



Fondazione Mondo Respiro
Centro Studi per le malattie respiratorie - Onlus

9th INTERNATIONAL CONFERENCE ON MANAGEMENT & REHABILITATION OF CHRONIC RESPIRATORY FAILURE

The Integrated Care of the
Cardiorespiratory Patient:
from Critical Care
into the Community

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I H o t e l R e g i n a P a l a c e

SCIENTIFIC *Program*

The Integrated Care of the Cardiorespiratory Patient: from Critical Care into the Community

CONFERENCE | TIME

| | |
|--------------------|---------------------|
| Thursday, March 26 | from 10.00 to 18.00 |
| Friday, March 27 | from 9.00 to 18.30 |
| Saturday, March 28 | from 8.30 to 16.30 |

OPENING CEREMONY

Thursday, March 26
18.30-20.00

CONFERENCE REGISTRATION FEES

| | Costs (EUR) * |
|--|---------------|
| Non Members | 680,00 |
| Members of Societies (AIPO / ARIR / CHEST / ERS) | 480,00 |
| Young (under 40) Members and non Members | 350,00 |

The Conference Registration Fee includes:

- ◆ Participation to the Scientific Program
- ◆ Congress bag
- ◆ Attendance Certificate
- ◆ CME credits
- ◆ Opening Ceremony on March 26, 2020
- ◆ Lunches

- The above costs don't include 22% VAT

CONFERENCE WEBSITE

www.sintexservizi.it

SCIENTIFIC SECRETARIAT



Via Mons. Caviglioli, 10 | 28021 Borgomanero (NO)
☎ +39 0322 83 67 18
✉ vdonner@mondorespiro.it
🌐 www.mondorespiro.it

ORGANIZING SECRETARIAT

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Via A. da Recanate, 2 - 20124 Milano
☎ +39 02 66703640
✉ info@sintexservizi.it - 🌐 www.sintexservizi.it

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RATIONALE

In 1987 the first International Conference on the Management of Chronic Respiratory Failure was held in Veruno (Italy), thirty three years and 8 Conferences later much has changed, not only in regard to the organization of the Conference itself, but also the problems arising from chronic respiratory diseases have changed. Chronic respiratory diseases are among the most important causes of death in our society and their burden is constantly increasing. Over the last 20 years effective technical and pharmacological aids have been added to the tool-box of the chest physician, improving the life of patients both in terms of expectancy and quality. Obviously, this development of chest medicine has also had important repercussions on health resources consumption and currently there is a widespread debate on how to cope with the growing burden.

The International Conference on "Management and Rehabilitation of Chronic Respiratory Failure" - now in its 9th edition - is recognized as a key international scientific event in this specific field. The 2020 edition, which will be held in Stresa (Italy), will deal with new developments in respiratory medicine in the integrated care of the cardiorespiratory patient, focusing on the transition from critical care into the community, with particular attention to the possibilities of integration between specialists and primary care medicine.

The scientific contents will focus on the care optimization for this complex patient requiring:

- an individualized, patient-centered approach, recognizing and treating all aspects of the respiratory disease, its systemic effects and common co-morbidities; and
- integrating medical care among health care professionals and across the health care sector.

Optimal integration of medical care for COPD is still in its infancy, and its implementation will undoubtedly represent a paradigm shift in our thinking. In particular, the scientific program will describe in detail the specific components of disease management that apply to the complex chronic respiratory patient in the transition from critical care into the community, providing innovative examples programs originating from different health care systems. Our wish is that the commitment manifested by the Scientific and Organizing Committees - in their respective areas of competence - combined with the work of speakers, key opinion leaders in their specific field, will lead to a fruitful exchange of opinions among participants enabling us to realize that particular "mix" that will make this a unique scientific event.

CHAIRMAN

Claudio F. Donner

Fondazione Mondo Respiro
Centro Studi per le Malattie Respiratorie - Onlus
Borgomanero (NO)

SCIENTIFIC *Committee*

Chairman: Giuseppe U. Di Maria, Catania (Italy)
Nicolino Ambrosino, Montescano, PV (Italy)
Bruno Balbi, Veruno, NO (Italy)
Richard Casaburi, Torrance, CA (USA)
Bartolome Celli, Boston, MA (USA)
Enrico M. Cini, Modena (Italy)
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Jadwiga Wedzicha, London (UK)
Emiel F.M. Wouters, Maastricht (The Netherlands)
Richard ZuWallack, Hartford, CT (USA)

ORGANIZING *Committee*

Sandro Amaducci, Milano (Italy)
Mauro Carone, Cassano delle Murge, BA (Italy)
Giovanni Paolo Ligia, Cagliari (Italy)
Mirco Lusuardi, Correggio, RE (Italy)
Franco Pasqua, Nemi, RM (Italy)
Paolo Zamparelli, Sorrento, NA (Italy)
Alessandro Zanasi, Bologna (Italy)

CONGRESS *Timetable*

| | THURSDAY, 26 MARCH | | FRIDAY, 27 MARCH | | SATURDAY, 28 MARCH | | |
|-------------|--|---|---|---|--|--|-----------|
| TIME | ROOM 1 | ROOM 2 | ROOM 1 | ROOM 2 | ROOM 1 | ROOM 2 | |
| 08.30-09.00 | | | | | THE PATIENT NEEDING PROLONGED MECHANICAL VENTILATION | NUTRITIONAL ASSESSMENT IN PATIENTS SUFFERING FROM CHRONIC RESPIRATORY DISEASES | |
| 09.00-09.30 | | | EXTENDING PULMONARY REHABILITATION TO A WIDER AUDIENCE - PART 1 | | | | |
| 09.30-10.00 | | | | THE INTEGRATED CARE OF THE CARDIORESPIRATORY PATIENT: FROM CRITICAL CARE INTO THE COMMUNITY | SUCCESSFUL WEANING FOR PROLONGED MECHANICAL VENTILATION | BIG DATA AND E-HEALTH | |
| 10.00-10.30 | PULMONARY REHABILITATION FOR PATIENTS WITH CHRONIC RESPIRATORY DISEASE | MODIFYNG COPD PROGRESSION | EXTENDING PULMONARY REHABILITATION OR ITS COMPONENTS TO A WIDER AUDIENCE - PART 2 | | | | |
| 10.30-11.00 | | | | | | | |
| 11.00-11.30 | | | B R E A K | | | | |
| 11.30-12.00 | B R E A K | | | THE ADDED VALUE OF ALLIED HEALTHCARE PROFESSIONALS IN INTEGRATED RESPIRATORY CARE | B R E A K | | |
| 12.00-12.30 | ONGOING CHALLENGES IN PULMONARY REHABILITATION | THE CLINICAL RELEVANCE OF NON-RESPIRATORY SYMPTOMS IN PATIENTS WITH CHRONIC RESPIRATORY DISEASE | DIFFICULT PROBLEMS IN PULMONARY REHABILITATION. OR NOT? | | THE VENTILATOR-DEPENDENT PATIENT | ETHICS | |
| 12.30-13.00 | | | | | | | |
| 13.00-13.30 | | | L U N C H | | L U N C H | | L U N C H |
| 13.30-14.00 | L U N C H | | | TELE-MONITORING | | | |
| 14.00-14.30 | | | IS THERE A ROLE FOR REHABILITATION IN SEVERE ASTHMA? | | | | |
| 14.30-15.00 | INTEGRATING COMMUNITY CARE AFTER PR - PART 1 | COPD AND CHF: TWO OF A KIND? | | | COMPONENTES OF MANAGEMENT OF VENTILATORY DEPENDENT PATIENT | | |
| 15.00-15.30 | | | | | | | |
| 15.30-16.00 | | | B R E A K | | | | |
| 16.00-16.30 | B R E A K | | | WORLD WIDE ORGANIZATION | | | |
| 16.30-17.00 | INTEGRATING COMMUNITY CARE AFTER PR - PART 2 | COPD, AGEING AND CO-MORBIDITIES | EARLY MOBILIZATION AND PHYSIOTHERAPY | | | | |
| 17.00-17.30 | | | | | | | |
| 17.30-18.00 | | | | | HFO VS NIV | | |
| 18.00-18.30 | | | | | | | |

LEGEND | TRACKS

- COPD
- PULMONARY REHABILITATION
- MANAGEMENT OF CHRONIC RESPIRATORY FAILURE
- NEW MODALITIES IN MANAGEMENT OF CHRONIC SEVERE RESPIRATORY PATIENT

CALL FOR *Abstract*

SUBMISSION DEADLINE | DECEMBER 31, 2019

SUBMISSION INFORMATION | VIA EMAIL TO CONFERENCESTRESA2020@SINTEXSERVIZI.IT
Abstracts must be submitted in English and should report on results of truly original research that have not been published whole or in part elsewhere. The proposal will be reviewed according to the scientific content and ethical considerations.
The presenting Author must be registered as participant to the Conference.

Abstracts should have a clear hypothesis and methodology, list all authors' names and institutions, and designate a corresponding author.
The linguistic accuracy of the abstract is the responsibility of the authors.

By submitting an abstract, the Author agree with its publication.

GUIDELINES FOR ABSTRACT SUBMISSION | AVAILABLE AT CONFERENCE WEBSITE

SCIENTIFIC *Program*



ROOM 1

PULMONARY REHABILITATION FOR PATIENTS WITH CHRONIC RESPIRATORY DISEASE

10.00-11.30

How to organize pulmonary rehabilitation?

Effects of pulmonary rehabilitation in patients with COPD

Effects of pulmonary rehabilitation in patients with chronic respiratory disease other than COPD

How to integrate pulmonary rehabilitation in chronic care

Discussion

BREAK
11.30-12.00**ONGOING CHALLENGES IN PULMONARY REHABILITATION**

12.00-13.30

Barriers and facilitators of pulmonary rehabilitation

Physiological mechanisms behind the PR non-responder

UK Audit of pulmonary rehabilitation: does auditing really increase quality of life?

How to rehabilitate the most complex respiratory patients?

Five years after the ATS/ERS Policy Statement on Pulmonary Rehabilitation: what progress did we make?

Discussion

LUNCH
13.30-14.30**INTEGRATING COMMUNITY CARE AFTER PR – PART 1**

14.30-16.00

Community follow-up with activity monitoring

Self management in the post rehabilitation phase

Perspectives on barriers and facilitators to wellness maintenance in chronic disease

If you fail to change the patient, try working on his environment. Where are the walking trails?

Discussion

BREAK
16.00-16.30**INTEGRATING COMMUNITY CARE AFTER PR – PART 2**

16.30-18.00

Telehealth solutions at home, where have we failed and what is the future

Is it possible to conduct state of the art exercise training in severe patients at home?

Implementing self management in primary care

Self management interventions in COPD and CHF

Mental health issues in severe chronic respiratory disease

Discussion

ROOM 2

MODIFYING COPD PROGRESSION

10.00-11.30

COPD co-morbidities or multimorbidities: which and why

Is there a role for NIV in stable COPD?

Making sense of pharmacotherapy today

Beyond rehabilitation: can we improve the muscle dysfunction of COPD?

Discussion

THE CLINICAL RELEVANCE OF NON-RESPIRATORY SYMPTOMS IN PATIENTS WITH CHRONIC RESPIRATORY DISEASE

12.00-13.30

Anxiety and depression

Fatigue

Pain

How to assess relevant daily symptoms?

Discussion

COPD AND CHF: TWO OF A KIND?

14.30-16.00

COPD and concurrent cardiovascular comorbidities: prevalence and pathophysiology

Effects and therapies of acute symptoms in the complex COPD patient with exacerbation

Muscle weakness, exercise intolerance and psychological distress in patients with COPD and/or CHF

Effects of exercise-based rehabilitation programs in patients with COPD and/or CHF

Discussion

COPD, AGEING AND CO-MORBIDITIES

16.30-18.00

COPD a disease of accelerated aging: the evidence?

Multimorbidities in the elderly

OSA. A frequent treatable co-morbidity of the elderly

COPD, infection and cardiovascular disease

Discussion

ROOM 1

PRO / CON

EXTENDING PULMONARY REHABILITATION TO A WIDER AUDIENCE – PART 1

09.00-10.00

Pro - We can extend pulmonary rehabilitation yet maintain its effectiveness

Con - Let's not shoot ourselves in the foot by ruining a good thing!

Somewhere in-between - Should we re-define pulmonary rehabilitation?

Discussion

EXTENDING PULMONARY REHABILITATION OR ITS COMPONENTS TO A WIDER AUDIENCE – PART 2

10.00-11.00

Introduction - Societal needs in addressing chronic respiratory disease

Persuasive technology to promote exercise and physical activity in COPD patients

Using technology to help manage the COPD exacerbation

Home based pulmonary rehabilitation: state of the science

Monitoring and feedback in chronic respiratory failure

Discussion

BREAK
11.00-11.30**DIFFICULT PROBLEMS IN PULMONARY REHABILITATION. OR NOT?**

11.30-13.00

How do I train patients with very severe respiratory conditions?

How do I approach skeletal muscle wasted patients?

How do I choose the right airway clearance strategy for each patient?

Are patients with sleep-related respiratory disorders suitable for rehab?

Discussion

LUNCH
13.00-14.00**IS THERE A ROLE FOR REHABILITATION IN SEVERE ASTHMA?**

14.00-15.30

The role of education in severe asthma

The role of exercise training in severe asthma

Treatment adherence in severe asthma

Which is the best device for patients with severe asthma?

Discussion

BREAK
15.30-16.00

ROOM 2

THE INTEGRATED CARE OF THE CARDIORESPIRATORY PATIENT: FROM CRITICAL CARE INTO THE COMMUNITY

09.30-11.00

Multidisciplinary team management for acutely ill cardiopulmonary patients

Physical rehabilitation after critical illness

Chronic care and educational models into the community

Telemedicine in the management of complex cardiorespiratory patients

Discussion

THE ADDED VALUE OF ALLIED HEALTHCARE PROFESSIONALS IN INTEGRATED RESPIRATORY CARE

11.30-13.00

Occupational therapy: making daily life easier

Psychological counseling: train the brain!

Dietary counseling: the fatter the better?

The Nurse: the spider in the integrated respiratory care web?

Discussion

TELE-MONITORING

14.00-15.30

Sensors

Transmission of data

The controller

The future

Discussion

ROOM 1

EARLY MOBILIZATION AND PHYSIOTHERAPY

16.00-17.30

Assessment
Techniques
Setting and professionals
Results
Discussion

**PRO/CON
HFO VS NIV**

17.30-18.30

HFO
NIV
Discussion

ROOM 2

**ROUND TABLE
WORLD WIDE ORGANIZATION**

16.00-17.30

USA
Canada
Europe
Asia
Australia
Discussion

ROOM 1

**THE PATIENT NEEDING PROLONGED
MECHANICAL VENTILATION**

08.30-10.00

Definitions and epidemiology
Pathophysiology
Short and long-term physical, psychological and cognitive outcomes
Where after discharge?
Discussion

**SUCCESSFUL WEANING FOR PROLONGED
MECHANICAL VENTILATION**

10.00-11.30

Ventilatory strategies
Weaning protocols
Early mobilization and physiotherapy
Specialized weaning units
Discussion

BREAK
11.30-12.00**THE VENTILATOR-DEPENDENT PATIENT**

12.00-13.30

Pathophysiology
Settings
Reimbursement
Stakeholders' perspective
Discussion

LUNCH
13.30-14.30**COMPONENTS OF MANAGEMENT OF
VENTILATORY DEPENDENT PATIENT**

14.30-16.00

Indications, time and modalities of tracheostomy and decannulation
Nutritional support
Symptom management protocols
Best sedation protocols
Discussion

ROOM 2

**NUTRITIONAL ASSESSMENT IN PATIENTS
SUFFERING FROM CHRONIC
RESPIRATORY DISEASES**

08.30-10.00

Evaluation of body composition in patients with COPD
How body composition alterations interfere with COPD outcome
The effect of pulmonary rehabilitation and nutritional supplementation on body composition and outcomes
Discussion

BIG DATA AND E-HEALTH

10.00-11.30

What to do with so much information?
Validity of the data
How to interpret data
Legal issues
Discussion

ETHICS

12.00-13.30

Who decides
Legal issues
Economic issues
Ethics and end of life: the role of religions
The role of media
Discussion

INVITED Speakers & Chairmen

CME Information

Sandro Amaducci, Milan (Italy)
Nicolino Ambrosino, Montescano, PV (Italy)
Raffaele Antonelli Incalzi, Rome (Italy)
Patrizio Armeni, Milan (Italy)
Bruno Balbi, Veruno, NO (Italy)
Petronilla Battista, Cassano delle Murge, BA (Italy)
Stefano Belli, Veruno, NO (Italy)
Signe B. Bentsen, Stavanger (Norway)
Jean-Christian Borel, Grenoble (France)
Jean Bourbeau, Montreal (Canada)
Alberto Braghiroli, Veruno, NO (Italy)
Fulvio Braidò, Genova (Italy)
Chris Burtin, Hasselt (Belgium)
Alberto Capozzolo, Cassano delle Murge, BA (Italy)
Mauro Carone, Cassano delle Murge, BA (Italy)
Richard Casaburi, Los Angeles, CA (USA)
Bartolome Celli, Boston, MA (USA)
Piero Ceriana, Pavia (Italy)
Giulia Chiappini, Veruno, NO (Italy)
Enrico M. Cline, Modena (Italy)
Gerard Criner, Philadelphia, PA (USA)
Francesco de Blasio, Naples (Italy)
Raffaele Dellacà, Milan (Italy)
Giuseppe U. Di Maria, Catania (Italy)
Claudio F. Donner, Borgomanero, NO (Italy)
Juan Escarrabill, Barcelona (Spain)
Frits M.E. Franssen, Horn/Maastricht (The Netherlands)
Pamela Frigerio, Milan (Italy)

Judith Garcia Aymerich, Barcelona (Spain)
Yvonne Goertz, Horn (The Netherlands)
Roger Goldstein, Toronto (Canada)
Miguel R. Gonçalves, Porto (Portugal)
Rik Gosselink, Leuven (Belgium)
Cesare Gregoretti, Palermo (Italy)
Jean Paul Janssens, Geneva (Switzerland)
Fulvio Julita, Agrate Conturbia, NO (Italy)
Federico Lavorini, Florence (Italy)
Mirco Lusuardi, Correggio, RE (Italy)
François Maltais, Montreal (Canada)
Jose Maria Marin, Zaragoza (Spain)
Paula Meek, Denver, CO (USA)
Roberto Mordacci, Milan (Italy)
Mike Morgan, Leicester (UK)
Patrick Murphy, London (UK)
Stefano Nava, Bologna (Italy)
Paolo Navalesi, Catanzaro (Italy)
Linda Nici, Providence, RI (USA)
Paolo Palange, Rome (Italy)
Mara Paneroni, Lumezzane, BS (Italy)
Paolo Pelosi, Genova (Italy)
Amanda J. Piper, Sidney (Australia)
Lara Pisani, Bologna (Italy)
Michael Polkey, London (UK)
Milo Puhan, Zurich (Switzerland)
Chiara Rabbito, Bologna (Italy)
Josep Roca, Barcelona (Spain)

Carolyn Rochester, New Haven, CT (USA)
Luca Scafi, Naples (Italy)
Annemie Schols, Maastricht (The Netherlands)
Simonetta Scalvini, Lumezzane, BS (Italy)
Louise Sewell, Coventry (UK)
Anita Simonds, London (UK)
Sally J. Singh, Leicester (UK)
Antonio Spanevello, Varese (Italy)
Martin Tobin, Chicago, IL (USA)
Jaap C.A. Trappenburg, Utrecht (The Netherlands)
Thierry Troosters, Leuven (Belgium)
Giuseppe Turchetti, Pisa (Italy)
Thys van der Molen (The Netherlands)
Job Van der Palen, Enschede (The Netherlands)
Lowie E.G.W. Vanfleteren, Gothenburg (Sweden)/Horn (The Netherlands)
Dina Visca, Tradate, VA (Italy)
Michele Vitacca, Lumezzane, BS (Italy)
Isabelle Vivodtzev, Grenoble (France)
Andreas von Leupoldt, Leuven (Belgium)
Jadwiga Wedzicha, London (UK)
Jennifer Ann Wi, Manila (Philippines)
João Carlos Winck, Porto (Portugal)
Emiel F.M. Wouters, Maastricht (The Netherlands)
Richard ZuWallack, Hartford, CT (USA)

INTERNATIONAL CME ACCREDITATION

EACCME (EUROPEAN ACCREDITATION COUNCIL FOR CONTINUING MEDICAL EDUCATION)



Following the evaluation of the European Board of Accreditation in Pneumology (EBAP), the 9th International Conference on Management & Rehabilitation of Chronic Respiratory Failure will be accredited by EBAP. Conference will be accredited for physicians.

AMA (AMERICAN MEDICAL ASSOCIATION)



The UEMS-EACCME has a mutual recognition agreement with the American Medical Association (AMA). The AMA will convert CME credit issued to physicians for participation in live and e-learning activities certified by the European Accreditation Council for Continuing Medical Education (EACCME), the accrediting arm of the UEMS, to AMA PRA Category 1 Credit.

ITALIAN CME ACCREDITATION



The 9th International Conference on Management & Rehabilitation of Chronic Respiratory Failure will be accredited to provide Continuing Medical Education (CME) for Italian physicians. SINTEX SERVIZI - Provider 4921 EDUCATIONAL PLAN 2020

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