

## ISTANBUL CTO&CHIP







SEPTEMBER 25, 2025

SEPTEMBER 26-28, 2025

### 25 SEPTEMBER 2025, THURSDAY

TIME	HALL A
14:00 - 15:30	APPROACH TO CALCIFIC LESIONS UNDER IMAGING GUIDANCE
14:00 - 14:15	Definition of calcific lesion and approach algorithm
14:15 - 14:30	Intravascular imaging in calcific lesions
14:30 - 14:45	Use of cutting/scoring or OPN balloons in calcific lesions under imaging guidance
14:45 - 15:00	Use of IVL in calcific lesions under imaging guidance
15:00 - 15:15	Use of rotational atherectomy in calcific lesions under imaging guidance
15:15 - 15:30	Use of orbital atherectomy in calcific lesions under imaging guidance
15:30 - 15:45	COFFEE BREAK
15:45-17:15	CTO: ANTEGRADE APPROACH
15:45–16:00	Bilateral injection, tips and tricks: Starting antegrade to whom and when.
16:00–16:15	Antegrade wire escalation
16:15–16:30	Parallel wire technique
16:30–16:45	What to do with unpenatrable cap?
16:45-17:00	Antegrade dissection reentry (ADR)
17:00–17:15	Discussion
17:15-17:30	COFFEE BREAK
17:30-19:00	CTO: RETROGRADE APPROACH
17:30–17:45	Who should receive retrograde and what are the steps of retrograde CTO?
17:45–18:00	Septal collateral crossing
18:00–18:15	Epicardial collateral crossing
18:15–18:30	Retrograde lesion crossing techniques (CART / rCART etc.)
18:30–18:45	Wire externalization techniques



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#### 26 SEPTEMBER 2025, FRIDAY

TIME	HALL A
08:30-09:30	WHO, WHEN, AND HOW TO INTERVENE IN CTO?
08:30-08:40	Proper patient selection in CTO, EuroCTO perspective and review of the literature
08:40-08:45	Discussion
08:45-08:55	Who should receive an antegrade approach in CTO
08:55-09:00	Discussion
09:00-09:10	Who should receive a retrograde approach in CTO
09:10-09:15	Discussion
09:15-09:25	Radiation safety in CTO
09:25–09:30	Discussion
00.30 00.45	COFFEE DDFAV
09:30-09:45	COFFEE BREAK
09:45–11:30	LIVE CASES – CTO
Live Case 1	Germany - Operator
Live Case 2	Istanbul - Operators
Topic 1	Mechanical Circulatory Support – Who is the right candidate and how to select
Topic 2	Balloon-uncrossable lesion in CTO and solutions
Topic 3	Coronary CT in CTO
11:30-11:45	COFFEE BREAK
11:45–12:45	APPROACH TO LEFT MAIN CORONARY ARTERY (LMCA) LESIONS – EAPCI JOINT SESSION
11:45-11:55	Are all LMCA lesions are the same? Anatomical differences
11:55-12:00	Discussion
12:00-12:10	IVUS or OCT in LMCA interventions – who gets what and how to interpret? (pre- and post-procedure)
12:10-12:15	Discussion
12:15-12:25	Debulking or IVL in preparation of calcified LMCA lesions?
12:25-12:30	Discussion
12:30-12:40	Distal LM True Bifurcation lesions PCI: 2 Stent or 1 stent with DCB When and for whom?
12:40-12:45	Discussion
12:45-14:00	LUNCH BREAK
13:00–13:45	COURSE 1: What a CTO operator must know about IVUS
13:00-13:45	COURSE 2: CTO – Wire selection and effective use from A to Z



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14:00–15:45	LIVE CASES – CHIP
Live Case 3	Operator
Live Case 4	Operator
Topic 1 Topic 2 Topic 3	IVL or debulking in calcific in-stent restenosis?  Use of rotablator in calcific CTO  TBD (To be determined)
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15:45-16:00	COFFEE BREAK
16:00-17:45	LIVE CASES – CTO
Live Case 5	Operator
Live Case 6	Operator
Topic 1	r-CART failed – What should we do?
Topic 2	How to externalize retrograde wire, which technique?
Topic 3	TBD (To be determined)
17:45-18:00	COFFEE BREAK
18:00-19:00	INTERESTING CASES – CTO & CHIP 1
18:00-18:10	Case 1: Difficult wire externalization
18:10-18:20	Case 2: CTO within bifurcation lesion
18:20-18:30	Case 3: What is the easiest way to use Tip-in technique?
18:30–18:40	Case 4: Why I used rotablator in a CTO case?
18:40-18:50	Case 5: My CTO with full DCB case– for which lesion?
18:50–19:00	Case 6: When should we use ipsilateral collateral in CTO

#### **27 SEPTEMBER 2025, SATURDAY**

TIME	HALL A
08:30-09:30	CALCIFICATION: BREAK IT DOWN – HOW, WITH WHAT, AND WHEN?
08:30-08:40	Calcium approach algorithm: Uncrossable and undilatable lesions
08:40-08:45	Discussion
08:45-08:55	Cutting balloon, scoring balloon, and OPN – For whom and when?
08:55-09:00	Discussion
09:00-09:10	IVL – For which lesion, when, and how? Does it solve everything?
09:10-09:15	Discussion
09:15-09:25	Debulking methods – For whom, which method, and how?
09:25-09:30	Discussion
09:30-09:45	COFFEE BREAK



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09:45-11:30	LIVE CASES – CTO
Live Case 7	Operator
Live Case 8	Japain - Operators
Topic (Konu) 1	Non-penetrable cap – Solutions
Topic (Konu) 2	Epicardial crossing techniques
Topic (Konu) 3	TBD (To be determined)
11:30-11:45	COFFEE BREAK
11:45–12:45	DRUG-COATED BALLOONS (DCB)
11:45-11:55	DCB use in coronary bifurcation lesions
11:55-12:00	Discussion
12:00-12:10	DCB in calcified lesions
12:10-12:15	Discussion
12:15-12:25	DCB use in CTO
12:25-12:30	Discussion
12:30-12:40	Stentless PCI: Full DCB or hybrid approach in complex PCI
12:40-12:45	Discussion
12:45-14:00	LUNCH BREAK
13:00-13:45	COURSE 1: CTO – Microcatheter selection and effective use from A to Z
13:00-13:45	COURSE 2: DCB course
14:00-15:45	LIVE CASES – CHIP
Live Case 9	Operator
Live Case 10	Operator
Live Case 10	Operator
Live Case 10  Topic 1	Operator  Retrograde wiring – What to do if microcatheter can't be advanced?
Topic 1	Retrograde wiring – What to do if microcatheter can't be advanced?
Topic 1	Retrograde wiring – What to do if microcatheter can't be advanced?  How to manage collateral perforation?
Topic 1	Retrograde wiring – What to do if microcatheter can't be advanced?
Topic 1 Topic 2 Topic 3	Retrograde wiring – What to do if microcatheter can't be advanced?  How to manage collateral perforation?  TBD (To be determined)
Topic 1 Topic 2 Topic 3  15:45–16:00	Retrograde wiring – What to do if microcatheter can't be advanced?  How to manage collateral perforation?  TBD (To be determined)  COFFEE BREAK
Topic 1  Topic 2  Topic 3  15:45–16:00  16:00–17:45	Retrograde wiring – What to do if microcatheter can't be advanced?  How to manage collateral perforation?  TBD (To be determined)  COFFEE BREAK  LIVE CASES – CALCIFIC LESIONS
Topic 1 Topic 2 Topic 3  15:45–16:00	Retrograde wiring – What to do if microcatheter can't be advanced?  How to manage collateral perforation?  TBD (To be determined)  COFFEE BREAK
Topic 1  Topic 2  Topic 3  15:45–16:00  16:00–17:45	Retrograde wiring – What to do if microcatheter can't be advanced?  How to manage collateral perforation?  TBD (To be determined)  COFFEE BREAK  LIVE CASES – CALCIFIC LESIONS
Topic 1  Topic 2  Topic 3  15:45–16:00  16:00–17:45  Live Case 11	Retrograde wiring – What to do if microcatheter can't be advanced?  How to manage collateral perforation?  TBD (To be determined)  COFFEE BREAK  LIVE CASES – CALCIFIC LESIONS  Operator
Topic 1  Topic 2  Topic 3  15:45–16:00  16:00–17:45  Live Case 11  Live Case 12	Retrograde wiring – What to do if microcatheter can't be advanced?  How to manage collateral perforation?  TBD (To be determined)  COFFEE BREAK  LIVE CASES – CALCIFIC LESIONS  Operator  Operator
Topic 1  Topic 2  Topic 3  15:45–16:00  16:00–17:45  Live Case 11  Live Case 12  Topic 1	Retrograde wiring – What to do if microcatheter can't be advanced?  How to manage collateral perforation? TBD (To be determined)  COFFEE BREAK  LIVE CASES – CALCIFIC LESIONS  Operator  Operator  Approach to burr entrapment



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17:45-18:00	COFFEE BREAK
18:00-19:00	INTERESTING CASES – CTO & CHIP 2
18:00-18:10	Case 1: Is it dangerous to use epicardial collateral for CTO in CABG?
18:10-18:20	Case 2: How to manage septal hematoma?
18:20-18:30	Case 3: Importance of the Carlino technique
18:30-18:40	Case 4: Guide extension use and rCART
18:40-18:50	Case 5: ADR with and without Stingray
18:50-19:00	Case 6: How to manage ambiguous cap CTO?

#### 28 SEPTEMBER 2025, SUNDAY

	26 SEPTEMBER 2023, SONDAT
TIME	HALL A
09:00-10:00	INTERESTING CASES – CTO & CHIP 3
09:00-09:10	Case 1: From disaster to revascularization: Managing a stripped stent in heavily calcified RCA
09:10-09:20	Case 2: When and how should we perform septal dilatation?
09:20-09:30	Case 3: The importance of coil in cath-lab: collateral rupture
09:30-09:40	Case 4: The wire passed but the balloon didn't, what did I do?
09:40-09:50	Case 5: How should we manage if the retrograde microcatheter did not advance?
09:50-10:00	Case 6: Our nightmare: thrombus or calcific nodule?
10:00-10:15	COFFEE BREAK
10:15-11:15	INTERESTING CASES – CTO & CHIP 4
10:15-10:25	Case 1: Which one is better; Tip-in or rendezvous?
10:25-10:35	Case 2: rCART failed, how did I manage it?
10:35-10:45	Case 3: Different perspective on pericardial tamponade
10:45-10:55	Case 4: Both Rota and IVL were required in the calcified case
10:55-11:05	Case 5: Hybrid approach in CTO: DES + DCB
11:05–11:15	Case 6: Calcified underexpansed stent restenosis: How should I manage?