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EuroEcho-Imaging



Congress News

Coming together is a beginning

By Patrizio Lancellotti, EACVI President 2012-2014

This year we are celebrating the 10th anniversary of our imaging community that started out as the European Association of Echocardiography (EAE) and has continued as the European Association of Cardiovascular Imaging (EACVI).

Today, I am thrilled to welcome you to EuroEcho-Imaging 2013, which marks exciting collaborative efforts for our Association. Our meeting promises to be more interactive than ever before with lots of emphasis on echocardiography and other imaging modalities. The meeting is highly patient-centred, and includes comprehensive teaching sessions focusing on the basics of echocardiography. The success of EuroEcho-Imaging reflects the dedication and hard work of members of the Scientific Program Committee and the local hosts. As your President, I express my gratitude to all concerned.

For many, EuroEcho-Imaging provides a great opportunity to reconnect with colleagues, make new acquaintances and network with Cardiovascular Imagers coming from both Europe and the rest of the world. Such collaborations solidify the growth of our community and our congress, with this straightforward principle of networking underlying the very foundation of the EACVI.

Imaging is a pivotal component of modern healthcare and an essential part of many patient journeys. The complementary and combined skills of all stakeholders interested in cardiovascular imaging are vital to sharpen our mission to provide high-quality educational programmes. Team work lies at the very heart of the EACVI. It is undoubtedly through the selfless efforts of our committees and volunteers that our association is moving forward and becoming stronger.

The EACVI also aims to strengthen bridges with National Societies, enhance connections with the international imaging



Professor Patrizio Lancellotti, President of the EACVI (2012-2014), from University of Liège Hospital, Department of Cardiology, Heart Valve Clinic, CHU Sart Tilman, Liège, Belgium

communities, cater for membership needs, and establish large research networks. Over the coming months, the EACVI will continue to face new challenges related to the ever-evolving field of imaging. It gives me great confidence that our association can achieve a very successful future and become ever more influential thanks to you, our members.

On behalf of the EACVI, I do hope you will enjoy the EuroEcho-Imaging meeting.

EACVI Club 35 celebrates its 3rd birthday with a dynamic Conference Track

In the past three years EACVI Club 35, has grown into a vibrant community providing access to high quality training resources for young imaging specialists across Europe. On page 2, Denisa Muraru, Chairperson of the EACVI Club 35 Committee, explains the structure of EACVI Club 35, and explores their many achievements including the development of an online directory of laboratories, new training schemes, and a 'LinkedIn' platform to facilitate networking and direct communication between members. Highlights of the special EACVI Club 35 Conference Track at this year's EuroEcho-Imaging, she says, include exploring the latest developments in heart failure and imaging in interventional cardiology, 'How to sessions', moderated poster sessions for young delegates and the opportunity to be in the audience for the quiz game 'Echo@Jeopardy'.

The wider European picture

Prof. Fausto Pinto, the next President of the ESC, outlines his vision for the society, which involves putting patients first, boosting education and harmonizing the training of cardiologists across Europe. On page 3, Professor Pinto, a world renowned echo cardiovascular researcher, explains how he believes the lessons he first learnt as president of the European Association of Echocardiography will stand him in good stead when he takes the helm at the ESC.

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Meet
Fausto Pinto,
taking a patient centred
approach



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EACVI Club 35: EACVI trail blazes the development of young ESC communities

EACVI Club 35 is celebrating its third birthday at EuroEcho-Imaging 2013 with a really dynamic track targeted at delegates aged 35 years and younger. 'In a really short space of time, EACVI Club 35 has grown into a vibrant community with 960 members who come from 76 countries throughout the world,' says Denisa Muraru, Chairperson of the EACVI Club 35 Committee. 'We're proud that young people now represent 39% of all EACVI members, whereas at first they accounted for just 5%.'

Launched at the EuroEcho 2010 meeting in Copenhagen, EACVI Club 35 had the objective of enhancing the position of young doctors within the echo community. 'The idea was to provide access to high quality education and training resources, opportunities to learn from established experts in cardiovascular imaging, enhance networking opportunities and prepare the next generation of EACVI leaders,' explains Denisa. All of which can be summarised by their motto 'Growing together today, securing excellence tomorrow'. The EAE (then the EACVI), was the first sub-specialty Association of the ESC to create a young group, and has been considered to be the trail blazer of the concept.

EACVI Club 35 members are eligible for a special EACVI membership rate costing just € 35 annually, with benefits including access to online educational resources, full online access to EHJ-Cardiovascular Imaging Journal, and reduced fees for the EuroEcho-Imaging Congress and certification exams. Members also get access to the online educational resources (Webinars, Echo Boxes, basic echo course, and pocket size echo course). 'There's a really rich content which has the flexibility of being accessible from member's workplaces, home PCs or indeed anywhere else in the world,' says Denisa.

Once members reach the grand old age of 36 they transfer to Club Green. 'EACVI Club 35 is an expanding community, but also a dynamic one, in which new members join each year and others are no longer eligible due to age limitations. Such continuous turnover challenges us to keep in the forefront of development with initiatives aimed at attracting new recruits,' says Denisa.

Membership, she stresses, is not just restricted to cardiologists. Anyone under 35 interested in cardiovascular imaging can join, including internal and emergency medicine doctors, radiologists, anaesthesiologists and sonographers.

EACVI Club 35 has developed an efficient structure with 13 young doctors from 13 different countries composing the organizational committee. The EACVI Club 35 Committee Chair is a member of the EACVI Board, and EACVI Club 35 Committee members serve on most of the EACVI Committees, including Education, Research &

Innovation, Scientific Documents, and Web & Communication. EACVI Club 35 members have also contributed to the EACVI guidelines, EAE Textbook of Echocardiography, and to other educational initiatives including Wikiecho, 3D echo box, and teaching courses. 'Such representation ensures the voice of the young community is heard throughout the EACVI,' says Denisa.

The Ambassadors' Scheme has allowed EACVI Club 35 to extend its sphere of influence to individual countries. Altogether there are now 39 ambassadors who provide the main link between the different national young communities and the EACVI Club 35 committee. 'The scheme is central to enlarging our young community and sharing our opportunities with a larger audience. With ambassadors' support, we can organize teaching courses in different countries, and specific sessions for the young at national meetings. It also allows us to work in close collaboration with the National Societies and get our voice heard at national level,' said Denisa. A recent development has been the recruitment of ambassadors outside Europe, including Dr Marcelo Miglioranza from Brazil and Dr Rafael Rascon Sabido from Mexico, with plans afoot to appoint ambassadors in Paraguay, China, and Korea. 'It's really important to extend our global reach because young doctors in training have the same educational needs irrespective of the countries they come from,' says Denisa.

Undoubtedly, one of EACVI Club 35's biggest achievements has been the development of an online directory of laboratories offering research and training opportunities in imaging modalities. 'This initiative encourages and supports young doctors to get experience in other countries,' says Denisa, adding that they are now updating the information to include more centres and all the imaging modalities covered by the EACVI. Continuing their theme of boosting experience, EACVI Club 35 is now finalizing details of a new EACVI project to fund training grants for young doctors wanting to learn imaging modalities in expert European centres. 'Providing such opportunities would broaden the use of advanced imaging technologies, secure solid expertise, and lay down the ground work for future international research collaborations,' says Denisa.

Mindful of its youthful membership, EACVI Club 35 is committed to being up to date with social media. At the 2013 ESC Congress in Amsterdam, EACVI Club 35 launched a 'LinkedIn' platform, to facilitate networking and direct communication among the young. 'As well as hosting topical discussions on cardiac imaging, the platform should allow us to have insights on what's really happening throughout Europe in both education and service provision,' says Denisa.



EACVI Club 35 Committee and Ambassadors at the ESC 2013 Congress in Amsterdam.

What EuroEcho-Imaging has in store for young delegates

Running through out EuroEcho-Imaging 2013 Congress EACVI Club 35 has organized a special track designed for young imaging specialists with 57 separate sessions.

'Recognising that attending a congress like EuroEcho-Imaging for the first time can be overwhelming we've sign posted the sessions we feel provide good overviews of different areas,' says Denisa Muraru, Chairperson of EACVI Club 35 committee. The track, she adds, consists of sessions that have been specially organized by EACVI Club 35 for young delegates, and general sessions, such as teaching courses, identified as being of particular value to people embarking on their careers.

'The Heart in systemic disease,' provides an example of a dedicated EACVI Club 35 session (Thursday 12 December 16:30-18:00. Van Lecture Room). The session explores issues trainee echocardiographers encounter when scanning patients with metabolic, endocrine, storage diseases, and connective tissue diseases. EACVI Club 35 representatives will play a key role in the 'Best in 2013: heart failure and imaging in interventional cardiology', leading the audience through latest developments in the two themes of the congress (13 December 11:00-12:30, Izmir Lecture Room).

Each day during morning and afternoon coffee breaks 'How-to Sessions' provide practical tips (Manisa Lecture Room). The sessions include how to make a scientific poster, give a successful presentation, interpret statistics, design and write a scientific research project, use e-learning and avoid pitfalls in original scientific papers. 'These are areas young people may not be thoroughly exposed to during formal training. We hope such sessions will avoid young doctors having to go through the process of

learning by trial and error,' says Denisa. The sessions, which are run on a first come first served basis, have in past years proved hugely popular. 'Our top tip is to be assured of a seat you need to be early,' says Denisa.

At the Imaging campus, EACVI Club 35 have organized sessions providing beginners with the opportunity to try out transoesophageal echocardiography (TEE) on manikins and 3D computerized simulators. 'It makes it much easier to get to grips with the concept of spatial anatomic relationships' says Denisa, adding that there will also be opportunities for interactive discussions with experts based on real-life case studies. The TEE workshops will be held four times per day on Thursday 12 and Friday 13 September.

New for this year are EACVI Club 35 Moderated Poster Sessions and EACVI Club 35 dedicated poster areas. 'Moderated posters give EACVI Club 35 members the chance to cut their teeth presenting in front of experts in the field and an international audience; while displaying posters all day in the dedicated EACVI Club 35 area provides greater opportunities for senior faculty to come along and interact with young presenters on their research,' says Denisa.

Getting into the spirit of healthy competition Echo@Jeopardy is a quiz that pits the local Turkish host team against an EACVI team and a team from the rest of the world. 'The quiz provides an opportunity to learn and have fun,' says Denisa, adding that for the first time EACVI Club 35 members will be represented on all three teams.

Immediately following, the young community is invited to a EACVI Club 35 cocktail, providing the chance to network and make new friends. Come and join us from 19:00 in the EACVI Members Lounge.

Taking a patient centred approach

Fausto Pinto, who becomes President of the European Society of Cardiology (ESC) in September 2014, plans to introduce the system of accreditation that he first pioneered as President of the European Association of Echocardiography (EAE) into the wider cardiovascular curriculum.

'No one would fly a plane unless it had been certified so why should patients accept to be treated by doctors unless they've the confidence of knowing that they've achieved pre-defined levels of proficiency and undertaken minimum numbers of procedures,' says Pinto, who is Professor of Cardiology at Lisbon University Medical School. Equally Pinto believes that centres themselves need to be accredited so that patients can be reassured by standards of equipment and medical trainees can also have full confidence in their training. 'Such standardization would have additional advantages of helping cardiologists throughout Europe talk the same language and communicate more effectively with each other,' said Pinto.

Echocardiographers have been quick to embrace the potential of accreditation, with many now taking the EACVI exam. 'This is allowing for mobility across borders and for young echocardiographers to get experience of working in other countries which is essential for professional development,' he says. At the ESC electro physiologists, heart failure specialists and acute cardiac care doctors are all looking to put similar accreditation systems in place.

The ESC, adds Pinto, will use the platform of their new offices in Brussels to lobby for the harmonization of training and accreditation systems for cardiologists across Europe.

From the outset Pinto, who graduated in Medicine from the University of Lisbon in 1984, was attracted by cardiology. 'I liked the fact it's a technical discipline, where you can correlate pathology with physiology and that you never stop learning,' he says.

After developing a strong interest in echocardiography, he followed the advice his mentor

Mario Lopez in 1989 to undertake a fellowship at Stanford University, California, working with Richard Popp. Here Pinto used the new technique of intravascular ultrasound (IVUS) to study graft atherosclerosis, which had emerged as a significant cause of morbidity and mortality in cardiac transplant patients, with around 50% of all heart transplant patients estimated to be affected by three years. In order to be able to perform IVUS studies as well as interpret them, Pinto underwent a formal training in interventional cardiology while at Stanford.

He contributed to the Stanford group's development of a classification system of vascular disease severity according to intimal thickness and the degree of the vessel circumference involved – as minimal, mild, moderate and severe. Identification of asymptomatic patients at early stages of disease, said Pinto, was found to be an important strategy for the prevention irreversible detrimental effects on the graft. The work formed the basis of Pinto's PhD, which he completed on his return to Portugal in 1993.

At Lisbon University Medical School Pinto has developed a world renowned programme of echocardiography research, as well as a clinical cardiovascular service. Here a major undertaking has been prospective studies using ultrasound methodologies (such as Speckle Tracking and Tissue Doppler) to explore the baseline characteristics of patients with hypertension and myocardial infarction to predict those at risk of heart failure. 'We're hoping to identify patients who may benefit from treatments that could prevent them from developing more significant left ventricular dysfunction,' he says, adding that both global motion and strain appear to be good markers.

Pinto also played a key role in a European consortium set up to advise on ways to use the then newly developed 3D echocardiography clinically, and also to develop practical models that trainees could use to practice capturing 3D views of the heart.

Foremost, Pinto stresses, he is a cardiologist, and his research has not been restricted to echocardiography. Currently he is also exploring incorporating biological markers into the risk stratification of heart failure patients. 'The more information we have the better we're likely to be able to manage individual patients. It's important to develop a personalized approach taking into account echo and biological biomarkers as well as the patient's genetic profile,' he says.

Other recent endeavours include exploring the mechanisms involved in renal denervation, and investigating whether occlusion of the left ventricular appendage might have any adverse repercussions in terms of left ventricular function remodelling. 'When we do procedures it's really important to understand whether there might be additional complications,' he says.

It was on his return from the US that Pinto first became involved with the ESC, joining the Working Group on Echocardiography Subgroup dedicated to intravascular imaging. Elected Chairperson of the subgroup in 1999, he went on to become Chairperson of the Working group in 2002. 'It was a very exciting period because it coincided with the ESC's decision to create associations,' says Pinto.

He is especially proud that the European Association of Echocardiography (EAE), together with the European Heart Rhythm Association, at the Vienna ESC Congress in 2003 were the first two ESC associations to be created, with Pinto becoming the first President of the EAE. 'The ESC is like one country composed of different states, each with their own boards and activities. While the individual associations have their autonomy, the fact that we come together as the ESC gives us far greater bargaining power. We call it the European miracle,' he says.

In addition to strengthening the accreditation system, during his term as ESC President Pinto hopes to establish a CVD advocacy programme (possibly through greater involvement with patient



Professor Fausto Pinto, President-Elect of the European Society of Cardiology (ESC)

organizations), and expand the ESC eLearning platform. 'We are about to launch a certification system in general cardiology which includes knowledge assessment, the possibility to have local assessors and 360 degree examinations,' he says.

Professor Pinto has especially welcomed the creation of the European Association of Cardiovascular Imaging (EACVI) last year. 'I'm a strong believer that medicine needs to be patient rather than technology centered. I'm not interested in using one technology over another and have always been a supporter of the wider concept of imaging that focuses on selecting techniques that are best for the individual patient,' he says.

The future, he believes, will involve the integration of all the different imaging modalities, and increased use of molecular imaging. 'This should allow us to look at markers of disease processes like inflammation and calcification, and to monitor myocardial regeneration with stem cells,' he says.

Any free time is spent with his five children, who range in age from 26 to five years. 'I practice quality time, trying to provide all of them with the best of me,' he says. Such focus no doubt works well with his Lisbon department, and should stand him in good stead at the ESC when he will have many more young people under his wing.

Janet Fricker



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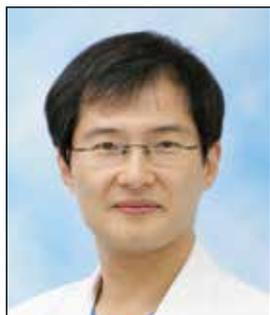
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How does the collaboration with EACVI Sister Societies work?



Geu-Ru Hong,
Member of the Scientific,
Research and Publishing
Committees of the Korean
Society of Echocardiography

'In November this year we celebrated the twentieth anniversary of the founding of the Korean Society of Echocardiography (KSE) which was established in 1993 with the mission to promote and foster knowledge and research in the field of echocardiography. Our goal is to teach advanced cardiovascular imaging techniques to cardiologists, internists and physicians in order to improve patient care. While our main focus remains echocardiography, in recent years we've started to collaborate with colleagues with expertise in other imaging modalities, such as cardiac CT and MRI. We believe such collaborations have the potential to improve the service for patients.

The KSE, which currently has around 1,500 members, is run by a Council and Board of Directors and has 13 committees. The Journal of Cardiovascular Ultrasound, the official journal of the KSE, is published quarterly.

We firmly believe that good international collaborations help us to make advances in echocardiography. Therefore, we became a sister society of EAE/EACVI in 2009. Each year, around 20 to 30 Korean echocardiography clinicians and sonographers attend the EuroEcho-Imaging meetings, and around five to 10 leading European doctors attend the Korean meeting as invited speakers.

We hope to maintain a close relationship with the EACVI by holding regular joint sessions in the annual meetings of each society, develop joint research activities and publishing joint scientific papers. We also want to have exchange programmes for young Korean doctors with European doctors and develop new joint educational initiatives.'



Wael Abdulrahman Al Mahmeed,
Past President and
Board Member of the Emirates
Cardiac Society.

'The Emirates Cardiac Society (ECS) first started to cooperate with the EACVI during the World Congress of Cardiology in April 2012. The ECS, which comes under the umbrella of the Emirates Medical Association, has approximately 300 members and holds its annual meeting in November each year. Within the ECS we've established an imaging working group, which in addition to echocardiography covers CT, MRI and nuclear medicine, and holds regular meetings.

Forging good links with the EACVI as a recognized 'sister society' has helped us with the transfer of knowledge, research collaborations, dissemination of continuous medical education, and provides trainees with research exchange opportunities. Last year, for example, some of our members went to work with Luigi Badano at University Hospital, Udine, Italy, to train in 3D echo. We encourage our young cardiologists in training to take the EACVI echo exams, and our echo lab has applied for EACVI accreditation.

Around 20 of our members attend the EuroEcho meetings and we invite EACVI members to attend our meetings. We have also held two successful Joint Symposiums, including a course in valve disease at the CardioArab conference which highlighted how valvular disease in Gulf regions differs from that in Europe.

We hope to see more ECS members becoming members of the EACVI and plan to continue working together on developing further CME courses within the associations. We're currently putting together a bid to host the next World Echocardiography Summit, a meeting of a consortium of echocardiography societies, in the United Arab Emirates.'

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