

20TH ANNUAL INTERNATIONAL

AF **2015**
SYMPOSIUM

ATRIAL FIBRILLATION

MECHANISMS AND NEW DIRECTIONS IN THERAPY

JANUARY 8 – 10, 2015

Orlando World Center Marriott, Orlando, FL

A CME Symposium

Jointly provided by Postgraduate Institute for Medicine and Advanced Medical Education

**COURSE
DIRECTORS**

Jeremy Ruskin, MD
Moussa Mansour, MD
David Keane, MD, PhD
Pierre Jais, MD
Vivek Reddy, MD

Register online at: afsymposium.com



It is with great pleasure that I invite you to attend the upcoming 20th Annual International AF Symposium on January 8-10, 2015 at the Orlando World Center Marriott, Orlando, Florida. The Boston AF Symposium was initiated in 1995 in response to the growing epidemic of atrial fibrillation. Over the past twenty years, this meeting has become a major scientific forum at which health care professionals have a unique opportunity to learn about advances in research and therapeutics directly from many of the most eminent investigators in the field. This intensive and highly focused three-day symposium brings together the world's leading medical scientists to share in a highly interactive environment the most recent advances in the field of atrial fibrillation. The primary objective of the meeting is to provide attendees with a thorough and practical view of the current state of the art in the field of AF in a scholarly and collegial atmosphere. The meeting employs advanced teaching tools including satellite and pre-recorded case presentations and interactive audience response systems to share with attendees the most up to date basic, translational and clinical science in the field. The past two decades have witnessed dramatic advances in all areas of AF research which have contributed to major progress in our understanding of the pathophysiology of this arrhythmia and to the development of safer and more effective strategies for the management of AF and the prevention of AF-related stroke. The AF Symposium is dedicated to bringing these advances to our attendees each year in a highly organized and exciting scientific program. In 2014, after 18 years in Boston, the meeting was moved to Orlando Florida where we are pleased to offer all of our attendees, industry partners and faculty the opportunity to be housed in one location.

Jeremy Ruskin, MD

PRELIMINARY SCIENTIFIC PROGRAM TOPICS 2015

Satellite Case Presentations

Catheter Ablation of Persistent AF - 2C3L Approach

Chang Sheng Ma, MD
Beijing Anzhen Hospital, Capital Medical University,
Beijing, China

Advanced 3-Dimensional Mapping to Guide AF Ablation

Gerhard Hindricks, MD, Andreas Bollmann, MD
and Jedrej Kosiuk, MD
University of Leipzig, Leipzig, Germany

Combined AF Ablation and Left Atrial Appendage Closure

Claudio Tondo, MD, PhD, Gaetano Fassini, MD,
Massimo Moltrasio, MD and
Antonio Dello Russo, MD, PhD
Centro Cardiologico Monzino, University of Milan,
Milan, Italy

MIBG Imaging Guided GP Ablation with PVI for AF

Sabine Ernst, MD, PhD
Royal Brompton Hospital, London, UK

Pulmonary Vein Antral Isolation Without the Use of Fluoroscopy

Rodney Horton, MD, Amin Al-Ahmad, MD
and Andrea Natale, MD
Texas Cardiac Arrhythmia Institute, Austin, Texas

Tools and Techniques To Optimize Contact Force During AF Ablation

Kevin Heist, MD, PhD and Moussa Mansour, MD
Massachusetts General Hospital, Boston, MA

Basic Mechanisms of Atrial Fibrillation and Therapeutic Implications

Mechanisms of Human AF: Insights from Bench to Bedside

The Role of the Autonomic Nervous System in the Initiation and Maintenance of AF – Anatomy, Physiology, and Implications for Catheter Ablation

The Impact of Endurance Exercise on Autonomic Remodeling and Atrial Enlargement and Fibrosis

The Effects of Concomitant Potassium Channel Block on AF Selectivity of Sodium Channel Blocking Antiarrhythmic Drugs

Is There A Role for Digoxin in the Treatment of Atrial Fibrillation?

Mechanistic Insights Into Genome Associations in Atrial Fibrillation

Impact of Atrial Remodeling on Susceptibility to and Progression of AF: Cell to Bedside

Mechanisms of Atrial Remodeling and Their Impact on AF Outcomes

The Physiology of Myofibroblasts and Fibrosis in Persistent Atrial Fibrillation

Patient-Specific Models of Atrial Arrhythmias

The Role of Metabolic Factors in Determining the Progression of Atrial Fibrillation

Predicting AF Outcomes by the Extent of Left Atrial Remodeling on MRI

MRI Assessment of Atrial Fibrosis In Patients Undergoing Catheter Ablation for AF - Is There Clinical Value?

Does Catheter Ablation Reverse Atrial Remodeling? Current and Future Pharmacological Targets for the Prevention of Atrial Remodeling

*Preliminary Program Is
Subject To Change*

Modifiable Risk Factors and Atrial Fibrrosis and Fibrillation

Obesity, Atrial Fibrrosis and AF – The Role of Pericardial Fat in Atrial Remodeling

The Contribution of Sleep Apnea to AF and the Impact of Treatment on Outcome of AF Ablation

Commonly Used Drugs in Clinical Practice That May Cause Atrial Fibrillation

Aggressive Risk Factor Modification in AF: Implications for Maintenance of Sinus Rhythm

Atrial Fibrillation and the Brain

Novel Anticoagulant Drugs - Update and Comparison of Major Clinical Trials

How to Choose the Right NOAC

Should We Be Dose Adjusting the NOACs?

AF and Low CHA2DS2-VASc Score - Are NOACs Justified?

Combined Anticoagulant and Antiplatelet Therapy in Patients with AF and CAD

How to Preserve Long-term Cognitive Function in Patients with Atrial Fibrillation

Elimination of Atrial Fibrillation as a Strategy for Stroke Prevention

Periprocedural Anticoagulation for AF Ablation with Warfarin & NOACs

Periprocedural Microembolization During AF Ablation - Mechanisms, Incidence, and Clinical Significance

Device Detected High Rate Events - Is There a Case for Prophylactic Anticoagulation?

Clinical Trials, Guidelines and Regulatory Issues in AF Ablation

Clinical Trials of New Ablation Technologies Seeking FDA Approval

FDA Perspective on Trial Design for Ablation Devices for Persistent AF

Results of Monitoring Trials for the Detection of Asymptomatic AF

The 2014 AHA/ACC/HRS AF Guidelines: What Was Changed and Why?

Catheter Ablation for Paroxysmal Atrial Fibrillation

Ablation for Paroxysmal AF: What Have We Learned from More Than Ten Years of Follow-Up?

Second Generation Balloon Technologies for Ablation of Paroxysmal AF

Pacing During PVI: Defining PV-PV & PV-RA Connections, Exit Block, & Phrenic Nerve Locations

Outcome with Multiple Repeat PVIs – Is It OK to Whittle?

The Impact of First-Procedure Success Rate on the Economics of AF Ablation

Optimizing Lesions and Improving the Safety of AF Ablation

How to Objectively Assess the Quality of AF Ablation Procedures

How to Avoid the Commonest Complications of AF Ablation

Contact Force Sensing During AF Ablation - Technologies, Results and Impact on Clinical Outcomes

New Generation Ablation For Atrial Fibrillation: From Multipolar Contact Sensing Systems to Extracorporeal Particle Therapy

Advanced Technologies to Improve Safety During AF Ablation: OCT, Acoustic Radiation Force Imaging, Photoacoustic Imaging, Microwave Radiometry, Optical Spectroscopy, Electrode Integrated 30mhz Ultrasound, MRI Thermography, and Digital Hydrophone

Rotors in AF: Mapping Techniques, Mechanistic Insights, Controversies, and Implications for AF Ablation

Mapping and Ablation Techniques for the Elimination of Drivers in Persistent AF

Rotor Mapping: Rationale, Techniques, Results and Limitations

Is There Evidence of Stable Rotor Activity with Multipolar Mapping of Persistent AF?

Dominant Frequency, CAFE, Similarity Index, and Rotors - Lessons from Mapping and Ablation of Persistent AF

New Insights from Research on Body Surface Mapping of Persistent AF

Panel and Audience Discussion : What constitutes a stable rotor?; How do you ablate a functional rotor?; How does rotor ablation terminate AF? What are the limitations and pitfalls of current rotor mapping techniques?

Catheter Ablation for Persistent Atrial Fibrillation - Future Directions

What is the Best Strategy for Ablation of Persistent AF? - Results of the STAR-AF II Trial

Ablation On vs. Off Amiodarone in Longstanding Persistent AF: Results of the SPECULATE Study

The Spectrum of Atrial Tachycardias Following Ablation of Drivers in Persistent AF

The Efficacy and Safety of New Circular RF Catheter Systems for Ablation of Persistent AF

Linear Cold Balloon Ablation for Persistent AF

Hybrid Endocardial and Epicardial Surgical Ablation of Persistent AF - Rationale & Results

New and Better Tools for Catheter Ablation of Longstanding Persistent AF

The Role of Left Atrial Appendage Exclusion Strategies in the Management of AF

Endocardial LAA Closure Devices: An Overview of the Evidence Base

Epicardial LAA Closure Device: Is There Enough Evidence to Use This Technique?

LA Appendage Isolation in Persistent AF Ablation: Beneficial or Harmful?

LAA Closure Devices and Multiple FDA Panels – Where Things Stand and Why

Which Patients with AF are Appropriate Candidates for LAA Exclusion?

Debate and Discussion: For Patients Able to Take Oral Anticoagulants –

The Treatment of Choice is Drug Therapy

The Treatment of Choice is Mechanical LAA Exclusion

Best AF Basic Science Papers Published in 2014

Best AF Clinical Science Papers Published in 2014

Challenging Cases in AF Management: Antiarrhythmic Drugs, Anticoagulation, and Clinical Decision Making

Challenging Cases in Catheter Ablation for AF

Panel and Audience Discussions - All Sessions

2015 AF Symposium Faculty

Amin Al-Ahmad, MD	Texas Cardiac Arrhythmia Institute, Austin, TX
Elad Anter, MD	Beth Israel Deaconess Medical Center, Boston, MA
Andreas Bollmann, MD	University of Leipzig, Leipzig, Germany
Hugh Calkins, MD	Johns Hopkins Hospital, Baltimore, MD
A. John Camm, MD	St. George's Hospital Medical School, London, UK
Shih-Ann Chen, MD	Veterans General Hospital, Taipei, Taiwan
Andre d'Avila, MD, PhD	Hospital Cardiologico Florianopolis, Santa Catarina, Brazil
John Day, MD	Intermountain Heart Institue, Murray, UT
Antonio Dello Russo, MD, PhD	Centro Cardiologico Monzino-University of Milan, Milan, Italy
Luigi Di Biase, MD, PhD	Albert Einstein College of Medicine, Bronx, NY
Jun Dong, MD, PhD	U.S. Food and Drug Administration, Silver Spring, MD
Patrick Ellinor, MD, PhD	Massachusetts General Hospital, Boston, MA
Sabine Ernst, MD, PhD	Royal Brompton Hospital, London, England
Gaetano Fassini, MD	Centro Cardiologico Monzino-University of Milan, Milan, Italy
Mark Fellman, PE	US Food and Drug Administration, Silver Spring, MD
Michel Haissaguerre, MD	Central Hospital University of Bordeaux, Bordeaux, France
Kevin Heist, MD, PhD	Massachusetts General Hospital, Boston, MA
Gerhard Hindricks, MD	University of Leipzig, Leipzig, Germany
Rodney Horton, MD	Texas Cardiac Arrhythmia Institute, Austin, TX
Warren Jackman, MD	University of Oklahoma, Oklahoma City, OK
Pierre Jais, MD	Central Hospital University of Bordeaux, Bordeaux, France
Jose Jalife, MD	University of Michigan, Ann Arbor, MI
Josef Kautzner, MD, PhD	Institue for Clinical and Experimental Medicine, Prague, Czech Republic
David Keane, MD, PhD	St. Vincent's University Hospital, Dublin, Ireland
Young-Hoon Kim, MD, PhD	Korea University Medical Center, Seoul, Korea
Hans Kottkamp, MD	Heart Center Hirslanden, Zurich, Switzerland
Peter Kowey, MD	Lankenau Hospital, Wynnewood, PA
Jedrej Kosiuk, MD	University of Leipzig, Leipzig, Germany
Karl-Heinz Kuck, MD	St. George Hospital, Hamburg, Germany
Dhanunjaya Lakkireddy, MD	University of Kansas Hospitals, Kansas City, KS
Cheng Sheng Ma, MD	Beijing Anzhen Hospital Capital Medical University, Beijing, China
Ravi Mandapati, MD	Loma Linda University, Loma Linda, CA
Moussa Mansour, MD	Massachusetts General Hospital, Boston, MA
Francis Marchlinski, MD	University of Pennsylvania, Philadelphia, PA
Nassir Marrouche, MD	University of Utah Health Sciences Center, Salt Lake City, UT
Massimo Moltrasio, MD	Centro Cardiologico Monzino-University of Milan, Milan, Italy
Sanjiv Narayan, MD, PhD	Stanford University, Stanford, CA
Andrea Natale, MD	Texas Cardiac Arrhythmia Institute, Austin, TX
Stanley Nattel, MD	University of Montreal, Montreal, Canada
Douglas Packer, MD	Mayo Clinic, Rochester, MN
Eric Prystowsky, MD	The Care Group, Indianapolis, IN
Vivek Reddy, MD	Mount Sinai School of Medicine, New York, NY
Jeremy Ruskin, MD	Massachusetts General Hospital, Boston, MA
Prashanthan Sanders, MD, PhD	Royal Adelaide Hospital, Aelaide, SA, Australia
Daniel Singer, MD	Massachusetts General Hospital, Boston, MA
Claudio Tondo, MD, PhD	Centro Cardiologico Monzino-University of Milan, Milan, Italy
Natalia Trayanova, PhD	Johns Hopkins University, Baltimore, MD
Zoltan Turi, MD	Robert Wood Johnson University Hospital, New Brunswick, NJ
Atul Verma, MD	Southlake Regional Health Centre, Ontario, Canada
Albert Waldo, MD	Case Western Reserve University, Cleveland, OH
Paul Wang, MD	Stanford University, Stanford, CA
David Wilber, MD	Loyola University Medical Center, Chicago, IL

GENERAL INFORMATION

A statement of credit will be issued only upon receipt of a completed activity evaluation form and will be emailed to you within 3 weeks.

CONFERENCE FEE

The conference fee is \$1095 for physicians and industry and \$995 for residents, fellows, and hospital-based nurses (with a certifying letter from your hospital).

The conference fee includes the costs of tuition, syllabus materials, continental breakfasts, lunch and coffee breaks.

Payment may be made by credit card or check.

If paying by check, please make checks payable to AEI Advanced Medical Education and mail to:

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4 East Central St., #3126

Worcester, MA 01613

All registrations will be confirmed via email. If you do not receive a confirmation please call 508-614-5413.

Register online at www.afsymposium.com

CANCELLATION POLICY

Should you cancel your registration prior to Friday, December 26, 2014, you will be refunded the conference fee less \$75. No refunds will be made for cancellations received after Friday, December 26, 2014. The Atrial Fibrillation (AF) Symposium is not responsible for airfare, hotel, or other costs incurred by participants in the event of program or registration cancellation. For further information contact: Muriel Corcoran (508-614-5413) or mcorcoran@amecme.com.

Note: In the event that the 20th Annual AF Symposium is abbreviated or canceled because of circumstances beyond the AF Symposium's control including, but not limited to, civil disturbance, earthquake, electrical outage, explosion, fire, freight embargo, strike or labor unrest, flood, hurricane, tornado or other acts of God, an act of war, terrorism, or the act of any government (de facto or de jure), or any government agency or official, the AF Symposium reserves the right, at the AF Symposium's sole discretion, to unilaterally terminate the symposium. In these circumstances, the registrant expressly agrees to waive any claim that he, she, or it may have against the AF Symposium for damages or compensation, including but not limited to fees for registration, housing, airfare, and incidental charges.

CREDIT DESIGNATION

The Postgraduate Institute for Medicine designates this live activity for a maximum of 25.75 AMA PRA Category 1 Credit(s)[™]. Physicians should claim only the credit commensurate with the extent of their participation in the activity.

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ACCREDITATION STATEMENT

This activity has been planned and implemented in accordance with the accreditation requirements and policies of the Accreditation Council for Continuing Medical Education (ACCME) through the joint providership of Postgraduate Institute for Medicine and AEI Advanced Medical Education. The Postgraduate Institute for Medicine is accredited by the ACCME to provide continuing medical education for physicians.

NURSE ACCREDITATION STATEMENT

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NURSE CREDIT DESIGNATION

This educational activity for 25.6 contact hours is provided by Postgraduate Institute for Medicine.

DISCLOSURE OF CONFLICTS OF INTEREST

Postgraduate Institute for Medicine (PIM) requires instructors, planners, managers and other individuals who are in a position to control the content of this activity to disclose any real or apparent conflict of interest (COI) they may have as related to the content of this activity. All identified COI are thoroughly vetted and resolved according to PIM policy. The existence or absence of COI for everyone in a position to control content will be disclosed to participants prior to the start of each activity.

AMERICANS WITH DISABILITIES ACT

Event staff will be glad to assist you with any special needs (ie. physical dietary, etc). Please contact Muriel Corcoran no later than Friday, December 26, 2014 to the event at 508-614-5413 or mcorcoran@amecme.com



STATEMENT OF NEED 2015

The Planning Committee has determined that there is a strong need for this conference based on the clinical and public health significance of atrial fibrillation as the most common cardiac arrhythmia and a growing global epidemic, as well as rapid advances in our understanding of the mechanisms of and treatment options for this major public health problem. This three-day symposium is designed to meet the following objectives.

- 1** Provide a current review of new information on the clinical science and pathophysiology of atrial fibrillation and atrial fibrillation-related stroke
- 2** Provide a detailed presentation of the most recent developments in the diagnosis and treatment of atrial fibrillation
- 3** Discuss the prevention of AF-related stroke and other sequelae, with an emphasis on current and evolving pharmacologic and nonpharmacological therapies and enabling new technologies in the field of cardiac electrophysiology
- 4** Exchange thoughts and techniques with the treatment team to improve the outcome of patient care and treatment
- 5** Provide appropriate care and counsel for patients and their families through the education of healthcare professionals

The scientific basis for, clinical experience with and limitations of new and existing therapies for atrial fibrillation and prevention of atrial fibrillation-related stroke will be explored. In addition to formal lectures, case presentations, case discussions, focused mini-symposia and faculty-audience interactions using an audience response system will be used to highlight the current state of scientific knowledge in areas of major importance to clinicians. The faculty is selected to provide the highest quality teaching and access to the most current scientific information from leading international experts in the field.

This symposium has been designed to meet the educational needs of cardiologists, internists, fellows, nurses, and technicians involved in the care of patients with atrial fibrillation.



ORLANDO WORLD CENTER MARRIOTT

We are delighted to offer all of our attendees, industry partners and faculty the opportunity to be housed in one location. Situated on 200 acres, the newly renovated Orlando World Center Marriott Resort and Convention Center offers 2000 deluxe guestrooms, 5 restaurants, 73 meeting rooms, large and flexible exhibit space, a dedicated convention concierge staff, full service business center, and world-class exercise and recreational facilities onsite. The AF Symposium looks forward to offering all our attendees easy and comfortable access to the symposium, housing and a wide range of amenities, all within a single convention facility.

HOTEL ACCOMMODATIONS

The 20th Annual AF Symposium housing block for the Orlando World Center Marriott or the Grand Floridian can be accessed on the meeting website at www.afsymposium.com. In order to receive the special AF 2015 rates, you must obtain your housing through the housing bureau.

FOR MEETING INFORMATION CONTACT

Muriel Corcoran, Executive Director
Atrial Fibrillation Symposium

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Website : www.afsymposium.com

REGISTRATION FORM



Atrial Fibrillation Symposium
Mechanisms and New Directions in Therapy
20th International Symposium January 8-10, 2015
Orlando World Center Marriott, Orlando FL

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Please advise us at the earliest possible date if you have special health needs or physical requirements and desire special accommodations. Requests will be kept confidential. Please call 508-614-5413.

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