



Please indicate any Heart Failure/Transplantation topics you will be seeking information on in the next 12 months

- DCD. **(61 responses)**
- dd-cfDNA **(23 responses)**
- Cardiogenic shock. **(18 responses)**
- Immunosuppression. **(18 responses)**
- CAV after heart transplant. **(16 responses)**
- AMR. **(13 responses)**
- Update of ISHLT guidelines. **(12 responses)**
- Xenotransplantation. **(12 responses)**
- DCD and NRP. **(9 responses)**
- DCD and OCS (Transmedics). **(8 responses)**
- Antibodies/ antibody mediated rejection therapies. **(7 responses)**
- Multiorgan transplant. **(5 responses)**
- Pediatric heart failure/transplant. **(5 responses)**
- ACHD-HF. **(4 responses)**
- Biomarkers. **(4 responses)**
- Desensitization protocols and outcomes. **(4 responses)**
- Rejection. **(4 responses)**
- Right heart failure, fluid retention, kidney failure. **(4 responses)**
- Heart Recovery. **(3 responses)**
- Marginal donors. **(3 responses)**
- Noninvasive rejection surveillance. **(3 responses)**
- 3-5 year outcomes of Hep c and DCD donors. **(3 responses)**
- PGD. **(3 responses)**
- Sarcoidosis. **(3 responses)**
- Biventricular support. **(2 responses)**
- Bridging strategies. **(2 responses)**
- COVID positive donor viability. **(2 responses)**
- COVID-myocarditis before/after heart transplant. **(2 responses)**
- Continued recommendations regarding COVID prevention for transplant. **(2 responses)**
- Donor pool expansion. **(2 responses)**
- Ex Vivo donor heart perfusion. **(2 responses)**
- Frailty in heart failure/transplantation. **(2 responses)**
- Heart-Lung Transplantation. **(2 responses)**
- HLA testing and treatment. **(2 responses)**
- HTX eNOSE. **(2 responses)**
- Infections. **(2 responses)**
- Long term follow-up care. **(2 responses)**
- More information about ICU care. **(2 responses)**



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- Noninvasive graft evaluation. (**2 responses**)
- More topics on PH. (**2 responses**)
- Organ procurement. (**2 responses**)
- TA NRP for heart transplantation. (**2 responses**)
- Transplant immunology. (**2 responses**)
- Vaccine recommendations. (**2 responses**)
- Accessibility of care and equitable care.
- Acute management of HF. Medical Vs. MCS. I believe the MCS/cardiology and critical care are suited for this topic discussion.
- Advanced heart failure, heart transplantation listing.
- Advanced therapies in adult congenital heart disease, assessment, timing, surveillance. *Cardiology, MCS, Nursing and Allied Health.*
- Advances in MCS.
- Allo mapping in monitoring rejection.
- Allograft and cell free DNA for transplant monitoring.
- Amyloid and sarcoid.
- Anticoagulation.
- Any new medical information.
- APP role in the heart failure/LVAD/transplant care of patient (inpatient).
- Application of new therapies to pediatric population; Rejection surveillance.
- Assessment of RV function and treatment of frailty.
- Basic science of ischemia.
- Belatacept for maintenance immunosuppression.
- BK virus.
- Block heart and lung transplantation.
- Care of advanced HF patients who are not candidates for TX. End of life strategies across the world
- Cancer, marginal donors
- Cardiac allograft vasculopathy for Pediatric community.
- Cardiac allograft vasculopathy.
- Cardiac MRI, and other novel methods of detecting acute rejection non-invasively.
- Cardiac Sarcoidosis. *Heart Failure professional community.*
- Cardio oncology, cancer in heart transplant patients.
- Cardiorenal Syndrome - Heart Failure.
- CareDx.
- Children heart transplantation opportunities.
- Chronic AMR in children.
- Clonal hematopoiesis.



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- CMR use in detection of CAV and rejection.
- CMV (ID), hepatitis B (ID), transplanting currently infected recipients (ID)
- CMV and CAV, Non-HLA.
- Collaboration with geographically nearby centers.
- Combined heart/liver transplant.
- Continued understanding of non-invasive technologies for rejection - *HTx, lung tx, peds, basic science.*
- Continuous distribution method.
- Correlation between TTR of warfarin and LVAD implant success.
- COVID 19 and more basic science,
- COVID effects on the heart.
- COVID vaccination.
- Data on SGLT-2 and GLP-1's post transplant (*pharmacists*)
- Data with post COVID-19 (mid-term and long term HeartTX results).
- DCD QAPI processes for heart tx programs. Constant unos changes and the implications
- DCD programs in pediatrics. Better donor heart sizing. Use of Impella 5.5 in pediatric its
- dd-cfDNA in prehistoric pediatric patients
- Dead donor rule ethics with pre-mortem intervention. (*CT sg, cardiology, critical care, anesthesia*)
- Development and improvement of new Transplant Programs.
- Donor organ machine perfusion.
- Donor selection approaches.
- Donor services/advancements; organ preservation.
- DSA Management Advances.
- ECMO AV.
- ECMO bridge to heart transplantation.
- ECMO discussion. Listing criteria for heart transplant and the use of exceptions.
- Emerging technologies/advances in treating transplant rejection.
- End stage congenital heart disease.
- ERAS, MCS bridge.
- Establishment of GDMT for the pediatric population, at least for DCM.
- Ethics and the "need" for normothermic regional perfusion in the attempt to increase the donor heart pool. Have we gone too far? Applies to both medical and surgical aspects of heart transplant.
- Ethics of DCD.
- EVLP.
- Evolve of Transmedics.
- Ex Vivo donor heart management. Heart failure and MSC Devices and ECMOs



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- Explore differences US/Europe and the rest of world regarding heart donor availability, acceptance and use.
- Female mortality and morbidity rates. Patient selection for HTX. Selection bias. Female frailty
- GDMT.
- Genetics.
- Graft coronary artery disease in heart transplantation.
- Haemodynamic sessions.
- Heart allocation policy. Heart transplant.
- Heart failure clinical trials.
- Heart failure devices.
- Heart failure in CHD.
- Heart failure in PVD.
- Heart recovery with Ex vivo therapy.
- Heart Transplant: MMDx, dd-cfDNA, ABMR, DSA, CAV.
- Heart Transplantation - developing uniform practice guidelines.
- Heart transplantation research: DCD, sex differences, exosomes.
- Heart Transplants: Purpose, Procedure, Risks, Heart Transplant coordinator.
- Hep C donors.
- High risk donors.
- Humoral rejection.
- Hypertrophic cardiomyopathy.
- Hypothermic perfusion.
- I am more interested in access to transplantation to LMICs. Making transplantation more affordable.
- I think a session on transplant/MCS team burnout would be very helpful for both adult and ped providers
- I will be seeking more information on the AlloSure/DDMX practices to supplement rejection surveillance.
- Ideas in heart transplant. Heart transplant of the transgender patient (completed at Massachusetts General Hospital, Boston, MA).
- IMR to assess microvascular resistance
- Induction therapy, organ preservation.
- Patient selection criteria.
- Infectious disease monitoring and treatment (CMV).
- Interested in updates re PTLD - esp prevention strategies.
- IS changes and regimens for CAV.
- Isolated right heart failure.
- Late allograft dysfunction



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- Long term organ preservation.
- LVAD and right heart failure.
- LVAD Destination Therapy. En-block technique for Heart Liver Transplantation.
- Machine perfusion technologies.
- Management of CMV.
- Management of multiple comorbid conditions that accompany heart transplantation post-transplant. This is always a hot topic and needs to be addressed.
- Management of the sensitized patient. Noninvasive methods for allograft follow up.
- Marijuana selection criteria with it becoming legal in many states.
- MCS - management of advanced HF - palliative care.
- Measuring cystatin C Gene expression profiling and cell free DNA.
- More info on outcomes with the new heart allocation, more detailed guidelines on allosensitization management.
- More information about covid transplants.
- More on cardio-oncology and cause-specific cardiomyopathies.
- More on device management (such as Impella 5.5).
- More on the immunology of Fontan failure and its impact both pre and post HTx.
- More pediatric topics from a more diverse group. There is a relatively consistent group of people giving talks.
- More re: CAV prevention/treatment, induction therapy review and outcome review how to manage nonadherence in txp population, esp adolescent/young adult PT post txp and effect on outcomes and length of stay.
- Multi-disciplinary communication; managing socially complex patients.
- Need a pediatrics community.
- Need to see more about the infection challenges of the advanced cardiac therapies - driveline infection, bacteremia, LVAD exchange are all real areas of uncertainty with the newer devices. Also, the field is changing as the patients become SICKER. Risk stratification of the sickness would be novel.
- New allocation system and outcomes.
- New heart harvesting and transportation technologies and policies.
- New Induction strategies and desensitization.
- New innovations in the MCS and heart tx.
- Device studies on preservation.
- New LVAD technology.
- New methods to diagnose rejection.
- New treatment options post HTx. *All for professional community cardiology.*
- Non-HLA antibody management/surveillance
- Novel genomic biomarkers.



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- Novel management strategies of psychosocial barriers.
- Novel therapeutics, non-invasive diagnostics. Pediatric therapy options.
- Nutritional intervention and diet.
- Optimal speed optimization timing and what method for Heartmate 3.
- Optimization of aftercare.
- Organ allocation in US.
- Outcomes, AEs and patient selection in Asia vs Americas vs Europe
- Patient improved outcomes.
- Pediatric assist devices.
- Pediatric community and talk about healthcare disparities and insurance approval. Fitness interventions. Nominate Carmel Bogle to speak.
- Pediatric DSAs and which need to be treated.
- Pediatric Heart failure - broadening utilization of adult medications and guidelines to pediatric heart failure. Pediatric Heart transplant - broadened use of non-invasive surveillance methods for diagnosis and monitoring of rejection
- Pediatric program development, team communication, heart transplantation.
- Pediatric VAD. Advanced medical therapies/drug therapies.
- Peds and Impella use
- Pediatric Post-tx care.
- Perioperative management of heart transplantation – *Anesthesia/Critical Care*
- Policy/protocol updates for heart failure and heart transplant; mentoring
- Post transplant cardiac medication management
- Post transplant education and care - *nursing and NP focus. Nursing and allied health community.*
- Potential Heart Tx allocation score revisions. *Cardiology, CT Surgery, MCS, Allied Health*
- PTLD diagnostics and treatment.
- Pulmonary Vascular Disease, Right Heart Failure.
- Quality of life in VAD patients. Emerging treatments for driveline infections.
- Real world application of genetics and AI in heart failure and transplantation. *Professional community - cardiology.*
- Real world cost of increasing polypharmacy for HF.
- Recovery. Short term MCS.
- Regional discrepancies in organ availability.
- Remote invasive monitoring.
- Right dysfunction.
- Role of ACEi/ARNI in post-OHT vasoplegia, risk factors for PGD, novel preservation techniques
- Role of genetic forms of cardiomyopathy and approaches to this emerging field. Happy to give presentations on this topic. Pradeep P.A. Mammen, MD (UT Southwestern).



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- RV failure.
- SGLT2 inhibitors. Diabetes long term post heart transplantation. Also other complications long term post heart transplantation. Ethics and mental health after heart transplantation. Especially how to guide a patient after transplantation.
- Shock elimination of biopsies.
- Shock teams.
- Short term support, MCS.
- Single ventricle heart failure management. MCS for single ventricle patients. Microbiome. Pediatric pulmonary hypertension in heart failure
- The sensitized recipient and methods of addressing.
- Transcriptomics in heart transplantation.
- Transition programs from pediatrics to adults.
- Translation from early diagnosis to transplant- when is the right time. Education for patients and community cardiologists.
- Transplant in highly sensitized patients.
- Transplant management update.
- TRP Ethics, Heart Transplant
- Use of IV diuresis clinics and ReDs vests.
- Use of newer adult HF medications in pediatrics; transition from pediatric to adult program (including both pediatric and adult teams); what can we as a TXP/HF community do to combat racial/SES health disparities that we know exist.
- Use of the Paragon Sherpa pak for heart transport and avoidance of ice box.
- VAD in ACHD Transplant in ACHD, Advanced heart failure medical management in ACHD. Treating the systemic right ventricle.
- VAD management.
- VAD/Transplant evaluation and selection.
- Viral triggers of allograft dysfunction.
- Women and heart failure.