

Notes on clubs and the forming of group identity

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In Cardiology, as much as in the outside world, we are witness to an explosion in the number of groups, societies, associations, congresses and clubs of all kinds to which people like to belong. From music to design, art to everyday life and current events, today, the creation of another social group, organisation or club appears commonplace. More than a fashion, more than a passing trend, it seems to be a part of our make-up as human beings, our need to belong to some exclusive, defining group. We, who have chosen to live in our “ivory tower” worlds of hospital and university, have made our own associative choice, and yet, nevertheless, we seem to be permeable to these changes and trends that are operative in the global society. Paradoxically, these centrifugal and insulated movements are blossoming at a time when information flows and transfers across walls with unsurpassed ease and speed.

From our inside looking out

When we gaze on that outside world, indeed, without trying to voice any judgement or express any critique pro or con, it is remarkable to see a flat world whose borders are seemingly fluid, crossed all the time by the spread of information and communication, while at the same moment, we witness multiple examples of “repli identitaire”, meaning manifestations of introverted assertions of ones’ identity, clustering around language, cultural differences, socio-economic barriers, or simply interest groups of any kind. On the global scene, one has to admit that only seldomly does this introversion lead to something good, of course with the exception when its objectives are to liberate oppressed communities from any form of discrimination, as in liberation struggles. Otherwise, “repli identitaire” mostly leads to further isolation, lack of dialogue, degradation of the understanding between different communities, separatism, or sometimes even worse, when the other, the stranger is diabolised and made responsible for whatever goes wrong.

Europe can be seen as particularly vulnerable to such movements, since the only melting pot that can possibly consolidate the construction of a greater European Union is the desire of its citizens to work for a better common future - erasing borders, joining forces and wealth - despite the singular forces that keep pulling each constituent down to its original essence, which is precisely the motivation of the centrifugal forces, the fear of loosing identity, the perception of being diluted, or even dissolved in a impersonal

magma. This mechanism has been excellently described by Amin Maalouf in “*Les identités meurtrières*” (English version; “In the Name of Identity: Violence and the Need to Belong”) on just how this can lead to wars and catastrophes of all kinds. The author of this editorial is exquisitely sensitive to these processes: living in Belgium, headquarters to most EU official bodies, at the crossroads of about every culture in the world, yet at the same time split (or threatening to further split) between two or three diverging identities, fortunately not (as yet) deadly.

From the outside looking in

Is this reflection relevant to the world of interventional cardiology? I believe, very much so. Today we live our daily lives in the ivory tower of our hospitals, further divided into our departments that are more like fortresses within the hospital village. Specialities, now subspecialties, each are building their identity against the department, one hospital against the other, one international meeting vs the other, and so on. Interventional medicine is split between disciplines, the word is very appropriate: I only recently became aware of the fact that one “scientific” society has made bold enough to cancel the membership of their members in the event they actively take part in the meeting of the competing society. It is hard to believe that such a policy can be endorsed by responsible, intelligent people in the year 2009! Is this all nonsense, or is there some truth to be found in these movements. What about our discipline, specifically?

Our crowd

We are indeed witnessing a similar fragmentation of efforts and initiatives, be it for research, meetings, and many of our other activities. One fascinating aspect of this is in the creation of “clubs” of all kinds: the European Bifurcation Club, the CTO club, the Club for Women’s Initiatives, the OCT Club, and who knows what else is on the way... Will we soon have the club of the right coronary artery? Or the club of the dominant left circumflex?

In my role as President of the EAPCI, a sort of club in its own right, I am not, by any means condemning the usefulness of these organisations/organisms, but rather trying to understand their mechanism, their original motivations and goals, hoping to clarify how to keep them valid and useful for the community.

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Reflecting on this, we begin with the idea that a club can be simply defined as an association of two or more people united by a common interest or goal. Service organisations or clubs, for example, exist for voluntary or charitable activities; there are clubs devoted to hobbies and sports, social activities clubs, political and religious clubs, and so forth.

So far so good. To be part of a group of like minded individuals, to debate and evolve together on common topics, all this is natural, the very creation of specialty organisations owes something to this natural propensity to come together with people who “speak the same language”. This common purpose, coming out of a challenge or joint experience can be seen as a positive movement using comparative equality to build on that experience towards a future goal.

But, as we have said earlier, there is a point when an invisible line is crossed, where we move into a nether realm where belonging to a group becomes the end in itself. A line that might be categorised as the point where synthetic development ends and a polarisation of attitudes and beliefs takes place, leading to a closing of dialogue. Where the people we can communicate with are all speaking the same, closed language of the group. And whilst we recognise the many positive aspects of “clubbing”, there is also the potential for a negative outcome.

One example from history is the Jacobin Club, which we might remember as the largest and most powerful of the political formations or clubs around the time of the French revolution. Evolving from a group of regional delegates in 1789 and initially moderate in nature, it fast grew in membership achieving both vast influence, and historic notoriety with its implementation and support of the Reign of Terror and condoning associated massacres. Its legacy today is in the use of the term “Jacobin” and “Jacobinism” as pejoratives for certain revolutionary or political activities.

For sure, none of the existing cardiology clubs begin to approach the boundless and extreme nature of the “Terreur”, but we should beware that excessive centrifugal evolution is potentially damaging, even for us, even in a perhaps, more docile fashion.

Keeping the doors open

There is a feeling of camaraderie that cannot be denied, a need for belonging that is part of our species as a whole, which is not in and of itself an unhealthy phenomena, but when it becomes sclerotic, as it sometimes does, when we multiply our organisations, our clubs, to the point that we identify with them more than with solving the problems they were created to discuss, then we are in danger of entering a cul-de-sac. Evidence treated under these conditions is not fully evaluated, creative response to given problems is not received, if heard or understood at all. And this can happen subtly, over time, simply by the multiplication in our professional lives of groups we belong to.

We must be vigilant never to close off informed debate. To remain alert that our organisations that we belong to, formally or informally, continue to encourage an active and lively intercourse. We must not allow ourselves to believe that the only form of communications possible is with other members of the club itself – people like us, people who can understand us – but instead strive always towards a more universal goal in our discussions and experience, returning to

the initial reasons we formed our associations in the first place. In this respect, we can only be delighted that the dialogue with our surgical colleagues has been restored, testified, as well, by the official partnership with EACTS (European Association for CardioThoracic Surgery) that is now actively involved with the preparation of the programme of EuroPCR, the official annual meeting of EAPCI, and several other activities of our Association.

What would this ideal world look like?

I truly believe that there is benefit in gathering motivated people in small interest groups with the common objective of solving difficult problems, inventing new solutions to unmet needs, to serve the role of spurring on the larger, less flexible, less easily movable community.

The example of the European Bifurcation Group is, to some degree, illustrative of that process. Dedicated interventionalists and clinical scientists are committed to advance the field of percutaneous treatment of bifurcation lesions. A broad representation from all European horizons are invited to join and to contribute. Progress is summarised in review articles or positions papers that are communicated to the public at large^{1,2,3}. In this way the dialogue is maintained, the larger community benefits from the acquired expertise and the loop is closed.

However, the tasks and objectives of these groups should be clearly defined, the outcome should serve the larger community, and not solely the members of the elite. These founding rules could imply that there is both a time limit and a scope limit to the enterprise. These clubs should not become a structure in and of themselves, they are serving a given interest, and once satisfied, should either move to something else, possibly with different people, rather than aiming at becoming an entity of its own, inevitably competing with the official structures in terms of manpower, energy and resources. At a time of financial restrictions, sponsors themselves will most likely endorse similar views.

This article should not upset individual initiatives, it is by no means a call for uniform thinking, or the expression of a desire to control minds and behaviours, that would be an illusion in any case. Rather, this is a strong plea for not dissipating talent, energy and resources in a fragmented patchwork that will never reach the heights that can be explored when our forces are bundled.

Together we can truly achieve so much more ...

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