

Annual Meeting and Symposium

October 21 – 23, 2011

Vancouver West Convention Centre, Vancouver, BC

(unless otherwise indicated)

Theme: Celebrate CACR's 20th Anniversary

PENDING: AACVPR continuing education credits

Thursday, October 20

18:30 PUBLIC FORUM - Café Scientifique: What you can do after a heart attack or stroke to improve your health.

Friday, October 21

08:30 - 17:00 CACR ANNUAL BOARD OF DIRECTORS MEETING

19:00 – 21:00 Workshop: The Early Cardiac Access Clinic: A Model to Enhance Utilization of Cardiac Rehabilitation Services

Moderator: Sherry Grace

Speakers: Cardiac Wellness Institute of Calgary

Location: Ballroom ABC, Fairmont Waterfront Hotel

Sherry L. Grace, Ph.D.

Dr. Sherry L. Grace holds her primary appointment as an Associate Professor in the Faculty of Health at York University. She is also Director of Research at the Peter Munk Cardiac Centre Cardiovascular Rehabilitation & Prevention Program and a Scientist at the Toronto General Research Institute, both of the University Health Network. Her research interests lie in the areas of cardiac psychology and health services utilization, specifically equity and continuity in secondary prevention for chronic disease. She has held grant funding totalling approximately \$6 million, has published approximately 90 peer-reviewed papers, and has collaborated on government reports, and clinical practice guidelines (e.g., CACR Guidelines). She is an Editorial Board member with the Journal of Cardiopulmonary Rehabilitation and Prevention. She serves on the Cardiac Care Network of Ontario Chronic Disease Management working committee, the Ontario Health Study Psychosocial Health working group, and the Canadian Cardiac Rehabilitation Registry Committee.

Sandeep G. Aggarwal, M.D., FRCPC, FACC

Sandeep Aggarwal graduated from the University of Toronto Medical School in 1989. He also finished his Internal Medicine Residency at the University of Toronto and did his Cardiology training at the University of Calgary. He followed this with a fellowship in Echocardiography at the University of Ottawa Heart Institute. He joined Cardiology Consultants in 1998 and is presently an attending cardiologist at the Rockyview General and the Foothills Hospitals in Calgary, Medical Program Director of the Cardiac Wellness Institute of Calgary, medical director of the Rockyview Hospital Heart Function Clinic and the site lead for Cardiology at the Rockyview General Hospital. His research interests include Cardiac Rehabilitation and Heart Failure.

Tyler Threlfall, BSc. ACSM Clinical Exercise Specialist ®

Tyler Threlfall has been the Clinical Exercise Supervisor at the Cardiac Wellness Institute of Calgary (CWIC) since 2007. He graduated from the University of Calgary in 2004 with a BSc. in Kinesiology, and joined CWIC in 2004. He has been an ACSM Clinical Exercise Specialist since 2005.

Debra Lundberg RN BN

Graduated from the University of Alberta with a Diploma in Nursing in 1980 and then a Bachelor's Degree in Nursing in 1993. Her nursing experience includes ICU, acute Hemodialysis /Plasma pheresis team, respiratory/rheumatology, cardiology research. Her experience includes as Project Lead for the Alberta Cardiac Access Collaborative for Heart Attack and Patient Navigation for Southern Alberta. This is where the STEMI Program promoted the establishment of an early discharge clinic after conducting a 6 month pilot project to determine the needs of the discharged STEMI patient. This led into supporting the development and roll out of a pilot project for smoking cessation at the Foothills Hospital on the cardiology units. The project ended in 2010 but continues as a

Clinical Cardiac Network in Alberta where I serve as a Nurse Coordinator for ACS for Southern Alberta. Currently also assumed the role of Nurse clinician/coordinator for developing the Transcatheter Aortic Valve Implantation Program at the Foothills Hospital for Southern Alberta.

Presentation Summary:

Cardiac rehabilitation (CR) has been shown to play an important role in the patient's recovery following a cardiac event. Despite recommendations in clinical practice guidelines, CR referral and attendance remain low. To this end, the Canadian Association of Cardiac Rehabilitation (CACR) and the Canadian Cardiovascular Society (CCS) have identified early access to CR as a key to improve the utilization of these resources and subsequently improve patient outcomes.

The Early Cardiac Access Clinic (ECAC) was developed by the Cardiac Wellness Institute of Calgary (CWIC) and the STEMI Program out of the Foothills Medical Center to bridge the care gap from hospital discharge to community care. The initial pilot clinic provided STEMI patients with timely physician follow-up and early access to cardiac rehabilitation, which in turn increased the percentage of patients who attended cardiac rehabilitation following discharge from hospital. Given the positive outcomes of the pilot, the model has been expanded as standard care for all acute coronary syndrome patients qualifying for the CWIC program. This workshop will be moderated by Dr. Sherry Grace who will introduce the rationale and objectives of the CACR and CCS joint position statement regarding early CR access. Staff of CWIC and Foothills Interventional Cardiology Group will provide an overview of the ECAC origins, the outcomes and the key features of integrating a similar model into your program. The presenters will highlight the successes and challenges that they faced in providing the expedited service. CWIC staff will also provide participants with the tool kit that was developed for use in the ECAC. Time will be dedicated for audience participants to ask questions and share comments on their own program successes and challenges.

By participating in the workshop, participants will:

1. Understand the key components of the ECAC model and how it provides timely access to CR following hospital discharge;
2. Identify the successes and challenges in the implementation and administration of an ECAC program model; and program outcomes to date;
3. Understand strategies for implementing an ECAC program into existing programs, including a tool box of patient resources;
4. Have an opportunity to network with CR colleagues about new strategies to enhance timely CR and subsequent attendance.

Saturday, October 22

07:00 – 09:00 KELLOGG'S BREAKFAST

08:15 – 09:30 Conference Opening Remarks – Bob Reid, CACR President
Nutrition Symposium: Benefits of Breakfast to Children's and Young Adult's Health and Obesity Prevention
Speaker: Theresa Nicklas, Baylor University

Theresa A. Nicklas, DrPH, is Professor of Pediatrics at the USDA/ARS Children's Nutrition Research Center at Baylor College of Medicine. One of her current research interests is looking at eating patterns that are associated or predictive of obesity between childhood and young adulthood. Dr. Nicklas has published more than 225 scientific papers, and has served on the 2005 Dietary Guidelines Advisory Committee.

Presentation Summary

Breakfast skipping may have public health consequences for children and young adults. Compared to breakfast consumers, those who skip breakfast have reduced intakes of many nutrients, including vitamins A, E, C, B-6, and B-12; folate; iron; calcium; phosphorus; magnesium; potassium; and dietary fiber, that are rarely compensated for at other meals. Total nutrient adequacy was highest in the breakfast consumers. Whereas, breakfast skippers had poorer diet quality compared to breakfast consumers; consuming less vegetables, whole grains, fruit and milk over the course of a 24-hour period. Skipping breakfast was associated with a higher body mass index (BMI) and waist circumference compared to those who consumed breakfast. Consumption of RTE cereals was also related to a lower BMI when compared to non-consumers. There are several metabolic effects of consuming breakfast (especially one that includes RTEC) in contrast to the potential adverse effects of skipping breakfast. Breakfast consumers were more likely to have lower levels of serum total cholesterol, LDL-C, serum insulin, and homocysteine and higher levels of HDL-C. The goal of this presentation is to demonstrate the relationship between breakfast skipping and type of breakfast consumed with nutrient intake, dietary adequacy, and health outcomes.

Objectives of Session

1. To examine the relationship between breakfast skipping and type of breakfast consumed with nutrient intake, nutrient adequacy, and adiposity status (Children and Adolescents)

2. To assess the impact of breakfast skipping and type of breakfast consumed on energy and nutrient intake, nutrient adequacy, and diet quality (Young Adults)
3. To assess the relationship of breakfast skipping and type of breakfast consumed with weight status, abdominal obesity, metabolic risk factors, and metabolic syndrome (Young Adults)
4. To summarize the 2010 Dietary Guidelines for Americans on breakfast consumption

9:30 - 10:30 19th ANNUAL TERRY KAVANAGH LECTURE

Sponsored by Cardiac Health Foundation of Canada

Topic: Does Stress Management Have a Role in Cardiac Rehabilitation?

Speaker: James Blumenthal, Duke University

James Blumenthal is Professor of Medical Psychology in the Department of Psychiatry and Behavioral Sciences and Professor of Psychology and Neuroscience at Duke University. Dr. Blumenthal received his Ph.D. from the University of Washington and is board certified from the American Board of Professional Psychology in Clinical Psychology. Dr. Blumenthal received an honorary doctorate from Uppsala University, and is the recipient of several awards including the Michael L. Pollock Established Investigator Award, the Pioneer Award from the Cleveland Clinic, and the Distinguished Scientist Award from the Society of Behavioral Medicine. He is a Founding Fellow of the American Association for Cardiopulmonary Rehabilitation and is former president of the American Psychosomatic Society and Division 38, Health Psychology, of the American Psychological Association.

Presentation Summary

This session will provide an overview of evidence that stress is a risk factor for the development and clinical manifestations of coronary disease, including such factors as depression, anxiety, anger, and low social support. Research supporting the value of stress management in cardiac rehabilitation settings will be discussed, along with future directions for research in the area.

Objectives of Session

1. Participants will be able to define stress.
2. Participants will be able to cite evidence for stress as a risk factor for heart disease.
3. Participants will be able to describe the value of exercise and stress management in cardiac rehabilitation.

10:30 - 11:30 Posters, Displays and CACR Showcase

Posters, Displays, Showcase area open Saturday 09:30 - 16:30; Sunday 09:30 - 13:00

11:30 - 12:30 WORKSHOP SESSION 1 (choose one)**1. CSEP Advanced Module in Cardiac Rehabilitation – Darren Warburton**

Darren Warburton is the co-Director of the Physical Activity and Chronic Disease Prevention Unit at the University of British Columbia (UBC). He is also the founder and director of the Cardiovascular Physiology and Rehabilitation Laboratory at UBC and was the director of the Sport Cardiology and Musculoskeletal Assessment Research Team (SMART 2010) for the 2010 Olympic and Paralympic Games. He is also co-director of the Physical Activity Support Line (www.physicalactivityline.com). He is a Canadian Institutes of Health Research (CIHR) New Investigator and is currently a national executive member of CSEP Health & Fitness Program and board member of the CACR. His research spans the spectrum of elite athletic performance, childhood health, quality of life in the elderly, and the treatment of patients with chronic disease and/or disability (including individuals with heart disease, cancer, diabetes, and spinal cord injury).

Presentation Summary

CSEP has extensively re-developed an online course on Advanced Modules for Cardiac Rehabilitation in conjunction with the CACR. This 2 part course consists of an EKG module to be released in the Fall 2011 and a Cardiac Rehabilitation Module to be released in 2012. This course will be open to any health professional working in or entering the field of cardiac rehab.

2. Advanced Motivational Interviewing – Simon Bacon, Kim Lavoie

Simon Bacon is an Associate Professor of Exercise Science at Concordia University and Director of the Montreal Behavioural Medicine Centre. His research focuses on the impact of behaviours (such as, diet, exercise, stress management) and psychological factors in the development and progression of cardiac and lung diseases. He has funding from Canadian Institutes of Health Research and the Fonds de la Recherche en Sante du Quebec and has published nearly 300 articles and abstracts. He has provided training and talks to numerous groups around the topics of health behaviours and behaviour change, including the use of motivational interviewing.

Presentation Summary

The presentation will build upon previous presentation at CACR on motivational interviewing and will provide a forum for people to ask questions about it's application in a clinical setting.

Objective of Session

Apply current motivational interviewing theory to clinical practice.

3. Dietary Trends – Past and Current – Kay McQueen, Karen Mornin, Sandy Hoshizaki

Kay McQueen is a registered dietitian with experience as a cardiac dietitian and diabetes management. She is the dietitian in the St. Paul's Hospital, YMCA Healthy Heart Community Wellness Program in Vancouver and for the virtual cardiac rehabilitation program on the www. She enjoys giving presentations to professionals, students and the public and frequently does work for the media. She is a member of The British Columbia College of Dietitians', The Lipid Clinic Nurses Network, and the Canadian Diabetes Educator Group (DES). She leads an active and healthy lifestyle and strongly believes that eating healthy can bring significant benefits to your health.

Karen Mornin, registered dietitian, holds a Bachelor of Science degree in Nutrition from the University of British Columbia. Following the conclusion of this work, she completed a professional practicum in Nutrition at St. Michael's Hospital in Toronto, Ontario. During this time, she received an award for her research work evaluating the outcomes of a Cardiac Rehab Program. Karen works as a clinical dietitian in the healthy heart program at St. Paul's Hospital, trains and evaluates dietetic interns in the area of nutrition counselling and teaches motivation interviewing counselling strategies to undergrad students in the dietetics programs at UBC. Karen is a co-author for the dietary intervention for the treatment of obesity in adults: 2006 Canadian clinical practice guidelines on the management and prevention of obesity in adults and children published in the Canadian Medical Association Journal.

Sandy Hoshizaki, registered dietitian, holds a Bachelor of Science degree in Nutrition from the University of British Columbia, followed by an internship at Vancouver General Hospital. Sandy works as a clinical dietitian in the Healthy Heart Program at St. Paul's Hospital providing quality nutrition care and education in both individual and group settings. She recently was involved in the Canadian multi-centre portfolio diet study which focused on individuals following the portfolio diet in a real life setting for six months. It which was completed in 2010. She has worked at St. Paul's hospital for over 15 years primarily in healthy heart program, management and Renal.

Presentation Summary

This workshop will provide a practical description of some popular dietary patterns and trends for heart health from the past 20 years. We will explore how these diets affect cardiovascular risk factors using an evidence-based approach. Case studies will be used to demonstrate how to apply these dietary principles for our cardiac rehab patients.

Objectives of Session

At the conclusion of this workshop, participants will be able to:

1. Describe each diet trend
2. Apply principles of a popular diet to a real life scenario
3. Understand the current recommendations for a "heart healthy diet"
4. Heart healthy foods will be explored.

4. Astuces et outils pour évaluer les facteurs psychologiques chez les patients participant à un programme de réhabilitation cardiaque. – Roxanne Pelletier

Roxanne Pelletier completed her PhD at the University of Quebec in Montreal in the field of health psychology. She conducted her studies at the Montreal Heart Institute, through the Montreal Behavioural Medicine Centre, under the direction of Kim Lavoie and Simon Bacon. Her doctoral studies have focused on the relationships between depressive and anxiety disorders, and CVD. More specifically, she aimed at assessing the impact of anxiety disorders on ECG's sensitivity, relative to SPECT, to detect myocardial ischemia, and on patient's performance and cardiovascular reactivity during exercise stress test. She also studied the relative impacts of depressive and anxiety disorders on cardiovascular events and general mortality among patients with and without CAD. She is now working as a post-doctoral fellow at the McGill University Health Centre (MUHC), under the direction of Louise Pilote and Blaine Ditto. Her post-doctoral studies focus on the relationships between depressive disorders, gender, sex, and acute coronary syndrome among young men and women. She also works at developing a "gender-adapted" treatment protocol aiming to reduce depressive symptoms and cardiovascular events among the latter population. Roxanne is also a licensed clinical psychologist, working with adults presenting different types of psychological disorders.

Presentation Summary

Présentation de questionnaires simples et fiables permettant d'évaluer les symptômes dépressifs et anxieux, ainsi que d'entrevues semi-structurées permettant le dépistage des principaux troubles de l'humeur et d'anxiété en contexte de réhabilitation cardiaque. Suivra la présentation d'informations et de moyens, adaptés à l'évaluation des patients cardiaques, facilitant l'identification de ces symptômes et troubles psychiatriques chez les patients.

Objectives of Session

1. Connaître les propriétés et l'utilité de différents questionnaires (ex. PHQ, BAI) et entrevues (ex. PRIME-MD) servant à évaluer la présence des principaux facteurs psychologiques en contexte de réhabilitation cardiaque.
2. Se familiariser avec l'administration et l'interprétation de ces questionnaires et entrevues.
3. Apprendre des moyens servant à distinguer les symptômes dépressifs des symptômes attribuables à la maladie cardiaque.
4. Apprendre des moyens servant à distinguer les symptômes d'un trouble d'anxiété spécifique (ex. trouble panique, trouble d'anxiété généralisée) des symptômes attribuables à la maladie cardiaque.

12:30 - 14:00 **Lunch (provided)**

CACR ANNUAL GENERAL MEETING

Walk of Life Presentations – Cardiac Health Foundation of Canada

Posters, Displays and CACR Showcase

Posters, Displays, Showcase area open Saturday 09:30 - 16:30; Sunday 09:30 - 13:00

14:00 - 15:00 **CONCURRENT ORAL SESSIONS (3)**

CACR Annual Scientific Oral Presentations (9) (determined through abstract competition)

Graduate Scholarship Awards

Awards sponsored by Cardiac Health Foundation of Canada

15:00 – 15:30 **Posters, Displays and CACR Showcase**

Posters, Displays, Showcase area open Saturday 09:30 - 16:30; Sunday 09:30 - 13:00

15:30 - 16:30 **WORKSHOP SESSION 2** (choose one)

1. The Memory Toolkit – Christine Foisy

Christine Foisy, BScOT(c), OTR is the Clinical Specialist in Occupational Therapy for the Northern Alberta Cardiac Rehabilitation Program and a Clinical Lecturer with the Department of Rehabilitation Medicine at the University of Alberta. She has a varied clinical, research and teaching background in the USA and Canada. Christine co-authored the Return to Work chapter for the 2009 CACR guidelines. Her passions include working with other local, national and international programs to improve client centered Cardiac Rehab program delivery.

Presentation Summary

This presentation will focus on understanding the cognitive challenges that many cardiac patients experience. Emphasis will be placed on identifying risk factors for impaired memory and concentration, as well as offering practical suggestions to improve day to day function.

Objectives of Session

After this presentation the attendee will better understand:

- The basics of how memory works
- How a cardiac event and other risk factors impact memory and concentration
- How this differs from Alzheimer's
- Realistic expectations for improvement
- Practical strategies for coping

2. Resource-Efficient Strategies for Meeting the Psychological Needs of Patients in CR – George Kaoukis

George Kaoukis is a licensed clinical psychologist and is on the Canadian Register of Health Service Providers in Psychology. He received his Ph.D. in clinical psychology and M.A. from the University of Manitoba and a B.Sc. (Honors) from McGill University in Montreal. He is an Assistant Professor in the Faculty of Medicine at the University of Manitoba and is involved in research and the training of medical and other health care professionals. He is a staff psychologist and the Director of Cardiac Psychology Services at St. Boniface General Hospital and for the Winnipeg Regional Health Authority (WRHA). He has developed the WRHA's

psychological screening and treatment program for cardiac patients providing psychological services to the two cardiac rehabilitation sites in the city as well as tertiary care hospitals. He has presented and published papers on cardiac psychology, psychological service delivery models for cardiac patients, and the role of stress and psychological factors in chronic illnesses such as cardiovascular disease. He has also been a keynote speaker at the annual conference of the CACR. Much of his clinical work at the hospital and in his private practice focuses on treating individuals who have difficulty adjusting to their cardiac event or condition.

Presentation Summary

This presentation will briefly review the prevalence and nature of psychological distress in patients attending cardiac rehabilitation (CR). Several resource-efficient strategies for addressing the psychological needs of patients in CR using a higher patient to clinician ratio will be explored. These strategies include: strategic patient screening, stepped-care treatment formats, large group interventions, computer and telephone/telehealth assisted treatment, internet-based interventions, and home-based programs. Research supporting the use of these approaches in dealing with mental health problems in medical populations, including cardiac patients, will be discussed. Tips for implementing these strategies in CR and determining patient eligibility will be provided and accompanied by specific examples.

Objectives of Session

Persons attending this presentation will: 1) Obtain a better understanding of the extent and nature of mental health problems in patients attending CR and how these problems adversely affect CR outcomes; 2) Become familiar with resource-efficient strategies that are increasingly being used to address the psychological needs of medical populations; 3) learn on how these strategies can be employed in CR programs to better meet patients' psychological needs; and 4) receive some practical tips and examples for implementing them.

3. The Saskatoon Experience Integrating CR and CDM – Leslie Worth, Rick Stene

Leslie Worth graduated from University of Saskatchewan with a Bachelor of Science in Nursing in 1977 and became certified in Reality Therapy Counselling in 1999. Her nursing experience includes ICU/CCU, Paediatrics, Diabetes Education, and Cardiac Rehabilitation. She assisted in the Saskatoon Tri-Hospital Cardiac Program development including the hospital education, outpatient classes, stress management program, establishment of the Coronary Artery Support Group and volunteer program, and organization of the 25th Anniversary for the Tri-Hospital Cardiac Rehab Program. Leslie has facilitated Stress Management Workshops, assisted in the development of the Saskatoon Health Region Diabetes Plan. She is currently in a senior management position with the Chronic Disease Management Program of the Saskatoon Health Region.

Rick Stene obtained his BSPE in 1979 from the University of Saskatchewan. He has worked in the field of Cardiac Rehabilitation and Chronic Disease management for the past 30+ years at both the Reh-Fit Centre in Winnipeg and as a manager with the Saskatoon Health Region. He is situated within an acute care teaching hospital, developing and coordinating a wide variety of community based CDM – Exercise programs for the health region (Cardiac Rehabilitation, Pulmonary Rehabilitation, Diabetes, Diabetes prevention, Chronic Kidney Disease, Heart Failure clinic, Pediatric Obesity, rural programs, Parkinson's, Stroke and home programs). Rick is an Associate Clinical Professor in the College of Kinesiology and lecturer in the College of Medicine and School of Physical Therapy. He was a co-author of CACR's first guidelines, an ACSM Program Director and was actively involved in the ACSM ES certification in Western Canada. Currently a member of the CACR working group to develop the CSEP Advanced Modules for Cardiac Rehab and a newly elected board member.

Presentation Summary

We intend to discuss the model of Chronic Disease Management and how the LiveWell Cardiac Program fits within this framework. We will review and discuss the successes and challenges within the context of our experience and how this might relate on a provincial and national level.

Objectives of Session

- 1) Contrast and compare Cardiac Rehabilitation and CDM Principles
- 2) Review the importance of aligning your service within your health system – The SHR LiveWell CDM experience
- 3) Group participation through engagement of the audience in a discussion of strengths and pitfalls of integrating the two models
- 4) Discuss the implications for future development

4. Assessment for Resistance Training – Darcy Cuff, Mary Mackenzie, Astrid Desouza

16:30 **Welcome Reception and Opening of Community Forum**

18:00 **CACR ANNUAL BANQUET AND SOCIAL EVENING** (ticket required, max. 150)

20th Anniversary Celebration
Earl's Yaletown, 1095 Mainland Street

Sunday, October 23

07:30 - 09:00 General Mills Breakfast

09:00 – 9:30 PLENARY SESSION

CACR CR Registry Update and Outcomes
Paul Oh, CACR Registry Chairperson

9:30 - 10:00 Posters, Displays and CACR Showcase
Posters, Displays, Showcase area open Sunday 09:30 - 13:00

10:00– 12:00 PLENARY SESSION
Top 10 Achievements in Canadian CR over the Past 20 Years – Bill Dafoe

International panel discussion - Current Trends in CR –
Bob Reid, CACR (*moderator*); John Buckley, BACR; Bonnie Sanderson, AACVPR

John is the 2010-2011 President of the British Association for Cardiovascular Prevention and Rehabilitation. He is programme leader of the MSc in Cardiovascular Rehabilitation at the University of Chester UK. Professionally he has over 22 years of front-line practice as an exercise physiologist in cardiac rehabilitation, which includes having run his own health, fitness and physiotherapy centre for 21 years. His areas of research focus on the assessment of functional capacity and exercise prescription in cardiovascular disease. He is a Fellow of the British Association of Sport & Exercise Sciences.

Presentation Summary

This session is linked to the vision of harmonizing practice standards and communications for members of various associations around the world with an initial interest from Canada, the UK, the USA, Australia, New Zealand, Republic of Ireland and India.

Objectives of Session

To develop international membership & society practitioner publications related to converting scientific evidence into effective practice.

Bonnie Sanderson PhD, RN, is an Associate Professor in the School of Nursing, Auburn University, Auburn, Alabama. She was the 2010-2011 President of the American Association of Cardiovascular Rehabilitation (AACVPR) and continues to serve on the Board of Directors as Immediate Past President. She has an extensive background of clinical and research experience in cardiac rehabilitation, preventive cardiology, and lifestyle interventions in community settings. In addition to nursing, she has advanced degrees in exercise physiology and public health with an emphasis in behavioral change strategies. Her research interest is transitional/coordination of care for patients with cardiovascular disease that target underserved populations (e.g., women, older adults, indigent, and ethnic minorities).

Presentation Summary

The American Association of Cardiovascular and Pulmonary Rehabilitation (AACVPR) celebrated their 25th Anniversary in 2010. Great progress has been achieved as Cardiac Rehabilitation/Secondary Prevention (CR/SP) programs are now considered standard of care for patients with coronary heart disease and other cardiac diagnoses. However, challenges and opportunities continue to exist for optimizing the effectiveness and utilization of CR/SP interventions. This session will summarize the current status of cardiac rehabilitation services in the USA and share considerations for future clinical and research needs.

Objectives of Session

1. Describe a brief overview of the evolution of cardiac rehabilitation in the USA over the past 25 years.
2. Describe the current status of cardiac rehabilitation as a performance measure in the care of patients with cardiac disease.
3. Identify some current limitations and challenges in delivering optimal cardiac rehabilitation services.
4. Discuss some clinical and research needs to help optimize the effectiveness and utilization of cardiac rehabilitation services.

Cardiac Rehabilitation – Preparing for the Next 20 Years – Paul Oh

Paul Oh is the Medical Director of the Cardiac Rehabilitation and Secondary Prevention Program at Toronto Rehab Institute and Assistant Professor of Medicine at the University of Toronto. His clinical and research training includes Internal Medicine, Clinical Pharmacology, Pharmacoeconomics and Clinical Epidemiology. He is Past President of the CACR, current Chair of the CACR Registry Committee and current Chair of the Cardiovascular Chronic Disease Management Working Group of the Cardiac Care Network of Ontario.

Presentation Summary

We are in the midst of rapid change and it is expected that this will accelerate into the near future especially as increasing demands on the health care system collide with intense economic challenges. This presentation will present a vision of cardiac rehab in 2030 through the discussion of trends in demographics, disease, treatments, technology and health policy. Anticipation of, and adaptation to, these trends will position cardiac rehab programs to better meet the needs of diverse and aging populations while bringing value and sustainability to the health system through appropriately targeted preventative interventions at the individual and system level.

Objectives

1. Describe anticipated changes in the demographic and clinical profile of cardiac rehab participants over the next 20 years
2. Discuss trends in cardiovascular interventions and therapeutics and their interface in the rehab setting
3. Project the potential applications of new technologies that will better enable the delivery of rehab closer to home
4. Examine the economic challenges that will catalyze the further evolution of cardiac rehab's position in the health care system

12:00 – 12:30 CACR CLOSING CEREMONY
What Have We Learned and Where Are We Going in 2012?
CACR President – Bob Reid

12:30 - 14:00 Lunch, Poster Presentations and Community Forum
14:00 – 16:00 CCC OPENING CEREMONY/HSFC LECTURE

12:30 - 14:00
Lunch, Poster Presentations and Exhibition
Dîner, présentations par affiches et exposition

14:00 - 16:00
CCC OPENING CEREMONY AND HSFC LECTURE
CÉRÉMONIE D'OUVERTURE DU CONGRÈS ET CONFÉRENCE DE LA FMCC

CAD
HF
HTN
PREV
SURG
General
Community Cardiology
Trainee
Simultaneous Interpretation

Co-Chairs / Co-présidents : SURG
Rob Beanlands
Irfhan Rawji

Clyde Yancy
Chicago, Illinois
Northwestern University

16:00 - 16:30
Health Break, Poster Presentations and Exhibition
Pause santé, présentations par affiches et exposition

17:00

Community Forum Closes
Clôture du Forum communautaire

Monday, October 24

09:00 - 10:30

STATE-OF-THE-ART LECTURE AND CCS RESEARCH ACHIEVEMENT AWARD
CONFÉRENCE SUR L'ÉTAT ACTUEL DES CONNAISSANCES ET PRÉSENTATION DU PRIX D'EXCELLENCE EN RECHERCHE DE LA SCC

CAD
ASO
General
Simultaneous Interpretation
Vascular

Followed by the announcement of the Young Investigator Award Winners.
Suivi de l'annonce des noms des lauréats du Prix à un jeune chercheur.

Co-Chairs / Co-présidents :
Philippe Pibarot
Erick Schampaert

A Journey Through Percutaneous Valve Interventions
Une expédition par la voie d'interventions percutanées de valve
Alec Vahanian
Paris, France
Bichat Hospital

Canadian Cardiovascular Society Research Achievement Award Presentation
Présentation du Prix d'excellence en recherche de la Société canadienne de cardiologie

Introductory Remarks
Mot d'ouverture
Gary Lopaschuk
Edmonton, Alberta

2011 Research Achievement Award Recipient
Récipiendaire du Prix d'excellence en recherche 2011

09:30
COMMUNITY FORUM OPENS (with poster sessions)
OUVERTURE DU FORUM COMMUNAUTAIRE (avec présentations par affiches)

10:30 - 11:00
Health Break, Poster Presentations and Exhibition
Pause santé, présentations par affiches et exposition

12:30 - 14:00
Lunch, Poster Presentations and Exhibition
Dîner, présentations par affiches et exposition

15:30 - 16:00
Health Break, Poster Presentations and Exhibition
Pause santé, présentations par affiches et exposition

16:30
Community Forum Closes
Clôture du Forum communautaire

19:30 - 23:30

CITY NIGHT (ticket required)
SOIRÉE EN VILLE (billet requis)
The Vancouver Club

Tuesday, October 25

09:30

COMMUNITY FORUM OPENS (with poster sessions)
OUVERTURE DU FORUM COMMUNAUTAIRE (avec présentations par affiches)

10:30 - 11:00

Health Break, Poster Presentations and Exhibition
Pause santé, présentations par affiches et exposition

11:00 - 12:30

CIHR/ICRH DISTINGUISHED LECTURE IN CARDIOVASCULAR SCIENCES
PROGRAMME DES CONFÉRENCIERS ÉMINENTS EN SCIENCES CARDIOVASCULAIRES DE L'IRSC/ISCR PREV

CAD

HF

HTN

PREV

Simultaneous Interpretation

Vascular

Chair / Président :

Jean Rouleau

How Can We Reduce CVD Globally by 50%?
Comment pouvons-nous prévenir les MCV de 50 pour cent globalement?
Salim Yusuf
Hamilton, Ontario

12:30 - 14:00

Lunch, Poster Presentations and Exhibition
Dîner, présentations par affiches et exposition

15:30 - 16:00

Health Break, Poster Presentations and Exhibition
Pause santé, présentations par affiches et exposition

16:00

Community Forum Closes For 2011
Clôture du Forum communautaire pour 2011