Gilead is committed to expanding healthcare options for individuals living with cardiovascular and pulmonary diseases through innovative research, access, and education programs.
<table>
<thead>
<tr>
<th>TABLE OF CONTENTS</th>
</tr>
</thead>
<tbody>
<tr>
<td>About ISHLT</td>
</tr>
<tr>
<td>Board of Directors</td>
</tr>
<tr>
<td>Scientific Program Committee</td>
</tr>
<tr>
<td>Abstract Reviewers</td>
</tr>
<tr>
<td>Committees</td>
</tr>
<tr>
<td>Scientific Councils</td>
</tr>
<tr>
<td>Past Presidents</td>
</tr>
<tr>
<td>Daily Schedule Foldouts</td>
</tr>
<tr>
<td>Award Recipients</td>
</tr>
<tr>
<td>Continuing Medical Education</td>
</tr>
<tr>
<td>Annual Meeting</td>
</tr>
<tr>
<td>Scientific Session Highlights</td>
</tr>
<tr>
<td>Manchester Grand Hyatt Floor Plans</td>
</tr>
<tr>
<td>Annual Meeting</td>
</tr>
<tr>
<td>Schedule At a Glance</td>
</tr>
<tr>
<td>Corporate Partners</td>
</tr>
<tr>
<td>Annual Meeting</td>
</tr>
<tr>
<td>Scientific Program and Schedule</td>
</tr>
<tr>
<td>Exhibit Hall Floor Plan</td>
</tr>
<tr>
<td>List of Exhibitors</td>
</tr>
</tbody>
</table>
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1. To associate persons interested in the fields of heart and lung transplantation, end-stage heart and lung disease and related sciences.

2. To encourage and stimulate basic and clinical research in these disciplines and to promote new therapeutic strategies.

3. To hold scientific meetings featuring presentations and discussions relevant to these disciplines.

4. To sponsor a scientific journal for the publication of manuscripts related to these disciplines.

5. To establish and maintain an international registry for heart and lung transplantation.

6. To award research grants and establish endowments for the study of these disciplines.
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Howard J. Eisen, MD, FAHA, FACC, FACP, Basic Science & Translational Research Council Communications Liaison
David P. Nelson, MD, Heart Failure & Transplant Medicine Council Communications Liaison
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Macé Schuurmans, MD, Infectious Diseases Council Communications Co-Liaison
Christina Migliore, MD, Junior Faculty & Trainees Council Communications Liaison
Evgenij V. Potapov, MD, Mechanical Circulatory Support Council Communications Liaison
Emily Stimpson, RN, BSN, CCTC, Nursing, Health Sciences and Allied Health Council Communications Liaison
Kimberly L. Gandy, MD, Pediatric Council Communications Liaison
Ed Horn, PharmD, Pharmacy & Pharmacology Council Communications Liaison
Veronica Franco, MD, Pulmonary Hypertension Council Communications Liaison
Tereza Martinu, MD, Pulmonary Transplantation Council Communications Liaison
BASIC SCIENCE AND TRANSLATIONAL RESEARCH

Kimberly L. Gandy, MD, PhD, Chair
Sonja Schrepfer, MD, PhD, Vice Chair
Doris A. Taylor, PhD, Senior Advisor
Jeffrey L. Platt, MD, Senior Advisor
John A. Belperio, MD, Annual Program Committee Representative
Esme Dijke, PhD, Annual Program Committee Representative
Daniel C. Chambers, MBBS, MD, Annual Program Committee Representative
Lori J. West, MD, DPhil, FRCPC, Annual Program Committee Representative
Stephan M. Ensminger, MD, PhD, Development Committee Representative
Marilia Cascalho, MD, PhD, Education Committee Representative
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Octavio E. Pajaro, MD, PhD, Registries & Databases Committee Representative

SCIENTIFIC COUNCIL OPERATING BOARDS
COUNCIL OPERATING BOARDS

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Daniel R. Goldstein, MD, Board of Directors Co-Liaison
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Pradeep P. A. Mammen, MD, FACC, FAHA, Heart Failure & Transplant Medicine Co-Liaison
Uwe Schulz, MD, Heart Failure & Transplant Medicine Co-Liaison
Orla Morrissey, MD, Infectious Diseases Council Liaison
Zsuzsanna Hollander, MSc, Junior Faculty and Trainees Council Co-Liaison
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Annalisa Angelini, MD, Pathology Council Liaison
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Paul E Nolan, Jr, PharmD, Pharmacy & Pharmacology Council Liaison
James D. West, PhD, Pulmonary Hypertension Council Liaison
Daniel C. Chambers, MBBS, MD, Pulmonary Transplantation Council Liaison

HEART FAILURE & TRANSPLANT MEDICINE
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Goran Dellgren, MD, Annual Meeting Program Committee Co-Representative
Howard J. Eisen, MD, FAHA, FACC, FACP, Annual Meeting Program Committee Co-Representative
David S. Feldman, MD, PhD, Annual Meeting Program Committee Co-Representative
Ashish S. Shah, MD, Annual Meeting Program Committee Co-Representative
Michal Zakliczynski, MD, 2013 Annual Meeting Program Committee Co-Representative
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David A. Baran, MD, Education Committee Representative
Deborah E. Meyers, MD, FRACP, FACC, I2C2 Committee Representative
Naveen Pereira, MD, Standards & Guidelines Committee Representative
Maryl R. Johnson, MD, Board of Directors Co-Liaison
INFECTIONOUS DISEASES

Fernanda Silveira, MD, Chair
Paolo A. Grossi, MD, PhD, Vice Chair
Lara Danziger-Isakov, MD, MPH, Past Chair
Stanley I. Martin, MD, Annual Meeting Program Committee Co-Representative
Amparo Solé, MD, PhD, Annual Meeting Program Committee Co-Representative
Me-Linh Luong, MD, Education Committee Representative
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Denis Hadjiliadis, MD, Registries & Databases Committee Co-Representative
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Lara Danziger-Isakov, MD, MPH, Board of Directors Liaison
Orla Morrissey, MD, Basic Science and Translational Research Council Liaison
Saima Aslam, MD, MS, Junior Faculty and Trainees Council Liaison
Stanley I. Martin, MD, Links Communications Co-Liaison
Michele Estabrook, MD, Links Communications Co-Liaison
Macé M. Schuurmans, MD, Links Communications Co-Liaison

JUNIOR FACULTY AND TRAINEES

Jennifer Ann Cowger, MD, MS, Chair and Annual Meeting Program Committee Co-Representative
Manreet Kanwar, MD, Vice Chair
Eugene C. DePasquale, MD, Secretary/Vice Chair
Pali D. Shah, MD, Past Chair
Esme Dijke, PhD, Annual Meeting Program Committee Co-Representative
Arezu Z. Aliabadi, MD, Development Committee Representative
Jonathan N. Johnson, MD, Education Committee Representative
Reema Hasan, MD, I2C2 Committee Representative
Keyur B. Shah, MD, Registries & Databases Committee Representative
Steven Kindel, MD, Standards & Guidelines Committee Representative
MECHANICAL CIRCULATORY SUPPORT

Daniel J. Goldstein, MD, Chair
Ulrich P. Jorde, MD, Vice Chair
Jeffrey J. Teuteberg, MD, Past Chair
Emma J. Birks, MBBS, PhD, BSc, FRCP, Annual Meeting Program Committee Representative
Jennifer Ann Cowger, MD, MS, Annual Meeting Program Committee Representative
Josef Stehlik, MD, PhD, Annual Meeting Program Committee Representative
Martin Strueber, MD, Annual Meeting Program Committee Representative
Marian Zembala, MD, PhD, Annual Meeting Program Committee Representative
Andreas Zuckermann, MD, Annual Meeting Program Committee Representative
Mario C. Deng, MD, Development Committee Representative
Salpy V. Pamboukian, MD, MSPH, Education Committee Representative
Sean P. Pinney, MD, I2C2 Committee Representative
Vivek Rao, MD, PhD, Registries & Databases Committee Representative
David S. Feldman, MD, PhD, FACC, FAHA, Standards & Guidelines Committee Representative
Francis D. Pagani, MD, PhD, Board of Directors Co-Liaison
Martin Strueber, MD, Board of Directors Co-Liaison
Evgenij V. Potapov, MD, Links Communications Liaison
Dawn M. Christensen, MS, CRNP, VAD Coordinator Liaison
J. Michael DiMaio, MD, Basic Science and Translational Research Council Liaison
Palak Shah, MD, MS, Junior Faculty & Trainee Council Liaison
NURSING, HEALTH SCIENCES AND ALLIED HEALTH

Masina Scavuzzo, RN, Chair
Samantha J. Anthony, PhD, MSW, Vice Chair and Annual Meeting Program Committee Co-Representative
Annemarie Kaan, MCN, RN, Past Chair
Kevin Carney, RN, CCTC, Annual Meeting Program Committee Co-Representative
Michael G. Petty, PhD, RN, CCNS, CNS, Education Committee and I2C2 Committee Representative
Lut Berben, PhD, RN, Grants & Awards Committee Representative
Sharon A. Beer, RN, MSc, Registries & Databases Committee Representative
Connie White-Williams, PhD, RN, Standards & Guidelines Committee Representative
Bronwyn J. Levvey, RN, Grad Dip Clin Ep, Board of Directors Liaison
Bernice L. Coleman, PhD, RN, Basic Science and Translational Research Council Co-Liaison
Judy A. Currey, PhD, Basic Science and Translational Research Council Co-Liaison
Emily Stimpson, RN, BSN, CCTC, Links Communications Liaison

PATHOLOGY

Dylan V. Miller, MD, Chair
Carmela D. Tan, MD, Vice Chair
Patrick Bruneval, MD, Past Chair
Gerald J. Berry, MD, Development Committee Representative and Annual Meeting Program Committee Representative
Margaret M. Burke, FRCPath, I2C2 Committee Representative
Robert F. Padera, MD, PhD, Registries & Databases Committee Representative
Joseph J. Maleszewski, MD, Standards & Guidelines Committee Representative
Daniel R. Goldstein, MD, Board of Directors Liaison
Annalisa Angelini, MD, Basic Science and Translational Research Council Liaison

PEDIATRIC TRANSPLANTATION

Marc G. Schecter, MD, Chair
Janet N. Scheel, MD, Vice Chair
Melanie Everitt, MD, Past Chair
Christian Benden, MD, Annual Meeting Program Committee Co-Representative
Tajinder P. Singh, MD, Annual Meeting Program Committee Co-Representative
Debra A. Dodd, MD, Education Committee Representative
COUNCIL OPERATING BOARDS

Anne I. Dipchand, MD, I2C2 Committee Representative
Scott R. Auerbach, MD, Registries & Databases Committee Representative
Robert J. Boucek, Jr., MD, Standards & Guidelines Committee Representative
Richard Kirk, MA FRCP FRCPCH, Board of Directors Liaison
Carol K. Conrad, MD, Basic Science and Translational Research Council Liaison
Chesney Castleberry, MD, Junior Faculty and Trainee Council
Christian Benden, MD, Communications Liaison
Yuk M. Law, MD, Pediatric Heart Failure Workforce Leader

PHARMACY AND PHARMACOLOGY
Michael A. Shullo, BS, PharmD, Chair
Tamara E. Claridge, PharmD, Vice Chair and Annual Meeting Program Committee
Christopher R. Ensor, PharmD, BCPS-CV, Past Chair
Walter Uber, PharmD, Annual Meeting Program Committee Co-Representative
Robert L. Page, II, PharmD, MSPH, Development Committee Representative
Haifa Lyster, BPharm(Hons), MSc, Education Committee Representative
Patricia A. Uber, PharmD, I2C2 Committee Representative
Tam Khuu, PharmD, BCPS, Registries & Databases Committee Representative
Adam B. Cochrane, PharmD, BCPS, Standards & Guidelines Committee Representative
Joseph G. Rogers, MD, Board of Directors Liaison
Paul E. Nolan, PharmD, FCCP, FASHP, Basic Science and Translational Research Council Liaison
Edward Horn, PharmD, BCPS, Links Communications Liaison

PULMONARY HYPERTENSION
Robert P. Frantz, MD, Chair
Mardi Gomberg-Maitland, MD, MSc, Vice Chair
Myung H. Park, MD, FACC, Past Chair
Paul A. Corris, Annual Meeting Program Committee Representative
Marc de Perrot, MD, 2013 Annual Meeting Program Committee Representative
Mandeep R. Mehra, MD, MBBS, FACC, FACP, Annual Meeting Program Committee Representative
Myung H. Park, MD, Annual Meeting Program Committee Representative
Fernando Torres, MD, Annual Meeting Program Committee Representative
Evelyn Horn, MD, Development Committee Representative
Dana P. McGlothlin, MD, Education Committee Representative
John Granton, MD, I2C2 Committee Representative
Ivan Robbins, MD, Registries & Databases Committee Representative
Teresa De Marco, MD, FACC, Standards & Guidelines Committee Representative
Myung H. Park, MD, Board of Directors Liaison
James D. West, PhD, Basic Science and Translational Research Council Liaison
Veronica Franco, MD, Communications Liaison

**PULMONARY TRANSPLANTATION**

David Weill, MD, Chair
Michael Mulligan, Vice Chair
Lianne G. Singer, MD, FRCP, Past Chair and I2C2 Committee Representative
Tobias Deuse, MD, PhD, Annual Meeting Program Committee Representative
Allan R. Glanville, MD, FRACP, Board of Directors Liaison and Annual Meeting Program Committee Representative
Denis Hadjiliadis, MD, Annual Meeting Program Committee Representative
David Lederer, MD, MS, Annual Meeting Program Committee Representative
Christopher H. Wigfield, MD FRCS(C/Th), Annual Meeting Program Committee Representative
Martin R. Zamora, MD, Annual Meeting Program Committee Representative
Glen P. Westall, FRACP, PhD, Development Committee Representative
Kevin M. Chan, MD, Education Committee Representative
Roger D. Yusen, MD, MPH, Registries & Databases Committee Representative
Peter M. Hopkins, FRACP, Standards & Guidelines Committee Representative
Daniel C. Chambers, MBBS, MD, Basic Science and Translational Research Council Liaison
Robin Vos, MD, PhD, Junior Faculty and Trainee Council Liaison
Tereza Martinu, MD, Communications Liaison
Jonathan P. Singer, MD MS, Quality of Life Workforce Leader
<table>
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<tr>
<th>Years</th>
<th>President</th>
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<tbody>
<tr>
<td>1981-1982</td>
<td>Michael Hess, MD</td>
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<tr>
<td>1982-1984</td>
<td>Jack Copeland, MD</td>
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<tr>
<td>1984-1986</td>
<td>Terence English, FRCS</td>
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<td>1986-1988</td>
<td>Stuart Jamieson, MD</td>
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<td>1988-1990</td>
<td>Bruno Reichart, MD</td>
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<td>1990-1991</td>
<td>Margaret Billingham, MD</td>
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<td>1991-1992</td>
<td>Christian Cabrol, MD</td>
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<td>1992-1993</td>
<td>John O'Connell, MD</td>
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<td>1993-1994</td>
<td>Eric Rose, MD</td>
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<td>1994-1995</td>
<td>John Wallwork, FRCS</td>
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<td>1995-1996</td>
<td>Sharon Hunt, MD</td>
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<td>1996-1997</td>
<td>William Baumgartner, MD</td>
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<td>1997-1998</td>
<td>Leslie Miller, MD</td>
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<td>1998-1999</td>
<td>Alan Menkis, MD, FRCS(C)</td>
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<td>1999-2000</td>
<td>Robert L. Kormos, MD</td>
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<td>2000-2001</td>
<td>Anne Keogh, MBBS, MD</td>
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<td>2001-2002</td>
<td>James B. Young, MD</td>
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<td>2002-2003</td>
<td>Stephan Schueler, MD</td>
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<td>2003-2004</td>
<td>Jon Kobashigawa, MD</td>
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<td>2004-2005</td>
<td>Alec Patterson, MD</td>
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<td>2005-2006</td>
<td>Mark L. Barr, MD</td>
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<td>2006-2007</td>
<td>Robert C. Robbins, MD</td>
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<td>2007-2008</td>
<td>Paul A. Corris, MB FRCP</td>
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<tr>
<td>2008-2009</td>
<td>Mandeep R. Mehra, MD</td>
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<tr>
<td>2009-2010</td>
<td>James K. Kirklin, MD</td>
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<tr>
<td>2010-2011</td>
<td>John Dark, MB, FRCS</td>
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<tr>
<td>2011-2012</td>
<td>Lori J. West, MD, DPhil</td>
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<tr>
<td>2012-2013</td>
<td>David O. Taylor, MD</td>
</tr>
</tbody>
</table>
PAST SCIENTIFIC PROGRAM CHAIRS

1981  San Francisco, CA  Edward B. Stinson, MD and Michael L. Hess, MD
1982  Phoenix, AZ  Michael Kaye and Bernard Gersh
1983  New Orleans, LA  Stuart W. Jamieson, MD and Mark E. Thompson, MD
1984  New York, NY  Randall B. Griepp, MD
1985  Anaheim, CA  Terence A. H. English and Hillel Laks
1986  New York, NY
1987  New Orleans, LA
1988  Los Angeles, CA  John C. Baldwin, MD
1989  Munich, Germany  Bruno Reichart, MD
1990  San Diego, CA  D. Glenn Pennington, MD
1991  Paris, France  John B. O'Connell, MD
1992  San Diego, CA  Eric A. Rose, MD
1993  Boca Raton, FL  Maria Rosa Costanzo, MD
1994  Venice, Italy  John Wallwork, MBChB, FRCS
1995  San Francisco, CA  Leslie W. Miller, MD
1996  New York, NY  William A. Baumgartner, MD
1997  London, England  Stephan Schueler, MD
1998  Chicago, IL  James B. Young, MD
1999  San Francisco, CA  Mark L. Barr, MD
2000  Osaka, Japan  Jon Kobashigawa, MD
2001  Vancouver, Canada  David O. Taylor, MD
2002  Washington, DC  Robert C. Robbins, MD
2003  Vienna, Austria  Bruce R. Rosengard, MD
2004  San Francisco, CA  Mandeep R. Mehra, MD
2005  Philadelphia, PA  Shaf Keshavjee, MD
2006  Madrid, Spain  John Dark, MB, FRCS
2007  San Francisco, CA  Duane Davis, MD
2008  Boston, MA  Lori J. West, MD, DPhil
2009  Paris, France  Randall C. Starling, MD, MPH
2010  Chicago, IL  Hermann Reichenspurner, MD, PhD
2011  San Diego, CA  Richard N. Pierson, III, MD
2012  Prague, Czech Republic  Stuart C. Sweet, MD, PhD
2013  Montreal, Canada  Allan R. Glanville, MBBS, MD, FRACP
EDITORS:

LINKS NEWSLETTER
2008-2011  David S. Feldman, MD, PhD
2011-Present  Vincent G. Valentine, MD

JOURNAL OF HEART AND LUNG TRANSPLANTATION
1981-1985  Jacques G. Losman, MD
1986-1994  Michael P. Kaye, MD
1995-1999  María Rosa Costanzo, MD
2000-2009  James K. Kirklin, MD
2010-Present  Mandeep R. Mehra, MD

MEDICAL DIRECTORS:
THORACIC ORGAN TRANSPLANT REGISTRY
1987-1993  Michael P. Kaye, MD
1993-2001  Jeffrey D. Hosenpud, MD
2001-2012  Marshall I. Hertz, MD
2012-Present  Josef Stehlik, MD, PhD
ISHLT AWARD RECIPIENTS

LIFETIME ACHIEVEMENT AWARD

1996  Norman Shumway, MD
1999  Keith Reemtsma, MD
2004  Sir Magdi Yacoub, MD
2010  Margaret Billingham, MD
2012  Sharon Hunt, MD

LIFETIME SERVICE AWARD

1996  Michael P. Kaye, MD
1997  Jacques G. Losman, MD

PIONEERS IN TRANSPLANTATION LECTURE

2000  Christiaan Barnard, MD
       Joel D. Cooper, MD
       Norman E. Shumway, MD
2002  Michael DeBakey, MD
       Bruce A. Reitz, MD
2006  Leonard L. Bailey, MD
2008  Richard E. Lower, MD
2009  Christian E. A. Cabrol, MD
2011  Elizabeth Hammond, MD
2013  Jack G. Copeland, MD
ISHLT AWARD RECIPIENTS

NORMAN E. SHUMWAY ISHLT CAREER DEVELOPMENT AWARD

2000 Gordon D. Wu, MD (supported by Roche)
2002 Anthony Azakie, MD (supported by Roche)
2004 Allan M. Ramirez, MD (supported by Novartis Pharma)
2006 Dennis W. Wigle, MD, PhD (supported by Astellas Pharma)
2008 Glen Westall, MD, PhD (supported by Roche)
2010 Sonja Schrepfer, MD, PhD (supported by Astellas)
2012 Tereza Martinu, MD, PhD

ISHLT RESEARCH FELLOWSHIP GRANT

1995 Frances L. Johnson, MD (supported by Ortho-Biotech)
1996 Tuija S. Ikonen, MD (supported by Roche)
Andrew F. Pierre, MD (supported by Ortho-Biotech)
1997 Jonathan Chen, MD (supported by Roche)
Alyssa M. Krasinskas, MD (supported by Astellas)
Owen T. Lawrence, MD (supported by Ortho-Biotech)
Anne K. Raisanen-Sokolowski, MD (supported by Roche)
1998 Kelly S.A. Blair, MD (supported by Roche)
A.M. El Gamel, MD (supported by Roche)
Christine L. Lau, MD (supported by Wyeth-Ayerst)
Scott D. Ross, MD
Margaret L. Schwarze, MD (supported by Novartis)
1999 George Juang, MD (supported by Novartis)
Sivasai Krovvidi, PhD (supported by Roche)
Satoshi Saito, MD (supported by Novartis)
Donald Wong, PhD (supported by Roche)
2000 Richard S. Lee, MD (supported by Novartis)
Christopher H. Wigfield, FRCS (supported by Roche)
2001 Arnar Geirsson, MD (supported by Roche)
Matteo Vatta, PhD (supported by Roche)
2002 Ruediger Hoebelt, MD (supported by Roche)
2003 Ewout J. van den Bos, MD (supported by Astellas)
Felix Fernandez, MD (supported by Roche)
2004  Christian A. Gleissner, MD (supported by Astellas)
      Tsuyoshi Shoji, MD, PhD (supported by Actelion)
      Kendra N. Taylor, PhD (supported by Roche)
      Monica Zwierzchonieuska, MD (supported by XDx)
2005  Ryan C. Fields, MD (supported by Chiron)
      Arne Neyrinck, MD (supported by Astellas)
      Ahmad Saad, MD (supported by Roche)
2006  Rachel L. Anderson, MBBS (supported by Astellas)
      Zhaohui Li, PhD (supported by Transmedics)
      Heather E. Merry, MD (supported by Encysive)
      Edward N. Seung, PhD (supported by XDx)
      Matthew J. Weiss, MD (supported by Novartis)
2007  J. Raymond Fitzpatrick, III, MD (supported by Encysive)
      Howard J. Huang, MD (supported by Transmedics)
      Mylviganam Jeyakanthan, MD (supported by XDx)
      Timothy M. Millington, MD (supported by Novartis)
      Satish N. Nadig, MD (supported by Roche)
      Takeshi Oyaizu, MD, PhD (supported by Actelion)
      Sonja Schrepfer, MD (supported by Astellas)
2008  Jonathan Choy, PhD (supported by XDx)
      Satoshi Itoh, MD (supported by Transmedics)
      Tereza Martinu, MD (supported by Novartis)
      Deepti Saini, PhD (supported by Gilead)
      Atsushi Shiozaki, MD, PhD (supported by Astellas)
      Seiichiro Sugimoto, MD, PhD (supported by Roche)
2009  Hua Shen, MD, PhD (supported by Astellas)
      Tobias Deuse, MD, PhD (supported by Novartis)
      Masahiro Miyajima, MD, PhD (supported by XDx)
      Shin Hirayama, MD, PhD (supported by Gilead)
2010  Esme Dijke, PhD (supported by Novartis)
      Smita Sihag, MD (supported by Genentech)
      Sumiharu Yamamoto, MD (supported by Gilead)
      Khurram Shahzad, MD (supported by United Therapeutics)
      Nina Pilat, MSc, PhD (supported by XDx)
2011  Alejandro Bribriesco, MD (supported by Astellas)
      Alexey Dashkevich, MD (supported by XDx)
      Patricia E. de Almeida, DVM, MS, PhD
      Tiago Machuca, MD, PhD
2012  Stephen C. Juvet, MD, FRCPC
      Maria Lucia L. Madariga, MD
      Jessica H. Spahn, PhD
      Konstantinos Malliaras, PhD
2013  Nikolaos Diakos, MD
      Raymond Givens, MD, PhD
      Pablo Sanchez, MD, PhD
ISHLT TRANSPANT REGISTRY EARLY CAREER AWARD
(FORMERLY JUNIOR FACULTY AWARD)

2007 Beth D. Kaufman, MD
2008 Cynthia Gries, MD, MSc
      Scott Halpern, MD, PhD
      Josef Stehlik, MD, MPH
2010 Jennifer Conway, MD, FRCPC
      Kiran K. Khush, MD, MAS
2011 Jose Nativi, MD
2012 Erin M. Lowery, MD
      Omar E. Wever-Pinzon, MD
2013 Chesney Castleberry, MD
      Eugene DePasquale, MD
      Aaron Healy, MD

ISHLT NURSING AND SOCIAL SCIENCES RESEARCH GRANT

1997 Eileen Collins, RN, PhD
1998 Katherine St. Clair, RN, MSN
1999 Jeanne Salyer, PhD
2000 Nancy M. Albert, MSN, RN
2001 Lynn Doering, RN, DNSc
2002 Annette J. De Vito Dabbs, RN, MN, PhD
2003 Diane H. Leloudis, RN, MSN
      Janet E. Madill, PhD
2004 Deidre E. Logan, PhD
2005 Annemarie F. Kaan, MCN
2006 Thierry Troosters, PhD
2007 Mi-Kyung Song, PhD
2008 Stacey M. Pollock-BarZiv, PhD
2009 Jane MacIver, RN, MSc
2010 Heike Spaderna, PhD
      Gerdi Weidner, PhD
2011 Christiane Kugler, PhD (supported by CSL Behring)
Hilde Bollen, RN

2012 Lut Berben, PhD, RN (supported by CSL Behring)
Connie White-Williams, PhD, RN, FAAN

2013 Jo Wray, PhD
Jane Haines, DNP, RN, CMSRN

**ISHLT BRANISLAV RADOVANCEVIC MEMORIAL FELLOWSHIP GRANT**

2009 Sasa D. Borovic, MD (supported by Thoratec)

2010 Iki Adachi, MD (supported by Thoratec)

2012 Antigone Koliopoulou, MD (supported by Thoratec)

2013 Leonardo Salazar, MD (supported by Thoratec)
# ISHLT Award Recipients

## Philip K. Caves Award

<table>
<thead>
<tr>
<th>Year</th>
<th>Recipient</th>
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<tbody>
<tr>
<td>1983</td>
<td>Robbin G. Cohen, MD</td>
</tr>
<tr>
<td>1984</td>
<td>Hermann Reichenspurner, MD</td>
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<td>1985</td>
<td>Michael A. Breda, MD</td>
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<td>1986</td>
<td>Stuart J. Knechtle, MD</td>
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<td>1987</td>
<td>Wim Van Der Bij, MD</td>
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<td>1988</td>
<td>Charles D. Fraser, Jr., MD</td>
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<td>1989</td>
<td>A.M. Wood, MD</td>
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<td>1990</td>
<td>Andres J. Duncan, MD</td>
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<td>1991</td>
<td>A. Jiminez, MD</td>
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<td>1992</td>
<td>David P. Kapelanski, MD</td>
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<td>1993</td>
<td>David Marshman, MD</td>
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<td>1994</td>
<td>Jobst Winter, MD</td>
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<td>Alain Chapelier, MD</td>
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<tr>
<td>1995</td>
<td>Elizabeth A. Davis, MD</td>
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<td>1996</td>
<td>Moninder S. Bhabra, MD</td>
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<td>1997</td>
<td>Simon D. Eiref, MD</td>
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<td>1998</td>
<td>Carla C. Baan, MD</td>
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<td>1999</td>
<td>Joerg Koglin, MD</td>
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<td>2000</td>
<td>Michael P. Fischbein, MD</td>
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<td>2001</td>
<td>Alexander S. Krupnick, MD</td>
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<td>Peter Blaha, MD</td>
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<td>2003</td>
<td>Sigrid Sandner, MD</td>
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<td>M.D. Peterson, MD</td>
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<td>Sigrid Sandner, MD</td>
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<td>Frank D’Ovidio, MD</td>
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<td>2006</td>
<td>Gregor Warnecke, MD</td>
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<td>Heather E. Merry, MD</td>
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<td>Satish N. Nadig, MD</td>
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<td>Howard Huang, MD</td>
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<td>Tobias Deuse, MD, PhD</td>
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<td>2011</td>
<td>Ankit Bharat, MD</td>
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<td>2012</td>
<td>Simo Syrjälä, MD</td>
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<td>2013</td>
<td>Alexey Dashkevich, MD</td>
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NURSING AND SOCIAL SCIENCES EXCELLENCE IN RESEARCH AWARD

2005 Mary Amanda Dew, PhD
2006 Kathleen L. Grady, PhD, RN
2007 Christianne Kugler, PhD
2008 Annette DeVito Dabbs, RN, PhD
2009 Connie White-Williams, MSN
2010 Bronwyn Levvey, RN
2011 Samantha J. Anthony, PhD, MSW
2012 Kate Hayes, MPhysio (Cardio)
2013 Jane Haines, DNP, RN, CMSRN

ISHLTL BRANISLAV RADOVANCEVIC MEMORIAL BEST MCSD PAPER AWARD

2009 Nishant Shah, MD (supported by Thoratec)
2010 Jose N. Nativi, MD (supported by Thoratec)
2011 Dan Spiegelstein, MD (supported by Thoratec)
2012 Arun Raghav Mahankali Sridhar, MD, MPH (supported by Thoratec)
2013 Claire Watkins, MD (supported by Thoratec)
ISHLT AWARD RECIPIENTS

ISHLT INTERNATIONAL TRAVELING SCHOLARSHIP RECIPIENTS

2011
Stephanie T. Yerkovich, PhD
Sarah E. Gilpin, PhD
Kimberly M. Derkatz, BNSc
Jennifer Conway, MD, FRCPC

2012
Ramin E. Beygui, MD
Kevin C. Carney, MSN
Alexandre Souza Cauduro, MD
Esme Dijke, PhD
Ana Belen Mendez, MD
David Schibilsky, MD
Aleem Siddique, MBBS
Amparo Solé, MD, PhD
Manon Huibers, MSc
Daniel R. Goldstein, MD
Laveena Munshi, MD, FRCPC
Marco Masetti, MD
Rochelle M. Gellatly, PScPharm, ACPR, PharmD

2013
Alison Gareau, MSc
Erin Schumer, MD, MS
Bojan Vrtovec, MD, PhD
Marsha Renikunta, PhD (student)
Katie Morley, BA(Hons), RCN, MA
Ali Yeginsu, MD
Fabrizio Gandolfo, MD
Marian Urban, MD
Alexander Bernhardt, MD
Victor Rossel, MD
Mohammed Quader, MD
ISHLTT AWARD RECIPIENTS

ISHLTT LEACH-ABRAMSON-IMHOFF LINKS TRAVEL AWARDS

2012  
Tereza Martinu, MD, Writer of the Year  
Stanley I. Martin, MD, First Runner-Up  
Luciano Potena, MD, PhD, First Runner-Up  
Nancy P. Blumenthal, CRNP, Honorable Mention  
Bronwyn J. Levvey, RN, Honorable Mention  
Javier Carbone, MD, PhD, Honorable Mention  
Stavros G. Drakos, MD, Honorable Mention  
Daniel F. Dilling, MD, Honorable Mention

2013  
Michele Estabrook, MD, Writer of the Year  
Melanie Everitt, MD, First Runner-Up  
Christina Migliore, MD, First Runner-Up  
Veronica Franco, MD, Honorable Mention  
Manreet Kanwar, MD, Honorable Mention  
Luciano Potena, MD, PhD, Honorable Mention  
Macé Schuermans, MD, Honorable Mention  
Jeffrey J. Teuteberg, MD, Honorable Mention

JFTC CLINICAL CASE DILEMMAS IN THORACIC TRANSPLANTATION BEST PRESENTATION AWARD

2011  Michelle M. Kittleson, MD, PhD
2012  Erin Albers, MD
2013  Mustafa Ahmed, MD
## Thursday

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<td>SYMPOSIUM 3&lt;br&gt;Ex-Vivo Donor Heart Support</td>
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<td>SYMPOSIUM 14&lt;br&gt;All Stages of Severe Pulmonary Hypertension</td>
<td>SYMPOSIUM 15&lt;br&gt;Bad Bugs? Drugs Optimize</td>
<td>SYMPOSIUM 16&lt;br&gt;Ex-Vivo Lung Perfusion</td>
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The INTERNATIONAL SOCIETY FOR HEART AND LUNG TRANSPLANTATION extends its heartfelt gratitude to the following companies for their unrestricted educational grants in support of this 34th Annual Meeting and Scientific Sessions:
Actelion
Gilead Sciences
ANNUAL MEETING CONTINUING MEDICAL EDUCATION INFORMATION

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CME Credit Designation Statement
ISHLT designates this live activity for a maximum of 30.75 AMA PRA Category 1 Credits™. Physicians should claim only the credit commensurate with the extent of their participation in the activity.

ABTC Accreditation
Continuing Education Points for Transplant Certification (CEPTC) have been approved by the American Board for Transplant Certification. 30.0 Category 1 for ISHLT 34th Annual Meeting and Scientific Sessions. 8.0 Category 1 for the ISHLT Academy: Core Competencies in Nursing, Health Sciences and Allied Health.

ACPE Accreditation
The CU Skaggs School of Pharmacy and Pharmaceutical Sciences is accredited by the Accreditation Council for Pharmacy Education as a provider of continuing pharmacy education. This program has been accredited for up to 14.5 contact hours. To receive CE credit for this seminar, participants must complete all evaluations for programs attended and provide their NABP eProfile ID number and month and day of their birthdate. CE credit will be uploaded to CPE monitor within 60 days.
Disclosure
Current guidelines state that participants in continuing medical and allied health profession education activities must be made aware of any affiliation or financial interest that may affect the program content or a speaker’s presentation. Planners, Faculty and Chairs participating in this meeting are required to disclose to the program audience any real or apparent conflict(s) of interest related to the content of their presentations or service as Chair/Planner. These disclosures will be distributed at the meeting. Additionally, all speakers have been asked to verbally disclose at the start of their presentation any financial interest or affiliations and to indicate if a product they are discussing is not labeled for the use under discussion or is still investigational.

Target Audience
The audience for this program includes physicians, surgeons, scientists, nurses and transplant coordinators engaged in the practice of heart and lung transplantation, the management and treatment of heart and lung transplant recipients, the management and treatment of patients with end-stage heart or lung disease, basic science or clinical research related to these fields or specialties which cause them to become involved in the treatment of transplant recipients or patients with end-stage heart or lung disease.

Educational Goals
The educational goals of this activity are: to enable participants to learn about current practices, emerging technologies and medical advances related to heart and lung transplantation and end-stage heart and lung disease and to provide a forum for participants to engage in discussion, debate and examination regarding the efficacy and applicability of these current practices, emerging technologies and medical advances.
Learning Objectives

1. At the conclusion of this meeting, participants will have improved competence and professional performance in the areas of understanding the latest information and approaches regarding transplant research, surgical techniques, medical therapies, donor management and patient management for the treatment of patients suffering from end-stage heart and lung disease.

2. At the conclusion of this meeting, participants will have improved competence and professional performance in the areas of understanding the state-of-the-art treatment approaches, risk factors, risk management approaches, patient selection criteria, disease prevention strategies outcome implications, and psychosocial management strategies for patients with end-stage heart and lung failure.

3. At the conclusion of this meeting, participants will have improved competence and professional performance in the areas of understanding emerging technologies, medical advances and the clinical applications of basic science models of end-stage heart and lung disease management and prevention.
HIGHLIGHTS OF THE MEETING
The lifetime achievement award is bestowed every other year to an ISHLT member who is recognized for their outstanding achievements and tireless dedication in the field of heart and lung transplantation.

A lecture will be given by Sir Terence English, KBE, FRCS, the 2014 recipient of the Lifetime Achievement Award, in the Opening Plenary Session.
Basic Science and Translational Research (BSTR) will be showcased like never before at ISHLT 2014. The ISHLT Academy: Core Competencies in Basic Science will be held on Wednesday, providing an opportunity for delegates to gain or refresh knowledge in the fundamentals of basic science. On the following day, during the pre-meeting symposia, Lung Transplant Immunology 201-Plus, will provide an extension course for Academy attendees and Annual Meeting delegates alike, while a Sunrise Symposium primer for budding researchers, Lab Methods 101, will shed light where there is currently only darkness. BSTR will really take to the sky during the pre-meeting symposia on Thursday when the leaders in the field will use a case based discussion format to ‘decode’ the early engraftment events that control graft survival and to expose the role of primary graft dysfunction, TH17 skewing of the immune response, allo- and auto-immunity in the chronic loss of the pulmonary allograft. Finally, in what will surely be two of the highlights of the meeting, Lori West will tell how, on the ‘Wings of Science’ the crazy idea of ABO incompatible heart transplantation became a reality and then, in the closing plenary session, how one might trade the ABO and HLA sensitization hands one is often dealt to improve long-term outcomes.
HEART TRANSPLANTATION

ISHLT 2014 will offer new insights into some of the most intriguing and provocative areas of Heart Failure and Transplant Medicine and Heart Transplantation. There are three Pre-Meeting Symposia, two Sunrise Symposia and a Concurrent Symposium, all of which are guaranteed to keep your interest so that you don’t wander to the beach or to Petco Park to watch the Padres play baseball. We believe that you will be enthralled by these programs. The Pre-Meeting Symposia will highlight areas of emerging technologic advances and of controversies. We will explore the use of ex-vivo support of donor hearts to expand organ availability and to recondition and optimize donor heart function. Speaking at this Symposium will be experts who are working to make this technology the standard of care. The next Symposium will tackle the issue of when to transplant and when to VAD. Current outcomes for each approach to advanced heart failure as well as patient selection will be addressed as will when palliative care is a more appropriate option than aggressive interventions. These two Symposia were developed jointly with the Mechanical Circulatory Support (MCS) Council. The third Symposium will highlight the “sexiest” controversies in end-stage heart failure and transplantation and will include both talks and debates by experts in the various fields. This Symposium was developed in concert with enthusiastic input from the MCS and BSTR Councils. The Sunrise Symposia will discuss the somewhat neglected but very important topic of exercise training in heart transplantation as well as endothelial dysfunction in advanced heart failure, MCS and heart transplantation. Finally, a Concurrent Symposium will address the vexing and controversial area of how to approach the sensitized patient awaiting heart transplantation.
INFECTIONOUS DISEASES

At ISHLT 2014, join our experts to learn more about the fungus among us in our Pre-Meeting Symposium entitled *Invasive Fungal Infections Among Cardiothoracic Transplant Recipients: Consensus Guidelines and Recommendations From The ISHLT Fungal Expert Panel* as well as the conundrum of multi-drug resistant infections in Bad Bugs? Optimize the Drugs! For the coffee-fueled early birds, the meeting itself will feature two Sunrise Symposia on managing donors with high risk of infections (*High-Risk Donor: Extending Our Criteria in Times of Organ Shortage*) and the challenges of navigating modern molecular diagnostics and therapies for infectious complications of cardiothoracic transplant in the cleverly titled *What You Always Wanted To Know About LISH (Laboratory Tests, Infectious Agents, Special Situations, Hidden Infections) But Were Afraid To Ask*. There will continue to be a focus on the infectious complications of mechanical circulatory support with a multidisciplinary cast of characters including everyone from infectious diseases specialists to surgeons in the Concurrent Symposium, *Infections in Mechanical Circulatory Support Devices – Understanding and Conquering the Beast*. Other great infectious diseases highlights will include sessions on infections in pediatrics, lung transplantation, concurrent oral abstract sessions and the final plenary. Catch some infections (knowledge, that is) if you can!
LUNG FAILURE AND LUNG TRANSPLANTATION

At ISHLT 2014, there will be four Pre-Meeting Symposia and two Sunrise Symposia with primary content of interest for any lung transplant healthcare professional, and many of the other symposia taking place at the meeting, such as those addressing infectious disease, basic science, nursing, pharmacy, pediatrics and pulmonary hypertension, will have content of interest to the lung transplant professional. This year we will highlight two exciting areas in our field aimed at increasing the availability of organs for our patients: DCD donors and EVLP. The Pre-Meeting Symposium on DCD donors will explore their use across the globe, highlighting challenges and successes and hopefully help all of us learn more and utilize this resource the best possible way. The Pre-Meeting Symposium on EVLP will discuss its history and the ways it has been utilized in different regions (cold vs. warm transport) and where the future might take us. In addition, another Pre-Meeting Symposia will address controversial issues on patient selection, including frailty, infections and transplant from extra corporeal life support (a very exciting debate between two past presidents of the Society). Our last Pre-Meeting Symposium will address our perennial nemesis, chronic lung allograft dysfunction and its many faces. This session will bring pathologists in and discuss the clinical and pathological issues of restrictive vs. obstructive CLAD. All these sessions will take place on Thursday, April 10th. Our Sunrise Symposia will include a session on CMV and what is new from a basic science perspective to restoration of T-cell immunity to CMV resistance with talks from experts in the field. We will have a session with popular debates on controversial issues, like sizing organs to make them fit, using single vs. double lung transplant and transplant for scleroderma.
NURSING, HEALTH SCIENCE AND ALLIED HEALTH

ISHLT 2014 will showcase clinical care and research initiatives through a diverse program of informative sessions relevant to the nursing, health science and allied health community. The ISHLT Academy: Core Competencies in Nursing, Health Science and Allied Health, taking place on the Wednesday immediately prior to the start of the Annual Meeting on Thursday, will offer an invaluable educational resource in the fields of nursing and health sciences for transplant-related core competencies. The Pre-Meeting Symposia will highlight two symposia developed jointly with other Councils and titled, Here They Come: Preparing Pediatric Patients for Transition to Adult Care and Frailty: How Do We Assess this Physiologic Variable and At What Point Does It Represent a Contraindication to Transplant? Two Sunrise Symposia will draw together speakers and members from various disciplines as they examine The Effects of Prostaglandin Therapy in PAH: The Seen and Unseen Risk/Benefit Profile and VAD Teams Working Across Different Countries: How To Do It. To finish, a plenary session lecture will explore The Invisible Team Member: Family Caregivers of Thoracic Transplant and Mechanical Circulatory Support Patients to emphasize the importance of engaging and supporting these important team members. During these highlighted sessions, participants will gain key information concerning new assessment and interventional strategies to enhance clinical outcomes and quality of life for patients and their caregivers.
MECHANICAL CIRCULATORY SUPPORT

ISHLT 2014’s scientific content will highlight some of mechanical circulatory support’s most captivating topics. The speakers will tackle the perioperative management of complex heart failure challenging postoperative VAD complications. There are also early morning sessions on building a VAD program and shared care along with how to run the pump and the effect on the aortic valve. There are many MCS-focused symposia that have been devised with other ISHLT councils to improve multidisciplinary educational content. Topics includes a wonderful symposium developed with the BSTR and JFT Councils reviewing the impact of mechanical circulatory support on myocardial cellular function; a concurrent session developed with the ID Council on device infections, biofilms and medical imaging; a session developed with the NHSAH Council on shared care and physician outreach; a session developed with the PED and JFT Councils on building a successful pediatric VAD to adult transition program; and a phenomenal symposium developed with the PHARM Council discussing diagnosis of VAD thrombosis and pharmacologic interventions for the prevention and treatment of LVAD-associated thrombosis. The MCS-focused educational content offers input from the experts and the latest in MCS scientific investigation.

PEDIATRICS

For members interested in pediatric topics, ISHLT 2014 promises to be busy and enlightening. In a series of Thursday Pre-Meeting Symposia, you will hear experts discuss Preparing pediatric patients for transition to adult care, The evolution, the biology and the limits of ABO incompatible heart transplantation, Developing a pediatric VAD program and State of the art update on infectious diseases in pediatric thoracic transplantation. And if you have ever wondered Why not infant lung transplantation?, a Sunrise Symposium during the meeting is planned just for you.
PULMONARY HYPERTENSION

We are very pleased to present an outstanding program at ISHLT 2014 that covers a diverse range of innovations and controversial topics in Pulmonary Hypertension. There are four Pre-Meeting Symposia, three Sunrise Sessions and one Concurrent session that will highlight the latest clinical consensus statements, discuss the emerging sciences and pose questions to the experts and audiences for discussion and feedback. These sessions will be of keen interest to all members of ISHLT engaged in the care of patients with cardiopulmonary disease and right heart failure. To kick off the meeting, Pre-Meeting Symposium 2: Pulmonary Hypertension… You Can’t Ignore It any Longer will tackle the controversial area of managing patients with lung disease and pulmonary hypertension, WHO Group III, focusing on patients with ILD, COPD and sarcoidosis. Next, what better place to focus on all the latest exciting developments in chronic thromboembolic pulmonary hypertension (CTEPH) than San Diego! Pre-Meeting Symposium 8: CTEPH: Busting the Clot features both medical and surgical aspects in managing CTEPH patients with presentations highlighting the emerging new treatment, riociguat, as well as a debate to consider exercise-induced PH as an indication for pulmonary thromboendarterectomy. Pre-Meeting Symposium 14: Treating All Stages of Severe PH: Are We Doing it Right? will discuss the emerging basic sciences focusing on mechanisms and management approaches for patients with severe PH and right heart failure, from pulmonary vasodilators to mechanical supports. We are also very excited to present to you the ISHLT and World Symposium on PH (WSPH) Consensus Initiative on PH and Left Heart Disease in Pre-Meeting Symposium 20, which will present discussions asking what are the important hemodynamic variables in those with advanced heart failure and PH? There are two excellent and novel Pharmacy Council sessions focusing on PH. Concurrent Symposium 6 will present the Lifecycle Journey of a patient facing PAH, focusing on clinical milestones and challenges that face these patients from diagnosis to advanced stages of disease. Sunrise Symposium 7: The Effects of Prostaglandin Therapy in PAH: The Seen and Unseen Risk/Benefit Profile explores all
the effects, both seen and unseen, in patients associated with parenteral prostanoid treatments. We are also very pleased to bring you a “How To” session, featuring oft asked questions regarding PA catheters in our Sunrise Symposium 12. You will get to engage in discussions regarding how to do volume loading, when to use vasodilator testing and how to utilize exercise RHC and what the results mean. Finally, don’t miss the Sunrise Symposium 2, Under Too Much Pressure, which will feature challenging cases with expert panelists to lead the discussions. The grand finale, during the Closing Plenary session, will feature a debate you don’t want to miss: Stop Treating Secondary PH Right Now! See which side you will vote for!

PATHOLOGY

Pathology will provide some very important content again at ISHLT 2014 in a number of symposia. The Many Faces of Chronic Lung Allograft Dysfunction will explore the clinical, radiologic and pathologic aspects of obstructive and restrictive allograft disorders that affect transplant recipients. Approach to the Highly Sensitized Patient Awaiting Heart Transplantation will examine diagnostic and therapeutic strategies for presensitized patients. The 2013 Working Formulation for Cardiac AMR will be discussed. The topic of mixed acute cellular rejection and antibody mediated rejection in cardiac transplant recipients will be addressed in Outcomes and Considerations in the Management of Mixed Rejection. The immunologic, histopathologic and clinical aspects of diagnosis and treatment will be addressed.

PHARMACY AND PHARMACOLOGY

The diverse nature of the Pharmacy and Pharmacology Council continues to allow integration of pharmacy professionals into several areas of Society interest. Pharmacy and Pharmacology professionals as well as the broad membership of the Society will benefit from the many learning opportunities provided by symposia constructed for ISHLT 2014. There will be three symposia, the first, developed with the PH Council, is the annual lifecycle
journey, this year focusing on pulmonary hypertension. Continuing the PH theme, second session, developed in conjunction with the NHSAH Council, focuses on The Effects of Prostaglandin Therapy in PAH: The Seen and Unseen Risk/Benefit Profile. The third session, Making Bloody Sense of Anticoagulation, was developed in conjunction with the MCS Council and examines the challenges of anticoagulation and antiplatelet therapy in the MCS population. With our ID Council colleagues, we developed multiple shared sessions: 1) Bad Bugs, Optimize the Drugs and 2) What You Always Wanted To Know About LISH (Laboratory Tests, Infectious Agents, Special Situations, Hidden Infections) But Were Afraid To Ask. As well, the ISHLT fungal expert panel will be presenting the consensus guidelines on invasive fungal infections among cardiothoracic transplant recipients, a hot topic for all of our members. Other sessions that will be of interest to the diverse pharmacy and pharmacology professionals include the following: 1) Treating All Stages of Severe Pulmonary Hypertension: Are We Getting It Right? 2) Infections in Mechanical Circulatory Support Devices – Understanding and Conquering the Beast, and 3) CMV Infection in Lung Transplant Recipients: Are We Ready for Personalized Medicine? For the pediatric practitioners the following symposia may be of interest: 1) Here They Come: Preparing Pediatric Patients For Transition To Adult Care, 2) Crossing Clinical Barriers on the Wings of Science: Evolution of ABO Incompatible Heart Transplantation, 3) Developing A Pediatric VAD Program, and 4) State of the Art Update on Infectious Disease Issues in Pediatric Thoracic Transplantation. And last, Lab Methods 101: What Everyone Needs to Know to Read Basic Transplant Papers looks to be a great primer for the interpretation of basic science literature and the symposia entitled Approach to the Highly Sensitized Patient Awaiting Heart Transplantation should provide some valuable information on strategies for management of this very difficult population.
The Junior Faculty Trainee Council (JFTC) submitted 14 proposals for symposia for ISHLT 2014, most of which were developed jointly with other councils. The JFTC is excited to have had 6 of these symposia selected for ISHLT 2014. Topics include a review of endothelial dysfunction and a discussion of the changes that occur at the cellular level during VAD support. In Pediatrics, there will be a symposium addressing that complicated transition of pediatric patients to adult cardiology care, and a “challenging clinical case” symposium investigating pulmonary hypertension conundrums. Finally, the popular “Clinical Case Dilemmas” session and the “JHLT Year in Review” summarizing the best research presented in the Journal with return to the 2014 meeting. These symposia in San Diego 2014 are not to be missed!
The President’s Cocktail Reception will be held Saturday evening, April 12, at the Manchester Grand Hyatt pool deck overlooking the bay.

One ticket to this event is included with all the scientific registration fees. Additional tickets may be purchased.

As always, you can expect plenty of food, drink, music and friends.
LOBBY LEVEL
MANCHESTER GRAND HYATT
To help you navigate your way through the meeting content and find those sessions most likely of interest to you, we have coded each session according to the primary professional audience it was designed for. These codes are explained as follows:

**ACRONYMS**

**ALL** All ISHLT Members  
**BSI or BSTR** Basic Science or Basic Science and Translational Research  
**DMD** Donor Management/Organ Allocation  
**HF** Adult Heart Failure  
**HTX** Adult Heart Transplantation  
**ID** Infectious Diseases  
**LF** Adult Lung Failure  
**LTX** Adult Lung Transplantation  
**MCS** Adult Mechanical Circulatory Support  
**NHSAH** Nursing, Allied Health, Social Science  
**PATH** Pathology  
**PEDS** Pediatrics  
**PEEQ** Public Policy, Economics, Ethics, Quality of Life  
**PHARM** Pharmacology  
**PH** Pulmonary Hypertension
## SCHEDULE AT A GLANCE

All meetings and activities will take place at the Manchester Grand Hyatt Hotel in San Diego unless otherwise specified. All papers will be presented in English. Please check the ISHLT website (www.ishlt.org) for updates. This Final Program reflects the latest session schedule and room assignments.

### WEDNESDAY, APRIL 9, 2014

<table>
<thead>
<tr>
<th>Time</th>
<th>Event</th>
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<tr>
<td>6:00 AM – 8:00 PM</td>
<td>SPEAKER READY ROOM OPEN</td>
<td>Balboa ABC</td>
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<tr>
<td>8:15 AM – 4:00 PM</td>
<td>ISHLT BOARD OF DIRECTORS MEETING</td>
<td>Gaslamp A-C</td>
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<tr>
<td>2:00 PM – 4:00 PM</td>
<td>STANDARDS AND GUIDELINES COMMITTEE MEETING</td>
<td>Old Town AB</td>
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<tr>
<td>4:00 PM – 6:00 PM</td>
<td>TRANSPLANT REGISTRY STEERING COMMITTEE MEETING</td>
<td>Gaslamp D</td>
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<tr>
<td>4:00 PM – 6:00 PM</td>
<td>GRANTS AND AWARDS COMMITTEE MEETING</td>
<td>Old Town AB</td>
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<tr>
<td>5:00 PM – 6:00 PM</td>
<td>NOMINATING COMMITTEE MEETING</td>
<td>Gaslamp A-C</td>
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<td>5:00 PM – 8:00 PM</td>
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### THURSDAY, APRIL 10, 2014

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<td>7:00 AM – 6:00 PM</td>
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<td>Balboa ABC</td>
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<td>7:00 AM – 6:00 PM</td>
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<td>7:00 AM – 6:00 PM</td>
<td>2015 SYMPOSIUM SELECTION COMMITTEE MEETING</td>
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<td>PRESS OFFICE OPEN</td>
<td>Storage Office 7</td>
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<tr>
<td>8:00 AM – 10:00 AM</td>
<td>PRE-MEETING SYMPOSIUM 1 Preventing VAD Complications</td>
<td>Seaport</td>
</tr>
<tr>
<td>8:00 AM – 10:00 AM</td>
<td>PRE-MEETING SYMPOSIUM 2 Group 3 Pulmonary Hypertension... You Can’t Ignore It Any Longer</td>
<td>Grand Hall A</td>
</tr>
<tr>
<td>8:00 AM – 10:00 AM</td>
<td>PRE-MEETING SYMPOSIUM 3 Ex-Vivo Donor Heart Support: Expanding Availability and Optimizing Function</td>
<td>Grand Hall B</td>
</tr>
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</table>

67
8:00 AM – 10:00 AM
PRE-MEETING SYMPOSIUM 4
Lung Transplant Candidate Selection: Have We Pushed The Envelope Too Far?
(Grand Hall C)
(LF, LTX, ID)

8:00 AM – 10:00 AM
PRE-MEETING SYMPOSIUM 5
Lung Transplantation: Decoding Early Engraftment Events That Control Survival
(Grand Hall D)
(LF, LTX, BSTR)

8:00 AM – 10:00 AM
PRE-MEETING SYMPOSIUM 6
Joint ISHLT/IPTA Symposium: Here They Come: Preparing Pediatric Patients for Transition To Adult Care
(Harbor GHI)
(PEDS, NHSAH, LF, LTX, HF, HTX)

10:00 AM – 10:15 AM
COFFEE BREAK
(Palm and Grand Foyers)

10:00 AM – 7:15 PM
POSTERS OPEN
(Harbor and Seaport Foyers)

10:15 AM – 12:15 PM
PRE-MEETING SYMPOSIUM 7
Making Bloody Sense of Anticoagulation
(Seaport)
(MCS, PHARM, HF, HTX)

10:15 AM – 12:15 PM
PRE-MEETING SYMPOSIUM 8
Chronic Thromboembolic Pulmonary Hypertension: Busting the Clot
(Grand Hall A)
(PH, HF, HTX, LF, LTX)

10:15 AM – 12:15 PM
PRE-MEETING SYMPOSIUM 9
Invasive Fungal Infections Among Cardiothoracic Transplant Recipients: Consensus Guidelines and Recommendations from the ISHLT Fungal Expert Panel
(Grand Hall B)
(ID, PHARM, HR, HTX, LF, LTX)

10:15 AM – 12:15 PM
PRE-MEETING SYMPOSIUM 10
The Many Faces of Chronic Lung Allograft Dysfunction
(Grand Hall C)
(LF, LTX, PATH)

10:15 AM – 12:15 PM
PRE-MEETING SYMPOSIUM 11
Crossing Clinical Barriers on the Wings of Science: Evolution of ABO Incompatible Heart Transplantation
(Grand Hall D)
(BSTR, HF, HTX)

10:15 AM – 12:15 PM
PRE-MEETING SYMPOSIUM 12
To VAD or to Transplant
(Harbor GHI)
(MCS, HF, HTX)

12:00 PM – 12:45 PM
BOX LUNCH DISTRIBUTION
(Palm Foyer)

12:15 PM – 2:00 PM
LUNCH BREAK

12:30 PM – 1:45 PM
JUNIOR FACULTY MENTOR LUNCH
(Gaslamp A-C)

12:30 PM – 1:45 PM
I2C2 COMMITTEE MEETING
(Gaslamp D)

12:30 PM – 1:45 PM
EDUCATION COMMITTEE MEETING
(La Jolla AB)

12:30 PM – 1:30 PM
PHARMACY AND PHARMACOLOGY COUNCIL MEETING
(Grand Hall C)
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<th>Event</th>
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<tr>
<td>12:30 PM – 1:30 PM</td>
<td>Nursing, Health Science and Allied Health Council Meeting</td>
<td>Grand Hall D</td>
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<tr>
<td>12:30 PM – 1:30 PM</td>
<td>Basic Science Translational Research Council Meeting</td>
<td>Harbor GHI</td>
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<td>DCD Mini-Registry Meeting</td>
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<td>Registries and Databases Committee Meeting</td>
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<td>Registry Advisory Committee Meeting</td>
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<tr>
<td>2:00 PM – 4:00 PM</td>
<td>Pre-Meeting Symposium 13: Drilling Down on Myocardial Recovery – Basics and Clinical</td>
<td>Seaport</td>
<td>(MCS, BSTR, HF, HTX)</td>
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<tr>
<td>2:00 PM – 4:00 PM</td>
<td>Pre-Meeting Symposium 14: Treating All Stages of Severe Pulmonary Hypertension: Are We Getting It Right?</td>
<td>Grand Hall A</td>
<td>(PH, HF, HTX, LF, LTX)</td>
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<tr>
<td>2:00 PM – 4:00 PM</td>
<td>Pre-Meeting Symposium 15: Bad Bugs? Optimize the Drugs!</td>
<td>Grand Hall B</td>
<td>(ID, LF, HTX, HF, HTX, PHARM)</td>
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<td>2:00 PM – 4:00 PM</td>
<td>Pre-Meeting Symposium 16: Ex-Vivo Lung Perfusion (EVLP): Evolving Strategy For Improved Donor Lung Management</td>
<td>Grand Hall C</td>
<td>(DMD, LF, LTX)</td>
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<td>2:00 PM – 4:00 PM</td>
<td>Pre-Meeting Symposium 17: Frailty – How Do We Assess This Physiologic Variable And At What Point Does It Represent A Contraindication To Transplant?</td>
<td>Grand Hall D</td>
<td>(MCS, HF, HTX, LF, LTX, NHSAH)</td>
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<tr>
<td>2:00 PM – 4:00 PM</td>
<td>Pre-Meeting Symposium 18: Developing a Pediatric VAD Program</td>
<td>Harbor GHI</td>
<td>(Peds, MCS, HF, HTX)</td>
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<td>4:00 PM – 4:15 PM</td>
<td>Coffee Break</td>
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<tr>
<td>4:15 PM – 6:15 PM</td>
<td>Pre-Meeting Symposium 19: The Times They Are a-Changing</td>
<td>Seaport</td>
<td>(MCS, HF, HTX)</td>
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<tr>
<td>4:15 PM – 6:15 PM</td>
<td>Pre-Meeting Symposium 20: Pulmonary Hypertension in Left Heart Disease (WHO Group 2 PH): ISHLT and World Symposium on Pulmonary Hypertension (WSPH) Consensus Initiative</td>
<td>Grand Hall A</td>
<td>(PH, HF, HTX)</td>
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<td>4:15 PM – 6:15 PM</td>
<td>Pre-Meeting Symposium 21: The Sexiest Controversies in End-Stage Heart Failure and Transplantation</td>
<td>Grand Hall B</td>
<td>(HF, HTX, MCS, PHARM, BSTR)</td>
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<tr>
<td>4:15 PM – 6:15 PM</td>
<td>Pre-Meeting Symposium 22: Global Perspectives on Donation after Circulatory Determination of Death in Lung Transplantation</td>
<td>Grand Hall C</td>
<td>(DMD, LF, LTX)</td>
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<tr>
<td>4:15 PM – 6:15 PM</td>
<td>Pre-Meeting Symposium 23: State-of-the-Art Update on Infectious Disease Issues in Pediatric Thoracic Transplantation</td>
<td>Grand Hall D</td>
<td>(ID, PEDS, LF, LTX, PHARM)</td>
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**SCHEDULE AT A GLANCE**

**4:15 PM – 6:15 PM**
**PRE-MEETING SYMPOSIUM 24**
Lung Transplant Immunology 201-Plus: Recent Advances
(Harbor GHI)

**6:15 PM – 7:15 PM**
**EXHIBIT HALL OPENING RECEPTION**
(Harbor A-F)

**6:15 PM – 7:15 PM**
**MODERATED POSTER SESSION 1**
(Harbor and Seaport Foyers)

**6:45 PM – 7:45 PM**
**CLAD GUIDELINES WORKFORCE MEETING**
(Gaslamp D)

**7:15 PM – 8:30 PM**
**IMACS REGISTRY MEETING**
(Gaslamp A-C)

**7:00 AM – 6:00 PM**
**PRESS OFFICE OPEN**
(Storage Office 7)

**7:00 AM – 6:30 PM**
**REGISTRATION DESK OPEN**
(Palm Foyer)

**7:00 AM – 8:00 AM**
**SUNRISE SYMPOSIUM 1**
Building for the Future
(Grand Hall A)

**7:00 AM – 8:00 AM**
**SUNRISE SYMPOSIUM 2**
Under Too Much Pressure: Challenging Cases in Pulmonary Hypertension Management
(Grand Hall B)

**7:00 AM – 8:00 AM**
**SUNRISE SYMPOSIUM 3**
Endothelial Dysfunction

**7:00 AM – 8:00 AM**
**SUNRISE SYMPOSIUM 4**
Controversies in Lung Transplantation
(Grand Hall D)

**7:00 AM – 8:00 AM**
**SUNRISE SYMPOSIUM 5**
What You Always Wanted To Know About LISH (Laboratory Tests, Infectious Agents, Special Situations, Hidden Infections) But Were Afraid To Ask
(Seaport H)

**7:00 AM – 8:00 AM**
**SUNRISE SYMPOSIUM 6**
(ALL)

**8:00 AM – 4:00 PM**
**EXHIBIT HALL OPEN**
(Harbor A-F)

**8:00 AM – 6:00 PM**
**PRESS OFFICE OPEN**
(Storage Office 7)

**8:00 AM – 10:00 AM**
**OPENING PLENARY SESSION**
(Seaport)

**10:00 AM – 10:30 AM**
**COFFEE BREAK**
(Harbor A-F)

**10:00 AM – 6:30 PM**
**POSTERS OPEN**
(Harbor and Seaport Foyers)

**10:00 AM – 12:00 PM**
**CONCURRENT SESSION 1**
How to Attack Mechanical Circulatory Support Complications
(Seaport)

**10:30 AM – 12:00 PM**
**CONCURRENT SESSION 2**
Mechanical Circulatory Support: Engineering and Biomechanics
(Grand Hall A)

**10:30 AM – 12:00 PM**
**CONCURRENT SESSION 3**
(ALL)
<table>
<thead>
<tr>
<th>Time</th>
<th>Session / Symposium</th>
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</thead>
</table>
| 10:30 AM – 12:00 PM | CONCURRENT SESSION 3  
The Tempest (Controlling the Immune System in Heart Transplantation) (Grand Hall B) (HF, HTX, BSTR) |
| 10:30 AM – 12:00 PM | CONCURRENT SESSION 4  
Ex-Vivo Lung Perfusion: Where Are We Going? (Grand Hall C) (DMD, LTX, BSTR) |
| 10:30 AM – 12:00 PM | CONCURRENT SESSION 5  
Pediatric Mechanical Support (Grand Hall D) (Peds, MCS) |
| 10:30 AM – 12:00 PM | CONCURRENT SYMPOSIUM 25  
A Lifecycle Journey in Pulmonary Hypertension (Harbor GHI) (Pharm, HF, HTX, LF, LTX, PH) |
| 10:30 AM – 12:00 PM | CONCURRENT SESSION 6  
Circulating the Microbes: Infections for the Heart Transplant Clinician (Seaport H) (ID, HTX) |
| NOON – 2:00 PM      | LUNCH BREAK |
| NOON – 2:00 PM      | VIEW EXHIBITS (Harbor A-F) |
| NOON – 2:00 PM      | VIEW POSTERS (Harbor and Seaport Foyers) |
| NOON – 2:00 PM      | COUNCIL, COMMITTEE AND BOARD ORIENTATION MEETING (Gaslamp A-C) |
| NOON – 12:45 PM     | BOX LUNCH DISTRIBUTION (Palm Foyer) |
| 12:05 PM – 1:00 PM  | JUNIOR FACULTY AND TRAINEE COUNCIL MEETING (Harbor GHI) |
| 12:15 PM – 1:15 PM  | PULMONARY COUNCIL QOL WORKFORCE MEETING (Gaslamp D) |
| 1:00 PM – 1:55 PM   | AN AUTHOR WORKSHOP (sponsor by Elsevier) (Harbor GHI) |
| 2:00 PM – 3:30 PM   | CONCURRENT SESSION 7  
Mechanical Circulatory Support: Stop the Bleeding! (Seaport) (MCS, PHARM) |
| 2:00 PM – 3:30 PM   | CONCURRENT SESSION 8  
Measure for Measure: Assessment of Cardiac Allograft and Immune Function (Grand Hall A) (HTX, BSTR) |
| 2:00 PM – 3:30 PM   | CONCURRENT SESSION 9  
Ex-Vivo Lung Perfusion Science on the Horizon (Grand Hall B) (LTX, BSTR, DMD) |
| 2:00 PM – 3:30 PM   | CONCURRENT SESSION 10  
Lung Transplant Outcomes: Good, Better, Best: Let Us Never Rest (Grand Hall C) (LTX, LF) |
| 2:00 PM – 3:30 PM   | CONCURRENT SESSION 11  
Clinical Case Dilemmas in Thoracic Transplantation: The Best of the Best (Grand Hall D) (ALL) |
| 2:00 PM – 3:30 PM   | CONCURRENT SYMPOSIUM 26  
Infections in Mechanical Circulatory Support Devices – Understanding and Conquering the Beast (Harbor GHI) (ID, MCS) |
| 2:00 PM – 3:30 PM   | CONCURRENT SESSION 12  
Improving Outcomes: Interventions & Strategies (Seaport H) (NHSAH) |
| 3:30 PM – 4:00 PM   | COFFEE BREAK (Harbor A-F) |
| 3:30 PM – 4:00 PM   | VIEW EXHIBITS (Harbor A-F) |
| 3:30 PM – 4:00 PM   | VIEW POSTERS (Harbor and Seaport Foyer) |
4:00 PM – 5:30 PM
CONCURRENT SESSION 13
Optimizing Mechanical Circulatory Support Outcomes I (Seaport) (MCS)

4:00 PM – 5:30 PM
CONCURRENT SESSION 14
The Future of Mechanical Circulatory Support is Now (Grand Hall A) (MCS)

4:00 PM – 5:30 PM
CONCURRENT SESSION 15
Adult Heart Failure: Novel Diagnostics (Grand Hall B) (HF, BSTR)

4:00 PM – 5:30 PM
CONCURRENT SESSION 16
Chronic Lung Allograft Dysfunction: Phenotypes and Risk Factors (Grand Hall C) (LTX)

4:00 PM – 5:30 PM
CONCURRENT SESSION 17
Management of the Pediatric Heart Recipient (Grand Hall D) (HTX, PEDS)

4:00 PM – 5:30 PM
CONCURRENT SESSION 18
Quality of Life, Ethics, Policy and the Economics of MCS and Thoracic Transplantation (Harbor GHI) (NHSAH, PEEQ)

4:00 PM – 5:30 PM
CONCURRENT SYMPOSIUM 27
Heart Transplantation and Mechanical Circulatory Support in Latin America (Seaport H) (HF, HTX, MCS)

5:30 PM – 6:30 PM
MINI ORAL SESSION 1
Pushing the Boundaries in Lung Donation (Grand Hall A) (LTX, DMD, BSTR)

5:30 PM – 6:30 PM
MINI ORAL SESSION 2
Heart Failure and Pulmonary Hypertension: The Tale of Two Ventricles (Seaport H) (HF, PH, HTX)

5:30 PM – 6:30 PM
MINI ORAL SESSION 3
Choosing the Right Patient for Mechanical Assistance or Transplant (Grand Hall B) (MCS, HTX, HF)

5:30 PM – 6:30 PM
MINI ORAL SESSION 4
Mechanical Circulatory Support Rapid Science Session (Grand Hall C) (MCS, BSTR)

5:30 PM – 6:30 PM
MINI ORAL SESSION 5
Heart Transplant: Candidate Selection and Improving Outcomes (Grand Hall D) (HTX)

5:30 PM – 6:30 PM
MINI ORAL SESSION 6
Lung Transplant Monitoring and Immunosuppression (Harbor GHI) (LTX, PHARM)

5:30 PM – 6:30 PM
MODERATED POSTER SESSION 2
(Seaport and Harbor Foyers) (ALL)

6:30 PM – 8:00 PM
COUNCIL AND COMMITTEE REPORTS TO THE BOARD OF DIRECTORS (Gaslamp A-C)

SATURDAY, APRIL 12, 2014

7:00 AM – 6:30 PM
REGISTRATION DESK OPEN (Palm Foyer)

7:00 AM – 8:00 AM
SUNRISE SYMPOSIUM 6
The Aortic Valve – An Open and Shut Case? (Grand Hall A) (MCS, HF, HTX)

7:00 AM – 8:00 AM
SUNRISE SYMPOSIUM 7
The Effects of Prostaglandin Therapy in Pulmonary
Arterial Hypertension: The Seen and Unseen Risk/ Benefit Profile (Grand Hall B) (PH, PHARM, HF, LF, LTX, NHSAH)

7:00 AM – 8:00 AM
SUNRISE SYMPOSIUM 8
Exercise Training in Heart Transplantation (Grand Hall C) (HF, HTX)

7:00 AM – 8:00 AM
SUNRISE SYMPOSIUM 9
CMV Infection in Lung Transplant Recipients: Are We Ready for Personalized Medicine? (Grand Hall D) (ID, LTX, LF, PHARM)

7:00 AM – 8:00 AM
SUNRISE SYMPOSIUM 10
Exploring Interactions Between Cellular and Humoral Immunity in Cardiac Allograft Rejection (Seaport H) (BSTR, PATH)

8:00 AM – 6:00 PM
PRESS OFFICE OPEN (Storage Office 7)

8:00 AM – 10:00 AM
PLENARY SESSION (Seaport) (ALL)

10:00 AM – 10:30 AM
ANNUAL BUSINESS MEETING (Seaport)

10:00 AM – 10:30 AM
COFFEE BREAK (Harbor A-F)

VIEW EXHIBITS (Harbor A-F)

VIEW POSTERS (Harbor and Seaport Foyers)

10:00 AM – 4:00 PM
EXHIBITS OPEN (Harbor A-F)

10:00 AM – 6:30 PM
POSTERS OPEN (Harbor and Seaport Foyers)

10:30 AM – 12:00 PM
CONCURRENT SESSION 20
Mechanical Circulatory Support: Getting Down to the Science of VAD Support (Grand Hall A) (MCS, BSTR)

10:30 AM – 12:00 PM
CONCURRENT SESSION 21
Adult Heart Failure: Drugs and Devices (Grand Hall B) (HF, PHARM, MCS)

10:30 AM – 12:00 PM
CONCURRENT SESSION 22
Frailty, Body Composition and Coronary Disease: Pushing the Limits of Recipient Selection (Grand Hall C) (LTX, NHSAH)

10:30 AM – 12:00 PM
CONCURRENT SESSION 23
A Fresh Look at Lung Allograft Dysfunction – What the Bench Is Telling Us (Grand Hall D) (LTX, BSTR, PATH)

10:30 AM – 12:00 PM
CONCURRENT SESSION 24
Much Ado About Nothing? (New Approaches to Immune Monitoring in Heart Transplantation) (Harbor GHI) (HTX, BSTR, PATH)

10:30 AM – 12:00 PM
CONCURRENT SYMPOSIUM 28
JHLT at ISHLT: The Year in a Capsule (Seaport H) (ALL)

NOON – 2:00 PM
LUNCH BREAK

VIEW EXHIBITS (Harbor A-F)

VIEW POSTERS (Harbor and Seaport Foyers)

NOON – 12:45 PM
BOX LUNCH DISTRIBUTION (Palm Foyer)

12:05 PM – 12:55 PM
MECHANICAL CIRCULATORY SUPPORT SCIENTIFIC COUNCIL MEETING (Grand Hall A) (MCS)
12:05 PM – 12:55 PM
PULMONARY HYPERTENSION
COUNCIL MEETING
(Grand Hall B)

12:05 PM – 12:55 PM
PEDIATRIC TRANSPLANTATION
COUNCIL MEETING
(Grand Hall C)

12:05 PM – 12:55 PM
INFECTIOUS DISEASES
COUNCIL MEETING
(Grand Hall D)

12:05 PM – 12:55 PM
PATHOLOGY COUNCIL
MEETING
(Harbor GHI)

1:05 PM – 1:55 PM
HEART FAILURE AND
TRANSPLANT MEDICINE
COUNCIL MEETING
(Grand Hall A)

1:05 PM – 1:55 PM
PULMONARY TRANSPLANTATION
COUNCIL MEETING
(Grand Hall B)

1:05 PM – 1:55 PM
PEDIATRIC HEART FAILURE
WORKFORCE MEETING
(Grand Hall C)

2:00 PM – 3:30 PM
CONCURRENT SESSION 25
Tackling Bad VAD Situations:
Penalty or Score?
(Grand Hall A)

2:00 PM – 3:30 PM
CONCURRENT SESSION 26
How to Live Better with
an LVAD
(Grand Hall B)

2:00 PM – 3:30 PM
CONCURRENT SESSION 27
All's Well That Ends Well?
What We Can Learn From
Heart Transplant Registries
(Grand Hall C)

2:00 PM – 3:30 PM
CONCURRENT SESSION 28
Diagnosis and Monitoring
of Pulmonary Hypertension
(Grand Hall D)

2:00 PM – 3:30 PM
CONCURRENT SYMPOSIUM 29
Approach to the Highly
Sensitized Patient Awaiting
Heart Transplantation
(Harbor GHI)

2:00 PM – 3:30 PM
CONCURRENT SESSION 29
Lung Donation: Take It to
the Limits
(Seaport H)

2:00 PM – 3:30 PM
CONCURRENT SESSION 30
Philip K. Caves Candidate
Presentation Session
(Gaslamp AB)

2:00 PM – 3:30 PM
CONCURRENT SYMPOSIUM 30
Controversies in Listing
Children for Thoracic Organ
Transplant
(Gaslamp CD)

3:30 PM – 4:00 PM
COFFEE BREAK
(Harbor A-F)

VISIT EXHIBITS
(Harbor A-F)

VIEW POSTERS
(Harbor and Seaport Foyers)

4:00 PM – 5:30 PM
CONCURRENT SESSION 31
Building the Bridge to
Transplant: Old Challenges,
New Solutions
(Grand Hall A)

4:00 PM – 5:30 PM
CONCURRENT SESSION 32
Mechanical Circulatory
Support: Is the Outcome
Worth the Cost?
(Grand Hall B)

4:00 PM – 5:30 PM
CONCURRENT SESSION 33
A Midsummer Night's Dream
(Potential Improvements in
Outcomes After Cardiac
Transplantation)
(Grand Hall C)
4:00 PM – 5:30 PM
CONCURRENT SESSION 34
C. Chronic Lung Allograft Dysfunction: Mechanisms
(Grand Hall D)
(LTX, BSTR)

4:00 PM – 5:30 PM
CONCURRENT SESSION 35
Alternative Resources for Organs (Harbor GHI)
(HTX, DMD, BSTR)

4:00 PM – 5:30 PM
CONCURRENT SESSION 36
Long-Term Outcomes in Pediatric Heart Transplantation
(Seaport H)
(PEDS, HTX, PEEQ)

4:00 PM – 5:30 PM
CONCURRENT SESSION 37
Heart and Lung Transplant Pathology (Gaslamp AB)
(PATH, HTX, LTX)

4:00 PM – 5:30 PM
CONCURRENT SESSION 38
Innovative Pharmacotherapeutic Approaches to Thoracic Transplant and Mechanically Assisted Patients
(Gaslamp CD)
(PHARM, HTX, LTX, MCS)

5:30 PM – 6:30 PM
MINI ORAL SESSION 7
Improving the Heart Donor
(Grand Hall A)
(DMD, HTX)

5:30 PM – 6:30 PM
MINI ORAL SESSION 8
Immunology and the Child in Heart Transplantation
(Gaslamp AB)
(PEDS, HTX, PATH)

5:30 PM – 6:30 PM
MINI ORAL SESSION 9
Quality of Life, Ethics, Policy and Economics in MCS and Thoracic Transplant
(Gaslamp CD)
(PEEQ, NSHAH)

5:30 PM – 6:30 PM
MINI ORAL SESSION 10
VADs Gone Bad, Complications after MCS
(Grand Hall B)
(MCS, HF)

5:30 PM – 6:30 PM
MINI ORAL SESSION 11
Heart Transplant: Monitoring and Immunosuppression
(Grand Hall C)
(HTX, PHARM, HF)

5:30 PM – 6:30 PM
MINI ORAL SESSION 12
Lung Transplant: Candidate Selection and Genetic Variation
(Seaport H)
(LTX, BSTR, HTX)

5:30 PM – 6:30 PM
MODERATED POSTER SESSION 3
(Seaport H)

7:00 PM – 9:30 PM
PRESIDENT’S GALA RECEPTION
(Pool Deck)

SUNDAY,
APRIL 13, 2014

7:00 AM – NOON
REGISTRATION DESK OPEN
(Palm Foyer)

7:00 AM – 1:30 PM
SPEAKER READY ROOM OPEN
(Balboa ABC)

7:00 AM – 9:15 AM
ISHLT BOARD OF DIRECTORS MEETING
(La Jolla AB)

7:00 AM – 8:00 AM
SUNRISE SYMPOSIUM 11
VAD Teams Working Across Different Countries: How To Do It
(Harbor GHI)
(NHSAH, MCS)

7:00 AM – 8:00 AM
SUNRISE SYMPOSIUM 12
Swan Songs and Controversies in Hemodynamics
(Seaport H)
(PH, HF, LF)
**SCHEDULE AT A GLANCE**

**7:00 AM – 8:00 AM**
**SUNRISE SYMPOSIUM 13:**
Lab Methods 101: What Everyone Needs to Know to Read Transplant Papers (Gaslamp AB) (ALL)

**7:00 AM – 8:00 AM**
**SUNRISE SYMPOSIUM 14**
Why Not Infant Lung Transplantation? (Gaslamp CD) (PEDS, LF, LTX)

**7:00 AM – 8:00 AM**
**SUNRISE SYMPOSIUM 15**
High-Risk Donor: Extending Our Criteria in Times of Organ Shortage (Old Town AB) (DMD, ID, LF, LTX, HF, HTX)

**8:00 AM – 9:15 AM**
**CONCURRENT SESSION 39**
Mechanical Circulatory Support: Bench to Bedside (Harbor GHI) (MCS, BSTR)

**8:00 AM – 9:15 AM**
**CONCURRENT SESSION 40**
As You Like It – Optimization of Heart Transplant Immunosuppression (Seaport H) (HTX, PHARM, HF)

**8:00 AM – 9:15 AM**
**CONCURRENT SESSION 41**
Left Heart Failure, the RV and Other Types of Pulmonary Hypertension (Gaslamp AB) (PH, HF, PHARM)

**8:00 AM – 9:15 AM**
**CONCURRENT SESSION 42**
Risk Assessment in the Pediatric Heart Candidate (Gaslamp CD) (PEDS, HTX, PATH)

**8:00 AM – 9:15 AM**
**CONCURRENT SESSION 43**
Breathing the Microbes: Infections for the Lung Transplant Clinician (Old Town AB) (LTX, ID, BSTR)

**9:15 AM – 9:30 AM**
**COFFEE BREAK** (Palm Foyer)

**9:30 AM – 11:45 AM**
**PLENARY SESSION** (Harbor GHI) (ALL)

**11:45 AM – NOON**
**COFFEE BREAK** (Palm Foyer)

**12:00 PM – 1:15 PM**
**CONCURRENT SESSION 44**
Innovations in Mechanical Circulatory Support Care (Harbor GHI) (MCS, HF)

**12:00 PM – 1:15 PM**
**CONCURRENT SESSION 45**
Adult Heart Failure: Look After Your Liver (Seaport H) (HF, HTX)

**12:00 PM – 1:15 PM**
**CONCURRENT SESSION 46**
Antibody Mediated Rejection 2014: HLA and Beyond (Gaslamp AB) (PATH, LTX)

**12:00 PM – 1:15 PM**
**CONCURRENT SESSION 47**
What Becomes of the Marginal Hearted (Gaslamp CD) (DMD, HTX)

**12:00 PM – 1:15 PM**
**CONCURRENT SESSION 48**
Novel Approaches to Keep the Heart Going (Old Town AB) (HTX, BSTR)
My, how time flies. Astellas is entering its 20th year focusing on transplant immunology. Today we remain steadfast in our commitment to advancing the field. Tomorrow we will seek new possibilities for improving the transplant experience. Together, we celebrate the remarkable evolution in transplant history.
The INTERNATIONAL SOCIETY FOR HEART AND LUNG TRANSPLANTATION is most grateful for the support of the following companies for the Society and its endeavors:

**TIER 1**
Actelion
Gilead Sciences
Thoratec

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Bayer
Heartware
Maquet
United Therapeutics

**TIER 3**
ImaCor
XDx
All meetings and activities will take place at the Manchester Grand Hyatt Hotel in San Diego unless otherwise specified. All papers will be presented in English. Please check the ISHLT website (www.ishlt.org) for updates. This Final Program reflects the latest session schedule and room assignments.
WEDNESDAY, APRIL 9, 2014

6:00 AM – 8:00 PM  SPEAKER READY ROOM OPEN (Balboa ABC)

8:15 AM – 4:00 PM  ISHLT BOARD OF DIRECTORS MEETING (Gaslamp A-C)

2:00 PM – 4:00 PM  STANDARDS AND GUIDELINES COMMITTEE MEETING  
(Old Town AB)

4:00 PM – 6:00 PM  TRANSPLANT REGISTRY STEERING COMMITTEE MEETING  
(Gaslamp D)

4:00 PM – 6:00 PM  GRANTS AND AWARDS COMMITTEE MEETING (Old Town AB)

5:00 PM – 6:00 PM  NOMINATING COMMITTEE MEETING (Gaslamp A-C)

5:00 PM – 8:00 PM  REGISTRATION DESK OPEN (Palm Foyer)

THURSDAY, APRIL 10, 2014

7:00 AM – 6:00 PM  SPEAKER READY ROOM OPEN (Balboa A-C)

7:00 AM – 6:00 PM  REGISTRATION DESK OPEN (Palm Foyer)

7:00 AM – 8:00 AM  2015 SYMPOSIUM SELECTION COMMITTEE MEETING  
(Gaslamp A-C)

8:00 AM – 6:00 PM  PRESS OFFICE OPEN (Show Office 7)
8:00 AM – 10:00 AM  

**PRE-MEETING SYMPOSIUM 1**

**Preventing VAD Complications (Seaport)**

**CHAIRS:** Emma Jane Birks, MBBS, PhD, BSc, FRCP and Martin Strueber, MD  
(MCS, HF, HTX)

**SESSION SUMMARY:** Despite the unequivocal benefits of continuous flow devices over preexisting pulsatile technologies, certain clinical scenarios and new complications continue to challenge heart failure clinicians. These vexing problems include pump thrombosis, late onset right heart failure and de novo aortic insufficiency. In addition, the success of surgical repair of congenital cardiac disorders has resulted in a growing population of young adults with failing ventricles and complex anatomies in need of mechanical support as a bridge to transplantation. Lastly, the entity of acute cardiogenic shock in the setting of anterior wall MI continues to challenge clinicians who have a wide armamentarium of options (PCI, CABG, short term support, long term support and even TAH) but no clear algorithm as to how to best approach these difficult cases. Clearly, these guideline-lacking topics represent ideal scenarios for singular and detailed case presentations with stop points during the medical and surgical management that can be used to generate “what do you do next” questions for a panel of experts and for the audience.

8:00 AM  
**Pump Thrombosis: Diagnosis, Management and Prevention**  
Jennifer Cowger, MD, St. Vincent Heart Center, Indianapolis, IN, USA

8:15 AM  
**Q & A**

8:20 AM  
**Mechanical Support in Complex Congenital Disease**  
Daniel Zimpfer, MD, Medical University of Vienna, Vienna, Austria

8:35 AM  
**Q & A**

8:40 AM  
**Late Onset Right Heart Failure... Now What?**  
Edwin C. McGee, MD, Northwestern University, Chicago, IL, USA

8:55 AM  
**Q & A**

9:00 AM  
**De Novo Aortic Insufficiency: What Are The Options**  
Carmelo A. Milano, MD, Duke University Medical Center, Durham, NC, USA

9:15 AM  
**Q & A**

9:20 AM  
**Anterior Wall MI and Cardiogenic Shock: Stent, Bypass, Support or Replace?**  
Michel Morshuis, MD, Heart Center NRW, Bad Oeynhausen, Germany

9:35 AM  
**Q & A**

9:40 AM  
**Case Presentation on de Novo Aortic Insufficiency**  
Andrew J. Lenneman, MD, University of Louisville, Louisville, KY, USA

9:45 AM  
**Q & A**

9:50 AM  
**Case Presentation on Anterior Wall MI and Cardiogenic Shock: Stent, Bypass, Support or Replace?**  
Jose N. Nativi-Nicolau, MD, University of Utah, Salt Lake City, UT, USA

9:55 AM  
**Q & A**
Group 3 Pulmonary Hypertension… You Can’t Ignore It Any Longer (Grand Hall A)

**CHAIRS:** Oksana A. Shlobin, MD and Raymond L. Benza, MD (PH, LF, LTX)

**SESSION SUMMARY:** Pulmonary hypertension (PH) is a common and important comorbid condition among patients with parenchymal lung disease (WHO group III PH) that worsens survival, so the idea of treating these patients with PH specific therapies has always been attractive to pulmonologists and PH treating cardiologists. However, randomized, controlled clinical trials have so far failed to demonstrate efficacy of PH specific therapies in these patients, and these drugs can sometimes worsen ventilation-perfusion mismatching and oxygenation.

At ISHLT 2013 in Montreal, data was presented that showed improvements in hemodynamics, right heart function, and functional capacity without worsening oxygenation among patients with pulmonary fibrosis and an advanced PH phenotype who were treated with parenteral treprostinil. Recently in the literature, different phenotypes of heart-lung interactions have been described that could identify patients with more severe PH and RV failure who may benefit from PH specific therapies. Just as it may be important to identify and distinguish phenotypic differences in patients with WHO group III PH, it is also important for clinicians to understand the multiple mechanisms by which patients with scleroderma and sarcoidosis can develop PH that are important to identify and distinguish in order to appropriately guide therapy. This session on PH in lung disease aims to discuss the different phenotypes of heart-lung interactions among patients with parenchymal lung disease, the multiple potential causes of PH in patients with scleroderma and sarcoidosis, and to discuss PH specific therapy in WHO group III PH by way of a pro/con debate. This is a topic of great interest to not only PH specialists, but also transplant pulmonologists, pharmacists, and nursing/allied health members.

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**8:00 AM**  
**Predictors and Pitfalls of Diagnosing Pulmonary Vascular Disease in Group 3 PH and Role of Exercise Hemodynamics**  
Rajan Saggar, MD, UCLA, Los Angeles, CA, USA

**8:20 AM**  
**Q & A**

**8:25 AM**  
**How to Define PH Due to COPD and ILD? A Discussion of Different Clinical Phenotypes of WHO Group 3 PH**  
Lars C. Huber, MD, University Hospital, Zurich, Switzerland

**8:45 AM**  
**Q & A**

**8:50 AM**  
**Sarcoidosis: Understanding Pulmonary Hypertension in Diseases with Multifactorial Causes That Influence Treatment Strategies**  
Ioana R. Preston, MD, Tufts Medical Center, Boston, MA, USA

**9:10 AM**  
**Q & A**

**9:15 AM**  
**PH in Scleroderma ILD or Scleroderma PAH with ILD: What is the Limiting Factor?**  
Steven D. Nathan, MD, Inova Fairfax Hospital, Falls Church, VA, USA

**9:35 AM**  
**Q & A**

**9:40 AM**  
Panel Discussion
Ex-Vivo Donor Heart Support: Expanding Availability and Optimising Function (Grand Hall B)

**CHAIRS:** Bartley P. Griffith, MD and Stephan Schueler, MD, PhD, FRCS (DMD, HF, HTX, MCS)

**SESSION SUMMARY:** Ex-Vivo organ support devices for donor hearts allow a significant reduction of cold ischaemia and therefore permit an extension of the standard geographical procurement distance. Additionally, they allow for both reconditioning of some marginal organs and also provide an evaluation platform for rejecting donor organs with occult disease, thereby limiting any post-implant morbidity in the recipient. This symposium will provide a timely overview of our current understanding and practice of using these devices. Topics to be discussed include the following: — Establishing a new ex-vivo organ support service — Strategies for evaluating organ function — Potential for pre-transplant and ex-vivo treatment of donor hearts — Reconditioning of extended-criteria organs — Role in facilitating the use of hearts from NHBD for clinical transplantation — Economic evidence supporting Ex-Vivo donor organ management. This symposium will provide a much needed educational update, to multi-disciplinary participants, on a topic in organ transplantation that is evolving very rapidly and will provide the necessary baseline appreciation and acceptance of this technology.

8:00 AM
**Establishing an Ex-Vivo Donor Heart Support Service**
Martin Stueber, MD, University Heart Centre, Leipzig, Germany

8:15 AM
**Q & A**

8:20 AM
**Update on the International, Randomised PROCEED II Trial Comparing Standard Cold Preservation Against Physiological Perfusion with the TransMedics Cardiac OCS**
Abbas Ardehali, MD, UCLA School of Medicine, Los Angeles, CA, USA

8:35 AM
**Q & A**

8:40 AM
**Reconditioning of Extended-Criteria Donor Hearts**
Andre Simon, MD, Harefield Hospital, London, United Kingdom

8:55 AM
**Q & A**

9:00 AM
**Functional Evaluation and Pre-Transplant Ex-Vivo Treatment Options**
Darren Freed, MD PhD FRCSC, Mazankowski Heart Institute, Edmonton, AB, Canada

9:15 AM
**Q & A**

9:20 AM
**Facilitating Cardiac Transplantation From Non Heart-Beating Donors**
Kumud Dhital, MD, St. Vincent’s Hospital, Sydney, Australia

9:35 AM
**Q & A**

9:40 AM
**The Economic Evidence**
Edward Zavala, MBA, Vanderbilt University Medical Center, Nashville, TN, USA

9:55 AM
**Q & A**
Lung Transplant Candidate Selection: Have We Pushed The Envelope Too Far? (Grand Hall C)

**CHAIRS:** Cynthia J. Gries, MD, MSc and Peter M. Hopkins, FRACP (LF, LTX, ID)

**SESSION SUMMARY:** Existing selection criteria aim to discriminate those expected to thrive from those anticipated to do poorly following lung transplantation. The last 5 years has witnessed an explosion in lung transplantation for older and sicker candidates who fall outside of selection guidelines. Since these criteria were developed through consensus expert opinion and established, epidemiological studies have confirmed increased mortality for certain criteria including age above 55, extremes of weight, and, possibly, frailty. The common thread underpinning these observations is body composition derived inflammation. This symposium aims to reevaluate key selection criteria through the lens of body composition and inflammation. It will also explore intervention strategies that may be applicable to all lung transplant candidates.

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**8:00 AM** Debate: PRO: ECMO Should Be An Absolute Contraindication To Lung Transplantation
Vivek N. Ahya, MD, Hospital of the University of Pennsylvania, Philadelphia, PA, USA

**8:10 AM** Debate: CON: ECMO Should Be An Absolute Contraindication To Lung Transplantation
Allan R. Glanville, MBBS, MD, FRACP, St. Vincent’s Hospital, Sydney, NSW, Australia

**8:20 AM** Debate PRO Rebuttal
Vivek N. Ahya, MD, Hospital of the University of Pennsylvania, Philadelphia, PA, USA

**8:25 AM** Debate CON Rebuttal
Allan R. Glanville, MBBS, MD, FRACP, St. Vincent’s Hospital, Sydney, Australia

**8:30 AM** Body Composition in Lung Transplantation: Older Age, Frailty, and BMI
David J. Lederer, MD, MS, Columbia University, New York, NY, USA

**8:50 AM** The Candidate with a Viral Infection: Don’t Go There!
Paolo A. Grossi, MD, PhD, University of Insubria, Varese, Italy

**9:10 AM** The Candidate with a Non-Viral Infection: Don’t Go There!
Fernanda Silveira, MD, University of Pittsburgh Medical Center, Pittsburgh, PA, USA

**9:30 AM** If You Are Going To Do It Again, Do It Right!
Clemens Aigner, MD, Medical University of Vienna, Vienna, Austria

**9:50 AM** Panel Discussion
Lung Transplantation: Decoding Early Engraftment Events That Control Survival (Grand Hall D)

**CHAIRS:** Andrew J. Fisher, FRCP, PhD and Howard J. Huang, MD
(LF, LTX, BSTR)

**SESSION SUMMARY:** It is becoming clear that many significant risk factors for lung transplant rejection occur within the early engraftment period. Also, it is apparent that the current immunosuppression strategies have not significantly improved patient survival in the last decade. Recent developments in experimental lung transplantation have helped uncover novel mechanisms that link innate and acquired immunity following engraftment. In this symposium we propose to present new insights into ischemia reperfusion injury, T cell activation, and humoral immunity that impact the maintenance of allograft tolerance as well as long-term survival, using a clinical case to guide the presentations. The goal of these presentations is to educate the wider transplant community of potential new therapeutic targets and translational opportunities for the development of novel immunosuppression approaches for lung transplant recipients.

**8:00 AM**  
**Case Presentation:** A Patient Develops PGD  
Ramsey Hachem, MD, Washington University School of Medicine, St. Louis, MO, USA

**8:05 AM**  
**The Role of Necrotic Cell Injury in Th17 Immune Responses Against Lung Transplants**  
Andrew E. Gelman, PhD, Washington University School of Medicine, St. Louis, MO, USA

**8:20 AM**  
**Q & A**

**8:25 AM**  
**Case Update:** Graft Dysfunction and Autoantibodies Develop  
Ramsey Hachem, MD, Washington University School of Medicine, St. Louis, MO, USA

**8:28 AM**  
**Immune Mechanisms Leading to Autoimmunity Following Organ Transplantation**  
David S. Wilkes, MD, Indiana University School of Medicine, Indianapolis, IN, USA

**8:43 AM**  
**Q & A**

**8:48 AM**  
**Case Update:** Chronic Lung Allograft Dysfunction Develops  
Ramsey Hachem, MD, Washington University School of Medicine, St. Louis, MO, USA

**8:51 AM**  
**IL17 - A Big Player in Chronic Lung Allograft Dysfunction?**  
Bart M. Vanaudenaerde, PhD, KU Leuven, Leuven, Belgium

**9:06 AM**  
**Q & A**

**9:11 AM**  
**The Impact of Early Humoral Responses on Long-Term Survival of Lung Grafts**  
Thalachallour Mohanakumar, PhD, Washington University School of Medicine, St. Louis, MO, USA

**9:31 AM**  
**Q & A**

**9:36 AM**  
**Case Update:** Autoantibodies are Identified  
Ramsey Hachem, MD, Washington University School of Medicine, St. Louis, MO, USA

**9:39 AM**  
**Therapeutic Strategies for Blocking IL17 and IL6 Responses**  
Tereza Martinu, MD, Duke University, Durham, NC, USA

**9:54 AM**  
**Q & A**
Joint ISHLT/IPTA Symposium: Here They Come: Preparing Pediatric Patients for Transition To Adult Care (Harbor GHI)

**CHAIRS:** Kathleen L. Grady, PhD, APN, FAAN and Elfriede Pahl, MD (PEDS, NHSAH, LF, LTX, HF, HTX)

**SESSION SUMMARY:** Transition is defined as “the process by which adolescents and young adults with chronic childhood illnesses are prepared to take charge of their lives and their health in adulthood.” Effective transition programs have the potential to decrease morbidity and mortality associated with transfer of care and can improve quality of life. This session will discuss issues essential to successful transition of pediatric patients to adult care, including patient and family challenges, as well as potential strategies/interventions to meet these challenges.

**Friday, May 19th**

**8:00 AM**  
**Ready or Not? Assessment of Transition Readiness**  
Karen Uzark, PhD, CPNP, University of Michigan, Ann Arbor, MI, USA

**8:15 AM**  
**Developmental /Psychosocial Challenges to Transition**  
Diana A. Shellmer, PhD, Children’s Hospital, Pittsburgh, PA, USA

**8:30 AM**  
**Family Factors that Impact Transition**  
Leigh C. Reardon, MD, University of California at Los Angeles, Los Angeles, CA, USA

**8:45 AM**  
**Strategies for Transition Preparation in Adolescent Transplant Recipients**  
Samantha Anthony, PhD, MSW, RSW, The Hospital for Sick Children, Toronto, ON, Canada

**9:00 AM**  
**Outcomes in Pediatric Thoracic Transplant Recipients Transitioned to Adult Care**  
Christian Benden, MD, University Hospital Zurich, Zurich, Switzerland

**9:15 AM**  
**Case Presentation**  
Eugene C. DePasquale, MD, University of California at Los Angeles, Los Angeles, CA, USA

**9:20 AM**  
**Panel Discussion**

**9:30 AM**  
**Case Presentation**  
Kathleen L. Grady, PhD, APN, FAAN, Northwestern University, Chicago, IL, USA

**9:35 AM**  
**Panel Discussion**

**9:45 AM**  
**Final Panel Discussion**

**10:00 AM – 10:15 AM**  
**COFFEE BREAK** (Palm and Grand Foyers)

**10:00 AM – 7:15 PM**  
**POSTERS OPEN** (Harbor and Seaport Foyer)
Making Bloody Sense of Anticoagulation (Seaport)

CHAIRS: Haifa Lyster, BPharm(Hons), MSc and Jeffrey J. Teuteberg, MD
(MCS, PHARM, HF, HTX)

SESSION SUMMARY: Anticoagulation is common in most practice areas represented by the ISHLT membership. Although most clinicians use anticoagulation therapies, questions often arise around how these medications compare with others within this class, interpretation of labs testing, and the function of new and future medications. The goals of this symposium are to discuss: 1) Where anticoagulation therapy has been, 2) The status of anticoagulation in 2014 and 3) Appropriate interpretation and application of anticoagulation monitoring; and then use this information in discussion of MCS recipients and their thrombotic and bleeding risk after implantation where multiple different regimens, goals and management strategies that employed across centers and between devices.

10:15 AM Anticoagulants and Antiplatelets: A Brief Primer!
Rochelle M. Gellatly, PharmD, Alfred Hospital, Melbourne, Australia

10:35 AM Early Post-op Anticoagulation: Is It Needed and What to Use?
Mark S. Slaughter, MD, University of Louisville, Louisville, KY, USA

10:50 AM Warfarin for VADs – What Goals, At Risk Patients, Warfarin Alternatives?
David S. Feldman, MD, PhD, Minneapolis Heart Institute, Minneapolis, MN, USA

11:05 AM Antiplatelet Therapy – Types, Doses, Platelet Functional Assays/Targets
Robert L. Page, PharmD, MSPH, University of Colorado, Denver, CO, USA

11:20 AM Bad VADs - Anticoagulation Failures
Anna L. Meyer, MD, Leipzig Heart Center, Leipzig, Germany

11:35 AM Case Presentation (Bleeding)
Gautam Ramani, MD, University of Maryland, Baltimore, MD, USA

11:40 AM Panel Discussion

11:55 AM Case Presentation (Thrombosis)
Lazaros A. Nikolaidis, MD, Temple University Hospital, Philadelphia, PA, USA

12:00 PM Panel Discussion
PRE-MEETING SYMPOSIUM 8

Chronic Thromboembolic Pulmonary Hypertension: Busting the Clot (Grand Hall A)

**CHAIRS:** Nick H. Kim, MD, Michael M. Madani, MD and Steven Kawut, MD, MS

(PH, HF, HTX, LF, LTX)

**SESSION SUMMARY:** Chronic thromboembolic disease is an area that overlaps the pulmonary hypertension, lung transplant, and mechanical support councils. The symposium will cover the diagnostics and therapeutics of the disease while discussing novel therapeutics and use of mechanical support pre and post-operatively.

**10:15 AM** Medical Approaches in Non-Surgical CTEPH Candidate
Victor Tapson, MD, Duke University, Durham, NC, USA

**10:30 AM** Q & A

**10:35 AM** Is Right Ventricular Dysfunction a Limiting Factor in the Indication for Pulmonary Endarterectomy?
Marc De Perrot, MD, University of Toronto, Toronto, ON, Canada

**10:50 AM** Q & A

**10:55 AM** How to Approach Patients With Residual PH After Pulmonary Endarterectomy?
David Jenkins, FRCS, Papworth Hospital, Cambridge, United Kingdom

**11:10 AM** Q & A

**11:15 AM** Debate PRO: Exercise Induced PH is the Best Indication for Pulmonary Endarterectomy in Patients with Chronic Thromboembolic Disease
William Auger, MD, University of California San Diego Medical Center, La Jolla, CA, USA

**11:30 AM** Debate CON: Exercise Induced PH is the Best Indication for Pulmonary Endarterectomy in Patients with Chronic Thromboembolic Disease
Elie Fadel, MD, Hospital Marie Lannelongue, Le Plessis Robinson, France

**11:45 AM** Debate PRO Rebuttal
William Auger, MD, University of California San Diego Medical Center, La Jolla, CA, USA

**11:50 AM** Debate CON Rebuttal
Elie Fadel, MD, Hospital Marie Lannelongue, Le Plessis Robinson, France

**11:55 AM** Panel Discussion
Invasive Fungal Infections Among Cardiothoracic Transplant Recipients: Consensus Guidelines and Recommendations from the ISHLT Fungal Expert Panel

(Grand Hall B)

CHAIRS: Shahid Husain, MD, MS, Orla Morrissey, MD and Amparo Solé, MD, PhD

(ID, PHARM, HR, HTX, LF , LTX)

SESSION SUMMARY: A consensus and guidelines for invasive fungal infection developed by the ISHLT fungal expert panel will present a review of the literature and recommendations regarding the epidemiology, diagnostics, therapeutics and prophylaxis of fungal infections among cardiothoracic transplant recipients.

10:15 AM Epidemiology and Risk Factors for Fungal Infections Among Cardiothoracic Transplant Recipients
Denis Hadjiliadis, MD, MHS, University of Pennsylvania, Philadelphia, PA, USA

10:35 AM Diagnosis of Fungal Infection Among Lung and Heart Transplant Recipients: An Update on Galactomannan, PCR and Beta-D-Glucan
Me-Linh Luong, MD, University of Montreal St-Luc Hospital, Montreal, QC, Canada

10:55 AM Antifungal Prophylaxis: What and When?
Daniel C. Chambers, MBBS MRCP FRACP MD, The Prince Charles Hospital, Brisbane, Australia

11:15 AM Treatment of Invasive Fungal Infections: State of the Art
Aric L. Gregson, MD, David Geffen School of Medicine at UCLA, Los Angeles, CA, USA

11:35 AM Therapeutic Drug Monitoring: A Consensus
Eliane M Billaud, PhD, PharmD, Hospital Georges Pompidou, Paris, France

11:55 AM Case Presentation
Jose M. Cifrian, MD, Hospital University Marques Valdecilla, Santander, Spain

12:00 PM Panel Discussion
The Many Faces of Chronic Lung Allograft Dysfunction  
(Grand Hall C)  
CHAIRS: Masaaki Sato, MD and Geert Verleden, MD, PhD  
(LF.LTX.PATH)  
SESSION SUMMARY: Lung allograft dysfunction occurs in many different ways; these present and progress in differing fashions; treatment, although not well developed, could be different between different types; this session will address these issues.

10:15 AM  
Restrictive CLAD: Diagnostic Criteria  
Jamie L. Todd, MD, Duke University, Durham, NC, USA

10:30 AM  
Restrictive CLAD: Radiology and Clinical Features  
Miranda Paraskeva, MBBS, Alfred Hospital, Melbourne, Australia

10:45 AM  
Pathologic Findings in Restrictive CLAD/RAS  
David Hwang, MD, PhD, FRCPC, University Health Network, Toronto, ON, Canada

11:00 AM  
Panel Discussion

11:15 AM  
Obstructive CLAD: Diagnostic Criteria  
Sangeeta Bhorade, MD, Northwestern Memorial Hospital, Chicago, IL, USA

11:30 AM  
Obstructive CLAD: Radiology and Clinical Features  
Robin Vos, MD, PhD, University Hospital Gasthuisberg, Leuven, Belgium

11:45 AM  
The Pathology of Obstructive CLAD  
Charles C. Marboe, MD, Columbia University, New York, NY, USA

12:00 PM  
Panel Discussion
10:15 AM – 12:15 PM

PRE-MEETING SYMPOSIUM 11

Crossing Clinical Barriers on the Wings of Science: Evolution of ABO Incompatible Heart Transplantation (Grand Hall D)

**CHAIRS:** Kimberly Gandy, MD, PhD and Simon Urschel, MD (BSTR, HF, HTX)

**SESSION SUMMARY:** This symposium has multiple purposes. It is intended to show how scientific concepts are developed for clinical application. It will show the history of ABO incompatible heart transplantation, but from the point of view of the designer of therapy. In so doing, it will delineate some of the technical details in the path of a very significant advance in transplantation from idea to clinical reality. In so doing, we hope that this session will be both informative, and inspirational. We intend for this session to stimulate the thought processes necessary to take other burgeoning ideas from bench to bedside by giving a better understanding of the processes involved in translating science to our patients.

10:15 AM **Neonatal Tolerance: The Biological and Historical Background of Exploiting the Immature Immune System for Transplantation**
Leslie L. Brent, Ph.D., Formerly St. Mary’s Hospital Medical School, retired, London, United Kingdom

10:40 AM **The Saga of the First Planned ABO Incompatible Heart Transplant**
Lori J. West, MD, DPhil, University of Alberta, Edmonton, AB, Canada

11:00 AM Q & A

11:05 AM **“I Wish We Knew This Back Then:” New Insights and Technologies in ABO Immunobiology**
Mylvaganam Jeyakanthan, MD, University of Alberta, Edmonton, AB, Canada

11:20 AM Q & A

11:25 AM **Outcomes and Limits of ABO Incompatible Heart Transplantation**
Richard Kirk, MA FRCP FRCPCH, Freeman Hospital, Newcastle upon Tyne, United Kingdom

11:40 AM Q & A

11:45 AM **Debate: PRO: O(+) MG... This Young Adult Will Die Waiting. I Am Going To Accept An ABOi Donor**
Asif Hasan, MD, Freeman Hospital, Newcastle upon Tyne, United Kingdom

11:55 AM **Debate: CON: O(+) MG... This Young Adult Will Die Waiting. I Am Going To Accept An ABOi Donor**
Gregory I. Snell, FRACP, MBBS, MD, Alfred Hospital, Melbourne, Australia

12:05 PM **Debate PRO Rebuttal**
Asif Hasan, MD, Freeman Hospital, Newcastle upon Tyne, United Kingdom

12:10 PM **Debate CON Rebuttal**
Gregory I. Snell, FRACP, MBBS, MD, Alfred Hospital, Melbourne, Australia
**To VAD or to Transplant (Harbor GHI)**

**CHAIRS:** Jose Tallaj, MD and Goran Dellgren, MD, PhD

**MCS, HF, HTX**

**SESSION SUMMARY:** Heart Transplantation and Mechanical Circulatory Support are therapies that result in improvement in survival and quality of life in patients with end-stage heart disease. Heart transplantation has a long track-record with current estimated survival of about 60% at 10 years. Mechanical circulatory support, on the other hand, is a relatively young field, but current survival with second generation devices is approaching 80% at two years, similar to transplantation in some instances. As the technology improves, the expected survival with mechanical support should continue to increase and maybe even equate that of transplantation. The purpose of this symposium is to compare transplantation to mechanical support in regards to survival, quality of life and morbidity.

**10:15 AM** Survival Post-Transplantation
Andreas O. Zuckermann, MD, Medical University of Vienna, Vienna, Austria

**10:35 AM** Survival Post-Mechanical Circulatory Support
Francis Pagani, MD, PhD, University of Michigan, Ann Arbor, MI, USA

**10:55 AM** Quality of Life after Transplant and Mechanical Circulatory Support
Kathleen L. Grady, PhD, APN, FAAN, Northwestern University, Chicago, IL, USA

**11:15 AM** When the Right Choice is Palliative Care
Jane MacIver, Rn-Np PhD, University Health Network, Toronto, ON, Canada

**11:35 AM** Patient Selection or Patient Preference?
David O. Taylor, MD, The Cleveland Clinic, Cleveland, OH, USA

**11:55 AM** To VAD or to Transplant – That is The Final Question
James K. Kirklin, MD, University of Alabama at Birmingham, Birmingham, AL, USA

**12:00 PM – 12:45 PM**
BOX LUNCH DISTRIBUTION (Palm Foyer)

**12:15 PM – 2:00 PM**
LUNCH BREAK/VIEW POSTERS

**12:30 PM – 1:45 PM**
JUNIOR FACULTY MENTOR LUNCH (Gaslamp A-C)

**I2C2 COMMITTEE MEETING (Gaslamp D)**

**EDUCATION COMMITTEE MEETING (La Jolla AB)**

**VAD ID WORKFORCE MEETING (Seaport H)**
12:30 PM – 1:30 PM
PHARMACY AND PHARMACOLOGY COUNCIL MEETING (Grand Hall C)
NURSING, HEALTH SCIENCE AND ALLIED HEALTH COUNCIL MEETING (Grand Hall D)
BASIC SCIENCE TRANSLATIONAL RESEARCH COUNCIL MEETING (Harbor GHI)
DCD MINI REGISTRY MEETING (Old Town AB)

1:30 PM – 2:00 PM
REGISTRIES AND DATABASES COMMITTEE MEETING (Old Town AB)
REGISTRY ADVISORY COMMITTEE MEETING (Old Town AB)

2:00 PM – 4:00 PM

PRE-MEETING SYMPOSIUM 13

Drilling Down on Myocardial Recovery – Basics and Clinical (Seaport)

**CHAIRS:** Stavros G Drakos, MD, PhD and Palak Shah, MD, MS (MCS, BSTR, HF, HTX)

**SESSION SUMMARY:** Mechanical circulatory support, through the advent of continuous-flow left ventricular assist devices, has dramatically altered our management of patients with advanced heart failure. Despite over a decade of experience with continuous-flow pumps, we only have a basic understanding of the human cellular and molecular response to mechanical support. Gene expression, metabolomics and other translational techniques should provide some key insights into the human response to continuous blood flow and will perhaps lead to strategies to predict and prevent the morbidities of VAD therapy. Finally, the “holy grail” of MCS is myocardial recovery which may indeed involve therapy with stem cells, but only if aided by an integrated analysis of the entire human genome and its downstream transcriptional and translational products. This symposium will review our current understanding of translational research in the setting of MCS with an emphasis on its clinical utility and translation.

2:00 PM  *What is Myocardial Recovery?*
Douglas L. Mann, MD, Washington University in St. Louis, St. Louis, MO, USA

2:20 PM  *Do Molecular Pathways Give Us Insight Into How We Can Promote Recovery?*
Nicolaas De Jonge, MD, PhD, University Medical Center Utrecht, Utrecht, Netherlands

2:40 PM  *Understanding the Metabolome in Heart Failure and the Unloaded Heart*
Brian D. Lowes, MD, PhD, University of Nebraska, Omaha, NE, USA

3:00 PM  *Stem Cells - Which Patients, Which Methods?*
Doris A. Taylor, PhD, Texas Heart Institute, Houston, TX, USA

3:20 PM  *Bridge to Recovery Clinical Trials: Challenges and Opportunities*
Emma J. Birks, MD, University of Louisville, Louisville, KY, USA

3:40 PM  *Panel Discussion*
2:00 PM – 4:00 PM

PRE-MEETING SYMPOSIUM 14

Treating All Stages of Severe Pulmonary Hypertension: Are We Getting It Right? (Grand Hall A)

**CHAIRS:** Steven Kawut, MD, MS and Eulalia Roig, MD, PhD (PH, HF, HTX, LF, LTX)

**SESSION SUMMARY:** This session will discuss the approved therapeutics and the new agents on the horizon for pulmonary arterial hypertension, focusing on treatment of advanced pulmonary hypertension. Despite the introduction of various oral and outpatient treatments, the approach to the severely ill patient with pulmonary hypertension is less well understood, constituting the practice gap and educational need.

2:00 PM

*Approved Therapies for Pulmonary Arterial Hypertension: Are We Using It to Its Best Potential?*

Anne Keogh, MBBS, MD, St. Vincent’s Hospital, Sydney, Australia

2:25 PM

**Q & A**

2:30 PM

*Targeting Inflammation, Kinases, and Metabolic Modulation for Pulmonary Arterial Hypertension*

Mark R. Nicolls, MD, Stanford University, Palo Alto, CA, USA

2:55 PM

**Q & A**

3:00 PM

*Pulmonary Hypertension in the ICU*

John T. Granton, MD, University Health Network, Toronto, ON, Canada

3:25 PM

**Q & A**

3:30 PM

*Percutaneous Support for Advanced Pulmonary Hypertension and Right Heart Failure: Atrial Septostomy and Percutaneous Systems*

Tomas Pulido, MD, Ignacio Chavez National Heart Institute, Mexico City, Mexico

3:55 PM

**Q & A**

2:00 PM – 4:00 PM

PRE-MEETING SYMPOSIUM 15

Bad Bugs? Optimize the Drugs! (Grand Hall B)

**CHAIRS:** Walter E Uber, PharmD and Fernanda Silveira, MD (ID, LF, LTX, HF, HTX, PHARM)

**SESSION SUMMARY:** A symposium combining brief illustrative case presentations followed by state-of-the-art lectures reviewing issues and controversies in antiviral, antibacterial, antifungal and antimycobacterial therapeutic drug monitoring. Although there is a small amount of published information on TDM andazole antifungal agents in heart lung transplantation, the antibacterial and antiviral drugs have been very neglected. Inappropriate dosing may lead to treatment failure, toxicity and the development of resistant organisms, both of which can be catastrophic in the transplant setting.

2:00 PM

*Antiviral Agents and Therapeutic Drug Monitoring (TDM)*

Erik A. Verschuuren, MD, PhD, University Medical Centre Groningen, Groningen, Netherlands
2:00 PM – 4:00 PM

PRE-MEETING SYMPOSIUM 16

Ex-Vivo Lung Perfusion (EVLP): Evolving Strategy For Improved Donor Lung Management (Grand Hall C)

CHAIRS: Kumud Dhital, MD, PhD, John Dunning, FRCS and Kenneth R McCurry, MD, FACS (DMD, LF, LTX)

SESSION SUMMARY: The last 5 years have witnessed an exponential rise in the use of ex-vivo lung perfusion (EVLP) for both basic scientific research and clinical practice. Various ex-vivo devices are now available for supporting donor lungs. This symposium aims to provide a timely update on the following aspects of EVLP: Expanding the donor organ pool; Cold Show with subsequent functional assessment versus primary physiological support; Limiting cold ischaemia; Sanguinous versus asanguinous perfusion; Repair and reconditioning of poor donor organs; Improving functional assessment of donor organs; Supporting lungs from DCD; and Clinical trials. The symposium also aims to meet the significant educational need of fully appreciating the principles and practice of EVLP. An additional benefit from this educational session is to stimulate wider evidence-based clinical adoption of this technology to expand the donor pool, improve donor organ function, and potentially extend graft and recipient survival.

2:00 PM  EVLP: From Concept to Current Practice
Stig Steen, MD, University Hospital, Lund, Sweden

2:15 PM  Q & A

2:20 PM  European Experience With Static EVLP
Goran Dellgren, MD, Sahlgrenska University Hospital, Gothenburg, Sweden

2:35 PM  Q & A

2:40 PM  EVLP: The North American Experience
Bartley Griffith, MD, University of Maryland, Baltimore, MD, USA

2:55 PM  Q & A

3:00 PM  Physiological Perfusion versus Cold Show: Update on the International INSPIRE Trial
Gregor Warnecke, MD, Hannover Medical School, Hannover, Germany
Frailty – How Do We Assess This Physiologic Variable And At What Point Does It Represent A Contraindication To Transplant? (Grand Hall D)

CHAIRS: Nancy P. Blumenthal, CRNP and Christiane Kugler, PhD

(MCS, HF, HTX, LF, LTX, NHSAH)

SESSION SUMMARY: Frailty has been defined as a low level of physiologic reserve and reduced ability to withstand stress to the body. One study estimated that twenty five percent of transplant patients met the criteria for frailty, a figure three times higher than in elderly adults who live at home. Other studies of abdominal transplant recipients classified as frail were nearly twice as likely to have early post-transplant complications, and this increased risk of a poor outcome occurred regardless of the age of the transplant recipient. This symposium will describe clinical assessment tools to identify patients at risk for frailty, will determine if frailty is an indicator of poor outcome in the thoracic transplant patient, and will identify interventions to improve outcomes of frail recipients.

2:00 PM Introductory Case Presentation
Ashwin K. Ravichandran, MD, Saint Vincent Medical Group, Indianapolis, IN, USA

2:05 PM What is Frailty, and How is it Measured?
Oliver Mauthner, RN PhD, University of Basel, Basel, Switzerland

2:20 PM What Factors are Important to Consider Surrounding Frailty Within the Pediatric Community?
Debra Lefkowitz, PsyD, Children’s Hospital of Philadelphia, Philadelphia, PA, USA

2:35 PM Does Transplant or MCS Improve Frailty?
Peter MacDonald, MD, St. Vincent’s Health Network, Sydney, Australia

2:50 PM Physical Therapy Assessment and Interventions Before and After Transplant/MCS
Louise M. Fuller, PT, Alfred Hospital, Melbourne, Australia

3:05 PM Nutritional Assessment and Interventions for Frail Candidates
David J. Lederer, MD, MS, Columbia University, New York, NY, USA

3:20 PM Supporting Caregivers After Transplant
Kevin C. Carney, MSN, CRNP, CCTC, Hospital of the University of Pennsylvania, Philadelphia, PA, USA

3:35 PM Panel Discussion
Developing a Pediatric VAD Program (Harbor GHI)

**CHAIRS:** Elizabeth Blume, MD and Robert Weintraub, FRACP, FACC

**(Peds, MCS, HF, HTX)**

**SESSION SUMMARY:** Objectives: 1) To understand and review what is required to develop a VAD program at a pediatric center. 2) To review the outcomes of children discharged home on implantable VAD support, 3) To understand important pediatric-specific medical and social obstacles impacting home VAD, and 4) To discuss the future of VAD support for children.

2:00 PM **One Size Doesn’t Fit All**
Peter D. Wearden, MD, PhD, University of Pittsburgh, Pittsburgh, PA, USA

2:20 PM **Now We Send Them Home? VAD Education Requirements Prior to Discharge**
Holger Buchholz, MD, Stollery Children’s Hospital, Edmonton, AB, Canada

2:40 PM **Managing the Device at Home: Unique Issues to Children and Adolescences**
Jennifer Conway, MD, Stollery Children’s Hospital, Edmonton, AB, Canada

3:00 PM **Pushing the Limits on VAD Support: Ethical and Social Issues Encountered in Children and Adolescents with Left Ventricular Assist Devices**
Aileen Lin, NP, Lucile Packard Children’s Hospital, Palo Alto, CA, USA

3:20 PM **Case Presentation: Unique Uses of Devices in Pediatric Centers**
Martin Schweiger, MD, University Children’s Hospital, Zurich, Switzerland

3:40 PM **Panel Discussion**

4:00 PM – 4:15 PM
COFFEE BREAK (Palm and Grand Foyers)

VIEW POSTERS (Harbor and Seaport Foyers)
**The Times They Are a-Changing (Seaport)**

**CHAIRS:** Cumara Sivathasan, MBBS, FRCS and Craig H Selzman, MD (MCS, HF, HTX)

**SESSION SUMMARY:** This session offers education focused on new applications of current available devices and a review of current and upcoming trends in mechanical circulatory support interventions.

- **4:15 PM**  
  **Minimally Invasive Approaches and Alternative Novel Strategies for LVAD Implantation – Are We There Yet?**  
  Simon Maltais, MD, PhD, Vanderbilt University Medical Center, Nashville, TN, USA

- **4:30 PM**  
  **Q & A**

- **4:35 PM**  
  **High-Risk Conventional Interventions vs LVAD Implantation – Trend Toward a Paradigm Shift**  
  Arnt E. Fiane, MD, Rikshospitalet, Oslo, Norway

- **4:50 PM**  
  **Q & A**

- **4:55 PM**  
  **Smaller, Easier, Better? What to Expect in the Next LVAD Decade**  
  Mark S. Slaughter, MD, University of Louisville, Louisville, KY, USA

- **5:05 PM**  
  **Q & A**

- **5:15 PM**  
  **Is Mitral Intervention Warranted for Patients Undergoing LVAD Implant**  
  Robert M. Adamson, MD, Sharp Memorial Hospital, San Diego, CA, USA

- **5:30 PM**  
  **Q & A**

- **5:35 PM**  
  **Debate: PRO: Total Implantability Is Near**  
  George M. Wiesellhaler, MD, University of California at San Francisco, San Francisco, CA, USA

- **5:50 PM**  
  **Debate: CON: Total Implantability Is Near**  
  Pramod Bonde, MD, Yale University School of Medicine, New Haven, CT, USA

- **6:05 PM**  
  **Debate PRO Rebuttal**  
  George M. Wiesellhaler, MD, PhD, University of California at San Francisco, San Francisco, CA, USA

- **6:10 PM**  
  **Debate CON Rebuttal**  
  Pramod Bonde, MD, Yale University School of Medicine, New Haven, CT, USA
Pulmonary Hypertension in Left Heart Disease (WHO Group 2 PH): ISHLT and World Symposium on Pulmonary Hypertension (WSPH) Consensus Initiative (Grand Hall A)

CHAIRS: Teresa De Marco, MD, FACC, Jean-Luc E Vachiery, MD and Howard J. Eisen, MD

SESSION SUMMARY: The definition and nomenclature of pulmonary hypertension (PH) related to left heart disease (LHD) (WHO Group 2 PH) are inconsistent and confusing. As a result, many patients with WHO Group 2 PH are misclassified as having pulmonary arterial hypertension (aka primary pulmonary hypertension) and are mistreated with therapies that are potentially deleterious. Over the past several years, the PH Council of ISHLT has had a keen interest in developing standardized definitions and nomenclature to describe pulmonary hypertension due to LHD, with the aim to create a framework for future study design. A summary statement was published last year on the subject (Fang JC et al. J Heart Lung Transplant 2012;31:913-33). PH and right heart failure is a common theme of importance to the ISHLT and World Pulmonary Hypertension group, and a collaborative consensus initiative has been proposed and discussed at the 5th World Symposium on Pulmonary Hypertension (WSPH) in Nice, France. This session will present the definitions and nomenclature proposed in the ISHLT consensus document and discussed at the 5th WSPH, identify key gaps in knowledge, and discuss research initiatives in the context of heart failure/transplantation and mechanical circulatory support.

4:15 PM – 6:15 PM

4:15 PM Overview of the World Symposium Pulmonary Hypertension in LH Disease
Nazzareno Galie, MD, University of Bologna, Bologna, Italy

4:35 PM Q & A

4:40 PM Pulmonary Hypertension in Left Heart Disease – A Case for Diastolic Pulmonary Gradient in the Definition of Pulmonary Hypertension Related to Left Heart Disease
Myung H. Park, MD, University of Maryland School of Medicine, Baltimore, MD, USA

5:00 PM Q & A

5:05 PM PH in Left Heart Disease: What is the Most Important Hemodynamic Variable for Patients with Advanced Heart Failure Being Considered for Transplantation or Ventricular Assist Devices?
James Fang, MD, University of Utah, Salt Lake City, UT, USA

5:25 PM Q & A

5:30 PM Research Initiatives and Therapeutic Recommendations for WHO Group 2 PH
Robert P. Frantz, MD, Mayo Clinic, Rochester, MN, USA

5:50 PM Q & A

5:55 PM Panel Discussion
The Sexiest Controversies in End Stage Heart Failure and Transplantation (Grand Hall B)

CHAIRS: David S. Feldman, MD, PhD and Michal W Zakliczynski, MD (HF, HTX, MCS, PHARM, BSTR)

SESSION SUMMARY: The goal of this Symposium is to discuss important and controversial issues in Heart Failure and Transplantation in a way that will keep people awake, alert, attentive and perhaps amused.

4:15 PM Stem Cells: A Translational Science Primer
Doris Taylor, PhD, FAHA, FACC, Texas Heart Institute, Houston, TX, USA

4:25 PM Debate: PRO: Stem Cells are the Future of Advanced Heart Failure Therapy and Always Will Be
Sharon A. Hunt, MD, Stanford University, Stanford, CA, USA

4:35 PM Debate: CON: Stem Cells are the Future of Advanced Heart Failure Therapy and Always Will Be
Sonja Schrepfer, MD, PhD, Stanford University, Stanford, CA, USA

4:45 PM mTORi are an Advancement Beyond Current Therapy
Arne Andreassen, MD, Oslo University Hospital, Oslo, Norway

4:55 PM Debate: PRO: All of Our Patients Should Be on mTORi Subsequent to Transplant
Howard J. Eisen, MD, Drexel University College of Medicine, Philadelphia, PA, USA

5:05 PM Debate: CON: All of Our Patients Should Be on mTORi Subsequent to Transplant
Mandeep R. Mehra, MD, FACC, FACP, Brigham and Women’s Hospital, Boston, MA, USA

5:15 PM Basic Physiology and Biomechanics of ECMO
Pascal N. Leprince, MD, PhD, La Pitie Salpetriere, Paris, France

5:25 PM Debate: PRO: Patients Supported by ECMO Should Never Get Transplanted
Mariell Jessup, MD, University of Pennsylvania, Philadelphia, PA, USA

5:35 PM Debate: CON: Patients Supported by ECMO Should Never Get Transplanted
Goran Dellgren, MD, Sahlgrenska University Hospital, Gothenburg, Sweden

5:45 PM Debate: PRO: MCS Will Kill Transplant
Lars H. Lund, MD, PhD, Karolinska Institute, Stockholm, Sweden

5:55 PM Debate: CON: MCS Will Kill Transplant
Donna M. Mancini, MD, Columbia University, New York, NY, USA

6:05 PM Q & A
4:15 PM – 6:15 PM
PRE-MEETING SYMPOSIUM 22

Global Perspectives on Donation after Circulatory Determination of Death in Lung Transplantation
(Grand Hall C)

CHAIRS: Christopher H. Wigfield, MD, FRCS and Dirk EM Van Raemdonck, MD, PhD

(DMD, LF, LTX)

SESSION SUMMARY: It remains true that most donor lungs offered for transplant are discarded with substantial patient numbers dying on the waiting list. DCD has become widely accepted now in lung transplantation with increased experience. EVLP as a new method of treating and evaluating marginal lungs is being used effectively as well and will be more widely adopted. However, the increased complexity and cost of EVLP is one reality that may limit clinical adoption. What is the best way forward to join these practices and employ EVLP most effectively to quickly impact lungs transplanted? Are these technologies additive, competing, should they be combined international perspective? This symposium will explore these issues.

4:15 PM **DCD Lungs: The Australian Experience**
Bronwyn J. Levey, RN, Grad Dip Clin Ep, Alfred Hospital, Melbourne, Australia

4:27 PM **Q & A**

4:32 PM **DCD Lungs: The Spanish Experience**
Francisco Javier Moradiellos, MD, Puerta de Hierro University Hospital, Madrid, Spain

4:44 PM **Q & A**

4:49 PM **DCD Lungs: The European Experience**
John Dark, MBBS, FRCS, Freeman Hospital, Newcastle upon Tyne, United Kingdom

5:01 PM **Q & A**

5:06 PM **DCD Lungs: The Canadian Experience**
Marcelo Cypel, MD, PhD, Toronto General Hospital, Toronto, ON, Canada

5:18 PM **Q & A**

5:23 PM **DCD Lungs: The U.S. Experience**
David Mason, MD, The Cleveland Clinic, Cleveland, OH, USA

5:35 PM **Q & A**

5:40 PM **Debate: PRO: We Need EVLP To Do DCD**
Robert B. Love, MD, FACS, FRCS, Medical College of Wisconsin, Milwaukee, WI, USA

5:52 PM **Debate: CON: We Need EVLP To Do DCD**
Gregory I. Snell, FRACP, MBBS, MD, Alfred Hospital, Melbourne, Australia

6:05 PM **Debate PRO Rebuttal**
Robert Love, MD, Medical College of Wisconsin, Milwaukee, WI, USA

6:10 PM **Debate CON Rebuttal**
Gregory I. Snell, FRACP, MBBS, MD, Alfred Hospital, Melbourne, Australia
4:15 PM – 6:15 PM

**PRE-MEETING SYMPOSIUM 23**

State of the Art Update on Infectious Disease Issues in Pediatric Thoracic Transplantation (Grand Hall D)

**CHAIRS:** Tajinder P Singh, MD, MSc and Antonio Moreno-Galdó, MD, PhD (ID, PEDS, LF, LTX, PHARM)

**SESSION SUMMARY:** The infectious disease sessions at ISHLT traditionally have focused on adults rather than children. Some of the pediatric responses to infections are quite disparate from those of adults. This session will provide a state of the art update based on the latest data in pediatrics.

**4:15 PM**  
**Anticipatory Guidance to Reduce Infection Risk After Pediatric Thoracic Transplantation**  
Michele Estabrook, MD, St. Louis Children’s Hospital, St. Louis, MO, USA

**4:35 PM**  
**Donor to Recipient Infectious Disease Transmission**  
Sandra Burchett, MD, MSc, Boston Children’s Hospital/Harvard Medical School, Boston, MA, USA

**4:55 PM**  
**Vaccination in Pediatric Thoracic Transplantation: Facts and Controversies**  
Marian G. Michaels, MD, MPH, Children’s Hospital of Pittsburgh of UPMC, Pittsburgh, PA, USA

**5:15 PM**  
**Popular Viruses in Thoracic Transplant: EBV and CMV**  
Upton D. Allen, MD, Hospital for Sick Children, Toronto, ON, Canada

**5:35 PM**  
**Infectious Considerations in Pediatric Lung Transplantation**  
Amparo Sole, MD, PhD, Hospital Universitario la Fe, Valencia, Spain

**5:55 PM**  
**Panel Discussion**
PRE-MEETING SYMPOSIUM 24

Lung Transplant Immunology 201-Plus: Recent Advances (Harbor GHI)

CHAIRS: John A Belperio, MD and Daniel C Chambers, MBBS, MRCP, FRACP, MD (BSTR, LF, LTX)

SESSION SUMMARY: This session will be an update on recent basic immunology discoveries in the field of lung transplantation. This is a more advanced level than the Transplant Immunology 101 session and is directed to a basic science audience.

4:15 PM  
**T cell Phenotypes in Transplantation: The Known and The New**
Rebecca A. Shilling, MD, University of Illinois at Chicago, Chicago, IL, USA

4:30 PM  
**Q & A**

4:35 PM  
**Innate Immunity, Rejection, and the Breakdown of Tolerance**
Scott M. Palmer, MD, MHS, Duke University, Durham, NC, USA

4:50 PM  
**Q & A**

4:55 PM  
**Role of the Macrophage in Lung Allograft Dysfunction**
Andrew J. Fisher, FRCP PhD, Freeman Hospital, Newcastle upon Tyne, United Kingdom

5:10 PM  
**Q & A**

5:15 PM  
**Allo-Antibodies and Lung Transplant**
Glen P. Westall, FRACP, PhD, Alfred Hospital, Melbourne, Australia

5:30 PM  
**Q & A**

5:35 PM  
**Autoimmunity and Auto-Antibodies**
Stijn E. Verleden, PhD, KU Leuven, Leuven, Belgium

5:50 PM  
**Q & A**

5:55 PM  
**Update on Stem Cells in Transplant: The Good and Bad**
Sonja Schrepfer, MD, PhD, Stanford University, Stanford, CA, USA

6:10 PM  
**Q & A**

6:15 PM – 7:15 PM 
EXHIBIT HALL OPENING RECEPTION (Harbor A-F)

6:15 PM – 7:15 PM 
MODERATED POSTER SESSION 1 (Harbor and Seaport Foyers) (ALL)

6:45 PM – 7:45 PM 
CLAD GUIDELINES WORKFORCE MEETING (Gaslamp D)

7:15 PM – 8:30 PM 
IMACS REGISTRY MEETING (Gaslamp C)
FRIDAY, APRIL 11, 2014

7:00 AM – 6:30 PM
REGISTRATION DESK OPEN (Palm Foyer)
SPEAKER READY ROOM OPEN (Balboa ABC)

7:00 AM – 8:00 AM
JHLT EDITORIAL BOARD BREAKFAST MEETING (Gaslamp A-C)

7:00 AM – 8:00 AM
SUNRISE SYMPOSIUM 1

Building for the Future (Grand Hall A)

CHAIRS: Juan C. Mejia, MD and James Long, MD, PhD
(MCS, HF, HTX)

SESSION SUMMARY: This session addresses the key issues involved as the MCS field expands. Firstly how to build a VAD program for new and evolving centers, secondly whether and how shared care should be performed for the large number of ongoing patients together with whether it works for the center and its partner, and thirdly the controversial and important topic of whether or not centers should be allowed to perform DT alone without having heart transplantation.

7:00 AM Building a VAD Program
Stephan Schueler, MD, PhD, FRCS, Freeman Hospital, Newcastle upon Tyne, United Kingdom

7:15 AM Shared Care: a Good Idea or Not?
Todd F. Dardas, MD, University of Washington, Seattle, WA, USA

7:30 AM Should Centers Perform DT Alone?
Michael G. Dickinson, MD, Spectrum Health, Grand Rapids, MI, USA

7:45 AM Panel Discussion

7:00 AM – 8:00 AM
SUNRISE SYMPOSIUM 2

Under Too Much Pressure: Challenging Cases in Pulmonary Hypertension Management (Grand Hall B)

CHAIRS: Adaani Frost, MD and Vincent G. Valentine, MD
(PH, HF, HTX, LF, LTX)

SESSION SUMMARY: This is meant to be a multidisciplinary symposium (cardiology, pulmonary, PH) discussing management of challenging patients who have complicating pulmonary hypertension. Three cases will be presented by junior faculty members. The case presentations will include challenges to the discussants (in an open forum) regarding next steps in evaluation, management, etc of pulmonary hypertension. The objectives of the symposium are 1) Evaluation and management of challenging cases in PH, 2) Discussion of controversial techniques in PH evaluation, 3) Pre- and post-transplant evaluation of patients with PH, and 4) Post-transplant pharmaceutical management of cardiac transplant patients with preexisting PH.
7:00 AM  |  Case #1 – The Fight to Keep the RV Working Despite High Pressures
Amit Banga, MD, Cleveland Clinic, Cleveland, OH, USA

7:10 AM  |  Expert Discussant
Adaani Frost, MD, Baylor College of Medicine, Houston, TX, USA

7:15 AM  |  Case #2 – Go the Extra Mile: When Resting PA Pressures do not Tell the Whole Story
Kerri Akaya Smith, MD, University of Pennsylvania, Philadelphia, PA, USA

7:25 AM  |  Expert Discussant
Raymond L. Benza, MD, Allegheny General Hospital, Pittsburgh, PA, USA

7:30 AM  |  Case #3 – Challenges for Optimization of the Liver Transplant Candidates with PH
Mitesh V. Thakrar, MD, University of Calgary, Calgary, AB, Canada

7:40 AM  |  Expert Discussant
Dana P. McGlothlin, MD, Kaiser San Francisco Medical Center, San Francisco, CA, USA

7:45 AM  |  Panel Discussion

7:00 AM – 8:00 AM
SUNRISE SYMPOSIUM 3
Endothelial Dysfunction in Advanced Heart Failure, Mechanical Circulatory Support, and Transplant: It’s a Pipe and Pump Issue (Grand Hall C)
CHAIRS: David M. Kaye, MD, PhD and Sameh Hozayen, MD, MS (HF, HTX, MCS, BSTR)
SESSION SUMMARY: Endothelial function is increasingly recognized as a general barometer of health. There is extensive data that endothelial function is impaired in patients with heart failure, and it may be a marker of development of allograft vasculopathy in transplanted patients. A better understanding of the pathophysiology of endothelial dysfunction in heart failure, VAD and transplanted patients, the methods of endothelial dysfunction assessment, and its relation to outcome following VAD and transplant is crucial for specialists caring for patients undergoing advanced heart failure management. It is also critical for scientists working in the field of vascular physiology and outcomes research to understand the interaction between the different modalities and endothelial function in order to further enhance research in this arena. The first discussions of this symposium will provide a general overview of the pathophysiology of endothelial dysfunction. The subsequent talks will provide in depth analyses of the development, treatment, and morbidity of endothelial dysfunction development, treatment, and morbidity in patients with heart failure, transplant, and MCS.

7:00 AM  |  Why Cells Become Ornery: Pathophysiology of Endothelial Dysfunction
David M. Kaye, MD, PhD, The Alfred Hospital, Melbourne, Australia

7:15 AM  |  Endothelial Dysfunction, Morbidity, and Mortality in Patients with Heart Failure
W. H. Wilson Tang, MD, Cleveland Clinic Foundation, Cleveland, OH, USA

7:30 AM  |  Endothelial Dysfunction in Heart Transplantation. Is It a Mediator of Adverse Outcomes?
Karl B. Lernstrom, MD, PhD, Helsinki University, Helsinki, Finland
SCIENTIFIC PROGRAM

7:45 AM  Deleterious Effect of Changing Nature: Response of the Endothelium to Continuous Flow LVAD Support
Peter M. Eckman, MD, University of Minnesota, Minneapolis, MN, USA

7:00 AM – 8:00 AM

SUNRISE SYMPOSIUM 4

Controversies in Lung Transplantation (Grand Hall D)

CHAIRS: Marie Budev, DO, MPH and John Dark, MB, FRCS

(LF, LTX)

SESSION SUMMARY: This symposium will address some controversial areas in lung transplantation in the form of Pro and Con debates. This is a very popular format and stimulates great discussions.

7:00 AM  Debate: PRO: Single Lung Transplantation Should Be the Preferred Procedure for COPD and ILD
Gabriel Thabut, MD, Hopital Bichat, Paris, France

7:08 AM  Debate: CON: Single Lung Transplantation Should Be the Preferred Procedure for COPD and ILD
Jens Gottlieb, MD, Hannover Medical School, Hannover, Germany

7:16 AM  Debate: PRO: Scleroderma Should Be a Contraindication to Lung Transplantation
Oksana Shlobin, MD, Inova Fairfax Hospital, Falls Church, VA, USA

7:24 AM  Debate: CON: Scleroderma Should Be a Contraindication to Lung Transplantation
Jonathan P. Singer, MD MS, University of California at San Francisco, San Francisco, CA, USA

7:32 AM  Debate: PRO: Donor Lungs Should Be Sized to Fit the Highest Priority Recipient
Tobias Deuse, MD, University Heart Center, Hamburg, Germany

7:40 AM  Debate: CON: Donor Lungs Should Be Sized to Fit the Highest Priority Recipient
Michael Eberlein, MD PhD, University of Iowa Hospitals and Clinics, Iowa City, IA, USA

7:48 AM  Panel Discussion
What You Always Wanted To Know About LISH (Laboratory Tests, Infectious Agents, Special Situations, Hidden Infections) But Were Afraid To Ask (Seaport H)

CHAIRS: Christopher R Ensor, PharmD, BCPS-CV and Amparo Sole, MD, PhD (ID, PHARM, LF, LTX, HF, HTX)

SESSION SUMMARY: In the field of infectious diseases there are many accepted standards for treatment and diagnoses. However we do not always know the real explanation for them nor do we question them. This symposium will attempt to clarify several main topics in ID from laboratory to therapy.

7:00 AM How to Diagnose Infections in Cardiothoracic Transplants (CT)?
Kate Gould, FRCPath, Freeman Hospital, Newcastle upon Tyne, United Kingdom

7:12 AM Q & A

7:15 AM What are We Interested in Diagnosing?
Me-Linh Luong, MD, University of Montreal St-Luc Hospital, Montreal, QC, Canada

7:27 AM Q & A

7:30 AM How to Treat Special Situations
Patricia Munoz, MD, PhD, Hospital General Universitario Gregorio Maranon, Madrid, Spain

7:42 AM Q & A

7:45 AM New Routes for Antibiotic Therapy
Kyle L. Dawson, PharmD, The Methodist Hospital, Houston, TX, USA

7:57 AM Q & A

8:00 AM – 6:00 PM
PRESS OFFICE OPEN (Show Office 7)
8:00 AM to 10:00 AM

OPENING PLENARY SESSION

(Seaport)

CHAIRS: Jason D. Christie, MD and Allan R. Glanville, MBBS, MD, FRACP

(ALL)

8:00 AM Welcome/Program Chair Report
Jason D. Christie, MD, University of Pennsylvania, Philadelphia, PA, USA

8:05 AM President's Report/Distinguished Educator Award Presentation
Allan R. Glanville, MBBS, MD, FRACP, St. Vincent's Hospital, Sydney, NSW, Australia

8:15 AM Thoracic Registry Report
Josef Stehlik, MD, MPH, University of Utah, Salt Lake City, UT, USA

8:30 AM MCSD Registry Reports
James K. Kirklin, MD, University of Alabama at Birmingham, Birmingham, AL, USA

1Department of Thoracic and Cardiovascular Surgery, University Medical Center, Tuebingen, Germany, 2Department of Thoracic Medicine, St Vincent’s Hospital, Sydney, Australia, 3Department of Cardiovascular Surgery, University Heart Center, Hamburg, Germany, 4Cardiovascular Medicine, Cleveland Clinic, Cleveland, OH, 5Division of Cardiology and Department of Medicine, GZO-Zurich Regional Health Centre, Wetzikon, Switzerland, 6Division of Cardiology, University Heart Center, Zurich, Switzerland.

8:55 AM INVITED LECTURE: How Digitizing Humans Changes the Future of Medicine
Eric J. Topol, M.D., Scripps Translational Science Institute, La Jolla, CA, USA

9:15 AM (2) FEATURED ABSTRACT: Concomitant Aortic Valve Procedures in Patients Undergoing Implantation of Continuous-Flow LVADs: An INTERMACS Database Analysis;
J. O. Robertson1, S. L. Meyers2, J. K. Kirklin3, G. D. Mertz4, S. Prasad5, A. Itchi6, S. C. Silvestry1. 1Division of Cardiothoracic Surgery, Washington University, St. Louis, MO, 2University of Alabama at Birmingham, Birmingham, AL.

The abstract presenter is the recipient of the 2014 Branišlav Radovancević Memorial Best MCS Abstract Award. This award is supported by a grant from Thoratec.

9:30 AM Lifetime Achievement Award Recipient Lecture: “Follow Your Star”
Sir Terence English, KBE, FRCS, Past President ISHLT, Oxford, United Kingdom
10:00 AM – 10:30 AM
COFFEE BREAK/VISIT EXHIBITS (Harbor A-F)
VIEW POSTERS (Harbor and Seaport Foyers)

10:00 AM – 4:00 PM
EXHIBIT HALL OPEN (Harbor)

10:00 AM – 6:30 PM
POSTERS OPEN (Harbor and Seaport Foyer)

10:30 AM – 12:00 PM

**CONCURRENT SESSION 1**

**How to Attack Mechanical Circulatory Support Complications (Seaport)**

**CHAIRS:** Michel Morshuis, MD and Ulrich P. Jorde, MD (MCS)

**10:30 AM (3) Over 400% Increase in LVAD Thrombosis Reported to the FDA’s Manufacturer and User Facility Device Experience (MAUDE) Database from 2010 to 2012:**

J. X. Wang¹, E. H. Lee¹, P. Bonde², ¹Bonde Artificial Heart Lab, Yale University School of Medicine, New Haven, CT, ²Cardiovascular Surgery, Yale University School of Medicine, New Haven, CT.

**10:45 AM (4) Impact of Device Design and Patient Management on the Incidence of Neurologic Events after HVAD Left Ventricular Assist Device:**

J. J. Teuteberg¹, M. S. Slaughter², J. Rogers³, E. McGee⁴, F. D. Pagani⁵, J. E. Rame⁶, M. Acker⁷, R. Kormos⁸, C. T. Salerno⁹, T. P. Schleeter¹⁰, D. J. Goldstein¹⁰, J. Shin¹⁰, R. C. Starling¹¹, T. Wozniak¹², A. S. Malik¹², S. C. Silvestry¹², G. Ewald¹³, E. J. Birks¹⁴, K. B. Najarian¹⁵, D. R. Hathaway¹⁵, K. D. Aaronson¹⁵, ¹Cardiology, UPMC, Heart and Vascular Institute, Pittsburgh, PA, ²University of Louisville, Louisville, KY, ³Duke University, Durham, NC, ⁴Northwestern University, Chicago, IL, ⁵University of Michigan, Ann Arbor, MI, ⁶University of Pennsylvania, Philadelphia, PA, ⁷University of Pennsylvania, Pittsburgh, PA, ⁸St. Vincent Heart Center of Indiana, Indianapolis, IN, ⁹Montefiore Medical Center, Bronx, NY, ¹⁰Cleveland Clinic, Cleveland, OH, ¹¹IU Health Methodist Hospital, Indianapolis, IN, ¹²Barnes Jewish Hospital Washington University, St. Louis, MO, ¹³HeartWare Inc, Framingham, MA.

**11:00 AM (5) Can Persistent Bleeding in HeartMate II Patients Be Safely Managed with Reduced Anti-thrombotic Regimens? Preliminary Results from the US-TRACE Study:**

J. N. Katz¹, R. Adamson², R. John³, A. Tatooles³, K. Sundareswaran³, F. Kallel³, D. J. Farrar³, U. Jorde³, ¹University of North Carolina, Chapel Hill, NC, ²Sharp Memorial Hospital, San Diego, CA, ³University of Minnesota, Minneapolis, MN, ⁴Advocate Christ Medical Center, Oaklawn, IL, ⁵Thoratec Corporation, Pleasanton, CA, ⁶Columbia University, New York, NY.
11:15 AM (6) Minimal Adverse Events in HeartMate II Patients with No Antiplatelet Therapy: Preliminary Results from the European TRACE Study; I. Netuka1, P. Y. Litzler2, M. Berchtold-Herz3, E. Flecher4, D. Zimpfer5, L. Damme6, K. S. Sundareswaran7, D. J. Farrar7, J. D. Schmitto8. 1Department of Cardiac Surgery, Institute for Clinical and Experimental Medicine, Prague, Czech Republic, 2Department of Thoracic and Cardiovascular Surgery, Rouen University Hospital Charles Nicolle, Rouen, France, 3Department of Thoracic and Cardiovascular Surgery, Heart Center, University of Freiburg, Freiburg, Germany, 4Department of Thoracic and Cardiovascular Surgery, CHU Pontchaillou, Rennes, France, 5Department of Cardiac, Thoracic, Transplantation and Vascular Surgery, Hannover Medical School, Hannover, Germany.

11:30 AM (7) Reduction in Driveline Infection Rates: Results from the HeartMate II Multicenter Silicone-Skin-Interface (SSI) Registry; D. Dean1, G. A. Ewald2, A. Tatooles3, B. C. Sheridan4, R. J. Brewer5, C. Caldeira6, F. Kallel7, D. J. Farrar7, S. A. Akhter8. 1Piedmont Healthcare, Atlanta, GA, 2Washington University School of Medicine, St Louis, MO, 3Advocate Christ Medical Center, Oaklawn, IL, 4University of North Carolina, Chapel Hill, NC, 5Henry Ford Hospital, Detroit, MI, 6Tampa General Hospital, Tampa, FL, 7Thoratec Corporation, Pleasanton, CA, 8University of Chicago, Chicago, IL.

11:45 AM (8) Right Ventricular Dysfunction Is Associated with Gastrointestinal Bleeding in Patients Supported with Continuous-Flow LVADs; C. T. Sparrow, M. E. Nassif, D. S. Raymer, E. Novak, S. J. LaRue, J. D. Schilling. Washington University School of Medicine, St. Louis, MO.
10:30 AM – 12:00 PM

CONCURRENT SESSION 2

Mechanical Circulatory Support: Engineering and Biomechanics (Grand Hall A)

CHAIRS: Francesco Moscato, PhD and Daniel J. Goldstein, MD (MCS)

10:30 AM (9) Continuous Left Atrial Pressure Monitoring Improves Outcomes in Heartmate II Patients; I. Gosev, R. C. Neely, M. Leacche, S. McGurk, Q. Javed, L. Cohn, G. S. Couper, Cardiac Surgery, Brigham and Women's Hospital, Jamaica Plain, MA.


11:00 AM (11) First Implantation in Human of a Wireless Miniaturized Intracardiac Pressure Sensor in a Patient with a HeartMate II; L. Hubbert, J. Baranowski, B. Delshad, H. Ahn. The Heart Center at the University Hospital, Division of Cardiovascular Medicine, Department of Medicine and Health, Faculty of Health Sciences, Linköping University, Linköping, Sweden.

11:15 AM (12) Increasing Pump Speed During Exercise Improves Peak Oxygen Consumption in Heart Failure Patients Supported With Continuous-Flow Left Ventricular Assist Devices – A Double-Blind Randomized Study; M. H. Jung1, P. B. Hansen1, K. Sander1, P. S. Olsen1, K. Rossing1, S. D. Russell2, S. Boesgaard3, F. Gustafsson1. 1The Heart Center, University Hospital Rigshospitalet, Copenhagen, Denmark, 2Department of Cardiology, Johns Hopkins University Hospital, Baltimore, MD.


11:45 AM (14) Pressure-Volume Relations in Patients Supported With Continuous-Flow Left Ventricular Assist Devices: A Comparative Descriptive Study of Invasive Hemodynamics Versus Echocardiography; M. H. Jung1, C. Hassager1, S. D. Russell1, L. Balling1, K. Rossing1, S. Boesgaard1, F. Gustafsson1. 1Department of Cardiology, The Heart Center, University Hospital Rigshospitalet, Copenhagen, Denmark, 2Department of Cardiology, Johns Hopkins University Hospital, Baltimore, MD.
10:30 AM – 12:00 PM

CONCURRENT SESSION 3

The Tempest (Controlling the Immune System in Heart Transplantation) (Grand Hall B)

CHAIRS: Tuvia Ben Gal, MD and Malgorzata Sobieszczanska-Malek, MD (HF, HTX, BSTR)

10:30 AM (15) Increased Plasma Levels of Graft-Derived Cell-Free DNA Correlate with Rejection in Heart Transplant Recipients;
J. Kobashigawa1, M. Grskovic2, R. Dedrick2, K. Gundel2, R. Woodward2, J. Vanhaecke3, M. Crespo-Leiro4, J. Stypmann5, M. C. Deng6, R. Starling6. 1Cedars-Sinai Heart Institute, Los Angeles, CA, 2XDx, Brisbane, CA, 3Cardiovascular Diseases, University Hospitals Leuven, & Department of Cardiovascular Sciences, KU Leuven, Belgium, 4Unidad de Insuficiencia Cardiaca Avanzada y Transplante Cardiaco, Hospital Universitario A Coruña, La Coruña, Spain, 5Department of Cardiovascular Medicine, Division of Cardiology, University Hospital Münster, Münster, Germany, 6Department of Medicine-Division of Cardiology, UCLA Medical Center, Los Angeles, CA, 7Department of Cardiovascular Medicine, Cleveland Clinic, Cleveland, OH.

10:45 AM (16) A Randomized Trial of Everolimus Initiation and Calcineurin Inhibitor (CNI) Elimination in Stable Heart Transplant Recipients With Impaired Renal Function;
J. Vanhaecke1, D. Derthoo1, O. Van Caenegem2, M. De Pauw3, E. Nellessen4, N. Duerinckx1, A. Ciarka1, W. Droog2, J. Van Cleemput1, A. Belmans1, B. Meyns1. 1Department of Cardiology, University Hospital Gasthuisberg, Leuven, Belgium, 2Department of Cardiology, CHU St.-Luc, Brussels, Belgium, 3Department of Cardiology, Ghent University Hospital, Ghent, Belgium, 4Department of Cardiology, CHU Sart Tilman, Liège, Belgium.

11:00 AM (17) De-Novo Low TAC/Low SIR Immunosuppression after HTx – 10 Year Results of a Prospective Trial;
K. Stroeh1, S. Guethoff1, C. Grinninger1, B. Meiser2, I. Kaczmarek1. 1Cardiothoracic Surgery, University of Munich, Germany, Munich, Germany, 2Transplantationszentrum, University of Munich, Germany, Munich, Germany.

11:15 AM (18) Does the Calcineurin Inhibitor Have Influence on Cytomegalovirus Infection in Heart Transplantation?;
I. Sanchez-Lazaro1, M. Rodriguez-Serrano1, L. Almenar-Bonet1, L. Martinez Dolz2, R. Lopez-Vilella1, M. Portoles-Sanz2, M. Rivero-Otero2, A. Salvador-Sanz2. 1Cardiology Department, Heart Failure and Transplantation Unit, Hospital Universitari i Politècnic La Fe, Valencia, Spain, 2Research Center, Hospital Universitari i Politècnic La Fe, Valencia, Spain.

11:30 AM (19) Gender and Race Association with Tacrolimus (CYP3A5) and Simvastatin (SLOCO1B1) Polymorphisms in an Adult Heart Transplant Population;
N. A. Haglund1, J. Gray, K. Birdwell, I. Feurer, M. Keebler, S. Maltais, M. Wigger. Vanderbilt University Medical Center, Nashville, TN.

11:45 AM (20) Proliferation Signal Inhibitors for Cardiac Allograft Vasculopathy in Heart Transplant Recipients: A Systematic Review and Meta-Analysis of Randomized Clinical Trials;
D. Greig1, C. Alba2, F. Foroutan1, D. S. Lee3, H. J. Ross2. 1Cardiovascular Diseases, P. Universidad Catolica de Chile, Santiago, Chile, 2University Health Network, Toronto, ON, Canada, 3University of Toronto, Toronto, ON, Canada.
10:30 AM – 12:00 PM

CONCURRENT SESSION 4

Ex-Vivo Lung Perfusion: Where Are We Going?

(Grand Hall C)

CHAIRS: Michael J. Weyant, MD and Marcelo Cypel, MD, PhD
(DMD, LTX, BSTR)

10:30 AM (21) Comparison Between Cellular and Acellular Perfu- sates Used During Ex-Vivo Lung Perfusion in a Porcine Model:
M. Roman, J. Parmar, S. Nair, S. Colah, J. Dunning, S. Tsui. Cardio-
thetic Transplantation, Papworth Hospital NHS Foundation Trust, Papworth Everard, United Kingdom.

10:45 AM (22) Circulating Adhesion Molecule in Ex-Vivo Lung Perfusion Predicts Primary Graft Dysfunction:

11:00 AM (23) Endothelial Glycocalyx Integrity Is Critical To Organ Function During Human Ex-Vivo Lung Perfusion:
D. C. Chambers1, W. Hunt2, I. J. Smith2, L. Samson1, T. M. Sladden1, S. Yerkovich1, R. Naido1, D. Walt1, P. M. Hopkins1. 1Queensland Lung Transplant Service, The Prince Charles Hospital, Brisbane, Australia, 2Department of Anaesthesia, The Prince Charles Hospital, Brisbane, Australia, 3School of Medicine, The University of Queensland, Brisbane, Australia, 4Department of Cardiothoracic Surgery, The Prince Charles Hospital, Brisbane, Australia.

11:15 AM (24) Preliminary Results of a Phase II Trial Comparing Outcomes of Patients Transplanted with Lungs from Uncontrolled Donation After Cardiac Death Donors (uDCDDs) Assessed with Ex-Vivo Lung Perfusion (EVLP) to Lungs from Conventional Brain-Dead Donors:
T. Egan1, B. Haithcock1, J. Long1, P. Noone1, J. Blackwell1, S. Gazda2, S. Reddy2, R. Davis2, K. Birchard1, P. Stewart2, 1Surgery, University of North Carolina School of Medicine, Chapel Hill, NC, 2Surgery, Duke University Medical Center, Durham, NC.

11:30 AM (25) Modulation of Immune-Mediators From Donor Lungs Using the Organ Care System® – A Potential Mechanism for Improved Outcome:
B. Wiegmans1, C. Falk2, B. Müller2, C. Neudörfl2, A. Akhdar2, C. Kühn1, I. Tudorache1, M. Arav2, A. Haverich1, G. Warnecke1, 1Dpt. For Cardiothoracic, Transplantation and Vascular Surgery, Hannover Medical School, Hannover, Germany, 2Institute of Transplant Immunology, Integrated Research and Treatment Center Transplantation, Hannover, Germany.

11:45 AM (26) The EXPAND Lung International Trial to Evaluate the Safety and Effectiveness of the Portable Organ Care System (OCS™) Lung for Recruiting, Preserving and Assessing Expanded Criteria Donor Lungs for Transplantation:
D. Van Raemdonck1, G. Warnecke2, J. Kukreja2, M. Smith3, G. Loor4, J. Garcia5, M. Hertz2, J. Madsen6, A. Haverich3, A. Ardehali6. 1Thoracic Surgery, University Hospitals Leuven, Leuven, Belgium, 2Thoracic and Cardiovascular Surgery, Hannover Medical School,
10:30 AM – 12:00 PM
CONCURRENT SESSION 5

Pediatric Mechanical Support (Grand Hall D)

CHAIRS: Angela Lorts, MD and David N. Rosenthal, MD (PEDS. MCS)

10:30 AM (27) Pediatric Heart Transplant Waitlist Mortality in the Era of Ventricular Assist Devices;  
F. Zafar1, M. S. Khan1, R. Bryant III1, C. Castleberry2, A. Lorts2, I. Wilmo1, J. L. Jefferies1, C. Chin2, D. L. Morales1. 1Thoracic Surgery, St. Joseph’s Medical Center, Phoenix, AZ, 2Thoracic Surgery, University of Minnesota Medical Center, Minneapolis, MN.

10:45 AM (28) Wait List Outcomes of Pediatric Patients Bridged to Heart Transplantation on Continuous Flow Left Ventricular Assist Devices;  

11:00 AM (29) Outpatient Experience with Heartware® Ventricular Assist Device System in Children: A Multicenter Experience;  
M. Schweiger1, M. Huebler1, A. Jeewa2, I. Adachi2, T. Boschert1, M. Mehegan1, P. Jans2, P. E. Parrino2, C. Vanderpluym2, O. Miera2, D. Zimpfer1. 1University Children’s Hospital, Congenital Cardiovascular Pediatric Surgery, Zurich, Switzerland, 2Texas Children’s Hospital, Houston, TX, 3St. Louis Children’s Hospital, St. Louis, MO, 4St. Vincent’s Hospital, Sydney, Australia, 5Ochsner Medical Center, Section of Thoracic and Cardiovascular Surgery, New Orleans, LA, 6Boston Children’s Hospital, Bosotn, MA, 7German Heart Institute Berlin, Berlin, Germany, 8Medical University Vienna, Department for Cardiothoracic Surgery, Vienna, Austria.

11:15 AM (30) Centrifugal Ventricular Assist Device Flow Rates <3L/min Is Predictive of Thrombotic Complications in Pediatric Patients;  
S. M. Holzer1, R. K. Singh1, W. A. Zuckerman1, L. J. Addonizio1, J. M. Chen1, L. A. Gilmore1, K. Beddows1, M. E. Richmond1. 1Division of Pediatric Cardiology, Columbia University Medical Center, New York, NY, 2Division of Pediatric Cardiothoracic Surgery, Seattle Children’s Hospital, Seattle, WA.
11:30 AM  (31) Size Matters: Impact of Pump Size of Berlin Heart EXCOR Pediatric Device on Clinical Outcome in Children; O. Miera¹, K. R. Schmitt¹, E. M. Delmo-Walter², S. Ovroutzki¹, F. Berger¹, H. Roland². ¹Congenital Heart Disease and Pediatric Cardiology, Deutsches Herzzentrum Berlin, Berlin, Germany, ²Cardiothoracic and Vascular Surgery, Deutsches Herzzentrum Berlin, Berlin, Germany.

11:45 AM  (32) Thirty-Day Cardiopulmonary Support with a Novel Portable Pediatric Artificial Pump-Lung; Y. Liu, P. G. Sanchez, A. Narain, X. Wei, A. C. Watkins, Z. J. Wu, B. Griffith. Department of Surgery, University of Maryland School of Medicine, Baltimore, MD.

10:30 AM – 12:00 PM  CONCURRENT SYMPOSIUM 25

A Lifecycle Journey in Pulmonary Hypertension
(Harbor GHI)

CHAIRS: James C. Coons, PharmD and Carmine Dario Vizza, MD

SESSION SUMMARY: After the successful symposium “A lifecycle Journey in Cystic Fibrosis and Lung Transplantation” at ISHLT 2013, we propose to continue this innovative session for the 2014 meeting. Traditional symposia are presented either in pure didactic tracks or cases with panel discussions. This series is a practical hybrid depicting an enduring case interspersed with a best practice based discussion at predefined key “journey intervals.” The symposium will be rounded off by a panel assisted and audience supported anchoring discussion. The lifecycle of pulmonary arterial hypertension will include special emphasis on 4 “journey points:” 1) Appropriate evaluation and diagnosis, 2) Management of acute decompensated PAH, 3) Long term management, and 4) Invasive options for bridging and palliation. The focus of this series will be on therapeutics that uniquely involves emerging or established knowledge in the pharmacology and pharmacy aspects of the interval disease states or situations.

10:30 AM  Case Presentation
James C. Coons, PharmD, University of Pittsburgh, Pittsburgh, PA, USA

10:35 AM  Beyond the ECHO, Evaluation and Diagnosis of PAH
Jean Luc E Vachiery, MD, Erasme University Hospital, Brussels, Belgium

10:50 AM  Case Presentation Update
James C. Coons, PharmD, University of Pittsburgh, Pittsburgh, PA, USA

10:55 AM  PAH in Crisis: Pharmacologic Management of Decompensated PAH and RV failure
Patricia Ging, PharmD, Mater Misericordiae University Hospital, Dublin, Ireland

11:10 AM  Case Presentation Update
James C. Coons, PharmD, University of Pittsburgh, Pittsburgh, PA, USA

11:15 AM  Progression of PAH: Where Do We Go From Here
Patricia Uber, PharmD, University of Hawaii, Hilo, HI, USA

11:30 AM  Case Presentation Update
James C. Coons, PharmD, University of Pittsburgh, Pittsburgh, PA, USA
Circulating the Microbes: Infections for the Heart Transplant Clinician (Seaport H)

**CHAIRS:** Stanley I. Martin, MD and Patricia Munoz, MD (ID, HTX)

**10:30 AM (33) Humoral Immunity Profiles to Identify CMV-seropositive Heart Recipients at Risk of CMV Disease: A Prospective Multicenter Study:**
E. Sarmiento1, M. Jaramillo1, J. Navarro1, J. Rodriguez-Molina1, J. Fernandez-Yañez2, J. Palomo2, M. Gomez-Sanchez2, M. Crespo-Leiro3, M. Paniagua4, L. Almenar5, M. Cebrian5, J. Segovia6, M. Gomez2, G. Rabago2, B. Levy1, S. Mirabet1, J. Lopez2, L. Garcia-Guerrera2, J. Carbone4. 1Clinical Immunology, Hospital General Universitario Gregorio Marañon, Madrid, Spain, 2Cardiology, Hospital General Universitario Gregorio Marañon, Madrid, Spain, 3Cardiology, Hospital General Universitario Gregorio Marañon, Madrid, Spain, 4Cardiology, Hospital General Universitario Puerta de Hierro, Madrid, Spain, 5Cardiology, Clínica Universitaria de Navarra, Pamplona, Spain, 6Cardiology, Hospital de la Santa Creu i Sant Pau, Barcelona, Spain, 7Cardiology, Hospital Clínico Universitario, Valladolid, Spain, 8Cardiology, Hospital Universitario La Paz, Madrid, Spain.

**10:45 AM (34) Late Cytomegalovirus (CMV) Infections in Heart Transplantation (HT):**
I. A. Echenique1, M. P. Angarone2, R. A. Gordon2, J. Rich2, A. S. Anderson2, E. C. McGee3, T. O. Abicht2, G. Ferguson4, V. Stosor1. 1Medicine and Surgery, Northwestern University Feinberg School of Medicine, Chicago, IL, 2Medicine, Northwestern University Feinberg School of Medicine, Chicago, IL, 3Surgery, Northwestern University Feinberg School of Medicine, Chicago, IL, 4Northwestern Memorial Hospital, Chicago, IL.

**11:00 AM (35) CMV-Seronegative Heart Recipients Disclose a Lower Immunocompetence Status Before Transplantation in Comparison With Seropositive Patients:**
J. Carbone1, J. Rodriguez-Molina1, J. Navarro1, J. Fernandez-Yañez2, J. Palomo2, R. Alonso2, E. Sarmiento1. 1Clinical Immunology, Hospital General Universitario Gregorio Marañon, Madrid, Spain, 2Cardiology, Hospital General Universitario Gregorio Marañon, Madrid, Spain, 3Microbiology, Hospital General Universitario Gregorio Marañon, Madrid, Spain.

**11:15 AM (36) Heart Recipients With a Lower Response To the 23-Valent Pneumococcal Polysaccharide Vaccine Are at Significant Risk of Bacterial Infection After Transplantation:**
E. Sarmiento1, J. Rodriguez-Molina1, J. Navarro1, J. Palomo2, J. Fernandez-Yañez2, J. Carbone1. 1Clinical Immunology, Hospital General
11:30 AM (37) Persistent Blood Stream Infections Are Associated with Cerebrovascular Accidents in Patients with Continuous Flow LVADs; B. H. Trachtenberg1, M. Aldeiri2, A. M. Cordero-Reyes1, P. Alvarez1, A. Bhimaraj1, B. Elias1, E. E. Suarez1, B. A. Bruckner1, M. Loebel1, R. L. Harris1, Y. J. Zhang4, G. Torre-Amione1, J. D. Estep1. 1Cardiology, Houston Methodist Hospital, Houston, TX, 2Cardiology, University of Texas Medical Branch, Galveston, TX, 3Cardiology, University of Texas Medical Branch, Galveston, TX, 4Neurosurgery, Houston Methodist Hospital, Houston, TX.

11:45 AM (38) Spectrum and Etiologies of Ventricular Assist Device Infections: A Single Center Study; V. Stosor1, K. Meehan2, T. Abicht3, R. Gordon4, J. Rich4, A. Anderson4, E. McGee3. 1Medicine and Surgery, Northwestern University Feinberg School of Medicine, Chicago, IL, 2Surgery, Northwestern Memorial Hospital, Chicago, IL, 3Surgery, Northwestern University Feinberg School of Medicine, Chicago, IL, 4Medicine, Northwestern University Feinberg School of Medicine, Chicago, IL.

NOON – 2:00 PM LUNCH BREAK/VIEW POSTERS
COUNCIL, COMMITTEE AND BOARD ORIENTATION (Gaslamp A-C)

NOON – 12:45 PM BOX LUNCH DISTRIBUTION (Palm Foyer)

12:05 PM – 1:00 PM JUNIOR FACULTY AND TRAINEE COUNCIL MEETING (Harbor GHI)

12:15 PM – 1:15 PM PULMONARY COUNCIL QOL WORKFORCE MEETING (Gaslamp D)

1:00 PM – 1:55 PM AN AUTHOR WORKSHOP (Harbor GHI) with Elizabeth Perill, Executive Publisher, Surgery, Elsevier

Knowing the best way to structure your research paper, identify the most appropriate journal and understand the peer review process is critical to getting your work published.

Attend this workshop and learn from the world’s leading publisher of Science, Technology and Health and Medical journals: steps to take before writing a paper; how to develop and submit a manuscript; what editors and publishers are looking for. Sensitive areas such as publishing ethics, plagiarism and duplicate publishing will also be addressed.

117
Mechanical Circulatory Support: Stop the Bleeding!

(Seaport)

**CHAIRS:** Evgenij V. Potapov, MD, PhD and George M. Wieselthaler, MD (MCS, PHARM)

**2:00 PM**

**A Novel Model to Predict the Risk of Non-Surgical Bleeding Among Patients Receiving Continuous Flow Left Ventricular Assist Devices:**


**2:15 PM**

**Improvement in Acquired Von Willebrand Syndrome with Aortic Valve Opening in Patients with Centrifugal Continuous Flow Left Ventricular Assist Devices:**

K. Muthiah1, D. Connor1, K. Ly1, D. Robson1, P. Macdonald1, J. Joseph1, C. S. Hayward1, 1Cardiac Failure and Transplant Unit, St. Vincent’s Hospital, Sydney, Australia, 2Department of Haematology, St. Vincent’s Center for Applied Medical Research, Sydney, Australia.

**2:30 PM**

**Can We Define a Device-specific Profile for Acquired Von Willebrand Syndrome in Continuous Flow Left Ventricular Assist Device Recipients?:**

N. M. Tricarico, M. E. Davis, M. E. Keebler, S. Maltais, N. A. Haglund, D. J. Lenihan. Vanderbilt University Medical Center, Nashville, TN.

**2:45 PM**

**von Willebrand Factor Degradation with an LVAD Occurs via Two Distinct Mechanisms: Mechanical Demolition and Enzymatic Cleavage:**


**3:00 PM**

**Anti-factor Xa Levels Versus Activated Partial Thromboplastin Time for Monitoring Unfractionated Heparin in Patients with Continuous Flow Left Ventricular Assist Devices:**


**3:15 PM**

**Intracranial Hemorrhage Is Associated with a Higher Doppler Blood Pressure during Continuous Flow Left Ventricular Assist Device Support:**

O. Saeed1, R. Jermy1, S. Mannem1, C. Nucci1, D. Casazza1, S. Farroqui1, M. Bloom2, A. McLarty3, R. Zolty1, J. Shini1, D. D’Alessandro4, D. J. Goldstein5, S. Patel6, 1Medicine, Montefiore Medical Center, Albert Einstein College of Medicine, Bronx, NY, 2Medicine, Stony Brook University, Long Island, NY, 3Surgery, Stony Brook University, Long Island, NY, 4Cardiothoracic and Vascular Surgery, Montefiore Medical Center, Albert Einstein College of Medicine, Bronx, NY.
2:00 PM – 3:30 PM

CONCURRENT SESSION 8

Measure for Measure: Assessment of Cardiac Allograft and Immune Function (Grand Hall A)

**CHAIRS:** Kristjan Karason, MD and Lori J. West, MD, DPhil (HTX, BSTR)

**2:00 PM**

(45) Early Immune Monitoring After Cardiac Transplantation Predicts Progression of Maximal Intimal Thickness by Intravascular Ultrasound; R. Cheng, B. Azarbal, J. Patel, M. Kittleson, J. Kobashigawa. Cedars-Sinai Heart Institute, Los Angeles, CA.

**2:15 PM**

(46) Incidence and Importance of Donor-Specific HLA Antibody in Heart Transplant Recipients; Q. Zhang, J. McNamara, M. Cadeiras, T. Khuu, A. Baas, E. C. Depasquale, N. Halnon, G. Perens, J. A. Carlos, A. Nsair, R. Shemin. Cedars-Sinai Heart Institute, Los Angeles, CA, Department of Cardiology, David Geffen School of Medicine at UCLA, Los Angeles, CA.

**2:30 PM**

(47) Increased Sensitization To HLA and To Cardiac Self-Antigens (Myosin and Vimentin) in Patients Waiting for Cardiac Transplantation With Left Ventricular Assisting Device (LVAD); B. Banan, D. Phelan, M. Askar, G. Ewald, T. Mohanakumar. University of British Columbia, Vancouver, BC, Canada, University of Ottawa Heart Institute, Ottawa, ON, Canada, Dalhousie University, Halifax, NS, Canada, University of Alberta, Edmonton, AB, Canada.

**2:45 PM**


**3:00 PM**

(49) Changes in Longitudinal Myocardial Function During Acute Cardiac Rejection: The Clinical Role of 2D Speckle Tracking Echocardiography; T. S. Clemmensen, B. B. Løgstrup, H. Eiskjær, S. H. Poulsen. Department of Cardiology, Aarhus University Hospital, Skejby, Denmark.
3:15 PM  (50) Blood Test to Monitor for the Absence of Acute Cardiac Rejection: From Discovery to Clinical Implementation;
Z. Hollander1, K. K. Lam1, J. E. Wilson-McManus1, S. Assadian1, D. L. Dai1, C. Shannon1, V. Chen1, S. J. Tebbutt1, R. Balshaw2, C. Borchers1, R. A. Davies4, D. Delgado3, H. Haddad4, A.Ignaszewski6, D. L. Isaac7, D. H. Kim8, A. Mui9, M. Rajda5, H. Ross5, L. J. West10, M. White11, S. Zieroth12, R. W. McMaster6, P.A. Keown6, R. T. Ng1, B. M. McManus1. 1PROOF Centre of Excellence, Vancouver, BC, Canada, 2BC Centre for Disease Control, Vancouver, BC, Canada, 3UVic Genome BC Proteomics Centre, Victoria, BC, Canada, 4University of Ottawa Heart Institute, Ottawa, ON, Canada, 5Toronto General Hospital, Toronto, ON, Canada, 6University of British Columbia, Vancouver, BC, Canada, 7University of Calgary, Calgary, AB, Canada, 8University of Alberta & Mazankowski Alberta Heart Institute, Edmonton, AB, Canada, 9Dalhousie University, Halifax, NS, Canada, 10University of Alberta, Edmonton, AB, Canada, 11Montreal Heart Institute, Montreal, QC, Canada, 12University of Manitoba, Winnipeg, MB, Canada.
Ex-Vivo Lung Perfusion Science on the Horizon (Grand Hall B)

**CHAIRS:** Daniel Kreisel, MD, PhD and Stig Steen, MD, PhD
(LTX, BSTR, DMD)

**2:00 PM** *(51)* Pharmacological Inhibition of Peroxynitrite and Poly (ADP-ribose) Polymerase during Ex-Vivo Lung Perfusion (EVLP) Markedly Reduces Ischemia-reperfusion Injury in the Explanted Donor Lung; X. Wang1, E. Abdelnour1, Y. Wang2, R. Parapanov1, F. Gronchi2, J. Perentes1, M. Gonzalez1, H. Ris1, L. Liaudet4, T. Krueger1. 1Division of Thoracic Surgery, University Hospital of Lausanne, Lausanne, Switzerland, 2Division of Cardiovascular Surgery, West China Hospital, Lausanne, China, 3Division of Anesthesiology, University Hospital of Lausanne, Lausanne, Switzerland, 4Division of Intensive Care Medicine, University Hospital of Lausanne, Lausanne, Switzerland.

**2:15 PM** *(52)* Dual Ex-Vivo Lung Perfusion Techniques Ameliorate Airway Hypoxia in Lung Grafts in Rats; Y. Tanaka1, N. Shigemura1, K. Noda1, Y. Saito1, Y. Maniwa2, J. K. Bham1, J. D’Cunha1, J. M. Pilewski, J. D. Luketich, C. A. Bermudez3. 1Department of Cardiothoracic Surgery, University of Pittsburgh Medical Center, Pittsburgh, PA, 2Department of Thoracic Surgery, Kobe University Graduate School of Medicine, Kobe, Japan, 3Medicine, University of Pittsburgh Medical Center, Pittsburgh, PA.


**2:45 PM** *(54)* A Positive Left Atrial Pressure Is Important During Ex-Vivo Lung Perfusion; V. Linacre1, M. Cypel1, T. Machuca1, K. Nakajima1, K. Hashimoto, R. Zamel1, M. Chen1, I. Iskender, P. R. dos Santos1, T. Waddell, M. Liu1, S. Keshavjee1. Latner Thoracic Surgery Research Laboratories, Toronto General Research Institute, University Health Network, Toronto, ON, Canada.

**3:00 PM** *(55)* Expanded Thymic CD25+FOXP3+ Regulatory T Cells (Tregs) Maintain Stable Function and Phenotype Under Inflammatory Conditions – Potential for Cellular Therapy?; E. Dijke1, A. McMurchy2, T. Ellis1, K. Boer3, I. Larsen1, I. Rebekya1, D. Ross1, C. Baan3, M. Levings2, L. West1. 1University of Alberta, Edmonton, AB, Canada, 2University of British Columbia, Vancouver, BC, Canada, 3Erasmus MC Medical Center, Rotterdam, Netherlands.

**3:15 PM** *(56)* Ex-Vivo Perfusion Treatment of Infection in Human Donor Lungs; D. Nakajima1, M. Cypel1, R. Bonato1, T. N. Machuca1, K. Hashimoto1, V. Linacre1, I. Iskender1, M. Chen1, T. K. Waddell1, M. Liu1, D. M. Hwang1, S. Husain1, S. Keshavjee1. Latner Thoracic Surgery Research Laboratories, Toronto General Research Institute, University Health Network, Toronto, ON, Canada, 2Transplant Infectious Disease Unit, University Health Network, Toronto, ON, Canada.
2:00 PM – 3:30 PM

CONCURRENT SESSION 10

Lung Transplant Outcomes: Good, Better, Best: Let Us Never Rest (Grand Hall C)

CHAIRS: Joshua M. Diamond, MD and Gregory I. Snell, FRACP, MBBS, MD (LTX, LF)

2:00 PM (57) Lung Transplantation in Scleroderma?: E. C. DePasquale1, D. Ross2, A. Ardehali3. 1Division of Cardiology, UCLA, Los Angeles, CA, 2Division of Pulmonology, UCLA, Los Angeles, CA, 3Division of Cardiothoracic Surgery, UCLA, Los Angeles, CA.

2:15 PM (58) Outcomes and Survival Benefit of Lung Transplantation for Cystic Fibrosis: Single-Center Experience of 309 Consecutive Cases; T. N. Machuc1, M. Solomon2, C. Chaparro3, A. Stephenson1, E. Tullis4, M. Cypel1, T. Saito1, S. Azad1, H. Grasemann2, M. Binnie3, C. Chow1, A. Pierre1, K. Yasufuku1, M. de Perrot1, T. K. Waddell1, L. G. Singer1, S. Keshavjee. 1Thoracic Surgery, University of Toronto, Toronto, ON, Canada, 2Respiratory Medicine, Hospital for Sick Children, Toronto, ON, Canada, 3Respirology, University of Toronto, Toronto, ON, Canada.

2:30 PM (59) Contemporary Outcomes of Lung Transplantation in Patients with Preoperative Extracorporeal Membrane Oxygenation: A Propensity-Match Analysis; C. Bermudez1, T. Richards1, N. Shigemura1, J. Bham1, P. Sappington2, M. Crespo3, M. Morell4, J. Pilewski5, J. D’Cunha1. 1Cardiothoracic Surgery, UPMC, Pittsburgh, PA, 2Critical care Medicine, UPMC, Pittsburgh, PA, 3Department of Medicine, UPMC, Pittsburgh, PA, 4Medicine, UPMC, Pittsburgh, PA.

2:45 PM (60) Outcomes of Intraoperative ECMO Versus Cardiopulmonary Bypass for Lung Transplantation; T. N. Machuca1, S. Collaud1, O. Mercier1, V. Linacre1, T. Krueger1, S. Azad1, L. Singer1, K. Yasufuku1, M. de Perrot1, A. Pierre1, T. K. Waddell1, S. Keshavjee, M. Cypel. 1Thoracic Surgery, University of Toronto, Toronto, ON, Canada, 2Respirology, University of Toronto, Toronto, ON, Canada.

3:00 PM (61) Genetic Variation in Immunoglobulin G Receptor Affects Survival After Lung Transplantation; D. Ruttens1, S. E. Verleden1, P. C. Goeminne1, E. Vandermeulen1, E. Wauters2, R. Vos1, D. E. Van Raemdonck1, D. Lambrechts3, R. M. Vanaudenaerde1, G. M. Verleden1. 1Lung Transplant Unit, KULeuven, Leuven, Belgium, 2Vesalius Research Centrum, VIB, Leuven, Belgium.

3:15 PM (62) Is a Priori Staging of Bilateral Lung Transplant the Optimal Surgical Approach for High-risk Patients With Interstitial Lung Disease?: A. M. Ganapathi1, M. G. Hartwig1, A. A. Osho1, B. R. Englum1, P. J. Speicher2, S. M. Palmer2, R. Davis1. 1Department of Surgery, Duke University Medical Center, Durham, NC, 2Department of Medicine, Duke University Medical Center, Durham, NC.
Clinical Case Dilemmas in Thoracic Transplantation: The Best of the Best (Grand Hall D)

**CHAIRS:** Pali D. Shah, MD and Cynthia J. Gries, MD, MSc

**EXPERT PANEL:**

- David O. Taylor, MD, Cleveland Clinic Foundation, Cleveland, OH, USA (HEART)
- Tam Khoo, PharmD, BCPS, University of California at Los Angeles, Los Angeles, CA, USA (PHARM)
- Nancy L. Reinsmoen, PhD D Abhi, Cedars-Sinai Health System, Los Angeles, CA, USA (PATH)
- Scott M. Palmer, MD, MHS, Duke University, Durham, NC, USA (LUNG)
- Andreas Zuckermann, MD, Medical University of Vienna, Vienna, Austria (MCS)
- Stanley I. Martin, MD, The Ohio State University Medical Center, Columbus, OH, USA (ID)

**2:00 PM (63)** Carfilzomib for Refractory Antibody Mediated Rejection and Allosensitization in Heart Transplantation:

L. Sacha1, J. J. Teuteberg2, A. Zeevi3, C. Bermudez2, R. Kormos2, C. Ensor1, J. McDyer4, M. A. Shullo1. 1Pharmacy and Therapeutics, University of Pittsburgh, Pittsburgh, PA, 2Heart and Vascular Institute, UPMC, Pittsburgh, PA, 3Histopathology, University of Pittsburgh, Pittsburgh, PA, 4Medicine, University of Pittsburgh, Pittsburgh, PA.

**2:22 PM (64)** Belatacept as Primary Immunosuppression in a Lung Transplant Recipient:

P. Ong1, L. Mudambi1, A. Fuentes2, K. Dawson2, N. Sinha2, B. Mankidy2, S. Scheinin1, T. Kaleekal3, S. Jyothula3. 1Pulmonary and Critical Care Medicine, Baylor College of Medicine, Houston, TX, 2Department of Pharmacy, Houston Methodist Hospital, Houston, TX, 3JC Walter Jr Transplant Center, Houston Methodist Hospital, Houston, TX.

**2:44 PM (65)** Successful Use of Cidofovir and Leflunomide in Lung Transplant Recipient with BK Polyomavirus Encephalitis:

P. Ong1, A. Fuentes2, K. Dawson2, N. Sinha2, B. Mankidy2, M. Loebe2, T. Kaleekal3, S. Jyothula3. 1Pulmonary and Critical Care Medicine, Baylor College of Medicine, Houston, TX, 2Department of Pharmacy, Houston Methodist Hospital, Houston, TX, 3JC Walter Jr Transplant Center, Houston Methodist Hospital, Houston, TX.

**3:06 PM (66)** Ultrasound-accelerated, Catheter-directed Thrombolysis in the Treatment of LVAD Thrombosis:

Infections in Mechanical Circulatory Support Devices – Understanding and Conquering the Beast (Harbor GHI)

**CHAIRS:** Martha Mooney, MD, FACP and Guy MacGowan, MD (ID, MCS)

**SESSION SUMMARY:** This symposium will focus on pathogenesis, recent guidelines on diagnosis, as well as medical and surgical approaches for the management and prevention of Mechanical Circulatory Support Device-associated infections.

2:00 PM  
**Case Presentation**  
Pavan Atluri, M.D., University of Pennsylvania, Philadelphia, PA, USA

2:05 PM  
**Biofilm Basics: Understanding The Beast**  
Robert F. Padera, MD, PhD, Brigham and Women’s Hospital, Boston, MA, USA

2:20 PM  
**Diagnosis and Classification of MCSD Infection**  
Margaret M. Hannan, MD, Mater Misericordiae University Hospital, Dublin, Ireland

2:35 PM  
**Driveline Infection, the Role of Nurse/VAD Coordinator**  
Linda L. Staley, RN, MSN NP, Mayo Clinic Hospital, Phoenix, AZ, USA

2:50 PM  
**Surgical Approach to the Management of MCSD Infections**  
Benjamin Medalion, MD, Rabin Medical Center Beilinson Campus, Petach Tiqva, Israel

3:05 PM  
**Imaging The Infected MCS Patient**  
Matthew Romano, MD, University of Michigan, Ann Arbor, MI, USA

3:20 PM  
**Panel Discussion**
**2:00 PM – 3:30 PM**

### Improving Outcomes: Interventions & Strategies

**CHAIRS:** Masina Scavuzzo, RN and Emily Stimpson, RN, BSN, CCT (NHS AH)

#### 2:00 PM

**Teen Pocket PATH: A Randomized Pilot of a Mobile Health Application To Improve Adherence Among Adolescent Solid Organ Transplant Recipients;**

D. A. Shellmer¹, A. DeVito Dabbs², M. Dew³, G. Mazariégos¹. ¹Hillman Center for Pediatric Transplantation, University of Pittsburgh/Children’s Hospital of Pittsburgh, Pittsburgh, PA, ²Nursing, University of Pittsburgh, Pittsburgh, PA, ³Epidemiology, Psychiatry, University of Pittsburgh, Pittsburgh, PA.

#### 2:15 PM

**Longer Versus a Shorter Duration Exercise Rehabilitation Program Following Lung Transplant: A Randomised Controlled Trial;**

L. M. Fuller¹, B. Button¹, B. Tarrant¹, R. Steward¹, G. Snell², A. Holland³. ¹Physiotherapy, The Alfred Hospital, Melbourne, Australia, ²Lung Transplant AIRMED, The Alfred Hospital, Melbourne, Australia, ³Physiotherapy La Trobe University, The Alfred Hospital, Melbourne, Australia.

#### 2:30 PM

**Perceived Control: A Target for Improving Psychosocial Outcomes Early After Heart Transplant;**

L. Doering¹, K. Hickey¹, B. Chen¹, F. Idemundia¹, E. Carter³, D. Pickham², C. Castillo², D. Mancini¹, M. Deng³, J. Kobashigawa⁴, B. Drew¹. ¹School of Nursing, UCLA, Los Angeles, CA, ²School of Nursing, Columbia University, New York, NY, ³School of Nursing, UCSF, San Francisco, CA, ⁴Columbia University Medical Center, New York, NY, ⁵UCLA Ronald Reagan Medical Center, Los Angeles, CA, ⁶Cedars-Sinai Heart Institute, Cedars-Sinai Medical Center, Los Angeles, CA.

#### 2:45 PM

**A Longitudinal Examination of Quality of Life and Survival Long-term after Heart Transplantation;**

C. White-Williams¹, P. Fazeli¹, B. Rybarczyk², K. Grady³. ¹UB, Birmingham, AL, ²VCU, Richmond, VA, ³Northwestern University, Chicago, IL.

#### 3:00 PM

**A Patient-Centric Conceptual Framework for Health-related Quality of Life in Mechanical Circulatory Support;**

K. L. Grady¹, S. Magasi², E. A. Hahn², E. C. McGee Jr.¹, C. Yancy⁴. ¹Surgery/Division of Cardiac Surgery, Northwestern University, Chicago, IL, ²Occupational Therapy, University of Illinois at Chicago, Chicago, IL, ³Medical Social Sciences, Northwestern University, Chicago, IL, ⁴Medicine/Division of Cardiology, Northwestern University, Chicago, IL.

#### 3:15 PM

**Higher Quality of Caregiver Support Is Associated with Post-Transplant Adherence at 6 Months;**

J. M. Rowan¹, C. J. Gries¹, A. J. Devito Dabbs². ¹PACCM, UPMC - Pittsburgh, PA, ²Pittsburgh, PA, ³University of Pittsburgh School of Nursing, UPMC - Pittsburgh, PA, ⁴University of Pittsburgh, PA.
3:30 PM – 4:00 PM
COFFEE BREAK/VISIT EXHIBITS (Harbor A-F)
VIEW POSTERS (Harbor and Seaport Foyers)

4:00 PM – 5:30 PM
CONCURRENT SESSION 13

Optimizing Mechanical Circulatory Support Outcomes I
(Seaport)

CHAIRS: Marian Zembala, MD, PhD and Douglas A. Horstmanshof, MD (MCS)

4:00 PM

(73) Outcome and Survival Following Cardiogenic Shock Supported By IABP Versus Mechanical Circulatory Support Devices in a National Cohort:
R. J. Stretch1, P. Bonde2. 1Bonde Artificial Heart Lab, Yale School of Medicine, New Haven, CT, 2Section of Cardiac Surgery, Yale School of Medicine, New Haven, CT.

4:15 PM

(74) Does Preoperative Mitral Regurgitation Influence Outcomes After Continuous-Flow Left Ventricular Assist Device Implantation?:
S. Maltais1, V. Tchantchaleishvili2, N. A. Haglund1, J. Cowger1, M. E. Davis1, M. Keebler1, L. D. Joyce1, R. C. Daly1, S. J. Park1, K. D. Aaronson1, F. D. Pagani2, J. M. Stulak3. 1Bonde Artificial Heart Lab, Yale School of Medicine, New Haven, CT, 2Section of Cardiac Surgery, Yale School of Medicine, New Haven, CT, 3Vanderbilt University Medical Center, Nashville, TN.

4:30 PM

(75) Does Metabolic Syndrome Affect Outcomes After Left Ventricular Assist Device Implantation?:
S. Maltais1, N. A. Haglund1, J. Cowger1, M. E. Davis1, L. D. Joyce1, R. C. Daly1, S. J. Park1, K. Aaronson1, F. Pagani2, J. M. Stulak3. 1Bonde Artificial Heart Lab, Yale School of Medicine, New Haven, CT, 2Section of Cardiac Surgery, Yale School of Medicine, New Haven, CT, 3Vanderbilt University Medical Center, Nashville, TN.

4:45 PM

(76) The Impact of LVAD Program Volume and Transplant Status on Cost, Quality, and Survival in the UHC Database 2010-2012:
S. C. Silvestry, A. Itoh, T. Kazui, S. M. Prasad. Surgery/Cardiac Surgery, Washington University School of Medicine, Saint Louis, MO.

5:00 PM

(77) Frailty Is Associated With Increased Time on Ventilator in Patients Undergoing Left Ventricular Assist Device Implantation: A Prospective Study:
J. Manghelli1, J. Vader1, T. Keeney2, S. Martinez2, J. Patel1, E. Novak1, S. Nagabandii1, M. Rich1, S. Silvestry1, S. M. Joseph1. 1Cardiovascular Division, Washington University School of Medicine, St Louis, MO, 2Rehabilitation Division, Barnes Jewish Hospital, St Louis, MO, 3Division of Cardiothoracic Surgery, Washington University School of Medicine, St Louis, MO.

5:15 PM

(78) Comparison of Total Artificial Heart and Biventricular Assist Device Support as Bridge-to-Transplantation:
A. Cheng1, J. R. Trivedi1, K. McCants2, E. J. Birks2, A. J. Lenneman2, R. Singh1, M. L. Williams1, M. S. Slaughter1. 1Thoracic and Cardiovascular Surgery, University of Louisville, Louisville, KY, 2Cardiology – Heart Failure, University of Louisville, Louisville, KY.
4:00 PM – 5:30 PM

**CONCURRENT SESSION 14**

The Future of Mechanical Circulatory Support is Now
(Grand Hall A)

**CHAIRS:** Fernando A. Figueira, MD and Eugene Christopher DePasquale, MD (MCS)

**4:00 PM (79) First Report of the PAS INTERMACs Registry of the HVAD in Commercial Use;**
S. Maltais1, M. E. Keebler1, K. H. Schlendorf1, S. W. Boyce2, S. S. Najjar2, F. D. Pagani3, K. D. Aaronson1, V. Jeenavandam1, C. A. Milano2, J. Rogers2, R. Love1, C. Mahr1, D. Thin Pham1, M. Kiernan3, R. L. Koros3, J. J. Teuteberg1, S. C. Silvestry6, G. Ewald7, E. C. McGee11, R. Gordon11, H. R. Mallidi12, O. H. Frazier12. 1Vanderbilt Heart and Vascular Institute, Nashville, TN, 2MedStar Heart Institute, Washington, DC, 3University of Michigan, Ann Arbor, MI, 4University of Chicago, Chicago, IL, 5Duke University Medical Center, Durham, NC, 6Froedtert Hospital/Medical College of Wisconsin, Milwaukee, WI, 7Froedtert Hospital/Medical College, Milwaukee, WI, 8Tufts Medical Center, Boston, MA, 9University of Pittsburgh Medical Center, Pittsburgh, PA, 10Barnes Jewish Hospital, St. Louis, MO, 11Northwestern University, Chicago, IL, 12Texas Heart Institute, Houston, TX.

**4:15 PM (80) Totally Implantable LVAD: Progress on Portable Wireless Power Delivery System and Results of In-vivo Testing;**
B. Waters1, J. Smith2, P. Bonde3. 1Department of Electrical Engineering, University of Washington, Seattle, WA, 2Department of Computer Science and Engineering, University of Washington, Seattle, WA, 3Center for Advanced Heart Failure and Transplantation, Yale University School of Medicine, New Haven, CT.

**4:30 PM (81) Contemporary Outcome of Mechanical Circulatory Support Therapy: Analysis of Multicenter Registry, RESCUE;**
H. Takayama1, M. Kai1, M. Camacho1, B. Kalesan1, U. Jorde1, L. Truby1, A. Gass1, D. Spielvogel1, D. Baran4, M. Zucker6, B. Sun4. 1Columbia University College of Physicians and Surgeons, New York, NY, 2Westchester Medical Center, Valhalla, NY, 3Newark Beth Israel Medical Center, Newark, NJ, 4Cardiology, Westchester Medical Center, Valhalla, NY, 5Cardiothoracic Surgery, Westchester Medical Center, Valhalla, NY, 6Newark Beth Israel Medical Center, Newark, NJ, 7Minneapolis Heart Institute, Minneapolis, MN.

**4:45 PM (82) Utility of Tricuspid Valve Repair at the Time of Left Ventricular Assist Device Implantation;**
H. K. Song1, J. O. Mudd1, J. M. Gelov1, C. V. Chien1, F. A. Tibayan1, K. A. Hollifield1, D. C. Naftel1, J. K. Kirklin2. 1Oregon Health & Science University, Portland, OR, 2University of Alabama at Birmingham, Birmingham, AL.

**5:00 PM (83) HeartWare Ventricular Assist Device Implantation: Are In-Hospital Outcomes Using a Minimally Invasive Thoracotomy Approach Comparable to Conventional Sternotomy?;**
N. Haglund, M. E. Davis, H. Nian, J. Kennedy, J. Stulak, K. Schlendorf, M. Keebler, S. Maltais. Vanderbilt University Medical Center, Nashville, TN.

**5:15 PM (84) The Columbia Experience of 163 Patients with Venoarterial Extracorporeal Membranous Oxygenation for Refractory Cardiogenic Shock;**
L. Truby1, L. Mundy1, T. Hong1, A. Kirtane1, L. Mongero1, E. Landes1, M. Yuzefpolskaya1, N. Uriel1, P. C. Colombo1, U. P. Jorde1, K. Takeda1, V. Naka1, H. Takayama1. 1Columbia University College of Physicians and Surgeons, New York, NY, 2New York Presbyterian Hospital, New York, NY.
4:00 PM – 5:30 PM

**CONCURRENT SESSION 15**

**Adult Heart Failure: Novel Diagnostics** (Grand Hall B)

**CHAIRS:** Nicola E. Hiemann, MD and Barry M. Cabuay, MD (HF, BSTR)

**4:00 PM**

**(85)** The Prognostic Role of Cardiac Power Indices in Advanced Chronic Heart Failure;
J. L. Grodin1, M. Dupont2, W. Mullens1, D. O. Taylor3, R. C. Starling1, W. Tang1. 1Cardiovascular Medicine, Cleveland Clinic Foundation, Cleveland, OH, 2Cardiology, Ziekenhuis Oost-Limburg, Genk, Belgium.

**4:15 PM**

**(86)** NGS PBMC Transcriptome Analysis Identifies More Pronounced Activation of the Inflammatory Response in Advanced INTERMACS Class Before MCSD Implantation;
G. Bondar1, M. Cadeiras1, N. Wisniewski1, E. Chang1, M. Bakir1, J. Chittoor1, J. Maque1, K. Dong2, C. Y. Chan2, Y. D. Korin3, P. Ping2, E. F. Reed2, M. Deng1. 1Medicine/Cardiology, UCLA, Los Angeles, CA, 2Physiology and Medicine/Cardiology, Proteomics Center, David Geffen School of Medicine at UCLA, Los Angeles, CA, 3Pathology and Laboratory Medicine/Immunogenetic Center, David Geffen School of Medicine at UCLA, Los Angeles, CA.

**4:30 PM**

**(87)** A Combined-biomarker Approach To Phenotyping Renal Dysfunction in Heart Failure;
S. J. Cheng1, B. D. McCauley2, M. A. Brisco3, O. Laur1, A. J. Kula1, J. M. Testani1. 1Yale University School of Medicine, New Haven, CT, 2University of Pennsylvania School of Medicine, Philadelphia, PA, 3Medical University of South Carolina, Charleston, SC.

**4:45 PM**

**(88)** Cardiac Metabolism Gene Expression Differences in Patients With Advanced Ischemic Versus Non-Ischemic Cardiomyopathy;

**5:00 PM**

**(89)** The Diastolic Pulmonary Gradient as a Predictor of Adverse Outcomes in Patients With Acute Decompensated Heart Failure;
V. N. Selby1, J. Vachiryan1, J. C. Fang2, M. Janmohamed1, L. Klein1, M. H. Park3, R. L. Benza4, R. P. Frantz5, N. Galle6, T. De Marco1. 1Division of Cardiology, University of California, San Francisco, San Francisco, CA, 2Cliniques Universitaires de Bruxelles – Hopital Erasme, Brussels, Belgium, 3Division of Cardiology, University of Utah, Salt Lake City, UT, 4Division of Cardiology, University of Maryland School of Medicine, Baltimore, MD, 5Department of Medicine, Allegheny General Hospital, Pittsburgh, PA, 6Division of Cardiovascular Diseases, Mayo Clinic, Rochester, MN, 7Department of Experimental, Diagnostic and Specialty Medicine, Bologna University Hospital, Bologna, Italy.

**5:15 PM**

**(90)** Left Ventricular vs. Bi-Ventricular Assist Device Implantation: Improvement of Preoperative Decision Making by Assessing Right Ventricular Adaptation to Loading Conditions;
Chronic Lung Allograft Dysfunction: Phenotypes and Risk Factors (Grand Hall C)

**CHAIRS:** Robin Vos, MD, PhD and Scott M. Palmer, MD, MHS (LTX)

**4:00 PM**

(91) **Developing a Score of Early Postoperative Regulatory T Cell Frequency To Predict Bronchiolitis Obliterans Syndrome-Free Survival at Two Years After Lung Transplantation:**


**4:15 PM**

(92) **RESULT (Reflex Surgery in Lung Transplantation) To Determine If Prevention of GERD Related Aspiration By Surgical Fundoplication Improves Lung Allograft Function.** Sponsor: National Heart, Lung, and Blood Institute (NHLBI):

D. Davis, C. Green, S. Keshavjee, L. Azad, L. Singer, K. McCurry, M. Budev, S. Palmer. Surgery, Duke University, Durham, NC, DCRI, Duke University, Durham, NC, Surgery, Toronto, Toronto, ON, Canada, Medicine, Toronto, ON, Canada, Surgery, CCF, Cleveland, OH, Medicine, CCF, Cleveland, OH, Medicine, Duke University, Durham, NC.

**4:30 PM**

(93) **Bile Acid, Not pH Probe or Gastrin Predicts Allograft Function at One Year, From the Prospective RESULT (Reflex Surgery in Lung Transplantation):**

D. Davis, S. Azad, W. Parker, C. Green, S. Keshavjee, K. McCurry, L. Singer, M. Budev, S. Palmer. Surgery, Duke University, Durham, NC, Surgery, Toronto, Toronto, ON, Canada, DCRI, Duke University, Durham, NC, Surgery, CCF, Cleveland, OH, Medicine, Toronto, Toronto, ON, Canada, Medicine, CCF, Cleveland, OH, Medicine, Duke University, Durham, NC.

**4:45 PM**

(94) **The Impact of Air Pollution on Outcome After Lung Transplantation in Europe:**

S. E. Verleden, D. Rutten, E. Bijvens, E. Winckelmans, F. Meloni, M. Morosini, J. Gottlieb, G. Warnecke, E. Verschueren, W. Van Der Bij, G. Weinreich, M. Kamler, U. Sommerwerck, B. Hoffmann, A. Roman, S. Gomez Olles, C. Benden, T. Rechsteiner, B. Luijckx, E. Oudijk, D. Van Kessel, J. Kwakkel-Van Erp, M. Iversen, H. Schulitz, P. Jaksh, W. Klepetko, J. Loridan, P. Corris, A. Fisher, A. Holm, E. Vandermeulen, R. Vos, N. Kneidinger, C. Neurohr, R. Beelen, D. Vienneau, G. Hoek, K. De Hoogh, B. Nemyri, G. M. Verleden, T. S. Nawrot, B. Vanaudenaerde, K. Kuleuven, Leuven, Belgium, UHasselt, Hasselt, Belgium, Università di Pavia, Pavia, Italy, Hannover Medical School, Hannover, Germany, Rijksuniversiteit Groningen, Groningen, Netherlands, Pneumology, Ruhrlandklinik West German Lung Center, University Hospital Essen, University Duisburg-Essen, Essen, Germany, JUF Leibniz Research Institute for Environmental Medicine at the University of Duiseldorf, Dusseldorf, Germany, University Hospital Vall d’Hebron, Barcelona, Spain, University Hospital Zurich, Zurich, Switzerland, University Medical Centre Utrecht/St. Antonius Hospital Nieuwegein, Utrecht/Nieuwegein, Netherlands, Copenhagen University Hospital Rigshospitalet, Copenhagen, Denmark, University of Vienna, Vienna, Austria, Newcastle University.
Newcastle, United Kingdom, 14University of Oslo, Oslo, Norway, 15Klinikum Großhadern der LMU, Munich, Germany, 16University of Basel, Basel, Switzerland, 17Imperial College, London, United Kingdom.

5:00 PM (95) Post Mortem Confirmation of Chronic Lung Allograft Dysfunction; M. A. Malouf, A. P. Havryk, M. Plit, A. L. Rigby, A. R. Glanville. Lung Transplant Unit, St Vincents Hospital Sydney, Darlinghurst, Australia.

Management of the Pediatric Heart Recipient
(Grand Hall D)

CHAIRS: Melanie D. Everitt, MD and Tajinder P. Singh, MD, MSc
(HTX, PEDS)

4:00 PM (97) Does Duration of Donor Cardiopulmonary Resuscitation Impact Pediatric Cardiac Graft Survival?;
M. S. Khan¹, K. B. Karani¹, F. Zafar¹, C. D. Castleberry², R. Bryant III¹, C. Villa², A. Lorts², B. L. Morales²
¹Cardiothoracic Surgery, Cincinnati Children’s Hospital Medical Center, Cincinnati, OH, ²Cardiology, Cincinnati Children’s Hospital Medical Center, Cincinnati, OH.

4:15 PM (98) Induction Therapy in African American Infant Heart Transplants: Is There a Benefit?;

4:30 PM (99) mTOR Inhibitors in Pediatric Heart Transplantation: Do the Potential Benefits Outweigh the Risks, Clues from the ISHLT Registry;
C. Castleberry¹, A. Dipchand², B. Taylor¹, L. Edwards¹, Z. Gao², E. King², C. Chin¹
¹Pediatric Cardiology, Cincinnati Children’s Hospital Medical Center, Cincinnati, OH, ²Pediatric Cardiology, Sick Kids Hospital, Toronto, ON, Canada, ³United Network for Organ Sharing, Richmond, VA, ⁴Biostatistics and Epidemiology, Cincinnati Children’s Hospital Medical Center, Cincinnati, OH.

4:45 PM (100) Global Left Ventricular Relaxation: A Novel Tissue Doppler Index of Acute Rejection in Pediatric Heart Transplantation;
L. E. Hernandez¹, C. W. Shepard¹, L. Valdes-Cruz¹, R. K. Ameduri¹
¹Pediatrics, University of Minnesota, Amplatz Children Hospital, Minneapolis, MN, ²Pediatrics, JoeDiMaggio Children’s Hospital, Hollywood, FL.

5:00 PM (101) Risk Factor Analysis for Individual Causes of Death Following Pediatric Heart Transplant: An Analysis of the ISHLT Registry;
R. D. Vanderlaan¹, C. Manhiot², L. Edwards³, B. McCrindle², A. I. Dipchand²
¹Pediatric Cardiology, Cincinnati Children’s Hospital Medical Center, Cincinnati, OH, ²Pediatrics, Labatt Family Heart Center, Hospital for Sick Children, Toronto, ON, Canada, ³ISHLT Transplant Registry, Dallas, TX.

5:15 PM (102) Does the Indication for Retransplantation Following Primary Heart Transplant in Childhood Impact Outcomes? An Analysis from the International Society of Heart and Lung Transplantation Registry;
J. Conway¹, C. Manhiot¹, R. Kirk², B. W. McCrindle², L. B. Edwards³, A. I. Dipchand², J. Stollery Children’s Hospital, Edmonton, AB, Canada, ²The Labatt Family Heart Center, The Hospital for Sick Children, Toronto, ON, Canada, ³Institute of Transplant, Freeman Hospital, Newcastle upon Tyne, United Kingdom, ⁴International Society of Heart and Lung Transplant, Addison, TX.
Quality of Life, Ethics, Policy and the Economics of MCS and Thoracic Transplantation (Harbor GHI)

**CHAIRS:** Lianne G. Singer MD, FRCPC and Fabienne Dobbels, MSc, PhD
(NHSAH. PEEQ)

**4:00 PM (103) The Impact of Primary Caregivers on Long-term Outcomes after Lung Transplantation:**

**4:15 PM (104) Cost Effectiveness of Routine Surveillance Endomyocardial Biopsy Beyond 12 Months Post Heart Transplantation:**
B. C. Lampert, J. J. Teuteberg, M. A. Shullo, J. Holtz, K. Smith. Division of Cardiovascular Medicine, The Ohio State University Wexner Medical Center, Columbus, OH, 1Heart and Vascular Institute, University of Pittsburgh, Pittsburgh, PA, 2Division of General Internal Medicine, University of Pittsburgh, Pittsburgh, PA.

**4:30 PM (105) Single Lung Transplantation in the United States: What Happens To the Other Lung?**

**4:45 PM (106) Development and Validation of a Lung Transplant-Specific Disability Questionnaire:**

**5:00 PM (107) Resource and Cost Evaluation of a Destination Therapy Ventricular Assist Device Program:**

**5:15 PM (108) Enhancing National Organ Donations by Prioritizing Registered Donors During Organ Allocation:**
J. Lavee, T. Ashkenazi, A. Stoler. 1Leviev Heart Center, Sheba Medical Center, Ramat Gan, Israel, 2Israel National Transplant Center, Israel Ministry of Health, Tel Aviv, Israel, 3Department of Economics, DePaul University, Chicago, IL.
Heart Transplantation and Mechanical Circulatory Support in Latin America (Seaport H)

CHAIRS: Bernarda Antonieta Cedano Ramirez, MD, Heather J. Ross, MD, MHSc, FRCP, Josef Stehlik, MD, MPH and Adriana Torres Navas, MD

(HF, HTX, MCS)

SESSION SUMMARY: This session will review the present state, achievements, challenges and opportunities of heart transplant and MCS programs across Latin America.

4:00 PM Opening Remarks
Lori J. West, MD, DPhil, University of Alberta, Edmonton, AB, Canada

4:05 PM Heart Transplant in Latin America: Challenges to Overcome (Brazil / Peru)
Juan C. Mejia, MD, Hospital De Messejana, Fortaleza, Brazil

4:15 PM Heart Transplant in Cardiomyopathy Due to Chagas Disease
Fernando Bacal, MD, PhD, University of Sao Paolo, Sao Paolo, Brazil

4:25 PM Heart Procurement. Measures to Optimize Results
Oscar Alejandro Ortega Duran, MD, Centro Medico Zambrano-Hellion, San Pedro Garza Garcia, Mexico

4:35 PM Management of Recipients in Cardiogenic Shock
Mauricio Villavicencio, MD, Instituto Nacional del Torax, Santiago, Chile

4:45 PM Long Term Results After Heart Transplant
Roberto R. Favaloro, MD, Favaloro Foundation University Hospital, Buenos Aires, Argentina

4:55 PM MCS as BTT in Latin America
Alexandre S. Colafranceschi, MD, Procardiaco Hospital, Rio de Janeiro, Brazil

5:05 PM Panel Discussion
MINI ORAL SESSION 1

Pushing the Boundaries in Lung Donation (Grand Hall A)

**CHAIRS:** David P. Mason, MD and Peter MacDonald, MD, PhD

**(LTX, DMD, BSTR)**

**5:30 PM (109) If I Had a Million Lungs: Impact of Uncontrolled Donation After Cardiac Death Donors (uDCDDs) on the Number of Potential Lung Donors in the U.S.:**
T. M. Egan¹, S. Gazda¹, P. Stewart². ¹Surgery, University of North Carolina School of Medicine, Chapel Hill, NC, ²Biostatistics, Gillings Global School of Public Health, University of North Carolina, Chapel Hill, NC.

**5:35 PM (110) Evaluation of Human Lungs from Uncontrolled Donation After Cardiac Death Donors (uDCDDs) with Ex-Vivo Lung Perfusion (EVLP):**
T. M. Egan¹, J. Blackwell¹, L. Forrest³, S. Gazda¹, J. J. Requard III³, B. Haithcock¹, K. Birchard¹, P. Stewart¹, S. Randell¹, A. Venkataraman¹, S. Beamer¹, S. Reddy¹, B. Myers¹, M. Bachman¹, N. Casey¹, D. Niedfeldt¹. ¹Surgery, University of North Carolina School of Medicine, Chapel Hill, NC, ²Lung Banks of America, Chapel Hill, NC, ³Radiology, University of North Carolina School of Medicine, Chapel Hill, NC, ⁴Biostatistics, University of North Carolina Gillings School of Global Public Health, Chapel Hill, NC, ⁵Medicine and UNC CF Center, University of North Carolina School of Medicine, Chapel Hill, NC, ⁶Surgery, Duke University Medical Center, Durham, NC, ⁷Wake County Emergency Medical Services, Raleigh, NC, ⁸Carolina Donor Services, Durham, NC.

**5:40 PM (111) Primary Graft Dysfunction Is Related To Extravascular Lung Water During Ex-Vivo Lung Perfusion:**
G. Trebbia¹, E. Sage², M. Leguen², E. Waltersperger², A. Chapelier², F. Parquin², M. Stern³, M. Fischler³, T. Pham³, C. Cerf¹. ¹Intensive Care, Hôpital FOCH, Suresnes, France, ²Thoracic Surgery, Hôpital FOCH, Suresnes, France, ³Pulmonary Medicine, Hôpital FOCH, Suresnes, France, ⁴Anesthesiology, Hôpital FOCH, Suresnes, France, ⁵Surgery, Hôpital FOCH, Suresnes, France, ⁶Statistical Analysis Unit, Hôpital FOCH, Suresnes, France.

**5:45 PM (112) An Extended Cold Ischemic Period After Normothermic Ex-Vivo Lung Perfusion Does Not Impair Lung Function in a Pig Lung Transplant Model:**

**5:50 PM (113) Optimal Oxygenation in Lung Graft Circulation during Ex-Vivo Lung Perfusion:**
K. Noda, N. Shigemura, Y. Tanaka, Y. Saito, J. K. Bham, J. D'Cunha, C. A. Bermudez. Department of Cardiothoracic Surgery, University of Pittsburgh Medical Center, Pittsburgh, PA.

**5:55 PM (114) Protective Effect of -2 Adrenoreceptor Agonist Inhalation During Ex-Vivo Lung Perfusion:**
6:00 PM  The Effects of Hydrogen Inhalation on Non-Beating Heart Donor Lung During Ex-Vivo Lung Perfusion;  S. Haam, H. Paik, M. Park, J. Song. Yonsei University, Gangnam Severance Hospital, Seoul, Korea, Republic of.

6:05 PM  The Role of the Complement System in Pulmonary Dysfunction Among Traumatic Brain Injured Donors;  D. J. Weber, A. S. Gracon, M. S. Ripsch, P. H. Pandya, Y. Wang, G. E. Sandusky, F. A. White, D. S. Wilkes. Surgery, Indiana University, Indianapolis, IN, Anesthesia, Indiana University, Indianapolis, IN, Medicine, Indiana University, Indianapolis, IN, Alexion Pharmaceuticals, Cheshire, CT, Pathology, Indiana University, Indianapolis, IN.


6:20 PM  Outcomes of Lung Transplant Recipients of Hepatitis B core Antibody Positive Donors;  H. K. Rokadia, C. Koval, S. Mistak, O. Akindipe, P. Garcha, C. Lane, W. Tsuang, M. Budev. Cleveland Clinic, Cleveland, OH.


5:30 PM – 6:30 PM  MINI ORAL SESSION 2

Heart Failure and Pulmonary Hypertension: The Tale of Two Ventricles (Seaport H)

CHAIRS:  Sharon Hunt, MD and David Brad Dyke, MD (HF, PH, HTX)

5:30 PM  Low Cardiac Output Stimulates Vasopressin Release in Patients with Stage D Heart Failure - Its Relevance to Poor Prognosis and Reversal by Surgical Treatment;  T. Imamura, K. Kinugawa, H. Hatano, H. Muraoka, T. Fujino, T. Inaba, H. Maki, O. Kinoshita, K. Nawata, S. Kyo, M. Ono. Department of Cardiology, Graduate School of Medicine, University of Tokyo, Tokyo, Japan, Department of Therapeutic Strategy for Heart Failure, Graduate School of Medicine, University of Tokyo, Tokyo, Japan, Department of Thoracic Surgery, Graduate School of Medicine, University of Tokyo, Tokyo, Japan.
The Risk Associated With Renal Dysfunction in Chronic Heart Failure Is Restricted Primarily To Patients With Neurohormonal Activation; S. J. Cheng, M. A. Brisco, A. J. Kula, O. Laur, W. H. Wilson Tang, J. M. Testani. 1Yale University School of Medicine, New Haven, CT, 2Medicine, Medical University of South Carolina, Charleston, SC, 3Cardiovascular Medicine, Cleveland Clinic, Cleveland, OH.

Outcomes After Heart Transplantation for Amyloid Cardiomyopathy in the Modern Era; M. Davis, P. Kale, R. M. Witteles. 1Cardiovascular Medicine, Stanford University School of Medicine, Stanford, CA, 2Heart Transplant, Kaiser Permanente Northern California, Santa Clara, CA.

Pre-transplant Chemotherapy Does Not Affect Cardiac Transplant Survival in Light-Chain Amyloid Patients; N. Sarswat, E. Niehaus, R. S. Tabtabai, J. R. Stone, L. Gilstrap, M. Maurer, R. Witteles, J. D. Estep, D. Baran, M. J. Zucker, F. Guiseppe, D. C. Seldin, M. J. Semigran. 1Cardiology, Massachusetts General Hospital, Boston, MA, 2Pathology, Massachusetts General Hospital, Boston, MA, 3Cardiology, Brigham and Womens Hospital, Boston, MA, 4Cardiology, Columbia University Medical Center, NYC, NY, 5Cardiology, Stanford Hospital, Stanford, CA, 6Cardiology, Houston Methodist Hospital, Houston, TX, 7Cardiology, Newark Beth Israel Medical Center, Newark, NJ, 8Cardiology, Newark Beth Israel Medical Center, Newark, CA, 9Cardiology, University of Padua, Padua, Italy, 10Hematology, Boston University Medical Center, Boston, MA.

Reduced Survival in Lambda Predominant Cardiac AL Amyloidosis Patients Awaiting Heart Transplant; S. Tabtabai, E. Niehaus, N. Sarswat, J. R. Stone, L. Gilstrap, M. Maurer, R. Witteles, J. D. Estep, D. Baran, M. J. Zucker, G. Feltrin, D. Seldin, M. J. Semigran. 1Cardiology, Massachusetts General Hospital, Boston, MA, 2Cardiology, Brigham and Women’s Hospital, Boston, MA, 3Cardiology, Columbia University Medical Center, New York City, NY, 4Cardiology, Stanford University Medical Center, Stanford, CA, 5Cardiology, Houston Methodist Hospital, Houston, TX, 6Cardiology, Newark Beth Israel Medical Center, Newark, NJ, 7Cardiology, University of Padova, Padova, Italy, 8Cardiology, Boston University Medical Center, Boston, MA.

Predicting Survival in Heart Failure Patients With an Implantable Cardioverter Defibrillator: The Heart Failure Meta-Score; A. C. Alba, S. Walter, G. Guyatt, H. Ross. 1University Health Network, Toronto, ON, Canada, 2McMaster University, Hamilton, ON, Canada.

Brachial Vein Right Heart Access: A Comparative Analysis of >1100 Cases; N. Harwani, M. Alvarez, E. Chukwu, V. Thohan. 1Medicine/Cardiology, Wake Forest University School of Medicine, Winston Salem, NC, 2Cardiovascular Services/Advanced Cardiac Care/Transplant/VAD Programs, Aurora St Luke Medical Center, Milwaukee, WI.

Adverse Effects of Interstitial Pulmonary Edema on Pulmonary Hemodynamics and Right Heart Function in Heart Failure; V. Melenovsky, S. Hwang, B. A. Borlaug. 1Department of Cardiology, Institute of Clinical and Experimental Medicine – IKEM, Prague, Czech Republic, 2Department of Cardiovascular Diseases, Mayo Clinic, Rochester, MN.

6:15 PM (130) Long-term Outcome in Acute Vasodilator Responsive Connective Tissue Disease-Associated Pulmonary Arterial Hypertension; E. Brittain,1 S. Halliday,2 M. Pugh,2 A. Hemnes,2 J. Robbins.2 1Cardiovascular Medicine, Vanderbilt University Medical Center, Nashville, TN, 2Vanderbilt University Medical Center, Nashville, TN.


6:25 PM (132) Muscularization of Pulmonary Arteries Is Reduced in Female Athymic Rats Exposed to Vascular Endothelial Growth Factor Receptor (VEGF-R) Blockade; J. Guihaire1, E. Fadel2, F. Haddad1, T. Deuse1, H. Reichenspurner1, R. C. Robbins1, S. Schrepfer1. 1Transplant and Stem Cell Immunobiology Lab, University Heart Center Hamburg, Hamburg, Germany, 2Thoracic and Vascular Surgery and Heart-Lung Transplantation, Marie Lannelongue Hospital, University of Paris Sud, Le Plessis Robinson, France, 3Cardiothoracic Surgery, Stanford University, Palo Alto, CA.

5:30 PM – 6:30 PM MINI ORAL SESSION 3

Choosing the Right Patient for Mechanical Assistance or Transplant (Grand Hall B)

CHAIRS: Stephen H. McKellar, MD and Stavros G. Drakos, MD, PhD (MCS, HTX, HF)

5:30 PM (133) Comparison of Heart Replacement Therapy in Patients Over 65 Years Old; R. Sorabella1, H. Takayama1, S. DeRoo1, H. Yerebakan1, S. Ikeda1, E. Weiss1, J. Yang1, K. Takeda1, I. George1, M. Yuzefpolskaya2, N. Uriel1, P. Colombo1, U. Jorde2, D. Mancini2, Y. Naka1. 1Cardiothoracic Surgery, Columbia University College of Physicians and Surgeons, New York, NY, 2Cardiology, Columbia University College of Physicians and Surgeons, New York, NY.

5:35 PM (134) Reduced long-term outcomes after orthotopic Heart transplantation in Septuagenarians; H. Yerebakan1, R. Sorabella1, M. Najjar1, E. Castillero1, V. Choi1, U. P. Jorde2, M. A. Farr1, D. M. Mancini2, Y. Naka1, M. S. Maurer2, P. Schulze1, H. Takayama1, I. George1. 1Department of Surgery, Columbia University Medical Center, New York, NY, 2Department of Medicine, Columbia University Medical Center, New York, NY.

Comparison of Early Versus Delayed Left Ventricular Assist Device Implantation in Patients Bridged to Heart Transplantation; P. Schulte, S. Kitada, Z. Jin, K. Clerkin, S. Homma, D. M. Mancini. Department of Medicine, Division of Cardiology, Columbia University Medical Center, New York, NY.

Preoperative Risk Factors for Early Mortality in Patients Bridged to Transplant with a Continuous Flow Left Ventricular Assist Device; A. H. Healy1, J. Stelhik2, L. B. Edwards3, S. H. McKellar4, S. G. Drakos2, C. H. Selzman1. 1Surgery, University of Utah, Salt Lake City, UT, 2Medicine, University of Utah, Salt Lake City, UT, 3United Network for Organ Sharing, Richmond, VA.


Comparison of Survival between Pediatric and Adult Patients after Bi ventricular Assist Device Implantation: Analysis of the UNOS Registry; E. C. DePasquale, R. P. Vivo, A. Nsair, M. Cadeiras, D. Cruz, R. Ardehali, A. S. Baas, M. C. Deng, G. C. Fonarow, L. C. Reardon, A. Ardehali. Cardiology, University of California Los Angeles, Los Angeles, CA.


Predicting Pre-operative Right Heart Failure, Post-implant Survival and Timing of Mechanical Ventricular Assistance; M. Harb1, R. Lui2, D. Robson2, A. Jabbour1, A. Kotthar2, A. Keogh2, E. Granger1, P. Spratt1, P. S. Macdonald2, P. Jans2, C. S. Hayward2, K. Dhillon2. 1St Vincent’s Hospital Clinical School, University of New South Wales, Sydney, Australia, 2Heart & Lung Transplant Unit, St Vincent’s Health Network, Sydney, Australia.


Mechanical Circulatory Support for Failing Systemic Right Ventricle Using Left Ventricular Assist Device – An Option To Decide and Bridge?: E. Peng1, M. Griselli1, J. O’Sullivan1, D. Crossland1, M. Chaudhari1, N. Wrightson1, T. Butt1, C. Roysam1, G. Parry1, G. A. MacGowan1, S. Schueler1, A. Hasan1. 1Cardiopulmonary Transplant, Freeman
Hospital, Newcastle Upon Tyne, United Kingdom, 2Cardiothoracic Anaesthesia, Freeman Hospital, Newcastle Upon Tyne, United Kingdom.


5:30 PM – 6:30 PM
MINI ORAL SESSION 4
Mechanical Circulatory Support Rapid Science Session (Grand Hall C)

CHAIRS: Francis D. Pagani, MD, PhD and Stephen C. Clark, MD (MCS, BSTR)

5:30 PM (145) Exercise Capacity in Continuous Flow Ventricular Assist Devices Patients: Changes Within the First Two Years of Pump Support; F. Moscato1, E. Xhelili1, J. Riebandt2, D. Zimpfer2, H. Schima3, C. Marko4. 1Center for Med. Physics and Biomed. Engineering – Ludwig Boltzmann Cluster for Cardiovasc. Research, Medical University of Vienna, Vienna, Austria, 2Department of Cardiac Surgery, Medical University of Vienna, Vienna, Austria, 3Center for Med. Phys. & Biomed. Eng. — L. B. Cluster for Cardiovasc. Res. – Dept of Cardiac Surgery, Medical University of Vienna, Vienna, Austria, 4Rehabilitation Clinic Felbring, Muthmannsdorf, Austria.

5:35 PM (146) Angiotensin-Converting Enzyme Inhibitors (ACEIs) or Angiotensin- Receptor Blockers (ARBs) during CF-LVAD Support Are Associated with Sustained Improvement in Renal Function; O. Saeed1, R. Jermyn1, S. Patel1, J. Shin1, D. D’Alessandro2, D. J. Goldstein3, R. Zolty1. 1Medicine, Montefiore Medical Center, Albert Einstein College of Medicine, Bronx, NY, 2Cardiothoracic and Vascular Surgery, Montefiore Medical Center, Albert Einstein College of Medicine, Bronx, NY.

5:40 PM (147) The Utility of Pulmonary Function Tests in Predicting Pulmonary Outcomes Following Destination Therapy Left Ventricular Assist Device Placement; M. A. Schechter1, A. W. Castleberry1, M. Kuchibhatla2, C. B. Patel3, L. J. Blue4, J. G. Rogers1, M. F. Berry1, C. A. Milano1. 1Surgery, Duke University Medical Center, Durham, NC, 2Biostatistics & Bioinformatics, Duke University Medical Center, Durham, NC, 3Cardiovascular Division, University of Minnesota, Minneapolis, MN, 4Medical Devices Center, University of Minnesota, Minneapolis, MN.

5:45 PM (148) Validation of Peripheral Arterial Tonometry Technique as Surrogate for Central Aortic Pressures; A. Singal1, A. Hamel1, M. Oura2, S. Hozayan3, R. John1, P. Eckman1. 1Cardiovascular Division, University of Minnesota, Minneapolis, MN, 2Medical Devices Center, University of Minnesota, Minneapolis, MN, 3Cardiovascular Division, St Vincent’s Medical Center, Bridgport, CT.
5:50 PM (149) Second Report of Japanese registry for Mechanically Assisted Circulatory Support (J-MACS);
T. Nakatani, K. Sase, H. Oshiyama. 1Transplantation, National Cerebral and Cardiovascular Center, Osaka, Japan, 2Clinical Pharmacology, Juntendo University, Tokyo, Japan, 3Japan Medical Devices Manufacturers Association, Tokyo, Japan,

5:55 PM (150) Infusion of Nesiritide after Implantation of the Total Artificial Heart Is Associated with Decreased Need for Kidney Transplantation;
K. B. Shah, A. V. Kalya, M. T. Hassanain, D. G. Tang, F. A. Arabia, V. Kasirajan. 1Virginia Commonwealth University, Richmond, VA, 2Mayo Clinic, Scottsdale, AZ, 3Cedars-Sinai, Los Angeles, CA,

6:00 PM (151) Impella 5.0 through an Axillary Access Is a Promising Approach to Improve Outcomes in Decompensated Heart Failure Patients to Receive Long-term Mechanical Circulatory Assistance;
K. M. Doersch, C. W. Tong, B. Sareyupoglu. 1Surgery, Scott&White Temple Clinic, Temple, TX, 2Cardiology, Scott&White Temple Clinic, Temple, TX,

6:05 PM (152) Low-Density Lipoprotein, High-Density Lipoprotein and Triglyceride Levels all Increase During Continuous-Flow Left Ventricular Assist Device Support;
A. R. Vest, S. M. Mistak, M. M. Mountis, J. B. Young. Heart and Vascular Institute, Cleveland Clinic, Cleveland, OH,

6:10 PM (153) Persistent Hyperbilirubinemia Following LVAD Implantation Predicts Postoperative Multisystem Organ Failure and Mortality;
K. J. Lavine, J. Vade, S. Larue, M. Nassif, D. Raymer, A. Tibrewala, S. Prasad, S. Silvestry. 1Cardiology, Washington University School of Medicine, St Louis, MO, 2Cardiac Surgery, Washington University School of Medicine, St Louis, MO,

6:15 PM (154) Systemic Inflammation in End-Stage Heart Failure Patients Undergoing Different Axial-Flow Left Ventricular Assist Devices;

6:20 PM (155) Stabilin-1: A Possible Functional Biomarker for Pro-Fibrotic Alternative Macrophage Activation in Dilatative Cardiomyopathy Patients With Left Ventricular Assist Device Implantation;
K. Wassilew, E. Potapov, C. Schnuttermaier, A. Gratchev, R. Hetzer, J. Kzhyshtikowska. 1Cardiac Pathology, Deutsches Herzcentrum Berlin, Berlin, Germany, 2Cardiothoracic and Vascular Surgery, Deutsches Herzcentrum Berlin, Berlin, Germany, 3Innate Immunity and Tolerance, Institute of Transfusion Medicine and Immunology, Medical Faculty Mannheim, Heidelberg University, Mannheim, Germany,

6:25 PM (156) Interstitial Fibrosis of the Lungs and the Heart in the Goat Following Prolonged VA-ECMO;
T. Mizuno, T. Tsukiyama, Y. Takewa, E. Tatsushi. Dept. of Artificial Organs, National Cerebral and Cardiovascular Center Institute, Suita, Japan.
Heart Transplant: Candidate Selection and Improving Outcomes (Grand Hall D)

CHAIRS: Elina Minami, MD and Manfred Hummel, MD, PhD (HTX)

5:30 PM (157) The Role of Donor Age and Gender on Survival after Heart Transplantation;
D. J. Weber1, P. Didolkar1, A. Gracon1, Y. Hellman1, M. A. Hadi2, A. Malik2, M. Caccamo3, I. Gradus-Pizlo4, T. Wozniak5, J. Wang1, Z. A. Hashmi1. 1Cardiothoracic Surgery, Indiana University Health, Indianapolis, IN, 2Cardiology, Indiana University Health, Indianapolis, IN.

5:35 PM (158) Survival Results in Patients Aged of 60 Years and Older in France;
C. Cantrelle1, C. Legeai1, O. Huot1, N. Strang1, P. Leprince1, E. Flecher1, A. Sirinelli1, R. Dorent1. 1French Transplant Teams1. 1Medical & Scientific, Agence de la Biomedecine, La Plaine Saint Denis, France, 2Service de Chirurgie Thoracique and Cardiovasculaire, Groupe Hospitalier Pitié Salpêtrière, Paris, France.

5:40 PM (159) Comparable Mortality and Morbidity of Orthotopic Heart Transplantation for Patients Younger and Older Than 70 Years;

5:45 PM (160) Outcomes of Patients Designated Bridge to Candidacy (BTC) at Time of LVAD With and Without Psychosocial Risks Factors: Implications for CMS Coverage;
V. B. Cruz1, R. Steffen2, K. Hoercher3, M. Mountis4, S. Lee4, E. Soltesz5, R. C. Starling6, N. Moazami7. 1Lerner College of Medicine, Cleveland Clinic, Cleveland, OH, 2Heart and Vascular Institute, Cleveland Clinic, Cleveland, OH, 3Center for Heart Failure, Heart and Vascular Institute, Cleveland Clinic, Cleveland, OH, 4Section of Heart Failure and Cardiac Transplantation, Department of Cardiovascular Medicine, Cleveland Clinic, Cleveland, OH, 5Department of Thoracic and Cardiovascular Surgery, Cleveland Clinic, Cleveland, OH, 6Medical Director, Center for Heart Failure, Heart & Vascular Institute, Cleveland Clinic, Cleveland, OH, 7Surgical Director, Center for Heart Failure, Cardiac Transplantation and MCS, Cleveland Clinic, Cleveland, OH.

5:50 PM (161) Heart Transplantation for Myocarditis: Outcomes and Survival in a National Cohort;
O. K. Jawitz1, P. Bonde2. 1Yale School of Medicine, New Haven, CT, 2Section of Cardiovascular Medicine, Yale School of Medicine, New Haven, CT.

5:55 PM (162) Low Dose Prothrombin Complex Concentrate in Addition to Vitamin K for Warfarin Reversal Prior to Heart Transplantation;
J. Fink1, M. Militello1, M. Wanek1, A. Kantorovich1, B. Silver1, S. Sale1, N. Moazami1. 1Pharmacy, Cleveland Clinic, Cleveland, OH, 2Hematology, Cleveland Clinic, Cleveland, OH, 3Cardiothoracic Anesthesia, Cleveland Clinic, Cleveland, OH, 4Cardiothoracic Surgery, Cleveland Clinic, Cleveland, OH.
6:00 PM (163) Heart (HT) Versus Heart-Kidney Transplantation (H+K) in Chronic Kidney Disease (CKD) – Should Our Decisions Be Better Informed? ISHLT Registry Analysis;
E. C. DePasquale¹, L. Lund², L. Edwards³, M. C. Deng⁴, J. Stehlik⁴.
¹Division of Cardiology, UCLA, Los Angeles, CA, ²Karolinska University Hospital, Stockholm, Sweden, ³ISHLT Transplant Registry, Richmond, VA, ⁴University of Utah, Salt Lake City, UT.

6:05 PM (164) Renal Allograft Outcome after Simultaneous Heart and Kidney Transplantation;
A. Grupper, A. Grupper, M. A. Hathcock, F. G. Cosio, B. S. Edwards, S. S. Kushwaha. Transplantation Center, Mayo Clinic, Rochester, MN.

6:10 PM (165) Cardiac Retransplantation: How Far Have We Come?;
E. C. DePasquale¹, R. K. Cheng², A. Nsair¹, A. Baas¹, M. Cadeiras¹, D. Cruz², T. Khuu¹, M. Deng¹, H. Laks¹, A. Ardehali¹. ¹UCLA, Los Angeles, CA, ²University of Washington, Seattle, Seattle, WA.

6:15 PM (166) Restrictive Cardiomyopathy and Risk of Mortality on Waiting List for Heart Transplantation;
E. M. Hsich¹, R. C. Starling¹, E. Blackstone¹, J. Rogers², D. O. Taylor¹, J. D. Schold¹. ¹Cleveland Clinic, Cleveland, OH, ²Duke University School of Medicine and the Duke Clinical Research Institute, Durham, NC.

6:20 PM (167) Preconditioning of Naive and Activated Endothelial Cells With Induction Agents Modulates Endothelial Cell Function: Non-Depleting Vs. Depleting Agents;
I. Werner, N. V. Bogert, U. A. Stock, A. Moritz, A. Beiras-Fernandez. Department of Thoracic and Cardiovascular Surgery, University Hospital Frankfurt, Goethe University, Frankfurt am Main, Germany.

6:25 PM (168) Acute Rejection and Graft Failure Drive Worse Outcomes Among Peripartum Cardiomyopathy (PPCM) Patients Undergoing Heart Transplant (HT) in the US: A UNOS Analysis;
D. Jacoby¹, O. Jawitz², L. Bellumkonda³, P. Bonde¹. ¹Internal Medicine, Yale School of Medicine, New Haven, CT, ²Yale School of Medicine, New Haven, CT, ³Surgery, Yale School of Medicine, New Haven, CT.
MINI ORAL SESSION 6

Lung Transplant Monitoring and Immunosuppression
(Harbor GHI)

CHAIRS: David Weill, MD and Denis Hadjiliadis, MD
(LTX, PHARM)

5:30 PM (169) **Switch From Twice-Daily Tacrolimus (Prograf) To Once-Daily Prolonged-Release Tacrolimus (Advagraf) in Lung Transplantation**;

5:35 PM (170) **Erratic Tacrolimus Blood Levels are Associated with Bronchiolitis Obliterans Syndrome (BOS) and Death after Lung Transplantation**;
H. M. Gallagher1, G. Sarwar1, T. Tse1, T. J. Sladden2, S. T. Yerkovich1, P. M. Hopkins1, D. C. Chambers1, 1Queensland Lung Transplant Service, The Prince Charles Hospital, Brisbane, Australia, 2School of Medicine, The University of Queensland, Brisbane, Australia.

5:40 PM (171) **Rapid and Combined Measurement of Cyclosporin A, Tacrolimus, Sirolimus and Everolimus in Whole Blood and Dried Blood Spot With LC-MSMS**;
A. C. Egas1, E. M. van Maarseveen1, J. M. Kwakkel-van Erp2, M. J. Wessels-Bakker2, M. E. Janssen2, B. Luijk1, E. A. van de Graaf1. 1Clinical Pharmacy, University Medical Center Utrecht, Utrecht, Netherlands, 2Respiratory Medicine, University Medical Center Utrecht, Utrecht, Netherlands, 3Division of Heart and Lung, University Medical Center Utrecht, Utrecht, Netherlands.

5:45 PM (172) **A Randomized, Double-Blind, Placebo-Controlled, Multicenter, Study of Rabbit ATG in the Prophylaxis of Acute Rejection in Lung Transplantation**;
G. I. Snell1, G. P. Westall1, B. J. Levvey1, P. Jaksch2, S. Keshavjee3, C. W. Hoopes1, V. Ahyar1, A. Mehta1, E. P. Trulock1. 1Lung Transplant Service, Allergy, Immunology and Respiratory Medicine, Alfred Hospital, Melbourne, Australia, 2University Hospital, Vienna, Austria, 3Toronto General Hospital, Toronto, ON, Canada, 4University of California, San Francisco, CA, 5Hospital of the University of Pennsylvania, Philadelphia, PA, 6Cleveland Clinic, Cleveland, OH, 7Washington University, St Louis, MO.

5:50 PM (173) **Supplementation of Hypogammaglobulinemia in Lung Transplant Recipients Leads to Favorable Outcomes**;
W. M. Tsuang1, A. Finlen-Copeland2, M. Budev1, C. Pieper2, J. Reynolds2, S. M. Palmer2. 1Cleveland Clinic, Cleveland, OH, 2Duke University Medical Center, Durham, NC.

5:55 PM (174) **Level and Kinetics of Plasma Torque Teno Virus DNA After Lung Transplantation as a Marker To Guide Immunosuppressive Therapy**;
I. Görzer1, P. Jaksch2, M. Haloschan2, R. Strassl2, W. Klepetko2, E. Puchhammer-Stöckl1. 1Dept Virology, Medical University Vienna, Vienna, Austria, 2Dept Thoracic Surgery, Medical University Vienna, Vienna, Austria, 3Dept of Virology, Medical University Vienna, Vienna, Austria.
6:00 PM (175) A Novel Diagnostic Assay for Pulmonary Antibody Mediated Rejection – Detection of Circulating Donor Tissue-Specific B Cells; S. Yerkovich1, M. Tan1, C. Smith2, L. Samson1, A. Fiene1, H. Gallagher1, P. Hopkins1, D. Chambers1. 1Qld Lung Transplant Service, The Prince Charles Hospital, Brisbane, Australia, 2Tumour Immunology Laboratory, QIMR Berghofer Medical Research Institute, Brisbane, Australia.

6:05 PM (176) Probe-based Confocal Laser Endomicroscopy (pCLE) Can Identify Perivascular Cellular Infiltration in Patients with Acute Cellular Rejection; C. A. Keller, K. E. Hurst, K. D. Petrine, H. A. David-Robinson. Transplant Department, Mayo Clinic, Jacksonville, FL.

6:10 PM (177) Phenotypes of Chronic Lung Allograft Dysfunction (CLAD): A Multilevel Diagnostic Approach; A. Koutsokera1, J. D. Aubert2, C. Benden3, P. M. Soccal4, C. Pison5, L. P. Nicod6. 1Respiratory Medicine Department, Centre Hospitalier Universitaire Vaudois, CHUV, Lausanne, Switzerland, 2Respiratory Medicine Department, Centre Hospitalier Universitaire Vaudois, CHUV and Swiss Transplant Cohort Study (STCS), Lausanne, Switzerland, 3Division of Pulmonary Medicine, University Hospital Zurich, Zurich, Switzerland, 4Respiratory Medicine Department, University Hospital of Geneva, Geneva, Switzerland, 5Clinique Universitaire de Pneumologie, Université Joseph Fourier and French Cohort of Lung Transplantation (COLT), Grenoble, France, 6Respiratory Medicine Department, Centre Hospitalier Universitaire Vaudois, CHUV and SysCLAD (Systems Prediction of Chronic Lung Allograft Dysfunction: A European Union-funded Study, Grant Agreement No FP7.305457-2), Lausanne, Switzerland.


6:20 PM (179) Restrictive Allograft Syndrome (RAS) in Lung Transplant Recipients Carries Uncertain Additional Prognostic Significance as Compared To BOS; H. L. Schultz1, C. B. Andersen2, D. A. Steinbrüchel3, N. H. Bjar- nason1, M. Perch1, J. Carlsen1, M. Iversen1. 1Department of Cardiology, Section of Lung Transplantation, Rigshospitalet, Copenhagen, Denmark, 2Department of Pathology, Rigshospitalet, Copenhagen, Denmark, 3Department of Thoracic Surgery, Rigshospitalet, Copenhagen, Denmark.

6:25 PM (180) Extended Preservation of Lungs at Subnormothermia with a Novel Organ Storage Solution “Somah”: Salvage, Reconditioning and Functional Evaluation; A. V. Louis1, C. Hemphill1, D. Schipper1, N. Qi1, K. Stavoe1, K. Penick1, A. Ferng1, B. Smith1, H. Thatte2, Z. Khalpey1. 1Cardiothoracic Surgery, University of Arizona Medical Center, Tucson, AZ, 2Surgery, Veterans Affairs Boston Healthcare System, Harvard, West Roxbury, MA.

6:30 PM – 8:00 PM COUNCIL / COMMITTEE REPORTS TO THE BOARD OF DIRECTORS (Gaslamp A-C)
SATURDAY, APRIL 12, 2014

7:00 AM – 6:30 PM
REGISTRATION DESK OPEN (Palm Foyer)
SPEAKER READY ROOM OPEN (Balboa A-C)

7:00 AM – 8:00 AM

SUNRISE SYMPOSIUM 6

The Aortic Valve – An Open and Shut Case? (Grand Hall A)

CHAIRS: Randall Starling, MD, MPH and Ruchan Akar, MD, FRCS CTh (MCS, HF, HTX)

SESSION SUMMARY: This session will address how to run the pump – the advantages of running the pump full speed, giving maximal flow and off-loading, versus running the pump slower, letting the valve open and maintaining some pulsatility. The advantages and disadvantages of just sewing the valve over will then be discussed. This session will also touch on providing full versus partial support.

7:00 AM Full Speed Ahead – Advantages of Keeping the Aortic Valve Closed
Ivan Netuka, MD, PhD, Institute for Clinical and Experimental Medicine, Prague, Czech Republic

7:15 AM Taking It Slowly – Advantages of Letting the Aortic Valve Open
Ulrich P. Jorde, MD, Columbia University, New York, NY, USA

7:30 AM Sewing the Aortic Valve Over – Problems Solved??
Walter P. Dembitsky, MD, Sharp Memorial Hospital, San Diego, CA, USA

7:45 AM Panel Discussion

7:00 AM – 8:00 AM

SUNRISE SYMPOSIUM 7

The Effects of Prostaglandin Therapy in Pulmonary Arterial Hypertension: The Seen and Unseen Risk/Benefit Profile (Grand Hall B)

CHAIRS: Patricia Ging, BPharm MSc, Andrew J. Fisher, FRCP, PhD and Josef Stehlik, MD, MPH (PH, PHARM, HF, LF, LTX, NHSAH)

SESSION SUMMARY: Although treatments have improved symptoms, exercise tolerance, and quality of life for patients with pulmonary arterial hypertension, PAH remains a progressive, life limiting disease. The purposes of this symposium are to raise awareness of the physical (seen) and psychological (unseen) effects of IV prostaglandin, the current mainstay for treatment for PAH, culminating in a case presentation/panel discussion.
7:00 AM  IV Prostaglandin Therapy: Indications and Mechanism of Action for PAH
James C Coons, PharmD, University of Pittsburgh, Pittsburgh, PA, USA

7:10 AM  Q & A

7:15 AM  Physical Effects of PAH and IV Therapy: The “Seen” Effects
Mardi Gomberg-Maitland, MD, MSc, University of Chicago Medical Center, Chicago, IL, USA

7:25 AM  Q & A

7:30 AM  Effects of PAH and IV Therapy: The “Unseen” Effects
Rachel M Crackett, MSc, Freeman Hospital, Newcastle upon Tyne, United Kingdom

7:40 AM  Q & A

7:45 AM  Case Presentation
Corey E. Ventetuolo, MD, Rhode Island Hospital, Providence, RI, USA

7:50 AM  Panel Discussion

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7:00 AM – 8:00 AM

SUNRISE SYMPOSIUM 8

Exercise Training in Heart Transplantation (Grand Hall C)

CHAIRS: Michelle M Kittleson, MD, PhD and Nicolas Manito, MD (HF, HTX)

SESSION SUMMARY: This symposium will examine the role of structured exercise training in the post heart transplant population, including physiology and potential benefits, with a view toward providing transplant physicians with new information on the impact of exercise training on outcomes.

7:00 AM  Exercise Physiology in the Denervated Heart
Heather J Ross, MD, MHSc, FRCPC, Toronto General Hospital, Toronto, ON, Canada

7:15 AM  Q & A

7:20 AM  Immunomodulation and Metabolic Benefits of Exercise Training in Heart Transplantation
Finn Gustafsson, MD, PhD, DMSci, Rigshospitalet, Copenhagen, Denmark

7:35 AM  Q & A

7:40 AM  Benefits of Exercise Training after Heart Transplantation
Brian Jaski, MD, Sharp Memorial Hospital, San Diego, CA, USA

7:55 AM  Q & A
7:00 AM – 8:00 AM

SUNRISE SYMPOSIUM 9

CMV Infection in Lung Transplant Recipients: Are We Ready for Personalized Medicine? (Grand Hall D)

CHAIRS: Marc Schecter, MD and Martin R. Zamora, MD (ID, LTX, LF, PHARM)

SESSION SUMMARY: CMV infection continues to be a clinical challenge in select lung transplant recipients (LTRs) despite advancements in prevention and treatment strategies. Identifying LTRs at risk for recurrent viral replication and/or allograft injury is essential for adjusting antiviral therapies and improving long-term outcomes. In this session, the latest in translational bench-to-bedside approaches used to evaluate those at risk for active CMV infection and its sequelae will be discussed. By the completion of this session, attendees will be familiar with measurements of CMV-specific immunity to monitor and predict CMV outcomes in higher-risk LTRs, promising new therapies to treat emerging CMV resistance, and pro/con viewpoints for correlating CMV replication in the lung allograft and the risk of BOS.

7:00 AM  T cell Function and CMV Immune Control in High-Risk Lung Transplant Recipients
John McDyer, MD, University of Pittsburgh Medical Center, Pittsburgh, PA, USA

7:15 AM  Predicting CMV Reactivation Risk in CMV Positive Lung Transplant Recipients
Glen P Westall, MD, FRACP, Alfred Hospital, Melbourne, Australia

7:30 AM  When Resistance Strikes: Promising New Therapies
Fernanda Silveira, MD, University of Pittsburgh Medical Center, Pittsburgh, PA, USA

7:45 AM  Panel Discussion

7:00 AM – 8:00 AM

SUNRISE SYMPOSIUM 10

Exploring Interactions Between Cellular and Humoral Immunity in Cardiac Allograft Rejection (Seaport H)

CHAIRS: Patrick Bruneval, MD and Dylan Miller, MD (BSTR, PATH)

SESSION SUMMARY: Events and mechanisms in T-cell mediated immunity are distinct from those of B-cell mediated immunity, but the two are not mutually exclusive. This session deals with interactions between the two arms of the immune system at the basic science level (using NK cells and innate immunity as one possible contributor) and reviews what is available with respect to “mixed rejection” in terms of outcomes and management.

7:00 AM  Innate Immunity and its Influence on Cellular and Antibody Mediated Rejection
Esme Dijke, PhD, University of Alberta, Edmonton, AB, Canada

7:15 AM  Q & A

7:20 AM  The Gray Zone: Overlapping Histologic Features Between Cellular and Antibody Mediated Rejection
Annalisa Angelini, MD, University of Padua, Padua, Italy
7:35 AM  Q & A

7:40 AM  Outcomes and Considerations in the Management of Mixed Rejection
A.G. Kfoury, MD, Intermountain Heart Institute (UTAH Cardiac Transplant Program), Salt Lake City, UT, USA

7:55 AM  Q & A

8:00 AM – 6:00 PM
PRESS OFFICE OPEN (Show Office 7)

8:00 AM – 10:00 AM

PLENARY SESSION

(Seaport)

CHAIRS:  Stuart Jamieson, MD, FRCS, FACS and Mandep R. Mehra, MD, FACC, FACP

8:00 AM  INVITED LECTURE: Trimming Heart Transplantation In The VAD Era
Lynne W. Stevenson, MD, Brigham & Women’s Hospital, Boston, MA, USA

8:20 AM  (308) FEATURED ABSTRACT: The Proceed II International Heart Transplant Trial with the Organ Care System (OCS™) Technology
A. Ardehali1, F. Esmailian2, M. Deng3, E. Soltesz4, E. Hsich5, Y. Naka6, D. Mancini7, M. Camacho8, D. Baran9, M. Zucker10, P. Leprince11, J. Madsen12, S. Tsui13, A. Simon14, U. Livi15, G. Guzzi15, J. Kobashigawa16. 1Division of Cardiothoracic Surgery, UCLA Medical Center, Los Angeles, CA, 2Heart Transplantation, Cedars-Sinai Heart Institute, Los Angeles, CA, 3Advanced Heart Failure, Heart Transplant Program, UCLA Medical Center, Los Angeles, CA, 4Division of Cardiothoracic Surgery, Cleveland Clinic Foundation, Cleveland, OH, 5Heart Transplantation, Cleveland Clinic Foundation, Cleveland, OH, 6Department of Cardiac Surgery, Columbia University, New York, NY, 7Heart Failure, Heart Transplant Program, Columbia University, New York, 8Cardiac Transplantation and Mechanical Device Program, Barnabas Health Heart Center at Newark Beth Israel Medical Center, Newark, NJ, 9Heart Failure and Transplant Research, Barnabas Health Heart Center at Newark Beth Israel Medical Center, Newark, NJ, 10Heart Failure Treatment and Transplant, Barnabas Health Heart Center at Newark Beth Israel Medical Center, Newark, NJ, 11Chirurgie Thoracique et Cardiovasculaire, hospitalier Pitié-Salpêtrière, Paris, France, 12Division of Cardiothoracic Surgery, Massachusetts General Hospital, Boston, MA, 13Division of Cardiothoracic Surgery, Papworth Hospital, Cambridge, United Kingdom, 14Thoracic Transplantation and Mechanical Support, Harefield Hospital, Harefield, United Kingdom, 15Cardiac Surgery and Transplantation Unit, “Santa Maria della Misericordia” University Hospital, Udine, Italy, 16Advanced Heart Disease Section, Heart Transplant Program, Cedars-Sinai Medical Center, Los Angeles, CA

8:35 AM  INVITED LECTURE: Frontiers of DCD in Thoracic Transplantation
Thomas M. Egan, MD, MSC, University of North Carolina School of Medicine, Chapel Hill, NC, USA
(181) FEATURED ABSTRACT: The NOVEL Lung Trial One-Year Outcomes;
P. G. Sanchez1, R. D. Davis2, F. D’ovidio3, E. Cantu4, M. Weyant5, P. Camp6, B. P. Griffith1. 1Cardiac Surgery, University of Maryland, Baltimore, MD, 2Cardiac Surgery, Duke University, Durham, NC, 3Thoracic Surgery, Columbia University, New York, NY, 4Cardiac Surgery, University of Pennsylvania, Philadelphia, PA, 5Cardiothoracic Surgery, University of Colorado, Aurora, CO, 6Thoracic Surgery, Brigham and Women’s Hospital, Boston, MA.

(182) FEATURED ABSTRACT: The INSPIRE Lung International Trial Evaluating the Impact of Portable Ex-Vivo Perfusion Using the Organ Care System (OCS™) Lung Technology on Routine Lung Transplant Outcomes;
G. Warnecke1, D. Van Raemdonck2, G. Massard3, F. Rea4, M. Smith5, J. Kukreja6, F. De Robertis7, K. Dhital8, J. Garcia9, I. Wang1, M. Avsar1, I. Tudorache1, C. Köhln1, L. B. Wiegmann1, N. Santelmo1, P. Falcoz3, A. Olland3, M. Schiavon4, G. Marulli4, G. Di Gregorio5, A. Simon7, R. Hetzer1, A. Ardehali21. 1Thoracic and Cardiovascular Surgery, Hannover Medical School, Hannover, Germany, 2Thoracic Surgery, University Hospitals Leuven, Leuven, Belgium, 3Thoracic Surgery, Strasbourg University Hospital, Strasbourg, France, 4Thoracic Surgery, Hospital of University of Padova, Padova, Italy, 5Thoracic Surgery, St. Joseph’s Medical Center, Phoenix, AZ, 6Thoracic Surgery, UCSF Medical Center, San Francisco, CA, 7Thoracic and Cardiovascular Surgery, Harefield Hospital, London, United Kingdom, 8Thoracic and Cardiovascular Surgery, St. Vincent’s Hospital, Sydney, Australia, 9Thoracic Surgery, University of Alberta Medical Center, Edmonton, AB, Canada, 10Thoracic Surgery, University Hospital Puerta de Hierro, Madrid, Spain, 11Thoracic and Cardiovascular Surgery, UPMC Medical Center, Pittsburgh, PA, 12Cardiothoracic Surgery, Papworth Hospital, Cambridge, United Kingdom, 13Thoracic and Vascular Surgery, Bichat Hospital, Paris, France, 14Cardiothoracic Surgery, German Heart Institute, Berlin, Germany, 15Thoracic and Cardiovascular Surgery, Cleveland Clinic Foundation, Cleveland, OH, 16Thoracic Surgery, Hospital of University of Massachusets General Hospital, Boston, MA, 17Thoracic Surgery, Indiana University Medical Center, Indianapolis, IN, 18Medicine, University of Minnesota, Minneapolis, MN, 19Cardiothoracic Surgery, UCLA Medical Center, Los Angeles, CA.

9:25 AM INVITED LECTURE: Organ Allocation Policy and the Decision to Donate
Alvin Roth, Professor of Economics, Stanford University, Stanford, CA, USA

10:00 AM – 10:30 AM ANNUAL BUSINESS MEETING (Seaport)
COFFEE BREAK/VIEW EXHIBITS (Harbor A-F)
VIEW POSTERS (Harbor and Seaport Foyers)

10:00 AM – 4:00 PM EXHIBITS OPEN (Harbor A-F)

10:00 AM – 6:30 PM POSTERS OPEN (Harbor and Seaport Foyers)
10:30 AM – 12:00 PM

**CONCURRENT SESSION 19**

**Mechanical Circulatory Support: Optimizing Outcomes II**  
(Seaport)

**CHAIRS:** Bojan Vrtovec, MD, PhD and Peter M. Eckman, MD  
(MCS)

10:30 AM  (183) **Prior Hematological Disorders Carry a High Morbidity and Mortality in Patients Supported with Continuous Flow Left Ventricular Assist Devices;**  

10:45 AM  (184) **Regional Differences in Utilization and Outcomes of Left Ventricular Assist Devices: Insights from the INTERMACS Registry;**  
S. R. Krim1, R. P. Vivo2, P. T. Campbell1, D. C. Naftel1, J. D. Estep4, G. C. Fonarow1, H. O. Ventura1. 1Cardiology, Ochsner Heart and Vascular Institute, New Orleans, LA, 2Cardiology, UCLA Medical Center, Los Angeles, CA, 3University of Alabama at Birmingham, Birmingham, AL, 4Cardiology, The Methodist DeBakey Heart and Vascular Center, The Methodist Hospital, Houston, TX.

11:00 AM  (185) **The Impact of Recurrent Readmissions on the Cost of LVAD Therapy;**  
K. Lietz, A. Branch, M. McGrath, J. Herre. Division of Advanced Heart Failure, Sentara Norfolk General Hospital, Norfolk, VA.

11:15 AM  (186) **Long Term Analysis of RV Function in Patients After Continuous Flow Heartware® LVAD Implantation Without the Need for Peri-Operative Mechanical RV Support – Honeymoon Period or Sustainable Success?;**  
C. J. Bhagra1, S. K. Bhagra1, M. Taylor2, G. Parry1, G. MacGowan1, S. Schueler1. 1Cardiology, The Newcastle upon Tyne Hospitals NHS Foundation Trust, Newcastle upon Tyne, United Kingdom, 2Respiratory, The Newcastle upon Tyne Hospitals NHS Foundation Trust, Newcastle upon Tyne, United Kingdom, 3Cardiothoracic Surgery, The Newcastle upon Tyne Hospitals NHS Foundation Trust, Newcastle upon Tyne, United Kingdom.

11:30 AM  (187) **Development of a Novel Predictive Model for Mortality Post Continuous Flow LVAD Implant using Bayesian Networks (BN);**  
N. A. Loghmanpour1, M. K. Kanwar2, S. H. Bailey1, R. L. Benza2, J. F. Antaki1, S. Murali2. 1Department of Biomedical Engineering, Carnegie Mellon University, Pittsburgh, PA, 2Department of Cardiology, Allegheny General Hospital, Pittsburgh, PA.

11:45 AM  (188) **Initial Post Approval Performance of the Heartware LVAD as Bridge to Transplantation: An Analysis of the UNOS Database;**  
N. Uriel1, A. P. Levin1, M. Yuzefpolskaya1, A. R. Garan1, K. P. Mody1, P. C. Colombo1, H. Takayama1, Y. Naka1, U. P. Jorde1. 1Medicine, Columbia University, New York, NY, 2Surgery, Columbia University, New York, NY.
Mechanical Circulatory Support: Getting Down to the Science of VAD Support (Grand Hall A)

CHAIRS: Daniel Zimpfer, MD and Nader Moazami, MD (MCS, BSTR)

10:30 AM (189) Creation of a Surgical Fontan Animal Model and the Use of a Ventricular Assist Device to Restore Cardiac Output; G. R. Derk1, H. Laks1, R. Binwale1, S. Patel1, K. DeLaCruz2, E. Mazor2, R. Williams1, J. Valdivinos2, D. Levy1, J. Aboulhoss1, 1Ahmanson/UCLA Adult Congenital Heart Disease Center, UCLA, Los Angeles, CA, 2Cardiothoracic Surgery, UCLA, Los Angeles, CA, 3Cardiac Perfusion Services, UCLA, Los Angeles, CA, 4Anesthesiology Department, UCLA, Los Angeles, CA, 5Bioengineering Department, UCLA, Los Angeles, CA, 6Pediatric Cardiology, UCLA, Los Angeles, CA.

10:45 AM (190) Peripheral Pulse Wave Analysis Technique to Detect Aortic Valve State in Continuous-flow LVADs; A. Singal, A. Hamel, M. Larson, H. Kelner, M. Almekkawy, R. John, P. Eckman. Cardiovascular Division, University of Minnesota, Minneapolis, MN.

11:00 AM (191) Renal Injury Persists Following LVAD Despite Significant Improvement in Glomerular Filtration Rate: Preliminary Insights From Urinary Injury Biomarkers; M. A. Brisco1, V. S. Rao2, J. Koyner3, S. Chen2, O. Laur4, A. Kula5, S. E. Fedson3, V. Jeevanandam3, A. A. Mangi2, W. Tang4, S. Coca2, J. M. Testani2, 1Medicine-Cardiology, Medical University of South Carolina, Charleston, SC, 2Internal Medicine and Program of Applied Translational Research, Yale University School of Medicine, New Haven, CT, 3Internal Medicine, University of Chicago, Chicago, IL, 4Cardiology, The Cleveland Clinic, Cleveland, OH.

11:15 AM (192) Continuous-Flow Left Ventricular Assist Device Support is Associated with Aortic Valve Interstitial Cell Activation; J. W. van Rijswijk1, J. R. Martina1, N. de Jonge1, R. A. de Weger1, A. Vink1, J. Kluin1, 1Cardiothoracic Surgery, Utrecht University Medical Center, Utrecht, Netherlands, 2Cardiology, Utrecht University Medical Center, Utrecht, Netherlands, 3Pathology, Utrecht University Medical Center, Utrecht, Netherlands.

11:30 AM (193) Targeted Myocardial Gene Expression Profiling By RNA Sequencing; K. Dhar1, A. M. Moulton1, E. Rome1, F. Giot2, J. Eudy1, E. Raichlin1, J. Um2, M. Moulton2, B. D. Lowes1, 1Internal Medicine, University of Nebraska, Omaha, NE, 2Biostatistics, University of Nebraska, Omaha, NE, 3Genetics and Cellular Biology, University of Nebraska, Omaha, NE, 4Cardiothoracic Surgery, University of Nebraska, Omaha, NE.

11:45 AM (194) Chronic Inflammation in Heart Failure Patients with Mechanical Circulatory Support; L. Grosman-Rimon1, L. C. Tumiati1, M. A. McDonald1, I. Jacobs2, S. Pollock Bar-Ziv1, A. Chruscinski1, A. Ghashghai1, D. Z. Cherney1, V. Rao1, 1Cardiovascular Surgery, Toronto General Hospital, Toronto, ON, Canada, 2Faculty of Kinesiology and Physical Education, University of Toronto, Toronto, ON, Canada, 3Cardiology, Toronto General Hospital, Toronto, ON, Canada, 4Medicine, Toronto General Hospital, Toronto, ON, Canada.
10:30 AM – 12:00 PM

Adult Heart Failure: Drugs and Devices (Grand Hall B)

**CHAIRS:** Maryl R. Johnson, MD and Juliane K. Vierecke, MD (HF, PHARM, MCS)


**10:45 AM (196)** Inhaled Milrinone Plasma Level Implications in Patients with RV Dysfunction Receiving Heartmate II LVAD; I. Dumitr1, A. Burdorf2, T. Turner2, J. Um3, T. Ryan4, N. Haglund4. 1Cardiology, Memorial Regional Hospital, Hollywood, FL, 2Cardiology, UNMC, Omaha, NE, 3Cardiothoracic Surgery, UNMC, Omaha, NE, 4Cardiothoracic Surgery, UNMC, UNMC, NE, 5Cardiology, Van- derbilt University, Memphis, TN.

**11:00 AM (197)** Outcomes of Heart Transplant (HT) Recipients Bridged with BIVAD (BiVentricular Assist Device); A. Nsair, L. Reardon, M. Deng, A. Ardehali, E. C. DePasquale. UCLA, Los Angeles, CA.

**11:15 AM (198)** Percutaneous Implantation of a Novel Interatrial Shunt Device in Patients with Heart Failure and Preserved or Mildly Reduced Ejection Fraction: Initial Results of a Pilot Trial; F. Gustafsso1, F. Malek2, P. Nezil2, V. Reddy3, L. Sondergaard3, A. Walton4, D. Kaye4. 1Department of Cardiology, Rigshospitalet, Copenhagen, Denmark, 2Na Holmoe Hospital, Prague, Czech Republic, 3Mount Sinai School of Medicine, New York, NY, 4Department of Cardiology, Rigshospitalet, Copenhagen, Denmark, 5Alfred Hospital, Melbourne, Australia, 6Baker IDI Heart and Diabetes Institute, Melbourne, Australia.

**11:30 AM (199)** Extracorporeal Membrane Oxygenation as a Bridge to Recovery, Bridge to Ventricular Assist Device and Bridge to Heart Transplantation: A Retrospective Review of Data From a Single Tertiary Care Institution; S. Balasubramanvya1, F. Arabia2, A. Trento2, D. Ramzy2, D. Chang3, M. Kittleson4, L. Czer5, J. Morlocki5, J. Kobashigawa2, F. Esmailian4. 1Cardiac Surgery, Yale University School of Medicine, New Haven, CT, 2Cardiac Surgery, Cedars Sinai Medical Center, Los Angeles, CA, 3Cardiology, Cedars Sinai Medical Center, Los Angeles, CA, 4Cardiac Surgery, Cedars Sinai Medical Center, Los Angeles, CA.

**11:45 AM (200)** Immunoadsorption: A Treatment Alternative for Older Patients with 1-Autoantibody Positive Dilated Cardiomyopathy Who Are at Higher Risk for Transplantation; M. Dandel1, G. Wallukat1, A. Englert1, C. Knotha1, R. Hetzer1. 1Cardiothoracic and Vascular Surgery, Deutsches Herzzentrum Berlin, Berlin, Germany, 2Max-Delbrück-Centrum Berlin, Berlin, Germany.
10:30 AM - 12:00 PM

CONCURRENT SESSION 22

Frailty, Body Composition and Coronary Disease: Pushing the Limits of Recipient Selection (Grand Hall C)

**CHAIRS:** Jonathan P. Singer, MD, MS and Christiane Knoop, MD (LTX, NHSAH)

10:30 AM (201) *The Impact of Pre-Operative Underweight on 1-Year Mortality After Lung Transplantation:* J. P. Singer¹, E. R. Peterson², J. Golden², M. E. Snyder², B. Lim³, A. Desai⁴, J. R. Sonett², J. Kukreja², S. M. Arcasoy², P. P. Katz², F. D’Ovidio⁵, S. Hays¹, D. J. Lederer². ¹UCSF, San Francisco, CA, ²Columbia University, New York, NY.

10:45 AM (202) *Evolution of the Association Between Obesity and Survival after Adult Lung Transplantation in the Lung Allocation Score Era:* M. E. Snyder¹, E. R. Peterson¹, J. Singer², R. Shah¹, J. Golden², J. Shin², N. Wickersham², S. M. Kawut², A. Desai², P. Katz², S. Hays², J. Kukreja², J. R. Sonett², S. M. Arcasoy², F. D’Ovidio², L. B. Ware³, J. D. Christie¹, D. J. Lederer¹. ¹Medicine, Columbia University Medical Center, New York, NY, ²Medicine, UCSF, San Francisco, CA, ³Medicine, University of Pennsylvania, Philadelphia, PA, ⁴Medicine, Vanderbilt University Medical Center, Nashville, TN, ⁵Surgery, Columbia University Medical Center, New York, NY.

11:00 AM (203) *Frailty in the Lung Transplant Candidate:* D. Rozenberg¹, L. Wickerson², S. Mathur², S. Keshavjee³, L. G. Singer¹. ¹Respirology, Toronto General Hospital, Toronto, ON, Canada, ²Physical Therapy, University of Toronto, Toronto, ON, Canada, ³Division of Thoracic Surgery, Toronto General Hospital, Toronto, ON, Canada.

11:15 AM (204) *Performance Status Impacts Mortality Following Lung Transplantation:* J. C. Grimm¹, V. Valero, III¹, A. Kiliç¹, J. V. Conte¹, C. A. Merlo², P. D. Shah¹, A. Shah¹. ¹Surgery, The Johns Hopkins Medical Institution, Baltimore, MD, ²Medicine, The Johns Hopkins Medical Institution, Baltimore, MD.


A Fresh Look at Lung Allograft Dysfunction – What the Bench Is Telling Us (Grand Hall D)

**CHAIRS:** Stephan M. Ensminger, MD, DPhil and Tereza Martinu, MD (LTX, BSTR, PATH)

**10:30 AM** (207) **Humoral Allo and Auto Immunity in Human Lung Transplant Recipients:**
- O. Gjorgjimajkoska
- B. Fischer
- C. J. Taylor
- E. M. Bolton
- A. Bradley
- J. Parmar
- G. J. Pettigrew

**10:45 AM** (208) **Novel Two-Hit Hypothesis for the Development of De Novo Autoimmunity Following Lung Transplantation:**
- A. Bharat
- V. Subramaniam
- D. Kreisel
- M. Decamp
- T. Mohanakumar

**11:00 AM** (209) **IL-6 Blockage by Anti-Interleukin-6 Receptor Antibody Suppresses Plasma Cells during Development of Alloantibody Responses:**
- G. Wu
- I. Kim
- N. Chai
- S. Jordan
- A. Klein

**11:15 AM** (210) **Regulatory T Cells Attenuate Chronic Rejection by Suppressing T Helper 17 Cells Differentiation after Murine Lung Transplantation:**
- W. Zhou
- J. Liu
- Z. Zhan
- L. Li
- H. Cao

**11:30 AM** (211) **Early Downregulation of Innate NK Cell Responses by Post-Transplant Blocking of VEGF Receptors Attenuates Experimental Obliterative Airway Disease in Mice:**
- R. Krebs
- J. M. Tikkanen
- A. Raissadati
- M. Hollmen
- J. O. Ropponen

**11:45 AM** (212) **Protein Kinase C delta-Mediated Unfolded Protein Response and Necrotic Cell Death Contributes to Ischemia-Reperfusion Induced Injury in Lung Transplantation:**
- H. Kim
- J. Zhao
- D. Lee
- X. Bai
- M. Cypel
- S. Keshavjee
- M. Liu
10:30 AM – 12:00 PM

CONCURRENT SESSION 24

Much Ado About Nothing? (New Approaches to Immune Monitoring in Heart Transplantation) (Harbor GHI)

CHAIRS: Jose Luis Lambert, MD, PhD and Deborah E. Meyers, MD (HTX, BSTR, PATH)

10:30 AM (213) Does the Ability for Donor Specific Antibodies to Bind Complement Always Result in C4d Staining in the Endomyocardial Biopsy After Heart Transplantation?

N. Lipson-Altman1, N. Reinsmoen1, M. Kittleson1, D. Luthringer2, J. Patel1, F. Liou2, Z. Yu1, B. Kearny1, L. Czer1, D. H. Chang1, D. Ramzy1, J. Kobashigawa1. 1Cedars–Sinai Heart Institute, Los Angeles, CA, 2Cedars-Sinai Medical Center, Los Angeles, CA.

10:45 AM (214) Static Versus Dynamic Angiographic CAV Evaluation: Prognostic Stratification Beyond ISHLT Grading

M. Masetti1, A. Aliabadi2, M. Sabatino1, G. Delle-Karth3, P. Prestinenzi1, S. Röder1, K. Uyanik Uenal2, J. Gökler1, G. Lauffer2, C. Rapezzi1, F. Grigioni1, A. Zuckermann2, L. Potena1. 1DIMES, S. Orsola Hospital, University of Bologna, Bologna, Italy, 2Heart Transplantation, Cardiac Surgery Department, Vienna General Hospital, Vienna, Austria, 3Cardiology, Vienna General Hospital, Vienna, Austria.

11:00 AM (215) Clinical Importance of Flow Cytometry Crossmatch in the Context of Complement-Dependent Cytotoxicity Crossmatch Results Following Heart Transplantation


11:15 AM (216) Defining Prognostic Markers in Heart and Lung Transplant Recipients with PTLD

G. Kumarasinghe1, O. Lavee2, I. Nivison-Smith2, A. Parker2, M. Malout1, A. Keogh1, S. Miliken1, A. Dodds2, M. Pitt1, C. Hayward2, D. Ma3, K. Fay2, J. Joseph2, E. Rotyvar1, A. Havyik1, A. Jabbour1, A. Glennville1, P. Macdonald1, J. Moore1. 1Heart and Lung Transplant Unit, St. Vincent’s Hospital, Darlinghurst, Australia, 2Dept of Haematology, St. Vincent’s Hospital, Darlinghurst, Australia, 3Dept of Anatomical Pathology, St. Vincent’s Hospital, Darlinghurst, Australia.

11:30 AM (217) Circulating Cell-Free DNA Is a Non-Invasive Marker of Heart Transplant Rejection

I. De Vlamincx1, H. A. Valantine2, H. Luikart2, D. Weisshaar2, D. Bernstein1, S. R. Quake1, K. K. Khush2. 1Bioengineering, Stanford University, Palo Alto, CA, 2Cardiovascular Medicine, Stanford University, Palo Alto, CA, 3Heart Transplant Services, Kaiser Permanente Northern California, Santa Clara, CA, 4Pediatric Cardiology, Stanford University, Palo Alto, CA.

11:45 AM (218) Identification of MicroRNA 628-5p as a Novel Biomarker for Cardiac Allograft Vasculopathy (CAV)

A. Neumann1, J. Kleeberger2, N. Benecke1, A. Holzmann2, A. Haverich3, T. Thum1, C. Bara1. 1Department of Cardiothoracic, Transplantation and Vascular Surgery, Medizinische Hochschule Hannover, Hannover, Germany, 2Institute of Molecular and Translational Therapeutic Strategies, Medizinische Hochschule Hannover, Hannover, Germany.
10:30 AM – 12:00 PM

CONCURRENT SYMPOSIUM 28

JHLT at ISHLT: The Year in a Capsule (Seaport H)

CHAIRS: Stephan Schueler, MD, PhD, FRCS and Pali D. Shah, MD (ALL)

10:30 AM Highlights of Heart Transplantation and Mechanical Circulatory Support
Martin Schweiger, MD, University Children’s Hospital, Zurich, Switzerland

10:45 AM Invited Discussant
Heather J. Ross, MD, University Hospital, Toronto, ON, Canada

10:50 AM Highlights of Lung Transplantation and Pulmonary Hypertension
Laveena Chhatwani, MD, MSc, Stanford University, Stanford, CA, USA

11:05 AM Invited Discussant
Geert M. Verleden, MD, PhD, University Hospital Gasthuisberg, Leuven, Belgium

11:10 AM Highlights of End Stage Cardiothoracic Disease in Children
Steven J. Kindel, MD, Children’s Hospital & Medical Center, Omaha, NE, USA

11:25 AM Invited Discussant
Richard Kirk, MA, FRCP, FRCPCH, Freeman Hospital, Newcastle upon Tyne, United Kingdom

11:30 AM Highlights of Transplant Infectious Diseases
Me-linh Luong, M.D., University of Montreal St-Luc Hospital, Montreal, QC, Canada

11:45 AM Invited Discussant
Shahid Husain, MD, MS, Toronto General Hospital, Toronto, ON, Canada

11:50 AM Panel Discussion

NOON – 2:00 PM
LUNCH BREAK/VIEW POSTERS/VIEW EXHIBITS

NOON – 12:45 PM
BOX LUNCH DISTRIBUTION (Palm Foyer)

12:05 PM – 12:55 PM
MECHANICAL CIRCULATORY SUPPORT COUNCIL MEETING (Grand Hall A)

PULMONARY HYPERTENSION COUNCIL MEETING (Grand Hall B)
PEDIATRIC TRANSPLANTATION COUNCIL MEETING (Grand Hall C)
INFECTIOUS DISEASES COUNCIL MEETING (Grand Hall D)
PATHOLOGY COUNCIL MEETING (Harbor GHI)
1:05 PM – 1:55 PM
HEART FAILURE AND TRANSPLANT MEDICINE COUNCIL MEETING
(Grand Hall A)

PULMONARY TRANSPLANTATION COUNCIL MEETING
(Grand Hall B)

PEDIATRIC HEART FAILURE WORKFORCE MEETING
(Grand Hall C)

2:00 PM – 3:30 PM
CONCURRENT SESSION 25

Tackling Bad VAD Situations: Penalty or Score?
(Grand Hall A)

CHAIRS: Arnt E. Fiane, MD and Mathias Loebe, MD, PhD
(MCS, HF)

2:00 PM (219) Role of VAD Therapy for Patients with Restrictive Cardiomyopathy: Improving Outcomes for a Lethal Disease;
A. Grupper1, L. D. Joyce1, J. M. Stulak1, S. D. Schettle1, Y. Gerber1, Y. Topilsky1, N. L. Pereira1, B. S. Edwards1, R. C. Daly2, S. J. Park2, S. S. Kushwaha1. 1Division of Cardiovascular Diseases, Mayo Clinic, Rochester, MN, 2Division of Cardiovascular Surgery, Mayo Clinic, Rochester, MN.

2:15 PM (220) Impact of Left Ventricular Assist Device Support on Bridging to Transplantation in Adults with Restrictive Cardiomyopathy;
A. H. Healy1, B. C. Baird1, S. G. Drakos1, J. N. Nativi2, S. H. McKellar1, J. Stehlik2, C. H. Selzman1. 1Surgery, University of Utah, Salt Lake City, UT, 2Medicine, University of Utah, Salt Lake City, UT.

2:30 PM (221) Hemodynamic Effects of Partial Right Ventricular Support in the Acute Vs the Chronic Pressure Overloaded Right Ventricle;
T. Verbelen1, M. Martin1, M. Goda1, K. Kasama1, I. Van Tichelen1, D. Burkhoff1, M. Delcroix2, F. Rega2, B. Meyns1. 1Experimental Cardiac Surgery, University of Leuven, Leuven, Belgium, 2CircuLite Inc., Hackensack, NJ, 3Cardiology, Columbia University College of Physicians and Surgeons, New York, NY, 4Clinical and Experimental Medicine, University of Leuven, Leuven, Belgium.

2:45 PM (222) Pulmonary Artery Pulsatility Index Predicts Right Ventricular Failure After LVAD Implantation;
G. Kang1, D. Banerjee2. 1Department of Medicine, Stanford University Medical Center, Stanford, CA, 2Department of Medicine, Division of Cardiology, Stanford University Medical Center, Stanford, CA.

3:00 PM (223) Association of Systemic Vascular Resistance and Right Ventricular Failure Following Left Ventricular Assist Device Implantation;

3:15 PM (224) Impact of vWF Activity in the Long-term Management of Centrifugal Type Continuous-flow LVAD Patients;
How to Live Better with an LVAD (Grand Hall B)

CHAIRS: Jennifer A. Cowger, MD, MS and Yurii Pya, MD

(MCS, NHAH, PEQQ)

2:00 PM (225) How Do Readmissions Impact Survival Among Patients with Continuous-Flow Left Ventricular Assist Devices? Findings from INTERMACS;
R. P. Vivo1, S. R. Krim2, J. D. Estep3, W. I. Khalife4, G. C. Fonarow1, R. L. Kormos5, S. L. Myers6, M. C. Deng1. 1Cardiology, University of California Los Angeles, Los Angeles, CA, 2Cardiology, John Ochsner Heart and Vascular Institute, New Orleans, LA, 3Cardiology, Methodist DeBakey Heart and Vascular Center, Houston, TX, 4Cardiology, University of Texas Medical Branch, Galveston, TX, 5Cardiology, University of Pittsburgh Medical Center, Pittsburgh, PA, 6Cardiology, University of Alabama at Birmingham, Birmingham, AL.

2:15 PM (226) Mechanical Circulatory Support Improves Diabetic Control in Patients With Advanced Heart Failure;
S. K. Sundararajan1, A. Krikorian2, G. Sayer1, G. Bhat1. 1Center for Heart Transplant and Assist Devices, Advocate Christ Medical Center, Oak Lawn, IL, 2Department of Internal Medicine, Advocate Christ Medical Center, Oak Lawn, IL.

2:30 PM (227) Incidence and Predictors of Myocardial Recovery on Heartmate II Left Ventricular Assist Device Support: Results From the United Network Organ Sharing Database;
V. K. Topkara. Cardiology, Columbia University, New York, NY.

2:45 PM (228) The Heart Mate Risk Score Correlates with Mortality in an Unselected Mixed Cohort of Heart Mate II and Heart Ware LVAD from a Single Large Volume Center;
L. Adamo, M. Nassif, A. Tibrewala, J. Vader, G. Ewald, D. L. Mann, S. LaRue. Cardiology, Washington University in St Louis, St Louis, MO.

3:00 PM (229) Change in Health-related Quality of Life from Before to After Destination Therapy Mechanical Circulatory Support is Similar for Older and Younger Patients: Analyses from INTERMACS;
K. L. Grady1, D. C. Naftel2, S. L. Myers3, M. Dew4, G. Weidner4, K. A. Idrissi5, H. B. Lee6, E. C. McGee, Jr7, J. K. Kirklin2. 1Northwestern University, Chicago, IL, 2University of Alabama at Birmingham, Birmingham, AL, 3University of Pittsburgh, Pittsburgh, PA, 4San Francisco State University, Romberg Center, Tiburon, CA, 5Columbia University, New York, NY, 6Yale University School of Medicine, New Haven, CT, 7Northwestern Memorial Hospital, Chicago, IL.

3:15 PM (230) Psychosocial Factors Do Not Influence Survival or the Development of Complications After Left Ventricular Assist Device Implantation;
H. Golwala1, W. F. Rawasia2, K. Vessels3, K. McCants1, M. S. Slaughter2, A. Lenneiman1, E. J. Birks1. 1Cardiovascular Medicine, University of Louisville, Rudd Heart and Lung Institute, Louisville, KY, 2Internal Medicine, University of Louisville, Rudd Heart and Lung Institute, Louisville, KY, 3Heart Failure and Mechanical Support, University of Louisville, Rudd Heart and Lung Institute, Louisville, KY, 4Cardiothoracic surgery, University of Louisville, Rudd Heart and Lung Institute, Louisville, KY.
2:00 PM – 3:30 PM

CONCURRENT SESSION 27

All’s Well That Ends Well? What We Can Learn From Heart Transplant Registries (Grand Hall C)

CHAIRS: John WC Entwistle, III, MD, PhD and Mirta Diez, MD (HTX)

2:00 PM (231) ABO-Incompatible Adult Heart Transplantation. A Registry Study; H. Bergenfeldt1, B. Andersson2, J. Nilsson3. 1Dept. of Cardiovascular surgery, Lund University and Skane University Hospital, Lund, Sweden, 2Dept. of Surgery, Lund University and Skane University Hospital, Lund, Sweden.

2:15 PM (232) Retransplantation Versus Medical Therapy for Cardiac Allograft Vasculopathy (CAV): Analysis of the International Society for Heart and Lung Transplantation (ISHLT) Registry; L. Goldraich, J. Stehlik, A. Y. Kucheryavaya, L. B. Edwards, H. J. Ross. 1Cardiac Transplant Program, Peter Munk Cardiac Center, University of Toronto, Toronto, ON, Canada, 2University of Utah School of Medicine, Salt Lake City, UT, 3International Society for Heart and Lung Transplantation and United Network for Organ Sharing, Richmond, VA.

2:30 PM (233) Race/Ethnic Differences in the Epidemiology of Graft Failure in a Contemporary Cohort; A. A. Morris, A. Kalogeropoulos, I. Gradus-Pizlo, T. Wozniak. 1Emory University School of Medicine, Atlanta, GA, 2Mayo Clinic Arizona, Scottsdale, AZ, 3Emory University School of Nursing, Atlanta, GA.

2:45 PM (234) The Role of Recipient BMI and Age on Survival after Heart Transplantation; D. J. Weber, P. Didolkar, A. Gracon, Y. Hellman, M. A. Hadi, A. Malik, M. Caccamo, I. Wang. 1Cardiothoracic Surgery, Indiana University Health, Indianapolis, IN, 2Cardiology, Indiana University Health, Indianapolis, IN.

3:00 PM (235) Effect of Match for Ethnicity on Immunologic Events After Heart Transplantation: An Analysis of the UNOS/OPTN Database; T. Carvajal, E. P. Kransdorf, M. Cheng, D. E. Steidley, R. L. Scott, A. Bordner, J. R. Stone. 1Department of Surgery, Mayo Clinic Arizona, Phoenix, AZ, 2Division of Cardiovascular Diseases, Mayo Clinic Arizona, Scottsdale, AZ, 3Division of Health Sciences Research, Section of Biostatistics, Mayo Clinic Arizona, Phoenix, AZ, 4Center for Regenerative Medicine, Mayo Clinic Arizona, Phoenix, AZ, 5Division of Gastroenterology and Hepatology, Mayo Clinic Arizona, Phoenix, AZ, 6Division of Cardiothoracic Surgery and Center for Regenerative Medicine, Mayo Clinic Arizona, Phoenix, AZ.

3:15 PM (236) Need for Renal Replacement Therapy after Cardiac Transplantation in Patients with AL Amyloidosis Is Associated with Poor Survival; E. D. Niehaus, S. R. Tafttaba, N. Sarswat, J. R. Stone, L. Gilstrap, M. Maurer, R. Witteles, D. Estep, D. Baran, M. J. Zucker, G. Feltrin, D. C. Seldin, M. J. Semigran. 1Cardiology, Massachusetts General Hospital, Boston, MA, 2Pathology, Massachusetts General Hospital, Boston, MA, 3Cardiology, Brigham and Women’s Hospital, Boston, MA, 4Cardiology, Columbia University Medical Center, New York City, NY, 5Cardiology, Stanford University Medical Center, Stanford, CA, 6Cardiology, Houston Methodist Hos-
2:00 PM – 3:30 PM

CONCURRENT SESSION 28

Diagnosis and Monitoring of Pulmonary Hypertension
(Grand Hall D)

CHAIRS: Randall C. Starling, MD, MPH and Ioana R. Preston, MD

(237) Limitations of Right Heart Catheterization in the Diagnosis and Risk Stratification of Patients with Pulmonary Hypertension: Insights from the CHAMPION Trial;
A. Raina1, R. C. Bourge2, W. Abraham3, P. Adamson4, J. Bauman5, J. Yadav5, R. L. Benza1. 1Cardiovascular Institute, Allegheny General Hospital, Pittsburgh, PA, 2Division of Cardiology, University of Alabama at Birmingham, Birmingham, AL, 3Division of Cardiology, Ohio State University, Columbus, OH, 4Heart Failure Institute, Oklahoma Heart Hospital, Oklahoma City, OK, 5Cardiomems, Inc, Atlanta, GA.

(238) Use of a Wireless Implantable Hemodynamic Monitor Leads to Reductions in Heart Failure Hospitalizations Among WHO Group II Pulmonary Hypertension Patients;
A. Raina1, R. C. Bourge2, W. Abraham3, P. B. Adamson4, J. Bauman5, J. Yadav5, R. L. Benza1. 1Cardiovascular Institute, Allegheny General Hospital, Pittsburgh, PA, 2Division of Cardiology, University of Alabama at Birmingham, Birmingham, AL, 3Division of Cardiology, Ohio State University, Columbus, OH, 4The Heart Failure Institute, Oklahoma Heart Hospital, Oklahoma City, OK, 5Cardiomems, Inc, Atlanta, GA.

(239) Demographics and Outcomes from a Binational Australian and New Zealand Registry for Adults with Congenital Heart Disease and Pulmonary Arterial Hypertension;
M. L. Rose1, G. Strange2, L. Grigg3, P. Kermeen3, C. O'Donnell4, I. King1, D. Celeri4, R. Weintraub3, 1The Murdoch Children's Research Institute, Parkville, Australia, 2Notre Dame University, Perth, Australia, 3Royal Melbourne Hospital, Parkville, Australia, 4Queensland Service, Brisbane, Australia, 5The Starship Children's Hospital, Auckland, Australia, 6The Royal Prince Alfred Hospital, Sydney, Australia.

(240) Echocardiographic Features and Utility of Baseline Echo in the Assessment of Pulmonary Hypertension in Patients with Atrial Septal Defect;
A. Abernethy1, K. Stackhouse1, M. Halane1, W. ElMallah2, A. Qureshi3, R. Krasuski1. 1The Cleveland Clinic, Cleveland, OH, 2The University of Kentucky, Lexington, KY.
3:00 PM  (241) Balloon Atrial Septostomy in Pulmonary Arterial Hypertension: Effect on Survival and Associated Outcomes;

3:15 PM  (242) Assessment of Right Ventricular Adaptability to Loading Conditions Can Improve the Timing of Listing to Transplantation in Patients with Pulmonary Arterial Hypertension;

2:00 PM – 3:30 PM
CONCURRENT SYMPOSIUM 29

Approach to the Highly Sensitized Patient Awaiting Heart Transplantation (Harbor GHI)
CHAIRS: Howard J Eisen, MD and Maria G. Crespo-Leiro, MD, PhD
(HF, HTX, PATH, PHARM)
SESSION SUMMARY: Sensitization (circulating HLA-antibodies) in patients awaiting heart transplantation may lead to prolonged waiting times and possibly increased complications/death while on the waiting list. This session is designed to provide attendees with practical information and strategies to manage sensitized patients awaiting heart transplantation. Recent research publications and program experience will inform this session.

2:00 PM  Clinical Risk of Circulating Antibodies in Patients Awaiting Heart Transplantation
Luciano Potena, MD, PhD, University of Bologna, Bologna, Italy

2:20 PM  Desensitization Therapy vs. Virtual Crossmatch: Does It Make Sense to Desensitize
Monica M. Colvin-Adams, MD, University of Minnesota, Minneapolis, MN, USA

2:40 PM  Treatment Strategies for Desensitization
A. G. Kfoury, MD, FACC, Intermountain Heart Institute (UTAH Cardiac Transplant Program), Murray, UT, USA

3:00 PM  Sensitized VAD Patients Awaiting Heart Transplantation: Are They Different?
Jon Kobashigawa, MD, Cedars-Sinai Heart Institute, Los Angeles, CA, USA

3:20 PM  2013 Final ISHLT Antibody Mediated Rejection Classification
Gerald J. Berry, MD, Stanford University, Stanford, CA, USA
2:00 PM – 3:30 PM

**CONCURRENT SESSION 29**

**Lung Donation: Take It to the Limits (Seaport H)**

**CHAIRS:** Michael S. Mulligan, MD and Dirk E. Van Raemdonck, MD, PhD (LTX, DMD)

**2:00 PM**

(243) **Impact of Extended Cold Ischemic Times on the Outcome of Clinical Lung Transplantation Using Ex-Vivo Lung Perfusion (EVLP):**

T. Krueger1, T. Machuca2, V. Linacre2, M. Chen2, L. Singer3, K. Yasufuku1, M. De Perrot1, A. Pierre1, T. Waddell1, S. Keshavjee2, M. Cypel1. 1Division of Thoracic Surgery, University Hospital of Lausanne, Lausanne, Switzerland, 2Division of Thoracic Surgery, Toronto General Hospital, Toronto, ON, Canada, 3Toronto Lung Transplant Program, Toronto General Hospital, Toronto, ON, Canada.

**2:15 PM**

(244) **The Effect of Cold and Warm Ischemia Time on Survival After Lung Transplantation in a Large National Cohort:**

J. D. Lannon1, A. Ball2, R. B.C3, N. Yonan2, S. Clark3, J. Mascaro4, P. Catarino5, A. Simon6, J. Dark3, S. Clark3, J. H. Dark3. 1Statistics and Clinical Studies, NHS Blood and Transplant, Bristol, United Kingdom, 2Wythenshawe Hospital, Manchester, United Kingdom, 3Freeman Hospital, Newcastle upon Tyne, United Kingdom, 4Queen Elizabeth Hospital, Birmingham, United Kingdom, 5Papworth Hospital, Cambridge, United Kingdom, 6Harefield Hospital, Middlesex, United Kingdom.

**2:30 PM**

(245) **DCD Lung Transplantation for Pulmonary Arterial Hypertension: Passing the Toughest Test:**

B. Levvey1, H. Whittord1, T. Williams2, T. Miller2,3,4, C. Manterfield1, G. Westall1, M. Paraskeva2, J. Gooi1, A. Zimmett1, A. Pick1, J. Negri1, S. Marasco2, D. McGiffen2, G. Snell1. 1Lung Transplant Service, The Alfred Hospital, Melbourne, Australia, 2The Alfred Hospital, Melbourne, Australia, 3Allergy, Immunology & Respiratory Medicine, The Alfred, Melbourne, Australia, 4The Alfred, Melbourne, Australia.

**2:45 PM**

(246) **Length of the Agonal Phase in Donors After Cardiac Death Influences Donor Lung Function After Reperfusion in a Rat Model:**


**3:00 PM**

(247) **Lung Transplant Waitlist Mortality: Height as a Predictor of Poor Outcomes:**

B. C. Keeshan1, J. W. Rossano1, N. A. Beck2, R. Hammond2, J. L. Kreindler2, T. L. Spray2, S. Fuller2, S. B. Goldfarb1. 1Division of Cardiology, Children’s Hospital of Philadelphia, Philadelphia, PA, 2University of California Berkeley, Berkeley, CA, 3Center for Biomedical Informatics, Children’s Hospital of Philadelphia, Philadelphia, PA, 4Division of Pulmonary Medicine, Children’s Hospital of Philadelphia, Philadelphia, PA, 5Division of Cardiothoracic Surgery, Children’s Hospital of Philadelphia, Philadelphia, PA.

**3:15 PM**

(248) **First Lung Transplants Using Controlled and Uncontrolled DCD Lungs Evaluated With OCS-Lung Portable Exvivo Perfusion System:**

F. Moradiellos1, M. Córdoba1, P. Merlo2, R. Iranoz2, G. Diaz2, C. García-Gallo2, A. Varela2. 1Thoracic Surgery Department, Hospital Universitario Puerta de Hierro, Madrid, Spain, 2Anesthesiology Department, Hospital Universitario Puerta de Hierro, Madrid, Spain, 3Pneumology Department, Hospital Universitario Puerta de Hierro, Madrid, Spain.
**CONCURRENT SESSION 30**

**Philip K. Caves Award Candidate Presentations**

**(Gaslamp AB)**

**CHAIRS:** David O. Taylor, MD and Stuart C. Sweet, MD, PhD

**ALL**

**2:00 PM**

(249) **Metabolic Profiling of Perfusate from Clinical Ex-Vivo Lung Perfusion Yields Potential Biomarkers of Early Lung Transplant Outcomes;**

M. K. Hsin1, R. Zamel1, M. Cypel1, K. Hashimoto1, M. Chen1, T. Machuca1, D. Wishart2, B. Han2, T. K. Waddell1, M. Liu1, S. Keshavjee1. 1Thoracic Surgery, University of Toronto, Toronto, ON, Canada, 2University of Alberta, Edmonton, AB, Canada.

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**2:15 PM**

(250) **Ligation of Transgenic MHC Class I Molecule Expressed Only in the Lungs By Its Specific Antibodies Induces Epithelial Injury, Autoimmunity and Obliterative Airway Disease (OAD): A Novel Transgenic Mouse Model of OAD;**

N. J. Sarma, V. Tiriveedhi, T. Mohanakumar. Surgery, Washington University School of Medicine, St. Louis, MO.

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**2:30 PM**

(251) **Development of Recipient-Matched Engineered Heart Tissue Using 3D Printing;**

Y. Yildirim1, S. Pecha1, H. Naito2, B. Karikkineth2, W. Zimmermann3, H. Reichenspurner1, T. Eschenhagen1. 1Cardiac Surgery, University Heart Center Hamburg, Hamburg, Germany, 2Department of Experimental Pharmacology and Toxicology, University Medical Center Hamburg-Eppendorf, Hamburg, Germany, 3Pharmacology, University Medical Center Göttingen, Göttingen, Germany, 4Department of Experimental Pharmacology and Toxicology, University Medical Center Hamburg-Eppendorf, Hamburg, Germany.

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**2:45 PM**

(252) **DAP12 Expression By Lung-Resident Macrophages Mediates Pulmonary Ischemia Reperfusion Injury By Promoting Neutrophil Extravasation;**

J. Spahn1, W. Li1, A. C. Bribiesco1, J. Liu1, B. Zinselmeyer2, H. Shen3, S. L. Brody4, D. Goldstein4, A. S. Krupnick1, A. Gelman2, D. Kreisel1. 1Surgery, Washington University St. Louis, St. Louis, MO, 2Medicine, Washington University St. Louis, St. Louis, MO, 3Medicine, Yale University, New Haven, CT.

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**3:00 PM**

(253) **Halofuginone Inhibition of Th17 Cell Differentiation Attenuates Obliterative Bronchiolitis in Mouse Orthotopic Lung Transplantation;**

H. Oishi1, M. Sato2, Y. Matsuda3, S. Hirayama4, Z. Guan1, T. Saito1, M. Cypel1, D. Hwang1, M. Whitman2, M. Liu1, S. Keshavjee1. 1Latner Thoracic Surgery Research Laboratories, University Health Network, University of Toronto, Toronto, ON, Canada, 2Department of Thoracic Surgery, Kyoto University, Kyoto, Japan, 3Department of Thoracic Surgery, Tohoku University, Sendai, Japan, 4Department of Surgery, Okayama Rosai Hospital, Okayama, Japan, 5Department of Cell Biology, Harvard Medical School, Boston, MA.

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**3:15 PM**

(254) **De Novo DQ Donor-Specific Antibodies Are Associated With Chronic Lung Allograft Dysfunction;**

Controversies in Listing Children for Thoracic Organ Transplant (Gaslamp CD)

CHAIRS: Charles E. Canter, MD and Janet N. Scheel, MD (PED)

2:00 PM
Acceptable Transplant Candidates – Genetic and Adherence Considerations
Asif Hasan, MD, Freeman Hospital, Newcastle, United Kingdom

2:15 PM
The Patient-Provider Liaison: Do social situations really matter in patient outcomes?
Samantha J. Anthony, PhD, MSW, Hospital for Sick Children, Toronto, Canada

2:30 PM
Adherence: How much does it really matter in picking transplant candidates?
Fabienne Dobbels, MSc, PhD, University Hospital, Leuven, Belgium

2:45 PM
Shaky Ground: Can we say no without fear of legal action?
Daniel Bernstein, MD, Stanford University, Palo Alto, CA, USA

3:00 PM
To List or Not to List: Purism or Pragmatism?
Elizabeth Blume, MD, Children’s Hospital, Boston, MA, USA

3:15 PM
Panel Discussion

3:30 PM – 4:00 PM
COFFEE BREAK/VISIT EXHIBITS (Harbor A-F)
VIEW POSTERS (Harbor and Seaport Foyers)
Building the Bridge to Transplant: Old Challenges, New Solutions (Grand Hall A)

**CHAIRS:** Paul J. Mohacsi, MD and Geetha Bhat, MD, PhD (MCS, HTX, HF)

### 4:00 PM (255) Heart Transplantation Outcomes in Patients with Continuous Flow Left Ventricular Assist Device Related Complications;

M. Quader, L. G. Wolfe, D. Zhao, Y. Kasirajan. Cardio-Thoracic Surgery, Virginia Commonwealth University, Richmond, VA.

### 4:15 PM (256) Safety and Efficacy of Pre Transplant Desensitization of Patients Supported by CF-LVADs;


### 4:30 PM (257) Do Continuous Flow Left Ventricular Assist Devices Really Cause Allosensitization?;


### 4:45 PM (258) Five-Fold Increase in Antibody-Mediated Rejection (AMR) Post-Heart Transplant in Patients Developing Allosensitization During Left Ventricular Assist Device Support (LVAD);


### 5:00 PM (259) Increasing Use of Mechanical Circulatory Support as a Bridge to Cardiac Retransplantation;


### 5:15 PM (260) Safety of Mechanical Circulatory Support as a Bridge to Cardiac Retransplantation;

**Mechanical Circulatory Support: Is the Outcome Worth the Cost?** *(Grand Hall B)*

**CHAIRS:** Alejandro M. Bertolotti, MD and Joseph G. Rogers, MD *(MCS, NHSAH, PEEQ)*

### 4:00 PM (261)
**Readmission after Left Ventricular Assist Device Implantation: Differences Observed Between Two Device Types;**

### 4:15 PM (262)
**Relationship Between the Cost and Cause of Hospital Readmissions After LVAD Implantation;**
K. Lietz, A. Branch, M. McGrath, J. Herre. Division of Advanced Heart Failure, Sentara Norfolk General Hospital, NORFOLK, VA.

### 4:30 PM (263)
**Reduction of Drive Line Infection in Continuous Flow Assist Devices: Use of Standard Kit Including Silver Dressing and Anchoring Device;**

### 4:45 PM (264)
Moved to Poster Session 2

### 5:00 PM (265)
**Outcomes of Adult Patients with Small Body Size Supported with a Continuous-Flow Left Ventricular Assist Device;**
S. Lee, J. N. Katz, F. D. Pagani, U. P. Jorde, N. Moazami, R. John, K. S. Sundareswaran, D. J. Farrar, O. H. Frazier, Cardiovascular Medicine, Cleveland Clinic Foundation, Cleveland, OH, Divisions of Cardiology and Pulmonary/Critical Care Medicine, University of North Carolina-Chapel Hill, Chapel Hill, NC, Center for Circulatory Support, University of Michigan Hospital and Health Systems, Ann Arbor, MI, Division of Cardiology, Columbia University Medical Center, New York, NY, Department of Thoracic and Cardiovascular Surgery, Cleveland Clinic Foundation, Cleveland, OH, University of Minnesota, Minneapolis, MN, Research and Scientific Affairs, Thoratec Corporation, Pleasanton, CA, Department of Cardiovascular Surgery, Texas Heart Institute, Houston, TX.

### 5:15 PM (266)
**Percutaneous Insertion of Veno-Arterial Extracorporeal Membrane Oxygenation Circuit in the Catherization Laboratory for Refractory Cardiogenic Shock Is Safe and Associated with Excellent Outcomes;**
Y. Sandoval, B. Sun, L. B. Louis, M. Samara, D. Feldman, I. Chavez, B. Cabuay, P. Zimbwa, M. Bennett, K. Hryniewicz. Minneapolis Heart Institute, Abbott Northwestern Hospital, Minneapolis, MN.
4:00 PM – 5:30 PM

CONCURRENT SESSION 33

A Midsummer Night’s Dream (Potential Improvements in Outcomes After Cardiac Transplantation) (Grand Hall C)

CHAIRS: Howard Eisen, MD and Martin Cadeiras, MD (HTX, HF)

4:00 PM (267) Impact of Cardiac Arrest Resuscitated Donors on Heart Recipients Outcome; A. Galeone1, S. Varnous1, E. Barreda1, S. Hariri2, A. Pavie1, P. Leprince1. 1Department of Thoracic and Cardiovascular Surgery, La Pitié-Salpêtrière Hospital, Paris, France, 2Department of Anesthesiology, La Pitié-Salpêtrière Hospital, Paris, France.

4:15 PM (268) Donor and Recipient Renal Dysfunction and Post Cardiac Transplant Graft Survival: Insights Into Reno-Cardiac Interactions; O. Laur1, M. A. Brisco2, A. J. Kula1, S. J. Cheng1, A. A. Mangi1, S. G. Coca1, W. H. Tang1, J. M. Testani2. 1School of Medicine, Yale University, New Haven, CT, 2Medical University of South Carolina, Charleston, SC, 3Cleveland Clinic, Cleveland, OH.


4:45 PM (270) Varying Time Frame of Primary Graft Failure After Heart Transplantation; S. Letzen, S. Ghadyani, P. Bonde. Section of Cardiac Surgery, Yale School of Medicine, New Haven, CT.

5:00 PM (271) Amiodarone Treatment Prior to Heart Transplantation Is Associated with Acute Graft Dysfunction and Early Mortality: A Propensity-Matched Comparison; H. Yerebakan1, Y. Naka1, R. Sorabella1, S. C. Hill1, K. Takeda1, P. Schulze2, I. George1, M. Yuzefpolskaya2, M. A. Farr2, N. Uriel2, P. C. Colomb2, U. P. Jord2, D. M. Mancini2, H. Takayama1. 1Department of Surgery, Columbia University Medical Center, New York, NY, 2Department of Medicine, Columbia University Medical Center, New York, NY.

4:00 PM – 5:30 PM
CONCURRENT SESSION 34

Chronic Lung Allograft Dysfunction: Mechanisms
(Grand Hall D)

CHAIRS: Glen P. Westall, FRACP, PhD and Laurie D. Snyder, MD
(LTX, BSTR)

4:00 PM (273) Airway Alterations in Chronic Lung Allograft Dysfunction;
S. E. Verleden1, D. Vasilescu2, S. Willems1, D. Rutten1, R. Vos1, E. Vandermeulen1, J. Mcdonough2, E. Verbeke1, J. Verschakelen1, D. Van Raemdonck1, B. Rondelet1, C. Knoop3, M. Decramer1, J. Cooper1, J. Hogg2, J. Hostens2, G. Verleden3, B. Vanaudenaerde3. 1KU Leuven, Leuven, Belgium, 2University of British Columbia, Vancouver, BC, Canada, 3Université Libre de Bruxelles, Brussel, Belgium.

4:15 PM (274) Epithelial Injury and Dysregulated Repair in Small and Large Airways of Lung Transplant Patients is Ameliorated by Azithromycin;
A. Kicic1, M. Lavender2, M. M. Musk2, J. Wrobel1, B. Banerjee1, K. Ling1, K. M. Martinovich1, L. W. Garratt1, T. Iosifidis1, K. Looi2, E. Kicic-Starcevich1, F. J. Lannigan1, P. Hopkins1, S. T. Yerkovich1, E. N. Sutanto1, D. C. Chambers1, S. M. Stick1. 1Clinical Sciences, Telethon Institution For Child Health Research, Perth, Australia, 2Royal Perth Hospital, Perth, Australia, 3School of Paediatrics and Child Health, University of Western Australia, Perth, Australia, 4School of Medicine, Notre Dame University, Perth, Australia, 5School of Medicine, University of Queensland, Brisbane, Australia, 6School of Medicine, University of Queensland, Brisbane, Australia, 7Department of Respiratory Medicine, Princess Margaret Hospital for Children, Perth, Australia.

4:30 PM (275) Neutrophilic Enzymes in Human Chronic Lung Allograft Dysfunction: Potential Marker for Biologic Subtyping;
T. Saito1, M. Liu1, M. Binnie2, M. Sato1, S. Azad1, T. Machuca1, H. Oishi1, M. Cypel1, T. K. Waddell1, S. Keshavjee1. 1Latner Thoracic Surgery Research Laboratories, University Health Network, Toronto, ON, Canada, 2Division of Respirology, University of Toronto, Toronto, ON, Canada.

4:45 PM (276) Elevated Hyaluronan Is Associated with Bronchiolitis Obliterans Syndrome;
J. L. Todd1, V. E. Kennedy1, E. N. Pavlisko1, H. L. Zhang1, F. L. Kelly1, S. M. Palmer1. 1Department of Medicine, Duke University Medical Center, Durham, NC, 2Department of Pathology, Duke University Medical Center, Durham, NC.

5:00 PM (277) An Immunohistological Study To Evaluate the Role of Eosinophils in Chronic Lung Allograft Dysfunction;

R. Shah1, S. Bellamy2, J. Diamond1, E. Cantu1, J. Flesch1, S. Arcosay1, J. Sommets1, D. Lederer1, J. D. Christie1. 1Division of Pulmonary, Allergy, and Critical Care Medicine, University of Pennsylvania, Philadelphia, PA, 2Center for Clinical Epidemiology and Biostatistics, University of Pennsylvania, Philadelphia, PA, 3Department of Thoracic Surgery, University of Pennsylvania, Philadelphia, PA, 4Division of Pulmonary and Critical Care, Columbia University, New York, NY, 5Department of Thoracic Surgery, Columbia University, New York, NY.
4:00 PM – 5:30 PM

CONCURRENT SESSION 35:

Alternative Resources for Organs (Harbor GHI)

**CHAIRS:** Richard N. Pierson, III, MD and Ali Nsair, MD (HTX, DMD, BSTR)

**4:00 PM**

(279) Pig Artery Patch Transplantation (Tx) in Nonhuman Primates (NHPs): A Predictor of Outcome of PIG-To-NHP Heart Tx;

H. Iwase1, M. B. Ezzelarab2, H. Hara1, J. K. Bhama2, M. Wijkstrom1, P. Bajona1, V. Satyananda1, B. Ekser1, C. Phelps2, D. Ayares1, D. K. Cooper1. 1Surgery, Thomas E. Starzl Transplantation Institute, University of Pittsburgh, Pittsburgh, PA, 2Surgery, University of Pittsburgh, Pittsburgh, PA, 3Revivicor, Blacksburg, VA.

**4:15 PM**

(280) Transgenic Human Thrombomodulin Expression Reduces Xenogeneic Thrombosis: a Promising Means of Reducing Pig Lung Xenograft Thrombotic Injury;

D. G. Harris1, Z. Gao2, E. P. Sievert1, P. Benipal1, X. Cheng1, L. Burdorf1, D. L. Ayares1, R. N. Piroon, III1, A. M. Azimzadeh1. 1Surgery, University of Maryland School of Medicine, Baltimore, MD, 2Jiangsu Key Laboratory of Xenotransplantation, Nanjing Medical University, Nanjing, China, 3Revivicor, Incorporated, Blacksburg, VA.

**4:30 PM**

(281) Human iPS-cell-derived Engineered Heart Tissue for Cardiac Repair;

S. Pecha1, F. Weinberger2, K. Breckwoldt2, B. Geertz2, J. Starbatty2, T. Schule2, A. Hansen2, H. Reichenspurner1, T. Eschenhagen2. 1Cardiovascular Surgery, University Heart Center Hamburg, Hamburg, Germany, 2Department of Experimental Pharmacology and Toxicology, University Medical Center Hamburg-Eppendorf, Hamburg, Germany.

**4:45 PM**

(284) Regulation of Host Immunity By Donor B Cells in Neonatal Tolerance To Cardiac Allografts;


**5:00 PM**

(283) Establishing a Novel Protocol for Heart Bioscaffold Cryopreservation;


**5:15 PM**

(282) Impact of Initial Reperfusion Temperature on the Functional Recovery of DCD Hearts;

C. W. White1, Y. Li2, A. Müller2, E. Ambrose1, J. Thiliveris1, T. W. Lee4, R. C. Arora1, G. Tian1, J. Nagendran2, L. Hyskho2, D. H. Freed3, 1Cardiac Surgery, University of Manitoba, Winnipeg, MB, Canada, 2Institute of Cardiovascular Sciences, St. Boniface Research Center, Winnipeg, MB, Canada, 3Human Anatomy and Cell Science, University of Manitoba, Winnipeg, MB, Canada, 4Anesthesia and Perioperative Medicine, University of Manitoba, Winnipeg, MB, Canada, 5National Research Council Institute for Biodiagnostics, Winnipeg, MB, Canada, 6Cardiac Surgery, University of Alberta, Edmonton, AB, Canada.
Long-Term Outcomes in Pediatric Heart Transplantation
(Seaport H)

CHAIRS: Robert J. Boucek, Jr., MD and Beth D. Kaufman, MD
(PEDS, HTX, PEEQ)

4:00 PM (285) **Functional Status of US Children After Heart Transplantation:**
D. M. Peng¹, L. B. Smoot¹, S. Chen², L. J. May¹, B. D. Kaufman¹,
J. Yeh², S. A. Hollander¹, S. L. Siehr², C. S. Almond², D. N. Rosen-
thal¹. ¹Pediatrics, Stanford University, Palo Alto, CA, ²Pediatric
Cardiology, Boston Children’s Hospital, Boston, MA.

4:15 PM (286) **Quality of Life and Metrics of Achievement in Long-Term Adult Survivors of Pediatric Heart Transplant:**
S. A. Hollander¹, S. Chen¹, H. Luikart², M. Burge³, D. N.
Rosenthal¹, K. Maeda³, S. A. Hunt¹, D. Bernstein¹. ¹Pediatrics
(Cardiology), Stanford University, Palo Alto, CA, ²Cardiology,
Stanford University, Palo Alto, CA, ³Department of Social Work,
Lucile Packard Children’s Hospital, Palo Alto, CA, ²Cardiotho-
racic Surgery, Stanford University, Palo Alto, CA.

4:30 PM (287) **Social Framework of Pediatric Heart Recipients Who Have Survived More Than 15 Post Transplant Years: A Single Center Experience:**
H. Copeland¹, A. Beckham², A. Razzouk³, R. Chinnock¹, N.
Hasaniya¹, K. Bahjri¹, L. Bailey¹. ¹Thoracic and Cardiovascular
Surgery, Loma Linda University School of Medicine, Loma Linda,
CA, ²Surgery, Loma Linda University School of Medicine, Loma
Linda, CA, ³Pediatrics, Loma Linda University School of Medicine,
Loma Linda, CA, ²Public Health, Loma Linda University School of
Public Health, Loma Linda, CA.

4:45 PM (288) **Predictors of Late Renal Dysfunction after Pediatric Heart Transplantation: A UNOS Database Analysis:**
K. Molina¹, C. Weng², M. Everitt¹. ¹UTAH Cardiac Transplant
Program, University of Utah, Salt Lake City, UT, ²University of Utah,
Salt Lake City, UT.

5:00 PM (289) **Coronary Allograft Vasculopathy in Pediatric Heart Transplant: Is Re-transplant a Prudent Option for All?**
F. Zafar¹, C. Chin², D. L. Morales³, K. Karani¹, A. Lorts², I. Wilmot²,
J. L. Jeffries², R. Bryant III², T. D. Ryan², J. A. Towbin², C. Castle-
berry². ¹Cardiothoracic Surgery, Cincinnati Children’s Hospital,
Cincinnati, OH, ²Cardiology, Cincinnati Children’s Hospital,
Cincinnati, OH.

5:15 PM (290) **Pediatric Cardiac Re-transplantation: Waitlist Mortality Stratified by Age and Era:**
M. Bock¹, K. Nguyen⁴, S. Malerba², K. Harrison⁴, E. Bagiella³, B.
Gelb¹, S. Pinney¹, I. Lytrivi¹. ¹Pediatric Cardiology, Icahn School of
Medicine at Mount Sinai, New York, NY, ²Pediatric Cardiolo-
gic Surgery, Icahn School of Medicine at Mount Sinai, New York, NY,
³Dept. of Health Evidence and Policy, Icahn School of Medicine at
Mount Sinai, New York, NY, ⁴Cardiology, Icahn School of Medicine
at Mount Sinai, New York, NY.
Heart and Lung Transplant Pathology (Gaslamp AB)

**CHAIRS:** Annalisa Angelini, MD and Carmela D. Tan, MD

**4:00 PM**

(291) **Histologic Findings in Allograft Lung Biopsies: Correlation With Serologic Alloimmunity:**

J. A. Collins¹, A. Iacono², C. Drachenberg¹, A. P. Burke¹. ¹Pathology, University of Maryland Medical Center, Baltimore, MD, ²Pulmonary and Critical Care Medicine, University of Maryland Medical Center, Baltimore, MD.

**4:15 PM**

(292) **Acute Fibrinous and Organizing Pneumonia is a Common Histological Pattern of Acute Lung Injury in Patients Developing Restrictive Allograft Syndrome:**

S. Karimi¹, M. Sato², H. C. Roberts³, C. Chaparro², L. G. Singer¹, T. K. Waddell¹, S. Keshavjee¹, D. M. Hwang¹. ¹Pathology, Toronto General Hospital, Toronto, ON, Canada, ²Thoracic Surgery, Kyoto University, Kyoto, Japan, ³Thoracic Surgery, Toronto General Hospital, Toronto, ON, Canada, ⁴Medical Imaging, Toronto General Hospital, Toronto, ON, Canada, ⁵Respirology, Toronto General Hospital, Toronto, ON, Canada.

**4:30 PM**

(293) **Reproducibility of C4d by Immunofluorescence and Immunohistochemistry in Lung Allograft Biopsies:**

A. C. Roden¹, J. J. Maleszewski¹, E. S. Yi¹, S. M. Jenkins², M. C. Aubry¹. ¹Laboratory Medicine & Pathology, Mayo Clinic Rochester, Rochester, MN, ²Division of Biomedical Statistics & Informatics, Mayo Clinic Rochester, Rochester, MN.

**4:45 PM**

(294) **Mixed Acute Cellular Rejection and Antibody Mediated Rejection in Heart Transplantation: A Retrospective Study in a Single Transplant Center:**


**5:00 PM**

(295) **Mixed Rejection Is a Low Frequency Event and Not Just Cellular Rejection and C4d Deposition in the Cardiac Allograft:**

C. D. Tan¹, M. Askar², E. R. Rodriguez¹. ¹Anatomic Pathology, Cleveland Clinic, Cleveland, OH, ²Transplantation Center, Cleveland Clinic, Cleveland, OH.

**5:15 PM**

(296) **miRNAs as Biomarkers of Rejection in Heart Transplantation:**

M. Tible¹, A. Loupy², D. Verneley², P. Rouvier², S. Varnous², C. Suberbielle¹, T. Beuscart¹, R. Guillemaud¹, X. Jouven¹, P. Bruneval¹, J. Duong Van Huyen¹. ¹Hôpital Européen Georges Pompidou, Paris, France, ²Hôpital Necker, Paris, France, ³PARCC, Paris, France, ⁴Hôpital La Pitié Salpêtrière, Paris, France, ⁵Hôpital Saint Louis, Paris, France.
4:00 PM – 5:30 PM

CONCURRENT SESSION 38

Innovative Pharmacotherapeutic Approaches to Thoracic Transplant and Mechanically Assisted Patients (Gaslamp CD)

CHAIRS: Rochelle M. Gellatly, PharmD and Tamara E. Claridge, PharmD (PHARM, HTX, LTX, MCS)

4:00 PM (297) First Experience With the Novel Proteasome Inhibitor Carfilzomib for Antibody Mediated Rejection After Lung Transplantation; C. R. Ensor1, A. Zeevi2, M. R. Morrell3, S. A. Yousem4, J. D'Cunha5, J. M. Pilewski1, C. Bermudez2, M. A. Shullo1, J. J. Teuteberg1, J. F. McDyer1. 1Pharmacy and Therapeutics, University of Pittsburgh, Pittsburgh, PA, 2Medicine, University of Pittsburgh, Pittsburgh, PA, 3Pathology, University of Pittsburgh, Pittsburgh, PA, 4Surgery, University of Pittsburgh, Pittsburgh, PA.


4:30 PM (299) Terbutaline for Treatment of Sinus Node Dysfunction Following Heart Transplantation; C. T. Doligalski1, C. Sammons1, M. W. Weston1. 1Pharmacy, Tampa General Hospital, Tampa, FL, 2Cardiology, Tampa General Medical Group, Tampa, FL.

4:45 PM (300) Tacrolimus Pharmacokinetic Modeling Predicts Dose Requirement in Pediatric Heart Transplant Recipients; B. Taylor1, C. Castleberry2, A. Vinks3, I. Wilmot2, C. Chin2. 1Heart Institute/Pharmacy, Cincinnati Children's Hospital, Cincinnati, OH, 2Heart Institute, Cincinnati Children's Hospital, Cincinnati, OH, 3Clinical Pharmacology, Cincinnati Children's Hospital, Cincinnati, OH.

5:00 PM (301) Effect of CYP3A4*22 and CYP3A5 Combined Genotypes on Tacrolimus Disposition in Heart Transplantation; A. Vu1, R. L. Page2, N. Roscoe1, J. A. Lindenfeld3, C. L. Aquilante1. 1Department of Pharmaceutical Sciences, University of Colorado, Aurora, CO, 2Department of Clinical Pharmacy, University of Colorado, Aurora, CO, 3Department of Medicine, University of Colorado, Aurora, CO.

3:30 PM – 4:30 PM

MINI ORAL SESSION 7

Improving the Heart Donor (Grand Hall A)

**CHAIRS:** Glenn J.R. Whitman, MD and Carla C. Baan, PhD
(DMD, HTX)

**5:30 PM (303) Thyroid Hormone Therapy in 63,593 Donors: A Retrospective Review of Heart and Lung Procurement:**

D. Novitzky1, Z. Mi2, J. F. Collins2, D. K. Cooper1. 1Starzl Transplantation Institute, University of Pittsburgh, Pittsburgh, PA, 2Cooperative Studies Program Coordinating Center, VA Medical Center, Perry Point, MD.

**5:35 PM (304) Examining Long-Term Outcomes in Heart Transplantation Using Donors With a History of Past and Present Cocaine Use:**


**5:40 PM (305) Heart Transplantation After Ex-Vivo Perfusion of the Donor Hearts: Does it Affect Inotropic Use and Hospital Stay?:**

A. Ardehali1, D. Mancini2, Y. Naka2, J. Kobashigawa3, F. Esmai-lian4, E. Hsich3, E. Soltesz4, M. Deng1. 1UCLA School of Medicine, Los Angeles, CA, 2New York Presbyterian Hospital/Columbia Medical Center, New York, NY, 3Cedars-Sinai Heart Institute, Los Angeles, CA, 4Cleveland Clinic, Cleveland, OH.

**5:45 PM (306) Excellent Long-Term Survival with Extended Ischemic Time in Orthotopic Heart Transplantation:**


**5:50 PM (307) Differences in Regional Recipient Waitlist Time and Pre- and Post-Transplant Mortality Following the 2006 UNOS Policy Changes in the Donor Heart Allocation Algorithm:**

P. Schulze1, S. Kitada2, K. Clerkin2, Z. Jin2, D. M. Mancini2. 1Department of Medicine, Division of Cardiology, Columbia University Medical Center, New York, NY, 2Columbia University Medical Center, New York, NY.

**6:00 PM (309) Heart Transplantation With Organs Procured After Cardio-Circulatory Death and the Organ Care System. Assessment and Reconditioning of Hearts in a Porcine Model:**

D. García Sáez1, A. Elbetanony1, P. Lezberg2, A. Hassanein1, B. Zych1, A. Sabashnikov1, P. Mohite1, N. Patil1, A. Weymann1, A. R. Simon1. 1Harefield Hospital NHS Trust, Harefield, London, United Kingdom, 2TransMedics, Boston, MA.

**6:05 PM (310) Initial Experience With the Organ Care System in High Risk Donor/Recipient Combination Orthotopic Heart Transplantation (OCTx):**

6:10 PM  (311) Case Report of Cardiac Allografts Retrieved From Human Donation After Circulatory Death (DCD) Donors – Assessment on Ex-Vivo Beating Heart Perfusion Device; A. Iyer1, L. Gao1, M. Hicks1, G. Kumarakasinghe1, P. Jansz2, A. Jabbour3, S. Al-Soufi1, A. Aneman1, G. Flynn1, A. Rajamani1, A. Cheng2, R. Raper1, D. Goh1, M. MacPartlin10, P. Saul11, K. Dhital2, P. Macdonald. 1Transplantation Lab, Victor Chang Cardiac Research Institute, Darlinghurst, Australia, 2Heart & Lung Transplant Unit, St Vincent’s Hospital, Darlinghurst, Australia, 3Intensive Care Unit, St Vincent’s Hospital, Darlinghurst, Australia, 4Intensive Care Unit, Liverpool Hospital, Sydney, Australia, 5Intensive Care Unit, Prince of Wales Hospital, Sydney, Australia, 6Intensive Care Unit, Nepean Hospital, Sydney, Australia, 7Intensive Care Unit, St George Hospital, Sydney, Australia, 8Intensive Care Unit, Royal North Shore Hospital, Sydney, Australia, 9Intensive Care Unit, Westmead Hospital, Sydney, Australia, 10Intensive Care Unit, Wollongong Hospital, Wollongong, Australia, 11Intensive Care Unit, Newcastle Hospital, Newcastle, Australia.

6:15 PM  (312) Assessment of Myocardial Performance During Ex-Vivo Heart Perfusion; C. W. White1, Y. Li2, A. Müller2, E. Ambrose2, B. Hiebert1, T. W. Lee3, R. C. Arora1, G. Tian1, J. Nagendran2, L. Hyskho1, D. H. Freed1. 1Cardiac Surgery, University of Manitoba, Winnipeg, MB, Canada, 2Institute of Cardiovascular Sciences, St. Boniface Research Center, Winnipeg, MB, Canada, 3Anesthesia and Perioperative Medicine, University of Manitoba, Winnipeg, MB, Canada, 4National Research Council Institute for Biodiagnostics, Winnipeg, MB, Canada, 5Cardiac Surgery, University of Alberta, Edmonton, AB, Canada.

6:20 PM  (313) Donor Treatment with N-Octanoyl Dopamine in Brain-Dead Rats Improves Both Donor and Graft Left Ventricular Function After Heart Transplantation; G. Szabo1, S. Li2, S. Korkmaz2, R. Spindler2, T. Radovits3, S. Loganathan1, P. Hegedüüs1, L. Tao1, S. Höger2, M. Karck1, B. Yard2. 1Department of Cardiac Surgery, University of Heidelberg, Heidelberg, Germany, 2Department of Clinical Pharmacology Mannheim, University of Heidelberg, Mannheim, Germany, 3Heart Center, Semmelweis University, Budapest, Hungary, 4Department of Cardiac Surgery, Wuhan Asia Heart Hospital, Wuhan, China.

6:25 PM  (314) Functional Resuscitation of Hearts Preserved in Somah at Subnormothermia: A Comparative Study; S. K. Lowalekar1, H. Cao1, X. Lu1, P. R. Treanor2, H. S. Thatte1. 1Surgery, Harvard Medical School, Boston, MA, 2Surgery, VA Boston Healthcare System, Boston, MA.
MINI ORAL SESSION 8

Immunology and the Child in Heart Transplantation (Gaslamp AB)

CHAIRS: Charles E. Canter, MD and Janet N. Scheel, MD (Peds, HTX, Path)

5:30 PM (315) **Low Body Mass Index Is Associated with Increased Waitlist Mortality Among Children Listed for Heart Transplantation:**

5:35 PM (316) **Predictors of Long-Term Survival after Pediatric Heart Transplantation Change with Age:**
M. S. Khan1, T. Alsaied2, F. Zafar1, C. D. Castleberry1, R. Bryant III1, I. Wilmot1, J. L. Jefferies1, D. L. Morales1. 1Cardiothoracic Surgery, Cincinnati Children’s Hospital Medical Center, Cincinnati, OH, 2Pediatrics, Cincinnati Children’s Hospital Medical Center, Cincinnati, OH, 3Cardiology, Cincinnati Children’s Hospital Medical Center, Cincinnati, OH.

5:40 PM (317) **1-Year Mortality in Adult Congenital Heart Disease Heart Transplant Recipients: Can a Risk Score Be Used to Identify Those at Highest Risk?**
L. J. Burchill1, L. B. Edwards2, J. Stehlik3, A. I. Dipchand4, H. J. Ross5. 1Adult Congenital Heart Disease, Oregon Health Sciences University, Portland, OR, 2International Society of Heart and Lung Transplant Registry, Addison, TX, 3University of Utah, Salt Lake City, UT, 4Hospital for Sick Children, Toronto, ON, Canada, 5Cardiac Transplant Program, Toronto General Hospital, Toronto, ON, Canada.

5:45 PM (318) **Evaluating Pediatric Heart Re-transplant Candidates: Using a Risk Prediction Model to Estimate Early Mortality after Re-Transplant:**
S. L. Siehr1, S. A. Hollander1, K. Gauvreau2, D. N. Rosenthal1, T. P. Singh1, B. Kaufman1, J. Yeh1, C. S. Almond2. 1Pediatric Cardiology, Stanford University School of Medicine, Palo Alto, CA, 2Pediatric Cardiology, Harvard Medical School, Boston, MA.

5:50 PM (319) **Prevalence of BK Polyomavirus Infection and Association with Renal Function in Pediatric Heart Transplant Recipients:**
A. L. Ducharme-Smith1, A. E. Bobrowski2, B. Z. Katz2, C. L. Backer4, E. Pahl1. 1Northwestern Feinberg School of Medicine, Chicago, IL, 2Nephrology, Ann & Robert H. Lurie Children’s Hospital, Chicago, IL, 3Infectious Disease, Ann & Robert H. Lurie Children’s Hospital, Chicago, IL, 4Cardiovascular-Thoracic Surgery, Ann & Robert H. Lurie Children’s Hospital, Chicago, IL, 5Medical Director, Heart Transplant Program, Ann & Robert H. Lurie Children’s Hospital, Chicago, IL.

5:55 PM (320) **Risk Factors for Sudden Death in Children with Cardiac Allograft Vasculopathy:**
B. J. Hong1, K. Sexson Tejtel1, A. Jeeva1, A. G. Cabrera1, J. F. Price1, J. S. Heinle1, W. J. Dreyer1, S. W. Denfield1. 1Pediatric Cardiology, Baylor College of Medicine/Texas Children’s Hospital, Houston, TX, 2Pediatric Cardiothoracic Surgery, Baylor College of Medicine/Texas Children’s Hospital, Houston, TX.
6:00 PM  (321)  Antithymocyte Globulin But Not Basiliximab Is Beneficial After Infant Heart Transplantation – Analysis of the UNOS Database;

6:05 PM  (322)  C1q Testing in Pediatric Heart Transplant Recipients at Risk for Antibody Mediated Rejection;
E. Albers1, R. Boucek1, M. Kemna1, S. Law2, P. Warner2, Y. Law1. 1Pediatric Cardiology, Seattle Children’s Hospital, Seattle, WA, 2Puget Sound Blood Center, Seattle, WA.

6:10 PM  (323)  How Does Donor Specific Antibody Relate to Biopsy-diagnosed Antibody-mediated Rejection after Pediatric Heart Transplantation?;
A. Ware1, G. Snow1, E. Hammond1, D. V. Miller1, J. Stehlik4, A. G. Kfoury3, A. Eckhauser4, D. Eckels5, M. Everitt1. 1University of Utah, Salt Lake City, UT, 2Intermountain Medical Center, Salt Lake City, UT, 3Intermountain Medical Center/UTAH Cardiac Transplant Program, Salt Lake City, UT, 4University of Utah/UTAH Cardiac Transplant Program, Salt Lake City, UT, 5Pathology, University of Utah, Salt Lake City, UT.

6:15 PM  (324)  C4d Deposition is a Marker for Pan Cardiac Vasculopathy after Heart Transplantation;

6:20 PM  (325)  Relative Importance of Antibodies Against Class I and Class II Human Leukocyte Antigens on Graft Survival in Pediatric Heart Transplant Recipients: An Analysis of the United Network for Organ Sharing Database;

6:25 PM  (326)  Is MFI Value a Solid Ground to Listing Unacceptable HLA Antigens;
A. Nikaein1, J. Hunt1, M. Lerman1. 1Transplant Immunology, Texas Medical Specialty, Inc., Dallas, TX, 2Transplant Center, Medical City Dallas Hospital, Dallas, TX, 3Transplant Department, Medical City Dallas Hospital, Dallas, TX.
5:30 PM – 6:30 PM

MINI ORAL SESSION 9

Quality of Life, Ethics, Policy and Economics in MCS and Thoracic Transplant (Gaslamp CD)

CHAIRS:
Annette J. Devito Dabbs, PhD, RN and Oliver Mauthner, PhD (PEEQ, NHSAH)

5:30 PM (327) Heart Failure Symptom Clusters and Functional Status;
J. Salyer1, M. P. Flattery2, J. K. Herr3. 1Department of Adult Health, Virginia Commonwealth University School of Nursing, Richmond, VA, 2Pauley Heart Center, Virginia Commonwealth University Health System, Richmond, VA, 3Quality & Compliance Department, Johnston-Willis Hospital, Richmond, VA.

5:35 PM (328) Physical Outcomes Post Paediatric Lung Transplant – Implications of Extra-Corporeal Membrane Oxygenation (ECMO);

5:40 PM (329) The Prevalence of the Frailty Syndrome in Advanced Heart and Lung Failure;
D. Carter1, M. Hannu2, E. Montgomery3, M. Harkess3, S. Shaw1, N. De Tullio1, K. Cooper1, K. Wilhelm3, A. Havyk1, P. S. Macdonald1. 1Faculty of Medicine, Notre Dame University, Sydney, Australia, 2Occupational Therapy, St. Vincent’s Health Network, Sydney, Australia, 3Heart & Lung Transplant Unit, St. Vincent’s Health Network, Sydney, Australia, 4Liaison Psychiatry, St. Vincent’s Health Network, Sydney, Australia.

5:45 PM (330) Depression and Social Isolation at Time of Wait Listing Reduce Survival Up to 5 Years After Heart Transplantation – Results from the Waiting for a New Heart Study;

5:50 PM (331) Relationship Between Candidate Psychosocial Risk Profile, Post-Implant Medical Compliance and Clinical Outcomes of LVAD Therapy;
K. Lietz, K. Woodhouse, A. Branch, J. Spruill, L. Lewis-McGowan, M. McGrath, J. Herre. Division of Advanced Heart Failure, Sentara Norfolk General Hospital, Norfolk, VA.

5:55 PM (332) Impact of Donor and Recipient Socio-economic Status (SES) on Outcomes in Adult Heart Transplantation: Does It Really Matter?

6:00 PM (333) Socio-Economic Classification Is a Predator of Long Term Survival in Patients With Left Ventricular Assist Device;
(334) Success of Left Ventricular Assist Device Therapy in Uninsured Patients;

(335) A Zero 90-Day Mortality After Lung Transplantation – What Is the Price?;
M. Zemtsovski1, P. F. Jensen1, M. Østergaard1, M. Perch3, D. Steinbrüchel2, M. Iversen2. 1Department of Cardiothoracic Anaesthesia, Copenhagen University Hospital, Rigshospitalet, Copenhagen, Denmark, 2Department of Cardiology – Division of Lung Transplantation, Copenhagen University Hospital, Rigshospitalet, Copenhagen, Denmark, 3Department of Cardiothoracic Surgery, Copenhagen University Hospital, Rigshospitalet, Copenhagen, Denmark.

(336) Everolimus and Cyclosporine Equally Improve QoL in De Novo Heart Transplanted Patients: The Results of a Randomized Controlled Trial (SCHEDULE Trial);
A. Relbo1, I. Grov1, B. Andersson2, F. Gustafsson2, H. Eiskjær4, G. Rådegran5, E. Gude1, K. Jansson6, D. Solbu1, V. Sigurdardottir6, S. Arora1, G. Dellgren8, A. K. Andreassen1, L. Gullestad1. 1Department of Cardiology, Oslo University Hospital – Rikshospitalet, Oslo, Norway, 2Department of Cardiology, Sahlgrenska University Hospital, Gothenburg, Sweden, 3Department of Cardiology, Copenhagen University Hospital, Copenhagen, Denmark, 4Department of Cardiology, Skejby University Hospital, Aarhus, Denmark, 5The Clinic for Heart Failure and Valvular Disease, Skåne University Hospital and Lund University, Lund, Sweden, 6Dept of Cardiology County Hospital, Linkoping University, Linkoping, Sweden, 7Novartis Norge AS, Oslo, Norway, 8Transplant Institute, Sahlgrenska University Hospital, Gothenburg, Sweden.

(337) Transplant Pharmacist Evaluation Prior To Heart Transplantation Uncovers Medication Noncompliance as a Common Issue;
M. Shullo1, C. Yost2, T. Sabatine4, R. Ramani2, R. Kormos2, J. Bhama2, R. Zomak2, C. Bermudez2, M. Mathier2, J. Teuteberg2. 1Department of Pharmacy and Therapeutics, University of Pittsburgh, Pittsburgh, PA, 2Heart and Vascular Institute, UPMC, Pittsburgh, PA.

(338) Cost Effectiveness of Detection of Tamponade After Postcardiac Surgery By Miniaturized Hemodynamic Transesophageal Echocardiogram (hTEE);
MINI ORAL SESSION 10

VADs Gone Bad, Complications after MCS (Grand Hall B)

**CHAIRS:** M. Angela Rajek, MD and Leslie W. Miller, MD

**MCS, HF**

**5:30 PM** (339) *Pre-emptive ID Specialist Consultation Reduces MCS Drive Line Infections;*
M. Caccamo1, Y. Hellman1, I. Gradus-Pizlo1, A. Malik1, J. Pickrell1, T. Wozniak2, Z. Hashmi2, I. Wang3, A. Hadi3. 1Indiana University, Indianapolis, IN, 2Indiana University Health, Indianapolis, IN.

**5:35 PM** (340) *Development of De-Novo Aortic Valve Incompetence in Patients With the Continuous Flow Heartware® Ventricular Assist Device;*
S. K. Bhagra1, C. J. Bhagra1, M. Taylor1, I. A. Fazal1, G. Parry1, M. MacGowan1, S. Schueler1, 1Cardiology, Freeman Hospital, Newcastle Upon Tyne, United Kingdom, 2Respiratory, Freeman Hospital, Newcastle Upon Tyne, United Kingdom, Cardiotoracic Surgery, Freeman Hospital, Newcastle Upon Tyne, United Kingdom.

**5:40 PM** (341) *Subcostal vs. Sternotomy Device Exchanges: Comparison of Long-Term Mortality and Re-Exchange;*
A. P. Levin1, N. Uriel1, T. Ota1, M. Dionizovic-Dimano1, K. P. Mody1, A. R. Garan1, P. C. Colombo1, M. Yuze1, Y. Naka2, H. Takayama3, U. P. Jorde1. 1Medicine, Columbia University, New York, NY, 2Surgery, Columbia University, New York, NY.

**5:45 PM** (342) *Intraplatelet Reactive Oxygen Species, Mitochondrial Damage and Platelet Apoptosis Augment Non-Surgical Bleeding in Heart Failure Patients Supported By Continuous-Flow Left Ventricular Assist Device (CF-LVADs);*
N. K. Mondal1, E. N. Sorensen1, N. Hiivala2, E. D. Feller3, S. Pham3, B. P. Griffith1, Z. J. Wu1. 1Department of Surgery, University of Maryland School of Medicine, Baltimore, MD, 2Department of Clinical Engineering, University of Maryland Medical Center, Baltimore, MD, 3Department of Medicine, University of Maryland School of Medicine, Baltimore, MD.


**5:55 PM** (344) *Factors Related to Pump Thrombosis at Select Medium to High Volume Centers;*
C. T. Klodell1, H. T. Massey2, R. Adamson3, D. Dean4, D. Horstman-Shoff5, J. Ramson5, C. T. Salerno6, J. Cowger7, J. Aranda8, L. Chen9, J. W. Long1, K. S. Sundareswaran1, D. J. Farn1, W. Dembitsky5. 1Division of Thoracic and Cardiovascular Surgery, University of Florida, Gainesville, FL, 2University of Rochester Medical Center, Rochester, NY, 3Sharp Memorial Hospital, San Diego, CA, 4Piedmont Heart Institute, Atlanta, GA, 5INTEGRIS Baptist Medical Center, Oklahoma City, OK, 6Baptist Health Heart Institute, Little Rock, AR, 7St. Vincent Heart Center of Indiana, Indianapolis, IN, 8Division of Cardiology, University of Florida, Gainesville, FL, 9Research and Scientific Affairs, Thoratec Corporation, Pleasanton, CA.
6:00 PM  (**345**) No Difference in Pump Thrombosis in Heartmate II Patients With Gelatin Sealed and Unsealed Vascular Grafts; K. S. Sundareswaran, D. J. Farrar. Research and Scientific Affairs, Thoratec Corporation, Pleasanton, CA.

6:05 PM  (**346**) LVAD Exchange for Thrombosis Is Associated with Higher Recurrent Rates of Hemolysis, Thrombosis, and Death; A. M. Andrusska, M. Nassif, E. Novak, G. A. Ewald, S. J. LaRue, S. C. Silvestry, A. Itoh. 1Department of Cardiology, Washington University School of Medicine, St. Louis, MO, 2Department of Cardiothoracic Surgery, Washington University School of Medicine, St. Louis, MO.


6:15 PM  (**348**) Post Cardiopulmonary Bypass Vasoplegic Syndrome in Continuous Flow Left Ventricular Assist Devices Is Associated With Adverse Outcomes; M. Chen, B. Griffin, K. Ashley, M. Domanski, G. Fischer. 1Cardiology, Mount Sinai Hospital, New York, NY, 2Anesthesiology, Mount Sinai Hospital, New York, NY, 3Cardiothoracic Surgery, Mount Sinai Hospital, New York, NY.


MINI ORAL SESSION 11

Heart Transplant: Monitoring and Immunosuppression
(Grand Hall C)

CHAIRS:
Bruno Reichart, MD and Shelley Hankins, MD
HTX, PHARM, HF

5:30 PM

The Incidence of Solid Tumours After Heart Transplantation Has Not Declined in the Last Decade. Data from the Spanish Post-Heart Transplant Tumor Registry;

1Heart Transplant Unit, Hospital Universitario A Coruña, La Coruña, Spain, 2Hospital Universitario i Politècnic La Fe, Valencia, Spain, 3Hospital Universitario Puerta de Hierro, Madrid, Spain, 4Hospital Universitario Marques de Valdecilla, Santander, Spain, 5Hospital Universitario 12 de Octubre, Madrid, Spain, 6Hospital General Universitario Gregorio Maranon, Madrid, Spain, 7Hospital Universitario Reina Sofia, Cordoba, Spain, 8Hospital Santa Creu i Sant Pau, Barcelona, Spain, 9Hospital Universitario de Bellvitge, Barcelona, Spain, 10Hospital Universitario Virgen del Rocio, Sevilla, Spain, 11Hospital Universitario Central de Asturias, Asturias, Spain, 12Clinica Universidad de Navarra, Pamplona, Spain, 13Hospital Clinico i Provincial, Barcelona, Spain, 14Hospital Universitario Miguel Servet, Zaragoza, Spain, 15Hospital Universitario Virgen de la Arrixaca, Murcia, Spain, 16Hospital Clinico Universitario de Valladolid, Valladolid, Spain, 17Instituto Universitario de Ciencias de la Salud. Universidad de A Coruña, La Coruña, Spain.

Coronary Vasomotor Dysfunction Indicates Non-stenotic Coronary Angiographic and Biopsy-proven Vasculopathy in Cardiac Transplant Recipients;
N. E. Hiemann1, R. Meyer1, S. Dreysse2, C. Klein3, P. Breit2, R. Hetzer1, E. Wellnhofer1. 1Cardiothoracic and Vascular Surgery, Deutsches Herzzentrum Berlin, Berlin, Germany, 2Cardiology, Deutsches Herzzentrum Berlin, Berlin, Germany.

5:40 PM

Struggle for (Graft-) Survival: Long-Term Results Comparing Standard Therapy With Tacrolimus/Mycophenolate Mofetil Versus De-Novo Low-Dose Tacrolimus/Sirolimus Therapy 10 Years After Heart Transplantation;
S. Guethoff1, K. Stroeh1, M. Koenig1, B. M. Meiser2, M. Zaruba1, C. Grimninger2, B. Reichart3, P. Ueberfuhr1, C. Hagl1, I. Kaczmarek1.
1Department of Cardiac Surgery, Ludwig-Maximilians University Munich, Germany, Munich, Germany, 2Transplantation Center, Ludwig-Maximilians University Munich, Germany, Munich, Germany, 3Department of Cardiology, Ludwig-Maximilians University Munich, Germany, Munich, Germany, 4Walter-Brendeel-Centre of Experimental Medicine, Ludwig-Maximilians University Munich, Germany, Munich, Germany.

5:45 PM

Exercise Capacity in De-Novo Heart Transplant Recipient With Everolimus Vs Conventional CNI Based Immunosuppression. The Results of a Randomized Trial (SCHEDULE);
E. Gude1, S. Bartfay2, B. Andersson3, V. Sigurdardottir2, W. Stueflotten2, L. Gullestad1, A. Andreassen1. 1Dep. of Cardiology, Oslo University Hospital, Rikshospitalet, Oslo, Norway, 2Dep. of Cardiology, Sahlgrenska University Hospital, Gothenburg, Sweden.
5:50 PM (355) Long-term Outcome of Sirolimus (SRL) Based Immunosuppression (IS) in Heart Transplant Patients; S. Wallner¹, A. Aliabadi², D. Dunkler³, K. Uyanik-Uenal⁴, S. Mahr⁴, J. Goekler¹, G. Laufert¹, A. Zuckermann⁴. ¹Department of Cardiac Surgery, Medical University of Vienna, Vienna, Austria, ²Department of Medical Statistics, Medical University of Vienna, Vienna, Austria.


6:00 PM (357) Gene Expression Profile Score Variability Characteristics: Analysis of 49,836 Tests From 12,177 Heart Transplant Patients; A. Kao¹, P. J. Arnold², D. Hiller³. ¹Cardiology, St. Luke’s Mid America Heart Institute, Kansas City, MO, ²Expression Diagnostics, Brisbane, CA.


6:15 PM (360) Cardiac MRI of Heart Transplant Recipients With Previous CMV Infection Demonstrates Ventricular Hypertrophy and Dysfunction; C. Butler¹, J. Preiksaitis², R. Singh³, M. Toma³, R. Thompson⁴, K. Chow⁵, D. Kim⁶, M. Haykowsky⁷, G. Pearson¹, I. Paterson¹. ¹Mazankowski Alberta Heart Institute, Edmonton, AB, Canada, ²Division of Infectious Disease, Edmonton, AB, Canada, ³Division of Cardiology, St. Paul’s Hospital, University of British Columbia, Vancouver, BC, Canada, ⁴Biomedical Engineering, University of Alberta, Edmonton, AB, Canada, ⁵Physical Therapy, University of Alberta, Edmonton, AB, Canada.

6:20 PM (361) Cardiovascular MRI Imaging Independently Predicts Adverse Cardiovascular Events in Heart Transplant Recipients; C. Butler¹, D. Kim², M. Toma³, R. Thompson⁴, K. Chow⁵, M. Haykowsky⁷, G. Pearson¹, I. Paterson¹. ¹Mazankowski Alberta Heart Institute, Edmonton, AB, Canada, ²Division of Cardiology, St. Paul’s Hospital, University of British Columbia, Vancouver, BC, Canada, ³Biomedical Engineering, University of Alberta, Edmonton, AB, Canada, ⁴Physical Therapy, University of Alberta, Edmonton, AB, Canada.
6:25 PM  (362) Invasive Fungal Infections After Heart Transplantation: A Single Center Experience; I. Echenique1, M. Angarone2, R. Gordon2, J. Rich2, A. Anderson2, E. McGee1, T. Abicht3, G. Ferguson3, V. Stosor3. 1Medicine and Surgery, Northwestern University Feinberg School of Medicine, Chicago, IL, 2Medicine, Northwestern University Feinberg School of Medicine, Chicago, IL, 3Surgery, Northwestern University Feinberg School of Medicine, Chicago, IL, 4Northwestern Memorial Hospital, Chicago, IL.

5:30 PM – 6:30 PM

MINI ORAL SESSION 12

Lung Transplant: Candidate Selection and Genetic Variation (Seaport H)

CHAIRS: Miranda Paraskeva, MBBS and David Lederer, MD

(LTX, BSTR, HTX)

5:30 PM  (363) Lung Transplantation in Recipients >70 Years Old: A Single Center Experience; M. R. Morrell1, C. Gries1, M. Crespo1, B. Johnson1, A. Hayanga2, J. Bhama2, N. Shigemura2, J. D'Cunha2, C. Bermudez2, J. Pilewski1. 1Division of Pulmonary, Allergy and Critical Care, University of Pittsburgh, Pittsburgh, PA, 2Division of Cardiothoracic Surgery, University of Pittsburgh, Pittsburgh, PA.

5:35 PM  (364) A Contemporary Analysis of Early Outcomes Following Lung Transplantation in the Elderly Using a National Registry: Growing Finer with Time; A. J. Hayanga1, J. Aboagye2, H. E. Kaiser3, J. Yang3, N. Shigemura2, J. D'Cunha2, M. Morrell3, J. K. Bhama3, C. A. Bermudez1. 1Cardiothoracic Surgery, University Of Pittsburgh Medical Center, Pittsburgh, PA, 2Epidemiology, Johns Hopkins School of Public Health, Baltimore, MD, 3Anesthesiology and Critical Care, University Of Pittsburgh Medical Center, Pittsburgh, PA, 4Biostatistics and Epidemiology, Johns Hopkins School of Public Health, Baltimore, MD, 5Pulmonary Medicine and Critical Care, University Of Pittsburgh Medical Center, Pittsburgh, PA.

5:40 PM  (365) Determining Eligibility for Lung Transplantation: A Nationwide Assessment of Cutoff Glomerular Filtration Rates; A. A. Osho1, A. W. Castleberry2, L. D. Snyder3, A. M. Ganapathi2, S. Hirji1, M. Stafford-Smith2, S. S. Lin2, R. D. Davis3, M. G. Hartwig2. 1School of Medicine, Duke University Medical Center, Durham, NC, 2Department of Surgery, Duke University Medical Center, Durham, NC, 3Department of Medicine, Duke University Medical Center, Durham, NC.

5:45 PM  (366) Impact of Pre-Transplant Staphylococcus Aureus Colonization on Post-Transplant S. aureus Infection Among Cystic Fibrosis Lung Transplant Recipients; J. St-Pierre1, C. Poirier1, J. Chalaoui1, P. Ferraro5, V. Martel-Laferriere6, G. C. Koh6, M. Luong1. 1University of Montreal Health Center, Montreal, QC, Canada, 2Respirology, University of Montreal Health Center, Montreal, QC, Canada, 3Radiology, University of Montreal Health Center, Montreal, QC, Canada, 4Thoracic


6:00 PM (369) Candidate Gene Association Study in BOS; J. M. Diamond1, R. Feng2, W. Lin3, R. Shah1, E. Cantu4, E. Demissie5, M. Rushefskin6, D. Lederer7, S. Bhorade1, M. Crespo5, A. Weinacker6, J. Belperio1, P. Shaht8, L. Ware9, D. Wilkes10, J. Orens11, V. Lama11, K. Wille12, S. Palmer13, S. Kawut1, J. Christie1. 1Medicine, University of Pennsylvania, Philadelphia, PA, 2University of Pennsylvania, Philadelphia, PA, 3Medicine, Columbia University, New York, NY, 4Medicine, University of Chicago, Chicago, IL, 5Medicine, University of Pittsburgh, Pittsburgh, PA, 6Medicine, Stanford University, Stanford, CA, 7Medicine, UCLA, Los Angeles, CA, 8Medicine, Johns Hopkins University, Baltimore, MD, 9Medicine, Indiana University, Indianapolis, IN, 10Medicine, University of Michigan, Ann Arbor, MI, 11Medicine, University of Alabama-Birmingham, Birmingham, AL, 12Duke University, Durham, NC.

6:05 PM (370) Whole Exome Sequencing: A Novel Strategy to Understand Chronic Lung Allograft Dysfunction (CLAD); J. L. Todd1, T. J. Urban1, C. A. Finlen Copeland1, F. L. Kelly1, D. B. Goldstein2, S. M. Palmer1. 1Department of Medicine, Duke University Medical Center, Durham, NC, 2Department of Molecular Genetics and Microbiology, Duke University Medical Center, Durham, NC.

6:10 PM (371) What Your Lung Transplant Candidates with Chronic Obstructive Pulmonary Disease (COPD) Want and Expect from Transplant; C. J. Gries1, M. Budev2, L. D. Snyder3, J. M. Pilewski1, M. Dew4, A. DeVito-Dabbs5, C. Bermudez6, S. J. Patterson1, D. B. White7. 1Pulmonary, Allergy and Critical Care Medicine, University of Pittsburgh Medical Center, Pittsburgh, PA, 2Pulmonary, Allergy and Critical Care Medicine, Cleveland Clinic, Cleveland, OH, 3Medicine-Pulmonary, Duke University, Durham, NC, 4Psychiatry, Psychology, Epidemiology, Biostatistics and Clinical and Translational Science, University of Pittsburgh Medical Center, Pittsburgh, PA, 5School of Nursing and Center for Bioethics & Health Law, University of Pittsburgh Medical Center, Pittsburgh, PA, 6Surgery, University of Pittsburgh Medical Center, Pittsburgh, PA, 7Critical Care Medicine, University of Pittsburgh Medical Center, Pittsburgh, PA.

6:20 PM  (373) Changes in Left and Right Ventricular Function Before and After Lung Transplantation: Serial Echocardiographic Assessment; T. S. Kato¹, H. F. Armstrong², P. Schulze¹, M. Lippel¹, M. Farr¹, M. Bacchetta³, M. N. Bartels², M. Di Tullio¹, S. Homma¹, D. Mancini¹. ¹Department of Medicine, Division of Cardiology, Columbia University Medical Center, New York, NY, ²Department of Rehabilitation and Regenerative Medicine, Columbia University Medical Center, New York, NY, ³Division of Cardiothoracic Surgery, Department of Surgery, Columbia University Medical Center, New York, NY.


5:30 PM – 6:30 PM
MODERATED POSTER SESSION 3 (Harbor and Seaport Foyers) (ALL)

7:00 PM – 9:30 PM
PRESIDENT’S GALA RECEPTION (Pool Deck)
SUNDAY, APRIL 13, 2014

7:00 AM – NOON
REGISTRATION DESK OPEN (Palm Foyer)

7:00 AM – 1:30 PM
SPEAKER READY ROOM OPEN (Balboa ABC)

7:00 AM – 9:15 AM
BOARD OF DIRECTORS MEETING (La Jolla AB)

7:00 AM – 8:00 AM

SUNRISE SYMPOSIUM 11

VAD Teams Working Across Different Countries: How To Do It (Harbor GHI)

CHAIRS: Annemarie Kaan, MCN, RN and Tonya I Elliott, RN, MSN (NHSAH, MCS)

SESSION SUMMARY: At the end of this session, the attendees will be able to discuss the challenges associated with International VAD care. Driveline options, traveling post-MCS, and the care of the VAD patient in the community will be presented with an open panel discussion at the end of the session.

7:00 AM  Driveline Options for Patients Supported with Long Term LVADs: The Newcastle Experience
Neil W Wrightson, RN, Freeman Hospital, Newcastle upon Tyne, United Kingdom

7:15 AM  On the Road Again: When MCS Patients Travel
Desiree Robson, RN BSc (Hons), St. Vincent’s Hospital, Sydney, Australia

7:30 AM  The VAD Patient in the Community
Pamela S. Combs, RN, PhD, Seton Hospital, Austin, TX, USA

7:45 AM  Panel Discussion: How We Do It: How Different Nursing Teams Respond to Common Patient Problems, with: Pam Combs, Megan Maltby, Neil Wrightson and Desiree Robson
**SUNRISE SYMPOSIUM 12**

**Swan Songs and Controversies in Hemodynamics (Seaport H)**

**CHAIRS:** Srinivas Murali, MD and Juan F. Delgado, PhD

**SESSION SUMMARY:** Vasodilator testing, volume loading, and exercise in the cath lab are all areas of great interest and equally great misunderstanding. This session will provide much needed information and discussion on this burgeoning field.

**7:00 AM**  
*Vasodilator Testing in the Cath Lab: Who, Why, and What?*  
Ryan J. Tedford, MD, Johns Hopkins School of Medicine, Baltimore, MD, USA

**7:15 AM**  
Q & A

**7:20 AM**  
*Volume Loading in the Cath Lab: Who, Why and How?*  
Ivan Robbins, MD, Vanderbilt University, Nashville, TN, USA

**7:35 AM**  
Q & A

**7:40 AM**  
*Exercise Hemodynamics: Nuts and Bolts of Performance and Interpretation*  
Susanna Mak, MD, PhD, Mount Sinai Hospital, University of Toronto, Toronto, ON, Canada

**7:55 AM**  
Q & A

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**SUNRISE SYMPOSIUM 13**

**Lab Methods 101: What Everyone Needs to Know to Read Transplant Papers (Gaslamp AB)**

**CHAIRS:** Richard Kirk, MA FRCP FRCPCH and Kimberly Gandy, MD, PhD

**SESSION SUMMARY:** This session offers a clear explanation of select laboratory methods that are used in state-of-the art research manuscripts these days. This session is designed for professionals who do not perform these assays on a regular basis but would like to have a better understanding in order to make sense of current literature. Each talk will explain the laboratory method or assay and then give 1 or 2 examples of how this is used in transplantation.

**7:00 AM**  
*Making Sense of DNA and RNA Assays: Snips, Chips and Arrays*  
Joshua Diamond, MD, University of Pennsylvania, Philadelphia, PA, USA

**7:10 AM**  
Q & A

**7:15 AM**  
*Flow Cytometry: It’s More than Just a Black Box*  
Stephanie T. Yerkovich, PhD, The Prince Charles Hospital, Brisbane, Australia

**7:25 AM**  
Q & A
Why Not Infant Lung Transplantation? (Gaslamp CD)

**CHAIRS:** Christian Benden, MD and Marc G. Schecter, MD

**SESSION SUMMARY:** Less than 100 infant lung transplants have been performed in the world in the last 25 years whereas over 100 infant heart and liver transplants are performed each year. This disconnect suggests that a shortage of organs does not explain this result. Chronic respiratory or cardiopulmonary failure is not rare. A recent report indicates long-term outcome is at least as good for infant lung transplant recipients as for older recipients. This symposium will explore the conundrum.

**7:00 AM**  
**The Problem of the Rare Infant Lung Transplant**  
David L.S. Morales, MD, Cincinnati Children’s Hospital Medical Center, Cincinnati, OH, USA

**7:12 AM**  
**Why Infant Lung Transplant is Such a Good Concept!**  
George Mallory, MD, Texas Children’s Hospital, Houston, TX, USA

**7:25 AM**  
**Why Infant Lung Transplant is Not Such a Good Concept**  
Samuel B. Goldfarb, MD, Children’s Hospital, Philadelphia, PA, USA

**7:37 AM**  
**Case Presentation: ABO Incompatible Lung Transplantation in an Infant**  
Hartmut Grasemann, MD, PhD, Hospital for Sick Children, Toronto, ON, Canada

**7:50 AM**  
**Panel Discussion**
High-Risk Donor: Extending Our Criteria in Times of Organ Shortage (Old Town AB)

CHAIRS: Martha Mooney, MD, FACP and Orla Morrissey, MD (DMD, ID, LF, LTX, HF, HTX)

SESSION SUMMARY: Transmission of viral infections through solid organ transplantation can lead to adverse outcomes for recipients. Despite the use of highly sensitive serologic tests for most common infections, the use of organs from high-risk donors remains controversial. Understanding the risk of transplanting the organ of a high-risk donor on the post-transplant outcome is important to judiciously advice candidates on the waiting list and to provide appropriate post-transplant care.

7:00 AM  Limitation of Current Diagnostics Test for HIV, HBV and HCV: What Can We Miss?  Piedad Ussetti, MD, Hospital Puerta Hierro, Madrid, Spain

7:10 AM  Q & A

7:15 AM  Donors With Hb-core Antibody: Should We Use Them?  Valentina Stosor, MD, Northwestern University, Chicago, IL, USA

7:25 AM  Q & A

7:30 AM  Donors With Hepatitis C  Paolo A Grossi, MD, PhD, University of Insubria, Varese, Italy

7:40 AM  Q & A

7:45 AM  Donors With Documented Infection: Can We Safely Use Them?  Saima Aslam, MD, MS, University of California at San Diego, San Diego, CA, USA

7:55 AM  Q & A
Mechanical Circulatory Support: Bench to Bedside
(Harbor GHI)

CHAIRS: Ivan Netuka, MD, PhD and Stuart D. Russell, MD
(MCS, BSTR)

8:00 AM (375) Weighted Gene Co-expression Network Analysis Reveals Distinct Interaction Patterns in Failing and Recovering Human Myocardium; V. K. Topkara. Cardiology, Columbia University, New York, NY.

8:12 AM (376) Myocardial Regeneration and Recovery with Extracellular Matrix and LVAD Support; M. S. Slaughter1, G. D. Rokosh2, R. G. Matheny3, M. A. Sobieski1, M. Wysoczynski4, M. Solanki2, G. A. Girdharan1, K. G. Soucy1, P. L. Linsky1, G. Monreal1, S. C. Koenig1. 1Surgery, University of Louisville, Louisville, KY, 2University of Louisville, Louisville, KY, 3CorMatrix, Roswell, GA, 4Institute of Molecular Cardiology, University of Louisville, Louisville, KY.


8:36 AM (378) Axial Flow LVAD Support Leads to Increases in Effective Arterial Elastance by Ventriculo-Arterial Uncoupling; Z. Daniel1, C. Del Rio2, B. Youngblood2, R. S. George2, Y. Ueyama2, M. Cismowski1, T. West2, P. I. McConnell3. 1Research Institute, Nationwide Children's Hospital, Columbus, OH, 2Qtest Labs, Columbus, OH, 3Cardiothoracic Surgery, Nationwide Children's Hospital, Columbus, OH.

8:48 AM (379) Do Current Anti-Platelet Agents Truly Provide Protection Against Shear-Mediated Platelet Activation in Mechanical Circulatory Support?; L. Valerio1, P. Tran2, W. Brengle2, M. Hutchinson2, J. Sheriff1, D. Bluestein1, M. J. Slepian1. 1Politecnico De Milan, Milan, Italy, 2University of Arizona, Tucson, AZ, 3Stony Brook University, Stony Brook, NY.

9:00 AM (380) The Effect of Pulsatile and Nonpulsatile Flow on Cerebral Perfusion in Patients with LVADs; W. K. Cornwell1, T. Tarumi2, V. Aengevaeren2, C. Ayers3, P. Divanji1, Q. Fu4, D. Palmer4, M. Drazner4, D. Meyer4, B. Bethea4, J. Hastings4, N. Fujimoto2, S. Shibata2, R. Zhang4, D. Markham4, B. Levine2. 1Cardiology, University of Texas Southwestern Medical Center, Dallas, TX, 2Institute of Exercise and Environmental Medicine, Dallas, TX, 3Cardiology, Emory University, Atlanta, GA.
8:00 AM – 9:15 AM

CONCURRENT SESSION 40

As You Like It – Optimization of Heart Transplant Immunosuppression (Seaport H)

**CHAIRS:** Bruno Meiser, MD and David S. Feldman, MD, PhD

(HTX, PHARM, HF)

8:00 AM (381) Ten-Year Comparison of Prospective Intervention Trials After Heart Transplantation: Tacrolimus/Mycophenolate Mofetil Versus De-Novo Low-Dose Tacrolimus/Sirolimus;

S. Guethoff1, K. Stroeh1, M. Koening1, B. Meiser2, M. Zaruba3, C. Grimminger2, B. Reichart4, P. Ueberfuhr1, C. Hagl1, I. Kaczmarek1.

1Department of Cardiac Surgery, Ludwig-Maximilians University Munich, Germany, Munich, Germany, 2Department of Cardiology, Ludwig-Maximilians University Munich, Germany, Munich, Germany, 3Department of Cardiology, Ludwig-Maximilians University Munich, Germany, Munich, Germany, 4Center for Regenerative Medicine, Ludwig-Maximilians University Munich, Germany, Munich, Germany.

8:12 AM (382) A Novel Allele-Based Measure of HLA Mismatch Predicts Treated Rejection After Heart Transplant;


1Division of Cardiovascular Diseases, Mayo Clinic Arizona, Scottsdale, AZ, 2Department of Surgery, Mayo Clinic Arizona, Phoenix, AZ, 3Division of Health Sciences Research, Section of Biostatistics, Mayo Clinic Arizona, Scottsdale, AZ, 4Division of Hematology and Oncology, Mayo Clinic Arizona, Scottsdale, AZ, 5Center for Regenerative Medicine, Mayo Clinic Arizona, Scottsdale, AZ, 6Division of Gastroenterology and Hepatology, Mayo Clinic Arizona, Scottsdale, AZ, 7Division of Cardiothoracic Surgery and Center for Regenerative Medicine, Mayo Clinic Arizona, Scottsdale, AZ.

8:24 AM (383) Induction With Anti-Thymocyte Globulin After Heart Transplantation Is Associated with Better Long-term Survival Compared to Basiliximab;

L. Lund1, B. Andersson2, J. Stehlik3, J. Nilsson4. 1Cardiology, Karolinska University Hospital, Stockholm, Sweden, 2Surgery, Lund University and Skane University Hospital, Lund, Sweden, 3Cardiology, University of Utah School of Medicine, Salt Lake City, UT, 4Cardiothoracic Surgery, Lund University and Skane University Hospital, Lund, Sweden.

8:36 AM (384) Intravenous Immunoglobulin and Plasmapheresis in Prevention of Antibody Mediated Rejection in Sensitized Recipients in Cardiac Allograft. “Before – After” Treatment Study;


8:48 AM (385) Single Nucleotide Polymorphisms, SNPs, Associated With the Efficacy and Security of Immunosuppressive Treatment in Heart Transplantation;

8:00 AM – 9:15 AM

CONCURRENT SESSION 41

Left Heart Failure, the RV, and Other Types of Pulmonary Hypertension (Gaslamp AB)

CHAIRS: Marc De Perrot, MD and Corey E. Ventetuulo, MD

(Ph, HF, Pharm)

8:00 AM (387) Heart Failure with Preserved Ejection Fraction Induced Reactive Pulmonary Hypertension Lacks Nitric Oxide Vasoreactivity Similar to Pulmonary Arterial Hypertension; J. Salamon1, J. Mazurek2, R. Zolty1. 1Cardiology, Montefiore Medical Center/Albert Einstein College of Medicine, Bronx, NY, 2Cardiology, Hospital of the University of Pennsylvania, Philadelphia, PA.

8:12 AM (388) Differentiating Heart Failure with Preserved Ejection Fraction Induced Pulmonary Hypertension from Pulmonary Hypertension Using Demographic Data and Common Blood Measurements; J. Salamon1, J. Mazurek2, S. Mannem1, R. Zolty1. 1Cardiology, Montefiore Medical Center/Albert Einstein College of Medicine, Bronx, NY, 2Cardiology, Hospital of the University of Pennsylvania, Philadelphia, PA.

8:24 AM (389) Right Ventricular Remodeling in Idiopathic Pulmonary Arterial Hypertension: Concentric Versus Eccentric Hypertrophy; R. Badagliacca1, R. Poscia1, M. Nocioni1, M. Mezzapesa1, M. Francone2, B. Pezzuto2, S. Papa1, C. Gambardella1, A. Nona1, S. Sciomer1, F. Fedele1, C. D. Vizza1. 1Dept. of Cardiovascular and Respiratory Science, Sapienza University of Rome, Rome, Italy, 2Dept. of Radiology, Sapienza University of Rome, Rome, Italy.

8:36 AM (390) Long Term Partial Right Ventricular Support Induces Reverse Remodelling in the Chronic Pressure Overloaded Right Ventricle; T. Verbelen1, P. Claus1, M. Martin2, K. Kasama1, E. Verbeke1, I. Van Tichelen1, D. Burkhoff1, M. Delcroix1, F. Rega1, B. Meyns1. 1Experimental Cardiac Surgery, University of Leuven, Leuven, Belgium.
SUNDAY / APRIL 13

Belgium, 2Cardiovascular Imaging and Dynamics, University of Leuven, Leuven, Belgium, 3CircuLite Inc., Hackensack, NJ, 4Morphology and Molecular Pathology, University of Leuven, Leuven, Belgium, 5Cardiology, Columbia University College of Physicians and Surgeons, New York, NY, 6Clinical and Experimental Medicine, University of Leuven, Leuven, Belgium.

8:48 AM (391) SPHERIC-1 (Sildenafil and Pulmonary HypERTension in COPD): Intention-to-Treat (ITT) Analysis of Safety and Efficacy Data; P. Vitulo1, A. Callari1, L. Martinò1, A. Stanziola2, T. Oggiioni1, F. Meloni4, M. Confalonieri2, D. Libertucci2, P. Rottoli2, R. Poscia4, R. Badagliacca4, D. C. Vizza8. 1Pulmonology Unit, ISMETT-UPMC, Palermo, Italy, 2Respiratory Dept., University of Naples, Naples, Italy, 3Pulmonology Dept., IRCCS foundation S. Matteo, Pavia, Italy, 4Dept. Molecular Medicine, University of Pavia, Pavia, Italy, 5Pulmonology Unit, Cattinara University Hospital, Trieste, Italy, 6Pulmonology Unit, S. Giovanni Battista Hospital, Turin, Italy, 7Respiratory Dept., University of Siena, Siena, Italy, 8Cardiovascular & Respiratory Dept, Sapienza University of Rome, Rome, Italy.

9:00 AM (392) The PROSPECT Registry of Pulmonary Arterial Hypertension (PAH): Description of Patients Who Transitioned From Inhaled Prostacyclin to Intravenous Epoprostenol; H. W. Farber1, R. P. Frantz2, R. J. Schiltz3, K. Chin4, D. Rosenberg5, J. Colvin6, B. K. Hartline6, D. P. Miller7, W. W. Benton8, M. Chakinala8. 1Boston University School of Medicine, Boston, MA, 2Mayo Clinic, Rochester, MN, 3University Hospitals of Cleveland, Cleveland, OH, 4University of Texas Southwestern, Dallas, TX, 5Actelion Pharmaceuticals, Allschwil, Switzerland, 6Actelion Pharmaceuticals US, Inc., South San Francisco, CA, 7ICON Clinical Research, San Francisco, CA, 8Washington University School of Medicine, St. Louis, MO.
Risk Assessment in the Pediatric Heart Candidate
(Gaslamp CD)

**CHAIRS:** Yuk M. Law, MD and Debra A. Dodd, MD
(PEDS, HTX, PATH)

**8:00 AM (393)** Why do Children with Congenital Heart Disease Die on the Waitlist? An Analysis of OPTN Data;

**8:12 AM (394)** Refusing Donors for HLA Sensitization Reasons Results in Increased Mortality in Pediatric Heart Transplant Candidates;

**8:24 AM (395)** Comparison of Listing Strategies for Allosensitized Heart Transplant Candidates: A Decision Model Analysis;
B. Feingold1, S. A. Webber2, C. L. Bryce3, S. Y. Park4, H. E. Tomko3, D. M. Comer5, W. T. Mahle6, K. J. Smith7. 1Pediatric Cardiology, Children’s Hospital of Pittsburgh of UPMC, Pittsburgh, PA, 2Pediatrics, Vanderbilt University, Nashville, TN, 3Health Policy Management, University of Pittsburgh School of Public Health, Pittsburgh, PA, 4Department of Medicine, Division of General Internal Medicine, University of Pittsburgh School of Public Health, Pittsburgh, PA, 5Center for Research on Health Care Data Center, University of Pittsburgh, Pittsburgh, PA, 6Pediatrics, Children’s Healthcare of Atlanta, Emory University School of Medicine, Atlanta, GA, 7Section of Decision Sciences and Clinical Systems Modeling, Department of Medicine, University of Pittsburgh School of Medicine, Pittsburgh, PA.

**8:36 AM (396)** Effect of HLA-C and DQ Matching on Pediatric Heart Transplant Graft Survival;
R. Butts1, A. Atz1, M. Scheurer1, M. Kavarana2, O. Moussa3, A. Burnette4, A. Savage1. 1Pediatrics, Medical University of South Carolina, Charleston, SC, 2Surgery, Medical University of South Carolina, Charleston, SC, 3Pathology and Laboratory Medicine, Medical University of South Carolina, Charleston, SC, 4Transplant Services, Medical University of South Carolina, Charleston, SC.

**8:48 AM (397)** Donor-Specific HLA Alloantibodies: Impact on Cardiac Allograft Vasculopathy and Survival After Pediatric Heart Transplantation;
A. Tran1, D. Fixler1, R. Huang2, T. Mackling1, A. Barnes1, B. B. Das1. 1Division of Pediatric Cardiology, UT South Western Medical Center, Dallas, TX, 2Dept of Research, Children’s Medical Center, Dallas, TX, 3Division of Pediatric Cardiology, Children’s Medical Center, Dallas, TX.

**9:00 AM (398)** Fontan-associated Protein Losing Enteropathy and Heart Transplant: A Pediatric Heart Transplant Study Analysis;
K. R. Schumacher1, D. Nafte1, E. Pruitt2, J. G. Gossett1, M. Carboni1, K. Gulserian1, D. Dodd1, J. Lamour2, S. Pophal3, M. Zamberlan1, R. J. Gajarski1. 1University of Michigan, Ann Arbor, MI, 2University of Alabama-Birmingham, Birmingham, AL, 3Lurie Children’s Hospital, Chicago, IL, 4Duke University, Durham, NC, 5UT-Southwestern, Dallas, TX, 6Vanderbilt University, Nashville, TN, 7The Children’s Hospital at Montefiore, Bronx, NY, 8Phoenix Children’s Hospital, Phoenix, AZ.
Breathing the Microbes: Infections for the Lung Transplant Clinician (Old Town AB)

**CHAIRS:** Piedad Ussetti, MD and Antonio B. Roman, MD, PhD (LTX, ID, BSTR)

**8:00 AM** (399) **Emerging Combination Activity and Resistance Profile for Brincidofovir (CMX001) in CMV Prevention and Treatment:**
S. Foster1, D. Selleseth1, M. Pritchard2, T. Brundage1, H. Mommeja-Marin1, R. Lanier1. 1Chimerix, Inc., Durham, NC, 2University of Alabama, Birmingham, AL.

**8:12 AM** (400) **Performance of (1,3)-β-D-Glucan in Bronchoalveolar Lavage of Lung Transplant Recipients (LTRs) for the Diagnosis of Invasive Pulmonary Aspergillosis (IPA):**
A. Bhaskaran1, L. Singer2, T. Mazzulli3, T. Prochnow1, C. Rotstein1, S. Husain1. 1Transplant Infectious Disease, University of Toronto, Toronto, ON, Canada, 2Multi-organ Transplantation, University of Toronto, Toronto, ON, Canada, 3Department of Microbiology, University of Toronto, Toronto, ON, Canada.

**8:24 AM** (401) **Role of Pentaxrin 3 in Differentiating Invasive Aspergillosis (IA) from Aspergillus Colonization (Ac) in Lung Transplant Recipients:**

**8:36 AM** (402) **Low IgM Anti-Polysaccharide Antibody Response and Severe Infection in a Cohort of Lung Recipients:**
E. Sarmiento1, M. Jaramillo1, J. Navarro1, J. Rodriguez-Molina1, J. Cifrian2, R. Laporta2, P. Ussetti3, C. Bravo3, S. Lopez3, A. De Pablos3, P. Morales4, J. Carbone1. 1Clinical Immunology, Hospital General Universitario Gregorio Marañon, Madrid, Spain, 2Pneumology, Hospital Marques de Valdecilla, Santander, Spain, 3Pneumology, Hospital Universitario Puerta de Hierro, Madrid, Spain, 4Pneumology, Hospital Vall de Hebron, Barcelona, Spain, 5Pneumology, Hospital Universitario Doce de Octubre, Madrid, Spain, 6Pneumology, Hospital Universitario La Fe, Valencia, Spain.

**8:48 AM** (403) **Identifying Optimal Treatment Regimens for Lung and Heart Transplant Patients (LTx, HTx pts) Infected With Extreme-Drug Resistant (XDR) Gram-Negative Bacteria:**

**9:00 AM** (404) **Clinical and Molecular Epidemiologic Characterization of Methicillin-Resistant Staphylococcus aureus (MRSA) Infections Occurring Early After Lung Transplant:**
PLENARY SESSION

(Harbor GHI)

**CHAIRS:** Andreas O. Zuckermann, MD and Hermann C. Reichenspurner, MD, PhD

**9:50 AM**

**CONSENSUS REPORT: Invasive Fungal Infections Among Cardiothoracic Transplant Recipients: Consensus Guidelines and Recommendations From The ISHLT Fungal Expert Panel**

Shahid Husain, MD, MS, Toronto General Hospital, Toronto, ON, Canada

**10:00 AM**

**CONSENSUS REPORT: Updated Guidelines for Lung Transplant Recipient Selection**

David Weill, MD, Stanford University, Stanford, CA, USA

**10:10 AM (405)**

**FEATURED ABSTRACT: Everolimus Initiation With Calcineurin Inhibitor Withdrawal Reduces Allograft Vasculopathy in De-Novo Heart Transplant Recipients:**

S. Atiga1, B. Andersson2, F. Gustafsson3, H. Eiskjær4, G. Rådegran5, L. Aaberget6, I. Eriksen1, E. Gude1, T. Ueland6, P. Aukrust6, D. Solbu7, G. Dølgren7, A. Andreassen1, L. Gullestad1. 1Department of Cardiology; Oslo University Hospital, Rikshospitalet, Oslo, Norway, 2Department of Cardiology, Sahlgrenska University Hospital, Gothenburg, Sweden, 3Department of Cardiology, Copenhagen University Hospital, Copenhagen, Denmark, 4Department of Cardiology, Skejby University Hospital, Aarhus, Denmark, 5The Clinic for Heart Failure and Valvular Disease, Skåne University Hospital and Lund University, Lund, Sweden, 6Research Institute of Internal Medicine, Oslo University Hospital, Rikshospitalet, Oslo, Norway, 7Department of Cardiology, Novartis Norge AS, Oslo, Norway, 8Transplantationscentrum, Sahlgrenska University Hospital, Gothenburg, Sweden.

**10:25 AM**

**INVITED LECTURE: The Invisible Team Member: Family Caregivers of Thoracic Transplant And Mechanical Circulatory Support Patients**

Michael G Petty, PhD, RN, University of Minnesota Medical Center, Minneapolis, MN, USA

**10:45 AM**

**INVITED LECTURE: Trading Risks of Sensitization in Thoracic Transplantation: ABO-Incompatibility to Achieve HLA-Compatibility?**

Lori J West, MD, DPhil, University of Alberta, Edmonton, AB, Canada

**11:15 AM**

**PRESIDENT’S DEBATE: PRO: Stop Treating Secondary PH Right Now!**

Fernando Torres, MD, UT Southwestern Medical Center, Dallas, TX, USA

**11:00 AM (406)**

**FEATURED ABSTRACT: Reconstitution of CMV-Specific Immunity After Heart Transplantation May Guide Customization of Immunosuppressive and Antiviral Strategies: A Prospective Randomized Study:**


**11:30 AM**

**PRESIDENT’S DEBATE: CON: Stop Treating Secondary PH Right Now!**

Harrison W Farber, MD, Boston University School of Medicine, Boston, MA, USA
11:45 AM – NOON
COFFEE BREAK (Palm Foyer)

12:00 PM – 1:15 PM

CONCURRENT SESSION 44

Innovations in Mechanical Circulatory Support Care
(Harbor GHI)

CHAIRS: Murat Sargin, MD and Jack G. Copeland, MD
(MCS, HF)

12:00 PM (407) Left Ventricular (LV) Response to Unloading by Continuous-flow Left Ventricular Assist Devices (LVAD): Axial Vs. Centrifugal?:

12:12 PM (408) From Bench To Bedside: Can the Improvements in LVAD Design Mitigate Adverse Events and Increase Survival Rate?:
V. Tarzia1, G. Di Giammarco2, M. Maccherini2, T. Bottio1, V. Tursi1, M. Maiani3, S. Bernazzali3, M. Foschi2, S. M. Diso2, U. Livi2, G. Sani2, G. Gerosa3. 1Department of Cardiac, Thoracic and Vascular Sciences, Cardiac Surgery, University of Padova, Padova, Italy, 2Cardiac Surgery, University of Chieti, Chieti, Italy, 3Cardiac Surgery, University of Siena, Siena, Italy, 4Cardiac Surgery, University of Udine, Udine, Italy, 5Cardiac Surgery, University of Florence, Florence, Italy.

12:24 PM (409) Left Ventricular Remodeling Following LVAD: Does Pulsatility Matter?:
M. K. Bennett, W. E. Sweet, S. Baicker-McKee, R. C. Starling, N. Moazami, C. S. Moravec. Department of Cardiovascular Medicine, Cleveland Clinic, Cleveland, OH.

12:36 PM (410) Evaluation of Pump Speed Changes with Exercise in Patients with Continuous Flow Ventricular Assist Devices;

12:48 PM (411) TNF as a Predictor of Myocardial Functional Improvement Induced By Left Ventricular Mechanical Unloading:
N. Diakos1, C. Yen1, O. Wever-Pinzon1, C. Selzman1, B. Reid2, J. Stehlik1, A. Kfoury2, R. Alharethi2, J. Nativi1, A. Catino1, C. Davis1, J. Barney1, S. Wright1, A. Koliopoulou1, J. Fang1, D. Li1, S. Drakos1. 1University of Utah, Salt Lake City, UT, 2Intermountain Medical Center, Salt Lake City, UT.

1:00 PM (412) Percutaneous Balloon Occlusion of a Left Ventricular Assist Device Outflow Cannula During Right Heart Catheterization With Pumstop as Part of the Evaluation of Myocardial Recovery:
12:00 PM – 1:15 PM

CONCURRENT SESSION 45

Adult Heart Failure: Look After Your Liver (Seaport H)

CHAIRS: Arezu Z. Aliabadi, MD and Randall H. Vagelos, MD

12:00 PM (413) Influence of MELD (Model of End-Stage Liver Disease)_XI (ex)luding INR) on Post-Heart Transplant (HT) Outcomes; E. C. DePasquale, A. Nsair, L. Reardon, A. Ardehali, M. Deng. UCLA, Los Angeles, CA.


12:36 PM (416) Heart Transplantation Outcomes in Hepatitis C Patients: Influence of New Treatment Options on Post-transplantation Survival; M. Quader, L. G. Wolfe, G. Katlaps, V. Kasirajian. Cardio-Thoracic Surgery, Virginia Commonwealth University, Richmond, VA.


1:00 PM (418) Changing Outcomes After Heart Transplantation in Patients with Amyloid Cardiomyopathy; M. Davis, P. H. Lee, R. M. Witteles. Cardiovascular Medicine, Stanford University School of Medicine, Stanford, CA, Cardiothoracic Surgery, Stanford University School of Medicine, Stanford, CA.
12:00 PM – 1:15 PM

**CONCURRENT SESSION 46**

**Antibody Mediated Rejection 2014: HLA and Beyond**

**CHAIRS:** Deborah J. Levine, MD and Tobias Deuse, MD, PhD

**(Gaslamp AB)**

**12:00 PM** (419) **Postoperative Donor Specific Anti-HLA Antibodies in Lung Transplantation: Risk Factors and Impact on Mid-Term Patient and Graft Outcomes:**

F. Ius¹, W. Sommer¹, I. Tudorache¹, C. Kühn¹, M. Avsar¹, T. Siemeni¹, J. Salman³, M. Hallensleben³, M. Greer³, J. Gottlieb³, A. Haverich³, G. Warnecke³.¹ Department of Cardiothoracic, Transplant and Vascular Surgery, Hannover Medical School, Hannover, Germany, ³Department of Transfusion Medicine, Hannover Medical School, Hannover, Germany, ²Department of Respiratory Medicine, Hannover Medical School, Hannover, Germany.

**12:12 PM** (420) **Identification of Independent Risk Factors for De Novo DSA Development Through Prospective Monitoring:**


**12:24 PM** (421) **The Development of De Novo Donor Specific Antibodies Following Community Acquired Respiratory Virus Infection after Lung Transplantation: A Novel Association:**

H. W. Ainge-Allen, M. Benzimra, A. P. Havryk, A. L. Rigby, M. A. Malouf, M. Plit, A. R. Glanville. Lung Transplant Unit, St Vincent’s Hospital, Sydney, Australia.

**12:36 PM** (422) **De Novo Development of Donor Specific Antibodies To HLA Is Associated With Dysregulation of microRNA Expression Profile Affecting Immune Responses Resulting in Bronchiolitis Obliterans Syndrome Following Human Lung Transplantation:**

Z. Xu¹, S. Ramachandran¹, N. Sarma¹, B. Gautam², A. Aloush¹, R. Hachem², A. Patterson¹, T. Mohanakumar¹. ¹Department of Surgery, Washington University School of Medicine, St. Louis, MO, ²Department of Medicine, Washington University School of Medicine, St. Louis, MO.

**12:48 PM** (423) **Complement-Fixing Donor-Specific Antibody and Lung Transplant Outcomes:**

L. Chhatwani¹, J. Mooney¹, R. Balestra¹, R. Lee¹, C. Lou¹, D. Weill¹, D. Tyan¹, G. Dhillon¹.¹ Division of Pulmonary and Critical Care Medicine, Stanford University Medical Center, Stanford, CA, ²Department of Pharmacy, Stanford University Medical Center, Stanford, CA, ³Department of Pathology, Stanford University Medical Center, Stanford, CA.

**1:00 PM** (424) **Pre-Emptive Treatment of Donor Specific Anti-HLA Antibodies in Lung Transplantation With Plasmapheresis:**

F. Ius¹, W. Sommer¹, I. Tudorache¹, C. Kühn¹, M. Avsar¹, T. Siemeni¹, J. Salman³, M. Hallensleben³, M. Greer³, J. Gottlieb³, A. Haverich³, G. Warnecke³.¹ Department of Cardiothoracic, Transplant and Vascular Surgery, Hannover Medical School, Hannover, Germany, ³Department of Transfusion Medicine, Hannover Medical School, Hannover, Germany, ²Department of Respiratory Medicine, Hannover Medical School, Hannover, Germany.
12:00 PM – 1:15 PM

**CONCURRENT SESSION 47**

What Becomes of the Marginal Hearted (Gaslamp CD)

**CHAIRS:** Ashish S. Shah, MD and Steven SL Tsui, MD, FRCS (DMD, HTX)

12:00 PM **(425) Elderly Heart Transplant Recipient Long-Term Survival Is Not Dependent on Donor Age: A Conditional Survival Analysis;**


1 Cardiac Surgery, The Ohio State University, Columbus, OH, 2 Internal Medicine, The Ohio State University, Columbus, OH, 3 Cardiac Surgery, University of Pittsburgh, Pittsburgh, PA.

12:12 PM **(426) Coronary Angiography of Older Donor Hearts During Evaluation for Transplantation;**

M. Davis, N. M. Fine, M. Roussos, R. Khan, T. Malas, S. A. Hunt.

1 Cardiovascular Medicine, Stanford University School of Medicine, Stanford, CA, 2 University of Calgary, Calgary, AB, Canada, 3 Division of Critical Care, Northern Ontario School of Medicine, Thunder Bay, ON, Canada, 4 Montreal Heart Institute, Montreal, QC, Canada, 5 Cardiac Surgery, University of Ottawa Heart Institute, Ottawa, ON, Canada.

12:24 PM **(427) The UK Retrieval Team “Scout” Pilot Programme;**


1 Statistics and Clinical Studies, NHS Blood and Transplant, Bristol, United Kingdom, 2 NHS Blood and Transplant, Bristol, United Kingdom, 3 King’s College Hospital, London, United Kingdom, 4 Wythenshawe Hospital, Manchester, United Kingdom, 5 Freeman Hospital, Newcastle upon Tyne, United Kingdom, 6 Papworth Hospital, Cambridge, United Kingdom, 7 Golden Jubilee Hospital, Glasgow, United Kingdom, 8 Harefield Hospital, Middlesex, United Kingdom, 9 Queen Elizabeth Hospital, Birmingham, United Kingdom.

12:36 PM **(428) Marginal Donors: Improvement in Quality of Hearts Transplanted and Mid-Term Survival By Echo-Stress Evaluation;**


1 Chirurgia del Cuore e dei Grossi Vasi, Azienda Ospedaliera Universitaria Senese, Siena, Italy, 2 Cardiologia Universitaria, Azienda Ospedaliera Universitaria Senese, Siena, Italy, 3 Istituto Fisiologia Clinica, Centro Nazionale Ricerche, Pisa, Italy, 4 Cardiologia Universitaria, Universita’ degli Studi Di Siena, Siena, Italy.

12:48 PM **(429) Is Bad Donor in Bad Recipient Leading To Bad Outcomes? Potential Utility of Scores To Achieve Optimal Donor-Recipient Match;**


University of Bologna, Bologna, Italy.

1:00 PM **(430) Heart Transplant Recipient and Donor Age Mismatching: Should the Older Recipient Be Paired with the Older Donor?;**


Department of Surgery, The Ohio State University, Columbus, OH.
Novel Approaches to Keep the Heart Going (Old Town AB)

CHAIRS: Daniel R. Goldstein, MD and Zsuzsanna Hollander, MSc

12:00 PM (431) Connexins: A New Target for the Prevention of Transplant Vasculopathy?; J. Porterie1, B. Marchex1, C. Dambrin1, Y. Glock1, R. Salvayre2, A. Nègre-Salvayre2. 1Cardiovascular Surgery, Rangueil University Hospital, Toulouse, France, 2Inserm UMR 1048 Team 10, Paul Sabatier University, Toulouse, France.

12:12 PM (432) Discovering Novel Inflammatory Triggers after Heart Transplantation Via Proteomics; H. Shen1, E. Heuzey2, C. Colangelo1, L. Chung2, C. Bruce2, C. Booth3, D. Kreisel4, D. R. Goldstein1. 1Internal Medicine and Immunobiology, Yale School of Medicine, New Haven, CT, 2Internal Medicine, Yale School of Medicine, CT, 3Keck Facility, Yale School of Medicine, New Haven, CT, 4Comparative Medicine, Yale School of Medicine, New Haven, CT, 5Surgery and Immunology, Washington University, St Louis, MO.

12:24 PM (433) Myeloperoxidase is Critically Linked to the Development of Diastolic Heart Failure Following Pressure Overload; F. G. Deuschl1, A. Klinke2, K. Friedrichs2, D. Knappen1, F. Weinberger3, K. Mürleile1, D. Westermann1, F. Weinberger3, K. Müllerleile1, D. Westermann1, H. Reichenspurner1, S. Blankenberg1, S. Baldus2. 1General and Interventional Cardiology, University Heart Center Hamburg, University Hospital Hamburg-Eppendorf, Hamburg, Germany, 2Experimental Cardiology, Clinic for Internal Medicine III, Heart Center University Hospital Cologne, Cologne, Germany, 3Department of Experimental Pharmacology and Toxicology, University Hospital Hamburg-Eppendorf, Hamburg, Germany, 4Department for Cardiovascular Surgery, University Heart Center Hamburg, University Hospital Hamburg-Eppendorf, Hamburg, Germany.


12:48 PM (435) Donor Single-dose Treatment with VEGFR-3 Antibody Reduces Acute Alloimmune Response by Targeting Lymphatic Endothelial Cell Activation; A. Dashkevich1, S. Syrjälä1, M. Keränen1, R. Tuuminen1, A. Raissadati2, R. Krebs1, K. Alitalo1, A. Nykänen1, K. Lemström1. 1Transplantation Laboratory, Haartman Institute, University of Helsinki, Helsinki, Finland, 2Wiihuri Research Institute, Translational Cancer Biology Program, Biomedicum Helsinki, Helsinki, Finland.

1:00 PM (436) The Ubiquitin Ligase Mule Is Required for the Maintenance of Normal Cardiac Function; L. Hauck1, D. Grothe1, T. W. Mak1, F. Billia1. 1Toronto General Research Institute, Toronto, ON, Canada, 2Campbell Family Cancer Research Institute, Toronto, ON, Canada.
THURSDAY, APRIL 10, 2014
POSTER SESSION 1

NOTE: Poster presenters and moderators will be present during the evening poster viewing session from 6:15 PM – 7:15 PM.

BASIC SCIENCE

(437) In Vivo Evaluation of the Cleveland Clinic Continuous-Flow Total Artificial Heart in Calves; J. H. Karimov, K. Fukamachi, N. Moazami, M. Kobayashi, S. Safe, N. Mielke, G. Sunagawa, D. Horvath, S. Gao, L. A. Golding. 1Biomedical Engineering, Lerner Research Institute, The Cleveland Clinic, Cleveland, OH; 2Thoracic and Cardiovascular Surgery, Kaufman Center for Heart Failure, Heart and Vascular Institute, The Cleveland Clinic, Cleveland, OH; 3Cardiovascular Anesthesiology, Anesthesiology Institute, The Cleveland Clinic, Cleveland, OH.

(438) Novel Antibody-Engineered Gold Nanoparticles as Targeted Drug Delivery for Primary Mesenchimal Cells Do Not Elicit an Inflammatory Response; F. Meloni, E. Cova, S. Inghilleri, T. Oggionni, S. Magni, M. Morosini, D. F. Briganti, M. Colombo, M. Aguzzino, M. Cusella De Angelis, D. Prosperi, M. Colombo, M. Agozzino, M. Cusella De Angelis, D. Prosperi. 1Department of Respiratory Diseases, University of Pavia and IRCCS S. Matteo, Pavia, Italy; 2Molecolar Medicine, University of Pavia and IRCCS S.Matteo, Pavia, Italy; 3Molecular Medicine, IRCCS S.Matteo, Pavia, Italy; 4Biotechnology and Bioscience, University of Milano Bicocca, Milano, Italy; 5Cardiovascular Pathology, IRCCS S.Matteo, Pavia, Italy; 6Public Health, University of Pavia, Pavia, Italy.

(439) Sexual Dimorphism in Lung Inflammatory Process After Brain Death Induction in Rats; L. P. Moreira, S. G. Ferreira, G. K. Kudo, C. J. Correira, T. Vavares-de-Lima, A. C. Breithaupt-Faloppa, P. Sannomiya. 1Cardiovascular Surgery, Heart Institute (Incor), University of Sao Paulo Medical School, Sao Paulo, Brazil; 2Department of Clinical and Toxicological Analyses, Faculty of Pharmaceutical Sciences, University of Sao Paulo, Sao Paulo, Brazil.

(440) Expression of S100A4 Protein is T Cell-mediated in a Humanized Model of Obliterative Airway Disorder; J. Guilhaire, R. Itagaki, X. Hua, T. Deuse, M. Stubbendorff, E. Fadel, P. Dorfmüller, H. Reichenspurner, F. Längert, U. Schumacher, S. Schreper, J. Transplant and Stem Cell Immunobiology Lab, University Heart Center Hamburg, Hamburg, Germany; 2Thoracic and Vascular Surgery and Heart-Lung Transplantation, Marie Lannelongue Hospital, University of Paris Sud, Le Plessis Robinson, France; 3Thoracic and Vascular Surgery and Heart-Lung Transplantation, Marie Lannelongue Hospital, University of Paris Sud, Le Plessis Robinson, Germany; 4Institute of Pathology, Medizinische Hochschule Hannover, Hannover, Germany; 5Department of Anatomy and Experimental Morphology, University Hospital Hamburg-Eppendorf, Hamburg, Germany.
(441) Gender Specific Influences on Effector T-Cell Function and Proliferation: Hormonal Targeting to Modulate Cellular Rejection in Transplantation; J. G. Luc1, J. Zhao1, E. D. Michelakis2, D. H. Freed1, J. Nagendran1. 1Department of Surgery, University of Alberta, Edmonton, AB, Canada, 2Department of Medicine, University of Alberta, Edmonton, AB, Canada.


(443) WITHDRAWN

(444) Isolated Transfer of Human Platelets Results in Formation of Transplant Arteriosclerosis in a RAG2-/- -chain-/- Mouse Aortic Xenograft Model; C. Heim1, S. Müller1, B. Motzsch1, N. Koch1, B. Weigmann2, M. Ramsperger-Gleixner1, R. Zimmermann2, M. Weyand2, S. M. Ensminger1. 1Department of Cardiac Surgery, Erlangen, Germany, 2Department of Medicine 1, Erlangen, Germany, 3Department of Transfusion Medicine, Erlangen, Germany, 4Department of Cardiac Surgery, Bad Oeynhausen, Germany.


(446) Tolerance Induction Using Myeloid Progenitor Cells and Autologous HSC; J. Domen1, Y. Li1, L. Sun1, P. Simpson2, K. Gandy3. 1Cardiac Surgery, Children’s Mercy Hospital and Clinics, Kansas City, MO, 2Dept Pediatrics, Div Quantitative Health Sciences, Medical College of Wisconsin, Milwaukee, WI, 3Biomedical and Health Informatics, University of Missouri-Kansas City, Kansas City, MO.

ADULT HEART FAILURE

(HF, HTX)

(447) The Predictive Power of Invasive Hemodynamics and MELD Scores in Ambulatory Patients With Advanced Heart Failure; T. S. Kato1, M. S. Kim1, C. Wu1, M. Farr2, D. Mancini2, P. Schulze2. 1Heart Center, Department of Cardiothoracic Surgery, Juntendo University School of Medicine, Tokyo, Japan, 2Division of Cardiology, Department of Medicine, Columbia University Medical Center, New York, NY.


(449) WITHDRAWN
Heart Failure Classification Rather Than Ejection Fraction May Be a Major Factor in Considering Patients with Hypertrophic Cardiomyopathy for Heart Transplantation;
K. Hryniewicz1, K. Anderson1, K. Harris1, D. Feldman1, B. Maron2.
1Minneapolis Heart Institute, Abbott Northwestern Hospital, Minneapolis, MN, 2Minneapolis Heart Institute Foundation, Minneapolis, MN.

Structural Remodeling of the Cardiac Ventricles: When Left Isn’t Equally Right;
N. Diakos1, J. Barney1, C. Yen1, J. Stehlik1, A. Kfoun2, C. Selzman1, B. Reid1, O. Weyer-Pinzon1, A. Saidi1, S. Wright1, A. Koliopoulou1, G. Russell1, L. McCreath1, J. Fang1, D. Li3, S. Drakos1. 1University of Utah, Salt Lake City, UT, 2Intermountain Medical Center, Salt Lake City, UT, 3Intermountain Donor Service, Salt Lake City, UT.

The Risk of Prior Chest Radiation Therapy in Patients Who Undergo Heart Transplantation;

Dynamic Changes in Proteinuria Identify a Form of Cardiorenal Dysfunction Associated with Decreased Survival: An Application of the SOLVD Trial Limited Dataset;
M. A. Brisco1, M. Zile1, J. Arthur1, J. M. Testani2. 1Medicine-Cardiology, Medical University of South Carolina, Charleston, SC, 2Internal Medicine and Applied Translational Research, Yale University, New Haven, CT.

Thoracic Organ Transplantation for Autoimmune-Mediated Disease Is Not Associated With Detrimental Clinical Outcomes;
Z. Taimeh1, K. Vakil1, W. Rawasia2, R. Cavallazzi2, D. Nunley3, E. Birks1, C. Lenneman4. 1Cardiovascular Medicine, University of Minnesota School of Medicine, Minneapolis, MN, 2Cardiovascular Medicine, University of Louisville School of Medicine, Louisville, KY, 3Pulmonary and Critical Care, University of Louisville School of Medicine, Louisville, KY, 4Pulmonary and Critical Care Medicine, University of Louisville School of Medicine, Louisville, KY.

Predicting Heart Transplant Outcomes: Do We Have a Reliable Instrument to Assess Psychosocial Risk?;
E. Vandenbogaart1, L. Doering2, B. Chen3, A. Saltzman1, T. Chaker1, J. W. Creaser1, D. Rourke1, J. Chait1, N. Livingston1, R. W. Cheng2, G. Fonarow1, M. Deng1. 1Department of Medicine, Division of Cardiology, University of California Los Angeles, Los Angeles, CA, 2UCLA School of Nursing, UCLA, Los Angeles, CA, 3Cardiopulmonary Rehabilitation Center, Ronald Regan UCLA Medical Center, Los Angeles, CA, 4Department of Medicine, Division of Cardiology, University of Washington, Seattle, WA.

Role of Serial Measurement of Peak Oxygen Consumption for Prognosis Assessment in Heart Failure;
A. C. Alba, M. Gewarges, M. Bamberger, S. Lalonde, G. Kumar, D. Delgado, M. McDonald, F. Billia, H. Ross. University Health Network, Toronto, ON, Canada.
**SCIENTIFIC PROGRAM**

**ADULT HEART TRANSPLANTATION**

(HTX, PHARM, HF)

**[457]** A Comparison of the Extended-Release and Standard-Release Formulations of Tacrolimus in De Novo Heart Transplant Recipients: A 12-Month Outcome Study; F. Gonzalez-Vilchez, J. Lambert, L. Almenar, E. Lage, J. Vazquez de Prada, B. Diaz de Molina, L. Martinez-Dolz, J. Sobrino-Marquez, University Hospital Marques de Valdecilla, Santander, Spain, University Hospital Central de Asturias, Oviedo, Spain, University Hospital La Fe, Valencia, Spain, University Hospital Virgen del Rocio, Sevilla, Spain.

**[458]** Safety of Intravascular Ultrasound in Nearly 900 Cases; D. A. Baran, A. Jaiswal, M. Haseeb, A. Adzic, J. Pieretti, C. Gidea, R. Morlend, S. Murthy, M. T. Camacho, M. Feinberg, M. J. Zucker, Transplant Center, Newark Beth Israel Medical Center, Newark, NJ, Newark Beth Israel Medical Center, Newark, NJ.

**[459]** Clinical Observations and Outcome After Ablation of Atrial Arrhythmias in Patients With Orthotopic Heart Transplant; K. L. Weston, M. Nellaiyappan, T. Tran, M. Weston, B. Herweg, Tampa General Hospital, Tampa, FL, Florida Gulf to Bay Anesthesiology, Tampa, FL, Cardiovascular Sciences, University of South Florida, Tampa, FL.


**[462]** Maintained Cardiac Reserve in Heart Transplant Patients During Early Calcineurin Inhibitor Avoidance: A Substudy of a Randomised Controlled Trial (SCHEDULE Trial); S. Bartfay, L. Gullestad, V. Sigurdardottiri, A. K. Andreassen, E. Gude, B. Andersson, Department of Cardiology, Sahlgrenska University Hospital, Gothenburg, Sweden, Department of Cardiology, Oslo University Hospital Rikshospitalet, Oslo, Norway, Transplant Institute, Sahlgrenska University Hospital, Gothenburg, Sweden.

**[463]** Role of Coronary CT in Predicting Cardiovascular Prognosis After Heart Transplantation; M. Masetti, A. Aliabadi, C. Lowe, F. Wolf, S. Rödler, K. Uyanik Uenal, J. Gökler, G. Laufer, A. Zuckermann, DIMES, S.Orosla Hospital, University of Bologna, Bologna, Italy, Heart Transplantation, Cardiac Surgery Department, Vienna General Hospital, Vienna, Austria, Cardiovascular and Interventional Radiology, Vienna General Hospital, Vienna, Austria.

Bonet\textsuperscript{9}, T. Blasco Peiró\textsuperscript{10}, L. de la Fuente Galán\textsuperscript{11}, I. Garrido Bravo\textsuperscript{12}, J. Muñiz-García\textsuperscript{13}, J. F. Delgado Jiménez\textsuperscript{14}. 1Heart Transplant Unit, Hospital Universitario A Coruña, La Coruña, Spain, 2Hospital Universitario Puerta de Hierro, Madrid, Spain, 3Hospital Universitario Marqués de Valdecilla, Santander, Spain, 4Hospital Universitario Central de Asturias, Asturias, Spain, 5Hospital General Universitario Gregorio Marañón, Madrid, Spain, 6Hospital Universitario Virgen del Rocio, Sevilla, Spain, 7Hospital Universitario Reina Sofia, Córdoba, Spain, 8Hospital Universitari i Politècnic La Fe, Valencia, Spain, 9Hospital Universitario Miguel Servet, Zaragoza, Spain, 10Hospital Clínico Universitario de Valladolid, Valladolid, Spain, 11Hospital Universitario Virgen de la Arrixaca, Murcia, Spain, 12Instituto Universitario de Ciencias de la Salud. Universidad de A Coruña, La Coruña, Spain, 13Instituto Universitario de Ciencias de la Salud. Universidad de A Coruña, La Coruña, Spain, 14Hospital Universitario de Madrid, Madrid, Spain.

(465) **Comparative Utility of Gene Expression Profiling Score Variability, Endomyocardial Biopsy, and Echocardiography to Predict Future Clinical Events in Heart Transplant Recipients:**

M. Deng\textsuperscript{1}, A. Kfoury\textsuperscript{2}, J. Teuteberg\textsuperscript{3}, B. Elashoff\textsuperscript{4}, D. Hiller\textsuperscript{4}, J. Yee\textsuperscript{4}, H. Valantine\textsuperscript{5}. 1Cardiology, University of California, Los Angeles, CA, 2Intermountain Medical Center and Intermountain Healthcare, Salt Lake City, UT, 3University of Pittsburgh Medical Center, Pittsburgh, PA, 4XDx, Brisbane, CA, 5Stanford University, Stanford, CA.

(466) **Routine Endomyocardial Biopsies Beyond the First Year Have Low Diagnostic Utility in Heart Transplant Recipients:**


(467) **Hemodynamic Compromising Antibody Mediated Rejection (HC-AMR) After Heart Transplantation:**

A. Z. Aliabadi\textsuperscript{1}, M. Groemer\textsuperscript{1}, K. Uyanik-Uenal\textsuperscript{1}, J. Göklä\textsuperscript{1}, S. Wallner\textsuperscript{1}, M. Masseti\textsuperscript{1}, K. Aumayr\textsuperscript{2}, G. Fischer\textsuperscript{3}, G. Boehmig\textsuperscript{4}, G. Lauffer\textsuperscript{1}, A. O. Zuckermann\textsuperscript{1}. 1Cardiac Surgery, Medical University of Vienna, Vienna, Austria, 2Pathology, Medical University of Vienna, Vienna, Austria, 3Blood Group Serology and Transfusion Medicine, Medical University of Vienna, Vienna, Austria, 4Nephrology, Medical University of Vienna, Vienna, Austria.

(468) **Hearts Preserved in Somah at Sub-normothermia Demonstrate Rapid Functional Restoration and Are Less Likely To Develop Heart Failure Upon Transplantation:**

S. K. Lowalekar\textsuperscript{1}, H. Cao\textsuperscript{1}, X. Lu\textsuperscript{1}, P. R. Treanor\textsuperscript{2}, H. S. Thatte\textsuperscript{1}. 1Surgery, Harvard Medical School, Boston, MA, 2Surgery, VA Boston Healthcare System, Boston, MA.

(469) **Novel Nomogram of the Immune Response After Heart Transplantation:**

M. Bakir\textsuperscript{1}, T. Khuv\textsuperscript{1}, M. Cadeiras\textsuperscript{1}, N. Wisniewski\textsuperscript{1}, V. M. Grysberg\textsuperscript{1}, G. Bondar\textsuperscript{1}, E. Depasquale\textsuperscript{1}, J. Fuentes\textsuperscript{1}, L. Rangel\textsuperscript{1}, J. Zhang\textsuperscript{1}, E. F. Reed\textsuperscript{1}, M. C. Deng\textsuperscript{1}. 1Cardiology, UCLA, Los Angeles, CA, 2Heart & Lung Transplant, UCLA, Los Angeles, CA, 3Path & Lab Med-Immunogenetics Ctr, UCLA, Los Angeles, CA.

(470) **Presence of C3d Fixing HLA Antibodies Carries Worse Prognosis and Is Associated With Increased Allograft Vasculopathy in Heart Transplant (HT) Patients:**

S. Dureux\textsuperscript{1}, V. Dubois\textsuperscript{1}, P. Boissounart\textsuperscript{1}, A. Roussouliers\textsuperscript{1}, J. Neidecker\textsuperscript{1}, J. Obadia\textsuperscript{1}, C. Dubois\textsuperscript{3}, L. Sebbag\textsuperscript{3}. 1Laboratoire Histocompatibilité, EFS Rhone Alpes, Lyon, France, 2Pole de Transplantation Hopital Louis Pradel, Hospices Civils de Lyon, Bron, France, 3Pole de Transplantation Hopital Louis Pradel, Hospices Civils de Lyon, BRON, France.
### Thirty-Five Years of Heart Transplantation at Papworth Hospital: Factors Influencing Outcomes of 25-Year Survivors:

A. Prabhu1, J. Parameshwar2, C. J. Lewis3. 1University of Cambridge School of Clinical Medicine, University of Cambridge, Cambridge, United Kingdom, 2Transplant Unit, Papworth Hospital, Cambridge, United Kingdom.

### Comparison of Heart Transplant Outcomes in Patients Who Received an Axial Versus Centrifugal Flow LVAD as Bridge to Transplant:

C. M. Rosner, P. Shah, L. Edwards, S. S. Desai, N. A. Burton, A. J. Rongione. Heart Failure and Transplant, Inova Fairfax Hospital, Falls Church, VA.

### Survival Following Heart Transplantation in Patients with Transthyretin Amyloid Cardiomyopathy:

V. N. Selby1, R. Mundayat1, M. S. Maurer1, L. Stern2, L. Klein3, M. Janmohamed1, J. A. Kobashigawa4, R. D. Kobes4, T. De Marco1. 1Division of Cardiology, University of California, San Francisco, San Francisco, CA, 2Pfizer, Inc, New York, NY, 3Division of Cardiology, Columbia University Medical Center, New York, NY, 4School of Medicine, University of California, San Francisco, San Francisco, CA, 5Cedars-Sinai Heart Institute, Los Angeles, CA.

### Late Antibody-Mediated Rejection Due To De-Novo Donor-Specific Anti-HLA Antibodies in Heart Transplant Recipients: A Cohort of 20 Consecutive Patients:

S. Ouldamar1, G. Coutance1, P. Pouvier1, C. Suberbille1, S. Saheb4, S. Hariri5, N. Brechot6, G. Lebreton7, P. Leprince4, S. Varnous1. 1Heart Transplantation, Groupe Hospitalier Pitié-Salpêtrière, Paris, France, 2Pathology, Surgery, and Immunology, University of Pittsburgh Medical Center, Pittsburgh, PA, 3Heart and Vascular Institute, University of Pittsburgh Medical Center, Pittsburgh, PA, 4Heart Failure and Transplant, Inova Fairfax Hospital, Falls Church, VA.

### Relationship Between Anti-HLA Antibodies and Coronary Allograft Vasculopathy after Heart Transplantation:

S. J. Khandhar1, M. A. Shullo2, A. Zeevi3, C. Toma1, J. J. Teuteberg1. 1Heart and Vascular Institute, University of Pittsburgh Medical Center, Pittsburgh, PA, 2University of Pittsburgh, Pittsburgh, PA, 3Pathology, Surgery, and Immunology, University of Pittsburgh Medical Center, Pittsburgh, PA.

### Association Between Steroids Withdrawal During the First Year After Heart Transplantation and Changes in Body Mass Index in a Two Year Follow-Up. RESTCO Study:

M. G. Crespo-Leiro1, M. J. Paniagua-Martín1, M. Gómez-Bueno2, F. González-Vilchez2, J. L. Lambert-Rodríguez2, J. Fernández-Yáñez2, V. Brossa Loidi2, J. M. Arizón del Prado2, T. Blasco Peiró2, E. Lage Galle2, L. de la Fuente Galán3, I. Garrido Bravo2, L. Almenar Bonet12, J. Muñiz-García12, J. F. Delgado Jiménez12. 1Heart Transplant Unit, Hospital Universitario A Coruña, La Coruña, Spain, 2Hospital Universitario Puerta de Hierro, Madrid, Spain, 3Hospital Universitario Marqués de Valdecilla, Santander, Spain, 4Hospital Universitario Central de Asturias, Asturias, Spain, 5Hospital General Universitario Gregorio Marañón, Madrid, Spain, 6Hospital Santa Creu i Sant Pau, Barcelona, Spain, 7Hospital Universitario Reina Sofia, Córdoba, Spain, 8Hospital Universitario Miguel Servet, Zaragoza, Spain, 9Hospital Universitario Virgen del Rocio, Sevilla, Spain, 10Hospital Clínico Universitario de Valladolid, Valladolid, Spain, 11Hospital Universitario Virgen de la Arrixaca, Murcia, Spain, 12Hospital Universitari i Politècnic La Fe, Valencia, Spain, 13Instituto Universitario de Ciencias de la Salud - Universidad de A Coruña, La Coruña, Spain, 14Hospital Universitario de Ciencias de la Salud - Universidad de A Coruña, La Coruña, Spain, 15Hospital Universitario de Ciencias de la Salud - Universidad de A Coruña, La Coruña, Spain, 16Hospital Universitario de Ciencias de la Salud - Universidad de A Coruña, La Coruña, Spain.
Fighting Flu: A Survey of Seasonal Influenza Vaccination Concordance in Cardiothoracic Transplant Patients in Newcastle (UK):

Toxoplasma Serology Mismatch with Increased Mortality? Clarifying the Literature:

Combined Short Term Caspofungin and Nebulized Amphotericin B Prophylaxis May Help To Eradicate Aspergillus Related Complications After Lung Transplantation:
P. T. Hammainen, M. Eriksson, M. Halme, K. Lemstrom. Cardiac Surgery, Helsinki Heart and Lung Center, Helsinki, Finland. Department of Infectious Diseases, Helsinki University Hospital, Helsinki, Finland. Department of Pulmonology, Helsinki Heart and Lung Center, Helsinki, Finland.

Analysis of Incidence and Risk Factors for Polyomavirus Infection after Lung Transplant:
B. Adams, A. T. Logan. Pharmacy, Tampa General Hospital, Tampa, FL. Tampa General Hospital, Tampa, FL. New Lung Associates, Tampa, FL.

Cytomegalovirus Infection Following Lung Transplantation – Occurrence, Treatment and Risk of OB:
D. Thomas, A. J. Wilkinson, L. Succony, S. Tsui. Transplant Directorate, Papworth Hospital, Papworth Everard, United Kingdom.

Markedly Reduced Driveline Infection Rates in CF Pumps (HMI) – A Long-term Follow Up:
N. Nair, E. Gongora, B. Sareyyupoglu, S. Alvarado, I. X. Collier, A. Nazar. Division of Cardiology, Scott and White Health Care/Texas A&M, Temple, TX. Division of Cardiothoracic Surgery, Scott and White Health Care/Texas A&M, Temple, TX. Division of Pharmacy, Scott and White Hospital, Temple, TX.

Efficacy and Safety of Sustained Release of Vancomycin Through Fibrin Glue Against Local Prosthesis Infection By Methicillin-resistant Staphylococcus aureus:

Infectious Complications Following Treatment of Antibody Mediated Rejection in Cardiothoracic Transplant Recipients:
M. A. Moten, C. T. Doligalski, A. T. Logan. Tampa General Hospital, Tampa, FL.

Asymptomatic Cytomegalovirus Viremia Is Associated With Increased Risk of Pneumocystis and Fungal Infections:
G. Postlajen, B. Podgoršek, R. Okrajšek, M. Šebeštjen, S. Frljak, G. Žemlič, J. Kelaš, I. Kneževi, F. Haddad, B. Vrtovec. Advanced Heart Failure and Transplantation Programme, Dept. of Cardiology, University Medical Center Ljubljana, Ljubljana, Slove-
nia, 1Ljubljana Medical Faculty, University of Ljubljana, Ljubljana, Slovenia, 1Dept. of Cardiovascular Surgery, University Medical Center Ljubljana, Ljubljana, Slovenia, 1Stanford University School of Medicine, Palo Alto, CA.

(486) Study of Burkholderia Cepacia Complex Strains in Lung Transplant Patients: Analysis of Genomovar and Mortality Impact;
D. S. Carraro1, S. V. Campos1, K. A. Oliveira-Braga1, L. R. Iuamoto1, R. M. Carraro1, L. C. Oliveira1, F. Rossi2, E. C. Sabino2, P. M. Pêgo-Fernandes1, 1Thoracic Surgery Department, Heart Institute (Incor), Hospital das Clinicas da Faculdade de Medicina da Universidade de São Paulo, São Paulo, Brazil, 2Hospital das Clinicas da Faculdade de Medicina da Universidade de São Paulo, São Paulo, Brazil, 3Pathology Department, Hospital das Clinicas da Faculdade de Medicina da Universidade de São Paulo, São Paulo, Brazil, 4Department of Infectious Disease, Institute of Tropical Medicine, Faculdade de Medicina da Universidade de São Paulo, São Paulo, Brazil.

ADULT LUNG TRANSPLANTATION

(LTX)

(487) How Donor Graft Lungs Behave in a Recipient Thorax After Living-Donor Lobar Lung Transplantation: 2-Year Follow-up;

(488) Donor and Recipient Hepatitis C Status in Lung Transplant;
B. R. Englum1, A. M. Ganapathi1, P. J. Speicher1, B. C. Gulack1, S. S. Lin1, S. M. Palmer1, L. D. Snyder2, M. Daneshmand1, R. D. Davis1, M. G. Hartwig1, 1Department of Surgery, Duke University Medical Center, Durham, NC, 2Department of Medicine, Duke University Medical Center, Durham, NC.

(489) Clinical Outcome of Bilateral Lung Transplantation for Cystic Fibrosis in the Frame of the European Multicentric COLT Study;
P. Lacoste1, A. Tissot1, P. J. Royer2, M. Pain2, K. Botturi-Cavaillès2, A. Magnan and the COLT consortium1. 1CHU Nantes, Nantes, France, 2Institut du Thorax, Inserm UMR 1087, Nantes, France.

(490) Microbiome Profiling by Whole Genome Sequencing During Acute and Chronic Lung Transplant Rejection;
B. C. Keller1, D. E. Byers1, S. A. Handley2, G. Zhao2, C. A. Witt1, R. D. Yusen1, E. P. Trulock1, R. R. Hachem1, D. Wang2, H. W. Virgin2, 1Medicine, Washington University, Saint Louis, MO, 2Pathology & Immunology, Washington University, Saint Louis, MO, 3Molecular Microbiology and Pathology & Immunology, Washington University, Saint Louis, MO.

(491) Community Acquired Respiratory Viral Infection after Lung Transplantation: BOS Risk and Risks of Specific Viruses;
M. Benzimra, H. W. Ainge-Allen, A. L. Rigby, M. A. Malouf, A. P. Havyryk, M. Plit, A. R. Glanville. Lung Transplant Unit, St Vincent’s Hospital, Sydney, Australia.

(492) Complement-Fixing Donor-Specific Antibodies After Lung Transplantation;
J. A. Iuppa1, K. B. Bain1, D. L. Phelan1, R. D. Yusen1, D. E. Byers1, C. A. Witt1, E. P. Trulock1, G. A. Patterson1, T. Mohanakumar1, R.
(493) **Bile Acids in Bronchial Wash: A Biomarker of Aspiration in the Donor and Recipient?**


(494) **Effect on Survival of Double Versus Single Lung Transplantation in Patients with Primary and Secondary Pulmonary Arterial Hypertension**

T. Madni, P. Kilo, F. G. Fernandez, A. Pickens, R. Bag, D. Neuhr, E. Lawrence, S. D. Force. Surgery, University of Texas Southwestern, Dallas, GA, Rollins School of Public Health, Emory University, Atlanta, GA, Surgery, Emory University, Alanta, GA, Medicine, Emory University, Atlanta, GA.

(495) **Underweight Patients with Cystic Fibrosis (CF): A Risk Worth Taking**

S. G. Kapnadak, J. M. Pilewski, C. J. Gries. Pulmonary, Allergy, and Critical Care Medicine, University of Pittsburgh School of Medicine, Pittsburgh, PA.

(496) **Endobronchial Therapeutics in Lung Transplant Recipients: A Multi-Center Experience**

H. K. Rokadia, M. Machuzak, M. Budev, A. Mehta, L. Yarmus, T. Gildea. Cleveland Clinic, Cleveland, OH, Johns Hopkins Medical Institutions, Baltimore, MD.

(497) **Thrombotic Microangiopathy After Lung Transplantation**

A. Scheed, P. Jaksh, W. Klepetko. Thoracic Surgery, Medical University of Vienna, Vienna, Austria.

(498) **Long Term Clinical Outcome of Pulmonary Re-Transplantation for Chronic Lung Allograft Problems**

A. Slama, A. Natmessnig, P. Jaksh, A. Mitterbauer, G. Lang, K. Hoetzenecker, S. Taghavi, W. Klepetko, C. Aigner. Department of Thoracic Surgery, Medical University of Vienna, Vienna, Austria.

(499) **Plasma Lipid Peroxidation Products Are Higher in Lung Transplant Recipients with PGD and Are Associated with Donor Smoking**

L. B. Ware, L. J. Roberts, J. M. Diamond, N. Wickersham, S. M. Palmer, D. Ledner, S. Bhorade, M. Crespo, A. Weinacker, V. Lama, K. Wille, S. M. Kawut, R. Shah, E. Cantu, P. Shah, D. Wilkes, J. Orens, J. Belperio, J. D. Christie and the Lung Transplant Outcomes Group. Departments of Medicine and Pathology, Microbiology and Immunology, Vanderbilt University School of Medicine, Nashville, TN, Department of Medicine, Vanderbilt University School of Medicine, Nashville, TN, University of Pennsylvania, Philadelphia, PA, Vanderbilt University School of Medicine, Nashville, TN, Duke University, Durham, NC, Columbia University, New York, NY, University of Chicago, Chicago, IL, University of Pittsburgh, Pittsburgh, PA, Stanford University, Palo Alto, CA, University of Michigan, Ann Arbor, MI, University of Alabama, Birmingham, AL, Johns Hopkins University, Baltimore, MD, Indiana University, Indianapolis, IN, UCLA, Los Angeles, CA.
(500) Hypercapnic Ventilatory Response Is Decreased in Long-Term Bilateral Lung Transplant Recipients:
M. J. Weidmann1, B. E. Kleibrink1, T. Rabisi1, G. Weinreich1, M. Kamler2, H. Teschler1, U. Sommerwerck1. 1Department of Pneumology, Ruhrlandklinik, West German Lung Center, University Hospital Essen, University Duisburg-Essen, Essen, Germany, 2Department of Thoracic and Cardiovascular Surgery, West German Heart Center, University Hospital Essen, University Duisburg-Essen, Essen, Germany.

(501) Atrial Arrhythmias Following Lung Transplantation: Incidence and Risk Factors in 658 Lung Transplant Recipients:
J. D’Cunha1, A. D’Angelo1, J. A. Hyanga1, D. Odell1, J. Pilewski2, M. M. Crespo2, J. Bhamra1, N. Shigemura1, T. Richards1, J. D. Lukelitch1, C. Bermudez1. 1Cardiothoracic Surgery, University of Pittsburgh, Pittsburgh, PA, 2Pulmonary Medicine, University of Pittsburgh, Pittsburgh, PA.

(502) Once-Daily Tacrolimus: A Valuable Option Post Lung Transplantation:
B. Levvey1, A. Cunningham2, S. Ivulich2, L. Mitchell1, G. Westall1, M. Paraskeva1, H. Whittord1, T. Williams1, G. Snell1. 1Lung Transplant Service, The Alfred Hospital, Melbourne, Australia, 2Pharmacy Department, The Alfred Hospital, Melbourne, Australia.

(503) Lung Transplantation Using Allografts From Donation After Cardiac Death Donors:
J. Costa1, J. R. Sonett1, G. Singh1, M. Bacchetta1, M. LaVelle1, D. Lederer2, L. Shah1, H. Robbins2, K. Raza2, S. Arcasoy2, F. D’Ovidio1. 1Thoracic Surgery, Columbia University Medical Center, New York, NY, 2Pulmonary, Allergy, and Critical Care Medicine, Columbia University Medical Center, New York, NY, 3Pulmonary, Allergy and Critical Care Medicine, Columbia University Medical Center, New York, NY.

(504) HLA Mismatches Is an Independent Risk Factor for Worse Patient Survival among Lung Transplant Recipients in the United States:
M. Askar1, M. Chan2, K. McCurry1, M. Budev1, J. Schold1. 1Transplant Center, Cleveland Clinic, Cleveland, OH, 2Immunohaematology & Cell Therapy Support Laboratories, Singapore Health Sciences Authority, Singapore, Singapore.

(505) Detection of Invasive Pulmonary Aspergillus in Lung Transplant Patients Using a Lateral Flow Device:
K. Watson, C. Rennison, E. K. Gould, J. Samuel. Microbiology Department, Freeman Hospital, Newcastle upon Tyne NHS Foundation Trust, United Kingdom.

(506) The ‘Blood Transfusion Effect’ in Lung Transplantation – Striking Evidence for an Old Hypothesis in an Unlikely Setting:
T. Siemeni1, W. Sommer1, I. Tudorache1, C. Kühn1, M. Avsar1, F. Ius3, J. Salman4, M. Hailenseleben1, J. Gottlieb1, A. Haverich1, G. Warnecke1. 1Department of Cardiothoracic, Transplant and Vascular Surgery, Hannover Medical School, Hannover, Germany, 2Department of Transfusion Medicine, Hannover Medical School, Hannover, Germany, 3Department of Respiratory Medicine, Hannover Medical School, Hannover, Germany.

(507) Predictors of Anxiety and Depression during the First 2 Months after Lung Transplantation:
M. O. Alrawashdeh, A. DeVito Dabbs. School of Nursing, University of Pittsburgh, Pittsburgh, PA.
(508) Sirolimus Improves Renal Function and May Prevent BOS Progression After Lung Transplant; M. Mariski Jr, A. Feist, G. Yung, L. Awdishu. 1Memorial Hermann Texas Medical Center, Houston, TX, 2UC San Diego Health System, San Diego, CA, 3UC San Diego Health System, San Diego, TX, 4Skaggs School of Pharmacy and Pharmaceutical Sciences, San Diego, CA.

(509) Age-Related Decline in Lung Function in Patients Without CLAD After Double Lung Transplantation; H. L. Schultz, C. B. Andersen, D. A. Steinbrüchel, N. H. Bjarnason, M. Perch, J. Carlsen, M. Iversen. 1Department of Cardiology, Section of Lung Transplantation, Rigshospitalet, Copenhagen, Denmark, 2Department of Pathology, Rigshospitalet, Copenhagen, Denmark, 3Department of Thoracic Surgery, Rigshospitalet, Copenhagen, Denmark.

(510) Serum KL-6 Levels Are Associated With Long-Term Prognosis in Lung Transplant Recipients; V. Besa, S. Ohshimo, G. Weinreich, F. Bonella, U. Costabel, M. Kamler, H. Teschner, U. Sommerwerck. 1Pneumology, Ruhrlandklinik, West German Lung Center, University Hospital Essen, University Duisburg-Essen, Essen, Germany, 2Emergency and Clinical Care Medicine, Graduate School of Biomedical Sciences, Hiroshima University, Hiroshima, Japan, 3Pneumology/Allergology, Ruhrlandklinik, West German Lung Center, University Hospital Essen, University Duisburg-Essen, Essen, Germany, 4Thoracic and Cardiovascular Surgery, University Hospital Essen, University Duisburg-Essen, Essen, Germany.

(511) Evolving Experience of Treating Antibody-Mediated Rejection Following Lung Transplantation; S. Otani, A. K. Davis, L. Cantwell, S. Ivulich, M. A. Paraskeva, G. I. Snell, G. P. Westall. 1Lung Transplant Service, Allergy, Immunology and Respiratory Medicine, Alfred Hospital, Melbourne, Australia, 2Haematology, Alfred Hospital, Melbourne, Australia, 3National Transplant Services, Australian Red Cross Blood Services, Melbourne, Australia, 4Pharmacy, Alfred Hospital, Melbourne, Australia.

(512) Long-Term Successful Outcomes From Kidney Transplantation Following Lung/Heart-Lung Transplantation; S. Otani, B. J. Levey, G. P. Westall, M. A. Paraskeva, H. M. Whitford, T. Williams, R. Walker, S. Menahem, G. I. Snell. 1Lung Transplant Service, Allergy, Immunology and Respiratory Medicine, Alfred Hospital, Melbourne, Australia, 2Renal Medicine, Alfred Hospital, Melbourne, Australia.


(514) Outcome After Transplantation of Lungs Evaluated With Ex-Vivo Lung Perfusion; A. Wallinder, S. Ricksten, G. C. Riise, T. Nilsson, G. Dellgren. 1Dep. of Cardiothoracic surgery, Sahlgrenska University Hospital, Gothenburg, Sweden, 2Cardiothoracic Anesthesia and Intensive Care, Sahlgrenska University Hospital, Gothenburg, Sweden, 3Transplant Institute, Sahlgrenska University Hospital, Gothenburg, Sweden, 4Cardiothoracic Anaesthesia and Intensive Care, Sahlgrenska University Hospital, Gothenburg, Sweden.
(515) Is Routine Screening for Community-Acquired Respiratory Virus Infections in Lung Transplant Recipients Worthwhile?
M. Greer1, T. Fühner1, I. Tudorache3, G. Warnecke3, A. Haverich3, T. Welte3, J. Gottlieb3. 1Respiratory Medicine, Hanover Medical School, Hannover, Germany, 3Cardiac, Thoracic, Transplantation and Vascular Surgery, Hanover Medical School, Hannover, Germany.

(516) A Peritransplant Strategy in Lung Transplant Recipients with Preformed HLA Donor-Specific Antibodies (pDSA);

MECHANICAL CIRCULATORY SUPPORT
(MCS, HF)

(517) Impact of Preoperative Atrial Fibrillation on Outcomes Following Continuous Flow LVAD Implantation;
D. Stern, M. Follis, J. Nguyen, R. Bello, D. D’Alessandro, D. Goldstein. Cardiovascular and Thoracic Surgery, Montefiore-Einstein Center for Heart and Vascular Care, Montefiore Medical Center, Albert Einstein College of Medicine, Bronx, NY.

(518) The Clinical Impact of Atrial Fibrillation in Patients with the HeartMate II Left Ventricular Assist Device;
A. D. Enriquez1, C. Brandon2, P. U. Gandhi2, A. Nair2, A. Anyanwu2, S. P. Pinney2. 1Brigham and Women’s Hospital, Boston, MA, 2Mount Sinai Medical Center, New York, NY.

(519) Atrial Fibrillation in Patients Supported by Continuous-Flow Left Ventricular Assist Device;

(520) Decreased Renal Function Correlates With Severity of Aortic Regurgitation But Not LV EF or RV Function With LVAD Therapy;
P. Sajgalik, K. Sahakyan, J. M. Stulak, R. C. Daly, S. Kushwaha, B. S. Edwards, L. D. Joyce, J. A. Schirger. Cardiovascular Diseases, Mayo Clinic, Rochester, MN.

(521) The Impact of Aortic Valve Opening Status on Bleeding and Thrombotic Risk in Patients with CF-LVAD;

(522) Influence of Aortic Valve Opening in Patients With Aortic Insufficiency After LVAD Implantation;

(523) Aortic Valve Pathology in Patients Supported by a Continuous-Flow Left Ventricular Assist Device;
T. Saito1, E. Potapov1, K. Wassilev1, B. Gorodetski1, T. Krabatsch1, R. Hetzer1. 1Cardiothoracic and Vascular Surgery, Deutsches Herzzentrum Berlin, Berlin, Germany, 2Deutsches Herzzentrum Berlin, Berlin, Germany.

(525) Efficacy and Durability of Central Oversewing for Treatment of Aortic Valve Insufficiency in Patients with Continuous Flow Left Ventricular Assist Devices; M. A. Schechter1, J. T. Joseph1, J. Finet2, A. Krishnamoorthy2, A. M. Ganapathi2, A. J. Lodge1, C. B. Patel2, C. A. Milano1. 1Department of Surgery, Duke University Medical Center, Durham, NC, 2Department of Medicine, Duke University Medical Center, Durham, NC.

(526) Neurologic Complications After Implantation of Total Artificial Heart; I. Tchoukina, M. T. Hassanein, V. Kasirajan, D. G. Tang, K. B. Shah. Virginia Commonwealth University, Richmond, VA.

(527) Cerebrovascular Accidents and End of Life Admissions Contribute Most to the Cost in Patients With Continuous Flow Left Ventricular Assist Devices; G. Ashrith, F. Kotun, A. M. Cordero-Reyes, A. Bhimaraj, B. H. Trachtenberg, M. Loebe, G. Torre-Amione, J. D. Estep. Cardiology, Houston Methodist Hospital, Houston, TX.

(528) Effectiveness of Continuous Flow Left Ventricular Assist Device Exchange for Recurrence of Major Drive Line and Pump Pocket Infection; M. F. Masood, M. Romano, J. W. Haft, R. Hasan, K. Aarsonon, F. Paganini. Cardiac Surgery, University of Michigan, Ann Arbor, MI.

(529) Increased BMI Is Associated with Left Ventricular Assist Device-related Infectious Complications; D. S. Raymer1, J. M. Vaden1, M. E. Nassif1, C. T. Sparrow1, S. J. LaRue1, G. A. Ewald1, A. Itoh1, S. C. Silvestry1, Cardiovascular Division, Barnes-Jewish Hospital, St. Louis, MO, 3Division of Cardiothoracic Surgery, Barnes-Jewish Hospital, St. Louis, MO.

(530) Driveline Infection After HeartMate II Is Associated with Lower Rates of Cardiac Transplantation and Longer Transplant Waiting Times in the Bridge to Transplant Population; L. Harvey, C. Holley, R. John, P. Eckman, M. Colvin-Adams, K. Liao, R. Cogswell. University of Minnesota, Minneapolis, MN.

(531) Utility of PET/CT Imaging for Identifying LVAD Infections; G. Ramani1, E. Feller1, N. Hiivala2, K. Rajagopal2, E. Sorenson2. 1Medicine, University of Maryland, Baltimore, MD, 2Surgery, University of Maryland, Baltimore, MD.


(533) Reducing 30 Day Hospital Readmissions for Patients with Left Ventricular Support Devices; R. C. Starling1, T. J. Myers2, R. R. Bostic2, J. B. O’Connell2, N. A. Mokadam3, C. T. Salerno4, R. L. Kormos5. 1Cardiovascular Medicine,

Patterns of Readmission With Contemporary Continuous Flow Circulatory Support; R. Hernandez, S. K. Singh, H. R. Mallidi, D. Hoang, A. Syed, M. Elayda, O. Frazier, D. Meyers, Texas Heart Institute, Houston, TX, Baylor College of Medicine; Texas Heart Institute, Houston, TX, Cornell University, New York, NY.


The Impact of Baseline Renal Dysfunction on Patient Outcomes after Implantation of Chronic Mechanical Circulatory Support Devices; C. Anthony, R. Lui, J. Sevastos, K. Dhital, E. Granger, C. S. Hayward, A. Jabbour, P. C. Jansz, A. M. Keegh, E. Kotlyar, D. Robson, P. S. Macdonald, P. M. Spratt, Heart & Lung Transplant Unit, St. Vincent’s Health Network, Sydney, Australia, St Vincent’s Hospital Clinical School, University of New South Wales, Sydney, Australia, Department of Renal Medicine, St. Vincent’s Health Network, Sydney, Australia.


Heartmate II Inflow Cannula Migration Does Not Predict Late-Term Complications; K. A. Sell, B. Sheridan, A. C. Kiser, A. Bowen, J. N. Katz, W. E. Stansfield. Surgery, University of North Carolina, Chapel Hill, NC, Medicine, University of North Carolina, Chapel Hill, NC.

Outcomes of Minimally Invasive Approach for Exchange of the HeartMate II (HMII) Left Ventricular Assist Device (LVAD); B. Soleimani, L. C. Price, E. R. Stephenson, A. El-Banayosy, W. E. Pae. Cardiothoracic Surgery, Penn State Hershey Medical Center, Hershey, PA.

HeartMate II Pump Exchange in the Continuous Flow Pump Era Is Associated with Increased Mortality; L. Harvey, R. Cogswell, C. Holley, R. John, P. Eckman, K. Liao. University of Minnesota, Minneapolis, MN.

Robotic Implantation of Left Ventricular Assist Devices: A New Era in Cardiac Surgery;
Z. Khalpey, I. Bin Riaz, J. Bilal, C. Hsu, M. Friedman, R. Smith, K. Stavoe, M. J. Slepianski, R. Poston. Cardiothoracic Surgery, University of Arizona Medical Center, Tucson, AZ. Cardiology, University of Arizona Medical Center, Tucson, AZ. Surgery, University of Arizona Medical Center, Tucson, AZ.

Can Avoiding Sternotomy Reduce Early Complications of Left Ventricular Assist Device Surgery? Observations from Routine Implantation of Heartmate II Left Ventricular Assist Device without Median Sternotomy;
S. Itagaki, S. Pinney, A. C. Anyanwu. Cardiothoracic Surgery, Mount Sinai Medical Center, New York, NY. Cardiology, Mount Sinai Medical Center, New York, NY.

Surgical LVAD Placement Significantly Reduces Mitral Regurgitation Burden: A Single Center Study;
M. F. Jumean, D. Phan, A. R. Patel, M. S. Kienman, N. K. Kapur, D. DeNofrio, K. G. Warner, D. T. Pham. Cardiology, Tufts Medical Center, Boston, MA. Surgery, Tufts University, Boston, MA. Cardiothoracic Surgery, Tufts Medical Center, Boston, MA.

Influence of Mitral Regurgitation at Time of Implantation on Outcome in Patients With Ventricular Assist Devices;
A. M. Bernhardt, F. M. Wagner, K. Muellerleile, D. Biermann, H. Reichenspurner, T. Deuse. Department of Cardiovascular Surgery, University Heart Center Hamburg, Hamburg, Germany. Department of Cardiology, University Heart Center Hamburg, Hamburg, Germany.

Mineralocorticoid Receptor Antagonists Enhance Cardiac Function during Continuous Flow Left Ventricular Assist Device Support;
O. Saeed, R. Jermy, S. Gunda, S. Patel, J. Shin, D. D’Alessandro, D. J. Goldstein, R. Zolty. Medicine, Montefiore Medical Center, Albert Einstein College of Medicine, Bronx, NY. Cardiology and Vascular Surgery, Montefiore Medical Center, Albert Einstein College of Medicine, Bronx, NY.

Global Myocardial Viability by Thallium-201 Redistribution Imaging Can Predict Successful Weaning from Short Term Mechanical Support;

The Role of Ventricular Reconditioning in Weaning From Continuous-Flow Ventricular Assist Devices;
O. H. Frazier, Z. T. Demirozu, R. H. Mallidi, A. M. Segura, R. Hernandez, R. Radovancevic, H. Taegtmeyer, W. E. Cohn. Texas Heart Institute, Houston, TX. University of Texas Health Science Center School of Medicine, Houston, TX.

Retrospective Analysis of HVAD® Pump Controller Log Data and its Significance to Physiological Events;
M. C. Brown, J. Carrasquilla, A. Palacios, J. Garcia, N. Voskoboynikov. HeartWare, Inc, Miami Lakes, FL.

Long-Term Mechanical Circulatory Support With EVAHEART Left Ventricular Assist Device;
T. Nishinaka, Y. Ichihara, M. Komagamine, Y. Yamada, K. Yamazaki. Cardiovascular Surgery, Tokyo Women’s Medical University, Tokyo, Japan.


(554) Fortuity or Causality: Relation Between Outflow Graft Site of Anastomosis on Aorta and Cerebral Ischemic Events in LVAD Implantation; J. Bejko, T. Bottio, G. Bortolussi, V. Tarzia, R. Bianco, G. Rizzoli, G. Gerosa. Cardiac Surgery, University of Padua, Padova, Italy.


(556) Change in Acoustic Fingerprints at Increased Pump Speed During Echocardiographic Ramp Test; P. Sundbom, H. Ahn, B. Kornhall, M. Loebe, H. Granfeldt, B. Peterze, L. Hubbert. *The Heart Center at the University Hospital, Division of Cardiovascular Medicine, Departments of Medicine & Health, Faculty of Health Science, Linköping University, Linköping, Sweden, *Heart Failure Clinic, Department of Cardiology, Skane University Hospital, Lund, Sweden, *Division of Transplant and Assist Devices at Methodist DeBakey Heart & Vascular Center, Houston, TX.

(557) In Vivo Testing of a New Permanent Atrial Connector for Cardiac Assist Devices; S. Klotz, M. Petersen, M. Grossherr, H. H. Sievers. *Dept. of Cardiac and Thoracic Vascular Surgery, University Hospital Schleswig-Holstein, Campus Luebeck, Luebeck, Germany, *Dept. of Anaesthesiology, University Hospital Schleswig-Holstein, Campus Luebeck, Luebeck, Germany.

(558) Correlation of Hemodynamics and Function Capacity in 2nd and 3rd Generation LVADs; A. Ross, M. J. Sheridan, C. Rosner, C. W. May. *George Washington University Medical Center, Washington, DC, *INOVA Research Center, Falls Church, VA, *Heart Failure/Transplant Program, INOVA Fairfax Hospital, Falls Church, VA.


(563) Outcomes of Mechanical Circulatory Support in HIV Infected Patients from the INTERMACS Registry; S. V. Pamboukian1, J. W. Baddley1, J. K. Kirklin1, R. S. Cantor1, D. C. Naftel1, J. D. Miller1, J. J. Teuteberg2. 1University of Alabama at Birmingham, Birmingham, AL, 2University of Pittsburgh, Pittsburgh, PA.

(564) Effect of Pre-operative Albumin Level on Patient Outcomes after Implantation of Continuous Flow Left Ventricular Assist Device; T. A. Timek1, A. T. Davis2, T. I. Boeve1, P. Wilton1, M. Dickinson1, D. Langholz2, A. Khaghani1. 1Meijer Heart and Vascular Institute, Grand Rapids, MI, 2Grand Rapids Education Partners, Grand Rapids, MI.

(565) Mid and Late Outcomes Support Use of Contemporary Continuous Flow Left Ventricular Assist Devices in the Elderly; S. K. Singh1, R. Hernandez2, J. Anand1, A. C. Baldwin2, E. Sandoval Martinez3, W. E. Cohn4, O. Frazier4, H. R. Mallidi1. 1Surgery, Baylor College of Medicine, Houston, TX, 2Center for Cardiac Support, Texas Heart Institute, Houston, TX.

(566) Use of Various Mechanical Circulatory Support Strategies in End Stage Amyloidosis - A Single Center Experience From an Amyloid Heart Transplant Center; A. Bhimaraj, A. M. Cordero-Reyes, B. H. Trachtenberg, G. Asrith, L. P. Loza, M. Loebe, E. E. Suarez, B. A. Bruckner, G. Torre-Amione, J. D. Estep. Cardiology, Houston Methodist Hospital, Houston, TX.

(567) A Simplified Scoring System To Predict Post Operative Length of Stay in Mechanical Circulatory Support – A Multi-institutional Analysis; S. Bansal1, B. A. Whitson1, S. Moffatt-Bruce1, A. Joseph2, C. Holley3, L. Harvey2, R. S. Higgins1, R. John1, C. Sai-Sudhakar1. 1Surgery, Ohio State Medical Wexner Medical Center, Columbus, OH, 2College of Medicine, Ohio State Medical Wexner Medical Center, Columbus, OH, 3Surgery, Division of Cardiothoracic Surgery, University of Minnesota, Minneapolis, MN.

(568) Severity of End Org-an Damage as a Predictor of Outcomes after Implantation of Continuous Flow Left Ventricular Assist Devices (LVAD) as Bridge to Transplantation (BTT); B. Soleimani, Z. C. Landis, E. R. Stephenson, A. El-Banayosy, W. E. Pae. Cardiothoracic Surgery, Penn State Hershey Medical Center, Hershey, PA.

(570) Frailty Is Common in Patients Undergoing Left Ventricular Assist Device Implantation Regardless of Age or Transplant Eligibility: Results from a Prospective Trial;

S. M. Joseph1, T. Keeney2, J. Manghelli1, S. C. Martinez3, E. Novak2, S. Prasad1, M. Rich1, S. C. Silvestry1, 1Internal Medicine, Washington University School of Medicine, St. Louis, MO, 2Physical Therapy, Barnes Jewish Hospital, St. Louis, MO, 3Cardiothoracic Surgery, Washington University School of Medicine, St. Louis, MO.

(571) Early Ambulation as a Predictor of Length of Stay and Discharge to Home Following LVAD Implantation;

M. J. Shoemaker1, J. McLeod2, D. H. Karla1, M. G. Dickinson3, A. Gaskill2, D. Sefton1, K. VandeBunte1, C. Gallagher1, P. Wilton2. 1Department of Physical Therapy, Grand Valley State University, Grand Rapids, MI, 2Fred and Lena Meijer Heart Center, Spectrum Health, Grand Rapids, MI.

(572) Long-Term Outcome of Cardiac Transplant After Continuous-Flow Left Ventricular Assist Device Support;


(573) Recurrent LV Dilation After Initial Decompression with Continuous-flow Left Ventricular Assist Device (CFLVADS): Implications on Long Term Survival;

T. Yingchoncharoen1, S. Kumar1, Z. B. Popovic1, M. Mountis1, R. C. Starling1, S. Lee1, N. Moazami1, 1Cardiovascular Medicine, Cleveland Clinic, Cleveland, OH, 2Cardiothoracic Surgery, Cleveland Clinic, Cleveland, OH.

(574) Epidemology and Outcomes Associated With Anemia During Long-Term Continuous-Flow Left Ventricular Assist Device Support;

D. L. Jennings1, J. L. Wagner2, C. W. Nemerovski2, J. S. Kalus2, J. A. Morgan2, D. E. Lanfear4, 1Pharmacy Practice, Nova Southeastern University, Ft. Lauderdale, FL, 2Pharmacy Services, Henry Ford Hospital, Detroit, MI, 3Cardiac Surgery, Henry Ford Hospital, Detroit, MI, 4Pharmacy Services, Henry Ford Hospital, Detroit, MI.

(575) A Time-Dependent Model of Survival for Adverse Events in Bridge To Transplant Patients;

S. Bansal1, K. R. Jackson2, J. K. Bhamara1, J. Teuterberg1, M. Simon1, C. Bermudez1, M. Shullo1, L. Huffman1, J. W. Hayanga1, K. L. Lockard1, R. L. Kormos1. 1Heart and Vascular Institute, University of Pittsburgh, Pittsburgh, PA, 2College of Medicine, University of Pittsburgh, Pittsburgh, PA.

(576) Post-operative Hyperbilirubinemia in Predicting Morbidity and Mortality Associated with Continuous Left Ventricular Assist Implantation;

S. Kumar2, T. Yingchoncharoen1, V. Cruz1, R. Steffen1, E. Soltesz2, M. Mountis1, S. Lee1, R. C. Starling1, N. Moazami1. 1Heart Failure & Transplantation, Cleveland Clinic Foundation, Cleveland, OH, 2Department of Thoracic And Cardiovascular Surgery, Cleveland Clinic Foundation, Cleveland, OH.

(577) Improvement in Left and Right Ventricular Function Measured by 3-D Echocardiography Following Centrifugal Continuous Flow Left Ventricular Assist Device Support;

K. Muthiah1, A. Bhat1, D. Robson1, F. Ali2, A. Dong2, P. Macdonald1, J. McCrohon2, C. S. Hayward1. 1Cardiac Failure and Transplant Unit, St. Vincent’s Hospital, Sydney, Australia, 2Department of Cardiology, St. Vincent's Hospital, Sydney, Australia.
(578) Safety, Feasibility and Time Requirement of Echocardiography Pump Speed Change Testing in Patients With Continuous-Flow Left Ventricular Assist Devices; J. D. Estep1, A. M. Cordero-Reyes1, A. Soliman1, R. P. Vivo2, B. Elias1, B. H. Trachtenberg1, G. Ashrith1, G. Torre-Amine1, M. Loebe1, A. Bhimaraj1. 1Cardiology, Houston Methodist Hospital, Houston, TX, 2Cardiology, UCLA, Los Angeles, CA.

(579) Validation of the Echocardiographic RAMP Test to Diagnose Device Obstruction; C. Holley, P. Eckman, R. John, H. Yarmohammedi, M. Colvin-Adams, C. Masri, T. Thennapin, S. Adaway. University of Minnesota, Minneapolis, MN.


(581) Long-Term Outcomes of Left Ventricular Assist Device Therapy in Scandinavia; L. H. Lund1, M. Holme-Jung2, F. Gustafsson3, G. Dellgren1, A. Fiane4, K. Lemström4, L. Hubbert4, L. Helligren-Johansson1, H. Eiskjaer5, B. Koul6, E. Gude7, J. Nilsson2, 1Karolinska University, Stockholm, Sweden, 2Copenhagen University, Copenhagen, Denmark, 3Sahlgrenska Academy, Göteborg, Sweden, 4Oslo University, Oslo, Norway, 5Helsinki University, Helsinki, Finland, 6Linköping University, Linköping, Sweden, 7Uppsala University, Uppsala, Sweden, 8Århus University, Århus, Denmark, 9Lund University, Lund, Sweden.


(583) Blood Pressure Profiles of Patients with Left Ventricular Assist Devices; P. T. Campbell1, S. Krim1, S. Desai1, S. Mandras1, H. Patel1, M. R. Mehra2, H. Ventura1. 1John Ochsner Heart and Vascular Institute, Ochsner Clinic Foundation, New Orleans, LA, 2Cardiology, Brigham and Women’s Hospital and Harvard Medical School, Boston, MA.

(584) Gene Expression Profiling Test (GEP) Scores and Outcomes of Heart Transplant with Prior Mechanical Circulatory Support: Results from IMAGE and CARGO II; N. Uriel1, J. Teuteberg2, S. Pinney2, M. Crespo-Leiro3, S. Hall5, A. Crumbley4, M. Deng1, J. Vanhaecke2, J. Szympn4, D. Hiller10, P. J. Arnold10, J. Yee10, C. Patel11, R. Starling12, D. Feldman12, 1Medicine, Columbia University, New York, NY, 2Medicine, University of Pittsburgh, Pittsburgh, PA, 3Medicine, Mount Sinai, New York, NY, 4Medicine, Unidad de Insuficiencia Cardiaca Avanzada y Trasplante Cardiaco, Hospital Universitario A Coruña, La Coruña, Spain, 5Medicine, Baylor Heart Hospital, Dallas, TX, 6Medicine, Medical University of South Carolina, Charleston, SC, 7Medicine, UCLA Medical Center, Los Angeles, CA, 8Cardiovascular Sciences, University Hospitals Leuven, Leuven, Belgium, 9Cardiovascular Medicine, University Hospital Münster, Münster, Germany, 10XDX, Brisbane, CA, 11Medicine, Duke University, Durham, NC, 12Cardiovascular Medicine, Cleveland Clinic, Cleveland, OH, 13Medicine, Abbott Northwestern Hospital, Minneapolis, MN.
(585) Transplanting Patients with VADs Using the Organ Care System Shows Significantly Improved Outcomes: A New Standard of Care?

(586) Extended Bridge To Transplant: 4 Years Outcomes With 3rd Generation LVADs in an Era of Restricted Transplantation

(587) Two-year Survival After Continuous-flow Left Ventricular Assist Device Versus Heart Transplantation: An Italian Single Centre Perspective

(588) Depression Does Not Affect Outcomes in Patients with Left Ventricular Assist Devices
D. S. Raymer, M. E. Nassif, J. M. Vader, E. Novak, G. A. Ewald, S. J. LaRue. Cardiovascular Division, Barnes-Jewish Hospital, St. Louis, MO.

(589) Psychosocial Assessment of Candidates for Transplantation Score and Readmissions in HeartMate II Bridge to Transplant Left Ventricular Assist Device Patients
S. Schettle, A. Luckhardt, J. Schirger, B. Boilson. Cardiovascular Surgery, Mayo Clinic Rochester, Rochester, MN.

(590) Successful LVAD Therapy in Patients Ineligible for Heart Transplantation Due to Psychosocial Considerations
N. Rajagopalan, T. A. Tribble, D. R. Dennis, R. Yanagida, C. W. Hoopes. University of Kentucky, Lexington, KY.

(591) Clinical Outcomes of Multidisciplinary Team Management in Patients Supported With Left Ventricular Assist Devices

(592) Daily Activity in Rotary Blood Pump Recipients

(593) The Necessity of the Caregiver in LVAD Therapy: Time for Introspection and Change?
E. H. Lee1, J. X. Wang4, P. Boende3. 1Bonde Artificial Heart Lab, Yale University School of Medicine, New Haven, CT, 2Yale University School of Medicine, New Haven, CT.

(594) Emergency Care for Patients with Continuous Flow Left Ventricular Assist Devices
K. B. Shah1, L. F. Cei1, S. P. Pinney2, M. A. Peberdy1. 1Virginia Commonwealth University, Richmond, VA, 2Mount Sinai Hospital, New York, NY.
THURSDAY / MODERATED POSTER SESSIONS – I

NURSING, ALLIED HEALTH, SOCIAL SCIENCE

(NHSAH)

(595) A New Outpatient Surveillance Program Improves Home Based Care in Long Term LVAD Recipients:

(596) Dried Blood Spot Monitoring After Lung Transplantation: Patients Perspectives:
M. J. Wessels-Bakker1, E. M. van Maarseveen2, M. E. Janssen3, H. D. Luijk1, E. A. van de Graaf1, A. C. Egas2, J. M. Kwakkel-van Erp1. 1Department of Respiratory Medicine, University Medical Center Utrecht, Utrecht, Netherlands, 2Department of Clinical Pharmacy, University Medical Center Utrecht, Utrecht, Netherlands.

(597) A Descriptive Study Examining Post Lung Transplantation: Patient Employment Status, Restricting Factors for Work, and Support Requirements:
K. Scott, A. Reed. Cardiothoracic Transplantation, Royal Brompton and Harefield NHS Foundation Trust, Harefield, United Kingdom.

(598) The New Normal: A Bourdieusian Examination of Living Into Young Adulthood Being a Paediatric Heart Transplant Recipient:
O. Mauthner1, J. Angus2, D. Gastaldo2, H. Ross3. 1University of Toronto, Toronto, ON, Canada, 2Lawrence S. Bloomberg Faculty of Nursing, University of Toronto, Toronto, ON, Canada, 3Heart Failure and Transplantation, University Health Network, Toronto, ON, Canada.

(599) Running with a VAD:
L. M. Fuller1, J. M. Van Weel2, R. Stonebrink3, A. T. Burge4, K. Hayes1, A. Fuller4, P. Bergin1. 1Physiotherapy, The Alfred Hospital, Melbourne, Australia, 2Physiotherapy, Monash University, Melbourne, Australia, 3Heart Transplant Services, The Alfred Hospital, Melbourne, Australia, 4Infectious Diseases, The Alfred Hospital, Melbourne, Australia.

(600) Getting Ready and Then Keeping Quiet? Exploring Grief With Pre and Post-Transplant Patients:
J. M. Poole1, J. Ward3, E. De Luca3, M. Shildrick4, S. Abbey6, O. Mauthner1, M. Gewarges7, H. J. Ross8. 1School of Social Work, Ryerson University, Toronto, ON, Canada, 2School of Social Work, Laurier University, Waterloo, ON, Canada, 3Department of Cardiology and Transplantation, University Health Network, Toronto, ON, Canada, 4The Department of Thematic Studies – Gender Studies, Linköping University, Linköping, Sweden, 5Department of Psychiatry, University Health Network, University of Toronto, Toronto, ON, Canada, 6Department of Cardiology and Transplantation, University Health Network, Toronto, ON, Canada, 7Faculty of Medicine, University of Toronto, Toronto, ON, Canada, 8Department of Cardiology and Transplantation, University Health Network, University of Toronto, Toronto, ON, Canada.

(601) Improving the Heart Transplant Decision Making Process: 10-year Experience Using the Heart Transplant Candidate Selection Form:
Q. Young, A. Kaan. Heart Centre, St. Paul's Hospital, Vancouver, BC, Canada.
Non-Adherence Is Associated With Mortality in Adolescent Lung Transplant Recipients;
Lung Transplant Service, Alfred Hospital, Melbourne, Australia; Department of Epidemiology and Preventive Medicine, Monash University, Melbourne, Australia; Department of Pharmacy, Alfred Hospital, Melbourne, Australia.

Outcome of Pediatric Heart Transplantation Has Continued to Improve Over the Last Three Decades: Impact of Mechanical Circulatory Support;

Technique for Pediatric En Bloc Lung Transplantation with Bronchial Artery Revascularization;
Y. Orr, C. M. Mery, I. Adachi, J. S. Heinle, E. D. McKenzie. Baylor College of Medicine, Houston, TX.

Pediatric Lung Transplant Patients with Cystic Fibrosis Need High Voriconazole Dosing to Achieve Therapeutic Drug Levels;
E. Melicoff, M. C. Gazzaneo, S. Kim, M. M. Messinger, G. B. Mallory. Pediatrics, Baylor College of Medicine, Houston, TX; Solid Organ Transplant Services, Texas Children’s Hospital, Houston, TX; Neurology, Texas Children’s Hospital, Houston, TX.

Reliability of Echocardiographic Measurements of Left Ventricular Function in Potential Pediatric Heart Transplant Donors;
S. Chen, E. Selamet Tierney, K. K. Khush, J. Nguyen, B. Goldstein, L. J. May, D. Rosenthal. Pediatric Cardiology, Stanford University, Palo Alto, CA; Cardiovascular Medicine, Stanford University, Palo Alto, CA; California Transplant Donor Network, Oakland, CA; Medicine, Stanford University, Palo Alto, CA.

The Impact of Concomitant Left Ventricular Non-Compaction (LVNC) with Congenital Heart Disease (CHD) on Peri-Operative Outcome;

Cumulative Exposure to Medical Sources of Ionizing Radiation in the First Year After Pediatric Heart Transplantation;

CDC “High Risk” Donor Status and Patient Outcome in Pediatric Heart Transplantation;

The Effect of Medication Regimens on Cardiac Allograft Vasculopathy in Pediatric Heart Transplant Recipients;
B. S. Moffett, B. J. Hong, S. W. Denfield, T. J. Humlicek, D. M. Orosco, A. G. Cabrera, L. DeJesus, K. Castrillon, J. F. Price, W. J. Dreyer, A. Jeewa. Texas Children’s Hospital, Houston, TX; Baylor College of Medicine, Houston, TX.
Influence of MELD (Model of End-Stage Liver Disease) _XI (eXcluding INR) on Pediatric Post-Heart Transplant (HT) Outcomes;
E. C. DePasquale, L. Reardon, A. Nsair, M. Deng, J. Alejos.
UCLA, Los Angeles, CA.

QUALITY OF LIFE, ETHICS POLICY
AND THE ECONOMICS OF THORACIC
TRANSPLANTATION AND MCS

(PEEQ)

Impact of Mechanical Support on Quality of Life Measures Over Time – Is There a Differential Response Based Upon Indication?;
J. J. Teuteberg1, M. McNulty2, J. Holtz2, N. Kunz2, K. Lockard1, E. Dunn1, C. Bermudez2, J. K. Bhama1, M. A. Shullo1, R. Kormos1, M. Dew1. 1Heart and Vascular Institute, University of Pittsburgh, Pittsburgh, PA, 2Department of Psychiatry, University of Pittsburgh, Pittsburgh, PA, 3Pharmacy and Therapeutics, University of Pittsburgh, Pittsburgh, PA.

Challenges to Lung Recovery from Sudden Death Victims to Assess Suitability for Transplant, and Strategies to Address These Challenges;
T. Egan1, E. Burker1, J. R. Requard III1, P. Noone1, G. Murray1. 1Surgery, University of North Carolina School of Medicine, Chapel Hill, NC, 2Allied Health, University of North Carolina School of Medicine, Chapel Hill, NC, 3Lung Banks of America, Chapel Hill, NC, 4Medicine, University of North Carolina School of Medicine, Chapel Hill, NC.

The Growing Impact of Lung Transplant (LTX) on Survival for Patients with Cystic Fibrosis (CF);
P. Stewart1, J. Yankaskas2, T. M. Egan1. 1Biostatistics, Gillings Global School of Public Health University of North Carolina, Chapel Hill, NC, 2Medicine, University of North Carolina School of Medicine, Chapel Hill, NC, 3Surgery, University of North Carolina School of Medicine, Chapel Hill, NC.

PULMONARY HYPERTENSION

Macrophages Infiltration Is Associated with Maladaptive Remodeling of the Right Ventricle in an Experimental Model of Pulmonary Hypertension;
J. Guihaire1, T. Deuse1, E. Fadel1, H. Reichenspurner1, R. C. Robbins1, S. Schreper1. 1Transplant and Stem Cell Immunobiology Lab, University Heart Center Hamburg, Hamburg, Germany, 2Thoracic and Vascular Surgery and Heart-Lung Transplantation, Marie Lannelongue Hospital, University of Paris Sud, Le Plessis Robinson, France, 3Cardiothoracic Surgery, Stanford University, Palo Alto, CA.

Biomechanics of Right Ventricular Myocardial Remodeling in Response to Pressure Overload;
M. A. Simon1, M. Hill2, H. C. Champion1, M. S. Sacks2. 1Vascular Medicine Institute, University of Pittsburgh, Pittsburgh, PA, 2Bio-medical Engineering, The University of Texas at Austin, Austin, TX.
(617) Right Ventricular Dyssynchrony in Idiopathic Pulmonary Arterial Hypertension: Insights From Echocardiographic and Cardiac Magnetic Resonance Imaging; R. Badagliacca1, R. Poscia1, B. Pezzuto1, S. Papa1, C. Gambardella1, M. Francone2, M. Mezzapesa1, M. Nocioni1, A. Nona1, R. Rossati1, S. Sciepre1, F. Fedele1, C. D. Vizza1, 1Dept. of Cardiovascular and Respiratory Science, Sapienza University of Rome, Rome, Italy, 2Dept. of Radiology, Sapienza University of Rome, Rome, Italy.

(618) Optical Coherence Tomography in Pulmonary Arteries: A Proof of Concept Study; E. R. Fenstad1, A. Behfar, A. Terzic, M. D. McGoon, G. C. Kane, R. P. Frantz. Cardiovascular Disease, Mayo Clinic, Rochester, MN.

(619) Clinical and Prognostic Significance of Heart Rate Variability in Pulmonary Hypertension; O. Musayev1, M. Kayikcioglu2, N. Mogulkoc2, O. Vuran2, K. Musayev3, H. Kultursay2, 1Central Clinic, Baku, Azerbaijan, 2Ege University Medical Faculty, Izmir, Turkey.

(620) The Impact of Anemia on Survival in Pulmonary Arterial Hypertension; G. Ramani1, D. Lam1, M. Park1. 1Medicine, University of Maryland, Baltimore, MD, 2United Therapeutics Corporation, Durahm, NC.

(621) Beta-Blocker Therapy Is Not Associated with Adverse Outcomes in Pulmonary Arterial Hypertension; T. Thenappan1, C. Glassner1, M. Gomberg-Maitland2. 1Medicine-Cardiology, University of Minnesota, Edina, MN, 2Medicine-Cardiology, University of Chicago, Chicago, IL.

(622) Right Ventriculo-Arterial Coupling in Patients With Pulmonary Arterial Hypertension Undergoing Rapid Dose Escalation of Treprostinil; F. Rischard1, H. Champion2, R. Vanderpool2, A. Wamman3, L. Hansen4, 1Department of Pulmonary and Critical Care Medicine, University of Arizona, Tucson, AZ, 2Vascular Medicine Research Institute, University of Pittsburgh, Pittsburgh, PA, 3Pulmonary Vascular Disease Program, Brigham and Women’s Hospital, Boston, MA, 4BIO5 Institute, University of Arizona, Tucson, AZ.

(623) Right Ventricular Function and Pulmonary Artery Compliance Improve with Phosphodiesterase type 5A (PDE5A) Inhibitor Therapy in Pulmonary Hypertension; M. M. Patarroyo Aponte1, M. R. Pritzker, K. Weir, A. Sharma, J. Rasmussen, T. Thenappan. Cardiology, University of Minnesota, Minneapolis, MN.

(624) Totally Implantable IV Treprostinil Therapy in Pulmonary Arterial Hypertension: Assessment of the Implantation Procedure; T. McElderry1, A. Wamman1, M. Gomberg-Maitland2, M. Burke3, E. Ross4, M. Bersohn5, J. Tarver6, D. Zwire7, J. Feldman8, M. Chakinala9, R. Frantz10, F. Torres11, P. Li12, M. Morris13, 1Cardiology, University of Chicago Medical Center, Chicago, IL, 2Anesthesiology, Brigham & Women's Hospital, Boston, MA, 3Cardiology, The University of Chicago, Chicago, IL, 4Medtronic, Mounds View, MN, 5Cardiology, Washington University School of Medicine, Saint Louis, MO, 6Cardiology, Mayo Clinic, Rochester, MN, 7Anesthesiology, The University of Texas (UT) Southwestern Medical Center, Dallas, TX, 8Cardiology, Arizona Pulmonary Specialists, Ltd., Phoenix, AZ, 9Cardiology, Aurora Cardiovascular Services, Milwaukee, WI, 10Cardiology, Arizona Pulmonary Specialists, Ltd., Phoenix, AZ, 11Cardiology, Mildred G. Creed, Saint Louis University, Missouri, Saint Louis, MO, 12Cardiology, Mayo Clinic, Rochester, MN, 13United Therapeutics Corporation, Research Triangle Park, NC.
NOTE: Poster presenters and moderators will be present during the evening poster viewing session from 5:30 PM – 6:30 PM.

**MECHANICAL CIRCULATORY SUPPORT**

(625) Veno-arterial Shunting Is Tolerated in a Canine Model of Partial Ventricular Assist:
R. Malekan1, K. Qanud1, M. Ochoa1, A. Kanevsky1, T. H. Hintze2, S. L. Lansman1. 1Cardiothoracic Surgery, Westchester Medical Center, Valhalla, NY, 2Physiology, New York Medical College, Valhalla, NY.

(626) Unloading Characterization of the HeartWare HVAD® Pump in a Healthy and Acute Heart Failure Ovine Model:
K. Chorpenning1, E. Tuzun2, C. Reyes1, K. Bonugli2, S. Reyes-Hadsall1, D. Tamez5. 1Advanced Product Development, HeartWare, Inc, Miami Lakes, FL, 2Texas A&M Institute for Preclinical Studies, College Station, TX.

(627) High Molecular Weight Serum Adiponectin Levels in Advanced Heart Failure Patients Before and After Continuous Flow Left Ventricular Assistance Device:
R. Denadai Benatti1, S. Khan2, D. Thomas2, A. Zhang2, D. O. Taylor2, R. C. Starling1, J. Schold1, M. Askar2, W. Baldwin4. 1Department of Cardiovascular Medicine, Cleveland Clinic, Cleveland, OH, 2Allogen Laboratories Transplant Center, Cleveland Clinic, Cleveland, OH, 3Department of Quantitative Health Sciences, Cleveland Clinic, Cleveland, OH, 4Immunology, Cleveland Clinic, Cleveland, OH.

(628) Circulating Levels of miR-15b and miR-133b in Patients during Chronic LVAD Unloading:
O. Galenko1, A. G. Kfoury1, C. Yen1, C. H. Selzman2, J. Stehlik2, N. Diakos2, O. Wever-Pinzon2, B. B. Reid1, H. Peterson1, S. Knight1, R. Alharethi1, D. Budge1, J. Nativi-Nicolau3, D. Y. Li2, J. C. Carlquist1, S. G. Drakos2. 1Intermountain Medical Center, Salt Lake City, UT, 2University of Utah, Salt Lake City, UT, 3UTAH Cardiac Transplant Program, Salt Lake City, UT.

(629) RNAseq Identifies Novel Potential Right Ventricular Biomarkers in Human Heart Failure:
T. Di Salvo1, A. Hennes1, J. Januzzi2, S. Maltais1. 1Vanderbilt, Nashville, TN, 2Massachusetts General Hospital, Boston, MA.

(630) Patient Risk Stratification by Early Identification of Systemic Inflammatory Response via T cell Immunophenotyping at Time of Mechanical Circulatory Support Device Implantation:
J. M. Schaenman1, M. Cadeiras2, Y. Korin1, G. Bondar2, M. H. Kwon1, E. F. Reed1, M. Deng2. 1Division of Infectious Diseases, Department of Medicine, David Geffen School of Medicine at UCLA, Los Angeles, CA, 2Advanced Heart Failure Program, Division of Cardiology, Department of Medicine, David Geffen School of Medicine at UCLA, Los Angeles, CA, 3UCLA Immunogenetics Center, David Geffen School of Medicine at UCLA, Los Angeles, CA, 4Division of Cardiothoracic Surgery, Department of Surgery, David Geffen School of Medicine at UCLA, Los Angeles, CA, 5Department of Pathology and Laboratory Medicine, UCLA Immunogenetics Center, David Geffen School of Medicine at UCLA, Los Angeles, CA.
(631) Does Postoperative Improvement in Brain Natriuretic Peptide Predict Readmission after Left Ventricular Assist Device?
N. A. Haglund, M. E. Davis, N. M. Tricarico, H. Nian, K. Schlendorf, S. Maltais, M. E. Keebler, Vanderbilt University Medical Center, Nashville, TN.

(632) Cellular Ca2+ Handling in Cardiac Atrophy and Hypertrophy:
1Department of Cellular and Integrative Physiology, University Medical Center Hamburg Eppendorf, Hamburg, Germany, 2Department of Cardiovascular Surgery, University Heart Center Hamburg, Hamburg, Germany, 3Department of Pharmacology and Toxicology, University of Muenster, Muenster, Germany, 4Department of Pharmacology, University Medical Center Goettingen, Goettingen, Germany, 5Institute of Experimental and Clinical Pharmacology and Toxicology, University Medical Center Eppendorf, Hamburg, Germany, 4Institute of Cellular and Molecular Physiology, Friedrich-Alexander-University Erlangen-Nuremberg, Erlangen, Germany.

(633) Differential Mitochondrial Gene Expression in Patients Undergoing MCS D Implantation:

(634) Stromal-Derived Factor-1 (SDF-1) Expression is Downregulated After Chronic Continuous Flow Left Ventricular Assist Device (CF-LVAD) Support:

(635) MicroRNA-1202 Is a Candidate Biomarker To Assist Selection of Patients for Therapy With a Left Ventricular Assist Device:
A. C. Morley-Smith1, A. Mills2, S. Jacobs3, B. Meyns3, F. Rega3, A. R. Simon1, J. R. Pepper1, A. R. Lyon1, T. Thum1. 1Royal Brompton & Harefield NHS Foundation Trust & Imperial College London, London, United Kingdom, 2Imperial College London, London, United Kingdom, 3University Hospitals Leuven, Leuven, Belgium, 4Hannover Medical School, Hannover, Germany; and Imperial College London, London, United Kingdom.

(636) B-Type Natriuretic Peptide Profiles in the Setting of Chronic Left Ventricular Assist Device Support:
S. R. Krim1, P. T. Campbell1, M. R. Mehra2, H. O. Ventura1. 1Cardiology, Ochsner Heart and Vascular Institute, New Orleans, LA, 2Cardiology, Brigham and Women's Hospital and Harvard Medical School, Boston, MA.

(637) Regression of Cellular Hypertrophy Leads to Functional Recovery Following Implantation with Centrifugal Continuous Flow Left Ventricular Assist Devices:
K. Muthiah1, D. Humphreys1, D. Robson1, P. Macdonald1, K. Dhillon1, P. Jansz2, C. S. Hayward1. 1Cardiac Failure and Transplant Unit, St. Vincent's Hospital, Sydney, Australia; 2Victor Chang Cardiac Research Institute, Sydney, Australia, 3Cardiothoracic Surgery and Transplant Unit, St. Vincent’s Hospital, Sydney, Australia.
(638) **Myocardial Microvascular Density Increases After Chronic Continuous Flow Left Ventricular Assist Device (CF-LVAD) Support:**

M. Yuzefpolskaya¹, A. Godier-Furnemont², A. P. Levin³, M. Dionizovik-Dimanovski², H. Takayama¹, Y. Naka¹, N. Uriel³, P. C. Colombo¹, G. Vunjak-Novakovic¹, U. P. Jorde¹, ¹Medicine, Columbia University, New York, NY, ²Stem Cell Engineering, Columbia University, New York, NY, ³Surgery, Columbia University, New York, NY.

(639) **Effect of Continuous-Flow LVADs on Pulmonary Arterial Pressure: Comparison Between Axial and Centrifugal Flow Devices:**

M. F. Jumean¹, P. A. Quintero¹, A. R. Patel¹, D. DeNofrio¹, K. G. Warner², D. T. Pham¹, M. S. Kiernan¹, ¹Cardiology, Tufts Medical Center, Boston, MA, ²Cardiothoracic Surgery, Tufts Medical Center, Boston, MA.

(640) **Can Body Mass Index Identify Patients at Risk for Right Ventricular Failure after LVAD Placement?**

J. K. Bhama¹, M. A. Dew², J. J. Teuteberg¹, L. Huffman, S. Bansal³, M. Simon³, C. A. Bermudez², T. Richards³, R. L. Kormos¹, ¹Heart & Vascular Institute, University of Pittsburgh Medical Center, Pittsburgh, PA, ²Departments of Psychiatry, Epidemiology & Biostatistics, University of Pittsburgh Medical Center, Pittsburgh, PA.

(641) **Right Ventricular Assist Device Support After Continuous Flow Left Ventricular Assist Device Implantation: Predicting a Poor Predictor:**

S. K. Singh¹, R. Hernandez², J. Anand¹, A. Baldwin², E. Sandoval Martinez², W. E. Cohn³, O. H. Frazier³, H. R. Mallidi¹, ¹Surgery, Baylor College of Medicine, Houston, TX, ²Centre for Cardiac Support, Texas Heart Institute, Houston, TX.

(642) **Isolated RVAD Implantation - First Results from the EUROMACS Registry:**

A. M. Bernhardt¹, T. M. De By², H. Reichenspurner¹, T. Deuse¹, ¹Department of Cardiovascular Surgery, University Heart Center Hamburg, Hamburg, Germany, ²EUROMACS, Berlin, Germany.

(643) **Banding of Right Ventricular Assist Device (RVAD) of Outflow Conduit: Is It Really Necessary With Current Devices?**

C. Lo¹, S. Gregory¹, M. Stevens¹, D. Murphy¹, S. Marasco¹, ¹Sir Charles James Office Brown Department of Cardiothoracic Surgery, Alfred Hospital, Prahran, Victoria, Australia, ²Innovative Cardiovascular Engineering and Technology Laboratory, The Prince Charles Hospital, Brisbane, Queensland, Australia, ³Innovative Cardiovascular Engineering and Technology Laboratory, The Prince Charles Hospital, Brisbane, Queensland, Australia, ⁴Department of Intensive Care, Alfred Hospital, Prahran, Victoria, Australia.

(644) **RV Fractional Area Change at 6 Months But Not at Pre-Implant Is Associated with Late Indices of Functional Capacity and Renal Function: A Case for the Importance of Late RV Dysfunction in Long Term MCS:**

J. Rame¹, J. E. Birati¹, V. Ramjee¹, E. Laverty-Wilson¹, T. Plappert², J. Donnelly², J. Waid², P. Attun³, Y. Woo², M. Acker², J. Kirkpatrick¹, ¹Cardiology, Hospital of the University of Pennsylvania, Philadelphia, PA, ²Hospital of the University of Pennsylvania, Philadelphia, PA.
(645) Dilated Tricuspid Valve Annulus Vs. Tricuspid Regurgitation as a Predictor of Right Ventricular Failure After Left Ventricular Assist Device Implant; L. A. Goldraich1, H. Kawajiri1, F. Foroutan1, P. Billia1, J. Misurka2, H. Ross1, R. Cusimano1, T. Yau1, V. Rao1. 1Mechanical Circulatory Support Program, Peter Munk Cardiac Center, University of Toronto, Toronto, ON, Canada, 2Echocardiography Laboratory, Peter Munk Cardiac Center, University of Toronto, Toronto, ON, Canada.

(646) Prevalence of Late Right Ventricular Dysfunction After Left Ventricular Assist Device Implantation; E. Roberts1, N. Z. Sulemanjee1, L. Lazarov1, J. A. Cook2, K. A. Schultz2, C. Cho1, O. M. Cheema1, T. Hastings1, D. L. Zwickle1, J. Crouch1, F. X. Downey2, V. Thohan1. 1Aurora Cardiovascular Services, Aurora Sinai/Aurora St. Luke’s Medical Centers, University of Wisconsin School of Medicine and Public Health, Milwaukee, WI, 2Aurora St. Luke’s Medical Center, Milwaukee, WI, 3Aurora Medical Group–Cardiovascular and Thoracic Surgery, Aurora St. Luke’s Medical Center, Milwaukee, WI.

(647) Pulmonary Vasodilators Early and in High Dose Improve Outcomes and Reduce Right Ventricular Failure After Left Ventricular Device Implantation; C. H. Critoph, K. Lam, J. A. Baumwol, L. Dembo, A. Shah, H. Hayes, J. Barber, R. Larbalestier, S. Chih. Advanced Heart Failure and Cardiac Transplantation Service, Royal Perth Hospital, Perth, Australia.

(648) Effect of Left Ventricular Assist Device on Ovine Tricuspid Annular 3D Geometry; M. Malinowski1, P. Wilt1, A. Khaghani1, M. Brown1, D. Karia1, D. Langholz1, V. Hooker1, L. Eberhart1, B. Hooker1, T. Timek1. 1Department of Cardiac Surgery, Medical University of Silesia, Katowice, Poland, 2Meijer Heart and Vascular Institute at Spectrum Health, Grand Rapids, MI.

(649) Impact of Preimplantation Tricuspid Regurgitation on Long Term Outcome in Patients Undergoing LVAD Implantation in the Era of Rotary Blood Pumps; A. Ghodsizad, M. M. Koerner, B. Soleimani, T. E. Stephenson, A. Haozui, C. Brehm, W. E. Pae Jr., A. El-Banayosy, Penn State Hershey Medical Center & Heart and Vascular Institute, Hershey, PA.


(652) Tolerability and Biological Effects of Long Acting Octreotide in Patients With Continuous Flow Left Ventricular Assist Devices; R. Malhotra1, C. T. DeWilde1, M. Smallfield2, D. F. Brophy3, K. B. Shah4. 1Internal Medicine/Critical Care Medicine, VCU Health System, Richmond, VA, 2Internal Medicine/Cardiology, VCU Health System, Richmond, VA, 3Pharmacy, VCU Health System, Richmond, VA.
Early Identification of Impending LVAD Thrombosis Utilizing an Ultra-High Predictive Serum Marker in Lactate Dehydrogenase; 

Markers of Lower Pump Flow Are Risk Factors for Pump Thrombosis with the Heartmate II Left Ventricular Assist Device; 

Continuous Flow Left Ventricular Assist Device Thrombosis: Presentation, Management and Outcomes; 
D. Zhao, K. B. Shah, L. Wolfe, G. Katlaps, D. Tang, V. Kasirajan, S. Harton, M. Quader. Cardio-Thoracic Surgery, Virginia Commonwealth University, Richmond, VA.

Prediction of Hemostatic Dysfunction in Patients Implanted with the HeartMate II LVAD; 
J. M. Walenga, E. Coplanes, V. Escalante, W. Jeske, B. Duebner, G. Pems, E. Boyes, J. Bailey, A. Casillian, E. Pedone, A. Heroux, J. P. Schwartz, M. Bakhos. Thoracic-Cardiovascular Surgery, Loyola University Medical Center, Maywood, IL, *Heart Failure/Heart Transplant, Loyola University Medical Center, Maywood, IL, Thoracic-CV Surgery, Loyola University Medical Center, Maywood, IL, *Heart Failure/Heart Transplant Program, Loyola University Medical Center, Maywood, IL, *Stritch School of Medicine, Loyola University Chicago, Maywood, IL.

Changes in Platelet Count After Heart Mate II Insertion Implications for Rationale Use of Anti Platelet Factor IV Antibodies; 

Nasal Mucosal Changes during Continuous Flow (CF)- LVAD Support; 

Diagnostic Utility of Capsule Endoscopy in Evaluating GI Bleeding in LVAD Patients; 
M. Mohammad Alahmad, B. Alkhaili, S. Sayfo, S. Spayd, M. Slaughter, E. Birks, A. Lenneman, K. McCants. Cardiovascular Medicine, University of Louisville, Louisville, KY, Cardiovascular Surgery, University of Louisville, Louisville, KY.

Use of ADP Receptor Inhibitor Prior to LVAD Implantation Does Not Increase Risk of Bleeding; 

Utility of Octreotide for Treatment of Recurrent Gastrointestinal Bleeding in Continuous-Flow Left Ventricular Assist Device Patients; 
T. Hashim, R. Loyaga-Rendon, D. Acharya, J. A. Tallaj, J. K. Kirklin, W. L. Holman, S. V. Pamboukian. Division of Cardiovascular Diseases, University of Alabama, Birmingham, AL, Division of Cardiothoracic Surgery, University of Alabama, Birmingham, AL.
Can the Severity of Post-operative Bleeding Events be Predicted from Von Willebrand Factor Dysfunction in Continuous Flow Left Ventricular Assist Device Recipients?
N. M. Tricarico, M. E. Davis, M. E. Keebler, S. Maltais, N. A. Haglund, D. J. Lenihan. Vanderbilt University Medical Center, Nashville, TN.

Large Perioperative Red Blood Cell Transfusion Requirements Are Associated with Increased Long Term Mortality After LVAD Implantation;
C. T. Holley1, R. J. Cogswell2, L. Harvey1, P. Eckman2, M. Colvin-Adams2, K. Liao1, R. John1. Surgery, University of Minnesota, Minneapolis, MN, 2Cardiology, University of Minnesota, Minneapolis, MN.

Consequences of Long-Term Anticoagulation and Antiplatelet Cessation in Patients on Bleeding Complications;
M. Z. Tong1, Y. A. He1, V. Cruz1, E. G. Soltesz2, N. Smedira1, S. Lee1, N. Moazami1, M. Mounts1, Thoracic and Cardiovascular Surgery, Cleveland Clinic, Cleveland, OH, 2Cardiovascular Medicine, Cleveland Clinic, Cleveland, OH, 3Cardiovascular Medicine, Cleveland Clinic, Cleveland, OH.

Epistaxis in Patients with Left Ventricular Assist Devices – Incidence, Risk Factors, and Implications;
P. Bhat, M. E. Nassif, J. M. Vayer, C. T. Sparrow, E. Novak, G. A. Ewald, S. J. LaRue. Division of Cardiology, Department of Medicine, Washington University School of Medicine, St. Louis, MO.

The Impact of VA ECMO on LV Function;
M. Dickstein1, M. Bacchetta2. 1Anesthesiology, Columbia University, New York, NY, NY, 2Surgery, Columbia University, New York, N.Y., NY.

Extracorporeal Membrane Oxygenation (ECMO) Practices for Bridging to Lung Transplantation in North America: A Multi-Center Survey;
R. Fadul1, K. McCurry2, M. Budev1, J. J. Yun1, Respiratory Institute, Cleveland Clinic Foundation, Cleveland, OH, 2Heart and Vascular Institute, Cleveland Clinic Foundation, Cleveland, OH, 3Cardiothoracic Surgery, Dartmouth-Hitchcock Medical Center, Lebanon, OH.

Survival Predictors in Ventricular Assist Device Patients with Prior Extra-Corporeal Life Support: Selecting Appropriate Candidates;
B. Maxhera1, A. Albert2, E. Ansari2, H. Kamiya1, R. Westenfeld3, U. Boeken1, E. Godehardt1, A. lichtenberg1, D. Saeed1, Cardiovascular Surgery, Düsseldorf University Hospital, Düsseldorf, Germany, 2Cardiology, Pneumology and Angiology, Düsseldorf University Hospital, Düsseldorf, Germany.

Mortality Differences Between Men and Women Following the Use of Extracorporeal Membrane Oxygenation (ECMO) after Myocardial Infarction;
R. L. Zhang1, T. J. Richards1, J. K. Bhama1, P. L. Sappington2, S. A. Esper3, J. J. Teuteberg4, R. Kormos1, C. A. Bermudez1, Cardiothoracic Surgery, University of Pittsburgh Medical Center, Pittsburgh, PA, 2Critical Care Medicine, University of Pittsburgh Medical Center, Pittsburgh, PA, 3Anesthesiology, University of Pittsburgh Medical Center, Pittsburgh, PA, 4Cardiology, University of Pittsburgh Medical Center, Pittsburgh, PA.
(670) Peripheral Veno-Arterial ECMO as a Bridge To Heart Transplantation: Outcomes From a Single-Centre Experience;
V. N. Poptsov, E. A. Spirina, R. S. Saigareev, V. M. Zakharevich, O. A. Eremeeva, S. A. Masyutin, Shumakov Centre Heart/Lung Transplant Team, Shumakov Federal Scientific Centre of Transplantology and Artificial Organs, Moscow, Russian Federation, Moskow, Russian Federation.

(671) Extracorporeal Membrane Oxygenator Bridge To Ventricular Assist Device Implantation for Patients in Profound Cardiogenic Shock Achieves Stabilization and Improved Results;
C. Le1, D. Murphy2, S. Marasco1. 1Sir Charles James Officer Brown Department of Cardiothoracic Surgery, Alfred Hospital, Prahran, Victoria, Australia, 2Department of Intensive Care, Alfred Hospital, Prahran, Victoria, Australia.

(672) WITHDRAWN

(673) Extracorporeal Membrane Oxygenation Support in Refractory Cardiogenic Shock: Treatment Strategies and Analysis of Risk Factors;
A. Loforte1, G. Marinelli1, F. Musumeci1, E. Pilato1, S. Martin Suarez1, A. Montalto1, G. Folesani1, S. Castrovincini1, G. Iafrancesco1, P. Lila Della Monica1, F. Grigioni1, L. Potena1, G. Frascaroli1, G. Arpesella1. 1Cardiovascular Surgery and Transplantation, S. Orsola-Malpighi Hospital, Bologna University, Bologna, Italy, 2Cardiac Surgery and Transplantation, S. Camillo Hospital, Rome, Italy.

(674) Ambulatory Extracorporeal Membrane Oxygenation with Right Atrium to Pulmonary Artery Cannulation Through Hemisternotomy for Long-term Support;

(675) Cardiac Arrest in the Era of Mechanical Circulatory Support: A Single Center Experience with Extracorporeal Cardiopulmonary Resuscitation;
L. Truby1, T. Hongo1, L. Mundy1, A. Kirtane1, J. Beck2, E. Landes1, M. Yuzefpolskaya1, N. Uriel1, P. C. Colombo1, U. P. Jorde1, S. Kodali1, K. Takeda1, Y. Naka1, H. Takayama1. 1Columbia University College of Physicians and Surgeons, New York, NY, 2New York Presbyterian Hospital, New York, NY.

(676) Thoratec CentriMag® for Temporary Treatment of Refractory Cardiogenic Shock or Severe Cardiopulmonary Insufficiency in Adult and Pediatric Patients: A Systematic Literature Review and Meta-Analysis of Observational Studies;
R. K. Firmin1, O. Borisenko2, J. Payne3, J. Smith4, S. Bjessmo2, N. Yonan5, G. Wyllie6. 1Cardiothoracic Surgery/ECMO, Glenfield Hospital, Leicester, United Kingdom, 2Synerges AB, Danderyd, Sweden, 3Scottish National Advanced Heart Failure Service, Golden Jubilee National Hospital, Glasgow, United Kingdom, 4Paediatric and Neonatal ECMO Service, Freeman Hospital, Newcastle, United Kingdom, 5Department of Cardiothoracic Transplant, Wythenshawe Hospital, Manchester, United Kingdom, 6Yorkhill Children’s Hospital, Glasgow, United Kingdom.

(677) Outcome of Extracorporeal Membrane Oxygenation as a Bridge to Lung Transplantation: Institutional Experience;
I. Inci1, M. Schuurmans2, S. Hillinger1, P. Kestenholz1, Y. Yamada1, C. Benden2, W. Weder1. 1Department of Thoracic Surgery, University Hospital, Zurich, Switzerland, 2Department of Pneumology, University Hospital, Zurich, Switzerland.
(678) Partial Flow with 15F Arterial Cannula Provides Sufficient Circulatory Support in Veno-Arterial Extracorporeal Membrane Oxygenation;

1Department of Surgery, Columbia University Medical Center, New York, NY, 2Department of Medicine, Columbia University Medical Center, New York, NY.

(679) Extracorporeal Membrane Oxygenation as a Bridge to Decision for INTERMACS 1 Patients;


(680) The Impella Device Offers Superior Survival in Acute Cardiogenic Shock;


(681) Early Progression of Pulmonary Edema Predicts Mortality in Patients With Extracorporeal Life Support – A Prospective Study;

R. Westenfeld1, D. Saeed2, P. Horn3, K. Esztermann1, B. Stanske1, T. Rassaf1, M. Kelm1, A. Lichtenberg2, A. Albert3. Cardiology, Pneumology and Angiology, Düsseldorf University Hospital, Düsseldorf, Germany, 2Cardiovascular Surgery, Düsseldorf University Hospital, Düsseldorf, Germany.

(682) Incidence of Hemolysis in Patients With Cardiogenic Shock Treated With Impella Percutaneous Left Ventricular Assist Device;

G. A. Hernandez1, A. Badiye, S. V. Chaparro. Medicine, University of Miami, Miller School of Medicine, Miami, FL.

(683) Benefits of an Intra-aortic Cardiorenal Support Pump in Chronic Heart Failure;

W. Clifton1, J. Heuring1, A. Nascimbene1, B. Hertzog1, R. Delgado2. 1Procyrion, Houston, TX, 2Texas Heart Institute, Houston, TX.

(684) Optimization with Intra-aortic Balloon Counterpulsation Prior to Left Ventricular Assist Device Implantation Results in Improved Postoperative Outcomes;

M. Gdowski1, M. Sintek1, K. Lavine1, E. Novak1, S. Nagabandi1, S. Silvestry2, S. Joseph1. Internal Medicine, Cardiovascular Division, Washington University School of Medicine, St. Louis, MO, 2Surgery, Division of Cardiothoracic Surgery, Washington University School of Medicine, St. Louis, MO.

(685) Intra-aortic Balloon Counterpulsation as a Bridge to Left Ventricular Assist Device Implantation in Patients with End-stage Heart Failure and Cardiogenic Shock;

M. Gdowski1, M. Sintek1, K. Lavine1, E. Novak1, S. Nagabandi1, S. Silvestry2, S. Joseph1. Internal Medicine, Cardiovascular Division, Washington University School of Medicine, St. Louis, MO, 2Surgery, Division of Cardiothoracic Surgery, Washington University School of Medicine, St. Louis, MO.

(264) Development of a Repair for Traumatic Damage to the Heartware HVAD® Pump Driveline;


Successful Adult Cardiac Transplantation Across Positive Prospective CDC Crossmatch in Highly Sensitised Recipients; A. Shah¹, C. Wood¹, S. J. Fidler¹, L. Dembo¹, J. Baumwol¹, K. Lam¹, S. Chih¹. ¹Advanced Heart Failure and Cardiac Transplant Unit, Royal Perth Hospital, Perth, Australia, ²Clinical Immunology, Royal Perth Hospital, Perth, Australia.

Successful Transplantation of Severely Marginal Criteria Lungs After Extended Clinical Normothermic Ex-Vivo Perfusion Performed on a Portable Device for a Duration of 10.5 Hours; J. Nagendran¹, S. J. Bozso². ¹Division of Cardiac Surgery, University of Alberta, Mazankowski Alberta Heart Institute, Edmonton, AB, Canada, ²Faculty of Medicine and Dentistry, University of Alberta, Edmonton, AB, Canada.

Cardiac Replacement with Two Centrifugal Flow Ventricular Assist Devices; M. A. Daneshmand¹, J. N. Schroder¹, L. J. Blue², C. B. Patel², J. G. Rogers², C. A. Milano¹. ¹Surgery, Duke University, Durham, NC, ²Medicine, Duke University, Durham, NC.

Cardiac Transplantation in Six Patients With Noonan-Spectrum Disorders: Indications and Outcomes; K. C. Chatfield¹, D. A. Stevenson², M. D. Everitt², M. Pierpont³, R. K. Ameduri³, A. E. Lin³, S. D. Miyamoto¹. ¹Pediatics, University of Colorado Denver, Aurora, CO, ²Pediatics, University of Utah, Salt Lake City, UT, ³Pediatics, University of Minnesota, Minneapolis, MN, ⁴Pediatics, MassGeneral Hospital for Children, Boston, MA.

Constrictive Pericarditis as a Long Term Complication of Heart Transplantation; A. Adzic, A. Jaiswal, D. A. Baran, M. J. Zucker, J. Pieretti, C. Gidea, R. Morlend, S. Murthy, M. T. Camacho. Transplant Center, Newark Beth Israel Medical Center, Newark, NJ.

Endovascular Repair of a Continuous Flow Left Ventricular Assist Device; P. Dhesi¹, S. Siddiqi², D. Fusco², D. Wencker², J. Gluck¹, I. Sadiq¹. ¹Cardiology, University of Connecticut/Hartford Hospital, Hartford, CT, ²Cardiology, Hartford Hospital, Hartford, CT.

An Unusual Case of Isolated Pulmonary Goodpasture Syndrome Requiring 4 Months of Extracorporeal Membrane Oxygenation: Should Lung Transplantation Be Ultimately Considered?: P. Mordant¹, G. Tachon², A. Legras¹, A. Bel¹, V. Boussaoud¹, B. Cholley¹, F. Le Pimpec-Barthes¹, A. Combes¹, ¹General Thoracic Surgery, Georges Pompidou European Hospital, Paris, France, ²Medical ICU, Pitié Salpêtrière Hospital, Paris, France, ³Cardiovascular Surgery, Georges Pompidou European Hospital, Paris, France, ⁴Anesthesiology and surgical ICU, Georges Pompidou European Hospital, Paris, France.
(884) **Stenting of Outflow Graft Obstruction Following Implantation of Axial-Flow, Left Ventricular Assist Device: A Case Report:**

D. T. Pham1, C. Narsule1, M. Dermody2, M. S. Kiernan1, N. Halin4, N. K. Kapur1. 1Cardiothoracic Surgery, Tufts Medical Center, Boston, MA, 2Vascular Surgery, Tufts Medical Center, Boston, MA, 3Cardiology, Tufts Medical Center, Boston, MA, 4Interventional Radiology, Tufts Medical Center, Boston, MA.

(885) **Extended Extra-aortic Counterpulsation Support with C-Pulse Device Does Not Alter Aortic Wall Structure:**

A. Cheng, J. R. Trivedi, E. Schumer, M. Ising, M. A. Sobieski, M. S. Slaughter. Thoracic and Cardiovascular Surgery, University of Louisville, Louisville, KY.

(886) **Resolution of Long-segment Aortic Stenosis Following Simultaneous Heart-Liver Transplant for Familial Hypercholesterolemia:**

R. M. Biniwale1, P. Renella2, B. L. Reemtsen1, J. C. Alejos1. 1Cardiothoracic Surgery, University of California at Los Angeles, Los Angeles, CA, 2Pediatric Cardiology, Children’s Hospital of Orange County, Orange, CA.

(887) **Deceitful Images: Churg Strauss Vasculitis Masquerading as Posterior Encephalopathy Syndrome:**

A. Jaiswal, D. A. Baran, A. Adzic, M. J. Zucker, M. T. Camacho, J. Pieretti, C. Gidea, R. Morlend, S. Murthy, Transplant Center, Newark Beth Israel Medical Center, Newark, NJ.

(888) **Severe Malnutrition in Cystic Fibrosis (CF): Successful Outcomes Can Be Achieved:**

S. G. Kapnadak, J. M. Pilewski, J. K. Bhama, C. A. Bermudez, N. Shigemura, C. J. Gries. Pulmonary, Allergy, and Critical Care Medicine, University of Pittsburgh Medical Center, Pittsburgh, PA.

(889) **Replacement of Biventricular Paracorporeal Devices With Bi-Ventricular HeartWare Ventricular Assist System: Case Report and Surgical Technique:**

D. T. Pham1, C. Narsule1, C. Vassallo1, M. S. Kiernan2, N. K. Kapur2, D. DeNofrio2, K. G. Warner1. 1Cardiothoracic Surgery, Tufts Medical Center, Boston, MA, 2Cardiology, Tufts Medical Center, Boston, MA.

(890) **Ventricular Assist Device Use in Single Ventricle Physiology:**

S. C. West1, A. Lal1, S. A. Miller1, V. Morrell2, P. Wearden2, B. D. Feingold1. 1Cardiology, Children’s Hospital of Pittsburgh, Pittsburgh, PA, 2Cardiothoracic Surgery, Children’s Hospital of Pittsburgh, Pittsburgh, PA.

(891) **Cutaneous Legionella feeleii Infection in a Patient Following Heart Transplantation:**

K. Watson1, A. Perry1, S. Meggitt1, K. Brennan1, G. Parry1, J. Samuel1, S. Cattell1, T. Butt1, F. K. Gould1. 1Freeman Hospital, Newcastle upon Tyne, United Kingdom, 2Microbiology, Freeman Hospital, Newcastle upon Tyne, United Kingdom, 3Cardiothoracic Surgery, Freeman Hospital, Newcastle upon Tyne, United Kingdom.

(892) **Utilization of Extended Criteria Lung on a Lobe-By-Lobe Basis Through Ex-Vivo Lung Perfusion Reassessment:**


(893) **Awake Extracorporeal Membrane Oxygenation as a Bridge to Lung Transplant in a Toddler: A Case Report:**

M. C. Gazzaneo, E. Portillo, G. Mallory, Y. Orr, J. Heinle, E. D. McKenzie, M. Nugent. Pediatric Lung Transplant, Baylor College of Medicine/Texas Children's Hospital, Houston, TX.
(894) HLA Desensitization with Bortezomib in a Highly-Sensitized Pediatric Patient:

(895) Successful Heart Transplantation in a Pediatric Patient with Loeys-Dietz Syndrome:
A. Jeewa1, W. J. Dreyer1, T. Adachi2, S. A. Morris1, A. G. Cabrera2, J. T. Price3, J. S. Heinle3, C. M. Gates3, S. Denfield4, E. D. McKenzie2. 1Pediatric Cardiology, Baylor College of Medicine, Houston, TX, 2Congenital Heart Surgery, Baylor College of Medicine, Houston, TX, 3Texas Children’s Hospital, Houston, TX.

(896) Successful Treatment of Burkholderia Cepacia Complex Chest Wall Infection Following Lung Transplantation With Using Hyperbaric Oxygen Therapy:
S. V. Golovinskiy1, N. A. Karchevskaya2, D. H. Tsurova2, E. A. Tarabrin3, M. V. Romasenko3, S. N. Avdeev4, M. M. Abakumov1, A. G. Chuchalin4, M. S. Hubutiy5. 1Department of Thoraco-abdominal Surgery, Lung Transplantation Group, N.V. Sklifosovsky Research Institute of Emergency Medicine, Moscow, Russian Federation, 2Department of Pulmonology, Lung Transplantation Group, Research Institute of Pulmonology FMBA of Russia, Moscow, Russian Federation, 3Department of Hyperbaric Oxygen Therapy, N.V. Sklifosovsky Research Institute of Emergency Medicine, Moscow, Russian Federation, 4Research Institute of Pulmonology FMBA of Russia, Moscow, Russian Federation, 5N.V. Sklifosovsky Research Institute of Emergency Medicine, Moscow, Russian Federation.

(897) Usefulness of ECMO Using Double Roller Pumps Instead of a Centrifugal Pump in a Low-Body Weight New-Born: A Novel Strategy of Mechanical Circulatory Support in a Infant:
K. Nakanishi1, T. Kato1, S. Kawasaki1, Y. Wakamatsu2, A. Amano1. 1Cardiovascular Surgery, Juntendo University School of Medicine, Tokyo, Japan.

(898) Remission of Kaposi’s Sarcoma After Conversion From Calcineurin Inhibitor To Proliferation Signal Inhibitor in Cardiac Transplant:
J. Youn1, H. Shin2, S. Lee2, H. Park2, S. Kang2. 1Severance Cardiovascular Hospital, Yonsei University College of Medicine, Seoul, Korea, 2Division of Cardiovascular Surgery, Severance Cardiovascular Hospital, Yonsei University College of Medicine, Seoul, Korea.

(899) Bilateral Lung Transplantation From a Donor With Thermal Airway Injury:
R. Yanagida, H. Seethamraju, C. W. Hoopes. Division of Cardiothoracic Surgery, University of Kentucky, Lexington, KY.

(900) Use of Bortezomib To Treat Antibody Mediated Rejection in a Patient Requiring Mechanical Circulatory Support After Heart Transplantation:
J. J. Parent, T. Ryan, C. Castleberry, J. L. Jefferies, A. Lorts, C. Chin. Pediatric Cardiology, Cincinnati Childrens Hospital Medical Center, Cincinnati, OH.

(901) Peri-Operative Cast Prevention for Pediatric Patients With Plastic Bronchitis Undergoing Heart Transplantation:
J. J. Parent1, R. K. Darragh2, T. Ryan3, A. Lorts1, J. L. Jefferies4, J. A. Towbin3, C. Chin1. 1Pediatric Cardiology, Cincinnati Childrens Hospital Medical Center, Cincinnati, OH, 2Pediatric Cardiology, Indiana University School of Medicine, Indianapolis, IN.
(902) Back Table Outflow Graft Anastomosis Technique for HeartWare HVAD Implantation;
S. Basher1, J. S. Bick2, S. Maltais3. 1Cardiology, Vanderbilt University Medical Center, Nashville, TN, 2Cardiothoracic Anesthesiology, Vanderbilt University Medical Center, Nashville, TN, 3Cardiovascular Surgery, Vanderbilt University Medical Center, Nashville, TN.

(903) Intracardiac Echocardiographic and Intravascular Ultrasound Assessment of a Continuous Flow Left Ventricular Assist Device;
P. Dhesi1, N. Krishna1, D. Ramu1, R. Margery1, I. Sadiq1, J. Radojevic1, D. Wencker2, J. Gluck1. 1University of Connecticut/Hartford Hospital, Hartford, CT, 2Hartford Hospital, Hartford, CT.

(904) A Life-Saving Staged ABO-Incompatible Renal Transplant in a Lung Transplant Recipient;
M. Sharma1, G. Westall1, M. Paraskeva1, H. Whitford1, T. Williams1, B. Levvey1, R. Walker2, S. Menahem1, G. I. Snell1. 1Lung Transplant Service, Alfred Hospital and Monash University, Melbourne, Australia, 2Department of Renal Medicine, Alfred Hospital, Melbourne, Australia.

(905) Treatment of Left Ventricular Assist Device Associated Arteriovenous Malformations with Thalidomide;
R. Ray1, P. P. Kale2, R. V. Ha1, D. Banerjee1. 1Cardiovascular Medicine, Stanford University, Stanford, CA, 2Heart Transplant, Kaiser Permanente- Northern California, Santa Clara, CA, 3Cardiothoracic Surgery, Stanford University, Stanford, CA.

(906) What a Headache: Tacrolimus-Induced Reversible Cerebral Vasconstriction Syndrome in a Lung Transplant Recipient;
E. M. Lowery. Internal Medicine, Loyola University Medical Center, Maywood, IL.

(907) Successful Use of Catheter Directed Thrombolysis with Human Recombinant-Tissue Plasminogen Activator (hr-tPA) as Salvage for Acute Massive Pulmonary Embolism (PE) in a Patient 10 Days After Right Single Lung Transplantation: A Case Report;
P. Ong1, M. Nair1, D. Guerra1, L. Simpson2, R. Sista1. 1Pulmonary and Critical Care Medicine, Baylor College of Medicine, Houston, TX, 2Advanced Heart Failure and Heart Transplantation, Texas Heart Institute, Houston, TX.

(908) Successful Treatment of Acute LVAD Thrombosis and Cardiogenic Shock with Intraventricular Thrombolysis and a Tandem Heart;

(909) Acromegallic Cardiomyopathy: Another Reversible Form of Heart Failure;
S. You1, J. Youn1, H. Shin2, S. Lee2, H. Park2, S. Kang1. 1Division of Cardiology, Severance Cardiovascular Hospital, Yonsei University College of Medicine, Seoul, Korea, Republic of, 2Division of Cardiovascular Surgery, Severance Cardiovascular Hospital, Yonsei University College of Medicine, Seoul, Korea, Republic of.

(910) Application of Ex-Vivo Lung Perfusion to Offset Logistical Nightmares in Lung Transplantation;
T. Krueger1, M. Cypel1, M. Chen2, T. Machuca2, V. Linacre2, O. Mercier1, T. Waddell1, S. Keshavjee1. 1Division of Thoracic Surgery, University Hospital of Lausanne, Lausanne, Switzerland, 2Division of Thoracic Surgery, Toronto General Hospital, Toronto, ON, Canada.
(911) Intravenous Thyroxine (T4) Is Associated With Improved Hemodynamic Recovery After Cardiac Transplantation; T. P. Theruvath1, T. P. Whelan2, A. B. Van Bake1, J. S. Ikonomidou1, J. M. Toole1. 1Cardiothoracic Surgery, Medical University of South Carolina, Charleston, SC, 2Pulmonary and Critical Care Medicine, Medical University of South Carolina, Charleston, SC, 3Cardiology, Medical University of South Carolina, Charleston, SC.


(913) Living-Donor Lobar Lung Transplantation for Primary Pulmonary Hypertension With Huge Pulmonary Arterial Dilatation; Y. Yokoyama1, F. Chen1, K. Minakata2, K. Yamazaki2, T. Yamada1, A. Aoyama1, M. Sato1, T. Bando2, H. Date1. 1Thoracic Surgery, Kyoto University, Kyoto, Japan, 2Cardiovascular Surgery, Kyoto University, Kyoto, Japan.

(914) Lung Transplant with Pulmonary Artery Reconstruction; T. Watanabe1, Y. Okada1, M. Noda1, T. Sado1, Y. Hoshikawa2, Y. Matsuda2, H. Niikawa1, Y. Saiki2, T. Kondo1. 1Department of Thoracic Surgery, Institute of Development, Aging and Cancer, Tohoku University, Sendai, Japan, 2Department of Cardiovascular Surgery, Tohoku University Graduate School of Medicine, Sendai, Japan.

(915) Seizure Post Lung Transplantation; L. Paoletti1, H. Meadows2, C. Denlinger3, T. Whelan1. 1Division of Pulmonary and Critical Care Medicine, Medical University of South Carolina, Charleston, SC, 2Pharmacy, Medical University of South Carolina, Charleston, SC, 3Division of Cardiothoracic Surgery, Medical University of South Carolina, Charleston, SC.

(916) Atypical Presentations of Pulmonary Fibrosis in Saudi Arabia: Something in the Air; E. L. Bush1, S. Tokman2, B. Elicker3, K. D. Jones4, S. Hays2, C. W. Hoopes5, G. A. Al-Dossari1, M. Brzezinski6, J. A. Golden2, J. Kukreja1. 1Division of Cardiothoracic Surgery, University California San Francisco, San Francisco, CA, 2Department of Pathology, University California San Francisco, San Francisco, CA, 3Department of Radiology, University California San Francisco, San Francisco, CA, 4Department of Pulmonary and Critical Care, University California San Francisco, San Francisco, CA, 5Division of Cardiovascular Surgery, University of Kentucky, Lexington, KY, 6Department of Anesthesia, University California San Francisco, San Francisco, CA.

(917) Persistent Left Superior Vena Cava and Coronary Sinus Ostial Atresia in a Donor Heart During Cardiac Transplantation; N. I. Galindez, M. DiMaio, M. Peltz. Cardiothoracic Surgery, University of Texas Southwestern, Dallas, TX.

(918) Combined LVAD Pump Exchange and Endovascular AAA Repair; N. Goodale1, J. Goerbig Campbell1, R. Nicholson1, M. J. Bates4. 1University of Iowa Hospitals and Clinics, Iowa City, IA, 2Heart and Vascular Center, University of Iowa Hospitals and Clinics, Iowa City, IA, 3Vascular Surgery, University of Iowa Hospitals and Clinics, Iowa City, IA, 4Cardiovascular Surgery, University of Iowa Hospitals and Clinics, Iowa City, IA.

(919) Fondaparinux as Anticoagulant in Paracorporeal Ventricular Assist Device: A Single Case in a 2 Years Child; F. Gandolfo, G. Brancaccio, S. Filippelli, P. Cogo, A. Amodeo. Pediatric Cardiac Surgery, Bambino Gesù Children’s Hospital, Rome, Italy.
(920) Successful Heart Transplantation in Three Pediatric Patients with Early-Onset Anthracycline-Induced Heart Failure Following Treatment for Osteogenic Sarcoma:
W. A. Zuckerman1, M. E. Richmond1, R. K. Singh1, T. M. Lee1, K. D. Beddows1, L. A. Gilmore1, K. L. Woldu1, A. Lee2, L. J. Addonizio1. 1Division of Pediatric Cardiology, Columbia University Medical Center, New York, NY, 2Division of Pediatric Oncology, Columbia University Medical Center, New York, NY.

(921) Case Report of a Heart Graft Turned Down for Transplantation after Organ Care System Evaluation:

(922) Atypical Hemolytic-Uremic Syndrome Immediately Following Heart Transplantation:
E. Kransdorf1, M. Kittleson1, B. Coleman1, D. Hoffman2, S. Berkman1, D. Ramzy1, D. E. Steidley4, J. Kobashigawa1. 1Cedars-Sinai Heart Institute, Los Angeles, CA, 2Tower Hematology Oncology Medical Group, Los Angeles, CA, 3Division of Hematology and Medical Oncology, UCLA Medical Center, Los Angeles, CA, 4Division of Cardiovascular Diseases, Mayo Clinic Arizona, Phoenix, AZ.

(923) Recurrent Influenza Fulminant Myocarditis in a Pediatric Patient Requiring Mechanical Circulatory Support and Eventual Heart Transplantation:
J. S. Chiu1, M. E. Richmond1, W. A. Zuckerman1, T. M. Lee1, L. J. Addonizio1, J. M. Chen2, L. A. Gilmore1, K. Beddows1, R. K. Singh1. 1Division of Pediatric Cardiology, Columbia University Medical Center, New York, NY, 2Division of Pediatric Cardiothoracic Surgery, Seattle Children’s Hospital, Seattle, WA.

(924) Autoimmune Enteropathy and Hepatitis in Pediatric Heart Transplant Recipient:
R. Butts1, A. Quioros3, M. Hudspeth1, K. Twombly4, A. Burnette2, S. Self7, A. Savage1. 1Pediatrics, Medical University of South Carolina, Charleston, SC, 2Transplant Services, Medical University of South Carolina, Charleston, SC, 3Pathology and Laboratory Medicine, Medical University of South Carolina, Charleston, SC.

(925) Contrast Enhanced Coronary Artery Imaging for Coronary Allograft Vasculopathy (CAV) Diagnosis:
N. Dedieu1, T. Hussain2, M. Fenton1, R. Botnar1, G. Greil2, M. Burch1. 1Paediatric Cardiology, Great Ormond Street Hospital, London, United Kingdom, 2Imaging Science, Kings’ College London, London, United Kingdom.

(926) Successful Management of Thrombosis of the Proximal Aorta Following Implantation with a Biventricular Assist Device:

(927) WITHDRAWN

(928) Tardive Respiratory Dyskinesia Due to Metoclopramide in a Lung Transplant Recipient Treated Successfully with Olanzapine:
S. Aryal. Internal Medicine, Duke University, Cary, NC.
(929) Novel Treatment of Fulminant Mixed Antibody-Mediated and Cellular Rejection Following Heart and Kidney Transplant: A Case Report; H. K. Siu1, N. Jones1, R. Gupta2, A. Mustafa2, P. J. Mather1. 1Cardiology, Thomas Jefferson University Hospital, Philadelphia, PA, 2Internal Medicine, Thomas Jefferson University Hospital, Philadelphia, PA.


(931) Cardiac Allograft Dysfunction Induced By Right Ventricular Pacing and Reversed By Cardiac Resynchronization Therapy; M. Y. Qattan, M. B. Ginwalla, C. A. Elamm, M. N. Osman, R. N. Goldstein, G. H. Oliveira. Advanced Heart Failure and Transplant Center, University Hospitals Case Medical Center, Case Western Reserve University, Cleveland, OH.

(932) Successful Use of Bortezomib for Desensitization of a Pediatric Heart Transplant Candidate; A. L. Burnette1, R. J. Butts2, O. Moussa3, S. Waslaske3, K. Twombley4, M. Kavarana5, A. J. Savage2. 1Heart Transplant, MUSC, Charleston, SC, 2Pediatric Cardiology, MUSC, Charleston, SC, 3Immunology, MUSC, Charleston, SC, 4Pediatric Nephrology, MUSC, Charleston, SC, 5Pediatric Cardiothoracic Surgery, MUSC, Charleston, SC.

(933) Ventricular Assist Device as Destination Therapy in Failing Fontan; B. P. Frischhertz, P. R. Ermis, W. J. Franklin, L. Simpson, D. R. Parekh. Pediatric Cardiology, Baylor College of Medicine, Houston, TX.

(934) Toxic Pulmonary Hypertension; E. R. Fenstad1, B. L. Bick2, R. P. Frantz1. 1Cardiovascular Diseases, Mayo Clinic, Rochester, MN, 2Internal Medicine, Mayo Clinic, Rochester, MN.


(936) Home Use of Nebulized Tissue Plasminogen Activator in Preventing Hospital Admissions for Plastic Bronchitis; J. E. Ryan, D. A. Davis, M. A. McCulloch, W. S. Moore. Cardiac Center, Nemours/Alfred I duPont Hospital for Children, Wilmington, DE.

(937) Transformation of Pulmonary Alveolar Proteinosis into Non-Specific Interstitial Pneumonia; S. Mir1, M. Lavender1, T. Bowles1, J. Wrobel1, E. Gabbay1, F. Lake1, S. Lawrence1, M. Musk1. 1Advanced Lung Disease & Lung Transplant Unit, Royal Perth Hospital, Perth, Australia, 2Respiratory Medicine, Sir Charles Gairdner Hospital, Perth, Australia.

(938) Stent-in-Stent Insertion To Treat Recurrent Bronchial Re-Stenosis in Lung Transplanted Recipient; V. Doan, I. Wellemans, B. Bondue, G. Vandermeuten, B. Rondelet, C. Knoop, D. Leduc. Chest Department, Erasme University Hospital, Brussels, Belgium.
Heart Transplantation Combined With Pulmonary Vein Reconstruction in Malignant Cardiac Tumor Occurred in the Right Ventricular Outflow Tract Invaded the Pulmonary Vein:
S. Jung, J. Kim. 1Department of Thoracic and Cardiovascular Surgery, Asan Medical Center, Seoul, Korea, Republic of, 2Department of Cardiology, Asan Medical Center, Seoul, Korea, Republic of.

Atypical Presentation of CMV Infection in a Lung Transplant Patient:
K. Patel, N. Arora, S. Sharma, A. K. Patel, K. Guevarra. 1Lung Transplant / Pulmonary / Critical Care, Newark Beth Israel Medical Center, Newark, NJ, 2Infectious Disease, Newark Beth Israel Medical Center, Newark, NJ.

Early Primary Graft Failure after a Pediatric Heart Transplant and Successful Rescue with Plasmapheresis, Immunoglobulins and Alemtuzumab:
S. Raj, T. Bueno, A. Panos, E. Rosenkrantz, P. Ruiz. 1Pediatric Cardiology, University of Miami Miller School of Medicine, Miami, FL, 2Surgery, University of Miami Miller School of Medicine, Miami, FL, 3Surgery, University of Maryland School of Medicine, Baltimore, MD.

Implanting a Left Ventricular Assist Device in a Visually Impaired Patient: A Case Study:
M. E. Luetje. Heart Specialty Care and Transplant Center, Seton Medical Center – Austin, Austin, TX.

T-Cell Mediated Inflammation Resulting in Multifocal Inflammatory Bowel Disease in a Pediatric Heart Transplant Patient:
K. Puri, K. Risma, S. Kocoschis, C. Chin, T. Ryan, J. Jefferies. 1Cardiology, Cincinnati Children’s Hospital Medical Center, Cincinnati, OH, 2Allergy, Cincinnati Children’s Hospital Medical Center, Cincinnati, OH, 3Gastroenterology, Hepatology and Nutrition, Cincinnati Children’s Hospital Medical Center, Cincinnati, OH.

Inverted Takotsubo Cardiomyopathy as a Cause of Acute Graft Failure Following Cardiac Transplantation:
M. Urban, J. Pirk, O. Szarszoi, I. Netuka. Cardiac Surgery, Institute for Clinical and Experimental Medicine, Prague, Czech Republic.

Successful Treatment of Postoperative Mediastinitis after Heart Transplantation by Negative Pressure Wound Therapy Followed by Omental Transposition: A Case Report:
H. Sunami, O. Seguchi, M. Hieda, S. Nakajima, T. Watanabe, T. Sato, Y. Murata, M. Yanase, H. Hata, T. Fujita, J. Kobayashi, T. Nakatani. 1Department of Transplantation, National Cerebral and Cardiovascular Center, Osaka, Japan, 2Department of Cardiovascular Surgery, National Cerebral and Cardiovascular Center, Osaka, Japan.

Refractory Gastrointestinal Bleeding: Is It Worth It To Make the Switch From Continuous Flow To Pulsatile Flow Assist Device?:
R. Tandon, J. Goerbig-Campbell, K. Light McGroary. 1University of Iowa, Iowa City, IA, 2Internal Medicine, University of Iowa, Iowa City, IA.

Challenges in Treating BK Virus-associated Hemorrhagic Cystitis:
(948) Management of LVAD-Related Aortic Insufficiency by Ramp-Based Invasive Hemodynamics and Transesophageal Echocardiography:
S. S. Thomas¹, R. T. Hahn¹, S. Kodali¹, O. Khalique¹, S. Murthy¹, P. C. Colombo¹, H. Takayama², N. Uriel², Y. Naka², U. P. Jorde¹, ¹Cardiology, Columbia University Medical Center, New York, NY, ²Cardiac Surgery, Columbia University Medical Center, New York, NY.

(949) Mechanical Circulatory Support in an Adult with Transposition of the Great Arteries:
R. M. Biniwale, G. S. Derk, H. Laks. Cardiothoracic Surgery, University of California at Los Angeles, Los Angeles, CA.

(950) Successful Ventricular Assist Device Implant after MitraClip®:
K. Lam¹, S. Chih¹, C. Merry¹, E. Yemen², J. Baumwohlf, C. Critophf, A. Shah¹, ¹Advanced Heart Failure and Cardiac Transplant Unit, Royal Perth Hospital, Perth, Australia, ²Cardiology, Sir Charles Gairdner Hospital, Perth, Australia.

(951) Mitral Valve Replacement Following Orthotopic Heart Transplantation:
M. Awad, L. S. Czer, K. R. Ribhaney, M. Sasevich, D. Ramzy, Cedars Sinai Heart Institute, Cedars Sinai Medical Center, Los Angeles, CA.

(952) Heart Transplantation in the Setting of Heterotaxy, Interrupted IVC and Functional Single Ventricle:
M. Si, Cardiac Surgery, University of Michigan, Ann Arbor, MI.

(953) Young Woman With Breast Cancer and Cardiotoxicity With Severe Heart Failure Treated With Heartmateii for Nearly Six Years Prior To Heart Transplant:
P. Sundhom¹, E. Hedayati², B. Peterzén³, H. Granfeldt³, H. Ahn³, L. Hubbert¹, ¹Clinical Department of Cardiology, Heart Centre, University Hospital, Linkoping, Sweden, Institute of Medicine and Health, Linkoping, Sweden, ²Institution of Oncology-Pathology, Karolinska Institutet and University Hospital, Stockholm, Sweden, ³Department of Cardiovascular Surgery and Anesthesia, Heart Centre, University Hospital of Linkoping, Institute of Medicine and Health, Linkoping, Sweden.

(954) Desensitization Utilizing Bortezomib and Plasmapheresis on a Patient Supported Via the Syncardia Freedom® Driver:

(955) Double Kissing Crush Stenting for Unprotected Distal Left Main Bifurcation Lesion in a Patient with Cardiac Allograft Vasculopathy:
B. Skoric, D. Lovric, M. Cikes, J. Ljubas, Z. Baricevic, D. Milicic. Department of Cardiovascular Diseases, University of Zagreb School of Medicine, University Hospital, Zagreb, Croatia.

(956) Abernethy Malformation: a Candidate for Consecutive Lung-Liver Transplantation as an Uncommon Cause of Pulmonary Hypertension:
E. Yekeler¹, I. O. Alici², A. Yazicioglu², O. Tufeckioglu², B. Bostanci², N. Karaoglanoglu², ¹Thoracic Surgery and Lung Transplantation Center, Turkish Yuksek Ihtisas Training and Research Hospital, Ankara, Turkey, ²Thoracic Surgery and Lung Transplantation Center, Turkish Yuksek Ihtisas Training and Research Hospital, Ankara, Turkey, ³Gastroenterology Surgery and Liver Transplantation Center, Turkish Yuksek Ihtisas Training and Resarch Hospital, Ankara, Turkey.
(957) Posterior Reversible Encephalopathy Syndrome in Post-Transplant Lymphoproliferative Disorder;
A. Jaiswal\textsuperscript{1}, D. A. Baran\textsuperscript{1}, M. J. Zucker\textsuperscript{1}, I. Sabnani\textsuperscript{2}, M. T. Camacho\textsuperscript{1}, A. Adzic\textsuperscript{1}, J. Pieretti\textsuperscript{1}, C. Gidea\textsuperscript{1}, R. Morlend\textsuperscript{1}, S. Murthy\textsuperscript{1}, \textsuperscript{1}Transplant Center, Newark Beth Israel Medical Center, Newark, NJ, \textsuperscript{2}Hematology and Oncology Department, Newark Beth Israel Medical Center, Newark, NJ.

(958) Device Failures in a Patient Receiving Nebulized Epoprostenol;
W. S. Moore\textsuperscript{1}, J. E. Ryan, D. A. Davis, M. A. McCulloch. Nemours Cardiac Center, A.I.duPont Hospital for Children, Wilmington, DE.

(959) A Case of Pulmonary Rhizopus Infection in a Lung Transplant Recipient Treated Successfully with Surgery and Antifungal Therapy;
S. Aryal\textsuperscript{1}, L. D. Snyder. Internal Medicine, Duke University, Durham, NC.

(960) VV ECMO as a Bridge to Contralateral Retransplantation due to Massive Pulmonary Embolism;
I. Gosev, C. Phillip. Surgery, Brigham and Women’s Hospital, Boston, MA.

(961) WITHDRAWN

(962) Successful Transapical Aortic Valve Replacement in a Patient With Previous Double Lung Transplant – A Good Alternative To Open Aortic Valve Replacement;
L. Starzyk\textsuperscript{1}, E. Horlic\textsuperscript{2}, M. Osten\textsuperscript{2}, C. Feindel\textsuperscript{3}, A. Van Rensburg\textsuperscript{1}. \textsuperscript{1}Department of Anesthesia and Pain Medicine, University Health Network Toronto, Toronto, ON, Canada, \textsuperscript{2}Department of Interventional Cardiology of the Peter Munk Cardiac Center, University Health Network Toronto, Toronto, ON, Canada, \textsuperscript{3}Department of Cardiovascular Surgery at the Peter Munk Cardiac Center, University Health Network Toronto, Toronto, ON, Canada.

(963) Reversal of RCM Induced Severe PVR Elevation with MCS Independent of Pharmacotherapy;

(964) 130 Day-Biventricular Assist Device Support with CentriMag Implanted Emergently for HeartMate II Driveline Infection Related to Colon Injury, Followed by Successful Heart Transplant;

(965) Large Thrombus on the Left Coronary Cusp Causing Broad Myocardial Infarction in a Small-body-sized Patient with a Continuous-flow Ventricular Assist Device;
S. Nakajima\textsuperscript{1}, O. Seguchi\textsuperscript{1}, Y. Murata\textsuperscript{1}, T. Fujita\textsuperscript{2}, H. Hata\textsuperscript{2}, M. Hieda\textsuperscript{2}, T. Watanabe\textsuperscript{1}, T. Sato\textsuperscript{1}, H. Sunami\textsuperscript{1}, M. Yanase\textsuperscript{1}, J. Kobayashi\textsuperscript{1}, T. Nakatani\textsuperscript{1}, \textsuperscript{1}Department of Transplantation, National Cerebral and Cardiovascular Center, Osaka, Japan, \textsuperscript{2}Department of Adult Cardiac Surgery, National Cerebral and Cardiovascular Center, Osaka, Japan.

(966) Development of Bronchiolitis Obliterans Syndrome 23 Years Post Lung Transplantation;
A. Hirji, L. G. Singer, C. Chaparro. Toronto Lung Transplant Program, University of Toronto, Toronto, ON, Canada.
(967) Continuous Flow LVAD Support and Immune Suppression:

(968) Total Artificial Heart Bridge to Transplantation for a Patient with Occult Intracardiac Malignancy:
H. Reich\(^1\), M. Sasevich\(^2\), K. Rihbany\(^2\), F. Arabia\(^2\), L. Czer\(^1\). Department of Surgery, Cedars-Sinai Medical Center, Los Angeles, CA, \(^1\)Heart Institute, Cedars-Sinai Medical Center, Los Angeles, CA.

(969) Minimal Invasive Right Ventricular Assist Device Implantation in a Patient with HeartWare Left Ventricular Assist Device:
B. Maxhera, A. Albert, E. Ansari, A. Lichtenberg, D. Saeed. Cardiovascular Surgery, Düsseldorf University Hospital, Düsseldorf, Germany.

(970) Offering Heart Transplantation to a Young Patient with HIV Infection:
A. Mehdiani, U. Boeken, C. Ballazs, P. Akhyari, J. Minol, D. Saeed, H. Kamiya, R. Westenfeld, A. Lichtenberg. Cardiovascular Surgery, University Hospital, Duesseldorf, Germany.

(971) Persistent Ventricular Fibrillation, Recurrent GI Bleeding, and Ventricular Thrombi in a Patient with HeartWare Biventricular Assist Devices:

(972) Step-Wise Approach to Myocarditis Complicated by Cardiogenic Shock:
K. P. Mody\(^1\), S. Thomas\(^1\), M. Yuzefpolskaya\(^1\), H. Takayama\(^2\), P. C. Colombo\(^1\), Y. Naka\(^2\), U. P. Jorde\(^1\), N. Uriel\(^1\). Medicine, Columbia University, New York, NY, \(^2\)Surgery, Columbia University, New York, NY.

(973) Bilateral Sequential Lung Transplantation in Kartagener's Syndrome with Situs Inversus Totalis:
L. N. Blau, L. E. Rodriguez, E. E. Suarez, D. Ren, B. A. Bruckner, M. Loebe. Houston Methodist Hospital, Houston, TX.

(974) Spontaneous Iliac Intramuscular Bleed Following Orthotopic Heart Transplantation:
J. Knisley, M. Weaver, B. Whitson, A. Hasan, R. Higgins, G. Haas, A. Kilic. Ohio State University, Columbus, OH.

(975) Giant Cell Interstitial Pneumonitis: Recurrence of Disease in Transplanted Lungs:
J. K. Thachuthara-George\(^1\), N. Sinha\(^2\), S. Jyothula\(^2\), B. Mankidy\(^2\), B. Bruckner\(^2\), S. Scheinim\(^2\), M. Loebe\(^2\), H. Seethamraju\(^2\), T. Kaleekal\(^2\). \(^1\)Pulmonary Critical Care and Sleep Medicine, Baylor College of Medicine, Houston, TX, \(^2\)Pulmonary Critical Care and Transplant Medicine, The Methodist Hospital, Houston, TX, \(^3\)Department of Cardiothoracic Surgery, The Methodist Hospital, Houston, TX.

(976) BerlinHeart INCOR® LVAD as Bridge to Transplantation (BTT) for Patient with Noncompaction Cardiomyopathy (NCC):
(977) Persistent Posterior Reversible Encephalopathy Syndrome in Lung Transplantation:

P. C. Camargo¹, F. E. Arimura¹, A. N. Costa¹, J. E. Afonso Jr¹,
R. M. Carraro¹, S. V. Campos¹, M. N. Samano¹, R. H. Teixeira¹,
P. M. Pego-Fernandes², ¹1Pneumology, Heart Institute (InCor),
Sao Paulo, Brazil, ¹Thoracic Surgery, Heart Institute (InCor),
Sao Paulo, Brazil.

(978) Outcome of Heart Transplantation for a Patient with Takayasu’s Arteritis:

J. Huang¹, Z. N. Lu², Z. K. Liao², S. S. Hu¹. ¹Department of Heart Transplant Center, State Key Laboratory of Cardiovascular Disease, Fuwai Hospital, National Center for Cardiovascular Diseases, Chinese Academy of Medical Sciences and Peking Union Medical College, Beijing, China, ²Department of Heart Transplant Center, Fuwai Hospital, National Center for Cardiovascular Diseases, Chinese Academy of Medical Sciences and Peking Union Medical College, Beijing, China.

(979) A Case of Rapidly Progressive AMR Despite Low DSA After Treatment:

N. Afari-Armah¹, S. Geier², H. Parekh³, E. Tsai¹, D. Schwartz¹,
A. Bove¹, P. Fortia¹, Y. Toyoda¹, A. Siouse¹, R. Alvarez¹, E. Hamad¹.
¹Advanced Heart Failure, Temple University Hospital, Philadelphia, PA, ²Medical Pathology, Temple University Hospital, Philadelphia, PA, ³Cardiothoracic Surgery, Temple University Hospital, Philadelphia, PA.

(980) Case Report: Diagnosing Tamponade Physiology Following an Orthotropic Heart Transplant Using a Miniaturized TEE Probe:

S. Elapavaluru¹, P. Linden², J. Rossi³, S. Bailey⁴, R. Moraca⁴,
W. McGregor⁶, H. Hastings PhD⁶, R. Benza⁷, S. Murali⁸. ¹Intensivist, Division of Cardiothoracic and Vascular Surgery, Department of Internal Medicine, Allegheny General Hospital, Pittsburgh, PA, ²Director, Surgical Intensive Care Unit, Dept of Internal Medicine, Allegheny General Hospital, Pittsburgh, PA, ³System Divisioni Chief, Critical Care Medicine, Dept of Internal Medicine, Allegheny General Hospital, Pittsburgh, PA, ⁴Cardiothoracic and Vascular Surgery, Allegheny General Hospital, Pittsburgh, PA, ⁵Department of Cardiothoracic and Vascular Surgery, Allegheny General Hospital, Pittsburgh, PA, ⁶Dept of Physics, Hofstra University and Imacor, Hempsted/Garden City, NY, ⁷Professor of Medicine, Temple University, Director MCS, Pulmonary Hypertension, Allegheny General Hospital, Pittsburgh, PA, ⁸Chief of Cardiology, Professor of Medicine, Temple University, Medical Director, Cardiovascular Inst, Allegheny General Hospital, Pittsburgh, PA.

(981) Unexpected Encounter: Pump Outflow Graft Puncture in a Patient with HeartMate II Device’s Outflow Graft Bend Relief Disconnection:


(982) Fulminant Myocarditis Rescued by V-A ECMO: The Importance of Echocardiographic Profiling!

J. A. Hernandez-Montfort, J. Mallidi, G. Valania. Cardiology, Baystate Medical Center, Springfield, MA.

(983) Low Flow with an LVAD: Unusual Finding on Cardiac CT:

S. M. Jani, W. G. Weigold, K. Ghatourian, G. Ruiz, M. Hofmeyer,
(984) Single Coronary Artery Diagnosed During Routine Echocardiography After Heart Transplant:
A. J. Thompson1, P. W. O’Leary2, J. N. Johnson1. 1Pediatric and Adolescent Medicine, Mayo Clinic, Rochester, MN, 2Department of Pediatrics, Division of Pediatric Cardiology, Mayo Clinic, Rochester, MN.

(985) Fourth-Time Re-Transplant or LVAD Implantation in a Patient With Severe Coronary Artery Vasculopathy After Third-Time Heart Transplant:
K. Hisamoto1, A. Shiose1, E. Leotta1, G. Wheatley1, T. S. Guy1, E. A. Hamad2, R. J. Alvarez2, Y. Toyoda1. 1Department of Pediatrics, Division of Pediatric Cardiology, Mayo Clinic, Rochester, MN, 2Department of Pediatrics, Division of Pediatric Cardiology, Mayo Clinic, Rochester, MN.

(986) Real World Use of Ramp Studies to Diagnose Pump Thrombosis:
S. Emami1, B. A. Whiston2. 1Division of Cardiology, The Ohio State University, Columbus, OH, 2Division of Cardiothoracic Surgery, The Ohio State University, Columbus, OH.

(987) Pulmonary Artery Aneurysm in Porto-Pulmonary Hypertension:

(988) A Case of Successful Treatment for Axial Flow Device-Associated Repeated Pump Thrombosis by Conversion to Fully Magnetic Levitation Centrifugal Device:

(989) Heart Transplantation in Patient With Partial Anomalous Pulmonary Venous Return From the Left Upper Lobe:
J. Kšela1, I. Knežević1, M. Jelenc1, N. Danojević1, M. Rai1, S. Frljak2, G. Poglajen2. 1Dept. of Cardiovascular Surgery, University Medical Center Ljubljana, Ljubljana, Slovenia, 2Advanced Heart Failure and Transplantation Programme, Dept. of Cardiology, University Medical Center Ljubljana, Ljubljana, Slovenia.

(990) Repositioning of Avalon Elite Dual Lumen ECMO Cannula Using a Vascular Snare Device Via Femoral Route:
A. Nummi1, K. Lappalainen1, R. Suojaranta-Yl nen1, P. Hämäinen1. 1Heart and Lung Center, Helsinki University Hospital, Helsinki, Finland, 2Radiology, Helsinki University Hospital, Helsinki, Finland, 3Anesthesiology, Helsinki University Hospital, Helsinki, Finland.

(991) Two Cases of Advanced Heart Failure With Secondary Amenorrhea That Resumed After Long-Term Left Ventricular Assist Device Support:
E. Hisamatsu1, O. Seguchi1, S. Nakajima1, T. Watanabe1, M. Hieda1, H. Sunami1, T. Sato1, Y. Murata1, M. Yanase1, H. Hata2, T. Fujita2, T. Nakatani1. 1Department of Transplantation, National Cerebral and Cardiovascular Center, Suita, Japan, 2Department of Adult Cardiac Surgery, National Cerebral and Cardiovascular Center, Suita, Japan.

(992) Three Years of Support With the Circulite Partial Support System:
(993) Septic-metastasising Aspergillus-Encephalitis Mimicking Massive Cerebral Infarction after Heart Transplantation (HTX);
C. Ballazs1, U. Boeken1, A. Mehdiani1, J. Minol1, P. Akhyari1, H. Kamiya1, D. Saeed1, R. Westenfeld1, A. Lichtenberg1. 1Cardiovascular Surgery, University Hospital, Duesseldorf, Germany.

(994) Early Graft Failure in a Patient with History of Giant Cell Myocarditis;

(995) Perflutren and Acute Pulmonary Edema in Stable Congestive Heart Failure; a Unique Occurrence;
M. A. Chaudhry1, J. T. Heywood2. 1Cardiology/Heart Failure, University of Southern California, Los Angeles, CA,
2Cardiology/Heart Failure, Scripps Green Hospital, La Jolla, CA.
NOTE: Poster presenters and moderators will be present during the evening poster viewing session from 5:30 PM – 6:30 PM.

### BASIC SCIENCE

**Poster 366**

**Combination of mTOR Inhibitor and Calcineurin Inhibitor in EBV-positive and EBV-negative B-lymphocytes:**

- S. Schubert,
- S. Wowro,
- G. Tong,
- F. Berger,
- K. Schmitt.

Dept. of Congenital Heart Disease/Pediatric Cardiology, German Heart Center Berlin, Berlin, Germany.

**Poster 367**

**The Alteration of MiR-326 and MiR-142-3p Expressions during Immune Activation Is Positively Correlated with Graft-protective Cytokine TGF-beta:**

- I. S. Dewi
- O. Gidlöf
- F. Ivars
- J. Öhman.

1Department of Cardiology, Lund University, Lund, Sweden, 2Department of Immunology, Lund University, Lund, Sweden.

**Poster 368**

**Distribution Pattern of Viable Resident C-Kit Positive Cardiac Stem Cells in the Human Ischemic Heart as a Pool for Cardiac Regeneration:**

- J. Garbade
- M. Arsalan
- S. Dhein
- M. J. Barten
- S. Lehmann
- M. A. Borger
- F. Mohr.

Heart Surgery, Heart Center, University of Leipzig, Leipzig, Germany.

**Poster 369**

**Novel Use of a Nanoparticle Delivery System in an Ex-Vivo Model of Lung Transplantation:**

- J. C. Grimm
- F. Zhang
- C. A. Beaty, Jr
- M. Mishra


**Poster 370**

**The Duration of Donor CD4 T Cell Chimerism Following Human Lung Transplantation Is Not Affected By Human Leukocyte Antigen and Natural Killer Cell Alloreactivity:**

- O. Gjorgjimajkoska
- D. Mallon
- J. Jayaraman
- J. Traherne

1Department of Surgery, University of Cambridge, Cambridge, United Kingdom, 2Cambridge Institute for Medical Research, University of Cambridge, Cambridge, United Kingdom, 3Dept Immunohaematology and Bloodtransfusion, Leiden University Medical Center, Leiden, Netherlands, 4Tissue Typing Laboratory, Addenbrooke’s Hospital, Cambridge, United Kingdom, 5Papworth Hospital, Papworth, United Kingdom.

**Poster 371**

**Clopidogrel Preserves Microvascular Integrity in Orthotopic Tracheal Transplants affected by Obliterative Bronchiolitis:**

- C. Heim
- M. A. Khan
- B. Motsch
- S. Müller
- M. Ramsperger-Gleixner
- T. Stamminger
- M. R. Nicolls
- M. Weyand
- S. Ensminger.

1Department of Cardiac Surgery, Erlangen, Germany, 2Veterans Affairs Palo Alto Health Care
System, Stanford University School of Medicine, CA, 3Department of Virology, Erlangen, Germany, 4Department of Cardiac Surgery, Bad Oeynhausen, Germany.

(692) Correlation of Physiological Data at Ex-Vivo Lung Perfusion and Reperfusion in a Rat Ischemia-Reperfusion Model Using Plasmin:

(693) Apoptosis and Expression of Inducible Nitric Oxide Synthase in Normothermic Lung Perfused With Organ Care System (OCS) Compared To Standard Cold Show Donor Lungs:

(694) Image Guided Evaluation of Cellular Retention and Survival After Intramyocardial Transcatheter Based Mesenchymal Stem Cell Transplantation Into the Infarcted Pig Heart:
M. Y. Emmert1, P. Wolint1, J. Pavicevic1, V. Falk1, M. Gyöngyösi2, S. P. Hoerstrup1. 1Cardiac Surgery, University Hospital Zurich, Zurich, Switzerland, 2Cardiology, University Hospital Vienna, Vienna, Austria.

(695) The Importance of Airway and Vascular Parameters in Cellular Ex-Vivo Lung Perfusion Assessment of the Donor Lung:
T. Okamoto 1, D. M. Wheeler2, K. R. McCurry1. 1Transplant Center, Cleveland Clinic, Cleveland, OH, 2Cardiothoracic Anesthesia, Cleveland Clinic, Cleveland, OH, 3Cardiovascular Surgery, Cleveland Clinic, Cleveland, OH.

(696) Alloantigen Specific Immunosuppression by Induced Regulatory T Cells in Humans:

(697) Regenerative Stem Cell Transplantation: Biological and Immunogenic Differences Between Infant and Aged Cells:
M. Stubbendorff1, E. Neofytou2, T. Deusse3, D. Mattutat1, C. Lange1, H. Reichenspurner2, R. Robbins2, H. Volk4, R. Beygui5, S. Schrepfer1. 1TSI-Lab, Hamburg, Germany, 2CT Surgery, Stanford University School of Medicine, Stanford, CA, 3CT Surgery, University Heart Center, Hamburg, Germany, 4Bone Marrow Transplant, University Hospital Hamburg, Hamburg, Germany, 5CT Surgery, Stanford University School of Medicine, Hamburg, CA, 4Immunology, Charite Berlin, Berlin, Germany.

(698) Combined Thromboxane Synthase Inhibition and H2-Receptor Blockade Prevents PVR Elevation During GalTKO.hCD46.hCD55 Pig Lung Perfusion With Human Blood:
L. Burdorf1, E. Rybak1, T. Zhang1, D. Harris1, S. Dahi1, F. Ali1, D. Parsell1, G. Braileanu1, X. Cheng1, E. Sievert1, C. Phelps2, D. Ayares2, A. M. Azimzadeh1, R. N. Pierson 3rd1. 1Surgery, University of Maryland, Baltimore, MD, 2Revivicor, Inc., Blacksburg, VA.
A Mouse Model for ABO-Incompatible Transplantation (ABOi Tx): Study of Antibody-Mediated Rejection (AMR);
B. Motyka1, F. H. Rahman2, A. Kratochvil2, K. Tao2, J. Pearcey3, T. Marshall2, B. Sis2, M. Mengel2, A. J. d’Apice1, P. J. Cowan3, L. J. West1. 1Pediatrics, University of Alberta, Edmonton, AB, Canada, 2Laboratory Medicine and Pathology, University of Alberta, Edmonton, AB, Canada, 3St Vincent’s Hospital, Melbourne, Australia.

Fate of Bronchial Artery Circulation after Lung Transplantation: A Revisit Using Micro CTA Techniques in Rats;
K. Noda1, N. Shigemura1, K. Tobita2, Y. Tanaka2, Y. Saito1, J. K. Bhama1, J. D’Cunha1, C. A. Bermudez1. 1Department of Cardiothoracic Surgery, University of Pittsburgh Medical Center, Pittsburgh, PA, 2Department of Developmental Biology, University of Pittsburgh, Pittsburgh, PA.

Real-Time Imaging With the O-Arm of Lung Parenchyma During Ex-Vivo Lung Reconditioning;
E. Sage1, P. Puyo1, N. Salley1, N. Liu2, G. Trebbia1, P. Bonnette1, A. Roux1, A. Chapelier1. 1Department of Thoracic Surgery and Lung Transplantation, Foch Hospital, Suresnes, France, 2Department of Anaesthesiology, Foch Hospital, Suresnes, France, 3Department of Intensive Care, Foch Hospital, Suresnes, France, 4Department of Pneumology, Foch Hospital, Suresnes, France.

Thioredoxin-1 Priming: A Novel Strategy to Induce Tolerance in a Rat Model of Lung Transplantation;
H. Hu1, J. M. Patel2. 1Department of Medicine, University of Florida, Gainesville, FL, 2Department of Medicine, University of Florida, Research Service, North Florida/South Georgia Veterans Health System, Gainesville, FL.

Influence of Oxidative and Anaplerotic Substrates on Myocardial Metabolism During Hypothermic Machine Perfusion;

FGF23 and Klotho as Cardiovascular Risk Factors in Heart Transplant Recipients;
P. Przybylowski1, L. Janik2, G. Wasilewski3, E. Nowak4, E. Koc-Żorawska, J. Małyszko1, J. Małyszko2. 1Cardiac Surgery and Transplantology, Cardiology Institute Jagiellonian University Medical College, Krakow, Poland, 2Nephrology and Transplantology, Medical University, Białystok, Poland.

Post Heart Transplantation Outcomes of Heart Mate II Bridged Patients Requiring Concomitant Temporary Right Ventricular Mechanical Support;
M. Urban, J. Pirk, J. Besik, I. Netuka. Cardiac Surgery, Institute for Clinical and Experimental Medicine, Prague, Czech Republic.
(706) Device Malfunction in Long Term Mechanical Circulatory Support Devices – A Single Centre Experience;

K. Kerk1, C. Sivathasan1, C. Lim1, D. Sim2, T. Tan1. 1Cardiothoracic Surgery, National Heart Centre Singapore, Singapore, Singapore, Singapore, 2Cardiothoracic, National Heart Centre Singapore, Singapore, Singapore.

(707) Effect of CYP2C9 and VKORC1 Gene Variants in Determining the Maintenance of Warfarin Dose and Complications in Patients With Left Ventricular Assist Device;

S. Ertugay1, B. Durmaz2, C. Engin1, H. Onay1, S. Nalbantgil1, T. Yadı1, F. Özkınay1, M. Özbek1. 1Cardiovascular Surgery Dept., Ege University Medical School Hospital, Izmir, Turkey, 2Medical Genetics, Ege University Medical School Hospital, Izmir, Turkey.

(708) Association Between Plasma Level of Soluble Receptor for Advanced Glycation End Products and Biomarkers of Cardiac Allograft Vasculopathy in Heart Recipients;


(709) The Feasibility of Extracorporeal Membrane Oxygenation Support for Inter-Hospital Transport and Bridge To Lung Transplantation;

D. Kim1, B. Son1, W. Cho2. 1Thoracic and Cardiovascular Surgery, Pusan National University Yangsan Hospital, Yangsan, Korea, Republic of, 2Internal Medicine, Pusan National University Yangsan Hospital, Yangsan, Korea, Republic of.

(711) New-onset Diabetes Mellitus Can Confer an Adverse Risk To Long-Term Survival After Heart Transplantation in Asian Patients;

H. Kim1, S. Jung1, J. Kim1, J. Kim1, S. Choo1, T. Yun1, C. Chung1, J. Lee1. 1Department of Thoracic and Cardiovascular Surgery, Asan Medical Center, Seoul, Korea, Republic of, 2Division of Cardiology, Asan Medical Center, Seoul, Korea, Republic of, 3Division of Pediatric Cardiac Surgery, Asan Medical Center, Seoul, Korea, Republic of.

(712) Tacrolimus in Heart Transplant Recipients With Chagas Disease. Initial Experience;


(713) Factors Influencing Waiting Time on the Heart Transplant Waiting List in Australia and New Zealand;

P. Ruygrok1, R. Pettersson2, A. Keogh2, P. Bergin1, R. Weintraub1, L. Dembo1, G. Javorsky1. 1Auckland City Hospital, Auckland, New Zealand, 2St Vincents Hospital, Sydney, Australia, 3The Alfred Hospital, Melbourne, Australia, 4Royal Childrens Hospital, Melbourne, Australia, 5Royal Perth Hospital, Perth, Australia, 6Prince Charles Hospital, Brisbane, Australia.
(714) Evolution of Donor Lung Utilization after Initiation of New Lung Transplant Program; T. Laisaar1, M. Savisaar2, A. Küüsvek2, J. Milk3, A. Rehme3, J. Kuus1. 1Thoracic Surgery, Tartu University Hospital, Tartu, Estonia, 2Pneumology, Tartu University Hospital, Tartu, Estonia, 3Transplant Center, Tartu University Hospital, Tartu, Estonia.

(715) Cardiac Retransplantation: A Case Report in a Patient With Acute Reactivation of Chagas Disease; D. L. Ferraz1, F. A. Figueira2, M. M. Varejao1, J. T. Rodrigues1, I. T. Silva1, C. B. Cunha1, A. H. Baião1, J. B. Carvalho Junior1, R. M. Carneiro1, F. R. Maures Neto1, V. S. Monteiro1. 1Instituto do Coracao de Pernambuco, Recife, Brazil, 2Instituto de Medicina Integral Prof. Fernando Figueira, Recife, Brazil.

(716) The Change in Pulmonary Vascular Resistance After LVAD Implantation - Can It Aid in Predicting Postimplantation Survival?; M. Cikes1, B. Skoric1, M. Pasalic1, H. Gasparovic1, T. Caleta2, J. Forgac2, T. Grvic2, Z. Baricic2, D. Lovric2, V. Ivancan2, B. Biocina3, D. Milicic3. 1University of Zagreb School of Medicine, Uni. Hosp. Centre Zagreb, Zagreb, Croatia, 2University of Zagreb School of Medicine, Zagreb, Croatia.

(717) Lung Transplantation in Russian Federation; S. V. Golovinskiy1, N. A. Karchevskaya2, O. A. Kurilova3, D. H. Turov2, A. M. Garasov3, E. A. Tarabrin5, I. I. Pervakova5, A. A. Romanov6, S. N. Avdeev2, M. M. Abakumov2, A. G. Chuchalin5, M. S. Hubutiy6. 1Department of Thoracoabdominal Surgery, Lung Transplantation Group, N.V. Sklifosovsky Research Institute of Emergency Medicine, Moscow, Russian Federation, 2Department of Pulmonology, Lung Transplantation Group, Research Institute of Pulmonology FMBA of Russia, Moscow, Russian Federation, 3Department of Anesthesiology and Intensive Care, N.V. Sklifosovskiy Research Institute of Emergency Medicine, Moscow, Russian Federation, 4Department of Thoracoabdominal Surgery, Lung Transplantation Group, N.V. Sklifosovsky Research Institute of Emergency Medicine, Moscow, Russian Federation, 5Research Institute of Pulmonology FMBA of Russia, Moscow, Russian Federation, 6Research Institute of Pulmonology FMBA of Russia, Moscow, Russian Federation.


(719) Infection Incidence and Types of Pathogens After Heart Transplantation: Institutional Experience; M. Sargin1, S. B. Erdogan1, M. Tasdemir Mete1, S. Akansel1, A. Sensoy2, A. Ekmecki3, G. Orhan1, M. Eren1, S. Aykut Aka1. 1Cardiovascular Surgery, Siyami Ersek Cardiovascular Surgery Center, Istanbul, Turkey, 2Department of Infection, Siyami Ersek Cardiovascular Surgery Center, Istanbul, Turkey, 3Cardiology, Siyami Ersek Cardiovascular Surgery Center, Istanbul, Turkey.


(722) A 2-Year Experience of Donor Evaluation for Lung Transplantation in Moscow (Russian Federation):
1Department of Thoracoabdominal Surgery, Lung Transplantation Group, N.V. Sklifosovsky Research Institute of Emergency Medicine, Moscow, Russian Federation, 2Department of General Intensive Care, Donor Coordination Group, N.V. Sklifosovsky Research Institute of Emergency Medicine, Moscow, Russian Federation, 3Moscow Coordinating Centre of Organ Donation, Moscow, Russian Federation, 4N.V. Sklifosovsky Research Institute of Emergency Medicine, Moscow, Russian Federation.

(723) The Initial Results of Implantable Rotary Blood Pumps from New Center in Istanbul, Turkey:
S. Kucukaksu1, Z. T. Demirozu1, E. Pektok1, N. Arat2, B. A. Ertekin3, O. Sogukpinar4. 1Heart Transplantation & Mechanical Circulatory Support, Sisli Florence Nightingale Hospital, Istanbul, Turkey, 2Heart Failure & Cardiology, Sisli Florence Nightingale Hospital, Istanbul, Turkey, 3Adult Psychiatry, Sisli Florence Nightingale Hospital, Istanbul, Turkey, 4Pulmonology & Chest Disease, Sisli Florence Nightingale Hospital, Istanbul, Turkey.

(724) Profile of Donor Hearts in Brazil:

(725) Resurrection of ECMO in India and the Initial Experience in Cardiorespiratory Failure:
K. Krishan1, R. Kumar2, R. Malhotra1. 1Cardiovascular Surgery, Max Superspeciality Hospital, New Delhi, India, 2Respiratory Intensive Care, Max Superspeciality Hospital, New Delhi, India.

(726) Beginners Report: Lung Transplantation Program in Szczecin, Poland:
B. Kubisa1, M. Piotrowska1, J. Pieróg1, M. Bielewicz1, A. Kozak1, N. Wójcik1, A. Zygmiriska2, P. Wasilewski2, G. Feledyki2, M. Kamiński2, G. Mysiorski2, A. Kubisa3, M. Bryczyński2, T. Grodzki2. 1Department of Thoracic Surgery and Transplantation, Pomeranian Medical University of Szczecin, Szczecin, Poland, 2Intensive Care Unit, Pulmonary A. Sokolowski Hospital, Szczecin, Poland, 3Pulmonary Department, Pulmonary A. Sokolowski Hospital, Szczecin, Poland, 4Internal Medicine Department, Pulmonary A. Sokolowski Hospital, Szczecin, Poland, 5Cardiac Surgery Department, Pomeranian Medical University of Szczecin, Szczecin, Poland.
(DMD, HTX)

(727) Has the Survival in Heart Transplant Recipients Older > 65 years Improved Over the Decades?:
Y. Ravi1, B. A. Whiston1, P. G. Boyer2, S. Emani3, A. K. Hasan3, V. Franco1, R. Kahwash1, J. Crestanello1, G. Haas1, R. Higgins1, C. B. Sai-Sudhakar1. 1Cardiac Surgery, The Ohio State University, Columbus, OH, 2Davis Heart and Lung Research Institute, The Ohio State University, Columbus, OH, 3Internal Medicine, The Ohio State University, Columbus, OH.

(728) Towards a Cardiac Allocation Score: Preoperative Stratification Risk and Five Years Survival After Heart Transplantation in a French Cardiac Center:

(729) Transplant Activity Around Major US Holidays:
S. Chen1, C. P. Chee2, S. A. Hollander1, D. N. Rosenthal1, K. Maeda3, E. Liu3, C. S. Almond4. 1Division of Cardiology, Stanford University, Palo Alto, CA, 2Health Economics Resource Center, Department of Veterans Affairs, Menlo Park, CA, 3Cardiothoracic Surgery, Stanford University, Palo Alto, CA, 4Department of Cardiology, Boston Children's Hospital, Boston, MA.

(730) Donor Hemoglobin Is an Independent Predictor of Long-Term Outcomes in Heart Transplant - A Hypothesis Generating Preliminary Data From a Single Center:

(731) Use of Heavy Drinking Donors in Heart Transplantation is Not Associated With Worse Short- and Medium-Term Mortality:

(732) Does Sequence Matter? Outcomes of Donors Rejected by Local Centers:
D. A. Baran, A. Jaiswal, A. Adzic, J. Pieretti, C. Gidea, R. Morlend, S. Murthy, M. T. Camacho, M. J. Zucker. Transplant Center, Newark Beth Israel Medical Center, Newark, NJ.

(733) Hepatitis B Vaccination Confers an Increased Rate of Transplant for Patients on the Heart Transplant Waiting List:

(734) Predictors of Mortality in Heart Transplant Candidates With or Without Mechanical Circulatory Support: A French National Study:
(735) Correlation Between Post-Operative Spirometry and Donor-To Recipient Predicted Total Lung Capacity in Bilateral Lung Transplantation:
R. Rampolla, F. Kheir, Multi-Organ Transplant Institute/ Pulmonary and Critical Care Medicine, Ochsner Clinic Foundation, New Orleans, LA.

(736) Ex-Vivo Lung Perfusion Does Not Have a Negative Effect on Transplant Rates at Centers without This Technology in a Single Organ Procurement Organization (OPO):

(737) Effects of Organ Donor Factors on Lung Transplant Recipient Outcome at One-Year Follow-Up:

(738) High Emergency Lung Transplantation: The Experience of a French Centre:

(739) Process Improvement in Thoracic Organ Donor Retrieval: Implementation of a Donor Assessment Checklist:

(740) A Single Center Experience in the Use of Eurotransplant Donor Scoring on Donor Lung Utilization:
E. Mahoney, D. Dilling, J. Schwartz, E. Lowery.

(741) Impacts of Donor Smoking History and Age on Lung Transplant Survival:
(742) Donor Oxygenation Has No Impact on Postoperative Outcome After Lung Transplantation; W. Sommer1, J. Salman1, I. Tudorache1, C. Kühn1, M. Avsar1, J. Gottlieb1, A. Haverich1, G. Warnecke1. 1Cardiothoracic Surgery, Hannover Medical School, Hannover, Germany, 2Department of Respiratory Medicine, Hannover Medical School, Hannover, Germany.

(743) Lung Allocation Score Criteria Adjustment and Impacts on Transplantation: A Retrospective Study: N. D. Carroll1, A. Kashem2, A. Shiose2, G. H. Wheatley 3rd1, T. S. Guy2, M. Butler-Lebair2, N. Patel1, F. Cordova2, G. J. Criner2, Y. Toyoda2. 1Temple University, Philadelphia, PA, 2Cardiovascular Surgery, Temple University, Philadelphia, PA.

(744) Outcomes of Lung Transplantation Using Donation after Cardiac Death Donors: Should We Use Ex-Vivo Lung Perfusion?: T. N. Machuca1, O. Mercier1, S. Collaud1, V. Linacre1, T. Krueger1, S. Azad1, L. Singer2, K. Yasufuku1, M. de Perrot1, A. Pierre1, T. K. Waddell1, S. Keshavjee1, M. Cypel1. 1Thoracic Surgery, University of Toronto, Toronto, ON, Canada, 2Respirology, University of Toronto, Toronto, ON, Canada.

ADULT HEART FAILURE


(746) Non-Ischemic Dilated Cardiomyopathy: Biopsy Proved Markers of Disease Sub-Entities: K. Rucinskas1, S. Cibiras2, E. Zurauskas3, A. Jakubauskas4, D. Daumoravicius1, I. Zasytyte1, V. Maneikeiene1, J. Celutkiene1, L. Griskevicius6, V. Grabauskiene3. 1Clinic of Cardiovascular Diseases, Centre of Cardiac Surgery, Vilnius University, Medical Faculty, Vilnius, Lithuania, 2Centre of Cardiology and Angiology, Vilnius University Hospital Santariskiu Klinikos, Vilnius, Lithuania, 3Pathology, Forensis Medicice and Pharmacology, Vilnius University, Medical Faculty, Vilnius, Lithuania, 4Centre of Hematology, Oncology and Transfusion, Vilnius University Hospital Santariskiu Klinikos, Vilnius, Lithuania, 5Clinic of Cardiovascular Diseases, Vilnius University, Medical Faculty, Vilnius, Lithuania, 6Centre of Hematology, Oncology and Transfusion, Vilnius University, Medical Faculty, Vilnius, Lithuania.

(747) Fibroblast Growth Factor 23 is a Promising Biomarker of Cardiac Hypertrophy: V. Polyakova1, J. Poeling2, T. Kubin3, T. Braun3, T. Walther1, M. H. Richter1. 1Cardiac Surgery, Kerckhoff-Clinic, Bad Nauheim, Germany, 2Cardiac Surgery, Schüchtermann-Clinic, Bad Rothenfelde, Germany, 3Heart and Lung Research, Max-Planck-Institute, Bad Nauheim, Germany.

(749) Is There a Need for Patient Specific Informed Consent in Heart Transplantation?

(750) Improvement of Endothelial Function After Stem Cells Transplantation in Patients With Heart Failure;

(751) Left Ventricular Internal Diastolic Diameter as a Predictor of Outcomes in Ischemic Cardiomyopathy;
J. Shatzkes, J. Salamon, R. Zolty. Cardiology, Montefiore Medical Center/Albert Einstein College of Medicine, Bronx, NY.

(752) Higher Serum Galectin-3 Levels Correlate to Lower Cerebral Tissue Oxygenation in Heart Failure Patients;
L. Rifai1, C. Pisano2, M. Upadhyaya3, M. A. Silver4. 1Department of Cardiology, Advocate Lutheran General Hospital, Park Ridge, IL, 2Heart Failure Institute, Advocate Christ Medical Center, Oak Lawn, IL, 3Department of Medicine, Advocate Christ Medical Center, Oak Lawn, IL, 4Department of Medicine, Heart Failure Institute – Advocate Christ Medical Center, Oak Lawn, IL.

(753) Myocardial Scar Burden and Response to Stem Cell Therapy in Heart Failure Patients;
G. Zemljič1, G. Poglajen1, U. Mikuž2, M. Sever2, S. Frljak1, P. Mali1, F. Haddad3, J. C. Wu4, B. Vrtovec1. 1Advanced Heart Failure and Transplantation Programme, Dept. of Cardiology, University Medical Center Ljubljana, Ljubljana, Slovenia, 2Dept. of Hemotology, University Medical Center Ljubljana, Ljubljana, Slovenia, 3Blood Transfusion Center of Slovenia, Ljubljana, Slovenia, 4Stanford University School of Medicine, Palo Alto, CA.

(754) Activation of Copeptin, MRpro-ANP and MRpro-ADM in Heart Failure and Post LVAD and Heart Transplantation;

(755) Independent Prognostic Value of Peak Oxygen Consumption in ICD and Non-ICD Patients;

(756) Pre-Heart Transplant Recipient Counterpulsation Influences Primary Graft Dysfunction But Not Survival: Analysis of a National Cohort;
N. G. Jawitz, O. K. Jawitz, P. Bonde. Bonde Artificial Heart Lab, Yale School of Medicine, New Haven, CT.

(757) Hemodynamic Correlates and Prognostic Implication of Vasodilator Response in Reactive Pulmonary Hypertension Due To Left Heart Disease (PHLHD);
S. Lim. University Hospital Birmingham NHS Trust, Birmingham, United Kingdom,
ADULT HEART TRANSPLANTATION


(759) Performance of Gene Expression Profiling Variability in Discriminating Heart Transplant Patients at Risk for Future Clinical Events; M. G. Crespo-Leiro, J. Stypmann, H. J. Ross, P. Mohacsi, J. K. Parameshwar, M. Zakliczynski, J. Vanhaecke. 1 1. Unidad de Insuficiencia Cardiaca Avanzada y Trasplante Cardiaco, Hospital Universitario A Coruña, La Coruña, Spain, 2Department of Cardiovascular Medicine, University Hospital Muenster, Muenster, Germany, 3Division of Cardiology and Heart Transplantation, Toronto General Hospital, Toronto, ON, Canada, 4Cardiology, University Hospital of Bern, Bern, Switzerland, 5Papworth Hospital, Papworth Everard, Cambridge, United Kingdom, 6Department of Cardiac Surgery & Transplantation, Silesian Center for Heart Disease, Zabrze, Poland, 7Department of Medicine-Division of Cardiology, UCLA Medical Center, Los Angeles, CA, 8XDx Inc., Brisbane, CA, 9Department of Cardiology, University Hospital of Leuven, Leuven, Belgium.


(761) Combined Heart and Abdominal Organ Transplantation: Excellent Outcomes Gained from a Unique Experience; J. M. Stulak, J. A. Schirger, B. Edwards, L. D. Joyce, C. Rosen, J. Heimbach, M. Prieto, R. C. Daly. Cardiovascular Surgery, Mayo Clinic College of Medicine, Rochester, MN, 2Cardiovascular Diseases, Mayo Clinic College of Medicine, Rochester, MN, 3General Surgery, Mayo Clinic College of Medicine, Rochester, MN.


(763) Pre-Transplant Anti-HLA Antibodies and Clinical Events After Heart Transplantation; T. Gazdíc, M. Kubanek, E. Svobodova, A. Slavec, I. Netuka, J. Pirk, I. Malek. 1Cardiac Surgery, Institute for Clinical and Experimental Medicine, Prague, Czech Republic, 2Cardiology, Institute for Clinical and Experimental Medicine, Prague, Czech Republic, 3Immunogenetics, Institute for Clinical and Experimental Medicine, Prague, Czech Republic.

(764) Long-Term Sildenafil Therapy Improves Right Ventricular Function in Heart Transplant Recipients With Pulmonary Hypertension; B. Vrtovec, G. Poglija, M. Šebešťjen, R. Okrašek, S. Frijak, G. Zemljić, J. Kselia, I. Kneževi, F. Haddad. 1Advanced Heart Failure and Transplantation Programme, Dept. of Cardiology, University Medical Center Ljubljana, Ljubljana, Slovenia, 2Dept. of Cardiovascular Surgery, University Medical Center Ljubljana, Ljubljana, Slovenia, 3Stanford University School of Medicine, Palo Alto, CA.
(765) Mechanical Circulatory Support for Primary Graft Dysfunction Following Heart Transplantation: Risk Factors and Clinical Outcome;
A. A. Ali1, K. Southerland1, L. Harling2, M. Schechter1, A. Saeed1, T. Athanasiou2, J. Schroder1, C. Milano1. 1Duke University Medical Center, Durham, NC, 2Imperial College, London, United Kingdom.

(766) CNI Free Immunosuppression in Heart Transplant Patients Treated With Everolimus: Results of a Multicenter French Registry;

(767) Delayed Sternal Closure Following Heart Transplantation: Outcomes and Implications;
A. A. Ali, K. Southerland, M. Schechter, A. Saeed, J. Schroder, C. Milano. Cardiothoracic Surgery, Duke University Medical Center, Durham, NC.

(768) YKL-40, a Novel Marker of Cardiovascular Complications, Is Related To Kidney Function in Heart Transplant Recipients;
P. Przybylowski1, G. Wasilewski1, L. Janik1, E. Nowak1, E. Koc-Żórawska2, J. Małyszko2, J. Małyszko2. 1Cardiac Surgery and Transplantology, Cardiology Institute Jagiellonian University Medical College, Krakow, Poland, 2Nephrology and Transplantology, Medical University, Bialystok, Poland.

(769) Recovery of Myocardial Capillary Bed (Microvascular) Density Persists in Long Term Follow Up of CAV Patients Treated With Sirolimus;
D. V. Miller1, M. Revelo1, J. Wever-Pinzon1, J. Nixon1, M. H. Hammond1, J. Stellick1, E. Gilbert1, J. C. Fang1, M. Everitt1, S. Drakos2, R. Alharethy2, D. Budge3, A. G. Kfoury2. 1Pathology, UTAH Cardiac Transplant Program, Salt Lake City, UT, 2Cardiology, UTAH Cardiac Transplant Program, Salt Lake City, UT, 3Pediatric Cardiology, UTAH Cardiac Transplant Program, Salt Lake City, UT.

(770) Mycophenolic Acid Area Under the Curve But Not Trough Level or Dose Is Associated With Rejection in Adult Heart Transplant Patients in the First Year Post-Transplantation;
J. Woillard1, L. Pouché1, P. Marquet1, G. Sinnasse-Raymond1, J. Debord1, C. Knoop2, F. Saint-Marcoux1. 1Pharmacology Department, INSERM U850/CHU Limoges, Limoges, France, 2Virology-Nephrology, Roche SAS, Boulogne-Billancourt Cedex, France, 3Unité de transplantation cardiaque et pulmonaire, CHU Erasme, Bruxelles, Belgium.
A CNI-Free, Everolimus Based Regimen in De-Novo Heart Transplant Recipients Increases Albuminuria But Improves Glomerular Filtration Rate Compared With Conventional Immunosuppression;
Department of Cardiology, Rigshospitalet, Copenhagen, Denmark, Department of Cardiology, Rikshospitalet, Oslo, Norway, 
Department of Cardiology, Sahlgrenska University Hospital, Gothenburg, Sweden, Department of Cardiology, Skeby University Hospital, Aarhus, Denmark, Department of Cardiology, Skaane University Hospital, Lund, Sweden, Department of Cardiac Surgery, Sahlgrenska University Hospital, Gothenburg, Sweden.

Influence of Junctional-Adhesion-Molecules on Transendothelial Migration Under Hypothermic Conditions: What About the Rewarming During Reperfusion?; N. V. Bogert, I. Werner, A. Moritz, A. Beiras-Fernandez. Department of Thoracic and Cardiovascular Surgery, University Hospital Frankfurt, Goethe University, Frankfurt am Main, Germany.

Cardiac Surgery, University Leipzig, Heart Center, Leipzig, Germany, Department of Cardiothoracic Transplantation and Advanced Cardiac Surgery, Florida Hospital Orlando, Orlando, FL.

Usefulness of ECMO for Cardiac Transplanted Patients Suffering From Early Cardiac Dysfunction; A. Defontaine, T. Le Poivre, M. Treilhaud, P. Bizouarn, S. Pattier, J. Roussel, O. Baron. CHU Nantes, Nantes, France.

Association Between Steroids Withdrawal During the First Year After Heart Transplantation and Changes in Total Cholesterol and Its Fractions in a Two Year Follow-Up. RESTCO Study; M. G. Crespo-Leiro, M. J. Paniagua-Martín, M. Gómez-Bueno, J. L. Lambert-Rodríguez, J. Fernández-Yáñez, J. M. Arizón del Prado, F. González-Vilchez, T. Blasso-Periód, L. de la Fuente Galán, V. Brossa-Loidi, L. Almenar Bonet, I. Garrido-Bravo, E. Lage-Gaill, J. Muiñez-García, J. Delgado-Jiménez, Heart Transplant Unit, Hospital Universitario A Coruña, La Coruña, Spain, Hospital Universitario Puerta de Hierro, Madrid, Spain, Hospital Universitario Central de Asturias, Asturias, Spain, Hospital General Universitario Gregorio Marañón, Madrid, Spain, Hospital Universitario Reina Sofia, Córdoba, Spain, Hospital Universitario Marqués de Valdecilla, Santander, Spain, Hospital Universitario Miguel Servet, Zaragoza, Spain, Hospital Clínico Universitario de Valladolid, Valladolid, Spain, Hospital Santa Creu i Sant Pau, Barcelona, Spain, Hospital Universitari i Politècnic La Fe, Valencia, Spain, Hospital Universitario Virgen de la Arrixaca, Murcia, Spain, Hospital Universitario Virgen del Rocío, Sevilla, Spain, Instituto Universitario de Ciencias de la Salud. Universidad de A Coruña, La Coruña, Spain, Hospital Universitario 12 de Octubre, Madrid, Spain.

Pioglitazone for the Treatment of Insulin Resistance in Heart Transplant Recipients: Assessment of Efficacy and Safety; R. Ray, M. Shih, N. Constantz, B. Kohli, H. Luikart, K. Khush, Cardiovascular Medicine, Stanford University, Stanford, CA.

Health Research & Policy, Stanford University, Stanford, CA.
(777) Does the Presence of Complement Binding De Novo DSA Distinguish Different Pathology Defined Rejection Patterns in Heart Transplant Recipients?:
N. L. Reinsmoen1, M. Haas2, J. Patel3, C. Lai1, M. Naim1, G. Ong1, Q. Wang1, J. Mirocha4, Z. Yu1, F. Liou1, J. Kobashigawa1. 1HLA, Cedars-Sinai Health System, Los Angeles, CA, 2Pathology, Cedars-Sinai Health System, Los Angeles, CA, 3CA Heart Foundation, Cedars-Sinai Health System, Los Angeles, CA, 4Research Institute, Cedars-Sinai Health System, Los Angeles, CA.

(778) Correlation of Circulating Donor-Specific Anti-HLA Antibodies and Biopsy-Diagnosed Antibody-Mediated Rejection in Endomyocardial Biopsy With Cardiac Allograft Vasculopathy:
T. Sato1, M. Yanase1, H. Sunami1, Y. Murata1, O. Seguchi1, K. Ogo1, T. Matsuyama2, Y. Ikeda2, H. Hata2, T. Fujita2, H. Ishibashi-Ueda1, T. Nakatani1. 1Transplantation, National Cerebral and Cardiovascular Center, Osaka, Japan, 2Pathology, National Cerebral and Cardiovascular Center, Osaka, Japan.

(779) Aging With a New Heart: Long Term Clinical Outcome and Quality of Life After Transplantation in Old Patients:
S. Sponga, C. Travaglini, V. Tursi, S. Enrico, G. Guzzi, C. Nalli, D. Piani, U. Livi. Udine University Hospital, Udine, Italy.

(780) Do Redo Heart Transplant Patients Have an Increased Risk of Antibody Development?:

(781) Presence of Coronary Artery Fistulae after Cardiac Transplantation Is Associated with Increased Plaque Progression by Intravascular Ultrasound:
R. Cheng, B. Azarbal, J. Patel, J. Wei, J. Kobashigawa. Cedars-Sinai Heart Institute, Los Angeles, CA.

(782) Novel Lipoprotein Markers Remain Elevated Despite Statin Therapy After Heart Transplant:
S. Christopher1, M. T. Hassanein2, M. P. Flattery1, M. Smallfield1, R. H. Cooke1, K. B. Shah1. 1Virginia Commonwealth University Health System, Richmond, VA, 2Virginia Commonwealth University, Richmond, VA.

(783) Mediastinal Re-Entry in Patients Undergoing Ventricular Assist Device Explantation Prior To Heart Transplantation: Role of Peripheral Cannulation for Cardiopulmonary Bypass:
A. A. Ali, K. Southerland, M. Schechter, A. Saeed, J. Schroder, C. Milano. Duke University Medical Center, Durham, NC.

(784) The Utilization of Non-invasive Echocardiographic Indices in Estimating Pulmonary Capillary Wedge Pressure in Heart Transplant Patients:
M. A. Chamsi-Pasha, B. Cookman, S. Saxena, S. Sayyed, E. Raichlin. Cardiovascular Medicine, University of Nebraska Medical Center, Omaha, NE.

(785) Prevalence and Impact of Anti-DP/DP/DQ HLA Antibodies in De Novo Heart Transplantation:
L. Goldraich2, F. Foroutan1, S. Chih2, H. J. Ross1, K. Tinckam1. 1Cardiac Transplant Program, Peter Munk Cardiac Center, University of Toronto, Toronto, ON, Canada, 2Advanced Heart Failure and Cardiac Transplant Service, Royal Perth Hospital, Perth, Australia.
ADULT LUNG FAILURE

(786) Mechanical Ventilation of ECMO Patients Is Associated with Decreased Post-Transplant Survival; G. J. Bittle, P. G. Sanchez, Z. N. Kon, K. Rajagopal, S. Pham, B. P. Griffith. Cardiac Surgery, University of Maryland, Baltimore, MD.

(787) Esophageal Motility and Impedence pH in Patients Listed for Lung Transplantation; D. Lien1, J. Weinkauf1, A. Kapasi2, D. Helmersen2, M. Thakrar2, M. Fenton1, J. Wong1, a. Lazarescu1, K. Jackson1. 1Lung Transplant Program, University of Alberta, Edmonton, AB, Canada, 2Lung Transplant Program, University of Calgary, Calgary, AB, Canada, 3Lung Transplant Program, University of Saskatchewan, Saskatoon, SK, Canada, 4Medicine, University of Alberta, Edmonton, AB, Canada.

(788) Pulmonary Function and Exercise Tolerance of Lung Transplanted Patients With Initially Rejected Grafts Reconditioned With Ex-Vivo Lung Perfusion: Medium Term Results; M. Boffini, D. Ricci, E. Mancuso, R. Bonato, V. Fanelli, M. Ribezo, M. Attisani, P. Solidoro, M. Ranieri, M. Rinaldi. Surgical Sciences Department, University of Turin, Turin, Italy.

(789) Acidic Gastroesophageal Reflux and Aspiration Are Not Associated with Earlier Development of Bronchiolitis Obliterans in Pediatric Lung Transplant; C. Towe1, E. Uterson1, S. Sweet1, P. Michelson1, P. Eghtesady1, U. Boston2, A. Faro1. 1Pediatrics, Washington University, St Louis, MO, 2Surgery, Washington University, St Louis, MO.

(790) A Single Center Experience With Bi-Caval Dual-Lumen Canulation in Veno-Venous Extracorporeal Life Support; V. Cunningham1, T. N. Machuca2, C. Serrick1, E. Fan1, V. Linacre2, K. Yasufuku2, A. Pierre2, M. de Perrot2, T. K. Waddell2, S. Keshavjee2, M. Cypel2. 1Perfusion Services, Toronto General Hospital, Toronto, ON, Canada, 2Thoracic Surgery, University of Toronto, Toronto, ON, Canada, 3Critical Care Medicine, University of Toronto, Toronto, ON, Canada.

(791) Evolving Practice: X Linked Agammaglobulinemia and Lung Transplantation; G. P. Westall1, J. Douglass2, E. Paul1, F. Hore-Lacy1, R. Stitling1, B. Levvey1, G. Snell1. 1Lung Transplant Service, Alfred Hospital, Melbourne, Australia, 2Department of Allergy, Royal Melbourne Hospital, Melbourne, Australia, 3Epidemiology and Preventative Medicine, Monash University, Melbourne, Australia, 4Allergy, Immunology and Respiratory Medicine, Alfred Hospital, Melbourne, Australia.
**ADULT LUNG TRANSPLANTATION**

(792) The Effect of Donor-Derived Herpes Viruses on Lung Transplant Recipient Survival:
H. Strah1, Y. Shindo2, T. L. Bricker1, A. Aloush1, A. E. Gelman3,
J. M. Green1. 1Pulmonary and Critical Care Medicine, Washington
University School of Medicine, St. Louis, MO, 2Institute for
Advanced Research, Nagoya University, Nagoya, Japan,
3Department of Surgery, Washington University School of
Medicine, St. Louis, MO.

(793) Sildenafil Attenuates Lung Ischemia-Reperfusion
Injury in a Rodent Model:
J. A. Cobb1, L. Lu2, E. Bromberek3, P. Kasinipila2, T. M. Beaver1.
1Thoracic and Cardiovascular Surgery, University of Florida,
Gainesville, FL, 2Pulmonary Pathology, University of Florida,
Gainesville, FL, 3Medicine, University of Florida, Gainesville, FL.

(794) Lung Retransplantation for Early Graft Failure: Trends
and Results in 112 Patients Over a 24-Year Period:
A. Kilic, J. C. Grimm, A. S. Shah, J. V. Conte, C. M. Sciortino. Division
of Cardiac Surgery, Johns Hopkins Hospital, Baltimore, MD.

(795) Prevalence of Gastroparesis After Lung
Transplantation: A Single Center Study:
H. Jhun1, K. Chaikriangkrai2, V. Gudssoorkar1, N. Sinha2,
T. Kaleekar1, B. Mankidy1, S. Scheinin2, M. Loeb1, B. Bruckner1,
D. Ren1, S. Jyothula1. 1Internal Medicine, Houston Methodist
Hospital, Houston, TX, 2Pulmonary Critical Care, Houston
Methodist Hospital, Houston, TX, 3Cardiovascular Surgery,
Houston Methodist Hospital, Houston, TX.

(796) Serum Hepcidin Antimicrobial Peptide Levels
Predict Infection After Lung Transplantation:
D. J. Ross1, A. Ardehali1, J. Belperio1, A. Derhovanessian1,
S. S. Weigt1, D. Sayah1, J. P. Lynch1, III1, R. Saggard1, M. Shino1,
M. Jacquet1, B. Kubak2, T. Ganzi2. 1Ronald Reagan-UCLA, Lung
& Heart-Lung Transplant Program, Los Angeles, CA, 2Division of
Infectious Diseases, David Geffen School of Medicine at UCLA,
Los Angeles, CA, 3Division of Pulmonary and Critical Care,
David Geffen School of Medicine at UCLA, Los Angeles, CA.

(797) Impact of Pre-Transplant Pleurodesis in
the Outcome After Lung Transplantation for
Lymphangioleiomyomatosis:
J. Sakamoto, F. Chen, C. Chaparro, W. Karolak, K. Yasufuku,
M. de Perrot, A. Pierre, L. G. Singer, M. Hutcheon, T. Waddell,
M. Cypel, S. Keshavjee. Toronto Lung Transplant Program,
University of Toronto, Toronto, ON, Canada.

(798) Bronchial Artery Revascularization and
En Bloc Lung Transplant in Children:
F. Guzman-Pruneda1, Y. Orr1, C. M. Merry1, I. Adachi1, M. Nugent2,
J. Maddox1, M. G. Schecter1, G. B. Mallory1, D. L. Morales1,
J. S. Heinle1, E. D. McKenzie1. 1Baylor College of Medicine,
Houston, TX, 2Texas Children’s Hospital, Houston, TX, 3Cincinnati
Children’s Hospital, Cincinnati, OH.

(799) Ex-Vivo Lung Perfusion for Infected Non-Acceptable
Donor Lungs: A Pilot Study:
M. N. Samano, L. G. Abdalla, L. M. Fernandes, N. A. Nepomuceno,
K. A. Oliveira Braga, A. E. Azevedo-Pereira, P. M. Pêgo-Fernandes,
Thoracic Surgery Department, Heart Institute (Incor), Hospital das
Clínicas da Faculdade de Medicina da Universidade de São Paulo,
São Paulo, Brazil.
(800) Cryoanalgesia Complements Thoracic Epidural Use Following Lung Transplantation;
M. G. Hartwig¹, A. A. Osho², S. Hirji², A. W. Castleberry¹,
A. Ganapathi¹, S. S. Lin¹, D. R. Davis¹. ¹Department of Surgery,
Duke University Medical Center, Durham, NC, ²School of Medicine,
Duke University Medical Center, Durham, NC.

(801) Sirolimus Is Associated With Worse Renal Function in a Tacrolimus Based Immunosuppressive Regimen in Lung Transplantation;
M. Robinson¹, C. Liao², J. Koyner¹, S. Bhorade (on behalf of the AIRSAC investigators)³. ¹Internal Medicine, University of Chicago, Chicago, IL, ²Health Studies, University of Chicago, Chicago, IL, ³Nephrology, University of Chicago, Chicago, IL, ⁴Pulmonary and Critical Care, University of Chicago, Chicago, IL.

(802) Implementation and Medium-Term Outcomes of a Center-Specific High-Urgency Anti-HLA Antibody Policy;
A. Stoddart¹, M. I. Hertz¹, M. David², K. Rosemany², S. Sara²,
J. Patil¹. ¹Medicine, University of Vermont, Burlington, VT,
²Medicine, University of Minnesota, Minneapolis, MN.

(803) Extracorporeal Photoimmune Therapy (ECP) with UVADEX in Conjunction with Standard Therapy Compared to Standard Therapy Alone for the Prevention of Rejection in Lung Transplantation Patients;
P. Jaksch¹, G. Murakoezy¹, C. Lambers¹, A. Scheed¹, W. Klepetko¹,
R. Knobler¹. ¹Thoracic Surgery, Medical University Vienna,
Vienna, Austria, ²Dept Dermatology, Medical University Vienna,
Vienna, Austria.

(804) Catheter-directed Intrapleural Fibrinolysis for Complicated Pleural Effusion Following Lung Transplantation – A Safe and Effective Strategy;
N. Shigemura, J. D'Cunha, A. J. Hayanga, J. K. Bhama,
P. Sappington, J. M. Pilewski, C. A. Bermudez. Cardiothoracic Surgery, University of Pittsburgh, Pittsburgh, PA.

(805) Comparison of Voriconazole and Posaconazole Use in Lung Transplant Patients;
C. Chau¹, S. Yerkovich¹, T. Tse¹, P. Hopkins¹, S. Henning²,
D. Chambers¹,². ¹Queensland Lung Transplant Service,
The Prince Charles Hospital, Brisbane, Australia, ²School of Pharmacy, The University of Queensland, Brisbane, Australia,
³School of Medicine, the University of Queensland, Brisbane, Australia.

(806) Outcomes Following Pregnancy in Living Lobar Lung Transplantation;
C. L. Greene, M. L. Barr, F. A. Schenkel, S. G. Worrell, V. A. Starnes, P. M. McFadden. Surgery, Keck School of Medicine of the University of Southern California, Los Angeles, CA.

(807) Perioperative Venous Thromboembolism Prophylaxis in Lung Transplant Patients;
P. L. McGugan¹, D. Alboni¹, B. Gulack¹, S. Hirji¹, A. Wilk¹, A. Ganapathi¹, M. G. Hartwig¹. ¹Cardiothoracic Surgery, Duke University Health Systems, Durham, NC, ²Duke University Health Systems, Durham, NC, ³Surgery, Duke University Health System, Durham, NC, ⁴Duke University, Durham, NC, ⁵Biostatistics and Bioinformatics, Duke University Medical Center, Durham, NC, ⁶Surgery, Duke University Medical Center, Durham, NC.

(808) Management of Airway Stenoses With Biodegradable Stents After Lung Transplantation. Single Institution Experience;
S. Gelvez-Zapata, A. Wilkinson, D. Thomas, M. Pittman, J. Parmar. Transplant Department, Papworth Hospital, Cambridge, United Kingdom.
(809) Esophageal Motility and Impedance-pH in Lung Transplant Recipients:
D. Lien1, J. Weinkauf1, A. Kapasi1, M. Fenton1, D. Helmersen1, M. Thakrar1, J. Wong1, A. Lazarescu1, K. Jackson1. 1Lung Transplant Program, University of Alberta, Edmonton, AB, Canada, 2Lung Transplant Program, University of Saskatchewan, Saskatoon, SK, Canada, 3Lung Transplant Program, University of Calgary, Calgary, AB, Canada, 4Medicine, University of Alberta, Edmonton, AB, Canada.

(810) Halting BOS in Lung Transplant: Is Cyclosporine Conversion the Answer?:
L. J. Stuckey1, N. M. Walker1, J. Lin1, K. M. Chan2, V. N. Lama2. 1Department of Pharmacy Services, University of Michigan Health System, Ann Arbor, MI, 2Department of Internal Medicine, Division of Pulmonary & Critical Care Medicine, University of Michigan Health System, Ann Arbor, MI.

(811) Prolonged Intensive Care Unit Stay after Bilateral Lung Transplantation – Late Mortality & Functional Outcome?:
L. P. Ong1, Z. Tristan2, M. Prahbu3, G. Parry4, S. C. Clark1. 1Cardiothoracic Surgery, Freeman Hospital, Newcastle upon Tyne, United Kingdom, 2Human Anatomy & Clinical Skills, University of Newcastle, Newcastle upon Tyne, United Kingdom, 3Cardiothoracic Anaesthesia and Intensive Care Unit, Freeman Hospital, Newcastle upon Tyne, United Kingdom, 4Cardiothoracic Transplantation, Freeman Hospital, Newcastle upon Tyne, United Kingdom.

(812) Factors Associated With Early Bacterial Infection After Lung Transplantation in Cystic Fibrosis Patients in Two French Centers With Different Antibiotic Prophylaxis Regimen:
C. Picard1, V. Boussaud2, M. Schmidt1, R. Guillemain2, S. De Miranda1, C. Amrein2, D. Grenet1, A. Roux1, M. Stern1. 1Respiratory Medicine and Foch Lung Transplantation Group, Foch Hospital, Suresnes, France, 2Lung Transplantation Unit, Cardiac Surgery, Hopital Européen Georges Pompidou, Paris, France.

(813) Single Lung Transplantation in Patients with Secondary Pulmonary Hypertension Is Safe and Organ Efficient:
W. Julliard, G. Leverson, S. Osaki, N. De Oliveira, J. D. Maloney. Department of Surgery, University of Wisconsin, Madison, WI.

(814) The Impact of Incomplete Pulmonary Fissures of Living Lobar Lung Transplant Donors on Bronchial Stenosis of Lung Recipients:
S. Sugimoto, T. Oto, M. Okada, K. Miyoshi, A. Nakatani, M. Yamane, S. Miyoshi. Thoracic Surgery, Okayama University Hospital, Okayama, Japan.

(815) Traffic Density Does Not Affect Lung Function in the First Year After Double Lung Transplant:
J. Blaikley1, K. Godri-Pollitt2, S. Zhang1, Y. Guo2, K. Sabaliauskas2, G. Evans2, C. Chaparro1, S. Keshavjee1, L. Singer1, C. Chow1. 1Toronto General Hospital, Toronto, ON, Canada, 2University of Toronto, Toronto, ON, Canada.

(816) Impact of Minimally Invasive Lung Transplantation on Postoperative Renal Outcomes:
R. Romano1, I. Wong2, L. Thakuria2, F. De Robertis2, T. Bahrami3, M. Amrani3, S. Kaul1, D. Hall1, A. Reed1, M. Carby1, A. Simon1, N. Marczin1. 1Anaesthetics, Imperial College London, London, United Kingdom, 2Imperial College London, London, United Kingdom, Royal Brompton and Harefield NHS Foundation Trust, Harefield, United Kingdom.
A Simple Risk Score To Predict Long-term Renal Dysfunction Following Lung Transplantation: It’s Not Over at 5 Years;
A. J. Hayanga1, J. Yang2, J. Aboagye3, N. Shigemura1, H. E. Kaiser4, J. K. Bhama1, J. D. Luketich1, J. D’Cunha1. 1Cardiothoracic Surgery, University of Pittsburgh Medical Center, Pittsburgh, PA, 2Biostatistics and Epidemiology, Johns Hopkins School of Public Health, Baltimore, MD, 3Epidemiology, Johns Hopkins School of Public Health, Baltimore, MD, 4Anesthesiology and Critical Care, Johns Hopkins Medical Institutions, Baltimore, MD.

Prevalence and Predictors of Diabetes After Lung Transplant – A Prospective, Longitudinal Study;
K. L. Hackman1, G. I. Snell2, L. A. Bach3. 1Medicine, Monash University, Melbourne, Australia, 2Lung Transplant Service, The Alfred Hospital, Melbourne, Australia, 3Endocrinology and Diabetes, The Alfred Hospital, Melbourne, Australia.

Overweight and Obesity Common after Lung Transplantation;
J. L. Anderson1, K. L. Hackman2, G. I. Snell3, A. C. Tierney4. 1Nutrition and Dietetics, The Alfred Hospital, Melbourne, Australia, 2Medicine, Monash University, Melbourne, Australia, 3Lung Transplant Service, The Alfred Hospital, Melbourne, Australia, 4Nutrition and Dietetics, Monash University, Melbourne, Australia.

Clinical Outcomes in Lung Retransplantation;

Donor and Recipient Risk Factors for Early Airway Dehiscence Following Lung Transplantation;
Z. N. Kon, G. J. Bittle, C. F. Evans, K. Rajagopal, S. M. Pham, B. P. Griffith. University of Maryland School of Medicine, Baltimore, MD.

Impact of Demographics on Airway Obstruction on Spirometry Among Patients With Lung Transplantation;
A. Banga, K. McCarthy, M. Budev. Cleveland Clinic Foundation, Cleveland, OH.

Right Ventricular Recovery Following Lung Transplantation: Does it happen?;

Initial Data from a Prospective Observational Study of Hypogammaglobulinemia After Lung Transplantation;
R. S. Traister, J. Gribowicz, M. Crespo, F. P. Silveira, J. M. Pilewski, A. A. Petrov. Medicine, University of Pittsburgh, Pittsburgh, PA.

Allosensitization Increases the Risk of Death on the Lung Transplant Waiting List;
C. A. Witt1, D. E. Byers1, R. D. Yusen1, J. A. Iuppa2, K. B. Bain2, G. A. Patterson2, T. Mohanakumar2, E. P. Trulock1, R. R. Hachem1. 1Internal Medicine, Washington University School of Medicine, Saint Louis, MO, 2Pharmacy, Barnes-Jewish Hospital, Saint Louis, MO, 3Surgery, Washington University School of Medicine, Saint Louis, MO.

Fat Free Mass, Body Mass Index, and Functional Capacity in Patients Awaiting Lung Transplantation;
J. M. Dolan1, C. W. Compher2, D. J. Lederer2, N. P. Blumenthal3, J. Christie2, R. J. Shah4. 1Clinical Nutrition Support Service, Hospital of the University of Pennsylvania, Philadelphia, PA, 2School of Nursing, University of Pennsylvania, Philadelphia, PA, 3Division of Pulmonary, Allergy, and Critical Care Medicine, Columbia University Medical Center, New York, NY, 4PENN Transplant Institute, Hospital of the University of Pennsylvania,
Prevalence of Forcet Dysfunction in Pulmonary Fibrosis and COPD Patients Undergoing LTx Evaluation:
N. Hooft, R. Saggiar, M. Smith, E. Kuo, J. Huang, R. Walia, R. Bremner. St. Joseph Hospital and Medical Center, Phoenix, AZ.

CD25+ Regulatory T Cells in Bronchoalveolar Lavage Fluid Are Associated with Lung Allograft Rejection:

Multi-Centre Experience of Donor Choice Consent Forms in the United Kingdom:
K. E. Morley, S. Clark. Institute of Transplantation, Freeman Hospital, Newcastle upon Tyne, United Kingdom.

Smoking and Mortality in the Waiting for a New Heart Study:

A Quantitative Assessment of Life with a Left Ventricular Assist Device: Questionnaires, Domains and Format:
K. E. Sandau, B. A. Hoglund, C. E. Weaver, C. Boisjolie, D. S. Feldman, Nursing, Bethel University, St. Paul, MN, Transplant, Minneapolis Heart Institute/Abbott Northwestern, Minneapolis, MN, Cardiology, Minneapolis Heart Institute/Abbott Northwestern Hospital, Minneapolis, MN, Cardiology, Minneapolis Heart Institute/Morehouse/Georgia Institute of Technology, Minneapolis, MN.

Safety of Nurse Driven Ambulation for Patients on Venovenous Extracorporeal Membrane Oxygenation:
D. R. Dennis, B. Boling, T. A. Tribble, N. Rajagopal, C. W. Hoopes, Cardiothoracic Transplant, University of Kentucky, Lexington, KY, Cardiothoracic and Vascular ICU, University of Kentucky, Lexington, KY, Mechanical Circulatory Support, University of Kentucky, Lexington, KY, Division of Cardiology, University of Kentucky, Lexington, KY, Division of Cardiothoracic Surgery, University of Kentucky, Lexington, KY.

Evaluation of GI bleeding in LVAD Patients: A Single Center Review:
K. Miracle, V. Cruz, T. Buda, C. Gady, M. Mountis, S. Lee, N. Mozami, Mechanical Circulatory Support Team, Cleveland Clinic, Cleveland, OH, Lerner College of Medicine of Case West-
(834) Patients With Cystic Fibrosis Have a Better Recovery in Exercise Capacity and Quadriceps Muscle Strength Post-Lung Transplant: J. Walsh1, D. C. Chambers1, S. T. Yerkovich1, N. R. Morris2, J. Wilson1, P. M. Hopkins1. 1Queensland Lung Transplant Service, Heart Lung Institute, The Prince Charles Hospital, Brisbane, Australia, 2School of Rehabilitation Sciences and Griffith Health Institute, Griffith University, Gold Coast, Australia.

(835) Predictors of Physical Activity in a Pre-Lung Transplant Population: J. R. Walsh1, D. C. Chambers1, S. T. Yerkovich1, P. M. Hopkins1, N. R. Morris2. 1Queensland Lung Transplant Service, Heart Lung Institute, The Prince Charles Hospital, Brisbane, Australia, 2School of Rehabilitation Sciences and Griffith Health Institute, Griffith University, Gold Coast, Australia.

(PEDS, HF, HTX, MCS)

(836) Risk-Stratification in Children with Advanced Heart Failure Using Hemodynamic Data: P. M. Alexander, E. D. Blume, K. Gauvreau, E. L. Kehoe, T. P. Singh. Cardiology, Boston Children’s Hospital, Boston, MA.


Cardiac Transplantation in Children with Chromosomal Anomalies: A Multi-Institutional Outcomes Analysis:
P. Shamszad, C. T. Sower, T. D. Ryan, C. D. Castleberry, A. Lorts, J. L. Jefferies, I. Wilmot, J. A. Towbin, C. Chin. The Heart Institute, Cincinnati Children's Hospital Medical Center, Cincinnati, OH.

Home Milrinone Therapy in Pediatric Advanced Heart Failure:
L. Murray, L. Irby, A. Savage, L. Haney, A. Burnette, M. Kavarana, R. Butts. Pediatric Cardiology, Medical University of South Carolina, Charleston, SC.

Is Doppler Echocardiography Useful for Estimating Ventricular Filling Pressures in Pediatric Heart Transplant Recipients?:
F. I. Lunze, K. Gauvreau, S. D. Colan, S. Dillis, E. D. Blume, T. P. Singh. Cardiology, Boston Children's Hospital, Boston, MA.

Impact of Pre-Sensitization and Positive Virtual Cross-Match on Outcomes in Pediatric Heart Transplantation:

The Impact of Right Atrial Pressure on Outcomes in Children with Advanced Heart Failure:
P. M. Alexander, E. D. Blume, K. Gauvreau, H. J. Bastardi, T. P. Singh. Cardiology, Boston Children’s Hospital, Boston, MA.

Sensitized VADs vs. Sensitized Non-VADs: Is There an Immunological Difference?:

Progression of Left Ventricular Dysfunction in Duchenne and Becker Muscular Dystrophies:
L. Ridall1, J. Gralla2, P. M. Mourani2, A. Czaja3, M. Yang4, C. Cunniff5, J. A. Donnelly6, E. Ciafaloni6, J. Oleszek7, S. Pandya8, E. Price9. 1Pediatrics, Division of Critical Care, University of Colorado School of Medicine, Aurora, CO, 2Pediatrics, Children’s Hospital Research Institute, University of Colorado School of Medicine, Aurora, CO, 3Neurology, University of Colorado School of Medicine, Aurora, CO, 4Pediatrics, University of Arizona College of Medicine, Tuscon, AZ, 5Colorado Department of Public Health and Environment, Denver, CO, 6Pediatrics and Neurology, University of Rochester, Rochester, NY, 7Physical Medicine and Rehabilitation, University of Colorado School of Medicine, Aurora, CO, 8Neurology, University of Rochester, Rochester, NY, 9Pediatrics, Division of Cardiology, University of Colorado School of Medicine, Aurora, CO.

Importance of Genetic Evaluation in Pediatric Restrictive Cardiomyopathy:

Post-Transplant Outcomes of Pediatric Patients Bridged with Continuous Flow Left Ventricular Assist Devices:
A. Levin1, R. K. Singh1, J. Fried1, M. E. Richmond1, W. A. Zuckerman1, A. R. Garan1, K. P. Mody1, H. Takayama1, M. Yuzefpolskaya1, P. C. Colombo1, M. Dionizovik-Dimanovski1, Y. Naka2, L. J. Addonizio1, U. P. Jorde1. 1Pediatrics, Columbia University, New York, NY, 2Surgery, Columbia University, New York, NY,
Post Heart Transplant (HT) Survival in Pediatric Patients with Left Ventricular and Biventricular Assist Devices (LVAD/BIVAD): UNOS Registry Analysis:
L. C. Reardon1, J. C. Ajejos2, A. A. Nsair3, R. M. Biniwale4, M. C. Deng5, B. Reemtsen1, A. Ardehali1, E. C. Depusqal1, 1Adult and Pediatric Cardiology, UCLA, Los Angeles, CA, 2Pediatric Cardiology, UCLA, Los Angeles, CA, 3Adult Cardiology, UCLA, Los Angeles, CA, 4Cardiothoracic Surgery, UCLA, Los Angeles, CA.

Outcomes of Pediatric Heart Failure Referral:
J. D. Sparks1, M. Bichanich2, K. P. Simpson1, C. E. Canter1. 1Pediatric Cardiology, Washington University in St. Louis, St. Louis, MO, 2School of Medicine, Washington University in St. Louis, St. Louis, MO.

Hospital Charges for Pediatric Heart Failure Related Hospitalizations Admissions in the United States from 2000 to 2009:
D. Nandi1, K. Y. Lin1, M. J. O’Connor1, O. U. Elci2, J. J. Kim3, J. A. Decker4, J. F. Price4, F. Zafar4, D. L. Morales5, S. W. Denfield6, W. J. Dreyer1, J. L. Jeffries8, J. W. Rossano1. 1The Cardiac Center, Children’s Hospital of Philadelphia, Philadelphia, PA, 2Westat-CHOP, Rockville, MD, 3Department of Pediatrics, Lillie Frank Abercrombie Section of Pediatric Cardiology, Baylor College of Medicine, Texas Children’s Hospital, Houston, TX, 4Johns Hopkins All Children’s Heart Institute, St Petersburg, FL, 5The Heart Institute, Cincinnati Children’s Hospital, Cincinnati, OH.

HAVE You Been Fully Evaluated? The Hypertension and Vascular Evaluation Program Detects Nocturnal and Masked Hypertension as Well as Increased Carotid Intima-Media Thickness in Pediatric Heart Transplant Recipients:
C. Bober1, J. Rossano1, A. Huante2, K. Lin1, C. Laney3, M. Crane1, K. Meyers1, S. Narasaran1. 1Cardiology, Children’s Hospital of Philadelphia, Philadelphia, PA, 2Nephrology, Instituto Nacional de Pediatría, Mexico City, Mexico, 3Nephrology, Children’s Hospital of Philadelphia, Philadelphia, PA.

Quality of Life, Ethics, Policy and the Economics of Thoracic Transplantation and MCS

Impact of Early Major Adverse Events on Quality of Life After Mechanical Circulatory Support:

Canadian Society of Transplantation (CST) Members’ Views on Anonymity in Organ Transplantation:
M. Gewarges, J. Poole1, E. De Luca1, M. Shildrick2, S. Abbey4, O. Mauthner1, H. J. Ross1. 1Department of Cardiology and Transplantation, Toronto General Hospital, Toronto, ON, Canada, 2School of Social Work, Faculty of Community Services, Ryerson University, Toronto, ON, Canada, 3Department of Thematic Studies – Gender Studies, Linköping University, Linköping, Sweden, 4Department of Psychiatry, Toronto General Hospital, Toronto, ON, Canada.
PULMONARY HYPERTENSION

(856) Clinical Significance of Gastroesophageal Reflux Disease and Proton Pump Inhibitor Use in Pulmonary Arterial Hypertension;
G. Ramani1, D. Lam2, M. Park1. 1University of Maryland, Baltimore, MD, 2United Therapeutics Corporation, Durham, MD.

(857) Rapid Inpatient Titration of Intravenous Treprostinil for Severe Pulmonary Arterial Hypertension;
L. Hansen, F. Rischard, S. Knoper. Pulmonary, University of Arizona, Tucson, AZ.

(858) S-Nitroso Human Serum Albumin Vs Inhaled Nitric Oxide in Experimental Right Ventricular Failure on Prolonged Overcirculation-Induced Pulmonary Hypertension;
A. Rungatscher1, S. Hallström2, D. Linardi3, E. Milani4, K. Gandhi1, G. Luciani1, A. Mazzucco1, G. Faggian1. 1University of Verona, Verona, Italy, 2University of Graz, Graz, Austria.

(859) Effects of Acute Volume Loading on the Chronically Pressure Overloaded Right Ventricle;
D. Boulate1, E. Fadel1, D. Chemla1, B. Decante1, J. Guhaire1, P. Dartevelle1, O. Mercier1, E. Fadel1. 1Laboratory of Surgical Research, Marie Lannelongue Surgical Center, Le Plessis Robinson, France, 2Biomarker and Phenotype Core Laboratory, Cardiovascular Institute Stanford University, Stanford, CA, 3Physiology Department, CHU Bicêtre - Université Paris XI, Le Kremlin Bicêtre, France, 4Thoracic and Vascular Surgery and Heart-Lung Transplantation, Marie Lannelongue Surgical Center, Le Plessis Robinson, France.

(860) A Porcine Model of Chronic Right Ventricular Pressure Overload: Pulmonary Hemodynamics Over 16 Weeks, and Effects of Acute Enbucrylate Embolization;
D. Boulate1, E. Fadel1, D. Chemla1, B. Haddad1, B. Decante1, J. Guhaire1, P. P. Dartevelle1, O. Mercier1. 1Laboratory of Surgical Research, Marie Lannelongue Surgical Center, Le Plessis Robinson, France, 2Biomarker and Phenotype Core Laboratory, Cardiovascular Institute Stanford University, Stanford, CA, 3Physiology Department, CHU Bicêtre - Université Paris XI, Le Kremlin Bicêtre, France, 4Thoracic and Vascular Surgery and Heart-Lung Transplantation, Marie Lannelongue Surgical Center, Le Plessis Robinson, France.

(861) Hemodynamics of Pulmonary Hypertension in the Setting of Hereditary Hemorrhagic Telangiectasia;
M. A. Lyle1, E. R. Fenstad2, M. D. McGoon3, R. P. Frantz2. 1Division of Internal Medicine, Mayo Clinic, Rochester, MN, 2Division of Cardiovascular Diseases, Mayo Clinic, Rochester, MN, 3Division of Pulmonary and Critical Care Medicine, Mayo Clinic, Rochester, MN, 4Division of Pulmonary and Critical Care Medicine, Mayo Clinic, Scottsdale, AZ.

(862) Serum Markers of Vascular Angiogenesis and Inflammation Are Predictive of Functional Capacity and Invasive Hemodynamics in Patients with Pulmonary Arterial Hypertension;
A. Raina1, L. Zhang2, R. L. Benza3. 1Cardiovascular Institute, Allegheny General Hospital, Pittsburgh, PA, 2United Therapeutics Corporation, Research Triangle Park, NC.
(863) Pulmonary Vasodilators Can Reverse Out-of-Proportional Pulmonary Hypertension in Patients with Left Cardiac Disease; 
H. Maki1, M. Hatano1, H. Muraoka1, S. Minatsuki1, T. Fujino1, T. Imamura1, T. Inaba1, A. Yao1, K. Kinugawa1, I. Komuro1. 1Cardiovascular Medicine, University of Tokyo, Tokyo, Japan, 2Department of Health Service Promotion, University of Tokyo, Tokyo, Japan, 3Department of Therapeutic Strategy for Heart Failure, University of Tokyo, Tokyo, Japan.

(864) Endothelin-1 Levels in Patients With Heart Failure With Normal Ejection Fraction and Pulmonary Venous Hypertension; 
A. Moza, A. Ali, G. W. Moukarbel, P. Bhat, J. Tian, S. J. Khouri. Cardiovascular Medicine, University of Toledo Medical Center, Toledo, OH.

(865) Soluble Vascular Endothelial Growth Factor Receptor -1 (sFlt-1) Is Decreased in Patients With Pulmonary Arterial Hypertension; 
N. Selimovic1, F. Khaliel1, L. Mattsson Hulten2. 1Heart Centre, King Faisal Specialist Hospital & Research Centre, Riyadh, Saudi Arabia, 2Wallenberg Laboratory, University of Gothenburg, Gothenburg, Sweden.

(866) Surgical Treatment of Chronic Thromboembolic Pulmonary Hypertension: from Transplantation to Endarterectomy; 
A. M. D’Armini1, M. Morsolini1, G. Mattiucci1, V. Grazoli1, M. Pin1, A. Valentini2, C. Goggi1, R. Dore1. 1Cardiac Surgery, University of Pavia School of Medicine, Foundation I.R.C.C.S. San Matteo Hospital, Pavia, Italy, 2Radiology, University of Pavia School of Medicine, Foundation I.R.C.C.S. San Matteo Hospital, Pavia, Italy.

PHARMACY AND PHARMACOLOGY

(867) Antithymocyte Globulin Therapy for Chronic Lung Allograft Dysfunction Following Lung Transplantation; 
E. George, S. Ivulich, M. Paraskeva, B. Levvey, G. Snell, G. P. Westall. Lung Transplant Service, Alfred Hospital, Melbourne, Australia.

(868) Assessment of Medication Regimen Complexity Over Time Following Heart Transplantation; 
B. M. Bryant1, A. M. Libby2, K. Metz2, R. L. Page2, J. A. Lindenfeld1. 1Department of Pharmaceutical Sciences, University of Colorado, Aurora, CO, 2Department of Clinical Pharmacy, University of Colorado, Aurora, CO, 3Division of Cardiology, University of Colorado, Aurora, CO.

(869) Safety of Anticoagulation Reversal in Patients Supported With Continuous-Flow Left-Ventricular Assist Devices; 
D. L. Jennings1, M. Jacob2, A. Chopra2, C. W. Nemerovsky1, J. A. Morgan3, D. E. Lanfear3. 1Pharmacy Practice, Nova Southeastern University, Ft. Lauderdale, FL, 2Wayne State University, Detroit, MI, 3Pharmacy Services, Henry Ford Hospital, Detroit, MI, 4Cardiac Surgery, Henry Ford Hospital, Detroit, MI, 5Cardiovascular Medicine, Henry Ford Hospital, Detroit, MI.
(870) PCC for Warfarin Reversal in High Risk Pediatric Cardiac Transplantation;
A. L. Haney1, R. J. Butts2, A. J. Savage2, W. E. Uber1, M. N. Kavarana1. 1Department of Pharmacy, Medical University of South Carolina, Charleston, SC, 2Department of Pediatric Cardiology, Medical University of South Carolina, Charleston, SC, 3Department of Pediatric Cardiac Surgery, Medical University of South Carolina, Charleston, SC.

(871) Anticoagulation for the HeartWare HVAD: An International Comparison of Strategies and Outcomes;
D. L. Jennings1, R. M. Gellatly2, E. G. Szandzik3, A. Leet4, D. E. Lanfear5. 1Pharmacy Practice, Nova Southeastern University, Ft. Lauderdale, FL, 2Pharmacy, Alfred Hospital, Melbourne, Australia, 3Pharmacy Services, Henry Ford Hospital, Detroit, MI, 4Department of Cardiology, Alfred Hospital, Melbourne, Australia, 5Department of Cardiovascular Medicine, Henry Ford Hospital, Detroit, MI.

(872) Phenprocoumon in Heartware Ventricular Assist Device Patients – A New Regimen for Early Postoperative Anticoagulation;
Y. Schneeberger1, M. Kubik2, C. Oelschneider1, H. Reichenspurner1, T. Deuse1. 1Department of Cardiac Surgery, University Heart Center Hamburg, Hamburg, Germany, 2Department of Anaesthesiology, University Heart Center Hamburg, Hamburg, Germany.

PATHOLOGY

(873) Characterization of Lymphoid Clusters in the Transplanted Heart; an Effort To Form Tertiary Lymphoid Clusters?;
M. M. Huibers1, A. Gareau2, T. D. Lee2, R. Kruit1, H. Feringa1, E. Siera-de Koning1, N. de Jonge3, R. A. de Weger1. 1Pathology, University Medical Center Utrecht, Utrecht, Netherlands, 2Department of Microbiology & Immunology, Department of Surgery, Dalhousie University, Halifax, NS, Canada, 3Cardiology, University Medical Center Utrecht, Utrecht, Netherlands.

(874) An International Tutorial for Cardiac Acute Cellular Rejection;
S. Yoshizawa1, O. Nikolskaya2, L. A. Batoirova1, Y. K. Batoroev1, O. Leone2, C. Toquet3, J. Duong Van Huyen2, P. Bruneval2, R. Roberta2, J. Majo1, S. H. Litovsky3, M. K. Halushka1. 1Pathology, Columbia University, New York, NY, 2Pathology, Johns Hopkins University SOM, Baltimore, MD, 3Scientific Center of Reconstructive and Restorative Surgery, Siberian Branch, Russian Academy of Medical Sciences, Irkutsk, Russian Federation, 4Irkutsk Institute for Postgraduate Medical Education, Irkutsk Institute for Postgraduate Medical Education, Irkutsk, Russian Federation, 5Poloclinico S. Orsola-Malpighi, Bologna, Italy, 6University Hospital, Nantes, France, 7Université Paris Descartes Médecine, Paris, France, 8Royal Victoria Infirmary, Newcastle upon Tyne, United Kingdom, 9Pathology, University of Alabama at Birmingham, Birmingham, AL.

(875) Localization of microRNAs in Cardiac Allograft Vasculopathy With In Situ Hybridization: a Role in Immune Regulation and/or Fibrosis?;
M. M. Huibers1, B. van Holthe tot Echten1, T. Peeters1, N. de Jonge2, G. Tellides3, R. A. de Weger1. 1Pathology, University Medical Center Utrecht, Utrecht, Netherlands, 2Cardiology, University Medical Center Utrecht, Utrecht, Netherlands, 3Surgery, Yale University, New Haven, CT.
<table>
<thead>
<tr>
<th>BOOTH #</th>
<th>EXHIBITING COMPANY</th>
</tr>
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<tbody>
<tr>
<td>117</td>
<td>Actelion Pharmaceuticals (Commercial)</td>
</tr>
<tr>
<td>118</td>
<td>Actelion Pharmaceuticals (Medical)</td>
</tr>
<tr>
<td>413</td>
<td>Alere Home Monitoring</td>
</tr>
<tr>
<td>205</td>
<td>Bayer Healthcare</td>
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<tr>
<td>323</td>
<td>Berlin Heart</td>
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<tr>
<td>123</td>
<td>Biologic TX</td>
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<td>423</td>
<td>Carmat</td>
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<td>222</td>
<td>Centurion Medical Products</td>
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<td>224</td>
<td>CHI St. Luke’s Health</td>
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<td>CorMatrix CV, Inc.</td>
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<td>419</td>
<td>CSL Behring</td>
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<td>125</td>
<td>Elsevier</td>
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<td>Gilead Sciences, Inc.</td>
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<td>311</td>
<td>HeartWare</td>
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<tr>
<td>126</td>
<td>ImaCor, Inc.</td>
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<tr>
<td>324</td>
<td>INTERMACS</td>
</tr>
<tr>
<td>420</td>
<td>ISHLT IMACS</td>
</tr>
<tr>
<td>422</td>
<td>ISHLT Registry</td>
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<td>321</td>
<td>Jarvik Heart</td>
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<tr>
<td>221</td>
<td>Maquet Medical Systems</td>
</tr>
<tr>
<td>106</td>
<td>Miller Pharmacal Group, Inc</td>
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<td>108</td>
<td>One Lambda, Inc. part of Thermo Fisher Scientific</td>
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<td>121</td>
<td>Orthodynamics Company, Inc.</td>
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<td>104</td>
<td>Scanlan International, Inc.</td>
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<td>122</td>
<td>Scholten Surgical Instruments, Inc.</td>
</tr>
<tr>
<td>225</td>
<td>Sunshine Heart</td>
</tr>
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<td>320</td>
<td>SynCardia Systems, Inc.</td>
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<td>Teleresults Corp</td>
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<td>Thoratec Corp</td>
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<td>111</td>
<td>TransMedics, Inc</td>
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<tr>
<td>424</td>
<td>United Network for Organ Sharing</td>
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<td>105</td>
<td>United Therapeutic</td>
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<td>124</td>
<td>Viracor-IBT Laboratories</td>
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<td>Vivoline Medical AB</td>
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<td>XVIVO Perfusion AB</td>
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LIST OF EXHIBITORS BY BOOTH NUMBER

102  Thoratec Corp
104  Scanlan International, Inc.
105  United Therapeutic
106  Miller Pharmacal Group, Inc
108  One Lambda, Inc.
part of Thermo Fisher Scientific
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117  Actelion Pharmaceuticals
(Commercial)
118  Actelion Pharmaceuticals
(Medical)
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122  Scholten Surgical Instruments, Inc.
123  Biologic TX
124  Viracor-IBT Laboratories
125  Elsevier
126  ImaCor, Inc.
205  Bayer Healthcare
217  XVIVO Perfusion AB
218  Centurion Medical Products
221  Maquet Medical Systems
LIST OF EXHIBITORS BY BOOTH NUMBER

224  CHI St. Luke’s Health
225  Sunshine Heart
311  HeartWare
317  Gilead Sciences, Inc.
320  SynCardia Systems, Inc.
321  Jarvik Heart
323  Berlin Heart
324  INTERMACS
405  XDx
409  Genentech
413  Alere Home Monitoring
416  CorMatrix CV, Inc.
417  Essential Pharmaceuticals
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421  Vivoline Medical AB
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CSL Behring is a global leader in plasma protein therapeutics. The company manufactures safe and effective plasma-derived and recombinant therapies for treating coagulation disorders, primary immune deficiencies, hereditary angioedema and inherited respiratory disease, and neurological disorders in certain markets. The company’s products are also used in cardiac surgery, organ transplantation, burn treatment and to prevent hemolytic disease of the newborn. CSL Behring is a subsidiary of CSL Limited (ASX:CSL), a biopharmaceutical company with headquarters in Melbourne, Australia. For more information: www.cslbehring-us.com.

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ImaCor manufactures the ClariTEE® probe, the only miniaturized, indwelling TEE probe suitable for long-term clinical settings. hTEE™, Zura™, Zura EVO™, Adaptaflex™ and ClariTEE® are trademarks of ImaCor, Inc.
INTERMACS

Interagency Registry for Mechanically Assisted Circulatory Support
701 19th Street South, 790 LHRB
Birmingham, AL 35294
Web address: www.intermacs.org

The Interagency Registry for Mechanically Assisted Circulatory Support is a prospective North American registry established in 2005 for patients who are receiving mechanical circulatory support device therapy to treat advanced heart failure.

These activities are supported by the INTERMACS® administrative center, analysis center and the data coordinating center under contract to the National Heart, Lung and Blood Institute (NHLBI). The purpose of the registry is to collect and analyze clinical and laboratory data from patients who are receiving MCSDs for whom discharge from the hospital is feasible. INTERMACS™ provides contemporary data to demonstrate the continued progress of outcomes, with additional insight into appropriate risk stratification and patient selection.

IMACS

ISHLT Mechanically Assisted Circulatory Support Registry
701 19TH Street South, LHRB 790
Birmingham, AL 35294
Web address: www.ishlt.org/registries/mcsdDatabase.asp

IMACS is an international registry intended to enroll and follow patients who receive durable mechanically assisted circulatory support devices (MCSD) in all countries and hospitals that wish to participate. Durable devices are defined as those devices that are capable of allowing patient discharge with the device in place.

The primary goal of IMACS is to create, implement and analyze a registry that contains high standards for complete enrollment of patients and complete and accurate submission of MCSD data that allows participating centers to engage in important outcomes research about mechanical support devices.
The ISHLT Transplant Registry was created to collect on-going, current information on the worldwide thoracic organ transplantation experience.

Our registry is the only one of its kind. The data we maintain is utilized for scientific study and contributes to the body of knowledge regarding thoracic transplantation. Our goal is to identify overall and best practices for improving cardio-thoracic patient care.

This year the exhibit will make center-specific information available for review by ISHLT Transplant Registry participants. In addition, data screens can be reviewed and we will provide guidance on enrollment, submission of data and data request services.

Jarvik Heart, Inc. is a privately held, New York based company that develops and manufactures miniaturized heart assist devices for the treatment of severe heart failure. The Jarvik 2000 is a battery-powered axial-flow left ventricular assist device (LVAD). It is the smallest implantable blood pump available for the long-term treatment of Heart Failure.
MAQUET Medical Systems, USA is a market leader offering a comprehensive portfolio of products utilized in the Hybrid OR, ICU, Cath Lab which are designed to meet the needs of clinical professionals in the areas of: surgery, cardiac intervention, peripheral intervention, dialysis, perfusion, anesthesia and respiratory. MAQUET is focused on improving patient care and quality of life, providing clinicians with future-oriented technology that fits their daily practice and investing in the development of innovative technologies and solutions that will help further advance clinical practice and significantly improve patient outcomes.

Miller Pharmacal’s magnesium supplement “MG Plus Protein” is used at many transplant centers for the treatment and prevention of the hypomagnesemia caused by CI’s, without the GI disturbances common with magnesium oxide.

“MG Plus Protein” is: well-tolerated, effective, inexpensive and easy for patients to swallow.
One Lambda, Inc., part of Thermo Fisher Scientific, has introduced a new standard of care in the transplantation with our line of antibody detection products featuring the LABScreen® Single Antigen Assays for DSA Monitoring. In antibody profiling, the C1qScreen and AT1R assays have transformed the transplant community. Furthermore, in HLA Typing, the new LABType® XR Kit with greater exon coverage and the LABType® CWD kits will allow detection of all common and well documented alleles. Bridging our current technologies in antibody detection and HLA Typing to the next generation platforms is our commitment to the global transplant community. Visit us at www.onelambda.com.

Since 2004, Orthodynamics has become a leader in the MCS Outpatient Equipment and Supply industry. Focused on patient care and a team approach, our system allows patients to access products and services through manufacturers we represent nationwide. Our strategic alliances with hospitals, clinicians and major insurance carriers, give us the ability to provide a high level of service to patients and healthcare professionals.
Highest quality surgical products designed and manufactured by the Scanlan family since 1921. Over 3,000 titanium and stainless steel instrument designs including needle holders, forceps, scissors, clamps and specialty instruments. Featured instruments include the SCANLAN® LEGACY titanium needle holders and forceps, full line of VATS/MIS Thoracoscopic instruments including the Chitwood Clamp, Knot Pusher, and SUPER CUT™ Suture Cutter; Axial Handle needle holders and forceps, SUPER CUT™ Scissors and Rendina needle holder. Single-use products include: VASCU-STAT™ bulldog clamps, Aorta/Vein Punch and A/C Locator® graft markers. Also offering custom instrument designs and modifications for your individual needs.

For more than thirty-five years SSI has manufactured high quality endomyocardial biopsy forceps. The Scholten disposable Bioptome model is called the Novatome™ and, like its predecessors, is specially designed to acquire maximum specimen size for more accurate pathology results. Our device has earned a reputation for its ease of use, heart rhythm feedback and is considered the “gold standard” by many. With our innovative design paired with over three decades of clinical experience makes our device the best choice for safety and performance. With the Novatome™, SSI continues to provide reliability, value and forceps of the highest quality to your industry.
The C-Pulse® Heart Assist System is a balloon counter-pulsation technology used to treat patients with moderate to severe heart failure (Class III/Ambulatory Class IV). The implantable device is placed outside the bloodstream and gives patients the ability to disconnect from the system. Preliminary results of the C-Pulse System have indicated relief of heart failure symptoms, improved quality of life and cardiac function, and reduced the need for heart failure hospitalization. The C-Pulse implant procedure can be performed minimally invasively. The European Post-Market Study (OPTIONS HF) and the US Investigational Pivotal Trial (COUNTER HF™) are currently underway.

The SynCardia temporary Total Artificial Heart (TAH-t) is the world’s only FDA, Health Canada and CE approved Total Artificial Heart. The TAH-t is currently approved as a bridge to transplant for patients dying from end-stage biventricular failure. The 13.5 lb Freedom® portable driver has received CE approval in Europe and has completed an IDE clinical study in the U.S. The Freedom driver is designed to provide mobility for stable TAH patients both inside and outside the hospital. Visit our booth for updates on pediatric and other expanding usage and the 50cc TAH clinical study.
TeleResults Presidio is a proven organ disease and transplant management information system designed to enhance patient care while helping medical centers increase efficiency and meet regulatory compliance. Our thoracic disease modules include comprehensive support for VAD, CHF and PH. The VAD module records and manages all phases of patient care, includes an Equipment Tracking module for managing devices and other equipment, and includes INTERMACS™ registry support by providing report generation for patient registration submission. Presidio interfaces with hospital information systems, labs (internal and external), UNOS UNet for transplant forms, and supports e-prescribing. Online web site access is available for patients, clinicians and prospective living donor applicants.”

Thoratec is the world leader in mechanical circulatory support with the broadest product portfolio to treat the full range of clinical needs for patients suffering from advanced heart failure. The company’s products include the HeartMate LVAS and Thoratec VAD, with more than 20,000 devices implanted in patients suffering from heart failure. Thoratec also manufactures and markets the CentriMag and PediMag/PediVAS product lines. Thoratec is headquartered in Pleasanton, California. For more information, visit www.thoratec.com
TransMedics is dedicated to extending the life-saving benefits of transplantation to patients suffering from organ failure. The Organ Care System (OCS™) is a portable, advanced ex-vivo perfusion, monitoring and organ recruitment platform for heart and lung transplantation. The OCS maintains donor organs in a functioning state from donor to recipient and aims to enable more efficient use of potential donor organs and enhance patient outcomes.

The OCS HEART and OCS LUNG systems are CE-marked and in clinical use in leading worldwide transplant centers and in pivotal FDA trials in leading transplant centers.

United Network for Organ Sharing (UNOS) is the non-profit membership organization that manages the transplant system in the United States, or the Organ Procurement and Transplantation Network (OPTN), under contract with the federal government. UNOS advances organ availability and transplantation by uniting and supporting its communities for the benefit of patients through education, technology and policy development. Tii Informatix, a business unit of UNOS, provides transplant systems consulting, education, technology solutions and assessment services to international governments and healthcare organizations. Tii designs and operates clinical registries including INTERMACS, the ISHLT Global Thoracic Registry and IMACS, as well as, post market surveillance and outcome studies for pharmaceutical and device companies. www.tii-informatix.com
UNITED THERAPEUTICS

55 TW Alexander Dr.
Research Triangle Park, NC 27709
Web address: www.unitedtherapeutics.com

United Therapeutics Corporation is a biotechnology company focused on the development and commercialization of unique products to address the unmet medical needs of patients with chronic and life-threatening conditions.

VIRACOR-IBT LABORATORIES

1001 NW Technology Drive
Lee’s Summit, MO 64086
Web address: www.viracoribt.com

With over 30 years of expertise in infectious disease, immunology and allergy testing, Viracor-IBT is committed to helping transplant professionals minimize complications with specialized testing. Approximately sixty percent of U.S. transplant programs rely on Viracor-IBT’s accelerated turnaround times, broad reportable ranges and extensive specimen types to diagnose faster, when it matters most. Viracor-IBT also offers ImmuKnow® for the detection of cell-mediated immune response in populations undergoing immunosuppression therapy for organ transplant, and cytokines to aid in differential diagnosis. We’re passionate about providing timely, actionable information, never losing sight of the patients ultimately served. For more information, visit www.viracoribt.com.
Vivoline Medical is a Swedish research-based company who develops and manufactures equipment in the field of thoracic transplantation. The first product on the market was Vivoline® LS1, now spread over a large part over the world. Vivoline® LS1 is the world leading system designed for making EVLP in an automatic way, helping medical centers increase efficiency and meet the needs for transplantable organs. The future-oriented company Vivoline Medical will show a brand new product in the booth at ISHLT 2014.

AlloMap is the only non-invasive gene expression test that helps physicians identify the absence of heart transplant rejection. It provides quantifiable, objective and reproducible test results. Offers Patient Comfort: Only requires a simple blood draw Widely Adopted: Successfully used in over 50,000 cases to help physicians detect the absence of heart transplant rejection at the time of testing in 10,000+ heart transplant patients.
XVIVO manufactures and markets solutions for transplantation designed to preserve and evaluate organs and tissues prior to transplantation. The XPS™ is a flexible and comprehensive platform for normothermic EVLP empowering the user to remain in control of the entire process. Our principle solutions are Perfadex® for hypothermic flushing and preservation of donor lungs during transport and STEEN Solution™ for normothermic ex-vivo organ evaluation and reconditioning (Approved in US for research purposes only).

XVIVO aims to:

- minimize ischemia-reperfusion injury by improving the solutions used for ex-vivo preservation of organs.
- extend the safe ex-vivo preservation time for organs prior to transplantation.
- increase organ availability and transplantation success rates by introduction of new transplantation concepts and techniques
See you next year in Nice!

à bientôt
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