

The South African Heart Association in 2008: President's Report

It has been a great pleasure and privilege to serve the South African Heart Association as its President during 2008. The year has been characterised by a number of activities, including the National Advisory Council meeting in April, interactions with the European Society of Cardiology and the Pan African Society of Cardiology, and regular National Executive Committee telephone conferences to address the day-to-day business of the Association.

We started the year by convening a National Advisory Council meeting in Cape Town on 11 April 2008. The National Advisory Council is made up of members of the National Executive Committee and the Chairpersons of Regional Branches and Special Interest Groups or their deputies. The purpose of the National Advisory Council meeting was to assess the organisational state of the Association, examine the relationship between the structures of the Association (Special Interest Groups, Regional Branches, and the National Executive Committee), and identify priorities for the future.

It was clear from the reports that SA Heart is alive and well, with most of the activities being increasingly carried out by the Regional Branches and the Special Interest Groups. The Bloemfontein branch has emerged from a period of inactivity to host the successful 7th Annual Congress in 2006, and has held several branch meetings subsequently with a growing membership. The Cape Town, Tygerberg, Durban and Pretoria regional branches have expressed a commitment to revive their activities and consider the possibility of merging with near-by groups. The Johannesburg branch must be commended for the focus on the development of senior registrars and fellows in cardiology, through regular presentations and book awards. The issue of rotation of cardiology registrars through private units with highly specialised services (e.g., cardiac electrophysiology) was discussed, and supported in terms of the Health Professions Council of South Africa rule that allows training for up to 3 months in a non-accredited facility, should there be a need to do so.

We can all justifiably take pride in the work of the Special Interest Groups of SA Heart, almost all of which are living up to the fourth objective of the Association 'to promote public welfare by education directed towards the prevention and treatment of cardiovascular disease' in the South African population. The Cardiac Arrhythmia Society of South Africa (CASSA) has not only continued with the popular 'ECG Road Shows', but has helped to establish the lay support group for families affected by arrhythmic disorders, called 'PACE' or 'Prevent Arrhythmic Cardiac Events'. The Heart Failure Group has taken up the cudgel for echocardiography education and training on behalf of the Association. At the American College of Cardiology meeting in Chicago in March, the Paediatric Cardiac Society of South Africa won the bid to host the World Congress of Paediatric Cardiology in Cape Town in 2013. The South African Society of Cardiac Interventions (SASCI) continues to run a number of successful educational programmes for cardiology registrars and other members, including the invasive cardiology training at the Crossroads Institute and the supply of speakers to the South African slot at EuroPCR which was co-sponsored SASCI and SA Heart this year.

The relationship between SA Heart, the Surgical Special Interest Group and the Society of Cardiothoracic Surgeons (SOCTS) was clarified at the National Advisory Council meeting. In essence SOCTS is a separate society composed of thoracic surgeons and cardiac surgeons. The Surgical Special Interest Group consists of cardiac surgeons who are also members of SA Heart Association; this arrangement has been in force since 2006, and provides for our surgical colleagues to play a full role in the life and work of SA Heart.

The Lipid Association of South Africa (LASSA), which is chaired by Professor David Marais, also has dual affiliation to SA Heart and the South African Endocrine and Metabolic Society. The need for greater coordination between the work of LASSA and the Association was identified, especially in relation to the development of guidelines for children and adults with lipid disorders. Finally, the role of the Nuclear Group is being re-considered with a view to the possible formation of a new Cardiac Imaging Special Interest Group. We are inviting volunteers to join Professor Pravin Manga in this task.

SA Heart is an affiliate of the Pan African Society of Cardiology (PASCAR) and the European Society of Cardiology (ESC). The biennial congress of PASCAR will take place in Abuja, Nigeria from 26-30 September 2009. PASCAR is extending the invitation to all members of SA Heart to attend this important continental meeting on cardiovascular disease in Africa. SA Heart EXCO has nominated Professor Johan Brink to become the Vice President for South Africa on the PASCAR EXCO with effect from January 2009. I commend the Organising Committee of this Congress for facilitating the attendance of 15 executive committee and other members of PASCAR from Ghana, Kenya, Malawi, Nigeria, Senegal, and Sudan. This measure has helped to make this congress a truly African event.

I represented SA Heart at the meeting of the ESC Affiliated National Societies and the ESC Board in Munich on 1 September 2008. The meeting was attended by the Presidents of ESC Affiliated Societies from Argentina,

Bangladesh, Caribbean, Hong Kong, India, Indonesia, Iran, Japan, Korea, Malaysia, Mexico, Pakistan, Singapore, Taiwan, Thailand, and South Africa, and chaired by Professors Kim Fox (outgoing ESC President) and Roberto Ferrari (incoming ESC President). One of the major outcomes of the meeting was the invitation to SA Heart to set up a stand in the Membership Zone of the 2009 ESC Congress. I believe that we must embrace this opportunity for SA Heart to engage with the world.

The National Executive Committee of SA Heart has been holding regular telephone conferences to deal with a myriad of issues that are concerned with the day-to-day business of the Association. The Association, together with its Regional Branches and Special Interest Groups, is in a financially sound state. I am happy to report that the organisation of the 2009 and 2010 annual congresses is on track. The Heart Failure Society is making great strides in putting together what promises to be an exciting programme for the meeting in Sun City in October 2009. The 2010 annual congress will be organised by the Johannesburg Regional Branch, under the convenorship of Professor Pravin Manga and Dr Eric Klug. I am grateful to Dr Adriaan Snyders who continues to produce the Newsletter of the Association on a regular basis, and Professor Anton Doubell for raising the standard of the *SA Heart Journal*, the mouth piece of the Association.

There are at least two great challenges that face the Association at present: (1) the viability of the South African Heart Association Registry (SHARE), and (2) the proposed introduction of a National Health Insurance system. The major set back for *SHARE* was the resignation of the database developer and vendor, Mr Tony Scott of Versacom company. This happened in the middle of an upgrade of the software programme, leaving the Association with no product to roll out to new sites. We believe that we are constitutionally bound to continue with the effort to establish the registry, in order 'to take an active role in establishing and maintaining standards for quality cardiovascular health care delivery' (the fifth objective of SA Heart). The National Executive Committee has appointed a new Chairman of the SHARE Working Group, Dr Andrew Thornton, and has secured the services of two vendors (eMD and ACC) for the piloting of their systems for 6 months, after which a final decision will be taken on the most appropriate vehicle for our needs. This venture is being conducted at limited cost to the Association. This meeting provides an opportunity to consult the broad membership on this matter, as was discussed at the last Annual General Meeting.

Finally, the national landscape in healthcare is changing rapidly. We welcome the appointment of the new Health Minister (Ms Barbara Hogan) and her deputy (Dr Molefe Sefularo), and look forward to the development of a consultative relationship between the new leadership at the ministry and professional societies such as ours. The proposal for the National Health Insurance is both an opportunity and a threat to the interests of the members of SA Heart and society at large. It is for this reason that a special time has been allocated to this important policy matter, and I am confident that we will provide input that will be in the best interests of our patients and country. I thank you.

BONGANI M MAYOSI

PRESIDENT: SOUTH AFRICAN HEART ASSOCIATION

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Meeting of the SA Heart National Advisory Council, Cape Town, 11 April 2008

Back from left: T Mabin (SASCI), A Mitha (KZN Branch), C Hugo Hamman (PCSSA), K Sliwa-Hähnle (HeFSSA & Johannesburg Branch) N van der Merwe (Bloemfontein Branch), H Henderson (LASSSA), M Mpe (Pretoria Branch), J Brink (Cape Town Branch)
Front from left: A Doubell (Tygerberg Branch and Editor SA Heart Journal), T Mathivha (Chair Education Committee), M Sussman (Vice President), B Mayosi (President), L Steingo (Immediate Past President), R Jardine (Treasurer), A Stanley (Secretary & Chair Private Practice Committee), A Dalby (Chair Ethics & Guideline Committee) (absent: P Manga, Chair Fulltime Salaried Committee)