

5th Scientific seminar on pulmonary hypertension - “Connecting expertise in a rare disease in 2017”



PRELIMINARY Program – DAY 1

Thursday 14 December

Afternoon: Arrival delegates and check in hotel/seminar venue Leuven

16.30 - 16.45 h **Welcome** Marion Delcroix / Guido Broeders

16.45 - 19.15 h **Moderated Poster Session - The future stars of Pulmonary Hypertension Research**

Moderators: Steering committee members

POSTERS

1. **Chemokine CCL21 as a potential serum biomarker for pulmonary arterial hypertension in Systemic Sclerosis.**
Anna-Maria Hoffmann-Vold, Dept. of Rheumatology, Oslo University Hospital (OUH), Oslo, Norway
2. **Right ventricular adaptation as assessed by exercise cardiovascular magnetic resonance imaging in pulmonary arterial hypertension.**
Christoffer Göransson, Dept Cardiology, Copenhagen University Hospital, Rigshospitalet, Denmark
3. **Pulmonary Hypertension Reversal in Clusters of Patients with with pro-proliferative signatures: 6-Mercaptopurine Proof-of-Concept Trial.**
Liza Botros, Dept. Pulmonology, VU medical centre, Amsterdam, Netherlands
4. **Assessment of fibrosis and the effects of pirfenidone in experimental right heart failure.**
Stine Andersen, Aarhus University Hospital Skejby, Aarhus, Denmark
5. **Prediction of all-cause mortality and pulmonary hypertension (PAH) progression in systemic sclerosis (SSc), an echocardiography study.**
Anders Heiervang Tennøe, Dept. of Rheumatology, Oslo University Hospital (OUH), Oslo, Norway
6. **Serum levels of Vascular Endothelial Growth Factor C is associated with pulmonary arterial hypertension in Systemic Sclerosis.**
Henriette Didriksen, Dept. of Rheumatology, Oslo University Hospital (OUH), Oslo, Norway
7. **Impaired left ventricular performance in patients with precapillary pulmonary hypertension: CMR feature tracking study.**
Aušra Krivickiene, Hospital of Lithuanian University of Health Sciences Kauno Klinikos, Kaunas, Lithuania
8. **The effect of 6-Mercaptopurine treatment on experimentally induced pulmonary arterial hypertension.**
Xiao-Qing Sun, Dept. Pulmonology, VU medical centre, Amsterdam, Netherlands
9. **Respiratory rate modulation improve symptoms of dyspnoea in patients with PAH and CTEPH.**
Barbro Kjellström, BMA, PhD, Karolinska Institute, Stockholm, Sweden
10. **Platelet RNA profiling in lung vasculature educated platelets can serve as a highly specific tool for diagnosis and identification of PH subtypes.**
Josien Smits, Dept. Pulmonology, VU medical centre, Amsterdam, Netherlands
11. **Increased right atrial volume measured with cardiac magnetic resonance is associated with worse clinical outcome in patients with precapillary pulmonary hypertension.**
Ellen Ostenfeld/Anna Bredfeldt, Lund University, Dept of Clinical Sciences, Clinical Physiology and Skane University Hospital, Lund, Sweden
12. **Activated conventional dendritic cells as drivers in the pathophysiology of Idiopathic Pulmonary Arterial Hypertension (iPAH)?**
Thomas Koudstaal, Dept. Pulmonology, Erasmus MC, Rotterdam, Netherlands
13. **Mycophenolate Mofetil Versus Cyclophosphamide in Scleroderma Related PAH - in a Real Life Scenario.**
Håvard Fretheim, Dept. of Rheumatology, Oslo University Hospital (OUH), Oslo, Norway
14. **Successful treatment with balloon pulmonary angioplasty (BPA) in a patient with pulmonary hypertension associated with sarcoidosis.**
Jelco Tramper, Dept. Pulmonology, VU medical centre, Amsterdam, Netherlands

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15. **Right Ventricular Strain demonstrates a superior correlation with Magnetic Resonance Imaging with Right Ventricular Ejection Fraction compared with conventional echocardiographic methods.**
Anna Werther Evaldsson, The Section for Heart Failure and Valvular Disease, Skåne University hospital and Lund University, Sweden
16. **Changes in vascular morphology after balloon pulmonary angioplasty assessed by CT pulmonary angiography.**
Natalia Braams, Dept. Pulmonology, VU medical centre, Amsterdam, Netherlands
17. **BMPRII driven response on endothelial integrity and angiogenesis in PAH.**
Birger Tielemans, University Hospital Leuven, Belgium
18. **Strain by cardiac magnetic resonance is not lower in asymptomatic patients with systemic sclerosis compared to healthy controls.**
Anthony Lindholm, Lund University, Dept of Clinical Sciences Lund, Clinical Physiology and Skane University Hospital, Lund, Sweden
19. **Decreased biventricular longitudinal strain in patients with systemic sclerosis is mainly caused by pulmonary hypertension and not by systemic sclerosis per se.**
Anthony Lindholm, Dept of Clinical Sciences Lund, Clinical Physiology and Skane University Hospital, Lund, Sweden
20. **Health related quality of life, perception of treatment and psychosocial support in patients with PAH or CTEPH - a nation-wide study.**
Bodil Ivarsson, Skåne University Hospital, Lund, Sweden
21. **Assessment of operability and outcomes of patients with residual pulmonary hypertension after the correction of congenital heart defects.**
Virginija Rudiene, Vilnius University Hospital Santaros Klinikos, Vilnius, Lithuania
22. **Pulmonary hypertension in sarcoidosis; incidence and value of echocardiography**
Marloes Huitema, Dept. Cardiology, St. Antonius hospital, Nieuwegein, Netherlands
23. **Early postoperative analysis of residual pulmonary hypertension after pulmonary endarterectomy.**
Dieuwertje Ruigrok, Dept. Pulmonology, VU medical centre, Amsterdam, Netherlands
24. **Compliance of an extremely dilated main pulmonary artery in pulmonary arterial hypertension.**
Joanne Groeneveldt, Dept. Pulmonology, VU medical centre, Amsterdam, Netherlands
25. **The prognostic value of various biomarkers in patients with pulmonary hypertension; a multi biomarker approach**
Laurie Geenen, Dept. Cardiologie, Erasmus MC, Rotterdam, Netherlands
26. **Left ventricular global longitudinal strain and filling is decreased in patients with PAH; a CMR study.** Ellen Ostenfeld/Hannah Sjögren, Lund University, Dept of Clinical Sciences, Clinical Physiology and Skane University Hospital, Lund, Sweden (TBC)

20.30 - 22.30 h *Meet & greet dinner at venue*

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PRELIMINARY Program – DAY 2

Friday 15 December

06.30 - 07.30 h *Breakfast and hotel check out*

08.00 - 08.15 h **Chairmens' welcome**

Marion Delcroix^a / Anton Vonk Noordegraaf^b

Pre-clinical research – Moderators: Jørn Carlsen^c / Göran Rådegran^d

08.15 - 08.40 h Key note lecture on vascular remodelling and flow concepts

Robert Szulcek

08.40 - 09.00 h Research presentation on vascular remodelling

Kasper Hasseriis Andersen^c

09.00 - 09.20 h Endothelial function and BMPR-2

Rozenn Quarck^a

09.20 - 09.40 h Tumor markers in PAH patients

Habib Bouzina^d

09.40 - 10.00 h *Coffee/tea break*

Registries and Population based studies in PH – Moderators: Marion Delcroix^a / Göran Rådegran^d

10.00 - 10.25 h Key note lecture “What can we learn from registries in PAH?
Pitfalls & recommendations”

Marion Delcroix^a

10.25 - 10.45 h Research presentation on OPTIEK study

Anna Huis in 't Veld^b

10.45 - 11.05 h Research presentation on worldwide CTEPH registry

Kathleen Swinnen^a

11.05 - 11.25 h A comprehensive risk stratification at early follow up determines prognosis in PAH
– as evaluated on data from the SPAHR

David Kylhammar^e

11.25 - 11.45 h Discussion

11.45 - 13.00 h *Lunch*

Clinical forum – Moderators: Anton Vonk Noordegraaf^b / Jørn Carlsen^c

13.00 - 13.25 h Key note lecture – Echocardiography and MRI for diagnosis of PAH

Ellen Ostenfeld^d

13.25 - 13.45 h Research presentation on use of β -blockers in/for PAH

Jasmijn van Campen^f

13.45 - 14.05 h PAH and lung transplantation - Is the patient cured?

Jakob Lundgren^d

14.05 - 14.25 h Hemodynamics and myocardial adaptation in PAH
– insights from patient-specific model simulations

Niels Thue Olsen^h

14.25 - 14.40 h *Coffee/tea break*

14.40 - 15.00 h The origin and impact of low DLCO in PAH

Esther Nossent^b

Case reports – Moderators: Marion Delcroix^a / Anton Vonk Noordegraaf^b

15.00 - 15.30 h Treatment and follow-up in relation to ESC risk assessment in
PAH – a clinical case

Anna Werther-Evaldsson^d and
Göran Rådegran^d

15.30 - 16.00 h Case report 2

Giedrė Naudžiūnaitė^g

16.00 - 16.15 h Evaluation and Closing

Steering committee^{a-d}

a) University of Leuven

d) Skåne hospital Lunds University

g) Hospital of Lithuanian University of Health

b) VU medical centre Amsterdam

e) University Hospital Linköping

Sciences Kauno Klinikos

c) Rigshospitalet Copenhagen

f) MC Haaglanden Den Haag

h) Copenhagen University Hospital Gentofte

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