

ACTiVE: SIR Takes Aim at Venous Thromboembolic Disease

A brief synopsis of what to expect at SIR's upcoming Advanced Therapies in Venous Interventions meeting.

BY KUSH R. DESAI, MD

Venous thromboembolism (VTE) has become an active area of investigation, product development, and clinical practice growth over the past few years. The large and growing number of patients afflicted with VTE-related problems have shown the medical community how much we still need to learn about this complex disease. The establishment of pulmonary embolism response teams (PERTs), initiation and completion of randomized trials (including ATTRACT and C-TRACT), development of inferior vena cava (IVC) filter quality programs, as well as calls to action by the surgeon general and the progress involving venous-specific technologies (including thrombectomy devices and stents) reflect the need to expand VTE learning.

Responding to the rapid pace of these changes, the Society of Interventional Radiology (SIR) has created Advanced Therapies in Venous Interventions (ACTiVE), a comprehensive, multiyear VTE meeting that evolves at the pace of the field. By bringing together VTE thought leaders in interventional radiology, vascular surgery, cardiology, hematology, and pulmonology, ACTiVE arms attendees with state-of-the-art information on best practices for patient care. With its multidisciplinary faculty and programming, ACTiVE creates a space for the development of collaborative care models that optimize patient outcomes in VTE.

ACTiVE is organized into four half-day sessions: pulmonary embolism, acute venous thrombosis, chronic venous occlusions, and IVC filter utilization. Discussions will extend beyond procedural care to the proper management of patients from initial consultation through follow-up. Beginning with a brief examination of historical perspectives, there will be a review of current data and treatment options and a look at controversies and knowledge gaps that require future research. For example, one session will look at how current trials inform

patient selection in the management of pulmonary embolism with regard to PERTs. Similarly, other sessions will evaluate how the ATTRACT trial results inform the use of modern deep venous thrombolysis and how the C-TRACT trial and the arrival of on-label venous stents will drive future practice in the management of severe postthrombotic syndrome.

All didactics are self-assessment continuing medical education (SA-CME) accredited, and each half-day session will include a case-based multidisciplinary discussion to foster robust attendee participation. Finally, attendees are assured hands-on experience with the latest technologies in the VTE space through workshops, which include exposure to thrombectomy devices and a faculty-led advanced IVC filter retrieval workshop using three-dimensional-printed IVC models.

ACTiVE supports multidisciplinary VTE care. No matter the practice model—academic, private practice, or part of a large group or hospital system—attendees will leave ACTiVE with actionable information and valuable tools that allow them to create evidence-based VTE programs that drive responsive, high-quality care. ■

Kush R. Desai, MD

Assistant Professor of Radiology
Section of Interventional Radiology
Department of Radiology
Northwestern University Feinberg School of Medicine
Chicago, Illinois
kdesai007@northwestern.edu

Disclosures: Speaking/consulting fees from Cook Medical, Boston Scientific Corporation, AngioDynamics; consulting fees from Philips/Spectranetics, OptiMed.