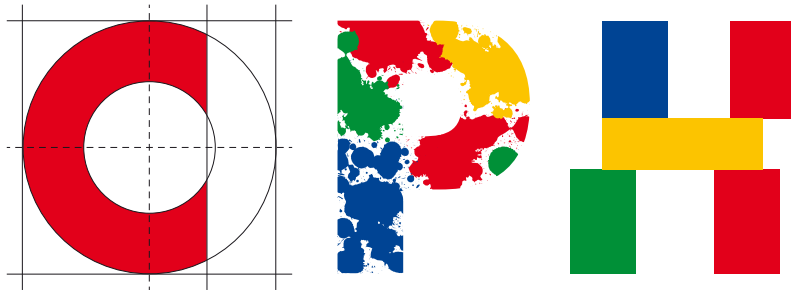


19th Congress of the European Society for Organ Transplantation

September 15 - 18, 2019
Copenhagen, Denmark

ESOT CONGRESS **2019** INSPIRING MINDS, DRIVING PROGRESS *in* COPENHAGEN



The CREATIVE CAPITAL

Second Announcement



FIVE PILLARS OF THE ESOT 2019 CONGRESS



TEN REASONS TO ATTEND

- 1 Be inspired
- 2 Drive progress
- 3 Explore the edge of our current practice and achievements
- 4 Discuss with experts and innovative thinkers about Why vs Why Not?
- 5 Interact with peers and pave the way forward together
- 6 Master the latest trends of basic and translational science
- 7 Explore how to manage career development
- 8 Attend dedicated tracks to maximise the learning experience
- 9 Share your research and be selected for focused discussions – guided and instructed by key opinion leaders in the field
- 10 Get engaged in this interactive meeting and take an active role in shaping the future of transplantation research and clinical practice

WHO SHOULD ATTEND?

The target audience for this conference includes all fields involved in health care and research with an affiliation in transplantation. This includes but is not limited to:

- Transplant surgeons
- Physicians of all fields with an involvement in transplantation
- Coordinators, Nurses
- General surgeons and clinicians with an interest in transplantation
- Transplant scientists
- Nutrition and rehabilitation specialists and coordinators
- Transplant pharmacists

Further, health care professionals with an involvement in treatment of organ failure, cell therapy, tissue and regenerative medicine are warmly welcome to our conference.

Dear Colleagues, Dear Friends,

The 19th Congress of ESOT will take place in Copenhagen, the beautiful capital of Denmark. The ESOT 2019 Congress will cover all areas of transplantation, both basic science and clinical aspects. Some of the major topics of the Congress will be: from ancient legends to modern miracles, the importance of advances in molecular medicine for solid organ transplantation, and tissue engineering. These, together with other hot topics from all areas of transplantation will be presented in a program developed by world leading transplant physicians, surgeons and scientists.

Solid organ transplantation has a long history in Denmark. Kismeyer and Simonsen are among the real pioneers developing Transplant Immunology since the early sixties. Since then, all types of organ transplantation have evolved in Denmark to high international standards. We are therefore delighted and honoured that ESOT selected Copenhagen for its prestigious Congress. Copenhagen is an ideal congress city, known to be a safe, eco-friendly and bike friendly capital city. It has extensive green areas and a harbor so clean that you can swim in it. Transportation from the modern congress centre to the city is easy and short, so time can be spent efficiently. After an intense day at the Congress, relaxation in cosy Copenhagen will be a delight. Get inspired by award winning new Nordic cuisine, the impressive mixture of historic and modern Danish design and architecture, Royal Castles, see the Little Mermaid or take a tour through the old canals.

On behalf of the Danish Transplantation Society and on behalf of the Congress Organizing Committee we warmly welcome you to ESOT 2019 in Copenhagen.

Allan Rasmussen and Finn Gustafsson
Congress Chairs

Dear Colleagues, Dear Friends

We are truly delighted to cordially invite you to be Inspired and experience real Progress at the ESOT Congress in Copenhagen, a transplant meeting of truly great scientific substance delivered in great ESOT style!

The philosophy behind every ESOT Congress is that every two years we produce a totally New Congress in content and format; ESOT 2019 Copenhagen not only follows this rule but aspires to be the best transplant congress ever! ESOT 2019 Copenhagen is designed to be Your Congress, tailoring and targeting its content to the discipline that you serve, the stage of your career journey in transplantation and your professional aspirations.

Knowledge will be delivered through a plethora of networking opportunities leading to new collaborations so that the end of the Congress will mark many new beginnings in transplantation. We aim to explore the edge of our current practice and achievements and also challenge each other about great things that have not yet happened, ask ourselves, Why Not? And pave together the way forward.

Looking at the hot topics of the Congress (which are just the appetisers for a great feast...), we will learn from history and each other, make patients active partners in our endeavours, vigorously debate our ethical conduct, take deep dives in the waters of basic and translational science so that we can bring to the surface clinical solutions, admit the moments we reached our clinical limits and explore how to push them further, debate and design innovation with realism and all in the context of our palpable and substantial professional development. Furthermore, the ESOT award winning Digital Congress Innovations have now reached new heights and they are designed to bring people together (even if they are not physically at the Congress!), maximise their interaction and advance their knowledge. Last but not most certainly not least, all these are going to happen in Copenhagen, a dream city that can make those who adore classic fairy tales and the enthusiasts of modern miracles equally happy and in the Bella Conference Centre that is designed to make your time at the Congress Productive and Enjoyable. Join us in Copenhagen!

Be Inspired and Drive Progress!

Vassilios Papalois and Allan Rasmussen
Scientific Program Committee Chairs

FIND OUT WHAT'S NEW:

- Machine Perfusion and VAD Contest
- Organ Reconditioning
- Regenerative Medicine
- Stem cells and Gene Editing: a disruptive wedding
- ‘Omics’ technologies in Transplantation
- The unthinkable donors and recipients
- The Patient definition
- Cross-specialty learning
- Empowered transplanters can get to the TOP
- How to navigate the environment of Regulatory authorities and Bodies

AND MUCH MORE ON THE FORMAT:



Campfires

The chance to interact with the speaker and your peers in small group sessions based on informal discussion.



Hot topic tables

Take advantage of valuable peer-to-peer learning with small, moderated discussions with your peers on topics relevant to you.



Education Track

Absorb the vision and expertise of Big Players at classroom-style learning sessions



The Buddy System

Connect “First time” ESOT Congress participants with experienced attendees.



Arenas

Debating cutting edge topics

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SCIENTIFIC PROGRAMME OVERVIEW

SATURDAY,
SEPTEMBER 14
UEMS/ESOT
EXAMS



SUNDAY, SEPTEMBER 15

		SPECIALTY UPDATE SYMPOSIA									
9:00 12:50		EDTCO	YPT	ELITA	EPITA	EKITA	ECTTA	BSC	VCA	ELPAT	ETAHP
13:00 14:30	Moderated E-Poster	CORPORATE PARALLEL SYMPOSIA									
14:45 16:15	PLENARY 1 Be Inspired, be Driven										
16:30 17:30	EDU TRACK 1 Immunology	MDT 1 It's all about safety	ELEVATOR PITCH	REFRESHER 1 Translational Science	FOCUS GROUP			MODERATED E-POSTER			
17:30 18:00	Buddy Moment										
18:00 18:30	Networking Cocktail										

MONDAY, SEPTEMBER 16

7:30 8:00	EDU TRACK 2 Transplantation regulation 2019	FULL ORAL SESSIONS									
8:00 9:00											
9:10 10:40	SOTA 1 Microbiome in transplantation: friend or foe?	SOTA 2 Pluripotent Stem Cells Meet Genome Editing: a disruptive wedding	SOTA 3 Pharmaco Genomics. Are we ready for implementation into clinical practice?								
10:40 11:10	Coffee break										
11:10 12:40	INSPIRE & DRIVE 1 How to get to the top	BEST ABSTRACT CHALLENGE	REFRESHER 2 Learning from neighbouring specialities	FULL ORAL SESSIONS							
13:00 14:00	REFRESHER 3 Big Data	ELEVATOR PITCH	CORPORATE PARALLEL SYMPOSIA	VIDEO ABSTRACT	FUTURE LEADERS ON STAGE	MODERATED E-POSTER	FOCUS GROUP				
14:05 15:35	PLENARY 2 Single cells omics: generating an atlas to chart transplant organs										
15:35 16:00	Coffee break										
16:00 17:00	INSPIRE & DRIVE 2 Relight my fire	EDU TRACK 3 Xenotransplantation, soon a reality?	ELEVATOR PITCH	FULL ORAL SESSIONS							
17:00 17:30	THE DEVIL'S ADVOCATE	BUDDY MOMENT									
17:30 18:00	CORPORATE PLENARY SYMPOSIA										
18:00 19:30											

TUESDAY, SEPTEMBER 17

7:30 8:00	EDU TRACK 4 Machine perfusion goes prime time	FULL ORAL SESSIONS									
8:00 9:00											
9:10 10:40	SOTA 4 How to choose the right research model	SOTA 5 Small Patients, Big Challenges	SOTA 6 New imaging techniques								
10:40 11:10	Coffee break										
11:10 12:40	INSPIRE & DRIVE 3 Evidence based practice is killing the art of medicine	MDT 2 The unthinkable donor/recipient	ELEVATOR PITCH	FULL ORAL SESSIONS							
13:00 14:00	REFRESHER 4 Inflammation	CORPORATE PARALLEL SYMPOSIA	VIDEO ABSTRACT	MODERATED E-POSTER	FOCUS GROUP						
14:05 15:35	PLENARY 3 Perfect organ preservation and reconditioning - an elusive dream?										
15:35 16:00	Coffee break										
16:00 17:00	INSPIRE & DRIVE 4 What keeps me going, what makes me happy	EDU TRACK 5 Ischemia reperfusion injury - still a challenge?	THE DEVIL'S ADVOCATE	MODERATED E-POSTER	FOCUS GROUP						
17:00 17:30	CORPORATE PARALLEL SYMPOSIA		ELEVATOR PITCH	FULL ORAL SESSIONS							
17:30 18:00											
18:00 18:30	ESOT GENERAL ASSEMBLY										
18:30 19:00	BUDDY MOMENT										
19:00 20:00	RISING STARS NETWORKING COCKTAIL										

WEDNESDAY, SEPTEMBER 18

7:30 8:00	EDU TRACK 6 Regenerative Transplantation	FULL ORAL SESSIONS									
8:00 9:00											
9:10 10:40	SOTA 7 Organ allocation algorithm	SOTA 8 DCD: push the boundaries	SOTA 9 Transplant success: the patient's definition								
10:40 11:10	Coffee break										
11:10 13:00	PLENARY 4 & PRESIDENTIAL SESSION Dealing with organ failure: a change in the direction of travel?										

CONGRESS CHAIRS

Finn Gustafsson, Copenhagen, Denmark
Allan Rasmussen, Copenhagen, Denmark

SCIENTIFIC PROGRAMME

COMMITTEE CHAIRS

Vassilios Papalois, London, United Kingdom
Allan Rasmussen, Copenhagen, Denmark

MEMBERS

Erik Berglund, Stockholm, Sweden ■ **Menna Clatworthy**, Cambridge, United Kingdom ■ **Constantino Fondevila**, Barcelona, Spain ■ **Finn Gustafsson**, Copenhagen, Denmark ■ **Luuk Hilbrands**, Nijmegen, The Netherlands ■ **Franz Immer**, Bern, Switzerland ■ **Ina Jochmans**, Leuven, Belgium ■ **Nicos Kessar**, London, United Kingdom ■ **Henri Leuvenink**, Groningen, The Netherlands ■ **Gavin Pettigrew**, Cambridge, United Kingdom ■ **Lorenzo Piemonti**, Milan, Italy ■ **Thomas Resch**, Innsbruck, Austria ■ **David Rodriguez-Arias**, Madrid, Spain ■ **Søren Schwartz Sørensen**, Copenhagen, Denmark ■ **Luca Toti**, Rome, Italy ■ **Andreas Zuckermann**, Vienna, Austria

ORGANISING EXECUTIVE COMMITTEE

Vassilios Papalois, London, United Kingdom ■ **Allan Rasmussen**, Copenhagen, Denmark ■ **Annalisa Ponchia**, ESOT CEO ■ **Erik Berglund**, Stockholm, Sweden ■ **Menna Clatworthy**, Cambridge, United Kingdom ■ **Ina Jochmans**, Leuven, Belgium ■ **Søren Schwartz Sørensen**, Copenhagen, Denmark ■ **Luca Toti**, Rome, Italy

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Finn Gustafsson, Copenhagen ■ **Mads Hornum**, Copenhagen ■ **Pernille Kofoed-Nielsen**, Aarhus ■ **Paul Krohn**, Copenhagen ■ **Carina Lund Sørensen**, Hillerød ■ **Michael Perch**, Copenhagen ■ **Vibeke Rømming Sørensen**, Copenhagen ■ **Nicolai Schultz**, Copenhagen ■ **Helle C. Thiesson**, Odense

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WITH COUNCILLORS:

Oriol Bestard, Barcelona, Spain ■ **Umberto Cillo**, Padova, Italy ■ **Frank Dor**, London, United Kingdom ■ **Luuk Hilbrands**, Nijmegen, The Netherlands ■ **Maarten Naesens**, Leuven, Belgium ■ **Xavier Rogiers**, Ghent, Belgium ■ **Olivier Thauinat**, Lyon, France

AND

Arne Neyrinck, ECTTA Chair ■ **Robert Langer**, EKITA Chair ■ **Christophe Duvoux**, ELITA Chair ■ **Eelco de Koning**, EPITA Chair ■ **David Paredes**, EDTCO Chair ■ **Emma Massey**, ELPAT Chair ■ **Henri Leuvenink**, BSC Chair ■ **Frank Dor**, EC Chair ■ **Gerald Brandacher**, VCA Chair ■ **Marjo Van Helden**, ETAHP Chair ■ **Zeeshan Ahktar**, YPT Chair ■ **Liset Pengel**, CET ■ **Rainer Oberbauer** and **Thomas Wekerle**, TI Editors in Chief



PLENARY SESSIONS (PL)

PLENARY 1 - BE INSPIRED, BE DRIVEN

Created by: Finn Gustafsson, Copenhagen, Denmark; Allan Rasmussen, Copenhagen, Denmark

KEY LEARNING | Be innovative. Be driven. Be inspired. Be Bold. Inspiration and Progress: a common denominator for Art, Business and Science

PLENARY 2 - SINGLE CELLS OMICS GENERATING AN ATLAS TO CHART TRANSPLANT ORGANS

Created by: Menna Clatworthy, Cambridge, United Kingdom; Gavin Pettigrew, Cambridge, United Kingdom

KEY LEARNING | We currently use 'omics' technologies (proteomics, transcriptomics, genomics), in transplantation to identify biomarkers, signatures, or genetic variants associated with differential outcomes. These technologies have been applied to bulk tissue or blood samples. Recent advances in genomics and informatics allow their application at the level of a single cell, using RNA sequencing and mass cytometry. These approaches are revolutionising our understanding of the cellular composition, origin and interactions within human organs and are being used to generate the first draft of the Human Cell Atlas (HCA) – an ambitious international effort. The HCA will catalogue every cell and every cell state in the human body to deliver health-transforming insights into human biology. For example, single cell RNA sequencing has already allowed researchers to identify a previously unknown type of dendritic cell in peripheral blood.

PLENARY 3 - PERFECT ORGAN PRESERVATION AND RECONDITIONING – AN ELUSIVE DREAM?

Created by: Ina Jochmans, Leuven, Belgium; Henri Leuvenink, Groningen, The Netherlands

KEY LEARNING | Perfect organ preservation – a cornerstone of transplantation – might sound like a dream ... yet, the last years have seen tremendous progress. Technology has caught up with our creative minds and we are now able to preserve organs in dynamic and more physiological conditions than static cold storage ever could. Organ perfusion is here to stay, paving the path towards perfect organ preservation and opening doors to organ reconditioning, treatment, modification, management and more. Be inspired and motivated by the most creative thinkers in the organ preservation arena and discover what they dream of.

PLENARY 4 & PRESIDENTIAL SESSION - DEALING WITH ORGAN FAILURE: A CHANGE IN THE DIRECTION OF TRAVEL?

Created by: Erik Berglund, Stockholm, Sweden; Lorenzo Piemonti, Milan, Italy; Thomas Resch, Innsbruck, Austria; Andreas Zuckermann, Vienna, Austria



STATE OF THE ART SESSIONS (SOTA)

STATE OF THE ART 1 - MICROBIOME IN TRANSPLANTATION: FRIEND OR FOE?

Created by: Menna Clatworthy, Cambridge, United Kingdom; Gavin Pettigrew, Cambridge, United Kingdom

KEY LEARNING | This is a high profile topic in biomedical research, as evidenced by the fact that many of the papers are published in the journals with the highest impact factors, Nature, Science, Cell etc.

- Diet, the microbiome and metabolism
- The microbiome and response to cancer immunotherapy
- Immunosuppression and the microbiome – do transplant medicines change our microbiome and does it matter?.
- The microbiome and rejection risk in transplantation. Is there a link?

STATE OF THE ART 2 - STEM CELLS AND GENE EDITING - PLURIPOTENT STEM CELLS MEET GENOME EDITING: A DISRUPTIVE WEDDING

Created by: Lorenzo Piemonti, Milan, Italy

KEY LEARNING | No field in health sciences has more interest than organ transplantation in fostering progress in regenerative medicine because the future of no other field more than the future of organ transplantation will be forged by progress occurring in regenerative medicine. It is extremely rare for a single experiment to be so impactful and timely that it shapes and forecasts the experiments of the next decade. Here, we will address how two such experiments—the generation of human induced pluripotent stem cells (iPSCs) and the development of CRISPR/Cas9 technology—have fundamentally reshaped our approach to biomedical research, stem cell biology, human genetics and potentially transplant medicine.

STATE OF THE ART 3 - PHARMACO GENOMICS – ARE WE READY FOR IMPLEMENTATION INTO CLINICAL PRACTICE?

Created by: Luuk Hilbrands, Nijmegen, The Netherlands

KEY LEARNING | Adequate dosing of immunosuppressive drugs is key to the success of organ transplantation. During recent years new insight have been acquired concerning the effects of pharmacogenetic variations on the disposition of commonly used drugs. However, it remains a challenge to demonstrate the clinical relevance of pharmacogenetic testing for transplant patients. A unique situation in organ transplantation is the co-existence of the genotype of the donor and that of the recipient, both potentially affecting the pharmacokinetics and pharmacodynamics of a drug. Moreover, transplant patients frequently use multiple drugs besides their immunosuppressives. The pre-emptive genotyping of a panel of established clinically relevant pharmacogenomic markers holds promise for a next step in precision medicine. In this session the following issues will be addressed:

- Is knowledge of the CYP3A4 and CYP3A5 genotype really useful in tacrolimus treated patients?
- Which genotype is relevant: recipient or donor?.
- Pharmacogenomics of triazole antifungal agents – translation into clinical practice
- Pre-emptive pharmacogenetic testing to reduce adverse drug reactions – a next step?

STATE OF THE ART 4 - HOW TO CHOOSE THE RIGHT RESEARCH MODEL

Created by: Henri Leuvenink, Groningen, The Netherlands; Gavin Pettigrew, Cambridge, United Kingdom

KEY LEARNING | Animal models have limitations, and as advances in our understanding of human transplant immunology continue, these limitations become all the more apparent. Addressing the pertinent clinical research questions, such as the nature of the B cell response that underpins chronic rejection, is likely to need ever more specialized transplant models.

STATE OF THE ART 5 - SMALL PATIENTS, BIG CHALLENGES

Created by: Nicos Kassarlis, London, United Kingdom

KEY LEARNING | Paediatric transplantation can be very challenging and is not performed in many countries. Promote discussions in collaboration with our international partners to shape a new Era.

STATE OF THE ART 6 - NEW IMAGING TECHNIQUES

Created by: Soren Sorensen Schwartz, Copenhagen, Denmark

KEY LEARNING | Traditional PET, CT, MR and ultrasound imaging have been used in relation to organ transplantation for years. However, new exciting development both in relation to tracers, in relation to analysis of data and development within the technique has occurred during recent years. Potentially it can be possible to image the immune response and the metabolic processes in transplanted organs in real time but also to dig our hidden information from traditional images. Also 3D ultrasound imaging combined with contrast may reveal new information on transplanted organs. Although largely untested in relation to transplantation, these new techniques could prove of great value in relation to organ transplantation in clinic as well as in research.

- Immune imaging in transplantation – a game changer?
- Radiomics – there is more in a picture than meets the eye
- Hyperpolarized magnetic resonance imaging – potentials and pitfalls.
- 3D ultrasound – ready for daily clinical use in organ transplantation?

STATE OF THE ART SESSIONS (SOTA)

STATE OF THE ART 7 - ORGAN ALLOCATION ALGORITHM

Created by: Franz Immer, Zurich, Switzerland; David Rodriguez-Arias, Granada, Spain

KEY LEARNING | Organ allocation is one of the key elements in-between organ donation and transplantation. As such, it takes place in a challenging framework. While it is guided by and must follow specific allocation principles, it often takes place in circumstances where time and/or information is limited, and it usually involves an interdisciplinary group of health care professionals. Additional factors that may influence the allocation process can include logistics, availability of resources, and organisational structures.

STATE OF THE ART 8 - DCD: PUSH THE BOUNDARIES

Created by: Franz Immer, Zurich, Switzerland; David Rodriguez-Arias, Granada, Spain

KEY LEARNING | How we reach our limits? Is there scope for expansion? How extended can be Extended Criteria? Is it for everybody?

STATE OF THE ART 9 - TRANSPLANT SUCCESS: THE PATIENT'S DEFINITION

Created by: Luuk Hilbrands, Nijmegen, The Netherlands; Finn Gustafsson, Copenhagen, Denmark

KEY LEARNING | Traditional outcome measures in organ transplantation include patient survival, graft survival, and graft function. Growing attention for the patient's perspective of health and disease has led to the development of patient-reported measures which can be classified into two different categories: patient-reported outcomes (PROs), usually referring to health-related quality of life, and patient-reported experiences (PREs), referring to perception of the care that was received. Tools to measure PROs and PREs are labeled PROMs and PREMs. While there is a rapid expansion of the reporting of patient-reported outcomes in various medical areas, the use in organ transplantation is strikingly limited. This session focuses on the current status of PREMs and PROMs in organ transplantation: a premise or still a promise? In addition to measuring patient-reported outcomes after transplantation, it is relevant to know what patients actually expect from a transplantation. Importantly, for successful design and implementation of patient-reported outcomes in patient management and clinical research the participation of patients is an absolute prerequisite.

- How to measure health-related quality of life in organ transplant recipients.
- Development and use of PROMS in patients with chronic kidney disease and kidney transplantation
- What do patients expect from a transplant?
- How to define a successful transplantation: the patient's perspective

INSPIRE & DRIVE SESSIONS (ID)

INSPIRE & DRIVE 1 - HOW TO GET TO THE TOP

Created by: Constantino Fondevila, Barcelona, Spain; Vassilios Papalois, London, United Kingdom

KEY LEARNING | Navigate transplant professionals as to how they can direct their efforts to advance their professional development and reach positions of responsibility leadership and esteem to shape the future of the world of transplantation.

INSPIRE & DRIVE 2 - RELIGHT MY FIRE - "GET BACK OUT THERE AND TRY IT AGAIN."

Created by: Ina Jochmans, Leuven, Belgium; Nicos Kessarlis, London, United Kingdom

Outline | What would you do if you had a history of depression, suicidal ideation or substance abuse? What would you do when 'the light just goes out' and you find yourself burned out? Learn first hand from a team of experts how mental health challenges can be recognised and overcome. Help us open the discussion on the importance of self-care and how we can break the stigma associated with mental health challenges such as burnout and depression in healthcare workers.

Key learning objectives

- Importance of self care
- Essentials of self care
- Recognising mental illness and burnout in others and yourself.
- Key components of burnout
- Developing resilience
- Encourage connection

INSPIRE & DRIVE 3 - EVIDENCE BASED PRACTICE IS KILLING THE ART OF MEDICINE

Created by: Franz Immer, Zurich, Switzerland; Vassilios Papalois, London, United Kingdom

KEY LEARNING | Advancing in transplantation is daring and practising at the edge of uncertainty. Is evidence based practice limiting risk taking, innovation and achievement? A joint session with the Centre of Evidence in Transplantation.

INSPIRE & DRIVE 4 - WHAT KEEPS ME GOING, WHAT MAKES ME HAPPY

Created by: Erik Berglund, Stockholm, Sweden; Andreas Zuckermann, Vienna, Austria

KEY LEARNING | Transplantation is most challenging and leads to personal and professional burnout. There are some great elements of transplant practice that keep transplanters going empowered them and inspire them.

EDUCATION TRACKS (EDU)

Created by Luca Toti, Rome, Italy

TRACK 1 - IMMUNOLOGY: ABCs AND BEYOND

KEY LEARNING | Immunology in transplantation: basic concepts and beyond.

TRACK 2 - TRANSPLANTATION REGULATION 2019

KEY LEARNING | Experimental treatment regimens and protocols are becoming increasingly more complex in transplantation. Broad application of new innovations requires understanding of the fundamentals of the regulatory framework.

TRACK 3 - XENOTRANSPLANTATION - SOON A REALITY?

KEY LEARNING | Xenotransplantation is one among various alternatives to human organ donation. Offering several advantages, but still among main barriers are the strong immunological responses that human develop against animal antigens and zoonoses.

TRACK 4 - MACHINE PERFUSION GOES PRIME TIME

KEY LEARNING | Clinical cutting edge education in organ perfusion: which organs, when, how, and why?

TRACK 5 - ISCHEMIA REPERFUSION INJURY – STILL?

KEY LEARNING | New strategies to avoid the injury: is there still a place for them?

TRACK 6 - REGENERATIVE TRANSPLANTATION

KEY LEARNING | What changed in the last 60 years, how far we can go? Will it replace transplantation?



MDT SESSIONS (MDT)

MDT 1 - IT'S ALL ABOUT SAFETY

Created by: Nicos Kessar, London, United Kingdom

KEY LEARNING | High performance, risk and safety lessons in transplantation.

MDT 2 - THE UNTHINKABLE DONOR/RECIPIENT

Created by: Constantino Fondevila, Barcelona, Spain; Gavin Pettigrew, Cambridge, United Kingdom

KEY LEARNING | Challenging the boundaries and exploring the limits of our abilities and ambitions. Based on expert experience debates and challenging cases. End up in trials and disasters.

REFRESHER (R)

REFRESHER 1 - TRANSLATIONAL SCIENCE

Created by: Henri Leuvenink, Groningen, The Netherlands; Gavin Pettigrew, Cambridge, United Kingdom

KEY LEARNING | The wonders of basic research: the clinical needs translational research the fastest and most efficient way from one to another.

REFRESHER 2 - LEARNING FROM NEIGHBOURING SPECIALITIES

Created by: Menna Clatworthy, Cambridge, United Kingdom; Luuk Hilbrands, Nijmegen, The Netherlands

KEY LEARNING | The pipeline of new immunosuppressive drugs is rather dry. Nevertheless in cancer / hematological malignancies and autoimmunity new drugs are introduced that may also find application in transplantation. A brand new field is immunometabolism.

REFRESHER 3 - BIG DATA

Created by: Soren Sorensen Schwartz, Copenhagen, Denmark; Thomas Resch, Innsbruck, Austria

KEY LEARNING | For health care professionals it is important to understand the possibilities and pitfalls in big data analysis in order to be able to direct this research area towards clinically relevant areas. In order to interact with professionals within big data analysis, i.e. within bioinformatics and related area of statistics, we need to have a more profound understanding of big data analysis than just looking at it as black box. We need to understand the various steps in big data analysis i.e. data curation, data analysis modalities, data interpretation etc.

REFRESHER 4 - INFLAMMATION

Created by: Soren Sorensen Schwartz, Copenhagen, Denmark

KEY LEARNING | Inflammation, frailty and morbidity in relation to organ transplantation – how to evaluate and what is the connection. Inflammation and antibody mediated rejection – the missing link? HLA and inflammation – what is the connection and is there a clinical relevance. Anti-inflammatory and cardiovascular risk reduction - what are the treatment options.



ECTTA in pills

Bringing back to life heart and lung failure patients: it is time to move away from transplantation? Will DCD donation and new frontiers for organ preservation and allocation improve survival and QOL of patients suffering heart and lung failure? Establish a role for mechanical support during end-stage heart and lung failure and the relationship with bioengineered organs, regenerative medicine and transplantation.

Improve the long term follow-up: the role of precision medicine in the management of thoracic transplantation.

GOALS A survey will involve the ECTTA members and affiliates in the setup of the program looking at a balanced match between open discussion and state of the art lectures.

AIM The meeting will deal with the recent impulse that Thoracic transplantation has received in Europe from DCD donation and from the new techniques of organ preservation aiming at preserve more vulnerable organs.

Describe the right use of mechanical replacement or support of thoracic organs (ECMO, VAD, artificial lungs) and thoracic transplantation in Europe aiming to enlarge the number of patients treated and their survival and QOL.

The faculty will also highlight the limitations in the improvement of exercise capacity of patients receiving thoracic transplantation and mechanical circulatory support and possible solutions to improve outcomes of destination therapy.

ENGINEERING THE HEALING OF HEART AND LUNG FAILURE'S PATIENTS.

Puzzling mechanical and biological solutions to improve outcomes of end-stage heart and lung failure.

- Heart and Lung Transplantation.
- The mechanical solution: ECMO, VAD, Bioengineered organs.
- Heal the patients with regenerative medicine.
- Improving the exercise capacity of patients suffering heart and lung failure..

OBJECTIVES Thoracic transplantation has received a big impulse from DCD donation and new techniques of organ preservation aiming at preserve more vulnerable organs. Europe is the place of innovation for these technologies and philosophies due to the epidemiology of organ donors in Europe.

Mechanical replacement or support of thoracic organs (ECMO, VAD, artificial lungs) is emerging both as an alternative and a complimentary solution to increase the number of patients receiving treatment and their survival.

LEARNING OBJECTIVES A well balanced mixture of state of the art lectures and open discussion will allow participants to deal with the new solutions aiming to treat heart and lung failure in the upcoming future.

TARGET AUDIENCE transplant professionals (cardiologists, pneumologists, surgeons, anaesthesiologists, VAD and transplant coordinators, expert in rehab medicine).



EKITA in pills

EKITA is the kidney section of ESOT and deals with all aspects of renal transplantation. As a European platform, EKITA supports research, education and clinical work in this area. Furthermore, EKITA is highly ambitious in preparing policies and creating transnational interactions to advance renal allografting in all European member states.

Goals The main goal of EKITA is to improve quality of life of people with ESRD by advancing all aspects of kidney transplantation.

Aims The ultimate aim of EKITA is the optimization of renal transplantation through activities in research, education, clinical collaboration and health policy.

INTERACTION OF B&T-CELL ALLOIMMUNITY

- Basic Research.
- Clinical part

OBJECTIVES To provide an overview on **T & B-cell interaction**.

TARGET AUDIENCE Transplant surgeons and physicians, nephrologist, immunologists at all stages of training and expertise.



ELITA in pills

The European Liver and Intestine Transplantation Association is a multi-disciplinary Society of health care professionals in liver and intestine transplantation which is the official professional society delegated by ESOT for liver and intestine transplantation in Europe.

GOALS To provide a range of educational activities, stimulate discussion and influence European legislation in liver and intestine transplantation. To stimulate clinical research and publications from analysis of the registry, in partnership with the European Liver Transplant Registry.

AIM Our aim is to set guidelines and standards and to provide education and support in liver and intestine transplantation within the European Countries and beyond.

UPDATE ON MACHINE PERFUSION AND IMMUNOSUPPRESSION IN LIVER TRANSPLANTATION – THE BEST FROM BOTH WORLDS

- Machine contest.
- Cold vs Warm.
- Hypothermic machine perfusion vs Normothermic machine perfusion.
- Regional perfusion vs Ex-situ perfusion in DCD.

OBJECTIVES To provide the liver transplant professionals with up to date information on machine perfusion and immunosuppression in liver transplantation.

LEARNING OBJECTIVES To learn about the current state of different types machine preservation in liver transplantation and normothermic regional perfusion in donors after circulatory death as well in the currents trends and innovations in immunosuppression after liver transplantation.

TARGET AUDIENCE Liver transplant surgeons and hepatologists, HPB surgeons and general hepatologists, specialist nurses in liver transplantation, HPB, hepatology and oncology.



EPITA in pills

The European pancreas and Islet Transplantation Association is a section of ESOT founded to provide a Forum for the pancreas and islet transplantation community in Europe.

GOALS To facilitate the exchange of information of the field of pancreas and islet transplantation.

AIM The aim of EPITA is to contribute to the development of the pancreas and islet transplantation field and of alternate forms of beta-cell replacement therapy for the benefit of patients suffering from type 1 diabetes.

EXPANSION AND OUTCOME ASSESSMENT OF PANCREAS AND ISLET TRANSPLANTATION

- Marginal donors
- Monitoring rejection and outcome assessment.

OBJECTIVES To address current issues in expanding the donor pool using pancreas from marginal donors in both pancreas and islet transplantation. And how to monitor rejection and assess the ultimate clinical outcome using recently developed criteria.

LEARNING OBJECTIVES The participant will know what donor characteristics to focus on in the decision to use marginal donors for pancreas or islet transplantation, how to monitor islet and pancreas graft rejection and to implement the diagnostic tools to be able to assess the success of pancreas and islet transplantation.

Target audience: Surgeons, nephrologists, diabetologists, transplant coordinators interested in pancreas and islet transplantation.

TARGET AUDIENCE Transplant surgeons and physicians, transplant coordinator, nurses and medical student with an interest in transplantation of pancreas and islets.



EDTCO in pills

EDTCO is a section within ESOT dedicated to donation and procurement activities.

GOALS Increase organ and tissue availability. Ensure the quality and safety of organs and tissues for transplantation. Optimise the safety of living donors and care for deceased donors and their relatives. Optimise potential recipient care and follow-up through effective clinical coordination.

AIM To establish clinically effective programmes in organ and tissue donation, procurement and transplantation by supporting and representing all healthcare professionals involved in the process.

THE MATRIX: TRANSPLANT COORDINATION AS THE INVISIBLE LINK BETWEEN DONOR AND RECIPIENTS

- Innovative ways to identify donors: How to identify them and don't be lost in the intention.
- High Risk Donors: who is taking the risk?
- Donor Management: A continuous process from the hospital admission, not only after death declaration.
- Biovigilance the right balance between donor and recipient: how to implement it and define sharing responsibilities.
- European and Global initiatives for organ sharing: Paired living donation, hyperimmunized recipients, recipients in urgency for organ transplantation.

TARGET AUDIENCE Healthcare professionals involved in intensive care and emergency medicine, end of life care, organ and tissue donation and coordination. Patient, family and society representatives, EU commissioners.



ELPAT in pills

ELPAT is a section of ESOT dedicated to the ethical, legal and psychosocial aspects of organ donation and transplantation.

GOALS ELPAT goals include organizing symposia and conferences, as well as initiating and participating in research, and disseminating knowledge through publications and events.

AIM ELPAT aims to stimulate collaboration, innovation and knowledge exchange on ethical, legal and psychosocial aspects of transplantation. We bring continuity and structure to the dialogue on these issues and to contribute to development of clinical practice, research and policy.

ADDRESSING ETHICAL, LEGAL AND PSYCHOSOCIAL CHALLENGES IN DECEASED AND LIVING DONATION ACROSS EUROPE

- Variation in organ donation practices across Europe.
- Organ donation following assisted suicide and euthanasia or death by donation: where do we draw the line?
- Opinion polls, public perception and practice: How do the public view opt-in versus opt-out?
- Increasing opportunities for pre-emptive transplantation.
- Should organ sales be decriminalized?

OBJECTIVES A course objective describes what a faculty member will cover in a course. They are generally less broad than goals and more broad than student learning outcomes

Faculty members will make an analysis of the ethical and legal, and where appropriate the psychological, social, clinical and societal challenges of their given topic. Speakers will discuss best clinical practice and/or recommendations for advancements in the field.

LEARNING OBJECTIVES A description of what a participant will achieve at the conclusion of the programme. When writing outcomes, it is helpful to use verbs that are measurable or that describe an observable action. The best learning objectives will include a description of the conditions (“when given x, you will be able to...”) and the acceptable performance level. After following these lectures participants will have greater knowledge and understanding of current ethical, legal and psychosocial challenges in deceased and living donation.

TARGET AUDIENCE Physicians, nurses, ethicists, lawyers, psychologists, coordinators.

BSC in pills

The Basic Science Committee promotes Basic science in transplantation in Europe.

GOALS Translation of innovation into clinical activity; Communication between basic scientists and clinicians; Collaboration between laboratories in Europe.

- Epigenetics in Transplantation
- Microbiome
- Gender difference in rats

TARGET AUDIENCE Basic Scientists, Transplant immunologists, Regenerative Medicine researchers, Transplant physicians.



VCA in pills

Vascularized Composite Allotransplantation (VCA) has opened a new chapter in the field of transplantation, reconstructive, and restorative surgery. This committee brings together 8 representatives of major European teams at the forefront in this field.

GOALS Our goal is to raise the scientific and clinical development of vascularized Composite Allotransplantation (VCA) in Europe and to serve as a platform for scientists and clinicians for information and exchange.

AIM This SUS aims to provide an update on clinical outcomes and latest developments in the field of VCA including upper extremity, face, and uterus transplantation. In addition, we will provide an outlook on how latest developments in the area of organ preservation and regenerative medicine might shape the future of this innovative field.

OUTCOMES IN VCA - THE GOOD, THE BAD, AND THE UGLY VCA QUO VADIS?

- Upper extremity transplantation
- Face transplantation.
- Uterus transplantation
- Immunomodulatory protocols.
- Advances in organ preservation and machine perfusion: potential impact on VCA.
- Thinking outside the box: Combining VCA and regenerative medicine?
- PCell-based immunoregulation and tolerance induction: are we getting any closer?

OBJECTIVES

- Discuss the clinical outcomes for various different types of VCA with a particular emphasis on complications and lessons learned
- Review the currently used immunosuppressive strategies for VCA including new protocols of cell-based immune modulation
- Highlight how cutting-edge technologies in the areas of organ preservation and machine perfusion, tissue engineering and regenerative medicine, as well as stem cell therapies can help advance the field of VCA in the future.

LEARNING OBJECTIVES At the end of this SUS the participants will have learned about outcomes (functional, immunological, psychosocial), as well as complications and potential pitfalls in the world experience with VCA including upper extremity, face, and uterus transplantation. The participants will learn to assess the pros and cons of different immunomodulatory approaches in VCA and get a perspective on the future of the field.

TARGET AUDIENCE Surgeons, physicians, researchers, transplant coordinators.



YPT in pills

The Young Professionals in Transplantation (YPT) is the Network for Junior Transplant professionals of ESOT. It has been created to represent all young transplant clinicians and scientists who are beginning a career in transplantation and organ donation. YPT provides a forum for the junior professionals throughout Europe, working in the field of transplantation to discuss their needs and support their improvement. By creating a network based on a “younger perspective” we want to address our issues and facilitate the collaboration and friendship across international borders. We provide a platform for information, communication and exchange between young transplant professionals who want to enhance their knowledge in transplantation and provide the opportunity to be actively involved in international clinical and scientific exchange programs.

GOALS The group was designed to establish and maintain a network of young ESOT members under the age of 40 years, who want to become clinical and/or scientific experts in the field of transplantation. YPT is actively involved in the ESOT Biennial Meeting, or organizing innovative sessions dedicated to junior professionals and arranging networking events to contact all young professionals and share their ideas.

AIMS YPT wants to help young transplant professionals to enter the community of ESOT and therefore represents ESOT as a clinical, scientific and especially educational entity, which can help young professionals in their individual career development. We collaborate closely with the Educational Committee in order to endorse high scientific and clinical standards for every YPT member. Together we promote educational programs and are actively involved in the organization of cutting-edge scientific sessions, career development meetings and networking events on ESOT-associated congresses all over Europe through international collaboration with the national transplant societies.

EMPOWERING TRAINEES AND JUNIOR FACULTY TO SHAPE THE FUTURE OF TRANSPLANTATION

- Innovation, technology and entrepreneurship.
- Improve clinical and research knowledge and skills of YPTs.
- International multicenter research projects led by YPTs.
- Clinical and research fellowships.



ETAHP in pills

ETAHP reaches out to nurses (e.g. clinical nurses, advanced practice nurses and nurse coordinators (recipient care), psychologists, physical therapists, occupational therapists, social workers, dieticians, pharmacists and other disciplines working in the field of transplantation.

GOALS Within ETAHP, nurses and allied healthcare professionals throughout Europe will be united to ensure the best care possible to all transplant patients, with the aim to optimize patient outcomes.

AIMS We will do so by creating a strong European interdisciplinary platform to: share evidence based knowledge; exchange experiences and provide training; facilitate research and clinical collaborations; set the standards for the quality of care in transplant nursing and for allied health professionals.

FASTEN YOUR SEATBELTS- HOW TO JOIN THE RIDE OF EVIDENCE BASED PRACTICE

The art of overcoming barriers for EBP

- How to make a safe trip-identify the reasons why knowledge do not get used in practice.
- The leader in charge- how to build a framework for leadership behaviours supportive of EBP.
- Identify and overcome your own barriers.
- Learning from our mistakes - safe medication practice.

OBJECTIVES When attending this SUS the participant will learn about barriers for EBP and the importance of leadership for implementation of EBP. Also tools will be provided regarding how to practice EBP and overcome one's own barriers.

LEARNING OBJECTIVES After the SUS the participant will be able to:

- identify and overcome barriers for implementation of knowledge into transplant practice and
- to recognize and develop leadership behaviours that support EBP
- manage risk associated with medicine use, reduce errors and incident reporting (open and honest culture/organisations with memory etc)

TARGET AUDIENCE Nurses and Allied Healthcare Professionals in Transplantation.

ESOT 2019 CONGRESS REGISTRATION FEES

Type of registration	Early registration Until 10 June	Regular registration Until 01 September	Late & Onsite From 14 September
ESOT Member	€ 570	€ 670	€ 700
Non-Member	€ 830	€ 940	€ 970
Members qualifying for a reduced fee **	€ 320	€ 370	€ 400
Group registration	€	€	€

Fees are inclusive of VAT at the prevailing rate.

**** Reduced fee (only eligible for ESOT members):**

Trainees, nurses, transplant coordinators, allied health professional/participants from low/middle income countries (According to World Bank List: <http://data.worldbank.org/country>)
Local hospital staff members OR Members of the Danish Transplant Society.

Delegate registration fee includes:

- Admission to the all scientific sessions
- Admission to all Specialty Update Symposia
- Access to the exhibition
- Access to delegate lounges
- Participant's kit with congress material
- Provision of the required device for use throughout the duration of the congress
- Admission to poster opening & networking reception
- Refreshment breaks

ESOT CORPORATE SUPPORTERS

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"We really enjoyed the atmosphere and ambience of ESOT 2017. As a society, ESOT truly embraces the digital age by creating a sense of community and inspiring collaboration at congress and all year long. ESOT has a wide reach beyond Europe with physicians participating in live sessions through TRANSPLANT LIVE from around the world. ESOT is a leader in innovative digital platforms for medical education in transplant."

Leslie McNabb, Worldwide Associate Brand Director, Novartis Pharma AG



Overall organization of this congress was great and it was by far the most valuable event for our company since few years in Europe.

Kristen M. White, Director of Global Marketing, Organ Recovery Systems NV

SUBMIT AN ABSTRACT

Contribute to success

Submitting your work and research actively contribute to the success of the meeting. The organizers encourage clinicians and scientists, along the line with the congress theme, to share their latest data with their peers.

There will be a separate submission process for clinical management abstracts, in which a clinical case may be identified. Successful review would give you the chance to present your clinical problem to a panel of experts.

Electronic Abstract Submission

On line system will open on December, 1, 2018 and your abstract must be submitted on or before February, 28, 2019. Guidelines for abstract preparation and submission are fully described in the Congress website at esotcongress.org, where you will be guided through the on-line submission process.

3 LEVELS OF ABSTRACT CATEGORIES

Level 1	Level 2	Level 3
Basic	Kidney	Donation and donor types
Clinical	Liver	Allocation
Translational	Heart	Histocompatibility
	Lung	Immunology
	Pancreas/islets	Ischemia-reperfusion and preservation
	Composite Tissue	Surgical technique
	Cell	Rejection
	Artificial Organ	Immunosuppressive agents
	Xenograft	Histology
	Ethics, Law, Psychosocial	Infection
		Cancer
		Metabolic complications
		Cardiovascular complications
		Biomarkers and molecular changes

2 TYPES OF ABSTRACT SUBMISSION



ABSTRACT



VIDEO

5 TYPES OF ABSTRACT PRESENTATION



FULL ORAL PRESENTATION



FOCUS GROUPS

- Highly scored abstracts to be allocated for top level moderated group discussion
- SWOT analysis of the submitted work



BRIEF ORAL PRESENTATION



MODERATED E-POSTER



ELEVATOR PITCH



VIDEO PRESENTATION

ESOT Young Investigator Award

Awards will be assigned to 10 young clinicians or scientists (under 35 years of age), who have submitted the ten best abstracts to the ESOT 2019 Copenhagen Congress. The award will be given to the first author/presenter on the basis of the quality of the contribution to donation or transplantation and the best abstract score.

Awards amount to
€ 1.500 each

Best Oral Presentation Award

10 outstanding contributions, selected by the ESOT 2019 Scientific Program Committee from all submitted abstracts, based on the overall referees' score, will be presented during the 'Best Abstract Challenge' Session. The Audience will vote to select the 6 finalists, to which these awards will be assigned to.

Awards amount to
€ 2.500 each

ABOUT THE VENUE

Bella Center Copenhagen is located centrally in the new part of Copenhagen, Ørestad, and also the neighborhood around is developing rapidly into a modern and active part of Copenhagen. Bella Center Copenhagen is just 6 kilometers away from Copenhagen Airport and 8 kilometers away from Copenhagen city centre. Bella Center Copenhagen is also surrounded by Fields, Scandinavia's largest shopping centre, Royal Golf Center and protected natural areas that are ideal for a jog.

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COPEN
HAGEN**



Bella Center Copenhagen - Center Boulevard 5 - DK - 2300 Copenhagen

HOTEL ACCOMMODATION

CAP Partner has been appointed as the Official Housing Bureau of ESOT 2019 Congress and is offering you the opportunity to book accommodation in a selection of Copenhagen's best hotels at preferential negotiated rates for the attendees.

A wide range of hotel categories will be available in the area of the Bella Centre, the congress venue and the city centre. Some in walking distance and others well connected by public transport. Hotel reservations will be made available at a later stage at: www.esot.org



IMPORTANT DATES

REGISTRATION OPENING

01 December 2018

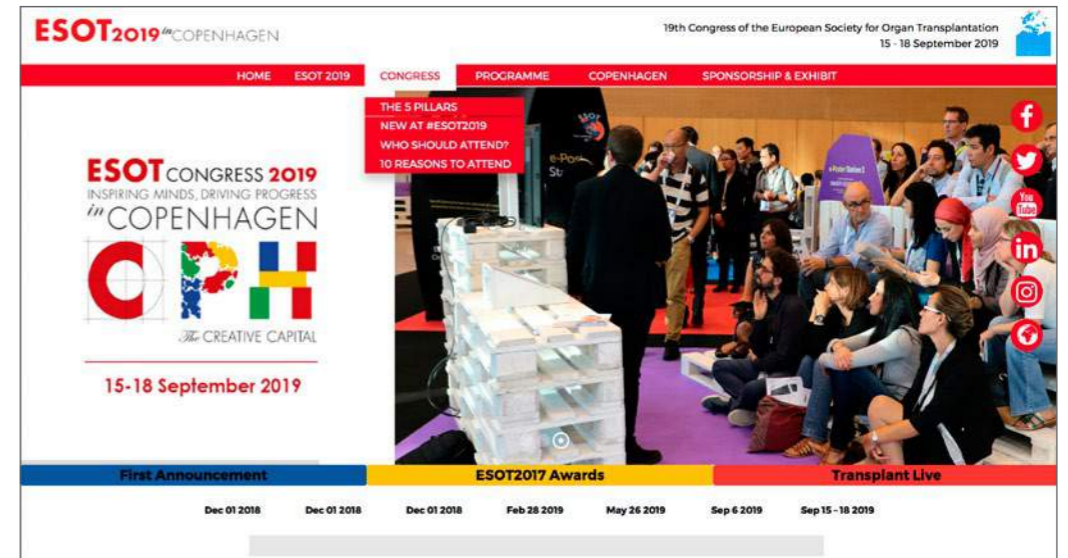
ABSTRACT OPENING

01 December 2018

ABSTRACT CLOSING

28 February 2019

CONNECT



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visit www.esotcongress.org

ESOT CONGRESS 2019
INSPIRING MINDS, DRIVING PROGRESS

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