HEART CARE NEWS

We lead with heart

NORTHSIDE HOSPITAL HEART INSTITUTE

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Phone: 404-845-8200 | Website: northside.com/heart

Pioneering Intracardiac Thrombectomy

Urgent Institutional Review Board (IRB) approval for the use of the Emboliner® device was granted at Northside Hospital based on a complex cardiac patient case. The patient presented with a large ischemic stroke due to a mass on a septal occluder device following a prior mitral valve replacement. After being deemed ineligible for open-heart surgery because of significant comorbidities, the patient underwent a high-risk intracardiac thrombectomy by the Northside Hospital Heart Institute's (NHHI) Structural Heart team at Northside Hospital Gwinnett.

The procedure carried a high risk of embolic complications, including stroke. The Emboliner® device provided comprehensive embolic protection by functioning as a large intravascular net in the ascending aorta, capturing debris exiting the heart into the systemic circulation and thereby minimizing the risk of ischemic injury to end organs. Notably, this was the first use of the Emboliner® device at Northside Hospital and one of the first uses outside of a completed clinical trial site in the United States.

The intervention was successful, confirming a diagnosis of culture-negative endocarditis despite a thrombus and operating room cultures that were significant for *Serratia*. The patient recovered and is doing well after being discharged from a rehabilitation facility. Dr. Rahil Rafeedheen stated that this milestone reflects the growth of the NHHI as a premier destination for state-of-the-art cardiac care.

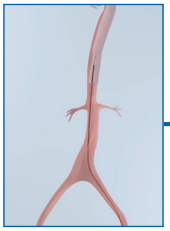

Image from emboline.com/product/

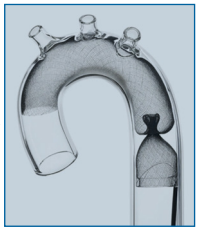

Image from linkedin.com/company/emboline-inc./

Acknowledgments

"I would like to extend my deepest gratitude to Dr. Manfred Sandler and Dr. Michele Voeltz for their invaluable mentorship and steadfast support. Dr. Sandler was my first point of contact; his trust in my ability to lead such a complex, first-of-its-kind case at Northside—combined with his tireless weekend efforts to secure necessary approvals—was pivotal. I am equally grateful to Dr. Voeltz, who served as an exceptional senior partner and mentor."

– Dr. Rahil Rafeedheen

Key Takeaways

- **Innovation:** First left-sided intracardiac thrombectomy at Northside Hospital and one of the first uses of the Emboliner device post-clinical trial in the U.S.
- **Clinical Success:** The Emboliner® provided full-body embolic protection, successfully preventing systemic injury during the removal of the infected mass.
- **Multidisciplinary Synergy:** Seamless coordination between interventional cardiology, cardiac surgery, anesthesia, legal and the IRB.

In This Issue

Clinical Trials and Research

Sponsor	Study/Protocol Number and Study Title	NCT Identifier
Conformal Medical, Inc.	**21-101 (CONFORM) ||** An Evaluation of the Safety and Effectiveness of the Conformal CLAAS System for Left Atrial Appendage Occlusion	NCT05147792
	Study Design • The study will evaluate the safety and effectiveness of LAA closure with the CLAAS System in participants with non-valvular atrial fibrillation who are at increased risk for stroke and systemic embolism. • A prospective, unblinded, randomized, multicenter, active controlled trial to evaluate the safety and effectiveness of the CLAAS System by demonstrating noninferiority against standard of care, commercially available LAA occlusion devices.	
Argá Medtech USA, Inc.	**CIP-001 (COHERENT-AF) ||** Coherent Sine-Burst Electroporation (CSE) Ablation System US IDE Study for Patients with Atrial Fibrillation	NCT06784466
	Study Design • A prospective, multi-center, global, non-randomized, unblinded pre-market study designed to provide clinical data to support regulatory approval of the Argá Medtech CSE Ablation System for the ablation of atrial fibrillation and adjunctive use for additional atrial ablation.	

Abbreviations: CLAAS=Conformal Left Atrial Appendage System; CSE=Coherent Sine-Burst Electroporation; IDE=Investigational Device Exemption; LAA=left atrial appendage; US=United States.

For more information on clinical trials at Northside Hospital Heart Institute, please scan the QR code, email clinical.trials@northside.com or call 404-303-3355.

Northside Hospital Heart Institute Research Team

Left to right: David Liu, Research Data Specialist; Lisa Barton, Research Data Coordinator; Lauren Beagle, Research Data Specialist; Renee Gaiter, Clinical Research Nurse; Anila Lokhandwala, Clinical Research Operations Manager; Troy Crain, Clinical Research Nurse; (Not pictured) Shannon Kanable-Smithson, Clinical Research Nurse

In the News: Updates for Clinicians

American College of Cardiology (ACC) 2026 Scientific Sessions: The Recap

Northside Hospital Heart Institute (NHHI) continues to solidify its reputation as a powerhouse in cardiovascular medicine through national meeting presence. At the ACC meeting held March 28-30, 2026, in New Orleans, clinical leaders from NHHI participated in critical conversations on the future of cardiac care.

Jason Grady, who represented NHHI on intersecting topics of technology and emergency systems, showcased Northside's commitment to staying ahead of the curve in both digital health and critical care logistics. Dr. Parham Eshtehardi highlighted Northside Hospital's focus on the most pressing public health challenges, specifically the cardiovascular maternal mortality crisis. Dr. J. Jeffrey Marshall represented NHHI in policy discussions and organized medicine, emphasizing the sustainability of the cardiovascular profession. Here are highlights from a few of the presentations:

Presentation	Speaker	Key Messages
Man vs. Machine: Are You Smarter Than the Algorithm? Risk Stratification	Jason Grady, NRP, AACC	• Artificial intelligence (AI) doesn't predict the future; it recognizes trajectory before it is seen • Be wise enough to use AI and confident enough to question it
Modern Approaches to Transferring Shock Patients	Jason Grady, NRP, AACC	• Shock transfers are high-risk and time-sensitive, beginning at the moment of the transfer decision, not when the transport unit arrives • Investment in resources, simulation, review and modern processes improves safety, speed and reliability of shock transfers

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American College of Cardiology (ACC) 2026 Scientific Sessions *(continued from page 2)*

Presentation	Speaker	Key Messages
High Performance, High Yield Systems for Sudden Cardiac Arrest	Jason Grady, NRP, AACC	• High-performance cardiac arrest care requires the same disciplined, system-level design that transformed ST-segment elevation myocardial infarction (STEMI). • Sustained progress comes from breaking siloes, standardizing best practices and driving continuous improvement.
Obstetric Care Deserts and the Rise of Cardiovascular Maternal Mortality	Parham Eshtehardi, MD	• Over 35% of U.S. counties are maternity care deserts (lacking obstetric care), with 150,000 births/year happening in these areas. • Obstetric care deserts are not just a geographic problem. They are delayed diagnosis, missed cardiovascular risk and ultimately, preventable maternal mortality.
Importance of Long-term CV Risk Reduction After Pregnancy in Patients with Cardiac Disorders	Parham Eshtehardi, MD	• For patients with cardiac disorders, pregnancy is not just an acute event that ends with delivery. It is often a major cardiovascular stress test that reveals future risk. • Pregnancy is temporary, but cardiovascular consequences may not be. • Pregnancy unmasks vulnerability; the postpartum period reveals persistent or emerging risk factors; and over time, those risk factors drive premature cardiovascular disease.

Jason Grady (left) and Dr. Parham Eshtehardi (right)

SCAI 2026 Scientific Sessions: Northside Hospital's Impact

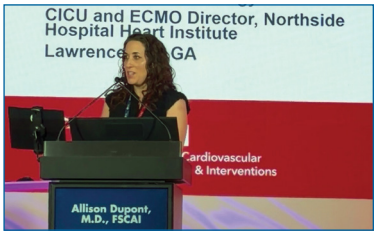
The Society for Cardiovascular Angiography & Interventions (SCAI) 2026 Scientific Sessions were held from April 23-25, 2026, in Montreal, Canada. Several Northside Hospital Heart Institute physicians attended the meeting. Drs. Allison Dupont, Fredy El Sakr and Cindy Grines actively participated in many of the presentations, case discussions, roundtables and lab sessions.

Dr. Dupont's first presentation, "Extracorporeal Membrane Oxygenation (ECMO) Bootcamp: What Every Operator Needs to Know," addressed key aspects of ECMO program setup, cannulation, circuit management, patient selection and troubleshooting techniques for ECMO support. In another session, "Wearing Lead Shouldn't be the Workout," she discussed the physical challenges of wearing lead during procedures, offered tips for lead-wearing training and examined how protective gear affects healthcare providers.

One of Dr. Grines' presentations, "Balancing bleeds and clots: Post-ACS PCI in the anticoagulated patient," detailed the assessment of bleeding and thrombotic risk in anticoagulated patients after PCI, how to select appropriate antithrombotic regimens based on patient profiles and guidelines, and how to design a management plan that balances safety and efficacy in complex cases. She also participated in discussions on navigating a lifetime in interventional cardiology, the latest updates in acute coronary syndrome (ACS) guidelines with a focus on practical application across diverse patient scenarios, and updates and challenges in interventional onco-cardiology.

SCAI Society for Cardiovascular Angiography & Interventions

2026 Scientific Sessions SUMMIT CAIC-ACCI Montreal • APRIL 23-25 Elevating Interventional Cardiology Together



Northside Hospital Takes the Stage at the Emergency Cardiovascular Care Conference (EC3)

EC3 serves as a collaborative forum and is hosted by the Georgia Chapter of the American College of Cardiology in partnership with the Georgia Nurses Association, the Georgia College of Emergency Physicians, the Georgia EMS Association and the Department of Public Health. This multidisciplinary event unites the entire continuum of care—from first responders in the field to clinicians managing long-term recovery.

The conference is dedicated to advancing the treatment of high-acuity cardiovascular conditions, with a specific emphasis on ST-segment elevation myocardial infarction (STEMI), cardiogenic shock and out-of-hospital cardiac arrest. By examining the latest evidence-based treatments and optimizing systems of care, EC3 empowers medical teams to improve patient outcomes through seamless coordination and clinical excellence.

The Northside Hospital Heart Institute team plays a pivotal role in steering the conference's clinical and educational direction, alongside Course Directors Dr. J. Jeffrey Marshall and Jason Grady and Program Committee members, Dr. Pradyumna "Prad" Tummala and Dr. Allison Dupont.

On March 12, 2026, the conference kicked off with an immersive simulation workshop featuring the latest industry devices used in emergency cardiac care. This session provided a unique opportunity for attendees to observe expert-led demonstrations, including Dr. Tummala who served as the expert operator for the Impella session and Dr. Dupont who led the session as the expert operator for extracorporeal membrane oxygenation.

From left to right: Julie Mack, Lezlie Valentine, Allison Dupont, MD, Jason Grady, Sarah Price, PA, Billie Slindie, VP NHHI, Jeff Marshall, MD, Jackie Sollogub.

Primary Care Summit: Hypertension & Hyperlipidemia in Women – Same Guidelines, Different Impact

By Courtney Bess, MD

I had the privilege of presenting at the 2026 Primary Care Summit on a topic that continues to underscore a significant and persistent gap in cardiovascular care: hypertension and hyperlipidemia in women. Although these conditions are managed according to shared, evidence-based guidelines for both men and women, there remains a consistent association with disparate clinical outcomes.

On initial consideration, the management of hypertension and hyperlipidemia appears well-defined and firmly established. Evidence-based guidelines delineate diagnostic thresholds, therapeutic targets, and pharmacologic strategies intended to standardize care and optimize outcomes. However, the assumption that uniform application of these guidelines yields uniform results is not consistently borne out in practice—particularly among women.

A growing body of evidence demonstrates that women are less likely to achieve optimal blood pressure and lipid control, even when actively engaged in care. This persistent gap reflects a multifactorial and interrelated set of influences:

- **Biological differences:** Sex-specific differences in vascular physiology, hormonal regulation, and lipid metabolism contribute to distinct and evolving cardiovascular risk trajectories in women. These factors not only influence baseline risk but also affect therapeutic response and disease progression across the lifespan.
- **Life-stage–specific risk:** Key periods – including pregnancy, the peripartum interval, and menopause – are associated with significant physiologic and metabolic changes that can alter cardiovascular risk. These dynamic shifts are not always adequately captured in traditional risk prediction models, which may underestimate long-term risk in women.
- **Underrecognized risk enhancers in women:** Female-specific and female-predominant conditions—such as hypertensive disorders of pregnancy (e.g., preeclampsia and gestational hypertension), gestational diabetes, polycystic ovary syndrome, endometriosis, uterine fibroids, premature menopause, and autoimmune or chronic inflammatory diseases (e.g., systemic lupus erythematosus and rheumatoid arthritis)—are increasingly recognized as important contributors to cardiovascular risk. However, they remain insufficiently integrated into routine risk assessment and management frameworks.
- **Pharmacologic variability and therapeutic considerations:** Sex-based differences in pharmacokinetics and pharmacodynamics can influence both efficacy and tolerability of antihypertensive and lipid-lowering therapies in women. Women may also experience a higher burden of certain medication-related adverse effects, which can impact adherence. Additionally, therapeutic options may be constrained during specific life stages, particularly pregnancy and lactation, necessitating careful selection and timing of pharmacologic interventions.

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Primary Care Summit: Hypertension & Hyperlipidemia in Women – Same Guidelines, Different Impact

(continued from page 4)

- **Treatment variability:** Despite comparable diagnoses, women may be less likely to receive timely initiation of guideline-directed medical therapy, appropriate treatment intensification, or consistent achievement of therapeutic targets. Differences in prescribing patterns, medication tolerance, and adherence may further contribute to this variability.

Collectively, these factors challenge the premise of standardized care, highlighting a critical gap between guideline intent and real-world outcomes.

Addressing this disparity necessitates a more deliberate and nuanced approach. While evidence-based guidelines remain foundational, their implementation must be informed by a comprehensive understanding of sex-specific risk, life stage influences, and the broader context in which patients receive care. This includes advancing the inclusion of women in clinical research, refining risk-stratification methodologies, and enhancing clinicians' awareness of differential disease patterns.

Key Takeaways

- Women with hypertension and hyperlipidemia continue to experience unequal clinical outcomes, even when managed in accordance with established guideline-directed care.
- Sex-specific biological differences contribute to distinct cardiovascular risk and treatment responses in women.
- Life stage-related changes (pregnancy, menopause) and female-specific or predominant conditions are underrecognized in risk assessment.
- Pharmacologic variability and treatment differences contribute to lower rates of therapeutic target attainment in women.
- Advancing equity in outcomes will require earlier and more accurate risk identification, coupled with a more precise and individualized application of evidence-based therapies.

Elevating the Patient Experience

The Latest Breakthroughs in Electrophysiology

By Yasser Rodriguez, MD and Alok Gambhir, MD, NHHI Medical Director Cardiac Electrophysiology

Northside Hospital Heart Institute (NHHI) is transforming atrial fibrillation (AFib) care through a specialized program centered on three pillars: advanced catheter ablation, high-volume electrophysiology (EP) expertise, and innovative stroke prevention. As the first hospital in Georgia to perform pulse field ablation (PFA), NHHI utilizes ultra-short electrical pulses to selectively treat heart tissue while minimizing risk to surrounding structures. This commitment to safety is further enhanced by leadership in fluoroless, radiation-free procedures and participation in elite clinical trials—such as Abbott's Volt™ PFA System—offering patients early access to next-generation cardiac technology.

Beyond rhythm control, NHHI provides advanced stroke-prevention alternatives for patients unable to tolerate long-term blood thinners. By utilizing Left Atrial Appendage Occlusion (LAAO) devices like WATCHMAN™ and Amplatzer™ Amulet™, physicians can seal off the source of potential blood clots, often during the same session as an ablation. These streamlined, multidisciplinary strategies ensure that patients throughout the Southeastern U.S. receive individualized, state-of-the-art care for the full spectrum of AFib management.

Additionally, NHHI is proud to introduce OPAL HDx™, Boston Scientific's next-generation cardiac mapping technology which integrates with their revolutionary FaraPulse™ pulse field ablation (PFA) technology.

"We performed our first case at Northside Hospital Gwinnett in January. OPAL HDx™ gives our electrophysiology team greater clarity and precision in treating heart rhythm disorders such as atrial fibrillation, so we can continue leading in innovative, safe and effective care for our patients."

– Dr. Alok Gambhir

Dr. Gambhir and the Northside Gwinnett EP lab team

Empowering Your Genetic Journey: Introducing the Cardio-Genetics Program

NORTHSIDE HOSPITAL CARDIOVASCULAR GENETICS PROGRAM

Bonnie Poteet is a cardiovascular genetic counselor who focuses on inherited heart disease. Following cardio-genetic–related loss in her own family, Bonnie was inspired to develop the Northside Hospital Cardiovascular Genetics Program. The program offers specialized risk assessment and genetic testing to help individuals identify and manage hereditary heart conditions, which are a leading cause of death. Since many issues—such as arrhythmias, aneurysms and cardiomyopathies—have a genetic component, early detection can be lifesaving by allowing for treatment before symptoms even begin. Key red flags for a hereditary link include early-onset heart disease, unexplained fainting or sudden, premature deaths in the family.

The process begins with an initial genetic counseling session where experts evaluate a three-generation family pedigree and educate patients on their testing options, insurance coverage and the implications of potential results. If a patient chooses to proceed, the program coordinates the testing and sample collection. During follow-up visits, counselors interpret the results to help guide personalized medical management, which may include increased surveillance, medication or "cascade testing" for at-risk relatives. Even if a genetic mutation isn't found, the program provides tailored screening recommendations based on family history to ensure proactive heart health.

"The value of a thorough family history cannot be overstated. When we see a patient, we're not just treating one individual; we are considering their entire family. The Northside Hospital Cardiovascular Genetics Program offers a comprehensive approach to care for patients and their families through genetic testing, ensuring they understand what to do if they have a hereditary condition and how it can affect them, their children and their significant others."

– Dr. Nirav Patel

To speak with a genetic counselor or Cardiovascular Genetics Program staff member, call 404-851-6284 or email cardio.genetics@northside.com.

Joining Forces: Launching the Cardio-Obstetrics Newsletter

In January, the Cardio-Obstetrics Team launched a new quarterly e-publication newsletter to ensure all five Northside Hospitals stay connected and also to provide non-Northside Hospital physicians with cardio-obstetrics initiatives and education.

Dr. Lee Padove, Kaitlin Vander Weide, RN, Program Coordinator, Cardio-Oncology and Cardio-Obstetrics and Bree Becker, NP Maternal Health Clinic, were the authors of this new e-publication.

Click here to view the Cardio-Obstetrics newsletter.

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Welcome to the Inaugural Edition of the Cardio-Obstetrics Newsletter

We are pleased to present the **first edition** of the *Cardio-Obstetrics Newsletter*, a e-publication developed to support providers in the care of women through pregnancy and the postpartum period.

This newsletter was established in recognition of the growing incidence and complexity of cardiovascular disease among obstetric populations, and the critical importance of multidisciplinary collaboration among providers.

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Each issue will feature clinical updates, educational resources, and institutional highlights relevant to cardio-obstetric care. Distributed **quarterly** in a digital format, this newsletter is intended to serve as an ongoing resource to foster communication, collaboration, and continued advancement in the management of cardiovascular disease in pregnancy and beyond.

Around Our Campuses and Community

Re-accreditation by the Intersocietal Accreditation Commission (IAC)

Northside Hospital Heart Institute was granted nuclear/positron emission tomography (PET) accreditation by the IAC. This re-accreditation was obtained by demonstrating the pursuit of excellence in documenting quality patient care in the field of myocardial perfusion imaging in Nuclear/PET.

ACCREDITED FACILITY · IAC INTERSOCIETAL ACCREDITATION COMMISSION · NUCLEAR CARDIOLOGY

"It is important to ensure that we are maintaining the highest standards of quality and consistency when carrying out advanced testing, such as nuclear Single-Photon Emission Computed Tomography and PET imaging of the heart. Results of these tests are vital to our ability to appropriately manage heart disease in our patients. Thus, this accreditation by the IAC reinforces our ability to produce meaningful results for our patients and their physicians."

– Dr. John Ricketts

Cardio-Oncology Gold Center of Excellence

Northside Hospital's Cardio-Oncology Program has been recertified as a Gold Center of Excellence by the International Cardio-Oncology Society (IC-OS) for an additional three-year term.

The IC-OS Gold Center of Excellence designation recognizes programs that demonstrate excellence in multidisciplinary collaboration, clinical quality, education, and patient-centered care in cardio-oncology. Recertification shows an ongoing commitment to the highest standards in cardiovascular care for patients undergoing cancer treatment and survivorship.

The program is a joint effort of the Northside Hospital Heart Institute and Northside Hospital Cancer Institute. Program goals are to reduce cardiovascular risk factors, prevent treatment delays, and minimize long-term heart complications in cancer patients and survivors.

Northside is one of three hospitals in Georgia—and the only community hospital—with this designation.

> *"Our goal is to ensure patients can receive life-saving cancer therapies while proactively minimizing cardiotoxicity during treatment and reducing long-term cardiovascular risk in survivors."*
>
> – Dr. Lalitha Medepalli, medical director of the Northside Hospital Cardio-Oncology Program and member of the IC-OS Education Committee

Avive Patient Reunion

In November 2025, Forsyth County leaders and healthcare partners from Northside Hospital gathered at the Cumming Recreation Center to celebrate the successful resuscitation of resident Vince Warren. This life-saving event was made possible by the 4 Minute Community Program, a collaborative initiative designed to bridge the critical time gap between a cardiac arrest and the arrival of professional first responders. By utilizing a secure mapping system, the program dispatches CPR-trained citizen volunteers, known as CARE team members, to emergencies within a one-mile radius. Equipped with Avive Connect AEDs, these volunteers can provide immediate intervention while emergency crews are still en route.

The ceremony specifically honored Mr. Warren and volunteer responder CK Villarouel, whose quick actions in July 2025 served as a powerful proof of concept for the initiative. Officials from Northside Hospital Forsyth and Avive Solutions praised the partnership for its innovative approach to community safety and cardiac readiness. As the program continues to expand throughout the region, leadership views the Forsyth County model as a potential national standard for improving cardiac arrest survival rates through technology, volunteerism and rapid response coordination.

From left to right: Jason Grady, NRP, FSCAI, AACC, Northside system manager for emergency cardiac care; Lynn Jackson, CEO of Northside Hospital Forsyth; Katerina Miras, vice president of marketing, Avive Solutions; Jason Shivers, division chief, Forsyth County Fire Department; Vince Warren, received emergency treatment with AED; CK Villarouel, Forsyth CARE team member; and Rory Beyer, president and COO, Avive.

Provider Features and Recognitions

Georgia ACC Annual Scientific Conference Lifetime Achievement Award

In November, 2025, the Georgia Chapter of the American College of Cardiology (ACC) honored Northside Hospital's own Dr. Henry Liberman with a Lifetime Achievement Award. A true pioneer who has shaped interventional cardiology since the early days of 1980s angioplasty, Dr. Liberman has been a vital part of the Northside Hospital team since 2020. Known affectionately by his colleagues as "Yoda" for his wisdom and mentorship, he is pictured here celebrating with fellow physicians and his gifted lightsaber in hand.

From left to right: Dr. J Jeffrey Marshall, Dr. Anna Kalynych, Dr. Liberman, Georgia ACC Governor Dr. Pascha Schafer, immediate past governor of Georgia ACC, Dr. Arthur Reitman and Dr. Michele Voeltz

Atlanta Business Chronicle's Innovator of the Year – Women's Health Champion Award

As part of its 2026 Health Care Champion Awards on March 19th, the Atlanta Business Chronicle named Christine "Bree" Becker the Innovator of the Year in Women's Health.

Bree, lead nurse practitioner for the Maternal Heart Health Clinic at the Northside Hospital Heart Institute, has spent the past decade at Northside Hospital specializing in cardiovascular conditions associated with pregnancy and the postpartum period.

Since 2021, she has helped grow the Maternal Heart Health Clinic from a part-time program into a multi-campus service that provides preventive care for women before and after childbirth.

"A lot falls within our realm of control," Bree said. "We can prevent most heart disease if we can avoid or treat chronic conditions like high blood pressure, high cholesterol or diabetes."

The annual awards recognize individuals and organizations making a significant impact on health care across metropolitan Atlanta.

Upcoming Education and Events

EDUCATION

Cardiovascular Update in the Primary Care Setting (CUPS) 2026
August 22, 2026, from 8 am to 3 pm @ Phase Event Center in Alpharetta, Georgia

2026 SCAI Shock National Meeting
September 17-19, 2026, in St. Louis, Missouri

CLASSES

Built To Quit – Smoking and Tobacco Cessation Course
Next six-week session start date: July 14, 2026
Weekly classes are led by a trained smoking and tobacco cessation facilitator.
Classes are available during afternoon and evening hours and remotely.

BUILT TO QUIT
Resources to help you stop smoking and using tobacco

SPONSORED COMMUNITY EVENTS

2026 Atlanta Heart Walk benefiting the American Heart Association
September 26, 2026, 7 a.m., @ Atlanta Station – Pinnacle Lot in Atlanta

American Heart Association. Heart Walk.

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