

Society for Clinical Vascular Surgery

NEWSLETTER

scvs.vascularweb.org

Fall, 2004

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President's Message

Peter F. Lawrence, M.D.

The 2004 Annual meeting was a great success; several substantive changes in the structure of the meeting were responsible:

1. We had the involvement of 65 vascular fellows in the SCVS annual meeting. The fellows participated at many levels, including presentation and discussion of papers and abstracts;
2. We provided simulated clinical modules to train interested vascular surgeons in new procedures; and
3. We increased the level of audience participation by limiting invited discussion and encouraging comments from the floor.

The annual meeting not only had content addressing many facets of endovascular management, but it also providing technical training, through simulators, of carotid stenting. We have reached an agreement with Cordis and the simulator company to

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33rd Annual SCVS Meeting

March 9-13, 2005

The Biltmore Hotel
Coral Gables, Florida

Check the SCVS website
<http://scvs.vascularweb.org>
for updates on the meeting,
including the preliminary
program and on-line meeting
registration beginning in
December.

ABOUT THE HOTEL.....

Built in 1926, the Biltmore Hotel is an award winning, National Historic Landmark property offering luxury hotel accommodations in the heart of Coral Gables. The property features an 18-hole golf course, 10 lighted tennis courts, The Biltmore Fitness Center and Spa, an array of fine restaurants and lounges, a private wine cellar club and the largest hotel swimming pool in the continental United States.

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33rd ANNUAL SYMPOSIUM ON VASCULAR SURGERY
of the Society for Clinical Vascular Surgery
March 9 - 13, 2005
The Biltmore Hotel, Coral Gables, Florida

SCIENTIFIC SESSION I

Endovascular Repair Of Abdominal Aortic Aneurysms Preliminary Results Of the Phase I Evaluation Of the Trivascular AAA Stent-Graft System In the Treatment Of Abdominal Aortic Aneurysm

Ronald M. Fairman, MD, Edward Y. Woo, MD, Christopher L. Skelly, MD, Rodney A. White, MD, Barry Katzen, MD, Michel S. Makaroun, MD, Anthony Lee, MD, David H. Deaton, MD, Mannish Mehta, MD Hospital of the University of Pennsylvania, Philadelphia, PA; Harbor-UCLA Medical Center, Torrance, CA; Baptist Hospital, Miami, FL; Presbyterian University Hospital, Pittsburgh, PA; Shands Hospital, Gainesville, FL; Georgetown University Hospital, Washington, DC; Albany Medical College, Albany, NY

Health-Related Quality Of Life In Patients Participating In the AneuRx Phase II Trial

Robert B. McLafferty, MD, April Jackson, MD, Don E. Ramsey, MD, Aamir M. Zakaria, MD, Kim J. Hodgson, MD Southern Illinois University, Springfield, IL

Ruptured Abdominal Aortic Aneurysms: Endovascular Versus Open Repair

Manish Mehta, MD, R. Clement Darling, III, MD, Sean P. Roddy, MD, Philip S.K. Paty, MD, Kathleen J. Ozsvath, MD, Paul B. Kreienberg, MD, Benjamin B. Chang, MD, Dhiraj M. Shah, MD Albany Medical College, Albany, NY

Clinical Predictors Of Abdominal Compartment Syndrome Complicating Endovascular Repair Of Ruptured Abdominal Aortic Aneurysms

Manish Mehta, MD, MPH, Scott R. Fecteau, MD, R. Clement Darling, III, MD, Sean P. Roddy, MD, Kathleen J. Ozsvath, MD, Paul B. Kreienberg, MD, Philip S.K. Paty, MD, Benjamin B. Chang, MD, Dhiraj M. Shah, MD Albany Medical College, Albany, NY

Proximal Attachment Failure Of AneuRx Grafts: Is There A Role For Talent Aortic Cuffs?

Luis A. Sanchez, MD, Mark A. Farber, MD, Brian G. Rubin, MD, Patrick J. Geraghty, MD, Eric T. Choi, MD, John A. Curci, MD, Juan C. Parodi, MD, Robert Mendes, MD, William A. Marston, MD, Gregorio A. Sicard, MD Washington University School of Medicine, St. Louis, MO; University of North Carolina, Chapel Hill, NC

Respect, Don't Fear, the Short Proximal Aortic Neck: Analysis Of the BCVI AAA Ten-Year EVAR Experience

Barry T. Katzen, MD, Alexandra A. MacLean, MD, James F. Benenati, MD, Gerald Zemel, MD, Alex Powell, MD, Shaun Samuels, MD, Howard E. Katzman, MD Baptist Cardiac and Vascular Institute, Miami, FL

The Risks and Consequences Of Type III Endoleaks

L.R. Sprouse II, MD, Jacob Buth, MD University of Tennessee, Chattanooga, TN; Catharina Hospital, Eindhoven, Netherlands

SCIENTIFIC SESSION II: Peripheral Vascular Disease

The Role Of Subintimal Angioplasty In the Treatment Of Lower Extremity Ischemic Ulcers and Gangrene

Hosam F. El Sayed, MD, George H. Meier, III, MD, Greg Rushing, MD, Bernardo Mendoza, MD, Rasesh M. Shah, MD, Michael J. Marcinczyk, MD, John O. Colonna, MD, Gregory A. Barber, MD, Gordon K. Stokes, MD, Martin A. Fogle, MD Eastern Virginia Medical School, Norfolk, VA

Infrapopliteal Angioplasty For Limb-Salvage In the Setting Of Renal Failure: Do Results Justify Its Use?

Bernadette Aulivola, MD, Mauro Gargiulo, MD, Marco Bessoni, MD, Antonio Rumolo, MD, Andrea Stella, MD Università degli Studi di Bologna, Bologna, Italy, Università degli Studi di Modena e Reggio Emilia, Modena, Italy

Is Incidental Renal Arteriography Justified In A Population Of Patients With Symptomatic Peripheral Arterial Disease?

Mark P. Androes, MD, Eugene M. Langan, III, MD, Corey A. Kalbaugh, MS, Dawn W. Blackhurst, DrPH, Bruce H. Gray, DO, Spence M. Taylor, MD, Christopher G. Carsten, III, MD, John W. York, MD, Mark R. Jackson, MD, David L. Cull, MD, Greenville Hospital System, Greenville, SC

Infrainguinal Arterial Duplex Guided Balloon Angioplasty (DGBA): Early Results Of A Novel Approach For Patients With Renal Insufficiency

Enrico Ascher, MD, Natalia Markevich, MD, RVT, Anil P. Hingorani, MD, Richard W. Schutzer, MD, Suresh Nahata, MD, Manikyam Mutyala, MD, Maimonides Medical Center, Brooklyn, NY

Is Above Knee Bypass Surgery Defunct?

George H. Meier, III, MD, Hosam F. El Sayed, MD, Bernardo Mendoza, MD, Marc H. Glickman, MD, Martin A. Fogle, MD, F. Noel Parent, MD, Gregory A. Barber, MD, Gordon K. Stokes, MD, Peter M. Moy, MD, Jean M. Panneton, MD, Eastern Virginia Medical School, Norfolk, VA

A Prospective Observational Parallel Group Comparison Study Comparing Duplex Ultrasound Arterial Mapping (DUAM) As Sole Investigative Tool For Angioplasty Than Magnetic Resonance Angiography (MRA) Or Conventional Angiography (CA)

Aoife Lowery, MB BCh, Western Vascular Institute, Galway, Ireland

BEST-BTK: 12-Month Data Of the Use Of the Biotronik Absorbable Metal Stent Below the Knee

Marc Bosiers, MD, Patrick Peeters, MD, Koen Deloose, MD, Jürgen Verbist, MD, AZ St-Blasius, Dendermonde, Belgium, Imelda Hospital, Bonheiden, Belgium

SCIENTIFIC SESSION III: Carotid Disease

Significance Of Carotid Plaque Echomorphology In Embolization Risk During Carotid Artery Angioplasty and Stenting

Peter H. Lin, MD, Ruth L. Bush, MD, Wei Zhou, MD, Alan B. Lumsden, MD Baylor College of Medicine, Houston, TX

Carotid Angioplasty and Stenting Allows Treatment Of Higher Risk Patients While Maintaining Equal Outcomes Compared With Carotid Endarterectomy

Peter L. Faries, MD, Susan M. Trocciola, MD, Jason Rhee, BA, Stephanie Lin, MD, Rajeev Dayal, MD, Brian G DeRubertis, MD, Rabin Chaer, MD, Harry L. Bush, Jr., MD, Nicholas J. Morrissey, MD, James F. McKinsey, MD, K Craig Kent, MD, New York Presbyterian Hospital, New York, NY

Increased Risk Of General Anesthesia Among Diabetic Patients Undergoing Carotid Endarterectomy

Caron Rockman, MD, Stephanie S. Saltzberg, MD, Thomas Maldonado, MD, Glenn R. Jacobowitz, MD, Mark A. Adelman, MD, Paul J. Gagne, MD, Neal S. Cayne, MD, Matthew M. Nalbandian, MD, Patrick J. Lamparello, MD, Thomas S. Riles, MD, Ronnie Landis, RN, New York University, New York, NY

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Correlation Of Carotid Artery Stump Pressure With 469 Carotid Endarterectomies Performed In Awake Patients

Keith D. Calligaro, MD, Kevin Doerr, RVT, Sandy McAfee-Bennett, RVT, Kathy Mueller, RVT, Matthew Dougherty, MD, Pennsylvania Hospital, Philadelphia, PA

Different Referral Patterns Are Being Taught In Medical and Surgical Residency Training Programs

Bart E. Muhs, MD, Thomas Maldonado, MD, Chaminda Jayanetti, MD, Mark A. Adelman, MD, Glenn R. Jacobowitz, MD, Caron Rockman, MD, Patrick J. Lamparello, MD, Paul J. Gagne, MD., New York University School of Medicine, New York, NY

SCIENTIFIC SESSION IV: Thoracic & Venous Disease

Anatomical Eligibility For Endovascular Repair Of Descending Thoracic Aortic Aneurysms

Peter H. Lin, MD, Ruth L. Bush, MD, Wei Zhou, MD, Michael J. Reardon, MD, Alan B. Lumsden, MD., Baylor College of Medicine, Houston, TX

Endovascular Repair Of Thoracic Lesions Using Commercially Available Devices: Lessons Learned

Ravi K. Veeraswamy, MD, Luis A. Sanchez, MD, Brian G. Rubin, MD, Patrick J. Geraghty, MD, Eric T. Choi, MD, John A. Curci, MD, M. Wayne Flye, MD, Juan C. Parodi, MD, Gregorio A. Sicard, MD, Washington University School of Medicine, St. Louis, MO

A Biological Basis For Anatomic Variation In Descending Thoracic Aneurysms

Indranil Sinha, BA, Siddharth Bethi, MBBS, Paul Cronin, MD, Gorav Ailawadi, MD, Jonathan L. Eliason, MD, David M. Williams, MD, Peter K. Henke, MD, Matthew J. Eagleton, MD, James C. Stanley, MD, Gilbert R. Upchurch, Jr., MD, University of Michigan, Ann Arbor, MI

Does Radiofrequency Ablation Of The Great Saphenous Vein Abolish Popliteal Vein Reflux?

Anil Hingorani, MD, Enrico Ascher, MD, Natalia Maarkevich, MD, Sergio Salles-Cunha, PhD., Maimonides Medical Center, Brooklyn, NY

Endovenous Laser Therapy (EVL) and Radiofrequency Ablation (RFA) Of The Great Saphenous Vein: Analysis Of Early Efficacy and Complications

Alessandra Puggioni, MD, Michele Carmo, MD, Manju Kalra, MBBS, Geza Mozes, MD, Peter Glociczki, MD, Mayo Clinic, Rochester, MN

SCIENTIFIC SESSION V: Innovations & Complications

The Dialysis Outcome Quality Initiative (DOQI): A Regional Update On Arteriovenous Fistula Prevalence

Britt H. Tonnessen, MD, Jamie L. Ross, MD, Linda Duval, RN, BSN, Niloufar Hedrick, MS, Patricia Philliber, MD, W. Charles Sternbergh, III, MD, Samuel R. Money, MD, Ochsner Clinic Foundation, New Orleans, LA; End Stage Renal Disease Network 13, Oklahoma City, OK

Factors Affecting Perioperative Mortality and Wound Related Complications Following Major Lower Extremity Amputations

Patrick A. Stone, MD, Sarah K. Flaherty, BS, J. David Hayes, MD, Stephen M. Hass, MD, J. Michelle Jackson, DO, Matthew J. Hofeldt, MD, Casey S. Hager, MD, Michael Elmore, MD, Ali F. AbuRahma, MD, West Virginia University School of Medicine - Charleston Division, Charleston, WV; Charleston Area Medical Center Health Education and Research Institute, Charleston, WV

Percutaneous Isolated Limb Perfusion (PILP) For Severe Ischemia In Non-Revascularization Candidates: Is This Real Or Just Fantasy?

Ahsan T. Ali, MD, John F. Eidt, MD, Shelly Bledsoe, MD, Venkat Kalapatapu, MD, Mohammed Moursi, MD, University of Arkansas for Medical Sciences, Little Rock, AR

Encouraging Results With Endoscopic Vein Harvest For Infrainguinal Bypass

Luke S. Erdoes, MD, Timothy P. Milner, MD, University of Tennessee, Chattanooga, TN

33rd Annual SCVS Meeting

March 9-13, 2005

The Biltmore Hotel, Coral Gables, Florida

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In its heyday, The Biltmore played host to royalty, both Europe's and Hollywood's. The hotel counted the Duke and Duchess of Windsor, Ginger Rogers, Judy Garland, Bing Crosby, Al Capone and assorted Roosevelts and Vanderbilts as frequent guests. A product of the Jazz Age, big bands entertained wealthy, well-traveled visitors to this American Riviera resort.

In keeping with traditional European grand hotels, Old World charm permeates the property. The Biltmore's design is considered "Mediterranean revival," based predominantly on Spanish style with Moorish and Italian accents, with large stone columns, decorative hand-painted ceilings, Italian marble floors and an open-air courtyard and fountains. The Biltmore's centerpiece is its 93-foot copper-clad tower, modeled after the Giralda Tower in Seville, Spain.

Local Attractions

Bal Harbour Shops—One of the most prestigious fashion Mecca's in the world, Bal Harbour is upscale shopping at its best.

Bayside Marketplace - An open-air shopping complex located at the site of the historic Pier 5 Marketplace, Bayside features a multitude of national brand name and specialty shops.

CocoWalk - Located in the heart of Coconut Grove, CocoWalk offers a variety of upscale shops, restaurants, theaters and nightclubs.

Downtown Coral Gables—Located in the heart of South Florida's landmark shopping district, Miracle Mile and downtown Coral Gables offer designer shops, art galleries, and fabulous restaurants.

Fairchild Tropical Garden – Established in 1938, the 83-acre garden is one of the world's preeminent botanic gardens, with extensive collections of rare tropical plants including palms, cycads, flowering trees and vines.

Miami Art Museum - MAM exhibits, collects, preserves and interprets international art with an emphasis on the art of the western hemisphere.

Venetian Pool - In the midst of one of Coral Gables' residential neighborhoods is perhaps the only swimming pool anywhere to be included in the National Register of Historic Places, with its vine-covered loggias, shady porticos, Spanish fountain, three-story observation towers and cascading waterfalls.

The Village of Merrick Park – Just two miles from the Biltmore Hotel, the Village of Merrick Park is an inviting retail destination that offers an unmatched fashion, home and dining experience.

Vizcaya Museum and Gardens - One of South Florida's leading attractions and a National Historic Landmark, Vizcaya is a 50-acre Italian Renaissance estate featuring a priceless collection of European art and antiques.

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www.biltmorehotel.com

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Membership information is available on the SCVS website (scvs.vascularweb.org) and by contacting the SCVS Administrative Office, (978) 927-8330.

Highlights from the 2004 Annual Meeting

More than 270 physicians and guests attended the 32nd Annual Symposium held from March 10-13, 2004 in Rancho La Palmas Marriott Resort & Spa in Rancho Mirage, California. Traditionally, one of the most exciting forums for the exchange of ideas and experience in vascular surgery, this year's meeting attracted participants from all over the world.

The Program Committee, chaired by Dr. George H. Meier, III, assembled an outstanding variety of state-of-the-art papers and incorporated breakfast sessions, how-to videos, poster presentations, symposia, and postgraduate courses to enhance the educational experience.

Thirty papers were presented in sessions divided into infrainguinal, av access, visceral and carotid, endovascular techniques, DCT/PE, and endografts and aneurysms.

Thirty-two posters were presented and covered such topics as "Instability Of the Proximal Aortic Neck Following Endoluminal Abdominal Aortic Aneurysm Repair: Predictors Of Device Failure"; "The Expansion Rate Of Abdominal Aortic Aneurysms Based On Perpendicular Diameter Measurements and Changes In Aneurysm Volume"; and "Impact Of Duplex Ultrasonography In the Management Of Acute Limb Threatening Ischemia From Thrombosed Popliteal Aneurysms."

Additional Highlights included:

- ♦ The **Distinguished Lecturer, Richard M. Green, MD**, presented an update on "*Where Do We Go From Here?*"
- ♦ The **Distinguished Lecturer, Thomas J. Fogarty** spoke on "*The Impact of Technology on Surgical Specialties.*"
- ♦ The **2004 Peter B. Samuels Award Recipient** was **Brian S. Knipp, M.D.**, University of Michigan Medical Center, Ann Arbor, Michigan for his paper, "*Diffusion Of New Technology In the Treatment Of Renovascular Hypertension In the United States: Surgical Revascularization Versus Catheter-Based Therapy, 1988-2001*"
- ♦ The Allastair **Karmody Poster Presentation Award** was given to: **Charles E. Fields, M.D.** for his poster, "Obesity Does Not Increase the Risk Of Complications After Open Or Endovascular Repair Of Abdominal Aortic Aneurysm."
- ♦ Postgraduate Course – "*The Modern Vascular Laboratory: Updates on Diagnostic and Therapeutic Techniques*", chaired by Dr. Enrico Ascher focused on protocols in the laboratory, coding and reimbursement issues, and treatment of vascular disease.
- ♦ Postgraduate Course – "*Issues of Interests in the Contemporary Dialysis Access Practice*", chaired by Dr. Michael Silva, focused on Dialysis Outcome Quality Initiatives (DOQI), guidelines for fistula and grafts, endovascular devices, and duplex scanning and transposition procedures.
- ♦ **International Symposium**, moderated by Drs. Kim Hodgson and Frank Veith, included: Geoff White, MD, Sydney, Australia; Marc Bosiers, MD, Dendermonde, Belgium; John Anderson, MD, Ashford, South Australia; and Franj Veith, MD, Bronx, New York.
- ♦ Symposium on "*The Endovenous Revolution: Fact or Fiction?*", chaired by Drs. Peter Gloviczki and Anthony Comerota, review current results with catheter-directed thrombolysis and mechanical thrombectomy.
- ♦ Symposium on "*Management of Endovascular Complications*", chaired by Dr. Alan Lumsden, presented a comprehensive review of the most common endovascular techniques and managing complications of each.

VISIT THE WEBSITE

You can view the SCVS Newsletter, gather up-to-date annual meeting information, download membership information and applications, read about Society activities, and pay your membership dues on-line at:

scvs.vascularweb.org

NEW TECHNOLOGY

Vascular Surgery Technology: Commentary and Proposal

Charles M. Klieman, M.D.

My brother in law repairs antique and late model cars. Each year he spends a few thousand dollars subscribing to a database of parts and equipment that he needs to do his job. Without this catalogue he would be unable to keep up with the numerous new product lines, new ways of performing his tasks, and a means of communicating through a central database with his vendors. Vascular surgeons also are mechanics, and we should have access to comparable information considering the importance of the engines we work on. We need a catalogue of products, updated periodically, that provides information on the latest equipment and technology for our specialty.

There are a vast numbers of new products and technologies in research, clinical testing or accepted use. Just look at all the new start up companies and new products promoted to us in convention booths, journal ads or from reps in our office. There is a lot of information to get our arms around. I try and keep up with the latest and greatest toys and techniques that are developed for our use. But trying to keep up requires dedicated time, a commitment to attend meetings, reading numerous journals and then getting hands on experience.

In order to solve this problem and enhance access to this information in a convenient format, I propose the SCVS develop an interactive web site for Vascular Surgery Technology. This would be a primary resource from which we could find information on any product, which products are needed in a procedure, what companies supply them and instructions on use.

In thinking about vascular technology in a logical way we have to break it down into categories such as: arterial, venous, interventional, open surgical, imaging, instruments, drugs, research etc. Let's think about how we would construct this resource. I imagine a web site with drop down windows that would be cross-referenced in a database. One window would list categories such as: arterial, venous, endovascular, imaging, bypass, thrombectomy, dialysis, and so forth. The next window would list products: instruments, grafts, catheters, stents and so on. The next window would list procedures which would show all the products needed for a specific procedure with a cross reference to the various companies that provide these products. The next window would list medical device companies. Click on them and you will find all the vascular surgery products they supply.

And of course there would be a keyword search. Example: type in dialysis and you would get products and companies relevant to those procedures. If you want to check out aortic stent-graft, all the products and companies would be easily accessible via this web site.

Once you have found a product, there can be an interactive demonstration of how it works, video, articles on the technology, a link to the company website and even comments about the product from users.

We need to organize all this information into a logical database that is accessible to vascular surgeons in an easy to use and interactive format. I have looked for such a comprehensive listing through the many vascular surgery organizations and company web sites. Nothing like this exists to date... at least that I could find. I recommend that the SCVS add a Vascular Surgery Technology committee to its organization that would oversee the development of this database of information and web site.

The advantages are obvious.

1. It would create the leading source for information on technologies important to our specialty.
2. Vascular surgeons would have a comprehensive resource for acquiring information on new technologies and products.
3. SCVS would be a leader in the field of listing, analyzing and even recommending new technologies to its members.
4. New surgeons would be attracted to Vascular surgery as they see our commitment and leadership in making information and education accessible to its members.
5. It would enhance our ability to acquire the skills and education needed to keep up and advance the science of vascular surgery.

The difference between what vascular surgeons do vs. cardiologists and radiologists is in the skill of our hands, the quickness of our minds and the spirit of innovation. These qualities are becoming tested as the specialties overlap and other specialties challenge our turf. Cardiologists and radiologists can never do what we do but we on the other hand can do what they do through practice and knowledge. One of the main areas of knowledge that we need to excel in, is knowledge of devices and technologies.

It is important that we continue to be leaders in the organization and development of technologies for both endovascular and open vascular surgery. We have learned much from our colleagues in other interventional specialties, but as our specialty and skills mature, we need to have easier access to the comprehensive information that is required to provide the excellence that is expected of us. One part of our specialty, endovascular surgery has become inclusive of the other interventional specialties. We compete with them and we work with them as friends and colleagues. But we must be leaders in our own right in every aspect of the performance of vascular surgery. Access to information is what will make that possible.

This is a large task, but an important and timely one. After years of doing surgery, I still find it a challenge to know everything I need to know. I think this proposal, if implemented, will make that task easier.

Feedback can be sent to: cklieman@aol.com

Dr. Klieman has been an active and dedicated Associate Editor of this Newsletter for many years and has contributed significantly with his columns on technology. In this issue, he proves to be provocative with new ideas on information technology. This is another challenge to the SCVS that, with implementation, will again put us in the forefront of innovation and productive collaboration with industry.

H. Dardik, Editor

Highlights of the SCVS ANNUAL BUSINESS MEETING

March, 2004, Rancho Mirage, California

President's Report

Dr. Hodgson reported that he and Dr. Meier were successful in securing the Gore Fellows program to precede the SCVS meeting and encouraged members to attend the Gore functions as a demonstration of our appreciation for their support for the meeting. To encourage fellows to stay for the SCVS program, Dr. Meier offered Gore fellows the opportunity to give the first question on oral presentations, and as an alternative, invited fellows could write review articles for the Newsletter with Dr. Dardik. The Council responded very favorably to these developments and strongly supported the active development of these programs for next year. The Council encouraged Dr. Hodgson and Lawrence to meet with Gore to review the SCVS-Gore meeting and to actively encourage the partnership in 2005.

In addition to moving their meeting to immediately precede the annual scientific session, Gore is once again the major sponsor for the SCVS meeting. Other major sponsors for the meeting included Boston Scientific, Otsuka, Medtronic with additional major contributions from Cordis, Genentech, and VNUS.

Dr. Hodgson pointed out that SCVS had made significant strides over the last year to make the Society and meeting more exciting for the members and particularly younger members. The simulator challenge was developed for the members to gain increased exposure to new skills and endovascular techniques. He also noted that the coordination of the Gore Fellows program afforded many residents an opportunity to gain exposure to SCVS and he hoped that this program would continue for many years in the future.

Dr. Hodgson also reported that SCVS agreed to support the American Board of Vascular Surgery's effort to conduct a survey to determine whether to support a primary certificate in vascular surgery or continue to pursue an independent board for vascular surgery. He also noted the creation of the Advisory Board, Chaired by Dr. Enrico Ascher, as a mechanism for the Society to undertake societal long range planning.

Members expressed interest in a more open system of nomination with broader and more representative Nominating Committee involvement, as well as a formal mechanism for seeking office communicated to the membership in advance of the meeting. Following favorable discussion, it was agreed to direct the Constitution and Bylaws Committee to develop proposed amendments to the SCVS Bylaws to revise the nominating and elections process.

Dr. Hodgson reported that the SCVS had received a request from the JVS Editors, Drs. Cronenwett and Seeger to eliminate societal issues and to publish SCVS manuscripts throughout the year. Staff prepared a ballot which was distributed to all Council members for consideration one month ago and reported that the vote was unanimous in support of the change. The Council received this report for information.

Secretary's Report

Dr. Keith Calligaro reported that SCVS has 654 Active members, 24 Honorary members, 1 Inactive member, 239 Senior members and 88 Candidate members for a total membership of 1,006.

Over the past year, the Council has engaged in the following activities:

The past year has been very active in working with industry to

expand both fundraising and programming. A schedule has been created that will allow Gore to hold its Annual Resident Forum just prior to the SCVS Annual Meeting and we are continuing to explore ways for residents to be more involved in the program for the SCVS meeting and improve the educational experience for resident.

Also new this year is the Simulator Challenge featuring residents competing with a variety of procedures that would culminate in finals using renal.

Agreement to drop the Hume Lecturer title, and instead to hold two Distinguished Visiting Lecturers. This year's Distinguished Visiting Lecturers are Dr. Richard M. Green and Dr. Thomas J. Fogarty.

Dr. Hodgson was appointed as the SCVS Representative to the American College of Surgeons Board of Governors for a three-year term.

Drs. Ash Mansour and J. Dennis Baker will be designated as SCVS representatives to the ICAVL Board.

The Council recognized the deaths of Drs. Sheldon E. Cohen, Fresno, CA; John J. Cranley, Cincinnati, OH; and Philip M. Marcus, Beverly Hills, CA.

The Council approved Dr. Theodore D. Aylward's request for transfer to Senior Membership and Dr. Lawrence W. O'Holleran's request for resignation.

Report of the Treasurer

Dr. Brown reported that he and Dr. Hodgson and the SCVS Council have worked diligently and that the fundraising efforts for the Annual Meeting set a record for the year. He reported they had been successful in obtaining sponsor commitments for this Annual Meeting of \$208,000. On behalf of SCVS, he thanked the following sponsors: Major Sponsors: Abbott, Boston Scientific, W. L. Gore, Medtronic and Otsuka. Sponsors: Cordis Endovascular, Genentech, and VNUS Medical Technologies

Report of the Recorder

Dr. Alan Lumsden reported that 151 abstracts were received, of which 30 were selected for oral and 40 for poster presentation.

Membership Committee

The Membership Committee considered 44 applications for Active membership and 6 applications for Candidate membership. All candidates presented for membership in the SCVS were approved.

Program Committee

Dr. George Meier reported that there were 118 member physicians, 44 guest physicians, 24 residents, 51 senior fellows and 6 allied health professionals who attended the meeting this year for a total attendance of 243.

He thanked the members of the Program Committee for a great job! Dr. Anil Hingorani, Dr. Robert McLafferty, Dr. Kim Hodgson, Dr. Peter Lawrence, Dr. Keith Calligaro, and Dr. Alan Lumsden.

Postgraduate Education Committee

Dr. Sidawy reported that this year's Postgraduate Course was an outstanding success. He thanked the members of the Postgraduate Education Committee, Drs. Bruce Brenner, Larry Hollier and Enrico Ascher.

continue training our membership at the annual meeting next year, after carotid stenting receives anticipated CMS reimbursement. There will be another opportunity next year to develop the skills that can lead to privileges at your hospital, although we don't believe that window will remain open for a long period.

The changes in the meeting were consistent with the fundamental mission of the SCVS, which remains:

1. To focus on the education and training of clinicians who perform vascular surgery as a primary component of their practice;
2. Bring cutting-edge technology to the practicing vascular surgeon; and
3. Hold the SCVS meetings in an atmosphere that is conducive to an optimal learning environment.

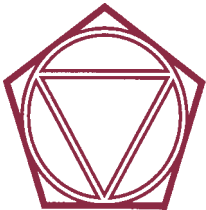
Kim Hodgson, our immediate past president, completed a very successful year. His presidential address focused on what he has been practicing throughout his career- teaching vascular surgeons the catheter and endovascular skills so that they can continue to have a significant role in managing all diagnostic and therapeutic aspects of patients with vascular disease.

What do we plan to do in the next year? Your leadership has the following objectives:

1. Continue to increase attendance at the annual meeting by providing value for practicing vascular surgeons and the medical device industry.
2. Involve vascular fellows in all aspects of the meeting, including discussion and presentation of papers. Fellows are the future of our organization, and we would like them to consider the SCVS as their most valued organization.
3. Offer hands-on training courses in endovascular and new surgical procedures.
4. Increase the number of presentations at the annual meeting related to surgical technique, so that SCVS members have exposure to the technical aspects of difficult procedures.
5. Represent your views regarding the future direction of vascular surgery and the training and certification of vascular surgeons. Your leadership will take your opinions to the SVS, American Board of Surgery, and American Board of Vascular Surgery.

I am excited about this year and invite you to contact me about additional issues that are important to you.

Peter F. Lawrence, M.D.



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