CONGENITAL CARDIOLOGY TODAY

Timely News & Information for Congenital/Structural Cardiologists & Cardiothoracic Surgeons Worldwide

PICS Special Preview Issue Vol. 20 - Issue 7A

July 2022

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Welcome to the 25th Anniversary PICS Symposium

> Kamel Shibbani, MD; Damien Kenny, MD, FPICS; Ziyad M. Hijazi, MD, FPICS on behalf of all the PICS Directors & Co-Directors

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PICS_Society

Register Online for PICS Symposium 2022

https://register.rcsreg.com/r2/ pics2022/ga/top.html

Welcome

Dear Colleagues,

Join us in September to celebrate the 25th anniversary of the Pediatric Interventional Cardiovascular Symposium! We find ourselves inching closer to our yearly meeting and we could not be more excited for PICS 2022 as we celebrate 25 years of collaboration, innovation, and clinical excellence. We cannot wait to welcome you all in Chicago from Wednesday, September 7th, 2022, to Saturday, September 10th, 2022, to what promises to be another fantastic in-person meeting. This year, we have a wide array of topics that include a dedicated session for lymphatic interventions, Fontan interventions, and ACHD interventions, not to mention, our other main sessions about structural interventions for congenital patients, such as advanced 3D imaging, and transcatheter pmVSD closure. And of course, no PICS meeting would be complete without our live and taped cases from all around the globe! Finally, the PICS Society Fellows and Early Career course, launched last year to great success, makes a resounding come back this year and will be held on Monday, September 5th and Tuesday, September 6th – make sure you apply if you are an interventional fellow or early career staff, as spots are limited.

The Symposium will kick off on Wednesday, September 7th, with a welcome speech from Dr. Hijazi before we dive straight into our live cases. The first day's live cases, which will be broadcast from Qatar, Canada, and for the first time ever, from Cairo! A coffee break will allow us to catch our breath before the second round of live cases, which will take us all the way to lunch. Taped cases will follow for one hour and will lead to the first main session, which will revolve around advanced 3D imaging. For those interested in following up on up-and-coming devices in our field, make sure that you do not miss out on the breakout session on Wednesday, which discusses much awaited technologies such as bioresorbable stents, new PDA stents, stem cell derived pulmonary valves, and much more. A PICES session will also take place at the same time. The day will end with oral abstracts and a welcome reception at 6:00pm. We hope to see everyone there!





Symposium 2022

Pediatric and Congenital Interventional Cardiovascular Society







25 years of proud partnership. A lifetime of memories.

From the beginning, PICS has been a tremendous opportunity for learning about the latest innovations in treating patients with congenital heart disease. Each year, our team is grateful for the chance to speak with leading pediatric interventionalists from around the world. **Visit us at booth 415** to learn about our latest products, including additional BIB® lengths, the Z-6TM, and the G-Armor Stent®. We'll see you in Chicago!





We waste no time on Day 2, Thursday, September 8th, and we start off our day with another round of live cases! This time, we'll spend the morning with our colleagues from Chicago with all live cases on Day 2 being broadcast from the windy city. Rush, Lurie, and Advocate Children's will be welcoming us into their cath labs via satellite broadcast to take part in some great cases from 8:15am till about 1:00pm. The second day's main session is one that should not be missed. The lymphatic system will be center stage on Day 2 with a main session dedicated to the importance that this system plays in Congenital Heart Disease, and the advancements being made in understanding and treating it. Breakout sessions for the day include great topics, such as complications in the cath lab and challenges with new devices. A fantastic Latin Session will take us into the evening, just before the PICS Achievement Awards are handed out to wrap up Day 2 of our meeting.

Our third day, Friday, September 9th, will begin with an update from the Executive Director of our PICS Society, Mr. Norm Linsky, which will cover the amazing work that the society has been doing this past year! From there, we jump into live cases from Columbus, Denver, and Rochester, Minnesota, to take us through the morning and to lunch, which will include industry-sponsored symposiums. Main sessions abound on Friday with two fantastic sessions to attend. The first main session is dedicated to a growing population in congenital heart disease, our Fontan patients. We will cover topics ranging from conduit stenosis to collaterals to liver disease and much more. Our second main session is equally interesting and will cover structural interventions for congenital heart disease patients. The three breakout sessions for the day are our coarctation, non-cardiac interventions, and the ever-important Nursing and Associated Professionals breakout sessions. The end of the academic activities on Friday means the beginning of festivities, with our annual PICS Dinner set to take place from 7:00-10:00pm. We hope to see each and every one of you there!

Our final day will be Saturday, September 10th and will begin with our second to last main session for this year's PICS meeting. We start the day with the ACHD main session, which will be followed by our second main session of the day - transcatheter pmVSD closure. Breakout sessions for the day include a great session about decision-making in the cath lab and the ever popular "Debate" breakout session. Finally, an hour and a half of nightmare cases in the cath lab will pave the way to the closing remarks, and the official end of PICS 2022.

We cannot wait to welcome you all to Chicago for what promises to be a fantastic meeting! We are excited to see each and every one of you. As always, your participation is what makes this conference possible. We look forward to learning with, and from, all of you.

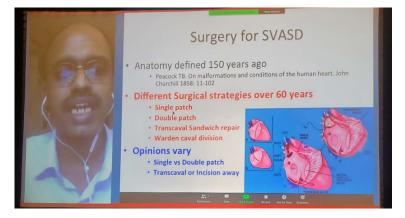
Yours truly,

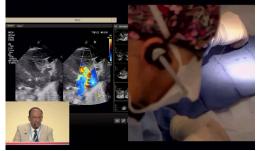
Kamel Shibbani, MD, Damien Kenny, MD, FPICS and Ziyad M. Hijazi, MD, FPICS on behalf of all the PICS Directors and Co-Directors





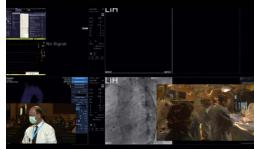
















Symposium 2022

Pediatric and Congenital Interventional Cardiovascular Society

SAVE THE DATE 7-10 SEPTEMBER MARRIOTT CHICAGO DOWNTOWN



CHICAGO

Focusing on the latest interventional catheter strategies for congenital and structural heart disease in children and adults.

www.picsymposium.com

www.CHDinterventions.org



Educational Objectives

PICS 2022 will provide physicians, nurses & technologists the opportunity to learn about many aspects of pediatric and adult congenital and structural interventional cardiology.

Learning Objectives

Upon completion of your participation in this educational activity you intend to incorporate the following into your practice of medicine:

- Utilize new interventional technologies and current strategies developed for the management of children and adults with Congenital and Structural Heart Disease.
- Incorporate into your practice the techniques for the proper placement of percutaneous valves, stents and devices for occlusion of septal defects.
- Initiate advances in diagnosis, evaluation and therapies for children and adults with Congenital Heart Disease.
- Identify the important factors which affect the long-term outcomes and quality of life in children and adults with Congenital Heart Disease.
- Incorporate alternative management strategies to transcatheter management for patients with congenital and structural heart defects.
- Utilize new clinical research advances in the care of children and adults with Congenital Heart Disease.
- Incorporate demonstrated practical techniques related to interventional cardiac therapies in patients with Structural and Congenital Heart Disease.
- Access the results of new research, and assess their potential applications to clinical practice.
- Improve basic knowledge and skills relevant to clinical practice.
- Assess the potential of technological innovations and advances to enhance clinical practice and problem solving.

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https://register.rcsreg.com/r2/pics2022/ga/top.html

Accreditation

In support of improving patient care, Rush University Medical Center is jointly accredited by the Accreditation Council for Continuing Medical Education (ACCME), the Accreditation Council for Pharmacy Education (ACPE), and the American Nurses Credentialing Center (ANCC), to provide continuing education for the healthcare team.

This activity is being presented without bias and with commercial support.

Rush University Medical Center designates this live activity for a maximum of 25.25 AMA PRA Category 1 Credit(s)™. Physicians should claim only credit commensurate with the extent of their participation in the activity.

Rush University Medical Center designates this live activity for a maximum of 25.25 nursing contact hour(s).

*ASRT credits pending

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Fontan (Collateral Vessel) Embolization

Dr. Laurie Armsby, OHSU, OR

- Vogler J, Gemender M, Samoilov D. Packing density and long-term occlusion after transcatheter vessel embolization with soft, bare-platinum detachable coils. Am J Interv Radiol. 2020;4(2). doi:10.25259/AJIR_31_2019.

 2. Enriquez J, Javadi S, Murthy R, et al. Gastroduodenal artery recanalization after transcatheter fibered coil embolization for prevention of hepaticoenteric flow: incidence and predisposing technical factors in 142 patients. Acta Radiol. 2013;54(7):790–794. doi:10.1177/0284185113481696.

 3. Fohlen A, Namur J, Ghegediban H, et al. Midterm recanalization after arterial embolization using hydrogel-coated coils versus fibered coils in an animal model. J Vasc Interv Radiol. 2019 Jun;30(6):940–948. doi:10.1016/j.jvir.2018.05.005. Epub 2018 Aug 31.
- a. 90 patients in GDA embolization. Mean follow-up 13.4 months.
- 142 patients in GDA embolization. Mean follow-up 101 days.

 Animal study comparing fibered coils to hydrogel coils showed recanalization rate >20%. n=12 sheep. Mean follow-up 4 months. The clinical results presented herein are for informational purposes only, and may not be predictive for all patients. Images used with permission. Consent on file at Penumbra, Inc. Individual results may vary depending on patient-specific attributes and other factors. Caution: Federal (USA) law restricts these devices to sale by or on the order of a physician. Prior to use, please refer to the Instructions for Use (IFU) for complete product indications, contraindications, warnings, precautions, potential adverse events, and detailed instructions for use. Please contact your local Penumbra representative for more information.

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The PICS Society

On behalf of our Board, our volunteer committees and our growing global membership, we are honored to introduce the PICS Society, the professional society devoted solely to specialists in minimally invasive treatment of Congenital Heart Disease (CHD). We represent the collective voice of physicians, nurses and technologists in our growing field. We foster the highest quality of care by connecting our community and learning from one another. Join us and strengthen our voice!

Our Vision

A envision a world where anyone who can benefit from minimally invasive techniques to treat CHD can access safe, effective care.

Our Mission

We promote the highest quality care globally for infants, children and adults with CHD through minimally invasive techniques. We partner to further knowledge and skills of all involved, fostering research, education and advocacy on behalf of you and the patients we are privileged to treat.

Background and History

We have a new name (and a new logo) but our history runs deep. Since 1997 The PICS Foundation has held the annual Pediatric & Adult Interventional Cardiac Symposium. The symposium has a 25 year history of excellence in education for physicians, nurses and technologists in our field. Each year the PICS symposium focuses on the newest technologies, teaching via live cases, dealing with (& avoiding) challenges, tried-and-true refreshers and much more. The PICS symposium will continue as best-in-class in the years to come.

2020 - Transformation and Growth

In recent years, many reached out to Symposium organizers recommending we create our own medical professional society devoted exclusively to our unique specialty. Common threads emerged, which quickly became the core values of our new professional organization, The PICS Society.

- Our perspective is truly international.
- Our leadership represents many nations.
- Our commitment is to the highest quality care.
- Rigorous, high standards for membership are key.
- Education is year-round, available anytime.
- We lead in developing clinical guidelines.
- We pursue universal advocacy principles.
- We partner with national societies to pursue shared goals.
- We take pride in working with our industry partners.
- We commit to mentoring the next generation of clinicians.
- We will ensure The PICS Symposium continues best in the field.
- We will be very affordable to all who wish to join us.

As a result, at last year's PICS Symposium, our founder Ziyad M. Hijazi, MD, MPH, FPICS announced the formal transformation of The PICS Foundation into The PICS Society, the professional global home for those dedicated to our field. This signifies transformation of our global profession into a recognized community of dedicated medical providers.

The PICS Society will continue to offer the annual PICS Symposium as our flagship event. As a professional society of colleagues globally, we will also do more—MUCH more.

Representative Activities

Adult Congenital Heart Disease

With the expanded armamentarium for interventional treatment of CHD, so too has the patient spectrum increased to include adults of all ages. This Committee coordinates education, guidelines, advocacy, early career, quality & industry engagement in Adult CHD (led by Drs. Jamil Aboulhosn, Eric Horlick and Lars Sondergaard).

Early Career Development

Our second annual Fellows & Early Career Course will be the premier such program for the next generation of CHD interventionalists. It is the first global program for the next generation of CHD interventionalists. We are engaging future leaders to learn, grow & lead (Drs. Aimee Armstrong, Darren Berman, Gianfranco Butera, Vivian Dimas and Dan Gruenstein).

Nurses, Technologists & Other Medical Professional

Our commitment to engage the entire care team in all we do is vital. We also are engaging with professional societies in allied disciplines (Dr. Sharon Cheatham, Ms. Kathleen Nolan and Ms. Emily Kish).

Advocacy

Patients who can be helped should not be barred from treatment due to non-medical issues. We will engage relentlessly with policymakers and payors in pursuit of that goal (Drs. John Cheatham, Hideshi Tomita and Cliff Kavinsky.)

Industry Relations

Thanks to decades of partnership between physicians and innovative companies, our ability to treat CHD has advanced exponentially. The PICS Society is proud of those partnerships on behalf of the patients we all serve (Drs. Evan Zahn, Tom Forbes and Gregor Krings).

PICS Annual Scientific Symposium

We look forward to welcoming everyone from around the globe inperson September 2022 at the Marriott Downtown in Chicago, Illinois.

Quality Improvement

Chaired by Dr. Ralf Holzer, we are leading the development of a major clinical document, "Standards for Cardiac Catheterization of Pediatric Patients & Patients with CHD" in partnership with six other societies, the first global comprehensive guideline for quality in our field. Many more Q.I. initiatives are in the queue (Drs. Ralf Holzer, Lisa Bergersen and John Thomson).

Evidence / Documents / Guidelines

The need is urgent. While other societies have produced excellent documents that address this in part, until now no international organization has focused solely on standards of care in our field. We are changing that (Drs. Doff McElhinney, Peter Ewert and Athar Qureshi).

Professional Education

With the evolution of The Foundation to become The PICS Society, we are expanding educational offerings: Master Class webinars and fellows-in-training courses; more are planned (Drs. Dan Levi, Teiji Akagi and Tom Jones).







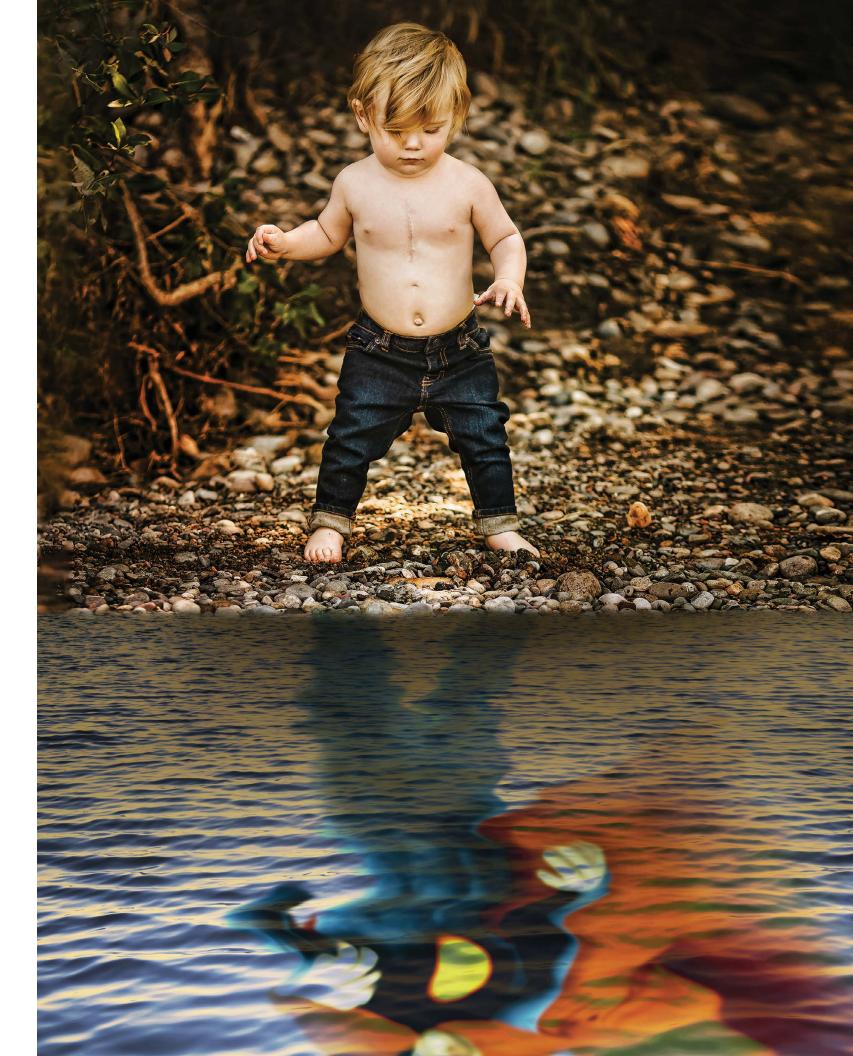


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Daily Program Overview

as of June 30th, 2022

Wednes	day,	Sep	tem	ber	7 th

Thursday, September 8th

Huddles

Risk Mitigation in Congenital Cardiac Cath:

What We Can Do During a Procedure to

Minimize AE and Improve Outcomes? Balancing the Need For Training and Experience, With the Need to Minimize

Potential Adverse Events

, cop common 1		_	,, p	
8:00-8:15am	Welcome	8:00-8:15am	Update on Live Cases 2021	
	Ziyad M Hijazi	8:15-10:30am	Live Case Session #1	
0.45 40.20	Line Core Consider #4	0.10 10.000111	Rush University Medical Center, Chicago, Illinois	
8:15-10:30am	Live Case Session #1 Sidra Medicine, Doha, Qatar		Lurie Children's Hospital, Chicago, Illinois	
	Ain Shams University, Cairo, Egypt		Advocate Children's Hospital, Oak Lawn, Illinois	
	Toronto General Hospital, Toronto, Canada	40.00.40.45	C ((D)	
	·	10:30-10:45am	Coffee Break	
10:30-10:45am	Coffee Break	10:45-12:45pm	Live Case Session #2	
10·45-12·45pm	Live Case Session #2	· · · · · · · · · · · · · · · · · · ·	Rush University Medical Center, Chicago, Illinois	
Sidra Medicine, Doha, Qatar			Lurie Children's Hospital, Chicago, Illinois	
	Ain Shams University, Cairo, Egypt		Advocate Children's Hospital, Oak Lawn, Illinois	
	Toronto General Hospital, Toronto, Canada	1.00 2.00	Industry Lunch Cymn aciuma	
		1:00-2:00pm	Industry Lunch Symposiums	
12:45-1:30pm	Lunch Available	2:00-5:30pm	Lymphatic Session	
1:00-1:45pm	Lunchtime Taped Cases	•	Anatomy and Physiology of the Lymphatic	
	Toronto General Hospital, Toronto, Canada, Japan		System	
			 Imaging and Classification of Lymphatic Disease 	
2:00-4:00pm	Advanced 3D Imaging		Role of Interventional Cardiologists in	
	The Impact of TPVR – What is the data?		Treating and Diagnosing Lymphatic Disease	
	After A Decade of 3DRA, What's new?Rady Children's Case		Lymphatic Disease in Patients with	
	 How I Use My Single Plane Lab – Taped Case 		Congenital Heart Disease	
	How I Integrate CT into My Interventions		Overview of Diseases and Algorithms for	
	 Mass Shift in the Chest – Taped Case 		Treatment • Chest (PB, CTX, Pericardium)	
	Extended Reality: Today and Beyond		Abdomen (PLE, Ascites)	
	 Discussion 		Multicompartment Diseases	
2:00-4:00pm	Things We Have Always Wanted In Our Toolbox		Congenital and Other Acquired Lymphatic	
2.0000p	That May Actually Almost Be Here (Breakout)		Disease	
	Pediastent Bioabsorbable Infant Stent		Primary Lymphatic Disorders Consultation Disorders	
	Bespoke PDA Stent		Secondary Lymphatic Disorders	
	Minima Growth Stent		Debatable Topics	
	 Surgical Pulmonary Valve Designed to be Expanded Over a Lifetime 		Thoracic Duct Decompression Surgical vs.	
	Stem-Cell Derived Surgical Pulmonary Valve		Percutaneous	
	Designed to Grow		TDE vs SLDE	
	 Update from the FDA 		PLE Hepatic Approach vs Hepatic/Periduodenal	
2:00-4:00pm	PICES Session (Breakout)	2:30-4:00pm	Prevention is Better than Cure – Avoiding	
2.00-4.00pm	I ICLS Session (Dieakout)	-	Complications in the Cath Lab (Breakout)	
4:00-4:15pm	4:00-4:15pm Coffee Available		The Outcome is Founded Before a Case:	
·			Case Selection Criteria, Pre-procedural Risk Scoring, Patient Preparation, and Case	
4:15-6:00pm	Oral Abstract Presentation		Huddles	

Welcome Reception

Exhibit Hall Opens

6:00-8:00pm

DAILY PROGRAM OVERVIEW



- The Interface Between Procedural Adverse Events and Procedural Efficacy: How To Avoid an Inverse Correlation
- When the Interventionalist Needs Help: Considerations for Surgical and ECMO Backup
- Low Hanging Fruit: What Has Been Proven to be Most Effective in Reducing Adverse Events in Resource-Limited Environment?

4:15-5:45pm Nuances of Newly Approved Devices (Breakout)

- I Picked the Wrong Size Piccolo Device!
- I Couldn't Get that Cardioform ASD Occluder to Sit, Until I...
- My Most Challenging Harmony Cases
- Maybe I Should Have Sent This SVASD to Surgery
- Decision Making in Alterra Cases
- What I've Learned During Venus Implants
- Discussion

4:00-5:30pm Latin Session (Breakout)

5:30pm PICS Achievement Awards











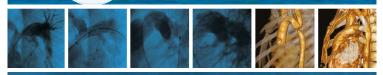








7-10 SEPT MARRIOTT CHICAGO DOWNTOWN



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DAILY PROGRAM OVERVIEW



Friday, September 9th

8:00-8:15am Update on the PICS Society – Norm Linsky

8:15-10:30am Live Case Session #1

Nationwide Children's Hospital, Columbus, Ohio Denver Children's Hospital, Denver, Colorado

Mayo Clinic, Rochester, Minnesota

10:30-10:45am Coffee Break

10:45-12:45pm Live Case Session #2

Nationwide Children's Hospital, Columbus, Ohio Denver Children's Hospital, Denver, Colorado

Mayo Clinic, Rochester, Minnesota

12:45-1:30pm Lunch Available

2:00-3:30pm New Transcatheter Interventions for Fontan Patients

- Conduit Stenosis How Prevalent is it and When Should We Intervene?
- Evaluating and Treating AP Collaterals
- Still No Consensus
- VV Connections An Algorithm for Closure in the Context of Fontan Associated Liver Disease
- Creating a Transcatheter Fontan Fenestration
- Debate: Fontan Fenestration Closure Should Be Avoided
- Discussion

2:30-4:00pm Interventions Outside the Heart (Breakout)

- Mid-aortic Syndrome
- Peripheral Veins Above and Below the Thoracic Cage
- 3D Imaging of the Airway and Airway Stenting
- The Hepatic/portal System
- Transjugular Liver Biopsy
- ECMO in the Cath Lab
- Discussion

4:00-5:30pm Structural Interventions for the Congenital Patient – It's Coming Your Way

- TAVR for Bicuspid Aortic Valve Disease Could This Be the Primary Approach in the Next 10 Years?
- Outside of Large Shunts in Younger Patients, Does PFO Closure Have Limited Clinical Benefit?
- Impact of Early Mitral Valve Replacment in Young Patients with Congenital Heart Disease
- Update on ElectroSurgery How Likely is it to Benefit Congenital Heart Disease Patients?

- LAA Occlusion in Patients with Congenital Heart Disease
- Lifetime Strategies
- Repeated Valve-in-Valve A Realistic Algorithm For Repeated Valve Replacement in the Young

4:15-5:45pm Coarctation of the Aorta – From Newborn to Adulthood (Breakout)

- Stenting the Infant with Coarctation
- An Algorithm for Stent Choice in CoA
- Transverse Arch Stenting
- How I Use 3D In Aortic Aneurysm Cases
- How to Stent the Aorta Safely in the Older Adult
- Self-expanding Stent Grafts

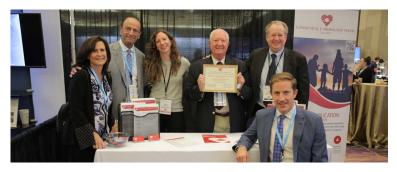
4:15-5:45pm Nursing and Associated Professionals (Breakout)

- Risk Mitigation
- Leadership Building a Better Environment
- Interventions in ACHD
- 3D Reconstruction
- Evolution of Stent Technology
- The PICS Society Benefits of Membership

7:00-10:00pm PICS Dinner Event











DAILY PROGRAM OVERVIEW



Saturday, September 10th

8:00-9:30am

ACHD Session

- ACHD Catheterization Risk and Risk Mitigation -
- How to Perform the Reverse Potts Shunt
- Simulation in ACHD Interventions
- Integration of Advanced Imaging Platforms in ACHD Interventions
- Difficult Decision Making in ACHD Interventions
- Learning Curves with New Valve Technologies in the RVOT – We're Still Not There Yet
- Discussion

8:00-9:30am

Dodging a Bullet - Good and Bad Decision Making (Breakout)

- Transcatheter Pulmonary Valve
- Branch Pulmonary Artery Stent
- COA Intervention
- PDA Stent
- **RVOT Stent**
- Pulmonary Vein Intervention
- Discussion

9:30-10:00am

Coffee Break

10:00-11:30am

Transcatheter PMVSD Closure -The Jury is Still Out

- Imaging PMVSD Can We Define Defect Characteristics that Preclude Closure on
- What Are the Outcomes of Transcatheter PMVSD Closure?
- Dealing With Aortic Valve Prolapse
- How Hard Can We Push?
- How Small Is Too Small for Transfemoral PMVSD Closure?
- What Is the Ideal Device Design for Transcatheter PMVSD Closure in Small Infants and Why Isn't Anyone Working On It?
- PMVSD Closure Should Remain a Surgical Procedure
- Discussion

10:00-11:30am Taped Cases and Debates (Breakout)

- RV Volumes Are a Poor Indicator for Deciding When a Patient Requires Pulmonary Valve Replacement – Pro vs Con
- RVOT Stenting is the Optimum Palliative Strategy For Symptomatic Neonates With Tetralogy of Fallot - Pro vs Con

11:40-1:10pm

Nightmare Case

1:10pm

Closing Remarks

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To find out more about the PICS Society, visit

www.CHDinterventions.org (click on "PICS Society") or email nlinsky@CHDinterventions.org









Summary of long-term Melody IDE study

- · Longest prospective follow up study of TPVR
- 10-year freedom from:
 - · All-cause mortality: 90%
- · Valve explant: 79%
- · Any re intervention: 55%
- Melody valve dysfunction: 54%
- Melody valve-related IE: 81% (annualized rate = 2.0% per



Seattle Children's UW Medicine



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