

NEWS

■ ESC/EAPCI@EuroPCR 2014. Visit us at stand H01, Level 3 to learn more about our fabulous offers and activities (ESCeL platform, Stent for Life Initiative, Congresses, Courses, Journals and Publications) and join the EAPCI!

■ Register today for ESC Congress 2014! Early Registration ends 31 May.

■ A big thank you from the EAPCI Women Committee. Almost 2,000 of you responded to our survey to better understanding the motivations and barriers facing women in selecting interventional cardiology as their sub-specialty. The EAPCI Women Committee is absolutely thrilled with your contribution and participation.

■ Primary PCI access increases in Stent for Life countries. A recent survey published in the European Heart Journal shows that access to primary PCI increased in Stent for Life (SFL) countries since the initiative was introduced.

EAPCI Focus on the Finnish Working Group on Interventional Cardiology

An interview with the President, Erkki Ilveskoski

What does the EAPCI membership mean for a national society?

The EAPCI helps us to cooperate with other national societies at congresses and develop joint sessions. This year at EuroPCR we will collaborate on “Austria and Finland share their most educational cases” – an important moment to exchange and share learning with our international peers. The EAPCI also provides many educational tools which aid in the development of interventional cardiology in Finland.

What are the current issues related to the national society?

Our development is hindered by the size of our subspecialty: we have only 171 interventionalists in a country of 5.4 million inhabitants and therefore our working group’s influence is quite modest. We have little funding and must rely on the Finnish Cardiac Society for support in terms of finance and logistics.

Recognition of our subspecialty has not been possible due to our small numbers. Currently a cardiologist does not have to follow first an internist study (with the exception of the first three years of specialist training). The governments plans to return to the old set up (first an internist curriculum, then cardiology). Naturally we appose this plan. We have a strong fellowship programme, with no major employment issues as almost all fellows stay in Finland upon completing training. We would like fellows to go abroad, but there are certain barriers to overcome such as funding and language. Concerning trials, we collaborate with other countries, for instance Canada, on OCT and, of course, the well-known NORDIC bifurcation studies.

Finland suffers, as does the rest of Europe, from reduced government funding due to the ongoing economic crisis. Attempting to implement new treatment programmes such as TAVI and MitraClips are very challenging. Another area of interest is Stent for Life. For patients in major cities, access to primary PCI sites is good; it is in the remote areas of Finland where we need to understand better how to improve access to care.



Erkki Ilveskoski, President of the Finnish Working Group on Interventional Cardiology



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Upcoming annual meeting:

Every spring and autumn during Finnish Cardiac Society meeting

Founded: 2000

Members:

171 interventional members from 30 cathlabs

EAPCI members: 24

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