

Determinazione del Responsabile Ufficio Formazione nº 1446 del 2 3 AGO. 2016

Oggetto: Aggiornamento senza oneri, Dirigente Medico, Dott. Del Prete Giuseppe.

Pubblicata all'Albo Pretorio dell'Azienda Ospedaliera a partire dal <u>2 3 AGO. 2016</u> per 15 giorni consecutivi e posta a disposizione per la consultazione.

Il Responsabile Ufficio Formazione

Visto

il D. Lgs. n. 502/92 e successive modificazioni ed integrazioni;

Viste

le Leggi Regionali n. 10/2006 e n. 05/2007;

Vista

la Deliberazione n. 263 del 04.03.2015, con la quale il Commissario Straordinario ha autorizzato il Responsabile dell'Ufficio Formazione Dott. Andrea Corrias, a predisporre le Determinazioni:

Vista

la comunicazione Prot. n° 16122 del 22.07.2016 con la quale la Ditta Edwards si è resa disponibile ad invitare un Dirigente Medico al Congresso: "PCR London Valves" che si terrà a Londra dal 18 settembre al 20 settembre 2016:

Considerato

che il Direttore della S.C. di Cardiochirurgia ha autorizzato a partecipare al suddetto Congresso il Dott. Del Prete Giuseppe:

Atteso

che il Responsabile dell'Ufficio Formazione ha espresso parere favorevole in merito;

Ritenuto

di dover autorizzare la partecipazione del Dott. Del Prete Giuseppe al Congresso: "PCR London Valves" che si terrà a Londra dal 18 settembre al 20 settembre 2016; di dover prendere atto che le spese di iscrizione, pernottamento, vitto e viaggio saranno totalmente a carico della Ditta Edwards:

DETERMINA

Per i motivi esposti in premessa:

- 1. Autorizzare la partecipazione del Dott. Del Prete Giuseppe al Congresso: "PCR London VALVES" che si terrà a Londra dal 18 settembre al 20 settembre 2016;
- Dare atto che le spese di iscrizione, pernottamento, vitto e viaggio saranno totalmente a carico della Ditta Edwards;
- 3. Trasmettere la presente determinazione al Direttore della S.C. del Personale per gli adempimenti normativi di competenza.

Il Responsabile dell'Ufficio Formazione Dott. Andrea Orrias

16-AGO-2016 11:08 MAR

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Nome

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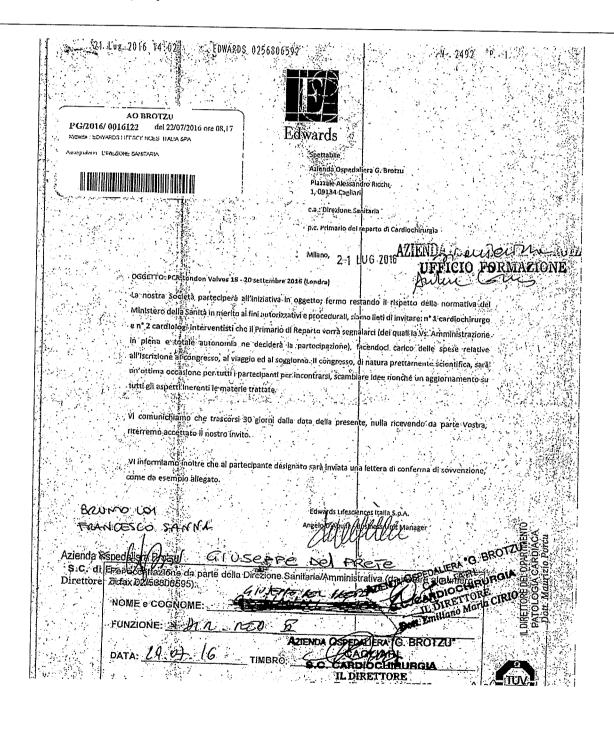
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Risultati

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AO BROTZU

PG/2016/0016122

del 22/07/2016 ore 08,17

Mittente EDWARDS LIFESCIENCES ITALIA SPA

Assegnatano DIREZIONE SANITAPIA





Spettabile

Azienda Ospedaliera G. Brotzu

Plazzale Alessandro Ricchi, 1, 09134 Cagliari

c.a.: Direzione Sanitaria

p.c. Primario del reparto di Cardiochirurgia

OGGETTO: PCR London Valves 18 - 20 settembre 2016 (Londra)

of our

La nostra Società parteciperà all'iniziativa in oggetto; fermo restando il rispetto della normativa del Ministero della Sanità in merito ai fini autorizzativi e procedurali, siamo lieti di invitare: n° 1 cardiochirurgo e n° 2 cardiologi interventisti che il Primario di Reparto vorrà segnalarci (dei quali la Vs. Amministrazione in piena e totale autonomia ne deciderà la partecipazione), facendoci carico delle spese relative all'iscrizione al congresso, al viaggio ed al soggiorno. Il congresso, di natura prettamente scientifica, sarà un'ottima occasione per tutti i partecipanti per incontrarsi, scambiare idee nonché un aggiornamento su tutti gli aspetti Inerenti le materie trattate.

Vi comunichiamo che trascorsi 30 giorni dalla data della presente, nulla ricevendo da parte Vostra, riterremo accettato il nostro invito.

Vi informlamo inoltre che al partecipante designato sarà inviata una lettera di conferma di sovvenzione, come da esempio allegato.

BRUMO LON FRANCES CO SANNA Azienda Soned Light Policy GI S C. di Per accepttazione da parte d Directore dicfax.02/56806595):	Angelo	ds Lifesciences Italia S.p.A. Abuila fallsheds Ind Manager PRESE	·G. BRC	SIPARITATION SIPARITATION SIPARITATION POTICU
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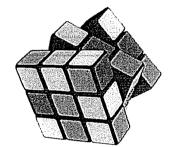


18-20 September 2016

ExCEL London London, United Kingdom

Programme

Valid as of 05 August 2016



PCR London Valves is an official EAPCI Course on Valves

Designations used by companies to distinguish their products are often claimed as trademarks. All brand names and product names used in this programme are trade names, service marks, trademarks or registered trademarks of their respective owners.





- 11:00 -

11:00 - 12:00 PROOM 2	Taking TAVI to the next level with imaging
DI.	

Plenary

Chairpersons: M. Monaghan, N. Piazza Panellists: A. Latib, S. Redwood, S. Saito, J. Zamorano

- To fully understand how state-of-the-art imaging can predict outcomes and reduce complications after TAVI
- To learn how to achieve optimal deployment depth during TAVI
- To appreciate the fundamental role of imaging during post-procedural follow-up
- 11:00 > Session objectives N. Piazza
- 11:04 > Predicting the outcome of valve implantation with echocardiography where are we?

 J. Hancock
- 11:11 > Time to React@PCR
- Predicting the outcome of valve implantation with CT current and future possibilities
 J. Leipsic
- 11:24 > Time to React@PCR
- 11:30 > Optimal device positioning to reduce procedural complications the double S curve
 D. Mylotte
- 11:37 > Time to React@PCR
- 11:43 > Valve imaging during follow-up normal and abnormal findings R. Hahn
- 11:50 > Time to React@PCR
- 11:56 > Session evaluation and key learnings M. Monaghan

- 12:00 -

INNOVATORS DAY - ROOM 5 **PCR Innovators**

12:30 - 12:35 厚 Welcome and introduction

Attend PCR Innovators Day if you want::

- > To fully understand how percutaneous valve technology moves from concept to first-in-man use
- > To learn more about innovations in percutaneous valve interventions
- To network with clinicians, innovators, MedTech executives, investors, triallists, and regulators in the field of percutaneous valve intervention

12:30

> Welcome to PCR Innovators Day @ London Valves B. Prendergast

PCR **INNOVATORS** DAY - ROOM 5

Dav

PCR Innovators

12:35 - 13:30 ☐ Theme 1: innovation in percutaneous mitral valve repair

Chairpersons: A. Latib, F. Maisano Panellists: M. Darnaud, G. Nickenia (Pending approval), D. O'Mahony (Pending approval)

12:35 > Introduction - percutaneous mitral valve repair in 2016: unmet needs and future perspectives? A. Vahanian

Innovations in focus: mitral valve repair

- > Mitraclamp an effective solution to repair 12:45 mitral valve prolapse R. Zegdi
- 12:53 > Discussion and audience interaction Valcare mitral annuloplasty: from concept 13:00 to first-in-human experience
- A. Segev > Discussion and audience interaction 13:08 > Middle Peak Medical: a semi-repair and 13:15 semi-replacement technique
- A. Khairkahan (Pending approval) > Discussion and audience interaction 13:23

12:35 - 13:35 ROOM 2

Plenary

lmaging of the mitral valve complex for transcatheter interventions

Chairpersons: I. Meredith, L. Sonderaaard Panellists: J. Hancock (Pending approval), T. Lefèvre, T. Modine, K.K. Yeo

Attend this session if you want:

- > To fully understand the anatomical complexity of the mitral valve
- To appreciate the complementary roles of echocardiography and CT before, during and after transcatheter mitral valve interventions
- To become familiar with the imaging characteristics of the current range of percutaneous mitral devices

12:35 > Session objectives I. Meredith

- > The anatomical and physiological 12:39 complexity of the mitral valve V. Delgado
- > Time to React@PCR 12:46
- > Echocardiographic assessment of mitral 12:52 regurgitation before, during and after intervention M. Monaghan
- > Time to React@PCR 12:59
- 13:05 > Detailed planning of transcatheter mitral interventions using CT J. Leipsic
- > Time to React@PCR 13:12
- Imaging appearances of currently available 13:18 devices - a user's quide S. Von Bardeleben
- 13:25 > Time to React@PCR
- > Session evaluation and key learnings 13:31 L. Sondergaard

- 14:00 -

14:10 - 14:20 🛭 PCR Innovators Day @ London

PCR **INNOVATORS** DAY - ROOM 5

PCR Innovators Dav sponsors

Valves - A word from our

- > IMMR presentation N. Borenstein (Pending approval)
- > HTI BioQuest presentation 14:13 E. Howard (Pending approval)
 - genae presentation Ā. Talen

14:10

Sunday 18 September 2016 - Afternoon - Programme valid as of 05-08-2016

14:20 - 15:15 PCF INNOVATORS
DAY - ROOM 5
PCR Innovators Day
14:20
14:30

Theme 2: innovation in percutaneous mitral valve replacement

Chairpersons: V. Bapat, R. Kornowski Panellists: M. Mack, I. Meredith, A. Papiernik (Pending approval), A. Schmitz

Introduction - percutaneous mitral valve replacement in 2016: unmet needs and future perspectives? N. Piazza (Pending approval)

Innovations in focus : mitral valve replacement

The Caisson transcatheter mitral valve replacement system M. Williams (Pending approval)

> Discussion and audience interaction > The Cephea transcatheter mitral valve replacement system

Discussion and audience interaction QUATTOR - a four leaflet elliptical transcatheter mitral valve G. Agreli (Pending approval)

> Discussion and audience interaction

ROOM 3



14:38

14:45

14:53

15:00

15:08

14:35 - 15:35 🖫 Imaging for TAVI: Live CT analysis and interpretation for correct device selection and sizing

Facilitators: J. Leipsic, D. Mylotte Media Driver: P. Thériault-Lauzier Expert Panellist: T. Modine

Attend this session if you want:

- > To learn how to analyse a CT scan of the aortic valvar complex prior to TAVI
- > To understand which clinical and anatomical variables are important for both patient and device selection
- > To appreciate the differences in CT analysis between bicuspid and tricuspid aortic valves and how this may influence patient and device selection

- 15:00 -

15:45 - 16:45 ROOM 3



№ Imaging for MitraClip Interventions: pre- and intra-procedural imaging

Facilitators: F. Maisano, S. Von Bardeleben (Pending approval) Media Driver: J. Joseph Expert Panellist: V. Delgado

Attend this session if you want:

- > To learn echocardiographic inclusion/exclusion criteria for patients with either primary or secondary mitral regurgitation undergoing MitraClip implantation
- To learn the key aspects of intra-procedural echocardiography for MitraClip positioning and deployment
- To better recognise when and how to deploy a "second" clip

15:55 - 16:50 🐺 Theme 3: innovation in percutaneous tricuspid valve **INNOVATORS** intervention DAY - ROOM 5

PCR Innovators Dav

15:55

Chairpersons: S. Bolling, C. Tamburino Panellists: J. Eadie (Pending approval), R. Lange, J. Schofer, P.W. Serruys

> Introduction - percutaneous tricuspid valve intervention in 2016: unmet needs and future perspectives? S. Windecker (Pending approval)

Innovations in focus: the tricuspid valve 16:05 > The Innovocentric solution for tricuspid regurgitation

16:13 > Discussion and audience interaction > Valtech Cardioband - an established device 16:20 with a new delivery system

A. Gross (Pending approval) > Discussion and audience interaction 16:28 > TRiCares - a dedicated tricuspid 16:35

transcatheter heart valve H.J. Straubinger (Pending approval) 16:43

> Discussion and audience interaction

- 16:00 -

16:45 - 17:45 ROOM 2

Plenary

Advanced imaging modalities to guide transcatheter valve interventions

Chairpersons: V. Delgado, N. Van Mieghem Panellists: A. Baumbach, R. Hahn, S. Von Bardeleben, J. Webb React@PCR Moderator: D. Natarajan (Pending approval)

Attend this session if you want:

- > To appreciate the rapidly evolving role of imaging in facilitating transcatheter valve interventions
- To understand how intracardiac echocardiography and transnasal echocardiography can simplify transcatheter valve procedures
- To know more about the future of imaging in the cathlab environment
- Session objectives 16:45 V. Delgado
- Rotational CT an imaging "one-stop shop" 16:49 P. Thériault-Lauzier
- 16:56 > Time to React@PCR
- Intracardiac echocardiography: pros and 17:02 cons
- L. Sondergaard 17:09 > Time to React@PCR
- > Transnasal echocardiography: pros and 17:15 M. Monaghan
- Time to React@PCR 17:22
- > Fusion imaging: current and future 17:28 possibilities J. Zamorano
- 17:35 > Time to React@PCR

discussion

17:41 > Session evaluation and key learnings N. Van Mieghem

16:50 - 17:35 👨 Keynote lecture and round table PCR INNOVATORS DAY - ROOM 5

PCR Innovators

Dav 16:50

> Introduction

D. Cassak (Pending approval) > The value of innovation: perspectives from 16:53 the worldwide financial markets

Moderators: D. Cassak (Pending

approval), S. Levin (Pending approval)

17:10

Who (if anyone) wil win in mitral valves? Lessons learnt from the TAVI success story M. Rothman

- 17:00 -

17:35 - 17:45 © Concluding remarks INNOVATORS DAY - ROOM 5

PCR Innovators Day

Speaker: N. Piazza (Pending approval)

- 18:00 -

18:00 - 19:40 MAIN ARENA

Tools and Techniques

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TAVI IN 2016: the year the treatment of aortic stenosis was transformed

Sponsored by Edwards Lifesciences

Chairpersons: G. Gerosa, S. Windecker Panellists: J. Baan (Pending approval), V. Falk, M. Gilard

Operators: J. Hancock, B. Prendergast, S. Redwood

React@PCR Moderator: D. Natarajan (Pending approval)

Attend this session if you want:

- > To learn from the latest evidence in the field of TAVI
- To understand which patient populations would either benefit from surgical aortic valve replacement or TAVI
- To learn how the TAVI procedure can be further streamlined with new generation delivery systems and valves

18:00 > Session objectives G. Gerosa

TAVI in 2016: what is the data that justifies 18:02 transformational change? M. Gilard

18:12 Time to React@PCR

When should surgical aortic valve 18:17 replacement still be considered in intermediate risk patients? V. Falk

> Time to React@PCR 18:27

18:32 Recorded case from St. Thomas' Hospital - London, United Kingdom 18:48 LIVE demonstration from St. Thomas' Hospital - London, United Kingdom

> Time to React@PCR 19:08

 Optimising the in-hospital patient pathway 19:13 J. Baan (Pending approval)

19.23 Time to React@PCR

> Optimising TAVI through technological 19:28 innovation S. Windecker

19:38

Session evaluation and key learnings S. Windecker

- 08:00 -

08:30 - 08:45 3 Welcome MAIN ARENA Chairpersons: B. Prendergast, S. Ceremony Windecker Panellists: M. Chen, J. Fajadet, M. Haude, N. Piazza, S. Saito, C. Tamburino 08:30 > Introduction to PCR London Valves B. Prendergast 08:37 PCR Family W. Wijns

MAIN ARENA

08:45

08:45 - 09:30 ☐ LIVE demonstration from Clinique Pasteur - Toulouse,

Chairpersons: J. Fajadet, S. Windecker Panellists: M. Chen, M. Haude, N. Piazza, B. Prendergast, S. Saito, C. Tamburino > Overview of the tools to be used during

the LIVE demonstration C. Tamburino LIVE demonstration from Clinique 08:50 Pasteur - Toulouse, France 09:20 > Time to React@PCR

- 09:00 -

09:30 - 10:00 Spotlight session: bioprosthetic MAIN ARENA valve durability Plenary

Chairpersons: B. Prendergast, S. Windecker (Pending approval) Panellists: M. Chen, J. Fajadet, M. Haude, N. Piazza, S. Saito, C. Tamburino

Attend this session if you want:

> To learn more about the latest data from randomised controlled trials and registries concerning the durability of bioprosthetic valves

> To fully understand the important statistical considerations when interpreting long term outcome data in current TAVI recipients

To appreciate the important difference between clinical and device-related endpoints and the need for a standardised definition of bioprosthetic valve durability and failure

> Session objectives 09:30 B. Prendergast 09:33

09.51 09:57 Clinically relevant definitions of bioprosthetic valve durability and failure lessons from the surgical experience H. Treede

> Durability of TAVI bioprostheses - data 09:39 from the randomised trials and registries H. Eltchaninoff

09:45 > The pitfalls of long term survival analysis implications for the regulators and future studies

> > Time to React@PCR Session evaluation and key learnings S. Windecker (Pending approval)

Interventions for Valvular Disease

Monday 19 September 2016 - Morning - Programme valid as of 05-08-2016

ROOM 2

Plenary

09:30 - 10:30 # Long-term outcomes after TAVI

Chairpersons: R. Kornowski, H. Moelİmann Panellists: J. Leipsic, M. Mack, T. Walther, A. Witkowski

Attend this session if you want:

- > To fully understand the mechanisms of transcatheter valve failure and comparisons with surgical bioprostheses
- > To know more about current thinking concerning the phenomenon of TAVI leaflet thickening and subclinical thrombosis
- > To identify ways in which TAVI may emerge as long-term treatment strategy in younger, low-risk patients
- 09:30 Session objectives H. Moellmann
- 09:33 > How and why might transcatheter valves M. Gilard
- > Time to React@PCR 09:40
- TAVI durability and comparisons with 09:44 surgery C. Young
- 09:51 Time to React@PCR 09:55
 - > TAVI leaflet thickening and subclinical thrombosis: keep calm and carry on imaging R. Makkar
- Time to React@PCR 10:02
- > Infective endocarditis following TAVI -10:06 incidence and outcomes A. Latib
- 10:13 > Time to React@PCR
- TAV in TAV current reality and future 10:17 feasibility A. Colombo
- Time to React@PCR 10:24
- 10:28 Session evaluation and key learnings R. Kornowski

ROOM 3

09:30 - 10:30 🛭 Learning transseptal: the true minimal invasive access?



Facilitators: F. Praz, A. Vahanian Media Driver: H. McConkey Expert Panellist: E. Brochet

Attend this session if you want:

- > To identify which patient is suitable for a transseptal approach to valve intervention
- > To learn how to perform transseptal puncture safely
- To fully understand the principles of a step by step procedure

09:30 - 10:30 ROOM 4

Mitral and tricuspid valve interventions

Abstracts

Session comprising selected PCR London Valves 2016 abstract submissions

Chairpersons: C. Grasso, C. Hammerstingl Panellists: M. Buch, G. Yucel

- > Lond16A-OP90 Feasibility and efficacy of 09:30 intracardiac echocardiography for percutaneous mitral valve edge-to-edge
 - repair using the MitraClip system M. Patel
- > Discussion and audience interaction 09:37 09:42 > Lond16A-OP87 - Mismatch between
 - clinical benefit and functional capacity assessed by cardiopulmonary exercise test in MitraClip patients G. Salerno (Pending approval)
- 09:49 > Discussion and audience interaction
- Lond16A-OP13 One year follow-up 09:54 results of mitral valve transcatheter annuloplasty system for mitral reconstruction multicentre trial
- S. Von Bardeleben (Pending approval) > Discussion and audience interaction 10:01
- Lond16A-OP29 Mitral annulus 10:06 calcification score on CT can identify patients with increased risk of persistent
- mitral regurgitation post-TAVI S. Setiawan 10:13 Discussion and audience interaction 10:18
- Lond16A-OP41 Transcatheter treatment of severe tricuspid regurgitation using the MitraClip system J. Hausleiter
- > Discussion and audience interaction

Monday 19 September 2016 - Morning - Programme valid as of 05-08-2016

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09:30 - 10:30		09:30 - 10:30	罪TAVI complications 5
INTERACTIVE CASE CORNER	Session comprising selected PCR London Valves 2016 clinical case submissions	ROOM 5	Session comprising selected PCR London Valves 2016 clinical case submissions
Cases	Facilitators: J. Byrne, F. Castriota	Cases	Facilitator: H.L. Kao
09:30	> Lond16C-ICC003 - Feasibility of simultaneous rotational atherectomy and balloon aortic valvuloplasty C.W. Lee	09:30	 Lond16C-ICC034 - TAVI in an extremely large and calcified bicuspid aortic valve: a tale of two valves R. Kaple
09:37	 Lond16C-ICC006 - Aortic balloon valvuloplasty: a bridge to TAVI in multivalvular heart disease patients G. Ghanem 	09:38	Lond16C-ICC152 - Right coronary occlusion post TAVI treated by PCI A.K. Chaurasia
09:44	 Lond16C-ICC008 - TAVI in aortic stenosis with severe hypercapnia assisted with femoro-femoral cardiopulmonary bypass to facilitate gas exchange 	09:46	Lond16C-ICC158 - A devastating valve-in-valve complication: we did not expect coronary obstruction with that transcatheter heart valve D. Dvir
09:51	J. Quintanilla > Lond16C-ICC016 - Left main - left anterior descending PCI and TAVI in cardiogenic shock	09:54	Lond16C-ICC145 - Acute exacerbation of mitral stenosis after transcatheter aortic valve replacement Y. Fuku
09:58	D. Tsikaderis > Lond16C-ICC031 - All-in-one procedure P. Cervinka	10:03	> Lond16C-ICC160 - Left-to-right shunt post-TAVI V. Sullivan
10:06	 Lond16C-ICC064 - Transfemoral aortic valve replacement in a patient with ascending aortic dilatation and horizontal 	10:12	Lond16C-ICC162 - Double valve-in-valve leading to double complication D. Dvir
	aortic root T. Xiong	10:21	> Lond16C-ICC169 - Pop-in: unusual valve movement
10:14	> Lond16C-ICC046 - Minimalist TAVI with balloon expandable valve in severe		E. Ercan
•	bicuspid aortic stenosis with difficult anatomy using intracardiac echo guidance C. Undemir		- 10:00 -
10:22	 Lond16C-ICC047 - The ultimate minimalist TAVI: transfemoral, fluoro-guided, 	10:00 - 10:30 S MAIN ARENA	Keynote lecture
	conscious sedation, zero contrast	Keynote lecture	Chairpersons: N. Piazza, C. Tamburino
I	R. Kaple	10:00	> Introduction C. Tamburino
		10:02	The tricuspid valve - forgotten and neglected (until now) S. Bolling
r		10:28	> Note of thanks N. Piazza

- 11:00 -

MAIN ARENA

11:00 - 11:45 Moving TAVI to lower-risk populations

Plenary

Chairpersons: D. Mylotte, O. Wendler Panellists: S. Ajay, J. Byrne, A. Colombo, A. Cribier, R. Lange, M.B. Leon React@PCR Moderator: S. Cannata (Pending approval)

Attend this session if you want:

- > To understand which younger low-risk patient may benefit from TAVI
- To learn how case selection for TAVI will change in a lower risk patient aroup
- To appreciate the unmet needs of TAVI in younger patients
- 11:00 > Session objectives O. Wendler
- > High-risk and low-risk patients what are 11:05 the real differences? L. Sondergaard
- > Time to React@PCR 11:10
- > The limitations of surgery in low-risk 11:14 patients - an interventionist's perspective S. Windecker
- Time to React@PCR 11.19
- > The limitations of TAVI in low-risk patients -11:23 a surgeon's perspective
- > Time to React@PCR 11.28
- > Should the perspective of the Heart Team 11:32 now change? J. Webb
- 11:37 > Time to React@PCR
- > Session evaluation and key learnings 11:41 D. Mylotte

ROOM 2

Plenary

11:00 - 12:30 RAPID FIRE: innovations in percutaneous mitral intervention

Chairpersons: I. Meredith, C. Tamburino Panellists: M. Buch, H. Ince, M. Mack, C.K.

Attend this session if you want:

- > To fully understand the anatomical and technical challenges associated with percutaneous mitral intervention
- > To hear the latest outcome data concerning cutting edge technologies with first-in-man experience
- > To identify the limitations of currently available devices
- > Session objectives 11:00 C. Tamburino
- > What are the anatomical and technical 11:03 challenges in percutaneous mitral intervention? E. Grube

Percutaneous mitral valve repair 12:21

- > What does the future hold? T. Feldman
 - > Session evaluation and key learnings 1. Meredith

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12:27

11:00 - 12:30 ☐ Learning mitral valve-in-valve, valve-in-ring and MAC: "old" techniques, new indications

Facilitators: V. Bapat, V. Delgado Media Driver: J. Joseph Expert Panellist: N. Piazza

- > To fully understand the key factors determining patient and procedural selection
- > To learn the principles of device selection and sizing for each technique
- > To appreciate the importance of multimodality imaging in minimising LVOT obstruction

Monday 19 September 2016 - Morning - Programme valid as of 05-08-2016

	International Forum 1:	11:00 - 12:30	ृ TAVI 2
ROOM 4	UK-Germany share their most	INTERACTIVE	Session comprising selected PCR London Valves 2016 clinical case submissions
Cases	educational cases	CASE CORNER	Facilitators: H. Degen, Ö. Göktekin
	Session comprising selected PCR London Valves 2016 clinical case submissions	Cases	(Pending approval)
	Chairpersons: M. Haude, D. Hildick-Smith	11:00	> Lond16C-ICC117 - TAVI as redo therapy
·	Panellists: M. Mullen (Pending approval), J. Schofer, S. Von Bardeleben (Pending		after initial surgery for aortic dissection G. Dahle
	approval)	11:09	> Lond16C-ICC074 - The vulnerable
11:00	 Lond16C-OP028 - Successful concomitant transcatheter valve implantation and alcohol septal ablation in a patient with 		neighbor: recover from severe mitral regurgitation caused by TAVI Y. Li
	symptomatic aortic valve stenosis and hypertrophic cardiomyopathy V. Rudolph	11:18	 Lond16C-ICC075 - Old female with severe aortic stenosis and significant anemia R. García-Borbolla Fernández
11:08	 Discussion and audience interaction 	11:27	> Lond16C-ICC094 - Balloon expandable TAVI in a patient with previous mitral valve
11:15	 Lond16C-OP159 - Percutaneous pulmonary valve implantation in an orthotopic heart transplant recipient 		replacement A. Higashimori
	A. Bhan	11:36	> Lond16C-ICC068 - Benefit of TAVI with a
11:23	> Discussion and audience interaction		recapturable and repositionable bioprosthesis in a patient with oval shaped
11:30	 Lond16C-OP057 - Emergency paravalvular leak closure for aortic regurgitation following implantation of 		aortic annulus J. Valle Raleigh
	"new-generation" self-expandable	11:45	> Lond16C-ICC121 - Percutaneous valve
	transchatheter aortic valve prosthesis M. Vasa-Nicotera		implantation in a congenital heart with degenerated homograft in both aortic and
11:38	> Discussion and audience interaction		pulmonic position J. Kefer
11:45	 Lond16C-OP078 - An interesting complication following implantation of a 		> Lond16C-ICC135 - Contrast-induced
	transcatheter valve in mitral annular	•	nephropathy is not the only cause of acute kidney injury after TAVI!
	calcification with a creative improvised		A. Allali
	surgical solution M. Ghosh-Dastidar	12:03	> Lond16C-ICC029 - Insights into frailty
11:53	> Discussion and audience interaction		assessment: TAVI in a 100-year-old patient G. Latsios
12:00	> Lond16C-OP138 - Percutaneous	. 12:12	> Lond16C-ICC125 - Prediction and
	edge-to-edge tricuspid valve repair for treatment of severe regurgitation		evaluation of TAVI with patient-specific
•	E.W. Holy		computer simulation: a case example N. El Faquir
12:08	> Discussion and audience interaction	12:21	> Lond16C-ICC128 - Valve-in-valve:
12:15	 Lond16C-OP148 - Coronary occlusion during TAVI: triumphs and disasters 	·	determination of sizing while performing
	S. Dawkins		the case A. Merino Rajme
12:23	> Discussion and audience interaction		n. menno najme

11:00 - 12:30 TAVI valve in valve

ROOM 5

Session comprising selected PCR London Valves 2016 clinical case submissions

Facilitators: F. Castriota, D. Dvir

11:00

Cases

- > Lond16C-ICC011 Successful sheathless implantation of a transfemoral valve-in-valve transcatheter aortic valve replacement for failed bioprosthetic valve R. Anantharaman
- 11:09
- Lond16C-ICC060 Combined structural heart disease interventions in a failed bioprosthesis: the Janus procedure N. Àmabile
- Lond16C-ICC062 Valve-in-valve: 11:18 unplugged H. McConkey
- 11.27
- Lond16C-ICC103 TAVI: valve-in-valve in degenerate aortic homograft root replacement using a direct flow medical A. Duncan
- > Lond16C-ICC140 A dislodged sutureless 11:36 aortic valve A. Cassar
- > Lond16C-ICC141 Transfemoral aortic 11:45 valve-in-valve implantation using a balloon-expandable transcatheter valve for failed surgical stentless bioprosthesis
- > Lond16C-ICC156 Valve-in-valve 11:54 challenges: we should not rely on the central marker! D. Dvir
- > Lond16C-ICC119 Concomitant transapical 12:03 TAVI and catheter valve in mitral annular calcification G. Dahle
- > Lond16C-ICC157 Challenging 12-12 valve-in-valve TAVI using a fully repositionnable mechanically expanding prosthesis
- M. El-Mawardy > Lond16C-ICC164 - Perfect is the enemy of 12:21 good: challenges while trying to optimise haemodynamics of aortic valve-in-valve D. Dvir

MAIN ARENA



11:45 - 12:30 Fill LIVE demonstration from St. Thomas' Hospital - London, **United Kingdom**

Chairpersons: D. Mylotte, O. Wendler Panellists: S. Ajay, J. Byrne, A. Colombo, A. Cribier, R. Lange, M.B. Leon React@PCR Moderator: S. Cannata (Pending approval)

- > Overview of the tools to be used during 11:45 the LIVE demonstration J. Byrne (Pending approval)
- LIVE demonstration from St. Thomas' 11:50 Hospital - London, United Kingdom
- > Time to React@PCR 12:20

- 14:00 -

succeed?

14:45 - 16:15 ELearning MitraClip: how to ROOM 3



Facilitators: E. Brochet, H. Ince Media Driver: H. McConkey Expert Panellist: C. Hammerstingl

- > To fully understand the range of mitral valve anatomy suitable for a percutaneous mitral "edge-to-edge" repair procedure
- > To learn the key tips and tricks for a successful outcome
- To appreciate how to avoid and manage potential complications of the procedure

- 13:00 -

ROOM 2

13:00 - 13:45 ☐ The Lotus Valve: simplifying real-world practice

Symposium



Sponsored by Boston Scientific Chairpersons: T. Feldman, L. Sondergaard Panellists: V. Bapat, D. Blackman, M. Götberg, J. Wöhrle

Attend this session if you want:

- > To understand the current evidence and latest clinical data
- > To learn how paravalvular leak can be minimised despite anatomical complexities
- To recognise how Lotus Edge can advance practice in key patient subsets

13:00	> Session objectives
	L. Sondergaard
13:03	> The latest clinical evidence
	D. Blackman
13:11	> Discussion and audience interaction
13:16	> Why Lotus is my workhorse valve
	1 Mährla

- 13:24 Discussion and audience interaction 13:29 > Lotus Edge: advancing clinical practice
- M. Götberg Discussion and audience interaction 13:37 Session evaluation and key learnings 13:42 T. Feldman

ROOM 3

Tools and Techniques



13:00 - 14:40 Applications, indications and outcomes of transcatheter mitral annuloplasty

Sponsored by Cardiac Dimensions

Chairpersons: I. Meredith, H. Sievert Panellists: M. Haude, S. Von Bardeleben, K. Witte

Attend this session if you want:

- > To learn about the multiple applications of transcatheter mitral annuloplasty
- > To learn a systematic approach to the selection of appropriate candidates
- > To observe demographic analysis of the first randomised, blinded trial in the field of functional mitral regurgitation

> Session objectives 13:00 I. Meredith

Recorded case from Städtische Kliniken 13:05 Neuss, Lukaskrankenhaus - Neuss, Germany

M. Haude

- 13:25 > Discussion and audience interaction > When to intervene with transcatheter 13:31 annuloplasty in a functional mitral regurgitation population
- K. Witte > Discussion and audience interaction 13:43
- Recorded case from Universitätsmedizin 13:49 Mainz University - Mainz, Germany S. Von Bardeleben
- > A multimodal approach to the treatment 14:09 of functional mitral regurgitation S. Von Bardeleben
- > Discussion and audience interaction 14:17 > The landmark REDUCE FMR trial: first 14:23 randomised, blinded evaluation of transcatheter annuloplasty in functional mitral regurgitation
- M. Haude 14:31 > Discussion and audience interaction Session evaluation and key learnings 14:37

H. Sievert

Monday 19 September 2016 - Afternoon - Programme valid as of 05-08-2016

ROOM 4

Symposium



13:00 - 13:45 🛭 MitraClip NT: the next frontier

Sponsored by Abbott

Chairpersons: F. Maisano, A. Vahanian Panellists: J. Van Der Heyden, S. Von Bardeleben

Attend this session if you want:

- To learn about the new developments and data in mitral interventions
- > To learn how MitraClip NT can help to expand the potential patient population and reduce procedural time
- To learn tips and tricks on treating complex anatomy with MitraClip NT
- > Session objectives 13:00 A. Vahanian
- What is the future in mitral regurgitation 13:05 interventions? F. Maisano
- 13:13 > How far can you go with MitraClip NT?
- 13:13 Case 1 S. Von Bardeleben
- 13:18 > Discussion and audience interaction
- 13:22 Case 2
- J. Van Der Heyden
- 13:27 > Discussion and audience interaction
- > Case 3 13:31 F. Maisano
- 13:36 > Discussion and audience interaction
- > Session evaluation and key learnings 13:40 F. Maisano

ROOM 2

Case in Point



13:55 - 14:40 👨 Portico - when expertise meets simplicity: key learnings

Sponsored by St. Jude Medical

Chairpersons: G. Fontana, H. Moellmann Panellists: A. Linke, R. Makkar, F. Nietlispach, L. Sondergaard

- > To learn about the latest worldwide developments with the St. Jude Medical Portico valve
- To learn on Portico the first to innovate with fully recapturable valve
- > To review and discuss a selection of complex TAVI cases and how Portico helped in solving them
- 13:55 > Session objectives H. Moellmann
- 13:58 > Advancing the science and evidence-based medicine of heart valves: Portico clinical programme update L. Sondergaard (Pending approval)
- 14:03 > Time to React@PCR
- > Solopath: the use of the Solopath 14:11 re-collapsible sheath for challenging femoral access with the Portico transcatheter valve
- A. Linke (Pending approval) 14:16 > Time to React@PCR
- Why is Portico the valve of choice for these 14:24 types of indications? É. Nietlispach
- > Time to React@PCR 14:29
- 14:37 Session evaluation and key learnings G. Fontana

ROOM 4

Symposium

13:55 - 14:40 SYMETIS TAVI: latest results and future clinical outlooks

Sponsored by Symetis

Chairpersons: W.K. Kim, S. Windecker

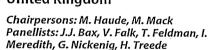
Attend this session if you want:

- To be informed about the latest results from the SAVI TF registry (30 days and one-year data)
- To learn on the device performance of the ACURATE neo in patients with small annuli (sub-analysis of SAVI TF)
- To appreciate patient population changes with more intermediate and low risk patients treated (NOTION I and
- 13:55 > Session objectives S. Windecker
- > ACURATE neo technology and clinical 14:00 update (SAVI TF data at 30 days and one year) W.K. Kim
- > Discussion and audience interaction 14:12 14:15 > SAVI TF sub-analysis: device performance
- in small annuli T. Rudolph > Discussion and audience interaction 14.22
- 14:25 Optimising outcomes and shift to new patient populations L. Sondergaard (Pending approval)
- > Discussion and audience interaction 14:32 Session evaluation and key learnings 14:35 T. Walther

- 14:00 -

MAIN ARENA

14:45 - 15:30 LIVE demonstration from St. Thomas' Hospital - London, **United Kingdom**



14:45 Overview of the tools to be used during the LIVE demonstration I. Meredith (Pending approval)

LIVE demonstration from St. Thomas' 14:50 Hospital - London, United Kingdom

> Time to React@PCR 15:20

14:45 - 16:15 ROOM 2

All you need to know about the tricuspid valve

Chairpersons: R. Lange, P. Pibarot Panellists: S. Bolling, A. Latib, M. Monaghan, J. Schofer

- > To improve your understanding of the anatomy and pathophysiology of the tricuspid valve
- To learn how to evaluate the mechanism and severity of tricuspid regurgitation using multimodality imaging
- To appreciate the current status of tricuspid valve surgery and alternative percutaneous treatment options
- 14:45 > Session objectives P. Pibarot
- > Tricuspid valve anatomy and 14:50 pathophysiology - what do interventional cardiologists and surgeons need to know? O. Wendler
- > Time to React@PCR 14:58 15:06 Current recommendations for the treatment of secondary tricuspid regurgitation A. Vahanian
- Time to React@PCR 15:14 Multimodality imaging of the tricuspid 15:22 valve and right ventricle before surgery and percutaneous intervention
- R. Hahn 15:30 > Time to React@PCR > Surgery in secondary tricuspid 15:38 regurgitation - surgical techniques and
- their limitations T. Modine > Time to React@PCR 15:46 15:54 > Percutaneous alternatives - current
- options and future prospects F. Maisano 16:02 > Time to React@PCR Session evaluation and key learnings 16:10 R. Lanae

londay 19 Septem	ber 2016 - Afternoon - Programme valid as of	05-08-2016	210
14.45 - 16.15	International Forum 2: Italy-USA	14:45 - 15:30	Why is the mitral valve so
ROOM 4	share their most educational	ROOM 5	different to the aortic?
Cases	cases	Focus Nurses and Allied	Chairpersons: M. Gilard, K. Wilson
	Session comprising selected PCR London Valves 2016 clinical case submissions	Professionals	Net and Alain and in the control of
	Chairpersons: M.B. Leon, A.S. Petronio Panellists: F. Bedogni, F. Castriota, R. Makkar	Plenary	Attend this session if you want: To improve your knowledge of the anatomy and physiology of the mitral valve
14:45	> Lond16C-OP013 - MitraClip and tricuspid regurgitation: different new approaches for a "classic" device		 To better understand how to diagnose mitral valve disease and identify triggers for intervention To appreciate the different surgical and
14:53	P. Denti Discussion and audience interaction		percutaneous approaches that can be
15:00	> Lond16C-OP153 - MitraClip therapy: an alternative treatment for haemolytic		used for the treatment of mitral valve disease
	anemia induced by mitral para-annuloplasty ring leak Z. Wang	14:45	> Session objectives K. Wilson
15:08	> Discussion and audience interaction	14:48	> Anatomy and physiology of the normal
15:15	> Lond16C-OP035 - When a wire trips your		mitral valve P. Almeida
	valve: a shocking nightmare in the cathlab C. Moretti	14:54	> Time to React@PCR
15:23	Discussion and audience interaction	14:58	> The spectrum of mitral valve disease -
15:30	Lond16C-OP044 - Leaflet overhang as possible mechanism of late structural		symptoms and diagnosis D. Sparv
	failure of first-generation balloon	15:04 15:08	> Time to React@PCR
	expandable transcatheter heart valve	15:08	> Assessing severity and when to intervene K. Victor
	treated with valve-in-valve with latest generation balloon expandable valve	15:14	> Time to React@PCR
	G. Tang	15:18	> Surgical and percutaneous treatment
15:38	> Discussion and audience interaction		options M. Buch
15:45	> Lond16C-OP097 - A new indication for	15:24	→ Time to React@PCR
	another self-expanding TAVI prosthesis P. Pagnotta	15:28	> Session evaluation and key learnings
15:53	> Discussion and audience interaction		M. Gilard
16:00	> Lond16C-OP143 - Imaging in		
	percutaneous tricuspid leaflet repair S. Gafoor		
16:08	> Discussion and audience interaction		
14:45 - 15:30	TAVI complications 1		
INTERACTIVE	Session comprising selected PCR London Valves		
CASE CORNER	2016 clinical case submissions		
Cases	Facilitators: F. Hellig, D. Hildick-Smith		
14:45	Lond16C-ICC009 - Pericardial effusion after transfemoral TAVI with lethal outcome		

- W.K. Kim
- > Lond16C-ICC032 Succesful treatment of 14:52 aortic rupture after TAVI with stent graft P. Cervinka
- > Lond16C-ICC037 Three self-expandable 14:59 prosthesis M.C. Ferrer-Gracia
- > Lond16C-ICC039 Is it really feasible or 15:07 safe? Transcatheter retraction of migrated prosthesis into left ventricular outflow tract during TAVI
- D. Hachinohe
 > Lond16C-ICC040 What is this new jet? 15:15 Acquired aorto right ventricular fistula after balloon expandable TAVI C. Undemir
- > Lond16C-ICC052 Double pop out after 15:23 valve-in-valve implantation G. Sardella

- 15:00 -	15:3
	IN
15:30 - 16:15 Mitral valve anatomy:	CA
MAIN ARENA implications for percutaneous	

Plenary

interventions

Chairpersons: M. Haude, M. Mack Panellists: J.J. Bax, V. Falk, T. Feldman, I. Meredith, G. Nickenig, H. Treede

Attend this session if you want:

- > To fully understand normal mitral valve anatomy and physiology
- > To appreciate the pathophysiology of mitral regurgitation and different degrees of anatomical involvement
- To identify the anatomical boundaries guiding different interventional treatments
- > Session objectives 15:30 M. Haude
- > Mitral valve anatomy and 15:33 pathophysiology: determinants of correct treatment selection V. Delgado
- Time to React@PCR 15:38
- 15:43 Anatomical challenges for percutaneous mitral edge-to-edge repair C. Grasso
- Time to React@PCR 15:48
- Anatomical challenges for percutaneous 15:53 mitral annuloplasty S. Von Bardeleben
- 15:58 > Time to React@PCR

16:03

- Anatomical challenges for percutaneous mitral valve replacement C. Ruiz
- 16:08 Time to React@PCR Session evaluation and key learnings 16:13 M. Mack

0 - 16:15 **■ TAVI complications 2** NTERACTIVE **ASE CORNER**

Session comprising selected PCR London Valves 2016 clinical case submissions

Facilitators: D. Himbert, M.K.Y. Lee Cases

- > Lond16C-ICC054 Distal left anterior 15:30 descending artery occlusion and ostial left main stenosis during transapical TAVI U. Kaneko
- Lond16C-ICC067 Never give up in TAVI 15:37 L. Biasco
- Lond16C-ICC072 Hypo-attenuated leaflet 15:44 thickning combined with right coronary occlusion three years after implantation of self-expandable valve Y.B. Liao
- Lond16C-ICC079 TAVI complicated with 15:52 subannular rupture and pseudoaneurysm fistulized to right atrium V. Ruiz-Quevedo
 - > Lond16C-ICC082 Hypo-attenuated mass of bioprosthetic aortic valve one week after transcatheter aortic valve replacement in a bicuspid aortic stenosis patient X. Wei
 - Lond16C-ICC084 Self-limiting intrannular rupture following balloon expandable TAVI implantation L. Paraggio (Pending approval)

15:30 - 16:15 🕸 Tricuspid

ROOM 5 Cases

16:00

16:08

Session comprising selected PCR London Valves 2016 clinical case submissions

Facilitator: U. Schäfer

- 15:30 > Lond16C-ICC012 - MitraTrick MitraClip in tricuspid position: rationale and bench test P. Denti
- 15:39 > Lond16C-ICC098 - A tale of three valves E. Karacop
- > Lond16C-ICC048 Percutaneous balloon 15:48 valvuloplasty for bioprosthetic tricuspid valve stenosis: two case reports
- > Lond16C-ICC076 Transcatheter treatment 15:57 of primary tricuspid regurgitation using the MitraClip system D. Braun
- > Lond16C-ICC041 Transcatheter tricuspid 16:06 valve repair for functional tricuspid regurgitation R. Hahn

- 16:00 -

MAIN ARENA

16:30 - 17:15 BLIVE demonstration from Clinique Pasteur - Toulouse. France



Chairpersons: T. Lefèvre, C.K. Naber Panellists: D. Blackman, F. Hellig, R. Kornowski, P. MacCarthy, L. Sondergaard, C. Young

16:30

> Overview of the tools to be used during the LIVE demonstration R. Kornowski

16:35

LIVE demonstration from Clinique Pasteur - Toulouse, France

17:05

> Time to React@PCR

ROOM 2

16:30 - 17:30 尋 Stroke and its prevention in the TAVI patient

Plenary

Chairpersons: A. Baumbach, S. Windecker Panellists: J.J. Bax, Ö. Göktekin (Pending approval), J.J. Popma, D. Walters

Attend this session if you want:

- > To understand the mechanisms of stroke during and after TAVI
- To learn how to select the best procedural strategy for patients at high . stroke risk
- To learn more about medical treatment strategies to minimise stroke
- 16:30
- > Session objectives A. Baumbach
- 16:34
- > Cerebrovascular complications after valve intervention: incidence and new standardised definitions A. Lansky
- 16:41
- Time to React@PCR
- > How do we identify stroke risk during and 16:47 after TAVI? A. Linke
- 16:54
 - > Time to React@PCR
- > Preventing periprocedural stroke using 17:00 cerebral protection: which patient and which device? H. Eggebrecht
- 17:07 > Time to React@PCR
- 17:13
- > Preventing post-procedural stroke using medical therapy: which patient and which reaime?
 - J.P. Collet
- > Time to React@PCR 17:20
- 17:26
- > Session evaluation and key learnings S. Windecker

16:30 - 17:30 ROOM 3

Advances in percutaneous mitral valve treatment

Plenary

Chairpersons: V. Bapat, C. Tamburino Panellists: P. Boekstegers, V. Delgado, M.B. Leon, T. Modine

Attend this session if you want:

- > To fully understand which patients need alternatives to edge-to-edge percutaneous repair
- > To appreciate the potential indications and limitations of percutaneous mitral valve annuloplasty and replacement
- To know more about current imaging tools for percutaneous mitral valve annuloplasty and replacement
- 16:30
- Session objectives V. Bapat
- 16:34
 - Unmet need for surgical and percutaneous treatment of mitral regurgitation A. Vahanian
- 16:41

17:26

- > Time to React@PCR
- > Pre- and periprocedural imaging to enable 16:47 percutaneous mitral annuloplasty and replacement S. Von Bardeleben
- > Time to React@PCR 16:54
- > Transcatheter mitral annuloplasty lessons 17:00 we have learnt H. Sievert
- 17:07 > Time to React@PCR
- > Transcatheter mitral valve replacement: 17:13 which patients are suitable? I. Meredith
- 17:20 > Time to React@PCR
 - > Session evaluation and key learnings C. Tamburino

Monday 19 September 2016 - Afternoon - Programme valid as of 05-08-2016

17:26 > Discussion and audience interaction

	TAVI: outcomes with new and	16:30 - 17:30	TAVI complications 3
ROOM 4	established devices	INTERACTIVE	Session comprising selected PCR London Valves
Abstracts	Session comprising selected PCR London Valves	CASE CORNER	2016 clinical case submissions
	2016 abstract submissions	Cases	Facilitators: J. Hon, T. Schmitz
	Chairpersons: F. Castriota, M. Ng	16.20	Named 16C 16C006 Washington in the
	Panellists: S. Saito, G. Yucel	16:30	> Lond16C-ICC086 - Ventricular dislocation of the low implanted transcatheter aortic
16:30	> Lond16A-OP24 - Two-year outcomes with		valve in the patient with porcelain aorta
10.50	a fully repositionable and retrievable		and a narrow sino-tubular junction
	percutaneous aortic valve in 250 high		J. Bulum
	surgical risk patients: results from the	16:38	> Lond16C-ICC100 - Transapical
	REPRISE II trial extended cohort I. Meredith		transcatheter closure of the left ventricular pseudoaneurysm after aortic valve
16:36	Discussion and audience interaction		replacement
16:40	> Lond16I-OP02 - New modular aortic valve		J. Ito
10.10	prosthesis	16:46	> Lond16C-ICC091 - Rapid solution for
	G. Melnick		coronary obstruction during CoreValve
16:46	Discussion and audience interaction		implant - balloon extraction <i>T. Al-Badawi</i>
16:50	> Lond16I-OP04 - Safety and effectiveness of	. 16:54	> Lond16C-ICC099 - TAVI: life threatening
	a novel transfemoral, supra-annular, early functional, retrievable transcatheter aortic	. 10.54	complication and out-of-the-box solution
	valve system: primary results of the		N. Chouhan
	Nautilus multicentric study	17:02	> Lond16C-ICC087 - Ascending aorta
	P. Lemos		dissection after right coronary artery PCI
16:56	Discussion and audience interaction		and unsuccessful TAVI M. Bunc
17:00	> Lond16A-OP40 - One-year outcome of a	17:09	> Lond16C-ICC104 - Complication on large
	multicentre clinical study evaluating a novel self-expanding and resheathable	17.05	annulus TAVI
	transcatheter aortic valve system	*	Q. Labarre
	T. Walther	17:16	> Lond16C-ICC106 - A case where you wish
17:06	 Discussion and audience interaction 		to have a retrievable valve
17:10	> Lond16A-OP33 - First report of one-year	17:23	S. Fournier > Lond16C-ICC107 - Valve-in-valve
	outcomes in patients treated with a fully repositionable and retrievable aortic valve	17:23	procedure in a patient with delayed
	in routine clinical practice (RESPOND		trancatheter heart valve migration
	post-market registry)		J. Valle Raleigh
	N. Van Mieghem		
17:16	 Discussion and audience interaction 		
17:20	> Novel device: a unique self-expanding		
	TAVI experience <i>U. Schäfer</i>		
17:26	Discussion and audience interaction		

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16:30	- 17:30	
	ROOM 5	

Focus Nurses and Allied Professionals

Plenary

The role of nurses and allied health professionals in the management of procedural complications

Chairpersons: J. Byrne, K. Wilson Panellists: M. De Ronde, N. Delahunty (Pending approval), P. Ghandour

Attend this session if you want:

- > To understand how nurses and allied health professionals can make a difference when procedural complications arise
- To improve your knowledge of how to treat common complications during TAVI
- To improve team communication before, during and after procedural complications
- > Session objectives 16:30 K. Wilson
- > Case 1 (Vascular) 16:34 N. Delahunty (Pending approval)
- Time to React@PCR 16:40
- Case 2 (Aortic) 16:45 M. De Ronde
- 16:53 Time to React@PCR
- Case 3 (Coronary) 17:00 P. Ghandour
- 17:06 > Time to React@PCR > How do we learn when complications 17:13
 - arise? Human factors and the importance of communication M. Bowers
- 17:20 > Time to React@PCR
- > Session evaluation and key learnings 17:26 J. Byrne

-17:00 -

MAIN ARENA

17:15 - 18:00 # LIVE demonstration from St. Thomas' Hospital - London, United Kingdom



Chairpersons: T. Lefèvre, C.K. Naber Panellists: D. Blackman, F. Hellig, R. Kornowski, P. MacCarthy, L. Sondergaard, C. Young Operators: J. Hancock, B. Prendergast, S. Redwood

17:15 > Overview of the tools to be used during the LIVE demonstration L. Sondergaard (Pending approval)

LIVE demonstration from St. Thomas' 17:20 Hospital - London, United Kingdom

> Time to React@PCR 17:50

17:30 - 18:30 🖟 International Forum 3: ROOM 4 Spain-Mexico share their most educational cases Cases Session comprising selected PCR London Valves 2016 clinical case submissions > Lond16C-OP005 - TAVI in depressed 17:30 ventricular function with low flow, low gradient aortic stenosis assisted with femoro-femoral cardiopulmonary bypass J. Quintanilla > Discussion and audience interaction 17:38 17:45 Lond16C-OP049 - The role of the snare in a difficult TAVI V. Ruiz-Ouevedo > Discussion and audience interaction 17.53 > Lond16C-OP144 - Transseptal mitral 18:00 valve-in-valve implantation. Dealing with technical issues and complications M. Alcantara 18:08 > Discussion and audience interaction 18:15 Lond16C-OP065 - Three cases of early valve thrombosis after TAVI with Lotus

valve

18:23

R.A. Hernandez

> Discussion and audience interaction

ROOM 2

Plenary

17:35 - 18:35 🖫 Understanding heart valve anatomy using multimodality imaging

Chairpersons: A. Baumbach, J.J. Bax Panellists: E. Brochet, R. Hahn, K. Hayashida, S. Von Bardeleben

- > To understand heart valve anatomy across the spectrum of imaging modalities
- > To learn about the fluoroscopic anatomy of heart valves for transcatheter valve interventions
- To appreciate the next steps in creating a new generation of interventional imaging specialists
- 17:35 > Session objectives J.J. Bax
- > Heart valve anatomy: perspectives from 17:38 the 3-chamber, 2-chamber and short-axis views N. Piazza
- > Time to React@PCR 17:45 > Fluoroscopic heart valve anatomy -17:50 insights from CT and the link to
 - echocardiography D. Mylotte > Time to React@PCR
- 17:57 > Clinical case presentation - when 18:02 multimodality imaging told the whole story J. Byrne
- 18:09 > Time to React@PCR How do we bring the specialities of intervention and imaging even closer? Perspectives from intervention 18:14 N. Van Mieghem
- > How do we bring the specialities of 18:20 intervention and imaging even closer? Perspectives from imaging V. Delgado
- > Time to React@PCR 18:26 > Session evaluation and key learnings 18:31 A. Baumbach

- 08:00 -

MAIN ARENA

Plenary

08:00 - 08:45 Expanding TAVI to lower risk patients with bicuspid valve disease: optimising outcomes through imaging

Chairpersons: J.J. Bax, J. Webb Panellists: M. Chen, N. Dumonteil, K. Hayashida, A. Linke, P. Pibarot, J.J. Popma

Attend this session if you want:

- > To fully understand the importance of bicuspid aortic valve pathology on clinical decision-making and TAVI
- To know how to select an appropriate TAVI device for patients with bicuspid aortic valve disease
- To learn tips and tricks to achieve optimal deployment depth in TAVI for bicuspid aortic valve disease

08:00

> Session objectives J. Webb

> Bicuspid aortic valve disease and 08:04 associated aortopathy - a new challenge for interventional cardiologists E. Brochet

08:10 08:16

- > Time to React@PCR
- Imaging to determine the correct TAVI device for bicuspid aortic valve disease: the concept of supra-annular sizing N. Piazza
- Time to React@PCR 08:22

08:28

- Imaging to guide optimal device deployment in bicuspid aortic valve disease: fluoroscopy, echocardiography, or both? N. Dumonteil
- Time to React@PCR 08:34

08:40

Session evaluation and key learnings J.J. Bax

08:00 - 09:25 ROOM 2

Plenary

Valve-in-valve intervention: state of the art and future perspectives

Chairpersons: P. MacCarthy, S. Redwood Panellists: M. Gilard, R. Kornowski, M. Mack, H. Sievert

Attend this session if you want:

- > To fully understand the current and future scope of percutaneous valve-in-valve intervention
- To identify the key imaging requirements for patient evaluation and device selection
- To learn key practical factors in achieving successful outcomes in percutaneous valve-in-valve and valve-in-ring procedures

08:00

- > Session objectives P. MacCarthy
- 08:03 Where are we up to? Current status and

registry data D. Dvir

08:11 08:19

- Time to React@PCR
- > Imaging is key to successful outcomes defining the mechanism of valve failure and guiding device selection R. Hahn
- 08:27 > Time to React@PCR 08:35
 - > Aortic valve-in-valve a user's guide F. Castriota
- 08:43 Time to React@PCR 08:51
 - Mitral and tricuspid valve-in-valve and valve-in-ring - a user's guide V. Bapat
- 08:59 > Time to React@PCR 09:07
 - Where are we going? Future clinical strategies and technical innovations M. Abdel-Wahab
- > Time to React@PCR 09:15 09:23
 - Session evaluation and key learnings S. Redwood

08:00 - 09:00 ROOM 3



■ Learning transfemoral access and closure for TAVI - technical aspects and complication management

Facilitators: T. Lefèvre, N. Van Mieghem Media Driver: D. Natarajan

- > To learn the essential techniques for successful transfemoral access and closure
- > To appreciate the circumstances when transfemoral access is best avoided
- To fully understand how to prevent and manage vascular complications of

00.00 00.25	TAME IN A LONG		
	TAVI complications and their	08:00 - 09:25	TAVI: vascular access, coronary
ROOM 4	prevention	INTERACTIVE	disease
Abstracts	Session comprising selected PCR London Valves 2016 abstract submissions	CASE CORNER	Session comprising selected PCR London Valves 2016 clinical case submissions
•	Chairpersons: J. Byrne, A. Lansky	Cases	Facilitators: A.S. Petronio, T. Walther
	Panellists: D. Himbert, H.L. Kao		,
08:00	Lond16A-OP71 - Subclinical leaflet thickening in a novel mechanical expanded TAVI device	08:00	 Lond16C-ICC030 - Same setting right and then left 18F femoral access for TAVI. Bailout access site manoeuvers G. Latsios
•	R. Gooley	08:08	> Lond16C-ICC095 - Difficult transfemoral
08:06 08:10	 Discussion and audience interaction Lond16A-OP11 - Incidence, predictors, and 		access in TAVI: snare could be an option E. Karacop
	mid-term outcomes of possible leaflet	08:16	> Lond16C-ICC108 - Bending the rules in
	thrombosis after TAVI R. Yanagisawa		transfemoral TAVI: overcoming severe iliac tortuosity
08:16	> Discussion and audience interaction		J. Michel
08:20	 Lond16A-OP44 - Safety and efficacy of the cerebral embolic protection device during , TAVI: results from a single-centre 	08:24	 Lond16C-ICC109 - Steps to manage potential "suicide left ventricle" in TAVI patient
	experience		R. Wolff
	M. Dallago	08:32	> Lond16C-ICC110 - Transfemoral complex
08:26	 Discussion and audience interaction 	'	TAVI procedure in patient with bicuspid
08:30	Lond16A-OP17 - The effect of		aortic valve stenosis and previous surgical
	transcatheter aortic valve replacement on		treatment for abdominal aortic aneurism
	cognition - a prospective pilot study <i>M. Abawi</i>		L. Salemme
08:36	 Discussion and audience interaction 	08:40	> Lond16C-ICC123 - Difficult implantation of
08:41	> Lond16A-OP55 - Evaluation of the		second Evolut valve through the first one P. Kubler
90	incidence, timing, and potential recovery	08:48	> Lond16C-ICC165 - Severely tortous
	rates of complete atrioventricular block		anatomy in patient treated with
	after TAVI: a Japanese multicentre registry		transfemoral TAVI
	study	·	B. Rymuza (Pending approval)
00:47	A. KagaseDiscussion and audience interaction	08:56	> Lond16C-ICC166 - When deep
08:47 08:52	 Discussion and audience interaction Lond16A-OP20 - Impact of implantation 		implantation is not an option G. Katsimaaklis
00.52	depth for pacemaker need after	09:04	> Lond16C-ICC093 - A case of minimum
	implantation of a fully repositionable and	05.04	contrast TAVI screening in end-stage renal
	retrievable aortic valve - insights from the		dysfunction
,	respond post-market study		T. Sakamoto
20.50	L. Van Gils	09:11	> Lond16C-ICC113 - TAVI with PCI of the left
08:58	> Discussion and audience interaction		main
09:03	 Lond16A-OP66 - Role of implantation depth on pacemaker rate and paravalvular 	00.10	J.H. Kim > Lond16C-ICC155 - Transaortic TAVI and
	leakage after balloon expandable TAVI	09:18	LIMA-left anterior descending under
j	S. Fateh-Moghadam (Pending approval)		extracorporeal membrane oxygenation
09:09	 Discussion and audience interaction 		support in a no option patient
09:14	> Lond16A-OP31 - Assessment of aortic		N. Bonaros
	regurgitation by contrast densitometry	,	
	angiography in the setting of TAVI;		•
	echocardiographic correlates M. Abdelghani		
09:20	 Discussion and audience interaction 	**	
09.20	- Discussion and addictive interaction ,		

08:00 - 09:25 ROOM 5	Mitral complication and hole closure after valve interventions		- 09:00 -
Cases	Session comprising selected PCR London Valves 2016 clinical case submissions	09:30 - 10:30 ROOM 2	Secondary mitral reg percutaneous strate
	Facilitators: C. Grasso, F. Nietlispach	Plenary	improve outcomes
08:00	> Lond16C-ICC092 - Occult mitral valve damage after percutaneous mitral valve edge-to-edge repair Z. Rahhab		Chairpersons: T. Feldman, Panellists: P. Boekstegers, Praz, U. Schäfer
08:09	> Lond16C-ICC118 - Valve-in-ring mitral. Post-operative valve thrombosis G. Dahle		Attend this session if you > To understand when and edge-to-edge repair fails
08:18	> Lond16C-ICC120 - Sudden thrombosis after transapical valve-in-ring procedure in mitral position Liewald		treatment of secondary r regurgitation > To identify predictors of propose strategies to im
08:27	> Lond16C-ICC129 - Two clips, not enough to stabilise a partial clip detachment J. Morales Portano		outcomes after edge-to- secondary mitral valve re > To advance hypotheses f
08:36	Lond16C-ICC014 - Successful percutaneous closure of a large prosthetic tricuspid valve paravalvular leak with two VSD occluders in patient with previous metallic mitral valve ring		patient selection criteria percutaneous treatment patients with secondary regurgitation
08:45	R. Anantharaman > Lond16C-ICC017 - Double approach mitral paravalvular leak closure	09:30 09:34	 Session objectives H. Ince Secondary mitral regurging
08:55	P. Dardas Lond16C-ICC033 - Percutaneous treatment of severe transvalvular and paravalvular		of current medical and d the need for percutaneo A. Vahanian
20.05	regurgitation in a failing surgical aortic valve prosthesis due to recurrent endocarditis R.K. Binder	09:41 09:47	 Time to React@PCR Percutaneous edge-to-ecsecondary mitral regurgioutcomes and predictors
09:05	 Lond16C-ICC073 - Plugging paravalvular leak immediately after TAVI with self-expandable valve in a patient with stenotic bicuspid anatomy Y. Feng 	09:54 10:00	C. GrassoTime to React@PCRAlternative percutaneous secondary mitral regurgity. Bapat
09:15	 Lond 16C-ICC130 - A case of transeptal and transapical access for transcatheter closure of mitral prothetic paravalvular leak R. Sádaba 	10:07 10:13	 Time to React@PCR A further challenge for properties of the properties of th

MAIN ARENA



08:45 - 09:30 PLIVE demonstration from Swiss Cardiovascular Centre, Bern University Hospital - Bern, **Switzerland**

Chairpersons: J.J. Bax, J. Webb Panellists: M. Chen, N. Dumonteil, K. Hayashida, A. Linke, P. Pibarot, J.J. Popma

> Overview of the tools to be used during 08:45 the LIVE demonstration A. Linke (Pending approval) 08:50

LIVE demonstration from Swiss Cardiovascular Centre, Bern University Hospital - Bern, Switzerland

09:20 > Time to React@PCR

egurgitation: egies to

n, H. Ince s, F. Hellig, F.

u want:

- nd how ils in the mitral
- of failure and nprove edge repair of regurgitation
- for future a for nt options in y mitral
- gitation limitations device therapy and ous treatment
- edge repair in gitation - current rs of failure
- us approaches for
- gitation
- percutaneous nitral regurgitation tic stenosis U. Schäfer
- > Time to React@PCR 10:20 Session evaluation and key learnings 10:26 T. Feldman

Tuesday 20 September 2016 – Morning - Programme valid as of 05-08-2016

09:30 - 10:30 E ROOM 4 Cases	International Forum 4: PCR-CIT China Chengdu Valves and PCR Tokyo Valves share their most educational cases	09:30 - 10:30 E INTERACTIVE CASE CORNER Cases	TAVI complications 4 Session comprising selected PCR London Valves 2016 clinical case submissions Facilitators: D. Blackman, N. Dumonteil
	Chairpersons: M. Chen, P. MacCarthy Panellist: C.K. Naber (Pending approval)	09:30	> Lond16C-ICC112 - TAVI in TAVI for paravalvular regurgitation after TAVI D.S. Sim
09:30	 PCR London Valves welcomes PCR-CIT China Chengdu Valves and PCR Tokyo Valves 	09:37	 Lond16C-ICC114 - Left ventricular outflow tract-migrated transcatheter heart valve L. Salido-Tahoces
09:33	P. MacCarthy Case 1: TAVI in a bicuspid valve M.K.Y. Lee		> Lond16C-ICC116 - Spontaneous coronary intramural dissection with haematoma post-replacement of aortic valve
09:39 09:43	 How would I treat? S. Saito Discussion and audience interaction 	09:51	F.C. Liao (Pending approval) > Lond16C-ICC124 - TAVI unusual complication J. Sandoval
09:47 09:51 09:57	 How did treat? M.K.Y. Lee Case 2: valve-in-valve TAVI How would treat? H.L. Kao (Pending approval) 	09:58	 Lond16C-ICC127 - Late migration (28 months after implantation) of transcathéter mitral valve in ring requiring surgical reoperation
10:01 10:05 10:09	 Discussion and audience interaction How did I treat? K. Hayashida Case 3: TAVI complication 	10:06	 M. Yates Lond16C-ICC132 - Creating stability: one method of treating an embolised TAVI device
. 10:15	X. Wei (Pending approval) > How would I treat? T. Sakamoto (Pending approval)	, 10:14	R. Gooley > Lond16C-ICC136 - Partial deployment of a balloon expandable valve due to delivery system failure: expect the unexpected
10:19 -10:23	 Discussion and audience interaction How did I treat? X. Wei (Pending approval) 	10:22	M. ChrissoherisLond16C-ICC139 - Late shifting
10:27	 Session evaluation and key learnings M. Chen 		transcatheter self-expandable valve down to the left ventricle treated with re-TAVI procedure D. Stolyarov

Tuesday 20 September 2016 - Morning - Programme valid as of 05-08-2016

	TAVI in bicuspid valves		- 11:00 -
ROOM 5	Session comprising selected PCR London Valves 2016 clinical case submissions	11.00 11.45	Tuinia and namistuis 2016.
Cases	Facilitator: R. Kornowski	MAIN ARENA	Trials and registries 2016: what do they mean?
09:30	Lond16C-ICC036 - Full transcatheter treatment of bicuspid aortic valve stenosis and aortic coarctation in a 76-year-old female F. van der Kley	Plenary	Chairpersons: M. Gilard, O. Wendler Panellists: A. Baumbach, P. Chiam, C. Hamm, A. Lansky, R. Makkar, N. Moat React@PCR Moderator: S. Cannata (Pending approval)
09:37	> Lond16C-ICC061 - Transfemoral TAVI in a complex bicuspid anatomy J. Molina-Martin de Nicolas		Attend this session if you want: > To hear a summary of the latest data
09:44	Lond16C-ICC083 - Extremely high deployment of an undersized TAVI prostesis to treat heavily calcified bicuspid aortic valve		concerning percutaneous valve intervention To appreciate the limitations and shortcomings of the available evidence
09:51	 L. Paraggio (Pending approval) Lond16C-ICC085 - Transfemoral TAVI in an intermediate risk patient with bicuspid aortic valve and high embolic risk P. Gatto 		 base To fully understand how to incorporate the findings of randomised controlled trials and large scale registries into your everyday practice
09:58	 Lond16C-ICC122 - TAVI treatment for a patient with bicuspid aortic valve and mild asymmetrical calcification Y.N. Xu 	11:00	Session objectives M. Gilard The TAVI randomised controlled trials
10:06	> Lond16C-ICC149 - Five cases of bicuspid aortic stenosis with transcatheter aortic	11:03	> The data and their limitations L. Sondergaard
10:14	valve replacement R. Muratalla Lond16C-ICC167 - Successful TAVI in	11:10	Messages for everyday practice S. Redwood
10.14	bicuspid anatomy with a new self-expandable device	11:16	Time to React@PCR The mitral registries The data and their limitations
10:22	Z.G. ZhaoLond16C-ICC023 - Lotus TAVI implantation	11.23	M. Mack
10:22	in a bicuspid aortic valve: when position matters	11:30	Messages for everyday practice H. Ince
	R. Nerla	11:36	> Time to React@PCR
		11:43	> Session evaluation and key learnings

O. Wendler

Plenary

09:35 - 10:30 The Great Valve Debate: is TAVI the new gold standard in the treatment of patients with aortic stenosis?

Supported by an educational grant from Edwards Lifesciences

Chairpersons: J.J. Bax, M. Haude Panellists: N. Moat, T. Modine, A.S. Petronio

11:00	- 12:30
	ROOM 2

Plenary

RAPID FIRE: innovations in percutaneous tricuspid intervention

Chairpersons: R. Hahn (Pending approval), M. Haude Panellists: J. Hancock (Pending approval), D. Mylotte, C. Ruiz, H. Treede React@PCR Moderator: H. McConkey (Pending approval)

Attend this session if you want:

- To fully understand the anatomical and technical challenges associated with percutaneous tricuspid intervention
- To hear the latest outcome data concerning cutting edge technologies with first in man experience
- To identify the limitations of currently available devices
- 11:00
- Session objectives R. Hahn (Pending approval)
- What are the anatomical and technical 11:04 challenges in percutaneous tricuspid intervention?
- F. Maisano Lond16I-OP11 - Navigating to the tricuspid 11:11 valve for transfemoral interventional tricuspid valve repair M. Nabauer
- Lond16I-OP03 Tricuspid repair with the 11:19 Trialign system J. Schofer
- Lond16LBT-OP04 Early feasibility of a 11:27 percutaneous tricuspid valve annuloplasty system for symptomatic chronic functional tricuspid regurgitation: 30-day results of the SCOUT trial R. Hahn
- What does the future hold? 12:19 A. Latib
- 12:26 Session evaluation and key learnings M. Haude

ROOM 3

11:00 - 12:30 F Learning TAVI for failing aortic bioprostheses and bicuspid valves



Facilitators: M.K.Y. Lee, H. Moellmann Media Driver: D. Natarajan Expert Panellist: K. Hayashida

Attend this session if you want:

- > To learn how to plan TAVI for a failing aortic bioprosthesis or bicuspid valve
- To appreciate the key technical aspects of the TAVI procedure in this clinical setting
- To fully understand how to predict and prevent complications of TAVI for a failing aortic bioprosthesis or bicuspid valves

INTERACTIVE CASE CORNER

11:00 - 12:30 A TAVI unusual cases

Session comprising selected PCR London Valves 2016 clinical case submissions

Facilitators: J. Hon, J.J. Popma

Cases 11:00

- > Lond16C-ICC053 Subaortic compressive pseudoaneurysm treated by transcatheter self-expanding CoreValve prosthesis G. Sardella
- 11:08 > Lond16C-ICC019 - Mechanical thrombectomy of embolised native aortic valve during TAVI J. Coughlan (Pending approval)
- > Lond16C-ICC043 Mobile mass at aortic 11:16 valve in patient with severe aortic stenosis undergoing TAVI S. Sasaki
- Lond16C-ICC018 Aortic regurgitation due 11:24 to mobile chronic valve vegetation treated with TAVI - first-human case A.B. Gopalamurugan
- > Lond16C-ICC071 TAVI in a heart failure 11.32 patient with a left ventricular assist device and severe aortic regurgitation F. van der Kley
- Lond16C-ICC126 TAVI transcaval with 11:40 lotus valve J. Sandoval
- 11:48 Lond16C-ICC131 - TAVI for failed aortic homograft with severe regurgitation superior treatment to redo surgery? T. Al-Badawi
- Lond16C-ICC134 Severe aortic stenosis 11:56 and acute type A proximal aortic dissection: a self-expandable valve to treat both M. Chrissoheris
- Lond16C-ICC150 Complete percutaneous 12:04 management of cardiac diseases: three devices for one heart R. Muratalla
- 12:12 Lond16C-ICC154 - TAVI in a heart transplanted patient affected by acromegaly E. Raviola

12:21

> Lond16C-ICC168 - Compassionate use of a self-expanding aortic valve bioprosthesis for severe aortic regurgitation in cardiogenic shock without aortic valve stenosis or annular calcification M. Patel

Tuesday 20 September 2016 - Morning - Programme valid as of 05-08-2016

11:00 - 12:30	Percutaneous mitral therapies
ROOM 5	Session comprising selected PCR London Valves 2016 clinical case submissions
Cases	Facilitators: K.H. Kuck, C. Tamburino
11:00	Lond16C-ICC004 - Wire-assisted Inoue balloon crossing extremely narrow mitral orifice-rescue method when all the techniques failed C.W. Lee
11:07	> Lond16C-ICC063 - Saved by a thread! M. Settergren
11:14	> Lond16C-ICC090 - First experience with a transcatheter mitral valve with apical tether G. Dahle
11:21	> Lond16C-ICC111 - Implantation of a mechanically expanding transcatheter valve for severe mitral stenosis N. Uren (Pending approval)
11:28	 Lond16C-ICC146 - Cardioband implantation to treat recurrent mitral regurgitation after MitraClip therapy M. Taramasso
11:35	 Lond16C-ICC042 - Double clips, double the trouble! G. Tang
11:42	 Lond 16C-ICC142 - Transcatheter mitral valve-in-ring for prosthetic valve dysfuction R. Tanner
11:49	 Lond16C-ICC056 - Successful percutaneous edge-to-edge treatment for severe rheumatic mitral regurgitation K.K. Yeo
11:56	 Lond16C-ICC066 - Recurrent intraclips mitral regurgitation: an unconventional treatment approach Biasco (Pending approval)
12:03	 Lond16C-ICC133 - MitraClip transcatheter mitral valve repair: an alternative treatment for double orifice mitral valve with flail leaflet Z. Wang
12:10	 Lond16C-ICC070 - Transseptal mitral valve-in-valve N. Uren (Pending approval)
12:17	 Lond16C-ICC115 - Transapical mitral valve in ring implantation after mitral valve repair failure D. Jagielak
12:24	 Lond16C-ICC055 - Emergency cardiac surgery for irreversible MitraClip delivery system entrapment G. Sardella

MAIN ARENA



11:45 - 12:30 F LIVE demonstration from Swiss Cardiovascular Centre, Bern University Hospital - Bern, Switzerland

> Chairpersons: M. Gilard, O. Wendler Panellists: A. Baumbach, P. Chiam, C. Hamm, A. Lansky, R. Makkar, N. Moat React@PCR Moderator: S. Cannata (Pending approval)

 Overview of the tools to be used during the LIVE demonstration 11:45 N. Moat (Pending approval)

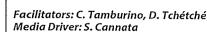
LIVE demonstration from Swiss Cardiovascular Centre, Bern University Hospital - Bern, Switzerland

12:20 > Time to React@PCR

- 09:00 -

ROOM 3

09:00 - 10:30 🛭 Learning how to make your TAVI programme more efficient and cost effective



Attend this session if you want:

- > To learn how your TAVI service can be more streamlined and cost-effective
- To understand when conscious sedation and general anaesthesia are most appropriate for TAVI
- To understand the key principles of safe early discharge after TAVI

- 13:00 -

MAIN ARENA

13:00 - 14:40 🛭 Cardioband: clinical reality for mitral and tricuspid valve repair Sponsored by Valtech Cardio

Tools and Techniques



Chairpersons: E. Grube, K.H. Kuck Panellists: A. Latib, F. Maisano, G. Nickenig, S. Von Bardeleben (Pending approval)

React@PCR Moderator: S. Cannata (Pending approval)

Attend this session if you want:

- > To understand how to perform mitral repair in patients with functional mitral regurgitation
- To learn more about case examples of the Cardioband procedures
- To learn about the evolution of Cardioband for treating heart failure
- 13:00 Session objectives E. Grube
- 13:05 > 24-month results and clinical studies update K.H. Kuck
- 100 patients: lessons learned 13:15 F. Maisano
- Recorded case 13:25
- > Time to React@PCR 13:50
- Cardioband, synergetic with other 13:55 treatments A. Latib
- 14:05 Echo Guidance: following the anatomy and physiology
- S. Von Bardeleben (Pending approval)
- Time to React@PCR 14:15
- Tricuspid repair with Cardioband 14:20 G. Nickenig
- 14:30 Time to React@PCR
- Session evaluation and key learnings 14:35 E. Grube

13:00 - 13:45 ROOM 2

Symposium

S,

☐ Direct Flow Medical: driving excellent patient outcomes today and tomorrow

Sponsored by Direct Flow Medical Chairpersons: J.J. Popma, D. Tchétché Panellists: F. De Marco, S. Gafoor, M. Gilard

Attend this session if you want:

- > To deep dive into the latest data from Direct Flow Medical TAVI technology
- To learn advanced Direct Flow Medical TAVI system implant techniques
- > To learn about the Direct Flow Medical mitral programme
- 13:00 > Session objectives D. Tchétché
- > Aortic programme a deep-dive into the 13.03 clinical evidence A. Latib (Pending approval)
- > Time to React@PCR 13:11
- > Complete procedural control reaching 13:16 the goal of 'no aortic regurgitation' S. Lim (Pending approval)
- > Time to React@PCR 13-24
- > Mitral programme update 13:29 N. Moat
- Time to React@PCR 13:37
- Session evaluation and key learnings 13:42 J.J. Popma

13:00 - 14:40 ROOM 4

Tricuspid repair with the Trialign system

Tools and Techniques

13:00

Sponsored by Mitralign Chairperson: M.B. Leon (Pending approval)

Panellists: R. Hahn (Pending approval), L. Labrousse, A. Latib (Pending approval), J. Schofer

- > To familiarise yourself with tricuspid repair techniques
- > To develop an understanding of tricuspid imaging
- > To understand a Trialign procedure
- > Session objectives M.B. Leon (Pending approval)
- Surgical repair techniques 13:05 L. Labrousse
- > Discussion and audience interaction 13:13
- > Trialign techniques 13:18 A. Latib (Pending approval)
- > Discussion and audience interaction 13:26
- > Echocardiology tips and tricks 13:32 R. Hahn (Pending approval)
- > Discussion and audience interaction 13:40
- Recorded case from Hamburg 13:45 University Cardiovascular Center -Hamburg, Germany
 - J. Schofer
- 14:30 Discussion and audience interaction 14:35
 - Session evaluation and key learnings M.B. Leon (Pending approval)

- 14:00 -

MAIN ARENA



14:45 - 15:30 LIVE demonstration from Swiss Cardiovascular Centre, Bern University Hospital - Bern, **Switzerland**

Chairpersons: J. Fajadet, M. Haude (Pending approval) Panellists: R. Kornowski, N. Piazza, S. Redwood (Pending approval), C. Tamburino, D. Tchétché, O. Wendler React@PCR Moderator: H. McConkey (Pending approval)

> Overview of the tools to be used during 14:45 the LIVE demonstration S. Redwood (Pending approval) 14:50 LIVE demonstration from Swiss

Cardiovascular Centre, Bern University Hospital - Bern, Switzerland

> Time to React@PCR 15:20

ROOM 2

Plenary

14:45 - 15:45 🖫 Technical challenges in percutaneous mitral edge-to-edge repair - learning from difficult cases

Chairpersons: T. Feldman, G. Nickenia Panellists: H. Ince, F. Maisano, H. Treede, K.K. Yeo

Attend this session if you want:

- > To be updated on the results of percutaneous edge-to-edge repair and the determinants of success / failure
- > To understand the technical difficulties which may be encountered during percutaneous edge-to-edge repair
- To identify strategies to overcome difficult anatomy in percutaneous treatment of mitral regurgitation
- 14:45 > Session objectives G. Nickenia
- 14:50 Case 1: clipping after failed percutaneous repair C. Grasso
- > Time to React@PCR 14.55
- > Case 2: clipping after failed surgical repair 15:00 P. Boekstegers
- > Time to React@PCR 15:05
- > Case 3: Barlow disease 15:10 F. Maisano
- 15:15 > Time to React@PCR
- 15:20 > Case 4: extreme tethering in secondary mitral regurgitation M. Buch
- 15:25 > Time to React@PCR
- > Case 5: clipping in cardiogenic shock 15:30 K.H. Kuck
- 15:35 > Time to React@PCR
- > Session evaluation and key learnings 15:40 T. Feldman

ROOM 3

Plenary

14:45 - 15:45 Extending the indications for TAVI to patients with asymptomatic severe aortic stenosis

Chairpersons: M.B. Leon, P. Pibarot Panellists: E. Grube, K. Hayashida, F. Hellig, A. Linke

Attend this session if you want:

- > To understand in more detail the natural history of aortic stenosis
- > To explore the potential of minimally invasive valve therapy in the asymptomatic patient
- > To understand how earlier intervention could improve long-term outcomes
- > Session objectives 14:45 P. Pibarot
- 14:50 > The continuum of aortic stenosis: when does the real risk begin? P. MacCarthy (Pending approval)
- > Time to React@PCR 14.55
- > Identifying the at-risk patient symptoms, 15:00 biomarkers, imaging J.J. Bax
- 15:05 > Time to React@PCR
- 15:10 > Early intervention versus watchful waiting in asymptomatic severe aortic stenosis current data H. Moellmann
- 15:15 > Time to React@PCR
- > Potential advantages of TAVI over surgical 15:20 aortic valve replacement in asymptomatic patients . A. Cribier
- > Time to React@PCR 15:25
- 15:30 > What about moderate aortic stenosis and heart failure? Should we give TAVI the benefit of the doubt? N. Van Mieghem
- 15:35 > Time to React@PCR

15:40

> Session evaluation and key learnings M.B. Leon

14:45 - 15:45 ROOM 4	Graders choice: the top 5 cases	•	- 15:00 -
	of 2016 Session comprising selected PCR London Valves	15:30 - 16:30	Complications of percutaneous
Cases	2016 clinical case submissions	MAIN ARENA	valve intervention - nightmare
	Chairpersons: J. Byrne, B. Prendergast Panellists: N. Dumonteil, A. Latib, T.	Plenary	scenarios and heroic escapes
	Lefèvre, C. Ruiz		Chairpersons: J. Fajadet, M. Haude (Pending approval)
14:45	> Lond16C-OP045 - Transcatheter tricuspid		Panellists: R. Kornowski, N. Piazza, S.
	clipping after mitral clipping using echo		Redwood (Pending approval), C.
	and fluoro guidance G. Tang		Tamburino, D. Tchétché, O. Wendler React@PCR Moderator: H. McConkey
14:52	> Discussion and audience interaction		(Pending approval)
14:57	> Lond16C-OP050 - Emergency left main PCI		
	with "chimney technique" to treat coronary artery occlusion after		Attend this session if you want: > To learn practical tips and tricks to
	valve-in-valve TAVI		prevent and manage complications of
	R. Nerla		percutaneous valve interventions
15:04	 Discussion and audience interaction Lond16C-OP089 - Kissing balloons in the 		> To understand the importance of imaging in the detection and
15:09	aorta		management of procedural
	S. Toggweiler		complications
15:16	> Discussion and audience interaction		> To appreciate that even high volume experts get it wrong (sometimes)
15:21	> Lond16C-OP137 - Successful stent-retriever thrombectomy for acute		experts get it wrong (sometimes)
	cerebral embolisation after TAVI	15:30	> Session objectives
45.00	M. Miura	15:22	J. Fajadet > Prevention and management of
15:28 15:33	Discussion and audience interaction Lond16C-OP147 - Persistent tricuspid	15:33	complications during percutaneous valve
13.33	regurgitation after percutaneous mitral		intervention - top tips
	repair: a complete transcatheter treatment		A. Colombo
15:40	M. Taramasso Discussion and audience interaction		My worst complication during a percutaneous aortic valve procedure
15.40	The desired and addresses the decision	15:42	> Case 1 - The imager saves the day
		15.47	J. Hancock (Pending approval)
		15:47	Case 2 - The interventionist saves the day H. Eltchaninoff
		15:52	> Time to React@PCR
			My worst complication during a
		15:57	percutaneous mitral valve procedure > Case 3 - The imager saves the day
		15.57	R. Hahn
		16:02	> Case 4 - The interventionist saves the day
		16:07	S. Von Bardeleben (Pending approval) > Time to React@PCR
		10.07	My worst complication during a
			valvo in valvo procedure

- 16:00 -

valve-in-valve procedureCase 5 - The imager saves the day

M. Monaghan

D. Hildick-SmithTime to React@PCR

16:30 - 16:45	☐ Highlights of the Course
MAIN ARENA	Chairmanana M. Harrida B. Bus

Ceremony

16:12

16:17

16:22

16:27

Chairpersons: M. Haude, B. Prendergast Panellists: J. Fajadet, N. Piazza, S. Redwood, C. Tamburino, O. Wendler, W. Wijns

> Case 6 - The interventionist saves the day

 Session evaluation and key learnings M. Haude (Pending approval)

16:30 > Concluding remarks

 B. Prendergast

 16:40 > PCR London Valves 2017

 M. Haude (Pending approval)