

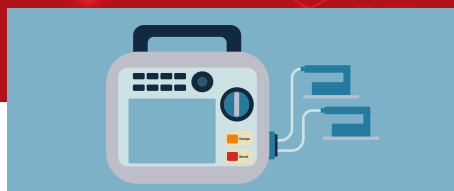


CONNECTIONS

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New AHA president Joseph Wu is a pioneering scientist with an adventurous backstory

Over nearly 20 years at Stanford University, Dr. Joseph C. Wu has pioneered the kind of scientific advances that make his patients say: "Whoa! You can really do that?"

For instance: Wu's lab can take a vial of a person's blood, combine it with chemicals and turn it into replicas of the heart cells the person had at birth.

Wu can then study those cells to figure out when and how a heart problem developed. Then, he can use the replica cells to find the best medication to treat the problem, a process he calls "a clinical trial in a dish." With gene editing, Wu can then potentially treat the patient's genetic condition.

This seemingly futuristic approach to heart disease is quite a story.

So is the tale of how Wu became such an expert.

His personal journey spans three continents. It includes a series of near misses that turned out to actually be bull's-eyes. And it features tons of—how to say this politely?—manure.



Joseph C. Wu, MD, PhD, director of the Stanford Cardiovascular Institute, will become the 87th president of the American Heart Association. His yearlong tenure, which will include the AHA's 100th anniversary celebration, begins July 1. (American Heart Association)

Now the director of the Stanford Cardiovascular Institute, Wu is about to take on another major role. On July 1, he will become the 87th president of the American Heart Association; his yearlong tenure will include the AHA celebrating its 100th anniversary.

"It's fitting that such a forward-thinking scientist will help guide us into our second century," AHA Chief Executive Officer Nancy Brown said. "The AHA is rooted in science, and Joe has long been a driving force behind our devotion to innovative research that saves and improves lives."

Not bad for a guy who skipped attending fourth grade.

'I was like Huckleberry Finn'

Wu's story begins in the 1970s, in Kaohsiung, Taiwan, a port city on the southern part of the island nation.

Throughout his childhood, the fear of trouble from neighboring China gripped Taiwan. Perhaps that's why TV shows and movies in Taiwan glorified military pilots or astronauts. They inspired Joe to dream of one day guiding his own airplane or rocket.

His early years also were shaped by his family's farm, which specialized in growing a popular variety of Nijisseiki Asian pears and Red Delicious apples. His parents spent the harvesting season there, leaving Joe and his brother to be

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From the COC Chair

Councils Are in Good Hands as We Look Ahead to the Next 100 Years



Cheryl Anderson
PhD, MPH, FAHA

Have you reached your “one” yet? A few months ago, I launched an initiative called “Each One Reach One,” challenging each member to personally recruit one person, whether it be a colleague or a friend, to join the AHA as a professional member. It’s human nature to talk about the things we believe in and to share the stories that are the most meaningful to us. I know that the work of the AHA is worth talking about and inviting others to join in, especially as we approach the AHA’s 100th anniversary!

In May, we held the Council Operations Committee (COC) Meeting. Historically, this was a time for council leaders to share their biennial reviews, which were primarily focused on the work they had already accomplished. Last year, we decided to change the emphasis of these meetings. While

we still celebrate all that the councils have achieved, the lion’s share of the presentations is about what the council plans to do in the future.

Six councils gave a report of what they plan to accomplish over the next two years and all councils have a few shared goals. Meeting the needs of their current members as well as those they hope to bring into the council, improving the pipeline into their specialty/expertise, meeting the needs of every career level, and prioritizing diversity are common among all the councils. Additionally, each council has a specific area of focus:

- **CLCD:** Growth through engagement with new subspecialties
- **CVRI:** AI (Artificial Intelligence)
- **CVSA:** Anesthesia members of the council & FAHA recruitment
- **CVSN:** Execute their strategic plan
- **PVD:** Leveraging the council’s connection to larger AHA initiatives and focus on women

- **QCOR:** Stronger, meaningful engagement with other councils
- **Stroke:** Regaining the international members they lost during the pandemic

With all the great work and opportunities ahead, now is the perfect time to reflect on why we volunteer with the AHA and how impactful the work of our Scientific Councils is. Being a Professional Member has numerous benefits and connects you to a wellspring of resources. Sharing your “why”—that is, why you choose to be a relentless force for a world of longer, healthier lives by partnering with the AHA through membership—is an effective way to motivate others to join. In case you missed it, I share my “why” [here](#).

I hope you will consider taking my challenge to recruit more members. As always, I consider it a great privilege to support all councils, and each member, in the work they do. ●

(continued from page 1)

raised at times by their grandmother; the family spent summers together on the farm.

Until 1980.

Joe was 9 and his brother was 11. If his brother celebrated another birthday in Taiwan, he’d be committed to eventually joining the Taiwanese military service. The only way around it was to leave the country. So the Wu family did.

Except, they didn’t have a new home lined up.

Taiwanese passports weren’t widely accepted internationally, limiting their options. The countries most likely to welcome them were in South America. Other Taiwanese emigrants were already there, so the Wus spent an entire year bunking with fellow

ex-pats—first in Bolivia, then Brazil, then Paraguay.

“It was the best experience of my life,” he said. “I was like Huckleberry Finn.”

Living in Taiwanese enclaves, Joe never had to learn another language. Nor did he go to school. He whiled away hours watching sloths creeping and anteaters slurping at the city zoo. He also spent time around tribal families who lacked material goods but were rich in other ways.

“Their smiling faces struck an impression on me,” he said. “I saw that happiness is not defined by how much money you have.”

The Wus received citizenship in Paraguay, which led to new passports—and new names. The boy whose given name meant “celebrate light” in Taiwanese became Jose, the Spanish precursor to “Joe.”

All along, his dad’s goal was getting into Argentina, perhaps starting a farm in the Pampas. Their new nationality meant new opportunities. They landed one in 1981.

In South Pasadena, California.



Joe’s dad again found work on a pear and apple farm. Joe returned to elementary school.

In Taiwan, he’d been a mediocre student. Now, thrown into a classroom in a different language, the challenge sparked him, especially in his English as a Second Language course.

His family couldn’t afford tutors. So he relied on “brute force memorization,” often waking at 6 a.m. to cram for spelling tests. “There was a page: Rabbit, r-a-b-b-i-t, and, somewhere

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else on the page, robot, r-o-b-o-t that I still remember to this day,” he said.

Four years later, Joe’s dad bought his own pear and apple farm in the Central California town of Ducor. By then, Joe was proficient enough in English that he began managing the farm—at the age of 14 and while living in Pasadena, two-plus hours away.

Joe negotiated how much they’d pay for cow and chicken manure, chemical fertilizers and insecticides, as well as how much they’d charge for their produce. Because Joe always referred to himself on the phone as “Mr. Wu,” some people didn’t realize they were talking to a kid until they met in person.

“It taught me a lot about dealing with people,” he said. “Even as a kid, I never had a fear of talking to people older than me. I was just talking to them as my peers. I also saw how hard migrant workers work.”

Joe led the dual life of student and farm manager throughout middle school, high school and his undergraduate studies at UCLA.

When it was time for Joe to move across the country for medical school, he gave up the farm job—but only after fulfilling a final duty.

Selling it.



He wanted to go to Harvard Medical School. He wound up at Yale.

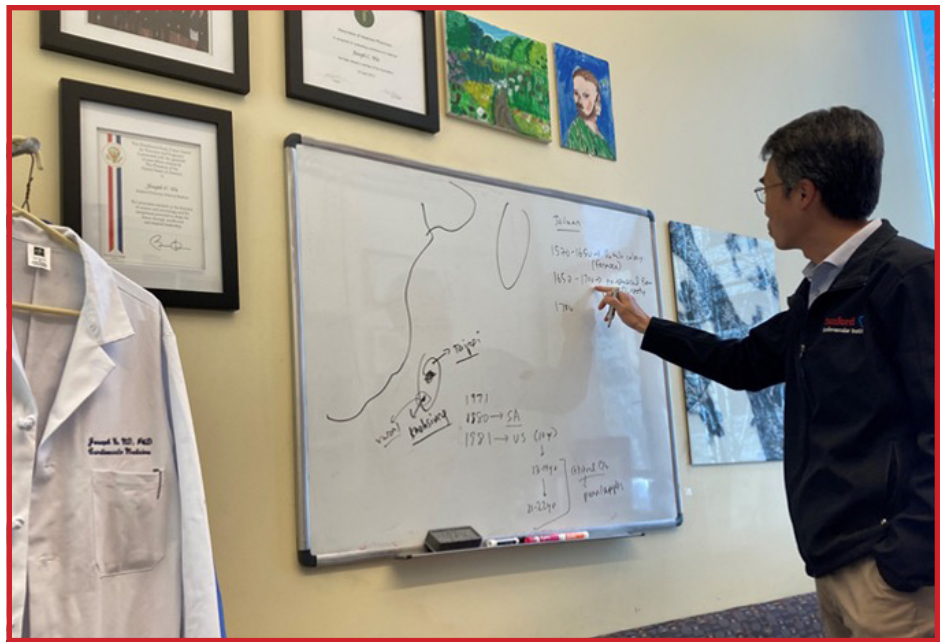
In his first year, he met a public health student who’d also emigrated from Taiwan. Her name was Jade, and they’ve now been married 22 years and have two children, a 19-year-old son and a 17-year-old daughter.

He initially planned on becoming a cardiothoracic surgeon. He came away intent on becoming a cardiologist who saw patients and did research.

For his next layer of medical training, Joe wanted to go to Stanford. Instead, he returned to his alma mater UCLA for a program that pairs medical fellowship training with a path to earning a PhD.

When it came time for Joe to pick a mentor, his choice was—on the surface—quite odd. He found a nuclear medicine specialist.

Dr. Sam Gambhir was no ordinary nuclear medicine specialist though. He was a pioneer in molecular imaging who invented new ways of seeing



Dr. Joseph Wu arrived at Stanford University in 2004. His academic journey has led him to cutting-edge research on human induced pluripotent stem cells—blood or skin cells that have been reprogrammed so they can become any type of human cell. (American Heart Association)

inside a patient’s organs and cancer cells, which meant exciting new tools to help Joe do the kind of research that fascinated him.

At the start of Joe’s fourth and final year toward his PhD, Gambhir was lured away from UCLA. Losing his mentor seemed like a setback. Except...

As part of his hiring package at his new job, Gambhir played a prominent part in several other hires.

That’s how Joe wound up at Stanford University with joint appointments in cardiology and radiology.



Creating Heart Cells

Joe arrived at Stanford in 2004. His primary duties were seeing patients and reading echocardiograms. He also had time allotted for research, backed by a relatively modest amount of departmental start-up funding.

His first big project was based on a study that was considered a massive breakthrough. It involved turning bone marrow cells into one of the most important cells in a heart—the muscle cells that allow it to contract, known as cardiomyocytes. Only, something unexpected happened: “My work showed the opposite of what they said. I saw by molecular imaging that most of the bone marrow cells died after injection, which means they couldn’t have turned into cardiomyocytes,” Joe said.

As a junior investigator, he wasn’t interested in challenging noted scientists in the field. All he cared about was creating cardiomyocytes. Convinced they couldn’t have come from bone marrow cells, he sought to find another source. Maybe, he thought, embryonic stem cells.

At the time, only two types of stem cells were available: adult stem cells and embryonic stem cells.

Adult stem cells are the kind each person carries; thus, a 70-year-old may have stem cells that are deteriorating. This is why skin wrinkles, hair turns gray, and other signs of aging, such as osteoporosis, sarcopenia, dementia, and more, develop.

Embryonic stem cells only exist at the start of life, and they offer all sorts of possibilities in terms of differentiation. There were challenges, too, from not knowing what they would develop into to controversies surrounding their use or how to obtain them. Federally funded human embryonic stem cell research was banned from 2001 to 2009 under President George W. Bush. Joe’s research was exempt because his funding came from departmental funding, and not public funds.

Joe’s work with embryonic stem cells led to promising findings. His work was featured in top scientific journals. (Meanwhile, other researchers debunked the bone marrow studies.)

Then Joe got a call from a pathology colleague asking if he'd seen the latest edition of *Cell*.



Japanese scientist Dr. Shinya Yamanaka had published a paper in 2006 in *Cell* showing that he could take skin from a mouse and create a cell that was “pluripotent,” meaning that it could become whatever kind of cell he wanted.

Even, Joe hoped, a cardiomyocyte.

Sure enough, in 2007, Dr. Yamanaka and colleagues found a way to take skin cells from a human, mix in transcription factors and create human “induced pluripotent stem cells” or iPSCs.

Better still, these iPSCs offered the best attributes of adult stem cells and embryonic stem cells with none of the downsides. (This was such a game-changer that it earned Yamanaka the Nobel Prize in 2012 only six years after his initial paper, which is extremely fast in the science world.)

Joe's team wasn't the first to use human iPSCs to create cardiomyocytes. However, they became among the most proficient and most prominent. In addition to publishing seminal papers, the team has now created a growing biobank of over 2,000 human iPSC lines from various disease cohorts and ethnicities.

The scientific community marveled at Joe's work.

The National Institutes of Health honored him with the Director's New Innovator Award, then its Roadmap Transformative Award. In 2010, President Barack Obama presented him the Presidential Early Career Award for Scientists and Engineers.

He became director of the Stanford Cardiovascular Institute in 2013. He was elected to the National Academy of Medicine in 2019, the National Academy of Inventors in 2022 and Academia Sinica of Taiwan in 2022 (which made his parents extremely proud because it is considered one of the highest academic honors in Taiwan; not bad for a farmer's son). He is also the top 0.1% most highly cited investigators in the world over the past five years (2018-2022).

The AHA took notice, too.

The organization funded his work with an Established Investigator Award and, later, a Merit Award. In between,

he became the first recipient of the Joseph A. Vita Award in 2015, which honors a mid-career investigator for transformational work published in AHA journals.

Joe served consecutive two-year terms as chair of the AHA's Research Committee. It's a pivotal role considering that the organization is the top funder of cardiovascular research outside of the federal government. Being chair of that committee also gave him a seat on the AHA's national board of directors. After a year off the board, he returned last year as the president-elect.



Work Together

As a board member, Joe pushed for more funding for early career investigators.

Established investigators, he argued, already have plenty of funding sources, while those earlier in their career are still building their networks. And while the money helps younger researchers, so does the confidence boost of being chosen. He remembers too many peers who abandoned promising research careers because they didn't get enough grants or encouragement during the earlier stages.

This stance is typical of how Joe is always looking out for others.

Over several hours of conversation for this story, Joe never mentioned a single personal accolade—yet he mentioned several times that 48 of his former trainees now lead their own labs.

He also never pointed to any of the awards in his office, but eagerly showed off another trophy of sorts—a coffee mug created for him by a former student. The ceramic is white, with black letters displaying Joe's mantra, one that borrows from lessons learned everywhere from the farm to working with his mentor, the late Dr. Gambhir:

Work hard

Work smart

Work together

“When students join my lab, I ask them, ‘Which part is the most important?’” Joe said, smiling. “The answer is working together.”



To Joe, working together goes far beyond helping your lab partner.



In his office, Dr. Joseph Wu's coffee mug displays the mantra he teaches his mentees: “Work hard / Work smart / Work together.” The mug was a gift from one of those mentees. (American Heart Association)

It's why his lab gladly shares its biobank of human iPSC lines and iPSC-derived cardiomyocytes with other labs. To date, his lab has sent out more than 3,500 vials of these stem cells to over 500 investigators in the U.S. and globally. He doesn't see them as competition, but as fellow advocates growing the field.

It's why many of the postdocs in his lab come from backgrounds like his—first generation college students, working class, immigrants, international scholars, former English as a Second Language students and more.

It's why he started a 10-week summer program for high school and college students from those same backgrounds. Many of those go from not having a connection to a scientist to earning a letter of recommendation from a Stanford faculty member to include with their college and graduate school applications. Joe hopes some of this diverse group will become future scientists as well.

And it's also why his rosters of patients look like a cross-section of society, from the rich and famous to everyday workers.



When Joe became the Simon H. Stertzer, MD, endowed professor at Stanford in 2015, he gave a moving speech that traced the arc of his life. He noted how many times he planned to go one way, then circumstances forced him to go another—and how often those disappointments became blessings.

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"If my family did not emigrate from Taiwan, for sure I would not have been a doctor because I lacked the motivation back then. While I was not accepted into Harvard Medical School, without going to Yale instead, I wouldn't have met my wife, Jade, or raised two wonderful kids. In residency, I was not accepted to Stanford but if I didn't go to UCLA, I would not have met my mentor Dr. Gambhir. And without meeting Sam, there's no way I could be a professor here at Stanford, doing what I do today," Joe said.



Blastoff

The Wus have been empty nesters for a few years, with both kids away at boarding schools.



Dr. Joseph Wu and his wife Jade visiting Krueger National Park in South Africa. (Photo courtesy of Dr. Joseph Wu)

This fall, Matthew is headed to college, pursuing a biomedical engineering degree, and Catherine is going into her senior year of high school.

Most mornings, Joe can be found swimming laps in the community pool in the neighborhood where he and Jade live.

On nights and weekends when Joe is not working, he's probably involved with his church, watching nature or wildlife documentaries (this spring, they visited Krueger National Park in South Africa), or reading non-fiction, primarily military history.

"Ask me anything about tigers, leopards, lions, and I can tell you about them," he said. "Ask me anything about military aircrafts and I can tell you that, too."

That's right, he remains in the grip of his childhood fascination with flight.



Joe likes to say that 1,000 years ago, traveling meant taking a boat from Sicily to Rome, and in 1,000 years, traveling could mean going from planet to planet.

He believes major strides in space travel will come as soon as his grandchildren's generation. This is why he believes science needs to start solving tomorrow's problems—such as how zero gravity impacts the cardiovascular system—today.

His interest in this led to a trip in March to Cape Canaveral, Florida. From a NASA viewing area, Joe – alongside his wife, two children, and three postdoctoral fellows – watched a SpaceX rocket blast off toward the International Space Station.

Although the little boy from Kaohsiung, Taiwan who once dreamed of being in the cockpit wasn't inside the rocket, trays of beating iPSC-derived cardiac organoids from his lab were.

It's a reminder that just because things don't turn out as originally planned, they can still turn out quite well.

"When you think about life, it's all about experiences and how we react to them. The road may be rocky sometimes, but I really believe God has a plan for all of us. Sometimes it's good experiences, and sometimes it's bad experiences. But as long as you have a positive attitude, you can find a positive aspect from any setback, and in the long run, things tend to work out OK." ●



Dr. Joseph Wu (left) and three of his postdoctoral fellows (Drs. Dilip Thomas, Xu Cao, McKay Mullen, from left to right) at the launch of a SpaceX rocket that carried iPSC-derived cardiac organoids from his lab. (Photo courtesy of Dr. Joseph Wu)

Comix From the Heart

Our AHA Library of Graphic Medicine continues to grow as we explored the stories of those individuals experiencing long covid. We heard from 12 individuals who shared their journey with long covid. The artists then illustrated the stories **using visuals only**...these comix are told without words and are designed to engage the reader in the immersive chaos the patients experienced. We've included the alt text for accessibility purposes.



Artist: Eric Bryan; Storyteller: Matthew Manos

New partnership focuses on providing integrated chronic NCD care in poor, rural areas around the globe

The American Heart Association along with Helmsley Charitable Trust, World Health Organization and UNICEF are key members of the advisory group for the PEN-Plus Partnership that seeks to improve healthcare for children and young adults living in extreme poverty.

Mark Schoeberl, AHA EVP of Advocacy, and Dr. Jose Ferrer, AHA Director of International Health, recently joined the rest of the advocacy group for a high-level planning and strategy meeting and site visit in Mozambique, one of over 20 countries where the PEN-Plus program is implemented.

The PEN-Plus Partnership, developed by The Lancet NCDI Poverty Network and administered out of Brigham and Women's Hospital in Boston, Massachusetts, and Universidade Eduardo Mondlane in Maputo, Mozambique, develops strategies to increase the accessibility and quality of care for complex and severe chronic noncommunicable diseases (NCDs), like rheumatic and congenital heart

disease, sickle cell disease and type 1 diabetes in rural areas of low- and lower middle-income countries (LLMICs) where most of the world's poorest billion live.

PEN-Plus helps provide high-quality care for these less common, but more severe conditions by decentralizing services normally available only at referral hospitals in major cities, making treatment both inaccessible and unaffordable for the rural poor in many LLMICs. As a result, many poor children and young adults go without treatment for severe conditions that almost always lead to premature death if left untreated.

The program addresses this service gap by bringing life-saving chronic care for severe NCDs to first-level rural hospitals for the first time. PEN-Plus trains mid-level providers such as nurses and clinical officers in the skills needed to provide integrated chronic care services for severe NCDs, including diagnosis, symptom management, psychosocial support, palliative care

and referrals for surgical and other specialty care when necessary. PEN-Plus also strengthens services at lower-level facilities by providing training, mentorship and supervision for staff.

The overall goal of PEN-Plus is to increase the number of the world's poorest children and young adults on treatment for severe chronic NCDs by a factor of 10 by 2030.

The AHA provides funding and technical support to the PEN-Plus Partnership by co-chairing the Cardiac Expert Group and participating in working groups on training, advocacy, research, monitoring and evaluation.

PEN-Plus complements and integrates with World Health Organization's Package of Essential Noncommunicable Disease Interventions (WHO PEN), which addresses more common NCDs such as hypertension, type 2 diabetes and cancer at the primary health care level.

For more about the PEN-Plus Partnership, visit ncdipoverty.org/penplus-partnership.

Fellow of the American Heart Association (FAHA)

Fall 2023 Submission Deadline – July 10, 2023

Spring 2024 Cycle Opens – late July 2023

Spring 2024 Submission Deadline – January 24, 2024

professional.heart.org/en/partners/fellow-of-aha

Benefit Booster: Professional Volunteer Search Tool

Connecting with global heart leaders is one of the many resources available to you exclusively as a Professional Member. One of the ways we encourage our members to participate in the spirit of partnership and engagement is to take advantage of the Professional Volunteer Search Tool. This tool provides members exclusive access to other active members who want to volunteer. Collaboration, partnership, and volunteerism are essential to the AHA and the advancement of science. Without the collaborative efforts of our professional members, we couldn't

be a relentless force for a world of longer, healthier lives.



The Professional Volunteer Search Tool is the first option under the Tools and

Resources tab on your Professional Heart Daily homepage. It can help you find other AHA volunteers in your area and do so much more. With this tool, you can search using very specific criteria such as location, gender, expertise, ethnicity, degree, and classification. You can search domestically by state or region or by country from our international community. This tool allows you to search within a particular council's membership or among specific specialties. You can even lookup volunteers by career stage.

[Check out this video to learn more.](#)



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A Near Tragedy Turned into Positive Change

After years of languishing in Congress, the bipartisan Access to AEDs Act (H.R. 2370 and S. 1024) may have a chance to become law with the help of Buffalo Bills safety Damar Hamlin, who suffered a sudden cardiac arrest while playing on Monday Night Football. Mr. Hamlin is using his personal experience to spur positive change and visited the nation's capital to participate in a press event sponsored by the American Heart Association. Watch here: youtube.com/watch?v=pJcZFAcJc0I

Speaking before a standing-room-only crowd near the U.S. Capitol— together with other sudden cardiac arrest survivors and family members of

children lost to sudden cardiac arrest— Mr. Hamlin said he is, “committed to helping ensure that schools are just as prepared and trained to respond in a time of crisis as those on the sidelines of an NFL game.”

American Heart Association CEO, Nancy Brown who was in Washington for the reintroduction of the Access to AEDs Act said, “If everyone who suffered an out-of-hospital cardiac arrest like Damar’s had the same opportunity for high-quality emergency medical assistance think of the difference that would make in this world. This legislation will help make that a reality.”

The American Heart Association is leading an advocacy campaign in support of the legislation and is joining a myriad of partners including the NFL and other major sports leagues, care providers, patient groups, and more to make the Access to AEDs Act the law of the land.

The bill—which has been introduced in previous Congresses but has new momentum this year—would establish a federal grant program to support CPR and AED training in K-12 schools, the purchase of AEDs and equipment, and the establishment of cardiac emergency response plans. To express your support, please visit: act.yourethecure.org/CH09kKS. ●



American Heart Association.
**National CIED
Infection Initiative**

CIED Infection is a Health Crisis

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#Treat2BeatCIEDInfection

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automatically bring you the latest science, news and discussions related to your interests. [Learn more.](#)

AHA|ASA Scientific Event Schedule

2023



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

2024



International Stroke Conference (ISC)

February 7 – 9, 2024, Phoenix, AZ



EPI|Lifestyle Scientific Sessions

March 18 – 21, 2024, Chicago, IL



Vascular Discovery

May 15 – 18, 2024, Chicago, IL



Basic Cardiovascular Sciences (BCVS) Scientific Sessions

July 22 – 25, 2024, Chicago, IL



Hypertension Scientific Sessions

September 5 – 8, 2024, Chicago, IL



Resuscitation Science Symposium (ReSS)

November 16 – 17, 2024, Chicago, IL



Scientific Sessions

November 16 – 18, 2024, Chicago, IL



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Congratulations to AHA's Newest Research Awardees

The American Heart Association recently offered nearly \$58 million in funding for 211 awards that began on April 1. The funding is for **AHA Institutional Research Enhancement Awards, Career Development Awards, Established Investigator Awards, Research Supplements to Promote Diversity in Science, Merit Awards,** and a new **Strategically Focused Research Network.**

Merit Awardees

Alan Daugherty, PhD, DSc, FAHA
University of Kentucky
Research Foundation
Therapeutic Advances in Aortopathies

Anthony Rosenzweig, MD
University of Michigan Medical Center
Exercise Pathways Promoting Repair and Recovery after Ischemic Injury in Hearts and Brains

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

University of California, Davis – Psychosocial Stressors and Exposomics on CV health in underserved multiethnic populations in Northern CA (PRECISE)

- Center Director: Dr. Nipavan Chiamvimonvat
- Project PIs: Dr. Xiaodong Zhang and Dr. Martin Cadeiras
- Partnering Institutions: UC Davis Cardiovascular Research Institute (CVRI), California State University, Sacramento (Sacramento State)

Virginia Commonwealth University – Chronic psychosocial stress and CV dysfunction in cancer survivorship

- Center Director: Dr. Greg Hundley
- Project PIs: Dr. Fadi Salloum and Giselle Melendez
- Partnering Institutions: Wake Forest University and Atrium Health Wake Forest Baptist, Wake Forest School of Medicine Department of Biostatistics and Data Science

The Ohio State University – Physical activity Reduces Effects of psychosocial stress And CV Health (PREACH)

- Center Director: Dr. Kristin Stanford
- Project PIs: Dr. Joshua Joseph and Dr. Loren Wold
- Partnering Institution: Meharry Medical College ●

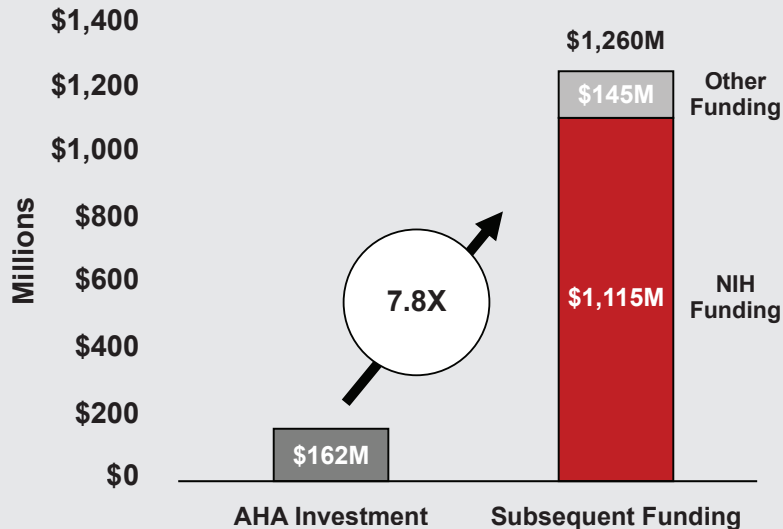
The **AHA Mentoring Program** provides a unique opportunity for members of all stages of their careers to benefit from the experience and knowledge of our most passionate members. Whether you choose to become a mentor or mentee, you will be involved in a relationship that can help grow and enhance your career.

Visit us today

professional.heart.org/en/partners/mentoring-for-professionals

Impact of Early Career AHA Funding

For every \$1 of AHA early career faculty development award investment, awardees receive \$8 in subsequent funding:



A separate analysis revealed that AHA early career funding leads to 2X as many subsequent grants and 3X as much subsequent funding as those who were just below the payline and did not receive AHA funding early in their careers:

Comparison of proposals above and just below the AHA payline	Number of AHA Applicants/Awardees	Subsequent Grants Awarded	Subsequent Funding, in millions
Just above AHA payline	138	64	95
Just below AHA payline	136	35	29 ●

AHA Fall Research Funding Deadlines

Proposal deadlines have been announced for training and early career funding to commence in 2024. ProposalCentral will open eight weeks prior to each deadline for submissions. Applicants can prepare **required application documents** in advance.

- **AHA Predoctoral Fellowship** – Wed., September 6, 2023
- **AHA Postdoctoral Fellowship** – Thurs., September 7, 2023
- **Institutional Award for Undergraduate Student Training** – Tues., September 13, 2023
- **AHA Institutional Research Enhancement Award (AIREA)** – Wed., September 14, 2023
- **Career Development Award** – Wed., December 6, 2023 ●

JOBS & CAREER RESOURCES

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WATCH THE SERIES

Supported by an education grant from Novo Nordisk

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Exciting News About Scientific Sessions 2023

The planning for exceptional learning and interactive opportunities for Scientific Sessions 2023 is accomplished by the Committee for Scientific Sessions Programming. The committee chair, Dr. Amit Khera and vice-chair Dr. Joanna Chickwe are planning an impactful can't-miss event.

Connect 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 and medicine science. This is only made possible by dedicated AHA professional volunteers and every AHA scientific Council representing 28

communities in cardiovascular science and medicine.

Come experience the latest developments for transforming patient care and influencing health with cardiovascular leaders and peers in Philadelphia, PA for Scientific Sessions November 11-13, with Pre-Sessions Symposia & Early Career Day on November 10. ●



Learn more at
JOIN.HEART.ORG

Develop Your Career

Join a global community of cardiovascular & brain health thought leaders.





Let the AHA scientific councils
send you to #AHA23!



Apply for a Travel Grant Today!

Travel Grants help defray travel costs for early career investigators, trainees, and students to participate in [Scientific Sessions 2023](#).

Award Application Window:
Now through **August 25, 2023, 6:00 p.m. CT**

Visit [Travel Grants](#) to see a list of opportunities, eligibility, and application instructions.

No application fees are required to apply (it only takes a few minutes) and almost half of the travel grant opportunities do not require an abstract submission.

AHA Professional Membership with affiliation to the sponsoring council is required at the time of application.

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Learn How Antiarrhythmic Drugs Can Improve the Quality of Life for AFib Patients with this new Educational Module for Healthcare Professionals

Improve Your Knowledge and Skills in Early Rhythm Control & Management of AFib with CE, ACPE, and ABIM MOC Credits Available.

Atrial Fibrillation is a common heart condition that affects millions of people worldwide. It is associated with an increased risk of stroke, heart failure, and other cardiovascular complications. Managing AFib requires a multidisciplinary team approach involving healthcare professionals from different specialties. The Role of Antiarrhythmic Drugs in Early Rhythm Control & Management

of AFib e-learning module offers an opportunity for health care professionals to improve their knowledge, competence, and performance in the use of available antiarrhythmic drugs in early rhythm control and the management of AFib. This module will reduce the economic burden associated with hospitalizations and improve patient outcomes by offering education on the safety and efficacy of available

antiarrhythmic drugs and emphasizing the importance of early identification and management of AFib. Healthcare professionals involved in the care of patients with AFib will find value in this activity as the module offers CE, ACPE, and ABIM MOC credits, making it an excellent opportunity for healthcare professionals to continue their education and improve outcomes. Improve your knowledge and skills today by visiting learn.heart.org! ●



The Role of Antiarrhythmic Drugs in Early Rhythm Control and The Management Of Atrial Fibrillation

Learn how antiarrhythmic drugs improve quality of life for Patients with AFib.

Antiarrhythmic drug therapies remain a dominant strategy for rhythm control worldwide despite advances in ablation techniques. What are the options, use requirements, and monitoring strategies for long-term management of patients on antiarrhythmic drugs for AF? **CE, ABIM MOC, and ACPE credits available**

Access this resource at learn.heart.org

Supported by an education grant from Sanofi

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When: You decide. We seek 45 days of lead time but will try to fulfill your request based on speaker availability.

Where: Anyplace you hold a hospital grand rounds type session.



Available Series:

Improving Outcomes for Patients with Atrial Fibrillation

Atrial Fibrillation (AFib) is the most common form of arrhythmia in the United States. Participants in this course, supported by an independent medical educational grant from Sanofi US, will be educated on the application of current guidelines and medical evidence in the management of Atrial Fibrillation as well as research findings in antiarrhythmic therapy and early rhythm-control. Earn CE and ABIM MOC credit.

Unmet Needs in Hypertension Treatment Options

Hypertension increases with age and treatment-resistant hypertension exists within the US population. Participants in this course, supported by an independent medical educational grant from Medtronic, will learn about treatment and management options for patients with resistant hypertensive, how to address health care disparities in treatment and management, and shared decision-making strategies to improve health equity. Earn CE and ABIM MOC credit.

Schedule A Presentation Today!
<http://spotlight.heart.org>

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Reflecting on the Previous Two Years



I am delighted to report on the progress of the Council on Cardiopulmonary, Critical Care, Perioperative and Resuscitation (3CPR) over the past year.

During my tenure as chair, we have worked diligently to implement programs, research and initiatives that further the AHA mission, and I am proud to mark my last chair report at the same time as my 10th anniversary as leader of the council.

Over the past two years, our efforts have included expanding the 3CPR Council program to include cardiology critical care and developing strategies to increase the number of FAHAs and members-at-large. We have also recruited numerous talented young clinicians and researchers from different backgrounds to ensure a bright future for our council.

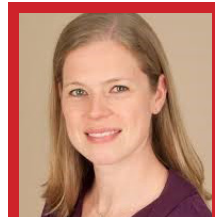
Despite the pandemic, we have hosted successful events such as Resuscitation Symposium, Scientific Sessions and, most recently, webinars led by our Early Career Committee. Additionally, we have established a new award to recognize mid-career investigators who have made significant contributions to their field and to encourage them to pursue their research.

It has been an honor to serve with you all on this important mission, and I am confident that our efforts will continue

to bear fruit in the coming year. Thank you again for the opportunity to serve as chair, and I am grateful for the hard work and dedication of the 3CPR Council members.

As I step down, Dr. Sarah Perman will serve as chair and Dr. Bradley Maron as chair-elect. I am confident that Sarah and Bradley, with their extensive experience and knowledge, will successfully guide the council forward. Best of luck to them!

Sincerely,
Sébastien Bonnet



Sarah Perman
MD, MSCE, FAHA

New 3CPR FAHA Members

Congratulations to the following 3CPR Council members recently elected as Fellow of the American Heart Association (FAHA):

- Sachin Agarwal
- Jonathan Elmer
- Andrea Frump
- Elena Goncharova
- Lahouaria Hadri
- Sarah Haskell
- Cindy Hsu
- Tim Lahm
- Yen-Chun Lai
- Kasper Lauridsen
- Kurt Prins
- Edda Spiekerkoetter
- Rebecca Vanderpool

3CPR Council Webinar Series

The 3CPR Council recently started a monthly webinar series that features topics of interest for AHA members, along with hosting journal clubs. Our first webinar in February on mentorship and sponsorship was highly attended. The panel consisted of Drs. Jane Leopold (Brigham and Women's Hospital), Tom Aufderheide (Medical College of Wisconsin) and Mark Nicolls (Stanford University). Drs. Edda Spiekerkoetter (Stanford University) and Maryam Sharifi-Sanjani (University of Pittsburgh) served as moderators.

Some key highlights from the Mentorship and Sponsorship webinar with Dr. Spiekerkoetter are outlined below.

Why is it important to have both mentors and sponsors?

Mentors are necessary but not sufficient. As you move up in your career, it is important to have the sponsorship of someone with enough leverage in the organization to make things happen.

What is the difference between mentorship and sponsorship?

Mentors have mentees, "learners." A mentor could be anyone in a position with experience desired by a mentee who can offer advice and support and provide feedback to aid a mentee's personal and professional development. Mentors support mentees through discussion on how to advance their careers and expand their networks. **A mentor has knowledge and will share it with you.**

Sponsors have proteges, "proven performers." A sponsor is a senior-level staff member with access to power and leadership invested in a protégé's career success. Sponsors are personally vested in the upward movement of their protege. Sponsors promote proteges by using their influence and networks to connect them to high-profile assignments and people. **A sponsor has power and will use it for you.**

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.](#)

Mentor

**Mentors have mentees
"Learners"**

A mentor **could be anyone** in a position with experience desired by a mentee who can offer advice and support.

Mentors **provide feedback to aid a mentee's personal and professional development.**

**A mentor has knowledge and will share it with you.
A sponsor have power and will use it for you.**

Sponsor

**Sponsors have protégés
"Proven performers"**

A sponsor is a **senior-level staff member with access to power and leadership** invested in a protégé's career success.

Sponsors are **personally vested in the upward movement** of their protégé.

Mentor

Develop

Mentors help mentees **develop** a career vision

Support

Mentors **support** mentees through discussing how to advance their careers and expand their network.

Encourage Advancement

Mentors share the "unwritten" rules for **advancement** in their organization with their mentees.

Offer Insight

Mentors **offer insight** on how a mentee can increase visibility through funding key projects and people

Sponsor

Drive

Sponsors help protégés **drive** their career vision

Promote

Sponsors **promote** protégés by using their influence and networks to connect them to high-profile assignments and people

Enable Advancement

Sponsors actively involve protégés in experiences that **enable advancement**

Champion Visibility

Sponsors **champion** their protégés' **visibility**, often using their own platforms and reputation as a medium of exposure

Adapted from Maruann Baumaarten "The Keu Role of Sponsorship"

Ruetzler giving a short presentation on the latest AHA MINS Scientific Statement, how a scientific statement is created, the different stakeholders involved, and we got a glimpse of the length and structure of the process. Dr. Ruetzler next talked about his career as a physician-scientist and how this career choice impacts and benefits his clinical practice. He believes that actively conducting research and "testing" the findings on his patients is the best way to learn and discover more things to investigate. We concluded with an engaging discussion on neuroprognostication of cardiac patients, role of neurointensivists, the need for change of our current neuroprognostication practices to allow for less bias and self-fulfilling prophecy, and how we can ensure that we do not prematurely neuroprognosticate.

Scientific Sessions and Resuscitation Science Symposium 2023

We encourage 3CPR Council early career members to attend the Max Harry Weil Award (associated with Resuscitation Symposium), Courmand and Comroe Early Career Investigator Award and 3CPR Junior Investigator Travel Grant (both affiliated with Scientific Sessions). There are also 3CPR Emergency Medical Services (EMS) Travel Grants to Scientific Sessions. We recommend that 3CPR Council members attend the Dickinson W. Richards and Kenneth D. Bloch Memorial Lectures.

The Twitter account of the American Heart Association 3CPR Council (@3CPRCouncil), managed by the Membership and Communications committees, is actively seeking to highlight new and upcoming research related to cardiopulmonary, critical care, perioperative and resuscitation.

We look forward to seeing you in Philadelphia during Scientific Sessions and the Resuscitation Symposium! ■

Figures courtesy of Dr. Spiekerkoetter

What should mentees/proteges do to cultivate and maintain mentorship/sponsorship relationships?

First and foremost, find an area of research they are passionate about and would like to invest in to build their career. Then find mentors/sponsors.

The relationship works best when it helps both parties. The mentee/protege should know that mentorship/sponsorship must be earned with performance and loyalty, should convey that she/he can be trusted, will take risks, will contribute 110% and will promote the legacy of the sponsor. In return, they will receive guidance from the mentor/sponsor, access to their network and advocacy for their next promotion.

Perioperative and Critical Care Cardiology Webinar

In April, Drs. Christopher Barnett (University of California San Francisco) and Kurt Ruetzler (Cleveland Clinic) provided an update on Perioperative and Critical Care Cardiology. Drs. Clauden Louis (Brigham and Women's Hospital), Samantha Fernandez Hernandez (Baylor), Varinder Kaur Randhawa (University of Toronto) and Carlos Alviar (NYU) moderated the webinar.

Dr. Fernandez Hernandez provided an overview of the webinar:

We started with Chris Barnett talking about the different paths to critical care cardiology as well as the strengths and obstacles/weaknesses of each. Then we followed with Kurt

A Look Inside Vascular Discovery Meeting



One of the Council on Arteriosclerosis, Thrombosis and Vascular Biology's most anticipated events is the annual Vascular Discovery Meeting, organized in collaboration with the Peripheral Vascular Disease and Genomic and Precision Medicine councils.

This year, attendees met in beautiful downtown Boston, where exciting science was highlighted in invited lectures and abstract presentations.

Thanks to the chair of the Program Committee, Katey Rayner, for her past two years of service. We welcome Kathleen Martin as the incoming chair and Peter Henke as chair-elect. We look forward to seeing the great programming that will be showcased under their leadership.

For those who could not make the meeting, here are a few of the highlights:

- Dr. Masanori Aikawa was selected for the Jeffrey M. Hoeg Award for Basic Science and Clinical Research and presented a wonderful lecture on Systems Approach to Target Discovery for Macrophage Activation and Vascular Disease.
- Karen Hirsci, PhD talked about Regulation of Endothelial Cell Specification in Development and Disease as the Keynote Lecturer.
- Deepak Bhatt, MD, MPH, FACC, FAHA, FESC, MSCAI discussed Advances in Omega-3 Fatty Acid Research in the Distinguished Lecture.

The ATVB Council also sponsors numerous awards for different career levels:

- Finalists for the Investigator in Training Award were Yannick Cyr, PhD; Kelsey Jarrett, PhD; Kevin Magnum, MD, PhD; and Victoria Osinski, PhD. Yannick Cyr was selected as the winner.

The ATVB Council is also honored to present numerous travel grants this year. Twenty early career investigators were offered a travel stipend to attend the conference:

Anu Aggarwal, PhD
Adedoyin Akinlonu, MD
José Gabriel Barcia Durán, PhD
Jack Bontekoe, MD
Mayank Choubey, PhD
Jaser Doja, BS
Matthew Dungan, BS
Wenduo Gu, PhD
Mariia Kumskova, MD
Melissa Lempicki, BS

Omar Loya
Alishba Maira, MSc
Sujith Rajan, PhD
Erika Savage
Bhupesh Singla, PhD
Danesh Sopariwala, PhD
Anthony Spuzzillo, BS
Qian Xu, MD
Samantha Xu, MPH
Wei Zhang, PhD.

In addition, two travel grants, awarded to **Azuah Gonzalez, BS** and **Andrea Palos-Jasso, BS** were sponsored by the ATVB Diversity Committee sponsored travel grants to assist in ensuring that members from under-represented ethnic and racial backgrounds attended the conference.



Travel Grant Winners pictured with Dr. Tsao

- The winner of the Irvine H. Page Young Investigator Research Award was Jesse Williams, PhD and finalists were Scott Gordon, PhD; Rajat Gupta, MD; and Arif Yurdagul, PhD.
- The Kenneth M. Brinkhous Early Career Investigator Prize in Thrombosis also had four finalists: Frederik Denorme, PhD; Colin Evans, PhD; Li Guo, MD, PhD; and Woosuk Hur, PhD. Frederik Denorme, PhD won the award.
- Anne Sumner, MD, FAHA, received the ATVB Diversity Committee's Diversity and Inclusion Leadership Recognition Award.

The ATVB Women's Leadership Committee supports two major awards for women during Vascular Discovery:

- The Outstanding Mentorship of Women Award was presented to Hong Wang, MD, PhD, EMBA, during the Mentor of Women Luncheon.
- The Emerging Scientist Award for Women is granted to the women with the top highest scoring abstracts. The five finalists were: Meenakshi Banerjee, PhD; Caitlin Bell, MD; Irina Portier, PhD; Sheila Sharma, BS, ScM; and Mikala Zelows, BS. Each presented their posters during the Poster Session. The winner was Meenakshi Banerjee, PhD.

The Women's Leadership Committee, chaired by Dr. Hanrui Zhang, also had a networking panel discussion with featured guests from the community. These events granted participants the opportunity to network and mingle—something that we were all looking forward to during the conference.

Finally, in regard to programming, the ATVB Early Career Committee, chaired by Dr. Robert Bauer, is as robust as always, and plans tremendous events for the early career folks who attend our conference. They hosted two morning sessions, one Thursday and one Friday. Thursday morning's session was an academic round-round table discussion and Friday's focus was on industry discussion. Both events were well attended.

As stated above, the Diversity Committee, chaired by Dr. Francine Welty, were heavily involved in the program, and hosted a Career Development Session titled, "Inclusive Mentoring" which focused on increasing diversity in mentorship and lab settings.

Another opportunity for engagement initiated this year is Council Office Hours, an online opportunity where council members can drop by, chat

and have a relaxed discussion about topics of interest. Through these forums, we hope to hear from current and prospective members as to what is important about the ATVB Council specifically and AHA generally, and how we can increase the value of the council to investigators of all career stages. We also envision Council Office Hours as a place to provide more transparency and context to council operations.

During our first session, we focused on two general questions: "What can we do for you in terms of membership, and what are you most looking forward to at Vascular Discovery?" We had a lively session in which we covered topics including how members can get involved with different council committees; novel opportunities to contribute content to our flagship journal; and topics for future scientific webinars.

Look out for future Office Hours and please send along suggested topics you would like to discuss.

Thanks for your continued commitment to ATVB. Stay safe, stay well and be kind to one another. ■

The AHA Mentoring Program

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

Whether you choose to become a mentor or a mentee, you will be involved in goal-setting and creation of an action plan to reach those goals.

[Learn more.](#)



International Stroke Conference 2024

February 7–9, 2024 | Phoenix, AZ

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American Heart Association.



strokeconference.org/submitscience

Introducing the BCVS Communications Committee



**CONNECTING
WITH THE
CHAIR**

Jianyi "Jay" Zhang
MD, PhD, FAHA

One longstanding mission of the Council on Basic Cardiovascular Sciences is to engage with the AHA's basic science community to promote and disseminate the latest impactful cardiovascular disease and stroke research, outreach opportunities and career development for all our members.

As new communication platforms emerge and evolve, the BCVS Council is committed to remaining at the cutting edge. So we've recently established a Communications Committee to promote our members and their exciting scientific advances.

The BCVS Council's Communications Committee is chaired by Dr. Nicole Purcell, with Dr. Venkata Garikipati serving as chair-elect. Also serving on the Communications Committee is Dr. Jane Freedman, editor-in-chief of *Circulation Research*.

The full committee, highlighted here, invites you to connect and follow them on social media for the latest updates on BCVS Council news, late-breaking science, funding announcements, and more.

The Communications Committee aims to enhance connectivity across all BCVS Council membership. So if you have thoughts or suggestions, get in touch with them through the Twitter handles shown here.

Formation of a New BCVS Council Science Subcommittee

Another important activity of the BCVS Council is writing scientific statements and guidelines in partnership with other AHA councils. In recent years, the BCVS Council initiated or co-sponsored statements regarding cardiopulmonary consequences of vaping in adolescents, preclinical models of chemotherapy-associated cardiovascular toxicity, the use of human iPSC-derived cardiomyocytes in drug cardiotoxicity testing, medical marijuana, recreational cannabis and cardiovascular health.

With a growing interest in developing new scientific statements and guidelines on a variety of topics, the BCVS Council has assembled a task force to create a new Science Subcommittee.

The goal of the Science Subcommittee is to identify critical gaps in the scientific literature where scientific statements and learning materials could add clarity and direction. They will then identify and recruit experts to draft these statements and guidelines to effectively communicate to non-scientists who will also attend Science Subcommittee meetings.

Additional roles of the subcommittee will be to assist with AHA and BCVS Scientific Sessions programming, as well as create topics for the AHA's Lifelong Learning platforms and online programs. It is anticipated that the Science Subcommittee will be assembled by fall 2023 and that their first meeting will be held in late 2023 or early 2024. We look forward to all of their contributions to effectively communicate our science with the public and improving heart health.

BCVS Scientific Sessions 2023

The 17th annual BCVS Scientific Sessions, *Innovations and Discovery in Cardiovascular Science*, will be held in Boston, Massachusetts on July 31-August 3. Dr. Sumanth Prabhu, chair of the Program Committee, and Dr. Farah Sheikh, chair-elect, have put together an outstanding program.

Much-anticipated sessions include:

- Cardiac Repair and Tissue Engineering
- Mechanisms of Cardiac Fibrosis
- Metabolic Alterations in Heart Disease

The highlight of the meeting is the keynote address from Dr. Eric Olson, a pioneer in cardiovascular disease research, entitled, "Thinking Big and Thinking Small about the Heart."

The program also includes an Asian Cardiovascular Symposium on July 30, one day before the start of the meeting. An Early Career Pre-Conference and an Early Career Luncheon are also planned, providing dedicated times for scientific interaction, as well as career development and networking opportunities for early career investigators (ECIs). To further emphasize the amazing work of our ECIs, the BCVS Council will host its annual Outstanding ECI Award Competition.

Other highlights will include the Women in Science Breakfast, ECI Social and Council Dinner. With all of these exciting scientific sessions and opportunities for interaction, BCVS 2023 is a meeting you do not want to miss. Registration is still open, **so sign up now!**



The BCVS Communications Committee: **Top row (left to right):** Dr. Nicole Purcell (Huntington Medical Research Institutes); Dr. Venkata Garikipati (Ohio State University); Dr. Jane Freedman (Vanderbilt University); Dr. Dominic Del Re (Rutgers University); Dr. Jennifer Kwong (Emory University). **Bottom row (left to right):** Dr. Sadia Mohsin (Temple University); Dr. Jessica Pflieger (Virginia Tech Carilion); Dr. June Rhee (City of Hope); Dr. Nazish Sayed (Stanford University); Dr. Ronald Vagnozzi (University of Colorado Anschutz).

AHA Scientific Sessions 2023

We look forward to Scientific Sessions 2023 at the Pennsylvania Convention Center in Philadelphia. Pre-Sessions Symposia and Early Career Day is November 10, followed by Scientific Sessions November 11-13.

The BCVS Council looks forward to the early career programming, including "Success Through Failure: Lessons from Famous Scientists" and "Gene Therapy for Heart Disease: Key Challenges to Address," as well as the Melvin L. Marcus and Lewis N. and Arnold M. Katz Basic Science awards for ECIs.

Additional BCVS highlights of the annual meeting are the George E. Brown and Thomas Smith Memorial Lectures. Other prizes include the BCVS Distinguished Achievement Award and several travel awards and grants, such as the BCVS Underrepresented Racial and Ethnic Groups Travel Grant.

So Scientific Sessions 2023 promises to be a stimulating conference with experts in basic and clinical science meeting with the common goal to combat heart disease and save lives.

Register today!

BCVS Early Career Webinar Series

The BCVS Early Career Committee continues to offer webinars that are highly informative and well attended. Please watch your emails and follow social media to find out when the next webinar will be offered.

BCVS Early Career Mentorship Program

Established in 2019, the Early Career Mentorship Program promotes closer interaction between established and early career investigators in the BCVS Council. While the program was halted by the COVID-19 pandemic, the BCVS Early Career Committee has been working hard to get it back on track and moving forward. This program gives young researchers the opportunity to advance their careers and research by having mentorship either via virtual sessions or the opportunity to intern/observe in person in an established laboratory. If you are interested in becoming a mentor in the program, please contact the Early Career Committee chair, Susmita Sahoo, at susmita.sahoo@mssm.edu. If you are an ECI and want to apply to be matched with a mentor, **visit the AHA website** for more information and to view the application.

BCVS Celebrates the AHA's Second Century

The year 2024 will mark 100 years of the AHA, founded by six cardiologists on June 9-10, 1924. Over this past century, the AHA has contributed to major lifesaving discoveries in cardiovascular and stroke research. These include the artificial heart valve and cholesterol-inhibiting drugs. In this time, more than \$5 billion has been dedicated to scientific research, with over 47,000 projects funded. Among these AHA-funded scientists, 14 are Nobel Laureates, as well as numerous ECIs funded through fellowships and career transition awards.

In addition to research, the AHA supports placing monitoring and emergency equipment, such as defibrillators, in medical centers. We also conduct over 22 million CPR trainings each year, and are an invaluable resource for cardiovascular disease and stroke information for patients, scientists and health care professionals. These are just some of the major impacts that the AHA has had over the past century.

The Centennial Celebration will, therefore, be a celebration of these major advances in heart and brain health, as well as all of the staff, volunteers and donors who have and continue to make it all possible.

Multiple events are planned to mark this auspicious occasion and BCVS is excited to be involved. Throughout 2024, AHA journals will publish a series of articles across the entire journal portfolio written by international thought leaders as our "Centennial Collection." Be on the lookout for perspectives on various topics and emerging disciplines in the field of cardiovascular research.

Work in Establishing the BCVS India Chapter

A pioneer in the field of regenerative medicine, Dr. Jay Zhang, MD, PhD, professor and chair of biomedical engineering, along with redox biologist, Dr. Rajasekaran Namakkal-Soorappan, associate professor in the Department of Pathology at the University of Alabama at Birmingham (UAB), visited Chennai, Tamil Nadu (Northern India) for various collaborative activities during February/March 2023.

Dr. Zhang presented a keynote lecture at the International Symposium on Disease Mechanisms and Translational Science, conducted by the University of Madras - Departments of Zoology, Medical-Biochemistry, Biochemistry, C3 Research Foundation and Presidency College (Chennai) on March 6.

The International Forum of Translational Science (IFTS) recognized Dr. Zhang with the Leader in the Field of Regenerative Medicine Award 2023. The symposium attracted over 200 attendees from clinical and basic science research communities. Dr. Zhang's presentation on recent advances in remuscularization of cardiac tissue using stem cells and cardiac patches garnered impactful interactions among the audience.

Dr. Zhang and Dr. Namakkal-Soorappan also traveled to ERA Medical University, located in Lucknow, UP (Northern India) on March 7-9. The Department of Personalized Medicine at ERA University welcomed Drs. Zhang and Namakkal-Soorappan to give special lectures. Dr. Zhang highlighted the updates related to recent developments in stem cell therapy in the heart and encouraged interaction with the cardiologists on clinical trials in suitable patient cohorts that demand regenerative medicine.

The ERA leadership, along with the cardiologists, expressed willingness to get approvals and begin these trials in the near future. Dr. Namakkal-Soorappan underlined the importance of screening for circulatory redox milieu in the elderly who develop various forms of heart diseases, intensifying the need for designing appropriate therapeutic protocols.

The vice chancellor, Dr. Abbas Ali Mahdi, professor and head of personalized medicine, Dr. Farzana Mahdi, Dr. Siraz Rizvi (assistant professor of biochemistry) and Dr. Thasleem Reza (professor in the Co-Research Facility at ERA University) participated in productive discussions.

On March 9, Dr. Zhang and Dr. Namakkal-Soorappan visited the cardiology and pathology departments at Sri Ramachandra Medical University. There was a warm welcome for Dr. Zhang by the vice

(continued on page 24)

(continued from page 23)

chancellor, Dr. Uma Sekar, and Dr. K. Balaji Singh, dean of medicine.

Faculty from various institutions in Chennai, Tamil Nadu, India, including Dr. TR Muralidharan, MD, professor and head of the Department of Cardiology, and Dr. B. Vinodkumar, president of the Chennai Cardiac Care (C3) Foundation, expressed their interest to establish a strong research and academic collaboration with UAB. Dr. Zhang emphasized the need for regular and sustainable interactions among investigators that share common research interests; extent of this will involve exchange of knowledge through training residents/fellows and faculty between the institutions. The outcome of these collaborations serve to enhance mutual educational and research benefits for the institutions.

"The trip was filled with abundant opportunities for learning, sharing and collaborating with a diverse

group of cardiologists, clinicians and biomedical science researchers," Dr. Zhang says.

Topics of discussion ranged from data exchange, applying artificial intelligence tools, improving clinical methods, student/faculty exchange for research and training opportunities and educational activities.

Importantly, Dr. Zhang invited all groups from the University of Madras (Dr. C. Arulvasu, Dr. P. Kalaiselvi, and Dr. S. Sudhandiran), Dr. B. Neena (Presidency College), Dr. B. Ramalingam (TRC, Chennai), Dr. TR Muralidharan (Sri Ramachandra Medical University, Chennai) and Dr. B. Vinodkumar (C3 Research Foundation), and Drs. Abbas Ali Mahdi, Farzana Mahdi and Siraz Rizvi) to form the India Chapter for AHA-Basic Cardiovascular Sciences and begin organizing annual international meetings to amplify research collaborations, thereby promoting knowledge exchange and improving clinical care.

Social Media Ambassadors: Your Link to #BCVS23 and #AHA23

If you can't attend BCVS or Scientific Sessions this year, connect with our Social Media Ambassadors and experience the next best thing! Stay engaged and follow **#BCVS23** in July and **#AHA23** in November on Twitter, Facebook, Instagram, and more. BCVS Social Media Ambassadors will be providing up-to-the-minute news, insights and experiences from the floor of the Boston Seaport Westin during BCVS 2023, and from Philadelphia during Scientific Sessions 2023. Even if you are in attendance, let our Ambassador team keep you even more informed on the can't-miss basic science, workshops, exhibits and posters. The BCVS 2023 Social Media Ambassadors will be announced soon, but check out **@AHAScience** for all meeting and science news from the AHA. ■



Basic Cardiovascular Sciences 2023

July 31–August 3, 2023 | Boston, MA

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Highlighting Notable Accomplishments



The Council on Clinical Cardiology has had a productive several months and continues to demonstrate its commitment to advancing the field of cardiovascular medicine through groundbreaking research, educational events and impactful publications.

Here are highlights of several notable accomplishments of the subcommittees:

- In February, the Women in Cardiology (WIC) Committee hosted a virtual webinar on motherhood and thriving as a female cardiologist, led by Renee Bullock-Palmer, MD, FAHA, and Laxmi Mehta, MD, FAHA. The event provided valuable insights into the unique professional challenges faced by mothers in the field of cardiology. The winner will be announced later this summer.
- The Early Career Committee held a virtual webinar in May, which brought together program directors from academic healthcare systems to answer tough questions from fellows-in-training. This event provided guidance on how to successfully market oneself and identify academic opportunities.
- The council's 12 science subcommittees have been actively writing and publishing scientific statements on a wide range of clinical topics. These subcommittees have identified gaps and produced high-impact statements across a spectrum of cardiovascular science. The council has published 25 statements from 2021-present, covering topics such as exercise training for chronic heart failure, management of acute coronary syndrome in the older adult population and physician wellness and burnout in academic medicine. These statements provide valuable insights into the latest research and best practices in these areas and

can help clinicians make informed decisions about patient care even in areas where the evidence base is scant.

FAHA

The Membership/Communications Committee has elected the following candidates as Fellows of the American Heart Association (FAHA), conferred by the Council on Clinical Cardiology.

Claudio A Bravo, MD, FAHA

University of Washington
Seattle, Washington

Bram Geller, MD, FAHA

Maine Medical Center
Portland, Maine

Emily Lau, MD, MPH, FAHA

Massachusetts General Hospital
Boston, Massachusetts

Toshiyuki Nagai, MD, PhD, FAHA

Hokkaido University
Graduate School of Medicine
Sapporo, Japan

Rasmus Rivinius, MD, MHBA, FAHA

Universitaetsklinikum und Medizinische
Fakultaet Heidelberg
Heidelberg, Germany

Melanie Sulistio, MD, FAHA

UT Southwestern Medical
Center, Dallas
Dallas, Texas

Matthew Tomey, MD, FAHA

Icahn School of Medicine at
Mount Sinai
New York, New York

We are delighted to announce

Dr. Judith Hochman, MD, FAHA, has been selected as the recipient of the 2023 CLCD Distinguished Achievement Award. She will be formally recognized and conferred at the CLCD Council Dinner at AHA Scientific Sessions 2023, in Philadelphia. We hope you all will consider joining us at the Council Dinner.

Lastly, the council welcomes Dr. Larry Allen (previously CLCD Council chair-elect) as incoming CLCD Council chair and Dr. Laxmi Mehta (past chair of the AHA's Cardiovascular Disease in Women and Special Populations Committee) as CLCD chair-elect. These physicians bring a wealth of

commitment, energy and expertise to the council's leadership, and we are thrilled to have them on board!

CLCD Early Career + FIT Committee Webinar

Title: Putting Your Heart First: How to Successfully Navigate the Academic Job Market in Cardiology

Scope: A virtual event facilitated by the Early Career Committee that brought together program directors from academic health care systems answering tough questions from fellows-in-training. We started with an overview of the various types of academic positions, how to identify opportunities and how to successfully market yourself. Then, a moderated panel discussion and live viewing offered interactive guidance. This event was sponsored by the AHA CLCD FIT/EC Committee.

Moderators:

Monica Mukherjee, MD, MPH, CLCD FIT/EC Committee chair, Johns Hopkins University

Introduction: Lara Kovell, MD, University of Massachusetts

Roundtable Discussion:

Benjamin H. Freed, MD, Program Director, Northwestern University

Annalise Chamis, MD, Program Director, Duke University

Jelani Grant, MD, Fellow-in-Training, Johns Hopkins University

G. Sipa Yankey, MD, Fellow-in-Training, University of North Carolina

Council on Clinical Cardiology Manuscript Update

The 12 science subcommittees as well as the Leadership Committee of the Council on Clinical Cardiology have been actively writing and publishing scientific statements on a wide range of clinical topics. The science subcommittees continue to identify gaps and produce high impact statements across a spectrum of

(continued on page 26)

(continued from page 25)

cardiovascular science. The 12 science subcommittees are:

1. Acute Cardiac Care and General Cardiology
2. Exercise, Cardiac Rehabilitation, and Secondary Prevention
3. Clinical Pharmacology
4. Electrocardiography & Arrhythmias
5. Heart Failure and Transplantation
6. Interventional Cardiovascular Care
7. Adults with Congenital Heart Disease (joint with YH)
8. Cardiac Imaging and Intervention (joint with CVRI)
9. Cardio-Oncology (joint with GPM)
10. Cardiovascular Disease in Older Populations (joint with CVSN)
11. Cardiovascular Disease & Stroke in Women and Underrepresented Populations (joint with Stroke)
12. Data Science and Precision Medicine (joint with GPM)

Publications 2021-present

2023

Interpreting Incidentally Identified Variants in Genes Associated With Heritable Cardiovascular Disease: *Data Science and Precision Medicine*

Supervised Exercise Training for Chronic Heart Failure With Preserved Ejection Fraction: *Heart Failure and Transplantation*

Atrial Fibrillation Occurring During Acute Hospitalization: *Acute Cardiac Care*

2022

Management of Acute Coronary Syndrome in the Older Adult Population: *Cardiovascular Disease in Older Populations*

Complementary and Alternative Medicines in the Management of Heart Failure: *Clinical Pharmacology*

Arrhythmias in Tetralogy of Fallot: Adults with Congenital Heart Disease: *Adults with Congenital Heart Disease*

Management Of Patients At Risk For And With Left Ventricular Thrombus: *Interventional Cardiovascular Care*

Physician Wellness and Burnout in Academic Medicine: *FIT and Early Career*

Sleep Disordered Breathing and Cardiac Arrhythmias in Adults: Mechanistic Insights and Clinical Implications: *Electrocardiography & Arrhythmias*

Polygenic Risk Scores for Cardiovascular Disease: *Data Science and Precision Medicine*

Escalating and De-escalating Temporary Mechanical Circulatory Support in Cardiogenic Shock: *Acute Cardiac Care*

Preventing and Managing Falls in Adults With Cardiovascular Disease: *Cardiovascular Disease in Older Populations*

Engaging Families in Adult Cardiovascular Care: *CLCD Leadership*

Management of Hypertension in Patients With Ventricular Assist Devices: *Heart Failure and Transplantation Committee*

Advances in Managing Transition to Adulthood for Adolescents With Congenital Heart Disease: *Adults with Congenital Heart Disease*

Cardio-Oncology Drug Interactions: *Clinical Pharmacology*

2021

Future Perspectives of Cardiovascular Biomarker Utilization in Cancer Survivors: *Cardio Oncology*

Guidance for Timely and Appropriate Referral of Patients with Advanced Heart Failure: *Heart Failure and Transplantation Committee*

Clinical Implications for Exercise at Altitude Among Individuals with Cardiovascular Disease: *Exercise, Cardiac Rehabilitation, and Secondary Prevention*

Evidence-Based Practices in the Cardiac Catheterization Laboratory: *Interventional Cardiovascular Care*

Managing Atrial Fibrillation in Patients with Heart Failure and Reduced Ejection Fraction: *Electrocardiography & Arrhythmias*

Obstructive Sleep Apnea and Cardiovascular Disease: *CLCD Leadership*

Preclinical Models of Cancer Therapy-Associated Cardiovascular Toxicity: *Cardio Oncology*

Recognition, Prevention and Management of Arrhythmias and Autonomic Disorders in Cardio-Oncology Patients: *Electrocardiography & Arrhythmias*

Mechanical Complications of Acute Myocardial Infarction: *Acute Cardiac Care*

Impact of Hormonal Therapies for Treatment of Hormone-Dependent Cancers (Breast and Prostate) on the Cardiovascular System: *Cardio Oncology*

Harnessing Mobile Health Technology for Secondary Cardiovascular Disease Prevention in Older Adults: *Cardiovascular Disease in Older Populations*

Invasive Management of Acute Myocardial Infarction Complicated by Cardiogenic Shock: *Interventional Cardiovascular Care*

Psychological Health, Well-Being, and the Mind-Heart-Body Connection: *CLCD Leadership* ■

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CVRI Stays Active with Webinars, New FAHAS, and #AHA23 Programming



- Paul Singh, MD, MPH, FAHA
- Prem Soman, MD, FAHA
- Edwin Takahashi, MD, FAHA
- Radu-Gabriel Vatasecu, MD, PhD, FAHA (Romania)
- Christiaan Joseph Marie Vrints, MD, PhD, FAHA (Belgium)

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

Cardiovascular Seminars

Acute Pulmonary Embolism: New Perspectives on A Common Thrombotic Disease

Leveraging Cardiac Imaging Biomarkers in Cardio-Oncology

New Frontiers in Imaging of Structural Heart Disease – Highlighting 3D/4D Echo, 4D “Hologram,” 3D printing, and 4D Flow

Coronary Wall-Plaque Risk Prognostication Beyond the Calcium: IVUS, OCT, CCT, CMR

Sleep and the CardioNeuro Axis

Syncope Imaging the 411: Emerging Clinical and Imaging Insights

Charles T. Dotter Memorial Lecture

Topic and speaker TBD

Early Career Sessions

Rapid-fire Case-based Cardiovascular Multi-modality Imaging Bootcamp

Multi-Disciplinary Collaboration in Cardiovascular Imaging

Melvin Judkins Session

Early Career Investigators Award Competition ■

Welcome to the Summer 2023 Council on Cardiovascular Radiology and Intervention *Connections* update. I'd like to extend a warm welcome to Kelsey

Stanley, our new AHA account manager, who has already hit the ground running.

Thank you to CVRI Council leadership, including Laura Findeiss, MD,



Laura Findeiss MD

incoming chair; Sanjay Misra, MD, FAHA, immediate past chair and acting vice chair; and all of the committee chairs and members.

If you'd like to become more active in the council, please contact Kelsey at kelsey.stanley@heart.org.

Last fall, the CVRI Council kicked off a series of webinars on hot topics. Sanjay Misra, MD, FAHA, and Edwin Takahashi, MD, organized a session that focused on telehealth and its role in rural health. Panelists included Lee Schwamm, MD, FAHA, Olamide Alabi, MD, and Eiman Jahangir, MD, MPH, FAHA.

If you have ideas for a webinar or podcast, please reach out to Kelsey at kelsey.stanley@heart.org.

Congratulations to 10 CVRI Council members from around the world who have been honored with the distinction of Fellow of the American Heart Association (FAHA):

- Ashish Aneja, MD, FAHA
- David M. Biko, MD, FAHA
- Jeffrey Forris Beecham Chick, MD, MPH, FAHA
- Xue Feng, PhD, FAHA
- Gustavo Rodriguez, MD, PhD, FAHA

Scientific Sessions 2023

The AHA Scientific Sessions will be held in person November 11-13 in Philadelphia. The planning committee has put together an enticing program. You'll have the opportunity to learn about cutting-edge science and advances in clinical practice.

Because the AHA encompasses multiple specialties and areas of interest, Scientific Sessions is an ideal venue for interdisciplinary science and education, and complements meetings that focus primarily on imaging.

Scientific Sessions is also an especially good place for early and mid-career faculty to advance their careers.

The council anticipates a large turnout in Philadelphia. Please attend to connect and network with your colleagues from around the world and encourage your associates and trainees to do the same.

I hope to see you there!



CVSA Council Active with Programming and Publications



CONNECTING
WITH THE
CHAIR

Pavan Atluri
MD, FAHA

As we've been busy with Council on Cardiovascular Surgery and Anesthesia activities over the past six months, I hope this report finds you well and enjoying the warmer weather.

It was wonderful to see you in November at AHA Scientific Sessions in Chicago. On the heels of virtual meetings, it was beneficial to see everyone in person to experience impromptu conversations that foster innovation and science to treat cardiovascular disease.

Meanwhile, we're looking forward to a productive Scientific Sessions in my hometown of Philadelphia in November. Our Program Planning Committee, chaired by Dr. Elaine Tseng, has done a great job putting together a first-rate program that will no doubt present cutting-edge research and well-thought-out educational content that will tackle the most important issues within our field. We have a broad-level overview of valvular heart disease (aortic and mitral) featuring prominent cardiologists, surgeons and basic scientists. Highlights related to the CVSA Council include:

- A session will be dedicated to lifetime management of aortic stenosis, including transcatheter versus surgical aortic valve replacement as the initial procedure, the benefits of root enlargement, pulmonary autograft to treat aortic stenosis and minimally invasive approaches for aortic disease.
- Another topic critical to cardiovascular specialists is the latest aortic disease guidelines.
- A hot debate on the differing perspectives and how we come together for congruent coronary guidelines will feature perspectives of different societies, including the Society for Thoracic Surgeons/

American Association for Thoracic Surgery, European Coronary Society, European Association for Cardiothoracic Surgery, Asian and Latin American Societies.

- We have partnered with the Council on Clinical Cardiology to create a first-rate session tackling the most up-to-date issues about managing mitral valve disease, including transcatheter edge-to-edge repair, surgical repair and new technologies.
- Novel to this year, we have an outstanding session on interventional echo to bring together cardiology, anesthesia and surgery to manage structural heart disease and arrhythmias.
- The Early Career Committee has put together another first-rate, educational session to kick off the meeting.

The CVSA Council Education and Publication Committee remains extremely active. Led by Dr. Linda Shore-Lesserson (chair) and Dr. Mario Gaudino (chair-elect), the committee has continued to see a remarkably successful stream of publications impactful to the AHA community.

Several published scientific manuscripts that the CVSA Council primarily or jointly sponsored include:

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
Chair-elect: Michael Fischbein
Published: February 17, 2022,
Circulation: Cardiovascular Imaging

Modern Surgical Options for Hemodynamically Significant Acute Pulmonary Embolism

Chair: Josh Goldberg
Chair-elect: Jay Giri
Started: October 8, 2020
Published: January 23, 2023, *Circulation*

Anesthetic care of the pregnant patient with cardiovascular disease

Chair: Marie-Louise Meng
Chair-elect: Laxmi Mehta
Published: February 13, 2023,
Circulation

The Joint Manuscript with CLCD – Interventional CV Care Committee
(*Management of Acute Perioperative Ischemia Following Cardiac Surgery is in development and making its way through the editorial process.*)

Chair: Mario Gaudino
Chair-elect: George Dangas
Started March 15, 2022
Status: Executive Committee

The following gap analysis topics from the CVSA Council Scientific and Publications Committee have been prioritized and will be submitted next:

1. CABG Secondary Prevention. Submitter: Dr. Marc Ruel. MOC form, writing group and outline is in progress.
2. Echocardiography in Cardiac Surgery. Submitter: Dr. Lisa Rong. MOC form and outline are being prepared.
3. Anesthesia and perfusion after aortic operations. Drs. Boskovski, Deanda and Muehlschlegel
4. Anticoagulation for ECMO

We look forward to continued publication productivity and expanded collaborative roles for cardiac surgeons and cardiac anesthesiologists caring for patients with unique and common cardiovascular diseases.

I encourage you to bring forth ideas that we can help publish. Additionally, please think of ways in which we can partner with our fellow councils throughout the AHA to network with colleagues in other specialties throughout the AHA.

The Council on Cardiovascular Surgery and Anesthesia remains committed to the success of our specialty, representation of our fields within the AHA and promotion of our members.

I encourage all of you to strongly consider membership in the AHA with CVSA Council affiliation if you

haven't already done so. Additionally, please consider the career advantages as a Fellow of the American Heart Association (FAHA). I have been a member for nearly 15 years and can certainly attest to the benefits.

Moreover, we're continuously looking for volunteers for key AHA missions and involvement in important scientific

statements. So please reach out to me or other members of the CVSA Council with areas that you would like to be involved. Please keep your contact information and areas of interests up to date in your membership profile, as we use this as a source of recommendations for key roles throughout the AHA.

Furthermore, we're continuously looking to involve trainees in CVSA Council and other AHA activities. If you know promising trainees you would like considered for involvement on the CVSA Council board, please reach out.

I look forward to connecting with everyone in the near future as well as in Philadelphia in November! ■

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The Strong Presence of CVSN Within the AHA



CONNECTING WITH THE CHAIR

Terrie Black
DNP, MBA, FAHA

It is hard to believe that my two years as the chair of the Council on Cardiovascular and Stroke Nursing (CVSN) has come to an end.

The time has flown by, and I cannot thank CVSN members enough for the emails, support, kind words and encouragement during my tenure as CVSN Council chair. It has been wonderful to have existing relationships with CVSN Council members grow stronger, as well as to create new ones. We have many amazing nurses in our council.

I am confident the council will continue to have a strong nursing presence within the AHA as CVSN members participate in writing groups, present at conferences and serve on various committees.

During my term, I led the development and implementation of our council's three-year strategic plan. This plan

went into effect July 1, 2021, and provides strategic direction for our council through June 2024. Thanks to our CVSN leadership, committees and members, we have completed many of the goals set forth in our strategic plan.

As of July 1, Dr. Nancy Pike will assume the role of CVSN Council chair (see below for more information about Dr. Pike) and Dr. Lorraine Evangelista will serve as chair-elect. As we welcome them, I encourage each of you to continue your involvement within the CVSN Council.

Nancy Pike, PhD, CPNP-AC/PC, FNP-BC, FAHA, FAAN, is professor, director of research, and coordinator of the Pediatric Nurse Practitioner Program at the UCLA School of Nursing. She has a 30-year career as a family and pediatric nurse practitioner in both congenital and acquired heart disease across the lifespan. She practices clinically as a pediatric nurse practitioner in the Heart Institute at Children's Hospital Los Angeles.



Nancy Pike
PhD, CPNP-AC/PC,
FNP-BC, FAHA, FAAN

She has over 65 peer-reviewed publications and 10 book chapters. She has received numerous accolades as a researcher, teacher, mentor and clinician. Her biobehavioral and neuroimaging program of research has been funded by the National Institutes of Health for over 10 years to study structural brain injury, cerebral blood flow and its associations with cognitive and psychosocial outcomes in adolescents and young adults with congenital heart disease, in particular, single ventricle heart disease.

Dr. Pike is also a fellow in the American Heart Association and the American Academy of Nursing and was recently inducted into the Sigma Theta Tau International Nurse Researcher Hall of Fame 2022.

"I have been an AHA member since 1997 and held various positions in CVSN," said Dr. Pike, vice-chair of the CVSN Council for the past two years. "I consider AHA my primary home for my research dissemination and am happy to give back to this great organization. I have the utmost respect and admiration for past chairs of CVSN and have big shoes to fill following Dr. Black's leadership. I am excited to serve and represent nursing in the AHA for the next two years." ■

AHA Get With The Guidelines-AFib (GWTG-AFib) Registry

Cardiovascular nurse scientists interested in conducting research on atrial fibrillation should consider leveraging the AHA's Get With The Guidelines-AFib (GWTG-AFib) Registry. AHA quality programs research has been a highly valuable source for quality outcomes-based research.

GWTG-AFib is a national hospital-based AF quality improvement program that increases adherence to evidence-based guidelines for AF. Participating hospitals provide longitudinal data on adults ≥ 18

years admitted to the hospital with AF or atrial flutter. Using the data that are collected through GWTG-AFib, researchers can develop study questions and submit a proposal to conduct an investigator-led research project. Approved proposals receive access to GWTG data, statistical analysis and mentorship.

More information about GWTG-AFib is available at heart.org/GWTGResearch and described in this article:

Lewis WR, Piccini JP, Turakhia MP, Curtis AB, Fang M, Suter RE, Page

RL 2nd, Fonarow GC. Get With The Guidelines AFIB: novel quality improvement registry for hospitalized patients with atrial fibrillation. *Circ Cardiovasc Qual Outcomes*. 2014 Sep;7(5):770-7. doi: 10.1161/CIRCOUTCOMES.114.001263. Epub 2014 Sep 2. PMID: 25185244.

The deadlines to submit proposals to GWTG-AFib are March 15 and August 15. Those wishing to be considered for the **Early Career Investigator Award** should submit a proposal by October 16. ■

FAHA Member Spotlight: Cynthia M. Dougherty, ARNP, PhD, FAHA, FAAN



Cynthia M. Dougherty
ARNP, PhD,
FAHA, FAAN

Dr. Dougherty is the Spence Endowed Professor in Nursing at the University of Washington School of Nursing, adjunct professor in the Department of Medicine, Division

of Cardiology, and an adult nurse practitioner in cardiology at the VA Puget Sound Health Care System-Seattle, Washington. Dr. Dougherty is a nationally and internationally recognized expert on recovery of physical functioning, psychological adjustment and quality of life in people who have suffered sudden cardiac arrest and have received an ICD. She has conducted trailblazing research in exercise after an ICD, caregiver interventions after ICD implantation and goals of care communication in advanced heart failure. She's a rare nurse scientist who bridges what is too often a chiasm between nursing research and nursing practice. Dr. Dougherty leads a large interdisciplinary research team, building a program of research that began by systematically characterizing the experiences of those who survived cardiac arrest in Seattle, the home of pioneering work in resuscitation science. The impact of her work is evident in more than 100 publications and more than \$20 million in research funding.

of Cardiology, and an adult nurse practitioner in cardiology at the VA Puget Sound Health Care System-Seattle, Washington.

Dr. Dougherty is a nationally and internationally recognized expert on recovery of physical functioning, psychological adjustment and quality of life in people who have suffered sudden cardiac arrest and have received an ICD. She has conducted trailblazing research in exercise after an ICD, caregiver interventions after ICD implantation and goals of care communication in advanced heart failure.

She's a rare nurse scientist who bridges what is too often a chiasm between nursing research and nursing practice. Dr. Dougherty leads a large interdisciplinary research team, building a program of research that began by systematically characterizing the experiences of those who survived cardiac arrest in Seattle, the home of pioneering work in resuscitation science. The impact of her work is evident in more than 100 publications and more than \$20 million in research funding.

Please describe your current role and program of research.

My sustained program of research has focused on the development of knowledge related to human responses to sudden cardiac arrest and cardiac arrhythmias, both for survivors and their family members. This led to the development and testing of educational, psychological, activity and cognitive interventions to improve health outcomes after sudden cardiac arrest, advanced heart disease and receipt of the ICD. The results of this research are to enhance

The uniqueness of my contributions to cardiovascular science have included:

1. Seminal descriptions of the psychological and cognitive consequences of surviving cardiac arrest in the 1990s when there were few survivors
2. Elucidation of the psychological impact of receiving ICD shocks on patients and family members in the first-generation ICD devices
3. Development of programs to assist patients and families to live successfully with an ICD following cardiac arrest
4. Demonstration that moderate to strenuous exercise after an ICD was safe, effective, improved quality of life and reduced patient fear of engaging in exercise
5. Development of an exercise protocol testing for ICD and HF patients that is currently in use at the UWMC exercise testing lab
6. Demonstration that goals-of-care conversations between patients and their cardiology providers improves patient reported outcomes
7. Development of new instruments for measuring cardiac arrest self-efficacy and outcome expectations
8. Involving the intimate partner in patient interventions after an ICD improves patient and partner outcomes
9. Testing interventions to prevent PTSD after ICD shocks

I am one of the few researchers studying needs of patients with an ICD and their families, building a national reputation as an expert in this area of science. While our past research

focused on efficacy studies, our current research is moving to the translation or implementation of these interventions to everyday clinical practice to reach more patients and families.

Please tell us when you were first inducted as a FAHA and what being a FAHA has meant for your career.

I was nominated and became an AHA Fellow in 2008. The FAHA designation has meant to me that I have made significant independent contributions to CV nursing science that have made an important impact in the diagnosis and treatment of CV conditions. I have always been interested in ensuring that the interventions developed and problems addressed in my research programs are relevant and important to address patient and family issues and concerns. This designation to me is an acknowledgment of my significant contributions thus far, recognized fully by colleagues that these contributions were extraordinary and exemplary.

What message do you have for CVSN members who are considering applying for FAHA?

As the nominations chair of CVSN for those seeking to become a Fellow of the American Heart Association, please review the new criteria carefully. Apply when you have met and/or exceeded the requirements. Get feedback from current CVSN members about your contributions and ask for feedback on how you might present your work so that you are successful. Becoming a FAHA is an honor that I believe is awarded for recognized extraordinary work that elevates the understanding and treatment of CVD. ■

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Early Career Corner: Interview with 2022 Martha Hill Early Career Investigator Award Winner, Soojung Ahn, PhD, RN



Ashwag Alhabodal
CVSN Member &
PhD Student

Please tell us about you, your background and your area of research focus?

I am currently in postdoctoral training at Vanderbilt

University School of Nursing. I joined Vanderbilt in August 2022 following the completion of my PhD at the University of Virginia. My academic journey began in South Korea, where I obtained my bachelor's and master's degrees in nursing from Yonsei University. My research focuses on the cardiovascular health of family caregivers with an emphasis on lifestyle factors unique to the caregiving context, which will provide the foundational knowledge for developing adaptive behavioral interventions.

How did you first become involved in the CVSN?

As a doctoral student attending the AHA Scientific Sessions for the first time

in 2019, I was introduced to the CVSN. I was immediately impressed by the gathering of numerous nurse scientists in cardiovascular research from various regions and countries, all coming together to exchange their expertise. The well-attended CVSN sessions exuded an atmosphere of enthusiasm among the scientists engaged in the discussions. I was excited about the opportunity to become part of this community and promptly signed up to join the CVSN Council upon my return from the conference.

How has being part of the CVSN Council positively influenced your early career?

As a new early career investigator in the field of cardiovascular nursing, I have found a sense of belonging with the CVSN, which I believe will serve as a firm anchor throughout my research journey. I am well aware that the CVSN places considerable emphasis on supporting early career scientists. The wide range of resources and opportunities offered by the CVSN have provided me with a sense of connection with other nurse scientists. I am particularly grateful for the honor of presenting my doctoral dissertation

study to the CVSN Council members and attendees in the Martha Hill Early Career Investigator Award session and for being selected as the winner. This momentous achievement has bolstered my confidence and solidified my resolve to contribute to my chosen area of research. I will always cherish the kind words of encouragement and support from some attendees, which have motivated and inspired me.

What is one piece of advice you would give other CVSN early career nurse scientists?

I would say that it is essential for us to have confidence and assurance in our research areas for academic success. As a recent PhD graduate, I understand the self-doubt and uncertainty that can arise, especially among doctoral students and new graduate investigators, regarding the direction or value of their research. Seeking the insights of experienced scientists can help provide clarity and reveal the significance of one's research that may not be immediately apparent. I believe this is one of the most invaluable privileges that early career investigators can have. ■



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AHA|ASA Scientific Event Schedule

2023



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

2024



International Stroke Conference (ISC)

February 7 – 9, 2024, Phoenix, AZ



EPI|Lifestyle Scientific Sessions

March 18 – 21, 2024, Chicago, IL



Vascular Discovery

May 15 – 18, 2024, Chicago, IL



Basic Cardiovascular Sciences (BCVS) Scientific Sessions

July 22 – 25, 2024, Chicago, IL



Hypertension Scientific Sessions

September 5 – 8, 2024, Chicago, IL



Resuscitation Science Symposium (ReSS)

November 16 – 17, 2024, Chicago, IL



Scientific Sessions

November 16 – 18, 2024, Chicago, IL



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Always Growing, Forward Thinking



Greetings. As always, on behalf of the Council on Epidemiology and Prevention, I want to celebrate all the hard work and accomplishments of our membership—while looking forward to what comes next.

We continue to build on our strong history of being a positive force for cardiovascular health and well-being to solve new challenges and opportunities. This has never been truer as I look around at what's happening within and around our council this spring. Here are just a few highlights...

One of our flagship events of the year, the EPI/Lifestyle Scientific Sessions, was a great success this past February in Boston. The attendance was more than a rebound to pre-COVID-19 levels—it was one of the largest gatherings for the spring meeting we've had in some time.

Thanks again to co-chairs of the Program Committee, Marie-France Hivert, MD, FAHA, Harvard Medical School, and Alvaro Alonso, MD, PhD, FAHA, Emory University, and the rest of the Program Committee for organizing this exciting event.



The theme this year was *From Science to Action: Implementing Knowledge for Healthy Hearts*. We kicked off the conference with a stimulating opening session and the energy continued throughout with a robust exchange and discussion of findings, ideas and implications of a wide range of research and prevention topics. The focus on implementation science and what we as a council can learn

about it to keep our research forward thinking was a nice opportunity that the conference provided.



One of the grand traditions of our council is our focus on mentoring and providing opportunities for the next generation of population scientists. An annual demonstration of that commitment is the interaction and networking at the poster session, which was as invigorating as ever. I certainly noticed a renewed energy now that more council members attended in person.

During the Council Leadership Committee meeting in Boston, there was considerable enthusiasm and drive around ways to best challenge our council to think about how we as leaders in the field can help reach one new person in the coming year to engage with in our work. We're open to new ideas of expanding our partnership with scientists in disciplines who may not normally connect with population scientists or approach research questions from an epidemiologic perspective. This is a

vital part of our strategic focus to learn from new research partners and grow the council's membership. Finding new partners can only enhance the dissemination and implementation of the council's work and find new ways to get interventions with demonstrated effectiveness out to populations at greatest need.

Another highlight of the EPI | Lifestyle Scientific Sessions in Boston was the annual council dinner, where we honored this year's award winners.



Resuscitation Science Symposium 2023

November 11–12, 2023 | Philadelphia, PA

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Congratulations to all our award winners noted below.

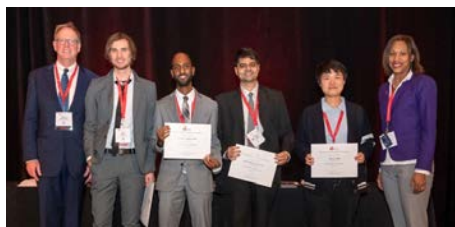
Jeremiah and Rose Stamler Research Award for New Investigators



Finalists: Hao Ma, Xiang Li, Bige Ozkan, Nilay Shah, Farah Allouch

Winner: Xiang Li

Epidemiology and Prevention Early Career/Trainee Travel Award



Winners: Hamdi S. Adam, Jason R. Smith, Romil Parikh, Yifei Lu

Sandra A. Daugherty Award for Excellence in Cardiovascular Disease or Hypertension Epidemiology



Finalists: Utibe Essien, Nour Makarem, Yoriko Heianza, Yilin Yoshida, Lindsey Reif (Absent)

Winner: Yoriko Heianza

Epidemiology and Prevention Minority Travel Grant



Winners: LáShauntá Glover, Alana Jones, Debra Dixon, Manuel Angel Cintron

Trudy Bush Fellowships for Cardiovascular Disease Research in Women's Health



Winners: Emily Ash, Natalie Cameron, Zhongzheng "Jason" Niu

William B. Kannel, MD, Memorial Lectureship in Preventive Cardiology



Lecturer: Lori Mosca

Epidemiology and Prevention Mentoring Award



Winner: Wayne D. Rosamond

Roger R. Williams Memorial Award for Genetic Epidemiology and the Prevention and Treatment of Atherosclerosis

Winner: Abbas Dehghan

Frederick H. Epstein Memorial Lecture Lecturer: Sandro Galea

The council is off to a great start in 2023. I continue to be honored to serve as chair. This is an exciting time in the world of epidemiology. There's much to do and new places to go. I am pleased to join you on the journey ahead. I look forward to continuing our work together so that the council will remain a positive force for growth and well-being in our communities. ■

RENEW YOUR MEMBERSHIP

Is it time to renew your Professional Membership?
Learn more.

Highlighting Our Journal and Scientific Activity



The Council on Genomic and Precision Medicine is in the enviable position of hosting *Circulation: Genomics and Precision Medicine*, and the journal's continued success under the leadership of editor-in-chief Chris Semsarian reflects his team's hard work and how important omic science is not just to GPM but across many domains of AHA science.

Here are impressive highlights of the journal that Chris recently provided in his annual update:

- Despite the COVID-19 pandemic, the impact factor has almost doubled in the last three years, from 4.0 to 7.5.
- Chris has made a strong effort to maintain and increase diversity. Among editorial board membership, 50% are women and 37% are from outside the U.S. (Of course, that includes Chris, who's in Sydney. Despite the gruesome challenge of time zones, he is a regular at our council leadership meetings.)
- Forty-one percent of the papers are from outside the U.S., again illustrating the broad reach of omic science.
- While original science is the backbone of the journal's content, it includes a continued focus on reviews, perspectives, guidelines and editorials. This year, we also introduced new article types ("Patient Viewpoint" and "Methods").
- In June, a one-year ongoing series on "Cardio-informatics" began.
- The acceptance rate is about 20% and will likely fall to 15% over the next year or two as the journal attracts higher impact science.

You can follow the journal on Twitter @[Circ_Gen](#).

Science

The GPM Council originates or co-sponsors statements on scientific issues of interest to our membership. Over the last two years, we have initiated six scientific statements now published:

- Interpreting Incidentally Identified Variants in Genes Associated With Heritable Cardiovascular Disease (March 2023)
- Polygenic Risk Scores for Cardiovascular Disease (July 2022)
- Cardio-Oncology Drug Interactions (March 2022)
- The Use of Biomarkers in Cardio Oncology (November 2021)
- Genetic Testing for Heritable Cardiovascular Diseases in Pediatric Patients (August 2021)
- Considerations for Cardiovascular Genetic and Genomic Research With Marginalized Racial and Ethnic Groups and Indigenous Peoples (July 2021)

We also have four others in development, and we always want to hear from members about other ideas:

- CYP2C19 Genetic Testing for P2Y12 Inhibitor Therapy
- Data Interoperability for Ambulatory Monitoring of CVD
- Equity in Cardio-Oncology Care and Research
- CV Management of Patients Undergoing Hematopoietic Stem Cell Transplantation

Musings on AHA Scientific Sessions

As I mentioned in the previous *Connections*, I was ambivalent about Scientific Sessions in November 2022—but I came away energized. While the meeting was smaller than "usual," it certainly was an improvement over not gathering in person. Seeing friends and colleagues and hearing science in three dimensions was wonderful.

I look forward to seeing many more of you in Philadelphia this November for Scientific Sessions. The final program is still a work in progress, but we know that Early Career programming will be Friday, November 10 (with sessions Saturday-Monday). So please plan your travel accordingly.

GPM Council leadership meets at Scientific Sessions on Friday, and we will also host a reception Saturday afternoon-evening as we did last year; times are not yet set in stone. We not only want to see members at the reception, but we also plan to devote part of our leadership meeting to an open session where we want to hear from you—what you want to see and hear at Scientific Sessions, what statements you want to work on, what works and doesn't work, what big new projects we should take on.

Planning for Scientific Session 2024 starts in November 2023; so now is the time to put on your thinking caps and bring those ideas to us at Scientific Sessions. ■



Hypertension 2023

September 7-10, 2023 | Boston, MA

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Looking Forward to Hypertension Scientific Sessions 2023



We are pleased to announce that Hypertension Scientific Sessions 2023 will be held in Boston, Massachusetts on September 7-10 at the Sheraton Boston Hotel.

We have planned an exciting conference, leading off with the third annual Nobel Laureate Lecture by Dr. Mario Capecchi from the University of Utah School of Medicine. Dr. Capecchi received the 2007 Nobel Prize in Physiology or Medicine for his groundbreaking studies discovering methods to create gene targeted colloquially called knockout mice.

Dr. Capecchi will also participate in a "Meet the Nobel" Networking session with early-stage investigators and trainees.

The Recent Advances in Hypertension Program will be highlighted by the second annual symposia by the Health Equity Research Network (HERN) on the Prevention of Hypertension, also known as RESTORE. The RESTORE Network's goal is to address social determinants to prevent hypertension.

We are also planning scientific sessions on artificial intelligence, TRP channels, orphan receptors and primary aldosteronism, among others.

As always, our program will also feature our Excellence, Corcoran, Dahl, Seldin, Dustan, Goldblatt, Page/Bradley, Moser and Mid-Career awardees. Early career awardees will also be featured.

As in the past several years, we will have dedicated abstract-driven oral sessions for early-stage investigators and trainees chosen by the Trainees Advocacy Committee (TAC). We will continue a concurrent Clinical Practice/Clinical Science and Primary Care Track throughout the program.

Networking events will include the Trainee Advocacy CHAMP lunch and a meet the Hypertension Journal Editors.

Of course, TAC Poster Session and Competition will continue its triumphant run as we celebrate the fantastic science of trainees and early career investigators.

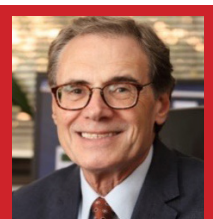
I hope to see you in Boston in September. ■

Meet the New Leaders

R. Ariel Gomez, MD, FAHA

Dr. Gomez is chair of the Scientific Program Committee and 2023 chair-elect of the Council on Hypertension.

Gomez's laboratory has defined the embryological origins of renin cells and the epigenetic mechanism, transcription factors and chromatin states that determine the fate of juxtaglomerular cells and the kidney vasculature in health and disease. He is the recipient of the AHA's 2016 Excellence Award in Hypertension Research.



R. Ariel Gomez
MD, FAHA

Health Research Center at the University of Mississippi Medical Center (UMMC) in Jackson. She received a BS in chemistry from the College of William and Mary and PhD in biochemistry from Virginia Commonwealth University. She completed postdoctoral fellowships at Texas Southwestern and West Virginia University before joining the faculty at UMMC. Reckelhoff's research focuses on the mechanisms responsible for sex differences in blood pressure control and renal disease, postmenopausal hypertension and hypertension in polycystic ovary syndrome. She has been funded by NIH since 1999, and has more than 170 publications. Reckelhoff has received numerous awards from the Council on Hypertension, including the Distinguished Achievement Award and the Excellence in Hypertension Research Award. ■

Jane F. Reckelhoff, PhD

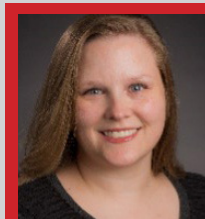
Dr. Reckelhoff is the 2023 chair-elect of the Council on Hypertension. She is the Billy S. Guyton Professor and chair of the Department of Cell and Molecular Biology, and founding director of the Women's



Jane F. Reckelhoff
PhD

Message from the Trainee Advocacy Committee Chair

We are thrilled about the upcoming Hypertension Scientific Sessions 2023! Last year's CHAMP event, which featured



Brandi Wynne
PhD, MS, FAHA

"Speed Mentoring," had record-breaking attendance. We are hoping to keep the momentum alive and are looking forward to another great year of CHAMP. We are also excited to announce that the Stephanie Watts Career Development Award has been renewed for this year—a generous donation from DSI. We hope that all interested trainees and early career faculty will apply. If you have questions about the events for this year, please feel free to contact me or your TAC members. We look forward to seeing you in Boston!

LOOKING TO SERVE?

Help us identify opportunities for you by telling us your volunteer interests [here](#).

TAC Spotlight: Daria Golosova, MD, PhD, Postdoctoral Fellow Medical College of Wisconsin

How did you become interested in research related to hypertension and cardiovascular disease?

I have always been interested in cardiovascular and renal physiology. As a medical and PhD student, all my scientific projects were either in renal or cardiovascular fields, and I was already interested in hypertension. After joining the Department of Physiology at Medical College of Wisconsin, I chose hypertension as the focus of my primary investigation.

Describe the big picture of your research interests.

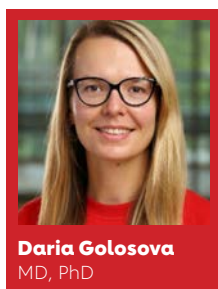
The overarching goal of my research is to study novel pathways implicated in vascular and kidney injury in hypertension. Under the mentorship of Dr. Sigmund, I am particularly interested in utilizing integrative approaches to define a contribution of angiotensin II mediated calcium flux in vascular smooth muscle cells and establish pathophysiological ramifications of the renal baroreceptor mechanism contributing to the development of hypertension.

What do you consider to be your most substantial scientific contribution so far (provide PMID if possible)?

Among my contributions, I would like to mention our work uncovering a novel role for kappa-opioid receptor mediated calcium flux in podocytes in the pathogenesis of hypertension (PMID: 33046522). Given the importance of the opioid crisis, this manuscript was a key to provide important evidence for novel mechanisms of opioid-induced kidney damage and the effect on blood pressure.

What impact has the CHAMP program had on your training and research program?

Networking is essential for a successful career and the American Heart



Daria Golosova
MD, PhD

Association, including CHAMP, shares my passion for exploring new territory in science. During CHAMP, I met so many amazing mentors to whom I am indebted to for their support and leadership. These mentors have motivated me to move forward with my research and improve my career.

How did you learn about the AHA TAC and its activities?

I learned about the American Heart Association TAC from my colleagues and friends, Dr. Pablo Nakagawa and Dr. Jing Wu, who described the opportunities and activities that one might get by being a TAC member. These conversations inspired me so much that I joined TAC and participated in TAC sessions and CHAMP during the Hypertension Scientific Sessions.

How has your experience been at the Hypertension Scientific Sessions?

I truly enjoyed the combination of clinical and basic science research focusing on recent advances on hypertension. The Hypertension Scientific Sessions networking events, such as CHAMP, were an excellent opportunity to meet and mingle with the peers and senior members of the research community from all over the globe.

Does your involvement in the AHA help to support your research and career development? If so, how?

My research has benefited tremendously from a teamwork and the generous support from the American Heart Association. By receiving a postdoctoral fellowship and award recognitions throughout my training, I developed collaboration and communication skills, and was able to contribute to innovative cardiovascular research.

What are your scientific goals?

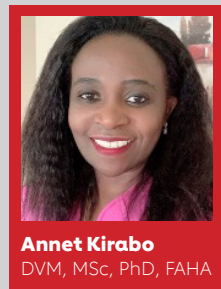
With a goal of becoming a mindful physician scientist, I have always wanted to contribute to the development of novel treatment options for patients with resistant hypertension or to whom current treatment options remain ineffective. My long-term career goal is to establish a strong and independent research program using integrative approaches to study the mechanisms of vascular and kidney injury in hypertension.

Do you have any advice for other trainees and early career investigators?

First, find an area of research that you are passionate about as you will spend a lot of time at work; be sure this is something that brings you excitement and joy! Second, take any challenges as a new opportunity and remember if life brings you lemons, make some lemonade. ■

Message from the Chair of Communications Committee and Editor

The Communications Committee's main goals are to increase communication and outreach to council members and foster a sense of community for the AHA and Council on Hypertension. All members of the council are encouraged to tweet/retweet and amplify all topics related to our mission. Thanks very much for your dedication and support for the Council on Hypertension. Get more involved by visiting professional.heart.org and complete the Science Volunteer Form linked on your dashboard or by visiting professional.heart.org/volunteerform. Other opportunities include participation in the AHA's Go Red for Women campaign and Heart Walk. Please follow [@CouncilonHTN](https://twitter.com/CouncilonHTN) on Twitter to stay connected and informed about our council.



Annet Kirabo
DVM, MSc, PhD, FAHA

Message from the National Heart, Lung, and Blood Institute (NHLBI)



Young Oh
PhD

In this issue, I'll share two recent NHLBI workshops related to hypertension research. NHLBI organizes a workshop to identify knowledge gaps, challenges and research opportunities in the targeted topic area.

On October 13-14, 2022, NHLBI convened a virtual workshop titled, "Novel Retinal Biomarkers for Hypertension and Cardiovascular Disease." An executive summary of this workshop is available on the public NHLBI website. Another workshop, "Transforming Hypertension Diagnosis

and Management in the Era of Artificial Intelligence," was held March 29-30. An executive summary of this workshop will be available in several weeks on the NHLBI website.

On another note, here are two R21 funding opportunities at NHLBI:

- RFA-HL-23-018, entitled "Maximizing the Scientific Value of the NHLBI Biorepository: Scientific Opportunities for exploratory Research (R21), supports meritorious exploratory research relevant to the NHLBI mission using the biospecimen collections that are stored in the NHLBI Biorepository and are available through BioLINCC. To view available biospecimen collections and initiate a request, please [visit here](#). The next application due date is June 20.

- PAR-20-078, entitled "Secondary Analysis of Existing Datasets in Heart, Lung, and Blood Diseases and Sleep Disorders (R21 Clinical Trial Not Allowed)," aims to stimulate the use of existing human datasets to investigate novel scientific ideas and/or generate new models, systems, tools or technologies that have the potential for significant impact on biomedical or biobehavioral research relevant to the NHLBI mission. Next application due date is October 28.

I hope this information is helpful. Please feel free to contact me at yoh@nhlbi.nih.gov for any grant- or program-related questions. ■

Hypertension Journal Report



Rhian M. Touyz
MBBCh, PhD, FAHA,
FRCP, FRSE, FMedSci

Hypertension, an American Heart Association Journal

The editors appreciate the time and effort council members have spent reviewing

manuscripts, submitting the best research to Hypertension and providing feedback that has improved the journal.

Early Career Assistant Program Applications Open Fall 2023

In 2023, we kicked off our inaugural Early Career Assistant Program. The two-year program begins with a one-year assistant reviewership, followed by a one-year assistant editorship. Full program details can be found at ahajournals.org/hyp/early-career. Please check back to this page for the application link, which will open approximately September 2023.

Social Media Initiatives

Our Social Media Editorial Board has been diligently and successfully promoting our #HYPHIP live author chats through Hypertension's @HyperAHA Twitter feed. The interesting live chats are held at varying times and dates with authors from all over the globe. To see what's new in the conversation, to stay connected for future live chats and all future Hypertension programming and to retweet the conversations, please follow @HyperAHA on Twitter or search the #HYPHIP hashtag.

AHA Centennial Collection

The American Heart Association will celebrate its 100th anniversary in 2024, and multiple events are planned to mark this auspicious occasion. Throughout 2024, the AHA journals will be publishing a series of articles across its portfolio as our "Centennial Collection." As part of Hypertension's contributions to the Centennial Collection, we will be inviting international thought leaders.

Upcoming Clinical-Pathological Conferences (CPC)

Join the Hypertension journal editors in discussing two interesting Clinical-Pathological Conference cases in Boston during the Hypertension Scientific Sessions on September 7-10.

CALL for Clinical-Pathological Conferences [CPC] Cases

Hypertension is looking to select three interesting clinical cases for each of the following upcoming 2024 meetings:

- European Society of Hypertension
- Hypertension Scientific Sessions
- International Society of Hypertension

Send submissions to the Hypertension editorial office (hypertension@heart.org) with the subject line CALL for Clinical Case Submission. Questions may be directed to the Hypertension editorial office, Trudie Meyer, managing editor. You can find [additional submission information here](#). ■

The Large Strides of KCVD



The Council on the Kidney in Cardiovascular Disease (KCVD) continues to actively engage with the cardiorenal community across a spectrum of activities.

The Science Committee of the KCVD Council has spearheaded scientific manuscript output admirably and continues to generate a strong pipeline of current and future writing projects relevant to the heart-kidney space.

Notably, a recent KCVD scientific statement on perinatal programming of maternal-fetal cardiovascular health and the role of the renin angiotensin aldosterone system was recently published in *Hypertension*. Co-sponsored by the Hypertension Council, it was well received across the scientific community.

Led by Drs. Barbara Alexander, Andrew South and Maria Sequira-Lopez, the statement featured the expertise of a diverse and multidisciplinary group of physicians and scientists.

Another key scientific statement on renovascular hypertension, led by Drs. Vivek Bhalla and Steven Textor, and co-

sponsored by the KCVD Council, was recently published in *Hypertension*.

Meanwhile, Dr. Ian DeBoer (nephrology, University of Washington) has led the Science Committee in an exemplary fashion during his tenure and will hand off leadership to Dr. Nisha Bansal (nephrology, University of Washington). The KCVD Council thanks Dr. DeBoer for his service and looks forward to continued excellence in the output from the Science Committee under the stewardship of Dr. Bansal.

Several members of the basic science community within the KCVD Council converged on Long Beach, California in April 2023 for the American Physiology Summit, featuring several cutting-edge science programs and speakers. Several hot topics in the heart-kidney space will also be featured in AHA Scientific Sessions 2023, incorporating feedback from audience participants as well as KCVD Council members. Please continue to share your feedback on how we can enrich the content from our council that will be featured at future AHA meetings.

The council also looks forward to reviewing innovative proposals that will be submitted as part of the SCILL contest for consideration of funding for 2023-24.

On the one hand, large strides have been made with clinical outcomes trials showcasing the heart-kidney

benefits of foundational therapies such as the sodium glucose co-transporter inhibitors, glucagon like peptide-1 receptor agonists and the non-steroidal mineralocorticoid receptor antagonists. And exciting developments are also being reported in kidney precision medicine.

A phase 2 study of inaxiplin in patients with toxic gain-of-function variants in the gene encoding apolipoprotein L1 (*APOL1*) showed promising reductions in albuminuria (Egbuna O et al, *NEJM* 2023).

With the aspirational goal of implementing these newer therapies to reduce the burden of cardiovascular and kidney disease both at an individual as well as population level, it is imperative to acknowledge disparities in access to health care and pharmacotherapies that several patients with heart and kidney disease face and ensure that assessments of social determinants of health are incorporated into health care delivery models to ensure equitable access to therapies. This will ensure improved longevity, reduced cardiovascular and kidney disease burden, and improved quality of life in the vulnerable patient population with cardiovascular and kidney disease. This is aligned with the AHA's mission to be a relentless force for a world of longer, healthier lives. ■



American Heart Association.

RESEARCH

Research funding is available to you!

As a member, AHA offers exclusive access to apply for research funding.

This is available to all academic and health professionals. You can make a difference in creating a world of longer, healthier lives.

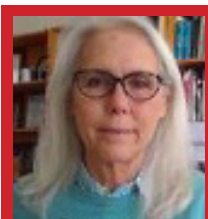
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How Do Female Science Faculty Think About Their Careers?

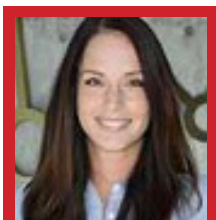


Alicia McDonough
PhD, FAHA

Dr. Alicia McDonough, PhD, FAHA, professor in the Department of Physiology and Neuroscience at the Keck School of Medicine, University of Southern

California, is a renowned scientist in the field of cardiorenal physiology and hypertension. She has an impressive list of accomplishments while working as a professor, researcher, mentor and role model for many students and young faculty. She's served on national and international grant review panels and journal editorial boards, and actively contributes to the scientific APS, ASN and AHA committees. She has received numerous awards, including the 2022 Irvine Page-Alva Bradley Lifetime Achievement Award for her outstanding achievements in the field of hypertension, research and teaching.

In this short interview, Dr. Georgina Gyarmati asked Dr. McDonough to share the stories of her journey as a female scientist and physiologist, and how opportunities for women have changed over the years.



Georgina Gyarmati
MD, MPH

Your research focuses on mechanisms responsible for regulation of sodium and potassium balance and blood pressure. What is your favorite aspect of your research?

My favorite type of research is revealing mechanisms in fundamental physiology. Interestingly, many questions I have tackled were driven by questions raised while teaching medical and graduate students. I am grateful for my teaching assignments and for directing a graduate program. These questions include sex differences in kidney physiology,

role of sodium pumps and Na/Ca exchanger regulation in human heart failure, role of muscle sodium pumps in potassium homeostasis and how the kidney uses blood pressure to maintain circulating volume.

Did you have a role model that influenced your decision to work in science? And why did you choose to become a scientist?

It sounds trite, but nature was my role model. I was inquisitive, easily awestruck and loved reading about biology and exploring the world around me. No one ever suggested to me that I should consider science. In primary and secondary school, I was equally proficient at most all subjects, but gravitated to the logic and challenges of math and science. I had an after-school job at a local medical clinic (pre-HIPPA, pre-computers) typing and filing medical visits and lab work, which was intriguing and fascinating. A California State Scholarship permitted my transition from a small Catholic all-girls school to UC Berkeley, where I found a home base in the physiology major as well as mentoring in Dr. Paola Timiras' lab, where I investigated the effect of nicotine on pregnancy in rats. Fifty years later, my work on lifecycle of the female kidney is along the same lines.

After completing your PhD, what was your experience with finding your first professional position? Did you find that being a woman either positively or negatively impacted your search in a field that was historically male dominated?

My PhD advisor suggested I get a job in a blood bank. Instead, I applied to work for Isidore Edelman at UCSF, one of the top physiologists in the world. Edelman had visited our department and told us about thyroid thermogenesis and aldosterone regulation of sodium currents. He had many applicants, so I wrote an NIH NRSA application on a topic he suggested, and it was scored 1.0—I was “in.” Dr. Edelman was completely egalitarian, and I rely on what I learned in his lab every day. I was recruited to USC as an

assistant professor of physiology with a \$30,000 startup package and a substantial teaching load. With my accomplishments in Edelman's lab, I applied for and was awarded an AHA Established Investigatorship, which truly launched my independent research career. I am forever grateful to the AHA!

Is there still gender difference in your research environment?

National/International data argues that yes, there is cultural and unconscious bias. Also, women have social safety concerns. Childcare is still a challenge, despite normalization of gender expectations. My lab trainees and techs have produced many offspring. We find that generous maternity/paternity leave creates a supportive environment for fostering productivity. I am especially grateful to our remarkably productive long-term lab-manager, Donna Ralph, who trains the newcomers, fills in the data gaps when students graduate, manages our subcontracts, all while managing a young family with grace and expertise.

Thinking in terms of careers, what words of wisdom would you offer to young women considering entering the field of science?

If you are truly drawn to science, don't let anything deter you. It's an exciting, rewarding field. To succeed, women need to be very focused, let their accomplishments speak for themselves and understand critical reviews. Actually, get involved with reviewing. Someone will be in the top 10% for fellowships and grants and jobs—why not you? ■

RENEW YOUR MEMBERSHIP

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Council Launches Exciting Endeavors and Programming



**CONNECTING
WITH THE
CHAIR**

Anitha John
MD, PhD, FAHA

It has been a whirlwind of activities for the Young Hearts Council this past year! Our council leadership and subcommittees have been hard at work addressing council member concerns and creating more opportunities for our community. As part of our feedback from our strategic planning efforts, we have instituted some exciting new endeavors and programming. Some of the changes include the following:

1. Annual Scientific Sessions with increased Young Hearts Content

The meeting will be held in Philadelphia from **November 10-13**. We are pleased to report that our content at sessions is the highest it has been in years! We have a total of 16 seminars and 3 oral abstract sessions in addition to moderated and standard poster presentations. For the 2nd year in a row, there is a special **½ day pre-session Young Hearts symposia on Friday, November 10** which requires an additional charge/registration. In addition, there will be additional early career programming on November 10 that is great for fellows in training and early career faculty. The Early Career programming is from 8:30-11:30AM and then the Young Hearts Symposia is from 2-5:30PM. We hope the day will provide additional networking opportunities, especially for our fellows in training and early career members.

2. Lunch and Learn Series This is the first year that we have embarked on a virtual lunch and learn series, focusing on various aspects of career development. We launched the series with an in-person session on scientific statement preparation at AHA 2022 (October 2022). This was followed by 1. How to use social media to advance your career (February 2023) and 2. How to prepare a successful abstract and scientific presentation (April 2023).

3. Cross Council Collaborations We have been fostering additional relationships with other AHA councils, such as Stroke and Clinical Cardiology, to strengthen our scientific proposals and statements. We have additional Young Hearts representatives on a number of subcommittees, including the psychological health and well-being subcommittee as part of the stroke council. We have several joint statements on lifelong brain health that are in development and continue to expand our scientific networks to improve care for our patients. Breaking through silos is a critical step in advancing science and creating opportunities for the next generation of scientists.

4. New Science Subcommittee Formation

We have plans and proposals underway for new science subcommittees in genetics/health technology and pediatric cardiac intensive care. Our current subcommittees remain very active with numerous scientific statements in progress. The Young Hearts Council has always been one of the leading councils in the number of scientific statements published, and we are not slowing down anytime soon!

5. AHA/ACC Clinical Practice Guidelines in the Pediatric Population

One major limitation for our field has been the inability of a mechanism to publish clinical practice guidelines regarding cardiovascular health in the pediatric population. I am pleased to report that the Joint Committee on Clinical Practice Guidelines led by the AHA and the American College of Cardiology (ACC) have approved for to commission guidelines in primary prevention of ASCVD in the pediatric population. The AHA has initiated the process for developing and creating pediatric specific primary prevention guidelines, mirroring the well-established process that has existed for the adult population. This is a huge step forward for our field and for our patients! We look forward to more guideline developments in the future!

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, I would like for members to be aware of several upcoming funding opportunities including 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 in early September. In addition, there are several other funding mechanisms including career development awards and institutional research enhancement awards. For more information, please visit professional.heart.org/en/research-programs.

Our council remains focused on serving as the scientific home for all of our members, providing resources for career development at all stages and career paths. We continue to work on the with the goals of improving transparency, increasing diversity, and promoting a diverse cardiovascular research portfolio. The AHA continues to offer opportunities including various grant mechanisms, abstract presentations, and networking. The new advances presented here are tremendous steps forward for our field.

On behalf of the **Council on Lifelong Congenital Heart Disease and Heart Health in the Young**, I would like to encourage all new and existing members to work with us as we continue to grow and improve. I remain committed to promoting transparency, diversity and inclusion within our council.

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.

Sincerely,
Anitha S. John, MD, PhD FAHA

Chair, Council on Lifelong Congenital Heart Disease and Heart Health in the Young (Young Hearts) ■



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AHA Professional Members enjoy exclusive discounts and events.

Learn more at [join.heart.org](https://www.join.heart.org)

23-103



Spring EPI|Lifestyle Meeting A Renowned Success



Wow, what an EPI|Lifestyle Scientific Sessions this year!

The theme of the meeting was, “From Science to Action: Implementing Knowledge for Healthy Hearts.” Chairs Marie-France Hivert, MD, and Alvaro Alonso, MD, PhD, and chairs-elect from the Council on Epidemiology and Prevention, Monica Serra, PhD, and Priya Paita, PhD, brought us an exciting, thought-provoking and soul-searching meeting in Boston.



Dr. Marie-France Hivert, chair of the EPI|Lifestyle Scientific Sessions 2023.

From the opening session to the Friday afternoon close-out, the meeting was a renowned success. Here are a few highlights:

- AHA President Michele Albert, MD, MPH, FAHA, kicked off the meeting with remarks that tied the AHA Strategic Goals directly to the meeting’s theme.
- The keynote lectures centered around the conference theme.
 - ◊ Crystal Wiley Cene, MD, MPH, FAHA, gave the audience a primer on implementation science and how it differs from effectiveness and dissemination trials.
- ◊ Josiemer Mattei, PhD, MPH, gave a real-world example of how interventions need to be adapted to the specific target group to effectively implement evidence-based interventions.
- ◊ Sara Bleich, PhD, highlighted national policies that have been effective but are under-enrolled. She challenged the audience to take advantage of these policies to better serve our communities.
- Shiriki Kumanyika, PhD, MPH, presented the David Kritchevsky Memorial Lecture, in which she spoke to frameworks using implementation science concepts to ensure that obesity interventions reach people when they have the capacity to engage with the intervention strategies.



Dr. Shiriki Kumanyika speaks during the David Kritchevsky Memorial Lecture.

- The Annual Debate questioning the pros (Allan D. Sniderman, MD) and cons (Ann Marie Navar, MD, PhD) of universal screening for Lp(a) was an exciting interaction between the debaters and the audience. The audience wholeheartedly agreed that the cons outweighed the pros. Even Allan agreed!
- Sandro Galea, MD, DrPH, presented the Frederick H. Epstein Memorial Lecture on how the COVID-19 pandemic provides an opportunity to transform public health services to ensure equity.
- Lori Mosca, MD, MPH, PhD, presented the William B. Kannel MD Memorial Lectureship in Preventive Cardiology titled, “The Power of Patterns, Pioneers, and Prevention.”

Every year, the Council on Lifestyle and Cardiometabolic Health presents awards at the annual council dinner. Those honored this year were:

- Jun Li, MD, PhD, received the Mark Bieber Award, which recognizes an early career investigator for outstanding nutrition-related research.
- Mauro Mediano, PhD, PT, received the Steven N. Blair Award for Excellence in Physical Activity Research.
- Mingyu Zhang, PhD, MHS, Zhila Semnani-Azad, PhD, and Yang Hu, MM, received the Scott Grundy Fellowship Awards for Excellence in Metabolism Research.
- Xuan Wang, MD, PhD, received the Award for Excellence in Research Addressing Cardiovascular Health Equity.
- Early Investigator Travel Awards were awarded to Hokyou Lee, MD, PhD; Rosangela Hoshi, PT, PhD; Valeria Sullivan, PhD, MHS, RDN; Hao Ma, MD, PhD; and Bruno Bohn.

Please consider nominating a colleague or yourself for an award. Cash prizes and plaques are included. [Click here to learn more.](#)

Photos of the meeting can be found [here](#). They provide insights of what occurred during the meeting, along with a glimpse of the comradery among the attendees—those new and seasoned. If you haven’t attended, I highly recommend putting it high on your agenda for spring 2024.



EPI|Lifestyle meeting attendees catch up and talk science.

Highlights from the Lifestyle Science Committees include:

- The publication of “Comprehensive Management of Cardiovascular Risk Factors for Adults with Type 2 Diabetes: A Scientific Statement From the American Heart Association” (2022) had an Altmetric score of 950 (top 1% of all *Circulation* publications over the past seven years).
- The Nutrition Committee is working with the FDA to update the definition of what is considered “healthy” for food product labeling.
- Each committee has scientific statements in the works—from the planning to writing stages. Stay tuned.



Finalists and judges for the three-minute Oral Rapid Abstract Competition.

We’re looking forward to the awesome programming underway for the 2023 Scientific Sessions in Philadelphia this fall. Hope to see you there! ■



What’s an EPI|Lifestyle Council dinner without dancing?

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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.](#)

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Spring 2024 Cycle Opens – late July 2023

Spring 2024 Submission Deadline – January 24, 2024

professional.heart.org/en/partners/fellow-of-aha

A Glimpse into the Ongoing Engagement and Commitment of an Active Council



The Council on Peripheral Vascular Disease (PVD) has been and will be active with upcoming educational events.

First, we are looking forward to AHA Scientific Sessions in Philadelphia this November. There have been many exciting changes in programming, and the vascular disease and thrombosis sessions will bring together the breadth of our PVD Council as well as the collaborative nature of our work.

Led by Drs. Arya, Brewster, Castro, Kadian-Dodov, Leleiko and Smolderen, we have built the following topics into our session programming:

- Mind and Vascular
- Right Ventricle and Pulmonary Embolism (hands-on workshop format)
- Chronic limb-threatening ischemia
- Novel anti-thrombotics and gender differences
- Aortic dissection
- Carotid disease and cognition
- Bioengineering frontiers for vascular patients (fishbowl, audience participation format)

We also have the Quest Diagnostics and Steve Rusckowski Early Career Investigator Award for Preventive Cardiovascular Medicine Research and the Jay D. Coffman Early Career Investigator Award competitions.

It's sure to be exciting and we look forward to seeing you in Philadelphia in November.

Vascular Discovery 2023: From Genes to Medicine in May in Boston, Massachusetts was a premier

opportunity for scientific exchange, networking and education in scientific research related to lipids and lipoproteins, arteriosclerosis, thrombosis, vascular biology, genomics, precision medicine, peripheral vascular disease and vascular surgery.

The Program Committee, led by Drs. Katey Rayner and Kathleen Martin, worked collaboratively with the Basic Science and Translational Research Committee of the Society for Vascular Society (led by Katherine Gallagher, MD) to maximize opportunities for intellectual cross-pollination with presenters and participants at the Vascular Research Initiatives Conference, which took place the day prior to Vascular Discovery.

Highlights included sessions on gene-environment interactions in cardiovascular disease; inflammation and immunity; lipid metabolism; thrombosis; coagulation; metabolic disorders in atherosclerosis; genomics and multi-omics; vascular disease in the post-genomic area; translational science in vascular disease; and therapeutic targets in atherosclerosis, including presentations by 16 invited speakers.

We presented multiple awards and the winners are as follows:

- **Frank Davis, MD**, Robert W. Hobson II Early Career Investigator Award.



- **Ngan Huang, PhD**, Alan T. Hirsch Mid-Career Award in Vascular Medicine.



- **Kyoungrae Kim**, PVD Spring Travel Award.



- **Karen Hirschi, PhD**, from the University of Virginia, delivered the Keynote Lecture.
- **Deepak L. Bhatt, MD, MPH, FACC, FAHA, MSCAI, FESC**, from Mount Sinai Heart, Icahn School of Medicine, gave the Distinguished Lecture.

A continued emphasis of the PVD Council is the engagement and commitment of its members—resulting in a 10% increase in committee membership over the last year, with the biggest gains among early career professionals.

Meanwhile, the Nominating Committee elected 31 members as Fellow of the American Heart Association. They represent multidisciplinary members from 18 states and six countries. Congratulations to all!

Panagiotis Koutakis, PhD, FAHA
Baylor University
Waco, Texas

Partha Sardar, MD, FAHA
Columbia University Medical Center
New York, New York

Parham Sadeghipour, MD, FAHA
Rajaie Cardiovascular Medical and Research Center
Tehran, Iran

Elsie Ross, MD, FAHA
Stanford University School of Medicine
Stanford, California

Karen J. Ho, MD, FAHA
Northwestern University
Chicago, Illinois

Laura Marie Drudi, MD, CM, MSc, FAHA
University of Montreal (Université de Montréal)
Montreal, Québec, Canada

Mohamad Hussain, MD, PhD, FAHA
Brigham and Women's Hospital, Inc.
Boston, Massachusetts

Pavlos P. Vlachos, PhD, FAHA
Purdue University
West Lafayette, Indiana

Areck Ucuzian, MD, PhD, FAHA
University of Maryland School of Medicine
Baltimore, Maryland

Wenzhu Li, MD, FAHA
Shanghai Jiao Tong University School of Medicine
Shanghai, China

Prabhakar Rajiah, MD, FAHA
Mayo Clinic
Rochester, Minnesota

Francisco Ujueta, MD, MS, FAHA
Mount Sinai Medical Center
Miami Beach, Florida

Jordan Kendall Schaefer, MD, FAHA
The Regents of the University of Michigan
Ann Arbor, Michigan

Stanislav Henkin, MD, MPH, FAHA
Dartmouth-Hitchcock Medical Center
Lebanon, New Hampshire

Kevin Southerland, MD, FAHA
Duke University School of Medicine
Durham, North Carolina

Carl Gustaf Streed, MD, MPH, FAHA
Boston Medical Center Corporation
Boston, Massachusetts

Carlos Mena, MD, FAHA
Yale University
New Haven, Connecticut

Nicholas Petruzzi, MD, FAHA
Atlantic Medical Imaging, LLC
Galloway, New Jersey

Soni Pullamsetti, PhD, FAHA
University of Giessen (Justus Liebig University Giessen)
Giessen, Germany

Jacob Schneiderman, MD, FAHA
Tel Aviv University
Tel Aviv, Israel

Norifumi Urao, MD, PhD, FAHA
SUNY Upstate Medical University
Syracuse, New York

Alicia Lyle, PhD, FAHA
Centers for Disease Control and Prevention
Atlanta, Georgia

Gopi Kolluru, PhD, FAHA
LSU Health Sciences Center in Shreveport (LSUHSC-Shreveport)
Shreveport, Louisiana

Sreenivasulu Kilari, PhD, FAHA
Mayo Clinic
Rochester, Minnesota

Mitchel Stacy, PhD, FAHA
The Research Institute at Nationwide Children's Hospital
Columbus, Ohio

Lola Eniola-Adefeso, PhD, FAHA
The Regents of the University of Michigan
Ann Arbor, Michigan

Vijay Ganta, PhD, FAHA
Augusta University
Augusta, Georgia

Shashi Kant, PhD, FAHA
Brigham and Women's Hospital, Inc.
Boston, Massachusetts

Wenbin Tan, PhD, FAHA
University of South Carolina
Columbia, South Carolina

Meghana Halkar, MD, FAHA
Mayo Clinic Jacksonville
Jacksonville, FL

Ahmed Hegazy, MD, MSc, FAHA
Heart Institute of the Caribbean
Kingston, Jamaica

(continued on page 48)



Attendees at the PVD Luncheon

(continued from page 47)

The PAD Summit is moving along well with physician and patient activities. The research group had its first webinar, which was highly engaging with a clinical trial research focus and the three principal investigators of the BEST-CLI Trial. This session focused on a behind-the-scenes look at how much work, effort and organization it took to complete this impactful trial, specifically related to critical limb threatening ischemic patients. This is a major advance answering an important question with regards to endeavors as open surgical bypass for our often most challenging patients. Many more sub studies from the BEST-CLI will likely come over the next year or so.

Another important interface with the PVD Council is the Vascular Health Advisory Committee (VHAC). This is led by Dr. Josh Beckman. The VHAC was commissioned in 2015 to provide strategic oversight on the development of the Vascular Health Business Unit focused on translating PVD science into practice by advancing science and elevating awareness in the community to enhance professional education, improve health care delivery and advocate for policy.

VHAC serves in an oversight capacity for the PAD National Action Plan and Program, ensuring its continuity within the AHA. More recently, VHAC established a Venous Thromboembolism Program to determine the greatest gaps in VTE (within the five pillars) and build a plan for a national effort in this space. VHAC seeks to provide a link between professional members and AHA leadership to further ensconce vascular disease within AHA activities.

LOOKING TO SERVE?

Help us identify opportunities for you by telling us your volunteer interests [here](#).

Lastly, we are proud of our members. To highlight two of them, here's a short interview with Dr. Foluso Fakorede, this year's AHA Louis B. Russell Jr. Memorial Award winner, and our incoming PVD Council chair, Dr. Esther Kim.

Dr. Fakorede:

If you had \$ 1 billion to spend without restriction for PAD research/care/education, how would you allocate this for impact?

1. Provide grant opportunities to recruit multidisciplinary teams and researchers to medical/vascular deserts.
2. Create policies to recruit and increase underrepresented and disadvantaged students into cardiovascular training to incentivize their long-term clinical and research practices in their communities of racial-ethnic concordance.
3. Mandate all medical school curricula to change the name from PAD to leg artery disease and include associated risk factor health disparity education in high school to college curriculums.
4. Create a centralized database with patient-reported PAD outcomes outlined by county and state levels. Hire a community navigator designated to each county based on the proportionate gaps of resources and disparities. These community navigators would provide awareness materials, screening services and social determinants assistance programs at no cost sharing to the patients. This would also include transportation, medications, copays for visits/SET therapy/procedures, nutrition counseling, food insecurity and lead community engagement programs. This strategy would inherently tie social determinants of health into the care coordination algorithm and hopefully lead to sustainable community-based strategies that demonstrate impact with most recent real-world data.
5. Create a PAD awareness campaign among all patients and professionals and promote patient-centered PAD educational programs for all populations. Develop a PAD educational culturally sensitive campaign with significant celebrities and athletes to lend voices to support.

How did you get interested in PAD-related care?

Unknown to many, I almost quit a cardiovascular fellowship because PAD was my weakest cardiovascular subject and I didn't understand the concept of combining lower extremity intricate anatomy with complex procedural strategy. I was overall lost and frustrated but I stayed the course, thanks to encouragement from my mother. I was determined to apply myself in the PAD space outside of the hospital (attending weekend industry conferences), studying extra hours of lower extremity anatomy, shadowing PAD operators at a different hospital while maintaining that hyper-focused attention to procedural equipment details.

During the continuum of my training, I learned about the racial cardiovascular health disparities in access to quality care driven by many factors rooted in structural racism, political determinants, lack of investment in communities of color, which limited access to resources and ultimately resulted in the poorest social determinants of health. The majority of these disparities, such as amputations, heart attacks and strokes, were located in the southern states that also happened to overlap the black censuscope of America. These "hot spots" or "heat maps" were also labeled medical deserts with very low number of cardiovascular specialists that were concordant with the plagued communities. This was a troubling pattern and I felt the need to act. The mission was to make the invisible visible, to be a common man working on behalf of a forgotten region when it comes to cardiovascular health equity and establish goals to reduce unnecessary amputations with an arsenal of equity.

I didn't know how but I was intentional in my pursuits to make an underserved population my preferred site of service. God had a purpose for my life and he ultimately directed me (and my new found PAD passion) to one of the most challenging regions to work as a cardiovascular provider/limb salvage specialist here in the heart of the Mississippi Delta.

What do you like to do outside of the hospital/clinic?

Other than spending quality time with family/loved ones, I love a good workout, watch all things sports, attend community engagement events, and love to travel.

Esther Kim:
If you had \$ 1 billion to spend without restriction for vascular research/care/education, how would you allocate this for impact?



Esther S. H. Kim
 MD, MPH, RPVI

translational studies to understand etiologic mechanisms. I would also fund efforts to standardize care for these diseases, including recommendations for acute management, surveillance and genetic testing. Many patients have to travel long distances to receive specialty care, and efforts to shore up a vascular network of physicians around the country to care for patients where they live would be a priority. To this end, I would support initiatives that would foster the integration of care among cardiologists, vascular surgeons and vascular medicine specialists.

How did you get interested in vascular care?

During my cardiology fellowship, I was assigned to Dr. Heather Gornik's longitudinal clinic at the Cleveland Clinic. In that clinic, we

cared for patients with a variety of general cardiology and vascular medicine problems. I loved being able to confidently manage angina and claudication, aneurysmal disease and heart failure, all in one clinic session, and truly feel like a CardioVascular specialist. My training in both cardiology and vascular medicine uniquely positioned me to care for patients with spontaneous coronary artery dissection, a disorder that presents as acute myocardial infarction but is frequently associated with extracoronary vascular disease.

What do you like to do outside of the hospital/clinic?

I love spending time with my husband and two boys. I also love to cook and frequently host friends for homemade meals in my home. There is often karaoke involved. ■

I would support research for patients with peripheral aneurysms and spontaneous arterial dissections. These diseases are not well understood and are understudied, and vascular care for the patients affected by them are uncoordinated.

I would fund practical clinical trials of commonly used agents, including beta blockers, to determine efficacy in preventing aneurysm growth and dissection recurrence and also fund



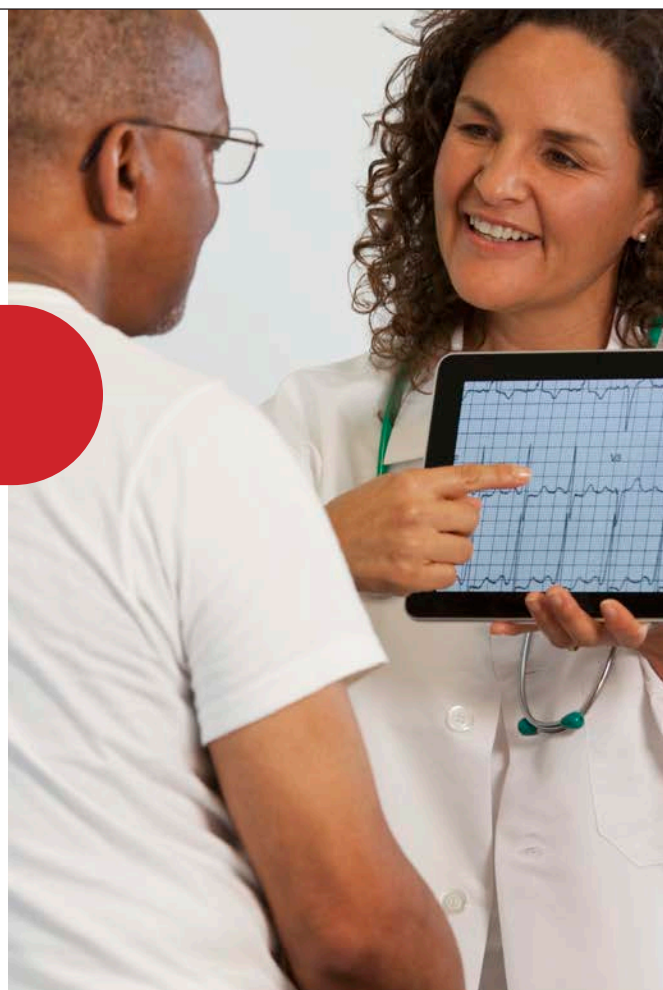
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Council Transitions to Pre-Sessions Meeting: QCOR at Scientific Sessions



This is my last column as chairperson of the Council on Quality of Care and Outcomes Research (QCOR). It has been an honor to lead this council over the last two years. Dr. Elizabeth Jackson will be taking over this role, and I am confident that she will do an outstanding job.



Another big change happening for QCOR is that our specialty conference is getting a facelift. Rather than meeting in the spring as we have historically done, we will be meeting the day before Scientific Sessions. We

believe this will allow more people to attend and maximize our efforts to support the mission of the AHA.

QCOR at Scientific Sessions will be November 10 (Sessions is November 11-13). We encourage everyone who plans on attending to arrive on the 9th so as not to miss any of the programming, which includes:

- Early Career Investigator Award Finalists Abstract Session
- Rapid Fire Oral Abstract Session
- QCOR-focused Debate Session
- Health Equity Session
- Interactive/Networking Session
- QCOR Networking Luncheon

There are so many additional opportunities for engagement and programming at Sessions, so plan to stay the whole time and join us at our council gathering Saturday evening. You will see more communication on this so please continue to watch your Inbox.

We are excited to gather, network, and elevate QCOR science. I hope to see you all there! ■

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The Important Work of the Stroke Council Never Stops

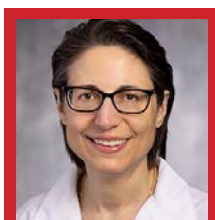


CONNECTING
WITH THE
CHAIR

Patrick Lyden
MD, FAHA

Please join me in recognizing our incoming chair, Dr. Sepideh Amin-Hanjani. It has been a terrific experience for me to get to know Sepi as she prepares to take the reins.

Dr. Amin-Hanjani received her medical degree at Harvard Medical School and completed neurosurgery residency training at the Massachusetts General Hospital in Boston,



Sepideh
Amin-Hanjani
MD, FAANS,
FACS, FAHA

Massachusetts. She then did a Cerebrovascular & Skull Base Fellowship at the Barrow Neurological Institute in Phoenix, Arizona.

She assumed a faculty position in the Department of Neurosurgery at the University of Illinois at Chicago, where she became a tenured professor in 2011. She also served as co-director of neurovascular surgery, with clinical work focused on treating cerebrovascular disease and skull base pathology. She is director of Cerebrovascular and Skull Base Surgery; vice-chair of the Department of Neurological Surgery at the University Hospitals Cleveland Medical Center; and tenured professor in the Department of Neurological Surgery Case Western Reserve University School of Medicine.

As I transition to past chair, I will continue to work closely with Sepi on promoting diversity and equity on the Stroke Council. Even now, we are reaching out to you, hoping to interest you in serving the AHA/ASA on a committee, task force or writing group, especially if you identify with a demographic that has traditionally been underrepresented. Please

contact us through Professional Heart Daily and let us know of your interest, background and experience.

As I write this, we are just a couple of months past the extraordinary ISC 2023 in Dallas. We had numerous pivotal clinical trial readouts, many of which were immediately posted in the *New England Journal of Medicine* or similarly high-profile journals.

APRIL Trial: This Phase Ib/Ila trial looked for safety and early efficacy of ApTOLL, a novel and exciting aptamer targeting TLR-4. Aptamers are nucleic acids designed to bind to important targets, usually cell-membrane residing ligands. The trial used escalating doses to establish safety and analyzed the drug's pharmacokinetic profile. No safety issues were found. There was a potentially beneficial effect on mortality and mRS, but of course, all this must be looked at in a larger trial.

SELECT 2 Trial: EVT is often avoided in larger-core ischemic strokes. In this embolectomy trial, large core was defined as ASPECTS 3-5 or ≥ 50 ml of very low blood flow, or ≥ 50 ml severe ADC. Although they randomized patients and used blinded outcomes, treatment was "open label," which weakens the rigor of the trial. The study randomized 352 patients to embolectomy or standard medical care, and the embolectomy group showed a powerful and persuasive treatment benefit, with an mRS shift odds ratio of 1.51 (95% CL 1.20-1.89). Interestingly, a larger core (> 100 ml) also benefited. Rates of sICH, mortality and early neurological worsening were not different between the treatment groups. This study confirmed the prior RESCUE JAPAN and was accompanied at this meeting by a similar trial with similar results.

ANGEL ASPECTS Trial: This trial used similar entry criteria, randomized 456 patients to embolectomy or best medical care in an open manner, but also used blinded outcomes. Again, the mRS shift odds ratio of 1.37 (95% CL 1.11 to 1.69) favors intervention with reasonable safety.

In discussing these two trials in the context of the preceding RESCUE JAPAN trial, and other trials still in progress, I think it's important to consider a few limitations. First, the operators were not blinded to treatment allocation, for obvious reasons. It is reasonable, therefore, to assume that the subsequent treatment teams, rehabilitation teams and patient families also knew. While it is gratifying that the three-month Rankin score was obtained by "blind" raters, it is impossible to know whether unblinded treatment teams and families altered their care of the patient in undefined ways. This approach, sometimes called PROBE (Prospective Randomized open Blinded End-point), is becoming more popular, especially with intervention trials. I would argue that this design is inherently weak, and before we rush to translate these powerful clinical trial results into daily practice, I would like to see more evidence that the result is repeatable and generalizable. We await ongoing trials, as well as some real-world confirmations.

STROKE AF Trial: The results of this trial echo my own clinical experience, so of course I like it a lot! In this trial, 492 cryptogenic stroke patients were randomized to receive an implanted cardiac monitor or standard care. In a prior report of the results after one year, the recorder detected a significant incidence of atrial fibrillation that was missed in the control group. At ISC 2023, this report of three years follow-up showed that atrial fibrillation was detected in 21.7% versus 2.4% for a hazard ratio of 10.0 (95% CL 4.0 – 25.2). These data are similar in degree of benefit to the CRYSTAL AF results. The crucial question we do not have data for is whether detecting atrial fibrillation would translate into stroke prevention. It is true that we already know that stroke is prevented in non-valvular atrial fibrillation patients with treatment, thanks to the landmark SPAF trials. Cryptogenic stroke MAY be a different animal, but there is no real biological rationale to support that idea. Hence, in my patients, if I detect

atrial fibrillation with an implanted cardiac recorder, I start treatment immediately.

These are only a handful of results. The meeting was filled with similar, exciting trial results, basic science, workshops, debates and seminars.

Planning is underway for ISC 2024, and I have no doubt the meeting will likewise be a rich source of new information and new, improved approaches to preventing, treating and recovering from stroke.

The important work of the council could not be accomplished without committees and their chairs whose commitment and selfless hours advance the mission of the AHA/ASA.

The following are the 2022–23 Stroke Council committee chairs:

- **Brain Health**
Philip Gorelick, MD, MPH, FAHA
- **Early Career**
Nicole Gonzales, MD, FAHA
- **DEI Committee**
Anjail Sharrief, MD, MPH, FAHA
- **Emergency Neurovascular Care**
Soojin Park, MD, FAHA
- **Interprofessional Health**
James Garcia, MS, PhD
- **Nominating**
Peter Panagos, MD, BA, FAHA
- **Membership and Communications**
Dawn Meyer, PhD, FNP, FAHA
- **Neurovascular Intervention**
Sepideh Amin-Hanjani, MD, FAHA
- **Performance Measures Oversight**
Daniel Gibson, MD
- **Professional Education**
Laura Stein, MD, MEd
- **Quality and Outcomes**
Nada El Hussein, MD, MSc, FAHA
- **Rehabilitation and Recovery**
Richard Harvey, MD, FAHA
- **Scientific and Clinical Education
Lifelong Learning**
Cheryl Bushnell, MD, MHSc, FAHA
- **Scientific Statement Oversight**
Jose Romano, MD, FAHA
- **Telestroke**
Marcella Wozniak, MD, PhD ■



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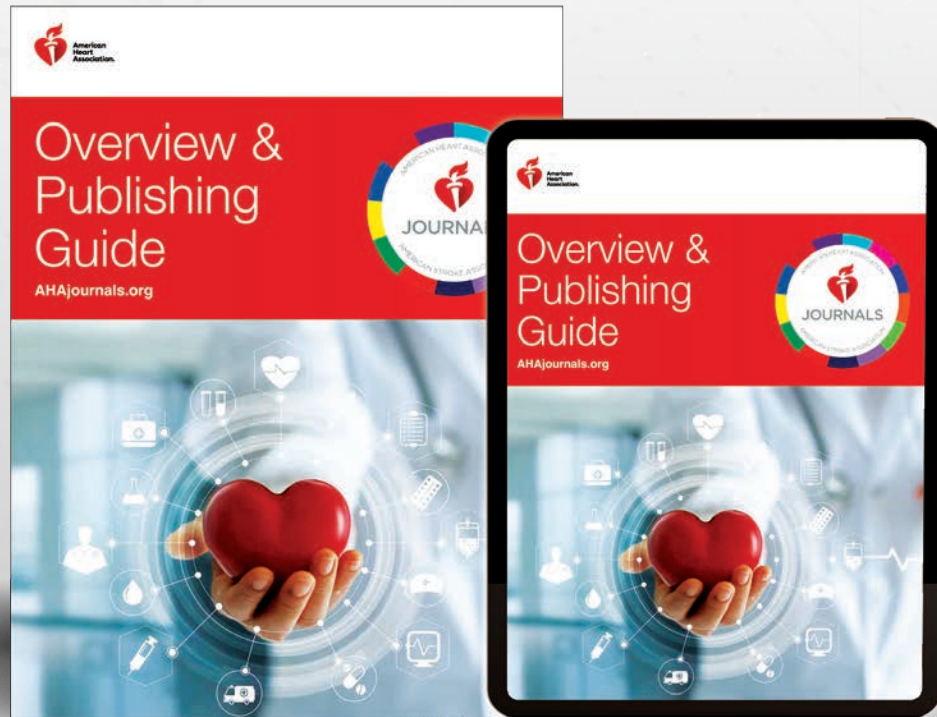
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