



33rd Annual Meeting and Scientific Sessions



# DAILY

April 24-27, 2013 • Montréal, Canada

# Links

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## Schedule at a Glance

**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

This issue of Daily  
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## Welcome to the 2013 Meeting and Scientific Sessions

**From the President**  
David O. Taylor, MD

On behalf of the Board of Directors and the Administrative Staff of the ISHLT, I would like to welcome you to Montréal and the 33<sup>rd</sup> Annual Scientific Meeting. The Program Chair, Allan Glanville MD, and his Program Committee have put together what promises to be an outstanding four days of educational opportunities designed to meet the needs of the varied specialties and interests of our diverse Society. Amanda Rowe and the outstanding administrative staff (Lisa Edwards, Susie Newton, Phyllis Glenn, and Lee Ann Mills) have taken the program committee's plans from concept to reality, creating the wonderful smorgasbord you see in front of you. This year marks the 25<sup>th</sup> anniversary of MY first ISHLT meeting in Los Angeles in 1988. As exciting as that first meeting was for me, comparisons of the scientific content of these two meetings is not even possible as they don't even appear to be from the same universe! It's amazing how the Society has grown in countless ways. Come to my President's report at the opening Plenary session (Thursday April 25 from 8:00-10:00 AM in Room 517CD) to hear more about this.

This year's meeting has a few unique features worth highlighting. Please note that all of the over 900 abstracts will be moderated, including the posters. This is only possible due to the vast number of members who have volunteered to participate in this ambitious endeavor. In addition, we have moved deeper into the 'electronic' world, utilizing a nimble meeting application for your smartphones and tablets as well as the eBook meeting program and electronic abstract viewer/organizer. This year we are attempting to capture a large part of the sessions electronically for future re-presentation via a variety of internet-based platforms. Last, but certainly not least, please take the opportunity to experience this wonderful city—a blend of the Old World and the New, multicultural and multidimensional like no other.



### It's Not Just Child's Play

At Tuesday's ISHLT Academy, Core Competencies in Pediatric Heart and Lung Transplantation, international experts provided a comprehensive and valuable review of important topics in the management of the pediatric patient with end stage heart and lung disease. Topics discussed included management of patients with congenital heart disease, ABO incompatible heart transplantation, and antibody-mediated rejection, with plenty of practical, case-based discussions. Like previous ISHLT Academy sessions, it was well worth the time, and if you missed it, stay tuned for next year's topics!



### Dealing with Rejection

Antibody mediated rejection (AMR) in lung transplantation (LT), that is. What did you think we were talking about? During Wednesday's Symposium 21, "Lung AMR: How I Do It – A Multidisciplinary Case Based Discussion," discussants will review the difficult problem of antibody mediated rejection after LT from both an immunological and clinical perspective. While the presence of donor specific antibodies (DSA) are associated with the development of AMR, certain patients develop signs of AMR even without DSA, and novel immunological assays will be reviewed. The experts will also discuss management of patients with DSA including possible preventive therapy. After attending this session, and learning how the "experts do it," LT physicians will be more comfortable in managing this increasingly recognized complication, otherwise deal with it!

(513ABC)

**SYMPOSIUM 6:**  
Pediatric Heart  
Transplan-  
tation: 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

### From the Program Chair

Those of you who have read the preliminary program will know that we have a delight in store for the Opening Plenary session. In addition to the Chair's brief report and the Presidential Welcome the Opening Plenary session focuses on cutting edge science of the **Human Microbiome** presented by **Ronald G Collman, MD**. The Universe expands within and without. 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. All immune suppressed patients have had their native flora disturbed, which may determine long term outcomes. When we no longer look through a glass darkly we may begin to understand the reasons why some grafts fail in the absence of demonstrable rejection and learn how best to monitor changes in the microbiome which are the harbinger of graft dysfunction. These comments are particularly relevant to lung transplant recipients whose respiratory tracts interface with the hostile external world with every breath but also increasingly to cardiac recipients and those with advanced heart and lung diseases where ill health per se determines susceptibility to adverse changes in a microbiome to which our species has developed tolerance over millennia.

The **Pioneer in Transplantation** award is bestowed every other year to an ISHLT member who is recognized for their landmark contributions as a pioneer in the field of heart and/or lung transplantation. This year's recipient, **Jack G Copeland, MD**, will take us through the journey of cardiac replacement, looking at risk taking in medicine and defining a pioneer by the past selections ISHLT has made. Dr. Copeland will discuss the many individuals who were influential in his professional career, and give us insight into the Total Artificial Heart, past and present.

So it is with rising excitement that I look forward to welcoming you all in conjunction with President Taylor to this charming multicultural city of Montreal for the 33<sup>rd</sup> ISHLT Annual Meeting and Scientific Sessions at the Opening Plenary!

Best regards.

*Allan R Glanville*

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



### Île de Transplantation Pulmonaire

Did you know that Montreal is located on an island surrounded by three rivers and the only way to get through it by land is to go over a bridge? For physicians treating patients with advanced lung disease, navigation to lung transplantation (LT) often involves the need to cross rough rivers. Patients, especially those with idiopathic pulmonary fibrosis and cystic fibrosis, often develop exacerbations requiring invasive respiratory support, such as mechanical ventilation. During Wednesday's Symposium 9, "Bridging to Lung Transplantation," international experts will discuss how in carefully selected patients, use of extracorporeal support (ECS) can be used as a bridge to cross the rough waters with acceptable outcomes. ECS can liberate the pre-transplant patient from the ventilator, allowing for preservation of diaphragmatic function and improved mobilization. This may help the patient better tolerate and recover after LT. However, ECS has risks, and in some patients, the use of invasive respiratory support may be futile if LT no longer is an option. Practical issues, including different ECS systems, how to choose among them, how to establish a protocol, managing ICU complications, withdrawing support, and survival data will be discussed. This is a must-attend session for all lung transplant physicians who might need to cross a bridge over troubled waters.

### Czech out our New Look!

We've added a new graphic dimension to this year's newsletter. Most of the articles will fall into several categories and you can quickly and easily scan what you need, just by looking for the new icon.



PREVIEWS of upcoming sessions



REVIEWS of previous sessions



AWARDS recipients for 2012



UPDATES about everything

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

## The Masters, The Links, Taxes and Montreal

It was just merely a day before one of the two certainties in life comes due in the United States. Late that evening Adam Scott received the warm, long and longed for embrace from his father, who was his golf coach for 19 years. The much eluded hug and victory so longed for by the Aussies including Greg Norman (The Shark) until finally happened on April 14, 2013. Many tears fell and it was a rainy night in Georgia. The land down under is now on top of the golf world. An Australian has won the Masters, thanks to the adroitness of Adam with his controversial long-putter, which might be banned. So what, he sank a 25-foot birdie putt on the 72<sup>nd</sup> hole then a 15-footer on the second playoff hole to seal the deal for him, for his father, for The Great White Shark and for his sports-obsessed nation longing for one of its' own to wear the coveted green jacket.

For me, it was another break in the action and pure enjoyment for Adam's achievement and for me; the only green I had to deal with was to dole it out. I did file my taxes the week before, had to pay more taxes. Perhaps I made too much money – yet thanks to computers and the electronic age – my payment did not transact until the last possible moment. Why let the Fed's profit on my account. Moreover, I'd much rather pay a little extra than let them profit on my greenbacks until the refund comes through. I do my own taxes. I don't want any one else to get in trouble on my account, and I certainly don't want to get in trouble from someone else's mistakes.

For this year's Master's, the Aussie, Adam Scott made the fewest mistakes. For this year's ISHLT in Montreal, we gather here to learn from our mistakes, minimize our mistakes, and hopefully make no mistakes. Lastly, I hear there is a great beer and great steaks at The Keg in Old Port. To cleanse you from other mistakes be sure to visit the Notre Dame Basilica. And for the fashion minded, St. Laurent is the place for you.

**Bonjour Montreal!**  
*Vincent Valentine*  
*Links editor*



### The Moderated poster sessions: from gallery silence to Socratic

There are many fine art galleries in Montreal. If you are strolling through downtown you will likely see the ornate façade of the Musée de Beaux Arts de Montréal (Montreal Museum of Fine Arts) or the slightly or esoteric facade Musée d'Art Contemporain de Montréal (Montreal Museum of Contemporary Arts). Whatever your artistic predilections, the one place where you won't have to engage in the universally accepted requirement for hushed reverential silence is at this year's moderated poster sessions.

This year, the standard poster session format has been changed. Rather than simply having authors stand by their posters as people amble through the labyrinthine rows of tack boards, experienced members of the ISHLT will be designated as Poster Mentors. These new mentors will be reviewing the poster abstracts in advance and having face-to-face discussion with the authors during the scheduled poster viewing times. Also senior members will be paired with junior members to aid in the development of experience with the interpretation and analysis of the presented work.

The result will be a more interactive poster session with a lively back and forth where work will be examined, analyzed, critiqued, dissected, and (because we only accept the best here at ISHLT) thoroughly praised. Gone is the museum-like-follow-the-person-in-front-of-view-in-a-clockwise-manner-so-you-can-see-everything-on-the-walls. This year will be less museum and more Paris art house of the 1920's (this is Montreal after all). Although, unlike gay Paris smoking will not be permitted.

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



**I Heart You**

Back again for the second year, the ISHLT Academy is presenting the Core Competencies in Mechanical Circulator Support. Due to great positive feedback in Prague, the Academy is coming to Montreal. Although unlike Plato’s Academy which sought to define the mysteries of the universe, the ISHLT Academy is trying to define the no less mysterious domain of mechanical hearts.

Anyone attending the session will be struck by how far the field has come. Indeed the current state is far from static. We’ve come a long way since the first generation LVADs gave new hope for the treatment of heart failure. The new devices, with longer battery life, greater durability, and their single moving parts are giving new hope that mechanical hearts may gain prominence as destination therapy and long term use. Will we one day have a mechanical hearts unplugged? The many jazz legends of Montreal would heartily and whole-heartedly approve. Charlie Biddle, founder of Biddles (now renamed House of Jazz at the corner of Aylmer and Sherbrooke and a must see for any visitor), would have been pleased to have his acoustic jazz making beautiful music with the hum of a well functioning LVAD.

Dr. Leprince discussed the role of biventricular support, finally giving the underappreciated right ventricle its due. Since a house divided against itself cannot stand, a dyssynchronous heart cannot pump. Not to be outdone, the role ECMO was also discussed. A proud moment for every native Montrealer, since the first use of ECMO in Canada occurred here at the Montreal Children’s hospital.

Dr. Moazami, Dr. Schueler, Dr. Slaughter discussed the considerations, the indications, the complications, the consternations, and the frustrations with surgical implantations. After lunch, Dr. Feldman returned to the issue of managing the RV post-op, followed by talks on anti-coagulation and imaging. The sessions wrapped up with some long-term management case studies on infections, bleedings, thrombosis, and aortic insufficiency. Indeed many fascinating aspects were discussed at the Academy today. What more could you expect from Montreal, home to “McGill University, the Harvard of Canada.” Of course, if you were to go to the campus bookstore you can buy a sweatshirt that states as much. If you have a sense of humour you can also buy the more popular alternative which states, “Harvard, The McGill University of the US.”

***French Phrases***

Bonjour (Boh(n)-zhur)	Good morning and hello
Bonsoir (bohn SWAHR)	Good evening
Je ne comprends pas (ZHUHnuh kohm-PRAHN pah)	I don’t understand.
Oui (wee)	Yes
Non (non)	No
Parlez-vous anglais? (par-layVOO Ong-LAY?)	Do you speak English?
Comment ça va? (koh-mahn sah vah)	How are you?
Bien, merci (bee-uhn, MEHR-see)	Fine, thank you.
Je suis Désolé (Zhuhswee DEH-soh-LAY)	I am sorry
Excusez-moi (ehk-SKEW-zayMWAH)	Excuse me
Je voudrais... (zhuh voo-DREH...)	I would like...
S’il vous plait	Please
Merci!	Thank you!
Au revoir (oh rer-vwahr)	Goodbye
Bonne nuit (bohn NWEH)	Good night
Bonne journee (BOHN-zhuh-nay)	Have a nice day
Ou est le....	Where is....
Une verre de vin rouge/blanc	A glass of red/white wine
Go Habs Go!!!!	I hope Toronto Maple Leafs Lose!