It was in September 1998 in Durban that the Cardiac Arrhythmia Society of Southern Africa, CASSA, was constituted. This was the culmination of the efforts of a number of individuals with a special interest in cardiac arrhythmology, most of whom are still active within CASSA today. For about 10 years prior to this, a number of attempts had been made to form a cardiac arrhythmia society. A number of meetings dedicated to cardiac arrhythmias had been held. Notable amongst these was an arrhythmia course with 8 international speakers and over 300 participants held in Johannesburg 1995, as well as one held at Groote Schuur Hospital by Rob Scott Millar in 1997. A major milestone was the incorporation of CASSA as a special interest group of the South African Heart Association. This occurred in 2000 and ratification occurred at the South African Heart Association Meeting held in Stellenbosch at that time.

The basic aims of this Society are to promote the optimal diagnosis and treatment of disturbances in cardiac rhythm. Foundations of such treatment are, of course, based on understanding the nature of arrhythmias and this derives from a search both “at the bench and at the bedside”. Another cornerstone of therapeutic excellence depends on the recognition of arrhythmias and application of the most effective (and usually most modern) methods of treatment. No advances, however, can have an appropriate clinical impact without dissemination of the skills through teaching. Thus CASSA is deeply and passionately committed to teaching at all levels from medical students and general practitioners to super-specialists. The importance of incorporating allied professionals in this process is fully recognized by CASSA, as witness numerous teaching programs undertaken by our society.

To accomplish this aim CASSA has held numerous formal didactic and scientific meetings for all of the sub-groups at regional level; mainly Cape Town and Johannesburg. CASSA has participated with national meetings held in conjunction with the Heart Association since our incorporation as a Special Interest Group. In 2005 CASSA hosted the South African Heart Association Meeting held at the Drakensberg.

The lack of knowledge concerning arrhythmia management at GP level, often associated with those of other medical sub-specialties such as anesthesiology, has also been addressed by the holding of a standardized course at “road shows”. These have been held at various parts of the country, with a big emphasis on the Platteland.

It is, however, at the levels of the universities and medical schools that we find a major and totally non-understandable lack of teaching. In only 1 medical school in South Africa is there a full program running at undergraduate and post-graduate levels; this is at UCT. In Natal there are the beginnings of a program with the help of UCT. For the rest of South Africa, from what we can see, there is little or no teaching of modern arrhythmology.

The field of arrhythmia management is a rapidly expanding one and the interface between modern therapies for arrhythmias and heart failure is ever closer: We are not producing the arrhythmologists of the future; this is totally unacceptable.

The second major CASSA thrust has been the attainment of high standards of practice in our discipline in South Africa. To this end we have started a program of accreditation. We have started in the field of invasive electrophysiology and plan to expand from there to areas such as complex pacing and ICD implantation.

The last 10 years has seen a steady development. Our way forward has been greatly aided by our relationship with SAHA as a Special Interest Group. Through SAHA we wish to make closer contact with the European Heart Rhythm Association; we currently do have a close liaison with the European Cardiac Arrhythmia Society (ECAS). We look forward to continued and meaningful growth for our discipline in South Africa but urgent steps are needed, particularly in the area of teaching at the universities.

After the successful completion of a joint meeting of the National Executive of South African Heart Association and the Executive Committee of Cardiac Arrhythmia Society of Southern Africa that would become a special interest group of the association: