The landscape for new cardiac technologies in Australia has rapidly devolved in the past 10 years. Currently there are a number of routinely used devices in everyday Cardiology practice which are not reimbursed as well as an increasing number of emerging technologies competing for attention. If the long running saga with the catheters used for AF ablation is anything to go by it is quite likely that many of these devices will never be funded, despite the hopes of clinicians, industry and patients alike. Even devices with proven outcome benefits such as the pressure wire remain unfunded so what hope do we have that even more expensive technology with less tangible outcome benefits will ever be reimbursed. Devices currently in use but awaiting approval or reimbursement include pressure wires, AF ablation catheters, bio-absorbable stents, TAVI valves, MitraClip, Left Atrial appendage Closure devices, Renal Sympathetic Deinnervation Catheters, Sheathless Guides, Guideliner, IVUS and OCT catheters as well as many other less frequently used but still valuable tools in day-to-day practice.

Similarly the role out of new generation oral anticoagulants suggests that the stalling of availability by regulatory bodies is dictated by the costs rather than the innovative risks involved. While government agencies conveniently sit their hands shuffling decisions from committee to committee, we see current state of the art practice get more and more out of reach for many patients in Australia. Paradoxically and ironically, as the private sector cannot be expected to fund these technologies indefinitely, care in private hospitals may soon be measurably inferior to that in the public sector. Industry can no longer afford to support the market role out of new technologies particularly as regulatory bodies become increasingly more fickle and unpredictable in the decision-making process. Consequently, new technologies are being largely supported by departmental slush funds, charitable donations or the patients are being asked to foot the bill. Penetration of the market is highly variable depending on local or state-based conditions, creating marked inequity in access and large variations in the accepted indications and usage of individual devices. Requirement for local ethics approval and/or funding mean that delays in starting can be quite prolonged or indefinite for technologies which are openly available in other centres.

This situation is unsustainable. To move forward all parties need to acknowledge the validity of major concerns expressed by others and attempt to collaborate in the development of strategies to coordinate the assessment of new technologies so that the cost-effectiveness in the Australian health environment and value to the outcomes of our patients can be realistically assessed in few designated centres, while maintaining equity of access to these technologies not just the patients at the hospitals chosen as assessment centres. While assessments should be carefully undertaken, efforts should be made to streamline the assessment process with centrally coordinated funding and ethical assessment, and milestones defined for the acceptance and ultimate funding of valuable technologies so that Australian patients do not end up receiving third world medical care. In addition access in these trial periods should be coordinated electronically to allow the most suitable patients to receive the new devices and drugs but prevent concentration of the selection process in the hands of a few.

Cardiology will be competing for the ever scarcer health dollar with expensive advances in all branches of medicine. It behoves us to coordinate and optimise our approach for the long term benefit of our patients.
On the pulse

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Views expressed in “on the pulse” are not necessarily the views of the Cardiac Society or its Board.

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Seasons Greetings

To our members and their families, the Editor and staff wish you all a safe and happy Festive Season.

CSANZ OFFICE

Holiday Closure

The CSANZ will be closed from Monday, 24 December, 2012 and will re-open on Monday, 7 January 2013

The December issue of the World Heart Federation Heart Beat is now available at http://emailing.cobweb.ch/t/ViewEmail/r/6982A75B1421E99B/158861F218D16FC1E89F0E32AAFB68BFT

Highlights include:

- Detect a possible abnormal heart rhythm by doing the DIY Pulse Test
- “Make a health heart your goal” - encouraging women and girls to take care of their heart
- Interview with Dr Prakash Raj Regmi MD, President of the Nepal Heart Foundation.
- News from WHF Members
- Advocacy News
Paul Korner (1925 - 2012)

Paul Korner was born in 1925 in Moravská Ostrava in Czechoslovakia (now the Czech Republic). At age 13, Korner, along with his mother, father and brother, fled to England to escape the Nazis. After spending a year in England, the family emigrated to the safety of Australia.

He graduated from Medicine at the University of Sydney in 1951, having taken some time out from his medical studies to finish a BSc (1946) and an MSc (1947). Korner went on to the Kanematsu Research Institute at Sydney Hospital in 1952, the Royal Postgraduate Medical School, London, in 1954 and then on to Harvard.

Upon his return to Australia he took up a senior lecturer position at the University of Sydney (1956–60), followed by the offer of foundation chair in physiology at the University of New South Wales (1960–68), the foundation Scandrett professor of cardiology at the University of Sydney (1968–74) and then the director of the Baker Medical Research Institute in Melbourne (1975–90). During Paul’s directorship, the Baker became the premier institute in Australia dedicated to cardiovascular research and earned an international reputation for excellence in research on hypertension and atherosclerosis.

He is the author and co-author of some 330 papers, chapters and other published works. He has had a distinguished career, both nationally and internationally.

In 1970 Prof Korner was awarded the R T Hall Prize, the Society’s most prestigious award to a senior investigator and in 1977 he gave the Kempton Maddox Lecture entitled “The circulation in hypertension” at the Melbourne Annual Scientific Meeting.

Paul was an inspirational leader and scientist and fostered the careers of many of the country’s most esteemed scientists and academics. His book on the causes of hypertension is an enduring contribution in the field. In October, he was due to receive the Medal for Outstanding Achievement from the International Society for Hypertension.

He is also admired for his scientific contributions in the fields of physiology, circulatory control and hypertension, as evidenced by numerous national and international awards and his appointment as an Officer of the Order of Australia in 1990 for his services to medicine. Paul was also a Fellow of the Australian Academy of Science.

Even after his retirement, Paul continued to take an active interest in cardiovascular research and mentoring the next generation of cardiovascular scientists. He continued to attend the weekly seminar series at the Victor Chang Cardiac Research Institute, named in his honour, where young scientists within the Institute present the work they are carrying out. Afterwards he would invariably ask the most pertinent questions. Although he would often be tough in his questioning, it was driven by a desire to make good science even better.

A leader in cardiovascular research. Paul was a great scientist, an inspirational mentor and wonderful friend. Paul is survived by his wife Jennifer, children Nicholas, Anthony and Harriet, and six grandchildren.

The Society would like to thank Professors Garry Jennings and Bob Graham who have kindly contributed to this vale.

The Foundation for High Blood Pressure Research is collecting tax deductible donations for a prize to be awarded for excellence in research at meetings of the International Society of Hypertension (c/- Professor S Harrap, Dept Physiology, Melbourne University, for more information email jkelly@unimelb.edu.au)
Named Lecturers

R T Hall Lecturer                  Hossein Ghofrani
Kempson Maddox Lecturer           Peter Macdonald
Basic Science Lecturer            Roland Stocker
Gaston Bauer Lecturer             Gary Nicholls
Cardiovascular Nursing Lecturer   Jim McVeigh

Key Dates

<table>
<thead>
<tr>
<th>Event</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Deadline for receipt of abstracts</td>
<td>07 March 2013</td>
</tr>
<tr>
<td>Registration opens</td>
<td>21 March 2013</td>
</tr>
<tr>
<td>Earlybird registrations close</td>
<td>13 June 2013</td>
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International Faculty:

Robert Byrne  
ISAR Centre, Deutsches Herzzentrum  
Munchen, Munich

David Cohan  
Director of Cardiovascular Research  
Saint Luke’s Mid America Heart Institute

Timothy Henry  
Director of Research  
Minneapolis Heart Institute Foundation

Mark Monaghan  
Consultant Clinical Scientist  
King’s College Hospital

Evelyn Regar  
Interventional Cardiologist  
Erasmus Medical Center
Applications are called for the CSANZ Travelling Fellowships for travel grants to enable investigators to attend the 62nd Annual Scientific Session of the American College of Cardiology to be held in San Francisco from 9-11 March, 2013. 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 AUS$3,000 each.
2. The top ranked candidate will be awarded the CSANZ McCredie/Wilcken Travelling Fellowship.
3. Applicants must be FCSANZ, Associate Members 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 sent to the Honorary Secretary, (CSANZ 145 Macquarie Street, Sydney NSW 2000 AUSTRALIA), or email to info@csanz.edu.au and should 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:

5pm FRIDAY
18 JANUARY, 2013

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 immediately.

* Conditions apply, please contact the Secretariat.

www.worldcardiocongress.org
Applications are invited for an Interventional Fellowship Award, which has been generously provided by CSL Biotherapies. The award is specifically designed to assist a young Member of the Society to undertake training or research in interventional cardiology at an overseas centre.

The award is valued at AU$30,000 and to be used to provide salary support for a research / training position relevant to Interventional Cardiology in an overseas institution.

Applicants should be citizens or permanent residents of Australia or New Zealand and should be eligible for medical registration in Australia or New Zealand. Recipients will currently be undertaking, or have completed within the last 5 years, advanced training in Cardiology recognised by the RACP/CSANZ Subspecialty Training Committee (STC) in Cardiology.

Application information must include:

- Detailed plan of the proposed research and training programme
- Specify if this is a funded or unfunded position
- Track record, eg noting highlights of career to date including examples of grants, awards, invited presentations and clinical leadership
- Research output, eg. publications, book chapters, abstracts presented
- Details of the Supervisor and Host Laboratory/Institution
- Two (2) written references
- Curriculum Vitae

Applications should be submitted to the Honorary Secretary, CSANZ, 145 Macquarie Street, Sydney NSW 2000, Australia or email to info@csanz.edu.au

Closing Date:

5pm Friday 1 February 2013

Cartoon provided by Dr Tau Boga, Welllington Hospital, New Zealand
Forthcoming Meetings

**NORTH AMERICA**

**ACC13**  
9-11 March, 2013  
San Francisco, USA  
www.accscientificsession.cardiosource.org /ACC.aspx

**AHA2013**  
16-20 November, 2013  
Dallas, Texas  
www.scientificsessions.americanheart.org/

**EUROPE**

**ESC Congress 2013**  
31 August—4 September 2013  
Amsterdam, The Netherlands  
www.escardio.org

**ESC Congress 2014**  
30 August—3 September 2014  
Barcelona, Spain  
www.escardio.org

**CSANZ 2013**  
61st Annual Scientific Meeting  
8-11 August, 2013  
Gold Coast, Queensland  
Secretariat:  
The Conference Company  
Phone: 64 9 360 1240  
www.csanz.edu.au

**ASIA PACIFIC**

**CSANZ New Zealand Regional ASM**  
7-8 June, 2013  
Wellington, New Zealand  
www.csanz2013.co.nz

**ANZET13**  
7-8 August, 2013  
Gold Coast, Queensland  
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

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Asian Pacific Society of Cardiology 2013 Congress  
19th Asia Pacific Congress of Cardiology (19th APCC)  
21-24 February 2013 • PEACH, Pattaya, Thailand  

Organized by:  

World Heart Federation

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ON THE PULSE, DECEMBER 2012 | 9