



All the World's a Stage..

*All the world's a stage
And all the men and women merely players
They have their exits and entrances
And one man in his time plays many parts..*



**CARDIOLOGICAL
SOCIETY OF INDIA
KERALA CHAPTER**

CSI Kerala 2024@Alappuzha

📅 November 2nd and 3rd, 2024

📍 Ramada by Wyndham Alleppey

Dear Teachers, Seniors, Colleagues and Friends,

Welcome to Alappuzha for the CSI Kerala Annual State conference on November 2nd and 3rd, 2024.

The Scientific Programme is inspired by *All the world's a stage* from William Shakespeare's *As you like it*. All the topics are based on curated real life case scenarios that we encounter during the practice of Cardiology.

Through a Five act structure that is characteristic of stage productions, the plot of each story will be handled by The Protagonist. Expert Stage Directors, Stage Managers and the Cast of Characters will steer the tales to their logical conclusions. Each segment is accompanied by a scenario that literally sets the stage for discussion. The academic content is intended to cover all genres of our beautiful subject. A focus session for DM/DNB Postgraduates on Echocardiography of Congenital Heart Disease is also being planned.

In addition to the scientific content that is the soul of the conference, the Saturday night vibe will continue with a Banquet & Music programme. Rekindle your love for sport with exciting Cricket matches between Travancore Tigers and Malabar Tuskers. The academic sessions will continue on Sunday morning and the conference will end with lunch, followed by a CSI Kerala Unity Cruise on the serene backwaters of the Venice of the East.

The stage is set. Get ready to play your part.

Warm regards
Team CSI Kerala



Dr. PB Jayagopal
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Dr. Deepak Davidson, Dr. Girish P V

ALL THE WORLD'S A STAGE



The 5-act structure

of a play is a format of dramatic structure commonly used in classical and Shakespearean dramas. It divides the narrative into five parts: exposition, rising action, climax, falling action, and resolution..



A protagonist

*(from Ancient Greek *prōtagōnistēs* 'one who plays the first part, chief actor') is the main character of a story.*

The protagonist makes key decisions that affect the plot, primarily influencing the story and propelling it forward..



A stage manager is an

individual who has overall responsibility for stage management and the smooth execution of a theatrical production.



A stage director or theatre director

is a professional who oversees and orchestrates the mounting of a theatre production such as a play or drama. The director's function is to unify and ensure the quality and completeness of..



Cast of characters

refer to a group of people who have important roles in a book, story, or event..



Denouement. *noun.*

The final resolution or conclusion of the intricacies of a plot, as of a drama or novel.

SATURDAY

SATURDAY

2 – 3 PM: Act I, Scene 1

Drugs for the Heart - I prescribe, therefore I am (8 min x 4)

Stage Directors: Dr VL Jayaprakash, Dr George Koshy

Stage Managers: Dr George Thayyil, Dr Cherian George

1 Finerenone in CKD and HF: Status update

The Protagonist: Dr Jabir A

52 year old gentleman. AAMI, post primary PCI. EF 44%.

Newly detected diabetes. Creatinine – 1.4 mg%, Urine albumin ++

2 Flecainide in AF – Prescription protocols

The Protagonist: Dr Narayanan Namboothiri

67 year old lady. Hypertension. Paroxysmal AF. Echo – mild LA dilatation.

Sinus bradycardia on metoprolol 25 mg OD. Palpitations.

3 Inclisiran & Co – Revolutionary Road
The Protagonist: Dr Thomas Mathew

63 year old lady. CABG 2 years ago. Mild AS then. On Rosuvastatin. Follow up LDL 376 mg/dl. Tendon xanthoma. Repeat echo – Severe AS.

4 Tafamidis – The Taming of Amyloidosis
The Protagonist: Dr Hisham Ahamed

56 year old lady. Diabetes. Retinopathy. ‘Mild’ CKD. Referred to Cardiology OP for ‘dyspnea and edema’ evaluation. Echo – suggestive of RCM.

Focus topic (10 min)

5 Pediatric Cardiac Drugs – A Primer for the Perplexed
‘Adult’ Cardiologist
The Protagonist: Dr Edwin Francis

The Duty Cardiologist at a multispecialty hospital with a strong Newborn Unit gets an emergency call – turns out to be a ductus dependent critical CHD. Plan – Prostaglandin. But how?

Discussion (till 2:55 PM)

3 – 4 PM: Act I, Scene 2

CAD – In the spotlight (8 m x 4)

Stage Directors: Dr Sagy Kuruttukulam, Dr Vinayakumar D

Stage Managers: Dr Leena Thomas, Dr Kapil R

1 Thrombolysis in current era – No time to die! The Protagonist: Dr Shifas Babu

64 year old cook from Tamil Nadu. Came to Kerala on a weekend with his assistant as part of a catering job. STEMI – IWMI. Can't afford primary PCI. No one to give consent too. Contacted brother – 'give some medication and send him back'.

2 Optimal sedation protocols during primary PCI – Lake placid The Protagonist: Dr Anil Balachandran

44 year old ambulance driver. STEMI – AWMI – Acute pulmonary edema. In Cardiac ICU. Restless, agitated. Planned for primary angioplasty.

3 CT calcium scoring – Time to include in 'Executive Health Check up Package'? The Protagonist: Dr Bino Benjamin

44 year old Techie from USA. Father – CAD, Post TAVR. Dyslipidemia. Wants a detailed cardiac evaluation before flying back next week.

4 TMT – Positive, negative and everything in between The Protagonist: Dr James Thomas

60 year old lady. Mother of the Neurologist at another hospital. 'Mild' Diabetes – 1 year. 'Mild' dyslipidemia – on irregular treatment – Rosuvastatin 5 mg. Recurrent chest pain – atypical. Bit of knee pain. Comes with TMT report – 'Borderline changes for inducible ischemia'.

Focus topic (10 min)

5 CTO Intervention: Why I am a Believer and Why You should be one too! **The Protagonist: Dr Prathap Kumar N**

50 year old gentleman. DLP. Was in the Gulf. Office job. NSTEMI while in Kerala. Echo – normal. CAG – LAD 90%, LCX 70% stenosis. Mid RCA – CTO with retrograde filling via collaterals. Patient not willing for CABG (as is the usual pattern!). LAD and LCX stented beautifully during index procedure. Staged RCA CTO PCI after 10 days - ‘failed’. Pursue complete revascularization or is OMT enough?

Discussion (till 3.55 PM)

4 – 5 PM: Act II, Scene 1

Pacemakers and Devices (8 m x 4)

Stage Directors: Dr Baiju R, Dr Shyam N

Stage Managers: Dr Ravi Cherian, Dr Anand Marthanda Pillai

1 Pocket closure and suturing techniques – A Refresher **The Protagonist: Dr. Jyothi Vijay**

32 year old Cardiologist. Planning the first independent permanent pacemaker implantation at a ‘single person centre’ for a 75 year old lady with complete heart block. Patient is in the Cardiac ICU, on temporary pacing.

2 Device infection - Prevention and treatment

The Protagonist: Dr Anees Thajudeen

60 year old male. Permanent pacemaker implantation for complete heart block. Comes back 3 weeks later with fever, pain and purulent discharge from PG site.

3 Subcutaneous ICD – When and how?

The Protagonist: Dr. Abhilash S P

40 year old officer in the Merchant Navy with ECG showing Brugada pattern. One episode of syncope while recovering from a short febrile illness. No VT on 3 day ECG monitoring.

4 Leadless pacemakers – From indications to safe practice

The Protagonist: Dr Arun Gopi

90 year old doctor from USA. Came to Kerala for vacation. Day 1: Emergency admission to Cardiac ICU with syncope, head injury – contusion and complete heart block. Have to catch the return flight in a week. Day 2: Leadless pacemaker implantation done. Day 3: Patient ‘all good’ and ready to fly.

Focus topic (10 min)

5 CRT & ICD interrogation on follow up: Essentials for the ‘Non-EP Cardiologist’

The Protagonist: Dr Ajith Thachil

79 year old gentleman. Recurrent HF hospitalization. EF 24%. Moderate MR. CAG – mild CAD. SR. LBBB. QRSd > 180 ms. Comes to Cardiology OP for follow up after CRT-D at an EP Centre. Brings the Technician’s report and a bunch of graphs.

Discussion (till 4:55 PM)

5 – 6 PM: Act II, Scene 2

Gadget Corner: How do I use? (8 min x 4)

Stage Directors: Dr PK Ashokan, Dr Sunitha Viswanathan

Stage Managers: Dr Sreekala P, Dr Sandeep George Villoth

1 Ultrasound for vascular access

The Protagonist: Dr Shafeeq Mattummal

‘Young’ interventional cardiologist comes back to Kerala after ‘one week observership programme’ abroad. Wishes to implement USG guided puncture for all coronary/peripheral procedures.

2 Guide extension catheters

The Protagonist: Dr Ashraf SM

1 AM. STEMI – AAMI. LV dysfunction. Diabetes. Calcific CAD. ‘Tough primary’. Mid LAD lesion. Stent not tracking despite predilatation and ‘push’.

3 Renal denervation

The Protagonist: Dr Ramesh Natarajan

82 year old gentleman. Hypertension. Creatinine – 1.6 mg%. 80 kg. BP 160/100 mm Hg - on ARB, diuretic, moxonidine, prazosin, isosorbide-dinitrate + hydralazine, nebivolol. Unhappy patient; ‘Doctor, I am fed up. Do something to control my BP instead of simply adding more drugs at each visit’.

4 Vascular closure devices

The Protagonist: Dr Deepak Davidson

17 year old student. Going to join Nursing School next month. Coarctation of aorta, hypertension. Undergoes aortic stenting via RFA. Procedure required 12 F access.

Focus topic (10 min)

5 My tool kit for Calcium modification in PCI – How to choose the right weapon?

The Protagonist: Dr CG Bahuleyan

78 year old gentleman. ACS. Culprit – LAD, PCI done with 1 DES. Planned for staged PCI to RCA in same admission. CAG: diffuse disease, 'heavy' calcium seen on fluoroscopy. 30% stenosis in proximal RCA, 80-90% stenosis in mid RCA and 70-80% stenosis in distal RCA.

Discussion (till 5:55 PM)

6 – 7 PM: Act II, scene 3

Panel discussion (25 min x 2)

1 Rheumatic fever prophylaxis - Challenges & Solutions

The Protagonist: Dr A George Koshy

Cast of Characters: Dr Abdul Khader, Dr Zulfikar Ahamed M, Dr Abhilash TG, Dr Arun Kumar G

30 year old lady from Alappuzha. On oral penicillin. 'Not getting 'Pentids/Kaypen' from any medical store'.

(Till 6:25 PM)

2 Management of IE

The Protagonist: Dr KU Natarajan

Cast of Characters: Dr RJ Manjuran, Dr Cibu Mathew, Dr S Praveen, Dr Vijo George

60 year old male. Fever. Vegetation on aortic valve. Moderate – severe AR. Pulmonary edema – improved. Sinus tachycardia. PR prolongation. On IV antibiotics. Day 6 – right leg pain with absent pulses.

(Till 6:55 PM)



ACT III, SCENE 1

7 PM

General Body Meeting for CSI Kerala members only (Main Hall)



ACT III, SCENE 2

7 to 8 PM

**Focus session for DM/DNB PGs:
Basics of Pediatric Echocardiography-CHD (Hall B)
The Protagonists: Dr Zulfikar Ahamed M,
Dr Arun Gopalakrishnan, Dr Shine Kumar**

SUNDAY

SUNDAY

9 – 10 AM: Act IV. Scene 1

Clinical scenes – Doctor's Dilemma (8 min x 4)

Stage Directors: Dr Sudhayakumar N, Dr Stigi Joseph

Stage Managers: Dr Mathew Abraham, Dr Anil Roby

1 Peripartum cardiomyopathy **The Protagonist: Dr Mathew Iype**

30 year old lady. Dyspnea on post delivery day 3 during first pregnancy. Echo – global LV hypokinesia – recovered. Wishes to conceive again after 7 years and comes to Cardiology OP for 'fitness'. What next?

2 Risk stratification in HCM **The Protagonist: Dr Salman Salahudeen**

A 50 year old bank manager is referred for cardiac fitness for hernia surgery. ECG shows LVH, VPCs. He is detected to have HOCM with a resting gradient of 40 mm Hg on echo. What next?

3 Hemochromatosis evaluation **The Protagonist: Dr Anoop Gopinath**

40 year old female with newly detected liver disease – biopsy result awaited. Diabetes. Dyspnea on exertion. AF. On Rivaroxaban. Menorrhagia. Echo – RA, LA dilated. What next?

4 AF in elderly **The Protagonist: Dr Bhima Shankar**

90 year old lady. Previous PCI with DES 7 years ago. On clopidogrel + apixaban. Anemia with Hb 7 g/dl. Stool occult blood positive. Apixaban stopped. Blood transfusion given. Not willing for GI endoscopy. Readmitted after 10 days with 'minor stroke'. What next?

Focus topic (10 min)

5 Cancer Therapy & Heart Failure: A Blueprint for the Cardiologist **Dr Harikrishnan S**

63 year old lady. Past history of cancer of the breast – treated with surgery, radiation and chemotherapy. Hypertension. On treatment with telmisartan and amlodipine. Presents with recent onset dyspnea on exertion. Hb 10 g/dl. Renal function – normal.

Discussion (till 9.55 PM)

Act IV, Scene 2

10 – 11 AM: Based on true stories: Speaker's Cut (8 min x 4)

Stage Directors: Dr Mohammed Musthafa PP, Dr Cherian Koshy

Stage Managers: Dr Vinod Thomas, Dr Showjad Mohamed

1 CAD and Pregnancy

The Protagonist: Dr Saritha Sekhar

42 year old lady. PhD at Europe. History of ACS, AAMI – PCI to LAD 2 years ago. Fair LV systolic function. Married recently. Wishes to conceive. On Ticagrelor, Aspirin, Rosuvastatin, Carvedilol, ARNI.

2 CAD and ICD

The Protagonist: Dr Rajesh Muraleedharan

68 year male. AAMI, Cardiac arrest – resuscitated, mechanically ventilated, PCI to LAD done. Functional class II now after 1 year. EF 32%. Anterior wall echogenic, partial loss of wall thickness. Holter – no VT.

3 Antiplatelet/Anticoagulant therapy after TAVR **The Protagonist: Dr Rajiv C**

78 year old lady. TAVR for severe symptomatic AS. Hb drop on day 2.
CT – pelvic hematoma. Blood transfusion. Aphasia on day 4, no weakness.
Stroke – moderate sized infarct.

4 The Economics of PCI – Is it time to go to New York? **The Protagonist: Dr Rony Mathew K**

50 year old Cardiologist and Entrepreneur, planning to set up his own
Cath Lab in Kerala. A bit worried about recent WhatsApp chats
on coronary infections too..

Focus topic (10 min)

5 TAVR – Treat PAD or consider Alternate access ? **The Protagonist: Dr Ashish Kumar**

80 year old gentleman. Severe AS. Recurrent hospitalization with pulmonary
edema. Planned for TAVR. Severe bilateral calcific PAD on CT.

Discussion (till 10:55 AM)

ACT V, SCENE 1



11 – 11.30 AM

INAUGURATION



11.30 – 12 PM

PRESIDENTIAL ORATION (20 min)

STEMI: A Journey of Three Decades

Dr. PB Jayagopal, President – CSI Kerala

**Chairpersons: Dr. K Venugopal, Dr. PP Mohanan,
Dr. Chacko KA, Dr. MN Krishnan**

Act V, Scene 2

12 - 1 PM

The Cardiologist Wants to Know! (8 min x 4)

Stage Directors: Dr. KP Balakrishnan,

Dr. Madhu Poulse

Stage Managers: Dr. Renjukumar BC,

Dr. Praveen Velappan

1 DCB vs DES in ISR

The Protagonist: Dr Sajan Narayanan

44 year old male. CAD – STEMI IWMI 4 years ago. Post Primary PCI to RCA. Recent effort angina – CAG – ISR of mid RCA (tubular lesion). Undergoes DCB treatment. Recurrent angina 4 months later. Re CAG – ISR again!

2 Anticoagulation vs Intervention for extensive DVT

The Protagonist: Dr Sreethal Rajan

35 year old lady. Recent delivery - LSCS. Comes with left lower limb swelling and pain 3 weeks after discharge. Extensive DVT on venous doppler. Hemodynamically stable. Echo- normal. Breastfeeding. Started on LMWH/Warfarin. 'Difficult' bystanders blaming the Gynecology Department.

3 MIDCAB vs PCI

The Protagonist: Dr Jayesh Bhaskaran

67 year old gentleman. Diabetic. Effort angina. CAG – LMCA trifurcation. Ostioproximal LAD 90% stenosis. Size mismatch – LMCA and LAD. Good LV function. PCI or MIDCAB or CABG?

4 Diet in CVD – How to prescribe a 'sustainable' heart friendly diet?

The Protagonist: Dr Mangalanandan P

42 year old doctor. Active. Decent weight. STEMI-IWMI-Primary PCI, good LV function. Used to prefer non vegetarian dishes and egg usually. Loves fruits, but 'almost hates' vegetables. Flaky hot porottas are a favorite, but likes dosa, appam, idli too. Doesn't eat rice regularly. Chapathi can be tolerated.

Focus topic (10 min)

5 Sex after MI and HF – From Bench to Bedside

44 year old male. Active member of a biking club. Develops AWWMI at Sweden. DES to LAD. OMT for ostial diagonal disease. EF 45% at follow up visit in God's own country after 1 month. Walks 2 km/day now. No angina. Last question before he leaves the OP: 'Doctor, can I ask you something..?'

The Protagonist: Dr Sujay Ranga

Discussion (till 12:55 PM)

Denouement



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