As vascular surgeons, our labors seem endless. But with the arrival of fall, it is important to take time to reflect on both the labors of 2012 and the promise of the approaching New Year. As such, there is no better way to start the New Year than attending the Annual Meeting of the Southern Association for Vascular Surgery. This year will be special. The 37th Annual Meeting will be held January 23-26, 2013 at the Atlantis on Paradise Island in the Bahamas. This is our second visit to Atlantis. For those who attended the meeting in 2010, you will remember a record-breaking event, both in membership attendance and engagement. For those who did not attend, you have an opportunity to experience this magnificent venue by attending this year. Atlantis is the perfect setting for our meeting which strives to create the best mix of scientific rigor, professional collegiality and fun. It is truly one of the most spectacular ocean resorts in the world!

The Atlantis is a family-oriented venue, with attractions for all ages. In addition to its beautiful accommodations, it includes 19 bars and 21 restaurants, ranging from world-class dining rooms to casual eateries. There are 10 pools and 3 beaches with a variety of water activities including snorkeling and scuba diving. There is a dolphin bay, where you can take a swim with the dolphins; the 63 acre Aquaventure, a magnificent water experience; and 3 lagoons, with marine habitat that includes more than 50,000 marine animals representing roughly 200 species. With an average January temperature between 75 and 85 degree, this should be an amazing week. For those interested, the nightlife is spectacular. The Atlantis

(continued on page 5)
THURSDAY, JANUARY 24, 2013

SCIENTIFIC SESSION I
1. The Need for Treatment of Hypotension or Hypertension after Carotid Endarterectomy is Associated with Increased Perioperative Mortality and Morbidity
2. Outcomes of Medically Managed Carotid Artery Dissection After Repair of Acute Aortic Dissection
3. The Effect of Surgeon’s Specialty and Volume on Perioperative Outcome of Carotid Endarterectomy
4. Optimal Medical Therapy Predicts Amputation-Free Survival in Patients with Chronic Critical Limb Ischemia
5. Carotid-Subclavian Bypass and Subclavian-Carotid Transposition in the TEVAR Era

FOUNDERS’ AWARD PAPER
Improved Procedural, Hemodynamic, and Late Clinical Outcomes Using Intravascular Ultrasound Anatomic Guidance During Carotid Artery Stent-Angioplasty
Megan I. Carroll, Patrick McNair, Martin R. Back, Neil Moudgill, Murray L. Shames, Karl A. Illig, Brad L. Johnson, Paul A. Armstrong, University of South Florida, Tampa, FL

SCIENTIFIC SESSION II
6. Stress Tests are Overutilized in the Preoperative Evaluation of Endovascular Aneurysm Repair
7. Percutaneous Endovascular Aortic Aneurysm Repair (PEVAR): Results from the First Prospective, Multicenter Randomized Trial
8. VIDEO: Sequential Catheterization Amid Progressive Endograft Deployment for Fenestrated and Branched Endovascular Aortic Aneurysm Repair
9. A Case Matched Validation Study of Anatomic Severity Grade Score in Predicting Reinterventions after Endovascular Aortic Aneurysm Repair
10. The Risk of Elevated Radiation Dose in Complex Endovascular Procedures: Surgeon Education Improves Patient Safety

THE JESSE E. THOMPSON, M.D.
DISTINGUISHED GUEST LECTURER
George Andros, Van Nuys, CA

FRIDAY, JANUARY 25, 2013

ENDOVASCULAR CASE CONFERENCE
E1. Endovascular Repair of a Ruptured Subclavian Artery Aneurysm in a Patient with Ehlers-Danlos Syndrome Using a Sandwich Technique
E2. Urgent Fenestrated Endovascular Aortic Aneurysm Repair (FEVAR) for a Contained Rupture of a Juxtarenal Pseudoaneurysm Secondary to Transrenal Stent Fracture
E3. Endovascular Repair of Blunt Popliteal Artery Injury via Retrograde Tibial Access
E4. Complex Endovascular Peri-Renal Aortic Aneurysm Repair Preserving Perfusion to a Horseshoe Kidney

SCIENTIFIC SESSION III
11. Pulmonary Embolism Risk Following Upper Extremity DVT in a Single-Center Series of 500 Consecutive Patients
12. Early Outcomes After Inferior Vena Cava Thrombectomy and Reconstruction For Advanced Renal Cell Carcinoma With Tumor Thrombus
13. VIDEO: Nutcracker Syndrome in a Pelvic Kidney Treated with Open Iliac Vein Reconstruction

SCIENTIFIC SESSION IV
14. A Six-Year Experience with the Proximal Radial Artery Fistula - Does a Previous Access Matter?
15. Fistula Flow Volumes: How Accurate Are They in Predicting Maturity?
16. VIDEO: A Novel Technique to Remove Inferior Vena Cava Filters Using a Homemade Snare Device

CASE REPORT PANEL DISCUSSION
C1. Utilizing Hybrid graft in Open Repair of TAAA to Decrease Mesenteric and Renal Ischemia Time
C2. Perioperative Arteriovenous Fistula and Pseudoaneurysm after Plantar Fascia Release: Diagnosis and Intervention
C3. Fetal Demise Due To Uterine Trauma With Massive Intra-peritoneal Hemorrhage Associated With Chronic Perforation of the Inferior Vena Cava By An Infrarenal Filter: A Case Report With Call For Definitive Consensus Regarding Filter Positioning In Nonpregnant Women of Child Bearing Age
C4. Minimally Invasive Management Of Symptomatic Pulmonary Sequestration With An Aneurysmal Feeding Vessel: Coil Embolization Combined With Thorascopic Resection

PRESIDENTIAL ADDRESS
Vascular Surgery, Self Awareness and the University of South Carolina School of Medicine Greenville
Spence M. Taylor
Greenville Hospital System
University Medical Group, Greenville, SC
SATURDAY, JANUARY 26, 2013

BASIC SCIENCE SESSION
B1. Interleukin-1β Pathway Antagonism Prevents and Treats Experimental Aortic Aneurysms
B3. Alpha 2a Agonist Dexmedetomidine Intermits Macrophage Toll-Like Receptor 4 Signaling in Murine Model of Spinal Cord Ischemia Reperfusion
B4. Homocysteine Upregulates Expression Of NR2D-Containing N-Methyl-D-Aspartate Receptors In A Rat Carotid Endarterectomy Model

MODERATED POSTER SESSION
P1. Remaining or Residual First Ribs are the Cause of Recurrent Thoracic Outlet Syndrome
P2. Post-Traumatic Resuscitation Affects Stent Graft Sizing in Patients with Blunt Aortic Injury
P3. Endovascular Treatment of Aortic Saddle Embolism Using Covered Stents, Effecting Full Neurologic Recovery
P4. Comparison of Type I Endoleak Rates in Dacron Versus Native Aorta Landing Zones During Thoracic Endovascular Aortic Repair
P5. Alvimopan Reduces Post-operative Ileus in Open Aortic Surgery Patients
P6. Infected Endograft is a Dangerous Late Complication of EVAR
P7. Mid-term Outcomes of Retrograde Endovascular External to Internal Iliac Artery Endograft Bypass for Hypogastric Preservation with Complex Aorto-Iliac Aneurysms
P8. Outcomes After Carotid Artery Surgery: Does Race Make A Difference?

P9. Functional Outcome and Mortality after Open and Endovascular Secondary Intervention for Thoracic Endovascular Aortic Repair
P10. Neoaortoiliac System (NAIS) for Failed Aortic Reconstructions is a Durable Solution in Young Patients
P11. Subclavian Revascularization in the Age of TEVAR: Comparison of Outcomes to Patients with Occlusive Disease
P12. The Fate of Aneurysmal Landing Zones Used for Endovascular Aortic Repair
P13. Living in a Medically Underserved County is an Independent Risk Factor for Major Limb Amputation

SCIENTIFIC SESSION V
17. Atherectomy Offers No Benefits Over Balloon Angioplasty in Tibial Interventions for Critical Limb Ischemia
18. Prospective, Multicenter Analysis of Peri-Operative Patency for Tibial Bypass: Comparison Among Different Conduit Configurations
19. Spliced Arm Vein Grafts For Critical Lower Limb Ischemia

SCIENTIFIC SESSION VI
20. Comparison of Long-term Outcomes following Endovascular Repair of Abdominal Aortic Aneurysms Based on Size Threshold
21. VIDEO: Percutaneous Endovascular Repair Of Juxtarenal Aortic Aneurysm Using Customized Cook Zenith Fenestrated Stent Graft
22. Long-Term Results for Endovascular Repair of Acute Complicated Type B Aortic Dissection
23. In Situ Laser Fenestration During Thoracic Endovascular Aortic Repair is an Effective Method for Left Subclavian Artery Revascularization

Program Details and Online Registration available at: www.savs.org
Deadline for Pre-Registration: December 18, 2012

* Completion of this course qualifies for MOC Part 2, Self Assessment Credit

SESSION I: CHRONIC CEREBROSPINAL VENOUS INSUFFICIENCY
Overview of Multiple Sclerosis: Classifications and Current Medical Therapy
Stuart I. Myers
What is the Evidence of Role of CCVI in MS?
Bauer E. Sumpio

CONTROVERSIES: VENOUS ANGIOPLASTY FOR MULTIPLE SCLEROSIS
The Good: Data Supporting Potential Benefit of Venous Angioplasty in MS Patients
John W. Hallett
The Bad: Complications, Pitfalls, and How to Avoid Them
Manish Mehta
The Ugly: Medical Tourism and Its Implications
Cynthia K. Shortell
Putting It All Together: Where Do We Go From Here?
Manish Mehta

PANEL DISCUSSION

SESSION II: VENOUS THROMBOEMBOLISM
THROMBOLYSIS FOR PULMONARY EMBOLIZATION
Overview and Basis of the Chest Guidelines for Treatment of PE
Lois A. Killewich
The Concept of “Sub-massive” PE: Should We Modify the Guidelines?
Raghuveer Vallabhaneni

CONTROVERSIES: CATHETER DIRECTED V. MECHANICAL THROMBOLYSIS OF PE
Catheter Directed Thrombolysis of PE: Technical Tips and Why It Should replace Systemic Therapy
Peter H. Lin
Mechanical Thrombolysis of PE: Technical Tips and Why It Should Replace Systemic Therapy
Christopher J. Kwolek

CONTROVERSIES: IVC FILTERS IN THROMBOLYSIS
IVC Filters Should Be Used on All Cases of Thrombolysis for Venous Thromboembolism
Panagiotis Kougias
IVC Filters are Unnecessary during Thrombolysis for Venous Thromboembolism
Mark G. Davies

PANEL DISCUSSION

SESSION III: RENAL THERAPIES
RENAI SYMPHATIC DENERVATION
Pathophysiology and Historic Data on Sympathectomy for Hypertension
Fred W. Rushton
Overview of the Technology: Comparing the Devices and When They May Be Available
Matthew S. Edwards
What is the Potential for Endothelial Damage from Renal Sympathetic Ablation?
Timothy S. Roush
Outcomes from International Studies and Potential Treatment Algorithms
Jacob G. Robison

CONTROVERSIES: RENAL REVASCULARIZATION POST ASTRAL TRIAL
Medical Therapy is the Treatment of Choice for Renovascular Hypertension
Matthew A. Corriere

Renal Revascularization is the Treatment of Choice for Renovascular Hypertension
Randolph L. Geary

PANEL DISCUSSION

SESSION IV: AORTIC TECHNOLOGIES
FENESTRATION FINALLY!
Why the Wait? Analyzing the Issues the Device Has Had To Overcome
Karthikeshwar Kasirajan
Overview of International Outcomes on Fenestrated Grafts
Maureen K. Sheehan
Technical Tips and Trouble Shooting for Device Implantation
Joseph J. Ricotta
Progress Toward “Off the Shelf” Fenestrated Devices (Cook, Endologix)
Gustavo S. Oderich

PANEL DISCUSSION

SESSION V: UPDATES ON OTHER TECHNOLOGIES
Nellix
Ross Milner
Multi-layer Stent, Does it Work?
Michael B. Freeman
Branched Grafts
Mark A. Farber
Parallel Endografts: Competing, Complimentary, or Obsolete?
Luis A. Sanchez

PANEL DISCUSSION

SESSION VI: AORTIC DISSECTIONS
CONTROVERSIES: STENT GRAFTS FOR ACUTE TYPE B DISSECTION. IS IT TIME FOR A PARADIGM SHIFT?
Medical Therapy Remains the First Line Treatment for Uncomplicated Dissection
William D. Clouse
Stent Grafts Should Be the First Line Treatment for Uncomplicated Dissection
James H. Black, III

CONTROVERSIES: OPTIMAL TREATMENT STRATEGY FOR STENT-GRAFTS IN TYPE B DISSECTION
The Optimal Strategy is to Cover Only the Entry Tear
H. Edward Garrett
The Optimal Strategy is for More Extensive Stent Graft Coverage to Minimize Re-entry
Frank R. Arko
The Optimal Strategy is a Composite Graft
Eugene M. Langan

PANEL DISCUSSION

SESSION VII: MISCELLANEOUS NEW TECHNOLOGIES
Sorolpath
Erin M. Moore
The HERO graft
Ehab E. Sorial
ClariVein
Lori L. Pounds

PANEL DISCUSSION

WRAP UP
David J. Minion
FROM THE PRESIDENT
(continued from page one)

Casino spans 100,000 square feet and includes 850 slots and 80 game tables. As well, there is world-class golf where this year our annual golf tournament will be held at the Ocean Club Course, on the Atlantis property. Local Arrangements Chair Jay Robison is planning all the other sporting events as well. Again, there should be something for everyone, so plan to bring your family and enjoy yourself.

While I am excited about the meeting location, I am most looking forward to the scientific venue which may be the best ever in the history of the Association. Program Committee Chair Marc Mitchell and his team have assembled an outstanding program which includes many “firsts”. We will have the usual plenary sessions which feature open papers and interesting cases, panel discussions and interactive participation from the floor. But we will also have videos and a poster session. Continuing Medical Education Chair David Minion has put together an outstanding Post Graduate Course that will examine the latest technology, hot topics and controversies in vascular surgery. Recorder Matt Edwards has again organized a mock certifying board examination for our Candidate Members and, like last year, we will offer self-assessment Continuing Medical Education credit to our participants. Please take the time to review all the features outlined in this Newsletter. I really believe we have achieved our objective of putting together the complete academic venue where the practicing vascular surgeon can come and meet all of his/her academic needs in a place where rest and relaxation will refresh for another year.

I am especially pleased that Dr. George Andros from Van Nuys, CA will be our 2nd Jesse Thompson Honorary Guest Lecturer. For those that do not know Dr. Andros, you will find him to be one of the warmest and most engaging individuals you will meet. As a private practice vascular surgeon who has devoted his professional life to a variety of academic pursuits, he is the quintessential role model for the practicing vascular surgeon. As well, Dr. Andros is one of the most respected experts on the diabetic foot and educates hundreds of specialists each spring at his world-class post graduate course in Los Angeles. He is a great fit and I know you will enjoy him.

Lastly, my wife Marie and I would like to extend a special invitation for you to attend this Annual Meeting where I will finish celebrating my Presidency. I plan to bring my entire family and a large contingency from my extended professional family in Greenville, SC. We really want you to do the same. The Southern Association for Vascular Surgery is the best association of people that I know. To be its President has been a special honor and a crowning achievement. Out of gratitude, we pledge to be accommodating hosts and truly want you there to make it special. If Marie and I can do anything to help as you make your plans, please do not hesitate to call. Have a wonderful holiday season and we look forward to seeing you at the Atlantis Resort in January.

2013 Annual Meeting Schedule at a Glance

**WEDNESDAY, JANUARY 23, 2013**
- 6:30 a.m. - 6:30 p.m. Registration
- 7:00 a.m. - 12:00 p.m. Mock Oral Exams
- 9:00 a.m. - 5:00 p.m. Speaker Ready Room
- 12:30 p.m. - 4:30 p.m. Postgraduate Course
- 2:20 p.m. - 2:40 p.m. Coffee Break
- 4:00 p.m. - 6:00 p.m. Executive Council Meeting
- 6:30 p.m. - 8:00 p.m. Welcome Reception

**THURSDAY, JANUARY 24, 2013**
- 6:30 a.m. 5K Fun Run
- 6:30 a.m. - 7:30 a.m. New Members Breakfast
- 6:30 a.m. - 1:00 p.m. Registration
- 6:30 a.m. - 1:00 p.m. Speaker Ready Room
- 7:00 a.m. - 8:00 a.m. Continental Breakfast
- 7:00 a.m. - 11:00 a.m. Exhibits
- 7:30 a.m. - 8:00 a.m. Welcome & Introduction
- 8:00 a.m. - 12:15 p.m. Scientific Sessions
- 9:00 a.m. - 11:00 a.m. Hospitality Suite
- 10:00 a.m. Women’s Tennis Open Play
- 10:05 a.m. - 10:35 a.m. Coffee Break – Visit Exhibits
- 12:15 p.m. - 12:45 p.m. Jesse E. Thompson, MD Distinguished Guest Lecture
- 6:30 p.m. - 8:00 p.m. General Reception

**FRIDAY, JANUARY 25, 2013**
- 6:30 a.m. - 7:30 a.m. Continental Breakfast
- 6:30 a.m. - 11:00 a.m. Exhibits
- 6:30 a.m. - 1:00 p.m. Registration
- 6:30 a.m. - 1:00 p.m. Speaker Ready Room
- 7:00 a.m. - 8:00 a.m. Endovascular Case Conference
- 8:00 a.m. - 10:30 a.m. Scientific Sessions
- 9:00 a.m. - 9:30 a.m. Coffee Break – Visit Exhibits
- 9:00 a.m. - 11:00 p.m. Hospitality Suite
- 10:30 a.m. - 11:30 a.m. Case Report Panel Discussion
- 11:30 a.m. - 12:15 p.m. Presidential Address
- 12:45 p.m. Golf Tournament
- 1:00 p.m. Men’s Tennis Open Play
- 7:00 p.m. - 8:00 p.m. President’s Reception
- 8:00 p.m. - 11:00 p.m. President’s Banquet
- 10:00 p.m. - 1:00 a.m. President’s After Party

**SATURDAY, JANUARY 26, 2013**
- 6:30 a.m. - 7:30 a.m. Continental Breakfast
- 6:30 a.m. - 11:00 a.m. Registration
- 6:30 a.m. - 11:00 a.m. Speaker Ready Room
- 6:30 a.m. - 11:00 a.m. Exhibits
- 7:00 a.m. - 8:00 a.m. Basic Science Session
- 8:00 a.m. - 9:00 a.m. Moderated Poster Session
- 8:00 a.m. - 10:00 a.m. Hospitality Suite
- 9:00 a.m. - 11:50 a.m. Scientific Sessions
- 10:00 a.m. - 10:30 a.m. Coffee Break – Visit Exhibits
- 11:50 a.m. Adjourn
- 11:50 a.m. - 12:20 p.m. Annual Business Meeting (members only)

The SAVS reserves the right to change the program at any time.
2013 ANNUAL MEETING

The 37th Annual Meeting of The Southern Association for Vascular Surgery will be held January 23-26, 2013 at the Atlantis, Paradise Island, Bahamas. Details regarding the meeting and hotel registration information may be found online (www.savs.org). We encourage you to make your airline reservations early in order to secure the best possible fares and itinerary.

Postgraduate Course
A postgraduate course will be held on Wednesday, January 23 and will focus on “New Horizons: A Review of the Latest Technology, Hot Topics, and Controversies in Vascular Surgery.” The full program is online at www.savs.org.

Mock Oral Board Examinations
Mock oral board examinations will be offered to individuals preparing for the Vascular Surgery Certifying Examination on Wednesday, January 23. Examinees should reside in the states comprising the SAVS region. To register, please visit the SAVS website: www.savs.org.

Guests
Members who wish to invite non-member physicians as their guests should contact the office of Eric D. Endean, MD, Department of Surgery, University of Kentucky Chandler Medical Center, 800 Rose Street, Lexington, KY 40536-0293, (859) 323-63466x243 / edende0@uky.edu. Invited guests will receive a letter of invitation and the necessary reservation forms, as well as meeting information.

ACTIVE, CANDIDATE, AND CORRESPONDING MEMBERSHIPS

If you wish to sponsor a colleague for SAVS Membership, an application form must be requested from the Secretary-Treasurer by the sponsoring member.

Qualifications for Active Membership:
1. The active membership consists of those surgeons recommended by the Executive Council from the states of Alabama, Arkansas, Florida, Georgia, Kentucky, Louisiana, Maryland, Mississippi, North Carolina, South Carolina, Tennessee, Texas, Virginia, West Virginia, and Washington, DC;
2. Applicants must have been in practice for three years, be certified by the American Board of Surgery (ABS) and/or the American Board of Thoracic Surgery, with Fellowship in the American College of Surgeons, and, with rare exception, be graduated from an approved vascular surgery training program and be certified by the Vascular Surgery Board of the ABS;
3. Applicants not certified by the Vascular Surgery Board of the ABS must document at least fifty (50) major peripheral vascular reconstructive procedures in each of the three years preceding application, exclusive of residency and fellowship training;
4. The application must be accompanied by letters of sponsorship (1) and endorsement (2) by three members in good standing of the Association. One of these members must be from the Applicant’s home state.

Qualifications for Candidate Membership:
1. The candidate membership consists of Fellows in approved Vascular Surgery training programs, General Surgery residents accepted into approved Vascular Surgery training programs, or Vascular Surgeons who do not yet meet the requirements for active membership within the region of the SAVS;
2. A letter of sponsorship is required from either the applicant’s Program Director or a member in good standing of the Association from the applicant’s home state;
3. Candidate membership has a maximum term of five years after training.

Qualifications for Corresponding Membership:
1. Corresponding membership consists of those surgeons residing outside the United States recommended by the Executive Council.
2. Applicants must meet the requirements for Active Membership in Article I, Section 5(a) of the bylaws.
3. Certification in Vascular Surgery from the American Board of Surgery or its equivalent is highly desirable.
4. The application must be accompanied by letter of sponsorship (1) and endorsement (2) by three members in good standing of the Association. All application materials should then be returned to the office of the Secretary-Treasurer, Eric D. Endean, MD, Department of Surgery, University of Kentucky Chandler Medical Center, 800 Rose Street, Lexington, KY 40536-0293, (859) 323-63466x243 / edende0@uky.edu.
WELCOME RECEPTION
Wednesday, January 23 / 6:30 pm - 8:00 pm
The Welcome Reception offers a chance to renew old acquaintances and unwind on the Royal Deck. (Resort Casual)

5K FUN RUN
Thursday, January 24 / 6:30 am
What a better way to start your day than a fun 5K run. The run will start at 6:30 am on the Royal Deck. Enjoy cool refreshments and pick up your official Fun Run T-shirt after you cross the finish line.

TENNIS OPEN PLAY
Women’s Tennis Open Play
Thursday, January 24 / 10:00 am
Men’s Tennis Open Play
Friday, January 25 / 1:00 pm
Held on the Tennis Courts and open to all skill levels, this fun event is a perfect way to mingle with colleagues.

GENERAL RECEPTION
Thursday, January 24 / 6:30 pm - 8:00 pm
Don’t miss the chance to enjoy a cocktail after a day of scientific sessions on the Dig Deck.

GOLF TOURNAMENT
Friday, January 25 / 12:45 pm
The Golf Tournament will be held at the Ocean Course. A fee will be charged. Please sign up when you register.

PRESIDENT’S RECEPTION & BANQUET
Friday, January 25 / 7:00 pm – 11:00 pm
The Reception will be held in the Grand Foyer and the Banquet will be held in Grand Ballroom EF. (Cocktail Attire)

PRESIDENT’S AFTER PARTY
Friday, January 25 / 10:00 pm – 1:00 am
Continue the celebration and unwind after a night of dancing, with a nightcap in the Fathoms.

Atlantis Paradise Island, Bahamas