Welcome to ISMICS 2006!
- Randall K. Wolf, MD
ISMICS President 2006

As this year’s President of ISMICS, it is my distinct pleasure to welcome the meeting back to the Fairmont Hotel in San Francisco. The last time we met in San Francisco was in 2003 when I was privileged to serve with my friend Vassilios Guel beamos as co-chair for that year’s Program Committee. Randolph Chitwood was President, and we all had a great time. We enjoyed an excellent scientific program and an exceptionally social and collegial environment. I am delighted to conclude my term as ISMICS President here. The Fairmont provides a unique opportunity for ISMICS to “take over” the entire property and enhances the familial atmosphere among ISMICS members, non-member physicians, spouses, invited guests, and our industry partners. At the end of WWII, this historic Fairmont Hotel was the site of the International Conference where the (continued on page 14)

The Fairmont provides a unique opportunity for ISMICS to “take over” the entire property and enhances the familial atmosphere.
- Randy Wolf

Welcome to San Francisco

In addition to the obvious tourist attractions in San Francisco like Alcatraz and the Golden Gate Bridge, while in the Bay area, be sure to check out some of the city’s other fascinating sites.

Chinatown — San Francisco’s bustling Chinatown is a tightly packed warren of Chinese restaurants, shops, temples and street vendors. Enter at Dragon’s Gate at Grant Avenue and Bush Street.

Fisherman’s Wharf — Popular with both tourists and sea lions, Fisherman’s Wharf offers seafood markets, street performers and entertainment, souvenir shops, restaurants and sidewalk vendors. Still a working wharf, its vendors sell thousands of tons of fish and shellfish.

(continued on page 2)
The Haight — Center of the 1960s movement, it retains its hippie counterculture credentials and is dotted with Victorian houses, bookstores, piercing salons and funky shops.

Lombard Street — Known as the “crookedest” street in the world, the steep, hills and sharp curves of this one-way road pass by grand Victorian mansions and attract millions of tourists.

Mission District — The heart of San Francisco’s predominantly Latino neighborhood is 24th Street, a colorful collection of authentic restaurants, taquerias, Mexican bakeries, markets, shops and murals. Mission Dolores at 16th and Dolores streets is the oldest structure in San Francisco.

North Beach — Most of this neighborhood’s former beatnik charm is retained while adding fine cuisine to its claim to fame.

The Presidio — A military installation from 1776 until 1994, the Presidio saw duty for Spain, Mexico and the United States. It is now a national park with almost 1,500 acres of hiking and biking trails, beaches and stunning views.

Conservatory of Flowers—Located in Golden Gate Park is a spectacular living museum of rare and beautiful tropical plants from around the world that will engage visitors.

San Francisco Zoo - Northern California’s largest zoological park features approximately 1,000 exotic and endangered animals. Experience the wonders of the Children’s Zoo and visit Gorilla World, Penguin Island, AND Koala Crossing.

Wax Museum at Fisherman’s Wharf - Over 250 wax likenesses of past and present world leaders, entertainers, heroes and scoundrels delights visitors since opening in 1963.

DON’T MISS THESE INVITED TOPIC SESSIONS ON SATURDAY...

8:15 – 8:45AM
Nanotechnology—A Truly Minimally Invasive Technology
Chair: Randall K. Wolf, MD
Carlo Montemagno, PhD
University of Cincinnati, Cincinnati

9:00A – 9:15AM
Hybrid Approaches to Cardiac Procedures
Ralph de LaTorre, MD, Beth Israel
Deaconess Medical Center, Boston

9:15 – 9:30AM
Articulating Endoscopic Instruments and 3D Videoscopy:
Disruptive Technology or Tools Looking for an Application?
William E. Cohn, MD
Texas Heart Institute, Houston
The Postgraduate course, “Surgical Treatment of Atrial Fibrillation”, will be held on Wednesday, June 7th. The course, directed by Ralph J. Damiano, Jr., has been designed to demonstrate the latest developments in the surgical treatment of atrial fibrillation, with emphasis on surgical techniques and emerging technologies.

Participants will discuss the electrophysiological mechanisms underlying atrial fibrillation. Presentations will cover traditional medical and surgical treatments, as well as the role of emerging technologies and new energy sources.

After an introduction and welcome by Dr. Damiano, Dr. Richard Schuessler will review the current literature of AF. “Over the last two years, over 3200 papers have been published on atrial fibrillation. Of these 693 have involved ablation. I will attempt to summarize some of the relevant findings and how they relate to the surgical treatment of AF. Specifically, I will briefly review the most recent thinking on the underlying mechanisms of AF,” begins Dr. Schuessler.

Dr. Fred Morady reviews the rationale for pulmonary vein isolation in patients with AF and provides evidence that complete isolation is not necessary. Dr. Damiano takes a look at the current state of confusion regarding surgery for AF. The final presentation will deal with the different aspects of the surgical procedure to treat atrial fibrillation in a subset of patients with valvular heart disease.

The next session will review the latest advances in ablation technology and will cover: irrigated radiofrequency energy, bipolar radiofrequency energy, cryoablation, microwave ablation, and high frequency ultrasound.

The final section of the postgraduate course will consist of two panel discussions examining the current controversies regarding the operative approach. The course will conclude with a presentation by Dr. Damiano on “Perioperative Management of Patients After Atrial Fibrillation Surgery.”

Dr. Damiano makes several important points during his talk.

- Surgery for AF has excellent long-term results and virtually eliminates the risk of late stroke in this population.
- Less invasive operations have been developed and have greatly simplified the procedures.
- Virtually all patients with chronic AF undergoing coronary or valve procedures should have a concomitant Cox-Maze procedure.
- The Cox-Maze procedure needs to be considered in medially refractory patients with lone AF, particularly in patients who develop a contraindication to anticoagulation or a tachycardia-induced cardiomyopathy.

Registration for the Postgraduate Course will be open on Tuesday from 3:00 pm to 6:00 pm in the Grand Ballroom foyer and on Wednesday at 6:30 a.m.
The founding goals of the International Society for Minimally Invasive Cardiothoracic Surgery centered on providing a forum for the exchange of information in the subspecialty, working towards an international exchange of data, and working with industry to accelerate the development of minimally invasive procedures and equipment.

As ISMICS approaches its 10th anniversary, there are probably three features of the Society that have remained unique throughout the life of the organization. ISMICS remains the only truly international body for the advancement of cardiothoracic surgery spanning the jurisdictions of many similar regional and national societies around the world. ISMICS has strived to retain and promote this direction with a mandated international Board, Presidents selected from around the world, and a meeting schedule with winter workshops that regularly take its meeting everywhere on the globe.

ISMICS remains a society interested in cardiothoracic surgical innovation, at its earliest stages providing both a meeting place and publication opportunity for these ideas to be presented when they may still be relatively undeveloped.

Several needs were identified during ISMICS’ early years i.e., recognition by other groups, methods of incorporating new technologies into mainstream surgery, and an entity to determine the role of emerging and innovative technologies/techniques. We continue to pursue this innovation in the opportunities that ISMICS develops for our industry partners. We constantly strive to create unique and different meeting formats and venues to introduce new technologies. Wet labs were an early such innovation and the consensus statements have also added value to our relationship with industry, while clarifying complicated topics for the profession. Our annual industry dinner reinforces this philosophy of close industry engagement.

Other cardiothoracic surgical societies have begun to recognize and acknowledge our unique contributions as ISMICS has emerged into the mainstream. However, ISMICS faces the same challenges that all societies face with less emphasis on development and refinement of tools for our specialty because of contracting surgical volumes. We share the responsibility with our fellow surgical societies - to continue to foster innovation at all levels to keep the specialty fresh and to expand the current practice models. This role will be increasingly important in the coming years.

The cardiothoracic surgical practice model itself will also be an area of innovation in the future. Groups will need to organize differently to withstand new fiscal and oversight challenges. Engaging our trainees and younger colleagues will encourage them to participate, despite the unsettling changes in the profession. ISMICS needs to provide a forum for them to voice their frustrations as well as fertile ground for their new ideas. Hopefully we can also join our allied Societies in providing the additional training opportunities that will be required to diversify in the face of change.

The next decade in cardiothoracic surgery will experience different trends than we have seen. As our cardiac repair techniques successfully address revascularization and valvular pathology, the final common pathway, several years later, will inevitably be heart failure. We don’t have the donors to replace these hearts or the repair techniques to

Please share your thoughts and ideas about ISMICS and the 2007 Annual Meeting.

ISMICS Administrative Offices
900 Cummings Ctr., Suite 221-U
Beverly, MA 0-1915
(978) 927-8330
(978) 524-8890/FAX
meetings@ismics.com
DON'T MISS DAVID WILLIAMSON
Friday, June 3  5:00 - 6:30 (Awards Reception) & 9:30 - 11:00 (President’s Nightcap)

A born showman and an unusually accomplished sleight of hand artist, David Williamson will dazzle with a unique and delightful brand of entertainment, blending heart-stopping magic with side-splitting hilarity. Recently, David was featured on ABC’s Prime Time Special, Champions of Magic, where he appeared with Princess Stephanie performing around Monaco. He has also co-starred in several prime-time network specials including Magicians’ Favorite Magicians, Houdini: Unlocking His Mysteries, and World’s Greatest Magic III.

As host of the United Kingdom’s acclaimed television series The Magic Comedy Strip, David’s mix of humor and skill make it one of the highest rated shows in the country. He has created illusions for and performed in several commercials and has developed TV shows for Walt Disney Productions and ABC, as well as consulting for illusionists David Copperfield’s and David Blaine’s TV specials. Most recently, David appeared on PAX TV’s World Magic Awards special where he was awarded comedy magician of the year. He also created and starred in his own yet-to-be aired infomercial, David Williamson: The Man Who Knows, hosted by TV’s Harry Anderson.

David is acclaimed as one of the world’s outstanding sleight of hand artists and we welcome you to enjoy his magic during the ISMICS Awards Reception and President’s Nightcap.

As ISMICS has expanded its reputation and influence, we have attracted higher profile surgeons to our meetings - an indication of the growing importance of the group.

- Bob Emery

The International Society for Minimally Invasive Cardiac Surgery (ISMICS) was formally founded in 1998. It was the coalescence of early meetings in the field of minimally invasive cardiac surgery. It was formed to meet the “need for a new society that could provide a forum for the development of this new subspecialty, provide an audience for the scientific evaluation of new minimally invasive techniques and instruments, provide an online database allowing immediate access to the assessment and world wide results of new procedures and provide a marriage of industry and medicine to facilitate the development and introduction of technology which would be necessary to accomplish progressively more minimal invasion.”

Excerpts from the minutes of the ISMICS Formation Meeting

As ISMICS has expanded its reputation and influence, we have attracted higher profile surgeons to our meetings - an indication of the growing importance of the group. In addition, ISMICS meetings serve as a stepping-stone for young surgeon/scientists to expose their ideas and develop them in front of a friendly, but critical audience. Papers are presented that are cutting-edge, but which may not have been accepted at other major meetings due to the early phase of development.

The Society’s influence can been seen across many aspects of cardiothoracic surgery. ISMICS has influenced major surgical societies to change the format of their meetings to address the needs and wishes of the audience. For example, the Society of Thoracic Surgeons (STS) recently added TechCon in place of the standard postgraduate course. Interestingly, the program directors responsible for the innovation for the first 5 years were ISMICS Past Presidents: myself, Mike

(continued on page 13)
KEYNOTE ADDRESS:
RICHARD SATAVA, MD, FACS

FRIDAY, 2:00 PM

“The Chronicles of the Origins and Future of Surgical Robotics: Surgeons Have Nothing to Fear?”

The talk will demonstrate leading edge and revolutionary technologies that are changing the practice of surgery and shaking the very foundations of medicine. These changes may have unintended consequences which are causing profound moral and ethical questions

-Richard Satava, MD

Richard Satava, MD FACS, is Professor of Surgery at the University of Washington Medical Center, Program Manager of Advanced Biomedical Technology at the Defense Advanced Research Projects Agency (DARPA), and Special Assistant in Advanced Surgical Technologies at the US Army Medical Research and Materiel Command in Ft. Detrick, MD.

Dr. Satava has served on the White House Office of Science and Technology Policy (OSTP) Committee on Health, Food and Safety. He is currently a member of the Emerging Technologies and Resident Education, and Informatics Committees of the American College of Surgeons (ACS), is past president of the Society of American Gastrointestinal Endoscopic Surgeons (SAGES), past president of the Society of Laparoendoscopic Surgeons (SLS), and is on the Board of Governors of the National Board of Medical Examiners (NBME). He is on the editorial board of numerous surgical and scientific journals, and active in many surgical and engineering societies.

During his 23 years of military surgery he has been an active flight surgeon, an Army astronaut candidate, MASH surgeon for the Grenada Invasion, and a hospital commander during Desert Storm, all the while continuing clinical surgical practice. While striving to practice the complete discipline of surgery, he is aggressively pursuing the leading edge of advanced technologies to formulate the architecture for the next generation of medicine.

LATE BREAKING NEWS PRESENTATIONS WILL BE OFFERED BY THE FOLLOWING COMPANIES ON SATURDAY:

CryoCath
Boston Scientific/Guidant
Varian Medical Systems

Presidential Address
Friday, 11:00 - 11:30
“The Future of Surgery and ISMICS”
Randall K. Wolf, MD
University of Cincinnati, Cincinnati
ISMICS 9th Annual Scientific Meeting
June 7-10, 2006
San Francisco, California

Learning Objectives
The ISMICS 2006 Annual Scientific Meeting is designed to offer 3 and one-half days of comprehensive educational experiences in the fields of minimally invasive cardiac and thoracic surgery and related sciences with an emphasis on innovative techniques and technologies. The Society brings together the leading cardiothoracic surgeons and scientists in the world to freely and openly discuss their latest clinical and research findings.

Accreditation Statement
This activity has been planned and implemented in accordance with the Essential Areas and Policies of the Accreditation Council for Continuing Medical Education through the joint sponsorship of the American College of Surgeons and the International Society for Minimally Invasive Cardiothoracic Surgery. The American College of Surgeons is accredited by the ACCME to provide continuing medical education for physicians.

AMA PRA Category 1 Credits™
The American College of Surgeons designates this educational activity for a maximum of 24.75 AMA PRA Category 1 Credits™. Physicians should only claim credit commensurate with the extent of their participation in the activity.

DON'T MISS....

DEBATE
Saturday, 10:30 - 11:30AM


Chair: Ralph J. Damiano, Jr., MD
Washington University School of Medicine, St. Louis
Randall K. Wolf, MD
University of Cincinnati, Cincinnati
Robert R. Lazzara, MD
Cardiac Surgical Associates, Tampa
Joao Queiroz e Melo, MD, PhD
Hospital Santa Cruz, Carnaxide, Portugal
Takashi Nitta, MD
Nippon Medical School, Tokyo, Japan

CURRENT CONTROVERSIES
Saturday, 9:30 - 10:15AM

LVADs for Destination Therapy - Don’t Throw Out Your Needledrivers, Here Comes the Next Big Thing!

Chair: James D. Fonger, MD
Lenox Hill Hospital, New York
Paul A. Spence, MD
University Cardiothoracic Surgical Associates, Louisville
Steven W. Boyce, MD
Washington Regional Cardiac Surgery, Washington, DC
**EXHIBIT HALL - TERRACE ROOM**

**WET LABS SCHEDULE**

Individual companies may offer WetLabs during all Exhibition Hall hours. Additionally, the scientific program includes Dedicated WetLab Time during which there is no competing programming:

<table>
<thead>
<tr>
<th>Day</th>
<th>Date</th>
<th>Time</th>
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<tbody>
<tr>
<td>Wednesday</td>
<td>June 7</td>
<td>5:00 – 6:00PM</td>
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<tr>
<td>Thursday</td>
<td>June 8</td>
<td>9:00 – 9:45AM</td>
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<td>4:15 – 5:00PM</td>
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<tr>
<td>Friday</td>
<td>June 9</td>
<td>9:15 – 10:30AM</td>
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<td></td>
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<td>2:30 – 3:00PM</td>
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**SIGN-UPS**

To provide the best possible learning experience, WetLab providers are scheduling sign-up slots to enable interested attendees an opportunity to see the device demonstrated and to “test drive” it. Attendees may sign-up onsite, once you have registered and obtained your registration materials. Sign-up sheets for each WetLab will be located in the Registration Desk area on Wednesday until the WetLabs open at 5PM. From that point on the sign-up sheets will be located at each individual WetLab station.

**EXHIBITORS IN TERRACE ROOM**

- ATS Medical, Inc. T110 / T111
- Cardiogenesis T101
- CardioVations/Ethicon T108 / T109
- Datascope Corp T102
- Boston Scientific T106 / T107
- Intuitive Surgical, Inc. T114
- Karl Storz Endoscopy America T112 / T113
- Medtronic, Inc. T104 / T105

A complete listing of all scheduled Wet Labs appears on Page 10.
EXHIBIT HALL - VENETIAN ROOM

EXHIBITORS IN VENETIAN ROOM

AtriCure, Inc. V213 / V214
CTSNet V211
Edwards Lifesciences V205 / V206
ESTECH Cardiac Surgery Specialists V217 / V218
Fehling Surgical Instruments, Inc. V204
I-Flow Corporation V216
ISMICS V210
Koven Technology, Inc. V207
MedicalCV, Inc. V208
Novadaq Technologies, Inc. V215
Quest Medical V203
Scanlan International, Inc. V201
Shelhigh, Inc. V202
St. Jude Medical, Inc. V209
Wexler Surgical Supplies V212

EXHIBIT HALL HOURS

Wednesday, June 7th
5:00 pm – 7:00 pm

Thursday, June 8th
7:30 am – 11:00 am
1:00 pm – 5:00 pm

Friday, June 9th
7:30 am – 10:30 am
1:00 pm – 3:00 pm

The Welcome Reception will be held on Wednesday from 6:00 - 7:00 pm. Continental breakfasts will be served on Thursday and Friday mornings and a continuous beverage service will be available during all Exhibition Hours.
The WetLabs scheduled for this year’s annual meeting are better than ever, with physician proctors directing each station, providing context and instructions. Providers may offer multiple stations. In some cases the same device will be featured at all stations during a specific timeslot. Other providers may choose to feature a different device at each concurrently running station. Check the timeslot titles on the sign-up sheets for the device you want to test-drive.

ATRICURE, INC. - Venetian # 8
Transpolar Pen and Transpolar Clamps
Stations: 2 concurrent featuring the same device. Check the timeslots titles to see which device is being featured.
Test Drive Slots: maximum of 3 attendees per 20-minute slot, per station. Proctor: Sydney L. Gaynor, MD, St. Louis, MO

BOSTON SCIENTIFIC - Terrace # 3
FLEXTech Simulator
Stations: 1
Test Drive Slots: maximum of 3 attendees per 15-minute slot, per station.

CARDICA, INC.- Venetian # 6
C-Port® Distal and PAS-Port® Proximal Anastomosis Systems
Stations: 3 concurrent stations for C-Port Distal Anastomotic Device and 1 station for PAS-Port Proxi- mal Device
Test Drive Slots: maximum of 5 attendees per 45-minute slot, per station.

CARDIOVATIONS, INC. - Terrace # 4
Minimally Invasive Valve Surgery, PORT ACCESS and Other Devices
Stations: 2
Test Drive Slots: maximum of 2 attendees per 10-minute slot, per station.

CRYOCATH TECHNOLOGIES - Terrace # 2
SurgiFrost® and FrostByte® CryoAblation Systems
Stations: 1

EDWARDS LIFESCIENCES - Venetian # 5
Optiwave 980™ Laser Ablation System
Stations: 1
Test Drive Slots: maximum of 6 people per 20-minute slot.

MEDTRONIC, INC. - Terrace # 1
Transmurality You Can Trust: Irrigated Radiofrequency
Stations: 1
Test Drive Slots: maximum of 3 attendees per 20-minute test-drive slot.

ST. JUDE MEDICAL - Venetian # 7
Biocor Stented Tissue Valve and Epicor Cardiac Ablation System
Stations: 2
Test Drive Slots: maximum of 5 attendees per station, 20-minute test-drive slots.
FOOD AND SCIENCE: INDUSTRY SPONSORED SYMPOSIA

THURSDAY - LUNCHEON S 11:30 AM - 1:00 PM

“New Paradigms Guiding the Surgical Treatment of Atrial Fibrillation”

Supported by CryoCath Technologies, Inc.

Crystal Room

Chairman: W. Randolph Chitwood Jr., M.D.
- Opening Comments  W. Randolph Chitwood Jr., M.D.
- Picking the Right Lesion Set for the Right Patient Ralph J. Damiano, Jr., MD
- Cryosurgical Platforms for Robotic Manipulation in AF Wiley Nifong, MD
- Update on the M. Sinai Experience David Adams, MD

“Get the EDGE: Expand Your Skills, Control Your Future”

Supported by Medtronic, Inc.

Hunt Room

- Robert Emery, MD
  Dr. Emery will share his views on the importance of expanding one’s skills in our rapidly changing environment.
- Grayson Wheatley, III, MD
  Dr. Wheatley will discuss his own experience in acquiring emerging skills and adopting new technologies.

“Laser Ablation with the Edwards Optiwave 980 nm System—Patient Selection, Procedure Overview and Clinical Results”

Supported by Edwards Lifesciences, Inc.

French Room

- Li Poa, MD, Enlow Medical Center

FRIDAY - BREAKFAST 7:00 AM - 8:00AM

"MitroFast®: Rapid, Simplified Mitral Valve Repair"

Supported by Shelhigh, Inc.

Main Lobby Level
- Chair: Marc Gerdisch, MD – Cardiac Surgery Associates
- The Impact of No-React® Anticalcification Technology on the Future of Heart Valve Surgery Marc Gerdisch, MD
- A New Concept in Mitral Valve Repair Shlomo Gabbay, MD
- Early Clinical Results with the MitroFast® Mitral Valve Repair System Daniijel Unic, MD, PhD
- Closing the Repair Gap, Potential Applications for Mitrofast Lishan Aklog, MD

FRIDAY - LUNCHEONS 11:30 AM - 1:00 PM

“Controversies in Surgical Treatment of Atrial Fibrillation”

Supported by Boston Scientific Corporation

Pavilion Room

Moderator: John D. Puskas, MD
- Husam H. Balkhy, MD and Niloo M. Edwards, MD
- Discuss efficacy of surgical ablation therapy in the management of atrial fibrillation.
- Compare the efficacy of surgical ablation therapy versus catheter ablation therapy in the treatment of atrial fibrillation.
- Discuss treatment options for the “failed catheter ablation” population of patients with atrial fibrillation.
- Describe the clinical benefit of surgical ablation of the left atrial appendage in reducing risk of stroke.

Malignant Aspects of Severe Pulmonic Regurgitation: New Approaches in Minimally Invasive Surgical Treatment

Supported by Shelhigh, Inc.

French Room

- Chair: Hitendu Dave, MD – Royal Children’s Hospital
- The need for and optimal timing of pulmonary valve replacement in patients with formerly repaired Tetralogy of Fallot Hitendu Dave, MD
- Outcomes to date with the current generation of pulmonic valve conduits Stefano Marianeschi, MD
- Experience to date with the Minimally Invasive Shelhigh Injectable Pulmonic Valve Conduit: Per ventricular versus Percutaneous Approaches Shlomo Gabbay, MD
- Off-pump Extra-anatomic Aortic Valve Placement: A Novel Concept and Technique for Severe Calcific Aortic Stenosis and Calcified Aorta Shlomo Gabbay, MD

Check your padfolio for a flyer describing these sessions.
eradicate the problem. Medications and regenerative cell therapy will play an increasing role and it will be reinforced by better permanent assist devices placed with smaller procedures. However, probably the biggest change will be that much more of the management of patients with these conditions will be done in the home with remote monitoring. The healthcare system will not be able to provide high tech hotel services for all these chronic patients who often need fine-tuning, rather than another hospital admission. When patients do come into the hospital, the environment will have to be safer, more efficient, and better integrated than it has been in the past. Our return on healthcare investment will be increasingly compared to other countries.

The 2007 10th Anniversary ISMICS Annual Meeting in Rome will endeavor to provide meaningful discussion on all these issues. The venue is spectacular and our hosts will be providing a true Italian flavor. The theme will be “Innovation” across all aspects of cardiothoracic surgical care and our hope is to have a meeting format to reflect that. Rome 2007 will be both a professional meeting and an opportunity for the family to see and experience Italy at the most beautiful time of the year. Plan now! Tell the family and we will see you next year in Rome. Ciao.

ISMICS CONSENSUS STATEMENT: TRANSMYOCARDIAL REvascularization

The 2006 ISMICS Expert Consensus Conference on Transmyocardial Revascularization (TMR) was held May 27-29th at the Duke’s Hotel in London. This year’s panel was chaired by Dr. Anno Diegeler from Bad Neustadt, Germany. Chief Researcher was Dr. Davy Cheng of the London Health Sciences Centre in Canada, assisted by Janet Martin, PhD, also of the London Health Sciences Centre.

An international panel of experts in the field met for two days to review the current evidence and research available in the field of TMR, and to answer a series of questions regarding TMR, its efficacy and use in treatment. Panel members included Dr. Keith Allen of Indianapolis, Indiana, Dr. Tohru Asai of the Shiga University of Medical Science in Japan, Dr. Georg Lutter of the University of Kiel in Germany, Dr. Michele Sartori of Houston, Texas, and Dr. Richard Weisel of Toronto General Hospital in Canada. Dr. Keith Horvath of Bethesda, Maryland and Dr. Lars Aaberg of Oslo, Norway also participated in a review of the literature and in formulation of the protocol used by the Expert Panel.

The formal report of the Expert Consensus Panel will be presented by Drs. Diegeler and Cheng on Friday morning, June 9th, at 10:30 a.m.

This was ISMICS’ third annual Expert Consensus Conference. The 2005 conference held in San Francisco, California was on Endoscopic Vascular Harvesting, and the 2004 conference held in Paris, France was on Off-Pump Surgery. Both previous conferences generated full statements and accompanying meta-analyses which were published in ISMICS’ official journal, Innovations: Technology and Techniques in Cardiothoracic and Vascular Surgery.

ISMICS Expert Consensus Conferences are supported in part by educational grants from industry.
**A LOOK BACK**  
(continued from page 5)

Mack, Ranny Chitwood and Randy Wolf. Ranny Chitwood also serves as the current President-Elect of the STS and two STS councilors are Past Presidents of ISMICS.

Our relationships with industry continue to flourish and grow. From the beginning, it was recognized that the Society cannot exist without industry, as our work is dependent on technology and innovation. Barriers, particularly conflict of interest, still exist and need to be addressed.

ISMICS has developed into a vital and important component in cardiothoracic surgery. We have established our reputation within the specialty and with our industry partners. We need to continue to encourage young surgeons to participate - by giving them a forum for presentation of their research, a journal for the publication of their papers, and active positions within our leadership. We cannot become an “old boy’s club”. Senior members must encourage and mentor our younger colleagues to contribute their ideas and participate in ISMICS.

Over the subsequent decade, as enabling technology improves, the basic training of surgeons in computer-based video-assisted robotically enabled technology will change and enhance our ability to perform more minimally invasive surgery in a safe and effective fashion. The environs of the operating room will change as voice activation and surgeon control of their own workplace is integrated into the process. I look forward to a rapid growth phase in the society as the organizational structure is established, formal professional management begins, and enthusiastic young surgeons take the helm of the society and begin to integrate this surgical process with other sub-specialties such as anesthesiology and cardiology to further the established goals of the society.


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### CASE REPORTS:  
**THURSDAY, 6:00 PM - 7:30 PM**

**SESSION DIRECTOR: HANI SHENNIB, MD**

**MONTREAL GENERAL HOSPITAL**

<table>
<thead>
<tr>
<th>Successful Complete Excision of Bilateral Coronary-Pulmonary Arterial Fistulas using SPY Intra-Operative Imaging System</th>
<th>Endovascular Treatment Of Aorto-Bronchial Fistula Due To Pseudoaneurysm Of The Distal Aortic Arch</th>
</tr>
</thead>
</table>
| Masao Takahashi  
Cardiovascular Surgery, Hiratsuka  
Kyonai Hospital, Hiratsuka, Japan | Kazuyuki Daitoku, Ikuo Fukuda, Satoshi Taniguchi, Masahito Minakawa, Yasuyuki Suzuki, Kozo Fukui  
Department of Thoracic and Cardiovascular Surgery, Hirosaki University, Hirosaki, Japan |

<table>
<thead>
<tr>
<th>Hybrid Procedure For Ventricular Septal Defect Closure And Pulmonary Artery Banding Eliminating The Need For Cardiopulmonary Bypass In A Pediatric Patient</th>
<th>Erosion And Bleeding Complication Of Left Circumflex Artery After Robotic Enhanced Thoracoscopic Epicardial Lead Implantation For CRT</th>
</tr>
</thead>
</table>
| Jeff L. Myers, Christian L. Gilbert, Benjamin Rush Waller, III, Dane Douglas, Joel Lutterman  
Pediatrics, Le Bonheur Children’s Medical Center, Memphis, TN | Bernard A. Stockman, Ivo G. Deblier, Jan F. Nijs, Bram J. Amsel, Inez E. Rodrigus  
Cardiac Surgery, University Hospital Antwerp, Edegem, Belgium |

<table>
<thead>
<tr>
<th>Non-sternotomy Approach for Left Ventricular Assist Device Explantation or Replacement</th>
<th>Videoscopic Thoracic-Duct Division For Aortic Surgery-Related Chylous Leakage</th>
</tr>
</thead>
</table>
| Kenneth K. Liao, Leslie Macho  
Leesie W. Miller, Soon J. Park  
1Cardiac Surgery,  
2Cardiology, University of Minnesota, Minneapolis, MN, USA,  
3Cardiac Surgery, California Pacific Medical Center, San Francisco, CA, USA | Toshiya Ohtsuka, Mikio Ninomiya, Takahiro Nonaka  
Cardiovascular Surgery, Tokyo Metropolitan Fuchu General Hospital, Tokyo, Japan |

**DON'T MISS THESE EXCITING, STATE-OF-THE-ART PRESENTATIONS.**

**LIGHT REFRESHMENTS WILL BE AVAILABLE.**
This year’s Program Committee, chaired by the imaginative William Cohn, has worked diligently to develop an outstanding scientific program covering all aspects of innovative techniques and technologies affecting minimally invasive surgery.

United Nations Charter was signed. The original Charter led to the birth of the United Nations. How appropriate for our international surgical meeting to occur in the same venue!

This year’s Program Committee, chaired by the imaginative William Cohn, has worked diligently to develop an outstanding scientific program covering all aspects of innovative techniques and technologies affecting minimally invasive surgery. The program features presentations on nanotechnology, robotics, video-assisted procedures, minimally invasive AFIB surgery, and more. We are thankful to our industry sponsors for providing exhibits, late-breaking news, sponsored symposia, and hands-on WetLab sessions. I urge you to take advantage of these opportunities to “test-drive” the latest technologies.

I am pleased that my colleague and friend, Richard Satava MD, accepted my invitation to join us at this year’s meeting. He will present an enlightening talk on Friday afternoon, entitled “The Chronicles of the Origins and Future of Surgical Robotics: Surgeons have Nothing to Fear?” Dr. Satava has delved into diverse areas of advanced surgical technology, including surgery in the space environment, video and 3-D imaging, telepresence surgery, and virtual reality surgical simulation.

On a lighter note, one of the highlights of the previous meeting here in San Francisco was not only the “magic” of technology, but the real magic presented and performed by magicians. This time around, Billy Cohn and I are delighted to invite you to experience the magic of David Williamson, a talented and world-renowned comedic magician. David will join us at the awards reception on Friday at 5:00 p.m. and later on that evening during the “President’s Nightcap.” Don’t miss this incredibly entertaining performer.

I have been truly honored to serve as the 9th ISMICS President during such an exciting time in this Society’s history. We have seen significant evolution of the Society over the past year. We have recently reviewed and updated the ISMICS bylaws and created a Finance Committee to oversee and maintain the Society’s fiscal health. These changes reflect a more mature society. The Presidential Address on Friday morning will address this societal evolution as well as the future of technology’s impact on our specialty. Thank you for your participation in this year’s annual meeting-ISMICS is special because of our common interests. I believe ISMICS members appreciate a quote from our great North American philosopher, Wayne Gretsky. When asked why he was so successful in hockey, Wayne said, “I don’t skate to where the puck is, I skate to where the puck is going.” To see where we are going—that is the reason we cardiac surgeons are gathered here in San Francisco.

Enjoy the meeting.
For additional information on the Winter Workshop, please contact the ISMICS Administrative Office, 900 Cummings Center, Suite 221-U, Beverly, MA 01915 (978) 927-8330 / FAX: (978) 524-8890. Or visit the ISMICS Website: www.ismics.org
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