snaudr finishing first in the women's run and Bernardo Cano Garcia taking the title in the men's run. In the football cup, our host country Portugal was just pipped to the post by Italy, who pulled off some impressive moves in their quest for football glory.

The good-natured atmosphere on the tennis courts and football pitch were matched in the stands, with plenty of by-standers coming along to cheer their colleagues and take part in the complimentary buffet.

Lots of fun was had by all, and most importantly a grand total of €6,536 was raised for the Portuguese Association "Acreditar". Established in 1994, Acreditar provides support for child cancer

patients and their families. The association hopes to become an institution of reference in the national framework by promoting quality of life in the paediatric oncological sector.

Many thanks to all who participated in or cheered from the stands at this year's Charity Evening: we look forward to seeing you again next year!

Winners

Women's Run:

1. Alena Snaudr (15' 10")
2. Slavka Kudrnova (15' 44")
3. Eva Bour (15' 55")

Men's Run:

1. Bernardo Cano Garcia (12' 01")
2. Richard Nolz (12' 07")
3. Sam Byott (12' 11")

Football Cup

1. Italy
2. Portugal
3. Czech Republic





Supporting research: the 3D user interface for TIPS at CIRSE 2015

Camiel Klink, Erasmus MC – University Medical Centre Rotterdam



We are a multidisciplinary group investigating approaches to improve image guidance in needle-based interventions. The team is based at the TU Delft and the Erasmus MC in The Netherlands, and consists of design engineers, engineers with expertise in medical imaging and an interventional radiologist.

An experiment to evaluate a system for improved image guidance based on 3D ultrasound for TIPS was run at CIRSE 2015. Participants were invited to perform a US-guided intrahepatic puncture on a liver phantom and to provide their opinion by means of a short questionnaire and interview.

This experiment is a follow-up from the evaluation of a previous system, which was performed at CIRSE 2013. That system provided users with a visualisation of the hepatic and portal vein in a phantom and an electromagnetically tracked needle in real-time. Participants were asked to perform two intra-hepatic punctures in the phantom with help of our system. All participants were very enthusiastic and graded the potential of the system as 8 out of 10 overall! Thanks to CIRSE, we were able to setup our experiment in a room directly adjacent to the main exhibition, which allowed us to gather feedback from many experienced IRs. Therefore we quickly decided to return to CIRSE once we had our new and improved system and test up and running.

Some quick results from the experiment at CIRSE 2013:

- 14 nationalities; 28 IRs; with & without TIPS experience
- 25 IRs performed the intra-hepatic puncture in one try with the help of our UI
- All would like to use this technique in the future

The experiment we tested at CIRSE 2015 was an improved version of the previous one. Our booth was located centrally within the exhibition and we could therefore welcome many interested IRs who wanted to see what our set-up was all about.

Not only has the image-guidance system been improved (partly based on feedback obtained during the previous session), but a specifically designed phantom with breathing motion and simulated blood circulation has also been developed, making the experiment more realistic. In this way we were able to present participants with a test set-up that resembled the normal clinical situation as closely as possible. Participants were asked to perform an intra-hepatic puncture from the hepatic vein to the portal vein under real-time 3D ultrasound guidance using our own user interface.

Preliminary results show a good result with all participants needing an average of 2 punctures to puncture the portal vein in 5.5 minutes. The physical demand was deemed low and all participants estimated they performed well, based upon the images they were shown. We found it remarkable that IRs were willing to trust a novel system this much. When asked if our system could improve the TIPS procedure overall, a 9 out of 10 grade was given.

Overall we are very pleased with our experiment and want to thank CIRSE and our participants for this great research opportunity. We hope more projects will follow in the future!

When asked if our system could improve the TIPS procedure, a 9/10 rating was given

Cardiovascular and Interventional Radiological Society of Europe

ICCIR 2016



International Conference on Complications in Interventional Radiology

June 9-11
Poertschach | Austria

www.iccir.eu

CIRSE *foundation*

A series of seven courses offered participants of varying levels of expertise the opportunity to refine their practice.

ESIR 2015: Establishing Standards, Ensuring Quality

Alongside CIRSE's larger educational meetings, the European School of Interventional Radiology offers smaller, targeted courses throughout the year, which scrutinise a particular technique or disease. To ensure these are accessible to all members, these are held in varying European locations.

Seven such courses were held in 2015. These were split between Fundamental Courses, where participants can learn (or refresh) the basics through a comprehensive programme of theory and hands-on learning, and Expert Courses, which are aimed at experienced practitioners already familiar with the topic's theoretical aspects and literature, and offer plenty of opportunity for participants to discuss their own experiences with their peers.

Honing expertise

This year, the Expert Courses attracted considerable interest. In response to this demand, the Foundation ESIR Programme Committee have decided to exclusively focus on Expert Courses in 2016, to ensure that as many people as possible can benefit from these peer-to-peer discussion forums.

Novel therapies

While the Fundamental Courses provide participants with a thorough knowledge of well-established and empirically proven therapies, the Expert Courses often tackle novel therapies, helping participants stay on the cutting edge of medicine. This year, the most popular course was *Prostate Embolisation*, held in Milan, Italy from October 29-30.

This is a new therapy for which exciting clinical data is emerging. The course featured a renowned faculty of innovators, including Francisco Carnevale (Sao Paulo/BR), Miguel de Gregorio (Zaragoza/ES), Nigel Hacking (Southampton/UK), Alberto Antunes (Sao Paulo/BR) and local host Antonio Rampoldi (Milan/IT). They were joined by various guest speakers from local hospitals.

The course began with presentations focusing on different aspects of benign prostatic hyperplasia, the role of urodynamic testing, and patient selection for PAE. These were followed by a review

of relevant anatomical considerations, materials and methods, culminating in a step-by-step explanation of the procedure. The programme also included two live cases, as well as video cases and interactive discussions. In addition, the course explored under what circumstances alternative treatment options may be appropriate. The final session consisted of an interactive round-table guided by the entire faculty, permitting participants to clarify any remaining queries in a structured setting.

Due to the overwhelmingly positive feedback, the PAE course will be repeated in 2016, although details have yet to be confirmed. Updates will be available on www.cirse.org in due course.

FUNDAMENTAL COURSES 2015



TIPS and Portal Venous Disease

Rome (IT), June 5-6

Arterial Problems in Obstetrics and Gynaecology

Flensburg (DE), June 12-13

DVT & Pulmonary Embolus

Dublin (IE), November 27-28

EXPERT COURSES 2015



Critical Limb Ischaemia - Diagnosis, Treatment and Parameters for Success

Amsterdam (NL), October 16-17

Prostate Embolisation

Milan (IT), October 29-30

Effective Hepatocellular Carcinoma (HCC) Treatments - Advanced Local Therapies

Lausanne (CH), November 13-14

The Future of Image-Guided Tumour Ablation - Targeting Techniques and High-End Clinical Strategies

Innsbruck (AT), December 11-12

F O U N D A T I O N



The 2016 courses will be announced shortly – visit www.cirse.org/esir2016



CIRSE FOUNDATION GRANTS

"One highlight of my stay was the combination of open surgery and CT-guided cryotherapy in a very complex single kidney tumour, unable to be reached by the percutaneous approach alone."

Visiting Scholarship Grant Report

Pedro Pegado, Centro Hospitalar de Lisboa Central

In October 2014, I had the opportunity to visit the Department of "Imagerie Interventionnelle" at the University Hospital in Strasbourg. I was welcomed by the Head of Department, Professor Gangi, who is an internationally renowned interventional radiologist. The opportunity to be in his department and be part of such an organised team, even just for two weeks, was a great asset to my residency.

Within my radiology residency, I had two main interests: interventional radiology for all non-invasive treatment options, and musculoskeletal imaging as a way of understanding orthopaedic pain and its management. Consequently, I felt inspired by Prof. Gangi's work, and the CIRSE Foundation grant gave me the opportunity to experience this up close.

theoretical information I needed and answered all my questions with patience. They even allowed me to practice several procedures using the models in the angiosuite in the afternoons. I also learnt about specific interventional materials, such as different kinds of needles and different pre- and post-procedural imaging techniques used in the department.

One highlight of my stay was the combination of open surgery and CT-guided cryotherapy in a very complex single kidney tumour, unable to be reached by the percutaneous approach alone.

I also had the opportunity during my short stay to make contact with other colleagues from all over the world and understand how internationally acknowledged the department is.

The Department

The department has three suites and a recovery room: an MRI suite, used mainly for kidney biopsies and cryotherapy; an interventional CT and a C-arm suite with the most modern technology available; and an angiography suite including cone-beam CT. Two ultrasound machines were also available for interventional procedures.

Every day, except Tuesday, an anaesthesiologist is present for all the major non-vascular interventions like vertebroplasty, RFA of different organs and cryotherapy for different kinds of tissue. Every Monday afternoon a case meeting takes place to discuss patients scheduled for the next week, and review the procedure indications, as well as which material will be necessary, which complications can be expected, and how the patient will be placed in the suite. This informal meeting proved to be a very effective means of communication between the various members of the team and saving time in organising the day-to-day work.

Experience

During my stay, I had the opportunity to assist in mainly non-vascular procedures, including vertebroplasty, cementoplasty, epidural and nerve root infiltrations and also cryotherapy in several organs with oncologic lesions.

All the members of Prof. Gangi's team guided me through the procedures and integrated me into the daily workflow. They gave me all the



It is good to know that as long as there are individuals like Prof. Gangi, working and developing IR, the future of this discipline is bright.

Outside the hospital, I also had time to explore Strasbourg, a beautiful city with a lot of history, good food and warm people.

International exchange is an excellent way to build experience and learn new ways of working. I would like to express my gratitude to the CIRSE Foundation for this opportunity, and for the trust placed in young radiology residents. I am grateful to Tanja Valentinitich for her invaluable support in organising my application. I would like to thank the whole team working with Prof. Gangi, including consultant doctors, residents and technicians for their warm reception, kind advice and constant support. I would like to give special thanks to Dr. Julien Garnon and Dr. Mark Morrel for their hospitality and also for their effort and patience in explaining how to do the procedures step-by-step.



Hôpital Civil de Strasbourg

- One of the oldest medical establishments in France
- The hospital was founded in the year 1119
- There are currently over 11,000 employees

Embolisation is a continually growing field, and various novel clinical applications were discussed at the GEST Europe meeting in Seville in June.

GEST Europe 2015

Petra Mann, CIRSE Office



The fourth Global Embolization Symposium and Technologies (GEST) Europe convened in beautiful Seville, Spain, for its most comprehensive meeting yet. More than 1,000 attendants from 59 countries braved the June heat to discuss all aspects of embolisation ranging from patient selection to materials, techniques and cutting-edge research.

Best-attended sessions

The highly popular GI bleeding session was opened with an interesting set of pro and con presentations comparing angiography to colonoscopy as the ideal approach to severe lower GI bleeding. Another pro and con debate focused on empiric embolisation for upper GI haemorrhage.

In the second most popular session, experts from around the world took a close look at coils and plugs, covering numerous aspects of their application and the various available products.

Prostate artery embolisation was another hot topic at this year's symposium. A special session on men's health and a clinical case-based discussion covered patient selection, anatomy, technique and embolics, as well as logistical aspects such as how to set up a PAE programme with a multidisciplinary team.

In the cutting-edge Technology Session, some very interesting developments in embolotherapy were scrutinised, among them nano-particles. Prof. Philippe Pereira showed that they can be used not only to improve various imaging modalities, but can also be highly effective in delivering drugs and genes to targeted areas, increasing drug concentration, prolonging exposure of tumour tissue and decreasing side effects. Other topics included robotic-assisted embolisation, which

increases accessibility and reduces radiation load, and advanced 2D and 3D roadmap techniques.

Other formats

In the seven hands-on workshops, various embolics (including coils, plugs, particles, gelfoam and liquid options) were reviewed, followed by hands-on demonstrations and lively expert-delegate interaction.

Other session formats covered the various medical conditions, including gastrointestinal bleeding, vascular malformations, trauma and endoleaks. Delivery techniques were also scrutinised – new ones such as prostatic artery and bariatric embolisation as well as the relatively well-established procedures used to treat uterine fibroids, vascular and lymphatic malformations and trauma patients.

Embolotherapy is fast gaining importance within the interventional oncological field, and this development was reflected in a number of sessions. One on colorectal metastases included two presentations by oncologist Dr. Simon Pernot, as well as a very interesting debate regarding the pros and cons of skeletonisation prior to radioembolisation. HCC treatment was also covered in a dedicated session featuring an intense debate on whether drug-eluting embolics or classic TACE is the treatment of choice for HCC.

5 Best-Attended Sessions

- GI bleeding
- Coils and plugs
- Prostate artery embolisation
- HCC
- Men's health including prostate artery embolisation

**Presentations
and webcasts
from the meeting
are available on
www.esir.org**



CIRSE FOUNDATION GRANTS

"One of the advantages was that for the first time I was able to work using high-intensity focused ultrasound in the treatment of uterine fibroids and some pancreatic and retroperitoneal lesions."

Fellowship Education Grant

Lúcia Fernandes, Centro Hospitalar de Lisboa Central



Left to right: Guido Bonomo, Lúcia Fernandes, Franco Orsi and Paolo Della Vigna



Istituto Europeo di Oncologia (IEO)

- One of the world's most prestigious hospitals
- Founded in 1994
- Fastest growing comprehensive cancer centre in Europe
- More than 100,000 patients per year

The CIRSE Fellowship Grant provided me with a unique opportunity to immerse myself in interventional oncology and learn new skills in this fast-growing field. My experience as a fellow at Istituto Europeo di Oncologia (IEO) in Milan gave me the opportunity to accelerate my professional development, not only by learning new techniques but also in the clinical management of patients via several different tumour boards supporting interdisciplinary collaboration, which allow patients to benefit from a vast array of specialist knowledge.

I had the chance to collaborate with talented physicians such as Franco Orsi, Guido Bonomo and Paolo Della Vigna, who really welcomed me at IEO and made my integration natural and easy in all the department activities from the very first day. I had active participation and engagement in different interventional procedures, ranging from non-vascular to vascular procedures. One of the advantages of this was that for the first time I was able to work using high-intensity focused ultrasound in the treatment of uterine fibroids and some pancreatic and retroperitoneal lesions.

At IEO it is normal to combine procedures, so that surgeons and interventional radiologists can, for example, work together on liver and pancreatic tumour ablation procedures, employing laparotomy or a laparoscopic approach. Likewise with urologists, when a ureteral stent placement is required to protect the calyceal tree before kidney tumour ablation procedures. Another advantage was seeing the importance of the anaesthesiologist to the team, allowing the procedures to occur in an accurate, controlled and pain-free environment.

During my fellowship I saw interventional radiology creating new paths at IEO, with the announcement of the Italian-European Society of Interventional Radiology (IESIR), a society that is focused on highlighting the clinical role of the interventional radiologist in patient management throughout Italy and Europe.

I truly appreciated the experience I had at IEO; I was surrounded by incredibly talented and thoughtful people who had a shared interest in improving interventional oncology's clinical patient management. Every day was a learning experience and I will carry the professional relationships and insights I gained with me for the rest of my career.

"True clinical involvement and responsibility of the interventional radiologist is a hallmark in this department."



Scholarship Grant Report

Thomas Rodt, Hannover Medical School

Due to the generous funding from the CIRSE Foundation scholarship grant and the support of my home institute (the Department of Diagnostic and Interventional Radiology at Hannover Medical School, Germany), I had the opportunity to spend two weeks in July 2015 with Prof. Brountzos and his interventional team at Attikon University Hospital in Athens, Greece. The hospital was newly built in 2002 and is located in the west of metropolitan Athens. It serves as an emergency hospital for the whole of Athens and is a tertiary care centre for the surrounding hospitals. Furthermore, there are core units specialising in infectious diseases, diabetes, cardiovascular diseases, stroke, oncology and haematology.

Interventional radiology is part of the general radiology department providing services to in- and out-patients. However, the division is set up to effectively work as an autonomous clinical subspecialty within the hospital. This does not only apply to the way the procedures and processes are structured, but even more importantly to the clinical involvement shown in either out-patient clinics and in-patient rounds or interdisciplinary consultations.

During my time in Athens I had the opportunity to observe and participate in the broad variety of interventional procedures performed by Prof. Brountzos and his team on a daily basis. Not only did the caseload include standard oncologic, vascular and non-vascular procedures, but also more complex TIPS, EVAR, peripheral vascular and biliary procedures. I also had the opportunity to observe state-of-the-art musculoskeletal interventions such as different vertebral augmentation techniques and infiltration

therapy under the supervision of Prof. Kelekis and Dr. Filippiadis.

Despite being familiar with almost all of the procedures performed, I was very impressed by the technical precision and clinical soundness of the treatment. I was also very excited to observe and learn a broad variety of interventional techniques one can use in challenging situations from a very experienced interventional radiologist. Furthermore, in our great conversations, I had the chance to reflect on the ways interventional radiology can be provided as a truly patient-oriented service.

Prof. Brountzos and his team really went out of their way to teach and involve me in the discussion on different treatment options for complex cases. True clinical involvement and responsibility is a hallmark of this department. It was impressive to see how this made the role of interventional radiology more transparent to patients and clinical colleagues.

All this would not have been possible without the generous grant provided by the CIRSE Foundation. I would like to use this opportunity to express my sincere gratitude to Ms. Tanja Valentinitzsch of the CIRSE Office, who was of tremendous help during the application process for the grant, and in arranging the scholarship itself.

Finally, I would like to thank Prof. Brountzos for being a truly inspiring mentor and a very generous and caring host; he really made the CIRSE scholarship a special experience that I will remember for the rest of my interventional career.



Attikon University Hospital

- Built in 2002
- Serving as an emergency centre and tertiary care hospital
- 750 patient beds



Entrance of Attikon University Hospital, Athens



Prof. Brountzos (far left) and Prof. Kelekis (third from left) together with the interventional team and Dr. Rodt (second from right).

