Addressing Educational needs

• the adoption of endovascular techniques has diminished the exposure of trainees and specialists to open aortic surgery

- endovascular approaches to aortic pathology often require adjunctive, less frequently used open techniques
- the decreased exposure to open aortic pathology often required in emergency setting does influence outcomes
- achieving competence for open aortic surgery, promoting specialist skills and preventing de-skilling may be obtained using alternative methods such as this course

Course objectives

- to practice the common vascular exposures used for thoracic and abdominal aorta on cadavers
- to practice and discuss open surgical techniques for aneurysmal aortic disease, aortic dissections and infected aortas, thoracic, abdominal and thoracoabdominal
- to discuss needs, strategic steps, milestones in our aim of running a high quality aortic service in the West Yorkshire region

Breaks

09.30 -10.00 - Coffee/tea/Registration

12.00-13.00 - Lunch

19.00 - Course dinner at Thai Edge (Drinks from 18.30)

COURSE PROGRAMME - DAY 1(13 JUNE 22)



SEMINAR ROOM 9.58B

09.30-10.00 - Registration

10.00 - 10.15 - Opening and introduction - Mrs N Maftei, Mrs B Evans, Mr T Wallace, Mr G Maritati, Mr W ElMahdy, Prof SV Homer

10.15 - 10.30 - Introduction to cadaveric session 1 - Cardiopulmonary bypass access for proximal aortic surgery (femoral/axillary/carotid), aortic arch vessels isolation and zone planning. Miss B Evans, Consultant Cardiac Surgeon, LTHT/Mr Elmahdy, Consultant Cardiac Surgeon, LTHT

10.30 - 12.00 (1.5 hrs) - Cadaveric session 1 (axillary artery dissection - 30 mins; femoral artery dissection -30 mins; arch vessels isolation and zone planning - 30 mins)

12.00-13.00 - Lunch and simulation/models demonstrations (Artivion, Medtronic, Le Maitre)

13.00 - 13.20 - Introduction to cadaveric session 2 - Proximal aorta procedure: Aortic root replacement 'Bentall' - Ascending aorta- hemiarch +/- Ascyrus Medical Dissection Stent (AMDS) - Total arch replacement +/-Frozen Elephant Trunk (FET)/Arch debranching + TEVAR). Miss B Evans, Consultant Cardiac Surgeon, LTHT/Mr Walid Elmahdy, Consultant Cardiac Surgeon, LTHT

13.20 - 13.40 - Left heart bypass for thoraco-abdominal aortic surgery - Mr Ahmed Othman, Consultant Cardiac Surgeon, Liverpool Heart and Chest Hospital

13.45 - 16.15 (2.5 hrs) - Cadaveric session 2 - 2 groups/3 cadavers each- (Aortic root replacement/Bentall - 60mins; demonstration of AMDS/1 per group - 15 mins; demonstration of FET/1 per group - 15 mins; total arch replacement + debranching - 60 mins)

16.15 - 16.30 - Debrief and panel discussion

19.00 - Course dinner (drinks from 18.30) - Thai Edge, 7 Calverley St, Leeds LS1 3DB

FACULTY/TUTORS:

AHMED NASSEF

AHMED OTHMAN

ANDREW MAVOR

AMIT CHAWLA

BETSY EVANS

GABRIELE MARITATI

JENNY ROBSON

MORAD SALLAM

NONICA MAFTEI

PHIL JACKSON

PROF SV HOMER

ROSIE DARWOOD

SAPNA PUPPALA

TIM STANSFIELD

TOM WALLACE

WALID ELMAHDY

Breaks

08.30 -09.00 - Coffee/tea/Registration 12.00-13.00 - Lunch

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Promoting the West Yorkshire Aortic Centre



COURSE PROGRAMME - DAY 2 (14 JUNE 22)

Thoraco-abdominal aorta

SEMINAR ROOM 9.58B

08.30-09.00 - Registration

09.00 -09.30 - Introduction to cadaveric session 1: Approaches to descending thoracic and retroperitoneal abdominal aorta (left lateral thoracotomy); exposure for different extents of aortic aneurysm, diaphragmatic division;'lombotomy'. Repair of proximal aneurysm extent (choice of supra/juxta/infra-renal, Types I, II, II and IV extent), left renal re-vascularisation - Mr Gabriele Maritati, Consultant aortic surgeon Rome, Italy; Mr Morad Sallam Consultant Vascular Surgeon Guy's and St Thomas's Hospital London, Mr Andrew Mavor Consultant Vascular and Trauma surgeon LTHT

9.30-11.30 - Cadaveric session 1 (2 hrs) - 1/2 faculty members/group/cadaver; 3 trainees per cadaver (most junior as observer) - trainees led with faculty input of technical skills - Control of descending thoracic aorta and retroperitoneal abdominal aorta; diaphragmatic division - 30 mins; aortic replacement (choices of supra/juxta/infra-renal, Type II,II, III, IV - 60 mins; left renal re-vascularisation procedures to facilitate hybrid repairs - 30 mins)

11.30 - 12.00 - Anaesthetic and critical care challenges in complex aortic surgery - Dr Amit Chawla, Consultant Anaesthetist Guy's and St Thomas's Hospital London and Dr Phil Jackson, Consultant Anaesthetist and Critical care, LTHT;

12.00 -13.00 - Lunch with simulation/models demonstrations (Artivion, Medtronic, Le Maitre, Lombard)

13.00 - 13.30 - Aortic imaging and case presentations/discussions - Dr Sapna Puppla, LTHT

13.30 - 14.00 - Management of infected aorta - Mr Morad Sallam, Consultant aortic Surgeon, Guy's and St Thomas's Hospital;

14.00 - 14.15 - Introduction to cadaveric session 2 - Trans-peritoneal approaches (TP)/abdominal laparotomy - emergency/elective supra-celiac, supra-renal clamps, Mattox and Cattel-Braasch manoeuvres, TP aortic replacement (supra/juxta/infra-renal, visceral/renal re-vascularisation) - Mr Gabriele Maritati, Consultant aortic surgeon Rome, Italy; Mr Morad Sallam Consultant Vascular Surgeon Guy's and St Thomas's Hospital London, Mr Andrew Mavor Consultant Vascular and Trauma surgeon LTHT

14.15 - 16-15 - Cadaveric session 2 (2 hrs) - 1/2 faculty members/group/cadaver; 3 trainees per cadaver (most junior as observer) - trainees led with faculty input of technical skills (TP and incision/approach to aorta, supra-celiac/supra-renal clamps, Mattox and Cattel Braasch maneouvres - 45 min; TP aortic replacement - 45 min; visceral/renal re-vascularisation 30 min)

16.15 - 16.30 - Debrief, next year's course, close of course and feedback - N Maftei/T Wallace