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ABOUT HFSA / LEADERSHIP

About the Heart Failure Society of America

The Heart Failure Society of America (HFSA) is a multidisciplinary organization working to improve and expand heart failure care through collaboration, education, research, innovation, and advocacy. HFSA members include physicians, scientists, nurses, nurse practitioners, pharmacists, and patients.

2020 HFSA
Board of Directors

2020 Elected Officers

President ................................. Biykem Bozkurt, MD, PhD, FHFA
President-Elect .......................... Nancy M. Albert, RN, PhD, FHFA
Secretary ................................. John Teerlink, MD, FHFA
Treasurer ................................. Corrine Y. Jurgens, RN, PhD, FHFA
Immediate Past President ........... Randall C. Starling, MD, MPH, FHFA

Board Members

Cynthia Chauhan, MSW
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Mark Drazner, MD, MSc, FHFA
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David Lanfear, MD, MS, FHFA
Colleen McIlvennan, DNP, ANP, FHFA
J. Herb Patterson, PharmD, FHFA
Wai Hong Wilson Tang, MD, FHFA

2020 Annual Scientific Meeting
Program Committee

Co-Chairs

Javed Butler, MD, MPH, MBA
Sandra B. Dunbar, RN, PhD
Peter Liu, MD, FRCPC
J Herb Patterson, PharmD, FHFA

Committee Members

Jeffrey Alexis, MD
Larry Allen, MD MS, FHFA
Arvind Bhimaraj, MD
Horng Chen, MD
Julie Creaser, RN, MSN
Anita Deswal, MD, MPH, FHFA
Robert Didomenico, PharmD
Katherine E. Di Palo, PharmD, BCACP, BCGP
Eiran Gorodeski, MD MPH
Justin Grodin, MD MPH
Doug Jennings, PharmD
Peggy Kirkwood, RN MSN
Liviu Klein, MD
Walter J. Koch, PhD
Alanna Morris, MD, MSc, FHFA
Srinivas Murali, MD
Gurusher Panjrat, MD (MBBS)
Mariann R. Piano, PhD, RN, FAHA, FAAN
Bunny Pozehl, PhD, RN
Julie Rosenthal, MD
Douglas Sawyer, MD, PhD
Kristen Sethares, PhD, RN, CNE, FAHA
Palak Shah, MD MS, FHFA
Marc Simon, MD
Amanda Vest, MD FHFA (MBBS)
Joseph C. Wu, MD, PhD
Virtual Meeting Platform
All meeting activities will be held via the Virtual Meeting Platform, hosted by MedscapeLIVE! and available at virtual.hfsa.org.

Timing
All schedules are listed in Eastern Daylight Time.

Virtual Exhibit Hall and ePoster Hall Hours
Exhibit Halls A and B
Access all Exhibit Halls through the ePoster and Exhibit Hall Lobby.

The Exhibit Halls and Poster Hall are accessible at any time for attendees.

Exhibit Hall A & B .......................... Open 24/7
(live Representatives available during Industry Chat Event times)

Poster Hall .......................... Open 24/7
(live Poster Presenters available during Poster Chat Event times)

Live ePoster Chats and Industry Chats
We strongly encourage attendees to visit the Exhibit and Poster Halls during the Industry and Poster Chat event times. A LIVE representative and poster presenter will be available to answer any questions.

Saturday, October 3  ......................... 1:15 PM – 2:45 PM
Sunday, October 4  ......................... 1:15 PM – 2:45 PM

Networking Activities
All registered attendees are welcome to join Networking Activities. NOTE: Speed Mentoring requires pre-registration and is currently at capacity. To attend a networking activity, visit the Networking Lounge.

• HF Team Reception – Pharmacy
  Thursday, October 1 | 7:15 PM – 8:15 PM | Scientific Sessions Theater C

• President’s Reception
  Saturday, October 3 | 5:30 PM – 6:00 PM | Networking Lounge

• Speed Mentoring
  Sunday, October 4 | 6:00 PM – 7:00 PM | Networking Lounge

• HF Team Reception – Nurse
  Monday, October 5 | 7:15 PM – 8:15 PM | Networking Lounge

Faculty and Abstract Reviewers
A full list of abstract reviewers can be found in the Resources Center on the Virtual Meeting Platform.

Screen Recording and Photography Policy
HFSA staff members, HFSA photographers, HFSA videographers, pre-approved videographers, and pre-approved photographers, are the only ones authorized to photograph and film events and virtual educational sessions throughout the meeting. Any photographs, screen shots, screen recordings, and videos taken by our HFSA Staff and HFSA photographers and videographers are used exclusively by HFSA for promotional purposes and continuing education offerings. They may be used in the society’s publications, website, social media accounts, programs, or other HFSA promotional materials. If you are attending a virtual session and you do not wish to be photographed or recorded, please identify yourself via email to HFSA staff at LPoko@hfsa.org.

Required Technology
All attendees are highly encouraged to use Google Chrome or Firefox to access the Virtual Meeting Platform. Important Reminders:

• Access the virtual platform link on Google Chrome (preferred) or Firefox.
• Log off VPN or DWS / DB network. This will greatly improve your connection.
• A hardwired internet connection is best, if possible, but not necessary.

Questions
During live hours throughout the duration of the meeting, attendees will be able to ask questions about the meeting in the virtual HFSA Help Desk, accessible via a link in the main, top-level menu or the desk in the virtual lobby.

Technical questions about the platform, including questions about required technology, live cast delays, freezing issues, etc., are best answered by the Medscape team. Attendees can click the button in the lower right-hand side of the screen for assistance.

Liability Statement
The Heart Failure Society of America (HFSA) cannot accept, and hereby specifically disclaims, any liability for death, injury, any loss, cost or expense suffered or incurred by any person if such loss is caused by, arises from or results from the act, default or omission of any person other than an employee or agent of HFSA. In particular, neither HFSA nor its agents can accept, and hereby specifically disclaims, any liability for losses arising from, caused by, or resulting from, the provision or non-provision of services provided by the virtual meeting platform. HFSA is not able to warrant and does not warrant that a particular person will appear as a speaker. As a condition to any participation in or attendance at the Annual Scientific Meeting or any function associated or affiliated herewith, each attendee and participant accepts the foregoing disclaimer.
ATTENDEE CONTESTS AND RAFFLES

Exhibitor Passport Game
Compete with your fellow attendees for prizes while learning about the industry’s latest treatments, technologies and products in the HFSA 2020 Virtual Exhibit Hall!

SCORING:
To accumulate points:

- Visit an Exhibit Booth for at least 3 minutes* = 5 points
- View a Meeting Resource = 2 points
- Update Attendee Profile = 5 points
- Update Profile Photo = 2 point

The leader board can be seen in the Networking Lounge at any time during the meeting. * 5 points per booth maximum

PRIZES:
Two (2) Daily winners every day of the conference:

- **Daily Leaderboard Winner.** The attendee with the most points at the end of each day will win a 2021 HFSA Membership and a $200 Amazon gift card. 
  Note: If multiple attendees share the same high score, a winner will be randomly selected from the group.

- **Daily Lottery Winner.** A randomly selected attendee from the leader board will win a $100 Amazon gift card! Attendee must have at least 10 points to be entered in the drawing.

Two (2) Grand Prize winners

- **Grand Prize Leaderboard Winner.** The attendee with the most points at the end of the 7-day meeting will win 2021 HFSA Membership, FREE registration to the 2021 Annual Scientific Meeting, and a $350 Amazon gift card!
  Note: If multiple attendees share the same high score, a winner will be randomly selected from the group.

- **Grand Prize Lottery Winner.** A randomly selected attendee from the leader board will win 2021 HFSA Membership, FREE registration to the 2021 Annual Scientific Meeting, and a $250 Amazon gift card! Attendee must have at least 25 points to be entered in the drawing.

Industry Gateway Game
Attend an Industry Theater session and you can win up to $400 in prizes and one $500 grand prize!

HOW TO PLAY:

- Attend any Industry Theater session

PRIZES:

- **LIVE Industry Theater Attendee Winners.** There will be a total of 16 Industry Expert theater sessions during the live meeting. One (1) winner will be randomly selected from the attendee list after EACH live Industry Theater session. **Winners will receive a $25 Amazon gift card.** Attendees can win multiple times!

  TIP: Attend all 16 Industry Theater session = 16 chances to win a $25 Amazon gift card. Plus more chances to win the Industry Theater Gateway Grand Prize!

- **Industry Theater Gateway Grand Prize Winner.** One (1) winner will be randomly drawn from a combined list of all Industry Theaters attendees on October 30th. **Winner will receive a $500 Amazon gift card!**

  TIP: More sessions you attend live and OnDemand = More chances to win!

No HFSA Annual Scientific Meeting sponsorship revenue is being utilized to fund prizes for attendee contests and raffles. All prizes are being funded solely by the Heart Failure Society of America.
Supporting Companies

Meeting Sponsors

PATRON
Cytokinetics, Inc
Novartis Pharmaceuticals Corporation

VIP
Abbott
Akcea Therapeutics
Alnylam Pharmaceuticals
Amgen Inc.

PREMIUM
Abiomed
Boehringer Ingelheim Pharmaceuticals, Inc./Lilly USA
CMP Pharma
Eidos Therapeutics
Impulse Dynamics USA, Inc.
Medtronic
Pfizer
scPharmaceuticals

BENEFACCTOR
CVRx
Getinge
Merck & Co. Inc.

Industry Theaters (No CEUs)
Abbott
Abiomed
Akcea Therapeutics
Alnylam Pharmaceuticals
Amgen, Inc. (2)
Boehringer-Ingelheim Pharmaceuticals, Inc. / Lilly USA
CMP Pharmaceuticals
Cytokinetics, Inc. (2)
Eidos Therapeutics
Impulse Dynamics USA, Inc.
Medtronic
MyoKardia
Novartis Pharmaceuticals Corporation (2)
Pfizer, Inc.

Corporate Members

GOLD LEVEL
Amgen, Inc.
AstraZeneca Pharmaceuticals
Cytokinetics, Inc.
Novartis Pharmaceuticals Corporation
Pfizer, Inc.

SILVER LEVEL
Abiomed
Akcea Therapeutics
Alnylam Pharmaceuticals
Boehringer Ingelheim Pharmaceuticals, Inc. / Lilly USA
Daiichi-Sankyo
Merck & Co. Inc.

BRONZE LEVEL
Abbott
Bayer
Boston Scientific
Getinge
Janssen
Medtronic
MyoKardia
Otsuka
Relypsa, Inc, a Vifor Pharma Company
scPharmaceuticals

INTRODUCTORY LEVEL
Eidos Therapeutics
Stealth Biotherapeutics

CE Satellite Symposia

Supported by independent educational grants from:
Akcea Therapeutics
Alnylam Pharmaceuticals
AstraZeneca Pharmaceuticals
Boehringer Ingelheim Pharmaceuticals, Inc./Lilly USA
Eidos Therapeutics
Merck & Co. Inc.
Pfizer
The Amyloidosis Research Consortium

CE Workshop

Supported by an in-kind donation from Abbott, ActiCare, Medtronic, Eko Devices, Inc.
2020 Award Recipients

2020 Lifetime Achievement Award

Supported by Cytokinetics

John C. Burnett, Jr., MD
The HFSA Lifetime Achievement Award is presented by the Executive Council of the HFSA to recognize a lifetime body of work by an individual who has made a significant and sustained contribution to the field of heart failure.

Visit hfsa.org/annualscientificmeeting/award-winners for complete biography.

2020 HFSA Nursing Research Leadership Award

Supported by Cytokinetics

Bunny Pozehl, PhD, APRN-NP, FHSA, FAHA, FAAN
HFSA’s Nursing Research Leadership Award honors those with extraordinary achievement and excellence in nursing science that improves outcomes of patients with heart failure.

Visit hfsa.org/annualscientificmeeting/award-winners for complete biography.

2020 HFSA Nursing Clinical Excellence Leadership Award

Sonja D. Brune, MSN, APRN, CCNS, CHFN, AACC
HFSA’s Nursing Clinical Excellence Leadership Award honors and supports clinical nursing excellence by a registered nurse who works directly with heart failure (HF) patients, their families, and other nurses providing HF services.

Visit hfsa.org/annualscientificmeeting/award-winners for complete biography.
# Program at a Glance

*All times in Eastern Daylight Time (EDT)*

<table>
<thead>
<tr>
<th>Time</th>
<th>Event</th>
<th>Location</th>
</tr>
</thead>
<tbody>
<tr>
<td>4:30 PM – 5:15 PM</td>
<td>IT  The Forgotten Ventricle: The Importance of Protecting the Right Heart (No CEUs)</td>
<td>Industry Theater B</td>
</tr>
<tr>
<td></td>
<td>Sponsored by Abbott</td>
<td></td>
</tr>
<tr>
<td>4:30 PM – 5:30 PM</td>
<td>IT  Reverse Cardiac Remodeling in Heart Failure (Medical) (No CEUs)</td>
<td>Industry Theater A</td>
</tr>
<tr>
<td></td>
<td>Sponsored by Novartis Pharmaceuticals Corporation</td>
<td></td>
</tr>
<tr>
<td>5:30 PM – 6:00 PM</td>
<td>Break</td>
<td></td>
</tr>
<tr>
<td>6:00 PM – 7:00 PM</td>
<td>SS/MOC/CPE/NPharm  COVID-19: Lessons Learned in HF and Living with the New Normal</td>
<td>Scientific Session Theater A</td>
</tr>
<tr>
<td></td>
<td>SS/CPE/NPharm  To Right A Wrong in HF</td>
<td>Scientific Session Theater B</td>
</tr>
<tr>
<td></td>
<td>SS  Clinical Conundrums - Multidisciplinary Case Discussion</td>
<td>Scientific Session Theater C</td>
</tr>
<tr>
<td>7:00 PM – 7:15 PM</td>
<td>Break</td>
<td></td>
</tr>
<tr>
<td>7:15 PM – 8:15 PM</td>
<td>SS/MOC/CPE/NPharm  Beyond Socioeconomic &amp; Access To Care: The Clinical Imperative for Understanding Racial HF Differences and Disparities (Joint Session ABC)</td>
<td>Scientific Session Theater A</td>
</tr>
<tr>
<td></td>
<td>SS/CPE/NPharm  Heart Meets Kidney</td>
<td>Scientific Session Theater B</td>
</tr>
<tr>
<td></td>
<td>SS  Future HF Trials</td>
<td>Scientific Session Theater C</td>
</tr>
<tr>
<td>8:15 PM – 8:30 PM</td>
<td>Break</td>
<td></td>
</tr>
<tr>
<td>8:30 PM – 9:15 PM</td>
<td>IT  Understanding the Interconnectivity of the CV, Renal, &amp; Metabolic Systems (No CEUs)</td>
<td>Industry Theater B</td>
</tr>
<tr>
<td></td>
<td>Sponsored by Boehringer Ingelheim Pharmaceuticals, Inc. / Lilly US</td>
<td></td>
</tr>
<tr>
<td>8:30 PM – 9:30 PM</td>
<td>IT  Selecting a First-Choice Therapy for Systolic HF: Meeting the Burden of Proof (Commercial) (No CEUs)</td>
<td>Industry Theater A</td>
</tr>
<tr>
<td></td>
<td>Sponsored by Novartis Pharmaceuticals Corporation</td>
<td></td>
</tr>
</tbody>
</table>
### Thursday, October 1

<table>
<thead>
<tr>
<th>Time</th>
<th>Session</th>
<th>Title</th>
<th>Location</th>
</tr>
</thead>
<tbody>
<tr>
<td>4:30 PM – 5:15 PM</td>
<td>IT</td>
<td><strong>Thoracotomy Outside the OR: Impact on LVAD Programs and Patients</strong> <em>(Commercial) (No CEUs)</em>&lt;br&gt; <em>Sponsored by Medtronic</em></td>
<td>Industry Theater A</td>
</tr>
<tr>
<td>4:30 PM – 5:30 PM</td>
<td>IT</td>
<td><strong>hATTR Amyloidosis: More than a Mutation</strong> <em>(Medical) (No CEUs)</em>&lt;br&gt; <em>Sponsored by Alnylam Pharmaceuticals</em></td>
<td>Industry Theater B</td>
</tr>
<tr>
<td>4:30 PM - 5:45 PM</td>
<td>SAT</td>
<td><strong>Navigating the Evolving Paradigm in Heart Failure: The Emerging Impact of SGLT2 Inhibition</strong> <em>(CEUs)</em>&lt;br&gt; <em>Supported through an independent educational grant from AstraZeneca</em></td>
<td>Satellite Symposium Theater</td>
</tr>
<tr>
<td>5:45 PM – 6:00 PM</td>
<td></td>
<td>Break</td>
<td></td>
</tr>
<tr>
<td>6:00 PM – 7:00 PM</td>
<td>SS/MOC/CPE</td>
<td><strong>Update on Medical Treatment Strategies in HF</strong>&lt;br&gt; <strong>Supporting the HF Workforce: Optimizing Physical and Mental Wellness Among HF Providers</strong> <em>(Joint Session with AAHFN)</em></td>
<td>Scientific Session Theater B</td>
</tr>
<tr>
<td>6:00 PM – 8:30 PM</td>
<td>SS</td>
<td><strong>Excellence in Translation Science: Fast Track Discovery to Application (No CEUs)</strong></td>
<td>Scientific Session Theater A</td>
</tr>
<tr>
<td>7:15 PM – 8:15 PM</td>
<td>SS/MOC/CPE/NPharm</td>
<td><strong>HF and the End of Life – Opportunities for Innovation and Collaboration at the Intersection of Cardiology and Palliative Care</strong></td>
<td>Scientific Session Theater B</td>
</tr>
<tr>
<td>8:15 PM – 8:30 PM</td>
<td>NET</td>
<td><strong>HF Team Reception – Pharmacy</strong></td>
<td>Networking Lounge</td>
</tr>
<tr>
<td>8:30 PM – 9:15 PM</td>
<td>IT</td>
<td><strong>Highlighting Transthyretin Amyloid Cardiomyopathy (ATTR-CM): Knowing the Signs and Symptoms and How to Diagnose and Treat (No CEUs)</strong>&lt;br&gt; <em>Sponsored by Pfizer</em></td>
<td>Industry Theater A</td>
</tr>
<tr>
<td>8:30 PM – 9:15 PM</td>
<td>IT</td>
<td><strong>The Cardiac Sarcomere in HFrEF and HCM: From Bedside to Bench (Medical) (No CEUs)</strong>&lt;br&gt; <em>Sponsored by Cytokinetics, Inc.</em></td>
<td>Industry Theater B</td>
</tr>
</tbody>
</table>
## Program at a Glance [continued]

*All times in Eastern Daylight Time (EDT)*

SS = Scientific Session  
MOC = MOC  
CPE = Pharmacy Credit  
NPharm = Nursing Pharmacology  
IT = Industry Theater  
WRK = Workshop  
NET = Networking

### Friday, October 2

<table>
<thead>
<tr>
<th>Time</th>
<th>Location</th>
<th>Event Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>4:30 PM – 5:30 PM</td>
<td>IT</td>
<td><strong>IN TOUCH WITH PATIENT NEEDS: A Treatment Option for the Polyneuropathy of Hereditary ATTR Amyloidosis</strong> Commercial and No CEUs. Sponsored by Akcea Therapeutics</td>
</tr>
<tr>
<td>4:30 PM – 5:45 PM</td>
<td>SAT</td>
<td><strong>HFrEF: Challenges, Unmet Needs and Emerging Therapies</strong> CEUs. Supported by an independent medical education grant from Merck</td>
</tr>
<tr>
<td>6:00 PM – 7:00 PM</td>
<td>SS/CPE</td>
<td>2020 and Beyond: Background Medical Therapy for Clinical Trials. (FDA Special Session)</td>
</tr>
<tr>
<td>6:00 PM – 7:00 PM</td>
<td>SS/MOC/CPE</td>
<td>Contemporary Challenges In Heart Transplantation: A New Decade, New Opportunities</td>
</tr>
<tr>
<td>6:00 PM – 7:00 PM</td>
<td>SS/CPE/NPHARM</td>
<td>HF Hospitalizations and Transitions of Care: It Takes A Village</td>
</tr>
<tr>
<td>7:00 PM – 7:15 PM</td>
<td></td>
<td>Break</td>
</tr>
<tr>
<td>7:15 PM – 8:15 PM</td>
<td>SS</td>
<td>JNC New Investigator Award: Basic, Translational and Clinical</td>
</tr>
<tr>
<td>7:15 PM – 8:15 PM</td>
<td>SS</td>
<td>Nurse Investigator Award: Research and Clinical</td>
</tr>
<tr>
<td>7:15 PM – 8:15 PM</td>
<td>SS</td>
<td>Friday Plenary: Impact of Music in HF – A Live Panel Discussion</td>
</tr>
<tr>
<td>8:30 PM – 9:15 PM</td>
<td>IT</td>
<td><strong>TTRials and TTRibulations: Understanding Healthcare Challenges and Barriers in Underserved ATTR-CM Patients</strong> Medical and No CEUs. Sponsored by Eidos Therapeutics</td>
</tr>
<tr>
<td>8:30 PM – 9:30 PM</td>
<td>IT</td>
<td><strong>Getting to The Heart of Managing Heart Failure</strong>  1. Different Pathways in HFrEF  2. Addressing Unmet Medical Needs in HFrEF (Medical) No CEUs. Sponsored by Amgen Inc.</td>
</tr>
<tr>
<td>Time</td>
<td>Venue</td>
<td>Event Description</td>
</tr>
<tr>
<td>-------------------</td>
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<td>----------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>8:30 AM – 9:45 AM</td>
<td>IT</td>
<td>5th Annual Symposium Managing the Economic Challenges in the Treatment of Heart Failure (Medical) (No CEUs)</td>
</tr>
<tr>
<td>9:45 AM – 10:00 AM</td>
<td></td>
<td>Break</td>
</tr>
<tr>
<td>10:00 AM – 11:00 AM</td>
<td>SS</td>
<td>Plenary Session: Healthcare Future 360°</td>
</tr>
<tr>
<td>11:00 AM – 11:30 AM</td>
<td>SS</td>
<td>President’s Address and Lifetime Achievement Award</td>
</tr>
<tr>
<td>11:30 AM – 11:45 AM</td>
<td></td>
<td>Break</td>
</tr>
<tr>
<td>11:45 AM – 1:15 PM</td>
<td>SS/CPE/NPHARM</td>
<td>Management of HF in Rural/Frontier Areas: Challenges and Potential Solutions for Clinical Practice and Research</td>
</tr>
<tr>
<td>1:15 PM – 2:45 PM</td>
<td>SAT</td>
<td>HF and T2D: Two Peas in a Pod (CE)</td>
</tr>
<tr>
<td>2:45 PM – 3:00 PM</td>
<td></td>
<td>Break</td>
</tr>
<tr>
<td>3:00 PM – 4:15 PM</td>
<td>SS/MOC/CPE/NPHARM</td>
<td>Unfolding Developments in the Care of Patients with TTR Cardiac Amyloidosis</td>
</tr>
<tr>
<td>4:15 PM – 4:30 PM</td>
<td></td>
<td>Break</td>
</tr>
<tr>
<td>4:30 PM – 5:30 PM</td>
<td>SS/CPE/NPHARM</td>
<td>Traversing Care and Guidelines for Patients with HF and Multiple Co-Morbidities</td>
</tr>
<tr>
<td>5:30 PM – 6:00 PM</td>
<td>NET</td>
<td>President’s Reception, Awards Recognition and Musical Mosaic</td>
</tr>
<tr>
<td>6:00 PM – 7:00 PM</td>
<td>SS/CPE</td>
<td>Knowing it When you See it: Defining Congestion and Decongestion</td>
</tr>
<tr>
<td></td>
<td>SS/CPE</td>
<td>When Social Determinants of Health Collide with HF Care and Treatment Decisions</td>
</tr>
</tbody>
</table>
**Program at a Glance [continued]**

*All times in Eastern Daylight Time (EDT)*

<table>
<thead>
<tr>
<th>Time</th>
<th>Session Type</th>
<th>Session Details</th>
<th>Location</th>
</tr>
</thead>
<tbody>
<tr>
<td>10:00 AM – 11:30 AM</td>
<td>SS/NPHARM</td>
<td>New Data and Learnings from VICTORIA Trial</td>
<td>Scientific Session Theater A</td>
</tr>
<tr>
<td></td>
<td>SS</td>
<td>INTERNATIONAL SESSION - Universal Definition of HF (Joint Session HFA ESC / JHFS / CHFSA)</td>
<td>Scientific Session Theater B</td>
</tr>
<tr>
<td></td>
<td>SS/MOC/CPE/NPHARM</td>
<td>Cardiogenic Shock in 2020: Evolving Definitions, Devices, and Delivery</td>
<td>Scientific Session Theater C</td>
</tr>
</tbody>
</table>
| 11:30 AM – 11:45 AM | Break
| 11:45 AM – 1:15 PM | SS/NPHARM    | DAPA-HF - One Year On                                                                              | Scientific Session Theater A    |
|                   | SS/CPE       | Women in HF Career Forum                                                                           | Scientific Session Theater B    |
|                   | SS/CPE/NPHARM| Cardiac Cachexia: Mechanisms, Measuring Muscle, and Managing Malnutrition                          | Scientific Session Theater C    |
| 1:15 PM – 2:45 PM | Live Poster Chats / ePosters + Moderated Poster Hall Viewing                                      | ePoster Hall                    |
|                   | Live Industry Chats / Exhibit Viewing                                                             | Exhibit Halls                   |
| 1:30 PM - 2:45 PM | SAT          | **Emerging Issues in Cardiac Amyloidosis: Moving from rare and fatal, to a treatable chronic cardiovascular disease (CEUs)** Supported by independent medical education grants from Pfizer, Alnylam Pharmaceuticals, Akcea Therapeutics Eidos Therapeutics, and the Amyloidosis Research Consortium | Satellite Symposium Theater     |
| 2:45 PM – 3:00 PM | Break
| 3:00 PM – 4:15 PM | SS/CPE/NPHARM| Targeting Therapy for HFpEF                                                                         | Scientific Session Theater A    |
|                   | WRK          | WORKSHOP: Remote Monitoring for HF - Specialized Devices and ICDs (No CEUs) Supported by an in-kind donation from Abbott, ActiCare, Medtronic, Eko Devices, Inc. | Scientific Session Theater B    |
|                   | SS/CPE       | Women and Gender Influences in HF                                                                   | Scientific Session Theater C    |
| 4:15 PM – 4:30 PM | Break
| 4:30 PM – 5:45 PM | SS/MOC/CPE/NPHARM | Understanding HF with Recovered Ejection Fraction                                                    | Scientific Session Theater A    |
|                   | SS/CPE/NPHARM| Integrated Omics in HF: Precision Medicine Highlights for HF Clinicians and Scientists              | Scientific Session Theater B    |
|                   | SS/MOC/CPE/NPHARM | The Intersection of Cardio-Oncology and Advanced HF: From Stage A to D                              | Scientific Session Theater C    |
| 5:45 PM – 6:00 PM | Break
| 6:00 PM – 7:00 PM | SS           | Atrial Fibrillation and HF: The Beat Goes On Joint Session with Canadian HF Society (CHFS)          | Scientific Session Theater A    |
|                   | SS           | Implementation: Systematic Strategies of Improving Care and Outcomes                                | Scientific Session Theater B    |
|                   | NET          | Speed Mentoring                                                                                     | Networking Lounge              |

hfsa.org/annualscientificmeeting

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### Monday, October 5

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| 4:30 PM – 5:15 PM| IT      | **Hope is Here – A Modern Approach for Heart Failure Treatment**       | **(Commercial) (No CEUs)**
|                  |         | Sponsored by Impulse Dynamics USA, Inc.                               | Industry Theater A                                                                              |
| 4:30 PM – 5:15 PM| IT      | **Acute Decompensated Heart Failure - The Role of Impella®**           | **(Commercial) (No CEUs)**
|                  |         | Sponsored by Abiomed                                                  | Industry Theater B                                                                              |
| 6:00 PM – 7:00 PM| SS      | Clinical-Pathological Cases (CPC): Stump the Professor                | Scientific Session Theater A                                                                     |
| 6:00 PM – 7:00 PM| SS/CPE  | Patient Pearls for Advanced HF: A View From the Other Side            | Scientific Session Theater B                                                                     |
| 6:00 PM – 7:00 PM| SS/NPHARM| Late Breaking Clinical Trials II (LBCT)                              | Scientific Session Theater C                                                                     |
| 7:00 PM – 7:15 PM| NET     | Break                                                                 | Networking Lounge                                                                                |
| 7:15 PM – 8:15 PM| SS/CPE  | Navigating the Early Career Waters: Pearls for Achieving Success -    | Scientific Session Theater A                                                                     |
|                  |         | What They Didn’t Teach You in Training                                |                                                                                                  |
| 7:15 PM – 8:15 PM| SS      | Paper-of-the-Year from Top HF Journals                               | Scientific Session Theater B                                                                     |

### Tuesday, October 6

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| 4:30 PM – 5:15 PM| IT      | **To Crush or Not to Crush: Challenges & Risks of Crushing/Compounding Medications In the New Era** | **(Commercial) (No CEUs)**
|                  |         | Sponsored by CMP Pharma                                             | Industry Theater A                                                                              |
| 6:00 PM – 7:00 PM| SS/WRK  | Management of the Medically Complex Patient                         | Scientific Session Theater A                                                                     |
| 6:00 PM – 7:00 PM| SS/MOC/CPE| The Economics of HF – Exploring Social Determinants and Financial Burden in the Care of Patients with HF | Scientific Session Theater B                                                                     |
| 6:00 PM – 7:00 PM| SS/CPE  | Dr. Alexa is In: Leveraging Technology in HF Care                    | Scientific Session Theater C                                                                     |
| 7:00 PM – 7:15 PM| NET     | Break                                                                 | Networking Lounge                                                                                |
| 7:15 PM – 8:15 PM| SS      | Research Network Update (No CEUs)                                    | Scientific Session Theater B                                                                     |
| 7:15 PM – 8:15 PM| SS      | TEACH Workshop                                                       | **(Joint Workshop CRF)**                                                                         |
Satellite Symposia (CE Available)

Navigating the Evolving Paradigm in Heart Failure: The Emerging Impact of SGLT2 Inhibition

**Thursday, October 1, 2020**
4:30 PM - 5:45 PM
Satellite Symposium Theater
Chair: Javed Butler, MD, MPH, MBA
Supported through an independent educational grant from AstraZeneca

HFrEF: Challenges, Unmet Needs and Emerging Therapies

**Friday, October 2, 2020**
4:30 PM - 5:45 PM
Satellite Symposium Theater
Chair: Justin A. Ezekowitz, MBBS, MSc
Supported by an independent medical education grant from Merck

HF and T2D: Two Peas in a Pod

**Saturday, October 3, 2020**
1:30 PM - 2:45PM
Satellite Symposium Theater
Moderator: James L. Januzzi Jr, MD
Supported by an independent medical education grant from Boehringer-Ingelheim Pharmaceuticals, Inc., and Lilly USA, LLC

Emerging Issues in Cardiac Amyloidosis: Moving from rare and fatal, to a treatable chronic cardiovascular disease

**Sunday, October 4, 2020**
1:30 PM - 2:45 PM
Satellite Symposium Theater
Co-Chair: Martha Grogan, MD
Co-Chair: Mathew S. Maurer, MD
Supported by independent medical education grants from Pfizer, Alnylam Pharmaceuticals, Akcea Therapeutics Eidos Therapeutics, and the Amyloidosis Research Consortium

Industry Theaters (No CEUs)

Through Industry Theaters, experts have an opportunity to provide clinical updates and educate attendees on current therapies, disease states, products, and pipeline activities. Sessions are formatted for learning and are a great way to receive higher level interaction and engagement with company representatives. Industry Theaters do not provide continuing education credit.

Reverse Cardiac Remodeling in Heart Failure (Medical)

**Wednesday, September 30, 2020**
4:30 PM – 5:30 PM
Industry Theater A

*Faculty*
James L. Januzzi, Jr., MD

*Description*
This program highlights the process of cardiac remodeling in heart failure and discusses the potential impact of guideline-directed medical therapy (GDMT) on its reversal. Mechanism and clinical implications of cardiac remodeling are described, along with evidence that reverse cardiac remodeling is associated with improved clinical outcomes in patients with heart failure with reduced ejection fraction.

*Sponsored by Novartis Pharmaceuticals Corporation*

The Forgotten Ventricle: The Importance of Protecting the Right Heart

**Wednesday, September 30, 2020**
4:30 PM – 5:15 PM
Industry Theater B

*Faculty*
Patrick McCann, MD
Meghan Emig, MPAS, PA-C
Terrie-Ann Benjamin, MD

*Moderator:* Jacob Abraham, MD

*Description*
During this webinar sponsored by Abbott, our expert panel will review innovative strategies related to heart failure management. The webinar will provide an overview of how pulmonary artery pressure monitoring can help to optimize guideline directed medical therapy and advise appropriate timing for advanced therapies across the disease continuum.

*Sponsored by Abbott*

Selecting a First-Choice Therapy for Systolic HF: Meeting the Burden of Proof (Commercial)

**Wednesday, September 30, 2020**
8:30 PM – 9:30 PM
Industry Theater A

*Faculty*
Javed Butler, MD, MPH, MBA

*Description*
This program will provide an overview of the interconnectivity of the cardiovascular, renal, and metabolic systems, the clinical implications of this interrelationship, and a multidisciplinary approach to care.

*Sponsored by Novartis Pharmaceuticals Corporation*
Highlighting Transthyretin Amyloid Cardiomyopathy (ATTR-CM): Knowing the Signs and Symptoms and How to Diagnose and Treat

Thursday, October 1, 2020
8:30 PM – 9:15 PM
Industry Theater A

Faculty
Jose Nativi-Nicolau, MD

Description
Transthyretin amyloid cardiomyopathy (or ATTR-CM) is a life-threatening, underrecognized, and underdiagnosed disease. This presentation will provide an overview of ATTR-CM, and highlight the signs and symptoms that raise suspicion of ATTR-CM, while introducing approaches to achieve a differential diagnosis. Illustrative patient cases will be used as examples of assessment through to diagnosis. The program will end with a review of the clinical data for an oral treatment option for ATTR-CM. 

Sponsored by Pfizer

The Cardiac Sarcomere in HFrEF and HCM: From Bedside to Bench (Medical)

Thursday, October 1, 2020
8:30 PM – 9:15 PM
Industry Theater B

Faculty
Adrian F. Hernandez, MD, MHS
David Alan Kass, MD
Sanjiv J. Shah, MD

Description
This program will provide an update on contemporary treatment in HFrEF and HCM, reviewing the neurohormonal dysfunction that occur in HFrEF and the functional defects of HCM as the targets of current therapy. The remaining unmet needs from a mechanistic perspective will be discussed, including an overview of the physiology of cardiac myocyte contractility. The basics of myocardial contraction at the level of the sarcomere and the influence of calcium regulation, myocardial energetics, and key proteins actin and myosin on myocardial contractility will be discussed. Additionally, the program will review how dysregulation of calcium flux, myocardial energetics and actin-myosin interaction plays a central role in the pathophysiology of each disease and, lastly, how calcitropy, mitotropy, and myotropy may modulate contractile function. 

Sponsored by Cytokinetics, Inc.
IN TOUCH WITH PATIENT NEEDS: A Treatment Option for the Polyneuropathy of Hereditary ATTR Amyloidosis
(Commercial)
Friday, October 2, 2020
4:30 PM – 5:30 PM
Industry Theater A
Faculty
Richard Wright, MD
Chafic Karam, MD
Description
Are your patients with hereditary ATTR amyloidosis also suffering from polyneuropathy? Our expert speakers will discuss the importance of recognizing the disease early and how a treatment option for the polyneuropathy of hereditary ATTR amyloidosis affects neuropathy progression and patient quality of life. We look forward to your participation!
Sponsored by Akcea Therapeutics

Getting to The Heart of Managing Heart Failure
Advancements of Clinical Utility of Quality of Life for the HFrEF Patient (Medical)
Friday, October 2, 2020
4:30 PM – 5:30 PM
Industry Theater B
Faculty
John A. Spertus, MD, MPH
Description
Dr Spertus gets to the heart of managing heart failure by providing an overview of the clinical utility of QoL and other PROs and the importance of embracing QoL discussions with patients and caregivers
Sponsored by Amgen Inc.

Getting to The Heart of Managing Heart Failure
1. Different Pathways in HFrEF
2. Addressing Unmet Medical Needs in HFrEF (Medical)
Friday, October 2, 2020
8:30 PM – 9:30 PM
Industry Theater A
Faculty
Marco Metra, MD
John R. Teerlink, MD
Description
Drs Metra and Teerlink get to the heart of managing heart failure. They provide an overview of Different pathways in HFrEF by focusing on the limitations of the current SoC that primarily target the neurohormonal system. They review unmet medical needs in HFrEF, including considerations for impaired renal function and low blood pressure and symptomatic hospitalized or recently hospitalized patients.
Sponsored by Amgen Inc.

TTRials and TTRibulations: Understanding Healthcare Challenges and Barriers in Underserved ATTR-CM Patients
(Medical)
Friday, October 2, 2020
8:30 PM – 9:15 PM
Industry Theater B
Faculty
Hanna A. Mazen, MD
Ahmad Masri, MD, MS
Description
“TTRials and TTRibulations: Understanding Healthcare Challenges and Barriers in Underserved ATTR-CM Patients”
The program shines a spotlight on disparities of care that may exist in the diagnosis and management of ATTR-CM as they apply to geographical, cultural, and socioeconomic challenges. These issues are further compounded by the COVID-19 pandemic.
This educational session will:
1. Evaluate the disparities that may exist in the context of ATTR-CM
2. Examine factors potentially contributing to these disparities
3. Brainstorm and discuss ways for addressing these disparities
Sponsored by Eidos Therapeutics

5th Annual Symposium Managing the Economic Challenges in the Treatment of Heart Failure (Medical)
Saturday, October 3, 2020
8:30 AM – 9:45 AM
Industry Theater A
Faculty
Larry A. Allen, MD, MHS
Nihar R. Desai, MD, MPD
Ileana L. Pina, MD, MPH. FAHA, FACC
Description
We invite you to join us on Saturday, October 3, 2020 from 8:30 AM to 9:45 AM EST for the 5th Annual Symposium, “Managing the Economic Challenges in the Treatment of Heart Failure”. Our distinguished faculty will discuss and engage the audience on many issues relevant to the care of patients with heart failure in modern practice. This symposium will provide the audience with an understanding of the current challenges and opportunities as heart failure care moves from volume based to value-based care in the era of increasing therapeutic complexity. In addition, the program will discuss the recent evolution of telehealth and remote care for heart failure from the perspectives of clinicians, patients, and payors, and the impact of remote medicine on clinical outcomes and costs of heart failure management. Finally, the program will conclude with an interactive panel examining the upcoming challenges of managing patients with more complex, severe and costly disease burden. We look forward to a lively and engaging discussion on these important topics; we hope that you will join us in this conversation.
Sponsored by Cytokinetics, Inc.
To Crush or Not to Crush: Challenges & Risks of Crushing/Compounding Medications In the New Era (Commercial)

**Tuesday, October 6, 2020**
4:30 PM – 5:15 PM  
Industry Theater A  

**Faculty**  
Rob Acetta, RPh, C-MTM, BCGP  
Caroline Stubbs  

**Description**  
Providers face numerous challenges and risks when it comes to crushing/compounding medications in this new world. Now there are fears of contamination or spreading of COVID-19, as well as ongoing concerns presented by PDPM, USP, NIOSH, OSHA and CMS. Learn why you need to be aware of the new standards for handling medications in your facility … from ordering to dispensing to disposition, and all the steps in between. See why crushing a pill can put you or your patient at risk. Experienced clinician and educator Rob Acetta will be the featured speaker and present must-hear advice.

*Sponsored by CMP Pharma*
Pharmacokinetics, urine output and natriuresis have been shown to be comparable between patients receiving Furoscix 80 mg administered subcutaneously over 5 hours compared to 2 doses of furosemide 40 mg administered intravenously over 2 minutes 2 hours apart. (Sica et al. 2018) The FREEDOM-HF (Furoscix Real-World Evaluation for Decreasing Hospital Admissions in Heart Failure) trial is an adaptive clinical trial where patients presenting to the emergency department with worsening HF due to congestion and fluid overload requiring parenteral diuresis and stable for discharge from the emergency department with close follow up will receive subcutaneous Furoscix outside of the hospital setting. The primary endpoint for FREEDOM-HF is the overall cost of care of subjects treated with Furoscix through 30 days post discharge from the ED for worsening HF signs and symptoms compared to costs derived from propensity matched controls treated in the hospital for 24-72 hours derived from administrative claims data. Secondary endpoints include the number and duration of hospital admissions, number and duration of HF-related hospital admissions, number of HF-related ED visits and number of HF-related clinic visits with in 30 days post discharge from the ED. In addition, change in health-related quality of life outcomes measured by KCCQ-12 questionnaire will be assessed. The sample size of the Furoscix cohort will be 34-75 subjects.

CTR-002
Avoiding Treatment in the Hospital with Furoscix for the Management of Congestion in Heart Failure - A Pilot Study

Acronym: AT HOME-HF PILOT
Supporter: scPharmaceuticals

Description: Furoscix is a pH neutral formulation of furosemide that is being developed for self-administration by patients in a home setting via a wearable, pre-programmed on-body subcutaneous delivery system. Pharmacokinetics, urine output and natriuresis have been shown to be comparable between patients receiving Furoscix 80 mg administered subcutaneously over 5 hours compared to 2 doses of furosemide 40 mg administered intravenously over 2 minutes 2 hours apart. (Sica et al. 2018) The AT HOME-HF (Avoiding Treatment in the Hospital with Furoscix for the Management of Congestion in Heart Failure) trial is a multicenter, randomized, open label, controlled study where patients presenting with worsening heart failure due to congestion and fluid overload requiring augmentation in diuretic therapy and meeting all study eligibility criteria will be randomized to receive Furoscix vs continued medical therapy outside of the acute care setting. The primary objective of the study is to provide pilot data on effectiveness and safety of Furoscix and inform a pivotal clinical trial. The primary endpoint is the improvement in a composite/combined morbidity/mortality endpoint consisting of 1.) cardiovascular death 2.) heart failure hospitalization 3.) urgent emergency department/clinic visit for worsening heart failure (defined as IV diuretics, augmentation of or new administration of metolazone) and 4.) NT-proBNP at 30 days using the Finkenstein Schoenfeld method. Secondary endpoints include 1.) days alive and heart failure event free days 2.) global visual analog scale 3.) composite congestion score (CCS) 4.) Dyspnea Status – 7 Point Likert scale 5.) Current Dyspnea Status – 5 point Likert scale 6.) health-related quality of life (Kansas City Cardiomyopathy Questionnaire (KCCQ-12)) 7.) renal function and electrolytes 8.) weight and 9.) exercise tolerance (Six Minute Walking Test (6MWT)) at 30 days. Fifty (50) evaluable subjects will be included and randomly assigned (2:1) to receive Furoscix or continued medical therapy in the home setting with 30 days of follow-up.

CTR-003
A Phase 3 Global, Double-Blind, Randomized, Placebo Controlled Study to Evaluate the Efficacy and Safety of ION-682884 in Patients with Transthyretin-Mediated Amyloid Cardiomyopathy (ATTR-CM)

Acronym: CARDIO-TTRTransform
Supporter: IONIS Pharmaceuticals/Akcea Therapeutics

Description: Background: Transthyretin amyloidosis cardiomyopathy (ATTR-CM) is a fatal condition, leading to heart failure (HF) and ultimately death. ATTR-CM is caused by misfolding and aggregation of transthyretin (TTR), a protein produced by the liver. Depending on the presence or absence of a destabilizing mutation in the TTR gene, the disease can be classified as hereditary ATTR-CM (hATTR-CM) or wild-type ATTR-CM (wATTR-CM), respectively. Despite the treatment with a TTR stabilizer, tafamidis, recently approved in the United States for the treatment of ATTR-CM, disease progression still occurs. AKCEA-TTR-LRx (ION-682884) is an antisense oligonucleotide that inhibits the production of TTR. It has the same sequence as inotersen (the parent compound) but is conjugated to a triantennary N-acetyl galactosamine (GalNAc) moiety, which acts as a ligand for the asialoglycoprotein receptor abundantly expressed by the liver. Conjugation with GalNAc allows the use of a lower dose to achieve identical pharmacodynamic results. In a phase 1, randomized, placebo-controlled study, AKCEA-TTR-LRx (ION-682884) given at 45 mg by subcutaneous injection (SC) every four weeks achieved a mean pre-steady state reduction in serum TTR of 86% compared to baseline. Study Design and Methods: CARDIO-TTRTransform (ClinicalTrials.gov NCT04136171) is a Phase 3 global, double-blind, randomized, placebo-controlled study assessing the efficacy and safety of AKCEA-TTR-LRx (ION-682884) in hATTR-CM or wATTR-CM patients receiving available background standard of care (SoC) therapy. Approximately 750 patients around the world with a history of HF due to ATTR-CM will be randomized...
of A KCE A-TTR-LRx (ION-682884) compared to placebo in patients with large Phase 3 trial designed to evaluate the clinical efficacy and safety options for A TTR-CM are needed. The CARDIO-TTRansform trial is a Despite recent advances, more efficacious, safe and convenient treatment of CV clinical events, and all-cause of mortality at Week 120. Conclusions: Despite recent advances, more efficacious, safe and convenient treatment options for A TTR-CM are needed. The CARDIO-TTRansform trial is a large Phase 3 trial designed to evaluate the clinical efficacy and safety of AKCEA-TTR-LRx (ION-682884) compared to placebo in patients with ATTR-CM receiving available SoC therapy.

CTR-004
A Prospective, Multi-Center, Randomized, Controlled, Single Blind Clinical Trial Evaluating the Safety and Efficacy of the Cordella™ Pulmonary Artery Sensor System in New York Heart Association (NYHA) Class III Heart Failure Patients

Acronym: PROACTIVE-HF
Supporter: Endotronix, Inc.

Description: PROACTIVE-HF is a prospective, multi-center, randomized, single blind clinical trial evaluating the safety and efficacy of the Cordella™ Pulmonary Artery (PA) Sensor System in New York Heart Association (NYHA) Class III heart failure (HF) patients. The Cordella PA sensor is intended to measure, record, and transmit pulmonary artery pressure (PAP) data from patients at home to clinicians for assessment and patient-centered heart failure management. The Cordella PA sensor is unique in that PAP is measured in the seated position using a 1.3 lb Patient Reader held to the anterior chest wall for as little as 18 seconds. Up to 970 subjects from 60 U.S. medical centers will be enrolled. In addition to the Cordella PA sensor, all patients enrolled in the PROACTIVE-HF trial will also receive the commercially available Cordella System which measures peripheral vital signs (blood pressure, heart rate, oxygen saturation, and weight). The patients (blinded to treatment assignment) will be randomized into the treatment group (hemodynamic guided HF management + GDMT) or control group (PAP blinded to treating physician and GDMT) but all subjects will be using the peripheral vital signs measurements. The primary efficacy is the rate of mortality and of HF hospitalizations or emergency department/hospital outpatient intravenous diuretic visits through 12 months. Secondary efficacy endpoints include heart failure exacerbations, cardiac and all-cause mortality, heart failure medication changes, functional evaluation (via the 6-Minute Walk Test), patient outcome measures (via the Kansas City Cardiomyopathy Questionnaire), and percentage of device success transmitting PAP data in addition to an health economic analysis. Primary safety endpoints include freedom from device/system related complications and freedom from pressure sensor failure at 12 months. Secondary safety endpoints evaluate pressure sensor failure rate and frequency of serious adverse events throughout the 36 months of the study. Key exclusion criteria include: a) Diagnosis and treatment of HF (regardless of left ventricular ejection fraction (LVEF)) for ≥ 3 months and NYHA Class III HF at time of screening b) HF hospitalization (or equivalent) within the last 12 months and/or elevated N-terminal pro B-type Natriuretic Peptide (NT-proBNP), and c) subject being on stable, optimally titrated medical therapy for at least 30 days. Key exclusion criteria include: a) Intolerance to all neuro-hormonal antagonists (i.e., angiotensin converting enzyme-inhibitors (ACE-I), angiotensin receptor blockers (ARB), angiotensin-neprilysin inhibitors (ARNI), and beta-blockers) due to hypotension or renal dysfunction, b) ACC/AHA Stage D refractory HF (including having received or currently receiving pharmacologic circulatory support with inotropes and/or subjects whereby right heart catheterization is contraindicated. Protocol Treatment guidelines for managing HF using PAP assist in management decisions while the user-friendly myCordella™ Patient Management Portal (PMP) additionally creates documents that can assist with billing for both Remote Patient Monitoring (RPM) and Chronic Care Management (CCM). Especially in-light of recent events related to the Covid-19 Pandemic, this comprehensive system facilitates remote management of a high-risk population with the goal of reducing unnecessary HF hospitalizations and office visits while facilitating next generation remote patient management. First-in-human data(1) demonstrated the safety and accuracy of the Cordella PA Sensor and concluded that the Cordella PA Sensor System enables safe and accurate monitoring and remote management of HF status. The PROACTIVE-HF trial (clinicaltrials.gov: NCT04089059) is currently enrolling and open for additional sites to participate (info@endotronix.com). 1. European Journal of Heart Failure (2020) doi:10.1002/ejhf.1870

CTR-005
Gene Therapy for Male Patients with Danon Disease using RP-A501; AAV9.LAMP2B

Supporter: Rocket Pharmaceuticals

Description: Danon disease (DD) is a rare X-linked disorder characterized by profound cardiomyopathy (predominantly hypertrophic) and in many patients, more modest cognitive impairment and skeletal myopathies (D’Souza 2014; Endo 2015). Danon disease is caused by mutations in the gene encoding lysosome-associated membrane protein 2 (LAMP-2), an important mediator of autophagy. In male DD patients, median age at presentation is 12 years and median survival is 19 years (Boucek 2011). This is a non-randomized open-label Phase 1 study to evaluate the safety and toxicity of gene therapy using a recombinant adeno-associated virus serotype 9 (AAV9) containing the human lysosome-associated [continued on page 22]
membrane protein 2 isoform B (LAMP2B) transgene (investigational product (IP), RPAS01) in male patients with Danon Disease (DD). During the course of the study, approximately 11-23 subjects will receive a single intravenous (IV) infusion of the IP, with up to 3 cohorts receiving RP-A501 at sequentially higher dose levels. Three dose levels are planned to be investigated in 3 adult and 3 pediatric cohorts: Cohort 1: Age 15 years and older: Low Dose (n=3 subjects) Cohort 2: Age 15 years and older: Intermediate Dose (n=2-4 subjects) Cohort 3: Age 15 years and older: High Dose (n=2-4 subjects) Cohort 1A: Age 8-14 years: Low Dose (n=2-4 subjects) Cohort 2A: Age 8-14 years: Intermediate Dose (n=2-4 subjects) Cohort 3A: Age 8-14 years: High Dose (n=2-4 subjects) The study will enable an initial evaluation of whether or not the IP results in cardiomyocyte and skeletal muscle transduction and gene expression and a preliminary assessment of the extent of cardiomyocyte and histologic correction. Additionally, a preliminary evaluation of clinical stabilization following IP infusion will be made. Study Centers: University of California, San Diego, Barry H. Greenberg, MD Children’s Hospital of Philadelphia, Joseph Rossano, MD

CTR-006
REducing Lung Congestion Symptoms Using the v-wavE Shunt in adVandED Heart Failure

Acronym: RELIEVE-HF
Supporter: W-Wave Ltd

Description: The RELIEVE-HF study is an international prospective, 1:1 randomized (plus roll-ins), controlled, double-blinded multi-center clinical trial to evaluate the safety and effectiveness of the V-Wave Venture™ Intertrial Shunt System – a device implanted during a minimally invasive cardiac catheterization procedure – in Heart Failure (HF). The study is enrolling patients with NYHA Class II, III or ambulatory Class IV symptoms regardless of LV ejection fraction and who are already receiving optimal medical therapies at baseline. Up to 120 sites in the United Sattes, Canada, the EU, Israel, Australia, and New Zealand are participating in this study. Sites may implant up to 2 Roll-in patients before randomizing for a global total of 100 roll-in patients. 400 patients will be randomized, with a possible increase up to 600 randomized patients based on the results of a planned interim analysis. The duration of follow-up at the primary endpoint will range from a minimum of 12 months (for the last enrolled patient) to a maximum of 24 months. Patients randomized to the Control group will have the opportunity to cross-over and receive a shunt implant at the scheduled time of unblinding. The primary safety endpoint is the all device-related major cardiac and neurological events (MACNE) at 30 days in patients randomized to the treatment group. The primary effectiveness will be assessed using a hierarchical composite of mortality, heart transplant or ventricular assist device implantation, HF hospitalizations, and change in KCCQ overall score compared between the randomized treatment and control groups. For more information:

https://clinicaltrials.gov/ct2/show/NCT03499236
E-mail: info@vwavemedical.com

CTR-007
CArdiovascular and REnal Treatment Implementation in Heart Failure Patients with HyperKalemia or at risk of Hyperkalemia – rationale and design

Acronym: CARE HK in HF
Supporter: Vifor Fresenius Medical Care Renal Pharma Ltd

Description: Clinical outcome studies provide evidence that patients with heart failure (HF) benefit from treatment with Renin-angiotensin-aldosterone system inhibitors (RAASI). Current HF treatment guidelines strongly recommend (class 1A) the use of RAASI at target dose to reduce morbidity and mortality. Despite this evidence, RAASI treatment is often down-titrated, discontinued, or not initiated in patients with HF due to hyperkalemia (HK) (serum potassium >5.0 mEq/L) or risk of HK, particularly in those with chronic kidney disease (CKD). Aim: The CARE HK in HF non-interventional study aims to collect and analyze data to better understand the real-world clinical practice in HF patients with HK or at risk of developing HK in order to identify factors and potential barriers influencing RAASI treatment decisions and the associated impact on outcomes. Patients treated with patiomer, at the discretion of the investigator, will be observed in relation to RAASI therapy, outcomes and potassium levels. Study design: This non-interventional, multinational, multi-center study (11 countries, ~185 sites) plans to enroll approx. 5,000 patients (≥18 years) with HF diagnosed at least 3 months prior to enrolment, with any record of HK (since diagnosis of HF) or at risk of HK, particularly developing HK in order to identify factors and potential barriers influencing RAASI treatment decisions and the associated impact on outcomes. Patients meeting with patiomer to control potassium and enable the use of RAASI treatment in patients with or at risk of HK during the study will be evaluated. Key objectives: Primary objectives include the comparison of real-world RAASI treatment patterns with guideline recommendations, overall and between patiomer-treated and untreated patients. Secondary objectives to assess patiomer effectiveness include: a comparison of RAASI dosage and optimization before and after patiomer initiation (after a hyperkalemic event); changes in RAASI dosage and optimization in patiomer-treated and untreated patients following a hyperkalemic event; rates of events of clinical interest in patiomer-treated patients (HK, arrhythmias, hospitalizations, mortality); factors influencing guideline recommended dosage of RAASI in patiomer-treated patients; and serum potassium measures over time (before and after patiomer initiation). The first patient is targeted for participation in early 2021.

hfsa.org/annualscientificmeeting
**CTR-008**

**Endovascular Ablation of the Right Greater Splanchnic Nerve in Subjects Having Heart Failure with Preserved Ejection Fraction: The REBALANCE HF Study**

**Acronym:** REBALANCE HF  
**Supporter:** Axon Therapies

**Description:** Axon Therapies is conducting a prospective, multicenter, randomized, double blind feasibility study to demonstrate that ablation of the right greater splanchnic nerve (GSN) will benefit HFrEF patients by improving vascular compliance and lowering pulmonary and cardiac filling pressures at rest and with exercise. A maximum of 80 subjects who meet the eligibility criteria will be enrolled and randomized 1:1 to either ablation of the GSN using the Axon System (treatment cohort) or sham (control cohort) at the time of the procedure. Primary endpoints include reduction in mean PCWP during rest and exercise and device / procedure safety, both at 1 month. Patient follow-up will extend to 12 months post index procedure and the company plans to have up to 20 U.S. and international enrolling sites.

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**CTR-009**

**Registral Study With Omeamctiv Mecarbil to Treat Chronic Heart Failure With Reduced Ejection Fraction**

**Acronym:** Global Approach to Lowering Adverse Cardiac Outcomes Through Improving Contractility in Heart Failure (GALACTIC-HF)  
**Supporter:** Amgen, Cytokinetics, Servier

**Description:** Omeamctiv mecarbil, a novel, selective cardiac myosin activator that improves measures of cardiac function in HFrEF, is currently under investigation in the Phase 3 GALACTIC-HF trial (NCT02929329) for its effects on cardiovascular outcomes. The GALACTIC-HF trial is an international, multicenter, randomized, double-blind study that has randomized 8,256 patients with chronic HF, NYHA class II-IV, and LVEF ≤35% (enrollment: January 6, 2017 through July 9, 2019). Patients enrolled from the inpatient setting or within a year of hospitalization or emergency department visit for HF were randomized 1:1 to receive either oral placebo or omecamtiv mecarbil, with pharmacokinetic-guided dosing of 25, 37.5, or 50 mg bid. Additional inclusion criteria are BNP ≥125 pg/mL or NT-proBNP ≥400 pg/mL (BNP ≥375 pg/mL or NT-proBNP ≥1200 pg/mL, if atrial fibrillation/ flutter), and management with guideline-directed medical therapy. Key exclusion criteria include systolic blood pressure (SBP) <85 mmHg, heart rate <50 bpm, and estimated glomerular filtration rate (eGFR) <20 mL/min/1.73 m^2 or dialysis. Of the 8256 patients [male (79%), non-white (22%), mean (SD) age 65 (11.3) yrs] randomized 2084 (25.2%) were enrolled as inpatients. Overall, mean (SD) EF was 27 (6) %; ischemic etiology 54%; NYHA class III 44%; median NT-proBNP 1971 pg/mL; ACE/ARB/ARNI, BB, MRA, diuretic and ICD/CRT use were 87, 94, 77, 90, and 34%. The primary efficacy endpoint is time to CV death or first HF event (hospitalization or urgent visit for a primary evaluation of heart failure). Secondary endpoints include time to CV death, time to first HF hospitalization, and change in Kansas City Cardiomyopathy Questionnaire Total Symptoms Score (KCCQ TSS) from baseline to week 24. The trial is event-driven and statistically powered for the endpoint of CV death, with results anticipated by end of year.

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**CTR-010**

**Randomized Controlled Trial of Autologous Bone Marrow Mononuclear Cells Using the CardiAMP Cell Therapy system in Patients with Post-AMI Heart Failure**

**Acronym:** CardiAMP Heart Failure Trial  
**Supporter:** BioCardia, Inc.

**Description:** Background  

The CardiAMP Heart Failure Trial is a multi-center, randomized, sham-controlled, double-blinded IDE trial in 250 patients, with an additional 10 treated patients in an unblinded roll-in cohort. The purpose of this study is to determine the safety and efficacy of the CardiAMP HF Cell Therapy system in patients with post-myocardial infarction heart failure. The CardiAMP Cell Therapy system is a comprehensive therapeutic treatment that comprises (i) a point-of-care cell processing platform, (ii) an intramyocardial delivery system, and (iii) a bone marrow stem cell potency assay for the screening to include likely responders. During the treatment procedure, the autologous bone marrow mononuclear cells (BM MNCs) are harvested and prepared using the CardiAMP Cell Separator, a point-of-care cell processing platform. The cells are then delivered via ten 0.5 ml injections using the Helix/Morph intramyocardial catheters in 150 patients vs. 100 patients treated with a sham procedure. The primary efficacy endpoint is the comparison of a composite score based on a 3-tiered Finkelstein-Schoenfeld (FS) hierarchical analysis. The tiers, starting with the most serious events, would be (1) all cause death, including cardiac death equivalents such as heart transplant or left ventricular assist device placement, ordered by time to event; (2) non-fatal MACCE events excluding those deemed procedure related occurring within the first 7 days (heart failure hospitalization, stroke or MI) ordered by time to event, and (3) change for 6MWD from baseline to month 12. Secondary endpoints include overall survival (non-inferiority endpoint), freedom from MACE (non-inferiority), Minnesota Living with Heart Failure Questionnaire, time to first MACE, and survival (all superiority endpoints) will be assessed using a gatekeeper approach.

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hfsa.org/annualscientificmeeting
Emerging Therapies Row

Emerging Therapies Row is an exciting opportunity for companies early in development of diagnostics and therapies to the heart failure space to share information about their emerging products. Located in Virtual Exhibit Hall B, each participating company will have a virtual exhibit table.

Axon HF Catheter Ablation System

**Company Name:** Axon Therapies

**Description:** Axon Therapies is addressing a root cause of heart failure with their frontline therapy that selectively ablates signals from the chronically hyperactive sympathetic nervous system (SNS) in order to restore volume balance, stop disease progression and improve symptoms.

VisOne

**Company Name:** VisCardia Inc.

**Description:** VisONE SDSÒ therapy is a unique approach to the treatment of heart failure that provides a supplemental circulatory support through the modulation of intrathoracic pressure. This represents the only systemic therapeutic device that does not directly interface with cardiac tissue or neurocontrol systems.

Aortix System

**Company Name:** Procyrion, Inc.

**Description:** The Aortix System is a percutaneous circulatory support solution for the treatment of heart failure. The Aortix device provides short-term circulatory support for chronic heart failure patients who have been hospitalized for acute decompensation (ADHF), have worsening renal function, and are unresponsive to medical management.

FAST PV and mGFR Technology

**Company Name:** FAST BioMedical

**Description:** FAST BioMedical’s first-in-class technology could guide therapy in hospitalized Acute Decompensated Heart Failure patients. This clinically viable technology directly monitors volume status with precise measures of vascular blood volume and kidney function. These quantitative measurements could enable precision dosing of heart failure therapies and better metrics to guide discharge decisions.
Exhibitor Directory At-A-Glance

Exhibit Hall A – Commercial

**PATRON**
Novartis Pharmaceuticals Corporation

**VIP**
Abbott
Akcea Therapeutics
Alnylam Pharmaceuticals
Amgen Inc.

**PREMIUM**
Abiomed
Boehringer Ingelheim Pharmaceuticals, Inc. / Lilly USA
CMP Pharma
Eidos Therapeutics
Impulse Dynamics USA, Inc.
Medtronic
Pfizer
scPharmaceuticals

**BENEFACTOR**
CVRx
Getinge
Merck & Co. Inc.

**ENHANCED**
AstraZeneca
Boston Scientific
MyoKardia, Inc.
Pfizer

**BASIC**
American College of Cardiology
American Heart Association
CareDX Inc.
CHF Solutions
Daxor
Endotronix
ImpediMed Inc.
Respicardia, Inc.
TandemLife | LivaNova

Exhibit Hall B – Medical

**PATRON**
Cytokinetics, Inc.
Novartis Pharmaceuticals Corporation

**VIP**
Alnylam Pharmaceuticals
Amgen Inc.

**ENHANCED**
Relypsa, Inc., a Vifor Pharma Company
Exhibitor Details: Exhibit Hall A – Commercial

<table>
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<tr>
<th>EXHIBITOR BOOTH KEY:</th>
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<td>PREMIUM</td>
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<td>BENEFACTOR</td>
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<tr>
<td>BASIC</td>
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<td>EMERGING</td>
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</tbody>
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PATRON

Novartis Pharmaceuticals Corporation Commercial
One Health Plaza, East Hanover, NJ

Contact information:
Marianne Santorelli | marianne.santorelli@novartis.com

Description: Novartis is reimagining medicine to improve and extend people’s lives. We use innovative science and digital technologies to create transformative treatments. Novartis products reach more than 800 million people globally and we are finding innovative ways to expand access to our medicines. About 109,000 people of more than 145 nationalities work at Novartis.

VIP

Abbott
6035 Stoneridge Drive, Pleasanton, CA

Contact information:
Kay Gonzales | kay.gonzales@abbott.com | 408-396-8204

Description: Abbott is a global healthcare leader that helps people live more fully at all stages of life. Our portfolio of life-changing technologies spans the spectrum of healthcare, with leading businesses and products in diagnostics, medical devices, nutritional and branded generic medicines. Our 103,000 colleagues serve people in more than 160 countries.

VIP [CONTINUED]

Akcea Therapeutics
22 Boston Wharf Road, Boston, MA

Contact information:
Sheila Twomey-Gansler | stwomey@akceatx.com | 603-217-7171

Description: Akcea Therapeutics, Inc., an affiliate of Ionis Pharmaceuticals, Inc. is a biopharmaceutical company headquartered in Boston, Massachusetts focused on developing and commercializing drugs to treat patients with serious and rare diseases. Akcea is commercializing TEGSEDI® (inotersen) and advancing a mature pipeline of novel drugs, including WAYLIVRA® (volanesorsen), now approved in the E.U., AKCEA-APO(a)-LRx, AKCEA-ANGPTL3-LRx, AKCEA-APOCIII-LRx, and AKCEA-TTR-LRx, with the potential to treat multiple diseases. All six drugs were discovered by and are being co-developed with Ionis, a leader in antisense therapeutics, and are based on Ionis’ proprietary antisense technology.

Alnylam Pharmaceuticals
300 Third Street, Cambridge, MA

Contact information:
Lauren McCarthy | lmccarthy@alnylam.com | 215-407-2472

Description: Founded in 2002, Alnylam is delivering on a bold vision to turn scientific possibility into reality, with a robust RNA interference (RNAi) therapeutics platform. Based on Nobel Prize-winning science, RNAi therapeutics represent a powerful, clinically validated approach for the treatment of a wide range of severe and debilitating diseases. Alnylam is executing on its “Alnylam 2020” strategy of building a multi-product, commercial-stage biopharmaceutical company with a sustainable pipeline of RNAi-based medicines to address the needs of patients who have limited or inadequate treatment options.

Amgen Inc.
1 Amgen Ctr. Drive, Newbury Park, CA

Contact information:
Nathalie Kertesz | nkertesz@amgen.com

Description: Amgen focuses on areas of high unmet medical need to strive for solutions that improve health outcomes and dramatically improve people’s lives. A biotechnology pioneer since 1980, Amgen has grown to be the world’s largest independent biotechnology company, has reached millions of patients around the world and is developing a pipeline of medicines with breakaway potential.
Abiom ed
22 Cherry Hill Drive, Danvers, MA

**Contact information:** Joanna McNamara | jmnamara@abiomed.com

**Description:** Abiom ed is a leading provider of medical devices that provide circulatory support. Our products are designed to enable the heart to rest by improving blood flow and/or performing the pumping of the heart. CEO, Chairman, and President Michael R. Minogue has focused the company's efforts on developing ground-breaking technologies designed to improve the patient outcomes focused on native heart recovery. Founded in 1981 for the purpose of developing the world's first artificial heart, Abiomed has remained dedicated to finding ways to bring the most advanced and beneficial technology to patients and physicians.

**Boehringer Ingelheim Pharmaceuticals, Inc. / Lilly USA**
900 Ridgenury Road, Ridgefield, CT

**Contact information:** Rebecca Madrid | rebecca.madrid@boehringer-ingelheim.com

**Description:** Boehringer Ingelheim Pharmaceuticals, Inc. and Lilly USA welcome you to Virtual HFSA 2020 and look forward to the opportunity to share clinical information on our products.

**CMP Pharma**
PO Box 147, Farmington, NC. 27828

**Contact information:** Scott Germain | scott.germain@cmppharma.com

**Description:** CMP Pharma develops, manufactures and commercializes specialty pharmaceuticals, focused on niche oral liquid, injectable and topical products that solve unmet patient needs. CaroSpir® (Spironolactone Oral Suspension, 25 mg/5mL) is the first and only FDA-approved oral Suspension of the potassium-sparing diuretic spironolactone.

**Eidos Therapeutics**
101 Montgomery Street, San Francisco, CA

**Contact information:** Felix Fermin | ffermin@eidostx.com

**Description:** Eidos Therapeutics, is a clinical stage biopharmaceutical company focused on the growing unmet need in diseases caused by transthyretin amyloidosis, or ATTR. Led by industry veterans, together with patients and physicians, we aim to bring a safe, effective and disease-modifying treatment to market.

**Impulse Dynamics USA, Inc.**
523 Fellowship Rd, Suite 230, Mt. Laurel, NJ

**Contact information:** Rick Chastain | r.chastain@impulse-dynamics.com | 503-688-0598

**Description:** Impulse Dynamics is a fast-growing medical device company that has pioneered a new form of therapy for heart failure called Cardiac Contractility Modulation, or CCM™, which is delivered by the company’s Optimizer® Smart System. CCM is first-of-a-kind, proprietary, life-changing treatment alternative for a vast population of heart failure patients across the globe.

**Medtronic**
710 Medtronic Parkway, Minneapolis, MN

**Contact information:** Tina Daleiden | tina.m.daleiden@medtronic.com | 763-505-8124

**Description:** Patients are at the center of everything we do — and we believe medical technology can play an even greater role in improving people’s lives. Through partnership and experience, we continually learn and innovate, and remain committed to further advancing the treatment of heart failure.

**Pfizer**
235 East 42nd Street, New York, NY

**Contact information:** Debbie Hummel | deborah.j.hummel@pfizer.com

**Description:** Breakthroughs that change patients’ lives At Pfizer, we apply science and our global resources to bring therapies to people that extend and significantly improve their lives. We strive to set the standard for quality, safety and value in the discovery, development and manufacture of health care products.

**scPharmaceuticals**
2400 District Ave, Suite 310, Burlington, MA

**Contact information:** Steve Parsons | sparsons@scpharmaceuticals.com | 774-571-0426

**Description:** scPharmaceuticals is a pharmaceutical company focused on developing and commercializing products that have the potential to transform the delivery of infused therapies, advance patient care, and reduce healthcare costs.
BENEFACTOR

**CVRx**
9201 West Broadway Avenue, Suite 650, Minneapolis, MN

**Contact information:**
Ivana Stojanovic | istojanovic@cvrx.com

**Description:** CVRx is a leader in innovative technologies that address unmet needs in cardiovascular diseases via novel and safe baroreceptor activation therapy Barostim Neo.

**Getinge**
45 Barbour Pond Drive, Wayne, NJ

**Contact information:**
Barry W. Annis | barry.annis@getine.com | 973-709-7792

**Description:** Getinge provides hospitals and life science institutions with products and solutions aiming to improve clinical results and optimize workflows. Product offerings include solutions for intensive care, cardiovascular procedures, operating rooms, sterile reprocessing and life science. Getinge employs over 10,000 people worldwide and products are sold in over 135 countries.

**Merck & Co. Inc.**
Galloping Hill Road, Kenilworth, NJ

**Contact information:**
Nadine Curtin | nadine.curtin@merck.com

**Description:** For more than a century, Merck has been inventing for life, bringing forward medicines and vaccines for many of the world’s most challenging diseases. Today Merck continues to be at the forefront of research to deliver innovative health solutions and advance the prevention and treatment of diseases.

**ENHANCED**

**AstraZeneca**
1800 Concord Pike, Wilmington, DE

**Contact information:**
Michele Spittal | michele.spittal@astrazeneca.com | 609-707-3046

**Description:** AstraZeneca is a global, science-led biopharmaceutical company that focuses on the discovery, development and commercialization of prescription medicines, primarily for the treatment of diseases in three therapy areas - Oncology, Cardiovascular, Renal and Metabolism and Respiratory. AstraZeneca operates in over 100 countries and its innovative medicines are used by millions of patients worldwide.

**Boston Scientific**
4100 Hamilton Avenue North, Saint Paul, MN

**Contact information:**
Stephanie Nervegna | stephanie.nervegna@bsci.com | 612-770-1312

**Description:** HeartLogic™ Heart Failure Diagnostic is a personalized, remote heart failure diagnostic and monitoring solution only found in Boston Scientific ICDs and CRT-Ds. Using multiple, novel physiologic sensors with high sensitivity and low alert burden, it’s validated to provide weeks of advance notice for detecting early signs of worsening heart failure.**Boehm JK, Hariharan R, Devecchi FG, et al. A Multisensor algorithm predicts heart failure events in patients with implanted devices: results from the MultiSENSE study. JACC Heart Fail. 2017 Mar;5(3):216-25.

**MyoKardia, Inc.**
1000 Sierra Point Parkway, Brisbane, CA

**Contact information:**
Marianne van Zeeland | mvanzeeland@myokardia.com

**Description:** MyoKardia is a clinical-stage biopharmaceutical company discovering and developing targeted therapies for the treatment of serious cardiovascular diseases. MyoKardia’s initial focus is on small molecule therapeutics aimed at the myocardium to address diseases driven by excessive contraction, impaired relaxation, or insufficient contraction.

**Pfizer**
235 East 42nd Street, New York, NY

**Contact information:**
Debbie Hummel | deborah.j.hummel@pfizer.com

**Description:** ATTR-CM Suspect and Detect: Uncover the Clues for Diagnosis Life-threatening, underrecognized, and underdiagnosed, ATTR-CM is a rare condition found in mostly older patients in which misfolded transthyretin proteins form insoluble fibrils which deposit in the heart. It is vital to recognize the diagnostic clues so you can identify this disease. Suspect and Detect is a disease education campaign to help increase the suspicion and diagnosis of ATTR-CM among HCPs.

hfsa.org/annualscientificmeeting
BASIC

American College of Cardiology
2400 N Street NW, Washington, DC

Contact information:
Abby Roman | aroman@acc.org | 202-375-6256

Description: The American College of Cardiology is home for the entire CV team. Its mission is to transform cardiovascular care and to improve heart health. The College provides professional medical education, the renowned JACC: Heart Failure Journal, and offers Heart Failure Accreditation to hospitals and institutions.

American Heart Association
7272 Greenville Ave, Dallas, TX

Contact information:
Toni Ford | toni.ford@heart.org

Description: Get With The Guidelines® - Heart Failure is an in-hospital program for improving care by promoting consistent adherence to the latest scientific treatment guidelines. Numerous published studies demonstrate the program’s success in achieving significant patient outcome improvements. Among the proven results are reductions in 30-day readmissions, a measure now used by CMS in determining CMS reimbursement rates.

CareDX Inc.
3260 Bayshore Blvd, Brisbane, CA

Contact information:
Stephanie Licha | slicha@caredx.com

Description: CareDX is committed to improving transplant patient outcomes by providing innovative and intelligent solutions throughout the entire patient journey. We offer products, testing services and digital healthcare solutions and are the leading provider of genomics-based information for transplant patients.

CHF Solutions
12988 Valley View Road, Eden Prairie, MN

Contact information:
Laura Serrano | laura.serrano@chf-solutions.com | 952-563-7041

Description: CHF Solutions, Inc. (CHFS) is a medical device company dedicated to changing the lives of patients suffering from fluid overload through science, collaboration, and innovation. The company is focused on developing, manufacturing and commercializing the Aquadex Smart-Flow™ system for ultrafiltration therapy. CHF Solutions is headquartered in Minneapolis, Minn., with wholly-owned subsidiaries in Australia and Ireland. The company has been listed on the Nasdaq Capital Market since February 2012.

Daxor
350 5th Avenue, Suite 4740, New York, NY

Contact information:
Tina Gadd | tgadd@daxor.com | 865-425-0555

Description: Daxor focuses on the innovation of blood volume measurement. Our mission is to partner with clinicians to incorporate BVA technology into standard clinical practice and improve the quality of life for patients. The BVA-100® is a unique blood volume measurement platform helping take guesswork out of patients’ intravascular volume status.

Endotronix
815 Ogden Ave, Lisle, IL

Contact information:
Jim Yearick | jim.yearec@endotronix.com

Description: Endotronix, Inc., a medical technology company, delivers an integrated platform that provides comprehensive health management innovations for chronic heart failure. Their solution, the Cordella™ Heart Failure System, includes a cloud-based disease management data system and at-home hemodynamic management via a breakthrough implantable wireless pulmonary artery pressure sensor for early detection of worsening heart failure.
ImpediMed Inc.
5900 Pasteur Ct., Ste. 125, Carlsbad, CA

Contact information:
Lisa Keeley | lkeeley@impedimed.com | 750-585-2123

Description: ImpediMed is the world leader in the design and manufacture of medical devices employing bioimpedance spectroscopy (BIS) technologies for use in the noninvasive clinical assessment and monitoring of fluid status and tissue composition. When applied to a heart failure patient population, SOZO offers new insight into patient fluid overload to help clinicians monitor and manage their patients. Founded and headquartered in Brisbane, Australia, ImpediMed is a global company with operations in the United States and Europe.

Respicardia, Inc.
12400 Whitewater Dr, Suite 150, Minnetonka, MN

Contact information:
Seamus Jackson | sjackson@respicardia.com | 312-804-8566

Description: Respicardia® is a leader in innovative technologies that address the unmet needs in respiratory and cardiovascular disease with safe and effective therapies. Founded in 2006 and headquartered near Minneapolis, Minnesota, Respicardia is dedicated to improving patient outcomes, quality of life and overall cardiovascular health via novel transvenous neurostimulation therapies.

TandemLife | LivaNova
620 Alpha Drive, Pittsburgh, PA

Contact information:
Kayla Deere | kayla.deere@livenova.com | 218-343-3396

Description: TandemLife, now part of LivaNova, exists to deliver life support simplified, for more patients in more places. Our next generation advanced circulatory support system, LifeSPARC™, is built around a common compact console and pump, and four ready-to-deploy kits. LifeSPARC offers more power and versatility for multi-disciplinary programs to support more patients.
Cytokinetics, Inc.

280 East Grand Ave, South San Francisco, CA

Contact information:
Laura Gschwind | lgschwind@cytokinetics.com | 650-624-3000

Description: Cytokinetics is a late-stage biopharmaceutical company focused on discovering, developing and commercializing first-in-class muscle activators and next-in-class muscle inhibitors as potential treatments for debilitating diseases in which muscle performance is compromised and/or declining.

Novartis Pharmaceuticals Corporation Commercial

One Health Plaza, East Hanover, NJ

Contact information:
Marianne Santorelli | marianne.santorelli@novartis.com

Description: Novartis is reimagining medicine to improve and extend people’s lives. We use innovative science and digital technologies to create transformative treatments. Novartis products reach more than 800 million people globally and we are finding innovative ways to expand access to our medicines. About 109,000 people of more than 145 nationalities work at Novartis.

Alnylam Pharmaceuticals (Medical)

Contact information:
Lauren McCarthy | lmccarthy@alnylam.com | 215-407-2472

Description: Founded in 2002, Alnylam is delivering on a bold vision to turn scientific possibility into reality, with a robust RNA interference (RNAi) therapeutics platform. Based on Nobel Prize-winning science, RNAi therapeutics represent a powerful, clinically validated approach for the treatment of a wide range of severe and debilitating diseases. Alnylam is executing on its “Alnylam 2020” strategy of building a multi-product, commercial-stage biopharmaceutical company with a sustainable pipeline of RNAi-based medicines to address the needs of patients who have limited or inadequate treatment options.

Amgen Inc. Medical

1 Amgen Ctr. Drive, Newbury Park, CA

Contact information:
Nathalie Kertesz | nkertesz@amgen.com | 805-490-3154

Description: Amgen focuses on areas of high unmet medical need to strive for solutions that improve health outcomes and dramatically improve people’s lives. A biotechnology pioneer since 1980, Amgen has grown to be the world’s largest independent biotechnology company, has reached millions of patients around the world and is developing a pipeline of medicines with breakaway potential.

Relypsa, Inc, a Vifor Pharma Company

100 Cardinal Way, Redwood, CA

Contact information:
Gail Ackourey | gackourey@relypsa.com

Description: To test your knowledge on Hyperkalemia in Heart Failure, please see the Frequently Asked Questions shown below. To view the answers, click on the corresponding answers from experts in the field under the resource panel.