

SASCAR NEWS

SASCAR constantly endeavours to keep its members updated on critical areas related to research and the imminent workshop on statistics is particularly pertinent. We are also looking forward to the joint ISHR (International Society for Heart Research)/SASCAR session at the 34th Annual Meeting of the European Section of ISHR in Hamburg this July.

STATISTICAL PRINCIPLES AND STATISTICAL SOFTWARE TRAINING WORKSHOP FOR POST-GRADUATE STUDENTS

Increasingly, concerns are being raised that there may be a crisis of reproducibility in the biosciences. The extent of the crisis is contested and the causes are certainly complex, ranging from "pressure to publish" to poorly characterised reagents. What is generally accepted is that poor experimental methodology plays a role, with the use of inappropriate statistical approaches being a key contributory factor.

With these concerns in mind, SASCAR felt it was an opportune time to schedule a statistics-focussed workshop aimed at post-graduate students. A workshop will therefore be convened by Dr Wayne Smith of the North-West



Dr Wayne Smith
North West University



Prof Barbara Huisamen
University of Stellenbosch

University which will be held on 30 June at the Chris Barnard Building, University of Cape Town Health Faculty. The workshop will be a 1-day course and will include sessions on the basic sciences and population-based studies.

JOINT ISHR/SASCAR SESSION AT THE 34TH ANNUAL MEETING OF THE EUROPEAN SECTION OF ISHR (HAMBURG)

SASCAR will again host a joint session at the annual meeting of the International Society for Heart Research



Continued on page 122

SASCAR NEWS continued

(ISHR) European section that will be held in Hamburg, Germany, from the **24 - 27 July 2017**. At this session, dedicated to signalling in cardiometabolic diseases, Prof Barbara Huisamen from the University of Stellenbosch will deliver a talk on the role of ataxia-telangiectasia mutated (ATM) in insulin resistance associated with obesity.

Patients born with the ataxia-telangiectasia syndrome (A-T), a rare neurodegenerative autosomal recessive disease, have a very high incidence of insulin resistance/type 2 diabetes mellitus, atherosclerosis and ischaemic heart disease. A-T is caused by a mutation in the ATM protein resulting in either no- or low-levels of ATM or a truncated, dysfunctional protein. Prof Huisamen, her co-workers and other collaborators have observed that in rats, a high fat diet (HFD) coupled with obesity and insulin resistance, results in downregulation of ATM protein expression. This finding was replicated in the heart and myocardial mitochondria. The significance of altered ATM expression in obesity, a major risk factor for the development of ischaemic heart disease and insulin resistance, is still unknown. They therefore embarked on a project to determine whether this low ATM expression would impact on myocardial physiology. To date, they have shown the following:

- HFD lowered expression of ATM, IRS-1, PI-3K, PKB/Akt, AS160 and AMPK, all intermediates in the process of insulin signal transduction or myocardial glucose transport.
- This profile could be mimicked by perfusing a normal rat heart with KU60019, a specific inhibitor of ATM.
- HFD cardiomyocytes were insulin resistant; insulin-stimulated 2-deoxyglucose (2DG) uptake was 17.6 ± 4.6 vs. 27.5 ± 3.2 pmol/mg prot/30min in controls ($p < 0.05$).
- KU inhibited insulin-stimulated 2DG uptake in control and HFD cells to 17 ± 4.1 and 12.3 ± 3.9 pmol/mg prot/30min respectively ($p < 0.05$).
- Besides a nuclear and cytosolic distribution, it was demonstrated that ATM is also localised to the inner mitochondrial membrane.
- Activation of ATM by insulin significantly increased the oxphos rate of mitochondria ($p < 0.05$, $p = 0.0098$) while inhibition with KU60019 lowered basal as well as insulin-stimulated oxphos rate, implying a role for ATM in the active respiration of mitochondria. Furthermore, KU60019 uncoupled mitochondria and upregulated UCP3 expression.

Although current evidence has not conclusively demonstrated a causal role for low ATM and myocardial dysfunction in insulin resistance, there is rather strong evidence that low ATM in the heart has the potential to precipitate insulin resistance as well as myocardial pathology.

SASCAR is also pleased to report that there will be 4 post graduate students (listed below) from South Africa presenting their research at this international conference.

1. Baker M 2016. Is there a reproducibility crisis? Nature 533: 452-454.
2. Flier J.S. 2017. Molecular Metabolism 6: 2-9.
3. Espach Y et al. 2015. ATM protein kinase signalling, type 2 diabetes and cardiovascular disease. Cardiovasc Drugs Therap 29: 51-58.
4. Huisamen B et al. 2016. Is low ATM protein responsible for myocardial insulin resistance associated with obesity? Cardiovasc Res 111 (suppl 1): S88-S89.

SAVE THE DATE

The **18th annual South African Heart Association congress** will take place in Johannesburg from the **9 - 12 November 2017**. Specific sessions focussing on basic cardiovascular research will form part of the programme. Additional information can be viewed on <http://saheartcongress2017.co.za>.

Executive Committee

Prof Neil Davies (Chair), Dr Derick van Vuuren (Secretary), Dr Bali Sishi, Prof Sandrine Lecour, Dr Wayne Smith, Prof Karen Sliwa, Prof Faadiel Essop



POPULAR CONGRESSES FOR 2017/2018

CONGRESS	DATE	CITY	COUNTRY
MASTERCLASS IN PAEDIATRIC CARDIAC SURGERY - HOW DO I TEACH IT http://www.netcarehospitals.co.za	12 - 14 July 2017	Netcare Head Office, Sandton	South Africa
CONGRESS OF THE EUROPEAN SOCIETY OF CARDIOLOGY http://www.escardio.org/ESC2017	26 - 30 August 2017	Barcelona	Spain
ANNUAL CONGRESS OF HEART DISEASES 2017 http://www.heartdiseases.alliedacademies.com	18-19 September 2017	Toronto	Canada
THE 2ND CAPE TOWN CARDIAC DISEASE IN PREGNANCY SYMPOSIUM http://www.hatter.uct.ac.za/event/2nd-cape-town-cardiac-disease-pregnancy-symposium	28 - 29 September 2017	Hatter Institute, Cape Town	South Africa
MRA NEW PERSPECTIVE (29TH INTERNATIONAL CONFERENCE OF THE SOCIETY FOR MAGNETIC RESONANCE ANGIOGRAPHY) http://www.mraclub.com/southafrica	4 - 6 October 2017	Stellenbosch	South Africa
PASCAR/SUDAN HEART SOCIETY/PACIFIC JOINT CONGRESS http://www.sudanheartsociety.org	8 - 11 October 2017	Khartoum	Sudan
20TH EUROPEAN CARDIOLOGY CONFERENCE http://www.cardiology.conferenceseries.com/europe	16 - 18 October 2017	Budapest	Hungary
INTERNATIONAL DEAD SEA SYMPOSIUM (IDSS) OF SPORT AND ARRHYTHMIA http://www.idss-sport.com	16 - 18 October 2017	Tel Aviv	Israel
8TH ANNUAL EMIRATES CARDIAC SOCIETY CONFERENCE http://www.ecs-acc.com	19 - 21 October 2017	Dubai	UAE
CMR CONGRESS OF SOUTH AFRICA http://www.sacmrcongress.co.za	26 - 29 October 2017	Cape Town	South Africa
TCT http://www.crf.org/tct	29 October - 2 November 2017	Denver, Colorado	United States
21ST INTERNATIONAL CONFERENCE ON CLINICAL AND EXPERIMENTAL CARDIOLOGY http://www.cardiology.conferenceseries.com	6 - 7 November 2017	Las Vegas, Nevada	United States

Continued on page 124

POPULAR CONGRESSES FOR 2017/2018 continued

CONGRESS	DATE	CITY	COUNTRY
SA HEART® 18TH ANNUAL CONGRES http://www.saheart.org	9 - 12 November 2017	Sandton	South Africa
AHA SCIENTIFIC SESSIONS http://www.scientificsessions.org	11 - 15 November 2017	Anaheim, California	United States of America
50TH ANNIVERSARY OF THE FIRST HEART TRANSPLANT http://www.londocor.co.za/index.php/events/calendar-view/medical-congress/50th-anniversary-of-the-first-heart-transplant	2 - 5 December 2017	Groote Schuur, Cape Town	South Africa
1ST INTERNATIONAL CONGRESS OF HYPERTENSION IN CHILDREN AND ADOLESCENTS (ICHCA) http://www.htpaediatrics.com	9 - 11 February 2018	Valencia	Spain
23RD EUROPEAN HEART DISEASE AND HEART FAILURE CONGRESS http://www.heartdiseases.conferenceseries.com	19 - 21 February 2018	Paris	France
JIM (JOINT INTERVENTIONAL MEETING) http://www.jim-vascular.com	22 - 24 February 2018	Milano	Italy

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.

WEBSITE LINKS

SA HEART®	www.saheart.org
CASSA	www.cassa.co.za
HEFSSA	www.hefssa.org
PASCAR	www.pascar.org
PCSSA	www.saheart.org/pcssa
SASCAR (RESEARCH)	www.sascar.org.za
SASCI	www.sasci.co.za
ACC	www.acc.org
ESC	www.escardio.org
WORLD HEART	www.world-heart-federation.org



SHARE UPDATE



SHARE has 2 main registry projects at present, namely TAVI (Transcatheter Aortic Valve Implantation) and CDM (Cardiac Disease in Maternity).

CDM REGISTRY

The CDM registry is coming to a close as we approach a full cohort of patients, and we plan to describe the first 100 patients in a manuscript towards the end of this year. Abstracts describing the patient demographics and early trends have been submitted to 2 meetings in the interim.

This project has had a long data collection cycle, as patients are tracked from presentation at a specialist joint cardiac-maternity clinic, at any stage from 6 weeks of pregnancy, to outcomes 6 months post confinement. The low incidence of maternal cardiac disease at private institutions has limited enrolment from that sector. One of the challenges with the registry has been the difficulty with follow-up of patients being referred from rural areas in other provinces, and this speaks to a widespread need within the public healthcare system for an integrated national data repository.

data for publication, and over the next few months we will be circulating a manuscript to our investigators for comment before submission for publication.

In terms of new registries - we are open to submissions for new research and data collection. There are a couple of registries in the pipeline, such as the STEMI project, which we hope will be in development before the end of the year, and we are busy finalising a dataset for the new ICD in HF registry with CASSA, driven by Dr Eric Klug. The other project we are busy with currently is a new SA Heart® survey, which looks at the state of cardiac care in SA.

Fund-raising remains a priority for the continued development and running of all the registry programs. Grants from Astra Zeneca, Medtronic and Edwards Life Sciences enabled the initial development, setup and maintenance of the registries and will still be used to support the analysis and publication of the outcomes. Going forward, the SHARE database will need to be self-funded through its projects, and will look to Industry and other partners

“ We now have enough data for publication, and over the next few months we will be circulating a manuscript to our Investigators for comment.”

SHARE-TAVI REGISTRY

The SHARE-TAVI registry has over 300 procedures recorded now, and the committee have been submitting abstracts to meetings locally and internationally. Two abstracts have recently been presented, one at the AfricaPCR 2017 in Cape Town, and the other at EuroPCR 2017, in Paris. We were recently informed that an abstract has also been accepted for the ESC 2017 meeting in Barcelona, and will be presented by Dr Hellmuth Weich on behalf of the SHARE Investigators. We now have enough

to achieve this, to enable further follow-up of existing patients out to 2 and 5 years, the development of new registries, and ongoing publication of results from the data collected, with the goal of improving patient care through the use of evidence-based decision making.

Elizabeth Schaafsma
SHARE Project Manager
South African Heart Association Registry Project

NEWS FROM SA HEART® PRESIDENT – PROF LIESL ZÜHLKE

SA Heart® was recently represented at 2 international meetings, the 1 being “Cardiology, Diabetes and Nephrology at the Limits” in Cape Town and the other, the “First International Seminar on the Child’s Heart” in Algiers, Algeria. The “at the limits” meeting yielded a series of excellent talks from faculty representing the UK, USA and South Africa. The organising committee members included Profs Derrick Yellon, Karen Sliwa and Mpiko Ntsekhe with attendees representing countries throughout Africa, South Africa, the UK and USA.

The South African Heart Association and British Cardiovascular Lecture was delivered by Prof Liesl Zühlke on the topic “Prevention, management and control of Rheumatic Heart Disease-are we at the limits?” The lecture was very well received and covered key concepts and newest datasets gathered on the subject and which are of particular relevance to the African continent. Her talk also bore testimony to the decades of work and the enormous contribution made in the field of RHD from several members who were part of the audience. At the conclusion of the lecture, a vote of thanks was passed by the President of the British Cardiovascular Society (BCS), and a book depicting the history of cardiac medicine recently published by the BCS, was handed over to Prof Zühlke.

Prof Liesl Zühlke recently travelled to Algeria to participate in the First International Seminar on Child’s Heart which took place in the capital city. Algiers is located on the coast and is reminiscent of a typical waterfront city. A 5-lane highway leads from the airport to the venue, a hillside hotel that overlooks the harbour, a vista of clay tiled roofs below



SA Heart® president Liesl Zühlke (centre) receiving the BCS publication, flanked by the president of the British Cardiovascular Society Sarah Clarke (right) and Karen Sliwa-Hahnle, immediate past-president of SA Heart®.



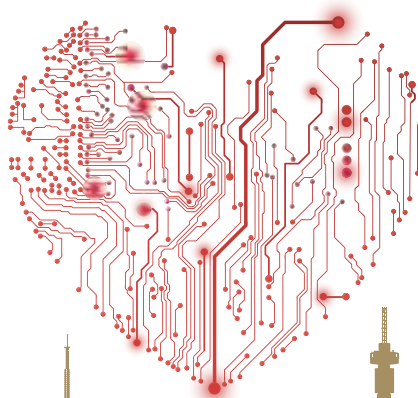
Prof Zühlke and Prof Peter Zilla (from the department of Cardiothoracic Surgery at UCT, standing, 2nd from left) formed part of the invited faculty at the First International Seminar for Children’s Heart held in Algeria.

and a lush forest beyond. The meeting brought together experts from Algeria, Morocco, France, China, India and South Africa, RSA being represented by Profs Peter Zilla and Liesl Zühlke. At present, more than 5 000 open heart surgeries are undertaken annually in Algeria with over 1 000 being paediatric cases, performed in 2 public sector hospitals and several private units. There is a thriving interventional and GUCH program and it was extremely interesting to note the progress made over the past decade. China and Vietnam (Saigon) were also represented with very interesting presentations made on the large volumes of cases, over 6 000 per year. Prof Zühlke delivered a talk on paediatric cardiology on the continent of Africa titled "The Current Situation and Future Directions". The academic proceedings were enhanced by the delicious local cuisine served at the faculty and seminar dinner that included interesting combinations such as couscous, lamb and watermelon, the social setting allowing for interesting discussions between faculty members and attendees.

At both of these meetings, our upcoming annual congress was advertised.



Prof Zühlke with the organisers of the meeting, Profs Ould Abderrahmane and M. Touati Mohamed.



CALL FOR REGISTRATION & ABSTRACT SUBMISSIONS

18th Annual SA Heart Congress 2017 | Fundamentals to Innovation

Sandton Convention Centre | Johannesburg
South Africa | 9 - 12 November 2017
www.saheart.org/congress2017



THE LIPID AND ATHEROSCLEROSIS SOCIETY OF SOUTHERN AFRICA (LASSA)

The Lipid and Atherosclerosis Society of Southern Africa (LASSA) remains affiliated with both the Society for Endocrinology, Metabolism and Diabetes of South Africa (SEMDSA) and the South African Heart Association (SA Heart®). LASSA is linked to the International Atherosclerosis Society (IAS). The committee members are placed in academic institutions and endeavour to maintain a network so that expertise is sustained and available to medical practitioners, scientists and the public. The committee is led by Prof David Marais assisted by Prof Derick Raal as secretary, Dr Z Bayat, Dr Dee Blackhurst, Prof Dirk Blom, and Dr Chiman Rajput.

LASSA ACTIVITIES

- In March last year LASSA hosted a meeting in Cape Town on familial hypercholesterolaemia which is being written up as it includes the new entity of polygenic familial hypercholesterolaemia.
- Prof David Marais was an invited speaker at the 2nd Netherlands Lipid Association meeting near Utrecht in May 2016 and visited Prof Frank Visseren at the Utrecht Medical Centre. The Dutch are very aware of severe dyslipidaemias and have made genetic investigation, as well as special treatments, available according to best practice.
- Dr A.J. van der Walt received a travel award at the LASSA meeting in 2015 and attended the 84th Congress of the European Atherosclerosis Society (EAS) from 29 May - 1 June 2016 in Innsbruck, Austria. His report indicated that attention was being focussed on the emerging monoclonal antibody against pro-protein subtilisin/kexin type 9 (PCSK9) for severe hypercholesterolaemia but that other issues such as obesity, remain important. Lysosomal acid lipase deficiency is also being recognised as a severe disorder for which enzyme replacement has become available.
- There was a session supported by LASSA at the 17th Annual Congress of SA Heart® and the 26th Annual Congress of the World Society of Cardiothoracic Surgery. Prof Kees Hovingh from the Amsterdam Medical Centre was the international guest speaker, supported by Profs Blom, Raal and Marais.

Professors Blom and Raal continue to explore new modalities of treatment for dyslipidaemia in general, and

particularly for familial hypercholesterolaemia (FH). It is clear that monoclonal antibodies to PCSK9 lower low density lipoprotein (LDL) powerfully and safely in heterozygous FH and in many cases of homozygous FH. Though expensive, this treatment could make a dramatic difference to a subset of FH in which treatment is not effective or tolerated. LASSA is in a good position to contribute to improved management for FH by making available its clinical expertise and potentially also assist with laboratory investigation where diagnosis is unclear. Dedicated lipid clinics remain only in Johannesburg and Cape Town. Since neither the National Health Laboratory Service nor private pathology laboratories provide special investigations, laboratory investigation of complex problems remain limited to the laboratory in Cape Town

“LASSA is in a good position to contribute to improved management for FH.”

There has, however, not been any improvement in support for developing lipidology at any of the health science faculties despite the increasing recognition of common disorders such as familial hypercholesterolaemia. Other serious disorders also deserve appropriate diagnosis and treatment. Attempts to raise funds through grants, donations from industry or philanthropy in order to preserve expertise, have thus far not met with success.

Prof D Marais



SA HEART® CONGRATULATES THE FOLLOWING SUCCESSFUL CANDIDATES IN THE MAY 2017 ADULT CARDIOLOGY FELLOWSHIP EXAMINATIONS



DR ALOSHA SINGH

Alosha Singh completed her undergraduate training at the University of the Witwatersrand in 2007.

She did her Internship at King Edward VIII Hospital in KwaZulu-Natal and her community service training at Kimberley Hospital Complex in the North West Province. She returned home to Johannesburg where she began training in Internal Medicine and received her FCP (SA) in 2014. In 2015 she joined the Division of Cardiology at the Chris Hani Baragwanath Academic Hospital and achieved the Certificate in Cardiology Examination in May 2017. She comes from a “family of cardiologists”, being the daughter of Victor Singh and married to Ferande Peters.

Alosha is currently completing her fellowship training at Chris Hani Baragwanath Academic Hospital and would like to continue there as a consultant. Her field of interest is Interventional Cardiology.



DR DON ZACHARIAH

Dr Don Zachariah grew up in the small town of Kinross, in Mpumalanga. He completed both his undergraduate and postgraduate degrees at the University of the Witwatersrand.

His cardiology training was done at Charlotte Maxeke Johannesburg Academic Hospital under the mentorship of Professor Manga. He plans to continue working at the same hospital as well as partaking in clinical research.



DR YUVASHNEE GOVENDER

Dr Yuvashnee Govender did her undergraduate training at the University of the Witwatersrand.

Her fellowship training in Internal Medicine was at the University of KwaZulu-Natal and she thereafter joined the Department of Cardiology at the Inkosi Albert Luthuli Central Hospital.

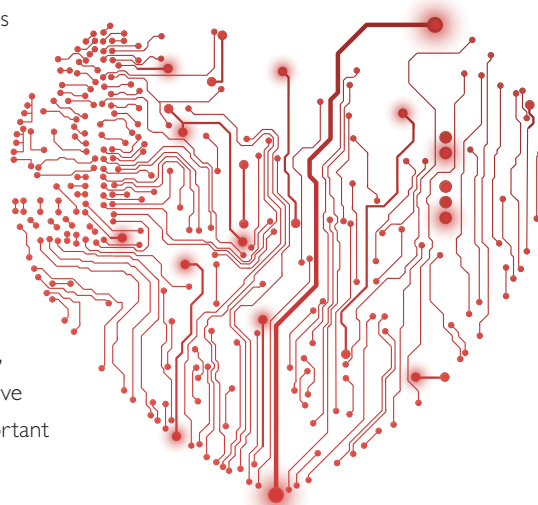
She is currently working at Greys Hospital in Pietermaritzburg, running the cardiology service and heading the cath lab at that hospital. Her passion is interventional cardiology and she hopes to advance her career path in this field.

PRESS RELEASE

REGISTRATIONS OPEN FOR THE 18TH ANNUAL SA HEART® CONGRESS 2017

The South African Heart Association is pleased to announce their 18th Annual Congress, which will take place at the Sandton Convention Centre, Sandton, Johannesburg, from 9 - 12 November 2017.

This year's congress theme is "Fundamentals to Innovation". The meeting will once again bring together national and international professionals from the cardiovascular community to network and share their knowledge and expertise on the latest trends and innovations. "We have chosen the theme in celebration of one of the greatest innovations in our discipline, the 50th anniversary of the first heart transplant. Dr Chris Barnard was not only a surgeon but a true innovator and man of courage", says Professor Liesl Zühlke, President of SA Heart®, "Our scientific programme is carefully planned to address all interests and expertise, with streams on interventional cardiology, imaging, paediatric cardiology, cardiac surgery, adult heart diseases, intensive care and nursing. As such this meeting will facilitate a number of important conversations."



The Scientific Programme Committee is ably headed by Johannesburg-based cardiologist, Dr David Jankelow who invites delegates to attend the meeting which he believes will "...challenge the horizons of cardiovascular disease and stimulate a creative exchange of ideas." The Scientific Programme aims to explore developments that will shape the future of cardiology and beyond.

For 4 days of innovative education, ground-breaking science, pre-congress workshops, interactive debates and discussions, register online at www.saheart.org to attend.

For further information, including trade partner enquiries, contact Europa Organisation Africa, telephone +27 (0)11 325 0020 or email claire@eoafrika.co.za. www.saheart.org



ESC CONGRESS IN BARCELONA, 26 - 30 AUGUST 2017

JOINT SESSION ESC – SA HEART®

If you are going to the ESC Congress in Barcelona this year, please join us for the joint session on Rheumatic Heart disease from 11h00 - 12h30 in Rabat room, Village 7 on Sunday, 27 August 2017.

SA HEART® BOOTH AT THE ESC CONGRESS

SA Heart® will once again exhibit in the ESC Plaza, booth EZ 512. If you are attending the ESC congress, make sure to drop by – or use the space to meet up with colleagues and for meetings.

YOUNG MEMBERS AT ESC CONGRESS

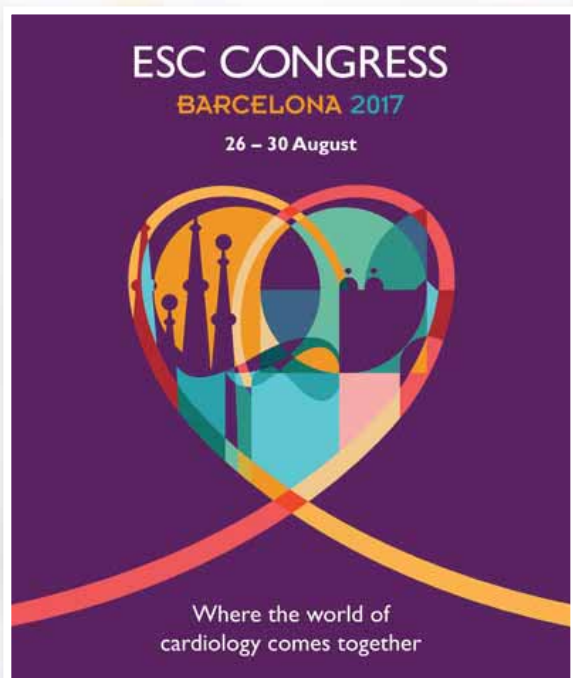
In total more than 160 young cardiologists from Affiliated Cardiac Societies will attend ESC Congress in Barcelona through this programme. Members have already been contacted by the ESC Registration team and they will receive additional information on how to activate their membership benefits this month.

Six members of SA Heart® have been accepted under this programme and we are looking forward to their feedback from this experience.

ESC PROFESSIONAL MEMBERSHIP – ADDITIONAL BENEFITS

ESC Professional Members will benefit from an upgraded ESC Congress experience. This includes a 125 euro discount on the standard registration fee, access to the ESC Professional Members' Lounge and exclusive net-working events with ESC leaders.

Contact the membership team for more details at membership@escardio.org.





18th Annual SA Heart Congress 2017 | Fundamentals to Innovation

9 - 12 November | Sandton Convention Centre
Johannesburg | South Africa | www.saheart.org



SA Heart Members

18.06.2017

Dear Colleague

I hope that you are keeping well. I am contacting you in my capacity as chairman of the Scientific Committee for the 18th Annual Scientific Congress of the South African Heart Association (Sandton Convention Centre, Johannesburg 09 - 12.11.2017).

We are now at an important juncture for our congress and a successful congress is critical to the consolidation and expansion of SA HEART®. I therefore urge you to register, attend and rally support for our meeting.

The theme for SA HEART CONGRESS 2017 is "**Fundamentals to Innovation**, which will challenge the horizons of cardiovascular disease and will stimulate a creative exchange of ideas. Our exciting program will explore developments that will shape the future and beyond.

We have a wonderful and illustrious faculty.

A provisional outline of our program includes:

- Pre-congress African Cardiovascular Summit with the Press, media, funders, deans of faculties, hospital groups and health department - to discuss the challenges of treating heart disease in Africa and South Africa.
- Pre congress echo symposium run by the Mayo Clinic.
- Pre-congress symposium, Cardiology for Non-Cardiologists.
- Opening plenary session to celebrate the 50th Anniversary of the first heart transplant. We aim to celebrate this milestone with number of short talks and then hold a brief panel discussion on innovation for the future, specifically mechanical support for intractable heart failure and the artificial heart.
- Full parallel Paediatric Cardiology Program.
- The ESC will hold two 1.5 hour sessions at SA Heart.
- Innovation in cardiovascular medicine.
- Innovations for the prevention of heart disease.
- A number of debates.

The South African Heart Association NPC 2015/378385/08 | Vat No. 4160272755
Board Members | Prof Liesl Zühlke, Prof Francis Smit, Dr Hopewell Ntsinjana, Prof Pravin Manga, Dr Paul Adams
PO Box 3213 | Matieland | 7602
Tel/Fax +27 (0)21 8896129
Email: info@saheart.org



18th Annual SA Heart Congress 2017 | Fundamentals to Innovation

9 - 12 November | Sandton Convention Centre
Johannesburg | South Africa | www.saheart.org



- Innovation in Cardiovascular Imaging.
- Coronary revascularization and Arrhythmias in 2017
- Rapid fire abstracts; how do you do it?; Soapbox

Please join us for four days of innovative education, ground-breaking science and interactive sessions.

I look forward to welcoming you to SA HEART CONGRESS 2017. It is going to be a congress to remember!

Warm regards.

David Jankelow
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AFRICAPCR 2017

A very successful AFRICAPCR 2017 congress, lauded by all attendees as the best thus far, was held at the Century City Conference Centre in Cape Town from 23 - 25 March.

There were 435 delegates in attendance, 332 from South Africa, 30 from other African countries, 34 from the Asia-Pacific region and India, 28 from Europe and 11 delegates from Latin America and the Middle East.

A new format to the meeting was introduced this year, with 2 parallel but complimentary educational tracks taking place - a learning component and an applied component. The learning component featured "Live in a Box" pre-recorded cases whereas the applied stream focused on live case transmissions. Both tracks covered procedures from first principle status all the way through to advanced level practice. The applied track live case demonstrations were transmitted from Groote Schuur hospital, bringing together a mix of local and international operators that not only highlighted local skill and talent but also lent a uniquely multinational flavour to the proceedings. A hallmark of the meeting was the highly interactive nature of the sessions that accommodated both the novice and the experienced operator, lending support to those from resource-restricted environments while allowing exposure to the cutting-edge technologies that are available. Also, unlike in previous years, the allied practitioners programme (ISCAP) was integrated into the 2 streams allowing them to participate in the main body of proceedings and thereby broadening perspectives for all.



Faculty members leading discussions, with Mo Jeilan from Kenya at the microphone.

From the opening session that was anchored around Rheumatic Valvular Heart Disease and a live case demonstration on Balloon Mitral Valvotomy, to the final "inspiring and emotional session" (if you weren't there, you really missed out!) that celebrated the phenomenal benefits made in individual patients' lives across various settings on the African continent, the meeting was truly a positive learning experience.



Ahmed Suliman from Sudan putting forth his point of view.



Harun Otieno from Kenya explaining a technique.



Participants were regularly polled for their opinions.



SASCI president, Dave Kettles (extreme left) amused by the “goings-on” in the cath lab demonstration.



Course director William Wijns (chairman of PCR) sharing a lighter moment with faculty member Nick Ossei Gerning from Wales/Ghana.



Course director Mpiko Ntsekhe engaging delegates.



Faculty members Waheeda Howell (ISCAP president) and Chris Zambakides (centre).



Faculty members Adi Horak & Mark Abelson enjoying a celebratory drink with an industry partner at the conclusion of the congress.

STEMI SA

INTERNATIONAL ARENA

South Africa became one of 21 country members of the “Stent-for-Life” (SFL) initiative early in 2016. SFL was launched in 2009 by PCR and EAPCI, a registered branch of the ESC, with the mission to “... improve the delivery of care and patient access to the lifesaving indications of primary percutaneous coronary intervention, thereby reducing mortality and morbidity in patients suffering from acute coronary syndromes.” Dr Christoph K. Naber was appointed as the Stent for Life initiative chairman for the years 2016 - 2018. He is a course co- director of EuroPCR and PCR London Valves, and course-director of AsiaPCR. He has served as a member of the executive board of the European Association of Percutaneous Cardiovascular Interventions (EAPCI) of the European Society of Cardiology (ESC), and is a member of the editorial boards of EuroIntervention and AsiaIntervention.

Under Dr Naber's leadership SFL has evolved from a primary European initiative to a global initiative, now addressing the needs of four defined regions: Europe & Russia, Africa, South- & Latin-America, and the Asia-Pacific region. Although this change was accompanied by a name change (now called “Stent – Save a Life” [S-SL]), the strategy has shifted slightly from early primary-PCI to early reperfusion, be it by means of fibrinolysis with follow-on PCI or PCI alone. The steering committee consists of board members of the four regions, industry representatives (non-voting), ambassadors and an advisory committee that includes the previous chairmen of SFL. The Africa regional board will be led by Dr. Adriaan Snyders and Dr Harun Otieno (from Kenya) for the next two years.

The initiative for Africa was launched at AFRICA PCR 2017, held on 23 March in Cape Town. The first S-SL international



“Stent – Save a Life” Africa Initiative Launch at AFRICA PCR, Cape Town, 23rd March 2017.



“Stent – Save a Life” forum meeting, EuroPCR, Paris, 15th May 2017.

forum was held at EuroPCR on 15 May 2017 with representatives from 32 countries in attendance. SASCI was represented by Sajidah Khan, Adriaan Snyders and Rhena Delpont. Presentations and discussions at the international forum focused on the successes of the SFL initiative spanning the last eight years, highlighting the significant reduction in burden of disease and also in net cost, with the implementation of SFL strategies in countries such as Romania, Portugal, Spain and the Kemerovo region in Russia. Global challenges were also addressed and presentations reflecting these challenges from Latin America, Africa, and the Asia-Pacific regions in general, as well as specific countries such as Mexico, China, and Tunisia, were discussed. Dr Naber projected the potential challenges that will have to be faced by the year 2030, with expected increases in coronary artery disease prevalence of 25% in Latin America, 40% in Asia and 70% in Africa. During the final session, collaborative solutions were discussed and representatives from Sri Lanka, Sudan and Hong Kong were given the opportunity to share their views. In his concluding remarks, Dr Naber reiterated the key goals of the initiative i.e. the assessment of ongoing projects, the finalisation of the programme's survey and the establishment of a shared clinical database. Rhena Delpont was co-opted on a global committee that was tasked with the development of a universal STEMI Registry.

AFRICA ARENA

General suggestions for the implementation of the strategies in Africa were provisionally formulated as follows:

- Develop an African vision and mission and define African strategies and outcomes.
- Implement the SFL at country level.

- Country Champions to attend the SFL forum in 2017 and present country mapping details, barriers to effective STEMI care, and a 3 years strategic plan.
- Describe the role of the government, payers and industry partners in detail.
- Define relationship with SFL Europe and AfricaPCR, and manage expectations.
- Identify strategic foci and create specific task forces to manage specific constraints.
- Investigate the relevance of an African Society for Cardiology.
- Develop an electronic central African registry for ACS.
- Monitor effect of interventions by regularly analysing the data and reporting findings.
- Analyse cost of care and find solutions for resource-constrained regions.
- Scientific research-based approach to be employed.

SA HEART®/SASCI STEMI PROJECT

The committee has resolved to:

- Develop a STEMI SHARE registry with standardised data fields across public and private institutions, that are aligned with Global Registry fields.
- Capture STEMI data in PCI-capable hospitals for an interim period in accordance with the requirements set in structured STEMI Research Protocols, with clear outcomes.
- Source retrospective data, where possible, from existing data bases.
- Improve referral networks between Hub and Spoke hospitals in the public and private domains.
- Continue with regional educational initiatives that facilitate an improved ability to diagnose and appropriately manage STEMI cases in remote regions.

‘Improve the delivery of care and patient access to the lifesaving indications of primary percutaneous coronary intervention.’

- Work towards the employment of a communication device for STEMI diagnosis, treatment and referral purposes.

REGIONAL PROGRESS MADE IN THE STEMI SA PROJECT

The Charlotte Maxeke Johannesburg Academic Hospital (CMJAH) project

Aim

The aim of the project is to improve STEMI management in the state hospitals in South Africa by implementing the following:

- Educate the STEMI teams (“Hub” and Spoke”) in the network.

Continued on page 138

STEMI SA continued

- Facilitate a STEMI network.
- Collect data to review the STEMI programme and management to improve patient care.

Proposed method to be employed

Form a STEMI “Hub” team in your hospital

- Include cardiology consultants/fellows, cath lab staff (sister in charge), casualty, administration.
- Form a STEMI “Cluster” team (Hub and Spoke).
- Include cardiologists, casualty doctors, peripheral hospital doctors, emergency medicine services (EMS).
- Facilitate a meeting with the peripheral hospitals and EMS in the network to educate on STEMI management.
- Have a follow-up planning meeting with the network to put protocols in place.
- Collect data and review.

Challenges in State hospitals

- Education
 - Early diagnosis and triage
- Network challenges
 - Peripheral hospitals
 - Communication
 - Large drainage areas and few PCI capable facilities
 - Transfer times
- Cath lab
 - Retaining Staff
 - Transport for Cath lab staff
- Fibrinolytics : Metalyse vs Actilyse
- Bed capacity
 - Beds: swop, overnight stay and transfer: “STEMI BED”
- Data collection
- Follow up

The “Hub meeting” was held on 14 May, 2017. Prof Rhena Delpport introduced the STEMI Programme and

discussion was facilitated by Dr Ahmed Vachiat on “Hub” Challenges and the way forward.

The “Spoke meeting” with the referring hospitals was held on 23 May at the Charlotte Maxeke Johannesburg Academic Hospital (CMJAH). There was a good turn out with 36 delegates from the Ekurhuleni District, Johannesburg District and the West rand attending. Emergency departments from six hospitals that refer to CMJAH were represented, as well as Lebone Gauteng EMS. Prof Manga, Dr Vachiat and their cardiology colleagues facilitated the session with excellence and addressed the following issues:

- The role of EMS.
- The benefits of early intervention to improve STEMI patients’ outcome.
- STEMI case studies.
- ECG interpretation.
- Challenges that ED doctors have at their respective hospitals.
- The importance of data capturing.
- Networking.

The delegates, depicted in the photograph below, were pleased with this initiative and pledged their commitment to be part of the follow up meetings.



“Spoke meeting” with the referring hospitals held on 23 May 2017 at Charlotte Maxeke Johannesburg Academic Hospital.

Rhena Delpport (Project Manager STEMI SA)
Adriaan Snyders (Chairman STEMI SA)

TRAVEL SCHOLARSHIPS OF THE SOUTH AFRICAN HEART ASSOCIATION

Applications for the SA Heart® Travel Scholarship for the third term in 2017 are invited to reach the SA Heart Office between 1 July and 30 September 2017.

The scholarship is for the value of up to R20 000.00 for international meetings and R7 500.00 for local meetings.

This scholarship is available to all members and associate members residing in South Africa. 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 for at least 1 year.

RECOMMENDATIONS

- Early and mid-career applicants (<5 years post-qualification as specialist and/or <5 years post-PhD qualification).
- Acceptance of an abstract/poster presentation at the scientific meeting to be attended.

CONDITIONS

- Awards will not be made for conferences or workshops retrospective to the application submission deadline. If the conference is taking place within six (6) weeks following the submission deadline, please indicate this in the appropriate place on the application form;
- It is not a requirement for the abstract to be accepted by the conference travel application closing date. Should the acceptance of the paper, including proof of registration not be available at the time of submission of the application, then a provisional award may be made pending the receipt of the acceptance of paper;
- Please ensure that applications are made as well in advance as possible (**preferably at least 6 months prior to the conference date**);
- Applicants may only submit 1 application every second year. The scholarship is for the value of up to R20 000.00 for international meetings and R7 500.00 for local meetings.
- Awards are only made in the event that a paper or a poster is being presented or in the event of a workshop attendance, that the reviewers deem the workshop attendance to be of high impact and benefit to the SA Heart® community.
- The applicant must ensure that the application is fully completed including the requirements as detailed in the checklist section. Applicants are asked to be concise and to only include applicable and relevant information;
- Awards are granted for 1 specific conference. Should that specific conference be cancelled or the full amount allocated not utilised for any reason, then the funds must revert to the SA Heart®; and
- 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.

SUBMISSION REQUIREMENTS

- Completed applications may be emailed to erika@saheart.org on or before the deadline date.
- Please request a fillable MS Word version of the application form from erika@saheart.org



**THE SA HEART® ANNUAL GENERAL
MEETING WILL TAKE PLACE
DURING THE
ANNUAL SA HEART® CONGRESS
IN THE SANDTON ICC.**

ALL MEMBERS ARE WELCOME!



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THE SOUTH AFRICAN HEART ASSOCIATION RESEARCH SCHOLARSHIP

This scholarship is available to full and associate members of the 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
 - Full details of the research
 - The completed application form - please request a fillable MS Word document from the erika@saheart.org
 - Contact details of Head of Department or supervisor/mentor

RECOMMENDATIONS

- Preference will be given to early and mid-career applicants (<5 years post-qualification as specialist and/or <5 years post-PhD qualification).

CONDITIONS

- Applicants may only submit 1 application every second year. Preference is given to those who have not had previous scholarships awarded.
- Awards are granted for one specific research project. Should that specific project be cancelled or the full amount allocated not utilised for any reason, then the funds must revert to the SA Heart®.

APPLICATIONS MUST BE EMAILED TO:

erika@saheart.org

THE SELECTION PANEL WILL REVIEW APPLICATIONS ANNUALLY AND THE CLOSING DATE IS 30 SEPTEMBER 2017.

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

SA Heart® commits to inclusive excellence by advancing equity and diversity.

We particularly encourage applications from members of historically under represented racial/ethnic groups, women and individuals with disabilities.

PASSING AWAY OF DR GCINA DUMANI



The Paediatric Cardiac Society was deeply saddened by the passing away of Dr Gcina Duman after a short illness.

Gcina was born and raised in Idutywa, in the former Transkei, where he completed his schooling and matriculated in 1991. He joined the then University of Transkei (now Walter Sisulu University) in Mthatha, Eastern Cape in 1992 and completed his MBChB in 1998.

He then specialised in Paediatrics and sub-specialised in Paediatric Intensive Care at the Red Cross War Memorial Children's Hospital in Cape Town. Throughout this time, he impressed both staff and patients with his thoroughness, his amazing attention to detail and clinical excellence as well as his persona as a gentle giant. He was shy but always polite and immensely respected by colleagues and co-workers. After completing Paediatric Intensive Care training, he developed an interest in Paediatric Cardiology. He joined Chris Hani-Baragwanath Academic Hospital in 2009 and completed his Paediatric Cardiology training in 2012. During this time, aside from developing new skills, he demonstrated a strong sense of commitment to his new sub-speciality and forged many new friendships. He was newly elected onto the executive of the Paediatric Cardiac Society of South Africa and the Fulltime Salaried Committee of SA Heart® and was part of the organising committee of the 2017 SA Heart® Association Congress.

Gcina was working as a Consultant Paediatric Cardiologist at Chris Hani-Baragwanath Academic Hospital until 6 weeks ago, when he was diagnosed with a rapidly progressive and inoperable brain tumour. He was brave and resolute to the end, spending as much precious time as he could with his children and family. He passed away in his sleep in the early hours of the 20th April 2017. He is survived by his father, 3 sisters, 2 brothers and 3 daughters. His friends and co-workers miss him dearly. The Paediatric Cardiology and SA Heart® community mourn the premature death of an immensely valued, dedicated and talented colleague.

Professor Lungile Pepeta, President PCSSA
Professor Liesl Zühlke, President, SA Heart®

SNIPPETS



For regular news and updates, please follow us on Facebook and Twitter

<https://web.facebook.com/SAHeartassociation>

@SAHeart_ZA #SAHeartforyou

NEW HORIZONS IN ECHOCARDIOGRAPHY COURSE

If you cannot attend the New Horizons in Echocardiography course



<http://www.newhorizonsinechocardiography.co.za>

in person, there is a chance to partake with live webcast and video on demand

<https://www.livemedia.gr/newhorizons17>

LOUIS VOGELPOEL TRAVELLING SCHOLARSHIP

Applications are invited for the annual Louis Vogelpoel Travelling Scholarship for 2018. 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 under-graduates by regular bedside tutorials. He served as an outstanding role model for post-graduates 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 2018.