OMB No. 0925-0001 and 0925-0002 (Rev. 09/17 Approved Through 03/31/2020)

BIOGRAPHICAL SKETCH

Provide the following information for the Senior/key personnel and other significant contributors.
Follow this format for each person. **DO NOT EXCEED FIVE PAGES.**

NAME: Gulati, Martha MD MS FACC FAHA FASPC

eRA COMMONS USER NAME (credential, e.g., agency login): MARTHAGULATI

POSITION TITLE: Professor of Medicine, Chief of Cardiology, University of Arizona- College of Medicine (Phoenix)

EDUCATION/TRAINING (Begin with baccalaureate or other initial professional education, such as nursing, include postdoctoral training and residency training if applicable. Add/delete rows as necessary.)

| INSTITUTION AND LOCATION | DEGREE(if applicable) | Completion DateMM/YYYY | FIELD OF STUDY |
| --- | --- | --- | --- |
| McMaster University, Hamilton, CANADA | B.Sc. | 05/1991 | General Science |
| University of Toronto, Toronto, CANADA | M.D. | 06/1995 | Medicine |
| University of Chicago, Chicago, IL |  | 06/1998 | Internal Medicine |
| University of Chicago, Chicago, IL |  | 06/2001 | Cardiology |
| University of Chicago, Chicago, IL | M.S. | 05/2002 | Health Studies |

**A. Personal Statement**

I have the expertise and background to successfully assist in the proposed research project. I am clinical cardiologist and have been active in clinical research related to women and cardiovascular disease. I have participating in an ongoing collaboration as a co-investigator of the NHLBI-funded WISE study. I am the PI of The Women Take Heart Project that will be part of this proposed study. I have a broad background in sex-differences in cardiovascular disease, women’s cardiovascular health, epidemiology and statistics. In addition to working on the WISE Study, I was also involved in the Women’s Health Initiative (WHI) as a co-investigator and the Lifestyle Interventions and Independence for Elders (LIFE) Study. I am currently a site PI for the Global Congestive Heart Failure Study (GCHF) and hold an advisory position on the Trial to Assess Chelation Therapy (TACT2) to improve recruitment of women and minorities. As a result of these prior collaborations, I am aware of the importance of frequent communication among the team and am able to work within the dictated timeline and budget. The current application builds logically on my prior work and prior collaborations with this group.

**B. Positions and Honors**

**Positions:**

2002-2005 Assistant Professor of Medicine & Preventive Medicine, Rush University, Chicago, IL

2005-2010 Associate Medical Director, Center for Women's Cardiovascular Health

2005-2010 Assistant Professor of Medicine & Preventive Medicine , Northwestern University, Chicago, IL

2010-2015 Section Director for Preventive Cardiology and Women’s Cardiovascular Health

2010-2015 Sarah Ross Soter Chair in Women’s Cardiovascular Health

2010-2015 Associate Professor of Medicine & Clinical Public Health, The Ohio State University, Columbus, OH

2016- Professor of Medicine, Chief, Division of Cardiology University of Arizona (Phoenix), Phoenix, AZ

**Honors:**

2011 American College of Cardiology First Annual Heart of Women’s Health CREDO Award

2012 Woman’s Day Red Dress Award

2014 American Heart Association: Women in Cardiology Mentoring Award

2015 National Aeronautics and Space Administration (NASA) Group Achievement Award

2018 AAMC Awards for Excellence Competition 2018 Gold Award

2019 Executive Leadership in Academic Medicine (ELAM)

2019 American College of Cardiology Bernadine Healy Leadership Award ***in Women's Cardiovascular* *Disease***

2019 Arizona Business Magazine’s Most Influential Woman in Arizona Award

**2019** American Society of Preventive Cardiology Nanette Wenger Award

## Other Experience and Professional Memberships

2012-2014 Scientific Advisory Statement: Role of Contemporary Non-Invasive Testing in the Clinical , American Heart Association Writing Groups

2012-2014 Evaluation of Women with Suspected Ischemic Heart Disease, American Heart Association Writing Groups

2014-2016 Scientific Advisory Statement: Preventing and Experiencing Ischemic Heart Disease as a Woman, American Heart Association Writing Groups

2014- Board Member, American Society of Preventive Cardiology (Fellow)

2015-2017 Scientific Advisory Statement: The Impact of Hypertension on Cognitive Function, American Heart Association Writing Groups

**2015- CardioSmart Editor-in-Chief,** American College of Cardiology (Fellow)

2016-2017 AHA Obesity Grant Review Committee, American Heart Association (Fellow)

2016-2017 AHA Committee for Scientific Sessions Program 2017, American Heart Association (Fellow)

2017- ACC/AHA Writing Group- Chest Pain Guidelines (Chair), American College of Cardiology (Fellow)

2017- Chest Pain Guidelines (Chair), American Heart Association Writing Groups

2018 AHA ACOG Presidential Advisory Promoting Risk Identification/Reduction of CVD in Women/OB/GYN, American Heart Association Writing Groups

2018- Treasurer/Executive Committee, American Society of Preventive Cardiology (Fellow)

2019- Solution Set Oversight Committee (member), American College of Cardiology (Fellow)

**C. Contributions to Science**

1. **My work has almost exclusively been focused on women or on sex-differences in cardiovascular disease. My earliest work began with The Women Take Heart Project, a study of 5932 asymptomatic women who underwent stress testing and were followed for a number of years after. Collaborations with the WISE Study began using Women Take Heart as a “control” cohort for this symptomatic population. My work led to the defining equation for predicted fitness and heart rate response in women, including its impact on prognosis. More recently, my collaborations with others using big data, including the National Inpatient Sample, NHANES and NCDR data, have allowed us to examine a number of factors that impact cardiovascular disease outcomes.**
2. **Gulati M**, Pandey DK, Arnsdorf MF, Lauderdale DS, Thisted RA, Wicklund RH, Al-Hani AJ, Black HR. Exercise capacity and the risk of death in women: the St James Women Take Heart Project. Circulation. 2003 Sep 30;108(13):1554-9. Epub 2003 Sep 15. PMID: 12975254
3. **Gulati M**, Black HR, Shaw LJ, Arnsdorf MF, Merz CN, Lauer MS, Marwick TH, Pandey DK, Wicklund RH, Thisted RA. The prognostic value of a nomogram for exercise capacity in women. N Engl J Med. 2005 Aug 4;353(5):468-75. PMID: 16079370.
4. **Gulati M**, Cooper-DeHoff RM, McClure C, Johnson BD, Shaw LJ, Handberg EM, Zineh I, Kelsey SF, Arnsdorf MF, Black HR, Pepine CJ, Merz CN. Adverse cardiovascular outcomes in women with nonobstructive coronary artery disease: a report from the Women's Ischemia Syndrome Evaluation Study and the St James Women Take Heart Project. Arch Intern Med. 2009 May 11;169(9):843-50. doi: 10.1001/archinternmed.2009.50. PMID: 19433695; PMCID: PMC2782882.
5. **Gulati M**, Shaw LJ, Thisted RA, Black HR, Bairey Merz CN, Arnsdorf MF. Heart rate response to exercise stress testing in asymptomatic women: the st. James women take heart project. Circulation. 2010 Jul 13;122(2):130-7. doi: 10.1161/CIRCULATIONAHA.110.939249. Epub 2010 Jun 28. PMID: 20585008**.**
6. **Gulati M**, Black HR, Arnsdorf MF, Shaw LJ, Bakris GL. Kidney dysfunction, cardiorespiratory fitness, and the risk of death in women. J Womens Health (Larchmt). 2012 Sep;21(9):917-24. doi: 10.1089/jwh.2011.3406. Epub 2012 Apr 5. PMID: 22480201.

**Complete list of Published Work in MyBibliography:**

**https://www.ncbi.nlm.nih.gov/pubmed/?term=Gulati%2C+Martha**

**D. Additional Information: Research Support and/or Scholastic Performance**

**Ongoing Research Support**

2017-1884-PHRI (Gulati) 10/23/2017-10/23/2021 0.12 Person Months

Hamilton Health Sciences (Canada)

Global Congestive Heart Failure (G-CHF): A global registry to study the demographics, socioeconomic and clinical factors, etiologies, pathophysiology, management, barriers to care and outcomes to hear

The goal of this project is to estimate the incident rate of outcomes in HF patients in world regions and overall, and assess social and lifestyle factors (demographics, socioeconomic variables, clinical risk factors, diet, medication use, and health-related quality of life), etiologies and variations in treatment patterns that might influence mortality and morbidity.

Role: Principal Investigator

**Completed Research Support**

None