



NUEVA PAGINA WEB MUY PRONTO

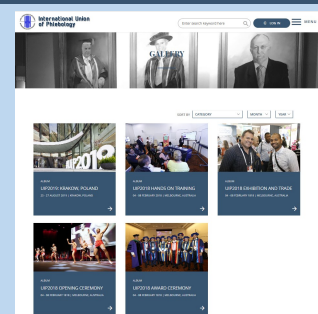
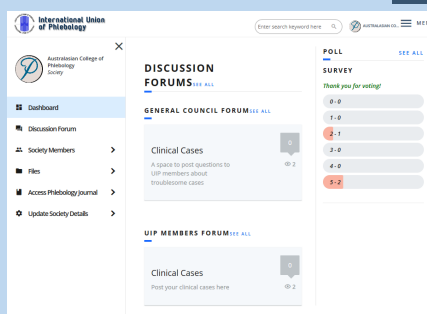
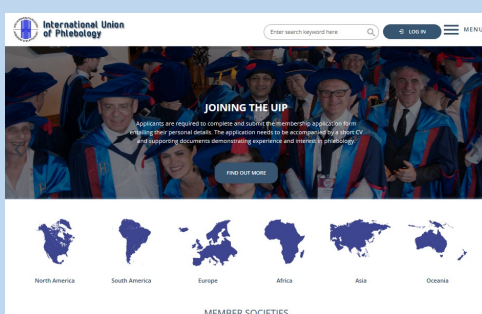
La nueva web de UIP se encuentra en sus etapas finales de desarrollo. El nuevo sitio web será una gran mejora del sitio web actual que permitirá a los miembros y las sociedades miembros:

- Solicitar unirse a la UIP
- Pagar cuotas de membresía
- Suscribirse a la revista oficial de UIP Flebología
- Ver un calendario de conferencias y eventos de flebología en todo el mundo.
- Actualizar sus detalles de membresía
- Ver fotos de eventos UIP anteriores
- Leer las últimas noticias de la UIP
- Revisar y comentar cambios

Estas son solo algunas de las mejoras en el sitio web de UIP. Lo más importante, el sitio web tendrá una nueva apariencia fácil de usar. Esperamos compartir esto con usted pronto.

EN ESTA EDICION

1. Novedades UIP
2. COVID-19: Fuentes
3. Artículo de Prof. Yung Wei Chi
4. Artículo sobre COVID19 & VTE
5. Honour Box: Prof. Ken Myers
6. Vale Dr Eugenio Brizzio
7. Sociedades UIP: Pasado, Presente, Futuro
8. Eventos: World Congress of the UIP
9. Esperando a Estambul
10. Proximos eventos



NOVEDADES UIP

FOTOS UIP

¿Tienes fotos antiguas de las conferencias de UIP? ¡No dudes en enviárnoslas! Podrían ser utilizadas con fines promocionales. Puedes hacerlo en el siguiente enlace:

<https://forms.gle/zCe1VZuaCqFYfctZ6>



SOBRE NOSOTROS

La Newsletter de UIP se ha producido y distribuido desde Sídney, Australia, con la colaboración de los miembros de la UIP.

La editora de la Newsletter de UIP, Lucía del Caz, es una profesional de Marketing de España, establecida en Sydney desde 2019.

Existen oportunidades de publicidad disponibles, y cualquier contribución o consultas son bienvenidas.

Envíanos un e-mail a:

communications@uipmail.org



REDES SOCIALES

¡Mantente en contacto!

¡Sigue nuestras cuentas de redes sociales y asegúrate de recibir notificaciones de actualizaciones, fechas límite y noticias importantes!



COVID-19: FUENTES

GOBIERNO Y ÓRGANOS MUNDIALES

- [Centres for Disease Control and Prevention \(CDC\)](#)
- [World Health Organisation \(WHO\)](#)
- [National Institute of Health](#)

FUENTES CON CONTENIDO GRATUITO DE COVID-19

- [Lancet Resource Centre](#)
- [New England Journal of Medicine](#)

DIRECTRICES Y DECLARACIONES DE POSICIÓN

A pesar de no haber sido escrito teniendo en cuenta específicamente la Flebología, varios organismos han desarrollado una serie de recursos útiles que pueden ayudarlo

International Society of Ultrasound in Obstetrics and Gynaecology:

- [ISUOG Position Statement](#)
- [Webinar series on COVID-19](#) (Including topics such as how to clean your equipment properly)
- [Resources in French, German, Romanian, Portuguese, Chinese, Italian, Spanish, Ukrainian and Czech](#)

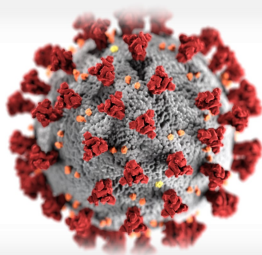
Articulo de Prof. Yung Wei Chi

Compression Use in COVID Time

YUNG-WEI CHI—UNIVERSITY OF CALIFORNIA, DAVIS, VASCULAR CENTER

Throughout human history, world events destroyed, shaped, and built societies. In the last century, no event had such wide impact than the current COVID-19 crisis. It brought nations to its knee and subjected all man kind equally. But disparity still exists! Using the United States as an example, COVID-19 affected African Americans and Hispanic Americans especially hard. Until now, no genetic preference was found to affect or protect one from COVID's wrath. More and more evidence pointed toward crowded living conditions, 1st line working environment requiring face to face interaction and etc. as ingredients for the high viral exposure rate in these 2 racial groups.

As phlebologists, an unique aspect of COVID-19 attracted our attention, venous thromboembolism (VTE). Published literature thus far raised the alarm on the high VTE incidence in COVID-19 patients, 27% and up, despite of standard VTE pharmaco-prophylaxis¹. To put it in perspective, H1N1 infection in 2009 had a high rate of VTE, but it was only 13%². Many hypotheses have been postulated but the only real fact is that our current VTE thromboprophylaxis strategy failed miserably. Obviously various dosing regimen whether prophylactic vs. therapeutic vs. subtherapeutic dosing are still being studied without conclusive evidence as to one is better than the other. On top of this confusion, many COVID-19 patients at high VTE risk are also subjected to high risk of bleeding especially in the Asian population. As phlebologists and clinicians, we need to do the best we can for our patients. In light of this dilemma, we need all the gadgets available for us to care for these patients. Compression therapy including intermittent pneumatic compression pump, compression stockings and compression wraps, is an obvious tool. Despite of the negative result of the PREVENT³ and GAPS⁴ trial suggesting adding intermittent pneumatic compression pump did not offer patients additional benefit in addition to standard VTE pharmaco-prophylaxis, meta-analysis offered a contrary conclusion.



To sum this up, there are still many unknowns in COVID-19 and until we have a better handle on the high VTE rate in COVID-19, all tools including compression therapy should be available at the hands of the care provider. Needless to say, the recommendation was according to the ICC guideline published in 2018⁵. Moreover, research on COVID-19 remedy should address not only the scientific but also social disparity amongst racial groups as previously described and not assume if a therapy is good for one, it must be good for all.

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Articulo sobre COVID19 & VTE

Sclerotherapy and Coagulation in COVID Time

GIANESINI S¹ — University of Ferrara, ITALY - USUHS University, USA
CONNOR D, PARSI K¹ — University of New South Wales, AUSTRALIA

Covid-19 pandemic and its correlation with vasculitis¹ and venous thrombosis² has raised concerns about safety of superficial venous procedures among vein specialists, in particularly regarding sclerotherapy induced thrombosis.

The topic of sclerotherapy and thrombosis was well investigated back in 1992 when Suzuki demonstrated a prolongation of prothrombin and activated partial thromboplastin time rather than an increased thrombotic risk following sclerotherapy of dog esophageal varices.³

The *in vitro* evaluation of the interaction of human blood with detergent sclerosants demonstrated that higher sclerosant concentrations have anti-coagulant activity⁴ and that a trimodal effect can be observed in the sclerosant-induced clot formation, depending on the sclerosant concentration: high concentration-no clot formation, medium concentration-weak clot formation, low concentration- strong clot formation.⁵

Moving from the bench to the bedside, a distant-dependent effect of sclerosants on procoagulant activity has been demonstrated. The same investigation reported foam sclerotherapy induced D-Dimer elevation, even at one week after the injection, with no variation of other systemic clotting tests.⁶ This data suggests caution in the D-dimer use as thrombosis diagnostic tool in patients who recently underwent sclerotherapy since potentially representing a false positive. Another investigation performed on sclerosed reticular veins also confirmed no variation in clotting times.⁷

These observations are in line with the data showing the difference between thrombosis and sclerosis. Histologically sclerosis is a fibrotic occlusion secondary to collagen and fibrous tissue deposition, whereas thrombosis is due to fibrin generation. While thrombus can embolize, fibrosclerosis is a local occlusion. D-dimer levels can guide in the interpretation of sclerosis (<1µg/mL) vs thrombosis (>1µg/mL).⁸

Thrombosis has been reported after sclerotherapy, but with a significantly low incidence and with a significant risk factor in >10 mL volume injections.^{9,10} Expertise is needed in order to perform safe and effective sclerotherapy. In such condition, even patients at thrombotic risk can be treated, as demonstrated by Hamel-Desnos¹¹ and Ikeda.¹²

A special attention in the thrombotic risk assessment of each and every patient is specially needed in this challenging COVID time. The Caprini Score has been updated taking into the consideration 2 extra points for the asymptomatic positive and 3 points for the symptomatic positive (5 points in case of also D-dimer elevation).¹³ Proper risk/benefit assessment must be performed before performing whatever procedure. In this decision process, a triage system has been proposed by the International Union of Phlebology and remains at disposal of all veins practitioners.¹⁴

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HONOUR BOX: PROF KEN MYERS

PROF. KEN MYERS: *BIOGRAPHY*

Ken Myers graduated in Melbourne, Australia, in 1957 and gained his surgical qualifications in 1962.

After training at the Royal Melbourne Hospital, he spent two years in the Professorial unit at St Mary's Hospital, London, and one year at Presbyterian St Luke's Hospital, Chicago.

On return to Melbourne, he was appointed as surgeon to Prince Henry's Hospital and later to the Monash Medical Centre to become Head of the Department of Vascular Surgery.

While working as a general vascular surgeon, he had a particular interest in venous disease and for the last 20 practising years worked exclusively as a phlebologist.

- ◇ He has been Chancellor of the Australasian College of Phlebology.
- ◇ He has written textbooks on arterial surgery, vascular ultrasound and venous and lymphatic diseases as well as books on non-medical topics.
- ◇ He has been involved in writing some 200 articles and book chapters. As well as many studies of venous disease by ultrasound, he introduced all current endovenous ablation techniques to Australia.



Prof Ken Myers
Australia

Australian Phlebology and St Mary's Hospital, London. GROWTH OF THE SCIENTIFIC METHOD

When I was training to be a surgeon in Melbourne, Australia, it was traditional to spend a term in the United Kingdom. I was able to secure a scholarship to work at St Mary's Hospital in Praed Street, Paddington, London with Professor William Talbot Irvine. Until then, my teaching had been the traditional 'we've always done it this way and it works all right so that's what you do'. Bill Irvine was of a new school of 'Scientific Surgery'. His constant exhortation over the next two years was 'give me data, Myers, give me data'. Bill Irvine wrote a book 'The Scientific Basis of Surgery' and he asked if I would proof-read it. Some wag advised me that the only way to do this without becoming absorbed in the content was to read it backwards and I foolishly did so - perhaps the only person ever to read a large textbook beginning at the end.

Many Australians had preceded me. The earliest to do so that I had worked with was 'Weary' Dunlop who was with Arthur Dickson Wright when World War II broke out. He was to become the hero of the Burma Railway prisoner of war camp and later Sir Edward Dunlop, Australia's second most famous son after Sir Donald Bradman, cricketer. Others from my graduation year in Melbourne also worked in England.

John Royle was with Peter Martin in Essex and returned to Australia to be a leader in venous surgery and later President of the Australasian College of Surgeons. Peter Morris worked for a short time at Mary's but became involved in transplantation in Boston and was appointed Professor of Surgery in Oxford and later became Sir Peter Morris, President of the Royal College of Surgeons. Other prominent Sydney phlebologists were Peter Conrad who worked at the West Middlesex Hospital and Peter Halliday at St Thomas's. Bill Campbell from Brisbane joined John Royle in Essex and spent time learning sclerotherapy with George Fegan in Dublin.

I arrived from Melbourne as a registrar with Bill Irvine at Mary's in January 1964. Over the next two years Bill infused into me the fun that could be had from the scientific scrutiny of what we do, a mantra that has stuck with me to this day. Ever since I have obsessively recorded data for everything that I do for ultrasound findings, clinical procedures and clinical outcome, just as Bill would have wanted. Sorting these in a database allowed findings that would otherwise not have occurred to me and which apparently have been of interest to others on occasions. It has allowed me to become friends with like-minded phlebologists around the world, invited to join them at far-

HONOUR BOX: PROF KEN MYERS

flung meetings for me such as Buenos Aires with Roberto Simkin and Bologna with Attilio Cavezzi. I gave a paper in Argentina on ultrasound findings for venous tributaries only to have my friend Massimo Cappelli in discussion give reasons to tell all that everything that I had said was wrong, a predicament sorted out over morning tea.

A fellow registrar in 1964 was John Hobbs, sadly recently departed. Bill Irvine ordered us to his office and said that he wanted us to set up a Vascular Laboratory. We said 'sure Prof but what is it?' He explained and we established what was perhaps the first in Britain although Gene Strandness and Dave Sumner were well before us in America. We invited Terry Needham to join as technician and he initially turned us down saying that he could see no future in the project. However, he then relented as he had nothing else to do at the time and he went on to become a pioneer in blood flow research and non-invasive investigations in the UK and vascular ultrasound in America. The room that we were given was next to the office where Sir Alexander Fleming had discovered penicillin, but while we were there it was used as a broom cupboard. Michael DeBakey from Houston led a group of American surgeons to visit Mary's and they made a pilgrimage to the room only to be appalled to find that it had not been made into a shrine. This has subsequently been rectified. Almost every unit in the hospital had a vascular inclination. As well as the Professorial Unit, the other vascular team was headed by HHG 'Felix' Eastcott, a pioneer in carotid artery surgery, and even the Urology unit was headed by vascular surgeon Ken Owen who was a world authority for renal artery surgery. After I left, my position was replaced by Jim Yao from Chicago who developed the Ankle/Brachial Pressure Index (ABI). It was several years before we finally met, at a meeting in Sydney, and it was rather like Stanley meeting Livingstone in Tanganyika.

Bill Irvine arranged for George Fegan from Dublin to visit and encouraged John Hobbs to develop an interest in varicose veins. From this was born a rivalry between Fegan and Hobbs that entertained us for the rest of their lives. George was adamant that John had stolen his techniques which was not true, and they fed off each other to get their kicks ever after. In keeping with the Mary's tradition, John evaluated his results in the first and possibly only scientific comparison between sclerotherapy and surgery which remains a classic. His results came down in favour of surgery although this would possibly not be the case if it were repeated now.

Praed Street that fronted the hospital specialised in shops selling pornographic literature. Without knowing this, I entered one and asked if they had any travel books upon which I was led into a back room to check out some books in plain brown wrappers. Everyone smoked in those days and the cheapest cigarettes were Woodbines. People was fairly poor and were catered for by a bowl of them cut in halves. For a cheap quick drag one half Woodie could be bought for a penny. I personally gave up when we discovered that continued smoking markedly reduced long-term patency rates for femoropopliteal vein bypass grafts,

studied with life table analysis techniques that I had learned at Mary's.

I returned to Melbourne to a practice in vascular surgery and later exclusively in phlebology and I set up a vascular laboratory that later evolved into an ultrasound unit. I kept in contact with the many friends that I had made in London. In 1985 I accepted an invitation from Andrew Nicolaides to be 'Associate Director' in the Irvine Laboratory for Cardiac and Vascular Research at St Mary's and I stayed there for a wonderful 12 months. Andrew had been recruited by Bill Irvine, the unit had been established by Felix Eastcott in Bill's memory when he died, and Andrew was appointed as its director. Over the next twenty years or more, Andrew working at Mary's used his meticulous scientific approach to explore almost every aspect of vascular disease and in particular phlebology. He has had in a hand in almost every aspect of what we now understand about venous haemodynamics in health and disease. My year in the unit had me working with young researchers from all over the world many of who gained positions of considerable eminence. José Fernandes e Fernandes went on to be Professor of Surgery in Lisbon. Dimitris Christopoulos developed air plethysmography and as his guinea pig I whipped my trousers off to be the first ever studied by the technique. Gianni Belcaro returned to Italy to conduct many community studies in venous disease. I was also exposed to the clinical side with vascular surgeon Felix Eastcott and neurologist Sir Roger Bannister, the first athlete to run the sub- four-minute mile. The vascular unit was as strong as ever headed by Averil Mansfield and John Wolfe. Hugh Dudley was Professor of Surgery having moved from a similar position in Melbourne. Several Australians were working in the vascular unit or the Irvine laboratory while I was there. Michael Grigg from Melbourne developed what was possibly the first method to produce true foamed sclerosant later perfected by Lorenzo Tessari with Cavezzi and Frullini. Mark Malouf from Sydney worked with John Hobbs and returned to Australia to become President of the Australian and New Zealand Society of Phlebology, a leader in the field to this day. Andrew Lennox from Sydney later did much work in the unit and returned to Sydney to further develop endovascular surgery.

There have been many Australian surgeons to work at Mary's at other times including Mike Appleberg, John Frawley, John Harris and Rod Lane from Sydney, Sam Melick from Brisbane, John Ludbrook from Adelaide and Campbell Miles from Melbourne, together with a few I'm sure that worked there without my knowing. It is more than ten years since I last visited, and all has changed since Andrew left the Irvine unit and rationalisation of London hospitals abolished the vascular identity of St Mary's. For me it is the place where I spent some three years that more than any other experience shaped any contribution to phlebology that I may have made. The scientific approach to phlebology is now fully accepted but this was far from the case back in 1964 or even in 1985. To my mind, this current scientific method in phlebology that I have followed throughout my career is in no small part the result of work at Mary's by the likes of my Professor, Bill Irvine, and his successor, my good friend Andrew Nicolaides.

VALE DR EUGENIO BRIZZIO



*El **Dr. EUGENIO BRIZZIO** nació en Buenos Aires el 6 de abril de 1938. Fue alumno de la Universidad Nacional de Buenos Aires (La Universidad de Buenos Aires), se graduó en 1962. Lamentablemente falleció el 24 de agosto de 2020, a los 82 años. Fue un médico muy apasionado, amable y trabajador. Fue miembro de múltiples sociedades y fue bien conocido por su trabajo en Elastocompresión.*

Como sabemos, trabajar como médico no es tarea fácil. Requiere compromiso, mucha dedicación y un gran corazón para querer ayudar a los demás. Mejorar la vida de los demás requiere una persona muy desinteresada. El Dr. Brizzio encarnó estos rasgos, trabajando incansablemente para ayudar a sus pacientes y a otras personas. Logró tanto durante su tiempo, como ser el presidente de SAFYL durante 1990-92, y dos veces vicepresidente de la UIP entre 1994-98 y 1998-2002. Hizo todo lo posible para ayudar a los demás, lo extrañaremos. Después de años de dedicación para ayudar a los demás, finalmente está descansando, está en un lugar mejor.

UIP SOCIETIES PASADO, PRESENTE AND FUTURO

Cada mes, la UIP planea presentar información sobre sus sociedades en su boletín e incluir información sobre el pasado, presente y futuro de cada sociedad. Este mes nos enfocamos en la **Sociedad Cubana de Angiología y Cirugía Vascular**.

SOCIEDAD CUBANA DE ANGIOLOGÍA Y CIRUGÍA VASCULAR

FUNDADORES

- Prof. Jorge B. Mc. Cook Martínez
- Prof. José A. Bidart Labourdette
- Prof. Delia E. Charles-Edouard Otrante
- Prof. Carlos Villar Rentería
- Prof. Arquímedes Sedeño Argilagos
- Prof. Andrés Casanova
- Prof. Francisco Hernández Guerra

DATOS DE SU FUNDACIÓN

El 16 de febrero de 1953, la inicial Sociedad Cubana de Angiología, crea las primeras bases como una filial de la Sociedad Internacional de Angiología, la cual no fue aceptada por el Ministerio de Justicia. En el 1959, es llamado por el Ministerio de Salud Pública, el Prof. Jorge B. Mc. Cook Martínez, a organizar la especialidad como rama de la Cirugía General, creándose así, oficialmente, la Angiología y Cirugía Vascular. A partir de entonces comienzan a realizarse los pasos organizativos de la misma. En el año 1971, se celebró un Congreso Nacional de la especialidad; en el Ministerio de Salud Pública, La Habana, donde la presencia de otra figura fundadora de la especialidad en España, estuvo presente, el Prof. Fernando Martorell.

La Sociedad fue fundada y acentada en el Ministerio de Justicia, en el año 1963, con los objetivos de lograr la interrelación entre sus especialistas con las especialidades afines y sus ciencias básicas, y a la vez; como un modo de vincular la especialidad a nivel internacional. Ella y sus Filiars Provinciales, han patrocinado múltiples Congresos, Jornadas y Simposios de Nivel Nacional, Provincial e Internacional, trabajando siempre para poder contar en sus congresos nacionales con figuras connotadas en el campo de la especialidad a nivel mundial.



PRESIDENTES QUE HA TENIDO LA SOCIEDAD

- Jorge B. Mc Cook Martínez 1963-1967
- José A Bidart Labourdette 1967-1970
- Jorge B. Mc Cook Martínez 1970-1975
- Pedro A. Brunet Pedroso 1975-1977
- Enrique Uguet Bonet 1977-1980
- Miguel A Martínez Griñán 1980-1982
- Rafael Castellanos Gutiérrez 1982-1984
- Jorge B. Mc Cook Martínez 1984-1990
- José I. Fernández Montequín. 1992-2006
- Juana M. Quiñones Castro. 2006-2017
- Calixto Valdés Pérez. 2017-2019
- **Osvaldo Eliseo Mussenden 2019 (Current President).**

OTROS MIEMBROS ACTUALES MAS ANTIGUOS

- Pedro D. Beauballet Fernandez
- Carlos S. Durán Llobera.
- Rubén T. Moro Rodríguez.
- Héctor T Álvarez Duarte.
- Carlos Rodríguez Valdés-Faully
- Daisy Acosta Lapera.
- Máximo Sáñez López.
- Orestes Díaz Hernández.
- Carlos del Risco Turiño.
- María de J. Bustillo Santandreu.
- Jesús Tejidor Fernández.
- Sergio L. Fernández Odicio.
- Lilia E. Wednesday Cazate.
- Arturo J. Pérez Chambers.
- Pedro González Scull.

SOCIEDADES Y ASOCIACIONES CIENTIFICAS EXTRANJERAS RELACIONADAS CON LA NUESTRA

- International Society of Cardiovascular Surgery.
- Latin American Chapter of Cardiovascular Surgery.
- International Union of Angiology.
- International Union of Phlebology.
- Latin American Venous Forum.
- Spanish Speaking Vascular Surgeons.
- Latin American Association of Vascular Surgery and Angiology (ALCVA).
- Latin American Cooperative Group for Hemostasis and Thrombosis (CLAHT)

DIRECTIVA ACTUAL DE LA SOCIEDAD

- President: Prof. Osvaldo Eliseo Mussenden.
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- Secretary: Ms. C Maria Eugenia Triana Mantilla
- Vice. Dr. Ridel Febles
- Treasurer: Dr. William Savigne. Gutierrez.
- Vice. Dr. Luis Rodríguez Villalonga
- Honour Member: Dr. José Ignacio Fernández Montequín'

EVENTOS WORLD CONGRESS OF THE UIP

ESTAMBUL TE ESPERA PARA EL XIX CONGRESO MUNDIAL DE LA UNION INTERNACIONAL DE FLEBOLOGIA

Estambul, la ciudad más poblada y más importante de Turquía en términos culturales y económicos, es una de las ciudades más antiguas del mundo. Los hallazgos arqueológicos que han surgido recientemente indican que el primer asentamiento en la ciudad data de al menos 8500 años. Como anfitrión de muchas culturas y civilizaciones diferentes, así como de personas de diversas razas, religiones, culturas e idiomas a lo largo de los siglos, Estambul siempre ha conservado su sensación cosmopolita.

Estambul es tanto una capital mundial ahora como lo fue en el pasado. Un claro ejemplo de ello es la representación multicultural para el XIX Congreso Mundial de la Unión Internacional de Flebología, que se celebrará en 2023 en esta hermosa ciudad. Muchos especialistas internacionales de todo el mundo se reunirán y tendrán la oportunidad de debatir e intercambiar conocimientos sobre aspectos relacionados con flebología y llegar a una amplia gama de profesionales en todos los campos relacionados, lo que le permitirá expandirse a nuevos mercados, así como disfrutar de la belleza y glamour de esta ciudad.

28 SEPTIEMBRE

- 2 OCTUBRE

2021

Registrate en:

<https://www.uip2021.com/registration/>



www.uip2021.com

XIX WORLD CONGRESS OF THE INTERNATIONAL UNION OF PHLEBOLOGY

September 28th - October 02nd, 2021

Lütfi Kırdar Convention and Exhibition Center - ICEC Istanbul

The bosphorus awaits you

Turkey

Mantente informado y
siguemos en nuestras
redes sociales



/uipistanbul2021

ESPERANDO A ESTAMBUL



XIX WORLD CONGRESS OF THE INTERNATIONAL UNION OF PHLEBOLOGY

Lütfi Kırdar Convention and Exhibition Center - ICEC, Istanbul / Turkey



Save the Date!



Dear Colleagues,

It is with honor and the greatest of pleasure I invite you to the XIX World Congress of the International Union of Phlebology, in the wonderful city of Istanbul.

The congress will be held in the splendid "Congress Valley" of Istanbul between 28 September – 02 October 2021.

In this international congress, many international specialists will come together and have the opportunity to discuss and exchange opinions on every aspect of phlebology related matters. I believe that the topics to be addressed in this congress and the results will make great contributions to our profession, considering the scope of the congress and the level of participation.

Please make sure that you find the time to enjoy one of the most beautiful cities in the World: Istanbul. Congress Organization will offer you the best support and I believe you will enjoy a great congress and a great city.



Dear Friends,

It is my great pleasure as the President of the UIP to invite you to the 2021 UIP World Congress of Phlebology (28th September-2nd October).

With more than 70 member societies from across 5 continents, UIP is the peak body representing phlebology on a global level. The UIP World Congress will draw the world's top key opinion leaders (KOLs) in venous and lymphatic disease, while providing a great opportunity for young vascular specialists to meet, greet, be inspired, encouraged and energised.

Turkey with its amazing ancient culture and beautiful natural scenery will be a fabulous and exotic destination. The splendid city of Istanbul, the old Capital of the Byzantine and Ottoman empires, the city that bridges Europe to Asia, will be an incredible host city. I invite you to sponsor, exhibit and support this amazing event and partner with thousands of young phlebologists from Europe, Middle East, Asia and North Africa who will find Turkey an easy to reach destination and Istanbul a wonderful city to visit. Phlebology is a multi-disciplinary field drawing membership from vascular, general and plastic surgery, interventional radiology, vascular medicine and angiology, lymphology, haematology, dermatology, cosmetic medicine and surgery, sonography and nursing. The UIP World Congress will provide you a great opportunity to reach a wide range of professionals in all related fields, allowing you to expand into new markets.

I have no doubts that the 2021 UIP World Congress of Phlebology under the leaderships of Prof. A. Kursat Bozkurt and Dr. Serdar Bayrak and the Turkish Society of Phlebology will be a well-organised, well-attended, grand and glamorous event. The Congress venues are within the walking distance of the city centre. The Headquarter hotel, Hilton Istanbul Bosphorus, will take you back to the golden age of Hollywood. Be prepared for glamour!

Turkey will welcome you with open arms.

See you all in Istanbul!

El borrador del programa para la reunión, incluidos los temas, se ha publicado y puede encontrarlo en el siguiente enlace:
<https://www.uip2021.com/scientific/program-at-a-glance/>

PRE-CONGRESS PROGRAM				CONGRESS PROGRAM			
DATE	TIME	TOPIC	LOCATION	DATE	TIME	TOPIC	LOCATION
28 SEP	08.00	Registration	ICEC	28 SEP	08.00	Registration	ICEC
28 SEP	08.30	Breakfast	ICEC	28 SEP	08.30	Breakfast	ICEC
28 SEP	09.00	UIP General Session	ICEC	28 SEP	09.00	UIP General Session	ICEC
28 SEP	09.30	Plenary Session	ICEC	28 SEP	09.30	Plenary Session	ICEC
28 SEP	10.00	Plenary Session	ICEC	28 SEP	10.00	Plenary Session	ICEC
28 SEP	10.30	Plenary Session	ICEC	28 SEP	10.30	Plenary Session	ICEC
28 SEP	11.00	Plenary Session	ICEC	28 SEP	11.00	Plenary Session	ICEC
28 SEP	11.30	Plenary Session	ICEC	28 SEP	11.30	Plenary Session	ICEC
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28 SEP	15.30	LUNCH	ICEC	28 SEP	15.30	LUNCH	ICEC
28 SEP	16.00	LUNCH	ICEC	28 SEP	16.00	LUNCH	ICEC
28 SEP	16.30	LUNCH	ICEC	28 SEP	16.30	LUNCH	ICEC
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28 SEP	81.30	LUNCH	ICEC	28 SEP	81.30	LUNCH	ICEC
28 SEP	82.00	LUNCH	ICEC	28 SEP	82.00	LUNCH	ICEC
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ESPERANDO A ESTAMBUL

Congress Venue ICEC: Istanbul Lutfi Kirdar Convention & Exhibition Center



Istanbul Lutfi Kirdar - ICEC, situated in the heart of the congress valley of Istanbul, has the capacity to host all kinds of organizations from conventions to fairs, from concerts to exhibitions with its halls filled with natural daylight and superb views over the Bosphorus located within the cross section of Istanbul's elegant restaurants, luxury brands and fashion district.



There are many three-, four- and five-star hotels within walking distance to Istanbul Lutfi Kirdar - ICEC and its location provides easy and fast transportation to the important historical places of the city.

REGISTRATION IS NOW OPEN!

Full Registration Type	Standard Registration	Late Registration	On Site Registration
	Until 31/12/20	From 31/12/20	From 20/09/21
Fulltime Physician	\$ 1070 USD	\$ 1120 USD	\$ 1220 USD
Fulltime Physician - Developing Countries*	\$ 550 USD	\$ 580 USD	\$ 680 USD
Fulltime Nurses / Sonographers / Scientists / Post Graduate Students	\$ 290 USD	\$ 340 USD	\$ 440 USD
Fulltime Registrars / Residents/ Trainee Doctors	\$ 450 USD	\$ 480 USD	\$ 580 USD
Fulltime Medical / Under graduate Student	\$ 50 USD	\$ 50 USD	\$ 150 USD
Accompanying Person	\$ 95 USD	\$ 120 USD	\$ 220 USD
Exhibitor	\$ 260 USD	\$ 260 USD	\$ 300 USD

DELEGATE TYPES

Vascular Surgeons
Hematologists
Cardiovascular Surgeons
Interventional Radiologists
Dermatologists
Cosmetic Physicians
Plastic Surgeons
Sonographers
Nurses

LAST 5 UIP WORLD CONGRESSES

Melbourne, Australia (2018)
Boston, USA (2013)
Monte-Carlo, Monaco (2009)
Rio de Janeiro, Brazil (2005)
Rome, Italy (2001)

FULL REGISTRATION INCLUDES

- Access to the congress sessions
- Access to the industry exhibition and poster area
- Welcome reception
- Congress bag
- Access to congress abstracts
- Electronic book
- Bosphorus tour

SOLO
event

ORGANISATION SECRETARIAT

SOLO EVENT

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E-mail: uip2021@soloevent.net

www.uip2021.com

XIX WORLD CONGRESS OF THE INTERNATIONAL UNION OF PHLEBOLOGY

Istanbul, Turkey



Save the Date!



www.uip2021.com

Galata Tower

PROXIMOS EVENTOS

Una de las principales visiones de UIP es promover relaciones productivas entre las sociedades. Con esta visión, informamos ambos eventos, con auspicios UIP y sin ellos, para informar a todos sobre posibles actividades educativas. La esperanza también es ofrecer una herramienta útil para los compañeros que organizan reuniones futuras, para evitar la superposición de eventos.

SEPTEMBER 2020	OCTOBER 2020	NOVEMBER 2020	APRIL 2021
62nd Annual Conference of the German Society of Phlebology 2nd– 5th September, 2020 Leipzig– Germany	XVI Congress of Brazilian Association of Phlebology and Lymphology and IX Brazilian International Meeting of Phlebology (BIMEP) 15th– 17th October, 2020 Sao Paulo - Brazil	International Compression Club Annual Meeting 20th November, 2020 London - UK	Buenos Aires 2021 XII International Congress of the Latin American Venous Forum 7th-9th April, 2021 Buenos Aires - Argentina

AVLS 2020 Congress

15th– 18th October, 2020
Washington DC- EEUU



MAY 2021	JUNE 2021	SEPTEMBER 2021
ACP2021 21st Annual Scientific Meeting of the Australasian College of Phlebology 8-11th May, 2021, Auckland - New Zealand	FLEBOPANAM 2021 Pan American Congress 2020 Phlebology and Lymphology 10– 12 th June, 2021 Guayaquil - Ecuador	UIP 2021—XIXth WORLD CONGRESS OF THE UIP 28th September– 2nd October Istanbul - Turkey
1ST VEINS INTERNATIONAL CONGRESS VIENNA VIC Vienna Minimally Invasive Venous Surgery 28th May, 2021 Vienna, - Austria	ANNUAL MEETING OF THE BENELUX SOCIETY OF PHLEBOLOGY: The Swollen Leg 4– 5 th June, 2021 Leuven, Belgium	
		SEPTEMBER 2023 UIP 2023—XXth WORLD CONGRESS OF THE UIP 17th– 21st September 2023 

SOME EVENTS HAVE BEEN POSTPONED UNTIL UNKNOWN DATES DUE TO COVID-19

For more information about events visit:

<http://www.uip-phlebology.org/events/category/event-list/>

If you would like your event to appear in the UIP Newsletter, contact us on communications@uipmail.org

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