

TSOC Adv HF Symposium
Surgical and Medical Approaches to Advanced Heart Failure

Date: 2026. 04.12 09:00-12:35

Location: 台北張榮發會議中心 7 樓 703 會議室

Time	Topic
09:00-09:05 (5mins)	Opening- 李貽恒(理事長)
09:05-09:30 (20mins+ 5minsQA)	<p>Current Status and Future Directions in Advanced Heart Failure Management</p> <p>Moderator: Prof. 林宗憲</p> <p>Speaker: Dr.洪崇烈(馬偕)</p> <p>Review the current global and regional burden of advanced heart failure</p> <ul style="list-style-type: none"> ➢ Summarize contemporary guideline-directed medical and device therapies ➢ Discuss surgical options and timing for advanced interventions (LVAD, transplantation) ➢ Explore emerging innovations and multidisciplinary care models shaping future management
09:30-10:20 (50mins)	<p>Transition Timing Between Medical and Surgical Therapy: Capturing the Optimal Intervention Window</p> <p>Moderator: Prof. 蔡建松、Prof. 高憲立</p> <p>Flow:</p> <p>1. Introduction (5min)-Moderator</p> <ul style="list-style-type: none"> ➢ Moderator introduces the topic, presenters and clarifies the goal: exploring perspectives, not declaring winners. <p>2.CV perspective(15mins)-王玟樺(高榮)</p> <ul style="list-style-type: none"> ➢ Importance of medical therapy and device interventions (CRT, TEER) in slowing disease progression ➢ Focus on risk control and optimizing quality of life <p>3.CVS Perspective(15mins)- Dr.宋世英(三總)</p> <ul style="list-style-type: none"> ➢ Highlights the impact of surgical options (LVAD, transplantation) on improving long-term outcomes. ➢ Warns that delayed transition can lead to irreversible right heart failure and multi-organ damage. ➢ Advocates for early intervention based on clinical indicators. <p>4.Audience Reflection(10mins)</p> <p>5.Summary(5mins)</p>
10:20-10:35 (15mins)	Break
10:35-11:40 (65mins)	<p>The Role of Devices in End-Stage Heart Failure: Complementary or Competitive?</p> <p>Moderator: Prof.謝宜璋、Prof.陳益祥</p> <p>Flow:</p> <p>1. Introduction (5 min)- Moderator</p> <ul style="list-style-type: none"> ➢ Moderator introduces the topic, presenters and clarifies the goal: exploring perspectives, not declaring winners. <p>2.CRT Perspective(15mins)-Dr.蔡維中(高醫)</p> <ul style="list-style-type: none"> ➢ Optimizing electrical resynchronization to improve cardiac function ➢ Patient selection criteria and timing for CRT in advanced HF ➢ Interaction with other device therapies <p>3.TEER Perspective(15mins)- Dr.陳科維(中國)</p> <ul style="list-style-type: none"> ➢ Role in reducing mitral regurgitation and improving symptoms ➢ Indications for TEER in advanced HF patients ➢ How TEER fits into the overall treatment algorithm <p>4.LVAD Perspective(15mins)-Dr.魏皓智(中榮)</p> <ul style="list-style-type: none"> ➢ Mechanical circulatory support as a bridge or destination therapy ➢ Timing of LVAD implantation to avoid irreversible organ damage ➢ Challenges and opportunities in integrating LVAD with prior device therapies

	<p>5.Audience Reflection(10mins)</p> <p>6.Summary(5mins)</p>
<p>11:40-12:30 (50mins)</p>	<p>Life Prolongation Strategies in Advanced Heart Failure: Young vs. Elderly</p> <p>Moderator: Prof. 李秉純、Prof. 許志新</p> <p>Flow:</p> <p>1. Introduction (5 min)- Moderator</p> <ul style="list-style-type: none"> ➤ Moderator introduces the topic, presenters and clarifies the goal: exploring perspectives, not declaring winners. <p>2. Young (<50 years) – (15mins):Dr.許博順(三總)</p> <ul style="list-style-type: none"> ➤ Heart transplant is the gold standard for young advanced HF patients, offering the best long-term survival and quality of life. ➤ Donor scarcity and allocation challenges make LVAD as a bridge-to-transplant essential to reduce waiting mortality. ➤ Early LVAD implantation prevents irreversible organ damage and improves outcomes. ➤ Technological advances in LVAD enhance durability, mobility, and lifestyle, supporting active living for younger patients. <p>3. Elderly (>70 years) – (15mins) Dr. Yoshiaki Minami (日本)</p> <ul style="list-style-type: none"> ➤ For elderly patients, the focus should shift to quality of life and goal-concordant care rather than aggressive interventions. ➤ Surgical options (HTx or LVAD) should be reserved for highly selected cases due to high operative risk and limited benefit. ➤ Maximizing GDMT and device-based therapies (CRT, TEER) is the preferred strategy for symptom relief and functional improvement. ➤ Ethical considerations and resource allocation favor prioritizing younger candidates for scarce donor organs. ➤ Shared decision-making ensures care aligns with patient values and end-of-life planning. <p>4.Audience Reflection(10mins)</p> <p>5.Summary(5mins)</p>
<p>12:30-12:35 (5mins)</p>	<p>Closing- 謝宜璋(秘書長)</p>