

ISHLT SAN DIEGO

CALL FOR ABSTRACTS &
PRELIMINARY PROGRAM

34th Annual Meeting and Scientific Sessions
April 10 – 13, 2014

and ISHLT Academies
April 7 – 9, 2014

MANCHESTER GRAND HYATT SAN DIEGO



International Society for Heart and Lung Transplantation

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INTERNATIONAL SOCIETY FOR HEART AND LUNG TRANSPLANTATION

34TH ANNUAL MEETING AND SCIENTIFIC SESSIONS

April 10-13, 2014

Convening at the Manchester Grand Hyatt,
San Diego, CA, USA

ISHLT Academy: Core Competencies in Nursing, Health Science and Allied Health

April 9, 2014

Convening at the Manchester Grand Hyatt, San Diego, CA, USA

ISHLT Academy: Core Competencies in Heart Failure and Transplant Medicine

April 9, 2014

Convening at the Manchester Grand Hyatt, San Diego, CA, USA

ISHLT Academy: Core Competencies in Basic Science and Translational Research

April 9, 2014

Convening at the Manchester Grand Hyatt, San Diego, CA, USA

ISHLT Academy: Core Competencies in Mechanical Circulatory Support

April 7-8, 2014

Convening at the Loews Coronado Bay Resort, Coronado, CA, USA

ISHLT Academy: Masters Course in Mechanical Circulatory Support

April 7-8, 2014

Convening at the Loews Coronado Bay Resort, Coronado, CA, USA

IN THIS BOOKLET:

Annual Meeting Call for Abstracts

Annual Meeting Schedule at a Glance

Annual Meeting Preliminary Scientific Program

ISHLT Academy Scientific Programs

Registration and Housing Forms

IMPORTANT: The 2014 Annual Meeting will begin on
Thursday rather than on the usual Wednesday and will
conclude on Sunday rather than on the usual Saturday.

Dear Colleague:

On behalf of Allan Glanville, MD, President of the International Society for Heart and Lung Transplantation, the Board of Directors and the 2014 Scientific Program Committee, I have the honor of inviting you to attend the Society's 34th Annual Meeting and Scientific Sessions to be held April 10-14, 2014 in San Diego.

We hope to build on the monumental 2013 Montreal meeting, the best attended meeting in the society's history. While this year's meeting has been shifted to open Thursday and close on Sunday, the format of the San Diego meeting will be similar to previous meetings, beginning with **pre-meeting symposia** Thursday morning and closing mid-day Sunday. **Please make note of this scheduling change when making your travel arrangements.** Sunrise Symposia and leading edge integrated scientific and clinically-oriented sessions are on the agenda and promise to be immediately applicable to your practice in the management of end-stage heart and lung failure patients.

The meeting will be held at the Manchester Grand Hyatt, which is ideally situated on San Diego Bay, between the San Diego Convention Center and the city's popular Seaport Village. The hotel offers a spectacular waterfront resort-like setting, complete with shopping, dining and entertainment venues that can be found steps away in the Gaslamp Quarter. On Saturday, the President's Cocktail Reception will be held poolside at the Manchester Grand Hyatt pool.

The opening plenary session focuses on cutting edge science related to personalizing approaches to patient care, including how "Digitizing Humans Changes the Future of Medicine." A later plenary focusing on the changing landscape of thoracic organ donors will include cutting edge information from ongoing trials of DCD transplants and will feature Nobel Laureate Dr. Al Roth discussing the ethics and economics of organ allocation policy. Finally the closing plenary embodies the theme of the comprehensive approach to improving care for all patients, and will include consensus statements, as well as featured lectures on caregiver burden, improving HLA compatibility, and a spirited debate on therapies for secondary PH.

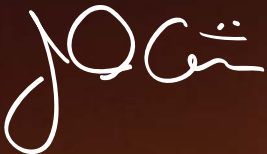
The majority of the meeting will be devoted to submitted content. In anticipation of your contribution of high quality, novel scientific work, we have set aside 8 series of 6 concurrently running oral sessions to showcase the highest scoring abstracts. Mini-oral poster sessions and general poster sessions are planned for the best of the remainder; all poster sessions will be moderated to highlight the valuable scientific work presented.

As in the past, abstracts will only be accepted on-line. A link to the abstract submission website is available on the annual meeting page of the ISHLT website. **The abstract submission deadline is November 15, 2013 at 11:59 pm Eastern Standard (North America) Time.**

We also particularly encourage the submission of work by your trainees and young investigators; the best of which will continue to be highlighted in the Caves' Award competition and featured abstracts and posters.

I look forward to reviewing your abstract submissions and welcoming you to sunny San Diego for the 34th ISHLT Annual Meeting and Scientific Sessions!

With best regards,

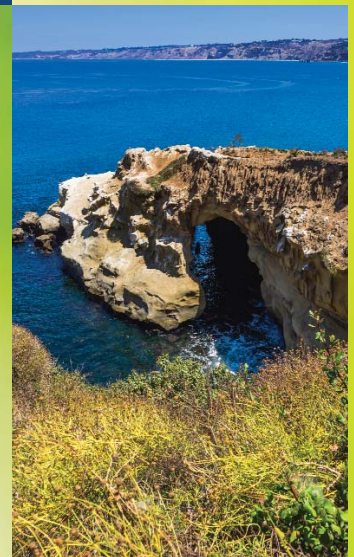


Jason Christie, MD
ISHLT 34th Annual Meeting
Scientific Program Chair



ISHLT CALL FOR ABSTRACTS

INTERNATIONAL
SOCIETY FOR
HEART AND LUNG
TRANSPLANTATION
**34th Annual
Meeting and
Scientific
Sessions**



Abstract Technical Support:

For technical support of electronic submission, contact:

Monday-Friday, 7:00 am – 6:00 pm, CST (USA)

Phone: 507-403-2305

Email: support@abstractsonline.com

**Abstract
Submission
Deadline:
November 15
11:59 PM, EST**

**Abstract
Submission
Site:
www.ishlt.org**

Abstract Submission Guidelines:

■ **1.** The Abstract Submission System is now live on the ISHLT web site (www.isHLT.org). The deadline for receipt of abstracts is November 15, 2013.

■ **2.** You may submit your abstract in one of the following MAIN categories. Within each category you will have one or more subcategories to choose from.

- **Basic Science (BSI)**
- **Donor Management/Organ Allocation (DMD)**
- **Adult Heart Failure (HF)**
- **Adult Heart Transplantation (HTX)**
- **Infectious Diseases (ID)**
- **Adult Lung Failure (LF)**
- **Adult Lung Transplantation (LTX)**
- **Adult Mechanical Circulatory Support (MCS)**
- **Nursing, Allied Health Social Science (NNSAH)**
- **Pathology (PATH)**
- **Pediatrics (PEDS)**
- **Public Policy, Economics, Ethics, Quality of Life (PEEQ)**
- **Pharmacology (PHARM)**
- **Pulmonary Hypertension (PH)**
- **Junior Faculty Clinical Case Reports (CASE)**
- **Late Breaking Clinical Science (LBCS)**

- **3.** Abstract content should include:
- i. Brief statement of purpose of the study (goal or hypothesis being tested)
 - ii. Statement of methods and procedures used
 - iii. Summary of results, presented in sufficient detail to support the conclusion
 - iv. Conclusion

■ **4. Special Abstract Categories**

There are two special abstract categories: Junior Faculty Clinical Case Reports and Late Breaking Clinical Science.

a. Junior Faculty Clinical Case Reports

– Junior Faculty may submit case reports; the best scored reports will be selected for oral presentation in an oral session. Other well-scored reports will be presented in a separate poster session.

Case Report abstract content should include:

1. Introduction
2. Case Report
3. Summary

b. Late Breaking Clinical Science

– To assure that truly “late breaking” information is included in the meeting, authors may submit abstracts to this category describing trials and studies that are not yet completed as of November 15, 2013. **Studies which have results and conclusions by November 15, 2013 may not submit their abstracts in the late breaking clinical science category.**

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

Final analysis of the study results and conclusions **MUST** be submitted to Lisa Edwards at the ISHLT headquarters by March 10, 2014. This analysis will be seen only by a closed panel to ensure complete

confidentiality of the results prior to presentation. The program committee chair in consultation with the program committee reserves the final decision regarding scheduling of Late Breaking abstracts. An abstract accepted for presentation cannot be withdrawn from presentation simply because the results do not conform to expectations.

Please use the standard online abstract submission process to submit an abstract in this category. The abstract submitted for the November 15th deadline will serve as a placeholder for the final abstract.

Late Breaking Clinical Science abstract content should include:

1. Title of the study
2. Sponsor of the trial, if any
3. Completion date of the trial
4. Summary of objectives
5. Methods
6. Endpoints

NOTE: Abstracts for the meeting will be published in the April 2014 Supplement to the Journal of Heart and Lung Transplantation. If you wish to have your revised study results published as an abstract in this supplement, ISHLT **MUST** receive a revised version of the abstract reflecting the interim study findings **NO LATER THAN** January 5, 2014.

- **5.** Accepted abstracts will be published in the April 2014 supplement to the Journal of Heart and Lung Transplantation.
- **6.** Authors whose papers are selected for presentation at the meeting will be notified in January 2014.
- **7.** Any abstract author who agrees to present his/her abstract must present the accepted abstract and must present only the material described in the abstract. Any presenter who does not present his/her accepted oral or poster abstract as agreed, withdraw it in a timely manner, or

arrange for it to be presented by a co-author, will be appropriately sanctioned from future participation in ISHLT meetings by the Society's Board of Directors.

- **8.** Submission of an abstract signifies that the author(s) have given permission for the abstract to be reproduced in print in the *Journal of Heart and Lung Transplantation* and in digital formats of ISHLT's choosing for distribution and/or sale by ISHLT.
- **9. Previous Presentation of Abstracts:** Abstracts will not be considered for presentation if they will be published as an article prior to April 10, 2014.
- **10. Informed Consent:** Submission of an abstract signifies that the author(s) agree and confirm that their study involving human subjects adheres to the principles of the Declaration of Helsinki of the World Medical Association, adheres to the principles of the ISHLT Statement on Transplant Ethics (available on the ISHLT web site), and meets the informed consent requirements of the institution and country in which the study was performed.
- **11. Use of Animals:** Submission of an abstract signifies that the author(s) agree and confirm that their study involving the use of animals conforms fully with current NIH, EU, or analogous national guidelines for the care and use of animals.
- **12. Pharmaceutical Funding:** If the research was partially or fully funded by a proprietary organization (i.e., a pharmaceutical or device manufacturer), this information and the name of the funding company must be stated at the end of the abstract.
- **13.** For purposes of blind scoring, institutional names must be omitted whenever possible in the title and body of the abstract.

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

- **15. Unlabeled and Unapproved Uses:** Abstracts that include information in whole or in part related to non-FDA approved uses for drug products and/or devices must clearly state the unlabeled indications or the investigational nature of their proposed uses in the body of the abstract.

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

- **17. Commercial Influence:** Abstract presenters are not permitted to receive any travel, hotel, or registration stipends or other financial assistance related to the ISHLT 2014 Annual Meeting from any company whose products or class of products are discussed in the abstract. Abstract authors may not receive direct input regarding the content of the abstract/presentation from any company whose products or class of products are discussed in the abstract.

- **18. Rules for Employees of Commercial Entities: Employees of a commercial interest are gen-**

erally not permitted to serve as the first author, presenting author, senior author, or primary author of an abstract. In rare circumstances where the work does not involve any academic collaborators, exceptions to this policy MAY be considered on a case by case basis. After all abstracts have been selected for presentation, ISHLT will initiate this process by communicating with the primary author of any abstracts which list an industry employee as first author, presenting author, senior author, or primary author of an abstract.

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

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



Definitions

Financial Relationships:

Financial relationships are those relationships in which the individual benefits by receiving a salary, royalty, intellectual property rights, consulting fees, stipends, honoraria, gifts, ownership interest (e.g., stocks, stock options or other ownership interest, excluding diversified mutual funds), or other financial benefit. Financial benefits are usually associated with roles such as employment, management position, independent contractor (including contracted research), consulting, speaking and teaching, membership on advisory committees or review panels, board membership, and other activities from which remuneration is

received or expected, **including subsidized travel, hotel, and registration fees for any activities.** ‘Contracted research’ refers to research funding in which an institution receives a grant and manages the grant funds and an individual is the principal or named investigator on the grant at that institution.

Relevant Financial Relationships:

Relevant financial relationships are those in which an individual (including the individual’s spouse/domestic partner/business partner) has or has had any of the above mentioned financial relationships, in any amount, **occurring presently or**

within the last 12 months with a commercial entity producing health care goods or services

Conflict of Interest:

Circumstances create a potential conflict of interest when an individual has an opportunity to affect educational content related to the products or services of a commercial interest with which he/she has a financial relationship.

Commercial Entity: Any proprietary entity developing, producing, marketing, or selling health care goods and services, with the exception of non-profit or government organizations.



PHILIP K. CAVES AWARD

This award is named for Philip K. Caves, who developed and pioneered the technique of transvenous endomyocardial biopsy for use in the monitoring of cardiac graft tolerance. Established in 1982 to encourage and reward original research in transplantation performed by residents, fellows, and graduate students, this \$1,000 award is bestowed annually on the resident/fellow/student whose oral presentation is judged to be the best at the Annual Scientific Meeting. Residents/Fellows who are first authors and presenters may elect to have their abstracts considered for the Caves Award. Candidates for the Caves Award must be current members of the Society or be working under a current member of the Society. The online submission process includes an area to indicate that you wish to have your abstract considered for this award. The award will be presented at the Society's Plenary Session. Anyone who has previously won the award is not eligible to apply.

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

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

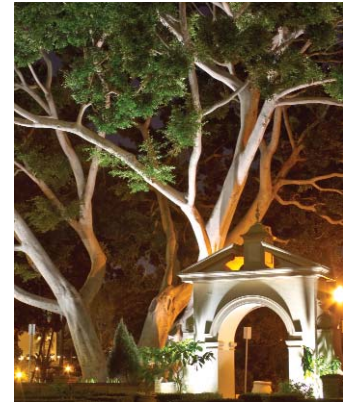


BRANISLAV RADOVANCEVIC MEMORIAL BEST MCS ABSTRACT AWARD

Established in 2009, the Branislav Radovancevic Memorial Best MCS Abstract Award is a \$2500 travel award to the ISHLT Annual Meeting designed to encourage submission of high quality abstracts in the mechanical circulatory support category, particularly from individuals in emerging countries. The goal of the award is to encourage scholarly clinical work in MCS in emerging countries and to facilitate scientific exchange regarding MCS. Dr. Radovancevic, a long-time member of ISHLT, was devoted to the encouragement of scientific collaboration with Eastern European physicians and scientists. This award is designed to encourage others to continue his efforts to develop MCS and provide mentorship to others. Therefore, priority will be given to researchers and clinicians who are residents or fellows, and/or who are from emerging countries. Individuals who are first authors and presenters may elect to have their abstracts considered for this award. Candidates for the award must be current members of the Society. The online submission process includes an area to indicate that you wish to have your abstract considered for this award. The award will be presented at the Society's Plenary Session. Anyone who has previously won the award is not eligible to apply.







ABOUT ISHLT

The International Society for Heart and Lung Transplantation (ISHLT) is a not-for-profit, multidisciplinary, professional organization dedicated to improving the care of patients with advanced heart or lung disease through transplantation, mechanical support and innovative therapies via research, education and advocacy.

ISHLT was created in 1981 at a small gathering of about 15 cardiologists and cardiac surgeons. Today we have over 2700 members from over 45 countries, representing over 15 different professional disciplines involved in the management and treatment of end-stage heart and lung disease. This multinational, multidisciplinary mix is one of the biggest strengths of the Society. It brings greater breadth and depth to our educational offerings and provides an exceptional environment for networking and exchanging information on an informal basis.

Our members include anesthesiologists, basic scientists, cardiologists, cardiothoracic surgeons, ethicists, immunologists, nurses, pathologists, perfusionists, pharmacists, pulmonologists, tissue engineers, transplant coordinators and infectious disease specialists. Despite their differing specializations, all ISHLT members share a common dedication to the advancement of the science and treatment of end-stage heart and lung disease.

THE PURPOSES OF THE SOCIETY ARE:

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.

ABOUT SAN DIEGO

Bordered by the Pacific Ocean to the west, the Anza-Borrego Desert and the Laguna Mountains to the east and Mexico to the south, the diverse neighborhoods of San Diego are spread out over 4,200 square miles, offering endless opportunities for exploration and activities. Spend a day relaxing in one of the many beach communities, then hiking in the east San Diego County mountains the next. Explore the urban neighborhoods of San Diego's downtown, from the iconic Gaslamp District to the eclectic community of Hillcrest. Visit the quaint and charming island town of Coronado or the picturesque village of La Jolla. San Diego's regions are so unique and diverse; there are plenty of options to discover something new each time you visit.

The heart of every city lives in its downtown, and San Diego is no exception. Located only minutes from the airport, San Diego's thriving downtown districts, including the historic Gaslamp Quarter, offer a plethora of options for accommodations, activities, dining, shopping and cultural attractions, all within walkable city blocks. Take a stroll along the Embarcadero and grab lunch at Seaport Village before you climb aboard the USS Midway Aircraft Carrier Museum. If a moving sea vessel is more your flavor, hop on a harbor cruise or sailing excursion. Catch the trolley for a quick ride to Balboa Park and the world-famous San Diego Zoo or Old Town San Diego. And when the sun goes down, the city's Gaslamp Quarter comes alive as it takes center stage in San Diego's happening nightlife scene.

The beating heart of San Diego's downtown rests in the Gaslamp Quarter, comprised of 16 1/2 square blocks in the city's central core. With a colorful array of restaurants, nightclubs, art galleries and boutiques, you will find plenty of things to do on foot. During the day, the Gaslamp Quarter is a great place for families. Visit the New Children's Museum or explore the historic Victorian architecture preserved throughout the district. Shop at Horton Plaza or catch the Trolley to Balboa Park and the world-famous San Diego Zoo or Old Town. As night falls, the quarter transforms into a veritable adult playground as the sophisticated nightclub scene comes to life. From award-winning restaurant to happening dance clubs, jazz and rooftop bars, you'll find it in the Gaslamp Quarter.

To learn more about San Diego,
visit www.sandiego.org







ANNUAL MEETING GENERAL INFORMATION

Meeting Location

The ISHLT 34th Annual Meeting and Scientific Sessions will be held at the Manchester Grand Hyatt Hotel in San Diego. The hotel is located on San Diego Bay, between the San Diego Convention Center and the city's popular Seaport Village. The hotel offers a spectacular waterfront resort-like setting, with shopping, dining, and entertainment venues that can be found just steps away in the Gaslamp Quarter.

Registration

Registration for the meeting must be made via the ISHLT web site or via the Official ISHLT Registration Form. Online registration is strongly encouraged. A \$100 discount off the registration fee is offered to those who register on or before February 24, 2014. Individuals who have not registered by March 3, 2014 must register on-site at the meeting. A confirmation letter will be emailed to all individuals who register by March 3, 2014. An Official ISHLT Registration Form is included in this booklet and may be obtained from the Society Headquarters (972-490-9495) and from our web site (www.isHLT.org). The registration fee includes admittance into the Pre-Meeting Symposia, Sunrise Symposia, Plenary Sessions, Concurrent Sessions, Mini Oral Sessions, Poster Sessions, and the Exhibit

Hall. The registration fee also includes coffee breaks each day, the Exhibit Hall Opening Reception on Thursday evening, and one ticket to the President's Cocktail Reception on Saturday evening. Reasonably priced boxed lunches may be purchased in advance for the convenience of those who wish. **Box lunches MUST be purchased in advance via the pre-registration process.**

Hotel Reservations

ISHLT has arranged a large block of sleeping rooms at the Manchester Grand Hyatt Hotel. You must make your hotel reservations using the Manchester Grand Hyatt direct link in order to receive the ISHLT group rate. You will find rates and online booking access information within this booklet and online at www.isHLT.org. Rooms are limited so please book early.

Group Reservations: Any request for 10 or more rooms must be submitted in writing to sanrs-reservations@hyatt.com and must be approved by ISHLT.

A credit card number is mandatory to reserve a block of rooms. Hotel reservations must be made no later than March 18, 2014 in order to secure the ISHLT rate.

IMPORTANT NOTE:

Due to VERY limited availability, hotel rooms on the nights of Monday and Tuesday, April 7-8, **we are limiting reservations for these nights to those individuals who are registered for one of the three Wednesday Academy courses.** If you are registered for a Wednesday Academy, please book your hotel reservation for arrival on Wednesday.

Once you have made your hotel reservation and completed your Academy registration, please send an email to phyllis.glenn@ishlt.org to request that your hotel reservation be extended to arrive on either Monday or Tuesday. Please include your hotel reservation confirmation number in the email. ISHLT staff will then contact the hotel to make this change and the hotel will send you confirmation.





PRESIDENT'S COCKTAIL RECEPTION



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 scientific session registration fees.

Additional tickets may be purchased.



As always, you can expect plenty of food, drink, music, and friends.

SATURIDAY



CONTINUING EDUCATION INFORMATION

ACCME Accreditation Statement

The International Society for Heart and Lung Transplantation (ISHLT) is accredited by the Accreditation Council for Continuing Medical Education (ACCME) to provide continuing medical education for physicians and allied health professionals.

CME Credit Designation Statement

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

ABTC Accreditation

Continuing Education Points for Transplant Certification (CEPTC) will be applied for.

ACEP Accreditation

Continuing Pharmacy Education Credits (CPE) will be applied for.

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, pharmacists, nurses, transplant coordinators and other allied health and social science professionals 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.

ANNUAL MEETING

SCIENTIFIC PROGRAM COMMITTEE

◆ Symposium Planning Committee ★ Abstract Selection Committee

- ◆ ★ Jason Christie, MD, MS, Philadelphia, PA, USA, 2014 Program Chair
- ◆ ★ Allan R. Glanville, MD, FRACP, Sydney, Australia, 2013 President and Past Program Chair
- ◆ ★ Samantha Anthony, PhD, MSW, Toronto, Canada
- ◆ ★ John A. Belperio, MD, Los Angeles, CA, USA
- ◆ ★ Christian Benden, MD, Zurich, Switzerland
- ◆ ★ Gerald J. Berry, MD, Stanford, CA, USA
- ◆ ★ Emma Birks, MBBS, PhD, BSc, FRCP, Louisville, KY, USA
- ◆ ★ Kevin Carney, RN, CCTC, Philadelphia, PA, USA
- ◆ ★ Daniel Chambers, MBBS, MD, Brisbane, Australia
- ◆ ★ Tamara E. Claridge, PharmD, Philadelphia, PA, USA
- ◆ ★ Paul A. Corris, MB, FRCP, Newcastle upon Tyne, UK
- ◆ ★ Jennifer Cowger, MD, MS, Ann Arbor, MI, USA
- ◆ ★ Maria G. Crespo-Leiro, MD, La Coruna, Spain
- ◆ ★ Goran Dellgren, MD, Goteborg, Sweden
- ◆ Marc De Perrot, MD, MSc, Toronto, ON, Canada
- ◆ ★ Tobias Deuse, MD, PhD, Hamburg, Germany
- ◆ ★ Esmé Dijke, PhD, Edmonton, Canada
- ◆ ★ Fabienne Dobbels, MSc, PhD, Leuven, Belgium
- ◆ ★ Howard J. Eisen, MD, Philadelphia, PA, USA
- ◆ ★ David S. Feldman, MD, PhD, Minneapolis, MN, USA
- ◆ ★ Cynthia Gries, MD, MSc, Pittsburgh, PA, USA
- ◆ ★ Denis Hadjiliadis, MD, Philadelphia, PA, USA
- ◆ ★ David Lederer, MD, MS, New York, NY, USA
- ◆ ★ Stanley I. Martin, MD, Columbus, OH, USA
- ◆ ★ Mandeep R. Mehra, MD, MBBS, FACC, FACP, Boston, MA, USA
- ◆ ★ Myung H. Park, MD, Baltimore, MD, USA
- ◆ ★ Ashish S. Shah, MD, Baltimore, MD, USA
- ◆ ★ Pali D. Shah, MD, Baltimore, MD, USA
- ◆ ★ Tajinder P. Singh, MD, Boston, MA, USA
- ◆ ★ Amparo Sole, MD, PhD, Valencia, Spain
- ◆ ★ Martin Strueber, MD, Leipzig, Germany
- ◆ ★ Josef Stehlik, MD, PhD, Salt Lake City, UT, USA
- ◆ ★ Carmela D. Tan, Cleveland, OH, USA
- ◆ ★ Fernando Torres, MD, Dallas, TX, USA
- ◆ ★ Walter Uber, PharmD, Charleston, SC, USA
- ◆ ★ Geert M. Verleden, MD, PhD, Leuven, Belgium
- ◆ ★ Richard D. Weisel, MD, FRSCS, Toronto, Canada
- ◆ ★ Lori J. West, MD, DPhil, Edmonton, Canada
- ◆ ★ Christopher H. Wigfield, MD, FRCS(C/Th), Chicago, IL, USA
- ◆ ★ Michal Zakliczynski, MD, Zabrze, Poland
- ◆ ★ Martin R. Zamora, MD, Aurora, CO, USA
- ◆ ★ Marian Zembala, MD, PhD, Tarnowskie Góry, Poland
- ◆ ★ Andreas O. Zuckermann, MD, Vienna, Austria

ACRONYMS

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:

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

HIGHLIGHTS

of the Annual
Meeting and
Scientific
Symposia



BASIC SCIENCE

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 sensitisation hands one is often dealt to improve long-term outcomes.



HEART FAILURE AND 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 op-

tion 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. With this line-up of Symposia, we know that we will see you in San Diego (at the ISHLT Annual Meeting and not at Pacific Beach or the Nordstrom's near the hotel).

INFECTIOUS 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 Symposia.



sium, **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. We hope to see you all in San Diego!

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**





patients and the treatment options for **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 NNSAH Council on **shared care and physician outreach**; a session developed with the PED and JFT Coun-

cils 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 ap-

proaches 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! We look forward to seeing you all in San Diego!

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 cellu-

lar 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, the second session, developed in conjunction with the NNSAH 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. Lastly, **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.



JUNIOR FACULTY AND TRAINEES

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!



ANNUAL MEETING AND ISHLT ACADEMY

SCHEDULE AT A GLANCE

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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 web site (www.isHLT.org) for updates. The ISHLT 2014 mobile app, which will be available approximately 2 weeks prior to the Annual Meeting, and the Final Program, which is distributed on site, will reflect the latest session schedule and room assignments.

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MONDAY, APRIL 7, 2014

1:00 PM – 6:30 PM

ISHLT ACADEMY: Core Competencies In Mechanical Circulatory Support

(Convening at the Loews Coronado Bay Resort in Coronado, CA, USA)

ISHLT ACADEMY: Masters Course In Mechanical Circulatory Support

(Convening at the Loews Coronado Bay Resort in Coronado, CA, USA)

TUESDAY, APRIL 8, 2014

7:00 AM – 6:30 PM

ISHLT ACADEMY: Core Competencies In Mechanical Circulatory Support

(Convening at the Loews Coronado Bay Resort in Coronado, CA, USA)

ISHLT ACADEMY: Masters Course In Mechanical Circulatory Support

(Convening at the Loews Coronado Bay Resort in Coronado, CA, USA)

WEDNESDAY, APRIL 9, 2014

7:00 AM – 6:00 PM

ISHLT ACADEMY: Core Competencies In Basic Science And Translational Research

ISHLT ACADEMY: Core Competencies In Heart Failure And Transplant Medicine

ISHLT ACADEMY: Core Competencies In Nursing, Health Science And Allied Health

8:15 AM – 4:00 PM

ISHLT BOARD OF DIRECTORS MEETING

2:00 PM – 4:00 PM

STANDARDS AND GUIDELINES COMMITTEE MEETING

3:00 PM – 4:30 PM

TRANSPLANT REGISTRY STEERING COMMITTEE MEETING

4:00 PM – 6:00 PM

GRANTS AND AWARDS COMMITTEE MEETING

4:30 PM – 6:00 PM

REGISTRY AND DATABASES COMMITTEE MEETING

THURSDAY, APRIL 10, 2014

8:00 AM – 10:00 AM

PRE-MEETING SYMPOSIUM 1: (MCS, HF, HTX)
Preventing VAD Complications

PRE-MEETING SYMPOSIUM 2: (PH, LF, LTX)

Group 3 Pulmonary Hypertension... You Can't Ignore it any Longer

PRE-MEETING SYMPOSIUM 3: (DMD, HF, HTX, MCS)

Ex-Vivo Donor Heart Support: Expanding Availability and Optimising Function

PRE-MEETING SYMPOSIUM 4: (LF, LTX, ID)

Lung Transplant Candidate Selection: Have We Pushed the Envelope too Far?

PRE-MEETING SYMPOSIUM 5: (LF, LTX, BSTR)

Lung Transplantation: Decoding Early Engraftment Events that Control Survival

PRE-MEETING SYMPOSIUM 6:

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

Joint ISHLT/IPTA Symposium: Here They Come: Preparing Pediatric Patients for Transition to Adult Care

10:00 AM – 10:15 AM

COFFEE BREAK / VIEW POSTERS

10:15 AM – 12:15 PM

PRE-MEETING SYMPOSIUM 7: (MCS, PHARM, HF, HTX)
Making Bloody Sense of Anticoagulation

PRE-MEETING SYMPOSIUM 8: (PH, HF, HTX, LF, LTX)

Chronic Thromboembolic Pulmonary Hypertension: Busting the Clot

PRE-MEETING SYMPOSIUM 9: (ID, PHARM, HF, HTX, LF, LTX)

Invasive Fungal Infections Among Cardiothoracic Transplant Recipients: Consensus Guidelines and Recommendations from the ISHLT Fungal Expert Panel

PRE-MEETING SYMPOSIUM 10: (LF, LTX, PATH)

The Many Faces of Chronic Lung Allograft Dysfunction

PRE-MEETING SYMPOSIUM 11: (BSTR, HF, HTX)

Crossing Clinical Barriers on the Wings of Science: Evolution of ABO Incompatible Heart Transplantation

PRE-MEETING SYMPOSIUM 12: (MCS, HF, HTX)

To VAD or to Transplant?

12:15 PM – 2:00 PM

LUNCH BREAK

JUNIOR FACULTY MENTOR LUNCH

I2C2 COMMITTEE MEETING

EDUCATION COMMITTEE MEETING

12:15 PM – 1:15 PM

DCD MINI-REGISTRY STEERING COMMITTEE MEETING

12:30 PM – 1:30 PM

PHARMACY AND PHARMACOLOGY SCIENTIFIC COUNCIL MEETING

NURSING, HEALTH SCIENCE, AND ALLIED HEALTH SCIENTIFIC COUNCIL MEETING

BASIC SCIENCE AND TRANSLATIONAL RESEARCH SCIENTIFIC COUNCIL MEETING

1:15 PM – 2:00 PM

REGISTRY COMMITTEE MEETING

2:00 PM – 4:00 PM

PRE-MEETING SYMPOSIUM 13: (MCS, BSTR, HF, HTX)
Drilling Down on Myocardial Recovery – Basics and Clinical

PRE-MEETING SYMPOSIUM 14: (PH, HF, HTX, LF, LTX)

Treating All Stages of Severe Pulmonary Hypertension: Are We Getting it Right?

PRE-MEETING SYMPOSIUM 15: (ID, LF, LTX, HF, HTX, PHARM)
Bad Bugs? Optimize the Drugs!

PRE-MEETING SYMPOSIUM 16: (DMD, LF, LTX)
Ex-Vivo Lung Perfusion (EVLPE): Evolving Strategy for Improved Donor Lung Management

PRE-MEETING SYMPOSIUM 17: (MCS, HF, HTX, LF, LTX, NHSAH) *Frailty – How Do We Assess This Physiologic Variable and Does it Represent a Contraindication to Transplant/ Mechanical Circulatory Support?*

PRE-MEETING SYMPOSIUM 18: (PEDS, MCS, HF, HTX)
Developing a Pediatric VAD Program

4:00 PM – 4:15 PM
COFFEE BREAK / VIEW POSTERS

4:15 PM – 6:15 PM
PRE-MEETING SYMPOSIUM 19: (MCS, HF, HTX)
The Times They Are A-Changing

PRE-MEETING SYMPOSIUM 20: (PH, HF, HTX)
Pulmonary Hypertension in Left Heart Disease (WHO Group 2 PH): ISHLT and World Symposium on Pulmonary Hypertension (WSPH) Consensus Initiative

PRE-MEETING SYMPOSIUM 21: (HF, HTX, MCS, PHARM, BSTR)
The “Sexiest” Controversies in End Stage Heart Failure and Heart Transplantation

PRE-MEETING SYMPOSIUM 22: (DMD, LF, LTX)
Global Perspectives on Donation after Circulatory Determination of Death in Lung Transplantation

PRE-MEETING SYMPOSIUM 23: (ID, PEDS, LF, LTX, PHARM)
State of the Art Update on Infectious Disease Issues in Pediatric Thoracic Transplantation

PRE-MEETING SYMPOSIUM 24: (BSTR, LF, LTX)
Lung Transplant Immunology 201-Plus: Recent Advances

6:15 PM – 7:15 PM
EXHIBIT HALL OPENING RECEPTION / POSTER VIEWING

FRIDAY, APRIL 11, 2014

7:00 AM – 8:00 AM
SUNRISE SYMPOSIUM 1: (MCS, HF, HTX)
Building for the Future

SUNRISE SYMPOSIUM 2: (PH, HF, HTX, LF, LTX)
Under too Much Pressure: Challenging Cases in Pulmonary Hypertension Management

SUNRISE SYMPOSIUM 3: (HF, HTX, MCS, BSTR)
Endothelial Dysfunction in Advanced Heart Failure, Mechanical Circulatory Support, and Heart Transplant: It's a Pipe and Pump Issue

SUNRISE SYMPOSIUM 4: (LF, LTX)
Controversies in Lung Transplantation

SUNRISE SYMPOSIUM 5: (ID, PHARM, LF, LTX, HF, HTX)
What You Always Wanted to Know About LISH (Laboratory Tests, Infectious Agents, Special Situations, Hidden Infections) but Were Afraid to Ask

8:00 AM – 10:00 AM
OPENING PLENARY SESSION

10:00 AM – 4:00 PM
EXHIBITS OPEN

10:00 AM – 6:30 PM
POSTERS OPEN

10:00 AM – 10:30 AM
COFFEE BREAK / VISIT EXHIBITS / VIEW POSTERS

10:30 AM – NOON
CONCURRENT SYMPOSIUM 25: (PHARM, HF, HTX, LF, LTX, PH)
A Lifecycle Journey in Pulmonary Hypertension

CONCURRENT ABSTRACT SESSIONS

NOON – 1:00 PM
JUNIOR FACULTY AND TRAINEE COUNCIL MEETING

NOON – 2:00 PM
LUNCH BREAK
JHLT EDITORIAL BOARD LUNCH MEETING
COUNCIL CHAIRS' LUNCH MEETING

1:00 PM – 2:00 PM
2015 ANNUAL MEETING SYMPOSIUM PLANNING COMMITTEE MEETING

2:00 PM – 3:30 PM
CONCURRENT SYMPOSIUM 26: (ID, MCS)
Infections in Mechanical Circulatory Support Devices – Understanding and Conquering the Beast

CONCURRENT ABSTRACT SESSIONS

3:30 PM – 4:00 PM
COFFEE BREAK/VISIT EXHIBITS/ VIEW POSTERS

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

CONCURRENT ABSTRACT SESSIONS

5:30 PM – 6:30 PM
MINI ORAL POSTER ABSTRACT SESSIONS

5:30 PM – 6:30 PM
GENERAL POSTER VIEWING

6:30 PM – 8:00 PM
COUNCIL AND COMMITTEE REPORTS TO THE BOARD AND MEMBERSHIP

SATURDAY, APRIL 12, 2014

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

SUNRISE SYMPOSIUM 7: (PH, PHARM, HF, LF, LTX, NHSAH) *The Effects of Prostaglandin Therapy in Pulmonary Arterial Hypertension: The Seen and Unseen Risk/Benefit Profile*

SUNRISE SYMPOSIUM 8: (HF, HTX)

Exercise Training in Heart Transplantation

SUNRISE SYMPOSIUM 9: (ID, LTX, LF, PHARM)

CMV Infection in Lung Transplant Recipients: Are We Ready for Personalized Medicine?

SUNRISE SYMPOSIUM 10: (BSTR, PATH)

Exploring Interactions Between Cellular and Humoral Immunity in Cardiac Allograft Rejection

8:00 AM – 10:00 AM

PLENARY SESSION

10:00 AM – 10:30 AM

COFFEE BREAK / VISIT EXHIBITS / VIEW POSTERS

ANNUAL BUSINESS MEETING

10:00 AM – 4:00 PM

EXHIBIT HALL OPEN

10:00 AM – 6:30 PM

POSTERS OPEN

10:30 AM – NOON

CONCURRENT SYMPOSIUM 28: (ALL) JHLT at ISHLT:
The Year in Capsule

CONCURRENT ABSTRACT SESSIONS

NOON – 2:00 PM

LUNCH BREAK

12:05 PM – 12:55 PM

MECHANICAL CIRCULATORY SUPPORT SCIENTIFIC COUNCIL MEETING

PEDIATRIC TRANSPLANTATION SCIENTIFIC COUNCIL MEETING

PULMONARY HYPERTENSION SCIENTIFIC COUNCIL MEETING

INFECTIOUS DISEASES SCIENTIFIC COUNCIL MEETING

PATHOLOGY SCIENTIFIC COUNCIL MEETING

1:00 PM – 1:55 PM

HEART FAILURE AND TRANSPLANT MEDICINE SCIENTIFIC COUNCIL MEETING

PULMONARY TRANSPLANTATION SCIENTIFIC COUNCIL MEETING

PEDIATRIC HEART FAILURE WORKFORCE MEETING

PEDIATRIC LUNG FAILURE WORKFORCE MEETING

2:00 PM – 3:30 PM

CONCURRENT ABSTRACT SESSIONS

CONCURRENT SYMPOSIUM 29: (HF, HTX, PATH, PHARM)

Approach to the Highly Sensitized Patient Awaiting Heart Transplantation

3:30 PM – 4:00 PM

COFFEE BREAK / VISIT EXHIBITS / VIEW POSTERS

4:00 PM – 5:30 PM

CONCURRENT ABSTRACT SESSIONS

5:30 PM – 6:30 PM

MINI ORAL POSTER ABSTRACT SESSIONS

5:30 PM – 6:30 PM

GENERAL POSTER VIEWING

7:30 PM – 9:00 PM

PRESIDENT'S COCKTAIL RECEPTION

SUNDAY, APRIL 13, 2014

7:00 AM – 8:00 AM

SUNRISE SYMPOSIUM 11: (NNSAH, MCS)

VAD Teams Working Across Different Countries: How to Do It

SUNRISE SYMPOSIUM 12: (PH, HF, LF)

Swan Songs and Controversies in Hemodynamics

SUNRISE SYMPOSIUM 13: (ALL)

Lab Methods 101: What Everyone Needs to Know to Read Transplant Papers

SUNRISE SYMPOSIUM 14: (PEDS, LF, LTX)

Why Not Infant Lung Transplantation?

SUNRISE SYMPOSIUM 15: (DMD, ID, LF, LTX, HF, HTX)

High-Risk Donor: Extending our Criteria in Times of Organ Shortage

7:00 AM – 9:30 AM

ISHLT BOARD of DIRECTORS MEETING

8:00 AM – 9:15 AM

CONCURRENT ABSTRACT SESSIONS

9:15 AM – 9:30 AM

COFFEE BREAK

9:30 AM – 11:45 AM

PLENARY SESSION

12:00 PM – 1:15 PM

CONCURRENT ABSTRACT SESSIONS

1:15 PM

ADJOURN

PRELIMINARY PROGRAM TIME TABLE 34TH ANNUAL MEETING SCHEDULE & SCIENTIFIC SESSIONS

S-12	Elizabeth	Douglas D	Douglas C	Douglas B	Douglas A	Manchester GHI
7:00 AM		SUNRISE SYMPOSIUM 6 MCS, HE, HIX The Aortic Valve	SUNRISE SYMPOSIUM 7 PH, PHARMO, HE, LF, LIX, NHSAB, Prostaglandin Therapy in PAH – Risk/Bnft	SUNRISE SYMPOSIUM 8 HE, HIX Exercise Training in Heart Transplantation	SUNRISE SYMPOSIUM 9 ID, LIX, LF, PHARMO Personalized Medicine	SUNRISE SYMPOSIUM 10 BSIB, PAIH Cellular/Humoral Immunity in Cardiac Allograft Reject.
8:00 AM	PLENARY SESSION					
10:00 AM	ANNUAL BUSINESS MTG.	BREAK	BREAK	BREAK	BREAK	BREAK
10:30 AM	CONCURRENT SESSION 16	CONCURRENT SYMP 28 JHLT @ ISHLT ALL	CONCURRENT SESSION 17	CONCURRENT SESSION 18	CONCURRENT SESSION 19	CONCURRENT SESSION 20
NOON	LUNCH BREAK	MCS Council Mtg. 12:05 pm – 12:55 pm	PH Council Mtg. 12:05 pm – 12:55 pm	PED Council Mtg. 12:05 pm – 12:55 pm	ID Council Mtg. 12:05 pm – 12:55 pm	PTH Council Mtg. 12:05 pm – 12:55 pm
1:05 PM		HFTXM Council Mtg. 1:00 pm – 1:55 pm	LUNG TX Council Mtg. 1:00 pm – 1:55 pm	PED HF Workforce Mtg. 1:00 pm – 1:55 pm	PED LF Workforce Mtg. 1:00 pm – 1:55 pm	
2:00 PM	CONCURRENT SESSION 21	CONCURRENT SYMP 29 HE, HIX, PAIH, PHARMO	CONCURRENT SESSION 22	CONCURRENT SESSION 23	CONCURRENT SESSION 24	CONCURRENT SESSION 25
3:30 PM	BREAK	BREAK	BREAK	BREAK	BREAK	BREAK
4:00 PM	CONCURRENT SESSION 26	CONCURRENT SESSION 27	CONCURRENT SESSION 28	CONCURRENT SESSION 29	CONCURRENT SESSION 30	CONCURRENT 36 SESSION 31
5:30 PM		Mini Orals 6 5:30 pm – 6:30 pm	Mini Orals 7 5:30 pm – 6:30 pm	Mini Orals 8 5:30 pm – 6:30 pm	Mini Orals 9 5:30 pm – 6:30 pm	Mini Orals 10 5:30 pm – 6:30 pm
6:30 PM						
7:30 PM						
9:00 PM						
PRESIDENT'S COCKTAIL RECEPTION - MANCHESTER GRAND HYATT POOL DECK - 7:30 pm – 9:00 pm						

S-13	Manchester GHI	Edward AB	Edward CD	Gregory AB	Molly AB	Elizabeth F
7:00 AM	SUNRISE SYMPOSIUM 11 NHSAB, MCS VAD Teams Different Countries	SUNRISE SYMPOSIUM 12 PH, HE, LF Swan Songs, Controversies in Hemodynamics	SUNRISE SYMPOSIUM 13 ALL Lab Methods 101 – How to Read Basic Tx Papers	SUNRISE SYMPOSIUM 14 PEDS, LF, LIX Why not Infant Lung TX	SUNRISE SYMPOSIUM 15 DMD, ID, LF, LIX, HE, HIX High Risk Donor – Extending Criteria	ISHLT Board of Directors Mtg. 7:00 am - 9:30 am
8:00 AM	CONCURRENT SESSION 32	CONCURRENT SESSION 33	CONCURRENT SESSION 34	CONCURRENT SESSION 35	CONCURRENT SESSION 36	
9:15 AM	BREAK	BREAK	BREAK	BREAK	BREAK	
9:30 AM	PLENARY SESSION					
11:45 AM	BREAK	BREAK	BREAK	BREAK	BREAK	
12:00 PM	CONCURRENT SESSION 37	CONCURRENT SESSION 38	CONCURRENT SESSION 39	CONCURRENT SESSION 40	CONCURRENT SESSION 41	
1:15 PM						



34TH ANNUAL MEETING

PRELIMINARY SCIENTIFIC PROGRAM

All meetings and activities will take place at the **MANCHESTER GRAND HYATT SAN DIEGO** unless otherwise specified. All papers will be presented in English. Please check the ISHLT web site (www.isHLT.org) for updates. The Final Program, which is distributed on site, will reflect the latest session schedule and room assignments.

8:00 AM - 10:00 AM**PRE-MEETING SYMPOSIUM 1:****Preventing VAD Complications (MCS, HF, HTX)****CHAIRS:** Emma Birks, MBBS, PhD, BSc, FRCP and Martin Strueber, MD

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. We hence suggest a deviation from the typical discussion format whereby panelists and audience weigh in as the case unfolds and the presenter finally describes what was done and why. We suggest 15 min presentations with 9 minute discussions.

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

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

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

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

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

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

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

8:00 AM - 10:00 AM**PRE-MEETING SYMPOSIUM 2:****Group 3 Pulmonary Hypertension... You Can't Ignore It Any Longer (PH, LF, LTX)****CHAIRS:** Oksana A. Shlobin, MD and Raymond L. Benza, MD

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.

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

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

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

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

9:40 AM Panel Discussion

8:00 AM - 10:00 AM**PRE-MEETING SYMPOSIUM 3:****Ex-Vivo Donor Heart Support: Expanding Availability and Optimising Function (DMD, HF, HTX, MCS)****CHAIRS:** Bartley Griffith, MD and Stephan Schueler, MD, PhD, FRCS

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 Strueber, MD, University Heart Centre, Leipzig, Germany

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

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

9:00 AM Functional Evaluation and Pre-transplant Ex-vivo Treatment Options Darren Freed, MD, St. Boniface General Hospital, Winnipeg, MB, Canada

9:20 AM Facilitating Cardiac Transplantation From Non-heart-beating Donors Kumud Dhital, MD, St. Vincent's Hospital, Sydney, Australia

9:40 AM The Economic Evidence Edward Y. Zavala, MBS, Vanderbilt University Medical Center, Nashville, TN, USA

8:00 AM - 10:00 AM

PRE-MEETING SYMPOSIUM 4:

Lung Transplant Candidate Selection: Have we Pushed the Envelope too Far? (LF, LTX, ID)

CHAIRS: Cynthia Gries, MD, MSc and Peter Hopkins, FRACP

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.

8:00 AM Debate: ECMO Should be an Absolute Contraindication to Lung Transplantation

8:00 AM PRO: Vivek N. Ahya, MD, Hospital of the University of Pennsylvania, Philadelphia, PA, USA

8:10 AM CON: Allan R. Glanville, MBBS, MD, FRACP, St. Vincent's Hospital, Sydney, Australia

8:20 AM Rebuttal

8:25 AM Rebuttal

8:30 AM Body Composition in Lung Transplantation: Older Age, Frailty, and BMI David Lederer, MD, 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, UPMC, 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

8:00 AM - 10:00 AM

PRE-MEETING SYMPOSIUM 5:

Lung Transplantation: Decoding Early Engraftment Events That Control Survival (LF, LTX, BSTR)

CHAIRS: Andrew J. Fisher, FRCP, PhD and Howard J. Huang, MD

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

8:25 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

8:48 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

9:11 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

9:36 AM Case Update: Antibodies 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

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

CHAIRS: Jo Wray, PhD, MSc, DHP and Elfriede Pahl, MD

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.

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 Sharon Beer, RN, MSc, Old Queen Elizabeth Hospital, Birmingham, United Kingdom

8:30 AM Family Factors that Impact Transition Leigh Reardon, MD, UCLA, Los Angeles, CA, USA

8:45 AM Strategies for Transition Preparation in Adolescent Transplant Recipients Samantha Anthony, PhD, MSW, RSW, University of Toronto, 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 DePasquale, MD, UCLA, Los Angeles, CA, USA

9:20 AM Panel Discussion

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

9:35 AM Panel Discussion

10:15 AM - 12:15 PM

PRE-MEETING SYMPOSIUM 7:

Making Bloody Sense of Anticoagulation

(MCS, PHARM, HF, HTX)

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

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 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, II, 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 V. 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

10:15 AM - 12:15 PM

PRE-MEETING SYMPOSIUM 8:

Chronic Thromboembolic Pulmonary Hypertension: Busting The Clot (PH, HF, HTX, LE, LTX)

CHAIRS: Nick Kim, MD and Michael Madani, MD

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

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

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

11:15 AM Debate: Exercise Induced PH is the Best Indication for Pulmonary Endarterectomy in Patients with Chronic Thromboembolic Disease

11:15 AM PRO: William Auger, MD, University of California San Diego Medical Center, La Jolla, CA, USA

11:30 AM CON: Elie Fadel, MD, Hospital Marie Lannelongue, Le Plessis Robinson, France

11:45 AM Rebuttal

11:50 AM Rebuttal

11:55 AM Panel Discussion

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

(ID, PHARM, HF, HTX, LE, LTX)

CHAIRS: Shahid Husain, MD, MS and Orla Morrissey, MD

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, 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 Alessandro C. Pasqualotto, MD, UFCPA, Porto Alegre, Brazil

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 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

10:15 AM - 12:15 PM

PRE-MEETING SYMPOSIUM 10:

The Many Faces of Chronic Lung Allograft Dysfunction (LF, LTX, PATH)

CHAIRS: Masaaki Sato, MD and Geert Verleden, MD, PhD

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, 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 M. Hwang, MD, PhD, Toronto General Hospital, Toronto, ON, Canada

11:15 AM Obstructive CLAD: Diagnostic Criteria Sangeeta Borade, MD, University of Chicago, 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

(BSTR, HF, HTX)

CHAIRS: Kimberly Gandy, MD, PhD and Simon Urschel, MD

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 Brent, St. Mary's Hospital and Medical School, 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

11:05 AM "I wish we knew this back then." New Insights and Technologies in ABO Immunobiology Mylvaganam Jeyakanthan, MD, University of Alberta, Edmonton, AB, Canada

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

11:45 AM Debate: O(+) MG... This Young Adult will Die Waiting. I am Going to Accept an ABOi Donor

11:45 AM PRO: Asif Hasan, MD, Freeman Hospital, Newcastle upon Tyne, United Kingdom

11:55 AM CON: Gregory I. Snell, FRACP, MBB, Alfred Hospital, Melbourne, Australia

12:05 PM Rebuttal

12:10 PM Rebuttal

10:15 AM - 12:15 PM

PRE-MEETING SYMPOSIUM 12:

To VAD or to Transplant?

(MCS, HF, HTX)

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

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 Memorial Hospital, Chicago, IL, USA

11:15 AM When the Right Choice is Palliative Care Jane MacIver, RN, MSc, Toronto General Hospital, 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

2:00 PM - 4:00 PM

PRE-MEETING SYMPOSIUM 13:

Drilling Down on Myocardial Recovery – Basics and Clinical

(MCS, BSTR, HF, HTX)

CHAIRS: Stavros Drakos, MD and Palak Shah, MD, MS

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, 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?

(PH, HF, HTX, LE, LTX)

CHAIRS: Steven Kawut, MD, MS and Eulalia Roig, MD, MS

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

2:30 PM *Targeting Inflammation, Kinases, and Metabolic Modulation for Pulmonary Arterial Hypertension* Mark R. Nicolls, MD, Stanford University, Palo Alto, CA, USA

3:00 PM *Pulmonary Hypertension in the ICU* John Granton, MD, Toronto General Hospital, Toronto, ON, Canada

3:30 PM *Percutaneous Support for Advanced Pulmonary Hypertension and Right Heart Failure: Atrial Septostomy and Percutaneous Systems* Tomas Pulido, MD, Instituto Nacional de Card Ignacio Chavez, Mexico City, Mexico

2:00 PM - 4:00 PM

PRE-MEETING SYMPOSIUM 15:

Bad Bugs? Optimize the Drugs!

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

CHAIRS: Walter Uber, PharmD, Fernanda Silveira, MD and Debbie Marriott, FRACP, FRCPA

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 (TDM). 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 TDM* Erik A. M. Verschuuren, MD, PhD, University Medical Centre Groningen, Groningen, Netherlands

2:25 PM *Antibacterial Agents and TDM* Jason Roberts, PhD, Royal Brisbane Hospital, Queensland, Australia

2:50 PM *Antifungal TDM* Tam Khuu, PharmD, UCLA, Los Angeles, CA, USA

3:15 PM *Antimycobacterial Drugs and TDM* Vincent G. Valentine, MD, University of Texas Medical Branch, Galveston, TX, USA

3:40 PM *Panel Discussion*

2:00 PM - 4:00 PM

PRE-MEETING SYMPOSIUM 16:

Ex-Vivo Lung Perfusion (EVLP): Evolving Strategy For Improved Donor Lung Management (DMD, LF, LTX)

CHAIRS: Kumud Dhital, MD, PhD and John Dunning, FRCS

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 storage 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

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

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

3:00 PM Physiological Perfusion Versus Cold Storage – Update on the International INSPIRE Trial Axel Haverich, MD, Hannover Medical School, Hannover, Germany

3:20 PM New Frontiers in Ex-vivo Donor Lung Reconditioning Marcelo Cypel, MD, Toronto General Hospital, Toronto, ON, Canada

3:40 PM Defining Marginality and Justifying Costs Peter M. Hopkins, FRACP, Prince Charles Hospital, Brisbane, Australia

2:00 PM - 4:00 PM

PRE-MEETING SYMPOSIUM 17:

Frailty – How Do We Assess this Physiologic Variable and at What Point Does it Represent a Contraindication to Transplant?

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

CHAIRS: Nancy Blumenthal, CRNP and Christiane Kugler, PhD

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 Ravichandran, MD, Barnes Jewish Hospital, St. Louis, MO, USA

2:05 PM What is Frailty, and How is it Measured? Oliver Mauthner, MD, University of Toronto, Toronto, ON, Canada

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, 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

2:00 PM - 4:00 PM

PRE-MEETING SYMPOSIUM 18:

Developing A Pediatric VAD Program

(PEDS, MCS, HF, HTX)

CHAIRS: Elizabeth Blume, MD and Robert G. Weintraub, FRACP, FACC

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 Wearden, MD, University of Pittsburgh, Pittsburgh, PA, USA

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

2:40 PM Managing the Device at Home: Unique Issues to Children and Adolescents Jennifer Conway, MD, Hospital for Sick Children, Toronto, ON, 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, RN, 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

4:15 PM - 6:15 PM

PRE-MEETING SYMPOSIUM 19:

The Times they are A-changing (MCS, HF, HTX)

CHAIRS: Cumara C. Sivathanan, MBBS, FRCS and Craig H. Selzman, MD

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

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

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

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

5:35 PM *Debate: Total Implantability Is Near*

5:35 PM PRO: Georg M. Wieselthaler, MD, PhD, UCSF, San Francisco, CA, USA

5:50 PM CON: Pramod Bonde, MD, Yale University School of Medicine, New Haven, CT, USA

6:05 PM *Rebuttal*

6:10 PM *Rebuttal*

4:15 PM - 6:15 PM

PRE-MEETING SYMPOSIUM 20:

Pulmonary Hypertension in Left Heart Disease (WHO Group 2 PH): ISHLT and World Symposium on Pulmonary Hypertension (WSPH) Consensus Initiative (PH, HF, HTX)

CHAIRS: Teresa De Marco, MD, FACC and Jean-Luc Vachiery, 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 *Overview of the World Symposium Pulmonary Hypertension in LH Disease* Nazzareno Galie, MD, University of Bologna, Bologna, Italy

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, Baltimore, MD, USA

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 C. Fang, MD, University of Utah, Salt Lake City, UT, USA

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

5:55 PM *Panel Discussion*

4:15 PM - 6:15 PM

PRE-MEETING SYMPOSIUM 21:

The Sexiest Controversies in End Stage HF and Transplantation (HF, HTX, MCS, PHARM, BSTR)

CHAIRS: David S. Feldman, MD, PhD and Michal Zakliczynski, MD

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 A. Taylor, PhD, University of Texas, Houston, TX, USA

4:25 PM *Debate: Stem Cells are the Future of Advanced Heart Failure Therapy and Always Will Be*

4:25 PM PRO: Sharon A. Hunt, MD, Stanford University, Stanford, CA, USA

4:35 PM CON: Sonja Schrepfer, MD, PhD, Hamburg, Germany

4:45 PM *mTORi Are an Advancement Beyond Current Therapy* Arne K. Andreassen, MD, PhD, Oslo University Hospital, Oslo, Norway

4:55 PM *Debate: All of our Patients Should be on MTORi Subsequent to Transplant*

4:55 PM PRO: Howard J. Eisen, MD, Drexel University, Philadelphia, PA, USA

5:05 PM CON: Mandeep R. Mehra, MD, MBBS, 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: Patients Supported by ECMO Should Never Get Transplanted*

5:25 PM PRO: Mariell Jessup, MD, University of Pennsylvania, Philadelphia, PA, USA

5:35 PM CON: Goran Dellgren, MD, PhD, Sahlgrenska University Hospital, Gothenburg, Sweden

5:45 PM *Debate: MCS Will Kill Transplant*

5:45 PM PRO: Lars H. Lund, MD, PhD, Karolinska University, Stockholm, Sweden

5:55 PM CON: 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 (DMD, LF, LTX)

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

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. Levvey, RN, Grad Dip Clin Ep. Alfred Hospital, Melbourne, Australia

4:32 PM DCD Lungs: The Spanish Experience Francisco Javier Moradiellos, MD, Hospital Universitario del Hierro, Madrid, Spain

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

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

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

5:40 PM Debate: We need EVLP to do DCD

5:40 PM PRO: Robert B. Love, Medical College of Wisconsin, Milwaukee, WI, USA

5:52 PM CON: Gregory I. Snell, FRACP, MBB, Alfred Hospital, Melbourne, Australia

6:05 PM Rebuttal

6:10 PM Rebuttal

4:15 PM - 6:15 PM

PRE-MEETING SYMPOSIUM 23:

State of the Art Update on Infectious Disease Issues in Pediatric Thoracic Transplantation

(ID, PEDS, LF, LTX, PHARM)

CHAIRS: Tajinder P. Singh, MD, MSc and Antonio Moreno-Galdo, MD

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, Boston Children's/ Harvard Medical School, Boston, MA, USA

4:55 PM Vaccination in Pediatric Thoracic Transplantation: Facts and Controversies Marian G. Michaels, MD, Children's Hospital of Pittsburgh, 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

4:15 PM - 6:15 PM

PRE-MEETING SYMPOSIUM 24:

Lung Transplant Immunology 201-plus: Recent Advances (BSTR, LF, LTX)

CHAIRS: John A. Belperio, MD and Daniel C. Chambers, MBBS MRCP FRACP MD

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

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

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

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

5:35 PM Auto-immunity and Auto-antibodies Stijn E. Verleden, MD, University of Leuven, Leuven, Belgium

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

6:15 PM - 7:15 PM

GENERAL POSTER VIEWING



FRIDAY
APRIL 11, 2014

7:00 AM - 8:00 AM

SUNRISE SYMPOSIUM 1:
Building For The Future
(MCS, HF, HTX)

CHAIRS: James W. Long, MD, PhD and
Juan C. Mejia, MD

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, West Michigan Heart, 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

(PH, HF, HTX, LF, LTX)

CHAIR: Adaani Frost, MD

SESSION SUMMARY: This is meant to be a multi-disciplinary 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 Combatting High PVRs in HCM Transplant Candidates Reema Hasan, MD, University of Michigan, Ann Arbor, MI, 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 Permanente, 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

(HF, HTX, MCS, BSTR)

CHAIRS: David M. Kaye, MD, PhD and Sameh M. Hozayen, MD, MS

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 Ornerly: 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 Lemstrom, MD, PhD, Helsinki University, Helsinki, Finland

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

7:00 AM - 8:00 AM

SUNRISE SYMPOSIUM 4:

Controversies in Lung Transplantation

(LF, LTX)

CHAIRS: Vincent G. Valentine, MD and John Dark, MB, FRCS

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: Single Lung Transplantation Should be the Preferred Procedure for COPD and ILD

7:00 AM PRO: Gabriel Thabut, MD, Hopital Bichat, Paris, France

7:08 AM CON: Jens Gottlieb, MD, Hannover Medical School, Hannover, Germany

7:16 AM Debate: Scleroderma Should be a Contraindication to Lung Transplantation

7:16 AM PRO: Oksana A. Shlobin, MD, UCSF, San Francisco, CA, USA

7:24 AM CON: Jonathan P. Singer, MD, UCSF, San Francisco, CA, USA

7:32 AM Debate: Donor Lungs Should be Sized to fit the Highest Priority Recipient

7:32 AM PRO: Tobias Deuse, MD, PhD, University Heart Center, Hamburg, Germany

7:40 AM CON: Michael H. Eberlein, MD, University of Iowa, Iowa City, IA, USA

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

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

CHAIRS: Christopher R. Ensor, PharmD, BCPS-CV and Amparo Sole, MD, PhD

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

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

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

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

8:00 AM - 10:00 AM

OPENING PLENARY SESSION (ALL)

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

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

8:05 AM *President's Report* Allan R. Glanville, MBBS, MD, FRACP, St. Vincent's Hospital, Sydney, Australia

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

8:30 AM *MCSO Registry Report* James K. Kirklín, MD, University of Alabama at Birmingham, Birmingham, AL, USA

8:40 AM *Featured Abstract*

8:55 AM *INVITED LECTURE: How Digitizing Humans Changes the Future of Medicine* Eric Topol, MD, The Scripps Translational Science Institute, La Jolla, CA, USA

9:15 AM *Featured Abstract*

9:30 AM *Lifetime Achievement Award Recipient Lecture: "Follow Your Star,"* Sir Terence English, KBE, FRCS, Oxford, United Kingdom

10:30 AM - 12:00 PM

CONCURRENT SYMPOSIUM 25:

A Lifecycle Journey in Pulmonary Hypertension

(PHARM, HF, HTX, LF, LTX, PH)

CHAIRS: Patricia A. Uber, PharmD and C. 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* Patricia A. Uber, PharmD, University of Maryland, Baltimore, MD, USA

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

10:50 AM *Case Presentation* Patricia A. Uber, PharmD, University of Maryland, Baltimore, MD, 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* Patricia A. Uber, PharmD, University of Maryland, Baltimore, MD, USA

11:15 AM *Progression of PAH: Where Do We Go From Here* Edward Horn, PharmD, BCPS, Allegheny General Hospital, Pittsburgh, PA, USA

11:30 AM *Case Presentation* Patricia A. Uber, PharmD, University of Maryland, Baltimore, MD, USA

11:35 AM *When Medical Therapy is not Enough: Options for Bridging to Lung Transplantation or Palliation* Robert L. Kormos, MD, University of Pittsburgh, Pittsburgh, PA, USA

11:50 AM *Panel Discussion*

10:30 AM - NOON

CONCURRENT ABSTRACT SESSIONS

2:00 PM - 3:30 PM

**CONCURRENT SYMPOSIUM 26:
Infections in Mechanical
Circulatory Support
Devices – Understanding
and Conquering the
Beast (ID, MCS)**

CHAIRS: Martha L. Mooney, MD, FACP and
Guy A. MacGowan, MD, FACC, FRCPI

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, MD, University of Pennsylvania, Philadelphia, PA, USA

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

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

2:35 PM Driveline Infection and the Role of Nurse/VAD Coordinator Linda L. Staley, RN, CNP, Mayo Clinic, 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 A. Romano, MD, University of Michigan, Ann Arbor, MI, USA

3:20 PM Panel Discussion

4:00 PM - 5:30 PM

**CONCURRENT SYMPOSIUM 27:
Heart Transplantation
and Mechanical Circula-
tory Support in Latin
America (HF, HTX, MCS)**

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

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 Alberto Cosquillo 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 Paulo, Sao Paulo, Brazil

4:25 PM Heart Procurement: Measures to Optimize Results Oscar Ortega Duran, MD, Hospital Christis Mugureza, Monterrey, Mexico

**4:35 PM Management of Recipients in Cardio-
genic Shock** Mauricio A. Villavicencio, MD, Instituto Nacional del Torax, Santiago, Chile

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

4:55 PM MCS as BTT in Latin America Alexandre Colafranceschi, MD, Botafogo Medical Center, Rio de Janeiro, Brazil

5:05 PM Panel Discussion



2:00 PM - 3:30 PM

**CONCURRENT ABSTRACT
SESSIONS**

5:30 PM - 6:30 PM

**MINI ORAL POSTER
ABSTRACT SESSIONS**

GENERAL POSTER VIEWING



SATURDAY
APRIL 12, 2014

7:00 AM - 8:00 AM

SUNRISE SYMPOSIUM 6:
The Aortic Valve – An Open and Shut Case?

(MCS HF, HTX)

CHAIRS: Randall C. Starling, MD, MPH and Ruchan Akar, MD

SESSION SUMMARY: This session will address how to run the pump – the advantages of running the pump full speed, giving maximal flow and offloading, 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

(PH, PHARM, HF, LF, LTX, NHSAH)

CHAIRS: Patricia Ging, PharmD and Andrew J. Fisher, FRCP, PhD

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

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

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

7:45 AM Case Presentation Christina Migliore, MD, Newark Beth Israel Medical Center, Newark, NJ, USA

7:50 AM Panel Discussion

7:00 AM - 8:00 AM

SUNRISE SYMPOSIUM 8:

Exercise Training in Heart Transplantation

(HF, HTX)

CHAIRS: Michelle M. Kittleson, MD, PhD and Nicolas Manito, MD

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

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

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

7:00 AM - 8:00 AM

SUNRISE SYMPOSIUM 9:

CMV Infection in Lung Transplant Recipients: Are We Ready for Personalized Medicine?

(ID, LTX, LF, PHARM)

CHAIRS: Marc G. Schechter, MD and Martin R. Zamora, MD

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 F. 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, FRACP, PhD, Alfred Hospital, Melbourne, Australia

7:30 AM When Resistance Strikes: Promising New Therapies Katrina Ford, BPharm, Great Ormond Street Hospital, London, United Kingdom

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 (BSTR. PATH)

CHAIRS: Patrick Bruneval, MD and Dylan V. Miller, MD

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

7:20 AM *The Gray Zone: Overlapping Histologic Features between Cellular and Antibody Mediated Rejection* Annalisa Angelini, MD, University of Padua, Padua, Italy

7:40 AM *Outcomes and Considerations in the Management of Mixed Rejection* A.G. Kfoury, MD, FACC, Intermountain Medical Center, Murray, UT, USA

8:00 AM - 10:00 AM

PLENARY SESSION (ALL)

CHAIRS: Stuart W. Jamieson, MB, FRCS and Mandeep R. Mehra, MD, MBBS, 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

8:25 AM *Featured Abstract*

8:40 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

9:00 AM *Featured Abstract*

9:15 AM *INVITED LECTURE: Organ Allocation Policy and the Decision to Donate* Alvin E. Roth, PhD Professor of Economics, Stanford University, Stanford, CA, USA

10:30 AM - 12:00 PM

CONCURRENT SYMPOSIUM 28:

JHLT at ISHLT: The Year in Capsule (ALL)

CHAIRS: Stephan Schueler, MD, PhD, FRCS and Pali Shah, MD

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, MHSc, FRCPC, Toronto General 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* Steve Kindel, MD, Children's Hospital & Medical Center, Chicago, IL, USA

11:25 AM *Invited Discussant* Richard Kirk, FRCP, FRCPC, Freeman Hospital, Newcastle upon Tyne, United Kingdom

11:30 AM *Highlights of Transplant Infectious Diseases* Me-Linh Luong, MD, 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*

10:30 AM - NOON

CONCURRENT ABSTRACT SESSIONS

2:00 PM - 3:30 PM

CONCURRENT SYMPOSIUM 29:

Approach to the Highly Sensitized Patient Awaiting Heart Transplantation

(HF, HTX, PATH, PHARM)

CHAIRS: Howard J. Eisen, MD and
Maria G. Crespo-Leiro, MD

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 Medical Center, 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 ABSTRACT SESSIONS

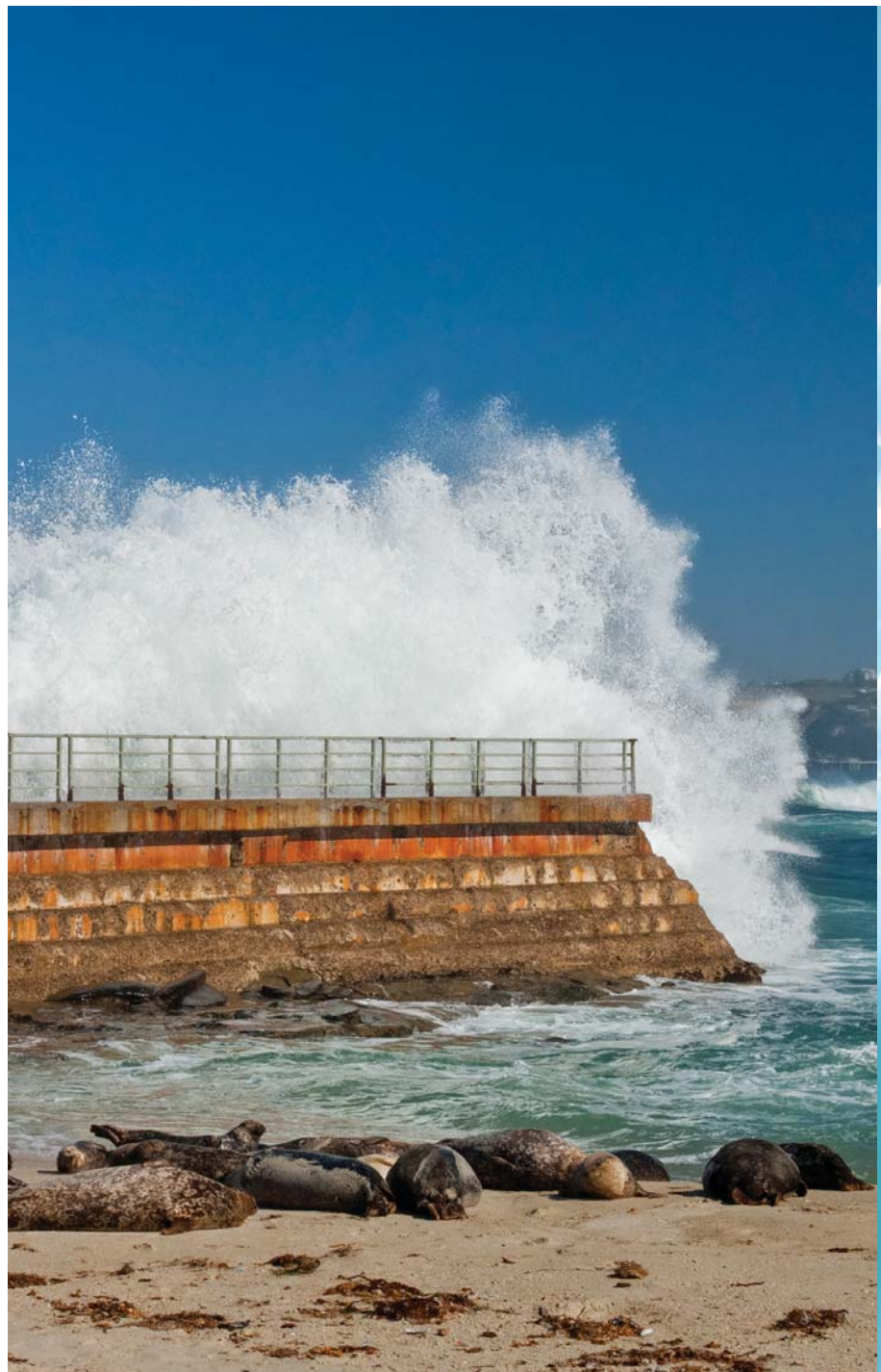
4:00 PM - 5:30 PM

CONCURRENT ABSTRACT SESSIONS

5:30 PM - 6:30 PM

MINI ORAL POSTER ABSTRACT SESSIONS

GENERAL POSTER VIEWING



SUNDAY
APRIL 13, 2014

SUNDAY, APRIL 13, 2014

7:00 AM - 8:00 AM

SUNRISE SYMPOSIUM 11: VAD Teams Working Across Different Countries: How to Do It (NNSAH, MCS)

CHAIRS: Annemarie Kaan, MCN, RN and
Tonya I. Elliott, MSN, RN, CCTC, CHFN

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, Jewish Hospital, New Albany, IN, USA

7:45 AM Panel Discussion: How We Do It: How Different Nursing Teams Respond to Common Patient Problems

7:00 AM - 8:00 AM

SUNRISE SYMPOSIUM 12: Swan Songs and Controversies In Hemodynamics (PH, HF, LF)

CHAIRS: Srinivas Murali, MD and
Juan F. Delgado Jimenez, MD

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 Vasodilators in the Cath Lab: Who, Why, and What? Ryan J. Tedford, MD, Johns Hopkins University, Baltimore, MD, USA

7:20 AM Volume Loading in the Cath Lab: Who, Why and How? Ivan Robbins, MD, Vanderbilt University Medical Center, Nashville, TN, USA

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



7:00 AM - 8:00 AM

SUNRISE SYMPOSIUM 13:

Lab Methods 101: What Everyone Needs to Know to Read Transplant Papers (ALL)

CHAIRS: Richard Kirk, FRCP, FRCPC and Kimberly L. 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 M. Diamond, MD, University of Pennsylvania, Philadelphia, PA, USA

7:15 AM Flow Cytometry: It's More Than Just a Black Box Stephanie T. Yerkovich, PhD, The Prince Charles Hospital, Brisbane, Australia

7:30 AM Antibody Detection: You, too, Can Understand It Kathryn J. Tinkam, MD, University of Toronto, Toronto, ON, Canada

7:45 AM Measuring Bugs: From One Petri Dish to the Microbiome Lara Danziger-Isakov, MD, MPH, Children's Hospital Medical Center, Cincinnati, OH, USA

7:00 AM - 8:00 AM

SUNRISE SYMPOSIUM 14:

Why Not Infant Lung Transplantation?

(PEDS, LF, LTX)

CHAIRS: Marc G. Schechter, MD and Christian Benden, 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 Morales, MD, Cincinnati Children's Hospital, Cincinnati, OH, USA

7:12 AM Why Infant Lung Transplant is Such a Good Concept! George B. Mallory, Jr., 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 of Philadelphia, PA, USA

7:37 AM Case Presentation: ABO Incompatible Lung Transplantation in an Infant Hartmut Grasmann, MD, PhD, Hospital for Sick Children, Toronto, ON, Canada

7:50 AM Panel Discussion

7:00 AM - 8:00 AM

SUNRISE SYMPOSIUM 15:

High-Risk Donor: Extending our Criteria in Times of Organ Shortage

(DMD, ID, LF, LTX, HF, HTX)

CHAIRS: Martha L. Mooney, MD, FACP and Orla Morrissey, MD

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 advise 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

7:15 AM Donors with Hb-core Antibody: Should We Use Them? Valentina Stosor, MD, Northwestern University/Feinberg School of Medicine, Chicago, IL, USA

7:30 AM Donors with Hepatitis C Paolo A. Grossi, MD, PhD, University of Insubria, Varese, Italy

7:45 AM Donor with Documented Infection: Can We Safely Use Them? Fernanda P. Silveira, MD, University of Pittsburgh Medical Center, Pittsburgh, USA

8:00 AM - 9:15 AM

CONCURRENT ABSTRACT SESSIONS

9:30 AM - 11:45 AM

PLENARY SESSION (ALL)

CHAIRS: Andreas O. Zuckermann, MD and
Hermann C. Reichenspurner, MD, PhD

9:30 AM *Awards Presentations*

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 Medical Center, Stanford, CA, USA

10:10 AM *Featured Abstract*

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

11:00 AM *Featured Abstract*

11:15 AM **PRESIDENT'S DEBATE:** *Stop Treating Secondary PH Right Now!*

11:15 AM **PRO:** Fernando Torres, MD, University of Texas Southwestern Medical Center, Dallas, TX, USA

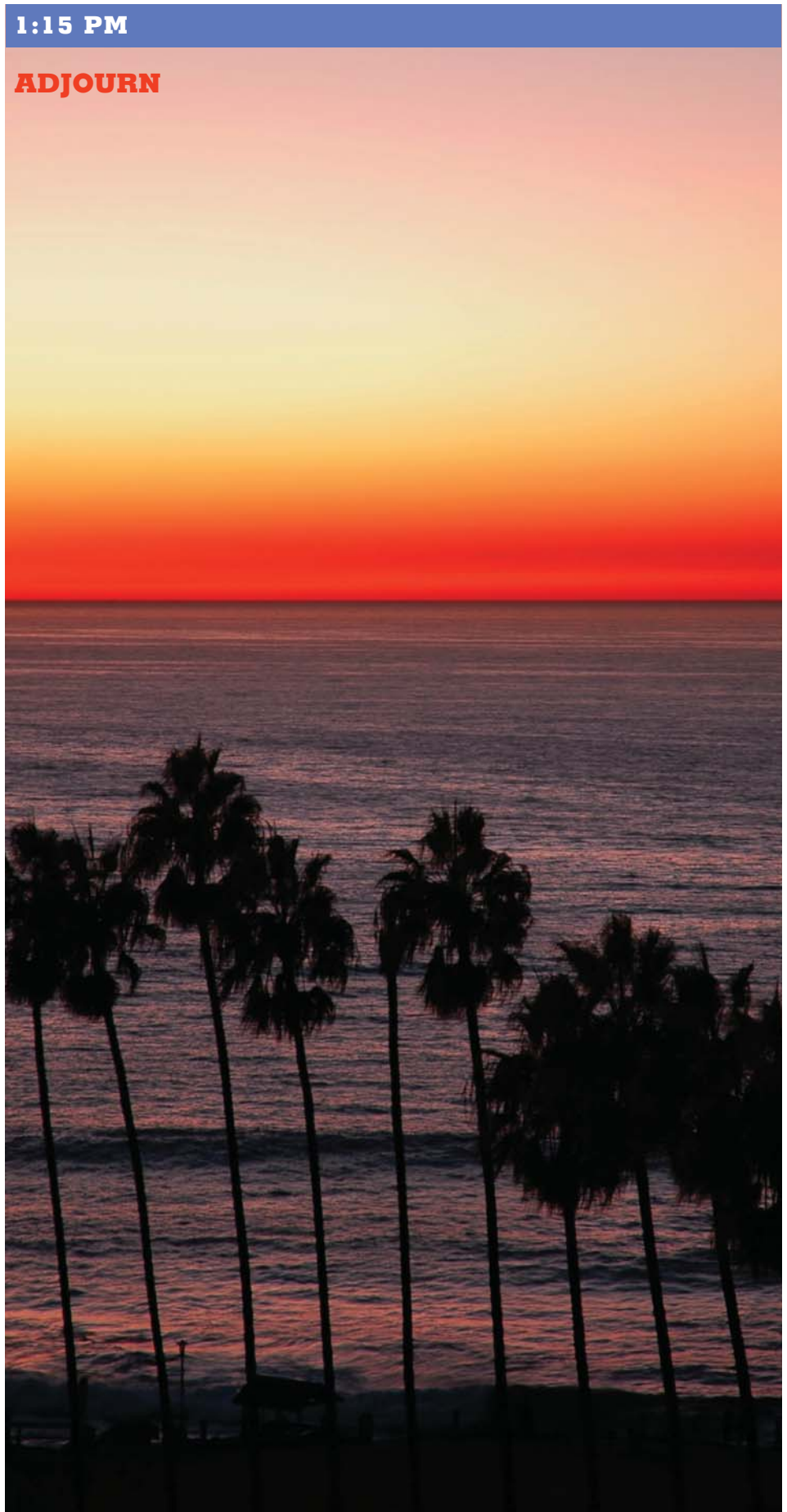
11:30 AM **CON:** Harrison W. Farber, MD, Boston University School of Medicine, Boston, MA, USA

12:00 PM - 1:15 PM

CONCURRENT ABSTRACT SESSIONS

1:15 PM

ADJOURN





Dear ISHLT Members and Interested Individuals:

In response to goals developed at the ISHLT 2006-2007 Strategic Planning Meeting, the Society is pleased to announce the establishment of the **ISHLT Academy**. The **ISHLT Academy** draws on the wealth of experience and expertise within the Society to deliver high quality educational experiences with the goal of enabling our members to improve and maintain the highest possible standards in the care of patients with advanced heart and lung disease and those undergoing heart or lung transplantation. The **ISHLT Academy** represents the 'brand name' that will be associated with the educational opportunities offered by the ISHLT to its members and interested non-members. The purpose of the **ISHLT Academy** is to develop an enduring resource of education in core and expert competencies in the field of cardiopulmonary transplantation, mechanical and biological support of the failing heart, and advanced lung disease (including pulmonary vascular disease). These educational endeavors will complement the ISHLT's existing activities in the promulgation of new science, registry analyses, guideline statements and monograph series.

On Monday and Tuesday, April 7-8, we will be conducting the following 2 simultaneous ISHLT Academies at the Loews Coronado Bay Resort in Coronado, CA. Individuals attending these 2 ISHLT Academies should make their hotel reservations at the Loews Coronado Bay Resort. Sleeping rooms for delegates attending these 2 ISHLT Academies are NOT available at the Hyatt. Hotel reservation information is outlined below.

ISHLT Academy: Core Competencies in Mechanical Circulatory Support

ISHLT Academy: Masters Course in Mechanical Circulatory Support

On Wednesday, April 9, the day prior to the 2014 Annual Meeting, we will be conducting the following 3 simultaneous ISHLT Academies at the Manchester Grand Hyatt Hotel in San Diego. Individuals attending these 3 Academies should make their hotel reservations at the Hyatt. **IMPORTANT NOTE: Due to VERY limited availability, hotel rooms on the nights of Monday and Tuesday, April 7-8, we are limiting reservations for these nights to those individuals who are registered for one of the three Wednesday Academy courses.** If you are registered for a Wednesday Academy, please book your hotel reservation for arrival on Wednesday. Once you have made your hotel reservation and completed your Academy registration, please send an email to phyllis.glenn@ishlt.org to request that your hotel reservation be extended to arrive on either Monday or Tuesday. Please include your hotel reservation confirmation number in the email. ISHLT staff will then contact the hotel to make this change and the hotel will send you confirmation.

ISHLT Academy: Core Competencies in Basic Science and Translational Research

ISHLT Academy: Core Competencies in Heart Failure and Cardiac Transplant Medicine

ISHLT Academy: Core Competencies in Nursing, Health Science, and Allied Health

You may register for the Academies via the Annual Meeting registration form and online. Attendance at the Annual Meeting is NOT required in order to register for an ISHLT Academy. Individuals who are registered for the Annual Meeting are entitled to a \$125 discount off of the Academy registration fee. Registration for each ISHLT Academy is limited to 200, on a first come first served basis.

These novel and unique professional expert development initiatives are part of an integrated curriculum design process at the ISHLT Academy. The Board, the Education Committee, the Council Education Workforces, and our international faculty are confident that the value beyond foundational knowledge comes with application and integration in the setting of highly interactive, competency-based learning modules such as these ISHLT Academies.

We are looking forward to seeing you in San Diego.

Sincerely,

Christopher Wigfield, MD
Medical Director of Educational Affairs



ishlt
academy

INTERNATIONAL SOCIETY FOR
HEART AND LUNG TRANSPLANTATION

MONDAY, APRIL 7TH

TUESDAY, APRIL 8TH

MECHANICAL CIRCULATORY SUPPORT MCS SUPPORT COURSE ISHLT ACADEMY COURSE

**ISHLT ACADEMY
MASTER COURSE
IN MECHANICAL
CIRCULATORY SUPPORT**

**ISHLT ACADEMY
CORE COMPETENCY
COURSE IN MECHANICAL
CIRCULATORY SUPPORT**

**LOEWS CORONADO BAY RESORT
CORONADO, CA, USA**



ISHLT ACADEMY: CORE COMPETENCIES IN MECHANICAL CIRCULATORY SUPPORT

CHAIRS: Jeffrey Teuteberg, MD and
Daniel Goldstein, MD

**MONDAY, APRIL 7 –
TUESDAY, APRIL 8, 2014**

*Loews Coronado Bay Resort
Coronado, CA, USA*

In response to high demand, we are conducting, for the third time, the ISHLT Academy: Core Competencies in Mechanical Circulatory Support. This Academy will provide a concise review of clinical knowledge and essential professional skills to facilitate the surgical and medical management of patients with advanced heart failure who are being assessed for and who have received durable mechanical circulatory support. The course consists of focused presentations covering a broad array of topics for both inpatient and outpatient management with an emphasis on a practical approach to patient care, implementing best practices and clinical problem solving. An addition this year is the offering of small breakout sessions for small group discussions to facilitate the learning process. All lectures will be delivered by internationally recognized experts in the field and include cardiologists, cardiac surgeons, and VAD coordinators. Audience participation and interaction with the faculty will be actively encouraged throughout the Academy with Question and Answer sessions following each major topic and by limiting the enrollment to 200 participants. The educational workforce of the Mechanical Circulatory Support Counsel of the ISHLT is confident this will be the most comprehensive and valuable summary for practitioners in the field of mechanical circulatory support.

INDUSTRY PARTICIPATION

Registration by employees of commercial entities is limited to two individuals per company.

HOTEL RESERVATIONS

Stay at the official ISHLT Academy hotel and be at the heart of the action! An exclusive ISHLT room rate of \$219.00 plus tax has been negotiated with the Loews Coronado Bay Resort in Coronado, CA. You may make your reservation by phone or online. The discounted rate is subject to availability and is guaranteed until March 24, 2014. After this date, all rooms will be released back to the hotel for public sale. All reservation requests must be accompanied by a credit card number in order to guarantee the reservation. The room rates that are indicated here are based on single/double occupancy per night. Breakfast is not included. The cancellation and refund policy for your reservation will be described in the reservation confirmation letter that you will receive directly from the hotel.

In order to secure the ISHLT rate, please identify yourself as attending the ISHLT Academy when making your reservation through the Loews Reservations Center.

Online: <https://resweb.passkey.com/go/ISHLTMCS2014>
Phone: 1-800-815-6397

CONTINUING MEDICAL EDUCATION INFORMATION

Accreditation Statement

The International Society for Heart and Lung Transplantation (ISHLT) is accredited by the Accreditation Council for Continuing Medical Education (ACCME) to provide continuing medical education for physicians.

Credit Designation Statement

ISHLT designates this live activity for a maximum of 11.25 *AMA PRA Category 1 Credits*.™ Physicians should claim only the credit commensurate with the extent of their participation in the activity.

Disclosure

Current guidelines state that participants in CME 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 if a product they are discussing is not labeled for the use under discussion or is still investigational.



Learning Objectives

At the conclusion of this meeting, participants will have improved competence and professional performance in their ability to:

1. Recognize the various types of mechanical circulatory support, their outcomes, and rates of adverse events.
2. Identify the clinical signs and risk factors of advanced heart failure in order to optimally time implantation.
3. Recognize the medical and social factors which impact patient outcomes on MCS.
4. Optimize implantation techniques and device selection.
5. Manage patients after MCS in the intensive care unit, as an inpatient and as an outpatient.
6. Diagnose and manage common clinical dilemmas and adverse events in patients after MCS.

Educational Goals

The educational goals of this activity are to provide a concise review of clinical knowledge and essential professional skills to facilitate best practice of surgical and medical aspects involved in the care of patients during assessment as candidates and as recipients of mechanical circulatory support.

Target Audience

While all members are invited to enroll, this course is primarily designed to be of benefit for clinicians and allied professionals who are in the **early stages of their careers** or who **are in training, are part of a new program** or **desire an update** on the current state of the field. The information presented covers core competencies and is intended to provide a strong foundation of the overarching principles of mechanical support, rather than as a detailed update for those who are already proficient in the field. The Masters Course in MCS is designed for more experienced practitioners. See page 54 for more details.

SCIENTIFIC PROGRAM COMMITTEE

Daniel Goldstein, MD, Co-Chair
Ulrich Jorde, MD, Co-Chair
Salpy Pamboukian, MD, Co-Chair
Jeff Teuteberg, MD, Co-Chair

INVITED FACULTY FOR BOTH MCS ACADEMIES

Nicholas R. Banner, FRCP, Harefield NHS Foundation, Bucks, United Kingdom
Andrew J. Boyle, MD, Cleveland Clinic Florida, Weston, FL, USA
Shashank S. Desai, MD, Inova Fairfax Hospital, Falls Church, CA, USA
David Feldman, MD, Abbott Northwestern Hospital, Minneapolis, MN, USA
Lee R. Goldberg, MD, MPH, University of Pennsylvania, Philadelphia, PA, USA
Daniel J. Goldstein, MD, Montefiore Medical Center, Bronx, New York, USA
Ulrich P. Jorde, MD, Columbia University, New York, NY, USA
Jim K. Kirklin, MD, University of Alabama at Birmingham, Birmingham, AL, USA
Robert L. Kormos, MD, University of Pittsburgh Medical Center, Pittsburgh, PA, USA
Pascal N. LePrince, MD, PhD, Pitie Salpetriere, Paris, France
Nader Moazami, MD, Cleveland Clinic, Cleveland, OH, USA
Francis D. Pagani, MD, PhD, University of Michigan, Ann Arbor, MI, USA
Salpy V. Pamboukian, MD, MSPH, University of Alabama at Birmingham, AL, USA
Michael G. Petty, PhD, RN, University of Minnesota Medical Center, Minneapolis, MN, USA
Evjenij V. Potapov, MD, PhD, German Heart Institute, Berlin, Germany
Vivek Rao, MD, PhD, Toronto General Hospital, Toronto, Canada
Joseph G. Rogers, MD, Duke University, Durham, NC, USA
Stephan Schueler, MD, PhD, FRCS, Newcastle Upon Tyne, United Kingdom
Mark S. Slaughter, MD, University of Louisville, KY, USA
Martin Strueber, MD, University Heart Center Leipzig, Germany
Benjamin C. Sun, MD, Abbot Northwestern Hospital, Minneapolis, MN, USA
Jeffrey J. Teuteberg, MD, University of Pittsburgh, USA
Andreas Zuckermann, MD, PhD, University of Vienna, Vienna, Austria

CORE COMPETENCY COURSE

SCIENTIFIC PROGRAM SCHEDULE

NOTE: Each of the small group discussion breakouts will focus on a selection of the following topics:

- MANAGING DEVICE INFECTIONS
- APPROACH TO THE PATIENT IN SHOCK
- MANAGING THE RV
- APPROACH TO THROMBOSIS
- SURGICAL ROUNDTABLE: TIPS AND TRICKS
- COORDINATOR ROUNDTABLE
- SETTING THE PUMP: INTRAOP, ICU, AT DISCHARGE AND LONG TERM
- BUILDING A VAD PROGRAM

MONDAY, APRIL 7, 2014

1:00 PM – 1:05 PM

INTRODUCTION, WELCOME, AND BRIEF OVERVIEW

1:05 PM – 2:00 PM

SESSION 1 – REVIEW OF THE CURRENT STATE OF MCS

- 1:05 PM** Technology 101
Review of current technologies, types of flow, pump parameters
- 1:20 PM** BTT and DT Outcomes
Review state of outcomes and adverse events with current technologies
- 1:35 PM** Short-term Support and Shock
Overview of percutaneous technologies, biventricular support, TAH, and ECMO
- 1:50 PM** Q&A

2:00 PM – 3:15 PM

SESSION 2 – PATIENT SELECTION

- 2:00 PM** When Should Patients be Referred: Warning Signs
Risk factors which presage patient decline: renal function, intolerance of medications, hospitalizations, etc.

- 2:15 PM** Assessing and Optimizing RV Function
Brief overview of impact of RV failure, pre-operative assessment and management of the RV, risk prediction

- 2:30 PM** End-organ Assessment
Review of organ recoverability: renal, hepatic, vascular, overall medical candidacy

- 2:45 PM** Timing of Implantation
When is the patient “sick enough” to implant MCS; case studies.

- 3:00 PM** Q&A

3:15 PM – 3:45 PM

COFFEE BREAK

3:45 PM – 4:45 PM

SESSION 3 – SURGICAL CONSIDERATIONS

- 3:45 PM** Key Surgical Aspects of Implantation
Overview of the most crucial surgical considerations: inflow cannula/pump placement, driveline, etc.
- 4:00 PM** How Much Else is Too Much?
Concomitant operative procedures: TV, Aortic valve, prior Dor, congenitals
- 4:15 PM** Tailoring Pumps to Patients
Considerations for device type, type of flow based upon patient factors
- 4:30 PM** Q&A

4:45 PM – 5:45 PM

CONCURRENT SMALL GROUP BREAK OUT SESSIONS

5:45 PM – 6:30 PM

RECEPTION

TUESDAY, APRIL 8, 2014

7:30 AM – 8:00 AM

MORNING COFFEE

8:00 AM – 9:00 AM

SESSION 4 – POST-OP

8:00 AM **It is All About the RV**
Post-operative approach to the RV: surgical considerations, pump speed, iNO, inotropes, etc.

8:15 AM **Initiation and Monitoring of Anticoagulation**
Overview of the timing and type of anticoagulation, means to monitor state of anticoagulation, anticoagulation management for elective procedures

8:30 AM **Role of Imaging**
Echo (basic views, how to assess functionality, set speed, how often, case presentations); CT (when it is useful, what can really be assessed, cases presentation)

8:45 AM **Q&A**

9:00 AM – 10:00 AM
**CONCURRENT SMALL GROUP
 BREAK OUT SESSIONS**

10:00 AM – 10:30 AM
COFFEE BREAK

10:30 AM – 11:30 AM
SESSION 5 – TRANSITION TO HOME

10:30 AM **Educating the Patient and Caregiver**
Outline of approach to teaching patient and their family and community

10:45 AM **Quality of Life and Functional Capacity**
The need for, timing of, and measures to assess

11:00 AM **Transition to Outpatient Care**
Clinic structure, typical items addressed, focused medical management (BP, rhythms, etc), rehab

11:15 PM **Q&A**

11:30 AM – 12:30 PM
SESSION 6 – LONG-TERM MANAGEMENT #1

11:30 AM **Infections**
Prevention, diagnosis, medical and surgical management

11:45 AM **GI Bleeding**
Review of pathophysiology, incidence, and diagnostic/therapeutic approach

12:00 PM **Suspected Pump Thrombosis**
Mechanism, incidence, screening/diagnosis, management

12:15 PM **Q&A**

12:30 PM – 1:30 PM
BOX LUNCH AND NETWORKING

1:30 PM – 2:30 PM
SESSION 7 – LONG-TERM MANAGEMENT #2

1:30 PM **De novo Aortic Insufficiency**
Incidence, screening, management

1:45 PM **Late RV Failure**
Definition, prediction, management

2:00 PM **End of Life**
Approaches, role of Palliative Care

2:15 PM **Q&A**

2:30 PM – 3:00 PM
COFFEE BREAK

3:00 PM – 4:00 PM
SESSION 8 – CASE PRESENTATIONS

3:00 PM **Case #1: Patient Selection**

3:15 PM **Case #2: Operative Approach**

3:30 PM **Case #3: Post-op Complication (RV failure)**

3:45 PM **Case #4: Long-term Complication (GI bleed)**

4:00 PM – 5:00 PM
**CONCURRENT SMALL GROUP
 BREAK OUT SESSIONS**

5:00 PM **ADJOURN**

ISHLT ACADEMY: MASTER COURSE IN MECHANICAL CIRCULATORY SUPPORT

CHAIRS: James K. Kirklin, MD and
Robert L. Kormos, MD

**MONDAY, APRIL 7 –
TUESDAY, APRIL 8, 2014**

*Loews Coronado Bay Resort
Coronado, CA, USA*

INDUSTRY PARTICIPATION

Registration by employees of commercial entities is limited to two individuals per company.

HOTEL RESERVATIONS

Stay at the official ISHLT Academy hotel and be at the heart of the action! An exclusive ISHLT room rate of \$219.00 plus tax has been negotiated with the Loews Coronado Bay Resort in Coronado, CA. You may make your reservation by phone or online. The discounted rate is subject to availability and is guaranteed until March 24, 2014. After this date, all rooms will be released back to the hotel for public sale. All reservation requests must be accompanied by a credit card number in order to guarantee the reservation. The room rates that are indicated here are based on single/double occupancy per night. Breakfast is not included. The cancellation and refund policy for your reservation will be described in the reservation confirmation letter that you will receive directly from the hotel.

Please identify yourself as attending the ISHLT Academy when making your reservation through the Loews Reservations Center.

Online: <https://resweb.passkey.com/go/ISHLTMCS2014>
Phone: 1-800-815-6397

SCIENTIFIC PROGRAM COMMITTEE

James Kirklin, MD, Co-Chair
Robert Kormos, MD, Co-Chair
Daniel Goldstein, MD
Ulrich Jorde, MD
Stephan Schueler, MD
Martin Strueber, MD
Jeff Teuteberg, MD

INVITED FACULTY FOR BOTH MCS ACADEMIES

Nicholas R. Banner, FRCP, Harefield NHS Foundation, Bucks, United Kingdom
Andrew J. Boyle, MD, Cleveland Clinic Florida, Weston, FL, USA
Shashank S. Desai, MD, Inova Fairfax Hospital, Falls Church, CA, USA
David Feldman, MD, Abbott Northwestern Hospital, Minneapolis, MN, USA
Lee R. Goldberg, MD, MPH, University of Pennsylvania, Philadelphia, PA, USA
Daniel J. Goldstein, MD, Montefiore Medical Center, Bronx, New York, USA
Ulrich P. Jorde, MD, Columbia University, New York, NY, USA
Jim K. Kirklin, MD, University of Alabama at Birmingham, Birmingham, AL, USA
Robert L. Kormos, MD, University of Pittsburgh Medical Center, Pittsburgh, PA, USA
Pascal N. LePrince, MD, PhD, Pitie Salpetriere, Paris, France
Nader Moazami, MD, Cleveland Clinic, Cleveland, OH, USA
Francis D. Pagani, MD, PhD, University of Michigan, Ann Arbor, MI, USA
Salpy V. Pamboukian, MD, MSPH, University of Alabama at Birmingham, AL, USA
Michael G. Petty, PhD, RN, University of Minnesota Medical Center, Minneapolis, MN, USA
Evjenij V. Potapov, MD, PhD, German Heart Institute, Berlin, Germany
Vivek Rao, MD, PhD, Toronto General Hospital, Toronto, Canada
Joseph G. Rogers, MD, Duke University, Durham, NC, USA
Stephan Schueler, MD, PhD, FRCS, Newcastle Upon Tyne, United Kingdom
Mark S. Slaughter, MD, University of Louisville, KY, USA
Martin Strueber, MD, University Heart Center Leipzig, Germany
Benjamin C. Sun, MD, Abbot Northwestern Hospital, Minneapolis, MN, USA
Jeffrey J. Teuteberg, MD, University of Pittsburgh, USA
Andreas Zuckermann, MD, PhD, University of Vienna, Vienna, Austria



CONTINUING MEDICAL EDUCATION INFORMATION

Accreditation Statement

The International Society for Heart and Lung Transplantation (ISHLT) is accredited by the Accreditation Council for Continuing Medical Education (ACCME) to provide continuing medical education for physicians.

Credit Designation Statement

ISHLT designates this live activity for a maximum of 11 *AMA PRA Category 1 Credits*.™ Physicians should claim only the credit commensurate with the extent of their participation in the activity.

Disclosure

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Learning Objectives

At the conclusion of this meeting, participants will have improved competence and professional performance in their abilities to:

- 1) Understand the latest information and advanced approaches regarding MCS research, surgical techniques, and patient management for mechanical circulatory support of patients suffering from advanced heart failure.
- 2) Integrate the state-of-the-art treatment approaches, risk factor stratification and patient selection criteria for patients receiving durable mechanical circulatory support devices.
- 3) Apply disease prevention strategies, outcome implications, and psychosocial management strategies in this patient population.
- 4) Understand emerging technologies, surgical advances, and the clinical applications of continuous flow devices in the management of end-stage heart failure.

Educational Goals

The educational goals of this activity are to provide an in-depth exploration and application of current knowledge and practices that can lead to better outcomes with mechanical circulatory support. The ISHLT MASTERS Academy provides didactic plenary lectures as well as moderated debates, meet the expert panel discussions and case presentations on specific topics beyond core competencies via small group sessions.

Target Audience

The target audience for this course is experienced MCS physicians and surgeons seeking to achieve a deeper understanding of the specialty and seeking to learn via the sharing of knowledge and experiences with other experts.

SCIENTIFIC PROGRAM SCHEDULE

NOTE: Each of the small group discussion breakouts will focus on a selection of the following topics:

LV UNLOADING: AXIAL VS CENTRIFUGAL

HOW IMPORTANT IS MONITORING ANTIPLATELET THERAPY AND HOW DO WE BEST DO IT

PRO CON: ALWAYS BRIDGE WITH HEPARIN EARLY POSTOP

PRO CON: REPLACE AOV FOR MILD AI

BEST PUMP CHOICE IN LARGE LV WITH LATERAL DISPLACEMENT

PRO CON: HVAD THROUGH MINITHORACOTOMY FOR MULTIPLE PREVIOUS STERNOTOMIES

PUMP THROMBUS: OPTIMAL MANAGEMENT STRATEGIES

PRO CON: PUMP SPEED: LET AO VALVE OPEN

BIVAD HVAD VS LVAD + TEMP RVAD: HOW TO DECIDE

MASTERS COURSE

WHAT IS THE MOST EFFECTIVE PUMP WEANING ALGORITHM?

WHAT ARE THE NATURAL HISTORY AND THERAPEUTIC OPTIONS FOR DE NOVO AI POST IMPLANT?

ACQUIRED VON WILLEBRAND SYNDROME: PATHOPHYSIOLOGY, DIAGNOSIS, AND RELEVANCE

PHYSIOLOGY OF LEFT VENTRICULAR UNLOADING AND THE IMPACT ON RIGHT VENTRICULAR FUNCTION

COMPREHENSIVE ECHO ASSESSMENT OF PUMP POSITIONING AND PERFORMANCE IN THE OPERATING ROOM

IMAGING TECHNIQUES TO ASSESS VARIOUS TYPES OF PUMP MALFUNCTION

OPTIMIZING THE PATIENT PRE IMPLANT

DOES THE EARLY RISK OF TRANSPLANT JUSTIFY TRANSPLANTATION FOR STABLE, WELL BTT PATIENTS?

OPTIMAL SURVEILLANCE PROGRAM FOR HOME BASED CARE

FINANCIAL ASPECTS OF MCS THERAPY: REIMBURSEMENT, DOWNSTREAM REVENUE, AND PROGRAM VIABILITY

TAILORING ANTICOAGULATION IN THE SETTING OF BLEEDING COMPLICATIONS

USE AND INTERPRETATION OF RAMP STUDIES

HOW DO YOU MAKE THE DECISION TO EXPLANT FOR RECOVERY?

WHAT IS YOUR STRATEGY FOR IMPLANTATION IN LEVEL 1 PATIENTS?

USE OF NO AND OTHER THERAPIES FOR RV DYSFUNCTION

SPECIAL TECHNIQUES FOR THE DIFFICULT HEART TRANSPLANT AFTER PRIOR VAD IMPLANT

PUMP EXPLANT: WHEN SHOULD PUMP BE TURNED OFF BUT LEFT IN PLACE?

WHEN AND HOW SHOULD A PATIENT BE REFERRED FOR PALLIATIVE CARE?

SURGICAL APPROACHES TO MODERATE AI AT TIME OF IMPLANT

STRATEGIES FOR DRIVELINE INFECTION PREVENTION AND DEFINITIVE TREATMENT

SENSITIZATION POST VAD IMPLANT: STRATEGIES FOR AN UNCOMMON OCCURRENCE

PEDIATRIC VADS: STRATEGIES FOR THE TEENAGE PATIENT

WHEN IS THE TAH PREFERABLE TO BIVAD SUPPORT?

PROTOCOLS FOR MULTI DISCIPLINARY DISCHARGE MANAGEMENT AND FOLLOW UP

ECMO VS TEMPORARY BI VENTRICULAR SUPPORT

TIMING OF LISTING DURING MCS SUPPORT

MONDAY, APRIL 7, 2014

12:00 PM – 1:00 PM

REGISTRATION

1:00 PM – 1:05 PM

INTRODUCTION, WELCOME, AND BRIEF OVERVIEW

1:05 PM – 2:00 PM

PLENARY SESSION 1

1:05 PM Hemolysis after MCS: Causes, Quantification, and Relationship to Thrombosis

1:30 PM Q&A

1:35 PM Pump Thrombosis from an Engineering Perspective: Speculation on Recent Trends in Thrombosis Events

1:55 PM Q&A

2:00 PM – 3:00 PM

**CONCURRENT SMALL GROUP
BREAK OUT SESSIONS**

3:00 PM – 3:30 PM

COFFEE BREAK

3:30 PM – 4:30 PM

**CONCURRENT SMALL GROUP
BREAK OUT SESSIONS**

4:30 PM – 5:40 PM

PLENARY SESSION 2

4:30 PM **Cardiorenal Syndrome and MCS Therapy:
Terminology, Predictors, Management
and Outcomes**

4:50 PM Q&A

5:00 PM **RV Failure Post-VAD:
Definitions, Predictors, Evidence-based
Management, and Reversibility**

5:20 PM Q&A

5:30 PM – 6:30 PM

RECEPTION

TUESDAY, APRIL 8, 2014

7:30 AM – 8:00 AM

MORNING COFFEE

8:00 AM – 9:00 AM

**CONCURRENT SMALL GROUP
BREAK OUT SESSIONS**

9:00 AM – 10:00 AM

PLENARY SESSION 4

9:00 AM **Revive-It:
Update and Speculation about the
Generalizability of Findings**

9:20 AM Q&A

9:30 AM **Extending Indications and Coverage
to INTERMACS Levels 4-7:
What is our strategy?**

9:50 AM Q&A

10:00 AM – 10:30 AM

COFFEE BREAK

10:30 AM – 11:30 AM

**CONCURRENT SMALL GROUP
BREAK OUT SESSIONS**

11:30 AM – 12:30 PM

**CONCURRENT SMALL GROUP
BREAK OUT SESSIONS**

12:30 PM – 1:30 PM

BOX LUNCH/NETWORKING

1:30 PM – 2:30 PM

**CONCURRENT SMALL GROUP
BREAK OUT SESSIONS**

2:30 PM – 3:30 PM

**CONCURRENT SMALL GROUP
BREAK OUT SESSIONS**

3:30 PM – 4:00 PM

COFFEE BREAK

4:00 PM – 5:00 PM

PLENARY SESSION 5

4:00 PM **Pediatric MCS Therapy:
The Next 5 Years**

4:20 PM Q&A

4:30 PM **Unique Engineering Aspects
of Emerging Pumps**

4:50 PM Q&A

5:00 PM Summary/Adjourn

ISHLT ACADEMY: CORE COMPETENCIES IN BASIC SCIENCE AND TRANSLATIONAL RESEARCH

CHAIRS: Esmé Dijke, PhD and
Tereza Martinu, MD

**WEDNESDAY,
APRIL 9, 2014**
*Manchester Grand Hyatt
Hotel · San Diego, CA, USA*

SCIENTIFIC PROGRAM COMMITTEE

Esmé Dijke, PhD, University of
Alberta, Edmonton, AB, Canada
(Co-Chair)

Tereza Martinu, MD, Duke University
Medical Center, Durham, NC, USA
(Co-Chair)

Christopher H. Wigfield, MD, FRCS,
University of Chicago, Chicago, IL,
USA (Co-Chair)

Sonja Schrepfer, MD, PhD, Stanford
University, Stanford, CA (Co-Chair)

Carla C. Baan, PhD, Erasmus MC,
Rotterdam, The Netherlands

Marilia Cascalho, MD, PhD,
University of Michigan Hospital,
Ann Arbor, MI, USA

**Daniel C. Chambers, MBBS, MRCP,
FRACP, MD**, The Prince Charles
Hospital, Brisbane, Australia

Kimberly L. Gandy, MD, PhD, Univer-
sity of Missouri, Kansas City, MO, USA

Richard Kirk, FRCP, FRCPCH,
Freeman Hospital, Newcastle Upon
Tyne, United Kingdom

CONTINUING MEDICAL EDUCATION INFORMATION

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Credit Designation Statement

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Disclosure

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Learning Objectives

At the conclusion of this meeting, participants will have improved competence and professional performance in their abilities to:

- 1) Understand basic concepts in transplant-related immunology and molecular biology;
- 2) Recognize key analytical techniques and models used in transplantation research;
- 3) Understand basic mechanisms of immunosuppression;
- 4) Recognize key contributions from basic research in transplantation that improved clinical outcomes in heart and lung transplantation;
- 5) Recognize how clinical questions may inspire basic research;
- 6) Enable effective communication between research scientists and clinicians and health care professionals.

Educational Goals

The educational goals of this activity are to provide a concise review of basic concepts in transplant-related immunology and molecular biology, to define and promote the clinical relevance of BSTR related to heart and lung transplantation and to encourage interaction between basic scientists, translational researchers and clinicians via a networking opportunity.

Target Audience

This course is designed to focus on core competencies in Basic Science and Translational Research and will fill gaps in practice by assisting clinicians in improving their understanding of the scientific background behind clinical practice, updating basic and translational researchers on recent discoveries, encouraging interaction between basic/translational researchers and clinicians and stimulating discussion of common basic topics in the fields of heart versus lung failure and transplantation. This first ISHLT BSTR Academy will focus on basic concepts in immunology and molecular biology related to heart and lung transplantation.

SCIENTIFIC PROGRAM SCHEDULE

7:00 AM - 7:45 AM

REGISTRATION AND MORNING COFFEE

7:45 AM - 8:00 AM

WELCOME AND INTRODUCTIONS

8:00 AM - 9:00 AM

SESSION 1: THE BASICS

8:00 AM **Clinical Transplant Medicine for Basic Scientists**, TOBIAS DEUSE, MD, PHD, UNIVERSITY HEART CENTER, HAMBURG, GERMANY

This talk will help the basic/translational scientist understand subsequent case presentations and clinical relevance of the basic science.

8:25 AM **Q&A**

8:30 AM **Basic Transplant Immunology for Clinicians**, JAMES F. GEORGE, PHD, UNIVERSITY OF ALABAMA, BIRMINGHAM, AL, USA

This talk will discuss major players of the immune system, the properties of the innate and adaptive immune system, recognition of antigens, self versus non-self discrimination, cell regulation and what this all means in the context of transplantation.

8:55 AM **Q&A**

9:00 AM - 10:00 AM

SESSION 2: ISCHEMIA REPERFUSION INJURY

9:00 AM **Case Presentation on Cardiac Ischemia Reperfusion Injury**, HENRY MATTHEW GALLAGHER, MBCHB FRACP, THE PRINCE CHARLES HOSPITAL, BRISBANE, AUSTRALIA

9:05 AM **How Would YOU Like to Sit in an Ice Bucket? The Basics of Ischemia Reperfusion Injury**, DANIEL KREISEL, MD, PHD, WASHINGTON UNIVERSITY SCHOOL OF MEDICINE, ST. LOUIS, MO, USA

This talk will provide an overview of the basic mechanisms of IRI, including specific assays such as intravital imaging/immunofluorescence.

9:20 AM **Cardiac IRI – Engine Failure in a Single-Engine Plane**, OLIVIER MANINTVELD, MD, ERASMUS MEDICAL CENTER, ROTTERDAM, THE NETHERLANDS

This talk will discuss specific considerations for heart transplantation, basic (including pre-clinical models) and translational research on IRI in this field and how this research relates to the clinic.

9:35 AM **Lung IRI – It Will Take Your Breath Away**, GEERT M. VERLEDEN, MD, PHD, UNIVERSITY HOSPITAL GASTHUISBERG, LEUVEN, BELGIUM

This talk will discuss specific considerations for lung transplantation, basic (including pre-clinical models) and translational research on IRI in this field and how this research relates to the clinic.

9:50 AM **Q&A**

10:00 AM - 10:30 AM

COFFEE BREAK

10:30 AM - 11:30 AM

SESSION 3: ACUTE REJECTION

10:30 AM **Case Presentation on Pulmonary Acute Rejection**, WILLIAM E. STANSFIELD, MD, UNIVERSITY OF NORTH CAROLINA, CHAPELHILL, NC, USA

10:35 AM **The Nuts and Bolts of Acute Cellular Rejection**, MARILIA CASCALHO, MD, PHD, UNIVERSITY OF MICHIGAN HOSPITAL, ANN ARBOR, MI, USA

This talk will provide an overview of the immunology behind acute rejection, including specific assays to determine cell activation/ function, such as flow cytometry, MLR, and ELISPOT

10:50 AM **Pump Down – Acute Cardiac Rejection**, HOWARD J. EISEN, MD, DREXEL UNIVERSITY COLLEGE OF MEDICINE, PHILADELPHIA, PA, USA

This talk will discuss specific considerations for heart transplantation, basic (including pre-clinical models) and translational research on AR in this field and how this research relates to the clinic.

11:05 AM **Acute Lung Rejection – Why it Sucks to be Lungs**, REBECCA A. SHILLING, MD, UNIVERSITY OF ILLINOIS, CHICAGO, IL, USA

This talk will discuss specific considerations for lung transplantation, basic (including pre-clinical models) and translational research on acute rejection in this field and how this research relates to the clinic.

11:20 AM **Q&A**

11:30 AM - NOON
SESSION 4: PHARMACOLOGY I

11:30 AM **Antidotes for Alloimmunity – Principles of T-cell Directed Therapies**, MICHAEL SHULLO, PHARM.D, UNIVERSITY OF PITTSBURGH MEDICAL CENTER, PITTSBURGH, PA, USA

This talk will provide an overview of T-cell directed therapies and their mode of action.

11:55 AM **Q&A**

NOON - 1:00 PM
BOX LUNCH AND NETWORKING

1:00 PM - 2:00 PM
SESSION 5: ANTIBODY-MEDIATED REJECTION

1:00 PM **Case Presentation on Cardiac Antibody-mediated Rejection**, MANREET KANWAR, MD, ALLEGHENY GENERAL HOSPITAL, PITTSBURGH, PA, USA

1:05 PM **The Alphabet of AMR – Antibodies, B cells, Complement**, RONALD H. KERMAN, PH.D, BAYLOR COLLEGE OF MEDICINE, HOUSTON, TX, USA

This talk will provide an overview of the immunology behind antibody-mediated rejection, including specific assays for antibody detection

1:20 PM **AMR in Heart Transplantation – Don't We Know What We Know?** AGNES AZIMZADEH, PH.D, UNIVERSITY OF MARYLAND SCHOOL OF MEDICINE, BALTIMORE, MD, USA

This talk will discuss specific considerations for heart transplantation, basic (including pre-clinical models) and translational research on AMR in this field and how this research relates to the clinic.

1:35 PM **AMR in Lung Transplantation – Do We Know What We Don't Know?** GLEN P. WESTALL, FRACP, PH.D, ALFRED HOSPITAL, MELBOURNE, VC, AUSTRALIA, USA

This talk will discuss specific considerations for lung transplantation, basic (including pre-clinical models) and translational research on AMR in this field and how this research relates to the clinic.

1:50 PM **Q&A**

2:00 PM - 2:30 PM
SESSION 6: PHARMACOLOGY II:

2:00 PM **AMR-directed Therapies: Poisoning, Blockade, or Removal – Take your Pick!** RICHARD KIRK, FRCP, FRCPCH, FREEMAN HOSPITAL, NEWCASTLE UPON TYNE, UNITED KINGDOM

This talk will provide an overview of B-cell directed therapies and their mode of action. The presentation will also include new B-cell directed therapies.

2:25 PM **Q&A**

2:30 PM - 2:50 PM
SESSION 7: MOLECULAR BIOLOGY

2:30 PM **From Genes to Proteins: Stacking the Building Blocks of Science**, KARIN BOER, DEPARTMENT OF (NEURO)PATHOLOGY, ACADEMIC MEDICAL CENTER, UNIVERSITY OF AMSTERDAM, AMSTERDAM, THE NETHERLANDS

This presentation will discuss the basics of select key concepts in molecular biology that are hot in transplantation research. The speaker will focus on laboratory methods used in the analysis of the genome, transcriptome, and proteome, and will touch upon the concepts of epigenetics, microRNA, siRNA, and methylation.

2:45 PM **Q&A**

2:50 PM - 3:15 PM

COFFEE BREAK

3:15 PM - 4:15 PM

SESSION 8: CHRONIC REJECTION

3:15 PM **Case Presentation on Lung Allograft Chronic Rejection**, ANDREAS FIENE, FRACP, THE PRINCE CHARLES HOSPITAL, BRISBANE, AUSTRALIA

3:20 PM **Chronic Rejection – Is it even ‘Rejection’ at all?** STEPHAN M. ENSMINGER, MD, DPHIL, HEART & DIABETES CENTER, BAD OEYNHAUSEN, GERMANY

This talk will provide an overview of the immunology behind chronic rejection, including specific assays used to study chronic rejection, including cytokine detection and proteomics.

3:35 PM **Mechanisms of Chronic Allograft Vasculopathy – Do we have the Answers?** JOREN C. MADSEN, MD, D.PHIL, MASSACHUSETTS GENERAL HOSPITAL, BOSTON, MA, USA

This talk will discuss specific considerations for heart transplantation, basic (including pre-clinical models) and translational research on CR in this field and how this research relates to the clinic.

3:50 PM **Mechanisms of Bronchiolitis Obliterans – Answers on the Horizon?** BART M. VANAUDENAERDE, PHD, KULEUVEN, LEUVEN, BELGIUM

This talk will discuss specific considerations for lung transplantation, basic (including pre-clinical models) and translational research on CR in this field and how this research relates to the clinic.

4:05 PM **Q&A**

4:15 PM - 4:45 PM
SESSION 9: TOLERANCE

4:15 PM **Will We Ever Tolerate the Intolerable?** LORI J. WEST, MD, D.PHIL, UNIVERSITY OF ALBERTA, EDMONTON, AB, CANADA

This presentation will review the concept of tolerance, how tolerance may be induced/broken, cells that may play a role in the induction of tolerance (regulatory T/B cells, stem cells), translation of animal to human, and how tolerance can be measured.

4:40 PM **Q&A**

4:45 PM - 6:00 PM
SESSION 10: BACK TO THE FUTURE

4:45 PM **It's all About Priorities – The Basic Scientist's Point of View**, ESMÉ DIJKE, PHD, UNIVERSITY OF ALBERTA, EDMONTON, AB, CANADA

This talk will discuss the current and future research priorities of basic researchers in the field of heart and lung transplantation based on recent literature.

5:00 PM **It's all About Priorities – The Clinician's Point of View**, TEREZA MARTINU, MD, DUKE UNIVERSITY MEDICAL CENTER, DURHAM, NC, USA

This talk will discuss the current and future research priorities of clinicians in the field of heart and lung transplantation based on recent literature.

5:15 PM **Panel Discussion: How to Translate Better and Faster?**

DANIEL C. CHAMBERS, MBBS, MRCP, FRACP, MD, THE PRINCE CHARLES HOSPITAL, BRISBANE, AUSTRALIA;

CARLA BAAN, PHD, ERASMUS MC, ROTTERDAM, THE NETHERLANDS;

KIMBERLY L. GANDY, MD, PHD, UNIVERSITY OF MISSOURI, KANSAS CITY, MO, USA;

SONJA SCHREPFFER, MD, PHD, STANFORD UNIVERSITY, STANFORD, CA, USA

5:30 PM **Wrap up**, TEREZA MARTINU, MD, DUKE UNIVERSITY MEDICAL CENTER, DURHAM, NC, USA

6:00 PM **ADJOURN**

ISHLT ACADEMY: CORE COMPETENCIES IN HEART FAILURE AND CARDIAC TRANSPLANT MEDICINE

Chairs: José A. Tallaj, MD and
David A. Baran, MD

**WEDNESDAY
APRIL 9, 2014**

*Manchester Grand Hyatt
Hotel • San Diego, CA, USA*

SCIENTIFIC PROGRAM COMMITTEE

David A. Baran, MD, Newark Beth Israel Medical Center, Newark, NJ, USA, Co-Chair

José A. Tallaj, MD, University of Alabama at Birmingham, AL, USA, Co-Chair

Marisa G. Crespo-Leiro, MD, Hospital Universitario, La Coruña, Spain

Eugene C. DePasquale, MD, David Geffen School of Medicine, Los Angeles, CA, USA

Lee R. Goldberg, MD, MPH, University of Pennsylvania, Philadelphia, PA, USA

Debra L. Isaac, MD, Foothills Hospital, Calgary, AB, Canada

Jon Kobashigawa, MD, Cedars-Sinai Heart Institute, Los Angeles, CA, USA

Peter MacDonald, MD, PhD, St. Vincent's Hospital, Sydney, Australia

Jeffrey J. Teuteberg, MD, University of Pittsburgh Medical Center, Pittsburgh, PA, USA

Andreas Zuckermann, MD, Medical University of Vienna, Vienna, Austria

CONTINUING MEDICAL EDUCATION INFORMATION

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Summary:

The ISHLT Academy: Core Competencies in Heart Failure and Transplant Medicine will provide a concise review of clinical knowledge and essential professional skills to facilitate best practice of surgical and medical aspects involved in the care of patients with advanced heart failure, assessment as candidates and as recipients of mechanical circulatory device and heart transplantation. The course consists of focused presentations with an emphasis on clinical practice. All lectures will be delivered by internationally recognized experts in the field. Related topics will be discussed in Question and Answer sessions following each section. The course will be interactive and assist participants with more detailed individual review. This course is designed to be of benefit for both seasoned clinicians and allied professionals practicing in the field, but is primarily arranged for current trainee physicians, current fellows, and providers in the early stages of their careers.

The course is based on the ISHLT Heart Failure and Transplant Medicine Core Competency Curriculum (ISHLT HFTM CCC), which will be available on the ISHLT web site in May 2014. Extensive referencing in that document should assist selective individual study and review of published evidence for each topic. The ISHLT HFTM CCC document also includes active hyperlinks and related multi-media resources. The core curriculum also serves hospital programs with a tool to review their standards of care, develop protocols and implement current guidelines established in advanced heart failure.

Learning Objectives

At the conclusion of this meeting, participants will have improved competence and professional performance in their ability to:

- 1) Understand the general concepts, definitions and general principles of management of patients with heart failure with depressed and preserved ejection fraction.
- 2) Identify the clinical signs and risk factors of patients with end stage heart failure.
- 3) Understand the general concepts, definitions and general principles of management of patients with pulmonary hypertension.
- 4) Understand indications and timing for advanced therapies in end-stage heart failure.
- 5) Recognize the various types of mechanical circulatory support, their outcomes, and rates of adverse events.
- 6) Understand the general immunological basis for transplantation, its therapeutic targets and potential complications.
- 7) Understand the socio-economic burden of mechanical circulatory devices and heart transplantation.

Educational Goals

The educational goals of this activity are to provide a concise review of clinical knowledge and essential professional skills to facilitate best practice of surgical and medical aspects involved in the care of patients with advanced heart failure.

Target Audience

While all members are invited to enroll, this course is primarily designed to be of benefit for clinicians and allied professionals who **are in the early stages** of their careers or who **are in training, are part of a new program or desire an update** on the current state of the field. The information presented is intended to provide a strong foundation of the overarching principles of heart failure and transplant medicine, rather than as a detailed update for those who are already proficient in the field.

SCIENTIFIC PROGRAM SCHEDULE

7:00 AM - 7:45 AM

REGISTRATION AND MORNING COFFEE

7:45 AM - 8:00 AM

WELCOME AND INTRODUCTIONS

8:00 AM - 8:45 AM

SESSION 1: HEART FAILURE: GENERAL OVERVIEW AND CONCEPTS

8:00 AM **Epidemiology of Heart Failure**, LEE R. GOLDBERG, MD, MPH, UNIVERSITY OF PENNSYLVANIA, PHILADELPHIA, PA, USA

8:15 AM **Pathophysiology of Heart Failure: Neurohormones and Beyond**, FINN GUSTAFSSON, MD, PHD, DMSCI, RIGSHOSPITALET, COPENHAGEN, DENMARK

8:30 AM **Types of Cardiomyopathy: The Usual Suspects**, EUGENE C. DEPASQUALE, MD, DAVID GEFEN SCHOOL OF MEDICINE, LOS ANGELES, CA, USA

8:45 AM - 9:30 AM

SESSION 2: EVALUATION OF PATIENTS WITH HEART FAILURE

8:45 AM **Initial Evaluation of the Patient with Heart Failure**, MARISA G. CRESPO-LEIRO, MD, HOSPITAL UNIVERSITARIO, LA CORUÑA, SPAIN

9:00 AM **Right Heart Catheterization and Hemodynamic Monitoring**, JOSÉ A. TALLAJ, MD, UNIVERSITY OF ALABAMA AT BIRMINGHAM, BIRMINGHAM, AL, USA

9:15 AM **Risk Stratification – Is it time for Advanced Therapies?** LEE R. GOLDBERG, MD, MPH, UNIVERSITY OF PENNSYLVANIA, PHILADELPHIA, PA, USA

9:30 AM - 10:30 AM

SESSION 3: MANAGEMENT OF THE PATIENT WITH CHRONIC LEFT VENTRICULAR SYSTOLIC DYSFUNCTION

9:30 AM **Pharmacological Management**, DEBRA L. ISAAC, MD, FOOTHILLS HOSPITAL, CALGARY, AB, CANADA

9:45 AM **Non-pharmacological Management**, PETER MACDONALD, MD, PHD, ST. VINCENT'S HOSPITAL, SYDNEY, AUSTRALIA

10:00 AM **(Electrical) Device-based Therapy**, MICHEL WHITE, MD, MONTREAL HEART INSTITUTE, MONTREAL, CANADA

10:15 AM **Surgical Management of Ischemic Heart Failure in the Post-STICH Era**, CARMELO A. MILANO, MD, DUKE UNIVERSITY MEDICAL CENTER, DURHAM, NC, USA

10:30 AM - 10:45 AM
COFFEE BREAK

10:45 AM - 11:45 AM
SESSION 4: ACUTE HEART FAILURE EVALUATION AND MANAGEMENT

10:45 AM **ADHF: The Scope of the Problem**, MARISA G. CRESPO-LEIRO, MD, HOSPITAL UNIVERSITARIO, LA CORUÑA, SPAIN

11:00 AM **ADHF: Pharmacologic Management: What Does the Evidence Show Us?** HEATHER J. ROSS, MD, MHSC, FRCPC, TORONTO GENERAL HOSPITAL, TORONTO, CANADA

11:15 AM **ADHF: Crash and Burn. Percutaneous Tools for Severe Decompensation**, JEFFREY J. TEUTEBERG, MD, UNIVERSITY OF PITTSBURGH MEDICAL CENTER, PITTSBURGH, PA, USA

11:30 AM **ADHF: Bridge over Troubled Waters. Transitions of Care: Home Inotropes, VADs and Hospice**, DAVID A. BARAN, MD, NEWARK BETH ISRAEL MEDICAL CENTER, NEWARK, NJ, USA

11:45 AM - 12:00 PM
QA SESSION WITH ALL MORNING SPEAKERS

12:00 PM - 1:00 PM
BOX LUNCH AND NETWORKING

12:15 PM - 12:45 PM
SPECIAL SESSION: How to Prepare for the Advanced Heart Failure and Transplant Cardiology Exam (US Boards)

DEEPAK ACHARYA, MD, UNIVERSITY OF ALABAMA AT BIRMINGHAM, BIRMINGHAM, AL, USA

1:00 PM - 1:45 PM
SESSION 5: HEART FAILURE WITH PRESERVED EJECTION FRACTION

1:00 PM **Heart Failure with Preserved Ejection Fraction: The Scope of the Problem**, MONICA M. COLVIN-ADAMS, MD, UNIVERSITY OF MINNESOTA, MINNEAPOLIS, MN, USA

1:15 PM **Heart Failure with Preserved Ejection Fraction: Diagnosis**, FINN GUSTAFSSON, MD, PHD, DMSCI, RIGSHOSPITALET, COPENHAGEN, DENMARK

1:30 PM **Heart Failure with Preserved Ejection Fraction: Therapeutic Options**, EUGENE C. DEPASQUALE, MD, DAVID GEFFEN SCHOOL OF MEDICINE, LOS ANGELES, CA, USA

1:45 PM - 2:30 PM
SESSION 6: PULMONARY ARTERIAL HYPERTENSION

1:45 PM **Overview of PAH**, DEBRA L. ISAAC, MD, FOOTHILLS HOSPITAL, CALGARY, AB, CANADA

2:00 PM **Pulmonary Hypertension in Heart Failure**, MARDI GOMBERG-MAITLAND, MD, UNIVERSITY OF CHICAGO MEDICAL CENTER, CHICAGO, IL, USA

2:15 PM **Case Presentations with Panel Discussion**, DEBRA L. ISAAC, MD, FOOTHILLS HOSPITAL, CALGARY, AB, CANADA AND MARDI GOMBERG-MAITLAND, MD, UNIVERSITY OF CHICAGO MEDICAL CENTER, CHICAGO, IL, USA

2:30 PM - 2:45 PM
COFFEE BREAK

2:45 PM - 4:15 PM
SESSION 7: HEART TRANSPLANT 101

2:45 PM **Evaluation of Heart Transplant Candidates**, HEATHER J. ROSS, MD, MHSC, FRCPC, TORONTO GENERAL HOSPITAL, TORONTO, CANADA

3:00 PM **Evaluation and Management of the Potential Heart Donor**, ANDREAS ZUCKERMANN, MD, MEDICAL UNIVERSITY OF VIENNA, VIENNA, AUSTRIA

3:15 PM **Peri-operative Management of the Heart Transplant Recipient**, PETER MACDONALD, MD, PHD, ST. VINCENT'S HOSPITAL, SYDNEY, AUSTRALIA

3:30 PM **Immunologic Concepts of Heart Transplantation**, ANDREAS ZUCKERMANN, MD, MEDICAL UNIVERSITY OF VIENNA, VIENNA, AUSTRIA

3:45 PM **Immunosuppression and Rejection**, DAVID A. BARAN, MD, NEWARK BETH ISRAEL MEDICAL CENTER, NEWARK, NJ, USA

4:00 PM **Long-term Care of Heart Transplant Recipients**, JON KOBASHIGAWA, MD, CEDARS-SINAI HEART INSTITUTE, LOS ANGELES, CA, USA



4:15 PM - 4:30 PM

COFFEE BREAK

4:30 PM - 5:30 PM

**SESSION 8: MECHANICAL
CIRCULATORY SUPPORT IN
A NUTSHELL**

4:30 PM **MCS in 2014: State of the Art**, EVGENIJ V. POTAPOV, MD, PHD, DEUTSCHES HERZZENTRUM, BERLIN, GERMANY

4:45 PM **Patient Selection and Timing**, JEFFREY J. TEUTEBERG, MD, UNIVERSITY OF PITTSBURGH, PITTSBURGH, PA, USA

5:00 PM **Practical Peri-operative Management of MCS Patients**, JOSÉ A. TALLAJ, MD, UNIVERSITY OF ALABAMA AT BIRMINGHAM, AL, USA

5:15 PM **Adverse Events Post-VAD placement**, CARMELO A. MILANO, MD, DUKE UNIVERSITY MEDICAL CENTER, DURHAM, NC, USA

5:30 PM - 5:45 PM

**QA SESSION WITH ALL
AFTERNOON SPEAKERS**

5:45 PM - 6:00 PM

**CLOSING ADDRESS:
Heart Failure and Trans-
plant: Where Will We Be
in 2024?** JON KOBASHIGAWA,
MD, CEDARS-SINAI HEART
INSTITUTE, LOS ANGELES,
CA, USA

6:00 PM **ADJOURN**

ISHLT ACADEMY: CORE COMPETENCIES IN NURSING, HEALTH SCIENCE AND ALLIED HEALTH

CHAIRS: **Connie White-Williams, PhD, RN, FAAN** and **Michael Petty, PhD, RN, CCNS, ACNS-BC**

**WEDNESDAY
APRIL 9, 2014**

*Manchester Grand Hyatt
Hotel • San Diego, CA, USA*

SCIENTIFIC PROGRAM COMMITTEE

Connie White-Williams, PhD, RN, FAAN, University of Alabama at Birmingham, Birmingham, AL, USA

Nancy P. Blumenthal, CRNP, University of Pennsylvania Medical Center, Philadelphia, PA, USA

Annemarie Kaan, MCN RN CCN(C) CCTN, St. Paul's Hospital, Vancouver, BC, Canada, USA

Michael G. Petty, PhD, RN, CCNS, ACNS-BC, University of Minnesota Medical Center, Minneapolis, MN, USA

Masina Scavuzzo, RN BScN CCTC, Barnes Jewish Hospital, St. Louis, MO, USA

Sharon A. Beer, RN, MSc, Old Queen Elizabeth Hospital, Birmingham, United Kingdom

CONTINUING MEDICAL EDUCATION INFORMATION

Credit Designation Statement

The ISHLT NNSA Council has applied for AACN and ABTC credits for this meeting.

Disclosure

Current guidelines state that participants in continuing professional 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 if a product they are discussing is not labeled for the use under discussion or is still investigational.

Learning Objectives

- 1) Review the beginning and growth of the role of the transplant coordinator
- 2) Discuss indications, contraindications, and evaluation process for patients being considered for heart and/or lung transplant
- 3) Explain the role of coordinators and other team members in the pre-transplant education for patients and families
- 4) Describe psychosocial considerations for transplant candidacy
- 5) Describe the collaborative activities of transplant coordinators, MCS coordinators, and other team members during the listing period including updated assessments and decisions to change listing status

- 6) Discuss management strategies for the sensitized patient and the coordinators' role in that process
- 7) Review basic immunology related to thoracic transplantation
- 8) Discuss the basic immunosuppression therapy utilized in this population
- 9) Discuss nursing management of the post-transplant patient, including patient education in preparation for discharge.
- 10) Describe specialized interventions for post-transplant patients discharged from the hospital with:
 - i. Socioeconomic and/or social support limitations
 - ii. Low health literacy and adherence
 - iii. Care across the age spectrum focusing on the very young and the elderly
- 11) Discuss complications of transplant including acute rejection, chronic rejection, infection, and malignancy
- 12) Describe the coordinators' role in surveillance and management
- 13) Explain end-of-life interventions in thoracic transplant
- 14) Discuss providing care for the family caregiver
- 15) Review career development strategies and work-life balance for the transplant coordinator, social worker, and other transplant professional.

Educational Goals

This Academy is intended to offer a concise synopsis of clinical knowledge to support mastery of pertinent aspects of the selection, pre-transplant, perioperative, and post-transplant management of the thoracic transplant organ recipient by Nursing, Health Sciences, and Allied Health professionals. In addition to basic knowledge, attention is also paid to patients with special needs who require transplantation and to the Nursing, Health Sciences, and Allied Health professional caring for this unique population.

Target Audience

The target audience will consist of the Nursing, Health Sciences, and Allied Health transplant professional in their early years and the more experienced professional that may want a refresher or to learn something new.

SCIENTIFIC PROGRAM SCHEDULE

7:00 AM - 7:45 AM

REGISTRATION AND MORNING COFFEE

7:45 AM - 8:00 AM

WELCOME AND INTRODUCTIONS, CHRISTOPHER H. WIGFIELD, FRCS, MD, UNIVERSITY OF CHICAGO, CHICAGO, IL, USA AND CONNIE WHITE-WILLIAMS, PHD, RN, FAAN, UNIVERSITY OF ALABAMA AT BIRMINGHAM, BIRMINGHAM, AL, USA

8:00 AM - 8:15 AM

Overview of Heart and Lung Transplantation and Coordination, PATRICIA GAMBERG, RN, CCTC, STANFORD UNIVERSITY MEDICAL CENTER, STANFORD, CA, USA

8:15 AM - 9:30 AM

SESSION 2: EVALUATION AND MANAGEMENT OF THE TRANSPLANT CANDIDATE

8:15 AM Referral and Indications/Contraindications for Heart and Lung Transplantation, ANNEMARIE KAAAN, MCN RN CCN(C) CCTN, ST PAUL'S HOSPITAL, VANCOUVER, BC, CANADA

8:30 AM Evaluation and Listing for Heart Transplant Candidates, ANNEMARIE KAAAN, MCN RN CCN(C) CCTN, ST PAUL'S HOSPITAL, VANCOUVER, BC, CANADA

8:45 AM Evaluation and Listing for Lung Transplant Candidates, MICHAEL G. PETTY PHD, RN, CCNS, ACNS-BC, UNIVERSITY OF MINNESOTA MEDICAL CENTER, MINNEAPOLIS, MN, USA

9:00 AM Pre-Transplant Patient and Family Education, ANNE MCDERMOTT, TRANSPLANT NURSE CONSULTANT, ROYAL BROMPTON & HAREFIELD NHS FOUNDATION TRUST, HAREFIELD HOSPITAL, HAREFIELD, UNITED KINGDOM

9:15 AM Pre-Transplant Psychosocial Issues, FABIENNE DOBBELS, MSC, PHD, UNIVERSITY HOSPITAL LEUVEN, LEUVEN, BELGIUM

9:30 AM Case Presentations and Q&A

9:45 AM - 10:00 AM

COFFEE BREAK

10:00 AM - 11:15 AM

SESSION 3: CARING FOR THE LISTED PATIENT

10:00 AM Collaboration Between Heart Transplant and MCS Coordinators with Patients on MCS Devices, MICHAEL G. PETTY, PHD, RN, CCNS, ACNS-BC, UNIVERSITY OF MINNESOTA MEDICAL CENTER, MINNEAPOLIS, MN, USA

10:15 AM Difficult Decisions During the Waiting Period, BERNICE L. COLEMAN, PHD, RN, CEDARS SINAI MEDICAL CENTER, LOS ANGELES, CA, USA

10:30 AM Managing Patients with Anti-HLA Antibodies and Desensitization Therapies, NANCY P. BLUMENTHAL, CRNP, UNIVERSITY OF PENNSYLVANIA MEDICAL CENTER, ARDMORE, PA, USA

10:45 AM The Heart and Lung Donor, GREGORY I. SNELL, FRCP, MBB, ADFRED HOSPITAL, MELBOURNE, VIC, AUSTRALIA

11:00 AM Q&A

INTERACTIVE SESSION: WHAT WOULD YOU DO IN THIS DONOR-RECIPIENT SITUATION?

11:15 AM - 11:45 AM

SESSION 4: TRANSPLANT MANAGEMENT 101

11:15 AM Immunology 101, JAMES GEORGE, PHD, UNIVERSITY OF ALABAMA AT BIRMINGHAM, BIRMINGHAM, AL, USA

11:30 AM Immunosuppression: Induction and Maintenance, PATRICIA UBER, PHARMD, UNIVERSITY OF MARYLAND, BALTIMORE, MD, USA

11:45 AM - 1:15 PM

BOX LUNCH/NETWORKING

1:15 PM - 2:15 PM

SESSION 5: IMMEDIATE POST TRANSPLANT CARE

1:15 PM **Immediate Post Transplant Management**, KATHLEEN L. GRADY, PHD, APN, FAAN, NORTHWESTERN MEMORIAL HOSPITAL, CHICAGO, IL, USA

1:30 PM **Management of Acute Cellular Rejection and Antibody Mediated Rejection**, KATHLEEN L. GRADY, PHD, APN, FAAN, NORTHWESTERN MEMORIAL HOSPITAL, CHICAGO, IL, USA

2:00 PM **Post-operative Patient Education**, ANNE MCDERMOTT, TRANSPLANT NURSE CONSULTANT, ROYAL BROMPTON & HAREFIELD NHS FOUNDATION TRUST, HAREFIELD HOSPITAL, HAREFIELD, UNITED KINGDOM

2:15 PM - 3:30 PM

SESSION 6: CARE OF THE PATIENT WITH SPECIAL NEEDS

2:15 PM **Poor Social Support and Low Socioeconomic Status**, SHARON A. BEER, RN, MSC, OLD QUEEN ELIZABETH HOSPITAL, BIRMINGHAM, UNITED KINGDOM

2:30 PM **Low Health Literacy and Adherence**, FABIENNE DOBBELS, MSC, PHD, UNIVERSITY HOSPITAL LEUVEN, LEUVEN, BELGIUM

2:45 PM **Care of the Very Young, School Age, and Adolescent**, SAMANTHA J. ANTHONY, PHD, MSW, HOSPITAL FOR SICK CHILDREN, TORONTO, ON, CANADA

3:00 PM **Care of the Older Age Patient**, CONNIE WHITE-WILLIAMS, PHD, RN, FAAN, UNIVERSITY OF ALABAMA AT BIRMINGHAM, BIRMINGHAM, AL, USA

3:15 PM **Case Presentations and Q&A**

3:30 PM - 3:45 PM

COFFEE BREAK

3:45 PM - 4:45 PM

SESSION 7: LONG TERM FOLLOW-UP

3:45 PM **Follow up Surveillance Program**, BERNICE L. COLEMAN, PHD, RN, CEDARS SINAI MEDICAL CENTER, LOS ANGELES, CA, USA

4:00 PM **Return to Work, School and Quality of Life**, CONNIE WHITE-WILLIAMS, PHD, RN, FAAN, UNIVERSITY OF ALABAMA AT BIRMINGHAM, BIRMINGHAM, AL, USA

4:15 PM **Infection and Malignancy**, MASINA SCAVUZZO, RN BSCN CCTC, BARNES JEWISH HOSPITAL, ST. LOUIS, MO, USA

4:30 PM **BOS and CAV**, JANE MACIVER, RN, MSC, TORONTO GENERAL HOSPITAL, TORONTO, ON, CANADA

4:45 PM **Case Presentations and Q&A**

5:00 PM - 6:00 PM

SESSION 8: CARING FOR OURSELVES AND OTHERS

5:00 PM **Care for the Caregiver**, SHARON A. BEER, RN, MSC, OLD QUEEN ELIZABETH HOSPITAL, BIRMINGHAM, UNITED KINGDOM

5:15 PM **Caring at the End of Life**, JANE MACIVER, RN, MSC, TORONTO GENERAL HOSPITAL, TORONTO, ON, CANADA

5:30 PM **Career Development Strategies**, NANCY P. BLUMENTHAL, CRNP, UNIVERSITY OF PENNSYLVANIA MEDICAL CENTER, ARDMORE, PA, USA

5:45 PM **Caring for the Transplant Coordinator Work-Life Balance**, QUINCY YOUNG, R.PSYCH, ST. PAUL'S HOSPITAL, VANCOUVER, BC, CANADA

6:00 PM **ADJOURN**

INTERNATIONAL SOCIETY FOR HEART AND LUNG TRANSPLANTATION
34th ANNUAL MEETING and SCIENTIFIC SESSIONS & ISHLT ACADEMIES
APRIL 10-13, 2014, SAN DIEGO, CA

REGISTRATION FORM

IMPORTANT: See reverse side of this form for instructions and refund/registration policies.
ON-LINE REGISTRATION IS ENCOURAGED AND IS AVAILABLE ON THE ISHLT WEBSITE: www.isHLT.org

Last Name: _____ First Name: _____ Middle Initial: _____

Credential (MD, RN, etc.): _____ Institution/Organization Name for Inclusion on Badge: _____

Preferred Mailing Address. Please indicate if this is a home or business address: Home Business
 Mailing Address: _____

City: _____ State: _____ Post Code: _____ Country: _____

Telephone: _____ Email: _____

(MANDATORY: CONFIRMATION WILL BE SENT BY EMAIL ONLY)

SCIENTIFIC SESSION REGISTRATION:

	Postmarked on or before February 24	Postmarked after February 24	TOTAL
Regular Member	<input type="checkbox"/> \$ 750	<input type="checkbox"/> \$ 850	\$ _____
Regular Non-Member†	<input type="checkbox"/> \$1025	<input type="checkbox"/> \$1125	\$ _____
Allied Health Member*	<input type="checkbox"/> \$ 450	<input type="checkbox"/> \$ 550	\$ _____
Allied Health Non-Member†	<input type="checkbox"/> \$ 725	<input type="checkbox"/> \$ 825	\$ _____
Student/Resident Member*	<input type="checkbox"/> \$ 350	<input type="checkbox"/> \$ 450	\$ _____
Student/Resident Non-Member*†	<input type="checkbox"/> \$ 475	<input type="checkbox"/> \$ 575	\$ _____

* See instruction #7

† Non-member registration prior to February 24, 2014 includes membership in the Society through December 31, 2014. See Instruction #3

Please check here if you wish to decline this membership offer (no refund or reduction of fee).

COCKTAIL RECEPTION (Saturday): (1 ticket is included with your registration fee)

Additional Tickets to Cocktail Reception for spouses/guests. _____ # of tickets x \$ 75 \$ _____

JUNIOR FACULTY MENTOR LUNCH: (Thursday)

Registration is limited to the first 100 student/resident/fellow members of ISHLT who are registered for the meeting. \$ 15 \$ 15 \$ _____

BOX LUNCHES:

Thursday	<input type="checkbox"/> \$ 15	<input type="checkbox"/> \$ 15	\$ _____
Friday	<input type="checkbox"/> \$ 15	<input type="checkbox"/> \$ 15	\$ _____
Saturday	<input type="checkbox"/> \$ 15	<input type="checkbox"/> \$ 15	\$ _____

DISCOUNTED REGISTRATION
(If ALSO registering for
the Annual Meeting)

FULL PRICE REGISTRATION
(If ONLY registering for
the Academy)

NOTE: Registration for each Academy is limited to the first 200 registrants; registration includes a box lunch. See Instruction #11

ISHLT ACADEMY: CORE COMPETENCIES IN MECHANICAL CIRCULATORY SUPPORT (April 7-8)

ISHLT Member	<input type="checkbox"/> \$ 225	<input type="checkbox"/> \$ 350	\$ _____
Non-ISHLT Member	<input type="checkbox"/> \$ 275	<input type="checkbox"/> \$ 400	\$ _____

ISHLT ACADEMY: MASTER COURSE IN MECHANICAL CIRCULATORY SUPPORT (April 7-8)

ISHLT Member	<input type="checkbox"/> \$ 225	<input type="checkbox"/> \$ 350	\$ _____
Non-ISHLT Member	<input type="checkbox"/> \$ 275	<input type="checkbox"/> \$ 400	\$ _____

ISHLT ACADEMY: CORE COMPETENCIES IN BASIC SCIENCE & TRANSLATIONAL RESEARCH (April 9)

ISHLT Member	<input type="checkbox"/> \$ 175	<input type="checkbox"/> \$ 300	\$ _____
Non-ISHLT Member	<input type="checkbox"/> \$ 225	<input type="checkbox"/> \$ 350	\$ _____

ISHLT ACADEMY: CORE COMPETENCIES IN HEART FAILURE AND TRANSPLANT MEDICINE (April 9)

ISHLT Member	<input type="checkbox"/> \$ 175	<input type="checkbox"/> \$ 300	\$ _____
Non-ISHLT Member	<input type="checkbox"/> \$ 225	<input type="checkbox"/> \$ 350	\$ _____

ISHLT ACADEMY: CORE COMPETENCIES IN NURSING, HEALTH SCIENCE & ALLIED HEALTH (April 9)

ISHLT Member	<input type="checkbox"/> \$ 175	<input type="checkbox"/> \$ 300	\$ _____
Non-ISHLT Member	<input type="checkbox"/> \$ 225	<input type="checkbox"/> \$ 350	\$ _____

TOTAL DUE AND ENCLOSED: \$ _____

PAYMENT: SEE INSTRUCTION #9 FOR WIRE TRANSFER INSTRUCTIONS. If not registering online, full payment in US funds only must accompany your registration form. Checks must be made payable to ISHLT and must be drawn on a US bank. If you prefer to pay by credit card and are not registering online, please complete the following and either mail or fax. (To avoid duplicate charges do not mail AND fax your form.)

Credit Card: VISA Mastercard American Express Card Number: _____

Card Holder Signature: _____ CSC Code:* _____ Expiration Date: _____

*CSC: Credit Card Security Code is the 3 digit code on the back of MC/VISA and 4 digit code on front of AMEX card.)

Card Holder Name: _____ Card Holder Billing Zip/Postal Code: _____

(MANDATORY)

(MANDATORY)

IMPORTANT: DO NOT include payment for your hotel deposit with your registration payment.

Send this form and payment in full to: ISHLT Registration • 14673 Midway Road, Suite 200 • Addison, TX 75001, or fax to 972.490.9499.

INTERNATIONAL SOCIETY FOR HEART AND LUNG TRANSPLANTATION
34th ANNUAL MEETING and SCIENTIFIC SESSIONS
APRIL 10-13, 2014 • SAN DIEGO, CA

REGISTRATION POLICIES
INSTRUCTIONS FOR COMPLETING THE REGISTRATION FORM

1. The registration fee includes attendance at all Pre-Meeting Symposia, Plenary Sessions, Concurrent Sessions, exhibit hall receptions, coffee breaks and one ticket to the President's Cocktail Reception. **Box lunches may be purchased in advanced only. Box lunches are not available for purchase on site.**
2. **DO NOT include payment for your hotel deposit with your registration payment. Payments that include such will be returned to you.**
3. For those who register prior to February 24, 2014, the non-member registration fee includes membership in the Society from the date of registration through December 31, 2014. You will be required to complete a membership application in order to activate your membership which will be emailed to you. Please mark the box provided if you do not wish to accept the offer of membership. Declining the offer will not result in a reduction of the non-member registration fee.
4. **DO NOT** fax your registration form if you are paying by check or bank draft. Registration forms received without payment will not be processed.
5. **Individuals whose registration and payment are NOT RECEIVED by March 10, 2014 must register on-site.** Registration fees are determined by the date when **payment in full is postmarked/faxed/made online.** Registration forms sent without payment in full or with invalid credit card information are subject to the registration fee in effect at the time payment in full is postmarked/ faxed or when the correct credit card information is provided.
6. Cancellations must be submitted in writing in order to qualify for any refund and should be emailed to phyllis.glenn@ishlt.org. For written cancellation notices RECEIVED by February 24, 2014, a full refund of the scientific session fees paid will be given, less a \$75 handling fee. **For written cancellation notices received after February 24, 2014, no refund of any fees will be given. All cancellation refunds will be issued after the meeting.**
7. *The Allied Health rate is available only to nurses, transplant coordinators, pharmacists, social workers, perfusionists, and engineers. The following are excluded: MDs, PhDs, individuals with doctorates, their equivalents, and pharmaceutical and device company employees/consultants and must register at the full member or non-member rate. **Non-member allied health registrants must include with their registration forms a letter signed by the chief/dean of their transplant program verifying their employment and allied health status. Forms submitted without this letter will not be processed. On-line registrants must upload their verification letter.**

*The Student/Resident registration rate is available only to residents, fellows, medical students, nursing students, and graduate students. **Non-member student/resident registrants must include a letter signed by the chief/dean of their program verifying their training status with their registration forms. Forms submitted without this letter will not be processed. On-line registrants must upload their verification letter.**
8. Full payment in **US funds only** must accompany your registration. Checks must be made payable to ISHLT and must be drawn on a US bank. All bank fees incurred for the processing of your payment will be billed to you.
9. **Wire Transfers must be received by March 10, 2014. There will be an additional fee for wire transfers in the amount of \$35 which must be paid by the sender.** Please request bank/wire transfer instructions by emailing leeann.mills@ishlt.org.
10. **Travel agencies/sponsoring agencies will not be allowed to pick up multiple registrants' name badges. Only the person registered for the meeting may pick up his/her name badge. No Exceptions.**
11. **ACADEMY REGISTRATION:** Attendance at the Annual Meeting is NOT required in order to register for an ISHLT Academy. Individuals who are registered for the Annual Meeting are entitled to a \$125 discount off the Academy registration fee. Registration for each ISHLT Academy is limited to 200, on a first come, first served basis.

**QUESTIONS???? Call the ISHLT Headquarters Office at 972-490-9495,
or email us at meetings@ishlt.org or fax us at 972-490-9499.**

INTERNATIONAL SOCIETY FOR HEART AND LUNG TRANSPLANTATION
34th ANNUAL MEETING
and SCIENTIFIC SESSIONS
APRIL 10-13, 2014 • SAN DIEGO, CA

HOTEL RESERVATIONS

Stay at the official ISHLT meeting hotel and be at the heart of the action! An exclusive ISHLT room rate has been negotiated with the Manchester Grand Hyatt hotel in San Diego. The discounted rate is subject to availability and is guaranteed until March 18, 2014. After this date, all rooms will be released back to the hotel for public sale.

IMPORTANT NOTE: Due to VERY limited availability, hotel rooms on the nights of Monday and Tuesday, April 7-8, **we are limiting reservations for these nights to those individuals who are registered for one of the three Wednesday Academy courses.** If you are registered for a Wednesday Academy, please book your hotel reservation for arrival on Wednesday. Once you have made your hotel reservation and completed your Academy registration, please send an email to phyllis.glenn@ishlt.org to request that your hotel reservation be extended to arrive on either Monday or Tuesday. Please include your hotel reservation confirmation number in the email. ISHLT staff will then contact the hotel to make this change and the hotel will send you confirmation.

RESERVATION PROCEDURE WITH MANCHESTER GRAND HYATT

Hotel reservations can be made via the following reservation methods:

A) Online:

<https://resweb.passkey.com/go/ISHLT2014>.

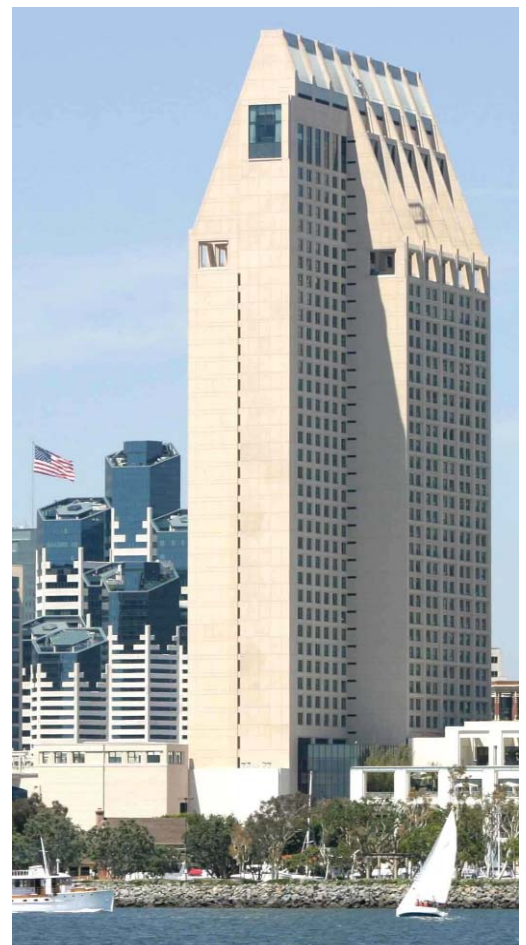
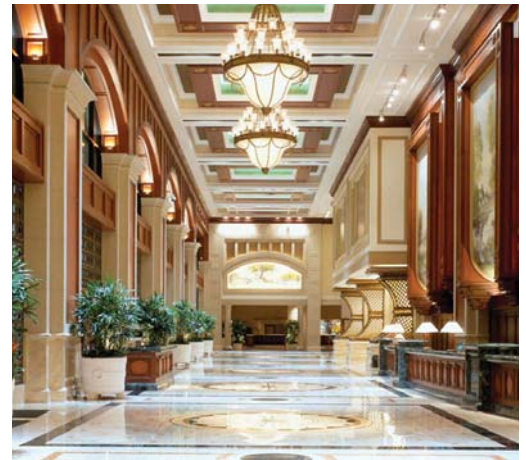
B) Paper Housing Form:

Send the completed form by email to sanrs-reservations@hyatt.com or by mail to: Manchester Grand Hyatt San Diego Hotel, One Market Place, San Diego, CA 92101 or by fax to +1-619-358-6727.

Upon completion of your reservation request, the Manchester Grand Hyatt San Diego will send you a room assignment notice by email or by fax. The hotel will then follow up with a letter confirming your reservation. All reservation requests must be accompanied by a credit card number in order to guarantee the reservation. The room rates that are indicated here are based on single/double occupancy per night. Breakfast is not included. The cancellation and refund policy for your reservation will be described in the reservation confirmation letter that you will receive directly from the hotel.

C) Group Reservations:

Any request for 10 or more rooms must be submitted in writing to sanrs-reservations@hyatt.com and must be approved by ISHLT. A credit card number is mandatory to reserve a block of rooms.



INTERNATIONAL SOCIETY FOR HEART AND LUNG TRANSPLANTATION
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MANCHESTER GRAND HYATT SAN DIEGO HOTEL

OFFICIAL ISHLT HOUSING FORM

Reservations may be made using this Housing Form or by using the direct hotel reservation link <https://resweb.passkey.com/go/ISHLT2014>.

Please use one form to reserve one room. You may photocopy this form to reserve additional rooms. Reservations forms must be received by the Manchester Grand Hyatt Hotel with complete credit card payment information no later than March 18, 2014. The group rate is subject to availability and is guaranteed until March 18, 2014. After this date, all rooms will be released back to the hotel for public sale. No more than 5 rooms may be reserved in the name of any one individual. Group Reservations: Any request for 10 or more rooms must be submitted in writing to sanrs-reservations@hyatt.com and must be approved by ISHLT. A credit card number is mandatory to reserve a block of rooms.

1) Name of Hotel Guest: _____

LAST NAME

FIRST NAME

MIDDLE INITIAL

Arrival Date: _____ Departure Date: _____

Institution/Company (required): _____

Address: _____

City: _____ State: _____ Country: _____ Post Code: _____

Phone _____ Fax: _____

Email: _____ Hyatt Gold Passport # _____

Special Requests: _____

2) Do you require: Smoking Room Non-Smoking Room Special Accommodations: _____

3) Room Type: **Single / Double Occupancy** **Triple Occupancy** **Quadruple Occupancy**
 Single/Double \$249 Single/Double \$274 Single/Double \$299

Room rates are quoted exclusive of applicable state and local taxes (which are currently 10.5/5, 2.0% TMCD, \$.021 CA per room assessment) or applicable service, or hotel specific fees in effect at the Hotel at the time of the meeting. **Note:** Rate categories are subject to availability.

4) Preferred Bed: King Bed Two Double Beds

5) Please list below any individuals who will be accompanying you and staying in the same room:

	Names of Occupants Other Than Yourself	Arrival Date	Departure Date
Roommate #1:	_____	_____	_____
Roommate #2:	_____	_____	_____
Roommate #3:	_____	_____	_____

6) All reservations must be secured by using a credit card. Reservations submitted without a credit card will not be processed.

Credit Card: VISA Mastercard American Express Discover Diners Club

Card Number: _____ Expiration Date: _____
BE SURE TO INCLUDE THE LAST FOUR DIGITS OF YOUR CARD NUMBER

Card Holder Signature: _____ Card Holder Name: _____

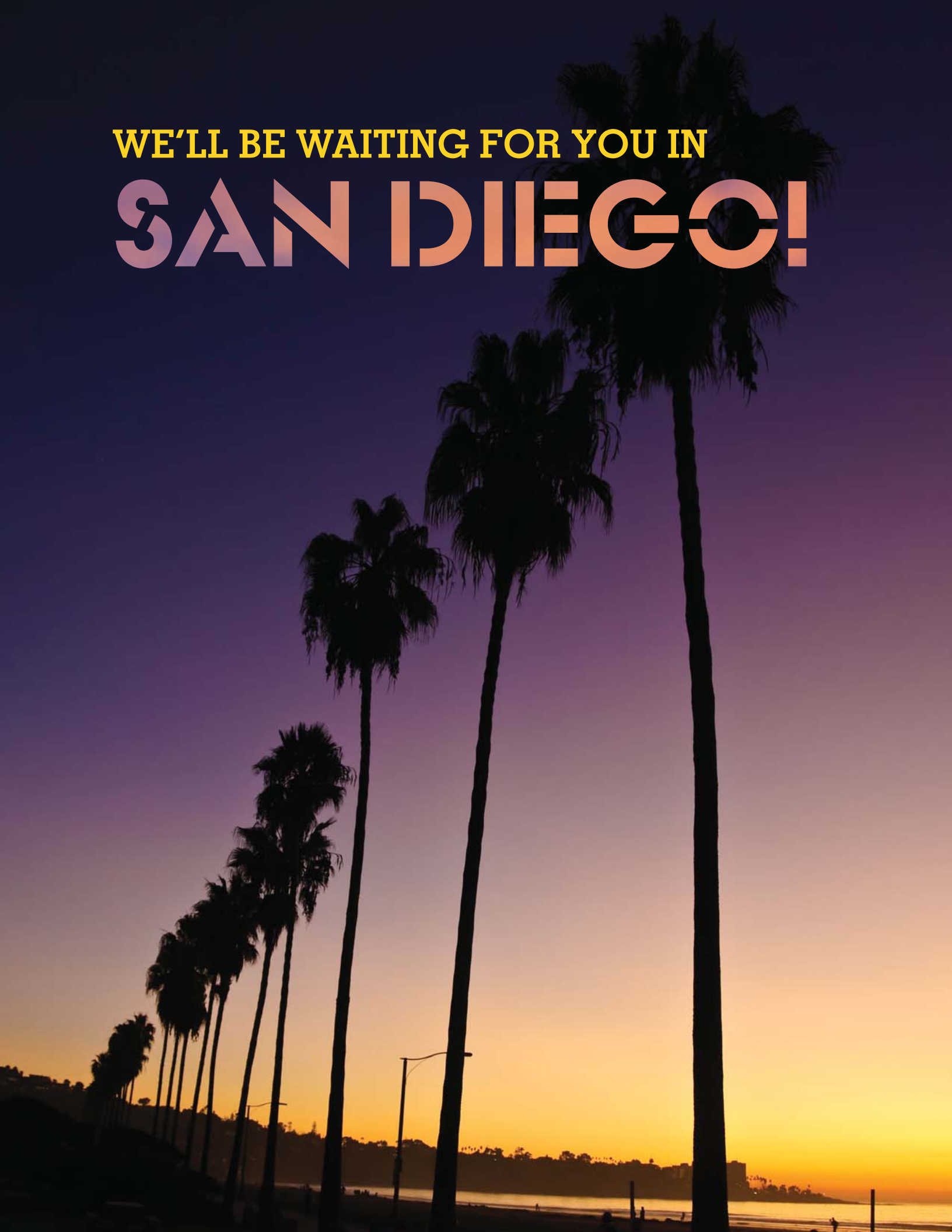
7) In addition to securing a room using a credit card, if you would like to pay in advance for the reservation, deposits may be made via credit card or check. Checks must be made payable to the **Manchester Grand Hyatt San Diego** and must be drawn on a US bank. If you prefer to pay by credit card, a credit card authorization form must be completed. Please contact the hotel at 619-358-6705 to ask for the form.

Return completed Hotel Reservation Form with required credit card information by Monday, March 18, 2014 to:
 Manchester Grand Hyatt San Diego Hotel, One Market Place, San Diego, CA 92101.
 Reservation Phone: +1-619-358-6705 • Reservations Fax: +1-619-358-6729
 Reservations Email: sanrs-reservations@hyatt.com

Cancellation Policy: Notice of cancellation of reservations must be made 24 hours in advance of the reservation arrival date or a cancellation fee will be assessed in the amount of one night's room and tax fees.

WE'LL BE WAITING FOR YOU IN

SAN DIEGO!



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FUTURE ANNUAL MEETINGS

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and Scientific Session

NICE, FRANCE

April 14 – 18, 2015

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WASHINGTON, DC

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