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Jeudi, 03 juin 2021

Stream 3: SSCVasculaire &
SSCViscérale

17:35 - 19:05

SSCVasc

Communication libre

Vascular Access / Vein

Présidence: Stephan Engelberger (Baden), Hervé Probst (Morges)

Un grand merci aux supporters de cette séance (Product Placement: IVF Hartmann AG)

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| 1 | <p>Tele-proctoring in vascular surgery implementing percutaneous creation of arteriovenous fistula A. Isaak¹, A. Mallios², L. Gürke³, T. Wolff³, Presenter: A. Isaak¹ (¹Aarau, ²Paris, ³Basel)</p> |
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| 2 | <p>First experience with percutaneous arteriovenous fistula creation using the Ellipsys® vascular access system A. Isaak¹, A. Mallios², L. Gürke³, T. Wolff³, Presenter: A. Isaak¹ (¹Aarau, ²Paris, ³Basel)</p> |
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| 3 | <p>Challenges of percutaneous closure of temporary arteriovenous fistula A. Zdoroveac¹, R. Marti¹, L. Gürke², A. Isaak¹, Presenter: A. Zdoroveac¹ (¹Aarau, ²Basel)</p> |
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| 4 | <p>Early-cannulation arteriovenous grafts are safe and effective in avoiding recurrent tunneled central catheter infection S. Richarz^{1,2}, K. Stevenson², B. White², P. Thomson², A. Jackson², A. Isaak³, D. Kingsmore², Presenter: S. Richarz¹ (¹Basel, ²Glasgow, ³Aarau)</p> |
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| 5 | <p>Video: Implantable pump for intravenous treprostinil intravenous delivery in the treatment of pulmonary arterial hypertension: A technical teaching video. A. Dupuis, A. Peloso, F. Lador, C. Toso, Presenter: A. Dupuis (Geneva)</p> |
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| 6 | <p>External and internal jugular vein aneurysm - a systematic review with analysis of aggregate data L. Meuli¹, M. Nucera², H. Janka², M. Schindewolf², J. Schmidli², V. Makaloski², Presenter: L. Meuli¹ (¹Zurich, ²Bern)</p> |
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| 7 | <p>Initial single surgeon experience in the endovenous thermal ablation of saphenous veins using the new 1940 nm laser fiber G. Gemayel, Presenter: G. Gemayel (Meyrin)</p> |
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| 8 | <p>Dehydrated human amniotic membrane allograft with spongy layer to improve the outcome of complex non-healing venous ulcers E. Psathas, M. Menth, B. Egger, D. O. Mayer, Presenter: E. Psathas (Fribourg)</p> |
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Les paroles des communications libres sont de 6 minutes, suivi de 4 minutes de discussion.