



The Society for Cardiovascular Angiography and Interventions

SCAI President's Page

A Conversation With the Program Chairs of SCAI's 2009 Scientific Sessions, May 6–9, Las Vegas, Nevada

Ziyad Hijazi,* MD, MPH, FSCAI

Director, Rush Center for Congenital & Structural Heart Disease
Section Chief, Pediatric Cardiology
Professor of Pediatrics & Internal Medicine
Rush University Medical Center
Chicago, Illinois,
President, The Society for Cardiovascular Angiography and Interventions

and

Ted Feldman, MD, FSCAI

Director of the Cardiac Catheterization Laboratory
Evanston Hospital
Past President, The Society for Cardiovascular Angiography and Interventions,
Chair, SCAI's 2009 Annual Meeting

James Hermiller, MD, FSCAI

Director of Interventional Cardiology,
The Care Group, LLC,
St Vincent Heart Center of Indiana,
Indianapolis, Indiana,
Co-Chair, SCAI's 2009 Annual Meeting

Robert N. Vincent, MD, FSCAI

Professor of Pediatrics,
Emory University School of Medicine,
Director of the Cardiac Catheterization Laboratories,
Co-Medical Director of Pediatric Heart Transplantation and Vice Section Chief of Cardiology,
Children's Healthcare of Atlanta, Atlanta, Georgia,
Chair, SCAI's Pediatric/Congenital Program



*Correspondence to: Ziyad M. Hijazi, M.D., MPH, FSCAI, Director, Rush Center for Congenital & Structural Heart Disease, Section Chief, Pediatric Cardiology, Professor of Pediatrics & Internal Medicine, Rush University Medical Center, Chicago, Illinois.
Email: president@scai.org.

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I have the pleasure of sharing this President's Page with three of my esteemed colleagues to discuss SCAI's 2009 Annual Scientific Sessions. Drs. Ted Feldman and James Hermiller are co-chairs of the meeting, and Dr. Robert Vincent is chair of the pediatric/congenital portion of the program. The meeting, scheduled to convene May 6–9, 2009, at Caesars Palace in Las Vegas, NV, will honor the best traditions of its 32-year history while at the same time offering the cutting-edge science attendees have come to expect. The Society has responded to feedback on last year's joint sessions with the ACC by returning to our traditional format of a stand-alone meeting.

SESSION HIGHLIGHTS

As in years past, the program brings together the world's most renowned interventional cardiologists to meet, present, and analyze the latest advances in coronary, peripheral, pediatric, and structural heart disease. It is an educational program that features new clinical trials, case-based education, and data, all translated into daily practice. Attendees can also expect coverage of the fundamentals, such as advances in imaging and hemodynamics.

Case reviews continue to be popular and useful; therefore, we are offering them throughout the program. The C3 Summit, directed by Dr. Jeffrey J. Popma, will feature a review of the very best and most interesting cases from every training program in the country.

A new feature will be the "Practice-Changing Trials and Abstracts" sessions, where attendees learn about the newest data available and analyze how that new information should change practice. But before I go into too much more detail, let us hear from the Program Chairs, who are planning this unique program.

ONE-OF-A-KIND PROGRAM

Dr. Hijazi: Ted, why do you think this is an important meeting for interventional cardiologists to attend? What makes it unique?

Dr. Feldman: There are so many meetings. If you had the resources, and did not have to work for a living, you could probably go to a meeting somewhere on interventional cardiology every week. Remarkably, every meeting does have its own character and unique offerings. But the Society meeting is at the top of the list. Some of the larger meetings, with tens of thousands of people, certainly offer a great deal of material, but at the same time they are difficult to navigate. At the larger meetings, it's harder to run into your colleagues and partake of the informal learning our community has to offer. In a few days at the SCAI Scientific Sessions, you really feel like you got it all—you truly got caught up on what is state-of-the-art in the field today.

It is also a meeting where people learn to do new things. At many meetings, you see what is on the far horizon, the technology that is in its early phases. Certainly that is exciting, and it has its place, but at this meeting you also have the chance to learn how to do things you could not do before. That comes out of our taped case sessions and a focus on case review. This year we will have live cases as well, but our goal is not only to show really interesting cases to people, but also to teach people from those cases. I think most people in the meeting feel as though they want to do something on their own that they could not do before.

Dr. Hijazi: Jim, as the Program Co-Chair, what do you think makes the program unique and worthwhile?

Dr. Hermiller: First, the content is relevant; it is a practical offering of strategies that interventionalists can take home and use on a daily basis. The content can also be individualized—whether it is to advance a whole new skill set in structural heart, vascular, or complex coronary disease, or to take in the more generalized sessions to see the latest in clinical trial results and changes in the field that affect practice.

Second, it is not a huge meeting. It's an efficient way to learn and obtain an update because it is a large database of knowledge distilled to a manageable level.

Third, you have personal access to the experts. You can sit down with them and ask questions.

PEDIATRIC/CONGENITAL PROGRAM

Dr. Hijazi: The meeting also offers 2½ days on current topics in pediatric/congenital and structural heart disease. The congenital program features sessions dedicated to research abstracts, debate sessions, and SCAI's signature adult-pediatric session designed for those treating adults and children with structural heart disease.

The pediatric/congenital meeting is in one room that accommodates a few hundred people, so you don't have to keep running from one end of the convention center to the other. That is just one advantage of this meeting. Dr. Vincent is the Chair for that portion of the program. Bob, what are some of the other reasons you would encourage the pediatric and congenital cardiologist community to attend this meeting?

Dr. Vincent: There are other very large meetings that have some pediatric content, but the SCAI meeting is one of only two North American meetings where you can really learn interventional pediatric cardiology. The biggest difference between our meeting and the larger ones is the total access to all the people presenting and giving lectures. There is an honesty that occurs at these meetings and a familiarity with everybody who is there, which you do not get with the larger meetings.

Dr. Feldman: In fact, that openness is prevalent in the sessions as well. One part of the program that has been extremely well-received is the joining together of the pediatric community in an adult meeting session, all talking about how to do catheterization in an adult with congenital heart disease. We usually title it along the lines of "How Not to Mess It Up." That resonates with all of the adult cardiologists who approach these patients feeling like they ought to know how to do it but aren't as comfortable as they would like to be.

I think it is really important for both the pediatric cardiologists who don't take care of adults most of the time, and the adult cardiologists who don't treat congenital heart disease most of the time, to come in and hear something like this—how it becomes a team approach.

SOMETHING FOR EVERYONE

Dr. Hijazi: Ted, what about early-career interventionalists? What does our meeting offer them?

Dr. Feldman: Each meeting has its own unique offerings, but they will not find at any other meeting sessions that will bring them so totally up-to-date. There are programs for fellows at this meeting that are unparalleled. For example, the C3 Summit, run by Dr. Popma, which you mentioned earlier. The openness of these cases, one after another, is an amazing thing.

The other thing that is totally unique about the Society meeting from the standpoint of somebody just beginning his or her career is that you sit in lectures by people whose papers you have been reading during your training and, five minutes later, you are having a conversation with them at the snack table during the break. You get to know the leaders in the field as people and practitioners, and you form real friendships and professional relationships. That doesn't happen at very many other meetings.

Dr. Hijazi: Bob, as Program Chair, you get to invite the best of the best in the pediatric and congenital field. What would you say to a brand-new interventional cardiologist who just finished his or her training, or even those who are in their third year or fourth year in interventional cardiology? Why should they come?

Dr. Vincent: I agree with Ted. It is the opportunity to meet and network with people, and the openness and honesty. You do not get that same intimacy in the larger meetings. At a big meeting, people present abstracts and data and then leave. There is no chance to sit down and ask them questions afterwards: "We have really had trouble with this. Do you have any tips for us?"

From the pediatric/congenital point of view, this is the only meeting, other than PICS, where we can sit down and have our own discussions and not be bogged

down by other things. It is boom, boom, boom; we are all in one room, one place. But if we do want something different, to explore what is going on in structural heart disease in adults and in coronary disease—it's all there under one roof.

Dr. Hijazi: That is right. It is the only meeting besides PICS where there is no other competing session running. You will find a roomful of people engaged and asking questions.

DESTINATION: LAS VEGAS

Dr. Hijazi: Ted, many have asked why the meeting is in Las Vegas. What does the city have to offer?

Dr. Feldman: That is a great question. I think the world is divided into two categories of people: those who think of Las Vegas as an absolutely fantastic regional destination, and those who would prefer to avoid the place if they could. I was in the second group of people until I attended the PICS meeting. A few things were mind-changing for me. First, the facilities are fantastic. The room rates are very good, and the hotels know how to manage a meeting. There are no audio-visual problems, the spaces are comfortable, and the food is good. We are in one place, so we don't have to jump on a bus or run from a hotel a mile away. So, it's tremendously comfortable as a meeting place.

I was also surprised by the restaurants and shows. Even if they never go near a casino, meeting attendees have a great time and can even enjoy a lot of family activities.

Dr. Hijazi: I agree with you, Ted. The entertainment and food are unparalleled. You can have fun at night, but in the morning, everybody is back to their tables trying to learn more and get the benefit of the meeting. Jim and Bob, do you agree?

Dr. Hermiller: Yes. During day time it's a superb venue because the meetings are handled so well. And at night there are great restaurants, great entertainment—it's an excellent town, hard to beat.

Dr. Vincent: I was one of those people, like Ted. If I could avoid Las Vegas, I did. But having been there a couple years now, it really is a great place to have a conference. The hotels do a much better job than many of the other places we have been. There is so much offered to you there, it's like walking down Fifth Avenue in New York City. It's a fantastic venue.

Dr. Hijazi: I agree with you 100%. I am looking forward to another enjoyable and productive meeting. Thank you, all of you, for sharing your experiences from past conferences as well as your plans for the upcoming program. I look forward to seeing you in May.

To register or obtain more information about SCAI's 32nd Annual Scientific Sessions, May 6–9, 2009, in Las Vegas, visit www.scai.org, or call 800-992-7224.