Vision of arrhythmia field’s high-tech future depends on human touch

The worlds of high-tech mingled with human emotion on Thursday evening to deliver a passion-filled punch that APHRS 2016 hopes could stretch to continents well beyond Asia Pacific. A breathing, dancing Dorothy who breathed life into a near-dead digital Tin Man touched the crowd’s hearts at the Opening Ceremony, which opened in a darkened Auditorium. This APHRS “vision clip” was a tough act to follow, but President Young-Hoon Kim gave it his best shot.

This afternoon’s Keynote Lecture, “Skin as the Next Frontier of Arrhythmia Management” will be delivered by Dr. Peng-Sheng Chen, of USA. The lecture will be co-chaired by Shu Zhang of China and Wee Siong Teo of Singapore and will be held in the Auditorium at 13:30.

Dr. Chen’s remarks will be divided into three topics. First, he will discuss a new method of skin sympathetic nerve recording. Next, he’ll address the mechanisms of neuromodulation. As he has written, neuromodulation methods can result in remodeling of the autonomic nervous system, followed by significant alterations of the innervation patterns and cardiac electrophysiology. These remodeling changes can be associated with clinically important off-target effects that influence the function of other organ systems. Recent clinical trials of neuromodulation have failed to show any significant

KEYNOTE SPEAKER UP CLOSE

Live heart procedures beamed into auditorium today

Live broadcasts of procedures being performed at two major hospitals in Korea will be beamed into the Auditorium today. The first screening of the Live Case Session runs from 14:20 to 15:50; the second is from 16:20 to 18:00. All are welcome. Dr. Young-Hoon Kim of Korea will lead the first procedure from Korea University Anam Hospital, an epicardial procedure on a patient with persistent AF. Dr. Hui-Nam Pak, also of Korea, will lead the second procedure from Yonsei University Severance Hospital, presented as a redo ablation on a persistent AF patient with a brief demonstration of virtual modeling for ablation strategy, which was presented at a late-breaking session on Oct 13.

Before each live broadcast, an edited summary video showing preparatory procedures such as sedation and mapping the arrhythmia focus will be shown. A panel-led discussion with audience participation will also be held before, during, and after the live video feed, during which they will discuss each patient’s case and procedure. Attending doctors may also discuss specific treatment for the in-progress procedure.

The APHRS Seoul Daily

- Keynote Speaker Up Close
- Highlights of the Day
- Live Heart Procedures Beamed into Auditorium Today
MULTIPOINT™ PACING UNMATCHED CRT RESPONSE.

Patients receiving MultiPoint™ pacing from initial implant demonstrated a 19% absolute improvement in CRT response and a 44% relative reduction in non-responders at 12 months when compared to traditional Bi-V pacing with a quadripolar lead.;
“Today we are witnessing innovation and inspiration start to bloom,” he said near the end of his remarks. “Innovation and inspiration are the words every EP specialist needs to keep in mind, until all hearts of humanity beat strongly. After three days of spending time with us here, I assure you that some strong passion will sprout from your heart. Hopefully it will grow quickly and spread throughout Asia Pacific and beyond.” The screen beamed the figures: 2,800 participants from 47 countries, and 520 faculties at this Scientific Session. The Keynote Speaker, Farhana Nakhooda from IBM Asia Pacific, sent the audience racing into the world of cognitive systems. She distinguished them from programmable ones because “It learns. And the more you use it, the smarter it gets. That’s really what AI is about,” she said.

Drawing links between AI and the arrhythmia field, she zeroed in on how cognitive computing can help cardiovascular imaging through benefits like automatic triage, machine-assisted second opinions, uncovering of key trends, comparing treatment effectiveness, predictive analytics, and spotting deviations. “Rethinking data can lead to sudden-death prevention,” she said.

And while assuring everyone that cognitive systems will not replace humans, she noted that with so much data in health care, “today it’s humanly impossible for a medical professional to keep up with every single bit of new literature.”

Refreshments and cocktails greeted participants as they filed into the Exhibition Hall, chatting about the memorable vision clip and Ms. Nakhooda’s speech. As Chairman of APHRS 2016, Dong-gu Shin delivered remarks and attendees nibbled on snacks and socialized around tables, it was a scene to soothe weary souls. But it all changed in a flash, when a woman’s high-pitched shriek pierced the hall. A man was down; doctors raced toward him, administering CPR and an AED as a timer counted down from 5 minutes, the critical time period for saving a heart attack victim. Success! They had saved him — and he started to break dance to prove it. He was soon joined by 30 “flash mob” dancers, as the mood flipped 360 degrees from a near-death moment to a passionate celebration of life, and a celebration of the heart arrhythmia specialist’s and APHRS’s ultimate calling.
APHRS 2016 will ‘enhance scientific excellence,’ says Scientific Program Committee chair

Dear Heart Rhythm Professionals,

On behalf of the Scientific Program Committee members, welcome to the 9th Asia Pacific Heart Rhythm Society Scientific Session 2016!

The spirit of APHRS 2016 is Tieless, Casual, and Cutting-edge. Therefore, you may enjoy this high-quality premium meeting in a formality-free environment.

I think APHRS 2016 may be the most unique meeting of the year. For four days, more than 500 world-renowned electrophysiologists from Asia, Europe, and North America will present state-of-the-art knowledge and opinions in about 210 scientific sessions. In addition, educational sessions such as Case-Based Tutorial and Help Me, Master! sessions will be helpful for established physicians as well as beginners. Numerous satellite symposiums and luncheon sessions will be held and be able to provide us practical information. Exhibitors will be displaying and demonstrating the latest pharmacological and non-pharmacological products in the Exhibition areas. Without the support of these companies, it would be impossible to organize this meeting successfully, so I would like to thank all the sponsor companies.

In this meeting, we will have a great deal of exchanges of opinion between international colleagues. This symposium will not only enhance the scientific excellence of our society but also keep us in robust collaborative relationships.

I would like to thank all Scientific Program Committee members for their dedication and thank all the speakers, chairs, and panels for their contribution.

Please enjoy APHRS 2016 and return home equipped with a great deal of new information and friendship!

Welcome to Seoul!

Seil Oh, MD, PhD, FHRS
Chair, Scientific Program Committee of APHRS 2016

‘Breakfast with Master’ session nourishes dialogue between the generations

The early 07:00 start of Thursday’s “Breakfast with Master” didn’t stop ambitious young EP doctors from enriching their knowledge from arrhythmia masters. The unique forum, where junior doctors met and discussed issues face-to-face with masters over breakfast at the InterContinental Seoul COEX, had in fact proved so popular that all seats (by pre-registration only) had been filled.

Younger doctors exchanged small talk with masters Dr. Gregory YH Lip (UK), Dr. Chun Hwang (USA), and Dr. Warren Maurice Jackman (USA) until breakfast — a hearty meal of soup, omelet, and fruit — was served at 07:10. Befitting the session’s goal of nurturing professional ties, the atmosphere resembled that among friends rather than mentors and mentees. Dr. Lip said he was honored to be invited as a master, adding that he appreciated the informal setting, with its close, non-confrontational interaction and broad range of topics.

Dr. Jun Yoshimoto of Japan decided to brave the early-hour session because he’d found a similar luncheon session held by the HRS helpful. He also had long admired Dr. Jackman and had leaped at the opportunity to meet him.

Dr. Hui-Nam Pak of Korea presented a virtual in-silico modeling guided catheter ablation for treating persistent atrial fibrillation. Although the difference was mild compared with the existing empirical ablation in terms of clinical outcome, he showed that evaluating an ablation lesion set using virtual modeling was feasible and stressed the possibility of future development.

Dr. Karl-Hienz Kuck of Germany presented the results of The Fire and Ice Trial’s subgroup analysis. His presentation discussed how the results of catheter ablation treatment of paroxysmal atrial fibrillation differed based on energy sources. The results did not show significant difference in the study population when energy sources - cryoablation and radiofrequency ablation - differed. However, in several subgroups it was found that cryoablation would lower rehospitalization and re-do procedures compared with RF ablation, and that cost benefits are promising.

Dr. Aleksandr Voskoboinik of Australia presented his cardiac MRI opinion on a nonischemic cardiomyopathy patient showing ventricular arrhythmia. Cardiac MRI results from different VF patients did not show late Gadolinium enhancement, so Dr. Voskoboinik suggested the necessity of risk stratification with the nonischemic cardiomyopathy patient.

Focus on: Late-breaking trials

Dr. Hui-Nam Pak of Korea presented a virtual in-silico modeling guided catheter ablation for treating persistent atrial fibrillation. Although the difference was mild compared with the existing empirical ablation in terms of clinical outcome, he showed that evaluating an ablation lesion set using virtual modeling was feasible and stressed the possibility of future development.

Dr. Karl-Hienz Kuck of Germany presented the results of The Fire and Ice Trial’s subgroup analysis. His presentation discussed how the results of catheter ablation treatment of paroxysmal atrial fibrillation differed based on energy sources. The results did not show significant difference in the study population when energy sources - cryoablation and radiofrequency ablation - differed. However, in several subgroups it was found that cryoablation would lower rehospitalization and re-do procedures compared with RF ablation, and that cost benefits are promising.

Dr. Aleksandr Voskoboinik of Australia presented his cardiac MRI opinion on a nonischemic cardiomyopathy patient showing ventricular arrhythmia. Cardiac MRI results from different VF patients did not show late Gadolinium enhancement, so Dr. Voskoboinik suggested the necessity of risk stratification with the nonischemic cardiomyopathy patient.
Dr. Charles Antzelevitch of USA landed the privilege of presenting the first COEX-Core session lecture at APHRS 2016, speaking to a group of about 70 early birds in the Auditorium at 08:15 Thursday. He bore the added challenge of speaking just a few hours after arriving in Seoul.

His lecture, entitled “J wave Syndromes as a Cause of Sudden Death: From Bench to Bedside,” focused on two components of J wave syndrome: Brugada syndrome, and early repolarization syndrome.

Moving briskly through a series of colorful slides from the stage, he addressed other scientists’ studies and research results while pointing to various graphs displaying both published and unpublished results.

He noted that Brugada and early repolarization syndrome show “remarkably similar” characteristics, such as occurring at low activity levels or during sleep, and have similar ECG characteristics, clinical outcomes, risk factors and arrhythmic characteristics, among others.

Contrasting them, however, he noted that “they’re different with respect to the region where they’re most involved. Early repolarization syndrome is associated with the inferior left ventricular wall, and with Brugada it’s [associated with] the RVOT.”

He also noted that there’s ample evidence that testosterone is responsible for the male predominance of Brugada syndrome.

“By understanding the genetics and cellular mechanisms, we can have a better understanding of how to develop new and novel treatments,” he said after the lecture.

“I learned a lot,” said Wen-Yu Lin of Taiwan. “He’s showing common manifestations and genetic changes between Brugada and J wave syndrome. He provided a very clear treatment algorithm for both.”

Dr. Minoru Horie of Japan, presented in the second half of the morning with a discussion on “Cardiac Sodium Channelopathy: Its Diversity and Mechanisms.” The COEX-Core sessions continue on Saturday.
Mentoring mindset blooms at ‘Help Me, Master’ sessions

On Day 2 of APHRS 2016, the long-awaited “Help Me, Master!” session swung open its doors at 08:15 as faculty members strided into Room 13 (201). APHRS 2016 designed this special session as part of its initiative to give junior doctors comfortable forums to meet with and discuss their professional difficulties with masters and receive immediate feedback.

The session master, Dr. Chun Hwang of USA, opened with a warm greeting before introducing the first speaker, Dr. Tae-Hoon Kim of Korea. Dr. Kim began by sharing a personal struggle he experienced during his medical career, related to coping in a situation when an RF needle was not available. Professor Hwang opened the floor to the audience, soliciting solutions from younger doctors, and then responded to each of their proposals before presenting his own solution. Dr. Myung-Jin Cha of Korea, who followed, presented problems she experienced in situations related to abnormal vascular structure, abnormal cardiac structure, and a heavily calcified and thickened area. Using the same approach, Dr. Hwang solicited proposed solutions from the audience before providing his evaluation.

The next Help Me, Master! sessions will be at 08:15 and 10:20 today in RM 13 (201).

Hands-on human heart exhibit breaks new ground

A first for APHRS, the human heart exhibit has drawn keen interest from doctors and practitioners since opening in the Exhibition Hall. It consists of 30 hearts and plastic heart molds that participants can examine and touch, set out in containers on tables supplied with surgical gloves. Beside them, six TV screens air explanatory videos of heart procedures in three languages: English, Japanese, and Korean.

As Dr. Jeong-Wook Seo of Korea welcomed guests at 10:30 Thursday, a video showing him examining a heart onstage in the Exhibition Hall’s RM 14 was beamed to viewers from two large overhead screens. As he rotated the heart, he exposed different aspects of it.

“In this session, you’re free to examine the heart specimens,” he told the audience. “I’d like to invite you to take some gloves and examine a heart.”

“It’s important to understand exactly how a heart is formed — the anatomy is very important to them [cardiologists],” he said later. “For example, in human practice, a catheter is introduced almost blind, but here we can see how it is inside the heart. That will confirm our understanding, and correct possible misunderstandings.”

With his briefing over, several people sat down at tables and began examining the hearts, which comprised both diseased and non-diseased specimens from Korean hospitals.

Dr. Abhinay Tibdewal of India said he had not had an opportunity to touch a heart since medical school. “To be able to feel and touch [a heart] is magnificent,” he said, adding that with such an experience, “You tend to be more precise when you do interventions; you know where you’re going.”

The exhibit was the result of a collaboration among several Korean hospitals and medical institutions, which donated cadavers and provided the videos and other assistance, explained Dr. Seo.

The heart exhibit is being held in conjunction with three Anatomy Sessions, also in RM 14 (Hall D2), the last two of which will be at 10:20 today and at 12:15 on Saturday. In addition, session panelists will be on-site from 08:15 to 09:45 today and from 10:20 to 12:00 on the 15th, so if you didn’t get a chance to visit yet there’s still time.
NO PASSPORTS NEEDED
AT INTER-REGIONAL SESSIONS

Though it focuses on the 16-country Asia-Pacific region, APHRS 2016 has been vigorously embracing dialogue and communication from other parts of the world through its Joint Sessions.

On Thursday, two such inter-regional dialogues took place: the first, between APHRS and HRS, co-chaired by Michael R. Gold and George F Van Hare of USA; and the second, between APHRS and JHRS, co-chaired by Shih-Ann Chen of Taiwan and Kenzo Hirao of Japan.

One participant in the first session noted that by providing Asia Pacific countries opportunities to learn about new medical technologies and medicines prevalent in the United States, the forum was acting as a bridge to help shrink the technology gap in cardiology.

At the later session, one attendee observed that when doctors from different regions interact so closely, they can gain insight into how different countries use different strategies or technologies to treat arrhythmia, or can view a problem from a different angle.

Many attendees appeared to focus intently on the lectures — diligently writing notes in many cases — suggesting a healthy learning atmosphere, perhaps propelled by the ease at which APHRS 2016 had helped them overcome the barriers of geography.

If you missed yesterday’s Joint Sessions, you can still catch the final one between APHRS and EHRS. It’s today at 08:15 in RM 05 (GBR 104).

APHRS 2016 would like to show our appreciation to the following companies for their contribution and sponsorship

APHRS NOW HAS 16 MEMBER COUNTRIES!

APHRS is pleased to announce that Myanmar has joined our family this year, bringing membership up to 16 countries.

APHRS is proud to have Myanmar join as our 16th member country. The addition of this Southeast Asian nation to our ranks will pave the way for a more comprehensive development of the arrhythmia field in Myanmar, as well as closer and more frequent cooperation and exchanges between Myanmar and other Asia Pacific member countries in the arrhythmia field.

Dr. Nwe Nwe, affiliated with Yangon General Hospital, has been appointed the first country representative for Myanmar and we are delighted that she is attending APHRS 2016.

<table>
<thead>
<tr>
<th>Joint Session with EHRA</th>
<th>Time</th>
<th>Location</th>
</tr>
</thead>
<tbody>
<tr>
<td>Atrial Fibrillation/</td>
<td>14 Fri. 08:15-09:45</td>
<td>RM 05 (GBR 104)</td>
</tr>
<tr>
<td>Burning Questions</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Start Xarelto® with Confidence

Confidence from Evidence and Real World in NVAF¹⁻³

References

The Asia Pacific Heart Rhythm Society (APHRS) will open applications later this month to its members for a U.S. Immersion Program, in partnership with the Heart Rhythm Society (HRS) that includes a two-week observational program at one of three medical institutions in the United States plus attendance to the Heart Rhythm Scientific Sessions in Chicago, May 10 – 13, 2017.

APHRS and HRS will be hosting two information sessions for those interested in applying during the APHRS 2016 Scientific Session. Visit the APHRS Booth E16/17 and HRS Booth E18/E19 on Friday, October 14 from 15:50 - 16:20 to learn more. The program is sponsored by Medtronic.

Please contact the APHRS Office at office@aphrs.org for more information.
You can now access program abstracts, maps, schedules, and more from your smartphone! Just download the APHRS app from the Apple App Store or Google Play store or scan the QR code at right.

WE’VE GONE MOBILE!

You can now access program abstracts, maps, schedules, and more from your smartphone! Just download the APHRS app from the Apple App Store or Google Play store or scan the QR code at right.

Follow APHRS 2016 on Facebook and Twitter to receive the latest APHRS 2016 information

WHAT’S NEW FROM #APHRS2016

https://twitter.com/APHRS2016Seoul
https://www.facebook.com/aphrs2016seoul

WHAT’S NEW FROM #APHRS2016

WHAT’S NEW FROM #APHRS2016

Follow APHRS 2016 on Facebook and Twitter to receive the latest APHRS 2016 information

CARTO®3 System

20 YEARS OF VISIONARY PARTNERSHIP
aphrs seoul
souvenirs have plenty of sole
When the Local Organizing Committee debated which souvenir to give away, they found themselves returning time and again to their goal of promoting an informal atmosphere that gets people moving and freely sharing ideas. First to go were neckties. Then, they reasoned, people should wear comfortable footwear. That inspired the suggestion to give away “casual shoes.”

The idea stuck, and now, as we know, early-bird and pre-registrants enrollees got a pair (a choice of black, white, and gray; the brand differs by size). Staff at the Kit desk said that shoe boxes were rolling off the shelves; they gave attendees a handy storage bag for their existing shoes.

Though some chuckled at the wearable keepsake, Peter Novikov of Russia, who sported a pair of New Balance shoes, deemed them “very comfortable.” While the choice of gift surprised him, he felt “it achieves its aim” of promoting an informal atmosphere.

layers of meaning embedded in session logo
As almost everyone has noticed, an electrocardiograph of a normal sinus rhythm punctuates the APHRS 2016 logo. But did you look closer? You’ll see some unique images in the background, from cutting-edge technology used in the arrhythmia field, to symbols of the health of the human race, to icons representing modern and traditional Korean heritage. Also, did you know that its colors — red and blue — mimic those of the Korean flag? Taken together, this special logo conveys APHRS 2016’s wishes for the health of humanity and a successful Scientific Session in Seoul, Korea.
SIMPLE. POWERFUL. CONNECTED.

Reveal LINQ™
Insertable Cardiac Monitoring System

LONG-TERM CARDIAC MONITORING
up to 3 years

Medtronic
Further, Together