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IN THIS ISSUE

CLICK ON THE SECTION
YOU WOULD LIKE TO VIEW

Letter from the Editor <i>David Feldman, MD</i>	1
Enjoy Chicago like a Local <i>Dan Dilling, MD</i>	2
Top 12 Reasons to Attend the 30th Anniversary Meeting in Chicago in April	4
Join ISHLT in Chicago <i>Hermann Reichenspurner, MD, PhD</i>	5
Heart Failure and Transplant Medicine Council <i>Allen S. Anderson, MD, FACC</i>	6
Pulmonary Hypertension Council <i>Dan Dilling, MD and Omar Minai, MD</i>	6
Infectious Disease Council <i>Margaret Hannan, MD and Martha Mooney, MD, FACP</i>	7
Pediatric Transplant Council <i>Daphne T. Hsu, MD</i>	7
Basic Science Council <i>Prof. Dr. med. Sonja Schrepfer</i>	7
Mechanical Circulatory Support <i>Roberta C. Bogaev, MD, FACC, FACP</i>	8
Pulmonary Transplantation Council <i>Geert M. Verleden, MD, PhD</i>	8
Nursing, Health Science, and Allied Health Council <i>Michael Petty, PhD (c), RN, CCN, CNS and Sharon Beer, RN, MSC</i>	9
Pathology Council <i>Patricia Revelo, MD, Dylan Miller, MD and Elizabeth Hammond, MD</i>	10
Junior Faculty & Trainee Council <i>Daniel F. Dilling, MD</i>	10

LETTER FROM THE *Links* EDITOR

David Feldman, MD



There are so many demands on our time. The number of patients, emails, administrative demands, family demands and things to de-rail you in any given

day can be endless. When you have made it through your day and have met everyone else's needs, how do you incorporate new information into your brain?

We all have an implicit responsibility to stay current and know the latest medicine, newest science and world events so that we don't appear to be buffoons when we leave our hospitals and labs. Multitasking has become so ubiquitous with our busy lives that frequently the most uncomfortable part of the day is the 5 minutes of quiet that we awkwardly encounter when we have forgotten to turn on the radio in our cars or an elevator that is less than accommodating. Clearly, it would be hard for us to conduct our lives without cell phones, email, texting and the instantaneous contact of your choice, but is this the best way for us to learn and manage our lives?

As we all meet in Chicago, we assemble as a group to learn in both organized sessions and to learn even more from each other in the hallways between the sessions. We have to find a way to incorporate more information at a faster rate, all while we are getting older and

perhaps more forgetful. Neuroscientists have determined most of us have a decrement in our ability to learn after the age of 30, and maybe earlier for those of us who drank too much while in college. So after leaving Chicago, how much should you learn and how are you going to go about it? Should ISHLT instant message you with the clinical trial results, text you on your phone or send an email with a PowerPoint slide so you can easily incorporate it into your next talk?

Even ISHLT Links is competing for your time hoping to relay all the essentials you need to guide you through the meeting in a condensed and consumable fashion. We have tried to convey this information in a quick and digestible way that is easy to get through while you are sitting in the airport or between meetings. Of course, we are all praying that you have not hit the delete button before you have read this sentence.

We know from sports and other disciplines that visualizing the outcome of an event and setting a realistic goal before the start of the game makes things happen. Decide that while in Chicago you are going to procure five facts that will change your practice or science...hunt for it if you have to. Then, find a time to turn off your phone and concentrate on three conversations during the meeting. No email, no phone...just you and one other person. When you get home, the rest will be waiting for you, so try staying in the moment. What have you got to lose except for a missed call?



ENJOY CHICAGO LIKE A LOCAL

Contributed by Dan Dilling, MD

As Chicago opens its doors to the ISHLT 30th Anniversary Meeting and Scientific Sessions set for the Hilton Chicago on beautiful Michigan Avenue, there will be plenty to marvel at while visiting this windy city. As a travel source for the city's culture, best-featured restaurants and nightlife opportunities, below is a list of suggestions to help plan your adventure. We hope you enjoy this year's ISHLT Anniversary Meeting in one of the most unique and attractive cities in the world: Chicago, Illinois.

SIGHTS:

Take in the new "modern wing" at the Art Institute just a short walk from the hotel through Grant Park. The building was designed by architect Renzo Piano. There is a nice restaurant for lunch there called **Terzo Piano**.

A walk through **Millennium Park** is a must. If the day is nice, one can sit for a drink or a sandwich at the outdoor cafe there.

The **Chicago Architecture Foundation** has wonderful tours to discuss the historical significance of downtown buildings, with an emphasis on the skyscraper and its origins in Chicago. The walking tours are great and reasonably priced. "**Modern Skyscrapers**" is maybe the best.

It is a bit of a trip to a near-west suburb of Oak Park, but an integral part of the architectural history of Chicago is **Frank Lloyd Wright**, and a visit/tour of his home and studio is a great outing.

One more architectural note... check out the historic downtown **Auditorium Theatre** designed by Dankmar Adler and Louis Sullivan.



RESTAURANTS:

First of all... I often use **Metromix** for finding stuff to do and places to eat.

A few gems:

Celebrity chef Rick Bayliss's restaurant **Frontera Grill** is my favorite. It is also President Obama's favorite.



ISHLT *Links*

Try a **Chicago Hot Dog**. Get everything on it! One good place close to the Meeting:
26 E. Randolph St.
Chicago, IL 60601
312-345-0100

Chicago-Style Stuffed Pizza: Giordano's is my favorite - the closest one to us is:
223 W. Jackson Blvd.
Chicago, IL 60606
312-583-9400

NIGHTLIFE

Chicago is famous for the Blues, and famed artist Buddy Guy has his club just a block from the conference - **Buddy Guy's Legends**.

Chicago is also steeped in Jazz history. Two clubs nearby are **Jazz Showcase** (more serious) and **Andy's Jazz Club** (more casual). Both would offer a great evening's entertainment. Also notable but several miles away is **The Green Mill**, a club that was a favorite of the infamous Chicago gangster Al Capone.

If you want to see the city from above and also enjoy a good dinner or just a few drinks with amazing views, make your way to the John Hancock Building and go up to **95th floor's "Signature Room"**. This is free as compared to paying the cost of admission to the observation deck one floor away...



Have fun!



TOP 12 (we had to stop somewhere) REASONS TO ATTEND THE ISHLT 30TH ANNIVERSARY MEETING IN CHICAGO IN APRIL

12. To eat some fabulous **deep dish Chicago style pizza**

11. To shop along **Michigan Avenue's Magnificent Mile**

10. To spend a day wandering through the **Art Institute of Chicago**

9. To take a cruise along the river for some up close views of Chicago's amazing and **inspiring architecture**

8. To visit the ever-popular and mesmerizing **Shedd Aquarium**

7. To spend an evening immersed in the sound of Chicago's blues at some of the **best blues clubs** in the world

6. To see the lights of Chicago at night, from above, looking out of the Signature Room on the 95th floor of the **John Hancock Building**



5. To soak up the sun (fingers crossed) and enjoy the fresh air and beauty of **Millennium Park**

4. To pick up your copy of the 300+ page **30 Year History of the ISHLT**. A not to be missed compilation of stories and reminiscences from past leaders and luminaries of the Society

3. To hear **Heather Ross and the Marginal Donors** play and sing their hearts out at the Society's 30th Anniversary Gala on Friday night.

2. To meet up with those friends and colleagues you haven't seen in a while and hear about how wonderful the 2009 Paris meeting was, if you missed it

1. Oh, yeah, right, most important of all, to listen to some of the profession's best experts address the **latest scientific and medical developments** related to heart and lung transplantation and the treatment of end stage heart and lung disease



ISHLT *Links*

JOIN ISHLT IN *Chicago* AS WE CELEBRATE THE 30TH ANNIVERSARY MEETING!

This special annual conference for the **30th Anniversary of the ISHLT will be held from April 21-24, 2010 in the beautiful city of Chicago, Illinois.** To accommodate the 817 excellent scientific abstracts that were submitted this year, we have organized



46 concurrent sessions, 9 mini-oral sessions and more than 200 general posters. In addition, 12 satellite sessions and 9 sunrise sessions were planned together with the various scientific councils focusing on research and clinical science in heart and lung failure, mechanical support, heart and lung transplantation in adults and children and post-transplant care. As scientific highlights, 3 plenary sessions were planned with outstanding invited speakers and highly selected plenary abstract presenters. This covers very hot topics such as engineered heart tissue and intracardiac stem cell transplantation.

The president of the Society, James Kirklin, M.D., will focus on the exciting history of ISHLT over the last 30 years. The ISHLT Lifetime Achievement Award will be given posthumously to Margaret E. Billingham, M.D., a true pioneer in cardiac transplant pathology and will be handed over to her husband, Dr. John Billingham, by Bruce E. Reitz, M.D., the Norman E. Shumway Professor of cardiothoracic surgery at Stanford University. For the first time the "ISHLT Academy" will follow the scientific meeting for interested young trainees and fellows. Since all the described plenary, scientific and satellite sessions are extremely interesting, I, as the Program Chair, cannot

recommend any of these be missed and I am convinced that every attendee will enjoy all the sessions.

I am looking forward to seeing many of you in Chicago in April.

Hermann Reichenspurner, MD, PhD
2010 Scientific Program Chair

We are most grateful for the support of our partners toward the ISHLT 30th Anniversary Meeting, April 21-24, 2010, Chicago, IL, USA

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HEART FAILURE AND TRANSPLANT MEDICINE COUNCIL

Allen S. Anderson, MD, FACC

Highlights of the 2010 Scientific Program related to Heart Failure and Transplant Medicine include:

- Satellite Symposium 7 (Wednesday, April 21, 10:30-12:30) will be devoted to the ethics of thoracic transplantation.
- Results of several potentially significant clinical trials will be reported at this year's ISHLT Annual Scientific Session. In the Plenary Session (Thursday, April 22, 8:30-10:15 AM): the IMAGE trial compares the standard biopsy guided surveillance strategy with a noninvasive approach using gene expression profiling in cardiac transplantation. In Concurrent Session 12 (Thursday, April 22, 10:45–12:15): the TICTAC trial, which compared a tacrolimus alone vs a tacrolimus and MMF regimen for routine immunosuppression in cardiac transplantation, will be presented.
- Also during the Thursday Plenary Session, the summary of the first ISHLT guidelines for the management of the post transplant patient will be presented.
- There will be a series of sessions on mechanical circulatory support which will provide a comprehensive overview of this rapidly evolving field.
- The first ever ISHLT Academy course (Saturday, April 24 – Sunday, April 25) will follow the conclusion of the Scientific Sessions. This separate registration program is designed to be a comprehensive overview of advanced heart failure and cardiac transplantation for practitioners and trainees alike.

PULMONARY HYPERTENSION COUNCIL

Dan Dilling, MD and Omar Minai, MD

"Dear Attendees of the ISHLT meeting 2010, it is our great pleasure to welcome you to this year's international conference in Chicago. This year we have put together what we think is a stellar series of seminars that highlight management of advanced PH.

On Wednesday April 21 the 7:00 AM Sunrise Symposium, "Clinical Challenges in the Management of Right Ventricular Failure," will focus on RV failure management, especially in patients waiting for thoracic transplants. Follow that up with an 8:15 Wednesday satellite symposium called "Innovations in Pulmonary Hypertension: Advances in Medical and Surgical Therapies" where the new guidelines including use of combination therapies will be presented.

On Thursday April 22 at 10:45 a concurrent session entitled, "Novel Genomic, Proteomic, and Clinical Risk

Markers in Pulmonary Arterial Hypertension" should pique your interest.

One of the main themes throughout these sessions will be a focus on right ventricular (dys)function, its imaging, its assessment, and its management. These seminars will include lectures from some of the leading authorities in the world. In addition to these seminars, the conference also provides the opportunity to researchers to present their recent work as oral as well as poster presentations.

The PH Council has taken on an increasingly prominent role at the ISHLT over the last 2 years under the leadership of Raymond Benza as the current Chair of the PH Council. On the whole, this year's meeting offers a great opportunity to learn more about PH and its management."



INFECTIOUS DISEASE COUNCIL

Margaret Hannan, MD and Martha Mooney, MD, FACP

This year's annual International Society of Heart Lung Transplantation meeting is laced with venues presenting cutting edge developments in transplant and mechanical circulatory system (MCS) related infectious diseases. On Wednesday satellite symposium 6 unfolds the impact of emerging pathogens on the cardiothoracic transplantation center's every day business by the experts in the field. The Australian experience of the novel 2009 influenza H1 N1 pandemic is described- with a six month head start before the Northern Hemisphere's tangle with the pandemic influenza virus, they have a lot to tell that we can all learn from.

Management of this and other donor derived infections will be investigated from donor evaluation at the time of transplantation through inadvertent donor transmitted infections in the cardiothoracic transplant recipient. Timely laboratory diagnostics will be examined for donor selection and resources explored that are available to assist in post transplant evaluation of a donor- derived infection. The post transplant presentation, diagnosis and management of geographically restricted infectious diseases will also be explored. On Thursday, concurrent session 21 contains molecular and clinical studies

furthering our understanding of the interrelationship between transplant immunology and pathogen and several relevant talks concerning clinical management of transplant and MCS related infections. Friday's concurrent session number 40 should not be missed by anyone involved in clinical research. This session will premier the summary of the "ISHLT Expert Consensus Definitions of Infections in Cardiothoracic Transplantation and Mechanical Circulatory Support Patients."

A panel of workforce members will lead the panel discussion at the end of the presentations for further clarification of these definitions. On Saturday morning, sunrise symposium 7, "Crossing the Lines," puts the definitions of mechanical circulatory support related infectious diseases into the clinical application - learning from the past and going into the future with a unified set of definitions for these infections. "The Expert Consensus Definitions of Infections In Cardiothoracic Transplantation and Mechanical Circulatory Support Patients," will be available for use in future studies to accurately capture the true incidence of infectious diseases in these patients.

PEDIATRIC TRANSPLANT COUNCIL

Daphne T. Hsu, MD

There are several programs of particular interest to the pediatric transplant community. At 7:00 a.m. on Wednesday, April 21, there will be a Sunrise Symposium on, "Technical Issues in Mechanical Support in the Pediatric Patient," followed by two Satellite Symposiums with a pediatric focus: "Coronary Vasculopathy from Bench to Bedside" and "Management of the Sensitized Patient." On Saturday, April 24, there will be a Sunrise Symposium with case presentations on "Tough Cases in the Management of the Sensitized Patient," and a symposium on "Transplantation in the Pediatric Patient with Cardiomyopathy." There will be three outstanding oral presentation sessions, a moderated poster session and a general poster session dedicated to pediatric transplantation.

BASIC SCIENCE COUNCIL

Prof. Dr. med. Sonja Schrepfer

One of the most important events of the meeting is the "Caves Award" session, during which young academic scientists present their "hottest" experimental and clinical research. Another session not to be missed is, "Stem Cell Research and Tissue Engineering," especially the invited presentation by Prof. Eschenhagen.



MECHANICAL CIRCULATORY SUPPORT COUNCIL

Roberta C. Bogaev, MD, FACC, FACP

The 30th Anniversary Meeting and Scientific Sessions of ISHLT will have a record number of presentations addressing the challenges of patient selection for mechanical circulatory support (MCS), clinical management of the MCS patient, and recommendations to reduce adverse events associated with device support. Your colleagues share their experience with some of the most dreaded complications of MCS in a sunrise symposium, “VADs Gone Bad Case Presentations, on Wednesday morning.”

The first satellite session on Wednesday morning, “The Ultimate VAD Symposium,” will provide participants with a comprehensive overview of MCS—from patient and device selection to outpatient management. Immediately thereafter, a satellite symposium, “Who Plays God? Ethics in Transplantation and MCS Devices,” will address the ethical issues teams face when patients require transitioning to palliative care. During the Opening Plenary Session on Wednesday afternoon, Dr. James Kirklin will give attendees the most recent update from the INTERMACS registry.

Gender differences in device outcomes and adverse events will be discussed on Thursday morning in the

Battle of the Sexes. Thursday afternoon’s concurrent session, “Device Disasters: Can We Avoid Them?,” will review strategies to address adverse events in LVAD patients. In “Getting Back to the Basics: MCS Devices and the Myocyte,” which will be held on Thursday afternoon, insights can be gleaned regarding the molecular and cellular mechanisms behind patients’ clinical responses to MCS.

Friday morning, the concurrent session, “Cost Effectiveness and Long-Term Outcomes,” addresses the financial impact of advanced technology. Friday afternoon there will be two sentinel concurrent sessions: “The Menu: Which Device When?” and “Expert Consensus Definitions in Cardiothoracic Transplantation and MCS Infections.”

Saturday morning’s plenary session will conclude with an unprecedented debate by Dr. O.H. Frazier and Dr. Mandeep Mehra: MCS is IN, Heart Transplantation is OUT. Whether you are new to the field of MCS or a seasoned VAD clinician, at this year’s ISHLT meeting you will find stimulating and provocative presentations that will help you enhance the care of patients requiring MCS.

PULMONARY TRANSPLANTATION COUNCIL

Geert M. Verleden, MD, PhD

The following programs should be of interest related to pulmonary transplantation.

This symposium discusses the current understanding of airways inflammation and its potential role in the evolution of chronic rejection, but will also highlight new insights and different treatment modalities. Satellite Symposia 4 and 10, which deal with the diagnosis and the management of sensitized patients, will further give the recent evolution in the role of antibody-mediated rejection. This is only a very small part of the program, but cannot, in my opinion, be missed by the attendees who still have questions on these topics.



NURSING, HEALTH SCIENCE AND ALLIED HEALTH COUNCIL

Michael Petty, PhD (c), RN, CCN, CNS and Sharon Beer, RN, MSc

Our 2010 Chicago program has been constructed and designed based on feedback and evaluations from our council's educational survey. Presentations, posters and mini oral sessions will highlight the best of research and clinical practice from participants around the world in our area of expertise. Abstract submissions this year were up from previous years and of a distinctly international perspective. We are delighted to report that the nursing and social science content of this year's meeting is focused on presentations and discussions, balanced between clinical research, outcomes in practice and for the first time, participants will be afforded the opportunity to discuss in case study methodology format, specific care challenges in the heart and lung recipient population. Please put the following sessions on your calendars as "Not to be Missed!"

Wednesday, April 21st, 7:00-8:00 AM, Sunrise Symposium 5: Clinical Challenges for Nursing and Allied Health: What Would You Do? Case Presentations (Marquette)

This interactive session is designed to give you a valuable opportunity to interact with other nursing and allied health professionals as we discuss common clinical challenges. Bring your perspective and your questions to this interesting dialogue.

Wednesday, April 21st, 10:30 AM-12:30 PM, Satellite Symposium 12: Transforming Transplant Care Through Evidence Based Practice (Marquette)

In a series of invited presentations, experts in nursing and other allied health fields explore what we know

- and what we don't know - about evidence related to outcomes of our care delivery to transplant and mechanical circulatory support patients. Hear the latest in evidence and join others in considering future directions for research into the care of these unique populations.

Wednesday, April 21st, 5:15-6:45 PM, CONCURRENT SESSION 4: Nursing Science: And Then We Were Done: Patient Experience Following Surgical Interventions for Heart and Lung Failure (Continental C)

A series of outstanding abstract presenters work to fill in some of the gaps in knowledge we face in the post-operative management of thoracic transplant recipients. You won't want to miss these highly rated summaries of important current research.

Thursday, April 22nd, 2:30-4:30 PM, CONCURRENT SESSION 17: Quality of Life and Social Sciences: Have We Done the Right Thing?: Assessing Quality of Life Following Cardiothoracic Transplantation (Waldorf)

We often wonder if, in hindsight, we have done the right thing by our patients. Six researchers will shed light on that questions through a series of intriguing explorations of activities that are associated with improved quality of life. Come think with us.

Don't forget to "network" at our **Nursing, Health Science and Allied Health Council meeting on Friday, April 23rd from 7:00-8:00 AM in PDR-2**. Chicago is the perfect place to meet your council membership, consider joining committees and help our council plan for the future.



PATHOLOGY COUNCIL

Patricia Revelo, MD, Dylan Miller, MD, and Elizabeth Hammond, MD

This year's International Society of Heart Lung Transplantation meeting features several landmark and cutting edge developments in the field of pathology as it relates to heart and lung transplantation. Antibody-mediated rejection (AMR) (abstracts 92, 94, 95, 97, 111, 179, 220, 317, 319,) and the significance of donor specific antibody and B-cells (13, 39, 70, 100, 148, 152, 248, 251, 315, 320, 322, 342, 454, 458, 459, 464,) are a major focus this year. Significant advances are also presented in molecular assessments of rejection (32, 43, 98, 120, 174, 178, 245, 449, 452, 453, 481, 483), cellular mechanisms of "chronic" rejection and predictors of survival (21, 25, 37, 96, 339, 340, 451), allograft coronary vasculopathy (38, 51, 93, 149, 213, 247, 450, 488), and PTLD and other malignancies complicating transplantation (44, 199, 362, 363, 368, 400, 401, 523). Lung transplantation pathology is also highlighted (150, 151, 298, 299, 300, 301) with particular focus on bronchiolitis obliterative syndrome (99, 154, 302, 316, 324, 341, 342).

Satellite symposium #4 will focus on the relationship of rejection episodes to the development of heart allograft vasculopathy, BOS and graft survival. The pathobiology of AMR, pre and post transplant AMR surveillance, as well as monitoring and diagnosis of AMR will all be discussed. Satellite symposium #5 will examine cardiac allograft vasculopathy from bench to bedside, exploring the role of innate and adaptive immunity in

the pathogenesis of allograft vasculopathy, prevalence, detection and prognosis of allograft vasculopathy in children. Satellite symposium #9 will focus on the role of lymphocytic bronchiolitis and airway inflammation in transplanted lungs, as well as the association with rejection and BOS. Satellite symposium #10 will discuss several aspects of the management of highly sensitized patients, including the ISHLT Consensus Discussion on AMR in heart transplantation, where a summary of results will be presented.

Concurrent session #6 "AMR story continues" will focus on the use of C4d and other new markers for diagnosis of AMR in heart biopsies. The Thursday plenary session will present comparison of gene expression profile and endomyocardial biopsy for surveillance of acute rejection. Concurrent session #1 will deal with the role of stem cells in basic and translational approaches. Concurrent session #16 highlights molecular and clinical studies furthering our understanding of the interrelationship between the transplanted or failing heart and gene expression profile markers. Concurrent session #32 will discuss the mechanisms of inflammation and repair in the lung allograft airway. Concurrent session #35 will focus on new approaches to the evaluation and treatment of acute rejection, discussing a new C1q assay for prediction of AMR. Concurrent session #39 will also discuss the molecular mechanisms of organ rejection.

JUNIOR FACULTY & TRAINEE COUNCIL

Daniel F. Dilling, MD

The Junior Faculty and Trainee Council (JFTC) is excited about two new and very special offerings at the upcoming International Meeting. On Thursday April 22 join us at 12:15 PM for the "International Networking Lunch," where junior faculty and trainees can be mentored on "Getting Your Next Job", "Balancing Work and Family", or other topics (pre-registration is required). On Friday, April 23 at 10:45 AM we are excited to see presentations from winners of an abstract competition called "Clinical Case Dilemmas in Thoracic Transplantation" -- with tough cases presented to expert discussants. All are welcome to observe or to join in the discussion.