



Society for
Cardiothoracic Surgery
In Great Britain & Ireland



Association of
Cardiothoracic
Anaesthetists

SCTS / ACTA Joint Annual Meeting & Cardiothoracic Forum

Incorporating the
SCTS Ionescu University
& ACTA Academy

Programme

Wednesday 25th March -
Friday 27th March 2015

Manchester Central, Manchester, UK



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&



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Programme

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Future Meeting

The 2016 SCTS Meeting is to be held at **Birmingham International Centre**, 12th to 15th March 2016

All best endeavours will be made to present the programme as printed. However the Association of Cardiothoracic Anaesthetists and Society for Cardiothoracic Surgery in Great Britain and Ireland reserves the right to alter or cancel without prior notice any of the arrangements, timetables, plans or other items relating directly or indirectly to the meeting for any cause beyond their reasonable control. The Society for Cardiothoracic Surgery in GB & Ireland and the Association of Cardiothoracic Anaesthetists are not liable for any loss or inconvenience caused as a result of such alteration. In the event of cancellation of the congress all pre-paid fees will be refunded in full. However the Society for Cardiothoracic Surgery in GB & Ireland and the Association of Cardiothoracic Anaesthetists is not liable for any other loss or inconvenience caused as a result of such cancellation and delegates are therefore advised to take out their own travel insurance and extend their policy for personal possessions as the meeting does not cover individuals against cancellations of bookings or theft or damage of belongings.

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Thanks

The SCTS/ACTA Conference Organisers would like to extend their thanks and gratitude to **Ian Wilson** for the immense role that he has played as Meeting Secretary. In creating and developing the SCTS Ionescu University alongside the annual meeting, and with his tireless attention to detail and leadership skills, he has ensured the successful delivery and expansion of a world class event.

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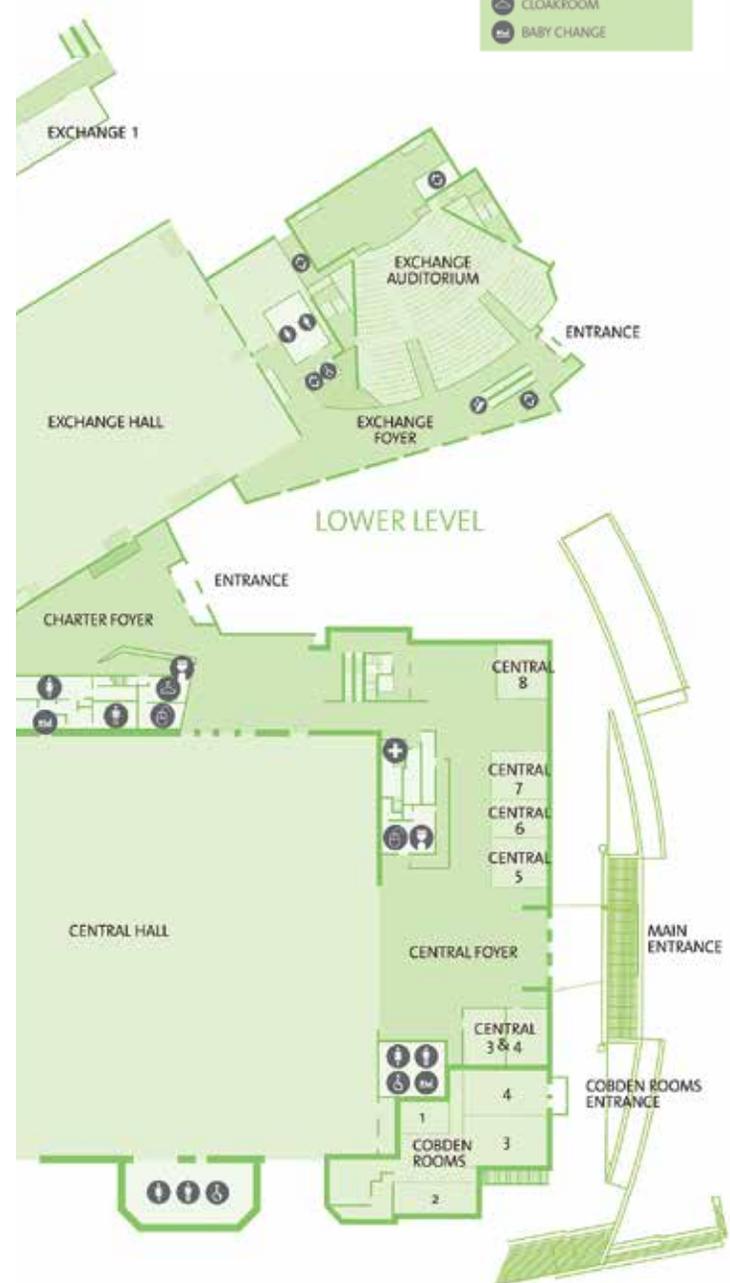
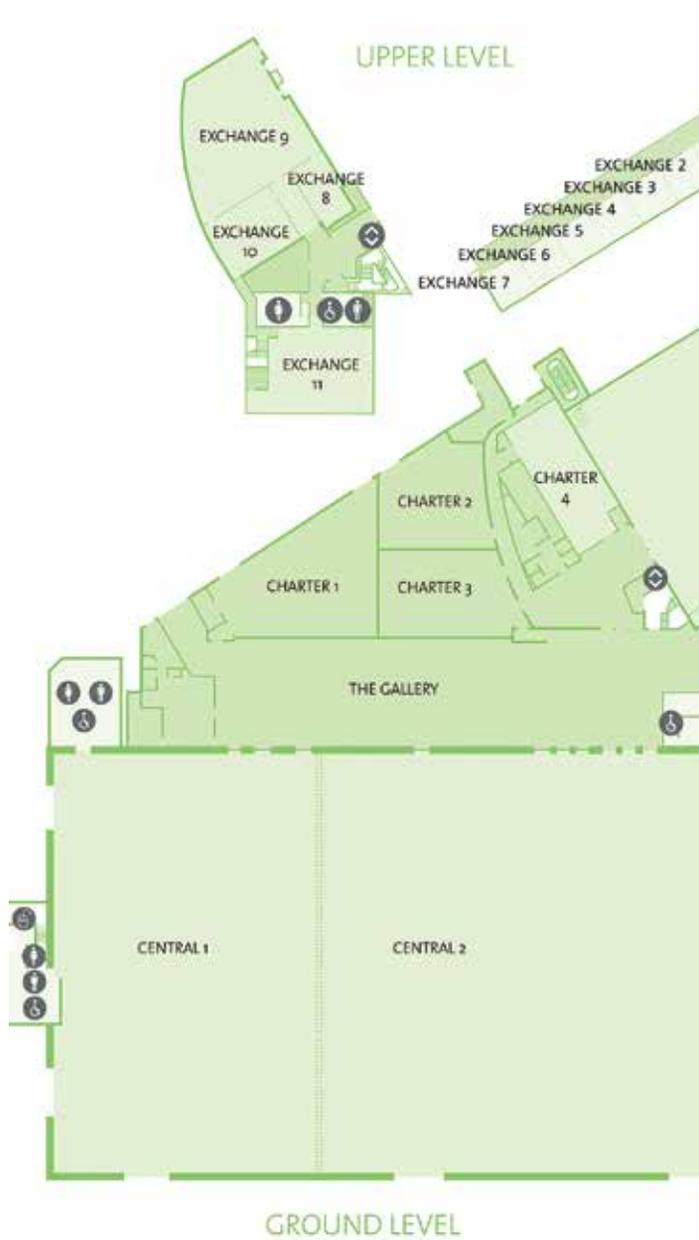
Please note that the SCTS 2015 App can be downloaded from the app store for free and includes an interactive programme, maps and social media sites as well as other information

Venue Map: Manchester Central



Site plan

Key	
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Session Overview

A4 Landscape Wednesday Overview
opens here

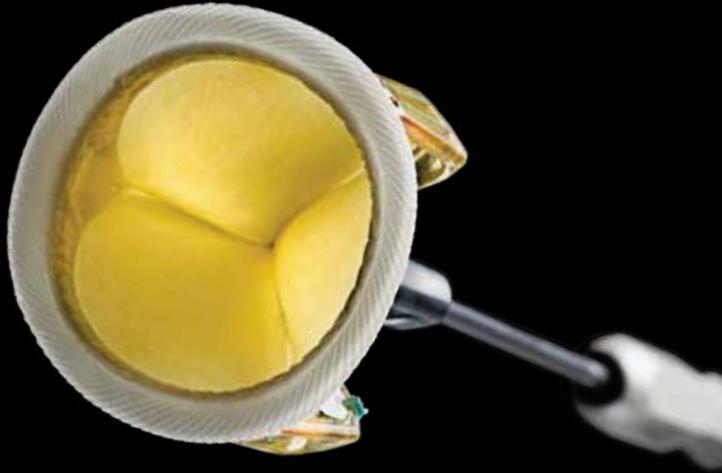
Session Overview

A4 Landscape Thursday Overview
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Session Overview

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Introducing the next-generation pericardial tissue heart valve—and perfect complement—to the line of tissue valves from St. Jude Medical that includes Epic™ and Biocor.™ The Trifecta valve is a stented tissue heart valve with exceptional in vivo mean gradients across all valve sizes.¹ The unique valve design includes pericardial tissue leaflets attached to the exterior of the valve stent to open more fully and efficiently to perform like a natural heart valve. For more than 30 years, St. Jude Medical has demonstrated a commitment to cardiac surgery, offering patients the gold standard in mechanical heart valve performance and tissue valve durability, and applies this market-leading expertise to the development of the Trifecta valve.

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1. St. Jude Medical. Trifecta Valve, Pre-Market Approval Application Summary of Safety and Effectiveness Data, P100029, 2011. Echo follow-up at one year.

Brief Summary: Please review the Instructions for Use prior to using these devices. For a complete listing of indications, contraindications, warnings, precautions, potential adverse events, and directions for use. Devices depicted may not be available in all countries. Check with your St. Jude Medical representative for product availability in your country.

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Wednesday March 25

SCTS University/ACTA Academy

001

09:00 - 10:20

Innovations in Thoracic Surgery 1 *Auditorium*

Moderation: A. Brunelli, K. Papagiannopoulos; Leeds/UK

09:00 - 09:25

1 - The role of negative wound therapy in thoracic surgery

K. Papagiannopoulos, Leeds/UK

09:25 - 09:50

2 - Minimally invasive thoracic surgery and lung cancer: standard of care or media phenomenon

R. Petersen, Copenhagen/DK

09:50 - 10:15

3 - Digital drains the impact on standards of care

A. Brunelli, Leeds/UK

002

10:40 - 12:00

Innovations in Thoracic Surgery 2

Moderation: A. Brunelli, K. Papagiannopoulos; Leeds/UK

Auditorium

10:40 - 11:05

4 - Biological or Synthetic: The current adjuncts in thoracic practice

G. Rocco, Naples/IT

11:05 - 11:30

5 - Uniportal Lobectomy and the Chameleon Camera

E. Lim, London/UK

11:30 - 11:55

6 - Tracheal substitutes after resection

P. Darteville, Paris/FR

041

12:15 - 13:45

Robotic Thoracic Surgery

Moderation: S. Stamenkovic¹, A. Coonar²: ¹Newcastle/UK, ²Cambridge/UK

Auditorium

12:15 - 12:40

7 - Fundamentals of robotic thoracic surgery

F. Melfi, Pisa/IT

12:40 - 13:05

8 - Robotic lung resection

A. Toker, Istanbul/TR

13:05 - 13:30

9 - Robotic mediastinal surgery

F. Melfi, Pisa/IT

003

14:00 - 15:20

Pushing the Boundaries in Thoracic SurgeryModeration: J.E. King¹, K. Redmond²: ¹London/UK, ²Dublin/IE*Auditorium*

14:00 - 14:25

10 - Surgery for pulmonary sepsis

A. Toker, Istanbul/TR

14:25 - 14:50

11 - ECMO in thoracic surgery

P.E. Falcoz, Strasbourg/FR

14:50 - 15:15

12 - Lung transplantation

W. Klepetko, Vienna/AT

004

15:40 - 17:00

Pushing the Boundaries in Thoracic SurgeryModeration: J.E. King¹, K. Redmond²: ¹London/UK, ²Dublin/IE*Auditorium*

15:40 - 16:05

13 - Surgery for T4 Lung cancer

P. Darteville, Paris/FR

16:05 - 16:30

14 - Lung Perfusion for pulmonary metastasis

P. Van Schil, Edegem/BE

16:30 - 16:55

15 - New frontiers in thoracic oncology

D. Farrugia, Gloucester/UK

005

09:00 - 10:30

Minimally Invasive Mitral Valve – State of the ArtModeration: P. Modi¹, J. Zacharias², F. Wells³: ¹Liverpool/UK, ²Blackpool/UK, ³Cambridge/UK*Charter 1*

09:00 - 09:15

16 - Debate - The first line treatment for non-complex degenerative mitral valve disease in the 21st century should be by minimal access surgery – Pro

F. Mohr, Leipzig/DE

09:15 - 09:30

17 - Debate - The first line treatment for non-complex degenerative mitral valve disease in the 21st century should be by minimal access surgery – Con

F. Wells, Cambridge/UK

09:30 - 09:40

18 - Discussion

09:40 - 09:50

19 - Debate - Endoballoon or Transthoracic Clamp - Pro Endoballoon

R. Deshpande, London/UK

09:50 - 10:00

20 - Debate - Endoballoon or Transthoracic Clamp - Pro Transthoracic Clamp

P. Modi, Liverpool/UK

10:00 - 10:10

21 - Discussion

10:10 - 10:30

22 - Mini-mitral Surgery: State of the Art in Europe

P. Perier, Bad Neustadt/DE

006

10:30 - 12:00

Minimally Invasive Mitral Valve – Master SeriesModeration: I. Birdi¹, N. Moorjani², P. Perier³: ¹Basildon/UK, ²Papworth/UK, ³Bad Neustadt/DE*Charter 1*

10:30 - 10:50

23 - Lessons from Leipzig: Learning points from an 18 year journey performing Minimally Invasive Mitral Surgery

F. Mohr, Leipzig/DE

10:50 - 11:10

24 - Central cannulation for minimal access mitral valve

M. Glauber, Milano/IT

11:10 - 11:30

25 - Concomitant ablation during MI mitral valve surgery

J. Zacharias, Blackpool/UK

11:30 - 11:45

26 - Anaesthetic implications of MICS

K. Khan, Middlesbrough/UK

11:45 - 12:00

27 - TOE for mini mitral surgery including 3D

K. Palmer, Liverpool/UK

042

12:15 - 13:45

Novel Mitral valve InterventionsModeration: M. Buch¹, A. Vahanian², N. Moat³, V. Bapat³:
¹Manchester/UK, ²Paris/FR, ³London/UK*Charter 1*

12:15 - 12:35

28 - Mitraclip - current indications and outcomes and the UK CtE

M. Buch, Manchester/UK

12:35 - 12:55

29 - Transcatheter mitral valve repair - an overview

A. Vahanian, Paris/FR

12:55 - 13:15

30 - Transcatheter mitral valve implantation

N. Moat, V. Bapat; London/UK

13:15 - 13:35

31 - Echocardiography for transcatheter mitral valve procedures

J.L. Vanovershelde, Brussels/BE

007

Sponsored by Edwards

14:00 - 15:20

Minimally Invasive Surgery - Aortic Valve Replacement - A MasterclassModeration: M. Amrani¹, V. Bapat¹, M. Glauber²: ¹London/UK, ²Milano/IT*Charter 1*

14:00 - 14:10

32 - This house believes that minimally invasive aortic valve replacement is more than just cosmesis – Pro

C. Young, London/UK

14:10 - 14:20

33 - This house believes that minimally invasive aortic valve replacement is more than just cosmesis – Con

J. Pepper, London/UK



14:20 - 14:35

34 - Discussion

14:35 - 14:50

35 - The case for ministernotomy approach

F. Mohr, Leipzig/DE

14:50 - 15:05

36 - The case for anterior thoracotomy approach

M. Glauber, Milano/IT

15:05 - 15:20

37 - Will sutureless valves make a difference?

S. Pfeiffer, Nuremberg/DE

008

15:40 - 17:00

Minimally Invasive Surgery - Coronary Artery SurgeryModeration: G. Asimakopoulos¹, F. Mohr², A. Desouza¹: ¹London/UK, ²Leipzig/DE*Charter 1*

15:40 - 16:00

38 - Minimally invasive multivessel CABG

M. Ruel, Ottawa/CA

16:00 - 16:20

39 - Total arterial off pump minimally invasive CABG

M. Lemma, Milan/IT

16:20 - 16:40

40 - Hybrid revascularisation

G. Asimakopoulos, Bristol/UK

16:40 - 17:00

41 - Laparoscopic colorectal resection - from 'pie in the sky' to reality - what can we learn from the general surgeons

R. Motson, Colchester/UK

009

09:00 - 10:30

Ischaemic and Rheumatic Mitral Valve Surgery 1Moderation: S. Livesey¹, M. Antunes², D. Richens³: ¹Southampton/UK, ²Coimbra/PT, ³Nottingham/UK*Charter 2*

09:00 - 09:15

42 - Pathophysiology of Ischaemic Mitral Regurgitation

C. Miller, Palo Alto/US

09:15 - 09:30

43 - Echo characteristics of Ischaemic Mitral Regurgitation

A. Berrebi, Paris/FR

09:30 - 09:45

44 - The role of MRI

G. McCann, Leeds/UK

09:45 - 10:00

45 - Clinical features and natural history of IMR

J.L. Vanoverschelde, Brussels/BE

010

10:40 - 12:00

Ischaemic and Rheumatic Mitral Valve Surgery 2Moderation: S. Livesey¹, M. Antunes², M. Acker³: ¹Southampton/UK, ²Coimbra/PT, ³Philadelphia/US*Charter 2*

10:40 - 11:00

46 - Can the guidelines help?

J. Takkenberg, Rotterdam/NL

11:00 - 11:20

47 - What can the cardiologists offer?

A. Vahanian, Paris/FR

11:20 - 11:50

48 - Hunterian Lecture - Pathophysiology and surgical management of functional ischaemic mitral regurgitation

J. Chan, London/UK

043

12:15 - 13:45

Tricuspid Valve SurgeryModeration: F. Wells¹, M. Antunes²: ¹Cambridge/UK, ²Coimbra/PT*Charter 2*

12:15 - 12:35

49 - The spectrum of Tricuspid valve surgery

M. Antunes, Coimbra/PT

12:35 - 12:55

50 - TOE assessment of the Tricuspid valve

J. Bence, Leicester/UK

12:55 - 13:15

51 - Concomitant Tricuspid valve surgery - When should we intervene

J. Chan, London/UK

13:15 - 13:35

52 - Management of Tricuspid endocarditis

F. Wells, Cambridge/UK

011

14:00 - 15:20

Ischaemic and Rheumatic Mitral Valve Surgery 3Moderation: S. Livesey¹, M. Acker², J.L. Vanoverschelde³: ¹Southampton/UK, ²Philadelphia/US, ³Brussels/BE*Charter 2*

14:00 - 14:20

53 - IMR in the UK

P. Punjabi, London/UK

14:20 - 14:40

54 - IMR - Surgical options for mitral valve repair

C. Miller, Palo Alto/US

14:40 - 15:00

55 - IMR - Should we repair or replace the mitral valve

M. Acker, Philadelphia/US

012

15:40 - 17:00

Ischaemic and Rheumatic Mitral Valve SurgeryModeration: S. Livesey¹, F. Wells²: ¹Southampton/UK, ²Cambridge/UK*Charter 2*

15:40 - 16:00

56 - Rheumatic disease in the UK

R. Patel, Coventry/UK

16:00 - 16:20

57 - Tips and tricks of replacing the rheumatic valve

F. Wells, Cambridge/UK

16:20 - 16:40

58 - Repairing Rheumatic Valves

M. Antunes, Coimbra/PT

013

09:00 - 10:20

Intervention in Coronary Artery Disease in 2015Moderation: D.P. Taggart¹, G. Asimakopoulos², P. Kolh³: ¹Oxford/UK, ²London/UK, ³Liege/BE*Charter 3*

09:00 - 09:15

59 - CABG is the best therapy

D. Taggart, Oxford/UK

09:15 - 09:30

60 - Recent advances in coronary intervention

N. Curzen, Southampton/UK

09:30 - 09:40

61 - Discussion

09:40 - 09:55

62 - Has SYNTAX changed practice in Europe? If not why not

P. Kolh, Liege/BE

09:55 - 10:10

63 - Has SYNTAX changed practice in North America? If not why not

J. Sabik, Cleveland/US

10:10 - 10:20

64 - Discussion

014

10:40 - 12:00

Optimizing CABG conduitsModeration: G.D. Angelini¹, J. Sabik², M. Pullan³: ¹London/UK, ²Cleveland/US, ³Liverpool/UK*Charter 3*

10:40 - 10:55

65 - One arterial graft and saphenous vein grafts is sufficient

G. Angelini, London/UK

10:55 - 11:10

66 - Is bilateral IMA use the gold standard?

J. Sabik, Cleveland/US

11:10 - 11:25

67 - Should the Radial Artery be first line choice for second conduit?

D. Taggart, Oxford/UK

11:25 - 11:40

68 - Can a single IMA composite graft adequately supply the heart?

M. Ruel, Ottawa/CA

11:40 - 12:00

69 - Discussion

044

12:15 - 13:45

Understanding Vein Graft PatencyModeration: G.D. Angelini¹, A. Newby²: ¹London/UK, ²Bristol/UK*Charter 3*

12:15 - 12:35

70 - Overview of vein graft failure and cell therapy

A. Newby, Bristol/UK

12:35 - 12:55

71 - Gene therapy

A. Baker, Glasgow/UK

12:55 - 13:15

72 - Anti-inflammatory treatments

P. Quax, Einthoven/NL

13:15 - 13:30

73 - Surgical interventions

G. Angelini, London/UK

13:30 - 13:45

74 - Venous External Scaffolding Technology (VEST) – targeting the root causes of vein graft failure

E. Orion, Tel Aviv/IL

015

14:00 - 15:20

Off Pump CABG - Should it stay or should it go?Moderation: D.P. Taggart¹, G.D. Angelini², M. Ruel³: ¹Oxford/UK, ²London/UK, ³Ottawa/CA*Charter 3*

14:00 - 14:15

75 - Off Pump CABG should be abandoned

J. Sabik, Cleveland/US

14:15 - 14:30

76 - Off pump CABG is here to stay

M. Lemma, Milan/IT

14:30 - 14:40

77 - Discussion

14:40 - 14:55

78 - The key to good outcomes is measuring graft flow

G. DiGiammarco, Chieti/IT

14:55 - 15:10

79 - The key to reducing risk of stroke is aortic assessment

C. Royse, Melbourne/AU

016

15:40 - 17:00

Optimising outcomes with vein graftsModeration: G.D. Angelini¹, J. Sabik², P. Kolh³: ¹London/UK, ²Cleveland/US, ³Liege/BE*Charter 3*

15:40 - 15:55

80 - Traditional open vein harvest is best

J. Pepper, London/UK

15:55 - 16:10

81 - Open harvest with peri-adventitial fat is best

D. Souza, Örebro/SE

16:10 - 16:25

82 - Endoscopic vein harvest is best

J. Zacharias, Blackpool/UK

16:25 - 16:40

83 - Is there a role for external stenting of vein grafts?

D. Taggart, Oxford/UK

16:40 - 17:00

84 - Discussion

017

09:00 - 12:00

Cardiothoracic Forum Workshop 1*Charter 4 - David Geldard Room*

The CT Forum organisers would like to thank all the Cardiothoracic Surgical Teaching Faculty & Company Reps for their time & support for this workshop. We would also like to thank Kevin Austin and his team at Wetlab Ltd for providing us with the hearts and lungs.

018

14:00 - 17:00

Cardiothoracic Forum Workshop 2*Charter 4 - David Geldard Room*

019

09:00 - 10:20

Organ Protection and Support in Cardiac Surgery – HeartModeration: N. Fletcher¹, T. Strang²: ¹London/UK, ²Manchester/UK*Exchange 10*

09:00 - 09:20

85 - Cardioplegia and protection

D. Chambers, London/UK

09:20 - 09:25

86 - Discussion

09:25 - 09:45

87 - Inotropes in cardiac surgery and clinical outcome

C. Jakobsen, Aarhus/DK

09:45 - 09:50

88 - Conclusion

09:50 - 10:10

89 - Myocardial protection and anaesthetic preconditioning

G. Kunst, London/UK

10:10 - 10:20

90 - Conclusion

020

10:40 - 12:00

Organ Protection in Cardiac Surgery - Lungs, Gut and beyondModeration: B. Reddi¹, G. Kunst²: ¹, ²London/UK*Exchange 10*

10:40 - 11:00

91 - Perioperative lung protective ventilation

S. Finney, London/UK

11:00 - 11:05

92 - Discussion

11:05 - 11:25

93 - Nutrition and gut supportive strategies

V. Lomivorotov, Novosibirsk/RU

11:25 - 11:30

94 - Discussion

11:30 - 11:50

95 - Perioperative glycaemic control

N. Scawn, Liverpool/UK

11:50 - 11:55

96 - Discussion

045

12:15 - 13:45

Median Sternotomy: Management of High Risk PatientsModeration: A. Goodwin¹, N. Nikolaidis², D. O'Regan³:¹Middlesbrough/UK, ²Southampton/UK, ³Leeds/UK*Exchange 10*

12:15 - 12:35

97 - Gentamicin containing collagen implants in cardiac surgery

P. Mishra, Middlesbrough/UK

12:35 - 12:55

98 - Intraoperative prevention and economic implications of sternal wound infections

D. O'Regan, Leeds/UK

12:55 - 13:15

99 - Alternative sternal closure strategies

S. Kendall, Middlesbrough/UK

13:15 - 13:35

100 - The importance of post-operative sternal support

F. Wagner, Eppendorf/DE

021

14:00 - 15:20

Organ Protection in Cardiac Surgery – KidneysModeration: S.R. Bennett¹, N. Scawn²: ¹Jeddah/SA, ²Liverpool/UK*Exchange 10*

14:00 - 14:20

101 - Protocolised post-op care - can it protect kidney?

M. Sander, Berlin/DE

14:20 - 14:25

102 - Discussion

14:25 - 14:45

103 - Pharmacological protection

G. Landoni, Milan/IT

14:45 - 14:50

104 - Discussion

14:50 - 15:10

105 - AKI after cardiac surgery

M. Ostermann, London/UK

15:10 - 15:15

106 - Discussion

022

15:40 - 17:00

Organ Protection in Cardiac Surgery - BrainModeration: S. Finney¹, A. Macfie²: ¹London/UK, ²Glasgow/UK*Exchange 10*

15:40 - 16:00

107 - Intraoperative cerebral oximetry – how low can you go?

H. Grocott, Winnipeg/CA

16:00 - 16:05

108 - Discussion

16:05 - 16:25

109 - Post-op delirium – pathophysiology and prevention

M. Cibelli, Birmingham/UK

16:25 - 16:30

110 - Discussion

16:30 - 16:50

111 - DHCA - strategies during surgery

J. Kendall, Liverpool/UK

16:50 - 16:55

112 - Discussion

17:30 - 19:30

Thoracic Sub-CommitteeModeration: S. Kendall¹, R. Shah²: ¹Middlesbrough/UK, ²Manchester/UK*Exchange 10*

023

09:00 - 10:20

Current Perspectives in Pleural DiseaseModeration: J. Dunning¹, J. Butler²: ¹Middlesbrough/UK, ²Glasgow/UK*Exchange 6/7*

09:00 - 09:25

164 - Surgery for pleural sepsis

A. Toker, Istanbul/TR

09:25 - 09:50

165 - Management of space problems

G. Massard, Strasbourg/FR

09:50 - 10:15

166 - Thoracoscopy under local anaesthesia and medical management of pleural disease

M. Munavvar, Preston/UK

024

10:40 - 12:00

Current Perspectives in Pleural DiseaseModeration: J. Dunning¹, J. Butler²: ¹Middlesbrough/UK, ²Glasgow/UK*Exchange 6/7*

10:40 - 11:05

167 - Indications for EPP

P. Van Schil, Edegem/BE

11:05 - 11:30

168 - EPD is the standard of care for Mesothelioma

A. Nakas, Leicester/UK

11:30 - 11:55

169 - Current Oncological Options in Mesothelioma

S. Papat, London/UK

046

12:15 - 13:45

Management of Airway ProblemsModeration: M. Kalkat¹, T. Strang²: ¹Birmingham/UK, ²Manchester/UK*Exchange 6/7*

12:15 - 12:40

170 - Endoscopic management of Tracheal stenosis

G. Sandhu, London/UK

12:40 - 13:05

171 - Palliation of Malignant Tracheal conditions

M. Kalkat, Birmingham/UK

13:05 - 13:30

172 - Difficult Airway management & Airway sharing

T. McLeod, Birmingham/UK

13:30 - 13:30

173 - Tracheal surgery

W. Klepetko, Vienna/AT

025

14:00 - 15:20

Controversies in Thoracic SurgeryModeration: S. Rathinam¹, J. McGuigan²: ¹Leicester/UK, ²Belfast/UK*Exchange 6/7*

14:00 - 14:20

174 - N2 disease precludes surgery

G. Varela, Salamanca/ES

14:20 - 14:40

175 - Surgery is still an option in N2 disease

G. Massard, Strasbourg/FR

14:40 - 15:00

176 - Thoracotomy is the gold standard

P. Dartevelle, Paris/FR

15:00 - 15:20

177 - VATS Lobectomy is the new standard of care

R. Petersen, Copenhagen/DK

026

15:40 - 17:00

Controversies in Thoracic SurgeryModeration: S. Rathinam¹, J. McGuigan²: ¹Leicester/UK, ²Belfast/UK*Exchange 6/7*

15:40 - 15:50

178 - Patient with borderline lung function :Surgery

G. Rocco, Naples/IT

15:50 - 16:00

179 - Patient with borderline lung function :RFA

M. Djearaman, Birmingham/UK

16:00 - 16:10

180 - Patient with borderline lung function :SABR

M. Snee, Leeds/UK

16:10 - 16:20

181 - Endobronchial Volume Reduction

P. Shah, London/UK

16:20 - 16:30

182 - Surgical LVRS is the Gold Standard

D. Waller, Leicester/UK

17:30 - 19:30

J&J MatrixRib Group

Moderation: S. Barlow, /UK

Exchange 6/7

027

09:00 - 10:20

Blood Management: AnaemiaModeration: R. Gill¹, G. Murphy²: ¹Southampton/UK, ²Leicester/UK*Exchange 2/3*

09:00 - 09:20

135 - Anaemia – pathogenesis

A. Klein, Cambridge/UK

09:20 - 09:25

136 - Discussion

09:25 - 09:45

137 - Preoperative anaemia management in cardiac surgery

C. von Heymann, Berlin/DE

09:45 - 09:50

138 - Discussion

09:50 - 10:10

139 - Intravenous iron - risks and benefits

T. Richards, London/UK

10:10 - 10:20

140 - Discussion

028

10:40 - 12:00

Blood Management: Preoperative AssessmentModeration: A.A. Klein¹, A.J. Duncan²: ¹Cambridge/UK, ²Blackpool/UK
Exchange 213

10:40 - 11:00

141 - Novel oral anticoagulant (NOAC) drugs

K Görlinger, Southampton/UK

11:00 - 11:05

142 - Discussion

11:05 - 11:25

143 - Use of antiplatelets and outcomes in cardiac surgery

S. Agarwal, Liverpool/UK

11:25 - 11:30

144 - Discussion

11:30 - 11:50

145 - Platelet aggregometry for preoperative management of bleeding tendency

M. Ranucci, Milan/IT

11:50 - 12:00

146 - Discussion

047

12:15 - 13:45

Temporary Ventricular support on the ITU: Universal Necessity or Inappropriate Expense?Moderation: R. Venkateswaran¹, S. Westaby²: ¹Manchester/UK, ²Oxford/UK*Exchange 213*

12:15 - 12:30

147 - Temporary mechanical support for critical cardiogenic shock - Bridge to transplantation

R. Venkateswaran, Manchester/UK

12:30 - 12:45

148 - Temporary mechanical support for post-cardiotomy failure to wean from CPB-Bridge to recovery

S. Westaby, Oxford/UK

12:45 - 13:00

149 - Temporary mechanical support - The US perspective

M. Acker, Philadelphia/US

13:00 - 13:15

150 - Temporary ECMO and mechanical support - resource implications for ICU

J. Barker, Manchester/UK

13:15 - 13:45

151 - Discussion

029

14:00 - 15:20

Blood Management: Coagulopathic HaemorrhageModeration: S. Agarwal¹, R. Gill²: ¹Liverpool/UK, ²Southampton/UK
Exchange 213

14:00 - 14:20

152 - Pathogenesis of coagulopathy

J. Thachil, Manchester/UK

14:20 - 14:25

153 - Discussion

14:25 - 14:45

154 - Prevention of coagulopathy - update on Tranexamic Acid and Aprotinin Therapy

D. Mazer, Toronto/CA

14:45 - 14:50

155 - Discussion

14:50 - 15:10

156 - Diagnosis of Coagulopathy

K. Görlinger, Essen/DE

15:10 - 15:20

157 - Discussion

030

15:40 - 17:00

Blood Management: Blood Management Interventions; Blood ServicesModeration: S. Bhudia¹, A. Ahmed²: ¹Coventry/UK, ²Leicester/UK
Exchange 213

15:40 - 16:00

158 - Red cell transfusion

G. Murphy, Leicester/UK

16:00 - 16:05

159 - Discussion

16:05 - 16:25

160 - Non red cell treatment and adjuncts (Plasma/ Cryo/ PCC/ PCC)

D. Mazer, Toronto/CA

16:25 - 16:30

161 - Discussion

16:30 - 16:50

162 - Intravenous Fibrinogen: The REPLACE Trial

R. Gill, Southampton/UK

16:50 - 17:00

163 - Discussion

17:30 - 19:30

UK Aortic Forum

Moderation: A. Oo, Liverpool/UK

*Exchange 213***031**

09:00 - 12:00

Orpheus - Critical Events in Cardiac Surgery, Anaesthesia & PerfusionModeration: S. Robins¹, S. Phillips²: ¹Wolverhampton/UK, ²London/UK*Exchange 415***032**

14:00 - 17:00

Orpheus- Critical Events in Cardiac Surgery, Anaesthesia & PerfusionModeration: S. Robins¹, S. Phillips²: ¹Wolverhampton/UK, ²London/UK*Exchange 415*

17:30 - 19:30

Cardiac Sub-CommitteeModeration: T. Graham¹, D. Jenkins²: ¹Birmingham/UK, ²Cambridge/UK*Exchange 415***033**

09:00 - 10:20

Assessment and Management of Aortic Surgery Patients

Moderation: A. Rashid, M. Bashir, M. Desmond; Liverpool/UK

Exchange 11

09:00 - 09:20

113 - Anaesthetic assessment of aortic surgery patients - The role of cardiopulmonary exercise testing

D. Atkinson, Manchester/UK

09:20 - 09:40

114 - Cerebral & spinal monitoring in aortic surgery

J. Ratnasingham, Liverpool/UK

09:40 - 10:00

115 - Circulatory support for aortic surgery

J. Elefteriades, New Haven/US

10:00 - 10:20

116 - DHCA and LHB: Associated coagulation disorders and their management

S. Agarwal, Liverpool/UK

034

10:40 - 12:00

Aortic Surgery - Root and Ascending AortaModeration: G. Tsang¹, C. Miller², D. Cameron³: ¹Southampton/UK, ²Palo Alto/US, ³Baltimore/US*Exchange 11*

10:40 - 11:00

117 - The Stanford Aortic Root Repair: Technique & follow-Up

C. Miller, Palo Alto/US

11:00 - 11:20

118 - Principles of redo aortic root surgery

J. Mascaro, Birmingham/UK

11:20 - 11:40

119 - Minimally invasive aortic surgery - Mini-Bentall procedure

T. Yan, Liverpool/UK

11:40 - 12:00

120 - Implantation of an individually computer-designed and manufactured external support for the Marfan aortic root

J. Pepper, London/UK

048

12:15 - 13:45

Acute Aortic SyndromeModeration: M. Kuduvali¹, G. Cooper², N. Scawn¹: ¹Liverpool/UK, ²Sheffield/UK*Exchange 11*

12:15 - 12:30

121 - Re-intervention following acute type-A aortic dissection repair- the IRAD perspective

S. Trimarchi, San Donato Milanese/IT

12:30 - 12:45

122 - Assessment of organ malperfusion and management in acute aortic syndrome

J. Yap, London/UK

12:45 - 13:00

123 - The role of endovascular therapy in acute aortic syndrome

J. Brennan, Liverpool/UK

13:00 - 13:15

124 - Management of the aortic root during acute type-A aortic dissection repair

D. Cameron, Baltimore/US

13:15 - 13:30

125 - Should we replace the aortic arch during acute type-A dissection repair? The role of frozen elephant trunk

D. Pacini, Bologna/IT

035

14:00 - 15:20

Reflection of Pioneers: Genetic Basis for Thoracic Aortic Aneurysm DiseaseModeration: M. Bashir¹, A. Oo¹, J. Elefteriades²: ¹Liverpool/UK, ²New Haven, CT/US*Exchange 11*

14:00 - 14:10

126 - Genetics for the Surgeons

J. Elefteriades, New Haven/US

14:10 - 14:20

127 - Genetic Linked Aneurysms

D. Cameron, Baltimore/US

14:20 - 14:30

128 - Genetic Thoracic Aortic Aneurysm Disease - From Therapy Back to Gene

D. Milewicz, Houston/US

14:30 - 14:40

129 - Biomarkers in Thoracic Aortic Aneurysm Disease - The Holy Grail

S. Trimarchi, San Donato Milanese/IT

14:40 - 14:55

130 - CTSNet Aortic Portal

M. Bashir, Liverpool/UK

036

15:40 - 17:00

Aortic Surgery - Arch & Thoracoabdominal AortaModeration: J. Mascaro¹, C. Young²: ¹Birmingham/UK, ²London/UK*Exchange 11*

15:40 - 15:50

131 - International Aortic Arch Project

T. Yan, Liverpool/UK

15:50 - 16:00

132 - Management of Chronic Type B Dissection- The Role of TEVAR

C. Nienaber, Rostock/DE

16:00 - 16:10

133 - Management of Aortic Infection

O. Wendler, London/UK

16:10 - 16:20

134 - Decision Making in Thoracoabdominal Aortic Aneurysm Repair

A. Oo, Liverpool/UK

037

09:00 - 10:20

Peroperative TOE: General TOE

Moderation: D. Greenhalgh, N. O'Keefe; Manchester/UK

Exchange 9

09:00 - 09:25

183 - SCA/ASE 2014 Perioperative Transoesophageal Echocardiography Guidelines

S. Reeves, South Carolina/US

09:25 - 09:50

184 - Echo in the catheter lab

A. Macnab, Manchester/UK

09:50 - 10:15

185 - Echo in the out-patients

C. Royse, Melbourne/AU

039

10:40 - 12:00

Perioperative TOE: Mitral valve assessment as a guide to managementModeration: A. Macnab¹, D. Duthie²: ¹Manchester/UK, ²Leeds/UK*Exchange 9*

10:40 - 11:05

186 - Type 1 Regurgitation

S. Ray, Manchester/UK

11:05 - 11:30

187 - Type 2 Regurgitation

A. Berrebi, Paris/FR

11:30 - 11:55

188 - Type 3 Regurgitation

J. Ender, Leipzig/DE

049

12:15 - 13:45

Cerebral Monitoring - Blood flow, Bubbles and DeliriumModeration: M. Bennett¹, M. Jayarajah¹, M. Patteril², R. Jones¹: ¹Plymouth/UK, ²Coventry/UK*Exchange 9*

12:15 - 12:40

189 - Gaseous micro-emboli and perfusion monitoring

M. Bennett, Plymouth/UK

12:40 - 13:05

190 - Ultrasound-based approach to brain and somatic desaturation

A. Denault, Montreal/CA

13:05 - 13:30

191 - Cerebral blood flow monitoring and autoregulation

H. Grocott, Winnipeg/CA

038

14:00 - 15:20

Peroperative TOE: Right HeartModeration: A. Perrino¹, M. Bewsher²: ¹Yale/US, ²Manchester/UK*Exchange 9*

14:00 - 14:25

192 - Echo assessment of the right heart

A. Denault, Montreal/CA

14:25 - 14:50

193 - Tricuspid valve: repair or not

J. Bence, Leicester/UK

14:50 - 15:15

194 - Congenital right heart problems

L. Winslow, Manchester/UK

040

15:40 - 17:00

Peroperative TOE: Post-op : Critical CareModeration: N. Morgan-Hughes¹, D. Hunter²: ¹Sheffield/UK, ²London/UK*Exchange 9*

15:40 - 16:05

195 - Lung ultrasound

F. Guarracino, Pisa/IT

16:05 - 16:30

196 - Echo for mechanical assist

J. Ender, Leipzig/DE

16:30 - 16:55

197 - Assessment of the unstable patient - when to intervene

M. Bewsher, Manchester/UK

16:55 - 17:00

198 - Discussion

M. Bewsher, Manchester/UK

Wednesday March 25

SCTS University/ACTA Academy

Satellite Meetings

Wednesday March 25



Society for
Cardiothoracic Surgery
In Great Britain & Ireland



Association of
Cardiothoracic
Anaesthetists

**SCTS/ACTA
Joint Annual Meeting
&
Cardiothoracic Forum**

422

10:30-13:30

NHS Choices England

Exchange 8

362

17:30-19:30

Trainees Meeting

Exchange 11

368

17:30-19:30

Thoracic Sub-Committee

Exchange 10

398

17:30-19:30

Cardiac Sub-Committee

Exchange 4/5

418

17:30-19:30

UK Aortic Forum

Exchange 2/3

420

17:30-19:30

J&J MatrixRib Group

Exchange 6/7

423

16:30-18:00

WSCTS 2015 Programme Committee Meeting

Exchange 8

17:30 - 19:30

Trainees Meeting

Exchange 11

Moderation: J. Afoke¹, A. Sepehrpour², M. Lewis³, C. Burdett⁴:
¹London/UK, ²Manchester/UK, ³Brighton/UK, ⁴Middlesbrough/UK

17:30 - 17:40

951 - Open lung resections in the unit with fully established VATS programme – hard to train, hard to gain

J. Kadlec¹, A. Sudlow¹, U. Abah², M. Van Leuven¹, F. Van Tornout³, W. Bartosik¹: ¹Norwich/UK, ²Cambridge/UK, ³Uy/UK

17:40 - 17:50

952 - Do cardiothoracic trainees need a new surgical e-logbook?

T. Combella¹, J. George², P. Vaughan¹, M. Kornaszewska¹: ¹Cardiff/UK, ²Swansea/UK

17:50 - 18:00

953 - Proposing an improved model for Thoracic Surgical training workplace based assessments

M. Jenkins¹, P. Vaughan², D. West¹, G. Casali¹, T. Batchelor¹: ¹Bristol/UK, ²Cardiff/UK

18:00 - 18:10

954 - Distribution of sleeve lobectomies in British and Irish thoracic units 2006-12: Implications for advanced training in thoracic surgery

M. Jenkins, D. West; Bristol/UK

18:10 - 18:20

955 - Early progress in cardiac and thoracic surgery

J. Afoke, A. Sepehrpour; London/UK

18:20 - 18:30

956 - SAC Update

S. Barnard, Newcastle/UK

18:30 - 18:40

957 - Exam Update

J. Anderson, London/UK

18:40 - 18:50

958 - Update on SCTS Courses

N. Moorjani¹, S. Rathinam²: ¹Papworth/UK, ²Leicester/UK

18:50 - 19:05

959 - Tips for getting a consultant job and discussion

M. Lewis, J. Hyde; Brighton/UK

19:05 - 19:25

960 - RCS Research Initiative for Cardiothoracic Surgery

D. Taggart¹, D. Morton²: ¹Oxford/UK, ²Birmingham/UK

Plenary Sessions

Thursday March 26



Society for
Cardiothoracic Surgery
In Great Britain & Ireland



Association of
Cardiothoracic
Anaesthetists

**SCTS/ACTA
Joint Annual Meeting
&
Cardiothoracic Forum**

100

08:30 - 10:15

Surgery of the Elderly*Auditorium*Moderation: D. Greenhalgh¹, N. O'Keeffe¹, G. Cooper², M. Acker³:
¹Manchester/UK, ²Sheffield/UK, ³Philadelphia/US

08:30 - 08:40

201 - Survey of the prevalence of pre-operative anaesthetic assessment clinics in Cardiothoracic Anaesthesia in the British Isles

A. Darbar, H. Makam, G. Lau, N. Burri; Leicester/UK

08:40 - 08:50

202 - Cardiac surgery and critical care in octogenarians

C. Quarterman, B. Kirmani, O. Al-Rawi; Liverpool/UK

08:50 - 09:00

203 - Transcatheter aortic valve implantation in nonagenarians. A word of caution.

F. Pirone, K. Asress, G. Lucchese, J. Hancock, K. Wilson, C. Evans, S. Redwood, C. Young, V. Bapat; London/UK

09:00 - 09:10

204 - Octogenarians undergoing emergency general thoracic surgery for benign conditions - Does advanced age affect the outcome?M. Schweigert¹, N. Solymosi², A. Dubecz³, D. Ofner⁴, H. Stein³:
¹Dresden/DE, ²Budapest/HU, ³Nuremberg/DE, ⁴Salzburg/AT

09:10 - 09:30

205 - Physiology of the elderly. Why they don't run marathons

R. Griffiths, Peterborough/UK

09:30 - 09:50

206 - Improving outcomes in the elderly

M. Ranucci, Milan/IT

09:50 - 10:10

207 - When enough is enough

M. McKenna, Newcastle/UK

107

11:00 - 12:40

Meeting Plenary Session*Auditorium*Moderation: D. Whitaker¹, J. Pepper², T. Graham³, C. Miller⁴:
¹Manchester/UK, ²London/UK, ³Birmingham/UK, ⁴Palo Alto/US

11:00 - 11:10

208 - Acute aortic dissection - a UK national perspective of volume - outcomes relationship utilizing National Institute for Cardiovascular Outcomes Research (NICOR) dataM. Bashir¹, H. Bilal², M. Shaw¹, G. Hickey², M. Fok¹, S. Grant², B. Bridgewater², A. Oo¹: ¹Liverpool/UK, ²Manchester/UK

11:10 - 11:20

209 - A quality examination for cardiothoracic surgical care practitioners is urgently required in the United Kingdom - a multicentre studyB. Krishnamoorthy¹, J. Djordjevic², W. Critchley¹, C. Birkett³, T. Bartley³, R. Shah¹, M. Lewis⁴, T. Graham³, N. Briffa⁵: ¹Manchester/UK, ²Basildon/UK, ³Birmingham/UK, ⁴Brighton/UK, ⁵Sheffield/UK

11:20 - 11:30

210 - A prospective randomised controlled trial of statin prophylaxis in cardiopulmonary bypass related surgery: The importance of dosage

Y.R. Chee, W. Watson, J. McCarthy, D. Healy; Dublin/IE

11:30 - 11:40

211 - Perioperative BNP changes and functional capacity following lung resection

P. McCall, A. Arthur, A. Kirk, A. Macfie, J. Kinsella, B. Shelley; Glasgow/UK

11:40 - 11:50

212 - Pilot Study for Preoperative Simulation of Patient-Device Interactions in Left Ventricular Assist Device Implantation

A. Anselmi, S. Collin, J. Verhoye, P. Haigrón, E. Flécher; Rennes/FR

11:50 - 12:00

213 - 30-mortality after lung cancer resection cannot be used as an individual surgeon quality outcome in thoracic surgery

C. Prolí, M.E. Cufari, H. Raubenheimer, M. Al-Sahaf, G. Luciano, L. Shedden, E. Lim; London/UK

12:00 - 12:10

214 - SCTS Lifetime Achievement Award - Marian Ionescu

M. Lewis, Brighton/UK

12:10 - 12:15

215 - Ionescu Scholarship

E. Akowuah, Middlesbrough/UK

12:15 - 12:20

216 - Ethicon Scholarship

M. Jenkins, Bristol/UK

12:20 - 12:25

217 - Ethicon Scholarship

O. Nawaytou, Birmingham/UK

12:25 - 12:30

218 - Ethicon Scholarship

N. Cartwright, Sheffield/UK

12:30 - 12:35

219 - Ethicon Scholarship

P. Vaughan, Cardiff/UK

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13:30 - 15:30

Blood Management*Auditorium*Moderation: R. Gill¹, S. Agarwal², G. Murphy³, J. Sabik⁴:¹Southampton/UK, ²Liverpool/UK, ³Leicester/UK, ⁴Cleveland/US

13:30 - 13:40

220 - Anaemia prior to cardiac surgery: Our experiences of a pre-operative treatment clinic

C. Quarterman, C. Toolan, S. Agarwal; Liverpool/UK

13:40 - 13:50

221 - Impact of anaemia on patient outcome from cardiac surgery in the UK – a multi-centre, collaborative studyM. Brar¹, E. Ogilvie², T. Richards¹, A. Klein²: ¹London/UK, ²Cambridge/UK

13:50 - 14:00

222 - The impact of prime displacement or mini-bypass on blood transfusion requirement versus conventional cardiopulmonary bypassY. Haqzad¹, P. Govewalla², L. McLean³, A. Cale², M. Loubani², M. Chaudhry²: ¹Sheffield/UK, ²Hull/UK, ³Cottingham/UK

14:00 - 14:10

223 - Platelet function testing following cardiopulmonary bypass

B. Kirmani, I. Johnson, S. Agarwal; Liverpool/UK

14:10 - 14:20

224 - Red cell rejuvenation targets inflammatory microparticles, free haemoglobin and redox active iron: key mediators of Transfusion Related Acute Lung Injury in Cardiac surgeryS. Qureshi¹, M. Wozniak¹, N. Patel², W. Dott¹, P. Nielsen¹, H. Lin³, K. Brithford³, M. Wiltshire⁴, R. Cardigan⁵, P. Ray⁶, G. Murphy¹: ¹Leicester/UK, ²London/UK, ³Bristol/UK, ⁴Brentwood/UK, ⁵Cambridge/UK, ⁶Western-Super-mare/UK

14:20 - 14:30

225 - Microvesicles as indicators and mediators of inflammatory reactions in response to transfusion during cardiac surgery

N. Sullo, M. Wozniak, A. Farha, W. Dott, P. Nielsen, G. Murphy; Leicester/UK

14:30 - 14:50

226 - Preoperative anaemia and management in cardiac surgery

C. von Heymann, Berlin/DE

14:50 - 15:00

227 - Transfusion requirements and post-operative outcomes for adult patients with anaemia undergoing cardiac surgery

N. Balani, V. Cornelius, J. Roxburgh, S. McCorkell, G. Hallward; London/UK

15:00 - 15:10

228 - 5-year single centre experience of red blood cell transfusion in patients undergoing isolated Aortic Valve Replacement using Miniaturised Extra Corporeal Circulation

S. Asopa, M. Bennett, G. Webb, C. Lloyd; Plymouth/UK

15:10 - 15:20

229 - Variance in transfusion practice in the era of Patient Blood Management – a UK multi-centre collaborative studyM. Brar¹, E. Ogilvie², T. Richards¹, A. Klein²: ¹London/UK, ²Cambridge/UK

15:20 - 15:30

230 - The BART Story: historical and clinical perspectives

D. Mazer, Toronto/CA

119

15:45 - 17:45

TAVI Surgery*Auditorium*Moderation: N. Moat¹, V. Bapat¹, C. Lloyd², A. Vohra³: ¹London/UK, ²Plymouth/UK, ³Manchester/UK

15:45 - 15:55

231 - Should Transcatheter Aortic Valve replacement (TAVI) be the treatment of choice in patients with previous cardiac surgery: Experience from the Scottish National TAVI ProgrammeA. Kar¹, V. Giardano², A. Flapan², N. Uren², S. Prasad², R. Pessotto²: ¹Brighton/UK, ²Edinburgh/UK

15:55 - 16:05

232 - Management of degenerative calcified aortic stenosis: Multidisciplinary Team experience of a single tertiary centre

R. Patni, S. Asopa, M. Bennett, M. Dalrymple-Hay, C. Lloyd; Plymouth/UK

16:05 - 16:15

233 - Balloon aortic valvuloplasty In the Transcatheter Aortic Valve Intervention Era: a United Kingdom Single Surgical Centre Experience

S. Asopa, A. Khurana, E. Mohamed-Ahmed, M. Soni, V. Suresh, I. Cox, M. Dalrymple-Hay, C. Lloyd; Plymouth/UK

16:15 - 16:25

234 - Conscious sedation for Transcatheter Aortic Valve Implantation (TAVI) – a single-centre case series

E. Ogilvie, J. Irons, G. Martinez, C. Densem, A. Klein; Cambridge/UK

Thursday March 26

Plenary Sessions

16:25 - 16:35

235 - Selecting the Optimum Vascular Access in surgical TAVI: a meta-analysis of procedural outcomes using transaortic and transapical approaches

K. O' Sullivan, E. Hurley, R. Segurado, J. Hurley; Dublin/IE

16:35 - 16:45

236 - Comparing cerebral emboli in a high risk group of aortic valve patients undergoing transcatheter aortic valve implantation (TAVI) and surgical aortic valve replacement (AVR)

R. Joyce, O. Valencia, M. Edsell, M. Jahangiri; London/UK

16:45 - 16:55

237 - Outcome of patients considered for alternative treatment strategies to transcatheter aortic valve implantation at heart team meetings

M. Yasin, P. Celebi, S. Reshat, S. Kennon, W. Awad; London/UK

16:55 - 17:05

238 - Major complications after transcatheter aortic valve implantation: a single centre experience and lessons learned

A. Nguyen, M. Akhtar, S. Kennon, W. Awad; London/UK

17:05 - 17:15

239 - Impact of TAVI programme introduction to surgical AVR in a single institution over a 10-year period

D. Pousios, P. Malvindi, N. Gordon, S. Ohri, G. Tsang, T. Velissaris; Southampton/UK

17:15 - 17:35

240 - Insights from the UK TAVI registry and update on the UK TAVI Trial

N. Moat, London/UK

Adult Cardiac Surgery

Thursday March 26



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08:30 - 10:30

MICS - Minimally invasive Aortic Valve Replacement*Charter 2*Moderation: C. Young¹, S. Nair², R.J. Williams³, M. Antunes⁴:¹London/UK, ²Newcastle Upon Tyne/UK, ³Liverpool/UK, ⁴Coimbra/PT

08:30 - 08:50

301 - The Heart Research UK Lecture - Insights from the German valve database

F. Mohr, Leipzig/DE

08:50 - 09:00

302 - Structured Light Plethysmography can be used to detect changes in chest wall movement in cardiac surgical patients undergoing median sternotomy

D. Balmforth, G. Soppa, M. Jahangiri; London/UK

09:00 - 09:10

303 - Minimally invasive versus conventional aortic valve replacement: A propensity matched study from the UK national dataR. Attia¹, G. Hickey², S. Grant², B. Bridgewater², J. Roxburgh¹, P. Kumar³, P. Ridley⁴, M. Bhabra⁵, R. Millner⁶, T. Athanasiou¹, R. Casula¹, A. Chukwuemeka¹, T. Pillay⁷, C. Young¹: ¹London/UK, ²Manchester/UK, ³Swansea/UK, ⁴Stoke-On-trent/UK, ⁵Wolverhampton/UK, ⁶Blackpool/UK, ⁷Newcastle Upon Tyne/UK

09:10 - 09:20

304 - Minimally-invasive aortic valve replacement: training the surgical trainees?U. Aslam¹, J. George¹, P. Nanjaiah², P. Kumar¹: ¹Swansea/UK, ²Cardiff/UK

09:20 - 09:35

305 - Right anterior Thoracotomy approach

M. Glauber, Milano/IT

09:35 - 09:45

306 - Mini AVR: a surgeon and institutional learning curve

B. Kirmani, G. Sudarshan, K. Umakumar, R. Williams; Liverpool/UK

09:45 - 09:55

307 - Sutureless Perceval aortic valve implantation via J-sternotomy: 145 patients with 2 years follow up

S. Pfeiffer, G. Santarpino, J. Sirch, F. Vogt, T. Fischlein; Nuremberg/DE

09:55 - 10:05

308 - Aortic valve replacement via right anterior thoracotomy: comparison of results during the learning curve with ministernotomy

F. Pirone, R. Boix-Garibo, M. Uzzaman, N. Montarello, C. Young, V. Bapat; London/UK

10:05 - 10:15

309 - Using the endoclamp for cardiac surgery improves patient outcomes: a propensity-matched comparison with sternotomy patients

V. Srivastava, A. Nasir, L. Howell, P. Saravanan, A. Knowles, J. Zacharias; Blackpool/UK

10:15 - 10:30

310 - Mini AVR and sutureless valves for patients in the grey zone between TAVI and sternotomy

S. Pfeiffer, Nuremberg/DE

105

08:30 - 10:30

Causes and treatment of Atrial Fibrillation*Exchange 10*Moderation: G. Haywood¹, T. Bahrami²: ¹Plymouth/UK, ²Harefield/UK

08:30 - 08:40

338 - A survey of contemporary usage of epicardial pacing wires among UK cardiothoracic surgeons: a call for a more conservative approachV. Srivastava¹, E. Akowuah², J. Dunning², J. Ferguson², A. Goodwin², S. Kendall², A. Owens², R. White²: ¹Blackpool/UK, ²Middlesbrough/UK

08:40 - 08:50

339 - The metabolic signature of epicardial adipose as a classification tool for de novo post-operative atrial fibrillation

L. Harling, H. Ashrafian, P. Vorkas, J. Huang, R. Casula, E. Holmes, T. Athanasiou; London/UK

08:50 - 09:00

340 - Epicardial gelsolin as a possible mediator of postoperative atrial fibrillation

A. Viviano, X. Yin, A. Zampetaki, M. Fava, M. Mayr, M. Jahangiri; London/UK

09:00 - 09:10

341 - Cardiomyocyte dedifferentiation may characterise atrial structural remodeling in de novo post-operative atrial fibrillation

L. Harling, H. Ashrafian, R. David, Q. Wu, R. Casula, N. Gooderham, T. Athanasiou; London/UK

09:10 - 09:30

342 - Surgery for Lone AF

T. Bahrami, London/UK

09:30 - 09:50

343 - Combined Open and Percutaneous treatment for Lone AF

G. Haywood, Plymouth/UK

09:50 - 10:10

344 - Surgical management of the left atrial appendage in AF patients

S. Gaynor, Cincinnati/US

10:10 - 10:30

345 - Prophylaxis for atrial fibrillation

V. Lomivorotov, Novosibirsk/RU

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11:00 - 12:30

The Role of Research in Current Training*Charter 2*Moderation: G. Murphy¹, D. Chambers², M. Jahangiri², J. Sabik³:¹Leicester/UK, ²London/UK, ³Cleveland/US

11:00 - 11:10

311 - Expert led undergraduate cardiac basic science teaching in an integrated learning environment: improving educational outcomesM. Gooseman¹, M. Stott², N. Briffa¹: ¹Sheffield/UK, ²Manchester/UK

11:10 - 11:20

312 - Why research makes you a better surgeon

M. Jahangiri, London/UK

11:20 - 11:30

313 - Transcriptional profile of c-kit positive cardiac stem-progenitor cells (c-kitpos ecscs) isolated from the four chambers of the adult human heart

T. Theologou, M. Field, A. Oo, M. Kuduvali, M. Casal, G. Ellison, C. Waring, D. Torella, B. Ginard; Liverpool/UK

11:30 - 11:40

314 - Ex vivo human atrial tissue demonstrates survival and oxygen metabolism in the Miniaturised Myocardial Analysis System (MMAS)I. Riaz¹, M. Loubani¹, S. Griffin², M. Chaudhry¹, C. Dyer¹, J. Greenman¹: ¹Hull/UK, ²Cottingham/UK

11:40 - 11:55

315 - Cardiothoracic Trainees and research - The American Experience

J. Sabik, Cleveland/US

11:55 - 12:05

316 - Proteomic Profiling of the human venous extracellular matrixM. Fava¹, R. Oklu², J. Barallobre-Barreiro¹, D. Potier¹, X. Yin¹, H. Albadawi², P. Skroblin¹, S.R. Langley¹, M.T. Watkins², S. Misra³, J. Stoughton², M. Mayr¹, M. Jahangiri¹: ¹London/UK, ²Boston/US, ³Rochester/US

12:05 - 12:15

317 - From a good idea to a research project - How to do it in the current era

G. Angelini, London/UK

12:15 - 12:15

318 - Benefits of doing a research degree

M. Zakkar, London/UK

114

13:30 - 15:15

BHVS - Aortic Valve Surgery and New Heart Valve Designs*Charter 2*Moderation: C. Miller¹, S. Pfeiffer², N.P. Briffa³, A. Cale⁴: ¹Palo Alto/US, ²Nuremberg/DE, ³Sheffield/UK, ⁴Hull/UK

13:30 - 13:40

319 - Results of the Ross procedure in young adults: a twenty year experienceO. Nawaytou¹, S. Mastrobuoni², L. De Kerchove², A. Poncelet², P. Noirhomme², J. Rubay², G. El Khoury²: ¹Birmingham/UK, ²Brussels/BE

13:40 - 13:50

320 - Reoperations following the Ross procedure: mechanisms of failure and outcomes of interventionO. Nawaytou¹, S. Mastrobuoni², M. Laflamme², S. Solari², L. De Kerchove², P. Noirhomme², J. Rubay², G. El Khoury²: ¹Birmingham/UK, ²Brussels/BE

13:50 - 14:00

321 - Evolution of Aortic Valve Repair Surgery – Time for a UK REGISTRY?H. Mohamed¹, K. Baig², K. Mujahid², E. Hill¹, X. Jin¹, M. Petrou¹: ¹Oxford/UK, ²London/UK

14:00 - 14:10

322 - Mitroflow and Perimount Magna 10 year outcomes. A direct propensity match analysis to assess re-intervention rates and long term follow-up mortality

C. Taddeo, T. Theologou, M. Shaw, M. Field, M. Kuduvali, A. Oo; Liverpool/UK

14:10 - 14:20

323 - Benefit from biological over mechanical valve replacement for left side infective endocarditis: myth or reality? Insights from 14 year-follow-up single center propensity score based analysisU. Benedetto¹, H. Mohamed², M. Petrou²: ¹London/UK, ²Oxford/UK

14:20 - 14:30

324 - Multi centre study to evaluate effects of implantation technique in Isolated Aortic Valve Replacement on mortality and incidence of redo surgeryY. Haqzad¹, M. Loubani², M. Chaudhry², N. Briffa¹: ¹Sheffield/UK, ²Hull/UK

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AT THE HEART OF MEDICAL TECHNOLOGY

Thursday March 26

Adult Cardiac Surgery

14:30 - 14:45

325 - The Triskele Transcatheter Heart Valve

G. Burriesci, London/UK

14:45 - 15:00

326 - Low concentration SDS decellularised cardiac valves

E. Ingham, Leeds/UK

15:00 - 15:15

327 - The On-X valve - thromboresistance in a mechanical valve

N. Briffa, Sheffield/UK

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15:45 - 17:45

Mitral Valve Surgery

Charter 2

Moderation: R. Steeds¹, P. Perier², M. Glauber³, I. Ahmed⁴:

¹Birmingham/UK, ²Bad Neustadt/DE, ³Milano/IT, ⁴Brighton/UK

15:45 - 15:55

328 - Influence of operated leaflet on outcomes after mitral valve repair for degenerative disease

R. Greco¹, C. Olevano², S. Forlani¹, P. Braidley¹, N. Briffa¹: ¹Sheffield/UK, ²Rome/IT

15:55 - 16:05

329 - Early outcomes after mitral valve repair vs. replacement in the elderly: a propensity matched analysis

S. Farid, H. Povey, A. Ladwiniec, A. Ali, N. Moorjani, Y. Abu-Omar; Papworth/UK

16:05 - 16:15

330 - Is mitral valve repair preferable to replacement in ischaemic mitral regurgitation? a meta analysis

M. Salmasi¹, M. Acharya², D. Baskaran³, N. Humayun¹, H. Vohra¹: ¹Leicester/UK, ²Sheffield/UK, ³Bradford/UK

16:15 - 16:35

331 - 1000 minimally invasive mitral valve repairs

M. Glauber, Milano/IT

16:35 - 16:45

332 - Early evolution of a minimally invasive mitral practice

S. Jones, T. Theologou, A. Muir, G. Sudarshan, K. Exarchou, K. Palmer, O. Al-Rawi, P. Modi; Liverpool/UK

16:45 - 16:55

333 - A single centre comparison of minimally invasive versus conventional surgery for mitral valve repair

M. El Saegh¹, K. Khan¹, C. Burdett¹, L. Kenny¹, M. Hasan², A. Goodwin¹, S. Kendall¹, S. Hunter³, E. Akowuah¹: ¹Middlesbrough/UK, ²London/UK, ³Sheffield/UK

Thursday March 26

Adult Cardiac Surgery

16:55 - 17:05

334 - Minimally invasive Mitral valve repair using the EndoClamp: A review of a two centre experience

J. Massey¹, S. Hunter², A. Knowles³, P. Saravanan³, J. Zacharias³:
¹Coventry/UK, ²Sheffield/UK, ³Blackpool/UK

17:05 - 17:15

335 - Minimally invasive mitral valve repair surgery – both early and late outcomes explored

C. Burdett¹, A. Goodwin¹, I. Bibiloni Lage¹, K. Khan¹, M. El Saegh¹, S. Hunter², E. Akowuah¹: ¹Middlesbrough/UK, ²Sheffield/UK

17:15 - 17:25

336 - Patient reported outcomes measures following Mitral Valve Repair: Minimally Invasive Video-Assisted compared to Sternotomy

J. Whiteley, M. Shaw, K. Exarchou, S. Jones, K. Palmer, O. Al-Rawi, P. Modi; Liverpool/UK

17:25 - 17:45

337 - The Mitral Valve through a keyhole

P. Perier, Bad Neustadt/DE

Thoracic Surgery

Thursday March 26



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08:30 - 10:30

Multidisciplinary Care in Thoracic Surgery*Charter 3*Moderation: T. McLeod¹, R. Milton², S. Woolley³: ¹Birmingham/UK, ²Leeds/UK, ³Liverpool/UK

08:30 - 08:40

401 - Lung resection – what is high risk?

K. Booth, W. Elbaroni, K. McManus; Belfast/UK

08:40 - 08:50

402 - A systematic review of studies comparing the post operative pain between uniportal and multiport Video-Assisted Thoracoscopic SurgeryR. Leslie¹, P. McElnay², R. Young¹, D. West¹: ¹Bristol/UK, ²Newcastle Upon Tyne/UK

08:50 - 09:00

403 - Major morbidity after VATS lung resections: a comparison between the ESTS definition and the Thoracic Morbidity and Mortality System

A. Sandri, K. Papagiannopoulos, R. Milton, E. Kefaloyannis, N. Chaudhuri, A. Brunelli; Leeds/UK

09:00 - 09:10

404 - Does age have an impact on adverse events in patients with traumatic rib fractures?

T. Za, G. Korelidis, S. Asopa, A. John, Y. Awan; Plymouth/UK

09:10 - 09:20

405 - Enhanced recovery - preoperative care

N. Rasburn, Bristol/UK

09:20 - 09:30

406 - Enhanced Recovery - Postoperative Care

R. Mosca, Manchester/UK

09:30 - 09:40

407 - Glasgow prognostic score predicts length of stay in intensive care unit in patients undergoing pneumonectomy for cancer

F. Petrella, L. Spaggiari; Milan/IT

09:40 - 09:50

408 - Enhanced Recovery After Thoracic Surgery: outcomes following implementation of a tailored ERAS pathway in a tertiary centreR. Zakeri¹, H. Patel², J. Rao², J. Edwards², L. Socci²: ¹Au/UK, ²Sheffield/UK

09:50 - 10:00

409 - Early pain after VATS or open lobectomy with routine paravertebral catheter use: an observational studyA. Bridgeman¹, P. McElnay², R. Krishnadas¹, G. Casali¹, T. Batchelor¹, K. Kamalanathan¹, M. Molyneaux¹, N. Rasburn¹, D. West¹: ¹Bristol/UK, ²Newcastle Upon Tyne/UK

10:00 - 10:10

410 - Short and long term outcome of pneumonectomy for lung cancer: 15 years experience of a single centre

S. Qadri, M. Chaudhry, A. Cale, M. Cowen, M. Loubani; Hull/UK

10:10 - 10:30

411 - Tricks and tips in VATS segmentectomy

R. Petersen, Copenhagen/DK

118

13:30 - 15:15

Improving Quality in Thoracic Surgery*Charter 3*Moderation: J. Ferguson¹, G. Varela²: ¹Middlesbrough/UK, ²Salamanca/ES

13:30 - 13:40

412 - Epidemiology of chest wall injuries in the East of England Major Trauma Centre Network: scale of the problem. Are we treating the tip of an iceberg?

E. Atkins, J. Gill, A. Norrish, R. O'Leary, R. Burnstein, A. Coonar; Cambridge/UK

13:40 - 13:50

413 - Is there a role for the high-risk multidisciplinary meeting in thoracic surgery?E. Elbur¹, N. Nwaejike², I. Malagon¹, N. Dodman¹, K. Hewitt¹, E. Fontaine¹, P. Krysiak¹, M. Jones¹, R. Shah¹, K. Rammohan¹: ¹Manchester/UK, ²Liverpool/UK

13:50 - 14:00

414 - Is high dependency (HDU) post-operative care still necessary for all cases of major thoracic resection?

C. Bogdan, P. Tcherveniakov, V. Tentzeris, N. Chaudhuri, E. Kefaloyannis, R. Milton, K. Papagiannopoulos, A. Brunelli; Leeds/UK

14:00 - 14:10

415 - An enhanced recovery programme in Thoracic Surgery: factors associated with delayed discharge

N. Joshi, T. Batchelor, D. Messenger, G. Casali, D. West, R. Krishnadas, R. Leslie, K. Kamalanathan, M. Molyneaux, N. Rasburn; Bristol/UK

14:10 - 14:20

416 - The effects of an intentional transition from extrapleural pneumonectomy to extended pleurectomy-decorticationA. Sharkey¹, S. Tenconi², A. Nakas², D. Waller²: ¹Sheffield/UK, ²Leicester/UK

14:20 - 14:30

417 - Lymph node staging for lung cancer in a new VATS lobectomy programme; compliance to ESTS Guidelines and stage migration from PET scanU. Abah¹, L.J. Kyungjin², A. Sudlow³, J. Kadlec³, W. Bartosik³, M. Van Leuven³, F. Van Tornhout²: ¹Cambridge/UK, ²Uy/UK, ³Norwich/UK

14:30 - 14:40

418 - An audit of the effectiveness of the recovery room chest x-ray

P. Brahmabhatt, M. Elshiekh, T. Combellack, P. Vaughan, M. Kornaszewska; Cardiff/UK

14:40 - 14:50

419 - Does primary spontaneous pneumothorax really need surgical treatment?R. Bilancia¹, A. Paik¹, I. Chauhan¹, R. Vaja¹, A. Sharkey², D. Waller¹:
¹Leicester/UK, ²Sheffield/UK

14:50 - 15:10

420 - Surgical risk and predicting thoracic morbidity

G. Varela, Salamanca/ES

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15:45 - 17:45

Practical Issues in Thoracic Surgery*Charter 3*Moderation: D. Eaton¹, J. McGuigan²: ¹Dublin/IE, ²Belfast/UK

15:45 - 15:55

421 - Efficacy of surgical sealants for persistent air leak after lung resection: individual patient data meta-analysis from two randomised trials

M. Al Sahaf, E. Belcher, H. Raubenheimer, C. Proli, N. Asadi, M.E. Cufari, S. Jordan, M. Dusmet, G. Ladas, E. Lim; London/UK

15:55 - 16:05

422 - Suction on chest drains following lung resection: evidence and practice are not alignedP. Lang¹, M. Manickavasagar¹, C. Burdett², T. Treasure³, F. Fiorentino³:
¹Brighton/UK, ²Middlesbrough/UK, ³London/UK

16:05 - 16:15

423 - Lobectomy for LVRS reduces the incidence of prolonged air leak and complications, a single institution cohort of 99 cases

F. Di Chiara, H. Raubenheimer, M.E. Cufari, B. Adams, M. Mesa-Guzman, C. Proli, M. Dusmet, E. Lim, P. Perikleous, S. Jordan; London/UK

16:15 - 16:25

424 - First UK experience of robotically assisted pulmonary lobectomy with the DaVinci systemR. Slight¹, M. Bernstein¹, S. Stamenkovic², S. Clark¹, J. Forty¹:
¹Newcastle Upon Tyne/UK, ²Newcastle-Upon-tyne/UK

16:25 - 16:35

425 - Positive Impact of an Endobronchial Valve Programme and dedicated MDT on rates of Lung Volume Reduction Surgery (LVRS)

P. Tcherвениakov, C. Bogdan, E. Kefaloyannis, R. Milton, A. Brunelli, K. Papagiannopoulos, N. Chaudhuri; Leeds/UK

16:35 - 16:45

426 - VATS pneumonectomy: curiosity or calamity?

M. Will, D. Miller, P. Robinson, W. Walker; Edinburgh/UK

16:45 - 16:55

427 - Preoperative FDG PET-CT in resectable pulmonary carcinoid tumor: correlation with pathological lymph node metastasesR. Younes¹, T. Treasure²: ¹Sao Paulo/BR, ²London/UK

16:55 - 17:05

428 - Safety and feasibility of single port VATS lobectomy for locally advanced lung cancer

N. Asadi, H. Raubenheimer, M.E. Cufari, M. Al-Sahaf, C. Proli, M. Mesa-Guzman, P. Perikleous, S. Jordan, E. Lim; London/UK

17:05 - 17:15

429 - In patients with extensive subcutaneous emphysema, which technique achieves maximal clinical resolution: infraclavicular incisions, subcutaneous drain insertion or suction on in situ chest drain?C. Johnson¹, S. Lang², K. Rammohanc², H. Bilal²: ¹Sheffield/UK, ²Manchester/UK

17:15 - 17:25

430 - Does patient estimated stair climbing ability correlate with reality in thoracic surgical clinics?K. Taleb¹, C. Tan², I. Hunt², G. McAnulty², M. Edsell²: ¹Chertsey/UK, ²London/UK

17:25 - 17:35

431 - Debate - current BTS Guidelines are the standard of care for spontaneous primary pneumothoraces

N. Maskell, Bristol/UK

17:35 - 17:45

432 - Debate - Surgery should be offered as a choice to first time spontaneous primary pneumothoraces

M. Cowen, Hull/UK



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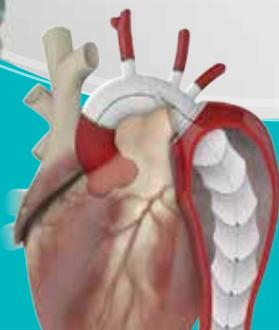


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References:

1. Symposium October 2011. Innovative Product Designs & Emerging Implantation Techniques: First-in-Man Results with a Novel 4-Branched Elephant Trunk Graft for Total Aortic Arch Replacement. Shrestha M *et al.*
2. Di Marco L *et al.* The Thoraflex Hybrid frozen elephant trunk device: The Bologna Experience. Ital Journal of Vascular & Endovascular Surgery. 2014; 1146.
3. Clinical Investigation Report.
4. Design history file 036.
5. Adachi *et al.* (1997) Usefulness of a new branched sealed graft for the replacement of aortic arch. Jap J Art Organs 26:624-628

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CT Forum

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08:30 - 10:30

CT Forum - Cardiac Surgery*Charter 4 - David Geldard Room*Moderation: C. Bannister¹, F. Bhatti², B. Krishnamoorthy³:
¹Southampton/UK, ²Swansea/UK, ³Manchester/UK

08:30 - 08:45

501 - Role of multidisciplinary teams in Cardiac clinical researchH. Robinson, J. Broughton, E. Akowuah, A. Goodwin, A. Owens;
Middlesbrough/UK

08:45 - 09:00

502 - Cardiac surgery service redesign - prioritising in-hospital referralsM. Van-Loo, E. Akowuah, J. Ferguson, S. Kendall, R. White;
Middlesbrough/UK

09:00 - 09:15

503 - Addressing the taboo of death

L. Nolan, F. Bhatti; Swansea/UK

09:15 - 09:30

504 - Enhancing physiotherapy cardiac preoperative education

F. Nolan, K. Lyon; Glasgow/UK

09:30 - 09:45

505 - A clinical screening tool for physiotherapy after cardiac surgery

B. Gibbison, C. Paramasivan, M. Gilhooly, A. Eden, A. Baddeley, F. Falter; Cambridge/UK

09:45 - 10:00

506 - Minimising harm: Evidence to document chest radiograph findings – A re-audit

D. Southey, C. Watkins, H. Luckraz; Wolverhampton/UK

10:00 - 10:15

507 - Improvement in functional status following Mitral Valve surgery

M. Owston, E. Akowuah, A. Goodwin, S. Kendall; Middlesbrough/UK

10:15 - 10:30

508 - Early Ambulation after Cardiac Surgery

D. Lizotte, Harrisonburg, VA/US

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13:30 - 15:15

CT Forum - Quality and Efficiency*Charter 4 - David Geldard Room*Moderation: H. Munday¹, T. Graham², S. Livesey³, C. Ruiz Segria⁴:
¹Cambridge/UK, ²Birmingham/UK, ³Southampton/UK, ⁴Middlesbrough/UK

13:30 - 13:35

509 - Introduction

C. Bannister, Southampton/UK

13:35 - 13:45

510 - National RCN perspective

C. Anim,

13:45 - 14:00

511 - Guideline for patient information on enhanced recovery in thoracic surgery

J. Mitchell, Oxford/UK

14:00 - 14:15

512 - Implementing Enhanced Recovery After Surgery (ERAS) in Thoracic Surgery: an audit of early mobilisation within the high dependency unit (HDU)

K. Graham, E. Morson; Glasgow/UK

14:15 - 14:30

513 - Developing a post-operative Quick Recovery Service following cardiac surgery at Liverpool Heart and Chest Hospital (LHCH)

J. Monks, Liverpool/UK

14:30 - 14:45

514 - Enhanced recovery in cardiac surgery: patients experience

J. Hartley, H. Saunders, L. Cross, A. Bose, A. Walker; Blackpool/UK

14:45 - 15:15

515 - Wake up from alarm fatigue: using our monitors wisely

J. Ley, San Francisco/US

123

15:45 - 17:45

CT Forum - Critical Care*Charter 4 - David Geldard Room*Moderation: T. Bartley¹, S. Gardner², D. Lizotte³:
¹Birmingham/UK, ²Middlesbrough/UK, ³Harrisonburg, VA/US

15:45 - 16:00

516 - Learning through simulation: an education programme for nurses new to cardiothoracic critical care

C. Buchanan, L. Whatley, C. Butler; Oxford/UK

16:00 - 16:15

517 - Introduction of a critical care nurse activity scoring system

T. Williamson, Glasgow/UK

16:15 - 16:30

518 - Family phone calls

C. McEwan, Glasgow/UK

Thursday March 26

CT Forum

16:30 - 16:45

519 - Getting to the 'heart' of acute kidney injury at Papworth Hospital

M. Gilhooly, J. Quigley, P. Sastry; Cambridge/UK

16:45 - 17:00

520 - Are haemofiltration patients adequately anticoagulated?

S. Faichney, P. McCall; Glasgow/UK

17:00 - 17:15

521 - Preventing Hospital Acquired Anaemia in the critically ill patient at Papworth

M. Gilhooly¹, M. Lewin¹, N. Jones²: ¹Cambridge/UK, ²Papworth/UK

17:15 - 17:30

522 - Development of a delirium pathway from pre-admission to GP notification on discharge in a cardiothoracic hospital

M. Pontin¹, N. Jones²: ¹Papworth Everard/UK, ²Papworth/UK

17:30 - 17:45

523 - Implementation of an interventional Advanced Nurse Practitioner Service

J. Quigley, Cambridge/UK

ACTA

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11:00 - 12:45

Organ Protection - Brain and Lung*Exchange 11*

Moderation: S.R. Bennett¹, M. Bennett², J. Mascaro³, P.D. Waterworth⁴: ¹Jeddah/SA, ²Plymouth/UK, ³Birmingham/UK, ⁴Manchester/UK

11:00 - 11:10

601 - Cerebral oximetry & cardiac output monitoring during OPCAB - safeguarding heart and mind

T. Al-Badawi, S. Witts, L. Howell, C. Rozario, M. Hartley, A. Tang; Blackpool/UK

11:10 - 11:20

602 - Aortic stiffness is an indicator of cognitive dysfunction before and after aortic valve replacement for aortic stenosis

O. Jarral, E. Kidher, R. Casula, J. Anderson, A. Chukwuemeka, T. Athanasiou; London/UK

11:20 - 11:40

603 - Guest lecture - Delirium

H. Grocott, Winnipeg/CA

11:40 - 11:50

604 - Tissue damage in inflammatory response: Statin attenuates neutrophil MMP-9 expression by modulating cellular Rho activity

Y.R. Chee, W. Watson, J. McCarthy, D. Healy; Dublin/IE

11:50 - 12:00

605 - Off-pump coronary artery bypass graft surgery for the prevention of pulmonary morbidity: a systematic review and meta-analysis of randomised controlled trials

N. Armugam¹, F. Fiorentino², M. Sharabiani², G. Angelini², N. Patel²: ¹South Kensington/UK, ²London/UK

12:00 - 12:20

606 - SIRS - lung injury following bypass

F. Guarracino, Pisa/IT

12:20 - 12:40

607 - Update on resuscitation

J. Dunning, Middlesbrough/UK

12:40 - 12:45

608 - Discussion

13:30 - 15:15

TOE is a Requirement not an Optional Extra in Cardiac Surgery*Exchange 11*

Moderation: J. Ender¹, A. Zaidi², L Winslow³: ¹Leipzig/DE, ²Swansea/UK, ³Manchester/UK

13:30 - 13:40

609 - Can simulation-based learning influence the ability of surgical trainees to recognise echocardiographic anatomy?: a prospective, randomised study

J. Smelt, C. Corredor, M. Edsell, N. Fletcher, M. Jahangiri, V. Sharma; London/UK

13:40 - 13:50

610 - The role of transoesophageal echocardiography in minimally invasive redo surgery of the tricuspid valve - Case Series

W. Simpson, A. Knowles, J. Zacharias, A. Heggie, P. Saravanan; Blackpool/UK

13:50 - 14:05

611 - Debate - TOE should be used in all cardiac surgical patients: Pro

A. Perrino, Yale/US

14:05 - 14:20

612 - Debate - TOE should be used in all cardiac surgical patients: Con

A. Vuylsteke, Papworth/UK

14:20 - 14:30

613 - Discussion

14:30 - 14:50

614 - Perioperative TOE: The Cardiology Perspective

R. Steeds, Birmingham/UK

14:50 - 15:10

615 - Basic and Advanced Perioperative TOE: The US Experience

S. Reeves, South Carolina/US

15:10 - 15:15

616 - Discussion

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15:45 - 17:45

ITU Management - Heart, Kidney, Lungs & Liver - who wins?*Exchange 11*

Moderation: N. Fletcher¹, S.R. Bennett², D. Jenkins³: ¹London/UK, ²Jeddah/SA, ³Cambridge/UK

15:45 - 16:05

619 - Volume expansion on ICU - choice of fluid

J. Vincent, Brussels/BE

16:05 - 16:25

618 - Practical aspects of fluid management & the glycocalyx

A. Perrino, Yale/US

Thursday March 26

ACTA

16:25 - 16:45

617 - Use and abuse of Goal Directed Therapy

C. Royse, Melbourne/AU

16:45 - 17:05

620 - Pharmacological management of perioperative heart failure - choice of drugs and timing

M. Sander, Berlin/DE

17:05 - 17:25

621 - Oxygen and critically ill patients - Xtreme Everest program

D. Martin, London/UK

Heart & Lung Failure

Thursday March 26



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08:30 - 10:30

Advanced Lung Failure - ECMO and ITU*Exchange 6/7*Moderation: S. Clark¹, M. Erasmus², J. Barker³: ¹Newcastle/UK, ²Groningen/NL, ³Manchester/UK

08:30 - 08:50

701 - Conventional lung failure management in ITU

G. Brear, Manchester/UK

08:50 - 09:10

702 - Extra-corporeal support for respiratory failure

M. Schmidt, Paris/FR

09:10 - 09:20

703 - 5-Year Experience with mobile adult ECMO in a Tertiary Referral Centre

R. Vaja, V. Joshi, R. Porter, G. Faulkner, C. Harvey; Leicester/UK

09:20 - 09:30

704 - Prevalence of complications of tracheostomy in patients receiving veno-venous extracorporeal membrane oxygenation

N. Britton, C. Patvardhan, L. Szentgyorgi; Manchester/UK

09:30 - 09:40

705 - Prolonged intensive care unit (ICU) stay after bilateral lung transplantation - Impact on late survival, rejection and functional outcomes?L.P. Ong¹, E. Thompson¹, Z. Tristan¹, H. Muse¹, K. Wallace¹, M. Prabhu¹, G. Parry¹, S. Clark²: ¹Newcastle/UK, ²Newcastle Upon Tyne/UK

09:40 - 09:50

706 - ECMO support in Lung Transplantation as an alternative to CPB; the Irish experienceA. Gough¹, A. Shah¹, J. McCarthy¹, H. Javadpour¹, L. Nolke¹, D. Eaton², K. Redmond¹, L. Daly¹, D. Healy¹: ¹Dublin/IE, ²Birmingham/UK

09:50 - 10:00

707 - 100 Lung Transplants Delivered in IrelandA. Gough¹, A. Wood², J. McCarthy¹, L. Nolke¹, D. Healy¹, K. Redmond¹, D. Eaton³, H. Javadpour¹, J. Egan¹: ¹Dublin/IE, ²Cardiff/UK, ³Birmingham/UK

10:00 - 10:10

708 - Effect of Health Care Delivery System on Lung Transplant Outcomes for Cystic Fibrosis - The UK versus the USS. Clark¹, C. Merlo², G. Arnaoutakis², N. Yonan³, D. Thomas⁴, A. Simon⁵, R. Thomas⁶, H. Thomas⁷, J. Orens⁸, A. Shah⁸: ¹Newcastle Upon Tyne/UK, ²Baltimore/UK, ³Manchester/UK, ⁴Papworth/UK, ⁵London/UK, ⁶Birmingham/UK, ⁷Bristol/UK, ⁸Baltimore/US

10:10 - 10:30

709 - Lung volume reduction - current status

D. Waller, Leicester/UK

110

11:15 - 12:30

Advanced Lung Failure - Transplantation*Exchange 6/7*Moderation: A. Ranasinghe¹, N. Yonan², A. Roscoe³: ¹Birmingham/UK, ²Manchester/UK, ³Cambridge/UK

11:15 - 11:30

710 - Current status of Ex-Vivo lung perfusion

J. Dark, Newcastle/UK

11:30 - 11:40

711 - Human Isolated Perfused Lungs as models to study optimum conditions for Ex-Vivo Lung PerfusionP. Ariyaratnam¹, M. Loubani²: ¹Cottingham/UK, ²Hull/UK

11:40 - 11:50

712 - The effect of post-operative colonisation with Pseudomonas in cystic fibrosis patients undergoing lung transplantation in IrelandA. Gough¹, C. O'Driscoll¹, E. Burke¹, D. Healy¹, J. McCarthy¹, L. Nolke¹, H. Javadpour¹, K. Redmond¹, D. Eaton², J. Egan¹, M. Hannan¹: ¹Dublin/IE, ²Birmingham/UK

11:50 - 12:05

713 - Pulmonary thrombendarterectomy: an update

D. Jenkins, Cambridge/UK

12:05 - 12:20

714 - Bridging to lung transplantation

M. Erasmus, Groningen/NL

12:20 - 12:30

715 - Palliative care in heart and lung transplantation

M. McKenna, Newcastle/UK

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13:30 - 15:15

Advance Heart Failure - Temporary Mechanical Support*Exchange 6/7*Moderation: N. Yonan¹, R. Mosca¹, R. Venkateswaran¹, M. Antunes²: ¹Manchester/UK, ²Coimbra/PT

13:30 - 13:50

716 - Advanced conventional heart failure management on ITU

C. Roysam, Newcastle Upon Tyne/UK

13:50 - 14:10

717 - Mechanical support for cardiogenic shock

S. Westaby, Oxford/UK

14:10 - 14:20

718 - VA ECMO Interhospital Retrieval for Refractory Cardiogenic Shock; Single Center Experience

M. Berman¹, S. Tsui², J. Dunning², C. Sudarshan³, P. Curry⁴, M. Codispoti¹, J. Parameshwar¹, C. Lewis¹, S. Pettit¹, N. Jones¹, K. Salaunkey¹, K. Valchanov¹, J.A. Fowles¹, A. Vuylsteke¹, D. Jenkins³: ¹Papworth/UK, ²Papworth Everard/UK, ³Cambridge/UK, ⁴Glasgow/UK

14:20 - 14:30

719 - Outcomes of temporary circulatory support through veno-arterial ECLS: single-center series of 311 patients

A. Anselmi, V.G. Ruggieri, M. Harmouche, J. Guihaire, H. Corbineau, T. Langanay, A. Leguerrier, Y. Le Tulzo, Y. Malledant, J. Verhoye, E. Flécher; Rennes/FR

14:30 - 14:40

720 - Is it safe to use CentriMag short term ventricular assist device beyond 30 days?

S. Hashmi, J. Hasan, K. Oommen, S. Shaw, S. Williams, N. Yonan, R. Venkateswaran; Manchester/UK

14:40 - 14:50

721 - CentriMag short term ventricular assist device as a bridge to decision in critical cardiogenic shock (INTERMACS 1) - The Manchester Experience

S. Hashmi, J. Hasan, K. Oommen, S. Shaw, S. Williams, N. Yonan, R. Venkateswaran; Manchester/UK

14:50 - 15:10

722 - Ex-Vivo heart perfusion

S. Steen, Lunds/SE

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15:45 - 17:45

Advanced Heart Failure - LVADs and Transplant*Exchange 6/7*

Moderation: N. Al Attar¹, A.R. Simon², A. Roscoe³, S. Schueler⁴: ¹Glasgow/UK, ²London/UK, ³Cambridge/UK, ⁴Newcastle/UK

15:45 - 16:05

723 - Current status of heart transplantation in the UK

S. Lim, Birmingham/UK

16:05 - 16:25

724 - Heart transplantation - a transatlantic perspective

D. Cameron, Baltimore/US

16:25 - 16:45

725 - Heart Transplantation vs VAD: The Gold Standard in 2015

A. Zuckermann, Vienna/AT

16:45 - 16:55

726 - Ventricular Arrhythmias in long term LVAD patients - life threatening situation or nothing to worry about?

M. Mydin¹, S. Kiani², N. Robinson², A. Woods², A. Donado², N. Wrightson³, T. Butt², G. MacGowan², S. Schueler³: ¹Newcastle Upon Tyne, Tyne And Wear/UK, ²Newcastle/UK, ³Newcastle Upon Tyne/UK

16:55 - 17:05

727 - LVAD-related Driveline infections: a single-centre experience

M. Aymami, M. Revest, J. Guihaire, A. Anselmi, V. Desriac, P. Rouault, A. Leguerrier, E. Flécher; Rennes/FR

17:05 - 17:15

728 - Heterotopic cardiac transplantation as a bridge to native heart recovery

S. Mohiyaddin¹, M. Acharya¹, Z. Tahir², R. Patni², M. Soni²: ¹Sheffield/UK, ²Plymouth/UK

17:15 - 17:30

729 - Experience with TransMedics OCS

A. Simon, London/UK

17:30 - 17:45

730 - Heartmate III experience

I Netuka, Prague/Czech Republic

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Posters

Thursday March 26



Society for
Cardiothoracic Surgery
In Great Britain & Ireland



Association of
Cardiothoracic
Anaesthetists

SCTS/ACTA
Joint Annual Meeting
&
Cardiothoracic Forum

09:00 - 18:00

Posters

Moderation: I. Ahmed¹, M. Chaudhry², S. Nair³, W. Wooldridge⁴, K. Moyna Bill⁵, A. Lotto⁶, K. Van Doorn⁷, J.E. King⁸, M. Shackcloth⁹:
¹Brighton/UK, ²Hull/UK, ³Newcastle Upon Tyne/UK, ⁴Manchester/UK, ⁵Belfast/UK, ⁶Leicester/UK, ⁷Leeds/UK, ⁸London/UK, ⁹Liverpool/UK

09:00 - 09:00

801 - Outcome of secondary sternal plate fixation

A. Abdelbar, R. Azzam, I. Manoley, S. Datta, A. Aliar, H. Abunasra, R. Hasan; Manchester/UK

09:00 - 09:00

802 - Penetrating cardiac injury. Ten-year experience of primary cardiovascular center.

J. Konecny, M. Simek, A. Klvacek, M. Gwozdziwicz, A. Steriovsky, P. Santavy, R. Hajek, M. Troubil, P. Hubacek, V. Lonsky; Olomouc/CZ

09:00 - 09:00

803 - Ambulation of the short-term ventricular assist device patient

J. McGrady, F. Nolan; Glasgow/UK

09:00 - 09:00

804 - Early detection of success of endobronchial valve (EBV) lung volume reduction (LVR) using chest wall motion analysis

G. Elshafie¹, S. Motamedi², R. Wilson², P. Rajesh¹, R. Steyn¹, M. Kalkat¹, E. Bishay¹, B. Naidu¹: ¹Birmingham/UK, ²Cambridge/UK

09:00 - 09:00

805 - 3D printing a bony chest wall from CT-scan data as an adjunct to prosthetic reconstruction after chest wall resection

K. Loganathan¹, D. West¹, I. Rahman¹, P. McElnay²: ¹Bristol/UK, ²Newcastle Upon Tyne/UK

09:00 - 09:00

806 - Retained drain tip in the pleural cavity following pleural drainage with a seldinger intercostal drain

N. Oswald¹, M. Abdelaziz², P. Rajesh², R. Steyn²: ¹Birmingham/UK, ²Birmingham/UK

09:00 - 09:00

807 - Challenges of a thoracic case manager

B. Andrews, Southampton/UK

09:00 - 09:00

808 - The incidence of anxiety and depression in patients with lung malignancy presenting for thoracic surgery

B. Ansari¹, S. Iyer¹, M. Scarci², A. Klein¹: ¹Cambridge/UK, ²Papworth Everard/UK

09:00 - 09:00

809 - Quality of life and functional status following cardiac surgery

M. Diab, G. Soppa, N. McGale, S. Hirani, S. Newman, M. Jahangiri; London/UK

09:00 - 09:00

810 - Can social media benefit your clinical practice?

J. Broughton, E. Akowuah; Middlesbrough/UK

09:00 - 09:00

811 - Is there a role for routine rigid bronchoscopy in surgical treatment of lung cancer?

V. Tentzeris, P. Tcherveniakov, C. Bogdan, N. Chaudhuri, R. Milton, A. Brunelli, K. Papagiannopoulos, E. Kefaloyannis; Leeds/UK

09:00 - 09:00

812 - Reducing repair and replacement costs in a thoracic tertiary centre: closing the audit loop on flexible fibrescope breakage

M. John, S. Badiger, P. Kenny, I. Ahmad; London/UK

09:00 - 09:00

813 - Post CABG ascending aorta pseudoaneurysm repaired with endovascular stenting: a case report

A. Oliemy¹, N. Walker², S. Chandramohan², G. Treharne², N. Al-Attar²: ¹Tanta/EG, ²Glasgow/UK

09:00 - 09:00

814 - Awake TAVI in high risk patients - case series

R. Pandrangi, F. Lam, M. Gunning, A. Pherwani, R. Jeeji; Stoke-On-trent/UK

09:00 - 09:00

815 - Pain control following lobectomy for cancer: Does the approach matter?

A. Barua, S. Qadri, K. Kotidis, V. Hong, M. Loubani; Hull/UK

09:00 - 09:00

816 - Annular preservation technique for mitral valve replacement in severely calcified mitral valve annulus: 10-years experience

A. Ashoub, K. Salhiyyah, D. Patrick, S. Miskolczi, G. Tsang, S. Ohri, C. Barlow, T. Velissaris, S. Livesey; Southampton/UK

09:00 - 09:00

817 - Peri-op surgical checklist in cardiac surgery - an Edinburgh experience

D. Wu¹, J. Howlett¹, D. Sorenson¹, R. Qureshi², S. Prasad¹:
¹Edinburgh/UK, ²Solihull/UK

09:00 - 09:00

818 - Clinical outcomes and technical considerations of surgery for carcinoid heart disease

J. Barr, A. Kourliouros, S. Chaubey, R. Deshpande, M. Baghai, O. Wendler; London/UK

09:00 - 09:00

819 - Is VATS pleural biopsy as safe as we think?

A. Vozza¹, S. Stamenkovic²: ¹Newcastle/UK, ²Newcastle-Upon-tyne/UK

09:00 - 09:00

820 - Ascending aortic & aortic valve replacement in a patient with erythropoietic porphyriaD.K. Meessala¹, R. Jeeji², L. Balacumaraswami², L. Srinivasan²:
¹Birmingham/UK, ²Stoke-On-trent/UK

09:00 - 09:00

821 - Unusual complication with unusual treatment – pyoderma gangrenosum following chest drain insertionA. Sudlow¹, J. Kadlec¹, K. Lee Jeong¹, U. Abah², W. Bartosik¹:
¹Norwich/UK, ²Cambridge/UK

09:00 - 09:00

822 - Does preoperative anaemia affect the outcome of TAVI patients?

E. Mohamed-Ahmed, L. Salimin, D. Muller, S. Asopa, M. Dalrymple-Hay, C. Lloyd; Plymouth/UK

09:00 - 09:00

823 - Pericardectomy for constrictive pericarditis - a 15 years single centre experience

E. Mohamed-Ahmed, S. Bazerbashi, N. Mowad, J. Unsworth-White, J. Kuo; Plymouth/UK

09:00 - 09:00

824 - Group and save only for lung resections? Feasibility, implications and national survey of current practiceJ. Kadlec¹, K. Mahendran², A. Longe¹, M. Scarci³: ¹Norwich/UK, ²Cambridge/UK, ³Papworth Everard/UK

09:00 - 09:00

825 - Assessing quality of life in lung cancer patients pre-surgery: can we do better?

C. Bruce, Edinburgh/UK

09:00 - 09:00

826 - A survey of current haemodynamic management in the cardiac intensive care unit and proposed study protocol

R. Thomson, N. Al Subaie, N. Fletcher; London/UK

09:00 - 09:00

827 - Does type of prosthesis have an impact on recurrent infection and survival in active infective endocarditis of the aortic valve: 15 year single centre experience

E. Mohamed-Ahmed, S. Asopa, M. Soni, N. Moawad, J. Bilak, N. Mahmood, J. Unsworth-White, J. Kuo; Plymouth/UK

09:00 - 09:00

828 - Malignant Pleural Effusions: "One size does not fit all"

A. Patel, S. Fyyaz, R. Steyn, P. Rajesh, M. Kalkat, E. Bishay, B. Naidu; Birmingham/UK

09:00 - 09:00

829 - National 10-year experience with management of Total Anomalous Pulmonary Venous Drainage in IrelandT. Kelly¹, F. De Rita², Y. Sritharen², J. McGuinness², J.M. Redmond², L. Nolke²: ¹Limerick/IE, ²Dublin/IE

09:00 - 09:00

830 - Outcomes of CT-guided micro-coil localization of small and palpable peripheral lung lesions before VATS resection in a single centre pilot study

E. Teh, J. Hughes, R. Duerden, T. Batchelor, G. Casali, R. Krishnadas, D. West; Bristol/UK

09:00 - 09:00

831 - Does the number of drains have an effect on outcome post isolated Aortic Valve Replacement: a comparative study in the early post-operative period

N. Moawad, S. Asopa, A. Marchbank; Plymouth/UK

09:00 - 09:00

832 - Early versus late paravertebral block for analgesia in Video Assisted Thoracoscopic (VATS) Lung resection (ErLaPara Study)

K. Kamalanathan, M. Molyneaux, N. Rasburn; Bristol/UK

09:00 - 09:00

833 - Frailty and its impact in cardiac surgery

E. Groundwater, I. Quasim; Glasgow/UK

09:00 - 09:00

834 - A case series review of anaesthetic techniques used for endobronchial valve (EBV) insertion

V. Dhokia, J. Bence; Leicester/UK

09:00 - 09:00

835 - The BIMA ScoreA. Kourliouros¹, U. Benedetto², A. Jothidasan¹, Z. Choudhry¹, M. Amrani², S. Raja²: ¹Harefield/UK, ²London/UK

09:00 - 09:00

836 - National survey on anaesthesia for electrophysiology related procedures in cardiac catheter laboratoryA. Ranjan¹, S. Mattison², I. McGovern², C. Walker³, L. Kuppurao², J. Mitchell³: ¹Sheffield/UK, ²Harefield/UK, ³Harefield/UK

09:00 - 09:00

837 - Prognostic factors for early morbidity and mortality in patients undergoing lung resectionL. Okiror¹, A. Kerr¹, A. Bille², P. Agostini¹, E. Bishay¹, R. Steyn¹, P. Rajesh¹, M. Kalkat¹, B. Naidu¹: ¹Birmingham/UK, ²New York/US

09:00 - 09:00

838 - Cerebrovascular outcomes in patients with carotid artery disease undergoing Coronary Artery Bypass Graft without Carotid Endarterectomy: Is there an increased incidence of post-operative stroke?

S. Datta, F. Javed, R. Hasan; Manchester/UK

09:00 - 09:00

839 - Right Ventricular tear following Vacuum Assisted Closure therapy for post-operative mediastinitis: lessons learnt and strategies developed to reduce the incidence of such a life threatening complication

S. Datta, D. Keenan, R. Hasan; Manchester/UK

09:00 - 09:00

840 - The impact of concomitant tricuspid valve surgery on mitral surgery: 12 years experience from a single centre

I. Rahman, Z. Tahir, J. Unsworth-White; Plymouth/UK

09:00 - 09:00

841 - Careful preoperative planning and strict perioperative monitoring and blood pressure manipulation reduce the risk of spinal cord injury after hybrid aortic arch and descending aorta repair

M. Iafrancesco, A. Ranasinghe, V. Dronavalli, O. Nawaytou, I. Nenekidis, S. Das De, M. Claridge, D. Adam, J. Mascaro; Birmingham/UK

09:00 - 09:00

842 - Comparison of single-stage open versus hybrid repair of aortic arch and descending aorta disease

M. Iafrancesco, A. Ranasinghe, O. Nawaytou, I. Nenekidis, S. Das De, J. Mascaro; Birmingham/UK

09:00 - 09:00

843 - Risk stratification in arch surgery: when high risk is too high? Implications for open or endovascular repair from a 15-years survey on over 350 patients

M. Iafrancesco, A. Ranasinghe, V. Dronavalli, D. Adam, M. Claridge, I. McCafferty, P. Riley, D. Pagano, J. Mascaro; Birmingham/UK

09:00 - 09:00

844 - Aortic root replacement for endocarditis: short and long-term results

M. Iafrancesco, A. Ranasinghe, O. Nawaytou, I. Nenekidis, S. Das De, J. Mascaro; Birmingham/UK

09:00 - 09:00

845 - Surgeon-modified fenestrated endografts for acute symptomatic thoraco-abdominal aortic aneurysms

M. Iafrancesco, M. Vezzosi, A. Ranasinghe, J. Mascaro, M. Claridge, D. Adam; Birmingham/UK

09:00 - 09:00

846 - Clinical results of emergency cardiothoracic surgery in patients with chest trauma

M. Iafrancesco, D. Quinn, E. Senanayake, M. Midwinter, S. Rooney, T. Graham; Birmingham/UK

09:00 - 09:00

847 - Surgical management of aberrant Right Coronary Artery

H. Khan, S. Chaubey, R.D. Ranjit Deshpande, J. Desai, O. Wendler; London/UK

09:00 - 09:00

848 - Total arterial revascularisation : a suitable treatment option in elderly patients lacking vein grafts

H. Khan, S. Chaubey, O. Wendler; London/UK

09:00 - 09:00

849 - Retrospective audit of leg wounds following LSV harvest using the bridging technique

T. Tiyenga, J. Dunning; Middlesbrough/UK

09:00 - 09:00

850 - Surgery corrects asynchrony of ribcage secondary to extra-thoracic tumor but leads to expiratory dysfunction during exercise

G. Elshafie¹, A. Aliverti², L. Pippa², P. Kumar¹, M. Kalkat¹, B. Naidu¹:
¹Birmingham/UK, ²Milan/IT

09:00 - 09:00

851 - Acute Aortic Dissections initially incorrectly managed as Acute coronary syndromes prior to surgery - 5 yr review

S. Podila, M. Sherif, U. Ooppel; Cardiff/UK

09:00 - 09:00

852 - Pleural fluid cytology adds diagnostic accuracy to surgical pleural biopsy: An observational study assessing the 2010 British Thoracic Society (BTS) guidelines

D. Lim¹, P. McElnay², N. Bhatt¹, D. West¹: ¹Bristol/UK, ²Newcastle Upon Tyne/UK

09:00 - 09:00

853 - Long-term survival after AVR among high-risk elderly patients

M. Taghavi Azar Sharabiani, N. Patel, F. Fiorentino, G. Angelini; London/UK

09:00 - 09:00

854 - Innovative solutions: use of a canister free, single use negative pressure device for incision management reduces surgical site infection and length of stay in high risk cardiothoracic patients. Early findings at a UK Cardiac Centre. Written with support from Smith and Nephew

T. Dickinson¹, D. Rodden²: ¹Stockport/UK, ²London/UK

09:00 - 09:00

855 - 24-hour impedance pH monitoring detects significant treatable reflux in symptomatic patients with 'normal' standard 24-hour pH monitoring

A. Williams, K. Noble, B. Naidu, R. Steyn, E. Bishay, M. Kalkat, P. Rajesh; Birmingham/UK

09:00 - 09:00

856 - Long-term survival after Off-Pump Coronary Artery Bypass graft surgery

N. Patel, F. Fiorentino, M. Sharabiani, G. Angelini; London/UK

09:00 - 09:00

857 - Is there risk aversion following cardiac surgical death? Not according to EuroSCORE

R. Williams, M. Shaw, D. Walker, J. McShane; Liverpool/UK

09:00 - 09:00

858 - Involving patients in the development of a bespoke lung surgery handbook improves patient experience

S. Fyyaz, A. Kerr, M. Bellamy, E. Bishay, M. Kalkat, P. Rajesh, R. Steyn, B. Naidu; Birmingham/UK

09:00 - 09:00

859 - Re-operative Aortic Root Replacement for Peri-annular Abscess due to prosthetic valve endocarditis

S. Sadeque, A. Modi, S. Miskolczi, M. Kaarne, C. Barlow, S. Ohri, S. Livesey, G. Tsang; Southampton/UK

09:00 - 09:00

860 - Controlled Randomised Trial into Fat Filtration in cardiac surgery with cardiopulmonary bypass

A. Ajzan, C. Weston, P. Kumar; Swansea/UK

09:00 - 09:00

861 - Surgical revascularization for Ischaemic Ventricular Arrhythmia: Early and long term outcomeA. Habib¹, A. Alibhai¹, M. Jarvis², M. Chaudhry², M. Loubani²:
¹Cottingham/UK, ²Hull/UK

09:00 - 09:00

862 - Development of a Single-Center program of long-term Ventricular Assist Devices: Early and follow-up results

E. Flécher, A. Anselmi, B. Lelong, C. Chabanne, V. Desriac, P. Rouault, A. Ingels, J. Verhoye, A. Leguerrier; Rennes/FR

09:00 - 09:00

863 - Learning an emergency cardiothoracic procedure through YouTubeS. Jayakumar¹, J. George²: ¹London/UK, ²Swansea/UK

09:00 - 09:00

864 - Survivors of ARDS post chest injury rarely return to their pre-injury level of physical work

K. McManus, Belfast/UK

09:00 - 09:00

865 - Midterm follow-up of Haemodynamic Performance of the St. Jude Medical Trifecta Aortic Bioprosthesis

J. Chacko, A. Sepehripour, R. Uppal, K. Wong, K. Lall; London/UK

09:00 - 09:00

866 - Mitral Valve Annuloplasty Devices - does size really matter?

J. Chacko, A. Sepehripour, P. Punjabi; London/UK

09:00 - 09:00

867 - Incidental pN2 lung cancer affects the survival after lung cancer surgeryR. Rajnish¹, J. Massey², M. Bittar¹, A. Walker¹, A. Tang¹, A. Duncan¹, R. Millner¹, J. Zaccarias¹, M. Purohit¹: ¹Blackpool/UK, ²Coventry/UK

09:00 - 09:00

868 - Audit of the waiting time of patients underwent lung resection for malignancy in the last year in Northern Ireland.

C. Konstantinou, P. Mhandu; Belfast/UK

09:00 - 09:00

869 - Does Obstructive Sleep Apnoea affect morbidity and mortality in patients following open heart surgery?

S.I. Rizvi, D. Bleetman, F. Ciulli; Bristol/UK

09:00 - 09:00

870 - Role of surgical biopsies in the modern management of interstitial lung disease

A. Raza, M. Jones, L. Richeldi, A. Alzetani; Southampton/UK

09:00 - 09:00

871 - Modification of the Multidisciplinary Team's Management of Transcatheter Aortic Valve Programme From 2008 – 2014. A Single Centre Experience

T. Riches, S. Melhuish, C. Lloyd, S. Asopa; Plymouth/UK

09:00 - 09:00

872 - Low-flow low-gradient aortic stenosis: Surgical outcomes and mid term resultsA. Lopez-Marco¹, A. Youhana², S. Ashraf², A. Zaidi², F. Bhatti², P. Kumar²: ¹Cardiff/UK, ²Swansea/UK

09:00 - 09:00

873 - CT guided wire localisation of suspicious pulmonary lesions; a review of 10 patientsA. Daly¹, S. Kilgarrif¹, D. Eaton², J. Murray¹, L. Lawler¹, K. Redmond¹:
¹Dublin/IE, ²Birmingham/UK

09:00 - 09:00

874 - 170 consecutive mini-AVRs from a single centre: should it be routine?

U. Aslam, J. George, P. Kumar; Swansea/UK

09:00 - 09:00

875 - Barriers to mobilising patients post thoracic surgery

G. Sheill, K. Devenney, M. Spain; Dublin/IE

09:00 - 09:00

876 - Medium term outcome of patients undergoing concomitant tricuspid annuloplasty for either prophylactic or therapeutic indications

A. Lopez-Marco, U. Von Oppell, R. Tymko, D. Mehta, I. Deglurkar; Cardiff/UK

09:00 - 09:00

877 - Histological effect of a novel thermal ablative device on mesothelioma: possible role as an adjunct to surgery

A. Coonar, D. Rassl; Cambridge/UK

09:00 - 09:00

878 - The use of endobronchial valves in COPD patients, an alternative option to LVRS?A. Paik¹, A. Sharkey², I. Oey¹, D. Waller¹: ¹Leicester/UK, ²Sheffield/UK

09:00 - 09:00

879 - On-call referrals to a regional thoracic centre – implications for training and service provision

H. Boyd Carson, K. Ang, E. Addae-Boateng, J. Thorpe, A. Majewski, J. Duffy; Nottingham/UK

09:00 - 09:00

880 - Impact of Enhanced Recovery Programme on patients undergoing lung cancer surgery

A. Pinho-Gomes, N. Rahman, E. Black, D. Stavroulias, E. Belcher; Oxford/UK

09:00 - 09:00

881 - High Risk Coronary Surgery: Should it be performed by a subspecialist

P. Govewalla, A. Cale, M. Chaudhry, M. Cowen, M. Jarvis, M. Loubani, P. Whitlock; Hull/UK

09:00 - 09:00

882 - The setting up of a specialist endobronchial lung volume reduction service does not reduce rate of conventional lung volume reduction surgery

S. Mohamed, B. Naidu, P. Rajesh; Birmingham/UK

09:00 - 09:00

883 - Is there a mortality and morbidity cost to total aortic arch replacement in acute type A dissection? A systematic review

S.S. Poon, T. Theologou, M. Field, D. Harrington, M. Kuduvalli, A. Oo; Liverpool/UK

09:00 - 09:00

884 - VATS major intraoperative complications leading to conversion to an open procedure: a single centre experience

A. Pannu, A. Sandri, K. Papagiannopoulos, R. Milton, E. Kefaloyannis, N. Chaudhuri, V. Tentzeris, A. Brunelli; Leeds/UK

09:00 - 09:00

885 - Prothrombin complex concentrates administration is associated with adverse outcomes after cardiac surgeryG. Mariscalco¹, G. Cappabianca², F. Biancari³, M. Cottini², F. Papesso², S. Banescu², G. Covaia², C. Beghi²: ¹Leicester/UK, ²Varese/IT, ³Oulu/FI

09:00 - 09:00

886 - Changing trends in the Management Paediatric Empyema: a retrospective analysis of a nine-year experience of a National Referral Centre

J. Fitzpatrick, J.M. Redmond, L. Nolke, J. McGuinness; Dublin/IE

09:00 - 09:00

887 - Does retrograde autologous priming of the cardiopulmonary bypass circuit have an impact on haematocrit and blood transfusion In uncomplicated coronary artery bypass graft surgery? A retrospective analysis

R. Richards, A. Khan, H. Zeinah, A. Walker; Blackpool/UK

09:00 - 09:00

888 - Is there any indication for repeating coronary angiograms in patients with three vessels disease on the surgical waiting list?A. Lopez-Marco¹, A. Hailan², G. Jenkins², A. Youhana²: ¹Cardiff/UK, ²Swansea/UK

09:00 - 09:00

889 - Prognostic significance of Circumferential Resection Margin involvement after Ivor-Lewis Gastro-esophagectomy; is it time to act?S. Bello¹, A. John¹, E. Mohamed-Ahmed¹, N. Moawad¹, N. Dorey², J. Rahamim¹: ¹Plymouth/UK, ²Torabay/UK

09:00 - 09:00

890 - Dedicated thoracic surgical high dependency unit is essential and cost effective for a tertiary thoracic unitM. Jadoon¹, A. Nakas², D. Waller², R. Vaga², F. Chowdhry², S. Rathinam²: ¹Nottingham/UK, ²Leicester/UK

09:00 - 09:00

891 - Multidisciplinary approach for management retrosternal thyroidM. Jadoon¹, P. Conboy², J. Uddin², A. Tewary², C. Harvey³, S. Rathinam²: ¹Nottingham/UK, ²Leicester/UK, ³Northampton/UK

09:00 - 09:00

892 - The combined impact of surgical team education and chlorhexidine 2% alcohol on the reduction of surgical site infection following cardiac surgery

K. O' Sullivan, A. Higgins, M. Lynch, A. Murphy, J. McCarthy, E. Ryan, M. Hannan, J. Hurley; Dublin/IE

09:00 - 09:00

893 - Care, compassion and competence in critical care: A qualitative exploration of nurses' experience of family witnessed resuscitation

J. Monks, M. Flynn; Liverpool/UK

09:00 - 09:00

894 - Health demographics of ischaemic heart disease and lung cancer in an area will negatively affect recruitment into cardiothoracic surgery

N. Burnside, J. McGuigan; Belfast/UK

09:00 - 09:00

895 - Lung cancer waiting times: a 20 year follow-up

U. Abah, K. Mahendran, F. Granato, F. Wells, A. Coonar; Cambridge/UK

09:00 - 09:00

896 - Early experience with TAVI following previous mitral valve surgery

S. Jones, J. Kendall, T. Ridgway, J. Mills, R. Stables, A. Oo, M. Kuduvali; Liverpool/UK

09:00 - 09:00

897 - Mortality Following Cardiac Surgery: Should it all be counted in the Surgeon Specific outcomes?

S. Qadri, S. Balasubramanian, M. Chaudhry, A. Cale, M. Cowen, M. Jarvis, P. Whitlock, M. Loubani; Hull/UK

09:00 - 09:00

898 - A novel training model for VATS lobectomy: An initial report

P. Tcherveniakov, C. Bogdan, N. Chaudhuri; Leeds/UK

09:00 - 09:00

899 - Rescue cardiopulmonary bypass in complicated transcatheter valve implant. Dum vita est, spes est (While there is life, there is hope)

F. Pirone, K. Wilson, C. Evans, J. Hancock, S. Redwood, C. Young, V. Bapat; London/UK

09:00 - 09:00

900 - Portable thoracic ultrasound should be standard of care for localisation of pleural collections in the operating room

C. Bogdan, P. Tcherveniakov, V. Tentzeris, K. Papagiannopoulos, N. Chaudhuri; Leeds/UK

09:00 - 09:00

901 - Palliative management of malignant pleural effusions due to mesothelioma using PleuRx® drains

R. Attia, F. Akter, L. Lang-Lazdunski; London/UK

09:00 - 09:00

902 - A randomised study comparing leg wound complications following open vein harvesting from different harvesting sites in patients with peripheral vascular disease

B. Krishnamoorthy, W. Critchley, B. Isalska, C. Gee, J. Barnard, R. Venkateswaran, J. Fildes, N. Yonan, P. Waterworth; Manchester/UK

09:00 - 09:00

903 - The role of CT based surveillance following resection of early stage lung cancer: detection of treatable disease

J. Mitchell, E. Black, F. Gleeson, A. Moore, N. Rahman, D. Stavroulias, E. Belcher; Oxford/UK

09:00 - 09:00

904 - Can low Vitamin D levels be associated with lung cancer - a multi centre study proposalS. Mohiyaddin¹, M. Soni², R. Patni², Z. Tahir², T. Za², S. Bodnarescu²: ¹Sheffield/UK, ²Plymouth/UK

09:00 - 09:00

905 - Re entry complications in adults undergoing redo cardiac surgery: role of pre op imagingJ. Whiteley¹, G. Berg², G. Beattie²: ¹Liverpool/UK, ²Glasgow/UK

09:00 - 09:00

906 - Anaesthetist specific mortality and morbidity following OPCAB

S. Jones, D. Moffat, M. Shaw, S. Agarwal; Liverpool/UK

09:00 - 09:00

907 - Implantable left ventricular assist devices: a single center six years experience

M. Para, L. Bocquillon, C. Delmas, M. Berry, E. Dieye, J. Roncalli, M. Galinier, B. Marcheix, Y. Glock, C. Dambrin; Toulouse/FR

09:00 - 09:00

908 - Pleurectomy and Decortication for Malignant Mesothelioma can be performed safely with low mortality and morbidity: A single centre experience

S. Qadri, M. Chaudhry, A. Cale, M. Cowen, M. Loubani; Hull/UK



SCTS ACTA Annual Dinner Thursday 26th March 2015

The Monastery Manchester

Tickets £60.00. Price includes welcome drinks, 3 course meal with wine and entertainment.

Available to buy online or at the annual dinner ticket desk in the Upper Exchange foyer.

Coaches will leave 7pm from outside Manchester Central.

If you have pre-booked online please collect your dinner ticket at the annual dinner desk in the Upper Exchange Foyer.

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Movies

Thursday March 26



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09:00 - 16:00

Movies

Exchange Mezzanine

Moderation: J. Unsworth-White¹, N. Roberts², S. Woolley³, R. Sayeed⁴: ¹Plymouth/UK, ²London/UK, ³Liverpool/UK, ⁴Oxford/UK

09:00 - 09:00

910 - A solution to a relative contraindication to a 'David V' valve sparing root replacement in an aneurysmal root - ultra-thinning of the aortic wall in the right coronary sinus

D. Robb¹, C. Komlo², P. Vallabhajosyula², N. Desai², W. Szeto², J. Bavaria²: ¹Philadelphia, PA/US, ²Philadelphia/US

09:00 - 09:00

911 - Challenges of balloon valvuloplasty and valve-in-valve TAVI within a prosthetic aortic biological valved conduit

S. Rehman, L. Gobolos, N. Curzen, A. Calver, S. Ohri, G. Tsang; Southampton/UK

09:00 - 09:00

912 - The technique of using Methylene Blue to avoid twisting of the Radial Artery during Composite Grafting in OPCAB

S. Naik, V. Aronica, J. Lu, M. Saleem; Nottingham/UK

09:00 - 09:00

913 - Myocardial bridge. What's the best surgical approach?

D. Bleetman¹, J. Strange¹, N. Nikolaidis²: ¹Bristol/UK, ²Southampton/UK

09:00 - 09:00

914 - A Minimal access (ThruPort) approach to repair the mitral valve after a right pneumonectomy

D. Rose, J. Zacharias; Blackpool/UK

09:00 - 09:00

915 - Cryptic recurrent mitral excrescences

D. Rose, J. Zacharias; Blackpool/UK

09:00 - 09:00

916 - Minimally invasive endoscopic approach for redo tricuspid valve repair

D. Buioni, D. Maselli, L. Bellieni, S. Nardella, C. Dominici, G. Santise; Catanzaro/IT

09:00 - 09:00

917 - How to secure the airway in bronchopleural fistula

M. Molyneaux, K. Kalamanathan, R. Leslie; Bristol/UK

09:00 - 09:00

918 - Internal Multi-Level Intercostal Blocks (IMLIBs)

D. Quinn¹, M. Molyneaux²: ¹Birmingham/UK, ²Bristol/UK

09:00 - 09:00

919 - Lung resections with a curved Radial Reload stapler

M. El Saegh, A. Petsa, J. Dunning; Middlesbrough/UK

09:00 - 09:00

920 - VATS lobectomy for a bronchiectatic lobe

M. El Saegh, J. Dunning; Middlesbrough/UK

09:00 - 09:00

921 - Robotically assisted pulmonary lobectomy: first UK experience with the DaVinci system

R. Slight¹, M. Bernstein¹, S. Stamenkovic², S. Clark¹, J. Forty¹: ¹Newcastle Upon Tyne/UK, ²Newcastle-Upon-tyne/UK

09:00 - 09:00

922 - VATS plication of the diaphragm

M. El Saegh, J. Dunning; Middlesbrough/UK

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Satellite Meetings

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413

10:30 - 17:00

ACSA ABM*Exchange 4*

352

12:00 - 14:00

**Medical Student Lunch - CT Surgery -
Is it for you?***Exchange 8*

411

12:30 - 13:30

Nurse Competency Meeting*Exchange 9*

355

12:30 - 15:45

Congenital CRG Working Group*Exchange 10*

416

14:00 - 15:00

Student Engagement Planning Group*Exchange 8*

401

14:30 - 16:30

NCHDA Stakeholders Meeting*Exchange 9*

420

16:30-18:00

WSCTS 2015 Organising Committee Meeting*Exchange 8*

363

07:15 - 09:00

Scott Prens Breakfast Symposium*Exchange 11*

354

08:30 - 10:30

Thoracic CRG Working Group*Exchange 8*

412

09:00 - 10:00

Ionescu Meeting*Exchange 4*

399

09:00 - 17:00

**Society & College of Perfusion
Scientists Meeting***Exchange 5*

379

09:30 - 10:30

Cardiothoracic Trainees Research Collaborative*Exchange 11*

419

10:30 - 12:30

NCHDA (NICOR) Steering Committee*Exchange 10*

421

10:30 - 12:30

Scott Prens – BUPA Nursing Scheme*Charter 4 – David Geldard Room*

402

10:30 - 12:30

Thoracic Data Committee*Exchange 9*

Thursday March 26

Medical Student Meeting

12:00 - 14:00

Medical Student Lunch - Cardiothoracic Surgery - Is it for you?

Exchange 8

Moderation: J. Ferguson¹, A. Coonar², J. Lodhia³, J. Unsworth-White⁴: ¹Middlesbrough/UK, ²Cambridge/UK, ³Hull/UK, ⁴Plymouth/UK

12:00 - 12:10

961 - A Career in Cardiac Surgery

C. Rajakaruna, Bristol/UK

12:10 - 12:20

962 - A Career in Thoracic Surgery

A. Coonar, Cambridge/UK

12:20 - 12:30

963 - Winning hearts and minds: operative anatomy and surgical skills workshops attract early-year medical students to a career in cardiothoracic surgery

J. George¹, T. Combellack², A. Lopez-Marco², U. Aslam¹, Y. Ahmed¹, P. Nanjaiah², A. Youhana¹, P. Kumar¹: ¹Swansea/UK, ²Cardiff/UK

12:30 - 12:40

964 - The impact of junior surgical jobs in cardiothoracic surgery on career choices

N. Burnside, J. McGuigan; Belfast/UK

12:40 - 12:50

965 - Medical school teaching of cardiothoracic surgery

N. Burnside, J. McGuigan; Belfast/UK

12:50 - 13:05

966 - Medical Student Career Day

A. Bridgeman, Bristol/UK

13:05 - 13:20

967 - The Shape of Training

J. Unsworth-White, Plymouth/UK

13:20 - 13:40

968 - Electives for Medical Students

J. Ferguson, Middlesbrough/UK

Plenary Sessions

Friday March 27



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09:00 - 11:00

Teamworking & Efficiency*Auditorium*Moderation: J. Van Besouw¹, N. Gavin², A. Graham³, G. Berg⁴:¹London/UK, ²Blackpool/UK, ³Belfast/UK, ⁴Glasgow/UK

09:00 - 09:10

241 - Enhanced recovery in Cardiac surgeryG. Hardman¹, W. Simpson², A. Bose², A. Walker², H. Saunders²: ¹Hull/UK, ²Blackpool/UK

09:10 - 09:25

242 - Same day admission for cardiac surgery: Safety and outcomes?

B. Williams, J. Zacharias, B. McAlea, P. Saravanan; Blackpool/UK

09:25 - 09:35

243 - Predictors of failure in Fast-Track cardiac surgery

P. Youssefi, D. Timbrell, O. Valencia, P. Gregory, C. Vlachou, M. Jahangiri, M. Edsell; London/UK

09:35 - 09:50

244 - The contribution of the anaesthetist to risk-adjusted mortality and length-of-stay after cardiac surgery

A. Klein, O. Papachristofi; Cambridge/UK

09:50 - 10:00

245 - Clinical and resource implications of cancelled operations in cardiac surgery

O. Rashwan, C. Von Oppell, I. Deglurkar; Cardiff/UK

10:00 - 10:10

246 - Distractions in cardiac surgery - do interruptions matter?L.P. Ong¹, S. Chan¹, N. Collins¹, S. Kuravelli¹, S. Clark²: ¹Newcastle/UK, ²Newcastle Upon Tyne/UK

10:10 - 10:30

247 - Teamworking & human factors: an army perspective

S. Mercer, Liverpool/UK

10:30 - 10:50

248 - Teamworking and efficiency in cardiac surgery

D. Whitaker, Manchester/UK

206

11:45 - 13:30

Outcomes in Cardiac Surgery Including Innovation in an Era of Clinician Specific Data*Auditorium*Moderation: T. Graham¹, B. Bridgewater², S. Nashef³: ¹Birmingham/UK, ²Manchester/UK, ³Papworth/UK

11:45 - 12:05

249 - Innovation in an era of Clinician Specific Data - Tudor Edwards Lecture

J. Pepper, London/UK

12:05 - 12:15

250 - Recruitment to UK Cardiothoracic Surgery in the era of public outcome reportingS. Westaby¹, K. Baig², R. De Silva³, J. Unsworth-White⁴, J. Pepper²: ¹Oxford/UK, ²London/UK, ³Cambridge/UK, ⁴Plymouth/UK

12:15 - 12:25

251 - Patients survey of their awareness and use of information published on the SCTS website on surgeon's and unit specific mortality results

M. Sherif, G. Chetty; Cardiff/UK

12:25 - 12:35

252 - Disparity in left ventricular function classification: consequences for risk stratificationR. White¹, M. Hasan²: ¹Middlesbrough/UK, ²London/UK

12:35 - 12:45

253 - A review of a validation process for cardiac surgical data returns to the SCTS

M. Anderson, N. Cartwright, N. Kirk, O. Folukoya, G. Cooper; Sheffield/UK

12:45 - 12:55

254 - Generic tools for risk stratification in cardiac surgery

B. Kirmani, C. Quarterman, M. Shaw, S. Jones, R. Williams, S. Agarwal; Liverpool/UK

12:55 - 13:05

255 - Results from National Survey of Surgeon Specific MortalityO. Jarral¹, K. Baig¹, T. Athanasiou¹, S. Westaby²: ¹London/UK, ²Oxford/UK

13:05 - 13:25

256 - Cardiac Surgery Activity

B. Bridgewater, Manchester/UK

Friday March 27

Plenary Session

14:15 - 16:00

Graham Venn Seminar

Training and Service Provision: Managing the Gap

Auditorium

Moderation: N. O'Keeffe¹, P. Nightingale², S. Nashef³, C. Young⁴:

¹Manchester/UK, ²UK, ³Papworth/UK, ⁴London/UK

14:15 - 14:20

257 - Opening remarks - Graham Venn

C. Young, London/UK

14:20 - 14:35

258 - The Graham Venn Lecture: Service versus Training - A Surgical perspective

S. Barnard, Newcastle/UK

14:35 - 14:50

259 - The shape of training - Anaesthetic perspective

J. Van Besouw, London/UK

14:50 - 15:05

260 - Adult Critical Care: Does one size fit all?

J. Eddleston, Manchester/UK

15:05 - 15:20

261 - Advanced Critical Care Practitioners

S. Gardner, Middlesbrough/UK

15:20 - 15:35

262 - The role of the CRGs

D. Keenan, Manchester/UK

15:35 - 15:45

263 - Case definitions - the final answer

C. Burdett, J. Dunning; Middlesbrough/UK



Adult Cardiac Surgery

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09:00 - 11:00

Coronary Artery Surgery

Charter 2

Moderation: M. Lemma¹, A. Chukwuemeka², L. Balacumaraswami³:
¹Milan/IT, ²London/UK, ³Stoke-On-trent/UK

09:00 - 09:10

346 - Have the ESC/EACTS guidelines on myocardial revascularisation changed the management of patients undergoing urgent PCI for non-ST elevation acute coronary syndrome?

D. Balmforth, M. Yates, R. Uppal, M. Jahangiri; London/UK

09:10 - 09:20

347 - What is the ideal arterial revascularisation strategy for three-vessel coronary artery disease?

A. Kourliouros¹, U. Benedetto², F. De Robertis¹, T. Bahrami², J. Gaer¹, M. Amrani², S. Raja²: ¹Harefield/UK, ²London/UK

09:20 - 09:30

348 - Ultrasound mapping of long saphenous vein to improve patient outcomes in coronary artery surgery

R. White, M. Van-Loo; Middlesbrough/UK

09:30 - 09:40

349 - Endoscopic vein harvest in elderly patients (more than 70 years of age) does not reduce postoperative stay: propensity-matched comparison with open vein harvest

V. Srivastava, M. Purohit, S. Power, L. Howell, A. Bose, M. Bittar, J. Zacharias; Blackpool/UK

09:40 - 09:50

350 - Insights into flow hemodynamics in externally stented saphenous vein grafts and its relation to the development of intimal hyperplasia

T. Meirson¹, E. Orion¹, I. Avrahami², C. Di Mario³, C. Webb³, K. Channon⁴, N. Patel⁴, D. Taggart⁴: ¹Tel Aviv/IL, ²Ariel/IL, ³London/UK, ⁴Oxford/UK

09:50 - 10:00

351 - A randomized trial of external stenting for saphenous vein grafts in coronary artery bypass grafting: The Venous External Support Trial (VEST)

E. Orion¹, Y. Ben Gal¹, B. Lees², N. Patel³, C. Webb², S. Rehman³, A. Desouza², R. Yadav², F. De Robertis², M. Dalby², A. Banning³, K. Channon³, C. Di Mario², D. Taggart³: ¹Tel Aviv/IL, ²London/UK, ³Oxford/UK

10:00 - 10:10

352 - MicroRNAs as potential biomarkers of myocardial ischaemia in coronary surgery

H. Hosamuddin¹, A. Abas Laftha¹, F. Fiorentino¹, B. Reeves², N. Patel¹, A. Mumford², G. Angelini¹, C. Emanueli¹: ¹London/UK, ²Bristol/UK

10:10 - 10:20

353 - Complex coronary grafting - is off pump Cabg a viable option?

K. Sarkar, A. Datta, P. Narayan; Kolkata/IN

10:20 - 10:40

354 - Coronary Surgery - Insights

J. Sabik, Cleveland/US

207

11:45 - 13:15

Aortic Root Surgery

Charter 2

Moderation: M. Petrou¹, J. Elefteriades²: ¹Oxford/UK, ²New Haven, CT/US

11:45 - 11:55

355 - Patients' values and patient reported outcomes (PROs) may differ from surgeons' assumptions: an example from aortic root surgery for congenitally determined aneurysms

J. Fosbraey, T. Treasure, K. Tchanturia; London/UK

11:55 - 12:05

356 - Crossing the boundaries for aortic Valve Sparing Root Replacement

O. Nawaytou, I. Nenekidis, S. Das De, M. Iafrancesco, A. Ranasinghe, J. Mascaro; Birmingham/UK

12:05 - 12:15

357 - A systematic review of valve sparing aortic root replacement compared to composite root replacement

M. Fok, M. Knipe, A. Abdelnour, M. Bashir; Liverpool/UK

12:15 - 12:30

358 - Why reimplantation is better than remodelling for valve-sparing root replacement

C. Miller, Palo Alto/US

12:30 - 12:40

359 - Personalised external aortic root support (PEARS): 5-10 year completed follow-up in the first twenty patients

J. Pepper¹, C. Izgi¹, M. Petrou², R. Mohiaddin¹, M. Rubens¹, T. Treasure¹: ¹London/UK, ²Oxford/UK

12:40 - 12:50

360 - A systematic review of outcomes of composite mechanical root replacement compared to composite biological root replacement

M. Fok, H. Mahmood, M. Bautista, S.S. Poon, M. Ahmed, M. Bashir; Liverpool/UK

12:50 - 13:05

361 - Bicuspid Aortopathy - when should we operate?

J. Elefteriades, New Haven/US

13:05 - 13:15

362 - Root procedures after initial aortic root preservation in acute type A aortic dissection: early results form the multicenter REAAD database

A. Dell'Aquila¹, G. Santarpino², K. Fattouch³, G. Speziale⁴, G. Conciatrè⁵, T. Fischlein², S. Martens¹, T. Regesta⁶, H. Deschka¹:
¹Münster/DE, ²Nurnberg/DE, ³Palermo/IT, ⁴Bari/IT, ⁵Massa/IT, ⁶Genova/IT

214

14:15 - 16:15

Bob Bonser Symposium Aortic Surgery*Charter 2*

Moderation: A. Bryan¹, C. Miller², J. Eleftheriades³, J. Kendall⁴:
¹Bristol/UK, ²Palo Alto/US, ³New Haven, CT/US, ⁴Liverpool/UK

14:15 - 14:25

363 - Surgical repair of the descending and thoracoabdominal aorta in patients with connective tissue disorders

M. Iafrancesco, A. Ranasinghe, I. McCafferty, P. Riley, M. Claridge, D. Adam, J. Mascaró; Birmingham/UK

14:25 - 14:35

364 - Sporadic Ascending Aortic Aneurysm: is it the diameter of Ascending Aorta a good criteria for surgical indication?

C. Pisano, C.R. Balistreri, C. Palmeri, V. Argano, G. Ruvolo; Palermo/IT

14:35 - 14:45

365 - Is the Penn classification a valid method to predict in-hospital mortality and outcomes after surgery in acute type A aortic dissection patients?

C. Pisano, C.R. Balistreri, V. Argano, C. Palmeri, G. Ruvolo; Palermo/IT

14:45 - 14:55

366 - Management of intramural haematoma of the aorta: 8 years tertiary centre experience

J. Bilak, S. Asopa, E. Mohamed-Ahmed, M. Soni, J. Unsworth-White, J. Kuo; Plymouth/UK

14:55 - 15:05

367 - Axillary versus femoral arterial cannulation in type A acute aortic dissection. Evidence from a meta-analysis of comparative studies and adjusted risk estimates

U. Benedetto¹, H. Mohamed², M. Petrou²: ¹London/UK, ²Oxford/UK

15:05 - 15:15

368 - Frozen Elephant Trunk with Thoraflex™ hybrid prosthesis: early results of the prospective THORA-FET registry

L. Weltert¹, S. Nardella², A. Bellisario¹, C. Dominici², G. Santise², G. Mariscalco³, D. Maselli², R. De Paulis¹: ¹Rome/IT, ²Catanzaro/IT, ³Leicester/UK

15:15 - 15:25

369 - Reoperations in aortic aneurysm surgery - single centre experience with focus on outcomes and survival

M. Bashir¹, M. Shaw¹, H. Bilal², M. Fok¹, M. Kuduvalli¹, A. Oo¹:
¹Liverpool/UK, ²Manchester/UK

15:25 - 15:45

370 - Innovations in treatment of descending aortic pathology

T. Yan, Liverpool/UK

15:45 - 15:55

371 - Blood product requirements during acute type A aortic dissection repairs

M. John, C. Verney, M. Puchakayala; London/UK

15:55 - 16:05

372 - Is there any benefit of neuromonitoring during descending and thoracoabdominal aortic aneurysm repair?

M. Fok, F. Jafarzadeh, E. Sancho, D. Abello, C. Howard, T. Kennedy, M. Shaw, M. Bashir; Liverpool/UK

16:05 - 16:15

373 - National outcomes of thoracic aortic aneurysm repair in Marfan syndrome patients

M. Bashir¹, H. Bilal², M. Shaw¹, G. Hickey², S. Grant², M. Fok¹, B. Bridgewater², A. Oo¹: ¹Liverpool/UK, ²Manchester/UK

Friday March 27

Adult Cardiac Surgery

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Friday March 27



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09:00 - 11:00

General Thoracic Surgery

Charter 3

Moderation: M. Shackcloth¹, A. Kirk²: ¹Liverpool/UK, ²Glasgow/UK

09:00 - 09:10

433 - A 20 year review of Pectus Surgery at Birmingham Heartlands Hospital

T. Tikka, R. Steyn, P. Rajesh, M. Kalkat, E. Bishay, B. Naidu; Birmingham/UK

09:10 - 09:20

434 - Surgical correction of pectus carinatum reverses dynamic hyperinflation and improves exercise capacity?

G. Elshafie, P. Kumar, P. Rajesh, R. Steyn, E. Bishay, M. Kalkat, B. Naidu; Birmingham/UK

09:20 - 09:30

435 - Cardiopulmonary insufficiency in adolescent patients with Pectus Excavatum: more than a cosmetic condition

K. Mazhar, T. Saunders, I. Cliff, C. Satur; Stoke On Trent/UK

09:30 - 09:40

436 - Brain metastases are uncommon in clinical Stage 1 NSCLC treated radically by VATS lobectomy, making routine brain imaging unnecessary

K. McManus, Belfast/UK

09:40 - 09:50

437 - An audit of brain imaging in staging of NSCLC patients with nodal disease who are eligible for radical treatment

T. Combella, P. Vaughan, H. Fallouh, M. Kornaszewska; Cardiff/UK

09:50 - 10:00

438 - Open Window Thoracostomy (OWT) in the management of chronic tuberculous empyema with bronchopleural fistula a retrospective study

S. Sharma, Swansea/UK

10:00 - 10:10

439 - Surgical management of second primary lung carcinoma: The case for meticulous follow-upR. Attia¹, R. Burcombe², S. Sharma³, B. Prathiba³, J. Pilling¹: ¹London/UK, ²Maidstone/UK, ³Ashford/UK

10:10 - 10:20

440 - Oesophageal perforation in Europe – A multinational study using the Pittsburgh oesophageal perforation severity scoring systemM. Schweigert¹, H. Santos Sousa², N. Solymosi³, A. Yankulov⁴, M. Jiménez Fernández⁵, R. Beattie⁶, C. Rabl⁷, A. Dubecz⁸, D. Ofner⁷, J. McGuigan⁶, H. Stein⁸: ¹Dresden/DE, ²Porto/PT, ³Budapest/HU, ⁴Plovdiv/BG, ⁵Madrid/ES, ⁶Belfast/UK, ⁷Salzburg/AT, ⁸Nuremberg/DE

10:20 - 10:30

441 - Investigation of the role of STAT3 signalling in obesity-associated adenocarcinoma of the oesophagus

K. O' Sullivan, M.C. Cathcart, N. Gilmartin, A. Cannon, G. Moore, J. Michaelson, E. O'Regan, J. Lysaght, J. O'Sullivan, J. Reynolds; Dublin/IE

10:30 - 10:40

442 - Pro-collagen peptide III as a predictor of lung injury following lung resection

A. Arthur, P. McCall, A. Macfie, L. Jolly, J. Kinsella, A. Kirk, B. Shelley; Glasgow/UK

10:40 - 11:00

443 - Chest wall surgery - current state of art

P. Dartevelle, Paris/FR

212

11:45 - 13:15

Improving Outcomes in Thoracic Surgery

Charter 3

Moderation: K. Rammohan¹, J.E. King², M. Shackcloth³: ¹Cardiff/UK, ²London/UK, ³Liverpool/UK

11:45 - 11:55

444 - Lung cancer surgery outcomes in the West of Scotland

M. Asif, J. Butler, I. Colquhoun, M. Klimatsidas, A. Kirk; Glasgow/UK

11:55 - 12:05

445 - Cost comparison of lung volume reduction surgery and bronchoscopic lung volume reduction

S. Love, J. McShane, G. Raman, N. Mediratta, M. Poullis, J. Asante-Siaw, S. Woolley, R. Page, K. Mohan, M. Shackcloth; Liverpool/UK

12:05 - 12:15

446 - Outcome of surgery versus radiotherapy after induction treatment in patients with N2 disease: systematic review and meta-analysis of randomised trialsP. McElnay¹, A. Choong², E. Jordan³, F. Song⁴, E. Lim²: ¹Newcastle Upon Tyne/UK, ²London/UK, ³Bristol/UK, ⁴Norwich/UK

12:15 - 12:25

447 - The fate of patients turned down for lung cancer surgery in a high resection rate unitT. Ni hici¹, J. Mitchell², A. Moore², N. Rahman², E. Belcher²: ¹Cork/IE, ²Oxford/UK

12:25 - 12:35

448 - Are we over-extending in the surgical treatment of mesothelioma? – The tale of the unnecessary phrenectomyA. Sharkey¹, I. Chauhan², A. Paik², R. Vaja², A. Nakas², D. Waller²: ¹Sheffield/UK, ²Leicester/UK

Friday March 27

Thoracic Surgery

12:35 - 12:45

449 - Is there evidence of benefit from repeated pulmonary metastasectomy?

T. Treasure¹, T. Mineo², V. Ambrogi², F. Fiorentino¹: ¹London/UK, ²Rome/IT

12:45 - 12:55

450 - Does VATS lobectomy decrease postoperative pleural effusion: a case matched comparison with thoracotomy

R. Hristova, C. Pompili, K. Papagiannopoulos, R. Milton, N. Chaudhuri, E. Kefaloyannis, A. Brunelli; Leeds/UK

12:55 - 13:05

451 - Evolution of Robotic Surgery

F. Melfi, Pisa/IT

CT Forum

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09:00 - 11:00

CT Forum - Thoracic Surgery

Charter 4 - David Geldard Room

Moderation: D. Southey¹, S. Kendall², D. Lizotte³; ¹Wolverhampton/UK, ²Middlesbrough/UK, ³Harrisonburg, VA/US

09:00 - 09:15

524 - Thoracic unit ward round - a new structured approach

L. Nesbitt, C. Blackwood; Glasgow/UK

09:15 - 09:30

525 - Negotiated work based learning (NWBL) to up-skill an advanced nurse practitioner (ANP) to interpret plain film chest radiographs

A. Walthew, J. Bridston-Walton, D. Homan, J. Asante-Siaw, S. Woolley, N. Mediratta, M. Shackcloth, M. Poullis, R. Page; Liverpool/UK

09:30 - 09:45

526 - Day of surgery admission: An effective efficiency measure?

N. Dodman, K. Hewitt, K. Rammohan; Manchester/UK

09:45 - 10:00

527 - Postoperative pulmonary complication following major chest wall resection: the Birmingham Heartlands experience

H. Khalil, P. Agostini, K. Adams, P. Rajesh, R. Steyn, E. Bishay, B. Naidu, M. Kalkat; Birmingham/UK

10:00 - 10:15

528 - Is physiotherapy routinely required following video-assisted thoracoscopic surgery?

P. Agostini, K. Adams, M. Kalkat, P. Rajesh, R. Steyn, B. Naidu, E. Bishay; Birmingham/UK

10:15 - 10:30

529 - Improving the management of palliative patients with intra- pleural chest drains

D. Homan, J. Asante-Siaw, R. Page, S. Woolley, M. Shackcloth, M. Poullis, N. Mediratta, A. Walthew; Liverpool/UK

10:30 - 10:45

530 - Patient experience of an Advanced Nurse Practitioner led chest drain service

A. Walthew, M. Flynn, S. Woolley, M. Shackcloth, J. Asante-Siaw, R. Page, N. Mediratta, M. Poullis, D. Homan; Liverpool/UK

10:45 - 11:00

531 - Pectus information website has significantly improved access to care and patient satisfaction

T. Tikka, G. Daniel, P. Agostini, A. Kerr, G. Manion, R. Steyn, P. Rajesh, M. Kalkat, E. Bishay, B. Naidu; Birmingham/UK

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11:45 - 13:15

CT Forum - Patient Experience

Charter 4 - David Geldard Room

Moderation: J. Ley¹, J. Dunning², J. Djordjevic³; ¹San Francisco/US, ²Middlesbrough/UK, ³Oxford/UK

11:45 - 13:15

532 - Patient Partnership in Decision Making' the Patient, the Surgeon, The Anaesthetist and the Nurse

The CT Forum organisers would like to thank all participants in this session for their valuable insight into the cardiothoracic experience.

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14:15 - 16:30

CT Forum - Surgical Care Practitioners, Theatres & SSI's

Charter 4 - David Geldard Room

Moderation: E. Hope¹, D. Quinn², C. Birkett²; ¹Southampton/UK, ²Birmingham/UK

14:15 - 14:30

533 - The benefits of hosting a regular national VATS training course for thoracic theatre nurses - a personal account

A. Templin, Southampton/UK

14:30 - 14:45

534 - Surgical care practitioners experience of camera piloting for a VAT lobectomy

R. Thomson, M. Read, M. Loubani; Hull/UK

14:45 - 15:00

535 - Theatre traffic and patient safety

J. Mead¹, G. Hardman², A. Walker³; ¹Lancaster/UK, ²Hull/UK, ³Blackpool/UK

15:00 - 15:15

536 - Work-related neck and back pain on surgical care practitioners in cardiothoracic surgery - a multicentre survey

B. Krishnamoorthy¹, N. Devan¹, A. Nasir², W. Critchley¹, T. Rankin³, J. Djordjevic⁴, P. Waterworth¹, A. Caress¹; ¹Manchester/UK, ²Blackpool/UK, ³Plymouth/UK, ⁴Basildon/UK

15:15 - 15:30

537 - Preliminary findings: targeting CABG patients at high risk of surgical site infection

M. Rochon, C. Morais, F. Mahiout, C. Papandreou, M. Cannoletta, J. Jarman, R. Yadav, A. Desouza; London/UK

Friday March 27

CT Forum

15:30 - 15:45

538 - A randomised trial comparing normal monofilament knotted sutures with bidirectional barbed knotless sutures for donor leg wound closure in coronary artery bypass surgery

B. Krishnamoorthy¹, J. Nair¹, N. Devan¹, W. Critchley¹, A. Nasir², J. Barnard¹, B. Isalska¹, R. Venkateswaran¹, J. Fildes¹, N. Yonan¹:
¹Manchester/UK, ²Blackpool/UK

15:45 - 16:00

539 - Sternal wound photo at discharge - improving information for the patient and community links

M. Rochon, A. Jakeman, I. Atti, B. Persaud-Rai, D. Williams, L. Gurusamy; London/UK

16:00 - 16:15

540 - Cardiac surgical wounds - Are we underestimating their impact on recovery?

N. Dodman, K. Hewitt, R. Venkateswaran; Manchester/UK

16:15 - 16:30

541 - Formalisation of the cardiothoracic surgical care practitioner role in the UK: one year follow up

J. Djordjevic¹, I. Konstantins², S. Ibrahim³, N. Sharma³, C. Birkett⁴, T. Rankin⁵, A. Marshall⁶, S. Bryant⁷, B. Krishnamoorthy⁸: ¹Basildon/UK, ²Papworth/UK, ³London/UK, ⁴Birmingham/UK, ⁵Plymouth/UK, ⁶Liverpool/UK, ⁷Cambridge/UK, ⁸Manchester/UK

ACTA

Friday March 27



Society for
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Association of
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SCTS/ACTA
Joint Annual Meeting
&
Cardiothoracic Forum

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09:00 - 10:45

Management of Right Ventricular Dysfunction

Exchange 11

Moderation: J. Bence¹, S.R. Bennett², P. Bradley³: ¹Leicester/UK, ²Jeddah/SA, ³Sheffield/UK

09:00 - 09:10

622 - Isolated Tricuspid Valve Surgery. Failure of its principle? Mid-term Outcome Analysis

G. Lucchese¹, I. Cummings¹, L. Oo¹, V. Avlonitis², C. Blauth¹: ¹London/UK, ²Bristol/UK

09:10 - 09:20

623 - Long term outcome of isolated tricuspid valve replacement: Single centre experience

S. Datta, A. AbouSteit, R. Hasan; Manchester/UK

09:20 - 09:40

624 - Physiology of the Right Heart

A. Denault, Montreal/CA

09:40 - 10:00

625 - Alternative options for right heart dysfunction

S. Thorne, Birmingham/UK

10:00 - 10:10

626 - Long-term prognosis of severe pre-operative pulmonary hypertension

P. Ariyaratnam¹, A. Morice², M. Loubani²: ¹Cottingham/UK, ²Hull/UK

10:10 - 10:30

627 - Perioperative management of pulmonary hypertension

D. Greenhalgh, Manchester/UK

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11:45 - 13:45

Organ Protection - Heart and Kidneys

Exchange 11

Moderation: A. Sheikh¹, M. Sander²: ¹London/UK, ²Berlin/DE

11:45 - 11:55

628 - Acute kidney injury after cardiac surgery and the utility of the urea creatinine ratio

J. Sidhu, Y. Iqbal, G. Babu, M. Curtis, R. Smith, V. Sivaraman; London/UK

11:55 - 12:05

629 - Pulsatile cardiopulmonary bypass may reduce the need for haemofiltration in moderate to high risk patients undergoing cardiac surgery

S. Farid, H. Povey, S. Anderson, S. Nashef, Y. Abu-Omar; Papworth/UK

12:05 - 12:25

630 - Kidney protection and anaemia

S. Bennett, Jeddah/SA

12:25 - 12:35

631 - The role of key regulators of cardiac metabolism on low cardiac output episodes during cardiac surgery in left ventricular hypertrophy

E. Senanayake, N. Howell, D. Tennant, D. Pagano; Birmingham/UK

12:35 - 12:45

632 - The combination of antegrade and retrograde cardioplegia reduces peri-operative myocardial injury in patients undergoing elective aortic valve replacement

L. Candilio, S. Khan, A. Malik, M. Barnard, C. Di Salvo, D. Lawrence, M. Hayward, J. Yap, A. Sheikh, S. Kolvekar, D. Hausenloy, D. Yellon, N. Roberts; London/UK

12:45 - 13:05

633 - Guest Lecture - "Unbreak my Heart" - Myocardial Protection

D. Chambers, London/UK

13:05 - 13:25

634 - Splanchnic protection - strategies

V. Lomivorotov, Novosibirsk/RU

13:25 - 13:40

635 - Patient Partnership in Decision Making' the Patient, the Surgeon, The Anaesthetist and the Nurse

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Congenital

Friday March 27



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Association of
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SCTS/ACTA
Joint Annual Meeting
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09:00 - 11:00

Left Ventricle Outflow: Too Big and Too Small*Exchange 6/7*Moderation: M. Stokes¹, K. Van Doorn²: ¹Birmingham/UK, ²Leeds/UK

09:00 - 09:30

751 - Bicuspid Aortic Valve and Aortopathy

D. Milewicz, Houston/US

09:30 - 10:00

752 - Management of the dilated Aortic Root in children

D. Cameron, Baltimore/US

10:00 - 10:30

753 - The Ross Operation: Is it standing the test of time?

A. Hasan, Newcastle/UK

10:30 - 11:00

754 - Aortic Valve Disease in Children: Surgical Options

J. Kupferschmid, San Antonio/US

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11:45 - 13:15

Congenital Abstracts*Exchange 6/7*Moderation: T.J. Jones¹, A. Durward²: ¹Birmingham/UK, ²London/UK

11:45 - 11:55

755 - Surgical outcomes following repair of anomalous origin of the coronary artery from the pulmonary artery: results from a national auditD. Fudulu¹, D. Dorobantu¹, M. Taghavi Azar Sharabiani², G. Angelini², M. Caputo¹, A. Parry¹, S. Stoica¹: ¹Bristol/UK, ²London/UK

11:55 - 12:05

756 - Early bidirectional Glenn can be performed safely and efficiently in young infants

Q. Chen, S. Stoica, M. Caputo, R. Martin, A. Parry; Bristol/UK

12:05 - 12:15

757 - The effects of physiologic parameters on pulmonary blood flow after the bidirectional superior cavopulmonary shunt

A. Parry, R. Martin, A. Wolf; Bristol/UK

12:15 - 12:25

758 - Early reoperations in a 5-year national cohort of congenital heart disease patientsF. Fiorentino¹, J. Stickley², R. Pandey³, G. Angelini¹, D. Barron², S. Stoica³: ¹London/UK, ²Birmingham/UK, ³Bristol/UK

12:25 - 12:35

759 - Repair of congenital cardiac defects using porcine extracellular matrix (CorMatrix™): single centre experienceA. Boulemden¹, G. Pelella², S. Speggorin¹, G. Peek¹, A. Lotto¹: ¹Leicester/UK, ²Qp/UK

12:35 - 12:45

760 - Focus on cellular and molecular mechanisms of both, protection and repair in BAV vs. TAV patients as novel tools for personalized treatments

C.R. Balistreri, C. Pisano, G. Ruvolo; Palermo/IT

12:45 - 12:55

761 - Predicted Mortality for Congenital Heart Surgery comparing PRAIS to RACHS-1 and the basic Aristotle score: where are the gaps?

C. Toolan, G. Pelella, R. Dhannapuneni, P. Venugopal, R. Guerrero; Liverpool/UK

12:55 - 13:05

762 - Adult congenital re-entry complications and mortality following repeat sternotomyJ. Whiteley¹, G. Beattie², G. Berg²: ¹Liverpool/UK, ²Glasgow/UK

13:05 - 13:15

763 - Analysis of ECMO outcomes following the introduction of a formal ECMO service delivery programme

C. Toolan, M. Bowes, C. Jones, M. Horan, R. Guerrero, P. Venugopal; Liverpool/UK

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14:15 - 16:15

Congenital Tracheal Surgery*Exchange 6/7*Moderation: A. Lotto¹, S. Haynes²: ¹Leicester/UK, ²Newcastle/UK

14:15 - 15:15

764 - The National Tracheal Programme – experiences to date

M. Elliot, R. Hewitt, A. Goldman; London/UK

15:15 - 15:45

765 - Tracheal services in UK

D. Barron, Birmingham/UK

Satellite Sessions

Friday March 27



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In Great Britain & Ireland



Association of
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Anaesthetists

SCTS/ACTA
Joint Annual Meeting
&
Cardiothoracic Forum

417

08:00 - 09:00

SCTS Annual Business Meeting*Auditorium*

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08:00 - 09:00

ACTA Annual Business Meeting*Exchange 11*

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09:00 - 11:00

Education Sub-Committee Meeting*Exchange 9*

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10:30 - 14:15

Database Managers Meeting*Exchange 10*

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11:00 - 12:00

Ethicon/J&J Meeting*Exchange 4*

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12:00 - 14:00

Ethicon Scholarships*Exchange 9*

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13:15 - 14:15

Congenital Sub-Committee*Exchange 6/7*

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13:15 - 14:15

AHP Scholarship Interviews*Exchange 4*

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14:15 - 16:00

Database Managers Meeting*Exchange 10*

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16:30 - 18:30

Board of Representatives*Auditorium***NACSA Database
Managers Meeting**

Friday 27th March 10:30hrs to 14:15hrs

Agenda

Moderator - Philip Kimberley

- 10:30 Introduction - Ben Bridgewater
- 10:35 This Years' Events – David Jenkins
- 11:00 The Data Validation Process – from a DBM perspective
- 11:25 New Tools Demonstration – Ben Bridgewater/
Richard Berriman
- 11:40 Data Set Review – Ben Bridgewater
- 12:00 General Discussion
- 12:15 Database Managers Closed Session
- 14:00 Summing Up – Philip Kimberley
- 14:15 Meeting Close

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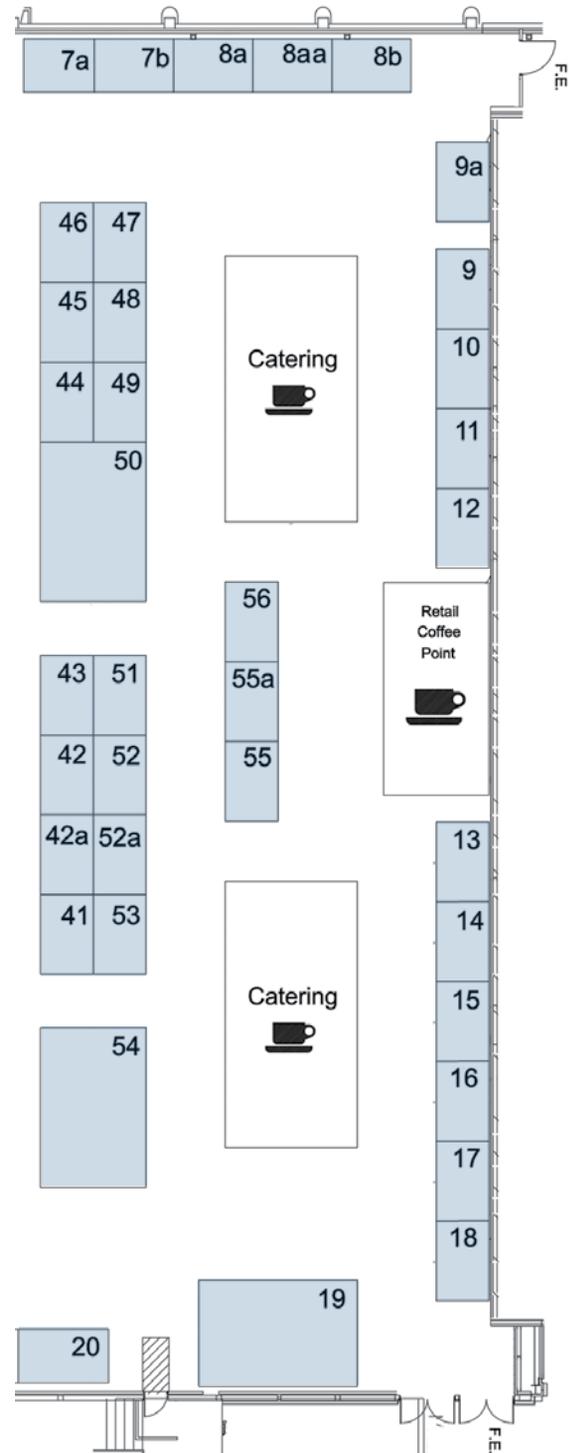
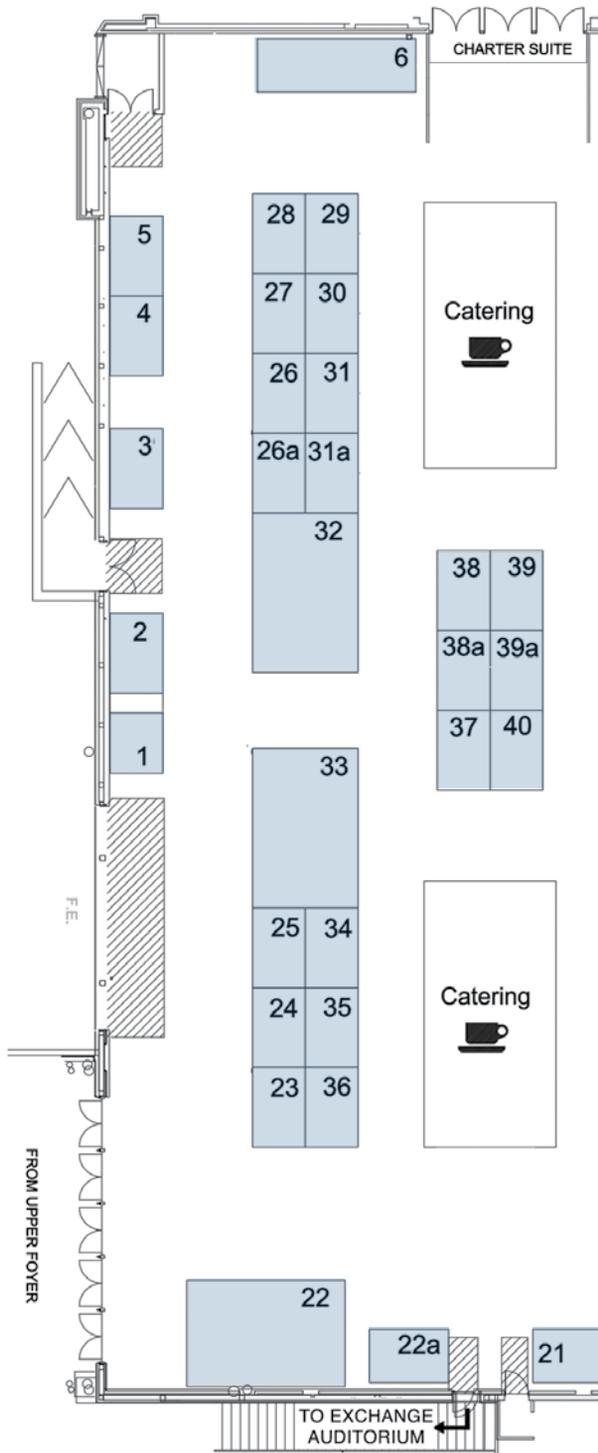
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39	Advancis Surgical
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Upper Exchange Foyer	Wisepress

Exhibition Plan

Exchange Hall, Manchester Central



ACSA

Exchange Foyer

The **Association of Cardiothoracic Surgical Assistants (ACSA)** is a



professional body formed in 1997 in the United Kingdom. ACSA represents a body of non-medical practitioners: Surgical Care Practitioner, working in cardiothoracic surgery, performing a range of skilled interventions. ACSA supports its members by providing educational meetings, discussion forums, and professional advice, have access to a members' forum, archived educational material and members also have access to a dedicated website and generated newsletters. ACSA is affiliated within the Society of Cardiothoracic Surgery, representing members' views and interests within the Society. In conjunction with the Royal College of Surgeons of Edinburgh and the Society of Cardiothoracic Surgery ACSA support in the undertaking of the joint examination for trainee Cardiothoracic Surgical Care Practitioner at the end of 2 year training programme.

Chrissie Birkett - ACSA Secretary/Membership Chair

Contact: Secretary@acsa-web.co.uk

Website: www.acsa-web.co.uk

Advancis Surgical

Stand 39

Hemosep is designed to recover blood spilled during open-heart surgery and concentrate the blood cells for transfusion back to the patient. The process reduces the volume of donor blood required and the problems associated with transfusion reaction.



The device consists of a blood bag, which employs a chemical sponge technology and a mechanical agitator to concentrate blood sucked from the surgical site or drained from the heart-lung machine. The separated cells are then returned to the patient by intravenous transfusion.

Clinical trials carried out in the University of Kırıkkale and the University Hospital in Ankara, Turkey, used Hemosep in over 100 open-heart surgery operations, the device significantly reduced the need for blood transfusions together with preservation of normal clotting mechanisms and a reduction in the inflammatory reaction often encountered after such surgical procedures. Hemosep provides concentrate of all cell species, including the preservation of platelets, WBC, RBC & clotting residuals. It offers a rapid controllable concentration.

Cell populations	Pre Surgery	Post HemoSep	%Change
White Cell Count	6.71 +/- 0.63	13.8 +/- 1.9	105.6
Platelet Count	198636 +/- 31101	192650 +/- 34906	-3.4
Hematocrit	43.5 +/- 1.9	39.45 +/- 2.1	-9.3
Hemoglobin	12.14 +/- 1.51	12.83 +/- 0.85	5.6

Aquilant Endoscopy

Stand 2

Aquilant Endoscopy (formerly known as Imotech Medical) has been providing first class endoscopy equipment and services to the NHS since 1997.



Aquilant fuses friendly, efficient and flexible customer support with the technical excellence of the high definition Fujifilm product to deliver an unrivalled service in the field of endoscopy. Testimony to our quality and success are longstanding relationships with over 130 major UK hospitals.

Aquilant is proud to be the UK's sole distributor of Fujifilm products. Enormous investment by Fujifilm Japan since the 1990s has seen Fujifilm products remain consistently at the cutting edge of endoscope technology. The introduction of the world's first honeycomb Super CCD instruments in 2004 has been followed up with continual improvements, the latest range of endoscopes offer unparalleled true high definition image quality.

The recent addition of the LungPoint® virtual bronchoscopy navigation system is an exciting development. The LungPoint® system provides real-time guidance with Virtual Bronchoscopic Navigation simultaneously showing the live and virtual views and the path to follow, with navigation accuracy of 3mm.

The business has very solid foundations and superb backing from its membership of UDG Healthcare plc, a €2.2 billion company. UDG Healthcare plc employs over 8,000 people in the UK, Ireland, Western Europe and North America. Please come and visit us at the Aquilant Stand for a live demonstration.

Abbott Vascular

Stand 1

Abbott Vascular, a division of Abbott, is a global leader in cardiac and vascular care with market-leading products and an industry-leading pipeline. Headquartered in



Northern California, we are committed to advancing patient care by transforming the treatment of vascular disease through medical device innovations, investments in research and development, and physician training and education.

We offer cutting-edge devices for coronary artery disease, peripheral vascular disease, carotid artery disease and structural heart disease.

UK and Nordics
Abbott Laboratories Ltd
Abbott House
Vanwall Business Park
Vanwall Road
MAIDENHEAD SL6 4XE
www.abbottvascular.com

Baxter

Stand 26

Baxter is a worldwide, diversified healthcare company that is known for applying innovative science and technology to develop speciality therapeutics, medical products and services that save and sustain patients' lives.



B Braun

Stand 42, 43

For over 140 years Aesculap, part of B. Braun Medical Ltd, has been at the cutting edge of surgical instrument design and manufacture. The Aesculap brand is synonymous with producing high quality, precision instruments, used across all specialities within the operating theatre.



The B. Braun ethos of 'Sharing Expertise' extends to surgical instruments, many of which have been designed in conjunction with leading surgeons across the world. Aesculap offer an extensive cardiovascular instrument portfolio including a wide range of high quality precision micro instruments. Available in both traditional stainless steel or lighter titanium, these are designed to provide the cardiac surgeon with delicate yet durable tools that modern surgical techniques demand.

As new surgical procedures evolve, Aesculap is at the forefront of developing innovative instrument solutions to meet these new demands. Our range of Minimum Invasive Valve Surgery Instrumentation and the new **EinsteinVision 3D HD camera system** are the results of such innovation.

To discuss all of your instrumentation requirements, view and handle our extensive range of micro instruments or

try your skills on our MIVS trainer complete with our new **EinsteinVision 3D HD Camera system**, visit the B. Braun Stand at this year's SCTS.

www.bbraun.com
www.surgical-instruments.info

CalMedical

Stand 8B

CalMedical Scotland Ltd is a distribution company offering new technologies to

Cardiothoracic Surgeons in the UK. To introduce these techniques and products we are very focused on training and support as well as offering the highest possible quality and flexibility to service evolving surgical practice.

We are based in Duns in Scotland and are the UK distributors for Biomet Inc (Sternal Fixation, Pectus Repair, Chest Wall Reconstruction), nContact Inc (Hybrid AF ablation), Cardiamed Ltd (Mechanical Valves), Gunze Ltd (Reinforcement for Lung Surgery), AutoTissue GmbH (Tissue Patches and Valves) and Starch Medical (Seal Foam Haemostat)



Cardiothoracic Advanced Life Support

Stand 28

STOP PRESS: We are in the process of setting up an e-learning module which will streamline entry into the course and allow for easy recertification.



This highly innovative 2-day course teaches all aspects of the treatment of critically-ill patients post-cardiothoracic surgery. The course features lectures and a manual but the emphasis is on practical training. A mock-up ICU with manikins and theatre equipment is used for cardiac-arrest training, and for the critically-ill surgical patient, manikins with laptop-simulated monitors and one-to-one training is used. We also feature hands-on IABP training, tracheostomy, airway and pacing emergencies, CXR, ECG and blood gas interpretation.

This course is intended for both doctors and nursing staff interested or likely to be involved in the care of the critically ill patient after cardiac surgery. CICU and ward nurses, surgical assistants, nurse practitioners, SHOs and junior registrars have all benefited from attendance on our previous courses. The certificate achieved at the end of the course is recognised by the EACTS, RCS and ERC (European

Resuscitation Council). The resuscitation protocols associated with it will soon be ratified by the STS.

Dates for 2015:

Wythenshawe sim centre	April 23rd and 24th
Hamburg (with the RCS)	May 21st -23rd
Georges Sim centre	June 2015
Wythenshawe sim centre	November 26th and 27th

If you need a full information pack about running a CALS course at your institution please contact
 Mrs. J. Nelson - Levine
 Tel: 07739135076
 Email: juliebaldwinsgate@googlemail.com

For further information please contact Joel Dunning:
www.joeldunning.co.uk or www.csu-als.com

The Old Rectory
 Crosby Garrett
 KIRKBY STEPHEN
 CA17 4PW

Tel: +447801548122

You can download the Full EACTS European Guideline for resuscitation here: <http://dx.doi.org/10.1016/j.ejcts.2009.01.033>

You can download the csu-als handbook at www.lulu.com/spotlight/cardiacsurgeryadvancedlifesupportcourse
 You can also see us on youtube. Click on www.youtube.com/watch?v=PHgYZDgQJgc

And we have a discussion site on facebook here: <http://www.facebook.com/group.php?gid=115765272129&ref=mf>

Cardiac Services Ltd

Stand 52

Cardiac Services are the exclusive distributor of Scanlan Instruments in the UK. Since 1921 Scanlan have been committed to the design and manufacture of the highest quality surgical instrumentation. Over 3000 titanium and stainless steel precision instruments including:



- Full line of VATS / MICS thoracoscopic instruments.
- SCANLAN® Caliper and MEMORY instruments.
- SCANLAN® LEGACY titanium needle holders and forceps.
- Premier™ Spring Style Micro Scissors.
- Super Cut/Ultra Sharp® scissors.
- VASCU-STATT® bulldog clamps.
- SuperCut™ Microsurgical knives.

Cardio Solutions

Stand 13-18

Cardio Solutions is a British company dedicated to the supply and sales management of Cardiothoracic devices and equipment to the UK health market. Established in 2005, Cardio Solutions has continued to build on relationships within the medical industry to ensure a high quality professional service in the delivery of Cardiothoracic devices, equipment, education and support to NHS staff, Trusts and hospitals.



Our product portfolio encompasses some of the finest innovations in medical technology including St Jude Medical Heart Valves, Conduits and Mitral Repair Rings; AtriCure surgical ablation devices for both concomitant and Stand alone AF procedures; CorMatrix ECM Technology to repair and remodel damaged cardiovascular tissue; Terumo Inc Beating Heart and Endo CABG Surgery; Thoratec Corporation Heartmate II Left Ventricular Assist System; LSI Solutions CorKnot suture tying device for reduced bypass time; Medical Concepts Europe Temporary Pacing Wires and Disposable Patient Cables; A&E Medical Aortic Punches, Sternal Wires including the Double Wire and Temporary Pacing Wires; Praesidia S.r.l FLEXIGRIP Nitinol Sternal Closure Clips; Kimberly Clark Integuseal Microbial Sealant to reduce surgical site infection in all surgical disciplines; TeDan Surgical Innovations Minimally Invasive Retractor; Wexler Surgical Adult and Paediatric Cardiac Surgery, Thoracic and VATS instruments

For further information please talk to your local representative or contact Cardio Solutions head office on:

Tel: +44 (0)800 612 80 20
 Fax: +44 (0)800 612 80 30
 Email: customer.services@cardiosolutions.co.uk
 Web: www.cardiosolutions.co.uk

Carefusion

Stand 46

At CareFusion, we are united in our vision to improve the safety and lower the cost of healthcare for generations to come. Our 16,650 worldwide employees are passionate about healthcare and helping those that deliver it - from the hospital pharmacy to the hospital ward, the operating theatre to the patient bedside.

Our clinically proven product families include Alaris® IV pumps, Pyxis® automated dispensing and patient identification systems, Rowa® automation solutions, AirLife®,



AVEA® and LTV series of ventilators and respiratory products, ChloroPrep®* skin preparation products, V. Mueller® and Snowden-Pencer™ surgical instruments, Achieve®, Temno® and Jamshidi®, and the PleurX™ drainage system.

To make global healthcare better, we partner with our customers to help them improve medication management, lower costs in procedural areas, reduce risk of infection, advance the care of ventilated patients and turn the endless amount of data generated in healthcare into actionable information.

Carefusion IS

Stand 7A

Interventional Specialties

At CareFusion, we are united in our vision to improve the safety and lower the cost of healthcare for generations to come. Our Interventional Specialties portfolio offers innovative solutions for acute and chronic drainage including the PleurX® catheter system for compassionate home-management of recurrent pleural effusion and the Safe-T-Centesis® drainage system for thoracentesis.

www.carefusion.co.uk/pleurx

Tel: 0114 268 8880

Fax: 0114 268 8881

CareFusion

Interventional Specialties

Albreda House

Lydgate Lane

SHEFFIELD

S10 5FH



CLS Surgical & FEHLING Instruments Stand 41

CLS Surgical and FEHLING Instruments will be presenting a wide range of state-of-the-art, German-made instruments for open and minimally invasive cardiac and thoracic surgery. The "MITHOS" (Minimally Invasive THORacic System) has been recently enlarged with even more options for advanced surgical techniques.



We will also be showing for the first time the **TwinStream p-BLV (Pulsatile Bi-Level Ventilation) Ventilator** for treatment of the most difficult to ventilate patients. Please speak to us and arrange a demonstration or trial at your ICU.

See also the new perfusion cannula for Antegrade Cerebral Perfusion designed by Prof. Robert di Bartolomeo. Now you don't need to (mis-)use a cardioplegia cannula for this purpose!

Covidien

Stand 33

Covidien recognises the challenges faced in modern day surgery and we continue to develop innovative products and solutions in response to feedback from our consumers. We strive to improve our portfolio to enable consistent patient outcomes of surgery in Cardiac and Thoracic procedures



Covidien are honoured to partner with the Cardiothoracic surgical community in the development and promotion of best practices, and are proud to develop resources and education programmes.

Please visit Covidien and be introduced to our new extended surgical solutions of Tri-Staple™ Technology, V-Loc™ Wound Closure Device, LigaSure™ Vessel Sealing devices and Sonicion™ Energy platform.

COVIDIEN, COVIDIEN with logo, Covidien logo and positive results for life are U.S. and/or internationally registered trademarks of Covidien AG. Other brands are trademarks of a Covidien company. 2010. Covidien

Covidien (UK) Commercial Ltd
4500 Parkway
WHITELEY
Hampshire PO15 7NY
Tel: +44 (0)1329 224 000
Fax: +44 (0)1329 224 400

Cryolife

Stand 34

CryoLife Europa Ltd. is a wholly owned subsidiary of CryoLife, Inc., the leader in the processing and distribution of implantable living human tissues for use in cardiovascular, and vascular surgeries. CryoLife deliver a full range of glues, sealants and haemostats, with advanced technologies for all bleeding applications.



BioGlue® Surgical Adhesive is used as sealant, adhesive and for tissue reinforcement is clinically proven in over 900,000 procedures and 500 studies. BioGlue is available in 2ml, 5ml and 10ml sizes and a variety of tips so it can be applied in thin films and laparoscopically.

PerClot®, the next generation haemostat, is an adjunctive haemostat for the control of surgical bleeding. PerClot is a natural plant based haemostat that is simple to use and effective. PerClot is available in 1g, 3g, and 5g sizes and with tip lengths for open, laparoscopic or robotic procedures.

BioFoam® is a unique sealant haemostat, delivered as a liquid it rapidly expands to form a haemostatic foam that seals tissue and promotes cellular aggregation, for use on Cardiovascular and abdominal parenchymal tissue. BioFoam is available in 2ml and 5ml sizes.

Deltex

Stand 55

Deltex Medical are proud to present its new product range, incorporating:



- CASMED® FORE-SIGHT ELITETM Absolute Tissue Oximeter, providing reliable readings you can trust. The most technically advanced NIRS monitor, providing market leading performance. Monitor cerebral and somatic tissue oxygenation. Use in adult and paediatric patient groups. The evidence base for cerebral oximetry supports its' use in the following applications:-

- CABG and MVR procedures
- Off pump cardiac surgery
- Carotid endarterectomy,
- Aortic arch procedures
- Single lung ventilation thoracic surgery

- CardioQ-ODM+ Oesophageal Doppler Monitoring System Doppler Calibrated Pulse Pressure Waveform Analysis for continuous cardiac output and fluid management guidance for the peri-operative period

- Unlimited calibrations at a fixed cost.
- Beat to beat real-time monitoring for 'off-pump' surgery
- Suitable for intubated and extubated patients

- Additional distributed anaesthetic products

Customer Services: 01243 774837
www.deltexmedical.com

We look forward to seeing you at stand 55 Exchange Hall and demonstrating how we can assist you in the anaesthetic management of your complex patients.

Dendrite

Stand 12

Dendrite is a specialist supplier of clinical databases with >250 hospital installations and >140 national & international databases across 47 countries including the Euromacs LVAD Registry.

In conjunction with the SCTS, Dendrite has developed the UK & Ireland National Thoracic Surgery Registry, the first national registry funded by the General Medical Council.

The company's sophisticated clinical outcomes database management system creates an environment in which the analysis and reporting of data becomes easy and clinically meaningful. The software allows clinical users with the ability to track time related clinical data for analysis of any medical or surgical procedure, all within a single software environment.

Please visit our Stand for a software demonstration.

Dendrite Clinical Systems Ltd
The Hub, Station Road
HENLEY-ON-THAMES
Oxfordshire RG9 1AY

Tel: 01491 411 288

Fax: 01491 411 377

Email: info@e-dendrite.com

Website: www.e-dendrite.com

Head Office: Dr Peter K H Walton, Managing Director



Depuy Synthes

Stand 44, 45, 48, 49, 50

DePuy Synthes
Companies of
Johnson & Johnson
is the largest, most

innovative and comprehensive orthopaedic and neurological business in the world, built upon the strong legacies of two great companies. We are a total solutions company. DePuy Synthes Companies offer an unparalleled breadth and depth of technology, devices, services and programs in the areas of joint reconstruction, trauma, spine, sports medicine, neurological, cranio-maxillofacial, power tools and biomaterials. Our broad array of inspired, innovative and high quality offerings help advance the health and wellbeing of people around the world.

Cranio-maxillofacial (CMF) offers a complete array of neuro, cranio-maxillofacial, thoracic and soft tissue implants for skeletal and soft tissue repair and reconstruction.



Dot Medical

Stand 42A

Dot Medical is the provider of the new Neochord Mitral Valve repair solution in the United Kingdom. Using Standard Gortex chords, the Neochord solution allows for a minimally invasive approach to repair Mitral Valves. In addition to Neochord, Dot Medical has a range of external pacers; single, dual and triple chamber devices with a huge range of temporary pacing wires.



Dot Medical has been supplying NHS hospitals in the UK for 17 years, predominantly in the electrophysiology and cardiac arena. For a demonstration of our products visit us on Stand 42a.

Edwards Lifesciences UK & Ireland

Stand 54

Since the first successful heart valve replacement with the Starr-Edwards™ Silastic Ball Valve more than 50 years ago, Edwards Lifesciences has been dedicated to providing innovative solutions for people fighting advanced cardiovascular disease, the world's leading cause of death and disability.



Edwards

Edwards Lifesciences is the global leader in the science of heart valves and hemodynamic monitoring. Driven by a passion to help patients, the company partners with clinicians to develop innovative technologies in the areas of structural heart disease and critical care monitoring that enable them to save and enhance lives.

Edwards, Edwards Lifesciences, the stylized E logo and Starr-Edwards are trademarks of Edwards Lifesciences Corporation.

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Please visit our website at www.edwards.com

Emmat Medical Limited

Stand 10

Emmat Medical is a leading supplier of premium quality, German manufactured surgical and endoscopy instruments. With over 16 years' experience we are proud to be the exclusive UK distributors for our manufacturing partners, Tekno and Geister.

EMMAT MEDICAL LTD

Geister is a leading German manufacturer of cardiac, thoracic and vascular instruments. Working closely with opinion leaders in Minimally Invasive Surgery, Geister has developed its latest and most advanced generation of ValveGate™ PRO MICS instruments. These ultra-lightweight and perfectly balanced long shafted instruments, made completely from surgical stainless steel and with the very latest full injection, straight-flush cleaning concept, offer efficient surgery with optimum results for the most common valve surgeries as well as more challenging coronary artery by-pass procedures.

The Fairgrip™ Ultra microsurgical instrument range from Geister offers maximum strength and durability, precise control, sensitive tactile feel, and superior balance to deliver precise, sharp and smooth cuts even on the smallest vascular and tissue structures.

Our ThoraGate™ endoscopy instruments, in combination with ValveGate™ provide an excellent solution for thoroscopic VATS procedures.

We look forward to welcoming you onto our stand at SCTS in Manchester and to providing you with an opportunity to handle and evaluate our instruments for yourself.

European Society of Thoracic Surgeons

ESTS Exchange Foyer

ESTS is the largest international general thoracic surgery organization with over 1400 members from all Continents. Our mission is to improve quality in all aspects of our specialty: from clinical and surgical management of patients to education, training and credentialing of thoracic surgeons worldwide.

ESTS Membership fees are tiered according to the average per capita income of the country in which surgeons practice.

The 23rd European Conference on General Thoracic Surgery will be held in Lisbon, Portugal, 31 May – 3 June 2015. The outstanding program includes lectures by international speakers, joint sessions with international scientific societies, breakfast sessions and hosts the 7th Collaborative Postgraduate Symposium with teams from the Americas, Asia and Europe competing for the Masters Cup. A Symposium for Nurses provides a full day of specialised and research based nursing in an international perspective.

The ESTS School of Thoracic Surgery was established in 2007 with the aim of providing educational platforms for thoracic surgeons worldwide. Courses include hands-on, theoretical, medical writing and a methodology course.



The 24th European Conference on General Thoracic Surgery will be held in Istanbul, Turkey, from the 27 May–1 June 2016.

For further information please visit www.ests.org

Ethicon

Stand 44, 45, 48, 49 & 50

Ethicon offers a leading range of innovative products, platforms and technologies that are used in a wide variety of minimally invasive and open surgical procedures. Specialties include support for treatment of colorectal and thoracic conditions, women's health conditions, hernias, cancer and obesity. As a pioneer in surgical education, Ethicon is helping bring procedure-enabling capabilities to markets and providing the expertise and training surgical clinicians need. More information can be found at www.ethicon.com.



About our Surgical Care business

Our Surgical Care business stands for "Better Surgery for a Better World" and is deeply rooted in innovation with a singular focus- delivering the right solution for the right need. We offer a broad range of sutures, surgical staplers, clip appliers, trocars, synthetic mesh devices and system-wide solutions that advance surgical care worldwide.

ETTAA Exchange Foyer

Effective Treatments for Thoracic Aortic Aneurysms (ETTAA Study) is an observational clinical trial set up to try to find the most effective treatment for a potentially fatal chronic chest condition.

The five-year study, funded by the Health Technology Assessment (HTA) Programme, has been designed to collect information on patients who have been diagnosed with a chronic thoracic aortic aneurysm (CTAA) to determine the best management strategy, timing and cost effectiveness of different interventions for the treatment of CTAA.

The study will follow patients from a number of centres across the UK over a period of time to see how well they do. The type of treatment patients receive will not be altered by taking part in this study.

We aim to analyse all the information collected in order to:

- Understand the growth rate of Chronic Thoracic Aortic Aneurysms and identify which factors influence the growth rate.
- Understand how quality of life changes following surgical procedures.

- Estimate the cost-effectiveness of the different treatment options by measuring changes in survival and quality of life of patients compared to the cost of treatment and post-operative patient care.
- Create a risk score that will help specialists determine which intervention (stent grafting or surgery) is best suited to a given patient and when this treatment should be offered.
- A number of sites across the UK are already recruiting patients, but we are keen to hear from you if your centre is involved with CTAA patients at any stage of their diagnosis or management.

Email: ettaastudy@papworth.nhs.uk
Tel: 01480 364980

Eusa Pharma

Stand 29

EUSA Pharma focuses on in-licensing, developing and marketing late-stage oncology, oncology supportive care and critical care products.



EUSA Pharma currently has seven products on the International market: Erwinase® and Kidrolase® for treatment of acute lymphoblastic leukaemia; Caphosol® for the treatment of oral mucositis, a common and debilitating side-effect of radiation therapy and high-dose chemotherapy; Xenazine®, for treatment for movement disorders; Collatamp®, an antibiotic surgical implant; Custodiol®, a tissue preservative solution used in organ transplantation; and Fomepizole®, an antidote for ethylene glycol poisoning.

Fisher and Paykel Healthcare

Stand 9

Fisher and Paykel Healthcare is a leading designer and manufacturer of innovative healthcare devices which incorporate unique features to improve patient care.



We have 40 years experience in the respiratory care market and now offer a broad range of products for use in respiratory and acute care.

Our latest contribution to real innovation is the introduction of Optiflow™ Nasal High Flow™, the most significant advance in respiratory medicine in recent years. The F&P Optiflow system is unmatched in terms of humidity performance and patient tolerance to oxygen therapy.

World-leading respiratory technology ensures up to 100% oxygen is delivered at a consistent temperature and humidity level, making it the ideal solution for hypoxemic patients in mild to moderate respiratory distress

Our headquarters and research facilities are based in New Zealand, with manufacturing facilities located there and in Mexico, and sales and marketing operations in 30 countries. In total, our products are sold in more than 120 countries either directly or through distributors or OEMs.

We believe that product development and clinical research are critical to success. A significant proportion of our workforce is engaged in clinical research and product development.

Fisher & Paykel Healthcare Ltd
16 Cordwallis Park
Clivemont Road
MAIDENHEAD
Berkshire SL6 7BU
Tel: +44 (0)1628 828136
Fax: +44 (0)1628 626146
Email: customerservice@fphcare.co.uk
www.fphcare.co.uk

Fukuda Denshi UK

Stand 9A

Fukuda Denshi UK are proud to provide the latest technology in patient monitoring, renowned customer service and market leading Metavision Clinical Information Systems. Our innovative Dynascope range of patient monitors offers our most intelligent configurable user interface and powerful features, along with the reassurance of accuracy and reliability along with first class support that is the envy of our industry.



The fully customisable cutting edge Metavision Clinical Information Systems for critical care and anaesthesia provides comprehensive and complete automated and accurate charting and tracking of events, medicines and procedures. Clinical audit and research is enhanced including ICNARC/CCMDS data collection and export.

For further information or a demonstration please contact Fukuda Denshi 01483 728065 or email sales@fukuda.co.uk or visit us on the stand.

G&N Medical

Stand 38

G+N Medical is a UK based developer and distributor of medical devices, with a focus on DVT prevention and cardiothoracic products.



We will be exhibiting our ThorAcc®, a simple non-invasive device to facilitate uniform alignment of the divided sternum in Cardiac Surgery.

G+N Medical
Maydwell Ave
Off Stane Street
Slinfold,
HORSHAM
West Sussex RH13 0GN
Tel: +44 (0) 845 263 8908
Fax: +44 (0) 845 263 8907
Email: medsales@gandn.com
Website: www.gandn.com

GB Healthcare

Stand 23

GBUK Healthcare will be presenting the Redax "PALM EVO" Digital Chest Drain.



Redax "PALM EVO" is the very latest digital chest drain system that allows continuous monitoring of patient air leak and intra-pleural pressures.

The unit consists of a digital control unit and suction pump placed on top of a disposable collection chamber. The suction pump can be deactivated to convert the system to Standard water seal drainage.

Collected data is displayed on 2 screens: an LCD screen for setting suction level, and a full-colour touch screen showing instantaneous and cumulative (99hours) pressures/flows – both with absolute values and graphics.

Data download can be performed whilst the system is working, without removing the control unit, by simple usb data stick insertion.

Redax "PALM EVO" provides objective data of pressure and flow trends, enabling a true understanding of how the lung-pleural cavity system is working.

Distinguishing between active air leak and pleural space effect aids the correct choice of suction level – and allows safe and timely chest tube removal.

GBUK Healthcare

Tel: +44(0) 1757 288587
Email: info@gbukhealthcare.com
Web: gbukhealthcare.com

Haemonetics

Stand 31A

Haemonetics (NYSE: HAE) is a global healthcare company dedicated to providing innovative blood management solutions for our customers.



Together, our devices and consumables, IT products, and consulting services deliver a suite of business solutions to help our customers improve clinical outcomes and reduce the cost of healthcare for blood collectors, hospitals, and patients around the world. Our technologies address important medical markets: blood and plasma component collection, the surgical suite, and hospital transfusion services. To learn more about Haemonetics visit our web site at www.haemonetics.com

Healthcare 21 Group

Stand 56

Established in 2003, Healthcare 21 Group is one of the largest privately owned healthcare companies and is a leading provider to all healthcare institutions throughout the UK and Ireland with an expert team and an in-depth knowledge of the healthcare market. Promoting Globally renown brands on behalf of Covidien, KCI, Bard and Aerocrine, Healthcare 21 are able to provide a range of solutions tailored to your clinical focus.



Come to our stand to see the latest technology behind Video laryngoscopy, the latest design to allow improved visual view, minimal learning curve (ideal for emergency situations) and on-screen teaching aid. Combined with a Mallinckrodt subglottic drainage endotracheal tube which has been proven to reduce the incidence of VAP in your Intensive Care Department.

We are also excited to be launching Progel at this meeting, a new product from Bard. This is a pleural air leak sealant which comes in an easy application kit and is clinically proven to reduce post-operative air leaks and minimise post-operative complications and morbidities.

Heart Valve Voice

Exchange Foyer

Heart Valve Voice is a charity run by experts in the heart valve disease field including cardiac surgeons, cardiologists, GPs and patient representatives. Formed in 2013, the charity aims to address the under-diagnosis and under-treatment of people with heart valve disease in the UK by raising awareness and understanding of the disease and delivering up to date evidence-based treatment guidance to ensure patients receive the right treatment at the right time.



Heart valve disease is an age-related illness and represents a significant challenge in the UK. Approximately 1 million elderly are thought to be affected by heart valve disease and over half of patients with untreated symptomatic severe heart valve disease die within two years. With many heart valve disease symptoms being wrongly attributed to natural ageing (tiredness, breathlessness and difficulty exercising), many patients with heart valve disease are left undiagnosed and untreated – with an ageing population, this should be of increasing concern to the UK.

More information on Heart Valve Voice and heart valve disease can be found on our website, heartvalvevoice.co.uk, where you can also sign up to join those pledging their support to fight heart valve disease. For regular updates follow us on Twitter at: @HeartValveVoice.

For further information, please contact the Heart Valve Voice Secretariat:

Tonic Life Communications
Tel: +44 (0) 20 7798 9900
Email: HeartValveVoice@toniclc.com
@HeartValveVoice

HeartWare

Stand 37

HeartWare is a global medical device company dedicated to delivering safe, high-performing and transformative therapies that enable patients with heart failure to get back to life. The company's innovative technologies are creating advances in the miniaturization of Ventricular Assist Devices (VADs) leading to less invasive surgical procedures and increasing the patient population who may be suitable for VAD therapy. HeartWare's breakthrough innovations begin with the HVAD® Pump, designed to be implanted next to the



heart in the pericardial space avoiding the more invasive surgical procedures required with older LVAD technologies. The HVAD Pump is commercially available around the world.

ICNARC National Cardiac Arrest Audit (NCAA)

Stand 38A

NCAA is the only national clinical audit of in-hospital cardiac arrests in the UK and Ireland and is a joint initiative between the Resuscitation Council (UK) and the Intensive Care National Audit & Research Centre (ICNARC). Acute hospitals in England, Wales, Northern Ireland, Scotland and Ireland are welcome to join.

Aims

The aims of the audit are to:

- improve patient outcomes;
- decrease incidence of avoidable cardiac arrests;
- decrease incidence of inappropriate resuscitation; and
- promote adoption and compliance with evidence-based practice.

Participation

Currently, a total of 181 hospitals participate across the UK. Coverage of adult acute hospitals in England is currently 80% which continues to increase!

NCAA's importance is highlighted by its inclusion as a national clinical audit in the Department of Health's Quality Accounts 2015/16.

Reporting

The development of NCAA risk models in 2013, means that quarterly NCAA Reports include risk-adjusted comparisons on the following outcomes:

- return of spontaneous circulation (ROSC) greater than 20 minutes; and
- survival to hospital discharge.

These analyses provide fair comparisons against other participating hospitals and help inform local performance management and quality improvement.

To find out more about NCAA or to join, visit www.icnarc.org or contact NCAA (020 7269 9288 / ncaa@icnarc.org).

Karl Storz Endoscopy (UK) Ltd.

Stand 3

KARL STORZ Endoscopy is the world's premier surgical endoscopy company with an established and acknowledged reputation for producing the finest quality surgical endoscopes and accessories.



We shall be displaying a wide range of cardio-thoracic instruments for endoscopic procedures.

- Multifunctional retractor for Thoracic & Heart Surgery
- Endoscopic Saphenous Vein Harvesting system
- Video-Mediastinoscope

Our comprehensive portfolio includes the new CMOS Intubation and Bronchoscopes scopes compatible with our C-MAC Videolaryngoscope system.

- C-MAC Portable Video Laryngoscope
- C-MAC single use blades
- Complete Airway Management System – CAMS

KARL STORZ's long tradition of product innovation and development continues, with our focus this year on the next milestone in the advancement of endoscopic surgery: IMAGE 1 SPIESTM 3D a truly High Definition 3D experience. SPIESTM (Storz Professional Image Enhancement System), through CLARA, CHROMA, and SPECTRA, enhances the view of anatomical structures, to improve the definition of tissue planes using innovative imaging technology to enhance the patient and surgical experience.

So please visit the KARL STORZ stand, No.3, the only company that can provide complete airway management system and state-of-the-art endoscopic equipment for thoracic surgery.

Karl Storz Endoscopy (UK) Ltd
415 Perth Avenue
SLOUGH
Berkshire
SL1 4TQ
Tel: 01753-503500
Fax: 01753-578124
E-mail: customerservice@karlstorz-uk.com
Web: www.karlstorz.com

Lynton Lasers/KLS Martin

Stand 30 & 31

KLS Martin is a recognised partner in the field of laser surgery, with KLS Martin lasers representing an indispensable part of any advanced operating environment. Our product range comprises powerful diode-pumped Nd:YAG lasers, CO₂ lasers and diode lasers. Extensive experience, dedication and a distinctly inventive mind-set are the drivers behind the innovative KLS Martin systems for laser surgery. "Making operable what was previously inoperable" – this is the motto that guides our development efforts, day after day.



For KLS Martin, this motto is more than a claim – it is a commitment based on our continuous effort to research, develop, manufacture and market innovative solutions. The commitment shows in the result: all parties involved – from sales partners to users to patients – can be sure to get a solution of impeccable quality that satisfies the highest demands.

In the UK, KLS Martin lasers are distributed exclusively by Lynton Lasers Ltd., who are the UK's leading manufacturer and provider of laser solutions and associated equipment to the medical, cosmetic and beauty industries."

Lemonchase

Stand 8A

Lemonchase are the exclusive UK distributors of Designs for Vision loupes.

Designs for Vision are the number one



choice for surgeons worldwide (indeed, they are the choice of over 95% of surgeons in the US and UK). Whether you are contemplating your first pair or would like advice on any changes to your current pair, Mark Chase would be delighted to see you at their stand, where they are also demonstrating Designs for Vision's outstandingly bright range of Lithium Ion Battery powered LED lights, with up to 12 hours of continual use – and which allow you to move freely around the operating theatre. Come and see what you're missing!

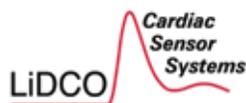
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Website: www.lemonchase.com

LiDCO Limited

Stand 38A

LiDCO Limited supplies minimally-invasive and non-invasive hemodynamic equipment to hospitals worldwide, to monitor cardiac output (and related parameters) and ensure that vital organs are adequately oxygenated. LiDCO's products enable the measurement, analysis, audit, training and sharing of real-time and historic hemodynamic data, in both operating theatres and critical care units. Scientific evidence is increasingly linking the optimisation of surgical and ICU patients' hemodynamic status with better outcomes and reduced hospital stays and LiDCO's computer-based technology, developed at St Thomas' Hospital in London, has been shown to significantly reduce morbidity and complications, length of stay and overall costs associated with major surgery.



Our newest product - LiDCOrapidv2 with Unity Software – is a multi parameter hemodynamic monitoring solution for simultaneous fluid and consciousness management of high risk surgery patients throughout the entire surgical pathway. Now for the first time - from before the start of surgery, all the way through to recovery – a patient's hemodynamic status can be optimized, using either a non-invasive finger cuff or an arterial pressure transducer, and taking the pre-induction blood pressure and cardiac output as the target for restoration.

Contact: Paul Jackson UK Sales Manager
email: info@lidco.com

Maquet

Stand 52A & 53

This year Maquet will present three state of the art technologies at the 2015 SCTS Congress.



Firstly, we will be demonstrating the market leading Endoscopic Vein Harvesting system, HemoPro 2, which is the only system that allows saphenous and radial artery harvesting. Our preparatory cut and seal technology removes the need of diathermy and puts an end to the resulting thermal damage it causes.

Secondly, we will display the latest technology in IABP's with the **CardioSave Hybrid** balloon pump, widely recognised by Clinicians as the gold standard in counter-pulsation technology. Additionally, the Maquet range of Intra-aortic Balloons will be available to view starting with the large volume **Mega** balloon, the **Sensation** and **Sensation Plus** fibre-optic balloons and last but not least the Linear balloon.

The final piece of technology we will have available will be the **CardioHelp**, the world's smallest portable Heart-Lung support system, designed to treat and to transport Patients needing extended respiratory and/ or circulatory support. The system is idea for use in ICU, Cardiac Cath Labs, Theatres and Emergency rooms.

We have something for all SCTS delegates within the Exhibitors area and we at Maquet look forward to welcoming you all to our Stand.

Medela

Stand 36

Over the past 50 years, Medela has developed from a small family owned company in Switzerland to a global producer of innovative Medical Vacuum Technology. Throughout our company history we have questioned conventional solutions in order to manufacture Swiss quality products that are based on sound and thorough research.



In close collaboration with medical experts, Medela continues to set Standards in digital chest drainage therapy. With Thopaz and now Thopaz+, we offer the most complete digital display of key therapeutic indicators (air, fluid and pressure). This is combined with proven advantageous features such as unrestricted mobility, objective and precise data as well as high staff and patient convenience.

Medela Healthcare offers a range of uniquely designed medical vacuum pumps and consumables for various application areas.

www.medela.co.uk

Customer Service Team Tel No. 0161 776 0400

Medistim

Stand 51

"Medistim is the innovator and market leader within intra-operative transit time flow measurement (TTFM) and ultrasound imaging. We develop, manufacture and bring to market quality assessment systems for cardiac, vascular and transplant surgery. Our newest product, MiraQ™ Cardiac, is tailored specifically for heart surgery. Our TTFM technology became part of the ESC/EACTS guidelines on myocardial revascularization in 2010 and reissued in 2014. In 2011, our VeriQ™ TTFM system was recommended by the National Institute for Health and Clinical Excellence (NICE) for routine use within the UK national health system (NHS)".



Medtronic

Stand 6

Find Opportunity in Change and consider Medtronic's intuitive solutions in Structural



Heart and Aortic Diseases including: tissue, mechanical and transcatheter valves; irrigated RF and cryo surgical ablation devices; aortic stent graft systems and OPCAB, MICS CABG, cannulae and perfusion products.

Please visit us on Stand 6 where the team will be happy to discuss our comprehensive range of products, including our innovative 3f Enable® Sutureless Prosthetic Tissue Heart Valve; designed for the less invasive and minimally invasive procedures to take advantage of procedural innovations, and with proven hemodynamics and durability based on the same tubular leaflet structure of the 3f® Aortic Bioprosthesis.

We will also be pleased to talk about our new CoreValve transcatheter aortic valve; the Evolut R and our Engager transapical TAVI valve. Finally, why not come and view our new Bio-Medicus next gen adult and paediatric cannulae.

Medtronic are pleased to provide a free patient-education app for cardiac surgeons and cardiologists, available from iTunes®! An intuitive, interactive app; designed to simplify and support the complex judgement calls physicians make every day. The app provides heart valve resources to simplify:

- Patient education
- Treatment consideration
- Collaboration with peers

Why not take a look and download using the following link: www.seizesimplicity.com/

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www.medtronic.co.uk
www.innovatingforshd.com

MedXpert

Stand 55A

MedXpert – “the chest wall company”



We are a German manufacturer - family owned and team guided - of innovative medical devices for chest wall indications.

With our StraTos™ System we offer a solution for the correction of deformities of the chest wall, such as Pectus Excavatum, Pectus Carinatum and Pectus Arcuatum.

Further main indications for the system are costal and sternal fractures, reconstruction of defects following resections of the chest wall, as well as primary and secondary sternal closure.

With our StraTos™ System we developed worldwide a new way for the stabilisation of the chest wall after traumas. The 3D-Clips allows a stable and flexible fixation of the fractured ribs with an excellent support for immediate patient recovering.

The P.E S Pectus Excavatum System is the newly updated and well known system and technique according the NUSS procedure. The Bar-Lock-System, exclusively by MedXpert, allows a secure but flexible application of the bars.

All MedXpert products are developed as well as produced only in Germany in our own production facilities and distributed worldwide with our reliable partners.

You are welcome to see further detailed information regarding our systems StraTos™, StraCos™ and P.E.S on our website www.medxpert.de.

Mitsubishi Pharma Tanabe Europe Stand 8AA

Mitsubishi Tanabe Pharma Europe acts as the European Headquarters of one of Japan's leading pharmaceutical



companies, Mitsubishi Tanabe Pharma Corporation. Based in London, we are dedicated to the clinical development of new medicines for the European markets. Mitsubishi Tanabe Pharma Europe is the marketing authorisation holder for Exembo®(argatroban) and supports commercial operations for other in-house products. For more information go to:

www.mt-pharma-eu.com

P³ MEDICAL LTD

Stand 40

P³ Medical is proud to be supporting ACTA. We are presenting to you our ETView range which is a major advance in double lumen tube placement. The VivaSight-DL and VivaSight-SL have tiny built-in video technology that enables placement and continuous visualisation of the tube position. We also continue to manufacture the Robertshaw tube.



P³ Medical continues to distribute the Siemens Acuson Freestyle, the world's first wireless, cable free ultrasound transducers.

Other products included in our endobronchial blocker, Ventrain, range are single- use bougies, temperature monitoring probes, the Clinitrend temperature trend indicator, the Aepex depth in anaesthesia monitor, soda lime and laryngeal masks.

Please visit our stand to see our innovative range of anaesthetic products!

Further information at www.p3-medical.com

Tel: +44 117 972 8888

Email: sales@p3-medical.com

P3 Medical Ltd.

1 Newbridge Close

BRISTOL

BS4 4AX

Philips Healthcare

Stand 27

Philips Centre
Guildford Business Park
GUILDFORD

Surrey, GU2 8XH

Web: www.philips.co.uk/healthcare

Email: Jennifer.Giddins@philips.com

Tel: 01483 864715



We are dedicated to creating the future of healthcare and saving lives. The vision of our global organisation is to introduce meaningful innovations that improve the lives of 3 billion people a year by 2025.

We look to the experiences of patients, providers and caregivers across the health continuum. By understanding their needs we unlock insights to create innovative solutions for the most meaningful moments of care, whether in the hospital or the home.

Our Cardiology Ultrasound systems are intelligently designed to offer high performance and simplified

workflow. Feel confident in your clinical decisions with powerful, innovative technologies and premium levels of image quality. Logical and intuitive designs provide best-in-class ergonomics for easy operation and portability. With Philips Cardiology Ultrasound Systems you can expect efficient workflow with simple, easy to use systems, and increased clinical certainty with superior imaging quality and advanced functions.

See what you've never seen before with Live 3D Transesophageal Echo (TEE). You'll gain more information with views of cardiac structure and function as well as real-time displays of the beating heart. Our fully functional TEE probe offers exceptional 2D and Live 3D Echo performance, so you can make more informed decisions.

Come and visit us on stand 27 to find how your organisation can benefit from Philips Ultrasound Solutions for Cardiology.

Pierson Surgical Ltd

Exchange Foyer

Pierson Surgical Ltd specialises in products for Cardiac Surgery including the BioIntegral Surgical range of No-React[®] tissue devices



- BioIntegral Surgical No-React[®] Valves and Patches. No-React[®] is a proprietary detoxification of glutaraldehyde-treated tissue which ensures excellent device longevity through: enhanced biocompatibility, lower rates of infection, no calcification and the promotion of endothelial lining. The No-React[®] Aortic Valved BioConduit is the world's only all-biological valved conduit, comprising a porcine valve and bovine conduit. No-React[®] Porcine Pericardial Patches are available in a wide range of sizes. All BioIntegral Surgical products are available on the NHS Supply Chain Catalogue.
- Delacroix-Chevalier Surgical Instruments - made in France to the highest standards of design and craftsmanship. Precision Micro instruments, Minimally Invasive instruments for Cardiac Valve Surgery and Video Assisted and Thoracoscopic Surgery.
- Péters Surgical Sutures – a specialist range for Cardiac surgery, including Cardionyl[®] for Mitral Valve Repair and Corolene[®] which has very low memory, ideal for Coronary grafts.
- HaemoCer[™] Plus Powder Haemostat - a highly effective, safe, advanced polysaccharide powder that rapidly accelerates natural clotting and forms a thick gel matrix over the site of the bleeding. 100% plant based, it is completely reabsorbed by the body within 48 hours.

Ideal for all Cardiothoracic surgery including sternal haemostasis.

- Kerecis Omega3 Wound – an innovative and very effective dermal matrix for chronic wound healing made from decellularised fish skin

Tel 01225 766632
 Email sales@piersonsurgical.com
 Website www.piersonsurgical.com
 Fax 07092 315510

PneumRx, Inc

Stand 5

PneumRx, Inc. is a California based medical device start-up focused on developing minimally-invasive solutions for unmet medical needs in pulmonary medicine. Our flagship product, the RePneu® Endobronchial Coil, addresses the key challenges in emphysema management. The Coil is designed to reduce lung volume and restore elastic recoil to improve lung function, exercise capacity, and quality of life for patients with emphysema. Made from shape-memory Nitinol, the RePneu Coil compresses hyperinflated tissue and tethers small airways to prevent airway collapse without blocking lung tissue or provoking fibrosis.



Most endoscopic treatment methods focus only on reducing lung volume by blocking or destroying parts of the emphysematous lung. PneumRx's approach has been to develop a technique to help restore elastic recoil in healthier regions, while simultaneously achieving lung volume reduction of highly diseased areas of the lung.

POSTHORAX

Stand 39A

Posthorax is the provider of the only evidence based stenum support product with 9 clinical trials in 6 countries, with over 8000 patients. The results of these trials show that our simple to use and highly effective Posthorax sternum support vest improves general outcome, quality of care, pain relief and patient satisfaction. While conversely significantly reducing the occurrence of re-admission, hospital expense, infection rates, length of stay, morbidity and mortality rates.



It would be our pleasure to demonstrate the Posthorax sternum support vest at our booth. (39a)

Please visit our presentation "Median Sternotomy: Management Of High Risk Patients " where a summary of

our clinical trials will be presented 12:15 pm 25/03/2015 in Exchange 10

Pulmonx

Stand 47

Pulmonx, based in Neuchâtel, Switzerland and Redwood City, California, is focused on developing and marketing minimally-invasive medical devices and technologies for the diagnosis and treatment of pulmonary disorders.



Pulmonx takes a unique approach to treating emphysema by providing an assessment tool to plan and optimize EBV treatment. The Chartis Pulmonary Assessment System is composed of a balloon catheter and a simple, easy-to-use console which characterises airflow within lung regions. The goal is to understand the patient's specific lung anatomy in order to plan for optimal treatment.

The company has CE mark for the Zephyr EBV and the Chartis System, and Pulmonx products are sold in Europe, Asia, and in other countries worldwide. The company does not yet market or sell its products in the United States.

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 Switzerland

Tel: +41 32 475 2070
 Fax: +41 32 475 2071
 E-mail: info@pulmonx.com
 Web: www.pulmonx.com

Qualitech Healthcare Ltd

Stand 22A

Qualitech Healthcare is a technology-driven company presenting The PneuX™ System - a major development in the prevention of Ventilator-Associated Pneumonia (VAP).



Designed to prevent pulmonary aspiration, the leading cause of VAP, whilst minimising damage to the airway. The system facilitates sub-glottic irrigation and drainage, and works in conjunction with the PneuX™ Tracheal Seal Monitor (TSM) which maintains a constant cuff pressure preventing aspiration. The TSM is designed exclusively for use with the PneuX™ ETT and the PneuX™ TT.

With proven clinical benefits in elective cardiac patients, The PneuX™ System offers improved patient outcomes together with cost effectiveness.

For further information or to arrange a presentation, please contact n.dill@qualitechhealthcare.co.uk or info@qualitechhealthcare.co.uk

R&D Surgical

Stand 35

- R&D Surgical serve the cardiothoracic community with innovative products which include
- Xenosys headlight offering freedom and convenience at only 30 grams weight
- A full range of Xenosys custom surgical loupes.
- Xenosys wireless portable HD camera system
- Flowmeter for the intraoperative measurement of coronary flow
- Technologically advanced Mitral ring that is adjustable non-invasively after implantation
- Cosgrove retractor. The original made in USA not a cheap copy
- Svensson suture organiser
- Vectec thoracic trocar designed for safety



In addition to a range of consumables that provide cost savings without compromise on quality.

Email: sales@randdsurgical.com

Tel: +44 (0)7975 696541

Web: www.randdsurgical.com

Roche Diagnostics UK

Stand 4

Headquartered in Basel, Switzerland, Roche is a leader in research-focused healthcare with combined strengths in pharmaceuticals and diagnostics. Roche is the world's largest biotech company, with truly differentiated medicines in oncology, immunology, infectious diseases, ophthalmology and neuroscience. Roche is also the world leader in in vitro diagnostics and tissue-based cancer diagnostics, and a frontrunner in diabetes management. Roche's personalised healthcare strategy aims at providing medicines and diagnostics that enable tangible improvements in the health, quality of life and



survival of patients. Founded in 1896, Roche has been making important contributions to global health for more than a century. Twenty-four medicines developed by Roche are included in the World Health Organization Model Lists of Essential Medicines, among them life-saving antibiotics, antimalarials and chemotherapy.

In 2013 the Roche Group employed over 85,000 people worldwide, invested 8.7 billion Swiss francs in R&D and posted sales of 46.8 billion Swiss francs. Genentech, in the United States, is a wholly owned member of the Roche Group. Roche is the majority shareholder in Chugai Pharmaceutical, Japan. For more information, please visit www.roche.com

Siemens Healthcare

Stand 24 & 25

Siemens Healthcare is one of the world's largest suppliers to the healthcare industry and a trendsetter in medical imaging, laboratory diagnostics, medical information technology and hearing aids. Siemens offers its customers products and solutions for the entire range of patient care from a single source – from prevention and early detection to diagnosis, and on to treatment and aftercare. By optimising clinical workflows for the most common diseases, Siemens also makes healthcare faster, better and more cost-effective. For further information please visit: www.siemens.co.uk/healthcare.



Smith & Nephew

Stand 7B

Although infrequent, sternal wound complications following median sternotomy remain a challenge with life threatening consequences for the patient and high costs for the health care providers.

Superficial wound infections range from 3.4 to 5.6%. Deep sternal wound infection range from 1 to 5%. Morbidity and mortality associated with sternal wound complications range from 10% to 40%. Jenks et al (2014) concluded that the median cost of a Surgical Site Infection following Cardiac surgery is over £22,000.

The period of post-operative treatment before surgical wounds are completely closed remains a key window during which to apply new technologies which can minimise complications or reduce expensive short-term readmissions. One such technology is the use of Negative Pressure Wound



Therapy (NPWT) to manage and accelerate the closed incision.

PICO™ is a revolutionary single use, canister-free Negative Pressure Wound Therapy System.

On a closed incision, the PICO system can help to hold the edges of the incision together, and may help to reduce the risk of infection and other complications, including seroma formations.

We look forward to seeing you.
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Sorin

Stand 22

Sorin Group (www.sorin.com) is a global, medical device company and a leader in the treatment of cardiovascular diseases. The Company develops, manufactures, and markets medical technologies for cardiac surgery and for the treatment of cardiac rhythm disorders. With 3,500 employees worldwide, Sorin Group focuses on two major therapeutic areas: Cardiac Surgery (cardiopulmonary products for open heart surgery, heart valve replacement prostheses and repair devices) and Cardiac Rhythm Management (pacemakers, defibrillators and non invasive monitoring to diagnose arrhythmias and deliver anti-arrhythmia therapies as well as cardiac resynchronization devices for heart failure treatment) Every year, over one million patients are treated with Sorin Group devices in more than 100 countries.

Sorin Group UK Ltd
1370 Montpellier Court,
Gloucester Business Park,
GLOUCESTER
GL3 4AH

Tel: 01452 638500
Fax: 01452 638530

www.sorin.com



St Jude Medical

Stand 19

St Jude Medical is a global medical technology leader focused on six key treatment areas including heart failure, arrhythmias, vascular disease, structural heart, chronic pain and neurological diseases. Within vascular disease, our breakthrough solutions guide healthcare providers in their



treatment decisions helping improve patient outcomes and providing cost saving opportunities. We are uniquely positioned to achieve our goals by providing innovative solutions that reduce the economic burden of costly diseases on the health care system.

At St. Jude Medical our line of Cardiac Surgery products brings together over 30 years of innovation and experience to offer cardiac surgeons more choice through a comprehensive line of innovative solutions. This product line includes mechanical heart valves, tissue heart valves and valve repair rings that continues to demonstrate St. Jude Medical's commitment to cardiac surgery. With continued innovation in valve development with our Regent™ and Epic™ families of mechanical and porcine valves as well as Trifecta™, the next-generation in pericardial tissue heart valves.

Terumo

Stand 11

Terumo Corporation is among global leaders in the medical device industry and is dedicated to developing innovative technologies for the treatment of cardiovascular disease. Annually, the company invests significant resources in the research and development of new products. As a result, Terumo's range of products for cardiac surgery is one of the most comprehensive in the industry. Customers all over the world testify to the excellent quality and reliability of well-known Terumo brands. Included in the product portfolio is the VirtuoSaph Plus™ Endoscopic Vessel Harvesting (EVH) System, which provides an endoscopic approach to saphenous vein harvesting. The VirtuoSaph Plus™ system is designed for patient safety and superior vessel quality. One small leg incision minimises scarring, morbidity and infection associated with traditional longitudinal incisions.



Terumo is proud to sponsor the Society of Cardiothoracic Surgery of Great Britain and Ireland meeting 2014. Please visit the Terumo Stand, where the VirtuoSaph Plus™ system will be available for demonstration and for more information. We look forward to meeting you.

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Web: www.terumo-europe.com/cardiovascular

Vascutek

Stand 32

Thoraflex™ Hybrid - the World's First "Frozen Elephant Trunk" device with Aortic Arch Plexus.



Thoraflex™ Hybrid combines the benefits of the "Frozen Elephant" procedure with the Gelweave™ Siena Plexus graft to substantially increase solutions available in the treatment of complex diverse aortic arch disease.

Thoraflex™ Hybrid is indicated for repair of aneurysm and/or dissection in the ascending thoracic aorta, aortic arch and descending thoracic aorta. It consists of a proximal gelatin sealed woven polyester multi-branch aortic arch Gelweave™ Siena Plexus graft pre-sewn to a distal stent graft.

The latter, of a multiple independent ring stent design, allows excellent anatomical conformability. The device is provided compacted within a short and malleable delivery system designed to enable fast and accurate deployment.

The multi-branch aortic arch Gelweave™ Plexus Siena graft, designed for fast arch vessel reconstruction and arterial cannulation, has been demonstrated to reduce ischaemia times, time to re-warming and overall operating times.

The "Siena™" collar simplifies the distal aorta aortic anastomosis. Additional radiopaque markers aid in vivo visualisation.

Differential graft to stent diameters cater for variable proximal and distal aortic anatomies; an important consideration for such procedures.

Please visit Vascutek at Stand 32, where BioValsalva™, aspire™, elan™, OnX and RVOT valve/conduits as well as our full range of Gelweave™ cardiothoracic grafts will be on display.

Vygon (UK) Ltd

Stand 21

We are a leading supplier of medical and surgical devices with a reputation for delivering high quality products and excellence in customer service, helping healthcare professionals offer best practice solutions to their patients.



Our Products

Our product ranges extend across many therapeutic specialties, including vascular access, regional anaesthesia, IV management, neonatology and enteral feeding.

Our Services

In addition to a wide product offering, we are also fully committed to education and training, providing complementary training and technical support to customers to promote best practice in-line with current clinical guidelines.

Our Customers

We supply our products and services to healthcare professionals in the NHS and private sector throughout the UK - from PCTs and NHS Trusts to District and Community Hospitals, as well as GP Practices and Walk-In Centres.

Vygon (UK) Ltd

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Tel: 01793 748800

Email: vygon@vygon.co.uk

Web: www.vygon.co.uk

York Medical Technologies Ltd

Stand 20

"Established in 2004, York Medical Technologies (YMT) has become a leading independent supplier in healthcare products and has consistently delivered the highest quality, service and value to its customers, mainly that of NHS and Private Hospitals. Focusing on all things surgical and covering a wide range of specialities YMT are the exclusive suppliers of a range of products and solutions. YMT are exclusive distributor of Stille Surgical Instruments, Medicon Surgical Products, Thompson Table Mounted Retractors, Omniguide CO2 Laser, Qualiteam Post Operative Support, Dogsan Sutures and many more. All our products carry a warranty against defective materials and workmanship ranging from one to 30 years. We are responsive to your needs and use our experience to enable better health care. Our aim is total satisfaction, achieved through listening to your needs and continually improving our products & services."



York Medical Technologies Ltd.

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Wisepress Medical Bookshop

Upper Exchange Foyer

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General Information

The 2015 SCTS/ACTA Annual Meeting & Cardiothoracic Forum is at Manchester Central from **Wednesday 25th March to Friday 27th March 2015.**

CONTINUING PROFESSIONAL DEVELOPMENT

SCTS delegates will be awarded **12 credits** of CPD for attendance at the whole meeting and **6 credits** of CPD for attendance of the SCTS University. ACTA delegates will be awarded **5 CPD credits per day** for attendance at the ACTA Academy and the whole meeting. Please note that certificates of attendance will be available online after the conference following completion of an electronic feedback form.

ANNUAL DINNER

The SCTS/ACTA Annual Dinner, sponsored by Ethicon, will take place on **Thursday 26th March 2015** at **The Monastery** commencing 19:30hrs.



The dinner includes drinks on arrival and a three-course meal including wine and entertainment. Dress code will be lounge suits and party dresses. Coaches will be leaving at 19:00 from outside the Manchester Central Venue. **Tickets are £60 a head and, if available, can be purchased from the registration desk. All tickets must be collected at the annual dinner desk in the Upper Exchange Foyer.**

BUSINESS MEETINGS

The ACTA & SCTS Annual Business Meetings will be held separately on **Friday 27th March 2015** between 08:00hrs and 09:00hrs. Please note that the Business Meetings are open to Society members only.

SCTS BOARD OF REPRESENTATIVES

The SCTS Board of Representatives meeting will be held on **Friday 27th March 2015** between 16:30hrs and 18:30hrs. This meeting will take place in Charter 2.

HEART RESEARCH UK LECTURE

Frederick Mohr will deliver his lecture on **Thursday 26th March 2015** at 08:30hrs.

TUDOR EDWARDS LECTURE

John Pepper will deliver his lecture on **Friday 27th March 2015** at 11:45hrs.



REFRESHMENTS AND LUNCH

Complementary tea and coffee will be provided during the official breaks. A sandwich & soup or packed lunch is included in the registration fee, and will also be served in the exhibition hall on Thursday and Friday of the conference.

REGISTRATION

Tuesday 24th March	17:00 – 18:00hrs
Wednesday 25th March	08:00 – 18:00hrs
Thursday 26th March	08:00 – 18:00hrs
Friday 27th March	09:00 – 14:00hrs

POSTERS

All posters should be mounted in their indicated space before 08:30hrs on **Thursday 26th March** and should be removed between 12:00hrs and 14:00hrs on **Friday 27th March**. Any posters not collected by 14:00hrs will be removed and disposed of by the organisers.

SPEAKERS ROOM

All presenters are requested to review their audio-visual material in the Speakers room at the following times:

Morning presentations:

by 15:00hrs on the day before presentation

Afternoon presentations:

by 09:30hrs on the day of presentation

TRADE EXHIBITION

The Annual Trade Exhibition will be held in conjunction with the Meeting and will be open from 17:00hrs on **Wednesday 25th March** and from 09:00hrs, on **Thursday 26th March** and 09:00hrs on **Friday 27th March 2015**. The Exhibition Hall will close at 14:30hrs on **Friday 27th March 2015**.

WELCOME RECEPTION

There will be a Welcome Reception in the Trade Exhibition, Exchange Hall, Manchester Central on the evening of **Wednesday 25th March 2015** from 17:00hrs. The Welcome Reception is included in the registration fee.

Committee Meetings

Abstract Reviewers 2015 Meeting

Adult Cardiac Clinical

Mr Peter Braidley (lead) /
Mr Clinton Lloyd (lead)
Vassilios Avlonitis
Mr Neil Cartwright
Mr Mark Field
Mr Andrew Goodwin
Mr Ian Mitchell
Joseph Zacharias

Congenital

Mr Tim Jones (lead)
Mr Olivier Ghez
Mr Asif Hasan

ACTA

Donna Greenhalgh/Niall O'Keeffe (lead)
Dr Peter Alson
Dr Andrew Klein
Dr David Smith
Dr Ravi Gill

Adult Cardiac Scientific

Dr David Chambers (lead)
Mr John Dark
Mr Neil Howell
Mr David Jenkins
Mr Gavin Murphy
Mr Alex Shipolini

Thoracic

Mr Sion Barnard/Mr Rajesh Shah (lead)
Mr Tim Batchelor
Mr Richard Milton
Miss Carol Tan

Advanced Heart & Lung Failure Surgery (and Miscellaneous)

Mr Steve Clark (lead)
Mr Jorge Mascaro
Mr Aaron Ranasinghe
Ms Catherine Sudarshan
Mr Nizar Yonan

Forum

Mrs Christina Bannister (lead)
Ms Tara Bartley
Mr Calum Buchanan
Ms Helen Munday

Committee Meetings

Programme Committee 2015 Meeting

Lead Reviewers

Mrs Christina Bannister	CT Forum
Mr Peter Braidley	Adult Cardiac Clinical
Dr David Chambers	Adult Cardiac Scientific
Mr Steve Clark	Advanced Heart & Lung Failure Surgery (and Miscellaneous)
Mr Clinton Lloyd	Adult Cardiac Clinical
Mr Sion Barnard/Mr Rajesh Shah	Thoracic
Mr Tim Jones	Congenital

Social Media

Social Media account details to be included in printed programme and apps

[@SCTSUK](#)

[@SCTS_CTFORUM](#)

www.facebook.com/SCTSGBI

www.facebook.com/SCTSforum



Prizes and Scholarships

SCTS 2014 Prize Winners

Ronald Edwards Medal	A Alassar
John Parker Medal	S Qureshi
Society Thoracic Medal	M Will
Best CT Forum Presentation	K Morley
Patrick Magee Medal	O Brown
Bob Bonser Prize	M Bashir
BASO Prize	M Will
Swann-Morton Prize	D Burns
Best CT Forum Poster	S Sherwood
Best Cardiac Poster	M Bashir
Best Thoracic Poster	L Okiror
Best Cardiac Surgical Movie	M Acharya
Best Thoracic Surgical Movie	M Will

The winners will be presented with their medals at the annual dinner

ACTA 2015 Awards

Best scientific oral presentation
Best clinical presentation/poster

SCTS 2015 Awards

Ronald Edwards Medal	best scientific oral presentation
John Parker Medal	best clinical presentation
Society Thoracic Medal	best thoracic presentation
Society CT Forum Medal	best CT Forum presentation
Patrick Magee Medal	best student poster presentation
Bob Bonser Prize	best presentation on aortic surgery
BASO Prize	best presentation involving Cancer
Best CT Forum Poster Prize	
Best Cardiac and Thoracic Poster Prizes	
Best Cardiac and Thoracic Surgical Movie Prizes	

The winners will be announced by email after the annual meeting.

SCTS 2015 Scholarships

The Marian & Christina Ionescu Travelling Scholarship



'CORE VALUES'

Professional, collaborative and passionate

With Customers, with Supplier Partners and with each other

Partnering for Innovation

With Customers, with Supplier Partners and with each other

Relationships built on Integrity and Dignity

With Customers, with Supplier Partners and with each other

Striving for Better Patient Outcomes through Quality Product and Service Excellence

CARDIO SOLUTIONS

Celebrating 10 years in the UK Cardiovascular Market

SCTS and Ethicon Educational Partnership 2015 Calendar

Date	Title	Target Audience
21 st - 22 nd Jan	Intermediate Viva Course	ST5 with a National Training Number
9 th - 12 th Feb	ST6A+B - Cardiothoracic Subspecialty Course	ST6 with a National Training Number
2 nd - 5 th March	Revision/Viva Course for FRCS (C-Th)	ST7 with a National Training Number
26 th March	SCTS Fellowships x2	See advert for criteria
7 th April	Surgical Care Practitioner Master Class on Thoracic Surgery	Surgical Care Practitioners, CT1 and CT2
12 th May	VATS Theatre Personnel Course	Theatre Personnel in units practicing VATS Surgery
22 nd May	VATS Theatre Personnel Course	Theatre Personnel in units practicing VATS Surgery
20 - 22 nd May	Cardiothoracic Intensive Therapy & Surgical Access	ST3 with a National Training Number
18 th June	Ethicon and SCTS National Thoracic Symposium	Consultant Surgeons
19 th June	Ethicon and SCTS National Cardiac Symposium	Consultant Surgeons
20 - 22 nd June	Core Thoracic Surgery Course	ST4 with a National Training Number
30 th June	Surgical Care Practitioner Master Class on Cardiothoracic Surgery	Surgical Care Practitioners, CT1 and CT2
July (Dates TBC)	Non-Technical Skills for Surgeons (NOTSS) Course	ST5 with a National Training Number
8 th September	Surgical Care Practitioner Master Class on Cardiac Surgery	Surgical Care Practitioners, CT1 and CT2
4 - 6 th November	Professional Development Course	ST8 with a National Training Number
November (Dates TBC)	Introduction to Speciality Training in CTS	ST3 with a National Training Number
December (Dates TBC)	Core Cardiac Surgery Course	ST4 with a National Training Number
December (Dates TBC)	Essential Skills in Cardiothoracic Surgery	ST2 with a National Training Number

For more information please visit the Ethicon educational stand at location 44-45