

Elections to EACVI Board 2018-2020

Application for the position:

EACVI President-Elect



Insert your photo here

1. Your Identity	
Title	Professor
Family Name(s)	Flachskampf
First Name(s)	Frank A.
Birth Date	06.04.1957
Institute/Organisation	Uppsala University
Department	Dept. of Medical Sciences
City	Uppsala
Country	Sweden

2. General Curriculum Vitae (300 words max)

Nationality: German and Swedish (born in Lisbon, Portugal).

Married, with three children. One cat.

Medical School at the University of Bonn, Germany

Training in internal medicine and cardiology at RWTH Aachen, Germany

Research and clinical fellowships (in echocardiography and interventional cardiology, respectively) at the Massachusetts General Hospital, Boston, and at the Cleveland Clinic, Cleveland, USA.

1999-2010 senior staff cardiologist and associate professor in cardiology at the University of Erlangen, Germany.

2010 - now full professorship in cardiology/cardiac imaging at Uppsala University, Sweden.



3. Previous experience(s) in the EACVI or ESC or your National Bodies?

**Past speaker of Working Group Cardiac Ultrasound of the
German Society of Cardiology
Fellow of the ESC since 1997
2004-2012 Member of the Education Committee of the ESC
Member of Congress Programme Committee of ESC 2014-16
and 2016-18
1999-2003, 2006-2008 councillor, 2010-2012 treasurer of EAE /
EACVI, 2016-2018 secretary of EACVI**

4. Are you a Board or Nucleus Member of another scientific organisation?

Yes x No

If Yes, please specify:

Nucleus of Working Group Cardiac Ultrasound of
German Society of Cardiology

**5. Publications (please list 10 max)**

Flachskampf FA, Weyman AE, Gillam L, Liu Chun-Ming, Abascal VM, Thomas JD. Aortic regurgitation shortens Doppler pressure half-time in mitral stenosis: theoretical analysis, in vitro modelling, and clinical evidence. J Am Coll Cardiol 1990;16:396-404

Flachskampf FA, Weyman AE, Guerrero JL, Thomas JD. Influence of orifice shape, size, and flow rate on effective valve area: an in vitro study. J Am Coll Cardiol 1990;15:1173-80

Flachskampf FA, Guerrero JL, O'Shea JP, Weyman AE, Thomas JD. Patterns of normal transvalvular regurgitation in mechanical valve prostheses. J Am Coll Cardiol 1991;18:1493-8

Flachskampf FA, Hoffmann R, Verlande M, Ameling W, Hanrath P. Initial experience with a multiplane transesophageal echo-transducer: assessment of diagnostic potential. Eur Heart J 1992;13:1201-6

Flachskampf FA, Weyman AE, Guerrero JL, Thomas JD. Calculation of atrioventricular compliance from the mitral flow profile: analytical and in vitro study. J Am Coll Cardiol 1992;19:998-1004

Voigt JU, Exner B, Schmiedehausen K, Huchzermeyer C, Reulbach U, Nixdorff U, Platsch G, Kuwert T, Daniel WG, Flachskampf FA. Strain Rate Imaging During Dobutamine Stress Echocardiography Provides Objective Evidence of Inducible Ischemia. Circulation 2003; 107:2120-6

Flachskampf FA, von Erffa J, Seligmann C. Reimbursement and the practice of cardiology. J Am Coll Cardiol 2012;59:1561-5

Lauten J, Rost C, Breithardt OA, Seligmann C, Klinghammer L, Daniel WG, Flachskampf FA. Invasive hemodynamic characteristics of low gradient severe aortic stenosis despite preserved ejection fraction. J Am Coll Cardiol 2013; 61:1799-808

Flachskampf FA, Biering-Sørensen T, Solomon SD, Duvernoy O, Bjerner T, Smiseth OA. Cardiac imaging to evaluate left ventricular diastolic function. JACC Cardiovasc Imaging 2015; 8:1071-93





Baron T, Christersson C, Hjorthén G, Hedin EM, Flachskampf FA. Changes in global longitudinal strain and left ventricular ejection fraction during the first year after myocardial infarction: results from a large consecutive cohort. Eur Heart J Cardiovasc Imaging 2017 Nov 13 (Epub)





6. Received Hirsch Index (Year / Index)

Hirsch-Index (1980-2018): 47

7. Received Impact Factor(s) (Year / IF)

total of citations: 27 253

8. Why are you interested in joining the EACVI Board (300 words max)?

- 1) To make EACVI resources and congresses more affordable for the whole membership;**
- 2) to focus EACVI activities on its core competencies: unbiased education, certification, and facilitation of research in each imaging modality;**
- 3) to increase the number of EACVI grants for education and research;**
- 4) to promote via the EACVI judicious use of the cardiac imaging modalities, avoiding both overusage and underutilization by better guidance for cardiologists;**
- 5) for these goals, I bring long-term experience in several healthcare systems with me, as well as in the EACVI and ESC.**