Abstract Submission Form

The Women's Heart Center Program Committee is accepting abstract submission forms through **August 16, 2024**. Completed forms should be emailed to WHC@TheChristHospital.com.

Abstract submissions should be gender- and sex-specific research pertaining to one of the program topics outlined below.

The Program Committee wishes to encourage young scientific investigators and will reward up to 4 abstracts/posters submitted by presenters considered early career (definition provided below). First place will receive $1000, second place will receive $500, and two honorable mentions will each receive $250.

The presenting author will be sent an email with the status of the submission by **August 30, 2024**. If your abstract is accepted, your notification will contain complete presentation information. However, please note the following:

- All human subject research must conform to the principles of the Declaration of Helsinki of the World Medical Association.
- The presenting author should be able to provide documentation of IRB approval if requested.
- The Program Committee is unable to reimburse presenters for travel, hotel, or per diem expenses.
- Submission of an abstract constitutes a commitment by the presenting author (or designee) to present in-person at the symposium on October 11, 2024, during the following times:
    - Registration & Networking: 7:00 – 8:00 am
    - Networking Lunch: 12:00 – 1:00 pm
    - Poster Session Award Announcement: 3:40 – 4:00 pm
- All accepted abstract presenters must register for the symposium via Eventbrite and pay the applicable registration fees (trainees and invited speakers will have the registration fee waived).
- If an author wishes to withdraw an abstract, please email WHC@TheChristHospital.com.

Presenting Author Information

Name (First, Last, Credentials): Sue, Gibbons, RN MSN BCMAS
Institutional Affiliation: Kiniksa Pharmaceuticals
Email Address: sgibbons@kiniksa.com
Early Career (Defined as physicians, scientists, medical students, and other healthcare providers currently in residency or fellowship programs or within three years of training)? Yes ☐ No ☒

Co-author Information

Name: Sushil A. Luis Email: Luis.S@mayo.edu Affiliation: Department of Cardiovascular Medicine, Mayo Clinic, Rochester, MN, USA
Name: Paul C. Cremer Email: paul.cremer@northwestern.edu Affiliation: Northwestern University, Chicago, IL, USA
Name: Ajit Raisinghani Email: araisinghani@health.ucsd.edu Affiliation: Division of Cardiology, Department of Medicine, Sulpizio Cardiovascular Center, University of California San Diego, San Diego, California, USA
Name: Michael A. Portman Email: michael.portman@seattlechildrens.org Affiliation: Seattle Children's Research Institute, and Division of Cardiology, Department of Pediatrics, University of Washington, Seattle, Washington, USA
Name: Robert W. Biederman Email: Robert.biederman1@comcast.net Affiliation: Division of Cardiology, Allegheny Hospital, Pittsburgh, Pennsylvania, USA; West Virginia University, Morgantown, WV; Roper Hospital/Medical University of South Carolina, Charleston, SC
Name: Brittany Weber Email: bweber@bwh.harvard.edu Affiliation: Division of Cardiovascular Medicine, Department of Medicine, Brigham and Women's Hospital, Harvard Medical School, Boston, MA, USA
Name: David Lin Email: david.lin@allina.com Affiliation: Minneapolis Heart Institute at Abbott Northwestern Hospital, Minneapolis, Minnesota, USA
Name: Michael S. Garshick Email: michael.garshick@nyulangone.org Affiliation: Cardio-Rheumatology Program, Center for the Prevention of Cardiovascular Disease, NYU Langone Health, New York, NY, USA; Leon H. Charney Division of Cardiology, Department of Medicine, New York University School of Medicine, New York, NY, USA.
Name: Yueying Chen Email: Yueying.Chen@deltamedsolutions.com Affiliation: DeltaMed Solutions, Inc, Somerset, NJ, USA
Name: Allison Curtis Email: acurtis@kiniksa.com Affiliation: Kiniksa Pharmaceuticals, Lexington, Massachusetts, USA.
Name: Vidhya Parameswaran Email: vparameswaran@kiniksa.com Affiliation: Kiniksa Pharmaceuticals, Lexington, Massachusetts, USA.
Name: JoAnn Clair Email: jclair@kiniksa.com Affiliation: Kiniksa Pharmaceuticals, Lexington, Massachusetts, USA.
Name: Allan L. Klein Email: kleina@ccf.org Affiliation: Department of Cardiovascular Imaging, Center for the Diagnosis and Treatment of Pericardial Diseases, Heart and Vascular Institute, Cleveland Clinic, Cleveland, Ohio, USA
Name: John F. Paolini Email: jpaolini@Kiniksa.com Affiliation: Kiniksa Pharmaceuticals, Lexington, Massachusetts, USA.

Disclosures: Please list any relevant financial disclosures.

S.A. Luis: consultant fees from Kiniksa Pharmaceuticals, Cardiol Therapeutics, and Medtronic; P.C. Cremer: grants and consultant fees from Kiniksa Pharmaceuticals, grants and personal fees from Sobi; A. Raisinghani: consultant fees from Kiniksa Pharmaceuticals; M. Portman: consultant fees from Kiniksa Pharmaceuticals; R. W. Biederman: consultant fees from Kiniksa Pharmaceuticals, Bristol Myers Squibb, Janssen, and Lantheus; B. Weber: consultant fees from Kiniksa Pharmaceuticals; D. Lin: advisory board for Kiniksa Pharmaceuticals; M. S. Garshick: consultant fees from Kiniksa Pharmaceuticals; Y. Chen: no relevant disclosures; S. Gibbons, A. Curtis, V. Parameswaran, J. Clair and J. F. Paolini are shareholders and employees of Kiniksa Pharmaceuticals; A.L. Klein: grants and consultant fees from Kiniksa Pharmaceuticals, Cardiol Therapeutics, and Pfizer.

Abstract Topic (must be gender- or sex-specific)

☒ Preventative cardiology
☐ General cardiology
☐ Interventional cardiology
☐ Heart failure
☐ Cardio-oncology
☐ Cardio-obstetrics
☐ Electrophysiology
☐ Cardiovascular Imaging
☐ Coronary Microvasculature
☐ Social Determinants of Health
☐ Mental Health
☒ Precision Medicine

Title: Include the full title as it will appear on the poster.

Rilonacept Utilization in a Steroid-Sparing Paradigm for Recurrent Pericarditis: Real-World Evidence Demonstrating Increased Adoption

Background: In an initial paragraph, provide relevant information regarding the background and purpose of the study, preferably in no more than two to three sentences.

Recurrent pericarditis (RP) is a chronic autoinflammatory disease mediated by interleukin-1 (IL-1) requiring prolonged treatment, historically anchored on corticosteroids (CS) in refractory patients (pts). Early CS use may prolong disease, and long-term use accumulates side effects. RESONANCE, an ongoing 5-year, 500-pt US registry, has been collecting real-world RP data since 2021. We hypothesized that rilonacept availability in RP (2021) would enable a CS-sparing paradigm in pts failing NSAIDs/colchicine.

Methods: Briefly state the methods used.

Pt demographics, disease characteristics, and RP medication sequencing are reported (13 July 2023 cut) in 210 pts with complete data records from 272 active RP pts at 23 sites; median [IQR] 2.1 [1.5:2.5] years (424.5 PY) of observation.

Results: Summarize the results in sufficient detail to support the conclusions.

Mean age was 49.9 ± 15.9 years; 59.5% female. Time from index pericarditis episode was 3.4 [2.1:6.1] years. Of 202 pts with complete medication data, half (101) were managed with IL-1 pathway inhibition, of whom 73% (74) took rilonacept (Figure). Over 50% of pts starting rilonacept did so after NSAIDs/colchicine (Figure inset).

Conclusions: Concisely state the conclusions reached.

Whereas 2015 ESC guidelines position IL-1 pathway inhibitors after CS, real-world registry data since rilonacept availability in RP (2021) identify new adoption of a CS-sparing paradigm in RP, with rilonacept use directly after NSAIDs/colchicine. Long-term treatment for full RP duration may obviate iatrogenic complications of chronic steroid use and could inform future treatment guidelines.

Tables/Figures/Graphics: Include images that are part of your submission here. Images should be high resolution and have a file type of "gif", "jpg", or "jpeg".

Figure: Distribution of medication class use in total population (n=202 pts with non-missing data) and (inset) within the 6-month period prior to rilonacept initiation.