**Identity:** 

Title: Professor in Cardiology Family Name(s): de Boer First Name(s): Rudolf

Age: 51 years

### Application for the following position in the HFA Board or Nominating Committee:

Nominating Committee member



## Place of work

If you work in multiple places, please provide the one where you spend the most time or that you consider to be your main place of practice.

Institute/organisation:	Erasmus MC
Department:	Cardiology
Address:	Dr. Molewaterplein 40, Rotterdam
Post code / Zip:	3015 GD
Country:	the Netherlands

#### **General Curriculum Vitae (500 words max)**

Please also include your H index and top 5 to 10 publications in the last 5 years

Professor Rudolf de Boer is the Chair of Cardiology at the Erasmus MC, Rotterdam, the Netherlands. He studied medicine at the University of Groningen, completed research fellowships at the University of Utah, the University of Groningen, and at Harvard Medical School. His research group focuses on cardiac remodeling and heart failure, fibrosis, diabetes, and cardio-oncology, always trying to connect clinical observations to preclinical and mechanistic studies. He has studied biomarkers in clinical heart failure and in the general population, and focused on their role in the pathophysiology. Recently he focused on the interaction of heart failure and co-morbidities, especially cancer. He furthermore invested in the study of new onset HF in large population studies. Doctor de Boer's clinical interests are cardiogenetics, echocardiography and end-stage heart failure including VAD therapy and transplant. De Boer has authored and co-authored over 550 articles in peer-reviewed journals (<a href="https://www.ncbi.nlm.nih.gov/pubmed/?term=de+boer+ra">https://www.ncbi.nlm.nih.gov/pubmed/?term=de+boer+ra</a>), and his current Hindex (Web of Science) is 93. He received grants from the Netherlands Heart Foundation, the Dutch Organization for Scientific Research, and the European research Council (ERC). Dr. de Boer has been Associate Editor of the European Journal of Heart Failure from 2009-2020, and since 2020 is associate editor of European Heart Journal (section heart failure), as well as being ad-hoc reviewer for many journals.

## Top 10 articles:

- 1. Groenewegen A, ......, de Boer RA. Diagnostic yield of a proactive strategy for early detection of cardiovascular disease versus usual care in adults with type 2 diabetes or chronic obstructive pulmonary disease in primary care in the Netherlands (RED-CVD): a multicentre, pragmatic, cluster-randomised, controlled trial. *Lancet Public Health*. 2023:S2468-2667(23)00269-4. PMID: 38134944.
- 2. Withaar C, ...., de Boer RA. The Cardioprotective Effects of Semaglutide Exceed Those of Dietary Weight Loss in Mice With HFpEF. *JACC Basic Transl Sci.* 202; **8**:1298-1314. PMID: 38094687.
- 3. Brugts JJ, ..., de Boer RA; MONITOR-HF investigators. Remote haemodynamic monitoring of pulmonary artery pressures in patients with chronic heart failure (MONITOR-HF): a randomised clinical trial. *Lancet*. 2023; **401**:2113-2123. PMID: 37220768.
- 4. Arbelo E, ..., de Boer RA,....; ESC Scientific Document Group. 2023 ESC Guidelines for the management of cardiomyopathies. *Eur Heart J.* 2023; **44**(37):3503-3626. PMID: 37622657
- 5. Lyon AR, ...., de Boer RA, ...; ESC Scientific Document Group. 2022 ESC Guidelines on cardio-oncology developed in collaboration with the European Hematology Association (EHA), the European Society for Therapeutic Radiology and Oncology (ESTRO) and the International Cardio-Oncology Society (IC-OS). Eur Heart J. 2022; 43:4229-4361. PMID: 36017568.

- 6. Karlstaedt A, Moslehi J, de Boer RA. Cardio-onco-metabolism: metabolic remodelling in cardiovascular disease and cancer. *Nat Rev Cardiol.* 2022; **19**(6):414-425. PMID: 35440740.
- 7. de Boer RA, ..., Thum T. Targeted therapies in genetic dilated and hypertrophic cardiomyopathies: from molecular mechanisms to therapeutic targets. A position paper from the Heart Failure Association (HFA) and the Working Group on Myocardial Function of the European Society of Cardiology (ESC). *Eur J Heart Fail*. 2022; **24**:406-420. PMID: 34969177.
- 8. McMurray JJV, ..., de Boer RA, ...; DAPA-HF Trial Committees and Investigators. Dapagliflozin in Patients with Heart Failure and Reduced Ejection Fraction. *N Engl J Med.* 2019; **381**:1995-2008. PMID: 31535829.
- 9. Solomon SD, .... de Boer RA, ....; DELIVER Trial Committees and Investigators. Dapagliflozin in Heart Failure with Mildly Reduced or Preserved Ejection Fraction. *N Engl J Med.* 2022; **387**:1089-1098. PMID: 36027570.
- 10. Suthahar N, ....... de Boer RA. Sex-Specific Associations of Cardiovascular Risk Factors and Biomarkers With Incident Heart Failure. *J Am Coll Cardiol*. 2020; **76**:1455-1465. PMID: 32943164.

# Describe previous experience within the HFA, ESC and/or your National Cardiac/ HF Society 150 words maximum

De Boer was appointed a FESC in 2010, and is an HFA fellow since 2014. He has been an HFA Board Member from 2014-2020, where he coordinated the HFPEF committee, and was member of the study groups of biomarkers, cardio-oncology, and the Translational Committee, and was chair of the HFA Board's basic section from 2016-2018. He was the elected congress chair of the 2020 HFA congress in Barcelona, that was rescheduled to the first online HFA congress – HFA discoveries). He has been member of the ESC Education, Advocacy, and eHealth committees. Since 2020 he is board member of the ESC council of Cardio-oncology. De Boer was the ESC review coordinator of the 2021 ESC HF guidelines and 2023 update.

Nationally, he was president of the Heart Failure Working Group of the Dutch Society of Cardiology from 2014-2019, and is the current President of the Dutch Cardiac Society (term 2023-2025).

# Why are you motivated to join the HFA Board or Nominating Committee? 150 words maximum

I consider the election process of the HFA board and its committees as one of the most important institutions in the HFA. Selection and recruitment of skilful, talented and enthusiastic volunteers is crucial to ensure the long-standing vitality and success of HFA (and ESC). I have a very large network, both in the clinical, translational and basic field, and can easily reach out to people to motivate them to engage in activities. I look forward to shape the future and select the most suitable and excellent candidates.

# How will you combine your HFA position with your daily clinical/research workload? 80 words maximum

I am a very efficient worker and will devote the time needed for this committee. I understand this will be mostly online meetings.