With the implementation of the National Emergency Access Target (NEAT) program last year there have been many changes occurring in the emergency management of our patients. Started in Western Australia and modeled on a program in the NHS, the rationale for the program is that prolonged average stay in ED is associated with increased mortality and that reductions in stay in ED have been accompanied by improved outcome. Percentage compliance with the 4-hour NEAT has become an easily measured indicator of emergency department performance and thus a political football available for those looking for career-enhancing goals.

But, as with all these superficial tabloid fodder ‘performance measures’, NEAT was soon open to gaming. Initially, almost simultaneously, ‘virtual ED’ wards opened nationwide, so that the patients who were problematic to place were able to sit in the MAU/EMU/AAU for 2-3 days instead of ED, without upsetting the NEAT KPI. Our virtual ED is now bigger than our real ED. But inevitably this was not enough. While time spent in ED is easily measured, the accuracy of the diagnosis made during the critical 4 hours, and the outcomes of the patients being swept away is very hard to measure accurately, especially when the only input to these critical quality measures is from the ED itself.

How does this affect those CSANZ members on the receiving end of ED Games? One easy measure is the number of patients being emergently sent to cath lab with suspected acute MI and what proportion of these patients actually have an occluded coronary artery. In our hospital this percentage has deteriorated from approximately 80 to about 50%. It is not certain whether this fall in performance is due to NEAT but is certainly associated with its introduction (similar to the improved outcomes the NEAT fanatics highlight – one suspects the improved outcomes of MI may be from incorrectly diagnosed infarcts that miraculously survive). Alternately this might be due to heightened fear of missing an infarct, but the proportion of infarcts that are missed (and now sit in the MAU) appears to be just as frequent as pre-NEAT. It might also be due to the super-sensitive troponin assays currently popular as this gives another justification for pressing the eject button from ED as the clock ticks closer to 4 hours.

But this only accounts for inaccurate diagnosis of MI (which we can measure easily) not other missed diagnoses which may have more sinister consequences. Every clinician lately seems to have a story of how a patient was completely misdiagnosed, admitted under the wrong team and had a delay of up to 24 hours before the right diagnosis was reached and the correct treatment started. It is only a matter of time before one of these cases comes to court and some easily led judge or jury gets to decide who is responsible for this system failure – bet you its not the ED team and it would be a miracle if it is even considered to be the politically-driven administrators who so eagerly demand bad medicine for the sake of good KPIs. We must document the lunacy of NEAT as the only measure of ED performance, the increased costs and poorer outcomes it produces before it consumes us all!
On the pulse

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Views expressed in “on the pulse” are not necessarily the views of the Cardiac Society or its Board.

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Congratulations

Queen’s Birthday Honours

The Society would like to extend congratulations to Professor Garry Jennings, Baker IDI Heart and Diabetes Institute on his Officer (AO) in the General Division of the Order of Australia which was awarded for his distinguished service to medical research, particularly the prevention and control of cardiovascular disease, obesity and diabetes, to professional associations, and to education. And service to the Baker IDI Heart and Diabetes Institute.

Congratulations

Congratulations are extended to the following members who were awarded a 2013 CSANZ Travelling Fellowship to attend the 2013 Annual Scientific Meeting on the Gold Coast, Dr Alex Huang, The Alfred Hospital, Melbourne, VIC; Dr Jipin Das Kizhakkekpat, Centenary Institute, the University of Sydney, NSW; Ms Jennifer Kozlovski, Centenary Institute, the University of Sydney, NSW; Dr Marcus Lee, Waikato Hospital, Hamilton, New Zealand; Dr Ken Lu, Austin Health, Melbourne, VIC; Dr Rajiv Mahajan, Royal Adelaide Hospital and University of Adelaide, SA; Dr Arthur Nasis, Southern Health, MonashHeart, Melbourne VIC; Ms Vesna Nikolova-Krstevski, Victor Chang Cardiac Research Institute, Sydney, NSW; Dr Susie Parnham, Box Hill Hospital, VIC; Dr James Rajamani, Royal Prince Alfred Hospital, Sydney, NSW; Mrs Joanna Sweeting, Centenary Institute, Sydney, NSW and Dr Tom Wang, Auckland City Hospital, Auckland, New Zealand.

Congratulations are also extended to Ms Margaret Couper, Wellington Regional Hospital, Wellington, New Zealand; Mrs Jo-Ann Downie, Taranaki DHB, New Zealand and Mr Murray Hart, Christchurch Hospital, New Zealand, who were awarded a 2013 CSANZ Affiliate Clinical Development Award (CDA) to attend the 2013 Annual Scientific Meeting on the Gold Coast.
In 2014 the Cardiac Society of Australia and New Zealand will host the World Congress of Cardiology. This Congress will replace our normal Annual Scientific Meeting in 2014.

The World Congress of Cardiology (WCC) is the official congress of the World Heart Federation and is held every two years. Through the WCC, the World Heart Federation offers an international stage for the latest developments in science and public policy in the field of cardiovascular health.

We expect thousands of cardiovascular disease specialists and public health experts to attend this event and share knowledge on cardiology, policy and public health.

- **Abstract submission opening 1 August 2013**
- **Global platform** for cardiovascular disease specialists and public health professionals to share knowledge and network with their peers
- **World leading experts** presenting 150 sessions on cardiology, policy and public health
- **Latest scientific findings** featured in over 1,000 new abstracts on prevention, diagnosis and treatment of cardiovascular disease
- **International congress with a spotlight on regional issues** highlighting local successes in rheumatic heart disease and tobacco cessation
- **Best-practice sharing** across different resource settings with a highlight on how international learning can be adapted to national circumstances
- **Uniting efforts to reduce premature CVD deaths 25% by 2025** through mobilizing the CVD community and working with the WHO
CSANZ 2013 and ANZET13

61st Annual Scientific Meeting of the Cardiac Society of Australia and New Zealand
Hosted by CSANZ New Zealand
Gold Coast Convention and Exhibition Centre
8 – 11 August 2013

CSANZ2013

Named Lecturers

R T Hall Lecturer
Kempson Maddox Lecturer
Basic Science Lecturer
Victor Chang Lecturer
Gaston Bauer Lecturer
Cardiovascular Nursing Lecturer

Hossein Ghofrani
Peter Macdonald
Roland Stocker
Tirone David
Gary Nicholls
James McVeigh

International Faculty:

Robert Byrne
David Cohan
Timothy Henry
Mark Monaghan
Evelyn Regar
Alec Vahanian

ISAR Centre, Deutsches Herzzentrum Munchen, Munich
Director of Cardiovascular Research
Saint Luke’s Mid America Heart Institute
Director of Research, Minneapolis Heart Institute Foundation
Consultant Clinical Scientist, King’s College Hospital
Interventional Cardiologist, Erasmus Medical Center
Head of Cardiology Department, Bichat Hospital

www.anzet.com.au
Call for Nominations

Nominations are invited for the 2014 R T Hall Prize of the Cardiac Society of Australia and New Zealand (CSANZ). The Prize is the most prestigious research award of the CSANZ and recognises the achievements of senior and established investigators. The Prize is awarded in open competition and is directed towards recognition of sustained and outstanding research achievement.

CONDITIONS:

- The R T Hall Prize will be awarded to an individual investigator for a coherent body of work, which advances knowledge of the cardiovascular system and its diseases. In exceptional circumstances, the Prize may be awarded to a small group for an outstanding contribution in the field of cardiology. The work must have been published in a scientific journal or journals. Work published in book-form and thesis, which have been accepted for higher degrees, may also be submitted.
- The investigator MUST be a Member of The CSANZ and the work must have been substantially undertaken in Australia or New Zealand.
- Submissions for the R T Hall Prize will consist of a nominating letter by a Member of The Society plus copies of the published manuscript(s), as well as, confirmation from the nominee(s) that they wish to be considered for the Prize.
- The R T Hall Prize will be decided by the Board after review by the Scientific Committee.
- The winner of the R T Hall Prize will be announced at the Annual General Meeting of The Society.
- The value of the R T Hall Prize will be AU$10,000.

Submissions should be forwarded to the Honorary Secretary, The Cardiac Society of Australia and New Zealand, Suite 601, Level 6, 1 Castlereagh Street, Sydney NSW 2000.

Closing date:

5 pm Friday, 4th October 2013

The Society reserves the right not to proceed with an appointment for any reason. Applicants requiring further information are requested to contact the CSANZ at info@csanz.edu.au

Please note: If email confirmation of receipt of the nomination is not received within 1 week of submission, please contact the Secretariat at info@csanz.edu.au
Applications are called for the **CSANZ Travelling Fellowships** for travel grants to enable investigators to attend the **Scientific Sessions 2013 of the American Heart Association** to be held in Dallas, Texas, 16-20 November, 2013. The Fellowships are intended to provide an opportunity for investigators in the early stage of their research career, to present at a major international conference.

**The conditions are:**

1. The Fellowships are valued at AU$3,000 each.
2. The top ranked candidate will be awarded the CSANZ McCredie/Wilcken Travelling Fellowship.
3. Applicants must be FCSANZ, Associate Members or Affiliate Members of the Cardiac Society, with preference given to those attending their first meeting.
4. The work must have emanated from Australia or New Zealand.
5. Applicants must have an abstract accepted for presentation at the AHA meeting.
6. Applications must be accompanied by a letter from the supervisor or Director of the laboratory or service from which the work has emanated, clearly detailing the specific contribution made by the applicant towards the work being presented.
7. Preference will be given to those who have not previously been awarded CSANZ travelling scholarships.
8. Conditions apply to successful applicants not domiciled in Australia or New Zealand.*
9. Late applications will NOT be considered.

Applications should be emailed to the Honorary Secretary at info@csanz.edu.au and must include:

1. copy of submitted abstract(s) and AHA notification of acceptance
2. brief curriculum vitae (maximum 1 page)
3. supporting letter from the supervisor or Director

**Closing Date:**

**5 pm Friday**

**23 August, 2013**

Please note: if applicants have not received email confirmation of receipt of their application within 1 week of submission, they should contact the Secretariat at info@csanz.edu.au immediately.

* Conditions apply, please contact the Secretariat.

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**Travelling Fellowship Updates**

**Dr Andris Ellims**, from Baker IDI Research Institute/Alfred Hospital, Victoria, received a CSANZ Travelling Fellowship to attend the **2013 American College of Cardiology Scientific Sessions in San Francisco.**

With assistance from a CSANZ Travelling Fellowship, I was fortunate to present our research entitled “Linking Genotype and Phenotype in Hypertrophic Cardiomyopathy” at the American College of Cardiology’s Scientific Sessions in San Francisco.

We performed cardiac magnetic resonance imaging (CMR) and next-generation genetic testing on 20 patients with hypertrophic cardiomyopathy (HCM). Pathogenic HCM mutations were identified in 16 patients, including 6 with a common mutation, **MYBPC3**. Compared to **MYBPC3**-negative patients, those with **MYBPC3** mutations had similar left ventricular volumes, ejection fraction and wall thickness. However, **MYBPC3**-positive patients had significantly more regional, but less diffuse, myocardial scarring. Such variations in the patterns and quantities of myocardial fibrosis may contribute to the broad spectrum of clinical presentations in HCM. This research protocol has provided a framework for the evaluation of patients in our newly-established **HCM Clinic @ The Alfred.**

During these Scientific Sessions, I had the opportunity to meet several leaders in HCM- and CMR-related research, as well as discuss novel ideas with fellow researchers from around the world. I am extremely grateful to the CSANZ for supporting our work and enabling us to share our findings with a global audience.

**Dr Gareth Crouch**, from Flinders Medical Centre, South Australia, also received a CSANZ Travelling Fellowship to attend the **2013 American College of Cardiology Scientific Sessions in San Francisco.**

I write to convey my sincerest thanks for the travelling fellowship to ACC 2013. The opportunity to travel to San Francisco and present my paper was an invaluable experience particularly given the international significance of the meeting. My research was well received and I was able to network with fellow researchers in the field.

I am grateful to the Society for assisting financially to make the trip possible.
Guidelines for Applicants

The CSANZ Research Scholarship is intended to provide support for Members of the Cardiac Society of Australia and New Zealand who wish to pursue a career in cardiovascular research.

1. The Scholarship is open to all Members of CSANZ.

2. The value of the Scholarship will be equivalent to that of the NHMRC Postgraduate Scholarship and will be payable for one year.

3. Research must be conducted in Australia or New Zealand.

4. Only those applicants who are enrolled as full time students (eg. for PhD or MD) will be eligible to receive the Scholarship as a tax-free stipend.

5. Deadline for the receipt of applications and referees’ reports is 16th September, 2013.

6. Applications will be graded by a selection panel appointed by the Scientific Committee of the CSANZ. No interviews will be undertaken.

7. Successful applicants will be notified in January.

Note: Previous recipients of the CSANZ Research Scholarship are not eligible to apply for a second scholarship.

In addition to the above information, you will also require a copy of the Application Form and Application Instructions available from either the Society Secretariat or from the website at www.csanz.edu.au, Education, Scholarships/Fellowships.

Closing Date:

5 PM Monday

16th SEPTEMBER, 2013

www.worldheart.org
Membership Changes and Additions

The following changes and new admissions to Membership occurred during 2013 to the present time. The Society extends a warm welcome to all.

Affiliate Members
Mr M Bartlett, Ms M Bisset, Ms J Boyce, Miss J R Brown, Miss L Bryce, Miss D Buda, Mr R Chandy, Dr P Chia, Miss C Chong, Miss M E Degenaar, Ms J Goodson, Mrs R Hall, Mr T Harrison, Mrs B Hauf, Mrs C Heithersay, Ms M L Hellmrich, Mrs P R Heuser, Ms Jacinta Holden, Mrs K Hudson, Mrs J Irving, Dr J Kizhakkepatt, Ms J Kozlovski, Ms A Lal, Mrs S Ligueno, Ms S Liu, Mr L McFetridge, Mr J Money, Mr V Nooney, Ms H O’Shaughnessy, Mr N Procter, Mr D Seeds, Mrs L Smith, Mrs V Speranza, Mrs J Sweeting, Mrs K Timmins, Ms K Tolmay, Mr C Vaux, Dr T Wang, Mr K White and Miss S Wilson.

Associate Members
Dr M Brooks, Dr C Farquharson, Dr A Lamanna, Dr R Mahajan, Dr R Parameswaran, Dr J Ramchand, Dr R Sharma, Dr D Tong, Dr T Von Leuder, Dr J White and Dr H Wijesekera.

FCSANZ Members
Dr D Anand, Prof P Bannon, Dr W Chan, Dr M Cheung, Dr S Chih, Dr L Eastaugh, Dr A French, A/Prof P Gould, Dr J Harker, Dr R Hillock, Dr C Holloway, Dr B Hunt, Dr B Jones, Dr N Kangaharan, Dr J Kaplan, Dr K-T Lim, Dr G Mahadevan, Dr M McGrady, Dr S Prasad, Dr D Saint, A/Prof J Suttie, Dr A Tan, Prof D Thompson and Dr A To.

Notice Board

GUIDELINES

Two new position statements have been uploaded at www.csanz.edu.au under the Education tab:

Guidelines for Clinical Practice

*Position Statement on Atrial Fibrillation Ablation*

*Position Statement on Remote Monitoring*

CSANZ DOCUMENT

Criteria for Endorsement / Accreditation of Scientific Meeting

To download a copy go to [http://www.csanz.edu.au/LinkClick.aspx?fileticket=B5s9ST6OluU%3d&tabid=395](http://www.csanz.edu.au/LinkClick.aspx?fileticket=B5s9ST6OluU%3d&tabid=395)
**NORTH AMERICA**

**AHA2013**  
16 - 20 November, 2013  
Dallas, Texas  
www.scientificsessions.americanheart.org/  

**ACC14**  
29 - 31 March, 2014  
Washington, DC  
www.accscientificsession.cardiosource.org/ACC.aspx  

**EUROPE**

**ESC Congress 2014**  
30 August - 3 September 2014  
Barcelona, Spain  
www.escardio.org  

**ASIA PACIFIC**

**ANZET13**  
7 - 8 August, 2013  
Gold Coast, Queensland  

Secretariat:  
The Conference Company  
Phone: 64 9 360 1240  
www.csanz.edu.au  

**CSANZ 2013**  
61st Annual Scientific Meeting  
8 - 11 August, 2013  
Gold Coast, Queensland  

A more comprehensive list of meetings and events can be viewed on the Society’s website  
www.csanz.edu.au