

PROGRAMME

SESSION I

08:45-08:50 Welcome

08:50-10:02 Scientific Presentations

(6 x 10 mins + 2 mins questions)

10.02-10:30

Refreshments & Exhibition Viewing in Exchange Hall

SESSION 2

10:30-12:00 Scientific Presentations

 $(7 \times 10 \text{ mins} + 2 \text{ mins questions})$

12:00-12:30 Invited Speaker
Reconstructive Microsurgery of the Extremities

Jason Wong

12:30-13:30

Lunch & Exhibition Viewing in Exchange Hall

SESSION 3

13:30-14:00 Jackie Walton Lecture - Wilderness & Expedition Medicine

Professor Chris Imray, Consultant General, Vascular and Renal Transplant Surgeon, University Hospitals Coventry and Warwickshire (UHCW) NHS Trust.

SESSION 3B

14:00-15:00 Trainee Breakout

Trainees (SVT & STP) to move to another room to discuss issues specifically of relevance to them.

14:00-14:30 Invited Speaker: Professional Issues & Indemnity

Warren Town

14:30-15:00 Invited Speaker: Pension Update

Paul Bromley

15:00-15:30

Refreshments & Exhibition Viewing in Exchange Hall

SESSION 4

15:30-16:12 Trainee Research Proposals

Presentations from trainee vascular scientists with opportunity for constructive comment from experienced vascular scientists.

Prize for best proposal. (4 min + 3 mins questions)

16:12-17:00 AGM, Committee Report and Prize Giving

The Anne Donald Award – Scientist of the Year Prizes: Best Proffered Scientific Paper Best Student Proposal



Treatment of Post-Thrombotic Syndrome with an endogenous neo-valve: Results of a pilot study and planning for the next stage of the research process.

Presenter: Mr Richard Simpson

Department of Vascular Surgery
Nottingham University Hospitals NHS Trust

Post-thrombotic syndrome (PTS) can affect up to 70% of patients who have had an iliofemoral deep vein thrombosis and can cause significant morbidity and economic burden. Symptoms include oedema, lipodermatosclerosis, ulceration, chronic pain and reduced mobility. Recently iliac vein stenting has become more widely used for obstructive PTS, but there are relatively few options for refluxing PTS. We present a small case series of neo-valve creation in patients with PTS caused by iliofemoral reflux. Twenty patients, with severe PTS had neo-valve surgery (Plagnol's valve). Plagnol's valve is a neo-valve created by infolding the GSV into the CFV, with the aim of reducing reflux into the affected leg.lliac and CFV incompetence was confirmed with venous duplex ultrasound in all patients and additionally descending venography in selected patients. Pre and post-operative symptoms were scored using Vilallta and venous clinical severity scores. Although no changes in reflux times were seen on standard duplex, the mean Villalta score improved from 18 to 10 (P<0.001) whilst the mean VCSS also improved from 17 to 10 (P<0.01). Patients' ulcers healed and all but one reported an improvement in quality of life. Therefore, patients with reflux PTS following iliofemoral DVT may be suitable for surgery that both can improve their symptoms and lifestyle. We aim to test this hypothesis in a randomised cross-over clinical study with patient identification UK wide and extensive pre/post-op venous imaging. We also aim to measure lower limb interstitial pressures clinically and test the neo-valve in an ex-vivo experiment.



SVT Research Committee Report - 2016

The new SVT Research Committee was set up in April this year following increasing demand from other organisations to give input to research developments. There are currently three of us on committee Laura Scott from Cambridge and Steve Rodgers from IVS, with myself as chair.

The broad aims of the committee are to provide research support/guidance for members including the SVT Executive Committee and to represent the SVT on other groups such as VERN and RCS Vascular Priorities Group. We also have a small pot of money to allocated for research projects and educational/travel grants.

Laura Scott was tasked with writing research guidance documents for the SVT website. Steve Rogers has been designing an application form for the SVT research and education grants. All these documents can now be found on the website and many thanks to both of them for their hard work.

I am in the process of designing a research activity survey for SVT members to increase knowledge about the Research Committee and to get names of people that would be interested in collecting data e.g. VERN projects. This will be circulated to members soon so please give feedback and help make the committee successful.

I also attended a Vascular Research Priorities meeting at the Royal College of Surgeons hosted by Proflan Chetter in June 2016. The aim is to identify the most important research priorities in the vascular disease through a process of consensus and there is a plan to apply to an NIHR RfPB grant to achieve this.

The most exciting news is that the SVT Executive Committee has confirmed that there is £10,000 per year allocated for grants. The Research Committee has designed two funding streams that should provide an opportunity for members to undertake small research projects and also for those needing educational travel grants.

We are pleased to announce:

- Research/Innovation Award
 - o Total of £9000 per year available
 - o Maximum of £4000 per grant
- Travel/Education Grant
 - o Total of £1000 per year available
 - o Maximum of £250 per grant

The funding is awarded on a top down basis with the highest scoring application being funded followed by the next and so on. Please do look at the documents on the website and get in touch if you need any advice with conducting research. We look forward to receiving the first applications!

Richard Simpson - SVT Research Committee Chair

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www.svtgbi.org.uk/research