Annual reports submitted for the 2010 Annual General Meeting of the South African Heart Association

President’s Report

The past year has seen important developments in our association’s earmarked priorities. In this, our eleventh year, I thought it important to target 3 areas in our professional environment – the SHARE registry, with which we have had some success, the issue of specialist training, in this area I have had to accept that the obstacles are beyond our influence, and finally the NHI. Another major issue which has been necessary to deal with is the relationship with SAMA, the PPC and the newly formed SAPPF. I will ask Anthony Stanley to address this, as he has been intimately involved with the entire process, and is the best person to do so. I would like to take this opportunity to thank Anthony for his tireless efforts in keeping us involved in this debacle. The recent success in the court case brings hope of improved relations with the DOH, and resolution of the pricing impasse which has existed for some years. The final issue I would like to bring to your attention is that of Solal Technologies.

Before I discuss these issues in greater detail, I remind you all that soon after our last AGM we were met with the shocking news of Prof Tshimbi Mathiva’s sudden and unexpected death. Tshimbi had been a loyal servant to this Association, serving on the EXCO for many years, and although she had resigned from EXCO, she had undertaken to assist us in our efforts to get our voice heard by the Health Ministry regarding the NHI, and in other areas. She was always very supportive of me when I was first appointed to EXCO, and I remember this with great appreciation. She is sorely missed.

The next tragedy to hit our community, and in this instance the entire health care community, was the death of Deputy Health Minister Dr. Molefi Sefularo. Prof Bongani Mayosi had arranged for us to meet with the Deputy Minister to try and get our voice heard in the planning phase of the NHI. There is no specialist representation currently in the NHI planning, and we were hopeful of getting a sympathetic ear. Dr Sefularo was, I am sure you all recall, killed in a motor vehicle accident in early May. His reputation, from the sources I spoke to was exemplary, and I am sure the Ministry, and the country as a whole is much poorer as a result of his untimely death.

I will now deal with the SHARE registry. I think it important to remind members of the history, and inform you of the developments and current status. It is relevant to the discussion that at all times when this topic has been discussed there is almost unanimous support for a database by our members. It is the cost and difficulty convincing people to enroll patients that have been the bug bear of this and many other registries. It is also important to understand that developing a useful registry has taken other societies and associations many years. It has also been a commonly heard opinion that if we have data we are better able to “defend” ourselves from regulatory bodies dictating to us what data we must collect, and we will be in a better position to inform the relevant authorities of our true numbers, cost and outcomes. Of greater importance, we would know our true numbers and outcomes, and be better able to improve patient care. Thus we at EXCO consider the registry a very important tool for the future of our specialty in SA.

It has, however, been dogged by problems, and it was, in my view, make or break time. I set the two targets – 1 - it had to be “working” – ie. The software had to be functional, and 2 - it could not drain SA Heart financially. Ronnie Jardine has kept warning that the registry was going to bankrupt our association within a year.

I think it is safe to say that last year Andrew Thornton and Elizabeth Schaalms showed that finally we had a program that worked. It was however not yet ready for prime time. We had no saleable data, and thus the finance was going to scuttle the entire program. I targeted this area, and with Andrew and Elizabeth, and more recently aided by George Nel, we met the hospital groups and Discovery Health. Netcare and Discovery were, and remain, very positive, and have committed financial support. Mediclinic are giving positive feedback. Life Health are undergoing major changes and would not commit.

With our recent engagement with George Nel who is helping manage the business side of the registry I think it is safe to say we are in the best position regarding the SHARE registry we have ever been since we adopted it from SASCI. I anticipate that SHARE will no longer be a financial drain on SA Heart in the coming year, and from next year will result in some positive cash flow to SA Heart. This is an area which will have to be continually developed, and I believe it remains critically important, will provide us all with important information, and help improve patient care and funding. Finally we in South Africa will not have to guess how many procedures are being done, and we will hopefully be able to hold our heads high and show we are indeed providing our patients with quality treatment.

I am certain many of you will have seen the advertisements in the lay press regarding some of the Solal products. The claim which was brought to EXCO’s attention and we found unacceptable and potentially injurious to the public – and this is one of SA Heart’s roles – public education - was that statin therapy
was “more toxic than your doctor lets on”, and that it would be preferable to take alternative treatment. We deliberated this at EXCO and discussion revolved around whether we should react and via what channels. We finally drafted a letter to HPCSA and the MCC and asked them to investigate. We await their response. For those members who would like to see this correspondence in detail, please contact either Erika or myself and we can send you copies of the correspondence.

Other issues which should be brought to your attention are the creation of the new imaging SIG. Last year there were issues with the initial proposal, and some discussion around whether it should be an ECHO or imaging SIG. I am delighted to inform you that under guidance of Rafique Essop and his committee this Imaging SIG is now a reality, and I wish them all the best for the future. I see this as a very important educational body, and would like to take this opportunity to congratulate Prof Essop on the magnificent meeting he and Dr Peters organized a recently at the Sandton Convention Centre.

Finally I welcome the new members of EXCO – Dr Adriaan Snyders is to be president elect, Dr Eric Klug is the new Vice-President, and Dr David Jankelow is the new secretary. Thanks to Anthony Stanley for his service to SA Heart in this position for the past many years. It is also time to bid farewell to Prof Mayosi from the EXCO. His insightful contributions will be missed. Bongani thanks for your leadership over the past 3 years. I hope you will still be available for consultations in the future.

There is no doubt 2010 will be best remembered in South Africa for the FIFA soccer world cup. What a wonderful success that was. It must surely have gone a long way to dispel doubts about our country’s ability to perform on the international stage. Certainly our problems have not evaporated, and need real attention from the authorities, so whilst we bask in the glory of the World Cup, I hope our Association will continue to grow in strength over the next year, and contribute meaningfully to the cardiac health of our population.

Martin Sussman