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The annual American Heart Association *Quality of Care and Outcomes Research* (QCOR) Conference occurs this month, returning home to its original location in the Washington, DC, area after a few years away. As usual, the meeting will be filled with wonderful programming in 3 core areas: health policy, quality of care, and outcomes research. It also will recognize Sharon-Lise Normand—a giant in the field of biostatistics—with the QCOR Overall Lifetime Achievement Award.

As has become tradition, this month's issue of *Circulation: Cardiovascular Quality and Outcomes* features 2 articles published simultaneously with QCOR abstract presentations by young investigator finalists. In the first, Patel et al¹ from the Mid-America Heart Institute used data from the recent SPRINT (Systolic Blood Pressure Intervention Trial) challenge to identify heterogeneity of treatment effects with intensive blood pressure control. In the second, Okunrintemi et al² from Baptist Health South Florida analyzed data from the National Medical Expenditure Panel Survey and found high rates of poor patient-provider communication that correlated with worse outcomes and increased costs. I encourage you to read both articles from 2 young stars in the field.

This year QCOR turns 18. According to legend, the idea for a meeting dedicated to cardiovascular outcomes research started after a jog. Its goal at the time was less to showcase high-profile work and more to bring like-minded investigators from across the country together to tackle thorny problems in the new field. In fact, the key deliverable of the *Scientific Forum on Quality of Care and Outcomes Research in Cardiovascular Disease and Stroke* in 1999 was to produce proceedings that advanced the science.

Seeing QCOR mature over these nearly 2 decades reminds me of how quickly time passes. I have been involved with the meeting almost from its beginning—attending it for the first time as a cardiology fellow in the early 2000s. The meeting is where I have met my closest collaborators and mentors over the years, and I've loved its intimate and personal nature.

The opinions expressed in this article are not necessarily those of the American Heart Association.

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In contrast to the larger annual American Heart Association Scientific Sessions (that serves its own purpose), QCOR has always been best at fostering deeper, long-term connections. I was excited to join QCOR's planning committee in the late 2000s and from 2012 to 2015 served as its Vice-Chair and Chair.

The year I became Vice-Chair, John Ioannidis in the title of a provocative *JAMA* Viewpoint asked the reasonable questions: "Are medical conferences useful? And for whom?"³ The timing of his article couldn't have been better for me. I was quickly appreciating firsthand the tremendous amount of planning that goes into meetings—by both staff and volunteers. And we were constantly wondering about the overall value we were adding. As participants ourselves, we know how precious it is to spend 2 days from our families and work. We candidly wondered: Is QCOR worth it?

For me, a clear answer didn't arrive until 2015—my final year as QCOR Chair. That year we had to unexpectedly cancel the meeting a day before it was to start as violent protests consumed Baltimore following the funeral of Freddie Gray. The decision to cancel the meeting was tough and last minute. Some of our international attendees didn't find about it until after flights had landed. John Beltrame—a friend and longtime attendee of QCOR—found out only after he arrived from his long flight from Australia. He promptly took the next plane back (and characteristically never complained).

Even in retrospect, American Heart Association made the right decision but that didn't make the cancellation any easier. For many of us, QCOR is a highlight of our academic calendar. It is a chance for us to reconnect with colleagues and bond as a scientific community. Missing it just didn't feel right, and this unfortunate natural experiment demonstrated to me the particular importance QCOR has for young investigators (who are often presenting at their first national meeting). We worked hard with American Heart Association's help to create a meeting within a meeting at the larger scientific sessions that fall. Many of us also put together mini meetings locally as a replacement. In Ann Arbor, we had a wonderful afternoon symposium with lots of constructive discussion. But none of these solutions fully captured the soul of QCOR, and to me it's a no-brainer: QCOR is useful. It is useful for our community at large and most especially for our young investigators.

To understand QCOR even better, I recently asked its past and current leaders what the meeting currently means to them. A common theme across many answers was the word *home*. This makes total sense to me—not a house but a home. More than anything else, QCOR has been a secure haven to meet colleagues, share ideas, discuss big science, and inspire each other. Being a home is a goal that we also strive for at

CQO. Like many of you, I'm very excited about the conference this month.

Welcome home.

Disclosures

None.

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