



Association for European Paediatric Cardiology

Newsletter – August, 2007

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The 42nd Annual Meeting in Warsaw

The 42nd Annual Meeting of the Association took place in Warsaw from May 16 through 19. It started with a Teaching Course on Grown-Up Congenital Heart Disease. The course was attended by almost 200 participants, and the chosen speakers gave an excellent update on the problems currently faced by cardiologists dealing with these patients. A majority of patients with congenital cardiac disease today is comprised of adolescents and adults, and the number is ever-increasing. The teaching course gave an excellent opportunity to update knowledge on specific problems seen in such adolescents and adults. The main topics were “Transition from adolescent to adult life”, “The aorta in adults with congenital cardiac disease” and “The failing heart in adults with congenital cardiac disease”. Active participation, and lively discussions, proved that this teaching course was really needed. The Council of the Association appreciates the efforts of the Task Force of Grown up Congenital Heart Disease in organising the course.

The Annual meeting itself was also a real success. It started with a memorable opening session. The programme was both hilarious and emotional. Shakeel Qureshi presented the Mannheim Lecture, taking as his topic Paediatric Cardiology in Countries with low incomes. As a surprise for all the members, Anette, the daughter of Edgar Mannheim, and his granddaughter, Linda Lindström, attended the opening ceremony for the first time ever invited by Shakeel. Anette, a professional violinist, played the Meditation from “Thais”, by Massenet, to the attendees. This, together with a hilarious but skilful presentation of the Mocart Group, lifted the spirit of the meeting, and prepared the members for the subsequent scientific sessions. The Council of the Association is truly grateful to Wanda Kawalec, Grazyna Brzezinska-

Rajszyz, Bohdan Maruszewski, and their team for the excellent work they undertook in organising our 42nd Annual Meeting.

The audience of 450 attendees enjoyed high-quality scientific sessions, complemented by “state of the art” lectures. The latter lectures dealt with hybrid approach to congenital cardiac defects, late problems and future perspectives in those with the Fontan circulation, update on cardiomyopathies, lessons focused on catheter ablation of cardiac arrhythmias, and resynchronization and prosynchronization in the treatment of cardiac failure. The major topics discussed during the scientific sessions were daily management of patients with acute problems in paediatric cardiology, the evolution of cardiac imaging, new techniques in assessment of fetal cardiac malformations, intracardiac defibrillator therapy in children and adolescents with congenital cardiac disease, management and outcome of patients with tetralogy of Fallot with pulmonary atresia and major aortopulmonary collaterals, and advances in the understanding of genetics and basic sciences in valvar congenital cardiac disease. The session on successes and failures in the catheterization laboratory was once again interactive and informative. We maintained our tradition of providing a morphologic demonstration, and this was well attended. For the first time, there was a moderated poster walk, which was transmitted to several plasma screens in the exhibition area. In this way, most of the attendees could follow the poster presentations. This year, we received a total of 450 submissions, and accepted almost three-fifths, grading 133 for presentation as abstracts, 40 as moderated posters, and 90 as posters. Due to the high quality this year of the abstracts and posters, we gave four prizes. The first prize for moderated posters went to “Assessment of left ventricular size and function using 3-D-echo-generated volume-time-curves in small infants with

severe left ventricular outflow tract obstruction” by Herberg and colleagues from Germany, and the second prize went to “Long-term outcome of pediatric patients with biopsy-proved myocarditis: comparison with late stage Kawasaki disease” by Yonesaka and associates from Japan. Jim Huhta and his colleagues from the United States of America received the first prize for the poster “Morphologic and functional characteristics of the Cited2 knock-out mouse embryo: A preliminary study”, while Bouzguenda and associates from France were awarded the second prize for “Dilatation of aortic coarctation in infants with severe left ventricular dysfunction: A bridge to surgery”.

Future Annual Meetings

The 43rd Annual Meeting will take place in Venice, and is scheduled for May, 2008. In 2009, we hope that numerous members will participate in the World Congress of Paediatric Cardiology and Cardiac Surgery that is to be held in Cairns, Australia from June 22 through 26. The business meeting of our own Association, therefore, will take place during the Annual Congress of the European Society of Cardiology, to be held in September, 2009. In May, 2010, the Annual Meeting will be organised in Innsbruck, Austria, and in May, 2011, in Granada, Spain. We now invite our members and national societies to submit applications to host the Annual Meetings for 2012, and 2013.

New Council members

In Warsaw, András Szatmári ended his period as President of the Association. He will still continue as past-President for another year. During the Business Meeting, he summarised the progress that has been made by the Council of the Association during his presidency, noting increased membership, the creation of training recommendations in general paediatrics, and making the Association more open to all specialists working in paediatric cardiology and its related fields. Co-operation with international organizations has been more active. He was especially happy with the increased co-operation with our cardiac surgeons. In fact, the 43rd Annual Meeting in Venice next year is a joint venture of our own Association and the Association of European Heart Surgeons. There still remain challenges to be dealt with, such as harmonisation of training in all European countries, and creation of a system for exchange between European centres. These challenges will present a demanding task for the members of future Councils. The members of the existing Council take this opportunity to thank András for

all his work undertaken on their behalf as the President of the Association. András has now been replaced by André Bozio, from Lyon, as President. We all wish him luck in this challenging task!

Giovanni Stellin, the Council member who represented our surgeons, also ended his period on the Council during the Business meeting in Warsaw. He was replaced by Bohdan Maruszewski, a cardiothoracic surgeon from Warsaw. A further retiree from the Council was Heynric Grotenhuis, who has represented our Junior members. He has actively worked to attract new Junior members, and has been a driving force in the organisation of the Teaching Courses designed specifically for the junior fellows. He is replaced by Tara Bharucha, from Southampton, United Kingdom.

It was also necessary to replace our Scientific secretary in Warsaw. In filling this post since 2002, Shakeel Qureshi has been innovative, efficient, good-humoured, and above all, supportive to the Council. Three candidates put themselves forward to replace him, making it necessary to hold a ballot. We received returns from 297, accounting for 41.8% of all who were eligible to vote. This is a powerful demonstration of democracy in our Association. Thank you all for voting! After the count, it emerged that Jo deGiovanni received 151 votes marked with preference 1, accounting for 50.8% of those voting. Jean-Pierre Pfammatter received 74 votes marked with preference 1, making up 24.9%, and José Carlos Neves da Cunha Areias received 72 first preference votes, or 24.4%. As Jo had received over half of the first preference votes, then according to our Constitution, he was formally elected as the new Scientific Secretary.

The Council take this opportunity to thank warmly all the retiring Council members, and to welcome equally warmly the new Council members, who we know will work equally hard for the benefit of the Association!

The Association is looking for a favourable future

A total of 116 members have joined the Association during last year. We are especially pleased that 37 of them are new Junior members. We now have a total of 115 Junior members in the Association. New members will always bring with them new ideas and innovations. The overall membership of the Association now stands at 850 paediatric cardiologists and other specialists working in the field of paediatric cardiology and its related disciplines. As far as we are aware, this makes the Association the largest in the whole world, and what is equally encouraging is that we now represent members from all the continents.

The basic teaching courses comprise a strategic priority of the activities of the Association. Our current favourable economical situation makes it possible to support the working groups in organising new teaching courses, promoting exchanges of trainees. Council looks forward to hearing further from the working groups whenever they find new ways of teaching and training. We will evaluate all suggestions, and then determine if the plans can be economically supported.

The Association is working hard to get recommendations for training in Paediatric Cardiology implemented in all European countries, thus ensuring the highest professional quality in our discipline throughout the continent. Special training courses have now been established for our members, and for their colleagues still in training. We have arranged that the most experienced specialists in the field will provide the teaching for these courses. During last year, we provided four courses. The first was held in Budapest, in March, 2006. Thereafter, teaching courses in echocardiography, morphology and arrhythmias have been held. We now extend an invitation to all our members to ask and encourage their young colleagues in training to attend these exceptional courses. There is more information about the forthcoming courses on the webpage of the association at <http://www.aepc.org>.

We are now preparing to unveil a European examination in Paediatric Cardiology. Such an examination concentrating on echocardiography of congenital cardiac malformations was held, for the very first time, during the Euro-echo meeting, which took place in Prague, in December, 2006. Before the European examination becomes a reality, however, many challenges remain to be overcome. Because of this, Council has established a Committee, consisting of Gerald Tulzer, Luc Mertens, Shakeel Qureshi, and András Szatmári. The first aim of the Committee is to harmonize the recommendations for training in different special areas of paediatric cardiology so that they are congruent with the recommendations for training in general paediatric cardiology.

The Association has also pledged to create funding so as to support members with low income. Luc Mertens, Klaus Schmidt, Eero Jokinen, András Szatmári, and Tara Bharucha are currently working to create rules for provision of travel grants by the end of August, 2007. The proposed rules will then be discussed, and hopefully accepted, during the meeting of Council to be held in September, 2007. In order to promote exchanges of trainees, the Association is also able to support up to 4 Junior members with training grants, each of 2,500 euros, permitting the successful trainee to obtain training

in a centre other than his or her own. All applications will be evaluated and approved by the Council.

Central Office

As the Association is continuously growing, there is an urgent need to obtain help in providing "every day" office services. There are two possibilities. Either we create our own central office, or we buy from external providers of professional services. Until now, we have taken the second option, outsourcing such things as handling of abstracts, mailing and copying services, and web-services to external professionals. We have also provided the Treasurer with a secretary, who has served the Association for several years. More and more services, however, have now become available on-line via the web pages of the Association. This arrangement has been efficient and economically satisfactory. Keeping in mind the lessons of the past, Council has now decided to continue for the time being without a central office, and to continue to use local professional organizers to arrange the congresses for future Annual meetings. Should the number of members increase significantly, and the number and quality of services that the Association offers to its members also increase, then the creation of a central office might again become a matter of interest.

In order to receive Newsletters, and to ensure that "Cardiology in the Young" is delivered to the correct address, it is crucial for members to keep the Secretary-General informed of any changes in address. More and more information, nonetheless, will be delivered via e-mail, and on the web page of the Association. We ask all members, therefore, to ensure that their e-mail address is correct in the database of the Association. Information can easily be checked and corrected via 'Address change' on the webpage of the Association <http://www.aepc.org>. A password and username is needed, however, to use this option. Anybody who does not remember the password and username should not hesitate to contact the Secretary-General. He will provide you with the information needed.

In closing, I hope you all enjoyed a relaxing period of vacation. I again invite all of you to join actively in the endeavours of the working groups of the Association, sharing your proposals, ideas, and wishes with all the members of the Council. And, of course, any of you who might not currently be members of the Association are encouraged to submit applications for membership. As demonstrated by the current Newsletter, we believe that we are continuing to fulfill our role as democratic representatives of all those working in the fields of paediatric cardiology and its related disciplines.