



April 5, 2017

DAILY *Links*

37th Annual Meeting & Scientific Sessions Manchester Grand Hyatt, San Diego, CA

Welcome to San Diego from 2017 Program Chair Jeffrey Teuteberg

Welcome to this year's Annual Meeting and welcome to San Diego! It has been a busy year for the Program Committee and staff, finalizing and scheduling the abstracts into sessions and preparing for this meeting. We hope you are ready to be educated and inspired with some of the best work from around the world.

We are pleased to see that the number of abstracts submitted this year have increased by 8% over last year, 1633 versus 1516, despite the new submission fee. The percentage of accepted abstracts was 85%, nearly identical to 2016. Abstracts were submitted from 38 countries: the US had 1025 submissions, followed by Germany with 106, Canada 82, Japan 58, UK 58, Italy 48 and Australia 40. The number of submitted abstracts from Asia and South America were also higher than in 2016. Even the Junior Faculty case reports increased from 126 in 2016 to 188 in 2017.

During this year's Meeting, we will continue to enhance your digital experience. The mobile meeting app is again upgraded with new capabilities and a better way to build your itinerary and view presentation slides. You can also keep up with Meeting activities through our Twitter feed on the app homepage (#ISHLT2017) and the Daily Links newsletter.

The Annual Meeting only comes together because of the huge number of volunteer and Staff hours dedicated during the past year. I would like to thank all the program committee members for their generous support and staff for their expertise and dedication to the success of the Annual Meeting.

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Deny access to a life-saving transplant procedure for someone who's using marijuana?

Check out Tuesday's BuzzFeed article "DENIED" by reporter Alyson Martin investigating policies for listing patients who have used marijuana. ISHLT's Michael Shullo, Pharm D, is quoted in the article representing the Program Committee responsible for organizing Thursday's Symposium 18: Weeding Out Fact from Fiction - the Highs and Lows of Marijuana Use in Transplant, which should prove to be one of this meeting's hot topics.

[Read article here at BuzzFeed](#)

"There are no federal guidelines or laws dictating how hospitals handle cannabis users who need organ transplants. The private nonprofit organization that manages the country's organ supply, the United Network for Organ Sharing, doesn't have a policy regarding use of drugs or alcohol for organ recipients. So it's left to individual hospitals to set their own rules, and if a patient is unlucky enough to end up in a facility with strict anti-cannabis policies, they're either out of luck or forced to find an alternative medical facility and get themselves there. Now that more than half of the states in the country have legalized medical marijuana, and eight states and Washington, DC, permit recreational marijuana, hospitals that offer transplants are being forced to look at whether their rules need updating."



Preview of Today's Opening Plenary

During this year's Opening Plenary, our esteemed Program Chair Jeffrey J. Teuteberg, MD, will report about the preparation and the program of the annual meeting. Josef Stehlik, MD, MPH, will give an overview about the current status of the ISHLT transplant registry followed by James K. Kirklin, MD, who will give an update about the MCS registries, INTERMACS and IMACS, which will grow fast in parallel to the increasing usage of VADs. Our president Maryl R. Johnson, MD will have the president's report. Don't miss the opportunity to follow this talk after an exciting last year.

After this presentation two featured abstracts will be presented and discussed. The first talk will be given by Dr. Milano for the ENDURANCE trial investigators. Two years ago the results of the original ENDURANCE destination therapy trial were presented at the ISHLT annual meeting in Nice showing non-inferiority of the HVAD device for primary endpoint in destination therapy patients compared to the HeartMate II device. However, a higher rate of hemorrhagic strokes were seen, especially for patients with high blood pressure.

Today, the results of the ENDURANCE Supplement Trial will be presented, a trial that used the same protocol as for the previous trial but enrolled additional patients to give a more detailed analysis on the performance of the HVAD device. The second featured

abstract, presented by Dr. Goldstein for the study investigators, will give a detailed view on the results from the MOMENTUM 3 pivotal trial. This study is a prospective, multi-center, unblinded randomized study comparing the HeartMate 3 device to the HeartMate II device.

The Pioneer Award Recipient Lecture: Standing on the Shoulders of Giants will be given by Stuart W. Jamieson, MB, FRCS, past-president of the ISHLT and a true pioneer in the field of combined heart-lung transplantation and pulmonary thrombendarterectomy.

Preview of Symposium 2: When Should We Call it Quits? The Efficacy of Interventions to Ameliorate Psychosocial Risk Factors

[It Takes a Village: Social Support and Social Determinants of Health in MCS and Cardiothoracic Transplantation as Potential Targets for Intervention](#)

The success of our patients would not be possible without a full village to execute all resources and the expertise to help in the recovery of MCS and transplantation. This ongoing journey is often times lifelong adding extenuating stress to the patient and caregivers. Don't miss the invaluable presentation by Michael Petty, PhD, RN, CNS, who is a world MCS expert from University of Minnesota Medical Center. This feature will take place at 8:30 am today.

Ponder this...



How can a society be great with walls?

Here at the ISHLT, we are brought together from all over the world with expertise and diversity to collaborate for the greater good.

Let's give an ISHLT warm welcome to those whose travel plans have been trumped.

Preview of Oral Session 4: Donor Lung Allocation Strategies

[Are Donors with Pulmonary Arterial Embolism the Better Donors for Lung Transplantation?](#)

The unfortunate truth about transplantation is there are more recipients waiting for organs than there are donors available. Don't miss the excellent study on optimizing the use of lung donors with pulmonary arterial embolism presented by Wiebke Sommer, MD, and colleagues from Germany. This session will be in Grand Hall C at 3:30 pm today.

Don't Miss Today

Nursing/Health Science/Allied Health Scientific Council Meeting
Grand Hall A @ 12:20 pm-2:30 pm

Preview of Symposium 4: Thinking Outside the box: Extra pulmonary management in lung transplantation

'It isn't all about the lungs'. For early risers, there is an interesting symposium on extra-pulmonary factors affecting patients post-lung transplantation. As you might recognize that long-term outcome following lung transplantation is not only determined by transplant dysfunction but also by extra-pulmonary complications.

This symposium the importance of gastro-intestinal dysmotility will be viewed. A case based approach of the evaluation and treatment of gastro-intestinal dysmotility will kick off this symposium. The symposium will continue to stay focused on the gastro-intestinal with malignancies in thoracic organ transplantation.

What's the evidence behind the different treatment strategies? Medical and/or surgical options in gastro-intestinal malignancies in thoracic organ transplantation will be viewed.

From the gastro-intestinal the focus will shift to the sinuses. Pre-transplantation a significant percentage of patients have sinus difficulties. Post-transplantation these 'old' problems may lead to infections affecting the lungs. Furthermore, lung transplantation in patients with systemic disorders is an interesting category of patients, since a transplant doesn't 'cure' the systemic disease. A more holistic approach is proposed. Although in many ways not regarded as a 'disease', with increasing life expectancy post lung transplantation pregnancy after transplantation seems unavoidable. The best approach, management, consequences, ethics, and outcome will be viewed and discussed.

This symposium mirrors a daily clinical practice of a transplant physician and highlights understanding of new and old diseases, diagnostic strategies and treatments.

Preview of Symposium 7: JOINT ISHLT/ESCMID Symposium: Ongoing Challenges in Transplant ID

Hepatitis C. HIV. Antimicrobial Resistance. ECMO. Thoracic organ transplantation. Any combination of the two is sure to make for a complex but interesting discussion for the future of thoracic organ transplantation. This symposium chaired by Lara Danziger-Isakov, MD, MPH and Oriol Manuel, MD is a collaborative effort with the European Society of Clinical Microbiology and Infectious Diseases (ESCMID) and is intended for the attendee to become familiar with relevant infectious disease issues surrounding thoracic organ transplantation.

The symposium begins with Barbara Alexander, MD discussing non-cultural methods for diagnosis and prevention of invasive fungal infections. Next Benoit Guery, MD will discuss current challenges of multidrug resistance and the potential role of inhaled antimicrobials. Nicolas Mueller, MD will discuss outcomes associated with ECMO at the time of thoracic organ transplantation including the most common infections to anticipate, potential precautions to consider and the importance of an interdisciplinary approach in these complex patients.

Next Paolo Gossi, MD, PhD will then discuss Hepatitis C both in thoracic organ donors and potential recipients. Another interesting presentation comes from Shirish Huprikar, MD who will discuss the controversial topic of MCS and thoracic organ transplantation in HIV patients and why HIV should not be considering an absolute contraindication to these therapies.

Finally, Jose Aguado, MD, PhD will discuss the need the new biomarkers to better evaluate the grade of immunosuppression in lung transplantation and potential new biomarkers that may be useful to predict the development of opportunistic infections, rejection, and malignancy. This symposium promises to be controversial and thought provoking for all practitioners interested in infectious disease and thoracic organ transplantation.



Preview Symposium 5: Joint ISHLT/PHA Symposium: PH and Transplant: Where do we go from here?

Despite advances in medical therapies, lung transplantation remains an important option for patients with primary pulmonary arterial hypertension (PAH), however patients with secondary causes of pulmonary hypertension (PH) are at a much higher risk for transplant related complications. This symposium chaired by Oksana Shlobin, MD and Karen Fagen, MD is a collaborative effort with the Pulmonary Hypertension Association (PHA) and will focus of various aspects of lung transplantation in adult and pediatric patients with PH. Roham Zamanian, MD will start the session with a discussion of the role of lung allocation scores in the setting of lung transplantation in patients with PH. Next, Jorn Carlsen, MD, DMSc will discuss outcomes of patients with non-group I PH when associated with underlying lung disease(s) in the pre-transplant, perioperative, and post-transplant periods. Sonja Bartolome, MD will discuss liver transplantation in

patients with portopulmonary hypertension and Valerie McLaughlin will discuss the management of PH during pregnancy. Next Joel Wirth, MD will present the dreaded challenges of switching between IV and oral prostanoid therapies. Finally, Mardi Gomberg-Maitland, MD will discuss how patients with PH are unique compared to other patients when assessing health related quality of life and will review implications in designing questionnaires and current assessment techniques for both clinical practice and clinical trials. You won't want to miss this informative session!

Plenary Session Live Stream Event

Join us live for our 3 plenary sessions this week for stimulating conversations and lively debate.

For free registration [click here](#).

Did you know...



Bob Dylan accepted the Nobel Prize for Literature wearing his signature black hoodie. His lyrics say it all. Listen to Rainy Day Women, when you have time.

Check out: [The Day Bob Dylan Introduced The Beatles to Marijuana](#)

Coming up on Thursday

Preview Symposium 13: Making The Complex Simple, or Just the Simple Complex?

Since the start of lung transplant programs around the world, the procedure of the allocation of lungs has been of interest to those in the field. The various allocation systems around the world will be reviewed and may emphasize that equity in organ allocation is needed and therefore a lung allocation score (LAS) might seem a logical consequence. The introduction of LAS in Spring 2005 in the U.S. led to allocating lungs for transplant based on urgency and benefit instead of waiting time. During this symposium, major changes in lung allocation in the US, and its effects on wait-list mortality, post-transplant survival, survival by diagnostic group, and a change in distribution of recipient diagnoses to patients more likely to die on the waiting list, will be presented.

Although LAS implementation changed the allocation systems significantly, modifications to the LAS system were implemented in 2015. Among these modifications are for example introduction of new data variables, and the lung diagnosis are divided in four diagnostic categories: largely the same as the previous LAS system, but more diagnoses

have been added. Early results after the introduction of LAS modification in 2015 will be presented. Following the U.S the LAS system was introduced in Europe. The early European experience following LAS implementation will be shared. The effect of LAS on the size of the waiting list, wait list mortality, change in distribution of recipient diagnoses will be presented.

This symposium will guide the attendant from the pre-LAS era, the introduction and effects in the US and Europe and might speculate on future modification.

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