The election results are in!

Review ECIO and ET 2019

The new Medical Student Curriculum

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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.
Dear colleagues,

It does not seem very long ago that I was writing my first IR News welcome address to you back in 2017. Now we are already in the summer of 2019 and it is time for my last welcome address before I hang up my presidential boots and hand over the Presidency of CIRSE to Afshin Gangi in September in Barcelona. I have hugely enjoyed the past two years and the satisfaction of being involved in the new developments in education, training and research in interventional radiology in Europe and beyond that CIRSE has achieved. It has been very rewarding collaborating closely with colleagues in the furtherance of IR worldwide and representing CIRSE at their scientific congresses.

The tireless work of your current Executive Committee and Executive Board has enabled great progress to be made, with new Group Members and alliances, updated curricula, expanded clinical research, the launch of CVIR Endovascular, a seamless hand-over of the CVIR leadership, and many other changes besides, all of which aim to provide the IR community with the best possible resources. I am already looking forward to contributing to these projects as Past President on the Executive Board and into the future.

CIRSE has traditionally been very strong in delivering congresses and courses. Despite the new MedTech regulations surrounding funding, our annual congress continues to be the most important and influential IR meeting. There is still time to register for the 2019 CIRSE congress in Barcelona; if you have not yet booked your accommodation, our partners at Kuoni Congress and Lufthansa Group can help you to find the best travel deals. Information regarding how to register and arrange accommodation can be found on our website and in this document, along with a description of innovations for the scientific programme.

We are just back from the inaugural gathering of ET 2019, which attracted interventionalists from around the world. I personally greatly enjoyed the diverse scientific programme and look forward to having more time to attend the sessions next year in Vienna, when my official duties will not be so onerous! I would like to congratulate the scientific programme chairmen Christoph Binkert and Patrick Haage on a truly inspirational conference.

Our congresses are built on the back of our strong membership base, and we are delighted to welcome both Romania and Russia’s Young Interventional Radiologists and Endovascular Specialists Association into the CIRSE fold. Our Romanian colleagues have submitted a fascinating introduction to their work, which you can read overleaf.

On a sad note, I regret to inform you of the passing of three important figures from the IR community: Josef Tacke, long-time CIRSE member and joint chairperson of the CIRSE 2011 Local Host Committee; João Pisco, embolisation innovator extraordinaire; and Friedrich Olbert, a founding member of CIRSE and a driving force behind much of what has come to define us as a society.

These great educators would no doubt be proud of the many steps that we have taken towards enhancing IR education in recent months. I am pleased to inform you that new CIRSE Library packages have been published; new Academy courses are now available; and an updated IR Curriculum for Medical Students has been released. These initiatives are allowing CIRSE to branch out far beyond its traditional sphere of conference education to embrace curriculum-driven online learning and CME-certification, as well as encouraging the next generation of bright young doctors to take up the baton of IR. More details on each can be found towards the back of this edition.

I cannot finish my Presidency without saying something about the new word that we have all come to know – Brexit! Whilst I write this epistle, the UK seems as far away from Brexit as it was when I became CIRSE President. In many ways it is probably further away than ever with the ruling conservative party tearing itself
apart and all sorts of promises being made to deliver Brexit by leadership hopefuls, while the UK parliament seems dedicated to preventing this. Who knows where it will all lead? Probably even more chaos. A life on Mars would be easier.

By comparison with the quicksand of Brexit, European interventional radiology seems like an oasis of happiness and calm. You will know that CIRSE has just held the biennial elections for the Standing Committees and Executive Board positions of the society. In common with previous years, voting was carried out online and I am pleased to report that over 1,000 of you voted, which is the largest number ever! It is also true that the largest number of candidates ever put themselves forward for the positions available.

I am also very happy to relate to you that many of the candidates were women, again the highest number ever in CIRSE elections. These statistics are a testament to the ever-increasing interest of interventional radiologists to be actively involved in the further development of the subspecialty.

Well my friends, this is the end of my final address. I hope that you enjoy reading about all of the current CIRSE activities in the following pages as much as I enjoyed being involved in them. I also hope that you fill your hearts with happiness and enjoy a peaceful and relaxing summer before we meet again in Barcelona. I know that it will be an event to remember.

Robert Morgan, CIRSE President
The results are in – we are happy to announce CIRSE’s Committees for 2019-2021!

CIRSE Committee Election Results

The CIRSE Executive Committee would like to thank all members who took part in the 2019 Committee Elections, held from June 3-14. Voter participation was more enthusiastic than ever, with a record-breaking total of 1,005 members casting their votes.

We would like to thank all members who applied for positions in the Executive Committee and the Standing Committees, and congratulate the newly elected officers. Their terms of office will commence after the 2019 General Assembly.

CIRSE Executive Committee
(term of office: September 2019-2021)

President Afshin Gangi
Vice-President Christoph Binkert
Treasurer Philippe Pereira
Past President Robert Morgan
Scientific Programme Committee Chairperson Adam Hatzidakis
Scientific Programme Committee Deputy Chairperson Laura Crocetti
Standards of Practice Committee Chairperson Peter Reimer
Research Committee Chairperson Joo-Young Chun
Membership Committee Chairperson Brian Fagan
EBIR Committee Chairperson Gerardo O’Sullivan
CVIR Editor-in-Chief Stefan Müller-Hülsbeck
Online Education Committee Chairperson Alban Denys
CIRSE 2020 Local Host Committee Chairperson Patrick Haage
ECIO 2020 Scientific Programme Committee Chairperson Daniel Waigl
Education Programme Coordinator Tze Min Wah
Executive Director Klaus Hausegger

CIRSE Standing Committees

Membership Alex Barnacle
Christian Hohl
Bora Peynircioglu
Maria Tsitskari
Tze Min Wah

Standards of Practice Joo-Young Chun
Elika Kashef
Pierleone Lucatelli
Anthony Ryan
Stavros Spiliopoulos

Research Clare Bent
Roberto Luigi Cazzato
Marco Das
Athanasios Diamantopoulos
Thomas Vogl

More information on the 2019 CIRSE Executive Committee Elections can be found on CIRSE’s website.
We caught up with Prof. Univ. Dr. Gheorghe Iana, president of the Neuroradiology and Interventional Radiology Society of Romania (SNRIR), to learn more about IR in Romania.

NEW MEMBERS

CIRSE: SNRIR Has recently decided to become a CIRSE group member. How would you like to see these two societies working together?

Iana: Access to group membership, and therefore to the large international interventional radiology family, opens new horizons for SNRIR. Some of SNRIR’s current members have been present at CIRSE events for years as individual members. From now on, interventional radiologists in Romania will have a group presence at CIRSE events, and we want our national events to attract as many CIRSE members as possible. The collaboration will also be reflected on a national level in the adoption of CIRSE work protocols, and the active involvement of SNRIR members in CIRSE working committee requests.

CIRSE: Could you tell us about clinical guidelines and undergraduate training for IR in Romania?

Iana: The year 2019 brings to Romania the publication of a curriculum and recognition of the speciality of interventional radiology by the Ministry of Health, a major change in the approach to the problem. Until now, radiology specialists have been performing interventional radiology during their residencies. In May this year, the certification of the first interventional radiology trainers took place, and this autumn there will be a national training programme. Currently planned are three training centres, in Bucharest, Targu Mures and Suceava, where future interventional radiologists will be able to attend the training curriculum.

CIRSE: How are students in Romania encouraged to pursue IR as a career?

Iana: The participation of students at events organised by SNRIR is free, and in the future, we want to present focused campaigns to future medical graduates. SNRIR members will make short presentations and invite those interested in taking part in minimally invasive interventions to the training centres.

CIRSE: How does SNRIR inform patients about IR treatments? How aware of IR is the general population in Romania?

Iana: The re-launch of the national society’s website, www.snrir.ro, took place in April this year and brings the latest information on interventional radiology techniques to the public. Available in both Romanian and English, it facilitates access to the most accurate information on procedures, as well as on physicians and centres where these procedures can be performed.

CIRSE: How many IRs are there in Romania? Have the numbers changed in recent years?

Iana: At the time of SNRIR’s founding in 2009, we had 14 members. Now, as we join CIRSE, we have 35 members working in the field of interventional radiology. This growth has mostly happened in the last 5 years, as a result of the increase in the number of angiographs and the improving possibilities both in the country and abroad. Young radiologists begin to see the importance and the beauty of this field.

Future interventional radiologists will be able to access specialised training curriculum through three new centres in Romania.

Welcoming SNRIR to CIRSE!
SNRIR’s newly re-launched website brings the latest information to the public in both English and Romanian, facilitating access to the most up-to-date information on procedures.

CIRSE: In what ways does SNRIR currently collaborate with other IR societies on a regional and/or global level?

Iana: Most SNRIR members completed parts of their training in different European countries and maintain collaborative relationships with those interventional radiology centres, in addition to consistently participating in the events held in the respective countries. Every year in Suceava, the Regional Symposium of Endovascular Techniques gathers participants from neighbouring countries (Moldova, Ukraine, Bulgaria, Greece) together in Romania.

CIRSE: What are the biggest challenges for IR in Romania? What can be done to further promote the field?

Iana: Recognition as a specialty has been a long process, unfortunately it’s taken almost ten years. From now on, all roads are open and it’s up to us how we will succeed in inserting ourselves in the medical world. For promoting the speciality, it’s essential that we must be present in multidisciplinary scientific settings – neurology, diabetes, vascular surgery – and we need to educate new specialists and have as many interventional radiology centres as possible.

The establishment of national registers of interventional radiology procedures that can bring added documentation and value, both medical and financial, is another topic that will be addressed in the next years.

CIRSE: From an IR perspective, what does multidisciplinary teamwork look like in Romania?

Iana: The presence of an interventional radiologist on a multidisciplinary team is essential. The existence of multidisciplinary teams dealing with pathologies such as diabetic foot, acute ischaemic stroke, or oncological disorders are already recognised in university centres and in some non-university centres in Romania. There is already a communication flow of patient information, and in many situations the interventional radiologist is the one who coordinates the team.

CIRSE: How do you envision the future of IR in Romania and globally?

Iana: Interventional radiology techniques will become more and more accessible, both by increasing the number of specialists and eligible patients. The interventional radiologist will become more and more involved in clinical activities and decision-making within the multidisciplinary team. Multidisciplinary working groups will be set up globally to disseminate information and results of medical practice that will increase the quality of medicine, therefore improving the quality of life of our patients.

Elizabeth Wenzel, CIRSE Office

“From now on, all roads are open and it’s up to us how we will succeed in inserting ourselves in the medical world.”
Boost occlusive capacity with fiber

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An extensive video gallery offers an introduction to various IR topics, ranging from information for patients or medical students to clinical themes.

CIRSE Video Gallery – Another way to look at IR

Each year, CIRSE produces several videos that cover the scope of IR from the general to the specialised. These videos serve a wide range of people, from IRs with decades of experience to trainees and even students who are still investigating IR as a future career. Those who couldn’t make it to a congress can get a more complete view, and patients can learn about IR.

Since 2009, CIRSE has produced videos at every congress. Over the years, as the number of meetings has increased, so too has the number of videos produced at each meeting, with six videos produced during CIRSE 2018, five during ECIO 2019, and many more from ET and CIRSE 2019 still to come.

Scientific topics

Scientific videos are designed with interventional radiologists in mind, featuring interviews with experts addressing an audience of their peers. At ECIO 2019, scientific videos included Dr. Roberto Iezzi and Dr. Anthony Ryan talking about emergencies in oncology, while Prof. Ricardo García-Mónaco, Prof. Jens Ricke and Prof. Thierry de Baère spoke eloquently about IO in a video titled “Interventional oncology: more than just a procedure.” MSK treatment for curative intent was also the topic of a scientific video, with Dr. Jack Jennings and Prof. Dimitrios Filippaidis explaining the benefits of these treatments today and the outlook for the future.

Scientific videos from past CIRSE congress include topics such as embolisation for abdominopelvic trauma, complex aortic stent grafting and raising awareness on radiation protection.

Medical Students

Though students and trainees can benefit from scientific videos, CIRSE has also produced several videos just for them. Earlier this year, two videos, one on percutaneous transluminal angioplasty and one on fibroid embolisation, were produced with undergraduate medical students in mind. In addition to English, these were also translated and distributed in German, Italian, Spanish and French in order to help promote the study of IR throughout Europe.

New videos can be found on the homepage at www.cirse.org, as well as on the media section of the website. Additionally, all CIRSE videos may be viewed by visiting www.youtube.com/CIRSEsociety, featuring playlists from every congress, allowing you to revisit past events and brush up on interesting topics. New videos are released throughout the year – don’t miss the next one!

Elizabeth Wenzel, CIRSE Office

Topic Package Videos

The CIRSE Library is an essential educational resource accessible to all members. The Online Education Committee produces monthly topic packages, curated by experts in the field, comprising the most relevant presentations on subjects from recent meetings, occasionally featuring introductory videos. Recently, videos were produced at ECIO 2019 for release with library topic packages on MSK curative treatment and emergencies in oncology.

For more information on the CIRSE Library, see page 41.

Elizabeth Wenzel, CIRSE Office
CIRSE JOB-FINDER

Browse for IR jobs in hospitals around the world or find the candidate you have been looking for!

IR vacancies on the CIRSE Website

The recently revamped CIRSE website is equipped with a number of new features, enabling easier navigation and improved usability. Catering to everyone involved in interventional radiology, the portal offers information for CIRSE Members and other interested parties, such as students and industry partners. CIRSE Members can access numerous additional benefits, including the CIRSE Academy, the CIRSE Library and all congress-related information through the myCIRSE area. The new CIRSE website also reflects CIRSE’s efforts to support IRs in their career development throughout their entire professional lives, from information for students, to the European Trainee Forum, to online courses offered through the CIRSE Academy and continued education via the CIRSE Library. In line with this continued professional support, CIRSE has added a new and improved IR vacancies section to its website, allowing interested parties to search for their dream job in hospitals and research institutions around the world. A streamlined search tool lists all job postings according to various criteria, including placement city, position type and primary focus.

Institutions looking to hire interventional radiologists, research fellows, radiographers or IR nurses are invited to go to www.cirse.org/ir-vacancies and submit their job opening to reach an audience of 30,000 visitors who browse the CIRSE website every month. This is the perfect opportunity to reach high-quality candidates while also giving back to fellow IRs by expanding opportunities, so make sure to spread the word!

Petra Mann, CIRSE Office

CIRSE 2019:
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Hands-On Device Training

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from 9:30 am to 11:00 am (PMT-HDT 1)
and from
12:30 pm to 2:00 pm (PMT-HDT 2)

www.straubmedical.com | info@straubmedical.com
Workshop for CVIR reviewers at CIRSE 2019

Reviewing is essential for scientific publishing – CVIR’s editorial team relies on more than 400 reviewers to give their expert opinions on numerous clinical and laboratory investigations, write technical notes, and review articles as well as case reports submitted to CVIR. They are asked daily to read newly submitted manuscripts to assess their content, quality and suitability for the journal before they find their way to publication. The path can be a long one, especially for authors who put months into their manuscripts before they submit them.

That is why reviewers’ comments are not only beneficial for editors in helping them make a decision on submissions – they also provide guidance for authors on where and how to improve their submissions in order to best fit the journal and the IR community’s need for ever-growing information.

To help reviewers write concise and meaningful review reports which will help authors improve, the editors of CVIR have decided to organise a workshop at CIRSE 2019 aimed at those who are already reviewers for the journal and those who would like to become one.

The workshop will aim to help reviewers learn some of the key elements and principles of reviewing for CVIR. Some of these principles are universal and can be applied to other medical journals as well, though reviewers should always be sure to inform themselves about the type of review required by each journal.

Topics to be covered include:

• how peer-review functions for CVIR
• how to define a study type
• what should be included in a structured review
• what to avoid in your review reports, comments for authors and confidential feedback to the editor
• how to suggest an appropriate decision recommendation to the editors

If you would like to have a deeper look into the peer-review process for CVIR and learn how to prepare a review that will benefit the scientific community, make sure to visit the workshop at CIRSE 2019, to be held by CVIR Editor-in-Chief Klaus Hausegger and Deputy Editor-in-Chief Raman Uberoi.

Mia Ilic, CIRSE Office

CVIR Reception and Awards
Saturday, 7 September, 2019
13:30-14:30

All authors, readers and reviewers of CIRSE’s official journal, CVIR, are invited to join the meet-and-greet reception and attend the CVIR awards ceremony.

Reviewer Workshop
Sunday, 8 September, 2019
13:00-14:00

Learn about peer-review practice for CVIR and how to prepare reviews that will benefit the scientific community.

Prepared by:
CVIR Editor-in-Chief Klaus Hausegger
Deputy Editor-in-Chief Raman Uberoi
The CIEMAR study will investigate the use of microwave ablation in colorectal liver metastases, and patient enrollment is due to begin in January 2020.

Launch of the CIRSE Emprint Microwave Ablation Registry

CIEMAR Launch – the largest data collection on microwave ablation in Europe so far

The CIRSE Emprint Microwave Ablation Registry (CIEMAR) is a European-wide, post-market observational study looking into the application of microwave ablation for colorectal liver metastases. Local tumour control of the treated lesions at 12 months after the treatment is used as the primary endpoint in CIEMAR, while secondary endpoints will look at safety, efficacy and economic aspects of the treatment. CIEMAR plans to start enrolling patients in January 2020 for two years with a three-year follow-up duration and a target population of 1,000 patients.

Over the last months, the Steering Committee of the CIRSE Emprint Microwave Ablation Registry (CIEMAR) finalised the scientific study design and the case report form. The final study protocol was ratified in April and the initial list of target centres was drawn up and approved by CIRSE.

A CIRSE-sponsored study aiming to inform guidelines

The study is sponsored by the CIRSE Society and independently managed by the CIRSE Clinical Research Department in conjunction with the CIEMAR Steering Committee. It is financially supported through a research grant by Medtronic, the manufacturer of the Emprint Microwave Ablation System. CIRSE and Medtronic plan to work on this project until 2025 with the aim of improving our understanding of microwave ablation in the liver in Europe.

Centres wishing to participate in CIEMAR are expected to have previous experience with thermal ablation in the liver. A total number of 80 ablations of liver metastases using any thermal ablation method over the last four years is required to meet the centre selection criteria in CIEMAR. Participant centres should be specialised in the treatment of colorectal cancer, and treatment decisions need to be made in a multidisciplinary tumour board.

Looking ahead

CIEMAR is expecting to enrol centres from at least seven European countries and is in the process of submitting to local Ethics Committees for centres that have already started the contracting process. Enrolment in CIEMAR will be possible throughout the data collection phase of the study. Before the start of patient enrolment in January 2020, the CIEMAR Steering Committee will finalise the electronic data capturing system and the statistical analysis plan, and they will explore the possibility of including a cost-effectiveness analysis in the scope of CIEMAR.

Martin Hajek, CIRSE Office

For further information on the CIEMAR study, please contact:

Martin Hajek, CIRSE Office
+43 1 904 2003 54
ciemar@cirse.org
www.cirse.org/research/ciemar or clinicaltrials.gov (ID: NCT03775980) via the QR code.
Dr. José Javier Echevarria-Uraga is the Head of the Medical Section of Breast Imaging and Vascular and Interventional Radiology at Hospital Galdakao, where he and colleague Dr. Gorka del Cura-Allende have high hopes for CIREL.

CIRSE: Could you tell us a bit about your hospital and IR department?

Echevarria-Uraga: Dr. del Cura-Allende and I work in a mid-sized hospital that has 400 beds. In our department, there are three doctors exclusively dedicated to interventional radiology. We perform around 1,500 procedures each year using not only vascular, but also interventional techniques. Of course, we also perform chemoembolisation of colorectal cancer liver metastases. We have a very good relationship with our oncology department, something that is very important in order to successfully offer interventional oncology procedures. In our experience, working in a mid-sized hospital allows for a better relationship with other departments than is possible in bigger hospitals.

CIRSE: Why did your centre choose to join CIREL?

Echevarria-Uraga: We are very interested in the application of interventional procedures in patients with metastatic colorectal cancer. We joined the study because we think chemoembolisation with irinotecan is valuable for patients with metastatic cancer, as it can reduce the amount of chemotherapy administered and provide bigger time windows without systemic chemotherapy, which of course improves the patients’ quality of life.

CIRSE: What are your expectations regarding CIREL?

Echevarria-Uraga: First of all, I think CIREL is quite interesting, as it will provide one of the biggest cohorts of patients in this field. This will allow us to draw high-quality conclusions about treatments and patients. These conclusions, I hope, will be strong enough to allow this type of treatment to gain more support and be more relevant. I hope that good data regarding chemoembolisation will be also achieved, which will reflect positively on other IR procedures, showing the quality of our work and encouraging more data collection in interventional radiology.

CIRSE: If you could only pick one Spanish dish to take to your IR practice on Mars, what would it be and why?

Echevarria-Uraga: Last April I went to China and discovered that what I missed most was European beer, so I would take that to Mars. I especially love strong, dark beers with toasted barley malts.

Nathalie Kaufmann, CIRSE Office

For further information on the CIREL study, please contact:

Nathalie Kaufmann
CIRSE Office
+43 1 904 2003 53
cirel-support@cirse.org
or visit clinicaltrials.gov (ID: NCT03086096)
via the QR code.

CIREL is a single-arm, observational cohort study that gathers data on TACE using LifePearl Microspheres loaded with irinotecan in patients suffering from metastatic colorectal cancer.
CVIR Endovascular: Highlights so far

The open-access journal CVIR Endovascular was launched at CIRSE 2017 in Copenhagen in order to provide a platform for all specialists to publish their research in the field of endovascular interventions.

In June 2018, CVIR Endovascular published its first articles online. Since then, the journal has published more than 50 articles online, and the number of submissions it receives is on the rise.

International authorship

CVIR Endovascular attracts submissions from all over the world, and our authors are widely distributed around the globe. The ongoing growth in submissions, and the resulting article output, has not hindered our publication times. The editors put a lot of effort into handling manuscripts efficiently, bringing the average number of days from submission to first decision down from 37 days in 2018 to 28 in 2019.

The year in review: June 2018 – June 2019

Journal submissions: † 70
Article usage: † 24,000
Article citations: 3
CVIR Endovascular's first year of publishing has been very exciting, but we are more excited still for what the future will bring.

CVIR Endovascular Reviewer Forum

In December, CVIR Endovascular Editor-in-Chief Prof. Jim Reekers introduced an initiative to help young interventional radiologists improve their academic profile. Membership of an editorial board is important for any academic career, but only a few are asked to serve as editorial board members. CVIR Endovascular wants to offer young IRs the opportunity to make this step towards becoming an Editorial Board Member.

Since the introduction of the Reviewer Forum, 14 young IRs have joined and have started to actively support the journal as junior reviewers. During the course of the next three years they will continue to do so, first as a junior (during the 1st year) and later as a senior reviewer (during the 2nd and 3rd year). At the end of the third year, they will be invited to formally join the Editorial Board of CVIR Endovascular.

Reviewer Forum Members

Osman Ahmed, USA
Alberto Alonso-Burgos, Spain
Seyed Ameli-Renani, UK
Alessandro Cannavale, Italy
Colin Cantwell, Ireland
Raymond Chung, Singapore
Warren Clements, Australia
Murat Dokdok, Turkey
Francesco Giurazza, Italy
Vincent Helyar, UK
Riccardo Inchingolo, Italy
Adriaan Moelker, Netherlands
Ramin Pourghorban, Iran
Tauqir A. Rana, Saudi Arabia

Ethical statements

CVIR Endovascular is a member of the Committee on Publication Ethics (COPE) and as such must follow and adhere to the international ethical codes for publication. The journal must ensure that all manuscripts – especially case reports – that contain details or images relating to an individual person, must include proper consent for publication from the individuals who are being reported on (or their parent or legal guardian, in the case of children under 18).

Before submitting your paper to CVIR Endovascular, read the editorial policies on www.cvirendovascular.org.

What lies ahead

CVIR Endovascular’s first year of publishing has been very exciting, but we are more excited still for what the future will bring. The Editor-in-Chief will continue to keep an eye open when attending conferences, and actively invites authors of interesting research to submit their work to CVIR Endovascular.

The journal hopes to continue providing a venue to publish research relevant to daily IR practice and to continue receiving submissions from all around the world.

Be part of the success! Submit your research today at www.cvirendovascular.org/submit/

Martha Banegas, CIRSE Office
In memoriam – Professor João Bexiga Martins Pisco (1941-2019)

Professor João Pisco was a renowned physician, especially within radiology and interventional radiology. His work has been hugely influential within the Portuguese radiology community, and will leave a lasting legacy. Prof. Pisco had an immense interest in image-guided interventions, and followed interventional radiology from its emergence in the 1970s until the end of his life, becoming a landmark figure for interventional radiology both in Portugal and worldwide.

Prof. Pisco received his medical degree in Coimbra, Portugal, and completed his radiology residency in Lisbon (1972-1975). Between 1975 and 1976, he held a fellowship in cardiac radiology in the National Heart Hospital in London. Afterwards, he continued his international career as a fellow, instructor and consultant radiologist at the University of Louisiana, USA (1977-1980). These three years in the USA had a profound effect on his whole career, and he decided to pursue interventional radiology, embracing teaching and scientific research simultaneously. Those who learned from him knew his very practical and “American” way of working: “see one, do one, teach one”. He was accessible and kind, fond of teaching and enthusiastic about all types of minimally invasive, image-guided interventions.

Prof. Pisco returned to Portugal in 1980, where he became a pioneer in interventional radiology. During his subsequent 40 years of practice in Portugal, he was responsible for the dissemination of interventional radiology throughout his country.

He was the director of the Radiology Department of the Santa Marta Hospital between 1980 and 1998. Afterwards, from 1998 until 2005, he was the director of the Radiology Department of the Pulido Valente Hospital. He was also the head of the Interventional Radiology Unit of Saint Louis Hospital in Lisbon from 1998 until his death.

Those who knew him experienced his enthusiasm for all procedures, for highlighting the huge impact on patient’s lives, and for offering many different treatment options and alternatives to surgery with lower morbidity and mortality.

He was responsible for the implementation of many different interventional radiology techniques within Portugal, such as percutaneous transluminal angioplasty; intra-arterial fibrinolysis; arterial and venous stent placement; arterial embolisation; intra-arterial chemoembolisation; inferior vena cava filter placement and sclerotherapy of varicocele and pelvic venous congestion syndrome. He became known worldwide for his scientific research regarding arterial embolisation for pelvic tumours during the 1980s at the Santa Marta Hospital, but was best known for the research carried out at Saint Louis Hospital on uterine fibroid embolisation, ongoing since the late 1990s. Since 2009, he had been focusing his research on prostatic artery embolisation.

Outside of his clinical activities, Prof. Pisco was a dedicated teacher and scientific researcher. He completed his PhD thesis on interventional radiology at the Nova Medical School in 1990. His research topic included the vasa vasorum changes following percutaneous transluminal angioplasty, and stent placement in experimental arterial stenoses in a canine model that was published in the Journal of Vascular and Interventional Radiology (JVIR) in 1993 and 1994. Many of the publications and scientific research studies in the 1980s and 1990s included case-reports and retrospective cohort studies including the first patients in Portugal treated with percutaneous transluminal angioplasty, stent-placement and arterial or venous embolisation. In 2008, much of the work performed at Saint...
OBITUARY

Professor Pisco’s work has been hugely influential and will leave a lasting legacy.

Louis Hospital in uterine fibroid embolisation and prostatic artery embolisation started to appear in major international radiology journals, including Radiology, European Radiology, JVIR and CVIR, amongst others.

Prof. Pisco published over 200 research manuscripts, participated in over 400 presentations during scientific meetings, published six books and 78 book chapters, and received many awards for his research in prostatic artery embolisation. He was a devoted teacher, and was the head of the Radiology Department at the Nova Medical School from 1997 to 2011. He taught and reached so many medical students, introducing them to the fundamental role of radiology in medicine and of interventional radiology for patient care. He was also responsible for the post-graduate courses in radiology and interventional radiology that were held in Lisbon every other year, 22 in total, where he hosted internationally renowned faculty and approximately 200-300 attendees. He truly shaped the present and future of radiology and interventional radiology in Portugal and around the world.

During the last 20 years, there was hardly a CIRSE or SIR meeting where Prof. Pisco was not there presenting the most up-to-date results on uterine fibroid embolisation and prostatic artery embolisation. He was very active during last CIRSE meeting in Lisbon, September 2018, and was present at SIR 2019 in Austin, Texas, USA. Those who knew his passion for IR meetings are not surprised that he passed away during an IR meeting – they were his “home away from home”, and this was his grand finale. Prof. Pisco passed away after a full day of prostatic artery embolisation sessions where he participated as presenter and commentator. Late in the afternoon, he received an award from JVIR for one of his group’s publications from 2018. He loved the recognition from his peers, loved SIR and CIRSE, and received three prizes from JVIR during his last 10 years in the field of prostatic artery embolisation.

For him, this was a perfect ending – already in the clouds after receiving another award. He left us, certain that future generations touched by his passion for interventional radiology will keep all minimally invasive, image-guided therapies – including embolisation and angioplasty – alive and well as alternative treatment options to surgery. On behalf of all the patients that he helped treat and save; all the medical students, radiologists and interventional radiologists that he taught – thank you! We hope to see you again someday.

Dr. Tiago Bilhim

“Those who knew him are not surprised that he passed away during an IR meeting – they were his “home away from home”, and this was his grand finale.”

Professor Pisco (third from right) receiving an award from JVIR 2018 editor’s honorees: clinical studies. Photo taken March 26, 2019.
In memory of Prof. Friedrich Olbert (1920-2019)

Professor Friedrich Olbert passed away on April 6, 2019 in his 99th year of life. Interventional radiology has lost one of its early pioneers, and CIRSE has lost one of its founders.

Prof. Olbert was born on June 1, 1920 in Karlsbad/Karlovy Vary (Czechoslovakia). He began his medical education at the University Vienna, Austria, but this was interrupted until 1946 by his military service during World War 2 and his subsequent prisoner-of-war status. He finally received his medical degree in 1950 from the University of Vienna. He completed his training in radiology at the Hospital Lainz (Vienna) and in 1963, became senior consultant at the section of radiology at the 1st Department of Surgery of the Hospital Lainz, a major city hospital in Vienna. In 1959, he opened a private radiology practice, which he ran until 1988. In 1975, he received the “Venia Docendi” and in 1981 the title of Professor for his scientific achievements. In 1985, he retired from work at the Hospital Lainz.

Prof. Olbert was one of the pioneers of interventional radiology, together with Charles Dotter, Kurt Amplatz, Josef Rösch, Andreas Grünzig and Eberhard Zeitler. He learned the angioplasty technique from Dotter himself. One of his major achievements was the development of a balloon catheter together with Lubomir Hanecka, which was patented in 1977 (Hanecka L, Olbert F: Ballonkatheter, OE Patent, 17 February 1977, Patent No. 348,094).

Compared with the Grünzig balloon catheter, the Olbert catheter facilitated a higher pressure of up to 12 atm, had a low profile and did not need to be folded for introduction. Surgimed and later Boston Scientific commercialised this catheter for many years.

Not only a driver of IR in its early years, Prof. Olbert remained strongly engaged with the world of IR well into his retirement.

Following a rich and productive life, one of the great pioneers of European IR has left us.
OBITUARY

One of the founders of CIRSE, Prof. Olbert’s impact on IR cannot be overstated.

from 1982 to 1984, but it was during this meeting that, with the support of Professors Pinet, Tylen, Zeitler, Obrez, Erikson, Rossi, Passariello, Allison and many other peers of the two societies, they merged to form the Cardiovascular and Interventional Society of Europe (CIRSE) on April 24, 1985. Prof. Olbert was thus the first meeting-president of the newly formed society.

Prof. Olbert published more than 80 articles in peer-reviewed journals, 3 books and 22 book chapters and lectured all around the world. He received many honours, such as an honorary degree from the University of Pécs (Hungary), the CIRSE Gold Medal, the Boris Rajevsky Medal of the European Society of Radiology, the Guido Holzknecht Medal of the Austrian Society of Radiology, and honorary membership of the Austrian Society of Interventional Radiology. He also received honorary medals from the City of Vienna and the Republic of Austria.

Prof. Olbert’s enthusiasm for interventional radiology continued after his retirement in 1985. He visited the Department of Cardiovascular and Interventional Radiology at the Medical University Vienna on a regular basis until his death to see new procedures and help young trainees with his advice. He attended the CIRSE annual congress for many years, and the joint annual meeting of the German, Austrian and Swiss IR societies was named in honour of his achievements: “Interventionell Radiologisches Olbert-Symposium (IROS)”. Prof. Olbert was an expert on classical music, played the violin and loved to visit Vienna’s concert halls and operas. For many years, he organised a social event in Vienna during ECR at a Viennese “Heurigen” (wine tavern) to bring IRs together, which continues to this day as the CIRSE Members’ Evening. He leaves behind his wife, Blanka, who throughout his career helped him with his numerous activities.

Johannes Lammer and Christoph Zollikofer

A cultured and accomplished man, Prof. Olbert injected CIRSE with his old-world Viennese hospitality, and established what was to become the annual Members’ Evening.

Prof. Olbert and his wife, Blanka (far left), with guests at one of the early CIRSE Members’ Evenings in Vienna.
Another highlight accentuating the close cooperation between IR societies around the globe was the SIR-CIRSE Joint Session.

CIRSE visits China

CIRSE was delighted to take part in CCI 2019, the annual meeting of the Chinese College of Interventionalists (CCI), held in Nanjing from April 18 to 21 at the Nanjing International Youth Convention Center.

Located right next to Nanjing Eye Pedestrian Bridge spanning the Jiajiang section of the Yangtze River, the congress centre was brimming with interventionalists, including interventional radiologists, vascular surgeons, neurosurgeons, cardiologists, GIs and oncologists. In the evenings, guests were treated to lively get-togethers while the city centre invited participants to delve deeper into the ancient culture of the former Chinese capital and savour some typical Nanjing dishes.

This year’s CCI is already the second iteration of the meeting, providing updates on hot topics as well as cutting-edge technologies and techniques to the interventionalist community in China.

CIRSE was represented with a conveniently located booth, giving participants and company representatives the chance to pick up the latest CIRSE publications and have a look at the programmes of the upcoming ET and CIRSE congresses. CIRSE would also like to thank the representatives of the CCI organising committee for stopping by at the booth for a meet-up with the CIRSE staff.

The opening and awards ceremony was a special treat, with CIRSE Executive Director Daniel Waigl receiving CCI Honorary Membership. He is already the second CIRSE honouree, following CIRSE President Robert Morgan, who was awarded honorary membership at CCI 2018.

Another highlight accentuating the close cooperation between IR societies around the globe was the SIR-CIRSE Joint Session, moderated – among others – by CIRSE Executive Director Daniel Waigl and SIR representative Anne C. Roberts. CIRSE President Robert Morgan got the chance to add his perspective on infrastructure conducive to good patient management, while Susan E. Sedory and Brian F. Stainken from the SIR spoke on the role of learned societies in supporting a medical discipline such as IR and the need for well-trained staff and teamwork in clinical IR services. The session was complemented by a lecture held by Dr. Zhao Ming on cancer management in a sizeable IR department of a Chinese hospital. At a later session, Dr. Morgan addressed outcomes of EVAR in front of an attentive audience.

It was a pleasure for CIRSE to strengthen its ties with the ever-growing Chinese interventionalist community at CCI 2019. The only thing left to say is 謝謝 – xièxiè – thank you for the hospitality!

Dagmar Tanda, CIRSE Office

The CCI organising committee dropped by CIRSE’s information booth to welcome the CIRSE Office’s representative, Ms. Dagmar Tanda, to the congress.
ECIO 2020
European Conference on Interventional Oncology
April 26-29
Nice, France
www.ecio.org
Interventional oncology continues to gain momentum in the world of cancer care. This year’s annual European Conference on Interventional Oncology (ECIO) was quantifiably the biggest hit yet, with a record-breaking 1,492 attendees present and a 22% increase in abstract submission.

ECIO 2019 was held April 8-11 in Amsterdam, the Netherlands, providing participants the opportunity to discover new technologies and research in IO while interacting with leaders in cancer treatment and connecting with colleagues from around the world.

This year’s programme included more than 60 hours of education, focusing on topics encompassing the full scope of IO in the present and the outlook for the future.

Honorary Lecture

This year’s Honorary Lecture was given by Ricardo García-Mónaco. In his talk, “Interventional Oncology: from Europe to South America”, Prof. García-Mónaco spoke eloquently on several topics involving the emergence of IR and IO in South America, as well as the influence that Europe has had there. He talked about several of the European pioneers who brought IO to South America and how treatments have evolved in the time since, using this viewpoint to give a good overview of the evolution of IO in general. He highlighted how the heterogeneous, diverse nature of much of South America has a greater impact on the availability of IO as compared to Europe, and ended with some thoughts on future actions, developments and cooperation between the continents going forward.
He added the encouraging note that, though challenges persist, the scope and number of IO procedures happening in South America are “surely and smoothly increasing.”

Many of his observations about the challenges of spreading IO through South America ring true for much of the world, and are important to consider when contending with the questions of the best way to disseminate information throughout the globe.

**EBIR prep – no shortage of information**

With eleven specifically recommended Clinical Focus Sessions and three Basic Courses, those studying for the EBIR had their pick of preparation material.

In one such session, *HCC – What you should know*, Dr. Arnaud Hocquelet spoke on the best techniques and indications in percutaneous ablation. “I will spoil the end of this presentation” he began, “there is no best technique to perform percutaneous ablation, and the best indication is when you can provide your patient accurate and safe targeting of the tumour, good ablation and safe ablation.”

While the audience kept that in mind, Dr. Hocquelet led them through a series of questions that they should ask themselves when preparing to perform a percutaneous ablation. He concluded that guidance modality, tumour localisation and the abutting structure will help in choosing the best technique; that the number of applicators seems to be associated with better tumour control; that active margin ablation is better than passive margin; and that centripetal technique offers better control of margin ablation when compared to centrifugal.

During the same session, Dr. Laura Crocetti emphasised IO’s increasing role as a first line of treatment in her presentation, ‘Is ablation only for non-surgical candidates in 2019’. “I will give you the answer immediately – the answer is no,” she opened, before displaying circumstances in which ablation is proposed as a first-line treatment even in patients eligible for surgery, as well as cases, such as 2 to 3 cm single tumours, in which ablation can be used as an alternative to surgical resection. Bringing the focus once again to the importance of multidisciplinary teamwork, she highlighted that, for the best results for the patient, ablation and resection should be seen as complementary, not competitive.

**Scientific Focuses – from general to specialised**

ECIO offers something for everyone, from seasoned IOs to students who are still investigating their future path. In keeping with this, Basic Courses aim to offer a series for beginners with a focus on a different organ each year. First featured last year on the topic of MSK in oncology, this popular format returned in 2019, featuring the liver with three distinct sessions structured according to the content included in the new *European Curriculum and Syllabus for IR*. Participants received a comprehensive overview of the subject through sessions covering fundamentals in liver IO intervention, ablation and TACE of liver tumours, and radioembolisation.
Clinical Focus Sessions, meanwhile, honed in on myriad other topics, with sessions on lung and colorectal liver metastases, an overview session on cancer immunology, and several sessions rounding out the liver focus with discussions on HCC.

The constant evolution and progression of IO techniques was a common theme throughout the congress. In a lecture titled ‘TACE: new concepts’, part of Hepatocarcinoma – practice in 2019, Prof. Boris Guiu presented several new concepts and options in TACE, including balloon-TACE and drug optimisation and efficacy.

He presented current problems in the field as well as possible solutions. He stated that the way drugs are currently used in TACE for HCC isn’t the most efficient way, as the practice of treating one side and then the other can lead to longer treatment intervals for individual tumours as compared to traditional oncology. He also pointed out that trials combining TACE and antiangiogenic agents have always failed, commenting, “Sometimes, even if we can get many patients, the results are negative, and so the combination has not been proven to be more effective than TACE alone. It’s time to think outside of the box.” Prof. Guiu then proposed loading anti-angiogenics in a drug-eluting platform to enhance the ischaemic effect of TACE and take advantage of the excellent tissue diffusion of anti-angiogenics.

Musculoskeletal tumours were also scrutinised in a curative treatment session that explained biopsy essentials, how to be curative in primary tumours and how to avoid complications, as well as the role of IO in oligometastatic bone disease and multimodality treatment for cure in bone tumours. The topic was further discussed in a multidisciplinary tumour board.

**Free Paper Sessions**

A record number of abstracts were submitted for ECIO 2019, and the popular Free Paper Sessions allowed outstanding young researchers to present their work on stage at the congress. This year, presentations focused on a wide variety of topics, from the dose-effect relationship for hepatic holmium-166 in colorectal cancer patients to a real-time biopsy system for combined optical spectroscopy and electromagnetic tracking in a woodchuck hepatocellular carcinoma model, embodying the scope of IO’s future.

Several of these presentations centred on highly innovative topics that will doubtless be more fully explored in coming years. Dr. Roberto Cazzato spoke on a prospective clinical study involving augmented reality (AR) and artificial intelligence-based navigation during percutaneous vertebroplasty. He gave a good introduction of what AR can do as far as adding a virtual trajectory to 2D data, as well as an overview of the problems, mainly movement compensation, that AI could be used to correct for.

**Hands-on Device Training, practical education**

Hands-on Device Training allowed participating physicians to gain experience with the latest technologies available in the world of IO. These training sessions provided an overview of the available technologies in percutaneous tumour ablation, with sessions focusing on radiofrequency, microwave, cryo- and laser

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**Experienced practitioners also had a wealth of sessions to choose from, spanning HCC, MSK interventions and many more.**

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*A record number of abstracts were submitted for ECIO 2019, and the Free Paper Sessions allowed researchers to present their work on stage at the congress.*
ablation, as well as image guidance. The device training took place under the supervision of experts, and most sessions featured a round-table discussion allowing participants to ask questions and give feedback.

The Safe Sedation training gave participants the opportunity to perform procedural sedation in a simulated environment, informing them on the most common respiratory problems during procedural sedation and the available instruments to make these interventions safe.

The video-learning session, How I do it, provided another unique opportunity for a more practical learning format, as doctors narrated and answered questions on pre-recorded live cases. Dr. Irene Bargellini’s presentation, ‘Liver – solving complex anatomical problems in TACE’, made a strong point as to why observing and learning from other doctors is so essential in order to be prepared for unique circumstances: “When it comes to vessels, you don’t know if the procedure is going to be complex until you are already in.”

Looking Ahead

Next year’s ECIO will take place from April 26-29 in Nice, France. The Scientific Programme Committee is already hard at work ensuring an exciting, educational line-up for what promises to be another record-breaking meeting!

Abstract submission for ECIO 2020 will open in September 2019.

Log on to library.cirse.org to watch all sessions from ECIO 2019!

Elizabeth Wenzel, CIRSE Office

Practical learning was facilitated through a series of Hands-on Device Training sessions and a Video Learning Session.
Multidisciplinary collaboration remains a cornerstone of cancer care. From discussing client cases with tumour boards to teaming up for research, interdisciplinary perspectives and cross-specialty knowledge ensure the very best outcomes for patients and cancer care more broadly. Over the years, the Collaborating Against Cancer Initiative has opened doors for such interdisciplinarity by bringing hundreds of non-radiologist colleagues to ECIO free of charge. This has given a wide array of oncological specialists the opportunity to see the variety of interventional oncology treatment options available, increasing awareness of the field of IR, fostering successful relationships between disciplines and ultimately benefiting the field of oncology as a whole.

Let’s hear from the participants!

This is what some of ECIO 2019’s Collaborating Against Cancer Initiative participants had to say about the advantages of this dynamic programme.

“Opening doors to greater collaboration: The Collaborating Against Cancer Initiative”

“This initiative is very important because we can get the newest insights and background information necessary to counsel patients as optimally as possible.”

Judith de Vos-Geelen Oncologist

“This programme allowed my oncologist colleague to gain more awareness about the developments and possibilities in interventional oncology. It was also fun to come together, and have the chance to work together outside of the hospital.”

Christiaan van der Leij Interventional Radiologist

“As I live in Brazil, it is really expensive to attend high-quality conferences. This initiative allowed me to be part of a great event, expand my knowledge and provide me with quality information to be spread in my hospital and throughout Brazil.”

Ricardo Jayme Procopio Surgeon

Over the years, this initiative has opened doors for interdisciplinary teamwork by bringing hundreds of non-radiologists to ECIO free of charge.

Find out more about this initiative and our other oncology-related projects on www.ecio.org.

We look forward to another successful year for the initiative at ECIO 2020 in Nice!

Emily Beaven, CIRSE Office
We reached out to ECIO 2019’s participants to gain insight into their experiences with this year’s Collaborating Against Cancer Initiative, and are happy to report great feedback!

“I had a chance to listen to the experiences of my colleagues and learn about their daily practice. I especially liked the discussion panels that are similar to tumour boards.”

Didem Tunali
Oncologist

“It was great to get exposed to different views on cancer management from different specialties.”

Pierre Bize
Interventional Radiologist

“I found this idea brilliant. Having a colleague beside me outside our tumour boards was exciting. I could ask them many things during the sessions, and especially in the immuno-IO area, this kind of support is crucial; otherwise we tend to stay as technicians. The opportunity to invite a colleague made me feel proud to be a CIRSE member.”

Sinan Deniz
Interventional Radiologist

Find out more about this initiative at www.ecio.org
EXPERT INTERVIEW

After Prof. García-Mónaco’s honorary lecture at ECIO 2019, we caught up with him for a quick chat on the role of interventional oncology within interventional radiology and within oncology as a whole.

Treating cancer as a whole – thoughts on interventional oncology

CIRSE: What is the role of IO within the bigger umbrella of IR?

García-Mónaco: Interventional radiology entails doing a wide range of procedures to treat patients; among those patients, you may have cancer patients, but interventional oncology is a bigger concept: it treats cancer as a whole, as a disease – image guidance is just a tool. You have to centre on the procedure, but you also have to centre on the patient, and keep the focus on them rather than on the radiological tools.

So, that means more commitment to the patient and the disease itself. You can aim to kill the cancer or transform it into a chronic disease – you have to look at the situation of the particular cancer in different stages. So, IR aims to to cure or treat under image guidance, but interventional oncology is treating cancer itself. That’s the difference between performing interventional radiology on cancer patients and really performing interventional oncology.

CIRSE: You’ve spoken before about how underutilised IO is in the field of oncology. Why do you think this is? How can we change this?

García-Mónaco: Interventional oncology is still underutilised because many general practitioners and oncologists are not very aware of its benefits. So, to increase utilisation, we need to promote it and we need to let oncologists know what is important for the patients. There are a lot of tools and a lot of procedures that can benefit cancer patients, but for that, we need to explain that we have these tools, and that we have a lot of studies that have already proven that these are good treatments. We need to emphasise that IO is suitable for almost every patient, because of the possibility of having an outpatient procedure with very few toxic effects.

Many oncologists are simply used to doing chemotherapy, so we need to try to convince them of the role of interventional oncology for patients in the paradigm of cancer treatment. I think research, promotion and education are key. We need more research, and we need to have better data on what we’re doing specifically for cancer patients. Once we have this, oncologists will have greater confidence in what we are doing; they’ll have more to rely on beyond our own expertise and our experiences with patients. We need more trials and more movement on research and true scientific data.

CIRSE: Why is multidisciplinary collaboration essential for ECIO and interventional oncology as a whole?

García-Mónaco: Education and multidisciplinary cooperation are very important. ECIO is an interventional oncology programme, and when you look at the programme it is of course addressed to interventional oncologists. However, it’s very important that oncologists can also be here, listening and being educated – and indeed IOs are encouraged to invite oncologist colleagues. This is very, very important, and it would be great if the same thing could be offered to us, if oncologists would bring IOs to oncology congresses, so we could go there and promote what we’re doing for the benefit of patients.
For the first time, case reports will be an accepted abstract type at ECIO 2020.

Abstract Submission – ECIO now accepting case reports!

Sharing your research and learning from the findings of others is a huge part of attending a medical congress. Just like the CIRSE congresses, submitting an abstract to ECIO allows you the opportunity to share your research on stage, or as an electronic poster. Additionally, CIRSE Junior Members who submit an abstract and apply for the support programme can attend a congress for free!

As ECIO, already Europe’s leading meeting for interventional oncology, has continued to grow every year, abstract submission to the congress has also increased proportionally. ECIO started accepting abstracts in 2018, and we are happy to report that 2019 already saw a 22% increase in submissions. In 2020, we will add new features and expand the allowed submission types to include case reports, meaning that the submission types and ways of presentation will now be the same for both ECIO and the CIRSE annual congress.

Abstract types

There are three acceptable abstract types for CIRSE and ECIO. Abstracts of all types have a limit of 250 words.

Scientific abstracts: Scientific abstracts should state the purpose, materials, methods, results and the conclusion of a study. They must be presented in an oral free paper presentation or an electronic poster. Though the submitter can indicate their preferred format, the final format decision lies with the Scientific Programme Committee.

Educational abstracts: This type of abstract must include learning objectives, background, clinical findings/procedure details and a conclusion. The presentation format will be electronic posters only.

Case reports: For the first time in 2020, case reports will be an accepted abstract type at ECIO. This format must include clinical history/pre-treatment imaging, treatment options/results, discussion and take-home points as well as images. This format is also only possible as an electronic poster.

All electronic posters, including educational, case reports and scientific abstracts that are not presented orally, will be available for viewing at workstations onsite, which will also allow readers to send comments via email to the presenters.

Abstract submission typically opens six to seven months in advance of a congress – abstract submission for ECIO 2020 will be open from September 16 until November 11, 2019. To submit, go to www.ecio.org and click on the “submit” tab at the top of the page.

We look forward to receiving your abstracts!

Elizabeth Wenzel, CIRSE Office
Following the achievements of GEST Europe, and in response to the pressing need to ensure that CIRSE Members have regular access to education in embolotherapy, CIRSE introduced the European Conference on Embolotherapy (ET) this year. This newest congress compliments CIRSE’s already well-established educational portfolio on embolotherapy, guaranteeing IRs access to consistent and comprehensive training on this important topic.

Championed by Programme Chairs Prof. Christoph Binkert and Prof. Patrick Haage, the first year of the European Conference on Embolotherapy exceeded expectations, bringing more than 800 delegates together to explore this ever-important IR subspecialty. The conference covered the full gamut of embolotherapy topics from trauma management to minimally invasive treatment options for vascular and lymphatic malformations and haemorrhoids, and much more. Leaders in the field explored the latest research, tools and materials, as well as the future applications of these interventions, creating a space for both learning and debate, effectively kicking embolotherapy education into high gear.

“ET is a really exciting new educational platform for CIRSE. To the best of my knowledge, ET is the only European meeting focusing on embolotherapy, and accordingly I think it is important to have a space where we really cover all aspects of this field which is becoming a mainstay of interventional radiology.”

Christoph Binkert
Programme Committee Chairperson

Focus on education

The renowned faculty attracted large audiences to diverse sessions throughout the four days of the congress. The sessions were not only well attended, but the audience also remained active throughout the lectures, using the throwable “catch box” microphone to ask challenging questions that highlighted the complexity of the field itself.

The congress started off strong with an Established Therapy Session focusing on one of the most essential topics for the field, uterine fibroid embolisation. While focusing on technique, Prof. Christoph Binkert also emphasised patient-focused treatment planning, discussing various options, such as medication and even hypnosis, to increase patient comfort and ease healing after the procedure. Prof. Jean-Pierre Pelage delved
into the potential complications and current challenges of UFE, comparing the procedure to other available treatment options such as myomectomy and HIFU. All presenters really honed in on the benefits and future potential for this procedure to positively impact patients and prevent unnecessary hysterectomy – noting the importance of educating more physicians on its availability to ensure that patients receive it as a treatment option.

Special Topic Sessions also offered the opportunity for lecturers to explore some of the hottest and most controversial topics, such as bariatric embolisation. One of the IR’s leading experts in bariatric embolisation, Dr. Clifford Weiss, talked about the epidemic of obesity around the world, the current data on both swine and human subjects, and the implications of this treatment for a disease which is so largely impacted by environmental, genetic and psychological factors. Such sessions provided great food for thought and pushed participants to challenge current practices and discuss the necessary innovations for future success.

**An in-depth look into personalised approaches**

The congress offered a multitude of Case Remedy Sessions, allowing IRs to engage in a thorough discussion on some of the most difficult procedures in a variety of areas such as women’s and men’s health, the kidney and AVM lymphatics. These sessions included video-learning and audience voting, ensuring active audience engagement and a thoughtful discussion on various personal approaches. With the opportunity to follow the IR step by step through a real case, participants gained important insight into the real-life benefits and complications of the procedures, as well as valuable tips and tricks for best practice in their own hospitals.

**Exploring the latest technology**

ET brought in a wide array of industry representatives to share the newest state-of-the-art technology and innovations during both the technical exhibition and each partner’s Satellite Symposium. Three of the most important industry partners – Guerbet, Cook Medical and Medtronic – provided hands-on educational experiences with the newest interventional devices and high-tech simulators in their Learning Centres. The intimate congress atmosphere...
ET provided the ideal opportunity to meet with corporate representatives to get down to the nitty-gritty of the most current developments in the industry.

“The development of materials and devices is extremely exciting. Although we are already working with good technology, the improvements continue to get better and better. ET provides a critical opportunity for information on these developments to be delivered to IRs, which in my view is one of the most important factors for future growth.”

Patrick Haage
Programme Committee Deputy Chairperson

Don’t forget about the good days!

In addition to a more classically designed “bad day” session, exploring worst case scenarios for difficult cases, ET 2019’s Morbidity and Mortality Conference also featured a “good day” session which allowed doctors to also look into challenging cases that resulted in positive outcomes. This enabled the presenting physicians to use the supportive and light-hearted atmosphere to share honest perspectives on the realities of complex cases and celebrate the success of some of their proudest moments.

Both the “good day” and “bad day” sessions provided unique perspectives into actual cases, discussing best practice for scenarios that are not exactly by the book.

Looking forward

Thank you to all who joined us for ET 2019 in Valencia! We are ecstatic that so many of the field’s experts have opted to take part in the congress from its very beginning. Both the faculty’s and participants’ knowledge about embolisation and their enthusiasm for furthering its applications made this a truly fantastic meeting.

As the ET 2019 programme covered the entire spectrum of established embolotherapies, as well as the field’s hot topics and trends for the future, both attendees and non-attendees alike may want to revisit the presentations. To catch up on all ET 2019 sessions, please visit the CIRSE Library at library.cirse.org for on-demand viewing access.

We hope next year will bring even more IRs from various levels of experience together. Known for its beauty and rich culture, Vienna will provide the ideal location for next year’s meeting.

We look forward to welcoming you in Vienna for ET meets GEST 2020!

Emily Beaven, CIRSE Office

Join us next year for ET meets Gest 2020 in Vienna!

ET provided an unparalleled educational experience in embolotherapy as well as an opportunity to access the newest state-of-the-art technology and innovations.
Innovation in IR

The Award of Excellence and Innovation in Interventional Radiology, sponsored by the Rolf W. Günther Foundation for Radiological Sciences, is awarded on a yearly basis for outstanding contributions to the advancement of interventional radiology. Since its establishment in 2012, this distinction has been granted to some of the most innovative physicians in the field. The recipient of the award will receive a certificate of merit as well as a cash prize of €6,000 at the Opening and Awards Ceremony of the CIRSE Annual Meeting and Postgraduate Course.

This year, two great innovators have been chosen. For 2019, the honour will go to Prof. Boris Guiu and Prof. Mathieu Boulin and their team for their decade of tireless work, several clinical trials, multiple published papers and one patent on optimising the anticancer agent idarubicin for TACE of HCC.

The winning team

Prof. Guiu is the head of the Department of Radiology and a professor of radiology at the St-Eloi University Hospital in Montpellier, France. Prof. Boulin is a clinical pharmacist and associate professor at the Ambulatory Medical Unit of Oncology at the University Hospital Center of Dijon Bourgogne in Dijon, France.

The innovation

Ten years ago, the two scientists designed an in vitro screening study on three HCC cell lines in order to demonstrate which anticancer agent could be the most efficient one. They demonstrated that idarubicin had a higher cytotoxicity than ten other chemotherapeutic agents, including those most commonly used for TACE of HCCs. They showed that idarubicin/lipiodol emulsions were very stable and were able to optimise the pharmacokinetic profile of idarubicin as compared to doxorubicin. They also worked on the combination of idarubicin with drug-eluting beads and conducted a dose-escalation phase I trial (IDASPHERE I) to determine the maximum tolerated dose and to assess the toxicity, after which a single-arm phase II trial (IDASPHERE II) was carried out, showing promising results in terms of efficacy as published in April 2019.

They also conducted another dose-escalation phase I study (LIDA-B) assessing idarubicin-lipiodol without any embolising agent administered every three weeks in a whole liver fashion, which showed promising efficacy. The results were published in 2018, and a multicentre single-arm phase II (LIDA-B II) study is currently recruiting.

During this process, a patent for lipiodol-based anti-tumour emulsion for treating cancer was registered, and fifteen papers on idarubicin-TACE were published in prominent journals, including Radiology, Cardiovascular and Interventional Radiology, Journal of Vascular and Interventional Radiology, European Radiology, Diagnostic and Interventional Imaging and Journal of Hepatology.

The prize will be to presented to Profs. Guiu and Boulin during the Opening and Awards Ceremony of the CIRSE Annual Congress on Saturday, September 7, 2019.
From September 7-11, the CIRSE Annual Congress will return for a third time to sunny Barcelona, a well-tested venue which delegates are sure to find convenient and enjoyable. Though all sessions will, as usual, be made available through CIRSE’s Live and On Demand service, the networking, hands-on education and overall spirit of attending the congress in person cannot be matched.

New features, old favourites

Leading experts from across the field of IR will guide delegates through more than 250 hours of education, spread out over eight clinical tracks designed to encompass the full spectrum of IR through a variety of innovative formats.

Endovascular interventions maintain their place at the heart of the meeting, with sessions divided into aortic, venous and arterial procedures. Now in its fifth year, the IDEAS “congress within a congress” on aortic interventions will be accessible for all CIRSE participants. Conversation-generating topics will not be in short supply; a Focus Session on the NICE guidelines will take an in-depth look at recent changes to the guidelines and implications for EVAR, and a Hot Topic Symposium will give an overview of EVAR durability before opening up to a panel discussion.

Another timely question will be tackled in the venous interventions track – a Hot Topic Symposium will deliberate on whether or not the ATTRACT trial changes DTV management practice. This track, with several diverse sessions, also offers a Clinical Evaluation Course on ilio-femoral venous stenting, and a Case-Based Discussion on venous mishaps, disasters and salvage approaches.

New for 2019, a PAD micro-track will take place on the first day of the congress, aiming to highlight the current technologies, controversies and real-world applications of PAD management. As PAD currently impacts more than 200 million people worldwide, the role that IR plays has become essential. Several facets of this topic will be explored throughout the track – a Hot Topic Symposium will address the matter of recent questions surrounding drug-eluting technologies, giving an overview of current literature and evidence on the issue as well as providing room for discussion. Focus Sessions will feature the evolution and outstanding questions regarding technologies and techniques in PAD, and the real-world management of both claudication and critical limb ischaemia will be highlighted. Additionally, a new Free Paper Session, First@CIRSE, will feature the first data releases of several PAD trials and studies.

“Attending the PAD Day will give participants the opportunity to dive deep into discussion of the most important concepts surrounding the femoropopliteal and BTK areas. At the end of the day, you will most certainly have improved your knowledge and expertise in this ever-important field.”

Prof. Fabrizio Fanelli

With this year’s release of the European Curriculum and Syllabus for Interventional Oncology, as well as the expansion of IO in the European Curriculum and Syllabus for Interventional Radiology, it’s only appropriate that interventional oncology, perhaps the fastest-growing branch of IR, should comprise a bigger-than-ever component of CIRSE 2019. A host of sessions will examine immunotherapy,
cholangiocarcinoma, renal cell carcinoma and HCC. Additionally, a Hot Topic Symposium will ask if renal tumour ablation is ready for prime time.

Further tracks include embolisation, non-vascular interventions, neurointerventions and IR management, all offering hours of multifaceted and innovative education opportunities.

Something for everyone

Not only does the programme cater to specific clinical interests, it also provides something for IRs at every stage of their career, from experts with decades of experience to students who have not yet made the decision to specialise in IR.

The European Trainee Forum (ETF) organises several IR trainee sessions, designed with the needs of trainees, residents and young IRs in mind. These sessions cover practical issues related to beginning a career in IR, as well as basic IR topics. Furthermore, in an effort to get students interested in IR, the CIRSE Student Programme will continue to allow European medical students to attend the congress free of charge, enabling them to learn more about the field through recommended scientific sessions and hands-on device training simulation sessions. Both the ETF and Student Programmes will feature plenty of networking opportunities for participants, both amongst their peers and with experts.

Throughout the congress, communication and exchange are key. As the largest IR meeting in the world, the congress also serves as a single point from which to network, exchange and connect with an unparalleled number of experts in IR. Though the sessions may be watched online at any time, this human aspect of the congress can never be captured remotely.

Welcome to Barcelona

CIRSE 2019 will return once again to the Barcelona International Convention Centre (CCIB). Located right on the seafront, the location is ideal. The bright, open spaces and ample meeting rooms will be familiar to returning delegates and welcoming to new ones, providing the backdrop for what looks to be the most exciting CIRSE congress to date.

We look forward to seeing you soon!

Elizabeth Wenzel, CIRSE Office
For the fifth consecutive year, the CIRSE Annual Congress will host the popular Interdisciplinary Endovascular Aortic Symposium (IDEAS). This “congress within a congress” will offer a multidisciplinary forum for various stakeholders to explore and discuss the current status of various aortic interventions and to evaluate where the field is heading. Over the course of the last four years, this congress has flourished from a small gathering of enthusiastic experts into a truly collaborative, interdisciplinary event, offering insight into the most current hot-topic issues and the latest clinical data in the endovascular aortic field. Plus, its seamless integration with the annual CIRSE congress allows attendees to easily combine both meetings!

At CIRSE 2019, IDEAS will feature a full programme of sessions highlighting the hottest topics in IR related to EVAR/TEVAR, and the renowned faculty will guide discussions on the controversies while using an interdisciplinary approach. Of particular interest, the Focus Session, The NICE guidelines: nice or not so nice?, will take an in-depth look at the guidelines from the UK's National Institute for Health and Care Excellence on abdominal aortic aneurysm, examining problems and implications for the future of EVAR. Additionally, at this year’s Hot Topic Symposium, leading experts will give a detailed overview of various aspects of EVAR durability, looking at new technologies and attempting to answer how IR can reduce stent graft migration and improve long-term outcomes, before opening the floor to a panel discussion.

Those attending CIRSE 2019 will have unrestricted access to this exciting scientific stream which, along with the arterial and venous tracks, makes up a comprehensive endovascular programme at this year’s congress.

IDEAS Training Village

In addition to the extensive scientific programme, IDEAS 2019 will also include the ever-popular IDEAS Training Village. This dedicated open-forum area offers physicians the chance to engage with leading technologies and devices in the field of thoracic and abdominal aortic treatments by giving delegates the chance to handle exhibitor’s devices and improve their stent graft placement skills on special hands-on training models. Workshops will cover specific devices and techniques in order to provide a thorough understanding of the treatment procedure, pre-operative planning, device usage and post-operative management.

The Training Village provides an ideal platform for attendees to liaise with the industry and get to know all the latest devices in industry workshops featuring presentations, hands-on training, tips and tricks, and information on proper usage of the devices. Workshops will be held from Sunday through Tuesday, and as participation is limited, we recommend registering early!

With such a jam-packed Training Village schedule to complement the comprehensive IDEAS Programme, there is sure to be a plethora of unique opportunities to hone both knowledge and skills at this year’s meeting in Barcelona.

Check out the detailed IDEAS Programme and the Training Village workshops being offered at www.aorticideas.org

Emily Beaven, CIRSE Office
CIRSE MEETS...

The “CIRSE meets...” programme has proved to be an important platform for establishing and strengthening the relations between CIRSE and other societies in the field of interventional and vascular therapy.

CIRSE meets... APSCVIR

At CIRSE 2019, CIRSE will come together with the Asia Pacific Society of Cardiovascular and Interventional Radiology (APSCVIR) for one of this year’s two “CIRSE meets...” sessions. This society is comprised of 16 different member societies, promoting IR practice, education and awareness throughout the Asia-Pacific region.

In February 2019, CIRSE was a guest in Bali at APSCVIR’s 14th annual meeting, which supports the exchange of IR knowledge throughout their region. Several members of the CIRSE Executive Board were on hand, moderating sessions and giving lectures and workshops, not least during the dedicated “APSCVIR meets CIRSE” session. Additionally, former CIRSE President and CVIR Endovascular Editor-in-Chief, Prof. Jim Reekers, was presented with an APSCVIR honorary membership in recognition of his contributions to the field and his support of APSCVIR.

CIRSE President Robert Morgan also travelled to Myanmar in January to represent CIRSE in two interventional radiology educational outreach workshops organised by senior APSCVIR members as part of their society’s outreach programme. Many IRs were able to benefit from these workshops, and clinicians from other specialities were invited to attend lectures and live cases. Interventional radiology is not well developed in Myanmar, largely due to financial challenges. Equipment is expensive, and most local IRs have never had the opportunity to attend a major IR congress. This kind of outreach is, therefore, essential in spreading IR throughout the globe and ensuring that IRs in remote or developing areas are able to stay abreast of current advances in the field.

Plans for further collaboration with APSCVIR for outreach programmes in South-East Asia are already in the works for 2020.

As for the rest of 2019, the roles played in Bali will be flipped when APSCVIR comes to Barcelona for a “CIRSE meets” session at the annual congress.

Presenters from several Asian-Pacific countries will cover a host of interesting topics; Dr. Chang Won Kim of Korea will speak on interventional radiology for the management of trauma patients, while Dr. Terumitsu Hasebe of Japan will talk about new developments in TACE, specifically super-selective and balloon-assisted TACE. Finally, Dr. Kyaw Zay Ya will provide insight on working in medicine in a developing country by sharing his experiences setting up an IR practice in his home country of Myanmar.

CIRSE and APSCVIR have built a strong relationship and have provided each other with valuable contributions throughout the years. This “CIRSE meets...” session is sure to continue this pattern as we work towards a common goal of spreading IR throughout the world.

Elizabeth Wenzel, CIRSE Office

The roles played earlier this year in Bali will be flipped when APSCVIR comes to Barcelona for a “CIRSE meets” session at the annual congress.
All undergraduate students are welcome to join the CIRSE community!

As of May, undergraduate medical students are invited to apply for CIRSE Student Membership and stay connected with CIRSE throughout the whole year. CIRSE Student Members can stream videos from past CIRSE congresses on the CIRSE Library free of charge, purchase CME-certified online courses through the CIRSE Academy at a significantly reduced fee and benefit from free access to the CVIR journal. CIRSE is looking forward to receiving numerous applications and welcoming students to the CIRSE family!

IR Curriculum for Medical Students – out now!

CIRSE Treasurer Prof. Christoph Binkert has worked alongside CIRSE Task Force members to create a new version of the IR Curriculum for Medical Students, which was initially published in 2012. The revised curriculum highlights the main areas of IR and outlines a variety of the most common clinical conditions routinely handled by IRs. The aim of the curriculum is to support medical students who are planning to pursue a career in IR, as well as those who may participate in a multidisciplinary approach to patient care in the future. Additionally, students can enjoy videos based on real IR cases which are meant to supplement the newly revised IR Curriculum.

The videos can be downloaded at www.cirse.org/education/european-curricula/

Getting ready for CIRSE 2019...

This year’s CIRSE Student Programme is looking to be more popular than ever and will welcome a record number of students from across Europe. So far, over 400 students from different European countries have registered for the Student Programme, most of them coming from Romania, Hungary, Poland or Italy. As in previous years, the Student Programme will feature an IR lecture, where members of the CIRSE leadership will introduce students to the field of IR and inform them about its applications in modern medicine.

By attending the Mentoring Breakfast at CIRSE 2019, students will be able to learn more about training and career opportunities in European countries. This event will allow students to meet and speak with young as well as senior IRs, and might perhaps be the pivotal point in their decision to pursue a career in IR!

In order for students to gain hands-on experience, they will be invited to attend one of the planned Hands-On Device Training sessions, Simulation Sessions or Learning Centre Workshops organised by CIRSE’s industry partners.

As a special feature for this year, the Student Programme will introduce a “Students on Stage” session, where six students who submitted exemplary abstracts will present their work to their peers.

Students at CIRSE 2019 will also have a chance to prove their knowledge gained during the congress by attending the Students’ Quiz. Additionally, they can look forward to a social event as well as several contests tailored especially to them.

CIRSE strongly encourages those involved in undergraduate education to make sure their students are aware of these opportunities – let’s attract Europe’s brightest and best to the field of IR!
The European Trainee Forum's 2019 Activities

The ETF Subcommittee tailors ETF activities according to feedback from their home countries, building a European network of young IRs within CIRSE.

This year as every year, the ETF Subcommittee met at the ECIO congress in order to discuss their current projects and the ETF activities planned for the upcoming CIRSE congress.

Currently, the Subcommittee is composed of 26 members, coming from 25 European countries, who are actively working on tailoring the European Trainee Forum activities according to the feedback from their home countries. One of the primary goals of the ETF is to bring together all young IRs-in-training and build a European network within CIRSE in order to help young IRs pursue their future career.

Supporting IRs-in-training at CIRSE 2019

In order to support attendance of young IRs at the annual CIRSE congress, CIRSE has again, with support of Guerbet, initiated the IR Trainee Support Programme which will allow CIRSE Junior Members who submitted an abstract for this year’s congress to attend CIRSE 2019 free of charge. We already look forward to welcoming more than 160 IRs-in-training who will benefit from this initiative!

Additionally, radiology residents or fellows from Europe, who are younger than 35 and are presenting authors of a paper or poster which was accepted for presentation at CIRSE 2019, can apply for one of the ten travel grants which are kindly provided by the Rolf W. Günther Foundation for Radiological Sciences.

What to look forward to at CIRSE 2019

As in previous years, the ETF will offer many educational sessions, informative short talks and fun networking events. All trainees, residents and young IRs are invited to attend the IR Trainee Sessions, which will be on topics including future IR technologies, building an IR career, clinical practice, working with medical devices or building a start-up as an IR. Furthermore, after the success at last year’s congress, the ETF will again offer Short Talks which will be divided into three days according to topic. Congress attendees can look forward to learning more about clinical and academic opportunities in and outside the EU, receiving practical career advice or getting some insight on how to use social media to promote IR and their practice. Last but not least, trainees will have a chance to socialise together during the networking event and also prove their knowledge by attending the ETF Quiz.

CIRSE Junior Membership

Help us spread the word about CIRSE Junior Membership among your colleagues! Junior Members can benefit from reduced membership and registration fees as well as the opportunity to apply for CIRSE support programmes. For more information, please visit www.cirse.org/trainees.

Romana Šumpichová, CIRSE Office

Junior Members who submitted an abstract for this year’s congress are eligible to attend CIRSE 2019 free of charge.
The 2019 Radiation Protection Pavilion will feature a comprehensive programme of timely and relevant Radiation Safety Talks.

Addressing the burning issues in radiation protection

Since the creation of the Radiation Protection Subcommittee in 2012, Subcommittee Members have made countless contributions to the field of interventional radiology, raising awareness about the risks of occupational radiation for IRs. Year after year, the Radiation Protection Pavilion (RPP) has provided an optimal space at CIRSE’s annual meeting to increase understanding about these risks through an interactive and engaging programme. With 30 interesting Radiation Safety Talks led by various experts in the field, the 2019 programme will be no exception! This year, the Radiation Protection Subcommittee will bring even more experts to the table and seek engagement with other societies.

Under the theme, “Burning issues in radiation protection: critical dose levels and substantial radiation dose”, the RPP 2019 will provide important insights into the transposition process and impact of the Basic Safety Standards Directive, a hot topic for all medical professionals working under ionising radiation. The Radiation Protection Subcommittee is also excited to announce that as a new feature this year, three RPP speakers will receive a travel grant to attend the congress in order to facilitate discussions about this important topic. The Subcommittee hopes this will encourage even more IRs to get involved in the initiative and lead to expanded discourse on the subject.

2019 Programme Highlights

As in previous years, the 2019 Programme will cover a wide range of scientific radiation safety topics and will dive deep into discussions about future directions of radiation protection in fluoroscopy-guided interventions, as well as unintended exposures, critical dose levels and substantial radiation doses. Other key topics covered in the Radiation Safety Talks include electronic occupational dosimetry, radiation protection lead caps, IAEA perspectives on protection, fusion imaging, the role of artificial intelligence and much more!

Attendees will also have the chance to discuss and explore the latest products for protection and dose management with industry partners, who will share their experiences on the potential application of validated tools and discuss how behaviour within the interventional lab can impact dosage and monitoring. Industry partners will not only lead various Radiation Safety Talks, but will also be on hand each day of the congress to discuss the various tools available and answer any questions.

Live Radiation Safety Talks will explore topics such as critical dose levels, unintended overexposure and the future directions of radiation protection.
Strong industry support also gives visitors a chance to speak with vendors face to face and learn about the latest optimisation technologies available.

The Radiation Protection Pavilion is supported by:

- BIOTRONIK Zero-Gravity
- BRACCO, Simbionix
- 3D Systems
- CAScination AG
- DRGEM Corporation
- EurosafE
- Kinepict Health Ltd
- MAVIG GmbH
- MDT Xray
- Philips, Mentice
- RADPAD Radiation Protection
- Siemens Healthineers
- Tecres Spa
- Unfors RaySafe AB

We look forward to seeing you at the 2019 Radiation Protection Pavilion in Barcelona!

For more information or to check out past RPP sessions, please visit: www.cirse.org/education/radiation-protection/

Emily Beaven, CIRSE Office

Upcoming EBIR examinations:

- March – ECR 2020
- September – CIRSE 2020

The EBIR is a globally recognised certification designed to give practising interventional radiologists the opportunity to certify their expertise and build their career from early on.

For more information, please visit our website www.cirse.org/ebir or contact us at ebir@cirse.org
CIRSE is committed to providing all conference delegates with a good space for education and interaction – this, of course, extends to hotel stays. In order to get the most of your time in Barcelona and guarantee high-quality service, we encourage all delegates coming to CIRSE 2019 to book their accommodation with CIRSE’s official travel partner, Kuoni Congress. Kuoni has secured a broad selection of hotel rooms throughout Barcelona, ensuring that congress-goers will find just what they’re looking for.

Listed is a selection of special hotel offers that Kuoni has secured especially for CIRSE 2019 delegates. These special rates are reflected in the booking tool.

Booking hotel rooms through other companies is not recommended. We urge all delegates to be cautious when receiving unsolicited offers for the provision of hotel rooms and other services for CIRSE 2019, as these can be fraudulent and CIRSE cannot accept any responsibility for adverse bookings made through unofficial websites.

To learn more about how to receive educational grants to help with your travel and congress costs, please visit the educational grants section at www.cirse.org

Choose from a selection of special hotel offers for CIRSE 2019 offered by our trusted travel partner, Kuoni Congress!
The CIRSE Library offers users more than just an extensive IR database – it also offers monthly educational packages and live-streaming from CIRSE events.

The CIRSE Library – a dynamic resource for the IR community

CIRSE’s online educational database has been a key educational resource for well over a decade, first as the ESIRonline platform and now as the CIRSE Library. All members have access to a wealth of presentations and posters from our many meetings (dating back to 2014, to ensure clinical relevance), letting you peruse the most recent information on the clinical topic of your choice at a time that suits you.

Topic packages

This vast cache of knowledge can be difficult to navigate for those unfamiliar with the platform, and so the Online Education Committee began producing monthly clinical topic packages. These are expertly curated by the committee members (all renowned experts in their fields), and comprise the most relevant presentations on the subject from recent meetings, as well as international guidelines or standard of practice documents.

Our most recent packages include:

- MSK curative treatment (featuring an expert video from ECIO 2019)
- Emergency in oncology (featuring an expert video from ECIO 2019)
- Safe sedation
- DCB in lower limb

Benefits for the IR community

The Library is widely used by our members, and the most popular sessions watched in June were:

1. CIRSE 2018 – Advances and benefits of virtual reality in endovascular repair
2. ET 2019 – Prostate artery embolisation, how to secure our practice
3. ECIO 2019 – Superior vena cava syndrome
4. ET 2019 – Case discussions: trauma & elective
5. CIRSE 2018 – Uterine artery embolisation

The Library serves as more than an archive; it also plays host to CIRSE’s live-streaming activities, with those unable to attend CIRSE or ECIO meetings able to log in remotely to join us for some of the essential sessions.

The new ET meeting was no different, with ET 2019 lectures being live-streamed, and lectures available within the library database within 24 hours of having taken place.

The CIRSE Library – an active space for IR learning.

All CIRSE Members have complimentary access – make sure you’re making the most of yours!
CIRSE’s commitment to expanding undergraduate exposure to interventional radiology goes beyond the congress-centred student programme – a brand new curriculum should help raise awareness of IR career options.

Tackling the under-representation of IR in medical education

Interventional radiology (IR) is an evolving field that is taking an ever-more prominent role in hospital medicine. As a result, more positions have been opening up for IRs in hospitals around the globe. However, it is becoming increasingly apparent that the demand for IRs is beginning to exceed the number of medical students specialising in IR. A growing body of evidence suggests that this widening gap is due to the under-representation of IR in undergraduate medical programmes and curricula [1].

In a 2019 article, it was recognised that in many cases radiology teaching in university focuses on diagnostic radiology, therefore undergraduates’ introduction to practical IR interventions was often indirect or coincidental [2]. This is supported by a paper produced by the European Society of Radiology which highlighted that across European universities, the distribution of average teaching time varied greatly between radiology topics. For example, where radiology of diseases, radiological anatomy and radiological techniques were allocated 40 hours, 17.5 hours and 13.7 hours respectively, students only received 5.3 hours of IR teaching on average [3].

In many cases, students leave undergraduate training underinformed about the level of patient interaction involved in IR and the range of medical conditions that can be treated using minimally invasive techniques. In 2017, a report showed that out of 167 students trained in two medical institutions in England, 55.5% of students felt that their knowledge of IR was poor compared to other specialities [4]. Similarly, in a study of 729 American medical students, less than 50% of respondents could correctly answer IR domain-related questions [5].

Raising the profile of IR is a very achievable task. As part of a wider effort to engage with undergraduates, CIRSE has produced an IR Curriculum for Medical Students, which is designed to introduce students to the most common conditions handled by IRs early in their careers. This will not only increase awareness of IR as a future career option, but also benefit students who will go on to participate in a multidisciplinary approach to patient care in the future. To reach as wide an audience as possible, CIRSE has made the curriculum freely available. To ensure it also reaches students who are not already aware of IR, we would like to ask all practicing IRs to spread the word and encourage undergraduates to start learning about the possibilities this discipline holds!

Download the IR Curriculum for Medical Students today: www.cirse.org/curricula

Megan Leahy, CIRSE Office
Raising the profile of IR, increasing awareness of it as a future career option, is a very achievable task.

References


The CIRSE Academy provides comprehensive knowledge on IR procedures through online courses based on the European Curriculum and Syllabus for IR. The courses have been carefully compiled by leaders in the field, with over fifty well-respected interventional experts contributing their time and knowledge to this momentous project.

Each course takes 1-2 hours to complete and includes texts, graphics, videos and a quiz to test your knowledge. Your 90-day access allows you to review content and take the test as many times as you like. To complete the course, pass the final quiz with 70% and fill out a quick feedback form! This earns you up to two CME credits and a certificate, which is available for you to download in the Academy and myCIRSE area.

A Herculean task

All online courses go through a rigorous process of drafting and three review cycles with re-drafting before seeking UEMS accreditation. The selected authors are leaders in their respective IR fields and all reviews are supported by members of the CIRSE Online Education Committee. By seeking UEMS accreditation for all courses, the highest standard of online medical education is ensured and learners are rewarded for their successful completion of the course.

The CIRSE Academy has the honour of repeated support from outstanding authors of previous online courses. Amongst the notable authors having authored a second round of online courses are Krzysztof Pyra, Roberto Cazzato and Sara Protto – rising stars in their respective fields.

There are also several Online Education Committee members who have taken on the incredible task of both reviewing as well as producing online courses for the Academy. These authors are Antonin Krajina, Dimitrios Filippiadis, Dimitrios Tsetsis, Frédéric Deschamps, Giovanni Mauri, Maria Tsetskari, Michael Deutschmann, Raman Uberoi and Stefan Müller-Hülsbeck.

Amongst the most popular courses thus far are:

- Biliary drainage and stenting
- Fundamentals of PTA and stenting for peripheral arterial disease
- Management of acute arterial gastro-intestinal haemorrhage
- Hepatocellular carcinoma
- Vascular access and closure

New releases

The CIRSE Academy is expanding. Since the launch of the initial 14 courses in November 2018, another 9 courses have been released within the first months of 2019. This also expands the CIRSE Academy’s repertoire to include the topic of neurointervention. With a total of 26 courses stratified into 7 clinical topics, the CIRSE Academy is the ideal tool to attain essential IR knowledge and prepare for the EBIR exam.

Be at the forefront of IR with these brand-new online courses in the Academy:

- Prostate artery embolisation (Embolisation)
- Carotid artery angioplasty (Arterial Intervention/Neurointervention)
- Percutaneous vertebral augmentation procedures (Non-Vascular Intervention)
- Stroke (Neurointervention)
- EVAR (Aortic Intervention)
- Vascular trauma (Embolisation)
- Central venous access (Venous Intervention)
- Image-guided pain management (Non-Vascular Intervention)

and many others!

Be the best IR you can be and cover all your bases with CIRSE Academy courses!

Courses are available to all learners and come at a reduced fee for CIRSE members. For more information please visit the CIRSE website: www.cirse.org/education/academy/

Mara Urlicic, CIRSE Office
Reduce microspheres reflux¹. Go with the flow.

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