



UIP NEWSLETTER

ROAD TO UIP WORLD CONGRESS 2025

THE JOURNEY BEGINS ON OCTOBER 8, 2025

SAVE THE DATE!!!

Latam Invites You To The

XXI UIP WORLD CONGRESS

Buenos Aires 2025



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Click Here!

IN THIS EDITION



XXI UIP WORLD CONGRESS BUENOS AIRES 2025

Time is flying and soon we will all fly to Buenos Aires for the UIP World Congress (October 8-11).

The historic event will bring together the 81 Scientific Member Societies, stakeholders, KOLs and multi-specialty representatives from all continents. The congress will also host the General Council: the world assembly who will discuss on how to advance at best in vein-lymphatic global care, including the Executive Committee and 2029 World Congress venue selection. I'll have the honor to continue as President until 2027, while the rest of the Executive Officers will be renewed. The member societies can nominate their representatives for a position in the Executive Committee: in this month newsletter we report the technical notes on how to apply.

Indeed, the UIP starts with "U" and everybody who is feeling in position to promote moral and pro-active Phlebology and Lymphology advancement in the world is more than welcomed in reaching out. At the same time, the new Engagement Working Group will be nominated right after the Executive Committee, therefore another chance of teamwork is going to be available soon and details will be provided during the same UIP Buenos Aires World Congress

I remain at your full disposal (president@uipmail.org ; gnsrg@unife.it ; t. +393498012304), looking forward for gathering together in Buenos Aires and, before October, around the world.

Prof. Sergio Giancesini
UIP President 2023-2027



EXECUTIVE COMMITTEE SELECTION

TECHNICAL NOTES

After the General Council to be held at the Buenos Aires World Congress, the current president will remain in charge until 2027, while the remaining Executive Committee will be renewed.

All the societies who are in regular status of UIP membership, can nominate their candidate by logging in their UIP society page until June 19.

Once the nomination has been received, the nominee will have 14 days to accept their nomination, submitting also a CV and a vision related to the candidacy.

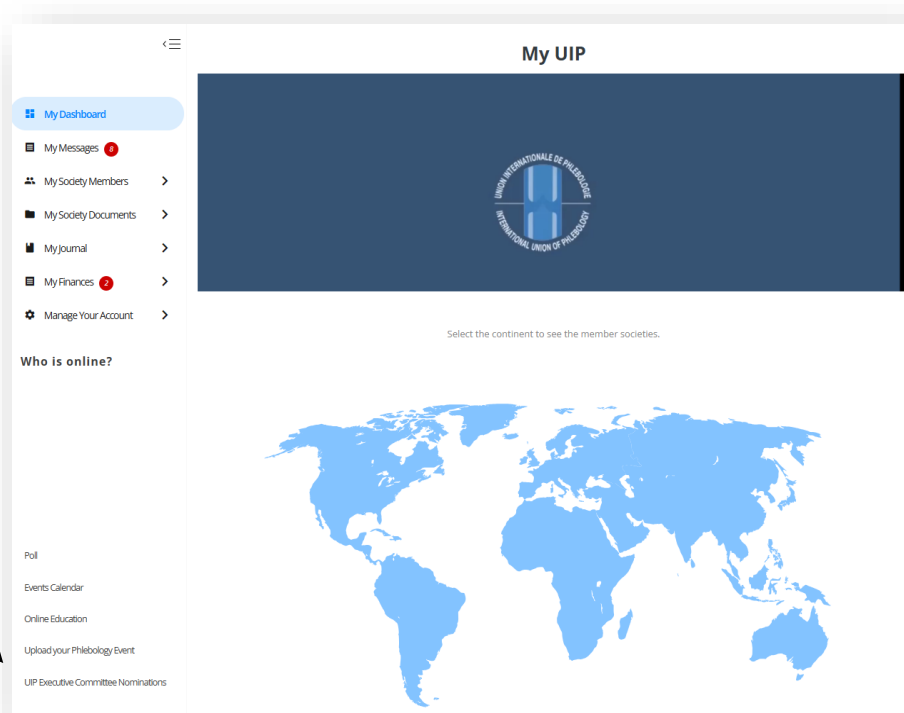
The final list of candidates will be published in the [UIP website](#).

The voting will be transparently visible and casted during the same General Council meeting in Buenos Aires.

STEP BY STEP NOMINATION PROCEDURE:

1) Login to the [members portal of the UIP Website](#) and click on "UIP Executive Committee Nominations"

CLICK
"UIP Executive
Committee
Nominations"



Name of Nominating Society

Name of Nominating Society *

Your name *

Title First Last

Society Email *

Person Being Nominated

Name *

Title First Last

Email * Country *

UIP Executive Position *

☐ President-Elect

☐ General Secretary

☐ Treasurer

☐ Chair of Education Committee

☐ Chair of Science Committee

☐ Chair of Congresses and Events

☐ Vice-President

2) Fill in the nominating Societies and the candidate details.

3) A confirmation email will be sent from the UIP to the nominating society and the candidate.

4) The candidate will have 14 days to reply to the UIP mail by the provided direct link.

5) The final list of candidates will be reported in the [UIP website](#).

6) During the General Council in Buenos Aires the Societies will identify the winners by transparent vote.

SPEAKER'S CORNER

ALL SPECIALTIES ARE BUENOS AIRES



Fanny Rodriguez Santos
UIP Engagement Working
Group

This year, Buenos Aires will take center stage at the XXI UIP World Congress, showcasing an inspiring model of multidisciplinary collaboration in venous and lymphatic care.

The congress program features exclusive multi-specialty sessions designed to foster exchange, learning, and innovation across disciplines. Whether you're a physician, nurse, physical therapist, student or researcher, this is a unique opportunity to connect with peers, pioneering comprehensive, patient-centered care for venous and lymphatic diseases.

From advanced surgical techniques to systemic approaches informed by patient-reported outcomes, from innovations in imaging to evidence-based rehabilitation strategies, every specialty will have a voice, and LATAM brings them all together in a powerful, unified presence.

Abstract submissions are now open! In addition to scientific abstracts, we welcome a variety of contributions, including case reports, technique descriptions (Free Abstracts), diagnostic or therapeutic protocols ("How Do I Do It?"), editorial reviews, and e-posters. The deadline for scientific abstracts is **July 8**, and for other categories, **September 22**.

Join us at the XXI UIP World Congress and experience first-hand the latest scientific advancements and the global community that's shaping the future of phlebology.

We look forward to welcoming you!

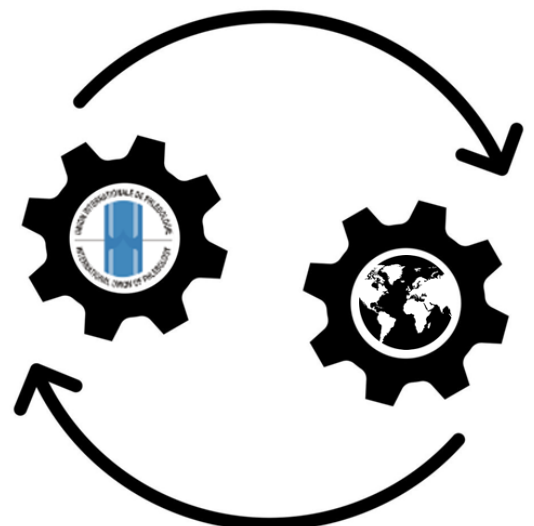
INTERCONTINENTAL UIP SESSIONS: UNITED in SYNERGY

One of the main aims of the UIP is to favor networking and synergy among the different societies of the world.

Following this vision, rather than national sessions, the UIP World Congress will host intercontinental sessions, made by 4-5 speakers from 4-5 different geographical areas, with discussants from other regions.

Every single Society of the UIP can submit its speaker and 2 discussants to be included in these dedicated sessions.

Feel free to write to president@uipmail.org for further information



32nd NATIONAL CONGRESS OF THE SPANISH CHAPTER OF PHLEBOLOGY AND LYMPHOLOGY



This month's honorary page is dedicated to the Spanish Chapter of Phlebology for the outstanding performance during the annual meeting that gathered in Cordoba, representatives from all around the world, moreover including a significant UIP session that perfectly paved the way for the UIP Buenos Aires World Congress. The biggest gratitude goes to the organizers, Drs. Cristina Feijoo, Rodrigo Rial, Javier Álvarez Fernández and Agustín Arroyo.



Cristina Feijoo
Secretary of the Spanish Chapter of Phlebology and Lymphology (CEFyL)

The 32nd National Congress of the *Spanish Chapter of Phlebology and Lymphology (CEFyL)* was recently held at the Real Círculo de la Amistad in Córdoba, Spain, offering a high-quality meeting for learning and knowledge exchange.

In this edition, we were fortunate to have the participation of the most relevant international societies in the field of Phlebology and Lymphology, such as the International Union of Phlebology (UIP), V-Win Foundation, the

American Venous Forum, the Pan-American Society of Phlebology and Lymphology, as well as the Portuguese Society of Phlebology and other national entities with which we share interest and commitment in addressing common pathologies, such as the Spanish Wound Society (SEHER). This gathering of societies reflects the growing importance of our congress as a reference forum for scientific advancement and updates.

HONOUR BOX

32nd NATIONAL CONGRESS OF THE SPANISH CHAPTER OF PHLEBOLOGY AND LYMPHOLOGY

During the congress, the most relevant and controversial aspects of venous and lymphatic pathology were reviewed, with a special focus on the most current scientific evidence. Advances in diagnosis and the most innovative therapies for the treatment of varicose veins, graduated compression, lymphedemas, abdominopelvic pathologies, among others, were discussed. All of this with the steadfast aim of improving the quality of life for our patients, who are the very essence and purpose of our profession.

This year's scientific program featured top-tier national and international speakers who shared their vast experience through valuable lectures and roundtables for our daily clinical practice, which, undoubtedly, will shape the future of Phlebology and Lymphology.

Additionally, the congress provided the opportunity to present the "Latin American Consensus on the Road to the UIP Congress, Buenos Aires 2025," which will be, for us, a new opportunity to collaborate with the Pan-American Society of Phlebology and Lymphology on the scientific program.

At the closing dinner, awards were presented for the best works in poster and oral communication formats, as well as the Alberto Masegosa Award for the best publication in phlebology and/or lymphology. The most emotional moment came with the recognition of Dr. Rodrigo Rial as an Honorary Member of our Society for his dedication and international efforts that have contributed to the progress of CEFYL, and Dr. Chantal Agüero for her involvement and collaboration in recent years.

ORGANISING COMMITTEE



Cristina Feijoo Cano

Angiology and Vascular Surgery at Viamed Montecanal Hospital, Zaragoza, Spain.
Secretary of the Spanish Chapter of Phlebology and Lymphology
UIP Awareness Working Group.

Luís Javier Álvarez Fernández

President Spanish Chapter of Phlebology and Lymphology.
Coordinator, Angiology and Vascular Surgery Section, Spanish Association of Surgeons.
Vascular Surgeon at the Avilés Hospital Foundation.
Co-director and lecturer, Master's Degree in Phlebology, European University of Madrid.



Rodrigo Rial

Head of Vascular and Endovascular Surgery at MD Vascular Care Clinics. University Hospitals HM Madrid & HM Torreldones. Spain.
UIP Vice-President & acting Treasurer.
President of the Scientific Committee of the Panamerican Society of Phlebology and Lymphology.

Agustín Arroyo

Professor of Medicine, Universidad Europea de Madrid, Spain.
Director of Master's Degrees at Universidad Europea of Madrid and University of Alcalá de Henares. Spain.
Head of Vascular and Endovascular Surgery at Vithas Hospital and Quironsalud Valle del Henares Hospital Complex. Spain.
Vice President of the Spanish Chapter of Phlebology and Lymphology (SCPL) of SEACV, Coordinator of the annual Course Vein Academy.



ON THE ROAD TO BUENOS AIRES 2025 & GEORGIA 2027 UIP WORLD CONGRESSES



It's not "just" about the historic dates of the UIP World Congress in Buenos Aires in 2025 and in Georgia in 2027: it's also about the road that will take the vein-lymphatic community there. For this reason, a cycle of webinars have been designed to warm up the scientific exchange and the social interaction.

The first one was held on April 12 and it gathered together representations from all around the world and it showcased the importance of developing synergy with the different specialty experts. Indeed, a honorary lecture on Pelvic Pain differential diagnosis was held by prof. Gianaroli, a world renown Gynaecologist, showing how much appropriate clinical practice requires expertise sharing.

With this same spirit the next webinars have been designed and await all the ones interest in developing the most pro-active interaction. Next online appointment is on May 10, on the topic of thrombosis. The best comments/questions from the audience wins a free registration and faculty inclusion at the UIP World Congress in Buenos Aires (2025) and in Georgia (2027).

Presentation ABSTRACTS

Categories:

- **Scientific abstracts** Presentations that fulfill the following structure: Introduction, Methods, Results & Conclusions. This category of papers should be unpublished and NOT presented at National and International meetings, submitted by the deadline and without revealing the name of the city, institution submitting the abstract. They are evaluated in a blinded fashion.
- **Free abstracts** These presentations can be: Cases and Case series, Techniques or others (history, terminology, etc) and have a free structure.
- **Electronic poster (E-poster)** These presentations will be presented on a large computer screen. Your E-poster can consist of multiple slides or just one slide. it is suggested to those interested to send the summary and if the poster is accepted, the corresponding ppt.
- **How do I do it?** Submitters are invited to show some significant aspect of the diagnosis and treatment of daily care practices in front of an audience in a face-to-face setting. In addition to submitting the title, they may also prepare a short video of maximum 5 minutes of duration that will be projected in a video gallery.
- **Editorial reviews** A 500 words max comment related to any published paper which the submitter considers worthy to be discussed with the top expert Faculty. The submission is not to be structured in introduction, methods, results and conclusions, but it must be in English and include the reference of the related work (link). Submitters are invited to upload a short video together with the written comment.

TO SUBMIT
<https://uipbuenosaires.com/abstracts/>

Topics

Superficial venous disease.
Perforating veins.
Telangiectasia and reticular veins.
Deep venous disease.
Pelvic venous disorders.
Venous thromboembolism.
Ulcer and wound care.
Diabetic foot.
Lymphatic disease.
Lipedema and lipodystrophy.
Venous and Lymphatic malformations.
Arterial disease.
Miscellaneous.



WHY JOINING THE WORLD IN BUENOS AIRES IS SO IMPORTANT

The UIP doors are fully open to the all vein-lymphatic world.

Whoever wishes to leave a sign in this global community and report her/his own perspective on why it's so important to attend the Buenos Aires UIP World Congress can submit a max 100 words text and her/his headshot by visiting the webpage

<https://www.uip-phlebology.org/joining-the-world>

The UIP World Congress, organized by the International Union of Phlebology, is an unmissable event for professionals in the field of venous and lymphatic disorders.

This year, from 8- 11 October ; we are privileged to gather in the stunning city of Buenos Aires, where high-quality science meets exceptional hospitality.

And Why ?:-

I- Cutting-Edge Scientific Insights

The UIP World Congress is renowned for its rigorous scientific programming. Attendees will have the opportunity to engage with the latest research, innovative treatments, and best practices in phlebology. By participating, you will gain invaluable knowledge that can enhance your clinical practice and improve patient outcomes.

II- Networking Opportunities

This congress is a unique platform to connect with fellow professionals from around the globe. Sharing experiences and insights with leading experts and peers can foster collaborations that advance the field of phlebology. Building these relationships is essential for personal and professional growth.

III - World-Class Speakers

The congress features a lineup of distinguished speakers who are thought leaders in phlebology. Their presentations will not only provide cutting-edge information but also inspire new ideas and approaches to patient care. Engaging directly with these experts offers a rare opportunity to learn from the best.

IV- Cultural Richness of Buenos Aires

Buenos Aires, known for its vibrant culture and rich history, provides an exceptional backdrop for the congress. Attendees will have the chance to explore the city's stunning architecture, delicious cuisine, and lively arts scene. This combination of professional development and cultural experience makes the congress even more rewarding.

V- Phenomenal Hospitality

The warmth and hospitality of Buenos Aires will enhance your congress experience. From its welcoming locals to its diverse culinary offerings, you will feel embraced by the city's charm. This environment fosters a sense of community among attendees, creating lasting memories and connections.

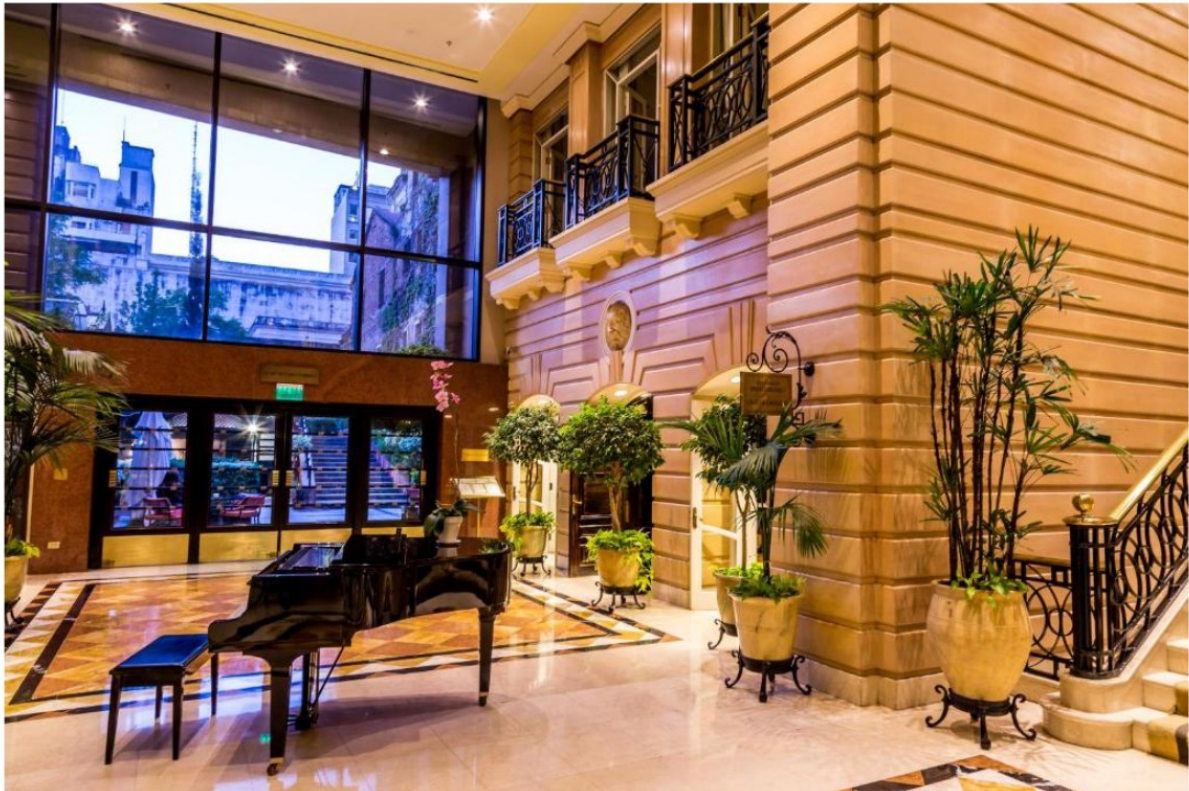
VI- Stay Ahead in Your Field

Attending the UIP World Congress is an investment in your professional development. With the rapid advancements in phlebology, staying informed is crucial. The congress provides the tools and knowledge needed to remain at the forefront of your field.

Don't miss the chance to expand your knowledge, network with peers, and immerse yourself in the vibrant culture of this magnificent city. Join us and be part of the future of phlebology

VENUE

ACCOMMODATION
VENUE



INTERCONTINENTAL HOTEL

Business luxurious hotel in the center of Buenos Aires embodies the classic style of this historical city. With comfortable suites, interior pool and spa. This hotel, is entirely dedicated to the event, therefore offering the highest opportunities of branding, customization and contact among colleagues and industries.



Hotel InterContinental
Hotel Design Suites

ADDRESS

Moreno 809 - CABA
Tacuarí 243 - CABA

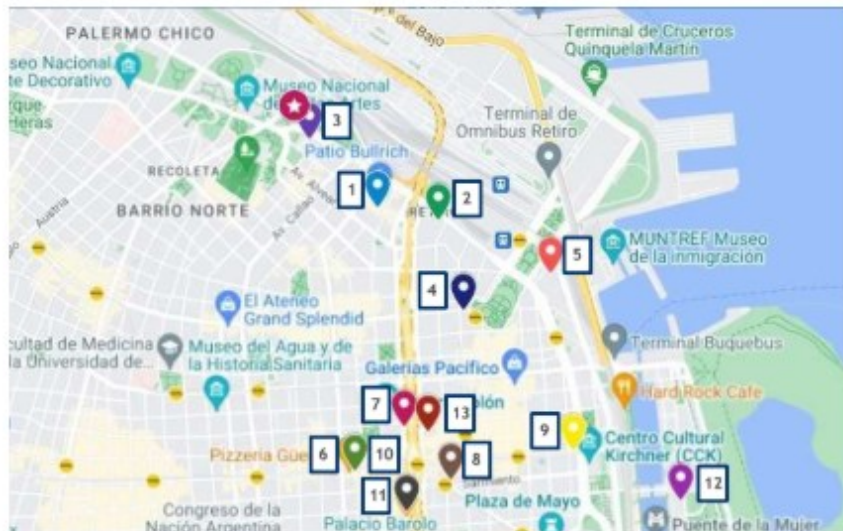
Phlebolympology World Hub:

- Intercontinental
- City
- Two
- Design
- Merit

WHERE TO STAY IN BUENOS AIRES

OTHER OPTIONS

1. Sofitel Buenos Aires Recoleta 5* - 175 Rooms
2. Emperador Hotel Buenos Aires 5* - 265 Rooms
3. Esplendor By Wyndham Buenos Aires Plaza Francia 4* - 49 Rooms
4. Hotel NH Collection Buenos Aires Crillon 4* - 96 Rooms
5. Sheraton Buenos Aires Hotel & Convention Center 5* - 740 Rooms
6. Hotel NH Buenos Aires 9 de Julio 4* - 175 Rooms
7. Hotel NH Buenos Aires NH Tango 4* - 108 Rooms
8. Hotel NH Buenos Aires Latino 4* - 100 Rooms
9. Hotel NH Collection Buenos Aires Jousten 4* - 84 Rooms
10. Novo Hotel Buenos Aires 4* - 129 Rooms
11. Grand Brizo Buenos Aires 4* - 192 Rooms
12. Hotel Hilton Buenos Aires 5* - 417 Rooms
13. Buenos Aires Marriott 5* - 298 Rooms



Contact Us

E-mail - Web

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- Scientific Program: abstracts@uipbuenosaires.com
- Travel & Accommodation: cs@uipbuenosaires.com

UIP 2025: BUENOS AIRES, ARGENTINA



YOUR WISHES FOR UIP 2025



Planning has begun for the **UIP World Congress in Buenos Aires in 2025.**

Start thinking now about what **YOU** would like to see at the Congress, as we will be releasing our **"Wishing Box"** for your suggestions.

INTERNATIONAL ANGIOLOGY: ACCESS

International Angiology, the *Official Journal of the International Union of Phlebology*, provides discount online journal access to members of UIP Member Societies.

- Tier 1* societies - €45.00 per member, including taxes for online access
- Tier 2 and 3 societies* - Free access
- Residents (Tier 1, 2 and 3) - Free access

Requests for access come directly from the Member Society for its members. If the member society does not wish to provide access, requests can come from individuals, providing they can provide proof of their membership status.

Accessing the Journal - UIP Member Societies

1. Download: The membership template spreadsheet from the UIP website:

<https://www.uip-phlebology.org/uip-official-journal>

DOWNLOAD

2. Email your completed spreadsheet to
International Angiology
journals.dept@minervamedica.it

Ensure you include the detail of the Member society requesting access.

EMAIL

3. Payment: The society receives an invoice for Journal Access from International Angiology

PAYMENT

4. Once paid, each individual member receives journal access instructions from *International Angiology*

ACCESS!

* UIP Tiers are defined by the UIP Constitution (Schedule 4), <https://www.uip-phlebology.org/constitution>

INTERNATIONAL ANGIOLOGY ABSTRACTS

Acute limb ischemia after occluded femoro-popliteal stents: a comparative analysis between endovascular revascularization vs. open bypass (FOCUS Study)

Giulia BERTAGNA 1 □, Nicola TROISI 1, Mario D'ORIA 2, Mauro GARGIULO 3, 4, Michele ANTONELLO 5, Giovanni PRATESI 6, 7, Stefano MICHELAGNOLI 8, Roberto SILINGARDI 9, Giacomo ISERNIA 10, Gian Franco VERALDI 11, Giovanni TINELLI 12, Rocco GIUDICE 13, Arnaldo IPPOLITI 14, Pierluigi CAPPIELLO 15, Massimiliano MARTELLI 16, Sandro LEPIDI 2, Raffaella BERCHIOLLI 1 on behalf of the OUTSTEPP collaborative study group

[10.23736/S0392-9590.25.05366-0](https://doi.org/10.23736/S0392-9590.25.05366-0)

ABSTRACT

BACKGROUND: The aim of the study was to compare the early and medium-term outcomes of endovascular revascularization versus bypass for the treatment of occluded femoro-popliteal stents in patients with acute limb ischemia (ALI) (insights of the OUT-STEPP multicentric registry).

METHODS: Between January 2016 and December 2021, 317 patients in 14 centers underwent treatment for symptomatic femoro-popliteal In-Stent Occlusion (ISO). Sixty patients with ALI were included into the present study: 42 (70%) underwent endovascular revascularization (Group ENDO), and 18 (30%) underwent open bypass surgery (Group OPEN). Early (30 days) results were assessed and compared between the two groups. Estimated 5-year outcomes were evaluated and compared with the log-rank test

RESULTS: At 30 days no differences were found in terms of Major Adverse Cardiovascular Events (MACEs), acute kidney injury, reintervention(s), major amputation, and all-cause mortality between the two groups. The need for blood transfusions was similar in both groups (Group OPEN 7, 38.9% vs. Group ENDO 13, 30.1%; $P=0.14$). The mean length of hospital stay was higher for patients in Group OPEN (11.3 ± 6.5 vs. 4.4 ± 1.9 days; $P<0.001$). The overall median duration of follow-up was 35 (IQR 13-55.75) months. At 5 years there were no differences between the two groups in terms of survival (69.8% Group OPEN vs. 64.6% Group ENDO; $P=0.76$, log-rank 0.09), overall patency (71.4% Group OPEN vs. 72.8% Group ENDO; $P=0.56$, log-rank 0.34), freedom from reintervention(s) (76% Group OPEN vs. 63.4% Group ENDO; $P=0.32$, log-rank 0.99), and amputation-free survival (88.1% Group OPEN vs. 83.4% Group ENDO; $P=0.76$, log-rank 0.09).

CONCLUSIONS: Endovascular revascularization and bypass seem to provide effective flow restoration in patients with ALI due to femoro-popliteal ISO. Open surgery was associated with longer hospital stay. At 5 years, no significant differences were found between the two groups in terms of overall patency, need for reintervention(s), and amputation-free survival, even though further studies on a larger sample size and potentially prospective will be necessary to validate these preliminary findings.

KEY WORDS: Stents; Peripheral arterial disease; Thrombosis; Multicenter study

Smoking and lower extremity artery disease

Pier L. ANTIGNANI^{1*}, Pavel POREDOŠ², Aleš BLINC^{2,3}, Matija CEVC⁴, Agata STANEK^{4,5},
Arkadiusz JAWIEN⁶, and Armando MANSILHA^{7,8}

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[10.23736/S0392-9590.25.05302-7](https://doi.org/10.23736/S0392-9590.25.05302-7)

ABSTRACT

Cigarette smoking is a major preventable risk factor for lower extremity arterial disease (LEAD) and is strongly associated with a higher risk of disease progression, worse post-procedural outcomes, and increased healthcare utilization. Smoking provokes the development of atherosclerosis through different mechanisms. Endothelial cell dysfunction, oxidative stress, inflammation, and arterial stiffness are among the key factors related to the development of atherosclerosis due to smoking. Smoking cessation among patients with LEAD and the use of smoking cessation methods, including pharmacological treatment, are mandatory. Given that smoking cessation interventions remain underutilized. Therefore, in this narrative review we highlight the importance of incorporating smoking cessation treatments as part of the medical management of LEAD. Regulatory approaches to reduce tobacco use and support smoking cessation have the potential to reduce the burden of LEAD.

KEY WORDS: Smoking; Peripheral arterial disease; Atherosclerosis

Use of microcirculatory parameters to evaluate foam sclerotherapy treatment of superficial chronic venous disease, associated or not with venotonic drug: randomized, double-blind trial

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[10.23736/S0392-9590.25.05223-X](https://doi.org/10.23736/S0392-9590.25.05223-X)

ABSTRACT

BACKGROUND: Chronic venous disease (CVD) is a pathology with unfavorable outcome when treated and/or followed up incorrectly. In addition to macroscopic venous changes, CVD also causes changes in microcirculation. Based on these hypotheses, a non-invasive test to quantify the evolution of microangiopathy may be useful to assess the effects and benefits of treatment.

METHODS: Fifty female patients with varicose veins classified by clinical class C2 or C3 of the CEAP classification were selected and allocated randomly in two groups: foam sclerotherapy (FS) + micronized purified flavonoid fraction (MPFF) or FS + placebo, double-blind. Microcirculation was evaluated using Sidestream Dark Field techniques. The revised VCSS score was performed pre and post FS.

RESULTS: It was found an improvement on VCSS and all microcirculation parameters, in both groups, except on the number of pathological capillaries. When comparing the results between groups, a greater reduction in the diameters of dermal papilla was observed in the MPFF group ($P=0.053$), which, despite not being statistically significant, had an effect size of 0.55 (-0.01-1.10). In addition, capillary bulk and capillary limb also had a higher decrease in the MPFF group.

CONCLUSIONS: FS treatment of the trunk veins reduced distal venous hypertension, improving microcirculation in all patients, helping to control the venous disease. All patients got therapeutic success (total occlusion or partial occlusion with improvement in venous reflux or reduction in venous caliber).

KEY WORDS: Microcirculation; Pharmaceutical preparations; Flavonoids; Sclerotherapy; Varicose veins

Building evidence for diagnosis of lipedema: using a classification and regression tree (CART) algorithm to differentiate lipedema from lymphedema patients

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[10.23736/S0392-9590.25.05207-1](https://doi.org/10.23736/S0392-9590.25.05207-1)

ABSTRACT

BACKGROUND: Discriminating lipedema from lymphedema becomes challenging in the absence of a pathognomonic test. The objective was to find the best manifestations that discriminate between lipedema and lymphedema and to build a diagnosis algorithm.

METHODS: Prospective cohort study of two cohorts of patients, one with lipedema and another with lymphedema. Inclusion criteria for lipedema cohort involved bilateral lower limbs (LL) enlargement and at least three symptoms: pain/tenderness, bruising, familial history, no Stemmer's sign, symmetrical involvement, and non-swollen feet. The lymphedema cohort included female patients with LL lymphedema. A univariate analysis was performed to determine which clinical features were different between both samples. We used a TREE procedure to create a tree-based classification model using the CART (Classification And Regression Tree) algorithm, in order to discriminate lipedema from lymphedema patients.

RESULTS: Currently, 138 lipedema and 111 lymphedema patients were included. After univariate analysis, symmetrical involvement, disproportion between upper and lower parts of the body, spare feet, bruising, spider veins, family history, and pain were significantly more present in lipedema than in lymphedema ($P < 0.0001$). Stemmer's sign, lymphangitis bouts, pitting and fibrosis were more representative of lymphedema ($P < 0.0001$). The most important variables for discrimination were: disproportion (100%), spare feet (92.6%), bruising (92.3%) and symmetrical involvement (90.3%). After CART analysis, only three variables were retained in the final model: bruising, disproportion and spare feet. The model's accuracy was 100% with a probability error of 0.0% (SE: 0.00).

CONCLUSIONS: A simple clinical tree can be used to classify patients between lymphedema and lipedema.

KEY WORDS: Lipedema; Lymphedema; Diagnosis; Regression analysis

UIP MONTH 24



an **OPEN TO EVERYONE** zoom @
10 am NYC time - **4 pm** Rome time – **9 pm** Bangkok time
to hear **YOUR vision, YOUR ideas, YOUR needs**
and to remember that

UIP starts with «U»



for YOUR topic reservation please write to president@uipmail.org

<https://us02web.zoom.us/j/88913605824?pwd=QklhcDVPd01nQ3YvbTk5WUIMMFNaQT09>
Meeting ID: 889 1360 5824 Passcode: 916415



On behalf of all the International Union of Phlebology (UIP), I'd like to bring to all the healthcare professionals and the public attention the **UIP March 24 initiative**.

UIP was founded on March 24, 1959 and in the following 64 years it has been surely succeeding in bringing the vein & lymphatic world together, counting now on 81 Scientific Societies from all continents.

In order to honor **UIP March 24, 1959** birthday, every 24 of the month at 4 pm Rome time, myself and eventually available Executive Committee members will have an open to everyone zoom call where all the vein-lymphatic world and the public are invited to join to present their vision, ideas and eventual needs.

This glimpse of the current Phlebo-Lymphology around the world will provide the opportunity to analyze how the UIP can serve at best its member societies, while advocating for both colleagues and patients independently by their belonging or not to the UIP.

It's the UIP hope that you will like to take part in this initiative, so to develop together "present actions" while looking together at the brightest future.

Pre-submitted topics for discussion will have precedence in the hour dedicated to this initiative: in case, feel free to send yours at president@uipmail.org.



UIP MONTH 24

The zoom call will be recorded so to allow everyone to enjoy the content on demand in case.

Looking forward for demonstrating together that **UIP starts with “U”**, UIP looks forward for **listening to “U”** at this zoom link:

<https://us02web.zoom.us/j/88913605824?pwd=QklhcDVPd01nQ3YvbTk5WUIMMFNaQT09>

Meeting ID: 889 1360 5824 Passcode: 916415

Whatever need, do not hesitate to reach out to me (gnssrg@unife.it ; t. +393498012304)



UIP Executive Committee 2022-2025



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UIP 2023-2027 president



EVENTS

One of the main UIP visions is to **promote productive relationships among societies**. With this vision, we report both **events with UIP auspices and events without**, so to inform everyone about possible educational activities. The hope is also to offer a tool useful for the colleagues organizing future meetings, so to avoid overlapping among events.

For more information about events visit: <http://www.uip-phlebology.org/events>

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

EVENTS CALENDAR

MAY 2025

49th Annual Congress of the Canadian Society of Phlebology

1-3 MAY 2025

MONTREAL, CANADA

MAY 2025

ACP2025 Annual Scientific Meeting of the Australasian College of Phlebology

9-12 MAY 2025

GOLD COAST, AUSTRALIA

MAY 2025

XVII National Congress of Phlebology and Lymphology

28-30 MAY, 2025

MEXICO CITY, MEXICO

JUNE 2025

15th Balkan Venous Forum

12-15 JUNE 2025

GOLDEN SANDS, BULGARIA

JUNE 2025

Veins and Lymphatics in Focus

20-21 JUNE 2025

THE NETHERLANDS

SEPTEMBER 2025

V-ITALy Global Summit

3-6 SEPTEMBER 2025

ROME, ITALY

SEPTEMBER 2025

67th Annual Meeting of the German Society of Phlebology and Lymphology

24 - 27 SEPTEMBER 2025

SALZBURG, GERMANY

OCTOBER 2025

XXI UIP WORLD CONGRESS

8-11 OCTOBER 2025

BUENOS AIRES, ARGENTINA



UIP SOCIETY MEMBERSHIP: BENEFITS

Did you know that as a member of UIP Society you can have access to different benefits?

- ✓ Access to **International Angiology** -
(Free access for medical residents and for Tier 2 and 3 society members)*
- ✓ Access to **UIP Education Modules** (Free access for Tier 2 and 3)*
- ✓ Access to **latest news, UIP Newsletter**
- ✓ Access to **UIP Discussion Forums**

**Tier: refers to the category of membership. If unsure about the classification of your country, please check on our website.*

Accessing the Member Portal

1. Contact your society and ask them to add your name to the members of the UIP website.
2. The society uploads a membership list through their society page (Instructional Videos available online).
3. You will receive an email confirming your username and password.

International Angiology

The Journal of Vascular
Biology, Medicine, Surgery &
Phlebology



Let your society know if you
require International Angiology
access*.

**fees apply for Tier 1 countries*

UIP Education Modules

Accessing the UIP Education
Modules



1. Go to the **Online Education page**.
2. Click "**Enrol Now**".
3. Complete the forms with the information requested.

UIP Discussion Forums

Accessing the UIP Discussion
Forums



1. Log in the UIP website with your username and password.
2. Access the Discussion Forum through the member portal.

UIP ANNOUNCEMENTS

INVITATION FOR NEWSLETTER CONTENT

UIP SPEAKER BOX

The UIP is delighted to offer all its members to report a comment in future editions of the UIP newsletter. Topics can be related to evidence based science, phlebology advancement, problem solving in clinical practice. If you are interested in submitting a comment, send a 300 word summary to:

communications@uipmail.org

SPONSORSHIP OPPORTUNITIES

The UIP welcomes sponsorship for its newsletter from Industry. If you are interested in placing and advertisement or sponsoring the UIP newsletter, please contact us at:

execdirector@uipmail.org

ABOUT US



The UIP Newsletter has been produced and distributed from Australia and Argentina, with the contribution of the members of the UIP.

The UIP Newsletter Editor is Gabriela Sfarich from Argentina.

Advertising opportunities are available, and contributions and enquiries are welcome!

SOCIAL MEDIA



Keep in touch!

Follow our social media accounts and make sure you will be notified of updates, deadlines and important news!

