



MORGAGNI

LEONARDO

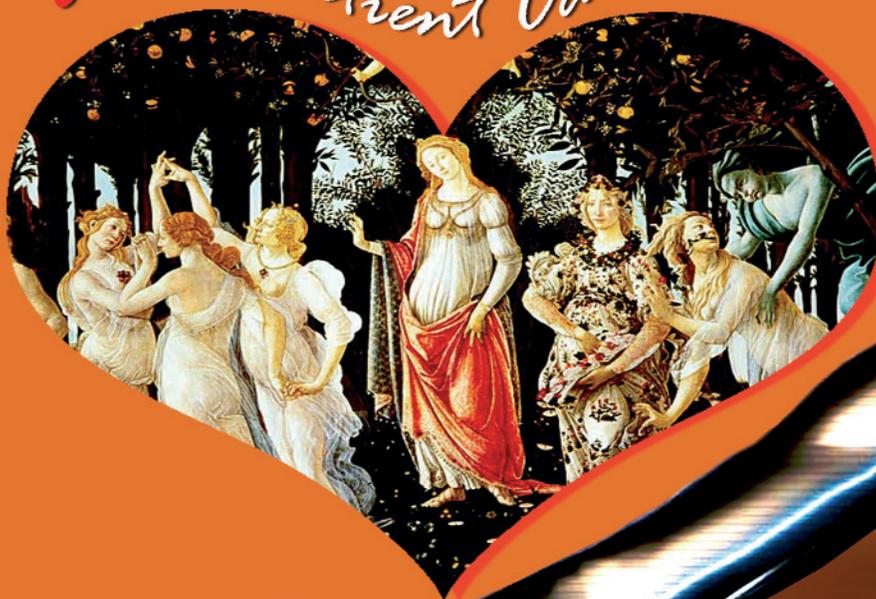
CESALPINO

LANCISI

SOCIETA ITALIANA di CARDIOLOGIA

ITALIAN SOCIETY of CARDIOLOGY

Education
Patient Care
Research



Dear Colleagues,

My mind goes first to the Attendees from all the World who joined the 2005 ESC Congress in Stockholm. Luckily, this is also a great opportunity to thank all the Italian Cardiologists who have trusted me as new President of the Italian Society of Cardiology, which has undertaken a new program

with key points worth to be shared with all of You. The following thoughts will, therefore, focus on the operative steps of our main mission with its scientific, academic, educational, medical as well as social aspects.

Relationship among our Members

The new Board of SIC will not be a remote entity but, rather, will strongly interact with all its Members. A key role will be played both by the Working Groups and by the Regional Sections that will guarantee the broadest participation to the life of SIC by all Members.

Relationship with other Societies

In order to play a significant role in the ESC, in scientific institutions in Italy, in Europe and elsewhere, the Board and the Working Groups of SIC will intensively cooperate with ANMCO, mainly via the Federation of Italian Cardiology and with all other Cardiology Associations.

SIC in Italy

The Regional Sections will mark our presence in the country, either by working with the political, scientific and industrial institutions or by actively promoting the recruitment of young Cardiologists to be trained for research, teaching and patient care.

Press and Public Relations Office

The newly organized Press and Public Relations Office in Rome will provide wide diffusion of news among media. In addition, this Office will organize the Annual Congress and will take care of an important publication, *SIC et Simpliciter*, which is a vivid expression of our cardiological community.

This journal may be considered a well accepted platform used by our cardiologists and by young trainees to report their initial and often difficult academic and scientific steps ahead.

The Annual Meeting of SIC

As long standing tradition, the Annual Congress is held in Rome and it represents an important appointment for updating Physicians, Researchers and Cardiologists. It is also the appropriate stage where to discuss new research projects with several Colleagues and with biomedical Industries. Chosen on the basis of criteria for excellence, the Speakers of this meeting will report on relevant topics dealing with clinical practice as well as with advancement of knowledge in cardiovascular diseases.

In order to facilitate the choice of a rational route along which to move - like in a virtual trip through the issues of interest - the topics will be organized in macro-areas and micro-areas.

A special value will be given to debates, as they will mostly deal with the daily clinical practice, thus enabling to transfer general knowledge into everyday decision-making process. With the contribution of Companies, a number of Symposia will be organized and scientifically filtered, in order to guarantee the quality of the topics to be discussed in front of a large audience.

The Italians Serving Cardiology

Despite the chronic insufficiency of resources to fund and foster research, the Italian *genius* is recognised worldwide in the field of Cardiology, rating amongst the top five in the world as far as number of scientific papers published in peer reviewed journals. The abilities of our Researchers to exploit the modest funds - and still develop new ideas - is not just a myth but a reality of global competition.

SIC aims to create and consolidate interdisciplinary networks which will hopefully allow all the good ideas to blossom and progressively evolve into important scientific achievements, for the benefit of all.

The Role of Non-doctors in the SIC

The role of Non medical personnel, including Nurses and Technicians up to hospital and university Administrators, is essential for the growth of Cardiology. Aimed at optimising the continuous education of this important personnel, a number of attractive new courses will soon be started, in different sites of our country.

Interactions and Cooperations

SIC will open its boundaries and offer the expertise of its Members to all the other institutions working for the progress of Science and Medicine, including the biomedical and pharmaceutical industries.

This aspect is going to be a must for us, as scientists, as doctors and as citizens as well.

With these thoughts and key points in mind, let me express - from the *captain desk* - the warmest and the deepest gratitude for all the efforts and all the inputs that are offered to us for improving and fulfilling the mission of SIC.

With my best wishes for a fruitful future for the Cardiology in Italy, in Europe and all over the World.

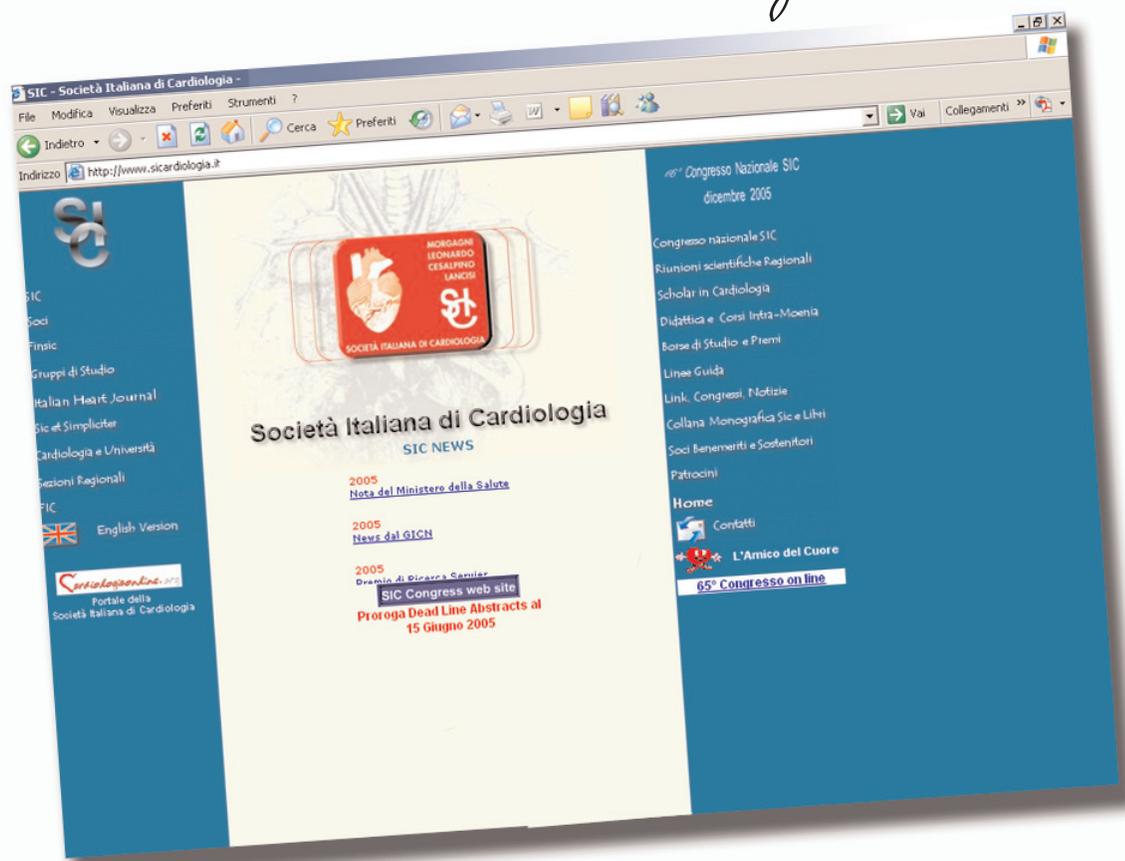
Maria Grazia Modena
President
Italian Society of Cardiology



THE CONTRIBUTION OF SIC TO CARDIOLOGY

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HISTORICAL THOUGHTS

Having witnessed the events life of the Italian Society of Cardiology for several years, I see the essence of SIC as part of the cultural and moral background of Cardiologists, since History is to be interpreted to look at the future, in view to better understand the present.

My mind goes, first, to the most significant events and to all Italian clinicians who contributed to development of Cardiology. In more than half century, they all created the proper atmosphere for the Society's mission.

Rather than competing as opposites, History and Medicine must both interact with Time, being the main reason of humankind *modus vivendi* to optimally use the time to achieve targets and dreams. The life of each individual is tailored, indeed, by contingent events - despite this - the way one is able to live - as efficiently as possible - marks the unrestrainable flow of individuals's existence.

We must be grateful to Hyppocrates for such ideas and for the *OATH*. Some sayings of his, reported in the *Quotes*, tells that *life is short, art is difficult to acquire, the propitious moment is fleeting/short-lived, personal experience is uncertain, decisions are difficult to be taken*.

These five statements, which hold true indeed also for our times, contain almost all what is relevant to Medicine, and three of them deal with the flowing of time that marks the past, the present and the future.

On the occasion of the 60th birthday of SIC, I did remark with pride that the basic fundaments of the society, as far as the professional ethics, have been consolidated by a number of specific activities dealing with research, education and patientcare.

In December 2004, we have celebrated the 70th birthday of SIC and I did reaffirm that the educational paths followed in the last decade have been of a very high profile. In the Congress of last year there have been more than 1.100 scientific contributions, mainly submitted by young Researchers. This proves the extraordinary scientific output of young Cardiologists who are also Members of the Italian Society of Cardiology.

Our scientific Society will keep on developing a high profile for clinical, basic and technological research in Cardiology, looking forward to promoting and improving the quality of cardiological care as much as possible.

Antonio STRANO

HISTORICAL NOTES

The great majority of Cardiology Societies stem from the idea to have Cardiology as a self-standing academic discipline. Journals such as *Archives des Maladies du Coeur et des Vaisseaux et du Sang*, started by Henry Vaquez on 1908 and *The Heart* (which then became British Heart Journal) started by James Mackenzie and Tomas Lewis on 1909, are the first scientific steps toward this idea.

On 1916 in Italy the magazine *Le Malattie del Cuore e dei Vasi* was started by Filiberto Mariani in Genova. It was named in *Cuore e Circolazione* in 1932, when underwent a significant growth with Cesare Frugoni and Cesare Pezzi as chief-editor.

Passion for Cardiology, and inspiration from Paul Dudley White who had founded the *American Heart Association* in 1924, induced some Luminaries to create in 1935 an *Italian Cardiological Group* (Luigi Zoja, Cesare Frugoni, Domenico Cesa-Bianchi, Cesare Pezzi, Domenico Pace, Riccardo Segre and Dr. Buccianti, as secretary). They firstly met in Milan on 14 April 1935, without R. Segre who had passed away in the meantime.

In the following years, the Group did slowdown its activities for scarcity of members and for economic hurdles. In those years, the *Proceedings* of meetings were hosted by *Cuore e Circolazione*. In 1940, the generosity of Giovanni Recordati consolidated the Italian Cardiological Group with its congress and its publication *Folia Cardiologica* that became the Official Journal for the following 15 years.

On June 1947, Cesa-Bianchi, Colombi, Frau, Puddu and Salvini did evolve this Group into the *Italian Association of Cardiology* with own bylaws that, however, were not legally registered until the 20TH March 1956 by Notary Vesci in Rome with the name of *Società Italiana di Cardiologia*. This act was undersigned by the Board of SIC, with Luigi Condorelli President and Vittorio Puddu Secretary. Since then, SIC has consolidated its mission centered around Italian and foreign Cardiologists, with Annual Congresses and editorial activity (*Proceedings and Bulletin*). In the '80s, during the Office of Attilio Reale - who was President of the *European Society of Cardiology* in the '90s - the Bulletin was re-named as *Cardiologia*, well quoted in the world.

Presently, the SIC is composed by Regional Sections and Working Groups and by different Members, who may be such without being Cardiologists provided they love Cardiology.

Pietro Paolo CAMPA

The PRESIDENTS of SIC since the FOUNDATION YEAR 1935

1935-1941	L. Zoja	1980-1981	A. Reale	1989	B. Magnani	1997-1998	S. Caponnetto
1942-1949	D. Cesa Bianchi	1982-1983	P.F. Angelino	1990	O. Visioli	1998	M. Guazzi
1950-1951	D. Cesa Bianchi	1984	A. Strano	1991	G. Mattioli	1999-2000	P. J. Schwartz
1952-1964	L. Condorelli	1985	A. Dagianti	1992	M. Mariani	2001-2002	M. Chiariello
1965-1975	L. Condorelli	1986	A. Cherchi	1993	G. Giuffrida	2003-2004	M. Guazzi
1976-1977	C. Bartorelli	1987	P. Rizzon	1994	A. Iacono	2004	M. Chiariello
1978-1979	V. Puddu	1988	P. Zardini	1995-1996	A. Brusca	2005-on	M. G. Modena

Full Professors of Cardiology in Alphabetic order

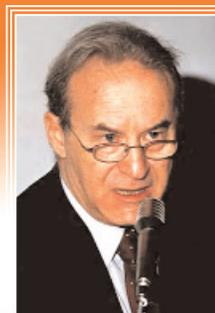


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Italian Federation of Cardiology (FIC)

The Italian Federation of Cardiology has been established in 1998 by the strong will and the common effort of ANMCO (Associazione Nazionale Medici Cardiologi Ospedalieri) and SIC (Società Italiana di Cardiologia).

The mission of the Federation is to establish the proper cultural environment, as a meeting-point, for concertation and pro-activity of the Italian Cardiology towards the international cardiological community and towards the scientific and medical institutions at national level.

Specifically, the Federation pursues its aims by the following points:

a FIC represents - as sole and direct institution - the SIC and the ANMCO within the European Society of Cardiology in order to implement a common vision and a shared policy of Italian Cardiology in the ESC itself. In this perspective and for their entire existence, SIC and ANMCO will do all the efforts to cover the available institutional positions with equilibrium among the parties;

b FIC does plan out and does conduct - within the Scientific and the Healthcare Institutions - a shared policy as far as the structure and the function of the National Health Service are concerned, even if the basic elements of such a policy may have been individually planned out by the two societies;

c Focusing on the Agreement already set up for the Specialty Schools, as well as for any possible further evolution, SIC does plan out and does implement a shared policy of education in Cardiology, as below specified in the four programmatic points:

Agreement by SIC and ANMCO relative to Specialty Schools of Cardiology to be implemented by FIC

1 The Council of Specialty School of Cardiology may assign to a Hospital Cardiologist the responsibility of a teaching course; in this function, the Hospital cardiologist will be part of the Council, as one of its members.

2 If an Hospital Cardiologist is member of a Council of a Specialty School of Cardiology, he may be asked to be member of the Committee that will supervise the admission exam to the Specialty School.

3 Upon decision of the Council of the Specialty School, it is possible to ask centres of excellence of the National Health Service to be part of the School itself.

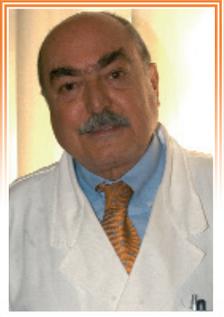
4 In the case of operative units with mixed university and hospital resources (human as well as structural and infrastructural) that are integral part of the Specialty School, the personnel of the National Health Service is to be granted of the same facilities for research and educational as the university personnel, provided the boundaries imposed or enacted by the Law.

The Board of Italian Federation of Cardiology 2005

- President :** Attilio MASERI
- Vice-President :** Giuseppe DI PASQUALE
- Secretary :** Gaetano THIENE
- Treasurer :** Francesco CHIARELLA
- Councillor :** Maria Grazia MODENA
- Councillor :** Giuseppe VERGARA

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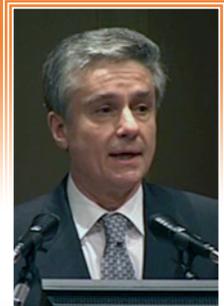


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A Story from Another World

the image of Italian Cardiology abroad, as seen from inside by one of us...

Several facts may be the mirror of all the bad and the good that can be said about Italy. During the Roman Empire, engineers created an incredible network of roads to connect people and enhance trades, while *tyrant Caligula* nominated his horse as one of the Senators in the Forum. During the Renaissance, Italy was the cradle of culture and arts, but also the place where terrible plots were hatched to reach the power. Italy is the country where politics and high tech appear chaotic and out of reach, respectively, but it is also the place where impossible political solutions are found and an unbelievable gamut of victories were obtained by Ferrari. Moreover, Italians do often complain of their economical status, and yet Italy is the country of traffic jams on highways to vacation, long queues at restaurants, and a nation where nearly 85% of the families owns a house. Despite this, until a decade ago, entire Italian regions were short of cardiac surgery and of invasive diagnostic tools, while other regions of the same country were running outstanding research protocols that ended up in discoveries (such as those on myocardial ischemia and on myocardial infarction) that have changed the history of Cardiology. According to WHO - nowadays, in spite of some holes in its mosaic - the Italian Healthcare System is among the best in the world, if objective parameters are taken into account, such as accessibility to diagnostic and therapeutic facilities. It may be added, as well, that the number of Cardiologists involved in scientific societies, focused in working groups, enrolled in international protocols on major research questions, authors of scientific publications, active in biomedical research, etc, is just remarkable: almost a miracle which appears sound in the nest of Christianity.

However, around the corner, there is a tragedy or, if you like, a comedy, as the image of Italy abroad is less than optimal.

In order to justify this critical attitude - where the Italian Cardiology system is not an exception - one could either say *tot capita, tot sententiae* or try to provide some keys for interpreting the double image that still persists even among Italians. Certainly, this is an hurdle for an ideal European Renaissance, which should be the aim of any active community, also in medical and scientific fields.

In Italy, in Europe, across the Atlantic and elsewhere, several giants of Cardiology have taught us that there are universal values to be inspired from and an ethical scale to climb for optimal patient care, through research and education. We all aim to create dynamic, crystal

clear, systems based on solid values where something is taken from, but more is given to young people, mainly through good examples. Although many difficulties and restriction of resources, the Italian system works and, surely, there is some rational explanations for this miracle! National Research Council, private and public Research Centres, Scientific Associations and Foundations, Superior Schools, Scientific Parks and Research Companies, in association with the University and the Hospital system, offer alternative pathways to talented people in order to reach levels of excellence: just like water in the soil that diffuses through several capillaries. In fact, a constellation of complex networks, both university and non-university in nature, are needed to obtain great advances in the Cardiology field and be ready for global competition. Excellence is to be certified by the international peer communities, from which *Caligula's horses* are to be kept out. However, even *intellectual embargo* by peers abroad does not guarantee to stop the reproduction of this phenomenon at home, thus generating a vicious circle. Bright ideas like the Working Groups of Cardiology, launched by P.G. Hugenholz and implemented by ESC, might be a good antidote. In fact, people who are co-opted on the basis of scientific expertise, irrespective of the academic or hospital rank in the country of origin, have to practice good principles and, thus, can spread them around, initiating a virtuous circle that starts in the international scenarios and will touch us anywhere, even at home.

With a better coordination and a fine tuning of the scale of values, Italian Cardiology can become more competitive in basic research, in technology transfer and in front-line developments, thus improving its visibility, inside as well as abroad. Having in mind to fill in this gap, we must defend the merits when promoting and recruiting people, both at universities, in the hospitals and elsewhere, in order to be accepted by the international peer community. Being a peninsula, geographically attached to Europe, Italy cannot just behave as a remote island in terms of rules and standards, just as a tax free or value free country. Therefore, we have to look ahead with accountability, bringing the Cardiology world on the proper track of universal values, where patient care, education and research are the key pillars. They may grant a better future for young people as well as a better image for ourselves and for the whole country. There is, indeed, space and willingness to improve, aiming to make each of us, hopefully, *masters of... life and cardiac sciences*.



THE 66TH ANNUAL NATIONAL CONGRESS OF THE SIC

HIGHLIGHTS

The 66th Congress of the Italian Society of Cardiology will take place from the 10th to the 13th of December 2005 in Rome, at the Hilton Cavalieri Hotel. Congress Committee has worked hard to set up the most complete scientific program, in order to optimally update the Cardiologists and all other participants. The aim is to provide a useful meeting for continuous education with a wide overview of the latest discoveries, providing time for discussions and debates on the most controversial topics of Cardiology. Collaboration with the major Societies in the field of cardiovascular diseases will be pursued by specific sessions, in addition to several Joint Symposia, and Lectures. Our aim is to identify all the possible strategies to face the complex or unsolved problems as well as the novel treatments of cardiovascular diseases. A special interest will be put on activities, jointly organized with the European Society of Cardiology and the American College of Cardiology.

SIC Congress will involve young Cardiologists, Fellows and Physicians with major interactive modalities. Oral sessions for original communications will be either introduced or ended by Lectures on the specific topic, given by prominent Italian Scientists. How-to-sessions and Monothematic Courses will give answers to specific clinical issues (e.g. the sound way to interpret clinical trials) in order to enhance the participations of young Cardiologists.

The Working Groups of the SIC contributed to the program with the selection of the original contributions and providing experts for Keynotes Lectures during the abstract sessions.

Basic research and teaching are the two areas in which SIC is largely involved for its expertise as well as for its institutional role: myocytes physiology, cellular biology and signalling, stem cells, etc will be highlighted in several sessions including *Breaking news* devoted to Italian research on top journals.

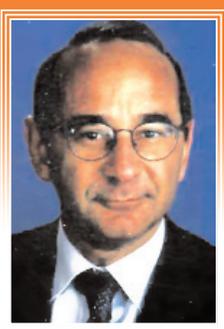
Teaching-related problems and economic aspects will be discussed for young Cardiologists' education, as essential requisites for the cardiologic subspecialties.

In fact, the role of individual knowledge and the proper way to consider cost/benefit ratio - as well as the economic aspects of clinical choices and treatment - will be extensively touched by the program.

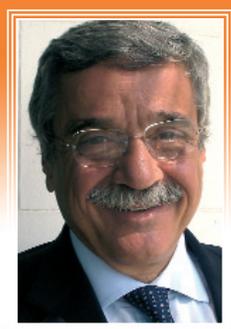
A guided discussions in a large exhibition area will emphasize the Poster Sessions, while two days will be devoted for the traditional professional Courses for Nurses.

Our endeavour has been to set up a novel, excellent Congress, tailoring it for the growing cultural and educational needs of Cardiology. Thus, we look forward to seeing you in Rome next December!!!

Congress Scientific Committee



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THE 66TH ANNUAL CONGRESS OF THE ITALIAN SOCIETY OF CARDIOLOGY

Round Tables

Patients' care and economics: a growing challenge in cardiology	Regulatory systems and statins in Italy	New care curriculum in the education of the new specialist in cardiology
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Lectures

<i>Leonardo da Vinci</i> Update on identification of vulnerable plaque	Acute brain infarction today: can we do better?	<i>Giovanni Battista Morgagni</i> From genotype to phenotype and back again
Role of <i>modifier genes</i> in the risk of sudden cardiac death	Suggestions for the physician who is planning to fight cardiovascular risk	<i>Andrea Cesalpino</i> New challenges in heart failure treatment
Intra abdominal adiposity. Metabolic and cardiovascular implications. Endocannabinoid system: a new target for risk prevention	<i>Giovanni Maria Lancisi</i> Interventional cardiology beyond <i>drug eluting stents</i>	MRI of myocardial viability Clinical research in cardiology: paradigms and innovation.

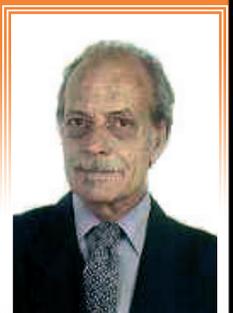
Symposia

Molecular genetics of cardiovascular hereditary diseases: new investigational approaches	<i>NO-REFLOW</i> : from laboratory observation to clinical reality	Percutaneous treatment of valvular diseases: do good neighbours need fences?
Blood pressure target in the high risk hypertension patient	The factor <i>time</i> in acute myocardial infarction: from pathophysiological national to therapeutic strategies	Novel new factors for coronary artery disease: <i>obesity</i>
Associated pulmonary hypertension: diagnostic and therapeutic aspects	Peculiar features of coronary artery diseases in women	The imaging today and tomorrow
Arrhythmogenic cardiopathies by defects of SCN5A gene	Biomarkers and prediction of a first atherothrombotic event	Percutaneous revascularization in the patient with multiple vessel disease
Pathology of thoracic aorta	Left ventricular function: beyond the appearances	Heart and Fabry disease
Reperfusion strategies in stemi	Cardiovascular risk during sport activity	Telecardiology: has the time come?
Aspects of research in cardiology today	Electric therapy in heart failure	Hot topics in interventional cardiology
Twenty years of heart transplant in Italy	Primary prevention: <i>children of a lesser God</i>	Ischemic cardiopathies, heart rate and if channels
Chronic heart failure: diagnostic-therapeutic issues in out patient/in patient pathways	HDL, cardiovascular protection and atherothrombotic risk	Infective agents and cardiovascular disease: ethiopatogenetic factors or innocent by standers?
New European guidelines	Cardiologist and radiologist in cardiovascular imaging	PCI: new frontiers
Integrated management of atrial fibrillation: from out patient clinic to the hospital	Myocardial hypertrophy: the transition towards heart failure	The world of drug eluting stents (DES): is there a best choice?
The use of stem-cells in cardiology: let's make the point!	Sex-related differences in the pathophysiology of cardiovascular diseases	Infective endocarditis today
Up-to-date of clinical applications of new ultrasound technology	Antithrombotic drugs in cardiovascular diseases: acquisitions and perspectives	New therapeutic approaches in the management of atrial fibrillation



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THE 66TH NATIONAL CONGRESS OF THE ITALIAN SOCIETY OF CARDIOLOGY

Symposia

Intracellular calcium abnormalities and myocardial dysfunction	Sleep and cardiovascular diseases	Mitral insufficiency repair in heart failure
Carotid and peripheral artery disease in patients with ischemic heart disease: which is the best therapeutic approach?	Vascular disease in insulin-resistance and in type 2 diabetes	Cardiac toxicity of antineoplastic drugs
Heart morphogenesis: biological aspects and clinical issues	Evolution of treatment in congenital heart diseases	

Breaking News

Patients with hibernating myocardium show altered left ventricular volumes and shape, which revert following revascularization: hibernation may directly induce cardiac remodeling	Tirofiban and sirolimus-eluting stent vs abciximab and Bare-metal stent for acute myocardial infarction: a Randomized trial	Non-invasive etiological diagnosis of cardiac amyloidosis using 99mTc-DPD scintigraphy
In vivo and in vitro studies support that a new splicing isoform of OLR1 gene is protective against acute myocardial infarction	Atrial myocardial deformation properties predict maintenance of sinus rhythm after external cardioversion of recent onset lone atrial fibrillation: a color doppler myocardial imaging, transthoracic and transesophageal echocardiographic study	Development and characterization of a transgenic model of catecholaminergic ventricular tachycardia
Subclinical coronary artery atherosclerosis in patients with erectile dysfunction	High-density lipoproteins induce transforming growth factor beta 2 expression in endothelial cells	Sildenafil citrate therapy for pulmonary arterial hypertension
Polymorphisms in prothrombotic genes and their impact on ischemic stroke in a Sardinian population	<i>In memory of "Lino Rossi"</i> Three-dimensional electroanatomic voltage mapping increases accuracy of diagnosing arrhythmogenic right ventricular cardiomyopathy/dysplasia	Plasma levels of oxidized low-density lipoproteins are higher in patients with unstable angina and are correlated with angiographic coronary complex plaques
The randomized evaluation of the effect of mechanical reduction of distal embolization by thrombus-aspiration in primary and rescue angioplasty <i>Remedia</i> trial	KCNH2-K897T is a genetic modifier of latent congenital long QT syndrome	

Course for Nursery

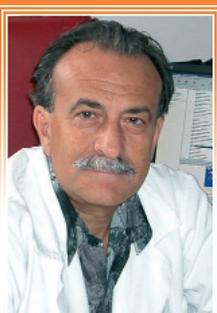
Management of diabetic patient with high cardiovascular risk

Debate

Continuing medical education: state of the art in Italy

How to Sessions

Application of heart failure guidelines in clinical practice	Treatment of hypertensive emergencies	Clinical cases in interventional cardiology
The right heart: how to enter the <i>secret chambers</i> ?	Evaluation of chest pain in the emergency room	Cardiopulmonary test
Tutorial course of myocardiocyte biology	How to read a clinical trial?	Diagnostic-therapeutic algorithm in hypertrophic cardiomyopathies
The interpretation of myocardial scintigraphy in ischemic heart disease		



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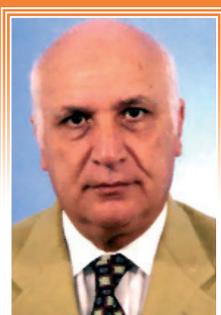
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Ph.D. Courses in Cardiosciences

In the early '80s a Ph.D. program was introduced in the Italian University system as a third level of academic education, with the aim to train and qualify graduates for a career of scientists. At difference from foreign countries, where Ph.D. programs in Medicine are devoted mostly to Basic Sciences (Biochemistry, Microbiology, Genetics, etc.), in Italy Ph.D. Courses were activated also in the clinical setting, to educate physicians with the qualification of Philosophy Doctor, in other words to foster the figures of M.D.-Ph.D. Clearly the intention was to promote Science in Medicine and to favour the translation from experimental biology to applied medicine.

The Ph.D. Course is 3-year long and consists both of learning basic science (statistics, genetics, immunology, cell biology, virology), with lectures - seminars, and a laboratory-bench work. The end product is a thesis on a novel investigation, to be defended in front of a National Committee.

The scholars are supported by a salary 11.000 Euro/year (!). Up to 50% of the period may be spent

abroad in foreign laboratories and, in this case, the salary is increased by 50%: it is not enough, of course, and additional money is searched for. Tutors take over the responsibility of research training of the fellows, with labs, topics of research and grants. Unfortunately, no special Ph.D.-M.D. courses have been established allowing the graduate student to make also a contemporary Ph.D. track. A Ph.D. program cannot be shared even during the training in Cardiology. The system is such that, if one would like to become M.D.-Ph.D. cardiologist, he should first graduate (M.D.), then take the certificate of cardiology and eventually enter a Ph.D. Course of Cardiosciences. Clearly, it is a non-sense to complete the overall track to become M.D.-Ph.D. in 13 years, not before the age of 32!

However, most of Ph.D.'s in Cardiosciences become either Associate Professors in the Academic Career or Consultants in Hospitals. Thus, the goal to have scientists among Cardiologists has been reached eventually, though always with significant sacrifices undertaken by young motivated Cardiologists.

Titles, Directors, Universities and E-mail Coordinates of Ph.D. Courses in Cardiosciences Activated in Italy

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Ipertensione Clinica e Sperimentale

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Fisiopatologia e Clinica dell'Apparato Cardiovascolare e Respiratorio

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Fisiopatologia Cardiorespiratoria

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Fisiopatologia Cardiovascolare

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Fisiologia (Indirizzo Cardiovascolare)

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MASTERS

In the presence of an adequate knowledge of basics in cardiovascular diseases as provided by the Schools of Cardiology (and the similarity applies to the Schools of Internal Medicine) the high-tech sub-speciality fields of Cardiology - such as Cardiovascular Imaging, Interventional Cardiology and Electrophysiology & Cardiac Pacing - require a specific theoretical and practical training. The SIC is sponsoring a gamut of Masters in order to fulfil this need, by formal lessons and by full-time practical activities for a total period of one or two years.

The ideal candidate for these Masters is a young doctor, either from Italy or from abroad, who has completed the specialty in Cardiology or in Internal Medicine.

Usually, the theoretical lessons and seminars are held at the University site which coordinates the course, while the practical activities are undertaken in qualified centres of different cities of the same region.

The full-time participation to these Masters is, indeed, enhanced by an individual grant provided on a monthly basis.

At each centre, an expert in the field has to provide tutorship for the practical activities and for the learning process.

Periodically, at the University Centres, the level of knowledge in each specific topic included in the teaching program, is assessed with formal testing and exams.

Moreover, during the course every candidate has to design a study protocol, collect data, discuss the results and write up a manuscript suitable for publication in peer-reviewed international journals.

II Level Master in Cardiac Electrophysiology & Electrostimulation University of Insubria in Varese

Cardiac Electrophysiology and Electrostimulation - an important asset of modern Cardiology - have had relevant developments in the last 30 years such to require an ad hoc post-specialty education. Within an integrated vision of Cardiology, this master deals with arrhythmia - from cell to bedside - and does focus on relevant data from scientific, clinical and practical points of view. In addition, new developments in Hemodynamics, Interventional Cardiology, Biomedical Imaging, Pediatric Cardiology, Cardiovascular Emergency, Telediagnosis and Teleconsulting will be dealt by this master, structured to be useful for professional career in public or private hospitals, in teaching and research field, health governmental agencies, healthcare management, etc. Topics of the Master are the following:

1. Electrophysiological mechanisms and genetic aspects of arrhythmia;
2. Diagnosis of arrhythmia: ECG, other non-invasive methods, electrophysiological evaluation and laboratory safety;
3. Pharmacological treatment of arrhythmia;
4. Non-pharmacological treatment of supraventricular arrhythmia (nodal tachycardia, atrioventricular, ectopic atrial tachycardia, atrial flutter and atrial fibrillation);
5. Non-pharmacological treatment of ventricular tachycardia;
6. Electrical treatment of arrhythmia with pacemakers and implantable automatic defibrillators;
7. Syncope and sudden cardiac death;
8. Historical, economical, political and legal aspects of Cardiac Electrophysiology and Electrostimulation.

TARGET AUDIENCE: Specialty in Cardiology, Internal Medicine or equivalent academic qualifications obtained abroad.

ADMISSION: The medical degree and CV will be taken into account.

NUMBER OF PARTICIPANTS: 16. A number of extra admissions will be reserved to doctors already employed by Healthcare Institutions.

CREDITS: Each year at least 60 credits

FINAL TITLE: University Master in Electrophysiology and Cardiac Electrostimulation (2nd level).

BEGINNING OF THE COURSE: November 2006

DURATION: 2 years.

STRUCTURE OF THE MASTER: Theoretical teaching will take place in Varese with 60 experts, while practical activities will occur in 8 different Electrophysiology & Electrostimulation Laboratories in Lombardia, (Gavazzeni Clinic of Bergamo, Brescia University, Mater Domini Clinic in Castellanza, Ca' Granda Hospital in Milan, S. Ambrogio Institute and S. Donato Institute in Milan, Pavia University and Insubria University in Varese) which will host 2 Master students each, providing local tutorship as well. Monthly seminars are scheduled with the Italian and International scientific consultants.

APPLICATION: Within June 30, 2006. Admission will be notified before the end of September 2006.

ENROLLMENT FEE: euro 4,000.00 each year.

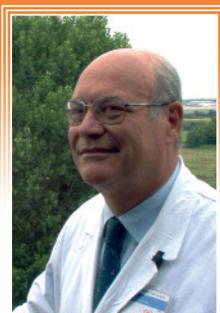
SCHOLARSHIP: The admission to the Master entitles to receive an annual scholarship/grant of euro 24,000.00 (euro 48,000.00 in two years), payable every three months, provided full time attendance.

ENROLLMENT TO SINGLE SESSIONS OF THE MASTER: In addition to regular participants, 15 additional students, with the required qualification, can attend single theoretical modules, and practical laboratory sessions as well, after agreement with the teachers in charge. A profit certificate with relative credits will be issued, after passing an *ad hoc* examination.

INSURANCE COVERAGE: Each participant has insurance coverage, also for practical activities.

NEWS ON THE MASTER: Application forms will be available at www.uninsubria.it (May 2006).

PS: The first cycle of this Master - nowadays on going - was started in Accademic year 2004/2005.



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II Level Master in Vascular Diseases University of Palermo

This Master, Vascular Disease, firstly proposed during the academic year 2003-2004 by Salvatore Novo of the University of Palermo, is meant for doctors interested in the field of Angiology at a post-graduate level. The Master is addressed to General Practitioners, to specialists in Cardiology and other specialists in Internal Medicine, Geriatrics, General and Vascular Surgery and Neurology. The Master in Vascular Diseases has 120 Credit (60 for the first year and 60 for the 2nd year) and 3.000 hours of teaching in two years (1500 + 1500), formal lessons, seminars and practical activity in the Division of Cardiovascular Diseases. The registration fee is 4.000,00 Euro for

the 2 years. The number of students may vary from 8 to the maximum of 16. If the applicants exceed 16, there will be a selection process to undertake. The topics are: anatomy, histology, physiology, pathology, pathophysiology and clinics, non invasive and invasive diagnostics, medical and interventional therapy. The practical activities will be performed in the Division of Cardiovascular Disease and will include: electrocardiography, arterial and venous Echocolor Doppler, transcranial Echocolor Doppler, treadmill test, capillaroscopy, radiologic imaging. The evaluation of students is made at the end of each module. The final examination with the thesis are followed if successful, by the University Diploma of the II Level Master in Vascular Disease.

I Level Master in Non Invasive Diagnostics in Cardiology University of Palermo

This Master, firstly proposed during the academic year 2003-2004 by Professor Salvatore Novo, Professor of Cardiovascular Diseases in the University of Palermo, is for doctors interested in the field of Non invasive Diagnostics in Cardiology (ECG, Holter monitoring, Stress testing, Cardiopulmonary stress testing, Echocardiogram and Eco-Doppler transthoracic and transoesophageous, phisic and pharmacologic echo stress, echocontrastography, perfusioneale myocardial scintigraphy, MR, angio-MR, CT and angio CT, EBCT, multislice TC, and so on). The Master is addressed to:

- 1) General Practitioners that are interested in performing simple diagnostic methods for their patients (ECG, Holter monitoring, echocardiogram, ambulatory monitoring of blood pressure);
- 2) Specialists in Anaesthesiology, Internal Medicine, Emergency Medicine, Geriatrics, General and Vascular Surgery, Cardiac Surgery and Neurology;
- 3) Specialists in Cardiology that have their post-graduation several

years ago, in order to learn the new discoveries in the field of non invasive diagnostics in cardiology.

The Master has 120 Credits and 3.000 hours of teaching in two years, with formal lessons and seminars, practical activity in the Division of Cardiovascular Diseases and self-teaching hours. The registration fee is 4.000,00 Euro, for 2 years. The number of students ranges from a minimum of 8 to a maximum of 16. The modules of teaching are: anatomy, and histology of the heart and great vessels, physiology, pathology and pathophysiology, diseases of the heart and great arteries, non invasive cardiac diagnostics and imaging, invasive diagnostic and interventional therapy, rehabilitation, medical and surgical therapy. The practical activities are undertaken in the Division of Cardiovascular Diseases, including Intensive Cardiac Care Unit and in the laboratories of electrocardiography, ergospirometry, echocardiography, Holter and ABPM monitoring, radiologic imaging. The evaluation of students will occur at the end of each module, while the final examination with the production of a thesis will be followed if successful by the University Diploma of the II Level Master in Non Invasive Diagnostics in Cardiology.

II Level University Master in Percutaneous Cardiac Interventions University of Tor Vergata in Rome

Percutaneous Cardiac Interventions represent a modern way to treat cardiac diseases, that require ad hoc postspecialist expertise, after the basic education provided by the School of Cardiology. The II Level University Master in Percutaneous Cardiac Interventions gives a full introduction to all the aspects of Coronary, Valvular and Electrical percutaneous therapies, providing the student with relevant updates and an adequate practical training. An integration with other techniques (Echocardiography, Multislice Computed Tomography, Magnetic Resonance Imaging) as well as with Molecular Biology will be provided. The Program is structured in semesters:

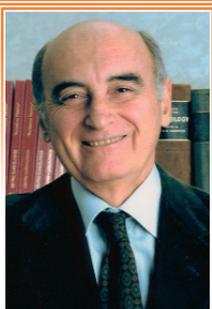
1st Semester

Coronary Interventions: Materials, Methods, Results, Clinical trials.
Valvular Interventions: Mitral, Aortic, Pulmonic Valvuloplasty and Replacement. Methods, Results, Clinical Trials.
Closing Devices: Atrial Septal Defect/Patent Foramen Ovalis, Ventricular Septal Defect, Patent Ductus Arteriosus.
Methods, Results, Clinical Trials

2nd Semester

Percutaneous Interventions Arrhythmias/Electrostimulation: Materials, Methods, Results.

The Master is addressed to Medical Doctors with a Specialty in Cardiology, Medicine or equivalent academic qualifications obtained abroad. Attendants will vary from 2 to 10 with a variable number of extra places reserved to people, who already work in the Healthcare structures. Credits for the year of the Master are 65, in order to obtain the Title of II level University Master in Percutaneous Cardiac Intervention. Theoretical lessons, practical activities, elaboration of a thesis are to be successfully performed in order to pass the final exam of the Master. The course begins in November 2005 and will last 12 months at "Tor Vergata" University of Rome, in the Cardiac Division of Department of Internal Medicine. Each participant will be tutored by an expert in the field of Percutaneous Cardiac Interventions. Once a month, seminars are scheduled with Italian and International consultants. A fee of 3.000,00 Euros is required, that will cover as well the insurance for the practical activity.



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TEACHING ACTIVITIES OF SIC

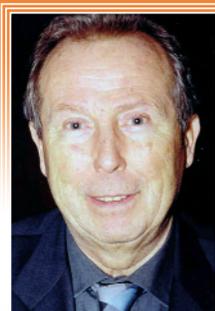
In cooperation with other scientific societies in every Italian region, group of regions or macro-areas, SIC organizes meetings on cardiovascular and inter-disciplinary topics. Audience is usually composite, including specialists, clinicians general practitioners, etc.

COURSES AND MEETINGS ORGANIZED BY SIC (2005, since now on) IN ROME AT ITS OWN EDUCATIONAL SITE (intra mural).

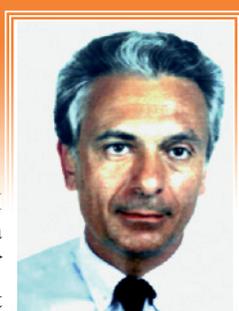
Date	Course Directors	Titles of courses
Sept	16 A. BALBARINI - R. PEDRINELLI	High risk hypertension
	26.27 M. SANTOMAURO	ACLS Instructor
	Sept G. GALANTI - M. PENCO	Sport and Cardiology
October	05 P. PERRONE FILARDI	Detection and treatment of patients at high cardiovascular risk
	07 P. MARINO	Echocardiography and resynchronization
	12 P. PERRONE FILARDI	Renin-angiotensin system and cardiovascular pathology
	14 F. FEDELE- M. MORPURGO	Acute pulmonary embolism: diagnostic and therapeutic approach
	17 A. BALBARINI - S. NOVO	Carotid artery disease: topical issues in diagnosis and therapy.
	19 G. GEROSA - M. RUSCAZIO	Cardiac surgery patient: from preoperative assessment to post-surgery follow-up
	21 A. BALBARINI- V. DI BELLO	New ultrasound technologies in cardiovascular echography
	24 G. DI SCIASCIO	Management of post-infarction patients
	Oct G. BORIANI - M. V. PITZALIS	Atrial fibrillation: from basic knowledge to therapeutic decisions
	Oct A. V. MATTIOLI	Updating course for doctors in the field of Cardiology

COURSES AND MEETINGS ORGANIZED BY SIC (2005, since now on) AT INDIVIDUAL CENTERS OF SINGLE UNIVERSITIES (extra mural).

Date	City	Meeting Site	Coordinators	Title
Sept	30 Sassari	Facoltà di Medicina e Chirurgia	A. GANAU & L. MELONI	Courses of BLS-D CV Emergency Network
October	01 Alghero	Hotel Catalunya	A. GANAU & L. MELONI	ACS and Heart Failure
	08 Genova	Hotel Bristol	G. MOLINARI	Updates in cardiovascular diseases
	15 Copanello Lido	Villaggio Guglielmo	R.ORTUSO & C.INDOLFI	Focus on mitral diseases
	15 Foggia	Fiera	M.DI BIASE & M. RUSSO	Ischemic Heart Disease
	22 Perugia	Accademia Anatomico-Chirurgica	G. AMBROSIO	Diagnosis and therapy of ventricular dysfunction
Nov	04 Chieti	Auditorium Nuovo Rettorato	R. DE CATERINA & M. PENCO	New intervention strategies in acute infarction with ST elevation and atrial fibrillation



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ADDITIONAL TEACHING ACTIVITIES and CONTINUOUS MEDICAL EDUCATION in CARDIOLOGY

PROJECT YEAR OF THE HEART AND EMERGENCY IN CARDIOLOGY

In Italy, cardiac arrest counts 70.000 cases per year and remains a dramatic event as in all other countries. Being an emergency that happens unexpected and so rapidly, there is very little time to counteract it efficiently, with cardiac resuscitation. Each minute that goes by from the onset of the cardiac arrest reduces by 10% the possibility to save the patient's life. To rescue cardiac arrest victims, all potential operators should be put in the conditions to promptly use an automatic defibrillators, as it is the sole means to treat VF or VT without pulse. Early defibrillation represents the crucial ring of the survival chain which links the territory to the hospital. Semiautomatic defibrillators are devices

capable to diagnose potentially fatal arrhythmias; with very high levels of specificity and sensibility, which permit their diffusion among *laymen*. All studies demonstrate that semiautomatic defibrillators have significantly increased the percentage of survival rate. Along with AHA and ILCOR guidelines (Circulation 2000), the Italian Ministry of Health in occasion of the *Year of the Heart* - in order to reduce the number of deaths due to cardiac-respiratory arrest - has published the basic criteria for the organization of early defibrillation courses both for medical operators and *laymen*. Five of these BLS-D courses have been set up by the SIC for the year 2005, in cooperation with other Institutions. Other courses will be planned in the near future.

HEART DISEASE WEB SITE

Prevention of cardiovascular diseases is one of the most important educational issue in our Society since heart attacks and cerebro-vascular accidents account for the majority of death and disabilities in men and women. As lifestyle changes and culture are associated to better results if they start at very early ages, the Italian Ministry of Education, the Italian broadcasting TV station (RAI) and the Italian Society of Cardiology have jointly dedicated a web site to cardiovascular diseases prevention, mainly addressed to children of the secondary schools.

Being a web site, the educational programme may be shared by all the Italian Schools, allowing students, teachers and parents to obtain information on the main causes leading to cardiovascular diseases and on the mechanisms of prevention.

The web site offers a multi-level approach for kids and teachers/parents and it has been designed to be used as either a distance learning tool or a resource for classroom teaching. The language is simple and updated information comes out as a story tell in a boarding school where children and adults live. Teaching materials symbolic drawings have been developed to allow a learning process as most interactively as possible.

PROJECT ON EDUCATION WITH *Medici Sole24ore*

On the basis of its intrinsic mission, history and experience, the Italian Society of Cardiology symbolizes our heritage of knowledge in cardiology and expertise in education. Although the annual Congress represents a fundamental feature for enriching the already existing resources (either scientific background and human capital), there is the need of exploring innovative ways of transmitting knowledge and its

applications. With these proposals in mind and based on the four main congress themes, the popular newspaper *Medici Il Sole 24 Ore* will publish on four consecutive issues the chosen topics, together with the relative questionnaire for assessment.

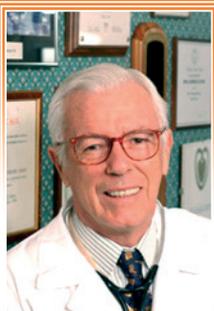
Moreover, the same topics will be strictly related to professional testing in order to verify and guide the process of learning on a web site. Along with the line of full involvement of SIC in the Continuous Education in Medicine (ECM) system, new modalities of distant learning will be implemented to enrich the traditional *classroom learning*.

SIC STAGE Do you know your Cardiology?

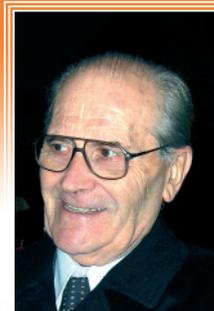
The project *SIC STAGE - Do you know your cardiology?* is meant for General Practitioners who want to undertake an ad hoc training in the field of Cardiology, in order to improve their professional skills. This contribution of SIC - made possible by an educational grant of pharmaceutical Company Pfizer - enriches the panorama of permanent education of GPs in fundamental aspects of the healthcare system, linking the hospitals to the territory and trying to fill in the gaps in the field of cardiology, where important developments and innovations have taken place, with a trend toward hyper-specializations. As other specialties, Cardiology suffers from the lack of communication and cultural osmosis among those who operate in hospitals and those outside hospitals. The project will take place on a national basis and the kick off will take place in Lombardia, involving 4 Universities of Northern Italy (Brescia, Milano, Monza and Varese).

The majority of activities of Continuous Medical Education programs have given emphasis to theoretical teaching and updates, also for logistic reasons. The project *SIC STAGE - Do you know your cardiology?* will offer to GPs the possibility of meeting cardiologists acting in the ward, for a whole week, fully devoted to get operative exposure to diagnosis, therapy, pharmacological and non pharmacological decision making. During the week, each session will be guided by an expert cardiologist, in the function of tutor, and will cover the following topics:

1. Echocardiography
2. Electrophysiology and Electrostimulation
3. Ergometry
4. Holter Monitoring
5. Hemodynamics and Interventional Cardiology
6. Coronary Care Unit;
7. Clinical activities, with exposure to patients with different cardiac diseases, ranging from ischemia to cardiomyopathy, from valvular to congenital problems, up to heart failure, etc.



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Thursday, 02 December 2004

From North to South, in all Italy Lessons of Cardiology / Lezioni di Cardiologia in Videoconference.

The project MEDILEARNING, edited by Il Pensiero Scientifico Editore, in collaboration with pharmaceutical Company *Sigma Tau*, foresees, through an innovative system of multiple videoconferences, a monthly connection among 29 Specialty Schools in Cardiology of the different Italian Universities.

From Trieste to Sassari, more than one thousand Cardiologists and *specializzandi* will have the chance to attend lessons on specific topics, with the help of videos and slides and, moreover, they will be able to ask questions in real time during a specific session. Such sessions will continue online, on the website: www.lezionidicuore.it, where both videos and textbooks concerning the lessons are available. Those interested will have the possibility of interacting by asking and answering questions. The project, sponsored by the Ministero della Salute, is particularly important as it allows doctors and *specializzandi*, no matter where they work, to overcome territorial and technological barriers, also leading to sharing ideas, protocols and guidelines among the different Specialty Schools.

By this logic, a few days ago there has been a lesson on the AHA Congress of New Orleans (November 2004), with the lectures of four representatives each reporting on one major thematic area: Cardiovascular Imaging and Infarct (Sabino Iliceto, University of Padua), Cardiological Emergencies (Massimo Chiariello, University of Naples), Hypertension and Dyslipidemia (Enrico Agabiti Rosei, University of Brescia) and Arrhythmias (Jorge Salerno Uriarte, University of Insubria in Varese). The project will be expanded, starting from next year, also with lessons concerning other issues, among which Oncology.

For information: info@medilearning.it

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OPPORTUNITIES FOR YOUNG DOCTORS TO STUDY CARDIOLOGY

In addition to the institutional grants provided by the Ministers (MIUR, Ministero della Salute, Regions, etc.) as well as by private funding, for Specialty, Ph.D. and Master Programs, the SIC offers a number of opportunities that can be, and should be, taken and exploited by junior Cardiologists.

The Italian Society of Cardiology Scholarships

The SIC issues 8 Scholarships of 4 different types:

- N. 2 Scholarships of 3 months, to be spent in Italian Institutions (Euro 3.000,00);
- N. 2 Scholarships of 6 months, to be spent in Italian Institutions (Euro 6.000,00);
- N. 2 Scholarships of 6 months, to be spent in foreign Institutions (Euro 12.000,00);
- N. 2 Scholarships of 1 year, to be spent in foreign Institutions (Euro 25.000,00).

The scholarships - reserved to Members of SIC who are below 40 years at the closing date of the application deadline - are meant to enhance the knowledge of therapeutic and diagnostic methods, in order to learn as well to develop experimental and clinical research protocols aimed to study in depth cardiovascular diseases.

Deadline: September 30, 2005.

Applications should be sent by mail (R/R) to: Scientific Secretariat of SIC, via Po 24 - 00198 Roma

Prizes for PhD's and Specialists in Cardiology (who are younger than 35 at December 10, 2005)

The SIC offers two prizes (1st Prize, Euro 3.000,00 and 2nd Prize, Euro 2.500,00) for the members who, during the last academic year, have got the Doctor degree in the cardiovascular area or the Specialty in Cardiology.

Deadline: December 10, 2005.

*Applications should be sent by mail (R/R) to: Scientific Secretariat of SIC, via Po 24 - 00198 Roma
or they should be e-mailed to the following address: segreteria scientifica@sicardiologia.it*

Other Fellowships, Prizes and Grants for Scientific Activity

SANOFI AVENTIS Group and SIC advertise for the year 2005-2006 N. 2 scholarships 8.000,00, eight thousand euros each for scientific research.

The competition is reserved only to Italian citizens who are younger than 32, graduated in biomedical subjects, with the aim to improve the training and the specialization in the basic or clinical research area, by the development of cardiovascular topics, scientifically wise.

Deadline: September 30, 2005.

*Applications should be sent by mail (R/R) to: Scientific Secretariat of SIC, via Po 24 - 00198 Roma
or they should be e-mailed to the following address: segreteria scientifica@sicardiologia.it*

Award "Giovani Ricercatori"

Authors wishing to enter for the "Young Investigator Awards" must send written proof that the first Author is aged under 35 (by the deadline for the submission of abstracts) by fax to the following fax number: (+39) 06/85356927, by May 31st, of each year. The best 5 presentations will be awarded by an amount of euros as follows:

	1 Prize	3.000,00	
	2 Prize	2.500,00	
	3 Prize	2.000,00	
	4 Prize	1.000,00	
	5 Prize	750,00	



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The Working Groups of the Italian Society of Cardiology

Structure of WG's

Following the approval of some changes in the bylaws and inspired by the model of the ESC, new WG were created in the SIC. S. Novo, coordinator, P.G. Agostoni, A. Ganau, C. Rapezzi, M. Santomauro, C. Tamburino, M.G. Modena and G. Thiene, supported by Mrs E. Caporale, worked to coordinate the policy of all the WG's of SIC towards all the institutions. Such a Committee will be renewed every 2 years and has, so far, created 24 Working Groups, each one composed by a Chairman, a Vice-Chairman, a Secretary, a Nucleus and some members, all chosen for recognised competence as experts in the field of interest. These Officers are replaced every 2 years, with the Chairman becoming past-Chairman. The members of the Nucleus may be re-elected for a second, and last, term of two years. Each Working Group has the freedom to organise itself, in the respect of general rules as above mentioned. The Working Groups of SIC have to contribute significantly to the activities of the Society not only by proposing Cardiovascular topics for teaching and research but also supporting for the organization of Meetings.

Functions of the WG

- Promote intra or extra mural teaching Courses on specific topics;
- Organise multicenter research, in Italy as well as abroad;
- Exchange scientific and educational information;
- Contribute to the scientific set up of the Annual National Congress of the SIC, by suggesting topics;
- Outline and define appropriate recommendations or guidelines in the field of interest.

Membership of the WG

Requests should be sent to the Chairman of the WG of interest, while the application will be discussed by the Nucleus and approved by the General Assembly of the WG. Application forms may be available at sicardiologia@cardiologiaonline.it

Meetings

The meetings of the WG's take place during the Annual Congress of the SIC. Each Working Group organises a business meeting to discuss current and future activities, while in the plenary session the Chairmen of different WG will present the activities developed during the previous year. *Ad hoc* scientific meetings may occur, as needed, during the year on the initiative of the Chairman or of local experts or members of the Working Group itself. The site of the SIC in Rome may accommodate the annual meeting of the WG's Chairpersons, in order to coordinate all the due activities.

For any information on the Working Groups, please contact the Office for Working Groups, the Coordinator of the Committee for the WG or the Chairman of the different WG. Name and address as well as telephone numbers and e-mail of all these persons are available on the website of the SIC and in this booklet.

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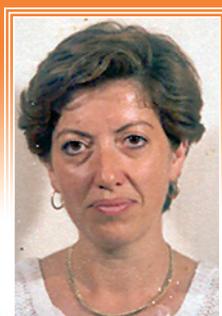
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Pulmonary Circulation and RV Function

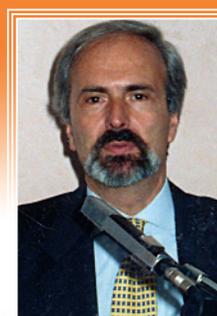
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SCHOLARS IN CARDIOLOGY

Many scientific societies since years have established various positions among their own members, with the aim to distinguish different levels of scientific and cultural profile and to stimulate ambition and competition among the young people. The term Fellow was usually employed as a distinguished member. The Italian Society of Cardiology felt the need to create a peculiar distinctive figure with an academic value among its own members, in keeping with its institutional mission. The name of *Scholar in*

Cardiology was introduced to underline that the worthy people should possess outstanding merits in science.

The prestigious acknowledgement was introduced in 2002 and reserved to members of the Society aged less than 50 years, with an international reputation, who have published significant contributions in top journals, collecting an overall impact factor over 200.

Usually no more than four to six scholars a year are nominated.

Winners of Scholars in Cardiology (2002, 2003 and 2004)

2002



Cristina BASSO
Padua University



Alfredo Ruggero GALASSI
Catania University



Nazzareno GALIE'
Bologna University



Silvia Giuliana PRIORI
Pavia University

2003



Giuseppe BORIANI
Bologna University



Alida Linda P. CAFORIO
Padua University



Paolo GOLINO
Naples University



Marco METRA
Brescia University

2004



Piergiuseppe AGOSTONI
Milan University



Cristina CHIMENTI
Rome University



Francesco COSENTINO
Rome University



Raffaele DE CATERINA
Chieti University

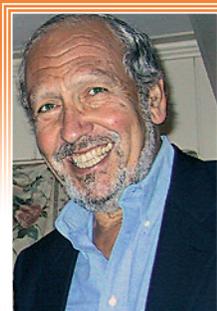


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Winners are celebrated with full honours during the Opening Ceremony at National Congress of SIC. They do receive a Medal and a Diploma, signed by the President and written in Latin, where Italian Society of Cardiology is named *Italiorum Societas Cardiologica* and the term Professor is *Magister*, while Scholar is *Eruditus*.



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2.	Palermo	15.	Ferrara
3.	Parma	16.	Messina
4.	Milan	17.	Chieti
5.	Rome Catholic <i>Sacro Cuore</i>	18.	Pisa
6.	Verona	19.	Pavia
7.	Naples	20.	Turin
8.	Bari	21.	Modena e Reggio Emilia
9.	Bologna	22.	Cagliari
10.	Perugia	23.	Brescia
11.	Naples <i>Federico II</i>	24.	Siena
12.	Genua	25.	Padua
13.	Catania	26.	Trieste



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Publications

The Italian Society of Cardiology has a long-standing editorial policy and tradition, involving four main publication areas, one of which is meant for the general public.

1. The official quarterly bulletin, *Sic et Simpliciter*, is a direct link with own society Members. *Sic et Simpliciter* provides updates on all the institutional, scientific and educational activities of SIC. It includes also general articles on medical history and hot issues in Cardiology.

2. In synergy with Italian Association of Hospital Cardiologists, SIC is actively involved in the *Italian Heart Journal*, peer-review publication of Italian Federation of Cardiology.

3. Monographies on individual diseases or specific topics in the field of cardiovascular pathophysiology and treatment are published by SIC. Five booklets have appeared in the last 4 years:

- *Arrhythmogenic Cardiomyopathy*;
- *Cardiac and Vascular Hypertrophy in Hypertension*;
- *Pathophysiology and Clinical Relevance of the Endothelium*;
- *Cardiac Remodeling*;
- *Interventional Cardiology*.

4. SIC is actively involved in producing books for the general public, mainly dealing with the importance of a sound diet. These publications promote *healthy* eating in an enjoyable way, in an attempt to overcome the bad hair-shirt image commonly associated with dietary advices. Two books are already available:

- a) *The heart in the plate*;
- b) *The heart's cooking*.

SIC ET SIMPLICITER

ITALIAN HEART JOURNAL

MONOGRAPHIES

“Cardiomiopatia Aritmogena”

“Ipertrofia del Cuore e dei vasi nell'Ipertensione”

“L'endotelio - Fisiopatologia e Valore Clinico”

“Il Rimodellamento Cardiaco”

“La Cardiologia Interventistica”

BOOKS FOR THE PUBLIC

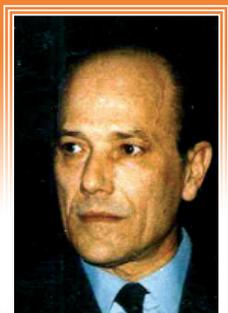
“Il cuore nel piatto”

“La cucina del cuore”

If you are interested to get a copy, please write to:
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Acknowledgements

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Società Italiana di Cardiologia