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IMPORTANT DATES 2010

Abstract submission deadline
December 7, 2009

Notification of acceptance to authors
January 21, 2010

Early registration deadline
March 15, 2010

Hotel booking deadline
March 15, 2010

Pre-Registration deadline
May 10, 2010

CME
The European Society of Gastrointestinal and Abdominal Radiology, ESGAR, is accredited by the European Accreditation Council for Continuing Medical Education (EACCME). The EACCME is an institution of the European Union of Medical Specialists (UEMS). Accreditation for ESGAR 2010 has been requested from the UEMS and the number of credit hours of European external CME credits will be announced in the final programme.

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It is my great pleasure to invite you to join the 21st Annual Meeting of the European Society of Gastrointestinal and Abdominal Radiology (ESGAR), scheduled to take place from June 2 – 5, 2010 in Dresden, Germany. The cornerstone of success of our previous ESGAR meetings has been the high quality of the educational and scientific programme. This could be achieved with the skills and expertise of the ESGAR Programme Committee members and the outstanding performance of our speakers and moderators from Europe and all over the world. In addition, the Local Organising Committee along with the Central ESGAR Office in Vienna contributed to the success story. With this, I feel privileged and honoured to host the 21st Annual Meeting in Dresden. We already started to do our very best to ensure that both the scientific programme and the city of Dresden will meet your expectations.

The 2010 Postgraduate Course will cover “Abdominal and Gastrointestinal Emergency Radiology”. The increasingly important clinical role of radiology is particularly highlighted in emergency situations. Significant technical advances of broadly available imaging systems, considerable clinical skills of well-trained radiologists, and the rising demand of immediate decision making are some of the issues giving radiology the key role in managing these patients. Speakers in the Postgraduate Course will review imaging features of the most relevant pathologies in this setting, such as portal vein thrombosis, cholecystitis, biliary pancreatitis, splenic infarction/rupture, appendicitis, appendagitis, diverticulitis, bowel obstruction, mesenteric ischemia, abdominal trauma etc. The one day course will provide a comprehensive and practical guide of how to deal with the most common abdominal emergency situations. In addition, less frequent differential diagnoses will be discussed. Don’t miss this unique opportunity of up-dating your knowledge in abdominal emergency radiology!

The scientific and educational programme will follow the successful concept of Plenary Sessions, Workshops, Scientific Sessions, Lunch Symposia, and Electronic Poster Presentations. New successful features of our last Annual Meetings such as the Research Corner and Foundation Courses will be continued. Already today, you should not only mark your calendar but also consider submitting scientific papers and posters. Please take note of the abstract submission deadline which is on December 7, 2009. We look forward to receiving your submissions for presentation!

Dresden is a city in the heart of Europe. Almost 20 years after unification, Dresden has become one of the top destinations among German cities. The modern Congress Centre is located in walking distance not only to many hotels but also to the historic centre of the city on the River Elbe. ESGAR visitors can enjoy a short walk from the Zwinger and the Semper Opera House to the Royal Palace, on to the Frauenkirche and to Brühl’s Terrace. A unique selection of famous museums are hosted in these historic buildings, including the Old Masters Picture Gallery and the New Masters Gallery, the New Green Vault, the Coin Cabinet and the Porcelain Collection. Europe’s only science museum to focus on the human being and body with reference to the environment and the society, culture and science, the German Hygiene Museum, should not be missed and can easily be reached by local transportation. For those who plan to spend a day exploring the magnificent surroundings of Dresden, a visit to Pillnitz or Moritzburg castle is recommended. Alternatively, a trip in a relaxed atmosphere on an old steamboat from Dresden to Saxon Switzerland is a unique opportunity to see the Elbe landscape with its palaces and castles.

Over 20 years, each ESGAR meeting has had its own local charm. It will be in the hands of the Local Organising Committee and many others, not mentioning myself, to give ESGAR 2010 in Dresden an unforgettable local flavour. The success of the meeting, however, also relies on your contribution. We hope to welcome you in Dresden!

Prof. Dr. Michael Laniado
Meeting President, ESGAR 2010
ABBREVIATIONS

The following abbreviations are used in the programme:

HL  Honorary Lecture
IR  Interventional Radiology
LS  Lecture Session
PG  Postgraduate Course
PS  Plenary Session
RC  Research Corner
WS  Workshop

CASES OF THE DAY

Different cases will be displayed each day from Wednesday, June 2 to Saturday, June 5, 2010 giving registrants the opportunity to take part in the quiz and to check the results on the following day. The participant who solves the most cases will receive a diploma and will be announced in the ESGAR newsletter. The coordinator of the ESGAR 2010 Cases of the Day competition is P. Prassopoulos, Alexandroupolis/GR.

CLINICAL FILES: INTERACTIVE CASE DISCUSSION

An expert moderator will present three themed challenging cases consisting of correlated imaging modalities to a radiology panel. Each case will be chosen to illustrate the various diagnostic and therapeutic options available in the clinical management of the patient. The moderator will then lead a highly interactive discussion with emphasis on audience participation. The aim of this innovative session is to stress the central role of clinical based radiology in patient management.

FOUNDATION COURSE

This educational feature, which was successfully held during the last four Annual Meetings will be repeated with different topics at ESGAR 2010. As its name implies, the Foundation Course is designed to provide fundamental information about abdominal and gastrointestinal radiology for all registrants from residents to senior radiologists. In the Foundation Course, gastrointestinal and abdominal radiological knowledge will be complemented with that of medical, surgical and pathologic information to provide a complete overview of gastrointestinal diseases and their management.

INTERVENTION: A PRACTICAL APPROACH

This feature firstly introduced at ESGAR 2009, is designed to meet the increasing demand for abdominal and gastrointestinal interventions. Interventional radiology has always been an integral part of Annual ESGAR Meetings, with workshops, lecture sections, scientific papers and posters. This new format within the existing scientific programme aims to provide an interactive forum for classroom discussion. From Thursday to Saturday, a daily session led by three experts will be devoted to practical issues in interventional radiology from basic to advanced knowledge and skills. The purpose of the new format is to encourage expert interaction with a small group of abdominal and gastrointestinal radiologists and to allow ample time for discussion of useful tips and tricks.

LECTURE SESSIONS

All lecture sessions are dedicated to a special area of interest with defined lecture objectives to ensure integration and avoid overlap. Sessions are designed not only to describe modalities for imaging and therapy, but also to stress clinical relevance and outcomes. Discussion will be facilitated.

LUNCH SYMPOSIA

From Wednesday to Saturday at lunchtime, symposia will be held in collaboration with industrial companies and corporate partners. The subjects of these symposia will include a variety of “hot topics” concerning the ongoing development in some major fields of abdominal diagnostic and interventional radiology.

POSTGRADUATE COURSE

“ABDOMINAL EMERGENCIES”

The Postgraduate Course takes place on the first day of the meeting and will cover “Abdominal Emergencies”. Significant technical advances of broadly available imaging systems and the rising demand of immediate decision making are issues giving radiology an increasingly important clinical role in managing emergency patients. The course is structured into four main sessions dedicated to “Setting the Scene”, “Common Diagnoses”, “Pitfalls, Tips and Tricks in Emergency Radiology” and “Abdominal Trauma”. Speakers will provide a comprehensive and practical guide of how to deal with the most common abdominal emergencies. A panel discussion follows each session.
RESEARCH CORNER

The Research Corner, successfully introduced at ESGAR 2008, is designed to illustrate and promote aspects of radiological research in the field of abdominal imaging in Europe. Research is currently performed in a broad and variable way, ranging from individual endeavours to large multi-centre trials and from non-funded to competitive large-scale grants. The main goal of the Research Corner is to provide a discussion forum to allow senior academic radiologists to interact with junior researchers at an early stage of their career development as well as a networking forum for researchers with common interests. It will surely help to improve the quality of research in abdominal diagnostic and interventional radiology across Europe.

This year the Research Corner will address the topics “Liver Fibrosis” and “Angiogenesis”. The goals of the first session are to show how liver fibrosis can be assessed with diffusion weighted MRI, MR elastography, and perfusion weighted MRI. The second session will focus on the description how angiogenesis can be identified and investigated with CT, MRI and US. The continuously evolving interface between basic sciences and clinical radiology is of crucial importance to the future of abdominal imaging. The Research Corner will show how research projects may be developed and presented and how results may be obtained, validated and published.

SCIENTIFIC SESSIONS

Researchers will present original proffered papers on new and original aspects of abdominal imaging and intervention. Selected papers will be gathered into sessions, each dealing with a homogenous topic. Time for discussion between researchers and attendees will be available after each presentation (Please refer to “Abstract Submission” on the following page).

WORKSHOPS

ESGAR 2010 continues a project to enhance the educational impact of workshops. Throughout the meeting, different workshop formats will be offered to registrants. Most workshops will be delivered in the traditional format, but there will also be interactive and small group workshops. Please note that all workshops will run in parallel. Each participant can attend one workshop per day. When registering for the meeting, please do not forget to also choose the workshops you wish to attend. Places in workshops will be assigned on a first come first served basis.

For details on the various workshops that will be offered during ESGAR 2010 please refer to page 23.

SCIENTIFIC EXHIBITS – Electronic Poster Exhibition

All scientific and educational exhibits (posters) at ESGAR 2010 will be displayed in Electronic Poster format. The Electronic Poster System allows registrants to submit their exhibits online, to view them in the conference centre and send selected material to participants’ individual e-mail addresses for easy referencing. The uploading and displaying of media files, such as images, tables and graphs and also the inclusion of video clips, Powerpoint slides, Flash or Director Shockwave animations in the presentation is possible as well. Following successful submission and acceptance of an abstract, the author will receive detailed information and deadlines for uploading the scientific material into the Electronic Poster database. The scientific and educational posters displayed at ESGAR 2010 in the Electronic Poster Exhibition will be included in the permanent ESGAR online poster database after the meeting (subject to authors’ confirmation).
The ESGAR Programme Committee invites submissions of abstracts of scientific and educational presentations for ESGAR 2010. Selected abstracts will be accepted for oral presentations (6 minutes speaking time, 2 minutes discussion) and for electronic poster presentations.

**ABSTRACT SUBMISSION**

The submission of abstracts (by Internet only) will be possible from **September 21 – December 7, 2009**.

The abstract submission system, together with full instructions and guidelines can be accessed via a link on the ESGAR website [www.esgar.org](http://www.esgar.org). The abstract submission system closes on Monday, December 7, 2009 at 12:00 noon. Late submissions cannot be accepted.

- **Scientific abstracts** (oral and scientific Electronic Poster Presentations) must be structured as follows: Purpose – Materials and Methods – Results – Conclusion

- **Educational Electronic Poster abstracts** must be structured as follows: Learning objectives – Background – Imaging Findings or Procedure Details – Conclusion

Abstracts longer than 220 words will not be accepted by the system.

**Projects can only be submitted in one presentation category.** Posters already on the Electronic Poster database may not be re-submitted to ESGAR. Accepted **scientific abstracts** will be published in an online supplement to European Radiology. Details will be made available in the online abstract submission system.

**ESGAR ABSTRACT REVIEW AND GRADING**

The Programme Committee recognises that the ESGAR scientific programme has been the equal of any other radiology programme in the past but wishes to improve it further. Most diagnostic radiology research presented at ESGAR comprises evaluation of the technical and diagnostic performance of imaging methods and pictorial essays/adiologic-pathologic correlation. Interventional radiology research is also presented. A large panel of sub-specialist expert radiologists will grade submitted abstracts within their area of expertise. While expert opinion is crucial, objective criteria have also been formulated to help reviewers identify the best-designed and strongest studies as well as the best analysed data in these categories.

Abstracts were scored out of a maximum 10 points. Most accepted abstracts scored from 5.6 to 8.4 points. Abstracts that scored less than 4.0 were unlikely to be accepted. In 2009, 40% of oral and scientific Electronic Poster Exhibition abstracts were rejected. When the abstract submission system opens, a link will be provided to “**ESGAR 2010 Instructions to Reviewers**”. This link will enable abstract writers to read the “Guidelines for Abstract Reviewers”, where the objective criteria that will be used for abstract scoring are explained. Simple spreadsheet calculators can be downloaded by authors to help them prepare their results by a link to “**Tips for better abstract writing**”. These will facilitate the calculation of basic statistical indices (sensitivity, specificity, predictive values, confidence intervals etc.) from raw data. We suggest that you use these resources during study design, data analysis and abstract writing between September and December to improve your chances of acceptance. You can also use the online “Guidelines for Abstract Reviewers” to calculate a likely score for your work. Doing this will help you to improve scientific abstracts, maximising both your chances of acceptance for ESGAR 2010 and (we hope) the final chance of publication and impact of your hard work. Submitted abstracts can be edited directly on the Internet until the deadline.

**NOTIFICATION OF ACCEPTANCE**

Presenters will receive the notifications of acceptance by e-mail by the end of January 2010. Detailed guidelines for oral presentations and Electronic Poster Presentations will be published on the ESGAR website at that time. Authors with accepted abstracts for scientific exhibits will receive a link to the Electronic Poster system by e-mail, enabling them to upload their presentation prior to the meeting. If you wish to withdraw your submission after December 7, 2009, inform the Central ESGAR Office in writing (e-mail, fax) immediately.

**AUDIO VISUAL SERVICES (AVS)**

Only data projection will be provided for oral presentations. Presentations must be prepared using PowerPoint for PC. Macintosh presentations must be saved in PC format. Speakers must deliver their presentation to the Preview Centre on a separate, labelled CD-ROM or USB stick (ZIP disks are not accepted). Speakers are responsible for testing their presentation for compatibility at the meeting, before handing it in. Further details will be made available together with the notification of acceptance.

**ESGAR TOP 20**

The best 20 abstracts, submitted by residents, who appear as the first author on the respective abstract and who will actually present their paper during the meeting, form the “**ESGAR Top 20**”. Authors will receive a diploma, confirming that their abstracts have received the best ratings among other abstracts submitted. ESGAR Top 20 authors can be recognised by a special badge during the meeting.

**POSTER PRIZES**

The best ESGAR Electronic Poster Presentations will be awarded a diploma. There will be one Magna Cum Laude, two Cum Laude and several Certificates of Merit. The evaluation will be performed by a committee before the meeting and the awarded presentations will be flagged as such in the Electronic Poster System on site. Evaluation will be based on novelty, accuracy, educational value and design.
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<td>Evening</td>
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<td>ESGAR Party</td>
<td>Faculty Dinner</td>
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09:00 – 10:30 PG 1

SETTING THE SCENE
Moderators: Y. Menu, Paris/FR; M. Laniado, Dresden/DE

09:00
THE ACUTE ABDOMEN – WHAT ARE WE DEALING WITH?
A. Dixon, Cambridge/UK

Lecture objectives:
To describe the range and frequency of acute abdominal conditions encountered in the emergency department. To describe the conditions encountered most frequently by radiologists. To describe when the radiation burden of CT scanning should modify the choice of imaging investigation. To provide an overview of the role of the radiologist in the management of patients with an acute abdomen.

09:20
REASONS TO PERFORM OR NOT TO PERFORM US
J.B.C.M. Puylaert, The Hague/NL

Lecture objectives:
To detail clinical indications where US is the preferred modality for triage of patients with an acute abdomen. To describe an optimised technique for US imaging of the acute abdomen. To discuss in which clinical situations US is inferior to CT for triage of patients with an acute abdomen. To discuss the generalisability of US in the emergency department and who should be performing it.

09:40
STRATEGY AND PROTOCOLS FOR MDCT
P. Rogalla, Toronto, ON/CA

Lecture objectives:
To describe the different protocols encountered when performing MDCT in patients with an acute abdomen. To summarize summarise when intravenous and/or positive/neutral oral contrast agents are appropriate or not. To synthesize an optimised technical algorithm for MDCT imaging of the acute abdomen in the various clinical situations encountered by the radiologist.

10:00
PANEL DISCUSSION
COMMON DIAGNOSES

Moderators: A.H. Freeman, Cambridge/UK; R.A. Frost, Salisbury/UK

11:00 ACUTE PANCREATITIS
R. Manfredi, Verona/IT

Lecture Objectives
To review the spectrum of peripancreatic/pancreatic acute fluid collections, pseudocysts and infected pancreatic necrosis. To describe extrapancreatic complications (spontaneous fistulation, gastric outlet obstruction, intestinal necrosis, bleeding pseudoaneurysm, splenic vein thrombosis). To discuss multisystem organ failure (renal, pulmonary, cardiovascular) in acute pancreatitis as the most important determinant of morbidity and mortality.

11:20 APPENDICITIS AND MIMICS
J. Stoker, Amsterdam/NL

Lecture Objectives
To describe typical and atypical findings of appendicitis as well as mimics at different imaging modalities. To define the pros and cons of each imaging modality in suspected appendicitis. To propose an effective diagnostic strategy.

11:40 COLONIC DIVERTICULITIS AND ALTERNATIVE DIAGNOSIS
S. Schmidt, Lausanne/CH

Lecture Objectives
To provide a radiologic approach for investigating the severity of colonic diverticulitis. To discuss alternative diagnoses in left lower abdominal pain. To describe the specific role of the different imaging modalities. To propose a strategy for patient management.

12:00 PANEL DISCUSSION
14:30 – 16:00 PG 3  PITFALLS, TIPS AND TRICKS IN EMERGENCY RADIOLOGY
Moderators: J.-M. Bruel, Montpellier/FR; N. Elmas, Izmir/TR

14:30  BOWEL OBSTRUCTION
S. Romano, Naples/IT

Lecture Objectives:
To define the radiological criteria for assessing the presence of bowel obstruction, regardless of the aetiology. To explain how to determine the precise site of obstruction. To illustrate the most common and the most challenging causes of obstruction and how to identify them. To describe how to detect complications, especially bowel ischaemia. To explain the strategy for follow-up in patients with conservative treatment.

14:50  ISCHAEMIA
B. Marincek, Zurich/CH

Lecture Objectives
To present the basics of pathophysiological changes that explain imaging findings, including thinning or thickening of the bowel wall, enhancement or non enhancement. To show didactic images of bowel ischaemia on CT according to the origin and the severity of the disease, including complications. To discuss the arterial and venous causes of ischaemia, excluding bowel volvulus, and how CT protocols should be adapted to their identification. To discuss the role of US as an alternative for early diagnosis, and the indication of angiography in selected cases.

15:10  PERFORATION
Y. Menu, Paris/FR

Lecture Objectives
To explain the role of plain abdominal film and US, and their limitations. To show, using didactic images, how a small pneumoperitoneum can be found on CT. To explain the signs that localise the perforation, including gas accumulation, bowel wall changes, and direct identification of the disease. To explain why imaging is an important tool for management strategy, conservative or surgical.

15:30  PANEL DISCUSSION
16:30 – 18:00 PG 4  ABDOMINAL TRAUMA

Moderators: R.F. Dondelinger, Liège/BE; R. Grassi, Naples/IT

16:30  SOLID ORGANS

F. Lassandro, Naples/IT

Lecture Objectives:
To describe the commonest solid organ injuries in blunt and penetrating trauma, i.e. those of spleen, liver, kidney, and pancreas. To review the grading of solid organ injuries including subtle findings. To consider the special situation of paediatric patients. To explain the appropriateness of different imaging modalities with special emphasis on MDCT. To discuss follow-up strategy.

16:50  HOLLOW VISCERA AND DIAPHRAGM

M. Laniado, Dresden/DE

Lecture Objectives:
To review direct and indirect imaging findings of injuries to the gastrointestinal tract, the biliary tract, the urinary bladder and the diaphragm after blunt or penetrating trauma. To discuss the clinical consequence of missed subtle findings. To explain intraperitoneal versus extraperitoneal hollow organ rupture and its different imaging findings. To explain the appropriateness of different imaging modalities with special emphasis on MDCT.

17:10  VASCULAR INJURIES

P. Goffette, Brussels/BE

Lecture Objectives:
To review the spectrum of imaging findings of intraperitoneal and retroperitoneal vascular injuries in blunt and penetrating trauma. To discuss the criteria for diagnosing acute bleeding. To comment on the shock bowel hypotension complex. To explain the appropriateness of different imaging modalities with special emphasis on MDCT. To discuss the added value of catheter angiography. To explain the role of interventional radiology in patient management.

17:30  PANEL DISCUSSION
18:15 – 19:15 PS 1 OPENING OF ESGAR 2010

HL 1 ESGAR HONORARY LECTURE
HEPATOBILEARY EMERGENCIES – IMAGING AND INTERVENTION
C.D. Becker, Geneva/CH

19:15 – 21:00 WELCOME RECEPTION

Please refer to the ESGAR Website for programme updates and lecture objectives

www.esgar.org
09:00 – 10:30 LS 1  GI TRACT HAEOMORRHAGE - MULTIDISCIPLINARY ROLE OF RADIOLOGY  
Moderators: D.E. Malone, Dublin/IE; M. O’Malley, Toronto, ON/CA

09:00  CLINICAL/SURGICAL MANAGEMENT OF THE PATIENT WITH GI BLEEDING  
D.F. Martin, Manchester/UK

Lecture objectives:  
To describe relevant clinical issues in the initial clinical presentation and workup of patients with GI haemorrhage from the small and large bowel. To discuss the relationship between surgery and radiology in multidisciplinary patient management.

09:20  ROLE OF MDCT IN ACUTE HAEOMORRHAGE  
B.P. Gallix, Montpellier/FR

Lecture objectives:  
To review current MDCT protocols and to illustrate the diagnostic features in acute GI haemorrhage from the small and large bowel. To provide relevant diagnostic imaging algorithms for MDCT in the patient management of acute bleeding. To discuss the accuracy of MDCT in this setting.

09:40  IMAGING ALGORITHMS IN OBSCURE GI BLEEDING  
A.J. Aschoff, Kempten/DE

Lecture objectives:  
To review the causes of obscure haemorrhage from the GI Tract and to provide relevant diagnostic imaging algorithms in patient management. To describe the accuracy of modern diagnostic techniques.

10:00  ROLE OF INTERVENTIONAL RADIOLOGY  
G. Noeldge, Heidelberg/DE

Lecture objectives:  
To discuss the indications and technical considerations of interventional radiology in acute GI haemorrhage from the small and large bowel. To summarise the complications and results of interventional therapy.

10:20  PANEL DISCUSSION
09:00 – 10:30 LS 2  |  CUTTING EDGE ADVANCES IN MRI  
*Moderators: G.P. Krestin, Rotterdam/NL; K. Coenegrachts, Bruges/BE*

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<th>Time</th>
<th>Session Title</th>
<th>Instructor</th>
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<tr>
<td>09:00</td>
<td>PERFUSION IMAGING</td>
<td>C.J. Zech, Munich/DE</td>
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<td><strong>Lecture objectives:</strong></td>
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<td>To review the pharmacokinetic properties of specific and non-specific contrast agents currently in use for MR studies. How perfusion can also be assessed without the use of contrast media. To address the most important clinical applications, advantages and pitfalls in abdominal organs. To explain how they impact on diagnostic accuracy integrating a multimodality comparison. To describe current trends for clinical research.</td>
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<td>09:20</td>
<td>FAST AND REAL TIME IMAGING</td>
<td>T. Metens, Brussels/BE</td>
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<td>To define the relevance of fast and ultrafast imaging in the evaluation of the abdomen. To describe the different ways to increase speed of MR acquisition, including real-time imaging. To provide clinical examples of fast imaging such as for non-collaborative patient evaluation, interventional procedure guidance and bowel motility evaluation.</td>
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<td>09:40</td>
<td>3T IMAGING AND BEYOND: PROBLEMS AND SOLUTIONS</td>
<td>T. Lauenstein, Essen/DE</td>
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<td>To explain the increase of signal to noise ratio at 3T and the resulting benefits on image quality. To show the impact of high-field imaging on spatial resolution and how it governs T1- and T2-weighted contrast. To discuss the potential drawbacks of altered image contrast and how to recognise and avoid artefacts. To discuss the major safety issues both for patients and professionals.</td>
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<td>10:00</td>
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09:00 – 10:30  IR 1  INTERVENTION - A PRACTICAL APPROACH: (1)  
MANAGEMENT OF COLORECTAL METASTASES  
Moderators: J.S. Laméris, Amsterdam/NL; G.M. Richter, Stuttgart/DE  

09:00  RFA - CURRENT STATUS  
A. Gillams, London/UK  

Lecture objectives:  
To discuss the indications and appropriate case selection of patients with liver metastases. To emphasise relevant tips and tricks and to summarise the current results and potential complications. To consider optimal follow up imaging strategies.  

09:20  PORTAL VEIN EMBOLISATION  
A. Denys, Nantes/FR  

Lecture objectives:  
To discuss the indications, relevant anatomical and technical considerations when performing portal vein embolisation. To emphasise relevant tips and tricks and to summarise the results and potential complications.  

09:40  FUTURE DEVELOPMENTS  
P.L. Pereira, Heilbronn/DE  

Lecture objectives:  
To review the emerging role of novel therapies for the management of colorectal liver metastases including drug eluting beads/cryotherapy and microwave techniques. To discuss the results and potential complications.  

10:00  PANEL DISCUSSION
THURSDAY, JUNE 3, 2010

14:30 – 15:00 PS 2  UEGF Lecture  
M. Farthing, Brighton/UK

15:00 – 16:00 PS 3  CLINICAL FILES 1 (Interactive Case Discussion)  
PANCREATIC TUMOURS  
Moderator: G. Morana, Treviso/IT

Panellists:  
M. Zins, Paris/FR  
C. Triantopoulou, Athens/GR  
M. Sheridan, Leeds/UK

16:30 – 18:00 LS 3  IMAGING FISTULA-IN-ANO  
Moderators: C. Bartram, London/UK; D. Vanbekevoort, Leuven/BE

16:30  ANATOMY, PATHOGENESIS AND TREATMENT  
S. Halligan, London/UK

Lecture objectives:  
To describe the pathogenesis of fistula-in-ano, detail the relevant anatomy, and describe the various surgical treatments offered with the emphasis on the questions that pre-operative imaging must answer for the surgeon. Describe the Parks’ Classification of fistula-in-ano. Why pre-treatment imaging is mandatory prior to treatment with disease modifying drugs in patients with Crohn’s fistulas.

16:50  ENDOANAL ULTRASOUND  
A. Maier, Vienna/AT

Lecture objectives:  
To describe how endoanal ultrasound is used for diagnosis and classification of anal fistula disease. What are the advantages and disadvantages of anal US in comparison to MRI?

17:10  MAGNETIC RESONANCE IMAGING  
D.J.M. Tolan, Leeds/UK

Lecture objectives:  
To describe how MRI is used for diagnosis and classification of anal fistula disease. What is the literature evidence-base for the use of MRI in this clinical context? What is the impact of MRI on disease outcome?

17:30  CASE PRESENTATION & DISCUSSION  
To present the panel with a selection of day-to-day clinical cases from the Moderators’ recent clinical practice, and to arrive at a Park’s Classification and optimised representative report for each fistula by interactive case interpretation.
16:30 – 18:00 LS 4

KEY QUESTIONS – KEY ANSWERS (1)
THE CIRRHOTIC LIVER: CHALLENGES IN HCC
Moderators: C. Bartolozzi, Pisa/IT; J.-H. Lim, Seoul/KR

16:30 WHAT AFTER US: CT VS MR

CT
R. Baron, Chicago, IL/US

Lecture Objectives: To explain the added value of CT for tumour detection and characterisation. How to improve accuracy and avoid pitfalls. To review the main limitations of the technique.

MRI
C. Ayuso, Barcelona/ES

Lecture Objectives: To explain the added value of MR for tumour detection and characterisation. How to improve accuracy and avoid pitfalls using extra-cellular contrast agents. To review the main limitations of the technique.

CLINICAL CASE DISCUSSION

17:00 ASSESSING TUMOUR DIFFERENTIATION AND AGGRESSIVENESS

PERFUSION & DIFFUSION
V. Vilgrain, Clichy/FR

Lecture Objectives: To explain how perfusion models can assess angiogenesis. How this information impacts on diagnosis. To address difficulties in performing the technique, including standardisation and reproducibility issues.

CELL IMAGING
J.M. Lee, Seoul/KR

Lecture Objectives: To explain the role of specific contrast agents for tumour detection and characterisation. How background cirrhosis and liver function may influence diagnostic performance. To briefly review new approaches to cellular imaging.

CLINICAL CASE DISCUSSION

17:30 THE RADIOLOGIST AS A DECISION MAKER

SHOULD WE TREAT?
T.K. Helmberger, Munich/DE

Lecture Objectives: To critically review the guidelines for both intent to cure and palliative treatment options. To explain why imaging plays a pivotal role concerning tumour management. Which type of treatment for which type of lesion?

HOW TO HANDLE TREATED LESIONS?
B. Op de Beeck, Edegem/BE

Lecture Objectives: To critically review current guidelines for follow-up of treated lesions. To discuss how imaging should be integrated along with additional clinical criteria. Which type of imaging should be performed?

CLINICAL CASE DISCUSSION
16:30 – 18:00 RC 1

RESEARCH CORNER: LIVER FIBROSIS

Moderator: L. Martí-Bonmatí, Valencia/ES

16:30 LIVER FIBROSIS AND DIFFUSION

C. Sirlin, San Diego, CA/US

Lecture objectives:
To show how fibrosis can be assessed with Diffusion Weighted (DW) MR imaging. To present the protocols that can be used for this purpose, state-of-the-art indications and potential developments. To present the different diffusion components relevant to this analysis. To comment on the main bias of this approach. To describe the potential ideas for both short and long-term research.

16:45 LIVER FIBROSIS AND ELASTOGRAPHY

B. van Beers, Clichy/FR

Lecture objectives:
To show how fibrosis can be assessed with MR Elastography. To present the protocols that can be used for this purpose, state-of-the-art indications and potential developments. To comment on the main bias of this approach. To describe the potential ideas for both short and long-term research. To compare MR Elastography with US Elastography.

17:00 LIVER FIBROSIS AND PERFUSION

B. Taouli, New York, NY/US

Lecture objectives:
To show how fibrosis can be assessed with perfusion weighted MR imaging. To present the protocols that can be used for this purpose, state-of-the-art indications and potential developments. To comment on the main bias of this approach. To describe the potential ideas for both short and long-term research based on these biomarkers.

17:15 PANEL DISCUSSION

QUESTIONS TO BE ADDRESSED BY THE PANEL INCLUDE:

1. Why is it important to evaluate liver fibrosis? Which patients will benefit from this evaluation? How is fibrosis evaluated and graded today?
2. Which pathological and biological changes are responsible for fibrosis? What are the main changes associated with fibrosis that can confound in vivo results (disease specific diagnosis: NASH, ASH, and virus)?
3. Which are the main endpoints for evaluation?
4. Which biomarker is most promising?
5. Are there specific tracers or contrast media in fibrosis? Molecular imaging for fibrosis quantitation.
6. Which clinical trials are involved in liver fibrosis research? What do they measure? Further progress in understanding, diagnosing, and treating hepatic fibrosis.
09:00 – 10:30 LS 5  DIFFUSION IMAGING OF ABDOMINAL MASSES
Moderators: C. Catalano, Rome/IT; P. Leander, Malmö/SE

09:00  PROTOCOL FOR DW-MRI: ONE FOR ALL OR ALL FOR ONE?
L. Martí-Bonmatí, Valencia/ES

Lecture objectives:
To present the different technical options, including single or multiple b values, free breathing, breath hold or respiratory gated sequences, number of slices, volume coverage, dedicated abdominal images or integration in a whole-body examination. To explain ADC maps and to show how the ADC parameter can be extracted (ROI placing, usual values). To conclude if one protocol applies for all applications, or if the protocol should be tailored to each situation.

09:20  MULTI-ORGAN IMAGE INTERPRETATION
S. Gourtsoyianni, Heraklion/GR

Lecture objectives:
To explain how to read diffusion weighted images and ADC maps. To show how the b value modifies the appearance of masses. To show the appearance of masses with free or restricted diffusion, and to explain how this is related to the structure of the mass, using radiological/pathological correlation. To comment on the potential pitfalls (blind areas, artefacts, blood and iron). To show examples of masses within the different organs using didactic images.

09:40  CLINICAL ROLE
C. Matos, Brussels/BE

Lecture objectives:
To present the results for the detection and the characterisation of abdominal tumours and inflammatory masses. To explain if and when DW-MRI should be incorporated into the standard MRI protocol. To explain how and why diffusion might be able to predict and/or to evaluate the response to therapy in different abdominal organs and to present the relevant published results.

10:00  PANEL DISCUSSION
09:00  UNDERSTANDING THE TECHNIQUE
S. Leschka, Zurich/CH

Lecture objectives:
To describe the technical prerequisites of multi-energy CT. To review imaging protocols for abdominal multi-energy CT, including contrast medium administration. To explain why multi energy CT can improve visualisation of contrast enhancement and produce iodine maps. To explain how post processing is practised. To discuss radiation exposure issues.

09:20  VIRTUAL PLAIN CT
C.N. de Cecco, Rome/IT

Lecture objectives:
To describe the value of virtual unenhanced images from multi-energy CT. To critically appraise the strengths and weaknesses of the technique. To comment on the contribution of virtual plain CT in a multi modality imaging environment.

09:40  IODINE MAPPING
D. Marin, Durham, NC/US

Lecture objectives:
To review the feasibility and diagnostic value of iodine mapping in abdominal imaging. To describe how iodine uptake in neoplastic lesions can potentially provide functional information regarding malignancy. To summarise the perspectives of iodine mapping in abdominal oncologic imaging.

10:00  IMAGING INFLAMMATORY AND ISCHEMIC CONDITIONS OF THE BOWEL
A. Graser, Munich/DE

Lecture objectives:
To review the clinical opportunities associated with multi-energy CT in evaluating various inflammatory and ischemic conditions of the bowel. To discuss the limitations of this imaging technique. To comment on the correlation between the degree of bowel wall enhancement depicted on standard CT images and findings visualized with multi-energy CT.

10:20  PANEL DISCUSSION
09:00 – 10:30  IR 2  INTERVENTION - A PRACTICAL APPROACH: (2)
PERCUTANEOUS DRAINAGE TECHNIQUES
Moderators: S.G. Feuerbach, Regensburg/DE; P.A. Almeida, Coimbra/PT

09:00  PERCUTANEOUS BILIARY DRAINAGE
H.-U. Laasch, Manchester/UK

Lecture objectives:
To discuss the indications and technique of percutaneous transhepatic cholangiography. To illustrate relevant tips and tricks for optimal procedural outcomes and to summarise the results, potential complications and patient follow-up.

09:20  ABDOMINAL ABSCESS DRAINAGE
S. Jackson, Plymouth/UK

Lecture objectives:
To review the indications and pre procedure strategies for abdominal abscess drainage. To discuss the principles of image guidance and catheter selection including relevant tips and tricks. To summarise the results, potential complications and patient follow-up.

09:40  DRAINAGE OF PELVIC COLLECTIONS
P.R. Mueller, Boston, MA/US

Lecture objectives:
To review the indications and pre procedure strategies for pelvic abscess drainage. To discuss the principles and techniques of the various drainage routes including endocavity and transgluteal approaches. To illustrate relevant tips and tricks and to summarise the results, potential complications and patient follow-up.

10:00  PANEL DISCUSSION
14:30 – 15:00 HL 2  ASAR HONORARY LECTURE
  J.-H. Lim, Seoul/KR

15:00 – 16:00 PS 4  CLINICAL FILES 2 (Interactive Case Discussion)
  RECTAL CANCER
  Moderator: R.G.H. Beets-Tan, Maastricht/NL
  Panellists:  C. Hoeffel, Reims/FR; P. Boraschi, Pisa/IT; S.H. Kim, Seoul/KR

16:30 – 18:00 LS 7  INCIDENTAL PANCREATIC FINDINGS
  Moderators: C. Stoupis, Männedorf/CH; H. Mori, Oita/JP

16:30  THE INCIDENTAL SOLID LESION
  H.-J. Brambs, Ulm/DE

Lecture objectives:
To illustrate the different pathologies that can result in a solid pancreatic lesion. To describe the imaging characteristics of the commonest pathologies. To highlight the imaging features that best help differential diagnosis. To suggest a clinically sensible and cost effective strategy for investigation and follow-up.

16:45  THE INCIDENTAL SMALL CYSTIC NODULE
  R.F. Thoeni, San Francisco, CA/US

Lecture objectives:
To illustrate the different pathologies that may cause a small (less than 2 cm) cystic pancreatic lesion. To describe the imaging features of the commonest pathologies. To highlight the imaging features which best help differential diagnosis. To suggest a clinically sensible and cost effective strategy for investigation and follow-up.

17:00  THE INCIDENTAL ENLARGED PANCREATIC DUCT
  M.A. Bali, Brussels/BE

Lecture objectives:
To illustrate the different pathologies that can cause dilation of the pancreatic duct. To describe the imaging characteristics of the commonest pathologies. To highlight the imaging features that help differential diagnosis. To suggest a clinically sensible and cost effective strategy for investigation and follow-up.

17:15  INCIDENTAL PANCREATIC CALCIFICATIONS
  R. Graziani, Treviso/IT

Lecture objectives:
To illustrate the different pathologies that can cause pancreatic calcification. To describe the imaging features of the commonest pathologies. To suggest a clinically sensible and cost effective strategy for investigation and follow-up.

17:30  CASE PRESENTATION & DISCUSSION
16:30 – 18:00 LS 8

KEY QUESTIONS – KEY ANSWERS (2)

CHALLENGES IN CROHN’S DISEASE:

Moderators: N. Gourtsoyiannis, Heraklion/GR; F. Maccioni, Rome/IT

16:30 EARLY DIAGNOSIS: ENTEROCLYSIS VS CAPSULE

ENDOSCOPY ENTEROCLYSIS
D. Maglinte, Indianapolis, IN/US

Lecture objectives: To present the current role and comparative results of conventional and air enteroclysis for early diagnosis of Crohn’s disease

CAPSULE ENDOSCOPY
B.M. Wiarda, Alkmaar/NL

Lecture objectives: To present the current role, and pros and cons of capsule endoscopy for early diagnosis of Crohn’s disease.

CLINICAL CASE DISCUSSION

17:00 ASSESSING DISEASE ACTIVITY: US VS MRI

US
E. Quaia, Trieste/IT

Lecture objectives: To present the US and CEUS criteria used to assess Crohn’s disease activity. To review the current role and limitations of US and CEUS for assessment of Crohn’s disease and for follow-up after treatment.

MRI
S.A. Taylor, London/UK

Lecture objectives: To present the MRI criteria used to assess Crohn’s disease activity. To review the current role and limitations of MRI for assessment of Crohn’s disease and for follow up after treatment.

CLINICAL CASE DISCUSSION

17:30 THE RADIOLOGIST AS A DECISION MAKER

CT
G.A. Rollandi, Genova/IT

Lecture objectives: To review the impact of CT on treatment decisions via categorisation of the sub type of disease process (inflammatory, fibrostenotic).

MRI
N. Papanikolaou, Heraklion/GR

Lecture objectives: To review the impact of MRI on treatment decisions via categorisation of the sub type of disease process (inflammatory, fibrostenotic).

CLINICAL CASE DISCUSSION
16:30 – 18:00 RC 2  RESEARCH CORNER: ANGIOGENESIS

Moderator: Y. Menu, Paris/FR

16:30  ANGIOGENESIS AND CT
V. Goh, Northwood/UK

Lecture objectives:
To describe angiogenesis and show how it can be identified and investigated with CT. To present protocols used for this purpose. To describe the different assumptions made. To describe avenues for potential short- and long-term CT research.

16:45  ANGIOGENESIS AND MRI
D. Sahani, Boston, MA/US

Lecture objectives:
To describe how angiogenesis can be identified and investigated with MRI. To present protocols used for this purpose. To describe the different assumptions made. To describe avenues for potential short- and long-term MRI research.

17:00  ANGIOGENESIS AND US
O. Lucidarme, Paris/FR

Lecture objectives:
To describe how angiogenesis can be identified and investigated with US. To present protocols used for this purpose. To describe the different assumptions made. To describe avenues for potential short- and long-term US research.

17:15  PANEL DISCUSSION

1. Why is evaluation of angiogenesis important? In which pathologies is angiogenesis the leading mechanism of disease (inflammation, neoplasm). What are the most important related, signaling factors, biological factors, and pathological findings relating to angiogenesis?

2. How is angiogenesis evaluated and graded today? Vessels characteristics relevant to angiogenesis (size, permeability). What are the principal endpoints for evaluation?

3. What is the relationship between angiogenesis and associated conditions (necrosis, oedema)? Results of and potential biases in published data. Future opportunities.

4. What assessment criteria are the most accurate, reproducible, and relevant?

5. What are the principal advantages of each imaging method?

6. How can attendees best commence research in this field?

18:15 – 19:15  ESGAR GENERAL ASSEMBLY
LECTURE SESSIONS (LS) / INTERVENTIONAL RADIOLOGY (IR)

09:00 – 10:30  LS 9  CT-COLONOGRAPHY IN SYMPTOMATIC PATIENTS: VALUABLE OR NOT?
Moderators: A. Laghi, Latina/IT; D. Bielen, Leuven/BE

09:00  PRO AND CONS IN SYMPTOMATIC PATIENTS
P.J. Pickhardt, Madison, WI/US

Lecture Objectives:
To define the symptomatic patient. To stratify patients according to age and risk factors. To suggest a clinically sensible and cost effective strategy for investigation of symptomatic patients.

09:15  TECHNICAL APPROACHES
P. Lefere, Roeselare/BE

Lecture Objectives:
To illustrate the CT imaging protocols, including bowel preparation and faecal tagging, used to investigate symptomatic patients. To justify the use of i.v. contrast agent. To describe strategies for CT interpretation.

09:30  CLINICAL RESULTS
S. Halligan, London/UK

Lecture Objectives:
To present data from randomized clinical trials of CT in symptomatic patients (SIGGAR Trial). To show the advantages and disadvantages of CT when compared with optical colonoscopy and barium enema.

09:45  IMPACT OF EXTRA-COLONIC FINDINGS IN SYMPTOMATIC PATIENTS
M. Hellström, Göteborg/SE

Lecture Objectives:
To present data relating to the prevalence of extra-colonic findings in symptomatic patients. To define the clinical significance of extracolonic findings. To suggest clinically sensible and cost effective strategies for follow-up.

10:00  PANEL DISCUSSION
09:00 – 10:30 LS 10  CUTTING EDGE (3): HYBRID IMAGING
Moderators: M.F. Reiser, Munich/DE; J. Votrubova, Prague/CZ

09:00  UNDERSTANDING PET-CT AND SPECT-CT
S. Skehan, Dublin/IE

Lecture objectives:
To discuss the technical basis of hybrid imaging. To explain the different approaches of using CT as part of the imaging study with special emphasis on oral and IV contrast administration. To describe how image fusion is accomplished. To critically review radiation exposure in hybrid imaging.

09:20  IMAGE INTERPRETATION AND TRACER PHARMACOLOGY
E.J. Rummeny, Munich/DE

Lecture objectives:
To explain the physical properties, pharmacodynamic, and pharmacological behaviour of different tracers. To review the indications for using different tracers and to describe their diagnostic potential. To critically appraise the current literature with respect to results from different tracers.

09:40  TUMOUR DETECTION BY DIFFUSION WEIGHTED IMAGING COMPARED TO PET-CT
H. Scheffel, Zurich/CH

Lecture objectives:
To discuss the integration of whole body diffusion weighted MRI (DWI) data and PET data for definition of metastatic spread in gastrointestinal tumours. To comment on the potential improvement in diagnostic accuracy in tumour staging.

10:00  PANEL DISCUSSION
09:00 – 10:30  IR 3  INTERVENTION - A PRACTICAL APPROACH (3):
MANAGEMENT OF HEPATOCELLULAR CARCINOMA
Moderators: T. Vogl, Frankfurt/DE; F. Pilleul, Lyon/FR

09:00  CURRENT ROLE OF RFA
D.J. Breen, Southampton/UK

Lecture objectives:
To discuss the indications, relevant anatomical and technical considerations when performing radiofrequency ablation for HCC. To emphasise relevant tips and tricks and to summarise the results and potential complications. To describe imaging strategies for follow-up.

09:20  TRANS-ARTERIAL CHEMOEMBOLISATION TECHNIQUES
P. Huppert, Darmstadt/DE

Lecture objectives:
To discuss the indications, relevant anatomical and technical considerations when performing transarterial chemoembolisation in the liver. To emphasise relevant tips and tricks and to summarise the results and potential complications. To describe imaging strategies for follow-up.

09:40  NOVEL AND EMERGING EMBOLOTHERAPY TECHNIQUES
S. Terraz, Geneva/CH

Lecture objectives:
To review the place of Yttrium-90 and drug eluting bead embolotherapy techniques in the management of HCC. To discuss the possibilities for combination therapy for large tumours. To summarise the results and potential complications.

10:00  PANEL DISCUSSION

14:30 – 15:00  HL 3  SGR HONORARY LECTURE

IMAGING AND MANAGEMENT OF CYSTIC PANCREATIC LESIONS
K.J. Mortelé, Boston, MA/US
15:00 – 16:00  **PS 5**  
**FOUNDATION COURSE**  
**RADIOLOGIC PATHOLOGIC CORRELATIONS I – THE TUBE**  
Moderators: S. Efremidis, Ioannina/GR; O. Ekberg, Malmö/SE

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**15:00 OESOPHAGEAL TUMOURS**  
A.S. Roberts, Cardiff/UK

**Lecture Objectives:**
To review the epidemiology, aetiology, and pathology of oesophageal tumours. To describe their imaging features vis-à-vis pathologic correlation. To emphasise characteristic imaging features and discuss the potential of imaging techniques for the initial diagnosis, differential diagnosis and staging of these tumours.

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**15:20 GI TRACT LYMPHOMA**  
R.M. Gore, Highland Park, IL/US

**Lecture Objectives:**
To review the epidemiology and pathology of GI Tract lymphoma. To describe the imaging characteristics vis-à-vis pathologic correlation. To emphasise characteristic features and discuss the potential of imaging techniques available for diagnosis, differential diagnosis and staging.

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**15:40 ILEO-CAecal AREA MASSES**  
R.M. Mendelson, Perth, WA/AU

**Lecture Objectives:**
To review the epidemiology, aetiology and pathology of ileo-caecal region masses. To describe characteristic radiological features vis-à-vis pathologic correlation. To discuss the advantages and limitations of imaging for differential diagnosis.
16:15 – 17:15 PS 6  
**FOUNDATION COURSE:**  
**RADIOLOGIC PATHOLOGIC CORRELATIONS II - SOLID ORGANS**

*Moderators: L.H. Ros-Mendoza, Zaragoza/ES; T.V. Bartolotta, Palermo/IT*

**16:15 METASTATIC LIVER DISEASE**  
*G. Brancatelli, Palermo/IT*

**Lecture Objectives:**
- To review the epidemiology, aetiology and pathology of metastatic liver disease.  
- To describe imaging characteristics vis-à-vis pathologic correlation. To discuss the advantages and limitations of imaging for differential diagnosis and follow-up.

**16:35 ENDOCRINE TUMOURS OF THE PANCREAS**  
*P.R. Ros, Cleveland, OH/US*

**Lecture Objectives:**
- To review the epidemiology and pathology of pancreatic endocrine tumours. To describe the spectrum of imaging characteristics vis-à-vis pathologic correlation. To emphasize characteristic features and discuss the role of available imaging techniques available for diagnosis and differentiation.

**16:55 BILIARY TRACT MALIGNANCIES**  
*M.-J. Kim, Seoul/KR*

**Lecture Objectives:**
- To review the epidemiology and pathology of biliary tract malignancy. To describe the spectrum of imaging features vis-à-vis pathologic correlation. To discuss the advantages and limitations of imaging for diagnosis and differentiation.
Primovist®
Gadoxetic Acid

Defining Liver Imaging

Mastership in detection, delineation and characterization

- especially of small liver lesions (< 10 mm)
- sharpened distinction of lesions and liver parenchyma
- increased diagnostic confidence by dynamic & hepatocyte-specific imaging

The Fine Art of Liver Imaging
WORKSHOPS

ESGAR 2010 continues a project to enhance the educational impact of workshops. Throughout the meeting, different workshop formats will be offered to the registrants. Most workshops will be delivered in the traditional format, but there will also be specific interactive and small group workshops. Please note that all workshops will run in parallel. Each participant can attend one workshop per day. When registering for the meeting, please do not forget to also choose the workshop you wish to participate in. Places in workshops will be assigned on a first come first served basis.

TRADITIONAL WORKSHOPS

Each of these workshops is given by two faculty members. Interactivity between the instructors and the “students” will be encouraged, as appropriate. Compared to a lecture, it is intended that the smaller workshop environment will facilitate discussion between instructors and audience, allowing registrants to have specific learning needs addressed. There are several “Tracks” within the traditional workshops:

- GI Tract Imaging
- Hepatobiliary Imaging and Intervention
- Practical Aspects of Advanced Imaging Techniques
- “The Essentials”: This track is specifically intended to be of interest and value to residents and those radiologists seeking basic and comprehensive reviews of key topics.

The workshop topics are derived from the “European Training Charter for Clinical Radiology – Detailed Curriculum for the Initial Structured Common Programme”. ESGAR recognises the vital importance of this curriculum to the harmonisation of radiology education across Europe. There are 10 GI and Abdominal Radiology subsections in the basic curriculum. Several will be covered at each annual ESGAR meeting. Thus, over a period of 5 years maximum, a resident attending all meetings could review this whole section of the curriculum. In 2010, stomach and duodenum - imaging and staging of tumours (subsection 2.3), peritoneum and abdominal wall - imaging of peritonitis and peritoneal carcinomatosis (subsection 2.6), and liver - focal lesions in non-cirrhotic liver (subsection 2.8) will be covered.

- GI Tract Imaging
- Hepatobiliary Imaging and Intervention
- Practical Aspects of Advanced Imaging Techniques
- “The Essentials”

INTERACTIVE WORKSHOPS

Interactive workshops are designed to transfer knowledge in a context close to that in which it will eventually be used, thus enhancing its retention. In this format, audience size will be limited and the teaching methods will be designed to maximise active audience involvement. “Hands-on” workshops have been a feature of the ESGAR meeting for several years now. As at previous ESGAR meetings there will be daily workstation-based workshops on MR of rectal carcinoma.

- MR Rectal Carcinoma
  - WS 8, 16, 23

EVIDENCE-BASED PRACTICE (EBP) WORKSHOPS

This is a course of 3 workshops (WS 5, 13, 21) in which a small group will receive training to improve:

- Their understanding of what ‘evidence-based practice’ means and where it fits in practice.
- Their literature searching skills to help them answer questions that arise in day-to-day work.
- Their ability to confidently and reliably appraise diagnostic test performance literature.
- Their understanding of how guidelines are constructed and maintained.

The Faculty will present interactive workshops and all registrants will receive paper, software and online resources to help them practice what they have learned when they return home. Bring your laptop and PDAs! To get the best value from the workshops, daily attendance is strongly recommended as the workshops are integrated. It is suggested that pre-registered participants identify an abdominal radiology problem from their department that the tutors can help them address during the course.

CTC HANDS-ON CENTRE

ESGAR is proud to offer a “CT-Colonography Hands-on Centre” during its Annual Meeting, responding to the increasing need of practical training for CTC interpretation.

The programme offered at the “CTC Hands-on Centre” includes basic introductory lectures and individual case reviews guided by experts from the faculty of the ESGAR CTC workshops. Workstations from different vendors will be available for training. Registration for the case reviews at the CTC Hands-on Centre is necessary. Free training with application specialists from the respective companies is possible without prior registration.
WORKSHOPS, THURSDAY, JUNE 3, 2010 / 08:00 – 08:45

WS 1  CHOLANGiocARCinOma: IMAGIng OF INTRA- AND EXTRa HEpATIC TUMOURS
       B.-I. Choi, Seoul/KR
       A. Palkó, Szeged/HU

WS 2  PAEdiAtRIc Liver DIseASE: WHEN THE CHIlD BECOMES ADuLT
       J. Karani, London/UK
       D. Stringer, Singapore/SG

WS 3  FunCTIOnAL PEIVIC FLOOR IMAGIng: ConstIPAtION And INCOntInENCE
       P.J. Shorvon, London/UK
       S. Somers, Dundas, ON/CA
       C. Savoye-Collet, Rouen/FR

WS 4  ACuTE ABDOMINAl COMPLICAtIONS IN ONCOLOGIC PATIENTS
       J.A. Guthrie, Leeds/UK
       C. Aube, Angers/FR

WS 5  eVIDeND BASeD PrACtICe (eBP) 1
       Introduction and overview. How to improve your literature SEARCHes.
       L. Crocetti, Pisa/IT
       M. Staunton, Toronto, ON/CA

WS 6  CTC – TECHNIQUE: HOW TO START
       E. Neri, Pisa/IT
       A. Laghi, Latina/IT

WS 7  FROM THE eUrOPeAn CUrrICULUM: 2.3 STOMACH & DUODenUM IMAGIng AND STAGIng OF TUMOURS
       P. Pokieser, Vienna/AT
       A.G. Schreyer, Regensburg/DE

WS 8  MRI OF RECTAL CARCinOMA
       R.G.H. Beets-Tan, Maastricht/NL
       J. Stoker, Amsterdam/NL
WORKSHOPS, FRIDAY, JUNE 4, 2010 / 08:00 – 08:45

WS 9  CEUS IN LIVER AND PANCREAS: WHAT IS THE ADDITIONAL VALUE?
M. D' Onofrio, Verona/IT
S.D. Yarmenitis, Heraklion/GR

WS 10  CT AND MR IMAGING OF SMALL BOWEL
A. Phillips, Bath/UK
K.A. Herrmann, Munich/DE

WS 11  BEGINNERS GUIDE TO ABDOMINAL MRI
D.J. Lomas, Cambridge/UK
M. Lewin, Paris/FR

WS 12  MRCP: CASE BASED REVIEW
C. Stroszcynski, Dresden/DE
P. Paolantonio, Latina/IT

WS 13  EVIDENCE BASED PRACTICE (EBP) 2
Appraising literature about diagnostic test performance – keeping it simple; applying results when “ruling in” or “ruling out” clinically suspected conditions
D.E. Malone, Dublin/IE
S.A. Taylor, London/UK

WS 14  CTC – TECHNIQUE: HOW TO READ
T. Mang, Vienna/AT
D. Regge, Candiolo/IT

WS 15  FROM THE EUROPEAN CURRICULUM:
2.6 PERITONEUM & ABDOMINAL WALL IMAGING OF PERITONITIS AND PERITONEAL CARCINOMATOSIS
P. Prassopoulos, Alexandroupolis/GR
A. Filippone, Chieti/IT

WS 16  MRI OF RECTAL CARCINOMA
R.G.H. Beets-Tan, Maastricht/NL
J. Stoker, Amsterdam/NL
WORKSHOPS, SATURDAY, JUNE 5, 2010 / 08:00 – 08:45

WS 17  RECURRENT COLON CANCER: CASE BASED REVIEWS
        H. Fenlon, Dublin/IE
        M. Bellomi, Milan/IT

WS 18  ACUTE PANCREATITIS: TOWARDS A NEW CLASSIFICATION
        H. Mori, Oita/JP
        J.S. Lameris, Amsterdam/NL

WS 19  VASCULAR ABNORMALITIES OF THE LIVER
        O. Matsui, Kanzawa/JP
        H.-J. Jang, Toronto, ON/CA

WS 20  LIVER TUMOUR INTERVENTION: CASE BASED REVIEWS
        I. Bargellini, Pisa/IT
        J. Martinez-Rodrigo, Valencia/ES

WS 21  EVIDENT BASED PRACTICE (EBP) 3
        Caveats and frequently asked questions about EBP. Constructing guidelines.
        D.E. Malone, Dublin/IE
        R.M. Mendelson, Perth, WA/AU

WS 22  FROM THE EUROPEAN CURRICULUM:
        2.8 LIVER
        FOCAL LIVER LESIONS IN NON CIRRHTIC LIVER
        R. Hammerstingl, Frankfurt/DE
        L. Grazioli, Brescia/IT

WS 23  MRI OF RECTAL CARCINOMA
        R.G.H. Beets-Tan, Maastricht/NL
        J. Stoker, Amsterdam/NL
THURSDAY, JUNE 3, 2010

09:00 – 10:30  CASE REVIEW 1  
A. Gupta, Harrow/UK  
F. Iafrate, Rome/IT

14:00 – 16:00  FREE TRAINING

16:30 – 18:00  CASE REVIEW 2  
T. Mang, Vienna/AT  
M.H. Liedenbaum, Amsterdam/NL

FRIDAY, JUNE 4, 2010

09:00 – 10:30  CASE REVIEW 3  
P. Lefere, Roeselare/BE  
R. Ferrari, Latina/IT

14:00 – 16:00  FREE TRAINING
BAYER SCHERING PHARMA
Why hepatocyte specific imaging in liver MRI?

BRACCO
Bracco symposium: Title to be announced.

GE Healthcare
Explore new frontiers in lesion characterisation and patient care for abdominal pathologies. Latest acquisition and multimodality processing techniques from GE Healthcare.

GUERBET
How to optimise the CM in abdominal MSCT imaging.

im3D
Faecal tagging and CAD: pros and cons.

MEDICSIGHT
Medicsight symposium: Title to be announced.

The dates for the Lunch Symposia will be announced shortly on the ESGAR website www.esgar.org
**CONGRESS VENUE**

The International Congress Centre Dresden is situated directly on the banks of the Elbe between the Marienbrücke and the Saxon Parliament.

It is located
- 8 km from the Airport Dresden,
- 2 km from the Main Train Station
- 500 m from the Historic Centre

Address:

**International Congress Centre Dresden**  
Devrientstraße 10/12  
DE – 01067 Dresden

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**CURRENCY**

The Euro (€) is the official currency in Germany.

**ELECTRICITY**

Electricity: 220 Volts AC, 50 Hz – flat two-pin plugs or third round pin are used, adaptors may be necessary in Germany.

**EMERGENCY**

Call 110 for police and 112 for fire brigade.

**LETTER OF INVITATION**

The Central ESGAR Office will be happy to provide you with a formal invitation letter. It is understood that such an invitation is intended to help potential delegates to raise funds or to obtain a visa. This does not imply any commitment from ESGAR to provide financial funds or accommodation!

**LIABILITY**

ESGAR is not liable for personal injury and loss of or damage to private property. Participants and accompanying persons should obtain the appropriate travel insurance. The place of performance of any duties and obligations for both ESGAR and the participant sides shall be Vienna. Any contractual relationship with ESGAR shall be subject to Austrian law.

**PASSPORT AND VISA**

The entry formalities to Germany vary according to the country of origin. All visitors entering Germany must posses a valid passport (except EU citizens – Identity card is sufficient). On the German Federal Foreign Office webpage you can find out whether you need a visa for visits to Germany and the Schengen states of up to 90 days.

**TIME**

Central European Standard Time = GMT+1  
Central European Summer Time = GMT+2

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**CONGRESS LANGUAGE**

The meeting will be held in English. There is no simultaneous translation.

**CONGRESS WEBSITE**

Further and updated information will be available on the internet at [www.esgar.org](http://www.esgar.org). Registration, hotel reservation and abstract submission can be done online.
To register for ESGAR 2010, please use the online registration tool on the ESGAR website [www.esgar.org](http://www.esgar.org).

All registrations are handled by the

**Central ESGAR Office**

Neutorgasse 9

AT – 1010 Vienna, Austria

Phone: +43 1 535 89 27

Fax: +43 1 535 70 37

E-Mail: registration@esgar.org

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### REGISTRATION FEES

**Early – until March 15, 2010**

- ESGAR Member / Faculty Member: € 390.00
- Non Member: € 550.00
- Resident* (ESGAR Member): € 185.00
- Resident** (ESGAR Member and DRG Member): € 85.00
- Resident* (Non Member): € 235.00
- Resident** (Non Member and DRG Member): € 135.00
- Radiographer*: € 235.00
- Radiographer** (DRG Member): € 135.00
- Accompanying Person: € 45.00

**Late – March 16 until May 10, 2010**

- ESGAR Member / Faculty Member: € 490.00
- Non Member: € 650.00
- Resident* (ESGAR Member): € 265.00
- Resident** (ESGAR Member and DRG Member): € 165.00
- Resident* (Non Member): € 315.00
- Resident** (Non Member and DRG Member): € 215.00
- Radiographer*: € 315.00
- Radiographer** (DRG Member): € 215.00
- Accompanying Person: € 45.00

**Deadline for advance registration with reduced fees is May 10, 2010**

**Onsite Registration Fees**

- ESGAR Member / Faculty Member: € 590.00
- Non Member: € 750.00
- Resident* (ESGAR Member): € 315.00
- Resident** (ESGAR Member and DRG Member): € 215.00
- Resident* (Non Member): € 365.00
- Resident** (Non Member and DRG Member): € 215.00
- Radiographer*: € 315.00
- Radiographer** (DRG Member): € 215.00
- Accompanying Person: € 45.00

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### REGISTRATION FEE INCLUDES

- Admittance to all sessions, Electronic Poster Exhibition, technical exhibition
- Final programme book (in print) and book of abstracts (electronic version)
- Certificate of attendance
- Welcome Reception
- Access to the Electronic Poster Database also after the congress
- Public transport ticket for Dresden (incl. train from the airport)

### ACCOMPANYING PERSON FEE INCLUDES

- Admittance to the Opening of ESGAR 2010
- Welcome Reception
- Public transport ticket for Dresden (incl. train from the airport)

### PLEASE NOTE

- All prices are listed in Euro (€).
- The early registration fees are only applicable if the registration AND full payment are received by the Central ESGAR Office by March 15, 2010.
- The “Member registration fee” is only applicable for members in good standing and for those participants, who become members of ESGAR and pay the respective fees before registering for ESGAR 2010.
- Registration fees transferred to the congress account later than May 5, 2010 might not be considered as they probably will not be received in time. Only registrations accompanied by full payment can be considered complete.
- Badges will be sent to pre-registered participants before the meeting. Please make sure to indicate a correct delivery address.

* Residents and radiographers must send or fax a letter from their head of department confirming their status as a resident or radiographer within 7 days of completed online registration. In case this confirmation is not received, the registration fee will be automatically adjusted to a regular fee. The age limit for registrations as resident is 35.

** Residents (“Ärzte in Ausbildung”) and radiographers registering with the special DRG Member fee must in addition provide a confirmation of DRG Membership.
PAYMENT OF REGISTRATION FEES:

All payments have to be made in EURO (€).

By credit card: We accept VISA and Mastercard for payment via the online registration system.

By bank transfer made in Euro (€) to the “Dresden 2010” account at “Die Erste Bank”, Grinzinger Allee 1, AT – 1190 Vienna, Austria, IBAN: AT112011128133846210, SWIFT: GIBAATWW

Please make sure to clearly state the name of the registered person on the bank transfer in order to ensure identification of the payment. All bank charges have to be paid by the orderer. Please do not forget to add the incoming bank charges.

CANCELLATION POLICY

– ESGAR offers the possibility of ensuring the registration with our partner “Europäische Reiseversicherung”. Thus, ESGAR will not refund any amount after a cancellation of registration itself. All requests have to be issued to the “Europäische Reiseversicherung” directly. Refunds will be given within the terms and conditions of the “Europäische Reiseversicherung”.
– All cancellations have to be made in writing (e-mail, fax or letter) to the Central ESGAR Office and confirmed.

INSURANCE

Participants have to opportunity to take out insurance for either the registration fee only or combined insurance for registration fee and hotel. This insurance applies in case of an unforeseen cancellation of participation at ESGAR 2010 and can be taken out together with the online registration. Details can be found on the ESGAR website www.esgar.org.

Deadline for advance registration with reduced fees is May 10, 2010

After this date, registrations can be made online with the onsite fee and directly onsite during the opening hours of the registration desk. The registration desk at the Conference venue (International Congress Centre Dresden) will be open at the following times:

- Tuesday, June 1: 16:00 – 20:00
- Wednesday, June 2: 07:15 – 18:00
- Thursday, June 3: 07:15 – 18:00
- Friday, June 4: 07:15 – 18:00
- Saturday, June 5: 07:15 – 16:30

CONFIRMATION OF REGISTRATION AND PAYMENT

Upon completion of your online registration your confirmation can be downloaded and printed from the Registration Service Area (My Personal ESGAR Account) on the ESGAR website. As soon as payment is credited to our account your confirmation of payment will be generated automatically and is available in the same area. Please allow two – three weeks for credit card payments to be processed.

CERTIFICATE OF ATTENDANCE/ RECORD OF ATTENDANCE

The Certificate of Attendance as well as a detailed Record of Attendance will be available online in the Registration Service Area (My Personal ESGAR Account) immediately after the congress.

GROUP REGISTRATIONS

For companies or travel agents wishing to make registrations for a group of participants, a group registration tool is available in the registration area.
EVENING EVENTS

WEDNESDAY, JUNE 2, 2010
19:15 – 21:00

WELCOME RECEPTION

The Welcome Reception will be held after the Opening of ESGAR 2010 at the International Congress Centre Dresden.

The congress centre, which opened in 2004, is one of Europe’s most beautiful and modern meeting venues. Being located on the shore of the River Elbe, right next to world-famous buildings such as the Semper Opera House and the “Zwinger”, the congress centre can be seen as an opposite pole to the illustrious Brühl’s Terrance. The main intention of the architects was to create a building that mirrors the elegant curves of the Elbe in it’s façade and thereby also reflects the movement of the current.

The Welcome reception will be held at the entrance foyer and at the terrace, which both offer an amazing panoramic view of the city and Elbe River landscape. Take you chance for a get-together with colleagues and friends to enjoy some drinks and appetisers in this beautiful setting.

The Welcome Reception is free for registered participants and registered accompanying persons.

This evening is kindly supported by industry.
Don’t get the wrong idea about Dresden’s Deutsches Hygiene Museum based on its name. It’s not a museum dedicated to the importance of brushing your teeth and changing your underwear every day. Instead, it’s a fascinating study of the human body with a range of interactive exhibits designed to teach you the inner workings of the body and help you understand the complex systems that make you function. The Transparent Man, for example, features an anatomically accurate recreation of a human body with transparent glass skin that enables visitors to see the skeleton, circulatory system, and major organs of an adult human. Displays dedicated to eating and drinking, thinking and learning, and the art of coordination similarly shed light on these most basic yet little-understood facets of life. The museum is housed in a historical 1930 museum building located on the edge of the Great Garden, a baroque style park in central Dresden.

The “Deutsches Hygiene Museum” was founded in 1912 at the initiative of a Dresden industrialist, Karl August Lingner, whose fortune was built on the “Odol” brand of oral hygiene products. Lingner had been one of the organisers of the First International Hygiene Exhibition in 1911, which brought over five million visitors to Dresden. In 1930 the museum moved into its present building, designed by Wilhelm Kreis as the centrepiece of the Second International Hygiene Exhibition. The firebombing of Dresden in February, 1945, destroyed a large part of the Museum building and its valuable collection. Under the East German state, the Museum functioned as a national public health education agency. In 1991, the museum adopted its present identity as a Museum of Man, revisiting the innovative aims of its founding years with today’s means and methods and thereby being a public forum for current issues arising from the revolutions in science, culture and politics that are reshaping our society in the early 21st century.

The collection of the “Deutsches Hygiene Museum” is devoted to the history of the human body and of attitudes and practices regarding the body, especially since the beginning of the 20th century. The collection focuses on instruments and techniques of personal hygiene, and on strategies, products and institutions of state health education policy. The collection currently contains some 45,000 objects, including special collections and permanent loans, and is continuously being expanded and catalogued.

The ESGAR Party will take place at this outstanding location. Participants will have the chance to visit the interesting exhibition and enjoy food, drinks and music afterwards.

Price per Ticket: 55.00 €
Dresden is the capital city of the German Federal Free State of Saxony and the easternmost major German city. Dresden lies on both banks of the river Elbe, mostly in the Dresden Elbe Valley Basin. The Dresden Elbe Valley is a world heritage site which is focused on the conservation of the cultural landscape in Dresden.

Dresden was first mentioned as a city in 1206 and the 800th birthday celebrations therefore took place in 2006. Dresden has a long history as the capital and royal residence for the Electors and Kings of Saxony, who for centuries furnished the city with cultural and artistic splendour. Dresden became one of Europe’s most glamorous royal capitals during the regency of August the Strong. This époque was responsible for some of Dresden’s undeniably beautiful buildings such as the Zwinger, Hofkirche or the Taschenbergpalais.

Between 1918 and 1934 Dresden was capital of the first Free State of Saxony. With the foundation of the German Empire, Saxony lost its political independence, yet Dresden remained a city of central importance in Germany. During the 19th century the city was a major centre of economy, including motor car production, food processing, banking and the manufacture of medical equipment. At the turn of the last century, Dresden blossomed into a metropolis and by 1930, 632,710 people lived in the city. Dresden also was a center of European modern art until 1933.

In contrast to other German cities, Dresden did not see Allied bombs until 1945. This created the impression amongst citizens that Dresden would escape air raids due to its international reputation. The controversial bombing of Dresden in World War II between February 13 and 15, 1945 was disastrous for the city.

After the Second World War, Dresden became a major industrial centre in the German Democratic Republic with a great deal of research infrastructure. According to the new GDR government, the rise of a Socialist metropolis was planned, not the reconstruction of the baroque ensemble. Some of the historical sights like Semperoper, Zwinger or Hofkirche were reconstructed nevertheless.

Since German reunification in 1990, Dresden has emerged as a cultural, political, and economic centre in the eastern part of Germany. Today, the city’s ambitious rebuilding programme seeks to return the metropolis to its earlier magnificence.

CITY STRUCTURING

Dresden is a spacious city. Its districts differ in their structure and appearance. Many parts still contain an old village core, while some quarters are almost completely preserved as rural settings. The original parts of the city are almost all in the districts of Altstadt (Old City) and Neustadt (New City). The Old City and historical centre of Dresden is located on the left bank of the Elbe, at the peak of a graceful river bend.

Even today the buildings from the Renaissance, baroque and 19th century determine the Elbe front and the face of the city. In spite of vast destruction during the Second World War, the Old City part of Dresden has preserved or regained fascinating ensembles. Many important cultural institutions are situated along the Old City-side of the Elbe banks: from the Old Masters Picture Gallery to the “Green Vault”, the treasure chamber of the Saxon electors and kings. The Dresden State Art Collections are among the most prominent museums in the world. Across the Elbe River, the New City boasts fabulous restaurants, nightclubs, and international shopping destinations.

CULTURAL HIGHLIGHTS

Frauenkirche (Church of Our Lady)
The most famous symbol of reconstruction in the city centre is the Dresden Frauenkirche Church, the magnificent baroque dome, which today dominates the city centre. The reconstruction of the Church of Our Lady was financed by donations from all over the world. Since it reopened in 2005, the Baroque masterpiece of architect George Bähr has continued great musical traditions.

Semper Opera House
The Sächsische Staatsoper Dresden: a house with an international reputation, with a distinguished orchestra, the Sächsische Staatskapelle Dresden and a world ranking roster of artists plus a vast array of guest stars, who are the talk of the town.

Green Vault
The Grünes Gewölbe (Green Vault) is the most magnificent and sumptuous Treasury Museum in Europe. It owes its existence to August the Strong, who combined his rich collection of precious objects and jewels with inherited masterpieces from the Renaissance and the Baroque. In two exhibition areas “Neues Grünes Gewölbe“ (New Green Vault) and “Historisches Grünes Gewölbe“ (Historic Green Vault) of very different character, visitors will experience these magnificent artworks of gold, silver, precious gems, enamel, ivory, bronze and amber in intensity unparalleled to date. Time Tickets for admission have to be booked in advance.

Old Masters Picture Gallery
One of the most significant collections of paintings in the world, the gallery in the Semper building houses an abundance of works from the 16th to the 18th centuries. Italian art is represented by masterpieces by Raphael, Giorgione, and other painters of the Renaissance and Baroque periods. An extensive collection of works from the 17th-century Flemish and Dutch schools by artists such as Rubens, Rembrandt and Vermeer forms the collection’s second main emphasis. Displaying over 760 paintings, the gallery’s other treasures include outstanding works by French, Spanish and German artists.
ARRIVAL TO THE CITY

By Plane
Dresden-Klotzsche Airport is located north of the city. Dresden is easy to reach via hub airports like Düsseldorf (9x daily), Munich, Frankfurt (7x daily), Köln/Bonn und Hamburg (3x daily). The emergence of the low-cost airlines Germanwings and Air Berlin has led to reduced fares to Cologne, Düsseldorf, Hamburg, Stuttgart and Munich.

The airport can be reached by bus (line 77 and 97) and tram line 7 (change for the bus at tram station Karl-Marx-Straße). Even faster is the connection with local train lines (S-Bahn).

Dresden Airport railway station is situated in the basement of the terminal building. It is served by trains on line S2 of the Dresden S-Bahn, which provide a half-hourly link to Dresden-Neustadt and Dresden Hauptbahnhof stations in the centre of Dresden, with journey times of 13 and 23 minutes respectively.

The public transport ticket, which is included in the registration fee, is also valid for the S-Bahn, trams and buses to and from the airport.

A taxi from the airport to the city centre costs approximately € 16.00 – 18.00 and takes between 15 and 30 minutes, depending on the time of day. The airport taxi rank is located directly in front of the terminal.

By Train
The main station is within walking distance of the city centre and easily accessible by bus or car. Regular trains leave for the rest of Germany (Berlin, Frankfurt, Munich) and to Prague and Budapest. The main trainstation is currently being refurbished, so check if your train is really leaving/going there and not at the other big station in Dresden-Neustadt.

By Bus
There also is a regular bus connection between Berlin Tegel Airport – Berlin Schönefeld Airport and Dresden four times a day, on Friday and Sunday six times daily.

GETTING AROUND IN THE CITY

Walking
In the centre, especially in the historic part, everything is easily accessible by foot.

Bus and tram
There is a combined system of tram (called Straßenbahn), bus and even train, but no subway. It works very well and connects all points of interest, but can be a little busy at peak times. Most lines even run at night time, of course with less capacity at night. This allows you to go out to most places or restaurants without the necessity to use a car, including to far flung places like Pillnitz.

Participants of ESGAR 2010 do have a 4-days transportation pass included in their registration fee.

Alternative transport
Dresden has a lot of biketaxis, mostly operating around the Old Town. They offer the typical (short distance) taxi service as well as guided city tours. Since 2007 there are also horse carriages that offer touristic sightseeing. One can also make use of the many bus tour operators. Tickets for these tours can be bought around the old town from various points.

OPENING HOURS

Banks are normally open from 9:00 to 16:00 on weekdays.

WEATHER

Average daily temperature in June: 20°C.
INTERCOM Dresden has been appointed as the official travel agent for ESGAR 2010 and will handle all hotel accommodation booking requests. Furthermore various sightseeing tours can be booked via the travel agent.

INTERCOM Dresden GmbH
Sylvia Neumann
Zellescher Weg 3
01069 Dresden
Phone: +49 351 320 17 320
Fax: +49 351 320 17 333
E-Mail: sneumann@intercom.de

The agent has reserved rooms in different hotel and price categories in Dresden for participants of ESGAR 2010. Please make your reservation as soon as possible in order to secure your accommodation, since June is high season in Dresden.

The deadline for hotel reservation is March 15, 2010.

Hotel booking is possible via an online booking platform. The link is provided on the ESGAR Website.

HOTEL RESERVATION / CANCELLATION POLICY

All rates are per night and per room including breakfast and 19% VAT. In case of VAT increase, rates are increasing adequately.

A reservation is only possible, if the necessary credit card details are presented to guarantee the reservation. A written confirmation will be sent out by INTERCOM Dresden GmbH with specification of the exact hotel address and further details. With this confirmation the reservation is binding and rooms are reserved until 18:00 on the arrival day. In case of late arrival you have to inform the booked hotel directly. The guest is responsible for payment of all charges to the hotel directly. All changes or cancellations must be submitted in writing to INTERCOM Dresden GmbH. Cancellations received after March 21, 2010, the first night, later than May 16, 2010 the entire stay will be charged to the credit card on file through INTERCOM Dresden GmbH. Your credit card will only be charged in case of cancellation before the conference. The payment of the entire stay and your extra costs from the hotel will be charged directly by the booked hotel. The credit card is for guarantee purposes only. Your credit card will not be charged until you check out or fail to cancel before the deadline. The guest is responsible for payment of all charges directly to the hotel.

ACCOMPANYING PARTNERS PROGRAMME

All tours will only take place with a minimum number of participants; otherwise the tour will be cancelled. In this case participants will receive back the paid fee. Cancellations are possible until April 30, 2010. Cancellations received after April 30, 2010, are not refundable. All refunds will be settled within 6 weeks after the congress.

Tours have to be paid by credit card. After receiving a written confirmation by INTERCOM the booking is binding. All changes or cancellations must be submitted in writing to INTERCOM Dresden GmbH. For the social and accompanying partners programme VAT is not shown according to the § 25 German Turnover-Tax Law (German: UstG).

LIABILITY

INTERCOM Dresden GmbH shall be liable in the framework of a duty of care as a respectable businessman according to statutory provisions. Liability of INTERCOM Dresden GmbH – for whatever legal reasons – is limited to intent and gross negligence. The liability of commissioned service providers shall remain unaffected by this. Participation in the conference and all events is on the own risk of the participants.
HOTEL DESCRIPTIONS

The Taschenbergpalais Kempinski is the top hotel in Dresden. Close to the well-known historic sights of Dresden, like Semper Opera House, Zwinger, Residential Castle and Church of our Lady, the Hotel Taschenbergpalais Kempinski Dresden is a vantage point for your excursions to the historic city centre as well as the enchanting surrounding of Dresden. Walking distance to the congress venue: 0.9 km

Prices per night:
€ 185.00 single room
€ 215.00 double room

In the baroque heart of Dresden lies the jewel of a five star hotel, the Radisson SAS Gewandhaus Hotel. Originally built as a warehouse in 1770, the historic Gewandhaus became a five star Radisson SAS Hotel in 1997. The hotel is beautifully designed and has a spacious glass-domed inner court that forms the centre of the hotel with the restaurant, bar, lobby lounge and open fireplace.
Walking distance to the congress venue: 1.7 km

Prices per night:
€ 179.00 single room
€ 199.00 double room
HOTEL DESCRIPTIONS

**InnsIdE PREMIUM HOTEL Dresden****
Salzgasse 4, 01067 Dresden

Dresden’s new design hotel, located in the historical centre in between the world-famous “Frauenkirche”, the river “Elbe” and the “Semper” Opera House.
The four-star superior Innside Premium Hotel Dresden offers in 180 extravagant studios and suites, exemplary sleeping comfort with king-size beds in air-conditioned, light-filled design ateliers and transparent, innovative bathrooms with rain showers.
Walking distance to the congress venue: 1.3 km

**Prices per night:**
- Early rate – € 158.00 single room
- Booking until Nov. 30, 2009: € 182.00 double room
- High rate – € 198.00 single room
- all bookings after Nov. 30, 2009: € 228.00 double room

**SteIGenBerGer HOTEL de Saxe****
Neumarkt 9, 01067 Dresden

Located in the heart of magnificent grand baroque architecture, the Steigenberger Hotel de Saxe welcomes you. Offering exquisite comfort in a prime location, directly opposite the famous “Frauenkirche” (Church of our Lady) and in the immediate vicinity of all the major sightseeing highlights, such as the: Semper Opera House, Zwinger and Royal Palace.
Walking distance to the congress venue: 1.3 km

**Prices per night:**
- € 170.00 single room
- € 190.00 double room

**Art’OTel Dresden****
Ostra-Allee 33, 01067 Dresden

The Art’otel Dresden offers a unique opportunity to experience the fusion of travel, design and art. Guests will enjoy the blend of class, taste, and first-rate service. With the combination of style and comfort, the hotel rooms are the perfect place to relax.
Walking distance to the congress venue: 0.6 km

**Prices per night:**
- € 135.00 single room
- € 160.00 double room

**BAYERISCHER HOF DRESDEN****
Antonstraße 33-35, 01097 Dresden

The hotel Bayerischer Hof Dresden offers you a location to feel comfortable. It is located near the Train-Station “Dresden-Neustadt”. The hotel appeals to business and individual guests.
Walking distance to the congress venue: 1.2 km

**Prices per night:**
- € 95.00 single room
- € 130.00 double room

**HILTON DRESDEN HOTEL****
An der Frauenkirche, 01067 Dresden

The Hilton Dresden Hotel is located in the heart of the historic city centre. Enjoy the view on the “Church of our Lady” and on the river Elbe. The Hilton Hotel offers excellent service and comfort.
Walking distance to the congress venue: 1.2 km

**Prices per night:**
- € 170.00 single room
- € 195.00 double room

**INTERCITYHOTEL DRESDEN****
Wiener Platz 8, 01069 Dresden

The InterCityHotel Dresden is located near the main railway station “Dresden-Hauptbahnhof”. You will feel at home in the comfortable atmosphere of this modern business-class hotel. The Baroque buildings of the historical city centre are within the immediate vicinity, which can easily be reached by foot or with the public transport ticket which comes free with your booking.
Walking distance to the congress venue: 2.4 km

**Prices per night:**
- € 113.00 single room
- € 136.00 double room
MARITIM DRESDEN****
Devrientstraße 12, 01067 Dresden
Located directly on the banks of the river Elbe right beside the congress venue, you can find the MARITIM Dresden. It has all amenities you can expect from a first-class-hotel. Walking distance to the congress venue: 0.1 km

Prices per night:
- € 170.00 single room “Classic”
- € 195.00 double room “Classic”
- € 190.00 single room “Superior”
- € 215.00 double room “Superior”

PULLMAN DRESDEN NEWA****
Prager Straße 2c, 01069 Dresden
Style, design, a comfortable atmosphere, personal service and a fantastic city location characterise Pullman Dresden Newa on the trendy shopping boulevard Prager Strasse. The old town centre with Frauenkirche church and Semper Opera is only an 8 minute walk away. Walking distance to the congress venue: 2.1 km

Prices per night:
- € 137.00 single room
- € 165.00 double room

THE WESTIN BELLEVUE****
Große Meißenbr Straße 15, 01097 Dresden
Situated amidst the beautiful gardens along the banks of the Elbe, The Westin Bellevue, Dresden offers a high level of comfort. With their magnificent view of the Frauenkirche and Semper Opera, the Bellevue Gardens and terraces invites one to stay for awhile. Walking distance to the congress venue: 1.3 km

Prices per night:
- Early rate – € 135.00 single room
- Booking until Dec. 1, 2009: € 155.00 double room
- Medium rate – € 155.00 single room
- Booking Dec. 2 – Feb. 1, 2010: € 175.00 double room
- High rate – € 170.00 single room
- all bookings after Feb. 2, 2010: € 190.00 double room

L HOTEL DRESDEN ALTSTADT***
Magdeburger Straße 1a, 01067 Dresden
The L Hotel Dresden Altstadt is within walking distance from the old city, the fair grounds, the congress centre, and many other important locations. The L Hotel is located to the congress centre. Walking distance to the congress venue: 0.5 km

Prices per night:
- Early rate – € 94.00 single room
- Booking until Jan. 1, 2010: € 119.00 double room
- Low rate – € 99.00 single room
- Booking Jan. 2 – March 5, 2010: € 124.00 double room
- Medium rate – € 104.00 single room
- Booking March 6 – April 5, 2010: € 129.00 double room
- High rate – € 114.00 single room
- all bookings after April 6, 2010: € 129.00 double room

IBIS HOTELS DRESDEN**
Prager Straße, 01169 Dresden
The 3 hotels of the IBIS-chain are located directly in the centre of Dresden - 5 minutes to the central station. All sights of the old town can be easily reached by foot. Walking distance to the congress venue: 1.8 km

Prices per night:
- € 85.00 single room
- € 105.00 double room

CITY HERBERGE
Lingnerallee 3, 01069 Dresden
The City Herberge offers an alternative accommodation with a hostal character of its own at low prices. It is the only and unique ho(s)tel in the very centre of the old town of Dresden. The rooms are furnished simple and functional. Walking distance to the congress venue: 2.5 km

Prices per night:
- € 56.00 single room
- € 74.00 double room
SIGHTSEEING TOURS

Intercom Dresden has arranged a selection of tours of Dresden. Tours can be booked online via a link on the ESGAR website www.esgar.org
All tours will depart from the congress venue, unless otherwise stated. The tours are exclusively organised for ESGAR 2010 participants and accompanying persons. The minimum number of participants is 15 per tour unless otherwise stated. The prices stated are per person including VAT. If the tour has to be cancelled we will refund your expenses.

WALKING TOUR
THROUGH THE HISTORICAL CITY CENTRE

June 1, 2010 13:00 – 16:00 (Tour 1)
June 2, 2010 13:00 – 16:00 (Tour 2)

A guided walking tour through the pedestrian area of the historical city centre of Dresden is a “must” for visitors. In a three hour tour you will get an overview of the most famous sights of Dresden, such as the Residence Castle, the Semper Opera House, the Zwinger and the Church of our Lady.

**Price:** € 17.00 per person
**Including:** Guide

**Please note:** Good walking shoes and the ability to walk on uneven pavement are recommended.

MUSEUM TOUR “OLD MASTERS GALLERY”

June 2, 2010 09:30 – 12:00 (Tour 3)
June 3, 2010 13:30 – 16:00 (Tour 5)

The “Old masters” Gallery located in the splendid Baroque Zwinger with the world-famous “Sixtine Madonna” by Raffael is one of the best known painting galleries in Europe. The art collection offers such a variety of objects that everyone will enjoy the visit.

**Price:** € 25.00 per person
**Including:** Ticket to the Old Masters Gallery, Guide

CITY TOUR BY COACH

June 2, 2010 09:00 – 12:00 (Tour 4)
June 4, 2010 14:00 – 17:00 (Tour 6)

A sightseeing tour outside of the city centre will lead you to the gorgeous Elbe castles located beautifully on the hillside of the Elbe bend.

**Price:** € 35.00 per person
**Including:** Guide, Transfer by Motor Coach, Guided tour in the Parks of the Elbe Palaces, Cable railway, Visit to Pfund’s Dairy (excl. tasting)

**Minimum:** 20 participants

MUSEUM TOUR OF THE HISTORICAL GREEN VAULT

June 3, 2010 09:30 – 12:00 (Tour 3)
June 4, 2010 09:30 – 12:00 (Tour 4)

A short walk from the International Congress Center through the pedestrian area will lead you to one of the choicest jewel collections in the world. The Historic Green Vault shows collected treasures of the Kings and Dukes of Saxony which survived both World War II and the transfer to Russia. This is a personal audio-guided tour.

After your visit of the Historic Green Vault, your guide will show you the most interesting places of the historic city center on a short guided tour.

**Price:** € 27.00 per person
**Including:** Guide, Ticket to the Historical Green Vault
EXCURSION TO PILNITZ

June 3, 2010 09:30 – 13:00 (Tour 9)

Take a coach trip and enjoy the beautiful view on your tour to Pillnitz. Visit the Park of Pillnitz Palace, a former summer residence of the famous Saxon King August the Strong.

The return journey to Dresden will be by steamboat. A ride on the Elbe river is a special experience.

Price: € 39.00 per person
Including: Guide, Ticket for the boat trip, Transfer by Motor Coach
Minimum: 20 participants

EXCURSION TO MEISSEN / MORITZBURG

June 2, 2010 08:30 – 16:30 (Tour 10)

A trip by coach to the 1000 year old charming town of Meissen, includes a narrated visit of the well-known Meissen Porcelain factory built in the 18th century. In the factory not only the production process of the "White Gold" will be shown, but you will also see the impressive collection of exceptional porcelain masterpieces. There will also be a guided tour through the historical city.

On our way back to Dresden we will stop at the hunting lodge Moritzburg.

Lunch will be by your own (60 minute Lunch break in Meissen).

Price: € 72.00 per person
Including: Guide, Transfer by Motor Coach, Ticket for Porcelain Factory, City walk Meissen, Visit at the Cathedral

Please note: Much of this tour is in the pedestrian area of the old city and requires the ability to climb steep slopes and steps. Good walking shoes and the ability to walk on uneven pavement are recommended.

SAXON SWITZERLAND

June 4, 2010 8:30 – 16:00 (Tour 11)

Take a coach trip to the beautiful Elbe sandstone massif known as Swiss Saxony. A trip to the Saxon Switzerland is an experience of a different kind.

We will drive by coach to the small town Wehlen. From here we go to the Bastei (about 1.5 hours hiking or by bus in bad weather). A stunning view across the valley of the river Elbe will surprise you.

Afterwards we will drive to the Fortress Königstein, where a guided tour is arranged to show you the 750 years’ history and the impressive configuration of architecture.

Lunch will be on your own in the Bastei.

Price: € 65.00 per person
Including: Guide, Transfer by Motor Coach, Ticket for Festung Königstein (guided tour)
Minimum: 20 participants

CITY TOUR GÖRLITZ

June 5, 2010 9:30 – 15:30 (Tour 12)

When you come to Görlitz for the first time, its architectural variety will likely have you spellbound. The historic city is among the best preserved in Central Europe. Görlitz is deemed to have Germany’s most extensive heritage area with a total of 4000 listed buildings.

Lunch will be on your own in Görlitz.

Price: € 65.00 per person
Including: Guide, Transfer by Motor Coach, Guided tour in Görlitz
Minimum: 20 participants

Please note: Good walking shoes and the ability to walk on uneven pavement are recommended
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www.staralliance.com

Information correct as at 08/2009
MEMBERSHIP CATEGORIES

**Active Members**
Active Membership of the Society is open to European Radiologists who have a prime interest in Gastrointestinal and Abdominal Radiology. By this it is assumed that they will spend at least 50% of their time working in the sub-speciality and will have published in this field.

**Junior Members**
Residents can become Junior members while training for specialisation in General Radiology and/or training for Sub-specialisation in (1) Gastrointestinal and Abdominal Radiology and/or (2) Interventional Radiology.

Application for Junior Membership must be accompanied by a confirmation about the residency status of the applicant, signed by the head of the department. Junior Membership is valid for three years at maximum or will end once the residency in radiology is terminated.

**Fellows**
During the General Assembly in Valencia in 2009 the ESGAR Abdominal Fellowship was introduced to its members. This fellowship programme is a significant change of the application procedure for ESGAR fellowship of ESGAR. One of the ways to become a Fellow of ESGAR is to fulfil a curriculum, including attendance at main relevant meetings, significant scientific input in ESGAR or ECR and publication, as well as a 3-months period of an Exchange Programme. This programme is based on the offer – supported by a combined effort of ESGAR and ESOR – to younger colleagues, proposing them to spend a 3-months period in a reference centre, with a financial support.

The ESGAR Abdominal Imaging Fellowship Programme starts in the year 2010 which implies a necessary transition period of at least 3 years. During this period active members of ESGAR may be qualified to become Fellows without having completed the ESGAR Abdominal Fellowship programmes. The Executive Committee may propose to recognise that the applicant has equivalence to the ESGAR Abdominal Fellowship programme, therefore complying with paragraph 5.4 of the ESGAR By-Laws.

**Corresponding Members and Fellows**
Radiologists from outside Europe can be considered for Corresponding Membership and Fellowship.

**Associate Members**
Non-Radiologists with a special interest in Gastrointestinal and Abdominal Radiology such as radiographers, nurses and individual members of industry, etc. can be considered for Associate Membership.

**Corporate Members**
Corporations or other organisations, including commercial enterprises, interested in the activities and objectives of the Society, contributing to the Society by funding.

MEMBERSHIP FEES

<table>
<thead>
<tr>
<th>Membership Type</th>
<th>Fee</th>
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<tr>
<td>Active Members, Fellows</td>
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<tr>
<td>Corresponding Members, Fellows</td>
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<tr>
<td>Junior Members</td>
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HOW TO BECOME A MEMBER OF ESGAR

Please fill in the application form, have it signed by a proposer and send it to the address shown on the form. If you do not know any ESGAR members and therefore do not have a proposer, please send the application form together with a short Curriculum Vitae to the address shown on the application form. There are national representatives of ESGAR contact persons in many European countries. Please refer to the ESGAR website www.esgar.org for the contact addresses and further information. Your application can also be submitted via our website.

Applications are received by the Chairman of the Membership Committee. Proposed candidates for membership are admitted by the Executive Committee and will be approved by the General Assembly.

MEMBERSHIP BENEFITS

- Reduced registration fee at the Annual Meetings and Workshops of the Society
- Newsletter
- Member’s Handbook
- Personal ESGAR Account at www.esgar.org:
  - Member’s Directory
  - E-Congress (including Electronic Posters and web-casts)

Membership Application forms are available on the ESGAR website: www.esgar.org
ESGAR ACTIVITIES
European Society of Gastrointestinal and Abdominal Radiology

ANNUAL MEETINGS

ESGAR 2010, Dresden/DE
21st Annual Meeting and Postgraduate Course
June 2 – 5, 2010
Meeting President:
Prof. Michael Laniado, Dresden/DE

Information and registration on www.esgar.org

ESGAR 2011
22nd Annual Meeting and Postgraduate Course
Venice (Lido), Italy
May 21 – 24, 2011

Information and registration on www.esgar.org

ESGAR 2012
23rd Annual Meeting and Postgraduate Course
Edinburgh, United Kingdom
June 12 – 15, 2012

CT-COLONOGRAPHY HANDS-ON WORKSHOPS

12th ESGAR CT-Colonography Hands-on Workshop
April 21 – 23, 2010, Amsterdam, The Netherlands

13th ESGAR CT-Colonography Hands-on Workshop
September 23 – 25, 2010, Lisbon (Cascais), Portugal

GE Doctor to Doctor training on CT-Colonography
February 18 – 19, 2010, Buc, France
May 6 – 7, 2010, Buc, France
October 2010, Buc France

IMAGE-GUIDED ABLATION WORKSHOP

4th Image-guided Ablation Workshop
February 22 – 23, 2010, Munich, Germany

LIVER IMAGING WORKSHOPS

6th Liver Imaging Workshop
April 29 – 30, 2010, Barcelona, Spain

7th Liver Imaging Workshop
September 10 – 11, 2010, Vienna, Austria

Information on all ESGAR Activities can be found on www.esgar.org
Many radiologists trust Medicsight ColonCAD to help them make a more reliable, accurate diagnosis. That’s because, unlike some other CAD systems, it is validated on one of the world’s most population-diverse, optically verified CT Colonography scan databases.

Access to ColonCAD is available via our partners’ visualisation platforms. In addition, Medicsight have developed MedicRead 3.0 Colon; a competitively priced, stand-alone visualisation workstation that incorporates ColonCAD 4.0. This latest version of CAD demonstrates increased performance with a 50% reduction in false positives without any significant loss in sensitivity.

And even better, Medicread 3.0 Colon is the first visualisation workstation to be available online, with a 30-day free trial version that can be downloaded at www.medicsight.com

You may also contact us at info@medicsight.com

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www.medicsight.com

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* Subject to regulatory approval.