



## The Society for Cardiovascular Angiography and Interventions

### SCAI President's Page

### SCAI: Going Global

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Over the past several years, our Society has seen considerable growth in membership, not only by the addition of U.S. members, but also by a sharp increase in international membership. In 2007, interventional cardiology has a worldwide presence, with many seminal contributions to the field coming from outside of the United States. Therefore, the relationships that SCAI continues to develop with many international organizations and our growing international membership are truly “a benefit to all members,” as noted by Immediate Past President Dr. Barry Uretsky [1,2]. As the global initiatives of our Society continue to expand, it is important to appreciate both the scope and value of these activities to SCAI.

The idea for this President's Page actually came from a series of e-mails I received from various SCAI members who were representing the Society while participating as faculty at scientific meetings outside the United States in

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recent months. These e-mails had a consistent theme: SCAI is highly regarded abroad for its educational offerings, its emphasis on quality, and perhaps above all for working with societies overseas with an attitude of deep respect, mutual collaboration, and equal partnership.

Two former presidents of the Society, Drs. Joe Babb and Barry Uretsky, now lead the Society's International Committee, Dr. Babb as chair and Dr. Uretsky as co-chair. They recently served as faculty at the Second Asian Interventional Cardiovascular Therapeutics (AICT) meeting in New Delhi, India, where they and numerous others from the Society received an enthusiastic welcome. The program chair and organizer of this meeting, Dr. Ashok Seth, has been a Fellow of SCAI since 1995 and has worked vigorously to promote the Society globally. I have invited all three to join me in drafting this President's Page, but must acknowledge that I could invite *many* additional Society members who have contributed to our global efforts. Some, but most definitely not all, of these equally dedicated members are mentioned below.

### AN ACCIDENTAL STROKE OF GENIUS

When the Society was born more than three decades ago, its founding members did not attach any designation of country or region to its name. It is likely that was not a strategic decision, but rather represented an intuitive understanding that the field of invasive/interventional cardiology is not "owned" by any country. To the contrary, your Society was formed as the result of collaboration and inspiration by physician-scientists from around the world. That spirit of global collaboration continues to the present day. Our mission is global, specifically to promote excellence in invasive and interventional cardiovascular medicine through physician education and the advancement of quality standards to enhance patient care. This applies to interventionalists whether they practice in Rome, New York, Rome, Italy, or Italy, Texas. Even in the area of advocacy, although payment systems from country to country are drastically different, we all are, in the best sense, **advocates** for the best quality of care for our patients.

SCAI's membership roster now supports that assertion. At last count, our 3,700-plus members include individuals from six continents and nearly seventy countries. Our global focus and our commitment to equal partnership with other interventional societies has given us freedom to readily interact regardless of the geographic boundaries of our birthplace and to exist as an international entity. However, it has only been in the past several years that the Society has significantly developed its partnerships globally. One might logically ask, Why now? The short answer: The

"globalization" of the Society is a natural evolution of the global nature of our profession, as evidenced by a growing and diversifying membership, increased involvement in defining standards and guidelines aimed at quality, and the communications revolution. No doubt, with the internet, e-mail, video conferencing, and cellular telephones, it is considerably easier to stay connected with our colleagues and friends worldwide.

### AN INTERNATIONAL FIELD

"Interventional cardiology is a global discipline, with leaders all over the world," commented Dr. Seth. In today's global village, particularly in scientific arenas, collaboration is of the utmost importance. Dr. Seth also noted, "The Society's 'going global' and moving to various parts of the world to partner with other societies stimulates more interventional cardiologists from around the world to become members of the Society. The strength of any society is its leadership and its following. The present membership across the world is also able to consolidate its bonds with the Society when the Society steps out of the U.S. to be with them in their region. These are important factors in the Society's representation of the global interventional cardiology community."

SCAI members have been welcomed in countries throughout the world, and we have tried to return the friendship wherever possible. At the Society's 2005 Scientific Sessions in Florida, there were seven international symposia, each hosted by one of SCAI's sister societies. This provided attendees an opportunity to learn how experts from around the world tackle the same challenges they face in their everyday practices.

Within the past year, SCAI was honored when the Asian-Pacific Society of Interventional Cardiology (APSIC) designated our journal, *Catheterization and Cardiovascular Interventions*, as its official journal. Beginning this year, you may note the APSIC logo on the cover of the *Journal* along with SCAI's, denoting the strong bond between the two societies. SCAI is very proud of this new collaboration, one that will further enhance *Catheterization and Cardiovascular Interventions* as the primary forum for global interchange of scientific information in our field.

### EDUCATION IS A GLOBAL ENTERPRISE

All physicians need opportunities for high-quality continuing education, opportunities that should have no geographic constraints. As the past year has shown, closer ties between scientific meetings of excellence benefit all of us. We have much to learn from each other's knowledge, experiences, and research. In the



**Fig. 1.** More than 100 interventional cardiologists from Latin America attended the Brazilian Society of Interventional Cardiology-Society for Cardiovascular Angiography and Interventions program on carotid artery stenting. The course combined didactic and simulation training. [Color figure can be viewed in the online issue, which is available at [www.interscience.wiley.com](http://www.interscience.wiley.com).]

past year, SCAI representatives have been honored to be integrated into educational gatherings held throughout the world, with our representatives warmly welcomed. Space will allow mention of only two of these meetings.

In August 2006, SCAI was invited to present the training program for carotid artery stenting (CAS) that was developed by a core group of our membership to the Brazilian Society of Interventional Cardiology (SBHCI). Drs. Robert Bersin, Chris Cates, Mike Cowley, Nick Hopkins, and Stephen Ramee were part of an international faculty who provided both didactic and simulation training in CAS to our Brazilian counterparts. These physicians partnered with faculty colleagues in Brazil to offer a comprehensive educational program in this area (Figs. 1 and 2). Dr. Cates reported that the SBHCI program was a remarkable experience, in part because the attendees were so enthusiastic about the opportunity, but also because the presentations were readily translated back and forth between English and Portuguese—with the language “barrier” proving to be no barrier at all. Many of the 100-plus attendees of this program skipped their afternoon meeting break to spend more time at the simulators and with the faculty. This program was so well received that SCAI has been asked to provide an encore presentation for them in May 2007.

Just a few months later, more than 1,000 attendees from all over the world came to New Delhi, India, for the Second Annual AICT meeting, co-organized by the Max Heart & Vascular Institute, New Delhi, APSIC,



**Fig. 2.** The joint Brazilian Society of Interventional Cardiology (SBHCI)-Society for Cardiovascular Angiography and Interventions carotid artery stenting program was developed at the suggestion of SBHCI Secretary Valter C. Lima, MD, FSCAI, who was intrigued by SCAI's novel three-tiered approach to training physicians in new high-risk procedures and technologies. The course held in Brazil was so successful that it will be offered again in May. [Color figure can be viewed in the online issue, which is available at [www.interscience.wiley.com](http://www.interscience.wiley.com).]

and SCAI. The meeting received international press coverage in part because of the attendance of several dignitaries from India, including His Excellency Dr. A.P.J. Kalam. (Fig. 3) A renowned scientist and India's President, Dr. Kalam invented the country's first stent, “the Kalam-Raju Stent.” He was joined at the inaugural ceremony by Mrs. Shiela Dixit, Chief Minister of Delhi State. During his remarks to the assembly, Dr. Kalam urged interventional cardiologists to place appropriate emphasis on prevention and to report both positive and negative research findings in an international database. Dr. Uretsky spoke after Dr. Kalam, an honor in itself, and said, “Wherever we practice, our goal is the same, to provide the highest quality of care to our patients. This outstanding meeting, bringing together thought-leaders from East and West, has provided all of us the forum to learn the most current information to allow us to do so.”

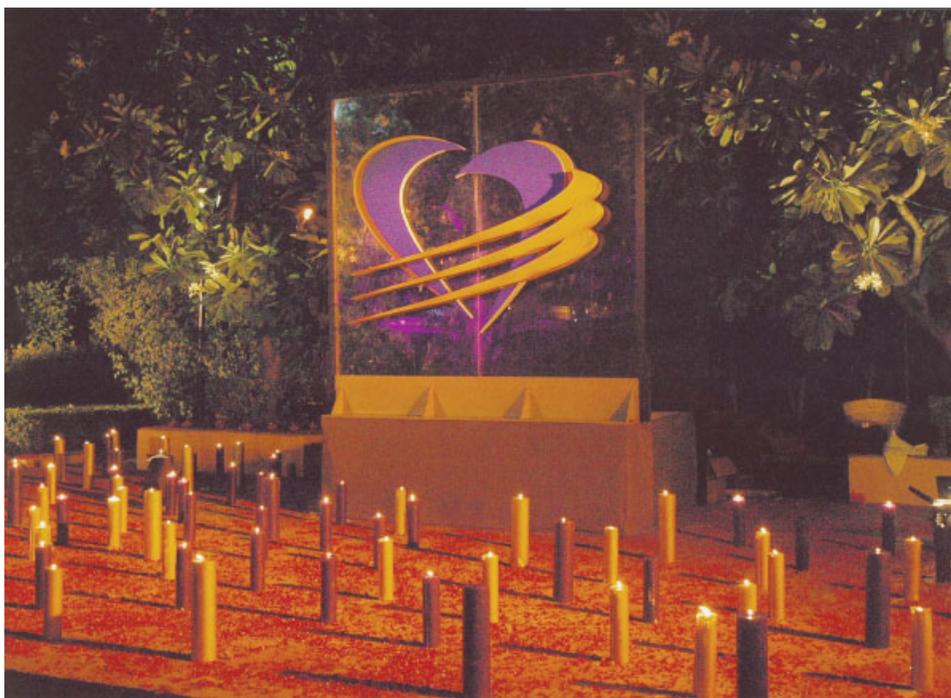
Dr. Seth and his team of meeting organizers did everything possible to make SCAI feel welcome and make this an international event. The meeting included live case transmissions from seven sites, including three in the United States and one each from New Delhi, Shanghai, Kuala Lumpur, and Singapore. Dr. Seth also organized a symposium called “APSIIC Meets SCAI” (Fig. 4) and an evening event honoring the Society, where our logo was, quite literally, up in lights. (Fig. 5) When asked, “Why highlight a society that resides thousands of miles away?” Dr. Seth



**Fig. 3.** His Excellency Dr. A.P.J. Kalam (left) welcomed SCAI Immediate Past President Dr. Barry Uretsky (right) to India. Dr. Kalam attended the Second Asian Interventional Cardiovascular Therapeutics conference at the invitation of its organizer Dr. Ashok Seth (center).



**Fig. 4.** More than 1,000 physicians from around the world attended Second Asian Interventional Cardiovascular Therapeutics (AICT-II) conference in New Delhi. The conference included a session called 'APSIC Meets SCAI,' where faculty from both societies discussed a range of topics that are relevant to interventionalists wherever they practice, such as late-stent thrombosis, left main intervention, pharmacological therapy after percutaneous coronary intervention, in-stent restenosis, and chronic total occlusion recanalization techniques. [Color figure can be viewed in the online issue, which is available at [www.interscience.wiley.com](http://www.interscience.wiley.com).]



**Fig. 5.** At the Second Asian Interventional Cardiovascular Therapeutics (AICT-II) conference, SCAI faculty were treated as honored guests as well as full partners in the program. At an evening event, a specially commissioned 15-foot SCAI logo was lit by candles. SCAI representatives met many members of the Asian-Pacific Society of Interventional Cardiology, which held its first Fellowship ceremony during AICT-II. [Color figure can be viewed in the online issue, which is available at [www.interscience.wiley.com](http://www.interscience.wiley.com).]

replied, “I believe that SCAI can be a body to unite interventional cardiology under one umbrella, a truly representative society that guides and uses its influence to further the goals we all share.”

Dr. Seth’s vision of SCAI sets the bar high. It is important to point out that a major reason educational programs like these work so well for SCAI is that your Society truly views them as partnership opportunities. This is one of the guiding principles of the International Committee—that SCAI’s goal is *partnership* with like-minded organizations. Across oceans and continents, we all have something to share in the field of interventional cardiology. When invited, the Society is honored to be asked and eager to contribute what it can, because of the shared goals. “Our objective is never to dictate what we think should be done or to

take over and run the show,” says Dr. Babb. “Our goal is to talk about issues, to learn from others, and to offer what we can in support of their efforts. And frankly, what we get back and what we learn is frequently more than we give.”

I think that more than summarizes what “going global” means to the Society. I would appreciate your thoughts on SCAI’s efforts to “go global” and other topics. Please write to me at [president@scai.org](mailto:president@scai.org).

## REFERENCES

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