



EAPC

European Association
of Preventive Cardiology

EAPC Practical Course on Preventive Cardiology

**Cardiovascular Prevention, Rehabilitation,
Sports Cardiology & Exercise**

**FOCUS ON THE
EAPC CORE
CURRICULUM
FOR PREVENTIVE
CARDIOLOGY**

**PROGRAMME
17 - 20 OCTOBER 2022
BERN, SWITZERLAND**

**INSELSPITAL
BERN UNIVERSITY HOSPITAL
Auditorium Maurice E. Müller, Entry 34**

EAPC Course Directors/ Local Organizing Committee

Matthias Wilhelm & Stephan Windecker | Department of Cardiology
Cardiovascular Centre, Inselspital, Bern University Hospital, Bern, Switzerland

Jean-Paul Schmid | Department of Cardiology, Klinik Gais, Gais, Switzerland

www.herzgefasszentrum.insel.ch/eapc



ESC

European Society
of Cardiology

COURSE OBJECTIVES

Preventive cardiology encompasses the whole spectrum of cardiovascular disease (CVD) prevention, at individual and population level, through all stages of life. This includes promotion of cardiovascular (CV) health, management of individuals at risk of developing CVD, and management of patients with established CVD, through interdisciplinary care in different settings.

Preventive cardiology addresses all aspects of CV health in the context of the social determinants of health, including physical activity, exercise, sports, nutrition, weight management, smoking cessation, psychosocial factors and behavioural change, environmental, genetic and biological risk factors, and CV protective medications.

The aim of this practical course is to cover the most important aspects of the field in state-of-the-art and translational science lectures, plenary discussions, case-based sessions, live demonstrations, and workshops. The audience has the possibility to discuss the most recent ESC guidelines and EAPC position papers with EAPC board and section members and other experts in the field. The patients' perspective is covered during the plenary discussions. Networking breaks should bring people from different professions together for a personal exchange.

The course serves as an opportunity to prepare for the EAPC certification in preventive cardiology, for cardiologists and allied health professionals alike.

EDUCATIONAL OBJECTIVES

The educational content is structured according to the EAPC Core Curriculum for Preventive Cardiology. Important aspects of all nine entrustable professional activities (EPAs) will be covered.

- Design, implement, and evaluate preventive interventions at the population level
- Manage individuals with multifactorial cardiovascular risk profiles
- Manage a patient with non-traditional cardiovascular risk factors
- Manage a prevention and rehabilitation programme for a cardiovascular patient
- Manage a prevention and rehabilitation programme for a cardiovascular patient with significant comorbidities, frailty, and/or cardiac devices
- Manage a cardiovascular prevention and rehabilitation programme for an oncology patient
- Manage pre-participation screening in a competitive athlete
- Manage the work-up of an athlete with suspected or known cardiovascular disease
- Use cardiopulmonary exercise testing for diagnosis, risk stratification and exercise prescription

TARGET AUDIENCE

This course is addressed to healthcare professionals working in the field of cardiovascular disease prevention, rehabilitation, sports cardiology and exercise. This encompasses cardiologists, internists, general practitioners, sports physicians, epidemiologists, public health specialists, and allied health professional like physiotherapists, sports scientists, nurses, nutrition specialists and psychologists.

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08:00-08:30

Welcome and coffee

08:30-10:00

Chair & Discussant: Nicolle Kränkel

08:30-09:00

Invasive interventions in CVD

Stephan Windecker

09:00-09:30

Atherosclerosis and Thrombosis

Yvonne Döhring

09:30-10:00

Plenary Discussion

10:00-10:30

Networking break

EPA 1.1 Design, implement, and evaluate preventive interventions at the population level

10:30-12:00

Chair & Discussant: Oscar Franco

10:30-10:50

Epidemiology of CVD - cohort studies

Vass Vassiliou

10:50-11:10

Interpretation of RCTs

Arjola Bano

11:10-11:30

Interpretation of systematic reviews / meta-analyses

Taulant Muka

11:30-12:00

Plenary Discussion

12:00-13:00

Lunch

EPA 2.1 Manage individuals with multifactorial cardiovascular risk profiles

13:00-14:00

Chair & Discussant: Jean-Paul Schmid

13:00-14:00

Risk assessment SCORE 2 and cardiac CT

Christoph Gräni

EPA 2.1 Manage individuals with multifactorial cardiovascular risk profiles

14:00-15:20

Chair & Discussant: Francois Mach

14:00-14:20

Dyslipidaemia

Konstantinos Koskinas

14:20 - 14:40	Arterial Hypertension Emrush Rexhaj
14:40 - 15:00	Diabetes Mellitus Andreas Melmer
15:00 - 15:20	Plenary Discussion
15:20 - 15:50	Networking break
EPA 2.2 Manage a patient with non-traditional cardiovascular risk factors	
15:50 - 17:10	Chair & Discussant: Elena Osto
15:50 - 16:10	Residual CV risk - thrombosis and inflammation Marco Valgimigli
16:10 - 16:30	Chronic kidney disease Bruno Vogt
16:30 - 16:50	Chronic obstructive pulmonary disease Nikolay Pavlov
16:50 - 17:10	Plenary Discussion

FACULTY OF MONDAY

Arjola Bano (Bern, Switzerland)
 Yvonne Döhring (Bern, Switzerland)
 Oscar Franco (Utrecht, The Netherlands)
 Christoph Gräni (Bern, Switzerland)
 Konstantinos Koskinas (Bern, Switzerland)
 Nicole Kränkel (Berlin, Germany)
 Francois Mach (Geneva, Switzerland)
 Andreas Melmer (Bern, Switzerland)
 Taulant Muka (Bern, Switzerland)
 Elena Osto (Zürich, Switzerland)
 Nikolay Pavlov (Bern, Switzerland)
 Emrush Rexhaj (Bern, Switzerland)

Jean-Paul Schmid (Gais, Switzerland)
 Marco Valgimigli (Lugano, Switzerland)
 Vass Vassiliou (Norwich, United Kingdom)
 Bruno Vogt (Bern, Switzerland)
 Stephan Windecker (Bern, Switzerland)

State-of-the-art lecture

Translational science lecture

Case-based sessions

Interactive live demonstrations

08:00 - 08:30

Welcome and coffee

08:30 - 10:00

Chair & Discussant: Stephan Gielen

08:30 - 09:00

CVD prevention from cradle to grave
Martin Halle

09:00 - 09:30

Mechanisms of cardiometabolic drugs
tba

09:30 - 10:00

Plenary Discussion

10:00 - 10:30

Networking break

EPA 3.1 Manage a prevention and rehabilitation programme for a CV patient

10:30 - 12:00

Chair & Discussant: Elena Tessitore

10:30 - 10:50

Core components of CR, accreditation/QI
Ana Abreu

10:50 - 11:10

CR modalities: centre-, hybrid-, home-based
Jean-Paul Schmid

11:10 - 11:30

Pre-programme CV assessment
tba

11:30 - 12:00

Plenary Discussion

12:00 - 13:00

Lunch

EPA 5.1 Use CPET for diagnosis, risk stratification and exercise prescription

13:00 - 14:00

Chair & Discussant: Stephanie Kiencke

13:00 - 14:00

CPET in a patient after acute MI
Local team

EPA 3.1 Manage a prevention and rehabilitation programme for a CV patient

14:00 - 15:20

Chair & Discussant: Kai Savonen

14:00 - 14:20

Endurance exercise training
Trine Moholdt

14:20 - 14:40

Resistance exercise training
Dominique Hansen

14:40 - 15:00	Medical management of ACS and CCS Monika Fürholz
15:00 - 15:20	Plenary Discussion
15:20 - 15:50	Networking break
EPA 3.1 Manage a prevention and rehabilitation programme for a CV patient	
15:50 - 17:10	Chair & Discussant: Mauro Capoferri
15:50 - 16:10	Nutrition and weight management tba
16:10 - 16:30	Cardiopsychology Sven Schmutz
16:30 - 16:50	Smoking cessation Reto Auer
16:50 - 17:10	Plenary Discussion
Novel treatments for dyslipidemias - Satellite Symposium sponsored by Novartis	
17:30 - 18:00	Focus on Inclisiran Acid Konstantinos Koskinas
18:00 - 18:30	Focus on Bempedoic Acid tba

FACULTY OF TUESDAY

Ana Abreu (Lisbon, Portugal)
 Reto Auer (Bern, Switzerland)
 Mauro Capoferri (Lugano, Switzerland)
 Monika Fürholz (Bern, Switzerland)
 Stephan Gielen (Detmold, Germany)
 Martin Halle (Munich, Germany)
 Dominique Hansen (Hasselt, Belgium)
 Stephanie Kiencke (Bern, Switzerland)
 Konstantinos Koskinas (Bern, Switzerland)
 Trine Moholdt (Trondheim, Norway)
 Kai Savonen (Kuopio, Finland)
 Jean-Paul Schmid (Gais, Switzerland)

Sven Schmutz (Bern, Switzerland)
 Elena Tessitore (Geneva, Switzerland)

State-of-the-art lecture

Translational science lecture

Case-based sessions

Interactive live demonstrations

Satellite Symposium

08:00 - 08:30 Welcome and coffee

08:30 - 10:00 Chair & Discussant: Matthias Paul

08:30 - 09:00 **Comprehensive heart failure management**
Massimo Piepoli

09:00 - 09:30 **Exercise is medicine in CVD and cancer**
Emeline Van Craenenbroeck

09:30 - 10:00 Plenary Discussion

10:00 - 10:30 Networking break

EPA 3.1 Manage a prevention and rehabilitation programme for a CV patient

10:30 - 12:00 Chair & Discussant: Massimo Piepoli

10:30 - 10:50 **Special aspects of heart failure**
Philippe Meyer

10:50 - 11:10 **Special aspects of arrhythmias**
Hildegard Tanner

11:10 - 11:30 **Special aspects in ACHD**
Fabienne Schwitz

11:30 - 12:00 Plenary Discussion

12:00 - 13:00 Lunch

EPA 5.1 Use CPET for diagnosis, risk stratification and exercise prescription

13:00 - 14:00 Chair & Discussant: Otmar Pfister

13:00 - 14:00 **CPET in a heart failure patient with CRT-D**
Local team

EPA 3.2 Manage a prevention and rehabilitation programme for a cardiovascular patient with significant comorbidities, frailty, and/or cardiac devices

14:00 - 15:20 Chair & Discussant: Pedro Manuel Marques-Vidal

14:00 - 14:20 **Significant comorbidities and frailty**
Jean-Paul Schmid

14:20 - 14:40 **PAOD**
Iris Baumgartner

14:40 - 15:00	CIEDs Roberto Pedretti
15:00 - 15:20	Plenary Discussion
15:20 - 15:50	Networking break
EPA 3.3 Manage a cardiovascular prevention and rehabilitation programme for an oncology patient	
15:50 - 16:50	Chair & Discussant: Emeline Van Craenenbroeck
15:50 - 16:10	Prevention of cardiotoxicity Teresa Lopez Fernandes
16:10 - 16:30	Exercise training and PA counselling Ana Abreu
16:30 - 16:50	Plenary Discussion
Medical management in HF - Satellite Symposium sponsored by AstraZeneca, Boehringer-Ingelheim, Novartis	
17:15 - 17:45	Focus on ARNI Micha Mäder
17:45 - 18:15	Focus on SGLT2i Matthias Paul
19:00	Networking dinner

FACULTY OF WEDNESDAY

Ana Abreu (Lisbon, Portugal)
 Iris Baumgartner (Bern, Switzerland)
 Teresa Lopez Fernandes (Madrid, Spain)
 Micha Mäder (St. Gallen, Switzerland)
 Pedro Manuel Marques-Vidal (Lausanne, Switzerland)
 Philippe Meyer (Geneva, Switzerland)
 Matthias Paul (Luzern, Switzerland)
 Roberto Pedretti (Sesto San Giovanni, Italy)
 Otmar Pfister (Basel, Switzerland)
 Massimo Piepoli (Milan, Italy)
 Jean-Paul Schmid (Gais, Switzerland)

Fabienne Schwitz (Bern, Switzerland)
 Hildegard Tanner (Bern, Switzerland)
 Emeline Van Craenenbroeck (Antwerp, Belgium)

State-of-the-art lecture

Translational science lecture

Case-based sessions

Interactive live demonstrations

Satellite Symposium

08:00 - 08:30 Welcome and coffee

08:30 - 10:00 Chair & Discussant: German Clenin

08:30 - 09:00 **The athlete's heart**
Flavio D'Ascenzi

09:00 - 09:30 **Exercise, fibrosis, CAC, and arrhythmias**
Josef Niebauer

09:30 - 10:00 Plenary Discussion

10:00 - 10:30 Networking break

EPA 4.1 Manage pre-participation screening in a competitive athlete

10:30 - 12:00 Chair & Discussant: Andrea Menafoglio

10:30 - 10:50 **SCD in sports**
Aaron Baggish

10:50 - 11:10 **PPE in children and adult elite athletes**
Silvia Castelletti

11:10 - 11:30 **PPE in master athletes**
Christian Schmied

11:30 - 12:00 Plenary Discussion

12:00 - 13:00 Lunch

EPA 5.1 Use CPET for diagnosis, risk stratification and exercise prescription

13:00 - 14:00 Chair & Discussant: Matthias Wilhelm

13:00 - 14:00 **CPET in an athlete**
Local team

4.2 Manage the work-up of an athlete with suspected or known CVD

14:00 - 15:20 Chair & Discussant: David Niederseer

14:00 - 14:20 **Myocarditis and cardiomyopathies**
Sabiha Gati

14:20 - 14:40 **Aortic and valvular heart disease**
Florian Schönhoff

14:40 - 15:00	Athletes with CIEDs Andreas Häberlin
15:00 - 15:20	Plenary Discussion
15:20 - 15:50	Networking break
Parallel workshops	
15:50 - 17:10	How to set up a CR programme Jean-Paul Schmid
	Telerehabilitation Tania Odello & Matthias Wilhelm
	Strenght and endurance training in CVD patients Local team
	ECG and cardiac imaging interpretation in athletes Christian Schmied & Flavio D'Ascenzi
	GRADE in Preventive Cardiology: Going From Evidence to Recommendations Arjola Bano

FACULTY OF THURSDAY

Aaron Baggish (Lausanne, Switzerland)
 Arjola Bano (Bern, Switzerland)
 Silvia Castelletti (Milan, Italy)
 German Clenin (Bern, Switzerland)
 Flavio D'Ascenzi (Siena, Italy)
 Sabiha Gati (London, United Kingdom)
 Andreas Häberlin (Bern, Switzerland)
 Andrea Menafoglio (Bellinzona, Switzerland)
 Josef Niebauer (Salzburg, Austria)
 David Niederseer (Zürich, Switzerland)
 Tania Odello (Castelrotto, Switzerland)
 Jean-Paul Schmid (Gais, Switzerland)
 Christian Schmied (Zurich, Switzerland)

Florian Schönhoff (Bern, Switzerland)
 Matthias Wilhelm (Bern, Switzerland)

State-of-the-art lecture

Translational science lecture

Case-based sessions

Interactive live demonstrations

Parallel workshops

GENERAL INFORMATION

● VENUE

BERN, SWITZERLAND

Inselspital, Bern University Hospital

Auditorium Maurice E. Müller, Entry 34

Nearest international airport: Zurich, Switzerland

● LOCAL ORGANIZING COMMITTEE

Matthias Wilhelm	Department of Cardiology, Cardiovascular Centre, Inselspital, Bern University Hospital, Bern, Switzerland
Stephan Windecker	Department of Cardiology, Cardiovascular Centre, Inselspital, Bern University Hospital, Bern, Switzerland
Jean-Paul Schmid	Schmid Department of Cardiology, Clinic Gais, Gais, Switzerland

Website for online & hotel registration: www.herzgefasszentrum.insel.ch/eapc

● SECRETARIAT

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REGISTRATION

The registration fee includes course participation, lunches, and coffee breaks.

Hotel accommodation and transportation are not included in the fees.

Special discount on registration fees of 20 % for EAPC Gold members, 10 % for EAPC Silver members and 5 % for EAPC Ivory members available.

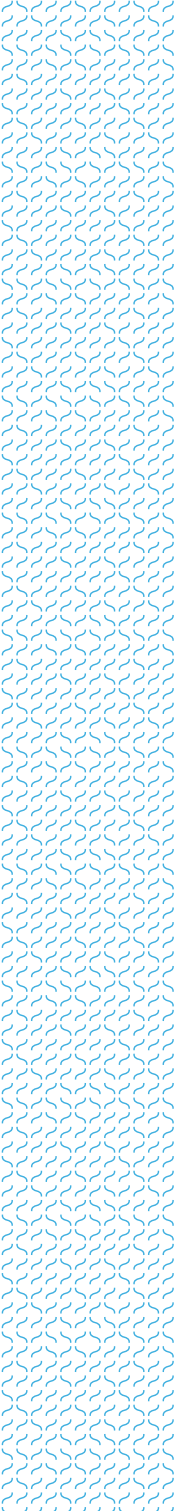
Packages	Early bird*	Regular fee	On-site payment
1 day	220 CHF	280 CHF	340 CHF
2 days	410 CHF	470 CHF	530 CHF
3 days	580 CHF	640 CHF	700 CHF
4 days	730 CHF	790 CHF	850 CHF

* Early bird registration until 30 August 2022

Dinner on Wednesday 19 October 2022: 20 CHF

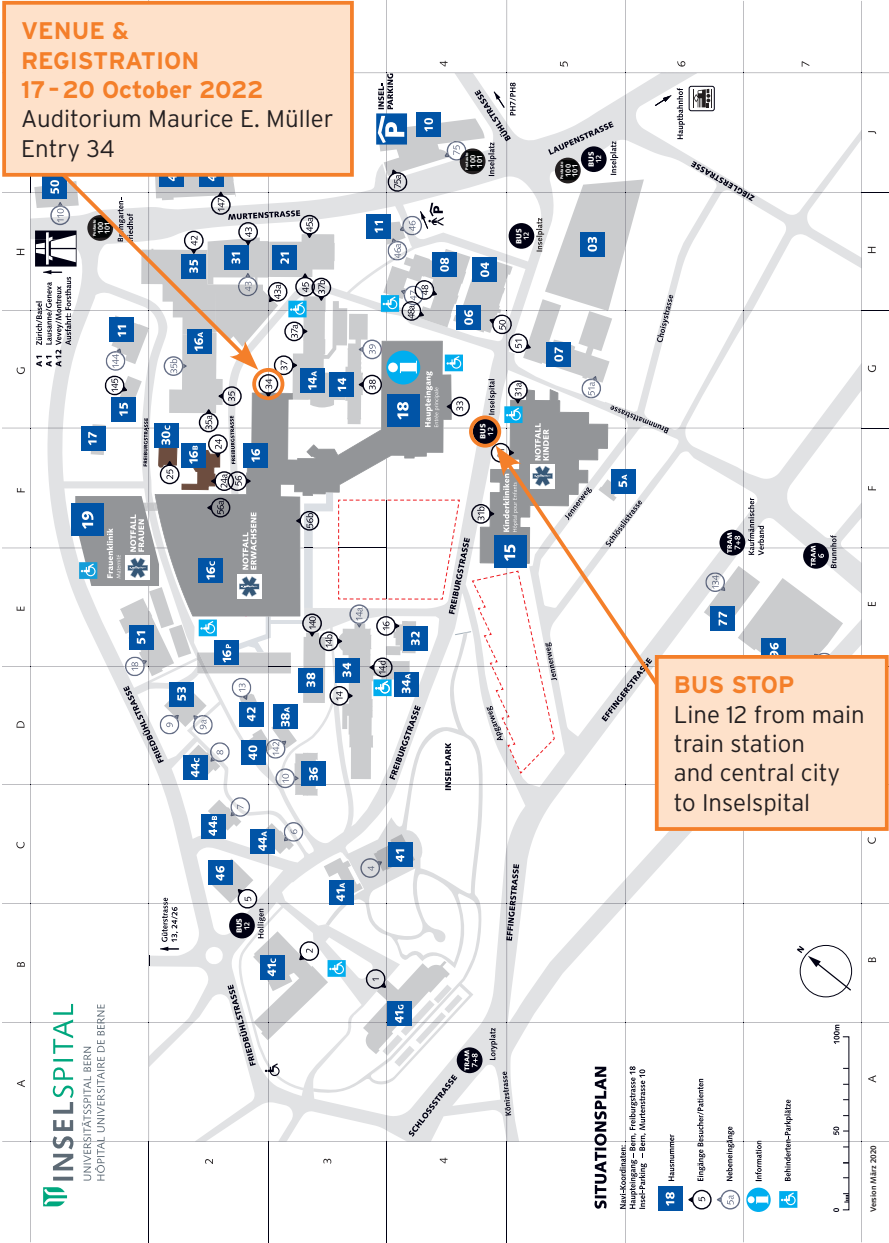
HOTEL ACCOMMODATION

Category	Single room per night	Twin room per night
****	140 - 260 CHF	160 - 280 CHF
***	140 - 203 CHF	160 - 245 CHF
**	130 - 160 CHF	150 - 180 CHF
*	95 - 150 CHF	143 - 190 CHF



**Novartis is
transforming
the course of
cardiovascular
diseases through
innovation
and research**

LOCATION PLAN



BRING PROTECTION TO LIFE

Forxiga® ist der erste und einzige SGLT2-Hemmer, der für 3 Erkrankungen indiziert ist¹

NEUE INDIKATION¹

Behandlung der chronischen Niereninsuffizienz bei adulten Patienten mit und ohne T2D^{1,*}

NEU: JETZT VON ESC EMPFOHLEN²

Behandlung der Herzinsuffizienz mit reduzierter Auswurfraction bei Patienten mit und ohne T2D^{1,*,###}

Prävention von Hospitalisierungen für Herzinsuffizienz oder CV Tod in Typ-2-Diabetes Patienten mit und ohne CV Erkrankung^{1,4,£}


forxiga (dapagliflozin)

Drei Indikationen. Eine Antwort.

Beginnen Sie jetzt die Therapie mit Forxiga® bei Ihren Patienten mit CKD*, HFREF^{###} oder T2D[£].

CKD: chronischer Niereninsuffizienz, HFREF: Herzinsuffizienz mit reduzierter Auswurfraction, T2D: Typ-2-Diabetes, CV: kardiovaskulär, LVEF: Linksventrikuläre Auswurfraction, NYHA: New York Heart Association. *Noch nicht kassenzulässig.³ *Behandlung der Herzinsuffizienz mit reduzierter Auswurfraction (LVEF $\leq 40\%$, NYHA Klasse II-IV) in Ergänzung zu anderen medikamentösen Therapien der Herzinsuffizienz bei erwachsenen Patienten.¹ **Kassenzulässigkeit: in geeigneter Kombination mit einer bereits zuvor stabil eingestellten Dosis eines ACE-Hemmer oder Angiotensin-II-Rezeptorantagonisten sowie anderen Therapien für Herzinsuffizienz (z.B. Betablocker, Diuretika und Mineralokortikoidantagonisten) für die Behandlung erwachsener Patienten mit Herzinsuffizienz der NYHA Klassen II-IV, deren Ejektionsfraktion der linken Herzkammer (LVEF) vor Behandlung mit Forxiga® $10\text{ mg} \leq 40\%$ beträgt. Nicht in Kombination mit der Fixkombination aus Sacubitril/Valsartan.³ †Patienten ohne CV Vorerkrankung mit folgenden Risikofaktoren: Alter ≥ 55 (Männer), ≥ 60 Jahre (Frauen) sowie Dyslipidämie, Hypertonie oder Rauchen oder Patienten mit manifest CV Erkrankung. **Referenzen:** 1. Fachinformation Forxiga®, www.swissmedinfo.ch. Stand der Information: August 2021. 2. Metra et al., Heart Failure Guidelines 2021: pharmacological treatment, A joint ESC/HFA Session. The treatment recommendations and their clinical implications. Oral presentation, Heart Failure Online Congress, 29 June to 1 July 2021. Virtual Congress. 3. Spezialitätenliste, www.spezialistenliste.ch. Letzter Abruf: 1.08.2021. 4. Wiviott SD et al. Dapagliflozin and Cardiovascular Outcomes in Type 2 Diabetes. N Engl J Med. 2018; DOI: 10.1056/NEJMoA1812389. **Kurzfachinformation: Forxiga® Z:** Dapagliflozin (5mg, 10mg Filmtabletten) Liste B. It: Forxiga® ist in Ergänzung zu Diät und körperlicher Betätigung bei Erwachsenen (ab 18 Jahren) mit unzureichend kontrolliertem Diabetes mellitus Typ 2 indiziert: Als Monotherapie; Als Add-on-Kombinationstherapie mit anderen blutzuckersenkenden Arzneimitteln; Als initiale Kombinationstherapie mit Metformin. Informationen zu Kombinationsbehandlungen und Auswirkungen auf kardiovaskuläre Ereignisse siehe www.swissmedinfo.ch. Behandlung der Herzinsuffizienz mit reduzierter Auswurfraction (LVEF $\leq 40\%$, NYHA Klasse II-IV) in Ergänzung zu anderen medikamentösen Therapien der Herzinsuffizienz bei adulten Patienten. Indiziert zur Senkung des Risikos der Progression einer chronischen Nierenerkrankung bei adulten Patienten mit chronischer Nierenerkrankung. D: Diabetes mellitus: Anfangsdosis: 1 x täglich 5mg; bei guter Verträglichkeit und ungenügender glykämischer Kontrolle Erhöhung auf 1 x täglich 10mg. Herzinsuffizienz & Chronische Nierenerkrankung: 1 x täglich 10mg. KI: Überempfindlichkeit gegenüber dem Wirkstoff oder einem der Hilfsstoffe. V: Nicht empfohlen bei: Diabetes mellitus Typ 1 oder diabetischer Ketoazidose, hereditäre Galactose-Intoleranz, Lactase-Mangel oder Glucose-Galactose-Malabsorption. Begrenzte Erfahrung bei eGFR $< 25\text{ ml/min/1.73 m}^2$; bei eGFR anhaltend $< 45\text{ ml/min/1.73 m}^2$ nicht zur Behandlung des Diabetes. Keine Erfahrungen für die Behandlung der chronischen Nierenerkrankung bei Patienten ohne Diabetes mellitus, die keine Albuminurie haben. IA: Dapagliflozin kann den diuretischen Effekt von Diuretika verstärken. UAW: Sehr häufig: Hypoglykämie (bei Anwendung mit SU oder Insulin). Häufig: Vulvovaginitis, Balanitis und verwandte Infektionen des Genitalbereichs, Harnwegsinfektionen, Volumenmangel, Rückenschmerzen, Polyurie, erhöhter Hämatokrit, Dyslipidämie. Gelegentlich, selten, sehr selten: siehe www.swissmedinfo.ch. Nach Zulassung: Diabetische Ketoazidose, Fournier's Gangrän, Urosepsis, Pyelonephritis. **Stand der Information:** August 2021. Weitere Informationen: www.swissmedinfo.ch oder AstraZeneca AG, Neuhofstrasse 34, 6340 Baar. www.astrazeneca.ch

CONTINUING MEDICAL EDUCATION

The EAPC Educational Course

**“EAPC Practical Course on Preventive Cardiology -
Cardiovascular Prevention, Rehabilitation, Sports Cardiology & Exercise
Focus on the EAPC Core Curriculum for Preventive Cardiology”**

has been submitted to the **European Union of Medical Specialists -
The European Accreditation Council for Continuing Medical Education
(EACCME®)**.

Credits Switzerland

SGK: 28 Credits 1B
AIM: 28 Credits
SEMS: submitted
Physioswiss: 26 Credits
SGPMR: 26 Credits

This educational programme has received unrestricted grants from:



ALL-IN-ONE ECOSYSTEM

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COSMED
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Living. Proof.

For you, it's about following
the latest guidelines.

For him, it's about
getting back on stage.

The 2021 ESC/EACTS guidelines
recommend that all sAS patients*
should be referred to a Heart Team¹



*Patients with treatment indication

Reference:

1. Vahanian A, et al. Eur Heart J. 2021; ehab395. doi:10.1093/eurheartj/ehab395.

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