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„The task of EAPCI is to promote and propel interventional cardiovascular medicine, in step with our members and partners, for the good of our patients!“
Active Participation

Participation is the one ingredient to create a living community. It requires encouraging motivation, mutual recognition, and a transparent path to become involved.

If we want to build for the future we need to focus on our young colleagues, on the increasing number of female colleagues, and, on the national societies and working groups which are currently all not effectively represented in the governance of EAPCI.
Education and Training

PCR London Valves and EuroPCR, the main courses of EAPCI have extended their digital outreach, meeting even better the needs of the participants; The EAPCI-PCR Fellows Course remains successful, but requires a broader opportunity of attendance;

In addition to the PCI core curriculum, the curriculum on interventions in structural heart disease will provide essential standards. Both will require in the coming years meticulous efforts to be tuned in to the needs of the regional communities.

The Webinars are a recent but timely digital initiative which has been further developed with great enthusiasm by the current board. This format has the potential to become a main communication channel and should be expanded.

The fellowship grants have become a great success promoting the career and experience of our young talents, requiring continuous attention to assure financial sustainability.
Research and Publications

The official journal of EAPCI, *EuroIntervention*, and the *PCR/EAPCI Textbook on Interventional Cardiology* are the result of a cooperation between strong partners.

The *Atlas in Interventional Cardiology* should, in the 3rd edition, finally be extended to all ESC Counties to improve data collection on EU interventional cardiology practic. This gives us an armamentum to drive innovation and become strong advocates in health care politics.

EAPCI driven *positioning papers* and *expert consensus documents* have become well accepted and meaningful full guidance in daily practice. This work needs to be continued.

*Investigator-driven clinical research* should be promoted under the umbrella of EAPCI by establishing research grants, facilitating collaborative network, and, supporting collaborations with the EORP.
What are my main 5 goals?

A strengthened impact of the national societies and working groups within EAPCI with a direct exchange on the respective needs and expectations.

A sustainable, transparent path for all, in particular, for female interventional cardiologists and aspiring new talents into the leadership and governance of EAPCI.

A sustainable representation of the above groups in the EAPCI board in order to assure an appropriate, direct and informal exchange.

A stable, long-term collaboration between EAPCI, PCR, patient organizations and other stakeholders in the field beyond our current horizon.

Sustainability within EAPCI leadership by agreeing on strategic goals in education, training, and research which should be inherited from president to president.

**Strengthen the community by supporting active engagement!**