American Heart Association.

CONNECTIONS

SERVING SCIENTIFIC COUNCILS 2024 Volume 2

New AHA President Leads With a Cardinal Rule: Put the Patient First

Dr. Keith Churchwell was enjoying Christmas Day 1991 at home with his wife when their phone rang. He was needed at the hospital.

As the chief resident for Grady Memorial Hospital, one of four hospitals in the Emory University system in Atlanta, Churchwell oversaw about 160 early-career doctors, including the caller — an anesthesiology intern who'd made a mistake.

The intern (or, first-year resident) had stuck himself with a needle contaminated with the blood of an HIV-positive patient. At that time, most people who became HIV-positive developed life-threatening infections and cancers.

Churchwell was 30, a few years ahead of the intern, yet also still at the outset of his career. Nothing in his undergraduate studies at Harvard University, medical school at Washington University or his residency at Emory prepared him for such a predicament.

However, growing up as the youngest child of Robert and Mary Churchwell had.

Dr. Keith Churchwell is president of the American Heart Association for 2024-25, the chief volunteer scientific and medical officer of the association. (American Heart Association)

Churchwell went to the hospital, consoled the intern and arranged for medical and emotional support from the human resources team. Then he turned his attention to the rest of the intern's shift. As the boss, Churchwell could've called in another intern. Instead, he handled it himself, visiting 20 patients and performing two spinal taps.

All these years later, Churchwell remembers the specifics of that shift because it was a milestone day. It was when he first grasped what would become his true calling within the calling of medicine: leadership.

Churchwell went on to hold top roles at the Vanderbilt Heart and Vascular Institute in Nashville and the Yale New Haven Health system in Connecticut. On July 1, he takes on another, becoming president of the American Heart Association. His tenure begins just weeks after the AHA's 100th birthday.

"Keith's vision, drive and leadership have profoundly impacted our organization for many years," AHA Chief Executive Officer Nancy Brown said. "We're so excited to have him at the helm as we boldly enter our second century."

The path to cardiology

Churchwell was in ninth grade when his economics teacher asked everyone to write about what they wanted to be when they grew up.

(continued on page 3)

Council News

From the COC Chair

Cheers to 100 Years

Cheryl Anderson
PhD, MPH, FAHA

This is my last column as the Chair of the Council Operations Committee, and it has been an immense pleasure to serve in this role. Together we have worked on an initiative I launched at the beginning of my tenure in July 2022. An initiative to take up the mantle personally and recruit new members to join us in the work and mission of the AHA; an initiative called "Each One, Reach One". While my role as Chair of COC ends, the initiative will continue until the end of 2024 so I would like to take this opportunity to challenge you once again to do your part and try to recruit at least one new professional member. As we celebrate the centennial year of the AHA, I cannot think of a better way to commemorate the organization's purpose than to bring others in on the life-changing goals. I invite you to **watch this video** as an example of how you can reach those in your sphere of influence by "sharing your why" to motivate them to join.

In closing, I would like to express my gratitude to all of you who help make this organization a pillar of innovation and a relentless force for a world of longer, healthier lives, for 100 years and beyond. It has been my honor.

(**New AHA President** *continued from page 1)*

Having never really thought about it, he started by asking himself, "What am I interested in?"

The answer: math, science and art. What profession touched all three, plus offered a way to support his community?

Medicine, he realized. Like his brother Andre, eight years older, was pursuing.

As Keith wrote the report, he began envisioning himself wearing a white coat, treating patients. The idea continued to blossom. Soon, becoming a doctor was his North Star. He also set the goal of attending Harvard, just as Andre had.

In retrospect, it's no surprise that Keith, Andre and all their siblings pursued a great education as a gateway to a career rooted in helping others.

Because their role models were Robert and Mary.

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Robert began forging his work ethic and values in childhood.

To help his impoverished family, Robert got up before the sun to collect wood and other items to sell. Some winter mornings, he showed up at school with icicles dangling from his clothes; for the rest of his life, his closest friends called him "Jack," short for Jack Frost.

After high school, he joined the Army, seeing action in World War II in Europe and the Pacific. He rose to staff sergeant despite having rankled higher-ups by starting a newspaper to write about segregation and how poor conditions were for Black soldiers.

Robert and Mary Churchwell believed in education, hard work and serving their community. All five of their children followed their lead. (Photo courtesy of Dr. Keith Churchwell)

Once home, he graduated from Fisk, a historically Black university in Nashville. Then he and a friend started a newspaper. Soon, the Nashville Banner hired Robert, making him the first Black reporter at a major Southern daily newspaper — or, as he became known, "the Jackie Robinson of journalism." If that sounds celebratory, it was anything but.

The Banner publisher only wanted a Black reporter to help with sales in Black neighborhoods. He even told community leaders to pick whomever they wanted. Robert was flattered and burdened at being their choice. Meanwhile, he wasn't welcomed in the all-white newsroom. He had to work at home and drive to the office to turn in each story.

He continued writing until shortly before his death at 91, in 2009. Today, his fedora and typewriter are displayed at the National Museum of African American History and Culture in Washington, D.C. In Nashville, his name is on an elementary school — a tribute that's especially fitting because of his wife.

Mary grew up in the tiny rural town of Bell Buckle, Tennessee. When she was old enough for high school, her parents sent her to Nashville. She started college but left to marry Robert. They had three children when she became pregnant with a fourth child. Or so she thought. She delivered identical twins: Kevin, who was expected, and Keith, who wasn't.

The twins were in diapers when Mary went back to college. She earned a bachelor's degree, then a master's. She went on to teach elementary school for over 30 years.

After she died — in 2020, at age 89 — Keith learned the secret of how a teacher and a newspaper reporter put

(continued on page 4)

(**New AHA President** *continued from page 3)*

Dr. Keith Churchwell (far right) with his parents and his twin brother, Dr. Kevin Churchwell. (Photo courtesy of Dr. Keith Churchwell)

five kids through college, including a stretch when four were in graduate school at the same time.

"Her financial adviser says she was the smartest woman he'd ever met," Keith said. "He called her 'the Warren Buffett of Nashville.'"

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By the time Keith was at Harvard, Andre was doing his residency.

During Keith's sophomore year, he shadowed Andre for a shift. Everything about the experience assured Keith that he'd chosen the perfect career.

Except, he wasn't sure yet what kind of doctor he'd become.

In his second year of med school, Keith took a class that studied the body, system by system.

"When we got to the cardiovascular system, after that first lecture, I said, 'That's it!'" he said. "It all just made sense to me."

Washington University is best known as a research hospital. Yet Keith was more interested in becoming a clinician. Since ninth grade, he'd been imagining himself putting a stethoscope on a patient's chest, making a diagnosis and trying to heal them.

He had great timing, too.

When Keith started his residency, a heart attack patient faced open-heart surgery and 30 days in the hospital. By the end of his residency, patients were undergoing a noninvasive procedure to have their clogged coronary arteries propped open with stents and going home in about a week.

By doing his residency at Emory, Keith again followed Andre's footsteps. Ditto for becoming chief resident.

Andre was Emory's first Black chief resident; Keith became the second. Both had the role known as "the chief chief," meaning they oversaw residents at Emory's primary hospital as well as the chief residents — and their residents — at the other three hospitals.

Up to this point, Keith's biggest leadership job had been starting a movie club at Harvard. He raised money to buy projectors, acquired films, got people to show up and more. He did such a good job that the club had $15,000 in the bank when he graduated. Of course, that experience was nothing compared with his duties at Emory: filling out schedules for about 160 people and dealing with whatever issues each might have — such as the anesthesia intern's accidental needle stick.

Another lesson Keith learned involved two residents quitting late in their final semester.

The pair were fed up with one of the main doctors. Keith tried talking them into riding it out for a few months. It didn't work, leaving him to "beg, plead and cajole people" to fill the void created by their absence. Six weeks later, they asked to come back. It was up to Keith. He was leaning against it. Then he spoke to the doctor who'd scared them off. His advice changed Keith's perspective.

"I remember that story so well because it wasn't about medicine. It was about life," Keith said. "You've got to support them, help them become a better person, a better doctor, a better human being — and you become a better human being by doing this."

During this year, Keith also developed one of the hallmarks of his leadership style: inclusion.

While being in charge forced him to be extroverted, he's more comfortable being introverted. Figuring that others might be, too, he insisted during rounds and meetings that everyone speak up. This way, no ideas get lost simply because someone felt timid.

Most of all, what Keith learned from the experience was that he liked leading.

'What's best for the patient?'

After three years of cardiology fellowship, Keith did a fourth year focused on nuclear cardiology. He considered making a career of it until something else happened.

Andre called.

His cardiology practice in Nashville was hiring. So Keith and his wife, Dr. Leslie Douglas-Churchwell, an internal medicine specialist, headed to his hometown.

Just as cardiology care changed rapidly while he was a resident, the business side of medicine began changing soon after he entered private practice.

Academic hospitals began buying private practices, often to turn them into a network under the school's umbrella. In Nashville, Vanderbilt entered into a relationship with their group, which ultimately led to the practice being purchased.

At first, Keith was the liaison between his team of clinicians and Vanderbilt. When the Vanderbilt Heart and Vascular Institute was created, Keith played an integral role, eventually becoming executive director.

By adding hospitals and clinics in Nashville and rural Tennessee, VHVI's reach surged. The number of monthly patient visits went from about 9,800 in 1999 (the year Keith joined the staff) to roughly 145,000 in 2014 (the year he left).

As much as Keith treasured the one-on-one interaction with patients, he rarely had the time. Yet the tradeoff was easy to justify.

"When I worked in the clinic, I saw about 3,000 patients," he said. "As an administrator, I was touching 100,000 lives every month — over a million people per year."

Still, Keith's background as a clinician shaped him as an administrator.

Every decision he made was viewed through the lens of, "What's best for the patient?"

Answers weren't based on gut instincts or anecdotal evidence. His stock line: "What does the data tell us?"

Dr. Keith Churchwell believes that when doctors and hospital systems focus on what's best for the patient, "everything else takes care of itself." (Mirar Media Group for the American Heart Association)

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One day, VHVI's chief of nursing asked Keith what it would take for their institute to be the safest in the country.

He loved that challenge. They just had to figure out how to do it and how to collect data to prove it.

Step 1 was a meeting with key members of every aspect of the institute. They wound up developing a scorecard for a particular type of procedure. Metrics included how patients were doing 30, 60 and 90 days after discharge.

It worked so well that other procedures were tracked. The data exposed variances between physicians, between groups, between days of the week and even times of day.

They addressed weaknesses. Some problems resolved themselves; knowing they were being scored, staffers became more diligent.

Then came another idea.

Instead of merely measuring patient outcomes by whether they checked back into the hospital, patients were called and asked how they were doing.

The big lesson was that many patients didn't get prescriptions filled — and many who did weren't taking their pills, not even something as basic as aspirin.

Price was usually the reason. But VHVI took much of the blame for not doing a better job of preparing patients for life at home. Out went their long, complicated discharge note; in came a simple one-page document.

All this played out over two years. In retrospect, it's a case study in Keith's leadership style. He doesn't see himself as an all-knowing leader; he's the guy who recognizes a good idea when he hears it, empowers a coalition of subject-matter experts to take on the challenge, comes up with a solution, then keeps refining the process.

He likes to compare his approach to a shark, although not for the ferocious reasons such an analogy inspires.

"Do you know why sharks have thrived for hundreds of million years? Most never stop," he said. "They have to have water going across their gills; if they stop, they'll suffocate.

"We need to be like sharks — always moving, always adapting as we go forward."

• • •

The best part of Keith's 15 years at Vanderbilt was working alongside Andre and also Kevin, who worked his way up to chief executive of the children's hospital.

Even if their interactions were sometimes limited to passing in a hallway or attending the same meeting, living in Nashville meant quality time together for the entire Churchwell family.

Kevin left first. Within a year, Keith did, too, becoming a vice president in the Yale New Haven Health system. In a few years, he became chief operating officer, then president of Yale New Haven Hospital, the system's flagship institution. Almost 200 years old, it boasts a lengthy list of "firsts" and having the artificial heart pump developed there.

Also noteworthy was the timing of that promotion: a few months into the COVID-19 pandemic.

Keith approached it much like his bid to make VHVI the safest institute in the country. The goal this time was for Yale New Haven Hospital to have better outcomes with COVID-19 patients — of all ethnicities, races, genders and ages.

Drs. Kevin, Keith and Andre Churchwell (from left) on the campus of Vanderbilt University, where they worked together for 15 years. (Mirar Media Group for the American Heart Association)

(continued on page 6)

(**New AHA President** *continued from page 5)*

"Given that we didn't know what to do or how to treat this disease, we needed to be led by the data and the information that we were accumulating to actually think about and work toward best practices," he said.

Their approach is best illustrated this way: Imagine two patients showing up with COVID-19, both with an oxygen saturation of 85% (anything below 90% is trouble). One patient is a 35-year-old fit white man; the other a 65-year-old Black woman with obesity. Who gets what treatment?

At YNHH, they got the same treatment because they had the same disease and it was manifesting the same way.

YNHH wound up with a greater overall success rate than the national average and was among the best for patients from underrepresented communities.

Keith is quick to credit others for these results. Still, the wide smile while sharing that credit revealed the pride of someone who aced the biggest test of his career.

Helping patients another way — via the AHA

Talking to his wife, Keith had an epiphany about his work at VHVI.

Sure, he was helping improve the cardiovascular health of everyone who came through the institute's doors. But what about everyone else in Nashville?

He knew the AHA was involved in health screenings, CPR training and more. Plus, the AHA invested over $20 million per year into research done at Vanderbilt. So he called the Nashville office and asked to join the local board.

Right away, he knew he'd found the right organization. Keith became a member of the Southeast Affiliate board, then president of that board. Soon he was taking on national roles, too.

"It was all a lot of work, but I liked that work," he said.

About a week into his job in New Haven, a team of AHA representatives showed up at his office to welcome him. He soon found himself on this affiliate's board.

At one of his first meetings, they discussed criteria to become recognized as a gold-, silver- or bronze-level board. Keith spent the next 20 minutes detailing a path to gold status. The room became quiet. He feared having alienated himself. Instead, months later, he became president of that board, too. And they indeed achieved gold status.

Nationally, Keith has served on the Diversity Leadership Committee, the Science Advisory and Coordinating Committee and the Quality Certification Science Committee. He went from serving on the Advocacy Coordinating Committee to leading it for four years.

During the pandemic, he was the lead author on an **AHA presidential advisory** titled, "Call to Action: Structural Racism as a Fundamental Driver of Health Disparities."

"It's a generation of work, of course, to fix it, but it starts with identifying the problems," he said. "The AHA is not going to fix structural racism, but we can be an agent of change in identifying the problem and providing examples of ideas and policies that can lead to real improvement in the delivery of medical care."

Structural racism would soon become one of the key barriers to health that the AHA would tackle aggressively, along with social determinants of health and the unique health challenges facing people in rural America.

As Keith approaches his yearlong term as the AHA's top scientific volunteer, one of his goals is enticing more practicing cardiologists to make the decision he made long ago.

"It sounds like a recruiting pitch: 'Help us help you,'" he said. "But a greater understanding of the AHA's role can improve the lives of the patients and communities the cardiologists are serving, and that's an important investment they should be making."

Dr. Keith Churchwell and his wife, Dr. Leslie Douglas-Churchwell (far right), with their daughter Lauren Cook and her husband, Adam Cook. (Photo courtesy of Dr. Keith Churchwell)

Most mornings, Keith can be found on a treadmill.

If it were up to him, the rest of the day would be spent watching movies and/or listening to music.

He'll watch pretty much any movie, although he has a fondness for the classics. (He started that Harvard club as an excuse to watch certain ones.) As for music, favorites include opera, show tunes, jazz, symphonic music and the Great American Songbook.

He's been president of the New Haven Symphony Orchestra the last four years.

For about nine years, Keith was a board member for Columbus House, which works with people in New Haven who are experiencing homelessness.

"Leslie and I have always been very big believers that wherever we live, we need roles outside of our day-to-day job to invest time, money, effort and planning initiatives to help the overall community," he said.

They also love traveling, particularly overseas. Domestically, a favorite destination is Baltimore, home to their daughter, Lauren, a newlywed pursuing a Ph.D. in archaeology and art history at Johns Hopkins.

Keith also loves going home to Nashville.

Three of his siblings live there, as do many of their offspring. The entire Churchwell family gathered in May for the law school graduation of Kevin's son.

In recent years, the three Drs. Churchwell have delivered talks together. Each offers a unique vantage point: Kevin is president and chief executive officer of Boston Children's Hospital; Andre is senior advisor to the chancellor on inclusion and community outreach at Vanderbilt University.

Sometimes they agree, sometimes they argue. Always, they have fun.

And when Keith speaks, the message is succinct:

"It's really about the patients that we take care of," he said. "Because if we do that incredibly well, everything else takes care of itself."

Benefit Booster: AHA Journals

Are you fully utilizing your membership access to the AHA/ASA Journals? As a benefit of your membership, you have online access to all 14 journals. At AHAjournals.org, you'll find curated collections that showcase emerging fields like artificial intelligence, resources for early career researchers, the AHA Journals' commitment to health equity, and more. Members also receive discounted publication fees for the AHA's three open access journals: *Journal of the American Heart Association (JAHA)*, *Stroke: Vascular and Interventional Neurology (S:VIN)*, and *Annals of Internal Medicine: Clinical Cases (AIMCC)*.

You can enjoy the latest updates in cardiovascular and cerebrovascular research from across the journal portfolio in the AHA Journals Podcast Network. So, whether you're a clinician making the rounds, a researcher at the bench, or somewhere in between, you'll find a podcast for your needs ready any time of day.

Moreover, you can also fulfill your continuing medical education requirements with the member-exclusive AHA Journals CME program. New quizzes are posted weekly. Quizzes can be accessed with one click from the table of contents, and you can earn up to 74 credits per year.

See everything the AHA Journals have to offer today!

Fellow of the American Heart Association (FAHA)

Spring 2025 Cycle Opens – July 24, 2024

Spring 2025 Submission Deadline – January 24, 2025

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

Exciting News from Scientific Sessions 2024

The planning for exceptional learning and interactive opportunities for Scientific Sessions 2024 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.

As we mark the AHA's Centennial year, we're excited to expand our digital horizons. We are increasing the opportunities for digital abstract presentation, embracing innovation, and implementing a forward-looking approach as we step into our Second Century.

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 science and medicine. This is only made possible by dedicated AHA professional volunteers and every AHA scientific council representing 26 communities in cardiovascular science and medicine.

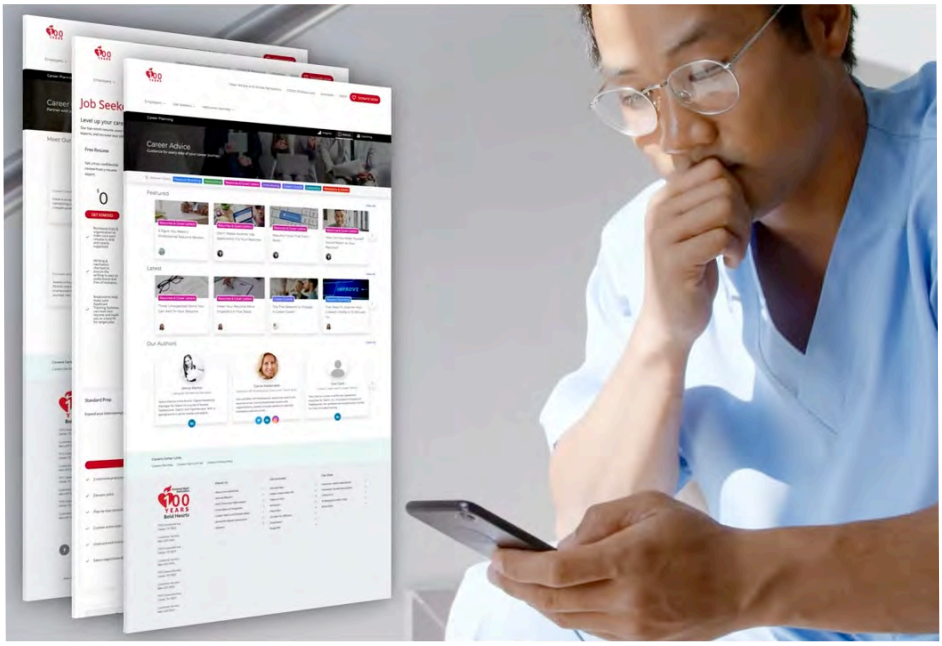
Come experience the latest developments for transforming patient care and influencing health with cardiovascular leaders and peers in Chicago for Scientific Sessions 2024 November 16-18 with Pre-Sessions Symposia & Early Career Day on November 15.

Benefit Booster: Job & Career Resources

In school, there are often resources available to students to help them succeed, such as tutoring, study groups, and in some cases, really dedicated teachers who will provide extra help to those who are struggling. Have you ever found yourself wishing those kinds of resources were available in your professional life? Well, lucky for you, you're a member of the AHA.

Introducing the American Heart Association Professional Membership Job Board, your one stop destination for global healthcare professionals and over 115 specialties. Whether you're just starting out or looking for a new opportunity, our Professional Membership Job Board has resources to propel you forward, all in one place.

Watch this video to learn more and visit the job board today!



COUNCIL AWARDS & GRANTS

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

American Heart Association. 100 YEARS Bold Hearts

AHA | ASA

Upcoming Scientific Events

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

International Stroke Conference (ISC)
February 5 – 7, 2025, Los Angeles,

New eModule for Healthcare Professionals on Effective Dietary Counseling

Healthy for Good eModule

Learn how to better educate your patients on the six core elements needed for a healthy diet.

Good nutrition is key for minimizing the risk of atherosclerotic cardiovascular disease (ASCVD) as well as its risk factors.[1] After a thorough review of evidence supporting the benefits of a healthy diet, the 2020 US Dietary Guidelines Advisory Committee identified six core elements for a healthy dietary pattern: vegetables, fruits, grains, dairy, proteins, and fats.[2] Effectively communicating this information to patients is of crucial importance and there is a demand for more dietary counseling for patients with risk factors for ASCVD or who have ASCVD.

Healthcare professionals have stated that a lack of nutrition education impedes their ability to deliver effective dietary counseling to their patients.[3] As a result, the American Heart Association launched the **Healthy for Good™ eModule** on effective dietary counseling. "Busy frontline healthcare professionals need evidence-based tools that help them provide the best care to their patients within the challenging time constraints of an average clinic appointment. Access to user-friendly tools like the **Healthy for Good™ eModule** not only provide evidence-based nutrition education, but also help clinicians navigate the most challenging barriers to implementing diet-based behavior change in their patients through effective dietary counseling, including the six core elements of a healthy diet," says Erin P. Ferranti, PhD, MPH, RN, FAHA, and Science Advisory Panel Chair for the development of the **Healthy for Good™ eModule**.

The course is accredited for physicians, physician assistants, nurse practitioners, nurses, dieticians, and is free to AHA members. Other healthcare professionals involved in dietary counseling may also take the course and receive a certificate of completion. **Help your patients make better food choices.**

1. Arnett DK, Blumenthal RS, Albert MA, et al. 2019 ACC/AHA Guideline on the Primary Prevention of Cardiovascular Disease: A Report of the American College of Cardiology/American Heart Association Task Force on Clinical Practice Guidelines. Circulation. 2019 Sep 10;140(11):e596-e646. doi: 10.1161/CIR.0000000000000678. Epub 2019 Mar 17. Erratum in: Circulation. 2019 Sep 10;140(11):e649-e650. Erratum in: Circulation. 2020 Jan 28;141(4):e60. Erratum in: Circulation. 2020 Apr 21;141(16):e774. PMID: 30879355; PMCID: PMC7734661.

2. Tsao CW, Aday AW, Almarzooq ZI, et al.; American Heart Association Council on Epidemiology and Prevention Statistics Committee and Stroke Statistics Subcommittee. Heart Disease and Stroke Statistics-2023 Update: A Report From the American Heart Association. Circulation. 2023 Jan 25. doi: 10.1161/CIR.0000000000001123. Epub ahead of print. PMID: 36695182.

3. Aspry KE, Van Horn L, Carson JAS, et al.; American Heart Association Nutrition Committee of the Council on Lifestyle and Cardiometabolic Health; Council on Cardiovascular and Stroke Nursing; Council on Cardiovascular Radiology and Intervention; and Stroke Council. Medical Nutrition Education, Training, and Competencies to Advance Guideline-Based Diet Counseling by Physicians: A Science Advisory From the American Heart Association. Circulation. 2018 Jun 5;137(23):e821-e841. doi: 10.1161/CIR.0000000000000563. Epub 2018 Apr 30. PMID: 29712711.

WE'RE HERE TO HELP

Contact AHA Member Services for any questions about your membership benefits:

(888) 242-2453 (inside U.S.) • (972) 349-5803 (outside U.S.)

Monday – Friday: 8:00am to 5:00pm Central Time

ahamembership@mciusa-support.com

Stand Out at an Upcoming AHA Conference

VISIBILITY CREATES OPPORTUNITY

$500k available

Apply for a council-sponsored award that recognizes your achievements, provides a financial prize, and shines a spotlight on you and your science.

Upcoming Meetings

- Resuscitation Science Symposium 2024
  November 16–17, 2024
- Scientific Sessions 2024
  Pre-Sessions Symposia & Early Career Day:
  November 15, 2024
  Sessions: November 16–18, 2024
- International Stroke Conference 2025
  Pre-Cons and Stroke Nursing Symposia:
  February 4, 2025
  Sessions: February 5–7, 2025
- EPI|Lifestyle Scientific Sessions 2025
  March 3–6, 2025

We invite you to apply or nominate a deserving colleague for one of our numerous awards.

Please visit professional.heart.org/en/professional-membership/awards-and-lectures for complete award criteria, deadlines, and application or nomination instructions.

Apply or Nominate Today

Congratulations to the 2024 AHA Merit Awardees

The American Heart Association's Merit Award is one of the organization's highest honors. The Merit Award supports highly promising, novel research that has the potential to move cardiovascular science forward quickly, with high impact. Congratulations to the 2024 awardees:

Joseph Loscalzo, MD, PhD, FAHA, the Distinguished Hersey Professor of the Theory and Practice of Medicine and the Samuel A. Levine Professor of Medicine at Harvard Medical School, former chair of the department of medicine and physician-in-chief emeritus at Brigham and Women's Hospital in Boston. Dr. Loscalzo is researching whether chemicals naturally occurring in foods could help treat heart disease.

Joseph Loscalzo
MD, PhD, FAHA

Daniel J. Rader, MD, FAHA, Seymour Gray Professor of Molecular Medicine, chair of the Department of Genetics at the Perelman School of Medicine at the University of Pennsylvania School of Medicine and chief of the Divisions of Human Genetics at Penn Medicine and the Children's Hospital of Philadelphia. A genetics expert, Dr. Rader is exploring the molecular mechanisms of lipid metabolism and cardiovascular diseases.

Daniel J. Rader
MD, FAHA

Philip S. Tsao, PhD, FAHA, a professor of medicine in cardiovascular medicine at Stanford University School of Medicine and associate chief of staff for precision health at the VA Palo Alto Health Care System in Palo Alto, California. He is studying how vaping impacts the development of abdominal aortic aneurysms.

Philip S. Tsao
PhD, FAHA

AHA Awards $15 Million to Study Inflammation's Impact on Heart and Brain Health

Scientists at Northwestern University, University of Michigan and University of Pittsburgh will focus on closing knowledge gaps about inflammation's role in cardiac and brain dysfunction as the AHA's new **Strategically Focused Research Network (SFRN) on Inflammation in Cardiac and Neurovascular Disease**. Each awarded Center will conduct three novel research studies and will also collaborate to develop a common network-wide project.

Northwestern University Chicago Campus

Center Director: Matthew J. Feinstein, MD, MSc, FAHA

Research teams at Northwestern University, collaborating with a team from Chicago State University, will undertake three different projects focused on inflammation in heart failure with preserved ejection fraction (HFpEF).

University of Michigan

Center Director: Anthony Rosenzweig, MD, FAHA

The academic medical center of the University of Michigan will serve as the director of a collaborative research effort between Michigan Medicine and Massachusetts General Hospital. These research teams, in collaboration with a team from Oakland University in Rochester Hills, Michigan, will study the driving forces behind inflammatory processes linked to aging and obesity and how to prevent inflammation that could lead to heart failure, dementia and other diseases.

University of Pittsburgh

Center Director: Stephen Y. Chan, MD, PhD, FAHA

University of Pittsburgh research teams, in collaboration with a team from Prairie View (Texas) A&M University, will conduct three different projects aimed at identifying and treating interrelated conditions of brain and vascular pathology.

DID YOU KNOW?

AHA Professional Members can apply for research funding. Over $150 million awarded **ANNUALLY.** Learn more.

CATCH UP WITH *CONNECTIONS*

To view previous issues or just Scientific Council sections, log in here.

AHA Support of Female Researchers

The AHA's research program has a proud reputation of leadership and participation of women. Over the three-year period 2021-2023, female investigators submitted 45% of total applications and received 45% of awards. As science and medical professionals advance in their careers, the percentage of females who remain in the profession decreases at a higher rate than men. The AHA is working to **remove barriers to females' success**.

- For programs with eligibility restrictions, the AHA does not count **interruptions of work** experience due to circumstances such as caring for children or family members.
- To foster a work environment free from harassment or discrimination, AHA Research is bolstering **procedures, guidelines, requirements, and communications** to make expectations clear. The AHA wants to ensure that individuals know their **rights**, where to report incidents of harassment, and the resources available to them.
- All faculty-level applicants for research funding are required to state how they contribute to a **safe, inclusive, and diverse work environment**. This includes courses that have been taken or policies/processes put into place.
- AHA peer reviewers are strongly encouraged to participate in **bias reduction training** and report on sessions they have taken.
- To raise **awareness of equity** among their staff, department heads' letters of support must include the date of the applicant's last salary review and the percentile range of the applicant's salary for faculty at the same level within the department.

Fall/Winter AHA Research Funding Deadlines

Proposal deadlines have been announced for training and early career funding to commence in 2025. ProposalCentral will open eight weeks prior to each deadline for submissions. Applicants can prepare **required application documents** in advance. More award deadlines will be announced.

- **AHA Predoctoral Fellowship**
  Wednesday, September 4, 2024
- **AHA Postdoctoral Fellowship**
  Thursday, September 5, 2024
- **Institutional Award for Undergraduate Student Training**
  Wednesday, September 11, 2024
- **AHA Institutional Research Enhancement Award (AIREA)**
  Thursday, September 12, 2024
- **Career Development Award**
  Wednesday, December 5, 2024
- **Research Supplement to Promote Diversity in Science**
  Thursday, February 6, 2025

Mentoring for Professionals

A Professional Heart Daily Resource

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- Interested in a long-term mentoring relationship?
- Considering a change in your career and looking for advice on how to navigate your next move?

AHA's mentoring match tool can help you!

Using information from your PHD profile and answers to the brief mentoring questionnaire, you can be matched with someone meeting your specific requirements. The mentoring match tool is **free** and availalbe only to AHA member.

Check out the **Mentoring for Professionals match tool** today.

3CPR is Active at Scientific Sessions

CONNECTING WITH THE CHAIR

Sarah Perman
MD, MSCE, FAHA

October is Sudden Cardiac Arrest Awareness Month. In 2021, mortality from sudden cardiac arrest due to an underlying cause in the United States was >20,000. In the United States, the majority of Out of Hospital Cardiac Arrests (OHCA) occur in homes/residences (~72%), followed by public settings (~17%) and nursing homes (~11%). For OHCA, survival to hospital discharge was ~9% for all EMS-treated non-traumatic cardiac arrests, ~14% for bystander-witnessed adult arrests, and ~17% for 911 responder-witnessed arrests.

In this issue, we would like to highlight the stories and work of some of the 3CPR members who are actively increasing awareness about sudden cardiac arrest and improving the survival/outcomes of cardiac arrest patients.

Dr. Samantha Fernandez Hernandez's Cardiac Arrest Story

Dr. Samantha Fernandez Hernandez, Current Neurocritical Care Fellow at Emory University

"I am so sorry, Ms. Fernandez, this will hurt a bit," my anesthesiologist said as she placed an intrajugular line. I thought my surgery had ended and I was waking up from anesthesia, but then I wondered, "Why would she be placing a central line though?" Suddenly, I felt excruciating pain and a heaviness on my chest that would not let me breathe. My doctors had just placed two chest tubes as they performed chest compressions and tried to restart my heart. "Call the ECMO team, get ready to cannulate," said someone else. When I realized what was happening, I tried my hardest to wake up. "Move your fingers, wiggle your toes … you have to let them know you are awake!" I said to myself as I saw my still hand through my barely open eyes. A few minutes later, I opened my eyes.

Six months into my Neurology residency, I went in for an elective surgery at one of my training hospitals. Shortly after starting the procedure, I went into cardiac arrest. I was part of the lucky 10% who survive cardiac arrest and the even smaller number who experience awareness during it. I had a five-day hospital stay, intact neurological outcome, and was back in the hospital seeing patients three weeks later. However, my recovery did not end there, it had only begun. I developed symptoms of post-traumatic stress disorder (PTSD), experienced my first anxiety attack when resuscitating a patient in the same hospital where months before my own heart had stopped beating, and battled survivor's guilt when a patient did not survive their own cardiac arrest. I wanted to be more involved in cardiac arrest advocacy and help others have a less rocky recovery, but I did not know how. A dear friend and mentor got me involved with the American Heart Association (AHA) 3CPR Council and I was able to join a couple of committees.

The AHA gave me a platform not only to increase awareness of cardiac arrest survivorship gaps in care, but to promote the development of resources and support tools for survivors, co-survivors and lay-responders. Along with physicians, advocates, nurses and researchers, we have created webinars that highlight the challenges and obstacles in cardiac arrest care and what the resuscitation community is doing to overcome them. We have also recognized the lay-responder experience and their specific needs, a long-neglected area in resuscitation. As a neurointensivist in training, being part of the AHA has given me the opportunity to connect and collaborate with multiple stakeholders dedicated to improving cardiac arrest outcomes, through a unique physician/patient perspective. As a survivor, I have been given a voice to bring up aspects of the cardiac arrest experience that are neglected and need to be investigated and optimized.

Now, almost four years later, I can appreciate the beauty of the duality of my days. I have fought tirelessly for my life and even harder to bring back another; I have navigated recovery blindly so that my patients don't have to. Being part of such an impactful organization helped me heal as I felt I could finally "pay it forward" and be the person to give others the same chance and hope that were given to me years ago.

Dr. Benjamin Abella

Dr. Benjamin Abella, the William G. Baxt Professor of Emergency Medicine, serves as Vice Chair for Research in the Department of Emergency Medicine and the Director of the Center for Resuscitation Science at the University of Pennsylvania, one of the few centers nationwide that is dedicated to cardiac arrest and CPR research, education and training. He also holds the position of Director of the Penn Acute Research Collaboration, a unique 24/7 emergency care clinical

trials unit. Dr. Abella attended medical school at Johns Hopkins School of Medicine and then completed residencies in both internal medicine and emergency medicine at the University of Chicago. He has served on the faculty at Penn since 2006.

Dr. Abella has led numerous clinical studies on cardiac arrest and post-arrest care, having authored more than 250 published works in high-impact journals such as *Journal of the American Medical Association*, *New England Journal of Medicine*, and *Circulation*. Dr. Abella previously served as Chair of the AHA 3CPR Council and has authored international guidelines for CPR training through his work with the AHA. His achievements include (1) establishing quantitative data collection methods to study CPR quality; (2) investigation of public CPR training, including the overall prevalence of CPR knowledge and the gender disparities in CPR delivery; and (3) studies of post-arrest care and outcomes. He is the emergency care and CPR consultant to the National Basketball Association and has worked with the United States Air Force to develop post-arrest care protocols.

Dr. James Horowitz

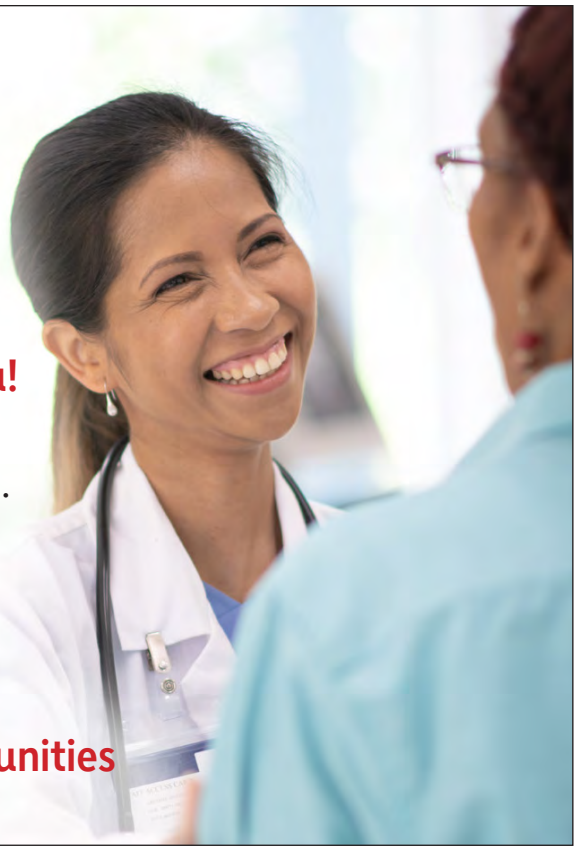
Dr. James Horowitz is a faculty member in the Division of Cardiology, Section of Critical Care at New York University (NYU) Langone Health, the Director of Critical Care Cardiology at NYU, Director of the NYU CICU, and Assistant Chief of Service of Cardiology at NYU Tisch Hospital. NYU has the largest group of cardiac intensivists in the United States.

Dr. Horowitz's major academic focus is on risk stratification and treatment of pulmonary embolism, resuscitation, cardiac arrest, and cardiogenic shock. Within the pulmonary embolism field, Dr. Horowitz has several major areas of focus including: 1) advanced risk stratification of intermediate risk pulmonary embolism; 2) catheter-based interventions for intermediate- and high-risk pulmonary embolism; 3) pathophysiology and treatment of right ventricular failure; 4) and organization and management of Pulmonary Embolism Response Teams (PERTs).

On the interventional side of pulmonary embolism, Dr. Horowitz has served on the steering committees of several trials designing and implementing national multicenter registries studying outcomes of several unique catheter-based thrombectomy devices, namely EXTRACT-PE and FLASH. The results of these studies were published in high-impact cardiology journals. In addition, he served as the co-national primary investigator of the FLAME registry, which is the largest trial to date examining percutaneous interventions in high-risk pulmonary embolism and reported significantly lower mortality after thrombectomy than historical controls. Currently, he serves on the Clinical Endpoint Committee of the PE-Tract study, which is an NIH-funded national randomized controlled trial of catheter-directed therapies for intermediate-risk pulmonary embolism. He also serves on the steering committee of the PEERLESS trial, which is an RCT of suction thrombectomy versus anticoagulation for intermediate-risk pulmonary embolism, and on the Clinical Endpoint Committee for an Investigational Device Exemption trial of a novel percutaneous thrombectomy device from Inquis Medical.

He has been active in the fields of resuscitation and cardiogenic shock, having previously served on the steering committee of the Critical Care Cardiology Trials Network, resulting in several publications focusing on CICU patient populations, shock sub-types, and Cardiogenic Shock Teams. This work has resulted in manuscripts in several high-impact journals, including the *Journal of the American Medical Association*. He has also published annual reviews with the American Heart Association on the proceedings of their Resuscitation Science Symposium (ReSS) and has published extensively on the composition of cardiac arrest teams across the U.S.

In addition to being very active in the AHA, Dr. Horowitz is involved with the national Pulmonary Embolism Response Team Consortium (member of the communications committee, initiated their podcast, PERTcast, and is currently on the Board of Directors), CHEST (Critical Care Network) and ACC (Critical Care Competencies Committee). Finally, he is one of the co-founders and course directors of the NYU Langone Critical Care Cardiology Symposium. Now in its fourth year, the symposium is the only critical care cardiology meeting of its kind in North America and has been extremely successful as a regional conference, with more than 100 speakers from across the U.S. and Europe. In 2023, there were 275 participants in person and 800 total. The conference is truly multi-professional, including speakers and course planners from a variety of backgrounds including MDs, RNs, NPs, Pas, and PharmDs, as well as trainees at many levels. Each year the course also includes an optional critical care procedural skills simulation session, with training in shock cases, Swan Ganz catheters, transvenous pacemakers, pericardiocentesis, as well as airway skills, and ventilator management. ■



University of Minnesota Extracorporeal Membrane Oxygenation/Extracorporeal Cardiopulmonary Resuscitation (ECMO/ECPR) Program

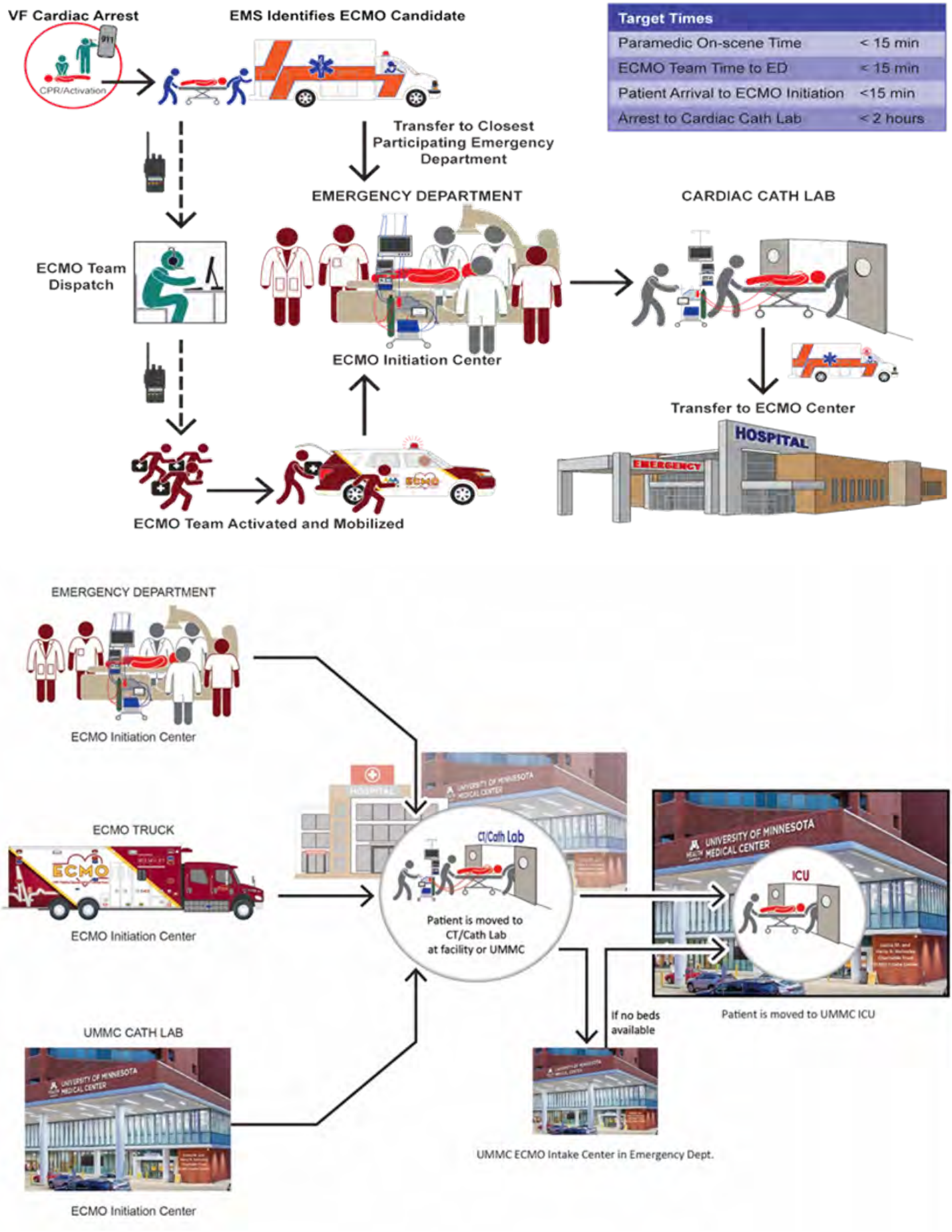
The University of Minnesota ECMO/ECPR Program, led by Drs. Demetri Yannopoulos and Jason Bartos was recently featured in a ***New York Times* article**. Dr. Yannopoulos created the University of Minnesota Center of Resuscitation Medicine and the first comprehensive ECPR program in the U.S. This ECMO intervention allows blood to bypass the heart and lungs and provides full life support.

The mobile ECMO program, called the Minnesota Mobile Resuscitation Consortium, started at the end of 2019. The primary focus was to provide early delivery of complete circulatory support or extracorporeal life support (ECLS) through rapid initiation of ECMO in cardiac arrest patients. When the patient cannot be delivered to an ECLS hospital site in a timely fashion, the ECLS capability will be delivered to them. The mobile team, consisting of cardiologists and critical care nurses or paramedics, responds when EMS identifies a potential patient and a cannulation site is identified (emergency department, mobile ECMO truck, or cath lab). Once on ECMO, the patient is transferred to a centralized ICU. The current response includes three different health care systems and multiple EMS agencies.

Some members of the University of Minnesota Mobile ECMO Team

To date, the program has responded to more than 500 calls, with over 70% being candidates for cannulation. All patients who were considered candidates were successfully cannulated and all target times for the program were met. Survival has ranged between 30% and 40%. Survival can be dramatically improved with earlier cannulation. Delays to cannulation are difficult to change as they are often due to EMS on-scene times or the distance to cannulation sites. The mobile ECMO program is committed to finding ways to get ECMO to cardiac arrest patients earlier to further increase survival. ■

(Overview of the ECMO workflow on the next page)



Overview of University of Minnesota Mobile ECMO Workflow

University of Minnesota Critical Care Cardiology Education Summit

The Critical Care Cardiology Education Summit (CCCES), organized by Dr. Andrea Elliott, Assistant Professor of Medicine and cardiac critical care physician at the University of Minnesota, is an annual educational symposium designed to bring together faculty and high-level trainees in the critical care cardiology field. The summit, which is hosted at the University of Minnesota, integrates lectures and roundtable discussions from prominent leaders in critical care. However, what sets it aside from similar conferences is the focus on hands-on procedural sessions specific to skills vital to this field. One of the core missions of the conference is to build community and develop formalized education of trainees, with an emphasis on diversity, equity, and inclusion.

The inaugural CCCES drew more than 80 expert faculty and cardiology fellows from more than 40 institutions across North America. With endorsement by the Minnesota American College of Cardiology (ACC) and National ACC Section of Cardiac Critical Care, as well as support from more than 25 industry vendors, the conference had an enthusiastic and successful turnout. This resounding success, along with a rapidly growing interest in critical care cardiology, the second annual CCCES more than doubled in size with over 200 faculty and trainees attending.

With the intent of diving deeply into some of the most challenging cases observed in the cardiac intensive care unit and keeping the conference content dynamic, CCCES has a unique theme each year, which is incorporated into the lectures and hands-on simulation sessions. The theme of the second annual CCCES was the management of adult congenital heart disease (ACHD) patients in the cardiac ICU. This year's speakers included Drs. Jason Bartos, Cameron Dezfulian, Jamie Lohr, Shamane Kimara March, Cindy Martin, Henri Roukoz, and Anurag Sahu. Virtual attendance was available free of charge for the lecture portion of the conference and **full details of the agenda can be reviewed online**. The University of Minnesota has a one-year Accreditation Council for Graduate Medical Education-accredited Critical Care Medicine Fellowship. More information is available at the **University of Minnesota** and the **American College of Cardiology** websites.

Many members of the 3CPR Council are significantly advancing care in sudden cardiac arrest and resuscitation. We are proud of our colleagues' contributions!

Photos from the inaugural University of Minnesota CCCES

Poised to Contribute to the Next Century of Progress

CONNECTING WITH THE CHAIR

Philip Tsao
PhD

In part through the efforts of AHA volunteers, there has been remarkable progress in the United States and other high-income countries in reducing morbidity and mortality from atherosclerotic and atherothrombotic cardiovascular disease. But there is still so much work to do, as they are now the leading cause of death in middle-income countries and even in low-income countries, becoming the pre-eminent global health threat of the 21st century. And it is just as crucial for us to tackle the numerous types of less common manifestations of arteriosclerosis, thrombotic disorders and vascular diseases. Our Council's goal, as it has been since the Council began, is to engage scientists and clinicians working to improve the prevention, diagnosis, and treatment of all of these conditions around the globe.

Science is our strength. We promote the learnings from the research and clinical translation efforts of our membership through Vascular Discovery: From Genes to Medicine Scientific Sessions, held each spring, and AHA Scientific Sessions, held each fall. These conferences offer attendees unmatched opportunities to share their work, learn about late-breaking science, and build and engage with international networks. Our Council's affiliated journal, ATVB, is a venue for the publication of original research findings, cutting-edge review articles, and scientific statements generated by our council and member perspectives. We foster the career development of trainees and early career members through year-round webinars, events at our conferences, and a variety of travel grants and awards.

We have highly engaged members who not only further the mission of our Council but also build leadership experience and further their professional development by serving on our committees. We are always on the lookout for fresh perspectives, and as opportunities arise, I encourage you to apply for open positions on our Early Career Committee, Membership Committee, Nominating & Awards Committee, Women's Leadership Committee, Scientific & Clinical Education Lifelong Learning (SCILL) Committee, Diversity Committee, Communications Committee, Vascular Discovery Program Committee, Irvine H. Page Young Investigator Award Selection Committee, Kenneth M. Brinkhous Young Investigator Award Selection Committee, ATVB & PVD Investigators in Training Award Selection Committee, and ATVB & Lifestyle Clinical Lipidology, Lipoprotein, Metabolism & Thrombosis Committee.

Without question, membership is the lifeblood of our council. If you are a clinician, scientist, or trainee interested in arteriosclerosis, lipoproteins, thrombosis, vascular biology, or vascular disease, I highly encourage you to become a member of the ATVB Council and think of ATVB as your career home.

Vascular Discovery 2024: Where Science Meets Celebration

The Vascular Discovery 2024 Conference, hosted in the vibrant city of Chicago, May 15-18 was a roaring success, filled with cutting-edge research and spirited camaraderie.

Kicking off the event on Wednesday, with a burst of energy, the first poster session illuminated the hall with the brilliance of new scientific discoveries. As attendees mingled, early-career members seized the opportunity to connect with and present their science to beloved and inspirational senior members of the council, setting the stage for future collaborations and career opportunities.

Bright and early on Thursday morning, the ATVB Early Career Committee hosted its first training session centered on academic round tables. Overflowing with eager attendees, the session delved into crucial topics that included "saying no/difficult conversations," "getting your training grant funded," "work-life balance." and more. This event is always highly attended, and attendees end up having to pull more chairs up to the tables to accommodate the enthusiastic crowd!

The grand opening session, hosted by luminaries Joseph Wu, MD, PhD, FAHA (AHA President), Kathleen Martin, PhD, FAHA (Chair of Vascular Discovery Program Committee), and Peter Henke, MD, FAHA (Chair-Elect of Vascular Discovery Program Committee), set the tone for the conference. Their warm welcome not only showcased the stellar lineup of plenary and concurrent sessions, but also featured the awardees and council events that the conference has to offer.

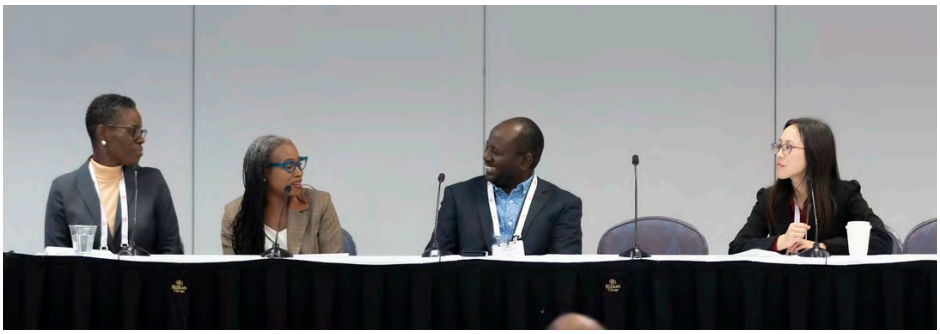
The excitement continued as the ATVB Journal presented early career awards to Partha Dutta, DVM, PhD,

Maria Sabater-Lleal, PhD,

and Soumyashree Das, PhD. Some amazing and new updates from the journal include the Early Career Blogger Program, which brought in more than 40 new and engaged members who will receive mentorship from high-level council members. The journal also unveiled a new Mid-Career Achievement Award, which will be presented at #VascularDiscovery25 in memory of ATVB Journal Senior Editor, David Dichek, MD, FAHA.

Thursday afternoon shone a spotlight on the ATVB Women's Leadership Committee, as they celebrated the Mentor of Women Award Luncheon. The luncheon, themed, "Thriving as Internationally Trained Scholars," featured an enlightening lecture titled "Women and Internationally Trained Scholars in Academic Medicine," by the esteemed duo, Dr. Elena Aikawa, MD, PhD, FAHA, and Dr. Masanori Aikawa, MD, PhD, FAHA.

Friday morning dawned with another training session by the ATVB Early Career Committee, this time as a panel discussion titled "Academic Success Stories." In the afternoon, the ATVB Diversity Committee hosted its first ticketed luncheon, "Diversity and Inclusion in the Workplace: Institutional Support and Legislative Changes," which featured Mahdi Garelnabi, PhD, and Omolola-Eniola-Adefeso, PhD, FAHA (and recipient of the ATVB Diversity and Inclusion Leadership Recognition Award), and panelists Diversity Committee Chair, Marlene Williams, MD, and Chair-Elect, Ngan Huang, BS, PhD, FAHA. The conversation focused on pioneering efforts in addressing institutional and legislative change for a transformative future and insights into the present landscape of institutional support available for DEI and how to apply it at your institutions.



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The grand finale of Friday night was the much-anticipated ATVB and PVD Awards Ceremony, which honored awardees and lecturers of the council and offered an opportunity for members to have some fun on the dance floor. Awardees include:

Jeffrey M. Hoeg, Arteriosclerosis, Thrombosis, and Vascular Biology Award for Basic Science and Clinical Research
Chiara Giannarelli, MD, PhD, FAHA

Travel Grants for Early Career Investigators
WonMo Ahn, MS
Abhijnan Chattopadhyay, PhD
Yannick Cyr, PhD
John Depaolo, MD
Jingu Lee, PhD
Xuejing Liu, PhD
Binu Prakash, PhD
Neekun Sharma, PhD
Nicole Wolter, BS
Xiaoliang Wu, PhD

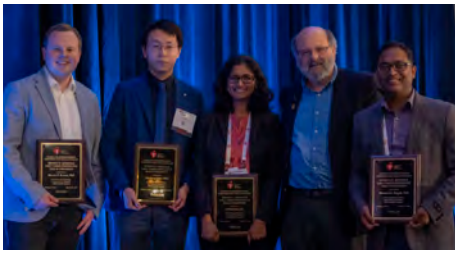
Diversity and Inclusion Leadership Recognition Award
Omolola Eniola-Adefeso, PhD, FAHA

ATVB Diversity Outreach Travel Grants
Natalia Eberhardt, PhD
Elizabeth Aquino Peterson

ATVB & PVD Investigator in Training Award
from the left
Xun Wu, PhD
Jack Bontekoe, MD
Fazli Bozal, BS
Carrie Wiese, PhD (Winner)
Marit Westerterp, PhD, Chair of the ATVB & PVD Investigator in Training Award

Irvine H. Page Young Investigator Award
Bishuang Cai, PhD (Winner)
Zhiyu Dai, PhD
Huize Pan, PhD
Xiaoyue Pan, PhD

Kenneth M. Brinkhous Early Career Prize in Thrombosis
from the left
Steven Grover, PhD (Winner)
Yunfeng Chen, PhD
Smita Joshi, BS, PhD
Sidney Whiteheart, PhD, FAHA (Chair-Elect of the Brinkhous Committee)
Manasa Nayak, PhD



Women's Leadership Committee Award for Outstanding Mentorship of Women
Yabing Chen, PhD, FAHA

Emerging Scientist Award for Women
Hanrui Zhang, MB, PhD, FAHA (Chair of the Women's Leadership Committee)
Naseeb Malhi, BMedSc, PhD (Winner)
Alexandra Newman, PhD
Srija Manchkanti, BA
Kelsey Jarrett, PhD
Wenduo Gu, PhD.

Finally, amid cheers and applause, the torch was passed as Katey Rayner, PhD, FAHA, was announced as the incoming ATVB Chair-Elect, promising a brimming future, pictured here with Kiran Musunuru, MD, PhD, FAHA.

As the curtain fell on the conference, the Distinguished Lecture series took center stage with a wonderful plenary session that highlighted trailblazers in the ATVB Community. The PVD Council had its inaugural Mid-Career Award & Lecture this year, which was a huge accomplishment and a great addition to the Vascular Discovery Conference.

Left, Kathleen Martin (VD Committee Chair), Scott Damrauer, MD, FAHA (PVD-Mid Career Award & Lecture) Chiara Giannarelli, MD, PhD (Hoeg Award Lecture) Jeffrey Weitz, MD, FAHA, FRCPC, FRSC, FACP (Distinguished Lecture) Kristy Red-Horse, PhD (Keynote Lecture) Philip Tsao, PhD, FAHA (ATVB Council Chair)

Advances in Cardiovascular Science: From Discovery to Translation

CONNECTING WITH THE CHAIR

Jianyi "Jay" Zhang
MD, PhD, FAHA

Following the resounding success of the BCVS sessions in 2023, which saw record attendance of 1,077, preparations are well under way for BCVS 2024. The 19th BCVS meeting will be held in Chicago July 22-25, 2024. The meeting theme is "Advances in Cardiovascular Science: From Discovery to Translation," which reflects the rich scientific content of this conference. The origins of the conference date back to 1991. As always, the meeting will highlight basic cardiovascular research that has clinical and translational implications by bridging mechanisms to cardiovascular physiology and pathophysiology.

This year's BCVS will be once again organized by Dr. Sumanth Prabhu (Chair), and Dr. Farah Sheikh (Chair Elect), together with a diverse Program Committee comprised of 11 BCVS members. We are pleased to announce **Dr. Dale Abel** as the Keynote Speaker. Dr. Abel is the William S. Adams Distinguished Professor of Medicine and Chair and Executive Medical Director of the Department of Medicine, David Geffen UCLA School of Medicine in Los Angeles. Dr. Abel has made seminal discoveries that have furthered our understanding of the interface and links between metabolic and cardiovascular disease.

Dale Abel
MD, PhD

A diverse group of speakers has been confirmed to present the latest scientific insights across 12 general sessions at BCVS 2024. Abstract submission for BCVS 2024 was from January 10 to March 20, 2024. This year, there are three new abstract categories: cardiovascular technologies and therapeutics, cardiovascular development, and interorgan links in cardiovascular disease. The scientific content of BCVS strikes a balance between traditional molecular cardiovascular sciences — cellular and molecular mechanisms of cardiovascular disease, cardiac metabolism, mechanisms of hypertrophy, cardiac arrhythmias, and genomic, genetic, and epigenetic mechanisms — and cutting-edge topics such as novel emerging technologies and therapeutics, tissue engineering, cardiac development, cardio-immunology, cardiac fibrosis, and inter-organ communication. Additionally, a timely session on pathophysiologic axes beyond the heart will enrich the conference context. As per tradition, BCVS 2024 will feature the highly anticipated Outstanding Early Career Investigator Award competition, a main event session dedicated to the three best abstracts submitted by early career investigators.

The Early Career Program, spearheaded by Dr. Susmita Sahoo and Dr. Sarah Schumacher-Bass along with the Early Career Committee, will kick off with a half-day pre-meeting tailored for early career scientists on Monday morning. This will feature two sessions for short oral presentations of original science by early career investigators and an Early Career Keynote Lecture given by **Dr. Farah Sheikh**. Moreover, the popular Women in Science Breakfast will return to foster mentorship and networking among women cardiovascular scientists. There will be additional opportunities for networking for early career investigators, including the Early Career Social, which will be held on Tuesday evening, and the BCVS Council Dinner on Wednesday evening. Be sure also to attend the sessions on Excitation-Contraction Coupling and Ion Channels and Novel Insights into Cardiac Arrhythmia on Thursday morning.

Farah Sheikh
MD

The BCVS is the second largest AHA Council, and the BCVS summer conference, which has grown in both scope and interest, is one of the best-attended AHA specialty meetings. Don't miss BCVS 2024 in Chicago! ■

DID YOU KNOW?

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

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**.

BCVS Early Career Committee Events: Spring 2024

The BCVS EC Committee hosted its first virtual seminar for 2024 on February 7, entitled: "Academic Job Searching: Top Tips and Myth Busting," targeted to postdocs, senior graduate students, and junior faculties. The seminar was moderated by the EC Committee trainee liaisons, Peiheng Gan, PhD, and Emma Louise Robinson, PhD, and supervised by EC committee faculty member Dr. Mingtao Zhao. The seminar featured four panelists: Elizabeth McNally, MD PhD, Michaela Patterson, PhD, Cat Makarewich, PhD, and Jason Karch, PhD, as early career faculty members who have recently transitioned to independent faculty positions. The BCVS EC committee has made the video recordings of these seminars publicly available at the **BCVS-EC webpage**.

Virtual STEM event attendees

Furthermore, the BCVS EC committee hosted a virtual STEM event for high school students in collaboration with students from Henry Gunn High School, convened by Dr. Patricia Nguyen, MD, on March 11. Jon Pagtakhan, a Senior Manager from the American Heart Association, highlighted the mission and activities of the AHA, and the EC members (Drs. Susmita Sahoo, Cat Makarewich, Diana Martinez, Peiheng Gan) provided expert insights and advice to the students on a career in cardiovascular science and research. The event was organized and co-hosted by Evelyn Shen and Stephany Handoyo, two juniors at Gunn High School. The event was well received, and the students commented that they are excited to do more work with the AHA. ■

Enhancing Cardiovascular Health: BCVS International Outreach–India Report

Under the guidance of Drs. Jay Zhang, Maria Kontaridis, and Joe Wu, an initiative has been launched to expand the mission of the AHA BCVS beyond the United States. The objectives are to enhance awareness of BCVS activities, grow membership, foster collaborations, and provide a platform for trainees and faculty unable to travel to the United States. With this vision, Dr. Sakthivel Sadayappan, Professor of Internal Medicine and Executive Director of the Center for Cardiovascular Research at the University of Cincinnati, originally from India, spearheaded two conferences in India. These conferences served as a launching pad, bringing together AHA BCVS members and organizing CPR training with the support of the "Heart and Stroke Foundation of India".

Cardiovascular diseases remain a significant global health challenge, and India is no exception. The demand for cutting-edge research, innovative treatments, and international collaboration in cardiovascular medicine has never been more critical. With immense enthusiasm, Dr. Sadayappan introduced the Cardiovascular Medicine International Summit 2024 in India, a platform dedicated to convening experts, clinicians, and researchers from the U.S. to explore the latest advancements in cardiovascular health care within the Indian context. This event featured two segments, showcasing a distinguished panel of 10 speakers from the U.S. all esteemed members of the AHA and BCVS councils. Notable speakers included Hind Lal, PhD, Hossein Ardehali, MD, PhD, Jonathan Kirk, PhD, Pilar Alcaide, PhD, Raj Kishore, PhD, Rajasekaran Namakkal-Soorappan, PhD, Sakthivel Sadayappan, PhD. MBA, Sathyamangala V N Prasad, PhD, Shyam Bansal, PhD, Timothy McKinsey, PhD.

Cardiovascular Medicine International Summit attendees

The inaugural segment of our summit occurred at Instem, a prominent Federal Government Institute in Bengaluru, from March 4-5, 2024. Dr. Dhandapany Perundurai hosted and coordinated the event. The Center for Cardiovascular Research, University of Cincinnati, and Red Saree Inc. co-sponsored these scientific sessions, attracting over 200 participants from across India. Renowned speakers from India also contributed to the sessions. Dr. Perundurai was honored with the 2024 AHA International Visiting Professorship Award, facilitating his visit to the US to establish collaborations and attend the 2024 AHA BCVS Scientific Sessions in Chicago.

The second phase of the summit unfolded at PSG Arts and Science College in Coimbatore from March 6-9, 2024, a prestigious institution in South India, drawing an audience of 500 college-level students. The event was coordinated by Dr. T. Kannaian, Secretary of PSG CAS, along with other key figures. To broaden the summit's impact, we collaborated with local AHA representatives and consultants in India, including AK Srimon and Drs. Sachin Menon, Puja Patel, Vishwas Sathe and Damodhar Suresh, the President of the AHA MidWest Chapter, and Dr. Dhruv Kazi, the Chair of the AHA International Committee. CPR training sessions were organized during these events, engaging participants through demonstrations and quizzes. We also conducted a seminar at Dr. NGP Arts and Science College, Coimbatore, on March 9, 2024, with more than 700 attendees.

Integrating AHA volunteer-leaders and their expertise at the Cardiovascular Medicine International Summit 2024 presented a unique opportunity to amplify our impact and extend our reach. Together, we advanced cardiovascular health care, disseminated knowledge, and made a tangible difference in the lives of individuals affected by cardiovascular diseases. We eagerly anticipate organizing annual sessions in India and exploring new partnerships to further enhance cardiovascular health initiatives. ■

Taiwan Outreach with Dr. Patrick Hsieh

With the significant support of Dr. Patrick Hsieh in Taiwan, leaders of the BCVS Council have successfully hosted the first circulation society summit at the top research institution in Taiwan, Taipei March 10-11, 2024. The summit was attended by AHA President Dr. Joe Wu and BCVS Chair Dr. Jianyi (Jay) Zhang, along with prior early career Chair Dr. Sean Wu, international liaison Dr. Xin Ma, and Dr. Yajing Wang, Dr. Yibin Wang, and Dr. Tim Kamp (ISHR-NAS, president-elect) and many others. This summit in Taiwan is a significant milestone for the organization and a crucial step in expanding our reach and influence in the field of research and science. Dr. Patrick Hsieh is a prominent figure in the cardiovascular research society in Taiwan and has achieved numerous awards in both Taiwan and the United States. He was trained during his PhD in UW-Seattle and postdoc in Boston, and maintains a strong relationship as a visiting scholar at UW-Madison. His support and involvement in the establishment of the Taiwan chapter will undoubtedly help us to further expand the reputation of AHA and BCVS on a global scale.

During the conference, the American Heart Association (AHA) president, Dr. Wu, delivered an address on the expectations for the first meeting and emphasized the importance of maintaining a strong relationship with the AHA, BCVS and Taiwan. Dr. Zhang, who serves as the Chair of the AHA-BCVS, delineated certain tactics aimed at fostering the growth of young scientists and motivating them to seek grants from the AHA, as well as increasing AHA membership through this initiative.

Dr. Jay Zhang and Dr. Jeng-Jiann Chiu from the National Health Research Institute in Taiwan (NHRI) gave keynote speeches on new advances in mRNA therapy and shear-regulated vascular biology and disease, providing direction for future research on curing disorders related to shear stress.

The AHA-BCVS group from the U.S., consisting of Drs. Chen Yan, Hesham Sadek, Tim Kamp and Yu Huang, presented speeches on the molecular mechanism of cardiomyocyte death and heart regeneration, as well as vascular remodeling. Drs. Yajing Wang and Xin Ma also attended and delivered a speech on the topic of diabetic cardiovascular disease, emphasizing the importance of understanding interorgan communication between the heart and other organs. The presenters from five top-ranked hospitals were invited by Dr. Hsieh to give significant talks and share their ideas on AI management for large hospital databases and immune-inflammatory regulation in heart regeneration, drug delivery, cardiac cell therapy, and cardiac electrophysiology, as well as atrial fibrillation. The speakers covered new ideas and concepts, and their presentations were well-delivered, encouraging the next generation of scientists and researchers.

Dr. Hsieh's extensive experience and reputation within the cardiovascular research community, coupled with his ties to prestigious institutions both in Taiwan and the United States, ensure a solid foundation for our expansion efforts. The summit itself served as a platform for knowledge exchange, featuring keynote speeches on cutting-edge topics such as mRNA therapy and vascular biology, and presentations by renowned experts from both Taiwan and the U.S. Discussions on fostering young talent, collaboration strategies, and leveraging AHA resources for research grants further solidified the commitment to advancing cardiovascular science. The active participants, along with the quality of presentations, set a promising trajectory for future advancements in the field, inspiring the next generation of scientists and researchers in Taiwan and beyond.

As we look ahead, we want to remind you of important deadlines and upcoming events. The Fall 2024 deadline to submit FAHA applications is July 10. Please direct any inquiries to Yibing Qyang **Yibing.qyang@yale.edu**, Chair of the BCVS Membership Committee. Moreover, mark your calendars for the AHA Scientific Sessions Early Career Day on November 15, followed by sessions from November 16-18 at the Chicago Convention Center. Submission of Late Breaking Science Abstracts ends August 19 so submit your science!

Lastly, don't forget about the upcoming deadlines for American Heart Grants:

AHA Predoc: September 4, 2024.

AHA Postdoc: September 5, 2024.

Career Development Award: December 5, 2024.

If you are not a member of the BCVS Council or need to renew your membership, go to We look forward to your participation and contributions as we continue to advance cardiovascular health together. ■

Circulation Society Summit attendees in Taiwan

CLCD Publishes Many Scientific Statements

The Council on Clinical Cardiology (CLCD) and its committees have been particularly active in recent months putting forth Scientific Statements. Recently published statements span a wide range of topics of interest to the clinical cardiology community. Some provide guidance on the evaluation and management of disease states: e.g., sarcoidosis and tricuspid valve disease. Some address the overlap of cardiovascular disease with other conditions: e.g., cardiovascular imaging in cancer patients, cardiovascular implications of stem cell transplant, and arrhythmias in the intrauterine and neonatal state. Some describe best practices for procedural care: e.g., balloon pulmonary angioplasty and cardiac catheterization in post-arrest coma. Some highlight the incorporation of broader domains across cardiovascular care: e.g., implementation science, telehealth, artificial intelligence, equity, and patient-centered care.

One of the ways members can directly engage the American Heart Association is through the proposal of Scientific Statements. Each committee within CLCD is charged with the development of two Scientific Statements at any given time. Members work with their committee and council chairs to identify gaps in the science, construct a formal proposal, obtain approval from the Manuscript Oversight Committee to move forward, execute writing of the manuscript, and respond to reviewer feedback. This should all happen in rapid succession, ideally within 6-12 months. Well-crafted Scientific Statements provide value to scientists, clinicians, policy makers, and patients. At the same time, they can create important collaborations between writing committee members and help establish participants as experts in the topic area.

CLCD currently has more than 20 Scientific Statements in development across all its science committees. If you have interest in championing a Scientific Statement, reach out to your committee or council chair!

Title	Committee	Publication Date
The Tricuspid Valve: A Review of Pathology, Imaging, and Current Treatment Options	Interventional Care Committee	April 2024
Diagnosis and Management of Cardiac Sarcoidosis	CLCD Leadership Committee	April 2024
Patient-Centered Adult Cardiovascular Care	CLCD Leadership Committee	April 2024
Implementation Science to Achieve Equity in HF Care	HF and Transplantation Committee	April 2024
CV Management of Patients Undergoing Hematopoietic Stem Cell Transplantation From Pre-Transplant to Survivorship	Cardio Oncology Committee	March 2024
Status and Future Directions for Balloon Pulmonary Angioplasty in Chronic Thromboembolic Pulmonary Disease With and Without Pulmonary HTN	CLCD Leadership Committee	March 2024
Pharmacological Management of Arrhythmias in the Intrauterine and Neonatal Period	Clinical Pharmacology Committee	February 2024
Management of Cardiogenic Shock in Older Adults	CVD in Older Populations Committee	February 2024
Value Creation Through Artificial Intelligence and Cardiovascular Imaging	Cardiac Imaging Committee	January 2024
Cardiac Catheterization Laboratory Management of the Comatose Adult Patient With an Out-of-Hospital Cardiac Arrest	Interventional Care Committee	January 2024
Telehealth and Health Equity in Older Adults With Heart Failure	CVD in Older Populations Committee	November 2023
Cardiovascular Imaging in Modern Cardio Oncology	Cardiac Imaging Committee	September 2023

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American Heart Association.
100 YEARS
Bold Hearts

Council Ushers in the Centennial Year with New Webinars, an AI Interest Group and More

CONNECTING WITH THE CHAIR

Laura Findeiss
MD, MHA, FAHA

This season has been busy with planning for the American Heart Association's centennial celebration and envisioning our next 100 years of impact. Our Council will embark on the next century of AHA with some leadership changes, a refresh of the charters for our joint scientific councils, and the development of our new council strategic plan. Initiatives on the horizon include a webinar series and the creation of a CVRI artificial intelligence (AI) interest group.

Scientific Sessions:

Through brainstorming and broad cross-council collaboration, our Scientific Sessions planning leadership (Maureen Hood, RN, PhD, and Diana Litmanovich, MD) developed a great Scientific Sessions program. The program will feature topics such as imaging in cardio-oncology, brain-heart axis, imaging of cardiovascular disease in women, peripheral arterial disease programming, multidisciplinary approaches to PE, and a highly anticipated Dotter Lecture delivered by Dr. Kate Hanneman. Imaging sessions will feature diverse perspectives, new and developing science, policy insights, and more.

Our Dotter Lecturer

Kate Hanneman
MD, MPH

I'm delighted to announce Kate Hanneman, MD, MPH, as our 2024 Scientific Sessions Charles T. Dotter Lecturer. Dr. Hanneman is an Associate Professor and Vice Chair of Research, Department of Medical Imaging at University of Toronto, and Director of Cardiac Imaging Research, University Medical Imaging Toronto Joint Department of Medical Imaging. Her clinical work focuses on cardiac CT and MRI, and she leads an active research program focused on sustainability and improving health outcomes for patients using cardiac imaging. She is the author of more than 100 peer-reviewed papers on topics including cardiac MRI and CT, environmental sustainability in radiology and AI, radiomics, and is widely respected for her contributions regarding AI. She was the lead author of the 2024 AHA Scientific Statement on Value Creation Through Artificial Intelligence and Cardiovascular Imaging. Dr. Hanneman has most recently served as the Chair of the Early Career Committee in the Council on Cardiovascular Radiology and Intervention and is an Associate Editor with Radiology, Radiology: Cardiothoracic Imaging, the Journal of Cardiovascular Magnetic Resonance, and the Canadian Association of Radiologists Journal. She is Co-Chair of the Canadian Association of Radiologists Sustainability Working Group. Her lecture on the promise, peril and potential value of AI in cardiovascular imaging will be delivered at the Melvin T. Judkins Scientific Abstract Session slated for November 17, 2024.

Joint Scientific Committees

In the interest of cross-specialty and cross-community collaboration, CVRI co-sponsors two scientific committees dedicated to developing and disseminating cardiovascular science related to imaging and intervention. These committees are critical in providing scientific expertise, generating ideas for, and leading the development of scientific statements and guidelines. Both committees get new leadership and a refresh of their charters this year.

CLCD/CVRI Joint Cardiac Imaging Committee

This Joint Science Committee brings radiology and clinical cardiology expertise together to consider evidence gaps and generate relevant science in cardiac imaging. I would like to congratulate our own Dr. Daniel Addison, who transitioned to the role of Chair of this committee after serving two years as Chair-elect. Dr. Addison is Director of the Cardio-Oncology Program at the James – Ohio State University Comprehensive Cancer Center with expertise in multimodality imaging in cardiovascular disease. His research focuses on the interplay of cancer-treating radiotherapy and cardiovascular events, the early detection of anthracycline-associated cardiotoxicity, and the early detection and mechanisms of cancer immunotherapy-associated cardiovascular disease. The Council thanks Dr. Anupama Kottam for her steadfast leadership of the committee over the last two years.

Daniel Addison
MD

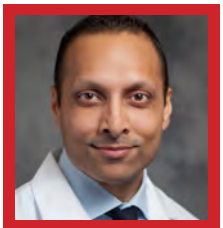
Anupama Kottam
MD

CVRI/PVD Joint Vascular Imaging and Intervention Committee

Creating a space for collaboration of vascular interventional radiologists, vascular imagers, vascular surgeons, and vascular medicine specialists, the committee brings together the dispersed community dedicated to the evaluation and treatment of patients with vascular disease. The refreshed charter for this committee has considered opportunities to strengthen collaborations across relevant AHA communities through liaison relationships to address important topic areas. Dr. Akhi Sista will be assuming the role of committee Chair, representing the PVD council. Dr. Sista is a professor of Radiology at Weill Cornell Medical College and is the Principal Investigator of the national NHLBI-sponsored PE-TRACT trial of

Akhilesh Sista
MD, FAHA

catheter-directed thrombus removal in patients with PE. As an interventional radiologist well-known for his expertise and leadership in the science and management of pulmonary embolism, Dr. Sista will replace the current chair, Dr. Parag Patel, an interventional radiologist with expertise in peripheral arterial disease and medical education. Guided by the new charter and with expanded membership, the committee expects a lot of activity this year.



Parag Patel
MD, MS

Highlighted CVRI Publications from the past two years

January 2024 Value Creation: Artificial Intelligence and Cardiovascular Imaging

November 2023 State-of-the-Art Imaging of Infiltrative Cardiomyopathies

September 2023 Cardiovascular Imaging in Contemporary Cardio-Oncology

June 2023 Equity in Cardio-Oncology Care and Research

December 2022 Perioperative Considerations for Pediatric Patients With Congenital Heart Disease Presenting for Noncardiac Procedures

November 2022 An Overview of Telehealth in the Management of Cardiovascular Disease

February 2022 Imaging Surveillance of Patients with Chronic Aortic Dissection

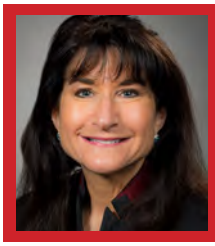
Webinars Crowd Source

As we embark on the new century of the AHA, CVRI will initiate a webinar series to create a regular forum for engagement of our council members. As a mechanism for education, discussion, and community creation, we are interested in understanding the needs and interests of the CVRI membership. Our goal is to reach all corners of our community and develop content that answers current and ongoing practice questions, addresses leadership development needs and interests, and helps the council to identify evidence gaps relevant to cardiovascular radiology and intervention. To better understand your needs, we are asking you directly: **please follow the link to a survey form** so you can tell us what you're most interested in hearing and learning.

CVRI AI Interest Group

As the AHA grows its interest in AI relevant to cardiovascular disease and care of patients with CV disorders, we as a radiology community have a wealth and long duration of insight into AI as a tool in medicine. Understanding that our CVRI community has the potential to contribute meaningfully to the AHA discussion of all aspects of medical AI, the Council is establishing an interest group for discussion and brainstorming. Our first step is to establish a roster of interested members: **Express your interest here.** Once we have a sense of the size of our AI interest community, we will set up an exploratory call and define the purpose, goals, and structure of the group.

CVSA Sees Transformational Change



CONNECTING WITH THE CHAIR

Linda Shore-Lesserson MD FAHA

The **Council on Cardiovascular Surgery and Anesthesia (CVSA)** has been teeming with activity since our last article. We are busy planning to celebrate the 100th birthday of the American Heart Association with science, advocacy, education, and innovation. What an amazing Bold Hearts celebration! Moving into the next 100 years, our Educational and Scientific Strategic Plan will consider the needs of our young investigators and the circumstances under which we practice medicine. An emphasis on mentorship, sponsorship, collaboration, and cross-disciplinary alliances will be key to nurturing the next generation of cardiovascular clinicians. Scientifically, we are focused on advancing research, education, closing the gender gap in health, and improving the social determinants of health. Our multidisciplinary council of cardiac surgeons and cardiac anesthesiologists is planning multiple interdisciplinary projects that will advance peri-procedural care and innovation into the next era.

The CVSA Program at **Scientific Sessions** 2024 is evidence of this strategy, and I will highlight a few of these provocative sessions.

A huge thank you to our Sessions Meeting co-chairs, Drs. Elaine Tseng, Danny Muehlschlegel, George Arnaoutakis, and Amanda Fox, who, with input from our council membership, created cutting-edge multidisciplinary cardiovascular seminars. Revolutionary advances in valvular heart disease are always an attraction to meeting attendees from all councils and practice environments. We will focus on aortic, mitral, and tricuspid valve procedures, following up on one of our main events from Sessions 2023. A huge THANK YOU to our Sessions Meeting co-chairs, Dr. Elaine Tseng, Dr. Danny Muehlschlegel, Dr. George Arnaoutakis, and Dr. Amanda Fox, who, with input from our council membership, created cutting-edge multidisciplinary cardiovascular seminars. Revolutionary advances in valvular heart disease are always an attraction to meeting attendees from all councils and practice environments. We will focus on aortic, mitral, and tricuspid valve procedures, following up on one of our highly popular Main Events from Sessions 2023. In order to meet the needs of our entire medical community, we chose to focus several panels on Guidelines, and specifically how AHA/ACC guidelines may differ from those of European societies. Guideline creation and the potential for harmonizing trans-Atlantic guideline documents will be explored. One example is the AHA/ACC Diagnosis and Management of Aortic Disease Guideline from 2022 and the new European guidelines on Aortic Disease. Following in this "vein", other guideline documents and the processes used for creation will be examined between AHA and our European colleagues. Other relevant and topical CVSA sessions include Management of Aortic Valve Disease in the Young, and Lifetime Management of Mitral Valve Disease. These sessions include input from multidisciplinary and international experts and appeal to all who care for patients with cardiovascular disease. We will also feature a panel that focuses on peri-procedural management including pre-surgical optimization, intraoperative management, and postoperative care by anesthesiologists, surgeons, and critical care physicians. It is practicing this bundle of care termed ERAS, Enhanced Recovery After Surgery, that impacts measurable outcomes such as cardiac, renal, cerebrovascular, and hematologic events.

Lastly, but certainly not least, is a cardiovascular seminar devoted to the study of gender differences that exist in cardiovascular surgery patients and how this may differentially impact outcomes. This topic is of current interest to us all in learning how we may achieve equity across the patient spectrum.

CVSA Education and Publications Committee

This committee has been very prolific, and we would like to recognize Dr. Mario Gaudino, Chair, and Dr. Marc Ruel, Chair-elect, of this critically important committee. We have been the lead council on the following Scientific Statements from 2023: Considerations on the Management of Acute Postoperative Ischemia After Cardiac Surgery (Gaudino/Dangas; *Circulation*, June 2023), Anesthetic Care of the Pregnant Patient with Cardiovascular Disease (Meng/Mehta, *Circulation*, February 2023) and Surgical Management and Mechanical Circulatory Support in High- Risk Pulmonary Embolisms: Historical Context, Current Status, and Future Directions (Goldberg/Giri, *Circulation*, January 2023). CVSA also collaborated with other councils on four Scientific Statements during 2023: temperature management in coma/cardiac arrest, dual organ transplantation, pulmonary hypertension in congenital heart disease and atrial fibrillation in acute hospitalized patients.

In development, writing committees have been hard at work on two new Scientific Statements slated for submission in 2024. Beginning January 2024, CVSA authors are addressing intraoperative echocardiography, in a paper entitled Considerations of Intraoperative Post-Procedural Transesophageal Echocardiography During Cardiac Surgery. This paper is chaired by Dr. Lisa Rong, with co-chair Dr. Linda Shore-Lesserson. In March 2024, our council authors began the important writing on Secondary Prevention after CABG, with chair Dr. Marc Ruel and co-chair Dr. Sigrid Sandner. Both these Scientific Statements are timely and relevant and are inclusive of multiple specialty authors. The committee is considering the next Scientific Statements to be multidisciplinary protocol-based optimization programs such as Enhanced Recovery after Cardiac Surgery (ERACTS) and Preoperative Anemia Management. The writing groups are being considered currently.

Early Career Committee

CVSA has a robust mentorship program and a burgeoning Early Career program for trainees and young faculty in cardiothoracic surgery and anesthesiology. I would like to give special thanks to our Early Career Committee co-chairs

Dr. Jessica Rove and Dr. Kimberly Howard-Quijano. Our council offers numerous opportunities for young investigators. In planning for Sessions 2024, our Early Career sessions took a different path for the 100th anniversary of AHA. The feedback from the Early Career Committee was that we valued the AHA for its presentation of multidisciplinary perspectives and the rigor of the science. We recognize that clinically, we are increasingly managing patients in multidisciplinary teams and with AHA Early Career sessions, we actually have the opportunity to leverage that perspective rather than silo the disciplines. Rather than each council creating their own sessions, this year we have fewer sessions that are more collaborative and multidisciplinary, aiming to bring Early Career attendees from the different councils together to share perspectives and create space for multidisciplinary conversations. The result of this innovative strategy will be very exciting to witness. We wish to congratulate the winners of the Student Scholarships announced in June. Again this year, we will offer the prestigious Vivien Thomas Young Investigator Grant, and we look forward to that competition at Sessions in Chicago. With record numbers of applications for our CVSA Research Travel Grants and our CVSA Early Career Investigator Abstract Awards, we are generously offering them again this year.

CVSA News

J. Danny Muehlschlegel
MD, MMSc, MBA

The council congratulates J. Danny Muehlschlegel MD, MMSc, MBA, for his appointment as the Director/Chair of the Department of Anesthesiology and Critical Care Medicine at Johns Hopkins. He has been awarded the Mark C. Rogers Professorship in Anesthesiology and Critical Care Medicine and is the Anesthesiologist-in-Chief at Johns Hopkins Hospital. Dr. Muehlschlegel, an NIH-funded researcher, transitioned to that role after many years at Harvard's Brigham and Women's Hospital, where he served as the Vice Chair for Research and the BWH Distinguished Chair in Anesthesiology. Dr. Muehlschlegel has been on the leadership committee of CVSA and has chaired our CSSP committee and Early Career committees. At Johns Hopkins, he and his research team have received multiple AHA-sponsored grants from which careers have flourished. Even before Dr. Muelschlegel's arrival, Johns Hopkins cardiac anesthesiology division has been prominent in CVSA leadership and mentorship, and this year is no exception.

Jochen Steppan
MD, DESA, FAHA, FASA

Maria Bauer
MD

Dr. Jochen Steppan, one of our CVSA colleagues and cardiovascular anesthesiologist at Johns Hopkins, is one of two mentors for Dr. Maria Bauer, recipient of the 2024 Career Development Award of the American Heart Association. This is a three-year grant that began April 1, 2024, and mentors are Dr. Steppan and Dr. Lakshmi Santhanam. The project is entitled "The Role of the Unfolded Protein Response and LOXL2 in Heart Failure with Preserved Ejection Fraction." Heart failure with preserved ejection fraction (HFpEF) accounts for about half of hospital admissions for heart failure. Its incidence is increasing, and five-year survival is poor. The molecular mechanisms underlying HFpEF are incompletely understood, and no evidence-based and target-directed treatment is available. Unfolded protein response (UPR) is activated in response to endoplasmic reticulum (ER) stress and has been implicated as a causative mechanism in the development of HFpEF in addition to the accumulation of LOXL2, an enzyme that catalyzes extracellular matrix crosslinking and stabilization. The objective of this grant is to provide proof of concept for the link between LOXL2 and UPR as it pertains to HFpEF, in order to develop therapies that can simultaneously maintain adequate cellular adaptation, and limit or reverse myocyte dysfunction and cardiac fibrosis. Congratulations Dr. Bauer!

Membership Report

Our membership committee, chaired by Dr. Ibrahim Sultan, is very busy reaching out to potential council members by continued overtures to other related societies and specialties (perfusion, laboratory medicine, etc.). Their hard work is paying off as we see that CVSA is the top council (in the <1000-member-size), for renewal/reinstating of membership. And in being so, we have enjoyed steadiness in new member gains that are comparable to other larger councils. Please ensure that your membership remains active and pass on to your colleagues affiliated with our Council to do the same.

The presence of other specialties at AHA meetings and CVSA is critical to our growth and expansion. Possible collaborative efforts include joint meetings, manuscript, and grant opportunities. Our CVSA leaders have also enhanced outreach to program directors to solicit junior or candidate members to increase membership pipelines. We also consider promoting content that highlights CVSA council members' papers/science at the upcoming AHA meetings and are using social media for CVSA posting, targeting certain academic centers, and FAHA memberships.

Roman M. Snieconski III
MD

In the spring, we welcomed our newest FAHA member to the CVSA council Dr. Roman Sniecinski, Professor of Anesthesiology at Emory University. Dr. Sniecinski has research interests in hemostasis and coagulation, and also serves as Executive Section Editor for hemostasis and thrombosis in the journal *Anesthesia & Analgesia*. CVSA welcomes Dr. Sniecinski as a Fellow of the AHA.

CVSN Announces New Chair-Elect

CONNECTING WITH THE CHAIR

Nancy Pike
PhD, CPNP-ACPC, FNP-BC, FAHA, FAAN

Greetings, on behalf of the Council of Cardiovascular and Stroke Nursing (CVSN), I want to celebrate all the hard work and accomplishments of our members, new FAHAs, early career and senior CVSN members, and a change in Council leadership. Chair-elect Dr. Lorraine Evangelista was not able to continue in her position as of January 2024. I would like to thank her for her time in this position and her exceptional leadership to CVSN. Please join me in welcoming the council's new Chair-elect. Dr. Lisa Kitko assumed her role in February 2024, and we look forward to her guidance and contributions to CVSN.

Lisa Kitko
PhD, RN, FAHA, FAAN

Dr. Lisa Kitko, PhD, RN, FAHA, FAAN, became the sixth dean of the University of Rochester School of Nursing in September 2022. She also serves as a professor of nursing and geriatric medicine, holds the Independence Foundation Chair in Nursing Education, and is Vice President of the University of Rochester Medical Center. Dr. Kitko has extensive clinical research experience with the palliative care needs of persons living with complex chronic conditions and their family caregivers, especially in the context of advanced heart failure. She has contributed extensively to the development of interventions and support programs aimed at addressing the needs of both heart failure patients and their caregivers. Overall, Dr. Kitko's work sheds light on the crucial role of family caregivers in managing heart failure and underscores the importance of palliative care in providing them with adequate support and resources. Her research has been funded by the National Institutes of Health and the American Heart Association. She has widely disseminated her work and has received numerous national and international awards. A fellow of the American Academy of Nursing and the American Heart Association, she served as a Josiah S. Macy Jr. Faculty Scholar, where she developed an interdisciplinary certificate in primary palliative care. Dr. Kitko received her bachelor's degree in nursing from the University of Pittsburgh. She earned her master's as a clinical nurse specialist and her PhD in nursing with a minor in gerontology, both from Penn State University.

Congratulations to new CVSN FAHAs

A big congratulations to our CVSN Council members who were named fellows in the American Heart Association. FAHAs will be honored at the Council dinner at Scientific Sessions 2024.

- Lori Erikson PhD, MSN, CPNP-PC
- Jeroen Hendriks PhD, MSc, RN
- Jacob Kariuki PhD, AGNP
- Mulubrhan Mogos PhD, MSc
- Kashica Webber-Ritchey PhD, MHA, RN

CVSN Members Highlighted in SCILL Nursing Committee Webinars

- **Addressing Social Determinants of Health (SDoH) Through Implementation Science.** This webinar discussed how SDoH can impact health outcomes and how health care professionals can incorporate SDoH into their practice and implement prevention science to eliminate health inequities. Speakers included Drs. Jewel Scott, Janna Stephens, Lucinda Graven, Connie White-Williams, and the moderator was Dr. Laura Rossi.
- **From Trainee to Faculty: Facilitating Successful Transition to a Faculty Role.** This webinar highlighted best practices and strategies to ensure a successful transition to an Assistant Professor role. Speakers included Drs. Cherlie Magny-Nomilus and Telisa Spikes, and the moderator was PhD student Latisha Harris. ■

FAHA Spotlight: Mariann R. Piano, PhD, RN, FAAN, FAHA

Mariann R. Piano
PhD, RN, FAAN, FAHA

Please describe your current role and program of research

I am currently Professor and Senior Associate Dean for Research at Vanderbilt University School of Nursing (VUSN) and Director of the VUSN Postdoctoral Program. My research program is focused on elucidating the adverse effects of unhealthy alcohol use on the cardiovascular system. My multidisciplinary research program has focused on vascular (endothelial and smooth muscle cells), systemic (neurohormones), and cellular signaling pathways and mechanisms that underlie the cardiotoxic effects of unhealthy patterns of alcohol consumption. In addition, my research has also considered how the presence of ovarian hormones or female sex might modulate the effects of alcohol. My recent work has established that binge drinking in young adults is associated with changes in vascular biology and function that

increase their risk for future adverse cardiovascular events. Other research efforts have focused on heart failure patients and helping patients identify and manage their symptoms.

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

I was inducted as a fellow more than 20 years ago and have been a member of the AHA for more than 30 years!! Being a fellow of this esteemed organization and serving as a volunteer was life-changing! AHA has always been about innovation, education, science, and advocacy, and as a fellow, you are afforded more opportunities, ranging from serving in leadership positions to being an author on scientific statements. Most importantly, being a FAHA provided networking opportunities and partnerships with many outstanding nurse scientists and clinicians.

How have you been able to leverage AHA resources (especially funding, if applicable) to support your research and career?

Over my academic and scientific career, I have leveraged and used many AHA resources! I received my first-ever grant in 1990 from the American Heart Association of Metropolitan Chicago! However, I had to relinquish this grant because of funding from another organization and related research projects. Even so, this gave me great confidence in my science and my early ideas about the effects of alcohol on the cardiovascular system. I have also leveraged AHA educational resources and have shared these with a number of undergraduate and graduate nursing students. Scientific Sessions have been an essential resource for my clinical and scientific knowledge, and I am always re-energized in the classroom and my area of cardiovascular science after attending Sessions.

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

Go for it! Being a fellow means you belong to an amazing group of clinicians and nurse scientists who share your passion, intellect, and scientific goals. Many of us work within academic and clinical institutions and often cannot choose the roles, assignments, or even who we work with. However, professional organizations like the AHA and becoming a fellow allow you to surround yourself with colleagues who will help you grow and succeed professionally. ■

International Stroke Conference 2024

The State-of-the-Science Stroke Nursing Symposium, which is part of the International Stroke Conference, was held on February 6, 2024, in Phoenix, Arizona. There were more than 6,000 in attendance, with an impressive 882 nurses registered. CVSN leadership would like to thank the Stroke Nursing Symposium Planning Committee Chair Brenda Johnson, Vice Chair Mary Rodgers, and committee members for providing a successful event highlighting cutting-edge stroke nursing science. ■

(From left to right) Mary Rogers, DHA, ANP, CNS, RN (Planning Committee Vice Chair); Nancy Pike, PhD, RN, CPNP-AC/PC, FAHA, FAAN (CVSN Chair); Brenda Johnson, DnP, CRNP-BC, ANVP, FAHA, (Planning Committee Chair); and Katie Boston-Leary, PHD, MBA, MHA, RN, NEA-BC (speaker).

Early Career Corner: Interview with 2023 Martha Hill Early Career Investigator Award Winner, JungHee Kang, PhD, RN

JungHee Kang
PhD, RN

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

My research is focused on examining interactions among psychological factors, social determinants of health, inflammatory mediators, nutrition, metabolism, and cardiovascular disease (CVD). My recent involvement with the Building Interdisciplinary Research Careers in Women's Health (BIRCWH) team also motivated me to investigate sex differences and how these interactions impact outcomes. I am particularly interested in developing nutrition-related interventions in patients with coronary heart disease, heart failure, and individuals at risk for CVD to improve health outcomes, such as decreased CVD risks, decreased rates of re-hospitalization, improved survival, and better quality of life.

How did you first become involved in the CVSN?

When I joined the Research and Intervention for Cardiovascular Health (RICH) Heart team during the PhD program at the University of Kentucky College of Nursing, I was naturally introduced to the American Heart Association and the CVSN Council. RICH team faculty members, including my mentor Dr. Debra K. Moser, were very enthusiastic about cardiovascular health and sharing our research findings at the American Heart Association Scientific Session. CVSN committee involvement started in August 2022, when I was invited to join the CVSN Communications Committee.

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

Being part of CVSN has expanded my network to include other wonderful and inspiring scholars who share an interest in cardiovascular health and/or diet, not only nationally but also internationally. This has also increased potential collaboration opportunities. I have learned about numerous studies conducted or pursued by CVSN members and the various activities in which the CVSN council is involved.

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

Broaden your engagement with the research community and strive to connect with your patient population whenever feasible. Seasoned members, including senior research scholars, can impart their experiences, wisdom, and counsel, presenting collaboration prospects that could greatly benefit you. Moreover, engaging with research study participants, potential recruits, and other stakeholders can provide invaluable insight into the circumstances of your target populations. So, get involved with CVSN activities and seize the opportunity to network as much as possible. ■

International Stroke Conference

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A division of the American Heart Association.

Celebrating Accomplishments, Inspiring the Future

CONNECTING WITH THE CHAIR

Wayne Rosamond
PhD, MS, FAHA

Greetings. This is a great opportunity to recognize many of the accomplishments of the Council on Epidemiology and Prevention. We can use that celebration to inspire our collective future. Inspired thinking can help us find new ways to be a positive force for improving cardiovascular health and well-being in our communities and to solve new challenges and seizing new opportunities. As I look around at what's going on here, I am grateful to be a part of this amazing Council.

One of our flagship events of the year, the EPI/Lifestyle Scientific Sessions, held in partnership with the Lifestyle Council, was a great success this past March in Chicago. The attendance was impressive and showed significant growth from last year. It was one of the largest gatherings for the Spring meeting we've had in some time. It is great to see this in-person meeting thriving again. Thanks again to Co-chairs of the Program Committee, Alvaro Alonso, MD, PhD, FAHA, and Monica Serra, PhD, and the rest of the Program Committee for organizing this exciting event.

Attendees chat during morning session

The theme this year was What's Money Got to Do With It: Policy, Economics and Cardiovascular Health. The conference kicked off with a provocative and stimulating opening session, and the energy continued throughout the conference. One of the 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 various roundtable discussions held throughout the conference.

EPI|Lifestyle 2024 attendees networking during morning break

During the Council Leadership Committee meeting, there was considerable interest and exchange of ideas as we launch our efforts to create a new strategic plan for 2025-2028. The current strategic plan will end in 2024. and the council is working on aligning with the 2028 AHA impact goals. We discussed areas from our current plan that are important going forward. These include 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 the future of the council, will help us establish new research partners, and grow the membership of the council.

Another highlight of the Scientific Sessions in Chicago was the annual council dinner where we honored this year's award winners.

Congratulations to all our award winners.

Jeremiah and Rose Stamler Research Award for New Investigators

WINNER: Wendy Wang

Finalists: Wendy Wang, PhD, MPH; Erika Beidelman; Katlyn McGraw, PhD; Lathan Liou, MPhil; Ming-Li Chen, MD, MS

DID YOU KNOW?

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Epidemiology and Prevention Early Career/Trainee Travel Award

WINNERS: Hokyou Lee, MD, PhD; Kai Luo, PhD

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

WINNER: Jie Hu, PhD

Finalists: Jie Hu MD, PhD; Ming Ding, DSc; Wenjun Fan, MD, PhD; Telisa Spikes, PhD

Epidemiology and Prevention Minority Travel Grant

WINNERS: Michael D. Green; Veronica Njuguna, MD; Patricia Pagan Lassalle, PhD; Astrid N. Zamora, PhD, MPH

Epidemiology and Prevention Mentoring Award

WINNER: Mercedes Carnethon, PhD, FAHA

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

WINNERS: Saam Honarvar, MD; Theresa Boyer, MS, MSPH; Saher Taj Shiza, BsC

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

WINNER: Zahra Azizi

Richard D. Remington Methodology Lecture

LECTURER: Daniel J. Rader, MD, FAHA

(continued on page 40)

(continued from page 39)

William B. Kannel MD, Memorial Lectureship in Preventive Cardiology

LECTURER: Norrina Bai Allen, PhD, MPH, FAHA

Spring EPI Fellows of the American Heart Association
(Not pictured)

Andrew Agbaje, MD, MPH, PhD, FAHA; Ehimare Akhabue, MD, FAHA; Mahmoud Al Rifai, MD, MPH, FAHA; Bettina M. Beech, PhD, MPH, FAHA; Allison E. Gaffey, PhD, FAHA; Michelle Christina Johansen, MD, PhD, FAHA; Nour Makarem, PhD, FAHA

EPI/Lifestyle 2024 Scientific Sessions Council Outgoing Chair

Alonso Alvaro, MD, PhD

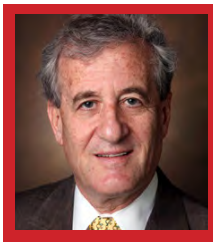
Outgoing Council Chair Plaque

Wayne Rosamond, PhD, MS, FAHA

It has been an honor and a pleasure serving as Chair of our Council the past two years. I look forward to the future as Dr. Mercedes Carnethon assumes the role of Chair in July. There is so much that our council can be proud of and much to draw inspiration from as we continue as a positive force for cardiovascular health and well-being in our communities. Cheers.

Mercedes Carnethon
PhD, FAHA

Musings After Two Years in the Chair



CONNECTING WITH THE CHAIR

Dan M. Roden
MD

It has been 15 years since the American Heart Association established the Council on Genomic and Precision Medicine. As I think back to the field in 2009, I am struck by how primitive our tools, and indeed much of our thinking, was compared to where we are today: Genome-wide association study was a new tool; methods to interrogate rare variants or indeed sets of common variants across the genome were in their infancy (or hadn't yet been born); large biorepositories holding phenotypic and genotypic data in hundreds of thousands of participants did not exist; the idea that genetic variant information would be routinely used in clinical care was a twinkle in our eye; wholesale return of results (as the *All of Us* program is now doing) was far-fetched; the field was focused almost exclusively on European ancestry studies; gene editing was in a pre-CRISPR/cas9 era; methods to develop iPSCs had just been described; *Circulation Genetics* (that was the journal's name then) had just published its first issue. Progress has been breathtaking, and I hope that in 15 years we can look back on where we are now and say how primitive our tools and thinking were in 2024.

Members of this council share the vision that medicine will increasingly include a component of personalization based on genomics, other omics, social determinants of health, and other environmental inputs. Indeed, I think this broad vision is shared across large swaths of the basic and clinical cardiovascular communities, so a challenge for our council is how to grow our membership and impact across the AHA. So please continue to support the council and encourage your colleagues to become members. Finally, please join me in welcoming Tom Cappola, MD, ScM, as he becomes our new chair.

Tom Cappola
MD, ScM

Statements

One of the major ways in which the council advances GPM science is by initiating or collaborating in scientific statements; here's what members have produced in the last two years:

Initiated by GPM

- Equity in Cardio-Oncology Care and Research
- Interpreting Incidentally Identified Variants in Genes Associated with Heritable Cardiovascular Disease
- Polygenic Risk Scores for Cardiovascular Disease
- Cardio-Oncology Drug Interactions
- The Use of Biomarkers in Cardio Oncology
- Genetic Testing for Heritable Cardiovascular Diseases in Pediatric Patients
- Considerations for Cardiovascular Genetic and Genomic Research with Marginalized Racial and Ethnic Groups and Indigenous Peoples

Cosponsored by GPM

- Cardiovascular Imaging in Contemporary Cardio-Oncology
- Epidemiology of Diabetes and Atherosclerotic Cardiovascular Disease Among Asian American Adults
- Future Perspectives of Cardiovascular Biomarker Utilization in Cancer Survivors
- Preclinical Models of Cancer Therapy–Associated Cardiovascular Toxicity

There are three statements in production (and embargoed) and four that are currently in development. We welcome any ideas about statements that you'd like to generate, or you think GPM should generate.

Scientific sessions–AHA turns 100 in 2024.

I look forward to seeing you in Chicago November 15-18 at what promises to be a special Annual Scientific Session as AHA turns 100. The meeting starts with Pre-Sessions Symposia and Early Career Day Friday November 15, and the Genomic and Precision Medicine Early Career Investigator Award Competition is slated for Saturday afternoon, with the GPM reception, where we will honor our own, including all the early career finalists, Saturday evening. ■

Council Announces New Award

CONNECTING WITH THE CHAIR

R. Ariel Gomez
MD, FAHA

As I write, the Council on Hypertension Organizing Committee is working diligently to get our program set for Hypertension Scientific Sessions 2024 which will be held September 5-8. The program will feature two stellar keynote speakers, bookending the meeting, and seven sessions to cover state-of-the-art clinical and basic research. Abstract-driven oral presentations will be held concurrently with clinical practice/clinical science and primary care sessions.

Jane F. Reckelhoff
PhD

Dr. Cam McCarthy is working to provide many opportunities for early-career council members to present their research, get mentored, and network with peers and more senior investigators and clinicians. There will be awards for poster sessions and oral presentations for early career investigators, and I encourage you to submit your abstracts and request presentations. Also, consider applying for the Stephanie Watts Career Development Awards and/or the Harry Goldblatt Award. Some travel awards will also be available for early career investigators.

We have a new award specifically for early career clinician investigators. The award is named in honor of a longtime council member, friend, and esteemed clinical investigator, Dr. Fernando Elijovich, and was made possible by a generous endowment from his partner, Dr. Cheryl Laffer, and his sons, Drs. Lucas and Matias Elijovich.

There is still time to apply for travel grants for Scientific Sessions 2024. For information on these and other future award opportunities please visit the **Sessions award page**.

See you in Chicago!

ENGAGEMENT 365

A one-stop shop for AHA Member information, activities, hot topics and more! **Learn more**.

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

Young Oh
PhD

In this issue, I would like to share the upcoming changes in the National Institutes of Health grant review process. The NIH is simplifying the framework for the peer review of most Research Project Grant (RPG) applications, including R01, R03, R15, R21, R33, R34, U01, etc., effective for due dates on or after January 25, 2025. This initiative aims to better focus reviewers' attention on the task of assessing the scientific and technical merit of grant applications, reduce the potential impact of reputational bias and reduce reviewer burden.

The Simplified Framework for NIH Peer Review Criteria retains the five regulatory criteria (Significance, Investigators, Innovation, Approach, Environment) but reorganizes them into three factors — two will receive numerical criterion scores and one will be evaluated for sufficiency. All three factors will be considered in arriving at the Overall Impact score.

Factor 1: Importance of the Research (Significance, Innovation), scored 1-9

Factor 2: Rigor and Feasibility (Approach), scored 1-9

Factor 3: Expertise and Resources (Investigator, Environment), to be evaluated as either sufficient for the proposed research or not (in which case reviewers must provide an explanation)

The reframing of the criteria will help focus reviewers on three central questions reviewers should be evaluating: How important is the proposed research, how rigorous and feasible are the methods, and whether the investigators and institution have the expertise/resources necessary to carry out the project. Potential applicants are strongly encouraged to check FAQs for this change: **grants.nih.gov/faqs#/simplifying-review.htm**.

Hope this is helpful. Please feel free to **contact me** anytime for any grant- or program-related questions.

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**.

Hypertension Early-Career Spotlight: Tiffany Chang

Congratulations Tiffany on winning this competitive prize. Could you please start by telling us a bit more about your project?

We used national Veterans Health Administration data to estimate longitudinal blood pressure (BP) trajectories for 764,652 post-9/11 veterans' (mean age=33 years) after they transitioned from military service. All sex, racial, and ethnic subgroups of young veterans showed BP elevations over time, but our results suggested a growing disparity in BP trajectories as veterans were followed for an average of 6.1 years. Indeed, systolic BP increases were significantly faster for non-Hispanic Black and Asian women, whose rate of increase was three times faster than that of men. These results suggest that interventions may be needed to mitigate disparities in trajectories to reduce future cardiovascular disease risk and promote health equity.

How did you get into science?

My interest in epidemiologic research began while I was a Quality and Systems Improvement Director at the American Heart Association. Here, I witnessed how data could have been harnessed to identify potential gaps in clinical care and target patient- and system-level interventions to improve health care delivery and cardiovascular outcomes. Seeing this impact led my desire to pursue graduate school to learn how to apply epidemiologic methods to design research studies, analyze data, and communicate results to improve population health.

What do you like to do outside of science?

Outside of research, I have been learning the Argentine tango, which has been a great outlet to exercise creativity in a different way. Through my university's weekly tango classes and practices, I have been fortunate to form meaningful connections with peers hailing from diverse disciplines beyond my own research field. Public health is a multidisciplinary science, and activities such as these have been vital for me to interact with individuals across fields and to think about my research from different perspectives.

What are your scientific aspirations?

As an aspiring epidemiologist and health services researcher, I hope to conduct research that addresses health disparities and promotes equitable outcomes among underserved populations. One way in which I hope to accomplish this is to think about how big data sources, such as electronic health record data, can be leveraged to conduct cardiovascular disease surveillance in a timely and comprehensive manner for populations that are more commonly understudied, such as veterans. Finally, I am eager to learn about ways to bridge the gap between research and clinical and population health practice to implement evidence-based strategies to prevent and manage cardiovascular disease in the population.

Tiffany E. Chang, MPH, presents during the Trainee Advocacy Committee Early Career Oral Award Session at the American Heart Association's 2023 Hypertension Meeting, Saturday, September 9, 2023, at the Sheraton Boston Hotel. Photo by © AHA/Matt Herp 2023.

You had work experience prior to entering graduate school. How has this helped your career as a professional student? What advice would you give your younger self?

Although everyone's trajectory to graduate school is different, my prior work experience has benefitted me in having a clear idea of the research questions I wanted to pursue and the methods I wanted to learn to be able to hit the ground running. Additionally, working across different sectors, including federal and state government, non-profits, and academia, has given me perspective on the different lenses and ways in which research can be used to drive clinical and population health changes. I would tell my younger self to take risks and not be afraid of failure —sometimes the most daunting research questions to tackle can be the most fulfilling!

Aside from this prize, how has the AHA and Council on Hypertension impacted your career?

The AHA and Council on Hypertension have impacted my career in pivotal ways. I am a recipient of the AHA's Predoctoral Fellowship, which has provided important resources and financial funding for my doctoral thesis. Attending Hypertension Scientific Sessions and participating in the Council of Hypertension's activities for trainees have helped me to form connections and opportunities with other trainees and research mentors. It has been a fantastic experience to not only learn about cutting-edge science in the field of hypertension but also bring what I learned at these meetings into how I develop and carry out my research. I look forward to these meetings every year to catch up with mentors and colleagues and hope that in the future, I can serve as a mentor to the next generation of epidemiologists. ■

Hypertension Journal Report

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

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. Thank you.

Early Career Assistant Program Applications Open Fall of 2024

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. Find full program details at **ahajournals.org/hyp/early-career**. Check this page for the application link, which will open at the beginning of September.

Social Media Initiatives

Our Social Media Editorial Board Team of experts has been diligently and successfully promoting our **#HYPHIP** live author chats through *Hypertension*'s **@HyperAHA** X feed. These highly interactive live chats are held every other Tuesday with authors from all over the globe. To see what's new in the conversation or to share chat information, search the **#HYPHIP** hashtag. To stay connected for future live chats and for updates on all future *Hypertension* programming, follow **@HyperAHA** on X.

AHA Centennial Collection

The American Heart Association is celebrating its 100th anniversary this year! Multiple events are planned to mark this auspicious occasion. Throughout 2024, the AHA journals will be publishing a series of articles across the entire journal portfolio at the Centennial Collection page: **ahajournals.org/centennial**.

Hypertension *Statements and Guidelines and News Media*

For *Hypertension*'s most recently published Statements and Guidelines, be sure to follow **ahajournals.org/hyp/aha-statements**.

Hypertension *in the News*

Considering the prevalence of hypertension of almost 40% of adults being hypertensive, it is not surprising that this topic is 'newsworthy'. Please check our features highlighted by AHA News media: **newsroom.heart.org**.

Upcoming Clinical-Pathological Conferences [CPC]

Join the *Hypertension* journal editors at two end-of-year conferences in discussing two interesting Clinical-Pathological Conference cases: first in Chicago during the Hypertension 2024 Scientific Sessions September 5-8, 2024 then in Columbia during the International Society of Hypertension meeting September 19-22, 2024

CALL for Clinical-Pathological Conferences [CPC] Cases

Hypertension is looking to select two interesting clinical cases for each of the following upcoming 2025 meetings:

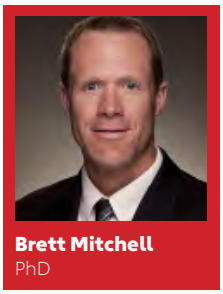
- European Society of Hypertension
- Hypertension Scientific Sessions

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. Find additional submission information at: **ahajournals.org/hyp/cpc_proposals**.

Message from the Trainee Advocacy Committee (TAC)

Continuing with our theme of spotlighting individual winners from our Council on Hypertension Annual Meeting, it is our pleasure to highlight Tiffany Chang, MPH and PhD candidate from Yale University, as our Trainee Advocacy Committee Early Career Oral Award winner. Tiffany is in the Department of Chronic Disease Epidemiology in the School of Public Health. Her dissertation research examines the sex-specific impact of patient- and system-level factors on hypertension outcomes among young veterans. Before her doctoral studies, Tiffany worked as a health services researcher at the Centers for Disease Control and Prevention, as well as a quality improvement director at the AHA. Tiffany gave an engaging talk examining sex, racial and ethnic differences in blood pressure patterns among young veterans.

Message from the Chair of the Membership Committee



Brett Mitchell
PhD

Please help spread the word about the benefits of becoming a member of the Council on Hypertension. Benefits include:

- Discounted publication charges for accepted articles in *JAHA*
- Savings on registration for the annual Hypertension Scientific Sessions and other AHA Meetings/ Conferences
- Complimentary or discounted courses through the Lifelong Learning Center
- Notification of research funding opportunities and waiver of grant application fee
- Access to all 14 AHA/ASA scientific journals online

You are also encouraged to apply for Fellowship status in the American Heart Association (FAHA), which recognizes an individual's outstanding contributions in basic, clinical or epidemiological hypertension research and their volunteer leadership and service to the American Heart Association. Information on the **nomination process can be found here**. Contact me at **brettmitchell@tamu.edu** if you have any questions. I would be happy to help you with the process. We look forward to seeing your application! ■

Message From the Editor and Chair of the Communications Committee

Thanks very much for your dedication and support for the Council on Hypertension. To get more involved, visit **professional.heart.org** and complete the Science Volunteer Form linked on your dashboard or by visiting **profressional.heart.org/volunteerform**. Other opportunities include participation in the AHA Go Red for Women campaign, and the Heart Walk. Please follow **@CouncilonHTN** on Twitter (X) to stay connected and informed about our Council. ■

Annet Kirabo
DVM, MSc, PhD, FAHA

KCVD is Active at Kidney Week and Scientific Sessions

CONNECTING WITH THE CHAIR

Janani Rangaswami
MD, FACP, FAHA

As my tenure as chair of the Council on the Kidney in Cardiovascular Disease (KCVD) draws to an end, I am filled with deep gratitude and admiration for the incredible work the council has been engaged in, within the American Heart Association and the broader cardiorenal community. Never has the interface between cardiovascular, metabolic, and kidney disease been so front and center to the AHA's mission of being a relentless force for a world of longer, healthier lives. Apropos to this theme, the recently released AHA Presidential Advisory on Cardiovascular-Kidney-Metabolic (CKM) health and its accompanying scientific synopsis were fundamental in raising awareness on the importance of these interconnected conditions, and in elevating the urgency of tackling the increasing global burden of CKM syndrome at a population health level. The development of the novel AHA PREVENT cardiovascular disease risk calculator is a major step forward in assessing lifespan risk in individuals with CKM syndrome, to ensure that appropriate therapies are deployed in alignment with cardiovascular disease risk, with heightened awareness of prevalent implementation barriers including health care disparities, financial toxicity of pharmacotherapies, and the lack of coordinated health care models for holistic care. The role of KCVD is critical in taking this work to the next level, and the broad base of talent represented within the council is most suited to excel in this domain.

In the past few years, the landscape of therapeutic strategies in nephrology has undergone a sea change, and the community welcomes the addition of glucagon like receptor 1 agonists (GLP-1RAs) to the therapeutic armamentarium to improve cardiovascular and kidney outcomes. This class of agents is particularly notable for being able to modify obesity upstream to the development of organ damage, as well as demonstrating cardiovascular and kidney benefits, with newer trials such as STEp HF-pEF DM and FLOW from recent months adding to that body of literature. The significant overlap that now exists between cardiovascular and kidney protective therapies further amplifies the need for effective health care delivery models that can provide a holistic approach to the care of patients with CKM syndrome. Similarly, the emphasis on primary and primordial prevention in individuals at risk for CKM syndrome has never been more critical, and the future looks bright with the cumulative efforts within the AHA to address CKM health goals across the lifespan of individuals.

The educational mission within KCVD continues to excel in identifying talent via the SCILL awards, and the awardees have been deeply engaged in their respective projects ranging from educational applications, point-of-care ultrasound education, podcasts, and many other important endeavors that will solidify interest in the cardiorenal space. KCVD was actively involved in programming for the AHA Hypertension meeting, where a lot of cutting-edge content will be presented.

Thu Le
MD

Finally, I am delighted to welcome Professor Thu Le, MD, division chief of nephrology at the University of Rochester, as the incoming chair of KCVD, as well as Dr. Uta Erdbruegger, MD, a clinician scientist from University of Virginia, as chair-elect. The Council is in the best of hands with their leadership, and I am truly excited to see all the growth that will happen with their efforts and engagement. Most importantly, the presence of an active and thriving pipeline of trainees and early career faculty within the council reinforces my enthusiasm for KCVD. We are leading the way in modifying the trajectory of cardiovascular and kidney disease, improving health span and lifespan, and ensuring parity in access to holistic CKM care for all.

Two prestigious awards were given by our council to Daniel Batlle, MD, and Oleg Palygin, PhD, at Hypertension Scientific Sessions 2023.

Daniel Batlle
MD

Oleg Palygin
PhD

Dr. Batlle received the prestigious Donald Seldin Award, which is given to an expert for their work in the awareness concerning the rising epidemic of cardiovascular disease and mortality in patients with chronic kidney disease. Dr. Palygin received the Mid-Career Achievement Award given to a basic, clinical, translational, or population cardiovascular researcher for specific career endeavors and achievements who made a significant impact in the field of cardiovascular disease as it relates to kidney failure. Both Dr. Batlle and Dr. Palygin are longtime members of the KCVD Council. We wanted to celebrate their success and get to know them a little better through a question-and-answer session prepared by Dr. Justin P. Van Beusecum, PhD, member of the KCVD Communications Committee. ***Congratulations to both, as these awards are well deserved!***

Justin P. Van Beusecum
PhD

How has being a member of the AHA and Kidney in Cardiovascular Disease Council helped your career?

Dr. Batlle: I have been a member and involved with the KCVD Council for

many years, and I have enjoyed the interactions with other colleagues interested in hypertension and kidney disease. I think the council is vital in recognizing the importance of nephrologists and scientists researching kidney disease for a key understanding of hypertension at both the clinical and basic science research level.

Dr. Palygin: Being a member of the AHA and actively participating in the KCVD Council has contributed to my career in several impactful ways. It allowed me to immerse myself in a community of like-minded professionals dedicated to advancing cardiovascular and kidney health. The environment fostered by the AHA and KCVD provided a platform to establish professional collaborations and meaningful connections with my peers. With these connections, I have broadened the scope of my research program and incorporated interdisciplinary approaches that have enhanced the quality and impact of my work. Moreover, my involvement with the AHA and KCVD has provided me with platforms to showcase my research findings to a broader audience. By actively participating in AHA Scientific and Hypertension research conferences, I have been able to share my work with cardiovascular and renal health communities. This has not only raised the profile of my research program but also provided me with additional engagement and collaboration opportunities, ultimately advancing my career. Finally, serving within the AHA and the KCVD Council has equipped me with valuable leadership skills and a deeper understanding of the operational and strategic facets of a large, impactful non-profit organization. These experiences have contributed to my professional growth, enhancing my abilities to lead and manage research teams, navigate complex projects, and advocate effectively for cardiovascular and kidney health issues.

What does being a recipient of this distinguished award from the KCVD Council mean to you?

Dr. Batlle: Dr. Seldin is a legendary figure of American medicine whom I knew personally and via my mentor, Dr. Neilkurtzman. His research on acid base and electrolytes impacted my earlier research on distal tubular acidosis. Therefore, receiving the Seldin Award Lecture is very personal and special to me.

Dr. Palygin: Being a recipient of the KCVD Mid-Career Achievement Award is an immense honor that signifies recognition from one's peers and leaders within the cardiovascular and kidney disease research community. This accolade not only acknowledges my personal dedication and contributions to advancing the understanding and treatment of cardiovascular diseases as they relate to kidney health but also validates the hard work of my team and collaborators over the years. In the context of my career, this award represents a pivotal moment, underscoring my commitment to the mission of the KCVD Council and the AHA. It also encourages continued growth and exploration in a field that is complex and ever-evolving, emphasizing the importance of bridging gaps between basic and translational research

What career and/or scientific insight would you give to the next generation of KCVD members to be successful?

Dr. Batlle: Persistence, development, and an area of unique expertise. Importantly, one needs to continue to have a broad view of medicine.

Dr. Palygin: The importance of building a solid professional collaborative network plays a pivotal role in achieving professional success. Furthermore, the foundation of a successful research career often lies in strong mentor-mentee relationships, providing essential guidance, support, and insights. Finally, our continued fight against cardiovascular and kidney diseases underscores the need for an interdisciplinary research approach and the requirement for lifelong learning.

What has been the best piece of advice that a collaborator or mentor has given you in your career?

Dr. Batlle: Life is not fair. Just accept it and move on.

Dr. Palygin: Embrace the challenges and uncertainties in your research and career as opportunities for innovation and growth. The dedication to persisting through difficulties is what will ultimately lead to significant contributions to success.

What is your favorite hobby or way to relax outside of research?

Dr. Batlle: I love soccer above all sports.

Dr. Palygin: My favorite way to unwind and recharge is through physical activity and maintaining a disciplined gym routine. The rigor of structured exercise helps me stay physically fit and significantly boosts my mental clarity and resilience. The gym serves as a sanctuary where I can momentarily disconnect from professional challenges, allowing me to return to my research with enhanced focus and renewed energy. ■

Outstanding Programming and Face-to-Face Networking Reenergizes Council

CONNECTING WITH THE CHAIR

Anitha John
MD, PhD, FAHA

The Young Hearts Council has continued its efforts to foster community and create opportunities through the continued efforts set forward from the strategic planning efforts from 2021-22. It has been a whirlwind of activities for the Young Hearts Council over the past two years. We have continued to have increasing content at the annual Scientific Sessions and, in 2023, published the most scientific statements of any subcommittee. We appreciate our Council leadership and subcommittee members for their hard work and dedication to the many initiatives.

A few important updates to keep on your radar:

November 15-18, 2024

Scientific Sessions with increased Young Hearts Content. The meeting will be held in Chicago, and we are pleased to report that our content at Sessions is the highest it has been in years! We have 16 seminars and three oral abstract sessions in addition to moderated and standard poster presentations. For the third year in a row, there is a special half-day pre-session Young Hearts symposium on Friday, November 15, from 12:30 to 5:15 p.m., which requires an additional charge/registration. In addition, there will be additional early career programming on November 15, which is great for fellows in training and early career faculty. We hope the day will provide additional networking opportunities.

New Science Subcommittee Formation

A new subcommittee, the Pediatric and Congenital Critical Care Cardiology subcommittee, has been formed. Recognizing a need to incorporate the critical care community within our council, the proposal was presented to the Council Operating Committee in January 2024 and received overwhelming support. 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!

New Focused Funding Opportunities

Announced in the fall of 2023, the American Heart Association/ Additional Ventures Collaborative Sciences Award provides funding to establish a multidisciplinary network to address the knowledge gaps in single ventricle heart disease. The American Heart Association has also partnered with the Pediatric Heart Network to fund up to three AHA-PHN scholars, providing grants to support early-stage investigators in the field of pediatric cardiovascular disease or adult congenital heart disease. 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 and Enduring Hearts. Several other funding mechanisms include career development awards and institutional research enhancement awards. Please visit the **AHA Research Grant Funding Opportunities** site for more information and upcoming grant-related webinars.

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.

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

It has been an honor to serve as your Council Chair for the past two years. Getting to know our community and helping advance the council's mission has been incredibly rewarding. Most importantly, it has been wonderful to see the incredible science and the many clinicians and researchers dedicated to improving the cardiovascular health of children and patients with congenital heart disease.

On behalf of the **Council on Lifelong Congenital Heart Disease and Heart Health in the Young**, I encourage all new and existing members to work with us as we continue to grow and improve. I hand over my role to the very capable Dr. Antonio Cabrera, who will start his term as Chair of the Council on July 1, 2024. I'd also like to welcome Dr. Andrea Beaton, who will become our new Chair-elect. I know they will continue to lead the Council with the spirit of collaboration and innovation, taking us to new heights!

Please don't hesitate to reach out to me or other members of the Young Hearts Leadership committee, if you would like to learn about ways to become more involved. ■

WE'RE HERE TO HELP

Contact AHA Member Services for any questions about your membership benefits:

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Council Reflects on EPI | Lifestyle 2024

CONNECTING WITH THE CHAIR

Deborah Rohm Young
PhD, FACSM, FAHA, FNAK

I am thrilled to announce that Jun Ma, MD, PhD, FAHA, FABMR, will join the Council on Lifestyle and Cardiometabolic Health leadership team as Chair-elect, effective July 1, 2024. She is the Beth Fowler Vitoux and George Vitoux Distinguished Professor of Geriatrics in the Division of Academic Internal Medicine and Geriatrics at the University of Illinois, Chicago. Dr. Ma is also the Associate Head of Scholarly Activity in the Department of Medicine at UIC Health. Her research addresses the prevention and control of debilitating chronic conditions through mechanism-driven lifestyle interventions. Her work focuses on these issues among racially, ethnically, and socioeconomically diverse adult populations.

Jun Ma
MD, PhD, FAHA, FABMR

Dr. Ma has served in leadership positions in our council. She was the Chair of the Behavior Change for Improving Health Factors Committee and is member-at-large for the Leadership Committee. She has been a member of multiple committees at the national and council levels. Please welcome Jun to her new role!

2024 Epidemiology and Prevention/Lifestyle and Cardiometabolic Health Scientific Sessions

Under the leadership of Co-Chairs Alvaro Alonso, MD, PhD, FAHA, and Monica Serra, PhD, and the entire program committee, the March meeting was a resounding success! Thank you all for volunteering your time and intellect to ensure the 800-plus attendees experienced late-breaking science discoveries, stimulating discussions, meeting new colleagues, and reconnecting with old colleagues.

There were many highlights from the meeting; here are just a few:

- The 2024 David Kritchevsky Memorial Lecture was given by Cheryl Anderson, PhD, MPH, MS, FAHA, with a presentation titled "Traveling the Last Mile: The Road to Sustainable Impact of Healthy Diets on Cardiovascular Health." Dr. Anderson spoke of the vast knowledge that's accumulated on the benefits of healthy diets but the continuing lag in adoption of healthy eating patterns by the U.S. population. She challenged us to think differently and consider working upstream instead of at the individual level to improve our nation's dietary habits.

Dr. Cheryl Anderson

- The Early Career 3-minute Oral Abstract Competition was very popular with a standing-room-only audience. The program committee wisely slotted the competition for a mid-morning session instead of its prior time — 7:30 am. Thank you! The finalists were:
  - **Shutong Du, MHS:** "Protein biomarkers of ultra-processed food and coronary heart disease, chronic kidney disease and mortality risks."
  - **Jacob Gallagher, PhD:** "Device-measured 24-hour activity in pregnant persons with and without a child in the home."
  - **Samuel Luebbe, MD:** "Cost-effectiveness of apoB versus LDL-C testing to guide intensification of lipid-lowering therapy."
  - **Casandra Nyhuis, MHS:** "In-school or on-break: Associations of multidimensional sleep health with cardiometabolic health in adolescence."
  - **Emily Romero, MS:** "Does acculturation impact risk of mortality among foreign-born Hispanic American adults?"

All five presentations engaged the audience, and the presenters were able to convey their research within the 3-minute requirement. The first-place winner was Jacob Gallagher, who went home with a $500 check. Samuel Luebbe was awarded second place and

Left to right: Leanna Ross (moderator), Wayne Rosamond (judge), Casandra Nyhuis (finalist), Emily Romero (finalist), Jacob Gallagher (first place), Samuel Lubbe (second place), Shutong Du (finalist), Deborah Young (judge), Lilian Sattler (judge) and Natalie Cameron (moderator)

received $250. Congratulations to all the finalists. We look forward to their involvement in the AHA and KCVD.

National Recognition to Council Members

Alice Lichtenstein, ScD, FAHA; Chiadi Ndumele, MD, PhD, MHS, FAHA; and Janani Rangani Rangaswami, MD, FAHA, were awarded the Award of Meritorious Achievement. The AHA National Volunteer Awards were presented on May 2. The presentations were played live on YouTube. Below are some shots of Alice and Chiadi at the March meeting.

Lilian Sattler, PhD FAHA (left) chats with Alice Lichtenstein ScD, FAHA.

Chiadi Ndumele, MD, PhD, FAHA, (left) talks with Josef Coresh, MD, PhD, FAHA.

Recent Publications

- Popular Dietary Patterns: Alignment with AHA 2021 Dietary Guidance — April 2023
- Epidemiology of Diabetes and ASCVD among Asian Americans — May 2023
- Increasing Equity of Physical Activity Promotion for Optimal Cardiovascular Health — May 2023
- Cardiopulmonary Impact of Electronic Cigarettes and Vaping Products — May 2023
- Aggressive LDL-C lowering and the Brain: Impact on Risk for Dementia and Hemorrhagic Stroke — September 2023
- Food Is Medicine: A Presidential Advisory From the American Heart Association — September 2023
- Cardiovascular-Kidney-Metabolic Health: A Presidential Advisory From the American Heart Association — October 2023
- A Synopsis of the Evidence for the Science and Clinical Management of Cardiovascular-Kidney-Metabolic (CKM) Syndrome – October 2023
- Novel Prediction Equations for Absolute Risk Assessment of Total Cardiovascular Disease Incorporating Cardiovascular-Kidney-Metabolic Health — November 2023
- Resistance Exercise Training in Individuals With and Without Cardiovascular Disease: 2023 Update — December 2023

Final Thoughts

It's been an honor to represent the Council on Lifestyle and Cardiometabolic Health these past two years as Chair. The council's work will continue under the leadership of Chiadi Ndumele and Jun Ma. I thank Chiadi for his partnership in this endeavor and look forward to continuing to work with him and Jun. I especially thank Kelsey Stanley, our AHA account manager, who is the glue that keeps the council together and makes certain we accomplish the council's goals. ■

Showcasing Prominent PVD Members from Scientific Sessions

CONNECTING WITH THE CHAIR

Esther S.H. Kim
MD, MPH, FAHA

What an exciting year it has been for the PVD Council. After an invigorating AHA.23 Scientific Sessions in Philadelphia, our council got busy planning for **AHA.24** in Chicago, IL. I am particularly looking forward to attending the thoughtfully planned sessions on differences in vascular disease by sex. There is one highlighting hormonal influence on venous thromboembolic disease and another on sex differences in aortic disease. These and many other sessions are sure to highlight the very best science in vascular disease, and I extend kudos to the planning committee on what will prove to be a stellar meeting for the AHA's 100th year.

The PVD Council is fortunate to be comprised of passionate and dedicated members who are leading the charge in studying and treating vascular disease. We'd like to extend our hearty congratulations to the writing committee of the multisocietal **PAD Guidelines**, many of whom are members of the PVD Council. The publication of the PAD Guidelines has been eagerly anticipated and its content will improve the care of patients with PAD throughout the world.

In May 2024, the Vascular Discovery meeting in Chicago had near record attendance. Our Council was again pleased to co-sponsor this meeting with the ATVB Council and was honored to present Dr. Karen Ho with the Alan T. Hirsch Mid-Career Award in Vascular Medicine and Dr. Bowen Wang with the Robert Hobson, II, MD Early Career Investigator Award. We were also very pleased to award Dr. Scott Damrauer with the inaugural Mid-Career Award and Lecture. The title of Dr. Damrauer's lecture was "Lipoproteins and AAA: Causal Inferences from Human Genetics." We were also very fortunate to be able to award 5 travel grants to allow young investigators from around the globe to present their science at Vascular Discovery.

The PVD Council is growing, and we need to remain relevant to our longtime members and provide the new generation of members with resources that will support their careers. To that end, our council has started the process of strategic planning for 2024-2028. We took the opportunity to listen to our membership at the PVD Council luncheon held during Vascular Discovery and further refined the thoughts and suggestions brought forth at that venue during the spring leadership committee meeting later in May. Strategic planning will continue with input from our committees and a final plan will be presented to the leadership committee at sessions in November. Please join us at the PVD Council Dinner where I will provide an update of our council's activities. We will again have a PVD trivial bowl, and if the 2023 PVD Council dinner is any indicator of our council's affinity for camaraderie, competition, and fun, the 2024 PVD Council dinner is sure to sell out. Make sure you buy your tickets fast and don't forget to bring your lab, fellows, and colleagues!

Winner of the Robert Hobson, II, MD Early Career Investigator Award

Bowen Wang, PhD,
Northwestern University

What has been your career pathway?

If you ask the 20-year-old me what my future career holds, leading a research group and training the next generations of scientists and clinicians are never supposed to be the answer. At the end of high school, I thought I would attend medical school. Eventually, I entered an integrated program to guarantee my next eight years toward a doctoral degree. After the pre-clerkship curriculum, I found my passion in pathology and decided to gain more exposure with my electives after core rotations. I thought my career was all set.

However, it all changed in year 5 of med school when I got the first taste of what a research career entails. A summer school experience at UCLA – made possible by its Cross-disciplinary Scholars in Science & Technology program – made me realize how much more I could contribute to academic medicine by embracing a basic and translational research career. I spent that summer witnessing how cutting-edge research projects were conceived and how interdisciplinary collaboration could boost research impacts. With the support from my then mentors, I realized my passion for translation-oriented team science.

Switching career paths in the middle of my 8-year medical training was a tough decision, let alone moving to a different continent. To my surprise, embarking on a new chapter as a PhD student would prove to be more exciting and rewarding than I could have imagined. Thanks to the support and mentorship from Dr. K Craig Kent, then at the University of Wisconsin-Madison, I had the privilege to embrace the systems biology concept. By actively learning from and collaborating with experts from diverse disciplines, I spearheaded an ambitious project incorporating multi-omics and high throughput screening to explore novel molecular targets in the phenotypic switching of vascular smooth muscle and endothelial cells. This was made possible by the generous support from AHA in the form of a Predoctoral Fellowship.

With the unrelenting support from my mentors, I was blessed to take these new findings to build my independent research program in disease settings such as abdominal aortic aneurysm and (re)stenosis. I started my lab at the University of Virginia right when COVID-19 hit the world, and we experienced some disruptions in the first year. Thanks to my wonderful peers across the US, we were able to support each other and ramp up research productivity, leading to my first R01 and senior-authored publications. At the beginning of 2024, I relocated to Northwestern University to be closer to my wife, who

is finishing up her residency training in pathology, the specialty that I once loved and was committed to. Life comes to a full circle :)

In addition to receiving this award, how did you first get involved with AHA?
My first interaction with AHA came in 2015 when I wrote my first-ever proposal for the Predoctoral Fellowship Award. For international students, AHA has always supported us when most other funding agencies have citizenship or green card requirements.

What advice do you have for people starting their research careers?
I have made many mistakes and so I love sharing what I wish I could have done better.

- Practice scientific writing as early/much as possible during graduate school. Manuscripts, fellowship/award applications, grant proposals, etc. Actively seek workshop opportunities and mentorship from thesis advisors/PIs. I was too afraid to write anything during the first four years of graduate study. I always gave myself excuses like "English is not my native language" and "I need to spend more time to refine my experimental expertise and microsurgery skills". When it came to drafting my very first proposal (for none other than AHA's Predoctoral Fellowship) with a specific deadline approaching, I panicked and realized the grave mistake I'd made by totally ignoring my training in scientific writing. Nowadays, I'm the one who's chasing down my trainees and reminding them that they need to start practicing writing; how the tables have turned....
- Build your academic network with peers. I always shied away from going to conferences, and even if I did, I would not actively reach out and connect with fellow researchers. If it's too daunting to reach out to established PIs, I find it much easier to talk to peers. I have made many academic friends through ATVB and now Vascular Discovery, who now have embarked on various career paths but are still well within cardiovascular research and medicine. Without my peer support mechanism, my lab might not have survived the brutal first two years of the COVID-19 pandemic when I had just started tenure track. Their help can come in any form, such as providing critiques of your manuscript and proposals, sharing job ads and potential lab candidates, advising on lab/life balance, etc.
- On the topic of career paths. Keep your options open, as there's no definitive answer to which career path fits you best. The years during graduate study can help shape that answer. Several recent graduates have decided to embrace the #AltAc movement and left academia (more specifically, bench research). During my grad school interview, I even told my mentor that I was 100% sure I would either apply for residency training or go to industry, as I wanted to be closer to the bedside. But five years later, I was very much into basic and translational research, and the rest is history. Talk to your mentors, programs, peers, and random people at AHA conferences about career paths – you will be amazed at the diverse paths available, ranging from science communication to clinical fellowships (e.g., clinical toxicity) or even getting involved in government policymaking in science!

What do you like to do outside of medicine?
My wife and I have five furry kids; naturally, we love spending most of our time with them. We have enjoyed helping local animal shelters. If I could choose again, I may pursue a career in veterinary medicine.

Who has had the most impact on your career to date? Who do you consider a mentor?
I owe all my academic career to Dr. K Craig Kent, who mentored me through my graduate study and postdoctoral training. Not only did he allow me the maximal freedom to explore and learn new things (paid for by his grant $), but also the fact that he allowed me to learn through many mistakes and acknowledged the fact that hypotheses can be proven wrong most of the time. ■

LOOKING TO SERVE?

Help us identify opportunities for you by telling us your volunteer interests here.

Big Improvements and a Big Celebration for the AHA's Centennial

CONNECTING WITH THE CHAIR

Elizabeth Jackson
MD, MPH,
MBA, FACC, FAHA

This has been an exciting time for the American Heart Association, including the centennial celebrations. I first want to mention this is an excellent time to think about growing our membership. The AHA has recently revamped its membership portal to enhance the experience and engagement of its members. This development marks a significant step forward in how the AHA interacts with health care professionals, researchers, and advocates dedicated to the fight against heart disease and stroke. The new portal aims to provide a comprehensive, user-friendly platform that facilitates access to valuable resources, networking opportunities and professional development tools.

Key features of the new membership portal include a personalized dashboard. This central hub allows members to easily access the information and resources most relevant to their interests and professional needs. By tailoring content and recommendations based on user preferences and activity, the AHA ensures that each member receives a unique, customized experience.

This personalization helps members stay informed about the latest research, upcoming events, and continuing education opportunities that interest them. The portal also facilitates networking among members with advanced networking tools that allow members to connect with peers, mentors, and industry leaders. Members can join specialized forums, participate in discussion groups, and attend virtual networking events. These features foster a sense of community and collaboration, enabling members to share knowledge, discuss challenges, and develop new partnerships. Members can explore a vast library of scientific publications and stay up-to-date with the latest advancements in cardiovascular science. Additionally, the portal offers multimedia content such as webinars, podcasts, and video tutorials, providing diverse learning formats to suit different preferences and schedules. This rich repository of information supports the continuous education and professional development of AHA members. Lastly, professional development tools enhance the value of the AHA for all its members. Members can track their continuing medical education (CME) credits, access career resources, and participate in certification programs. The portal also features job boards and career centers, connecting members with employment opportunities in the cardiovascular field. By offering these tools, the AHA helps members advance their careers and stay competitive. These tools also include the integration of event registration, scheduling, and management into one convenient platform. Members can easily register for conferences, workshops, webinars, and access event materials and recordings.

On a related note, the AHA has enhanced its mentorship program. Many of you may have received a recent email asking you to log in and register as a mentor. Given the vast breadth of expertise within QCOR, we have a unique opportunity to become a major contributor to mentorship within the AHA. I hope you all will consider signing up for this important program.

I also want to highlight the AHA's centennial. As the AHA reflects on its past achievements, it also looks forward to the future with renewed dedication and innovative strategies to continue its mission.

Founded in 1924 by six cardiologists, the AHA has grown into one of the most influential health organizations worldwide. Over the past century, the AHA has been at the forefront of cardiovascular research and public health advocacy. One of its most notable contributions is the development of life-saving guidelines for cardiopulmonary resuscitation (CPR), which have been adopted globally and have saved countless lives. Additionally, the AHA's research funding has led to numerous medical breakthroughs, including the development of cholesterol-lowering drugs, advancements in surgical techniques, and the identification of risk factors for heart disease and stroke.

Throughout the centennial year, the AHA will host various commemorative events, including galas, scientific conferences, and community activities. A highlight will be the Centennial Gala, to honor key contributors to cardiovascular science and public health, featuring guest speakers, performances, and a historical retrospective. I hope many of you have the opportunity to participate in these events.

I also want to emphasize our public awareness campaigns. These campaigns focus on educating the public about the importance of cardiovascular health, promoting healthy lifestyle choices, and encouraging regular health screenings. The AHA will leverage digital media, social platforms, and traditional media to reach a broad audience. The centennial year will also see the launch of initiatives aimed at addressing emerging health challenges, such as the rise in obesity and diabetes, and the impact of environmental factors on heart health.

The AHA will continue to fund research aimed at understanding the underlying causes of cardiovascular diseases, developing new treatments, and improving patient outcomes. By supporting young scientists and fostering collaboration among researchers, the AHA hopes to drive scientific innovation and discovery. Recognizing the global burden of cardiovascular disease, the AHA is also committed to expanding its impact internationally. The organization will work with global partners to implement heart health programs, improve access to care, and promote policy changes that support cardiovascular health. Lastly, AHA is dedicated to addressing health disparities and ensuring that all individuals have access to quality cardiovascular care. Through targeted

initiatives, the organization aims to eliminate barriers to health care, promote health equity, and improve outcomes for underserved populations.

This is an opportune time to think about the future of QCOR. How can we grow our membership, personalize the QCOR experience, and increase our FAHAs? This is not only a time to honor a century of accomplishments but also a call to action for the future. As the AHA commemorates 100 years of pioneering work in cardiovascular health, it remains steadfast in its mission to build healthier lives, free of heart disease and stroke. The centennial year serves as a reminder of the progress made and the work still to be done, inspiring continued efforts to advance cardiovascular health for all. Our expertise in health service research is paramount to reducing CV mortality and morbidity, improving health equity, and training the next generation in high-quality CV care. I remain committed to seeing QCOR members engaged in AHA activities as never before. Please reach out to me if I can be of assistance in your ideas or activities related to QCOR. ■

A Look at ISC 2024

CONNECTING WITH THE CHAIR

Sepideh Amin-Hanjani
MD FAANS FACS FAHA

The International Stroke Conference (ISC) 2024 was held February 6-9 in Phoenix, Arizona, with a record professional attendance of more than 5,000. ISC 2024 included groundbreaking science and numerous abstract and invited sessions. A special note of thanks to ISC Program Chair Tudor Jovin, MD, FAHA, and Program Vice Chair Lauren Sansing, MD, MSc, FAHA, and their scientific program committee for developing an engaging program that cements ISC as the "must-not-miss" meeting in stroke and cerebrovascular disease. The noteworthy and popular sessions included

Tudor Jovin
MD, FAHA

- Navigating the Gray Zone: Debates on Patient Selection and Imaging in Endovascular Therapy
- Large Core Reperfusion–Why, When and How?
- Post-endovascular Treatment and Patient Management
- ARIA: Vascular Manifestations of Amyloid Immunotherapy
- Update on Neuroprotection in the Thrombectomy Era Including the Pre-hospital Phase
- Clearing the Path: Controversies in Treating Symptomatic Carotid Stenosis
- Fire in the Brain: Investigating Cerebrovascular Inflammation
- Game of Strokes

A total of 1,193 abstracts were presented:195 oral presentations, 240 moderated posters and 758 posters. A record number of Late-Breaking Science abstracts included severa-high impact clinical trials presented during the plenary sessions. Here are a few of the positive results presented:

- ZODIAC (Zero Degree Head Positioning in Acute Large Vessel Ischemic Stroke): The simple and practical intervention of keeping the head of the bed at zero degrees for patients with large vessel occlusion was found to reduce early neurological deterioration prior to thrombectomy based on randomized study of 92 patients across 12 U.S. hospitals.
- RESILIENT-Extend (Randomization of Endovascular Treatment with Stent-retriever and/or Thromboaspiration vs. Best Medical Therapy in Acute Ischemic Stroke due to Large Vessel Occlusion Trial in the Extended Time Window): Conducted across 12 public health facilities in Brazil, a randomized trial of 245 patients revealed better functional independence at 90 days in those randomized to mechanical thrombectomy over medical therapy alone within the extended window of up to 24 hours since last known well, based on standard CT and/or CTA alone.
- Golden Bridge II (Effect of an Artificial Intelligence-Based Clinical Decision Support System on Stroke Care Quality and Outcomes in Patients With Acute Ischemic Stroke: A Cluster-Randomized Clinical Trial): A clinical decision support tool based on AI evaluated in more than 20,000 patients in 77 hospitals across China, demonstrated a reduction in 90-day vascular events (ischemic stroke, hemorrhagic stroke, myocardial infarction or vascular death) compared to usual care.
  - SELECT 2 (Randomized Controlled Trial to Optimize Patient's Selection for Endovascular Treatment in Acute Ischemic Stroke): Longer term results of the SELECT 2 randomized trial confirmed the one-year efficacy of thrombectomy in patients with large core ischemic stroke with better functional independence, and quality of life scores in several domains.

A trio of studies reported positive results from middle meningeal artery (MMA) embolization in chronic subdural hematomas, findings that are likely to definitively change clinical practice and impact the future management of this common disease.

- EMBOLISE (Embolization of the Middle Meningeal Artery With OnyxTM Liquid Embolic System in the Treatment of Subacute and Chronic Subdural Hematoma): In this randomized study of 400 patients across 39 U.S. centers, MMA embolization as an adjunct to surgery significantly reduced recurrence or progression requiring re-operations.
- MAGIC-MT (Managing Non-Acute Subdural Hematoma Using Liquid Materials: A Chinese Randomized Trial of Middle Meningeal Artery Treatment): In this study of 722 patients across 31 centers in China, patients were randomized to MMA embolization with or without surgery compared to surgery alone, finding a reduced rate of recurrence/ progression with embolization.
- STEM (The Squid Trial for the Embolization of the MMA for the treatment of CSDH): MMA embolization showed benefit compared to either medical or surgical therapy alone in this trial of 310 patients conducted at centers in the U.S. and Europe.

This year's ISC also featured the first member welcome reception and provided a great opportunity to catch up with national and international colleagues and to engage with Stroke Council leadership.

Planning is already well under way for ISC 2025. Although session submissions have closed, nominations for the following ISC 2025 awards remains open until August 7:

- **Edgar J Kenton III Lecture:** Recognizes lifetime contributions to the investigation, management, mentorship and community service in the field of race-ethnic stroke disparities or related disciplines.
- **David G Sherman Lecture:** Recognizes lifetime contributions to investigation, management, mentorship and community service in the stroke field.
- **Ralph L. Sacco Outstanding Stroke Research Mentor Award Lecture:** Recognizes outstanding achievements in the mentoring of future generations of researchers in the field of cerebrovascular disease.

- **Thomas Willis Lecture:** Recognizes contributions to the investigation and management of stroke in basic science
- William M Feinberg Award for Excellence in Clinical Stroke:
  - Recognizes significant contributions to the investigation and management of stroke in clinical science

Nomination criteria and additional information can be found here.

The abstract submission site for ISC 2025 is also open until August 20; guidelines and more information can be found here.

Plan to submit your abstracts early because there will be no deadline extension.

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