

SA HEART CONGRESS 2016 - MESSAGE FROM THE PRESIDENT

Dear Congress participants, delegates and SA Heart members

I would like to welcome you to this year's congress, being a combined World Congress of the World Society of Cardio Thoracic Surgeons and the 17th annual SA Heart congress.

We are proud to be able to hold this prestigious World Congress in South Africa in the beautiful city of Cape Town and as SA Heart Association to be the joint hosts with the Society of Cardiothoracic Surgeons of South Africa.

We welcome Prof Stuart Jamieson, chancellor of the World Society of Cardio Thoracic surgeons as well as Mr Sotirios Prapas, Vice Chancellor, Mr Vipin Zamvar, the current President of the WSCTS and Mr Mika Madani, the Secretary General and Yuri Pya the President elect together with a number of previous presidents of this prestigious society.

As special guests from the European Society of Cardiology we welcome Prof Fausto Pinto, Prof Gerhard Hindricks, Prof Thierry Lefevre and Prof Jeroen Bax who are contributing to our programme as part of the ESC Global Affairs programme, which forms part of the SA Heart congress for the third time and promises to become a fixed item in our congress programme. This initiative highlights the fruitful collaboration with the ESC with SA Heart in turn being invited to participate in a joint session during the annual ESC congress from which we have just returned.

We are proud to have the "living legends" Sir Magdi Yacoud, Prof Bernard Gersh and Prof Friedrich Mohr at this congress.

The organisers have followed the Heart Team approach, ensuring that the plenary sessions in the morning are of interest to all disciplines, while allowing for a high variety of specialised tracks at other times.



But you will find many common denominators in the entire programme, e.g. that of congenital heart disease.

Once again I would like to thank the convenors Dr Rob Kleinloog (World Congress) and Dr Alfonso Pecoraro (SA Heart congress) as well as all the other members of the local organising committee and scientific programme committees, for putting together this exciting programme. I would also like to extend my thanks to device and pharma industries without whose support a congress of this size would not be possible for direct sponsorships and generous educational grants received. And last but not least I thank the professional congress organisers The Conference Company, under leadership of Nina Freysens-Pretorius who have worked tirelessly in the background to put this all together.

Prof Karen Sliwa
President, SA Heart Association

PAEDIATRIC CARDIAC SOCIETY OF SOUTH AFRICA

The Paediatric Cardiac Society of South Africa's main objectives are to improve the quality of care for children with congenital and acquired heart disease by promoting research and supporting the education and training of heart specialists. The PCSSA is also the primary advocacy group for children with heart disease in South Africa. Membership is open and we actively encourage participation from colleagues in Africa, as well as interaction with special interest groups.

Our goals for 2016 are to increase and promote research and publications within our society, especially amongst our fellows, to develop outstanding educational resources, to support local educational programmes and to advocate for paediatric cardiac services in South Africa, and on the African continent. To that end, we have created travel and publication awards and have sponsored some educational activities held by local units over the past years.

CONGRATULATIONS

We would like to start by highlighting the achievements of some of our members in the past quarter. Firstly, a huge congratulations to Dr Hopewell Ntsinjana, whose PHD from the University College London was recently conferred. We are extremely proud of Hopewell and his amazing work on cardiac MRI. We wish him well in his future endeavors as he forges his new path here in South Africa. Well done Hopewell!

We have a new Associate Professor in our society - Lungile Pepeta was recently promoted to Head of Paediatrics at Dora Nginza Hospital. A short biography to introduce Lungile: he was born and bred in Bizana,



Dr Hopewell Ntsinjana whose PHD was conferred.



Lungile Pepeta was recently promoted to Head of Paediatrics at Dora Nginza Hospital.

Eastern Cape and matriculated from Bizana Village High School in 1991. He graduated with an MBChB in 1997 from the University of Transkei (Now Walter Sisulu University) in 1992 and after his DCH, trained in Paediatrics in Durban and obtained his Fellowship in Paediatrics in 2003. He then worked as a Paediatrician in Queenstown, Eastern Cape. In 2005, he joined Chris Hani-Baragwanath Hospital and the University of The Witwatersrand to train in Paediatric Cardiology which he completed in 2008.

He moved back to the Eastern Cape in 2009 and started a Paediatric Cardiology Unit, which was formally registered for training of Fellows in 2010. Prof Pepeta is currently Head of the Clinical Department of Paediatrics and Paediatric Cardiology at the Port Elizabeth Hospital Complex, South Africa and a Fellow of the Society for Cardiovascular Angiography and Interventions (SCAI). Well done Lungile! We look forward to wonderful things from Port Elizabeth!

NEW PAEDIATRIC CARDIOLOGISTS

We have 2 new paediatric Cardiologists in our midst! The recent certificate exams were extremely successful with a 100% pass rate. Our sincere congratulations to the 2 new cardiologists - we welcome you into the fraternity and look forward to your contribution to paediatric cardiology in your hospital, region and in the country as a whole.



Bhavishna Nagar completed both undergraduate and postgraduate studies through the University of the Witwatersrand. After a year of internship in KwaZulu-Natal, she returned to Johannesburg to complete her community service, followed by 4 years of registrar time in paediatrics. She completed her DCH in the same year of her community service (2006) and FCPAED in 2011. Thereafter she joined paediatric cardiology. She has 2 children (aged 3 years and 18 months) and is married to Samir Soma, an ENT surgeon. She practices at Charlotte Maxeke Johannesburg Academic hospital and will be remaining at Charlotte for the foreseeable future. Congratulations Bhavishna! We wish you all the best for your future career. Bhavisha comments "my fascination with paediatric cardiology started a long time ago but it is the shared passion and teamwork amongst my colleagues at CMJAH, CHBAH and RMMCH which fuels my love for the work that I do, so I am quite happy to stay on as part of this team." Clearly she will make a wonderful contribution to paediatric cardiology!

Kgethi Moshe from Pretoria was our other successful candidate and we will be featuring Kgethi in the next edition of this newsletter – meanwhile, we extend our sincerest congratulations and best wishes to Pretoria!



Bhavishna Nagar completed both undergraduate and postgraduate studies.

WORLD CONGRESS OF CARDIOLOGY AND CARDIOVASCULAR HEALTH 2016

Mexico City, Mexico

4 - 8 June 2016

This biennial event took place in vibrant Mexico City, Mexico. It is a global interactive event to promote CV health and aims to unite cardiovascular disease specialists with other disciplines in order to network, share knowledge and build innovative solutions for patients and populations. An outstanding line up of world leaders in heart health with 120 sessions on cardiovascular health and cardiology practice (including acute coronary syndromes, heart rhythm disorders, heart failure, congenital heart disease and risk factors in the young) for all health and public health professionals.

‘Our main objectives are to improve the quality of care for children with congenital and acquired heart disease.’

This year, for the first time, the World Congress of Paediatric Cardiology and Cardiac Surgery held a pre-congress workshop on Paediatric Cardiology and Cardiac surgery. These were very well attended and the programme provided interesting insights into Latin American epidemiology of congenital heart disease, wonderful new programmes and innovations and

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PAEDIATRIC CARDIAC SOCIETY OF SOUTH AFRICA continued



SA Heart dinner during the World Congress in Mexico, here celebrating Prof Sliwa's (second from left) nomination as President Elect of the World Heart Federation earlier that day.

interventions, both for GUCH and CHD. The programme was drawn up with the help of John Lawrenson, Christopher Hugo-Hamman, John Hewitson and André Brooks together with the track leader for CHD and RHD, Liesl Zühlke.

The RHD programme, organised by Liesl Zühlke, was vibrant and exciting with talks from all over the world interspersed with interactive sessions, research dragon's den and networking and collaborative sessions. Some exciting aspects were the launch of the Road to Addis movie, which debuted at the meeting (<http://www.takeheart.tv/films/take-heart-africa-road-to-addis/>), the launch of several new tools for RHD prevention and control programmes (RHD Action, Needs Assessment Tool) and a global report featuring South Africa on RHD policy, programmes and people (People, Policy Programmes and Progress: RHD Global Status Report 2015 - 2017 and Global Status of BPG Report).

Finally, the WCC included the election of the new President-elect for the period 2017 - 2019. We were absolutely thrilled when our own president of SA Heart, Professor Karen Sliwa-Hanle, was voted in as the first woman and first African President-elect of the World Heart Federation! We wish Karen everything of the best in her new position and assure her of our support in the endeavours to shape the future of global heart health.

SOUTH AFRICAN PAEDIATRIC ASSOCIATION CONGRESS

September 2016

The South African Paediatric Association congress will be held in September 2016, at Durban ICC. Previously the PCSSA played a role at this meeting. This year's meeting will be convened by Dr Andiswa Msimela, who has already disseminated an interesting and varied programme. Please see links for registration and abstract submission. <http://www.sapasaaps2016.co.za>

WORLD CONGRESS OF THORACIC SURGERY CAPE TOWN 2016

The 2016 World Congress of Thoracic surgery is scheduled to take place in Cape Town. The organisers are John Lawrenson and F. Pacararo. World Thoracic and Cardiac Surgeons, this promises to be an exciting programme with interventions and a strong surgical programme represented by André Brooks. Alongside this conference will be a one-day RHD programme, organised by Liesl Zühlke and Prof Peter Zilla. Our thanks to John Lawrenson and André Brooks for their able representation on this committee.

WEBSITE WWW.PCSSA.ORG

We have truly endeavored to provide an up-to-date resource for both members, and their patients, to utilise and aim to ultimately provide a resource in local languages as well. Members are invited to assist, particularly in editing information and/or translation. An important element is the incorporation of our patient information portal and the Pedheart resources, as well as links to related websites and resources. These include recent podcasts of interviews, recent publications and e-resources for all members. Our next aim is to create links to a paediatric cardiology seminar series and journal club to be used by registrars, or PASCAR cardiology trainees. Reminder to all: the Pedheart Resource is the most comprehensive congenital heart disease educational website. It has detailed defect and treatment descriptions, in-depth tutorials, a searchable image library, collections of patient handouts and over 1 200 PowerPoint slides in several different languages (<http://www.heartpassport.com/>). In addition, PCSSA now has a site providing information on congenital heart disease for parents as well as medical practitioners (<http://www.africa.congenital.org/>). Links to both these sites can be found on the home page of the PCSSA (www.pccsa.org).

Access to the parent information site is available to everyone. Access to the medical practitioner site is limited to paid-up members of the PCSSA.

FELLOWSHIPS, TRAVEL AND PUBLICATION AWARDS

The Paediatric Cardiac Society Travel Fellowship

This travel fellowship afforded 2 recipients the opportunity to attend the Society for Cardiovascular Angiography and Interventions Foundation's "Interventional Cardiology Fall Fellows Course" which is held in Las Vegas, Nevada, each year. This course is the premier fellows-only interventional course in North America and is a yearly sponsored event. We now also offer 2 fellowships to allow members of the PCSSA to attend courses, train with international, or local colleagues, and visit units for specific techniques or exposures. Finally there are several publication prizes that will be decided at the SA Heart meeting in 2016. Please see our website (<http://www.pcssa.org/membership/scholarships/>) for further details.

Publications and publication awards

The previous issue of SA Heart featured significant contributions from Paediatric Cardiology and colleagues. Thank you to all for these excellent papers - we encourage you to continue publishing work, especially as there are prizes on offer! There are several publication prizes that will be decided upon at the SA Heart meeting 2016, for both consultants and fellows. Please see our website for details (<http://www.pcssa.org/membership/scholarships/>). This month we have several excellent papers which were published by our members. The Feasibility of Pulse Oximetry Pre-discharge Screening Implementation for detecting Critical Congenital heart Lesions in newborns in a secondary level maternity hospital in the Western Cape, South Africa: The "POPSICLe" study, with Dr Nikki van Niekerk as first author will be featured in SAMJ. There are 2 important RHD articles published this month: One in CVJA and the other in SAMJ (<http://www.pcssa.org/membership/scholarships/>) delineating the African Union Communique and the road to eradicating RHD in Africa (several of our members as co-authors) as well as a report on a prevalence study in Cape Town and its implication for school health. Finally, a South African Heart Association position paper is published in the CVJA this month with an accompanying editorial http://www.cvja.co.za/archive/vol_27_issue_3_July.php. Prof Sliwa and colleagues focus on concerns

regarding training in cardiology and cardiothoracic surgery in South Africa. http://cvja.co.za/onlinejournal/vol27/vol27_issue3/#66/z

The editorial reminds us that "The authors, all experienced in their fields of expertise and many responsible for providing training in these fields, document the lack of training opportunities, the lack of adequate facilities and the failure of the state to expand and enlarge facilities so as to keep up with the population expansion". Do read these articles and remember to send us your articles for inclusion on our website.

NEW EXECUTIVE 2016 - 2018

Please note that the executive committee will come to the end of its term in September 2016. There will thus be opportunity for any interested and committed individuals, who wish to serve on the executive committee. You can serve for a 2 year term 2016 - 2018. This promises to be an exciting period with a new congress to prepare for and new plans for our committee and society. Nominations will open soon and the executive committee will be announced at the AGM. Please let us know if you are willing to serve. Executive members must be paid-up members of the PCSSA.

My thanks to the 2 serving executives committees during my time as president 2012 - 2016, it has been an honour to represent our society and our patients and a pleasure serving with the committees. I wish the new president and the new executive committee very well in their term.

PCSSA MEMBERSHIP

We would like to increase our membership of cardiologists, surgeons and any practitioner interested in cardiovascular disease, congenital and acquired, in children. We urge you to contact us if you need any information and access our website for membership details. www.pcssa.org

CONTACT DETAILS

President: Liesl Zühlke liesl.zuhlke@uct.ac.za

Secretary: Belinda Mitchell lindy.mitchell@up.ac.za

Liesl Zühlke
President, PCSSA

POPULAR CONGRESSES FOR 2016/2017

CONGRESS	DATE	CITY	COUNTRY
HYPERTENSION SEOUL - 26TH SCIENTIFIC MEETING OF THE INTERNATIONAL SOCIETY OF HYPERTENSION (ISH) http://www.ish2016.org	24 - 29 September 2016	Seoul	Korea
9TH ASIA PACIFIC HEART RHYTHM SOCIETY SCIENTIFIC SESSION http://www.aphrs2016.com	12 - 15 October 2016	Seoul	Korea
CSI AFRICA 2016 http://www.csi-congress.org/csi-africa.php	25 - 26 November 2016	Kampala	Uganda
ACC 2017 https://accscientificsession.acc.org	17 - 19 March 2017	Washington DC	USA
AFRICAPCR http://www.africapcr.com	23 - 25 March 2017	Gauteng	South Africa
EUROPCR http://www.europcr.com	16 - 19 May 2017	Paris	France
CONGRESS OF THE EUROPEAN SOCIETY OF CARDIOLOGY http://www.escardio.org	26 - 30 August 2017	Barcelona	Spain
18TH ANNUAL SA HEART CONGRESS http://www.saheart.org	9 - 12 November 2017	Sandton	South Africa

Please also consult the SA Heart website at www.saheart.org for constant updates to this list as well as local training opportunities offered by SA Heart, SIGs and other role players.

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THE SOUTH AFRICAN HEART ASSOCIATION 2016

REPORT OF THE PRESIDENT

During the last AGM we reported that SA Heart is moving towards a formal business structure, and the Association is now a registered Non Profit Company, the South African Heart Association NPC. With this change comes a new structure, that of a Board of Directors, besides the normal SA Heart Executive. Five directors duly nominated and voted for have seen the SA Heart NPC through its near full first year of existence. From the beginning of the financial year we are thus trading under this name and, in conjunction with that, our Trademark application was finally approved and awarded after it took a few years for the process to come to fruition. Both "South African Heart Association" as well as "SA Heart" and the logo are now registered trademarks.

Under the new business structure we continued with 3 National Advisory Council meetings introduced last year, now also including the Directors of the Board, besides the SA Heart Executive, and heads of Special Interest Groups and Branches. Firstly, I want to sincerely thank my colleagues on the SA Heart Executive and Board for all the support and co-operation received, as well as all members of the National Council who took time out from their busy schedules to attend these meetings. I further thank them for their active participation and fruitful discussions, besides all the work done within their respective groups which they will report on themselves. Many an hour is spent to further the goals of SA Heart and to make the lives of our members easier.

Sadly Prof Stephen Brown, who was voted vice president last year, withdrew from this position in June this year due to personal and departmental circumstances. This position was advertised for nomination again, out of cycle in this year's nomination process.

The SA Heart position paper on the state of cardiology and cardiac surgery training which was started last year has now been published in the Cardiovascular Journal of Africa. I have written to the Minister of Health, forwarding this article, and expressing the grave concern of the SA cardiac community as well as the global perspective in my capacity as president-elect World Heart federation. On 15 August, I, Dr Zühlke and Prof John Anthony (Head of Maternity in Groote Schuur) met with the Minister of Health, Dr Aaron Motsoaledi and Prof Melvyn Freeman (chief director for NCDs at the national department of health) at the ministry for a lengthy meeting and discussed in detail the training shortage for nurses, cardiologists, paediatric cardiologists and cardiothoracic surgeons. The minister is fully aware of this situation and is busy addressing this in various ways. He is open to further discussion and interaction and the SA Heart Executive will report back on further development at the next AGM.

Rules are changing for industry which influences the way in which industry companies will, or may be, involved in congresses in future. SAMED invited role players from the industry and medical associations to present these changes, what they mean and when they will come into effect. SA Heart is busy formulating guidelines, from within SA Heart, which we want to present to industry in an effort to further attract sponsorships and show how delegate support could be routed through the Association.

SA Heart is becoming increasingly involved in international collaboration:

At the beginning of 2016 a delegation from the European Heart Rhythm Association (EHRA), a sub-speciality group of the European Society of Cardiology, approached the South African Heart Association, the Cardiac Arrhythmia Society of South Africa (CASSA) and the Pan African Society of Cardiology (PASCAR) for closer collaboration. Representatives of EHRA met with Drs Andrew Thornton and Ashley Chin from CASSA to learn more about each other's activities, structures and challenges and to discuss possibilities for collaboration. A symposium on Sudden Cardiac Death, hosted by SA Heart, concluded this visit.

SA Heart has again been invited by the European Society of Cardiology to participate in a joined symposium during the ESC congress in Rome this year. I submitted a session addressing the subject of Addressing Rheumatic Heart Disease in Adults. Bongani Mayosi chaired this session, together with Alain Berrebi from France, and Dr Liesl Zühlke presented on The burden of Disease, while Prof Mpiko Ntsekhe contributed with a talk on Valve Thrombosis and Anticoagulation. Prof Catherin Szymanski, from France, spoke on Diagnostic work up and prognostic factors and Prof Manuel Antunes, from Portugal, added his talk on Valve replacement vs. repair. As part of this mutual arrangement the ESC is bringing highlights from their congress and updates on guidelines to our congress in South Africa. Over the past years, under my leadership, the SA Heart and ESC have strengthened their interaction through a number of activities, which also include leadership activities in the EuroObservational Research programme. Data from the first 400 patients entered into the world wide registry on PPCM, under the EuroObs Registry Research programme, are presented as a Late Breaking Trail session during the ESC congress by K. Sliwa (Tuesday, 30 August 14h00). In the same session Dr Zühlke will present data from the REMEDY registry. This is the first time that we have 2 prestigious Late Breaking trial sessions from SA Heart members presented at the ESC.

While a number of SA Heart members have been both attending, and speaking, at the World Congress of Cardiology for some years, it is the first time SA Heart was also presented by way of an exhibition booth at the WHF congress in Mexico this year. During this congress, and coinciding with the AGM of the WHF, I was voted president-elect of the World Heart Federation. I foresee a strong collaboration with SA Heart and the WHF. I am in discussions with the WHF to hold the Global Summit WHF as a 1 day workshop prior to the SA Heart congress in November 2017. This will also be in interaction with the Pan African Society of Cardiology (PASCAR), in which I serve as the treasurer.

SA Heart has been awarded 3 travel grants since the last AGM. Natasha Driescher presented her poster on Long-term Sugar-sweetened Beverage Intake elicits Early Metabolic Perturbations in Rat Hearts: a Bitter-sweet Taste? during the Experimental Biology Congress in California. Ferriel Azibani presented her abstract on Galectin 3 plasma levels at baseline correlates with poor clinical outcome in patients with peripartum cardiomyopathy at the ESC Heart Failure Conference in Florence and Rauchika Meel was awarded the third scholarship to present her poster and 2 oral abstracts in the category valvular heart disease at the SA Heart congress this year. Feedback from these recipients, reported in the SA Heart Newsletter, emphasise the value of research done in South Africa, but also the importance of networking opportunities during such congresses.

Dr Nqoba Tsabedze was awarded the SA Heart Research Grant in 2015 and has since submitted a comprehensive update report on his research on Genetics of Idiopathic Dilated Cardiomyopathy (IDCM) in Johannesburg. The primary objective of this project is to identify and define the genetic variants responsible for IDCM in our local population.

I want to thank all members of SA Heart for the trust they have put in me during my tenure as SA Heart president. I wish Dr Liesl Zühlke, and the new incoming SA Heart Executive, a productive tenure 2016 - 2018 and will provide support as past-president.

Prof Karen Sliwa, President, SA Heart Association

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COMMITTEE REPORTS

ETHICS AND GUIDELINES COMMITTEE

End of term report October 2015 - September 2016

The structure and constitution has remained unchanged over this period.

No new guidelines were created or published during this period.

Key activities during this period:

- Incorporation of ESC guidelines confirmed by national Executive (where South African perspective is required, this is addressed by the committee on request).
- Endorsement contract was completed.
- Query from Discovery Health regarding Transmyocardial Laser Revascularisation was received and referred to Society of Cardiothoracic Surgeons for opinion and resolution. Completed and concluded satisfactorily.
- A non-medical request was received to adjust the guidelines regarding the testing of Troponin-T levels, including 1 hour cut off. Insufficient data is available at this time and this will remain a project of the incumbent members of the committee.
- Request for assessment of Zio Cardiac Arrhythmia Patch was received from the industry and this was managed and answered at arm's length. Position of SA Heart in relation to marketing advice was discussed and confirmed.

Les Osrin, Chairperson, Ethics and Guidelines Committee

FULL TIME PRACTICE COMMITTEE

Members

Prof Andrew Sarkin (chair), Dr Paul Adams, Dr Ashley Chin, Dr Blanche Cupido, Dr Riaz Dawood, Dr Johan Jordaan, Dr Sajidah Kahn and Dr Elias Zigiriadis.

Thank you to all the committee members for their input and assistance.

Challenges facing the full-time academic departments

This remains a priority which encompasses all aspects including the number of posts, stock, training of cardiologists, service delivery and research. The committee has looked at ways to assist, particularly in relation to equipment and disposables, and has researched where common ground between departments may be found. Disparities in funding of staff, procedures and devices between departments for no apparent reason remains a challenge.

Training of cardiologists/cardiothoracic surgeons in South Africa

The committee contributed to the article written by SA Heart on this issue. Real concerns have been raised regarding the pass rate in the most recent exams. Posts are way too few and a significant increase in funding and posts is imperative to maintain a viable and strong cardiac/cardiothoracic discipline.

Health Review Commission

The committee was represented before the Health Review Commission. The submission covered problems faced by full timers in relation to work conditions, support from hospital management and staff shortages, as well as the need for industry and the private health sector to support academic departments.

Essential Drug List

The committee considered and provided input on the essential drug list and suggested more dialogue was necessary going forward.

SA Heart Journal

The committee is pleased that it supported the continuation of this journal in the past, and it is further pleased to note that the journal is gaining strength.

Prof Andrew Sarkin, Chairman, Full Time Practice Committee of SA Heart

SA HEART REGISTRY – SHARE

Members

Mpiko Ntsekhe (Chairperson), Erika Dau, Elizabeth Schaafsma, Karen Sliwa, Francis Smit and Adriaan Snyders.

SHARE is now in year 2 of its focussed device and disease based prospective registry format, based on the Euro-observational programme of the ESC.

The main objectives for SHARE in 2016, as outlined at the 2015 AGM, were:

- To have 3 prospective registries up and running on the new SHARE database platform as proof of concept, these registries would serve as a blueprint for all future SHARE-related registries.
- Limit SA Heart's financial commitment to the registry project to funding the staff component of the SHARE committee and, in addition, have each registry project financially independent through industry, grants and other funding vehicles.
- Begin to disseminate the data and information generated from the projects through publication and presentation of abstracts and papers.

Two registries were established in late 2014. Drs Jacques Sherman and Hellmuth Weich lead the SHARE-TAVI registry. After a slow start, all 13 TAVI sites in the country are now active participants with the overall case capture rate sitting pleasingly above 80%. Part of the success of the TAVI project can be ascribed to some very productive and positive interaction with major funders who have embraced the registry and are happy to use a report, printed directly from the registry database, as part of their motivation/evaluation for decisions relating to funding. This has helped to speed up the decision making process which previously required considerable back and forth communications between operators and funders which, in turn, resulted in unacceptable delays of procedures and unnecessary morbidity and mortality in these very sick high-risk patients.

More than 160 procedural data entries have been captured in just over 15 months. Just over 25% of patients have already completed their 1 year follow up and, at the end of 2 full years of data capture, SHARE will be able to offer more substantive data for publication. Abstracts have been submitted to international meetings including the ESC, EACTS, TCT and WSCTS, as well as to the local SA Heart Congresses. In the interim, TAVI participants have been invited to 2 - 3 feedback meetings annually utilising other organised meetings, such as AfricaPCR and SA Heart Congresses, as a forum to conveniently gather participants together for dissemination of information.

Prof Karen Sliwa, of the Hatter Institute at UCT, and Dr Priya Soma-Pillay lead the SHARE Cardiac Disease and Maternity Registry (CDM) and recruitment into the second SHARE registry has also increased steadily after a relatively slow start. Now that the database logic has been tested and approved, the number of active sites is growing steadily. Although it was intended that both Private and State institutions would be represented in the CDM registry, the low incidence of disease seen at Private institutions has been a limiter to participation by these centres. We would like to encourage clinicians in private practice who see maternal cardiac disease somewhat more frequently to please contact

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Prof Sliwa, or Elizabeth Schaafsma, should you wish to join this growing registry. Abstracts describing the patient demographics and early trends have been submitted to 2 meetings in the interim, and Prof Sliwa has presented the CDM registry to colleagues at the PASCAR and WHF meetings earlier this year.

The continental nature and burden of the clinical problem has been highlighted by sites from Kenya, Tanzania and Cameroon requesting to participate in the CDM registry. We are sure that the increased spotlight being afforded to maternal cardiac disease by our own government, as well as the increased prominence of Africa in the eyes of the WHF, will all serve to help expand the number of participants in the CDM registry. We would like to congratulate Prof Sliwa on her election as the President-Elect of the WHF and we look forward to her shining a light on the African situation during her time in office.

SHARE's original objective, which was to have 3 registries tested and well established within 2 years, has not yet been met but several contenders are currently being considered, evaluated and developed with amongst them a paediatric registry on congenital disease, as well as registries on PHT, ACS and Devices in HF. Fund-raising remains a priority for the continued development and running of all the registry programmes. We are tremendously grateful for the very generous grants received to date from Astra Zeneca, Medtronic and Edwards Life Sciences. This has enabled the initial development and further setup and maintenance of the registries to occur smoothly, and will still be used to support the analysis and publication of the outcomes.

We look forward to continued growth in 2017 as we generate the type of local data and information that will influence and improve clinical practice, patient care and public policy in the future. The committee remains thankful to individual members of SA Heart, the SA Heart Exco, Industry partners, Funders and hospital groups for their continued support for SHARE and of course, most importantly, to the participants at all our sites.

Mpiko Ntsekhe, Chairperson, SHARE Committee

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SPECIAL INTEREST GROUPS (SIG) REPORTS

CARDIAC ARRHYTHMIA SOCIETY OF SOUTH AFRICA, CASSA

Executive

Dr A. Thornton (President), Dr R. Jardine (Secretary), Dr I.W.P. Obel, Dr A. Chin, Dr B. Vezi, Prof R. Scott-Millar, Dr A. Stanley (resigned 02/2016), Dr L. Zampieri (Industry) and Mr M. van den Bergh (Industry).

I am very pleased to report that at present things are looking much brighter for CASSA with a new operating officer and a financial status which is no longer as precarious as it had been before. With regard to our previous chief operating officer, a full financial audit has been undertaken and charges have been laid with the South African police services in the light of the findings of this audit. We are awaiting their further action in this regard. We are very grateful to our sponsors for their continued support during this difficult period and look forward to their ongoing support.

In the last 12 months we have not had an annual meeting and have decided to delay it until the beginning of next year. The CASSA clinical symposium will be held in Cape Town on 4 February 2017 and in Johannesburg on 11 February 2013 with 1 confirmed speaker, Prof Johannes Brachmann, and another overseas speaker, still to be confirmed. We will once again offer an interactive and exciting programme for those attending. CASSA members have been involved on an individual basis in ongoing initiatives undertaken by industry.

We have had 2 face-to-face meetings in the past year, as well as 3 teleconferences, in order to prepare for the above-mentioned congress and continue interaction on a number of other issues. Dr Anthony Stanley resigned from the executive committee in February this year because of personal commitments. We would like to thank him for all his input over many years.

We have, in the last 12 months, welcomed back 1 of the fellows who went to Canada for 2 years of training, and at the end of the year we will welcome back another fellow who has been training in Europe. In addition, a further fellow has since left for Canada to train at a different institution for a period of 2 years. These individuals have been sponsored by industry, with the sponsorship facilitated by CASSA. There are 2 further trainees currently in the planning stages of overseas fellowships and, in addition, a trainee position has been created in the Western Cape, independent of CASSA. We are thus hopeful that the number of electrophysiologists will increase progressively over the coming years and that some of these individuals will hopefully stay in the public sector, if the correct conditions are created there. The ideal situation would be a sufficient case volume in the public sector to allow for the majority of training to be undertaken locally with "top up" training in specialised areas then undertaken for shorter periods overseas.

We have continued our interaction with major overseas electrophysiology groups and were fortunate enough to have the president and 2 other members of the European Heart Rhythm Association (EHRA) visit us last year for detailed interaction and a short academic meeting which took place at the University of Cape Town. The president of EHRA, Prof Gerhard Hindricks, is also 1 of the invited speakers at the upcoming SA Heart Congress and we hope to have further interaction with him at that stage. In addition, interaction has also continued with the Heart Rhythm Society.

Issues with medical aids continue to be a major problem and these have continued to increase this year, necessitating a number of interactions with major medical aids. One medical aid, in particular, has been an ongoing problem. Ongoing interaction with all the medical funders is a priority. We have been fortunate enough to be included in the SASCI private practice committee activities and I have attended a number of meetings with them in this regard. We are very grateful to SASCI for the opportunity to participate in these meetings which have been very fruitful.

My term as president will be coming to an end at the upcoming AGM and I would like to thank all members of the executive committee for their assistance during my period in office. I would also like to thank Glenda Marcer for her

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willingness to step in and assist us as executive officer during a particularly difficult period and for undertaking this to such good effect. I would also like to thank our industry partners, without whom very little of what we do would have been possible.

I would again encourage you to attend the annual AGM at the upcoming Congress to attain more details regarding both the previous year's undertakings and plans going forward.

Dr Andrew Thornton, President, CASSA

HEART FAILURE SOCIETY OF SOUTH AFRICA, HEFSSA

The Heart Failure Society of South Africa (HeFSSA) has implemented a number of programmes during 2016 and have some exciting plans for rest of the year and 2017.

The HeFSSA Executive remains committed and the driving force behind the Society: Eric Klug (President), Martin Mpe (Vice-President), Darryl Smith (Treasurer) and Jens Hitzeroth (Secretary), Representatives Karen Sliwa, Tony Lachman, Kemi Tibazarwa, Andrew Asherson, Makoali Makotoko, Len Steingo and Blanche Cupido.

HeFSSA is supported by loyal corporate members committed to programmes related to heart failure (through generous and unconditional educational grants). Our sincere appreciation goes to Boston Scientific, Medtronic, E Merck, Pharma Dynamics, Servier, Amayeza, Biotronik, Meda Pharma and Novartis for the continued support.

The HeFSSA Medical Practitioners Programme continues to be of great value to the medical community, as well as the pharmaceutical and device industry, and it is also the main vehicle we use to achieve our educational goals. We offer the course annually, and it has been established in both metropolitan and rural areas. This programme is in its eighth consecutive year and it continues to be generously supported by industry; Servier, Pharma Dynamics, Medtronic, Boston Scientific and Novartis.

The theme for 2016 is "What is NEW in heart failure treatment?" with the cases: Angiotensin Receptor-Nepriylsin Inhibitor (ARNI), Diuretics Update, Atrial Fibrillation, Arrhythmia and Heart Failure and What is new in ESC HF Guidelines 2016. The case based talks for this year's programme has been compiled by the HeFSSA Exco, i.e. Eric Klug, Andrew Thornton, Blanche Cupido and Jens Hitzeroth. Practitioners will also have the opportunity to earn extra CPD points by completing an online CME questionnaire. On successful completion of the questionnaire a PDF certificate is electronically issued. The faculty members for 2016 include HeFSSA Exco members as well as other distinguished South African cardiologists with an interest in Heart Failure: Drs Eric Klug, Len Steingo, Simon Beshir, Jens Hitzeroth, Ronnie Jardine, Darryl Smith, Eamon Maree, Fanie Fourie, Wayne Lubbe, Jean Vorster, Nico van der Merwe, Martin Mpe, Mongezi Milela, Charles Kyriakakis, Jens Hitzeroth, Sydney Blake, André Lochner and Kgomotso Moroka. This year's meetings will be held in Johannesburg, Windhoek, Northern Namibia, Hermanus, Nelspruit, East-London, Rustenburg, Bloemfontein, Polokwane, Port Elizabeth, Cape Town, Durban, George and Pretoria. If you are interested in becoming involved in this programme, please make yourself available through contacting the HeFSSA office.

Our Executive excels in research - Karen Sliwa-Hahnle was the lead author in 2 new heart failure publications:

- **Pulmonary hypertension and pregnancy outcomes: data from the Registry of Pregnancy and Cardiac Disease (ROPAC) of the European Society of Cardiology.** Karen Sliwa, Iris M. van Hagen, Werner Budts, et al. European Journal Heart Failure 2016.
- **Bi treatment with hydralazine/nitrates vs. placebo in Africans admitted with acute Heart Failure (BA-HEF).** This was presented as a late breaking trial session at the ESC HF meeting in Florence, 21 May 2016, and published simultaneously in the European Journal Heart Failure (21 May 2016).

HeFSSA is involved in the SA Heart Congress, 8 - 11 September 2016, at Cape Town International Convention Centre. All HeFSSA members are requested to attend the HeFSSA sessions. The HeFSSA AGM for 2016 will also be held during the SA Heart Congress.

HeFSSA further invests in education by hosting the Annual Cardio Update for Non-Cardiologists. This year the update will take place on Thursday, 8 September, at the Cape Town International Convention Centre from 12h30 - 17h30. Servier is the sponsor with Martin Mpe and Tony Lachman acting as conveners. Almost 160 medical practitioners attended last year and we are hoping for a similar number this year. Faculty will consist of local Cape Town cardiologists as well as younger colleagues and HeFSSA Exco members.

The HeFSSA website is continually updated to remain relevant. Please visit the website at www.hefssa.org and contact the HeFSSA office to contribute and so ensure that the items stay updated and relevant.

Activities summary and forward looking:

- HeFSSA issued Expert Guidance to the MCC that lead to fast track registration of LCZ696.
- A number of companies were advised on clinical appropriate positioning of molecules and ethical marketing based on available Evidence Base (EBM).
- Medical Practitioners Education 2016 "What is New in HF Treatment?" - 14 GP Meets are planned for South Africa and Namibia including GPs, Fellows, Medical Advisors, Case managers etc.
- Outreach Africa through Karen Sliwa with PASCAR - Tanzania Heart Congress and Cameroon HT and HF Research and Educational Meeting planned for October 2016.
- Review of ESC 2016 HF Guidelines underway.
- Guidance on "How to evaluate treatment success in chronic HF?" is being prepared (to be issued early 2017).
- HF Market Survey (snapshot) is planned for later in 2016.
- SHARE HF Device Module (in planning with CASSA).
- Specialist Treatment and HF Device Therapy Course considered for 2017.
- HeFSSA finances remain stable with cash on hand R1.3 million at year end (audited results will be available at AGM).

HeFSSA encourages all parties who want to be involved in heart failure to contact George Nel, HeFSSA Executive Officer at info@hefssa.org to facilitate the process.

Eric Klug, President, HeFSSA

INTERVENTIONAL SOCIETY OF CATH LAB ALLIED PROFESSIONAL, ISCAP

ISCAP Executive Committee (to AGM 2017)

Dianne Kerrigan (Chairperson), Waheeda Howell (Vice-Chairperson), Noelene Nichols, Marisa Fourie, Elizabeth Muller, Isabel Bender and Ramabai Zwapano.

What is New? October 2015 to September 2016:

- A new Vice-Chairperson was elected in March 2016 - Waheeda Howell (Cape Town).
- ISCAP was represented at informative SA Heart National Council meetings.
- Main objective was to promote more speakers from the Allied Profession to present at the congresses. Comprehensive Programmes were offered at AfricaPCR Course (2 sessions) and SA Heart Congress (3 sessions).

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- ISCAP Education continued with the National Lecture Series (2 in 5 regions) and Basic Life Support (5 regions) and Advance Life Support (1 region).
- Outreach to outlying labs (fly or drive in from Namibia, Mossel Bay, George, EL and Nelspruit).
- Outreach into Africa with PASCAR - ISCAP assisted Namibian allied to launch their own society NISCAP (Namibian Interventional Society for Cath lab Allied Professionals) in June 2016 with Dianne Kerrigan mentoring the group and chairing the first workshop in June 2016. Waheeda Howell will do the same at the second workshop on 15 October in Windhoek.
- Thank you to Industry for the continued support and active partnership during 2016.
- ISCAP finances are stable year on year with approximately R300 000 cash on hand (reported as part of SASCI) with programmes offered on a break even basis to sponsors.
- An electronic version of the Cathlab Manual is due to be published 2017.
- ISCAP will work with PASCAR, SASCI and Cardiovascular Research Foundation (CRF from USA) to support new cathlabs being opened in Africa.

I would like to thank my Executive and Industry for the continued commitment to developing the Allied Group in cardiology.

Dianne Kerrigan, Chairperson, ISCAP

SOUTH AFRICAN SOCIETY OF CARDIOVASCULAR RESEARCH, SASCAR

The South African Society for Cardiovascular Research (SASCAR), an interest group of the SA Heart Association, was created in October 2009.

The SASCAR Executive Committee, elected in July 2014 for a 2 year term of office is: Prof Sandrine Lecour (Chairperson), Prof Neil Davies (Treasurer and President Elect), Miss Sylvia Dennis (Secretary), Dr Derick Van Vuuren (Newsletter and public relations), Prof Faadiel Essop (Workshops) and Prof Karen Sliwa.

Workshops and meetings

Since our last report, SASCAR has successfully organised well attended workshops and meetings on various topics:

Western Blotting Workshop, led by Dr Derick Van Vuuren (University of Stellenbosch)

To facilitate an exchange of thoughts and ideas on the challenges related to Western blot analysis, SASCAR partnered with Bio-Rad, the Division of Medical Physiology (Stellenbosch University), Anatech and the Physiology Society of Southern Africa (PSSA) to host a workshop addressing the basic techniques, new technology and new approaches in Western Blotting. Twenty-seven postgraduate students and researchers from Stellenbosch University, the University of Cape Town and the Medical Research Council were shown demonstrations of traditional techniques, associated with Western Blotting, as well as the advantages of using new technology such as the TransBlot Turbo- and Chemi-Doc systems. Both these systems incorporate advances in technology to enhance the speed and accuracy of Blotting.

Preclinical imaging workshop, University of Cape Town

Following the inauguration of the Lionel Opie Preclinical Imaging (LOPI) Core Facility, the acquisition of a sensitive ultrasound machine was made possible. Dr Sandra Meyer from Visualsonics, Germany, hosted a 2 day workshop demonstrating live imaging acquisition of the cardiac function in mice and rats with the Vevo 2100.

Workshop on Langendorff and telemetry techniques, University of Cape Town

In collaboration with LASEC and ADInstruments, SASCAR organised a full day workshop demonstrating the Langendorff system, small animal telemetry, human physiology telemetry using ADI hardware and software.

SASCAR at the ISHR meeting

For the second year in a row, SASCAR has been invited by the International Society for Heart Research (ISHR), European section to hold a joint session at their annual meeting in Bordeaux, France, 1 - 4 July 2015. In this session, dedicated to cardiovascular biomaterials and regenerative medicine, Prof Neil Davies from the University of Cape Town delivered a talk on injectable biomaterials therapy for heart failure. Another internationally acclaimed speaker in this session was Prof Thomas Eschenhagen (University of Hamburg, Germany) who delivered a talk on engineered heart tissues for cardiac repair. Despite the heatwave in Bordeaux on that day, and the lack of air conditioning in the conference room, the session was extremely well attended.

We have now received approval for a SASCAR session at the next European ISHR meeting that will be held in Hamburg, July 2017. Of note, no joint session could be held in 2016 due to the fact that the European section does not organise a meeting in Europe when a world ISHR meeting is held (every 4 years).

The expenses of SASCAR over the past 2 years have been limited in order to save for the organisation of the European-South African Cardiovascular research workshop that will be held in September 2016. For the third time since 2010, SASCAR has partnered with the European Society of Cardiology working Group in cellular biology of the heart to organise this workshop that aims to highlight the work of our young researchers and favour collaborations between South African and European researchers.

In September 2016, it will be time for me to step down as the President of SASCAR. I have felt very privileged to initiate and lead this Society which, in my opinion, has brought Cardiovascular Researchers together with the aim of contributing to the education of our young researchers. I wish Prof Neil Davies, our new President, all the best. I would also like to take this opportunity to thank the extremely dedicated past, and current, Executive Committee Members who have spent so many hours away from their families to ensure that this Society achieves its goals.

Prof Sandrine Lecour, Chairperson, SASCAR

SOUTH AFRICAN SOCIETY OF CARDIOVASCULAR INTERVENTION, SASCI

It is my honour to report on Society activities in the current and ever changing health care environment.

I would like to thank SASCI members for attending the AGM during AfricaPCR (March 2016) and for their contribution to our strategic direction. A society is only as strong as its members and we are highly reliant on your willingness to get involved in order to fulfil our role.

The current SASCI Executive Committee consists of Drs D. Kettles (President), F. Hellig (Ex-officio President), A. Horak (Vice President), C. Badenhorst (Treasurer), M. Abelson (Secretary), S. Khan, G. Angel, M. Ntsekhe, C. Zambakides, J. Vorster and JP Theron as well as Dianne Kerrigan (ISCAP). Thank you to the SASCI Executive Committee, your contributions make us what we are. Industry Representatives elected at the SASCI AGM 2016 were Andrew Sartor, Mark Savary and Hans Buyl.

The following Noteworthy activities took place since October 2015: (For the sake of brevity, just a point by point summary!)

Macro Environment

- Competition Commission (CC) HMI Hearings – SASCI Written Submissions and Verbal Presentation.
- SASCI PPC has been exceptionally active with JP Theron focusing on CC / Global Fee / Coding issues.
- TAVI coding basket and alternate payment gateway are being considered through a third party managed care organisation.
- Much energy into the Discovery project: The outcome very disappointing at this time!

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- STEMI SA Pilot study (planning second half of 2016 and roll out early 2017) under the leadership of Adriaan Snyders. Substantial funding already secured, and we are hoping for a roll out of this study at four “hub” sites.

Guidance and guidelines:

- TAVI Consensus Statement 2016 (published SAMJ September 2016), prepared by Dr Helmut Weich and colleagues.
- Pending finalisation – SASCI Statement on Competence Required in Cathlab as Primary Operator. This document is under consideration as we have received a number of complaints regarding operators in private catheterisation laboratories allegedly demonstrating inadequate skills to render safe provision of services. The private health industry has asked us for clarification regarding what we would consider adequate training.

Specialist Interventional education:

- 2 Day CTO Course (January 2016) with 70 delegates including 10 from Namibia, Kenya, Botswana, Ethiopia.
- VPP 2016 Gus Pichard 5 evening lectures in metropolitans with SA Heart Branches (n = 200 @ 4 meets).
- SASCI attendance and involvement in AfricaPCR, EuroPCR, TCT and SA Heart continue to grow.
- STEMI Education in Africa - SA Faculty contributed to STEMI Africa Live! Course in Nairobi.

Fellows education:

- VPP Prof Gus Pichard: 2 months at all RSA Medical Schools.
- AfricaPCR 2016: 6 Fellows Sponsored.
- SCAI Fellows 2015: Jane Moses, Mukesh Chhiba, Andile Xana and Parmanand Naran.
- SCAI Fellows 2016: Khulile Moektsi, Rohan Lutchman, Mohamed Alteer and Anil Kurian.
- RC Fraser International Fellowship (UK) 2016: Derrick Aucamp (August), 2017 TBC.
- SASCI Annual Fellows Workshop 2016: 35 Dr Fellows RSA, 2 Mauritius, 1 Kenya and Zambia.

Allied education: also see ISCAP report:

- ISCAP National Lectures including BLS and ALS and Africa outreach to Namibia Allied.

FMC education:

- STEMI SA education continues across RSA in smaller towns with + 700 FMC delegates at 14 meets.

Research and data capture:

- SHARE TAVI remains an example of how data capture can succeed in our environment (when aligned with patient selection and reimbursement).
- STEMI SA registry (UP Prof Rhena Delport) continues to grow and include paper based, editable PDF and soon electronic data capture through the STEMI India software solution.

Corporate supporters remain committed to our society and cardiology education:

- Amayeza, Angio Quip, Aspen, AstraZeneca, Baroque, B Braun, Biotronik, Boehringer-Ingelheim, Boston, Ascendis, Condor, Disavascular, Edwards, Medtronic, Obsidian, Paragmed, Pharma Dynamics, Sanofi, Surgical Innovations, Siemens, Torque Medical and Volcano.

SASCI remains financially strong with adequate cash on hand:

- Income of R3.6 million, marginal loss of R134 000 year on year with R3 million spent on educational activities in 2016 Tax Year.
- SASCI PPC coding support and legal guidance is a new noteworthy additional expense.

I wish to assure our members that the SASCI Exco will continue to work tirelessly to represent your interests, as well as to educate and inform interventional cardiologists in our country. We deeply value, and need your support. Please feel free to get involved at any time. By all means, let us know if, and where, we can be of further assistance to you as you deliver the best service possible to your patients. We need your feedback with respect to both our successes and our failures.

We are, as always, indebted to our corporate sponsors who have supported us well at a time of change and financial stringency. Without funding, we cease to be. We have been prudent with our funding, and delivered as promised in the ventures undertaken.

Exco members have worked tirelessly, in multiple ventures and with no remuneration other than the satisfaction of an important job well done. I cannot thank you as you deserve. Particular thanks to our past president, Farrel, for great encouragement and support in my role.

My grateful thanks to George and his management team: there have been a few rough moments this year, but you have continued to deliver.

It has been an honour for me to serve in this position.

Dave Kettles, President, SASCI

SOCIETY OF CARDIOTHORACIC SURGEONS OF SOUTH AFRICA

The Executive of the Society has been overwhelmed by the arrangements for the 26th Annual Conference for the World's Society of Cardiothoracic Surgeons, which will be hosted by the SOCTS from 8 - 11 September 2016. As a result of the privilege and the opportunity to host this meeting, EXCO decided to postpone the 2015 meeting so that it would run concurrently with the 2016 meeting. The organising of the meeting has been a challenge on various levels, most of all the financial funding of the meeting, as industry support is dwindling rapidly and it becomes harder and harder for industry to support academic meetings, due to various legal constraints imposed by the corporate head offices of multinational organisations.

Despite this, a very comprehensive programme and what promises to be a very successful meeting, has been arranged. The meeting this year will share the stage with our Colleagues in Cardiology and a forum has been created which accommodates both disciplines in combined sessions, as well as allowing for presentations on focused topics in breakaway sessions. The Allied Professions of Cardio Pulmonary Perfusion Technology and Cath Lab Technologists have also been catered for in the programme.

Database

As before, the database remains a challenge and currently lies within the Share Registry. A functional database is now also available at the University of the Free State, under the direction of Francis Smit. It remains a challenge for the Society to achieve its ultimate goal of having a national database, regrettably this aim has not been achieved yet.

Other activities

The Society has been involved in discussion with the Israeli Cardiothoracic Society and an association has been established whereby surgeons from both countries will be afforded the opportunity of visiting each other under direction of the Society. This is not an affiliation nor an alliance, but merely an association between 2 societies to provide a platform for mutual collaboration at various levels. This will be privately funded by the Society and is available to surgeons of both countries on a structured basis. The Society has formed this association with the pure goal of sharing surgical and medical knowledge and has absolutely no other affiliations. The Society has been invited to attend and has, indeed, attended the 2016 Meeting of the Israeli Cardiac Society and at the Annual WSCTS. There will be a joint session between Israeli and South Africa Surgical Societies.

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DSPs and PPNs

The EXCO has established a platform, together with the representatives from SASCI and the Private Practice Committee of SA Heart, in order to engage the Funding Industry in discussions regarding the undesirable situation of Designated Service Providers and Preferred Provider Networks. It is felt that these arrangements, which are financial arrangements between Funders and Hospital Groups, are not in the best interest of patients and members of the Funding Industry and can only lead to the fragmentation of cardiac care. At the root of the problem is that not all Healthcare Professionals and not all hospitals are DSPs or PPNs and therefore, there will be a non-alignment in the appointment between a Healthcare Professional and a hospital in which he works. Not all PPN Hospitals offer facilities for certain interventions and not all Professionals have the same clinical acumen and as such, these PPN Hospitals usually do not cater for highly specialised medical and surgical procedures. The system as it stands also needs to address the Medico Legal responsibility as well as competition concerns. The Society has involved Discovery as a starting point and has canvassed legal opinion. The process is ongoing.

Finally, the Executive remains embroiled in the total onslaught of the Funding Industry, in trying to preserve an equitable situation of remuneration for those in Private Practice as well as the Public Sector. It is an ongoing David and Goliath battle, one in which the Healthcare Professionals are certainly the "David".

Robert Kleinloog, Executive, Society of Cardiothoracic Surgeons

SPECIAL AFFILIATED GROUP REPORT

LIPID AND ATHEROSCLEROSIS SOCIETY OF SOUTHERN AFRICA, LASSA

The Lipid and Atherosclerosis Society of Southern Africa (LASSA) remains affiliated with both the South African Heart Association (SA Heart) and the Society for Endocrinology, Diabetes and Metabolism of South Africa (SEMDSA). The association with the former will be strengthened by a LASSA session at the planned SA Heart Congress in Cape Town. LASSA remains a small group, operating chiefly as an academic body covering inherited disorders of lipid and lipoprotein metabolism, atherosclerosis, nutrition, epidemiology and pharmacotherapy. Concerns about sustaining the expertise in lipidology remain as academic careers are not available to attract clinical or scientific graduates. The committee members have not changed recently as they are usually elected at the bi-annual meetings. Membership with the International Atherosclerosis Society will continue.

Expertise in the diagnosis and management of severe dyslipidaemias remains mainly at the Groote Schuur (Cape Town) and Charlotte Maxeke (Johannesburg) teaching hospitals. A few other teaching hospitals also manage severe dyslipidaemias, but have less active clinical and laboratory services.

South African centres continue to contribute to the study of new pharmacotherapy in homozygous and heterozygous familial hypercholesterolaemia, familial chylomicronaemia and other lipid disorders associated with high cardiovascular risk. Agents studied include: lomitapide (MTP inhibitor), monoclonal antibodies to PCSK9, volanesorsen and omega-3 supplements. South Africa has contributed substantially to the publication of study results in prestigious journals. For South Africa to continue participating in these studies, it is essential to retain and expand the capability to make accurate clinical diagnoses and confirm them on a molecular level. Co-operation between the private and public sector is important to ensure all patients access lipid expertise, but neither of these sectors is supporting the investigation and treatment of severe disorders for best care.

A.D. Marais, University of Cape Town and National Health Laboratory Service, President, LASSA

F.J. Raal, Charlotte Maxeke Johannesburg Academic Hospital and University of Witwatersrand, LASSA

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BRANCH REPORTS

KWAZULU-NATAL BRANCH

The KwaZulu-Natal branch remains active and our aim is to continue the good work done by the previous committee.

To this end, we continue to host quarterly meetings with a mix of visiting and local speakers.

The activity of the branch has been dominated by Adult Cardiology but we are trying hard to get greater involvement from the other disciplines, specifically Paediatric Cardiology.

New ideas/projects are envisaged and are still in the planning stages but will hopefully come to fruition soon.

The involvement of our younger colleagues is encouraging but I appeal to the senior members to remain active.

At the last AGM, the following office bearers were elected for the next 2 years:

Chairperson: Dr R K Naidu

Secretary: Dr R Dyer

Treasurer: Dr J Patel

Financially, the branch remains in a good and positive position.

R.K. Naidu

JOHANNESBURG BRANCH

The Johannesburg branch committee remains as:

Dr David Jankelow (President and Treasurer), Prof Antoinette Cilliers (Secretary), Dr Gcina Dumani, Dr Hopewell Ntsinjana, Dr Eric Klug, Dr Andrew Thornton, Dr Darryl Smith, Prof Pravin Manga, Dr Keir McCutcheon, Dr Ahmed Vachiat, Dr George Dragne and Dr Gavin Angel.

Dr Keir McCutcheon has relinquished his position on the committee as he is presently overseas on an interventional cardiology fellowship. We thank him for his service to the branch.

Our major project at this stage is the scientific organising committee of SA Heart 2017. Our theme is "Fundamentals to innovation". Our aim is to showcase that which is innovative in cardiovascular medicine, and hopefully that which is innovative in this regard, in Africa and South Africa. We would like to make this congress more interactive than previous meetings. We have formed our committee and the congress logo will be finalised in the next few days. My blue print/vision for the congress will soon be released.

On 16 March 2016, the Johannesburg Branch co-hosted Prof Augusto Pichard (Annapolis, USA), who was SASCI's 2016 Visiting Professor. Prof Pichard's lecture was "Revascularisation in 2016, strategies and techniques in the catheterisation laboratory".

The Annual Fellow's Cardiology Fellow's morning was held on 16 April 2016. This was a very informative meeting. All speakers were awarded a R1 000 honorarium. The lectures included:

- Dr R. Meel; Baragwaneth Hospital, Division of Cardiology
"An Epidemic of Infective Endocarditis"

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- Dr Y. Chimalizeni; Pretoria Paediatric Cardiology Group
"HIV Vasculopathy - a report on 2 cases"
- Dr T. Maluleke; Charlotte Maxeke Hospital, Division of Cardiology
"Something Old, something New and yet something Refreshing"
- Dr M. Koch; Charlotte Maxeke Hospital; Division of Paediatric Cardiology
"The Wrecking Ball Genes"
- Dr D. Zachariah; Charlotte Maxeke Hospital, Division of Cardiology
"Hitting 2 birds with ONE stone"

Our next meeting is scheduled for 3 September 2016 and this will be a symposium on women's heart health, in addition to celebrating women in cardiology.

We plan to hold our AGM in November 2016.

Our financial position remains very good. See the financial statement attached. Our total bank balance currently is a healthy R634 115.96. Excess of income over expenditure is R26 983.47.

Pharmadynamics are the sponsor of our meetings and we are extremely appreciative for this financial support, without which it would be difficult to hold our symposia.

I am grateful to have once again served in the positions of President and Treasurer of the Branch.

David Jankelow, President and Treasurer

PRETORIA BRANCH

The next SA Heart Pretoria Branch Chairperson (and office bearers) will be elected during the AGM at the SA Heart Congress 2016. At this stage however, we have 2 vacant positions i.e. secretary and treasurer. Although these functions are mostly handled by the Medsoc branch office, we would still like to fill the positions.

It brings me great pleasure to report back on our Cardiology meetings held in 2016.

The first meeting took place on 24 February at the regular venue, Kream. Twelve doctors attended the meeting comprising of a lecture given by Prof Gert Saayman on the topic "Postmortems: Pitfalls in Cardiology". The attendees found the topic very informative.

Our second meeting was held at the Villa Sterne Boutique Hotel in collaboration with SASCI. We hosted the legendary interventional cardiologist from Washington, Prof Augusto Pichard. The topic of his talk was "Revascularisation in 2016: Indications, strategies and techniques in the laboratory" with the aim of interactively sharing knowledge and experience while focusing on their clinical situation, particularities, local experience and constraints as well as best available evidence. This was done in an effort to reach consensus with South African colleagues on a method of reasoning that may help the group to develop answers to the fundamental questions that impact them daily. The 2016 VPP evening lecture series was definitely a huge success according to the feedback we received from the 43 delegates who attended the meetings. It was a great presentation which led to lively interactive discussions.

For our third meeting we have asked Dr Ruan Louw, a cardiologist and heart rhythm specialist (Electrophysiologist), to talk about "Atrial fibrillation management":

- Is the old rate vs. rhythm debate still applicable with recent advances in therapy? The difficult patient: which anticoagulant and is there any benefit in appendage closure?

Our fourth, and final, meeting will be held on the November at Villa Sterne Boutique Hotel in Waterkloof. We invite all our members to attend, including the Allied Professionals working in the Cathlab environment.

Members must please note that all our meetings are CPD accredited.

We also offer support the SA Heart Congress 2016 in the form of a financial sponsorship. Please contact George at george@medsoc.co.za for more information. Please contact myself (drioebrahim@gmail.com) or the Medsoc office (events@medsoc.co.za) if you wish to make a contribution at future meetings, or to propose appropriate programmes for Pretoria.

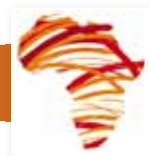
The current cash on hand is stable year on year at R120 000 which ensures that the Branch has a small buffer to absorb some costs and maintain administrative support. The CPD meetings are offered on a break even basis and I would like to thank Pharma Dynamics for their continued support and for making this multi-evening lecture planning possible.

Iftikhar Ebrahim, Chairperson

Annual reports from other Committees, Interest Groups and Regional Branches are available on the SA Heart website at www.saheart.org.



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LOUIS VOGELPOEL TRAVELLING SCHOLARSHIP

Applications are invited for the annual Louis Vogelpoel Travelling Scholarship for 2017. An amount of up to R15 000 towards the travel and accommodation costs of a local or international congress will be offered annually by the Western Cape branch of the South African Heart Association in memory of one of South Africa's outstanding cardiologists, Dr Louis Vogelpoel.

Louis Vogelpoel was a pioneer of cardiology in South Africa who died in April 2005. He was one of the founding members of the Cardiac Clinic at Groote Schuur Hospital and University of Cape Town. He had an exceptional career of over more than 5 decades as a distinguished general physician, cardiologist and horticultural scientist. Dr Vogelpoel's commitment to patient care, teaching and personal education is remembered by his many students, colleagues and patients. Medical students, house officers, registrars and consultants benefited from exposure to his unique blend of clinical expertise, extensive knowledge, enthusiasm and gracious style.

A gifted and enthusiastic teacher he was instrumental in the training of generations of undergraduates by regular bedside tutorials. He served as an outstanding role model for postgraduates and many who have achieved prominence nationally and internationally acknowledged his contribution to the development of their careers.

All applications for the scholarship will be reviewed by the executive committee of the Western Cape branch of the South African Heart Association. Preference will be given to practitioners or researchers in the field of cardiovascular medicine who are members of the South African Heart Association and are resident in the Western Cape.

Applications should include: (1) A brief synopsis of the work the applicant wishes to present at the congress and (2) A brief letter of what the applicant hopes to gain by attending the relevant congress. The applicant

should submit an abstract for presentation at the relevant national or international meeting. Should such an abstract not be accepted by the relevant congress organising committee, the applicant will forfeit his or her sponsorship towards the congress. (Application can however be made well in advance of the relevant congress but will only be awarded on acceptance of the abstract.) A written report on the relevant congress attended will need to be submitted by the successful applicant within 6 weeks of attending the congress. The congress report will be published in the South African Heart Association Newsletter.

‘A gifted and enthusiastic teacher, he was instrumental in the training of generations of undergraduates.’

Applications should be sent to Prof Johan Brink, President of the Western Cape branch of the South African Heart Association, Chris Barnard Division of Cardiothoracic Surgery, Cape Heart Centre, Faculty of Health Sciences, University of Cape Town, Anzio Road, Observatory 7925 or alternatively email: johan.brink@uct.ac.za.

Previous recipients of this prestigious award include Sandrine Lecour, Roisin Kelle and Liesl Zühlke.

Applications close on 31 January 2017.

TRAVEL SCHOLARSHIPS OF THE SOUTH AFRICAN HEART ASSOCIATION

You are cordially invited to submit your application for the SA Heart Travel Scholarship of the third term 2016 to reach the SA Heart Office by 30 September 2016.

This scholarship is available to all members and associate members residing in South Africa. Its primary goal is to assist junior colleagues, thereby ensuring their continued participation in local or international scientific meetings or workshops.

REQUIREMENTS

- Applicants must be fully paid-up members/associate members for at least one year.
- Applications must include the following:
 - Full details of the meeting/workshop;
 - An abbreviated CV of the applicant; and
 - A breakdown of the expected expenses.
- Applications must reach the Association **a minimum of 3 months ahead** of the scheduled event.

RECOMMENDATIONS

- Acceptance of an **abstract at the scientific meeting** to be attended. (If acceptance of the abstract is pending, the application must still be submitted 3 months prior to the event with a note stating when the approval is to be expected. In such a case the scholarship might be granted conditionally – and proof needs to be submitted once the abstract has been accepted.);
- 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; and
- Applicants younger than 35 years of age.

APPLICATIONS MUST BE ADDRESS TO:

The President of the South African Heart Association
PO Box 3213
Matieland
7602
And submitted electronically to erika@saheart.org

Applicants that have benefited from a SA Heart Travel Scholarship in the past 3 years need not apply. Preference is further given to members who have never benefited from a SA Heart Scholarship.

THE SOUTH AFRICAN HEART ASSOCIATION RESEARCH SCHOLARSHIP

The research scholarship is available to all full and associate members of SA Heart Association living in South Africa. It is primarily intended to assist colleagues involved in much-needed research to enhance their research programmes.

REQUIREMENTS

- Applicants need to be fully paid-up members/associate members in good standing for at least one year.
- Applications must include
 - The applicant's abbreviated CV;
 - A breakdown of the anticipated expenses;
 - Ethics approval; and
 - Full details of the research.

RECOMMENDATIONS

- Publications of related work in a peer-reviewed journal in the preceding year;
- Applicants from a previously disadvantaged community; and
- Applicants younger than 35 years of age.

APPLICATIONS MUST BE ADDRESS TO:

Education Standing Committee
South African Heart Association
PO Box 3213
Matieland
7602

And submitted to the SA Heart Office electronically: erika@saheart.org

THE SELECTION PANEL WILL REVIEW APPLICATIONS ANNUALLY AND THE CLOSING DATE IS 30 SEPTEMBER 2016.

One scholarship to a maximum amount of R50 000 will be awarded annually.

APPLICATIONS WILL BE ASSESSED ACCORDING TO THE ACCOMPANYING RESEARCH PROTOCOL WHICH SHOULD INCLUDE:

- An abstract (maximum 200 words);
- A brief review of the literature (maximum 200 words);
- A brief description of the hypothesis to be investigated (maximum 100 words);
- A detailed methodology (maximum 500 words); and
- References.

Members who have received this scholarship in the past 3 years need not apply.