

Cardiology | Update 17



First Announcement

An ESC Update Programme Davos, Switzerland, 11 – 15 February 2017

22nd International Postgraduate Course
on Cardiovascular Disease

Programme Directors

Thomas F. Lüscher, Zurich
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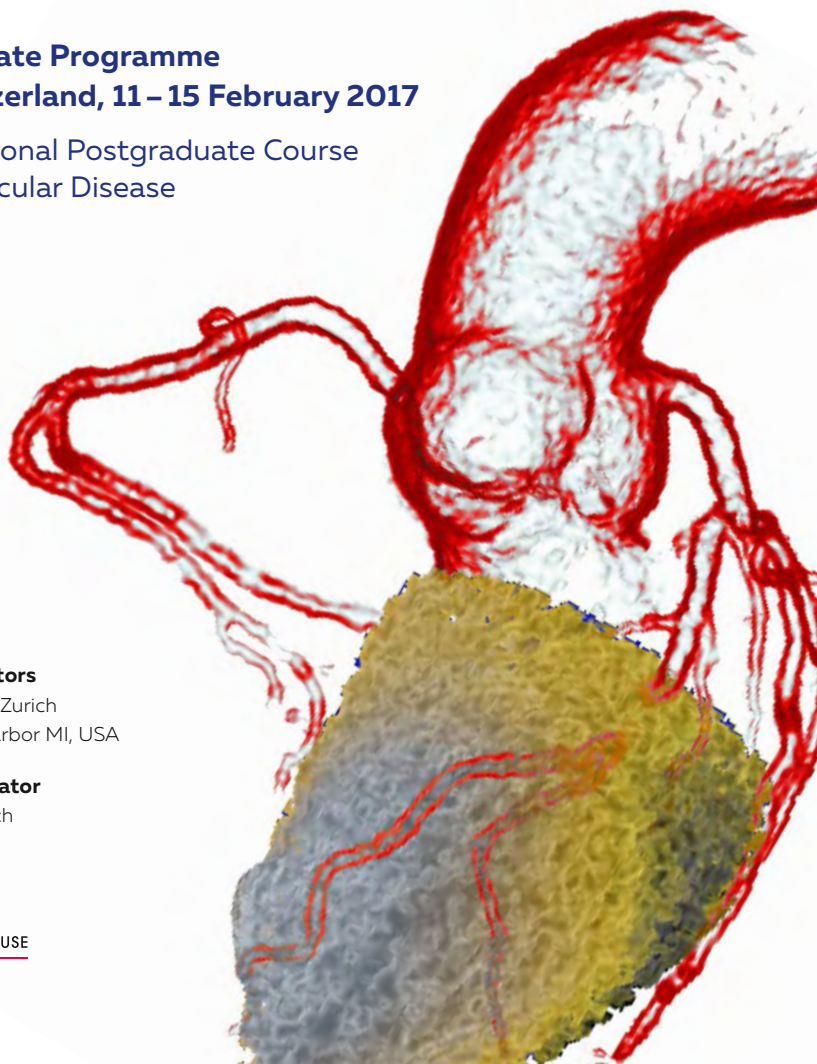
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Ruth Amstein, Zurich



**ZÜRICH
HEART HOUSE**

foundation for
cardiovascular
research



Dear Colleagues

We are pleased to announce the 22nd Cardiology Update Course, taking place in Davos, Switzerland from 11 – 15 February 2017. This four-day programme will offer a comprehensive update of major topics in cardiology, presented by a distinguished international teaching faculty. Since its foundation in 1975, Cardiology Update has been held every second year in Davos, and the course has benefited from a growing reputation and increasing number of participants over the years. The course is a joint educational programme of the Zurich Heart House / Foundation for Cardiovascular Research, the European Society of Cardiology (ESC) and the Brigham and Women's Hospital in Boston.

The educational objectives are to review and disseminate recent advances in the prevention, diagnosis, and treatment of cardiovascular disease, as well as to discuss their impact on clinical practice. Completing this course will enable attendees to treat patients in accordance with current clinical evidence over the broad spectrum of cardiovascular disease, including atherosclerosis and its risk factors, coronary artery disease, acute coronary syndromes, arrhythmias, valve disease and heart failure. Special lectures and updates will be dedicated to the new ESC Practice Guidelines to support physicians in clinical decision-making.

Cardiovascular clinicians including internists and primary care physicians will benefit from this four-day summit on the latest scientific updates, approaches and guidelines to better serve patients. Aside from traditional state-of-the-art lectures, a strong emphasis is also placed on interactive education, aiming to provide guidance in everyday practice. The features include case presentations with computer-assisted voting, clinical-decision-seminars and meet-the-expert-sessions. Moderated poster sessions will provide an opportunity for young researchers to present their new scientific findings and interact with experts. The spirit of the course is a stimulating working and learning environment, offering great opportunities for networking among faculty members and participants.

We are looking forward to welcoming you at the next Cardiology Update in 2017.



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In collaboration with



Under the Auspices of



ZURICH HEART HOUSE
 foundation for cardiovascular research

	12	13	14	15
	Sun, 12 February	Mon, 13 February	Tue, 14 February	Wed, 15 February
08:00	Paul Lichtlen Lecture Atherosclerosis, Genetics	Lipid management Diabetes	Atrial fibrillation	Aortic valve disease
09:30	10:00 – 10:30 COFFEE	COFFEE	COFFEE	COFFEE
10:00	10:30 – 11:30 Hypertension	PARALLEL SESSIONS 1. Stable coronary artery disease 2. Cardiac imaging	Cardiomyopathies, Sudden cardiac death	Heart failure I
12:00	LUNCH Satellite Symposia	LUNCH Satellite Symposia	LUNCH Satellite Symposia	LUNCH Satellite Symposia
13:30	Risk factors and prevention	Thrombosis and pulmonary embolism	Percutaneous interventions	Heart failure II
15:00	COFFEE	COFFEE	COFFEE	COFFEE
15:30	PARALLEL SESSIONS Meet the expert Poster session	PARALLEL SESSIONS Meet the expert Poster session	PARALLEL SESSIONS Meet the expert Live in-a-box Poster session	15:15 – 16:00 Meet the expert
16:30	PARALLEL SESSIONS 1. Sports cardiology 2. Congenital heart disease	PARALLEL SESSIONS 1. Ventricular arrhythmias 2. Pulmonary hypertension	PARALLEL SESSIONS 1. Mitral valve regurgitation 2. Acute coronary syndromes	16:15 – 16:30 Poster Award 16:30 – 17:00 Davos Lecture 17:00 – 17:15 Closing Remarks
17:30	DINNER BUFFET	DINNER BUFFET	APERITIF	
18:00	Satellite Symposia	Satellite Symposia	Satellite Symposia	
19:20	PARALLEL SESSIONS Clinical Decision Seminars Echo pearls Cardiovascular imaging	PARALLEL SESSIONS Clinical Decision Seminars Difficult ECG interpretations ICD and CRT: troubleshooting		

Registration

Registrations have to be submitted online: www.cardiologyupdate.ch

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Organisation



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Accreditation

Cardiology Update will be submitted for accreditation to the following medical societies:

- EBAC, European Board for Accreditation in Cardiology
- Swiss Society of Cardiology
- German Cardiac Society

Sponsors

Confirmation received by February 2016.

Gold Plus



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Gold



Silver

Actelion

The sponsoring grants are used exclusively for the organisation of the scientific programme.

General Information

Venue

Congress Center, Davos, Switzerland, www.davoscongress.ch

Registration

Registrations can be made exclusively online on our website:
www.cardiologyupdate.ch

Registration fee before 20 December 2016: CHF 980.–

Registration fee after 20 December 2016: CHF 1100.–

On-site Registration: CHF 1200.–

Participant <35 years:

Full price: CHF 770.–

Early registration: CHF 670.–

On-site registration: CHF 840.–

Registration fee for fellows and nurses

(identification requested): CHF 490.–

Single day tickets Sunday–Wednesday: CHF 300.–

Registration will be confirmed upon receipt of payment.

Group Registration

For group registration a minimum of 10 participants is required.

Please contact Mrs. Esther Willi (esther.willi@usz.ch) to obtain further information.

Congress documents and bags can be collected as early pick-up upon request.

Modification & Cancellation

All modifications or cancellations must be notified in writing (by mail, fax or e-mail) to Medworld AG. For each modification requested by the participant, CHF 50.00 will be charged for administrative costs. In case of cancellation up to **14 January 2017**, deposits will be refunded less 35% for administrative costs. After this date, no refund will be possible.

Hotel Reservation

Hotel rooms are available at a special convention rate.

Reservations can be made on our website www.cardiologyupdate.ch

or at Davos Congress cardio@davos.ch.

Abstracts

Abstracts for the Poster Session can be submitted exclusively on our website www.cardiologyupdate.ch. An Abstract Booklet will be published.

Deadline for submission: 18 December 2016, Midday CET.

Travel Information



Best booking flexibility with Swiss product and service quality at an attractive discount – offered to you by Swiss International Air Lines as Official Carrier for the **Cardiology Update 2017 in Davos**. As the Swiss national airline, we offer all participants up to 10% discount on the standard fares. Your stay in Switzerland starts on board our aircraft.

The reduced conference fares are specially marked with a white triangle and, depending on the chosen fare, allow you to change or cancel your flight with complete ease. All reductions depend on the type of fare, route and availability. They are valid on the entire SWISS route network for flights to Switzerland (flight numbers LX1-2999), including flights that are operated by our partner airlines under an LX flight number (LX 8000 – 8999). Thanks to the new fare options, you now have even more choice on SWISS European flights, and only pay for what you really need.

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SWISS looks forward to pampering you on board with typical Swiss hospitality.

Journey from Zurich Airport to Davos

The closest airport to Davos is Zurich Airport. Davos can be reached from the airport by train. Trains run on a half hourly basis. The duration of the journey is approximately 3 hours. Timetables of the Swiss railroad network can be found on: www.sbb.ch

Evidenz¹⁻⁴

Erfahrung²⁻⁵

Xarelto[®]

Wirksamkeit und Sicherheitsprofil bei nvVHF in Real-Life bestätigt¹⁻⁴

Das meistverschriebene NOAK in der Schweiz und weltweit⁵

Xarelto[®]
rivaroxaban

nvVHF = nicht-valvuläres Vorhofflimmern, NOAK = neue orale Antikoagulantien.

Referenzen: **1.** Fachinformation Xarelto[®] Schweiz (Stand Februar 2014). **2.** Beyer-Westendorf et al., Rates, management, and outcome of rivaroxaban bleeding in daily care: results from the Dresden NOAC registry. *Blood* 2014; 124(6): 955–62. **3.** Tamayo et al. Characterizing Major Bleeding in Patients With Nonvalvular Atrial Fibrillation: A Pharmacovigilance Study of 27 467 Patients Taking Rivaroxaban. *Clin Cardiol.* 2015; 38 (2): 63–68. **4.** Camm et al. XANTUS: a real-world, prospective, observational study of patients treated with rivaroxaban for stroke prevention in atrial fibrillation. *Eur Heart J.* 2015. doi:10.1093/eurheartj/ehv466 [Epub ahead of print]. **5.** IMS Health MIDAS, Database: Monthly Sales December 2014.

Gekürzte Fachinformation Xarelto[®] (Rivaroxaban): Direkter Faktor Xa-Inhibitor **Z:** Filmtabl. zu 10, 15 und 20 mg Rivaroxaban. **I:** a) Thromboseprophylaxe bei grösseren orthopädischen Eingriffen a. d. unteren Extremitäten wie Hüft- und Knieprothesen. b) Behandlung von Lungenembolie (LE) und tiefer Venenthrombose (TVT) sowie Prophylaxe rezidivierender TVT und LE. c) Schlaganfallprophylaxe und Prophylaxe system. Embolien bei nicht-valvulärem Vorhofflimmern. **D:** a) 1x/Tag 10 mg. b) 2x/Tag 15 mg für die ersten 21 Tage, gefolgt von 20 mg 1x/Tag c) 1x/Tag 20 mg; bei Krea-Cl 15–49 ml/min: 1x/Tag 15 mg. 15 mg und 20 mg während Mahlzeit einnehmen. **KI:** Überempfindlichkeit auf Inhaltsstoffe, akute bakt. Endokarditis, klin. sign. aktive Blutungen, schw. Lebererkrankung/Lebersuffizienz (L) mit relev. erhöhtem Blutungsrisiko; leichte L in Komb. mit Koagulopathie, dialysepflicht. Niereninsuffizienz (NI), akute gastrointestinale (GI) Ulzera oder GI ulzerative Erkrankungen, Schwangerschaft, Stillzeit. **VM:** Komedikation (siehe «IA»); <18 Jahre; künstl. Herzklappen; d. Hämostase beeinfl. Arzneimittel. **VM:** NI (Krea-Cl 15–29 ml/min) od. NI in Komb. mit Arzneimitteln, die den Xarelto[®]-Plasmaspiegel erhöhen, erhöhtes Risiko unkontrollierter Blutungen und hämorrhag. Diathese, kurz zurückliegender hämorrhag. Schlaganfall, intrakran. o. intrazerebr. Hämorrhagie, kürzlich aufgetretene GI Ulzera/ulzerative Erkrankungen, schwere unkontrollierte Hypertonie, vask. Retinopathie, intraspinale o. intrazerebr. Gefässanomalien, kurz zurückliegende Hirn-, Spinal-, Augen-OP, Bronchiektasie oder pulmonale Blutung in der Anamnese, Spinalanästhesie und -punktion, mind. 24 Stunden vor Invasiven Verfahren/chirurgischen Eingriffen absetzen, gleichzeitige Gabe von d. Hämostase beeinfl. Arzneimitteln. **Häufige UAW:** Blutungen, Anämie, Schwindel, Kopfschmerz, Augenblutungen, Hämatome, Epistaxis, Hämoptysis, Nausea, Obstipation, Durchfall, Leberenzym erhöhungen (ASAT, ALAT), Pruritus, Rash, Schmerzen i. d. Extrem., Fieber, periph. Ödem, Asthenie. **IA:** Starke CYP 3A4 + P-gp-Inhib. (Ritonavir, Ketoconazol), starke CYP 3A4 + P-gp-Induk. (Rifampicin, Carbamazepin, Phenobarbital, Johanniskraut), d. Hämostase beeinfl. Arzneimittel. **Stand d. Information:** Feb. 2014. Packg.: 10 mg à 10 und 30; 15 mg und 20 mg à je 14, 28 o. 98 Filmtabl.; jew. Klinikpackung 10x 1 Filmtabl. (B), kassenzulässig. Für weitere Informationen siehe www.swissmedinfo.ch.
Vertrieb: Bayer (Schweiz) AG, Bayer Healthcare, Grubenstr. 6, 8045 Zürich. L.CH.HC.04.2014.0413-DE/FR/IT