



ACCF Industry Advisory Forum  
Cardiovascular Disease in Women  
December 3, 2024

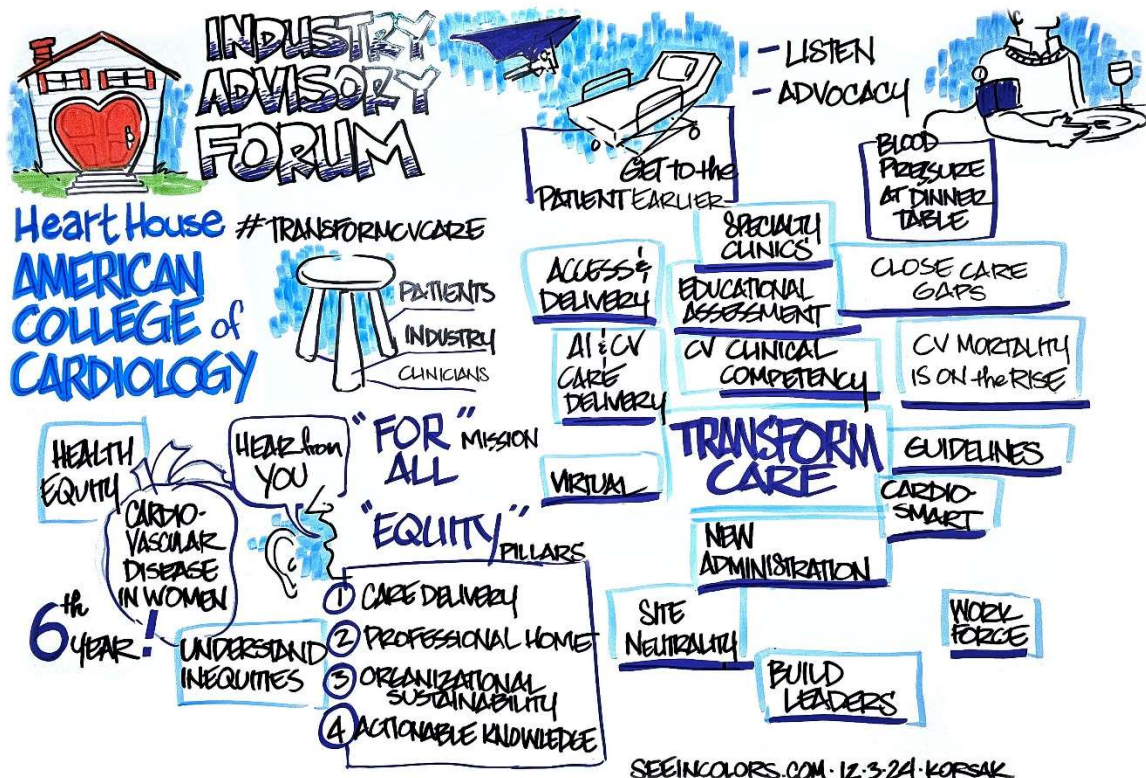
**Summary Report**

Enclosed are the following:

- Executive Summary
- Meeting Agenda
- Participant List
- Participant Survey Results

## Executive Summary

**Opening Remarks:** The American College of Cardiology's (ACC) December 2024 Industry Advisory Forum (IAF) kicked off with a welcome from Work Group Chair and ACC Past President **Mary Norine Walsh, MD, MACC**. Current ACC President **Cathleen Biga, MSN, FACC**, provided an update on ACC's strategic vision for 2025, emphasizing inclusivity and health equity as core principles across all operations. **ACC's four strategic pillars—care delivery, actionable knowledge, professional home, and sustainability—remain central, with a focus on addressing care disparities, particularly among women and minority groups.** Efforts to improve care delivery include promoting community-based models, addressing workforce shortages, implementing innovative digital solutions, and expanding team-based care models. Educational initiatives are focused on obtaining approval for a new cardiovascular clinical competency board certification which aims to enhance clinical standards and leverage AI to deliver practical knowledge. ACC's Leadership development programs aim to equip clinicians to navigate evolving challenges while the Innovation program focuses on integrating AI tools, expanding remote monitoring, and simplifying clinical guidelines.



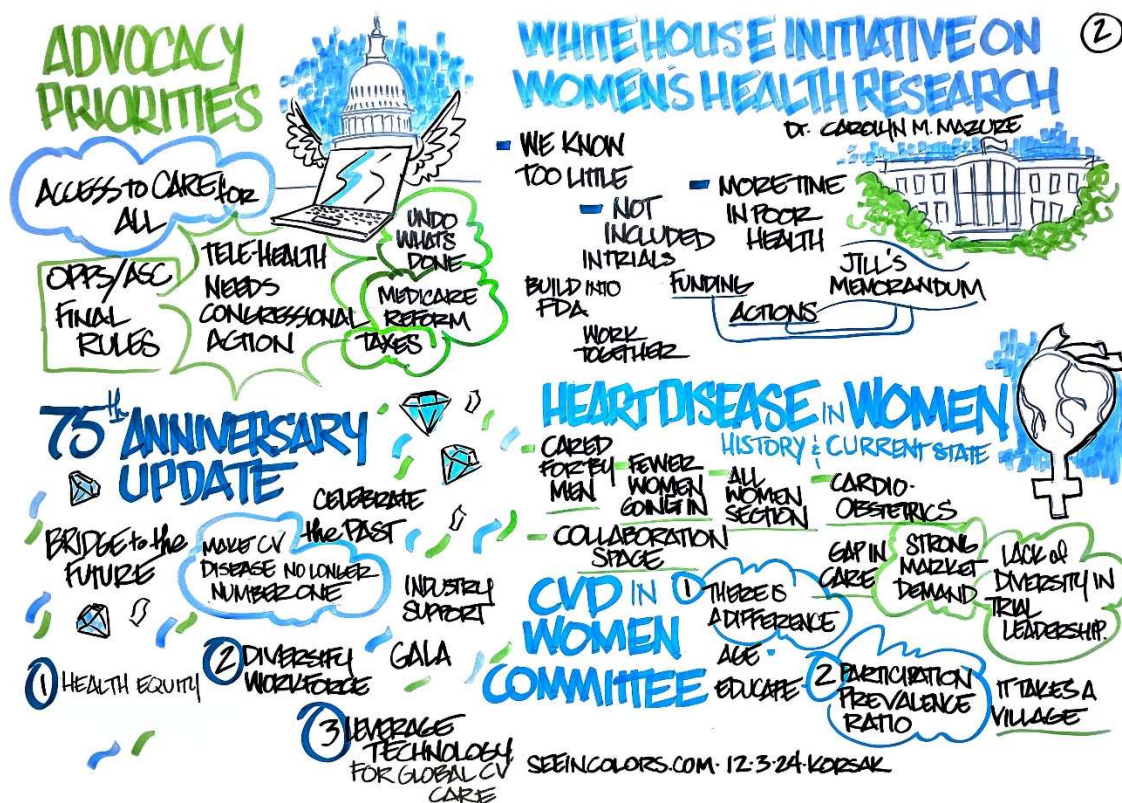
**Advocacy Update:** Nick Morse, ACC Vice President Advocacy, spoke to ACC's legislative priorities, particularly emphasizing patient-centered care as a cornerstone of medical advocacy. Access to care for all remains a primary goal, resonating with members, the public, and

policyholders. Legislative updates included challenges with the physician fee schedule and the need for congressional action to maintain telehealth flexibilities beyond the pandemic-era policies. Looking ahead to 2025, there will be attention to site neutrality reforms, Medicare payment restructuring, and sustaining value-based care initiatives. Morse concluded with confirming ACC's commitment to monitor relevant policy developments and to continue advocacy for equitable and innovative healthcare solutions.

**ACC 75<sup>th</sup> Anniversary Bridge to the Future:** ACC Past President and current 75<sup>th</sup> Anniversary Committee Chair, **Dipti Itchhaporia, MD, MACC**, highlighted the advancements in cardiovascular science over the past 75 years and the **bold goals of the ACC, including pursuit of a world in which cardiovascular disease is no longer the leading cause of death globally**. She outlined the three core objectives to the ACC's 75<sup>th</sup> Anniversary Bridge to the Future campaign, that will raise funds for programs that:

1. Advance health equity,
2. Empower future leaders, and
3. Improve global heart health.

Philanthropic support from ACC members, corporate partners, and other collaborators was emphasized as critical to advancing and sustaining these initiatives. The upcoming ACC gala at the Field Museum on March 28, 2025 will celebrate historic achievements and serve as a fundraising platform to ensure continued progress.





**Keynote Speaker:** Next, **Carolyn Mazure**, PhD, Chair of the White House Initiative on Women's Health Research, presented an insightful overview of the initiative's mission, progress, and future goals. Drawing on her extensive background at Yale School of Medicine and the NIH, Dr. Mazure highlighted the **critical underrepresentation of women in clinical trials and the resulting gaps in knowledge about effective prevention, diagnosis, and treatment of conditions affecting women uniquely or disproportionately**. Since its launch in November 2023, the initiative has secured nearly \$1 billion in federal funding to integrate women into existing research frameworks and has catalyzed significant policy changes across agencies, including NIH and FDA. Beyond government efforts, Dr. Mazure **emphasized the importance of public-private partnerships and industry engagement to sustain momentum and address gaps in women's health research**.



**Historical Perspective from ACC:** Dr. Walsh reviewed the journey of addressing cardiovascular disease in women at the ACC, **emphasizing the distinct difference between heart disease in women and men in the field of cardiology**. Significant strides have been made to increase women's presence in the field, noting the founding of the Women in Cardiology section to foster professional development, mentorship, and advocacy for equity in pay and leadership. **The establishment of the Cardiovascular Disease in Women Committee was a major milestone, forming a group aimed at addressing the unique challenges and disparities women face in cardiovascular care.** These initiatives have led to numerous scientific contributions, educational programs, and collaborations with medical societies, advancing both clinical expertise and community-building efforts in the field.

**Goals of ACC's CV Disease in Women Committee:** **Leslie Cho**, MD, FACC, Chair of the Cardiovascular Disease in Women Committee, highlighted the current goals of the committee including:

1. Fostering research that specifically investigates cardiovascular diseases in women.

2. Promoting the development and publication of guidelines, scientific statements and white papers dealing with sex-specific differences.
3. Advocating for legislation determined to be beneficial for women with cardiovascular disease.

**Dr. Cho also emphasized the critical need for greater female leadership in clinical trials to ensure diverse perspectives and equitable representation.** She called on industry partners and stakeholders to collaborate in closing gaps in care, addressing barriers to trial participation, and advancing the field of women's cardiovascular health.

**Panel Discussion #1:** Dr. Walsh then moderated a panel featuring experts in various fields of cardiology, sharing insights into disparities they've observed in patient care and research.



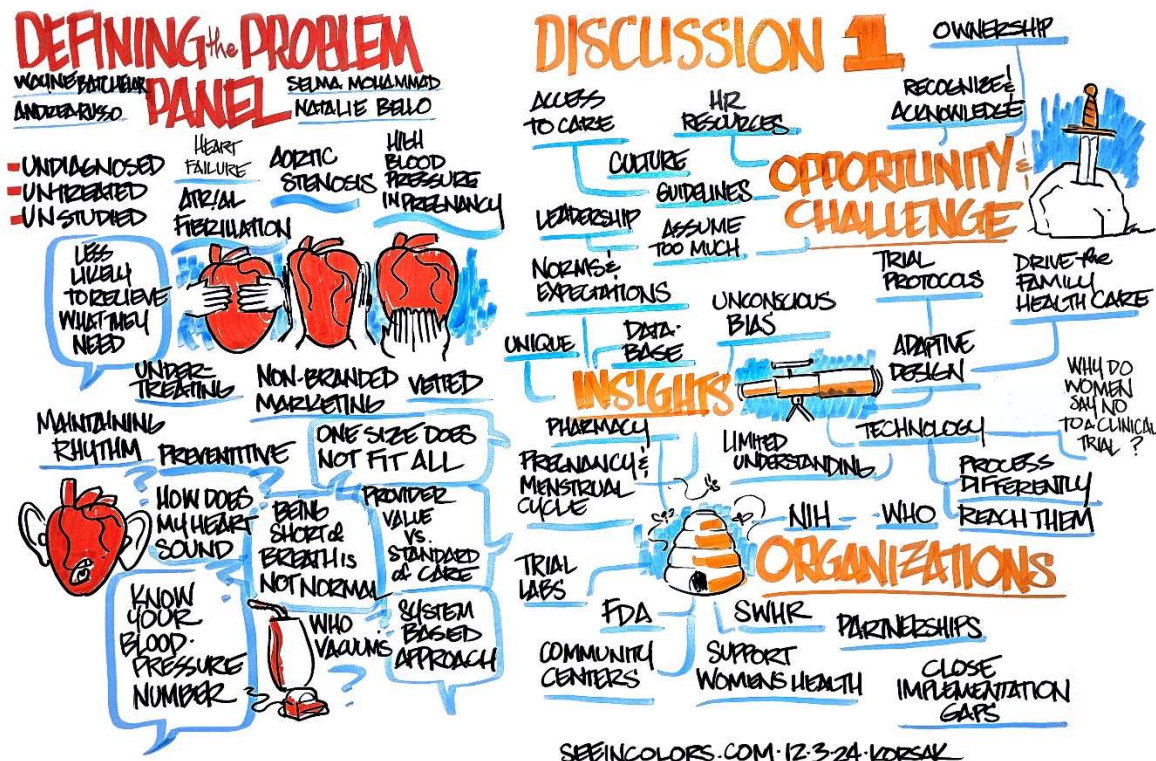
**Selma Mohammad**, MBBS, FACC, Advanced Heart Failure & Transplant Cardiologist at CHI Health Clinic Heart Institute, discussed her research in heart failure with preserved ejection fraction (**HFpEF**), **a condition that disproportionately affects women**. She highlighted how women are underdiagnosed, undertreated, and underrepresented in clinical trials, leading to gaps in care and unequal outcomes.

**Andrea Russo**, MD, FACC Director, Electrophysiology and Arrhythmia Services, Cooper University Health Care, focused on atrial fibrillation (**Afib**). She pointed out that while women experience a higher prevalence of Afib after their 70s, they are **less likely to receive life-saving treatments**, such as anticoagulants or rhythm control therapies, despite worse outcomes compared to men.

**Wayne Batchelor**, MD, MHS, MBA, FACC, Director of the Interventional Heart Program at the Inova Heart Institute, shared his expertise on **aortic stenosis**. He emphasized the unique challenges in treating women with this condition, particularly regarding the **increased risk of vascular complications** during transcatheter valve replacement procedures in many cases due to smaller vessel size. He also discussed how gender differences affect diagnosis and treatment, especially in cases of paradoxical, low flow, low gradient aortic stenosis.

**Natalie Bello, MD, MPH, FACC**, Director of Hypertension Research at Cedars Sinai, spoke about the under-addressed issue of hypertension in women, particularly in relation to pregnancy and menopause. She stressed the importance of early detection and treatment, noting that **women with hypertension during pregnancy are at high risk for developing long-term hypertension**, yet many remain undiagnosed or under-treated.

Throughout the discussion, the panelists emphasized the need for more targeted research and clinical trials that include women, as well as the importance of **addressing the unique ways cardiovascular diseases manifest in women**.



The panel discussed the surge of direct-to-consumer marketing, and called for **non-branded, public awareness campaigns with basic health education**, to know your blood pressure numbers for example. Cautioning that marketing should be developed with physician input and aim to educate patients on the range of choices available. The discussion also touched on the use of artificial intelligence (AI) in diagnosing conditions like aortic stenosis and atrial fibrillation, where **AI technologies can improve the accuracy of diagnoses and patient referrals**. Finally, the panel discussed the gap between clinical trial results and their actual implementation in daily healthcare practice. They **stressed the need for systems-based approaches and automated processes within electronic health records to ensure that proven therapies are effectively integrated into patient care**.

#### **Small Group Discussion Session #1:**

In the small group discussion following the panel, three questions were addressed:



**1. What are the biggest opportunities and challenges that industry and health systems face in assuring equitable access to care in women?**

- Barriers to accessing healthcare (transportation, affordability, and accessibility) – health systems need to leverage technology like telemedicine and incentivize addressing women’s health needs;
- Healthcare providers often fail to recognize symptomatic differences in women – improved education for both providers and patients is critical;
- Opportunity to increase trial participation through decentralized clinical trials and adaptive trial design;
- Women’s role as caregivers offers a unique opportunity for targeted interventions and family-based approaches to improve health outcomes.



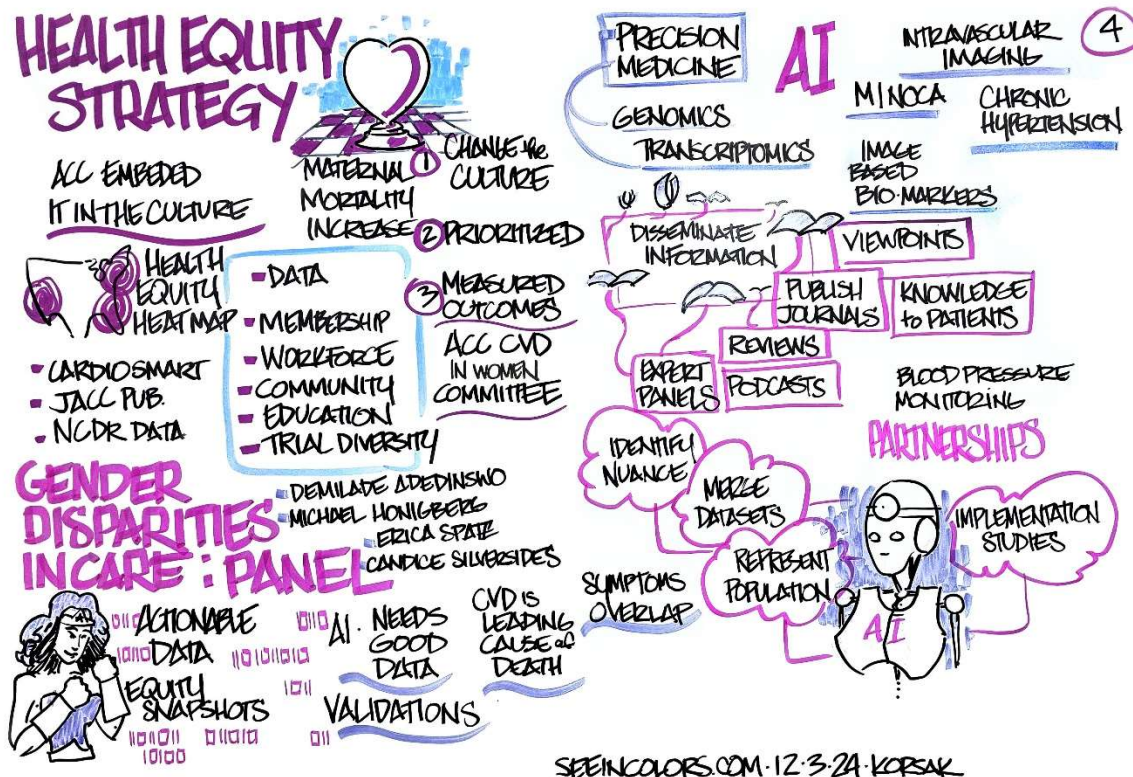
**2. Are there other key insights you have identified that are important for addressing differential treatment and outcomes for women with CVD?**

- Need for a team-based approach, including advanced practice providers, pharmacists and community health workers, to support care delivery and patient education, particularly in under-resourced areas;
- Educating healthcare providers early in their training to recognize unconscious gender biases;
- Need for more actionable, gender-sensitive guidelines and integration into healthcare technology systems like electronic health records (EHRs);
- Leveraging AI, digital health tools, and more inclusive registries can help identify underrepresented women and improve cardiovascular care outcomes;
- Strong call for more female leadership across healthcare systems, clinical trials, and industry to ensure women’s health issues are prioritized at all levels.

**3. Are there other organizations doing work to improve outcomes for CVD in women that would help to enhance the impact of ACC’s strategy?**

- [Alliance for Women’s Health & Prevention](#)
- [Health in Her Hue](#)
- [Society for Women’s Health Research](#)
- [Women as One](#)
- [Women’s Health Research Institute](#)

**ACC Health Equity Strategy:** After lunch, **Biyyem Bozkurt, MD, PhD, FACC**, ACC Health Equity Task Force Member, focused on the **ACC's commitment to integrating health equity into its culture, structure, and strategies**. She highlighted efforts to address disparities in cardiovascular care, including the Clinical Trials Research program, publications in JACC Advances, and utilization of tools like the HealthEquity heat map, CardioSmart and the National Cardiovascular Data Registry (NCDR). **Bozkurt called for stronger partnerships, education on implicit bias, and new models of care to ensure equitable access**, urging collective action to create systemic change.



**Use of NCDR to Inform Quality Improvement:** Ty Gluckman, MD, FACC, then went into more detail on the NCDR and its role in **addressing health equity by using data to identify gaps in care based on race, ethnicity, sex, and other demographic factors**. The first phase of NCDR's initiative includes making data actionable by integrating patient centered views, allowing for comparison of performance across populations. He highlighted the potential of pairing NCDR data with external data sources, such as the Social Vulnerability Index, to gain a deeper understanding of patient needs. **The goal of these efforts is to encourage health systems to use their own data to inform care pathways that provide more equitable care to women and other underserved populations.**

**Panel Discussion #2:** Gluckman went on to moderate the second panel focused on the practical efforts and tools being used to address disparities in women's cardiovascular health. Each panelist shared their work in this area, particularly through the lens of innovation, technology, and community engagement.



**Demilade Adedinsewo**, MD, MPH, FACC, Assistant Professor of Medicine, Mayo Clinic College of Medicine and Science, is an invasive cardiologist focusing on heart disease in women. Her research explores the use of digital tools and AI to improve cardiovascular care, she highlighted the need for validation studies in the patient populations we intend to deploy the technology in. One notable study she conducted was in Nigeria, where **AI-enabled digital stethoscopes were used to screen women for heart failure, doubling the detection rate of cardiomyopathy cases.**

**Michael Honigberg** MD, FACC, cardiologist-investigator at Massachusetts General Hospital, studies emerging cardiovascular risk factors in women **utilizing precision medicine, which integrates genomics, lifestyle factors, and social determinants of health to tailor treatments for individuals.** He emphasized the importance of these tools in understanding complex conditions like myocardial infarction with non-obstructive coronary arteries (MINOCA) and highlighted the need for precision approaches in treating hypertension disorders in pregnancy.

**Candice Silversides**, MD, FACC, clinician investigator, Toronto General Hospital Research Institute, focuses on heart disease in pregnancy and adult congenital heart disease. She is also the editor-in-chief of *JACC Advances* and discussed the journal's role in advancing women's cardiovascular health. She emphasized the **importance of diversifying editorial boards to include experts in women's health and health equity, as well as the use of modern media (like podcasts and social media) to disseminate research findings more widely.**

**Erica Spatz**, MD, MHS, FACC, Director, Preventive Cardiovascular Health Program, Yale Heart and Vascular Center, is a general cardiologist with a focus on community and individual engagement to promote health equity, particularly around cardiovascular risk factors. She discussed the **need to dive deep into characterizing communities to help inform the types of intervention needed.** This is an approach that has proven to work well utilizing Community Health Workers who are invested in the communities they serve. Spatz also highlighted the **importance of data sharing across academic and industry sectors** to improve the understanding of health disparities.



During questions the panelists addressed **women's representation in AI and clinical trials.** Panelists acknowledged despite efforts to improve, current data still show gender gaps in these areas and the **need to curate more representative datasets for AI models** remains. Decentralized, technology-enabled trials could help engage women by reducing logistical barriers like in-person visits. However, one key challenge identified was the gap between innovation and its

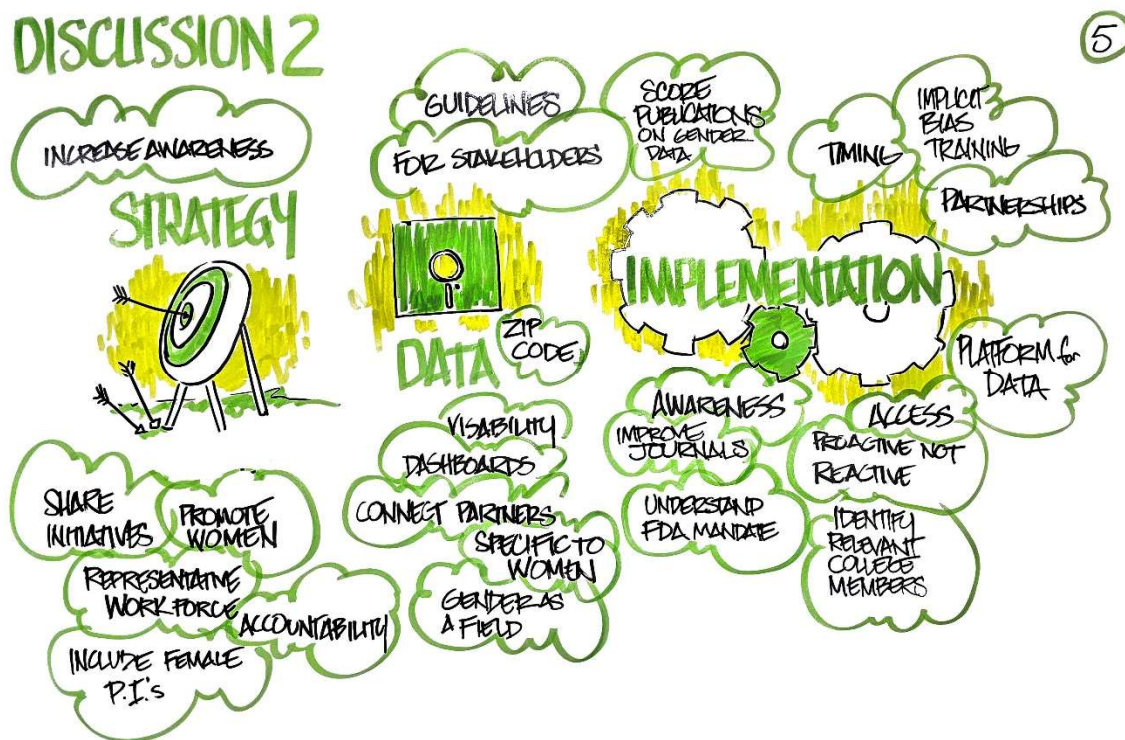
real-world application due to barriers in clinical care. Innovations can take years to translate into practice, and many proven solutions remain underutilized. **The focus needs to shift towards implementation science, understanding how to integrate existing, low-cost innovations into everyday clinical practice to create lasting change.** Silversides also addressed the **crucial role journals play in ensuring that published studies reflect representative patient populations.** Editors rely on reviewers to flag such issues, and authors are often asked to justify any skewed populations. If the justification is not adequate, the study may not be published. The session concluded with a look at the FDA's draft guidance on inclusion and how it might impact future practices.

### **Small Group Discussion Session #2:**

In the final small group discussion following the panel, three questions were addressed:

#### **1. How does CVD in women fit into your organization's overarching health equity strategy?**

- Many organizations have a general health equity strategy, but few specifically focus on cardiovascular disease in women.
- Promoting women into leadership roles to guide research and clinical trials related to gender equity is key to making progress.
- There is opportunity to be more intentional about addressing women's cardiovascular health – industry can make transparent criteria for trial and advisory board positions, intentional trial design for accessibility for women, journals can provide visibility to gender disparities and require representation for publication or create a scorecard to force action



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**2. What data is most critical to advancing more equitable prevention and treatment of CVD in women?**

- Gender is not a required field in many registries and clinical studies – making this mandatory would help highlight disparities.
- Zip codes - understanding where the populations most in need of specific care is important. Using ACC's Health Equity heat map for this could be useful
- Highlighting successes and creating best practices from what is working
- Development of KPIs to have general alignment across stakeholders and ability to measure and compare outcomes
- Need to call out gender representation in publications of research and reject those that are not representative
- Research in pregnant women is a missed opportunity
- Guidelines need to specifically address biological differences and treatment approaches

**3. What types of implementation programs would be most effective to help drive real change for CVD in women over the next 5 years?**

- Sustained partnerships between community organizations, payors, and industry partners will be crucial to drive long-term change. Including a team-based approach to care.
- Targeting health facilities and locations where women already are - OB/GYN, primary care, pediatrician, grocery stores, pharmacies
- Focus on prevention is essential, but it is not currently valued. Need to make an investment in this which requires patient education/empowerment and a team-based approach.
- Creating visibility for researchers and investigators from underrepresented communities and encouraging their involvement in trials through tools like the ACC's Member Finder was highlighted.
- Implementing large-scale implicit bias training programs and evaluating their effectiveness can create more equitable environments in clinical practice and research.
- Encouraging journals to create publication standards. Include a "representation score" for publications based on how well they represent diverse populations, including women, could promote more inclusive research.
- Large-scale implementation science efforts need a platform for visibility, such as high-impact journals.

The forum concluded with the announcement that ACC Past President Ed Fry, MD, MACC will be the incoming Chair of the Industry Advisory Forum Work Group in 2025. The IAF continues to be a meeting of great value for ACC and the discussions at the December forum will be disseminated internally to inform future programmatic strategy.

*ACC would like to thank all the IAF participants and Mark Korsek from [See in Colors](#) for the graphic depictions of the conversation throughout the day.*





**IAF Welcome Reception (optional)**

**Monday, December 2, 2024**

**5 - 6:30pm EST**

**KEA, Heart House, Washington, DC**

**IAF Meeting**

**Tuesday, December 3, 2024**

**9am – 3pm EST**

**MPR, Heart House, Washington, DC**

**ACC IAF MEETING AGENDA**

***Topic – Cardiovascular Disease in Women***

<b>8:00 am – 9:00 am</b>	<b>BREAKFAST, TAKE SEATS &amp; SETTLE IN</b>
<b>9:00 am – 9:05 am</b>	<b>Welcome to IAF, Opening Remarks &amp; Introduction</b> Mary Norine Walsh, MD, MACC, ACC Past President, ACC Industry Advisory Forum Chair, Medical Director, Heart Failure & Cardiac Transplantation, Ascension St. Vincent Cardiovascular Research Institute
<b>9:05 am – 9:30 am</b>	<b>ACC Update + Q&amp;A</b> Cathleen Biga, MSN, FACC, ACC President
<b>9:30 am – 9:45 am</b>	<b>ACC Advocacy Update + Q&amp;A</b> Nick Morse, MBA, ACC Vice President Advocacy
<b>9:45 am – 9:55 am</b>	<b>75<sup>th</sup> Anniversary Update + Q&amp;A</b> Dipti Itchhaporia, MD, MACC, ACC Past President, 75 <sup>th</sup> Anniversary Work Group Chair; Director, Hoag Heart & Vascular Institute
<b>9:55 am – 10:10 am</b>	<b>White House Initiative on Women’s Health Research</b> Carolyn M. Mazure, PhD
<b>10:10 am – 10:20 am</b>	<b>BREAK</b>
<b>10:20 am – 11:20 am</b>	<b>Heart Disease in Women – Historic Review and Current State of Affairs</b> Mary Norine Walsh, MD, MACC  <b>ACC’s CVD in Women Committee</b> Leslie Cho, MD, FACC; Director, Women’s Cardiovascular Center, Cleveland Clinic  <b>Defining the Problem – Gender Disparities in Treatment - Panel Discussion</b> Moderated by Mary Norine Walsh, MD, MACC Panelists: <ul style="list-style-type: none"> <li>Aortic Stenosis – Wayne Batchelor, MD, MHS, MBA, FACC; Director, Interventional Heart Program, Inova Health System</li> </ul>

	<ul style="list-style-type: none"> <li>• Atrial Fibrillation – Andrea Russo, MD, FACC; Director, Electrophysiology and Arrhythmia Services, Cooper University Health Care</li> <li>• Heart Failure - Selma Mohammad, MBBS, FACC; Advanced Heart Failure &amp; Transplant Cardiologist, CHI Health Clinic Heart Institute</li> <li>• Hypertension - Natalie Bello, MD, MPH, FACC; Director of Hypertension Research, Smidt Heart Institute, Cedars-Sinai</li> </ul>
11:20 am – 12:00 pm	<p><b>Small Group Discussions and Report Out</b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> What are the biggest opportunities and challenges that industry and health systems face in assuring equitable access to care in women?</li> <li><input type="checkbox"/> Are there other key insights you have identified that are important for addressing differential treatment and outcomes for women with CVD?</li> <li><input type="checkbox"/> Are there other organizations doing work to improve outcomes for CVD in women that would help to enhance the impact of ACC's strategy?</li> </ul>
12:00 pm – 1:00 pm	<b>GROUP PICTURE &amp; LUNCH (60 minutes)</b>
1:00 pm – 2:00 pm	<p><b>Health Equity Strategy – ACC's Approach to Addressing CVD in Women</b>          Biykem Bozkurt, MD, PhD, FACC; ACC Health Equity Task Force Member; Assoc. Director, Cardiovascular Research Institute, Baylor College of Medicine</p> <p><b>Gender Disparities in Care: What Can We Do About It? - Panel Discussion</b>          Moderated by Ty Gluckman, MD, FACC, Medical Director of the Center for Cardiovascular Analytics, Research, and Data Science (CARDS), Providence Heart Institute</p> <p>Panelists:</p> <ul style="list-style-type: none"> <li>• Addressing gender disparities in AI - Demilade A. Adedinsowo, MD, MPH, FACC; Assistant Professor of Medicine, Mayo Clinic College of Medicine and Science</li> <li>• Precision medicine for women with CVD – Michael Honigberg, MD, FACC; Cardiologist-investigator, Massachusetts General Hospital</li> <li>• Evidence generation – Erica Spatz, MD, MHS, FACC; Director, Preventive Cardiovascular Health Program, Yale Heart and Vascular Center</li> <li>• Evidence dissemination efforts – Candice Silversides, MD, FACC; Clinician Investigator, Toronto General Hospital Research Institute</li> </ul>
2:00 pm – 2:45 pm	<p><b>Small Group Discussions and Report Out</b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> How does CVD in women fit into your organization's overarching health equity strategy?</li> <li><input type="checkbox"/> What data is most critical to advancing more equitable prevention and treatment of CVD in women?</li> <li><input type="checkbox"/> What types of implementation programs would be most effective to help drive real change for CVD in women over the next 5 years?</li> </ul>
2:45 pm – 3:00 pm	<b>WRAP-UP AND ADJOURNMENT</b>



## List of Participants – December 3, 2024

### ACC Leadership

**Cathleen Biga, MSN, FACC**

President, American College of Cardiology

**Edward T. Fry, MD, MACC (Incoming IAF Chair)**

Past President, American College of Cardiology  
Chair, Ascension Cardiovascular Service Line

**Richard Kovacs, MD, MACC**

Past President, Chief Medical Officer, American College of Cardiology

**Mary Norine Walsh, MD, MACC (IAF Chair)**

Past President, American College of Cardiology  
Medical Director, Heart Failure & Cardiac Transplantation, Ascension St. Vincent Cardiovascular Research Institute

### ACC Industry Advisory Forum Work Group

**Paul N. Casale, MD, MPH, MACC**

Professor of Clinical Medicine, Weill Cornell Medicine  
Executive Director, New York Quality Care

**Paul L. Douglass, MD, MACC**

Chief, Division of Cardiology, Atlanta Medical Center  
Director, Cardiovascular Services, Wellstar Atlanta Medical Center

**Ty Gluckman, MD, FACC**

Medical Director, Center for Cardiovascular Analytics, Research, & Data Science, Providence St. Joseph Health

**Jennifer Silva, MD, FACC**

Director, Pediatric Electrophysiology  
Professor, Pediatrics & Biomedical Engineering  
Faculty Fellow in Entrepreneurship  
Washington University School of Medicine

### ACC Members & Faculty

**Demilade A. Adedinsewo, MD, MPH, FACC**

Assistant Professor of Medicine, Mayo Clinic College of Medicine and Science

**Wayne Batchelor, MD, MHS, FACC**

Director, Interventional Heart Program, Inova Health System

**Natalie Bello, MD, MPH, FACC**

Director of Hypertension Research, Smidt Heart Institute, Cedars-Sinai

**Biykem Bozkurt, MD, PhD, FACC**

ACC Health Equity Task Force Member,  
Associate Director, Cardiovascular Research Institute, Baylor College of Medicine

**Leslie Cho, MD, FACC**

Chair, ACC Cardiovascular Disease in Women Committee,  
Director, Women's Cardiovascular Center, Cleveland Clinic

**Melvin Echols, MD, FACC**

Chief Health Equity, Diversity and Inclusion Officer, American College of Cardiology

**Michael Honigberg, MD, FACC**

Cardiologist-Investigator, Massachusetts General Hospital

**Dipti Itchhaporia, MD, MACC**

Past President, American College of Cardiology,  
Chair, ACC 75<sup>th</sup> Anniversary Work Group,  
Director, Hoag Heart & Vascular Institute

**Carolyn M. Mazure, PhD**

Chair of the White House Initiative on Women's Health Research

**Selma Mohammad, MBBS, FACC**

Advanced Heart Failure & Transplant Cardiologist, CHI Health Clinic Heart Institute

## ACC Members & Faculty (cont.)

### **Andrea Russo, MD, FACC**

Director, Electrophysiology and Arrhythmia Services,  
Cooper University Health Care

### **Candice Silversides, MD, FACC**

Clinician Investigator, Toronto General Hospital  
Research Institute

### **Erica Spatz, MD, MHS, FACC**

Director, Preventive Cardiovascular Health Program,  
Yale Heart and Vascular Center

## ACC IAF Members

### **Abbott**

#### **Rebecca Angerstein, RN, ACNP, DNP**

Director, Medical Affairs – Heart Failure

#### **Kaylee Arostegui**

Senior Brand Product Manager, Heart Failure

### **Alnylam**

### **Amgen**

#### **Laney Jones, PharmD, MPH**

Implementation Science Medical Director

#### **Lisa Head, PharmD**

Executive Director and US Medical Lead, Cardiovascular  
Metabolic Health

### **AstraZeneca**

#### **Emily Guerrieri, PharmD, BCPS**

Medical Science Liaison, Renal/ Cardiovascular

### **Bayer**

#### **Tamara Windau-Melmer, MPH**

Director, Advocacy Relations CVR

### **Boehringer Ingelheim**

#### **Jenn Tepper**

Sr. Associate Director, Patient Advocacy & Professional  
Relations

#### **Katie Qureshi, MD, PhD, FRCP, B.Sc (Hons), BCMAS**

Executive Medical Director

### **Boston Scientific Corporation**

#### **Gina Hrach, MSN, RN, MBA**

Educational Grants and Societal Relations Manager

#### **Aparna Bhawe, PhD**

Research and Development Fellow, Interventional  
Cardiology

### **BridgeBio**

#### **Kristin Binaso**

Sr. Director, Professional Society Engagement &  
Educational Partnerships

#### **Andrew Rosen, PhD**

Executive Director, Evidence Generation

### **Bristol Myers Squibb**

#### **Joshua Roll**

Director, Strategic Alliances & Issue Advocacy

#### **Kristie Yadro**

Head of US/WW CV Professional Societies and  
Associations

### **Bristol Myers Squibb/ Pfizer Alliance**

#### **Michael Myers, PhD, BCMAS**

Medical Director, NVAF Medical Lead, US Medical  
Cardiovascular & Established Brands (BMS)

#### **George Sands, MD, FACC**

Senior Medical Director, US Medical Affairs, Internal  
Medicine (Pfizer)

## ACC IAF Members (cont.)

### Cleerly

**Ashley Dunham, PhD, MSPH**

VP Scientific Affairs

**Michelle Gearhart, PharmD**

VP Medical Affairs

### CVRx

**Bonnie Handke, RN, MBA**

Sr. VP, Patient Access, Reimbursement & Policy

**Kristi Masser**

Manager, Advocacy & Engagement

### Cytokinetics

**Leah Hatfield, PharmD, BCPS**

Medical Director, Medical Affairs

**Colleen Healy, MA**

Director, Professional Society Relations

### Eli Lilly and Company

**Kate Thomas, MA**

Sr. Director, U.S. Obesity Care Advocacy and Professional Relations

**Alana Washington, PharmD, MBA**

Sr. Director, Cardiometabolic Health Global Medical Affairs

### Esperion Therapeutics

**Heather Powell, PharmD**

Head of Scientific Affairs

**Annie Schlemmer, RPh**

Sr Director Scientific Affairs Operations, Engagement, and Advocacy

### iRhythm

### Jazz Pharmaceuticals

**Nika Bejou, PharmD**

Associate Medical Director

### Jazz Pharmaceuticals

**Kurt Stembridge**

Director State Government Affairs

### Johnson & Johnson

**JoAnne Foody**

SVP, Global Therapeutic Area Head, Cardiopulmonary

**Shawn Mittelstadt, MBA**

Director, National Policy and Advocacy

### Medtronic

**Kris Flanagan, MBA**

Global Principal Market Development Manager

**Lucy Schlueter, MBA, BSN, RN**

Market Development Consultant

### Merck

**Tracy Paul, MD**

Senior Medical Director, Global Medical Affairs - Cardiovascular

### NewAmsterdam Pharma

### Novartis

**Kelly Kleeman, PharmD**

Medical Director

### Novo Nordisk

**Sean McGraw**

Director, Alliance Development

### Regeneron Pharmaceuticals

**Aaron Kithcart, MD, PhD, FACC**

Medical Director

**Amanda Seeff-Charny**

Executive Director, Patient Advocacy

### Sanofi

**Susan Manganello, RN, BSN**

Lead, Public Affairs and Patient Advocacy Vaccines



## ACC Staff

**Akua Asare, MD**

Director, Health Equity, Diversity & Inclusion

**Andreea Candela, MBA, MA**

Marketing & Communications

**Sarah Culhane, RDCS**

Director, Corporate Partnerships & Business Strategy

**Maghee Disch, MSN, RN, AACC**

Director, Health Equity, Diversity & Inclusion

**Megan Drewiske**

Associate Director, Business Operations & Strategy

**Shalen Fairbanks**

Vice President, Marketing & Communications

**Michael Hargrett**

Team Leader, Member Strategy

**Lisa Hix, JD**

Acting Chief Executive Officer

**Neal Kovach, MBA**

Chief Commercial Officer, Global Innovation & Clinical Transformation

**Ravee Kurian, MBA**

Chief Financial Officer, Chief Operations Officer

**Brynne MacCann**

Philanthropic Giving Associate

**Stephanie Mitchell, BPh**

Member Engagement

**Nick Morse, MBA**

Division Vice President, Advocacy & Government Affairs

**Brendan Mullen**

Senior Executive Vice President, Business Strategy

**Ryan Meyer, MPP**

Program Manager, Health Equity, Diversity & Inclusion

**Sarah N. Sears, MA, CAE**

Vice President, Membership

**Julie Stephenson, BSN, MBA**

Senior Director, Corporate Partnerships & Business Strategy

**Miriam Surdin, MPA, CAE**

Associate Director, Chapter Affairs

**Kristin West**

Team Lead, Member Strategy

**Lear Zaborowski, MBA**

Senior Director, Corporate Partnerships & Business Strategy

Q1 How would you rate the overall quality of the July IAF meeting?

Answered: 14    Skipped: 1

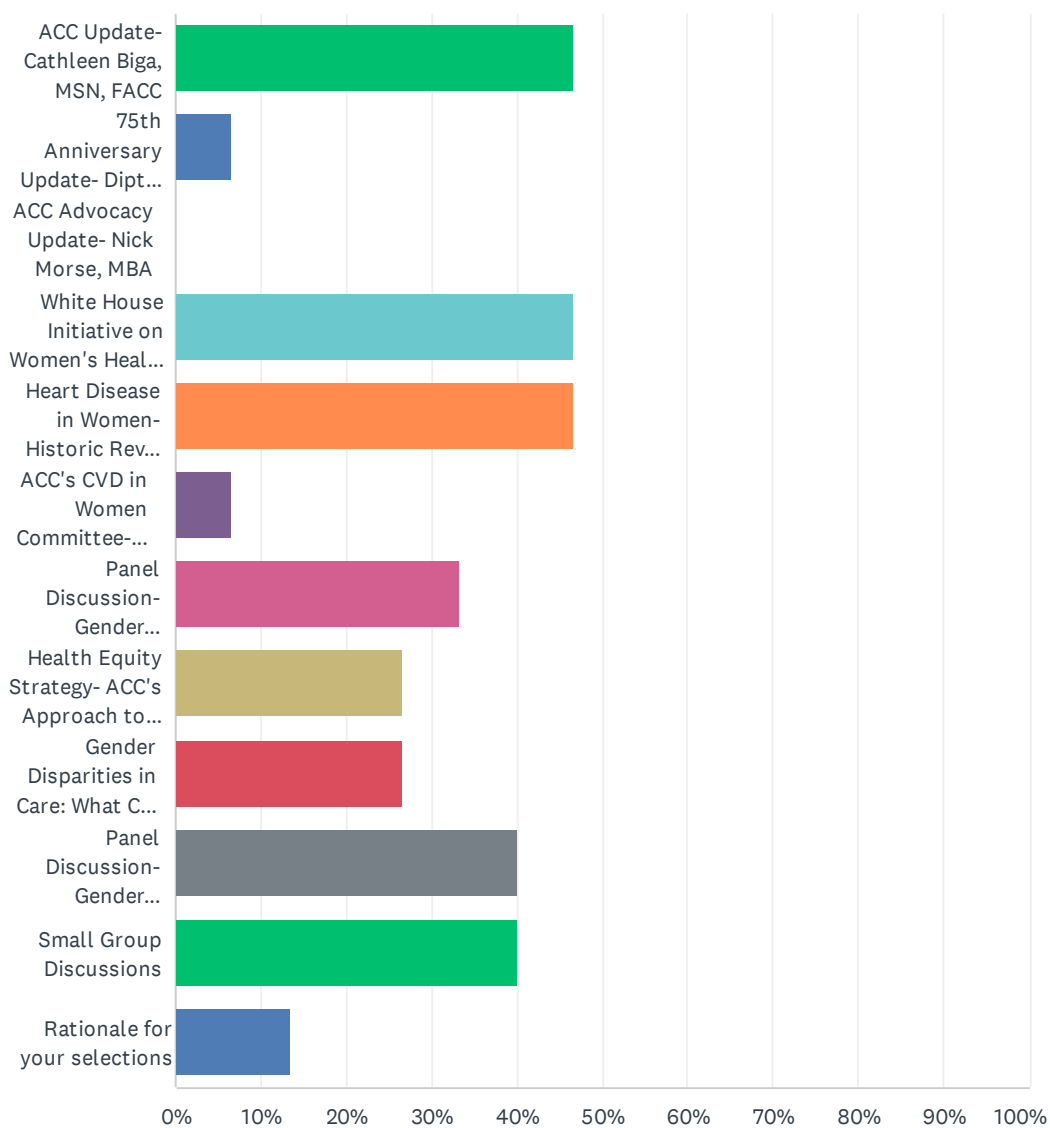
4.4★  
average rating



	DID NOT MEET EXPECTATIONS	(NO LABEL)	MET EXPECTATIONS	(NO LABEL)	EXCEEDED EXPECTATIONS	TOTAL	WEIGHTED AVERAGE
☆	0.00% 0	0.00% 0	21.43% 3	21.43% 3	57.14% 8	14	4.36

## Q2 Select the top 3 sessions you found most beneficial

Answered: 15 Skipped: 0



# ACC Industry Advisory Forum December 2024- Post Meeting Survey

ANSWER CHOICES	RESPONSES	
ACC Update- Cathleen Biga, MSN, FACC	46.67%	7
75th Anniversary Update- Dipti Itchhaporia, MD, MACC	6.67%	1
ACC Advocacy Update- Nick Morse, MBA	0.00%	0
White House Initiative on Women's Health Research- Carolyn Mazure, PhD	46.67%	7
Heart Disease in Women- Historic Review and Current State of Affairs- Mary Norine Walsh, MD, MACC	46.67%	7
ACC's CVD in Women Committee- Leslie Cho, MD, FACC	6.67%	1
Panel Discussion- Gender Disparities in Treatment	33.33%	5
Health Equity Strategy- ACC's Approach to Addressing CVD in Women- Biykem Bozkurt, MD, FACC	26.67%	4
Gender Disparities in Care: What Can We Do About It?- Ty Gluckman, MD, FACC	26.67%	4
Panel Discussion- Gender Disparities in Care	40.00%	6
Small Group Discussions	40.00%	6
Rationale for your selections	13.33%	2
Total Respondents: 15		