

INTERNATIONAL SOCIETY FOR HEART AND LUNG TRANSPLANTATION

20
17

SAN DIEGO • CALIFORNIA

MANCHESTER GRAND HYATT SAN DIEGO



CALL FOR ABSTRACTS

**THIRTY-SEVENTH
ANNUAL MEETING AND SCIENTIFIC SESSIONS
APRIL 5-8, 2017**



CALL FOR ABSTRACTS

ABSTRACT SUBMISSION SITE: ishlt.org/meetings/abstracts.asp

ABSTRACT SUBMISSION SITE OPENS: August 3, 2016

ABSTRACT SUBMISSION DEADLINE: October 25, 2016, 11:59 pm, EDT

ABSTRACT ACCEPTANCE NOTIFICATION DATE: December 20, 2016

**ABSTRACT
SUBMISSION
FEE: \$25.00**

**FOR TECHNICAL SUPPORT OF
ELECTRONIC SUBMISSION, CONTACT:**

ABSTRACT TECHNICAL SUPPORT:
Monday-Friday
7:00 am – 6:00 pm CST (USA)

PHONE: 217 398-1792

EMAIL: support@abstractsonline.com

ISHLT

14673 Midway Road
Suite 200
Addison, TX 75001 USA
Phone: 972 490-9495
Email: ishlt@ishlt.org
Web: www.ishlt.org

Dear Colleague:

On behalf of Maryl Johnson, MD, President of the International Society for Heart and Lung Transplantation, the ISHLT Board of Directors, and the 2017 Scientific Program Committee, I have the honor of inviting you to attend the Society's 37th Annual Meeting and Scientific Sessions to be held April 5-8, 2017 in San Diego, California.

For this meeting, we return to the newly renovated Manchester Grand Hyatt Hotel, which is ideally situated on San Diego Bay, between the San Diego Convention Center and the city's popular Seaport Village. The hotel offers a spectacular waterfront resort-like setting, complete with shopping, dining and entertainment venues that can be found steps away in the Gaslamp Quarter.



We especially encourage the submission of work by trainees and young investigators; the best of which will continue to be highlighted in the Caves Award competition, the Nursing Health Science and Allied Health Excellence in Research Award competition, the new Early Career Scientist Award in Transplantation competition and as featured abstracts and posters.

We hope to build on the tremendous success of the 2016 Washington, DC meeting, the best attended meeting in the Society's history, with a 30% increase in attendance over the 2015 meeting. While the meeting will begin as usual on Wednesday and end as usual on Saturday at 1:30 pm, the format of the San Diego meeting will be different from previous meetings, offering both research presentation sessions and symposia throughout all four days of the meeting.

The majority of the meeting will be devoted to submitted content. In anticipation of your contribution of high quality, novel scientific work, we plan to schedule a total of 52 oral research presentation sessions to showcase work described in the highest scoring abstracts. Mini-oral sessions and general poster sessions are planned to share other excellent research with our members.

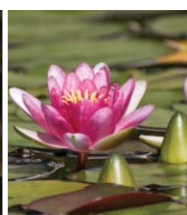
Abstracts will only be accepted online. A link to the abstract submission website is available on the annual meeting abstracts page of the ISHLT website (<http://ishlt.org/meetings/abstracts.asp>). **The abstract submission deadline is October 25, 2016 at 11:59 pm Eastern Daylight (North America) Time.**

We especially encourage the submission of work by your trainees and young investigators; the best of which will continue to be highlighted in the **Caves Award** competition, the **Nursing Health Science and Allied Health Excellence in Research Award** competition, the new **Early Career Scientist Award in Transplantation** competition (see details in this brochure), and as **featured abstracts** and posters.

I look forward to receiving your abstract submissions and welcoming you to San Diego for the 37th ISHLT Annual Meeting and Scientific Sessions!

With best regards,

Jeffrey J. Teuteberg, MD
ISHLT 37th Annual Meeting Scientific Program Chair



INTERNATIONAL SOCIETY FOR HEART AND LUNG TRANSPLANTATION
37TH ANNUAL MEETING AND SCIENTIFIC SESSIONS

CALL FOR ABSTRACTS



ABSTRACT SUBMISSION:

DEADLINE: October 25, 11:59 PM, EDT

SITE: ishlt.org/meetings/abstracts.asp



ABSTRACT SUBMISSION INSTRUCTIONS



1. The Abstract Submission System is now live on the ISHLT website (<http://ishlt.org/meetings/abstracts.asp>). **The deadline for receipt of abstracts is October 25, 2016.**
2. **Please note: This year there is a \$25.00 fee for each abstract submission.** After consultation with the Education Taskforce this modest fee was approved by the ISHLT Board of Directors in an effort to avoid an increase in the meeting registration fee and was felt to be commensurate with abstract submission fees for other comparable national and international meetings.
3. You may submit your abstract in one of the following MAIN categories. Within each category you will have one or more subcategories to choose from.
 - Basic Science and Translational Research **(BSTR)**
 - Economics, Ethics, Public Policy **(EEP)**
 - Heart Failure – Adult **(HF)**
 - Heart Transplantation – Adult **(HTX)**
 - Infectious Diseases **(ID)**
 - Lung Transplantation – Adult **(LTX)**
 - Mechanical Circulatory Support – Adult **(MCS)**
 - Nursing, Health Science, and Allied Health **(NNSAH)**
 - Pathology **(PATH)**
 - Pediatrics **(PEDS)**
 - Pharmacy and Pharmacology **(PHARM)**
 - Pulmonary Hypertension **(PH)**
 - Junior Faculty Clinical Case Reports **(CASE)**
 - Late Breaking Clinical Science **(LBCS)**

4. ABSTRACT CONTENT SHOULD INCLUDE:

- A.** Brief statement of purpose of the study (goal or hypothesis being tested)
- B.** Statement of methods and procedures used
- C.** Summary of results, presented in sufficient detail to support the conclusion
- D.** Conclusion

- 5.** Abstracts presenting an interim analysis of clinical trial data will not be accepted unless the intention to conduct an interim analysis was predetermined in the trial protocol before the study commenced.

6. SPECIAL ABSTRACT CATEGORIES

There are two special abstract categories:

JUNIOR FACULTY CLINICAL CASE REPORTS and
LATE BREAKING CLINICAL SCIENCE.

a. JUNIOR FACULTY CLINICAL CASE REPORTS

Junior Faculty (<7 years out of training) may submit case reports; the best scored reports will be selected for presentation in an oral session. Other well-scored reports will be presented in a separate poster session. Please use the specific JFCCR online abstract submission process to submit an abstract in this category.

Case Report abstract content should include:

- 1. Introduction
- 2. Case Report
- 3. Summary

b. LATE BREAKING CLINICAL SCIENCE

To assure that truly “late breaking” information is included in the meeting, authors may submit abstracts to this category describing trials and studies that are not yet completed as of October 25, 2016. **Studies which have results and conclusions by October 25, 2016 may NOT be submitted as abstracts in the late breaking clinical science category.**

This abstract category is intended to generate content for the presentation of high impact multi-center studies or particularly provocative single center investigations. In general, such studies would include prospective, randomized trials that seek to investigate new approaches to the diagnosis and/or treatment of cardiothoracic diseases relevant to the field and that have the potential to alter our contemporary treatment paradigm. Final selection of presentations will be made by a panel of reviewers on behalf of the program committee.

Abstracts presenting an interim analysis of clinical trial data will not be accepted unless the intention to conduct an interim analysis was predetermined in the trial protocol before the study commenced.

Final analysis of the study results and conclusions MUST be submitted to Susie Newton at the ISHLT headquarters by March 8, 2017. Failure to submit this data by the deadline may result in the withdrawal of the abstract from the program. This analysis will be seen only by a closed panel to ensure complete confidentiality of the results prior to presentation. The program committee chair in consultation with the program committee reserves the final decision regarding scheduling of Late Breaking Science presentations. An invitation to give a presentation based on a submitted abstract cannot be withdrawn simply because the results do not conform to expectations.

Please use the **specific LBCS online abstract submission process** to submit an abstract in this category.

Note: If you wish to have a revised version of your abstract with interim study findings published as an abstract in the abstract supplement to the JHLT, ISHLT MUST receive a revised version of the abstract reflecting the interim study findings NO LATER THAN **January 9, 2017**. The abstract submitted by the October 25th deadline will serve as a placeholder for the revised version.

Late Breaking Clinical Science abstract content should include:

1. Summary of Objectives
2. Methods
3. Endpoints



7. Abstracts will be published in the April 2017 supplement to the *Journal of Heart and Lung Transplantation*. Abstracts accepted for presentation in the Junior Faculty Clinical Case Reports poster session will NOT be published in the *Journal of Heart and Lung Transplantation*.
8. Authors whose work has been selected for presentation at the meeting will be notified on December 20, 2016.
9. Any abstract author who accepts an invitation to give a presentation based on a submitted abstract agrees to present the data described in the abstract and may not present data not described in the abstract. Any presenter who does not present the data described in the abstract and/or declines the presentation invitation without arranging for the presentation to be given by an abstract co-author (pending approval of ISHLT), will be appropriately sanctioned from future participation in ISHLT meetings by the Society's Board of Directors.
10. Submission of an abstract signifies that the abstract author(s) have given permission for the abstract to be **reproduced in print** in the *Journal of Heart and Lung Transplantation* and in digital formats of ISHLT's choosing for distribution and/or sale by ISHLT.



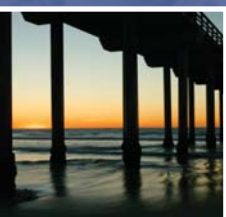
- 11.** Acceptance of an invitation to give a presentation based on a submitted abstract signifies that the presenter has given permission for the presentation to be **recorded in digital formats** of ISHLT's choosing for distribution and/or sale by ISHLT.
- 12. Previous Publication of Abstracts:** Abstracts will not be considered for invitation for presentation if they will be published as an article prior to April 5, 2017.
- 13. Informed Consent:** Submission of an abstract signifies that the author(s) agree and confirm that their study involving human subjects adheres to the principles of the Declaration of Helsinki of the World Medical Association, adheres to the principles of the ISHLT Statement on Transplant Ethics, and meets the informed consent requirements of the institution and country in which the study was performed.
- 14. Compliance with Declaration of Istanbul:** Submission of an abstract signifies that the author(s) agree and confirm that their study involving human subjects adheres to the principles of the Declaration of Istanbul and to the principles of the ISHLT Statement on Transplant Ethics. Due to ongoing concerns about compliance with the Declaration of Istanbul and the ISHLT Statement on Transplant Ethics, abstracts related to transplantation and involving either organs or tissue from human donors in China will not be accepted for consideration for the 2017 Annual Meeting. This policy will be reviewed on an annual basis.
- 15. Use of Animals:** Submission of an abstract signifies that the author(s) agree and confirm that their study involving the use of animals conforms fully within current NIH, EU or analogous national guidelines for the care and use of animals.
- 16. Use of Institutional Names and Commercial Trade Names:** For purposes of blind scoring, institutional names must be omitted whenever possible in the title and body of the abstract. Authors are requested to avoid the use of commercially branded names of medications or devices. If a specific medication/device is only identifiable by its trade name, then this should appear in brackets after a generic description of the medication/device.

17. Content Validity and Fair Balance: Authors are required to prepare fair and balanced presentations that are objective and scientifically rigorous. All recommendations involving clinical medicine must be based on evidence that is accepted within the profession of medicine as adequate justification for their indications and contraindications in the care of patients. All scientific research referred to, reported, or used in support or justification of a patient care recommendation must conform to the generally accepted standards of experimental design, data collection and analysis.

18. Use of Generic Versus Trade Names: Abstracts must use scientific or generic names when referring to products. Should it be necessary to use a trade name, then the trade names of all similar products or those within a class must be used.

19. Commercial Influence: Presenters of research based on accepted abstracts are not permitted to receive any travel, hotel or registration stipends or other financial assistance related to the ISHLT 2017 Annual Meeting from any company whose products are discussed in the presentation. Presenters of research based on accepted abstracts may not receive direct input regarding the content of the presentation from any company whose products are discussed in the presentation.

20. Rules for Employees of Commercial Entities: Employees, owners and patent holders of a commercial interest are generally not permitted to serve as the first author, presenting author, senior author, or primary author of an abstract. In rare circumstances where the work does not involve any academic collaborators, exceptions to this policy MAY be considered on a case by case basis. After all abstracts have been selected, ISHLT will initiate this process by communicating with the primary author of any abstracts which list an industry employee, owner or patent holder as first author, presenting author, senior author or primary author of an abstract.





21. Conflict of Interest Disclosure: Disclosure of all relevant financial relationships is required by all abstract authors. Full and complete disclosure for EVERY author must be submitted with the abstract. It is the responsibility of the individual submitting the abstract to obtain and provide complete and accurate disclosure information for each author listed on an abstract. Each individual author is responsible for the accuracy and completeness of the disclosure information submitted on his/her behalf.

If no relevant financial relationships exist for a given author, this must be stated. Failure to provide complete disclosure information will result in disqualification from participation in the educational activity. This requirement is intended neither to imply any impropriety of such relationships nor to prejudice any individual presenter or author. It is merely to identify such relationships through full disclosure and to allow ISHLT to assess and resolve potential influences on the educational activity prior to the planning and implementation of an educational activity.

22. DEFINITIONS

Financial Relationships: Financial relationships are those relationships in which the individual benefits by receiving a salary, royalty, intellectual property rights, consulting fee, honoraria for promotional speakers' bureau, ownership interest (e.g., stocks, stock options or other ownership interest, excluding diversified mutual funds), or other financial benefit. Financial benefits are usually associated with roles such as employment, management position, independent contractor (including contracted research), consulting, speaking and teaching, membership on advisory committees or review panels, board membership, and other activities from which remuneration is received, or expected. ACCME considers relationships of the person involved in the CME activity to include financial relationships of a spouse or partner. The ACCME has not set a minimum dollar amount for relationships to be significant. Inherent in any amount is the incentive to maintain or increase the value of the relationship.

Contracted Research: With respect to personal financial relationships, contracted research includes research funding where the institution gets the grant and manages the funds and the person is the principal or named investigator on the grant.

Conflict of Interest: Circumstances create a conflict of interest when an individual has an opportunity to affect CME content about products or services of a commercial interest with which he/she has a financial relationship. The ACCME considers financial relationships to create actual conflicts of interest in CME when individuals have both a financial relationship with a commercial interest and the opportunity to affect the content

of CME about the products or services of that commercial interest. The ACCME considers "content of CME about the products or services of that commercial interest" to include content about specific agents/ devices, but not necessarily about the class of agents/devices, and not necessarily content about the whole disease class in which those agents/devices are used. With respect to financial relationships with commercial interests, when a person divests themselves of a relationship it is immediately not relevant to conflicts of interest but it must be disclosed to the learners for 12 months.

Commercial Interest: A commercial interest is any entity producing, marketing, re-selling, or distributing health care goods or services consumed by, or used on, patients. The ACCME does not consider government agencies or providers of clinical service directly to patients to be commercial interests.

Commercial Supporter Influence:

Abstract Reviewers, Board Members, Committee Members, Scientific Council Operating Board Members and Workforce Members, Taskforce Participants, Authors, and Guidelines Developers are not permitted to receive any direct remuneration or gifts from any commercial entities for any activity in which they are an official representative or a participant on behalf of the Society, nor should they be subject to direct input from a commercial supporter regarding any such activity.



ABSTRACT AWARDS

PHILIP K. CAVES AWARD

**NURSING, HEALTH SCIENCE AND ALLIED HEALTH
EXCELLENCE IN RESEARCH AWARD**

**JFTC CLINICAL CASE DILEMMAS IN THORACIC
TRANSPLANTATION BEST PRESENTATION AWARD**

**EARLY CAREER SCIENTIST AWARD IN TRANSPLANTATION
TRAVEL GRANTS**

NURSING, HEALTH SCIENCE, & ALLIED HEALTH EXCELLENCE IN RESEARCH AWARD

PHILIP K. CAVES AWARD

THIS AWARD IS NAMED AFTER THE clinician who developed and pioneered the technique of transvenous endomyocardial biopsy to assess for rejection after cardiac transplantation. Established in 1982 to encourage and reward original high quality research performed by trainees, residents, fellows and graduate students, this \$1,000 award is bestowed annually on the trainee/resident/fellow/student whose oral presentation is judged to be the best at the Caves Award Session at the Annual Scientific Meeting. Students/Residents/Fellows/Scientists in training who are first authors and presenters may elect to have their abstracts considered for shortlisting for the Caves Award at the time of abstract submission. Candidates for the award must be current members of the Society or be working under a current member of the Society. Anyone who has previously won the award is not eligible to apply. The online submission process includes an area to indicate that you wish to have your abstract considered for this award. The award will be presented at the Awards Presentation during the Society's Annual Meeting Closing Plenary Session.

THIS AWARD WAS ESTABLISHED IN 2005 to recognize excellence in Nursing, Health Science and Allied Health research and to encourage original investigation and professional excellence in the preparation of scientific papers. This award honors an outstanding contribution by a nurse, allied health professional or social scientist whose work makes an important contribution to the field. This \$1,000 award is bestowed annually on the nurse, allied health professional or social scientist whose oral presentation is judged to be the best at the Annual Scientific Meeting. Nurses, allied health professionals and social scientists who are first authors and presenters may elect to have their abstracts considered for this award. Candidates for the Nursing, Health Sciences and Allied Health Excellence in Research Award must be current members of the Society and of the Council on Nursing, Health Science, and Allied Health. Anyone who has previously won the award is not eligible to apply. The online submission process includes an area to indicate that you wish to have your abstract considered for this award. The award will be presented at the Awards Presentation during the Society's Annual Meeting Closing Plenary Session.

JFTC CLINICAL CASE DILEMMAS IN THORACIC TRANSPLANTATION BEST PRESENTATION AWARD

TO RECOGNIZE OUTSTANDING contributions by junior faculty and trainees, the ISHLT Junior Faculty and Trainees Council (JFTC) sponsors a session each year at the Annual Meeting entitled, "Clinical Case Dilemmas in Thoracic Transplantation." Cases are submitted by junior faculty and trainees at the same time as the abstracts, and the top abstracts from the Case Reports category are selected for presentation in this session. Expert senior clinicians are invited to discuss the intricacies of these cases and share clinical pearls. At the conclusion of the session, the best case presentation is selected by a panel of JFTC judges and the presenter is awarded complimentary registration to the next ISHLT Annual Meeting. The winner will be recognized at the Awards Presentation during the Society's Annual Meeting Closing Plenary Session.

ISHLT

EARLY CAREER SCIENTIST AWARD IN TRANSPLANTATION

THIS BASIC SCIENCE AWARD AIMS TO RECOGNIZE an excellent abstract in the field of basic and translational science with the goal of encouraging scientists in the early stages of their careers to submit their work for presentation at the ISHLT Annual meeting.

- Trainee scientists/medical students who do not hold a medical degree, nurses, and pharmacists are eligible to apply for this award.
- Post-graduate clinicians/ trainees and/or those who hold a faculty position are NOT eligible to apply for this award.
- The applicant must be the first author and presenter of the abstract.
- The abstract must be in the field of organ transplantation, cell transplantation, or immunobiology/immunosuppression.
- ISHLT membership is not required for the applicant or chief.

Five finalists will be selected to present their abstracts during a session at the meeting, and the Annual Meeting registration fee will be waived for these finalists. The winner will receive \$1,000 and complimentary membership to ISHLT for the remainder of the year, and the winner will be announced during the Society's Annual Meeting Closing Plenary Session. The winner must attend this session in person to receive the award.

TRAVEL GRANTS

ISHLT WILL AGAIN BE OFFERING THE OPPORTUNITY for eligible oral research presenters to apply for a \$1,000 Annual Meeting Travel Grant to attend the 2017 Annual Meeting if their abstract is selected for the final program. Eligible applicants must be a current member of ISHLT or, if in training, must be in training under a current member of ISHLT and must come from one of the following groups:

- SCIENTISTS (non-clinical) who are working in a University or equivalent research institution and who are not appointed to a tenured track
- NURSES, SOCIAL SCIENTISTS, ALLIED HEALTH PROFESSIONALS AND PHARMACISTS or CLINICAL FELLOWS who are undergoing their training in geographic areas outside North America, Western Europe, Australia and Japan.

Further details and an application form will be sent to the oral research presenters after abstract selection for the 2017 Annual Scientific Meeting has been finalized.

HOTEL RESERVATIONS

ISHLT has arranged a large block of sleeping rooms at the Manchester Grand Hyatt Hotel.

You must make hotel reservations using the Manchester Grand Hyatt Hotel direct link in order to receive the ISHLT group rate. The link will be published in the ISHLT Preliminary Program available in October. Group rates start at \$269 for a single/double room, not including taxes or breakfast.





REGISTRATION FEES

Registration for the meeting must be made online or via the Official ISHLT Registration Form. Links to both will be available on the ISHLT website in October. The registration fee includes admittance into Symposia, Plenary Sessions, Oral Research Presentation Sessions, Mini Oral Sessions, Poster Sessions, and the Exhibit Hall. It also includes coffee breaks each day, the Exhibit Hall Opening Reception, and wine and cheese receptions in the poster hall. For budgeting purposes, you may use the 2016 advance registration fees as a minimum guideline.

Actual fees will be posted in the Preliminary Program.

Full/Physician Member	\$ 725
Full/Physician Non-Member	\$1120
Industry Member	\$1020
Industry Non-Member	\$1345
Allied Health/ Non-Physician Member	\$ 465
Allied Health/ Non-Physician Non-Member	\$ 790
Trainee Member	\$ 355
Trainee Non-Member	\$ 515
Guest Activity Registration	\$ 100

CE ACCREDITATION

This meeting will be ACCME, ACPE, ANCC and ABTC accredited. Details will be provided in the Preliminary Program.



International Society for Heart and Lung Transplantation

14673 Midway Road, Suite 200 | Addison, TX 75001 USA

Phone: 972 490-9495 | Email: ishlt@ishlt.org | Web: www.ishlt.org