

European Association of Percutaneous Cardiovascular Interventions

PROF. Martine GILARD
France

**Application for the following position in the EAPCI Board 2024-2026:
PRESIDENT-ELECT**

Current position

EAPCI PCR representative
Professor of Cardiology at the University of Brest (France)

Profession

- + Interventionalist working in PCI and TAVI
- Healthcare Professional (Nurse, Radiographer, Technician)
- Other (specify) Specialist in CT angiography

Additional Information

- + Fellow of the ESC
- + EAPCI Member
- + Member of another ESC Association (beyond EAPCI)
If yes, specify: EACVI Member
- Active in an ESC Member Country
If yes, specify your country of work: France
- Member of a National Cardiac Society
If yes, specify: French Society of Cardiology
- Member of an Interventional Working Group
If yes, specify: GACI: interventional working group of the French Society of Cardiology

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University Degrees

1986: Medical Doctor State Diploma.

1986: Diploma of Cardiology

1988: Diploma of Radiology

2007: Professor of Cardiology

2010: University Thesis (PhD)

Other

2002: Fellow of the European Society of Cardiology (ESC).

2007- 2009: President of “Coronary Atheroma and Interventional Cardiology” (GACI) SFC

2009-ongoing: Member of EAPCI

2005-ongoing: Member of the scientific board of EuroPCR

2009-ongoing: Member of the scientific board of HighTech meeting

2009-2016: Stent for life champion in France

2010-2012: Chair of the FRANCE 2 registry

2010-2022: Head of the interventional cardiology service of Brest University Hospital (PCI, endovascular imaging (IVUS, OCT), FFR and QFR, structural cardiac intervention (TAVI, mitral clip, septal closure)

2010-2022: Head of the cardiac imaging service of Brest University Hospital: Cardiac MRI and Cardiac MSCT

2014-ongoing: Co-chair of French National Cardiologists and Radiologists interface

2014-2021: Member of EA (Research Unit) 4324

2016-2018 and 2022-ongoing: Nominating committee of ESC.

2016-ongoing: Chair of PCR seminar

2018-2020: President of French Society of Cardiology (SFC)

2019-2019: President of the French National Professional Council of Cardiology

2019: Member of EACVI of ESC

2020: Member of the Scientific Committee of the French National Health Data Hub

2020-ongoing: Chair of the France TAVI registry

2021-ongoing: Member of the French National Academy of Medicine

2021-ongoing: Member of National Institute of Health and Medical Research (INSERM) n°1304.

2022-ongoing: Co-chair of PCR evaluation efficacy board

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Previous experience in EAPCI, ESC or your National Bodies

Specifically, please indicate if you hold an Executive position (President, Vice President, President Elect) in a National Cardiac Society or in the ESC. If so, please indicate which one as well as the term of this position.

2007- 2009: President of French “Coronary Atheroma and Interventional Cardiology” (GACI) French working group of interventional cardiology.

2018-2020: President of the French National Society of Cardiology (SFC)

2016-2018 and 2022-ongoing: Nominating committee of ESC.

If you have been involved in EAPCI in the past, please specify the position(s) as well as the relevant date(s)

In particular, please indicate if you served in:

- | | |
|---|-----|
| + EAPCI Board 2022-2024 (under E. Barbato’s leadership)? | Yes |
| + EAPCI Board 2020-2022 (under D. Dudek’s leadership)? | Yes |
| + EAPCI Board 2018-2020 (under A. Baumbach’s leadership)? | Yes |
| + EAPCI Board 2016-2018 (under M. Haude’s leadership)? | Yes |

If you answered yes to at least one of these questions, please provide details.

2009-2011: Chair EAPCI Training Committee *under C Di Mario’s leadership*

2011-2014: Co-Chair EAPCI Education & Training Committee *under J Fajadet’s leadership*

Co-Chair EAPCI Editorial Committee

2014-2016: Co-Chair EAPCI Fellowship Committee *under S Windecker’s leadership*

Member of EAPCI Education & Training Committee

Member of EAPCI Women Committee

2016-2018: Chair EAPCI Fellowship Committee *under M Haude’s leadership*

Member of EAPCI Women Committee

Valve for Life Champion for France

2018-2020: Chair EAPCI Scientific Program and Congress Committee *under A Baumbach’s leadership*

2020-2022: EAPCI Executive Board member (PCR representative) *under D Dudek’s leadership*

2022-2024: EAPCI Executive Board member (PCR representative) *under E Barbato’s leadership*

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Website: www.escardio.org/EAPCI - Email contacts: EAPCI@escardio.org

Publications in the field of PCI (most important 10 publications)

- 1) **Gilard M**, Cornily JC, Pennec PY, Joret C, Le Gal G, Mansourati J, Blanc JJ, Boschat J. Accuracy of multislice computed tomography in the preoperative assessment of coronary disease in patients with aortic valve stenosis. *J Am Coll Cardiol*. 2006;47:2020-4.
- 2) **Gilard M**, Eltchaninoff H, lung B, Donzeau-Gouge P, Chevreul K, Fajadet J, Leprince P, Leguerrier A, Lievre M, Prat A, Teiger E, Lefevre T, Himbert D, Tchetché D, Carrié D, Albat B, Cribier A, Rioufol G, Sudre A, Blanchard D, Collet F, Dos Santos P, Meneveau N, Tirouvanziam A, Caussin C, Guyon P, Boschat J, Le Breton H, Collart F, Houel R, Delpine S, Souteyrand G, Favereau X, Ohlmann P, Doisy V, Grollier G, Gommeaux A, Claudel JP, Bourlon F, Bertrand B, Van Belle E, Laskar M; FRANCE 2 Investigators. Registry of transcatheter aortic-valve implantation in high-risk patients. *N Engl J Med*. 2012;366:1705-15.
- 3) **Gilard M**, Fajadet J; Stent for Life Scientific Committee; Belle L, Carrie D, Cottin Y, Ducasse JL, Dujardin JJ, Freysz M, Garot P, Goldstein P, Le Breton H, Lefèvre T, Savary D, Ta TH, Van Belle E. Stent for Life in France. *EuroIntervention*. 2012;8 Suppl P:P77-9.
- 4) **Gilard M**, Barragan P, Noryani AAL, Noor HA, Majwal T, Hovasse T, Castellant P, Schneeberger M, Maillard L, Bressolette E, Wojcik J, Delarche N, Blanchard D, Jouve B, Ormezzano O, Paganelli F, Levy G, Sainsous J, Carrie D, Furber A, Berland J, Darremont O, Le Breton H, Lyuyx-Bore A, Gommeaux A, Cassat C, Kermarrec A, Cazaux P, Druelles P, Dauphin R, Armengaud J, Dupouy P, Champagnac D, Ohlmann P, Endresen K, Benamer H, Kiss RG, Ungi I, Boschat J, Morice MC. 6- versus 24-month dual antiplatelet therapy after implantation of drug-eluting stents in patients nonresistant to aspirin: the randomized, multicenter ITALIC trial. *J Am Coll Cardiol*. 2015;65:777-786.
- 5) **Gilard M**, Schlüter M, Snow TM, Dall'Ara G, Eltchaninoff H, Moat N, Goicolea J, Ussia GP, Kala P, Wenaweser P, Zembala M, Nickenig G, Price S, Alegria Barrero E, lung B, Zamorano P, Schuler G, Corti R, Alfieri O, Prendergast B, Ludman P, Windecker S, Sabate M, Witkowski A, Danenberg H, Schroeder E, Romeo F, Macaya C, Derumeaux G, Laroche C, Pighi M, Serdoz R, Di Mario C. The 2011-2012 pilot European Society of Cardiology Sentinel Registry of Transcatheter Aortic Valve Implantation: 12-month clinical outcomes. *EuroIntervention*. 2016 ;12:79-87
- 6) **Gilard M**, Eltchaninoff H, Donzeau-Gouge P, Chevreul K, Fajadet J, Leprince P, Leguerrier A, Lievre M, Prat A, Teiger E, Lefevre T, Tchetché D, Carrié D, Himbert D, Albat B, Cribier A, Sudre A, Blanchard D, Rioufol G, Collet F, Houel R, Dos Santos P, Meneveau N, Ghostine S, Manigold T, Guyon P, Grisoli D, Le Breton H, Delpine S, Didier R, Favereau X, Souteyrand G, Ohlmann P, Doisy V, Grollier G, Gommeaux A, Claudel JP, Bourlon F, Bertrand B, Laskar M, lung B; FRANCE 2 Investigators. Late Outcomes of Transcatheter Aortic Valve Replacement in high-risk patients: The FRANCE-2 registry. *J Am Coll Cardiol*. 2016;68:1637-1647.
- 7) Dangas GD, Tijssen JGP, Wöhrle J, Søndergaard L, **Gilard M**, Möllmann H, Makkar RR, Herrmann HC, Giustino G, Baldus S, De Backer O, Guimarães AHC, Gullestad L, Kini A, von Lewinski D, Mack M, Moreno R, Schäfer U, Seeger J, Tchétché D, Thomitzek K, Valgimigli M, Vranckx P, Welsh RC, Wildgoose P, Volkl AA, Zazula A, van Amsterdam RGM, Mehran R, Windecker S; GALILEO Investigators. A Controlled Trial of Rivaroxaban after Transcatheter Aortic-Valve Replacement. *N Engl J Med*. 2020;382:120-129.
- 8) Buchanan GL, Ortega R, Chieffo A, Mehran R, **Gilard M**, Morice MC. Why stronger radiation safety measures are essential for the modern workforce. A perspective from EAPCI Women and Women as One. *EuroIntervention*. 2020;16:24-25.
- 9) Byrne RA, Rossello X, Coughlan JJ, Barbato E, Berry C, Chieffo A, Claeys MJ, Dan GA, Dweck MR, Galbraith M, **Gilard M**, Hinterbuchner L, Jankowska EA, Jüni P, Kimura T, Kunadian V, Leosdottir M, Lorusso R, Pedretti RFE, Rigopoulos AG, Rubini Gimenez M, Thiele H, Vranckx P, Wassmann S, Wenger NK, Ibanez B; ESC Scientific Document Group. 2023 ESC Guidelines for the management of acute coronary syndromes. *Eur Heart J*. 2023;44:3720-3826.
- 10) Deharo P, Obadia JF, Guerin P, Cuisset T, Avierinos JF, Habib G, Torras O, Bisson A, Vigny P, Saint Etienne C, Semaan C, Guglieri M, Dumonteil N, Collart F, **Gilard M**, Modine T, Donal E, lung B, Fauchier L. Mitral transcatheter edge to edge repair versus isolated mitral surgery for severe mitral regurgitation: A French nationwide study. *Eur Heart J*. 2024 Jan 19:ehae046.

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What would you like to achieve if you were elected? Please provide your 3 main topics (max 500 words)

I commit to applying the ESC strategic plan 2023-2028 to the EAPCI. I will continue to engage EAPCI on the following 3 main topics:

1) Transforming tomorrow through education today

By ensuring that the EAPCI remains a vector of education in interventional cardiology.

How:

- By placing National Cardiac Societies and Working Groups at the heart of the EAPCI. Our association should be the focal point to exchange on best medical practice, taking into account geographical and cultural specificity.
- By applying adult learning principles to healthcare professionals and patients.
- By innovating in new methods of learning: e-learning, social media, simulation, and by reviewing existing teaching modules to identify gaps and to develop new ones. The EAPCI should also be the driver for encouraging the development of simulation-based learning, digital health and AI.
- By reflecting on our profession to respond to the needs of a changing world. The number of cardiologists is declining in some countries. It is important to define the new frontiers of interventional cardiology, what we can delegate or not.
- By ensuring the best possible usage and preservation of our existing impressive education portfolio: the Fellows' Course, EuroPCR, PCR London Valves, Atlas, PCR education resources, PCR-EAPCI TextBook.

Relevant experience: EAPCI Training and Education Chair, Fellowship Committee, Scientific Programme and Congress Committee, the PCR-EAPCI Textbook: as SFC President and a member of the CNU's cardiology subsection, I incorporated it as the academic reference for the obtention of a diploma in Interventional Cardiology in France.

2) Continue improving equality, diversity and inclusivity

- By representing all health care professionals working in the field of interventional cardiology, but also patients
- By striving for gender, geographic and generational balance in leadership positions, committee members and authors of consensus documents.
- By developing seminars and webinars in local language.

Relevant experience: Presidency of the French National Society of Cardiology (SFC), as well as the French Working Group (GACI), my participation in the EAPCI Women committee

3) Developing Person-centred healthcare

- By emphasizing the patient perspective.
- By considering geographical diversity in collaboration with patient's associations.
- By endorsing and developing a shared-decision making process.
- By developing collaboration with patient associations.
- By inserting PROM and PREM criteria in research.

Relevant experience: Global heart Hub- the alliance of Heart patient organizations-consensus document, French champion of the "Stent for Life" and "Valve for Life" initiatives as well as the improvement in the patient TAVI pathway, under the umbrella of the French ministry

By fostering close collaboration with National Societies and Working Groups, by focusing on education and research, patient-centred healthcare, equality and diversity, I believe that my presidency will make a meaningful and lasting contribution to the EAPCI mission: to reduce the burden of cardiovascular disease through PCI.

If you were elected, how do you envisage to organize yourself to accommodate this very time demanding additional commitment?

Although I am currently active in a number of organisations, such as being a member of the EAPCI Executive Board, the ESC Nominating Committee, the French Academy of Medicine, as well as on the Scientific Council of “Coeur & Recherche” and my PCR activities. My full-time activity in the cathlab ceased in 2022 but I remain a Professor at the University of Brest and active in clinical research in the INSERM Unit 1304. I therefore believe that I will be able to commit the time, energy and passion that a position such as this will require. My whole professional life has been devoted to furthering research, practice and education in the field of cardiology and I fully intend to capitalize on my past experience in such a way that our Association continues going from strength to strength!

