
Most of you probably attended the AGM as you should have and, as such, the minute will not be published here again. We wish our new EXCO all the best for 2007 – the environment in which we practise needs modification and we have to adapt or die – managing an industry in this environment is not easy. Exciting news is our involvement with PASCA and the Golf Tournament at Sun City. The news from SASCI and CASSA will be supplemented during the year as necessary.

ADRIAAN SNYDERS (asnydres@mweb.co.za)

REPORT BACK FROM MEETING WITH SAMA RE FEES AND NHRPL

At a meeting of the joint PPC the following issues were discussed, and I thought it would be helpful to pass this on to members.

As you all know, the legality of the NRPL process is unsound and, therefore, a NRPL will not be published until regulations have been promulgated by the DOH. In the meantime, no benchmark exists. It must be remembered that the NRPL is a benchmark and not a recommended list of fees. It is recommended that members charge a fee that they feel their services are worth, remembering that, if it exceeds the HPCSA upper limit, they must inform their patients in writing and presumably get the patient’s agreement prior to billing them.

To this end, SAMA is publishing a Doctor’s Guide to billing, which will contain the descriptors and the units and a column for own fees (plus COID fees). An electronic version will be made available. Practitioners will then be able to enter their own unit value and the fees they will get will then be automatically filled into the fees column. It should be based on what the practitioner feels his practice costs are and what profit he/she feels is fair. Bear in mind that the fee should be acceptable to the funder to prevent payment being made directly to the patient. SAMA has published a policy on the charging and payment fees for reference.

This should be explained to patients, and it probably will be better that they pay you directly for office visits and procedures. Hospital fees, being higher, will probably be submitted to the funder. The funders will publish a list of the benefits (obliged to do this by law) of their different plans, allowing the practitioner to pitch their fee for that particular funder to pay directly to the practitioner.

All in all pretty confusing but, once the regulations are published, the practice cost studies will then be of critical importance in practitioners getting a fair fee. Thank you to all of you who contributed to the practice cost studies. The results are available on the CMS website.

Good luck…

ANTHONY STANLEY
# SOUTH AFRICAN HEART ASSOCIATION EXECUTIVE COMMITTEE 2006/07

<table>
<thead>
<tr>
<th>NAME</th>
<th>ADDRESS</th>
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<tbody>
<tr>
<td>Dr L. Steingo, President</td>
<td>P.O. Box 784496 Sandton 2146</td>
<td>011 – 883 3460</td>
<td>011 – 883 3257</td>
<td><a href="mailto:lensteingo@telkomsa.net">lensteingo@telkomsa.net</a></td>
</tr>
<tr>
<td>Prof B. Mayosi, President Elect</td>
<td>The Cardiac Clinic E25 Groote Schuur Hospital Observatory 7925</td>
<td>021 – 404 6084</td>
<td>021 – 448 7062</td>
<td><a href="mailto:bmayosi@uctgsh1.uct.ac.za">bmayosi@uctgsh1.uct.ac.za</a></td>
</tr>
<tr>
<td>Dr M. Sussman, Vice President</td>
<td>P.O. Box 861 Houghton 2041</td>
<td>011 – 726 3125</td>
<td>011 – 726 3126</td>
<td><a href="mailto:martin@sussman.co.za">martin@sussman.co.za</a></td>
</tr>
<tr>
<td>Dr R. Jardine, Treasurer</td>
<td>P.O. Box 99 Benoni 1500</td>
<td>011 – 425 2939</td>
<td>011 – 425 2964</td>
<td><a href="mailto:rjardine@viamediswitch.co.za">rjardine@viamediswitch.co.za</a></td>
</tr>
<tr>
<td>Dr A. Stanley, Secretary &amp; Chair: Private Practice Committee</td>
<td>P O Box 67864 Bryanston 2021</td>
<td>011 – 234 3155</td>
<td>011 – 234 3157</td>
<td><a href="mailto:anthys@netactive.co.za">anthys@netactive.co.za</a></td>
</tr>
<tr>
<td>Prof P. Manga, Chair: Full time Salaried Practice Committee</td>
<td>P.O. Box 3045 Houghton 2041</td>
<td>011 – 488 3611</td>
<td>011 – 642 9041</td>
<td><a href="mailto:mangap@medicine.wits.ac.za">mangap@medicine.wits.ac.za</a></td>
</tr>
<tr>
<td>Prof T. Mathivha, Chair: Education Committee</td>
<td>University of Pretoria Faculty of Health Sciences/ Dept Cardiology P.O. Box 667 Pretoria 0001</td>
<td>012 – 354 2277</td>
<td>012 – 329 1327</td>
<td><a href="mailto:tshimbi.mathivha@up.ac.za">tshimbi.mathivha@up.ac.za</a></td>
</tr>
<tr>
<td>Dr A. Dalby, Chair: Ethics &amp; Guidelines Committee</td>
<td>P O Box 91 170 Auckland Park 2006</td>
<td>011 – 726 7083</td>
<td>011 – 726 6444</td>
<td><a href="mailto:ajd@hot.co.za">ajd@hot.co.za</a></td>
</tr>
<tr>
<td>Prof A. Doubell, Editor: SA Heart Journal</td>
<td>Dept of Cardiology 8th Floor Tygerberg Hospital Green Ave Tygerberg 7505</td>
<td>021 – 938 4400</td>
<td>021 – 938 4410</td>
<td><a href="mailto:afd@sun.ac.za">afd@sun.ac.za</a></td>
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<td><a href="mailto:erika@saheart.org">erika@saheart.org</a></td>
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CASSA NEWSLETTER 1, 2007.
DR ANDREW THORNTON – NEWSLETTER EDITOR

At the AGM of CASSA it was decided that the newsletter would follow the lines of that of other special interest groups in being included in the SA Heart Journal, as well as being more generally informative rather than educational. The website, which is currently under construction, will provide a more interactive and more frequently updated source of educational material than the newsletter ever could. The proliferation of excellent educational websites, especially those in the field of EP means that educational newsletters are less needed than in the past. As soon as the website is up and running again we will let you know.

The redesigned website, as well as what have been termed the CASSA Road Shows, are central to what CASSA will be doing in the next year. The Road Shows have been held in both the “South” and the “North” of the country with varying attendances, and are aimed at educating those who are interested in learning more about ECG interpretation. An interactive program has been decided upon to cover a broad range of ECG abnormalities, not just in the arrhythmia field, and use has been made of the ECG library of Prof Rob Scott-Millar, which will also be available on the website. The use of a digivote system requiring audience input allows for assessment of the level of the group, as well as ongoing input which will allow for some modification of the program as necessary. Tentative dates have been put together to hold approximately 5 meetings each in the North and South, with KwaZulu-Natal having some input through Prof A Okreglicki’s contact with Inkosi Albert Luthuli Central Hospital. A pamphlet detailing times, dates and venues is planned and these will also be advertised in widely distributed media. An attempt will be made to arrange these meetings in association with local interest groups and, should this year’s meetings not cover your area, then please let CASSA know, so that you can be included in further meetings in the future.

Training and accreditation are subjects being discussed worldwide by special interest groups and national associations, and South African groups are being forced to follow suit, partly at the request of medical aid schemes. International groupings have recognized that with implantation of more devices, including ICDs and cardiac resynchronisation pacemakers, there are insufficient electrophysiologists to meet this need. There has been some acceptance of the need for advanced training in this regard to non-electrophysiologists and this is being looked into by CASSA, particularly in the implantation of CRT devices. Most groups have recognized the need for some short but intensive training followed by a mentorship program, and this is presently being discussed. In addition to the device field, there has been a need to develop an accreditation system for invasive electrophysiology. The lack of a formal training plan for electrophysiology in South Africa has clouded the issue somewhat but, because guidelines are available from other international bodies, an inclusive accreditation process has been agreed upon to allow for CASSA accreditation. The aim is not be exclusive but inclusive, and to document the amount of formal training as well as experience that a particular individual has across the field of electrophysiology and then to take a decision on whether this is deemed sufficient. CASSA is increasingly being approached as to whether a particular individual has the expertise to do a particular procedure and both device training and electrophysiology accreditation will make answering these requests easier. It is not the aim of CASSA to say that a particular individual is not adequately trained, but to say that he has met predefined criteria. In a similar vein, the Cathlab registry is being started, and clearly registries pertaining to electrophysiological and device procedures will become increasingly important. Also important and an ongoing and very slow process is discussion with medical funders concerning appropriate reimbursement for these procedures, which often do not have codes or are inadequately coded. The accreditation process is open to all and, should you wish to apply, then please get hold of CASSA in this regard. As training and mentorship programs are agreed upon, we will keep SAHA members informed of this. Clearly a strong and diverse CASSA membership is important and we would urge all interested parties who are not members to join.

26 November, 2006
Dear Colleague

Re Invitation to Express Interest –
Inaugural International Cardiology
‘Ryder Cup’ Format Golf Tournament between SA and European Cardiologists, 19 & 20 November 2007,
Lost City Golf Course - Sun City

It is my pleasure to invite you to consider submitting your name as a potential participant in this “once-in-a-life-time” golf tournament. We require competitive golfers who understand the competitive nature of the tournament, but are also prepared to have some fun. Once we know how many golfers are interested, a SA team will be chosen. Selection is limited to doctors only.

The Europeans are very serious about their golf and play against the USA on a biennial basis. They have challenged South Africa and already have 14 players committed to the event, as well as attending the congress.

The Provisional Program is as follows: two rounds (36 holes) of golf on both 19 & 20 November 2007 (two days prior to next year’s SA Heart Congress at Sun City). The four rounds will be based on a Ryder Cup format, with 12 team members from South Africa and Europe respectively. The morning round will be foursomes and the afternoon better-ball. Note that the Lost City course is “carts only” so we will manage physically!!

We are considering inviting David Frost as our manager/coach, which would add flavor to the event.

All costs (i.e. three nights’ accommodation as well as four rounds of golf) will be for each team members’ own account (costs to be confirmed) and, therefore, we invite only “serious” golfers. You will be asked to pay a deposit to guarantee your place in the team.

The normal “sponsored” SA Heart Association Congress Golf Day will be hosted and is scheduled to be held on Saturday 24 November 2007 after the conclusion of the SA Heart Congress, which will give all delegates the opportunity to enjoy a social game of golf with colleagues.

I look forward to hearing from you by return mail should you be interested in playing in the Inaugural International Cardiology Ryder Cup Golf Tournament 2007.

Kind regards
GRAHAM CASSEL
082 410 3931
grahamcassel@netactive.co.za
January 2007

Dear SASCI member, I would like to extend my best wishes to you and your love ones for 2007!

The 4th SASCI Annual General Meeting (AGM) was held during the SA Heart Congress in Somerset West. I would like to thank those members who made the effort to attend and contributed to this very important meeting. Two new industry representatives were accepted to the Executive Committee (Craig Goodburn, Medtronic and Glenda Weidemann, Paragmed), welcome on board. I would like to thank the outgoing representatives Albert Denoon (Baroque Medical) and Heather Henry (Cordis) for their active and valuable contribution during the past two years. Clive Corbett (Treasurer) reflected on the fact that SASCI, in spite of a number of major academic programs, succeeded in increasing our cash-on-hand situation, which bodes well for achievement of our objectives in 2007 and beyond. Two important issues raised and discussed at the AGM were ownership / operation of Multi Slice CT Scanners and duration of reimbursement for Plavix. The Exco will revert to the members as soon as more definitive information / action are taken.

During the SA Heart Congress 2006, SASCI hosted a well attended Interventional Cardiology Satellite Session. The Session included live cases by satellite link-up from Vergelegen Hospital. The International Faculty (Drs E Garcia, McFadden, T Collins and K Koenig) was supported by a local expert panel and operators (Drs A Horak, T Mabin, F Hellig, C Corbett, H Pribut and M Abelson). Insightful “Tips and Tricks” and Hot Topic presentations were presented by J McKibbin, F Hellig and G Cassel. I would like to extend a thank you to the faculty, but need to single out the organising committee consisting of Adie Horak, Clive Corbett and Mpiko Ntsekhe. Well done gentlemen!!

Please take note of the following very important activities for 2007 and contact a SASCI Exco representative or myself if you would like to contribute.

- Fellows Workshop in Pretoria, Unitas Hospital (23 February 2007) [Kobus Badenhorst]
- PCR 2007, 2-hour SASCI educational session [Farrel Hellig]
- A Heart Congress 2007, SASCI with the Surgeons are the main bodies responsible for arrangements supported by the Pediatricians and HefSSA [Tom Mabin, Robbie Kleinloog]
- Boston Scientific RC Fraser International Fellowship in Cardiovascular Intervention [Adie Horak]
- Regional Case Presentations and meetings (Cordis Breakfast Club) initiative.

SASCI will endeavor to keep you abreast of local training courses available to our members. The Crossroads Institute, which was established last year in South Africa, submitted the following.

The Crossroads Institute provides training and education focused on cardiac and vascular therapies to help healthcare professionals advance the standard of healthcare. Delegates receive in-depth training on all aspects of a topic, with the latest theoretical updates and practical skills training. The Crossroads Institute offers the following courses for the first half of 2007:

2 March 2007
Renal Artery Stenting under the guidance of Dr A Cremonesi (Italy). Local co-presenters: Dr P Matley, Dr C Corbett and Dr G Bihl (Cape Town). Information will be shared on indications for RAS from various disciplines, including a nephrologist’s viewpoint. Delegates will also participate in a Carotid Artery Stenting course, which focuses on hands-on workshops advocating step-by-step techniques and complication prevention.

11 - 12 May 2007
Dr J Fajadet (France) will lead discussions on Complex Lesions: Risk Assessment and Management. Local co-presenters: Dr G Cassel and Prof D Marx. Delegates will discuss treatment options and apply these techniques in hands-on Virtual Reality training.

1 - 2 June 2007
SFA Discussion Forum: To Stent or Not To Stent. Presenters are: Dr P Matley and Dr L Levian. Various topics will be taught through interactive sessions and the review of scientific publications, and evidence-based medical discussions by various faculty members is encouraged.

For further information, please call Barbara-Anne Ryan on 011 770 4700 or 082 376 0633.

George Nel at the SASCI Office is available to assist you with any queries related to information contained this Newsletter. Please feel free to contact him on 083 458 5954 (cell phone), 086 675 0805 (fax) or george.nel@lantic.net

TOM MABIN
SASCI Chairman

South African Society of Cardiovascular Intervention

Tom Mabin
SASCI Chairman
## TRAVEL SCHOLARSHIPS OF THE SOUTH AFRICAN HEART ASSOCIATION

This scholarship is available to all its members and associate members. It is primarily intended to assist junior colleagues to ensure continued participation in local or international scientific meetings or workshops.

### REQUIREMENTS

- Applicants must be fully paid-up members/associate members in good standing for at least two years
- Applications must include
  - full details of the meeting/workshop
  - an abbreviated CV of the applicant
  - a breakdown of the expected expenses
- Applications must reach the Association a minimum of 3 months before the event to be attended

### RECOMMENDATIONS

- Acceptance of an abstract at the scientific meeting to be attended
- Invitation to participate at the meeting as an invited speaker
- Publications in a peer reviewed journal in the preceding year
- Applicants from a previously disadvantaged community
- Applicants younger than 35 years of age

### APPLICATIONS MUST BE ADDRESSED TO

The President  
South African Heart Association  
P.O. Box 19062  
Tygerberg  
7505

### THE SELECTION PANEL WILL REVIEW APPLICATIONS TWICE A YEAR. THE CLOSING DATES FOR APPLICATIONS ARE

- March 31
- September 30

A maximum of four scholarships will be awarded annually up to an amount of R10 000 per scholarship.
IST ALL AFRICA CONFERENCE ON HEART DISEASE, DIABETES AND STROKE

Grand Regency Hotel, Nairobi, Kenya

CALL FOR ABSTRACTS:
The Pan African Society of Cardiology and Kenya Cardiac Society 'All Africa All Heart' Conference

CONFERENCE INFORMATION: http://www.pascar.co.za
ABSTRACT SUBMISSION: www.editorialmanager.com/cvjsa
Abstracts submitted to the Meeting must be original scientific research.
Abstract submission deadline: February

TER NAGEDAGTENIS aan DR WILLEM VAN HEERDEN

Sy spreekkamer het 'n glas buitedeur – as ons uitkyk sien ons hom nou nog aangestap kom van sy motor af – sy "loslit stappie", stetoskoop om die nek, hemp wat vroeg al uithang van die doening wees van pa in die oggend voor skool, 'n boks lêers – en soms ook 'n groot sak skoon praktyk wasgoed in die hand...

Die praktyk was woelig met Willem se selfoon, stetoskoop of lêers altydiewers in die hospitaal op soek. Sy belangstelling in sy pasiënte het nie plek gelaat vir sulke onbenullighede – dit sou mos altyd weer uitkom. Deur die jare was hy veral bekend vir sy geduld en nederige gesindheid teenoor sy personeel, pasiënte, kollegas en hospitaal personeel.

Willem had vele talente – en wat hy nie geweet het, het hy aangeleer. Met stokperdjies soos fietsry, fotografië, houtwerk, tuinmaak, klavierspeel en tyd met sy familie was hy altyd besig. Sy kinders het die voorreg gehad vir sy geduld en nederige gesindheid teenoor sy personeel, pasiënte, kollegas en hospitaal personeel.

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Willem had vele talente – en wat hy nie geweet het, het hy aangeleer. Met stokperdjies soos fietsry, fotografië, houtwerk, tuinmaak, klavierspeel en tyd met sy familie was hy altyd besig. Sy kinders het die voorreg gehad vir sy geduld en nederige gesindheid teenoor sy personeel, pasiënte, kollegas en hospitaal personeel.

En dan was hy Kardioloog met gesonde oordeel – van die beste. Toe hy aanvanklik uit 1Mil wou gaan spesialiseer was daar ‘n professor wat ook maar net sy kop geskud het – min wetend watter sukses hy daarvan sou maak.

Een Donderdagmiddag op 15 Junie is sy loslitstappie vir die laatste keer gesien – met sy boks lêers – stetoskoop om die nek (as hy dit nie ewers laat lê het) na sy motor, op pad huis toe...

Dr Willem van Heerden was sekerlik vir ons almal ‘n voorbeeld, ‘n vriend, kollega, werkgever en dokter van wie die herinnering nie sommer oornag vergeet kan word nie.

ANAREEN VOS, RENÉ JACOBS EN ADRIAAN SNYDERS

January 2007

Dear HeFSSA Member,

I hope you all have rested and are ready to face the challenges of 2007. On behalf of our Chairperson, Professor Karen Sliwa, I welcome the new members of the 2007 Executive Committee and thank our old members for continuing their commitment to our Society.

The Executive Committee for next 2-year period (2007-2008) is:

Prof K Sliwa (chairperson)
Dr E Klug (secretary)
Dr O Forster (treasurer)
Mr G Nel (executive officer)

Dr K O’Connell
Dr M Mpe
Dr S Middlemost
Prof J Brink
Prof J Moolman

Mr W Stranix (industry – devices)
Mr E Minkov (industry – pharma ethical)
Mr R Moul (industry – pharma generic)

A joint meeting of PASCAR/Kenyan Cardiac Society/HeFSSA will take place in Nairobi, Kenya from 12-16 May covering a broad range of topics in cardiology, with special reference to Africa. Further registration details can be obtained from our website www.hefssa.org or the congress website www.pascar.co.za.

Professor Sliwa has been invited by SAHA to edit the SAHA Journal for the 2007 SAHA Annual Congress Issue. Please consider if you would like to submit an article, and contact the HeFSSA Office (info@hefssa.org or George Nel on 083 458 5954).

We hope that as the year progresses we communicate often and by our actions the syndrome of heart failure will be highlighted in various forums. Please visit our website www.hefssa.org for the latest information on the society activities.

Warmest regards

ERIC KLUG
HeFSSA Secretary
THE SOUTH AFRICAN HEART ASSOCIATION
RESEARCH SCHOLARSHIP

This scholarship is available to all its members and associate members. It is primarily intended to assist colleagues involved in outstanding research to enhance their research programmes.

REQUIREMENTS

- Applicants must be fully paid-up members/associate members in good standing for at least two years
- Applications must include
  - full details of the meeting/workshop
  - an abbreviated CV of the applicant
  - a breakdown of the expected expenses

RECOMMENDATIONS

- Acceptance of an abstract at the scientific meeting to be attended
- Invitation to participate at the meeting as an invited speaker
- Publications in a peer reviewed journal in the preceding year
- Applicants from a previously disadvantaged community
- Applicants younger than 35 years of age

APPLICATIONS MUST BE ADDRESSED TO

Education Standing Committee
South African Heart Association
P.O. Box 19062
Tygerberg
7505

THE SELECTION PANEL WILL REVIEW APPLICATIONS ONCE A YEAR. THE CLOSING DATE FOR APPLICATIONS IS SEPTEMBER 30 EACH YEAR

One scholarship will be awarded annually. The award is for the amount of up to R50 000.

APPLICATIONS WILL BE ASSESSED ACCORDING TO THE RESEARCH PROTOCOL ACCOMPANYING THE APPLICATION. THIS SHOULD INCLUDE:

a) Abstract (maximum 200 words)
b) Brief review of the literature (maximum 200 words)
c) Brief description of the hypothesis to be investigated (maximum 100 words)
d) Detailed methodology (maximum 500 words)
e) References
Heart 2 Heart South Africa Congress 2007
22 - 25 November

The 8th Annual General Meeting in 2007 will be held at Sun City from 22-25 November. Two special interest groups have been appointed as the official organisers: The South African Society of Cardiovascular Intervention (SASCI) and The Cardiothoracic Surgery Society of South Africa. The meeting will be held jointly with the 4th Indian Ocean Meeting of Cardiovascular Disease that traditionally attracts an impressive European faculty and a large contingent of international attendees.

Emphasis will be on cardiovascular interventions both percutaneous and surgical. Active participation from The Paediatric Cardiac Society, The Heart Failure Society of South Africa (HeFSSA) and The Cardiac Arrhythmia Society of South Africa (CASSA) in compiling the programme will ensure that a broad spectrum of diseases are considered within the congress theme. There are a number of new and challenging approaches to the management of various cardiovascular conditions and we plan to address these. We already have an outstanding list of confirmed international speakers and they have been asked to ensure entertaining talks and be prepared to participate in robust debates.

A call for abstracts will be made in due course.

Sun City continues to be a favourite venue offering many recreational opportunities and we are sure that the venue will provide a forum for a memorable meeting.

We invite you to diarise the dates and be sure to register early. Details are available on the SA Heart website (www.sahart.org) and enquiries should be directed to the Congress Organiser: Sue McGuiness on (011) 447 3876 or suemc@icon.co.za

Tom Mabin & Robbie Kleinloog
Heart 2 Heart South Africa Congress 2007