5th Asia Pacific Congenital and Structural Heart Intervention Symposium 2014

10 - 12 October 2014
Hong Kong Convention & Exhibition Centre

Organizer:
Hong Kong Society of Congenital & Structural Heart Disease (HKCASH)

Supporting Organizations:
MitraClip
Percutaneous Mitral Valve Repair

From beyond hope...

...to a renewed life

Early referrals to treat mitral regurgitation change lives, leading to improved patient survivability and quality of life.1,2

Percutaneous mitral valve repair, included in 2012 ESC and ESC/EACTS guidelines,3-4 offers high-surgical-risk heart failure patients a new treatment option with an excellent safety profile.1

Referrals for MitraClip percutaneous mitral valve repair could change your patients’ lives.1,2 Locate your nearest MitraClip center at www.abbottvascular.com/int/PMVR

Valves repaired. Lives improved.
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Resolute Integrity
ZOTAROLIMUS-ELUTING CORONARY STENT SYSTEM

Endurant II
AAA STENT GRAFT SYSTEM

IN.PACT
DRUG ELUTING BALLOONS

Medtronic
Cardiac and Vascular Group (CVG)
Coronary and Structural Heart Disease Management
Cardiac Rhythm and Heart Failure Disease Management
Aortic and Peripheral Disease Management

NC Euphora™
NONCOMPLIANT BALLOON DILATATION CATHETER

Advisa MRI™
SureScan™
PACING SYSTEM

Evera MRI®XT
SureScan®
ICD SYSTEM

Affinity Fusion System

Open Pivot™
Mechanical Heart Valve
AP360
GENERAL INFORMATION
Conference Information

Venue
Level 4, S420 series, Hong Kong Convention & Exhibition Centre (HKCEC)
1 Expo Drive, Wanchai, Hong Kong

Organizer
Hong Kong Society of Congenital & Structural Heart Disease (HKCASH)

Conference Secretariat
LLink Limited
Room 2302, 23/F, Kwai Hung Holdings Centre
89 King’s Road, North Point, Hong Kong
Tel: +852 2566 2889    I    Fax: +852 2570 4773
Email: apcash@llink.com.hk

Official Language
The official language of the Conference is English. No simultaneous interpretation will be provided.

Registration
Registration counter is located at 4/F, near the entrance of S420 series. Please present the official receipt at the registration counter to collect congress kit.

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<th>Date</th>
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<tr>
<td>Friday 10 Oct</td>
<td>08:00 - 18:00</td>
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<tr>
<td>Saturday 11 Oct</td>
<td>07:15 - 18:00</td>
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<tr>
<td>Sunday 12 Oct</td>
<td>08:15 - 17:30</td>
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For on-site registration, payment can be made in cash (HK Dollars only) or local HK cheque. Official receipt will be issued and mailed to respective delegate after the Conference.

Badge
Color-coded badges will be used during the Conference for identification purpose and admission to the Opening Ceremony, scientific sessions, exhibition, lunches and coffee breaks.

Certificate of Attendance
Certificate of Attendance will be issued to each participant and available for collection at the registration counter during the Conference.

For on-site registrants, Certificates of Attendance will be available for collection by end of each conference day.
Exhibition
See page 81-86 for details about exhibitors.

Faculty Lounge and Slide Preview Room
Meeting Room S425
All speakers are requested to upload their presentation files at least 3 hours before presentation.

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Photo Taking, Audio Recording & Video Shooting
No photo taking, audio recording and video shooting are allowed in the meeting rooms at the Conference unless permission is granted.

Beeping Devices
Please switch off mobile phones and beeping devices (or switch to vibrant mode) during the lectures and presentations.

Coffee & Tea
Coffee and tea will be available for the registered participants during the breaks. Badges will be checked.

Lunch
Lunch box will be served at the beginning of Lunch Symposium.

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Opening Ceremony
Meeting Room S421. See page 43 for details.
With great pleasure and honour, I welcome you to the fifth Asia Pacific Congenital & Structural Heart Intervention Symposium 2014 (APCASH). I am delighted to see outstanding colleagues from our community and eminent friends from abroad gathered here to share their valuable insights and expertise.

APCASH is a fast growing meeting dedicated to congenital and structural interventions in the Asia Pacific Region. This year, we are conducting a 3-day programme focusing on interventional therapeutics for both pediatric and structural heart diseases. Participants can take this opportunity to explore the latest advances in the field of cardiology.

The main theme from this year’s conference is Valve for Life. With live case transmissions from four world-renowned hospitals and a series of stimulating lectures, debates, and discussions, this conference promises professionals and faculty a lively and rewarding experience.

We begin on the first day with live case demonstrations from Shanghai Children’s Medical Centre (SCMC). Prof. Hijazi and Prof. Wei Gao will show a few congenital heart cases and Dr. Yun-ching Fu will join them at SCMC for discussion. Prof. Qi-ling Cao, Dr. Worakan Promphan, Dr. Xiang-bin Pan and other professional operators will follow to demonstrate operative skills in Fuwai Hospital. The Queen Elizabeth Hospital will carry the local flag on the second day, and the Opening Ceremony featuring a traditional lion dance will take place in the afternoon. This top-rated session of the event will be followed by the “APCASH Distinguished Lecture 2014” by Dr. Saibal Kar. Dr. Nguyen Lan Hieu and his team from Hanoi Medical University Hospital will bring the conference to a close with live demonstrations on Sunday.

Additional highlights include lectures on Interventional Cardiovascular Imaging, Percutaneous Left Atrial Appendage Occlusion, Transcatheter Therapies for Valvular Heart Diseases and New Catheter-based Treatment for Congenital Heart Diseases.

I would like to express my deepest gratitude to our twelve supporting organizations for their unfailing support for this year’s meeting again. Their contributions to the joint sessions and the premier showcase have been invaluable.

My heartfelt thanks also go to our wonderful sponsors for their continual and generous support, without which this conference would not have been possible.

I hope you will all enjoy our programme and find it professionally satisfying.

Professor Yat-yin Lam
Program Director, 5th Asia Pacific Congenital & Structural Heart Intervention Symposium 2014 (APCASH 2014)
President, Hong Kong Society of Congenital & Structural Heart Disease (HKCASH)
As the president of the PICS Foundation and the Chief Medical Officer of Sidra Medical & Research Center, I would like to take this opportunity to congratulate you all for this wonderful educational activity you put on here in Hong Kong.

Your vision and leadership in realizing the importance of congenital and structural heart interventions and establishing such a course to benefit all healthcare professionals in the region is greatly valued. This field is the fastest growing in Cardiology and your efforts in keeping all of us up to date is phenomenal.

Your leadership and commitment to science is greatly valued. We are all indebted to your efforts in bringing APCASH to life.

The PICS Foundation and Sidra Medical & Research Center wish Professor Lam and the organizing committee much success and we look forward to collaborating with you in future meetings.

Wishing you all the very best.

Professor Ziyad M. Hijazi, MD, MSCAI
PICS Foundation President
Chief Medical Officer (Acting)
Chairman, Department of Pediatrics
Director, Sidra Cardiovascular Center of Excellence
Sidra Medical & Research Center
Doha-Qatar
A NOVEL DEVICE FOR THE TREATMENT OF LEFT ATRIAL APPENDAGE CLOSURE
I warmly congratulate the Organizing Committee for its successful organisation of the 5th Asia Pacific Congenital & Structural Heart Intervention Symposium 2014.

Hong Kong has always been supportive in the pursuit of global health, and has constantly been contributing to the international medical research in cardiology. With the view to maintaining citizens’ health, the HKSAR Government is committed to maintaining the sustainability of our healthcare system, as well as enhancing the standard of our healthcare services through keeping abreast of the latest development in medical technology, including cardiac-related ones.

For years, the Symposium has served as an invaluable platform for exchanges of ideas on treatment, researches and discoveries related to heart diseases among professionals, including cardiovascular imaging and transcatheter therapies. Furthermore, characterized by live transmissions from various renowned hospitals in the Asia-Pacific region, reputable cardiologists from all over the world could be drawn together to share their knowledge and experience on areas of common interest.

With constant advancement in technology, I am confident that the field of cardiology will continue to scale new heights and benefit more patients in the future years to come. I wish the Symposium every success and all participants an inspiring and enriching experience.

Dr. Wing-man Ko, BBS, JP
Secretary for Food and Health
The HKSAR Government
It is my pleasure to congratulate the Hong Kong Society of Congenital and Structural Heart Disease on its successful organisation of the Asia Pacific Congenital and Structural Heart Intervention Symposium 2014.

Currently the number one cause of mortality worldwide, cardiovascular disease is a growing challenge to health in Hong Kong – claiming over 5,800 lives in 2012 to rank as the territory’s third leading cause of death. Encompassing a variety of serious medical conditions, cardiovascular disease affects individuals of all ages. Among the more than 50,000 babies born each year in Hong Kong, some 450 to 500 are diagnosed with congenital heart conditions. In the past two years alone, about 17,000 congenital heart disease patients were under the care of paediatric or adult cardiology units at Hospital Authority hospitals.

Working in close cooperation with cardiac professionals, researchers and academics, the Society plays an important role in helping to advance the medical technology and procedures used in diagnosing and treating congenital and structural heart conditions.

I offer my sincere appreciation to all members of the Society for their invaluable contributions in promoting and enhancing standards of practice in cardiology and wish them great success in their future endeavours.

Dr. Pak-yin Leung
Chief Executive
Hospital Authority
I am pleased to extend my warmest congratulations to the Hong Kong Society of Congenital and Structural Heart Disease on holding the Asia Pacific Congenital and Structural Heart Intervention Symposium in Hong Kong for a fifth consecutive year.

In what has become a flagship event for the regional cardiac healthcare community, this Symposium boasts the widespread support of leading heart specialists and other healthcare professionals from home and abroad. The Symposium provides both speakers and attendees with a valuable opportunity to exchange expertise and insights into developments in cardiology and to update themselves on the latest cardiac-related technology and breakthroughs. The Society must be highly commended for this important contribution to raising the standards of cardiac medicine in Hong Kong and the Asia Pacific region.

Despite continuing advancements in diagnostic capabilities and medical treatments, heart disease remains a leading cause of premature death in many countries around the world. According to World Health Organization statistics, three in every 10 deaths worldwide result from cardiovascular diseases, which killed 17.5 million people in 2012.

In this symposium, we will have lectures, presentations of research abstracts and case studies, as well as exhibitions on wide range topics (ranging from interventional cardiovascular imaging and renal denervation technologies for resistance hypertension to transcatheter therapies for valvular heart diseases and new catheter-based treatments for congenital heart diseases). With a three-day programme that includes a variety of different enlightening components, this Symposium will play a key role in efforts to combat this growing threat to global health.

I am certain this year’s participants will find the Symposium an enriching and inspiring experience that leads to the development of new professional contacts and fruitful future collaborations.

Professor John Chi-yan Leong
Chairman
Hospital Authority
Dear President of APCASH and colleagues,

On behalf of the Hong Kong College of Cardiology, I would like to express my sincere congratulation to the Annual meeting of the Hong Kong Society of Congenital and Structural Heart Disease. In these recent years, there have been very significant advances in the minimally-invasive ways of management of these congenital and structural heart diseases. The technological advances and development of innovative modalities have revolutionized the fate of these unfortunate patients. With the 3 days scientific programs and the dedicated efforts of our renowned oversea and local experts, we aim to advance our knowledge and acquire the latest skills in handling these challenging conditions. The ultimate benefit will definitely be transferred to our daily patient care.

The College is very honored and glad to have the opportunity to collaborate with APCASH to achieve the common goal of promoting post graduate education. We wish every one of you an enjoyable and rewardable experience in this conference.

Dr. Kam-tim Chan
President
Hong Kong College of Cardiology
I take great pleasure in sending my congratulations to the Organizing Committee of the 5th Asia Pacific Congenital & Structural Heart Intervention Symposium 2014.

Building on past successes in running this annual event, this year the Organizing Committee has worked tirelessly in drawing up a very rich and stimulating 3-day programme. Unrestrained by national boundaries, live transmission from Hong Kong and Asia Pacific regions has been ingeniously arranged to facilitate the dissemination of skills and knowledge of experts to a much larger audience of the discipline.

The symposium is to serve as a forum for fruitful exchanges amongst dedicated colleagues. In their quest for breakthroughs in research and development into the diagnosis and treatment of heart diseases, the connections made at this annual symposium are important for every participant including those who view the live broadcast.

I would like to express my gratitude to all members of the Organizing Committee for their efforts in planning such a grand event every year for colleagues. Many who have weighed in with whatever skills and knowledge they bring to make this Symposium happen also deserve our deep appreciation.

The Symposium signifies the power of having colleagues work together in the interest of an engaging cause – a cause that brings hope to patients and their families. This power has been driving the work of the discipline to scale new heights.

I trust that all of you will benefit enormously from this Symposium. More importantly, the friendship developed will enrich your professional and personal life.

Professor Francis Ka-leung Chan
Dean, Faculty of Medicine
The Chinese University of Hong Kong
On behalf of the HCMC Pediatric Cardiology and Congenital Heart Disease Society, Vietnam, I would like to send my warmest congratulations to the Fifth Asia Pacific Congenital and Structural Heart Intervention Symposium 2014, an annual event from which we could learn the valuable skills and expertise knowledge. It is also my great pleasure to be invited to be there in the Platform Party of the Opening Ceremony. It is such a pity that I could not come, but I wholeheartedly wish the Symposium great success and I do hope that I could learn exceptionally good information from the Symposium.

Thank you so much for your invitation.

Best Regards.

Professor Vu Minh Phuc
President
Ho Chi Minh City Pediatric Cardiology and Congenital Heart Disease Society
It is a great pleasure for me to extend my heartiest congratulations to the 5th Asia Pacific Congenital & Structural Heart Intervention Symposium 2014 – APCASH 2014.

APCASH Conference is one of the important cardiac events in Hong Kong. The APCASH organizing committee has been continuously devoted to promote the advancement of congenital & structural interventions. This year organizing committee had organized the allied health session for congenital & structural interventions. It not only can provide platform for cardiac nurses to share their experience but also can enhance our cardiac nursing knowledge for maintaining high quality of patient care. The conference’s remarkable contributions to cardiac nursing professional are highly commended.

On this memorable occasion, I would like to express my gratitude on the hard work and dedication of all the committee members of the conference. I wish APCAH conference every success in all its future endeavors.

Mr. Kam-wai Lai
President
Hong Kong Cardiac Nursing Association
On behalf of the Hong Kong Society of Paediatric Cardiology, I would like to offer my congratulations to the 5th Asia Pacific Congenital and Structural Heart Intervention Symposium. The symposium has enjoyed great success and our members learnt a lot from the educational talks and the live demonstrations. I wish you every success for the conference.

Dr. Dora May-ling Wong  
President  
Hong Kong Society of Paediatric Cardiology
On behalf of the Hong Kong Society of Transcatheter ENdo-cardiovascular Therapeutics (HKSTENT), it gives me great honour to welcome you all to participate in the 5th Asia Pacific Congenital & Structural Heart Intervention Symposium (APCASH) 2014. I would like to congratulate the organizing committee from the Hong Kong Society of Congenital & Structural Heart Disease in hosting such meaningful and educational activity in the Asia Pacific region for 5 consecutive years.

With the improvement in medical care, many Paediatric cardiac patients can live to their adulthood and many congenital heart diseases can now be treated by catheter-based approach. At the other extreme, the proportion of the elderly population is on the increase. This has been paralleled by the increasing number of degenerative valvular heart diseases such as severe aortic stenosis and severe mitral regurgitation. A lot of these patients are at high-risk or even inoperable for open heart surgery. Percutaneous catheter therapies have provided another option to improve the symptoms and survival of this group of patients but these procedures are highly complex with a definite learning curve. Other structural interventional procedures for stroke prevention or to treat patients with resistant hypertension are also technical demanding. Only with adequate knowledge and skill of the procedures can we minimize the risks and complications.

APCASH has set a good platform for us to learn from the experts, both international and local, not only to gain the knowledge of the diseases, but also learn from them the skills and details of these interventional procedures. Throughout this symposium, there will be didactic lectures on various topics of interest, live transmissions from local and overseas centres on the different catheter-based procedures as well as special case-based symposium for us to learn from the experts and understand the different diseases and interventional procedures in great detail. You will see diseases and procedures that you rarely meet in your practice, but this is a golden opportunity to tap on the experts and share your questions and concerns with them. You will surely gain a deeper understanding of the congenital and structural heart interventions.

It is no easy task for the organizing committee to put up such complex and educational program. We hope you will find the symposium both interesting and thought-provoking and wish you a pleasant stay in this vibrant city of Hong Kong. Enjoy this learning experience.

Dr. Michael Kang-yin Lee
President
Hong Kong Society of Transcatheter ENdo-cardiovascular Therapeutics
On behalf of the Montreal Heart Institute, it is my pleasure to congratulate the organizing committee of the Asia Pacific Congenital & Structural Heart Intervention Symposium on the celebration of its 5th edition.

APCASH is truly an international meeting and has contributed significantly to increase the knowledge in the field of congenital and structural interventions.

I want to extend my sincere congratulations to everyone who has participated in the founding and continued success of this important organization. These individuals have contributed to the growth and enrichment of the entire community.

May APCASH continue to thrive and grow for many more years.

Dr. Reda Ibrahim
Interventional cardiologist
Director, Medical Intensive Care Unit and Structural Heart Program
Montreal Heart Institute
Associate Professor, University of Montreal
It is a great pleasure for me to extend again my sincere congratulations to the annual APCASH – 5th Asia Pacific Congenital & Structural Heart Intervention Symposium 2014.

With the mission of promoting, maintaining and pursuing excellence in the care of patients with congenital and structural heart diseases. The annual APCASH Symposium marks a momentous milestone every year in the advancement of knowledge and training in medical disciplines pertinent to above-mentioned diseases.

On this remarkable occasion, I would like to express my gratitude on the hard work and dedication of all the members of the Hong Kong Society of Congenital and Structure Heart Disease, and may I wish the 5th Asia Pacific Congenital & Structural Heart Intervention Symposium 2014 every success.

Sister Nancy Cheung
Managing Director
St Paul’s Hospital
We sincerely congratulate the 5th APCASH held in Hong Kong. This meeting is specialized in Congenital and Structural Heart Disease (SHD) among the Asia-Pacific region, and I am very sure you will find these topics very interesting. In addition, we believed this field is fast growing and also becoming important worldwide. The Structure Club Japan, a society that specializes in SHD, has been very much honored in participating at APCASH for the past 3 years. We share the same goal with the organizer and we are dedicated to devote our biggest effort to the patients with SHD. On behalf of the society, I and my colleagues from Structure Club Japan are very honored to participate in this year again.

Besides, we gladly announce the 6th APCASH will be held in Tokyo next year in 2015! We would like to thank to the organizing committee for giving us this fabulous opportunity, and we believed this meeting will be successful with everyone involved.

Professor Hidehiko Hara
President
Structure Club Japan
The 5th APCASH, hosted by Hong Kong Society of Congenital and Structural Heart Disease, is one of the most important symposiums focusing on transcatheter interventions in congenital and structural heart disease. This symposium attracted several hundreds of participants each year. The number of participants and faculties have increased year by year. Meanwhile, the live case transmission sites have increased to 4 sites with more live cases demonstrated in 2014. I would like to congratulate the organizing committee for the great success in organizing this wonderful symposium. I am sure the great majority of participants will learn the most advanced progress in interventional treatment. We can’t afford to miss this meeting. Through this meeting, I wish there will be more opportunities of collaboration between participants from each country. The PICS-AP 2015 will be held in Taipei during April 1st through 4th 2015. I would like to take this opportunity to invite you all to participate in PICS-AP 2015.

Professor Jou-kou Wang
President
Taiwan Society of Pediatric Cardiology
A Note of Appreciation from the Conference Organizing Committee

The Conference Organizing Committee would like to express its sincerest gratitude to all parties and individuals, including faculty members, delegates, sponsors, live centers and its operation teams, who have joined us in delivering the conference. The Committee hopes that all would find this Conference inspiring and educational and looks forward to your continued support in the years to come.

Program Director

Yat-yin Lam
The Chinese University of Hong Kong

Program Co-directors

Boron Cheung-wah Cheng
Specialist in Cardiology
Olaf Franzen
Klinik Im Park
Wei Gao
Shanghai Children’s Medical Centre
Nguyen Lan Hieu
Hanoi Medical University Hospital

Committee Members

Anna Kin-yin Chan
Prince of Wales Hospital
Jason Leung-kwai Chan
Queen Elizabeth Hospital
Kam-tim Chan
Queen Elizabeth Hospital
Wilson Wai-man Chan
Hong Kong Baptist Hospital
Gary Shing-him Cheung
Pamela Youde Nethersole Eastern Hospital
Kwok-keung Ho
Union Hospital
Patrick Tak-him Ko
Specialist in Cardiology

Cathy Tse-fan Lam
Specialist in Cardiology
Maria Shuk-han Lee
Queen Elizabeth Hospital
Maurice Ping Leung
Specialist in Paediatrics
Betty Yuen-king Tang
St. Paul’s Hospital
Dora May-ling Wong
Queen Elizabeth Hospital
Man-ching Yam
Prince of Wales Hospital
Francis Siu-fung Yiu
Specialist in Cardiology

Steven Siu-lung Li
Union Hospital
Lars Sondergaard
Rigshospitalet University Hospital
Gabriel Wai-kwok Yip
Grantham Hospital
The Hong Kong Society of Congenital & Structural Heart Disease (HKCASH), found in August 2007, is an academic organization in Hong Kong that aims to promote, maintain and pursue excellence in the care of patients with congenital and structural heart diseases. The society is dedicated to the advancement of knowledge and training in medical disciplines pertinent to above-mentioned diseases. To accomplish this mission, the society hosts regular professional academic meetings to introduce education materials to the patients and the general public throughout the year.

The primary activities of the HKCASH include education forums for public and its annual meeting for healthcare professionals. The Asia Pacific Congenital & Structural Heart Intervention Symposium (APCASH) is an annual conference that is attended by dedicated healthcare professionals from Asia-Pacific and global regions.

For details of HKCASH and its membership, please visit www.hongkongcash.org
Program-at-a-Glance

Friday 10 October
- 0800: Welcome
- 0900: Live from SCMC, i-Con #1
- 1000: Registration
- 1100: Break
- 1200: Training Campus
- 1300: Live from SCMC, i-Con #2

Saturday 11 October
- 0800: Best Abstract
- 0900: Live from QEH, i-Con #3
- 1000: Registration
- 1100: Break
- 1200: Training Campus
- 1300: Live from QEH, i-Valve #2
- 1400: Joint Session i-Valve #3

Sunday 12 October
- 0800: Live from HMUH, i-Con #6
- 0900: Joint Session (HKSTENT & MHI)
- 1000: Registration
- 1100: Break
- 1200: Training Campus
- 1300: Live from HMUH, i-Valve #5
- 1400: Allied Health
- 1500: Press Conference

SCMC = Shanghai Children’s Medical Centre (PR China)
Fuwai = Fuwai Hospital (PR China)
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<td>Lunch Symposium</td>
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<td>1430</td>
<td>Live from Fuwai, i-Structural #1</td>
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<td>1500</td>
<td>Cross-strait Case Competition I</td>
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<td>1530</td>
<td>Training Campus</td>
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<td>Lunch Symposium</td>
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<td>1730</td>
<td>Live from QEH, (1445 - 1615) i-Valve #4</td>
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<td>1800</td>
<td>Cross-strait Case Competition II</td>
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<td>Closing Remarks</td>
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<td>Best Clinical Case</td>
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SCMC = Shanghai Children’s Medical Centre (PR China)  
Fuwai = Fuwai Hospital (PR China)  
QEH = Queen Elizabeth Hospital (Hong Kong)  
HMUH = Hanoi Medical University Hospital (Vietnam)
LEADING THE STANDARD OF CARE
IN STRUCTURAL HEART THERAPY

St. Jude Medical™
## Live Case Center & Operator

### Shanghai Children’s Medical Centre (Friday, 10 October)  
**Shanghai, PR China**

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<thead>
<tr>
<th>Yun-ching Fu (Taiwan)</th>
<th>Ziyad Hijazi (Qatar)</th>
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<td>Wei Gao (PR China)</td>
<td>Ting-liang Liu (PR China)</td>
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### Fuwai Hospital (Friday, 10 October)  
**Beijing, PR China**

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<th>Qi-ling Cao (Qatar)</th>
<th>Yong-jian Wu (PR China)</th>
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<td>Worakan Promphan (Thailand)</td>
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### Queen Elizabeth Hospital (Saturday, 11 October)  
**Hong Kong, PR China**

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<th>Alan Ka-chun Chan (HK)</th>
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<td>Jason Leung-kwai Chan (HK)</td>
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<td>Kam-tim Chan (HK)</td>
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<td>Dora May-ling Wong (HK)</td>
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<td>Reda Ibrahim (Canada)</td>
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### Hanoi Medical University Hospital (Sunday, 12 October)  
**Hanoi, Vietnam**

<table>
<thead>
<tr>
<th>Tran Bao Trang (Vietnam)</th>
<th>Bui Quang Thang (Vietnam)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Doan Duc Dung (Vietnam)</td>
<td>Le Van Tu (Vietnam)</td>
</tr>
<tr>
<td>Nguyen Lan Hieu (Vietnam)</td>
<td></td>
</tr>
</tbody>
</table>
Floor Plan & Exhibition
APCASH 2014: 10-12 October 2014

Exhibition Booths:
1. Venus MedTech Inc
2. Vascular Innovations Co Ltd
3. Novartis Pharmaceuticals (HK) Ltd
4. Bayer HealthCare Ltd
5. Eli Lilly Asia, Inc
6. ZenoMed
7. AstraZeneca HK Ltd
8. Philips Electronics HK Ltd
9. Lifetech Scientific
10. St. Jude Medical (HK) Ltd
11. Abbott Vascular
12. Medtronic International Ltd
13. Boston Scientific HK Ltd
14. Occlutech International
15. Materialise

Scientific Program
Training Campus
Cyber Corner
Academic Accreditation
Coffee Break
Academic Accreditation

Participants are required to sign-up the attendance sheet(s) every day which will be displayed inside Room S423.

<table>
<thead>
<tr>
<th>Academic Accreditation</th>
<th>Day 1 10 Oct</th>
<th>Day 2 11 Oct</th>
<th>Day 3 12 Oct</th>
<th>Cat.</th>
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<td>CPD for Radiographers</td>
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</table>
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- Harry Cheung
- Lo Wong Yuk Man

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- Fuwai Hospital
- Queen Elizabeth Hospital
  Departments of Anaesthesiology, Cardiothoracic Surgery, Medicine, Paediatrics Cardiology and Radiology
- Hanoi Medical University Hospital
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Sidra Medical and Research Center
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Jeng-sheng Chang
China Medical University Hospital
Taiwan

Chun-an Chen
National Taiwan University Children’s Hospital
Taiwan

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Fujian Medical University Union Hospital
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Wei Chen
Shanghai Tenth People’s Hospital
PR China

Dexter D Cheng
The Medical City
Philippines

Paul TL Chiam
Mount Elizabeth Hospital Singapore
Singapore

Jae-young Choi
Severance Cardiovascular Hospital,
Yonsei University Health System
South Korea

Hung-tao Chung
Chang Gung Memorial Hospital
(Linkou branch)
Taiwan

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Glenmark Cardiac Centre
India

Xi-wei Deng
Kiang Wu Hospital
Macau

Zhi-min Du
The First Affiliated Hospital, Sun Yat-sen University
PR China

Mario Evora
Conde S. Januario General Hospital
Macau

Olaf Franzen
Klinik Im Park
Switzerland

Xavier Freixa
Hospital Clinic of Barcelona, University of Barcelona
Spain

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Taichung Veterans General Hospital
Taiwan

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Taiwan

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Macau

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PR China

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PR China

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Taichung Veterans General Hospital  
Taiwan

Ming-tai Lin  
National Taiwan University Hospital  
Taiwan

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PR China

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The Second Hospital of Jilin University  
PR China

Qiang Liu  
Shenzhen Sun Yat-sen Cardiovascular Hospital  
PR China

Ting-liang Liu  
Shanghai Children’s Medical Centre  
PR China

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Materialise  
Belgium

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Sendai Kousei Hospital
Japan

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Vietnam

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Fuwai Hospital
PR China

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Shanghai Chest Hospital
PR China

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China Japan Friendship Hospital
PR China

Ying-ling Zhou
Guangdong General Hospital
PR China
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The Chinese University of Hong Kong

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Queen Elizabeth Hospital

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Prince of Wales Hospital

Jason Leung-kwai Chan  
Queen Elizabeth Hospital

Kam-tim Chan  
Queen Elizabeth Hospital

Simon Kin-cheong Chan  
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Wilson Wai-man Chan  
Hong Kong Baptist Hospital

Winnie Sze-wun Chan  
Queen Elizabeth Hospital

Adolphus Kai-tung Chau  
Queen Mary Hospital

Boron Cheung-wah Cheng  
Specialist in Cardiology

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Alice Ho Miu Ling Nethersole Hospital

Gary Shing-him Cheung  
Pamela Youde Nethersole Eastern Hospital

Hung-leong Cheung  
Queen Elizabeth Hospital

Ling-ling Cheung  
United Christian Hospital

Yiu-fai Cheung  
Queen Mary Hospital

Chung-seung Chiang  
Queen Elizabeth Hospital

Liang Chow  
Tuen Mun Hospital

Pak-cheong Chow  
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Bryan Ping-yen Yan  
The Chinese University of Hong Kong

Gabriel Wai-kwok Yip  
Grantham Hospital

Francis Siu-fung Yiu  
Specialist in Cardiology

Chiu-sun Yue  
United Christian Hospital

Tak-cheung Yung  
Queen Mary Hospital
Abstract & Case Presenter

Teiji Akagi  
Adult Congenital Heart Disease Center, Okayama University  
Japan

Francis Carl L Catalan  
Philippine Heart Center  
Philippines

Jason Leung-kwai Chan  
Queen Elizabeth Hospital  
Hong Kong

Chun-an Chen  
National Taiwan University Children’s Hospital  
Taiwan

Robin Hay-son Chen  
Queen Mary Hospital  
Hong Kong

Adrian Cheong  
Alice Ho Miu Ling Nethersole Hospital  
Hong Kong

Gary Shing-him Cheung  
Pamela Youde Nethersole Eastern Hospital  
Hong Kong

Ali Ibrahim Elarabi  
National Heart Institute  
Malaysia

Lucy Eun  
Yonsei University Severance Cardiovascular Hospital, Yonsei University Health System  
South Korea

Cheryl Fomaneg  
Philippine Heart Center  
Philippines

Andrzej Hasiec  
Institute of Cardiology  
Poland

Uditha Indika Hewarathna  
Teaching Hospital Kandy  
Sri Lanka

Nguyen Lan Hieu  
Hanoi Medical University Hospital  
Vietnam

Ching-I Hsu  
Cheng-Hsin Hospital  
Taiwan

Jenny Lynn Juhuri  
Philippine Heart Center  
Philippines

Iat-lon Leong  
Kiang Wu Hospital  
Macau

Mi Li  
Children’s Hospital, Chongqing Medical University  
PR China

Ming-tai Lin  
National Taiwan University Hospital  
Taiwan

Ngai-hong Luk  
Queen Elizabeth Hospital  
Hong Kong

Krissada Meemook  
Buddhachinaraj Hospital  
Thailand

Kun-jing Pang  
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Kenji Suda  
Kurume University  
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TOHO University Ohashi Medical Center  
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Kim-hung Tsang  
Queen Elizabeth Hospital  
Hong Kong

Jieh-neng Wang  
National Cheng Kung University Hospital  
Taiwan

Wei Wang  
Children’s Hospital, School of Medicine, Zhejiang University  
PR China

Chi-Iun Wu  
National Cheng Kung University Hospital  
Taiwan

Xin Zhang  
Beijing Children’s Hospital, Capital Medical University  
PR China
E V O L U T I O N
IN ORAL ANTIPLATELET THERAPY

From reduction of morbidity to saving of lives

More information is available upon request.

Presentation: Ticagrelor 90mg film-coated tablet. Indication: Co-administered with aspirin, for prevention of atherothrombotic events in adult patients with ACS (UA, NSTEMI or STEMI) including patients managed medically and those who are managed with PCI or CABG. Dosage: 90mg single loading dose with 90mg twice daily for maintenance up to 12 months. Co-administered with 75-150mg aspirin daily. Contraindications: Hypersensitivity to any ingredients of this product. Active pathological bleeding; History of Intracranial haemorrhage; Moderate to severe hepatic impairment; Co-administration with strong CYP3A4 inhibitors e.g. ketoconazole, clarithromycin, nefazodone, ritonavir; and atazanavir; Children: <18 years; Pregnancy and lactation. Precautions: Patients with a propensity to bleed; Patients with coadministration of medicinal products that may increase the risk of bleeding within 24 hours of dosing; Concomitant use of medicinal products known to alter haemorrhagic e.g. antifibrinolytic therapy and/or non-steroidal anti-inflammatory drugs (NSAIDs); Patients at risk for bradycardic events; Co-administration of medicinal products known to induce bradycardia: History of ashen and/or COPD; Patients ≥75 years: Moderate/severe renal impairment; Concomitant treatment with an ARE history of hyperuricaemia or gouty arthritis; Patients with uric acid nephropathy: High maintenance dose aspirin (>300mg); Co-administration with strong CYP3A4 inducers e.g. rifampicin, dexamethasone, phenytoin, carbamazepine and phenobarbital; Co-administration with CYP2C19 substrates with narrow therapeutic index e.g. warfarin and ergot alkaloids; Patients on renal dialysis: Concomitant use of simvastatin or lovastatin >40mg, SSRIs e.g. paroxetine, sertraline and citalopram. Interactions: Strong and moderate CYP3A4 inhibitors e.g. ditrazepine, ampicillin, azaperone, erythromycin and fluconazole; CYP3A4 inducers: Medicinal products metabolised by CYP3A4: CYP3A4 substrates with narrow therapeutic index: Undesirable effects: Gastrointestinal: nausea, constipation, haemorrhagic, subcutaneous or dental bleeding, bruising and procedural site haemorrhage. Full local prescribing information is available upon request. APL.01.881.1216

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Opening Ceremony

Date: Saturday, 11 October
Time: 14:00 – 14:30
Venue: Room S421

Welcome Address

Yat-yin Lam
Program Director, 5th Asia Pacific Congenital & Structural Heart Intervention Symposium 2014 (APCASH)
President, Hong Kong Society of Congenital & Structural Heart Disease (HKCASH)

Kam-tim Chan
President, Hong Kong College of Cardiology (HKCC)

Congratulatory Address: Guest-of-Honour

Ziyad M. Hijazi, Foundation President, PICS Foundation

Professor Ziyad M. Hijazi (MD, MPH, MSCAI, FACC) is the Acting Chief Medical Officer and Chairman of the Department of Pediatrics at Sidra Medical and Research Center. Prof. Hijazi is also the Medical Director of the Sidra Cardiology Center of Excellence.

As Clinical Chief for Pediatrics, Prof. Hijazi drives the strategic direction of the Department of Pediatrics and integrates research and education priorities into a program of excellent clinical service delivery. He also holds the position of Chair of Pediatrics at Weill Cornell Medical College – Qatar, Sidra’s partner for medical education.

Prof. Hijazi is an interventional cardiologist who specializes in treating congenital and structural heart disease in both children and adults. He is a pioneer in the non-surgical repair of congenital and structural heart defects.

His annual Pediatric & Adult Interventional Cardiac Symposium (PICS/AICS) is a four-day conference which brings together a selected international faculty who provides demonstrations, live operations and the latest research breakthroughs in interventional cardiology for congenital and structural heart disease. This symposium attracts more than 750 interventional cardiologists from more than 60 countries around the world. Based upon this model, he is currently establishing collaborative pediatric cardiology research and clinical programs in China.

On May 11, 2008, Prof. Hijazi became the 31st President of the Society for Cardiovascular Angiography and Interventions (SCAI), the major organization for interventional cardiologists that has more than 4,000 members worldwide. In 2011, Mayor Thomas Menino declared July 25, 2011 as the Ziyad Hijazi Day in Boston, MA.

The PICS Foundation has been organized exclusively for charitable, educational and scientific purposes. The focus of the Foundation is to educate physicians and healthcare professionals involved in the care of children and adults with congenital and structural heart disease in the latest advances in the field of interventional therapies for congenital and structural cardiac defects.
Advances in Structural Heart Disease Intervention Beyond TAVR: Mitral Valve Repair and Left Atrial Appendage Occlusion

Saibal Kar, Cedars-Sinal Medical Center, USA

Saibal Kar, MD, is an interventional cardiologist in the Cardiology Division of the Department of Medicine at Cedars-Sinai Medical Center, where he is also the Director of Interventional Cardiac Research.

As an astute clinician and teacher, Dr. Kar is a skilled interventional cardiologist with a special expertise in valvuloplasty and congenital heart disease. His research interests are focused on coronary restenosis, device development and the advancement of percutaneous techniques in the treatment of congenital and valvular heart diseases. Involved in both clinical and experimental research, Dr. Kar’s clinical work has included publishing data on different aspects of angioplasty for the treatment of acute myocardial infarction. In the experimental lab, he has done original work on newer drug-eluting stents for the prevention of restenosis of coronary stents, and he recently developed a new drug-eluting stent, which is being used in a clinical trial in Germany.

Dr. Kar has published his clinical and experimental work in full manuscript form in peer-reviewed journals and has presented at numerous international meetings. He has written book chapters in Interventional Cardiology and General Cardiology, and he was instrumental in the startup of a special program of percutaneous closure of atrial and ventricular septal defects.

A board certified interventional cardiologist, Dr. Kar is a fellow and active member of the American College of Cardiology and American Heart Association. He is also a member of other professional organizations, including the Society of Coronary Angiography and Intervention, American College of Physicians, American Medical Association and Cardiology Society of India. He also serves on the Scientific Advisory Committee of the World Congress of Heart Failure.

Dr. Kar earned his medical degree from Nil Ratan Sircar Medical College in Calcutta, India. Following his internship, he completed his residency in medicine and his fellowship in cardiology at the Postgraduate Institute of Medical Education and Research in Chandigarh, India. After serving for a short time as Assistant Professor at this institute, he began working as an interventional cardiology fellow at the Epworth Hospital in Melbourne, Australia. Dr. Kar came to the United States and repeated his residency in medicine at the West Los Angeles Veterans Administration Hospital, and he completed his cardiology and interventional cardiology fellowship at Cedars-Sinai Medical Center. In view of his academic merits and previous accomplishments, the American Board of Medicine gave special consideration to shorten his period of residency and fellowship.

APCASH Distinguished Lecture 2014

Date: Saturday, 11 October
Time: 14:30 – 14:45
Venue: Room S421
Chairpersons: Yat-yin Lam (HK), Chiu-on Pun (HK), Le-feng Wang (PR China), Gabriel WK Yip (HK)
Advanced planning software for:

- Aortic Valve replacement procedures
- Mitral Valve replacement procedures
- Left Atrial Appendage closure procedures
Scientific Program

Day 1: Friday, 10 October 2014

<table>
<thead>
<tr>
<th>Time</th>
<th>Session Details</th>
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</table>
| 08:50 – 09:00 | Welcome  
Updating the Progress of Patients Receiving Live Demonstrations in 2013  
– Yat-yin Lam (HK) |
| 09:00 – 10:30 | Live Transmission From Shanghai Children’s Medical Center  
i-Con #1  
Chairpersons: Adolphus KT Chau (HK), Tak-cheung Yung (HK)  
Panelists: Jeng-sheng Chang (Taiwan), Jae-young Choi (South Korea),  
Jen-her Lu (Taiwan), Dora ML Wong (HK)  
10 mins Surgical Treatment for Neonatal Coarctation – Xin Li (HK)  
10 mins How to Work in the Branch Pulmonary Arteries? – Ziyad Hijazi (Qatar)  
10 mins Long-term Coronary Problems in Adult Patients after Kawasaki Disease – Teiji Akagi (Japan) |
| 10:30 – 11:00 | Tea Break & Visit Exhibits |
| 11:00 – 12:30 | Live Transmission From Shanghai Children’s Medical Center  
i-Con #2  
Chairpersons: Kin-shing Lun (HK), Gabriel WK Yip (HK)  
Panelists: Mazeni Alwi (Malaysia), Hidehiko Hara (Japan),  
Jung-sun Kim (South Korea), Nguyen Lan Hieu (Vietnam),  
Pi-chang Lee (Taiwan)  
10 mins Coronary AV Fistula – When to Close by Catheter or Surgical Approach – Mazeni Alwi (Malaysia)  
10 mins Coronary Fistula – Transcatheter Embolization by Coil Versus Vascula Plug Approach – Nguyen Lan Hieu (Vietnam)  
10 mins Device Closure of PDA in Preterm Infants – Yun-ching Fu (Taiwan) |
| 13:00 – 14:00 | Lunch Symposium sponsored by Lifetech Scientific  
Chairpersons: Xiang-qing Kong (PR China), Nageswara Rao Koneti (India),  
Yat-yin Lam (HK), Zhi-wei Zhang (PR China)  
12 mins Sharing of LAmbre LAAO Experiences – Yat-yin Lam (HK) |
Day 1: Friday, 10 October 2014

12 mins  Cera Occluders for VSD Closure  
  – Xiang-qing Kong (PR China)
12 mins  Hybrid VSD Device Closure Using Lifetech Cera Asymmetric VSD  
  – Dexter D Cheng (Philippines)
12 mins  Self Expanding Stents for Peripheral Arterial Disease  
  – Bryan PY Yan (HK)

14:00 – 15:30  
Live Transmission From Fuwai Hospital  
i-Structural #1  
Chairpersons: Leo CC Kum (HK), Maria SH Lee (HK)  
Panelists: Liang-long Chen (PR China), Wei Chen (PR China),  
  Kai-sheng Hsieh (Taiwan), Fen Li (PR China), Shinichi Shirai (Japan)
10 mins  Surgical Myomectomy Still the Choice of Treatment for HOCM  
  – Kwok-keung Ho (HK)
10 mins  Periprosthetic Leak Closure – Transapical Approach  
  – Xin Pan (PR China)
10 mins  Periprosthetic Leak Closure – Transfemoral Approach  
  – Reda Ibrahim (Canada)
10 mins  My Challenging LAA Case  
  – Wei Chen (PR China)

15:30 – 16:00  
Tea Break & Visit Exhibits

16:00 – 17:30  
Live Transmission From Fuwai Hospital  
i-Valve #1  
Chairpersons: Nguyen Lan Hieu (Vietnam), Yin-ming Ng (HK)  
Panelists: Xi-wei Deng (Macau), Chien-fu Huang (Taiwan),  
  Jia-hua Pan (PR China), John TH Wong (HK), Jiunn-ren Wu (Taiwan)
10 mins  How to Perform Percutaneous Balloon Aortic Valvuloplasty in Children?  
  – Bharat Dalvi (India)
10 mins  Percutaneous Balloon Mitral Valvotomy (PBMV) – Pre-op Assessment  
  – Andrew YW Li (HK)
10 mins  Percutaneous Balloon Mitral Valvotomy (PBMV) – Taped Case & Discussion  
  – Raman Krishna Kumar (India)

Breakout session continued on p.50
Day 1: Friday, 10 October 2014

Rm S428  BREAKOUT SESSION (14:00 – 15:30)  Competition

14:00 – 15:30

Cross-strait Challenging Case Competition – Session I

*Challenging Congenital Cases*

Judges: Jae-young Choi (South Korea), Hidehiko Hara (Japan), Louisa KH Poon (HK), Man-ching Yam (HK), Zhi-wei Zhang (PR China)

10 mins  Invited Case Presentation – Congenital Valvular Heart Disease for Adult Cardiologist – *Hidehiko Hara (Japan)*

10 mins  Invited Case Presentation – How to Un latch? The Key for Difficult Retrieval of an Embolized Amplatzer Septal Occluder – *Jae-young Choi (South Korea)*

10 mins  Invited Case Presentation – Occlusion of Large PDA with Severe Pulmonary Hypertension – *Zhi-wei Zhang (PR China)*

10 mins  Case 1: Using the Coronary Chronic Total Occlusion (CTO) Technique to Recanulate Totally Occluded Vessels in the Congenital Heart Disease Patients – *Jieh-neng Wang (Taiwan)*

10 mins  Case 2: Experience and Lessons: Transcatheter Occlusion of Aortopulmonary Collateral Vessels – *Mi Li (PR China)*

10 mins  Case 3: Repair the Ceiling of Coronary Sinus – *Ming-tai Lin (Taiwan)*


HIGHLIGHTS OF TOMORROW (11 October)

- Best Abstract Competition (S421, 08:00 – 09:00)
- Live Transmission from Queen Elizabeth Hospital (S421, 09:00 – 18:00)
- Opening Ceremony & APCASH Distinguished Lecture 2014 by Dr. Saibal Kar (S421, 14:00 – 14:45)
- Cross-straits Challenging Case Competition (S428, 16:45 – 18:00)
Day 2: Saturday, 11 October 2014

**Rm S421 PLENARY SESSION (08:00 – 18:00)**

**08:00 – 09:00**  
**Best Abstract Competition**

**Judges:** Jeffrey WH Fung (HK), Archie YS Lo (HK), Jou-kou Wang (Taiwan),  
Man-ching Yam (HK), Gabriel WK Yip (HK)

**8 mins** Abstract 1: New Therapeutic Strategies for Adult Patients with Atrial Septal Defect and Severe Pulmonary Atrial Hypertension; Combination of Advanced Medical Therapy and Catheter Intervention – *Teiji Akagi (Japan)*

**8 mins** Abstract 2: Percutaneous Closure of Atrial Septal Defects under Transthoracic Echocardiography Guidance without Fluoroscopy – *Kun-jing Pang (PR China)*

**8 mins** Abstract 3: Percutaneous Closure of Atrial Septal Defects by Devices in Patients Aged 40 Years and Older in Vietnam National Heart Institute – *Nguyen Lan Hieu (Vietnam)*

**8 mins** Abstract 4: Intra-pulmonary Artery Echocardiography as a Guide of Transcatheter Occlusion of Patent Ductus Arteriosis in Adult-sized Patients – *Kenji Suda (Japan)*

**8 mins** Abstract 5: Outcomes of Combined Treatments of Selective Pulmonary Vasodilators after the Trans-catheter Closure in Atrial Septal Defect with Pulmonary Arterial Hypertension – *Lucy Eun (South Korea)*

**8 mins** Abstract 6: Infective Endocarditis Following Percutaneous Pulmonary Valve Replacement: Diagnostic Challenges and Application of Intra-cardiac Echocardiography – *Gary SH Cheung (HK)*

**09:00 – 10:30**  
**Live Transmission From Queen Elizabeth Hospital**

**i-Con #3**

**Chairpersons:** Yiu-fai Cheung (HK), Maurice P Leung (HK)  
**Panelists:** Yun-ching Fu (Taiwan), Raman Krishna Kumar (India),  
U-po Lam (Macau), Ya-wei Xu (PR China)

Debate: Should Ductal Stent Implantation be Considered for All Newborn Infants with Reduced Pulmonary Blood Flow?
- **10 mins** Pros – *Mazeni Alwi (Malaysia)*
- **10 mins** Cons – *Maurice P Leung (HK)*

Debate: All Patients with Transannular Patch Repair of TOF Should Have an Early Pulmonary Valve Replacement in Childhood?
- **10 mins** Pros – *Worakan Promphan (Thailand)*
- **10 mins** Cons – *Flora HF Tsang (HK)*

**10:30 – 11:00**  
**Tea Break & Visit Exhibits**

continued on p.52
Day 2: Saturday, 11 October 2014

11:00 – 12:30

Live Transmission From Queen Elizabeth Hospital

Chairpersons: Boron CW Cheng (HK), Yuk-kong Lau (HK)
Panelists: Bharat Dalvi (India), Jason KC Ko (HK), Xiang-qing Kong (PR China), Nguyen Lan Hieu (Vietnam)

10 mins Role of 3D Modeling in Structural Heart Interventions
   – Patricia Lopes (Belgium)
10 mins Role of ICE in Percutaneous Pulmonary Valve Implantation
   – Qi-ling Cao (Qatar)
10 mins Taped Case for Melody Pulmonary Valve Implantation
   – Lars Sondergaard (Denmark)
10 mins Forthcoming Pulmonary Valve Technology – Ziyad Hijazi (Qatar)

12:30 – 13:30

Lunch Symposia sponsored by Abbott Vascular & AstraZeneca

Chairpersons: Mario Evora (Macau), Bin Liu (PR China), Le-feng Wang (PR China), Chris KY Wong (HK)

15 mins Current Status and Challenges of Bioresorbable Scaffolds (BRS)
   – Vincent OH Kwok (HK)
15 mins Use of MitraClip Beyond Everest Criteria – Takashi Matsumoto (Japan)
15 mins MitraClip Worldwide Progress Report: A Global Perspective
   – Carlos Hernandez (USA)

14:00 – 14:30

Opening Ceremony

Guest-of-Honor – Professor Ziyad Hijazi, Foundation President, PICS Foundation

14:30 – 14:45

APCASH Distinguished Lecture 2014

Chairpersons: Yat-yin Lam (HK), Chiu-on Pun (HK), Le-feng Wang (PR China), Gabriel WK Yip (HK)

15 mins Advances in Structural Heart Disease Intervention Beyond TAVR: Mitral Valve Repair and Left Atrial Appendage Occlusion
   – Saibal Kar (USA)

continued on p.53
Day 2: Saturday, 11 October 2014

14:45 – 16:15
Live Transmission From Queen Elizabeth Hospital
*i-Valve #4*

Chairpersons: Chung-seung Chiang (HK), Kwok-keung Ho (HK)
Panelists: Paul TL Chiam (Singapore), Gary SH Cheung (HK), Ryan LY Ko (HK), Shinichi Shirai (Japan), Li-ting Zhang (PR China)

10 mins  Taped Case – Venus Aortic Valve Implantation
– Zhen-gang Zhao (PR China)

10 mins  Self-expanding versus Balloon-expandable Device Implant – When and How to Choose? – Gerald Yong (Australia)

10 mins  Role of CT Surgeon in Complex Access for TAVR – Innes YP Wan (HK)

10 mins  LOTUS Valve System and the REPRISE Clinical Program
– Rui Hong (USA)

16:15 – 16:45
Tea Break & Visit Exhibits

16:45 – 18:00
Live Transmission From Queen Elizabeth Hospital
*i-Con #5*

Chairpersons: Liang Chow (HK), Sum-kin Leung (HK)
Panelists: Hidehiko Hara (Japan), Kai-sheng Hsieh (Taiwan), Zheng Huang (PR China), U-po Lam (Macau), Jing-ming Wu (Taiwan), Ying-ling Zhou (PR China)

10 mins  Percutaneous Closure of ASDs with Relatively Deficient Rims
– Tips and Tricks – Raman Krishna Kumar (India)

10 mins  PFO: To Close or Not TO Close?
– Jung-sun Kim (South Korea)

HIGHLIGHTS OF TOMORROW (12 October)

- Live Transmission from Hanoi Medical University Hospital
  (S421, 09:00 – 15:00)
- HKSTENT Complication Forum at APCASH 2014 (S428, 09:00 – 10:30)
- Allied Health Session (S428, 11:00 – 15:00)
- Best Clinical Case Competition (S421, 15:30 – 17:15)
Day 2: Saturday, 11 October 2014

**Rm S428**  **BREAKOUT SESSION (11:00 – 18:00)**

**11:00 – 12:30**

**Partner Session**

**Joint Session (APACS-APHA / HKCASH / HKSTENT) on TAVR**

**i-Valve #3**

**Chairpersons:** Anna KY Chan (HK), Shinobu Hosokawa (Japan), Chiu-sun Yue (HK), Jin-gang Zheng (PR China)

- 15 mins  TAVI – The Anaesthetic Prospectives – *Simon KC Chan (HK)*
- 15 mins  Optimal Techniques for Obtaining Large Caliber Arterial Access – *Gerald Yong (Australia)*
- 15 mins  Role of Cardiac CT in TAVI – *Winnie SW Chan (HK)*
- 15 mins  How to Minimize TAVI Related Stroke? – *Paul TL Chiam (Singapore)*
- 15 mins  The Evolving Indications for TAVI – *Gary SH Cheung (HK)*

**14:45 – 16:15**

**Lessons Learnt from Complications**

**i-Con #4**

**Chairpersons:** Teiji Akagi (Japan), Hung-tao Chung (Taiwan), Ming-chih Lin (Taiwan), Yu-mei Xie (PR China)

- 15 mins  I Wish I Hadn’t Used an VSD Occluder – *Yu-mei Xie (PR China)*
- 15 mins  My Worst Coarctation Case – *Do Nguyen Tin (Vietnam)*
- 15 mins  The ASD Occluder is Where? – *Bharat Dalvi (India)*
- 15 mins  My Worst Transseptal Puncture Case – *Takashi Matsumoto (Japan)*
- 15 mins  My Worst PDA Case – *Jou-kou Wang (Taiwan)*

**16:15 – 16:45**

**Tea Break & Visit Exhibits**

**16:45 - 18:00**

**Competition**

**Cross-strait Challenging Case Competition – Session II**

**Challenging Structural Cases**

**Judges:** Mario Evora (Macau), Shu-kin Li (HK), Kin-ming Tam (HK), Ya-wei Xu (PR China)

- 10 mins  Invited Case Presentation - My Worst LAA Closure Case – *Ya-wei Xu (PR China)*
- 10 mins  Invited Case Presentation - My Worst TAVI Case – *Apostolos Tzikas (Greece)*
- 10 mins  Case 1: Valve-in-valve-in-valve – *Adrian Cheong (HK)*
- 10 mins  Case 2: Usefulness of 3D Transesophageal Echocardiography in Guiding Transcatheter Closure of Ruptured Sinus of Valsalva Aneurysm Using the Amplatzer Duct Occluder – *Chun-an Chen (Taiwan)*
- 10 mins  Case 3: Retrieval and Management of an Embolized Aortic Valve – *Ngai-hong Luk (HK)*
- 10 mins  Case 4: What’s Going On? A Common Complication of LAA Occlusion Appeared in a Rare Time – *Iat-Ion Leong (Macau)*
Day 3: Sunday, 12 October 2014

Rm S421 PLENARY SESSION (09:00 – 17:30)

09:00 – 10:30
Live Transmission From Hanoi Medical University Hospital
i-Con #6

Chairpersons: Mazeni Alwi (Malaysia), Dora ML Wong (HK)
Panelists: Hung-leong Cheung (HK), Pak-cheong Chow (HK), Fen Li (PR China), Vincent WS Ng (HK)

10 mins Perimembranous VSD Closure – When Do We Ask for a Surgical Closure? – Xin Li (HK)
10 mins Transcatheter Closure of Supracristal VSD with the Amplatzer Duct Occluder – Yun-ching Fu (Taiwan)
10 mins How to Close It with an Amplatzer VSD II Occluder? – Reda Ibrahim (Canada)
10 mins How to Close It with a PFM VSD Coil Device? – Do Nguyen Tin (Vietnam)

10:30 – 11:00
Tea Break & Visit Exhibits

11:00 – 12:30
Live Transmission From Hanoi Medical University Hospital
i-Valve #5

Chairpersons: Zhi-min Du (PR China), Gabriel WK Yip (HK), Yat-yin Lam (HK)
Panelists: Cathy TF Lam (HK), Toshiro Shinke (Japan), Eric CY Wong (HK), Francis SF Yiu (HK)

10 mins CoreValve Evolut R – Technology Review, Clinical Results – Paul TL Chiam (Singapore)
10 mins Outcomes of MitraClip Repair for Degenerative MR – Olaf Franzen (Switzerland)
10 mins Taped Case – MitraClip from Hong Kong – Boron CW Cheng (HK)
10 mins Transcather Mitral Valve Replacement: Taped Case – Lars Sondergaard (Denmark)

12:30 – 13:30
Lunch Symposium sponsored by St. Jude Medical

Chairpersons: Steven SL Li (HK), Do Nguyen Tin (Vietnam), Nageswara Rao Koneti (India)

20 mins ACP – Recent Clinical Data – Apostolos Tzikas (Greece)
20 mins ACP – Tips and Trick on Implanting ACP and How to Tackle with Complication – Jai-wun Park (Germany)
20 mins ADO-II in VSD Closure – Ting-liang Liu (PR China)

13:30 – 15:00
Live Transmission From Hanoi Medical University Hospital
i-Structural #2

continued on p.56
Day 3: Sunday, 12 October 2014

Chairpersons: Kam-tim Chan (HK), Chi-ming Wong (HK)
Panelists: Chi-chung Choy (HK), Wilson WM Chan (HK), Jason LK Chan (HK), Li-wah Tam (HK), Kin-lam Tsui (HK)

10 mins Stent Graft for Aortic Dissection – Cases Sharing – Randolph HL Wong (HK)
10 mins Amulet – A Better Device than ACP? – Xavier Freixa (Spain)
10 mins A Taped Occlutech LAA Case – Jai-wun Park (Germany)
10 mins LAA Closure Under Local Anaesthesia – How Often Feasible? – Yat-yin Lam (HK)

15:00 – 15:30
Tea Break & Visit Exhibits

15:30 – 17:15
Competition
Best Clinical Case Competition

Judges: Reda Ibrahim (Canada), Saibal Kar (USA), Vincent OH Kwok (HK), Patrick TH Ko (HK), Maria SH Lee (HK), Shou-pang Wong (HK), Jou-kou Wang (Taiwan)

10 mins Invited Case Presentation – My Worst Edwards TAVI Case – Saibal Kar (USA)
10 mins Invited Case Presentation – My Worst ACP Case – Reda Ibrahim (Canada)
10 mins Case 1: Novel Minimal Invasive Approach to Close Abnormal Fistulous Connection between Right Pulmonary Artery and Left Atrium Using an Atrial Septal Occluder Device – Uditha Indika Hewarathna (Sri Lanka)
10 mins Case 2: Rehabilitation of Occluded Pulmonary Artery Branch after Operation Using Radiofrequency, Cutting Balloon and Stents – Ali Ibrahim Elarabi (Malaysia)
10 mins Case 3: Management of Fractured Left Pulmonary Artery Stent with Severe Residual Stenosis – Robin HS Chen (HK)
10 mins Case 4: Using the Chronic Total Occlusion (CTO) Technique to Recanalate Totally Occluded Pulmonary Artery in a Patient after Fontan Operation – Chi-lun Wu (Taiwan)
10 mins Case 5: Stroke Prevention with Percutaneous Left Atrial Appendage Transcatheter Occlusion in a Patient after AV and MV Replacement with Persistent Left Atrial Tachycardia, Who Underwent Two RF Ablations of Accessory Pathway and Typical Atrial Flutter – Andrzej Hasiec (Poland)
10 mins Case 6: Transcatheter Atrial Septal Defect Closure with Right Aortic Arch Is it Really Difficult? – Masahide Tokue (Japan)
10 mins Case 7: Percutaneous Transvenous Mitral Commissurotomy and Atrial Septal Defect Closure using Amplatzer Septal Occlusion Device in Lutembacher’s Syndrome: Philippine Heart Center Experience – Francis Carl L Catalan (Philippines)
10 mins Case 8: Calcium: Nightmare in TAVI – Jason LK Chan (HK)

17:15 – 17:30
Prize Presentation & Closing Remarks

Breakout session continued on p.57
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<tr>
<th>Time</th>
<th>Session</th>
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<tr>
<td>09:00 – 10:30</td>
<td><strong>Partner Session</strong>&lt;br&gt;Joint Session (HKSTENT &amp; Montreal Heart Institute) on Complication&lt;br&gt;Chairpersons: Reda Ibrahim (Canada), Michael KY Lee (HK), Ping-tim Tsui (HK), Edmond ML Wong (HK)&lt;br&gt;Panelists: Alan KC Chan (HK), Jason LK Chan (HK), Xavier Freixa (Spain), Tak-sun Tse (HK), Kin-lam Tsui (HK), Apostolos Tzikas (Greece), Simon CC Lam (HK), Yat-yin Lam (HK)&lt;br&gt;15 mins Complicated Percutaneous Repair of a Para-valvular Mitral Leak – Kevin KH Kam (HK)&lt;br&gt;15 mins Tips and Tricks to Reduce Access Site Complications – Paul TL Chiam (Singapore)&lt;br&gt;15 mins Emergency TAVI: Does It Exist? Is the Risk Higher? – Gerald Yong (Australia)&lt;br&gt;15 mins My Difficult VSD Cases – Nageswara Rao Koneti (India)</td>
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<tr>
<td>10:30 – 11:00</td>
<td><strong>Tea Break &amp; Visit Exhibits</strong></td>
</tr>
<tr>
<td>11:00 – 12:30</td>
<td><strong>Allied Health Session – Part I</strong>&lt;br&gt;Chairpersons: Sek-ying Chair (HK), Ling-ling Cheung (HK)&lt;br&gt;5 mins Introduction by President of HKCNA – Kam-wai Lai (HK)&lt;br&gt;30 mins Essential Cardiac Anatomy Relevant to Structural Heart Disease Intervention – Boron CW Cheng (HK)&lt;br&gt;30 mins What You Need to Know for Complication Management in Structural Heart Intervention (From Instrument to Procedure) – Kam-wai Lai (HK)</td>
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<tr>
<td>13:30 – 15:00</td>
<td><strong>Allied Health Session – Part II</strong>&lt;br&gt;Chairpersons: Sek-ying Chair (HK), Adrian Cheong (HK)&lt;br&gt;30 mins Nursing Management on LAAO – Bik-yi Wong (HK)&lt;br&gt;30 mins Anaesthetic Perspective in Managing Patient Inside Cath Lab – Eric HK So (HK)</td>
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<tr>
<td>15:00 – 15:30</td>
<td><strong>Tea Break &amp; Visit Exhibits</strong></td>
</tr>
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</table>
Various workshops will feature the latest techniques and technologies by providing interactive product demonstrations and hands-on sessions to a focused group of participants.

**S427 Abbott Vascular Training Workshop**

MitraClip: The only transcatheter edge-to-edge mitral valve repair concept in the world. Join the workshop for therapy introduction and heart model training.

Therapy Introduction: 15 mins  
Heart Model Demonstration: 30 mins

**S426 Boston Scientific Training Workshop**

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Workshop: Get your hands-on on Lotus, Watchman and Vessix  
Talk: Lotus - The power of control

**S429 St. Jude Medical Training Workshop**

Amplazter Cardiac Plug (LAAO - ACP) Stimulator Workshop

Overview of St. Jude Medical Left Atrial Appendage Occluder - ACP in terms of overall procedure with focus on echo, device sizing and in-servicing via support of portable simulator hands-on.

**S424 Lifetech Scientific Training Workshop**

We would like to invite you to join us at the Lifetech Scientific training workshop for the latest solution to Congenital and Structure Heart Disease.
Perfecting Performance

Figulla® Flex II The Third Generation ASD and PFO Occluders
Shanghai Children’s Medical Center, Shanghai

MPA STENTING

Live Case number: #1 10 October 2014, 09:00 – 12:30

1. **Live Case Operators:**
   - Wei Gao (PR China)
   - Ziyad Hijazi (Qatar)

2. **History:**
   - M/6 yrs, D-TGA, S/P Switch procedure 6 years ago, MPA stenosis.

3. **Physical Findings:**
   - Grade 3/6 systolic murmur over 2nd-4th left sternal border.

4. **Investigations:**
   - **Echo (TTE/TEE):**
     - D-TGA, S/P Switch, Severe MPA stenosis (ΔP 82mmHg).
   - **MRI scan:**
     - MPA 7.6mm, ascending aortic dilation.

5. **Intended Intervention:**
   - MPA stenting.
Shanghai Children’s Medical Center, Shanghai
RPA STENTING

Live Case number: #2 10 October 2014, 09:00 – 12:30

1. Live Case Operators:
   Ting-liang Liu (PR China)
   Ziyad Hijazi (Qatar)

2. History:
   F/6 yrs, S/P PA/VSD 5 years ago, Re-Stenosis, S/P RVOT reconstruction 2 years ago, RPA stenosis.

3. Physical Findings:
   Grade 3/6 systolic murmur 2nd - 4th left sternal border.

4. Investigations:
   Echo (TTE/TEE):
   S/P PA/VSD, severe RPA stenosis (Δp 58mmHg).
   MRI scan:
   RPA stenosis: Proximal and distal diameters: 4.9 and 8.3mm respectively.

5. Intended Intervention:
   RPA Stenting.
Shanghai Children’s Medical Center, Shanghai
RPA/LPA STENTING

Live Case number: #3 10 October 2014, 09:00 – 12:30

1. Live Case Operators:
   Ziyad Hijazi (Qatar)
   Wei Gao (PR China)

2. History:
   M/9 yrs, S/P TOF repair, severe RPA/LPA stenosis.

3. Investigations:
   Echo (TTE/TEE):
   • RPA stenosis: Peak gradient 96mmHg.
   • LPA stenosis: Peak gradient 80mmHg.

4. Intended Intervention:
   RPA/LPA Stenting.
Shanghai Children’s Medical Center, Shanghai

TRANSCATHETER CLOSURE OF RESIDUAL SHUNTS

Live Case number: #4 10 October 2014, 09:00 – 12:30

1. Live Case Operators:
   Wei Gao (PR China)
   Ting-liang Liu (PR China)

2. History:
   M/2 yrs, multiple muscular VSD/ASDs with repair, postoperative residual shunts with pulmonary hypertension.

3. Investigations:
   Echo (TTE/TEE):
   S/P muscular VSD patch repair, multiple residual defects overall size 2.1cm.

4. Intended Intervention:
   Transcatheter closure of residual shunts.
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1. **Live Case Operators:**
   Qi-ling Cao (Qatar)
   Xiang-bin Pan (PR China)
   Worakan Promphan (Thailand)
   Ge-jun Zhang (PR China)

2. **History:**
   - F/14 yrs; Weight: 60Kg; Height: 158cm.
   - Percutaneous pulmonary valve balloon dilatation in year 2008.
   - Severe pulmonary regurgitation after percutaneous pulmonary valve balloon dilatation.

3. **Family History:**
   There was no relevant family history.

4. **Physical Findings:**
   Both systolic and diastolic murmurs heard at the pulmonary area.

5. **Investigations:**
   - ECG showed sinus arrhythmia.
   - Chest X-ray showed right ventricular enlargement and pulmonary artery broadening.
   - Echocardiography showed severe pulmonary regurgitation and RV dilation.

   **Cardiac CT:**
   - Pulmonary valve ring diameter: 19mm.
   - Main pulmonary artery diameter: 18mm.
   - Left pulmonary artery diameter: 19mm.
   - Right pulmonary artery diameter: 15mm.

   **Cardiac MRI:**
   - Right ventricular enlargement (approximate 32mm transverse diameter during diastole).
   - Severe pulmonary regurgitation.
   - Left heart function: LVEF = 53.7%; CO = 3.22L/min; EDV = 92.1ml.
   - Right heart function: RVEF = 36.8%; CO = 3.29L/min; EDV = 137.3ml.

6. **Intended Intervention:**
   Percutaneous pulmonary valve implantation.
Fuwai Hospital, Beijing
TRANSFEMORAL TRANSCATHETER AORTIC Valve Replacement (TAVR)

Live Case number: #6  10 October 2014, 16:00 – 17:30

1. **Live Case Operators:**
   Yong-jian Wu (PR China)
   Yue-jin Yang (PR China)

2. **History:**
   - M/67 yrs; Weight: 40Kg; Height: 160cm.
   - Suffering angina pectoris and reduced exercise tolerance for 2 years.
   - Diagnosed to have severe aortic valve stenosis and given medical therapy.
   - Severe COPD.
   - The patient was diagnosed with “Severe aortic valve stenosis, pulmonary arterial hypertension, NYHA Class III, severe COPD.”

3. **Family History:**
   There was no relevant family history.

4. **Physical Findings:**
   A systolic murmur heard at the aortic valve area.

5. **Investigations:**
   - ECG showed sinus rhythm.
   - Chest X-ray showed left ventricular enlargement and pulmonary congestion.
   - Echocardiography showed severe aortic valve stenosis, the mean gradient is 86mmHg.
   - Pulmonary arterial hypertension. LVED: 39mm, LVEF: 60%.

**Cardiac CT:**
- LAD stenosis <50%.
- Bicuspid aortic valve with non-calcified raphe.
- The annulus diameters: 24 x 26.5mm.
- Ascending aortic diameter: 44mm.
- The heights of LMS & RCA are 11mm and 12.6mm from aortic annulus, respectively.

6. **Intended Intervention:**
   Transfemoral TAVR.
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vs warfarin

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PRADAXA® (dabigatran etexilate) is indicated for the prevention of stroke and systemic embolism in adult patients with non-valvular atrial fibrillation with one or more risk factors:

1 Risk factors: previous stroke, transient ischemic attack, or systemic embolism (SEE), left ventricular ejection fraction < 40%, symptomatic heart failure, > New York Heart Association (NYHA) Class 3; age > 75 years; age > 65 years associated with one of the following: diabetes mellitus, coronary artery disease, or hypertension.

Pradaxa® (dabigatran etexilate) is a prescription medicine. For complete information, please refer to the full prescribing information.


Boehringer Ingelheim

Simply superior stroke prevention
Queen Elizabeth Hospital, Hong Kong
AORTIC STENTING

Live Case number: #7 11 October 2014

1. Live Case Operators:
Ziyad Hijazi (Qatar)
Dora May-ling Wong (HK)
Maria Shuk-han Lee (HK)
Louisa Kam-ha Poon (HK)

Anaesthetists: Douglas King-tak Fok (HK), Yu-fat Chow (HK)

2. History:
- M/ 14 yrs.
- Coarctation (CoA) diagnosed at age of 7.
- Percutaneous balloon dilation in 2007.
- Developed residual CoA, pseudoaneurysm and hypertension.
- Other problems: Obesity, hyperlipidaemia.

3. Physical Findings:
- BW: 90.2Kg; Height: 169cm; BP: 126/62mmHg.

4. Investigations:
- Chest X-ray: Normal, ECG: Sinus rhythm, LV hypertrophy.
- Echo: Residual gradient 30mmHg with diastolic runoff. Aortic arch 12mm. Coarctation: narrowest diameter 6mm.
- MRI: Residual coarctation with pseudoaneurysm, isthmus 13mm.

5. Intended Intervention:
- Aortic stenting.
ATRIAL SEPTAL DEFECT CLOSURE

Live Case number: #8  11 October 2014

1. Live Case Operators:
   Lars Sondergaard (Denmark)
   Jason Leung-kwai Chan (HK)
   Alan Ka-chun Chan (HK)
   Eric Chi-yuen Wong (HK)
   Kam-tim Chan (HK)

2. History:
   • F/21 yrs, University student.
   • Good past health.
   • Decreased exercise tolerance with a heart murmur detected on physical examination.
   • No History of stroke/ persistent fever.

3. Family History:
   Unremarkable.

4. Investigations:
   ECG: Normal sinus rhythm.
   Echo (TTE/TEE):
   Large atrial septal defect (ASD), around 2.6x3.7cm in diameter (3D measurement), left to right shunt, presence of all 4 rims (minimum 5mm), dilated RV, moderate TR, RVSP: ~43mmHg, all pulmonary veins were drained into LA.

5. Intended Intervention:
   Percutaneous closure of ASD (Occlutech/ Amplatzer device) under ICE guidance.

6. Potential difficulties:
   • Large ASD.
   • The patient strongly requested trial of percutaneous closure before considering surgical repair.

7. Diagrams / Images:
Queen Elizabeth Hospital, Hong Kong

STENTING OF STENOSED BAFFLE POST CORONARY SINUS ASD REPAIR

Live Case number: #9 11 October 2014

1. Live Case Operators:
   Ziyad Hijazi (Qatar)
   Dora May-ling Wong (HK)
   Maria Shuk-han Lee (HK)
   Louisa Kam-ha Poon (HK)

   Anaesthetists: Douglas King-tak Fok (HK), Yu-fat Chow (HK)

2. History:
   • F/19 yrs.
   • Retinoblastoma of left eye with enucleation 1996.
   • Coronary sinus ASD repaired by Dr. C Brizard in 2004.
   • Developed baffle stenosis.

3. Physical Findings:
   • Pink BW 63.8Kg; BP 102/62mmHg.
   • Heart sounds: Normal.

4. Investigations:
   • Chest X-ray and ECG normal.
   • Cardiac catheterization (2007): Moderate baffle stenosis.
   • CT coronary angiography (2009): Baffle narrowing to 3mm.

5. Intended Intervention:
   Stenting of the stenosed baffle post coronary sinus ASD repair.
Queen Elizabeth Hospital, Hong Kong

TRANSCATHETER AORTIC VALVE REPLACEMENT (TAVR)

Live Case number: #10 11 October 2014

1. Live Case Operators:
   Lars Sondergaard (Denmark)
   Michael Kang-yin Lee (HK)
   Kam-tim Chan (HK)
   Jason Leung-kwai Chan (HK)
   TEE: Eric Chi-yuen Wong (HK)
   Anaesthetists: Douglas King-tak Fok (HK) / Eric Hang-kwong So (HK)
   Cardiac Surgeons: Vincent Wing-shun Ng (HK) / Hung-leong Cheung (HK)

2. History:
   • M/72 yrs. ADL Independent.
   • Chronic rheumatic heart disease with mitral valve replacement in 1984.
   • Atrial fibrillation on warfarin.
   • History of bleeding gastric ulcer, healed.
   • Recurrent heart failure with hospital admission, iron deficiency anemia with normal finding on OGD, stool for occult blood –ve.
   • NYHA FC III.

3. Investigations:
   ECG: Atrial fibrillation.
   Echo (TTE/TEE):
   • LV function mildly impaired, EF~50%.
   • Hugh LA, smoky LA, no definite thrombus.
   • Severe aortic stenosis, mean gradient: 46mmHg, AVA: ~0.41 cm².
   • Aortic annulus diameter: ~25mm, moderate AR.
   • MVR function satisfactory, mean gradient across MVR~3mmHg.
   • Mild para-MVR leak on both sides.
   • Moderate TR with Pul HT.
   Coronary angiogram: Normal coronary angiogram
   CT aortogram:
   • Poor image as the presence of MVR.
   • Aortic annulus diameter:~ 24x30 mm, different to measure the perimeter.
   • Minimal diameter of right femoral artery: 6.0mm, eccentric calcium.
   • Minimal diameter of left femoral artery: 5.2mm, eccentric calcium.
   • Logistic Euro-score: 24.51%
   • STS score: 7.39%

4. Intended Intervention:
   TAVR (CoreValve), femoral approach (consensus from Heart team).

5. Potential Difficulties:
   • No clear measurement from CT aortogram.
   • Short distance between aortic annulus and MVR.
   • 3D printing model may help.

6. Diagrams/ Images
Queen Elizabeth Hospital, Hong Kong

MITRAL CLIP PERCUTANEOUS MITRAL VALVE REPAIR

Live Case number: #11 11 October 2014

1. Live Case Operators:
   Olaf Franzen (Switzerland)
   Boron Cheung-wah Cheng (HK)
   Steven Siu-lung Li (HK)
   TEE: Francis Siu-fung Yiu (HK)
   Anaesthetists: Douglas King-tak Fok (HK) / Eric Hang-kwong So (HK)

2. History:
   • F/82 yrs, ADL Independent.
   • Hypertension, known posterior mitral valve prolapse with severe MR.
   • Recurrent heart failure with hospital admission, decrease exercise tolerance.
   • NYHA FC III.

3. Investigations:
   Echo (TTE/TEE):
   • LV systolic function satisfactory, EF~60%, normal LV size.
   • Degenerative MV.
   • Prolapsed P3 with severe eccentric MR.
   • Flail gap: 5-6mm, flail width: 12-13mm.
   • No MS/AS.
   • Trivial AR.
   • Moderate TR with Pul HT.
   • Logistic Euro-score: 17.51%.

4. Intended Intervention:
   MitraClip (consensus from Heart team, high risk surgical candidate)

5. Potential Difficulties:
   Prolapsed P3
Queen Elizabeth Hospital, Hong Kong

LEFT ATRIAL APPENDAGE OCCLUSION (LAAO)

Live Case number: #12 11 October 2014

1. Live Case Operators:
   Reda Ibrahim (Canada)
   Jason Leung-kwai Chan (HK)
   Michael Kang-yin Lee (HK)
   Alan Ka-chun Chan (HK)
   TEE: Eric Chi-yuen Wong (HK)
   Anaesthetists: Douglas King-tak Fok (HK) / Eric Hang-kwong So (HK)

2. History:
   - F/70 yrs, Walks with stick.
   - Nasopharyngeal carcinoma with radiotherapy 20 years ago, hypothyroidism on T4, hypertension, old CVA, AF on warfarin.
   - Recurrent falls, history of head injury with right frontal subdural hemorrhage.
   - CHA2SD2-VASC score: 5.
   - HAS-Bled score: 4.

3. Investigations:
   ECG: Atrial fibrillation.
   Echo (TTE/TEE):
   - Intact atrial septum.
   - Mild MR/TR, no AS/MS.
   - LVEF: ~60%.
   - LAA measurements please refer to slides during the procedure.

4. Intended Intervention:
   LAAO
Queen Elizabeth Hospital, Hong Kong
LEfT ATRIAl APPEnDAGE OCCLUsION (LAAO)

Live Case number: #13 11 October 2014

1. Live Case Operators:
   Saibai Kar (USA)
   Jason Leung-kwai Chan (HK)
   Michael Kang-yin Lee (HK)
   Alan Ka-chun Chan (HK)
   TEE: Eric Chi-yuen Wong (HK)
   Anaesthetists: Douglas King-tak Fok (HK) / Eric Hang-kwong So (HK)

2. History:
   • M/73 yrs, ADL Independent.
   • Hypertension, diabetes mellitus, AF on warfarin.
   • Warfarin was stopped since then, only on aspirin + PPI.
   • CHA2SD2-VASC score: 3.

3. Investigations:
   ECG: Atrial fibrillation.
   Echo (TTE/TEE):
     • Intact atrial septum, mild to moderate MR, mild TR, no AS/MS.
     • LV EF 60%.
   LAA measurements please refer to slides during procedure.
   CT cardiac:
     • Images please refer to slides during procedure.

4. Intended Intervention:
   LAAO.

5. Diagrams / Images:
   TEE image of LAA  CT of LAA
Live Cases

Queen Elizabeth Hospital, Hong Kong
PERCUTANEOUS EMBOLIZATION OF CORONARY FISTULA

Live Case number: #14 11 October 2014

1. Live Case Operators:
   Reda Ibrahim (Canada)
   Jason Leung-kwai Chan (HK)
   Gabriel Wai-kwok Yip (HK)
   Kam-tim Chan (HK)

2. History:
   • M/64 yrs; Welder; Chronic smoker.
   • Obesity, Impaired glucose tolerance (IGT), COPD, OA knees, Permanent AF on aspirin.
   • Coronary arterio-venous fistula presented with progressive dyspnea on exertion.

3. Investigations:
   Echo (TTE/TEE) (24 Jan 2013):
   • Coronary AVF to MPA. Small PFO.
   • Dilated LV. LVEDd/Ds: 6.6/5.2cm, LVEF~40%.

   Echo (TTE) (29 May 2014):
   • Biatrial enlargement. Dilated ascending aorta~4cm at RPA level.
   • Mild MR, Mod TR. RVSP~42mmHg(SBP~117mmHg).
   • Moderately dilated RV with fair systolic function (TAPSE~1.6cm; Normal≥1.6cm).
   • Dilated LV with mild systolic impairment. LVEDd/Ds: 6.7/5.4cm, LVEF~40%.
   • Normal pericardium.

   Right/Left heart catheterization (31 Jan 2013):
   • Significant O2 saturation step-up at MPA. Qp: Qs= 1.8.
   • Mean MPA pressure~19mmHg. PCWP~12mmHg.
   • LMS: Normal and large.
   • LAD: proximal LAD fistula draining into MPA.
   • LCx: Normal.
   • RCA: Giant fistula from conus branch (large aneurysm) to MPA (suspected two openings).

   Coronary CT angiography (27 Feb 2013):
   • Coronary fistulas from conus branch of RCA and proximal LAD draining into MPA.
   • Probably also bronchial artery to left coronary artery fistula.

4. Intended Intervention:
   Percutaneous embolization of coronary fistula.

5. Potential Difficulties:
   Serpinginous conus branch fistula forming a large aneurysm draining into MPA.
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- Efficacious LDL-C lowering
- Proven CV outcomes evidence from landmark trials
- NO dosage adjustment in patients with renal impairment
1. Live Case Operators:
   Nguyen Lan Hieu (Vietnam)
   Doan Duc Dung (Vietnam)
   Le Van Tu (Vietnam)
   Tran Bao Trang (Vietnam)
   Bui Quang Thang (Vietnam)

2. History:
   • M/15 yrs.
   • Chief complaint: Fatigue, dyspnea for several months, NYHA class 2.

3. Past Medical History:
   • Diagnosis for severe aortic coartation after birth.
   • Balloon angioplasty 2 times before.

4. Physical Findings:
   • No symptoms of heart failure.
   • A systolic murmur in the left infraclavicular area.
   • Arterial pressures: upper body 135/70 mmHg; lower body 100/60 mmHg.

5. Investigations:
   ECG:
   [Image of ECG]

   Echocardiograms:
   • Severe aortic coarctation: Systolic gradient 80/30mmHg.
   • Isthmus diameter: 7mm.
   • Ascending aorta diameter: 25 mm.
   • Descending aorta diameter: 12mm.
   • LVDd:39mm, LVEF 66%.

6. Intended Intervention:
   • Aortic coarctation stenting.
Hanoi Medical University Hospital, Hanoi
PERCUTANEOUS TRANSVENOUS MITRAL COMMISSUROTOMY (PTMC)

Live Case number: #16   12 October 2014, 09:00 – 15:00

1. Live Case Operators:
   Nguyen Lan Hieu (Vietnam)
   Doan Duc Dung (Vietnam)
   Le Van Tu (Vietnam)
   Tran Bao Trang (Vietnam)
   Bui Quang Thang (Vietnam)

2. History:
   • F/47 yrs.
   • Chief complaint: Dyspnea for several months, NYHA Class 3.
   • Past medical history: Unremarkable.

3. Physical Findings:
   • Mild angina pectoris.
   • Loud S1, diastolic murmur 3/6 severity.
   • No signs of right heart failure.

4. Investigations:
   ECG:

   ![ECG Image]

   Echocardiograms
   • Severe mitral stenosis : PHT area: 1.1 cm², 2D area: 1.2 cm², Wilkin’s score 7 points.
   • Pulmonary arterial systolic pressure: 40 mmHg.

5. Intended intervention:
   PTMC.
1. Live Case Operators:
   Nguyen Lan Hieu (Vietnam)
   Doan Duc Dung (Vietnam)
   Le Van Tu (Vietnam)
   Tran Bao Trang (Vietnam)
   Bui Quang Thang (Vietnam)

2. History:
   • F/2 yrs.
   • An accidental diagnosis for congenital heart defect by during hospitalization for pneumonia at 2 month old.
   • Medical history of pregnancy and growth: Normal.

3. Physical Findings:
   • 11kg, normal mental and physical development.
   • Left sternal border systolic murmur 3/6 severity.
   • No signs of heart failure.

4. Investigations:
   Echocardiograms
   • Fistula from non-coronary cusp of aorta to left atrium, diameter: 2mm, diastolic gradient: 50mmHg.
   • LA diameter: 18mm, LVDd: 32mm.
   • Tricuspid regurgitation: Moderate.
   • Pulmonary arterial systolic pressure: 28 mmHg.

5. Intended intervention
   Transcatheter closure of aorto-LA fistula.
Hanoi Medical University Hospital, Hanoi
CLOSURE OF PERIMEMBRANOUS VSD

Live Case number: #18 12 October 2014, 09:00 – 15:30

1. Live Case Operators:
   Nguyen Lan Hieu (Vietnam)
   Doan Duc Dung (Vietnam)
   Le Van Tu (Vietnam)
   Tran Bao Trang (Vietnam)
   Bui Quang Thang (Vietnam)

2. History:
   • F/18 yrs.
   • Chief complaint: Dyspnea for several months.
   • Medical history: Unremarkable.

3. Physical Findings:
   • Left sternal border systolic murmur 3/6 severity.
   • No signs of heart failure.

4. Investigations:
   ECG:

   Echocardiograms
   • Perimembranous VSD: Diameter 5mm, gradient: 120 mmHg.
   • Distance from VSD to aortic rim: 5mm.
   • LVEDd: 46 mm.
   • PA systolic pressure: 30 mmHg.

5. Intended intervention:
   Closure of perimembranous VSD
APCASH
6TH ASIA PACIFIC
CONGENITAL & STRUCTURAL
HEART INTERVENTION SYMPOSIUM

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Program Director
Hidehiko Hara, MD, PhD
Division of Cardiovascular Medicine, Toho University Ohashi Medical Center

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Exhibition Guide

**Abbott Vascular**

Address: Suite 2201-3, 22/F Mass Mutual Tower, 38 Gloucester Road, Wanchai, Hong Kong
Tel: (852) 2827 2338  |  Website: www.abbott.com

Abbott Vascular, a division of Abbott Laboratories, manufactures and distributes cutting edge products for vascular disease treatment. Interventional portfolio for cardiology includes Absorb, the world’s first drug eluting fully bioresorbable vascular scaffold system, and XIENCE family of drug-eluting stents. The company also provides full range of devices for peripheral intervention, which include Supera self-expanding stent. Abbott Vascular expanded its footprint into valve therapy with MitraClip, the world’s first minimally invasive device for mitral valve repair.

**AstraZeneca Hong Kong Limited**

Address: 18/F Shui On Centre, 6-8 Harbour Road, Wanchai, Hong Kong
Tel: (852) 2420 7388  |  Website: www.astrazeneca.com.hk

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Tel: (852) 2960 7100  Website: www.bostonscientific.com

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Lifetech Scientific

Address: Cybio Electronic Building, Langshan 2nd Street, North Area of High-tech Park, Nanshan District, Shenzhen 518057, PR China
Tel: (86-755) 86026250-8813  Website: http://www.lifetechmed.com

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For more information, please visit http://www.novartis.com.
Occlutech International

Address: La Cours gata 4, S-252 31 Helsingborg, Sweden
Tel: +46 42 400 8060 | Website: www.occlutech.com

Founded in 2003, Occlutech International is a European based innovator of structural heart implants. Focusing on refining technologies for the treatment of congenital defects and structural irregularities, Occlutech is present in 50 countries worldwide with over 30,000 implants performed to date. With new Perivalvular leak and Left atrial appendage devices in the process of being launched, Occlutech continues its legacy of identifying clinical needs and developing innovative solutions to meet them.

Philips Electronics Hong Kong Limited

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Address: Suite 1608, 16/F., Exchange Tower, 33 Wang Chiu Road, Kowloon Bay, Kowloon, Hong Kong
Tel: (852) 2996 7688 | Website: www.sjm.com

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Our product portfolio includes implantable cardioverter defibrillators (ICDs), cardiac resynchronization therapy (CRT) devices, pacemakers, electrophysiology catheters, mapping and visualization systems, products for structural heart and vascular diseases, PCI optimization systems, and spinal cord stimulation and deep brain stimulation devices.
<table>
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<tr>
<th>Company Name</th>
<th>Booth No.</th>
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<tbody>
<tr>
<td>Vascular Innovations Co. Ltd.</td>
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<tr>
<td><strong>Address:</strong> 88/38 Moo 1, 345 Road, Pakkret, Nonthaburi – 11120, Thailand</td>
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<tr>
<td><strong>Tel:</strong> (66) 25982361</td>
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<tr>
<td><strong>Website:</strong> <a href="http://www.vascularinnovations.com">http://www.vascularinnovations.com</a></td>
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<td>Vascular Innovations Co. Ltd., is a design, development and manufacturing company focused on the Structural Heart Disease market place. The primary focus is to design products that facilitate the correction of the defects in the heart which includes both congenital and adults. These defects include malformations, degeneration of structures or mechanical defects. VI has successfully launched its initial two product lines Cocoon PDA and Cocoon ASD in several international markets and continues to expand the sales with these products. The company has invested into development of a range of other closure devices for ventricular defects, PFO defects, Vascular occlusion and Trans Apical Closure. VI is in clinical trials with a range of technologies which use the percutaneous approach for the replacement of the diseased and degenerated valves in the heart. The first of the commercial available products called “HYDRA” TAVI prostheses is expected to be launched shortly.</td>
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<td><strong>Address:</strong> Unit 201, Servyou East Building, NO.3738 Nanhuan Road, Binjiang District, Hangzhou City, Zhejiang Province, PR China</td>
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<td><strong>Tel:</strong> (86-571) 87772183</td>
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<td><strong>Tel:</strong> (86)-10-82512822</td>
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<td><strong>Website:</strong> <a href="http://www.zenomed.com">www.zenomed.com</a></td>
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<td>ZenoMed mainly engages in providing high-technology medical equipment to the Chinese market. A sound distribution and service network has been formed with over 15 branch offices throughout China and over 100 employees.</td>
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WHAT IF WE COULD TRANSFORM THE TREATMENT OF THE MOST EXPENSIVE EPIDEMIC DISEASES?

At St. Jude Medical, we are fueled by a passion to drive change through innovation. We are on a mission to invent breakthrough technologies that will transform the treatment of some of the world’s most expensive epidemic diseases. By partnering with physicians, hospitals and insurers, we are helping to save and improve millions of lives worldwide—while reducing health care costs for all.

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