



**POST CONFERENCE
REPORT**





WORLD CONGRESS ON CARDIAC SCIENCES 2018 HIGHLIGHTS:

The WORLD CONGRESS ON CARDIAC SCIENCES – 2018 having theme “Building and Beating to the Future of the Heart” was organized by BioGenesis Health Cluster on 28th and 29th November 2018 at the J.N.TATA Auditorium, Indian Institute of Science, Bengaluru, Karnataka, India. This event attracted the world’s leading experts along with more than 500 Cardiologists, Practicing Cardiologists, Cardiac, Nurses, Physiatrists, Cardiology Researchers, Vascular Biologists, Cardiac Surgeons, Consultants And Trainees, Interventional cardiologists, Cardiology Faculty, Nurses, Practitioners Physicians, Research Scholars, Scientists, Cardiology Students, Cardiology Associations and Societies.

Attendees of this year's conference had access to hundreds of presentations and symposia and more than hundred Poster presentations, some of which that focused on designing common risk stratification tools in cardiovascular medicine, Discussed the most updated guidelines for cardiovascular disease management, recognize the most relevant evidence in stroke prevention, reviewed effective strategies for prevention of sudden death, including appropriate Management of ventricular arrhythmias, Compared effective preventive strategies in patients with atrial fibrillation and other atrial arrhythmia, Identified risk factors for heart failure and become familiar with strategies to prevent complications in patients with already established heart failure.

This year we described the key clinical elements to risk stratify individuals with hypertrophy Cardiomyopathy. We Cited the critical steps in risk reduction in patients with established coronary disease. We discussed how to Manage cardiovascular risk in primary prevention. We revised the most updated guidelines for prevention of infective endocarditis. We also reviewed the most updated recommendations for primary and secondary prevention of deep vein thrombosis.

A highly attended presentation was a keynote address given by DR. VIVEK JAWALI, on “HEART TRANSPLANT IN INDIA- STATUS”. DR. VIVEK JAWALI, is Chief Cardiothoracic and Vascular Surgeon and Chairman of Dept. of Cardio Vascular Sciences at Fortis Hospital, Bangalore, India.

During his presentation, DR. VIVEK JAWALIdescribed challenges for Heart transplantationTransportationin India.He highlighted Heart transplant programs and its nascent stage in many States of India. Though Karnataka could initiate the program in reasonable numbers enabled by ORBO (Organ Retrieval and Banking Organization) and Fortis Hospital is initiating steps in respective States.

He raised one of the problems facing most transplant centres paradoxically is the lack of recipients. He Said” There is a paucity of referrals from the cardiologist, probably due the uncertainties about the financial viability and long-term results of a transplant. Today in most centres the cardiac surgical and anaesthetic team perform post-transplant care, and it is important to develop the field of transplant cardiology, among cardiologists. This should include recipient selection, preparation and transplant follow-up, as is done in the well-developed transplant centres. It is equally important to motivate the neurosurgeons and neurologists to take an active interest and declare brain death to the appropriate authorities to enable certification and preparation for organ donation. Donor preparation in terms of preserving and maintaining donor organs with judicious use of inotropes, fluid electrolyte management and hormonal treatment plays a crucial role in preserving donor organs which is an important determinant of the short- and long-term results of a transplantation program.”





SOME WORLD WORLD CONGRESS ON CARDIAC SCIENCES 2018 ABSTRACT HIGHLIGHTS:

From **PROF. NEVILLE YEOMANS,**

Emeritus Professor, School Of Medicine,
Western Sydney University. Australia.

Reducing the Gastrointestinal Risks of Low-dose Aspirin in Cardiac Patients:

Low-dose aspirin (LDA) is important for preventing thrombotic vascular events, but carries an annual risk of at least 20% for asymptomatic gastroduodenal ulcers and about 1% for acute upper gastrointestinal (UGI) hemorrhage. Since infection with *Helicobacter pylori* (*H. pylori*) is common, we examined whether its presence increases GI risks of LDA



From **DR. GAEL JAUVERT,**

Clinique Ambroise Pare, Neuilly Sur Seine, France.

A Novel Technique to Simplify Transseptal Puncture Using a Radiofrequency Guidewire:

Transseptal puncture (TSP) is widely used in catheter-based cardiac procedures to gain left atrial access, but its workflow has remained largely unchanged in the last fifty years. This study aimed to evaluate the feasibility the securitysafety and the efficacy of a novel, simplified technique to achieve TSP and catheterization with of a new radio frequency (RF)- powered guidewire and without an over the wire sheath exchange. To achieve transseptal puncture (TSP) with bigger sheaths without requiring an over the wire sheath exchange.



From **PROF. M.E.YEOLEKAR,**

Senior Consultant, Physician And Professor Of Internal Medicine,
K.j.somaiya Medical College And Hospital, Mumbai,india.

Newer Trends in Management of Atherosclerotic Cardiovascular Disease:

In the continued challenge of managing Coronary Artery Disease (CAD), both in numbers and distribution considered globally, five major and note. worthy trends appear to have evolved, that deserve consideration and action. Epidemiologic: Cardiovascular risk estimation, Risk calculation models, Risk Scores/ Classification into high , moderate and low have evolved for eventual usage. The risk charts are available for clinical practice. The main areas for CV risk application in.



From **DR. LOKESWARA RAO SAJJA,**

Department Of Cardiothoracic Surgery,
Star Hospitals, Banjara Hills, Hyderabad, India.

Coronary artery disease (CAD) remains the leading cause of death globally and Asian Indians are at higher risk for CAD by 3-4 times. The Indian CAD patients are standalone subset with higher incidence of multi-vessel CAD, young at presentation, diffuse and distal disease, small coronaries, and significant left ventricular (LV) dysfunction at presentation. Coronary artery bypass grafting (CABG) and percutaneous coronary interventions (PCI) are two prevalent treatment modalities available for treating multivessel CAD. Currently about 1, 40,000 CABG procedures and about 5, 00,000 PCI procedures are done annually. Left internal mammary artery (IMA) graft and additional vein grafts for revascularization is the most commonly adopted strategy to treat multivessel CAD in India





SOME WORLD WORLD CONGRESS ON CARDIAC SCIENCES 2018 ABSTRACT HIGHLIGHTS:

From DR.V. JAYATHIRTA RAO,

Csir-indian Institute Of Chemical Technology,
Hyderabad, India.

**Design, Synthesis and Biological evaluation of novel
2-pyridone derivatives as Phosphodiesterase3A Inhibitors**

PDEs represent a large family of ubiquitously expressed hydrolases that control the intracellular levels of cyclic nucleotides by hydrolyzing cAMP and cGMP to 5AMP and 5GMP, respectively. PDEs constitute a large and complex super family that contains 11 PDE gene families (PDE1 to PDE11).



From DR.V.R.SANAL KUMAR,

Indo-russian Project Coordinator, Dept. Of Aerospace Engineering,
Iisc, Bangalore, Karnataka, India.

**High Heat Capacity of Blood Reduces
Risk on Myocardial Infarction:**

Of late studies reveal that the boundary layer blockage, venturi effect and cavitation will cause aerodynamic flow choking and shock waves in the arteries of human being and animals leading to hemorrhage and myocardial infarction. Note that the biofluid heat capacity ratio and the critical blood pressure (BP) ratio are the key deciding factors for the myocardial infarction, with and without symptom of plaque, due to the formation of shock waves leading to abnormally high transient pressure overshoot. This article corroborates through the blood sample tests, carried out using Differential Scanning Calorimeter, that for a healthy-life the patients with high BP ratio necessarily have blood with high-heat capacity ratio. Therefore, increasing the heat capacity ratio of blood can reduce the risk on myocardial infarction for the cases with the extreme swings in blood-pressure. A closed form analytical model, correlating the biofluid properties and heat capacity ratio is developed and reported herein for forecasting the risk of myocardial infarction and predicting the lower-critical hemorrhage index of human being and animals for proper health care reforms.



From DR. SOMA GUHA THAKURTA,

Director, Synkromax Biotech Pvt Ltd, Tamilnadu, India.

**Cardiovascular Tissue Engineering – A
Paradigm Shiftexploiting The Biomimicry:**

Cardiovascular diseases involve, diseases of the heart, its great vessels, peripheral vessels and also the lungs which are closely associated with heart by doing it a favour of purifying the blood. To address the heart diseases (congenital or acquired) conduits and patches are very often necessary, to achieve the anatomical correction of the system, where presently synthetic materials are playing a major role with their inherent disadvantages. The natural biomaterials to achieve these goals are available. They are mostly imported and have the disadvantages of limited availability, scarce sources, lacking in soundness and the last but most important, they are prohibitively expensive.

The reverse tissue engineering of biological tissue and strengthening procedures enabled us to create better form of such replaceable tissues in the form of patch or conduit from bovine pericardium and bovine jugular vein with or without valves. Not only the patches or conduits, small or large diameter vascular grafts are also necessary for various reasons as replacements. Biomimetic scaffolds can be used by processing it through Tissue Engineering way and effective arterial small diameter vascular graft could be made and preclinical studies conducted.



From COL (DR) MRITHYUNJAYA KALMATH,

Senior Advisor Surgery And Cardiothoracic Surgery,
Command Hospital Air Force Bangalore, Karnataka, India.

**Pulmonary Thromboendarterectomy (pte)
Forchronic Thromboembolic Pulmonary Hypertension (cteph):**

CTEPH (Chronic Thromboembolic Pulmonary Hypertension) is one of most under reported and under treated clinical entity mainly because of late presentation due to lack of symptoms in early phase and under diagnosis due to lack of awareness among the primary healthcare providers. Most of them develop RV dysfunction by the time they are diagnosed. Though surgery is completely curative, it has traditionally been associated with significant morbidity and mortality. Lessons learnt from two decades of UCSD experience has helped in better understanding the pathophysiology, imaging, surgical techniques, instrumentation, postoperative critical care and rehabilitation, leading to improved and reproducible outcomes. Hence there is an urgent need to spread awareness among clinicians so that these patients are offered PTE (Pulmonary Thromboendarterectomy) before the RV takes a hit.



THE OPENING PLENARY













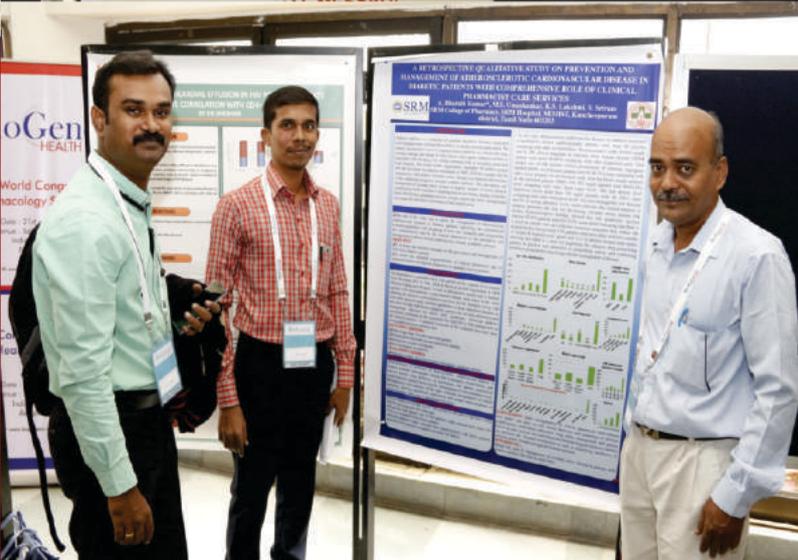
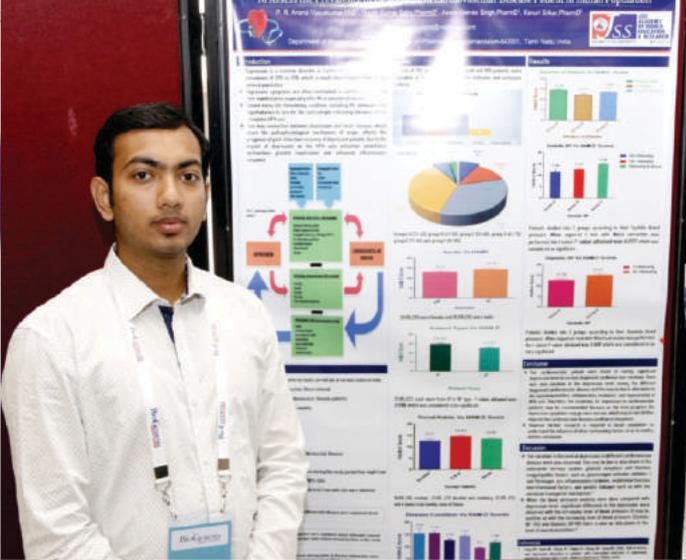
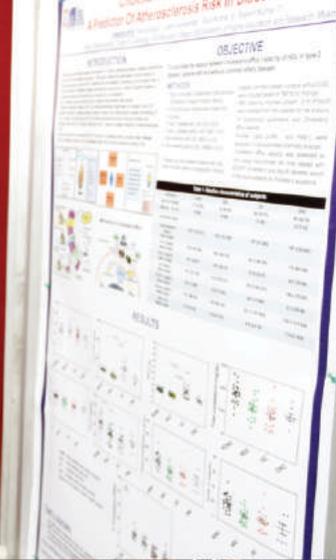












Predictor Of Atherosclerosis Risk In Diabetes

INTRODUCTION

OBJECTIVE

RESULTS

ANGULAR ASD DEVICE IMPLANTATION IN A PATIENT WITH AN INTERRUPTED IVC

Irshad Ahmad Bhat, Khalid Mohi-u-din
Department Of Cardiology - GMC Srinagar (J&K)

A 32 year old Female presented with intermittent palpitations, exertional breathlessness.

- On examination patient was well built, CVS - S1 S2 wide fixed split, ESM at pulmonary area
- ECG - NSR, RBBB with inferior axis
- TTE (CDO)
 - ASD - Septum secundum size 24-26 mm with left to right shunt
 - RA / RV DELATED, RVSP = 45 + RAP, Moderate TR
 - TEE
 - ASD SIZE 28 - 30mm with good rims
 - Patient had interrupted IVC (fig-1, fig-2) which was diagnosed on table.

There is a large poster with multiple echocardiogram images and diagrams illustrating the ASD device implantation procedure in a patient with an interrupted inferior vena cava (IVC).

Correlates of Hypertension in the Oldest Old Population (> 80 years of age) in Urban South India

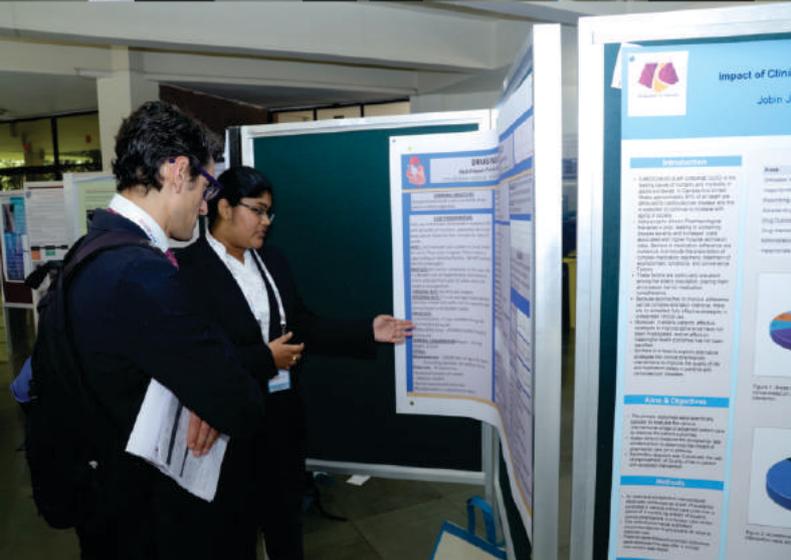
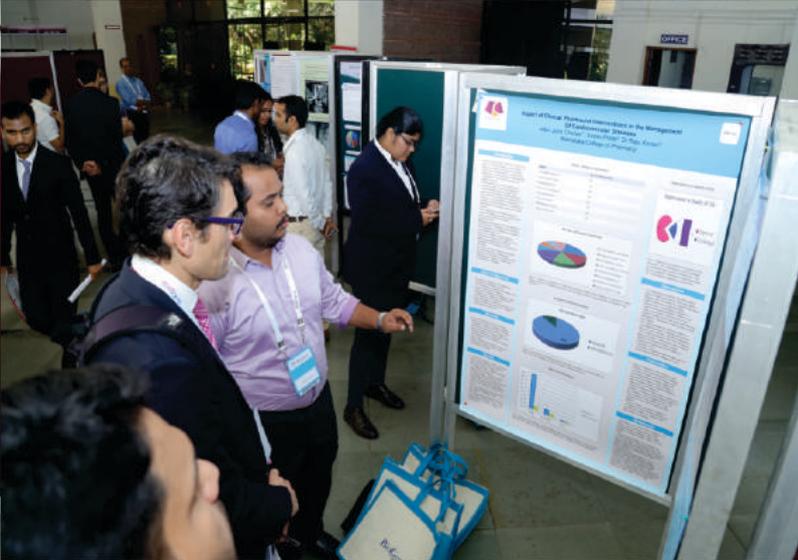
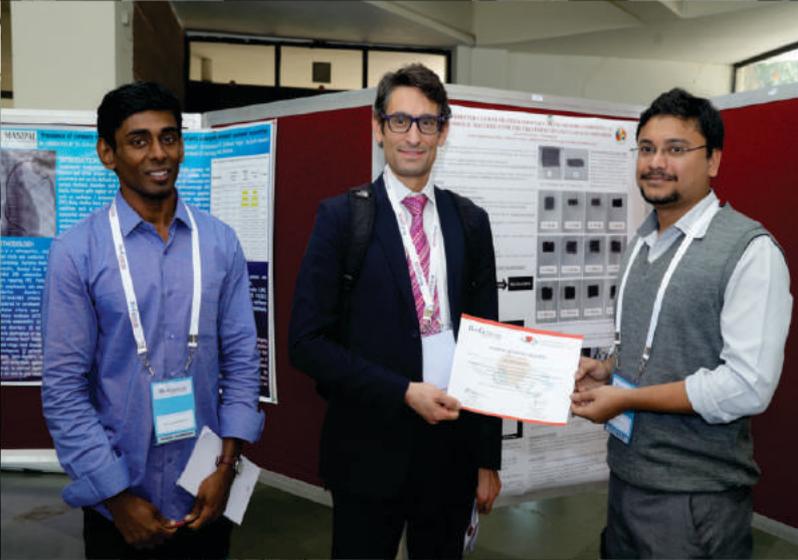
Dr. Venkatesh Reddy, Dr. Subash Chandra, Dr. Aruna Subramanian
Department of Public Health and Community Medicine, All India Institute of Medical Sciences

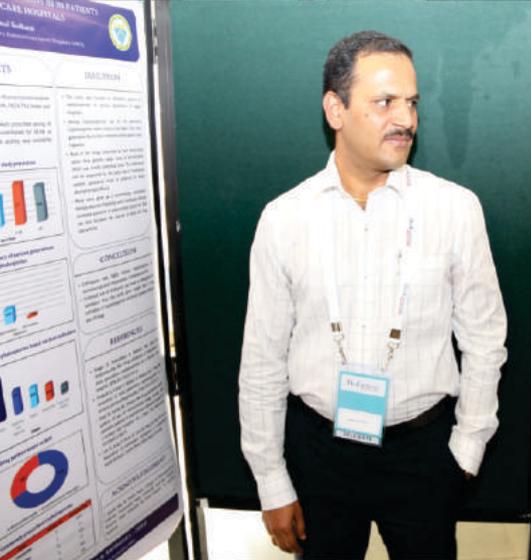
Demographic	Age	Sex	Education	Marital Status	Occupation	Income	Health Status	Living Arrangement	Healthcare Access
1	80-84	Male	Illiterate	Married	Unemployed	< 1000	HT	Alone	No
2	80-84	Female	Illiterate	Married	Unemployed	< 1000	HT	Alone	No
3	80-84	Male	Illiterate	Married	Unemployed	< 1000	HT	Alone	No
4	80-84	Female	Illiterate	Married	Unemployed	< 1000	HT	Alone	No
5	80-84	Male	Illiterate	Married	Unemployed	< 1000	HT	Alone	No
6	80-84	Female	Illiterate	Married	Unemployed	< 1000	HT	Alone	No
7	80-84	Male	Illiterate	Married	Unemployed	< 1000	HT	Alone	No
8	80-84	Female	Illiterate	Married	Unemployed	< 1000	HT	Alone	No
9	80-84	Male	Illiterate	Married	Unemployed	< 1000	HT	Alone	No
10	80-84	Female	Illiterate	Married	Unemployed	< 1000	HT	Alone	No
11	80-84	Male	Illiterate	Married	Unemployed	< 1000	HT	Alone	No
12	80-84	Female	Illiterate	Married	Unemployed	< 1000	HT	Alone	No
13	80-84	Male	Illiterate	Married	Unemployed	< 1000	HT	Alone	No
14	80-84	Female	Illiterate	Married	Unemployed	< 1000	HT	Alone	No
15	80-84	Male	Illiterate	Married	Unemployed	< 1000	HT	Alone	No
16	80-84	Female	Illiterate	Married	Unemployed	< 1000	HT	Alone	No
17	80-84	Male	Illiterate	Married	Unemployed	< 1000	HT	Alone	No
18	80-84	Female	Illiterate	Married	Unemployed	< 1000	HT	Alone	No
19	80-84	Male	Illiterate	Married	Unemployed	< 1000	HT	Alone	No
20	80-84	Female	Illiterate	Married	Unemployed	< 1000	HT	Alone	No

ANALYSIS OF THE QUALITY OF PREVENTION AND MANAGEMENT OF HYPERTENSIVE CARDIOVASCULAR DISEASE IN HYPERTENSIVE PATIENTS WITH COMORBID TYPE 2 DIABETES

Dr. Subash Chandra, Dr. Aruna Subramanian, Dr. Venkatesh Reddy
Department of Public Health and Community Medicine, All India Institute of Medical Sciences

This poster includes several bar charts and tables comparing the quality of care for hypertensive patients with and without comorbid type 2 diabetes across various clinical parameters.





CAD tends to be overlooked in women, says expert

Coronary Artery Disease in women has seen a steady rise'

SPECIAL CORRESPONDENT
GENDER seems to matter in the way Coronary Artery Disease (CAD) is perceived. The disease does not receive the attention and concern in women that it receives in men. Risk factors carry different predictive values and due to documented differences in presentation, the disease tends to be overlooked or

discussed in women, said a doctor from Sri Jayadeva Institute of Cardiovascular Sciences in a presentation at the World Congress on Cardiac Sciences that began in the city on Wednesday. CAD causes impaired blood flow in the arteries that supply blood to the heart. It is the most common form of heart disease. Making a presentation on 'Acute Coronary Syndrome in Women' at the conference, Veena Nanjappa, Interventional Cardiologist at Sri Jayadeva Institute of Cardiovascular Sciences and Research in Mysuru, said the in-

350 heart transplants in India since 2016

SPECIAL CORRESPONDENT
Organ donation and heart transplants are catching up in India. From 2016 till now, more than 250 transplants have been done in various hospitals in the country. The whole of Europe did

less than 100 in this period, said Vivek Jwail, chairperson of the World Congress on Cardiac Sciences that began in the city on Wednesday. "The good news is it is happening in smaller cities now. With innovative practices such as the

concept of 'green corridor' (India is the only country to have this) and use of passenger planes to transport organs, the transplant scene is getting better organised. Last year India did more transplants than any other country in the world," he added.

cardiac infarction risk among women compared with men. "The study confirmed a markedly stronger association of diabetes with myocardial infarction among women compared with men. Psychosocial factors also tended to associate more strongly with increased risk among women, though the difference was less in magnitude," she said.

like in the past when women got it mostly after menopause. The main reason for this is extreme stress caused due to multi-tasking. The risk factors for heart disease in women include the classic regular ones such as smoking, high cholesterol, high blood pressure, lack of physical activity and an unhealthy diet. "There are also some specific ones which include the use of birth control and other hormone pills. But, in 20% of women, atypical symptoms such as discomfort in the shoulders, back, and neck and shortness of

breath are often the first and only presenting symptoms," the doctor explained. **Need of the hour** "The need of the hour is to create awareness about the fact that heart diseases can affect anyone irrespective of their age or gender. Only early and corrective lifestyle changes and preventive measures can help in combating the risk factors and help avoid heart diseases. Women, in particular, need to be aware of the signs and symptoms and take adequate care of their health," Dr. Veena added.

INTERHEART study, the doctor said the large case-control study provided excellent data on the relationship of clinical parameters with the risk of ischemic heart disease worldwide, including patterns of association of myo-

Reasons for CAD Speaking to The Hindu, she said: "The most worrying factor is that it is affecting more women in the reproductive age group now, un-

Doctors worried over declining effectiveness of typhoid drugs

TIMES NEWS NETWORK

Bengaluru: The epidemic swept across Africa three years ago and now doctors are worried drug-resistant typhoid could hit India too. Doctors say the country is quickly running out of antibiotics to treat the disease. Ciprofloxacin, which was introduced in 1990 to battle the bacterial disease, has been rendered ineffective, prompting doctors to prescribe another drug (ceftriaxone). Dr Arti Kapil, professor of microbiology, All India Institute of Medical Sciences (AIIMS), New Delhi, said it is believed to be the

Drugs available online a concern

Doctors do not prescribe a combination of antibiotics, but it's available online, adding to the chaos. Patients who buy these drugs online may not be aware of the effects of taking them without a prescription. There is an urgent need to formulate guidelines on prescribing and using antibiotics. **Dr Arti Kapil** | PROFESSOR OF MICROBIOLOGY, AIIMS, NEW DELHI result of bacterial resistance due to overuse of antibiotics over last two decades.

Study required

Speaking about 'Antibiotics treatment for typhoid fever: Have we run out of options?' at the World Congress on Infectious Diseases and Antibiotics on Wednesday, Dr Kapil said the online sale of a combination of antibiotics to treat typhoid is a matter of concern. Dr Kapil stressed on the need to conduct a community-based typhoid survey across the country to understand whether there is a need to include typhoid vaccine in the immunisation scheme. "But such surveys require testing blood samples," she said. "This demands blood culture tests be done in pri-

mary health centres (PHCs). Currently, PHCs don't have a lab facility to support such a massive study." **Risk of heart ailment triples post-menopause** Dr Veena Nanjappa, Interventional cardiologist, Sri Jayadeva Institute of Cardiovascular Sciences and Research, Mysuru, said, "Cardiovascular disease (CAD) is twice as common among women with diabetes as those without. They are four times likely to be hospitalised, and women have a higher risk than men. Post menopause women are at equivalent risk to men of same age. Risk of CAD triples after menopause."

హృద్రోగ సమస్యలపై అప్రమత్తం అవసరం



ప్రఖ్యాత నైసకాలజిస్ట్ డాక్టర్ పద్మిని, చైర్మన్ డాక్టర్ వివేక్ జోషి తదితరులు

బెంగళూరు, నవంబరు 28 (ఆంధ్రజ్యోతి ప్రతినెది): హృద్రోగ సమస్యలపై ఉదాసీనత ఎంతో ప్రం కూడదని కార్డియోక్ సైన్సుస్ వరల్డ్ కాంగ్రెస్ అధిష్టాధిపతి పడింది. నగరంలోని జైన్ టాటా ఆడిటోరియంలో రెండు రోజుల అంతర్జాతీయ సదస్సును లెఫ్ట్ హెండ్ జనరల్ డి.రఘునాథ్, కార్డియోక్ సైన్సు వరల్డ్ కాంగ్రెస్ అధ్యక్షుడు డాక్టర్ వివేక్ జోషి లాంఛనంగా ఆరంభించారు. కార్డియోక్ సైన్సుకు సంబంధించి ప్రపంచ వ్యాప్తంగా పరిశోధకులు, స్కాలర్లు, వైద్య నిపుణులు, హృద్రోగ నిపుణులు ఈ సమావేశంలో పాల్గొంటున్నారు. తొలిరోజు హృద్రోగాలు దరిచేరకుండా అనుసరించాల్సిన విధానాలపై చర్చించారు. గురువారంతో ఈ సదస్సు ముగియనుంది. చివరి రోజు సదస్సులో పలు పరిశోధనా పత్రాలు సమర్పించి వాటిపై విస్తారంగా చర్చించనున్నారు. ఈ సందర్భంగా వరల్డ్ కాంగ్రెస్ కార్డియోక్ సైన్సు అధ్యక్షుడు డాక్టర్ వివేక్ జోషి మాట్లాడుతూ హృద్రోగాలు దాపరించ నీరులా విస్తరిస్తున్నాయని మారుతున్న జీవనశైలి ఇందుకు ప్రధాన కారణమన్నారు. కాలుష్యం ఇతర అంశాల ప్రభావంతో పోలిస్తే జీవనశైలి మార్పుకోవడం ద్వారా ఈ సమస్య నుంచి బయటపడే అవకాశాలు అధికం అన్నారు. సమస్య వ్యాప్తి అందోళన చెందేకంటే రాకుండా అన్ని జాగ్రత్తలు చేపట్టడమే ఉత్తమ మార్గమన్నారు. సదస్సులో వ్యక్తమయ్యే ఆధారంగా భారతీయ వైద్య నిపుణులకు ఉపకరించేలా హృద్రోగ చికిత్సలు, వైద్య ప్రక్రియలకు సంబంధించి ఓ నివేదికను రూపొందించే అలోచన ఉండన్నారు.

SAVE THE DATE

BioGenesis HEALTH CLUSTER

CONFERENCES - 2019

Venue : United Arab Emirates, Dubai | Date : 5th & 6th December - 2019



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Venue : J.N. Tata Auditorium, Indian Institute of Science, Bengaluru, India | Date : 21st & 22nd November - 2019

V World Congress of Gerontology and Geriatrics
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WORLD CONGRESS ON
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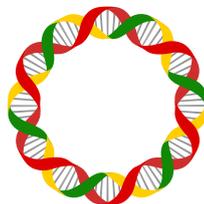
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Venue : Shangri-La Hotel, Bangkok, Thailand | Date : 25th & 26th July - 2019

WORLD CONGRESS ON
DRUG DISCOVERY & DEVELOPMENT | 2019



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Venue : J.N. Tata Auditorium, Indian Institute of Science, Bengaluru, India | Date : 8th September - 2019



World Congress on Women - 2019

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