

Determinazione del Responsabile Ufficio Formazione nº 1447 del 2 3 AGO 2016

Oggetto: Aggiornamento senza oneri, Dirigente Medico, Dott. Loi Bruno.

Pubblicata all'Albo Pretorio dell'Azienda Ospedaliera a partire dal 2 3 AGO. 2016 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 del Dipartimento Cardio Toraco Vascolare ha autorizzato a partecipare al suddetto Congresso il Dott. Loi Bruno:

Atteso

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

Ritenuto

di dover autorizzare la partecipazione del Dott. Loi Bruno 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:

- Autorizzare la partecipazione del Dott. Loi Bruno 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 Corrias
...

16-AGO-2016 11:08 MAR

Numero fax : 070539752

Nome : UFF.FORMAZIONE

Nome/Numero : 00256806592

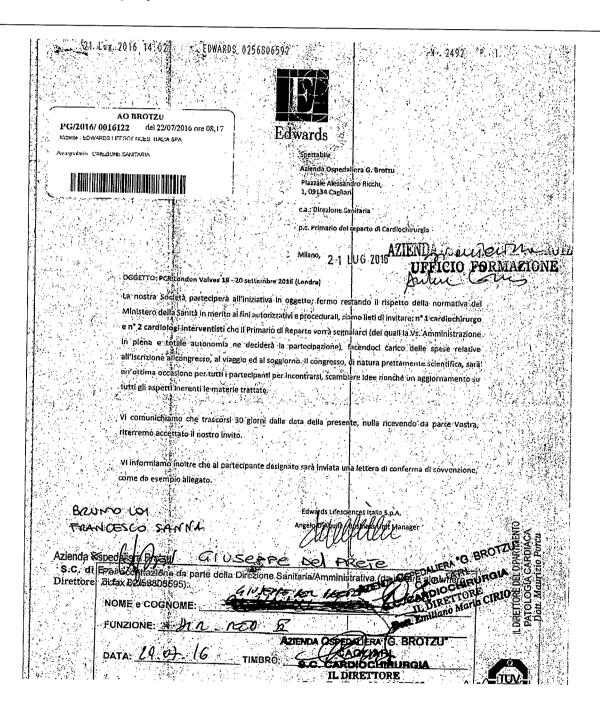
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AO BROTZU

PG/2016/ 0016122

del 22/07/2016 ore 08,17

Mittente EDWARDS LIFESCIENCES ITALIA SPA

Assegnatario : DIREZIONE SANITARIA





Edwards

Spettablle

Azienda Ospedaliera G. Brotzu

Plazzale Alessandro Ricchi, 1, 09134 Cagliari

c.a.: Direzione Sanitaria

p.c. Primario del reparto di Cardiochirurgia

Milano.

2 1 LUG 2016

UFFICIO FORMAZIONE

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

La nostra Socletà 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 informiamo inoltre che al partecipante designato sarà inviata una lettera di conferma di sovvenzione, come da esempio allegato.

Bruno LO1		Edwards Lifesciences Italia S.		
FRANCESCO SANNA		Angelo Danjuja Alemeks Ind		MENTA ACA PCU
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Azienda Sspedkliga Pryży G S.C. di Speraccettażione da parte Direttore dicfax 02/56806595):	della Direzione Sani	taria/Amministrativa (da	CARDIOCH DIRETTO	Mauri Mauri Mauri
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		IL DIRETTOI Dott. Emiliano Mari		TUV
Sede Lega	Edwards Lifesciences Italia S ele: Centro Leoni Edificio A • Vla Tel. 02.56806,1 • Fax 02.56806	Glovanni Spadolini 5 / 20141 Milano	, and the same of	A POPOLOU

P.I./C.F. 06068041000 • Capitale Sociale Euro 104,336,73 Int. vers. • Reg. Imprese Milano 06068041000 • R.E.A. 162





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 -

ROOM 2

11:00 - 12:00 Faking TAVI to the next level with imaging

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
- > Predicting the outcome of valve 11:04 implantation with echocardiography where are we? J. Hancock
- > Time to React@PCR 11:11
- 11:17 > Predicting the outcome of valve implantation with CT - current and future possibilities J. Leipsic
- 11:24 > Time to React@PCR
- Optimal device positioning to reduce procedural complications the double S 11:30 curve D. Mylotte
- 11:37 Time to React@PCR
- Valve imaging during follow-up normal and abnormal findings 11:43 R. Hahn
- 11:5Ò > Time to React@PCR
- Session evaluation and key learnings 11:56 M. Monaghan

- 12:00 -

INNOVATORS DAY - ROOM 5

PCR Innovators

12:30 - 12:35 ■ 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

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

Chairpersons: A. Latib, F. Maisano **PCR Innovators** Panellists: M. Darnaud, G. Nickenia Day

(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)
- 13:23 Discussion and audience interaction

ROOM 2

Plenary

12:35 - 13:35 | Imaging of the mitral valve complex for transcatheter interventions

Chairpersons: I. Meredith, L. Sondergaard 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
- > Session objectives 12:35 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
- 13:12 > Time to React@PCR
- > Imaging appearances of currently available 13:18 devices - a user's guide S. Von Bardeleben
- > Time to React@PCR 13:25
- Session evaluation and key learnings 13:31 L. Sonderaaard

- 14:00 -

INNOVATORS

DAY - ROOM 5

14:10 - 14:20 **▼ PCR Innovators Day @ London** Valves - A word from our sponsors

PCR Innovators

14:10

> IMMR presentation

N. Borenstein (Pending approval)

14:13 > HTI BioQuest presentation E. Howard (Pending approval)

genae presentation 14:16

A. Talen

INNOVATORS DAY - ROOM 5

PCR Innovators

14:20 - 15:15 Theme 2: innovation in percutaneous mitral valve replacement

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

14:20

Day

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

Innovations in focus: mitral valve replacement

14:30

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

14:38 14:45 > Discussion and audience interaction > The Cephea transcatheter mitral valve replacement system

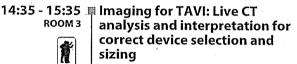
14:53 15:00

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

15:08

Discussion and audience interaction

ROOM 3



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





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 requiritation 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 **INNOVATORS** DAY - ROOM 5

percutaneous tricuspid valve intervention

▼ Theme 3: innovation in

PCR Innovators

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

15:55

> 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 16:20

16:35

> Discussion and audience interaction > Valtech Cardioband - an established device with a new delivery system A. Gross (Pending approval)

16:28

> Discussion and audience interaction

TRiCares - a dedicated tricuspid transcatheter heart valve

H.J. Straubinger (Pending approval) > Discussion and audience interaction

- 16:00 -

ROOM 2

Plenary

16:45 - 17:45 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

> Time to React@PCR 16:56

> Intracardiac echocardiography: pros and 17:02 cons

L. Sondergaard

17:09 > Time to React@PCR

> Transnasal echocardiography: pros and 17:15 cons M. Monaghan

Time to React@PCR 17:22

> Fusion imaging: current and future 17:28 possibilities J. Zamorano

> Time to React@PCR 17:35

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

Moderators: D. Cassak (Pending

16:50 - 17:35 Keynote lecture and round table PCR discussion

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 L. Biegelsen

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 -

INNOVATORS DAY - ROOM 5

PCR Innovators Day

17:35 - 17:45 🛭 Concluding remarks

Speaker: N. Piazza (Pending approval)

- 18:00 -

18:00 - 19:40 TAVI IN 2016: the year the MAIN ARENA

Tools and Techniques

S

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

> Time to React@PCR 18:12

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

18:27 > Time to React@PCR

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

> Time to React@PCR 19:08

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

> Time to React@PCR 19:23

Optimising TAVI through technological 19:28 innovation

S. Windecker

Session evaluation and key learnings 19:38 S. Windecker

- 08:00 -

08:30 - 08:45 ₦ Welcome MAIN ARENA

Chairpersons: B. Prendergast, S. Ceremony Windecker 1

> 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 - 09:30 LIVE demonstration from Clinique Pasteur - Toulouse, France



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

08:45

> Overview of the tools to be used during the LIVE demonstration C. Tamburino

08:50

LIVE demonstration from Clinique Pasteur - Toulouse, France

09:20

> Time to React@PCR

- 09:00 -

09:30 - 10:00 MAIN ARENA

Plenary

■ Spotlight session: bioprosthetic valve durability

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
- 09:30 > Session objectives B. Prendergast
- 09:33
 - Clinically relevant definitions of bioprosthetic valve durability and failure lessons from the surgical experience
- Durability of TAVI bioprostheses data 09.39 from the randomised trials and registries H. Eltchaninoff
- The pitfalls of long term survival analysis -09:45 implications for the regulators and future studies
- 09:51 Time to React@PCR
 - Session evaluation and key learnings S. Windecker (Pending approval)

09.57

ROOM 2

Plenary

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

Chairpersons: R. Kornowski, H. Moellmann 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
- > How and why might transcatheter valves 09:33 fail? M. Gilard
- > Time to React@PCR 09:40
- > TAVI durability and comparisons with 09:44 surgery C. Youna
- > Time to React@PCR 09.51
- > TAVI leaflet thickening and subclinical 09:55 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

ROOM 4

09:30 - 10:30 Mitral and tricuspid valve interventions

Abstracts

Session comprising selected PCR London Valves 2016 abstract submissions

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

- 09:30 > Lond16A-OP90 - Feasibility and efficacy of intracardiac echocardiography for percutaneous mitral valve edge-to-edge repair using the MitraClip system
 - M. Patel
- 09:37 > Discussion and audience interaction 09:42
 - > Lond16A-OP87 Mismatch between clinical benefit and functional capacity assessed by cardiopulmonary exercise test in MitraClip patients G. Salerno (Pending approval)
 - > Discussion and audience interaction
- 09:49 09:54 > Lond16A-OP13 - One year follow-up results of mitral valve transcatheter annuloplasty system for mitral reconstruction multicentre trial
- S. Von Bardeleben (Pending approval) > Discussion and audience interaction 10:01 10:06
 - > Lond16A-OP29 Mitral annulus calcification score on CT can identify patients with increased risk of persistent mitral regurgitation post-TAVI S. Setiawan
- > Discussion and audience interaction 10:13 10:18 > Lond16A-OP41 - Transcatheter treatment of severe tricuspid regurgitation using the MitraClip system
- J. Hausleiter > Discussion and audience interaction 10:25

	*		
09:30 - 10:30	TAVI 1	09:30 - 10:30	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 	09:38	Lond16C-ICC152 - Right coronary occlusion post TAVI treated by PCI A.K. Chaurasia
09:44	G. Ghanem 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 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 E	Keynote lecture
	conscious sedation, zero contrast R. Kaple	Keynote lecture	Chairpersons: N. Piazza, C. Tamburino
•		10:00	> Introduction C. Tamburino
		10:02	> The tricuspid valve - forgotten and neglected (until now) S. Bolling
· -		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
- To appreciate the unmet needs of TAVI in younger patients
- Session objectives 11:00 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
- 11:19 > Time to React@PCR
- > The limitations of TAVI in low-risk patients -11:23 a surgeon's perspective N. Moat
- > Time to React@PCR 11.28
- > Should the perspective of the Heart Team 11:32 now change? J. Webb
- > Time to React@PCR 11:37
- > 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. Naber

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
- 11:03 > What are the anatomical and technical challenges in percutaneous mitral intervention? E. Grube

Percutaneous mitral valve repair

- > What does the future hold? 12:21 T. Feldman
- > Session evaluation and key learnings 12:27 I. Meredith

11:00 - 12:30 Learning mitral valve-in-valve, ROOM 3



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

11:00 - 12:30	International Forum 1:	11:00 - 12:30	TAVI 2
ROOM 4	UK-Germany share their most	INTERACTIVE	Session comprising selected PCR London Valves
Cases	educational cases	CASE CORNER	2016 clinical case submissions Facilitators: H. Degen, Ö. Göktekin
•	Session comprising selected PCR London Valves 2016 clinical case submissions	Cases	(Pending approval)
	Chairpersons: M. Haude, D. Hildick-Smith Panellists: M. Mullen (Pending approval),	11:00	> Lond16C-ICC117 - TAVI as redo therapy
	J. Schofer, S. Von Bardeleben (Pending approval)	•	after initial surgery for aortic dissection G. Dahle
		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
11:15	> Lond16C-OP159 - Percutaneous		TAVI in a patient with previous mitral valve
	pulmonary valve implantation in an		replacement A. Higashimori
	orthotopic heart transplant recipient A. Bhan	11:36	> Lond16C-ICC068 - Benefit of TAVI with a
11:23	Discussion and audience interaction	. 11.50	recapturable and repositionable
11:30	> Lond16C-OP057 - Emergency paravalvular		bioprosthesis in a patient with oval shaped
	leak closure for aortic regurgitation		aortic annulus
	following implantation of	11:45	J. Valle Raleigh > Lond 16C-ICC 121 - Percutaneous valve
	"new-generation" self-expandable transchatheter aortic valve prosthesis	11.45	implantation in a congenital heart with
	M. Vasa-Nicotera		degenerated homograft in both aortic and
11:38	Discussion and audience interaction		pulmonic position
11:45	> Lond16C-OP078 - An interesting	11.54	J. Kefer > Lond16C-ICC135 - Contrast-induced
	complication following implantation of a	11:54	nephropathy is not the only cause of acute
	transcatheter valve in mitral annular calcification with a creative improvised		kidney injury after TAVI!
	surgical solution		A. Allali
	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 requrgitation		evaluation of TAVI with patient-specific
	E.W. Holy		computer simulation: a case example
12:08	> Discussion and audience interaction		N. El Faquir
12:15	> Lond16C-OP148 - Coronary occlusion	12:21	> Lond16C-ICC128 - Valve-in-valve: determination of sizing while performing
	during TAVI: triumphs and disasters		the case
12:23	S. Dawkins > Discussion and audience interaction		A. Merino Rajme
12:23	/ Discussion and addience interaction		

11:00 - 12:30 TAVI valve in valve

ROOM 5 Session comprising selected PCR London Valves 2016 clinical case submissions Cases

Facilitators: F. Castriota, D. Dvir

> Lond16C-ICC011 - Successful sheathless 11:00 implantation of a transfemoral valve-in-valve transcatheter aortic valve replacement for failed bioprosthetic valve R. Anantharaman

> Lond16C-ICC060 - Combined structural 11:09 heart disease interventions in a failed bioprosthesis: the Janus procedure N. Amabile

> Lond16C-ICC062 - Valve-in-valve: 11:18 unplugged H. McConkey

> Lond16C-ICC103 - TAVI: valve-in-valve in 11:27 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 S. Mauri

Lond16C-ICC156 - Valve-in-valve 11:54 challenges: we should not rely on the central marker! D. Dvir

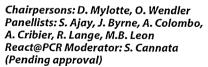
> Lond16C-ICC119 - Concomitant transapical 12:03 TAVI and catheter valve in mitral annular calcification G. Dahle

> 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 F LIVE demonstration from St. Thomas' Hospital - London, **United Kingdom**



> 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

12:20 > Time to React@PCR

- 14:00 -

ROOM 3

14:45 - 16:15 Tearning MitraClip: how to succeed?



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

- > 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

Sponsored by Boston Scientific Symposium



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
- 13:24
- > Discussion and audience interaction Lotus Edge: advancing clinical practice
- 13:29
- M. Götberg > Discussion and audience interaction
- 13:37 13:42
- Session evaluation and key learnings 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
- 13:00
- > Session objectives 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
- Discussion and audience interaction 14:31
- 14:37 Session evaluation and key learnings H. Sievert

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
- > 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

> How far can you go with MitraClip NT? 13:13

Case 1 13:13

S. Von Bardeleben

> Discussion and audience interaction 13:18

13:22 Case 2

J. Van Der Heyden

> Discussion and audience interaction 13.27

> Case 3 13:31

F. Maisano > Discussion and audience interaction 13:36

Session evaluation and key learnings 13:40 F. Maisano

13:55 - 14:40

Portico - when expertise meets ROOM 2

(S)

simplicity: key learnings

Sponsored by St. Jude Medical Case in Point

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

Attend this session if you want:

- > 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

> Session objectives 13:55 H. Moellmann

13:58 > Advancing the science and evidence-based medicine of heart valves: Portico clinical programme update L. Sondergaard (Pending approval)

Time to React@PCR 14:03 > Solopath: the use of the Solopath 14:11 re-collapsible sheath for challenging femoral access with the Portico

transcatheter valve A. Linke (Pending approval)

> Time to React@PCR 14:16 Why is Portico the valve of choice for these 14:24 types of indications? F. Nietlispach

> Time to React@PCR 14:29

14:37

> Session evaluation and key learnings G. Fontana

13:55 - 14:40 SYMETIS TAVI: latest results and

ROOM 4

Sponsored by Symetis Symposium



Chairpersons: W.K. Kim, S. Windecker

Attend this session if you want:

future clinical outlooks

- > 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
- > Session objectives 13:55 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
- SAVI TF sub-analysis: device performance 14:15 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)
- 14:32 > Discussion and audience interaction
- Session evaluation and key learnings 14:35 T. Walther

- 14:00 -

MAIN ARENA



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

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

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

15:20 > Time to React@PCR

14:45 - 16:15 All you need to know about the ROOM 2 tricuspid valve



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

Attend this session if you want:

- > 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
- > Session objectives 14:45 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
- 15:14 Time to React@PCR
- > 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
- > Percutaneous alternatives current 15:54 options and future prospects F. Maisano
- > Time to React@PCR 16:02

16:10

Session evaluation and key learnings R. Lange

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

14:45 - 15:30 F TAVI complications 1

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C	ASF (•	'n	NE	R

Cases

Session comprising selected PCR London Valves 2016 clinical case submissions

Facilitators: F. Hellig, D. Hildick-Smith

16:08 > Discussion and audience interaction

14:45	> Lond16C-ICC009 - Pericardial effusion after transfemoral TAVI with lethal outcome
14:52	 W.K. Kim Lond16C-ICC032 - Succesful treatment of aortic rupture after TAVI with stent graft P. Cervinka

14:59 > Lond16C-ICC037 - Three self-expandable prosthesis

M.C. Ferrer-Gracia

15:07 > Lond16C-ICC039 - Is it really feasible or safe? Transcatheter retraction of migrated prosthesis into left ventricular outflow tract during TAVI

D. Hachinohe

15:15 > Lond16C-ICC040 - What is this new jet?
 Acquired aorto right ventricular fistula
 after balloon expandable TAVI
 C. Undemir

15:23 > Lond16C-ICC052 - Double pop out after valve-in-valve implantation G. Sardella

- 15:00 -

MAIN ARENA

Plenary

15:30 - 16:15 Mitral valve anatomy: implications for percutaneous interventions

Chairpersons: M. Haude, M. Mack Panellists: J.J. Bax, V. Falk, T. Feldman, I. Meredith, G. Nickenia, 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. Delaado
- Time to React@PCR 15:38
- 15:43 Anatomical challenges for percutaneous mitral edge-to-edge repair C. Grasso
- 15:48 > Time to React@PCR Anatomical challenges for percutaneous 15:53 mitral annuloplasty
- S. Von Bardeleben > Time to React@PCR 15:58 Anatomical challenges for percutaneous 16:03
- mitral valve replacement C. Ruiz 16:08
- Time to React@PCR Session evaluation and key learnings 16:13 M. Mack

15:30 - 16:15 F TAVI complications 2 INTERACTIVE CASE 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

16:00

16:08

ROOM 5 Cases

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
- > Lond16C-ICC098 A tale of three valves 15:39 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 LIVE 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

> Overview of the tools to be used during 16:30 the LIVE demonstration R. Kornowski

LIVE demonstration from Clinique 16:35 Pasteur - Toulouse, France

17:05 > Time to React@PCR

ROOM 2

16:30 - 17:30 🛭 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
- > Session objectives 16:30 A. Baumbach
- Cerebrovascular complications after valve 16:34 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
- > Time to React@PCR 16.54
- 17:00 > Preventing periprocedural stroke using cerebral protection: which patient and which device? H. Eggebrecht
- 17:07 > Time to React@PCR
- Preventing post-procedural stroke using 17:13 medical therapy: which patient and which regime? J.P. Collet
- > Time to React@PCR 17:20
- 17:26 Session evaluation and key learnings 5. Windecker

ROOM 3

16:30 - 17:30 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

> Time to React@PCR 16:41 16:47

> Pre- and periprocedural imaging to enable percutaneous mitral annuloplasty and replacement S. Von Bardeleben

16:54 Time to React@PCR

> 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?

1. Meredith > Time to React@PCR 17:20 17:26 Session evaluation and key learnings

C. Tamburino

	TAVI: outcomes with new and		TAVI complications 3
ROOM 4	established devices	INTERACTIVE	Session comprising selected PCR London Valves 2016 clinical case submissions
Abstracts	Session comprising selected PCR London Valves	CASE CORNER	1 .
	2016 abstract submissions	Cases	Facilitators: J. Hon, T. Schmitz
*	Chairpersons: F. Castriota, M. Ng		1.1.1466.156005.14
	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	1	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		transcatheter closure of the left ventricula
	I. Meredith		pseudoaneurysm after aortic valve
16:36	> Discussion and audience interaction		replacement
16:40	> Lond16I-OP02 - New modular aortic valve		J. Ito
	prosthesis G. Melnick	16:46	> Lond16C-ICC091 - Rapid solution for
16.46	Discussion and audience interaction		coronary obstruction during CoreValve implant - balloon extraction
16:46 .16:50	Lond16I-OP04 - Safety and effectiveness of		T. Al-Badawi
, ,	a novel transfemoral, supra-annular, early	16:54	> Lond16C-ICC099 - TAVI: life threatening
1	functional, retrievable transcatheter aortic		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
17:00	> Lond16A-OP40 - One-year outcome of a	17.00	M. Bunc
'	multicentre clinical study evaluating a	17:09	> Lond16C-ICC104 - Complication on large annulus TAVI
	novel self-expanding and resheathable 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		S. Fournier
	outcomes in patients treated with a fully	17:23	> Lond16C-ICC107 - Valve-in-valve
	repositionable and retrievable aortic valve		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 		
	U. Schäfer		
17:26	Discussion and audience interaction		
17.20			•

ROOM 5

Focus Nurses and Allied **Professionals**

Plenary

16:30 - 17:30 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
- 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
- Time to React@PCR 16:53
- 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
- > Time to React@PCR 17:20
- > Session evaluation and key learnings 17:26

- 17:00 -

MAIN ARENA

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



17:15

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

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

17:20 LIVE demonstration from St. Thomas' 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 17:38 > Discussion and audience interaction Lond16C-OP049 - The role of the snare in a 17:45 difficult TAVI V. Ruiz-Quevedo > 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 Lond16C-OP065 - Three cases of early 18:15 valve thrombosis after TAVI with Lotus R.A. Hernandez

> Discussion and audience interaction

18:23

ROOM 2

Plenary

17:35 - 18:35 Tunderstanding 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
- > Session objectives 17:35 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 17:57 > Time to React@PCR
- > Clinical case presentation when 18:02 multimodality imaging told the whole story J. Byrne
- > Time to React@PCR 18:09 > How do we bring the specialities of 18:14 intervention and imaging even closer? Perspectives from intervention 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 outcomes
- 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

08:40

> Session objectives J. Webb

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

> Time to React@PCR 08:10 Imaging to determine the correct TAVI 08:16

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

> Session evaluation and key learnings J.J. Bax

08:00 - 09:25 ROOM 2

Plenary

08:03

08:19

08:51

■ 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

Where are we up to? Current status and registry data D. Dvir

> Time to React@PCR 08:11

> Imaging is key to successful outcomes defining the mechanism of valve failure and quiding device selection R. Hahn

08:27 > Time to React@PCR 08:35

> Aortic valve-in-valve - a user's quide F. Castriota

> Time to React@PCR 08:43

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

Session evaluation and key learnings S. Redwood

ROOM 3



09:23

08:00 - 09:00 ■ 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

08:00 - 09:25	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 Panellists: D. Himbert, H.L. Kao	Cases	Facilitators: A.S. Petronio, T. Walther
08:00	Lond16A-OP71 - Subclinical leaflet thickening in a novel mechanical expanded TAVI device Control	08:00	 Lond16C-ICC030 - Same setting right and then left 18F femoral access for TAVI. Bailout access site manoeuvers G. Latsios
08:06 08:10	R. Gooley Discussion and audience interaction Lond16A-OP11 - Incidence, predictors, and mid-term outcomes of possible leaflet	08:08	Lond16C-ICC095 - Difficult transfemoral access in TAVI: snare could be an option E. Karacop Lond16C-ICC108 - Bending the rules in
08:16	thrombosis after TAVI R. Yanagisawa Discussion and audience interaction	08.10	transfemoral TAVI: overcoming severe iliac tortuosity J. Michel
08:20	 Lond16A-OP44 - Safety and efficacy of the cerebral embolic protection device during TAVI: results from a single-centre experience 	08:24	> Lond16C-ICC109 - Steps to manage potential "suicide left ventricle" in TAVI patient R. Wolff
08:26	M. DallagoDiscussion and audience interaction	08:32	> Lond16C-ICC110 - Transfemoral complex TAVI procedure in patient with bicuspid
08:30	 Lond16A-OP17 - The effect of transcatheter aortic valve replacement on cognition - a prospective pilot study 		aortic valve stenosis and previous surgical treatment for abdominal aortic aneurism L. Salemme
08:36 08:41	M. AbawiDiscussion and audience interactionLond16A-OP55 - Evaluation of the	08:40	> Lond16C-ICC123 - Difficult implantation of second Evolut valve through the first one <i>P. Kubler</i>
	incidence, timing, and potential recovery rates of complete atrioventricular block after TAVI: a Japanese multicentre registry study A. Kagase	08:48	 Lond16C-ICC165 - Severely tortous anatomy in patient treated with transfemoral TAVI B. Rymuza (Pending approval) Lond16C-ICC166 - When deep
08:47 08:52	 Discussion and audience interaction Lond16A-OP20 - Impact of implantation 		implantation is not an option G. Katsimagklis
· ·	depth for pacemaker need after implantation of a fully repositionable and retrievable aortic valve - insights from the respond post-market study	09:04	 Lond16C-ICC093 - A case of minimum contrast TAVI screening in end-stage renal dysfunction T. Sakamoto
08:58	L. Van GilsDiscussion and audience interaction	09:11	 Lond16C-ICC113 - TAVI with PCI of the left main
09:03	 Lond16A-OP66 - Role of implantation depth on pacemaker rate and paravalvular leakage after balloon expandable TAVI S. Fateh-Moghadam (Pending approval) 	09:18	 J.H. Kim Lond16C-ICC155 - Transaortic TAVI and LIMA-left anterior descending under extracorporeal membrane oxygenation
09:09 09:14	 Discussion and audience interaction Lond16A-OP31 - Assessment of aortic regurgitation by contrast densitometry 		support in a no option patient N. Bonaros
	angiography in the setting of TAVI; echocardiographic correlates M. Abdelghani		
09:20	Discussion and audience interaction		

08:00 - 09:25 Mitral complication and hole ROOM 5 closure after valve interventions Session comprising selected PCR London Valves Cases 2016 clinical case submissions Facilitators: C. Grasso, F. Nietlispach 08:00 > Lond16C-ICC092 - Occult mitral valve damage after percutaneous mitral valve edge-to-edge repair Z. Rahhab Lond16C-ICC118 - Valve-in-ring mitral. 08:09 Post-operative valve thrombosis G. Dahle 08:18 Lond16C-ICC120 - Sudden thrombosis after transapical valve-in-ring procedure in mitral position Liewald Lond16C-ICC129 - Two clips, not enough 08:27 to stabilise a partial clip detachment J. Morales Portano > Lond16C-ICC014 - Successful 08:36 percutaneous closure of a large prosthetic tricuspid valve paravalvular leak with two VSD occluders in patient with previous metallic mitral valve ring R. Anantharaman Lond16C-ICC017 - Double approach mitral 08:45 paravalvular leak closure P. Dardas 08:55 > Lond16C-ICC033 - Percutaneous treatment of severe transvalvular and paravalvular regurgitation in a failing surgical aortic valve prosthesis due to recurrent

endocarditis

R.K. Binder

Y. Feng

R. Sádaba

MAIN ARENA

09:05

09-15

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

of mitral prothetic paravalvular leak

Lond 16C-ICC 073 - Plugging paravalvular

self-expandable valve in a patient with

> Lond16C-ICC130 - A case of transeptal and

transapical access for transcatheter closure

leak immediately after TAVI with

stenotic bicuspid anatomy

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)

LIVE demonstration from Swiss 08:50 Cardiovascular Centre, Bern University Hospital - Bern, Switzerland

09:20 > Time to React@PCR - 09:00 -

ROOM 2

Plenary

09:30 - 10:30 Secondary mitral regurgitation: percutaneous strategies to improve outcomes

Chairpersons: T. Feldman, H. Ince Panellists: P. Boekstegers, F. Hellig, F. Praz, U. Schäfer

Attend this session if you want:

- > To understand when and how edge-to-edge repair fails in the treatment of secondary mitral regurgitation
- > To identify predictors of failure and propose strategies to improve outcomes after edge-to-edge repair of secondary mitral valve requigitation
- To advance hypotheses for future patient selection criteria for percutaneous treatment options in patients with secondary mitral regurgitation
- > Session objectives 09:30 H. Ince
- > Secondary mitral regurgitation limitations 09:34 of current medical and device therapy and the need for percutaneous treatment A. Vahanian
- > Time to React@PCR 09:41 Percutaneous edge-to-edge repair in 09:47 secondary mitral regurgitation - current outcomes and predictors of failure
- C Grasso 09:54 > Time to React@PCR > Alternative percutaneous approaches for 10:00
- secondary mitral regurgitation V. Bapat 10:07 Time to React@PCR
- > A further challenge for percutaneous 10:13 treatment: secondary mitral regurgitation as a result of severe aortic stenosis U. Schäfer
- > Time to React@PCR 10:20 10:26 Session evaluation and key learnings T. Feldman

Interventions for Valvular Disease

09:30 - 10:30 ROOM 4	International Forum 4: PCR-CIT China Chengdu Valves and PCR Tokyo Valves share their most educational cases	09:30 - 10:30 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 Lond16C ICC116 Spontaneous segment.
09:33	P. MacCarthy Case 1: TAVI in a bicuspid valve M.K.Y. Lee	09:44	 Lond16C-ICC116 - Spontaneous coronary intramural dissection with haematoma post-replacement of aortic valve
09:39	> How would I treat? S. Saito	09:51	F.C. Liao (Pending approval) > Lond16C-ICC124 - TAVI unusual
09:43	> Discussion and audience interaction		complication
09:47	> How did I treat? M.K.Y. Lee	09:58	→ J. Sandoval → Lond16C-ICC127 - Late migration (28
09:51	Case 2: valve-in-valve TAVI	07.50	months after implantation) of
09:57	> How would I treat? H.L. Kao (Pending approval)		transcatheter mitral valve in ring requiring surgical reoperation M. Yates
10:01	Discussion and audience interaction	10:06	> Lond16C-ICC132 - Creating stability: one
10:05 10:09	 How did I treat? K. Hayashida Case 3: TAVI complication 		method of treating an embolised TAVI device
10.09	X. Wei (Pending approval)		R. Gooley
10:15	How would I treat? T. Sakamoto (Pending approval)	10:14	 Lond16C-ICC136 - Partial deployment of a balloon expandable valve due to delivery system failure: expect the unexpected
10:19	 Discussion and audience interaction 		M. Chrissoheris
10:23	How did I treat? X. Wei (Pending approval)	10:22	Lond16C-ICC139 - Late shifting transcatheter self-expandable valve down
10:27	 Session evaluation and key learnings M. Chen 		to the left ventricle treated with re-TAVI procedure D. Stolyarov

09:30 - 10:30	🛱 TAVI ir	bicuspid	lvalves
DOOM C	l ~ ·		

- 10:30	AVI in bicuspid valves
ROOM 5	Session comprising selected PCR London Valves 2016 clinical case submissions
Cases	2016 clinical case submissions
Cases	Facilitator: R. Kornowski
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
09:37	> Lond16C-ICC061 - Transfemoral TAVI in a complex bicuspid anatomy
	J. Molina-Martin de Nicolas
09:44	> Lond16C-ICC083 - Extremely high
	deployment of an undersized TAVI
	prostesis to treat heavily calcified bicuspid
	aortic valve
	L. Paraggio (Pending approval)
09:51	> Lond16C-ICC085 - Transfemoral TAVI in an
	intermediate risk patient with bicuspid aortic valve and high embolic risk
	P. Gatto
09:58	> Lond16C-ICC122 - TAVI treatment for a
05.50	patient with bicuspid aortic valve and mild asymmetrical calcification Y.N. Xu
10:06	> Lond16C-ICC149 - Five cases of bicuspid
	aortic stenosis with transcatheter aortic valve replacement
	R. Muratalla
10:14	Lond16C-ICC167 - Successful TAVI in
	bicuspid anatomy with a new
	self-expandable device
	Z.G. Zhao
10:22	> Lond16C-ICC023 - Lotus TAVI implantation

MAIN ARENA

Plenary

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

in a bicuspid aortic valve: when position

matters...

R. Nerla

Supported by an educational grant from Edwards Lifesciences

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

- 11:00 -

11:00 - 11:45 Trials and registries 2016: what MAIN ARENA do they mean?

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)

Attend this session if you want:

- > To hear a summary of the latest data concerning percutaneous valve intervention
- > To appreciate the limitations and shortcomings of the available evidence
- To fully understand how to incorporate the findings of randomised controlled trials and large scale registries into your everyday practice
- 11:00 > Session objectives M. Gilard

The TAVI randomised controlled trials

- > The data and their limitations 11:03 L. Sondergaard
- > Messages for everyday practice 11:10 S. Redwood
- 11:16 > Time to React@PCR

The mitral registries

- > The data and their limitations 11:23 M. Mack
- > Messages for everyday practice 11:30 H. Ince
- > Time to React@PCR 11:36
- > Session evaluation and key learnings 11:43 O. Wendler

ROOM 2

Plenary

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

Chairpersons: R. Hahn (Pendina 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)
- 11:04 What are the anatomical and technical
 - 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
- Session evaluation and key learnings 12:26 M. Haude

ROOM 3

11:00 - 12:30 ELearning 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
- To fully understand how to predict and prevent complications of TAVI for a failing aortic bioprosthesis or bicuspid

INTERACTIVE CASE CORNER

Cases

11:00 - 12:30 🛭 TAVI unusual cases

Session comprising selected PCR London Valves 2016 clinical case submissions

Facilitators: J. Hon, J.J. Popma

- > Lond16C-ICC053 Subaortic compressive 11:00 pseudoaneurysm treated by transcatheter self-expanding CoreValve prosthesis G. Sardella
- Lond16C-ICC019 Mechanical 11:08 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
- Lond16C-ICC131 TAVI for failed aortic 11:48 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
- Lond16C-ICC154 TAVI in a heart 12:12 transplanted patient affected by acromegaly E. Raviola
- Lond16C-ICC168 Compassionate use of a 12:21 self-expanding aortic valve bioprosthesis for severe aortic regurgitation in cardiogenic shock without aortic valve stenosis or annular calcification M. Patel

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	 Lond16C-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 L. 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

MAIN ARENA



11:45 - 12:30 ■ 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)

11:45 > Overview of the tools to be used during the LIVE demonstration N. Moat (Pending approval) LIVE demonstration from Swiss 11:50 Cardiovascular Centre, Bern University

Hospital - Bern, Switzerland > Time to React@PCR 12:20

G. Sardella

-09:00 -



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

Facilitators: C. Tamburino, D. Tchétché Media Driver: S. Cannata

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
- > Session objectives 13:00
 - E. Grube
- 24-month results and clinical studies 13:05 update K.H. Kuck
- 13:15 100 patients: lessons learned F. Maisano
- Recorded case 13:25

14:05

- 13:50 > Time to React@PCR
- Cardioband, synergetic with other 13:55 treatments
 - A. Latib 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
- Time to React@PCR 14:30 14:35
 - Session evaluation and key learnings 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 13.74
- > Mitral programme update 13:29 N. Moat
- 13:37 Time to React@PCR
- > Session evaluation and key learnings 13:42 J.J. Popma

ROOM 4

13:00 - 14:40 🛭 Tricuspid repair with the Trialign system Sponsored by Mitralign

Tools and Techniques



13:00

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)
- 13:26 Discussion and audience interaction
- 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
- > Discussion and audience interaction 14:30
- Session evaluation and key learnings 14:35 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 (Pendina approval) 14:50

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

15:20 > Time to React@PCR

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 percutanéous edge-to-edge repair
- To identify strategies to overcome difficult anatomy in percutaneous treatment of mitral regurgitation

14:45 > Session objectives G. Nickenia

> Case 1: clipping after failed percutaneous 14:50 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

15:10 Case 3: Barlow disease F. Maisano

15:15 > Time to React@PCR

> Case 4: extreme tethering in secondary 15:20 mitral regurgitation M. Buch

> Time to React@PCR 15:25

Case 5: clipping in cardiogenic shock 15:30 K.H. Kuck

Time to React@PCR 15:35

15:40

Session evaluation and key learnings 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

14:45 > Session objectives P. Pibarot

> The continuum of aortic stenosis: when 14:50 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

> Early intervention versus watchful waiting 15:10 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 natients A. Cribier

> Time to React@PCR 15.25

> What about moderate aortic stenosis and 15:30 heart failure? Should we give TAVI the benefit of the doubt? N. Van Mieghem

> Time to React@PCR 15.35 15:40

> Session evaluation and key learnings

M.B. Leon

> Lond16C-OP147 - Persistent tricuspid

> Discussion and audience interaction

regurgitation after percutaneous mitral repair: a complete transcatheter treatment

14:45 - 15:45 Graders choice: the top 5 cases of 2016 ROOM 4 Session comprising selected PCR London Valves Cases 2016 clinical case submissions Chairpersons: J. Byrne, B. Prenderaast Panellists: N. Dumonteil, A. Latib, T. Lefèvre, C. Ruiz > Lond16C-OP045 - Transcatheter tricuspid 14:45 clipping after mitral clipping using echo and fluoro guidance G. Tana Discussion and audience interaction 14:52 Lond16C-OP050 - Emergency left main PCI 14:57 with "chimney technique" to treat coronary artery occlusion after valve-in-valve TAVI R. Nerla > Discussion and audience interaction 15:04 > Lond16C-OP089 - Kissing balloons in the 15:09 aorta S. Toggweiler > Discussion and audience interaction 15.16 > Lond16C-OP137 - Successful 15:21 stent-retriever thrombectomy for acute cerebral embolisation after TAVI M. Miura > Discussion and audience interaction

M. Taramasso

15:28

15:33

15:40

- 15:00 -

15:30 - 16:30 Complications of percutaneous MAIN ARENA

Plenary

valve intervention - nightmare scenarios and heroic escapes

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)

Attend this session if you want:

- > To learn practical tips and tricks to prevent and manage complications of percutaneous valve interventions
- To understand the importance of imaging in the detection and management of procedural complications
- > To appreciate that even high volume experts get it wrong (sometimes)

> Session objectives 15:30 J. Fajadet

15:33

> Prevention and management of complications during percutaneous valve intervention - top tips A. Colombo

My worst complication during a percutaneous aortic valve procedure

> Case 1 - The imager saves the day 15:42 J. Hancock (Pending approval)

> Case 2 - The interventionist saves the day 15:47 H. Eltchaninoff

> Time to React@PCR 15:52

My worst complication during a percutaneous mitral valve procedure

> Case 3 - The imager saves the day 15:57 R. Hahn

Case 4 - The interventionist saves the day 16:02 S. Von Bardeleben (Pending approval)

> Time to React@PCR 16:07

My worst complication during a valve-in-valve procedure

> Case 5 - The imager saves the day 16:12 M. Monaghan

> Case 6 - The interventionist saves the day 16:17 D. Hildick-Smith

Time to React@PCR 16:22 16:27

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

- 16:00 -

16:30 - 16:45 Fighlights of the Course MAIN ARENA

Ceremony

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

> Concluding remarks 16:30 B. Prendergast 16:40

PCR London Valves 2017 M. Haude (Pending approval)