International Symposium on:
URIC ACID CARDIOVASCULAR DISEASE:
BACK TO PATHOPHYSIOLOGY

Bologna (Italy), December 1st- 3rd, 2016

Organized by
DEPARTMENT OF MEDICAL AND SURGICAL SCIENCES (DIMEC)
ALMA MATER STUDIORUM UNIVERSITY OF BOLOGNA
BOLOGNA, ITALY

DIVISION OF RENAL DISEASES AND HYPERTENSION
UNIVERSITY OF COLORADO
ANSCHUTZ MEDICAL CAMPUS – DENVEN CO, USA

Promoted by
FONDAZIONE INTERNAZIONALE MENARINI

PROGRAM

Palazzo Re Enzo (Piazza del Nettuno, 1)
The role of serum uric acid as a risk factor for CV disease has been extensively debated for many years without reaching a final agreement among clinicians and researchers. In particular, most of the evidence about the pathogenetic role of uric acid in CV disease have been achieved in the population of patients with severe hyperuricemia or gout while its role in patients with mildly elevated serum levels of uric acid is only poorly recognized. Serum uric acid represents an important, independent risk factor for cardiovascular and renal disease in patients with hypertension, heart failure, or diabetes. Elevated serum uric acid is highly predictive of mortality in patients with heart failure or coronary artery disease and of cardiovascular events in patients with diabetes. Although the mechanism(s) by which uric acid may play a pathogenetic role in cardiovascular disease is still unclear, hyperuricemia is associated with deleterious effects on endothelial dysfunction, oxidative metabolism, platelet adhesiveness, hemrheology, and aggregation. Whether a reduction in uric acid impacts CV and renal disease remains to be determined. However, recent findings from LIFE suggest the possibility that a treatment-induced decrease in serum uric acid may indeed attenuate cardiovascular risk. Clearly, randomized clinical trials are needed to investigate further the long-term cardioprotective benefits issue of reducing hyperuricemia in hypertensive patients.

The main purpose of the present symposium is twofold. First of all to reinforce the role of uric acid in the pathogenesis of gout and gout-related non-rheumatic diseases including renal involvement. Second to provide an updated review of the evidence supporting a possible and relevant role of (elevated) uric acid as a risk factor for cardiovascular diseases. To fullfil this goal we will present a series of comprehensive lectures mainly focused on the different aspects of the relationship between serum uric acid and cardiovascular diseases with the aim to define whether or not the increase in the amount of our knowledge about uric acid may contribute to increase the number of major risk factors.

Presidents of the Meeting
Claudio Borghi and Richard J. Johnson

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With the Patronage of
Health Office Emilia Romagna Region
Assessorato alle Politiche per la Salute Regione Emilia Romagna
Major of the City of Bologna
University Hospital of Bologna Policlinico S. Orsola Malpighi
Department of Medical and Surgical Sciences (DIMEC)
Alma Mater Studiorum University of Bologna
European Society of Hypertension
Italian Society of Hypertension

Presidents of the Meeting

Claudio Borghi
Department of Medical and Surgical Sciences (DIMEC)
Alma Mater Studiorum University of Bologna
Bologna, Italy

Richard J. Johnson
Division of Renal Diseases and Hypertension
University of Colorado
Anschutz Medical Campus
Denver, CO - USA

Scientific Secretariat

Stefania Corvaglia
University Hospital of Bologna
Policlinico S. Orsola - Malpighi, Bologna, Italy

Arrigo F.G. Cicero
Alma Mater Studiorum Università di Bologna
Bologna, Italy

Promoted by

Fondazione Internazionale Menarini
Edificio L - Strada 6
Centro Direzionale Milanofiori
I-20089 Rozzano (Milan, Italy)
Phone: +39 02 55308110 - Fax: +39 02 55305739
E-mail: milan@fondazione-menarini.it
Http:\www.fondazione-menarini.it

Organizing Secretariat and Provider for Italian CME accreditation

I&C s.r.l.
Via Andrea Costa, 202/6
I-40134 Bologna (Italy)
Tel.: +39 051 6144004 - Fax: +39 051 6142772
E-mail: stefania.parolari@iec-srl.it
Opening ceremony

18.00 Welcome addresses
C. Borghi (Bologna, I)

18.15 Main Lecture

Introduction: M. H. Alderman (New York, NY - USA)
E. Ambrosioni (Bologna, I)

Uric acid and CV and metabolic disease: from the back to the future
R. J. Johnson (Denver, CO-USA)

19.00 Welcome cocktail
Session I – Serum Uric Acid and Gout: from the human evolution to mechanism of disease

Chairpersons: I. Olivieri (Potenza, I)  
F. Perez Ruiz (Vizcaya, E)

09.00  F. M. Galassi (Zurich, CH)  
Uric acid and CV disease: an historical perspective

09.30  T. Gibson (London, UK)  
Biochemistry of Uric Acid in clinical perspective

10.00  E. E. Kelley (Morgantown, WV-USA)  
Which XOR-Derived product is driving the metabolic/cardiovascular dysfunction allied to obesity/diabetes, ROS or uric acid?

10.30  H. Sakurai (Tokyo, J)  
Transporter-centric view of urate (patho)physiology

11.00  Coffee break

Session II – Serum uric acid, gout and cardio-renal disease: the genetic approach

Chairpersons: J. Dawson (Glasgow, UK)  
M. Volpe (Rome, I)

11.30  T. Merriman (New Zealand)  
Genetic aspects of gout

12.00  J. Dawson (Glasgow, UK)  
Genes, uric acid and CV diseases

12.30  C. Zoccali (Reggio Calabria)  
The challenge of Mendelian randomization approach

13.00  Lunch
Session III – Gout and cardio-renal co-morbidities

Chairpersons: P. Pauletto (Treviso, I)
               G. Minisola (Rome, I)

14.00 L. Punzi (Padua, I)
The interaction between gout and other rheumatic diseases: current trends

14.30 C. Ferri (L’Aquila, I)
The problem of cardio-renal diseases in patients with gout

15.00 F. Perez Ruiz (Vizcaya, E)
The management of gout in the era of complexity

15.30 Coffee break

Session IV – Serum uric acid and hypertension

Chairpersons: G. Mancia (Milan, I)
               A. Manolis (Athens, GR)

16.00 D. I. Feig (Birmingham, AL, USA)
Uric acid and hypertensive disease at early age.

16.30 G. Grassi (Milan, I)
Effects of serum uric acid on blood pressure lowering treatment

17.00 S. Taddei (Pisa, I)
The effect of antihypertensive drugs on serum uric acid: does it matter?

17.30 Main Lecture

Introduction: M. H. Alderman (New York, NY - USA)

A. Lerman (Rochester, MN - USA)
Serum Uric Acid and the endothelium: is this the battlefield?

18.00 End of the session
Session V – Uric acid and cardiovascular diseases beyond hypertension

Chairpersons: L. Ruilope (Madrid, E)  
P.G. Camici (Milano, I)

08.30 L. O. Lerman (Rochester, MN - USA)  
Hyperuricemia and CV disease: the role of renal impairment

09.00 W. Döhner (Berlin, D)  
Complexity of heart failure: the emerging role of hyperuricemia

09.30 A. J. Manolis (Athens, GR)  
Serum uric acid and atrial fibrillation: update on epidemiology and disease mechanism

10.00 C. Borghi (Bologna, I)  
Hyperuricemia and new onset diabetes/metabolic syndrome

10.30 Coffee break

Session VI – Open issues in the management of hyperuricemia

Chairpersons: E. Agabiti-Rosei (Brescia, I)  
A. Stack (Limerick, IRL)

11.00 G. Desideri (L’Aquila, I)  
Is there any “J-shaped” curve for serum uric acid?

11.30 Y. Shibagaki (Tokyo, J)  
Renal protective effects of urate lowering drugs

12.00 R. Pontremoli (Genoa, I)  
Does urate lowering treatment reduces CV risk in renal patients?

12.30 T. MacDonald (Dundee, UK)  
Cardiovascular effects of urate lowering treatment: the role of drugs

13.00 J. T. Kielstein (Braunschweig, D)  
The preventive role of urate lowering treatment: who should be treated?

13.30 Concluding Remarks

13.45 Lunch
GENERAL INFORMATION

Meeting venue
The venue for the Meeting will be Salone del Podestà, Palazzo Re Enzo – Piazza del Nettuno, 1 - Bologna

Secretariat during the Meeting
The Secretariat will be open at the following times:
Thursday, December 1st, from 05.00 p.m. to 07.00 p.m.
Friday, December 2nd, from 08.00 a.m. to 06.00 p.m.
Saturday, December 3rd, from 08.00 a.m. to 01.30 p.m.

Official language
The official language of the Meeting will be English.

Registration
The Meeting is free to attend.
Please confirm the participation to the Organizing Secretariat within Friday, November 4th, 2016.

Technical facilities
Facilities will be available for computer presentations and overhead projections.
A business center with PC (Powerpoint for Windows) will be available for check and preview of presentations. It is essential that speakers take their presentation to the business center at least one hour before the session starts.

The slide center will be open at the following times:
Thursday, December 1st, from 05.00 p.m. to 07.00 p.m.
Friday, December 2nd, from 08.00 a.m. to 06.00 p.m.
Saturday, December 3rd, from 08.00 a.m. to 01.30 p.m.

Lunches and coffee breaks
Lunches and coffee breaks will be served in the Meeting area.

Abstracts book
Participants will receive the Abstract book at the Meeting.

Certificate of attendance
The certificate of attendance will be available, on request, at the end of the Meeting at the Secretariat.

Italian CME Credits
Italian credits for Italian Physicians have been requested for December 2nd – 3rd only.
Provider Italian CME Credits:
I&C srl PROVIDER: 5387
ID CME ITALIAN CREDITS: 5387-168136
CME CREDITS N. 5,5
I&C srl is responsible for the content, the quality and the ethical honesty of the CME activity.
The meeting is accredited for the following specialties:
Nurse, Pharmacist, Biologist, Physician and Surgeon (Cardiology, Internal Medicine, Metabolic and Diabetes Diseases, Nephrology, Rheumatology, Endocrinology, Neurology, Clinical Biochemistry, Hygiene).
The physicians belonging to other disciplines will not get the credits.
The attendance to the meeting is partially on sponsor companies invitation.
METHODOLOGY
Residential
COURSE OBJECTIVES
Clinical, Diagnostic, Therapy, Treatment Path
LEARNING TEST
The credits will be obtained by attending both days of the meeting (100% of attendance), by answering correctly to the 75% of the CME test questions and by filling the CME forms delivered at the meeting.
European CME Credits
EBAC and EACCME credits have been requested for December 1st - 2nd - 3rd for the following disciplines: Cardiology, Internal Medicine, Metabolic and Diabetes Diseases, Nephrology, Rheumatology, Endocrinology, Neurology, Clinical Biochemistry, Hygiene.

‘URIC ACID CARDIOVASCULAR DISEASE: BACK TO PATHOPHYSIOLOGY’ (Event code: 14792) was granted 10 European CME credits (ECMEC) by the European Accreditation Council for Continuing Medical Education (EACCME).

'URIC ACID CARDIOVASCULAR DISEASE: BACK TO PATHOPHYSIOLOGY' is accredited by the European Accreditation Council for Continuing Medical Education (EACCME) to provide the following CME activity for medical specialists. The EACCME is an institution of the European Union of Medical Specialists (UEMS), www.uems.net.
'URIC ACID CARDIOVASCULAR DISEASE: BACK TO PATHOPHYSIOLOGY' is designated for a maximum of (or 'for up to') 10 hours of European external CME credits. Each medical specialist should claim only those hours of credit that he/she actually spent in the educational activity.
Through an agreement between the European Union of Medical Specialists and the American Medical Association, physicians may convert EACCME credits to an equivalent number of AMA PRA Category 1 Credits™. Information on the process to convert EACCME credit to AMA credit can be found at www.ama-assn.org/go/internationalcme.
Live educational activities, occurring outside of Canada, recognized by the UEMS-EACCME for ECMEC credits are deemed to be Accredited Group Learning Activities (Section 1) as defined by the Maintenance of Certification Program of The Royal College of Physicians and Surgeons of Canada.

EACCME credits
Each medical specialist should claim only those hours of credit that he/she actually spent in the educational activity. The EACCME credit system is based on 1 ECMEC per hour with a maximum of 3 ECMECs for half a day and 6 ECMECs for a full-day event.

European Board for Accreditation in Cardiology

The event “URIC ACID CARDIOVASCULAR DISEASE: BACK TO PATHOPHYSIOLOGY” is accredited by the European Board for Accreditation in Cardiology (EBAC) for 12 CME credit hours of External CME credits.

Each participant should claim only those hours of credit that have actually been spent in the educational activity. EBAC works according to the quality standards of the European Accreditation Council for Continuing Medical Education (EACCME), which is an institution of the European Union of Medical Specialists (UEMS).
LIST OF SPEAKERS, CHAIRPERSONS AND CO-PRESIDENTS OF THE MEETING

Enrico AGABITI-ROSEI
Department of Clinical and Experimental Sciences
University of Brescia
Spedali Civili di Brescia
Brescia (Italy)

Michael H. ALDERMAN
Distinguished University Professor Emeritus
Departments of Medicine and Population Health
Albert Einstein College of Medicine
Bronx, New York NY (USA)

Ettore AMBROSIONI
Italian Society of Hypertension
Bologna (Italy)

Claudio BORGHI
Department of Medical and Surgical Sciences (DIMEC)
Alma Mater Studiorum University of Bologna
Bologna (Italy)

Paolo Guido CAMICI
Myocardial Diseases Center
San Raffaele Hospital
Milan (Italy)

Jesse DAWSON
Institute of Cardiovascular & Medical Sciences
University of Glasgow, Queen Elizabeth University Hospital
Glasgow (United Kingdom)

Giovambattista DESIDERI
UOC Geriatrics and Long-term care
Medical Department ORM
University of L’Aquila
L'Aquila (Italy)

Wolfram DOEHNER
Centre for Stroke Research
University of Berlin
Berlin (Germany)

Daniel I. FEIG
Department of Pediatrics
Division of Nephrology
University of Alabama
Birmingham and Children's of Alabama
Birmingham AL (USA)
Claudio FERRI  
Division of Internal Medicine and Nephrology  
School of Internal Medicine  
University of L'Aquila  
San Salvatore Hospital  
Coppito - L’Aquila (Italy)  

Francesco M. GALASSI  
Institute of Evolutionary Medicine  
Faculty of Medicine  
University of Zurich  
Zurich (Switzerland)  

Terence GIBSON  
Department Acute Medicine  
St Thomas Hospital  
London (United Kingdom)  

Guido GRASSI  
Department of Health Sciences  
University of Milano-Bicocca  
Milan (Italy)  

Richard J. JOHNSON  
Division of Renal Diseases and Hypertension  
University of Colorado  
Anschutz Medical Campus  
Denver CO (USA)  

Eric E. KELLEY  
Department of Physiology and Pharmacology  
West Virginia University  
School of Medicine  
Morgantown, WV (USA)  

Jan T. KIELSTEIN  
Medical Clinic V - Nephrology and Hypertension  
Acedemic Teaching Hospital Braunschweig  
Braunschweig (Germany)  

Amir LERMAN  
Division of Nephrology and Hypertension  
Mayo College of Medicine  
Rochester MN (USA)  

Lilach O. LERMAN  
Division of Nephrology and Hypertension  
Mayo College of Medicine  
Rochester MN (USA)
Thomas MACDONALD  
School of Medicine  
University of Dundee  
Dundee (United Kingdom)

Giuseppe MANCIA  
Department of Health Sciences  
University of Milano-Bicocca  
Milan (Italy)

Athanasios J. MANOLIS  
Department of Cardiology  
Hospital of Asklepeion  
Athens (Greece)

Tony R. MERRIMAN  
Biochemistry Department  
School of Medical Sciences  
University of Otago  
Dunedin (New Zealand)

Giovanni MINISOLA  
Rheumatology Unit  
San Camillo Hospital  
Rome (Italy)

Ignazio B. OLIVIERI  
Rheumatology Department of Lucania  
San Carlo Hospital of Potenza and  
Madonna delle Grazie Hospital of Matera (Italy)

Paolo PAULETTO  
Department of General Medicine  
Ca’ Foncello Hospital  
Treviso (Italy)

Fernando PEREZ RUIZ  
Rheumatology Division  
Cruces University Hospital  
Vizcaya (Spain)

Roberto PONTREMOLI  
Department of Internal Medicine and Medical Specialties  
University of Genova  
Genoa (Italy)

Leonardo PUNZI  
Rheumatology Unit  
Department of Medicine  
Medical School  
University of Padua  
Padua (Italy)
Luis Miguel RUILOPE
Hypertension Unit
Hospital 12 de Octubre
Madrid (Spain)

Hiroyuki SAKURAI
Department of Pharmacology and Toxicology
School of Medicine
Kyorin University
Tokyo (Japan)

Yugo SHIBAGAKI
Department of Internal Medicine
Division of Nephrology and Hypertension, Dept. of Internal Medicine
St Marianna University School of Medicine
Kanagawa (Japan)

Austin STACK
Department of Nephrology
University Hospital Limerick
Limerick (Ireland)

Stefano TADDEI
Department of Internal Medicine
University of Pisa
Pisa (Italy)

Massimo VOLPE
Cardiology Unit
Department of Cardiothoracic and Vascular Science
Faculty of Medicine and Psychology
Sapienza University of Roma
Rome (Italy)

Carmine ZOCCALI
CNR-IFC
Clinical Epidemiology of Renal Diseases and Hypertension
Reggio Calabria (Italy)