

PROGRAM



AANEM

70TH ANNIVERSARY

ANNUAL MEETING

Nov. 1-4, 2023 | PHOENIX, ARIZONA

Including sessions by the Myasthenia Gravis Foundation of America, Peripheral Nerve Society, Periodic Paralysis Association, & Dysautonomia International

Trusted neuroprotection from inflammation in CIDP



**VISIT THE GRIFOLS
BOOTH TO LEARN MORE**

The most common adverse reactions observed in $\geq 5\%$ patients in the CIDP clinical trial were headache, pyrexia, hypertension, chills, rash, nausea, arthralgia, and asthenia.

GRIFOLS

Please see Important Safety Information and brief summary of Prescribing Information for GAMUNEX-C on adjacent pages, or visit GAMUNEX-C.com for full Prescribing Information.

Important Safety Information

GAMUNEX®-C (immune globulin injection [human], 10% caprylate/chromatography purified) is indicated for the treatment of primary humoral immunodeficiency disease (PID) in patients 2 years of age and older, idiopathic thrombocytopenic purpura (ITP) in adults and children, and chronic inflammatory demyelinating polyneuropathy (CIDP) in adults.

Thrombosis may occur with immune globulin products, including GAMUNEX-C. Risk factors may include: advanced age, prolonged immobilization, hypercoagulable conditions, history of venous or arterial thrombosis, use of estrogens, indwelling central vascular catheters, hyperviscosity, and cardiovascular risk factors. Thrombosis may occur in the absence of known risk factors. For patients at risk of thrombosis, administer GAMUNEX-C at the minimum dose and infusion rate practicable. Ensure adequate hydration in patients before administration. Monitor for signs and symptoms of thrombosis and assess blood viscosity in patients at risk for hyperviscosity.

Renal dysfunction, acute renal failure, osmotic nephrosis, and death may occur with immune globulin intravenous (IVIG) products in predisposed patients. Patients predisposed to renal dysfunction include those with any degree of preexisting renal insufficiency, diabetes mellitus, age greater than 65, volume depletion, sepsis, paraproteinemia, or patients receiving known nephrotoxic drugs. Renal dysfunction and acute renal failure occur more commonly in patients receiving IVIG products containing sucrose. GAMUNEX-C does not contain sucrose. For patients at risk of renal dysfunction or failure, administer GAMUNEX-C at the minimum concentration available and the minimum infusion rate practicable.

GAMUNEX-C is contraindicated in patients who have had an anaphylactic or severe systemic reaction to the administration of human immune globulin. It is contraindicated in IgA-deficient patients with antibodies against IgA and history of hypersensitivity.

Severe hypersensitivity reactions may occur with IVIG products, including GAMUNEX-C. In case of hypersensitivity, discontinue GAMUNEX-C infusion immediately and institute appropriate treatment.

Monitor renal function, including blood urea nitrogen (BUN), serum creatinine, and urine output in patients at risk of developing acute renal failure.

Hyperproteinemia, increased serum viscosity, and hyponatremia may occur in patients receiving IVIG treatment, including GAMUNEX-C.

There have been reports of aseptic meningitis, hemolytic anemia, and noncardiogenic pulmonary edema (transfusion-related acute lung injury [TRALI]) in patients administered with IVIG, including GAMUNEX-C.

The high-dose regimen (1g/kg x 1-2 days) is not

recommended for individuals with expanded fluid volumes or where fluid volume may be a concern.

Because GAMUNEX-C is made from human blood, it may carry a risk of transmitting infectious agents, eg, viruses, the variant Creutzfeldt-Jakob disease (vCJD) agent, and, theoretically, the Creutzfeldt-Jakob disease (CJD) agent.

Do not administer GAMUNEX-C subcutaneously in patients with ITP because of the risk of hematoma formation.

Periodic monitoring of renal function and urine output is particularly important in patients judged to be at increased risk of developing acute renal failure. Assess renal function, including measurement of BUN and serum creatinine, before the initial infusion of GAMUNEX-C and at appropriate intervals thereafter.

Consider baseline assessment of blood viscosity in patients at risk for hyperviscosity, including those with cryoglobulins, fasting chylomicronemia/markedly high triacylglycerols (triglycerides), or monoclonal gammopathies, because of the potentially increased risk of thrombosis.

If signs and/or symptoms of hemolysis are present after an infusion of GAMUNEX-C, perform appropriate laboratory testing for confirmation.

If TRALI is suspected, perform appropriate tests for the presence of antineutrophil antibodies and anti-HLA antibodies in both the product and patient's serum.

After infusion of IgG, the transitory rise of the various passively transferred antibodies in the patient's blood may yield positive serological testing results, with the potential for misleading interpretation.

In clinical studies, the most common adverse reactions with GAMUNEX-C were headache, pyrexia, hypertension, chills, rash, nausea, arthralgia, and asthenia (in CIDP); cough, rhinitis, pharyngitis, headache, asthma, nausea, fever, diarrhea, and sinusitis with intravenous use (in PID) and local infusion-site reactions, fatigue, headache, upper respiratory tract infection, arthralgia, diarrhea, nausea, sinusitis, bronchitis, depression, allergic dermatitis, migraine, myalgia, viral infection, and pyrexia with subcutaneous use (in PID); and headache, ecchymosis, vomiting, fever, nausea, rash, abdominal pain, back pain, and dyspepsia (in ITP).

The most serious adverse reactions in clinical studies were pulmonary embolism (PE) in 1 subject with a history of PE (in CIDP), an exacerbation of autoimmune pure red cell aplasia in 1 subject (in PID), and myocarditis in 1 subject that occurred 50 days post-study drug infusion and was not considered drug related (in ITP).

Please see brief summary of full Prescribing Information for GAMUNEX-C on next page.

GAMUNEX[®]-C

Immune Globulin Injection (Human), 10% Caprylate/Chromatography Purified

HIGHLIGHTS OF PRESCRIBING INFORMATION

These highlights do not include all the information needed to use GAMUNEX[®]-C safely and effectively. See full prescribing information for GAMUNEX-C.

GAMUNEX[®]-C, [Immune Globulin Injection (Human), 10% Caprylate/Chromatography Purified]

Initial U.S. Approval: 2003

WARNING: THROMBOSIS, RENAL DYSFUNCTION and ACUTE RENAL FAILURE

See full prescribing information for complete boxed warning.

- Thrombosis may occur with immune globulin products, including GAMUNEX-C. Risk factors may include: advanced age, prolonged immobilization, hypercoagulable conditions, history of venous or arterial thrombosis, use of estrogens, indwelling vascular catheters, hyperviscosity, and cardiovascular risk factors.
- For patients at risk of thrombosis, administer GAMUNEX-C at the minimum dose and infusion rate practicable. Ensure adequate hydration in patients before administration. Monitor for signs and symptoms of thrombosis and assess blood viscosity in patients at risk for hyperviscosity.
- Renal dysfunction, acute renal failure, osmotic nephrosis, and death may occur with immune globulin intravenous (IGIV) products in predisposed patients.
- Renal dysfunction and acute renal failure occur more commonly in patients receiving IGIV products containing sucrose. GAMUNEX-C does not contain sucrose.
- For patients at risk of renal dysfunction or failure, administer GAMUNEX-C at the minimum concentration available and the minimum infusion rate practicable.

INDICATIONS AND USAGE

GAMUNEX-C is an immune globulin injection (human), 10% liquid indicated for treatment of:

- Primary Humoral Immunodeficiency (PI) in patients 2 years of age and older
- Idiopathic Thrombocytopenic Purpura (ITP) in adults and children
- Chronic Inflammatory Demyelinating Polyneuropathy (CIDP) in adults

DOSAGE AND ADMINISTRATION

Intravenous Administration Only: ITP and CIDP

Indication	Dose	Initial Infusion Rate	Maintenance Infusion Rate (if tolerated)
ITP	2 g/kg	1 mg/kg/min	8 mg/kg/min
CIDP	loading dose 2 g/kg maintenance dose 1 g/kg	2 mg/kg/min	8 mg/kg/min Every 3 weeks

- Ensure that patients with pre-existing renal insufficiency are not volume depleted; discontinue GAMUNEX-C if renal function deteriorates.
- For patients at risk of renal dysfunction or thrombosis, administer GAMUNEX-C at the minimum infusion rate practicable.

Intravenous or Subcutaneous Administration: PI

DO NOT ADMINISTER SUBCUTANEOUSLY FOR ITP PATIENTS

Route of Administration	Dose	Initial Infusion Rate	Maintenance Infusion Rate (if tolerated)
Intravenous (IV)	300-600 mg/kg	1 mg/kg/min	8 mg/kg/min Every 3 to 4 weeks
Subcutaneous (SC)	1.37 x current IV dose in grams/ IV dose interval in weeks	Adult: [†] 20 mL/hr/site Pediatric: [†] 10 mL/hr/site (< 25 kg) 15 mL/hr/site (≥ 25 kg)	Adult: [†] 20 mL/hr/site Pediatric: [†] 10 mL/hr/site (< 25 kg) 20 mL/hr/site (≥ 25 kg) Weekly

[†] Adults: use up to 8 infusion sites simultaneously; pediatric: use up to 6 infusion sites simultaneously; for all ages, ensure infusion sites are at least 2 inches (5 cm) apart.

DOSAGE FORMS AND STRENGTHS

GAMUNEX-C is a sterile solution for injection supplied in 1 g (10 mL), 2.5 g (25 mL), 5 g (50 mL), 10 g (100 mL), 20 g (200 mL), or 40 g (400 mL) single use vials.

CONTRAINDICATIONS

- Anaphylactic or severe systemic reactions to human immunoglobulin
- IgA deficient patients with antibodies against IgA and a history of hypersensitivity

WARNINGS AND PRECAUTIONS

- IgA deficient patients with antibodies against IgA are at greater risk of developing severe hypersensitivity and anaphylactic reactions. Have epinephrine available immediately to treat any acute severe hypersensitivity reactions.
- Hyperproteinemia, with resultant changes in serum viscosity and electrolyte imbalances may occur in patients receiving IGIV therapy.
- Aseptic Meningitis Syndrome (AMS) may occur, especially with high doses or rapid infusion.
- Hemolysis, either intravascular or due to enhanced RBC sequestration, can develop subsequent to GAMUNEX-C treatments. Risk factors include high doses and non-O blood group. Closely monitor patients for hemolysis and hemolytic anemia, especially in patients with pre-existing anemia and/or cardiovascular or pulmonary compromise.
- Monitor patients for pulmonary adverse reactions (transfusion-related acute lung injury [TRALI]).
- Volume overload.
- GAMUNEX-C is made from human plasma and may carry a risk of transmitting infectious agents, e.g., viruses, the variant Creutzfeldt-Jakob disease (vCJD) agent and, theoretically, the Creutzfeldt-Jakob disease (CJD) agent.
- GAMUNEX-C is not approved for subcutaneous use in ITP patients. Due to a potential risk of hematoma formation, do not administer GAMUNEX-C subcutaneously in patients with ITP.
- Passive transfer of antibodies may confound serologic testing.

ADVERSE REACTIONS

The most common adverse reactions observed in ≥ 5% patients were:

PI: Intravenous: Cough increased, rhinitis, pharyngitis, headache, asthma, nausea, fever, diarrhea, and sinusitis.

Subcutaneous: Local infusion site reactions, fatigue, headache, upper respiratory tract infection, arthralgia, diarrhea, nausea, sinusitis, bronchitis, depression, allergic dermatitis, erythema, migraine, myalgia, viral infection, and pyrexia.

ITP: Headache, ecchymosis, vomiting, fever, nausea, rash, abdominal pain, back pain, and dyspepsia.

CIDP: Headache, pyrexia, hypertension, chills, rash, nausea, arthralgia, and asthenia.

To report SUSPECTED ADVERSE REACTIONS, contact Grifols Therapeutics LLC at 1-800-520-2807 or FDA at 1-800-FDA-1088 or www.fda.gov/medwatch.

DRUG INTERACTIONS

- The passive transfer of antibodies may transiently interfere with the response to live virus vaccines, such as measles, mumps and rubella.

USE IN SPECIFIC POPULATIONS

- Geriatric: In patients over 65 years of age do not exceed the recommended dose, and infuse GAMUNEX-C at the minimum infusion rate practicable.

GRIFOLS

Grifols Therapeutics LLC
Research Triangle Park, NC 27709 USA
U.S. License No. 1871

3054846/3054847
Revised: 1/2020

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Welcome to the 2023 AANEM Annual Meeting

Welcome to the 2023 AANEM Annual Meeting in sunny Phoenix, Arizona. I hope you're as excited as I am for the week ahead, filled with opportunities to expand your medical knowledge, gain insights into the latest developments in our field, and make lasting professional connections.

We have prepared a comprehensive program to keep you engaged and informed throughout the entire meeting. Our three plenary sessions will showcase top-notch speakers exploring disability in NMDs and innovative ways to support our patients. Additionally, you'll have the chance to participate in a diverse selection of sessions and hands-on workshops covering both fundamental and advanced topics.

Beyond the educational sessions, I encourage you to take full advantage of this gathering to reunite with old friends and forge new connections. Join me at the President's Reception on Wednesday evening to officially kick off the conference, at the Abstract Award Reception on Thursday to celebrate our award-winning researchers, at the Happy Hour on Friday to connect with fellow attendees, and at other social events.

Over the years, I've witnessed the profound impact of the AANEM Annual Meeting. It remains, in my opinion, the best NM and EDX-focused gathering out there. Its breadth ensures that everyone finds something of interest, while its intimate size allows for meaningful interactions with speakers and colleagues. The insights you gather here will undoubtedly enrich your practice and research.

To those who are new to the AANEM community or attending this meeting for the first time, I extend a warm and special welcome. Our community of neurologists, psychiatrists, technologists, researchers, and collaborators is dedicated to improving the lives of patients with NMDs. If you have any questions or need assistance, the AANEM staff will be available onsite to help you.

I look forward to connecting with you this week. Enjoy the meeting!

Sincerely,



Robert Irwin, MD
2023 AANEM President



Need to Know Info

Check In

Registered attendees, please use the self-check-in kiosks, located in the Grand Canyon Foyer, to print your name badges, view personal itineraries, and pick up meeting materials. To register onsite, visit the Registration Booth. For additional assistance, visit the AANEM Information Center.

AANEM App

Keep the latest information at your fingertips with the AANEM app, sponsored by Catalyst Pharmaceuticals, Takeda, and UCB.

With the AANEM app, you can access important messages and meeting updates, easily manage your schedule, locate sessions and workshops, purchase tickets, access presentation materials, provide feedback, claim credits, connect with other attendees, participate in the AANEM Challenge, and more.



Search “AANEM” in your device’s app store, and download the AANEM app on any iOS or Android device. Use your AANEM username and password to log in.

Internet Access

Free Wi-Fi is available throughout the 2023 AANEM Annual Meeting event space, courtesy of Grifols USA, LLC.

Network: AANEM_2023

Password: Grifols

This Wi-Fi information will only work inside the AANEM Annual Meeting event space. Use the hotel Wi-Fi in other areas of the JW Marriott Desert Ridge.

CME, CEUs, & CNCT Checkpoints

Learn how to claim CME credits, CEUs, and CNCT checkpoints on page 6.

Workshop Monitor

Workshops with open seats are presented on the workshop monitor located in the Grand Canyon Foyer. Buy tickets for any available workshops through the AANEM app.

Resident/Fellow Rush Tickets

Residents and fellows may participate in the “Resident/Fellow Rush” to claim free, last-minute tickets for workshops with open seats. These tickets are offered on a first-come, first-served basis 15 minutes prior to the start of the workshop and may be claimed through the AANEM app.

Since rush tickets are only available 15 minutes prior to the start of workshops and are subject to availability, AANEM suggests purchasing tickets to ensure a seat.



Get Social

Join the #AANEMinPhoenix community on social media to connect with fellow meeting attendees, share in the excitement, and stay up-to-date on all the latest meeting action.

Use our hashtag:
#AANEMinPhoenix



Audio and/or video recording by meeting attendees of any session, workshop, or for any other purpose, is not permitted.

Annual Meeting Hours

Check In – *Grand Canyon Foyer*

Registered attendees may use the self-check-in kiosks to print their name badges, view personal itineraries, and pick up meeting materials.

Registration Booth – *Grand Canyon Foyer*

To register onsite, visit the Registration Booth.

AANEM Information Center – *Grand Canyon Foyer*

Staff members are available to answer questions and provide information about AANEM, ABEM, ANF, and more.

Headshots – *AANEM Information Center*

Need a new professional photo? AANEM staff are taking complimentary professional headshots for attendees. Sign up at the AANEM Information Center.

Speaker Ready Room – *Grand Sonoran B*

Faculty and speakers, before delivering your presentations, visit the Speaker Ready Room to make changes to your presentation and/or load it appropriately. Please load your presentation at least 1 hour prior to your session to allow enough time for AV staff to transfer it to the proper location.

Exhibit Hall – *Grand Canyon Ballroom*

Stop by the Exhibit Hall to learn about the latest innovations in our industry and to meet representatives from equipment, technology, and pharmaceutical companies.

Poster Hall – *Grand Saguaro North/South*

Stroll through the Poster Hall to see the latest cutting-edge research submitted for the annual meeting. Authors will be available to answer questions and discuss research on Thursday and Friday during the designated abstract poster sessions.

Silent Auction – *Grand Canyon Foyer*

Help the ANF continue its mission of STRENGTHENING the global effort to CURE NMDs by bidding on our silent auction items. All of the money raised will be used by the foundation to fund scientific research on NMDs.



Tuesday

Check-In Kiosks: Open all day | Registration Booth: 6–9 pm | AANEM Information Center: 6–9 pm
Speaker Ready Room: 7:30–9 pm

Wednesday

Check-In Kiosks: Open all day | Registration Booth: 6:30 am–6 pm | AANEM Information Center: 7:30 am–5 pm
Speaker Ready Room: 7 am–4 pm | Exhibit Hall: 5:30–7 pm | Silent Auction: Opens at 8 am

Thursday

Check-In Kiosks: Open all day | Registration Booth: 7 am–6 pm | AANEM Information Center: 7:30 am–5 pm
Speaker Ready Room: 7 am–4 pm | Exhibit Hall: 9 am–4 pm | Poster Hall: 7:30 am–9 pm
Silent Auction: Closes at 4 pm

Friday

Check-In Kiosks: Open all day | Registration Booth: 7 am–4 pm | AANEM Information Center: 7:30 am–4 pm | Speaker Ready Room: 7 am–4 pm | Exhibit Hall: 9 am–4 pm | Poster Hall: 7:30 am–4 pm | Silent Auction Pickup: 10 am–4 pm

Saturday

Registration Booth: 7–10 am | Speaker Ready Room: 7–10 am

Social Events

Wednesday

Coffee Break: 9:30–10 am
Grand Canyon Foyer

Speed Networking Activity: 3–3:45 pm
Grand Canyon Foyer

Coffee Break: 3–4 pm
Grand Canyon Foyer

President's Reception: 5:30–7 pm
Grand Canyon Ballroom

Thursday

Coffee Break: 9:30–10 am
Grand Canyon Ballroom

Coffee Break: 2:45–3:45 pm
Grand Canyon Ballroom

Abstract Award Reception: 5:15–6:45 pm
Grand Saguaro North/South

Abstract Poster Session I: 6–6:30 pm
Grand Saguaro North/South

EMG Talk: 7–9 pm
Grand Sonoran F

Friday

Coffee Break: 9:30–10 am
Grand Canyon Ballroom

Abstract Poster Session II: 9:30–10 am
Grand Saguaro North/South

Resident & Fellow Lunch: 12:15–1:15 pm
See location on your ticket in the AANEM app

Coffee Break: 2:45–3:45 pm
Grand Canyon Ballroom

Abstract Poster Session III: 3–3:30 pm
Grand Saguaro North/South

Beers for Fears: 5:15–6:15 pm
Grand Canyon Foyer

Happy Hour: 5:15–6:15 pm
Grand Canyon Foyer

Saturday

Coffee Break: 9:30–10 am
Grand Canyon Foyer

AANEM Lounge – *Grand Canyon Foyer*

This comfortable, congregational space is available for all meeting attendees. Take a break and watch programming on the video wall, sponsored by Grifols USA, LLC. Entertainment will be provided during some coffee breaks and the Friday happy hour.

Coffee Breaks – *Various locations*

Enjoy complimentary coffee and use break time to network and socialize with colleagues.

Speed Networking Activity – *Grand Canyon Foyer*

Build connections with peers, leaders, and other professionals in NM and EDX medicine during this fun, easy networking activity. Don't forget your business cards.

President's Reception – *Grand Canyon Ballroom*

Join us in the Exhibit Hall for the official kick-off to the annual meeting. Socialize with attendees and exhibitors, while enjoying complimentary appetizers and refreshments. Sponsored by UCB.

Abstract Award Reception – *Grand Saguaro North/South*

Celebrate the advancements of research in NM and EDX medicine by joining our abstract authors for complimentary appetizers and refreshments in the Poster Hall. All authors will be available to discuss their research. Sponsored by Catalyst Pharmaceuticals, Inc.

Abstract Poster Sessions – *Grand Saguaro North/South*

Stop by the Poster Hall during the abstract poster sessions on Thursday during the Abstract Award Reception and on Friday during the specified session times to meet abstract authors and discuss their research.

EMG Talk – *Grand Sonoran F*

Don't miss EMG Talk, an interactive, entertaining, lighthearted look at EMG that is sure to provide a lot of laughs. Join the fun and camaraderie, and enjoy complimentary drinks and snacks. Sponsored by Natus.

Resident & Fellow Lunch – *See location on ticket in the AANEM app*

Network with AANEM leaders and other peers at this unique opportunity dedicated for residents, fellows, and medical students. A complimentary lunch will be provided, and registration is required. Sponsored by Grifols USA, LLC.

Beers for Fears – *Grand Canyon Foyer*

We invite residents, fellows, and early-career physicians to share career fears and challenges with experts in NM and EDX medicine in exchange for a beer (or your choice of beverage). Our nationally-recognized faculty will welcome all of your questions and be happy to share insights they've gained from years of experience.

Happy Hour – *Grand Canyon Foyer*

Enjoy live music, good company, and complimentary beer, wine, and other refreshments during this final social event.

Enjoy Your Stay

Venture beyond the meeting to discover endless opportunities for entertainment, adventure, dining, and relaxation in Phoenix, North Scottsdale, Cave Creek, and Desert Ridge Marketplace.

Nearby Activities & Entertainment

- Desert Ridge Marketplace
- Historic Old Town Scottsdale
- Tournament Players Club Scottsdale
- Desert Botanical Gardens
- Phoenix Art Museum
- Phoenix Zoo
- Arizona State University
- Chase Field
- Grand Canyon
- Talking Stick Resort Arena
- Rawhide Western Town
- Scottsdale Center for the Arts
- Frank Lloyd Wright's Taliesin West
- Westworld
- The Musical Instrument Museum
- Heard Museum
- Wrigley Mansion
- Children's Museum of Phoenix



Hotel Shuttle Service

Shuttle service will be provided on Wednesday, Thursday, Friday, and Saturday between the following hotels. Check the AANEM mobile app or AANEM website for exact timing.

- Cambria, Residence Inn, Holiday Inn, and the JW Marriott
- Hyatt House, Hyatt Place, and the JW Marriott



Sponsored by NS Pharma.

Credit Information

CME Credits

Physicians may earn up to 22 *AMA PRA Category 1 Credits™* by attending sessions at this meeting. CME credits are listed in this program. Physicians who attend the annual meeting will also receive free access to 12 Self-Assessment CME credits after the meeting.

CME

How to Claim CME Credits

At the end of the week, claim CME credits for your total hours of participation in general sessions at education.aanem.org/URL/23MTGCME. Attendees are responsible for recording all CME credits from sessions using the CME recording page. The CME recording form must be submitted by Dec. 22, 2023. CME credits for workshops will be automatically recorded. All CME recorded is reported to ABEM, ABPN, and ABPMR by AANEM.



Scan to Claim

CEU Credits

Nonphysicians may earn up to 22 CEUs by attending sessions at this meeting. CEUs are listed in this program.

CEU

How to Claim CEUs

At the end of the week, claim CEU credits for your total hours of participation in general sessions at education.aanem.org/URL/23MTGCEU. Attendees are responsible for recording all CEUs from sessions using the CEU recording page. The CEU recording form must be submitted by Dec. 22, 2023. CEUs for workshops will be automatically recorded by AANEM.



Scan to Claim

CNCT Checkpoints

All ABEM-certified technologists will receive one free checkpoint for attending the annual meeting. They will also receive free access to four additional checkpoint credits after the meeting.

Checkpoint

How to Claim CNCT Checkpoints

Technologists will receive an email from the American Board of Electrodiagnostic Medicine (ABEM) with instructions for claiming CNCT checkpoint credits after the AANEM Annual Meeting.



Questions?

Contact education@aanem.org or talk to staff at the AANEM Information Center.

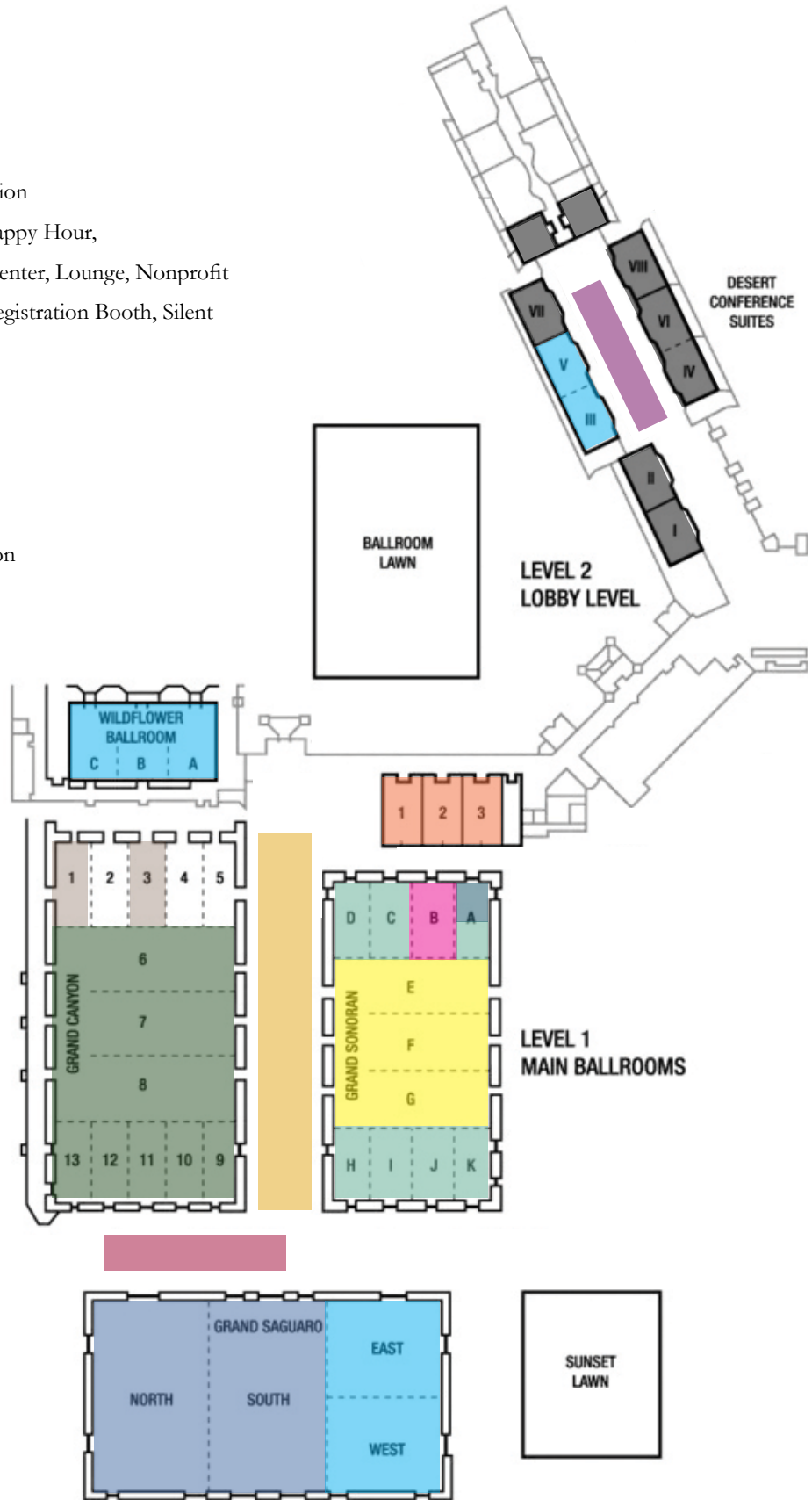
Hotel Maps

Level 1

- AANEM Job Fair
- Coffee Breaks (THU/FRI),
Exhibit Hall, President's Reception
- Coffee Breaks (WED/SAT), Happy Hour,
Health eCareers, Information Center, Lounge, Nonprofit
Exhibitors, Check-In Kiosks, Registration Booth, Silent
Auction
- Committee Meetings
- Industry Forums
- MGFA Posters (WED)
- Plenary & Sessions
- Poster Hall & Abstract Reception
- Presentation Stages
- Sessions
- Speaker Ready Room

Level 2

- Ask the Expert Sessions
- Industry Forums
- Workshops Subject Check In



Bring the Meeting Home

Annual Meeting Video Collection

Never miss a moment of the 2023 AANEM Annual Meeting with the Annual Meeting Video Collection. This collection offers access to audio and video recordings from most sessions, allowing you to re-watch presentations or discussions at your convenience.

The Annual Meeting Video Collection gives you access to content from the annual meeting forever and the option to claim up to 100 *AMA PRA Category 1 Credits™* or CEUs for 3 years. Purchase the Annual Meeting Video Collection by Nov. 4, 2023, for only \$145. The cost of the Annual Meeting Video Collection after the meeting will be \$295 for members and \$445 for nonmembers.

The Annual Meeting Video Collection contains recordings of most of the sessions; however, it does not include Ask the Experts sessions, sessions that experience technical difficulty during recording, or workshops.



Annual Meeting Workshop Bundle

If you are not able to attend all of the workshops you're interested in, purchase the Annual Meeting Workshop Bundle. This bundle includes all handouts available to workshop attendees during the meeting. That way, even if you can't be there in person, you'll still have access to valuable insights and takeaways from the workshops.

Purchase the Annual Meeting Workshop Bundle by Nov. 4, 2023, for only \$50. The cost of the Annual Meeting Workshop Bundle after the meeting will be \$100 for members and \$250 for nonmembers.

While the handouts contain important information, the workshops themselves are not recorded, and audio or video is not available. Workshop CME/CEUs are only available for in-person attendance, and cannot be obtained by purchasing the 2023 Workshop Bundle. We highly encourage in-person attendance at our workshops, as many of them feature hands-on demonstrations that offer a unique learning experience.



THE NEXT STEP FORWARD:

Real World Experience in Patients with Late-Onset Pompe Disease

Join us for an industry forum with:

Wednesday, November 1st
7:00 - 8:00 AM MST
Grand Saguaro Ballroom East/West



Chafic Karam, MD
Associate Professor of Neurology,
University of Pennsylvania



Bassam Malo, MD
Neurology & Neuromuscular
Physician, SSM Health, Missouri

This activity will be held during the AANEM Annual Meeting. It is not part of the official scientific program of the AANEM. Food and beverage is provided by AANEM.

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MAT-US-2305405-v1.0-07/2023

sanofi

Plenary Speakers

The 2023 annual meeting plenary sessions will feature a diverse group of experts addressing this year's plenary theme, *Disability and NMDs: The Whole Enchilada*. This timely topic was chosen by AANEM President Robert Irwin, MD, to highlight the importance of supporting patients' quality of life beyond diagnoses and treatments.

Plenary 1 | Wednesday 4-5:30 pm



Sarcopenia: Aging of Skeletal Muscle and Benefits of Exercise | *Lambert Lecture*

Walter R. Frontera, MD, PhD

- Professor of PM&R, Sports Medicine, and Physiology at the University of Puerto Rico School of Medicine
- Editor-in-Chief of the *American Journal of PM&R*

The aging of the population is one of the most important global challenges of the 21st century. Aging is associated with loss of functioning, and sarcopenia is one of its most important contributors. Dr. Frontera will examine the diagnostic criteria for sarcopenia and discuss the most recent research related to the cellular and physiological changes associated with it. The potential contribution of various types of exercise to the rehabilitation of older adults will also be discussed.

Plenary 2 | Thursday 10 am-12 pm



How the Health Care Team Can Support Patients at Critical Points in Their Disease Course | *Olney Lecture*

Jodi Wolff, PhD, MSSW

- Vice President of Patient Engagement and Advocacy at Rejuvenate Bio
- Creator and Director of the Jett Foundation's Camp Promise Retreat

Dr. Wolff will discuss how the health care team can support patients at critical junctures in their disease course, including at the time of diagnosis, loss of key functions, increased medical intervention, transition to adulthood, and palliative period. Research related to coping, grief and loss, anxiety and depression, social isolation, and social support and systems will be examined.



Adaptive Athletics: Building Confidence in Everything You Do Regardless of Your Circumstances

Peter Hughes, MEd

- Adaptive Athletics Program Director at the University of Arizona
- Founder of Wheelchair Athletes Worldwide

Mr. Hughes has coached various sports for more than 30 years from the YMCA level to the NCAA and Paralympics and believes people with disabilities should be encouraged to participate in sports. He will discuss how sports can be adapted and beneficial for health, fitness, self-esteem, and confidence regardless of one's situation and explore the added benefits of sports, including increased independence and changing societal views on the disabled population.



Advocating for Patients Beyond the Clinical Setting: How Providers Can Advance Access and Equality for the NMD Community

Michael Lewis, MA

- Director of Disability Policy for the Muscular Dystrophy Association

Mr. Lewis has spent more than a decade working in disability rights for various organizations. His passion for disability policy advocacy stems from his experience as an individual with cerebral palsy. Mr. Lewis will review the Muscular Dystrophy Association's advocacy efforts on behalf of people living with NMDs and how providers can join the efforts to advance changes in public policy that will increase access to care, education, employment, transportation, recreation, and more for those with NMDs.



Disability in Medical Education: Where Is It? | *Reiner Lecture*

Margaret A. Turk, MD

- Vice Chair of the PM&R Department at SUNY Upstate Medical University Norton College of Medicine
- SUNY Distinguished Service Professor of PM&R, Pediatrics, and Public Health and Preventive Medicine

Along with her clinical and leadership contributions to establishing the SUNY Upstate Norton College of Medicine PM&R Department, Dr. Turk has promoted integrating disability education within medical school curricula, locally and nationally. Dr. Turk will examine the state of disability education in medical schools today, promote the need for more active and widespread inclusion of disability in medical education, and provide suggestions for successful curricular development and implementation.



Making Visible the “Invisible”: Cognitive Disability in DMD | *Surinderjit Singh Young Lecture*

Mathula Thangarajh, MD, PhD

- Assistant Professor of Neurology at Virginia Commonwealth University

Dr. Thangarajh's research work has highlighted the need for holistic assessment of individuals and their families and promoted scientific stewardship, research equity, and advocacy in improving the clinical and research space in DMD. Dr. Thangarajh will summarize efforts to better quantify the unexpected cognitive burden within DMD and other NMDs, explore psychosocial determinants of health, and highlight how community engagement and partnership with advocacy agencies and industry can be harnessed to improve cognitive health in this disease.

Customize Your Experience

SESSIONS

Your meeting registration gives you access to all sessions, which address a wide variety of topics related to NM, MSK, NMUS, and EDX medicine. Create your own curriculum by choosing to attend sessions that meet your interests and needs for career development. Most sessions offer CME and/or CEUs.

Dr. Basbar Katirji's Roundtable: Case Discussions is limited to 60 participants and requires a no-cost registration.

Dr. Sandra Hearn's Session: Electrodiagnosis of Brachial Plexopathies and Mimics is limited to 40 participants and requires a no-cost registration.

WORKSHOPS

Develop your skills and techniques in NM, MSK, NMUS, and EDX medicine by attending hands-on workshops led by the best in the field. These small-group demonstrations provide personalized instruction that can help take your practice to the next level.

Once you've registered, check your ticket in the AANEM app under the "My Tickets" menu to find the workshop location. Workshops with available spots are listed on the workshop monitor in the Grand Canyon Foyer. Residents and fellows may participate in the "Resident/Fellow Rush" through the AANEM app.

Workshops labeled "CME" are for physicians only. Workshops labeled "CEU" are for technologists or other healthcare providers only. Workshops labeled "CME/CEU" are open to all attendees.

SOCIAL EVENTS

Mingle with colleagues and experts at any of our scheduled social events. Kick off the meeting at the President's Reception, meet the individuals who contribute to cutting-edge research at the Exhibit Hall or the Abstract Poster Presentations, and connect with colleagues over complimentary refreshments at coffee breaks and Friday's happy hour.

These events (and more) are included in the cost of registration and do not have additional fees. Registered guests are welcome to attend all social events except the speed networking activity and Resident & Fellow Lunch. Social events do not offer CME/CEUs.

The Resident and Fellow Lunch has limited seating and requires a no-cost registration.

INDUSTRY FORUMS

Industry Forums are 60-minute presentations on topics related to a disease state, research findings, products, or services. All Industry Forum presentations are included with your meeting registration, and AANEM provides breakfast, lunch, or light appetizers at each event. Industry Forums are sponsored and not part of the official scientific program of AANEM. CME is not provided by AANEM.

The Presentation Stages offer 20-minute, focused discussions with seating for 30 attendees. The Presentation Stages are located inside the Exhibit Hall and the presentations are scheduled during breaks. Please note that these presentations are sponsored and not part of the official scientific program of AANEM. CME is not provided by AANEM.

Industry Forums and Presentation Stages have limited seating. Arrive early to secure a spot.

Wednesday | Nov. 1

06:45 am -
08:00 am

Industry
Forum

Industry Forum by Sanofi

Grand Saguaro East-West

The Next Step Forward: Real World Experience in Patients With Late-Onset Pompe Disease

Dr. Chafic Karam and Dr. Bassam Malo will share their patients' cases and real-world experience given the evolving treatment landscape. A Q&A session will follow the panel discussion.

- Learn about long-term clinical trial data for late-onset Pompe disease (LOPD)
- Discover a treatment choice for patients with LOPD in the real-world setting

Presenters:

Chafic Karam, MD
Bassam Malo, MD

This activity is sponsored by Sanofi and is not part of the official scientific program of the AANEM.

Food will be provided by AANEM for session attendees. Seating is limited.

6:45 am: Registration
7:00 am: Presentation

No CME/CEU

08:00 am -
09:30 am

Workshop

W08A EMG Laryngeal

Develop skills in the clinical and EDX evaluation of vocal cord dysfunction, including performance of specific EDX testing of the larynx, and discuss how to evaluate which tests to perform on patients presenting with hoarseness and laryngeal dysfunction.

1.50 CME

Michael C. Munin, MD

08:00 am -
09:30 am

Workshop

W103A TOS EDX/US

Review the present medical standards for the electrodiagnosis of TOS; practice hands-on sonographic evaluation of the supraclavicular and infraclavicular causes of both neurogenic and vascular causes of TOS; and demonstrate sonographic evaluation of the brachial plexus at the scalenes triangle and pectoral regions of potential compression, in addition to the evaluation of the proximal brachial plexus/peripheral nerves through the axilla and proximal upper limb. There will be faculty providing hands-on experience at both the EMG and US stations.

Albert Clairmont, MD

Lester S. Duplechan, MD

1.50 CME

08:00 am -
09:30 am

Workshop

W18A Basic NMUS

Obtain images with transverse and longitudinal transducer positions; describe how to manipulate basic US instrumentation to include focal depth, Doppler flow, and transducer frequency; describe how muscle, nerve, and tendon appear with US; and discuss the principle of anisotropy.

Vanessa Baute Penry, MD

1.50
CME/CEU

08:00 am -
09:30 am

Workshop

W45A Cervical Radiculopathy/Brachial Plexopathy

Discuss the anatomy of the cervical roots and the brachial plexus; describe the role of the sensory NCS in the initial localization of axon loss processes to preganglionic versus ganglionic/postganglionic; illustrate the role of the sensory NCS in localizing focal lesions to specific regions of the brachial plexus (root, trunk, division, cord, terminal nerve); discuss the role of motor NCS in further localizing the lesion and in defining its severity; describe the role of the needle EMG in confirming the NCS findings and in defining the temporal features of the disorder (slowly progressive, rapidly progressive, acute, subacute, chronic); and demonstrate this information using illustrative cases.

1.50 CME

Mark A. Ferrante, MD

Wednesday | Nov. 1

08:00 am -
09:30 am

W51A NMUS Anatomy of the Head and Neck

Workshop

Review functional and NM anatomy of the cranio-cervical region, including a review of complex structural and functional anatomy; correctly identify abnormal postures and the contributing muscles; discuss the benefits and limitations of NMUS; and use US to identify muscles, nerves, and other key structures including the following concepts: US pattern recognition and key regional structures.

1.50
CME/CEU

Katharine E. Alter, MD

08:00 am -
09:30 am

W81A Basic US of Lower Limb Nerves

Workshop

Explain optimal transducer frequencies for imaging lower extremity nerves and appropriate choice of transducers; describe echogenicity and methods of demonstrating Morton's neuroma in the foot; identify and trace the sciatic nerve from the ischiofemoral outlet into the posterior thigh; identify common muscles for EMG and chemodenervation and methods of safe approaches with needle; describe and demonstrate the branching patterns of sciatic, tibial, fibular, and sural nerves in the lower extremities; and list expected findings of nerve entrapment as may be seen on US and findings in structures other than nerve that may be significant. This workshop will focus on the sciatic nerve at bifurcation, fibular nerve at fibular head, and the tibial nerve at ankle.

1.50 CME

Jeffrey A. Strakowski, MD

08:00 am -
09:30 am

W84A Advanced US of the Brachial Plexus

Workshop

Explain recommended transducer frequencies and image optimization methods for imaging of the brachial plexus; explain sono-anatomy of the brachial plexus and adjacent structures; demonstrate scanning technique of the brachial plexus in the interscalene groove as well as supraclavicular, infraclavicular, and axillary areas; demonstrate sonographic identification of the following nerves: vagus, phrenic, dorsal scapular, long thoracic, suprascapular, and spinal accessory; and summarize expected findings of brachial plexopathies as may be seen on US and findings in structures other than the nerve that may be significant.

1.50
CME/CEU

Monika Krzesniak-Swinarska, MD

08:00 am -
09:30 am

W88A Evaluation of Proximal Upper and Lower Limb Mononeuropathies

Workshop

Demonstrate the best practices to obtain reliable and reproducible responses and address the technical challenges of obtaining responses in the nerves. The rationale for performing specific NCSs will be discussed.

1.50
CME/CEU

William J. Litchy, MD

08:00 am -
09:30 am

W89A EDX and US Evaluation of the Lower Cranial Nerves

Workshop

Lower cranial neuropathy evaluation in the EDX lab is an informative complement to the clinical evaluation and exam. Attendees will sonographically visualize and measure the cross-sectional area of the spinal accessory nerve; discuss a methodical approach to the EDX evaluation of cranial nerves XI and XII, with particular emphasis on topics pertaining to electrode placement, stimulation site, needle insertion site, side to side testing, and the proper interpretation of normal and abnormal findings; and use such findings to then support or refute diagnoses encountered in clinic.

1.50 CME

Hani A. Kushlaf, MD

Long F. Davalos Loo, MD

Wednesday | Nov. 1

08:00 am -
09:30 am

Workshop

W97A SFEMG Using Axonal Stimulation

The techniques of SFEMG obtained with axonal stimulation will be demonstrated, along with demonstrating technique on the extensor digitorum communis with stimulation of the posterior interosseous nerve and in the orbicularis oculi with stimulation of the facial motor nerve. Participants will gain an understanding of how stimulated single fiber is performed along with its advantages and limitations as compared to volitional SFEMG.

1.50 CME

Benn E. Smith, MD

08:00 am -
09:30 am

Session

Advances in Duchenne Treatment and Management

Grand Sonoran C-D

Describe the new and emerging drug therapies and treatment approaches in the management of Duchenne muscular dystrophy. Discuss the relative roles of each of these and how they are changing the approach to care for these patients.

8:00 am: *Gene Therapy in Duchenne Muscular Dystrophy Across the Lifespan: Milestones and Current Landscape*

Craig M. McDonald, MD

8:30 am: *The Future of Gene Therapy in Duchenne: Building on Current Milestones*

Emma Ciafaloni, MD

1.50
CME/CEU

08:00 am -
09:30 am

Session

Cardiac and Pulmonary Manifestations of NMDs

Grand Sonoran J-K

Confidently diagnose and manage cardiac and pulmonary manifestations that commonly occur in association with NMDs including motor neuron disorders, neuropathies, NMJ disorders, and myopathies; and describe which NMDs commonly feature comorbid cardiac and pulmonary manifestations, and the evidence-based recommendations for diagnostic evaluation and treatment.

8:00 am: *Pulmonary Manifestations of NMDs: Work-up and Management*

Michael K. Hehir, MD

8:45 am: *Cardiac Manifestations of NMDs*

Nicholas J. Silvestri, MD

1.50
CME/CEU

08:00 am -
09:30 am

Session

Effectively Managing Complex Peripheral Nerve Impairments in Collaboration With Surgery

Grand Sonoran F

Describe how EMG informs surgical management of neuralgic amyotrophy; contrast application of distal vs. proximal nerve transfers; review the utility of serial EMGs for neuralgic amyotrophy; contrast EMG findings in root avulsions versus brachial plexus injuries; review the benefits and limitations of neuroimaging for detecting root avulsions; and assess how EMG informs surgical management of brachial plexopathy and root avulsions.

8:00 am: *Managing Neuralgic Amyotrophy*

Kaye Sedarsky, MD

8:40 am: *Managing Root Avulsions and Proximal Plexus Injuries*

Lawrence R. Robinson, MD

1.50
CME/CEU

08:00 am -
09:30 am

Session

hATTR With Polyneuropathy: A Can't Miss Diagnosis

Grand Sonoran E

Identify red flag symptoms to raise the clinical suspicion for hATTR; describe the stepwise diagnostic approach for hATTR; and list the available treatments for polyneuropathy caused by hATTR.

8:00 am: *Treatment of Polyneuropathy Associated With hATTR Amyloidosis*

J. David Avila, MD

8:25 am: *Looking for hATTR - Suspicions and Surprises*

Sasha Zivkovic, MD, PhD

8:50 am: *Phenotypic Variability of hATTR Amyloidosis*

Diana Mnatsakanova, MD

1.50
CME/CEU

08:00 am -
12:00 pm

MGFA Session

Grand Sonoran G

Session

The Myasthenia Gravis Foundation of America (MGFA) Medical & Scientific Advisory Council (MSAC) invites clinical and scientific experts to share current and prospective peer-reviewed research focused on myasthenia gravis (MG) and related disorders of the NMJ. The scientific session will include presentations highlighting the latest advancements in our understanding of MG etiology, immunopathology, therapeutic developments, and management. Program and speakers subject to change.

8:00 am: Welcome

Samantha Masterson, CEO, MGFA

8:03 am: Introduction of Keynote Speaker

Ali A. Habib, MD

8:06 am: Unraveling the Puzzle: Game-Changing Biomarker Development in MG

Anna R. Punga, MD, PhD

8:51 am: Introduction to Biomarkers and Hot Topics

Ali A. Habib, MD

8:53 am: Investigating Immunological Profiles of Thymus in ACHR-MG by SCRNA-SEQ

Yingkai (Kevin) Li, MD

9:00 am: A Phase 0 Study Establishing a Robust T Cell Assay for the First in Human Trial of CNP-106 for Generalized ACHR+MG

Samantha Genardi, PhD

9:07 am: Racial Disparities in Acute Care Utilization Outcomes Among Those With MG

Pushpa Narayanaswami, MD

9:14 am: Differences in Clinical Care Between Black and Non-Black Patients With GMG Receiving Eculizumab in the United States

Adrian Kielhorn, MBA

9:21 am: Prevalence and Diversity of Myasthenia Gravis in the US: A Cross-Sectional Study of the NIH all of US Research Program Database

Bhaskar Roy, MBBS

9:35 am: Break - Visit Posters and Sponsor Tables

10:05 am: Introduction to Clinical Trials

Diana Castro, MD

10:07 am: Achievement of Minimal Symptom Expression in Acetylcholine-Receptor Antibody-Positive Participants With gMG and Effect on Disease-Specific Measures in Adapt/Adapt+ Studies

James F. Howard, MD

10:14 am: MG-ADL and QMG Scores Over Time in Patients with gMG: Post-Hoc Analysis of Mycaring and Open-Label Studies

Vera Brill, MD

10:21 am: Zilucoplan in Pediatric Patients with Acetylcholine Receptor Autoantibody-Positive gMG: ZIMYG (MG0014) and ZIMYG+(MG0015) Clinical Study Designs

Sigrid Nilius, PhD

10:28 am: Early Responders With Zilucoplan: An Interim Analysis of Raise - Xt in Patients with Generalized Myasthenia Gravis

Miriam L. Freimer, MD

10:35 am: Antigen-Specific Immune Therapy (CNP-106) for Treatment of Generalized Myasthenia Gravis: Rationale and Design of First-In-Human Randomized Controlled Trial

Richard J. Nowak, MD, MS

10:42 am: Subcutaneous Efgartigimod PH20 Treatment in Participants with Generalized Myasthenia Gravis in Adapt-Sc+: Interim Analyses on Quality of Life, Efficacy, Tolerability, and Long-Term Safety

Tuan H. Vu, MD

10:56 am: Introduction to General Practice

Neelam Goyal, MD

10:58 am: MGFA Global MG Patient Registry Update

Renee Willmon

11:06 am: National Trends in the Utilization of Thymectomy for MG

Jennifer Morganroth, MD, MBA

11:13 am: Measuring Adverse Event Burden in MG: Retrospective Validation of the Adverse Event Unit (AEU) With MGTX Trial Data

Michael K. Hehir, MD

11:20 am: Management of MG Around the Globe: Consensus Guidelines vs. Realities of Practice

Julia Greenberg, MD

11:27 am: Near Fiber EMG: A New Way to Assess Motor Unit Instability and Electrophysiological Temporal Dispersion

Daniel W. Stashuk, PhD

11:34 am: MGNATION: A Real World Study Capturing Patient, Healthcare Professional, and Caregiver Perspectives

Pushpa Narayanaswami, MD

Wednesday | Nov. 1

	<p>11:41 am: <i>Results of the MGNET Adapting Disease-Specific Outcome Measures Pilot Trial for Telehealth in MG (Adapt-TELEMG)</i> Amanda C. Guidon, MD</p> <p>11:55 am: <i>Thank You's</i> Samantha Masterson, CEO, MGFA</p>
No CME/CEU	
08:00 am - 09:30 am	<p>The Good, Bad, and Ugly: Planning NCS With Case Studies <i>Grand Sonoran H-I</i></p> <p>Review the instrumentation, pitfalls, and troubleshooting, as well as plan a NCS with case studies.</p> <p>This is a technologist-focused session. Anyone who has interest in this topic is welcome to attend.</p> <p>8:00 am: <i>Tips, Tricks, and Pitfalls</i> James L. Lewis, R.NCS.T.</p> <p>8:25 am: <i>Planning NCS With Case Studies</i> Daniel B. Simmons, MD</p> <p>8:50 am: <i>Lower Extremity NCS With Case Studies</i> Daniel Pierce, MD</p>
Session	
1.50 CME/CEU	
09:30 am - 10:15 am	<p>AI Cartoon Portrait in the AANEM Lounge <i>Grand Canyon Foyer</i></p> <p>Visit the AANEM Lounge to transform your image into a whimsical drawing. The process is as quick and easy as it is magical. AANEM staff will snap a photograph, upload it, and watch as AI works its charm. Witness your picture evolve before your eyes into a delightful cartoon with a sprinkle of charm.</p>
Social Event	
09:30 am - 10:00 am	<p>Coffee Break <i>Grand Canyon Foyer</i></p> <p>Enjoy complimentary coffee and use break time to network and socialize with your colleagues.</p>
Social Event	

10:00 am - 11:30 am	<p>W02B Autonomic Testing Using Live Demonstration</p> <p>Familiarize participants with three quantitative tests of autonomic function using specialized equipment designed for autonomic reflex function testing, including sudomotor testing, cardiovascular testing with heart-rate response to deep breathing, and Valsalva maneuver testing to evaluate cardiovascular and adrenergic function.</p> <p>Jasvinder P. Chawla, MBBS, MD, MBA</p>
Workshop	
1.50 CME/CEU	
10:00 am - 11:30 am	<p>W11B Advanced EMG and US of Respiratory System</p> <p>Perform phrenic NCSs; utilize techniques for safe needle EMG of the diaphragm (including US assisted); localize and perform needle EMG of chest wall muscles, which are helpful in the diagnosis of respiratory failure; and utilize US for evaluating thickness and contractility of the diaphragm.</p> <p>Andrea J. Boon, MD William J. Litchy, MD</p>
Workshop	
1.50 CME	
10:00 am - 11:30 am	<p>W45B Cervical Radiculopathy/Brachial Plexopathy</p> <p>Discuss the anatomy of the cervical roots and the brachial plexus; describe the role of the sensory NCS in the initial localization of axon loss processes to preganglionic versus ganglionic/postganglionic; illustrate the role of the sensory NCS in localizing focal lesions to specific regions of the brachial plexus (root, trunk, division, cord, terminal nerve); discuss the role of motor NCS in further localizing the lesion and in defining its severity; describe the role of the needle EMG in confirming the NCS findings and in defining the temporal features of the disorder (slowly progressive, rapidly progressive, acute, subacute, chronic); and demonstrate this information using illustrative cases.</p> <p>Ghazala R. Hayat, MD</p>
Workshop	
1.50 CME	

Wednesday | Nov. 1

10:00 am -
11:30 am

W55B EDX Approach to Myopathies: Needle EMG of Unusual Muscles

Workshop

Discuss the role of EDX testing in myopathies; identify EDX findings in muscle disorders; determine muscle selection criteria for EDX in patients with suspected myopathy; and use the EDX findings to generate a differential diagnosis.

1.50 CME

Elie Naddaf, MD

10:00 am -
11:30 am

W58B Basic US of Upper Limb Nerves - Median and Ulnar From Elbow to Wrist

Workshop

Describe basic principles of US imaging and equipment requirements; demonstrate scanning technique of the median and ulnar nerves, dynamic testing, and measurements; and discuss sonographic findings of common entrapment neuropathies.

1.50
CME/CEU

Elena Shanina, MD, PhD

10:00 am -
11:30 am

W59B Advanced US Guidance for Neurotoxins

Workshop

Discuss the pros and cons of using in-plane and out-of-plane US views to guide needle placement; compare and contrast the use of EMG needle guidance, nerve stimulation, and US for identifying neurotoxin targets in patients; and identify common targets for needle-guided injections using US.

1.50 CME

Michael C. Munin, MD

10:00 am -
11:30 am

W70B Expert US

Workshop

Demonstrate advanced US practices involving challenging and complicated nerves and measurement techniques of the peripheral nerve in the upper and lower limbs.

1.50
CME/CEU

Jeffrey A. Strakowski, MD

10:00 am -
11:30 am

W76B Basic US of Upper Limb Nerves

Workshop

Describe basic principles of US imaging and equipment requirements; demonstrate scanning technique of the median and ulnar nerves, dynamic testing, and measurements; and discuss sonographic findings of common entrapment neuropathies.

1.50
CME/CEU

Lester S. Duplechan, MD

10:00 am -
11:30 am

W86B Advanced US of Upper Limb Nerves

Workshop

Explain recommended transducer frequencies and image optimization methods for imaging of upper extremity nerves; demonstrate scanning technique and measurement of the following nerves: musculocutaneous, MAC, and LAC; describe and demonstrate the branching pattern of radial nerve from arm to wrist including PIN and superficial radial sensory; discuss sonographic findings of the most frequent abnormalities affecting these nerves; and list expected findings in structures other than nerve that may be significant. This workshop will focus on musculocutaneous, radial from arm to wrist including PIN and superficial radial sensory, MAC, and LAC.

1.50
CME/CEU

Monika Krzesniak-Swinarska, MD

10:00 am -
11:30 am

W98B Getting the Most out of Your US System

Workshop

Review the basics of how US systems work and the system settings needed to perform NMUS. Demonstrate the basics of obtaining nerve and muscle images, along with potential pitfalls. Discuss how basic NMUS is applied in EDX laboratories.

1.50
CME/CEU

Lisa D. Hobson-Webb, MD

Wednesday | Nov. 1

10:00 am -
11:30 am

Adult Brachial Plexus

Grand Sonoran C-D

Session

Review the process of evaluating an adult in the multidisciplinary clinic of Michigan for brachial plexus, including the initial assessment with neurology, neurosurgery, physical medicine, and occupational therapy to determine which tests need to be done, e.g. EMG, MRI, and US. Demonstrate how that information is used to determine if an individual needs surgery or not and which surgery is the most helpful in getting the most use out of the arm. We will follow a real case to highlight this process.

This is a technologist-focused session. Anyone who has interest in this topic is welcome to attend.

10:00 am: *Introduction*

Teresa Spiegelberg, CNCT, R.NCS.T., R.EEGT, BS

10:05 am: *Adult Brachial Plexus Injury - Evaluation, Ancillary Studies, and Reconstruction*
Yamaan Saadeh, MD

10:25 am: *Pre-Surgical EMG*
Ann A. Little, MD

10:40 am: *Adult Brachial Plexus Injury*
Sarah Johnson, MS, OTRL

1.50
CME/CEU

10:00 am -
11:30 am

Lifestyle Medicine for Common Conditions Encountered in the EDX Laboratory

Grand Sonoran E

Session

Define lifestyle medicine; recognize six key lifestyle interventions to treat lifestyle-related chronic conditions; recommend evidence-based lifestyle medicine interventions for neurological, spine, and MSK conditions commonly encountered in the EDX laboratory; utilize motivational interviewing to assist patients with behavior change; and explore further educational and certification opportunities in lifestyle medicine.

10:00 am: *Introduction to Lifestyle Medicine*
Eric J. Morrison, MD

10:20 am: *Lifestyle Medicine for Spine-Related Pathologies*
Evan R. Zeldin, MD

10:20 am: *Lifestyle Medicine for Spine-Related Pathologies*
Eric J. Morrison, MD

10:40 am: *Lifestyle Medicine for Common Conditions Encountered in the EDX Laboratory*
Evan R. Zeldin, MD

1.50
CME/CEU

10:00 am -
11:30 am

NMDs and Pregnancy

Grand Sonoran H-I

Session

Recognize the challenges and complex decision making in managing NMD patients contemplating pregnancy; identify the incidence of various NMD in pregnancy, impact of NMD on conception, potential complications during labor and delivery, and the need for continued monitoring and a multi-disciplinary approach in management. The session will also focus on pre-pregnancy counseling and the effect of the medications (per FDA categorization) and other treatments on fertility, pregnancy, fetal development, and lactation.

10:00 am: *Compression and Nutritional Neuropathies in Pregnancy*
Iram Zaman, DO

10:25 am: *Incidence and Management of Inflammatory Neuropathies During Pregnancy*
Anza B. Memon, MD

10:45 am: *MG and Pregnancy Considerations*
Kavita M. Grover, MD

1.50
CME/CEU

Wednesday | Nov. 1

10:00 am -
11:30 am

NMUS in Children

Grand Sonoran J-K

Session

NMUS is a painless technique, which makes it ideal for the assessment of suspected NMDs in children. This session will describe the unique aspects of using NMUS when assessing children, and how US can be combined with EDX in this population.

10:00 am: *Introduction*
Michael S. Cartwright, MD

10:10 am: *Muscle US in Children*
Craig M. Zaidman, MD

10:40 am: *Nerve US in Children*
Michael S. Cartwright, MD

1.50
CME/CEU

10:00 am -
11:30 am

US in Performing Arts Medicine

Grand Sonoran F

Session

Discuss common neurogenic and non-neurogenic, MSK mimics of pain in performing artists; recognize common risk factors for injury in the performing artist; and describe NCS and US techniques that may be used to facilitate accurate diagnosis of common presentations in the performing artist.

10:00 am: *Introduction to Performing Arts Medicine*
Rebecca Dutton, MD

10:40 am: *Nerve Injuries in the Performing Artist*
Dale Colorado, DO, MPH

11:10 am: *Shoulder/Neck Pathology in Musicians*
Emily Miller Olson, MD

1.50
CME/CEU

11:30 am -
12:30 pm

AI Cartoon Portrait in the AANEM Lounge

Grand Canyon Foyer

Social Event

Visit the AANEM Lounge to transform your image into a whimsical drawing. The process is as quick and easy as it is magical. AANEM staff will snap a photograph, upload it, and watch as AI works its charm. Witness your picture evolve before your eyes into a delightful cartoon with a sprinkle of charm.

11:45 am -
01:00 pm

Industry Forum by Takeda

Wildflower Ballroom

Industry
Forum

The Search for CIDP

Are you ready to find the patient with CIDP? Join our expert faculty to explore a series of clinical cases and discover the signs and symptoms that differentiate CIDP from its mimics. This will be a highly interactive and practical session in which you make the decisions.

- Recognize the key symptoms of CIDP to assist in reaching an early diagnosis
- Review the diagnostic guidelines for CIDP
- Understand how to differentiate CIDP from its mimics
- Explore the current and promising future CIDP management strategies

Agenda:

- 12:00 Welcome, introductions and objectives: Karissa Gable, MD (Chair)
- 12:05 Understanding CIDP and the clinical landscape: Rebecca Traub, MD
- 12:15 Searching for answers: Accurately identifying CIDP and avoiding common misdiagnoses: Rebecca Traub, MD and Katie Beadon, MD, moderated by Karissa Gable, MD
- 12:45 Solving the puzzle: Exploring current and future management strategies: Katie Beadon, MD
- 12:55 Q&A with faculty: All faculty
- 13:00 Summary and close: Karissa Gable, MD

This activity is sponsored by Takeda and is not part of the official scientific program of AANEM.

Food will be provided by AANEM for session attendees. Seating is limited.

- 11:45 am: Registration
- 12:00 pm: Presentation

No CME/CEU

Wednesday | Nov. 1

11:45 am -
01:00 pm

Industry
Forum

Industry Forum by UCB

Grand Saguario East-West

New Horizons: Navigating a New Treatment Landscape for Generalized Myasthenia Gravis

Join us for a patient-focused, interactive symposium where we will navigate the new treatment landscape for generalized myasthenia gravis (gMG). The audience will be invited to choose, using interactive polling, which clinical cases they would like the panel of renowned gMG experts to discuss.

Be part of the conversation featuring three specialists in the field who will lead an informative and dynamic panel discussion, highlighting practical steps to optimize gMG management to ensure that we are meeting patients' treatment goals and expectations.

- Discuss the need for early and sustained control of the fluctuating symptoms and unpredictable exacerbations that impact patients living with gMG, in an era of new targeted therapies
- Emphasize the importance of optionality in gMG care to support the needs of each patient
- Identify treatment considerations for the use of new modalities in gMG, by reviewing patient cases and recent clinical data

Presenters:

James F. Howard, Jr., MD (Chair)
Miriam Freimer, MD
Nicholas Silvestri, MD

This activity is sponsored by UCB and is not part of the official scientific program of AANEM.

Food will be provided by AANEM for session attendees. Seating is limited.

11:45 am: Registration
12:00 pm: Presentation

No CME/CEU

01:30 pm -
03:00 pm

Workshop

W02C Autonomic Testing Using Live Demonstration

Familiarize participants with three quantitative tests of autonomic function using specialized equipment designed for autonomic reflex function testing including sudomotor testing; cardiovagal testing with heart-rate response to deep breathing; and Valsalva maneuver testing to evaluate cardiovagal and adrenergic function.

1.50
CME/CEU

Amanda C. Peltier, MD, MS

01:30 pm -
03:00 pm

Workshop

W07C SFEMG and Measuring Jitter Using Concentric Needle

Demonstrate how jitter can be measured using SFEMG and CNE; and identify machine settings and limitations. Must be familiar with the basic concepts of SFEMG techniques.

1.50 CME

Donald B. Sanders, MD

Janice M. Massey, MD

01:30 pm -
03:00 pm

Workshop

W11C Advanced EMG and US of Respiratory System

Perform phrenic NCSs; utilize techniques for safe needle EMG of the diaphragm (including US assisted); localize and perform needle EMG of chest wall muscles, which are helpful in the diagnosis of respiratory failure; and utilize US for evaluating thickness and contractility of the diaphragm.

1.50 CME

Andrea J. Boon, MD

William J. Litchy, MD

01:30 pm -
03:00 pm

Workshop

W16C MUP Quantitation

The MUP is a fundamental signal in routine EMG. This workshop will demonstrate the physiologic composition of the MUP with its morphologic analogue (the motor unit), how it is interactively recorded by manipulating the EMG system, and how the MUP signals are altered in NMDs. An objective quantitative approach permits the physician to assess muscles as if performing an electrophysiologic biopsy.

1.50 CME

Paul E. Barkhaus, MD

Wednesday | Nov. 1

01:30 pm - 03:00 pm **W18C Basic NMUS**

Workshop

Obtain images with transverse and longitudinal transducer positions; describe how to manipulate basic US instrumentation to include focal depth, Doppler flow, and transducer frequency; describe how muscle, nerve, and tendon appear with US; and discuss the principle of anisotropy.

1.50
CME/CEU

Michael S. Cartwright, MD

01:30 pm - 03:00 pm **W55C Myopathies: EDX Approach**

Workshop

Discuss the role of EDX testing in myopathies; identify EDX findings in muscle disorders; determine muscle selection criteria for EDX in patients with suspected myopathy; and use the EDX findings to generate a differential diagnosis.

1.50 CME

Hani A. Kushlaf, MD

01:30 pm - 03:00 pm **W59C Advanced US Guidance for Neurotoxins**

Workshop

Discuss the pros and cons of using in-plane and out-of-plane US views to guide needle placement; compare and contrast the use of EMG needle guidance, nerve stimulation, and US for identifying neurotoxin targets in patients; and identify, using US, muscles in the upper and lower limbs commonly targeted for chemodenervation procedures.

1.50 CME

Katharine E. Alter, MD

01:30 pm - 03:00 pm **W74C Advanced Sonographic Needle Guidance for Carpal Tunnel Injections**

Workshop

Explain sono-anatomy of the carpal tunnel and adjacent structures; discuss approaches for sonographic needle imaging; compare US-guided and "blind method" injections for treatment of CTS; and distinguish structural abnormalities and common anatomic variations that may affect the procedure.

1.50 CME

Elena Shanina, MD, PhD

01:30 pm - 03:00 pm **W81C Basic US of Lower Limb Nerves**

Workshop

Explain transducer frequencies for lower extremity nerve US and transducer choice; demonstrate Morton's neuroma using echogenicity and methods; trace the sciatic nerve from the ischiofemoral outlet to the posterior thigh; identify muscles for EMG and chemodenervation, and safe needle approaches; demonstrate branching patterns of sciatic, tibial, fibular, and sural nerves; identify expected US findings of nerve entrapment and non-nerve structures.

1.50
CME/CEU

Lester S. Duplechan, MD

01:30 pm - 03:00 pm **W99C Facial NCS and Blink Reflexes**

Workshop

Perform neurophysiological testing of the facial nerve and blink reflexes. Discuss the principles and practice of studying the facial NCS and the blink reflex with electric stimulation and identify the clinical values and limitations of the blink reflex as an EDX study.

1.50
CME/CEU

Bashar Katirji, MD

01:30 pm - 03:00 pm **Challenging Imaging Cases**

Grand Sonoran G

Session

Identify challenging imaging findings encountered on NMUS including anomalies of nerve, muscle, and bone; neoplastic lesions of nerve and nearby structures; and unusual pathologies of nerve and muscle.

1.50
CME/CEU

Monika Krzesniak-Swinarska, MD

Christopher Geiger, DO

David C. Preston, MD

Wednesday | Nov. 1

01:30 pm -
03:00 pm

Session

Diagnosis and Treatment: Breakthrough Genetic Testing for NMDs

Grand Sonoran F

Recognize how current testing platforms lead to the latest advances in population genomic-driven drug discovery; apply the principles of genetic diagnosis/interpretation in the NM clinic and understand the transition of novel molecular therapeutics into practice; and review ongoing technological advances and clinical trial data utilizing gene therapies for NMD to identify therapeutics that are likely to be in the clinic within the next 5 years.

1:30 pm: *Update on Forthcoming Genetic and Molecular Therapeutics for NMDs*

Nicolas N. Madigan, MBBCh, PhD

1:55 pm: *Application of Genetic Testing and Novel Molecular Therapeutics in the NM Clinic*

Jennifer M. Martinez-Thompson, MD

2:20 pm: *Genomics to Gene Therapy in NMDs*

Zhiyv N. Niu, PhD, FACMG

1.50
CME/CEU

01:30 pm -
03:00 pm

Session

MUAP Recruitment Analysis Made Simple

Grand Sonoran C-D

Recognize MUAP firing rates with a high degree of accuracy, determine the recruitment ratios using auditory recognition skills, and determine whether recruitment is normal or abnormal in a variety of examples.

Devon I. Rubin, MD

1.50
CME/CEU

01:30 pm -
03:00 pm

Session

The Spectrum of NM Complications of SARS-CoV-2 Infection and Vaccination

Grand Sonoran J-K

Describe the mechanisms of SARS-CoV-2 infections and vaccine-induced immunity and autoimmunity with respect to immune-mediated NMDs; recognize the facts from the myths surrounding SARS-CoV-2 vaccine safety issues for NMDs and provide a balanced analysis of vaccine risks and benefits; discuss the current evidence-based medicine recommendations regarding the diagnosis and treatment of NM manifestations of SARS-CoV-2 infection including post-acute sequelae of SARS-CoV-2 infection; and discuss general rehabilitation principles for NM manifestations of SARS-CoV-2 infection, including post-acute sequelae and interventions to avoid intubation and facilitate decannulation of patients who underwent tracheotomies.

1:30 pm: *The Spectrum of NM Complications of SARS-CoV-2 Infection and Vaccination: The Known and the Speculative*
Nizar Souayah, MD

2:10 pm: *Management of Respiratory Complications of SARS-CoV-2*
John R. Bach, MD

1.50
CME/CEU

01:30 pm -
03:00 pm

Session

Toxic Myopathies and Neuropathies

Grand Sonoran E

Identify iatrogenic and noniatrogenic causes of muscle and nerve toxicity; articulate the mechanisms underlying muscle and nerve toxicity; diagnose and classify various forms of toxic myopathies and neuropathies based on their clinical presentation, EDX findings, and histopathologic characteristics; and manage toxic myopathies and neuropathies.

1:30 pm: *Introduction*
Mohammad K. Salajegheh, MD

1:35 pm: *Toxic Neuropathies*
Mohammad K. Salajegheh, MD

2:10 pm: *Toxic Myopathies*
Christopher Doughty, MD

1.50
CME/CEU

Wednesday | Nov. 1

01:30 pm -
03:00 pm

Updates on CMT, GBS, and Diabetic Neuropathy

Grand Sonoran H-I

Session

Review advances in the development of treatments for CMT; discuss the activities and results of research collaborations through the International GBS Outcome Study; and review the clinical picture, diagnosis, and treatment of diabetic radiculoplexus neuropathy.

This activity has been planned and implemented in accordance with the accreditation requirements and policies of the ACCME through joint providership of AANEM and the Peripheral Nerve Society. The AANEM is accredited by the ACCME to provide continuing medical education for physicians.

1:30 pm: Emerging Treatments for Inherited Neuropathies

Vera Fridman, MD

1:55 pm: Updates From the International GBS Outcome Study Group

Mazen M. Dimachkie, MD

2:20 pm: Diagnosis and Management of Diabetic Radiculoplexus Neuropathies

Marcus Vinicius R. Pinto, MD

1.50
CME/CEU

03:00 pm -
04:00 pm

Coffee Break

Grand Canyon Foyer

Social Event

Enjoy complimentary coffee and use break time to network and socialize with your colleagues.

03:00 pm -
03:45 pm

Speed Networking Activity

Grand Canyon Foyer

Social Event

Join a fun, easy way to network at the AANEM Annual Meeting, while building connections with peers, leaders, and other professionals in NM and EDX medicine. Plan to attend our networking event early, because space is limited. Networkers will make several connections during the session, so don't forget your business cards.

04:00 pm -
05:30 pm

Plenary 1: Disability and NMDs: The Whole Enchilada

Grand Sonoran E-G

Session

The aging of the population is one of the most important global challenges of the 21st century. Aging is associated with loss of functioning and sarcopenia is one of its most important contributors. We will examine the diagnostic criteria for sarcopenia and discuss the most recent research related to the cellular and physiological changes associated with it. The potential contribution of various types of exercise to the rehabilitation of older adults will also be discussed.

Note: AANEM's Annual Business Meeting will be held at the beginning of this session. Fellow, Active, and Research members will have the opportunity to vote and are encouraged to attend.

4:00 pm: Introduction

Earl J. Craig, MD

4:05 pm: Disability and NMDs

Robert W. Irwin, MD

4:25 pm: Annual Business Meeting: Election of Officers

Robert W. Irwin, MD

4:35 pm: Recognize Outgoing Committee Members

Robert W. Irwin, MD

4:40 pm: Introduction

Robert W. Irwin, MD

4:45 pm: Sarcopenia: Aging of Skeletal Muscle and Benefits of Exercise

Walter Frontera, MD

5:15 pm: Awards: Golseth, Best Abstract, Best Abstract Runner-up, Technologist Best Abstract, Medical Student Research, Residency and Fellowship Members

Robert W. Irwin, MD

5:30 pm: Closing

Robert W. Irwin, MD

1.50
CME/CEU

05:30 pm -
07:00 pm

Exhibit Hall

Grand Canyon Ballroom

Social Event

Learn about the products that help you provide quality care for your patients. Stop by the Exhibit Hall and see the latest innovations in our industry.

Wednesday | Nov. 1

05:30 pm -
07:00 pm

President's Reception

Grand Canyon Ballroom

Social Event

The President's Reception is the official kickoff event of the meeting each year. Socialize with attendees and exhibitors while enjoying appetizers, wine, and refreshments. Sponsored by UCB.

Support NM Research and Education - Bid at the ANF Silent Auction

Make a meaningful impact on the lives of individuals affected by NMDs by participating in the ANF silent auction. All proceeds directly fund NM research and education, helping advance critical efforts in the field.

Bidding ends at 4 pm on Thursday in Grand Canyon Foyer.



AANEM Annual Business Meeting

The AANEM Business Meeting will be held at the beginning of Plenary 1 on Wednesday, Nov. 1.

Attend to hear a report on AANEM's finances and recent activities of importance to membership.

Fellow, active, and research members will have the opportunity to vote on new board nominations.



Your adult gMG patients may not be able to walk from here to booth 409

But you can take an important step to help them:

Visit our booth and attend the Industry Forum

Complement Science Role in the gMG Therapeutic Landscape: A Case-Based Approach to Managing Generalized Myasthenia Gravis (gMG)

Please join us as expert moderators walk through an immersive case-based presentation of adult gMG patients who are anti-AChR antibody-positive. Faculty moderators will review key clinical data of a therapeutic option and present real-world patient cases based on clinical experiences.

Friday, November 3, 2023

12:15 p.m. (Doors open at 12 p.m.) | Desert Suites 3/5

Food will be provided by AANEM for session attendees. Seating is limited.



Suraj Muley, MD, FAAN, FACP
Medical Director, Neuroimmunology
Bob Bové Neuroscience Institute
Honor Health



Nicholas J. Silvestri, MD, FAAN
Clinical Associate Professor of Neurology, Associate Dean
for Student & Academic Affairs
Dept. of Neurology, Jacobs School of Medicine & Biomedical Sciences

AANEM Annual Meeting

Attend presentation virtually: bit.ly/AANEMwebinar

This activity will be held during the AANEM Annual Meeting. It is not part of the official scientific program of the AANEM.

Thursday | Nov. 2

06:45 am -
08:00 am

Industry
Forum

Industry Forum by Amylyx Pharmaceuticals

Grand Saguaro East-West

Treatment Approach and Experience With
RELYVRIO®

You're invited to an engaging hour of
conversation and Q&A with a panel of HCPs
and hear from a patient taking RELYVRIO®

- Varying diagnostic journey for patients taking
RELYVRIO®
- Incorporation of RELYVRIO into the
treatment approach for patients

Presenters:

Erik Pioro, MD, PhD
Terry Heiman-Patterson, MD

This activity is sponsored by Amylyx
Pharmaceuticals and is not part of the official
scientific program of AANEM.

Food will be provided by AANEM for session
attendees. Seating is limited.

6:45 am: Registration
7:00 am: Presentation

No CME/CEU

07:30 am -
09:00 pm

Social Event

Poster Hall

Grand Saguaro North-South

Stroll through the Poster Hall to view this
year's research. Poster authors will be
available at specified times to discuss their
research.

08:00 am -
09:30 am

Workshop

W02RTA Autonomic Testing

Familiarize participants with three quantitative
tests of autonomic function using specialized
equipment designed for autonomic reflex
function testing, including sudomotor testing,
cardiovascular testing with heart-rate response to
deep breathing, and Valsalva maneuver
testing to evaluate cardiovascular and adrenergic
function.

Limited to residents, fellows, technologists,
and medical students only.

1.50
CME/CEU

Amanda C. Peltier, MD, MS

08:00 am -
09:30 am

Workshop

W21RTA NCS Pitfalls

Identify common instrumentation, physiologic,
and operator errors; alter recording electrode
montages and use the instrument's filters to
help optimize the recording of motor and
sensory potentials; and minimize stimulus
artifact interference with waveform recording.

Limited to residents, fellows, technologists,
and medical students only.

1.50
CME/CEU

Bassam A. Bassam, MD

08:00 am -
09:30 am

Workshop

W91RTA EDX Evaluation of NMJ Transmission Disorder

Discuss the EDX approach to delineate NMJ
disorders using RNS; perform RNS of hand,
shoulder, and facial muscles; and discern
patterns of findings suggestive of disease
versus technical artifact.

Limited to residents, fellows, and medical
students only.

1.50 CME

Ruple S. Laughlin, MD

Thursday | Nov. 2

08:00 am -
09:30 am

W93RTA Basic MSK and Muscle US

Workshop

This introductory workshop in NMUS will review typical indications for neuro-MSK US, as well as recognition and scanning techniques for key peripheral nerve and MSK. Hands-on scanning will be emphasized.

Limited to residents, fellows, and medical students only.

Emily Miller Olson, MD

Rebecca Dutton, MD

1.50 CME

08:00 am -
09:30 am

Basics of NCS and Needle EMG - Part 1

Grand Sonoran E

Session

Articulate the basic concepts underlying nerve conduction and approach to the study; conduct and interpret NCSs in the upper and lower extremities and identify anomalous innervations; utilize specialized studies including RNS, cranial nerve studies, and blink reflex; apply needle EMG for the diagnosis of NMDs; and recognize common pitfalls and explain technical factors and important safety considerations affecting the study.

8:00 am: *Introduction*

Kelly G. Gwathmey, MD

8:10 am: *Basic NCS and Approach to Study*

Mohammad K. Salajegheh, MD

8:50 am: *Upper and Lower Extremity NCS*

Kelly G. Gwathmey, MD

1.50
CME/CEU

08:00 am -
09:30 am

Cutting-Edge US and NM Imaging

Grand Sonoran C-D

Session

Assess the role of muscle US in diagnosing FSHD and monitoring its progression; review how NMUS is used in the intensive care setting; and discuss the need for improved shear wave imaging of muscle, alongside its development.

8:00 am: *Muscle US as a Biomarker for FSHD*

Sjan Teeselink, MD

8:25 am: *NMUS in the ICU*

Aarti Sarwal, MD

8:50 am: *The Path to 3-D Shear Wave Muscle Imaging*

Lisa D. Hobson-Webb, MD

1.50
CME/CEU

08:00 am -
09:30 am

Inflammatory Myopathies

Grand Sonoran J-K

Session

Utilize myositis specific autoantibodies and muscle pathology in diagnosis of patients with suspected inflammatory myopathies; diagnose and treat patients with various subtypes of inflammatory myopathies; and recognize the importance of multidisciplinary approaches in the management of patients with inflammatory myopathies.

8:00 am: *Introduction*

Teerin Liewluck, MD

8:03 am: *Dermatomyositis and Antisynthetase Syndrome in 2023*

Rohit Aggarwal, MD

8:23 am: *Inclusion Body Myositis in 2023*

Anthony A. Amato, MD

8:43 am: *Immune Mediated Necrotizing Myopathy in 2023*

Andrew L. Mammen, MD, PhD

9:03 am: *Immune Checkpoint Inhibitor in Myopathy in 2023*

Teerin Liewluck, MD

1.50
CME/CEU

08:00 am -
09:30 am

MG: How Far Have We Come?

Grand Sonoran F

Session

Identify antibodies supportive of the diagnosis of MG; describe the clinical presentation of MG based on Ab status; discuss the utility of other confirmatory tests for MG; review the impact of MG on physical function and well-being; discuss standard MG outcome measures in the clinic; describe the assessment and challenges of managing MG fatigue; discuss established therapies for MG; discuss the effectiveness of thymectomy, rituximab, and methotrexate; review the definition of refractory MG; and describe novel therapies in the clinic and promising therapies in research.

8:00 am: *Introduction*

Mazen M. Dimachkie, MD

8:05 am: *Autoantibodies and Phenotypes in MG*

Mamatha Pasnoor, MD

8:30 am: *Measuring Change in MG*

Srikanth Muppidi, MD

8:55 am: *The Evolving Therapeutics of MG*

Mazen M. Dimachkie, MD

1.50
CME/CEU

Thursday | Nov. 2

08:00 am -
09:30 am

MSK US for MSK Conditions Encountered During an NM Evaluation

Grand Sonoran G

Session

Identify common MSK problems that can confound symptoms and NM evaluation with the use of high frequency US; discuss MSK dilemmas facing NM specialists; and describe the techniques for identifying confounding concomitant MSK comorbidities. This will be an interactive session that will include PowerPoint slides, live discussion, and live US demonstrations.

Craig M. Zaidman, MD

Jeffrey A. Strakowski, MD

1.50
CME/CEU

08:00 am -
09:30 am

The Role of Rehabilitation Medicine in NM Care: The Value of Integrating PM&R Into the Care Plan

Grand Sonoran H-I

Session

Describe how the rehabilitation model of care differs from the medical model of care, review the application and value of functional outcomes in care of the NM patient, describe the role of the physiatrist in care of the NM patient, and review the past, present, and future roles of rehabilitation medicine in the care of the NM patient.

Looking Back to Inform the Future: The History of NM PM&R

Ileana Howard, MD

Venn We Get Together: Optimizing PM&R Care Integration

Erik R. Ensrud, MD

Venn We Get Together: Optimizing PM&R Care Integration

Vovanti Jones, MD

Expanding Horizons: The Role of PM&R in Evolving NM Care Models

Kathryn A. Mosher, MD

Expanding Horizons: The Role of PM&R in Evolving NM Care Models

Robert Rinaldi, MD

1.50
CME/CEU

09:00 am -
04:00 pm

Exhibit Hall

Grand Canyon Ballroom

Social Event

Learn about the products that help you provide quality care for your patients. Stop by the Exhibit Hall and see the latest innovations in our industry.

09:30 am -
10:00 am

Coffee Break

Grand Canyon Ballroom

Social Event

Enjoy complimentary coffee and use break time to network and socialize with your colleagues.

09:40 am -
10:00 am

Presentation Stage by Janssen Pharmaceuticals, Inc.

Presentation Stage A - Grand Canyon 3

Presentation Stage

The next frontier in MG: remaining unmet needs

Presenter: Said R. Beydoun, MD

This activity is sponsored and is not part of the official scientific program of AANEM.

No CME/CEU

09:40 am -
10:00 am

Presentation Stage by Takeda

Presentation Stage B - Grand Canyon 1

Presentation Stage

Chronic Inflammatory Demyelinating Polyneuropathy: Overview of Disease Landscape, Diagnosis, and Management Strategies

This activity is sponsored and is not part of the official scientific program of AANEM.

No CME/CEU

Thursday | Nov. 2

10:00 am -
12:00 pm

Session

Plenary 2: Disability and NMDs: The Whole Enchilada

Grand Sonoran E-G

Discuss how the health care team can support patients at critical junctures in their disease course, including at the time of diagnosis, loss of key functions, increased medical intervention, transition to adulthood, and palliative period. Research related to coping, grief and loss, anxiety and depression, social isolation, and social support and systems will be examined.

Discuss experiences as an athlete and coach and how sport can be used and adapted regardless of the situation to benefit individuals' health, fitness, self-esteem, and confidence. A person who has a disability should not be excluded from sport, rather should be encouraged every step of the way as it has added benefits for people with disabilities such as increasing independence and changing societal views on the disabled population.

10:00 am: *Welcome*
Earl J. Craig, MD

10:05 am: *ANF International and IFCN Scholarships*
Robert W. Irwin, MD

10:10 am: *President's Research Initiative Award Recipients*
Robert W. Irwin, MD

10:20 am: *Introduction*
Ileana Howard, MD

10:25 am: *How the Health Care Team Can Support Patients at Critical Points in Their Disease Course*
Jodi Wolff, PhD, MSSW

10:55 am: *Introduction*
Ileana Howard, MD

11:00 am: *Adaptive Athletics: Building Confidence in Everything You Do Regardless of Your Circumstances*
Peter Hughes, MEd

11:30 am: *Closing*
Ileana Howard, MD

2.00
CME/CEU

12:00 pm -
01:15 pm

Industry
Forum

Industry Forum by argenx

Grand Saguro East-West

An Evolving Treatment Landscape: FcRn Targeting With Fc Fragment: VYVGART® (efgartigimod alfa-fcab) and VYVGART® HYTRULO (efgartigimod alfa and hyaluronidase-qvfc) for the Treatment of gMG in Adults Who Are Anti-AChR Antibody Positive

Join us as we discuss the evolving treatment landscape in generalized myasthenia gravis (gMG). Experts will present the role of neonatal Fc receptor (FcRn) inhibition, long-term clinical data for intravenous VYVGART® (efgartigimod alfa-fcab), and clinical data for subcutaneous VYVGART® HYTRULO (efgartigimod alfa and hyaluronidase-qvfc) in adult patients with gMG who are anti-acetylcholine receptor (AChR) antibody positive.

- Review gMG pathophysiology and rationale for targeting FcRn
- Discuss clinical data with VYVGART in anti-AChR antibody positive gMG: ADAPT, ADAPT+, and real-world data
- Understand ADAPT-SC phase 3 data with VYVGART HYTRULO in anti-AChR antibody positive gMG

Presenters:
James F. Howard Jr., MD
Ratna Bhavaraju-Sanka, MD

This activity is sponsored by argenx and is not part of the official scientific program of AANEM.

Food will be provided by AANEM for session attendees. Seating is limited.

12:00 pm: Registration
12:15 pm: Presentation

No CME/CEU

Thursday | Nov. 2

12:00 pm -
01:15 pm

Industry
Forum

Industry Forum by Xeris Pharmaceuticals, Inc.

Desert Conference Suites 3 - 5

It takes more than dichlorphenamide alone to manage Primary Periodic Paralysis (PPP).

Join Xeris Pharmaceuticals® for a presentation on PPP, a rare, genetic condition that causes episodes of muscle weakness and temporary paralysis. Help gain greater control over PPP by decreasing the number, severity and length of episodes, and gain access to patient support programs.

This activity is sponsored by Xeris Pharmaceuticals, Inc. and is not part of the official scientific program of AANEM.

Food will be provided by AANEM for session attendees. Seating is limited.

12:00 pm: Registration
12:15 pm: Presentation

No CME/CEU

01:15 pm -
02:00 pm

Session

Aging and Muscle Disease

Desert Conference Suite 4

Discuss the main clinical and scientific issues related to aging of skeletal muscle and discuss, in an open format, the therapeutic and rehabilitative strategies for primary sarcopenia.

This is an "Ask the Expert" session. There will be an interactive discussion designed around audience participation. There are no handouts nor a planned presentation, and this session will not be included in the Annual Meeting Video Collection.

0.75
CME/CEU

Walter Frontera, MD

01:15 pm -
02:00 pm

Session

ALS and Other Motor Neuron Diseases

Desert Conference Suite 1

Discuss the pathophysiology, diagnostic steps, and new therapies for ALS, as well as the multidisciplinary management of an ALS patient.

This is an APP focused session, designed to help APPs feel more comfortable with the diagnosis of ALS and its management to destigmatize the disease and support early diagnosis.

This is an "Ask the Expert" session. There will be an interactive discussion designed around audience participation. There are no handouts nor a planned presentation, and this session will not be included in the Annual Meeting Video Collection.

0.75
CME/CEU

Senda Ajroud-Driss, MD

01:15 pm -
02:00 pm

Session

Ancillary Testing for Diagnosis of Myopathies

Desert Conference Suite 6

Recognize how to utilize EDX testing, serology, genetic tests, muscle biopsy, or muscle imaging appropriately when encountering myopathy patients.

This is an "Ask the Expert" session. There will be an interactive discussion designed around audience participation. There are no handouts nor a planned presentation, and this session will not be included in the Annual Meeting Video Collection.

0.75
CME/CEU

Teerin Liewluck, MD

Thursday | Nov. 2

01:15 pm -
02:00 pm

Approach to Neuropathy in Systemic Disease

Desert Conference Suite 7

Session

This is an interactive session where attendees can bring cases or ask questions to improve their knowledge about neuropathies in the setting of systemic disease.

This is an "Ask the Expert" session. There will be an interactive discussion designed around audience participation. There are no handouts nor a planned presentation, and this session will not be included in the Annual Meeting Video Collection.

0.75
CME/CEU

Chafic Karam, MD

01:15 pm -
02:45 pm

Basics of NCS and Needle EMG - Part 2

Grand Sonoran E

Session

Articulate the basic concepts underlying nerve conduction and approach to the study; conduct and interpret NCSs in the upper and lower extremities and identify anomalous innervations; utilize specialized studies, including RNS, cranial nerve studies, and blink reflex; apply needle EMG for the diagnosis of NMDs; recognize common pitfalls; and explain technical factors and important safety considerations affecting the study.

1:15 pm: *Specialized Studies and Needle EMG Basics*

Aaron Izenberg, MD

2:05 pm: *Study Pitfalls and Troubleshooting*

Joseph M. Choi, MD

1.50
CME/CEU

01:15 pm -
02:00 pm

Choosing Your NM and EDX Career

President's Boardroom

Session

Select which fellowship (if any) best fits your career interests, review the qualifications and value of each specialty board, and recognize how to approach your first job with purpose and direction.

This is an "Ask the Expert" session. There will be an interactive discussion designed around audience participation. There are no handouts nor a planned presentation, and this session will not be included in the Annual Meeting Video Collection.

0.75
CME/CEU

Colin K. Franz, MD, PhD

01:15 pm -
02:45 pm

EDX and US Evaluation of Neuralgic Amyotrophy - Part 1

Grand Sonoran G

Session

Identify sonographic landmarks and anatomic appearance of the brachial plexus and nerves often affected by neuralgic amyotrophy, and describe an electrophysiologic approach to assessing neuralgic amyotrophy and other NM conditions within the differential diagnosis.

1:15 pm: *Live Demonstration of US Scanning of Neuralgic Amyotrophy*

Jeffrey A. Strakowski, MD

1:45 pm: *EDX Assessment of Neuralgic Amyotrophy*

Devon I. Rubin, MD

1.50
CME/CEU

01:15 pm -
02:45 pm

EDX NM Challenging Cases - Part 1

Grand Sonoran F

Session

Apply and refine the process of diagnostic formulation in NM medicine and clinical EMG and improve patient care by presenting and discussing challenging cases. [This session relies on AANEM members to provide challenging cases.]

1.50
CME/CEU

Bashar Katirji, MD

Thursday | Nov. 2

01:15 pm -
02:00 pm

Mentoring 101

Chairman's Boardroom

Session

Describe the different types of mentoring, compare mentoring to coaching, and explain what to look for in a good mentor/mentee.

This is an "Ask the Expert" session. There will be an interactive discussion designed around audience participation. There are no handouts nor a planned presentation, and this session will not be included in the Annual Meeting Video Collection.

Robert W. Irwin, MD

Ruple S. Laughlin, MD

Hristelina Ilieva, MD, PhD

0.75
CME/CEU

01:15 pm -
02:45 pm

NM Complications of Cancer Care

Grand Sonoran C-D

Session

Familiarize participants with the common NM complications of cancer care, including chemotherapy induced peripheral neuropathy and NM immune related adverse events such as MG, myositis, etc. and review diagnosis, prevention, treatment, and use of current guidelines for these disorders. The session will conclude with real world cases to provide examples of how these principles work in practice.

1:15 pm: *A Practical Guide to Diagnosis, Prevention, and Treatment of Chemotherapy Induced Peripheral Neuropathy*
Noah A. Kolb, MD

1:40 pm: *The NM Complications of Cancer Immunotherapy*
Amanda C. Guidon, MD

2:05 pm: *Real World Cases of CIPN and irAE-NM: From Diagnosis to Treatment*
Brendan L. McNeish, MD

1.50
CME/CEU

01:15 pm -
02:45 pm

Peripheral Nerve and Muscle Pathology: Practical Considerations

Grand Sonoran H-I

Session

Recognize clinical situations to order nerve and muscle biopsies; correlate nerve and muscle pathology with EMG and imaging abnormalities; and review important nerve and muscle biopsy pathology findings for the UCNS board examination.

1:15 pm: *Peripheral Nerve Pathology - Case-Based Approach*
Michelle L. Mauermann, MD

1:45 pm: *Muscle Pathology: Case-Based Discussions*
Aziz Shaibani, MD

1.50
CME/CEU

01:15 pm -
02:00 pm

Recruitment Tips for Training Program Directors

Desert Conference Suite 2

Session

Review trends and developments in residency and fellowship recruitment, and discuss best practices for successfully recruiting NM or clinical neurophysiology fellows to your program.

This is an "Ask the Expert" session. There will be an interactive discussion designed around audience participation. There are no handouts nor a planned presentation, and this session will not be included in the Annual Meeting Video Collection.

0.75
CME/CEU

Zachary N. London, MD

Thursday | Nov. 2

01:15 pm - 02:45 pm **SMA Treatment for Adults: Pearls and Pitfalls**

Grand Sonoran J-K

Session

Identify adult SMA patients who are candidates for disease-modifying therapy, choose the best treatment option, and manage the therapy and other aspects of adult SMA care.

1:15 pm: *Introduction*

Stacy E. Dixon, MD, PhD

1:20 pm: *Use of Nusinersen in Adult SMA Patients and Unique Administration Options*

Manisha K. Korb, MD

1:45 pm: *Use of Risdiplam in Adult SMA Patients and Updates on "Real World" Experience*

Chamindra G. Laverty, MD

2:10 pm: *Management of Adult SMA Patients and Unique Experiences Encountered*

Stacy E. Dixon, MD, PhD

1.50
CME/CEU

02:00 pm - 02:45 pm **APP Approach to Peripheral Neuropathy**

Desert Conference Suite 7

Session

This session is designed for the APP and will foster the development of an organized approach to the evaluation of peripheral neuropathy; review history and examination pearls to unearth "red flag" symptoms and signs which may alter the diagnostic workup; and recognize of the value and limitations of EDX testing, autonomic testing, skin biopsies, and genetic testing.

This is an "Ask the Expert" session. There will be an interactive discussion designed around audience participation. There are no handouts nor a planned presentation, and this session will not be included in the Annual Meeting Video Collection.

0.75
CME/CEU

Elizabeth A. Mauricio, MD

02:00 pm - 02:45 pm **Bracing**

Desert Conference Suite 4

Session

Discuss the types of braces available for patients and the effect each one has on gait, review affordable bracing options for patients whose insurance does not cover orthotics, and match appropriate orthotics to NM diagnoses and gait abnormalities.

This is an "Ask the Expert" session. There will be an interactive discussion designed around audience participation. There are no handouts nor a planned presentation, and this session will not be included in the Annual Meeting Video Collection.

0.75
CME/CEU

Amanda L. Witt, MD

02:00 pm - 02:45 pm **How to Become a Site PI**

President's Boardroom

Session

Understand ways to get involved in industry trials, review general aspects of getting involved in clinical trials, and identify implications of conflict of interest.

This is an "Ask the Expert" session. There will be an interactive discussion designed around audience participation. There are no handouts nor a planned presentation, and this session will not be included in the Annual Meeting Video Collection.

0.75
CME/CEU

Kavita M. Grover, MD

Thursday | Nov. 2

02:00 pm -
02:45 pm

How to Incorporate US in Pediatric Practice

Desert Conference Suite 6

Session

Discuss the benefits and limitations of the US in pediatric NM practice, review age-related changes of the peripheral nervous system, identify how to incorporate nerve US in children, and discuss using muscle US as an appropriate initial screening test in evaluation of NMDs.

This is an "Ask the Expert" session. There will be an interactive discussion designed around audience participation. There are no handouts nor a planned presentation, and this session will not be included in the Annual Meeting Video Collection.

0.75
CME/CEU

Monika Krzesniak-Swinarska, MD

02:00 pm -
02:45 pm

How to Order and Interpret Genetic Testing For NM Genetic Disorders

Desert Conference Suite 1

Session

With the advances in DNA sequencing technology, genetic testing has become widely available, and it is the gold standard to establish the diagnosis of NM genetic disorders. Therefore, understanding the applications and limitations of different testing methods is of importance to the practicing NM specialist.

Discuss how to order different types of genetic testing, identify the adequate type of testing according to specific NM genetic disorders, and interpret the results. We will simulate placing online orders using different laboratory platforms, and discuss how to interpret the results.

This is an "Ask the Expert" session. There will be an interactive discussion designed around audience participation. There are no handouts nor a planned presentation, and this session will not be included in the Annual Meeting Video Collection.

0.75
CME/CEU

Mario Saporta, MD, PhD

02:00 pm -
02:45 pm

Resident and Fellow Career Panel Discussion

Chairman's Boardroom

Session

Find answers to the questions you have about a career in neurology or PM&R whether it relates to training, career options (academic, private practice, VA, pharma), finances, lifestyle, or anything in between!

This is an "Ask the Expert" session. There will be an interactive discussion designed around audience participation. There are no handouts nor a planned presentation, and this session will not be included in the Annual Meeting Video Collection.

John A. Morren, MD

Anthony E. Chiodo, MD, MBA

Ileana Howard, MD

Jeffrey T. Guptill, MD

Collin Grant, MD

Christina N. Fournier, MD

0.75
CME/CEU

02:00 pm -
02:45 pm

TOS

Desert Conference Suite 2

Session

Recognize clinical features of the five entities that are recognized as TOS: true neurogenic, arterial, venous, traumatic neurovascular, and disputed TOS; identify conditions that mimic true neurogenic TOS; discuss useful imaging studies for evaluation of patients with suspected TOS; demonstrate EDX findings of true neurogenic TOS; and address treatment options of TOS.

This is an "Ask the Expert" session. There will be an interactive discussion designed around audience participation. There are no handouts nor a planned presentation, and this session will not be included in the Annual Meeting Video Collection.

0.75
CME/CEU

Vita G. Kesner, MD, PhD

Thursday | Nov. 2

02:45 pm -
03:45 pm

Coffee Break

Grand Canyon Ballroom

Social Event

Enjoy complimentary coffee and use break time to network and socialize with your colleagues.

02:55 pm -
03:15 pm

Presentation Stage by argenx

Presentation Stage A - Grand Canyon 3

Presentation Stage

An Overview of Treatment Options for gMG in Adult Patients Who Are Anti-AChR Antibody Positive

Presenter: Jon P. Durrani, DO

This activity is sponsored and is not part of the official scientific program of AANEM.

No CME/CEU

02:55 pm -
03:15 pm

Presentation Stage by UCB

Presentation Stage B - Grand Canyon 1

Presentation Stage

Learn about a new, FDA-approved treatment for adults with generalized myasthenia gravis

Presenters: Ali Habib, MD and Amit Sachder, MD

This activity is sponsored and is not part of the official scientific program of AANEM.

No CME/CEU

03:25 pm -
03:45 pm

Presentation Stage by Catalyst Pharmaceuticals, Inc.

Presentation Stage B - Grand Canyon 1

Presentation Stage

New Frontiers in Duchenne Muscular Dystrophy

Presenter: Perry Shieh, MD, PhD

This activity is sponsored and is not part of the official scientific program of AANEM.

No CME/CEU

03:25 pm -
03:45 pm

Presentation Stage by Janssen Pharmaceuticals, Inc.

Presentation Stage A - Grand Canyon 3

Presentation Stage

MG Real talk, a Patient-Clinician Conversation

Presenter: Raghav Govindarajan, MD
Lucy Baxter (Patient)

This activity is sponsored and is not part of the official scientific program of AANEM.

No CME/CEU

03:45 pm -
05:15 pm

Building a Successful EDX/NMUS Practice: A Case-Based Approach

Grand Sonoran C-D

Session

Discuss the fundamental elements of a successful medical practice which meets the needs of your "customers" (patients and referral sources) across academic and employed practice settings; implement strategies to align your EDX practice with the needs of patients, referring providers, and the changing landscape in terms of patient access to the EHR; and describe situations where NMUS can help in growing an EDX practice.

3:45 pm: Introduction
John W. Norbury, MD

3:50 pm: Private Practice
Collin Grant, MD

4:10 pm: Academic PM&R/NMUS
Haibi Cai, MD

4:30 pm: Large Academic Neurology
Ruple S. Laughlin, MD

5:00 pm: Panel Discussion
Panel

1.50
CME/CEU

Thursday | Nov. 2

03:45 pm -
05:15 pm

EDX and US Evaluation of Neuralgic Amyotrophy - Part 2

Grand Sonoran G

Session

Recognize the scientific basis for using NMUS characteristics in neuralgic amyotrophy and similar conditions, identify normal and abnormal US findings of the brachial plexus and other nerves frequently affected by neuralgic amyotrophy, and describe effective integration of EDX and US techniques in evaluating neuralgic amyotrophy. The session will utilize case studies.

3:45 pm: NMUS Evaluation
Lisa D. Hobson-Webb, MD

4:15 pm: Clinical Cases Combining the Use of Both EDX and US for Neuralgic Amyotrophy
Jeffrey A. Strakowski, MD

1.50
CME/CEU

03:45 pm -
05:15 pm

EDX NM Challenging Cases - Part 2

Grand Sonoran F

Session

Apply and refine the process of diagnostic formulation in NM medicine and clinical EMG and improve patient care by presenting and discussing challenging cases. [This session relies on AANEM members to provide challenging cases.]

1.50
CME/CEU

Bashar Katirji, MD

03:45 pm -
05:15 pm

Everything You Wanted to Know About Nerves, but Were Afraid to Ask

Grand Sonoran J-K

Session

Review the peripheral nerves and cranial nerves, and review how to assist in performing RNS.

This is a technologist-focused session. Anyone who has interest in this topic is welcome to attend.

4:00 pm: Basic Neurophysiology
Ann A. Little, MD

4:30 pm: Cranial Nerves and Repetitive Stimulation
Clark A. Moser, MD

1.50
CME/CEU

03:45 pm -
05:15 pm

Pediatric EMG Cases

Grand Sonoran H-I

Session

Explore the role of EMG in the pediatric population and give different examples of cases in which it contributed substantially to diagnosis and/or management.

3:45 pm: A Case of Mistaken Identity?
Kathryn A. Mosher, MD

4:05 pm: Pediatric EMG Cases: A Toddler With Deteriorating Gait
Nancy L. Kuntz, MD

4:25 pm: Neuropathies Status Post Cardiac Surgery
Jaclyn C. Omura, MD

4:55 pm: Scapular Dysfunction
Carly J. Rothman, DO

5:15 pm: Pediatric EMG Cases
Gabrielle Nguyen, MD

1.50
CME/CEU

03:45 pm -
05:15 pm

Selected Topics on MG

Grand Sonoran E

Session

Summarize how to discuss with myasthenic patients general care topics such as proper nutrition, exercise, infection control, immunization, and preparation for surgery; recognize medication influence on MG; review how to avoid medication induced exacerbation; and discuss how to diagnose and manage myasthenic crisis.

3:45 pm: General Care of Patients With MG
Yuebing Li, MD, PhD

4:14 pm: Medication Induced Exacerbation of MG
Michael K. Hehir, MD

4:41 pm: Myasthenic Crisis - Diagnosis and Management
Benjamin Claytor, MD

1.50
CME/CEU

Thursday | Nov. 2

05:15 pm -
06:45 pm

Abstract Award Reception

Grand Saguaro North-South

Social Event

Enjoy an evening celebrating research! Socialize with colleagues and abstract authors while enjoying complimentary food, wine, beer, and other refreshments. All abstract authors will be available to discuss their research. Be sure to visit the Golseth, Best Abstract, Best Abstract Runner-Up, and President's Research award-winning abstracts. Sponsored by Catalyst Pharmaceuticals, Inc.

06:00 pm -
06:30 pm

Abstract Poster Session I

Grand Saguaro North-South

Social Event

Authors of abstracts will be available to discuss their research. Stop by to review the information from this year's abstracts and meet the authors. Refer to the Poster Presentations List in the Program for abstract titles and authors that will be available to discuss their research.

07:00 pm -
09:00 pm

EMG Talk

Grand Sonoran F

Social Event

EMG Talk is an interactive, entertaining, lighthearted look at EMG that is sure to provide a lot of laughs. Join the fun and camaraderie, including complimentary drinks and sweet treats. Sponsored by Natus.

Lawrence R. Robinson, MD

William J. Litchy, MD



**Caring For
Patients With
Primary Periodic
Paralysis Can Be
A Challenge.
We're Here
To Help, Every
Step Of The Way.**

**Learn more at
Booth 314**



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Support Members Running for a Cure

Five AANEM members will race for a cure with ANF's charity team in the 2023 TCS New York City Marathon on Sunday, Nov. 5, to help raise awareness and funds for NM research and education!



Rebecca Dutton, MD



Holli Horak, MD



Ileana Howard, MD



Nadia Khalil, MD



Adeel Zubair, MD

Don't let them run alone - show your support by contributing to their fundraising campaigns. All donations will fund critical research and education to improve the lives of those living with NMDs.

www.neuromuscularfoundation.org/marathon

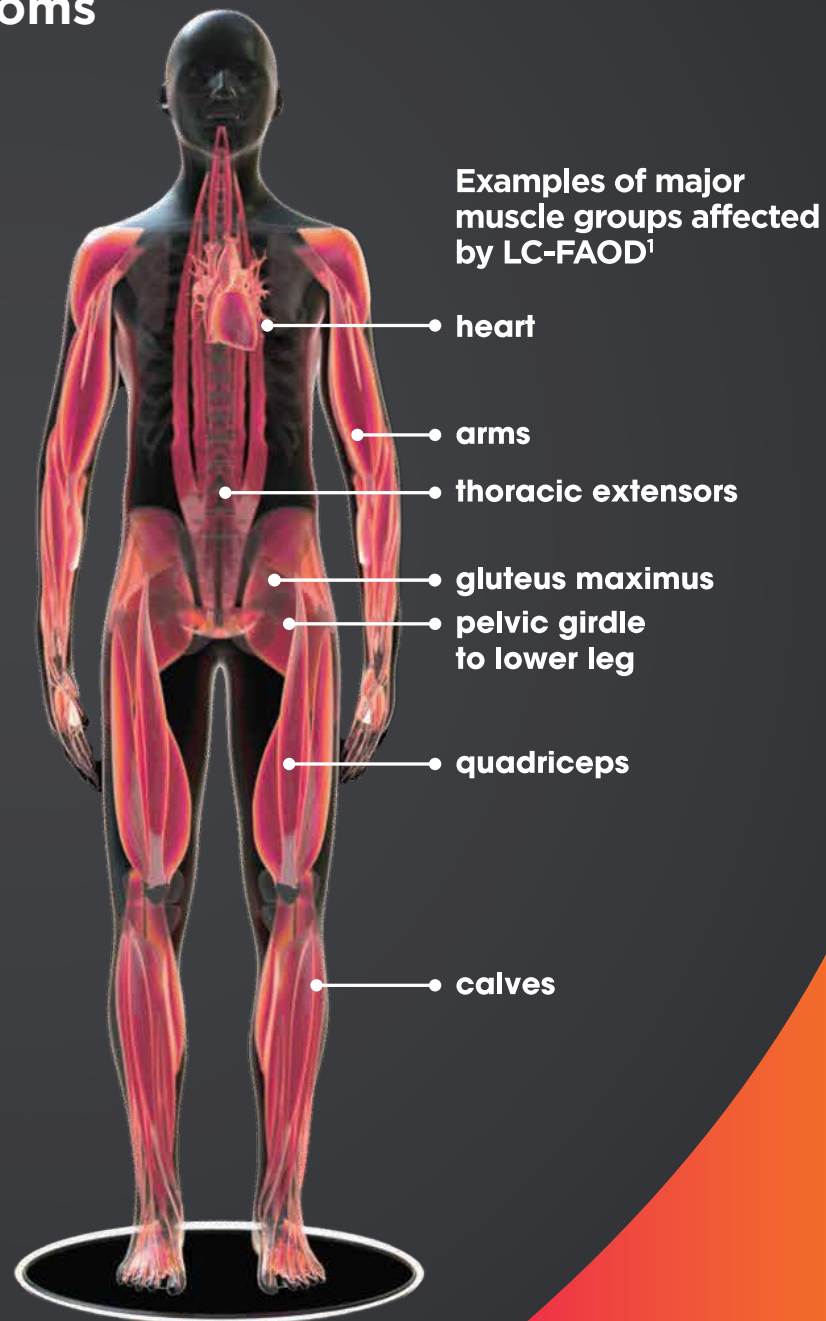


Neuromuscular Symptoms of LC-FAOD (Long-Chain Fatty Acid Oxidation Disorders)

Have you seen these symptoms
and considered LC-FAOD?

- Exercise intolerance
- Rhabdomyolysis
- Elevated CK
- Muscle weakness
- Myalgia
- Myoglobinuria

Come visit us at booth 319
to learn more.



06:45 am - 08:00 am

Industry Forum

Industry Forum by Alnylam Pharmaceuticals

Grand Saguaro East-West

Discover AMVUTTRA® (vutrisiran): A Treatment Option for the Polyneuropathy of hATTR Amyloidosis

Join our distinguished faculty as they discuss an overview of hereditary transthyretin-mediated (hATTR) amyloidosis and review the clinical profile of AMVUTTRA, a treatment for the polyneuropathy of hATTR amyloidosis in adults.

AMVUTTRA has warnings and precautions for reduced serum vitamin A levels and recommended supplementation. The most common adverse reactions are pain in extremity, arthralgia, dyspnea, and vitamin A decreased. For additional information about AMVUTTRA, please see the Important Safety Information and full Prescribing Information available at www.amvuttrahcp.com.

- Overview of hATTR amyloidosis
- Review a hypothetical patient case
- Outline the clinical efficacy and safety of AMVUTTRA® (vutrisiran)
- Overview of Alnylam Assist®

Presenters:

Said Beydoun, MD
Sheetal Shroff, MD

This activity is sponsored by Alnylam Pharmaceuticals and is not part of the official scientific program of AANEM.

Food will be provided by AANEM for session attendees. Seating is limited.

6:45 am: Registration
7:00 am: Presentation

No CME/CEU

07:30 am - 04:00 pm

Social Event

Poster Hall

Grand Saguaro North-South

Stroll through the Poster Hall to view this year's research. Refer to the the Poster Presentation List and the Abstract Poster Session times in the Program to determine when specific authors will be available to discuss their research.

08:00 am - 09:30 am

Workshop

W23RFA Unusual NCS

Participants will be able to identify less commonly used NCSs and discuss pitfalls associated with common NCSs.

Limited to residents, fellows, technologists, and medical students only.

1.50 CME/CEU

Lawrence R. Robinson, MD

08:00 am - 09:30 am

Workshop

W33FA You Make the Call: An Interactive Approach to EMG Waveform Recognition Skills - Basic

Identify the firing patterns of different types of EMG waveforms, identify the characteristics of a variety of normal and abnormal spontaneous waveforms, recognize normal and abnormal patterns of recruitment of MUAPs, and recognize and understand the significance of the changes in morphology of MUAPs in diseases. Includes audience participation and videos of EMG waveforms.

This is a large group workshop open to physicians only.

1.50 CME

Devon I. Rubin, MD

Friday | Nov. 3

08:00 am - 09:30 am
Workshop

W83RFA Basic Nerve US

Discuss US devices and equipment, how to incorporate US into a busy EDX laboratory, how to image muscle, how to image nerve, and how to assess for the following potential conditions: CTS, ulnar neuropathy at the elbow, ulnar neuropathy at the wrist, and fibular neuropathy at the knee. As time permits, the assessment of other NM conditions will be addressed.

Limited to residents, fellows, technologists, and medical students only.

1.50 CME/CEU Shumaila Sultan, MD

08:00 am - 09:30 am
Workshop

W90RFA Pearls and Pitfalls in Performing NCS

This is an interactive workshop in which participants will identify areas of interest in NCSs.

Limited to residents, fellows, technologists, and medical students only.

1.50 CME/CEU James L. Lewis, R.NCS.T.

08:00 am - 09:30 am
Session

EDX of Brachial Plexopathies and Mimics

Formulate an EDX approach for patients presenting with possible brachial plexopathy; critically design and tailor an EDX examination based on the clinical presentation, as well as the data in real time as it is collected; interpret atypical or borderline data in challenging cases; and determine the findings and features to report back to the referring provider.

Pre-registration is required. Limited to 40 participants. See ticket for session location.

Sandra L. Hearn, MD
Cody C. Andrews, MD
Anthony E. Chiodo, MD, MBA
Nassim Rad, MD

1.50 CME/CEU

08:00 am - 09:30 am
Session

Myalgia and Muscle Stiffness: Approach and Management - Part 1
Grand Sonoran J-K

Classify and identify causes of muscle pain and stiffness, diagnose and manage various forms of myotonic disorders, and differentiate and treat various forms of metabolic myopathies.

8:00 am: Introduction
Mohammad K. Salajegheh, MD

8:10 am: Myotonic Disorders
Mohammad K. Salajegheh, MD

8:40 am: Metabolic Myopathies
Joome Suh, MD

1.50 CME/CEU

08:00 am - 09:30 am
Session

NM Sports Medicine Cases: Mechanisms of Injury and Management of Athletes
Grand Sonoran C-D

Sports injuries primarily involve the MSK systems, however, injuries to the peripheral nerves and CNS are increasingly more common, especially in the era of extreme sports. These sports injuries can lead to catastrophic consequences if unrecognized and untreated. This session will use case-based presentations to highlight key features in EDX and NM management of these sports injuries. We will look at NM and skeletal injuries as they present in the emergency room and outpatient setting. Through a case-based teaching approach, attendees will be able to identify the epidemiology of sports injuries and the injuries that are unique to different sports, and explain the role of imaging, especially US as an emerging tool in evaluation and management.

8:00 am: NM Sports Medicine Cases: Mechanisms of Injury and Management of Athletes
Catherine Alessi, MD

8:00 am: NM Sports Medicine Cases: Mechanisms of Injury and Management of Athletes
Anthony G. Alessi, MD

8:30 am: Neurologic Evaluation of Cervical Spine Injuries in Sports
Stephanie Alessi-LoRosa, MD, MPH

9:00 am: TOS/Brachial Plexus Injuries in Athletes
Vernon Williams, MD

1.50 CME/CEU

Friday | Nov. 3

08:00 am -
09:30 am

Session

Pathologies in NMUS: Common and Uncommon Findings

Grand Sonoran E

Review a variety of case-based examples of pathologies seen using NMUS. Emphasis will be on practical applications covering mononeuropathies, polyneuropathy, and muscle diseases as well as anatomical variations and other red herrings.

8:00 am: Mononeuropathies
David C. Preston, MD

8:20 am: Polyneuropathies
Monika Krzesniak-Swinarska, MD

8:40 am: Muscle Diseases
Craig M. Zaidman, MD

9:00 am: Anatomical Variants and Red Herrings
Mary Hopfinger, NP

1.50
CME/CEU

08:00 am -
09:30 am

Session

Update on ALS: Pathophysiology, Diagnostic Tools, and Pharmacological Treatment

Grand Sonoran H-I

Recognize various presentations of ALS; screen for other mimicking conditions; optimize EDX tools and learn to use new and emerging diagnostic tools (e.g. neurofilament light chain); explain the current understanding on the mechanisms of ALS and development of therapies (basic science and clinical research update), and prescribe approved disease modifying therapies.

8:00 am: Introduction
Bjorn E. Oskarsson, MD

8:05 am: Pathophysiology
Bjorn E. Oskarsson, MD

8:30 am: Diagnostic Tools in the Evaluation of ALS
Jennifer M. Martinez-Thompson, MD

9:00 am: Pharmacological Treatments
Stephen Johnson, MD

1.50
CME/CEU

08:00 am -
09:30 am

Session

US Evaluation of Post-Surgical Median Neuropathy in Carpal Tunnel

Grand Sonoran G

Develop a systematic US approach to evaluating persistent problems following carpal tunnel surgery.

1.50
CME/CEU

Jeffrey A. Strakowski, MD

09:00 am -
04:00 pm

Social Event

Exhibit Hall

Grand Canyon Ballroom

Learn about the products that help you provide quality care for your patients. Stop by the Exhibit Hall and see the latest innovations in our industry.

09:30 am -
10:00 am

Social Event

Abstract Poster Session II

Grand Saguaro North-South

Authors of abstracts will be available to discuss their research. Stop by to review the information from this year's abstracts and meet the authors. Refer to the Poster Presentations List in the Program for abstract titles and authors that will be available to discuss their research.

09:30 am -
10:00 am

Social Event

Coffee Break

Grand Canyon Ballroom

Enjoy complimentary coffee and use break time to network and socialize with your colleagues.

09:40 am -
10:00 am

Presentation Stage

Presentation Stage by argenx

Presentation Stage A - Grand Canyon 3

An Overview of Treatment Options for gMG in Adult Patients Who Are Anti-AChR Antibody Positive

Presenter: Daniel DiCapua, MD

This activity is sponsored and is not part of the official scientific program of AANEM.

No CME/CEU

Friday | Nov. 3

09:40 am - 10:00 am

Presentation Stage

Presentation Stage by Catalyst Pharmaceuticals, Inc.

Presentation Stage B - Grand Canyon 1

New Exploratory Findings for Duchenne Muscular Dystrophy

This activity is sponsored and is not part of the official scientific program of AANEM.

No CME/CEU

10:00 am - 12:15 pm

Session

Plenary 3: Disability and NMDs: The Whole Enchilada

Grand Sonoran E-G

Review MDA's advocacy efforts on behalf of people living with NMDs and how providers can join the efforts to advance changes in public policy that will increase access to care, education, employment, transportation, recreation, and more for those with NMDs.

Examine the state of disability education in medical schools today, promote the need for more active and widespread inclusion of disability in medical education, and provide suggestions for successful curricular development and implementation.

Summarize efforts to better quantify the unexpected cognitive burden within DMD and other NMDs, explore psychosocial determinants of health, and highlight how community engagement and partnership with advocacy agencies and industry can be harnessed to improve cognitive health in this disease.

Achievement Awards presentation will take place at the beginning of the Plenary.

10:00 am: *Welcome*
Robert W. Irwin, MD

10:05 am: *Awards: Lifetime Achievement, Distinguished Physician, Jun Kimura Outstanding Educator, Ernest Johnson Outstanding Educator, Distinguished Researcher, Scientific Impact, Outstanding Service, Honorary Member, and Public Recognition*
Andrea J. Boon, MD

10:20 am: *Introduction*
Earl J. Craig, MD

10:25 am: *Advocating for Patients Beyond the Clinical Setting: How Providers Can Advance Access and Equality for the NMD Community*
Michael Lewis, MA

10:55 am: *Introduction*
Robert W. Irwin, MD

11:00 am: *Disability in Medical Education: Where is it?*
Margaret A. Turk, MD

11:30 am: *Introduction*
Earl J. Craig, MD

11:35 am: *Making Visible the "Invisible": Cognitive Disability in DMD*
Mathula Thangarajh, MD, PhD

12:00 pm: *Annual Meeting 2024*
Dianna Quan, MD

2.00 CME/CEU

10:00 am - 04:00 pm

Social Event

Silent Auction Winner Pick-up

Silent Auction winners, pick up your items at the Registration Booth.

Training Program Partnership

AANEM's Training Program Partnership offers valuable educational resources for physicians in neurology, PM&R, and related training departments.

- Free AANEM membership for all residents & fellows
- Exclusive access to hundreds of free learning materials
- Deep AANEM Annual Meeting discounts

Enroll all residents & fellows in a department for just \$253 per academic year, an incredible value and wise investment in the next generation of NM and EDX physicians.

Stop by the AANEM Information Booth or visit www.aanem.org/TPP to learn more.



Friday | Nov. 3

12:00 pm - 01:15 pm

Industry Forum

Industry Forum by Alexion, AstraZeneca Rare Disease

Desert Conference Suites 3 - 5

Complement Science Role in the gMG Therapeutic Landscape: A Case-Based Approach to Managing Generalized Myasthenia Gravis (gMG)

Please join us as expert moderators walk through an immersive case-based presentation of adult gMG patients who are anti-AChR antibody-positive. Faculty moderators will review key clinical data of a therapeutic option and present real-world patient cases based on clinical experiences.

Presenters:

Suraj Muley, MD

Nicholas J. Silvestri, MD

This activity is sponsored by Alexion, AstraZeneca Rare Disease and is not part of the official scientific program of AANEM.

Food will be provided by AANEM for session attendees. Seating is limited.

12:00 pm: Registration

12:15 pm: Presentation

No CME/CEU

12:00 pm - 01:15 pm

Industry Forum

Industry Forum by Mitsubishi Tanabe Pharma America

Grand Saguaro East-West

Discover how beginning treatment with RADICAVA ORS® can help slow the loss of physical function for patients with ALS

This activity is sponsored by Mitsubishi Tanabe Pharma America and is not part of the official scientific program of AANEM.

Food will be provided by AANEM for session attendees. Seating is limited.

12:00 pm: Registration

12:15 pm: Presentation

No CME/CEU

12:15 pm - 01:15 pm

Social Event

Resident & Fellow Lunch

All residents, fellows, and medical students are invited to attend this lunch to meet with other residents and fellows and AANEM Board Members. Sponsored by Grifols USA, LLC.

Registration is required.

01:15 pm - 02:45 pm

Workshop

W102RFC NCS in the Foot

Review the basics and “tricks of the trade” in recording multiple sensory and motor NCS in the foot, including medial and lateral plantar nerves (both sensory & motor), saphenous nerve, superficial peroneal (fibular) sensory nerve, sural sensory nerve, and Baxter’s nerve (i.e., 1st branch of lateral plantar nerve) and learn to do a novel motor NCS technique of the deep peroneal nerve with recording over extensor digitorum brevis that is based on anatomic landmarks and easily reproducible and reliable. Recognize the algorithm when doing motor and sensory NCS to evaluate for TTS and/or a tibial branch neuropathy in the foot, and recognize when to utilize different sensory and motor NCS to differentiate TTS from peripheral polyneuropathy.

Limited to residents, fellows, technologists, and medical students only.

1.50 CME/CEU

David R. Del Toro, MD

01:15 pm -
02:45 pm

W104RFC Basic NCS With US - Median and Ulnar

Workshop

Demonstrate how US combined with NCS can be useful in median and ulnar neuropathies. Obtain median and ulnar nerve images in transverse and longitudinal transducer positions. Describe how muscle, nerve, and tendons in relation to these two nerves appear with US. Conduct median and ulnar NCS. Discuss scenarios and reasons why these two diagnostic studies work together in obtaining a diagnosis and pinpointing the nerve entrapment and/or lesion.

Limited to residents, fellows, technologists, and medical students only.

John W. Norbury, MD

Betty J. Jerome, R.NCS.T.

1.50
CME/CEU

01:15 pm -
02:45 pm

W92RFC Advanced Nerve US

Workshop

This workshop is designed for residents and fellows with some experience conducting NMUS. The focus will be on scanning techniques for assessing potential entrapment mononeuropathies, polyneuropathies, motor neuron disease, brachial plexopathies, and myopathies. Hands-on scanning will be emphasized.

Limited to residents, fellows, technologists, and medical students only.

Emily Miller Olson, MD

Rebecca Dutton, MD

1.50
CME/CEU

01:15 pm -
02:00 pm

Challenging NMJ Cases

President's Boardroom

Session

Articulate an approach to the EDX evaluation of disorders of NM transmission; discuss EDX findings of MG, LEMS, congenital myasthenic syndromes, and immune checkpoint inhibitor related MG; and discuss treatment approaches to challenging cases of MG and LEMS. Participants in the session are welcome and encouraged to bring their challenging cases for discussion.

This is an "Ask the Expert" session. There will be an interactive discussion designed around audience participation. There are no handouts nor a planned presentation, and this session will not be included in the Annual Meeting Video Collection.

Amanda C. Guidon, MD

0.75
CME/CEU

01:15 pm -
02:45 pm

EDX Education for Trainees: Challenges, Strategies, and Novel Approaches for Training

Grand Sonoran G

Session

Recognize the complexities of teaching EDX skills, evaluate potential innovative methods to teach EDX procedure and interpretation skills, and contrast different methods of assessment in trainees learning about EDX skills. Attendees will be able to apply strategies to current educational problems in their own institutions.

Sandra L. Hearn, MD

Devon I. Rubin, MD

Zachary N. London, MD

Leslie Rydberg, MD

1.50
CME/CEU

01:15 pm -
02:45 pm

Harnessing the Power of AI: Exploring AI Resources

Grand Sonoran A

Session

Increase knowledge and competence regarding AI resources including ChatGPT and Consensus and increase knowledge and skills in the application of AI software online tools to potentially enhance clinical practice, research, and educational work.

Attendees are required to bring their laptop/portable devices to actively participate in the hands-on exercise and explore the practical aspects of AI software/online tools.

1:15 pm: *Introduction to AI in Medicine*
John A. Morren, MD

1:30 pm: *Description of Common AI Software and Online Tools Including ChatGPT and Consensus*
John A. Morren, MD

1:50 pm: *Case Studies and Real-World Examples*
John A. Morren, MD

2:10 pm: *Practical Demonstration and Hands-On Exercise*
John A. Morren, MD

2:30 pm: *Ethical Considerations and Future Implications*
John A. Morren, MD

1.50
CME/CEU

01:15 pm -
02:00 pm

hATTR Polyneuropathy Diagnosis and Treatment

Chairman's Boardroom

Session

Recognize hATTR polyneuropathy based on clinical presentation, diagnostic tools, importance of early recognition, use of genetic testing, and treatment institution.

This is an "Ask the Expert" session. There will be an interactive discussion designed around audience participation. There are no handouts nor a planned presentation, and this session will not be included in the Annual Meeting Video Collection.

0.75
CME/CEU

Said R. Beydoun, MD

01:15 pm -
02:45 pm

Hot Topics in NM Literature - Part 1

Grand Sonoran E

Session

Appraise several impactful findings in NM literature over the past year; recognize the clinical value of these studies and their impact to NM patients (EDX and sonographic methods, hereditary and acquired myopathy evaluation, peripheral neuropathy testing and treatment, motor neuron disease understanding, and NMJ disorder advancements); describe hot topics and groundbreaking work in these areas of NM medicine; and integrate emerging knowledge into clinical practice.

1:15 pm: *Introduction*
Ruple S. Laughlin, MD

1:20 pm: *Hot Topics in Clinical Neurophysiology: EDX and US*
Ruple S. Laughlin, MD

1:45 pm: *The Latest in NMJ Disorders*
Karissa Gable, MD

2:15 pm: *Breakthroughs in Motor Neuron Disease*
James D. Berry, MD, MPH

1.50
CME/CEU

01:15 pm -
02:00 pm

How to Incorporate an APP in Your Practice

Desert Conference Suite 8

Session

Discuss different ways that APPs can potentially contribute and support clinical practice, review methods of providing APP training and education specific to NM practice, and outline strategies for promoting career growth and retention for APPs within a clinical practice.

This is an "Ask the Expert" session. There will be an interactive discussion designed around audience participation. There are no handouts nor a planned presentation, and this session will not be included in the Annual Meeting Video Collection.

0.75
CME/CEU

Dianna Quan, MD

<p>01:15 pm - 02:45 pm</p> <p>Session</p>	<p>Myalgia and Muscle Stiffness: Approach and Management - Part 2 <i>Grand Sonoran J-K</i></p> <p>Classify and identify causes of muscle pain and stiffness, identify and manage stiff person syndrome and peripheral nerve hyperexcitability, and evaluate for and treat myofascial pain syndrome and fibromyalgia.</p> <p>1:15 pm: Stiff Person Syndrome & Peripheral Nerve Hyperexcitability Goran Rakocevic, MD</p> <p>2:35 pm: Myofascial Pain Syndrome and Fibromyalgia: Overview and 2023 Update Erik R. Ensrud, MD</p> <p>1.50 CME/CEU</p>
<p>01:15 pm - 02:45 pm</p> <p>Session</p>	<p>Neuromodulation in Pain Management <i>Grand Sonoran C-D</i></p> <p>Review basic concepts, benefits, and clinical applications of neuromodulation in pain management.</p> <p>1:15 pm: Introduction Monica J. Carrion-Jones, MD</p> <p>1:20 pm: Everything You Wanted to Know About Neuromodulation but Never Asked Monica J. Carrion-Jones, MD</p> <p>1:50 pm: Clinical Applications, Benefits, and Case Presentations Emanuel Gage, MD</p> <p>1.50 CME/CEU</p>
<p>01:15 pm - 02:45 pm</p> <p>Session</p>	<p>NM Video Cases <i>Grand Sonoran F</i></p> <p>Improve clinical skills based on watching videos of real cases; update knowledge on the presented topics (diagnosis and management); and become familiar with conducting effective virtual clinical visits.</p> <p>Aziz Shaibani, MD</p> <p>Thy P. Nguyen, MD</p> <p>1.50 CME/CEU</p>

<p>01:15 pm - 02:45 pm</p> <p>Session</p>	<p>Update on ALS: Delivering a Diagnosis, Ventilatory Management, Multidisciplinary Care, and Home Care <i>Grand Sonoran H-I</i></p> <p>Detail how to deliver a diagnosis, initiate first line interventions for ventilatory care, coordinate multidisciplinary care, and order in home health care.</p> <p>1:15 pm: Introduction Bjorn E. Oskarsson, MD</p> <p>1:20 pm: Delivering a Diagnosis Molly Kilpatrick, MD</p> <p>1:40 pm: Ventilatory Management Christopher Lee, MD, MPH</p> <p>2:10 pm: ALS: Optimizing Interprofessional Care Ileana Howard, MD</p> <p>2:40 pm: Home Health Bjorn E. Oskarsson, MD</p> <p>1.50 CME/CEU</p>
<p>02:00 pm - 02:45 pm</p> <p>Session</p>	<p>Algorithmic Approach to the Diagnosis and Treatment of CIDP/Immune Neuropathies <i>Chairman's Boardroom</i></p> <p>Discuss how to diagnose CIDP, based on identifying the clinical phenotype, recognizing the EDX findings, and identifying red flags in differential diagnosis; review treatment using the latest PNS 2021 criteria.</p> <p>This is an "Ask the Expert" session. There will be an interactive discussion designed around audience participation. There are no handouts nor a planned presentation, and this session will not be included in the Annual Meeting Video Collection.</p> <p>Said R. Beydoun, MD</p> <p>0.75 CME/CEU</p>
<p>02:00 pm - 02:45 pm</p> <p>Session</p>	<p>Member Practice Issue Open Forum <i>Desert Conference Suite 8</i></p> <p>The AANEM Professional Practice Committee will be hosting an open forum for members to discuss any current issues or trends they are seeing in their practices and that the committee may be able address either with advice or potentially through the creation of a new position statement.</p> <p>No CME/CEU</p>

Friday | Nov. 3

02:00 pm -
02:45 pm

Session

Resident and Fellow Contract Negotiations

President's Boardroom

Identify how provisions in your contract have the potential to shape your practice, discuss red flags and pitfalls, and arm yourself with the information and rationales you need to effectively negotiate your contract.

This is an "Ask the Expert" session. There will be an interactive discussion designed around audience participation. There are no handouts nor a planned presentation, and this session will not be included in the Annual Meeting Video Collection.

0.75
CME/CEU

Tom Shorter, JD, FACHE

02:45 pm -
03:45 pm

Social Event

Coffee Break

Grand Canyon Ballroom

Enjoy complimentary coffee and use break time to network and socialize with your colleagues.

02:55 pm -
03:15 pm

Presentation
Stage

Presentation Stage by Alexion, AstraZeneca Rare Disease

Presentation Stage B - Grand Canyon 1

PREVAIL, a Phase 3 Study Evaluating Once-Weekly Subcutaneous Gefurulumab for the Treatment of gMG

Presenter: Kelly G. Gwathmey, MD

This activity is sponsored and is not part of the official scientific program of AANEM.

No CME/CEU

02:55 pm -
03:15 pm

Presentation
Stage

Presentation Stage by Grifols USA, LLC

Presentation Stage A - Grand Canyon 3

A Case-Based Discussion on Recognition and Treatment of Chronic Inflammatory Demyelinating Polyneuropathy (CIDP)

Presenter: Gil I. Wolfe, MD

This activity is sponsored and is not part of the official scientific program of AANEM.

No CME/CEU

03:00 pm -
03:30 pm

Social Event

Abstract Poster Session III

Authors of abstracts will be available to discuss their research. Stop by to review the information from this year's abstracts and meet the authors. Refer to the Poster Presentations List in the Program for abstract titles and authors that will be available to discuss their research.

03:25 pm -
03:45 pm

Presentation
Stage

Presentation Stage by Sanofi

Presentation Stage A - Grand Canyon 3

Predicted Time to Wheelchair and Ventilation Events Comparing Avalglucosidase Alfa vs. Alglucosidase Alfa Using a Model of Late-Onset Pompe Disease

Presenter: Jonathan Tang, PhD

This activity is sponsored and is not part of the official scientific program of AANEM.

No CME/CEU

03:25 pm -
03:45 pm

Presentation
Stage

Presentation Stage by UCB

Presentation Stage B - Grand Canyon 1

Learn about a new, FDA-approved treatment for adults with generalized myasthenia gravis

Presenters: Ali Habib, MD and Amit Sachder, MD

This activity is sponsored and is not part of the official scientific program of AANEM.

No CME/CEU

Friday | Nov. 3

03:45 pm -
05:15 pm

Workshop

W33FC You Make the Call: An Interactive, Multimedia Approach to Improving EMG Waveform - Advanced

Identify the characteristics of a variety of uncommon abnormal spontaneous waveforms, recognize normal and abnormal patterns of recruitment of MUAPs, and recognize and understand the significance of subtle or complex changes in morphology of MUAPs in diseases. The workshop includes audience participation and video examples of EMG waveforms.

This is a large group workshop open to physicians only.

1.50 CME

Devon I. Rubin, MD

03:45 pm -
05:15 pm

Session

Approach to Muscle Channelopathies and Their Management

Grand Sonoran J-K

Articulate the causes of muscle channelopathies and classify them based on the ion channels involved, diagnose various forms of muscle channelopathies based on their clinical presentation and EDX characteristics, manage myotonic disorders by treating muscle stiffness and addressing systemic involvement in myotonic dystrophies, and manage periodic paralyses by preventing attacks and aborting attacks of paralysis.

3:45 pm: *Periodic Paralysis*
Mohammad K. Salajegheh, MD

4:25 pm: *Nondystrophic Myotonia*
Jaya R. Trivedi, MD

1.50
CME/CEU

03:45 pm -
05:15 pm

Session

Approach to Muscle Diseases Based on Clinical Phenotype - Vignette Based

Grand Sonoran H-I

Recognize clinical clues facilitating diagnosis of inherited and acquired muscle disease in adults and children, review laboratory tests crucial for diagnosis of specific muscle disorders, and recognize how to integrate clinical and laboratory findings to prevent diagnostic errors.

3:45 pm: *Inherited Muscle Disorders in Adults*
Margherita Milone, MD, PhD

4:15 pm: *Acquired Muscle Diseases in Adults*
Anahit C. Mehrabyan, MD

4:45 pm: *Vignette Based Pediatric Muscle Disorders*
Partha S. Ghosh, MD

1.50
CME/CEU

03:45 pm -
05:15 pm

Session

Hot Topics in NM Literature - Part 2

Grand Sonoran E

Appraise several impactful findings in NM literature over the past year; recognize the clinical value of these studies and their impact to NM patients (EDX and sonographic methods, hereditary and acquired myopathy evaluation, peripheral neuropathy testing and treatment, motor neuron disease understanding, and NMJ disorder advancements); describe hot topics and groundbreaking work in these areas of NM medicine; and integrate emerging knowledge into clinical practice.

3:45 pm: *Introduction*
Ruple S. Laughlin, MD

3:50 pm: *Recent Highlights in Peripheral Nerve Literature*
Michelle L. Mauermann, MD

4:30 pm: *Updates in Myopathy: Hereditary and Acquired*
Grayson Beecher, MD

1.50
CME/CEU

03:45 pm -
05:15 pm

Session

Nerve Transfer Surgery: Where Surgeons and EDX Physicians Come Together to Restore Function

Grand Sonoran G

Describe how nerve transfers have changed the management of peripheral nerve injuries, summarize important advances in surgical treatment of nerve injuries that are on the horizon, and demonstrate a working knowledge of how EDX studies can be used to inform surgical management of nerve injuries.

3:45 pm: Introduction

Lawrence R. Robinson, MD

3:50 pm: How Nerve Transfers Have Changed the Treatment of Nerve Injuries

Susan Mackinnon, MD

4:35 pm: How EDX Informs Surgical Decision Making for Nerve Transfers

Lawrence R. Robinson, MD

1.50
CME/CEU

03:45 pm -
05:15 pm

Session

Optimizing the Role of APPs in NM Practice

Grand Sonoran C-D

Craft an on-the-job training plan for APPs entering neurologic practice; determine strategies for tracking APPs' clinical competency in real time to match their responsibilities with their skills and strengths; identify multiple MD/APP shared practice models that maximize productivity, promote retention, and allow APPs to practice at the top of their license; and develop a team-based approach to improve patient experience and increase access to NM care.

3:45 pm: Identify Multiple MD/APP Shared Practice Models That Maximize Productivity, Promote Retention, and Allow APPs to Practice at the Top of Their License

Margaret Naclerio, PA-C

4:05 pm: Ensuring Successful Onboarding of an APP in the NM Clinic

Christopher Doughty, MD

4:25 pm: Craft an on-the-job Training Plan for APPs Entering Neurologic Practices

Andrew H. Dubin, MD, MS

4:45 pm: Develop a Team-Based Approach to Improve Patient Experience and Increase Access to NM Care

Deena Rodney, APRN

1.50
CME/CEU

03:45 pm -
05:15 pm

Session

Roundtable: Case Discussions

Confer with experts in a smaller one-on-one setting to improve your performance and interpretation of clinical studies and add clinical input. This session will improve your use of quality EDX studies in the diagnosis and treatment of patients. Participants are encouraged to bring their own cases to the session.

Pre-registration required. Limited to 60 participants. See ticket for session location.

Mark A. Ferrante, MD

Kamal R. Chémali, MD

David C. Preston, MD

Bryan E. Tsao, MD

Bashar Katirji, MD

Said R. Beydoun, MD

1.50
CME/CEU



Free Wi-Fi

Wi-Fi is available throughout the 2023 AANEM Annual Meeting event space, courtesy of Grifols USA, LLC.

Network: AANEM_2023
Password: Grifols

Friday | Nov. 3

05:15 pm -
06:15 pm

Beers for Fears

Grand Canyon Foyer

Social Event

"Everybody Wants to Rule the (EDX) World". This session is for residents, fellows, and early career physicians. We invite you to share your EDX fears/anxieties/challenges with experts in EDX medicine, in exchange for beers (or your choice of beverage), in a very informal setting. Our nationally recognized faculty will welcome all of your questions and will be happy to share their insights gained from years of experience.

Worries About Your First Job
Kevin Fitzpatrick, MD & Ruple Laughlin, MD

Transitioning to Attending
Holli Horak, MD & Michael Munin, MD

Transitioning to Private Practice
Atul Patel, MD & Gautam Malhotra, MD

Searching and Applying for a Job
Andy Haig, MD & Ben Warfel, MD

Preparing for the Interview
Collin Grant, MD & Vincent Tranchitella, MD

How to get Promoted
Lawrence Robinson, MD

International Medical Grads - What is Their Pathway?
Sasha Zivkovic, MD, PhD

Research/Funding/Negotiating
Paul Barkhaus, MD

Should I do a Fellowship?
John Norbury, MD & Mike Andary, MD

How Does EMG Fit into a Practice?
Peter Grant, MD & Tracy Park, MD

Medical Students
Bonnie Weigert, MD & Robert Irwin, MD

Work Life Balance
Rebecca O'Bryan, MD & John Kincaid, MD

Networking/Mentoring
David Del Toro, MD & Benn Smith, MD

05:15 pm -
06:15 pm

Happy Hour

Grand Canyon Foyer

Social Event

Enjoy live music, refreshments, and socializing with friends and colleagues. Attend the last social event of this year's annual meeting to celebrate another successful meeting, and say farewell until next year!

05:15 pm -
06:30 pm

Industry Forum by argenx

Grand Saguaro East-West

Industry
Forum

Targeting Immune Mechanisms in Idiopathic Inflammatory Neuropathies: What Drives Pathophysiology in CIDP and MMN?

Join us for a discussion of the underlying immune mechanisms of idiopathic inflammatory neuropathies including chronic immune demyelinating polyneuropathy (CIDP) and multifocal motor neuropathy (MMN). Learn about ongoing efforts to inhibit the IgG recycling and complement pathways for the treatment of adult patients with CIDP and MMN.

- Provide an overview of CIDP, current understanding of pathophysiology, and unmet needs for treatments
- Understand the rationale for FcRn targeting in CIDP
- Provide an overview of MMN, current understanding of pathophysiology, and unmet needs for treatments
- Understand the rationale for complement targeting in MMN

Presenters:
Jeffrey Allen, MD
Yuebing Li, MD

This activity is sponsored by argenx and is not part of the official scientific program of AANEM.

Food will be provided by AANEM for session attendees. Seating is limited.

5:15 pm: Registration
5:30 pm: Presentation

No CME/CEU

THE SEARCH FOR CIDP



Takeda-sponsored symposium at the AANEM Annual Meeting

November 1, 2023, 11:45–13:00 (MST), Level 2 Lobby Level, Wildflower Ballroom

Join our expert faculty to explore a series of patient cases to identify the person with CIDP. This will be a highly interactive and practical session in which you make the decisions.

During the symposium, you will have the opportunity to:

- Recognize the key symptoms of CIDP to assist in reaching an early diagnosis
- Understand how to differentiate CIDP from its mimics
- Review the diagnostic guidelines for CIDP
- Explore the current and future CIDP management strategies

We look forward to seeing you there!

AANEM, American Association of Neuromuscular and Electrodiagnostic Medicine; CIDP, chronic inflammatory demyelinating polyradiculoneuropathy.
VV-MEDMAT-89129 | VV-MEDMAT-89806. August 2023.

This meeting is initiated, organized and funded by Takeda. This activity is not part of the official scientific program of the AANEM.
For healthcare professionals only.

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This symposium is not accredited for Continuing Medical Education (CME).



06:45 am -
08:00 am

Industry
Forum

Industry Forum by Immunovant, Inc. *Grand Saguaro East-West*

Myasthenia Gravis - Expanding Frontiers of Clinical Management

Please join us for an interactive, case-based roundtable discussion that will cover contemporary topics of clinical care in myasthenia gravis (MG). The session will focus on recent advances in the clinical management of MG, review the existing treatment goals and identify areas where the current clinical practice falls short of achieving desired outcomes, and highlight a growing need to effectively translate trial data to the paradigm of clinical practice.

- Understand the current approach to treatment, including guidance for management of MG
- Review immunopathology of MG, with a focus on biologic mechanisms that are targeted by existing therapies
- Identify shortcomings in the clinical management paradigm in MG and highlight the need for the tailored approach to treatment, using data from recent and future clinical trials

Presenters:

Richard Nowak, MD, MS (Chair)
Srikanth Muppidi, MD
Mamatha Pasnoor, MD
Nicholas Silvestri, MD

This activity is sponsored by Immunovant, Inc. and is not part of the official scientific program of AANEM.

Food will be provided by AANEM for session attendees. Seating is limited.

6:45 am: Registration
7:00 am: Presentation

No CME/CEU

08:00 am -
09:30 am

Workshop

W100AS Late Responses: F Wave Responses and H Reflexes

Discuss the principles and practice of eliciting F wave responses and H reflexes; demonstrate anatomical localization of late responses, including axon reflex; identify clinical utility and indications for testing; and address limitations and technical challenges.

1.50 CME

Vita G. Kesner, MD, PhD

08:00 am -
09:30 am

Workshop

W101AS EDX of Muscles of Face and Neck in Neurogenic Palsies and NMJ Disorders

Recognize the utility of EDX studies and learn their implication to measure the functional integrity of the cranial nerves and their value in making the diagnosis, predicting prognosis, and providing a long-term follow-up tool; utilize the blink reflex study and the masseter reflex study to evaluate the trigeminal (blink and jaw jerk) and facial nerves (blink), as well as the direct facial nerve study and EMG of facial muscles as a diagnostic and prognostic tool in Bell's palsy and trigeminal neuralgia; review the utility of accessory nerve repetitive stimulation in the workup of dysfunction of NMJ transmission; perform SFEMG of frontal muscles as part of detecting NMJ disorders; and recognize different approaches to evaluate the presence or absence of denervation in the bulbar muscles as a diagnostic marker of ALS according to the Gold Coast criteria and of primary lateral sclerosis according to the consensus diagnostic criteria for primary lateral sclerosis.

1.50 CME

Rima El-Abassi, MD

08:00 am -
09:30 am

Workshop

W27AS RNS

Perform RNS to shoulder, upper arm, hand, and facial muscles; and discuss sequential examination for detecting NM transmission defects, such as artifacts.

1.50 CME

Taylor B. Harrison, MD

08:00 am -
09:30 am

Workshop

W31AS SFEMG and Jitter Measurement During Voluntary Muscle Contraction

SFEMG will be demonstrated during voluntary contraction of the orbicularis oculi and frontalis muscles. Demonstrate how SFEMG during slight muscle contraction is performed; discuss its advantages and limitations in diagnosing NM transmission disorders; and recognize common pitfalls.

1.50 CME

Anna R. Punga, MD, PhD

08:00 am -
09:30 am

Workshop

W35AS Needle EMG of the Foot

Discuss the anatomy of the tibial nerve branches in the foot (including the medial plantar nerve, lateral plantar nerve, and Baxter's nerve) and the deep peroneal nerve branches in the foot; identify the potential entrapment sites for these nerve branches; distinguish the anatomic basis for needle placement; discuss special considerations for the technique in each muscle; and identify how to develop a meaningful interpretation of findings.

1.50 CME

Tracy A. Park, MD

08:00 am -
09:30 am

Workshop

W45AS Advanced US of the Lower Limb Nerves

Obtain images with transverse and longitudinal transducer positions; describe how to manipulate basic US instrumentation to include focal depth, Doppler flow, and transducer frequency; describe how muscle, nerve, and tendon appear with US; and discuss the principle of anisotropy.

1.50
CME/CEU

Steven J. Shook, MD, MBA

08:00 am -
09:30 am

Workshop

W46AS EDX and Clinical Approach to Lumbosacral Plexopathies

Review the anatomy of the lumbosacral plexus; discuss routine and unusual NCSs to assist with localization to lumbosacral plexus; identify the most appropriate muscles to test and needle placement for needle EMG examination; and discuss clinical and EDX findings that can point towards possible etiologies of lumbosacral plexopathies.

1.50 CME

Rocio Vazquez Do Campo, MD

08:00 am -
09:30 am

Session

Autoantibodies in Peripheral Neuropathies: Recent Updates

Grand Sonoran F

Review recent literature about autoantibodies associated with peripheral neuropathies, and recognize clinical presentation to guide and interpret autoantibody test results in peripheral neuropathy.

8:00 am: *Introduction*

Pritikanta Paul, MBBS, MD

8:05 am: *Autoimmune Nodopathies and Other Seropositive Demyelinating Neuropathies*

Divyanshu Dubey, MBBS

8:30 am: *Phenotypic Association of Autoantibodies Associated With Axonal Neuropathies*

Pritikanta Paul, MBBS, MD

8:55 am: *Autoantibody Testing in Small Fiber and Autonomic Neuropathies*

Srikanth Muppidi, MD

1.50
CME/CEU

Saturday | Nov. 4

08:00 am -
09:30 am

Evolving Therapeutic Landscape of MG Targeted Therapies

Grand Sonoran J-K

Session

The treatment landscape in MG has rapidly evolved in recent years wherein broad, non-specific, slow-acting, and poorly tolerated treatments are becoming less desirable as targeted, fast-acting, and well-tolerated options become available.

Identify specific disease mechanisms involved in the pathogenesis of MG therapies in clinical trials; discuss data from recent clinical trials with targeted therapies; and discuss the possibilities, challenges, and conflicts related to concomitant use of traditional and new therapies.

This session will complement the session on Clinician's Approach to MG Therapies presented on Saturday, November 4, 10:00 - 11:30 am.

8:00 am: *Disease Mechanisms and Treatment Targets in MG*
Ali A. Habib, MD

8:25 am: *Novel Therapies for MG: Where Do They Fit In?*
Pushpa Narayanaswami, MD

8:50 am: *Efficacy and Safety of Novel MG Therapies: Recent Clinical Trials*
Shruti Raja, MD

1.50
CME/CEU

08:00 am -
09:30 am

Neuropathies in POTS and Long COVID Dysautonomia

Grand Sonoran H-I

Session

Discuss how to assess, diagnose, and treat autonomic dysfunction and autonomic neuropathies in postural orthostatic tachycardia syndrome (POTS) and long COVID from three leading experts and review updates on the latest research in POTS.

This activity has been planned and implemented in accordance with the accreditation requirements and policies of the ACCME through joint providership of AANEM and Dysautonomia International. The AANEM is accredited by the ACCME to provide continuing medical education for physicians.

8:00 am: *POTS 101*
David S. Saperstein, MD

8:25 pm: *Screening for Small Fiber Neuropathies and Underlying Pathology in POTS*
Kamal R. Chémali, MD

8:50 pm: *Research Updates on POTS and Long COVID Dysautonomia*
Tae Hwan Chung, MD

1.50
CME/CEU

American Board of Electrodiagnostic Medicine

2022-2023 ABEM Board of Directors

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Andrea Boon, MD



08:00 am -
09:30 am

Session

New Developments in EDX and RX for Periodic Paralysis

Grand Sonoran C-D

Review the pathophysiology of depolarization-induced weakness in periodic paralysis as a paradigm for improving diagnosis and management, describe new advances in EDX based on muscle velocity recovery cycles, summarize new developments in pharmacologic management of episodic weakness, and discuss gene therapy considerations and show feasibility in pre-clinical studies.

This activity has been planned and implemented in accordance with the accreditation requirements and policies of the ACCME through joint providership of AANEM and Periodic Paralysis Association. The AANEM is accredited by the ACCME to provide continuing medical education for physicians.

8:00 am: Introduction
Steve C. Cannon, MD, PhD

8:05 am: Muscle Velocity Recovery Cycles in Periodic Paralysis: A Potential Biomarker and Deep Phenotyping Tool That can be Applied From Bench to Bedside
Karen Suetterlin, MBBS PhD

8:45 am: Therapeutics Under Development for Periodic Paralysis
Steve C. Cannon, MD, PhD

1.50
CME/CEU

08:00 am -
09:30 am

Session

Updates in Neuralgic Amyotrophy, Including Perspectives From a Novel Multidisciplinary Clinic

Grand Sonoran E

Describe updates in the diagnosis, pathogenesis, workup, and management of neuralgic amyotrophy, including: identifying hereditary, inflammatory, or environmental triggers for the disorder; recognizing the clinical presentation of neuralgic amyotrophy; implementing a targeted physical examination and EDX evaluation; describing the imaging findings on magnetic resonance neurogram and NMUS evaluation; outline rehabilitative and surgical management strategies for those with persistent disability, including indications and strategies for surgical intervention for torsional lesions, and adaptive orthotic and therapeutic techniques for patients who have developed altered motor programming; discuss the benefits of a patient-centered program with motivational interviewing; summarize perspectives from a novel multidisciplinary clinic and future directions for research, including description of patient vignettes and outcomes; discuss focused interviews aimed to evaluate the patient journey to diagnosis, as well as patient feedback from the clinic; and identify components of the program that may be adopted at other sites.

8:00 am: Introduction
Joelle Gabet, MD

8:05 am: Examination Pearls, EDX and US Findings in Neuralgic Amyotrophy
Michael C. Munin, MD

8:30 am: Rehabilitative and Surgical Management Strategies for Those With Persistent Disability From Neuralgic Amyotrophy
Joelle Gabet, MD

8:55 am: Perspectives From a Novel Multidisciplinary Clinic and Future Directions for Research
Noriko Anderson, MD, MPH

1.50
CME/CEU

Saturday | Nov. 4

08:00 am -
09:30 am

US-Guided Nerve Blocks and Hydrodissection

Grand Sonoran G

Session

Review resources on how to best evaluate nerves, as well as tips for equipment, optimal patient positioning, and needle guidance for nerve blocks and hydrodissection under sonography; describe basic step-by-step guidance for optimal medication placement; and demonstrate a patient case in which the block was utilized (lower extremity nerve blocks, upper extremity nerve blocks, uncommon nerve blocks).

A subject will be available along with a high-frequency US machine to demonstrate real-time evaluation of each nerve.

8:00 am: Introduction
Lester S. Duplechan, MD

8:10 am: Common Upper Extremity Nerve Blocks with a Patient Case and Live Demo
Jose Rios Russo, MD

8:30 am: Common Lower Extremity Nerve Blocks with a Patient Case and Live Demo
Jeremy Girmann, DO, RMSK

8:50 am: Uncommon Nerve Blocks with a Patient Case with Live Demo
Lester S. Duplechan, MD

1.50
CME/CEU

09:30 am -
10:00 am

Coffee Break

Grand Canyon Foyer

Social Event

Enjoy complimentary coffee and use break time to network and socialize with your colleagues.

10:00 am -
11:30 am

Case-Based Session - Using US for Nerve Injuries

Grand Sonoran H-I

Session

Review basic pathophysiology of peripheral nerve injury secondary to trauma and describe US correlations, review individual case examples of US findings in nerve trauma, and detail how these findings may change the patient's diagnosis and/or management, especially with regard to surgical planning. Attendees should be able to identify situations where US may provide important clinical information, recognize common features on US reflective of nerve injury, and interpret sonographic evidence in the context of the patient's clinical presentation and EDX findings.

10:00 am: US for Traumatic Nerve Injuries and Its Utility in Surgical Planning
Sarah M. Smith, MD

10:20 am: Case-Based Session - Using US for Nerve Injuries
Sarada Sakamuri, MD

10:40 am: US Evaluation of Peripheral Nerve Injuries: A Surgeon's Perspective
TJ Wilson, MD

11:00 am: Case Presentations
James B. Caress, MD

1.50
CME/CEU

10:00 am -
11:30 am

Clinician's Approach to MG Therapies

Grand Sonoran J-K

Session

Review the role of various conventional and newer therapies in patients with MG and how to optimally use these therapies in clinical practice.

This session is complemented by Evolving Therapeutic Landscape of MG: Targeted Therapies presented on Saturday, Nov. 4, 8:00 - 9:30 am.

10:00 am: Traditional Immunosuppressive Agents in MG
Nicholas J. Silvestri, MD

10:25 am: Complement Inhibition in MG
Srikanth Muppidi, MD

10:50 am: FcRn Inhibition and B Cell Therapies in MG
Neelam Goyal, MD

1.50
CME/CEU

10:00 am -
11:30 am

Session

Novel Therapeutic Approaches for ALS: From Bench to Bedside

Grand Sonoran F

Recognize the expectation and unmet needs for ALS treatment; discuss the preclinical data in ALS supporting novel therapeutic approaches, existing data on trials, and the challenges and opportunities for these approaches; and explain recent progress in trial designs and pharmacological therapies. Novel therapeutics and improving study design will be discussed including use of antisense oligonucleotides for familial ALS, cell therapy, recently approved drugs (Relyvrio and edaravone), and drugs under development. Review recently completed and ongoing clinical trials for familial ALS focusing on ASOs for SOD1, FUS, C9, ATXN-2; lessons from observational trials for pre-symptomatic gene carriers (PreFALS study, PREVENT ALS study which is the merger of DIALS at MGH/WashU and ALS Families at Columbia, ALL-FTD) and how these our inform knowledge of pre-symptomatic/prodromal ALS; and discuss movement towards preventative therapies for familial ALS (ATLAS trial of tofersen).

10:00 am: *Novel Therapeutic Approaches for ALS - From Bench to Bedside: Challenges, Unmet Needs, and Future Prospectives*
Nizar Souayah, MD

10:25 am: *New Developments in ALS Trial Design: What Have Recent Positive and Negative Trials Taught Us?*
Jeremy M. Shefner, MD, PhD

10:50 am: *Familial ALS: Recent Advances in Targeted Therapies and Progress Towards Preventing ALS*
Mark Garret, MD

1.50
CME/CEU

10:00 am -
11:30 am

Session

Paraproteins and Peripheral Neuropathy

Grand Sonoran E

Review myeloproliferative disorders that create monoclonal proteins and how to interpret test results for these disorders; discuss the relationship of paraproteins with peripheral neuropathies; and summarize the oncology and neurology workup and treatment of paraprotein associated peripheral neuropathies.

10:00 am: *Overview of Myeloproliferative Disorders Associated With Paraproteins*
Sascha Tuchman, MD

10:25 am: *IgM Paraprotein Associated Neuropathies*
Karissa Gable, MD

10:50 am: *POEMS and AL Amyloidosis Associated Neuropathy*
Rebecca Traub, MD

1.50
CME/CEU

10:00 am -
11:30 am

Session

Pediatric Brachial Plexus

Grand Sonoran C-D

Review peripheral nerves and cranial nerves, and discuss how to assist in performing RNS.

This is a technologist-focused session. Anyone who has interest in this topic is welcome to attend.

10:00 am: *Introduction*
Teresa Spiegelberg, CNCT, R.NCS.T., R.EEGT, BS

10:05 am: *Brachial Plexus Management*
Miriana Popadich, RN, BSN, MSN, NP-C

10:25 am: *Surgical Management of Neonatal Brachial Plexus Palsy*
Whitney Muhlestein, MD

10:45 am: *Why Do EMG?*
Ann A. Little, MD

11:00 am: *Therapy Strategies for Brachial Plexus Palsy*
Denise Justice, OTR/L

1.50
CME/CEU

2023 Achievement Awards

AANEM is pleased to recognize the recipients of the 2023 AANEM Achievement Awards. Join us in congratulating these individuals on their outstanding contributions to NM and EDX medicine. All award recipients will be recognized on Friday, Nov. 3 at the beginning of the Plenary 3 session.

Lifetime Achievement Award - John C. Kincaid, MD

AANEM's Lifetime Achievement Award is the highest honor bestowed by AANEM, and is given to members who are recognized as major contributors in the fields of NM and EDX medicine. John C. Kincaid, MD, is honored for his lifelong dedication to research, patient care, advocacy, and education.

Dr. Kincaid embarked on his professional medical journey at Indiana University School of Medicine, where he completed his medical degree, internship, and neurology residency. After completing a fellowship in EMG at Mayo Graduate School of Medicine in Rochester, Minnesota, he returned to his roots in Indiana and dedicated his career to the advancement of NM and EDX medicine.

Dr. Kincaid has held numerous hospital appointments at Indiana University Hospitals and Indiana University Health, including the Kenneth L. and Selma G. Earnest Professor of Neurology. Currently, he continues to serve as an attending neurologist for patients with NMDs; is in the EMG lab 4.5 days per week; and is involved with education of medical students, neurology and PM&R residents, and neurophysiology fellows on a daily basis.



He also served as the medical expert for disability cases for the Social Security Administration for 35 years. "I am 7 years past when I could have retired from Indiana University, but the reward of being involved in teaching high-quality EMG and the day-to-day involvement in the advances in medical knowledge are too engaging to walk away from," he said.

Dr. Kincaid has also made significant contributions to the field through his publications in notable peer-reviewed journals and comprehensive textbooks, including *Practical Electromyography 3rd Edition* and *Neuromuscular (Rehabilitation Medicine Quick Reference) 1st Edition*.

Dr. Kincaid has been an important leader within AANEM for decades. He has served in nearly every role across the organization, including as director, historian, and president of the AANEM Board of Directors and director, secretary, and chair of the ABEM Board of Directors.

"I am very honored to receive this award," he said. "AANEM has been my professional society home base for 43 years. The learning and professional growth opportunities the organization offered me shaped my career in a major way."

Distinguished Physician Award - Bassam A. Bassam, MD

Bassam A. Bassam, MD, is honored for his exceptional contributions to patient care, research, and education in the fields of NM and EDX medicine.

Dr. Bassam's journey in medicine began at Aleppo University in Syria, where he completed his medical degree. He went on to pursue a neurology residency at Wayne State University (WSU) and a NM fellowship at WSU and Mayo Clinic. After completing his training, Dr. Bassam was soon appointed as the director of neurology at Wayne County General Hospital, affiliated with the University of Michigan.

Dr. Bassam has been a tenured professor of neurology and director of the EMG & NMD laboratory since 1985, and briefly served as interim chairman for the neurology department at the University of South Alabama.



Dr. Bassam developed a passion for NM medicine early in his career and has found professional satisfaction across clinical, research, and educational work. "I have found that direct care of patients with NMDs is the best way for understanding illness, motivating research, and advancing the field," he said.

Dr. Bassam has been an active member of AANEM since 1981. "My involvement with AANEM has been an indispensable opportunity that's shaped my career in NM and EDX medicine, for both academic achievements and quality patient care," he said. "I am very thankful and appreciative of the great job and continuous effort of all the AANEM staff that has helped AANEM to remain our top NM and EDX medicine association."

Distinguished Researcher Award - David R. Cornblath, MD

David R. Cornblath, MD, is honored for his contributions to the study of peripheral neuropathies and his extensive research in the fields of NM and EDX medicine.

Dr. Cornblath received his medical degree from Case Western Reserve University, and continued his training with an internship at University Hospitals in Cleveland, Ohio, followed by a neurology residency at the Hospital of the University of Pennsylvania. His passion for NM medicine led him to become a clinical fellow of the Muscular Dystrophy Association at the Peripheral Nerve Morphology Laboratory. Later, he joined the neurology faculty at Johns Hopkins, where he served as director of the Neurology EMG Laboratory.



Currently retired, he holds the title of professor emeritus of neurology at Johns Hopkins. Even in retirement, Dr. Cornblath continues to consult, serving on safety monitoring boards and clinical trial development programs.

Dr. Cornblath co-authored the book *Diagnosis and Management of Peripheral Nerve Disorders* and has written over 200 articles and chapters on various NMDs, including GBS, CIDP, ALS,

NMDs associated with HIV infection, diabetic neuropathy, and painful neuropathies. He also served as the Editor-in-Chief of the *Journal of Peripheral Nervous System*.

One of Dr. Cornblath's most notable endeavors was the development of criteria for the diagnosis of GBS in collaboration with Dr. Arthur Asbury. Their paper, *Assessment of Current Diagnostic Criteria for Guillain-Barré Syndrome*, has been widely cited and served as the basis for clinical trials and studies in this field.

Dr. Cornblath is also the co-inventor, alongside Vinay Chaudhry, MD, of the Total Neuropathy Score[®], a validated measure of peripheral nerve function.

Dr. Cornblath's long-standing affiliation with AANEM dates back to 1982. Receiving the Distinguished Researcher Award from AANEM came as a surprise to Dr. Cornblath, who expressed deep gratitude and honor. He said, "I was quite surprised. When I looked at the list of the past people, it was a very nice group to join. It's a lovely honor and a privilege to be considered in that class."

Jun Kimura Outstanding Educator Award - Amanda C. Peltier, MD, MS

Amanda C. Peltier, MD, MS, is honored for her numerous contributions to advancing medical education in the fields of NM and EDX medicine.

Dr. Peltier completed her medical degree at The Ohio State University, followed by a neurology residency and master's degree in clinical research design and statistical analysis at the University of Michigan. She also completed a NM fellowship, specializing in EMG, skin biopsy, and autonomic testing.



Dr. Peltier currently serves in many roles at Vanderbilt University Medical Center (VUMC). She is chief of the division of NMDs, full professor of neurology and medicine, director of the MDA/ALS clinic, and the site principal investigator for ALS and NM clinical trials at VUMC. She also serves as the fellowship director for the NM program at Vanderbilt University and is a valued

member of the Vanderbilt Autonomic Disorders Center and the Vanderbilt Amyloid Multidisciplinary Program. Apart from her responsibilities as a fellowship director, she actively participates in the Residency Recruitment Committee for the department of neurology and serves as the associate vice chair of faculty affairs.

Dr. Peltier has been an active member of AANEM since 2002. "The AANEM has a huge role in education support," she said. "It is a fantastic organization, and I have enjoyed working with AANEM for the last 20 years. It has helped me in my role as a fellowship director especially."

Dr. Peltier shared, "Thank you all very much for this award. I was frankly surprised and very, very honored. I hope that I try to pass on all of the knowledge that I learned from my mentors."

Ernest Johnson Outstanding Educator Award - Monika Krzesniak-Swinarska, MD

Monika Krzesniak-Swinarska, MD, is honored for her unwavering dedication to education in the fields of NM and EDX medicine.

Dr. Krzesniak-Swinarska graduated from the Medical University of Gdansk, Poland, and completed a PM&R residency at the Medical College of Wisconsin in Milwaukee. Following her residency, Dr. Krzesniak-Swinarska played an instrumental role in developing a MSK US course for PM&R residents at the Medical College of Wisconsin.

Dr. Krzesniak-Swinarska pursued a NM medicine fellowship at Wake Forest School of Medicine. Following her fellowship, she joined the neurology department at the University of New Mexico School of Medicine in Albuquerque, where she currently serves as associate professor of PM&R, NM medicine, and neurology and holds a secondary appointment in the department of orthopaedics & rehabilitation. She is also director of the Adult MDA Care Center and director of the EMG laboratory.



When asked about her key motivations, Dr. Krzesniak-Swinarska explained, “First, I believe that the best way to learn is to teach. By teaching, one must learn the core material in great depth and be able to make it relevant to students’ lives in today’s society. My second major motivation for excellent teaching is that I help people learn to improve themselves. Additionally, I believe that a good teacher is one who is not only competent in their field but is also always striving to learn more. In my opinion, educators who recognize that they do not know everything, but who also aim to constantly improve their own knowledge, can better relate to students because they continue to be students themselves.”

Dr. Krzesniak-Swinarska has been an active member of AANEM since 2010. Dr. Krzesniak-Swinarska said, “I am grateful to AANEM for this recognition and humbled by the award. I admired Dr. Johnson’s leadership in academic PM&R, and I strongly believe in Ernie’s ‘patient-first’ teaching philosophy. This award inspires me to continue my educator work with more passion and enthusiasm.”

Scientific Impact Award - Elie Naddaf, MD

Elie Naddaf, MD, is recognized for his contribution as senior author of *Survival and Associated Comorbidities in Inclusion Body Myositis*, which appeared in the September 2021 issue of *Rheumatology*. Co-authors include Shahar Shelly, Jay Mandrekar, Alanna M. Chamberlain, E. Matthew Hoffman, Floranne C. Ernst, and Teerin Liewluck.

This article is highly relevant to physicians as it sheds light on the prognosis of patients with IBM and identifies the complications and comorbidities associated with the disease.

Dr. Naddaf completed a neurology residency at the University of Wisconsin Hospitals and Clinics in Madison, followed by a fellowship in NM medicine at Mayo Clinic in Rochester, Minnesota. He is currently a neurologist specializing in NMDs and pursuing a master’s degree in clinical and transitional science, concentrated on clinical trial design through the Mayo Graduate School.



Dr. Naddaf has been a member of AANEM since 2014. He believes AANEM, as well as ANF, play a vital role in supporting researchers. “AANEM is a major platform for NM and EDX education via the annual meeting, online educational materials, podcasts, and other educational opportunities. It also offers a nurturing, friendly environment for researchers, especially early-career ones, to present their work and receive constructive, nonjudgmental feedback from experts in the field. ANF, which uses 100% of donations to support researchers, also plays a major role advocating for and advancing NM medicine research,” he said. “I feel honored, grateful, and very happy to receive this recognition.”

Dr. Naddaf extends his thanks to the AANEM Board of Directors and Awards Committee for selecting his publication and acknowledges the colleagues in neurology, rheumatology, biostatistics, and Rochester Epidemiologic Project who contributed to the project.

Scientific Impact Award - Colin K. Franz, MD, PhD

Colin K. Franz, MD, PhD, is recognized for his contribution as senior author of *The Distribution of Acquired Peripheral Nerve Injuries Associated With Severe COVID-19 Implicate a Mechanism of Entrapment Neuropathy: A Multicenter Case Series and Clinical Feasibility Study of a Wearable, Wireless Pressure Sensor*, published in the October 2022 issue of *Journal of NeuroEngineering and Rehabilitation*. Co-authors include Nikhil K. Murth, George R. Malik, Jean W. Kwak, Dom D'Andrea, Alexis R. Wolfe, Ellen Farr, Melanie A. Stearns, Swati Deshmukh, Jinny O. Tavee, Fang Sun, Kevin N. Swong, Leslie Rydberg, R. James Cotton, Lisa F. Wolfe, James M. Walter, John M. Coleman III, and John A. Rogers.

This article emphasizes the risk and distribution of peripheral nerve injuries among patients hospitalized with severe COVID-19, and highlights the critical need for protecting peripheral nerves in these individuals.



Dr. Franz earned a PhD at Dalhousie University in anatomy and neuroscience focused on peripheral nerve injury and regeneration, specifically studying different motor nerve subtypes. His interest in translational research and medicine led him to pursue a medical degree from the University of Calgary. He is currently the director of the EDX laboratory at the Shirley Ryan AbilityLab hospital and a physician in the Lois Insolia ALS Clinic at Northwestern Memorial Hospital in Chicago.

An active member of AANEM since 2017, Dr. Franz serves on the Research Committee and the PM&R Membership Task Force. "It's an honor to receive this award from the AANEM since it's the organization that best represents my peers and my medical subspecialty," Dr. Franz concluded. "There is no greater honor than to be recognized by your peers, including so many colleagues who you look up to and inspire you."

Honorary Member Award - Susan E. Mackinnon, MD

Susan E. Mackinnon, MD, is recognized for her achievements in the area of nerve transfer procedures and outstanding achievements in clinical care, community service, research and teaching. AANEM's Honorary Member Award is granted to nonmember physicians or scientific investigators who are major contributors to the field of NM, EDX, neurophysiology, or MSK disease by virtue of teaching, research, and scholarly publications.

Dr. Mackinnon received her medical degree from Queens University and completed a residency in plastic and reconstructive surgery and research fellowship in neurosurgery at the University of Toronto. She continued to develop her specialty and completed a fellowship in hand surgery at the Raymond Curtis Hand Center, Union Memorial Hospital.

Dr. Mackinnon is the Minot Packer Fryer Professor of Surgery at the Washington University School of Medicine in St. Louis. She pioneered the development of surgical nerve transfers and a new method of successfully treating patients with severe injuries affecting peripheral nerves and the brachial plexus, and she has trained many surgeons nationally and internationally in the use of nerve transfer techniques. Dr. Mackinnon consistently collaborates with EDX physicians to assess patients both before and after nerve transfer procedures.



Dr. Mackinnon has received numerous accolades in her career thus far, including the Jacobson Innovation Award from the American College of Surgeons; membership in the National Academy of Medicine; Clinician of the Year Award, Research Achievement Award for Basic Science, and Distinguished Fellow Award from the American Association of Plastic Surgeons; and served as president of the AAPS, AAHS, PSRC, and ASPN. She has also been recognized with a Distinguished Faculty Award - Distinguished Educator from the Washington University School of Medicine for her dedication to surgical education and commitment to mentoring surgical trainees, postdoctoral students, residents, and fellows. She has helped hundreds of mentees follow their passions, while serving as division chief, becoming a world-renowned hand surgeon, and conducting groundbreaking research on nerve allotransplantation and nerve transfer.

Dr. Mackinnon was surprised and honored to receive this award. She said, "When you're recognized by a group that is not in your academic family, it's extra special. So to be recognized by a nonsurgical specialty that I care very much about is a true honor."

Outstanding Service Award - Teresa Spiegelberg, CNCT, R.NCS.T., R.EEG.T, BS

Teresa Spiegelberg, CNCT, R.NCS.T., R.EEG.T, BS, has been awarded the inaugural Outstanding Service Award for her contributions to the fields of NM and EDX medicine and dedicated service to patients, medical education, and AANEM.

Ms. Spiegelberg has been a technologist at the University of Michigan EMG lab for decades. Known as the unofficial “lead technologist” in her lab, Ms. Spiegelberg directs testing of residents and fellows and manages the educational weekly NM lecture series at the University of Michigan. She is also a critical part of the neurosurgical evaluation of infants with neonatal brachial plexus palsy and adults with various peripheral nerve lesions.

Ms. Spiegelberg has been an AANEM member since 2010. “I think AANEM offers a wonderful place for technologists at all levels to converse and learn from one another,” she



said. “Participating in hands-on workshops allows people to not only learn from the instructor, but also to share their approaches with the instructor. I think we should all be open to having different techniques shared with us. I recall a smart person once saying to me, ‘no one of us is smarter than all of us together.’”

Ms. Spiegelberg feels honored to be awarded the inaugural Outstanding Service Award from AANEM. “I am extremely honored to be the first recipient of this award, especially considering the fact that I know so many wonderful technologists involved in the AANEM, like Candy Dolan, Peggy Neal, and Jerry Morris to name just a few among the many who have provided great service not just to the AANEM, but in their local area as well,” she said. “To me, getting this award shows that when you love and care about doing the best you can at your profession, others appreciate you as well.”

Public Recognition Award - Brooke Eby

Brooke Eby has been awarded the Public Recognition Award for her outstanding dedication to promoting awareness of muscle and nerve disorders through social media. This award is given to public figures, celebrities, or entities that have made extraordinary contributions toward increasing public awareness.

In March 2022, at the age of 33, Brooke Eby received a life-altering diagnosis: ALS. Now 34 years old, Brooke has transformed her diagnosis into a powerful platform for awareness and advocacy.

She decided to share her ALS journey publicly after witnessing actress Selma Blair’s impact in raising awareness for multiple sclerosis. She realized the need for a relatable “face” for ALS and began creating humorous videos on TikTok to gauge interest. The response was overwhelming, inspiring her to build a community where people feel comfortable asking questions and discussing terminal diagnoses openly.

Scientific research on NMDs, including ALS, is crucial to find treatments and, ultimately, a cure. Brooke often states, “ALS is not incurable, it’s underfunded,” and the only hope lies in



advancing research. She compares her situation to being in a car driving toward a cliff, with research being the only way to slow down or stop the inevitable outcome.

In her relentless pursuit to raise awareness, Brooke urges readers to donate to the American Neuromuscular Foundation. Increased financial support will accelerate progress and bring hope to countless individuals living with these diseases.

“I’m so grateful to receive AANEM’s Public Recognition Award,” Brooke said. “I consider any work in the fight against ALS to be award-worthy, so thank you for honoring my efforts this year. I hope to make a difference for the future of those fighting for ALS.” She is grateful to her friends, boyfriend, and family for their unwavering support and the laughter they bring into her life.

Through laughter and open conversations, Brooke believes we can drive awareness, funding, and hope for a brighter future for those affected by ALS and related diseases. She invites everyone to join her on her journey by following her story on social media (@limpbroomkit), where she says, “We’ll talk about ALS, but I promise that we’ll laugh along the way.”

2023 Abstract Awards

AANEM's abstract awards celebrate up-and-coming medical students, residents, and fellows who are beginning their careers, as well as experienced individuals who have conducted great research.

Congratulate all award winners during the Abstract Award Reception on Thursday, Nov. 2 from 5:15-6:45 pm in the Poster Hall. Abstract authors will also be available during select abstract poster sessions:

Session I | Thursday, Nov. 2 | 6–6:30 pm

Session II | Friday, Nov. 3 | 9:30–10 am

Session III | Friday, Nov. 3 | 3–3:30 pm

All abstracts are published in the October issue of *Muscle & Nerve*.



Golseth Young Investigator Award

The Golseth Young Investigator Award, honoring AANEM founding member Dr. James Golseth, is given to the best research submitted by a young physician to the AANEM Annual Meeting.

Winner: Michael Skolka, MD

The Utility of Electrodiagnostic Testing in Rhabdomyolysis in the Era of Next Generation Sequencing (*Abstract #1*)



Dr. Skolka, a NM fellow at Mayo Clinic, explored the utility of EMG in rhabdomyolysis. His objective was to identify rhabdomyolysis patients with a high likelihood of myopathic EMG and to examine the correlation between EDX findings and the underlying etiology of the unprovoked rhabdomyolysis.

“We found that myopathic EMG occurred in approximately half of our rhabdomyolysis patients. Patients with weakness and elevated CK at baseline were more likely to have myopathic EMG, and most patients with myopathic EMG had non-metabolic myopathies instead of metabolic myopathies as an underlying etiology of rhabdomyolysis. Additionally, non-myopathic EMG did not exclude an underlying myopathy.”

One unexpected discovery was that the data supported evaluating patients for an underlying myopathy following unprovoked rhabdomyolysis even if they only had one episode of rhabdomyolysis, challenging the current clinical tendency to assess patients only after recurrent episodes. The team also designed an algorithm to guide healthcare providers in evaluating patients who have experienced an episode of unprovoked rhabdomyolysis.

“I want to sincerely thank all of my mentors at Mayo Clinic and at the AANEM, especially Dr. Teerin Liewluck as well as Drs. Margherita Milone, Ruple Laughlin, William Litchy, and Devon Rubin, who all helped with this project and who have guided me along the way in my training,” he said. “I wouldn’t be the physician and researcher I am today without the help of my colleagues and the support of my family and wife. This award goes to all of them as much as it goes to me.”

Best Abstract Award

The Best Abstract Award is given to the first and presenting author of the best abstract submitted to the AANEM Annual Meeting.

Winner: Jerry Mendell, MD

Long-Term Safety and Efficacy in Patients With Duchenne Muscular Dystrophy 4 Years Post-Treatment With Delandistrogene Moxeparvovec in a Phase 1/2a Study (*Abstract #2*)



Dr. Mendell's abstract reports the outcomes of a long-term, open-label, Phase 1/2a study (Study 101; SRP-9001-101; NCT03375164) evaluating the safety and functional outcomes 4 years post-treatment with delandistrogene moxeparvovec. Delandistrogene moxeparvovec (SRP-9001) is an investigational rAAV vector-based gene therapy, designed to compensate for missing dystrophin in DMD by delivering a transgene encoding SRP-9001 dystrophin, an engineered dystrophin protein retaining key functional domains of the wild-type protein.

Dr. Mendell concluded that delandistrogene moxeparvovec was well tolerated 4 years post-treatment. Functional assessments demonstrated long-term sustained stabilization of motor function that was clinically meaningful, at ages where functional decline would be expected based on natural history.

This study helped support the agent's biologics license application, and in June 2023, SRP-9001 was granted accelerated approval by the FDA for individuals with DMD ages 4-5. Emphasizing the transformative potential of this gene therapy research, Dr. Mendell said, "This accelerated approval is extremely important and really advances the field. It's the first time we'll have systemic gene therapy in the field for DMD."

Dr. Mendell is an attending neurologist at Nationwide Children's Hospital, the Dwight E. Peters and Juanita R. Curran Endowed Chair in Pediatric Research at the Abigail Wexner Research Institute, and professor of pediatrics and neurology at The Ohio State University.

Runner-Up: Oksana Haiko, MD, PhD, ScD

The Role of Ultrasound in Diagnosis of Nerve Injury After Gunshot Wounds and Blast Injuries (*Abstract #3*)



As head of diagnostics at the Institute of Traumatology and Orthopedics of the National Academy of Medical Sciences of Ukraine, Dr. Haiko and co-authors Liudmila Klymchuk, MD, and Roman Luchko, MD, PhD, investigated the US features of different types of nerve injuries resulting from gunshot wounds and blast injuries to enhance diagnostic capabilities and establish evidence-based treatment strategies.

Her research concluded that US can be leveraged as an objective and highly informative diagnostic tool for nerve injury after gunshot and blast injuries, allows early identification of injury severity, and helps guide surgical decision-making.

Looking ahead, Dr. Haiko plans to delve deeper into the study of US changes in nerves and muscles, and comparison with EMG data to further refine diagnostic approaches and advance treatment strategies for patients with nerve injuries.

"This was unexpected for all authors. We feel happy and very proud to receive the Best Abstract Runner Up from AANEM, one of the biggest and most famous associations dedicated to NM and EDX medicine," she said. "This award encourages us to work harder and generate new ideas and projects. We would like to thank the AANEM Abstract Committee which deemed our abstract worthy of the award."

Technologist Best Abstract Award

The Technologist Best Abstract Award is given to the best research paper submitted by a technologist who has conducted and shared research to advance the science of NM and MSK diseases.

Winner: Stephanie Harvey

A Survey of Nerve Conduction Technologists' Role in EMG Labs (*Abstract #4*)



Ms. Harvey is an EMG technologist in the department of neurology with McGovern Medical School at UTHealth Houston. Motivated by the busy environment of their EMG lab, Ms. Harvey and her team sought to explore the impact of nerve conduction technologists on productivity, as perceived by EMG physicians.

Their findings revealed that 76% of respondents believed the inclusion of nerve conduction technologists enabled them to see a greater number of patients. Emphasizing the value of these professionals in EMG labs, Ms. Harvey stated, "We hope that EMG labs recognize that nerve conduction technologists are an asset. Career growth and continuing education for nerve conduction technologists should be emphasized."

She is grateful for the support of her colleagues, and thanked them for helping her learn about the science behind nerve conduction technologists. "My partner in the EMG lab, Yuri Salas, has taught me a lot and played a big role in my training. I work with a team of neuromuscular specialists, including Drs. Suur Biliciler, Kristin Brown, Thy Nguyen, Rajesh Gupta, Sri Sista, and Kazim Sheikh who are great at what they do and are always eager to answer any questions I have," she said.

Ms. Harvey expressed surprise, honor, and newfound inspiration upon receiving the award. She said, "I feel very honored and inspired to win this award. It makes me feel excited about future projects and learning."



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President's Research Initiative Award

The President's Research Initiative Award is given to up to 10 individuals who submitted the best abstracts related to the annual meeting plenary topic chosen by the AANEM President each year.

Mohsen Ahmed, BS	Are Neuromuscular Diseases Associated With a Greater Level of Neuro-Psychiatric Conditions? (<i>Poster #13</i>)
Abdullah Al Qahtani, MD, MPH	Patient Reported Impact of Symptoms in Spinal Bulbar Muscular Atrophy (<i>Poster #5</i>)
Hala Elhabashy, MD	Transcranial Direct Current Stimulation in Multiple Sclerosis: Exploring Novel Routes (<i>Poster #8</i>)
Ryan Floresca, BS	Impact of Edaravone on the Amyotrophic Lateral Sclerosis Course at TTUHSC El Paso Clinic: A Prospective Cohort Study (<i>Poster #11</i>)
Naglaa Gadallah, MD	Objective Prognostic Parameters for Management of Spasticity: Clinical, Electrodiagnostic, and Surgical Study (<i>Poster #7</i>)
Brendan McNeish, MD	Chemotherapy-Induced Peripheral Neuropathy is Associated With Decreased Executive Functioning in Cancer Survivors (<i>Poster #12</i>)
Julia Shah, MD	Assessing Rehab Needs in Children With Spinal Muscular Atrophy Status Post Onasemnogene Apeparovvec-Xioi (<i>Poster #6</i>)
Hallie Walsh, BA	Virtual Exercise Group Programs for Rehabilitation of Veterans With Amyotrophic Lateral Sclerosis (<i>Poster #9</i>)
Adeel Zubair, MD	Evaluation of Neuromuscular Provider Perceptions and Office Setup for Evaluating Patients With Disabilities (<i>Poster #10</i>)

Medical Student Research Award

The Medical Student Research Award encourages medical students to conduct research in NM and EDX medicine. Awards are given to medical students who are the first author and designated presenter on abstracts presented at the AANEM Annual Meeting.

Afaaq Ahmed, BS	Regional Disparities in Treatment Outcomes for Patients With Myasthenia Gravis Exacerbation (<i>Poster #33</i>)
Mohsen Ahmed, BS	<ul style="list-style-type: none">• Are Neuromuscular Diseases Associated With a Greater Level of Neuro-Psychiatric Conditions? (<i>Poster #13</i>)• Performance of Academic and Non-Academic Centers in Treatment of Guillain-Barre Syndrome (<i>Poster #25</i>)• Outcomes for Patients With Neuromuscular Disease Following Invasive Neurological Procedures (<i>Poster #26</i>)
Angela Ballesteros, BS	The "Rogue Wave Sign" as an Indicator of an Entrapment Mononeuropathy: A Case Report (<i>Poster #22</i>)
Tyler Cook, MS	An Ultra-Rare Genetic Cause of Global Developmental Delay and Severe Hypotonia (<i>Poster #15</i>)
Jonathan Espinosa, BSA	A Case of Slowly Progressive Ascending Weakness After COVID-19 Vaccine (<i>Poster #16</i>)
Margarita Fedorova, BA	Clinical and Diagnostic Features of Small Fiber Neuropathy With Fibroblast Growth Factor Receptor 3 Antibodies (<i>Poster #17</i>)
Huang He Ding	The Provider's Perspective on Newer Therapeutics for the Treatment of Generalized Myasthenia Gravis: A Cross-Sectional Survey (<i>Poster #32</i>)
Kazim Jaffry, BA	<ul style="list-style-type: none">• Urine Secretory Phospholipase A2 in Demyelinating Diabetic Distal Symmetric Polyneuropathy (<i>Poster #18</i>)• Comparing Mortality and Morbidity in Standard Treatment Protocols for Guillain-Barré Syndrome (<i>Poster #19</i>)• Temporal Changes in Trends and Outcomes for Multifocal Motor Neuropathy (<i>Poster #20</i>)• Identification of Trends and Clinical Outcomes in Pediatric Botulism (<i>Poster #21</i>)

Marilyn Lu, BA	Juvenile Myasthenia Gravis in North Texas: Clinical Features, Treatment Response, and Outcomes (<i>Poster #30</i>)
Lisa McReynolds, MBBCH	What a Waste! (Of Thenar Muscle): A Service Improvement Audit (<i>Poster #24</i>)
Olivia Pakula, BA	Clinical Disparities Between Caucasians and African Americans With Charcot-Marie-Tooth Disease Type 1A (<i>Poster #29</i>)
Jude Tunyi, BS	Deep Brain Stimulation for the Management of AIFM1-Related Disabling Tremor: A Case Series (<i>Poster #31</i>)
Nikhita Valipe	What is the Most Effective Use of Bisphosphonates to Optimise Bone Health in Patients With Duchenne Muscular Dystrophy? (<i>Poster #23</i>)
Nicole Zougheib, MBA	Ultrasound as a Diagnostic Modality for Wrist Pain in a Nonverbal Patient With Autism Spectrum Disorder (<i>Poster #28</i>)

Residency and Fellowship Member Award

The Residency and Fellowship Member Award encourages young physician members to conduct research in NM and EDX medicine. Awards are given to residency and fellowship members who are the first author and designated presenter on abstracts presented at the AANEM Annual Meeting.

Ian Ackers, DO, PhD	A Tongue Twister: Tongue Weakness Due to Paraneoplastic Syndrome in Multiple Myeloma (<i>Poster #62</i>)
Adenike Adewuyi, MD, PhD	<ul style="list-style-type: none"> A Case of Post-Infectious Herpes Simplex Virus Type 1-Related Bibrachial Plexopathy (<i>Poster #56</i>) Obinutuzumab for the Treatment of Refractory Systemic Lupus Erythematosus Associated Chronic Inflammatory Demyelinating Polyradiculoneuropathy (<i>Poster #57</i>)
Hassan Alhussein, MD	Atypical Pathological Features in Idiopathic Inflammatory Myopathies (<i>Poster #85</i>)
Ketevan Amirghanashvili, MD	Facial Diplegia in a Patient With Hemolysis, Elevated Liver Enzymes, and Low Platelets Syndrome: A Rare Manifestation of Miller Fisher Syndrome (<i>Poster #100</i>)
Benjamin Becker, MD	Nerve Conduction Studies of Sensory Nerves With Proven Vasculitic Neuropathy Often Show an Absent Electrical Response (<i>Poster #98</i>)
Miriam Bekhit, MD	<ul style="list-style-type: none"> Incidental Electrodiagnostic Findings of Left Riche-Cannieu and Right Marinacci Anastomosis: A Case Report (<i>Poster #76</i>) Acute-Onset Chronic Inflammatory Demyelinating Polyneuropathy Associated With Common Variable Immunodeficiency: A Case Report (<i>Poster #77</i>)
John Bireley, MD	Diplopia in a 67-Year-Old Woman: A Case of Carotid Cavernous Fistula With Positive Acetylcholine Receptor Binding Antibody (<i>Poster #73</i>)
Meghan Branston, DO	A Case of HMGCR Antibody Positive Necrotizing Myopathy After COVID-19 mRNA Vaccination (<i>Poster #35</i>)
Christopher Brewer, MD, PhD	A Novel Intronic Alpha-Tropomyosin 3 Gene Mutation in a Patient With Nemaline Myopathy (<i>Poster #50</i>)
Luisa Castaño Herrera, MD	Acute Motor Axonal Neuropathy With Lower Limb Involvement: Electrodiagnostic Study, Ultrasonography, and Magnetic Resonance Imaging (<i>Poster #53</i>)
Aaron Charnay, MD	Peculiar Case of Traumatic Ulnar Nerve Injury Resulting in Denervation of Abductor Digiti Minimi While Sparing Other Hand Intrinsic, Giving Insight Into Interfascicular Anatomy of the Ulnar Nerve (<i>Poster #99</i>)
Katherine Clifford, MD	Risk of Infection in Patients With Myasthenia Gravis With and Without Thymoma (<i>Poster #36</i>)
Tyler Crissinger, MD	Lambert-Eaton Myasthenic Syndrome Presentation as Evaluation for Carpal Tunnel Syndrome (<i>Poster #93</i>)
Cole Denkensohn, MD	Adalimumab-Induced Multifocal Motor Neuropathy - A Disabling but Reversible Phenomenon (<i>Poster #34</i>)
Joseph Ditrapani, MD, MPH	Quantitative Ultrasound of the Rectus Femoris in Patients With Inclusion Body Myositis (<i>Poster #78</i>)

- Akash Doshi, MD** Track Chronic Inflammatory Demyelinating Polyneuropathy Progression Through Apple Watch (Poster #68)
- Vanessa Dwairi, MD** Diagnosing X-Linked Myopathy With Excessive Autophagy After 30 Years: Genetic, Ultrasonographic, and Electrodiagnostic Findings (Poster #86)
- Colin Fry, MD** Causes of Mononeuritis Multiplex: A Comprehensive, Structured Literature Review (Poster #39)
- Sukhraj Gill, MD**
- The Utility of Whole Exome Sequencing for Neuromuscular Conditions (Poster #64)
 - How to Diagnose Amyloidosis Early? The Answer May Be in Your Hands (Poster #65)
- Michelle Glantz, DO** Conus Medullaris Syndromes Are a Common Mimic of Diverse Neuromuscular Diseases (Poster #79)
- Andre Granger, MD, MBA** Descending Mononeuropathies: An Unusual Presentation of AL Amyloidosis (Poster #63)
- Julia Greenberg, MD** Hiding in Plain Sight: A Case of Multifocal Acquired Demyelinating Sensory and Motor Neuropathy Masked by Multiple Concomitant Neuropathies (Poster #44)
- Morgan Heber, MD**
- A Case of Porphyric Neuropathy Misdiagnosed as Motor Neuron Disease (Poster #87)
 - Is Repetitive Nerve Stimulation Testing Less Informative in Very Early-Stage Myasthenia Gravis? (Poster #88)
- Alexis Kaiser, MD** Successful Management of Painful Legs-Moving Toes Syndrome With Functional Electrical Stimulation (Poster #52)
- Nakul Katyal, MD**
- Clinical Experience With Ravulizumab for Treatment of Acetylcholine Receptor Positive Generalized Myasthenia Gravis (Poster #69)
 - Plasmapheresis in Patients With Immune Checkpoint Inhibitors Related Myositis Without Myasthenia Gravis (Poster #70)
- Nadia Khalil, MD** Safety and Efficacy of Eculizumab Throughout Three Pregnancies in a Patient With Treatment Refractory Generalized Myasthenia Gravis (Poster #58)
- Javed Khanni, MD** Relapsing Severe Immune-Mediated Demyelinating Polyneuropathy as a Presenting Feature of Systemic Lupus Erythematosus (Poster #75)
- Carlos Lara, MD** Macroglossia as a Presenting Feature of the Adult Onset Pompe Disease (Poster #45)
- Mark Levine, MD, MA**
- Experience With Subcutaneous Immunoglobulin in Patients With Chronic Inflammatory Demyelinating Polyneuropathy and Other Acquired Demyelinating Neuropathies (Poster #95)
 - A Rare, Atypical Case of Inclusion Body Myositis in a Patient With Dyspnea as the Chief and Predominant Complaint (Poster #96)
- Trevor Logan, MD, PhD** Ultrasonographic and Electrodiagnostic Evaluation of Focal Myokymia With Demyelinating Ulnar Neuropathy (Poster #40)
- Kyle Medley, DO** Neurogenic Thoracic Outlet Syndrome Presenting Decades After Neonatal Brachial Plexus Palsy: Two Related Lesions? (Poster #83)
- Thomas Mehner, DO** A Mistaken Diagnosis of Amyotrophic Lateral Sclerosis: A Case of Multiple Lumbar Nerve Root Schwannomas (Poster #46)
- James Meiling, DO**
- Bilateral Parsonage-Turner Syndrome With Flaccid Paralytic Biceps Brachii and Clinical Brachialis Sparing: A Case Report (Poster #80)
 - Iatrogenic Brachial Plexopathy From an Interscalene Brachial Plexus Nerve Block: A Case Report (Poster #81)
- Jenifer Moceri, DO** Progressive Sensory Neuropathy as Initial Presentation of Cerebellar Ataxia, Neuropathy, and Vestibular Areflexia Syndrome (Poster #97)
- Jonathan Morena, DO** Magnetic Resonance Neurography and Quantitative Muscle MRI of Parsonage-Turner Syndrome Involving the Long Thoracic Nerve (Poster #49)
- Chineze Nwebube, MD, MSc** A Case of Fulminant Chronic Inflammatory Demyelinating Polyneuropathy (Poster #71)
- Shaida Omid, MD** Onset of Radiation-Induced Brachial Plexopathy 30+ Years After Initial Exposure, A Case Report (Poster #60)
- Nathalia María Pérez Becerra, MD**
- Median and Radial Neuropathy Due to Brachial Artery Aneurysm: Case Report (Poster #47)
 - Neuromuscular Ultrasound to Support Early Electrodiagnosis of Guillain-Barre Syndrome: A Case Report (Poster #48)

- Saniya Pervin, MBBS** Ultrasound Diagnosis of Carpal Tunnel Syndrome in Charcot-Marie-Tooth Type 2A
Poster #72)
- Laura Pinzón, MD**
- Tarsal Tunnel Syndrome Secondary to Post-Traumatic Cyst (*Poster #41*)
 - Neuromuscular Ultrasound as a Complementary Tool in Neurophysiologically Severe Polyneuropathy (*Poster #42*)
- Shubadra Priyadarshini, MD** Mononeuritis Multiplex Secondary to Cryoglobulinemia-Mediated Vasculitis From Smoldering Myeloma: A Case Report (*Poster #59*)
- Taha Qarni, MD** A Case of Bulbar-Predominant Axonal Polyneuropathy and Myopathy With an Inflammatory Component Associated With Vacuole, E1 Enzyme, X-Linked, Autoinflammatory, Somatic Syndrome (*Poster #43*)
- Benjamin Rardin, MD** Acute Motor Axonal Neuropathy as a Complication of Graft Versus Host Disease (*Poster #90*)
- Nicolas Ruan dos Santos Cavalcante, MD** Electrodiagnostic Characteristics of Sensory Ganglionopathies (*Poster #74*)
- Ashley Santilli, MD** Contactin-1 Antibody Associated Inflammatory Polyradiculoneuropathy (*Poster #54*)
- Deborah Setter, MD, PhD** Teaching Peripheral Neuroanatomy in a Digital Era: Designing and Assessing Online Modules (*Poster #66*)
- Roopa Sharma, MD** Natural History of Conduction Slowing in Diabetic Distal Symmetric Polyneuropathy (*Poster #101*)
- Akhil Shivaprasad, MD** Nodal and Paranodal Antibody Mediated Demyelinating Neuropathy (*Poster #51*)
- Madeline Singer, MD** Multifocal Mononeuropathy Secondary to Inflammatory Pseudotumor of the Peripheral Nerve (*Poster #67*)
- Baljinder Singh, MD** Novel A302T Variant in the Expanding Reticulon-2 Related Spectrum in Spastic Paraplegia 12 (*Poster #55*)
- Michael Skolka, MD** The Utility of Electrodiagnostic Testing in Rhabdomyolysis (*Poster #1*)
- Sarah Smith, MD** A Case of Primary Membranous Nephropathy in a Patient With Myasthenia Gravis (*Poster #94*)
- Hemani Ticku, MD**
- Neuromuscular Ultrasound Features of Sarcoid Tibial Mononeuropathy (*Poster #91*)
 - Nonlocalizable Ulnar Neuropathy Due to Ganglion Cyst - Role of Neuromuscular Ultrasound (*Poster #92*)
- Gautham Upadrasta, MD**
- Spinal Arteriovenous Fistula Initially Misdiagnosed as Chronic Inflammatory Demyelinating Polyneuropathy (*Poster #37*)
 - Sandpaper Arms: A Rare Neurological Presentation of Primary Sjogren Syndrome Initially Misdiagnosed as Guillain-Barre Syndrome (*Poster #38*)
- Sanem Pinar Uysal, MD** Pitfalls in the Evaluation of Respiratory Failure in Myasthenia Gravis Patients: A Case Series (*Poster #61*)
- Amber Vocelle, DO, PhD** Guyon Canal Neuropathy With Paresthesias in Digits 3-5: Electrodiagnostic Evidence of Berrettini Anastomosis May Explain Symptom Extension to Digit 3 (*Poster #82*)
- Thapat Wannarong, MD**
- Markedly Abnormal Lipid Accumulation in RRM2B-Related Progressive External Ophthalmoplegia: A Case Report (*Poster #102*)
 - Acquired Rippling Muscle Disease With Acetylcholine Receptor Antibodies (*Poster #103*)
- Josh Wilson, MD** Longitudinal Management of Sialorrhea in Veterans With Amyotrophic Lateral Sclerosis Using Botulinum Toxin (*Poster #89*)
- Nathaniel Wooten, MD** A Case of Ulnar Mononeuropathy From Hereditary Sensory and Autonomic Neuropathy Type IV Related Charcot Joint (*Poster #84*)

ANF & IFCN Scholarship Recipients

The ANF and International Federation of Clinical Neurophysiology North American Chapter (IFCN NAC) scholarship programs provide opportunities for physicians who practice in economically developing countries to apply for funds to support their education through attendance at the AANEM Annual Meeting. Those who are attending virtually have had their registration covered by ANF and IFCN NAC. Those who were able to travel received a \$1,000 travel scholarship to help defray the cost of travel and meeting registration.

American Neuromuscular Foundation

- Luisa Castaño Herrera, MD** Acute Motor Axonal Neuropathy With Lower Limb Involvement: Electrodiagnostic Study, Ultrasonography, and Magnetic Resonance Imaging (Poster #53)
- Nicolas Ruan dos Santos Cavalcante, MD** Electrodiagnostic Characteristics of Sensory Ganglionopathies (Poster #74)
- Otto Hernandez Fustes, MD, MSc, PhD**
- Pain-Related Evoked Potentials: Normative Data (Poster #214)
 - Analysis of Indications for Electroneuromyographic Studies (Poster #215)
 - 100th Anniversary of the Cutaneous Silent Period Test: Current Relevance in Clinical Neurophysiology (Poster #230)
 - “Axonal” Landry-Guillain-Barre-Strohl Syndrome in the Latin American Book of 1976 (Poster #231)
- Nathalia María Pérez Becerra, MD**
- Median and Radial Neuropathy Due to Brachial Artery Aneurysm: Case Report (Poster #47)
 - Neuromuscular Ultrasound to Support Early Electrodiagnosis of Guillain-Barre Syndrome: A Case Report (Poster #48)
- Eman A. Tawfik, MD**
- Non-Neuromuscular Pathologies in Patients Primarily Referred for Neuromuscular Ultrasound: Report of Two Cases (Poster #224)

International Federation of Clinical Neurophysiology North American Chapter

- Mrinal Acharya, MBBS, MD, DM** Hirayama Disease: A Electrophysio-Radiological Documentary (Poster #170)
- Sandra Milena Barrera Castro, MD** Carpal Tunnel Syndrome Related to Lymphedema in Women With Breast Cancer (Poster #118)
- Andrea Bonfante, MD** Bickerstaff Brainstem Encephalitis in a Young Patient: A Case Report in Bogota, Colombia (Poster #216)
- Mengjie Chen, MD**
- Motor Unit Number Index in Idiopathic Facial Palsy (Poster #116)
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- Hala Elhabashy, MD** Transcranial Direct Current Stimulation in Multiple Sclerosis: Exploring Novel Routes (Poster #8)
- Abeer El-Zohiery, MD** Fibromyalgia Syndrome: Is There a Correlation Between Electrodiagnostic Findings and Muscle Histopathology? (Poster #120)
- Xinhong Feng, MD** Clinical, Neurophysiological, and Ultrasonic Changes in a Case of Peripheral Nerve Damage in Leprosy (Poster #113)
- Naglaa Gadallah, MD** Objective Prognostic Parameters for Management of Spasticity: Clinical, Electrodiagnostic, and Surgical Study (Poster #7)
- Joel Gutiérrez, MD, PhD** Nerve Conduction Studies in Patients With Familial Dysautonomia (Poster #212)
- Oksana Haiko, MD, PhD, ScD** The Role of Ultrasound in Diagnosis of Nerve Injury After Gunshot Wounds and Blast Injuries (Poster #3)
- Wilmer Santiago Herrera Malpica, MD** Bethlem Myopathy Clinical View With Ultrasonography and Electrodiagnosis: A Case Report (Poster #187)
- Xiao Huan, MD** Thymoma-Associated Myasthenic Crisis: A Multicenter Retrospective Cohort Study (Poster #186)
- Maha Ibrahim, MD** Role of Tgf-1 β Gene Polymorphisms in the Pathogenesis of Carpal Tunnel Syndrome in Egyptian Patients (Poster #164)
- Daniel Manrique Hernandez, MD** Late-Onset P.Val142ile Transthyretin Amyloidosis Mixed Phenotype in an Elderly Person in a Non-Endemic Area: A Case Report In Colombia (Poster #232)

- Josué Moreno, MD** • Dissociation Between Creatine Kinase Levels and Myopathic Symptoms in Immune-Mediated Necrotizing Myopathy: A Case Report (Poster #121)
- Encephalomyelitis Longitudinally Extensive With Polyradiculitis as a Debut of Neuropsychiatric Lupus: A Case Report (Poster #122)
- Jose Pedro Soares Baima, MD** Mononeuritis Multiplex: A Case Series (Poster #126)
- Rachel Pérez-Lalana, MD** Mechanically Induced Somatosensory Evoked Potentials: Genuine Electrophysiological Responses or Movement Artifacts? (Poster #162)
- Laura Pinzón, MD** • Tarsal Tunnel Syndrome Secondary to Post-Traumatic Cyst (Poster #41)
- Neuromuscular Ultrasound as a Complementary Tool in Neurophysiologically Severe Polyneuropathy (Poster #42)
- Andersson Rozo, MD** Reference Values of Electromyography Studies of the Masseter and Temporal Muscles (Poster #195)
- Manqiqige Su, MD** Nomogram for Prediction of Pregnancy-Related Clinical Worsening in Myasthenia Gravis Patients (Poster #182)
- Hongfei Tai, MD** Peripheral Nerve Involvement in Neuronal Intranuclear Inclusion Disease: Prospective Clinical and Neurophysiological Studies (Poster #218)
- Ailin Stephanie Ventura, MD** Carpal Tunnel Syndrome in Amyloidosis: An Early Marker of the Disease (Poster #140)
- Yan Wang, MD** Early Diagnostic and Prognostic Value of Repetitive Nerve Stimulation in Amyotrophic Lateral Sclerosis (Poster #221)



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PM-00374 6/2023

This activity will be held during the AANEM Annual Meeting. It is not part of the official scientific program of the AANEM.

Poster Presentations List

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2	LONG-TERM SAFETY AND EFFICACY IN PATIENTS WITH DUCHENNE MUSCULAR DYSTROPHY 4 YEARS POST-TREATMENT WITH DELANDISTROGENE MOXEPARVOVEC IN A PHASE 1/2A STUDY	Jerry Mendell, MD	I & III
3	THE ROLE OF ULTRASOUND IN DIAGNOSIS OF NERVE INJURY AFTER GUNSHOT WOUNDS AND BLAST INJURIES	Oksana Haiko, MD, PhD, ScD	I & II
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9	VIRTUAL EXERCISE GROUP PROGRAMS FOR REHABILITATION OF VETERANS WITH AMYOTROPHIC LATERAL SCLEROSIS	Hallie Walsh, BA	I & II
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11	IMPACT OF EDARAVONE ON THE AMYOTROPHIC LATERAL SCLEROSIS COURSE AT TTUHSC EL PASO CLINIC: A PROSPECTIVE COHORT STUDY	Ryan Floresca, BS	I & II
12	CHEMOTHERAPY-INDUCED PERIPHERAL NEUROPATHY IS ASSOCIATED WITH DECREASED EXECUTIVE FUNCTIONING IN CANCER SURVIVORS	Brendan McNeish, MD	I & III
13	ARE NEUROMUSCULAR DISEASES ASSOCIATED WITH A GREATER LEVEL OF NEURO-PSYCHIATRIC CONDITIONS?	Mohsen Ahmed, BS	I & III
15	AN ULTRA-RARE GENETIC CAUSE OF GLOBAL DEVELOPMENTAL DELAY AND SEVERE HYPOTONIA	Tyler Cook, MS	I & II
16	A CASE OF SLOWLY PROGRESSIVE ASCENDING WEAKNESS AFTER COVID-19 VACCINE	Jonathan Espinosa, BSA	I & III
17	CLINICAL AND DIAGNOSTIC FEATURES OF SMALL FIBER NEUROPATHY WITH FIBROBLAST GROWTH FACTOR RECEPTOR 3 ANTIBODIES	Margarita Fedorova, BA	I & II
18	URINE SECRETORY PHOSPHOLIPASE A2 IN DEMYELINATING DIABETIC DISTAL SYMMETRIC POLYNEUROPATHY	Kazim Jaffry, BA	I & II
19	COMPARING MORTALITY AND MORBIDITY IN STANDARD TREATMENT PROTOCOLS FOR GUILLAIN-BARRE SYNDROME	Kazim Jaffry, BA	I & II
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22	THE "ROGUE WAVE SIGN" AS AN INDICATOR OF AN ENTRAPMENT MONONEUROPATHY: A CASE REPORT	Angela Ballesteros, BS	I & III
23	WHAT IS THE MOST EFFECTIVE USE OF BISPHOSPHONATES TO OPTIMISE BONE HEALTH IN PATIENTS WITH DUCHENNE MUSCULAR DYSTROPHY?	Nikhita Valipe	I & III
24	WHAT A WASTE! (OF THENAR MUSCLE): A SERVICE IMPROVEMENT AUDIT	Lisa McReynolds, MBBCH	I & II
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41	TARSAL TUNNEL SYNDROME SECONDARY TO POST-TRAUMATIC CYST	Laura Pinzón, MD	I & III
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Insights from a CSL-sponsored Harris Poll survey*

Of patients surveyed who have used both IVIg and self-infused Ig:

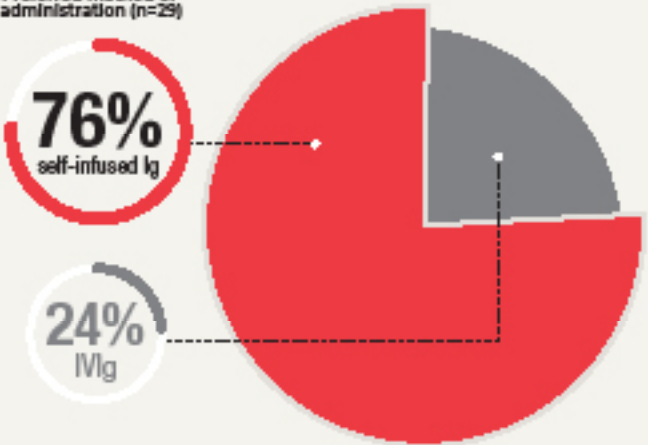
Most CIDP patients preferred self-infused Ig over IVIg[†]

*Online Harris Poll survey sponsored by CSL Behring LLC of 103 U.S. adults with CIDP.
†Qualified respondents with CIDP who have ever used IVIg and self-infused Ig (n=29).

CIDP=Chronic inflammatory demyelinating polyneuropathy
IVIg=intravenous immunoglobulin

Reference: 1. Data on File. Available from CSL Behring as DOF HIZ-014.

Preferred method of administration (n=29)



76%	self-infused Ig
24%	IVIg

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INDICATIONS AND USAGE:

FIRDAPSE is a potassium channel blocker indicated for the treatment of Lambert-Eaton myasthenic syndrome (LEMS) in adults and pediatric patients 6 years of age and older.

SELECTED IMPORTANT SAFETY INFORMATION

FIRDAPSE can cause seizures. Consider discontinuation or dose-reduction of FIRDAPSE in patients who have a seizure while on treatment.

Please see Brief Summary of full Prescribing Information on the next page.

References: 1. Yoon CH, Owusu-Guha J, Smith A, Buschur P. Amifampridine for the management of Lambert-Eaton myasthenic syndrome: a new take on an old drug. *Ann Pharmacother.* 2020;54(1):56-63. 2. Full Prescribing Information for FIRDAPSE (amifampridine). Catalyst Pharma; 2023. 3. Shieh P, Sharma K, Kohrman B, Oh SJ. Amifampridine phosphate (FIRDAPSE®) is effective in a confirmatory phase 3 clinical trial in LEMS. *J Clin Neuromuscul Dis.* 2019;20(3):111-119. 4. Oh SJ, Scherbakova N, Kostera-Pruszczyk A, et al. Amifampridine phosphate (FIRDAPSE®) is effective and safe in a phase 3 clinical trial in LEMS. *Muscle Nerve.* 2016;53(5):717-725.



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FIRDAPSE® (amifampridine) tablets for oral use

BRIEF SUMMARY OF FULL PRESCRIBING INFORMATION FOR FIRDAPSE

INDICATIONS AND USAGE

FIRDAPSE is a potassium channel blocker indicated for the treatment of Lambert-Eaton myasthenic syndrome (LEMS) in adults and pediatric patients 6 years of age and older.

DOSE AND ADMINISTRATION

- Administer orally in divided doses (3 to 4 times daily).
- The recommended starting dosage for adults (any weight) and pediatric patients weighing 45 kg or more is 15 mg to 30 mg daily, in divided doses.
 - Dosage can be increased by 5 mg daily every 3 to 4 days.
 - The maximum single dose is 20 mg.
 - Dosage is not to exceed a maximum of 80 mg daily.
- The recommended starting dosage for pediatric patients weighing less than 45 kg is 5 mg to 15 mg daily, in divided doses.
 - Dosage can be increased by 2.5 mg daily every 3 to 4 days.
 - The maximum single dose is 10 mg.
 - Dosage is not to exceed a maximum of 40 mg daily.

CONTRAINDICATIONS

FIRDAPSE is contraindicated in patients with:

- A history of seizures
- Hypersensitivity to amifampridine phosphate or another aminopyridine

WARNINGS AND PRECAUTIONS

Seizures

FIRDAPSE can cause seizures. Seizures have been observed in patients without a history of seizures taking FIRDAPSE at the recommended doses, at various times after initiation of treatment, at an incidence of approximately 2%. Many of the patients were taking medications or had comorbid medical conditions that may have lowered the seizure threshold. Seizures may be dose-dependent. Consider discontinuation or dose-reduction of FIRDAPSE in patients who have a seizure while on treatment.

Hypersensitivity

In clinical trials, hypersensitivity reactions and anaphylaxis associated with FIRDAPSE administration have not been reported. Anaphylaxis has been reported in patients taking another aminopyridine; therefore, it may occur with FIRDAPSE. If anaphylaxis occurs, administration of FIRDAPSE should be discontinued and appropriate therapy initiated.

ADVERSE REACTIONS

The following serious adverse reactions are described elsewhere in the labeling:

- Seizures
- Hypersensitivity

Clinical Trials Experience

Adults

Because clinical trials are conducted under widely varying conditions, adverse reaction rates observed in the clinical trials of a drug cannot be directly compared to rates in the clinical trials of another drug and may not reflect the rates observed in practice.

In controlled and uncontrolled trials (Study 1 and 2) in patients with LEMS, 63 patients were treated with FIRDAPSE, including 40 patients treated for more than 6 months, and 39 patients treated for more than 12 months. In an expanded access program, 139 patients with LEMS were treated with FIRDAPSE, including 102 patients treated for more than 6 months, 77 patients treated for more than 12 months, and 53 patients treated for more than 18 months.

Study 1 was a double-blind, placebo-controlled, randomized discontinuation study in adults with LEMS. Following an initial open-label run-in phase (up to 90 days), patients were randomized to either continue FIRDAPSE treatment or transition to placebo for a 14-day double-blind phase. Following final assessments, patients were allowed to resume FIRDAPSE treatment for up to 2 years (open-label, long-term safety phase of the study).

During the open-label run-in phase of Study 1, 53 patients received FIRDAPSE for an average of 81 days at an

average daily dosage of 50.5 mg/day. The average patient age was 52.1 years and 66% were female. There were 42 patients who had no prior exposure to FIRDAPSE at the initiation of this study. Table 1 shows adverse reactions with an incidence of 5% or greater occurring in the 42 LEMS patients newly initiated on treatment with FIRDAPSE during the run-in phase of the study.

Table 1. Adverse Reactions in ≥5% of LEMS Patients Newly Treated with FIRDAPSE in Study 1

ADVERSE REACTION	FIRDAPSE N=42 %
Paresthesia*	62
Upper respiratory tract infection	33
Abdominal pain	14
Nausea	14
Diarrhea	14
Headache	14
Elevated liver enzymes**	14
Back pain	14
Hypertension	12
Muscle spasms	12
Dizziness	10
Asthenia	10
Muscular weakness	10
Pain in extremity	10
Cataract	10
Constipation	7
Bronchitis	7
Fall	7
Lymphadenopathy	7

*Includes paresthesia, oral paresthesia, oral hypoesthesia

**Includes elevated alanine aminotransferase (ALT), aspartate aminotransferase (AST), lactate dehydrogenase (LDH), and gamma-glutamyl transferase (GGT)

Other Adverse Reactions

In the overall population treated in Study 1 (n=53), including the double-blind phase and the 2-year open-label long-term safety phase, additional adverse reactions occurring in at least 5% of the patients included: dyspnea, urinary tract infection, gastroesophageal reflux, insomnia, peripheral edema, pyrexia, viral infection, blood creatine phosphokinase increase, depression, erythema, hypercholesterolemia, and influenza. These patients received an average daily dosage of 66 mg of FIRDAPSE.

Pediatrics

Safety of FIRDAPSE was evaluated in pediatric patients in an expanded access program, where 21 pediatric patients received FIRDAPSE for at least 1 year. Adverse reactions reported in pediatric patients were similar to those seen in adult patients, with the exception of clinically significant weight loss in two pediatric patients at doses of 60 mg per day and higher.

DRUG INTERACTIONS

Drugs that Lower Seizure Threshold

The concomitant use of FIRDAPSE and drugs that lower seizure threshold may lead to an increased risk of seizures. The decision to administer FIRDAPSE concomitantly with drugs that lower the seizure threshold should be carefully considered in light of the severity of the associated risks.

Drugs with Cholinergic Effects

The concomitant use of FIRDAPSE and drugs with cholinergic effects (e.g., direct or indirect cholinesterase inhibitors) may increase the cholinergic effects of FIRDAPSE and of those drugs and increase the risk of adverse reactions.

USE IN SPECIFIC POPULATIONS

Pregnancy

Pregnancy Exposure Registry

There is a pregnancy exposure registry that monitors pregnancy outcomes in women exposed to FIRDAPSE during pregnancy. Physicians are encouraged to enroll pregnant patients, or pregnant women may register themselves in the registry by calling 855-212-5856 (toll-free), using the Fax number 877-867-1874 (toll-free), by contacting the Pregnancy Coordinating Center at firdapsepregnancyregistry@ubc.com or by visiting the study website at www.firdapsepregnancystudy.com.

Risk Summary

There are no data on the developmental risk associated with the use of FIRDAPSE in pregnant women. In animal studies,

administration of amifampridine phosphate to rats during pregnancy and lactation resulted in developmental toxicity (increase in stillbirths and pup deaths, reduced pup weight, and delayed sexual development) at doses associated with maternal plasma drug levels lower than therapeutic drug levels (see Animal Data). In the U.S. general population, the estimated background risk of major birth defects and miscarriage in clinically recognized pregnancies is 2-4% and 15-20%, respectively. The background risk of major birth defects and miscarriage for the indicated population is unknown.

Data

Animal Data

Oral administration of amifampridine phosphate (0, 7.5, 22.5, or 75 mg/kg/day) to female rats prior to and during mating and continuing throughout organogenesis produced no adverse effects on embryofetal development. Plasma amifampridine exposure (AUC) at the highest dose tested is approximately 7 times that in humans at the maximum recommended human dose (MRHD) of 80 mg amifampridine/day. Oral administration of amifampridine phosphate (0, 9, 30, or 57 mg/kg/day) to pregnant rabbits throughout organogenesis produced no adverse effects on embryofetal development. The highest dose tested is approximately 7 times the MRHD (80 mg/day amifampridine) on a body surface area (mg/m²) basis.

Oral administration of amifampridine phosphate (0, 7.5, 22.5, or 75 mg/kg/day) to female rats throughout pregnancy and lactation resulted in an increase in stillbirths and pup deaths, reduced pup weight, and delayed sexual development in female pups at the mid and high doses tested. The no-effect dose (7.5 mg/kg/day amifampridine phosphate) for adverse developmental effects is associated with a plasma amifampridine exposure (AUC) less than that in humans at the MRHD.

Lactation

Risk Summary

There are no data on the presence of FIRDAPSE in human milk, the effects on the breastfed infant, or the effects on milk production. The developmental and health benefits of breastfeeding should be considered along with the mother's clinical need for FIRDAPSE and any potential adverse effects on the breastfed infant from FIRDAPSE or from the underlying maternal condition.

In lactating rat, amifampridine was excreted in milk and reached levels similar to those in maternal plasma.

Pediatric Use

Safety and effectiveness of FIRDAPSE for the treatment of LEMS have been established in pediatric patients 6 years of age and older.

Use of FIRDAPSE for this indication is supported by evidence from adequate and well-controlled studies of FIRDAPSE in adults with LEMS, pharmacokinetic data in adult patients, pharmacokinetic modeling and simulation to identify the dosing regimen in pediatric patients, and safety data from pediatric patients aged 6 years and older.

Safety and effectiveness in pediatric patients below the age of 6 years have not been established.

Geriatric Use

Clinical studies of FIRDAPSE did not include sufficient numbers of subjects aged 65 and over (19 of 63 patients in Studies 1 and 2) to determine whether they respond differently from younger subjects. Other reported clinical experience has not identified differences in responses between the elderly and younger patients. In general, dose selection for an elderly patient should be cautious, usually starting at the low end of the dosing range, reflecting the greater frequency of decreased hepatic, renal, or cardiac function, and of concomitant disease or other drug therapy.

Renal Impairment

Renal clearance is an elimination pathway for amifampridine and the inactive metabolite, 3-N-acetyl amifampridine, and exposure of amifampridine is higher in subjects with renal impairment. Therefore, in patients with renal impairment, FIRDAPSE should be initiated at the lowest recommended initial daily dosage, and patients should be closely monitored for adverse reactions. Consider dosage modification or discontinuation of FIRDAPSE for patients with renal impairment as needed based on clinical effect and tolerability. The safety, efficacy, and pharmacokinetics of amifampridine have not been studied in patients with end-stage renal disease (CL_{CR} <15 mL/min or patients requiring dialysis). No dosage recommendation for FIRDAPSE can be made for patients with end-stage renal disease.

Hepatic Impairment

In patients with any degree of hepatic impairment, FIRDAPSE should be initiated at the lowest recommended initial daily dosage, and patients should be monitored for adverse reactions. Consider dosage modification or discontinuation of FIRDAPSE for patients with hepatic impairment as needed based on clinical effect and tolerability.

NAT2 Poor Metabolizers

Exposure of FIRDAPSE is increased in patients who are N-acetyltransferase 2 (NAT2) poor metabolizers. Therefore, initiate FIRDAPSE in patients who are known NAT2 poor metabolizers at the lowest recommended initial daily dosage and monitor for adverse reactions. Consider dosage modification of FIRDAPSE as needed based on clinical effect and tolerability.

PATIENT COUNSELING INFORMATION

Advise the patient and/or caregiver to read the FDA-approved patient labeling (Medication Guide).

Risk of Seizures

Inform patients that FIRDAPSE can cause seizures, and to notify their healthcare provider if they experience a seizure.

Hypersensitivity

Instruct patients to inform their healthcare provider if they have signs or symptoms of hypersensitivity, and to seek emergency help if symptoms of anaphylaxis occur.

FIRDAPSE Dosing

Instruct patients to take FIRDAPSE exactly as prescribed. Patients should carefully follow the dose escalation schedule provided by their healthcare provider to safely achieve the therapeutic dosage. Inform patients that the tablets may be divided in half at the score, if needed. Instruct patients not to take a double dose to make up for a missed dose.

If they require a dosage in less than 5 mg increments, have difficulty swallowing tablets, or require feeding tubes, refer patients and/or caregivers to the Instructions for Use on how to prepare a 1 mg/mL suspension. If the patient requires treatment with the 1 mg/mL FIRDAPSE suspension, advise patients and/or caregivers that supplies required to prepare the suspension may be obtained at their local pharmacy.

Drug Interactions

Instruct patients to notify their healthcare provider prior to starting any new medication, including over-the-counter drugs.

Pregnancy

Instruct patients that if they are pregnant or plan to become pregnant while taking FIRDAPSE they should inform their healthcare provider. Advise patients that there is a pregnancy registry that monitors pregnancy outcomes in women exposed to FIRDAPSE during pregnancy and encourage them to enroll if they become pregnant while taking FIRDAPSE.

Storage

Advise patients to store FIRDAPSE at 68°F to 77°F (20°C to 25°C).

Instruct patients and/or caregivers who prepare the 1 mg/mL suspension of FIRDAPSE that it should be prepared daily and refrigerated between doses. The suspension can be stored under refrigeration for up to 24 hours. Instruct the patient and/or caregiver to discard any unused portion of the suspension after 24 hours.



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Take on the AANEM Challenge for a Chance to Win a \$250 Amazon Gift Card

How to Play:

1. Download the AANEM app.
2. Explore the Exhibit Hall and visit each of the booths listed below.
3. Use the scanner in the AANEM app to scan the QR Code displayed at each booth.
4. After scanning all 12 codes, you'll automatically be entered into a random drawing for a \$250 Amazon Gift Card.

One winner will be chosen Thursday evening and a second winner will be chosen Friday evening. Winners will be notified via email. Good luck!



The logo for Grifols, consisting of a solid dark blue square with the word "GRIFOLS" in white, bold, sans-serif capital letters.

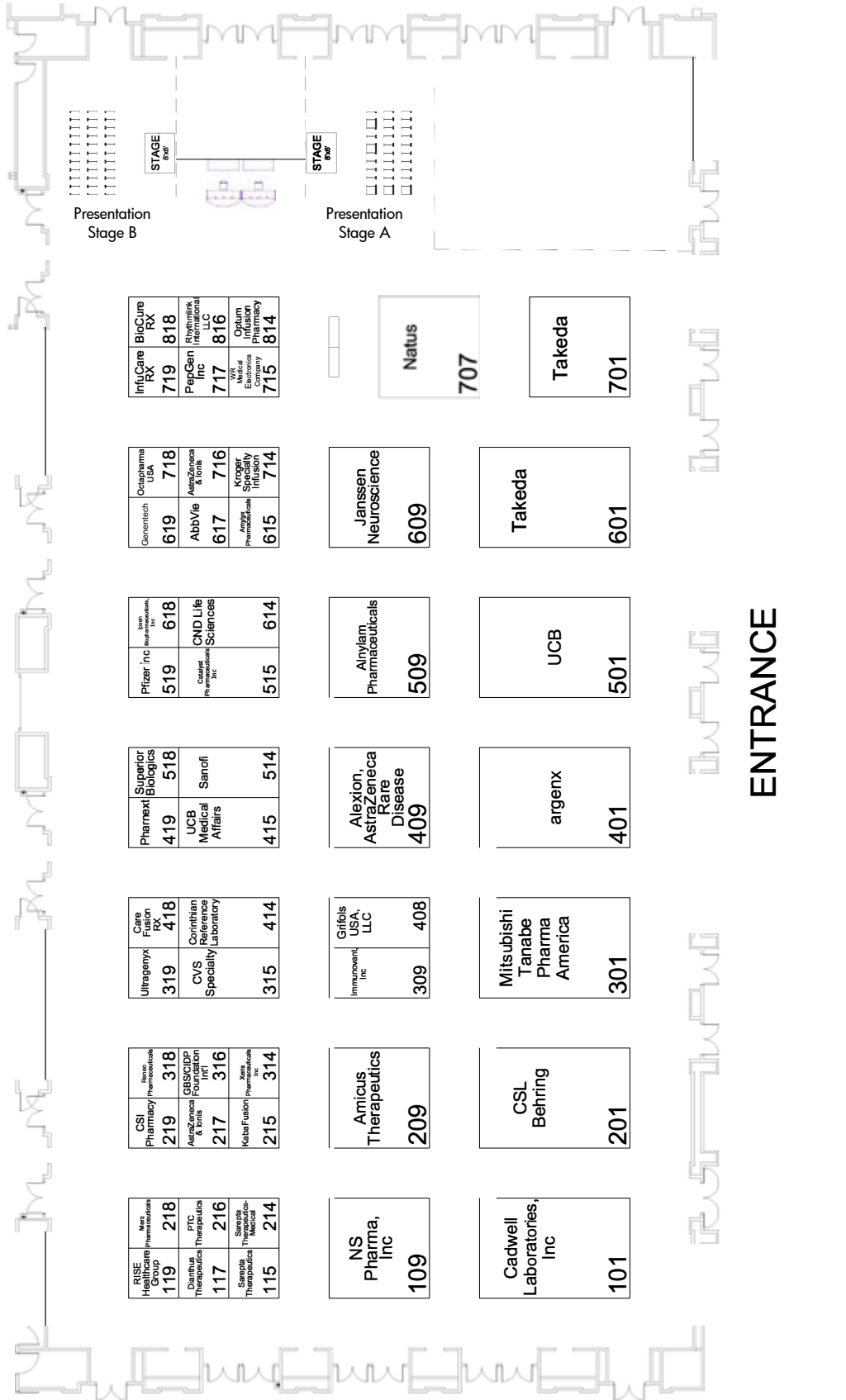


The logo for Natus, featuring the word "natus." in a teal, lowercase, sans-serif font.

The logo for Optum, featuring the word "Optum" in a bold, orange, sans-serif font.



Exhibit Hall Map



Exhibitors

AANEM Career Center

Grand Canyon Foyer

The AANEM Career Center, powered by Health eCareers, provides resources for job seekers and employers in neuromuscular (NM) and electrodiagnostic (EDX) medicine. Visit the Career Center exhibit at the AANEM Annual Meeting, or find out more at www.aanem.org/Careers.

Rochester, MN | www.aanem.org/careers

AbbVie

Booth 617

AbbVie's mission is to discover and deliver innovative medicines that solve serious health issues today and address the medical challenges of tomorrow. We strive to have a remarkable impact on people's lives across several key therapeutic areas. For more information about AbbVie, please visit us at www.abbvie.com. Follow @abbvie on Twitter, Facebook, Instagram, YouTube and LinkedIn

Irvine, CA | www.botoxone.com

Alexion, AstraZeneca Rare Disease

Booth 409

Alexion, AstraZeneca Rare Disease, is the group within AstraZeneca focused on rare diseases, created following the 2021 acquisition of Alexion Pharmaceuticals, Inc. As a leader in rare diseases for 30 years, Alexion is focused on serving patients and families affected by rare diseases and devastating conditions through the discovery, development and commercialization of life-changing medicines. Alexion focuses its research efforts on novel molecules and targets in the complement cascade and its development efforts on hematology, nephrology, neurology, metabolic disorders, cardiology and ophthalmology. Headquartered in Boston, Massachusetts, Alexion has offices around the globe and serves patients in more than 50 countries.

Boston, MA | www.alexion.com

Alnylam Pharmaceuticals

Booth 509

Since its founding, Alnylam has led the translation of RNA interference (RNAi) into a new class of approved and investigational medicines for rare genetic, cardio-metabolic, hepatic infectious, and central nervous system (CNS)/ocular diseases. Based on Nobel Prize-winning science, RNAi therapeutics are a clinically validated approach for the treatment of rare diseases with unmet medical need and prevalent diseases. Alnylam is headquartered in Cambridge, MA.

Cambridge, MA | www.alnylam.com

Amicus Therapeutics

Booth 209

Amicus Therapeutics is a global, patient-dedicated biotechnology company focused on discovering, developing and delivering novel high-quality medicines for people living with rare metabolic diseases. With extraordinary patient focus, Amicus Therapeutics is committed to advancing and expanding a robust pipeline of medicines for rare metabolic diseases. For any Medical Information inquiries, please email MedInfoUSA@amicusrx.com (US Only) and Medinfo@amicusrx.com (International). For any Patient Advocacy inquiries, please email patientadvocacyintl@amicusrx.com.

Princeton, NJ | www.amicusrx.com

Amylyx Pharmaceuticals

Booth 615

Amylyx is a global biopharmaceutical company with a deep commitment to discovering and developing treatments for people with neurodegenerative diseases - including amyotrophic lateral sclerosis (ALS), Alzheimer's disease, and Wolfram syndrome - and a mission to one day end the suffering these relentlessly progressive conditions cause. Our advancements in ALS result from questioning the unquestioned and staying rooted in connection. We've worked closely with those living with ALS and their families, advocacy groups, and the medical community to make critical progress over the last decade. Follow us on LinkedIn and Twitter.

Cambridge, MA | www.amylyx.com

Exhibitors continued...

argenx

Booth 401

argenx is a global immunology company committed to improving the lives of people living with severe autoimmune diseases, such as generalized myasthenia gravis (gMG). Visit us at www.argenx.com.

Boston, MA | www.argenx.com

AstraZeneca & Ionis

Booth 716

AstraZeneca is a global, science-led biopharmaceutical company that focuses on the discovery, development, and commercialization of prescription medicines in Oncology and Biopharmaceuticals, including Cardiovascular, Renal & Metabolism, and Respiratory & Immunology. Based in Cambridge, UK, AstraZeneca operates in over 100 countries, and its innovative medicines are used by millions of patients worldwide.

Wilmington, DE | www.AstraZeneca-us.com

AstraZeneca & Ionis

Booth 217

AstraZeneca is a global, science-led biopharmaceutical company that focuses on the discovery, development, and commercialization of prescription medicines in Oncology and Biopharmaceuticals, including Cardiovascular, Renal & Metabolism, and Respiratory & Immunology. Based in Cambridge, UK, AstraZeneca operates in over 100 countries, and its innovative medicines are used by millions of patients worldwide.

Wilmington, DE | www.AstraZeneca-us.com

BioCure RX

Booth 818

Infusion Suite management specializing in the neurology space within the physician's practice.

Houston, TX | www.biocurerx.com

Cadwell Laboratories, Inc.

Booth 101

Cadwell is dedicated to proactively contributing toward the advancement and promotion of Neuromuscular and Diagnostic Ultrasound. We believe that by providing a fully integrated EMG/NMUS diagnostic solution, and by driving the development of dedicated NMUS-focused features, we will be able to help you help others even more efficiently in the future.

Kennewick, WA | www.cadwell.com

Care Fusion Rx

Booth 418

Care Fusion Rx is a pharmacist owned Home IVIG based specialty pharmacy for patients who have complex neurological medical needs. Our mission is to improve the quality of life for patients by providing personalized, high-quality pharmacy services to support patients and healthcare providers, including medication management, medication dispensing, prior authorization support, refill management, and patient education. Care Fusion Rx places a strong emphasis on patient care through an individualized case management model approach to patient care. We strive to provide exceptional customer service and support, and are committed to helping patients live healthy, fulfilling lives.

Garden Grove, CA | www.carefusionrx.com

Catalyst Pharmaceuticals, Inc.

Booth 515

Catalyst is committed to developing and commercializing innovative first-in-class medicines that address rare neurological and epileptic diseases.

Coral Gables, FL | www.catalystpharma.com

Exhibitors continued...

CND Life Sciences

Booth 614

CND Life Sciences is dedicated to supporting patients facing a potential diagnosis of a neurodegenerative disease. In 2019, CND launched the Syn-One Test® to detect, visualize, and quantify misfolded alpha-synuclein in cutaneous nerve fibers and aid in the diagnosis of a synucleinopathy including Parkinson's disease and pure autonomic failure. CND has been awarded three NIH-SBIR grants to advance the utility of the test and works with biopharma clients to help optimize clinical trials.

Phoenix, AZ | www.cndlifesciences.com

Corinthian Reference Laboratory

Booth 414

Corinthian Reference Lab (CRL) is a commercial neuropathology laboratory specializing in neurological disease detection via epidermal nerve fiber density (ENFD) testing.

Benbrook, TX | www.corinthianreferencelab.com

CSI Pharmacy

Booth 219

CSI Pharmacy is a national specialty pharmacy dedicated to serving patients with chronic and rare illnesses. Founded by pharmacists in 2014, the company specializes in treating autoimmune neuropathies with biologics and plasma-derived therapies. We employ specially trained clinical pharmacists and infusion nurses to provide these treatments to patients around the country. Experience the difference of CSI Pharmacy! Call us today at (833) 569-1005.

Nash, Texas | www.csipharmacy.com

CSL Behring

Booth 201

CSL Behring is a global leader in developing and delivering high-quality medicines that treat people with rare and serious diseases. Our treatments offer promise for people in more than 100 countries living with conditions in the immunology, hematology, cardiovascular and metabolic, respiratory, and transplant therapeutic areas.

King of Prussia, PA | www.CSLBehring.com

CVS Specialty

Booth 315

Personalized Specialty Pharmacy Services

Our commitment to helping patients and their physicians manage complex drug therapies by delivering individualized patient care with compassion and dedication has made us one of the leading specialty pharmacies in the country. To learn more or to enroll patients, call 1-800-238-7828.

Woonsocket, RI | www.cvsspecialty.com

Dianthus Therapeutics

Booth 117

Dianthus Therapeutics is a clinical-stage biotechnology company dedicated to designing and delivering novel, best-in-class monoclonal antibodies with improved selectivity and potency over existing complement therapies. Dianthus is comprised of an experienced team of biotech and pharma executives who are leading the next generation of antibody complement therapeutics, aiming to deliver transformative medicines for people living with severe autoimmune diseases. Dianthus raised a \$100 million Series A in April 2022 co-led by 5AM Ventures, Avidity Partners, and Fidelity Management & Research Company, with participation from additional investors including Wedbush Healthcare Partners and founding investors Fairmount, Tellus BioVentures, and Venrock Healthcare Capital Partners.

Waltham, MA | www.dianthustx.com

GBS/CIDP Foundation International

Booth 316

The GBS | CIDP Foundation International is a global nonprofit organization supporting individuals and their families affected by Guillain-Barré syndrome (GBS), chronic inflammatory demyelinating polyneuropathy (CIDP), and related conditions through a commitment to support, education, research, and advocacy.

Conshohocken, PA | www.gbs-cidp.org

Exhibitors continued...

Genentech

Booth 619

For more than 40 years, we've been following the science, seeking solutions to unmet medical needs. As a proud member of the Roche Group, we make medicines to treat patients with serious medical conditions. We are headquartered in South San Francisco, California.

South San Francisco, CA | www.gene.com

Grifols USA, LLC

Booth 408

Grifols is a global healthcare company that since its founding in Barcelona in 1909 has enhanced the health and well-being of people around the world. We produce essential plasma medicines for patients to treat chronic, rare and, at times, life-threatening conditions. The company provides a comprehensive portfolio of solutions in transfusion medicine and also offers hospitals, pharmacies and healthcare professionals information and services that deliver efficient, expert medical care. Grifols, with nearly 24,000 employees in more than 30 countries and regions, is committed to a sustainable business model that sets the standard for continuous innovation, quality, safety, and ethical leadership in the industry.

Los Angeles, CA | www.grifols.com/en/home

Immunovant, Inc.

Booth 309

Immunovant, Inc. is a clinical-stage biopharmaceutical company focused on enabling normal lives for people with autoimmune diseases. As a leader in neonatal Fc receptor (FcRn) inhibitor technology, we are boldly developing multiple innovative therapies, including investigational products batoclimab and IMVT-1402, both of which have the potential to deliver best-in-class attributes to address a range of debilitating autoimmune diseases with significant unmet patient needs.

New York, NY | www.immunovant.com

InfuCare Rx

Booth 719

InfuCare Rx is a leading nationwide specialty infusion provider offering comprehensive and unparalleled clinical therapy management services to patients with chronic conditions, in the convenience of their home or alternate care setting. Our team is committed to improving patients' lives through personalized therapy regimens and ongoing educational programs. Therapies provided include: Immunoglobulin, Rituxan®, Vyvgart™, Soliris®, Ultomiris®, Ocrevus®, and Briumvi®.

Fairfield, NJ | www.infucarerx.com

Ipsen Biopharmaceuticals, Inc.

Booth 618

Ipsen is a global biopharmaceutical company focused on innovation and specialty care. At Ipsen, we develop and commercialize medicines in three key therapeutic areas - Oncology, Neuroscience and Rare Disease. We work to provide hope for patients whose lives are challenged by difficult-to-treat diseases, including neurological disorders such as certain types of spasticity and cervical dystonia. Our people are driven by a passion to help patients and bring our mission to life every day. We are always ready to listen to—and learn from—patients around the world.

Cambridge, MA | www.ipsen.com/us

Janssen Neuroscience

Booth 609

At Janssen, we're creating a future where disease is a thing of the past. We're the Pharmaceutical Companies of Johnson & Johnson, working tirelessly to make that future a reality for patients everywhere by fighting sickness with science, improving access with ingenuity, and healing hopelessness with heart. We focus on areas of medicine where we can make the biggest difference: Cardiovascular, Metabolism & Retina; Immunology; Infectious Diseases & Vaccines; Neuroscience; Oncology; and Pulmonary Hypertension.

Titusville, NJ | www.janssen.com/neuroscience

Exhibitors continued...

KabaFusion

Booth 215

KabaFusion is a national pharmacist-owned, patient-focused home infusion company specializing in IVIG, SCIG and Acute IV therapies. We are an industry-leading company, with over 30 years of experience in the home-infusion space. We work proactively with patients, healthcare practitioners and payors to provide comprehensive support before, during and after treatment. Our success is the result of teamwork from our dedicated staff, who truly believe in putting the “care” back in healthcare.

Cerritos, CA | www.kabafusion.com

Kroger Specialty Infusion

Booth 714

Kroger Specialty Infusion is a specialized home infusion provider for Subcutaneous Immune Globulin (SCIG) and IV Immune Globulin (Ig) for autoimmune and primary immune deficiency diseases. We provide an individualized care plan to ensure each patient achieves an optimal treatment outcome within a safe environment in their home, our infusion suite, and in the physicians’ office. Our focused approach to disease management, along with our expertise in complex illnesses, allows us to offer a range of therapeutic medications and treatments. We are also a leading provider of plasma therapies.

Torrance, CA | www.krogerspecialtyinfusion.com

Merz Therapeutics

Booth 218

At Merz Therapeutics, we seek to address the unique needs of people who suffer from movement disorders, neurological conditions, and other health conditions that severely impact patients’ quality of life. With our patient-centric approach, cutting-edge research and development efforts, highly-scientific medical affairs resources and dedicated commercial teams, we continue the advancement of new and individualized treatment standards, including botulinum toxin.

Raleigh, NC | www.merztherapeutics.com

Mitsubishi Tanabe Pharma America

Booth 301

Mitsubishi Tanabe Pharma America, Inc. (MTPA) is relentlessly focused on the goal of providing therapies for some of the most difficult-to-treat diseases. Our teams work diligently to develop science-based options that will enable healthcare providers to offer proven treatments for devastating illnesses. We thrive on navigating complex problems in science and medicine and strive to support patients who live with debilitating diseases.

Jersey City, NJ | www.mt-pharma-america.com

Natus

Booth 707

For over 60 years, Natus has been providing advanced technology and market-leading solutions in EMG, NCS and EPs, building on the legacy of the most widely used and trusted names in the industry, including Nicolet®, TECA® and Dantec®. Natus is recognized by healthcare providers as the solution source to screen, diagnose, and treat disorders affecting the brain, neural pathways and eight sensory nervous systems.

Middleton, WI | www.natus.com

NS Pharma, Inc.

Booth 109

NS Pharma is committed to improving patient outcomes for those living with Duchenne. We are dedicated to developing innovative, efficacious, and safe treatments for rare diseases through technologies that leverage exon skipping, cell therapy, and JAK2 inhibition.

Paramus, NJ | www.NSPharma.com

Exhibitors continued...

Octapharma USA

Booth 718

Octapharma is one of the largest plasma products manufacturers in the world and has been committed to patient care and medical innovation in human protein therapies for over 30 years. Octapharma's core business is the development, production and sale of high quality human protein therapies from both human plasma and human cell-lines.

Paramus, NJ | www.octapharmausa.com

Optum Infusion Pharmacy

Booth 814

With infusion pharmacists and nurses across the country, Optum® Infusion Pharmacy can administer high-quality, cost-effective infusion therapies for acute and chronic conditions in the comfort of a patient's home or a conveniently located infusion suite. We specialize in Immune globulin (IG), Parenteral Nutrition (PN), Biologics and other specialty infusions.

Lenexa, KS | www.specialty.optumrx.com/infusion

PepGen Inc.

Booth 717

PepGen is advancing the next generation of oligonucleotide therapeutics with the goal of transforming the treatment of severe neuromuscular and neurologic diseases. Our Enhanced Delivery Oligonucleotide (EDO) platform is founded on over a decade of research and development and leverages cell-penetrating peptides to improve the uptake and activity of oligonucleotide therapeutics. EDOs have shown the potential to treat genetic disorders by optimizing the safe and efficient delivery of therapeutic oligonucleotide cargos into affected tissues and cells. We have leveraged these characteristics to develop a robust pipeline of potentially world-leading therapeutics for the treatment of serious genetic diseases.

Cambridge, MA | www.pepgen.com/about

Periodic Paralysis Association

Grand Canyon Foyer

A non-profit organization dedicated to patient education and advocacy and fundraising for additional research into Primary Periodic Paralysis.

Winter Garden, FL | www.periodicparalysis.org

Pfizer Inc

Booth 519

Breakthroughs That Change Patients' Lives. At Pfizer, we apply science and our global resources to bring therapies to people that extend and significantly improve their lives. We strive to set the standard for quality, safety and value in the discovery, development and manufacture of health care products, including innovative medicines and vaccines. Every day, Pfizer colleagues work across developed and emerging markets to advance wellness, prevention, treatments and cures that challenge the most feared diseases of our time.

New York, NY | www.pfizer.com

Pharnext

Booth 419

Pharnext is an advanced clinical-stage biopharmaceutical company developing novel therapeutics for neurodegenerative diseases that currently lack curative and/or disease-modifying treatments. Pharnext lead product, PXT3003 completed an international Phase III trial with positive topline results for the treatment of Charcot-Marie-Tooth disease type 1A (CMT1A) and benefits from orphan drug status in Europe and the United States. An international pivotal Phase III study of PXT3003 in CMT1A, the PREMIER trial, is currently ongoing.

Paris, France | www.pharnext.com

Exhibitors continued...

PTC Therapeutics

Booth 216

PTC is committed to providing access to best-in-class treatments for patients with little to no treatment options. This mission underpins our focus on the discovery, development, and global commercialization of clinically differentiated medicines for those with rare diseases.

South Plainfield, NJ | www.ptcbio.com

Reneo Pharmaceuticals

Booth 318

Reneo is a clinical-stage pharmaceutical company focused on the development of therapies for patients with rare genetic diseases including mitochondrial diseases with significant unmet medical needs.

Irvine, CA | www.reneopharma.com

Rhythmink International LLC

Booth 816

Rhythmink® International, LLC designs, manufactures and distributes medical devices and provides custom packaging, private labeling, custom products and contract manufacturing to its customers in the CEEG, IONM and EMG/NCV markets. Rhythmink is recognized as a leader within its fields at providing the important physical connection between patients and the diagnostic equipment to record or elicit neurophysiologic biopotentials. Originally founded by neurodiagnostic technicians and engineers in 2002, Rhythmink strives to provide continuous innovation and superior quality in all of its products. Based in Columbia, SC, Rhythmink's advancements and improvements in technology, business development and corporate branding have brought national and international recognition.

Columbia, SC | www.rhythmink.com

RISE Healthcare Group

Booth 119

RISE Healthcare Group combines a 1-on-1 outpatient physical therapy treatment model with Cyberdyne's Hybrid Assistive Limb Device (HAL) to go beyond the conventional treatment options for neuromuscular disorders. The HAL device is a one of a kind blend of technology and rehabilitation used to read a patient's intent for movement and helps to facilitate that action via improved neuromuscular connections setting it apart from other medical exoskeletons. HAL is the only exoskeleton approved by the FDA to improve ambulation for patients with a variety of neuromuscular conditions, including but not limited to stroke, spinal cord injuries, traumatic brain injuries, Parkinson's, and progressive neuromuscular disorders.

Southern California | www.risehealthcaregroup.com

Sanofi

Booth 514

We are an innovative global healthcare company, driven by one purpose: we chase the miracles of science to improve people's lives. Our team, across some 100 countries, is dedicated to transforming the practice of medicine by working to turn the impossible into the possible. We provide potentially life-changing treatment options and life-saving vaccine protection to millions of people globally, while putting sustainability and social responsibility at the center of our ambitions.

Cambridge, MA | www.sanofi.us

Sarepta Therapeutics

Booth 115

Sarepta Therapeutics is on an urgent mission: engineer precision genetic medicine for rare diseases that devastate lives and cut futures short. Our focus is on Duchenne and limb-girdle muscular dystrophies, and we have 40+ programs in development across 3 technologies - gene therapy, RNA and gene editing.

Cambridge, MA | www.sarepta.com

Exhibitors continued...

Sarepta Therapeutics - Medical

Booth 214

Sarepta Therapeutics is on an urgent mission: engineer precision genetic medicine for rare diseases that devastate lives and cut futures short. Our focus is on Duchenne and limb-girdle muscular dystrophies, and we have 40+ programs in development across 3 technologies - gene therapy, RNA and gene editing.

Cambridge, MA | www.sarepta.com

Superior Biologics

Booth 518

Superior Biologics is a leading provider of specialty pharmacy and home infusion therapy services to patients suffering from a wide variety of chronic diseases. Superior Biologics provides innovative and cost-effective pharmacy and in-home nursing infusion services that result in optimal therapeutic outcomes and deliver best-in-class patient results. By offering the highest levels of service and quality, Superior Biologics has become a trusted partner of top physicians and thought leaders from the most prestigious medical centers and universities.

Sharon Hill, PA | www.superiorbiologics.com

Takeda

Booth 601

Takeda is focused on creating better health for people and a brighter future for the world. We aim to discover and deliver life-transforming treatments in our core therapeutic and business areas, including gastrointestinal and inflammation, rare disease, plasma-derived therapies, neuroscience, oncology and vaccines.

Lexington, MA | www.takeda.com

Takeda

Booth 701

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Lexington, MA | www.takeda.com

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Booth 501

UCB, Brussels, Belgium (www.ucb.com) is a global biopharmaceutical company focused on the discovery and development of innovative medicines and solutions to transform the lives of people living with severe diseases of the immune system or of the central nervous system. With approximately 8,600 people in approximately 40 countries, the company generated revenue of €5.5 billion in 2022. UCB is listed on Euronext Brussels (symbol: UCB). Follow us on Twitter: @UCB_news.

Smyrna, GA | www.ucb.com

UCB Medical Affairs

Booth 415

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Smyrna, GA | www.ucb.com

Exhibitors continued...

Ultragenyx

Booth 319

Ultragenyx is a biopharmaceutical company committed to bringing novel therapies to patients for the treatment of serious rare and ultrarare genetic diseases. The company has built a diverse portfolio of approved medicines and treatment candidates aimed at addressing diseases with high unmet medical need and clear biology, for which there are typically no approved therapies treating the underlying disease. Contact us: medinfo@ultragenyx.com

www.ultragenyx.com

WR Medical Electronics Company

Booth 715

Our company is a leading US-based manufacturer of cutting-edge diagnostic solutions designed to provide physicians with the tools they need to make accurate diagnoses quickly and efficiently. We specialize in providing full-suite autonomic and peripheral diagnostic solutions that are rigorously validated and highly efficient. Our mission is to empower healthcare professionals with the tools they need to give patients the answers they deserve.

Maplewood, MN | www.wrmed.com

Xeris Pharmaceuticals, Inc.

Booth 314

At Xeris Biopharma™, we're committed to making a difference in people's lives through proprietary technology that brings life-changing solutions to diverse patient populations. From developing and commercializing unique therapies in endocrinology, neurology and gastroenterology to maintaining a robust pipeline of research and development programs for the future, we strive to make things better for healthcare providers and their patients. Our innovative, ready-to-use therapies help remove many of the associated burdens of and barriers to treatment, ultimately improving patients' quality of life, and their overall health—and healthcare—experience.

Chicago, IL | www.xerispharma.com

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An Evolving Treatment Landscape: FcRn Targeting With Fc Fragment: VYVGART® and VYVGART® HYTRULO for the Treatment of gMG in Adults Who Are Anti-AChR Antibody Positive

Join us as we discuss the evolving treatment landscape in generalized myasthenia gravis (gMG). Experts will present the role of neonatal Fc receptor (FcRn) inhibition, long-term clinical data for intravenous VYVGART (efgartigimod alfa-fcab), and clinical data for subcutaneous VYVGART HYTRULO (efgartigimod alfa and hyaluronidase-qvfc) in adult patients with gMG who are anti-acetylcholine receptor (AChR) antibody positive.

Thursday, November 2
12:00 PM to 1:15 PM
Lunch will be served

See You There!

Grand Saguaro Ballroom East/West
JW Marriott Phoenix Desert
Ridge Resort & Spa



James F. Howard Jr, MD, FAAN

Professor of Neurology, Medicine and Allied Health, Former Distinguished Professor of Neuromuscular Diseases, Former Chief of Neuromuscular Disorders Division, Department of Neurology, University of North Carolina School of Medicine at Chapel Hill



Ratna Bhavaraju-Sanka, MD

Associate Professor of Neurology
University of Texas Health Science Center
at San Antonio

INDICATION

VYVGART® (efgartigimod alfa-fcab) for intravenous infusion and VYVGART® HYTRULO (efgartigimod alfa and hyaluronidase-qvfc) for subcutaneous injection are each indicated for the treatment of generalized myasthenia gravis in adult patients who are anti-acetylcholine receptor (AChR) antibody positive.

IMPORTANT SAFETY INFORMATION

WARNINGS AND PRECAUTIONS

Infection

VYVGART and VYVGART HYTRULO may increase the risk of infection. The most common infections observed in Study 1 were urinary tract infection (10% of efgartigimod alfa-fcab-treated patients vs 5% of placebo-treated patients) and respiratory tract infection (33% of efgartigimod alfa-fcab-treated patients vs 29% of placebo-treated patients). Patients on efgartigimod alfa-fcab vs placebo had below normal levels for white blood cell counts (12% vs 5%, respectively), lymphocyte counts (28% vs 19%, respectively), and neutrophil counts (13% vs 6%, respectively). The majority of infections and hematologic abnormalities were mild to moderate in severity. Delay the administration of VYVGART or VYVGART HYTRULO in patients with an active infection until the infection has resolved; monitor for clinical signs and symptoms of infections. If serious infection occurs, administer appropriate treatment and consider withholding treatment with VYVGART or VYVGART HYTRULO until the infection has resolved.

Immunization

Immunization with vaccines during treatment with VYVGART or VYVGART HYTRULO has not been studied; the safety with live or live-attenuated vaccines and the response to immunization with any vaccine are unknown. Because VYVGART and VYVGART HYTRULO cause a reduction in immunoglobulin G (IgG) levels, vaccination with live-attenuated or live vaccines is not recommended during treatment with VYVGART or VYVGART HYTRULO. Evaluate the need to administer ageappropriate vaccines according to immunization guidelines before initiation of a new treatment cycle with VYVGART or VYVGART HYTRULO.

Hypersensitivity Reactions

Hypersensitivity reactions, including rash, angioedema, and dyspnea were observed in patients treated with VYVGART or VYVGART HYTRULO. Urticaria was also observed in patients treated with VYVGART HYTRULO. In clinical trials, hypersensitivity reactions were mild or moderate, occurred within 1 hour to 3 weeks of administration, and did not lead to treatment discontinuation. Monitor patients during and for one hour after VYVGART administration, or for at least 30 minutes after VYVGART HYTRULO administration, for clinical

signs and symptoms of hypersensitivity reactions. If a hypersensitivity reaction occurs during VYVGART or VYVGART HYTRULO administration, discontinue use and institute appropriate supportive measures if needed.

ADVERSE REACTIONS

In Study 1, the most common ($\geq 10\%$) adverse reactions in efgartigimod alfa-fcab-treated patients were respiratory tract infection, headache, and urinary tract infection. In Study 2, the most common ($\geq 10\%$) adverse reactions in VYVGART HYTRULO-treated patients were injection site reactions and headache. Injection site reactions occurred in 38% of VYVGART HYTRULO-treated patients, including injection site rash, erythema, pruritus, bruising, pain, and urticaria. In Study 2 and its open-label extension, all injection site reactions were mild to moderate in severity and did not lead to treatment discontinuation. The majority occurred within 24 hours after administration and resolved spontaneously. Most injection site reactions occurred during the first treatment cycle, and the incidence decreased with each subsequent cycle.

USE IN SPECIFIC POPULATIONS

Pregnancy

As VYVGART and VYVGART HYTRULO are expected to reduce maternal IgG antibody levels, reduction in passive protection to the newborn is anticipated. Risks and benefits should be considered prior to administering live or live attenuated vaccines to infants exposed to VYVGART or VYVGART HYTRULO in utero.

Lactation

There is no information regarding the presence of efgartigimod alfa-fcab from administration of VYVGART, or efgartigimod alfa or hyaluronidase from administration of VYVGART HYTRULO, in human milk, the effects on the breastfed infant, or the effects on milk production. The developmental and health benefits of breastfeeding should be considered along with the mother's clinical need for VYVGART or VYVGART HYTRULO, and any potential adverse effects on the breastfed infant from VYVGART or VYVGART HYTRULO or from the underlying maternal condition.

Please see the full Prescribing Information for VYVGART and the full Prescribing Information for VYVGART HYTRULO.

You may report side effects to the US Food and Drug Administration by visiting <http://www.fda.gov/medwatch> or calling 1-800-FDA-1088. You may also report side effects to argenx US, Inc, at 1-833-argx411 (1-833-274-9411).



VYVGART®
(efgartigimod alfa-fcab)
Injection for Intravenous Use
400 mg/20 mL vial

VYVGART® Hytrulo
(efgartigimod alfa and hyaluronidase-qvfc)
Subcutaneous Injection
180 mg/mL and 2000 U/mL vial



Please see Important Safety Information within along with full Prescribing Information (PI) for VYVGART at VYVGART.com/PI and full Prescribing Information for VYVGART HYTRULO at VYVGARTHYTRULO.com/PI. The full PIs will also be available at the symposium.

This activity is not part of the official scientific program of the AANEM.

Food and beverage provided by AANEM.

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argenx Industry Forum at AANEM 2023

Targeting Immune Mechanisms in Idiopathic Inflammatory Neuropathies:
**What Drives Pathophysiology in
CIDP and MMN?**

See You There!

Friday, November 3

5:15 PM to 6:30 PM

*Light fare
will be served*

Grand Saguaro Ballroom East/West

JW Marriott Phoenix Desert
Ridge Resort & Spa

Targeting Immune Mechanisms in Idiopathic
Inflammatory Neuropathies:

What Drives Pathophysiology in CIDP and MMN?

Join us for a discussion of the underlying immune mechanisms of idiopathic inflammatory neuropathies including chronic immune demyelinating polyneuropathy (CIDP) and multifocal motor neuropathy (MMN). Learn about ongoing efforts to inhibit the IgG recycling and complement pathways for the treatment of adult patients with CIDP and MMN.

Session Faculty



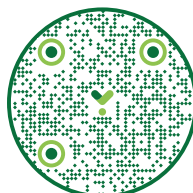
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Associate Professor
University of Minnesota
Department of Neurology



Yuebing Li, MD, PhD

Staff Physician
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The American Neuromuscular Foundation (ANF) is the official foundation of the AANEM, established to promote health for patients with NMDs by supporting and advancing NM and EDX research and education through research grants, awards, and international travel scholarships. ANF is thankful for every donation and hopes to see this list continue to grow each year.

(Individuals listed below contributed between July 15, 2022, and Aug. 15, 2023.)

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AANEM thanks the many contributors to the AANEM Advocacy Fund. Your donation helps give a voice to those who are fighting NMDs, whether it be in the halls of Congress or at home as a patient. AANEM appreciates your generosity and support.

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Immunovant Symposium:
Saturday, November 4, 2023 | Phoenix, AZ
Myasthenia Gravis –
Expanding Frontiers of Clinical Management

LOCATION:
**Level 1 – Grand Saguaro
Ballroom East/West**

REGISTRATION STARTS:
6:45 am

SESSION:
7:00 am to 8:00 am

IMMUNOVANT

This activity will be held during the AANEM Annual Meeting. It is not part of the official scientific program of the AANEM.



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Abbreviations

AANEM: American Association of Neuromuscular & Electrodiagnostic Medicine

AI: Artificial Intelligence

ALS: Amyotrophic Lateral Sclerosis

APP: Advanced Practice Provider

ATTR: Transthyretin Amyloidosis

CEU: Continuing Educational Units

CIDP: Chronic Inflammatory Demyelinating Polyradiculoneuropathy

CIPN: Chemotherapy Induced Peripheral Neuropathy

CME: Continuing Medical Education

CMT: Charcot-Marie-Tooth

CNE: Concentric Needle Electrodes

CNS: Central Nervous System

CTS: Carpal Tunnel Syndrome

DMD: Duchenne Muscular Dystrophy

DNA: Deoxyribonucleic Acid

DX: Diagnosis

EDX: Electrodiagnostic

EHR: Electronic Health Record

EMG: Electromyography

FSHD: Facioscapulohumeral Muscular Dystrophy

GBS: Guillain-Barré Syndrome

hATTR: Hereditary Transthyretin Amyloidosis

irAE: Immune-Related Adverse Events

LAC: Lateral Antebrachial Cutaneous

LEMS: Lambert-Eaton Myasthenic Syndrome

MAC: Medial Antebrachial Cutaneous

MG: Myasthenia Gravis

MGFA: Myasthenia Gravis Foundation of America

MSK: Musculoskeletal

MUAP: Motor Unit Action Potential

MUP: Motor Unit Potential

NCS: Nerve Conduction Study

NM: Neuromuscular

NMD: Neuromuscular Disease/Disorder

NMJ: Neuromuscular Junction

NMUS: Neuromuscular Ultrasound

PI: Principal Investigator

PIN: Posterior Interosseous Nerve

PM&R: Physical Medicine and Rehabilitation

POTS: Postural Orthostatic Tachycardia Syndrome

RNS: Repetitive Nerve Stimulation

RX: Prescription

SA: Self-Assessment

SARS-COV-2: Severe Acute Respiratory Syndrome Coronavirus 2

SFEMG: Single-Fiber Electromyography

SMA: Spinal Muscular Atrophy

TOS: Thoracic Outlet Syndrome

TPP: Training Program Partnership

TTS: Tarsal Tunnel Syndrome

UCNS: United Council for Neurologic Subspecialties

US: Ultrasound



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gMG, generalized myasthenia gravis; CIDP, chronic inflammatory demyelinating polyneuropathy

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Discover no-charge NGS testing options for your patients with suspected muscular dystrophies



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NGS, next-generation sequencing; DMD, dystrophin gene.

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Meeting Objectives

The 2023 annual meeting will focus on improving patient care, medical knowledge, interpersonal communication, professionalism, and systems-based practices in the following areas: updates in NM and MSK disorders; status of inherited muscle diseases; genomics and emerging gene therapies; new technologies and treatments; autoimmune disorders; neuropathies, antibody testing, US, EDX, and biopsy skills.

After attending this activity, attendees will:

- Enhance their ability to obtain a comprehensive patient history and examination; improve their ability to develop a differential diagnosis and direct appropriate diagnostic work-ups; assess rehabilitation potential for patients with NM and MSK disease; treat patients with pain, utilize EMG to precisely assess the severity of nerve injuries, recognize the association of immunization with new onset of NM diseases and how COVID impacts patient care, and recognize how assessment techniques can improve the lives of patients. (Patient care)
- Develop technical skills necessary to perform neurologic, EDX, and rehabilitative procedures; identify and describe important EDX, biopsy, genetic, and US findings; develop awareness of treatments, therapies, and side effects; and discuss the latest literature on NMDs. (Medical knowledge, Practice-based learning)
- Improve ability to communicate with and educate patients, families, and members of the healthcare team; articulate a confident clinical approach to common questions faced as an inpatient consultant; demonstrate professionalism in clinical, research, and academic practice. (Interpersonal communication skills, Professionalism)
- Develop strategies for working in a multidisciplinary session, awareness of emerging treatments and therapies; identify and access supportive healthcare services and mechanisms that improve patient care and patient quality of life. (Systems-based practice)

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CIDP

What if there was a way to make an early and accurate differential diagnosis?

Among other factors when diagnosing CIDP, consider **ADDRESS**, a Takeda-created acronym, to help identify some of the hallmark symptoms. This acronym illustrates characteristic symptoms of CIDP. It is not to be used as a comprehensive diagnostic tool.

A



ACQUIRED DYSFUNCTIONAL IMMUNE RESPONSE^{1,2}

D



DEMYELINATION^{1,3}

D



DISTAL & PROXIMAL WEAKNESS^{1,3}

R



RELAPSING REMITTING OR PROGRESSIVE^{2,3}

E



ELEVATED CSF PROTEINS³

S



SYMMETRICAL WEAKNESS¹⁻³

S



SENSORY & MOTOR IMPAIRMENT³

47%
— to —
68% of CIDP patients are misdiagnosed. They're treated for long periods without clear evidence of therapeutic effect.⁴

CIDP=chronic inflammatory demyelinating polyneuropathy;
CSF=cerebrospinal fluid



Distinguish CIDP from similar neuromuscular diseases.

Early diagnosis can make a difference in preventing nerve damage and permanent disability.⁵

Commonly shared symptoms among similar neuropathies

Disorder	Motor conduction block	Sensory signs	Anti-GM1 antibodies elevated	Most common clinical presentation of weakness	Distribution of weakness	Tendon reflexes	Elevated protein in CSF	Disease course	Gender distribution male:female
CIDP^{1,3,6}	Frequently present	Yes	Rare	Proximal and distal	Symmetric > asymmetric	General hyporeflexia or areflexia	Yes	Progressive or relapsing	M>F
MMN^{2,6-8}	Frequently present*	No	Yes	Distal upper limb	Asymmetric	Normal or decreased in weakened muscles [†]	No	Slowly progressive	2.6:1
ALS^{2,7,9}	Absent	No	Rare	Focal, [‡] distal > proximal; upper limb > lower limb	Asymmetric	Increased in weakened muscles	No	Rapidly progressive	1.4:1
GBS¹⁰	Frequently present	Yes	Present in a subset of patients	Usually lower limbs before upper limbs; distal before proximal	Symmetric	Decreased or lost reflexes	Yes	Rapid onset; monophasic	M>F

ALS=amyotrophic lateral sclerosis; GBS=Guillain-Barré syndrome; MMN=multifocal motor neuropathy.

*Conduction block may not be detectable and is not always necessary for diagnosis.²

[†]Reflexes may be brisk in some patients.²

[‡]Bulbar symptoms at onset may be observed in approximately 25% of patients.¹¹



Scan this QR code or visit [knowingPN.com/CIDP](https://www.knowingPN.com/CIDP) to learn more about the importance of a prompt and precise CIDP diagnosis.

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*Louisa,
living with epilepsy*

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