



Newsletter from the Association for European Paediatric Cardiology

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IN THE OCTOBER ISSUE OF THE JOURNAL, THE Association provided you with its amended constitution,¹ while in the August issue we presented our “Standards for Training in Paediatric Echocardiography”.² In this issue, we are pleased to present you with the newly revised version of “Recommendations for Training in Paediatric Cardiology”,³ and “Recommendations for General Requirements for Training Institutions”.⁴ These recommendations should help to harmonize training in our specialty and its subspecialties throughout Europe, and hopefully be of help to our colleagues elsewhere in the World.

Such harmonization of training, and the requirements for centres undertaking training, will become more and more important, not only because of migration from one country to another, but also because a European certificate already exists for those working in Adult Cardiology, and a European examination in Echocardiography was introduced one year ago. The time will not be far hence when we discuss the possibility of a European examination, and a European certificate, in Paediatric Cardiology, not to mention its subspecialties. In order to improve recognition of Paediatric Cardiology, and Echocardiography in the setting of Congenital Cardiac Malformations, the Council of the Association has followed the lead of the European Society of Cardiology, and the new Association for Echocardiography which exists within the European Society of Cardiology. Together with a Committee of the National Delegates, therefore, the Council has revised the previously developed recommendations for training in paediatric cardiology as the first step in the preparation of a European examination. It has also mandated the Committee of Junior Members to motivate working groups to organize basic courses in Morphology, Echocardiography, and Arrhythmias, as well as in Haemodynamics and Catheterization. Several of our colleagues, superb teachers from different countries, have accepted the

task to start providing such courses for the trainees in our specialty. The Council is happy to announce that, in 2006, such training courses will become reality. We will publish a detailed program in the February issue of the Journal. We are also pleased to announce that Luc Mertens has taken on the responsibility of developing the European examination in Echocardiography for Congenital Cardiac Malformations as seen in fetuses, newborns, children, adolescents, and adults. This will be carried out in close collaboration with colleagues from our Association, and with members from Working Group 22 of the European Society for Cardiology. We will keep you fully informed of developments in the future issues of *Cardiology in the Young*.

At the end of August, the Annual meeting of the European Society for Cardiology took place in Stockholm. This was the fifth time that Stockholm had hosted the meeting, and there were again more than 20,000 participants. The Industrial exhibition was as impressive as usual, with several new developments presented. Numerous prearranged sessions, Focus sessions, Hotline sessions and Highlight sessions in different fields of Cardiology were of excellent quality and very instructive. Cardiology for Congenital Heart Disease in Adults had a rich, interesting and very well prepared program with 3 symposiums, 5 clinical seminars, a video presentation of cardiac anatomy and pathology, and live presentations of congenital cardiac malformations. There were also several abstract and poster sessions. Adriana Gittenberger de Groot upgraded the audience in terms of developmental cardiology, delivering a superb “Lecture on Basic Science”, which was very much appreciated.

The input of paediatric cardiology this year, nonetheless, was disappointingly small. Several adult cardiologists commented that they would have liked to see more contribution from our specialty. We recognize, however, that the World Congress, to be

held in Buenos Aires closely following this Annual meeting, will have attracted many paediatric cardiologists from Europe, perhaps taking them away this year from the European congress. We hope for more participation next year, when the World Congress in Cardiology will join the Annual meeting of the European Society for Cardiology at the meeting to be held in Barcelona. At the meeting held this year, our Association again manned a booth in the exhibition area of the National Societies. As well as several interested colleagues from adult cardiology, representatives of the industry visited our booth. Our colleagues from the Karolinska Institute in Stockholm provided important support, and we thank them for this on behalf of the Council.

In closing our Letters for 2005, we hope you all will have a peaceful and relaxing Christmas, and wish you a Happy New Year for 2006!

References

1. Constitution of the Association for European Paediatric Cardiology. *Cardiol Young* 2005; 15: 542–545.
2. Mertens L, Helbing W, Sieverding L, Daniels O on behalf of The Working Group on Cardiac Imaging of the Association for European Paediatric Cardiology. Standards for training in paediatric echocardiography. *Cardiol Young* 2005; 15: 441–442.
3. Recommendations for training in paediatric cardiology. Developed by the Professional Advisory Committee and the Council of the Association for European Paediatric Cardiology. *Cardiol Young* 2005; 15: 676–680.
4. Proposals for general requirements for training institutes in paediatric cardiology. Developed by the Professional Advisory Committee and the Council of the Association for European Paediatric Cardiology. *Cardiol Young* 2005; 15: 675.