

Elections to the Board 2014-2016

**Application for
the position:**

Councillor



1. Your Identity

Title: Dr (MD, PhD)

Family Name(s): Herbots

First Name(s): Lieven

Birth Date: 24/11/1972

Type of address: Business/Home?

Institute/Organisation: Jessa Hospital, Hasselt, Belgium

Department: Cardiology

Address: Stadsomvaart 11

Post Code/Zip: 3500

City: Hasselt

State / Province: Limburg

Country: Belgium

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2. General Curriculum Vitae (300 words max)

Education.

| | |
|-------------|--|
| 1990 – 1997 | Medical Doctor – KU Leuven, Belgium |
| 1997 – 1999 | Internal Medicine – KU Leuven, Belgium |
| 1999 – 2000 | Internal Medicine Tygerberg Hospital – University Stellenbosch, South-Africa |
| 2000 – 2005 | Cardiology – KU Leuven, Belgium |
| 2000 – 2001 | MSc Medical Imaging – Option Cardiac Imaging – KU Leuven, Belgium |
| 2000 – 2006 | PhD Biomedical Sciences – Cardiac Imaging – KU Leuven, Belgium |
| 2004 – 2006 | MSc Hospital Management – KU Leuven, Belgium |

Positions.

| | |
|----------------|--|
| 2005 – 2007 | Supervisor Cardiology Department UZ Gasthuisberg, KU Leuven, Belgium |
| 2006 – present | Staff Member, Heart Center Hasselt, Jessa Hospital, Hasselt, Belgium |
| 2005 – present | Research Lab Imaging and Cardiovascular Dynamics, KU Leuven, Belgium |
| 2007 – present | Clinic Lecturer University Hasselt, Belgium |

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

- a. Active participation in the last 14 EuroEcho meetings
- b. Participation in EACVI Education Committee under the chair of Prof Bernard Cosyns
- c. Nominee Young Investigators Award EuroEcho, Florence 2005
- d. Reviewer Eur J Echocardiography
- e. Member Belgian Working Group on Non-invasive Cardiac Imaging

4. Publications (please list 10 max)

- 1 Improved regional function after autologous bone marrow-derived stem cell transfer in patients with acute myocardial infarction: a randomized, double-blind strain rate imaging study. Herbots L, D'hooge J, Eroglu E, Thijs D, Ganame J, Claus P, Sutherland G, Van de Werf F, Rademakers F, Janssens S. *Eur Heart J*. 2009 Mar; 30(6): 662-70
2. Quantifying myocardial deformation throughout the cardiac cycle: a comparison of ultrasound strain rate, grey-scale M-mode and magnetic resonance imaging. Herbots L, Maes F, D'hooge J, Claus P, Dymarkowski S, Mertens P, Mortelmans L, Bijnen B, Bogaert J, Rademakers FE, Sutherland GR. *Ultrasound Med Biol*. 2004 May; 30(5): 591-8.
3. Characterizing abnormal regional longitudinal function in arrhythmogenic right ventricular dysplasia. The potential clinical role of ultrasonic myocardial deformation imaging. Herbots L, Kowalski M, Vanhaecke J, Hatle L, Sutherland GR. *Eur J Echocardiogr*. 2003 Jun;4(2):101-7
4. . Prevalence of left ventricular diastolic dysfunction in a general population. Kuznetsova T, Herbots L, López B, Jin Y, Richart T, Thijs L, González A, Herregods MC, Fagard RH, Díez J, Staessen JA. *Circ Heart Fail*. 2009 Mar; 2(2): 105-12
5. Effects of genetic variation in adducin on left ventricular diastolic function as assessed by tissue Doppler imaging in a Flemish population. Kuznetsova T, Citterio L, Herbots L, Carpini SD, Thijs L, Casamassima N, Richart T, Fagard RH, Bianchi G, Staessen JA. *J Hypertens*. 2008 Jun; 26(6): 1229-36.
6. Early and late effects of cardiac resynchronization therapy on force-frequency relation and contractility regulating gene expression in heart failure patients. Mullens W, Bartunek J, Wilson Tang WH, Delrue L, Herbots L, Willems R, De Bruyne B, Goethals M, Verstreken S, Vanderheyden M. *Heart Rhythm*. 2008 Jan; 5(1): 52-9
7. Echocardiographic assessment of patients with heart failure: a practical checklist. De Sutter J, Herbots L, Lancellotti P. *Belgian Working Group of Noninvasive Cardiac Imaging. Acta Cardiol*. 2008 Dec; 63(6): 783-9

5. Received Impact Factor(s) : Year / IF

| | | |
|-------------|---------------------------------------|--------------|
| 2013 | Eur Heart J | 14.09 |
| 2013 | Ultrasound Med Biol | 2.84 |
| 2013 | Eur Heart J Cardiovasc Imaging | 2.39 |
| 2013 | Circ Heart Failure | 6.29 |
| 2013 | J Hypertension | 3.81 |
| 2013 | Heart Rhythm | 4.72 |
| 2012 | Acta Cardiol | 0.61 |

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6. Received Hirsch Index : Year / Index

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

Since its foundation, the EACVI has done a tremendous job in the development of non-invasive cardiac imaging by stimulating education, research and the broad clinical application of non-invasive cardiac imaging techniques.

The combination of continuous innovations and a changed economical reality poses immense challenges upon the cardiologist dealing with cardiovascular disease in a state-of-the-art and a cost-effective manner.

As a marvellous team, the current EACVI board has focused on uniting different associations into the EACVI, on new research projects and on remarkable new approaches to continued training, education and teaching.

With my background in both research and clinical use of non-invasive cardiac imaging, I could aid as an enthusiastic member to the successful accomplishment of the goals of the EACVI.