

From Metabolic Syndrome to Cardiometabolic Risk...

2006

# Cardiometabolic Health Congress

October 19-21, 2006 • Marriott Copley Place • Boston, MA

Type 2 Diabetes Dyslipidemia Obesity  
Hypertension Insulin Resistance Inflammation



Interact with Leading Experts in Cardiometabolic Risk Management!



Christie M. Ballantyne, MD  
Baylor College of  
Medicine



Richard W. Nesto, MD  
Harvard Medical  
School



Jay S. Skyler, MD  
University of Miami

Don't Miss Our Interactive Case Studies,  
Meet-the-Expert, and Debate Sessions!

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Dear Colleague:

Please join us and our distinguished faculty for the 2006 Cardiometabolic Health Congress, taking place October 19–21, 2006, at the Marriott Copley Place in Boston, MA.

The 2006 Cardiometabolic Health Congress will translate the latest clinical data and research into practical and effective approaches to identify and effectively manage your patients at increased cardiometabolic risk.

The goal of the congress is to improve outcomes through early identification and intervention strategies for patients with, or at risk of developing, diabetes and cardiovascular disease.

We are committed to making the 2006 Cardiometabolic Health Congress one of the most productive and influential educational opportunities available to the medical community.

We look forward to seeing you in Boston!

**Christie M. Ballantyne, MD**  
Baylor College of Medicine

**Richard W. Nesto, MD**  
Harvard Medical School

**Jay S. Skyler, MD, MACP**  
University of Miami

## Who Should Attend?

Clinicians responsible for the prevention and management of diabetes and cardiovascular disease – with the goal of reducing cardiovascular risk and related cardiometabolic complications

## Don't Miss the Opportunity to Interact with Leading Clinicians from Across the United States!

Albany Medical College, American Diabetes Association, Arkansas Heart Center, Blue Cross Blue Shield of Massachusetts, Baylor College of Medicine, Berkshire Health Systems, Berkshire Visiting Nurse Association, Beverly Hospital Hunt Center, Boston Medical Center, Brigham and Women's Hospital, Centre Cardiovasculaire de Laval, Children's Hospital Boston, Children's Hospital Los Angeles, Harvard Medical School, Clinical Cardiology, Clinique de Prevention de la maladie Vasculaire et de Lipides, Columbia University College of Physicians and Surgeons, Cumberland Valley Endocrinology, Dartmouth Preventive Medicine, Dow Chemical Company, Duke University Medical Center, East Carolina University, Emory University School of Medicine, Edward Heart Hospital, Endocrinology Consultants of East Tennessee, Fort Wayne Endocrinology, Harvard Medical School, Health Care Partners, Healthy Communities Access Project @ CHP, Heart & Vascular Center, Hilltown Community Health Center, James Madison University, Jefferson Medical College, Joslin Diabetes Center, Kaiser Permanente, Lahey Clinic, Lifestyle Management Institute, Lincoln Medical and Dental Health Center, Massachusetts General Hospital, Mayo Clinic Arizona, Mercer University, Midatlantic Cardiovascular Associates, Milton Hospital, Mount Sinai Heart Clinical Trials Unit, Mount Sinai Hospital, Mount Sinai Medical Center, Mount Sinai School of Medicine, New Mexico Heart Institute, North Country CHC, Nyack Hospital/Good Samaritan Hospital, Partners HealthCare, PCM, PharmaGenesis, Inc., Prahbaker Medical LLC, Prairie Cardiovascular Consultants, Range Regional Health Services, Raritan Bay Cardiology Group, Rochester Lifestyle Change, Salazar Medical Group PC, Self Regional Healthcare, Shawnee Mission Medical Center, Southern Jamaica Plain Health Center/Brigham & Women's Hospital, Southern Nevada Health District, Springfield Diabetes & Endocrinology Center, St. Joseph Healthcare, St. Joseph Hospital, St. Luke's-Roosevelt Hospital, St. Vincent Health Systems, SUNY Upstate Medical University at Syracuse, NY, The Heart Center, The Miriam Hospital, Tulane University Health Sciences Center, University of Colorado Health Sciences Center, University of Maryland School of Medicine, University of Michigan, University of Miami, University of Texas Health Science Center at San Antonio, VA Hudson Valley Health Care System, Weill-Cornell Medical College, Wellspan Health, West Roxbury Veterans Administration, White-Wilson Medical Center, Wright State University, Yale University School of Medicine

## Chairpersons



**Christie M. Ballantyne, MD**  
Baylor College of Medicine



**Richard W. Nesto, MD**  
Harvard Medical School



**Jay S. Skyler, MD, MACP**  
University of Miami  
Miller School of Medicine

## Distinguished Faculty



**Louis J. Aronne, MD**  
Weill-Cornell Medical College



**C. Ronald Kahn, MD**  
Joslin Diabetes Center



**Jorge Plutzky, MD**  
Brigham and Women's Hospital



**Christopher P. Cannon, MD**  
Brigham and Women's Hospital



**Francine R. Kaufman, MD**  
Childrens Hospital Los Angeles



**Daniel J. Rader, MD**  
Penn Cardiac Care at  
Presbyterian Medical Center



**Jean-Pierre Després, PhD**  
Laval Hospital Research Center



**David E. Kelley, MD**  
University of Pittsburgh  
Medical Center



**Paolo Raggi, MD**  
Emory University  
School of Medicine



**Robert H. Eckel, MD**  
University of Colorado at  
Denver Health Sciences Center



**William E. Kraus, MD**  
Duke University  
Medical Center



**Neil B. Ruderman, MD**  
Boston Medical Center



**Vivian Fonseca, MD**  
Tulane University Health  
Sciences Center



**Thomas H. Lee, MD**  
Partners HealthCare  
System, Inc.



**Frank M. Sacks, MD**  
Brigham and Women's Hospital



**John P. Foreyt, PhD**  
Baylor College of Medicine



**Kenneth G. MacDonald, MD**  
Brody School of Medicine at  
East Carolina University



**Gerald I. Shulman, MD PhD**  
Yale School of Medicine



**Henry N. Ginsberg, MD**  
Columbia University  
College of Physicians  
and Surgeons



**Nancy Houston Miller, RN BSN**  
Stanford University  
School of Medicine



**Scott Urquhart, PA-C**  
James Madison University  
Physician Assistant Program



**Steven M. Haffner, MD**  
University of Texas  
Health Science Center at  
San Antonio



**David M. Nathan, MD**  
Harvard Medical School



**Matthew R. Weir, MD**  
University of Maryland  
School of Medicine



**Matthew M. Hutter, MD**  
Massachusetts General Hospital



**Elizabeth O. Ofili, MD MPH**  
Morehouse School of Medicine



**Stephen D. Wiviott, MD**  
Brigham and Women's Hospital



**Richard A. Kahn, PhD**  
American Diabetes Association



**F. Xavier Pi-Sunyer, MD MPH**  
St. Luke's-Roosevelt Hospital

7:00am - 8:00am **Continental Breakfast**

8:00am - 8:15am **OPENING REMARKS**

*Jay Skyles, MD*

8:15am - 9:00am **KEYNOTE PRESENTATION**

**Assessing Global CVD and Type 2 Diabetes Risk: From Metabolic Syndrome to Cardiometabolic Risk**

*Jean-Pierre Després, PhD*

- Clear the confusion between the conceptual definition of the metabolic syndrome vs. the clinical criteria to identify individuals with the metabolic syndrome
- Review evidence that visceral obesity is, in clinical practice, the most prevalent form of insulin resistant state
- Discuss the need to incorporate metabolic syndrome in global cardiovascular disease risk assessment
- Introduce "hypertriglyceridemic waist" as a useful and simple phenotype defining a subgroup of obese patients with the features of the metabolic syndrome increasing the risk of type 2 diabetes and cardiovascular diseases, such global risk being defined as cardiometabolic risk

9:00am - 9:30am **Biomarkers for Cardiometabolic Risk Assessment in Clinical Practice**

*Robert Eckel, MD*

- What biomarkers belong to "The Cheap and Easy"?
- The "Expanding Horizon" of biomarkers: What is reasonable and at least somewhat informative?
- What are the biomarkers of increasing interest, but not ready for prime time?

9:30am - 10:00am **Inflammation: Etiology and Biomarkers**

*Christie Ballantyne, MD*

- Review the evidence that inflammation occurs in adipose tissue with obesity
- Appreciate the mechanism by which inflammation in adipose tissue may lead to insulin resistance
- Discuss how inflammation in adipose tissue can accelerate atherosclerotic vascular disease
- Understand that inflammation is a critical link for cardiometabolic risk

10:00am - 10:30am **Exhibit Hall/Morning Break**

## **CLINICAL TRIALS UPDATE**

**Assessing the Evidence and Effectiveness of Current and Emerging Therapies in Clinical Practice**

*Moderator: Christie Ballantyne, MD*

10:30am - 11:00am **Current and Emerging Therapies for Obesity**

*Louis Aronne, MD*

- Understand the current research in obesity and how it will impact the future of obesity treatment
- Understand the neuroendocrine aspects of obesity and how this contributes to the difficulty of obese patients to lose and maintain weight
- Understand the mechanism of action and clinical aspects of pharmacologic agents in development to treat obesity

11:00am - 11:30am **Current and Emerging Therapies for Hypertension**

*Matthew Weir, MD*

- Understand the rationale behind lower blood pressure goals and reduced risk for cardiovascular events
- Understand the results of clinical trials such as HOPE and ALLHAT and how they influence guidelines and decision making in hypertension therapeutics
- Appreciate the need for individualizing blood pressure goals, understanding cardiovascular comorbidity, and the requirement for multiple antihypertensive medications for achievement of blood pressure goals
- Understand the need for lower blood pressure goals in patients with cardiovascular or renal disease, or diabetes mellitus
- Appreciate the need for performing new clinical trials to evaluate optimal combinations of medications to facilitate lower blood pressure goals and reduce cardiovascular events



*"It is critical that physicians and health care providers understand how to identify patients with obesity who have increased risk for the development of diabetes and cardiovascular disease and how to manage the cardiometabolic risks associated with obesity."*

*Christie Ballantyne, MD*

**CLINICAL TRIALS UPDATE CONTINUED**

11:30am - 12:00pm

**Current and Emerging Therapies for Dyslipidemia**

*Christopher Cannon, MD*

- Become familiar with new data on intensive statin therapy
- Understand current data on the mechanism of action of statin therapy
- Learn of new non-statin therapies, including fibrates and ezetimibe

12:00pm - 12:30pm

**Current and Emerging Therapies for Type 2 Diabetes**

*David Nathan, MD*

- Understand the magnitude and causes of the type 2 diabetes epidemic
- Recognize the demonstrated benefits of intensive management of glycemia, demonstrated in clinical trials, as it relates to long-term complications
- Understand the relative advantages and disadvantages of the currently available diabetes interventions
- Learn the recently recommended algorithm for the metabolic management of type 2 diabetes

12:30pm - 1:45pm

**LUNCH SYMPOSIUM**

**Cardiometabolic Risk Reduction: Targeting Abdominal Adiposity and the Endocannabinoid System**

*Louis Aronne, MD; Robert Eckel, MD; Richard Nesto, MD*

1:45pm - 2:15pm

**Glitazones: What Is Their Role in Cardiometabolic Risk Management?**

*Jorge Plutzky, MD*

- Understand PPARs and their mechanism of action and use as a drug target
- Review the existing basic science and clinical data that provides a rationale for considering PPAR-gamma activation by thiazolidinediones as a treatment for cardiometabolic risk
- Consider the limitations in thiazolidinediones as a treatment for metabolic syndrome
- Discuss future options in PPAR targeting for the treatment of cardiometabolic risk

2:15pm - 3:15pm

**DISCUSSION & DEBATE**

**LDL, Triglycerides, and HDL: Which Risk Factors Are Most Important?**

*Moderator: Christie Ballantyne, MD*

*Panelists: Stephen Wiviott, MD; Frank Sacks, MD; Christopher Cannon, MD*

3:15pm - 3:45pm

**Afternoon Break/Exhibit Hall**

3:45pm - 4:15pm

**Prevention, Treatment, and Control of Type 2 Diabetes**

*Vivian Fonseca, MD*

- Understand the impact of insulin resistance on the development and progression of type 2 diabetes and cardiovascular disease
- Evaluate clinical trial data to suggest that it is possible to prevent diabetes in patients with the metabolic syndrome using a variety of medications in addition to lifestyle change
- Examine the impact of insulin sensitizer therapy on the risk of cardiovascular disease in patients with pre-diabetes and the metabolic syndrome

4:15pm - 4:45pm

**The Patient with Diabetes and Heart Disease: Strategies to Prevent a Second Coronary Event**

*Richard Nesto, MD*

- Identification of cardiometabolic risk factors responsible for coronary events in the patients considered to be "adequately" managed according to current guidelines
- Overweight and obesity as a target "organ" for modification beyond traditional risk factors for cardiovascular risk

4:45pm

**CLOSING REMARKS**

*Jay Skyler, MD*

5:00pm - 6:30pm

**WELCOME RECEPTION IN EXHIBIT HALL**

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*“How low should you go, and what drugs should you use? Vexing questions which are particularly important in patients at increased cardiometabolic risk with elevated blood pressure. Perhaps a more interesting question is whether we should prevent blood pressure elevation in these patients who are not yet hypertensive.”*

*Matthew Weir, MD*



# Program Agenda Day Two – Friday, October 20, 2006

- 7:00am - 8:00am **BREAKFAST SYMPOSIUM**  
**Inhibiting RAAS at the Point of Activation: A Novel Antihypertensive Therapeutic Option**
- 8:00am - 8:15am **OPENING REMARKS**  
*Christie Ballantyne, MD*
- 8:30am - 9:15am **KEYNOTE PRESENTATION**  
**Insulin Resistance, Obesity, and Type 2 Diabetes**  
*C. Ronald Kahn, MD*
  - Review how insulin works and how insulin resistance occurs
  - Understand how insulin resistance in different tissues can contribute different parts of the metabolic syndrome of diabetes
  - Describe the unique role of insulin resistance in fat
- 9:15am - 9:45am **How to Assess Quality in Clinical Practice**  
*Thomas Lee, MD*
  - Describe market forces that are promoting the use and public reporting of measures for quality of cardiovascular care
  - Describe the major quality measures for physician care of patients at increased cardiometabolic risk
  - Describe the most important tools and systems that can be used to capture data and improve quality of care for patients at increased cardiometabolic risk
- 9:45am - 10:15am **Morning Break/Exhibit Hall**
- 10:15am - 11:15am **DISCUSSION & DEBATE**  
**Do Current Guidelines Accurately Identify Cardiometabolic Risk?**  
*Moderator: Richard Nesto, MD*  
*Panelists: Christie Ballantyne, MD; Robert Eckel, MD; Richard Kahn, PhD; F. Xavier Pi-Sunyer, MD*
- 11:15am - 12:30am **DISCUSSION & DEBATE**  
**Visceral Fat vs. Liver Fat vs. Muscle Fat: Where Does the Problem Arise?**  
*Moderator: Jay Skyler, MD*  
*Panelists: Jean-Pierre Després, PhD; Gerald Shulman, MD; David Kelley, MD*
- 12:30pm - 1:45pm **LUNCH SYMPOSIUM**  
**The Role of DPP-IV Inhibition in Achieving Glycemic Control**
- 1:45pm - 2:15pm **CONCURRENT SESSIONS**  
**Cardiometabolic Risk in Children: How Should It Be Defined, Who Does It Affect, and What Should We Do?**  
*Francine Kaufman, MD*
  - Understand how cardiometabolic risk is defined in children
  - Be familiar with cardiometabolic risk factors in children
  - Understand treatment/intervention strategies
- 1:45pm - 2:15pm **Cardiometabolic Risk in High-Risk Populations**  
*John Foreyt, PhD*
  - Define the components of cardiometabolic risk in high-risk populations
  - Evaluate current therapies for the management of cardiometabolic risk in high-risk populations
  - Discuss successful lifestyle modification programs for high-risk patients
- 2:15pm - 3:15pm **Emerging Technologies: Assessment of Screening Tools and Their Role in Clinical Practice**  
*Moderator: Christie Ballantyne, MD*  
*Presenters: Richard Nesto, MD; Paolo Raggi, MD*
  - Assess current modalities to screen for subclinical CAD in diabetic patients
  - Identify appropriate patients for screening and risk quantification for CHD
  - Understand the utility of modern imaging technologies to better define risk in the metabolic syndrome
  - Appreciate the appropriate indications for imaging as a tool to assess cardiovascular risk



*“The biggest health problem facing the world today is from the combined impact of obesity, diabetes, and cardiovascular disease. In previous centuries the major scourges were from acute infectious diseases. Today the impact is from this compilation of chronic diseases.”*

*Jay Skyler, MD*

# Attend and Earn up to 18.25 CME Credits!

2:15pm - 2:45pm

## **CONCURRENT SESSIONS CONTINUED**

### **Exercise, AMPK, and the Treatment and Prevention of the Metabolic Syndrome**

*Neil Ruderman, MD*

- Understand the biochemistry of AMP-activated protein kinase
- Become aware of the relationship between physical activity and the prevalence of type 2 diabetes, premature cardiovascular disease, and other disorders associated with the metabolic syndrome
- Become familiar with the AMPK/malonyl CoA fuel sensing and signaling mechanism and how it is affected by exercise
- Review the evidence that dysregulation of AMPK/malonyl CoA underlies a wide variety of disorders associated with insulin resistance and altered lipid metabolism in rodents
- Review the evidence that AMPK and malonyl CoA are targets for treating the metabolic syndrome

2:45pm - 3:15pm

### **Fat vs. Carbohydrates vs. Protein: What Type of Diet Should You Recommend to Your Patients?**

*Frank Sacks, MD*

- Learn how dietary fats, carbohydrates, and protein affect differently LDL cholesterol, the primary lipid target
- Learn how dietary fats, carbohydrates, and protein affect triglycerides and HDL cholesterol, the independent lipid risk factors of the metabolic syndrome
- Learn what diet types are most effective for weight loss
- Combine objectives 1–3 to formulate the most effective dietary approaches to reduce cardiovascular risk

3:15pm - 3:45pm

### **Afternoon Break/Exhibit Hall**

3:45pm - 4:45pm

### **Strategies for Improving Patient Compliance to Diet, Lifestyle, and Medical Therapies**

*Moderator: F. Xavier Pi-Sunyer, MD Presenters: William Kraus, MD; Nancy Miller, RN BSN*

- Understand the importance of using a cognitive model in the clinic setting to underlie counseling about lifestyle interventions
- Understand how a clinic environment supporting lifestyle change can be incorporated into a clinic model
- Understand the importance of encouraging exercise as an effective therapy for cardiometabolic risk
- Identify strategies to attain dietary change and physical activity compliance

3:45pm - 4:45pm

### **Bariatric Surgery: Patient Selection, Procedure Options, and Long-Term Outcomes**

*Moderator: Christie Ballantyne, MD Presenters: Kenneth MacDonald, MD; Matthew Hutter, MD*

- Understand which patients might benefit from weight-loss surgery
- Review the criteria and the processes involved in patient selection
- Understand the options available for weight-loss surgery, including the anatomy and physiology, and procedure-related specifics
- Evaluate the short- and long-term outcomes for the different weight-loss procedures, including complications and mortality, weight-loss over time, and reduction in weight-related comorbid illnesses

4:45pm - 5:15pm

## **CLOSING SESSION**

### **Strategies for the Prevention of Heart Disease in Patients with Type 2 Diabetes**

*Jay Skyler, MD*

- Summarize the various ways in which cardiovascular disease evolves in patients with type 2 diabetes
- Develop intervention strategies to reduce cardiovascular disease risk in patients with type 2 diabetes

5:15pm

## **CLOSING REMARKS**

*Richard Nesto, MD*

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## **Attend Our Comprehensive Cardiometabolic Risk Management Review and Get Answers:**

- 🔊 What is the impact of obesity, insulin resistance, and type 2 diabetes on cardiovascular risk?
- 🔊 The patient with type 2 diabetes and heart disease: How do you prevent a second coronary event?
- 🔊 Which risk factors should you be targeting: LDL, HDL, triglycerides?
- 🔊 Fat vs. carbohydrates vs. protein: What diet should you recommend?
- 🔊 How do you identify appropriate patient candidates for bariatric surgery?

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*“The 2006 Cardiometabolic Health Congress is an extremely important initiative. Cardiometabolic risk is an epidemic which Americans have long overlooked and underestimated as far as inherent cardiovascular risk is concerned.”*

*Paolo Raggi, MD*



# Program Agenda Day Three – Saturday, October 21, 2006

7:00am - 8:15am **Continental Breakfast**

8:30am - 9:30am **CONCURRENT SESSIONS**

## **MEET-THE-EXPERT SESSION**

### **Disease Prevention: Establishing and Integrating Necessary Lifestyle Changes**

*Scott Urquhart, PA-C; William Kraus, MD*

- Know the risk factors and counterproductive lifestyles leading to obesity and the subsequent medical conditions associated with it
- Gain insight into the physical and emotional difficulties that obese patients face on a daily basis in order to enhance your therapeutic approach
- Create inquisitive interviewing skills, treatment options, and follow-up plans
- Implement positive lifestyle changes, articulate relapse prevention, and set obtainable goals to promote successful weight loss and maintenance

8:30am - 9:30am

## **MEET-THE-EXPERT SESSION**

### **Metabolic Syndrome as a Predictor of Type 2 Diabetes**

*Steven Haffner, MD*

- Learn about definitions of the metabolic syndrome
- Explore the controversies about the metabolic syndrome deriving from the ADA position statement in 2005
- Learn about the risk of the metabolic syndrome for patients with cardiovascular disease and type 2 diabetes

9:30am - 10:00am **Exhibit Hall/Morning Break**

10:00am - 11:00am

## **MEET-THE-EXPERT SESSION**

### **Optimizing the Care of the Cardiometabolic Patient in the Hospital and Post-Hospitalization Setting**

*Richard Nesto, MD*

- Evaluate the role of hyperglycemia in hospitalized patients as a factor responsible for morbidity and mortality
- Learn about the importance of insulin as an agent to minimize hyperglycemia in this setting
- Critically review the data related to GIK and other regimens to treat metabolic risk in hospitalized patients

10:00am - 11:00am

## **CHALLENGING CASE STUDIES SESSION**

### **Challenging Case Studies in Metabolic Syndrome**

*F. Xavier Pi-Sunyer, MD*

11:00am - 12:00pm

## **CHALLENGING CASE STUDIES SESSION**

### **Challenging Case Studies in Bariatric Surgery Patient Selection**

*Matthew Hutter, MD*

11:00am - 12:00pm

## **CHALLENGING CASE STUDIES SESSION**

### **Cardiometabolic Risk Management in High-Risk Populations**

*John Foreyt, PhD*

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## **Accreditation Statement**

This activity has been planned and implemented in accordance with the Essential Areas and Policies of the Accreditation Council for Continuing Medical Education through the joint sponsorship of Medical Education Collaborative, Inc. (MEC) and HealthScience Media, Inc. (HSM). MEC is accredited by the ACCME to provide continuing medical education for physicians.

Medical Education Collaborative designates this educational activity for a maximum of 18.25 category 1 credits towards the AMA Physicians's Recognition Award. Each physician should claim only those credits that he/she actually spent in the activity.

**ANCC and dietitian credits offered. For more information, please visit [www.cardiometabolichealth.org](http://www.cardiometabolichealth.org).**



*“Metabolic factors represent the major component of cardiovascular risk. Such factors are worsening at an alarming rate in the US population. The good news is that they are amenable through lifestyle interventions. A key component of the 2006 Cardiometabolic Health Congress will aid the clinician in implementing effective lifestyle changes in their patients.”*

*William Kraus, MD*



## Purpose Statement

Patients presenting with multiple cardiometabolic risk factors (including insulin resistance, dyslipidemia, obesity, hypertension, microalbuminuria, inflammation, and oxidative stress) have triple the risk of experiencing a myocardial infarction and/or stroke and double the risk of mortality from these conditions. In addition, their risk for developing type 2 diabetes, if not already present, is fivefold.

The 2006 Cardiometabolic Health Congress will provide practical treatment approaches and effective strategies to identify and manage patients at increased cardiometabolic risk – with the goal of improving treatment outcomes as well as the prevention of diabetes and cardiovascular disease.

## Learning Objectives

- Assess the clinical impact of early identification and management of cardiometabolic risk
- Evaluate and integrate current and emerging therapies and treatment regimens into clinical practice
- Determine the most advantageous clinical and therapeutic strategies for reducing cardiovascular risk based on patient comorbidities and risk factors
- Integrate successful programs into clinical practice that promote better patient compliance to medical therapies and lifestyle modifications

## Hotel and Travel Information



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To book your hotel room with the 2006 Cardiometabolic Health Congress room block, please utilize the link [www.stayatmarriott.com/CHC/](http://www.stayatmarriott.com/CHC/) or call 617.236.5800 and reference "2006 Cardiometabolic Health Congress." You must reserve your room before September 27, 2006, to receive the discounted room rate.

Reserve early, as space is limited.



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*"The 2006 Cardiometabolic Health Congress will be one of the first to fully evaluate cardiometabolic health from a definition of cardiac risk to the widest variety of treatment modalities. Field experts will come together and help fully define cardiometabolic risk within the context of patient care both in the here and now."*

*Richard Nesto, MD*



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American Heart Association

American Diabetes Association

American Medical Women's Association

# EXPLORING A NEW FRONTIER FOR CARDIOMETABOLIC RISK REDUCTION

## METABOLIC SYNDROME: THE CLUSTER OF CARDIOMETABOLIC RISK FACTORS<sup>1</sup>

- Decreased HDL-C
- Elevated blood pressure
- Elevated triglycerides
- Elevated fasting glucose
- Increased waist circumference (excess adipose tissue)

## ADIPOSE TISSUE IS A METABOLICALLY ACTIVE ENDOCRINE ORGAN<sup>2</sup>

- Associated with abnormal endocrine function—impacts secretions of bioactive substances that help regulate lipid and glucose metabolism<sup>2</sup>
- May lead to development of cardiometabolic risk factors like dyslipidemia, elevated blood glucose, and insulin resistance<sup>2,3</sup>

## THE ENDOCANNABINOID SYSTEM (ECS) IMPACTS METABOLIC FUNCTIONS<sup>4</sup>

- ECS is a newly discovered physiologic system
- Consists of signaling molecules and their receptors, including the cannabinoid receptors [CB<sub>1</sub> and CB<sub>2</sub>]<sup>5,6</sup>

## CB<sub>1</sub> RECEPTORS MAY IMPACT LIPID LEVELS AND INSULIN SENSITIVITY<sup>4</sup>

- Located throughout the body, including the brain, liver, muscle, and adipose tissue<sup>4,8</sup>  
—Overactivity in adipose tissue is associated with decreases in adiponectin, which may be linked to dyslipidemia, insulin resistance, and intra-abdominal adiposity<sup>4</sup>
- At the center of a cascade of events with potential impact on cardiometabolic risk<sup>4</sup>

### References

1. National Heart, Lung, and Blood Institute. National Cholesterol Education Program. *ATP III Guidelines At-A-Glance: Quick Desk Reference*. Bethesda, Md: National Institutes of Health; May 2001. NIH Publication No. 01-3305. 2. Sharma AM. Adipose tissue: a mediator of cardiovascular risk. *Int J Obes*. 2002;26:S5-S7. 3. Després J-P, Lemieux I, Prud'homme D. Treatment of obesity: need to focus on high risk abdominally obese patients. *BMJ*. 2001;322:716-720. 4. Bensaid M, Gary-Bobo M, Esclangon A, et al. The cannabinoid CB<sub>1</sub> receptor antagonist SR141716 increases Acrp30 mRNA expression in adipose tissue of obese *fafa* rats and in cultured adipocyte cells. *Mol Pharmacol*. 2003;63:908-914. 5. Domenicali M, Ros J, Fernández-Varo G, et al. Increased anandamide induced relaxation in mesenteric arteries of cirrhotic rats: role of cannabinoid and vanilloid receptors. *Cut*. 2005;54:522-527. 6. Harrold JA, Williams G. The cannabinoid system: a role in both the homeostatic and hedonic control of eating? *Br J Nutr*. 2003;90:729-734. 7. Rhee M-H, Bayewitch M, Avidor-Reiss T, Levy R, Vogel Z. Cannabinoid receptor activation differentially regulates the various adenylyl cyclase isozymes. *J Neurochem*. 1998;71:1525-1534. 8. Upham BL, Rummel AM, Carbone JM, et al. Cannabinoids inhibit gap junctional intercellular communication and activate ERK in a rat liver epithelial cell line. *Int J Cancer*. 2003;104:12-18.

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From Metabolic Syndrome to Cardiometabolic Risk...

# Cardiometabolic Health Congress

2006

October 19–21, 2006 • Marriott Copley Place • Boston, MA

## Registration Form

**Online:** [www.cardiometabolichealth.org](http://www.cardiometabolichealth.org)

**Call:** Jessica at 877.571.4700

**Fax Registration Form:** 866.218.9168

**Mail Registration Form with Payment to:**

2006 Cardiometabolic Health Congress

c/o HealthScience Media, Inc.

75 Lincoln Highway, Suite 201, Iselin, NJ 08830

### Registration Fees

	Early Bird Discount Register by 9/15/06	Full Conference Fee Register after 9/15/06
Physicians	\$595	\$695
Allied Health Professionals	\$395	\$595
Residents, Fellows, or Students*	\$100	\$200
Industry	\$995	\$1,095
Guest Pass**	\$100	\$100

\* I.D. card from school, residency, or fellowship program is required onsite for verification. No other discounts apply.  
\*\* Guest passes are available to paid registrants only. The 2006 Cardiometabolic Health Congress adheres to both the ACCME and PhRMA guidelines regarding interaction with healthcare professionals, therefore guest passes are necessary for guests to enter the exhibit hall and non-CME meal functions.

Prefix	First Name	Last Name	Degree(s)
Title			
Affiliation			
Address 1			
Address 2			
City		State	Zip Code
Tel	Fax	Email	

Guest Name (if you are purchasing a guest pass): \_\_\_\_\_

**Please indicate your specialty** (check one):

Cardiology  Endocrinology  Internal Medicine  Nephrology  Primary Care  Industry  Other \_\_\_\_\_

**Current members of our association alliances receive a \$100 discount off the registration price.**

Indicate which association you are a member of below:

- |  |  |  |
|--|--|--|
| <input type="checkbox"/> The Endocrine Society                             | <input type="checkbox"/> American Society of Preventive Cardiology | <input type="checkbox"/> Preventive Cardiology Nursing Association |
| <input type="checkbox"/> Association of Black Cardiologists                | <input type="checkbox"/> American Society of Endocrine PAs         | <input type="checkbox"/> American Heart Association                |
| <input type="checkbox"/> Association of PAs in Cardiology                  | <input type="checkbox"/> Partnership for Prevention                | <input type="checkbox"/> American Diabetes Association             |
| <input type="checkbox"/> American Society of Hypertension                  | <input type="checkbox"/> American College of Preventive Medicine   | <input type="checkbox"/> American Medical Women's Association      |
| <input type="checkbox"/> Society of Atherosclerosis Imaging and Prevention |  |  |

**Total Amount Due:** \_\_\_\_\_

**Method of Payment**  Check  Credit Card  Visa  MasterCard  American Express  Discover

**Account Number** \_\_\_\_\_ **Expiration Date** \_\_\_\_\_ / \_\_\_\_\_  
Month / Year

**Cardholder Name** \_\_\_\_\_

**Cardholder Signature** \_\_\_\_\_

**Cancellation Policy:** Cancellations must be made in writing via fax or email to 866.218.9168/cancellation@cardiometabolichealth.org. Refunds, less a \$100 service fee, will be given if written cancellation is received no later than September 28, 2006. No refunds will be given after September 28, 2006. You may send a substitute, even at the last minute. To send a substitute, please call 877.571.4700 or email request to registration@cardiometabolichealth.org.

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