



Acute Cardiovascular
Care Association

Acute Cardiovascular Care Association meets INDUSTRY PARTNERS

ESC Acute Industry Forum
12 June 2019



ESC
European Society
of Cardiology

AGENDA



Acute Cardiovascular
Care Association

11h-12h30 – Plenary session – Room Solar

- o Welcome & Round table
- o About the ESC Acute association
- o Future development in the field of Acute Cardiovascular care
- o Opportunities for collaboration

12h30-13h15 – Finger food Lunch – Buffet area

13h15 – 17h00 –Face to face meetings (Mercury / Meteor)

- o What can we do together - individual meetings running in parallel (45 minutes each)

About the association



Acute Cardiovascular
Care Association

1st in the world to define the practice, training and education of healthcare professionals involved in managing our most critically ill cardiovascular patients.

The Acute Cardiovascular Care Association promotes

- **Research and education**
- **Disseminating knowledge** of new and emerging science in the field of acute cardiovascular care.
- **Collaboration with other subspecialties** in cardiology, cardiac surgery, anesthesia and intensive care, representing the wider multidisciplinary team, with the patient at the heart of what we deliver.

The Acute Cardiovascular Care Association is influential in guiding National Cardiac Societies towards a set of common standards for the delivery of state-of-the art treatments to patients admitted to intensive care units.

Its vision is to improve the quality of care and outcomes of patients with acute cardiovascular diseases. It plays a multidisciplinary and multiprofessional role at the heart of the ESC



Opportunities for collaboration

Acute Cardiovascular Care Association priorities

- **Webinars (part of the programmes or stand alone)**
- **Stand alone Acute Cardiovascular Care School**
- **Handbook on HM**
- **Handbook on MCS**
- **POCMI (already in discussion with AMGEN & SANOFI)**

+ tailored model

Congress & Hands on Tutorial

Future opportunities

- 4 Programmes (tailored sponsorship model)
- Research prize
- Clinical Decision Making Toolkit reprints
- ESCEL modules
- AcuteCVDays marketing campaign

Webinars



- 4 webinars per year (stand alone or part of programme)
- Target audience: All physicians with an interest in Acute Cardiovascular Care (+50 000 pax), Cardiologists and Non-cardiologists
- A 60-minute live course, case based, including online assessment and Q&A.
- 2 speakers & 1 moderator - key opinion leaders in the field
- Questions & answers session during the course
- CME credits: The programmes is submitted to the European Accreditation Council for Continuing Medical Education (EACCME) for CME accreditation.
- Sponsorship: 25K
- ESC Acute webinars have record participation

<u>Average</u>	Registration	Attendance
Acute webinar 2018	823	250
ALL ESC webinar 2018	643	254
Acute webinar 2017	920	296
ALL ESC webinar 2017	752	256

Acute Cardiovascular Care SCHOOL



Acute Cardiovascular
Care Association

- **2 days practical hands-on meeting, aimed to train young doctors on how to best treat patients with acute cardiovascular diseases.**
- **Restricted to 60 seats - (min 40 max 60)**
 - 2017 & 2018 – Madrid (SP)
 - 2019 – Barcelona (SP)
- **1 plenary + 6 workshop* for small groups to optimize learning outcome.**
 - Echo guided vascular access
 - Difficult airway
 - Clinical cases with advanced simulation (1)
 - Clinical cases with advanced simulation (2) - alternatively invasive and non-invasive mechanical ventilation
 - ECMO

(* May vary)
- **2 Sponsorship models to be discussed**

Package # 1 – General for the whole School - Financial support of 15 000 € per sponsor

Package # 2 – Sponsor per session - Financial support of 10 000 € per sponsor



ESC Handbook on Hemodynamic Monitoring



Acute Cardiovascular
Care Association

Editor: Josep Masip (SP)

Co-editor: Christian Mueller (CH)

Designed to provide a rapid and systematic guidance to cardiologists and allied professionals confronted with patients in critical scenarios.

Phase 1 and 2

electronic version is a reduced-text document aimed to provide rapid, systematic and interactive guidance.

Phase 3

A web-based advanced version for tablets and smartphones

Sponsorship (Approx)

1. Online handbook - 70K
2. Printed booklets (200) - 18K
3. Web-based interactive platform - 90K

I. BASIC CONSIDERATIONS		
1	Introduction	<i>J. Masip (Spain) and Christian Mueller (CH)</i>
2	Crucial parameters and systems for monitoring in the ICU	<i>M. Pinsky (USA)</i>
3	Indications for hemodynamic monitoring	<i>J.L. Vincent (Belgium)</i>
II. TECHNIQUES FOR HEMODYNAMIC MONITORING		
4	INVASIVE HEMODYNAMIC MONITORING	
4.1.	Intravascular access	<i>A. Rudiger (CH)</i>
4.2.	Essential Invasive Techniques	<i>H. Bueno (Spain)</i>
5	NONINVASIVE HEMODYNAMIC MONITORING	
5.1.	Basic non-invasive monitoring	<i>Ch. Mueller (CH)</i>
5.2.	Assessment of Cardiac Output and Perfusion	
5.2.1	Minimally invasive assessment of CO	<i>E. Gayat (France)</i>
5.2.2.	Non-invasive assessment of CO	<i>D. Zahger (Israel)</i>
5.2.3.	Direct and indirect evaluation of microcirculation	<i>X. Garcia and J. Mesquida (Spain)</i>
5.3.	Ultrasounds at bedside	
5.3.1.	Echocardiography	
5.3.2.	(I) LV function and filling pressures	<i>S. Price (UK)</i>
5.3.3.	(II) RV function and systemic venous pressures	<i>J. Celutkine (Lithuania)</i>
5.3.4.	Lung ultrasound	<i>E. Platz (USA)</i>
5.3.5.	Renal, abdominal, intracranial, ocular, diaphragm and other ultrasound techniques	<i>Jonas Oehman (Finland)</i>
6	Preload responsiveness	<i>JL. Teboul (France)</i>
III. SPECIFIC CLINICAL SCENARIOS		
7	General approach to shock states	<i>A. Mebazaa (France)</i>
8	Acute left ventricular failure	
8.1	(I) Acute pulmonary oedema. ADHF.	<i>J. Masip (Spain)</i>
8.2.	(II) Cardiogenic shock	<i>U. Zeymer and H. Thiele (Germany)</i>
9	Right ventricular failure	<i>A. Vieillard-Baron (France)</i>
10	Acute MR and VSD	<i>V.P. Harjola (Finland)</i>
11	Cardiac Tamponade and Constriction	<i>E. Bonnefoy (France)</i>
12	Septic shock	<i>D. De Backer (Belgium)</i>
13	Hypovolemic shock	<i>A. Sionis (Spain)</i>
14	Intra-abdominal hypertension	<i>M. Malbrain (Belgium)</i>
14	Mechanical Ventilation	<i>C.L. Alviar (USA)</i>
16	Haemodynamics during mechanical circulatory support	<i>P. Vranckx (Belgium)</i>
17	Cardiac arrest and Post-CA	<i>C. Hassager (CH)</i>
IV. THE FUTURE. APPENDIX		
18	Hemodynamic monitoring in the future	<i>M. Cecconi (UK)</i>
19	Adjunctive Tables, Figures and Scores. Automatic score calculations	<i>F. Chacon-Lozano (Ven) and K. Czerbinska (Pol) (YOUNG ACCA)</i>
References		

ESC Handbook on Mechanical Circulatory Support



Acute Cardiovascular
Care Association

Editor: Pascal Vranckx (BE)
Co-editor: Susanna Price (UK)

Designed to allow quick access to most relevant
practical information on MCS

Phase 1 and 2

electronic version is a reduced-text document
aimed to provide rapid, systematic and interactive
guidance.

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smartphones

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Introduction	S. Price, P. Vranckx
Physiology of mechanical circulatory support	D. Burkhoff.
Physiology of pulsatile and non-pulsatile circulation	D. Markham
Percutaneous circulatory support to the left ventricle (e.g. Intra-aortic balloon counterpulsation; Tandemheart; axial flow devices; Abiomed impella, Thoratec Heart Mate PHP, Mechanical biventricular support with membrane oxygenation (ECMO))	H Thiele
Percutaneous circulatory support to the right ventricle	NK Kapur
Extracorporeal Membrane Oxygenation (ECMO)	D. Brodie
Totally Implanted Left Ventricle Assist Device (e.g. volume displacement, rotary-axial, rotary-centrifugal, Rotary-mixed design)	J. Pepper
Total Artificial Hearts	WE Cohn, OH Frazier (or merged to J Pepper chapter)
Patient profiles on Mechanical Circulatory Support	M Veselin
Mechanical Circulatory Support in the adult patient	MR Mehra
Mechanical Circulatory Support in Children	G Peek
Mechanical Circulatory Support in Special subgroups	A. Vuylsteke
ECMO. Physiology of gas transfer on ECMO	E. Fan
ECMO. Keypoints on mechanical ventilation during VA and VV ECMO	L. Brochard (or Matthieu Schmidt)
ECMO in the intensive care.	C Van Kiersbilck
ECMO. How to set up an ECMO team.	Alain Combes
ECMO. Monitoring while on circulatory support.	Anthony Carlese
ECMO. Troubleshooting. Complications.	D. Sidebotham
ECMO. Imaging and wheaning.	S. Price.
Implanted MCS. Care in the intensive care.	A. Simon/C. Hassager
Implanted MCS Care in the outpatient setting.	P Gerhard
Implanted MCS implanted. Troubleshooting. Complications.	J. Christopher Farmer
Implanted MCS implanted. Imaging.	J. Bax

POCFMI

Acute Cardiovascular Care Association (Acca) / EAPC project
+ Contribution of ACNAP & ESC Patient forum in TF

September 2019 – April 2020 (8 months)

Project Definition and scope, design, methodology

May 2020 - October 2020 (6 months)

Gaps evaluation & analysis / needs assessment (for knowledge & practice)

October 2020 – January 2021 (4 months)

Project Outcome (papers to be published in 2021, definition of next steps)

Sponsorship on going



Acute Cardiovascular
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Opportunities for collaboration

Acute Cardiovascular Care Association priorities

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Congress & Hands on Tutorial

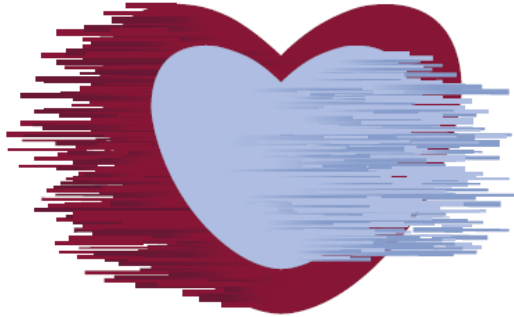
Future opportunities

- 4 Programmes (tailored sponsorship model)
- Research prize
- Clinical Decision Making Toolkit reprints
- ESCEL modules
- AcuteCVDays educational campaign



Acute Cardiovascular
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ACUTE CARDIOVASCULAR CARE2020



7-9 March 2020
Athens, Greece

INDUSTRY PROSPECTUS

www.escardio.org/acuteCVD
#AcuteCVD20



Acute Cardiovascular
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MARK YOUR CALENDAR

Learn, exchange and update your skills at the annual congress of the Acute Cardiovascular Care Association of the ESC.

Key figures:

- +1 000 participants from +70 countries
- +600 abstract submitted
- +60 sessions and workshops
- Challenging case presentations
- Hand On Sessions
- 115 international expert faculty
- Industry-sponsored sessions



Congress opportunities

Key reasons to sponsor

ESC Acute Cardiovascular Care Congress is the leading European meeting for any health care professional caring for patients with acute cardiovascular diseases.

This is the natural platform for professionals to learn, exchange and disseminate best practices in this setting.



Acute Cardiovascular
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- **Sponsored sessions**
- **Satellites**
- **Stand**
- **Practical Hands on sessions**
- **Mobile app**
- **Delegate Bags, badges holders**
- **Congress news adverts**



Opportunities for collaboration

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Congress & Hands on Tutorial

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Acute Cardiovascular Care Association Programmes



Acute Cardiovascular
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4 programmes (18 months)

- Acute Heart Failure and Cardiogenic Shock
- Acute Cardiovascular Ischemia
- Venous Thromboembolism
- Severe acute arrhythmias, sudden cardiac death, and refractory cardiac arrest

3 phases for each programme

1. Gaps evaluation & analysis / needs assessment (literature review & assessment via Network of 50 local champions)
2. Development of Education tools (paper, webinars, online module, e-poster, session...)
3. Dissemination (>70000 physicians targeted)

Sponsorship: 50-60K + options

Research prize



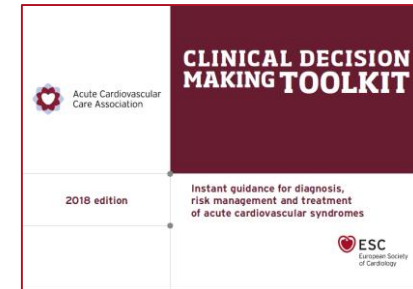
Acute Cardiovascular
Care Association

- **Yearly competition Since 2014**
- **Part of AcuteCVD Congress call for abstract (3 finalists & a winner presenting at special session)**
- **A competitive highly prestigious annual prize for unpublished research in the field with a focus on**
 - quality of care research,
 - clinical outcomes research ,
 - translational research applied to the development of novel therapeutic,
 - diagnostic and logistical strategies to improve patient care and long-term outcomes.
- **Target audience : Open to all scientists/clinicians who submit their un-published research in the field**
- **Sponsorship (2020-2025): 40K (8K per year)**
- *2014-2019 was supported by AstraZeneca, , Novartis Pharma AG., The Alliance Daiichi Sankyo Europe GmbH and Eli Lilly and Company, The Medicines Company and ThermoFisher Scientific.*



Clinical Decision Making Toolkit

- Hector Bueno - Editor In Chief
- Pascal Vranckx - Co-Editor
- Eric Bonnefoy (coordinator French translation)



CHAPTER 1: KEY SYMPTOMS

Chest Pain - M. Lettino, F. Schiele	P.2
Dyspnea - C. Müller	P.9
Syncope - R. Sutton	P.16

CHAPTER 2: ACUTE CORONARY SYNDROMES

General concepts - H. Bueno	P.24
Non ST-segment elevation ACS - H. Bueno	P.29
STEMI - P. Vranckx, B. Ibañez	P.34

CHAPTER 3: SECONDARY PREVENTION AFTER ACS

General secondary prevention strategies and lipid lowering - H. Bueno, S. Halvorsen	P.38
Antithrombotic treatment - F. Costa, S. Halvorsen	P.41

CHAPTER 4: ACUTE HEART FAILURE

Wet-and-warm heart failure patient - V.P. Harjola, O. Miró	P.52
Cardiogenic shock (wet-and-cold) - P. Vranckx, U. Zeymer	P.61

CHAPTER 5: CARDIAC ARREST AND CPR - N. Nikolaou, L. Bossaert

CHAPTER 6: RHYTHM DISTURBANCES

Supraventricular tachycardias and atrial fibrillation - J. Brugada	P.80
Ventricular tachycardias - M. Santini, C. Lavalle, S. Lanzara	P.84
Bradyarrhythmias - B. Gorenek	P.87

CHAPTER 7: ACUTE VASCULAR SYNDROMES

Acute aortic syndromes - A. Evangelista	P.92
Acute pulmonary embolism - A. Torbicki	P.102

CHAPTER 8: ACUTE MYOCARDIAL/PERICARDIAL SYNDROMES

Acute myocarditis - A. Keren, A. Caforio	P.112
Acute pericarditis and cardiac tamponade - C. Vrints, S. Price	P.117

CHAPTER 9: DRUGS IN ACUTE CARDIOVASCULAR CARE - A. de Lorenzo

2020 UPDATES

- Chapter 1: KEY SYMPTOMS
Update of 1.3. Syncope (2018 Syncope Guidelines)
- Chapter 2: ACUTE CORONARY SYNDROMES
New sub chapter on MI Definitio (2018 4th Universal MI definition)
- Chapter 4: ACUTE HEART FAILURE
Update of 4.2. Cardiogenic shock – (2019 Cardiogenic shock position paper)
- Chapter 6: RHYTHM DISTURBANCES
Update of 6.1. Supraventricular tachycardia & atrial fibrillation (2019 SVT Guidelines)
- Chapter 7: ACUTE VASCULAR SYNDROMES
Update of 7.2 Pulmonary embolism (2019 APE Guidelines)
- Chapter 9: CARDIOVASCULAR DRUGS To be simplified/updated by original authors

Sponsorship to be defined

ESCeL platform

- The platform is accredited by **European Accreditation Council for Continuing Medical Education (EACCME)**.with 3 CME credits per topic
- **Knowledge & self assessment section:**
 - 39 out of 79 topics are available.
 - based on the Acute Cardiovascular Care Association Core Curriculum, and designed to complement the latest edition of the ESC Textbook of Intensive and Acute Cardiovascular Care
 - Each topic includes an average of 4 courses + access to related textbook chapter (pdf) and clinical cases (in progress for 2020) + MCQ.
- **Skills tracking (logbook & procedures)**
- **Professional development section:** how to demonstrate their qualifications, training and professionalism to employers, colleagues and patients



Acute CVDays Awareness & Dissemination campaign



- Yearly campaign Started in 2018 (second edition 2019) from May 1st-31st (4 or 5 weeks)
- 5 challenging cases developed by 5 Young National Ambassadors - 5,000 views
- Access to all Acute Cardiovascular Care Association resources for free to all (no membership restriction - myESC login only for tracking)
- 5000 participants to 5 quiz (teaser to win free registration or printed copies of textbook)

USAGE

- 60,000 professionals targeted
- 12,000 web visits (landing page)
- 1,000 downloads of the Posters
- 600 on-demand webinar views
- 600 ESC e-learning chapter consultation
- 350 downloads of the ESC Acute Clinical Decision-Making Toolkit
- *(Textbook & Journal stats to be provided by publishers)*

AcuteCVDays

Top countries: Brazil, Egypt, France, Germany, Greece, Italy, Romania, Russia, Spain, Saudi Arabia, United Kingdom, United States, but also Kazakhstan, Sri Lanka, Taiwan, Uganda, Zambia !



Sponsorship to be defined

Opportunities for collaboration

Website:

www.escardio.org

Industry relations

M. Malek Lebsir

industry@escardio.org