

## **Elections to the Board 2014-2016**

**Application for  
the position:**

**Treasurer**



### **1. Your Identity**

**Title: Professor / Head of Department**

**Family Name(s): Edvardsen**

**First Name(s): Thor**

**Birth Date: 10. 10. 1960**

**Type of address: Business:**

**Institute/Organisation: Oslo University Hospital, Rikshospitalet**

**Department: Dept. of Cardiology**

**Address: Postbox 4950 Nydalen**

**Post Code/Zip: 0424**

**City: Oslo**

**State / Province:**

**Country: Norway**

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### **2. General Curriculum Vitae (300 words max)**

#### **Present positions:**

**Professor in Cardiology, University of Oslo**

**Head, Dept of Cardiology, Oslo University Hospital, Rikshospitalet**

**Chair** Scientific Documentary Committee, EACVI

**Associate Editor**, Scandinavian Cardiovascular Journal

**Editor**, Heart forum (Norwegian)

#### **Awards:**

Ole Storstein's Award 2007. Best cardiology research in Norway

Fellow of European Society of Cardiology (FESC) 2007

Researcher of the month 2011 - South-Eastern Norway Regional Health Authority

#### **Education:**

**MD (Cand. med.)** University of Bergen 1985

**Board certified in Internal Medicine** 1996

**Board certified in Cardiology** 2002

**Ph.D. (Dr. med)** University of Oslo 2002

#### **Science:**

**Center Director**, Center for Cardiological Innovation, 8 years funding by Norwegian Research Council.

Coordinator in Norway. "DOPPLER-CIP" study. Supported by 7<sup>th</sup> FP EU.

Postdoctoral Fellow, Johns Hopkins University Hospital, USA 1999-2000 & 2003-4

#### **Fields of Research: Myocardial Function and Cardiac Imaging**

155 peer reviewed papers in international journals + 12 Norwegian papers

11 book chapters + 4 Books as Editor

51 invited presentations at international meetings last 5 years

#### **Editorial Board Member:**

Journal of the American Society of Echocardiography 2013-2016

European Heart Journal – Cardiovascular Imaging 2014 – 2017

**Referee:** Journal of American College of Cardiology (JACC), European Heart Journal, Circulation, The American Journal of Cardiology, Heart, JACC;

Cardiovascular Imaging, Circulation: Cardiovascular Imaging, Journal of

American Society of Echocardiography, European Heart Journal- Cardiovascular Imaging, Echocardiography, Scandinavian Cardiovascular journal, International Journal of Cardiology.

**Higher Degree Supervision:** 14 PhDs completed and 10 ongoing PhD students.

**Memberships:** European Society of Cardiology (ESC), Norwegian Society of Cardiology, European Association of Cardiovascular Imaging (EACVI), American Heart Association, American Society of Echocardiography.

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

#### **Board member:**

Councillor, European Association of Cardiovascular Imaging 2010-2014

Chair Scientific Documentary Committee, EACVI 2012- 2014

Board member: Norwegian Working Group on Echocardiography 2002-2007

President of the Annual Norwegian meeting of Echocardiography 2002-2007

### **4. Publications (please list 10 max)**

1. Edvardsen T, Urheim S, ....., Smiseth OA: Quantification of Left Ventricular Systolic Function by Tissue Doppler Echocardiography. **Circulation** 2002.
2. Edvardsen T, ....., Lima JA, Smiseth OA: Quantitative Assessment of Intrinsic Regional Myocardial Deformation by Doppler Strain Rate Echocardiography in Humans. **Circulation** 2002.
3. Vartdal T, ....., Ihlen H, Edvardsen T: Early Prediction of Infarct Size by Strain Doppler Echocardiography after Coronary Reperfusion. **J Am Coll Cardiol** 2007.
4. Gjesdal O, ....., Ihlen H, Edvardsen T: Noninvasive Separation of Large, Medium, and Small Myocardial Infarcts in Survivors of Reperfused ST-Elevation Myocardial Infarction. **Circulation: Cardiovasc Imaging** 2008.
5. Haugaa KH, Edvardsen T, ....., Amlie JP: Left ventricular mechanical dispersion by tissue Doppler imaging. **European Heart J** 2009.
6. Edvardsen T: Can modern echocardiographic techniques predict drug induced cardiotoxicity? (*Editorial*) **J Am Coll Cardiol** 2011.
7. Smedsrud MK, Sarvari SI, Haugaa KH, ....., Smiseth O, Edvardsen T: Duration of myocardial systolic lengthening predicts the presence of significant coronary artery disease **J Am Coll Cardiol** 2012
8. Lancellotti P, ..., Edvardsen T, Pierard LA, Badano L, Zamorano JL, On behalf of the European Association of Cardiovascular Imaging: Recommendations for the Assessment of Native Valvular Regurgitation: An Executive Revised Summary from the EACVI. **Eur Heart J - Cardiovasc Imaging** 2013
9. Haugaa KH, ....., Voigt JU, Desmet W, Smiseth OA, Edvardsen T: Strain echocardiography improves risk prediction of ventricular arrhythmias in patients after myocardial infarction. **J Am Coll Cardiol Img** 2013
10. Edvardsen T, Plein S, Saraste A, Pierard LA, Knuuti J, Maurer G, Lancellotti P: The year 2013 in the European Heart Journal – Cardiovascular Imaging. Part I. **Eur Heart J - Cardiovasc Imaging** 2014

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### **5. Received Hirsch Index : Year / Index**

H-index = **31**

Cited 4474 times / average citing pr paper = 30.3

(as pr July 2014)

### **6. Received Impact Factor(s) : Year / IF**

Accumulated impact = 877 points (July 2014)

Average impact pr published PubMed paper = 5.7 points  
155 peer reviewed papers in international journals on PubMed

### **7. Why are you interested in joining the EACVI Board (150 words max)?**

The work in the EACVI Board as a Councilor in 2 periods during 2010-14 has been interesting and fruitful, and I will continue working hard to help EACVI to serve its members. It will also be important to **increase EACVI's position within the ESC.**

I have served as the Chair of the Scientific Documents Committee during the last election period. I have therefore had the opportunity to work for improvements in the quality of all cardiac imaging modalities in Europe through education, training and research.

I will stimulate the ongoing process of collaboration within all non-invasive cardiac imaging techniques in EACVI. Echocardiography is currently the most widespread and useful imaging modality in cardiology. I will also encourage and support the idea that cardiologists involved in all imaging modalities, should join forces and choose the best non-invasive imaging modality or modalities for each patient in each case.