

“Pioneers in Performance” honoured by Gore

Gore honoured eight physicians as “Pioneers in Performance” for their exceptional work in the field of vascular and endovascular therapy, including aortic and lower-limb bypass and dialysis access surgery. The ceremony was held at the CX Symposium. The eight practitioners were recognised by Gore for their unrelenting dedication to advancing vascular and endovascular therapy and the advancement of minimally invasive treatment options for patients worldwide. The work performed by these individuals has expanded therapeutic options for at-risk patients



1 Eric Chemla, consultant Renal Transplant and vascular surgeon, St George's Hospital, London, UK

2 Gary Ansel, cardiologist, internist, clinical director of

Peripheral Vascular Intervention, Riverside Methodist Hospital, Columbus, USA

3 Jan Brunkwall, professor, University of Cologne, Chief of the Department of Vascular

Surgery, University Clinics Cologne, Germany

4 Roger Greenhalgh, emeritus professor of surgery and head of the Imperial College of Vascular Surgical Research

Group, London, UK, medical director of BIBA Medical, editor-in-chief of Vascular News

5 Thomas Larzon, consultant vascular surgeon, Örebro University Hospital, Sweden



6 Eric Verhoeven, specialist in Surgery and Vascular Surgery, medical director of the Department of Vascular Surgery, Nuremberg Hospital South, Nuremberg, Germany

7 Peter Taylor, consultant vascular surgeon, Guy's & St Thomas' Hospital, London, UK

8 Marty Sylvain, global sales leader at Gore

9 Jan Tordoir, associate professor of Surgery, University Hospital Maastricht, The Netherlands

Promising talent recognised at CX surgeons in training session

Three up-and-coming stars of the vascular world were rewarded for their work during a presentation at the end of the European Vascular Surgeons in Training event, which was held as part of the CX

Complex Case Review on Tuesday 13 April 2010.

Twenty-one trainees presented on varying topics, from, among many others, 2D-3D image registration for complex endovascular repair of aortic aneurysm, to unusual



Vikas Pandey (centre, first row) and the trainees

aneurysm of brachiocephalic arteriovenous fistula, and acute upper limb ischaemia.

In first place was Tawqeer Rashid, Leeds Teaching Hospitals, UK, for his paper, 'Tuberous sclerosis and paediatric

aortic aneurysm'. Awarded second place for his paper, 'Thoraco-abdominal aneurysm (Type II Crawford): Resolution by complex hybrid procedure', was Fernando Gallardo, Department of Vascular Surgery of the CHU A Coruña, Spain. Finally, in third place was Oliver Lyons, Department of Vascular Surgery, Guy's & St Thomas' NHS Foundation Trust, United Kingdom for his paper, 'Early experience with endovascular management of Type A aortic dissection and intramural haematoma.'

1st place



Tawqeer Rashid

2nd place



Fernando Gallardo

3rd place



Oliver Lyons

First patient is treated with new Gore DrySeal Sheath

Gore has announced the first patient case involving the Gore DrySeal Sheath. The sheath aids in minimally invasive treatment for patients with abdominal aortic aneurysms (AAA) with the Gore Excluder AAA Endoprosthesis and thoracic aortic aneurysms with the Gore TAG Thoracic Endoprosthesis. The successful procedure was performed by Alan Lumsden, chairman of the Department of Cardiovascular Surgery, The Methodist Hospital in Houston, USA, during a Gore-sponsored Acute Symptomatic AAA Workshop conducted in The Methodist DeBakey Heart and Vascular Center.

Gore received FDA clearance in April 2010 to market the Gore DrySeal Sheath, which is comprised of the innovative haemo-

static Gore DrySeal Valve attached to the introducer sheath. The Gore DrySeal Valve is truly unique in that it is pressurised to create a seal, thereby minimising blood loss and accommodating multiple wires and catheters simultaneously. The valve consists of a silicone outer tube and an inner film tube that create an effective haemostatic seal that easily adapts to the profiles of the inserted devices. The device is available in profiles from 12 to 26F, in 2F increments, and has a working length of 28cm.

Lumsden said, "The ability of the Gore DrySeal Valve to accommodate multiple devices during difficult procedures with minimal blood loss keeps the operating field free from excess blood, while helping to prevent unnecessary blood loss to the patient."