

BREAKING THE CYCLE:

Addressing Residual Inflammatory
Risk in ASCVD and CKD With
Next-Generation Targeted Therapies



Friday, November 7, 2025



5:30 – 7:30 PM

5:30 – 6:00 PM Dinner & Registration

6:00 – 7:30 PM Symposium



1.5 CE Credits



Armstrong Ballroom, 8 Floor

Sheraton New Orleans Hotel

**SCAN TO
REGISTER**



Faculty



Paul M. Ridker, MD, MPH

Course Director

Director of the Center for Cardiovascular Disease Prevention
Eugene Braunwald Professor of Medicine
Harvard Medical School
Boston, MA



Brendan M. Everett, MD, MPH

Associate Professor of Medicine
Harvard Medical School
Division of Cardiovascular Medicine
Brigham and Women's Hospital
Boston, MA



Binita Shah, MD, MS, FSCAI

Associate Professor of Medicine
Co-Director of Research, NYU Langone Heart
Director of Interventional Cardiology Research
NYU Langone Health
NYU Grossman School of Medicine
New York, NY

ACTIVITY OVERVIEW

Systemic inflammation plays a central role in the pathogenesis of atherosclerotic cardiovascular disease (ASCVD), particularly among patients with chronic kidney disease (CKD), and represents a significant contributor to residual risk among patients living with these comorbid conditions. Novel and emerging treatment options seek to target this residual risk; however, their integration into clinical care is challenged by suboptimal assessment of inflammatory risk in practice. For example, while high-sensitivity C-reactive protein (hsCRP) is a valuable biomarker for quantifying residual inflammatory risk, it is significantly underutilized in real-world care. In this interactive symposium, expert faculty will seamlessly integrate real-world case vignettes with cutting-edge clinical data and panel discussions to highlight evolving considerations for the role of systemic inflammation in ASCVD and CKD; underscore the potential for emerging inflammation-targeted strategies, such as interleukin-6 inhibition, to address residual risk; and explore practical strategies to optimize the assessment of residual inflammatory risk in practice.

TARGET AUDIENCE

This initiative is intended for general cardiologists, heart failure specialists, preventive cardiologists, physicians, advanced practice providers, and other healthcare providers providing cardiorenal/cardiometabolic healthcare (eg, nephrologists, endocrinologists).

AGENDA

- ◆ Introduction: Inflammation as a Key Driver of ASCVD and CKD Risk
- ◆ hsCRP as a Biomarker of Residual Inflammatory Risk: The Time for Universal Screening Has Arrived
- ◆ Exploring Novel and Emerging Therapeutic Strategies for Targeting Residual Inflammatory Risk in ASCVD and CKD
- ◆ Looking Ahead: Clinical Implications of Emerging Inflammation-Targeted Therapies for ASCVD and CKD Management (featuring interactive case vignettes)
- ◆ Conclusions and Q&A

LEARNING OBJECTIVES

Upon completion of this activity, the learner should be able to:

- ◆ **Describe** the role of systemic inflammation in the development and progression of ASCVD and CKD, including the bidirectional relationship between these conditions
- ◆ **Apply** evidence-based strategies to optimize the use of hsCRP in assessing residual inflammatory risk and guiding treatment decisions in ASCVD and CKD
- ◆ **Assess** emerging therapeutic strategies that target residual inflammatory risk to reduce cardiovascular events in patients with ASCVD and CKD, including their mechanisms of action, efficacy, and safety
- ◆ **Evaluate** the clinical implications of emerging inflammation-targeted therapies in ASCVD and CKD, including prospective considerations for clinical integration and their potential impact on patient outcomes