



Vascular highlights at CIRSE 2012

25 September 2012, Vienna, Austria: Vascular interventions are the foundation stones of interventional radiology (IR), and remain an important aspect of IR practice. Accordingly, CIRSE 2012 dedicated a large number of sessions to the broad sweep of these valuable procedures.

A range of hands-on workshops, debates, foundation courses, workshops and free papers discussed many conditions – here, we give an overview of two of the highest-attended of the sessions.

Controversies in EVAR

The *Controversies in EVAR* session offered lively debate on one of the more contentious vascular IR topics. The session opened with a debate on whether modern closure devices have enabled EVAR to become a pure IR procedure, or whether collaboration between surgeons and IRs is still required.

Arguing that the evidence for percutaneous EVAR is strong enough to render surgically assisted EVAR redundant in most cases was Dr. Trevor Cleveland (IR, Sheffield/UK). His opponent, Dr. Ian Loftus (vascular surgeon, London/UK) agreed, but asserted that trained vascular surgeons can also perform the procedure unaided and advocated further collaboration. He warned that territorial debates will only lead to poorer patient care, as “stent sceptic” surgeons will become inclined to push for using surgical techniques.

The second debate was on whether EVAR has proven to be cost-effective, with Prof. Johannes Lammer (IR, Vienna/AT) arguing that it is, and that existing data on the subject is based on out-dated stent grafts and limited operator experience, and does not take into account the current follow-up imaging modalities. Prof. Peter Taylor (vascular surgeon, London/UK) believes that nonetheless, QALY data and costs do not currently support using EVAR. While Prof. Taylor is an advocate of EVAR, he argued that its strengths as a therapy option do not lie in its cost-effectiveness.

Portal hypertension

Prof. Götz Richter (IR, Stuttgart/DE) presented an update on TIPS trials, citing both established and new evidence. Advances have overcome some of the initial limitations (such as restenosis), creating more and clearer indications for TIPS, as well as more clinical value.

Dr. Jean-Yves Gaubert (IR, Marseille/FR) addressed the issue of portal vein stenosis and thrombosis, presenting new data showing that PVT is no longer a contraindication for TIPS. Dr. Luis Rosa (IR, Lisbon/PT) discussed TIPS for Budd-Chiari syndrome, and how to identify and treat this heterogeneous disorder group.

Prof. Shozo Hirota (IR, Nishinomiya/JP) presented data on the use of balloon-occluded retrograde transvenous obliteration (BRTO) for gastric varices (GV). BRTO improves liver volume and function, as well as albumin levels. It is effective for the occlusion of GV, ectopic varices and portosystemic encephalopathy.

The CIRSE Annual Congress and Postgraduate Course is a trend-setting, dynamic and service-oriented event, dedicated to education, science and innovation. It covers the entire spectrum of Interventional Radiology and is the largest and most comprehensive congress in the field of minimally invasive image-guided therapies. The congress is organised by the Cardiovascular and Interventional Radiological Society of Europe (CIRSE).

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