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President's Report 2013

Delivered by Professor Richmond Jeremy

Volume XXV, No 3

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Welcome to this afternoon's Annual General Meeting of the Cardiac Society of Australia and New Zealand. I would like to acknowledge the traditional custodians of the land on which we meet and to offer my respects to their elders.

There are a number of apologies which have been noted and will be recorded in the Minutes. Following the correction of the year in the header of the 2012 AGM Minutes, Dr Michael Ward moved that they be accepted as a correct record, seconded Prof Terry Campbell. Carried unanimously.

It is a pleasure to present the 2013 President's Report to Members and Fellows and to begin with I think we are all having a terrific meeting here in the Gold Coast. I would like to thank and congratulate the organisers of this ASM which includes the 61st Annual Scientific Meeting of the Society and the 37th meeting of the Australasian Section of the International Society for Heart Research. Particular thanks to the Organising Committee Convenor, Scott Harding, the Scientific Chair, Gerry Devlin and all the men and women who worked with them to make this successful.

This year has, of course, represented a very special challenge because it was meant to be held in Christchurch and it was necessary to relocate the meeting here and whilst enjoying the meeting, it is relevant that we should remember that there are still a lot of people in Christchurch who are having a very difficult time. Wellington is also suffering from earthquake activity and our thoughts and best wishes go out to all who have been affected.

I would also particularly like to note the wonderful effort made by The Conference Company (TCC) in organising the meeting and bringing New Zealand to the Gold Coast and the juxtaposition of the cultures and the two nations is working fantastically. It is creating quite a unique meeting. I wish to acknowledge the work done by Andrew MacIsaac and Ian Meredith in organising yet another successful, high quality ANZET meeting in the two days preceding the ASM. It is therefore with great pleasure that we recognise the efforts of these people and would ask the following people to come to the stage.



**Richmond Jeremy and
Gerry Devlin, Chair,
Scientific Program Committee**

President's Report



**Presentation to
Lea Delbridge ISHR**

*Scott Harding
was presented
with his plaque at
the Gala Dinner.
Special acknowl-
edgement to
Wendy Bryson,
the nursing
representative,
who was unable to
attend the
meeting.*



**Presentation to
Christine Shanahan**

Prof Jeremy then presented Gerry Deolin, Lea Delbridge (ISHR) and Christine Shanahan with a plaque recognising their contribution to the organising of the meeting.

Certainly, as alluded to by Michael Ward and Aravinda Thiagalingam, the Society has had a very busy roll out and there are some major strategic initiatives to inform you about today. The Secretary has reported on some of the activities of our Councils and I really want to note that the work done by our Councils is very wide and extremely varied. We are critically dependent on the work done by these individuals who do it for no remuneration, all done in their own time and is completely selfless. Without their dedication and commitment we would not be able to achieve the level of output which we currently do. I want to personally thank each and everyone one of them for their commitment over the years and also for their friendship and assistance in this role.

Aravinda mentioned the Journal. Certainly, under the Editorial leadership of Rob Denniss, the Journal has gone from strength to strength. The number of submitted manuscripts has trebled. He now has 80 accepted manuscripts in the pipeline for publication and is running out of page numbers.

At the same time, the acceptance rate is falling every month. This is good - unless you are one of the rejected authors. We are in the midst of negotiating a new publishing contract which will see a "new look" Journal. We are going to work on the colour scheme, but the essentials of it are, expanded full colour printing throughout the Journal, better highlighting of headings, tables and key areas of interest and colour reproduction of figures. We are going to

achieve this by using an economical colour process rather than a glossy "vogue magazine" colour process. We are going to increase our e-publication rates and, in particular, we are in discussion that once a manuscript is submitted, that manuscript will be published on-line in ten days. This is what the world is demanding and this is what we have to deliver to our readers. In addition, the Journal is very keen to promote the submission of high quality reviews particularly by our younger Fellows and researchers and there will be a \$1000 per annum award given to the highest rating review manuscript submitted by a young investigator. I think that is a very laudable thing for the Journal to do. The Journal is now returning solid income which will allow expansion of the editorial staff and the recruitment of a specific new content manager to manage the recruitment and processing of more high quality articles. We need this in order to drive the Journal to the next stage of its development. It was alluded that the Society had moved offices. One of the reasons for this was to allow for the expansion of staff so that the Journal and the Society can continue to grow.

At the same time, the Society continues to work towards closer collaboration with the National Heart Foundation and some of the initiatives include:

- the agreement to establish a Joint Standing Taskforce for Guidelines Development;
- the support of an educational materials package on rheumatic heart disease;
- collaboration on addressing Indigenous cardiovascular health issues;

- the approach to “in principle” support of a registry for high risk cardiac devices, which I will report on later.

Two major initiatives to be rolled out in coming months. The first is CPD. It is planned that in December, the CPD website will go live. This will enable you to log in and see your own personal profile contained in the CSANZ database. This will enable you to update your profile so in common with the major international bodies you can add information about yourself, you can ensure that your profile and contact details are up-to-date, you can pay your subscriptions on-line. Importantly, you will be able to flag your special areas of interest. We all have areas of interest, what we want is material targeted to our areas of interest as well as material that is of general importance. The website is presently tag-lined “HeartOne”. The homepage will provide a summary of your CPD activity to date, how you are travelling, will provide news and updates on latest research findings, clinical practice findings. It will include flash bulletins and new releases or controversies. It will also include banner headlines of the latest resources that have been added to the library.

An important element of this is that this programme tracks your learning activities and provides reports. You can nominate up to six favourite areas of activity. One of the pages will list all the new material that has come in in your area of special interest whether it be a new journal article, a new learning module, a new learning resource, a lecture or new guidelines which have been released. A word about modules, there will be a variety of learning resources available. Some of it will be linked to your favourite Journal articles, but you will not have to pay subscriptions for. I will also show you the link through Elsevier

Clinical Key which has an extraordinary amount of material available in it. There will also be a large smorgasbord of general learning resources so if you want to know what an echo on Fabry’s disease looks like, you can do a search or, similarly, if you are searching for guidelines for commercial drivers license certification, there will be a “hot key” which takes you straight to the guideline. There will also be specific modules which will be encapsulated learning tasks so if many of you go to CardioSource, you will be asked three or four questions at the beginning, your answers will be recorded, you then watch do the task / watch the video / read the paper, you will then be asked the same questions and you will be able to see what you have learned. This programme will track your activity so that you can also produce an objective report on what you have done and how it has improved your learning. CPD reporting - what we want is a programme that tracks what we have done, tracks our progress, maps the mix of tasks undertaken so that we can see whether things are skewed or balanced. That also has the capacity for us to log any activity which is not part of this programme. If you have done a teaching programme, written a manuscript, given a lecture, this can all be logged and it will be added to your record. You can then produce a summary whenever you like of your activities. If you need it for reaccreditation or revalidation, you will have that summary very easily available.

A quick word about Clinical Key, one of the pages is listed “Journals”. When you go to that page you will see several things, one will be a tab to Clinical Key, others will be the covers of some of our favourite journals. You just click on the cover and go to the latest issue. Clinical Key is a search engine within the whole of medicine, but we are obviously interested particularly in cardiovascular medicine. So if I have a question



To access
[ClinicalKey](#)
simply click
into the CPD
tab on the
[CSANZ](#)
[homepage](#)
and start
searching
today.

If you have
any questions
or feedback
email

stephanie.johnston@csanz.edu.au

about amyloidosis in the heart, I can do a search and it will bring up journal articles, videos, echoes, ECGs, pictures, lectures, guidelines etc related to amyloid in the heart.

There is a huge amount of information. It is not the whole of cardiovascular medicine, but it is a very large slab of it. There are a number of text books available on line so all the major textbooks like Braunwald's, Otto's Cardiology, Clinical Echocardiography etc. are all available on line. It is not everything, but it is a good starting point. Furthermore, if you wish to use any of the illustrations in your publications or talks, you can easily download them to a PowerPoint slide and you are not breaking any copyrights. This is one, I stress one, of the elements within the content available in our CPD. At the same time I have commenced a conversation with the ESC and we will also be talking again to the ACC, to see if we can develop general links to CardioSource for all our Society members, and also to the new ESC platform. If we are successful in this, what you will have is a true supermarket of CPD with easy links through the CSANZ HeartOne portal to go to our own material, to the Clinical Key material, to the ESC material, the ACC material. If we can achieve that, I doubt that there is any other portal in the world that can deliver that kind of content and the programme will track everything you do.

Look for this coming to you in December. I commend it to you. Clearly, in the first few months there will be operational wrinkles that we need to iron out, but over the course of the six months after going live, I anticipate that this will turn out to be one of the really useful resources for you. I am particularly indebted to Stephanie Johnston and the members of the CPD Committee who have worked with me to make this possible.

The next major initiative is ACOR (Australasian Cardiac Outcomes Registry). ACOR is an independent body established under ownership of the Cardiac Society to oversee and support the conduct of high quality, clinical registries. The first of which is the Australasian cardiac proce-

dural outcomes registry. The datasets for this are under development at present. This will require collaboration between a number of groups. At the top level, collaboration with the Heart Foundation and also very likely with the Cardio Thoracic surgeons (ANZSCTS). At the operational level, collaboration with SAHMRI (South Australian Health and Medical Research Institute), the Victorian Cardiac Outcomes Registry and Auckland University Services collecting data in New Zealand. The aim is to have a comprehensive, procedural and devices outcomes registry for Australia and New Zealand and to capture all activity in both countries. You may have heard in Australia about the Australian government's commitment to funding a high risk, cardiac devices registry. I have been in discussions with the Chief Medical Officer and the relevant officers within his department about that. They understand the need for a clinical quality registry as opposed to just a "tag and bag" Toyota recall registry. They wish to support a high quality, clinical quality register. They recognise the importance of the Cardiac Society and its Members in making it a success. However, if we are to be successful in this, it can only succeed with the participation of our Members. That participation cannot be taken for granted. It can only be achieved when our Members trust what we are about to do, when our Members know that the principles upon which it is built include respect, recognition of privacy and confidentiality for patients and practitioners, transparency and accountability in governance, representation in management and in determination of publication and outcomes. It is on those principles that this Registry is to be built. Having said that, we schedule this Registry to go live in the first quarter of 2014, so there is not a lot of time.

CSANZ is also extending its international relationships and the most obvious of these is the World Congress of Cardiology. I particularly want to acknowledge the work done by David Prior who continues to carry a huge load in making this a success. As mentioned earlier, several key things:



WORLD HEART FEDERATION® | World Congress of Cardiology

Scientific Sessions 2014 | 4-7 May 2014
Melbourne, Australia



The Cardiac Society of Australia and New Zealand



Heart Foundation

The World Congress of Cardiology will be held 4-7 May 2014. Melbourne is the ONLY place to be!

Abstract submission is open now. This is difficult, I know, but please encourage your Fellows and your teams to submit their abstracts now. Abstracts close on 15th September. Whilst there were initial anxieties about the financial status, the fall in the Australian dollar has done wonders and those anxieties have also been alleviated by the fact that the Organising Committee have done a sterling job in engagement with commercial sponsors which is tracking now better than for any other World Congress ever held. We are going to show the World Heart Federation that Australia and New Zealand really can host a first class, international meeting.

At the same time we are continuing our engagement with other groups and I have mentioned our discussions with the ESC and the ACC about shared approaches to educational programmes. I have been in discussions and addressing issues of professional accreditation and revalidation with colleagues at the British Cardiac Society. I wish to wave a flag of what might be coming over the horizon and down the pike and that is revalidation. Many of you may be aware that there is quite a stringent formal revalidation process currently in operation in the United Kingdom. Many of you will be aware that the same things are being discussed and worked on in the USA. It would be naive of us to believe that in our part of the world we are going to escape with the current

totally internal self-policing of professional standards in an on-going manner. The trick for us is to demonstrate that we can meet that challenge proactively and responsibly and demonstrate that our mechanisms for ensuring professional standards and continuing professional education are not simply self-serving, but can be objectively scrutinized and approved by the community and a representative of the community in this period of time is the Australian Medical Council (AMC). Where we will next have to go with our CPD programme is to see if we can work a reassessment / revalidation process that is not onerous, that is not punitive, but one that is supportive, helpful and actually fun to do along the way which meets the AMC requirements. Clearly there is much discussion and much thought to go into that and I don't think anybody has a model yet of how it is going to work, but I wish to flag this as a forthcoming discussion point for us.

Finally, through Andrew MacIsaac we are about to explore how we might foster training and clinical practice standards in neighbouring countries. We are having a conversation following this AGM with a neighbouring country in the South Pacific.

Our finances are in good shape. Without them we would not be able to embark upon these projects. I would like to thank the Members of the Board for their commitment and wise advice and support throughout the year. I have to say it is an absolute pleasure to walk in and sit down at the Board table and see everyone there and to work



CSANZ Board

Front row (L-R): Nigel Jepson, Andrew McGavigan, Joe Hung, Lynne Portelli, Richmond Jeremy, Rob Denniss, Aravinda Thiagalingam, Patricia Davidson

Back row (L-R): David Prior, Andrew MacIsaac, John O'Shea, Rob Justo, John Atherton, David Brieger, Michael Ward, Peter Steele, Jim Cameron, Phil Aylward, Ian Meredith

with them. It's a great team. We could not work without it. I particularly thank Jim Cameron who leaves the Board this year and who has been a very wise mentor and role model. I would also like to thank Michael Ward who has completed six years of service as Honorary Treasurer and Secretary with great good humour and other valued Board Members whose terms of office have now expired, Phil Aylward and Phil Roberts-Thomson.

It is with great pleasure that I advise that Andrew MacIsaac has been elected President Elect of the Society and I commend his nomination to you. I have a great deal of respect for Andrew and I think he will be a terrific President.

Clara Chow is joining the Board as the Honorary Treasurer and it is felt that her capacity for practical achievement will be an excellent resource for the Society. We thank her for agreeing to take on the task of this position on the Board.

The staff in the office, Christine Boyle, Stephanie Johnston, Anne Mar and Lynne Portelli are an absolute pleasure to work with. I don't think I have ever seen any of them flustered or upset and goodness knows we throw stuff at them! They carry a huge workload and that workload is increasing and we recognise that we will need to recruit some additional staff to the office - I've mentioned the CPD manager as an example of that.

So with that summary of a Society that is growing and I think is fundamentally very healthy and very vital, it now gives me great pleasure to announce the following prizes and scholarships which have been awarded throughout the year and also at the ASM:

2013 CSANZ Research Scholarship:

Dr Timothy Roberts, University of Melbourne

The CSANZ Travel Grants:

To attend the **AHA Meeting** in Los Angeles, California, 3-7 November, 2012, were awarded to:

- **Dr Christopher Wong**, The University of Adelaide - Chris is awarded the McCredie / Wilcken Scholarship

- **Dr Om Narayan**, Monash Medical Centre
- **Dr Dion Stub**, BakerIDI Heart and Diabetes Institute
- **Dr Ajita Kanthan**, The University of Sydney

To attend the **ACC meeting** in San Francisco from 9-11 March, 2013, were awarded to:

- **Dr Andris Ellims**, Baker IDI Research Institute. Andris is also the McCredie / Wilcken recipient.
- **Dr Gareth Crouch**, Flinders Medical Centre

To attend the **European Congress of Cardiology Meeting** in Amsterdam, The Netherlands, from 31 August - 4 September, 2013, were awarded to:

- **Dr Tom Wang**, Auckland City Hospital - Tom is awarded the McCredie / Wilcken Scholarship
- **Dr Jerrett Lau**, Concord Hospital
- **Dr Susie Parnham**, Flinders University Adelaide
- **Dr Melissa Leung**, Liverpool Hospital

CSANZ Indigenous Scholarship in CV Health

Dr Anna Rolleston, The Cardiac Clinic/The University of Auckland, New Zealand

CSANZ Affiliate Clinical Development Awards

- **Ms Margaret Couper**, Wellington Hospital NZ
- **Mrs Jo-Ann Downie**, Taranaki District Health Board NZ
- **Mr Murray Hart**, Christchurch Hospital, NZ



Presentation of CDA to Murray Hart

Affiliate Nursing Prize

Lis Neubeck, The George Institute for Global Health for her presentation:

Two year outcomes of the Choice of Health Options In prevention of Cardiovascular Events (CHOICE) replication study



Lis Neubeck
2013 Affiliate Nursing Prize

Judges: James McVeigh, Julie Chirnside and Ralph Stewart

Allied Health Affiliate Prize

Vesna Nikolova-Krstevski, Victor Chang Cardiac Research Institute for her presentation:

TRPC6 (canonical transient receptor potential Ca²⁺ channel 6) is an important mediator of mechanical stretch responses in the atrial endocardial endothelium



Vesna Nikolova-Krstevski
2013 Allied Health Affiliate Prize

Judges: Susan Sinclair and Chris Semsarian

Ralph Reader Prize - Basic Science Section

Rajiv Mahajan, Center of Heart Rhythm Disorders, University of Adelaide and Royal Adelaide Hospital for his presentation:

Atrial fibrillation and obesity: impact of weight reduction on the atrial substrate



Rajiv Mahajan
Ralph Reader Prize - Basic Science Section

Ralph Reader Prize - Clinical Science Section

Dennis Wong, MonashHeart, Royal Adelaide Hospital & University of Adelaide for his presentation:

Transluminal Attenuation Gradient On 320-detector row CT (TAG320) Compared to Contrast Opacification Mean Difference (CO-Mean-Difference) For Detection Of Functionally Significant Stenosis Assessed By Fractional Flow Reserve (FFR)



Dennis Wong
Ralph Reader Prize - Clinical Science Section

Judges: Ardeschir Ghofrani, Andrew Hamer, Peter Macdonald, Mayanna Lund, Jim Stewart and Martin Stiles



Alexander Incani

CSANZ/CSL Biotherapies Interventional Fellowship

Dr Alexander Incani, The Prince Charles Hospital, QLD who is undertaking an advanced interventional fellowship in coronary and structural heart disease intervention at St Paul's Hospital, Vancouver, Canada, commencing June 2013.

R T Hall Prize

Steve MacMahon, The George Institute for Global Health, who has led a global program of clinical and epidemiological research on the causes, prevention and treatment of cardiovascular diseases for more than two decades. The results of this work have been widely cited in more than 300 publications, with an H-factor score of 90. The findings have led to many changes in clinical guidelines throughout the world: for example, his work is cited in all major recent guidelines for the treatment of hypertension, diabetes and stroke. This has impacted on clinical practice world-wide.



Stephen MacMahon and Richmond Jeremy

ANZET Fellows' Prize

Michael Liang, Wellington Hospital, New Zealand

A Complex Situation near the Left Main Artery

Judges: Evelyn Regar, David Smyth, Alec Vahanian and Stephen Worthley



**Alec Vahanian, Michael Liang
and David Smyth**

Poster Prizes

Affiliate Poster Prize:

Ellen Woodcock, University of Otago, Wellington and Cardiology Department, Christchurch Hospital, New Zealand

VF frequency is influenced by cardiac structure

Judges: Ms Jo Scott and Prof Steve Selig

CSANZ Poster Prize:

Inken Martin, Victor Chang Cardiac Research Institute, Sydney

A transgenic zebrafish model of a human cardiac sodium channel mutation exhibits bradycardia, conduction-system abnormalities and early death

Judges: A/Prof David Prior and Prof Rob Doughty

ISHR/CSANZ Student Investigator Prize

Oral:

Michelle Munro, Auckland University

The organisation of T-tubules and junctional proteins in JPH2 transgenic mice

Mini Oral:

Shan Liu, Monash University

Myocardial infarction after subtotal nephrectomy accelerates pathological cardiac remodeling and renal impairment

Poster:

Maria Jelinic, University of Melbourne

Novel vascular phenotypes in the mesenteric artery of male relaxin-deficient mice

HONOURS

The following members received honours during the past year and we extend our congratulations to them:

Australia Day Honours

Andrew Cochrane (AM) for his major contributions to adolescent and adult congenital heart disease through humanitarian and philanthropic contributions.

Jitu Vohra (AM) for significant service to medicine in the field of cardiology.

Queen's Birthday Honours

Garry Jennings (AO) for distinguished service to medical research, particularly the prevention and control of cardiovascular disease, obesity and diabetes, to professional associations, and education.

Thank you to reviewers:

I would like to take this opportunity to extend thanks to the many judges who assist, not only at this meeting, but in assessing the various scholarships and travel grants which are awarded throughout the year. This is not a trivial task and without it we would not be able to have such a high quality of awards. We are extremely grateful for their time and contribution.

DEATHS

It is with deep regret that I note the passing of the following Members and colleagues in the past twelve months:

Dr Don Esmore, Dr Robert Fraser AM (FCSANZ VIC), Mrs Jan Garrett (Affiliate WA), Dr Guy Hallwright (Life NZ), Prof Paul Korner AO (FCSANZ NSW), Dr Patrick Twomey (Associate NSW) and Mr George Westlake (Ordinary VIC).

There remains one item and that is the Notice of Motion to amend the Constitution of the Society as per the tabled changes governing the admission process of Associate Members and the nomination process for the Affiliate representatives to the Board. Clause 6.3 covers the admission of Associate Members who are currently in the cardiology training programme which requires their training supervisor to sign the appropriate application form and in clause 13.2 the nomination of the Nursing and Allied Health Council Chairs who sit ex-officio on the Board, must be nominated and seconded by Affiliate Members aligned to their Council, as prescribed by the Board. The Notice was moved by Prof Rob Denniss, seconded by Prof Terry Campbell. The Motion was carried unanimously.

The President then opened the meeting to the floor. There being no matters raised from the floor, Prof Jeremy thanked everyone for their attendance, wished them well for the remainder of the conference.

CSANZ ASM 2013 Highlights



Welcome to Country



Pōwhiri - traditional Māori welcome



Prof Len Kritharides

The President's Medal was awarded to Professors Len Kritharides and Alex Brown for their major and many contributions to the Society.



Prof Alex Brown



Allied Health & Technology Prize finalists
Jude Greenslade, Michael Savage, Vesna Nikolova-Krstevski and Alexander Olausen



Nursing Prize finalists
Kristyan Guppy-Coles, Elizabeth Jenkins, Lis Neubeck and Andy McLaughlan

CSANZ ASM 2013 Highlights



**Gary Nicholls presents the
Gaston Bauer Lecture**



**Kempson Maddox Lecture delivered by
Peter Macdonald**



**RT Hall Lecturer—
Ardeschir Ghofrani**



**Livia Hool, Roland Stocker (Basic Science
Lecturer) and Jon Kalman**



**ISHR Oral Prize finalists
Laura Bienvenu, Michelle Munro,
Prof Lea Delbridge (Session Chair),
Jennifer Kozlovski and Shaneel Bappayya**



**Jim McVeigh
2013
Cardiovascular
Nursing
Lecturer**

ANZET13 Highlights



Pōwhiri



**Andrew MacIsaac and Ian Meredith
open ANZET13**



**David Cohen, Saint Luke's
Mid America Heart Institute**



**Evelyn Regar, Erasmus
Medical Centre**



**Tim Henry, Minneapolis
Heart Institute**



**David Smyth acknowledges
Christchurch**



**Alec Vahanian delivers the
Louis Bernstein Lecture**

ANZET13 Highlights



Live Case from Prince Charles
Hospital Brisbane



Panel members watching Live Case
from Auckland City Hospital



Delegates watch
Live Case



Steve Worthley and Jim Stewart
chair a session



Guests hit the dance floor



Guests in their best Retro Kiwi



**WORLD HEART
FEDERATION®**

**World Congress
of Cardiology**

Scientific Sessions 2014
4-7 May 2014 | **Melbourne, Australia**

25x25: At the heart of global health

Extended deadline!

**Abstracts submissions are open from
1 August to 23 September 2013**

Seize the opportunity to be at the heart of the congress: submit your abstract to get the opportunity to present your research to cardiovascular disease specialists and public health professionals from around the world. WCC abstracts cover all aspects of heart health, from prevention, diagnosis and treatment of cardiovascular disease to advocacy and policy work. All accepted abstract will be published in *Heart Lung and Circulation* and *Global Heart journals*.

GLOBAL PLATFORM

For cardiovascular disease specialists and public health professionals to share knowledge and network with their peers

WORLD LEADING EXPERTS

Presenting 150 sessions on cardiology, policy and public health

LATEST SCIENTIFIC FINDINGS

Featured in over 1,000 new abstracts on prevention, diagnosis and treatment of cardiovascular disease

**INTERNATIONAL CONGRESS WITH
A SPOTLIGHT ON REGIONAL ISSUES**

Highlighting local successes in rheumatic heart disease and tobacco cessation

BEST-PRACTICE SHARING

Across different resource settings with a highlight on how international learning can be adapted to national circumstances

**UNITING EFFORTS TO REDUCE
PREMATURE CVD DEATHS 25% BY
2025**

Through mobilizing the CVD community and working with the WHO

www.worldcardiocongress.org

Online abstract
submission
opens on
1 August 2013



The Cardiac Society
of Australia and New Zealand





www.anzet.com.au

As the Annual Scientific Meeting of the Cardiac Society of Australia and New Zealand will be part of the World Congress of Cardiology in May 2014, ANZET14 will be a standalone meeting for the first time.

It will offer an extended program that will include:

- Live case broadcasts from leading Australasian and international centres with a focus on complex coronary interventions and non coronary cardiac procedures
- A highly interactive program with international and national experts discussing cases, interventional techniques and strategies
- Live case transmissions will be interlaced with lectures, reviewing the latest clinical studies
- An Affiliates' Symposium focusing on issues relevant to Cath Lab staff
- Fellows' Symposium for the 2014 ANZET Prize.

2014 R T Hall Prize

Call for Nominations

Nominations are invited for the 2014 R T Hall Prize of the Cardiac Society of Australia and New Zealand (CSANZ). The Prize is the most prestigious research award of the CSANZ and recognises the achievements of senior and established investigators. The Prize is awarded in open competition and is directed towards recognition of sustained and outstanding research achievement.

CONDITIONS:

- The R T Hall Prize will be awarded to **an individual investigator** for a coherent body of work, which advances knowledge of the cardiovascular system and its diseases. In exceptional circumstances, the Prize may be awarded to a small group for an outstanding contribution in the field of cardiology. The work must have been published in a scientific journal or journals. Work published in book-form and thesis, which have been accepted for higher degrees, may also be submitted.
- The investigator **MUST** be a Member of The CSANZ and the work must have been substantially undertaken in Australia or New Zealand.
- Submissions for the R T Hall Prize will consist of a nominating letter by a Member of The Society plus copies of the published manuscript(s), as well as, confirmation from the nominee(s) that they wish to be considered for the Prize.
- The R T Hall Prize will be decided by the Board after review by the Scientific Committee.
- The winner of the R T Hall Prize will be announced at the Annual General Meeting of The Society.
- The value of the R T Hall Prize will be AU\$10,000.

Submissions should be forwarded to the Honorary Secretary, The Cardiac Society of Australia and New Zealand, Suite 601, Level 6, 1 Castlereagh Street, Sydney NSW 2000.

Closing date:

5 pm Friday, 4th October 2013

The Society reserves the right not to proceed with an appointment for any reason. Applicants requiring further information are requested to contact the CSANZ at info@csanz.edu.au

Please note: If email confirmation of receipt of the nomination is not received within 1 week of submission, please contact the CSANZ at info@csanz.edu.au

Travelling Fellowship to the ACC

Applications are called for the CSANZ Travelling Fellowships for travel grants to enable investigators to attend the **63rd Annual Scientific Sessions of the American College of Cardiology** to be held in Washington, DC, from 29–31 March, 2014. The Fellowships are intended to provide an opportunity for investigators in the early stage of their research career, to present at a major international conference.

The conditions are:

1. The Fellowships are valued at AU\$3,000 each.
2. The top ranked candidate will be awarded the CSANZ McCredie/Wilcken Travelling Fellowship.
3. **At the time of application, applicants must be current financial FCSANZ, Associate or Affiliate Members of the Cardiac Society with**

preference given to those attending their first meeting.

4. The work must have emanated from Australia or New Zealand.
5. Applicants must have an abstract accepted for presentation at the ACC meeting.
6. Applications must be accompanied by a letter from the supervisor or Director of the laboratory or service from which the work has emanated, clearly detailing the specific contribution made by the applicant towards the work being presented.
7. Preference will be given to those who have not previously been awarded CSANZ travelling scholarships.
8. Conditions apply to successful applicants **not domiciled in**

Australia or New Zealand.*

9. Late applications will NOT be considered.

Applications should be emailed to the Honorary Secretary at info@csanz.edu.au and **must** include:

- 1) copy of submitted abstract(s) and ACC notification of acceptance
- 2) brief curriculum vitae (maximum 1 page)
- 3) supporting letter from the supervisor or Director

CLOSING DATE

20 January, 2014

Please note: if applicants have not received email confirmation of receipt of their application within 1 week of submission, they should contact the Secretariat at info@csanz.edu.au

Travelling Fellowship Update - Dr Tom Wang

Dr Tom Wang, from Auckland City and Middlemore Hospitals, New Zealand, received a CSANZ Travelling Fellowship to attend the 2013 European Society of Cardiology Congress in Amsterdam recently.

I would like to thank the Cardiac Society of Australia and New Zealand for awarding me the McCredie Wilcken Scholarship to attend European Society of Cardiology Congress 2013 (31 August- September 4) in

Amsterdam. I am a first year basic trainee of the Royal Australasian College of Physicians working at Auckland City and Middlemore Hospitals in New Zealand, and this was my first cardiac conference outside of Australasia and trip to Europe. I presented five abstracts, and my oral presentations were surgical aortic valve replacement in octogenarians and septuagenarians in the TAVI era, and comparing risk scores for predicting outcomes in infective endocarditis surgery. My moderated poster presentation

was comparing EuroSCORE I, II and AusSCORE for coronary surgery, and other two posters investigated the utility of high-sensitivity troponin to diagnose type 5 myocardial infarction after coronary surgery, and gender disparities in coronary surgery. It was an eye-opening and valuable experience, firstly with approximately 30,000 at the meeting, secondly the vast learning opportunity of the latest research and meeting current leading clinicians and academics in cardiology, and finally sharing my research and interacting with a global audience.

The following advice has been received from the Conjoint Committee for the Recognition of Training in Peripheral Endovascular Therapy -



Conjoint Committee for the Recognition of Training in
Peripheral Endovascular Therapy

Royal Australasian College of Surgeons
Professional Standards

Email: college.pet@surgeons.org

Phone: +61 3 9249 1282

Website: conjoint.surgeons.org

APPLICATIONS CLOSING SOON

NOTICE TO APPLICANTS

Next Meeting

The Conjoint Committee will be meeting in **November 2013** to consider applications for recognition of training. Applications to be considered at this meeting must be received no later than 5pm AEDT on **Wednesday 23 October 2013**. Incomplete applications or applications received after this date will be held over until the following meeting of the Conjoint Committee, which will be held in May 2014.

Recognition Categories

The Conjoint Committee recognises experience in:

- Peripheral Endovascular Therapy
- Carotid Stenting; and
- Fenestrated or Branched Endografting

Applicants must indicate on the application form the procedure category or categories for which they are seeking recognition.

For further information regarding the application process, please visit the Conjoint Committee website at: <http://www.surgeons.org/connections/affiliated-organisations/conjoint-committee/> or contact the Committee Secretariat on (03) 9249 1282 or via email at college.pet@surgeons.org.

On the pulse

For information regarding submissions for *On the pulse* please email info@csanz.edu.au

Views expressed in *On the pulse* are not necessarily the views of the Cardiac Society or its Board.

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Forthcoming Meetings

NORTH AMERICA

AHA2013

16 - 20 November, 2013

Dallas, Texas

www.scientificsessions.americanheart.org/

ACC14

29 - 31 March, 2014

Washington, DC

<http://www.cardiosource.org/acc>

EUROPE

ESC Congress 2014

30 August - 3 September 2014

Barcelona, Spain

www.escardio.org

ASIA PACIFIC

WCC 2014

World Congress of Cardiology

4–7 May, 2014

Melbourne, Australia

www.worldcardiocongress.org

ANZET14

20–22 August, 2014

Melbourne, Australia

Secretariat:

The Conference Company

Phone: 64 9 360 1240

www.csanz.edu.au

A more comprehensive list of
meetings and events can be viewed
on the Society's website
www.csanz.edu.au