

NEWS

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Major Diabetic Limb Salvage Conference Set for Washington, DC, September 18-20, 2008

The second annual Georgetown University Hospital Conference on a Team Approach to Diabetic Limb Salvage sponsored by Georgetown University Hospital/MedStar is set for September 18-20, 2008, at the JW Marriott Pennsylvania Avenue in Washington, DC. The three-day education program, which is expected to attract 1,100 attendees, will be presented by more than 60 nationally known diabetic limb salvage experts. Participants can earn 27.6 CMEs.

“The numbers tell the story of this conference,” says Christopher E. Attinger, MD, co-chair of the Georgetown University Hospital Conference on a Team Approach to Diabetic Limb Salvage and medical director of the Georgetown Wound Healing Clinic and professor in the departments of orthopaedic surgery and plastic surgery.

Dr. Attinger ticks off the list: “We’re expecting 1,100 limb salvage specialists, more than 75 corporate exhibitors and supporters, 62 faculty, and we’ll have 27 symposia and interactive workshops, 6 live surgical case sessions from Georgetown’s ORs and cath labs and 3 full days of the best diabetic limb salvage education.”

Last year’s inaugural conference, also in Washington, exceeded all projections for attendance and participation. “We had more than 1,000 registered attendees from 44 U.S.

states, the District of Columbia, Puerto Rico and 23 foreign countries, 52 faculty members and more than 60 corporate exhibitors,” says Richard F. Neville, MD, conference co-chair and chief of vascular surgery at Georgetown. “We’re set to better those figures this year,” says Dr. Neville.

“The education rooms, workshops and symposia were packed last year – it’s clear that there’s a real need for this kind of medical conference,” says John S. Steinberg, DPM, also a conference co-chair. Dr. Steinberg is chief of podiatry and co-director of the limb salvage team at Georgetown.

The target audience for the conference includes diabetes and wound healing specialists, vascular surgeons, orthopaedic surgeons, podiatrists, plastic surgeons, endocrinologists, infectious disease specialists, cardiovascular and endovascular specialists, physical therapists, RNs , peripheral nerve specialists, and the rest of the entire team who work on the diabetic foot and limb salvage.

Lawrence B. Harkless, DPM, will receive the 2008 Georgetown Distinguished Achievement Award in Diabetic Limb Salvage in ceremonies the morning of September 19, 2008. Joy Drass, MD, MBA, president of Georgetown University Hospital/MedStar, will present the award on behalf of the hospital and the medical conference.

Dr. Harkless has been a mentor to many hundreds of podiatric residents and interns, a pioneer in integrating podiatric medicine into mainstream medicine, and a dedicated diabetes educator and diabetic foot researcher. Now, at the peak of his career, he has accepted a new challenge as Dean of Western University of Health Sciences College of Podiatric Medicine in Southern California. The new podiatry college, along with Western University’s colleges of dentistry and optometry, will first offer classes in 2009.

Attendees at the Georgetown conference, who are within walking distance of the White House and the Senate and House chambers, get a taste of Washington’s inside-the-beltway satire when the comedy troupe, Gross National Product, performs at the conference on the evening of September 19, courtesy of Advanced BioHealing.

At the conference, Georgetown physicians and staff will present details of the highly successful team approach to diabetic limb salvage that Dr. Attinger's group at the teaching hospital have developed over the past 18 years. Georgetown University Hospital is affiliated with Georgetown University School of Medicine and is a part of MedStar.

“Nationally, the prognosis for diabetic patients who develop foot ulcers is frightening: One-quarter undergo immediate leg amputation upon presenting with an ulcer, the recurrence rate after healing is 15–40 percent at seven months and 40-80 percent at 27 months, and after amputation over one-half lose the contra-lateral leg within the next three years while over 60 percent die within the next five years,” says Dr. Steinberg.

“A team approach, such as we've developed at Georgetown, has the highest chance for limb salvage because the components of a diabetic foot ulcer are beyond the talents of any given individual. With a team approach, we can save diabetic limbs with ulcers and even in cases where amputation is necessary we often can turn that into a successful outcome for the patient,” Dr. Neville says. Using a team approach such as that developed at Georgetown, over 96 percent of limbs can be saved, according to conference organizers.

Dr. Attinger explains that a DLS team should have a vascular surgeon, podiatrist, orthopedist, endocrinologist, internist, nephrologist and wound care team involving physician, nurse, nurse practitioner and physical therapist, pedorthetist, prosthetist and nutritionist. “The team is only as strong as its weakest link, as each member plays an integral role in the salvage effort,” says Dr. Attinger.

The conference has produced a 20-minute video called “Save It.” It features actual case studies of patients whose limbs have been saved by the team approach at Georgetown. Streaming video of selected conference educational sessions and the video will be made available, password-free, on the conference web site at www.DLSConference.com.

Those wishing to attend the conference can register on-line at www.DLSConference.com. Registration includes tuition, online course materials, 27.6

CMEs, two breakfasts and two lunches, five refreshment breaks and a Welcome Reception and Dinner with open bar.

A tour of the Georgetown University Hospital Center for Wound Healing will take place on the morning of Thursday, September 18.

The conference is being managed by International Conference Management. For more information, contact Dennis A. Vitrella, conference director, at dennis@DLSConference.com or telephone 337-235-6606 or visit www.DLSConference.com.

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