



# QCOR Presidential Address

## Bob Harrington, AHA President-Elect

Hello, and welcome to the QCOR Council Dinner. On behalf of the science leadership of the American Heart Association, we're so glad you're here. Thank you so much for joining us here in Arlington and for sharing your ideas, your expertise and your passion for knowledge advancement. By building knowledge, we move closer each day to new solutions that impact patients' lives in meaningful and enduring ways.

I'd like to give special recognition and thanks to the Quality of Care and Outcomes Research Conference Planning Committee under the leadership of Drs. Adrian Hernandez and Michael Ho, Chair and Vice-Chair. Please join me in thanking them and the entire planning committee for their hard work in putting together this outstanding conference.

I'd like to give my sincerest thanks to the QCOR Council's outstanding leaders: Dr. Tracy Wang is Chair of the Quality of Care and Outcomes Research Council, and Dr. William Borden is Vice-Chair.

Our program features over 30 invited presentations and more than 200 abstract presentations. I hope you've taken in as much as you can today. Don't miss the great programming for day 2 of the conference.

It's been a great year for the QCOR Council, which currently has more than 600 active members. Nearly 100 are international members. And you've elected 116 Fellows of the American Heart Association.

The QCOR Council has a prominent role in advancing the American Heart Association mission and your members have received some incredible national honors.

Looking across the entire association, our professional membership continues to grow. We now have more than 33,000 members representing 68 specialties and 121 countries.

The association remains steadfast in its belief that funding the best research and investing in new research paradigms is the foundation to overcome the devastating impact of cardiovascular diseases and stroke. I'm very proud that AHA remains the

largest not-for-profit funder of CVD and Stroke research outside of the federal government – with \$160.7 million in new research funded last year. Almost 2,000 active awards are currently funded totaling \$441.8 million and more than \$4.3 billion in research funding since 1949.

AHA Strategically Focused Research Networks have received \$148 million to date. The newest, the Atrial Fibrillation network, began in July 2018. With this network, AHA was fortunate to also partner with PCORI and Joe and Linda Chlapaty, who allowed us to support two additional centers within this network. The next network, focused on Arrhythmias and Sudden Cardiac Death, will be peer reviewed this spring to begin on July 1, 2019. The two networks that will begin in fiscal year 2019–20 will focus on Health Innovation and Technology (wearables, apps, machine learning, artificial intelligence, etc.) and Cardiometabolic Health with a focus on diabetes. These two join the nine existing Strategically Funded Research Network. Despite decreases in heart disease and stroke mortality, the burden of disease remains high.

The Statistical Update, chaired by Dr Emelia Benjamin, published annually in *Circulation*, is a major source for monitoring both cardiovascular health and disease in the population, with a focus on progress toward the American Heart Association’s 2020 Impact Goals. Every year, the AHA, NHLBI, CDC and other government agencies work together to conduct a review of the most current national data available on heart disease, stroke, and other vascular diseases and present their findings in this single, annual report.

Dr. Nallamothu continues to lead the AHA journal that focuses on cardiovascular quality and outcomes. The journal’s content has garnered the following impressive statistics in the past year: more than 662 Million media impressions, 736,000 article downloads, and more than 10,500 Twitter followers. In the fall of 2018, a new “Assistant Reviewer Program” was launched. The program, which is for trainees and early career Investigators, offers guided learning of the journal’s review process. It also provides experience as a journal reviewer so that a reviewer history can be built up.

QCOR and our other AHA councils are working hard to drive us closer to our 2020 Impact Goal of reducing cardiovascular diseases and stroke deaths among all Americans by 20 percent, while reducing deaths from cardiovascular disease and stroke by 20 percent.

We had ambitious goals! And we have reasons for optimism. The overall change for CV health is 3.82%; while non-Hispanic Blacks and Hispanics seem to have made positive progress, we don’t see these positive changes in the non-Hispanic White population. Overall change in cardiovascular health is 3.82%. That breaks down to:

- 2.27 percent for non-Hispanic whites
- 11.07 percent in non-Hispanic blacks

- 2.15 percent Hispanics.

We are happy to see that the recent increases in mortality from all cardiovascular diseases was not a trend. Recent 2016 mortality data released in December 2018 suggests that rates are back on the decline. To date, we are at a 15% reduction in mortality from all cardiovascular diseases. If this downward trend stays on track, we are moving in the right direction toward achieving the 2020 goal of a 20% reduction. When we look at age-adjusted total CVD mortality rates by race and ethnicity from 2007 to 2017, we see:

- Non-Hispanic white: 13.2% decrease
- Non-Hispanic black: 18.1%
- Hispanic: 20.5%
- Non-Hispanic American Indian/Alaska Native: 12.7%
- Non-Hispanic Asian/Pacific Islander: 19.2%

Overall, a very small increase was observed in age-adjusted stroke mortality rates between 2016 and 2017. Although this increase was not statistically significant, this increase has slowed our progress.

We made progress in age-adjusted coronary heart disease mortality rates by race and ethnicity. The breakdown:

- Non-Hispanic white: 26.5% decrease
- Non-Hispanic black: 31.5% decrease
- Hispanic: 34.2% decrease
- Non-Hispanic American Indian/Alaska Native: 25.0% decrease
- Non-Hispanic Asian/Pacific Islander: 29.0% decrease

In addition to developing new and updated tools and resources to broaden the reach of the Cholesterol and National Physical Activity Guidelines in 2018, the AHA continued to enjoy great successes with our programs to bring our lifestyle-based programs into the community.

In 2018, the American Heart Association launched its Kids Heart Challenge Program. Formerly known as Jump Rope for Heart, Kids Heart Challenge is a suite of in-school events designed to prepare students for future success both physically and emotionally. The Kids Heart Challenge will teach students heart healthy habits, core physical education skills and social responsibility while empowering them to make their community a healthier place to learn and play.

2018 also saw the launch of the Check. Change. Control. Cholesterol Recognition Program, where the AHA highlights healthcare organizations for their commitment in improving the health of their patients through high quality Cholesterol and overall

Risk Factor Management with the ultimate goal of reducing death and disability in the number of Americans who have heart attacks and strokes.

In 2018, AHA and the American Diabetes Association, along with industry leaders also launched the collaborative initiative Know Diabetes by Heart to reduce cardiovascular deaths, heart attacks and strokes in people living with type 2 diabetes. Know Diabetes by Heart seeks to comprehensively combat the national public health impact of type 2 diabetes and cardiovascular disease by:

- Raising awareness and understanding of the link between diabetes and cardiovascular disease.
- Positively empowering people to better manage their risk.
- Supporting health care providers in educating and engaging their patients.

The Association is also increasing our focus on impacting health in local communities. As you saw by our progress to our 2020 goal, we have our work cut out for us. I know we're up to the challenge but it's going to take all of us, not just those of you here today, working together to reverse the negative trends we're seeing and build cultures of health in our communities.

Our volunteers and staff are partnering with community leaders to address key environmental factors that are affecting health, such as:

- Economic stability
- Access to healthcare
- Societal influences
- Neighborhood
- Level of education.

Each of us can volunteer to support this effort by helping ensure the communities we live and work in have access to:

- Healthy foods
- Safe places to get active
- Smoke-free air
- Educational opportunities, and
- Affordable, quality healthcare.

I'd encourage all of us to get involved in the AHA in new and different ways than we may be used to, here are a few quick ways that you can help drive the AHA's mission today:

- Volunteer for local AHA events such as your local Heart Walk, Heart Ball, Go Red For Women Luncheon, etc.

- Become involved with your local or Affiliate Board or Committee
- Sign up to be a You're The Cure advocate
- Volunteer to be an AHA spokesperson for events, mission programs and fundraising efforts

That's just a small glimpse of some of the highlights of what's happening in QCOR and across the AHA. Thank you again for joining us and have a great conference!

