

**19<sup>TH</sup>**  
**ANNUAL SYMPOSIUM**  
ON PATIENT BLOOD MANAGEMENT,  
HAEMOSTASIS AND THROMBOSIS

# *Evaluation Summary*

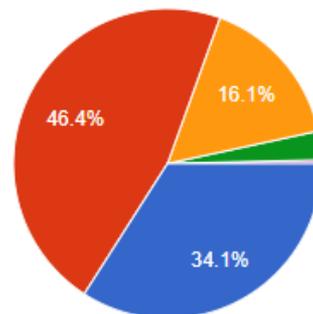


**APRIL 12-13, 2018 LISBON**

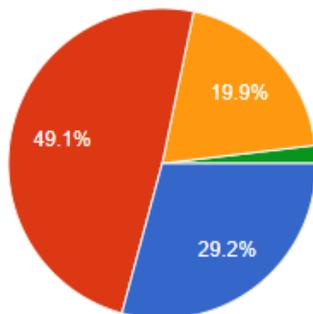
# OVERALL EVALUATION

## Was this symposium helpful to keep you up to date regarding the latest advancements in the field?

267 responses



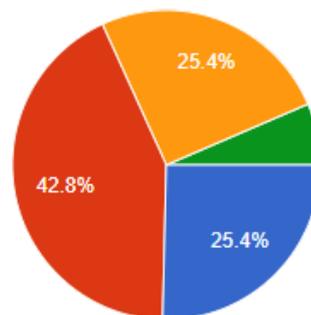
80.5%



78.3%

## Was the programme objective, balanced and free of commercial bias?

264 responses



68.2%

## Was this symposium helpful for your clinical practice?

267 responses

# What were the most effective aspects of this symposium, and why?

162 responses

- |                    |                               |   |
|--------------------|-------------------------------|---|
| PPH                | Focusing on anemia            | Updates on iron administration          |
| DOACs              | Interdisciplinarity           | The multidisciplinary approach          |
| Anemia             | Poster presentations          | New evidence on new iron drugs          |
| PBM                | The state of the art          | Interdisciplinary co-operation          |
| Actuality          | Treatment of anaemia          | Patient Blood Management topics         |
| Networking         | Nice posters presented        | New DOAC treatment and antidotes        |
| Organization       | EASY READER for ferritin      | From the approach as alternatives       |
| International      | Very good presentations       | Simple straightforward information      |
| Good speakers      | Patient blood management      | Use of iron in preoperative anemia      |
| PBM modalities     | Well organized. Good app      | Good time keeping most of the time      |
| Allround update    | Supplemental iron therapy     | Meeting experts to share experience     |
| Lunch sessions     | Networking with colleagues    | Iron deficiency treatment of anaemia    |
| Meet the experts   | Presentation of information   | PBM aspects, latest research presented  |
| Clinical utility   | Control bleeding management   | The learnings update and new knowledge  |
| Multidisciplinary  | To meet experts in the field  | Many aspects about transfusion therapy  |
| Update information | Learning from other practices | Anemia. For pre-intervention management |

Speakers quality; knowledge improvement

Depth of scientific knowledge presented

Updated information with great speakers

Treatment of anemia and dosage of IV Fe.

Great speakers, interesting lecture topics

Excellent science in a friendly atmosphere

Practical application of the topics covered

A focused review of evidence based practice

Symposium and international representatives

The high level of speakers and presentations

Discussion and networking after the sessions

The quality of the presentations and speakers

Cell Salvage talks as we have just bought one

Gain knowledge to improve my medical practice

Multidisciplinary approach to clinical problems

Tranexamic acid, preoperative anemia screening

Managing anaemia in the elderly and special groups

Fluid management, very helpful in my clinical practice

Balance between physiology-physiopathology and clinical

First day of Symposium was very interesting and helpful

Patient blood management- obstetrics, DOACs & bleeding

The possibility of effectively minimize transfusion need

To understand the serious problem of preoperative anemia

Networking opportunities; experiences in other countries

Treatment of anaemia, PBM Multidisciplinary implementation

Opportunity to network with colleagues from all over the world

Updates on iron deficiency anaemia and patient blood management

Be more efficient in screening and treating anemia preoperative

Multidisciplinary, discussions, experienced and great speakers

Compact program in 2 days with no or little concurrent sessions

Anemia in the elderly. Because it is a very particular population!

Anaemia management as topical in my current practice and the hospital.

PBM and alternatives to blood transfusion / danger of blood transfusions.

Preoperative anaemia related topics as we are currently implementing guidelines locally.

Availability of speakers to engage in discussions during and after their sessions.

The subjects of the symposium were of my interest and relevant for my clinical practise.

The contact with multidisciplinary professionals and talks involved in transfusion medicine.

O número de especialidades incluídas no congresso, a diversidade dos palestrantes e os temas.

The most interesting points were when speakers challenged dogma or tradition and returned to basics.

Lectures gave clinical information and the stands as these enabled you to discuss current technology e.g. ROTEM.

“The newest evidence”, because it is really important to base the way of treatment on the latest scientific evidences.

Stimulating speakers and a good range of relevant topics. Find the short presentation format keeps audience very interested.

Better understand the practical theoretical aspects of the PBM, because they can then be contextualized in their own reality.

La visión multidisciplinar e integral del paciente y como abordar el PBM así como la experiencia de otros países que han implementado un programa de PBM.

Initial session in Auditorium, very informative and educational. Good discussion. Poster presentations to see what is able to be done in individual hospitals.

I particularly appreciated the in-depth reflection on iron deficiency and the perspective of oxygen and iron. This will lead me to modify manuscripts in preparation.

A multidisciplinary approach to PBM! speakers from different backgrounds who spoke well within their expertise. Excellent speakers  
Excellent timing for all of the sessions.

The most effective aspect of congress were some interesting topics which are on the most discussion in our days as lyophilized plasma, back of aprotinin... the focused aspect to anemia.

I found this symposium exceptionally informative: - tranexamic acid - role of iron (preoperative anemia and risk of thrombosis) - role of hepcidin - women that haven been pregnant (not) as blood donor.

It's very helpful to know about studies that confirm and show that blood is a very strong drug and to use it has got consequences - for me as a nurse working at anaesthesia – haven't got the last word, but I can also incorporate my knowledge about the use of blood products.

## What were the least effective aspects of this symposium, and why?

126 responses

N/A	Time Management	The duration it was limited
None	Too many breaks	Aspect multidisciplinaire
Novelty	O número de dias	Rather repetitive programme
Nothing	A lot of options	The mañana mañana mentality
Posters	Was all well done	Far of the center of the city
Cold hall	Fibrinogen history	There was no negative aspects
Monitoring	Workshops to short	Delegate sign in/ registration
Lunch boxes	NOAC and hemostasis	Too much concentrated program
Some posters	Case interpretation	Redundant physiology explanations
Poor lunches	Cell saving too small	The lack of front line experiences
The cold room	Logistic organizations	Lack of more bioethics perspective
Small lunches	No contradictory debate	Multiple sessions at the same time
Fluid therapy	Not enough on pediatrics	None, I really enjoyed the meeting.
There were not	Poor selection of posters	Improve workshop and clinical cases
Place to small	The catering organization	The site of the meeting was terrible
Did not exist	All aspects were effective	

126 responses

Difficult to implement in our country  
Intraoperative PBM somewhat neglected  
Did not enjoyed second day of symposium  
Managers point of view, iron in tablets  
Some overlap between interesting sessions  
Some subjects not so relevant for my practice  
Presentation bias because of personal opinions  
Relevant subjects were presented at the same time  
Specialised cardiac themes. Overemphasis of IV Iron  
A lecture have to be no more than 10 minutes long  
Too much anemia and iron, newest evidence not so new  
No great evolution comparing to past nata congresses  
N/A this is an effective, well organised small symposium  
Talks about blood transfusion / danger of blood transfusions  
As to cardiac surgery, obstetrics, because I do not deal with that

Too many parallel lunchtime sessions, missed a few important topics  
At times lack of clinical practical aspects applicable in our day-to-day  
Needed longer to register on first day. Longer time before first lecture  
Some presentations at same time and not repeated, no chance to attend both  
Lunchtime sessions are difficult to follow due to people eating all the time  
Lunch was a bit chaotic (could be clearer where, when and if we all get lunch)  
This evaluation form, there was no option to tick if you did not attend some talks  
In general, the symposium was very useful and interesting. I have no negative aspects  
Parallel-sessions are unfortunate, more lectures for “advanced” knowledge would be beneficial

The venue. There wasn't a lot of space to go around in the poster area and the exhibition area.

Lack of more comparative studies between those who use transfusions and those who use alternatives

I think all the aspects were effective in their own way and all of them were really helpful and interesting.

Frankly, not much. Firenze's NATA had already been particularly rich in lessons, and this one is on the same track.

The physical space where the symposium took place made very difficult to circulate and pay attention to the posters.

The venue is good but certain areas were too crowded for people to move around, especially in the commercial booths area.

Discussing "appropriate" use of allogeneic blood and blood products. It is impossible to use a bad product appropriately.

The repetitive nature of many of the presentations and the poster presentations generally. This needs a bit of perking up!

Some presentations very basic, not representative, as about the guidelines, were was discussed how to perform a guideline...

Too much overlap between some presentations (e.g. WHO normal values for anemia which was discussed and part of several presentations).

Some sessions didn't give a lot of new insights to people who already follow the PBM literature, but most sessions were very interesting

If whole blood products should have a comeback - I think modern medicine should care and research more in how not to use blood products anymore and where to find alternatives.

I would like more technological innovations to be presented to the surgical treatment, intra and postoperative, that would promote better reutilization of the autologous blood.

The feeling that industry is trying to overlap blood transfusion. In a lot of situations it has been almost accomplished but there is still a long way to go specially in the cells field.

Registration at the start of the symposium was rather ineffective resulting in a delay of the start of the symposium: - desk too small - names sorted by given name instead of last name....

The logistic aspects were very disappointing. First day registration was taking too long, the exposition area was very crowded, lunch time was chaotic and no paper/pen provided at registration.

Occasionally speakers referred to their local situation just a bit too much which then lost relevance to much of the audience I suspect (particularly UK speakers referring to NHS which isn't doing too well right now).

Cell salvage workshop too biased towards a company. Did not present overview of ICS across the world, just how great their machine is at washing out contaminants. TEG/Rotem workshop very interesting with a clinical input, but their traces were too abnormal - how many routine hospitals see these day in day out, other than a handful of international MTCs.

## Which topics would you suggest for future symposia?

126 responses

PBM	Platelet function	Results or upcoming trials
PPH	Sharing algorithms	Continue amongst similar topics
Aneamia	Platelet dysfunction	More POC testing and monitoring
Apheresis	Anaemia and malaria	Transfusion transmitted diseases
Bioethics	Debates PRO CON. EPO	TIC. Massive bleeding in trauma
Donors care	Pre-hospital problems	Clinical cases - decision making
Cell salvage	Direct anticoagulants	Predictors of transfusion in ICU
New advances	More about whole blood	Postpartum haemorrhage and anemia
Bigger lunches	Transfusional medicine	More about Thrombosis and less PBM
PBM in children	PBM in emergency cases	More about new agents in hemostasis
Haemostaseology	Round table discussions	Emergency management of heamorrhage
Topics are good	Transfusion side effects	Management of heavy profuse bleeding
The new evidence	PBM in internal medicine	Part with cases from everyday practice
More cell saving	Perhaps more trauma focus	Advancements in bloodless patient care
Artificial blood	Treatment with platelets.	Results of PBMimplementation in Europe
Thrombosis focus	Isovolemia - what measures	More on point of care testing (ROTEM/TEG)

- The central role of internal medicine in PBM
- Perioperative management of patients on DOACs
- New blood groups and its impact in transfusion
- More practical topics, case comments, workshops
- Use of erythropoietin (tips), algorithms for PPH
- Auto-transfusão, cell saver, doação pre operatória
- Best clinical practice massive bloodless management
- PBM is a good topic, and alternatives to transfusion
- Traitement de l'anémie avec aspect multidisciplinaire
- Transfusion therapy in haematopoietic transplantation
- Rational bloodsampling, reversal of platelet inhibitors
- Developments in the use of cell savers in cancer patients
- Diagnosis of iron deficiency in condition of inflammation
- Strategies to prevent and to treat intraoperative bleeding
- PBM Clotting strategies Focus about fibrinogen "home made"
- Talk about all three pillars of the Patient Blood Management
- Haemostaseologic aspects of PBM, including antiplatelet therapy
- Rare diseases with coagulation disorder in the preoperative period
- How to implement PBM and how to do when the drugs are not reimbursed
- Overcoming the challenges in starting PBM in your clinical practice
- More attention on other blood products such as serum-derived eye drops
- What are the advances and their cinematic results of artificial blood?
- Volume regulation and management, transfusion safety, administration safety
- Approach of alternative transfusion and coagulopathy in Hematoncology patients
- Anaemia and transfusion in medical patients
- Managing anaemia in the community

Anaemia in palliative care, more on PBM and blood avoidance in medical patients.

More relevant hemostasis control and transfusion practices experiences from experts.

Hemophilia - new perspectives. How to implement and monitor a PBM in your institution.

Comparative studies between those who use transfusions and those who use alternatives.

State of the art on anti-hepcidin drugs; comparisons of physiologic transfusion trigger.

There are not so many conferences simultaneously, because it implies not going to all.

ICS, more on DOACs and keeping up to date with reversal. Anti-platelet therapy and reversal.

Some topic about thrombosis, and management of bleeding and thrombosis in pediatric population.

Transfusion strategies in Oncology; Cell saving in oncology; best transfusion policy in cardiac surgery.

If there is there a way to bring up PBM and the careful use of blood products more in the mind of doctors.

Definition of iron deficiency in difficult subgroups (elderly, patients with concomitant neoplastic or inflammatory diseases)

A session on PBM/transfusion triggers or treatment of massive bleeding in specific areas (oncology, g-e bleeding, obstetrics? ...)

Trataría los mismos temas, sin duda. Ha sido un simposium muy completo. Estoy muy agradecida a los ponentes por sus magníficas charlas.

We should come down to what happens in small hospitals with severe difficulties to PBM implementation and daily effort to keep in this fight.

Primary hemostasis. Hyper fibrinolysis. Since NATA means alternatives to blood transfusion it would make sense to present alternatives and not return to whole blood.

In the era of 'big data' and ML; which systems should be put in place to gather data to draw evidences about many of the questions that we raised during the conference?

Promote an original approach based on biochemistry, physiology and clinical trials, do not hesitate to break the mould of medical habits rather than trying to influence practice.

I would like in the future to continue the discussion on PBM, Anemia, follow-up of the oncological patient, Hemorrhage in pregnancy and postpartum, follow-up of patients with hemoglobinopathies.

1. Optimizing the haematocrit without blood transfusion 2. Minimizing blood loss in surgery - overview of techniques 3. Optimizing tissue oxygenation in massive haemorrhage 4. Massive haemorrhage protocol without transfusion.

Monitoring of microcirculation (e.g. video microscopy), update on significance of F XIII, topically applied powders and gels, etc to 'stop' bleeding, future developments re POCT of coagulation (i.e. beyond TEG) Rather than have various speakers presenting and referring to the same trial many times maybe it would be good to have a review of the different trials followed by discussion?

The hurdles to overcome to implement the PBM concept in relation to differently allocated Budgets. i.e. in some countries the Patient is recorded in a certain DRG and can't be admitted to the Hospital 2-3 weeks before using the same DRG Budget for an elective surgery. The EU has now recommendations on how to implement PBM, are any activities planned in other larger emerging markets like Russia, China Japan etc.?

## Do you have any comments or suggestions regarding NATA's website and e-learning platform?

90 responses

Excellent

It's nice!

Not alright

Very good

It's very good

Very good app

Can not log on

Congratulations

Very good idea

Best acessability

It is very usefull

Excellent resource

No, keep on going!

They are very good

Keep doing good work

A very good resource

It's quite exhaustive

Excellent learning tool

Should be better up to date!!!

More specialists to be improved

I think that they are very good!

Congratulations to the organization

Regular update of what is new in PBM

I never use it. As from now, I will

I think that everything is well. Congratulations.

Introducing some lectures on future trends and strategies

It's excellent - I use it often. The NATA app is a triumph.

Never used before, I'm waiting to see the presentations I missed

The website is hard to navigate and some papers are behind paywalls

## Do you have any comments or suggestions regarding NATA's website and e-learning platform?

90 responses

A quite useful platform with high quality matters and way it's written.

Website is sometimes a bit difficult to get access to the topics I chose.

App was crashing during the voting for best posters not allowing us to vote.

I would like to have access to the works presented in Power Point or pdf format.

Respecto al "NATA forum", me gustaría poder descargar la presentacion sin audio.

It would be helpful to have the full programme booklet as a downloadable PDF file.

Could be more friendly to all users, open more to non registered, it will increase the traffic and importance.

Literature reviews are very good. Extremely positive with all the lectures on-line the day after the congress.

I was told during this symposium that the slideshows were going to be available on the NATA app. I can only get the abstract book.

I think that the lectures from the symposia should be uploaded on the website, so that way all of the NATA members will be able to use them for reference.

## Do you have any comments or suggestions regarding NATA's website and e-learning platform?

90 responses

Website is very good but please after paying the fee fore the congress we did not get any information that payment was successful! But would be helpful in future.

The resources on the website are not easily accessed and I would like to see it used as a resource for papers and evidence on all things around what NATA is all about.

Website is OK; the links to the scientific and industry sponsored programs could be somewhat better highlighted. Nice app ! (unfortunately not for Windows Phone, but that's a general problem).

I appreciated the high level of organization in this seminar and the high scientific level of the presentations and congratulated the organization for its commitment to the dynamism of this so important theme in today's developed world, which was reflected in the adhesion verified.