

» PROGRAM

6:30 – 7:00 p.m.

Dinner and Registration

7:00 – 7:25 p.m.

Keynote Address:

RAS Inhibition Offers Benefits Beyond Blood Pressure Control

Salim Yusuf, MB, DPhil – Hamilton, Ontario

7:25 – 7:45 p.m.

Debate 1: The Best Combination for Primary Prevention of CVD is:

- Statin and CCB
George Honos, MD – Montréal, Québec
- Statin and ACEI
Eva Lonn, MD – Hamilton, Ontario

7:45 – 8:05 p.m.

Debate 2: Controversies in Vascular Protection

- ACEI Should be Used in all CAD Patients
Peter Sleight, MD – Oxford, England
- ACEI Should be Tailored Based on the Risk of Each CAD Patient
G. B. John Mancini, MD – Vancouver, British Columbia

8:05 – 8:25 p.m.

Debate 3: Primary Prevention of Stroke is Best Achieved with:

- ACEI
Ross Feldman, MD – London, Ontario
- ARB
Jacques De Champlain, MD, PhD – Montréal, Québec

8:25 – 8:45 p.m.

Debate 4: Cardiometabolic Risk Reduction is Best Achieved Through:

- The Endocannabinoid System
Subodh Verma, MD, PhD – Toronto, Ontario
- The PPAR Gamma System
Gregory P. Bondy, MD – Vancouver, British Columbia

8:45 – 9:00 p.m.

Discussion:

All Patients with Diabetes Should be Treated with a Statin: Insight from CARDS and Beyond
Milan Gupta, MD – Brampton, Ontario



Canadian Cardiovascular Society

Cardiovascular Knowledge. Changing Lives.

This event is an Accredited Group Learning Activity (Section 1) as defined by the Maintenance of Certification program of The Royal College of Physicians and Surgeons of Canada. This program has been reviewed and approved by the Canadian Cardiovascular Society.

OCTOBER 21

CCC 2006 Satellite Symposium

Expert Opinions: Advances in Cardiology

Co-Chairs: Milan Gupta, MD & Subodh Verma, MD, PhD

Sponsors :



Life is over life's work



Saturday, October 21, 2006
6:30 p.m. – 9:00 p.m.

Vancouver Convention
and Exhibition Centre
Ballroom A-B
Vancouver, British Columbia

LEARNING OBJECTIVES

- » To examine the Benefits of RAS inhibition beyond blood pressure control;
- » To discuss the best treatment for vascular protection and the primary prevention of cardiovascular disease and stroke;
- » To determine the best method for cardiometabolic risk reduction;
- » To determine whether all patients with diabetes warrant treatment with a statin in light of recent clinical data.