IT IS OUR PLEASURE to welcome you to the American Heart Association/American Stroke Association’s Cardiometabolic Health and Diabetes Summit. We’re pleased that you can join us in Dallas, Texas, and we hope you’ll enjoy being engaged in the conversation.

The objective of the Cardiometabolic Health and Diabetes Summit is to bring together stakeholders across the continuum of care, including healthcare professionals, organizations, health systems and patients to develop a strategic plan for the next 3-5 years by discussing gaps and potential solutions in cardiometabolic disorder and diabetes management.

We’ve planned a series of presentations, panel discussions and breakout sessions to discuss barriers of managing cardiometabolic conditions such as diabetes mellitus (type 1 and 2), including communication challenges, treatment and lifestyle compliance. We are looking for actionable strategies leveraging our evidence-based approaches for diagnosis, treatment and long-term management of cardiometabolic conditions. We’ve planned a networking breakfast and group discussions where all attendees will be tasked to help develop an action plan.

Thank you for being part of this important endeavor.

EDUARDO SANCHEZ, MD, MPH, FAAFP
Chief Prevention and Medical Officer for Prevention
American Heart Association/American Stroke Association
Dallas, Texas

ROBERT H. ECKEL, MD, FAHA
Charles A. Boettcher Endowed Chair in Atherosclerosis
Division of Endocrinology, Metabolism, and Diabetes
Anschutz Medical Center, University of Colorado Denver
Aurora, Colorado
SPECIAL THANKS TO THE CARDIOMETABOLIC HEALTH AND DIABETES SUMMIT PLANNING COMMITTEE

Biykem Bozkurt, MD, PhD
April Carson, PhD, MSPH, FAHA
Martha Daviglus, MD, PhD, FAHA
Prakash Deedwania, MD, FAHA
Robert Eckel, MD, FAHA
Kate Kirley, MD, MS
Cynthia Lamendola, NP, MSN, FAHA
Anne Sumner, MD, FAHA
Tracy Wang, MD, FAHA

THANK YOU!

We thank each of our esteemed presenters and participants for sharing our passion for improving awareness, detection and management of cardiometabolic health and diabetes. Together we can drive millions of Americans to better cardiovascular health and reduce deaths from cardiovascular diseases and stroke.
WHY A CARDIOMETABOLIC HEALTH AND DIABETES INITIATIVE?

Cardiometabolic disorders and diabetes have a significant impact on cardiovascular risk and mortality:

- **Prediabetes**: In the United States, 81.6M adults have prediabetes. An estimated eleven percent of persons with prediabetes progress to diabetes annually. Prediabetes is diagnosable and treatable with comprehensive lifestyle programs.

- **Diabetes**: Individuals with diabetes are 2-4 times more likely to die from cardiovascular disease than those without diabetes. In the United States, 23.4M adults have physician-diagnosed diabetes, and approximately 18,000 people <20 years of age are diagnosed with type 1 DM each year.

- **Metabolic Syndrome**: Metabolic syndrome (MetS) occurs when an individual presents with three of the following five conditions: increased blood pressure, high blood sugar, excess body fat around the waist, or abnormal cholesterol or triglyceride levels. The presence of MetS further increases an individual’s risk of heart disease, stroke and diabetes. MetS affects nearly 23 percent of adults in the United States.

Acknowledging the strong links between cardiometabolic conditions and cardiovascular risk, the American Heart Association is expanding its focus to better support individuals living with cardiometabolic conditions and diabetes. To support this, the AHA will launch the Cardiometabolic Health and Diabetes Initiative. This initiative will support a comprehensive approach to the treatment and management of individuals with diabetes, prediabetes and metabolic syndrome, aimed to optimize cardiometabolic risk factors, and ultimately lower cardiovascular risk.

www.heart.org
SUMMIT GOALS

By expanding the AHA/ASA’s efforts to include initiatives and programs to reduce the prevalence and impact of cardiometabolic risk factors, such as prediabetes, and conditions, such as diabetes mellitus, the AHA will progress towards its mission of building healthier lives free of cardiovascular diseases and stroke.

Building on the AHA/ASA’s leadership in developing quality clinical care programs, cardiovascular population-based health programs, public awareness, education, and empowerment, with particular attention to undertreated populations, the AHA would work to unite primary care, cardiology, endocrinology and other specialty care provider communities in a comprehensive approach to caring for and treating individuals with diabetes.

By leveraging and elevating existing science, the Cardiometabolic Health and Diabetes Summit will identify opportunities to build programs and initiatives focused on:

- Bridging and uniting multidisciplinary clinical care to address the needs of individuals living with multiple cardiometabolic comorbidities
- Increasing patient awareness around cardiometabolic risk and empowering individuals to be engaged in their care at home and in the community
- Activating communities to effectively address the complex health needs of people living with these chronic conditions
- Improving the clinical management of prediabetes, diabetes, and other cardiometabolic conditions through comprehensive quality improvement approaches across inpatient and outpatient settings
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<th>Time</th>
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<tr>
<td><strong>TUESDAY, DECEMBER 5</strong></td>
<td><strong>MONDAY, DECEMBER 4</strong></td>
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<tr>
<td>7:30 AM</td>
<td>Networking Breakfast</td>
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<td>8:30 AM</td>
<td>Welcome &amp; Why Addressing Cardiometabolic Health and Diabetes Care is Important to the American Heart Association</td>
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<td>Nancy Brown, CEO, AHA/ASA</td>
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<td>8:40 AM</td>
<td>Epidemiology and Interdependencies of Diabetes, Prediabetes, and Metabolic Diseases on Cardiovascular Health</td>
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<td>Eduardo Sanchez, MD, MPH, FAAFP, AHA Chief Medical Officer Prevention and Chief of the Center for Health Metrics &amp; Evaluation</td>
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<tr>
<td>9:00 AM</td>
<td>Cardiometabolic Disorder and Diabetes Management in the U.S. Plenary Presentations</td>
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<td>• Moderator: Eduardo Sanchez, MD, MPH, FAAFP, AHA Chief Medical Officer Prevention and Chief of the Center for Health Metrics &amp; Evaluation</td>
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<td>• Bryce Smith, PhD, MSSW, Centers for Disease Control and Prevention, Division of Diabetes Translation</td>
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<td>• Samuel Arce, MD, FAAFP, National Hispanic Medical Association</td>
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<td>9:25 AM</td>
<td>Understanding the Role of the Healthcare System and Quality Improvement in Supporting People with Cardiometabolic Disorders – Panel Discussion</td>
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<td>• Moderator: Robert Eckel, MD, FAHA, University of Colorado</td>
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<td>• Gregory Schwartz, MD, PhD, FAHA, VA Medical Center Denver and University of Colorado School of Medicine</td>
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<td>• Robert Eckel, MD, FAHA, University of Colorado</td>
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<td>• Jim Dudl, MD, Kaiser Permanente</td>
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<td>10:30 AM</td>
<td>Break Out Session</td>
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<td>10:35 AM</td>
<td>Break</td>
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| 10:45 AM| Prevention Through Increasing Patient Awareness Around Cardiometabolic Risk and Empowering Individuals to be Engaged in Their Care – Panel Discussion | **Moderator:** Anne Sumner, MD, FAHA, National Institute of Diabetes and Digestive and Kidney Diseases  
**Kimberly Ketter,** MSN, AGNP-C, CDE, Case Management Associates, LLC  
**Goutham Rao,** MD, FAHA, Case Western Reserve University  
**Doris Browne,** MD, MPH, National Medical Association  
**Shannon Christen,** RD, CDE, University of Colorado Health |
| 11:55 AM| Poster Showcase: Cardiometabolic Health and Diabetes Activities      |                                                                            |
|         | Networking Lunch                                                      |                                                                            |
| 11:55 AM| Break Out Session | Action Planning:                                                        | Ranking the AHA strategic priorities to reduce the impact and prevalence of Prediabetes, Diabetes Mellitus and Metabolic Syndrome on Cardiovascular Outcomes |
| 12:00 PM| 12:30 PM Activating Communities and Leveraging Technology to Advance the Complex Health Needs of People Living with Cardiometabolic and Cardiovascular Diseases – Panel Discussion | **Moderator:** Tracy Wang, MD, FAHA, Duke Clinical Research Institute  
**Cindy Lamendola,** NP, MSN, FAHA, Preventive Cardiovascular Nurses Association, Stanford University  
**Kate Kirley,** MD, MS, American Medical Association  
**Patrick Wayte,** Senior Vice President, Center for Digital Health Innovation, American Heart Association |
|         | Break Out Session | Action Planning:                                                        | Ranking the AHA strategic priorities to reduce the impact and prevalence of Prediabetes, Diabetes Mellitus and Metabolic Syndrome on Cardiovascular Outcomes |
| 12:30 PM| 1:40 PM Break                                             |                                                                            |
| 12:30 PM| 2:00 PM Voting and Panel Recaps: Prioritize Strategies to Reduce the Outcomes of Prediabetes and Diabetes | **Eduardo Sanchez,** MD, MPH, FAAFP, **Robert Eckel,** MD, FAHA |
| 12:30 PM| 2:30 PM Recommended Solutions and Wrap Up                      | **Eduardo Sanchez,** MD, MPH, FAAFP, **Robert Eckel,** MD, FAHA |
| 12:30 PM| 3:00 PM Adjourn                                              |                                                                            |
Nancy Brown has been Chief Executive Officer of the American Heart Association (AHA) since October 2008. Under Nancy’s leadership, the association established the first-ever definition of “cardiovascular health” and announced its bold 2020 health impact goal to improve the cardiovascular health of all Americans by 20 percent while reducing deaths from cardiovascular diseases and stroke by 20 percent. This goal has provided a rallying point for the association’s millions of volunteers, scientists, staff and donors.

Samuel Arce, MD, FAAFP, is a family physician and attending physician at the Jamaica Hospital Medical Center in New York City. He serves as Medical Director for two large medical centers in New York City, is an associate professor at the University of Guadalajara, and is a faculty member of the New York Medical College where he serves as an instructor. He is also a fellow of the American Academy of Family Physicians and the New York Academy of Medicine. He has received awards from the Senate of Puerto Rico for Professional Excellence, along with awards from the National Hispanic Medical Association for his efforts in healthcare awareness. He has been in full-time practice and academic medicine for the past 30 years.
Doris Browne, MD

Doris Browne, MD, MPH, is a medical oncologist and president of the National Medical Association (NMA) and Browne and Associates, a health consulting company. Dr. Browne retired from the National Cancer Institute, where she managed the breast cancer portfolio in the Division of Cancer Prevention. She was a director of the US Army Medical Research and Materiel Command, where she managed the biomedical research programs for the Army and the Department of Defense. She is an international expert in the medical management of radiation casualties, women's health, chronic disease, cancer, and HIV/AIDS and has published in textbooks and peer-reviewed articles.

Shannon Christen, RD, CDE

Shannon Christen, RD, CDE, is a diabetes educator at the University of Colorado Hospital in the Cardiac and Vascular Prevention Program and Endocrinology Division, where she cares for patients who are affected by diabetes, lipid disorders and obesity. She has a passion for working with patients with severely elevated triglycerides and works closely with providers and patients in the approval process for PCSK9 cholesterol inhibitors. Shannon was recognized in 2016 for her work by receiving the “Partners in Care” (non-physician award) for mastery of care for those with diabetes.
Jim Dudl, MD, is the clinical lead for diabetes at the Kaiser Permanente Care Management Institute. He is an endocrinologist with extensive clinical and research experience and has had a long-term interest in diabetes control. He established an inter-regional endocrine group that uses metrics to implement and refine treatments that narrow or eliminate care gaps. He also established a cardiac-prevention program that is associated with a drop of more than 60 percent ST-segment elevation myocardial infarction (STEMI) heart attacks at Kaiser Permanente Northern California. Jim is an expert at using large-system metrics as a primary tool to assure implementation program success.

Robert H. Eckel, MD, FAHA, is the Charles A. Boettcher Endowed Chair in Atherosclerosis in the Department of Medicine at the University of Colorado, Denver, in Aurora, Colorado. Dr. Eckel is a distinguished alumnus of the University of Cincinnati College of Medicine in Cincinnati, Ohio. He performed a Medical Residency at University of Wisconsin Hospitals in Madison, Wisconsin, and a Senior Fellowship in Metabolism and Endocrinology at the University of Washington School of Medicine in Seattle, Washington. Dr. Eckel has more than 300 articles published in peer-reviewed journals and is a past president of the American Heart Association, the Obesity Society and the Association of Patient-Oriented Research.
Kimberly Ketter, MSN, AGNP-C, CDE, is an adult geriatric nurse practitioner and a certified diabetes educator at Case Management Solutions, LLC. She is an identical twin and with her sister co-owns a diabetes wellness center in Petersburg, Virginia. Her primary focus is managing and educating adults with Type 2 diabetes and other cardiometabolic issues, including obesity and hypertension. As a heart failure survivor, she contributes her time and experiences as a Heart Failure Ambassador for the AHA. She also co-leads the medical ministry at the Saint Paul’s Baptist Church in Richmond, Virginia, where she was instrumental in implementing the AHA’s Empowered to Serve faith-based program.

Kate Kirley, MD, MS, is director of Chronic Disease Prevention in the Improving Health Outcomes group at the American Medical Association. She serves as the lead clinician on the diabetes prevention initiatives of the AMA. Prior to joining the AMA, she was a practicing family physician and health services researcher at NorthShore University HealthSystem and a clinical assistant professor in the Department of Family Medicine at the University of Chicago. After graduating from the University of Michigan Medical School, she completed her Family Medicine Residency at UIC/Illinois Masonic Medical Center. She subsequently completed a research fellowship at the University of Chicago.
Cindy Lamendola, NP, MSN, FAHA

Cindy Lamendola, NP, MSN, FAHA, is a nurse practitioner and Clinical Nurse Research Coordinator at Stanford Medicine in Stanford, California. Her career has focused on cardiovascular nursing, and her research has focused on insulin resistance, Type 2 diabetes and cardiovascular disease. Her clinical practice is at the Stanford Center for Inherited Cardiovascular Disease and emphasizes familial hypercholesterolemia. She had a clinical practice caring for patients with complex Type 2 diabetes and cardiometabolic issues. She is a founding member, current board member, fellow and past president of PCNA, and a fellow of the AHA. She has lectured nationally and published articles on insulin resistance, diabetes and CVD risk factors.

Goutham Rao, MD, FAHA

Goutham Rao, MD, FAHA, is chairman of the Department of Family Medicine and Community Health in the University Hospital (UH), Cleveland Medical Center. He is also division chief of Family Medicine, at the UH Rainbow Babies and Children’s Hospital, and Clinical Professor of Family Medicine at the Case Western Reserve University School of Medicine. He graduated from the McGill University Faculty of Medicine and did his residency in Family Medicine at St. Joseph’s Health Center and a fellowship in Faculty Development at UPMC St. Margaret Hospital. He specializes in childhood obesity and nutrition.
Eduardo Sanchez, MD, MPH, FAAFP, serves as Chief Medical Officer for Prevention and Chief of the Center for Health Metrics and Evaluation for the American Heart Association (AHA). Prior to joining the AHA, he served as vice president and CMO for Blue Cross and Blue Shield of Texas, Director of the Institute for Health Policy at the University of Texas School of Public Health, and Commissioner of the Texas Department of State Health Services. He holds degrees in chemistry and biomedical engineering and is board-certified in family medicine.

Gregory Schwartz, MD, PhD, FAHA, is professor of medicine (Cardiology) at the University of Colorado and Chief of Cardiology at the VA Medical Center in Denver, Colorado. He has had a long laboratory research interest in myocardial energy metabolism and ischemic protection using large animal models. He has led and participated in numerous clinical trials focusing on lipid and metabolic interventions in coronary heart disease. These include the first randomized, placebo-controlled outcomes trial of a statin in acute coronary syndrome (MIRACL trial, 2001). He is co-chair of the Odyssey Outcomes trial evaluating PCSK9 inhibition with alirocumab after acute coronary syndrome.
Bryce Smith, PhD, MSSW, joined the Division of Diabetes Translation at the CDC to start up the Translation, Health Education and Evaluation Branch. The focus of the Translation Branch is to develop, synthesize, and translate the best possible science and practice for use in various public health settings. Prior to joining the division, he served as the team lead for Prevention Research and Evaluation in the Division of Viral Hepatitis. He also served as the clinical director of a community-based organization that provided mental health and prevention services and as a clinical social worker in substance abuse treatment centers in Atlanta.

Anne Sumner, MD, FAHA, is the section chief of the Section on Ethnicity and Health, Diabetes, Endocrinology, and Obesity Branch of the NIH. She specializes in clinical research, health disparities, and social and behavioral sciences. The purpose of her research is to design screening tests and early interventions to reduce the impact of the diabetes and heart disease epidemics that are occurring in populations of African descent worldwide. Her research has shown that neither triglyceride-based screening tests nor A1C screening tests optimally detect either cardiometabolic disease or diabetes in African-descent populations. As prevention of complications of these diseases requires effective early detection, she is working on optimizing screening paradigms for both cardiometabolic disease and diabetes in African-descent populations in Africa and throughout the Diaspora.
Tracy Y. Wang, MD, FAHA, is an associate professor of medicine in cardiology and practicing noninvasive cardiologist at Duke University. Dr. Wang has led clinical trials and registries that have focused on health disparities, care quality assessment, and quality improvement, and has published more than 200 manuscripts on these topics. She has lectured widely on the use of registry data to identify treatment gaps for intervention. Dr. Wang is currently vice chair of the American Heart Association Quality of Care and Outcomes Research Council and serves on several task forces and writing groups for the American Heart Association, American College of Cardiology and American College of Physicians.

Patrick Wayte, SVP, is senior vice president of the Center for Health Technology and Innovation at the AHA. He leads integrated digital health initiatives across the health continuum, with emphasis on secondary prevention, healthcare transition, chronic care, and the application of AHA science to digital platforms and technologies. Patrick spearheads new business models in digital health solutions and services, with the intent of achieving definable and scalable health outcomes. The new business models emphasize remote patient monitoring, telehealth, social connectivity, habit, design and reward models.