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## Heart Failure Society News

### Editors

**Marvin A. Konstam, MD**  
Boston, Massachusetts

**Gary S. Francis, MD**  
Cleveland, Ohio

**Barry H. Greenberg, MD**  
San Diego, California

**John E. Strobeck, MD, PhD**  
Hawthorne, New Jersey

**Milton Packer, MD**  
New York, New York

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## Primary Care Symposium Extends Reach of HFSA

To kick off Heart Failure Awareness Week 2003, the HFSA held its 2nd annual primary care conference on February 1, 2003 in New Orleans. The conference was attended by over 175 health care providers including primary care physicians and nurses.

Symposium Chair Barry H. Greenberg, MD and Co-Chair Mandeep R. Mehra, MD led an internationally recognized faculty. The continuing medical education (CME) eligible program format featured lectures complimented by case studies and panel discussions to maximize learning and interaction with the faculty.

This annual symposium is directed at primary care physicians and provides the latest information available on heart failure and treatment options. It is part of an ongoing HFSA initiative to meet the need of primary care physicians for up-to-date information on heart failure applicable to their practices.



Barry H. Greenberg, MD

"This effort by the HFSA reaches out to the very core of those responsible for caring for the majority of heart failure patients – the primary care physician. We have been deluged by a constant outpouring of positive comments from participants. It is such recognition of the program's success that establishes the ongoing need for continuously reaching an even wider audience with educational messages about heart failure," said Dr. Mehra.

educational messages about heart failure," said Dr. Mehra.



Mandeep R. Mehra, MD

Speakers and topics included:

- Identifying and Treating the Patient at Risk, Barry H. Greenberg, MD
- Diagnostic Testing – When & How to Use Echo and BNP in the Evaluation of the Heart Failure Patient, Marc A. Silver, MD
- Unusual Symptoms of Heart Failure – Recognition and Treatment, Susan J. Bennett, DNS, RN

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## Penn Sponsors Living with Heart Failure Program

Philadelphia Mayor John F. Street was among the 130 guests who attended the Living with Heart Failure program sponsored by the University of Pennsylvania Health System's Heart Failure and Cardiac Transplant program on February 26, said Lee Goldberg, MD, MPH.

The goals of the event, which was held at the Franklin Institute in Philadelphia, were to provide participants with information about the latest treatment options available for heart failure and to give patients and their families an opportunity to interact with each other and with the multi-disciplinary team of heart failure specialists at Penn.

Four people with heart failure spoke at the program: a former Philadelphia city councilwoman; an oncologist who underwent a heart transplant in 2001 and is currently practicing full time; a young woman who was diagnosed with heart failure after surviving two types of cancer; and an engineer who was Penn's first recipient of a cardiac support device.

Dinner was served after the speakers, and attendees had the opportunity to visit tables staffed by professionals and patients to learn more about heart failure.

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## Primary Care Symposium Extends Reach of HFSA

*continued from page 1*

- Do We Know How to Treat Diastolic Heart Failure?, Marvin A. Konstam, MD
- How and When to Block the Symptomatic Nervous System (SNS) and Renin-Angiotensin System (RAS), Gary S. Francis, MD
- Beyond Neurohormonal Blockade – Novel Targets for Treating Heart Failure, Gary S. Francis, MD
- How to Detect and Treat CAD in the Heart Failure Patient, Barry M. Massie, MD
- Should Heart Failure Patients be Encouraged to Exercise?, Ileana L. Piña, MD
- Where do Devices (BiV Pacers, LVADs, etc.) Fit into the Management of Heart Failure Patients?, Mandeep R. Mehra, MD

Drs. Greenberg, Konstam, and Mehra moderated case presentation discussions. The faculty also included: Myung H. Park, MD, Robert L. Scott, MD, and Patricia A. Uber, PharmD who participated in the case discussions.

The symposium was recorded (available on CDs or cassette tapes) and was distributed in late April to 16,000 family practitioners who are members of Audio Digest. Because of the amount of valuable material presented, Audio Digest produced two programs with didactic lectures and case presentations. CME credits are offered for both recordings.

It will also be available as a webcast on the HFSA web site at: [www.hfsa.org](http://www.hfsa.org) in early May. CME credits are available.

Support for the symposium was provided by the HFSA 2003 Heart Failure Awareness Roundtable: Abbott Laboratories, AstraZeneca, Aventis Pharmaceuticals, Inc., GlaxoSmithKline, Medtronic, Inc., Merck & Co., Inc., Novartis Pharmaceuticals Corporation, Scios, Inc., and Vasomedical, Inc.

Planning has already started for the 3rd annual primary care conference to be held in early February 2004. Information on the symposium will be available on the HFSA web site as details are finalized.

## Penn Sponsors Heart Failure Program

*continued from page 1*



Philadelphia Mayor John F. Street (center); Augusta Clark, a former Philadelphia city councilwoman (left); and Lee Goldberg, MD, MPH.

The topics and activities featured at the tables were:

- General information on heart failure – Tips on how to stay healthy and information on medications and diet. Visitors could play “Heart Failure Jeopardy” and win prizes including gift checks, scales, blood pressure cuffs, and other patient-oriented items.
- Caring for someone with heart failure – Information and support for caregivers and family members.
- Physical activity and heart failure – Tips on exercising and energy conservation. The table was staffed by physical therapists and featured strength training and assessment stations.
- New technologies and research – Information on ventricular assist devices, research protocols, and surgical options.

The table was staffed by research nurse coordinators. Biventricular pacemakers and implantable defibrillators were displayed.

- Prevention and services – Provided information on heart health including lipid control, diet, and exercise, and information on heart disease in women.

Attendees also had the opportunity to explore the Franklin Institute’s walk-through heart.

The Living with Heart Failure event was free and open to the public with advance registration. It was supported by a grant from GlaxoSmithKline.

Separately, the University of Pennsylvania Heart Failure and Cardiac Transplant program also held professional education programs for the inpatient nursing staff.

## HFSA Reaches Millions during Satellite Media Tours

Satellite television and radio media tours conducted as part of National Heart Failure Awareness Week 2003 reached an audience of nearly 10.8 million people.

Mandeep R. Mehra, MD, and Ileana L. Piña, MD participated in radio interviews on January 31 from New Orleans. The radio tour was followed by a satellite television tour where Drs. Piña and Barry H. Greenberg answered questions from television journalists.

The interviews were broadcast during the first half of February from stations located

in New York City, San Francisco, Miami, New Orleans, Austin, Houston, Denver, and Albuquerque among others.

The media tours enabled the HFSA to speak directly with a broad audience including viewers and listeners of the Spanish language media. Dr. Piña stressed that heart failure is not a death sentence. “We now have medications that can not only improve how people feel, but will also improve how long they live. In some instances, some of the heart damage that is seen can be reversed,” she said.

## Future Heart Failure Awareness Weeks

2004: February 8-14

2005: February 13-19

2006: February 12-18

2007: February 11-17

2008: February 10-16

## The Journal of Cardiac Failure (JCF) New Editor-in Chief: One Year Later

Since assuming the editor position at *JCF* a year ago, Barry M. Massie, MD, reports that the job "has been more fun and more work than I anticipated." "It has been a new experience for me. I didn't know exactly what to expect," said Dr. Massie, who is Chief of Cardiology at the V.A. Medical Center in San Francisco.

One of the responsibilities of the editor-in-chief is providing HFSA members with a forum for basic and clinical research. This happens through close collaboration with members, authors, editors, the editorial board, and HFSA leadership. "The job has been easier, since I have an experienced group of consulting associate editors to work with," he said. The group includes Drs. William Parmley, Joel Karliner, and Nelson Schiller, who each have served for a number of years as an editor of the *Journal of the American College of Cardiology (JACC)*.

Dr. Massie also credits the smooth transfer of editorial responsibilities to a number of talented and experienced individuals. "Jay Cohn did a remarkable job of starting and building the journal from 1994-2001, and Cheryl Yano has continued to serve as the managing editor of the journal."

### Publication frequency

The new editor said that he has experienced several pleasant surprises during his first year. "First of all, the quality of the manuscripts has been excellent. Then there has been the remarkable increase in the number of submissions. Submissions have been up over 50 percent compared to a year ago." "Interest in heart failure is high, and the HFSA is increasingly recognized as an important contributor to the field." The Impact Factor may have helped, especially in attracting more manuscripts from the international community. These developments have coincided with the change from a quarterly to a bimonthly publication schedule.

### JCF makes an impact

The Impact Factor (IF) is one way to measure a journal's importance. For most journals included in *Index Medicus*, the IF is calculated by dividing the number of citations in the literature during the past two years by the number of articles published in the journal during that period. "Our first impact factor was remarkably high," Dr. Massie said. "*JCF* ranks ninth among peer-reviewed cardiology journals and fourth among those with primarily a clinical focus."

"Since the Impact Factor is based on manuscripts published during the previous two years, the high score is clearly a reflection of Jay Cohn and the previous editors' work."

"Nonetheless, these ratings have made my job easier. It has increased authors' and readers' interest in *JCF*."



*JCF* founding editor  
Jay N. Cohn, MD.

*Since becoming Journal of Cardiac Failure editor-in-chief a year ago, Barry M. Massie, MD, reports that the number of submissions is up 50 percent, the quality is excellent, and shortening the review time is a priority.*

(For more information on impact factors, see the editorial by Barry M. Massie: What is the significance of a journal's impact factor?, 2002 *JCF*;8:363.)

### Timely review of manuscripts is critical

Dr. Massie also praised *JCF*'s reviewers, "The review process remains rigorous. Most reviewers do a thorough job and provide the authors with helpful critiques."

But he also said, *JCF* shares a challenge faced by most peer-reviewed journals of ensuring timely manuscript review. "Delays in the

review process are usually due to the human factor. It can take a significant amount of time to identify appropriate reviewers. Then they may not return their reviews promptly."

"Our average review time is six weeks, and we are targeting a 30-day time to decision. While this is achieved for many manuscripts, there are occasional outliers. I believe that we will ultimately achieve a 30-day target for 75 percent of the manuscripts once we have fully implemented an electronic process for manuscript submission and distribution to reviewers."

To speed the review process, *JCF* conducts expedited reviews for articles that have been submitted to other journals but not accepted for publication. However, the journal receives surprisingly few submissions with prior reviews. Those submitted have, in general, fared well in the *JCF* review process.

### Supplements

In addition to its regular bimonthly issues, *JCF* publishes supplements that focus on topics of interest to readers. Supplements are also subjected to peer review and must be of good scientific or clinical quality. The most recent supplement, "Progression and Remodeling in Heart Failure", December 2002, was a compilation of papers presented at an international CME conference held in July 2001 in Minneapolis. The supplement was sponsored by the HFSA and supported by educational grants from Aventis Pharmaceuticals, Inc., Genentech, Inc., Guidant Corporation, and Medtronic, Inc.

### HFSA members' research and suggestions are welcome

Since its inception, *JCF* has offered HFSA members a forum for high quality basic and clinical research. HFSA members can get involved in *JCF* by offering their ideas or submitting their research. "I don't anticipate any major change in the focus of the journal but we are always interested in suggestions for new approaches."

The Instructions to Authors can be found in front of each issue and are also available on the Society's web site: [www.hfsa.org](http://www.hfsa.org).



*JCF* editor-in-chief  
Barry M. Massie, MD.

## University of Cincinnati Hosts Extensive Heart Failure Awareness Effort

The Heart Failure department of University Hospital in Cincinnati celebrated Heart Failure Awareness Week with a plethora of activities for both health professionals and the general public.

To kick off the week's activities, the hospital's courtyard was transformed into a ribbon garden with 500 yellow ribbons symbolizing people with heart failure, said Ginger Conway, MSN, who helped organize the Heart Failure Awareness effort.

During the week, informational displays focusing on various aspects of heart failure were set up in the hospital cafeteria during the lunch hours. Each display included posters, videos, computer modules, and brochures. Visitors could also touch and see actual diagnostic tools. A patient with a left ventricular assist device (LVAD) was on hand to speak about life with the device and answer questions. The topics featured in the displays were:

- What is heart failure?
- How is heart failure diagnosed?
- What medications are used for heart failure?
- What is a healthy diet for people with heart failure?
- What about devices used to treat heart failure and cardiac transplant patients?

Nurses staffing the displays included: Liz Huntz, Jodi Rozin, Andy Crawford, Bethany Ingraham, and Sue Roll.



(Seated) Bethany Ingraham, RN, speaks with two nurses about heart failure medications at a display in the hospital cafeteria.

"Heart Failure 101", a professional education seminar for nurses held on February 11, proved so popular that a second session was held later in February, and a third session is planned for May. During the daylong program, Lynne E. Wagoner, MD, Russell Hoffman, CNS, Ginger Conway, MSN, Denna Dietrich, ACNP, Karen Hess, ACNP, Rosann Geisting, MSN, and Barb Bell, BSN, covered the causes, diagnosis, and treatment of heart failure. Transplant eligibility, the pre-transplant work up, and post-transplant care were also covered. The seminar concluded with a review of current research in heart failure management with a look towards the future.

Organizers planned on an enrollment of 50, but 75 nurses registered. Another 50 nurses attended the second session on February 28. Participants received CEUs for their attendance.

The "Living with Heart Failure" seminar for patients, family, and friends was another popular event. Drs. Robert Spicer, Walter Merrill, and Lynne Wagoner spoke on the causes of heart failure, its diagnosis and treatment, and surgical treatments including cardiac transplantation. The seminar, which was developed in 2001, is held three times a year.

Heart Failure Awareness Week concluded with a reception in the hospital lobby. University of Cincinnati Dean of the College of Medicine William J. Martin, MD, Lynne Wagoner, MD, and Karen Bankston, MSN, Vice President of Operations at the University Hospital, spoke about the impact of heart failure on the community and the effectiveness of the multidisciplinary approach used at the University of Cincinnati in treating the condition. Dean Martin presented a plaque to a patient who participated in multiple research projects at the hospital. Guests were entertained by a jazz band that included a former University of Cincinnati heart transplant patient. The program concluded with the release of 1,000 yellow balloons to celebrate a hopeful future for people with heart failure.

When asked about the number of heart failure awareness activities held at the hospital, Ginger Conway said "The staff of the Heart Failure and Cardiac Transplant program recognize the need for community involvement. Planning for the programs started last October. It's a huge team effort, and everyone in the program worked very hard on the activities."

## University of Pittsburgh Medical Center Marks Heart Failure Awareness Week

The University of Pittsburgh Medical Center marked Heart Failure Awareness Week with several general awareness events.

Melanie Shatzer, a cardiovascular clinical nurse specialist who helped coordinate the events along with Tracey Ryan, a cardiovascular research nurse, said a multispecialty team of nurses, pharmacists, cardiac rehabilitation specialists, and dietitians staffed a heart failure table from 11 a.m. to 1 p.m. daily during Heart Failure Awareness Week. While at the display, people could have their blood pressure taken, receive instructions on diet and lifestyle modifications, watch a video, or ask questions. Visitors could also pick up educational materials on heart failure including the HFSA patient education modules, the FACES cards, and the About

Heart Failure brochure. She estimated that 75 to 100 people visited the display each day.

Members of the multidisciplinary team also held informal talks on various aspects of heart failure during the week. Topics included: "What is heart failure", "How to follow a low-sodium diet", and "Common heart failure medications". A question and answer session was part of each program.

A breakfast program originally scheduled for Heart Failure Awareness Week was postponed due to snow and held on March 15 instead. At the rescheduled event, Drs. Srinivas Murali and Michael Mathier presented an overview of heart failure and coordinated an extensive question and answer session. One

attendee remarked, "My questions were answered in a way I could understand." Another crowd pleaser was registered dietitian Mark Dinga's demonstration showing how to identify food service sizes, read food labels, and analyze the nutritional content of common food items.

In addition, other members of the heart failure multidisciplinary team spoke on their areas of expertise including the roles of stress reduction and relaxation in coping with heart failure, and the application of the artificial heart as a bridge to transplant. A patient with a ventricular assist (VAD) device also spoke at the event, which was advertised in the local media. Plans are being made to offer the program on a regular basis at the University of Pittsburgh Medical Center.

## Intermountain Health Care Sponsors Wide-Ranging Heart Failure Awareness Program

The Intermountain Health Care (IHC) system celebrated Heart Failure Awareness Week with many activities aimed at primary care physicians and the general public.

Many of the larger hospitals in the 20-hospital system placed banners recognizing Heart Failure Awareness Week over the front door. Kismet D. Rasmusson, FNP at LDS Hospital in Salt Lake City, coordinated many of the heart failure awareness activities along with Dale G. Renlund, MD. A Spanish language heart failure self-management teaching tool and a patient education video were also introduced in time for Heart Failure Awareness Week.

IHC system hospital activities included staffing information tables featuring posters, educational handouts, and schedules for heart failure classes. Cardiovascular nurses and other staff at LDS Hospital, an IHC hospital in Salt Lake City, wore T-shirts with the IHC heart failure symbol.

To reach the professional audience, packets of information on heart failure were sent to primary care providers throughout Salt Lake City



IHC Heart Failure Prevention and Treatment program team members participate in lunch program to honor cardiac transplant patients.

and to all IHC hospitals. Health Insight, the peer review organization for Utah, Idaho, and Nevada, also invited the IHC's Heart Failure Prevention and Treatment program to lead a conference call to hospitals in the intermountain region on its heart failure disease management program.

The "Faces of Heart Failure" lunch to honor patients in the combined UTAH Cardiac Transplant Program concluded the week's activities. Over 320 people attended the lunch, which included patients and providers from

LDS Hospital, the Salt Lake City VA Hospital, the University of Utah Health Sciences Center, and Primary Children's Hospital. Dr. Renlund was recognized during the lunch by the Utah chapter of the American Heart Association for his devotion to and care of heart failure and transplant patients.

Media coverage included three television segments on heart failure, an interview on a Spanish language television station, and a radio show. Utah Governor Mike Leavitt issued a proclamation designating February 14, 2003 as Congenital Heart Failure Awareness Day.

### Berks Cardiologists Group Hosts Heart Failure Awareness Events

Berks Cardiologists, Ltd., Reading, PA, participated in Heart Failure Awareness Week by hosting two public events.

Donna Fiorini, MSN, CRNP, reports that approximately 50 people attended a lecture held on February 10 at a local senior apartment complex. Topics covered included: risk factors for heart failure, signs and symptoms of heart failure,

and treatments. Also included was a "show-and-tell" display of groceries to illustrate a low-sodium diet.

A community health fair focusing on heart failure was held on February 10. Attendees had the opportunity to ask questions and pick up a variety of educational materials.

### Minneapolis VA Medical Center's Program Focuses on Obesity and Heart Failure

The connection between obesity and heart failure was the focus of this year's Heart Failure Awareness Week patient education program at the Minneapolis Veterans Affairs Medical Center in Minneapolis.

"Approximately 80 patients, family members, and hospital staff attended the 'Obesity and Heart Failure' program held on February 12," said Susan Ziesche, RN, who helped organize heart failure education activities at the hospital. Charles Billington, MD, staff endocrinologist and Director of the Mass and Metabolic Clinics at the hospital, spoke about the growing epidemic of obesity in the U.S. and its subsequent impact on health and disease, particularly diabetes and heart failure. Hospital nutritionist Jacquelyn Hinz, RD, followed with a patient-centered talk on nutrition and heart health. A panel consisting of members of the heart failure clinical staff, a dietitian, an exercise kinesiologist, and a pharmacist then fielded questions from attendees. Susan Ziesche reported that the interactive format was one of the most popular features of the program. "We were pleased by the active audience participation," she added. Following the program, a luncheon featuring heart healthy foods was served to guests. The center publicized Heart



(From left to right) Susan Catchings, RN; Karen Doerfler, RN; Inder Anand, MD; Janelle Whitlock, RNP; Shelley Berg, RN; Elsie Jones, RPharm, Mirna Martinez, RD; and Jim Rettler, RKT answer questions from the audience.

Failure Awareness Week and the program with an educational storyboard that was on display near the hospital cafeteria during the week.

On February 14, Margaret Redfield, MD, an Associate Professor of Medicine and Consultant for the Division of Cardiovascular Diseases at the Mayo Clinic, Rochester, participated in grand rounds with the hospital staff. She presented data on diastolic dysfunction.

## Update: 7th Annual Scientific Meeting

The 7th Annual Scientific Meeting will be held September 21-24, 2003 in Las Vegas, Nevada at the Mandalay Bay Resort & Casino.

The scientific program will cover a number of exciting topics including new treatments for heart failure, cell therapy, genomics and genetics, remodeling, models for heart failure therapy delivery, an update on the heart failure management guidelines, debates, and late breaking clinical trials.



All satellite symposia are approved for AMA Category 1 credit by the University of Minnesota for an hour for hour basis. All guidelines related to accreditation, therefore, apply. To attend a satellite symposium, individuals must be registered as an attendee at the annual scientific meeting. No additional registration fee is required. However, delegates will need to register electronically on site for each satellite symposium attended in order to receive appropriate CME credits.



**New this year:** An added feature of the 7th Annual Scientific Meeting will be a basic science workshop on Sunday, September 21st. The morning will be devoted to didactic lectures evolving around a central theme: basic mechanisms of cardiac disease. This year's session will focus on modifiers of transcriptional regulation and their role in cardiac growth, development, and disease. The afternoon session is still in the planning stages.

There will also be one-hour basic science workshops during the noon hours on Monday, September 22 (molecular imaging) and Tuesday, September 23 (proteomics).

The University of Minnesota has designated the Main Scientific Program for a maximum of 17.5 hours in Category 1 credit and the Sunday Basic Science Program for a maximum of 6 hours in Category 1 credit towards the AMA Physician's Recognition Award. Each physician should claim only those hours of credit actually spent in these educational activities.

Pharmacy continuing education credits and nursing continuing education units have been applied for.

The 7th Annual Scientific Meeting program can be viewed on [www.hfsa.org](http://www.hfsa.org) under Annual Scientific Meeting.

Nineteen satellite programs will be held in conjunction with the Annual Scientific Meeting. These programs will provide updated information on new drugs, therapies, and devices used in the treatment of heart failure. These industry-sponsored programs have not been planned by the 2003 HFSA scientific program committee.

The scientific meeting and satellite programs will be held in the Convention Center that is contiguous to the hotel and provides outstanding space for scientific meetings and exhibits with state of the art meeting rooms that have full audio-visual support.

The resort itself features an 11-acre beach and a shark reef with over 100 types of fish and marine animals. Visitors can arrange to play at any of six challenging golf courses or to spend time at the "beach". The resort also features a world-class spa, a fully equipped fitness center and gaming.

The lodging and meeting registration forms can be downloaded at: [www.hfsa.org](http://www.hfsa.org) (under Annual Scientific Meeting).

### Travel Arrangements

Travel arrangements, including discounted airfares, may be arranged through Stratton Travel Management at (888) 387-5435, (201) 405-1999; fax (801) 729-2032.

### Exhibit Prospectus

For an exhibit prospectus, contact Gail Brophy at: (973) 248-3332 or (651) 642-1633; fax: (973) 248-3334 or (651) 642-1502.

## Strong Demand for Patient Education Materials

The HFSA has available a variety of materials designed to help educate patients, family members, and individuals at risk for heart failure.

Materials available include a video, "What you should know about heart failure"; a brochure titled, "What you should know about heart failure: America's silent epidemic"; a FACES card listing common symptoms of heart failure; and most recently, a series of modules devoted to specific aspects of heart failure. All of the materials are written in easy to understand language.

Six of 11 modules are available or will be available shortly. The remaining modules are expected to be completed by the end of 2003.

The completed modules are:

Module 1: Taking Control of Heart Failure, which provides basic information on heart failure

Module 2: How to Follow a Low-Sodium Diet, which includes tips and information on the sodium content of foods and how to lower your daily sodium intake

Module 3: Heart Failure Medicines, which provides detailed information about the main types of medicines used to treat heart failure and common side effects

Module 4: Self-Care: Following Your Treatment Plan and Dealing with Your Symptoms, which explains how to live successfully with heart failure

Module 5: Exercise and Activity, which will outline the benefits of activity and exercise (available June 2003)

Module 6: Managing Feelings about Heart Failure, which will focus on how to manage feelings including depression and anxiety for those diagnosed with heart failure (available June 2003)

It is anticipated that the remaining modules (see below) will be completed and available by the end of 2003:

Module 7: Tips for Family and Friends

Module 8: Lifestyle Changes

Module 9: Advanced Directives

Module 10: Heart Rhythm Problems

Module 11: How to Evaluate Claims of New Heart Failure Treatments and Cures

All educational materials can be viewed and/or downloaded on the [abouthf.org](http://abouthf.org) web site. Information on ordering quantities (including pricing) is also available on the web site. Allow 3-4 weeks for delivery.



The patient education modules examining specific aspects of heart failure management and treatment available as of June 2003 are shown above.

## Future Annual Scientific Meeting Dates

2004: September 12-15, Toronto, ON, Canada

2005: September 18-21, Boca Raton, FL

2006: September 10-13, Seattle, WA

2007: September 16-19, Washington, DC

2008: September 21-24, Boca Raton, FL



## Heart Failure Society of America



**SEPTEMBER 21–24, 2003**  
Mandalay Bay Resort & Casino  
Las Vegas, Nevada

**7TH ANNUAL SCIENTIFIC MEETING**

[www.hfsa.org](http://www.hfsa.org)

## Mission Statement

The Heart Failure Society of America, Inc. (HFSA) represents the first organized effort by heart failure experts from the Americas to provide a forum for all those interested in heart function, heart failure, and congestive heart failure (CHF) research and patient care.

The mission of HFSA is to:

**Promote research** related to all aspects of heart failure and to provide a forum for presentation of basic, clinical, and population-based research.

**Educate** physicians and other members of the profession through programs, publications, and other media to enable them to diagnose and treat heart failure and concomitant medical conditions more effectively.

**Encourage** primary and secondary preventive measures to reduce the incidence of heart failure; to serve as a resource for government, private industry, and health care providers to facilitate the establishment of programs and policies that will better serve the patient.

**Enhance** quality and duration of life in those with heart failure.

**Promote and facilitate** the formal training of physicians, scientist, and allied health care providers in the field of heart failure.

Court International, Suite 240 South  
2550 University Avenue West  
St. Paul, MN 55114