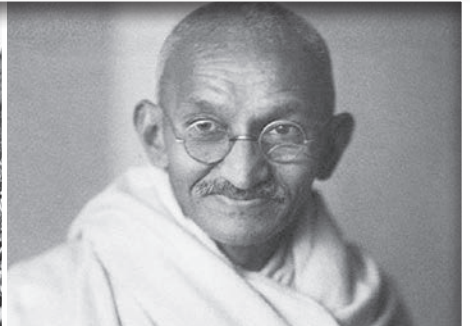
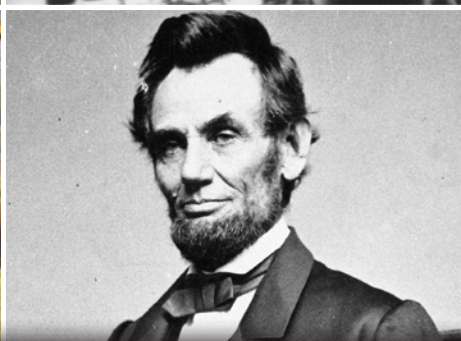


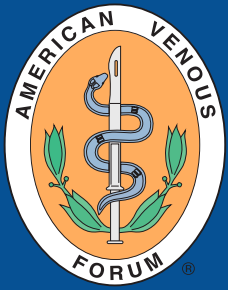


VEIN SPECIALIST



LEADERSHIP





VENOUS2023

AMERICAN VENOUS FORUM



FEBRUARY 22-25

LA CANTERA RESORT
SAN ANTONIO, TEXAS



CONTENTS



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**Disclaimer: The information featured in this newsletter selected by AVF, which offers educational materials, is not intended to be representative of patients with venous disease generally and should not be considered medical advice. Patients should consult their doctor to determine the best treatment decision for their individual disease.*

Message from the Editor Steve Elias, MD

Meet Your 2022 AVF Board of Directors Allie Woodward

AVF Volunteer Leadership in Action Amy Murrin

Lessons Learned by AVF President and Advice to Members
Elna Masuda, MD, Mike Dalsing, MD, DFAVF, Tom Wakefield, MD

AVF Research Grants Previous Winners Andrea Obi, MD
2023 AVF-JOBST Clinical Research Grant
2023 AVF-BSCI Translational Research Grant

Meet the AVF Administrative Team Allie Woodward, John Forbes, MBA

The Team Behind the Team Donald Rolfe

The AVF's Commitment to DEI
Ruth Bush, MD, Misaki Kiguchi, MD, Anil Hingorani, MD,
Elna Masuda, MD, Kathleen Ozsvath, MD

Report from the AVF's Health Policy Committee Chair Sheila Coogan, MD

Answering the Questions about Venous Stents: The C-TRACT Trial
Suresh Vedantham, MD

Winner of the Best Abstract at VENOUS2022 Elizabeth Andraska, MD

International Venous and Lymphatic Pathways: From the Pandemic to Better Patient Care Sergio Ganesini, MD, PhD, FACS

A Message from AVF Board of Directors on Ukraine AVF Board of Directors

Welcome New Members



WANT TO RECEIVE MONTHLY UPDATES? Contact us 847.752.5355 or info@venousforum.org



VEIN SPECIALIST WELCOMES YOUR THOUGHTS AND COMMENTS
Please send all comments to info@venousforum.org



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Each issue of **VEIN SPECIALIST** has a reach of more than **7,500** via email and social media. For information about advertising in **VEIN SPECIALIST** please contact Jeff Mendola at Jeff@VenousForum.org.



AVF is proud to launch *Venous Policy Navigator*, its exclusive new insurance criteria database that supports practices providing superficial venous procedures.

Put an End to Costly Denial of Claims and Reimbursement

Venous Policy Navigator contains up-to-date pre-authorization terminology and documentation requirements of more than 330 payers across the United States in a user-friendly, web-based format for seamless preparation of coverage requests and improved delivery of patient care.

KEY BENEFITS:

- Improves efficiency with up-to-date access to venous procedure coverage policies
- Reduces post-procedure denials by insurance companies
- Includes comprehensive approval criteria for varicose vein treatment modalities
- Links directly to current policies and is easily sortable
- Provides precise language required, eliminating interpretation
- Updated monthly with the most current venous treatment policies and coverage information



Tony P. Gasparis, MD

"*Venous Policy Navigator* not only allows streamline access to any insurance's varicose vein policy, but also provides details of each policy's criteria in one location. This improves the efficiency of my pre-authorization staff and since it is updated monthly, it can prevent denials when changes in policy occur. My staff love it!"



Kathleen Ozsvath, MD

"Navigating the insurance gaps and requirements in the treatment of venous disease is difficult, exhausting, and just hard to keep up with. The *Venous Policy Navigator* helps venous specialists manage these issues."

Kathleen Ozsvath, MD

Put *Venous Policy Navigator* to Work for You

If your practice provides venous procedures, interacts with multiple insurance providers, or needs improved efficiency in working with billers or pre-authorizers, *Venous Policy Navigator* is for you.

Learn more about why *Venous Policy Navigator* is an essential tool for your practice or program.

Visit PolicyNav.org or Email PolicyNav@VenousForum.org

Stoop or Stoop?

If you live in the middle of Iowa, you may not know what a stoop is. No doubt you know what the verb to stoop means but the noun, *stoop*, is an East Coast-centric term. The historic etymology of *stoop* comes from the Dutch word *stoep*.

It is no secret that Peter Minuit, a Dutchman, bought Manhattan Island in the name of the Dutch West Indies Company for 60 guilders (24 USD) in May 1626. A bargain no doubt. Who they purchased it from is not fully vetted. The names Canarsees, Lenapes, and others have come up. Does it really matter in 2022? But stoops have been around since then.

The Dutch constructed their homes above street level to avert any flooding from dripping into their homes in their native Netherlands—a very low-lying country. The style persisted unnecessarily in New Amsterdam. Stoops have led to a lot of innovative things: Stoop Ball, for instance. City dwellers didn't have access to a lot of parks for baseball so Stoop Ball developed. It is a neighborhood game that could be played with 2 or more players. A key component was the *Spaldeen*, a pink hollow rubber ball made by Spaulding. The ball was thrown against the stoop and runs were scored depending on the distance traveled and its not being caught. Popularity reached its height after WWII. Apparently, there is a Stoop Ball league in Wisconsin, of all places. And in this Leadership issue of *Vein Specialist* we stoop down and pick up discussion with some of our leaders: future, present, and past.

We defined "leadership" not only by what someone's title was or held in AVF, but other criteria as well. We do have advice from a few of our past presidents. What would they tell current AVF members? Many of our leaders got their start by being awarded the Jobst Research Grant. They highlight what getting this award allowed them to do in the vein world and AVF. And it's not about the money.



Steve Elias, MD

Two areas where we have leaders but also where AVF is leading are DEI and healthcare policy. These were and are very timely areas of AVF focus.

The last important piece of this leadership issue is our administrative leadership group spearheaded by John Forbes and the Veritas group. In the past, AVF has suffered and struggled because we had inconsistent administrative support. We could not be where we are today without the institutional memory we are building with our administrative partners. Take a look at who makes AVF function on a daily basis.

Stoops don't only function as the cornerstone of Stoop Ball. Other things one can do with a stoop is merely sit on them and observe the world at your doorstep. New York City is bringing back its "Open Streets" program. NYC is paying people to create portable stoops, usually made of metal with storage beneath the steps of the stoop. A fantasy that can literally be manufactured. Instant neighborhood. The idea is, NYC closes some streets to traffic and everyone on the street comes out of their abode and sits on their newly purchased, donated, or subsidized stoop and become...well...neighbors. Such a Norman Rockwell diorama. The American Dream or Myth? At *Vein Specialist* we seek to dispel myths and not create false narratives by paying someone like David Rockwell (no relation to Norman), the architect, \$55,000 dollars per stoop.

This issue gives you the info about some of our leaders and AVF leadership. Our future is bright and strong. We don't stoop. We stand up. Enjoy the issue.

"We could not be where we are today without the institutional memory we are building with our administrative partners."



Meet Your 2022 AVF Board of Directors

Allie Woodward



Bill Marston, MD
AVF President



The Board of Directors
is here to serve our
members proudly.



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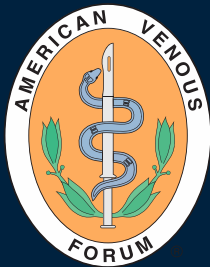


Jorge Ulloa, MD
Director

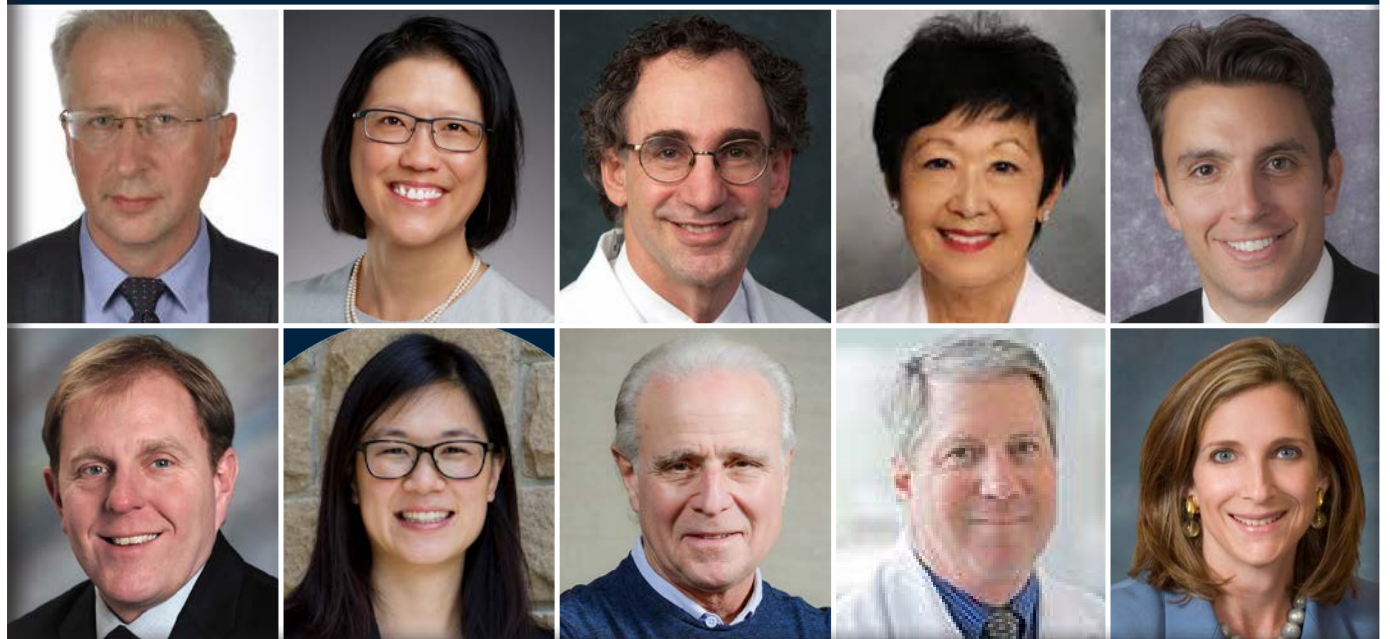


American Venous Forum
Promoting venous and lymphatic health

AVF VOLUNTEER LEADERSHIP IN ACTION



21 Committees
170 AVF Members Working on Committees
145 Meetings Planned this Year



American Venous Forum
Promoting venous and lymphatic health

Lessons Learned by AVF Presidents and Advice to AVF Members

Elna Masuda, MD
AVF President 2018-2019

Many hidden rewards exist in the field of venous and lymphatic disease. One of them, in my opinion, is the American Venous Forum (AVF).

The AVF has some of the top leaders in the field of venous and lymphatic disease. Getting involved in the society at any point in your career can be very rewarding as it allows you access to experts in the field and others who share common questions and challenges. The surprise for me were the opportunities offered by the society to make a difference for your own patients and enjoy the journey along the way. For example, the AVF Exchange is an online secure “chat” with other members. I have learned a lot about nuances in practice through interacting with my colleagues using this society resource, such as how to manage a patient with severe skin changes in the legs but very little venous disease and how to manage allergic reactions to cyanoacrylate, to name a few.

AVF Exchange also provides access to experts in the field who can provide advice for rare and challenging cases. One example is my partner who recently completed a fellowship in Vascular Surgery who encountered an interesting case of nutcracker syndrome. She had never performed a renal vein transposition during fellowship and wanted assistance in planning and executing the procedure. Through communication with several AVF members, together we performed the operation and the patient did very well.

The women in the society are some of the best in the field and serve at multiple levels including on the Board and as committee chairs for those interested in getting involved. The culture of AVF reflects widespread acceptance of all members. More than 30% of the members in leadership are women today, which contrasts with only a few several years ago. The AVF is developing a Diversity, Equity, and Inclusion (DEI) committee to provide more and clearer suggestions to steer the organization toward a more diverse group.

Each of us has a responsibility to be the best person we can, regardless of age, ethnicity, gender, or background. I encourage you to get involved in the society and make a difference in delivering better care for your patients and others. You will likely be delightfully surprised to find hidden rewards along the way.



Elna Masuda, MD

“More than 30% of the members in leadership are women today, which contrasts with only a few several years ago.”



AVF Past President Elna Masuda speaking at the Past Presidents Dinner at VENOUS2022 in Orlando, FL



American Venous Forum
Promoting venous and lymphatic health

Lessons Learned by AVF Presidents and Advice to AVF Members (continued)

Michael C. Dalsing, MD, DFAVF
AVF President 2006-2007

I have had the privilege of serving the American Venous Forum as President from 2006 to 2007, now 15 years ago – how time flies! It was an active time for the Forum and I enjoyed the experience immensely. But what made the experience so special were the friends and colleagues I have made during my AVF volunteer service interactions. Those individuals made committee work a joy and my presidency easy. The list is too numerous to allow me to mention all, so I ask each to accept my personal appreciation yet again; you know who you are.

What advice would I give new AVF members to help the AVF move forward? First, present your venous research at the annual meeting. You will be rewarded with valuable and non-judgmental feedback. It will make the AVF real in your life and is an event you will want to be involved with yearly. It was so for me. Second, get to know your fellow members by volunteering for committee work. Spend some time to get to know everyone you work with on a more personal level – their interests, family, and personal goals. The “small things” in life are often the most important, so enjoy getting to know your colleagues. You will be surprised by how similar you all are.

For those of us who our established members, what is our role? In your professional life, you are developing leadership skills that are invaluable to the AVF. Volunteer and lead the AVF to new heights. Your legacy in the society will be what you give that helps the AVF to help your patients and colleagues. You are also the visible leaders in your community. Support and encourage AVF advocacy efforts: you have the power to take control of your professional life but only if you are part of the process and not a bystander. You also have the “superpower” to help others get involved. Use your influence.

I will always have a fond place in my heart for the American Venous Forum. My hope is that each of you feel the same as you embrace the AVF as a valued member.



Michael C. Dalsing,
MD, DFAVF

“Spend some time to get to know everyone you work with on a more personal level - their interests, family, and personal goals.”



AVF Past Presidents at VENOUS2020 in Amelia Island



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Promoting venous and lymphatic health

Lessons Learned by AVF Presidents and Advice to AVF Members (continued)

Thomas Wakefield, MD
AVF President 2005-2006

I am very impressed with all the initiatives of the AVF, from its leadership in clinical care, research, and education to partnerships with industry and its advocacy for its members and the venous community in general. When asked what two pieces of advice I would give to new and established members of AVF, I would ask for new members to get involved with AVF and help define the best ways to treat venous disorders; for established members, I would suggest becoming part of AVF leadership and partaking fully in AVF meetings. Let me expand on these themes.

For new members, I would encourage them to get involved early and often with the activities of the AVF. I would emphasize to new members that your practice, your patients, and your present and future livelihood depends on an understanding of venous pathophysiology and means to intervene to both treat dangerous diseases, debilitating conditions, and improve the quality of lives of patients with venous disorders. As you establish your practice, you need to be part of defining the best ways for venous issues to be addressed. There is no better way to do this than through AVF, taking advantage of its leadership in the nation and world regarding these issues.

For established members, I would suggest that there are many meaningful ways to engage with AVF. The obvious way is to apply to be on the AVF board and volunteer for key committee assignments. Another good way would be to join ongoing clinical trials and research studies and participate in the generation of new knowledge. Members should read and understand AVF guidelines and bring these into their own practices and share them with colleagues and friends. Finally, I would encourage established members to come to our meetings and not only gain new knowledge but make wonderful lifelong friends, as I have had the great opportunity to do. The organization is only as strong as its member involvement, so participate to the fullest.

For all members new and established, the more you engage, the better our collective care of our patients with venous disorders will become. The future is now – be part of that future!



Thomas Wakefield, MD

“The organization is only as strong as its member involvement, so participate to the fullest.”

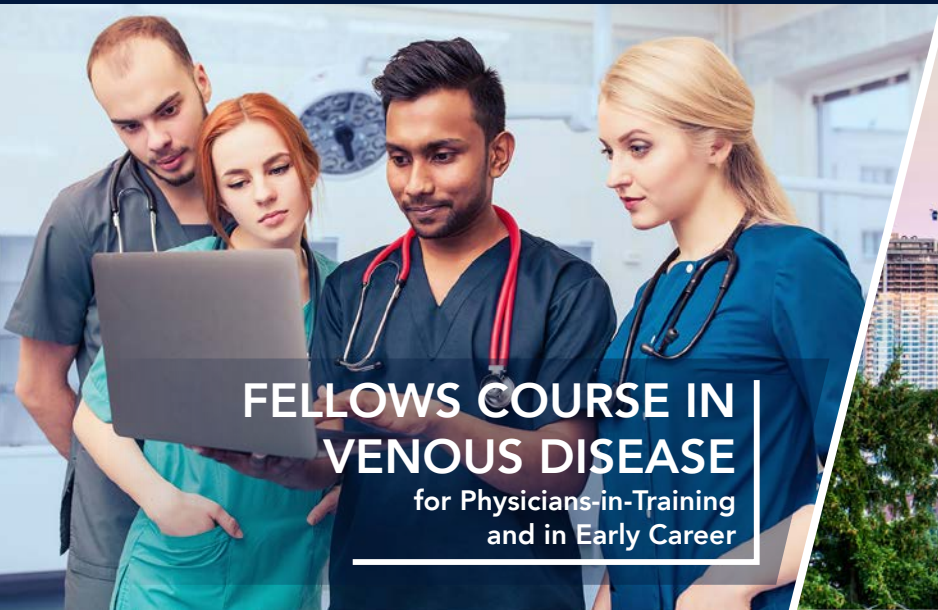


Past Presidents Tom Wakefield and Elna Masuda at the Past Presidents Dinner at VENOUS2020



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REGISTRATION IS OPEN!



FELLOWS COURSE IN VENOUS DISEASE

for Physicians-in-Training
and in Early Career

West Coast VEIN FORUM



TWO COURSES. ONE VENUE.

SEPTEMBER 22-24, 2022

THE EDGEWATER HOTEL • SEATTLE, WASHINGTON

The **FELLOWS COURSE IN VENOUS DISEASE**, a unique, non-CME program led by a faculty of experts in the field, features a highly interactive environment and small group hands-on workshops within an informal, collegial atmosphere – making these very popular programs.

This course is ideal for:

- Fellows and residents within the specialty of vascular surgery, interventional radiology, interventional cardiology, vascular medicine, general surgery and associated programs.
- Recent graduates of these programs.
- Practicing physicians who are new to the venous world.

*Scholarships are available for
Physicians-in-Training!*

[LEARN MORE](#)

The **WEST COAST VEIN FORUM**, a unique CME program, led by a faculty of experts in the field, is an opportunity for community vein practitioners to have a conversation about challenges and controversies in vein treatment.

- The diverse range of topics and discussions will provide an understanding of the complexities and depth of science needed by anyone treating varicose veins and other venous problems.
- The WCVF offers clinicians providing treatment of venous disease a unique opportunity to expand their basic knowledge in order to provide the highest quality of care in venous disease.
- Faculty lectures and in-depth discussions will focus on practical challenges and controversies in venous disease treatment.

[LEARN MORE](#)

WATCH THIS [VIDEO](#) TO LEARN MORE!



VenousForum

venousforum.org

AVF Research Grants Previous Winners

Andrea Obi, MD

The AVF is now accepting applications for the AVF-JOBST Clinical Research Grant and the AVF-Boston Scientific Translational Research Grant. Hear from our previous winners:



Yogen Kanthi, MD

"Independent support with the JOBST grant catalyzed my exploration and scientific growth. It anchored me to the AVF and a rich network of world experts in venous disease. Since receiving the JOBST Award, I have been able to expand my lab and secure multiple grants focused on growing our understanding of the biology and treatment of venous disease. As the only society dedicated to venous disease, this (the AVF grants program) will undoubtedly have a transformative impact on the field."



Andrea Obi, MD



Alessandra Puggioni, MD

"The Jobst Award was a truly life-changing opportunity that allowed me to independently perform complex venous surgeries and define my own success. My mentors taught me that professional growth and advancement require clinicians to continually reflect on their own biases and recognize them. As a result of the Jobst Award, I've developed academic, social, and career skills, including goal setting, time management, and financial literacy."



Efthymios Avgerinos, MD

"Designing and running a randomized trial has been a unique academic experience. Running the SUNSET sPE trial (funded by the Jobst Award) allowed me to network and collaborate with all stakeholders in the management of PE in my institution and nationwide. I have been acknowledged as a leader in the field of PE intervention and have been invited in multiple vascular meetings and courses as well as by vascular book editors (e.g., Rutherford's Vascular Surgery and Endovascular Therapy) to share my expertise. All this was a life- and career-changing experience for me. I am forever grateful that I was awarded this funding opportunity and I am hopeful that our scientific accomplishments will have an impact on our patients' and health systems' well-being."



Joseph Raffetto, MD

"Little did I know how important the Jobst grant would be to my future career path and the love I had to learn more about the science of venous leg ulcer healing. Not only did the Jobst grant provide vital funding for our research project to continue, but it taught me the importance of writing an objective and scholarly research grant that would serve as the foundation to future grant writings and awards."



American Venous Forum
Promoting venous and lymphatic health

Apply for an AVF Research Grant

2023 AVF-JOBST Clinical Research Grant

The American Venous Forum is now accepting submissions for the 2023 AVF-JOBST Clinical Research Grant which will provide an \$85,000 grant over two years for original, clinical research in venous diseases, lymphatic diseases, or lipedema with an emphasis on:

- Prevention of disease and its progression
- Diagnosis of disease
- The science of management of the above conditions, especially with compression therapy.

This opportunity is open to:

- ✓ Residents and fellows in a training program located in the United States
- ✓ Physicians who have completed their training within the past ten (10) years and are currently based in the United States
- ✓ Applicants who have not previously received this award

Either the applicant or their mentor must be an AVF Member at the time of submission. The awardee is expected to join the AVF and maintain their membership for the duration of the grant period.

The American Venous Forum is committed to providing a culturally diverse educational environment and equal opportunities for all members. Applications from veterans, individuals with disabilities, women, minorities, and members of other underrepresented groups are strongly encouraged.

Full details on eligibility, the application process and funding can be found on the AVF website at www.VenousForum.org.



JOBST Sponsored dinner with previous award winners at VENOUS2022



American Venous Forum
Promoting venous and lymphatic health

Apply for an AVF Research Grant

2023 AVF-BSCI Translational Research Grant

The 2023 AVF – Boston Scientific Translational Research Grant will award \$85,000 over a period of 2 years for an original, translational research project in venous disease addressing one or more of the following:

- Nonthrombotic venous obstruction
- Venous thromboembolism
- Superficial venous insufficiency

The submitted research project must also address the following:

- ✓ Human subject requirement: Patient-oriented research involving human subjects or with tissue of human origin
- ✓ Address delivery of appropriate care to appropriate patients and/or translate new clinical data into clinical decision making

The grant is open to residents and fellows in a training program and physicians who have completed their training within the past ten (10) years and have not previously received this award.

IMPORTANT: The 2023 AVF-BSCI Translational Research Grant will accept submissions from International as well as US-based researchers.

Either the applicant or their mentor must be an AVF Member at the time of submission. The awardee is expected to join the AVF and maintain their membership for the duration of the grant period.

The American Venous Forum is committed to providing a culturally diverse educational environment and equal opportunities for all members. Applications from veterans, individuals with disabilities, women, minorities, and members of other underrepresented groups are strongly encouraged.

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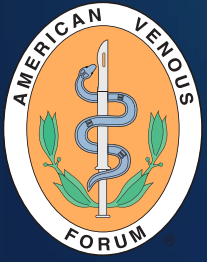
**Boston
Scientific**
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AVF President Bill Marston with Past Grant Winner Owen Xi



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WEBINAR

TIPS FOR SUCCESSFUL AVF GRANT APPLICATIONS

JUNE 6, 2022 | 8:00-9:00PM (ET)



Back in-person and virtual!
June 3-4, 2022



To register, visit:
ExpertVenous.com



American Venous Forum
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Meet the AVF Administrative Team

John Forbes, Executive Director
Allie Woodward, AVF Staff

Behind every successful organization are committed individuals who have dedicated their time to enhancing the membership experience and advancing the organization's mission. At AVF, we are honored to be supported by a number of impressive individuals who bring with them the talent, professionalism, and expertise to support our work as a nonprofit organization. As a team, these individuals collaborate to reinforce our members' hard work.



John Forbes

"On a personal level, it has been my privilege working with this outstanding team. The AVF is in good hands with this high-performing and dedicated group of professionals."
- John Forbes, Executive Director



Jeff Mendola, CFRE
Director, Mission Advancement

With over 14 years of experience in fundraising and non-profits, Jeff's expertise allows him to not only set new goals for the AVF, but to drive those goals home. In addition to his sales and marketing experience, Jeff is one of only 8,000 CFREs (Certified Fund-Raising Executives) in the world! At the AVF, he spearheads the AVF's relationships with companies that serve the venous field, from coordinating meeting and conference sponsorships to developing philanthropic support. Jeff is also responsible for the AVF Website, ShopAVF, the AVF's new Venous Policy Navigator, and the administration of the AVF's four grants. His commitment to the AVF is seen throughout his work. When Jeff is not working, he enjoys home DIY projects and spending time with his wife, 3 teenage daughters, and black lab Sadie.



Amy Murrin – AVF Staff

Amy has been supporting the AVF and its committees for over a year now. She brings to the team effective leadership skills, diverse management experience, and a record of building strong business relationships. Amy's impeccable organizational skills and capability to develop growth-enabling strategies have proven to be a driver in the success of the AVF's 21 committees. In her free time, Amy enjoys spending time with her husband and three children, getting exercise, working on projects around the house and yard, reading, and experimenting in the kitchen.



Allie Woodward – AVF Staff

As the newest AVF staff team member, Allie manages the AVF's communications and marketing plans. She also supports several AVF committees, including Digital Media, Newsletter, Health Policy, and Early Career. Prior to her role now, Allie worked in the communications field on Capitol Hill and at the White House. In her free time, she enjoys reading, snow skiing, baking, and spending time in the Colorado mountains.

If you have any questions, please contact
AVF Staff at info@venousforum.org.



American Venous Forum
Promoting venous and lymphatic health

The Team Behind the Team: Veritas Association Management

Donald Rolfe, Content Strategy Director, Veritas Association Management

Veritas Association Management has managed AVF since 2018 with a hands-on approach, a commitment to the AVF mission, and its Comprehensive Services Suite that includes management of Finances, Administration & Operations, Programming, Accreditation & CME, Information Technology, Meetings & Events, Member & Database Support, and Industry Relations. The high-level expertise of the VAM staff in conjunction with the AVF Executive Committee optimize resources and energy and ensure a healthy membership and strong financial independence for AVF. Veritas team members serving the AVF include:



Sue O'Sullivan, Veritas President & Co-Founder, AVF Managing Director

Sue's extensive, 20+ years of experience as an industry executive and managing director of societies and associations has given her invaluable insights on the challenges faced by medical organizations such as AVF. Known for her uniquely personal management style and for generously sharing her strategic guidance, Sue is fiercely proud of the Veritas portfolio of clients and Veritas staff of more than 50 employees that support them.



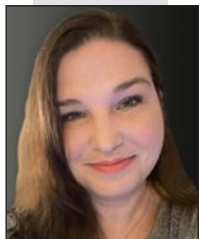
Jen Manthei, Vice President of Meetings and Events

Jen is another Veritas overachiever. She has more than 20 years' experience in the industry and has made Veritas her professional home for the past six years. Jen and her team run all meeting logistics for Veritas, including site selections, contract negotiations, and on-site and virtual meeting management. Jen has two sons that consume all her free time, except for the special time she allows for her Peloton obsession!



Caitlin Barry, CME Program & Speaker Manager

Caitlin brings three years of experience to her role in managing AVF's educational & CME program offerings for Veritas. When asked about a most memorable experience, she cited the semester she spent abroad during college.



Kirsten Myers, Member Services Representative

An industry veteran of eight years, Kirsten helps members pay/renew dues, register for meetings, set up member benefits, and travels to meetings to assist with registration (she loves interacting with members in-person, so say hello!). A newbie on the AVF team, Kirsten helps analyze information to determine how best to serve AVF members. An avid traveler, she enjoys spending time hiking at Starved Rock State Park with her puppy.



Johnny O. Fields, Finance Accounting Manager

Johnny brings more than 20 years of experience in finance management, banking, and accounting to his four-year role at Veritas. He oversees the daily account functions for AVF and ensures timely and accurate reporting and preparation of AVF monthly financials. A native of Charleston, South Carolina, he enjoys playing golf and chess.



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The Team Behind the Team:

Veritas Association Management (continued)



Lisa Bosco, Accounting Associate

With 20 years of experience in financial accounting, Lisa manages and executes invoicing of AVF sponsorship, industry support, and accounts receivable functions. She has been on Team Veritas for more two and a half years.



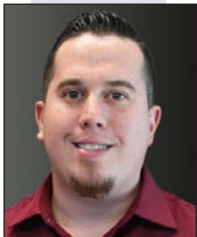
AJ Pfatschbacher, Strategic Communications Director

AJ is responsible for the strategy and coordination of the digital marketing team and its deliverables. His eight years of agency and brand marketing experience allow him to effectively promote events and initiatives for AVF and other Veritas clients. Part of Team Veritas for two years, AJ enjoys building and modifying computers in his free time.



Marissa Gomez, Strategic Communications Specialist

Marissa began her career right out of college and has been with Veritas for four-and-a-half years. In her role, she helps both AVF and Veritas manage their social media and digital marketing efforts, including Annual Meeting promotional posts and eblasts. Interestingly, she does this without the corpus callosum, which is a large bundle of nerve fibers that connect the two brain hemispheres, enabling communication between the right and left sides of the brain. Now that's talent!



Victor Saldana, Director of Information Technology and Security

With more than nine years of experience in the security and technology field, Victor oversees the supervision, implementation, maintenance, and security of all AVF computing functions. In his free time, he enjoys spending time with his daughter and son, and volunteers his time and talents to support not-for-profit organizations.



Anthony Eaves, Website Development Specialist

A web developer with four years of industry experience and 10 months with Veritas, Anthony designs web pages that provide a seamless experience for users, while keeping features updated for Veritas clients, including AVF! When not at his computer, Anthony enjoys being active and participating in outdoor activities.



Christine Rataj, Senior Graphic Designer

A graphic designer for more than 27 years, Christine joined Veritas in 2020, where she creates branding for digital and print collateral, meetings and events, newsletters, websites, and much more. Her nine years' experience as a Zumba instructor helps Christine stay on pace with this demanding role!



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The AVF's Commitment to DEI

Ruth Bush, MD, Misaki Kiguchi, MD, Anil Hingorani, MD,
Elna Masuda, MD, Kathleen Ozsvath, MD

The AVF is excited to announce the new ad hoc "Diversity, Equity, and Inclusion (DEI) Committee." This initiative will focus on the AVF core values which include Diversity, Equity, and Inclusion and the AVF priority of venous health for all. For ALL. Led by Drs. Kathleen Ozsvath and Ruth L. Bush, this committee seeks to advance awareness, understanding, acceptance, and respect of all ideas and people, and provide guidance on needed research and data on venous care and disparities. To enact our core values into actionable goals, this ad hoc committee has been tasked with working on ways to implement DEI principles into our programming and educational activities. Improving diversity of membership, including diversity of gender, race, nationality, sexual orientation, and others, means better representation and understanding of physicians to patients. Diversity of perspectives brings a wealth of ideas, improved creativity, and ultimately, increased member engagement. Through DEI initiatives we hope to foster a psychologically safe environment, one of trust and a member sense of belonging.

Research, sensitive to health disparities and underserved populations, is of paramount importance to better understand how to provide inclusive and individualized care. The AVF has always supported the most advanced research in venous and lymphatic disease to improve patient care; therefore, deliberate attention to incorporate these principles into research

"The AVF's core values underscore our commitment to providing equal opportunities for all members and advocating for all patients impacted by venous disease. I am proud to serve as the AVF President as we fulfill our commitment to being a diverse, equitable, and inclusive organization."
- Bill Marston
AVF President



CORE VALUES

<p>VALUES & INTEGRITY</p> <p>Adhere to high ethical values, integrity and confidentiality in best clinical practice, professional conduct and personal interactions.</p>	<p>EDUCATION</p> <p>Provide high quality education in venous and lymphatic disease to healthcare professionals, patients and the public.</p>	<p>INCLUSIVITY, EQUITY & DIVERSITY</p> <p>Commit to understanding, accepting, respecting and encouraging all ideas, people and actions.</p>	<p>NURTURING</p> <p>Cultivate and foster growth and development for all members through education, collaboration, research and mentorship.</p>	<p>SCIENTIFIC EXCELLENCE & RESEARCH</p> <p>Support research initiatives that advance the field of venous and lymphatic disorders and disseminate evidence-based information to enhance patient care.</p>
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American Venous Forum
venousforum.org/about-us/code-of-ethics-avf-pledge/



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The AVF's Commitment to DEI (continued)

projects is paramount. Attention to social determinants of health and healthcare disparities among patients suffering from venous and lymphatic diseases will enable venous specialists to better care for their patients.

Why now? The past few years have brought many social and racial injustices and inequities into the public forefront. We are increasingly aware of the health disparity gaps and burdens among BIPOC (Black, Indigenous, and People of Color) and women. Despite this, much more DEI work and awareness is needed. Translating our increasing awareness into actionable events that improve the overall healthcare experience is important. As a start, we recommend viewing *The Color of Care* – a new documentary exploring how systemic racism led to overwhelming suffering and subsequently substandard healthcare in the United States during the global pandemic ([click here to watch](#)). We plan to dedicate initiatives to expand education of venous disease to frontline healthcare professionals and patients, promote research that explores venous disease disparities, and encourage interest in advancing treatment of venous and lymphatic disease at all career levels. The AVF, its committees, and its work must be viewed through a DEI lens that aligns with the AVF mission and core values. Through this process, the AVF intends to demonstrate through its actions that it is an organization truly committed to the DEI values outlined above with a purpose larger than ourselves which can only be measured through the improvement of care for ALL with venous diseases.

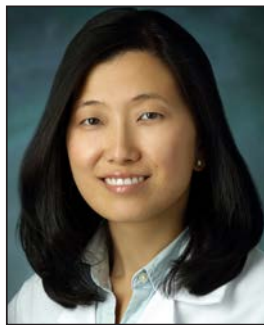
DEI Committee Members



Kathleen Ozsvath, MD



Ruth Bush, MD, JD



Misaki Kiguchi, MD



Anil Hingorani, MD



Karem Harth, MD



Elna Masuda, MD



Sheila Blumberg, MD



Shayna Brathwaite, MD



Sebastian Cifuentes, MD



Report from the AVF Health Policy Committee Chair

Sheila Coogan, MD

The American Venous Forum Health Policy Committee received an update from Dr Mark lafrati regarding the most recent American Medical Association's Relativity Assessment Workgroup (AMA RAW) meeting—see article on page 24 of this issue of *Vein Specialist*). Dr lafrati has been an incredible advocate for the AVF both on the Health Policy Committee and with his contribution at the recent AMA meeting. Through the efforts of the AVF leaders and Health Policy committee, the AVF will be granted a delegate at the AMA House of Delegates next year. To ensure that the AVF has a place, please become a member of the AMA to ensure that the AVF's voice will be heard in future AMA meetings.

This year, the AVF's Health Policy Committee will be using the AVF Policy Navigator to anticipate policy reviews in advance and advocate for policies that provide optimal care to our patients. The Policy Navigator is a great tool (visit PolicyNav.org for more information).

Policies up for review this year include Pacific Source, BCBS of NC, BCBS of Tennessee, and Cigna. Policy changes among these carriers will likely affect all of us. We are in the process of actively reviewing these policies. As you might imagine, Congress and CMS are less focused on health care policy right now—there's the war in Ukraine, the January 6 committee, mid-term elections, and beyond.

As always, we encourage input from members when they receive denials or feel that a provider's policy is not consistent with the best care for their patients.

Lastly, in keeping with Dr Elias' use of cultural references, the architect (to be identified in next month's issue) below is credited with the quote, "the devil is in the details," which is only too true for health care policy.



Sheila Coogan, MD

"Through the efforts of the AVF leaders and Health Policy committee, the AVF will be granted a delegate at the AMA House of Delegates next year."



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Answering the Questions about Venous Stents: The C-TRACT Trial

Suresh Vedantham, MD

Venous stent placement has been performed for more than a quarter century to manage chronic venous disease. Despite extensive clinical experience, important questions remain: Which patients will benefit from non-invasive treatments, and which patients really need stents? When stents are placed, how much do patients benefit and for how long? What are the long-term patency and stability of stents? And, if stents are effective in any particular patient population, what are the pre-requisites for changing provider perceptions and transforming clinical practice in positive ways?

The need to find the answers is why the National Heart Lung and Blood Institute (NHLBI) of the National Institutes of Health (NIH) is funding the C-TRACT (Chronic Venous Thrombosis: Relief with Adjunctive Catheter-Directed Therapy) Trial, a multicenter randomized trial that is evaluating the ability of iliac vein stent placement to reduce severity in patients with moderate- or-severe-post-thrombotic syndrome (PTS). To date, the study has enrolled 134 of the targeted 374 patients. Extensive changes have been made to address pandemic-related challenges, and the trial now requires just 2-3 in-person patient visits. Because it has a non-intervened control group, C-TRACT is the only study that can document benefits of endovascular therapy that exceed those of conservative therapies.^{1,2} As such, if the trial is completed to its original design and is positive, it will be a potent vehicle to convince medical providers of the benefits of stent placement, which can enable many more patients to be helped.

Most importantly, every AVF member can contribute! The C-TRACT investigators ask every physician to take a “study before stent” approach to PTS. If you refer every PTS patient you see to the trial, it will be completed quickly, and we will soon have data that could be transformative to clinical practice.

Acknowledgments

The C-TRACT Clinical Trial is supported by NHLBI grants UH3-HL138325 (clinical coordinating center, Dr Suresh Vedantham at Washington University in St. Louis) and U24-HL137835 (data coordinating center, Dr Sameer Parpia at McMaster University, Hamilton, ON, Canada). The content in this article is solely the responsibility of the author, and not the NHLBI or NIH. The author wishes to thank the study's Steering Committee and other leaders: Dr David Cohen, Anthony J. Comerota, Samuel Z. Goldhaber, Michael R. Jaff, Jim Julian, Susan R. Kahn, Clive Kearon (deceased), Andrei Kindzelski, Elizabeth Magnuson, Elaine Majerus, Dan Marcus, William Marston, Sameer Parpia, Mahmood K. Razavi, Akhilesh K. Sista, Suman Wasan, and Ido Weinberg.

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Suresh Vedantham, MD

“Extensive changes have been made to address pandemic-related challenges, and the trial now requires just 2-3 in-person patient visits.”



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Winner of the Best Abstract at VENOUS2022: Elizabeth Andraska

The Role of Catheter-based Interventions to Evade the Chronic Consequences of Submassive Pulmonary Embolism



Results of a secondary analysis following the SUNSET sPE randomized control trial, which is led by investigator Efthymios Avgerinos, suggest there may be a different biomarker response in patients treated for submassive pulmonary embolism with invasive techniques compared to anticoagulation alone. The data were presented at VENOUS2022, the annual meeting of the American Venous Forum, and will also be presented at this year's European Venous Forum in July 2022.

Submassive pulmonary embolism (sPE) is an incredibly morbid disease process, as up to half of patients diagnosed with sPE experience chronic symptoms such as shortness of breath, reduced exercise tolerance, or its most severe complication, pulmonary hypertension and ultimately heart failure. Current guidelines for optimal treatment of this disease process are dyssynchronous as limited data are available on outcomes and long-term consequences by treatment type. For sPE, some physicians will choose to intervene on optimal risk patients with catheter-based techniques, whereas others will choose to treat with anticoagulation alone. Endovascular interventions are becoming increasingly popular, and device options are diversifying rapidly. The ULTIMA trial, a recent randomized control trial comparing ultrasound assisted thrombolysis (USAT) to anticoagulation alone, found an earlier reversal in RV:LV ratio in the USAT group, suggesting an earlier recovery with catheter-based therapy. Further studies to evaluate this accelerated improvement to baseline are warranted.

The multicenter SUNSET sPE randomized control trial, led by Dr Efthymios Avgerinos, initially sought to compare thrombus burden after USAT compared to standard catheter-directed thrombolysis. As a secondary analysis of the SUNSET sPE trial, biomarker data and functional outcomes of patients with sPE were collected at three different timepoints after sPE – at time of diagnosis, at time of discharge, and at three-month follow-up. These secondary outcomes were compared among patients treated with catheter-directed therapies and patients receiving anticoagulation alone.

Elizabeth Andraska, a fifth-year vascular surgery resident at the University of Pittsburgh, recently presented the results of this secondary analysis at VENOUS2022. They found that biomarkers CXCL10 and Pentraxin 3 returned more rapidly to baseline in the catheter-directed therapy group compared to anticoagulation. Interestingly, each of these biomarkers is associated with chronic morbidities that are associated with PE. CXCL10 has been increasingly associated with heart failure, whereas Pentraxin 3 is associated with adverse cardiac remodeling. Together, these results suggest that certain biomarkers are associated with the chronic complications following sPE that improve more rapidly when catheter-based interventions are employed. Perhaps identifying at-risk biomarker profiles would allow for more personalized and targeted treatment of sPE. Avgerinos, Andraska, and colleagues are excited to evaluate the implications of these findings on long-term outcomes. This work was awarded the top abstract of VENOUS2022 and will be presented in the upcoming European Venous Forum meeting.





International Venous and Lymphatic Pathways: From the Pandemic to Better Patient Care

Sergio Giancesini, MD, PhD, FACS

University of Ferrara (Italy)

Uniformed University of Health Sciences (Bethesda, MD, USA)

Difficulties are opportunities!

In a time in which the world is progressively overcoming the significant difficulty of the pandemic, the opportunity of proper global interaction and synergy is more evident than ever. Paradoxically, the lockdown opened the doors to worldwide interaction by means of digital platforms, allowing multi-specialty and multi-cultural interaction.

Such ease of communication has given us the chance to learn from each other, engaging regions usually unlikely to interact significantly during traditional educational initiatives.

At the same time, to avoid the risk of redundancy, of low-quality information, and of overlap, international venous and lymphatic pathways should be developed in synergy among the different scientific societies, academic centers, and institutions involved in the process.

Moreover, phlebology and lymphology are a “family affair,” as per the valuable publication of Partsch and Lee:¹ Proper engagement of the related experts is of paramount importance to advance together in the holistic best management of our patients.

The digital educational time allowed us to reach out to different specialty organizations, including musculoskeletal, rehab, nutrition, and sports medicine experts – all professional specialties too often unaware of proper vein and lymphatic care.

In the same way, Family Medicine demonstrated its importance during COVID, reminding us of the importance of the self-management issue – a condition that persists after the pandemic, particularly in rural areas where the majority of the population lives without direct access to specialized healthcare centers.²

Gender equity is another topic that emerged strongly during the pandemic’s international venous pathways in greater visibility for female pelvic venous disorders. The importance of interaction with the ObGyn world has been stressed from both vein experts and gynecologists, urging dedicated scientific research and public health awareness campaigns.



Sergio Giancesini,
MD, PhD, FACS

“The importance of interaction with the ObGyn world has been stressed from both vein experts and gynecologists, urging dedicated scientific research and public health awareness campaigns.”



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International Venous and Lymphatic Pathways: From the Pandemic to Better Patient Care (continued)

Last but not least, on the topic of public awareness, the pandemic has led to an “infodemic,” once again denouncing the significant and dangerous exposure of patients to false claims³ and to improperly certified therapeutic methods.⁴

In conclusion, the difficulty of the pandemic has pushed the scientific community out of its comfort zone, forcing us to move along international venous and lymphatic pathways dedicated to multi-specialty, institutional, and evidence-based patterns, in synergy among the different continents and among healthcare professionals and the public.

With the hope to meet many colleagues and friends along such international venous pathways, all together moving from the pandemic to better patient care, I deeply thank the American Venous Forum for the opportunity and for continuously representing one of the best examples of science and educational promotion worldwide.

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¡NUEVO!

LA TRADUCCIÓN AL ESPAÑOL DE LAS DIRECTRICES MÉDICAS
DE COMPRESIÓN YA ESTÁ DISPONIBLE EN VASCULARIUM.

VASCULARIUM

REVISTA LATINOAMERICANA DE CIRUGÍA VASCULAR Y ANGIOLOGÍA

[HAZ CLIC AQUÍ](#)



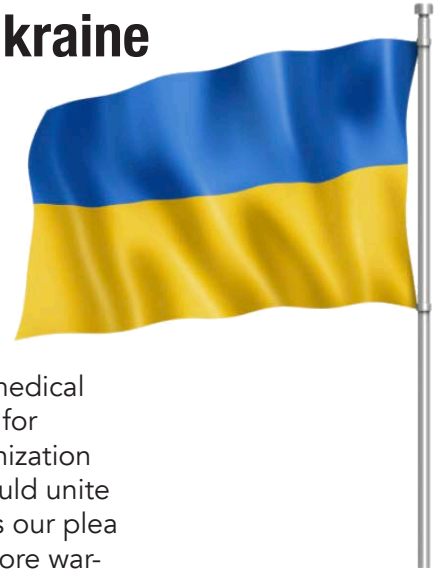
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A Message from AVF Board of Directors on Ukraine

As events have continued to unfold in Ukraine, we feel compelled to issue a second statement on the conflict in Ukraine. While our previous statement reflected our thoughts based on the information we had at the time, the fluidity and escalation of the situation led us to release the following statement:

The American Venous Forum condemns the unprovoked invasion of Ukraine by Russia. As a result of this aggression, thousands of innocent lives are being lost, and millions of Ukrainian citizens are being displaced from their families, homes, and communities – even their homeland. As a global medical society with hundreds of members worldwide, we stand for peace, we stand for understanding, and collaboration, and we stand for healing. We are an organization of scientists, educators, and healers who believe that science and health should unite people in order to create a better, healthier, and more prosperous world. It is our plea that these hostilities end quickly so that more lives will not be lost, and no more war-caused injuries and dislocations will occur. Along with millions of doctors from around the world, we pray for the citizens of Ukraine, and we pray for peace.

Prior statement: The American Venous Forum community expresses its strong support for our colleagues and all those affected by the Ukrainian conflict. We hope you stay safe together during these difficult days. Wishing for peace, tranquility, and a safe resolution.



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MARCH/APRIL NEW AVF MEMBERS

Welcome

Shayna Brathwaite *United States*

Claudine Capistrano *United States*

Anahita Dua *United States*

Ivan Gudz *Ukraine*

Joseph Hart *United States*

Rahul Malhotra *United States*

Katherine Reitz *United States*



American Venous Forum
AVF EXCHANGE

THE AVF EXCHANGE

**Private, Supported
Collaboration and
Networking with
Fellow AVF Members**



Real People Help You:

- **Make Connections** We'll build your profile and update your preferences *on your behalf*
- **Get Your Questions Answered** We identify *and connect you with the experts* on topics of interest to you
- **Discover the Latest Research** We add referenced literature to posts and help members share published (and working) content for feedback and further discourse
- **Draft and Post Discussion Prompts and Responses** to teach and learn from your peers (*simply send or dictate notes*)
- **Save Time** by moderating Discussions, avoiding off-topic and duplicate conversations, and collecting and organizing past Discussions for quick and easy reference

Join Your Community at
docmatter.com/AVFExchange



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Monika Glovizcki, MD *Designer*



**AVF's Online Store
Offers New Practice
Resources & Apparel**

**SHOP
AVF<<<**

The collage displays a variety of items available in the AVF Online Store. On the left, there are several jackets and scarves in different colors (blue, green, black) with the AVF logo. In the center, there are several patient guides and pocket guides, including:

- APPROPRIATE USE CRITERIA FOR CHRONIC LOWER EXTREMITY VENOUS DISEASE** (AUC Ratings for Patient Management Considerations in Clinical Settings)
- ENDOTHERMAL HEAT-INDUCED THROMBOSIS CLASSIFICATION AND TREATMENT** (Evidence to Practice)
- COMPRESSION THERAPY AFTER INVASIVE TREATMENT OF SUPERFICIAL VEINS OF THE LOWER EXTREMITIES** (Key Points, Clinical Strategies, Dose and Modality Considerations)
- NON-THERMAL ABLATION** of Superficial Veins of the Legs (A Patient Guide)
- PHLEBECTOMY** (The Complete Removal of Varicose Veins) (A Patient Guide)
- SCLEROTHERAPY** (The Injection Treatment of Varicose Veins and Spider Veins) (A Patient Guide)
- THERMAL ABLATION** of Superficial Veins of the Legs (A Patient Guide)
- VENOUS DISEASE & VARICOSE VEINS** (A Patient Guide)
- VENOUS ULCERS** (A Patient Guide)
- LYMPHEDEMA** (A Patient Guide)

Each guide features a patient photo and the AVF logo. The bottom of the collage shows the AVF logo and the website VainPatient.org.