



SPRING

The Cardiometabolic Challenge:
NAVIGATING A SYNDEMIC



**CONFERENCE
HIGHLIGHTS
2021**

KIDNEY DISEASE HEART FAILURE HYPERTENSION

This session was chaired by **George L. Bakris MD** and included a special symposium on “New Frontiers in Heart Failure Management,” in which **Alanna A. Morris MD**, emphasized that **“there is a need of a new way to define heart failure.”** She also accentuated that **“we are now recognizing a new, universal definition of heart failure”** while discussing a new expert statement in the definition and classification of heart failure. Following this talk, Stephen D. Wiviott, MD, provided crucial clinical pearls regarding the application of SGLT2i in the prevention and treatment of heart failure. He stressed that **“now compelling evidence supports that SGLT2i reduces the risk of hospitalization for heart failure as well as robustly decrease the risk of progression of kidney disease.”** He also reminded us that **“society guidelines are catching up with these fast-moving data.”** Following this talk, **Ileana L. Piña, MD**, discussed the new and emerging targets in heart failure, including new vasodilators, synthetic natriuretic peptides, binders of acting -myosin, etc., and summarized the data from clinical trials, assessing these novel agents to manage heart failure. Due to rapid advancements in the therapeutic landscape of heart failure, the guidelines need to be swiftly updated. The next speaker, **Clyde W. Yancy, MD**, perfectly summarized the previous talks and outlined potential crucial updates in the guidelines due to advancements in recent heart failure treatments. He successfully painted a clear picture of how HF guidelines might look like in 2021 and beyond, including a stronger emphasis on HF prevention, incorporation of SGLT2is and other newer therapies, as well as more inclusive considerations about health equity in the care of HF patients. This symposium concluded with a fascinating case presentation by **Sarah Chuzi, MD**, with an interactive panel discussion. After the break, **Joseph A. Vassalotti, MD**, brought the attendees’ focus from heart failure to kidney diseases and described various strategies that clinicians can employ for evaluating the risk of chronic kidney disease (CKD) progression. This was followed by **Aldo J. Peixoto, MD**, who shared insights and discussed recent updates in the prevention and treatment of CKD, including the updates in the KDIGO guidelines and the data with SGLT-2is, GLP-1 RAs, and novel non-steroidal MRAs for CKD. **William F. Young, Jr., MD, MSc**, then discussed the causes and treatment of primary aldosteronism and how it can be easily missed during diagnosis. These sessions were also followed by a panel discussion of different challenging cases of patients with CKD and various comorbidities.

DIABETES MANAGEMENT

As glycemic control remains elusive for a significant proportion of diabetes patients, the management of glycemic control in patients with diabetes and cardiovascular disease risk seems to have taken a backseat. Additionally, new agents and devices are in the development or approval phase that may help clinicians address ongoing needs in diabetes management. To bring this knowledge from trials to our clinicians, this diabetes management session, moderated by **CMHC Chair Anne L. Peters, MD**, aimed to seek, address and provide a solution to pertinent topics such as effective management of glycemia in patients with cardiovascular diseases by Vanita Aroda, MD, benefits of using CGMs in patients with type 2 diabetes and pre-diabetes and co-relation of “time in range” data with complications in diabetes by **Viral Shah, MD and Nicholas B. Argento, MD, FACE**, respectively. Benefits and how an increased usage of insulin pumps and inpatient use of CGM can optimize treatment and improve the outcomes in diabetes patients was advocated by **Grazia Aleppo, MD, FACE, FACP, and Joseph A. Aloji, MD** with the help of a solid trail of evidence laid by latest clinical trials and FDA approvals of many devices. To round it out, **Jane Reusch, MD**, explained how exercise is still an effective medicine for treating type 2 diabetes. The session ended with an extensive discussion between all the faculty that included intriguing case presentations.

OBESITY AND LIFESTYLE MEDICINE

This session chaired by **Robert H. Eckel, MD** took an in-depth look at obesity prevention and management by discussing comprehensive approaches, including nutritional and lifestyle modifications and recent trends in obesity treatment. **Louis J. Aronne, MD** kick-started the session by discussing significant ongoing developments in obesity, such as obesity pharmacotherapy, telehealth, and flexibility in dietary interventions. This talk was followed by **Donna H. Ryan, MD**, who provided many valuable and practical tips to help clinicians help their patients succeed in their weight loss journeys. Dr. Ryan mentioned that **“like a thumbprint, every patient’s weight journey is unique.”** This was followed by a panel discussion, with case presentations from each faculty and active audience participation. In the second half of this session, expert faculty supported the benefits of dietary intervention and how it improves patients’ cardiometabolic health backed by recent results from various clinical trials and studies. To that end, **Kim A. Williams, Sr., MD, Penny M. Kris-Etherton, Ph.D., and Sarah Hallberg, DO** reviewed the benefits of a vegetarian diet, low carbohydrate diets, and dietary recommendations from recent guidelines on cardiometabolic health. This was followed by a stimulating panel discussion with diverse cases and perspectives.

DYSLIPIDEMIA ATHEROSCLEROSIS THROMBOSIS

This session focused on discussing CVD prevention in the cardiometabolic patient by exploring topics including CV risk assessment and the evolution of lipid therapy and lipid targets in light of the evolving evidence and guidance. Chaired by **Christie M. Ballantyne, MD**, this session also addressed the pertinent need of individualizing lipid therapy. **Matthew J. Budoff, MD**, discussed the role of biomarkers, imaging, and genetics in risk prediction, and **Brendan M. Everett, MD** updated clinicians on atherosclerotic cardiovascular diseases and how inflammation is a consistent predictor of cardiovascular risk, followed by **Pamela B. Morris, MD**, who discussed the recent data from clinical trials and stressed that “lower LDL-C is better and lowest is best.” **Elaine M. Hylek, MD** steered us to the world of atrial fibrillation and discussed stroke prevention strategies in cardiometabolic patients whereas, **Deepak L. Bhatt, MD** discussed updates in antiplatelet and antithrombotic therapy in cardiometabolic patients. This session also ended with a panel discussion that included an exciting case presentation from all the above faculty, including **Margo B. Minissian, Ph.D.**

Antithrombotic Therapy for Symptomatic PAD: Interpreting the Evidence and Recent Advances” and “Lipid Management in Very High-Risk Patients Post-MI: Applying Real-World Evidence to Improve Outcomes.”

In the first symposium, **Deepak L. Bhatt, MD, Marc P. Bonaca, MD, MPH, and Manesh R. Patel, MD**, explored the role of antithrombotic agents in PAD, as outlined by recent clinical trials, as well as illustrated these advancements with the help of a complex patient case that considered how to administer antithrombotic and antiplatelet therapy in PAD patients. In the second symposium, **Pam R. Taub, MD, Nihar R. Desai, MD, and Michael D. Shapiro, DO**, explored the recommendations suggested by current guidelines for lipid therapy specifically after the incident of myocardial infarction and discussed not only recent clinical trial data but also real-world evidence. This session ended with a panel discussion of a challenging case.

Cardiometabolic Risk and COVID-19: Implications and Practice Considerations

The special Summit that marked the last day of CMHC Spring explored the connections between cardiometabolic risk and COVID-19, including the increased risk of patients with cardiometabolic disease for severe COVID-19 well as how the pandemic has impacted and continues to impact the management of existing cardiometabolic conditions. CMHC chair, Robert H. Eckel MD, chaired this session, and experts such as **Chip Lavie, MD, Clyde W. Yancy, MD, and Jay H. Shubrook DO FACOFP, FAAFP** from the cardiometabolic world discussed the brunt of COVID-19 on patients who are obese, have cardiometabolic comorbidities, and how there is a bidirectional relationship between diabetes, obesity, CVD, and COVID 19. They also discussed a need for a solid “game plan” to fight this disease and the resumption of various activities post-COVID-19. This activity concluded with an eventful discussion on challenging case presentation of treatment of an athlete who suffered from COVID-19, as well as a patient with diabetes who contracted COVID-19.