

CALL FOR ABSTRACTS & PRELIMINARY PROGRAM

MONTREAL

ISHLT · INTERNATIONAL SOCIETY FOR HEART AND LUNG TRANSPLANTATION

33rd ANNUAL MEETING and SCIENTIFIC SESSIONS April $24-27,\,2013$

Palais des congrès de Montréal

ISHLT - INTERNATIONAL SOCIETY FOR HEART AND LUNG TRANSPLANTATION

33rd Annual Meeting and Scientific Sessions April 24-27, 2013

ISHLT Academy:
Core Competencies in
Mechanical Circulatory
Support • April 23, 2013

ISHLT Academy: Core Competencies in Pediatric Heart and Lung Transplantation • April 23, 2013

Convening at the Palais des congrès de Montréal, Québec, Canada

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Dear Colleague:

On behalf of David Taylor, MD, President of the International Society for Heart and Lung Transplantation, the Board of Directors and the 2013 Scientific Program Committee, I have the honor of inviting you to attend the Society's 33rd Annual Meeting and Scientific Sessions to be held April 24-27, 2013 in the multicultural city of Montréal, Canada.

We hope to build on the monumental 2012 Prague meeting, one of our best ever attended meetings. The format of the Montréal meeting will be similar to previous meetings, beginning with **pre-meeting symposia** Wednesday morning and closing mid-day Saturday. In between, are leading edge scientific updates and practical information that will be immediately applicable to your practice in the management of end-stage heart and lung failure. **Sunrise Symposia** have returned, so set your body clocks!

The meeting will be held at the Palais des congrès de Montréal, located in the heart of Montréal. The Palais is a safe and bustling venue. A hub of activity, located between the city's business centre, international district, Old Montréal and Chinatown, it is adjacent to Montréal's main attractions and less than five minutes from 12,000 hotel rooms, 4,000 of which are directly linked to the Palais via indoor passageways. On Friday, the President's Cocktail Reception will be held at the La Ruelle des Fortification — Fortification Lane. Known as *La Ruelle* in French, this historical alley is a new landmark in Montréal.

The Opening Plenary session focuses on cutting edge science of the **Human Microbiome**. We are more than we seem and it is the inner self which echoes the external universe. The foundation must be sufficient for the spire and the relevance for advanced heart and lung disease is perhaps greater than we might imagine. For a moment of relief and collegiality, the opening reception will follow in the Exhibit Hall.

A later Plenary will focus on the mechanisms and management of **Right Ventricular Failure**, the "forgotten ventricle" about which all those practicing in heart failure, pulmonary hypertension, device management and advanced lung disease should be apprised. We aim to challenge and educate and have assembled a stellar faculty to accomplish these goals.

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 eight series of 6 concurrently running sessions to showcase the highest scoring abstracts. Mini-oral and poster sessions are planned for the best of the remainder with a change in format this year to moderated poster sessions to highlight the valuable scientific work presented. Throughout the meeting we plan to interweave science and practice to bring craft groups together in productive discourse through a "bed to bed-side approach." The closing Plenary will exemplify this theme and provide evidence of the relevance of the psyche to the soma.

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 16, 2012 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 the charming multicultural city of Montréal for the 33rd ISHLT Annual Meeting and Scientific Sessions!

Best regards,

Allan R. Glanville, MBBS, MD, FRACP ISHLT 2013 Scientific Program Chair

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







Abstract Submission Guidelines

1 THE ABSTRACT SUBMISSION PROGRAM

is now live on the ISHLT web site (www.ishlt.org). **The** deadline for receipt of abstracts is November 16, 2012.

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 (see www.ishlt.org for details).

- Heart
- Lung
- Pulmonary Hypertension
- Pediatrics
- Mechanical Circulatory Support
- Nursing/Allied Health
- Pathology
- Basic Science
- Late Breaking Clinical Science
- Junior Faculty Clinical Case Reports

NOTE: The **Donor Management/Organ Preservation/ Organ Allocation** and the **Infectious Disease** categories are now subcategories of **Heart**, **Lung** and (for Infectious Disease) **Mechanical Circulatory Support**. For abstracts related to these areas, please choose the most appropriate main category first.



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: **Late Breaking Science** and **Junior Faculty Clinical Case Reports**.

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.

- Lase Report abstract content should include:
 - 1. Introduction
 - 2. Case Report
 - 3. Summary

b. LATE BREAKING CLINICAL TRIALS

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 16, 2012. Studies which have results and conclusions available by November 16, 2012 may not submit their abstracts in the late breaking clinical trials 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 trial results and conclusions MUST be submitted to Lisa Edwards at the ISHLT headquarters by March 11, 2013. This analysis will be seen only by a closed panel to ensure complete confidentiality of the results prior to presentation.

A trial accepted for presentation cannot be withdrawn from presentation simply because the results do not conform to expectations. The program committee chair in consultation with the program committee reserves the final decision regarding assignment of presentations to the Late Breaking abstract session.

Please use the standard online abstract submission process to submit an abstract in this category. The abstract submitted for the November 16th deadline will serve as a placeholder for the final abstract.

- Late Breaking Clinical Trials 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 2013 Supplement to the Journal of Heart and Lung Transplantation. If you wish to have your revised trial 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, 2013.

5 ACCEPTED ABSTRACTS WILL BE PUBLISHED

in the April 2013 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 2013.

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 abstract, either oral or poster, as agreed,



withdraws it in a timely manner, or does not arrange for their abstract 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 THIS ABSTRACT signifies that the author(s) have given permission for this abstract to be reproduced in the *Journal of Heart and Lung Transplantation*, on computer disk, and on the internet for distribution/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 27, 2013.

10 INFORMED CONSENT: By submitting this abstract, the authors agree and confirm that their study involving human subjects adheres to the principles of the Declaration of Helsinki of the World Medical Association (www.wma.net/en/30publications/10policies/b3) Clinical Research 1996: 14:103), adheres to the principles of the ISHLT Statement on Transplant Ethics (http://www. ishlt.org/Content Documents/ISHLT%20 Transplant%20 ethics%20statement.pdf) and meets the informed consent requirements of the institution and country in which the study was performed.

11 USE OF ANIMALS: Submission of studies involving the use of animals implies that their use 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 the 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 2013 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 generally not permitted to serve as the first author, presenting author, senior author or corresponding 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 corresponding author of any abstracts which list an industry employee as first author, presenting author, senior author or corresponding 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.



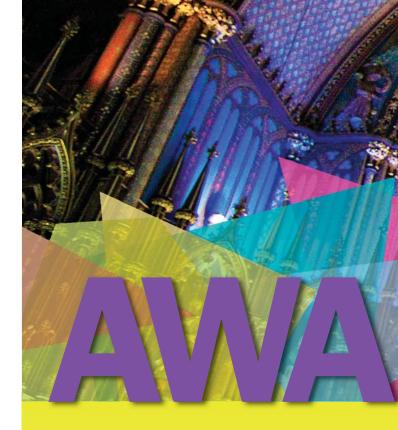
20 DEFINITIONS:

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 AND SOCIAL SCIENCE EXCELLENCE IN RESEARCH AWARD

This award was established in 2005 to recognize excellence in Nursing and Social Science 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 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 and social scientists who are first authors and presenters may elect to have their abstracts considered for this award. Candidates for the Nursing and Social Science 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.





ISHLT has arranged for a large block of sleeping rooms at several hotels in close proximity to the Congrès Centre. You must make your hotel reservations via the Tourism Montréal Housing Bureau in order to receive the ISHLT group rate. You will find hotel descriptions, rates and online booking access information within this booklet and online at www.ishlt.org. Groups wishing to secure a block of 10 or more hotel rooms may do so by signing a sub-block contract with ISHLT. Please send your group housing request to Lisa Edwards, lisa.edwards@ ishlt.org. Rooms at the ISHLT rate are limited, so please book early.



Registration

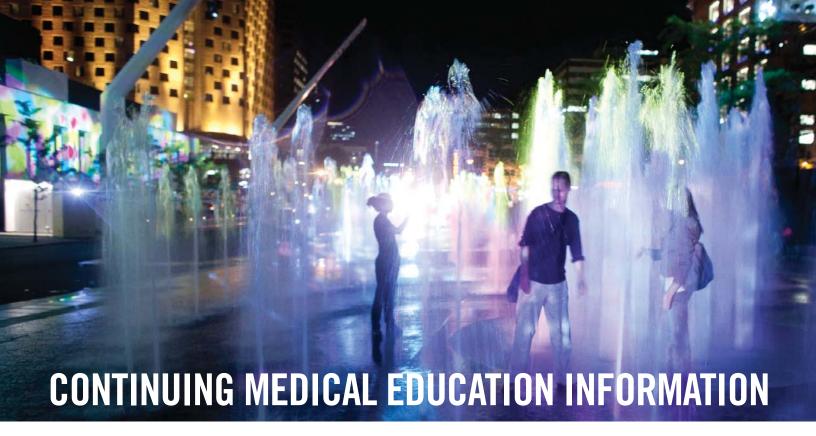
Registration for the meeting must be made via the ISHLT web site or via the Official ISHLT Registration Form. Online registration is strongly encouraged. A \$100 discount off the registration fee is offered to those who register on or before March 4, 2013. Individuals who have not registered by March 25. 2013 must register on-site at the meeting. Confirmation letters will be emailed to all individuals who register by March 25, 2013. 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 Plenary Sessions, Symposia, 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 Wednesday evening, wine and cheese in the poster hall in the evenings and one ticket to the President's Cocktail Reception on Friday evening. Reasonably priced boxed lunches may be purchased in advance for the convenience of those who wish.



Learning Objectives

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

- **1.** Understanding the latest information and approaches regarding heart and lung transplant research, surgical techniques, medical therapies, donor organ management and allocation and transplant recipient management (including age-specific approaches to immunosuppression and prevention of immunosuppression related infectious and non-infectious complications).
- **2.** Understanding the state-of-the-art medical and mechanical support treatments, risk factors, risk management approaches, patient selection criteria, disease prevention strategies, outcome implications and psychosocial management strategies for patients with end-stage heart, lung, and pulmonary vascular disease.
- **3.** Understanding emerging technologies, medical advances and the clinical application of basic science models of cardiopulmonary diseases and transplantation as they relate to treatment of end-stage heart, lung and pulmonary vascular disease.



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 28.0 AMA PRA Category 1 Credits. Physicians should claim only the credit commensurate with the extent of their participation in the activity.

Continuing Education Points for Transplant Certification (CEPTC) have been applied for through the American Board for Transplant Certification.

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 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.

Educational Objectives

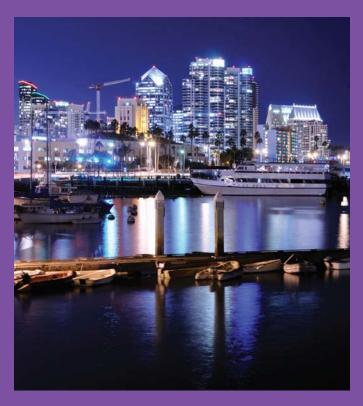
The International Society for Heart and Lung Transplantation is a leading organization providing education for medical professionals involved in heart and lung transplantation. Because of the rapid advances in medicine in general and transplantation medicine specifically, transplant professionals are in need of regular opportunities to update and maintain their knowledge of advances and changes in transplant medicine. This meeting is designed to address their needs.

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.

Target Audience

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



PRESIDENT'S COCKTAIL RECEPTION FRIDAY EVENING, APRIL 26 La Ruelle des Fortification Fortification Lane, World Trade Centre

Known as La Ruelle in French, this historic alley is a landmark in Montréal. It dates back to the 18th century when the first French settlers erected a fortress around the settlement of Montréal, originally called Ville Marie. La Ruelle's 600-foot long walkway provides visitors with an architectural history of the city. Its private glass-covered atrium square features a fragment of the Berlin Wall, a magnificent reflecting pool, a water fountain with a marble staircase and an 18th-century sculpture of the mythological goddess, Amphitrite. It is connected to the underground city and Square-Victoria metro station and houses the Montréal Inter-Continental Hotel. 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.

ANNUAL MEETING SCIENTIFIC PROGRAM COMMITTEE

Allan R. Glanville, MBBS, MD, FRACP, Sydney. Australia 2013 Program Chair

Jason D. Christie, MD, MS, Philadelphia, PA, USA, 2014 Program Chair

Stuart C. Sweet, MD, PhD, St. Louis, MO, USA, 2012 Program Chair

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Tajinder P. Singh, MD, MSc, Boston, MA, USA

Martin Strueber, MD, Leipzig, Germany

Michael Shullo, PharmD, Pittsburgh, PA, USA

Josef Stehlik, MD, MPH, Salt Lake City, UT, USA

Walter Uber, PharmD, Charleston, SC, USA

Simon, Urschel, MD, Edmonton, Canada

Geert M. Verleden, MD, PhD, Leuven, Belgium

Erik A. M. Verschuuren, MD, PhD, Groningen, Netherlands

Michael Zakliczynski, MD, Zabrze, Poland

OF THE MEETING

Jointly Sponsored Sessions

Anti-donor antibodies remain an obstacle to successful thoracic transplantation. The combined expertise of ISHLT and the American Transplant Society come to bear on this timely topic in two separate session. The first explores the detection, interpretation and potential treatments of these antibodies prior to transplantation. The second explores the development of antibody-mediated rejection after thoracic transplantation and importantly includes the perspective of the non-thoracic transplant community.

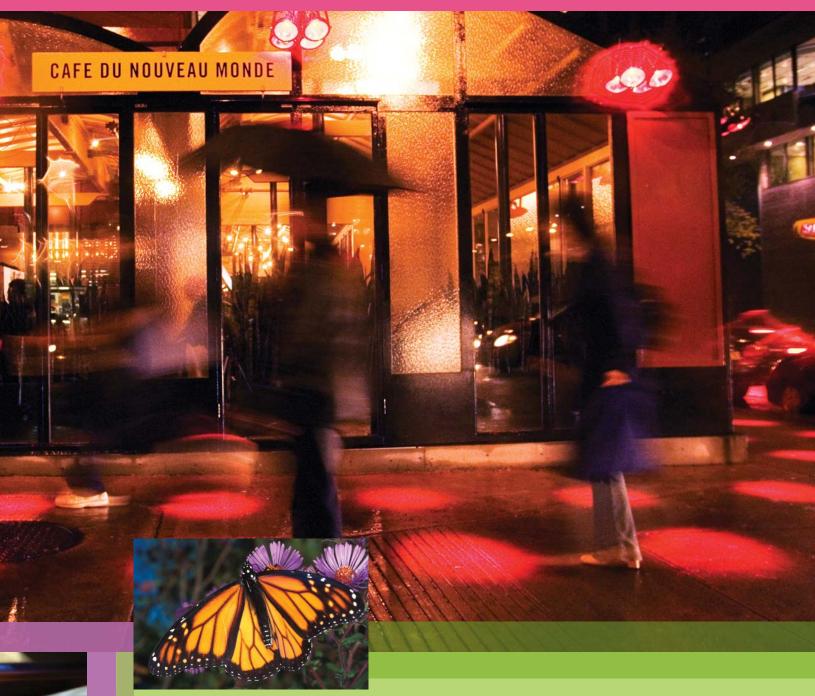
Heart Failure and Transplantation

Even though heart transplantation activity and immunosuppression pipelines appear stagnant around the world, Heart Failure and Transplantation disciplines remains a flagship of ISHLT. Five dedicated and interactive symposia will renew enthusiasm and energy to heart transplant clinicians by covering hot topics in transplant medicine. Awareness and management of donors, changing epidemiology, clinical handling of HLA antibodies and the heart-kidney relationship, challenges in resolving unanswered post-transplant issues and a glance into the future with clinical applications of proteomics and genomics will be embraced by interactive formats and bench to bedside approaches. Some heavy brainstorms and hurricanes of brisk ideas are forecasted...and desired.

Respiratory Failure and Lung Transplantation

This year's ISHLT program offers many exciting symposia on lung transplantation. We are excited about two consecutive symposia dealing with antibody mediated rejection; the first is sponsored by the pathology council and deals with basic science, while the second discusses clinical cases of antibody mediated rejection from a multidisciplinary perspective. BOS is the focus of another symposium, including phenotypic variations, diagnosis, management and basic science mechanisms. Bridging to lung the transplantation has become more common; another symposium assesses issues related to its initiation, the transplant operation and discontinuation. Finally, a primer on T cells and their effect on lung transplants will be discussed at a fourth symposium. The sunrise symposia include sessions on controversial lung transplant candidate selection issues, lung allocation and how it is dealt with around the world, controversies in bronchoscopy, and a co-sponsored symposium with the junior faculty and nursing councils which discusses quality of life issues. We are also excited to have a symposium with the pharmacy council discussing medication-related issues in patients with cystic fibrosis from before, during and late after transplant as BOS develops. This is an exciting program, and we hope to see vou there.





Infectious Diseases

Montréal will feature bench-to-bedside developments in the diagnosis and management of infectious diseases in thoracic transplant and MCSD patients. In addition to Symposia on CMV ("The Spectrum of CMV: Young or Old, Heart or Lung"), we will be entertained ("Nightmare Syndromes") and enlightened ("Travel, Leisure and Work After Transplant: Keeping Our Patients Safe From Infections") by leaders in the field during Symposia throughout the meeting. Together with the Basic Science and Translational Research Council, the immunity to infectious diseases and its effect on the allograft will be discussed ("Natural Immunity, Adaptive Response to Infection and Immunosuppression: The Piñata Cocktail"). Specific infectious diseases topics are also embedded in other thoracic transplant and MCSD symposia and Concurrent Oral Abstract sessions.

Nursing, Healthscience and Allied Health

The Program for the 2013 Annual Meeting includes a diverse series of plenary sessions and symposia that are sure to excite NHSAH professionals. NHSAH research will be highlighted throughout the Program with an emphasis on new evidence, innovative interventions and remaining controversies. The plenary lecture, "The Mind Matters" will present the results of a systematic review on psychological distress in transplant recipients, including evidence for impact on key areas of morbidity. The symposium, Motivational Interviewing (MI): An Intervention Aimed at Change will introduce the concept of MI as a potential treatment to address the issue of non-adherence within the field of transplantation. Other jointly sponsored symposia include Psychosocial Issues in Pediatric Cardiothoracic Transplant (Peds), Beyond Survival: **Evaluating Lung Transplant Success** through Patient-Oriented Outcomes (NHSAH/JFTC/Pulm) and Avatars and Advanced Care Planning (NHSAH/MCS). Together these presentations will provide guidelines to improve patient care and include recommendations for intervention research to further enhance the health and overall well-being of transplant patients and their caregivers.

Pediatrics

The Montréal Program offers a wide variety of sessions of interest to the pediatric cardiothoracic transplant community including a plenary session "How to Succeed When the Right Ventricle Fails." Symposia address the Unique Aspects of Heart Failure in Children, Mechanical Circulatory Support in Congenital Heart Disease and Developments and Controversies in Pediatric Lung Transplantation. Some of the current management controversies are on the agenda in a debate session titled Pediatric Heart Transplantation: Art, Science or Voodoo? that will include audience questions to the speakers. Together with the Nursing, Health Science and Allied Health Council, we plan to discuss *Psy*chosocial Issues in Pediatric Cardiothoracic Transplantation. And if you are still up for it, Montréal is there to explore with its combination of European charm and North American pizzazz, so more than one reason to book your trip to the ISHLT Meeting in Montréal!!



Pathology

The pathology working formulations for heart and lung transplants will be reviewed and discussed by clinicians (addressing adult and pediatric patients) to assess their current state and usefulness. This will provide the Pathology Council with further targets for improvement of the formulations in the symposium *Are the Pathology Working Formulations the Gold Standard for Diagnosing AMR in Heart and Lung in 2013?* The current status of the pathologic working formulation for the evaluation for Antibody Mediated Rejection (AMR) in lung transplants will be presented in the symposium: AMR in Lung: Definitions and Current State. This symposium is organized in tandem with a clinical correlation symposium on evaluation of AMR in Lung Transplants. (Lung AMR: "How I do it" A Multidisciplinary Case Based Discussion).

Mechanical Circulatory Support

The Annual Meeting will offer a rich program that will address all the aspects of the rapidly evolving field of mechanical circulatory support (MCS). Physicians, surgeons, VAD coordinators, pharmacists, as well as basic, translational and clinical science researchers will all find presentations of interest to their particular angle of expertise. The Wednesday MCS program will start off with a session that will explore the molecular pathways engaged in the process of mechanical unloading of the myocardium, and continue with a session that will explore different approaches to treatment of severe biventricular failure. A session to follow will focus on important aspects of long-term care of a patient supported with an LVAD. The Wednesday MCS program will conclude with what is likely to be a memorable set of debates on controversial topics in MCS. In addition, there will be three sunrise symposia that will provide 'hands-on' advice and room for interaction with the presenters. The Pump it Up Symposium will provide up to date information on the use of echocardiography, right heart catheterization and how to adjust device settings to optimize left ventricular assist device function. A case based discussion using graphics and echo will illustrate how to optimize speed and device settings. *The* Congenital Heart Disease — Success and Failure symposium will address challenges and potential solutions to managing complex congenital heart disease patients undergoing transplant and mechanical circulatory support. Avatars and Advanced Care Planning will address challenges in managing patients from a distance, empowering patients to be responsible for their care and optimizing palliative care in patients with advanced heart failure. Finally, oral presentations during a number of concurrent sessions and poster presentations will provide room for oral presentations of cutting-edge MCS science.



Pulmonary Hypertension

The Pulmonary Hypertension sessions in Montréal reflect the growing strength in this area within ISHLT as a result of the unique background mix of its membership from Cardiology (pediatric and adult), Respiratory Medicine and Cardiothoracic Surgery. We will debate an exciting range of topical issues including a stellar plenary session on right ventricular failure and a plenary talk from Marlene Rabinovich discussing how basic research into BMPR mutations is offering novel targets for therapeutic manipulation in patients with PAH. There are other stunning symposia covering state of the art issues in chronic thromboembolic pulmonary hypertension, the right ventricle and lung transplantation. pulmonary hypertension and parenchymal lung disease, proteins and pathogenesis and novel pathways. Montréal is a vibrant cosmopolitan city and the pulmonary hypertension program reflects this heritage.

Basic Science

Expect to find basic science information throughout the meeting including several multi-disciplinary sponsored symposia with a basic science focus (for example *T cell 101 in Lung Transplantation* is jointly sponsored with the Pulmonary Council) as well as "bench to bedside" presentations and themes integrated into clinically-focused sessions. In addition, there will be two Wednesday symposia with a basic science focus. The first, *Cell Migration and*

Junior Faculty and Trainees

The Junior Faculty and Trainees Council (JFTC) is comprised of individuals who are early in their career with an aim of fostering mentorship and developing the tools necessary for leadership and success within the transplant community. The Annual JFTC Mentor Luncheon will again take place on Wednesday. Junior faculty and trainees, regardless of council or ISHLT membership, are encouraged to attend and interact with some of transplant and mechanical circulatory support's most renowned clinicians (pre-registration required and limited). New this year to the meeting is a joint session between the JFTC and Journal of Heart and Lung Transplantation (JHLT), summarizing some of the most exciting publications in the JHLT. Senior editorial consultants will then discuss the publications' impact on advancing science and knowledge. Finally, the popular session "Clinical Case Dilemmas in Thoracic Transplant" returns. Selected junior faculty present quandaries on diagnosis and management of patients with complex cardiac or pulmonary disease to experts in the field. All cases must be submitted via the standard abstract submission process.



Trafficking in Lung and Heart Transplantation will provide an update on cellular migration and homing in thoracic transplantation with a focus on new visualization techniques as well as interesting chemokine and other homing receptors. The second, "Natural Immunity, Adaptive Response, Infection and Immunosuppression: The *Piñata Cocktail*, jointly sponsored by the ID Council, will provide a state of the art view of the interplay between infection, innate and adaptive immunity and allograft dysfunction. Finally, there will also be a sunrise session entitled "What's New in Xenotransplantation?" that will provide a summary of the current state of xenotransplant immunobiology followed by updates on the status of efforts to achieve success with heart and lung xenotransplantation.

Pharmacy and Pharmacology

This symposium is a continuation in a series entitled "A Lifecycle Journey in..." sponsored by the ISHLT Pharmacy and Pharmacology Council. This series utilizes an enduring case to create a panel facilitated and audience supported best practice based discussion at predefined key "journey intervals." The focus of this series continues to be based on therapeutic aspects that uniquely involve emerging or established knowledge in pharmacology and pharmacy aspects of the interval disease states or situations.

In this session, members of the Pharmacy and Pharmacology and the Pulmonary Transplantation Councils will focus on the lifecycle of Cystic Fibrosis and Lung Transplantation with special emphasis on four "journey points" which include: (1) listing considerations and pre-transplant infections, (2) peri-operative and immediate post-operative management issues, (3) metabolic and interaction considerations to drug dosing and (4) immunomodulation strategies for the management of bronchiolitis obliterans syndrome.

33rd annual meeting daily time table

512									DCD R	Reg C						
514C									JFT Mentor	Lunch						
514B									BSTR Council Mtg.	12C2 Comm Mtg.						
517AB																
513DEF	SYMPOSIUM 6	Pediatric HTX: Art,	Science or Voodoo?	BREAK	SYMPOSIUM 12	Psychosocial Issues in	PED Cardiothoracic	Transplantation	LUNCH BREAK		SYMPOSIUM 18	Spectrum of CMV:	Young or Old, Heart	or Lung	BREAK	SYMPOSIUM 24
513ABC	SYMPOSIUM 5	ID Nightmare	Syndromes	BREAK	SYMPOSIUM 11	T Cell 101 in LTX			LUNCH BREAK		SYMPOSIUM 17	Cell Migration and	Trafficking in LTX and	HTX	BREAK	SYMPOSIUM 23
512A-G	SYMPOSIUM 4	Clarifiying CTEPH		BREAK	SYMPOSIUM 10	New Pathways and	Controversies in PAH		LUNCH BREAK		SYMPOSIUM 16	Mapping the Mgmt of	the Right Ventricle	in LTX	BREAK	SYMPOSIUM 22
510	SYMPOSIUM 3	BOS: Back to the	Drawing Board	BREAK	SYMPOSIUM 9	Bridging to LTX: Who,	When and With What		LUNCH BREAK		SYMPOSIUM 15		and Current State		BREAK	SYMPOSIUM 21
511	SYPOSIUM 2	Changing HTX	Surviving in New Age	BREAK	SYMPOSIUM 8	CHT Antibodies	Practicum		LUNCH BREAK		SYMPOSIUM 14	Common Debates Post AMR in LTX: Definitions	HTX		BREAK	SYMPOSIUM 20
517CD	8:00 AM SYMPOSIUM 1	MCS Molecular Pathways Changing HTX		BREAK	10:15 AM SYMPOSIUM 7	LVADS and Long	Term Support		12:15 PM LUNCH BREAK		2:15 PM SYMPOSIUM 13	Machines vs. Meds	Biventricular Failure			4:30 PM SYMPOSIUM 19
W-24	8:00 AM			10:00 AM	10:15 AM				12:15 PM	1:15 PM	2:15 PM				4:15 PM BREAK	4:30 PM

07 111	h·25 517cD	511	510	512A-G	513ABC	513DEF	514B	514C	512D	512H
7:00 AM							SUNRISE SYMPOSIUM 1	SUNRISE SYMPOSIUM 2	SUNRISE SYMPOSIUM 1 SUNRISE SYMPOSIUM 2 SUNRISE SYMPOSIUM 3	
								LTX QOL	Lung Allocation	
8:00 AM C	8:00 AM OPENING PLENARY									
S	SESSION									
10:00 AM BREAK	BREAK									
10:30 AM C	10:30 AM CONCURRENT 1	CONCURRENT 2	CONCURRENT 3	CONCURRENT 4	CONCURRENT 5	CONCURRENT 6				
	MCS	HEART	DMD LUNG	PH	BSTR	ID OI				
NOON	LUNCH BREAK	LUNCH BREAK	LUNCH BREAK	LUNCH BREAK	LUNCH BREAK	LUNCH BREAK	JFTC Council Mtg.	JHLT Editorial		
								Board Lunch		
2:00 PM 1	2:00 PM CONCURRENT 7	CONCURRENT 8	CONCURRENT 9	CONCURRENT 10	CONCURRENT 11	CONCURRENT 12				
4	MCS	HEART	LUNG	PH	CAVES	PED				
3:30 PM BREAK	BREAK	BREAK	BREAK	BREAK	BREAK	BREAK				
4:00 PM	4:00 PM CONCURRENT 13	CONCURRENT 14	CONCURRENT 15	CONCURRENT 16	CONCURRENT 17	CONCURRENT 18				
	MCS	DMD HEART	LUNG	NHSAH	BSTR	ID OI				
5:30 PM					Mini Orals 1	Mini Orals 2	Mini Orals 3	Mini Orals 4	Mini Orals 5	Mini Orals 6
					5:30 pm — 6:30 pm	5:30 pm - 6:30 pm	5:30 pm - 6:30 pm	5:30 pm - 6:30 pm	5:30 pm - 6:30 pm	5:30 pm - 6:30 pm

EXHIBIT HALL OPENING Reception

Unique Aspects of PED Heart Failure

Natural Immunity: Piñata Cocktail

Motivational Interviewing

Cardio-Renal Syndrome Lung AMR Cases

Great Debates in MCS

6:30 PM 7:30 PM

End of Happy Marriage

T-23 510		512A-G	514B	514C	512D
7:00 AM					
8:00 AM	8:00 AM MASTERS ACADEMY MCS MASTERS ACADEMY PED	MASTERS ACADEMY PED			ISHLT Board Meeting
9:00 AM	9:00 AM 8:00 am - 6:30 pm	7:45 am - 7:30 pm			8:00 am - 1:00 pm
10:00 AM					
11:00 AM					
NOON					
1:00 PM					
2:00 PM			Tx Registry Comm Mtg.	Ix Registry Comm Mtg. Education Comm Mtg.	HTx Listing Criteria
3:00 PM			2:00 pm — 4:00 pm	2:00 pm — 4:00 pm	Consensus Mtg.
4:00 PM			R&D Comm Mtg.	S & G Comm Mtg.	2:00 pm — 6:00 pm
5:00 PM			4:00 pm — 6:00 pm	4:00 pm — 6:00 pm	
6:00 PM					
7:00 PM	•				

F-26	517CD	511	510	512A-G	513ABC	513DEF	514B	514C	512D	512H
7:00 AM	SUNRISE SYMPOSIUM 4	SUNRISE SYMPOSIUM 5	SUNRISE SYMPOSIUM 4 SUNRISE SYMPOSIUM 5 SUNRISE SYMPOSIUM 6 SUNRISE SYMPOSIUM 7	SUNRISE SYMPOSIUM 7	SUNRISE SYMPOSIUM 8		SUNRISE SYMPOSIUM 9			
	VAD Optimization	CHT Omics	Bronchoscopic Battles Proteins & Pathogenes		is Advanced Care		What's New in Xenotx			
8:00 AM	CONCURRENT 19	CONCURRENT 20	CONCURRENT 21	CONCURRENT 22	ENT 23	SYMPOSIUM 25	CONCURRENT 24			
		HEART	DNNT	₽		JHLT at ISHLT	BSTR			
9:30 AM	ANNUAL BUSINESS MTG.	BREAK	BREAK	BREAK	BREAK	BREAK	BREAK			
10:00 AM	PLENARY SESSION									
	How to Succeed									
	When the RV Fails									
NOON	LUNCH BREAK	LUNCH BREAK	LUNCH BREAK	LUNCH BREAK	MCS Council Mtg.	PH Council Mtg.	PED Council Mtg.	NHSAH Council Mtg.	ID Council Mtg.	
					12:10 pm — 1:05 pm	12:10 pm - 1:05 pm	12:10 pm - 1:05 pm	12:10 pm — 1:05 pm	12:10 pm — 1:05 pm	
1:05 PM					HF Council Mtg.	LTX Council Mtg.	PED HF Workforce	PTH Council Mtg.	PHARM Council Mtg.	
					1:05 pm — 2:00 pm	1:05 pm — 2:00 pm	1:05 pm — 2:00 pm	1:05 pm — 2:00 pm	1:05 pm — 2:00 pm	
2:00 PM	CONCURRENT 25	CONCURRENT 26	CONCURRENT 27	CONCURRENT 28	CONCURRENT 29	SYMPOSIUM 26	CONCURRENT 30			
	MCS	HEART	LUNG	₹.	PED	ISHLT/AST Joint	BSTR			
						Symposium 1				
3:30 PM	BREAK	BREAK	BREAK	BREAK		BREAK	BREAK			
4:00 PM	CONCURRENT 31	CONCURRENT 32	CONCURRENT 33	CONCURRENT 34	CONCURRENT 35	SYMPOSIUM 27	CONCURRENT 36			
	MCS	HEART	DNOT	풉	PATH	ISHLT/AST Joint	BSTR			
						Symposium 2				
5:30 PM				Mini Orals 7	Mini Orals 8	Mini Orals 9	Mini Orals 10	Mini Orals 11	Mini Orals 12	MCS Reimbursement
				5:30 pm — 6:30 pm	5:30 pm — 6:30 pm	5:30 pm - 6:30 pm	5:30 pm — 6:30 pm	5:30 pm — 6:30 pm	5:30 pm — 6:30 pm	5:30 pm — 7:30 pm
6:30 PM										
7:30 PM										
O AE DM				PRESIDENT'S COCK	PRESIDENT'S COCKTAIL RECEPTION — LES RUELLE DES FORTIFICATION • 7:30 pm — 8:45 pm	ELLE DES FORTIFICATION	1 • 7:30 pm — 8:45 pm			
0:43 FIN										

S-27	511	510	512A-G	513ABC	513DEF	5140
7:00 AM	SUNRISE SYMPOSIUM 10	SUNRISE SYMPOSIUM 10 SUNRISE SYMPOSIUM 11 SUNRISE SYMPOSIUM 12 SUNRISE SYMPOSIUM 13 SUNRISE SYMPOSIUM 14	SUNRISE SYMPOSIUM 12	SUNRISE SYMPOSIUM 13	SUNRISE SYMPOSIUM 14	
	MCS & CHD	PH & Lung	Lung Recipients	PED LTX	Travel, Leisure, Work	
8:00 AM	CONCURRENT 37	CONCURRENT 38		CONCURRENT 39	CONCURRENT 40	
	MGS	HEART	CF LifeCycle Journey	BSTR	JTFC Cases	
9:30 AM	BREAK	BREAK	BREAK	BREAK	BREAK	
9:45 AM	PLENARY SESSION					
	From Bench to Bedside					
NOON	BREAK	BREAK	BREAK	BREAK	BREAK	
12:15 PM	CONCURRENT 41	CONCURRENT 42	CONCURRENT 43	CONCURRENT 44	CONCURRENT 45	
	MCS	HEART		BSTR	DMD	
1:15 PM					BREAK	
1:30 PM					Council and Committee	
					Reports to Board	
					1:30 pm — 3:00 pm	
3:00 PM						ISHLT Board of
						Directors Meeting
						3:00 pm — 8:00 pm
8:00 PM						



All meetings and activities will take place at the Palais des congrès de Montréal 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.

Tuesday, April 23, 2013

6:30 AM - 8:00 PM SPEAKER READY ROOM OPEN

6:30 AM - 8:30 AM ACADEMY REGISTRATION DESK OPEN

7:45 AM - 7:30 PM
ISHLT ACADEMY: CORE COMPETENCIES
IN PEDIATRIC HEART AND LUNG
TRANSPLANTATION (512A-G)

8:00 AM - 2:00 PM ISHLT BOARD OF DIRECTORS MEETING (512D)

8:00 AM - 6:30 PM

ISHLT ACADEMY: CORE COMPETENCIES IN MECHANICAL CIRCULATORY SUPPORT (510)

2:00 PM - 6:00 PM ISHLT COMMITTEE MEETINGS

5:00 PM - 8:00 PM Annual meeting registration desk open

Wednesday, April 24, 2013

7:00 AM - 6:00 PM SPEAKER READY ROOM OPEN

7:00 AM - 6:00 PM REGISTRATION DESK OPEN

8:00 AM - 10:00 AM

SYMPOSIUM 1: Molecular Pathways of Cardiac Mechanical Unloading (**517CD**)

SYMPOSIUM 2: The Changing Landscape in Heart Transplantation: Surviving in the New Age (511)

SYMPOSIUM 3: BOS: Back to the Drawing Board (510)

SYMPOSIUM 4: Clarifying Chronic Thromboembolic Pulmonary Hypertension (CTEPH) (512A-G)

SYMPOSIUM 5: Nightmare Syndromes **(513ABC)**

SYMPOSIUM 6: Pediatric Heart Transplantation: Art, Science or Voodoo? (513DEF)

10:00 AM - 10:15 AM COFFEE BREAK

10:15 AM - 12:15 PM

SYMPOSIUM 7: LVAD Support: Ensuring Long Term Success (517CD)

SYMPOSIUM 8: How to Face Antibodies: A Practicum for the Cardiac Transplantation Clinician (511)

SYMPOSIUM 9: Bridging to Lung Transplantation: Who, When and With What **(510)**

SYMPOSIUM 10: New Pathways and Controversies in PAH (512A-G)

SYMPOSIUM 11: T Cell 101 in Lung Transplantation (**513ABC**)

SYMPOSIUM 12: Psychosocial Issues in Pediatric Cardiothoracic Transplantation — Joint ISHLT / IPTA Session (**513DEF**)

12:15 PM - 2:15 PM LUNCH BREAK

12:15 PM - 2:15 PM COUNCIL AND COMMITTEE MEETINGS JFTC MENTOR LUNCH (514C)

2:15 PM - 4:15 PM

SYMPOSIUM 13: Machines vs. Medications for Biventricular Failure (517CD)

SYMPOSIUM 14: Common Debates After Cardiac Transplantation (**511**)

SYMPOSIUM 15: AMR in Lung: Definitions and Current State (**510**)

SYMPOSIUM 16: Mapping the Management of the RV in Lung Transplantation (512A-G)

SYMPOSIUM 17: Cell Migration and Trafficking in Lung and Heart Transplantation (**513ABC**)

SYMPOSIUM 18: The Spectrum of CMV: Young or Old, Heart or Lung (**513DEF**)

4:15 PM - 4:30 PM COFFEE BREAK

4:30 PM - 6:30 PM

SYMPOSIUM 19: Great Debates in MCS (517CD)

SYMPOSIUM 20: The Cardio-Renal Syndrome: End of a Happy Marriage (511)

SYMPOSIUM 21: Lung AMR: "How I do it" A Multidisciplinary Case Based Discussion (510)

SYMPOSIUM 22: Motivational Interviewing: An Approach to Improving Outcomes in Transplantation (512A-G)

SYMPOSIUM 23: Natural Immunity, Adaptive Response Infection and Immunosuppression: The Piñata Cocktail (513ABC)

SYMPOSIUM 24: Unique Aspects of Heart Failure in Children: Physiology and Management (**513DEF**)

6:30 PM - 7:30 PM

EXHIBIT HALL OPENING RECEPTION / POSTER VIEWING

Thursday, April 25, 2013

6:00 AM - 6:30 PM SPEAKER READY ROOM OPEN

6:30 AM - 6:30 PM REGISTRATION DESK OPEN

7:00 AM - 8:00 AM

SUNRISE SYMPOSIUM 1: Are the Pathology Working Formulations the Gold Standard for Diagnosing AMR in Heart and Lung in 2013? **(513DEF)**

SUNRISE SYMPOSIUM 2: Beyond Survival: Evaluating Lung Transplant Success Through Patient-Oriented Outcomes (**514B**)

SUNRISE SYMPOSIUM 3: Controversies in Lung Allocation Around the World (514C)

8:00 AM - 10:00 AM
OPENING PLENARY SESSION (517CD)

10:00 AM - 10:30 AM COFFEE BREAK

10:00 AM - 4:00 PM FXHIBITS OPEN

10:30 AM - NOON CONCURRENT ABSTRACT SESSIONS

NOON - 2:00 PM LUNCH BREAK

NOON - 2:00 PM COUNCIL MEETINGS JHLT EDITORIAL BOARD LUNCH (514C)

2:00 PM - 3:30 PM CONCURRENT ABSTRACT SESSIONS

3:30 PM - 4:00 PM COFFEE BREAK

4:00 PM - 5:30 PM CONCURRENT ABSTRACT SESSIONS

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

POSTER VIEWING/WINE AND CHEESE

Friday, April 26, 2013

6:30 AM - 6:30 PM SPEAKER READY ROOM OPEN

6:30 AM - 6:30 PM REGISTRATION DESK OPEN 7:00 AM - 8:00 AM

SUNRISE SYMPOSIUM 4: VAD
Optimization — Pump It Up (517CD)

SUNRISE SYMPOSIUM 5: The "Omics" of Cardiac Transplantation (511)

SUNRISE SYMPOSIUM 6: Bronchoscopic Battles and Anastamotic Atrocities (510)

SUNRISE SYMPOSIUM 7: Proteins and Pathogenesis of PH (512A-G)

SUNRISE SYMPOSIUM 8: Avatars and Advanced Care Planning (513ABC)

SUNRISE SYMPOSIUM 9: What's New in Xenotransplantation? (514B)

8:00 AM - 9:30 AM CONCURRENT ABSTRACT SESSIONS

SYMPOSIUM 25: The Year in a Capsule: JHLT at ISHLT (**513DEF**)

9:00 AM - 2:00 PM EXHIBIT HALL OPEN

9:30 AM - 10:00 AM ANNUAL BUSINESS MEETING

9:30 AM - 10:00 AM Coffee Break/Visit Exhibits/View Posters

10:00 AM – NOON PLENARY SESSION: How to Succeed When the Right Ventricle Fails (**517CD**)

NOON – 2:00 PM LUNCH BREAK

12:10 PM - 2:00 PM COUNCIL MEETINGS

2:00 PM - 3:30 PM CONCURRENT ABSTRACT SESSIONS

SYMPOSIUM 26: ISHLT/AST JOINT SESSION I. *Pretransplant Circulating Anti-bodies: Making Sense of Sensitization* (513DEF)

3:30 PM - 4:00 PM COFFEE BREAK/VIEW POSTERS

4:00 PM - 5:30 PM CONCURRENT ABSTRACT SESSIONS

4:00 PM - 5:30 PM SYMPOSIUM 27: ISHLT/AST JOINT SESSION II. Antibody-Mediated Rejection: State of the "Current" Art (513DEF)

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

POSTER VIEWING/WINE AND CHEESE

5:30 PM - 7:30 PM
INTERNATIONAL MCS REIMBURSEMENT
(512H)

7:30 PM – 8:45 PMPRESIDENT'S COCKTAIL RECEPTION

La Ruelle des Fortification

Saturday, April 27, 2013

6:30 AM - 1:00 PM SPEAKER READY ROOM OPEN

6:30 AM – Noon REGISTRATION DESK OPEN

7:00 AM - 8:00 AM SUNRISE SYMPOSIUM 10: MCS and Congenital Heart Disease — Success and Failure (511)

SUNRISE SYMPOSIUM 11: PH and the Lung Parenchyma (**510**)

SUNRISE SYMPOSIUM 12: Challenging Candidates for Lung Transplant Selection **(512A-G)**

SUNRISE SYMPOSIUM 13: Pediatric Lung Transplantation: Developments and Controversies (513ABC)

SUNRISE SYMPOSIUM 14: Travel, Leisure And Work After Transplant: Keeping Our Patients Safe From Infections (513DEF)

8:00 AM - 9:30 AM CONCURRENT ABSTRACT SESSIONS

SYMPOSIUM 28: PHARM SYMPOSIUM A Lifecycle Journey in Cystic Fibrosis and Lung Transplantation (512A-G)

9:30 AM - 9:45 AM COFFEE BREAK

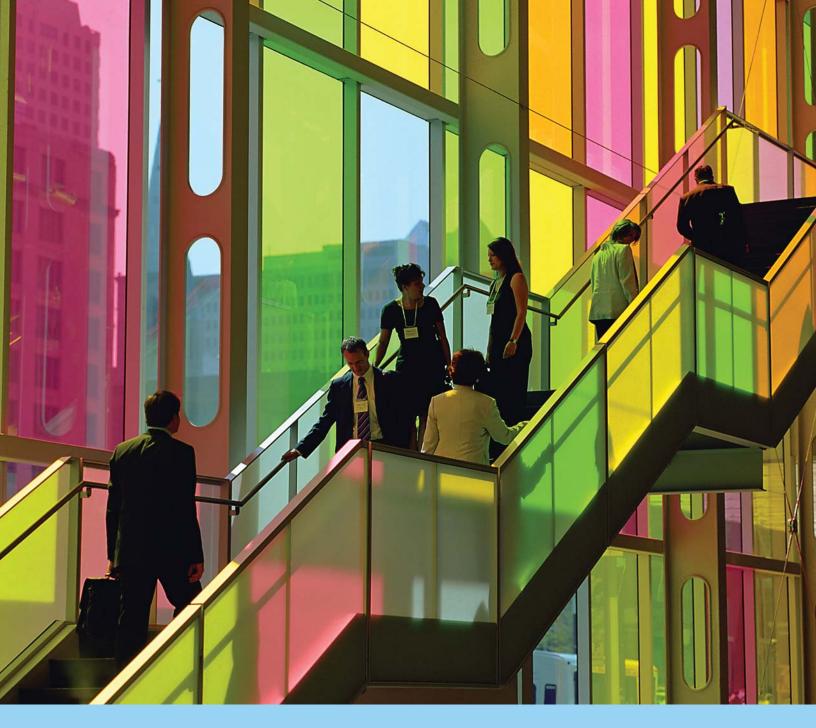
9:45 AM - NOON
PLENARY SESSION: From Bench to Bedside
(511)

NOON - 12:15 PM COFFEE BREAK

12:15 PM - 1:15 PM CONCURRENT ABSTRACT SESSIONS

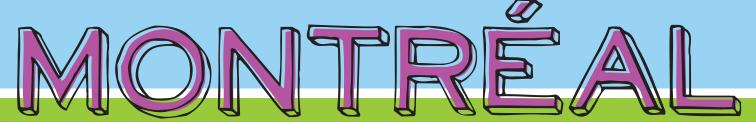
1:30 PM - 3:00 PM COUNCIL AND COMMITTEE REPORTS TO THE BOARD AND MEMBERSHIP

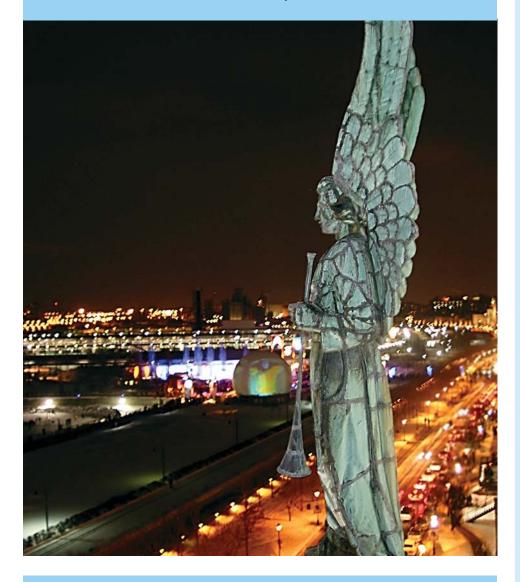
3:00 PM - 8:00 PM
ISHLT BOARD OF DIRECTORS MEETING



33rd ANNUAL MEETING PRELIMINARY SCIENTIFIC PROGRAM

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WEDNESDAY, APRIL 24 8:00 am - 10:00 am

Symposium 1

Molecular Pathways of Cardiac Mechanical Unloading (517CD)

CHAIRS: Lee R Goldberg, MD, MPH and Craig H. Selzman, MD

session summary: This session highlights the molecular pathways associated with mechanical unloading of the failing myocardium. Topics include the myocardial response affecting cardiac contractility, fibrosis and metabolism as well as the vasculature. Further, we will discuss molecular patterns associated with a favorable response of the myocardium to mechanical unloading and the potential impact on myocardial recovery after mechanical unloading.

8:00 AM Impact of Mechanical Circulatory Support on Myocardial Contractility and Calcium Handling, Daniel Burkhoff, MD, PhD, CircuLite, Inc., Saddle Brook, New Jersey, USA

8:18 AM Discussion

8:24 AM Myocardial Fibrosis in Heart Failure and Its Response to Mechanical Unloading, Hendrik Milting, PhD, Heart and Diabetes Center NRW, Ruhr-University, E & H Klessmann-Institute, Bad Oeynhausen, NRW, Germany

8:42 AM Discussion

8:48 AM Impaired Cardiac Metabolism in Heart Failure and the Impact of Left Ventricular Assist Device Support, P. Christian Schulze, MD, PhD, Columbia University, New York, NY, USA

9:06 AM Discussion

9:12 AM Vascular Changes in Patients
Supported by Ventricular Assist
Devices, Stavros G. Drakos, MD,
PhD, University of Utah & UTAH
Cardiac Transplant Program,
Salt Lake City, Utah, USA

9:30 AM Discussion

9:36 AM The Molecular Signature of Myocardial Recovery Following Ventricular Assist Device Support, Kenneth B. Margulies, MD, University of Pennsylvania, Philadelphia, PA, USA

9:54 AM Discussion

8:00 am - 10:00 am

Symposium 2

The Changing Landscape in Heart Transplantation: Surviving in the New Age (511)

CHAIRS: Alan H. Menkis, MD, FRCS(C) and Marisa Crespo-Leiro, MD

SESSION SUMMARY: A dramatic epidemiological shift in the heart transplant donor and recipient characteristic in recent years has led to a need to review our current allocation and matching systems. In this symposium, we shall review the changing landscape, evaluate the different allocation systems world-wide across diverse continents and debate whether an international consensus is timely for developing clinical algorithms that facilitate optimal donor and recipient matching. How shall we allocate donors for those with durable LVAD's? Is it time to develop a universal classification for the "marginal" donor? Are "sensitized" patients a unique group for a targeted allocation system? These and other burning issues will be addressed by a panel of international experts in the field.

- 8:00 AM Changing Epidemiology of the Heart Transplant Candidate, Josef Stehlik, MD, MPH, University of Utah School of Medicine, Salt Lake City, UT, USA
- **8:10 AM** *Changing Epidemiology of the Optimal Heart Donor,* Guy A. MacGowan, Freeman Hospital, Newcastle upon Tyne, UK

Donor Allocation Systems Around the World: Current Approaches, Advantages, Challenges

- 8:20 AM USA Joseph G. Rogers, MD, Duke University, Durham, NC, USA
- 8:25 AM *Canada* Debra L Isaac, University of Calgary, Calgary, Alberta, Canada
- **8:30 AM** *Eurotransplant* Andreas Zuckermann MD, Medical University of Vienna, Vienna, Austria
- 8:35 AM Spain Juan F. Delgado, MD, Hospital Doce de Octubre, Madrid, Spain
- 8:40 AM Italy Maria Frigerio MD, Niguarda-Ca' Granda Hospital, Milan, Italy
- 8:45 AM Australia Angeline S. Leet, MD, Alfred Hospital, Melbourne, Victoria, Australia

Expanding and Maximizing the Donor Pool

- **8:50** AM a) *Expanding the Donor Pool: UK Experience,* Stephen C. Clark, FRCS, Freeman Hospital, Newcastle upon Tyne, UK
- **9:05** AM b) *Pushing the Limits for Organ Acceptability,* Ashish S. Shah, MD, Johns Hopkins Hospital, Baltimore, MD, USA

DEBATE: It Is Time For An International Consensus For A Recipient Scoring System

- 9:20 AM PRO: Keith D Aaronson, MD, University of Michigan, Ann Arbor, Michigan, USA
- 9:30 AM *CON:* Lynne Warner Stevenson, Brigham and Women's Hospital, Boston, MA, USA
- 9:40 AM Panel Discussion and Audience Q and A

8:00 am - 10:00 am

Symposium 3

BOS: Back to the Drawing Board (510)

CHAIRS: Denis Hadjiliadis, MD, MHS and Robin Vos, MD, PhD

SESSION SUMMARY: Phenotyping and adding new terminology to chronic rejection have been a major issues in the last few years. This session will clarify some well defined phenotypes and put them into perspective of the "old BOS" where everything was pulled together with fewer diagnostic tools.

8:00 AM Basic Science and Mechanisms, Laurie D. Snyder, MD, Duke University, Durham, NC, USA

8:20 AM Discussion

8:30 AM Phenotypes of BOS, Geert M.
Verleden, MD, PhD, University
Hospital Gasthuisberg, Leuven,
Belgium

Deigiuiii

8:50 AM Discussion

9:00 AM Variability in Assessing
Pulmonary Function Tests,
Sangeeta M. Bhorade, MD,
University of Chicago Medicine,
Chicago IL, USA

Ullicago IL, US

9:20 AM Discussion

9:30 AM Management of BOS, Martin Iversen, MD, PhD, Rigshospitalet, Copenhagen University Hospital, Copenhagen, Denmark

9:50 AM Discussion

8:00 am - 10:00 am

8:00 am - 10:00 am

8:00 am - 10:00 am

Symposium 4

Clarifying Chronic Thromboembolic Pulmonary Hypertension (CTEPH)

(512A-G)

CHAIRS: Reda E. Girgis, MD and Marc De Perrot, MD, MSc

session summary: CTEPH remains the only potentially curable form of PH to date underlying the huge importance of making an accurate diagnosis and thoroughly assessing suitability for thromboendarterectomy in any patient presenting with PH. This symposium covers the basics of diagnosis and surgical decision making, then moves to consider the current evidence base for using medical therapy for those patients who are not cured or curable by thromboendarterectomy. Finally the role of extracorporeal support in patients with acute adverse responses to thromboendarterectomy will be discussed to enable practical lessons to be learned.

8:00 AM Making the Diagnosis of CTEPH, Irene M. Lang MD, Medical University of Vienna, Vienna, Austria

8:20 AM What are the Contraindications to Pulmonary Endarterectomy in CTEPH?, Michael M. Madani, MD, University of California San Diego, San Diego, CA, USA

8:40 AM Medical Approaches in Non-Surgical CTEPH, Hossein A. Ghofrani, MD, University Hospital Giessen and Marburg, Justus-Liebig-University Giessen, Giessen, Germany

9:00 AM Managing Right Ventricular Failure and Reperfusion Injury Following Pulmonary Endarter-ectomy, Marc de Perrot, MD, MSc, Toronto General Hospital, Toronto, ON, Canada

9:15 AM Role of ECLS for Failed/Suboptimal Pulmonary Endarterectomy: The Paris Experience, Prof. Philippe G. Dartevelle, Marie Lannelongue Hospital Paris sud University, Le Plessis Robinson, France

9:30 AM Role of ECLS for Complicated Pulmonary Endarterectomy:
The Cambridge Experience,
David P. Jenkins, BSc, MS,
FRCS(CTh), Papworth Hospital,
Cambridge, UK

9:45 AM Panel Discussion

Symposium 5

Nightmare Syndromes (513ABC)

CHAIRS: Annette Boehler, MD and David Weill, MD

SESSION SUMMARY: This session will cover unique and challenging clinical syndromes that are difficult to diagnose and manage.

8:00 AM Thrombotic Microangiopathy, Ramsey R. Hachem, MD, Washington University School of Medicine, St. Louis, MO, USA

8:15 AM Discussion

8:20 AM Rash and Fever, Martha L. Mooney, MD, FACP, Sentara Norfolk Transplant Center, Eastern Virginia Medical School, Norfolk, VA, USA

8:35 AM Discussion

8:40 AM *Central Nervous System Infection,* Me-Linh Luong, University of Montréal, Montréal, Quebec, Canada

8:55 AM Discussion

9:00 AM Hemophagocytic Syndrome, Erik A. M. Verschuuren, MD, PhD, University Medical Centre Groningen, Groningen, The Netherlands

9:15 AM Discussion

9:20 AM Tuberculosis After Transplant,
Deborah J. E. Marriott, St. Vincent's Hospital, Sydney, NSW,
Australia

9:35 AM Discussion

9:40 AM Parasites Gone Bad: The Monster Inside Your Transplant Patient,
Camille Nelson Kotton, MD, Massachusetts General Hospital,
Boston, MA, USA

9:55 AM Discussion

Symposium 6

"Pediatric Heart Transplantation: Art, Science, or Voodoo?" (513DEF)

CHAIRS: Elizabeth D. Blume, MD and Jonathan N. Johnson, MD

session summary: Management of pediatric heart transplant recipients differs across institutions with limited scientific data to guide best practice. Pro/Con discussions will address common controversies followed by audience questions to the speakers.

8:00 AM Management of Sensitized Candidates Using Desensitization and Virtual/Prospective Cross-Match: Patience is a Virtue!,
Richard Kirk MA FRCP FRCPCH,
Institute of Transplantation, Freeman Hospital, Newcastle upon Tyne, UK

8:15 AM Heart Transplantation with a Positive Cross-Match: Just Do It!, Steven A. Webber, MBChB, Vanderbilt University, Nashville, TN. USA

8:30 AM Discussion

8:40 AM Antibody Mediated Rejection
Diagnosis is Made by Histopathology Findings, Which are
Necessary and Sufficient for
Treatment, Charles C. Marboe,
MD, Columbia University, New
York, NY, USA

8:55 AM Antibody Mediated Rejection
Diagnosis and Treatment Should
be Based on DSA, Immunofluorescence and Graft Function in
Children, E. Rene Rodriguez, MD,
Cleveland Clinic, Cleveland, OH,
USA

9:10 AM Discussion

9:20 AM Invasive Surveillance in Pediatric Heart Transplantation — A Necessary Evil, Charles E. Canter, MD, Washington University / St. Louis Children's Hospital, St. Louis, MO,

9:35 AM Routine Biopsies and Coronary Angiography are Over-rated in Children, Francesco Parisi, MD, Bambino Gesù Children's Hospital, IRCCS, Rome, Italy

9:50 AM Discussion

10:15 am - 12:15 pm

10:15 am - 12:15 pm

Symposium 8

LVAD Support: Ensuring Long-term Success (517CD)

CHAIRS: Jaap R. Lahpor, MD and Stephan Schueler, MD, PhD, FRCS

session summary: The field of mechanical circulatory assistance has been expanding quickly and many patients are now benefiting from long-term VAD support. With this expanding experience, new challenges to the long-term success of VAD support have also been identified. This session will discuss several of the key adverse events that clinicians face while caring for VAD recipients on chronic support. The speakers will discuss proven and novel approaches to the management of these problems.

- 10:15 AM Aortic Insufficiency Preimplant Management, Post-op Surveillance, Post-op Management, Evgenij V. Potapov, MD, PhD, Deutsches Herzzentrum Berlin, Berlin, Germany
- 10:35 AM Gastrointestinal Bleeding Management, Including Endoscopy, Anticoagulation/Antiplatelet Management, Pump Settings, Salpy V. Pamboukian MD, MSPH, University of Alabama at Birmingham, Birmingham, AL, USA
- 10:55 AM Thrombosis/Power Spikes/
 Hemolysis Diagnosis, Management of Anticoagulation/
 Antiplatelets, Lytic Therapy,
 and Replacement, Ulrich P.
 Jorde, MD, Columbia University/
 New York Presbyterian Hospital,
 New York, NY, USA
- 11:15 AM VAD Infection Prevention Strategies, Shimon Kusne, MD, Mayo Clinic in Arizona, Phoenix, AZ, USA
- 11:35 AM The Emotional and Psychosocial Selection Criteria and Needs of Patients on VADs, Kathleen L. Grady, PhD, APN, Northwestern University, Chicago, IL, USA
- 11:55 AM Panel Discussion

"How to Face Antibodies": A Practicum for the Cardiac Transplantation Clinician (511)

CHAIRS: Nicola E. Hiemann, MD, FACC and D. Brad Dyke, MD

session summary: In this session, we have attempted to use a bench-top to bedside approach to explain the relevant science as it relates to sensitization, recognition and treatment of antibody mediated rejection (AMR) in cardiac transplantation. In this fast moving field, the science is distilled to provide an increased working knowledge of the translational science, in order to better understand and treat patients with AMR. This session, led entirely by transplant clinicians, is targeted to clinicians to enhance their knowledge base and positively alter patient care strategies.

- 10:15 AM How to Detect and Manage Sensitization Pre-Transplant, Kathryn J. Tinckam, MD MMSc FRCPC, University of Toronto, Toronto, ON, Canada
- 10:35 AM Discussion
- 10:45 AM How to Choose and Match the Organ for the Sensitized Patient, Lori J. West, MD, Dphil, University of Alberta, Edmonton, Alberta, Canada
- 11:05 AM Discussion
- 11:15 AM How to Monitor, Diagnose and Treat AMR After Cardiac Transplantation, Eulalia Roig, MD, Hospital Santa Creu i Sant Pau, Barcelona, Spain
- 11:35 AM Discussion
- 11:45 AM How to Evaluate, Diagnose and Treat Chronic Allograft Dysfunction, Jignesh K. Patel, MD PhD, Cedars-Sinai Heart Institute, Los Angeles, CA, USA
- 12:05 PM Discussion

10:15 am — 12:15 pm

Symposium 9

Bridging to Lung Transplantation: Who, When and With What (510)

CHAIRS: Marc De Perrot, MD, MSc and Stephen C. Clark, FRCS

SESSION SUMMARY: This symposium will provide a review of the current status of mechanical bridging to lung transplantation. It will provide an overview of available techniques and outcomes.

- 10:15 AM Selection and Timing, Jasleen Kukreja, MD, UCSF, San Francisco, CA, USA
- 10:35 AM Device Development and Choice, Martin Strueber, MD, Heart Center Leipzig, University Leipzig, Leipzig, Germany
- 10:55 AM *Managing the Wait,* Jens Gottlieb MD, Hannover Medical School, Hannover, Germany
- 11:15 AM Transplant Surgical Strategies,
 Walter Klepetko MD, Medical
 University of Vienna, Vienna,
 Austria
- 11:35 AM Outcomes of Bridging to Transplantation, R. Duane Davis MD, MBA, Duke University, Durham, NC, USA
- 11:55 AM Panel Discussion

10:15 am - 12:15 pm

10:15 am - 12:15 pm

Symposium 10

New Pathways and Controversies in PAH (512A-G)

CHAIRS: Robert P. Frantz, MD and Myung H. Park, MD

SESSION SUMMARY: The field of PH is moving rapidly in both clinical and translational science and in this session our speakers will cover new evidence supporting firstly the respective value of monitoring right ventricular function and secondly combined clinical endpoints in the clinical management of patients. The second half of the symposium will discuss the potential link between insulin resistance and vascular inflammation, also describing the effect of targeted therapy on this axis. Finally the role of inflammation as a therapeutic target will be discussed.

10:15 AM Is RVEF the Best Endpoint When Following Up a Patient with Pulmonary Arterial Hypertension?, Anton Vonk Noordegraaf, MD, VU Medical Center, Amsterdam, The Netherlands

10:35 AM Discussion

10:45 AM Is Combined Clinical Endpoint the Best Way to Assess a Patient's Progress?, Robert P. Frantz, Mayo Clinic, Rochester, MN, USA

11:05 AM Discussion

11:15 AM Insulin Resistance and Pulmonary Hypertension — Shedding New Light?, Roham T. Zamanian, MD, FCCP, Stanford University School of Medicine, Stanford, CA, USA

11:35 AM Discussion

11:45 AM Inflammation — Playing a Central Role in Pulmonary Arterial Hypertension?, Aaron B. Waxman, MD, PhD, Brigham and Women's Hospital, Harvard Medical School, Boston, MA, USA

12:05 PM Discussion

Symposium 11

T cell 101 in Lung Transplantation (513ABC)

CHAIRS: Daniel C. Chambers, MBBS MRCP FRACP MD and Annette Boehler, MD

SESSION SUMMARY: This session will bring basic scientists and clinicians together to jointly review sets of basic knowledge slides, slides addressing the current knowledge in animal models, slides addressing human data in the field and slides pulling the whole topic into clinical context.

10:15 AM Overview of T cell Differentiation, Tereza Martinu, MD, Duke University, Durham, NC, USA

10:30 AM Discussion / Q & A

10:35 AM *Th1 and Lung Rejection,* John F. McDyer, MD, University of Pittsburgh, Pittsburgh, PA, USA

10:50 AM Discussion / Q & A

10:55 AM Th2 and Lung Rejection, John A. Belperio, MD, UCLA Pulmonary & Critical Care Medicine, Los Angeles, CA, USA

11:10 AM Discussion / Q & A

11:15 AM Th17 and Lung Rejection, Bart M. Vanaudenaerde, Katholieke Universiteit Leuven, Leuven, Belgium

11:30 AM Discussion / Q & A

11:35 AM Tregs and Lung Transplantation, Gregor Warnecke, MD, Hannover Medical School, Hannover, Germany

11:50 AM Discussion / Q & A

11:55 AM Gamma Delta T cells and Lung Transplantation, Rebecca A. Shilling, MD, Indiana University School of Medicine, Indianapolis, IN. USA

12:10 PM Discussion / Q & A

10:15 am — 12:15 pm

Symposium 12

Psychosocial Issues in Pediatric Cardiothoracic Transplantation – Joint ISHLT / IPTA Session (513DEF)

CHAIRS: Christian Benden, MD, Alison Amegatcher, RN and Thomas Frischer, MD

SESSION SUMMARY: The session will discuss psychosocial aspects of pediatric cardio-thoracic transplantation, both in heart and lung transplant recipients, using a multidisciplinary team approach. In addition, the intersection between transplant and palliative care will be discussed.

10:15 AM The Psychosocial Transplant Evaluation — What Works?, Jo Wray, PhD, Great Ormond Street Hospital for Children, NHS Foundation Trust, London, UK

10:35 AM Discussion

10:40 AM Transplanting the Adolescent Patient – Can We Do It Successfully?, Diana A. Shellmer, PhD, University of Pittsburgh and the Children's Hospital Pittsburgh of UPMC, Pittsburgh, PA. USA

11:00 AM Discussion

11:05 AM Socioeconomic Status in Pediatric Cardiothoracic Transplantation – Does It Impact On Outcomes?, Tajinder P. Singh, MD, MSc, Boston Children's Hospital, Boston, MA, USA

11:25 AM Discussion

11:30 AM Intersection of Transplant Medicine and Palliative Care – Can We Work Together?, Elisabeth P. Dellon, MD, MPH, University of North Carolina, Chapel Hill, NC, USA

11:50 AM Discussion

11:55 AM Oral Presentation of Highly Scored Abstract (PED or NHSAH)

12:10 PM Discussion

2:15 pm - 4:15 pm

2:15 pm - 4:15 pm

Symposium 13

Machines vs. Medications for Biventricular Failure (517CD)

CHAIRS: Robert L. Kormos MD, FRCS(C), FACS, FAHA and Jan. F. Gummert, MD

SESSION SUMMARY: Biventricular failure represents significant challenges. Both medical and mechanical approaches have considerable limitations and risks. This session will provide an interactive forum for discussing a patient with biventricular failure, and exploring the potential benefits and risks of various therapeutic approaches available in our clinical armamentarium today.

2:15 PM Case Presentation, Jose Nativi-Nicolau, MD, University of Utah, Salt Lake City, Utah, USA

2:25 PM Why Right Ventricular Failure Prediction Scores Do Not Work, Bart Meyns, MD, PhD, Uz. KUleuven, Leuven, Belgium

2:45 PM Medical Management – LVAD and Support Right Ventricle Medically, Steven SL Tsui, MD FRCS, Papworth Hospital, Cambridge, UK

3:05 PM Implantable BiVAD, Thomas Krabatsch, MD, PhD, Deutsches Herzzentrum Berlin, Berlin, Germany

3:25 PM *Total Artificial Heart,* Francisco A. Arabia, MD, Mayo Clinic, Phoenix, Arizona, USA

3:45 PM Back to the Case, Jose Nativi-Nicolau, MD, University of Utah, Salt Lake City, Utah, USA

3:55 PM Panel Discussion

Symposium 14

Common Debates After Cardiac Transplantation (511)

CHAIRS: David S Feldman, MD, PhD FACC, FAHA and Mandeep R. Mehra, MD

SESSION SUMMARY: To biopsy or not to biopsy? How to manage long-term immunosuppression? How often to flush coronary lumens and watch plaques? Does this young patient with a failing graft deserve a second transplant option? These are just a few of the unanswered questions that we have to face with emotional-based decisions in heart transplant care. Four sparkling debates, comprised of short presentations with panel moderated discussions, will shape up the audience's opinion towards critical issues in transplant management, providing some solid ground to help decision making in everyday practice.

Debate 1: Protocol Endomyocardial Biopsy Is Not Necessary After the First Post-transplant Tear

2:15 PM *PRO:* Hannah A. Valantine, MD, Stanford University School of Medicine, Stanford, CA, USA

2:25 PM *CON:* Ingo Kaczmarek, MD, Transplantation Center, Munich, Germany

2:35 PM Panel Discussion with audience

Debate 2: An Annual Coronary Angiogram Is Necessary for Improving Late Outcomes

2:45 PM PRO: Randall C. Starling, MD, MPH, Cleveland Clinic, Cleveland, OH, USA

2:55 PM *CON:* Hans Lehmkuhl, MD, PhD, Deutsches Herzzentrum Berlin, Berlin, Germany

3:05 PM Panel Discussion with audience

Debate 3: An mTOR Inhibitor Is the Standard of Care to Improve Late Post-transplant Outcomes

3:15 PM PRO: Sudhir S. Kushwaha, MD, Mayo Clinic, Rochester, MN, USA

3:25 PM CON: Luciano Potena MD, PhD, University of Bologna, Bologna, Italy

3:35 PM Panel Discussion with audience

Debate 4: Retransplant Is Obsolete and Unethical for Chronic Allograft Dysfunction

3:45 PM *PRO:* Heather Ross, MD, MHSc (Bioethics), FRCPC, Toronto General Hospital, Toronto, ON, Canada

3:55 PM *CON:* Maryl Johnson, MD, University of Wisconsin, Madison, WI, USA

4:05 PM Panel Discussion with audience

2:15 pm - 4:15 pm

2:15 pm - 4:15 pm

AMR in Lung Transplantation: **Definitions and Current State (510)**

CHAIRS: Gerald J. Berry, MD and

SESSION SUMMARY: The current status of the pathologic working formulation for the evaluation for Antibody Mediated Rejection (AMR) in lung transplants will be presented. This symposium is organized in tandem with a clinical correlation symposium on evaluation of AMR in Lung Transplants.

2:15 PM Overview of AMR in Lung Transplantation at Banff, W Dean Wallace, MD, David Geffen School of Medicine at UCLA, Los Angeles, CA, USA

2:35 PM Discussion

2:45 PM Pathology of AMR, Martin J. Goddard, BA MB ChB FRCS FRCPath, Papworth Hospital NHS Trust, Cambridge, UK

3:05 PM Discussion

3:15 PM Histocompatibility Assessment for AMR in Lung Transplants, Dolly B. Tyan, PhD, Stanford University, Palo Alto, CA, USA

3:35 PM Discussion

4:05 PM

3:45 PM Pediatric Lung Transplantation, Carol Farver, MD, Cleveland

Clinic, Cleveland, Ohio

Discussion

Roberto Barrios, MD

Mapping the Management of the Right Ventricle in Lung Transplantation (512A-G)

CHAIRS: Paul A. Corris, FRCP and John Granton, MD

SESSION SUMMARY: The peri-operative management of the right ventricle during isolated lung transplantation for pulmonary arterial hypertension remains most challenging. This symposium will first cover recent developments in the non-invasive assessment of the right ventricle. Practical approach to the intra-operative management of patients with a failing right ventricle will then be reviewed. Finally, perspectives on potential recovery of the right ventricle after lung transplantation will be debated.

2:15 PM Pre Op Non-Invasive Assessment of the Right Ventricle, Francois Haddad, Stanford University, Palo Alto, CA, USA

Discussion 2:35 PM

2:45 PM Intra Operative Management of the Patient with a Failing RV. Karen M. McRae, MD, Toronto General Hospital, Toronto, ON. Canada

3:05 PM Discussion

DEBATE: This House Believes the Right Ventricle Always Recovers After Isolated Lung Transplantation

3:15 PM PRO: Walter Klepetko, MD, Medical University of Vienna, Vienna, Austria

CON: Elie Fadel, MD, Hospital 3:35 PM Marie Lannelongue, Le Plessis Robinson, France

3:55 PM **Panel Discussion**

2:15 pm - 4:15 pm

Cell Migration and Trafficking in Lung and Heart Transplantation (513ABC)

CHAIRS: Stephan M. Ensminger, MD, DPhil and Andrew E. Gelman, PhD

SESSION SUMMARY: This session will serve as an opportunity for basic and clinical scientists, pathologists, immunologists and clinicians to get an update on cellular migration and homing of different cell subsets in heart and lung transplantation and their visualization. There will be an update on new techniques in cell trafficking, about potential new interesting homing receptors in transplantation and a summary of what is currently known about the relevance of chemokine receptors in transplantation.

2:15 PM Intravital Immunology: Visualizing T cell Migration and Activation by Multiphoton Microscopy, Thorsten R. Mempel, MD, PhD, Harvard Medical School, Boston, MA, USA

2:35 PM Discussion

2:39 PM Donor Derived Mesenchymal Stem Cell Trafficking in Lung Transplantation, Vibha N. Lama, MD, MS, University of Michigan,

Ann Arbor, MI, USA

2:59 PM Discussion

3:03 PM Vivo Imaging of Cell Trafficking into Heart Allografts, Daniel Kreisel, Washington University in St. Louis, St. Louis, MO, USA

3:23 PM Discussion

3:27 PM Regulation of Chemokines in **Lung Transplantation,** John A. Belperio, MD, UCLA Pulmonary & Critical Care Medicine, Los Angeles, CA, USA

3:47 PM Discussion

3:51 PM Mechanisms of B cell Migration, João P. Pereira, Yale University,

New Haven, CT, USA

4:11 PM Discussion

2:15 pm - 4:15 pm

4:30 pm - 6:30 pm

4:30 pm — 6:30 pm

Symposium 18

The Spectrum of CMV: Young or Old, Heart or Lung (513DEF)

CHAIRS: Fernanda P. Silveira, MD, MS and Erik A. M. Verschuuren, MD, PhD

session summary: Although CMV has become quite effectively handled with the current arsenal, the new strategies have led to new problems. This session will use a bench to bedside approach to cover the current state of the art for CMV in heart and lung transplant recipients and will highlight the newly emerging pitfalls in the currently used prevention strategies. Pharmacokinetics (including adult and pediatric studies), monitoring strategies and treatment options including CMV resistance will be discussed.

2:15 PM	CMV: Prevention Strategies: All
	Are Not Created Equal, Luciano
	Potena MD, PhD, University of
	Bologna, Bologna, Italy

2:40 PM Antiviral Pharmacokinetics: Are All Recipients Equal?, Patricia Uber, PharmD, University of Maryland, Baltimore, MD, USA

3:05 PM CMV: Monitoring for Risk and Recurrence, Laurie D. Snyder, MD, Duke University, Durham, NC, USA

3:30 PM *CMV: Resistance Emerging,*Robin K. Avery, MD, FIDSA, Johns
Hopkins, Baltimore, MD, USA

3:55 PM Panel Discussion of Challenging CMV Cases

Symposium 19

Great Debates in MCS (517CD)

CHAIRS: Valluvan Jeevanandam, MD and Josef Stehlik, MD, MPH

session summary: This session will address four important topics in a debate format. At the end of the session, the attendees will be able to discuss the controversies in organ allocation in patients with mechanical assist and in patients with allosensitization, discuss the importance of psychosocial support in LVAD candidates and identify the pitfalls of advanced renal failure in patients requiring VADs.

DEBATE 1: Should Stable LVAD Patients Receive Organ Allocation Advantage?

4:30 PM PRO: Hermann C. Reichenspurner, MD, PhD, University Heart Center Hamburg, Hamburg, Germany

4:40 PM CON: Joseph G. Rogers, MD, Duke University, Durham, NC, USA

4:50 PM Audience Participation

DEBATE 2: Should Sensitization Warrant Higher Priority on the Waiting List?

5:00 PM PRO: Bruno Meiser, MD, Transplant Center Munich, University of Munich, Munich, Germany

5:10 PM CON: A.G. Kfoury, MD, FACC, Intermountain Heart Institute (UTAH Cardiac Transplant Program), Salt Lake City, Utah, USA

5:20 PM Audience Participation

DEBATE 3: Does Mechanical Support Work for Those With Poor Social Support?

5:30 PM PRO: Stephan Schueler, MD, PhD, FRCS, Freeman Hospital, Newcastle upon Tyne, UK

5:40 PM CON: Tonya I. Elliott, MSN RN CCTC CHFN Inova Fairfax, Falls Church, VA, USA

5:50 PM Audience Participation

DEBATE 4: Are VAD Destination Therapy and Hemodialysis Compatible?

6:00 PM PRO: Andrew J. Boyle, MD, Cleveland Clinic Florida, Weston, FL, USA

6:10 PM CON: John B. O'Connell MD, Medical Center of Central Georgia, Macon. GA. USA

6:20 PM Audience Participation

Symposium 20

The Cardio-Renal Syndrome: End of a Happy Marriage (511)

CHAIRS: Michael M. Givertz, MD and Finn Gustafsson, MD, PhD, DMSci

session summary: Heart and kidney functions are linked in an elegantly harmonized physiology. However, when one of the two starts failing, the function of the other is impaired and often the therapeutic strategy to recover the function for one organ may be dangerous for the other. In this session, speakers will discuss pathophysiological mechanisms and provide clinical hints to save the marriage of the two organs, before and after transplant.

4:30 PM The Cardio-Renal Syndrome Explained: Bench to Bedside Perspective, Jeffrey M. Testani, MD, MTR, Yale University, New Haven, CT, USA

4:50 PM Predicting and Facilitating
Renal Recovery After Heart
Transplantation, Marcelo
Cantarovich, MD, FRCPC, McGill
University Health Center, Montréal,
Quebec, Canada

OPTIMAL STRATEGIES

5:10 PM Pharmacological Management of Heart Transplant Recipients with Kidney Insufficiency, Lars Gullestad, MD, Oslo University Hospital, Oslo, Norway

5:30 PM Combined or Staged Heart – Kidney Transplantation for Refractory Renal Dysfunction,
Markus J. Barten, MD, PhD,
University Leipzig, Heart Center,
Leipzig, Saxonia, Germany

5:50 PM Case Presentation and Panel Discussion, Kiran K. Khush, MD, MAS, Stanford University School of Medicine, Palo Alto, CA, USA

6:20 PM Panel Discussion

4:30 pm - 6:30 pm

4:30 pm - 6:30 pm

Lung AMR: "How I Do It" A Multidisciplinary Case Based Discussion (510)

CHAIRS: Allan R. Glanville, MBBS, MD, FRACP and Deborah J. Levine, MD

SESSION SUMMARY: Even with increased recognition and a progressively increasing literature base on single and multi-center experience. there is still a lack of consensus on our collective approach, diagnosis and treatment of pulmonary AMR. This will be a "How I do it" symposium which will include pulmonology, immunology and pathology. This will be an audience participation symposium: case presentations with audience participation and input from Pulmonary, Pathology and Immunology who will all comment on each case.

CASE PRESENTATION 1: The Presensitized Patient

4:30 PM **Presenter:** Glen Westall, MD. Alfred Hospital, Melbourne, Victoria, Australia

4:40 PM Immunologist Discussant: Adriana Zeevi, PhD, University of Pittsburgh Medical Center (UPMC), Pittsburgh, PA. USA

4:50 PM Pathologist Discussant: Desley A. H. Neil, FRCPath, Queen Elizabeth Hospital Birmingham (QEHB), Birmingham, UK

Panel Discussion 5:00 PM

CASE PRESENTATION 2: Lung Tranpslant Recipient with Lung Dysfunction and +DSA

5:10 PM Presenter: Deborah J. Levine. MD. UT Health Science Center, San Antonio. TX. USA

Immunologist Discussant: Adriana 5:20 PM Zeevi, PhD, UPMC, Pittsburgh, PA, USA

5:30 PM Pathologist Discussant: Desley A. H. Neil, FRCPath, QEHB, Birmingham, UK

5:40 PM **Panel Discussion**

CASE PRESENTATION 3: Stable Lung Transplant Recipient With DSA

5:50 PM Presenter: Ramsey R. Hachem, MD, Washington University School of Medicine, St. Louis, MO, USA

6:00 PM Immunologist Discussant: Adriana Zeevi, PhD, UPMC, Pittsburgh, PA, **USA**

6:10 PM Pathologist Discussant: Desley A. H. Neil, FRCPath, QEHB, Birmingham, UK

6:20 PM **Panel Discussion**

Motivational Interviewing: An Approach to Improving Outcomes in Transplantation (512A-G)

CHAIRS: Susan M. Chernenko and Judy Currey PhD RN

SESSION SUMMARY: Motivational interviewing (MI) is a goal-directed, clientcentered intervention to help patients increase intrinsic motivation and strengthen commitment for change. Despite many discussions about the causes and detection of nonadherence in patients undergoing heart or lung transplantation or mechanical circulatory support, clinicians continue to report limited success in impacting the cooperation of non-adherent patients. This session is designed to introduce the concept of MI as a potential approach to such situations. Presenters will describe the concept, the fundamental changes to our language with patients and case studies demonstrating the effectiveness of this treatment.

4:30 PM Following the Rules Seems So Obvious: Understanding Patients' Motivation to Follow Post-Transplant / MCS Regimens, Fabienne Dobbels, PhD, University of Leuven, Belgium

Introduction to Motivational 4:50 PM Interviewing: Talking "The Change" Means "Changing The Talk," Nikole J. Cronk, PhD, University of Missouri School of Medicine, Columbia, MO, USA

Case Studies: Putting Motiva-5:10 PM tional Interviewing Into Practice. Hilde Bollen, RN, UH Leuven, Leuven, Belgium

Preparing the Team for this 5:30 PM New Communication Style: TRANSIT as an Exemplar, Nathalie Duerinckx, MSN, KU Leuven; University Hospitals of Leuven, Belgium

5:50 PM Motivational Interviewing: An Empirically Supported Intervention, Mary Amanda Dew, PhD, University of Pittsburgh School of Medicine & Medical Center, Pittsburgh, PA, USA

Panel Discussion 6:10 PM

Natural Immunity, Adaptive Response Infection and Immunosuppression: The Piñata Cocktail (513ABC)

CHAIRS: John P. Scott MD and Martin R. Zamora, MD

SESSION SUMMARY: This session will bring bench to bedside by focusing on the responses to infections and microbial colonization in transplant recipients. The focus will be on innate immune function, their responses to microbes and their effects on graft function.

4:30 PM Natural and Adaptive Immunity, Javier Carbone, MD, PhD, Gregorio Marañon Hospital, Madrid, Spain

4:50 PM Discussion

4:54 PM Immune Reconstitution Inflammatory Response Syndrome, Martha L. Mooney, MD, FACP, Sentara Norfolk Transplant and Advanced Heart Failure Center, Eastern Virginia Medical School, Norfolk, Virginia, USA

5:14 PM Discussion

5:18 PM The Role of Fungal and Viral Infection and Colonization on Chronic Lung Allograft Dysfunction. Shahid Husain MD. MS. University Health Network. University of Toronto, Toronto, ON. Canada

5:38 PM Discussion

5:42 PM The Role of Bacterial Infection and Colonization on Chronic Lung Allograft Dysfunction, Aric L. Gregson, MD, David Geffen School of Medicine at UCLA, Los Angeles, CA, USA

6:02 PM Discussion

6:06 PM The Role of Infections on Heart Allograft Chronic Dysfunction, Nicolas Manito, MD, Hospital Bellvitge, Barcelona, Spain

6:26 PM Discussion

4:30 pm - 6:30 pm

WEDNESDAY, APRIL 24 4:30 pm - 6:30 pm

Symposium 24

Unique Aspects of Heart Failure in Children: Physiology and Management (513DEF)

CHAIRS: Yuk M. Law, MD and Beth D. Kaufman, MD

SESSION SUMMARY: The pathophysiology and management of heart failure in children resemble those in adult heart failure patients. This symposium will discuss these similarities and highlight the unique aspects of heart failure in children.

4:30 PM Neurohormonal Changes, Ventricular Remodeling and Clinical Presentation: Similarities and Differences with Adults, Ulrich Schweigmann, MD, Medical University Hospital, Innsbruck, Austria

4:50 PM Medical Management: Are
Children Small Adults?, Robert E.
Shaddy, MD, The Children's Hospital
of Philadelphia, Philadelphia, PA,
USA

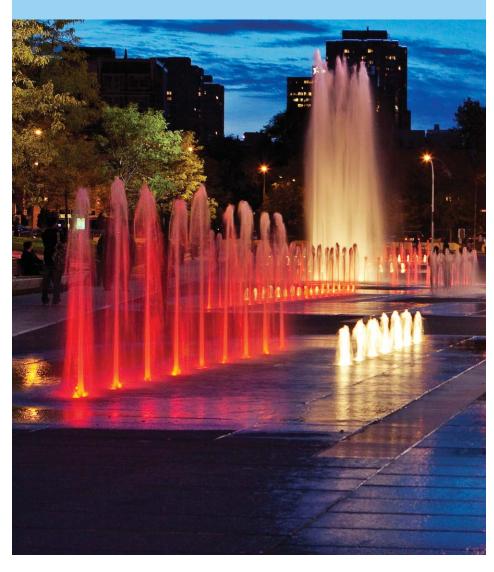
5:10 PM Medical Management of Children with Failed Fontan Physiology,
Elfriede Pahl Schuette, MD, Lurie
Children's Hospital, Northwestern
Feinberg School of Medicine,
Chicago, IL, USA

5:30 PM Biomarkers in Pediatric Heart Failure, Robert G. Weintraub, MB BS FRACP FACC, Royal Children's Hospital, Parkville, Victoria, Australia

5:50 PM Cardiorenal Syndrome in Pediatric Heart Failure, Jack F. Price, MD, Baylor College of Medicine/Texas Children's Hospital, Houston, TX, USA

6:10 PM Panel Discussion

THURSDAY, APRIL 25, 2013





THURSDAY, APRIL 25, 2013

7:00 am - 8:00 am

7:00 am - 8:00 am

7:00 am - 8:00 am

Sunrise Symposium 1

Are the Pathology Working Formulations the Gold Standard for Diagnosing AMR in Heart and Lung in 2013? (513DEF)

CHAIRS: Jonathan B. Orens, MD and Randall C. Starling, MD, MPH

SESSION SUMMARY: The pathology working formulations for heart and lung transplants will be reviewed and discussed by clinicians (addressing adult and pediatric patients) to assess their current state and usefulness. This will provide the Pathology Council with further targets for improvement of the formulations.

7:00 AM The Working Formulation for AMR Adult Heart, Lawrence S.C. Czer, MD, Cedars-Sinai Heart Institute, Los Angeles, CA, USA

7:15 AM The Working Formulation for AMR in Pediatric Heart, Janet N. Scheel, MD, Johns Hopkins University, Baltimore, Maryland, USA

7:30 AM How Do We Diagnose AMR in Adult Lung Transplant?, Marie M. Budev, DO, MPH, The Cleveland Clinic, Cleveland, OH, USA

7:45 AM How Do We Diagnose AMR in Pediatric Lung Transplant?,
Stuart C. Sweet, MD, PhD, Washington University, St. Louis, MO, USA

Sunrise Symposium 2

Beyond Survival: Evaluating Lung Transplant Success Through Patient Oriented Outcomes (514B)

CHAIRS: Daniel F. Dilling, MD and Annette DeVito Dabbs PhD, RN

session summary: Lung transplantation primarily aims to extend survival and improve quality of life (QOL). Despite its clinical primacy, however, QOL remains a poorly understood area of research hindering its integration into clinical care and counseling. This session will address QOL research in lung transplantation from the "bench to the bedside." Content will include a primer on QOL instrument design and data interpretation, followed by a comprehensive review of state-of-the art research in QOL, utility measures and interventions that can improve clinically relevant QOL outcomes in patients undergoing lung transplantation.

7:00 AM What is Quality of Life, Really?
Understanding QOL Research
Instruments and Outcomes,
Jonathan P. Singer, MD, UCSF
Medical Center, San Francisco,
CA, USA

7:10 AM Does Lung Transplantation
Actually Improve Quality of
Life?, Lianne G. Singer, MD, FRCPC,
University Health Network, University of Toronto, Toronto, ON, Canada

7:20 AM Utilities in Lung Transplant —
Moving Beyond Survival to Calculate "Net-Transplant Benefit,"
Roger D. Yusen, MD, MPH, Washington University School of Medicine, St. Louis, MO, USA

7:30 AM Quality of Life in Pediatric Lung Transplantation, Samantha J. Anthony, PhD MSW, The Hospital for Sick Children / McMaster University, Toronto, ON, Canada

7:40 AM Determinants of QOL in Lung
Transplantation: Pulmonary and
Extrapulmonary Factors, Christiane Kugler, University Witten
and Hannover Medical School,
Hannover, Germany

7:50 AM Panel Discussion

Sunrise Symposium 3

Controversies in Lung Allocation Around the World (514C)

CHAIRS: Leah B. Edwards, PhD and Dirk EM Van Raemdonck, MD, PhD

SESSION SUMMARY: Allocation of lungs occurs very differently across the world. Although there are many differences, there are several central controversies that warrant exploration. The goal of this session is to consider some of the controversies in allocation and determine whether or not there are ways we can improve lung allocation policy.

7:00 AM LAS: Maximizing Transplant
Benefit or Pushing The Limits?,
Cynthia J. Gries, MD MSc, University of Pittsburgh Medical
Center, Pittsburgh, PA, USA

7:15 AM Eurotransplant: A Model for International Sharing, Jacqueline M. Smits, MD, PhD, Eurotransplant International Foundation, Leiden, The Netherlands

7:30 AM Re-engineering Local Lung Allocation, David J Lederer, MD, MS, Columbia University Medical Center, New York, NY, USA

7:45 AM Discussion

THURSDAY, APRIL 25, 2013 8:00 am - 10:00 am

Opening Plenary Session

Opening Plenary Session (517CD)

CHAIRS: Allan R. Glanville, MBBS, MD, FRACP and

David O. Taylor, MD

8:00 AM Welcome/Program Chair Report, Allan R. Glanville,

MBBS, MD, FRACP, St. Vincent's Hospital, Sydney, NSW,

Australia

8:05 AM *President's Report,* David O. Taylor, MD, Cleveland

Clinic, Cleveland, OH, USA

8:15 AM Thoracic Registry Report, Josef Stehlik, MD, MPH,

University of Utah School of Medicine, Salt Lake City,

UT, USA

8:30 AM MCSD Registry Report, James K Kirklin, MD, University

of Alabama at Birmingham, Birmingham, AL, USA

8:40 AM FEATURED ABSTRACT

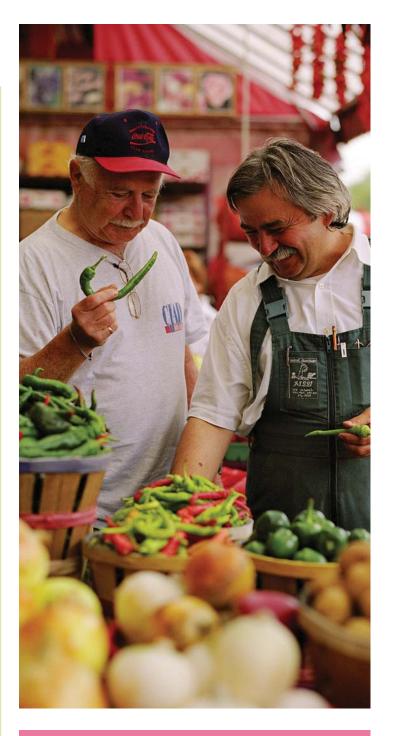
8:55 AM INVITED LECTURE: The Human Microbiome: What Is It,

How Do We Measure It, What Does It Mean For Thoracic Transplantation?, Ronald G. Collman, MD, University of

Pennsylvania School of Medicine, Philadelphia, PA, USA

9:20 AM FEATURED ABSTRACT

9:35 AM Pioneer Lecture



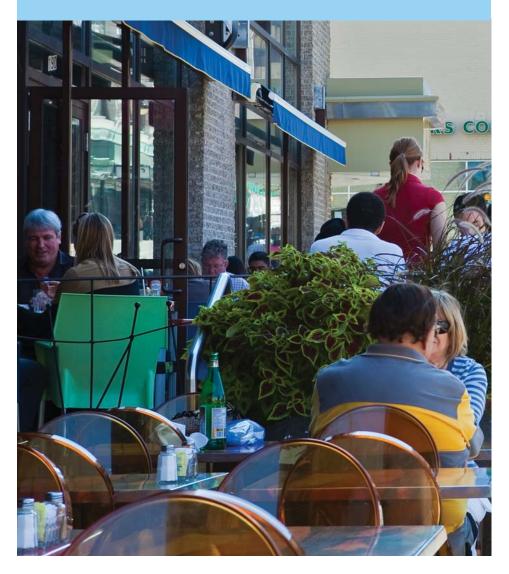
10:30 AM - NOON CONCURRENT ABSTRACT SESSIONS

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

FRIDAY, APRIL 26, 2013





FRIDAY, APRIL 26, 2013 7:00 am - 8:00 am

Sunrise Symposium 4

VAD Optimization — Pump It Up (517CD)

CHAIRS: Michael Dandel MD, PhD and David S. Feldman, MD, PhD FACC,

SESSION SUMMARY: Use of echo, right heart catheterization and device setting to optimize VAD function. Case based discussion using graphics and echo to illustrate how to optimize speed, settings and role of clinical parameters including echo, RHC to optimize VAD function and patient stating.

7:00 AM What's the Spin on the Echo?,
Phyllis Billia, MD PhD FRCPC,
University Health Network, Toronto,
ON, Canada

7:15 AM Settings – Ramp It Up or Back It Off, When and How?, J. Eduardo Rame, MD MPhil, University of Pennsylvania, Philadelphia, PA, USA

7:30 AM Right Heart Catheterization Role in Optimizing Patients, Jennifer Cowger, MD, MS, University of Michigan Cardiovascular Center, Ann Arbor, MI, USA

7:45 AM Discussion

FRIDAY, APRIL 26, 2013

7:00 am - 8:00 am

Sunrise Symposium 5

The "Omics" of Cardiac Transplantation (511)

CHAIRS: Howard J. Eisen, MD and David A. Baran, MD

session summary: To understand the mechanisms of rejection and immune system regulation after heart transplantation, molecular biology techniques have been used for a long time. Where do we stand now with respect to clinical practice? In this session speakers will provide an update of the current clinical applicability of gene-based and protein-based techniques.

7:00 AM Gene Expression Profiling and Circulating DNA: Ready for Clinical Practice?, Michael Pham, MD, MPH, Stanford University and VA Palo Alto Health Care System, Palo Alto, CA, USA

7:15 AM Clinical Translation of Proteomic Studies in Cardiac Transplantation, Bruce McManus, MD, PhD, FRSC, FCAHS, NCE CECR Centre of Excellence for Prevention of Organ Failure, Vancouver, BC, Canada

7:30 AM Using Omics to Modify Immune Suppression After Cardiac Transplantation, Mario C. Deng, MD, UCLA, Los Angeles, CA, USA

7:45 AM Discussion

7:00 am - 8:00 am

Sunrise Symposium 6

Bronchoscopic Battles and Anastomotic Atrocities (510)

CHAIRS: Stephen C. Clark, FRCS and Lorriana E. Leard, MD

session summary: This sunrise session will focus on controversies regarding surveillance bronchoscopy, airway anastomotic complications and surgical techniques. The session will focus on causation, management and outcomes from both a surgical and medical perspective in a 'quick fire debate' format.

7:00 AM *Current Status of Surveillance Bronchoscopy,* Maria M. Crespo,
MD, University of Pittsburgh Medical Center, Pittsburgh, PA, USA

7:10 AM DEBATE: Airway Complications

This is a quick-fire debate with the following topics:

- 1) Risk factors
- 2) Technique
- 3) Dehiscence
- 4) Stenosis
- 5) Air Leaks and Endobronchial Valve

SPEAKERS:

7:10 AM Speaker 1: Dirk EM Van Raemdonck MD, PhD, University Hospitals Leuven, Leuven, Belgium,

7:15 AM Speaker 2: Lonny Yarmus, DO, FCCP, Johns Hopkins University School of Medicine, Baltimore, MD, USA

7:30 AM Speaker 1 Discussion

7:45 AM Speaker 2 Discussion

7:00 am - 8:00 am

Sunrise Symposium 7

Proteins and Pathogenesis of PH (512A-G)

CHAIRS: James D. West, PhD and Ioana R. Preston, MD

SESSION SUMMARY: Remarkable progress continues to be made in our understanding of the pathobiology of pulmonary hypertension. This sunrise session will provide the audience with an update on three cuttingedge topics that are the subject of intense ongoing basic research efforts. The critical importance of regulatory micro RNA's in vascular remodeling is rapidly evolving with the prospect of potent therapeutic applications in the not too distant future. Technologic advances in proteomics and metalobolomics are expected to lead to the discovery of novel molecular pathways. A role for sex hormones in pulmonary hypertension has long been suspected based on the recognized female predominance clinically. Recent investigations on the effects of estrogens, testosterone and their receptors in clinical and animal models of pulmonary hypertension provide new insights.

7:00 AM Role of Micro RNAs in the Pathogenesis of Pulmonary Hypertension, Sebastien Bonnet PhD, Laval University, Quebec City, QC, Canada

7:15 AM Proteomics and Metalobolomics in Pulmonary Hypertension, Ioana R. Preston, MD, Tufts Medical Center, Boston, MA, USA

7:30 AM Abnormal Oestrogen Pathways in Pulmonary Hypertension,
James D. West, PhD, Vanderbilt
University, Nashville, TN, USA

7:45 AM Discussion

FRIDAY, APRIL 26, 2013

7:00 am - 8:00 am

Sunrise Symposium 8

Avatars and Advanced Care Planning (513ABC)

CHAIRS: Michael G. Petty, PhD, RN, CCNS, ACNS-BC and Fabienne Dobbels, PhD

SESSION SUMMARY: At the end of this session, the attendees will be able to discuss the challenges associated with managing patients who live at large distances from the implanting centers, determine the best approaches to engage VAD patients in their care and review the approaches to palliation in patients with the most advanced forms of disease.

7:00 AM Managing Patients from a Distance – Alternatives to Laying on Our Own Hands, Annemarie Kaan, RN MCN, St. Paul's Hospital, Vancouver, BC, Canada

7:15 AM The Responsibility Handoff: Empowering Patients, Michelle L. Harkess, RN, MCN, St. Vincent's Hospital, Sydney, NSW, Australia

7:30 AM Palliative Care Considerations, Sally J. Brush, MSN, FNP, Intermountain Medical Center, Salt Lake City, UT, USA

7:45 AM Discussion

7:00 am - 8:00 am

Sunrise Symposium 9

What's New in Xenotransplantation? (514B)

CHAIRS: David K. C. Cooper, MD, PhD, FRCS and Jeffrey Teuteberg, MD

SESSION SUMMARY: This sunrise symposium will go over the latest advances of xenotransplantation and how they apply to heart and lung transplantation

7:00 AM Immunobiology of Xenotransplantation, Richard N. Pierson III, MD, University of Maryland, Baltimore, MD, USA

7:15 AM Discussion

7:18 AM Current Status of Cardiac Xenotransplantation, Christopher G. A. McGregor, UCL, London, UK and Mayo Clinic, Rochester, MN, USA

7:33 AM Discussion

7:36 AM Lung Xenotransplantation, Agnes M. Azimzadeh, PhD, University of Maryland, Baltimore, MD, USA

7:51 AM Discussion

7:54 AM Panel Discussion

Symposium 25

"The Year in a Capsule:" JHLT at ISHLT (513DEF)

CHAIRS: Patricia Uber, PhD and Jayan Parameshwar, MD

8:00 am - 9:30 am

Faculty Trainee Council and the Journal of Heart and Lung Transplantation are sponsoring a novel session this year to bring the JHLT to the ISHLT. This session will highlight the most exciting publications in the JHLT over the past year, followed by a discussion by one of the senior editorial consultants of the journal to relate the presented articles to the greater body of published literature and to suggest how they advance our understanding in the field.

8:00 AM Highlights of Heart Transplantation and Mechanical Circulatory Support, Keyur B. Shah, MD, Virginia Commonwealth University, Richmond, VA, USA

8:15 AM Discussant: Mark S. Slaughter, MD, University Cardiothoracic Surgical Assoc, Louisville, KY, USA

8:20 AM Highlights of Lung Transplantation, Hanneke Kwakkel-van Erp, MD, PhD, University Medical Center Utrecht, Utrecht, The Netherlands

8:35 AM Discussant: Allan R. Glanville, MD, FRACP, Sydney, Australia

8:40 AM Highlight of Pulmonary Hypertension, Christina Migliore, MD, Newark Beth Israel Medical Center, Newark, NJ, USA

8:55 AM Discussant: Paul A. Corris, MB FRCP, Freeman Hospital, Newcastle, UK

9:00 AM Highlights of Issues Related to Children, Yishay Orr, FRACS, PhD, Children's Hospital at Westmead, Lane Cove, Australia

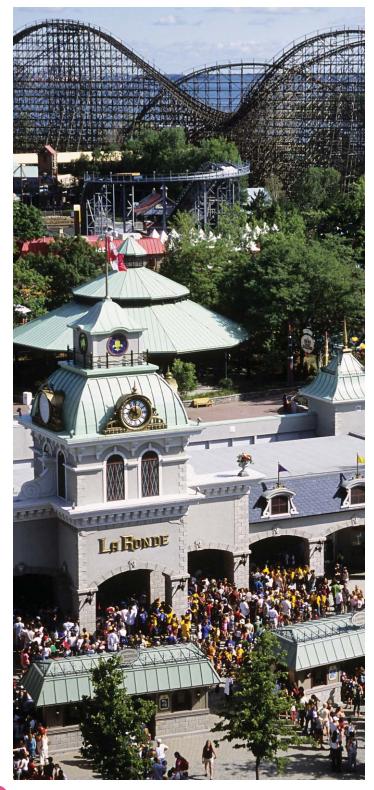
9:15 AM Discussant: Lori J. West, MD, DPhil, University of Alberta, Edmonton, Canada

9:20 AM General Q & A

FRIDAY, APRIL 26, 2013 8:00 am - 10:00 am

8:00 AM - 9:30 AM CONCURRENT ABSTRACT SESSIONS

9:30 AM - 10:00 AM Annual Business Meeting



10:00 am - Noon

Plenary Session

How to Succeed When the Right Ventricle Fails (517CD)

CHAIRS: Paul A. Corris, FRCP and Sharon A. Hunt, MD

SESSION SUMMARY: The right ventricle is often held accountable for morbidity and mortality in patients with advanced heart and/or lung disease. Moreover the right ventricle is frequently blamed for poor outcomes seen in patients receiving left ventricular assist device or heart transplantation. This session will provide the participant with a better understanding of right ventricular structure, function and physiology; how to evaluate right ventricular function in health and disease; and importantly management of right ventricular failure both through medical and surgical/device options.

10:00 AM Right Ventricular Structure and Function in Health and Disease, Andrew N. Redington, MD, FRCP(C), FRCP(UK), The Hospital for Sick Children, Toronto, ON, Canada

10:25 AM Clinical Assessment and Imaging, Anton Vonk Noordegraaf, MD, VU Medical Center, Amsterdam, The Netherlands

10:45 AM The Failing Systemic Right Ventricle, Daniel Bernstein, MD, Stanford University, Stanford, CA

Medical Management, John Granton, MD, University of Toronto, Toronto, ON, Canada

11:25 AM Surgical Approaches, Devices, and Transplant,
Martin Strueber, MD, Heart Center Leipzig, University
Leipzig, Leipzig, Germany

11:45 AM FEATURED ABSTRACT

2:00 PM - 3:30 AM CONCURRENT ABSTRACT SESSIONS

FRIDAY, APRIL 26, 2013

2:00 pm - 3:30 pm

Symposium 26

ISHLT/AST Joint Session I: Pretransplant Circulating Antibodies: Making Sense of Sensitization (513DEF)

CHAIRS: David O. Taylor, MD (ISHLT President) and Roslyn Mannon, MD (AST President)

SESSION SUMMARY: Anti-donor antibodies remain an obstacle to successful thoracic transplantation. The combined expertise of ISHLT and the American Transplant Society come to bear on this timely topic in two separate session. The first explores the detection, interpretation and potential treatments of these antibodies prior to transplantation. The second explores the development of antibody-mediated rejection after thoracic transplantation and importantly includes the perspective of the non-thoracic transplant community.

2:00 PM	Antibody Detection and the Use of the C1q Assay,
	AST Speaker: Dolly B. Tyan, PhD, Stanford University,
	Palo Alto, CA, USA

2:20 PM Pretransplant Antibodies in Clinical Practice: Are They All Bad, When to Treat and Use of the Virtual Crossmatch,

ISHLT Speaker: A.G. Kfoury, MD, FACC, Intermountain Heart Institute (UTAH Cardiac Transplant Program), Salt Lake City, Utah, USA

2:40 PM Desensitization Therapies in Patients Awaiting Kidney Transplantation,

AST Speaker: Stanley C. Jordan, Cedars-Sinai Medical Center, Los Angeles, CA, USA

3:00 PM The Approach to Desensitization Therapies for Urgent Status and Mechanical Assisted Patients Awaiting Thoracic Transplantation,

ISHLT Speaker: Maria G. Crespo-Leiro, MD, Hospital Universitario A Coruña, La Coruña, Spain

3:20 PM Moderated Panel Discussion

4:00 pm - 5:30 pm

Symposium 27

ISHLT/AST Joint Session II: Antibody-Mediated Rejection: State of the "Current" Art (513DEF)

CHAIRS: Lori J. West, MD, DPhil (ISHLT) and Cynthia J. Gries, MD MSc (AST)

SESSION SUMMARY: Anti-donor antibodies remain an obstacle to successful thoracic transplantation. The combined expertise of ISHLT and the American Transplant Society come to bear on this timely topic in two separate session. The first explores the detection, interpretation and potential treatments of these antibodies prior to transplantation. The second explores the development of antibody-mediated rejection after thoracic transplantation and importantly includes the perspective of the non-thoracic transplant community.

4:00 PM	Antibodies After Thoracic Transplantation: The
	Clinical Meaning and When to Intervene,
	ISHLT Speaker: John D. Smith, PhD, Harefield Hospital,
	Middlesey IIK

4:20 PM	Common Pathology Findings of AMR Across Solid Organ Transplantation, AST Speaker: Robert Colvin, Massachusetts General Hospital, Boston, MA, USA
1.10 DM	Prophylactic Thoranics in Consitized Patients

4:40 I III	r rupnylactic filerapies in Sensitizeu r attents
	After Kidney Transplantation,
	AST Speaker: Millie Samaniego, University of Michigan,
	Ann Arbor, MI, USA

5:00 PM	Treatment Strategies in AMR in Thoracic	
	Transplantation.	

ISHLT Speaker: Jon A. Kobashigawa, MD, Cedars-Sinai Heart Institute, Los Angeles, CA, USA

5:20 PM Moderated Panel Discussion

4:00 PM - 5:30 AM CONCURRENT ABSTRACT SESSIONS

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

FRIDAY, APRIL 26, 2013 5:30 pm - 7:30 pm

International MCS Reimbursement

International MCS Reimbursement

NOTE: CME credit is not provided for this session

MODERATORS:

Jeffrey Teuteberg, MD (MCS Council Chair) and Daniel J. Goldstein, MD (MCS Council Vice Chair)

Reimbursement in the United States

5:30 PM Perspective from the Payers, Dennis Irwin, MD, OptumHealth, Golden Valley, MN, USA

Updates on Reimbursement in 5:40 PM *the US,* Tina Ivovic, Thoratec

Corporation, Pleasanton, CA, USA Clinical Perspectives, Valluvan Jeevanandam, MD, University of Chicago Medical Center, Chicago, IL, USA 5:50 PM

6:00 PM Q & A

The European Landscape

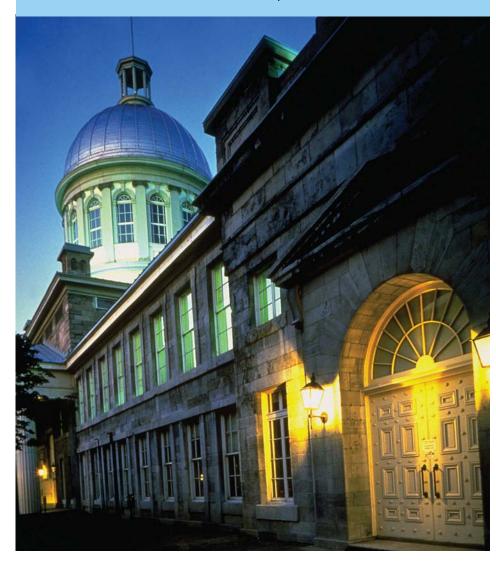
6:30 PM **Updates on Reimbursement in Europe**, Timothy L. Homer, MPA, HeartWare Incorporated, Framingham, MA, USA

Clinical Perspectives, Stephan Schueler, MD, PhD, FRCS, Freeman Hospital, Newcastle upon 6:45 PM

Tyne, UK

7:00 PM Q & A

SATURDAY, APRIL 27, 2013





SATURDAY, APRIL 27, 2013

7:00 am - 8:00 am

7:00 am - 8:00 am

Sunrise Symposium 11

MCS and Congenital Heart Disease – Success and Failure (511)

CHAIRS: Carmelo A. Milano, MD and Asif Hasan MD, FRCS (C/th)

SESSION SUMMARY: At the end of the session the attendees will be able to discuss the outcomes after heart transplant in patients with congenital heart disease, review the utility of mechanical circulatory support in patients with congenital heart disease and heart failure and learn from a case based discussion.

7:00 AM Outcomes After Heart Transplantation for Adult Congenital Heart Disease, Anne I. Dipchand, MD, Hospital for Sick Children, Toronto, ON, Canada

7:15 AM Failed Fontan and Use of Mechanical Assist, David L. S. Morales, MD, Cincinnati Children's Hospital Medical Center, The Heart Institute, Cincinnati, OH, USA

7:30 AM My Toughest Cases in Transplantation of ACHD, Jonathan M. Chen, MD, New York Presbyterian, New York, NY, USA

7:45 AM Discussion

PH and the Lung Parenchyma (510)

CHAIRS: Oksana A. Shlobin, MD and Mardi Gomberg-Maitland, MD,

SESSION SUMMARY: Pulmonary hypertension is commonly seen in patients with advanced interstitial and airway disease but is also seen in patients with relatively mild parenchymal destruction when it is regarded as out of proportion PH. This concept is well recognized but not so well defined. This symposium will discuss the evidence and clinical approaches to the use of targeted therapy for PAH in three common examples seen in clinical practice.

7:00 AM Sarcoidosis — More Than Granulomas?, Steven D. Nathan, Inova Fairfax Hospital, Falls Church, VA, USA

7:15 AM Scleroderma, Jeffrey A. Golden, MD, UCSF, San Francisco, CA, USA

7:30 AM Pulmonary Hypertension in Chronic Obstructive Pulmonary Disease — When to Treat?, Martin P. Iversen, MD, PhD, Rigshospitalet, Copenhagen, Denmark

7:45 AM Discussion

Sunrise Symposium 12

Challenging Candidates for Lung Transplant Selection (512A-G)

CHAIRS: Gregory I. Snell MD and David Weill, MD

7:00 am - 8:00 am

SESSION SUMMARY: Advanced therapies including VADs and transplantation are increasingly being offered to older patients, while the average age of organ donors is also increasing. Therefore more frail patients are referred for lung transplant. As survivors of malignant disease increase, some of them require lung transplant and clinicians are facing difficult decisions on whether they are candidates. As extracorporeal technology for lung failure advances, transplants for patients on ECMO is being considered more and more. Finally, patients with viral infections, especially HCV and HIV are living longer and present special challenges as possible lung transplant candidates. This session will provide a state-of-the art overview of special considerations and outcomes of providing advanced organ support and replacement to all these groups of challenging recipients.

7:00 AM Bridged or Ventilated Patients, Kenneth R. McCurry, MD, Cleveland Clinic, Cleveland, OH, USA

7:10 AM Lung Transplant Candidates
with Malignancy, Annette Boehler,
MD, University Hospital Zurich,
Switzerland

7:20 AM The Frail and Debilitated Lung Transplant Candidate, David J. Lederer, MD, MS, Columbia University Medical Center, New York, NY, USA

7:30 AM Viral Infections in the Lung
Transplant Candidate (HIV and
HCV), Lara Danziger-Isakov, MD,
MPH, Cincinnati Children's Hospital Medical Center, Cincinnati,
OH, USA

7:40 AM Discussion

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SATURDAY, APRIL 27, 2013

7:00 am - 8:00 am

7:00 am - 8:00 am

Sunrise Symposium 13

Pediatric Lung Transplantation: Developments and Controversies (513ABC)

CHAIRS: Samuel B. Goldfarb, MD and Bart L. Rottier, MD

SESSION SUMMARY: This session aims to update the pediatric lung transplant community on recent developments in the field and to discuss controversies, in particular regarding strategies to overcome donor organ shortage, mechanical support as a bridge to pediatric lung transplantation, bronchoscopy in pediatric lung transplant recipients and specific pediatric aspects of treatment for Bronchiolitis Obliterans Syndrome (BOS).

7:00 AM Pediatric Aspects of DCD Lung Donors—Where Are We in 2013?, Melinda Solomon MD, FRCP(C), Hospital for Sick Children, Toronto, ON, Canada

7:10 AM Mechanical Support in Children
Bridged to Lung Transplantation
— Current Practice and Future
Challenges, Nicolaus Schwerk,
MD, Hannover Medical School,
Hannover, Germany

7:20 AM Bronchoscopy in Pediatric
Lung Transplant Recipients —
Surveillance vs. Clinically Indicated Procedures, Albert Faro,
MD, Washington University in St.
Louis, St. Louis, MO, USA

7:30 AM Treatment Options for BOS in Children After Lung Transplantation, Christian Benden, MD, University Hospital Zurich, Switzerland

7:40 AM Discussion

Sunrise Symposium 14

Travel, Leisure And Work After Transplant: Keeping Our Patients Safe From Infections (513DEF)

CHAIRS: Valentina Stosor, MD and Amparo Solé MD, PhD

session summary: This session will discuss the role of pre-transplant infectious diseases evaluations, managing donor-related infections and post-transplant strategies for assessing risk and avoiding infections related to everyday activities. The emphasis is on how transplant patients can lead more "normal" lives and safely enjoy the world around them.

7:00 AM

The Dreaded Donor Call that Needs the Transplant Infectious Diseases Specialist to Clear for Accepting the Organ: Resources, Diagnostics, Management Strategies, Amparo Solé MD, PhD, University Hospital La Fe, Valencia, Spain

7:15 AM Pretransplant Infectious
Diseases Evaluations: Assessing Risk and Nipping It in the
Bud, Stanley I. Martin, MD, Ohio
State University Medical Center,
Columbus, OH, USA

7:30 AM The Environment Bites Back, Kate Gould, Freeman Hospital, Newcastle upon Tyne, UK

7:45 AM Discussion

8:00 AM - 9:30 AM CONCURRENT ABSTRACT SESSIONS



SATURDAY, APRIL 27, 2013

8:00 am - 9:30 am

Symposium 28

Pharm Symposium: A Lifecycle Journey in Cystic Fibrosis and Lung Transplantation (512A-G)

CHAIRS: Christopher R. Ensor, PharmD, BCPS-CV and Allan R. Glanville, MBBS, MD, FRACP

SESSION SUMMARY: After the successful symposium "A lifecycle journey in advanced heart failure and transplantation" at the 2012 meeting, we will continue this innovative session for the 2013 meeting, sponsored by the ISHLT Pharmacy and Pharmacology Council. 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. For the 2013 Montréal meeting, we will focus on the lifecycle of Cystic Fibrosis and Lung Transplantation with special emphasis on four "journey points."

- considerations for listing and management of pre-transplant infections such as multi-drug resistant Burkholderia cepacia complex and Mycobacterium abscessus,
- 2) peri and immediate post-operative management issues,
- 3) metabolic and interaction considerations to drug dosing in the CF lung transplantation patient, and
- 4) management of bronchiolitis obliterans syndrome that demands innovative immunomodulatory strategies. The focus of this series will be on therapeutics that uniquely involve emerging or established knowledge in the pharmacology and pharmacy aspects of the interval disease states or situations.
- 8:00 AM Pre-transplant Journey: Considerations With Multi-Drug Resistant Infections in the Lung Transplant Candidate With Cystic Fibrosis, Denis Hadjiliadis MD, MHS, University of Pennsylvania, Philadelphia, PA, USA
- 8:20 AM Peri-operative and Immediate Post-operative Management of the Lung Transplant Patient With Cystic Fibrosis, Joseph M. Pilewski, MD, University of Pittsburgh, Pittsburgh, PA, USA
- 8:40 AM Middle Post-transplant Journey: Metabolic and Interaction
 Considerations to Drug-dosing in the Cystic Fibrosis Lung
 Transplant Recipient, Haifa Lyster MSc, BPharm(Hons), Royal
 Brompton & Harefield NHS Foundation Trust, London, UK
- 9:00 AM Late Post-transplant Journey: Prevention and Management Strategies for OB in Cystic Fibrosis, Peter M. A. Hopkins, FRACP, The Prince Charles Hospital, Brisbane, QLD, Australia
- 9:20 AM Moderated Panel Discussion

SATURDAY, APRIL 27, 2013 9:45 am - Noon

Plenary Session

From Bench to Bedside (511)

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

SESSION SUMMARY: The final plenary session on Saturday represents one of the clear highlights of the meeting in Montréal and one you will miss at your peril. The session opens with great examples of translational science from the Society represented by two consensus reports on major areas in cardiac transplantation namely primary graft failure and a review of listing criteria based on a thorough review of the latest data. Marlene Rabinovich, one of our major invited speakers with a fantastic reputation throughout the scientific world, will then illustrate how basic research on BMPRII is offering new targets for much needed therapy in PAH in classic bench to bedside story. She will be followed by Mary Amanda Dew presenting novel data on recognizing the importance of mental health as well as physical health in all aspects of the Society's Interests. The session ends in a flourish with a grand debate on an extended role of VAD implantation in acute heart failure by two of the Society's most respected daughters. This plenary is a true synthesis of many facets of translational science at its best.

9:45 AM Awards Presentations

10:00 AM ISHLT Consensus Reports

- Primary Graft Failure in Heart Transplantation, Jon Kobashigawa, MD, Cedars Sinai Medical Center, Los Angeles. CA. USA
- 2) 2013 Heart Transplantation Listing Criteria, Mandeep R. Mehra, MD, Harvard Medical School, Boston, MA, USA
- 10:15 AM BMPR2: From Mutation to Manipulation, Marlene Rabinovich, MD, Stanford University School of Medicine, Stanford, CA

10:40 AM FEATURED ABSTRACT

10:55 AM The Mind Matters, Mary Amanda Dew, PhD, University of Pittsburgh School of Medicine and Medical Center, Pittsburgh, PA, USA

11:15 AM FEATURED ABSTRACT

11:30 AM The President's Debate

MODERATOR: David O. Taylor, MD

TOPICS:

- VAD support leads to recovery
- Partial support works?
- Heart failure patients should be implanted earlier?

PRO: Emma Birks, FRCP, PhD, University of Louisville, Louisville, KY, USA

CON: Mariell Jessup MD, University of Pennsylvania, Philadelphia, PA, USA

12:15 PM - 1:15 PM CONCURRENT ABSTRACT SESSIONS



ISHLT ACADEMY

THE DAY PRIOR TO THE 2013 ANNUAL MEETING, WE WILL BE CONDUCTING THE ISHLT ACADEMY: CORE COMPETENCIES IN MECHANICAL CIRCULATORY SUPPORT AND THE ISHLT ACADEMY: CORE COMPETENCIES IN PEDIATRIC HEART AND LUNG TRANSPLANTATION. YOU MAY REGISTER FOR THIS COURSE VIA THE ANNUAL MEETING REGISTRATION FORM. ATTENDANCE AT THE ANNUAL MEETING IS NOT REQUIRED IN ORDER TO REGISTER FOR THE ISHLT ACADEMY.

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 competencies in the field of cardiopulmonary transplantation, mechanical and biological support of the failing heart, advanced lung disease (including pulmonary vascular disease) and

cell replacement therapy. These educational endeavors will complement the ISHLT's existing activities in the promulgation of new



science, registry analyses, guideline statements and monograph series as a consolidated activity designed to train and educate young clinicians, trainees and those looking for a refresher course in clinical practice mandates in the field.

ISHLT ACADEMY: CORE CO MECHANICAL CIRCULATO

Tuesday, April 23, 2013 • Montréal, Quebec, Canada



In response to high demand, on Tuesday, April 23, 2013, the day prior to the 2013 ISHLT Annual Meeting, we are conducting, for a second time, the ISHLT Academy: Core Competencies in Mechanical Circulatory Support.

IMPORTANT NOTE: Due to limited seating and high demand, registration preference will be given to ISHLT members and non-member physicians and allied health personnel. For industry employees and other non-medical professionals who are not members of ISHLT and who wish to attend the academy, we will be simulcasting the presentations into a separate room. This will permit full access to the presentations themselves, but limited or no audience participation. We hope this will serve to accommodate the demand for access to the information while preserving the small-scale atmosphere necessary to maximize delegate/faculty interaction among physicians.

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. 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.

The 2013 ISHLT Academy: Core Competencies in Mechanical Circulatory Support will cover the same broad categories that were presented for the 2012 Academy in Prague: Review of the Current State of MCS, Patient Selection, Surgical Considerations, Post-operative Management, the Transition to Home and Long-term Management. However the program has been refocused as a result of participant feedback, with a particular emphasis on more audience participation and case studies.

MPETENCIES IN RY SUPPORT

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 8.0 AMA PRA Category 1 Credits.TM 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.

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 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.

Learning Objectives

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

- 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.
- Recognize the medical and social factors which impact patient outcomes on MCS.
- 4. Optimize implantation techniques and pump selection.
- Manage patients after MCS in the intensive care unit, as an inpatient and as an outpatient.
- Diagnose and manage common clinical dilemmas and adverse events in patients after MCS.

ISHLT ACADEMY: CORE COMPETENCIES IN MECHANICAL CIRCULATORY SUPPORT Room 510 Tuesday, April 23, 2013 Montréal, Quebec, Canada

CHAIRS: Jeffrey Teuteberg, MD • Andreas Zuckermann, MD David S. Feldman, MD, PhD FACC, FAHA • Daniel J. Goldstein, MD

SESSION	TIME	PRESENTATION TITLE	SPEAKER	CNTRY
Registration and Morning Coffee	7:00-8:00			
Introduction	8:00-8:15	Welcome and Brief Overview	Jeffrey J. Teuteberg, MD, University of Pittsburgh, Pittsburgh, PA	USA
REVIEW OF THE CURRENT STATE OF MCS	8:15-9:15			
	8:15	Technology 101: Review of current technologies, types of flow, pump parameters	Francis D. Pagani, MD, PhD, University of Michigan, Ann Arbor, MI	USA
	8:30	BTT/Long-term Support / Recovery: Review state of outcomes and adverse events with current technologies	Andreas Zuckermann, MD, Medical University of Vienna, Vienna	AUSTRIA
	8:45	Shock: Role of biventricular support, TAH and ECMO	Pascal Leprince, MD, PhD, University Paris VI, Pitié Salpétrière Hospital, Paris	FRANCE
	9:00	Q & A		
PATIENT SELECTION	9:15-10:30			
	9:15	Worrisome Signals: Risk factors which presage patient decline	Nicholas R. Banner, FRCP, Royal Brompton and Harefield NHS Foundation Trust, Harefield, Middlesex	UK
	9:30	RV Assessment and Prediction: Brief overview of impact of RV failure, pre-operative assessment and management of the RV, risk prediction	Jeffrey J. Teuteberg, MD, University of Pittsburgh, Pittsburgh, PA	USA
	9:45	End-Organ Assessment: – Review of organ recoverability: renal, hepatic, vascular, overall medical candidacy	Lee R. Goldberg, MD, MPH, University of Pennsylvania, Philadelphia, PA	USA
	10:00	Timing of Implantation: When is the patient "sick enough" to implant MCS;	Andrew J. Boyle, MD, Cleveland Clinic Florida, Weston, FL	USA
	10:15	Q & A		
Coffee Break	10:30-10:45			
SURGICAL CONSIDERATIONS	10:45-12:00			
	10:45	Implantation 101: – Overview of the most crucial surgical considerations: inflow cannula/pump placement, driveline, etc.	Nader Moazami, MD, The Cleveland Clinic, Cleveland, OH	USA

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SESSION	TIME	PRESENTATION TITLE	SPEAKER	CNTRY
	11:05	How Much Else is Too Much?: Concomitant operative procedures: TV, Aortic valve, prior Dor, congenitals	Stephan Schueler, MD, PhD, FRCS, Newcastle upon Tyne Hospitals Trust	UK
11:25		Matching Pumps to Patients: Considerations for device type, type of flow based upon patient factors	Mark S. Slaughter, MD, University of Louisville, Louisville, KY	USA
	11:45	Q & A		
Lunch Break	Noon-1:00	(Lunch on own; delegates are encouraged to pre-register for a box lunch so they can spend the lunch break interacting with the faculty)		
POST-OP	1:00-2:15			
	1:00	Managing the RV: Post-operative approach to the RV: surgical considerations, pump speed, iNo, inotropes, etc.	David S. Feldman, MD, PhD FACC, FAHA, Minneapolis Heart Institute, Minneapolis, MN	USA
	1:20	Anticoagulation: Overview of the timing and type of anticoagulation, means to monitor state of anticoagulation, anticoagulation management for elective procedures	Vivek Rao, MD, PhD, Toronto General Hospital, Toronto, ON	CANADA
	1:40	The Role of Imaging: Managing the VAD Patient	Shashank S. Desai, MD, Inova Fairfax Hospital, Falls Church, VA	USA
	2:00	Q & A		
TRANSITION TO HOME	2:15-3:15			
	2:15	Teaching/Patient Assessment: Outline of approach to teaching patient and their family and community	Michael G. Petty, PhD, RN, CCNS, CNS, University of Minnesota-Fairview, Minneapolis, MN	USA
	2:30	Outpatient Management: Clinic structure, typical items addressed, focused medical management (BP, rhythms, etc.), rehab	Joseph G. Rogers, MD, Duke University Medical Center, Durham, NC	USA
	2:45	Quality of Life, Functional Capacity, End of Life: The need for, timing of and measures to assess	Salpy Pamboukian, MD, University of Alabama at Birmingham, Birmingham, AL	USA
	3:00	Q & A		
Coffee Break	3:15-3:30			
LONG-TERM MANAGEMENT AND CASE STUDIES	3:30-5:10			

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SESSION	TIME	PRESENTATION TITLE	SPEAKER	CNTRY
	3:30	Infections: Prevention, diagnosis, medical and surgical management	Evgenij Potapov, MD, PhD, Deutsches Herzzentrum Berlin, Berlin	GERMANY
	3:45	Case and Discussion		
	3:55	GI Bleeding: Review of pathophysiology, incidence and diagnostic/therapeutic approach	Benjamin C. Sun, MD, Minneapolis Heart Institute, Minneapolis, MN	USA
	4:10	Case and Discussion		
	4:20	Pump Thrombosis: Diagnostic and management Algorithm	Daniel J. Goldstein, MD, Montefiore Medical Center, Bronx, NY	USA
	4:35	Case and Discussion		
	4:45	Aortic Insufficiency: Incidence, screening, management	Martin Strueber, MD, University Heart Center Leipzig, Leipzig	GERMANY
	5:00	Case and Discussion		
		Case Discussant Panel:	Christopher T. Salerno, MD, St. Vincent Heart Center of Indiana, Indianapolis, IN	USA
			Sean P. Pinney, MD, Mount Sinai Medical Center, New York, NY	USA
			Michele Pilato, MD, ISMETT, Palermo	ITALY
ISHLT MCS GUIDELINES PANEL DISCUSSION	5:10-5:20			
		Discussants:	David S. Feldman, MD, PhD, FACC, FAHA, Minneapolis Heart Institute, Minneapolis, MN	USA
			Salpy Pamboukian, MD, MSPH University of Alabama at Birmingham, Birmingham, AL	USA
			Jeffrey J. Teuteberg, MD, University of Pittsburgh, Pittsburgh, PA	USA
SUMMARY/ADJOURN	5:20			
Reception	5:30-6:30			

ISHLT ACADEMY: CORE COMPETENCIES IN PEDIATRIC HEART AND LUNG TRANSPLANTATION

Tuesday, April 23, 2013 • Montréal, Quebec, Canada



This academy will provide a concise review of clinical knowledge and essential professional skills to facilitate the surgical and medical management of pediatric patients with advanced heart failure who are being assessed for and who have received a heart or lung transplant.

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. The course will highlight particular areas of interest in pediatric heart and lung transplantation, including management of patients with congenital heart disease, ABO incompatible heart transplantation and antibody-mediated rejection in children. All lectures will be delivered by internationally recognized experts in the field of pediatric thoracic transplantation and include cardiologists, cardiac surgeons and transplant coordinators.

Audience participation and interaction with the faculty will be actively encouraged throughout the Academy with Case Studies with audience participation following each major topic and by limiting the enrollment to 200 participants.

The educational workforce of the Pediatric Transplant Council of the ISHLT is confident this will be the most comprehensive and valuable summary for practitioners in the field of pediatric heart and lung transplantation.

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 and allied health professionals.

Credit Designation Statement

ISHLT designates this live activity for a maximum of 8.5 AMA PRA Category 1 Credits.TM Participants should claim only the credit commensurate with the extent of their participation in the activity.

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Learning Objectives

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.

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 pediatric patients undergoing heart or lung transplantation, with an emphasis on patients with congenital heart disease.

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 pediatric transplantation, rather than as a detailed update for those who are already proficient in the field.

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

- 1. Describing the evolution of pediatric heart and lung transplantation
- 2. Identifying the risk factors for survival following heart or lung transplantation in patients with congenital heart disease and cardiomyopathy
- 3. Evaluating and managing children presenting with heart or lung failure
- 4. Completing a comprehensive evaluation and listing for pediatric heart or lung transplantation
- 5. Managing a pediatric patient awaiting heart or lung transplantation including the use of mechanical support
- 6. Evaluating a potential pediatric donor heart or lung
- 7. Managing a pediatric patient in the early post-operative period following heart or lung transplantation
- 8. Optimizing immunosuppression in children following heart or lung transplantation
- 9. Evaluating and treating rejection following pediatric heart or lung transplantation
- 10. Managing the co-morbidities of pediatric heart or lung transplantation

ISHLT ACADEMY: CORE COMPETENCIES IN PEDIATRIC HEART AND LUNG TRANSPLANTATION Room 512A-G Tuesday, April 23, 2013 Montréal, Quebec, Canada

CHAIRS: Debra Dodd, MD • Christian Benden, MD Daphne Hsu, MD • Kimberly Gandy, MD

SESSION	TIME	PRESENTATION TITLE	SPEAKER	CNTRY
Registration and Morning Coffee	7:00-7:45			
Introduction	7:45-8:00			
Overview	8:00-8:15	Overview of Pediatric Heart and Lung Transplantation: History, Registries and Outcomes	Daphne T. Hsu, MD, Children's Hospital at Montefiore, Bronx, New York	USA
ADVANCED PEDIATRIC HEART AND LUNG FAILURE	8:15-9:45			
	8:15	Mechanisms and pathophysiology of heart failure in children	Daniel Bernstein, MD, Stanford University, Palo Alto, CA	USA
	8:30	Management of heart failure in children	Paul Kantor, MD, Stollery Children's Hospital, Edmonton, Alberta	CANADA
	8:45	Medical management of pulmonary failure in children	Bart Rottier, MD, University Medical Center Groningen, Groningen	THE NEATHER- LANDS
	9:00	Evaluation and listing for heart transplantation	Debra Dodd, MD, Vanderbilt Children's Hospital, Nashville, TN	USA
	9:15	Evaluation and listing for lung transplantation	Christian Benden, MD, University Hospital Zurich, Zurich	SWITZER- LAND
	9:30	Case presentations		
Coffee Break	9:45-10:00			
MANAGEMENT OF THE LISTED PATIENT	10:00-11:15			
	10:00	Evaluation and decision-making for mechanical assist device support	Brigitte Stiller, MD, PhD, University Medical Center Freiburg	GERMANY
	10:15	Management of mechanical assist device support and outcomes	David Morales, MD, Cincinnati Children's Hospital, Cincinnati, OH	USA
	10:30	Evaluation and management of the donor lung	Shaf Keshavjee, MD, FRCSC, Toronto General Hospital, Toronto, Ontario	CANADA
	10:45	Evaluation and management of the donor heart	Kirk Kanter, MF, Emory University, Atlanta, GA	USA

SESSION	TIME	PRESENTATION TITLE	SPEAKER	CNTRY
	11:00	Case presentations		
Coffee Break	11:15-11:30			
MANAGEMENT OF SPECIAL POPULATIONS	11:30-12:30			
	11:30	Evaluation and management of ABO incompatible transplantation	Simon Urschel, MD, Stollery Children's Hospital, Edmonton, Alberta	CANADA
	11:45	Evaluation and management of the sensitized patient	Steven Webber, MB ChB, MRCP, Vanderbilt Children's Hospital, Nashville, TN	USA
	12:00	Evaluation and management of the complex congenital heart disease patient	Beth Kaufman, MD, Stanford University, Palo Alto, CA	USA
	12:15	Case presentations		
Lunch Break	12:30-1:30	(Lunch on own; delegates are encouraged to pre-register for a box lunch so they can spend the lunch break interacting with the faculty)		
PERI-TRANSPLANT MANAGEMENT	1:30-3:00			
	1:30	Transplantation and immediate post- transplantation management	Charles Canter, MD, St. Louis Children's Hospital, St. Louis, MO	USA
	1:45	Immunosuppression: Induction and maintenance	Richard Kirk, FRCP FRCPCH Freeman Hospital, Newcastle upon Tyne	UK
	2:00	Management of acute cellular rejection	Michael Kuhn, MD, Loma Linda University, Loma Linda, CA	USA
	2:15	Management of antibody-mediated rejection	Anne Dipchand, MD, Hospital for Sick Children, Toronto, Ontario	CANADA
	2:30	Case presentations		
Coffee Break	3:00-3:15			
LONG-TERM MANAGEMENT 1	3:15-4:45			
	3:15	Designing a follow-up program	TP Singh, Children's Hospital Boston, Boston, MA	USA

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SESSION	TIME	PRESENTATION TITLE	SPEAKER	CNTRY
	3:30	Transition to home and Quality of Life	Connie White-Williams, RN, University of Alabama at Birmingham, Birmingham, AL	USA
	3:45	Evaluation of the failing graft	Gerald Boyle, MD, Cleveland Clinic Foundation, Cleveland, OH	USA
	4:00	Diagnosis and management of graft vasculopathy	Elfriede Pahl, MD, Ann and Robert Lurie Children's Hospital, Chicago, IL	USA
	4:15	Case presentations		
Coffee Break	4:45-5:00			
LONG-TERM MANAGEMENT II	5:00-6:30			
	5:00	Infections: Prevention, diagnosis and management	Lara Danziger-Isakov MD, MPH, Cleveland Clinic Foundation, Cleveland, OH	USA
	5:15	Late complications following heart and lung transplantation	Stuart Sweet, MD, St. Louis Children's Hospital, St. Louis, MO	USA
	5:30	Re-transplantation	Linda Addonizio, MD, Columbia University, New York, NY USA	
	5:45	Case presentations		
SUMMARY/ADJOURN	6:15			
Reception	6:30-7:30			

REGISTRATION POLICIES

INSTRUCTIONS FOR COMPLETING THE REGISTRATION FORM

- 1. The registration fee includes attendance at all 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.
- 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 March 4, 2013 the non-member registration fee includes membership in the Society from the date of registration through December 31, 2013. You will be required to complete a membership application in order to activate your membership. 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 25, 2013 must register on-site. Registration fees are determined by the date when payment in full is postmarked/faxed. 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 March 25, 2013, a full refund of the scientific session fees paid will be given, less a \$75 handling fee. For written cancellation notices received after March 25, 2013, no refund of any fees will be given. Cancellation refunds will be issued after the meeting. Cancellation requests should be emailed to Lee Ann Mills, leeann.mills@ishlt.org.
- *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 25, 2013. 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.** MCS Academy: Due to limited seating and high demand, registration preference will be given to ISHLT members and non-member physicians and allied health personnel. For industry employees and other non-medical professionals who are not members of ISHLT and who wish to attend the academy, we will be simulcasting the presentations into a separate room. This will permit full access to the presentations themselves, but limited or no audience participation. We hope this will serve to accommodate the demand for access to the information while preserving the small-scale atmosphere necessary to maximize delegate/faculty interaction among physicians.

REGISTRATION FORM



33rd ANNUAL MEETING and SCIENTIFIC SESSIONS April 24 – 27, 2013, Montréal, Canada

April 23, 2013, Montréal, Canada

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

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☐ Please check	egistration prior to March 4, 2013 includes membership in here if you wish to decline this membership offer (no refun			31, 2013 with completed membership	application.
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UNIOR FACULTY N Registration is limit members of ISHLT w	MENTOR LUNCH: (Wednesday) ted to the first 100 student/resident/fellow who are registered for the meeting.	\$	15	\$ 15	\$
BOX LUNCHES:	TUESDAY (for Academy registrants only)	\$	15	\$ 15	¢
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ISHLT ACADEMY: C	ORE COMPETENCIES IN MECHANICAL CIRCULATORY SUI	PPORT (Reg	gistration is limite	d to the first 200 registrants.*See inst	ruction #11)
	ISHLT Member		250	\$ 300	\$
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	ISHLT Member		250	\$ 300	\$
	NON-ISHLT Member	\$	300	\$ 350	\$
				SUBTOTAL:	\$
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Checks must be ma	TRUCTION #9 FOR WIRE TRANSFER INSTRUCTIONS. If no de payable to ISHLT and must be drawn on a US bank. If yo ax. (To avoid duplicate charges do not mail AND fax your for	ou prefer to p	g online, full paym pay by credit card,	nent in US funds only must accompany	your registration form.
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For information on accommodations, amenities, room rates & hotel ratings, please see details on pages 60-61. Reservations may be secured through the ISHLT Housing Bureau: TOURISME MONTRÉAL.

Stay at one of the official ISHLT meeting hotels, and be at the heart of the action!

These hotels have been chosen for the quality of their accommodations and their close proximity to the Palais des congrès centre.

Discounted room rates have been arranged for registered participants in ISHLT Annual Meeting & Scientific Sessions.

The discounted rates are subject to availability at each hotel and are guaranteed until March 8, 2013. After that date, all rooms and rates will be subject to availability.

Reservation Procedure with Tourisme Montréal

Hotel reservations can be made at any time via Tourisme Montréal's secure online hotel reservation platform. The following reservation methods are available:

Online: https://resweb.passkey.com/go/ishlt2013 (STRONGLY PREFERRED)

By phone: 514-844-0848

888-722-2220 (toll free North America)

By e-mail: reservation@tourisme-montreal.org

- Upon completion of your reservation request, Tourisme
 Montréal will send you a hotel assignment notice via email/fax.
- 2. 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.
- 4. Breakfast is NOT included unless specified.

By mail: Tourisme Montréal – Housing Bureau

1555 Peel Street, Bureau 600 Montréal, QC H3A 3L5

By fax: 514-844-6771

- CANCELLATION OF YOUR ROOM: The cancellation and refund policy for your reservation will be described in the reservation confirmation letter that you will receive directly from the hotel that you select.
- GROUP REQUESTS: Any request for 10 rooms or more must be submitted in writing to reservation@tourisme-Montréal.org.
 Reservations for groups of more than 10 must be pre-approved by ISHLT. A credit card number is mandatory to reserve a block of rooms.
- 7. Rates are quoted in Canadian Dollars and do NOT include applicable taxes.

Hotel Le Dauphin Montréal 1025, de Bleury CAD \$143



Located in the Quartier international, near the Palais des congrès de Montréal and the Festival place, minutes from Old Montréal, trendy boutiques and entertainment venues as well as the city's cultural and business districts. Each room comes with a refrigerator and free Internet access. Room rate includes breakfast.





CAD \$189

Embassy Suites Montréal



208, rue St-Antoine Ouest

The recently constructed Embassy Suites is conveniently located across the street from the Convention Centre and within a few blocks from all downtown activities including, nightlife, restaurants, and many major attractions. All guests receive complimentary Cooked-to-Order breakfast and Internet access. A hospitality centre in each room includes a microwave, refrigerator and coffee maker. Room rates include complimentary high speed internet access.

Fairmont Queen Elizabeth CAD \$177

900, René-Lévesque Blvd. West









At the centre of Montréal's vibrant cultural and commercial district sits the deluxe hotel, Fairmont The Queen Elizabeth. Within walking distance to Montréal's extensive underground city and to sports and cultural attractions, Fairmont The Queen Elizabeth is internationally renowned for its quality of accommodation and food, its welcoming service and its central location. Committed to sustainable tourism, this world-class property embodies the charm and elegance of Montréal. Room rates include complimentary high speed internet access.

Marriott Château Champlain CAD \$200







Downtown Montréal, linked to the Underground City, métro, Bell Centre and central station. All rooms provide captivating views of Montréal through their half-moon windows. Guests can enjoy the health and fitness centre, indoor pool, hot tub and steam rooms. Room rates include complimentary high speed internet access.

1050, rue de la Gauchetière Ouest

Hilton Montréal Bonaventure CAD \$179

900, rue de la Gauchetière Ouest





Le Place d'Armes Hotel & Suites 55, Saint-Jacques Street West CAD \$189





One of Old Montréal's most popular boutique hotels offers luxurious rooms, including studios with balconies and penthouse suites. Signature features, such as stone and brick walls, fireplaces in every room, as well as state-of-the-art electronic equipment, are all part of the hotel's reputation for impeccable style and charm. Guests can also relax in the inviting atmosphere of its restaurant (Aix Cuisine du Terroir) or its bar (Suite 701) or relax in its spa with hammam steam bath, the first of its kind in Montréal. Room rates include complimentary high speed internet access.



Hyatt Regency Montréal 1255, rue Jeanne-Mance CAD \$177

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ISHLT's largest block of rooms is at this hotel. The Hyatt Regency Montréal offers direct underground access to the Palais des congrès de Montréal, the subway and various attractions, including the Museum of Contemporary Art. It is also within walking distance of Old Montréal, Chinatown and the trendiest restaurants. It features 605 handsomely appointed guest rooms and suites with spectacular views of downtown Montréal.

Le Centre Sheraton CAD \$179

1201, René-Lévesque Blvd. West





Completely renovated and located in the heart of downtown, footsteps away from the central business district, shops, restaurants, and major tourist attractions, Le Centre Sheraton Montréal offers rooms with modern amenities, including the new Sheraton Sweet Sleeper TM Bed. Club level guest rooms offer upgraded amenities, including access to the 37th floor Club Lounge. Guests can dine at the Bistro Le Boulevard and treat themselves to a relaxing evening at the welcoming Café Bar. The health club has an indoor pool, whirlpool, sauna, massage studio, and a brand new spa with programs conceived by Core Performance. Room rates include complimentary high speed internet access.

InterContinental Montréal 360, rue Saint-Antoine Ouest CAD \$192





Entirely transformed after spectacular renovations compléted in 2009, the InterContinental Montréal flaunts the perfect alliance of rich historical heritage and the fresh contemporary design. Elegantly overlooking the international business area with its 26storey turret, the hotel is ideally located between Old Montréal and the business district. Room rates include complimentary high speed internet access.

Westin Montréal CAD \$199



270, rue St-Antoine Ouest





Built in 2009, Le Westin Montréal is sure to become a hallmark Montréal hotel. The Westin Montréal is located at the corner of St. Antoine and St. Pierre in Old Montréal and linked with the Palais des congrès and the underground city. Rich in history, a unique main entrance allows cars to drive into a grand hall that once housed the printing presses of The Gazette newspaper. Room rates include complimentary high speed internet access.

FUTURE ANNUAL MEETINGS:

34th ISHLT Annual Meeting and Scientific Sessions Manchester Grand, San Diego, CA, USA April 9–12, 2014





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