

3/2022

SOCIETY

MEETING

EDUCATION

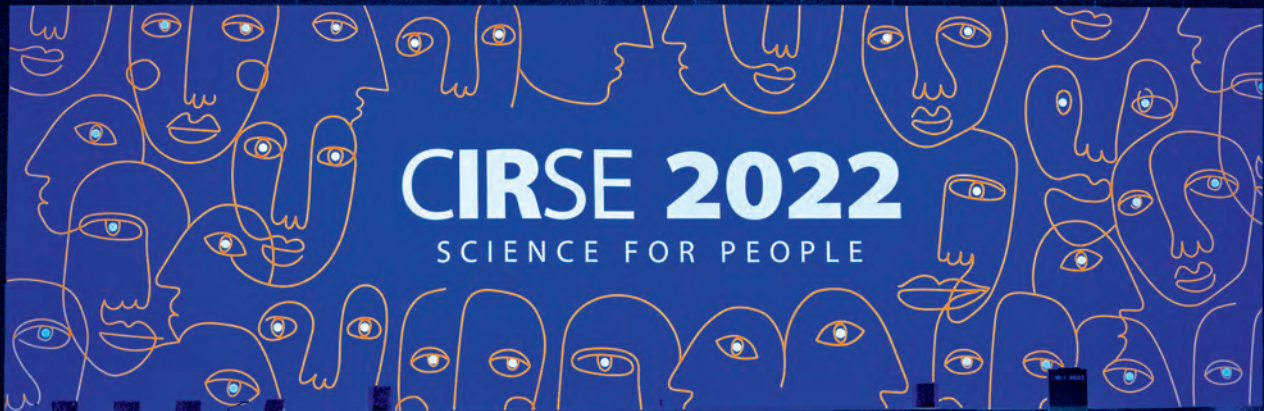
IASIOS
continues
to grow

A look back
at CIRSE 2022

The new
EBIR Council

Cardiovascular and Interventional Radiological Society of Europe

news



**THANK YOU
FOR ATTENDING!**

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IR's future is bright, and there's so much to look forward to in 2023!



Dear colleagues and friends,

It has only been a few short months since Afshin Gangi handed the reigns of the CIRSE presidency to me in Barcelona. I would first like to thank my colleagues and our society for their support; it will be an honour to serve as CIRSE's president for the next two years.

As a community, we stand to exit the pandemic stronger than ever before. Membership numbers continue to grow, as do our initiatives and educational offerings. There is so much to look forward to in 2023 and beyond!

Science for people – in person!

CIRSE 2022 was a great success, with more than 5,000 attendees returning to Barcelona for our first in-person CIRSE since 2019, and a few thousand more joining us online. It is not always easy, even at the best of times, for physicians to find the time and resources to attend a congress. It's therefore a mark of how essential our congresses have become to the IR community that our first year back with in person meetings has been such a resounding success. Flip to page 16 for a small look back at CIRSE 2022!

New committees, new ideas

September's General Assembly marked the start of term for all newly elected members of the executive and standing committees, and these teams are already in action building upon the exemplary work of the outgoing committees. Flip to page 30 to hear from the new chairs of the EBIR Council, and page 22 for more on what we can expect for the future of ECIO.

Research, accreditation, education

So many of CIRSE's initiatives have flourished over the course of 2022. Next Research, CIRSE's contract research organisation, continues to enrol patients, collect data, and has now closed out CIRT and CIRT-FR – flip to page 10 to learn more.

IASIOS, the International Accreditation System for Interventional Oncology Services, also thrived in 2022. Now officially supported by 40 societies worldwide, 2023 looks to be an exciting year for IASIOS, where almost all corners of the globe will feature accredited centres. More on that on page 8!

Programmes for trainees and students were back in full swing this year (page 19) and our online educational content offered through the Library, Academy, and Webinars continued to grow (page 26).

ESIR, the European School of Interventional Radiology, has also enjoyed a triumphant return this year, most recently with a course on radioembolisation of liver tumours and another on hands-on liquid embolisation, both taking place in November. Turn to pages 14 and 29, respectively, for more on these two courses and for a look at what is coming up next!

IR has become a true clinical field with practitioners not only performing procedures, but also caring about the patients beforehand and afterwards. In order to support clinical services, a special taskforce has been founded with the goal of further enhancing this important part of a modern IR practice. You will surely hear more about it during the next two years.

CIRSE's future and the future of IR as a whole look very bright – I wish you all a happy holiday season, and an excellent start in the new year. I look forward to seeing you in 2023!

Christoph Binkert
CIRSE President

This year's General Assembly ushered in a new era with the start of term for CIRSE's newly elected committee members.

The 2022 General Assembly

The CIRSE 2022 General Assembly took place on the evening of September 12 in Barcelona, Spain, during the CIRSE annual meeting.

CIRSE's outgoing president, Afshin Gangi, opened the ceremony and welcomed the participants, thanking them for taking part in the first in-person General Assembly to take place since 2019. He gave an overview of the past years of his presidency, which were dominated by the pandemic but nevertheless productive for CIRSE as a society.

Prof. Gangi expressed his gratitude to the "avatar" programme chairpersons who were involved in the planning of all CIRSE events over the past three years and contributed to the success of all meetings. He also expressed his gratitude to all EB and EC members for the support, commitment and great collaborative spirit in these most difficult times. He emphasised that despite all challenges, the society emerged from the pandemic even stronger than before; membership continues to grow.

He then spoke about some of the crowning achievements of the society over the last years – a significant number of standards of practice documents were published in 2020 and 2021, the European Board of Interventional Radiology was transformed into an online exam offered in multiple languages, and CIRSE's online educational footprint grew exponentially. The society also developed a bigger focus on further building up the evidence base of IR with the establishment of Next Research – a major milestone.

Beyond these topics, Prof. Gangi briefly presented other important projects that were realised over the past two years, including IASIOS' successful pathway to date, the introduction of the European Certification for Endovascular Specialists, the activities of the ETF Subcommittee and students community, the translation of the patient information leaflets in various European languages, the ongoing Radiation Protection projects and the establishment of several task forces.

Updates from CIRSE's Journals

Klaus Hausegger, editor-in-chief of CVIR, reported on the recent developments of the journal. Under the new slogan "CVIR – the global home of IR," many efforts have

seen fruition over the last year, including new and more diverse representation on the editorial board, as well as the addition of musculoskeletal and neurointerventional sessions.

CVIR's impact factor has significantly increased over the last years, due in part to an increase in both citations and source items.

CVIR Endovascular Editor-in-Chief Jim Reekers then took the stage to highlight the achievements of CIRSE's open access, multidisciplinary journal. It has been five years since the founding of the journal, and the 2021 submission rates were in line with pre-pandemic rates, a trend that has remained so far in 2022. Submissions have been stable and the journal enjoys global authorship, with submissions from 30 countries around the world so far.

The new executive and standing committees

Prof. Gangi then returned to the stage to introduce the newly elected members of the executive and standing committees, elections for which were held earlier in the year. He then conferred the CIRSE presidency to Christoph Binkert, wishing him all the best for his term in office.



Prof. Binkert thanked the outgoing committee members for their excellent work and spoke a bit about his goals for the society in the coming years before closing the assembly.

Check out CVIR's most recent special section for everything you need to know on radioembolisation!

Special section dedicated to radioembolisation



The November issue of CVIR features a special section on radioembolisation, curated by Professors Laura Crocetti and Thierry de Baere.

The special edition editors commissioned nine articles which they say "cover the most recent knowledge and scientific evidence about radioembolisation techniques, patient selection and clinical outcomes."



Prof. Laura Crocetti and Prof. Thierry de Baere

In their editorial for the special section, the guest editors conclude "A lot has been learnt in terms of dosimetry and patient selection, and this supplementary issue of CVIR will provide the reader with valuable information. Radioembolisation is alive and well!"

Enjoy reading the articles!

CVIR



Share this special section on your social media profile!

Radioembolization: Same Player Shoots Again

Thierry de Baere & Laura Crocetti

Role of Transhepatic Arterial Radioembolization in Metastatic Colorectal Cancer

Irene Bargellini, Elena Bozzi, Giulia Lorenzoni, Giuseppe Boni, Francesca Bianchi, Claudio Antonio Traino, Gianluca Masi, Roberto Cioni & Laura Crocetti

Role of Radioembolization in Metastatic Neuroendocrine Tumors

Robert J. Lewandowski, Beau B. Toskich, Daniel B. Brown, Ghassan El-Haddad & Siddharth A. Padia

TARE in Hepatocellular Carcinoma: From the Right to the Left of BCLC

Boris Guiu, Etienne Garin, Carole Allimant, Julien Edeline & Riad Salem

Trans-arterial Radioembolization Dosimetry in 2022

Etienne Garin, Boris Guiu, Julien Edeline, Yan Rolland & Xavier Palard

SIRT in 2025

Francesca Romana Ponziani, Francesco Santopaolo, Alessandro Posa, Maurizio Pompili, Alessandro Tanzilli, Marta Maestri, Maria Pallozzi, Francesca Ibba, Riccardo Manfredi, Antonio Gasbarrini & Roberto Iezzi

Holmium-166 Radioembolization: Current Status and Future Prospective

Martina Stella, Arthur J. A. T. Braat, Rob van Rooij, Hugo W. A. M. de Jong & Marnix G. E. H. Lam

Transarterial Radioembolization to Impact Liver Volumetry: When and How

Arash Najafi & Christoph A. Binkert

The Role of Catheter-Directed CT-Angiography in Radioembolisation

Kun Da Zhuang, Aaron Kian-Ti Tong, David Chee Eng Ng & Kiang Hiong Tay

Overview of Ongoing Clinical Trials on Radioembolization

Matthias P. Fabritius & Jens Ricke

Dedicated reviewers and authors who submit high-quality, innovative, and thought-provoking papers are the backbone of scientific progress.

CVIR and CVIR Endovascular awards ceremony and reception

On the occasion of CIRSE 2022 in Barcelona, the editors-in-chief of CVIR, Prof. Klaus A. Hausegger, and CVIR Endovascular, Prof. Jim A. Reekers, proudly continued a tradition of awarding the best-performing articles and reviewers for their outstanding service and exceptional contributions to the journals in 2021.

Dedicated reviewers and passionate authors who submit high-quality, innovative, and thought-provoking papers are the backbone of scientific progress. Both CVIR and CVIR Endovascular would like to thank all authors and reviewers for their work over the past year, and although we cannot recognise all authors and reviewers individually, their support does not go unnoticed!



Editors' Medal 2022

Genicular artEry embolization in patiEnts with oSteoarthritis of the Knee (GENESIS) Using Permanent Microspheres: Interim Analysis
Mark W. Little, Matthew Gibson, James Briggs, Archie Speirs, Philip Yoong, Timothy Ariyanayagam, Nev Davies, Edward Tayton, Shawn Tavares, Sarah MacGill, Cameron McLaren & Richard Harrison

Most cited article: clinical investigation

Clinical Application of Trans-Arterial Radioembolization in Hepatic Malignancies in Europe: First Results from the Prospective Multicentre Observational Study CIRSE Registry for SIR-Spheres Therapy (CIRT)
Thomas Helmberger, Rita Golfieri, Maciej Pech, Thomas Pfammatter, Dirk Arnold, Roberto Cianni, Geert Maleux, Graham Munneke, Olivier Pellerin, Bora Peynircioglu, Bruno Sangro, Niklaus Schaefer, Niels de Jong & José Ignacio Bilbao & On behalf of the CIRT Steering Committee & On behalf of the CIRT Principal Investigators



K. Hausegger, N. de Jong and T. Helmberger

Most cited article: laboratory investigation

Comparison of Smartphone Augmented Reality, Smartglasses Augmented Reality, and 3D CBCT-guided Fluoroscopy Navigation for Percutaneous Needle Insertion: A Phantom Study
Dilara J. Long, Ming Li, Quirina M. B. De Ruiter, Rachel Hecht, Xiaobai Li, Nicole Varble, Maxime Blain, Michael T. Kassir, Karun V. Sharma, Shawn Sarin, Venkatesh P. Krishnasamy, William F. Pritchard, John W. Karanian, Bradford J. Wood & Sheng Xu



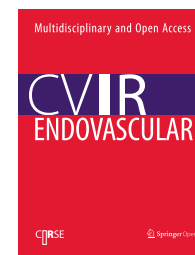
K. Hausegger and B. Wood

Most cited article: Technical note

Percutaneous Ultrasound-Guided Superior and Inferior Mesenteric Vein Access for Portal Vein Recanalization–Transjugular Intrahepatic Portosystemic Shunt: A Case Series
Pouya Entezari, Ahsun Riaz, Bartley Thornburg & Riad Salem

JOURNALS

The tireless support of all authors and reviewers is noted and appreciated!



Most cited article: Review article

Systematic Review and Meta-analysis Comparing Prostatic Artery Embolization to Gold-Standard Transurethral Resection of the Prostate for Benign Prostatic Hyperplasia
Gabriel M. Knight, Abhinav Talwar, Riad Salem & Samdeep Mouli



K. Hausegger and R. Salem

Article with the best media performance

First Clinical Results of the Merit WRAPSODY™ Cell-Impermeable Endoprosthesis for Treatment of Access Circuit Stenosis in Haemodialysis Patients
James Gilbert, Jason Rai, David Kingsmore, John Skousen & Nikolaos Ptohis



K. Hausegger, N. Ptohis and J. Gilbert

Most cited article: CIRSE Standards of Practice

CIRSE Clinical Practice Manual
Andreas H. Mahnken, Esther Boullosa Seoane, Alessandro Cannavale, Michiel W. de Haan, Rok Dezman, Roman Kloeckner, Gerard O'Sullivan, Anthony Ryan & Georgia Tsoumakidou



K. Hausegger and A. Mahnken

Most downloaded article

Endovascular Treatment for Acute Basilar Artery Occlusion: A Comparison of Arteriosclerotic, Embolic and Tandem Lesions
Wenjin Yang, Lei Zhang, Zifu Li, Yongxin Zhang, He Li, Weilong Hua, Jianan Li, Hongjian Zhang, Hongjian Shen, Pengfei Xing, Yongwei Zhang, Bo Hong, Jianmin Liu & Pengfei Yang

Outstanding service to the journal for the most reviews carried out in 2021:

Kyung Cho, University of Michigan/US
Hyeon Yu, University of North Carolina/US
Sean Kennedy, University of Toronto/CA





> **Most downloaded article**

Renovascular hypertension in children
Premal Amrishkumar Patel & Anne Marie Cahill



Prof. Jim Reekers and Dr. Premal Patel

Article with the best media performance

"Pigtail through snare" technique: an easy and fast way to retrieve a catheter fragment with inaccessible ends
Kensaku Mori, Chika Somagawa, Shun Kagaya, Masafumi Sakai, Satoshi Homma & Takahito Nakajima



Professor Jim Reekers and Prof. Kensaku Mori

Outstanding service to the journal for the most reviews carried out in 2021

Vincent Helyar
Hampshire Hospitals Foundation Trust, UK

Stavros Spiliopoulos
"ATTIKON" University General Hospital, Greece



Prof. Jim Reekers and Prof. Stavros Spiliopoulos



Prof. Jim Reekers and Dr. Vincent Helyar

Runners-Up

Raymond Chung, Khoo Teck Puat Hospital, Singapore
Francesco Giurazza, Cardarelli Hospital, Italy
Alexander Nath, Queen Elizabeth University Hospital, UK
Rengarajan Rajagopal, All India Institute of Medical Sciences Jodhpur, India
Lakshmi Ratnam, St George's University Hospitals NHS Foundation Trust, UK
Jose Urbano, Ramón y Cajal University Hospital, Spain

CVIR and CVIR Endovascular co-hosted a scientific writing workshop in June ahead of ET 2022.

CVIR scientific writing workshop

Editors-in-chief Jim Reekers (CVIR Endovascular) and Klaus Hausegger (CVIR) were joined by world-renowned IRs including Tiago Bilhim, Laura Crocetti, Refaat Salman and Raman Uberoi, and esteemed scientific writer Dr. John Carpenter for this two-day workshop.



The workshop covered key topics such as effective scientific writing in English, following international guidelines, how to respond to reviewer comments, and many more. Attendees were eligible to earn nine CME credits for taking part in the workshop.



We caught up with one of the workshop attendees, Dr. Usman Mahay (GB) to get his feedback.

What are the benefits of in-person workshops like the scientific writing workshop?

Mahay: It was nice to meet face to face and to have a change of scene! There were also lots of opportunities to interact and network with other attendees and faculty during the breaks. I enjoyed having this open space to interact with peers and share ideas when doing group tasks.

What key takeaways have you been able to apply to your work already?

Mahay: I've been able to apply a lot of the practical advice and tips from both the editors and reviewers; it was great to have their perspectives and just get writing!

What other topics would you like to see in future workshops?

Mahay: I'd like to see more practical sessions on how to review abstracts, and to get a better understanding of writing from a reviewer's perspective.

Which session from the writing workshop did you find most useful (and why)?

Mahay: For me, that was the interactive group Q&A sessions and discussion – this allowed for further practical tips and advice that wasn't already mentioned in the excellent presentations.

We'd like to thank Dr. Mahay again for sharing his perspective, as well as all the workshop attendees for their input and discussions, which made the workshop an engaging and enlightening experience for everyone!



Dr. Usman Mahay (Birmingham, GB)

IASIOS continues to receive global recognition – and is now officially supported by 40 societies worldwide.

IASIOS – A global community taking IO to mainstream cancer care

The International Accreditation System for Interventional Oncology Services (IASIOS) was established to encourage the adoption of quality standards on a global scale, accelerate the development of the field and increase awareness of interventional oncology (IO) treatments and the facilities that offer them. This will allow many more cancer patients to have access to safe and effective minimally-invasive therapies worldwide.

With IO increasingly being included in most major cancer guidelines and the higher demand from both patients and other medical professionals for minimally-invasive treatment options, it is becoming ever more vital that IO centres have the means to certify their expertise as primary clinical care providers and provide documented proof of the safety and quality of their patient pathway.

Global support from societies

This view is backed by medical societies as well. IASIOS has received incredible support from national and international radiology societies worldwide, with an increase of more than 30% in supporting societies this year. Among the new societies supporting the accreditation of IASIOS are those from Africa, Asia, Australia, Italy, Lithuania, New Zealand, Poland, Romania, Serbia, Slovakia, Sweden, Switzerland, the Middle East, and the Philippines. This global, united approach in IR and formal endorsement of IASIOS has greatly enhanced

its credibility and broader adoption. IASIOS is grateful to have received widespread support from 40 national and international radiology societies.

IASIOS expanding and reaching new regions

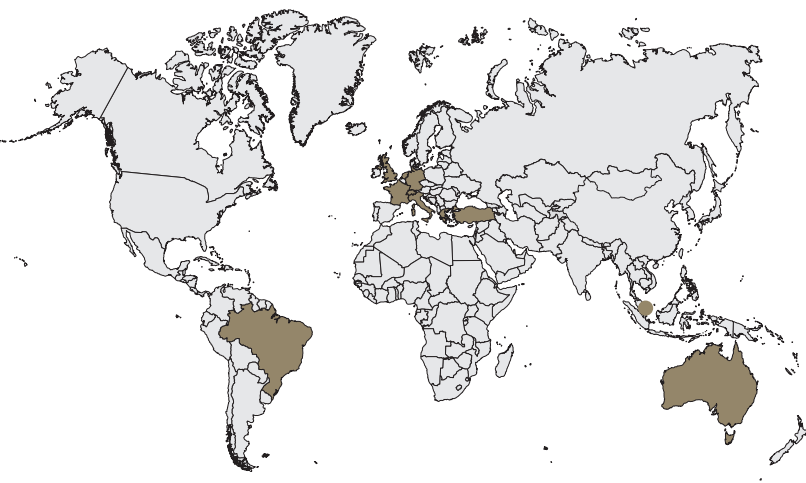
The IASIOS community includes 27 hospitals from the 2022 Newsweek and Statista's World's Best Hospital ranking. Since many of the IASIOS early adopters and supporters are from leading IO hospitals in their respective countries and worldwide, their commitment to providing the highest quality standards of care has garnered attention from the global media and the IO community, reaching new regions and territories. There is no doubt that the programme has been a success, and registrations and accreditations are expected to boom next year. IASIOS has been growing steadily and has tripled this year, with 13 Accredited Centres and more than 30 enrolled and incoming centres.

IASIOS is thrilled to share a significant milestone, as the Hospital Israelita Albert Einstein in Brazil recently became the first hospital in South America to join the community. Several more hospitals from South America have shown interest in joining the community, including new-to-IASIOS countries like Argentina, Colombia, Mexico, and Panama, where we expect to have incoming centres in the following year.





The interest from centres in Asia has also significantly increased, including centres from India, Japan, Malaysia, Singapore, South Korea, Thailand, and Vietnam that are looking to join the IASIOS community after the accreditation of the Singapore General Hospital in Bukit Merah, Singapore. Additionally, IASIOS expects to have its first IASIOS Enrolled Centre in the Middle East by the end of this year, with several hospitals from Egypt, Oman, Qatar, Saudi Arabia, and the United Arab Emirates having already taken the first steps with their administration.



A glimpse into 2023 for IASIOS

With such promising growth and expansion, 2023 looks to be an exciting year for IASIOS, where almost all territories will be reached in person. IASIOS will be present with scientific sessions, 'Ask Me Anything' meetings and more at IROS in Austria and MIOlive in Italy in January, PAIRS in Dubai in February, ECIO in Sweden in April, IRSA in Australia in June, CIRSE in Denmark in September, and more. Stay tuned to our social media channels and keep up to date with all the events and exciting surprises we have planned. If you want to become part of a greater worldwide community of top IO centres, contact the IASIOS team (directly) at office@iasios.org or visit www.iasios.org. We are available to set up a personal consultation!



"It is with great honour that we have received the IASIOS accreditation. The IASIOS team has been tremendously helpful in guiding us through the process. It has been a great learning process as the accreditation process gave us insight in those things that are well organized in our centre as well as the areas that need improvement. The IASIOS helps centres to go from good to excellent!"

Leiden University Medical Centre, the Netherlands



"We are proud to be the first centre in Germany to be certified by IASIOS. During the certification process we were able to further improve our already well-established IO workflows and make sure they are in line with the most recent national and international standards. With the help of IASIOS we are now able to coordinate and monitor our IO services even better to make sure every patient receives the best possible treatment and reaches the best individual clinical outcome."

SLK Kliniken Heilbronn, Germany

The CIRSE Emprint Microwave Ablation Registry (CIEMAR) will continue enrolling patients until January 31, 2023

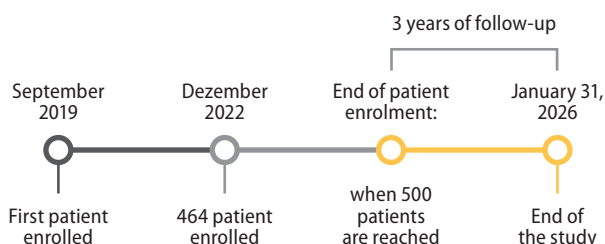
CIEMAR enrolls 464 patients

CIEMAR

CIEMAR is a prospective, single-arm, multi-centre observational study that aims to observe the real-life use of microwave ablation treatment in patients with colorectal liver metastases across Europe. From September 2019 until today, CIEMAR has enrolled 464 patients from 38 European hospitals.

The end of patient enrolment approaches

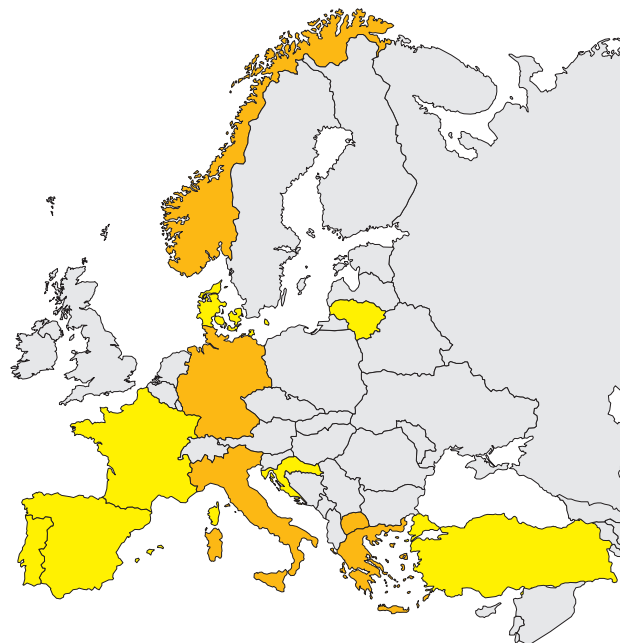
It has been more than three years since the first patient was enrolled, and CIEMAR will continue enrolling patients until 500 patients are reached, but no later than 30 April 2023. After patient enrollment is completed, data collection of enrolled patients will continue until January 2026, which will enable the study to capture long-term follow-up data.



The CIEMAR team and CIEMAR participating hospitals are currently working hard to reach at least 500 patients by the end of patient enrolment.

Top six enrolling countries

CIEMAR has 38 participating sites from 13 different countries. The countries with the largest number of enrolled patients are the Netherlands (123 patients), Italy (116 patients), Germany (77 patients), North Macedonia (30 patients), Norway (30 patients) and Greece (25 patients). The remaining countries have enrolled less than 19 patients each. The CIEMAR team would like to thank all sites and personnel for their efforts!



- High enrolling countries (>20 patients)
- Low enrolling countries (<20 patients)

Data from CIEMAR was presented for the first time at CIRSE 2022 last September.

CIEMAR at CIRSE 2022

CIEMAR data was presented for the first time at CIRSE 2022. Prof. Martijn Meijerink, CIEMAR principal investigator from the Amsterdam University Medical Centre in the Netherlands and Steering Committee member, shared insights on early CIEMAR data under the title 'First look into CIEMAR: patient selection, treatment details and early safety data of the European-wide observational study on MWA in CRLM with curative intent'. During the presentation, he provided an early overview on patient demographics, lesion characteristics, treatment modalities and reported adverse events. If you want to see the full presentation, you can watch it on demand here.

If you are interested in participating in CIEMAR or would like to receive further information on the research project, please contact:

Anna Kafkoulas | CIEMAR project manager
+43 1 904 2003 54 | ciemar@cirse.org | kafkoulas@cirse.org

After five years of data collection, the CIRSE registry for primary and secondary liver tumours treated with TARE using SIR-Spheres in France (CIRT-FR) closed in August 2022.

CIRT-FR is officially closed

CIRT-FR

History of CIRT-FR

CIRT-FR was initiated based on the assessment by the French National Health Agency (HAS) that TARE using SIR-Spheres Y-90 resin microspheres is associated with a significant health benefit for patients with metastatic colorectal cancer (mCRC) and hepatocellular carcinoma (HCC).

The renewal of reimbursement of SIR-Spheres in France was conditional on patients treated with SIR-Spheres being enrolled in a registry.

CIRT-FR data will be used to advance the knowledge of the real-life clinical application of SIR-Spheres in all primary and secondary liver tumours and to inform the decision of HAS on the continuation of SIR-Spheres reimbursement in France.

Study timeline

After five years of data collection, the final data is currently being analysed and will be ready by the end of 2022.

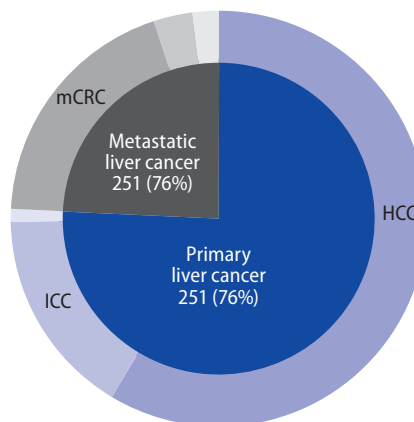
- **August 2017** | First patient enrolled
- **August 2020** | Last patient enrolled
- **August 2022** | End of data collection
- **November 2022** | Final data analysis
- **December 2022 and 2023** | Final results

Participating sites

26 French centres participated in CIRT-FR. Of these, 14 enrolled patients. Patient coverage, assessed based on treated patients enrolled versus non-enrolled in CIRT-FR, is 82%.

Patient demographics

332 patients were treated between August 2017 and August 2022. 75% were male and median age was 67 years.



Indications included in CIRT-FR

- HCC, 193 (58%)
- ICC, 54 (16%)
- Primary other, 4 (1%)
- mCRC, 63 (19%)
- NET, 10 (3%)
- Metastatic other, 8 (2%)

Data dissemination plans

CIRT-FR published interim data on the first 200 patients in September 2020. Data was also presented at CIRSE 2020 by CIRT-FR Steering Committee member and principal investigator Prof. Romaric Loffroy.

Final data from 332 patients is currently being analysed and the final clinical study report will be ready by the end of 2022. The final results are planned to be published in 2023.

In the meantime, data presentations are in the making and results are planned to be presented at ECIO and CIRSE 2023. More information will be provided soon.

If you would like to receive further information on CIRT-FR please contact:

María Urdániz | CIRT-FR project manager
+43 1 904 2003 52 | urdaniz@cirse.org

RESPECT, the Registry on Percutaneous Electrochemotherapy, was presented for the first time at CIRSE 2022 in Barcelona.

RESPECT at CIRSE 2022

RESPECT

The Registry on Percutaneous Electrochemotherapy, RESPECT, is the most recent research project of CIRSE, with the first patients expected to be included before the end of the year.

The two co-chairpersons of the RESPECT Steering Committee, Dr. Attila Kovács and Prof. Philipp Wiggermann, shared the stage at CIRSE 2022 to present the study for the first time under the title: "RESPECT: a new Europe-wide prospective multi-centre observational study evaluating the effectiveness of percutaneous electrochemotherapy for liver cancer".

After an introduction on percutaneous Electrochemotherapy (pECT) by Dr Kovács, Prof. Wiggermann gave a description of the project, including the objectives, organisation, and timelines of the study.

After two years of online meetings necessitated by the pandemic, CIRSE 2022 also provided an excellent opportunity for all the steering committee members to meet in person for the first time. Dr. Michael Moche and Prof. Tze Wah shared their opinion with us on how RESPECT will impact the use of pECT for liver cancer:

Dr. Moche: At the moment, the community thinks that there is a big potential for ECT for local ablation in the liver, but we do not have enough clinical data. RESPECT will deliver this data in the next years and we hope that with this data, ECT can really change the algorithm for local ablation in the liver, especially for difficult cases, and also push the limits of local ablation for tumours near risky structures.

Prof. Wah: The RESPECT study will allow us to collect evidence that is required to inform the NICE [National Institute for Health and Care Excellence] guidelines in the United Kingdom and to stratify the treatments for liver cancer in the future.



Prof. Wiggermann (left), head of Radiology and Nuclear Medicine, Städtisches Klinikum Braunschweig, Braunschweig, Germany; and PD Dr. med. Kovács (right), head of the Clinic for Interventional and Diagnostic Radiology and Neuroradiology, MediClin Robert Janker Klinik, Bonn, Germany.



Priv.-Doz. Dr med. Michael Moche (left), Head of the Clinic for Interventional Radiology, Helios Park-Klinikum Leipzig, Germany.

Prof. Tze Wah (right), Consultant Interventional Radiologist and Honorary Clinical Professor of Interventional Radiology, St. James's University Hospital, Leeds, United Kingdom.

Take part in this workshop series on percutaneous electrochemotherapy!

RESPECT goes to Germany – Workshop on pECT for liver cancer

RESPECT

Twice a year, Dr. Attila Kovács gives a workshop on percutaneous electrochemotherapy (pECT) for the treatment of liver malignancies at the Mediclin Robert Janker clinic in Bonn, Germany. This workshop is sponsored and co-organised by IGEA S.p.A. (Carpi, Italy), manufacturer of the CLINIPORATOR®, the clinical pulse generator most widely used for electrochemotherapy and funder of the independently conducted RESPECT project.

Claire Poulet, the project manager of RESPECT, had the chance to join the last workshop which was held in October. This was a great opportunity to see the intervention live, get a good understanding of the operating procedures, and clarify technical details regarding the data that will be collected for the study.



Set-up for pECT. Patients are under general anaesthesia. The procedure is performed using computed tomography and, when possible, ultrasound, to guide the placement of 3 to 6 electrode needles directly at the site of the tumour. The electrodes are then connected to the CLINIPORATOR® (right) which delivers cycles of electric pulses during the refractory period of the heart.

Intended for medical professionals who wish to learn more about pECT and possibly implement the procedure in their institute, the workshop starts in the morning with an introduction into pECT, during which Dr. Kovács gives basic information on the principle of the technique as well as an overview of recent publications. Comparisons with other local ablative therapies, indications for the use of pECT, and standard operating procedures are also discussed, and examples of previous cases treated in the clinic are presented.

Participants are then invited to follow Dr. Kovács in the procedure room and watch as he and his team perform pECT on 3 to 4 patients during the course of the day. Between interventions, there is enough time for participants to further discuss the cases and ask any questions.



Dr. Kovács and his team at the MediClin Robert Janker clinic in Bonn, Germany.

If you wish to participate in the next workshop, please contact Dr. Kovács's assistant, Ms. Rebecca Sturm, at Rebecca.Sturm@mediclin.de.

If you are interested in participating in RESPECT or would like to receive further information on the research project, please contact:

Claire Poulet | RESPECT project manager
respect@cirse.org | poulet@cirse.org

IRs continue to push for research and innovation on the topic of radioembolisation

Events in Radioembolisation: CIRT Close-Out Event and ESIR Course “Radioembolisation of liver tumours”

Until a few years ago, discussions on radioembolisation were mostly dominated by the negative outcomes of large randomised controlled trials. Luckily, insights from research driven by dedicated experts and innovations in the treatment application as well as the introduction of Holmium-166-based radioembolisation microspheres have revitalised this treatment modality and reconfirmed that it can truly benefit patients with liver cancer. It's high time to draw attention to the work and continuous achievements in radioembolisation from interventional radiologists and their multidisciplinary teams of nuclear medicine physicians and medical oncologists – and several recent high-profile events did just that.

CIRT close-out event at CIRSE 2022

The CIRSE Registry for SIR-Spheres Therapy (CIRT) was closed out with a celebratory event at CIRSE 2022. Delayed for two years due to the pandemic, the celebration included principal investigators, local hospital staff, Steering Committee members and staff from Next Research who all collaborated to make the CIRT study a great success. The event was hosted by Prof. Thomas Helmberger (Munich, DE), chairperson of the CIRT Steering Committee, who presented the most important outcomes

of the study. The highlight of the event was the awards recognising the efforts of study nurses and research staff from local hospitals who, in some cases, were responsible for more than 100 patient entries. A presentation from Prof. Maciej Pech (Magdeburg, DE) emphasised the importance of a research infrastructure integrated into clinical practice and the value of experienced and knowledgeable research staff. A toast and a group photo signalled the end of what was a challenging but overall successful very first CIRSE-sponsored observational study. CIRT underlined the commitment of interventional radiologists to participate in multidisciplinary and multinational research projects and put CIRSEs Clinical Research Organisation (CRO) Next Research on the map as a reliable partner for research in interventional radiology.

ESIR course “Radioembolisation of liver tumours”

Radioembolisation was also the topic of the wildly successful European School of Radiology (ESIR) course aptly titled “Radioembolisation of liver tumours”, held in the picturesque city of Utrecht, The Netherlands, on November 3-4. While radioembolisation has been available as a treatment modality in the liver for decades, remarkably, this was the inaugural ESIR



RADIOEMBOLISATION EVENTS

Several recent high-profile events have helped shine a spotlight on this important topic.



course on this topic. Organised by Dr. Maarten Smits, Dr. Arthur Braat and Prof. Marnix Lam, the fully-booked course focused on the latest insights in patient-specific dosimetry, differences and similarities between the three types of microspheres, and optimal imaging timing and modalities. Featuring attendees from four different continents, the sessions often resulted in lively discussions between faculty and participants over best practices and personalised care of patients.

On the first day, the morning session provided a solid introduction to the status quo and current developments in the different aspects of radioembolisation application.

The afternoon was reserved for four hands-on device workshops:

- 1) treatment planning – software for dosimetry, where participants learned about different treatment planning software and how to best prepare a radioembolisation treatment;
- 2) administration systems, where three manufacturers introduced their systems for administering their respective microspheres;
- 3) how to assess treatment response, which provided the opportunity for participants to practice their response assessment skills; and



- 4) advanced catheter designs, introducing participants to catheters that can increase the precision of administering microspheres in the cancerous regions of the liver. Breaking into smaller groups allowed participants to delve into the content in close collaboration with the faculty members.

The second day introduced more advanced topics in post-treatment imaging and clinical follow-up, as well as the role of radioembolisation compared to chemoembolisation and immunotherapy. The highlight was the introduction of a newly developed imaging device that allows for SPECT imaging in the angio-suite and therefore real-time updates on dose distribution in the liver. The session ended with an interesting and active discussion on challenging cases presented by the faculty. More information on ESIR courses can be found on page 31.

Both events show that there is a continuous improvement in the understanding of the inner workings of radioembolisation and constant development in optimising the treatment application. Together with their nuclear medicine and medical oncology colleagues, interventional radiologists continuously strive to improve their treatments to provide the best possible patient care!

CIRSE 2022

back in person and stronger than ever!

CIRSE in Numbers

5,193 onsite participants

2,991 online participants

85 countries represented

1,033 abstracts received

1,353 presentations

230 hours of education

89 exhibitors

5 product launches

41 satellite symposia

4 learning centres

64 hands on sessions

34 CMEs

Digital meetings have changed the landscape of conferences the world over during the past two years. The CIRSE 2020 and 2021 Summits allowed the IR community to continue to meet, share and connect with each other during difficult pandemic times, and the high level of education and knowledge exchange expected from a CIRSE meeting was maintained in the online format.

There are objectively many advantages to remote meetings – the ease of attending, the accessibility across the globe, the option to rewind, review and rewatch lectures even during the event. Indeed, by many measurable metrics, remote meetings look superior.



Anyone who attended CIRSE 2022 in Barcelona, however, can immediately confirm that some of the most important elements of a congress cannot be measured or quantified on paper. The human connections, the spirit of progress, the joy of reconnecting with old friends, the bolstering feeling of being united with colleagues across the globe in the same common goal of forwarding and enriching IR – these things cannot be exactly replicated online and have been sorely missed over the last years.

It was a joy and an honour to be able to host CIRSE 2022 onsite in Barcelona last September, bringing together interventionalists from near and far to the IR event of the year – indeed, the IR event of the decade (so far!)



We extend our deepest thanks and gratitude to our esteemed faculty members, our enthusiastic participants and everyone who worked to make CIRSE 2022 the inspiring meeting it was. The innovative and untiring spirit of the IR community has been instrumental in helping CIRSE weather the storm of the last years and emerge stronger than ever.

Back to Barcelona – back to your usually scheduled programme!

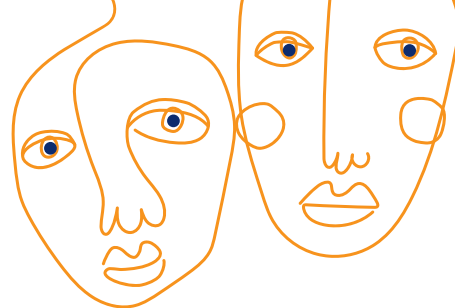
The return to an in-person format, of course, offered technical as well as social advantages. The CIRSE 2022 programme offered a complete picture of IR as a discipline, including lectures on both emerging and established topics and more options than ever for hands-on experiences.

This year's meeting offered a record number of hands-on device training sessions, with more than 60 sessions for attendees to choose from. These trainings included simulation trainings, allowing delegates to follow demonstrations of interventional techniques and practice procedures under expert guidance, safe sedation workshops giving participants the opportunity to perform procedural sedation in a simulated environment, and an IDEAS planning course series, wherein delegates used reconstruction software to plan endovascular repair and make accurate stent graft sizing choices for standard and fenestrated/branched EVAR.

The scientific programme as a whole featured 230+ hours of lectures and presentations, many of which were livestreamed live from Barcelona to a custom-built platform, allowing attendance and participation for everyone who could not join the congress in person. >



CIRSE returned to Barcelona, Spain, from September 10-14 for a first in-person meeting since 2019.



- CIRSE 2022 featured the 5th PAD day, a full day devoted to the latest breaking research in peripheral arterial disease, as well as IDEAS, The Interdisciplinary Endovascular Aortic Symposium. IDEAS covers aortic treatments from a truly multidisciplinary perspective with a faculty comprised of both interventional radiologists and vascular surgeons.

[Watch PAD Day sessions](#)



[Watch IDEAS 2022](#)



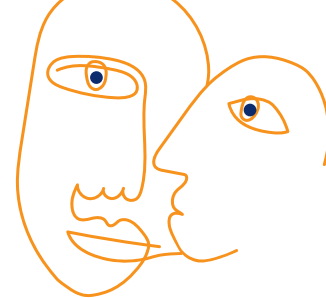
Content from all eight clinical tracks at CIRSE 2022 is now available online for on-demand viewing at the CIRSE Library!

[Watch all CIRSE 2022 content](#)

Looking forward

CIRSE 2023 will take place from September 9-13 in Copenhagen, Denmark, and the scientific programme committee is already hard at work. Creating a programme that reflects CIRSE's standing as the world's premier congress for minimally invasive, image-guided therapies.

We look forward to seeing you at CIRSE 2023!



CIRSE 2022 Poster Awards

We spoke to Raphael Lehrer about his Magna Cum Laude award winning poster.

What motivated the research behind your poster?

Lehrer: Prostatic artery embolisation (PAE) for benign prostatic hyperplasia is a safe and effective treatment for lower urinary tract symptoms in selected patients. Nevertheless, published data suggest that clinical failure at one year occurs in more 20% of patients despite high initial technical success rates. Unfortunately, the conventional management after failed PAE includes surgery or medical treatment and some recent studies suggest that repeat prostate artery embolisation could also be an efficient alternative for patients presenting relapsing symptoms. This motivated us to evaluate the safety and efficacy of a second PAE for patients with relapsing symptoms or insufficient improvement.

Why did you decide to submit a poster for CIRSE 2022? What was the experience like?

Lehrer: CIRSE 2022 was the perfect opportunity to present our work and to be able to make it known to as many people as possible, including the most competent in the field. We appreciated the freedom to create the presentation and the ease of use of the online platform.



Your poster was awarded Magna Cum Laude – what do you think made your poster stand out from the rest?

Lehrer: First, I think that embolisation of the prostatic arteries and, in particular, the problem of re-embolisation in patients who have failed a first treatment is a topical daily life subject that interests interventional radiologists. Second, this is a topic with little data in the scientific literature and this study provides a relatively large cohort on this topic.



Anything else you'd like to mention?

Lehrer: Thank you again for the reward and for the support given to our work!

CIRSE 2022 Poster Awards

Magna Cum Laude

Raphael Lehrer
Eduardo Chacon

Cum Laude

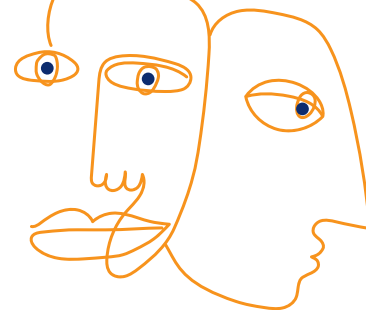
Frank Grillet
Bruno Migliara
Floriana Nardelli
Alfredo Páez-Carpio
Nimesh Shah
Chinmay Kulkarni

Certificate of Merit

Mateus Picada Correa
Hiroki Yonezawa
Hye Doo Jung
Iain Irvine
Richard Hesketh
Taylor Schoenheit

View all award-winning posters from CIRSE 2022 here

CIRSE is proud to host some of the brightest medical students from around the world at annual congress.



The French IO Diploma

CIRSE was pleased to invite the top scoring students of the French IO diploma to join us at CIRSE this year. We spoke to Prof. Thierry de Baere and his star pupils, Pauline Ledoux and Romain Pastre, during the congress.

Can you tell us about the French IO diploma?

Thierry: We run the French IO university diploma every year where we have around 50 students coming from all around France and French speaking countries. I'm here at CIRSE with my best two students – they received the highest marks on the final test, which is an exam with both multiple choice and open questions.

Pauline and Romain – at what point are you in your medical careers?

Pauline: I have been a fellow at the Cancer Centre in Bordeaux for a little less than one year.

Romain: I'm fellow at Le Puy-en-Velay, which is a non-University Hospital, and I'm focusing on interventional radiology.

What do you hope to learn from attending CIRSE this year?

Pauline: It's my first time participating in an IR Congress. So, I've been hoping to hear about new groundbreaking techniques, learn from the most recent guidelines and meet new people.

Romain: It's my second congress. The first one was in 2020 online congress. It's a good opportunity to be here and to see the picture of how IR looks in different countries around Europe. One of my aims is to take and pass the EBIR.

What have you enjoyed best so far?

Pauline: We've already been to many lectures and each one was quite interesting. The opening session was very inspiring.

Romain: The opening session was very, very good – good to get to see all the great names of interventional radiology.

Thierry: I'm very happy to see that there is a younger generation well represented here. And I'm very happy that this young generation came to the opening ceremony to see 'old' radiologists!



CIRSE IS COMMITTED TO SUPPORTING IR EDUCATION.

Access all CIRSE Curricula, including the European Curriculum and Syllabus for Interventional Oncology, [here!](#)

The European Trainee Forum invests in the quality of medicine tomorrow by Investing in young medical professionals today.

The ETF is back in action!

With interventional radiology playing a vital role in the future of medicine, CIRSE is devoted to helping young interventional radiologists in training advance their careers by organising special sessions and networking opportunities at CIRSE annual congresses.

We were delighted to welcome more than 300 trainees and junior IRs in Barcelona, of which 75 were given free congress registration through the 2022 IR Trainee Support Programme.

In addition to a wide range of lectures and presentations, CIRSE 2022 featured unique IR trainee sessions and ETF short talks designed by the ETF Subcommittee. These sessions were tailored for trainees, residents, and young IRs to help them get familiar with the latest data, procedural tips and tricks, and clinical aspects of the specialty. The IR trainee sessions featured topics such as building an IR team, the different sides of an IR and technological advancements in IR. ETF short talks offered practical career advice for young IRs. These talks included information about clinical and academic prospects in Europe and beyond.

In addition to the scientific sessions, young IRs were also invited to enjoy a bit of informal gathering at the ETF networking event on the first day of the congress.

The ETF Subcommittee

The ETF Subcommittee works continuously throughout the year on various projects, building IR trainee communities in their own countries as well as good relationships with other IR societies.

The future of IR depends on attracting bright and inquiring minds to it ranks, and especially on those minds surpassing the existing scientific data with their own innovations and research. This is particularly important for IR, which requires high-quality training to ensure that practitioners are competent in both procedures as well as clinical management.

The ETF Subcommittee has already started to work on the ETF programme for CIRSE 2023, and we can guarantee that it will be just as inspiring as our first post-pandemic annual congress.

What's next?

ECIO 2023

Register now to join us at the world's biggest meeting for Interventional oncology! Junior members can register at reduced rates. If you would like to share your work, make sure to submit your abstract by January 12.

CIRSE 2023

CIRSE is planning to continue the IR Trainee Support Programme in 2023 in order to help make the congress more affordable for residents and trainees.

In order to be eligible to apply for this support, please note that the following steps are required:

- 1) Submit an abstract for CIRSE 2023 as a first or presenting author
- 2) Be a CIRSE junior member
 - (If you are not a CIRSE member yet, you can join CIRSE through your national IR society or apply as an individual)
- 3) Apply for the 2023 IR Trainee Support Programme
 - The application link will then be available in your myCIRSE area

Please note that due to the limited number of places available, the support will be allocated on a first come, first served basis.

Follow the European Trainee Forum on Facebook, Twitter and LinkedIn and stay up-to-date on our activities throughout the year!



The CIRSE student programme has reached more than 1,000 aspiring IRs over the last 10 years!

CIRSE Students – Be inspiRed!

The end of an “avatar” era

As the CIRSE Annual Congress returned onsite, the 2022 Student Programme attracted more than 250 undergraduate medical students from 27 European and 16 Non-European countries. We were thrilled to return to beautiful Barcelona for the biggest IR meeting in the world!

The CIRSE Student Programme – **Be inspiRed** – aims to educate young doctors-to-be through curated lectures, recommended hands-on device and simulation training sessions, and to allow them to connect with their future IR colleagues and fellow students from Europe and the world.

This year’s programme aimed to maintain its excellent track record and provide those students attending with a unique experience and extensive insight into interventional radiology. As in previous years, CIRSE provided €200-worth travel support grants to students studying and residing in Europe.

The post-congress survey results showed that more than 98% of medical students who participated in the survey right after CIRSE 2022 find IR more or much more attractive as a career choice than they did before they attended the congress.

Students had the opportunity to learn about IR and its applications in modern medicine by attending the dedicated introductory lecture on the first congress day. In addition to 39 recommended scientific sessions and 20 hands-on device and simulation training sessions exclusively for students, the student programme hosted various social events.

With the support of the European Trainee Forum, a mentoring breakfast was organised in order to give students the chance to discover how IR is performed in their countries of interest, what it takes to pursue a career in this field, and what IR training looks like.

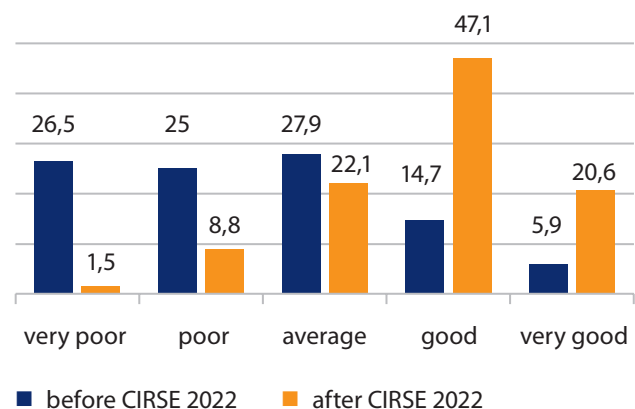
CIRSE aims to encourage medical students’ involvement in the CIRSE Annual congress, therefore we were happy to receive numerous outstanding abstracts from medical students for this year’s conference.



At the “Students on Stage” session, six students were able to present their research in front of their colleagues, earning their first on-stage experience.

Students also had the opportunity to get to know each other better and socialise outside the congress venue. CIRSE also organised a students’ evening on one of the evenings during the congress.

Last but not least, students were able to test their newly gained IR knowledge in the students’ quiz and the daily quiz in the CIRSE app.



The results of the post-congress survey on how students judged their IR knowledge before (blue) and after the congress (orange).

Student members enjoy full access to CIRSE's journals, the CIRSE Library, and more!

Never stop learning

CIRSE is committed to providing medical students across Europe with the educational opportunities they need to succeed in a career as an interventional radiologist. The offerings for students include:

- FREE registration to undergraduate medical students for all our congresses
- Travel support grants for the CIRSE annual congress
- CIRSE student membership
- CIRSE student internship programme
- Mentorship programme
- IR Curriculum for Medical Students
- Educational materials
- Quizzes and other IR-related competitions

To learn more about the Student Programme, visit www.cirse.org/students and follow us @ CIRSEstudents on Facebook and Instagram!



What's next?

Students and IO

ECIO 2023 is approaching, and medical students are welcome to register (free of charge!) and get a sneak peek into the field of interventional oncology!

CIRSE 2023

Registration for CIRSE 2023 will open soon! Make sure to follow our social media channels for the latest Information. Students are eligible for free registration and travel support.

Become a CIRSE student member!

Enjoy full access to the CIRSE journal CVIR, stream videos from past CIRSE congresses via the CIRSE Library and use the fast-track registration for all CIRSE congresses! Apply for the membership today!



Planning for ECIO 2023 is already well underway under the leadership of a new SPC.



Looking forward to ECIO 2023

We are already looking forward to welcoming IOs, IRs and multidisciplinary colleagues from around the world to ECIO 2023, taking place from April 16-19 in Stockholm, Sweden, under the guidance of Scientific Programme Planning Chairperson Prof. Philippe Pereira and Deputy Chairperson Prof. Laura Crocetti. Prof. Pereira spoke to us on his personal highlights and hopes for the congress going forward.

You have been coming to ECIO for many years. What have been your personal highlights?

Pereira: There are so many, but two aspects are particularly noteworthy: one is being able to see the importance that IO has gained in therapeutic strategies, both as a standalone treatment and in combining IO with more established therapies such as surgery, systemic treatments or radiation. Personally, I think that one of the main obstacles for the development of IO is the fact that interventional radiologists and interventional oncologists are not yet present in every cancer hospital. The other highlight for me is, of course, that our community has realised the importance of clinical research specifically in oncology, which remains a very competitive discipline, and the importance of demonstrating clinical evidence that our treatments are effective and do increase the life span and quality of life of cancer patients. CIRSE has also founded Next Research to help IRs demonstrate the efficacy of our treatments and to assist in the distribution of the results obtained. (Turn to page 10 for more on Next Research!)

What were the biggest challenges in overcoming the limitations of the last years?

Pereira: Of course, we were confronted with some limitations; but the biggest challenge was only in the organisation of ECIO, not in the quality of the meeting. On the contrary, we were able to include speakers who might not have been able to participate in ECIO in person, as well as achieving a greater reach in terms of participants; and in the end, the number of participants has never been so high.

Benefits of an online meeting aside, over the last two years I did really miss the direct discussion with colleagues; "How would you perform... what do you use to succeed in..."

Which parts of the virtual congress will stay with us in the long run?

Pereira: It is a positive note that we were able to have excellent presentations even from speakers who were not on site, their motivation could be felt. Hybrid meetings will continue for a while; I hope that motivation to participate in a meeting, even if in-person attendance isn't possible, will remain.

What are your plans for your tenure as the ECIO SPC chairperson?

Pereira: In any case, to strengthen the impact of the IO primarily for patients who can benefit enormously from minimally invasive treatments. For example, through "Why an IO should be at the tumour board?" sessions for different cancers. We also wish to continue emphasising the need to produce medical evidence.

When looking way ahead, where would you like to see ECIO 10 years from now?

Pereira: My very spontaneous answer, I would like to have an ECIO-ESMO-ESSO-ESTRO meeting!! Perhaps in a more realistic way, I see ECIO having even more participants, which would mean that IO is really established and that we have more doctors who are present and active in this field. Then to see our therapies in the guidelines, not only as optional, but as first-line treatments following results of well-directed studies, and finally to see the results of robust clinical studies conducted in a strict and professional way.

ECIO



ACCESS THE WORLD OF IR.
WHEREVER. WHENEVER.

The All-Access Pass is your key to everything
CIRSE has to offer online in 2023!

Gain online access to the CIRSE Library featuring more than 10,000 titles from all CIRSE congresses, over 50 CIRSE Academy courses covering the entire spectrum of IR, and webinars on a variety of subjects throughout the year for one low price!

It gets even better! If you would like to join one or all CIRSE onsite congresses in person, you will benefit from strongly reduced registration.

THE CIRSE 2023 ALL-ACCESS PASS INCLUDES ONLINE ACCESS TO THESE EVENTS AND SERVICES



Get your CIRSE 2023 All-Access Pass at cirse.org/all-access-pass

Be a part of the embolotherapy meeting of the year!

Submit your abstract for ET 2023

ET2023

Submitting your abstract to ET, the European Conference on Embolotherapy, enables you to share your work at the world's most far reaching, innovative embolotherapy meeting.

Abstract submission for ET 2023 is open until February 16!

We spoke to some of 2022's top scoring abstract submitters to hear more on their experiences.

Dr. Tiago Bilhim, Presenting author and winner of the Best Scientific Paper award, "Long-term outcome of prostatic artery embolization for patients with benign prostatic hyperplasia: single-centre retrospective study in 1072 patients over a 10-year period."

Why did you choose ET to submit your scientific abstract?

Bilhim: ET is a dedicated embolisation meeting organised in Europe by CIRSE. As our group is based in Europe and our work was on long-term outcomes of prostatic artery embolisation, it was logical to have this abstract in this meeting. Also, we were planning to have this work published in CVIR, the official journal of CIRSE, so it made perfect sense to present the data just before the online publication of our study. ET provides global promotion and visibility for researchers focusing on embolisation topics, so we wanted to promote our study findings with the help of ET.

Are there any special considerations to take into account when submitting this type of abstract?

Bilhim: Yes. They should cover topics of embolisation in IR – be that oncology, emergencies, bleeding or any other IR areas where embolisation plays a central role. Naturally, the study quality, cohort size, and follow-up data are essential to consider, as well as the innovative spirit of the work.

How did you find the submission process?

Bilhim: It was quite easy and efficient to handle. No problems.

You won the best scientific paper award – what do you think made your work stand out?

Bilhim: The topic is interesting for IR readership at the moment – it focused on prostatic artery embolisation (PAE) for patients with benign prostatic hyperplasia (BPH). There is a gap in knowledge around PAE for BPH patients, namely, the long-term longevity of treatment effects, with no data on PAE after 5 years. Our study was the largest to-date (over 1000 patients) with data spanning up to 10 years. We provided new insights into PAE outcomes up to 5 and 10 years with a reasonable quality of follow-up data. We were also able to compare outcomes between 4 major embolic agents being used for PAE, something that has not been done until now.

Do you have any tips for physicians considering submitting an abstract?

Bilhim: Make sure that the novelty is there! Either a new embolic material or a new indication or new findings on established embolisation treatments. As much as possible, try to have a reasonable cohort size and adequate follow-up data. Make sure you identify the gap in clinical knowledge that justifies the current research, so that your conclusions may have implications for patient care. Use ET to promote your scientific research and as a platform to facilitate the final publication of your work in CVIR. Try to have the scientific work completely done by the time of abstract submission, so that it will be as rigorous as possible. Ideally, the abstract submitted to ET should be very similar to the abstract of the published paper in CVIR.

Will you submit an abstract for ET 2023 as well?

Bilhim: Our colleagues are trying to finish their data analyses in time for abstract submission. If we make it on time, we will have abstracts for ET!

*Abstract submission is open
for ET 2023 until February 16.*



Prof. Christof M. Sommer, First author, "Imaging of the lymphatic system: Patent Blue V lymphangiography, Lipiodol based lymphangiography and MR lymphangiography in an in vivo model."

Why did you choose ET to submit your educational abstract?

Sommer: ET has become an established congress with worldwide visibility. As a subspecialty conference within the CIRSE family, it offers high-quality education for all participants, including collaborating disciplines such as surgery and industry partners. Of course, ET 2022 in Nice was a real highlight, because after the long COVID pandemic restrictions we finally were able to get the opportunity for an intensive exchange of experiences in person. The online offerings available now can and should be complementary solutions, but they will never replace a congress with a personal presence on site.

Are there any special considerations to take into account when submitting this type of abstract?

Sommer: Everything depends on the roots, i.e., where you come from, what you were given on your professional path, the philosophy, the mission statement, the self-image of your alma mater and mentors and supporters. Very early on, I was taught the tremendous importance of teamwork and interdisciplinary collaborations, because only when you pull together do you achieve your goal in the best possible way. Submitting an educational abstract means something special to me, namely, passing on knowledge that was originally imparted to you by a third party, but that you can now further develop and shape after years of personal clinical experience for the benefit of others who may be interested in the topic.

How did you find the submission process?

Sommer: Efficient as always. The upload page is very clear and standardised... The nerves then come with the news from the Scientific Committee whether the abstract has been accepted, and if so, in what form... Emotionally, the oral presentations on stage remain the most exciting for me, but the importance of EPOS cannot be overstated!

Do you have any tips for physicians considering submitting an abstract?

Sommer: Intrinsic motivation is key, I can tell fellows and residents. One should focus on one or two topics and think them through completely. When submitting a congress paper, it is very helpful to already have a working version of the intended journal paper, e.g., with formatting for CVIR, CVIR Endovascular or RoFo... In any case, a last-minute data evaluation with submission just before midnight is not useful – neither for the authors nor for the reviewers nor the audience.

Will you submit an abstract for ET 2023 as well?

Sommer: That's pretty sure!!! Embolotherapy is a huge field, imagine what we can do in terms of augmented reality, robotics or image fusion. Current health policy developments like "outpatientisation" offer both opportunities and challenges for our discipline with its well tolerated and highly effective procedures. Only as a clinic (and not a department) with direct patient responsibility and coding authority on our own wards will we as radiologists and interventional radiologists be able to compete in the future hospital environment.

More traditional procedures also remain a hot topic – we urgently need more data on the actual cure rate of TACE in HCC patients, for example, by histopathological correlation or real long-term follow-up... One project that is particularly close to my heart is IR in babies, infants, and adolescents! The initiative grew out of the paediatric liver transplantation programme at Heidelberg University Hospital and has been expanded with the intention to report on this huge wealth of experience.

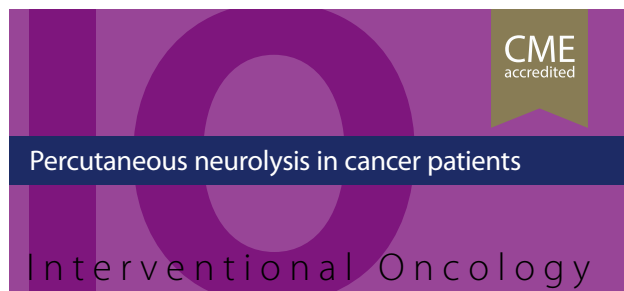
Currently, we are preparing a pictorial review with renowned colleagues from all over Europe. From the strategic point of view, the systematic implementation of interventional neuroradiology, e.g., the endovascular treatment of aneurysms and vascular malformations, will be relevant. At this point I would like to thank Prof. Dimitris Fillipiadis and Prof. Antonin Krajina, and the CIRSE team for the great support within the Online Education Committee. So you see, ET 2023 should be exciting for everyone.

The CIRSE Academy features more than 50 courses for self-paced learning.

Check out new online education content

To date, the CIRSE Academy offers **47 basic courses** based on the European Curriculum and Syllabus **for IR**. These modules represent a vital resource for IRs planning to sit the EBIR exam, as well as practitioners wishing to expand their knowledge on certain procedures. For learners with advanced knowledge in IR, the CIRSE Academy provides **five specialist modules**.

Over the last months, two completely new basic courses and one specialist module have been added to the CIRSE Academy.



With 21 more courses currently in production, the CIRSE Academy will keep on growing to become an ever more comprehensive and useful platform for self-paced learning.

More than half of the CIRSE Academy modules online are CME accredited, and nine of the non-CME accredited courses are currently being updated so that a revised and CME accredited version can be made available in the future.

Check out the latest updated version of the course "Central venous access" on the CIRSE Academy platform.



CIRSEacademy

More high-quality content than ever is currently available on the CIRSE Library.

The CIRSE Library – Content for every IR, all year round

With the addition of all CIRSE 2022 content, the CIRSE Library now includes over 10,000 lectures and posters! There is something for everybody, from students to experienced IRs, covering the entire spectrum of IR. Be sure to use the search and filter functionalities to find exactly what you are looking for.

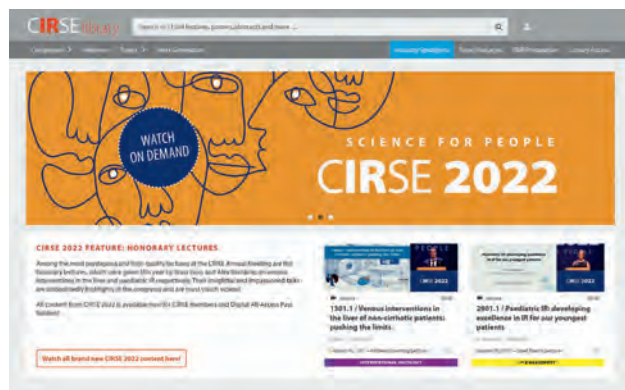
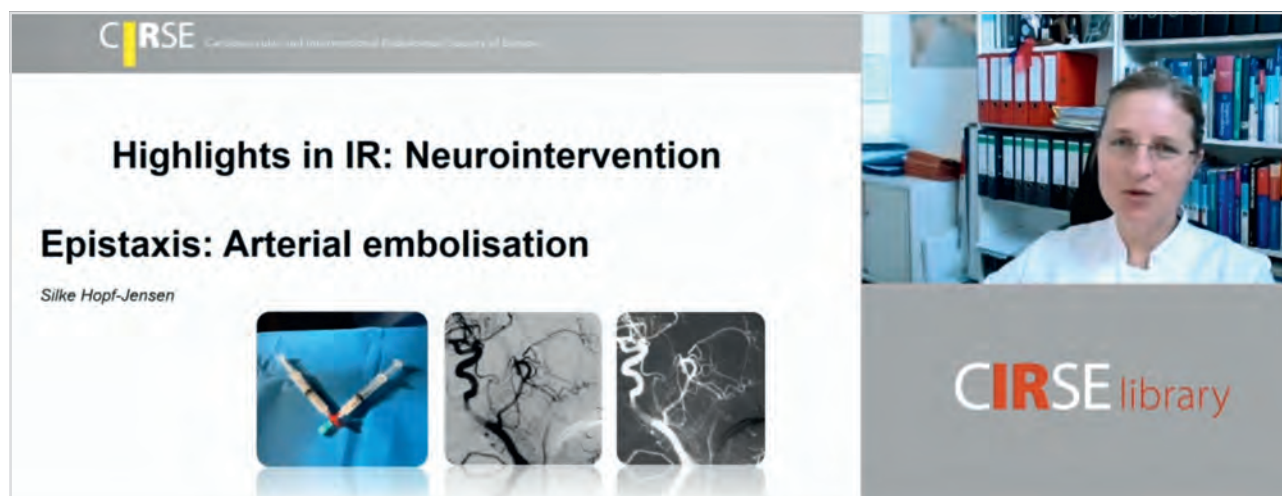
Highlights in IR

Short case-based presentations are ideal for time-strapped CIRSE Library users. In just a few minutes you

can gain invaluable insight through experts' experiences on an ever-increasing variety of topics.

The Highlights in IR section has grown in 2022 to include four contributions covering cholangiocarcinoma, PAE, type B aortic dissection and epistaxis.

Many more instalments are planned on other areas of IR in 2023, so be sure to check in on a regular basis and subscribe to CIRSE's e-newsletters to be sure not to miss anything.



Recommend content to be featured on the CIRSE Library homepage!

We are actively looking for CIRSE members to let us know their favourite lectures from 2022 to be featured prominently on the CIRSE Library. If you would like to share presentations that you found to be particularly insightful, educational or informative, please fill in our form to help us share your learnings with your colleagues.

CIRSElibrary

CIRSE Webinars offer a range of highly specialised, innovative and free content.

CIRSE Webinars: Focused learning opportunities, live and on demand – Free of charge!

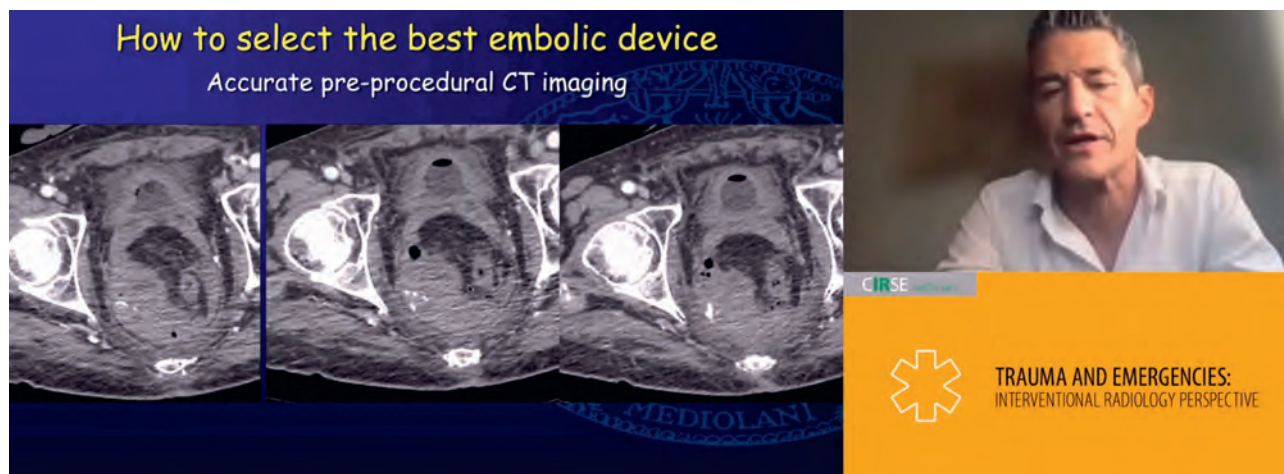
CIRSE's webinars vary from one hour to a full working day and cover various aspects of interventional radiology practice. The webinars offer high-quality lectures, as well as interactive videos of interventions with commentary.

The material is delivered by leading international experts in the field who also engage in lively follow-up discussions. The viewers are always encouraged to actively participate by sending in questions and comments.

Coming up in 2023

Subscribe to CIRSE's e-newsletters to make sure you don't miss any of the free webinars planned for 2023! We will send you updates about webinars on:

- Musculoskeletal intervention – a series of four webinars covering specific topics including degenerative MSK disease, osteoporosis, cancer and MSK interventional oncology in 2023
- Drug-based PAD therapies
- AV access
- ...and many others



How to select the best embolic device
Accurate pre-procedural CT imaging

The thumbnail image shows three axial CT scan slices of a pelvis, highlighting a large, well-defined, hyperdense mass in the right hemipelvis, likely representing a tumor. To the right of the scans is a video frame of a male speaker in a white shirt. Below the scans and video frame is an orange banner with the CIRSE logo and the text 'TRAUMA AND EMERGENCIES: INTERVENTIONAL RADIOLOGY PERSPECTIVE'.



Keep an eye on **cirse.org** and our social media for updates as they become available!

CIRSEwebinars

An ESIR course on hands-on liquid embolisation took place from November 17-18 in France.

ESIR travels to Strasbourg

In recent years, liquid embolics have increased in popularity among interventional radiologists, as these agents boast both high embolic efficiency and good clinical results. However, as liquid management and technical aspects are different and more complex than using conventional coils or particles, the learning curve is difficult.

The ESIR 'Hands-on liquid embolisation' course sought to address the above challenges. Organised by CIRSE president Christoph Binkert and held at the Institute of Image-Guided Surgery in Strasbourg (FR), the fully-booked course focused on the latest insights on the technical and practical aspects of liquid embolics. Experts Joo-Young Chun, Bernhard Meyer, Bernhard Gebauer and Emanuele Boatta lent their expertise to the course which hosted participants from 22 different countries.

The morning began with a short lecture series and then dove straight into extensive hands-on workshops. In small groups, participants rotated through ex-vivo workshops. Supported by various liquid embolic flow models and animal organs, the ex-vivo workshops provided valuable hands-on experience and insights on the practical properties of cyanoacrylate glue, EVOH and sclerosants. Additionally, parallel liquid embolic mixing stations allowed participants to practice preparing and mixing glue and EVOH.

A highlight of the event was the afternoon animal in-vivo workshops, which allowed participants to practice in a setting as close as possible to real-life conditions. Under the guidance of our expert faculty members, each participant practised injecting glue and EVOH into the liver, kidney and spleen.

On the second day, our faculty members presented cases on "when things go wrong" and "when things go right," resulting in lively discussions between faculty and participants over best practices and personalised care of patients. A light-hearted quiz tested participants' knowledge and closed the challenging and informative course.

If you missed this year's liquid embolisation course, you can catch it in 2023!



Upcoming courses

We look forward to seeing you in person at our ESIR courses in 2023!

Critical limb ischaemia

Florence, Italy | February 9-10, 2023

Local Host: F. Fanelli

Venue: Careggi University Hospital – University of Florence

Registration open

Ablation from A to Z: Liver and kidney

Strasbourg, France | February 23-24, 2023

Local Host: A. Gangi

Venue: IHU – Institute of Image-Guided Surgery
Strasbourg

Registration open

Prostate embolisation

Milan, Italy | March 23-24, 2023

Local Host: A.G. Rampoldi

Venue: AIMS Academy – Ospedale Niguarda Ca'Granda

Registration open

...and more! [Click here to view all upcoming courses.](#)

The EBIR continues to grow, and 2022 saw a newly appointed EBIR Council and Examination Committee begin their terms of office.



EBIR – The past, present and future of a world class IR examination

Since its launch in 2010, the European Board of Interventional Radiology (EBIR) has seen many changes. We sat down with newly appointed EBIR Examination Council Chairperson Dr. Colin Nice and Council Deputy Chairperson Prof. Laura Crocetti to talk about the past, present and future of the examination as well as its significance for IRs.

Could you start by introducing the new EBIR Examination Committee?

Nice: I recently took over as chairperson of the EBIR from Dr. Raman Uberoi. The new committee has contributed to the EBIR for several years and is well prepared to take it forward over the next two years.

Our new EBIR Council deputy chairperson, Prof. Laura Crocetti, is an internationally recognised expert in ablation. She has over a decade of involvement in the EBIR as an examiner. A prolific question contributor, Laura was editor-in-chief for F-type questions between 2019 and 2022 and serves on the CIRSE Online Education Committee and as deputy chairperson of the ECIO 2023 Scientific Programme Committee.

The committee is also supported by the editor-in-chief of A-type questions, Dr. Joo-Young Chun. A consultant interventional radiologist at St. George's Hospital in London, Joo-Young is an excellent question writer and meticulous reviewer – skills that make her ideally suited for this role. She has recently served as a member of the CIRSE Standards of Practice Committee and she is also an associate editor of CVIR Endovascular.

Finally, the editor-in-chief of F-type questions, Prof. Tiago Bilhim, is based at Saint Louis Hospital in Lisbon and is a dedicated medical writer and reviewer. He serves as embolisation section editor for CVIR and in the CIRSE Online Education Committee. Furthermore, he has been contributing to the EBIR since 2018, providing a constant focus on quality and clinical relevance.

What does it mean for you to be involved in the EBIR?

Nice: The EBIR is the most professionally rewarding project that I have been involved in. I have learned a great deal from our education specialist Dr. Muirne Spooner about conducting exams, medical education and ensuring that we meet the needs of our candidates and expectations of our patients. It has been a great pleasure to work collaboratively and become friends with colleagues from all over the world. Writing and reviewing questions is an excellent way of keeping up to date with our rapidly evolving field.

Crocetti: My involvement in the EBIR has been a long, personal educational process. I was surprised and impressed by the amount of scientific work that goes into the preparation of a good, reliable and reproducible examination. The process of perfecting the MCQs and the gradual passage from oral to written clinical case scenario questions has been very demanding, but it ended up having a very positive impact on the quality of the exam. This process also helped me to improve the quality of the examinations I conduct at my university and was extremely useful when I was called to join external exam commissions.

What are, in your opinion, the most significant achievements of the EBIR to date?

Nice: The EBIR has evolved into an internationally successful, specialist level exam that is increasingly being adopted by countries as part of their national IR accreditation. UEMS-CESMA accreditation was awarded in April 2017 and confirmed that the EBIR had been rigorously assessed against international standards. The move to a digital format was driven by a desire to increase the reliability and reproducibility of the exam for candidates and also to increase capacity. This meant, however, that when the COVID-19 pandemic hit, we were able to transition fully into an online proctored exam that is truly accessible worldwide. In addition to English, the EBIR is now offered in German and Spanish, with the potential for additional language versions in the future.

The EBIR was held in three languages for the first time in 2022, and the digital format has cleared the waiting list.



What has contributed to the rapid growth of the examination over the past years?

Nice: As the exam has grown it has engaged the support of the IR community, either formally through national training requirements or less formally, where it has been encouraged by trainers to provide an academic framework for specialist IR training or fellowships. The drive and professional commitment of IRs to measure themselves against a comprehensive curriculum and assessment continues. The number of applications per month has doubled since 2019, partly due to the scalable capacity, increased accessibility and decreased expense offered by the remote online format, which makes travel to an examination venue no longer necessary.

Crocetti: In the beginning, examination sittings were frequently fully booked and the waiting list often extended to over 12 months. Also, the youngest IRs have grown up with the idea that they can work anywhere in the world, not only in their own country. Being an EBIR holder means your CV includes an internationally recognised certificate that proves you are able to perform safe and successful IR procedures.

How does the EBIR benefit IRs?

Crocetti: IR is one of the few specialties that is still devoted to treating pathological conditions in all anatomical districts. Preparing for and passing the EBIR means a review of all the main topics of IR, including basic knowledge, clinical expertise, equipment, complications, etc., must be undertaken. The first benefit is, therefore, an increase in updated knowledge, even on those kinds of procedures that one does not perform on a daily basis. This has an immediate positive effect on the quality of patient care. And, of course, holding a certificate may be of help in finding a job or applying for better positions, even in countries where the EBIR is not yet formally recognised.

Nice: IRs work hard and commit their time and careers to their specialty. They want to be certain that their knowledge and skills are of a high standard. The EBIR

provides this reassurance and allows them to demonstrate their expertise to their patients, colleagues and hospital administration. Proving their competence against a comprehensive IR curriculum means that IRs are also well positioned to continue to deliver these treatments when other specialties threaten to encroach.

On this note, I would also like to mention a relatively new evidence-based certification from the EBIR portfolio. The EBIR Endovascular Specialist certification was created in 2021 and provides the opportunity for IRs specialising in this field to demonstrate their experience and knowledge.

What is the EBIR Committee's current focus? How do you envision the future of this prestigious certification?

Nice: The primary focus remains on ensuring that the EBIR is comprehensive, rigorous, fair and accessible. Our immediate priority is to grow the question bank and pool of trained contributors. Increasingly, however, societies and nations see the potential of using the EBIR as a means of accrediting their IRs and we are keen to develop these partnerships. With the support of our EBIR ambassadors, providing additional language versions will allow us to increase the uptake into regions where there are relatively few EBIR holders at present. We will also continue to review how technology can allow us to deliver the most clinically relevant, reliable and candidate friendly methods of assessment.

Crocetti: It would be ideal and desirable that obtaining the EBIR certificate was considered a goal of every IR starting out in their career. Beginning EBIR preparation during the last year/s of residency, when there is still more time to study, would be helpful on the path to passing the examination after a few years of clinical practice. Furthermore, the EBIR Committee, together with all the education committees and taskforces of CIRSE, will work on increasing the quality and the amount of learning materials available to make the process of preparing for the exam even easier and more standardised than it is now.

