

27 E 28 GIUGNO \ NICOLAUS HOTEL - BARI



Società Italiana di Cardiologia Interventistica

CONGRESSO GISE PUGLIA 2025



PROGRAMMA

PRELIMINARE

VENERDÌ 27 GIUGNO

08.30-08.50

Registrazione partecipanti

08.50-09.00

Welcome e presentazione lavori congressuali

DEALING WITH CORONARY ARTERIES DISEASE COMPLEXITY IN 2025

Left Main and Bifurcations

09.00-09.05

Clinical scenario introduction: a true left main bifurcation

09.05-09.10

How should I manage it: IVUS-guided PCI

09.10-09.15

How should I manage it: OCT-guided PCI

09.15-09.25

How I treated it: clinical scenario closure

09.25-09.35

DISCUSSION

Discussion

09.35-09.50

LECTURE

Drug coated bifurcations: what we know and how we do it

Calcified Lesions

09.50-09.55

Clinical scenario introduction: one big challenge, several good options

09.55-10.00

How should I manage it: IVL

10.00-10.05

How should I manage it: atherectomy techniques

10.05-10.15

How I treated it: clinical scenario closure

10.15-10.25

DISCUSSION

Discussion

10.25-10.40

LECTURE

Management strategies for heavily calcified coronary stenosis: the "Imaging cornerstone"

10:40-10:55

COFFEE BREAK

VENERDÌ 27 GIUGNO

DEALING WITH CORONARY ARTERIES DISEASE COMPLEXITY IN 2025

Multivessel Disease in ACS

10.55-11.00		Clinical scenario introduction: management of non-culprit lesions in NSTEMI-ACS
11.00-11.05		How should I manage it: anatomical-guided PCI
11.05-11.10		How should I manage it: physiology-guided PCI
11.10-11.20		How I treated it: clinical scenario closure
11.20-11.30	DISCUSSION	Discussion
11.30-11.45	LECTURE	Do we need to be fully complete in multivessel acute myocardial infarction?

Full Physiology Approach

11.45-12.00		Full physiology in daily practice
12.00-12.10		Tailored approach in ANOCA patients: time for right diagnosis and right treatment
12.10-12.20	DISCUSSION	Discussion

Pharmacological Support in High-Risk Patients

12.20-12.35		Beyond lipid lowering with PCSK9i and siRNA in high risk and ACS patients: intensity and speed of action and effects on atherosclerotic plaque
12.35-12.50		Direct cardio-renal protection and atherosclerotic effects with GLP1-Ra agents: newer evidence
12.50-13.05		SGLT2i effectiveness: from myocardial infarction to rEF and pEF heart failure
13.05-13.20		Optimal peri-procedural antiplatelet therapy and "Discontinuation Issues": current perspectives with intravenous agents
13.20-13.30	DISCUSSION	Discussion

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DEALING WITH CORONARY ARTERIES DISEASE COMPLEXITY IN 2025

Lunch Symposium on DCB

13.45-14.00	To DCB or not to DCB: safety and effectiveness in different anatomical scenarios
14.00-14.15	Tips & tricks: lesion preparation, imaging, physiology guidance and “when to give up”
14.15-14.30	Hybrid DES/DCB vs full-DCB approach vs resorbable scaffold: actual real world experience and potential emerging alternatives
14.30-14.40	DISCUSSION Discussion

Complex Scenarios: Tips from CTO world

14.40-14.50	Clinical case: uncrossable lesions: never give up
14.50-15.00	Clinical case: when a problem turns into opportunity
15.00-15.10	Clinical case: “Hostile ostia”
15.10-15.20	DISCUSSION Discussion
15.20-15.35	LECTURE CTO: a niche in your daily life

Hot Topics

15:35-15:50	Interventional therapy for resistant hypertension: state of the art in 2024 and future perspectives
15:50-16:05	Beyond pharmacological treatment of pulmonary embolism: indications, timing and devices
16:05-16:20	Role of CCTA in high risk plaques and patients: from diagnosis to treatment planning
16:20-16:35	DISCUSSION Discussion

16:35-16:55

COFFEE BREAK

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DEALING WITH CORONARY ARTERIES DISEASE COMPLEXITY IN 2025

Mechanical Circulatory Devices

16.55-17.10		Clinical scenario: high risk PCI
17.10-17.25		Clinical scenario: cardiogenic shock
17.25-17.35	DISCUSSION	Discussion
17.35-17.50	LECTURE	Mechanical circulatory devices: where we are and where are we going to?

Clinical Cases from the Young

Concorso con premio intitolato a Sandro Bortone

17.50-18:00		Clinical case 1
18.00-18.10		Clinical case 2
18.10-18.20		Clinical case 3
18.20-18.25	AWARD	Best clinical Case Award

18:25-18:45	GISE Puglia: present and future
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SABATO 28 GIUGNO

DEALING WITH STRUCTURAL HEART DISEASE IN 2025

Aortic Valve Session

09.00-09.05		Clinical scenario introduction: multivessel coronary disease in TAVI patients: what comes first?
09.05-09.10		TAVI first
09.10-09.15		PCI first
09.15-09.25		How I treated it: clinical scenario closure
09.25-09.40	DISCUSSION	Discussion
09.40-09.55	LECTURE	The importance of being “understood”: the structural coordinator
09.55-10.15	LECTURE	Future perspectives in TAVI indications: beyond current anatomical, clinical and age limits, through technical evolution impact

The Closure Session: Insights in PFO and LAA Matters

10.15-10.30	PFO LECTURE	Indication expansion to an elderly population
10.30-10.45	LAA LECTURE	Left atrial appendage closure indications, pre-procedural planning and procedural Tips
10.45-11.05	DISCUSSION	Discussion

11.05-11.25 COFFEE BREAK

SABATO 28 GIUGNO

DEALING WITH STRUCTURAL HEART DISEASE IN 2025

Atrio-Ventricular Valve Session

11.25-11.30		Clinical scenario introduction: mitral regurgitation and severe HF as an early complication of a STEMI: when and how would you treat it?
11.30-11.35		How should I manage it: surgery is the only chance
11.35-11.40		How should I manage it: bailout TEER is a good option
11.40-11.50		How I treated it: clinical scenario closure
11.50-12.05	DISCUSSION	Discussion
12.05-12.20	LECTURE	TEER: are we taking steps on the path towards low-mid risk patients?
12.20-12.35	LECTURE	Tricuspid valve endovascular treatment – State of the art
12.35-13.05	ROUNDTABLE	Tavola rotonda su politiche sanitarie regionali

from 13:05

Closing remarks

PRESIDENTE DEL CONGRESSO

Elia Iorio

Delegato GISE Regione Puglia
Acquaviva delle Fonti

COMITATO SCIENTIFICO

Eloisa Basile
Antonio Centola
Roberto Costantino
Pierluigi Demola
Dionigi Fischetti
Piermichele Grassi
Claudio Larosa
Angela Palmiotto
Martino Pepe
David Rutigliano
Antonio Tito

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L'Evento n. **446395** è stato accreditato ai fini ECM per le seguenti categorie professionali:

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La partecipazione ai lavori è gratuita e dà diritto a:

- **Kit congressuale**
- **Coffee break e lunch box del giorno 27 giugno**
- **Attestato di partecipazione**

Clicca qui per iscriverti.

SEDE DEI LAVORI

Nicolaus Hotel
Via C. Ciasca, 9
70124 Bari
Tel. 080/5682111

SEGRETERIA ORGANIZZATIVA

Intermeeting sud srl

Sede operativa: Via Torre Di Mizzo, 9
70126 Bari
Sede Legale: Via A. Gimma, 73
70121 Bari
Tel. 080/5482005
info@intermeetingsud.com
www.intermeeting.com

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