Southern California Symposium
IDIOPATHIC PULMONARY FIBROSIS AND PULMONARY COMPLICATIONS OF SCLERODERMA

Cedars-Sinai Medical Center
Harvey Morse Conference Center
Plaza Level, South Tower
8701 Gracie Allen Drive
Los Angeles, CA

October 5, 2013

Jointly sponsored by Cedars-Sinai Medical Center and the California Thoracic Society
Course Description

The goal of this jointly sponsored symposium is to gather experts, share best practices, current cases and discuss treatment and management of two, difficult-to-manage and related diseases. Both have seen recent, significant changes in appropriate management.

IDIOPATHIC PULMONARY FIBROSIS is the most common interstitial lung disease, and its frequency is increasing. Most community based pulmonary physicians see new cases every year, but some of the key treatment recommendations have been invalidated by recently published studies, leaving pulmonary physicians without guidance on how to manage this condition.

PULMONARY COMPLICATIONS OF SCLERODERMA Pulmonary involvement is a frequent complication of rheumatoid arthritis, scleroderma, lupus and other collagen vascular diseases. In fact, for scleroderma it is one of the main causes of mortality. Patients with scleroderma develop both pulmonary hypertension requiring therapy and interstitial lung disease, which may also require treatment. Interestingly, different subgroups of patients seem to develop either pulmonary hypertension or interstitial lung disease.

Target Audience

This symposium is designed for all who provide care for patients with lung diseases, including pulmonary and critical care medicine physicians, rheumatologists, pulmonary medicine trainees, advanced-practice nurses, and respiratory therapists.

Educational Objectives

- Avoid open lung biopsy in patients with high resolution chest CT showing a UIP pattern and a clinical presentation consistent with IPF
- Gain multidisciplinary input for establishing a diagnosis in patients with whom the diagnosis remains unclear after high resolution chest CT and surgical biopsy
- Use the GAP system to prognosticate survival in patients with newly diagnosed idiopathic pulmonary fibrosis
- Develop an appropriate plan of pulmonary function testing and clinical/radiologic follow up for patients with idiopathic pulmonary fibrosis
- Avoid treating IPF patients with treatments that were until recently standard of care but which have now been shown to be ineffective
- Use new treatments with some evidence of benefit in selected patients and refer their other patients for enrollment in clinical trials
- Prescribe appropriate medical treatment for scleroderma related interstitial lung disease
- Identify the clinical course of untreated scleroderma lung disease
- Appropriately screen for scleroderma associated pulmonary hypertension
- Initiate appropriate therapy for scleroderma associated pulmonary hypertension
- Decide when to initiate therapy in patients with scleroderma associated interstitial lung disease
- Order appropriate tests to stratify a patient’s risk for scleroderma associated interstitial lung disease
Decide when to initiate therapy in patients with scleroderma associated interstitial lung disease.

Initiate appropriate therapy for scleroderma associated pulmonary hypertension.

- Appropriately screen for scleroderma associated pulmonary hypertension.
- Identify the clinical course of untreated scleroderma lung disease.
- Prescribe appropriate medical treatment for scleroderma related interstitial lung disease.
- Use new treatments with some evidence of benefit in selected patients and refer for consideration.
- Avoid treating IPF patients with treatments that were until recently considered standard of care but which have now been shown to be ineffective.

Gain multidisciplinary input for establishing a diagnosis in patients with whom the clinical manifestation and pattern of each physician or other healthcare practitioner to determine the applicability or relevance of the clinical manifestation and pattern.

Educational Objectives:
- To educate medicine trainees, advanced-practice nurses, and respiratory therapists including pulmonary and critical care medicine physicians, rheumatologists, pulmonary and rheumatology fellows, and fellows in training in the role of the physician and the importance of a multidisciplinary approach to care of patients with interstitial lung disease and scleroderma.
- To educate physicians in the role of the respiratory therapist in patient care.
- To promote the importance of collaborative relationships among all members of the health care team.

Target Audience:
- Pulmonary and critical care medicine physicians
- Rheumatologists
- Pulmonary and rheumatology fellows and trainees
- Respiratory therapists
- Other healthcare practitioners involved in the care of patients with interstitial lung disease and scleroderma

Pulmonary involvement is a common feature of scleroderma. Patients seem to develop either pulmonary hypertension or interstitial lung disease. Interestingly, different subgroups of patients with scleroderma develop both pulmonary hypertension requiring therapy and interstitial lung disease, which may also require treatment. Patients with scleroderma develop both pulmonary hypertension requiring therapy and interstitial lung disease, which may also require treatment. In fact, for scleroderma it is one of the main causes of mortality. Patients with idiopathic pulmonary fibrosis (IPF) are more likely to have symptoms that respond to treatment than do those with other forms of interstitial lung disease. IPF can be a serious and life-threatening disease, and early diagnosis and treatment are essential.

Course Description:
- Making the Diagnosis of IPF
  Paul Noble, MD, Chairman, Department of Medicine, Cedars-Sinai Medical Center
- How Would You Treat this Patient? Panel Discussion
  Talmadge E. King, MD, Julius R. Krevans Professor and Chair, Department of Internal Medicine, UC San Francisco
- Treating Patients with IPF
  Joseph P. Lynch III, MD, Hickman Professor of Advanced Lung Disease and Transplantation, UCLA School of Medicine
- Multidisciplinary Input for Patients with ILD via the Internet
  Pierre Theodore, MD, Van Auken Associate Professor, UCSF

Calling all Residents and Fellows!
Come attend the first-ever CTS Job Fair! Held during the extended lunch hour, this is a unique and rare opportunity to introduce third-year pulmonary fellows from local programs to practicing physicians who are looking to recruit new associates to their practices.

Round Table “Meet the Professors” Lunch Discussions
You are invited to make the most of this educational activity by participating in lively and thought-provoking round-table lunch discussions with the course faculty. This is a great opportunity for smaller group discussion, debate and dialog in an informal, collegial setting.
Decide when to initiate therapy in patients with scleroderma associated interstitial lung disease.

- Initiate appropriate therapy for scleroderma associated pulmonary hypertension.
- Identify the clinical course of untreated scleroderma lung disease.
- Avoid treating IPF patients with treatments that were until recently thought to be beneficial.
- Develop an appropriate plan of pulmonary function testing and clinical/radiologic follow-up for patients with idiopathic pulmonary fibrosis.
- Use the GAP system to prognosticate survival in patients with newly diagnosed idiopathic pulmonary fibrosis.
- Gain multidisciplinary input for establishing a diagnosis in patients with whom the diagnosis is in doubt.

Educational Objectives

- To provide an overview of the clinical challenges and recent advances in the management of interstitial lung disease and pulmonary hypertension associated with connective tissue disorders.
- To discuss the management of idiopathic pulmonary fibrosis, including the use of the GAP system for prognostication.
- To update participants on the latest research and evidence-based practices in the care of patients with interstitial lung disease and pulmonary hypertension.
- To facilitate the development of a multidisciplinary approach to the care of patients with interstitial lung disease and pulmonary hypertension.

Target Audience

This symposium is designed for all who provide care for patients with lung diseases, including pulmonary and critical care medicine physicians, rheumatologists, pulmonary rehabilitation specialists, respiratory therapists, and other healthcare professionals with an interest in lung diseases.

Course Description

A full day of presentations and hands-on learning sessions designed to enhance the diagnostic and therapeutic skills of healthcare providers. Case presentations, interactive workshops, and round-table discussions with experts in the field will provide a comprehensive understanding of the latest advances in the management of interstitial lung disease and pulmonary hypertension.

COURSE SCHEDULE

- 8:00 – 8:15 am Welcome & Pre-Test
- 8:15 – 8:30 am Case Presentation: Pulmonary Fellow from Cedars-Sinai
- 8:40 – 9:20 am Making the Diagnosis of IPF
- 9:20 – 9:30 am Discussion
- 9:30 – 10:15 am Lunch and Round Table “Meet the Professors” Lunch Discussions
- 10:20 – 10:40 am BREAK
- 10:40 – 11:10 am Insights from the Scleroderma Lung Study
- 11:10 – 11:25 am Case Presentation: Scleroderma and Rheumatoid Arthritis
- 11:25 – 11:40 am Case Paper: Pulmonary Hypertension
- 11:40 – 11:55 am Discussion
- 11:55 – 12:40 pm Working lunch and CME examination
- 12:40 – 1:00 pm Multidisciplinary Input for Patients with ILD via the Internet
- 1:00 – 1:15 pm Break
- 1:15 – 1:55 pm How Do You Manage IPF Patients?
- 1:55 – 2:10 pm Pre-Test & Introduction
- 2:25 – 3:10 pm Insights from the Scleroderma Lung Study—continued
- 3:10 – 3:25 pm Session Break
- 3:25 – 4:05 pm The Clinical Spectrum of Pulmonary Hypertension
- 4:05 – 4:20 pm Break
- 4:20 – 5:00 pm Closing Discussion, Comments & Post-Test

Continuing Medical Education Credits

Accreditation Statement

This activity has been planned and implemented in accordance with the Essential Areas and Policies of the Accreditation Council for Continuing Medical Education (ACCME) through the joint sponsorship of Cedars-Sinai Medical Center and the California Thoracic Society. Cedars-Sinai Medical Center is accredited by the ACCME to provide continuing medical education for physicians.

Credit Designation Statement

Cedars-Sinai Medical Center designates this live activity for a maximum of 7.75 AMA Category 1 Credits™. Physicians should claim only the credit commensurate with the extent of their participation in the activity.

Nursing Credit

CTS has been approved by the California Board of Registered Nursing, Provider Number 599 for 7.75 hours.

Respiratory Care Practitioner Credit

This CTS course meets the requirements for CE for RCPs in California for 7.75 hours.

Policy on Disclosure

It is the policy of Cedars-Sinai Medical Center to ensure balance, independence, objectivity, and scientific rigor in all of its educational activities. Cedars-Sinai Medical Center assesses conflict of interest with its faculty, planners and managers of CME activities. Conflicts of interest that are identified are resolved by reviewing that presenter’s content for fair balance and absence of bias, scientific objectivity of studies utilized in this activity, and patient care recommendations.

While Cedars-Sinai Medical Center endeavors to review faculty content, it remains the obligation of each physician or other healthcare practitioner to determine the applicability or relevance of the information provided from this course in his or her own practice.

Hotel Reservations, Lodging and Parking

The most convenient places to stay are the Sofitel Los Angeles (www.sofitel.com) and SLS Hotel at Beverly Hills (www.slshotels.com). These hotels are within walking distance of medical center. When making reservations, please mention that you are attending a conference at Cedars-Sinai to ensure you are receiving the best current reservation rate.

Complimentary self-parking is available at the medical center in the visitor parking lots P1, P2 (George Burns Road), or P4 (Sherbourne Drive). We are unable to validate for those parking in the Cedars-Sinai Medical Office Towers parking structures.

Exhibiting

Vendor companies interested in exhibiting, please refer to the CTS website www.calthoracic.org for more details including exhibit hours and exhibitor registration. You can also contact CTS at 415-536-0287 or email info@calthoracic.org.
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REGISTRATION FEES

- CTS Physician Member $225 ($250 onsite)
- NP/RT/Retired/Senior Member $125 ($150 onsite)
- Non-Member Physician $275 ($295 onsite)
- Non-Member Non-Physician $150 ($175 onsite)
- Fellows: $75

*Members qualify for discounted registration rates. To renew your CTS membership, or if interested in joining CTS, go to www.calthoracic.org

Cancellations

No refunds or cancellations after September 15, 2013. Substitute attendees are permitted after September 15.

Payment

- Check Enclosed (payable to California Thoracic Society)
- Charge: □ Visa □ MasterCard □ AMEX

Mail completed form with payment to:
California Thoracic Society (CTS)
575 Market Street, Suite 2125
San Francisco, CA 94105
Register on-line at www.calthoracic.org

Questions: Contact CTS, (415) 536-0287, info@calthoracic.org, or www.calthoracic.org
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