



EAPCI
European Association of
Percutaneous Cardiovascular
Interventions



ESC
European Society
of Cardiology

European Association of Percutaneous Cardiovascular Interventions

Your Name Eric Van Belle
Country : France

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

Current position

Professor of Cardiology - Head of Heart and Lung Institute, University Hospital, Lille, France
Chairman of the EAPCI International Affairs Committee 2022-2024

Profession

- Interventionalist
- Healthcare Professional (Nurse, Radiographer, Technician) working in PCI
- Other (specify)

Additional Information

- Fellow of the ESC
- EAPCI Member
- Member of another ESC Association (beyond EAPCI)
If yes, specify:
- 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: Groupe Atherome et Cardiologie Interventionnelle (GACI)

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EDUCATION ACTIVITY

At the European Level, my education activities include co-chairing (2016-2018) and chairing (2018-2020) the Education and Training Committee (ETC) of the EAPCI. Among other achievements, I have launched, together with Prof Dudek the **new EAPCI certification in Interventional Cardiology (2018)**. **Since its creation more than 300 interventional cardiologists have received EAPCI certification**. I have also coordinated the redaction of the **“EAPCI Core Curriculum for Percutaneous Cardiovascular Intervention (2020)”** and the new **“2024 EAPCI Core Curriculum for Percutaneous Valvular and Structural Heart Disease Interventions”**. Under my direction, the Education and Training Committee of the EAPCI has now become the largest committee of the EAPCI involving > 30 individuals to ensure the representativity of the Interventional Working Groups of all European countries and to Run the EAPCI Certification.

At the national level, it includes the Direction of the French Interventional Cardiology Training Program from 2015 to 2023. The first two years of the program are dedicated to coronary angiography and PCI. As part of my tenure, **I have launched in 2019 a dedicated training program for TAVI and structural disease interventions**.

At Lille University, teaching activities include teaching in the general medical program, in the cardiology (specialty) program as well as in the basic science program (Master).

SCIENTIFIC INTERESTS

Research interests include basics and clinical aspects of the outcome of high-risk population such as diabetics and post-MI patients following PCI, the use of biomarkers and invasive physiology (**FFR, iFR**) for risk prediction and therapeutic stratification at the time of PCI. In that field I have conducted the **R3F, PRIME-FFR** and **DEFINE-REAL** studies.

More recently it included also the optimization of **TAVI**, in particular the use of pre-procedural imaging and biology to understand the role post-procedural aortic regurgitation. I am the principal investigator (PI) of two ongoing multicenter randomized studies dedicated to TAVI patients: **WITAVI (NCT02628509)**, **WITAVI-REAL (NCT03728049)** and **BEST (NCT05454150)** supported by grants from the French Ministry of Health. This scientific activity led to the publication of more than 300 publications in international scientific journals with a total **"H" index of 72**.

CLINICAL ACTIVITY

Clinical activities focus on prevention and treatment of complications of coronary atherosclerosis and heart valve disease. It includes the management of a catheterization laboratory including 3 rooms and performing 4000 catheterization/year and 400 TAVI/year. Personal activity in PCI is 200-250 cases/year for the last 25 years and TAVI is 70-100 cases/ year for the last 10 years.

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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.

Working group of Interventional cardiology of the French Society of Cardiology (GACI)

2024-2025 Chair of the working group of Interventional cardiology of the French Society of Cardiology until December 31, 2025.

2020-2024: Elected member of the board of Interventional cardiology of the French Society of Cardiology

2012-2016: Elected member of the board of Interventional cardiology of the French Society of Cardiology

French Interventional Cardiology Training and Certification Program:

Elected member of the board since 2010

Director of the board 2015-2023

French TAVI and Structural Heart Disease Interventional Cardiology Training and Certification Program

I personally established and launched that national program in 2019.

Director of the program since 2019

EAPCI

2022-2024 Chair of International Affairs Committee EAPCI

2020-2022 Co-Chair of International Affairs Committee EAPCI

2018-2020 Chair of Education, Training and Certification Committee EAPCI

2016-2018 Co-Chair of Education, Training and Certification Committee EAPCI

EAPCI certification in Interventional Cardiology:

I established and launched the EAPCI certification in may 2018 during my chair of the Education, Training and Certification Committee EAPCI.

EAPCI Summit 2023:

Co-organization of the summit in connection with the EACPI leadership and the national interventional working groups.

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Chair of the following EAPCI Task Force and Writing groups:

- EAPCI Core Curriculum for Percutaneous Cardiovascular Interventions (2020): Committee for Education and Training European Association of Percutaneous Cardiovascular Interventions (EAPCI). A branch of the European Society of Cardiology. *EuroIntervention*. 2021 May 17;17(1):23-31. doi: 10.4244/EIJ-D-18-00448. PMID: 32624457; PMCID: PMC9725044.
- 2024 EAPCI Core Curriculum for Percutaneous Valvular and Structural Heart Disease Interventions Task Force. Submitted to *EuroIntervention*
- 3RD Edition of the EAPCI/ESC ATLAS in interventional cardiology (together with Professor Dudek)

Member of the following EAPCI writing groups:

- Applied coronary physiology for planning and guidance of percutaneous coronary interventions. A clinical consensus statement from the European Association of Percutaneous Cardiovascular Interventions (EAPCI) of the European Society of Cardiology. *EuroIntervention*. 2023 Aug 21;19(6):464-481. doi: 10.4244/EIJ-D-23-00194. PMID: 37171503; PMCID: PMC10436072.
- Management of antithrombotic therapy in patients undergoing transcatheter aortic valve implantation: a consensus document of the ESC Working Group on Thrombosis and the European Association of Percutaneous Cardiovascular Interventions (EAPCI), in collaboration with the ESC Council on Valvular Heart Disease. *Eur Heart J*. 2021 Jun 14;42(23):2265-2269.
- The cardiac arrest centre for the treatment of sudden cardiac arrest due to presumed cardiac cause - aims, function and structure: Position paper of the Association for Acute Cardiovascular Care of the European Society of Cardiology (AVCCV), European Association of Percutaneous Coronary Interventions (EAPCI), European Heart Rhythm Association (EHRA), European Resuscitation Council (ERC), European Society for Emergency Medicine (EUSEM) and European Society of Intensive Care Medicine (ESICM). *Eur Heart J Acute Cardiovasc Care*. 2020 Nov;9(4_suppl):S193-S202.

Member of the following ESC writing groups on behalf of EAPCI:

- 2019 ESC Guidelines for the diagnosis and management of acute pulmonary embolism developed in collaboration with the European Respiratory Society (ERS). *Eur Heart J*. 2020 Jan 21;41(4):543-603. doi: 10.1093/eurheartj/ehz405. PMID: 31504429.21;41(4):543-603. doi: 10.1093/eurheartj/ehz405. PMID: 31504429.
- 4th Edition of the ESC ATLAS of cardiology: European Society of Cardiology: cardiovascular disease statistics 2024 (submitted to *Eur Heart J*).

Reviewer of the following ESC documents on behalf of EAPCI:

2018 ESC/EACTS Guidelines on myocardial revascularization. *Eur Heart J*. 2019 Jan 7;40(2):87-165. doi: 10.1093/eurheartj/ehy394. Erratum in: *Eur Heart J*. 2019 Oct 1;40(37):3096. PMID: 30165437.

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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 No
- *EAPCI Board 2020-2022 (under D. Dudek's leadership)?* Yes No
- *EAPCI Board 2018-2020 (under A. Baumbach's leadership)?* Yes No
- *EAPCI Board 2016-2018 (under M. Haude's leadership)?* Yes No

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

- *EAPCI Board 2022-2024 (under E. Barbato's leadership): Chair of the Committee for International Affairs*
- *EAPCI Board 2020-2022 (under D. Dudek's leadership): Co-Chair of the Committee for International Affairs*
- *EAPCI Board 2018-2020 (under M. Haude's leadership): Chair of the Committee for Education and Training*
- *EAPCI Board 2016-2018 (under A. Baumbach's leadership): Co-Chair of the Committee for Education and Training*

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H INDEX Scopus: 72

I have authored **314** peer reviewed publications. Below are my 15 most important publications.

1. Van Belle E, Debry N, Vincent F, Kuchcinski G, Cordonnier C, Rauch A, Robin E, Lassalle F, Pontana F, Delhay C, Schurtz G, JeanPierre E, Rousse N, Casari C, Spillemaecker H, Porouchani S, Pamart T, Denimal T, Neiger X, Verdier B, Puy L, Cosenza A, Juthier F, Richardson M, Bretzner M, Dallongeville J, Labreuche J, Mazighi M, Dupont-Prado A, Staels B, Lenting PJ, Susen S. Cerebral Microbleeds During Transcatheter Aortic Valve Replacement: A Prospective Magnetic Resonance Imaging Cohort. *Circulation*. 2022 Aug 2;146(5):383-397. doi: 10.1161/CIRCULATIONAHA.121.057145. Epub 2022 Jun 20. PMID: 35722876; PMCID: PMC9345525.
2. Collet JP, Van Belle E, Thiele H, Berti S, Lhermusier T, Manigold T, Neumann FJ, Gilard M, Attias D, Beygui F, Cequier A, Alfonso F, Aubry P, Baronnet F, Ederhy S, Kasty ME, Kerneis M, Barthelemy O, Lefèvre T, Leprince P, Redheuil A, Henry P, Portal JJ, Vicaut E, Montalescot G; ATLANTIS Investigators of the ACTION Group. Apixaban vs. standard of care after transcatheter aortic valve implantation: the ATLANTIS trial. *Eur Heart J*. 2022 Aug 1;43(29):2783-2797. doi: 10.1093/eurheartj/ehac242. Erratum in: *Eur Heart J*. 2022 Aug 03;; PMID: 35583186.
3. Van Belle E, Patel M, Davies J. Fractional Flow Reserve-Guided PCI as Compared with Coronary Bypass Surgery. *N Engl J Med*. 2022 May 12;386(19):1863-1864. doi: 10.1056/NEJMc2202491. PMID: 35544399.
4. Van Belle E, Manigold T, Piérache A, Furber A, Debry N, Luycx-Bore A, Bauchart JJ, Nogue O, Huchet F, Bic M, Vinchon F, Sayah S, Fournier A, Decoulx E, Mouhammad U, Clerc J, Manchuelle A, Lazizi T, Chmait A, Jeannetteau J, Hénon P, Bonin M, Dupret-Minet M, Tirouvanziam A, Molcard D, Arabucki F, Py A, Prunier F, Delhay C, Lemesle G, Schurtz G, Cosenza A, Spillemaecker H, Verdier B, Denimal T, Pamart T, Sylla H, Janah D, Aouate D, Porouchani S, Guillez V, Bonnet G, Ternacle J, Labreuche J, Cayla G, Vincent F. Myocardial Infarction incidence during national lockdown in two French provinces unevenly affected by COVID-19 outbreak: An observational study. *Lancet Reg Health Eur*. 2021 Mar;2:100030. doi: 10.1016/j.lanepe.2021.100030. Epub 2021 Jan 13. PMID: 34173627; PMCID: PMC7938895.
5. Vincent F, Ternacle J, Denimal T, Shen M, Redfors B, Delhay C, Simonato M, Debry N, Verdier B, Shahim B, Pamart T, Spillemaecker H, Schurtz G, Pontana F, Thourani VH, Pibarot P, Van Belle E. Transcatheter Aortic Valve Replacement in Bicuspid Aortic Valve Stenosis. *Circulation*. 2021 Mar 9;143(10):1043-1061. doi: 10.1161/CIRCULATIONAHA.120.048048. Epub 2021 Mar 8. PMID: 33683945.
6. Van Belle E, Teles RC, Pyxaras SA, Kalpak O, Johnson TW, Barbash IM, De Luca G, Kostov J, Parma R, *To reduce the burden of cardiovascular disease through Percutaneous Cardiovascular Interventions.*

Vincent F, Brugaletta S, Debry N, Toth GG, Ghazzal Z, Deharo P, Milasinovic D, Kaspar K, Saia F, Mauri Ferre J, Kammler J, Muir DF, O'Connor S, Mehilli J, Thiele H, Weilenmann D, Witt N, Joshi F, Kharbanda RK, Piroth Z, Wojakowski W, Geppert A, Di Gioia G, Pires-Morais G, Petronio AS, Estevez-Loureiro R, Ruzsa Z, Kefer J, Kunadian V, Van Mieghem N, Windecker S, Baumbach A, Haude M, Dudek D. EAPCI Core Curriculum for Percutaneous Cardiovascular Interventions (2020): Committee for Education and Training European Association of Percutaneous Cardiovascular Interventions (EAPCI). A branch of the European Society of Cardiology. *EuroIntervention*. 2021 May 17;17(1):23-31. doi: 10.4244/EIJ-D-18-00448. PMID: 32624457; PMCID: PMC9725044.

7. Van Belle E, Cosenza A, Baptista SB, Vincent F, Henderson J, Santos L, Ramos R, Pouillot C, Calé R, Cuisset T, Jorge E, Teiger E, Machado C, Belle L, Costa M, Barreau D, Oliveira E, Hanssen M, Costa J, Besnard C, Nunes L, Dallongeville J, Sideris G, Bretelle C, Fonseca N, Lhoest N, Guardado J, Silva B, Sousa MJ, Barnay P, Silva JC, Leborgne L, Rodrigues A, Porouchani S, Seca L, Fernandes R, Dupouy P, Raposo L; PRIME-FFR Study Group. Usefulness of Routine Fractional Flow Reserve for Clinical Management of Coronary Artery Disease in Patients With Diabetes. *JAMA Cardiol*. 2020 Mar 1;5(3):272-281. doi: 10.1001/jamacardio.2019.5097. PMID: 31913433; PMCID: PMC6990935.

8. Van Belle E, Vincent F, Labreuche J, Auffret V, Debry N, Lefèvre T, Eltchaninoff H, Manigold T, Gilard M, Verhoye JP, Himbert D, Koning R, Collet JP, Leprince P, Teiger E, Duhamel A, Cosenza A, Schurtz G, Porouchani S, Lattuca B, Robin E, Coisne A, Modine T, Richardson M, Joly P, Rioufol G, Ghostine S, Bar O, Amabile N, Champagnac D, Ohlmann P, Meneveau N, Lhermusier T, Leroux L, Leclercq F, Gandet T, Pinaud F, Cuisset T, Motreff P, Souteyrand G, Lung B, Folliguet T, Commeau P, Cayla G, Bayet G, Darremont O, Spaulding C, Le Breton H, Delhaye C. Balloon-Expandable Versus Self-Expanding Transcatheter Aortic Valve Replacement: A Propensity-Matched Comparison From the FRANCE-TAVI Registry. *Circulation*. 2020 Jan 28;141(4):243-259. doi: 10.1161/CIRCULATIONAHA.119.043785. Epub 2019 Nov 16. PMID: 31736356.

9. Van Belle E, Vincent F, Rauch A, Casari C, Jeanpierre E, Loobuyck V, Rosa M, Delhaye C, Spillemaeker H, Paris C, Debry N, Verdier B, Vincentelli A, Dupont A, Lenting PJ, Susen S. von Willebrand Factor and Management of Heart Valve Disease: JACC Review Topic of the Week. *J Am Coll Cardiol*. 2019 Mar 12;73(9):1078-1088. doi: 10.1016/j.jacc.2018.12.045. PMID: 30846101.

10. Van Belle E, Rauch A, Vincent F, Robin E, Kibler M, Labreuche J, Jeanpierre E, Levade M, Hurt C, Rousse N, Dally JB, Debry N, Dallongeville J, Vincentelli A, Delhaye C, Auffray JL, Juthier F, Schurtz G, Lemesle G, Caspar T, Morel O, Dumonteil N, Duhamel A, Paris C, Dupont-Prado A, Legendre P, Mouquet F, Marchant B, Hermoire S, Corseaux D, Moussa K, Manchuelle A, Bauchart JJ, Loobuyck V, Caron C, Zawadzki C, Leroy F, Bodart JC, Staels B, Goudemand J, Lenting PJ, Susen S. Von Willebrand Factor Multimers during Transcatheter Aortic-Valve Replacement. *N Engl J Med*. 2016 Jul 28;375(4):335-44. doi: 10.1056/NEJMoa1505643. PMID: 27464202.

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

At a time of increased sub-specialization and divergence of practice, my main goal will be to **mobilize EAPCI to reinforce unity and cohesion of our community**, and to engage the entire community in **shaping the future of interventional cardiology altogether**. This task will be conducted with the participation of all committees of the **5 EAPCI pillars**: Research, Education, Congress, Publications, Advocacy and Membership and in strong interactions with **national working groups(NWG)**.

Interventional-cardiology has reached a critical level of development. During the last 10 years, our field has expended rapidly to become a truly “global” medical specialty, managing almost all cardiovascular diseases, from coronary artery disease to heart valve disease and heart failure. In each area the technicity as well as the interactions with other medical specialists have increased dramatically. In this context, it is becoming more difficult for any interventional cardiologist to cover all new sub-specialties and practice is diverging more than before, a trend which will increase in the future. Important divergences of practices exist also among countries.

Interventional cardiologists are very unique **to be both “clinicians” and “interventionalists”, providing an integrated and comprehensive management workflow** to patients from diagnosis, intervention and follow-up. **This is a major strength that should remain the backbone** of our interaction with other cardiovascular specialists (imaging and heart failure specialists, cardiac surgeons, ...) and **of our vision for the future**.

EAPCI is nothing if it does not represent our community in its full diversity (gender, age, geographical distribution, subspecialization, ...). **It is therefore crucial to engage all our colleagues**, including those **in-training** as well as nurse and allied professionals in our association, with concrete actions.

Another important mission is to continue to promote **excellence** in each subspecialty domain while **reducing disparities** among countries.

To achieve the **above goals my 3 main directions of actions will be:**

- Developing **partnership with other European and international societies and working groups**, through a networking approach in which EAPCI is the cornerstone.
 - Reinforce EAPCI presence in NWG congresses.
 - Reinforce production of scientific documents with NWGs.
 - **Reinforce involvement of NWGs in EAPCI activities**
 - **Facilitate membership registration for countries with lower incomes and/or financial restrictions.**
 - Partnership with NWGs to implement combined national/EAPCI certifications.
- **Helping in-training interventionalists (17% of EAPCI members) and young (50% of members are <40 years) to develop their career.** We will also facilitate their engagement in our association:
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- Consolidate EAPCI certification (created by me and Professor Dudek in 2018) through partnering with NWGs.
 - Establish **new dedicated EAPCI Percutaneous Valve Intervention and SHD Certification.**
 - **Create a dedicated 1-year “free trial” membership for interventional cardiologists IN-TRAINING.**
 - **Invite three “in-training EACPI members”** in each EAPCI committee.
 - Develop EAPCI training network.
 - Create dedicated EAPCI **research network for “early career”.**
- **Position EAPCI as the voice** of our community in discussions with other medical partners (clinical and imaging cardiologists and surgical colleagues), both within ESC and outside, with the goal to **defend the vision of our community to improve patient care:**
 - Develop membership to increase political weight.
 - Promote **Eurointervention** as official journal by submitting all our scientific documents.
 - **Create new EAPCI Committee dedicated to Valvular Heart Disease.**
 - **Increased representation in ESC guidelines committee.**
 - Develop scientific partnership with American and Asian NWGs.

I will continue to build partnerships with our official congresses EuroPCR/PCRLV, and our official journal Eurointervention actively promoting sessions, increasing the role of NWGs and supporting young EAPCI members.

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

I am confident to be able to accommodate this very demanding commitment with my clinical work. I believe that I have been successful in this regard as evidenced by my substantial contributions to EAPCI outputs and activities as highlighted in my application.

I have already substantially reduced other administrative activities to ensure that I am able to fully deliver my commitment to EAPCI activities. Further, to make myself even more available for my representative activities, if elected, I will suspend for the next 4 years all my executive and administrative activities at the Lille university hospital. I have already informed my team and the process of designing the replacement person has already been initiated.

I have secured 1.5 full day per week for my activities as president-elect of EAPCI and 2.5 full day per week to my activities as president.

I am confident that through a close collaboration with other EAPCI board members I will be able to successfully fulfil this important commitment.