



CONNECTIONS

SERVING SCIENTIFIC COUNCILS 2022 Volume 2



American Stroke Association.
International Stroke Conference



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Scientific Sessions 2022



Manesh R. Patel
MD, FACC, FAHA
Chair, Committee
on Scientific
Sessions Program

Dear Colleagues:
It is my great pleasure to welcome you to the American Heart Association's Scientific Sessions 2022. This year's meeting is centered around renewed connections and

passionate discussions on the year's most ground-breaking updates in the fields of cardiovascular clinical, basic and population science.

Regardless of your location, you have the opportunity to participate in group discussions and debates, engage with interactive sessions featuring cutting-edge topics across an array of specialties, and meaningfully connect

with peers, mentors and friends from around the world.

The scope and quality of the scientific exchange is what makes AHA Scientific Sessions the premier cardiovascular research and instructional meeting in the world.

- Watch as the most highly-anticipated breakthroughs in patient care are announced during Late Breaking Science sessions.
- Immerse yourself in cutting-edge CV science topics during our Main Event sessions.
- Stay on top of the latest trends in healthcare technology with the 3-day Health Tech Summit.
- Over 400 sessions including sub-specialty and cross-specialty programming, and 4,000 abstracts!

- For attendees who are not fully vaccinated, proof of a negative COVID-19 test will be required to attend the AHA's Scientific Sessions 2022 in-person at the McCormick Place and any other official event locations in Chicago.
- Connecting with colleagues has never been easier with many hours of featured networking events.

So, please join in on the conversation happening online by following #AHA22. I can't wait to see you there!

Manesh R. Patel, MD, FACC, FAHA
Chair, Committee on
Scientific Sessions Program ●

The Event of the Year

AHA Scientific Sessions 2022 welcomes you back in person in Chicago and online globally! Join us for Scientific Sessions 2022, November 5-7, and the Pre-Sessions Symposia & Early Career Day, November 4.

Reconnect face to face with colleagues, experience breakthrough basic, clinical, and population science updates, and advance your career as we celebrate the accomplishments and innovations in cardiovascular and stroke science.

Be sure to mark these can't-miss sessions featuring the most relevant topics and controversies in cardiovascular health on your meeting itinerary:

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Council News

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- 36 Genomic and Precision Medicine

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- 50 Quality of Care and Outcomes Research
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Scientific
Sessions

Don't Miss A Beat

Join your fellow AHA Professional Members at the world's foremost celebration of cardiovascular discovery & clinical practice.

**REGISTER
TODAY**

CHICAGO, IL + VIRTUAL

**NOV
4** PRE-SESSIONS SYMPOSIA
& EARLY CAREER DAY

**NOV
5-7** SCIENTIFIC SESSIONS
2022



AHA Professional Members receive exclusive discounts & access to events.
Learn more at join.heart.org



American
Heart
Association.

The Event of the Year

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Notable Sessions

- Opening Session: Moving Science into Public Health: Lessons Learned Session
Description: US Surgeon General & International Public Health Experts
- The Presidential Session: Dr. Michele Albert & Others Will Inspire Your Dedication to the AHA Mission
- Annual Dr. Nanette K. Wenger Research Goes Red® Award for Best Scientific Article on Cardiovascular Disease and Stroke in Women
- Controversies In Valvular Heart Disease
- Global Innovations to Transform the Medical Workforce: Addressing Unmet Cardiovascular and Other Health Needs
- Identifying and Practicing Emerging Genomic Based Therapies on Cardiovascular Disease
- Implementing Machine Learning for Precision Care: Crossing the Bridge to Reality
- Implementing the 2021 ACC/AHA/SCAI Guideline for Coronary Artery Revascularization Into Real World Practice
- Long Term Consequences of Pulmonary Embolism From Post-pe Syndrome to Chronic Thromboembolic Pulmonary Hypertension
- Nobel Laureate Lecture
- Not Your Father's Heart Disease: Microvascular Coronary Function and Its Contribution to Disease
- Novel Technologies in Arrhythmia Therapy
- One Brave Idea- Redefining Coronary Heart Disease at the Edge of Wellness
- Paul Dudley White International Lecture and Session: Laureates, Storytelling and Novel Perspectives for Global Cardiovascular Risk Reduction
- The 2022 AHA/ACC/HFSA Guideline for the Management of Heart Failure: Executive Summary
- The Evolving Landscape of Lipid Management
- Visualizing COVID for the Long Haul: Heart-Vasculature-Brain

- Over 300 educational sessions available On Demand through Nov 14, 2022
- 24 CE and MOC credits available

[Click here to view the full Program Planner.](#)

Featured Faculty

As with every year, Scientific Sessions prides itself on having the top experts from around the world discuss key information and the latest updates in their fields. Cardiovascular science and healthcare masters joining this year's Sessions:

- Jerome Adams, MD, MPH
- Nancy Albert, PhD, CCNS, CHFN, NE-BC, FAHA, FHFA, FAAN
- Thomas Alexander MD, DM, FACC, FRCP
- Norrina Allen, PhD, MPH, FAHA
- Stefan Anker, MD, PhD
- Chinyere Archie, MBBS
- Katrina Armstrong, MD
- Rima Arnaout, MD
- Rodrigo Bagur, MD, PhD, FRCPC, FAHA
- Geoffrey Barnes, MD, MSc, FAHA
- Garth M. Beache, MD, FAHA
- Regina Benjamin, MD, MBA
- Biykem Bozkurt, MD, PhD, FAHA
- Sandra E. Brooks, MD, MBA,
- Chiara Bucciarelli-Ducci, MD, PhD, FESC, FACC
- Renée Bullock-Palmer, MD, FAHA, FACC, FASNC, FASE, FSCCT
- Robert M. Califf, MD
- Joanna Chikwe, MD, FRCS
- Leslie Cho, MD, FACC, FESC, FSCAI
- Mina K. Chung, MD, FAHA
- Phillip S. Cuculich, MD
- A.H. Jan Danser, PhD
- Alan Daugherty, PhD, DSc, FAHA
- Carlo de Asmundis, MD, PhD
- Luigi Di Blase, MD, PhD
- Esther Duflo, PhD
- Professor Marianna Fontana, MD, PHD, FRCP
- Jessica Forcillo, MD-MPH, PHD, FRCSC
- Stephen Froles, MD, MSc, FACC, FACP, FRCS
- Matthias Friedrich, MD, FACC, FESC, MSCMR
- Syed Gilani, MD
- Henry Ginsberg, MD, FAHA
- Shinichi Goto, MD, PhD
- Kendra J. Grubb, MD, MHA, FACC
- Erica P. Gunderson, PhD, MS, MPH, RD
- Eileen Harder, MD
- Robert A. Harrington, MD, FAHA, MACC, FESC
- Katherine A. High, MD
- Nkechinyere Ijioma, MBBS, FAHA
- Pascal M. Jabbour MD, FAANS, FACS, FAHA
- Hani Jneid, MD
- Paula Johnson, MD, MPH
- Yogendra Kanthi, MD, FAHA, FSVM
- John Kastelein, MD, PhD, FESC
- Sekar Kathiresan, MD
- Elizabeth Kaufman, MD, FAHA
- Hassan Khan, MD, PhD
- Prateeti Khazanie, MD, MPH
- Rohan Khera, MD, MS
- Erik Klok, MD, PhD, FESC
- Irene M. Lang, MD
- Jennifer Lawton, MD, FACS, FAHA
- Eldrin F. Lewis, MD, MPH, FAHA
- Peter Libby, MD, FAHA
- Brian R. Lindman, MD, MSc
- Calum MacRae, MD, PhD
- Ernest C. Madu, MD, FACC
- Theresa McDonagh, MBChB, MD, FRCP, FESC
- Venu Menon, MD, FAHA
- Thomas Metkusy, MD, PhD
- Alanna Morris, MD, MSc, FHFA, FACC, FAHA
- Pamela B. Morris, MD, FACC, FAHA, FASPC, FNLA
- Pradeep Natarajan, MD, MMSc
- Suzanne Oparil, MD, FAHA

(continued on page 4)

The Event of the Year

(continued from page 3)

- Karen Ordovas, MD, MAS, FNASCI, FSCMR, FAHA
- Latha Palaniappan, MD, MS
- Nancy Pham, MD
- Fausto J. Pinto, MD
- James Pirruccello, MD
- Odayme Quesada, MD, MHS, FACC, FAHA
- Betty Raman, MD, DPhil, FRACP, FESC
- Harmony Reynolds, MD
- Howard Rockman, MD
- Veronique Roger, MD
- Ann Marie Schmidt, MD
- Gregg L. Semenza, M, PhD
- Svati H. Shah, MD, MS, MHS, FAHA
- Marta Sitges, MD, PhD
- Lynne W. Stevenson MD, FAHA
- Jacqueline E. Tamis-Holland, MD, FAHA
- Viviany R. Taqueti, MD, MPH, FACC
- Lale Tokgozoglu, MD, FACC, FESC
- Cynthia Tracy, MD
- Elaine Tseng, MD FAHA, FACS
- Harriette GC Van Spall, MD, MPH, FR
- Marmar Vaseghi, MD
- Pugal Vijayaraman, MD
- Salim S. Virani MD, PhD, FAHA
- Kevin Volpp, MD, PhD
- Naomi Walker, MD
- Paul J. Wang, MD, FAHA
- Nanette K. Wenger, MD, FAHA
- Harvey D. White, DSc
- David R. Williams, PhD
- Michelle Williams, MBChB, PhD, FRCR, FSCCT
- Professor Dr. Fernando Wyss MD, FSIAC, FACC, FAHA
- Clyde W. Yancy, MD, MSc, FAHA, MACC

Late-Breaking Science

Leading researchers will reveal the results of high impact science from clinical registries, observational studies, randomized clinical trials, clinical trial updates and large scale COVID-19 clinical data sources.

Featured Science

Engage in new science and secondary research presented live during our featured science sessions.

Pre-Sessions Symposia and Early Career Day

Early Career

AHA Early Career Day is back! AHA is committed to foster the next generation of clinicians and researchers by offering programs to facilitate your career growth and development. If you are a student, trainee, fellow or early in your career this day is designed for you. Topics include how to navigate transitions, overcome career challenges and plan for private practice.

Congenital Heart Research & Innovation

This symposium will provide an update on CHD research and innovations — with sessions on the latest findings from CHD clinical trials and multicenter studies, successes and challenges over the past decade of CHD research, and finally a look to the future of CHD innovation in 2022 and beyond.

Heart/Kidney Symposium

The intersection of nephrology and cardiology has taken on huge importance — from the science of cardiorenal syndrome, to mechanical/circulatory therapies, to a new proposed subspecialty, and concerns of equity and access of new therapies including SGLT-2 inhibitors and non-steroidal MRAs.

State of the Art Cardiovascular Care

This half-day seminar is dedicated to physicians, nurses, and other health professionals to communicate the latest advances in clinical cardiovascular care in a succinct and engaging format. Session topics will cover the most recent guideline-based recommendations and clinical updates that can be incorporated into your everyday practice. You'll have

the chance to have a dialogue with thought leaders about state-of-the-art cardiovascular care.

Frontiers in Science

Vascular Disease:

Learn how post-thrombotic syndrome is a common complication of deep vein thrombosis resulting in chronic disability and poor mental and physical sense of wellbeing. Research is now focused on alleviating the burden of post-thrombotic syndrome and exciting advances have been made in pathophysiology and management using recent advances in device therapy. Often, clinicians on the frontlines have innovative approaches to the treatment of vascular disease but are unsure how to propose a new device or tool. Experts from around the globe will share strategies on bringing a device from imagination to the bedside.

Atherosclerosis, Thrombosis and Vascular Biology:

COVID-19 has brought attention to our need to better understand infection-associated thrombotic cardiovascular events associated with a dysregulated blood clotting system. Additionally, how alterations in lipid and lipoproteins contribute to worse outcomes. These sessions highlight the latest findings in the mechanism of infection-associated thrombosis, the role of hemostatic system in host defense and, the most up to date translational research.

Arrhythmia Research:

COVID-19 has brought attention to our need to better understand infection-associated thrombotic cardiovascular events associated with a dysregulated blood clotting system. Additionally, how alterations in lipid and lipoproteins contribute to worse outcomes. These sessions highlight the latest findings in the mechanism of infection-associated thrombosis, the role of hemostatic system in host defense and, the most up to date translational research. ●

From the COC Chair

"Each One, Reach One" for a Noteworthy Purpose



Cheryl Anderson
PhD, MPH, FAHA
Chair,
Council Operations
Committee

I am honored to serve as chair of the Council Operations Committee (COC) and delighted to share my vision for my term. I am also grateful to my colleagues who have agreed to serve on the COC for the 2022-23 term.

Larry Allen, MD, MHSc, Carissa Baker-Smith, MD, MPH, FAHA, LaPrincess Brewer, MD, MPH, Antonio Cabrera, MD, FAHA, Sheryl Chow, PharmD, FAHA, Janice Chyou, MD, FAHA, Deborah Crabbe, BSE, MD, FAHA, Sarah De Ferranti, MD, MPH, FAHA, Vinicio Dejesus Perez, MD, FAHA, Aldrin Gomes, PhD, FAHA, Carolyn Ho, MD, MS, FAHA, Monik Jimenez, DSc, ScD, FAHA, Esther Kim, MD, MPH, FAHA, Patrick Lyden, MD, FAHA, Sanjay Misra, MD, FAHA, Kiran Musunuru, MD, PhD, FAHA, David Pollock, PhD, FAHA, Jennifer Rymer, MD, MBA, MS, FAHA, Daichi Shimbo, MD, Tracy Wang, MD, MHSc, MSc, FAHA, Sean Wu, PhD, MD, Olamide Alabi, MD

The Council Operations Committee serves as the oversight committee for all 16 scientific councils, addresses key AHA strategic initiatives and works collaboratively to meet the needs of the overall membership.

My vision for this year includes growing our membership, developing initiatives to better support mid-career members and advancing our mission for justice, equity, diversity and inclusion in all that we do. More specifically, I envision doing the following in three areas:

- **Membership:** Strengthen the value proposition for AHA professional membership by articulating and reinforcing what already makes AHA special for all members. I hope to have you share your stories about why you joined the AHA, how you benefit and how we can motivate others to join us in our mission.
- **Mid-Career:** Build on our efforts to address the needs of our members who are in mid-career through mentoring, funding and career development.
- **JEDI (Justice, Equity, Diversity and Inclusion):** Continue the momentum to diversify our membership and leadership, and ensure that differences among us are recognized and celebrated.

This is truly an exciting time to chair the COC as we head into the AHA's 100th anniversary in 2024. I am inspired to make a noteworthy contribution to this milestone celebration, and I will lead the

COC in developing strategies, tactics, messaging and outreach to significantly grow AHA professional membership. I hope to unfold an initiative I am calling "Each One, Reach One" to support each member in efforts to recruit and engage at least one new member. I hope you share my enthusiasm because in doing this, we would double our membership.

Given the passion each of us has for the AHA's mission, the uniqueness of the organization and the many benefits of membership that we have all experienced, I know we can do it.

In closing, it is my honor to work to support all councils and the mission of the AHA. I look forward to a very productive year and to celebrating many successes across the councils.



Tracy Y. Wang
MD, FAHA

Dr. Tracy Wang concluded her service as COC chair in June. Her leadership was instrumental in the successes we have seen to date in

efforts toward the AHA's 2024 health equity impact goal. On behalf of all councils, thank you, Dr. Wang, for your commitment and service. ●

Scientific Sessions Lounges

Visit the Go Red™ Women in Science & Medicine lounge and the Early Career/FIT lounge in the Heart Hub to experience career-supporting programming. To show special appreciation, our FAHA may join us in a separate lounge exclusively for them.

Go Red™ Women in Science & Medicine Lounge



Supported by Save Legs. Change Lives.™, a Janssen Pharmaceuticals Companies of Johnson & Johnson initiative.

Early Career/FIT Lounge



Supported by Kiniksa Pharmaceuticals

Lunch with Legends



Supported by Pfizer Inc.

Communication Center



Sponsored by Novartis Pharmaceutical Corporation

Early Career Workshops and Networking Events

Get With The Guidelines® + Precision Medicine Platform

Have lunch on us, network, and learn how to use the Get With The Guidelines® registry data with 13 million records for research on the American Heart Association's Precision Medicine Platform

Friday, November 4,
12:00-1:00 pm CT

Hyatt Regency McCormick Place,
Hyde Park A Meeting Room

Register here:

<https://app.smartsheet.com/b/form/a76e2013c9834c05ae7f9229013a066e>

- Box lunch
- Demo of the Precision Medicine Platform
- Hear about our guest speakers' first-hand experience using registry data for research on the Precision Medicine Platform
- Information about the Get With The Guidelines programs (13 million patient records)
- Research Opportunities at the American Heart Association
- Networking opportunity with other attendees, speakers, and American Heart Association staff

Speakers:

- David Morrow, M.D. - Director of the Cardiac Intensive Care Unit (CICU) at Brigham and Women's Hospital (BWH). Professor of medicine at Harvard Medical School (HMS).
- Erica Goodrich - Lead Biostatistician

Questions: pmp@heart.org

Meet the Experts in Regulatory Science — Explore New Possibilities for Funding and Social Benefit

Wrap up your Friday pre-Sessions with a lens into regulatory science. Join us for appetizers and great conversation!

If you've ever wondered how your science could have a broader impact on agencies and organizations tasked with transforming science to regulations that have impact on patients and on society at large, join us for an introduction to Regulatory Science as well as an opportunity to network with investigators who have made it a part of their research portfolio. Also hear from and meet our speaker from the Food and Drug Administration's Center for Tobacco Products.

Friday, November 4
7:00-9:00 pm CT

Hyatt Regency McCormick Place,
Jackson Park ABC

Walk in, no registration required

- Learn about this application of basic, clinical, translational and/or population science and how it can impact regulation
- -Network with speakers and additional current investigators and fellows in training to learn about funding opportunities in regulatory science
- AHA Tobacco Center for Regulatory Science's Career Enhancement Core (ATRAC) staff and faculty will be on hand for your questions

Speakers:

- Food & Drug Administration: Priscilla Callahan-Lyon, M.D.;
- AHA Tobacco Center for Regulatory Science: Aruni Bhatnagar Ph.D., FAHA, University of Louisville
- Boston University - Andrew Stokes Ph.D., Jessica Fetterman Ph.D., (Viewpoints from past ATRAC fellows outlining their training journey and career path to current faculty positions, with continuing work in regulatory and discovery science)

Questions: Laura.norris@heart.org

All Member Reception

All members are invited to join us as we say **Thank you** at the All-Member Reception at Scientific Sessions 2022.

This will take place **Saturday, November 5th from 5:30-6:30** in the Heart Hub.



The Council Challenge—Who will dethrone CLCD?

Join us for a fierce competition where every attendee will be a live competitor!

Represent your Scientific Council, answer questions, earn points and help your council earn global bragging rights to be called AHA's Top Council! The Council Challenge will take place in the Science and Technology Hall's Heart Hub in Heart Theater I on November 6 from 11:30 AM - 12:30 PM.

Comix from the Heart

The AHA continues its exploration of Graphic Medicine as an innovative communications tool for patients, providers and the general public. Since our pilot in May of 2020, we've added a second edition focused on Hypertension. In collaboration with the USC School of Pharmacy and their Arts in Action initiative, we have 15 new "Comix from the Heart" addressing many aspects of high blood pressure control and management. We hope these will be useful in patient and provider education.

Ninepanels.org



2023 International Stroke Conference



Tovar Jovin
MD, FAHA
Chair, International
Stroke Conference
2023 Program
Committee

Dear Colleagues:
This is an unprecedented time in the field of cerebrovascular disease and brain health; the stroke landscape is evolving at an ever-increasing rate. COVID has also impacted us in all areas,

including how we provide medical care and our understanding of its effects on the brain and cerebral vasculature. Learn about all the latest exciting advances in cerebrovascular science and receive the most up to date stroke and brain health education by being a part of the International Stroke Conference (ISC) — uniting the world in stroke science. The 2023 conference will take place February 8-10, both virtually and in-person in dynamic Dallas, Texas. On behalf of the American Stroke Association, a division of the American Heart Association, and the Stroke Council Program Committee, we warmly welcome you to join us. The program emphasizes basic, clinical and translational sciences as they evolve toward a more complete understanding of stroke pathophysiology with the overall goal of developing more effective prevention and treatment. Stroke systems of care, the newest clinical trials, quality and outcomes are also key parts of the conference.

The International Stroke Conference is the world's premier meeting dedicated to the science and treatment of cerebrovascular disease. It provides unique opportunities to meet and network with colleagues from around the world with wide-ranging research interests and expertise in stroke prevention, diagnosis, treatment, and rehabilitation. We are truly dedicated to the international nature of this conference with science, attendees, presenters, and faculty coming from all corners of the world and a myriad of exhibitors displaying engaging new stroke products and services. We are planning many new forums to bring you the best science, clinical information, educational, and networking opportunities both virtually and in-person. From forming multiple, life-long collaborations with the best minds in the profession to hearing late-breaking trial results to the exceptional education and science, if you are involved in the stroke medical profession, ISC is an essential meeting.

The 2023 program offers four separate pre-conference symposia: the State-of-the-Science Stroke Nursing Symposium; the ISC Pre-Conference Symposium: Stroke in the Real World, highlight scientific advances in acute stroke management while emphasizing their application in the real world; the ISC Pre-Conference Symposium: Stroke in the Lab World, focusing on emerging topics in basic and pre-clinical stroke studies; and the ISC Pre-Conference Symposium: HEADS-UP: Health Equity

and Actionable Disparities in Stroke: Understanding and Problem-solving.

The main conference will include compelling invited symposia; rousing debates; lively game-style sessions; provocative oral scientific abstract presentations; intriguing scientific abstract posters; and special lectures on recent advances and state-of-the-science technologies. This premier conference is intended for adult and pediatric neurologists; neurosurgeons; neuroradiologists and interventional radiologists; psychiatrists; endovascular specialists; emergency medicine specialists; primary care physicians; hospitalists; nurses and nurse practitioners; advanced practice providers and therapists; rehabilitation specialists; physical, occupational, and speech therapists; pharmacists; and all levels of trainees. Additionally, the ISC is just as much of a home for basic scientists, clinical scientists, stroke program coordinators, policy makers and public health officials who work in the stroke field.

Stimulating symposia, debates and abstract presentations will focus on numerous topics from 17 stroke-related categories. Sessions in clinical categories will center on neuro-endovascular treatment; risk factors and prevention; cerebrovascular systems of care; imaging; acute treatment: systemic thrombolysis and cerebroprotection; large vessel disease from arteries to veins (non-acute treatment); in-hospital care, from the ICU to discharge; clinical rehabilitation and recovery; and



health services, quality improvement, and patient-centered outcomes. Sessions in basic science categories focus on translational and basic science. Further specialized topics include pediatric cerebrovascular disease; intracerebral hemorrhage; cerebrovascular manifestations of COVID-19; cerebrovascular nursing; advanced practice providers and therapists; aneurysms and vascular malformations; subarachnoid hemorrhage; and ongoing clinical trials.

In addition to unparalleled education, you will have the opportunity to connect with thousands of cerebrovascular research and practice experts from around the globe. Join us for specialized online networking groups. Decide the area that interests you most, click a link, and find yourself in direct online conversations with leaders in the stroke field. Who knows what partnerships could result from these informal chats; perhaps we will see the science these collaborations result in at one of our future International Stroke Conferences.

Early Registration opens November 2nd at strokeconference.org. Please join us for the incomparable International Stroke Conference 2023, either in-person in vibrant Dallas, Texas or as a part of the virtual meeting, and be a part of this outstanding and illuminating experience. We look forward to seeing you in February. ISC 2023 — A New Era for Stroke Science and Brain Health.

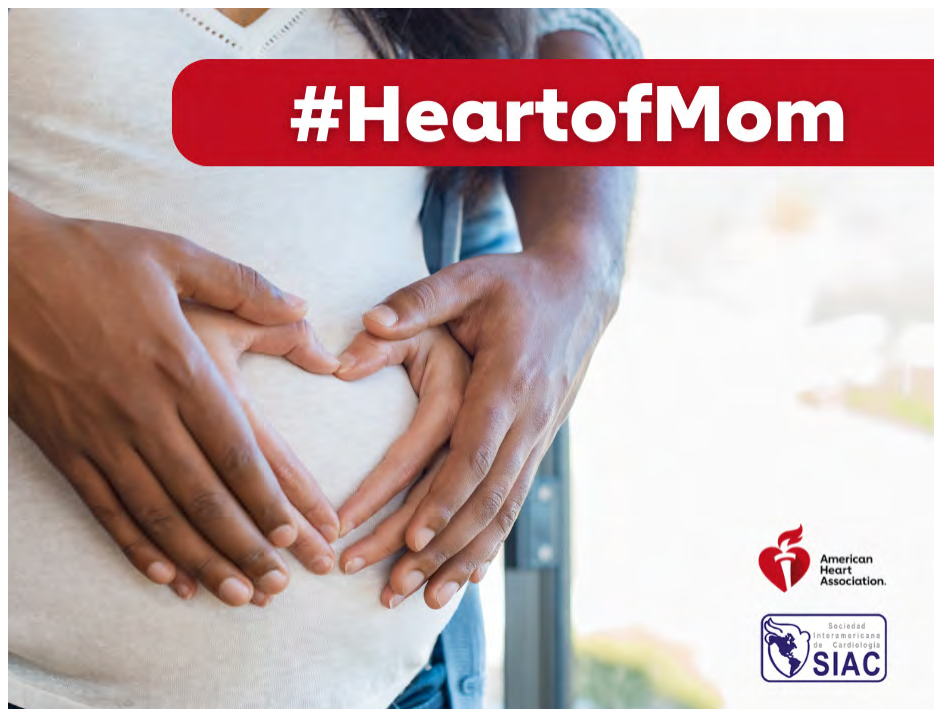
Tudor Jovin, MD, FAHA
Chair, International Stroke Conference 2023 Program Committee ●



ISC 2023 Late-Breaking Science and Ongoing Clinical Trials Abstract Submission NOW OPEN!

Still have science you want to submit to the International Stroke Conference 2023? Late-Breaking Science and Ongoing Clinical Trials Abstract Submission is open now until November 2nd! Your science could change the stroke and brain health landscape. Be a trailblazer and submit your Late-Breaking Science or Ongoing Clinical Trial abstract to the International Stroke Conference 2023. Learn more and submit online at strokeconference.org/submitscience.

Healthy Hearts for Healthy Starts



#HeartofMom

Every baby and mother deserve their best start, right from the beginning. Cardiovascular health plays a significant role in supporting pregnancy with healthy hearts being critical to the reduction of the maternal

mortality rate worldwide. On “Bump Day” 2022 – the third Wednesday in July each year to recognize healthy pregnancies for all women around the globe – AHA teamed up with the Inter-American Society of Cardiology (SIAC), a global

licensee of AHA’s signature Go Red for Women® program for a major announcement. The organizations have joined together to launch an awareness and advocacy campaign that will improve maternal resources, education, and healthcare access for our respective Hispanic/LatinX mothers and their babies in the hemisphere.

This collaborative project will encourage the exchange of science and knowledge between both organizations using the venue of Go Red for Women. Community resources will be developed to support women in Latin America to understand the importance of timely and regular care plays in both healthy pregnancies as well as later in post-partum. Increasing community awareness and resources is a major step in the Go Red for Women’s mission to improve women’s cardiovascular health worldwide. SIAC will serve as the on-the-ground leader conducting community-facing campaigns and education for women about heart disease in the Americas. This will help save lives and improve health outcomes for families across the region. ●

AHA Selects Seven Distinguished Scientists

The American Heart Association designates the Distinguished Scientist award to AHA members who have significantly advanced the understanding of cardiovascular, stroke or brain health. The 2022 awardees will be honored during Scientific Sessions in November, joining the ranks of other eminent professionals.

Emelia J. Benjamin, MD, ScM, FAHA

Boston University School of Medicine and School of Public Health

Professor of Medicine and Epidemiology

Boston University Schools of Medicine and Public Health

Associate Provost for Faculty Development, Boston University Medical Campus

Boston, MA

Dr. Benjamin is a Boston University (BU) Professor of Medicine and Epidemiology and a cardiologist at Boston Medical Center, New England's largest safety net hospital. She is a foremost international expert on the epidemiology of atrial fibrillation (AF). She has made original contributions to describing AF's risk factors, heritability, genetics, risk prediction, lifetime risk, secular trends, relations with sepsis, and increased risk of heart failure and death. She co-leads the National Heart, Lung, and Blood Institute's AF Research Working Group, defining future research directions and leading statements on AF's screening, secondary prevention, and social determinants.

A Framingham Study investigator, she has been NIH funded since 1998 on grants related to AF, vascular function, inflammation, mobile health, and chronic pain. She has published more than 800 peer-reviewed articles and is a Clarivate Highly Cited Researcher since 2014 (h index=200). She was inducted into the Association of American Physicians in 2021.

She has volunteered for the American Heart Association (AHA) since the 1990s. She has chaired the Science and Clinical Education Lifelong Learning Committee, the Heart Disease and Stroke Statistics Committee,

the Functional Genomics and Translational Biology Council, and the Genomics and Translational Biology, Epidemiology Research Study Section, co-chaired the Research Leaders Academy and served as Science Representative on the national Board of Directors. She was President of the AHA Boston Board, has led diverse AHA research fellowships since 2013 and is a member of the Supporting Undergraduate Research Experiences Oversight Advisory Committee for diverse undergraduates.

Dr. Benjamin is the inaugural Associate Provost for Faculty Development, BU Medical Campus and co-designed and facilitates multiple longitudinal faculty development programs. She has also led implicit bias trainings for BU and AHA. She has won national awards for research, education, mentoring, and diversity, including the Alliance for Academic Internal Medicine's 2020 Diversity and Inclusion Award.

Lisa A. Cooper, MD, MPH, FAHA

James F. Fries Professor of Medicine and Bloomberg Distinguished Professor

Johns Hopkins University Schools of Medicine, Nursing, and Public Health Baltimore, MD

Dr. Cooper is the James F. Fries Professor of Medicine and Bloomberg Distinguished Professor of Equity in Health and Health Care at Johns Hopkins University Schools of Medicine, Nursing, and Bloomberg School of Public Health. She is also the Founder and Director of the Johns Hopkins Center for Health Equity.

A general internist, epidemiologist, and health services researcher, Dr. Cooper studies how racism and socioeconomic factors shape patient care, and how health systems, with communities, can improve the health of populations with complex medical and social needs. She and her colleagues work in partnership with health systems and community-based organizations to identify interventions that alleviate racial and income health disparities and translate them into practice and

policy changes that mean better health for communities.

The author of the book, "Why Are Health Disparities Everyone's Problem?" (Johns Hopkins University Press, 2021), Dr. Cooper is a 2007 MacArthur Fellow and an elected member of the National Academy of Medicine, the American Society for Clinical Investigation, and the Association of American Physicians. She is a recipient of the Herbert W. Nickens Award for outstanding contributions to promoting social justice in medical education and equity in health care from the Association of American Medical Colleges and the Helen Rodriguez-Trias Social Justice Award from the American Public Health Association. Dr. Cooper has served as a Trustee of the American Heart Association (Mid-Atlantic Affiliate and Greater Baltimore Chapter). In September 2021, she was appointed by President Joseph Biden to the President's Council of Advisors on Science and Technology.

Dr. Cooper received her doctor of medicine degree from the University of North Carolina at Chapel Hill School of Medicine, her Master of Public Health degree from the Johns Hopkins University Bloomberg School of Public Health, and her bachelor's degree in chemistry from Emory University.

David A. Kass, MD, FAHA

Abraham and Virginia Weiss Professor of Cardiology Professor of Biomedical Engineering Professor of Pharmacology and Molecular Sciences

Director, Institute of CardioScience Johns Hopkins University School of Medicine Baltimore, MD

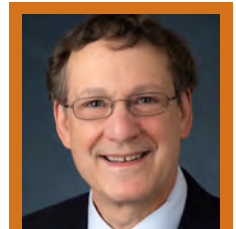
Dr. Kass received his BA from Harvard College in Applied Physics and Engineering and MD from Yale University. After Internal Medicine residency at George Washington University, he joined the Cardiology Division at Johns Hopkins University as a fellow, and he has remained



Emelia J. Benjamin
MD, ScM, FAHA



Lisa A. Cooper
MD, MPH, FAHA



David A. Kass
MD, FAHA

there since. He is considered a world leader in the pathobiology and therapy of heart failure, cardiac physiology and mechanics, as well as cyclic GMP-protein kinase G and phosphodiesterase signaling. His research is expansive, providing innovative landmark studies in many different fields from basic molecular and cellular studies through to human clinical trials. His initial work was as an integrative physiologist studying ventricular and vascular function and identifying mechanisms of human heart failure and hypertrophy. He pioneered pressure-volume analysis in humans and later mice and played a major role in developing cardiac resynchronization therapy (later studied at molecular and cellular levels). In the late 1990's he ventured into molecular/cellular studies of heart failure and cGMP/protein kinase G signaling. He developed novel heart failure therapies, patents, and start-up companies. Recent translational efforts offer treatment for Duchenne Muscular Dystrophy, right and left heart failure, and cardiometabolic disease. Among his honors are the 2020 Louis and Arthur Lucien Award, the AHA Basic Science Award, George Brown Lectureship, and Inaugural Melvin Marcus Award, Peter Harris Distinguished Scholar Award and Innovator Award from the International Society of Heart Research, and National Institutes of Health Outstanding Investigator Award. He lists over 500 original papers, excluding book chapters, garnering more than 74,000 citations with an H-index of 143. Dr. Kass also directly mentored over 100 students in his laboratory, most are now active in academics and many with leadership roles in cardiovascular research. In his spare time, he plays clarinet, cooks, and is raising a new long-haired dachshund puppy.

Bruce Ovbiagele, MD MSc, MAS, MBA, MLS, FAHA

*Professor of Neurology and Associate Dean
The University of California, San Francisco
Chief of Staff
San Francisco Veterans Affairs Health Care System
San Francisco, CA*



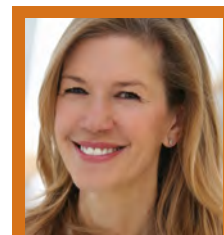
Bruce Ovbiagele
MD, MSc, MAS, MBA, MLS, FAHA

Dr. Ovbiagele is a vascular neurologist, clinical epidemiologist and health equity scholar. He is currently Professor of Neurology and Associate Dean at the University of California, San Francisco as well as Chief of Staff at the San Francisco Veterans Affairs Health Care System. Prior to these roles, he served for six years as Professor and Chairman of Neurology at the Medical University of South Carolina. He maintains adjunct professorships at universities in Africa, Asia, and South America. Dr. Ovbiagele's research studies have greatly advanced knowledge of stroke epidemiology, mechanisms and management among disparate populations in the United States and Africa, and his research training programs are diversifying the academic neurology workforces in both regions. He served as the inaugural national medical spokesperson for the "Power-to-End-Stroke" campaign, which focused on raising awareness about the disproportionate burden of stroke experienced by African Americans, lead author of the AHA policy paper "Forecasting the Future of Stroke in the United States", which projected higher future stroke rates among African Americans and Hispanics, and Vice Chair of the 2014 AHA Secondary Stroke Prevention Writing Panel. His work has been recognized with several awards and honors including the Mridha Humanitarian Award from the American Brain Foundation; Pessin Lectureship Award and Wartenberg Lectureship Award from the American Academy of Neurology; Feinberg Lectureship Award from the American Stroke Association; Penn Lectureship Award from the American Neurological Association; Meritorious Achievement Award from the National Medical Association; Haddock International Impact Award and Stroke Council Award from the American Heart Association. He was Chair of the AHA International Stroke Conference (2016-2018). He has published more than 580 peer-reviewed articles with more than 105,000 citations and edited five textbooks. Dr. Ovbiagele is an elected fellow of the World Stroke Organization, American Academy of Neurology, American Heart Association, European

Stroke Organization, Royal College of Physicians, Royal Society of Public Health, and African Academy of Sciences; and an elected member of the National Academy of Medicine.

Susan E. Quaggin, MD, FAHA

*Charles Horace Mayo Professor and Chief, Nephrology/Hypertension; Director, Feinberg Cardiovascular & Renal Research Institute
Northwestern University
Chicago, IL*



Susan E. Quaggin
MD, FAHA

Dr. Quaggin is a graduate of the University of Toronto where she completed her residency and served as chief medical resident for the University's St. Michael's Hospital. She completed her nephrology fellowship at the University of Toronto and Yale University, where she also completed research and post-doctoral training. Dr. Quaggin's research focuses on fundamental processes needed to establish and maintain the integrity of the specialized vascular beds in the kidney, cardiovascular system and eye. Translation of her group's findings regarding the vasculature reveals pathogenic mechanisms and new therapeutic targets for a number of diseases, including diabetic kidney and eye disease, nephrotic syndrome, microangiopathic thrombotic disorders and glaucoma.

Currently she is the Charles Horace Mayo professor of medicine at Northwestern University where she serves as the Chief of the Division of Nephrology & Hypertension and the Director of the Feinberg Cardiovascular and Renal Research Institute. Dr. Quaggin was elected to the American Society for Clinical Investigation in 2006, the Association of American Physicians in 2013, the National Academy of Medicine in 2019 and the National Academy of Inventors in 2021 and is President of the American Society of Nephrology and councilor of the Association of American Physicians.

(continued on page 12)

AHA Selects Seven Distinguished Scientists

(continued from page 11)

Ralph L. Sacco, MD, MS, FAHA

Professor, Chair of Neurology and Sr. Associate Dean for Clinical and Translational Research

University of Miami
Miami, FL



Ralph L. Sacco
MD, MS, FAHA

Dr. Sacco is the Chairman of Neurology, Olemberg Family Chair in Neurological Disorders, Miller Professor of Neurology, Public Health Sciences, Human Genetics, and Neurosurgery, Senior Associate Dean for Clinical and Translational Science, Executive Director of the Evelyn F. McKnight Brain Institute at the Miller School of Medicine, University of Miami, and Chief of the Neurology Service at Jackson Hospital System. A graduate of Cornell University in Bio-electrical Engineering and a cum laude graduate of Boston University School of Medicine, he also holds an MS in Epidemiology from Columbia University, Mailman School of Public Health. Dr. Sacco completed his neurology residency and postdoctoral training in Stroke and Epidemiology at Columbia Presbyterian in New York and was previously Professor of Neurology, Chief of Stroke and Critical Care Division and Associate Chairman at Columbia University. Dr. Sacco has published extensively with 761 articles (H-index of 160) in the areas of stroke prevention, treatment, epidemiology, risk factors, vascular cognitive impairment, brain health, human genetics, and stroke recurrence. He has been listed as a Highly Cited Researcher in the top 1% of cited

investigators annually since 2017 by the Clarivate Web of Science. He has been the recipient of numerous awards including, the American Heart Association Feinberg Award of Excellence in Clinical Stroke, the NINDS Javits Award in Neuroscience, and the AAN Wartenberg Lecture Award. He is the current Editor-in-Chief of the American Stroke Association journal, *Stroke*. He was the first neurologist to serve as the President of the American Heart Association (2010-11) and a past President of the American Academy of Neurology (2017-19). He is also an elected member of the National Academy of Medicine and the Association of American Physicians.

Kevin G. Volpp, MD, PhD, FAHA

Mark V. Pauly Presidential Distinguished Professor

Perelman School of Medicine and the Wharton School

Director, Penn Center for Health Incentives and Behavioral Economics
Wynnewood, PA

Dr. Volpp is the founding Director of the Penn Center for Health Incentives and Behavioral Economics (CHIBE) and the Mark V. Pauly President's Distinguished Professor at the Perelman School of Medicine and the Wharton School of the University of Pennsylvania. He has led CHIBE since its inception turning it into an entity which became 1 of 2 original NIH Centers on behavioral economics and health and that involves more than 90 faculty members and trainees.



Kevin G. Volpp
MD, PhD, FAHA

Dr. Volpp's work focuses on developing and testing innovative ways of applying insights from behavioral economics in improving patient health behavior and increasing health system value by influencing provider performance. Dr. Volpp has published more than 300 articles, book chapters, and commentaries. His work has served as the foundation for benefit design initiatives using financial incentives for smoking cessation used by many large employers including GE and CVS, a prescription refill synchronization program for Humana members, a redesign of a primary care physician payment for clinicians across Hawaii, a simple health insurance plan called "Humana Simplicity", and an enhanced active choice approach used among tens of millions of CVS members to increase the ease of receiving automated medication refills.

Dr. Volpp's work has been recognized by the Matilda White Riley Award by the Office of Social and Behavioral Science at NIH, the John Eisenberg Award from the Society of General Internal Medicine, the American College of Physicians Behavioral Medicine Award, and the Association for Clinical and Translational Science Distinguished Investigator Award for Clinical and Translational Science, and article-of-the-year awards by numerous professional societies. He has served as a mentor for dozens of individuals who have emerged as national leaders in academia, private, and public sector organizations. Volpp is an elected member of the National Academy of Medicine and an editorial board member of NEJM Catalyst. ●

Fellow of the American Heart Association (FAHA)

FAHA Application Cycle is Now Open!
Spring 2023 Deadline
January 24, 2023

<https://professional.heart.org/en/partners/fellow-of-aha>

2021-22 AHA Research Stats

The AHA remains the largest non-profit funder of cardiovascular and cerebrovascular research outside of the federal government.

- More than \$5 billion in research funding since 1949
- 1,440 active awards reflecting \$461.7 million in research commitments
- Types of research and percent of funding over the past five years:

BASIC 63.3%	CLINICAL 22.6%	POPULATION 14.1%
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Awardees named for \$20 million Strategically Focused Research Network (SFRN) on the Science of Diversity in Clinical Trials

The American Heart Association, with support from Pfizer and Gates Ventures, awarded five new grants to address the lack of diversity, equity, and inclusion in medical research clinical trials. The project titles, lead investigators and participating sites are listed below.

[Read more.](#)

Diversity & Inclusion in cardiovascular trials through Enrollment and education Resulting in Sustainable Equity: DIVERSE

Stanford University School of Medicine
Eldrin Lewis, MD, MPH, FAHA
Morehouse School of Medicine

Integrated Community Engaged, mHealth, and Data Science to Enhance Clinical Trial Diversity and Cardiometabolic Health (iDIVERSE)

University of California-Los Angeles
Tzung Hsiai, MD, PhD and Keith C. Norris, MD, PhD
University of Hawaii

Washington State University
Keawe Kaholokula, PhD

Behavioral Economics to Transform Trial Enrollment Representativeness (BETTER)

University of Pennsylvania
Scott Halpern, MD, PhD, MBE
Emory University

Grady Health Systems, Atlanta
MedStar Washington Hospital Center, Washington, DC

Alzheimer's Trial Recruitment Innovation Lab (ATRIL) Reducing Bottlenecks and Achieving Diversity

University of Southern California
Rema Raman, PhD
Howard University, Washington, DC

Training Researchers to Advance Inclusion Networks (TRAIN)

Stanford University School of Medicine
Hannah Valantine, MBBS, MD

Morehouse School of Medicine
Priscilla Pemu, MBBS, MSCR

\$20 Million Awarded to Health Equity Research Network (HERN) on Disparities in Maternal-Infant Health Outcomes

A new AHA Health Equity Research Network will focus on identifying causes and finding solutions to improve outcomes among people who are more likely to experience pregnancy complications due to poor heart health. The network is comprised of a coordinating center and five targeted research. The project titles, sites and lead investigators are listed below. [Read more.](#)

Coordinating Center: P3 (Pregnancy and Postpartum/Postnatal) EQUATE (Enhancing Access and QUALityTo Achieve Equitable Maternal and Infant Health)

University of Alabama at Birmingham
Alan T. Tita, MD, PhD, MPH

A community-engaged approach to understanding the impact of structural racism on maternal health equity

Northwestern University
Kiarri Kershaw, PhD, MPH, MS

Better birth outcomes and Experiences Through Technology, Education and Reporting (BETTER)

The Ohio State University
Ann Scheck McAlearney, ScD, MS

P3 Providing an Optimized and emPowered Pregnancy for You (POPPY)

University of Alabama at Birmingham
Rachel G. Sinkey, MD and
Wally Carlo, MD

Building Equitable Linkages with Interprofessional Education Valuing Everyone (BELIEVE)

University of North Carolina, Chapel Hill
Alison M. Stuebe, MD, MSc, and
Kimberly D. Harper, MSN, RN, MHA

North Carolina Agricultural and Technical State University
Kimberly C. Harper, PhD and Janiya Mitnaul Williams, MA, IBCLC, CLC

Implementation and Evaluation of a Perinatal CV Risk-Assessment Algorithm to Improve Maternal and Infant Health During Pregnancy, Peri & Postpartum: IMPACT P3

University of Pennsylvania
Lisa D. Levine, MD, MSCE and
Abike James, MD

New Resource Helps Applicants Seeking AHA Research Funding

The AHA offers webinars for anyone who wants to learn about AHA research funding opportunities. Next calls:

Thursday, October 27, 2022 -10 am CT
[Click to join 10/27/22](#)

Tuesday, January 17, 2023 -10 am CT
[Click to join 1/17/23](#)

Wednesday, April 5, 2023 -10 am CT
[Click to join 4/5/23](#)

(continued on page 14)



Application Resources

<https://professional.heart.org/en/research-programs/application-information#resources>

Internal and external tools: Fact sheets, articles, videos, online tools

- AHA Research Application & Award Process
- Step-by-step application instructions
- Lay summary
- Career development plan
- Biosketch
- Writing a proposal
- Peer Review & scoring



AHA Fall Research Funding Deadlines

Proposal deadlines have been announced for training and early career funding to commence in 2023. More award offerings with deadlines after January 1, 2023, will be announced. All research funding information can be found at professional.heart.org/FundingOpportunities.

Strategically Focused Research Network on Biologic Pathways of Chronic Psychosocial Stressors on Cardiovascular Health

Pre-proposals due Thursday, November 17, 2022, at 3 pm CT

This new Network will support at least three Centers whose collective efforts will lead to enhanced understanding of mechanisms underlying the impact of chronic psychosocial stress on cardiovascular health. Each center application will include three research projects from at least two science

disciplines. Two projects must be basic science focused.

AHA Institutional Research Enhancement Award (AIREA) —

Proposals due Wednesday, December 7, 2022

Stimulates research and exposes students to research opportunities at educational institutions that provide baccalaureate or advanced degrees related to scientific research training. Eligible institutions may not have been major recipients of NIH support. Awards provide funding for small-scale research projects related to cardiovascular diseases and brain health, enhancing the research environment at eligible institutions, and exposing students to research opportunities.

Career Development Award —

Proposals due Thursday, December 8, 2022

Supports highly promising healthcare and academic professionals in the early years of first professional appointment to assure the applicant's future success as a research scientist in the field of cardiovascular and/or cerebrovascular disease research.

Special Opportunity for Current AHA Research Grantees

Apply by February 1, 2023 for a **Research Supplement to Promote Diversity in Science** to sponsor a predoctoral or postdoctoral fellow from an underrepresented group in science.

Join one of these webinars for help with planning your application:

Thursday, Nov.17, 2022, 10 am CT

[Click to join 11/17/22](#)

Tuesday, Jan. 17, 2023, 11 am CT

[Click to join 1/17/23](#) ●

New Recommendations to Bridge Gaps in Awareness, Treatment of Cardiac Device Infections



patient groups and other system of care participants convened by the American Heart Association, a global force for healthier lives for all.

The summit report recommends:

- using a patient tool to track symptoms, including photography and device identification,
- defining a center of excellence for CIED care,
- developing a care pathway that includes patient transfer infrastructure for non-extracting centers and improving extraction safety, and
- raising awareness about CIED infections via a patient education toolkit with a simple checklist for device assessment, information for device makers on risks and key messages to combat misconceptions about the risks associated with extraction.

[Read the Report](#)

[LEARN MORE](#)

As many as 1 in 20 patients with a cardiac implantable electronic device (CIED) — such as a pacemaker or implantable defibrillator — develops an infection within three years of implantation, but many do not receive the most

up-to-date, evidence-based care. A new report from the American Heart Association's National CIED Infection Initiative aims to change that.

The report incorporates best practices from a summit of key opinion leaders, stakeholders, medical societies,

Welcome New 2022 American Heart Association Fellows

Election as a Fellow of the American Heart Association recognizes the recipient's scientific accomplishments, leadership and support of the AHA's mission. Earning the FAHA credential demonstrates to colleagues and patients that the recipient has been welcomed into one of the world's most eminent organizations of cardiovascular and stroke professionals. Please join us as we celebrate the accomplishments of the new 2022 Fellows of the American Heart Association (FAHA).

3CPR

Zhiyu Dai, PhD, FAHA

ATVB

Joseph E. Aslan, PhD, FAHA
Milka Koupenova, PhD, FAHA
Michael Lim, MD, FAHA
Atsuko Nakayama, MD, PhD, FAHA
Hisashi Sawada, MD, PhD, FAHA
Preetha Shridas, PhD, FAHA
Anna Wolska, PhD, MS, FAHA

BCVS

Priscila Yurica B Sato, PhD, FAHA
Danish H Sayed, MBBS, MSc, PhD, FAHA
Carmen Sucharov, PhD, FAHA
Chao-Yung Wang, MD, FAHA
Yajing Wang, MD, PhD, FAHA
Melanie Y White, PhD, BSc, FAHA

CVSN

Jessica K Zègre-Hemsey, PhD, MA, FAHA

CVSA

Jacob Raphael, MD, FAHA
Ibrahim Sultan, MD, FAHA

CLCD

Nitish Badhwar, MBBS, FAHA
Doreen DeFaria Yeh, MD, FAHA
AKM Monwarul Islam, MD, FAHA
Steven Lloyd, MD, PhD, FAHA
Palak Shah, MD, MS, FAHA
Viviany R Taqueti, MD, MPH, FAHA
Eric H Yang, MD, FAHA
Armin Zadeh, MD, PhD, MPH, FAHA

EPI

Nrupen Bhavsar, PhD, MPH, FAHA
Priya Palta, PhD, MHS, FAHA
Wendy Post, MD, MS, FAHA

GPM

Pradeep Natarajan, MD, MSc, FAHA

QCOR

Prateeti P Khazanie, MD, MPH, FAHA

STROKE

Francene A Gayle, MBBS, DM, FAHA
Nicole R. Gonzales, MD, FAHA
Nishant K Mishra, MD, PhD, FAHA
Sharon Poisson, MD, MAS, FAHA
Jennifer Rasmussen-Winkler, MD, FAHA
Mohammad Shafie, MD, PhD, FAHA
Hashem Shaltoni, MD, FAHA
Ann M Stowe, PhD, FAHA
Arturo Tamayo, MD, MSc, FAHA
Zoran Vujkovic, MD, PhD, FAHA
Jiangbing Zhou, PhD, FAHA

Young Hearts

Laura Olivieri, MD, FAHA

AHA Job Resources Tool — Access Steps

The AHA is proud of all we offer to our professional members and plans to be your go-to resource for your professional needs throughout your career. Do you take advantage of all the benefits that professional membership has to offer? Getting the most out of your membership starts with keeping your Professional Heart Daily (PHD) profile up to date.

One essential tool is the 'Jobs and Career Resources' tab found at the top of the page. This is where employers can post jobs that will lead them to top talent. As an employer, you can utilize the Job Flash™ email to reach 48,000+ cardiovascular professionals. Another excellent feature for employers is the Resume Bank which allows you to search, find, and contact candidates. You also have the option to save top candidate profiles and create email templates to help simplify the hiring process.


The Jobs and Career Resources tab also has a job board where job seekers can view and explore various career opportunities. Posted careers are searchable by title, keyword,

company, date posted, and location. If you are short on time but ready to make a career move, you can upload your resume or CV and let employers come to you. There is also a treasure trove of tools if you need assistance with any part of the job searching process. Under the Career Planning tab of the Job Seeker dropdown, you will find advice, coaching, and insights, which includes tips on

improving your interviewing skills, networking advice, and even a complimentary resume review.

Whether you are an employer or a job seeker, don't miss out on the resources offered to help you stay a front-runner in your field.

Visit Job Resources Now



AHA Job Resources Tool - Access Steps

The AHA Job Resources Tool allows members and non-members to apply for or post a job directly on this tool. Members will receive a discount to the posting position fee and there are a range of posting options available. Members also will have access to first notification of position postings.

For Job Seekers:

1. Go to <https://professionaljobs.heart.org>.
2. Click Sign In or Create Account.
3. Click on Job Seeker and it will take you to the page to sign in or create an account. If you have a Professional Heart account, you can just sign in.
4. It then takes you directly to your My Account page where you can adjust settings, manage resumes, set job alerts, look at messages, and review jobs applied for. The top navigation will allow you to search jobs and perform additional actions similar to other job boards.

For Employers Wanting to Post a Position:

1. Go to <https://professionaljobs.heart.org>.
2. Click Sign In or Create Account.
3. Click on Employer and it will take you to the page to sign in or create an account. If you have a Professional Heart account, you can just sign in.
4. It then takes you directly to your My Account page where you will see a series of quick links.
5. Click on Post a Job and it will take you to a page that shows you Member/Non-Member rate options for posting a job on this board and adding enhancements like email, priority placement in search results, etc.
6. To complete the posting, fill out the form at the bottom of that page. The directions are pretty straightforward.
7. The top navigation will allow you to view the resume bank, manage your postings, and review candidates, as well as providing additional options similar to other job boards.

New AHA Digital Platform Offers Professional Education to Advance Provider Careers, Help Improve Patient Outcomes

Intelligo Professional Education Hub™ complements the continuing educational catalog on Lifelong Learning



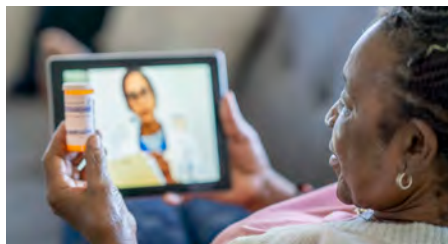
Today's healthcare industry moves faster than ever, meaning professionals need an educational resource that is as trustworthy as it is accessible. To help healthcare professionals stay up to date with important training to advance their skills, the American Heart Association launched the Intelligo Professional Education Hub™.

Intelligo is a new, science-based digital learning platform for clinicians, health professionals, and scientists. Through Lifelong Learning, the AHA has long offered trusted, evidence-based resources for every step of a healthcare professional's career. Intelligo complements the Lifelong Learning continuing education catalog.

In addition to the existing 500+ educational programs on Lifelong Learning, Intelligo features free, paid subscription, and premium content in the following portfolios:

- **Stroke:** Our comprehensive stroke curriculum enables healthcare professionals to maintain competency and learn the latest science to improve care and outcomes for stroke patients.

- **Telehealth:** Our new premium eLearning courses and certificate programs are designed to prepare healthcare professionals to treat patients remotely and provide best practices for telemedicine.
- **Health Equity:** Our training prepares healthcare professionals to identify health disparities and integrate solutions that build health equity into clinical practice to better serve communities and patients.



Telehealth Training to Increase Access to Healthcare

With its expanding footprint in the telehealth space, the AHA is applying its successful educational model to the growing area of telehealth to meet healthcare professionals' needs and ensure they're prepared for remote healthcare delivery.

The telehealth portfolio features three evidence-based, premium eLearning courses with CE credits developed by the American Board of Telehealth, Powered by the American Heart Association. Additionally, the portfolio includes 12 micro-module courses included as part of the Intelligo portfolio subscription package.

The platform's telehealth education also provides an opportunity for universities and colleges to equip future healthcare professionals with skills and knowledge to succeed with virtual care.

Institutions with medical programs can add Intelligo's telehealth courses, which are based in real-world experience, to their curriculum to provide their students with the opportunity to learn best practices for implementing and using telehealth.

Coming in early 2023, AHA will offer individual telehealth provider certification to accompany its professional education learning courses.

Future Intelligo Expansion and Features

The AHA will broaden Intelligo's course offerings to international audiences with future developments on the hub expected in 2023. Additional portfolios will also launch.

Intelligo will evolve to a centralized learning platform with the technological capacity to house all professional education resources, creating a seamless experience for healthcare professionals.

The AHA invites Scientific Sessions attendees to learn more about our journey to build our new platform by visiting the Intelligo area in HeartQuarters during Sessions. AHA staff will be onsite to address your questions about Intelligo as well as its telehealth offering. Explore Intelligo today at intelligohub.org. ●



American Heart Association.
Intelligo
Professional Education Hub™

Education at the of Health Care

Quality education you need
for the patients you serve



LEARN MORE

Is it time to renew your Professional Membership?

join.heart.org

Gold Standard Board Awards Honor Volunteer Leaders

Now in its tenth year, the Gold Standard Board program was developed to help build strong boards to drive health, revenue and volunteerism success in markets nationwide. It has helped to create a more dynamic, effective volunteer-staff partnership, enhance volunteer engagement, generate more resources and, most importantly, drive progress toward the American Heart Association's 2024 Impact Goal and achieving equitable health for all. In the first year of the program, less than 30% of local boards received any level of recognition. Now, thanks to the commitment of volunteer and staff leaders across the nation, 76% of local boards have earned recognition as a Gold, Silver or Bronze level board.

This recognition is achieved as a result of countless individuals in each market

working collectively to support the Association's mission, and although only the volunteer market leads are named below, it requires a true team effort to accomplish these results. This collaborative spirit represents the heart of the GSB program. The Association is incredibly proud of the volunteers and staff who worked diligently to achieve these awards for the 2021-2022 fiscal year.

Here are some highlights of this year's results:

- 76 of 100 local boards achieved best practices and obtained recognition: 31 Gold, 18 Silver and 27 Bronze recognized boards.
- 92 boards are supporting the health of our communities by committing to one or more of the Association's community impact priorities.

- Members of these boards are engaged in cultivating organizational relationships, participating as part of related Association or community coalitions and/or actively supporting community health strategies
- 89 boards are key contributors to local, state and federal advocacy campaigns and participated in at least 10 high-priority advocacy actions.
- 80 boards supported issue-based fundraising campaigns by helping to prospect and secure at least five issue-led gifts.
- 432 board members were part of one or both of the Association's giving societies (Cor Vitae Society and the Paul Dudley White Legacy Society). They helped raise more than \$6.2 million in revenue, an increase of nearly \$1 million over last year.

Gold Award Winners

Board	Chair	President
Baton Rouge (Louisiana)	Michael Jackson	Kristen Gradney
Bay Area Division (California)	Mary A. Francis	Kenneth Mahaffey, MD
Charleston (South Carolina)	Barbara Melvin	Gayenell Magwood, RN, PhD
Chattanooga (Tennessee)	Glenn Morris	Chris LeSar, MD, FACS, RVT
Chicago (Illinois)	Sharon Langshur	Andrew Rauh, MD FACC
Cleveland (Ohio)	Nick Liberatore	Kelly Hancock, DNP, RN
Fayetteville (Arkansas)	Lisa Christianson	Charlotte Rankin, BSN, MHA, RN
Greater Cincinnati (Ohio)	John Mongelluzzo	Brett Kissela
Greater Washington (D.C.) Region	Owen Billman	Federico Asch, M.D., FACC, FASE
Hawaii Division	Jason Fujita	Michael Lui, MD
Indianapolis (Indiana)	Monte Curnutt	Sandeep Dube
Jacksonville (Florida)	Scott Wooten	Ricardo Hanel, MD
Kansas City (Kansas)	Tom O'Grady	Rhea Pimentel
Kentuckiana (Louisville, Kentucky)	Sandra Guerra	Clint Kaho
Knoxville (Tennessee)	Ken Parent	Brian Wiseman, MD
Las Vegas Division (Nevada)	Claude Wise	Randall Feikes, MD
Lexington (Kentucky)	John Collier	Mary Sheppard
Los Angeles County Division (California)	Paul Craig, RN, JD	Richard Shemin, MD, FACS, MAMSE
Metro Jackson (Mississippi)	Barney Daly	Michael McMullan, MD
Midlands (South Carolina)	Stephanie Simmonds, RNMS	Norma Khoury, MD
Mississippi Gulf Coast	Dorothy Shaw	Antoine Rizk, MD, FACC, FSCAI
Northeast Ohio	Sandra Reid	David Custodio
Orlando (Florida)	Jayne Willis, DNP	Ankur Garg, MD
Philadelphia (Pennsylvania)	Dixieanne James	Deon Vigilance, MD
Phoenix Division (Arizona)	Meghan Shapiro	Katherine Kenny, DNP, RN, ANP-BC, FAANP, FAAN
Puget Sound Division (Washington)	Troy Stedman	Ruchi Kapoor, MD, PhD
Richmond (Virginia)	Gary Thomson	Phillip Duncan, MD, FACC
Sacramento Division (California)	Chris Hoffman	Peter Miles, MD, FACC
Southwest Florida	Stephanie Wardein	Jonathan Kling
St. Louis (Missouri)	Krista Bauer	Denise Hooks-Anderson
Tucson Division (Arizona)	Alex Levin	Joseph Alpert, MD

Silver Award Winners

Board	Chair	President
Albany (New York)	Jennifer Corcoran Conway	Alan Boulos, MD
Albuquerque (New Mexico)	Robert Taylor, MD	Andrew Harrell, MD, DiMM, FAEMS
Corpus Christi (Texas)	Karen Urban	Osbert Blow, MD, PhD, FACS
Delaware	E. Thomas Harvey, III	Kimberly Holmes, CNS
Detroit (Michigan)	Sharon Gipson	Phillip Levy
Madison (Wisconsin)	Thomas Shorter	Craig Sommers
Maine	Erin Austin	Brandei Wingard, MD
Nashville (Tennessee)	Ken Misch	Daniel Muñoz, MD
New York City (New York)	David Chubak	Rafael Ortiz, MD
NW Indiana	David Wilkinson	Marsha King
Pittsburgh (Pennsylvania)	Kenyokee Crowell	Leeanna McKibben, MSN, RN, CENP
San Antonio (Texas)	Ed Belmares	Jorge Alvarez, MD
San Diego Division (California)	Yameeka J. Williams, FACHE	Robert Stein, MD, FACC, FAHA
Toledo (Ohio)	Andrea Gurcsik	Jill Trosin
Utah Division	Greg Summerhays	Daniel Cox, DO, FACC
Utica (New York)	Steven Gassner	Jonathan Henderson, MD
West Virginia	Barbara Wessels	Lisa Hamrick
Westchester (New York)	Howard Klein, CPA, MS	Damara Gutnick, MD

Bronze Award Winners

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Des Moines (Iowa)	Robert Gallegos	David Stark
Grand Rapids (Michigan)	Kent Riddle	Steven Polega
Greater Boston (Massachusetts)	Mark Kane	Emelia Benjamin, MD, ScM, FACC, FAHA
Greater Capital Region (Pennsylvania)	Natalie Wech / Josh Smeltzer	Lawrence Sinoway, MD
Hampton Roads (Virginia)	Ethlyn McQueen-Gibson, DNP, MSN, RN-BC	Thomas Klevan, MD
Little Rock (Arkansas)	Scot Davis	Tom Conley, MD
Long Island (New York)	Ellen Weber	Rajiv Jauhar, MD, FACC, FSCAI
Memphis (Tennessee)	Monica Wharton	Steven Gubin, MD
Miami/Ft Lauderdale (Florida)	Jose Romano	Isis Zambrana
Milwaukee (Wisconsin)	Mary Starr	Nicole Lohr, MD
Palm Beach County (Florida)	Melissa Mickle	Anita Wilborn, MD
Rhode Island	Melissa Cummings	Robert Schwengel, MD
Syracuse (New York)	Duane Wiedor	Peggy Thomas, MSN, RN
Tampa Bay (Florida)	Kye Mitchell	Lucila Ramiro, MD, FACP, MBA
Tarrant County (Texas)	Michael Cawood	Justin Martin
Triangle Metro (North Carolina)	Terri L. Phillips, MD	Manesh R. Patel, MD
Twin Cities (Minnesota)	Phil Ebeling	Peter Eckman
Upstate (South Carolina)	Matt Puckett	Chandra Mansell

Research \$5 Billion Milestone Met



The American Heart Association has invested \$5 billion in research, an unprecedented commitment to promoting longer, healthier lives for all that began in 1949. The results of the milestone funding, reached July 1, include major advances in cardiovascular and brain science that have improved the lives of millions of people.

AHA funding has:

- Bolstered the careers of 14 Nobel Prize winners.
- Helped to develop important medical

technology (the pacemaker, defibrillator and MRI).

- Pioneered drugs such as diuretics to control blood pressure and cholestyramine to lower cholesterol.
- Affirmed and refined CPR techniques.

From 2009 to 2019, the annual death rate attributable to coronary heart disease in the U.S. declined 25.2%. ●

How the AHA is Driving Change

The AHA is putting its money where its mission is and investing millions of dollars to deconstruct barriers to equitable health in communities around the country. In short, we are providing funding to drive change. Specifically, we're making investments to address the barriers to health

equity through our Social Impact Funds family, our community issues campaigns including Voices for Healthy Kids, and other community initiatives. The money we raise and invest goes to organizations or individuals working to improve health in their own communities — which

they understand best. So far we've raised and invested more than \$32 million through the Social Impact Funds family. This has helped drive \$116 million in new revenue and investments — a 3.6x social impact return. ●



Social Impact Funds Portfolio Overview

Cumulative Social Impact Funding To Date

98

Social Enterprises Funded

\$32M

Raised from donors

\$116M+

New revenue, investments to organizations

3.6x social impact return

- 92% of current portfolio led by people of color or women
- 100% of portfolio operates within under-resourced communities
- For 75% of current portfolio, AHA funding is the first or largest commitment from an institutional investor
- Funds can operate in a small, rural, medium or large market
- More than 80% of donor funds go directly into the community and the social enterprises

Current Social Impact Fund Markets



Los Angeles, San Francisco, Oakland, San Jose, Seattle, Chicago, Detroit, Flint, Atlanta, NYC, Washington, DC, Boston, Reading, PA, Philadelphia, and the Twin Cities.

- Utah launched April 2022
- West Virginia launching October 2022



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3CPR's Relentless Battle Against COVID-19



TWe are excited about Scientific Sessions 2022, which will be held virtually and in person in Chicago on Nov. 5-7.

Despite the challenges brought by the COVID-19 pandemic upon the American Heart Association and the Council on Cardiopulmonary, Critical Care, Perioperative and Resuscitation (3CPR), Scientific Sessions (scientificsessions.org) will feature the spectrum of exciting translational cardiopulmonary programming ranging from cutting-edge basic science to breaking updates from clinical trials. The combined in-person/virtual format will make the science accessible to everyone worldwide.

In addition to programming at Scientific Sessions, the resuscitation community will convene in Chicago for a return to in-person presentations at the Resuscitation Science Symposium Nov. 4-6. We welcome back our national and international colleagues to this state-of-the-art conference with topics ranging from ethical challenges in resuscitation science to the future of defibrillation. The two-day program will be held off site from Scientific Sessions at Hyatt Regency Chicago, so be certain to plan your schedules accordingly to maximize your experience.

The event will kick off on Friday night with the Young Investigator Dinner, where early career investigators will be awarded for their winning abstract submissions.

The array of sessions and ReSS programming will include oral invited sessions from world-renowned scientists and clinicians; a talented pool of early career investigators who will share their science in virtual oral and poster formats (in-person poster format at ReSS only); updates from clinical experts on state-of-the-art cardiac intensive care practice; and a diverse panel of established investigators to provide high-level feedback and career guidance and

mentorship for early investigators in diverse academic research tracks.

The 2022 3CPR program at Sessions will feature strong cardiopulmonary basic and translational science. This includes a session on “Novel Omics-derived insights into the pathophysiology of PAH,” which will highlight recent approaches using transcriptomics, proteomics and metabolomics to understand the pathophysiology of pulmonary arterial hypertension (PAH). These include translational studies in which omics approaches can inform precision medicine-based care to basic studies in which omics approaches have provided valuable insights into PAH pathobiology.

Another session, “Beyond the Genetic Code: The Role of Epigenetics in Pulmonary Hypertension (PH),” will highlight cutting-edge studies that have identified important roles for epigenetic regulation in PH. These include studies that have demonstrated roles for histone acetylation and microRNAs in PAH pathobiology.

Numerous sessions are sure to interest clinicians. The 3CPR program will cover promising novel therapeutic targets for pulmonary vascular disease and right ventricular dysfunction from pre-clinical proof of concept to late-stage clinical development, as well as new approaches to phenotyping and prognosis for the diverse conditions described by PAH, PH-HFpEF and PH-ILD. Innovative nonpharmacological approaches to treating PAH are highlighted in a session entitled, “Beyond the Pill: Nonpharmacological Approaches in PAH.” These include devices, such as mechanical support and denervation, and novel app-based technologies.

An exciting Pro-Con debate covering “Controversies in Right Ventricular (RV) Dysfunction and Management” is sure to engage a wide spectrum of clinicians, ranging from pulmonologists and cardiologists who manage PAH to critical care clinicians who manage right heart failure in the intensive care unit. Strategies that will be discussed include the management of inotropes and mechanical support.

The popular “Clinical Trials in Pulmonary Hypertension: Novel Biomarkers and

Endpoints” returns this year with breaking updates from ongoing and future trials of PAH therapies using innovative trial strategies.

All of the sessions will be sure to be of interest to clinicians who manage PH and right heart failure.

In the past few years, the field of critical care cardiology has evolved rapidly. As that is a key component of cardiopulmonary, critical care, perioperative and resuscitation, the 2022 3CPR program will also offer innovative programming for established and early-career cardiac intensive care clinicians and scientists.

Highlights will include an overview session entitled, “Evolution of Critical Care Cardiology and the State-of-the-Art Contemporary Cardiac Intensive Care Unit,” which will describe the history behind the development of the modern CICU and the development of evidence-based cardiac critical care therapies.

Two other sessions bridge cardiopulmonary and critical care. “Pulmonary Vascular Emergencies in the CICU” will discuss specific pulmonary vascular complications that occur in the CICU, such as massive pulmonary embolism and PAH crisis. “Clinical and Surgical Management of End-Stage PAH” will offer updated guidance on treating the most severely affected patients with PAH with interventional, pharmacologic, mechanical support and transplantation interventions.

A session on “Myocardial Injury after Noncardiac Surgery” will discuss the important prognostic and clinical management implications of this increasingly recognized clinical syndrome of elevated troponins in the setting of noncardiac surgery. These clinically relevant sessions should be of interest to a broad audience.

3CPR will have sessions focused on junior and mid-career investigators. For those attending in person, a Speed-Mentoring session will provide an opportunity to meet with established mentors in small break-out groups to discuss challenges and solutions for establishing a robust translational research program and maximizing competitiveness for funding. This is an outstanding chance to glean the wisdom and practical knowledge

from established investigators on their professional development. Additionally, the 3CPR will host its annual Cournand and Comroe Early Career Investigator Award competition, featuring the top submissions from a traditionally strong pool of scientists.

The 2022 ReSS program will also feature basic science and translational work coupled with clinical and community outreach programming. Plenary sessions will include four speakers addressing novel findings from drone delivery of automated external defibrillators to the use of artificial intelligence in neuro-prognostic modeling.

Annual favorite sessions, including the Pediatric and Adult Year in Review, will be presented as will the "Best of the Best" oral abstracts and late-breaking clinical trial results.

This year, the Max Harry Weil Award will be presented at ReSS and the Dickinson Richards Memorial Lecture will feature a resuscitation scientist at Scientific Sessions.

The leadership of 3CPR believes that the innovative and provocative slate of topics to be presented at both Scientific Sessions and the Resuscitation Science Symposium will be of interest to a broad audience from basic and translational scientists to clinicians.

We are excited to welcome all of you in person and virtually (ReSS is in-person only) as we ensure that we continue to maximize scientific advancement in these times when new scientific knowledge is most desperately needed, and in which collaboration and networking will continue to help bridge these gaps to improve our understanding and treatment of these important and unmet clinical needs.

Remember, 3CPR is your home for cardiopulmonary, critical care, perioperative and resuscitation science. We look forward to welcoming you back and reconnecting at our 3CPR Council Business Meeting and Networking Event on Saturday, Nov. 5 at 7:45 p.m.!

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Your next cardiovascular career opportunity is right at your fingertips.



Search and apply to jobs in all aspects of the cardiology field at organizations that value your credentials.



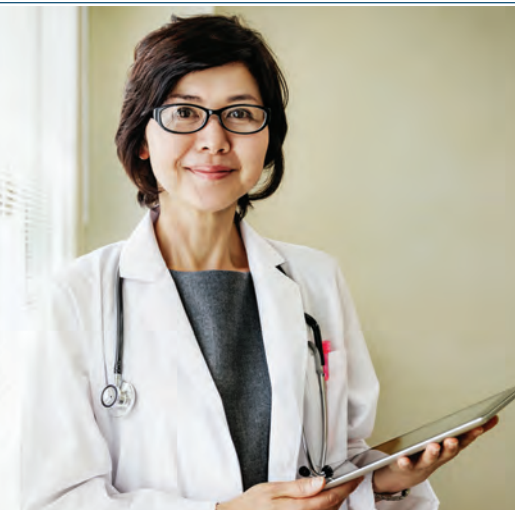
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Cardiovascular Disease and Risk Management



It is with great pleasure and gratitude that I write my first Connecting with the Chair column.

All of us on the Council on Arteriosclerosis, Thrombosis and Vascular Biology have benefited from the tremendous leadership Kerry-Anne Rye, PhD, FAHA, provided during the past two unprecedented years — so let's all take a moment to thank her. Our council is as strong as ever, with many of the initiatives, including our drive to increase council membership and diversity, moving ahead with great momentum.

Thanks also to Kiran Musunuru — senior consulting editor and former editor-in-chief of *Circulation: Genomic and Precision Medicine* and recipient of the 2021 AHA Joseph A. Vita Award — for accepting the invitation to serve as vice-chair. We are very much looking forward to working together to continue to increase the value the council brings to all our members.

Reflecting on the remarkable leadership of another senior council member, Alan Daugherty, PhD, FAHA, has tirelessly stewarded the editorial board of our council's namesake journal for 10 years. With persistence and innovation, Alan and his outstanding team have enhanced the profile of ATVB while maintaining its long history of publishing the latest state-of-the-art research in arteriosclerosis, thrombosis and vascular biology.

We're also excited that Anne-Marie Schmidt, MD, FAHA, has accepted the role of editor-in-chief. She'll undoubtedly maintain the excellence of the journal. You can read more about her vision for the journal and the team she has assembled here.

While the COVID-19 pandemic is still evolving, we have all learned to adjust our lives both professionally and personally. Many of us embraced the renewed opportunities to interact with

colleagues at our first face-to-face council meeting last May in Seattle. Vascular Discovery 2022 was ably led by Katey Rayner, PhD, (chair) and Kathleen Martin, PhD, (vice-chair) and executed by AHA staff including our long-time friend, Julie Green. It was gratifying to see all the exciting science presented and, maybe more so, seeing all the intimate discussions that will undoubtedly lead to future collaborations.

While Zoom, Teams, BlueJeans, Skype, etc. have given us a lifeline, there's nothing like personal interaction to inspire and motivate. We are very much looking forward to the next iteration of the meeting that Katey and Kathleen will organize for 2023 in Boston!

Before that, though, many of us will be able to see each other at the AHA Scientific Sessions Nov. 5-7 in Chicago. The ATVB Council Program Committee, chaired by Yabing Chen, PhD, MBA, FAHA, has put together a comprehensive slate of presentations that will appeal to the broad interests of all our ATVB members, particularly our early career scientists.

In addition to the ATVB award lectures, named for Russell Ross, Sol Sherry and George Duff, this year's ATVB sessions will be highlighted by a Main Event basic science session featuring the best science published in the ATVB journal on the Emerging Genomic Based Therapies on Cardiovascular Disease.

For our early career investigators, we will again have the Elaine Raine Young Investigator Award competition, as well as two additional sessions to promote science of early career investigators and their career advancement. A designated session will highlight the achievements of our young scientists, in honor of the late Dr. Shoba Ghosh, a dedicated ATVB member, great mentor and advocate for the AHA.

Eight Cardiovascular Symposium sessions and two Frontiers in Science sessions will include hot topics on cutting-edge scientific discoveries in the areas of arteriosclerosis, thrombosis and vascular biology.

Young scientists will also have ample opportunities to present their research via abstract oral and poster sessions, rapid fire and modified poster sessions.

You will not want to miss the Trending Topics session capturing the best science presented in this year's AHA Scientific Sessions. With these basic, clinical and population science sessions presented by investigators representing diverse ethnic, demographic and career backgrounds, we hope to capture the best science in our community, as well as create great opportunities for networking, mentoring and career development.

To re-emphasize, ATVB is your council. As such, we want to hear from you about what you value from ATVB and where we should invest our energies to be more effective.

We have always valued and encouraged active participation from early career scientists. In addition, we have double-downed on our commitment to enhance our membership diversity, including increasing the number of women, people in underrepresented racial and ethnic groups (UREGs) and international members in leadership roles. Kiran and I would welcome anyone interested in participating on our many subcommittees to reach out to us. We certainly need and appreciate your participation.

Stay safe, stay well and be kind to one another. Thanks for your continued commitment to the Council on Arteriosclerosis, Thrombosis and Vascular Biology. ■



Award recipient Cadence Lee, BA, ScM



Award recipient Hong Wang, MD, PhD, EMBA, FAHA



Award recipient Gabrielle Fredman, PhD



Award recipient Oren Rom, PhD, RD

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Vascular Discovery:
From Genes to Medicine 2023

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**TAKE STEPS NOW TO BE RECOGNIZED AT
VASCULAR DISCOVERY: FROM GENES TO MEDICINE
SCIENTIFIC SESSIONS 2023**

May 10 – 11 in Boston, Massachusetts

Hosted by the councils on Arteriosclerosis, Thrombosis, and Vascular Biology (ATVB), Peripheral Vascular Disease (PVD), and Genomic and Precision Medicine (GPM).



Daisy Sahoo, PhD, FAHA received the 2022 ATVB Women's Leadership Committee Award for Outstanding Mentorship of Women.



Pradeep Natarajan, MD, MSc, presented the Jeffrey M. Hoeg Arteriosclerosis, Thrombosis, and Vascular Biology Award for Basic Science and Clinical Research lecture, *Genomic Aging and Cardiovascular Disease*.

MAKE STRIDES IN YOUR CAREER

These councils offer the following career-enhancing award opportunities that recognize and reward member achievements through financial rewards, special presentations, and networking with key leaders.

[ATVB Diversity and Inclusion Leadership Recognition Award](#)

[Jeffrey M. Hoeg Arteriosclerosis, Thrombosis, and Vascular Biology Award for Basic Science and Clinical Research](#)

[The ATVB Women's Leadership Committee Award for Outstanding Mentorship of Women](#)

Apply* or make a nomination from October 26, 2022- January 22, 2023.

*Please visit [Vascular Discovery: From Genes to Medicine Scientific Sessions](#) for all early career award opportunities. Application or nomination instructions may be found on individual award pages.

Helping Members Progress Through Webinars



Recently, Council on Clinical Cardiology has been working on new webinars to help its council members with various obstacles they may face in their careers. For example, in May of this year, The Fellow-In-Training and Early Career Committee presented a webinar titled, *Self Advocacy in the Era of COVID*. Because the COVID pandemic negatively impacted the launch and progression of many medical careers, this webinar aimed to help trainees learn to advocate for themselves and navigate the job market to advance their careers. Dr. Charles Lowenstein and Dr. Ann Marie Navar were featured as guest speakers. They shared their insight and wisdom on the topic.

Last month, on September 28th, the Women in Cardiology Committee hosted the AHA/ACC Women in Cardiology Webinar on Harassment and Bullying. The objective of this webinar was to teach attendees to recognize the evidence and necessity for a formalized intentional approach to fostering an environment and culture of dignity and respect. Attendees will also understand how to address and approach situations of harassment and bullying that they may experience or witness.

Don't miss other exciting webinars from the Council on Clinical Cardiology and all the Scientific Councils! Click [here](#) to learn more. ■



Comix from the Heart, Vol. 01
Artist: Vince Baarson
Storyteller: Siu-Hin Wan

Want to get involved with the AHA?

Help us identify opportunities for you by telling us your volunteer interests at professional.heart.org/volunteerform

Fourth Asian Cardiovascular Symposium



CONNECTING
WITH THE
CHAIR

Elizabeth McNally
MD, PhD, FAHA

Echoing the AHA mission and efforts of the Council on Basic Cardiovascular Sciences to increase international participants, members and networking, the Asian Cardiovascular Symposium (ACS) was initiated in 2019 as part of the BCVS Scientific Sessions in Boston.

The significant joint initiative includes four Asian societies: Academy of Cardiovascular Research Excellence (ACRE); Japanese Cardiovascular Group (JCG); Korean Cardiovascular Society (KCS); and Society for South Asian Heart Research (SAHR).

This model of pre-conferencing occurs a day before the BCVS Scientific Sessions each year. Due to COVID-19, the second (2020) and the third (2021) ACS were held online.

The fourth ACS was held on July 24 at the Hilton Hotel in Chicago. Despite a resurgence of COVID-19, numerous people came from overseas to participate in the event. About 200 members from the four societies participated this year, accounting for about 30% of total participation.

Each society conducted oral presentations and competitions, followed by joint poster presentations and a dinner that ACRE hosted and featured keynote speaker Joseph Wu, MD, PhD, FAHA, AHA president-elect.

The event also included a ceremony awarding young investigators for their oral and poster presentations. This highlight was vital in promoting the research efforts of early career researchers, including graduate students, postdoctoral fellows and junior scientists.

BCVS' Got Talent Show: Representative of work-life balance, scientists have talents and interests other than research and data analysis. To follow AHA guidelines on improving the quality of life, we introduced the BCVS'

Got Talent Show this year as part of the ACS. Several scientists performed on the stage, including playing the violin, singing and dancing. ■



Recognizing keynote speaker, Joseph Wu, MD, PhD, FAHA, by Drs. Jiang Chang, Young-Sup Soon and Sakthivel Sadayappan



BCVS' Got Talent Show by BCVS members

AHA|ASA

2023 Scientific Event Schedule



International Stroke Conference (ISC)

February 8 – 10, 2023, Dallas, TX



Epidemiology and Prevention | Lifestyle and Cardiometabolic Health

February 28 – March 3, 2023, Boston, MA



Vascular Discovery

May 10 – 12, 2023, Boston, MA



Basic Cardiovascular Sciences (BCVS) Scientific Sessions

July 31 – August 3, 2023, Boston, MA



Hypertension Scientific Sessions

September 7 – 10, 2023, Boston, MA



Resuscitation Science Symposium (ReSS)

November 11 – 12, 2023, Philadelphia, PA



Scientific Sessions

November 11 – 13, 2023, Philadelphia, PA

LEARN MORE

Council Invites New Initiatives, Goals



Welcome to the fall Connections update on the Council on Cardiovascular Radiology and Intervention.

Thank you, Melvin Templeton, AHA council administrator, and the CVRI Council leadership, including Laura Findeiss, MD, vice chair; Sanjay Misra, MD, FAHA, immediate past chair; and the committee chairs and members.

If you'd like to become more active in the council, please contact Melvin Templeton at melvin.templeton@heart.org.

I'm excited to note that the CVRI Council has kicked off a series of webinars on hot topics. The first session, which focused on telehealth and its role in rural health, was organized by Misra and Edwin Takahashi, MD. Panelists included Lee Schwamm, MD, FAHA; Olamide Alabi,

MD; and Eiman Jahangir, MD, MPH, FAHA. The AHA will make the recording available for those who missed the event.

This fall, we will host a webinar on how to become involved in the AHA and how the organization can help advance your career. Details are forthcoming.

If you have ideas for a webinar or podcast, please reach out to Melvin Templeton at melvin.templeton@heart.org.

The AHA Scientific Sessions will be held in person Nov. 5-7 in Chicago. The planning committee and the Imaging Track lead, Garth Beache, MD, have put together an enticing program. You will have the opportunity to learn about cutting-edge science and advances in clinical practice.

Sessions is an especially good event for early and mid-career faculty to advance their careers. The council anticipates a large turnout in Chicago after holding virtual meetings in 2020 and 2021. So come and connect and network with colleagues from around the world, and encourage your associates to attend. I hope to see you there!

Highlights at Sessions for the Imaging and Nuclear Medicine community include:

Charles T. Dotter Memorial Lecture
Heart Disease in Women: Advances in Imaging with CMR
Karen Ordovas, MD, MAS, FAHA

Main Event
Not Your Father's Heart Disease

Cardiovascular Seminars
Cardio-oncology
Peripheral Arterial Disease
Nano-imaging
Amyloid
Valvular Disease
Chest Pain Guidelines: AI

Two Early Career Sessions
Melvin Judkins Session
Early Career Investigators
Award Competition

Last year's Melvin Judkins Competition winner:
Matthew K. Burrage, MBBS

Last year's finalists:
Valery L. Turner, MD
William Watson, MBChir
Hashrul N. Rashid, MBBS (Hons), MRCP (UK)
Amrit Chowdhary, MBBS, MSc, MRCP ■

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to help you meet
Get with the Guidelines[®]
Achievement, Quality, and
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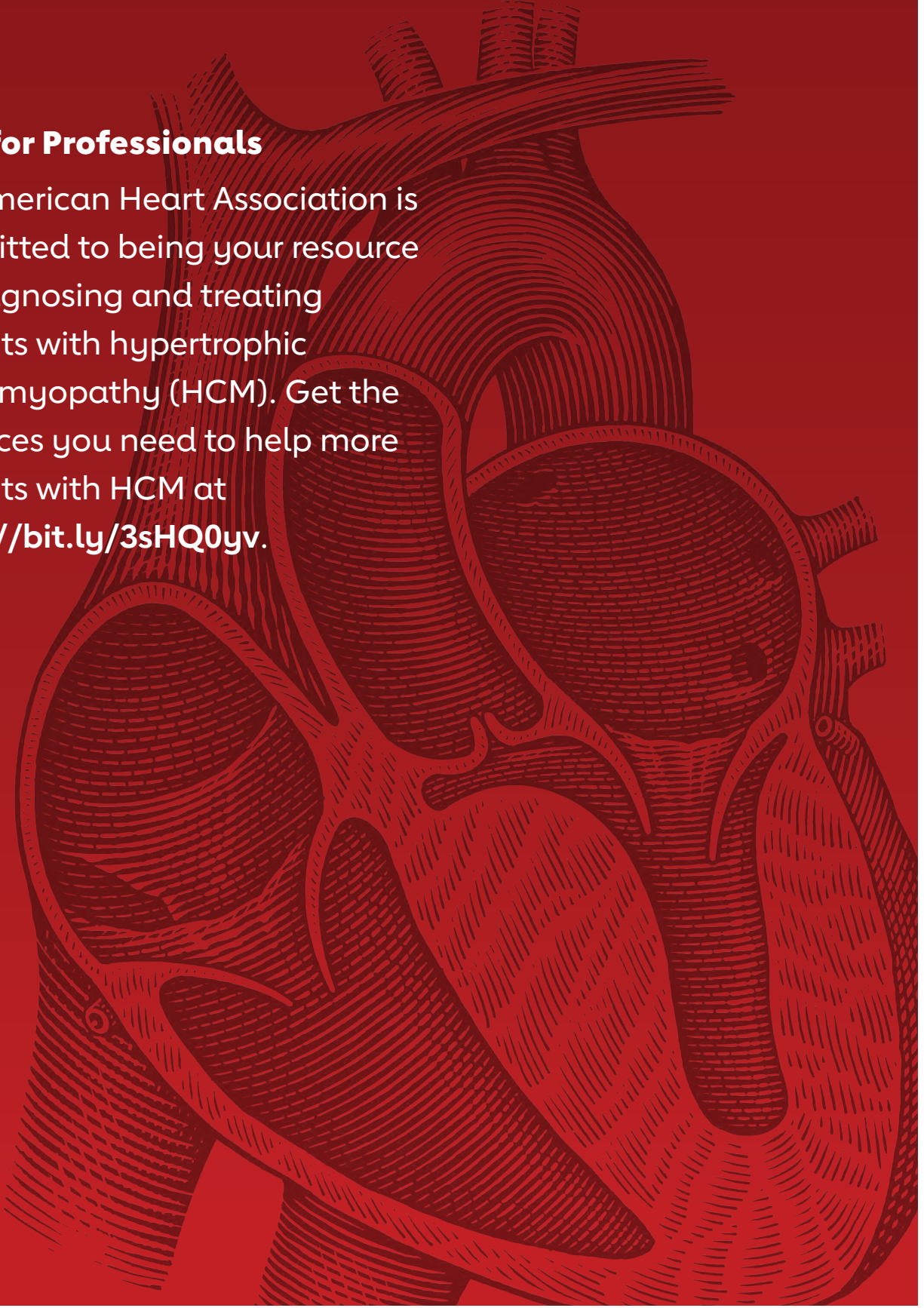
This educational resource is made available through a collaboration between the American Heart Association and The Wellness Network to empower heart and stroke patients to live healthier, longer lives.



American Heart Association
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HCM for Professionals

The American Heart Association is committed to being your resource for diagnosing and treating patients with hypertrophic cardiomyopathy (HCM). Get the resources you need to help more patients with HCM at <https://bit.ly/3sHQ0yv>.



The Robust Activities of CVSA



Dear Colleagues, I hope you're enjoying the fall and continuing to remain productive in advancing cardiovascular health. I can assure you that the activities of the Council of Cardiovascular Surgery and Anesthesia and the American Heart Association remain robust and squarely aimed at positively impacting global cardiovascular health.

The upcoming Scientific Sessions will be a prime place to witness activities and cutting-edge research that makes the AHA so unique and critical in improving global cardiovascular health. I encourage all of you to attend the first in-person Scientific Sessions in three years to benefit not only from principal research, discuss key topics with other thought leaders, but also to take advantage of the impromptu hallway conversations that are so vital to advancing science.

The CVSA Sessions Planning Committee — Elaine Tseng, George Arnaoutakis and Amanda Fox — have put together a top-notch scientific program that should benefit your practice.

The Council on Cardiovascular Surgery and Anesthesia highlights for the 2022 American Heart Association Scientific Sessions include six exciting cardiovascular seminars.

Saturday at Sessions:

First on the agenda will be "Consensus and Controversies: Debating the 2021 American College of Cardiology/American Heart Association/Society of Cardiovascular Angiography and Interventions Guidelines for Coronary Revascularization." Much controversy has surrounded these guidelines, with surgical societies withdrawing support. The session will allow balanced representation of differing viewpoints for the audience to decide. First, the recommendation class for three vessel disease between medical therapy and revascularization will be debated; then, coronary artery bypass grafting

(CABG) versus percutaneous coronary intervention (PCI) for left main disease after the EXCEL trial and subsequent meta-analyses; and lastly, the use of radial artery grafting in CABG, and how strong is the evidence over saphenous vein grafting.

Saturday at Sessions will then highlight early career and resident competitions, including the Early Career CVSA session on "Pitfalls and Pearls," Vivien Thomas Early Career Investigator Award Competition and CVSA Resident Prize Competition. This year, we have received many submissions for the young investigators' competitions with multiple top-notch abstracts chosen for the oral presentations — please make every attempt to attend.

We will once again have our CVSA council dinner on Saturday night, which should be another wonderful networking event with opportunities for all of us to reconnect and promote our young colleagues and mentees. Additionally, the council awards will be presented at this dinner.

Sunday at Sessions:

Sunday's events begin with the coveted William W.L. Glenn Lecture, followed by "The Cutting Edge of Thoracic Aortic Disease Management: Updates and Controversies." The aortic session will examine the contemporary management of acute type A and acute type B dissection; discuss how the international multi-center randomized trial of early surgery versus surveillance of 5.0-5.4cm ascending thoracic aortic aneurysms (TITAN) could change guideline thresholds; evaluate bicuspid aortopathy in the setting of bicuspid aortic valve regurgitation; and how to manage aortic arch aneurysms.

Following the Presidential Address, aortic and mitral disease will be in the spotlight, beginning with "Controversies in SAVR vs TAVR in European vs American Guidelines." The session will examine critical differences between the North American and European guidelines in aortic stenosis. Debates will be ongoing regarding the ACC/AHA recommendations for TAVR versus SAVR in 65-80-year-olds, while the Europeans reserving TAVR in low-risk to 75 years and older. Similarly, for

mechanical valves the age cutoffs for <50 vs <60-year-olds will be contested. And topics that are food for thought will be showcased, including tips and tricks for TAVR explantation, and the possible game changer, Ross operation for the young-middle aged adult.

Next is the "Mitral Valve Repairs and Replacements in 2022: Open Surgical and Transcatheter Approaches." The session reviews the 2020 ACC/AHA Valvular Heart Disease guidelines, then provides updates on edge-to-edge repairs, minimally invasive surgical mitral repairs, surgical treatments for functional mitral regurgitation and transcatheter mitral valve replacements.

Monday at Sessions:

Don't miss the finales on Monday with "Vasoplegia and Cardiac Surgery." Pathophysiology and risk factors for vasoplegia will be presented along with treatment options, methylene blue, angiotensin II, vitamin B12, as well as vasoplegia in transplantation and ventricular assist devices and whether to use catecholamines.

Finally, stay tuned for "Cardiac surgery and atrial fibrillation: state of the art." The session will encompass postoperative atrial fibrillation (AF) and run the gamut from rate versus rhythm control, stroke, big data, genomics, AF prediction models and wearables.

We hope to see you all in person at the CVSA council cardiovascular seminars. The oral abstract and poster sessions will further complement the programming as we received many high quality clinical, translational and basic science abstract submissions.

In further advancing the scientific mission of our council, the CVSA Committee on Science and Publication remains active. Dr. Mario Gaudino and Linda Shore-Lesserson continue to promote important statements for the AHA. Within the last year, three manuscripts have been published:

- **Design and Implementation of RCTs in Cardiac Surgery Chair:** Mario Gaudino, Vice Chair: Joanna Chikwe Published Dec. 6, 2021
- **Joint Manuscript with CVRI/PVD Vascular Imaging and Intervention Committee:** Imaging Surveillance of Patients with Chronic Aortic Dissection: A Scientific Statement from the American Heart Association

Chair: Dominik Fleischmann,
Vice Chair: Michael Fischbein
Published: Feb. 17, 2022, *Circulation:
Cardiovascular Imaging*

• **Joint Manuscript: CLCD Acute Care Committee Leading with CVSA Mechanical Complications in the Current Era of Acute Myocardial Infarction Chair:** Abdulla Damluji,
Vice Chair: Sean van Diepen
Published June 2021, *Circulation*
CVSA Representatives: Leora Balsam and Joanna Chikwe

Other multiple manuscripts are also in development, including anesthetic care of the pregnant patient with cardiovascular disease, management of acute perioperative ischemia following cardiac surgery, and modern surgical options for hemodynamically significant pulmonary embolism.

If you have additional ideas for statements and if you would like to chair one of these impactful projects, please reach out to Drs. Shore-Lesserson or Gaudino. We look forward to continued publication productivity and expanded collaborative roles for cardiac surgeons and cardiac anesthesiologists in the care of

patients with unique and common cardiovascular diseases.

As we settle into the new post-pandemic normalcy, I encourage continued involvement in the American Heart Association mission. We can all make meaningful impacts on the health of our patients one patient at a time. But through our involvement in the American Heart Association, we can truly advance global health care hundreds or even thousands of patients at a time. As a recent example, thanks to the advocacy of the AHA, significant inroads have been made in reducing availability and use of e-cigarettes. As the second largest funding organization of research, after the National Institutes of Health, the AHA's impact on advancing cardiovascular health and science is unquestionable.

As a council, we are increasing our role in scientific statements and guidelines. As such, please contact me with your interests so that we can ensure your involvement in these activities. Additionally, please keep your AHA profiles current so that an easy query of aligning interests can be performed in choosing appropriate representation for these important roles.

Another major focus of the CVSA remains the continued engagement of young physicians and trainees. Please continue to promote these critical members of our council by encouraging membership, abstract submission, submission to young investigator competitions and further their involvement to fellow status (FAHA).

With regards to more senior members of our council, if you're interested in joining the prestigious ranks of FAHA, please reach out to me or other members of the CVSA leadership so that we can help you navigate the FAHA process. While involved, the process is rather straightforward. As a current FAHA, I can certainly attest to the benefits that I have gained in my career and national involvement in the AHA.

As we continue to solicit ideas to advance the mission of the AHA and CVSA, please share your unique ideas so that we can consider them as a council.

I look forward to seeing everyone in Chicago in November and to continued engagement in council activities.

Wishing you a healthy and productive fall. ■



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Get Involved with CVSN



In case you missed it, the AHA published a Presidential Advisory in July, *“Life’s Essential 8—Updating and Enhancing the American Heart Association’s Construct of Cardiovascular Health: A Presidential Advisory From the American Heart Association.”* As the only nurse on the writing group, I represented CVSN. The advisory is an update to the 2010 Presidential Advisory and is a must-read!

It has been exciting to hear from many of you seeking opportunities to become more involved in our council. It is important for members to understand how to get involved within CVSN. First, CVSN has numerous committees. You can access the committees, along with the list of current members, by visiting the CVSN Council web page. As a reminder, AHA committee appointments are generally for two years, typically July 1–June 30 each year. In some cases, a member can be reappointed for a second term. If you wish to join a committee or become more involved, it is important to complete a science volunteer form (available on Professional Heart Daily), ideally with your resume or CV attached. The science volunteer form is our “go to” document when looking for nurse representatives throughout the year.

The immediate past chair oversees the CVSN Nominating Committee. Dr. Cynthia Dougherty is the current chair. The primary objectives of the Nominating Committee are to:

- Prepare and present nominations as committee terms expire to CVSN officers and members-at-large of the Leadership Committee along with members of all sub-committees within the council.
- Evaluate nominations submitted and consider other possible candidates.
- Determine a slate of candidates for council positions including alternates for each position considered.

CVSN uses a tracking system to ensure that the same person isn’t on multiple committees. This allows more CVSN members to be involved. Although we don’t always have enough positions for everyone to join a committee, many opportunities arise throughout the year. This may include nurse representatives for task forces, writing groups, speakers and liaisons to outside organizations. Early career and underrepresented ethnic groups (UREG) are especially encouraged to get involved so that your voice and perspective may be heard.

The CVSN Council manages a “list” of volunteers who have expressed interest in serving on a committee so that if you are not selected, you may be considered for a future opening. If you’re interested in serving on a committee, you can reach out to the committee chair to inquire more about the committee and its work:

- **Awards:** Lola Coke, PhD, RN, FAHA
- **Communications:** Windy Alonso, PhD, RN
- **Membership:** Leonie Rose-Bovino, PhD, RN, FAHA
- **Complex CV Patient & Family Care:** Julie Bidwell, PhD, RN
- **Development:** Carina Katigbak, PhD, RN, FAHA
- **Early Career:** Billy Caceras, PhD, RN, FAHA
- **International:** Theresa Green, PhD, RN, FAHA
- **Nominating:** Cynthia Dougherty, PhD, RN, FAHA
- **Mentoring:** Lorraine Evangelista, PhD, RN, FAHA
- **Pediatric CV Nursing:** Jennifer Peterson, PhD, RN, FAHA
- **Scientific & Clinical Education Lifelong Learning (SCILL):** Laura Rossi, PhD, RN, FAHA
- **State of the Science Nursing Symposium Planning:** Wendy Dusenbury, PhD, DNP, RN, FAHA
- **Stroke Nursing:** Niloufar Hadidi, PhD, RN, FAHA

For CVSN to be successful, we need members like YOU to volunteer, be engaged and support our mission and the work of the AHA. I look forward to connecting with many of you at

Scientific Sessions in Chicago. If you want to learn more about volunteer opportunities within our council, please reach out to me or come up and introduce yourself at Sessions. I look forward to hearing from you!

Scientific Sessions 2022 Preview

We look forward to being back in person at this year’s meeting in Chicago. You can also participate virtually if you can’t attend in person. The Pre-Session Symposia and Early Career Day is Nov. 4, followed by Scientific Sessions Nov. 5–7.

Some featured nursing sessions include:

- Two early career sessions will feature the Kathy Dracup Mentorship Award Lecture and a fireside chat with legends in the field of CVSN, Drs. Barbra Riegel and Debra Moser.
- “Digital Health Equity – Leveraging Informatics Interventions for Patients with Cardiac Conditions” will be an insightful event.
- The Lembright and Martha Hill Award Sessions will be Nov. 5 at 3–4 p.m.
- Session featuring five cardiovascular nurse scientists from the Betty Irene Moore Fellowship will provide an overview of nursing research to promote the cardiometabolic health of marginalized populations on Nov. 7 at 11 a.m.–Noon.

You can also attend many other exciting cardiovascular and stroke nursing sessions and oral abstract presentations.

Update on Membership and Communications Committee

Across the AHA, the Membership and Communications Committee has separated into two distinct, focused committees to better serve the needs of new and existing members.

The newly formed Membership Committee will promote and enhance diverse membership through recruitment and retention programs. It will focus on both new member outreach and marketing efforts, as well as increasing the participation of existing members. As a reminder, if you belong to multiple councils within the AHA, please make sure that CVSN is listed as your primary council to take advantage of the many benefits of our membership.



Nancy Pike, PhD, RN, CPNP-AC/PC, FAHA, CVSN Vice Chair was inducted into the STTI Hall of Fame in Edinburgh, Scotland.

The newly formed Communications Committee will aim to use numerous communication outlets to promote cardiovascular disease and stroke advances both within the AHA and externally. It will also support the Membership Committee by using these outlets to promote and enhance diverse membership throughout CVSN. The committee will continue to work closely with AHA staff to provide and edit content for Connections, the CVSN website and other outlets such as Twitter.

Mid-Career Committee Report from Teri L. Hernandez, PhD, RN

Fueled by opportunities to support mid- and later-career scientists in a dedicated way, the AHA launched the Mid-Career Committee in spring 2021. Chaired by Monik Jiminez, DSc, ScD, assistant professor at Brigham and Women's Hospital, 16 members for this committee were appointed from all AHA councils to provide wide representation across the association and from both academic and non-academic settings.

The Mid-Career Committee members have been commissioned to leverage their prior AHA and council experience and professional career experience to serve as a resource pertaining to

operational issues such as developing recommendations for a program to attract early career scientists transitioning to the Mid-Career stage to stay involved and engaged at the AHA, including mentorship, leadership and succession planning.

Goals of the committee include a focus on:

- **Funding:** This includes bridge funding for different stages, such as K to R, R to R, or transition from clinical focus to research focus. Mid-career merit awards and pivoting grants (changing career paths), as well as funding to support additional research specialty, are being considered. Further ideas for community advocacy work, education, clinical projects or serving underserved populations have been shared in the context of funding options.
- **Programming:** Possibilities such as creating mid-career programming available throughout the year (approximately quarterly), K to R transition grant development sessions and mid-career COC programming at Sessions that could be submitted collectively or by smaller interest groups have been discussed. Other compelling ideas include mid-career white papers, statements, coaching focused on transitions, salary, leadership opportunities and mentoring the next generation.
- **Leadership Opportunities:** Committee partners have suggested opportunities for mid-career liaisons to serve on leadership councils (for example, the Hypertension Council) and editorial boards, and development of clear sponsorship paths within the AHA. Pathways to support mid-career member service on AHA study sections (and its recognition) are being considered.
- **Recognition:** Partners brainstormed to suggest mid-career awards for each council, and opportunities to highlight "best papers" led by mid-career members.
- **Retention:** The committee has had dedicated discussions on how to promote equity, inclusivity and wellness as strategies to retention in science careers.

Of critical importance, the Mid-Career Committee members have provided a working definition of the mid-career stage:

"The mid-career stage may vary across academia, private practice, discipline, and institutions. Mid-career may include emerging mid-career professionals, or established mid-career professionals progressing to more senior leadership. The mid-career stage may be benchmarked by emergence from the early career phase according to AHA standards (PhDs and/or MDs who are current residents, fellows in training or have completed training within the last 5 years)."

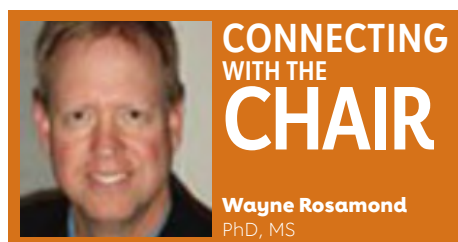
The AHA Mid-Career Committee is off to a great start and we will keep you informed of the exciting initiatives yet to come.

Sigma Theta Tau Hall of Fame Inductions

A hearty congratulations to CVSN Council members recently inducted into the International Nurse Researcher Hall of Fame by the Sigma Theta Tau International Honor Society of Nursing during the 33rd International Nursing Research Congress on July 25 in Edinburgh, Scotland. The award recognizes nurse researchers who achieve significant and sustained national and international recognition for their work and whose research actively influences the profession and the people it serves. The class of 2022 inductees include:

- **Nancy Pike, PhD, RN, CPNP-AC/PC, FAHA, CVSN Vice Chair**
Professor and Director of Research University of California Los Angeles School of Nursing, Los Angeles
- **Mary G. Carey, PhD, RN, FAHA**
Associate Professor of Nursing, University of Rochester School of Nursing, Director, Clinical Nursing Research Center, Strong Memorial Hospital, University of Rochester Medical Center, Rochester, New York
- **Ruth Masterson Creber, PhD, MSc, RN, FAHA**
Professor of Nursing, Columbia University School of Nursing, New York, New York
- **Jeroen Hendriks, PhD, MSc, RN**
Leo J. Mahar Cardiovascular Nursing Chair, Flinders University College of Nursing and Health Sciences, Adelaide, Australia
- **Lauretta Quinn, PhD, RN, CDE, FAHA**
Clinical Professor, University of Illinois at Chicago College of Nursing, Chicago ■

Highlights from an Active Council



Greetings in spite of this year's continued cGreetings. I am honored to serve as chair of the Council on Epidemiology and Prevention and grateful for the amazing leadership and service of our past chairs.

This is an exciting time in the world of epidemiology, and I am pleased to join with you on the journey ahead. As we look forward from several difficult and challenging years in our communities, I hope that together we can continue to be a positive force for growth and well-being. Indeed, our council has been very active recently and I want to share just a few highlights.

Our council is excited to have played a major role in a Presidential Advisory from the American Heart Association updating its construct of cardiovascular health. Under the leadership of council member and immediate past president of the AHA, Don Lloyd-Jones, several members of our council were co-authors on two papers jointly published in *Circulation* this past summer. One of these papers introduces a new construct of cardiovascular health, Life's Essential 8 (1). [See Figure 1.] The other provides estimates of the prevalence of Life's Essential 8 in U.S. adults and children from the National Health and Nutrition Examination Survey (2).

Life's Essential 8 is an advancement of the AHA's definition of cardiovascular health, also known as Life's Simple 7 published in 2010 (3). In that paper, the American Heart Association defined a novel construct of cardiovascular health to promote a paradigm shift from a focus solely on disease treatment to one inclusive of positive health promotion and preservation across the life course in populations and individuals. The initial definition of cardiovascular health was based on seven health behaviors and health factors that, when optimal, were associated with greater CVD-free survival and total longevity and higher

quality of life. To date, more than 2,500 scientific articles have cited the original 2010 document describing the AHA's construct of cardiovascular health using Life's Simple 7 and explored the prevalence, determinants, outcomes and mechanisms of cardiovascular health in diverse populations across the life course. The Presidential Advisory published this summer introduces an enhanced approach to assessing cardiovascular health: Life's Essential 8. The components of Life's Essential 8 include diet (updated), physical activity, nicotine exposure (updated), sleep health (new), body mass index, blood lipids (updated), blood glucose (updated) and blood pressure. The writing group elected to add sleep as an eighth metric to the formal definition of cardiovascular health due to its comparable and independent contribution to overall and cardiometabolic health and health outcomes. Each metric has a new scoring algorithm ranging from 0 to 100 points, allowing generation of a new composite cardiovascular health score that also varies from 0 to 100 points.

The authors of the new Presidential Advisory note: "With this enhanced measurement tool for cardiovascular health, the AHA and its numerous multisector partners in schools, communities, government, health care, business, and beyond have new opportunities to catalyze cardiovascular health improvement by raising awareness of its importance, promoting platforms for its measurement, funding research on interventions, and disseminating successful strategies."

The council, together with all the authors of the Presidential Advisory, look forward to how this new metric of cardiovascular health can drive positive health change in our communities.

The council was also excited to be able to hold its annual meeting in person this past spring in Chicago. We celebrate all the research work presented and discussed in Chicago. We are especially excited about the active role our junior colleagues took in making the meeting a success.

I would also like to acknowledge our 2022 spring meeting program chair, Pamela Lustey, PhD, for her



Figure 1. Life's Essential 8. Life's Essential 8 includes the 8 components of cardiovascular health: healthy diet, participation in physical activity, avoidance of nicotine, healthy sleep, healthy weight, and healthy levels of blood lipids, blood glucose, and blood pressure.

leadership in organizing a terrific in-person meeting under the challenging circumstance of the pandemic.

Congratulations to our various award winners below who were acknowledges last spring:

2022 Council on Epidemiology and Prevention Award Winners and Finalists

- Jeremiah and Rose Stamler Research Award for New Investigators: Winner: Natalie Cameron; Finalists: Hao Ma, Wendy Wang, Andrew Agbaje, Amelia Wallace
- Epidemiology and Prevention Early Career/Trainee Travel Award: Winners: Lily Yan, Pablo Martinez-Amezcuca, Oluwabunmi Ogungbe, Haley Parker
- Sandra A. Daugherty Award for Excellence in Cardiovascular Disease or Hypertension Epidemiology: Winner: Timothy Plante; Finalists: Kelsie Full, Yacob Tedla, Jessica Reese

- Epidemiology and Prevention Minority Travel Grant: Winners: Hamdi Adam,
- Jonathan Ruiz-Ramie, Lola Ortiz-Whittingham, Janiyah Sutton
- Epidemiology and Prevention Mentoring Award: Winner: Tiffany Powell-Wiley Trudy Bush Fellowships for Cardiovascular Research in Women’s Health
- Cardiovascular Disease Research in Women’s Health: Winners: Nour Makarem, Bhavya Varma, Mary Rooney
- Roger R. Williams Memorial Award for Genetic Epidemiology and the Prevention and Treatment of Atherosclerosis: Winner: Leo Buckley Richard D. Remington
- Methodology Lecture: Lecturer: Miguel Hernán William B. Kannel, MD, Memorial
- Lectureship in Preventive Cardiology Lecturer: Dan Roden
- We eagerly anticipate our spring

meeting in 2023 to be held in Boston. I encourage you all to submit your work to the meeting and I look forward to seeing you there. ■

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Genomics and Precision Medicine Science at Work



I am humbled to follow in Tommy Wang and Carolyn Ho's footsteps as chair of the Genomics and Precision Medicine Council, and delighted to welcome Tom Cappola as incoming vice-chair.

Everywhere I turn, I see genomics and precision medicine science at work — in discovery and in putting our discoveries to work to improve prevention and treatment.

It's increasingly apparent (at least to me) that genome science has entered the mainstream of cardiovascular care. That said, our workforce has not been well-prepared for this new way of thinking about using genomics to detect (and prevent) early disease, screen families or choose among drugs. Thus, the council for the past several years has worked to develop a certificate program in genomic medicine. The effort, led by Andrew Landstrom and Anwar Chahal (and with contributions by many), has generated a 12-module course that's being finalized and will be launched within months.

Our ability to communicate our science has been dramatically enhanced by *Circulation: Genomics and Precision Medicine*. The journal's impact factor has risen from 4.063 in 2020 to 6.054 in 2021 and 7.465

this year. Thanks to the hard work of editor Chris Semsarian, his editorial team and the great science that our community generates and publishes.

The AHA has been increasingly nimble in generating scientific statements that are shorter than previous and focused on clinical implications. Recent statements to which GPM Council members have contributed include:

2020

- Noncoding RNAs in Cardiovascular Disease: Current Knowledge, Tools and Technologies for Investigation
- Future Directions and Genetic Testing for Inherited Cardiovascular Diseases in 2020

2021

- CV Implications of Endocrine Therapy
- The Use of Biomarkers in Cardio Oncology
- Genetic Testing for Heritable Cardiovascular Diseases in Pediatric Patients
- Considerations for Cardiovascular Genetic and Genomic Research with Marginalized Racial and Ethnic Groups and Indigenous Peoples
- Future Perspectives of Cardiovascular Biomarker Utilization in Cancer Survivors
- Preclinical Models of Cancer Therapy-Associated Cardiovascular Toxicity

2022

- Cardio-Oncology Drug Interactions

In development:

- Polygenic Risk Scores for Cardiovascular Disease

- Interpreting Incidentally Identified Variants in Genes Associated with Heritable Cardiovascular Disease
- Use of Artificial Intelligence in Improving Outcomes in Heart Disease
- CYP2C19 Genetic Testing for P2Y12 Inhibitor Therapy
- Equity in Cardio-Oncology Care and Research (joint with Clin Card)

I'm excited that Scientific Sessions will happen in person (hopefully!) in Chicago Nov. 5-7. Two main events have a genomics and precision medicine focus: "Implementing Machine Learning for Precision Care: Crossing the Bridge to Reality" and "Identifying and Practicing Emerging Genomic Based Therapies on Cardiovascular Disease."

The program also includes many sessions in the genetics and genomics stream. I highlight the Clinical Cardiovascular Genetics Boot Camp on Saturday morning and the Genomic and Precision Medicine Early Career Investigator Award Competition Saturday afternoon. The boot camp — a great success in previous years — requires registration. There are also multiple sessions on topics such as multi-omics, AI and epigenetics.

The GPM Council is only as strong as our membership. Please don't hesitate to contact me or Tom with your ideas and your willingness to move our mission forward by engaging in science, participating in sessions and volunteering for service on our committees.

I look forward to seeing you in person in Chicago! ■

The AHA Mentoring Program provides a unique opportunity for young members to connect and benefit from the experience and knowledge of our most passionate members.

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A Look at Hypertension Scientific Sessions 2022



If you're like me, you were thrilled to return in person to Hypertension Scientific Sessions in San Diego — a fantastic venue for our first on-site conference in three years.

Thanks to everyone who participated in the design of the conference, in particular the Executive Committee, including Drs. R. Ariel Gomez, Karen Griffin and Daichi Shimbo from the Council on Hypertension and Drs. Alexander Staruschenko and Vivek Bhalla from the Council on the Kidney in Cardiovascular Disease.

Thanks also to Susan Kunish and Lillie Noe who represent the COH at the AHA. Without their help, there would be no conference.

Dr. Brian Kobilka gave an engaging Nobel Prize Lecture to open the conference. We thank him for participating and then networking with attendees.

The program included the first of several annual symposia by the Health Equity Research Network

(HERN) on the Prevention of Hypertension.

We preserved the dedicated programming slots for trainees and early career investigators that we started during the pandemic. And in addition to the customary poster sessions, this year included several oral platform abstract sessions designed for and by the Trainee Advocacy Committee (TAC).

We also had our inaugural Rising Star Lectures, delivered by Drs. Nirupama Ramkumar, Pablo Nakagawa, Monica Santisteban and Oleg Palygin. We hope everyone reading this article recognizes the importance and commitment of the COH to trainees and early career stage investigators.

Congratulations to our major award winners:

- Drs. Joey Granger and Edwin Jackson received the 2022 Excellence Award in Hypertension Research. Because the last two conferences were virtual, we also recognized 2020 and 2021 recipients: Drs. Alan Kim John, Daniel Levy, Jane Reckelhoff and Giuseppe Mancina.
- Dr. Mark Chappell presented the Arthur C. Corcoran Memorial Lecture; Dr. Kailash Pandey the Lewis K. Dahl Memorial Lecture; and Orson W. Moe the Donald Seldin Lecture.

- Dr. Alicia McDonough and Dr. Vesna Garovic were recipients of the Irvine
- Page and Alva Bradley Lifetime Achievement Award and Marvin Moser Clinical Hypertension Award, respectively.
- The Harry Goldblatt Award for Early Career Investigators was awarded to Dr. Camilla Ferreira Wenceslau.
- The COH and KCVD Mid-Career Awards for Research Excellence were awarded to Drs. Justin Grobe and James McCormick, respectfully. This was the inaugural year for the KCVD Mid-Career Award for Research Excellence.
- For the first time, the council named two recipients for the Harriet Dustan Award: Drs. Aletta Schutte and Maria Luisa Sequeira Lopez.

As always, the COH and KCVD presented numerous awards to trainees and early career stage investigators.

Finally, I want to thank Dr. Staruschenko and the rest of Executive Committee for the first-ever NHLBI R13 grant to support the conference. These funds provided travel for trainees and early career stage investigators in need and for childcare expenses associated with attending the conference. ■



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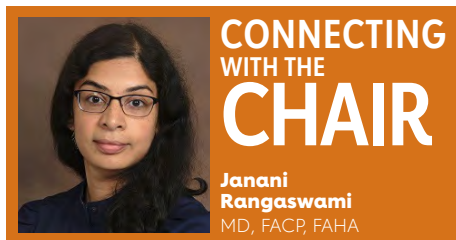
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KCVD Thrives and Evolves



Hello and welcome to the Council on the Kidney in Cardiovascular Disease!

As I step into the role of KCVD chair, I have reflected on the amazing cardiorenal community we have fostered within the council for rich collaboration between nephrologists, cardiologists, cardiovascular and kidney physiologists, and trainees across these specialties.

Over the past two years, the council has thrived under the leadership of Alexander Staruschenko, PhD, FAHA, who maintained the momentum of our activities across the breadth of scholarly output, career development for members and a strong presence at the Hypertension Scientific Sessions and AHA Scientific Sessions under challenging circumstances during the ongoing COVID-19 pandemic. The continued success of the council is testament to his leadership, and I thank him for his contributions and commitment to our mission and his role as past-chair of KCVD.

I extend a warm welcome to vice-chair Thu Le, MD, the John J. Kuiper Professor of Medicine and chief of the Division of Nephrology at the University of Rochester School of Medicine and Dentistry. The council is fortunate to have her as part of the leadership, and I look forward to working closely with her to advance the KCVD mission.

The council creatively pivoted to alternate formats of engaging with members with the limitations posed by the pandemic. As part of that process, the Heart-Kidney webinar series sponsored by KCVD was launched successfully in October 2021. From the inaugural panel kickoff featuring Prof. Eugene Braunwald emphasizing the need for close multidisciplinary cardiorenal collaborative efforts, the series has been very well received across the cardiology and nephrology communities. Featured topics have

included implementation of newer cardiorenal therapies, ischemic heart disease in chronic kidney disease, race-free reporting of kidney function and raising awareness about disparities and the impact of social determinants of health in the care of patients with cardiorenal disease.

The series will evolve into a podcast format to increase access and engagement on key topics, and we eagerly solicit your feedback and suggestions on the content and future topics.

The Science Committee continues to be extremely productive under the leadership of Prof. Ian De Boer and Prof. Nisha Bansal, with a strong pipeline of scientific statements within and across collaborative efforts with other councils. Among recent highlights, the council:

- Produced a scientific statement on the cardiovascular implications of home dialysis therapies, led by Professor Mark Sarnak and Prof. Christopher Chan.
- Co-sponsored a scientific statement on renovascular disease, led by Dr. Vivek Bhalla and Professor Stephen Textor.

The KCVD, a close partner of the Council on Hypertension, significantly contributed to the planning and content of the fall Hypertension meeting. Apart from cutting-edge symposia featuring cross disciplinary content between the KCVD and Hypertension councils, Prof. Orson Moe, MD, delivered the Donald Seldin Award Lecture.

A notable addition to the portfolio of awards presented by KCVD from 2022 includes the Mid-Career Achievement Award, which was formalized with the impetus from the KCVD Awards Committee under Prof. Staruschenko's leadership. Dr. James McCormick, PhD, FAHA, the inaugural recipient at AHA Hypertension in the fall, shared his work on "New Insights into Monogenic Hypertension from Mouse Models."

The AHA Scientific Sessions and the American Society of Nephrology's (ASN) Kidney Week are the two biggest meetings that bring several members of KCVD together. This year, we look forward to welcoming members in

person to the Early Career symposium sponsored by KCVD at the ASN Kidney Week. This is an outstanding opportunity for trainees and early career members to network, share their interests and explore opportunities for career advancement. Dr. Staruschenko will be receiving the ASN Mid-Career Distinguished Researcher Award.

The fifth annual Basic Research Forum for Emerging Kidney Scientists, a collaborative effort between the ASN and the American Physiological Society (APS), is another excellent opportunity for trainees and early career scientists for career development.

Also, do not miss the several KCVD-sponsored symposia featuring a breadth of topics in the cardiorenal at Scientific Sessions 2022 in Chicago! Importantly, an exclusive symposium at Sessions will focus on cardio-nephrology as career pathway, featuring active clinicians, scientists and trialists sharing their perspectives.

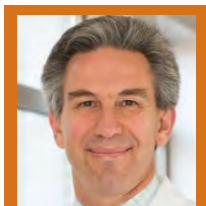
The council's work would not be possible without the support of our membership. On that note, please renew your AHA membership, if its due, and please don't forget to select the KCVD as your council, even if the kidney is not your only area of interest. I look forward to your ongoing support and partnership with the KCVD! ■

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Interview Spotlight: Cardiovascular Effects of Home Dialysis Therapies



Mark J. Sarnak
MD, MS



Christopher T. Chan
MD, FRCPC

The AHA recently released a Scientific Statement on Cardiovascular Effects of Home Dialysis Therapies. Aligned with the government's Advancing American Kidney Health Initiative and the AHA's 2024 mission, the statement outlines the cardiovascular benefits offered by home hemodialysis or peritoneal dialysis when compared to thrice-weekly in-center hemodialysis. The timeliness and educational value of the statement to cardiologists, nephrologists, nurses, patients and the broader health care community can't be overestimated.

Drs. Mark Sarnak (MS) and Christopher Chan (CC), chair and vice-chair of the group that prepared the statement, were interviewed by Mykola Mamenko (MM) to highlight some of the important aspects addressed in the statement.

MM: Why is home dialysis better than in-center dialysis?

CC: It may be unbeknownst to many people that three times a week hemodialysis (HD) is actually quite a minimalistic approach to replace kidney function. It only provides somewhere around 10%-15% of what a kidney would normally do. Home dialysis is a way allowing us, prescribers, to provide a gentler and a more continuous treatment. There are two forms of dialysis: there is the blood form, or home HD (HHD), and the abdominal form, peritoneal dialysis (PD). Both have pros and cons. PD provides you with a continuous therapy and HHD provides you with more intensity, while remaining a more continuous form, when compared to three-times-a-week in-center HD. We are more likely to derive clinical benefits with a more frequent, gentler dialysis.

MS: Home hemodialysis (HHD) can be done with varying frequency and

length of treatment; for example, three hours per treatment five days a week. Both HHD and PD are done more frequently than three times a week in-center HD and are therefore more physiological in comparison to traditional three times a week in-center HD, where ultrafiltration rates are frequently high; for example, 2 liters of fluid removal during a 3-4-hour treatment. Whether you're doing continuous ambulatory PD (CAPD) that allows for dialysis and ultrafiltration 24 hours a day, or continuous cycling PD (CCPD) that uses a machine and is usually performed at night for ~10 hours, fluid removal is more gentle. Home dialysis may also reduce the risk of both hyper and hypovolemia (with associated low blood pressure), which are not infrequent in three-times-per-week in-center HD. Some forms of HHD are also better at clearing toxins, including phosphorus, which in itself may be a risk for cardiovascular outcomes in dialysis patients. It is important, however, to acknowledge that there are no large, randomized trials that have compared cardiovascular outcomes or mortality in patients on either HHD or PD with patients on three-times-a-week in-center HD. Trials have, however, shown that HHD reduces blood pressure, left ventricular mass and hypertrophy, and left ventricular volumes in comparison with three-times-per-week in-center HD.

MM: Does HHD offer any benefits over PD?

MS: Our statement summarizes the factors that may favor the selection of one form of dialysis over the other. If you're trying to avoid vascular access at all costs, reduce the risk of infections due to bacterial seeding or transvenous wires, or if you are scared of needles, there may be some advantages for PD. If you have good hemodialysis venous access, have the resources and are comfortable with HD machines at home, HHD will provide a more physiological way of doing dialysis. So, for every patient there is going to be a personal preference. As mentioned above, HHD improves blood pressure, reduces left ventricular hypertrophy and reduces left ventricular volumes. There is less data on PD, but PD may be a good option in a patient with

congestive heart failure, aortic stenosis or a left ventricular assist device.

CC: I think there's no one size fits all. Randomized clinical trials certainly support cardiovascular advantages of more frequent HD, but it also comes at a cost: It's technically more complicated, with more machinery. PD provides more continuity, and the elegance of PD is in its simplicity. You can do PD with no machines, just bags (CAPD); whereas, there is more machinery and more complexity in HD. The choice depends on what the patient wants and that's where shared decision has to be made between the prescriber and the patient.

MM: Is the statement's recommendation to increase the use of home dialysis specific to any age, sex or race?

MS: We are not at the point to say that there are particular groups where it should be recommended, but there are certainly groups where it should be considered. We encourage early discussion with patients, nephrologists, cardiologists, nurses, social workers (i.e., interdisciplinary care) so that the optimal decision for each patient is made. There may be a particular patient with severe heart failure, where the knee-jerk reflex is traditional in-center HD. This type of patient may particularly benefit from home dialysis. A patient who has had many catheter infections and has poor veins for HD access may do particularly well on PD. A patient who is extremely fatigued after each in-center HD treatment may benefit from either HHD or PD. We are encouraging interdisciplinary models of care and are not relying only on three-times-per-week in-center HD. There are also disparities in the number of patients who are doing PD and HHD, so we need policy changes that allow for increased access for all to these additional forms of dialysis.

CC: At the end of the day, the variables that we are changing here is time, frequency and duration. As we put those combinations together, there are different benefits, different dosing and different ways of actually providing dialysis. All of them have pros and cons and all of them have important cardiovascular effects, but we don't

have the granularity to say that if you have X, Y and Z, then this ought to be this form of dialysis. I don't think that we have large enough trials, analogous to the cardiovascular literature, to give subgroup recommendations. But we are advancing a very different type of thinking for the kidney community to individualize the kidney replacement therapy. It is timely to bring in some of the policy changes: The government is advocating for home dialysis. The advancing kidney health initiative is placing home dialysis as well as preemptive transplantation as the modality of choice. There is a lofty goal of achieving 80% of all dialysis patients receiving kidney transplants or home dialysis. We are currently not close to that target, but there is now alignment in policymakers' and prescribers' and patients' awareness to actually affect a meaningful change.

MS: I think we all recognize that 80% is a moonshot and that may not necessarily be the right number or even feasible, but clearly, we need to increase from where we are, to a significantly higher percentage. We know there are some patients who are not going to be candidates for home dialysis therapies.

MM: Does home dialysis require additional training of the medical workforce or education on the patient's side? What adjustments in the medical care are necessary to implement the statement's recommendations?

MS: Yes, additional education is required for patients, nephrologists, cardiologists and policy makers. The medical workforce needs to be made aware of the different options of doing dialysis and the pros and cons of each. Training is required at multiple levels including in the hospital. If caregivers in the hospital are more comfortable with urgent-start PD, it is more likely that this will be the first form of dialysis for the patient and likely develop into the chronic form of dialysis. The radiologist or the surgeon should be available and comfortable to place urgent PD catheters, nurses and the nephrologists should be trained in troubleshooting challenges with urgent-start PD, and when a patient leaves the hospital and needs rehabilitation, centers need to be equipped to do PD (currently many are not). Finally, when the patient returns home, they and their caregivers need to be sufficiently educated and comfortable in doing home dialysis,

including operating machines for HHD and CCPD.

CC: Right now, dialysis is organized in a very siloed way, especially in the U.S. The acute in-hospital setting and the ambulatory environment are two different worlds, but that's not the reality. The reality is that the system ought to be integrated. So, we need to rethink how we are able to deliver this, and education is going to be paramount. At the level of a physician, we need to be aware of home dialysis. If you're not aware of it, you're not going to prescribe it. At the level of nursing, it has to change from a physical nursing model, where the dialysis unit is delivering a product, which is primarily in-center HD. The majority of U.S. patients (>90%) are receiving in-center HD now. We need to change that organization from "a nurse delivering a product" to "a nurse educating about dialysis," both in PD and in HHD. It's also important that patients need to be aware. They need to understand what the options are. Most patients may have started on in-center HD acutely as an unplanned start and they never knew about other options. So, if they don't know about it, they wouldn't ask for it as well. Part of the essence of our statement is to raise awareness among all three parties: physicians/nursing, allied health and, most importantly, patients. We need to rethink how we maximize our resources to best deliver a life-sustaining therapy.

MM: Is it always beneficial to switch patients from in-center dialysis to home dialysis?

MS: As alluded to above, there are many reasons why a patient may benefit from switching from traditional in-center dialysis three times a week to home dialysis. These include, but are not limited to, severe fatigue after in-center HD; various forms of cardiovascular disease, such as pulmonary hypertension, aortic stenosis and congestive heart failure; frequent catheter-related infections; and poor veins for HD access. Some patients may simply want more flexibility as to the timing of doing dialysis. Others may prefer a more private environment at home. The challenge is, once a patient has started in-center dialysis, there's some inertia to change. Providing education prior to dialysis initiation is therefore optimal.

CC: It is important to recognize that dialysis is not a one-stop modality.

Most dialysis and kidney failure patients end up experiencing multiple modalities. For example, someone might start off having a transplant, and then, when the transplant isn't working, we will need to transition to dialysis. And there are different forms of dialysis. Younger patients capable of doing home dialysis may benefit from it. Some older people may not be capable of doing home dialysis because it's just too tricky and too complicated to do this alone and may require assistance. Recall that the average age of someone starting dialysis in the U.S. is over 65. So, some patients may not be as technically savvy and there are also some personal limitations. Thus, most patients may end up being on multiple forms of kidney replacement therapy during their journey.

MS: And just to emphasize for the readers, we have focused on home dialysis in this statement as an alternative mode of kidney replacement therapy. But for most patients, if they are deemed to be candidates, kidney transplant is the ideal therapy for kidney failure both to prolong length and quality of life.

MM: Does home dialysis offer any clear lifestyle benefits?

CC: There are tremendous benefits. As a general principle, with the increasing intensity of dialysis, there will be fewer restrictions imposed on a patient both in terms of fluids, as well as solutes such as phosphate. It might be difficult for us to imagine that someone actually needs to limit fluid and food intake on a three-times-a-week schedule, because we are not able to eliminate all the solutes, including phosphate. For that reason, phosphate binders are needed as medicines to bind phosphorus that is a major component of one's diet. If someone is receiving maximum intensity dialysis at home, say with HHD, there are much fewer restrictions and there is no need for phosphate binders. So, home dialysis is not only about lifting restrictions but also about one's quality of life.

MM: Other than the lack of supporting policies and proper education, are there any other limitations or caveats restricting the use of home dialysis?

MS: The potential, although still debated, downsides of HHD include more frequent access complications, a higher risk of infection and loss of residual

kidney function. PD has its own potential complications including catheter malfunction and peritonitis. For PD, there are certain abdominal conditions that may preclude successful PD.

CC: The organization of dialysis will need to be reconfigured if we are going to maximize dialysis dosing. As we are delivering more dialysis sessions, dialysis cost per session will be higher. Having said that, more frequent HD leads to a reduction in medication use and may lead to fewer hospitalizations due to cardiovascular diseases. Economic analysis suggests that more frequent HD is a dominant economic strategy. It's also important to realize that current limitations may, in fact, be workforce limitations. To train someone to go into home dialysis, you need the appropriate amount of nursing, and we are facing nursing shortage. From a cost perspective, the policymakers are already making changes that will allow us to deliver this type of therapy. But in the future, the expansion of home dialysis might be constrained by limited human resources. From a financial standpoint, PD is the least expensive in North America, then goes HHD and, subsequently, in-center HD, mostly due to personnel costs, as well as the overhead costs.

MM: What brought this statement to life specifically in 2022?

MS: The need to increase the use of home dialysis is appreciated in the nephrology field. The

connection between the heart and the kidney is now well recognized, and cardiovascular treatments are improving such that sicker patients are surviving with kidney failure. With the Advancing American Kidney Health initiative from the government in 2019 pushing for home dialysis and kidney transplantation, this statement provides a timely opportunity for educating the entire workforce, including the cardiology field, about different options for kidney replacement therapy. In combination with this, there are many disparities in care for patients with kidney disease, and the AHA has recently championed health equity for all. This statement provides an opportunity to emphasize these disparities and potential methods to reduce them in the future.

CC: It is also important to recognize that we needed some time to understand the data. The frequent hemodialysis network trials were a changing point in our appreciation of the cardiovascular effects of more frequent hemodialysis. The findings of randomized controlled trials solidified our position. It is also important to recognize that alignment with policy is paramount. The Advancing American Kidney Health initiative is clearly an important aspect. (The year) 2022 marks a timely alignment of clinical data, policy change and patient awareness. That is why we landed with the statement in 2022. ■

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Young Hearts Remains Focused, Adapts for the Future



Like many organizations, the AHA Council on Lifelong Congenital Heart Disease and Heart Health in the Young (Young Hearts) has gone through a series of changes over the past two years. I'd like to share some of the changes and upcoming events we will be offering our members.

Our council leadership has recognized the important role AHA scientific council membership can play in the careers of pediatric and adult congenital cardiologists. With the changing demographics of our field, we also recognize that our council needs to adapt to provide the supports that our members need to promote the heart health of infants, children, adolescents, and adults with congenital and acquired heart disease.

Through active engagement with council membership, we have embarked on a strategic reorganization process to improve transparency, increase diversity and promote a diverse cardiovascular research portfolio.

Our council remains focused on serving as the scientific home for all our members, providing resources for career development at all stages and career paths. The AHA continues to offer opportunities including various grant mechanisms, abstract presentations, and networking. We hope to increase resources and opportunities for grant preparation, scientific meetings and research collaboration.

Several new programming efforts underway include:

1. Lunch and Learn Series. Our council will be leading a series of virtual lunch

and learn opportunities this year. Topics will include scientific statement preparation (October 2022), how to use social media to advance your career (January/February 2023) and how to prepare a successful abstract and scientific presentation (April 2023). Please be on the lookout for notifications and details regarding registration.

2. Increased Young Hearts content at AHA Scientific Sessions. Registration is open for the meeting in Chicago Nov. 4-7. I especially want to make sure everyone is aware of a **special half-day pre-session Young Hearts symposia on Friday, Nov. 4**, which requires an additional charge/registration. The session will be focused on research innovations in congenital heart disease. We have secured some amazing speakers including Dr. Robert Califf, FDA Commissioner, and many others. (Some speakers are highlighted in the figure.)

Additional early career programming on Nov. 4 will be great for fellows in training and early career faculty. The Early Career programming is 8:30-11:30 a.m. and the Young Hearts Symposia is 2-5:30 p.m.

You can access registration at: <https://professional.heart.org/en/meetings/scientific-sessions/programming> [professional.heart.org]. When you register, look for the link that states: "Pre-Sessions Symposia and Early Career Day" for \$75.

Our science subcommittees will be working on additional programming, including fostering our international collaborations, improving cross council collaboration and generating educational materials for our patients and families. Please be on the lookout for more opportunities to be involved.

In addition to the above programming, several upcoming funding opportunities include the long-standing collaboration with

the Congenital Heart Foundation. The AHA/CHF Congenital Heart Defect Research Awards will support predoctoral and postdoctoral fellows who are actively conducting basic, clinical, population or translational research directly related to congenital heart defects. The AHA/CHF applications are due Sept. 13.

Other funding mechanisms include career development awards and institutional research enhancement awards. For more information and upcoming grant-related webinars, please visit <https://professional.heart.org/en/research-programs/application-information>.

On behalf of the Council on Lifelong Congenital Heart Disease and Heart Health in the Young, I encourage all new and existing members to work with us as we continue to grow and improve.

Thanks also to our immediate past chair, Dr. Shelley Miyamoto, for her exemplary leadership over the past two years. While the COVID-19 pandemic presented many challenges over the past two years, Dr. Miyamoto continued to keep our council on track and moving forward to exciting new opportunities.

As your incoming chair, I remain committed to promoting transparency, diversity and inclusion within our council. I hope to work with all of you to develop new programming, initiatives, and partnerships with other councils to further the objectives of Young Hearts and the AHA.

Please don't hesitate to reach out to myself or other members of the Young Hearts Leadership Committee if you would like to learn about ways to become more involved. We recognize that things can change rapidly in this new era of COVID-19, but we are hopeful that we will be able to meet again in person this November in Chicago. ■

DID YOU KNOW?

AHA Professional Members can search for other members using specific specialty, geographic, job classification, and other data through our Professional Volunteer Search tool.

[Learn more.](#)

Writing Your Own Story

The term “early career” was initially confusing to me.

*“Be careful with the stories you tell about yourself.”
(Glennon Doyle, Untamed)*

Hadn't I started my career after med school? What were the last six years if not part of my career? Now I've come to realize it defines a period of transition, growth and learning about yourself.

Most trainees experience academic settings, programs require scholarly activity and there is a pressure to achieve greatness and publish in only high impact journals. There's also a feeling that no matter how much you've done, you should do more. Meanwhile, there is a push for wellness and balance.

Many physicians will graduate and never touch research again, some become only researchers, others will find a mix, and some will finish their training and change their course completely. None are wrong.

We hear terms such as imposter syndrome and burnout. We find ourselves in a crux — we want to relax, to “find ourselves” and our “work-life balance,” but we take charts home, check email on vacation, don't take

time for ourselves, or feel guilty when we do. Luckily, we're seeing a powerful and rapid change in our culture as health care professionals. We are now more inclusive, more respectful of trainees and, most importantly, allowed to be human.

A world of virtual options and social media have allowed increased opportunities for the medical profession for support, mentorship, learning and advocacy. I had the opportunity to be an early career blogger for the AHA toward the end of my fellowship, through guidance from a mentor encouraging me to find opportunities in larger organizations. This opened me up to the world of Twitter and allowed me the opportunities to connect with people with shared interests outside of my own institution.

Some doctors on Twitter are comedians, advocates for social justice, who help students who go unmatched find residency positions. There

are “Tweeterials” about the latest journal articles, live tweeting during conferences and reviews on important topics that you may find on your boards. You can find learning resources for continuing education and links to webinars, podcasts or meet-ups.

We all share similar struggles: We're trying to write our own stories, but we often feel like we need to meet the same deadline, write the same story or write the story someone else started for us. Our stories often have undertones of doubt, regret and fear. And while it is important to acknowledge, it is more important to allow your story to be yours and it's OK if it takes multiple drafts.

I have found that if I allow myself to be human, to ask and actively seek help and opportunities, acknowledge I don't know it all and to take breaks, that my early career journey has become more exciting and less stressful, and I can tell my story in a more positive and true way. ■



American Heart Association Scientific Sessions

Pediatric and Adult Congenital Cardiologists

Plan Ahead
November 4th, 2022
2pm-5:30pm - Chicago, IL
Half-day pre-session before this
year's AHA Scientific Sessions
Completely dedicated to Pediatric
Cardiology and Adult Congenital
Heart Disease

Registration Opens This Summer
Early Career Sessions (8am-11:30am)

Topics Include:

- Congenital Heart Research & Innovation: 2022 and Beyond:
- Power in Numbers: Updates on CHD Clinical Trials and Multicenter Studies
- What have we learned? Successes and Challenges over the Past Decade of CHD Clinical Research
- Where do we go next? Fostering Innovation & Discovery in CHD Beyond 2022
- Early Career Sessions

Speakers Include:

Kurt Schumacher	Gail Pearson
Sarah De Ferranti	Caren Goldberg
Kiona Allen	Sara Pasquali
David Goldberg	Andrew Glatz
Anitha John	Robert Califf
Jeffrey Anderson	Christopher Petit
Jane Newburger	John Costello
Roberta Williams	Dan Penny
Bradley Marino	Elizabeth Blume
Shelley Miyamoto	and many more...

Council Remains Productive, Earns Council Engagement Card



I'm honored to take over the reins as Chair of the Council on Lifestyle and Cardiometabolic Health. For those who don't know me, I'm director of Behavioral Research, Department of Research & Evaluation, Kaiser Permanente Southern California.

I'm joined by vice-chair Chiadi Ndumele, MD, PhD, FAHA, director of Obesity and Cardiometabolic Health in the Division of Cardiology and the Robert E. Meyerhoff Assistant Professor in the Department of Medicine at the Johns Hopkins School of Medicine.

We are delighted to volunteer in our respective capacities and work with our council members to serve the AHA.

I thank Dr. Frank Sacks for leading the council through the early throes of the COVID-19 pandemic. It was tough to keep the activities of the council moving forward in a time of cancelled face-to-face meetings replaced by ZOOM and Teams calls and the overwhelming fatigues that enveloped all of us. Nonetheless, the council remained highly productive and was awarded the Council Engagement Card with a \$2,500 award that goes into our budget. Great work, Frank!

I also thank Dr. Penny Kris-Etherton for agreeing to serve as chair of the council's Nomination Committee. This is typically a two-year term filled by the past chair of the Lifestyle Council. Frank is taking a sabbatical this year and Penny will remain in the role until Frank is able to join. Thank you, Penny!

Finally, please welcome Mu Huang, who joined the AHA this spring as

a medicine and science advisor and will be supporting our council. Welcome, Mu!

Get Involved

Consider becoming a FAHA. The designation of FAHA recognizes your scientific and professional accomplishments, volunteer leadership and service. This is the time to **submit your application** for the spring 2023 cycle. One advantage of this cycle is that you will be recognized at our Spring Specialty Conference in Boston on Feb. 28-March 3, 2023. Your close colleagues will be able to congratulate you in person!

Also, consider joining one of the Lifestyle Council committees, the engines that get the work of the council accomplished. We encourage early-career and underrepresented racial and ethnic groups to become involved and

begin the journey of AHA volunteering. It's a two-year commitment with the option of extending for another two years. Please check out the [website](#) to learn about the different committees in the council, chat with the committee chairs and members, and let them know of your interest. Nominations are usually in the spring, so this is a great time to peruse the website and determine which opportunities may fit your interests.

AHA's Cardiovascular Health Framework

Hopefully, you've had an opportunity to read about the rollout of the AHA's Life's Essential 8, which is an update and enhancement of the organization's construct of cardiovascular health. The document adds sleep health as a core component of cardiovascular health, updates the metrics for some



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of the other components (diet, physical activity, nicotine exposure, body mass index, blood lipids, blood glucose blood pressure) and places these factors in the context of psychological health and well-being and the social determinants of health.

Our Lifestyle Council is in a superb position to continue to contribute to these efforts to improve cardiovascular health. Several of our recent AHA statements directly informed the thinking of the Life's Essential 8 Writing Group:

- Dietary Guidance to Improve Dietary Health (2021)
- Strategies for Promotion of a Healthy Lifestyle in Clinical Settings: Pillars of Ideal Cardiovascular Health (2021)
- Physical Activity as a Critical Component of First-Line Treatment for Elevated Blood Pressure or Cholesterol: Who, What, and How?: A Scientific Statement from the American Heart Association (2021)

- Obesity and Cardiovascular Disease: A Scientific Statement from the American Heart Association (2021)
- Health Behavior Change Strategies in Primary Care and Community Practices for Cardiovascular Disease Prevention and Risk Factor Management Among Mid-Life and Older Adults: A Scientific Statement from the American Heart Association (2021)
- Supporting Physical Activity in Patients and Populations During Life Events and Transitions (2022)
- Strengthening US Food Policies and Programs to Promote Equity in Nutrition Security: A Policy Statement from the American Heart Association (2022)
- Comprehensive Management of Cardiovascular Risk Factors for Adults with Type 2 Diabetes: A Scientific Statement from the American Heart Association (2022)

These statements are just a snapshot of the great work of the Lifestyle Council that supports Life's Essential 8. Other manuscripts in different stages of development will contribute as well.

New Ways of Disseminating Science

We are exploring ways of reaching out to broader audiences with our important scientific and policy statements to catalyze individual, community and policy changes so that cardiovascular health can be achieved by all. This is a work-in-progress and we'll provide updates soon.

We look forward to seeing new and familiar faces at Scientific Sessions in Chicago this coming November and at our Council on Lifestyle and Cardiometabolic Health in Boston in early spring 2023. ■



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Can't Miss PVD Programming at Sessions



AHA Scientific Sessions — in person this year — will be in Chicago on Nov. 5-7. So please register soon as hotels may be hard to find closer to the time.

This year, we'll have 14 peripheral vascular disease-related sessions. Please don't miss the Jay D. Coffman Award Competition, which will feature a special guest speaker. The award highlights our trainees.

Sessions will also include broad educational and research content relevant to Council on Peripheral Vascular Disease members. The topics span peripheral arterial disease, cerebrovascular disease imaging, pulmonary embolism treatment and long-term outcomes, anticoagulation and venous thrombosis and post

thrombotic syndrome, as well as vasculo-oncology. Returning once more will be the Thrombosis Jeopardy.

I would like to highlight some of the excellent sessions and activities from our FIT group, led by Dr. Francisco Ujueta. The group always has innovative and engaging talks and topics that are relevant for junior and mid-level practitioners.

- An early career session will focus on using registries to investigate vascular disease. This is quite relevant given the more expanded databases now available.
- The Go Red for Women PAD will be a Lounge AHA session that will review PAD in women and the disparity in screening, management and interventions. The session will include FIT and senior members of our committee.

Two other FIT-related educational activities include a webinar on *"How to Write a Competitive Abstract"* (Dec. 7). This session will hopefully be a repeat of the success we had last year in preparation for the ATVB conference abstract submissions.

We're inviting principal investigators and senior physicians who are tasked with reviewing abstracts to detail what makes an abstract successful.

Another not-to-miss webinar that focuses on junior investigators is *"How to Prepare an Aims Statement for Grant Proposal"* (February 2023). It's in the early phases of planning and open to all FIT and early career members.

Our goal is to continue webinars every two to three months.

Also, our Twitter account is continuing with the transition to two FIT members leading as social ambassadors.

The Vascular Discovery meeting in Seattle — the first in-person meeting in two years — went well with a good turnout. We also rejoined our Society for Vascular Surgery colleagues the day prior in the Vascular Research Initiatives Conference. There is much synergy between these two groups, as many vascular surgeons, vascular medicine and cardiovascular researchers find common ground with both meetings that are during the same week and location. ■



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- Exclusive access to our Professional Volunteer Search
- Apply/Post on our Job Resources tool
- Full access to all online AHA scientific journals
- Exclusive access to network with key science leaders

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Dr. Henke with award recipient Lucas Marinho, MD



Dr. Henke with award recipient Luke Brewster, MD, PhD, FAHA



Dr. Henke with award recipient Molly Schieber, MS

NEW Peripheral Artery Disease National Action Plan

The American Heart Association worked with 25 organizations and 75 volunteers to develop the **PAD National Action Plan (NAP)**, a roadmap for reducing the burden of PAD. The plan, released in May 2022, outlines six goal areas: **public awareness, detection and treatment, research, professional education, public health and advocacy.**

Thank you to all the volunteers who made this work possible and especially to the goal committee chairs: Natalie Evans, MD; Sanjay Misra, MD; Stanton B. Shanedling, PhD, MPH; Lee Kirksey, MD, MBA; Debra Kohlman-Trigoboff, ACNP-BC, CVN; Kim Smolderen, PhD; Scott Damrauer, MD; J. Antonio Gutierrez, MD, MHS; Kunihiro Matsushita, MD, PhD; Peter Henke, MD; Diane Reid, MD; Mary M. McDermott, MD; Aaron W. Aday, MD, MSc; Marc P. Bonaca, MD, MPH; and co-chairs Naomi Hamburg, MD; Amy Pollak, MD; and Aruna Pradhan, MD.



We also have new **WEBINARS and PODCASTS** for health care professionals. These dynamic sessions address such topics as best practices for PAD detection and care, equity in practice, equipping participants to advocate for their patients and provide optimal medical and behavioral therapies to improve quality of life and prevent severe consequences.

Additionally, the AHA is serving as the convener for the recently launched

PAD Collaborative. It brings together organizations and experts committed to advancing the PAD National Action Plan with the goal to reduce serious complications and improve quality of life for people living with peripheral artery disease. Learn more and get connected to the PAD Collaborative.

Follow along on social media: #PADPlanInAction. ■

DID YOU KNOW?

AHA Professional Members can search for or post a position on our Job Resources Tool.

[Learn more.](#)

The Importance of Relationships In Our Personal and Professional Lives



In May we had our first in-person meeting since the start of COVID of QCOR Scientific Sessions in Reston Virginia. It was fantastic to see everyone in person. After two years of COVID isolation, reconnecting with old friends on personal and professional levels was rejuvenating. While I like to believe that with e-mail, zoom meetings and social media we are all continuously connected, meeting face to face with people is so much more meaningful. Unfortunately, there were several COVID cases following the meeting (myself included), but my experience since May is that it was nearly impossible to avoid infection with the latest variant regardless of vaccination status. Many trainees and junior faculty were in attendance, presented impressive work, and hopefully received great feedback and were able to network and meet new potential collaborators and mentors.

Dr. Tracy Wang was awarded the AHA QCOR Outstanding Lifetime Achievement Award and gave a heartfelt inspiring talk at the QCOR dinner. Simultaneous to her receiving the award, a perspective piece written by Dr. Wang was published in *Circulation: Cardiovascular Quality and Outcomes* titled **Mentorship and the Leaky Pipeline in Academic Cardiology**. In her talk and in this article, Dr. Wang discusses the importance of mentorship and

diversity. In particular, the importance of good mentorship for women and people of color who may face greater barriers to professional advancement and be at greater risk for imposter syndrome. These factors both lead to career dissatisfaction, and ultimately for some, leaving the profession (the leaky pipeline). I highly encourage everyone to read her perspective piece and will highlight some of her points here.

Dr. Wang has been an outstanding mentor for many trainees and junior faculty. In her perspective piece she highlights that mentorship is a two-way street and should be mutually fulfilling. Mentoring is about trust and connection with clear communication about intentions and goals. Dr. Wang discusses lessons she has learned from her mentees, particularly from those who are under-represented in our field, about what mentees need from mentors. First, be a role model who is not afraid of being vulnerable. Be open about your own doubts and anxieties. Demonstrate that you can be successful without being superhuman. Second, break systemic barriers to challenge mentees with opportunities. This means serving not just as a mentor but also as a sponsor to put forward mentees for awards and leadership positions. Third, celebrate successes, but also celebrate the mentee as a person. Celebrate growth, progress, and the challenges that they have overcome. Acknowledge that doubts and anxiety are normal and play up achievements. Finally, emphasize balance. While our professional lives can be very rewarding, it is important to foster relationships with family and friends who support each of us. I have been fortunate that many of my

friends are colleagues who understand my professional challenges.

I personally have benefited from mentors who have provided all the above for me. They were “real” and helped me to grow as a whole person, not just as an academic cardiologist – and they were men. As a junior faculty member, I was told by a senior white colleague that I needed to be surrounded by more women in the field to be supported. I let him know I had terrific mentorship and support. While gravitating to those who are “like” us is common and makes a lot of sense, that is not always possible and should not be necessary. As a community, we need to be inclusive and support everyone, regardless of gender, race, ethnicity, or background. Intentional and personalized direction, exposure, opportunities, and guidance throughout each stage of the pipeline will support the upward trajectory of individuals’ career endeavors and help fix the leaks in the pipeline.

However, better patches over the leaks in the pipeline are needed. Diverse perspectives bolster ideas that will lead to better patches, and my hope is, someday seal the pipeline. Mentorship and career development have been, and continue to be, central to the mission and culture of QCOR. Many of the current leadership of QCOR were mentored by founders of the field and we are all committed to moving the field forward by bringing in and up our junior colleagues. For many years we have focused primarily on those in the early career stage. Indeed, we held our early career development lunch at QCOR Scientific Sessions. Dr. Wang has been influential within AHA to also develop programming for those at the

Learn about the variety of council sponsored awards and travel grants available to our members.

mid-career stage. Within medicine, that “mid-career” point may be different for different individuals depending on their career path and practice setting. Regardless, it is clear that a well-defined end to the early career stage does not exist, rather the need for mentoring and sponsorship continues.

Dr. Wang also highlights that diversity in our field is necessary to address inequities in health. This also falls squarely within the realm of QCOR. As one of the Institute of Medicine domains of high-quality care, we aim to ensure that care is equitable. It is critical to have an inclusive table of scientific investigators, with representation from every race, ethnicity, gender, and professional background to ensure scientific research is high quality and impactful. Over the last few years there has been a renewed focus on researching disparities to better understand the influence of social determinants of health and structural racism on health outcomes. I am proud that our Council’s journal, *Circulation: Quality of Care and Outcomes*, took the lead in raising the rigor with which disparities are studied and reported by laying out guidelines for authors who submit manuscripts evaluating disparities. Those guidelines are now used by all AHA journals. This has also led to the recent development of an Equity, Diversity and Inclusion (EDI) review process for all manuscripts addressing disparities for AHA journals. These are important steps as we work toward mitigating health disparities.

We have a long way to go to seal the leaky pipeline and address disparities in health outcomes. Looking around the room at the QCOR Sessions, I was excited to see so many young

and diverse faces. I hope that as a community, we can take the lessons on mentoring that Dr. Wang shared and

continue the QCOR culture of strong mentorship and collaboration. It is essential for sealing the pipeline and ultimately mitigating disparities in health. ■



Tracy Wang, MD receiving the Lifetime Achievement Award from Adrian Hernandez, MD, MHS

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<https://professional.heart.org/en/partners/fellow-of-aha>

Two Council Members Win Distinguished Scientist Award



Every so often, a physician investigator profoundly changes the way we do science. How remarkable, then, when such an acclaimed scientist becomes a strong, articulate leader advocating not only on behalf of medical science, but policy as well.

Every year, the Stroke Council nominates one or two acclaimed vascular neurologists for the American Heart Association Distinguished Scientist Award. This year, at the AHA Scientific Sessions in Chicago, November 4-7, two such individuals will be recognized:

Ralph L. Sacco, MD, MS

As an early-stage investigator, Ralph L. Sacco, MD, MS, brought Framingham to stroke, making the first comprehensive descriptions of stroke risk factors based on rigorous, community-wide population epidemiology.

Then, his creation and execution of the North Manhattan Stroke Study further solidified his stature and expertise as a leading stroke epidemiologist. Through utmost rigor and scientific excellence, Dr. Sacco helped elucidate much of what we now take for granted in understanding cerebrovascular risk and pathogenesis.

In later years, Dr. Sacco gained recognition for his leadership skills as chair of the Neurology Department at the University of Miami and as president of the AHA and American Academy of Neurology.

Now, Dr. Sacco leads our premier Stroke journal as editor-in-chief. Through his leadership, Dr. Sacco has advocated tirelessly on behalf of neurovascular science and for policies that promote cerebrovascular health and disease prevention. He is known widely as a compassionate, decisive leader who facilitates fair hearing for all, while also running a tight, efficient ship.

With his science ranking in the topmost tier, Dr. Sacco was also elected to the National Academy of Medicine. He has devoted countless hours to his mentees and professional organizations, and remains a truly humble, kind, enthusiastic, caring and dedicated physician scientist.

Bruce Ovbiagele, MD, MSc, MBA

Bruce Ovbiagele, MD, MSc, MBA, is an internationally recognized investigator and leader in developing, disseminating and translating into clinical practice and community settings evidence-based behavioral interventions to improve outcomes for vulnerable populations with or at risk for stroke.

Dr. Ovbiagele has spent decades training, mentoring and inspiring groups under-represented in medicine to conduct high-quality neurological research and develop successful academic careers. They include people who are Black/African American, Hispanic/Latino, Native American, Pacific

Islander, Native Alaskan, Hawaiian and those from low socioeconomic backgrounds or with disabilities.

He's currently professor of neurology in the UCSF Weill Institute for Neurosciences.

In addition to these prestigious awards, the AHA Scientific Sessions will include rich content in stroke research and education. The Stroke/Neuroscience team for Scientific Sessions 2022 has planned the following: Neurocardiology: At the Intersection between Cardiology and Stroke, Stroke Risk from a Systemic Cardiovascular Perspective, Atrial fibrillation and Cardioembolic Sources of Stroke a Continuous Challenge in Cerebral and Cardiovascular Disease and Marijuana on Cardiovascular and Brain health; just to name a few. We thank Drs. Nestor Gonzalez, Soojin Park, Luciano Sposato, Prasana Tadi, Fernando Testai, Amy Towfigh and Hugo Aparicio for developing a line-up of great topic for this section. ■

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Are you a stroke support group leader looking for a topic idea for your next meeting? Our newly created modules help inform on variety of post-stroke related topics. Each module includes a presentation and discussion questions, a short video and supporting materials, such as fact sheets, checklists and more. Check back regularly for new topics. **Get details.**



International Stroke Conference 2023

February 8-10 | Dallas, TX + Virtual
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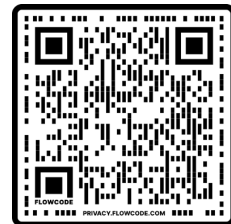


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The PAD National Action Plan is funded in part by Janssen Scientific Affairs, LLC.

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AHA|ASA

2023 Scientific Event Schedule



International Stroke Conference (ISC)
February 8 – 10, 2023, Dallas, TX



**Epidemiology and Prevention |
Lifestyle and Cardiometabolic Health**
February 28 – March 3, 2023, Boston, MA



Vascular Discovery
May 10 – 12, 2023, Boston, MA



**Basic Cardiovascular Sciences (BCVS)
Scientific Sessions**
July 31 – August 3, 2023, Boston, MA



Hypertension Scientific Sessions
September 7 – 10, 2023, Boston, MA



Resuscitation Science Symposium (ReSS)
November 11 – 12, 2023, Philadelphia, PA



Scientific Sessions
November 11 – 13, 2023, Philadelphia, PA

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