

**The Chinese American Medical Association of Southern California (CAMASC)
proudly presents a continuing medical education activity on**

“Same Diseases, Different Continents”

CME Activity II

Thursday, March 21, 2013 - Friday, March 22, 2013

Tsinghua University, School of Medicine

Beijing China 100084

Program Overview

As China modernizes and lifestyles change, the Chinese population in China and the United States faces a common spectrum of health problems. These illnesses include hepatitis B, diabetes, cardiovascular disease, cancer, psychiatric and neurological illnesses. Hepatitis B is highly prevalent, and cancer treatment and preventions constitute major management challenges as the Chinese population ages. Furthermore, cancer is the leading cause of preventable deaths in the Chinese population. This situation also applies to Overseas Chinese populations situated in countries such as the United States, particularly in Southern California where the Chinese immigrant population has been growing rapidly in the last decade.

These considerations suggest gaps in knowledge in how common diseases in similar populations of Chinese patients are managed in different continents at the primary care level. Comparisons are especially appropriate now as the medical system in East Asia has advanced and become comparable to those in Western countries, and as East Asian quality improvement methodology has matured. These intercontinental gaps are in addition to the gaps caused by the development and application of new disease specific knowledge to improve patient outcomes, and differ from cultural competence gaps identified in the United States.

The theme in this session is common liver diseases. Hepatitis B, hepatitis C, alcohol, non-alcoholic fatty liver disease and HIV medications can all affect the liver. They can each contribute to the development of cirrhosis, and to hepatocellular carcinoma. The prevalence and types of hepatitis vary between the United States and China, but the increase in NAFLD on both sides of the Pacific is related to lifestyle, and is equally ominous. The culmination of these processes, cirrhosis and hepatocellular carcinoma, pose serious challenges. A symposium on these related conditions, and how they interact, will be relevant to the primary care provider and general internist.

This educational meeting is needed to discover whether there are gaps in intercontinental medical knowledge, in addition to addressing gaps in disease-related knowledge, competence, and performance. This will be a live educational forum which will allow our community physicians from Southern California to meet and have an open dialogue with conference lecturers from the United States, Hong Kong, and Beijing on different approaches to disease management and treatment options that are also culturally sensitive, the goal of which is to improve knowledge, competence, and performance for better patient care.

Target Audience

The target audience for this CME activity will consist of physician members of CAMASC and non-members who primarily serve the Chinese population in the Los Angeles Basin and surrounding areas in Southern California and other Chinese populated regions, which includes family practice and internal medicine physicians, physicians of all other medical specialties, and physicians-in-training.

Accreditation Statement



The Chinese American Medical Association of Southern California (CAMASC) is accredited by the Institute for Medical Quality/California Medical Association (IMQ/CMA) to provide continuing medical education for physicians. The Chinese American Medical Association of Southern California (CAMASC) takes responsibility for the content, quality and scientific integrity of this CME activity.

Credit Designation Statement

The Chinese American Medical Association of Southern California (CAMASC) designates this live activity for a maximum of 6.0 *AMA PRA Category 1 Credit(s)*TM. Physicians should claim only the credit commensurate with the extent of their participation in the activity. This credit may also be applied to the CMA Certification in Continuing Medical Education.

Educational Method

The conference will consist of six (6) live lectures, presented by distinguished faculty to facilitate the different educational needs of a diverse audience. The activity will employ a combination of educational methods, including live didactic lectures, case studies, and interactive techniques such as group discussions, question/answer sessions, post-activity evaluations, and 2-month follow-up evaluations.

All attendees will be asked to complete the post-activity evaluations online within 3 weeks in order to receive certificates of CME credit.

California Assembly Bill (AB) 1195

This activity is in compliance with California Assembly Bill 1195 which requires continuing medical education activities with patient care components to include curricula in the subjects of cultural and linguistic competency.

Commercial Support

This activity may be funded, in part, by grant and exhibit fees from commercial interests, in compliance with the Accreditation Council for Continuing Medical Education (ACCME) and the Institute for Medical Quality/ California Medical Association (IMQ/CMA) standards and guidelines. As of this webpage publishing, a complete listing of commercial supporters was not available. Detailed disclosures will be made to the participants in accordance to the accreditation standard and appropriate acknowledgment will be given to all supporters prior to the CME presentation begins at this activity.

Disclosure Statement

As a CME provider accredited by IMQ/CMA, CAMASC must ensure balance, independence, objectivity and scientific rigor in its educational activities. Course Director(s), Planning Committee Members, Faculty, and all others who are in a position to control or deliver the content of this educational activity are required to disclose all relevant financial relationships with any commercial interest related to the subject matter of the educational activity. Safeguards against commercial bias have been put in place. Faculty will also disclose any off-label and/or investigative use of pharmaceuticals or instruments discussed in their presentation. Detailed disclosures will be made at this activity prior to the CME presentations and on course materials.

Americans with Disabilities Act

CAMASC complies with the Americans with Disabilities Act. Please contact our CME Administrator at 213-572-0631 or camasc@foundationpamc.org no later than Friday, March 1, 2013. Every reasonable effort will be made to accommodate your special needs.

Conference Agenda – For CME Activity II

Date: Thursday, March 21, 2013 (Day One)

Location: Tsinghua University
Beijing China 100084

8:00AM Registration

9:00 AM Welcome / Disclosure

9:15AM Alcoholic Liver Disease
Xinyue Chen, M.D., Wenhui Li, Ph.D.

Purpose

To reduce the knowledge and practice gaps regarding alcoholic liver disease through a program of detection, prevention, and abstinence

Objectives

- Perform screening for alcohol use with the AUDIT tool
- Diagnose alcoholic hepatitis
- Implement abstinence from alcohol as a treatment
- Select patients for naltrexone
- Apply AASLD and Chinese guidelines for alcoholic liver disease (O’Shea 2010, Li 2011)
- Evaluate patients with severe alcoholic hepatitis for corticosteroids

10:15AM Non-Alcoholic Fatty Liver Disease
Lai Wei, M.D., Ph.D., Fusheng Wang, Ph.D.

Purpose

To recognize and diagnose NAFLD, and manage NAFLD in accordance with published guidelines

Objectives

- Diagnose NAFLD in Chinese (Chitturi 2007)
 - Apply US guidelines for NAFLD management (Chalasani 2012)
 - Select weight loss in the management of NAFLD (Peng 2011)
- Select pentoxifylline in the management of NAFLD (Li, 2011)

11:15AM HIV and Viral Hepatitis
Fuijie Zhang, M.D., Ph.D., Linqi Zhang, Ph.D.

Purpose

To reduce gaps in knowledge about hepatitis in HIV patients, and practice gaps in screening and managing Hepatitis in HIV patients

Objectives

- Incorporate screening HIV patients for hepatitis B, hepatitis C
- Integrate treatment for HIV with treatment for Hepatitis B and/or Hepatitis C
- State how HIV affects the natural history of hepatitis B and C
- Analyze data on treatments for hepatitis in patients with HIV (Murphy 2011, Thomas 2011)

12:15 PM Closing Remark

CAMASC reserves the right to make changes wherever deemed necessary.

Conference Agenda – For CME Activity II

Date: Friday, March 22, 2013 (Day Two)

Location: Tsinghua University
Beijing China 100084

8:00AM Registration

9:00 AM Welcome / Disclosure

9:15AM Treatment of Hepatitis B
Fuijie Zhang, M.D., Ph.D., Fusheng Wang, Ph.D.

Purpose

To decrease practice gaps in the screening for hepatitis B, and in vaccination of patients without hepatitis B, and cancer monitoring in patients with hepatitis B

Objectives

- Perform screening patients for Hepatitis B
- Perform vaccination of patients who test negative for Hepatitis B
- Perform screening for hepatocellular carcinoma in patients with Hepatitis B

10:15 AM Management of Cirrhosis
Lai Wei, M.D., Ph.D., Wenhui Li, Ph.D.

Purpose

To reduce the knowledge, competence and practice gaps in the management of cirrhosis through increased physician awareness

Objectives

Identify the most common cause of death in Chinese patients with cirrhosis (Wang 2012)

- Describe the Childs Pugh and MELD systems and their use in classifying cirrhotic patients
- Manage complications of cirrhosis
- Choose pain medications for patients with cirrhosis (Khalid 2009)
- Implement an approach to screening for hepatocellular carcinoma in patients with cirrhosis (Singal 2012)

11:15AM Hepatocellular Carcinoma
Xinyue Chen, M.D., Jun Cheng, M.D, Ph.D., EMBA

Purpose

To stage and manage patients with hepatocellular carcinoma

Objectives

- Apply the Barcelona Clinic Liver Cancer Staging System
- Apply AASLD treatment guidelines for patients with hepatocellular carcinoma
- Select from different treatment modalities available for hepatocellular carcinoma

12:15 PM Closing Remark

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