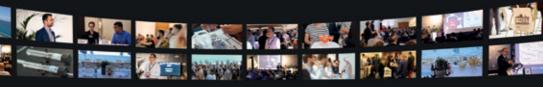


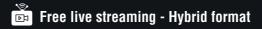
Multidisciplinary European Endovascular Therapy



ER 16-18, <mark>2020</mark> RADISSON BLU



FINAL PROGRAM



COURSE DIRECTORS

Jérôme Brunet, Laurent Casbas, Koen Deloose, Eric Ducasse, Yann Gouëffic, Elixène Jean-Baptiste, Richard McWilliams, Barend Mees, Isabelle Van Herzeele

ORGANIZING COMMITTEE

Koen Deloose, Eric Ducasse, Yann Gouëffic, Barend Mees

HONORARY DIRECTORS

Max Amor, Nicola Mangialardi





Edito

Welcome to i-MEET 2020.

It is a great pleasure to welcome you to the very last edition of the i-MEET congress in Nice.

Despite the latest developments of the health situation related to the Covid-19 pandemic, we wish to do our best to make this one a success, with an hybrid solution mixing face-to-face and digital for speakers and participants who are not be able to attend. Our objective in this particular context is to maintain exchanges and interactivity, through industry workshops, clinical cases, videos, debates and audience discussion and we hope you will enjoy. We would like to warmly thank our outstanding scientific committee and our Faculty for their commitment, as they did a great job with us in putting together a scientific program which promises to be very exciting.

Take your time to visit the exhibition and discover the Industry news as it is only thanks to their precious help that we managed to organize this congress.

Join us for the official dinner on Thursday night on the Radisson Blu private beach to share with us a unique moment of conviviality.

Again, welcome to i-MEET and to Nice, and have fun!

The **I-MEET** Directors Koen Deloose, Eric Ducasse, Yann Gouëffic, Barend Mees











Faculty*

Michel BARTOLI, Marseille, France

Frederico BASTOS GONCALVES, Lisboa, Portugal 👜 Antonio MICARI, Parlermo, Italy 👜

Paul BEVIS.

Leo BONATI. Basel. Switzerland

Marianne BRODMANN, Graz, Austria

Jérome BRUNET, Avignon, France

Laura CAPOCCIA. Roma, Italy

Enrico CIERI, Perugia, Italy

Frédéric COCHENNEC. Créteil, France

Koen DELOOSE, Dendermonde, Belgium

Massimiliano DI PRIMIO, Le Chesnay, France

Eric DUCASSE, Bordeaux, France

Yann GOUEFFIC. Paris. France

Steven KUM, Novana, Singapore 👼

Stéphan HAULON, Le Plessis Robinson, France

Elixène JEAN-BAPTISTE, Nice, France

Piotr KASPRZAK, Regensburg, Germany

José Ignacio LEAL LORENZO, Madrid, Spain 💩

Nicolas LOUIS, Nîme, France

Lieven MAENE, Aalst, Belgium 👜

Barend MEES. Maastricht. The Netherlands 👜

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Bahaa NASR. Brest. France

Lorenzo PATRONE, London, United Kingdom

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Eric STEINMETZ, Dijon, France 👼

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Adeline JAPPIOT, Dijon, France

Annaick PERES, Brest, France

Fabienne RANNOU, Nantes, France

Cyndie ROULET, Nantes, France

Clarisse SENET, Nantes, France

Confirmed at date of printing and subject to change



Synoptic

	Wednesday September 16		Thursday September 17		Friday September 18
		08.00	Welcome coffee	08.00	Welcome coffee
		08.30	Critical, case-based, "global CLTI-guidelines" check	08.30	Pushing the limits
		09.30	Less is more, also in complex cases	09.30	Industry Symposium
		10.00	Coffee break	10.00	Coffee break
		10.30	Carotids how to deal with complications?	10.30	Difficult EVAR
		11.30	My worst or my most difficult aortic cases. Part 1	11.30	Case based, remaining open questions below the knee the masters' final answers
		12.30		12.30	Awards ceremony
13.00			Lunch	12.40	Lunch & adjournment
	Lunch	14.00	My worst or my most difficult aortic cases. Part 2		
14.00	Industry Workshop 1	15.00	My way to treat iliac and SFA lesions		
15.05	Industry Workshop 2	16.00	Coffee break		
16.05	Coffee break	16.45			
16.30	Industry Workshop 3		Associate faculty program		
17.35		17.00	End of sessions Official diner		
	Industry Workshop 4		orneral direct		Vendredi 18 Septembre
18.35	End of sessions			9.30	Session paramédicale
				11.50	

SCIENTIFIC PROGRAMME

WEDNESDAYSEPTEMBER 16

Ground level

13.00	Lunch
14.00	Industry Workshop 1
15.05	Industry Workshop 2
16.05	Coffee break
16.30	Industry Workshop 3
17.35	Industry Workshop 4
18.35	End of sessions

THURSDAY SEPTEMBER 17

8.00 8.30	Welcome coffee Critical, case-based, "global CLTI-guidelines" check Moderators: Jerome Brunet, Eric Ducasse, Yann Gouëffic
	Animator: Koen Deloose
8.30 8.42 8.54 9.06 9.18	The difference between guidelines and a real world case. Koen Deloose CLI after femoro-popliteal graft failure: what else? Jérome Brunet Clinical case n°3. Marianne Brodmann The GLASS staging a reality check. Lieven Maene Discussion
9.30	Less is more, also in complex cases Moderators: Yann Gouëffic, Jérome Brunet
9.30	When, where and how: low profile revascularization of complex occlusions. Jos Van Den Berg
9.38	A truly minimally invasive treatment strategy for complex fempop interventions. Koen Deloose
9.46 9.54	Size matters – 4F ambulatory treatment is safe and feasible. Eric Steinmetz Discussion
10.00	Coffee break

10.30	Carotids how to deal with complications? Moderator: Eric Ducasse, Barend Mees , Nicolas Louis Animator: Elixène Jean-Baptiste
10.30 10.40 10.50 11.00 11.10 11.20	Management of complications during CEA. Elixène Jean-Baptiste Management of complications during transfemoral CAS. Enrico Cieri Radial approach for the CAS: pros and cons. Nicolas Louis Management of complications during TCAR. Jose Ignacio Leal Lorenzo Managing restenosis post-CEA/CAS. Laura Capoccia MRI in carotid artery disease: luxury or necessity? Leo Bonati
11.30	My worst or my most difficult aortic cases. Part 1 Moderators: Michel Bartoli, Stéphan Haulon, Giovanni Pratesi Animator: Eric Ducasse
11.30 11.45 12.00 12.15	My worse visceral nightmare during TAAA bEVAR. <i>Giovanni Pratesi</i> Aortic disaster! <i>Piotr Kasprzak</i> Most difficult case, hard experience! <i>Michel Bartoli</i> Discussion
12.30	Lunch break
14.00	My worst or my most difficult aortic cases. Part 2 Moderators: Michel Bartoli, Stéphan Haulon, Giovanni Pratesi Animators: Barend Mees 👼 Eric Ducasse
14.00 14.15 14.30 14.45	My most difficult arch case. Stéphan Haulon My most interesting dissection case. Rao Vallabhaneni My most difficult thoracoabdominal case. Paul Bevis Migration never ends. Barend Mees
15.00	My way to treat iliac and SFA lesions Moderator: Frédéric Cochennec, Bahaa Nasr Animator: Yann Gouëffic
15.00 15.12 15.24 15.36 15.48	Long SFA de novo lesion. Marianne Brodmann Are covered stents mandatory for iliac lesions? Yann Gouëffic Common Iliac and external occlusion. Frédéric Cochennec In-stent restenosis. (Tosaka 3) Steven Kum CFA stenosis. Bahaa Nasr
16.00	Coffee break
16.30	Associate faculty program Animators: Koen Deloose , Eric Ducasse, Yann Gouëffic, Barend Mees
16.30	A case of skin ulceration and exposure of hero graft after multiple access complications. <i>Joana Silva</i>
16.40 16.50	Renal function after endovascular abdominal aortic aneurysm repair. Arnaud Kerzmann The use of a specific peripheral stent system from a transbrachial artery access to treat common and deep femoral arteries. Eve-Marie Podevyn
17.00	End of sessions

FRIDAY SEPTEMBER 18

8.00	Welcome coffee
8.30	Pushing the limits Moderators: Massimiliano Di Primio, Yann Goueffic, Eric Ducasse Animator: Koen Deloose
8.30 8.45 9.00 9.15	To deal with calcifications. Steven Kum (a) No option? Massimiliano Di Primio Retrograde approach for claudicants. Eric Ducasse Options for long long femoropopliteal recanalization. Antonio Micari
9.30	Industry Symposium
10.00	Coffee break
10.30	Difficult EVAR Moderators: Eric Ducasse Animator: Barend Mees
10.30 10.45 11.00 11.15	Connective Tissue Disease. Bijan Modarai illiac aneurysm. Barend Mees illi
11.30	Case based, remaining open questions below the kneethe masters' final answers Moderator: Eric Ducasse Animator: Yann Gouëffic
11.30	DCB or POBA below the knee? this is the final answera case. Marianne Brodmann
11.45	Foot arch reconstruction or preserving collaterals? this is the final answera case. Lorenzo Patrone
12.00	Angioplasty non responding tibials : atherectomy or stenting? this is the final answer a case. <i>Marc Sirvent</i>
12.30	Awards ceremony
12.40	Buffet lunch & adjournment

SESSION PARAMEDICALE FRANCOPHONE

FRIDAY SEPTEMBER 18

Ground level

10.50

11.10

12.40

Modérateurs : Fabienne Rannou, Clarisse Senet

Guillaume Cazorla, Laura Gayou

Anne Laure Berthou, Annaick Peres

Déjeuner buffet et clôture

Chirurgie Vasculaire.

9.00	Café d'accueil
9.20	Etude comparative des systèmes de fermeture pour les endoprothèses aortiques per-cutanées. Ophélie Guilbert, Adeline Jappiot
9.40	Le traitement endovasculaire des sténoses ilio-hypogastriques. Nicolas Aurousseau
10.00	Coffee break
10.30	La recherche clinique en chirurgie vasculaire : missions et interactions. Swanny Fouchard, Cyndie Roulet

Création de fistule artério-veineuse pour hémodialyse en endovasculaire.

E-santé: les nouvelles technologies dans le suivi des cicatrices post

INDUSTRY SYMPOSIUM

FRIDAY SEPTEMBER 18

Audtorium level -2

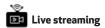
09:30 - 10:00



Tackle real long lesions : can half sized and low COF implants make a difference?

Speakers: Jérôme Brunet, Yann Goueffic

From data to clinical cases



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Thin struts, low COF

In BIOFLEX-COF RCT, Pulsar stent shows significantly lower restenosis rates at 12 months¹ than patients treated with a high COF implant



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1. Funovics M. Differences in clinical outcomes of low COF stent vs high COF stent proven in clinical practice. BIOFLEX-COF RC

COF=Chronic Outward Force; RCT = Randomized Controlled Trial.

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Specifications are subject to modification, revision and improvement



INDUSTRY WORKSHOPS

WEDNESDAYSEPTEMBER 16

Ground level

14:00 - 15:00



Prepare the vessel and combine technologies to optimize results

Co-convenors: Nicolas Louis, Jérôme Brunet

- Atherectomy: a choice tool to prepare the vessel
- Presentation and discussion on clinical case
- The contribution of the imagery in the vessel preparation
- Console demonstration and manipulation

15:05 - 16:05



WavelinQ: Percutaneous fistulas, creation and follow-up of dialysis patients

Lead convenor: Eric Ducasse

- Patient selection: ultrasound mapping workshop "Who is candidate?"
- WavelinQTM EndoAVF procedure overview case report
- EndoAVF follow up and cannulation program

Coffee break

16:30 - 17:30

BIOTRONIK

Lead convenor: Nicolas Louis

- Why 0.018' is my first choice for complex and daily fempop lesions? Interest of triaxial stent system.
- How to double your chance of CTO recanalization success with dual lumen catheters?

17:35 - 18:35



CTOs in femoropopliteal arteries: from nightmares to sweet dreams

Moderator: Eric Ducasse

Speakers: Eric Ducasse, Nicolas Louis



NOW WITH 2 NEW DIAMETERS 5 mm and 6 mm

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THE RIGHT SIZES TO SIMPLIFY YOUR PROCEDURE AND **IMPROVE RESULTS***

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- OPTIMIZE LUMINAL GAIN
- SIMPLIFY DECISIONS AROUND **VESSEL PREP**

RESULTS MATTER



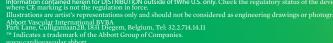
PLATFORM MATTERS







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INFORMATION

CONGRESS VENUE

Radisson BLU Hotel

223, promenade des Anglais, 06200 Nice, France

REGISTRATION & INFORMATION DESK

Wednesday September 16	12.30 – 19.00
Thursday September 17	08.00 - 18.30
Friday September 18	08.00 - 14.00

OFFICIAL DINNER

Thursday September 17, 20.00 till midnight

Radisson Blu Hotel Private beach Participation fee: 70€ VAT incl. per person Welcoming drink / seated dinner Dress code: casual chic



COVID INFORMATION



- · Wearing a mask is compulsory in the congress area
- Temperature measurement at the entrance
- Surgical masks & hydro-alcoholic gel available at registration desk
- Distanciation respected in the plenary room, preview room, workshop room and in
- One way traffic flow around the buffets and service provided by the waiters during coffee breaks
- Table service at breakfast and lunch (no buffet service) at the hotel restaurant (ground floor)
- Regular cleaning and disinfection

CONTACTS

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INDICATIONS FOR USE: MYNX CONTROL™ VCD is indicated for use to seal femoral arterial access sites while reducing times to hemostasis and ambulation in patients who have undergone diagnostic or interventional endovascular procedures utilizing a 5F, 6F, or 7F procedural sheath. PRECAUTIONS: MYNX CONTROL™ VCD should not be used by a trained licensed physician or healthcare professional. MYNX CONTROL™ VCD should not be used in patients with a known allergy to PEG. MYNX CONTROL™ VCD should not be used with sheaths longer than 12cm effective length or incompatible sheaths listed in Table 1 of the Instructions for Use. WARNINGS: Do not use if components or packaging appear to be damaged or defective or if any portion of the packaging has been previously opened. DO NOT REUSE OR RESTERILIZE. MYNX CONTROL™ VCD is for single use only. The catheter is loaded with a single hydrogel sealant. Reuse of the device would result in no delivery of hydrogel sealant. Do not use MYNX CONTROL™ VCD if the puncture site is located above the most inferior border of the inferior epigastric artery (IEA) and/or above the inguinal ligament based upon bony landmarks, since such a puncture site may result in a retroperitoneal hematomar/bleed. Perform a femoral angiogram to verify the location of the puncture site. Do not use MYNX CONTROL™ VCD if the puncture is through the posterior wall or if there are multiple punctures, as such punctures may result in a retroperitoneal hematomar/bleed. For Healthcare Professionals Only. Important information: Prior to use, refer to the Instructions for Use supplied with this device for indications, contraindications, side effects, suggested procedure, warnings and precautions. As part of its continuous product development policy, Cordis reserves the right to change product specifications without prior notification. CORDIS, the Cordis LOGO and MYNX CONTROL are trademarks of Cardinal Health and may be registered in the US and/ or in other countries. © 2019 Cardinal Health. All Rights Reserved. 100542236 07/2

NOTES



The Evolution of Thin-Walled Sheaths

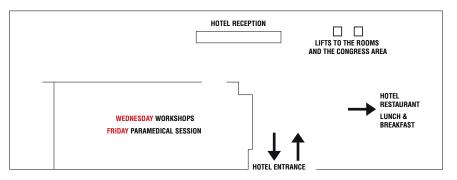
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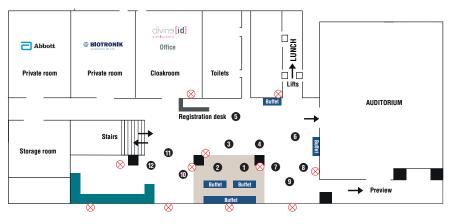
CONGRESS VENUE PLAN

WORKSHOPS - GROUND FLOOR

14h-15h00	15h05-16h05	16h30-17h30	17h35-18h35
BOSTON SCIENTIFIC	BD BARD	BIOTRONIK	IVASCULAR



EXHIBITION HALL & AUTDITORUM - LEVEL -2

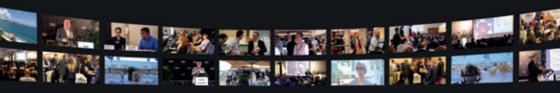


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3	BOSTON SCIENTIFIC
4	COOK MEDICAL

BOOTH	COMPANY
5	GORE
6	BENTLEY
7	IVASCULAR
8	MEDTRONIC

BOOTH	COMPANY
9	TERUMO AORTIC
10	TERUMO
11	GETINGE
12	PENUMBRA





ACKNOWLEDGEMENTS 2020































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