Welcome to the 2014 ISMICS Scientific Meeting

Dear Colleagues;

It is my distinct pleasure to welcome you to the 2014 ISMICS Annual Scientific Meeting. This is an exciting opportunity to experience the newest and most innovative developments in cardiac, vascular, and thoracic surgery. I am looking forward to the next several days of outstanding scientific sessions and visiting with colleagues and friends.

I am pleased to welcome Rory McDonald, PhD, MBA of the Harvard Business School as this year’s Keynote Speaker. Professor McDonald is an expert on Disruptive Innovation and an authority on Competition and Innovation in Technology Enabled Markets. His presentation will take place on Thursday morning at 11:15.

Please read the three issues of the ISMICS Insider for meeting highlights and coverage of the scientific and social events. Some of the sessions that I am particularly excited to experience are the “Simulation-Based Training Program for Young Surgeons,” under the direction of Drs. James Fann, Chirsh Fernando, and Daniel Miller, which will take place today, and the highly anticipated debate on “All Arterial OP-CAB Versus Hybrid Revascularization” between ISMICS Past President Dr. John D. Puskas and Dr. Andrew C. Eisenhauer, will occur on Saturday.

We are excited to launch the Annual Meeting mobile app for both Apple and Android based smart phones. This interactive guide to the meeting includes information on the program schedule, social events, exhibits, Sim City, posters, and more. If you have

Francis D. Ferdinand, MD

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Boston Welcomes the ISMICS Annual Meeting

The ISMICS Annual Meeting is one of the foremost educational events for minimally invasive and forward-thinking thoracic and cardiovascular professionals. Boston, with its rich history and cutting-edge medical environment, provides the perfect setting for an exceptional scientific meeting and outstanding social events.

In addition to the ISMICS Attendee Reception on Friday evening at the Isabella Stewart Gardner Museum, we encourage you to take full advantage of all that Boston has to offer. Obvious choices for the history aficionado are the Freedom Trail, Faneuil Hall Marketplace and the Old State House. Boston is also well known for its world class museums, a thriving theater district, outstanding restaurants, and great local neighborhoods like the North End, Beacon Hill, and Back Bay. Boston is a walking city and you can experience most of the city’s highlights by putting on your comfortable shoes and hitting the pavement. From the Marriott Copley Place, attendees are within steps of great shopping on Newbury Street, gastronomic delights for any taste, and a variety of entertainment options.

Almost as famous as Boston’s history are the city’s beloved sports teams and Boston’s teams have earned a reputation for excellence. Check out the Red Sox at Fenway Park on Thursday evening when they take on the Atlanta Braves.

If you would just like to take a few minutes away from the rigors of the scientific sessions to enjoy the sights and sounds of the city, the Public Garden and Boston Common are just a few blocks down Boylston Street.

(continued on page 3)
Find Opportunity in Change

Change is nothing new to Cardiac Surgeons
And with change comes opportunities...
optunities that matter.

Visit us at booth 404, and at Sim City where you can test your skills through hands-on simulation.

*MICS Mitral Valve Repair and MICS CABG simulation:* see the access and visualization you can achieve through a small thoracotomy and test your sewing skills for anastomosis or annular suturing.

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Welcome from the President (continued from page one)

not yet downloaded it, please see the announcement below and scan the barcode. Stay on top of the latest news from the meeting.

Throughout the meeting we will be seeking your feedback via a text based Audience Response System on some critical questions facing the organization, such as the future publication platform(s) for our journal Innovations, as well as topics for future Consensus Statement Conferences. We value your feedback as we consider the future of these initiatives and strongly encourage you to reply when prompted.

INNOVATIONS, the official journal of ISMICS, has continued to grow along with ISMICS. This year, ISMICS will again be presenting cash awards for the best manuscripts submitted from papers selected for presentation. There is a $2,000 award for the Best Manuscript submitted before the Annual Meeting and a $1,000 award for the Best Manuscript submitted within 60 days after the Annual Meeting. The recipients of the best manuscripts submitted for the 2013 ISMICS Annual Scientific Meeting will be announced during our Attendee Reception at the Isabella Stewart Gardner Museum.

Francis D. Ferdinand, MD
President

The “Infamous” Theft at the Isabella Stewart Gardner Museum

Famous for its beautiful and extensive art collection, the Museum became front page news in 1990 when more than $500 million worth of priceless artworks were stolen when two men disguised as Boston police officers talked their way into the Museum and overpowered security guards. They escaped with what has been reported as the greatest heist ever of stolen art, including Rembrandt’s Christ on the Sea of Galilee; The Concert, one of only 34 definitive works by the Dutch master Johannes Vermeer; a Rembrandt etching; a Manet; and five Degas drawings. The thieves also took a Shang dynasty bronze beaker from China and an eagle-shaped finial from a Napoleonic flag.

The case has remained opened for the past 24 years and the FBI is still offering a $5 million reward for the return of the paintings. An update just last week reported that the agent heading the investigation says credible sources have told the FBI they have recently seen some of the masterpieces.

Under the terms of Isabella Stewart Gardner’s will, the contents of her Italian-style palace on the Fenway must remain in the arrangement she decreed, with no significant alternation. Therefore, the places where the stolen paintings hung remain empty.

Join ISMICS at the Isabella Stewart Gardner Museum on Friday evening for the Attendee Reception and see if you can find the spots where these masterpieces once hung.

Welcome Reception Tonight

Don’t miss the ISMICS Welcome Reception Exhibition Hall (Salons E-F) 17.00 - 19.00

ISMICS Members' Annual Business Meeting

All ISMICS members are requested to attend the Members’ Business Meeting, scheduled for Saturday morning, 08.00-08.30 in the Grand Ballroom Salon G-H.

A Message From Your ISMICS Executive Director

It is with great pleasure that I welcome our ISMICS members and Annual Meeting Attendees to Boston. Having been born and raised in East Boston (think Logan Airport), and now living just a short distance north of here, it is always a joy to host people in our home city. Your ISMICS staff offices are located in Beverly, Massachusetts and we are taking advantage of that proximity to several continents, as well as here in North America..... he has always worn his devotion to ISMICS on his sleeve.

~Aurelie

Download the ISMICS Meeting APP to your Mobile Device

GET THE LATEST NEWS FROM THE MEETING:

• Annual Meeting Schedule
• Day by Day Programming
• Full Abstracts
• Exhibit Hall Listing
• Map of Boston
• Messages from the Meeting

Download Link at http://crwd.cc/ismics14 or Scan the Barcode
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MEDITRONIC, INC. Booth 404 710 Medtronic Parkway NE Minneapolis, MN 55432

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**MAQUET EDITORIAL: Can Routine Left Atrial Appendage Closure During Open Heart Surgery Reduce Peri-Operative Stroke?**

Sacha P. Salzberg, MD and Maximilian Y. Emmert, MD, PhD

Concern about peri-operative stroke remains the main factor for the decreased acceptance of coronary artery bypass grafting (CABG) despite its well documented long-term superiority in patients with three vessel disease and left main stenosis. An important technical advance has been the avoidance of aortic manipulation to reduce stroke; yet, approximately half of CABG-related strokes occur in the post-operative period surgery, and are most often related to new-onset atrial fibrillation (AF).1-4

New-onset AF is a common complication, occurring in close to 20% patients following CABG. Recent studies have documented increased incidence of stroke with new-onset AF after CABG surgery. In a recent study of 16169 consecutive isolated CABG patients with no prior history of AF, postoperative stroke risk was significantly greater for patients who developed new-onset AF vs. those who did not (3.2% vs. 1.3%, p<0.001). Further, new postoperative AF was associated with a 21% relative increase in mortality over a mean follow up of 6 years, even after controlling for 32 covariates.

As with other forms of AF, the primary mechanism of stroke secondary to postoperative AF is believed to originate from within left atrial appendage (LAA). In another recent report (2067 patients, 81% CABG), postoperative AF was associated with a nearly three-fold increase in stroke (OR=2.79). Among patients who developed postoperative AF, those who had undergone concomitant LAA ligation had significantly lower risk of stroke than those who had not (0.0% vs. 6.1%, p=0.003).

Shortcomings of past surgical approaches to LAA exclusion using sutures or staples include risk of injury and incomplete closure. Further, neither sutures nor staples provide complete electrical isolation of the LAA, which has recently been confirmed as a trigger in the induction and maintenance of AF as well as AF recurrence following catheter ablation.

New epicardial clip devices have been shown to provide easy, reliable, safe and durable exclusion during cardiac surgery procedures, without leaks or significant residual LAA cavity. An additional benefit of epicardial device-enabled LAA is electrical isolation. Silencing the LAA may be crucial in certain patients, underscoring the incremental advantage of isolation of the LAA provided by epicardial clip approaches.

Despite earlier conceptions as benign, postoperative AF carries significant risk for late cerebral injury following non-eventful cardiac surgery. LAA closure may be an important adjunct to all cardiac procedures to reduce the risk of postoperative AF-related cerebrovascular accident in selected patients. The current generation of epicardial LAA closure devices may make routine concomitant management of LAA easier, safer and more effective than past approaches.

**References**

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