Please join all of the AHA community and in particular our council members in congratulating Dr. Timothy Gardner, who has been nominated as the association’s president-elect. Dr. Gardner has served the AHA in several capacities, most recently as chair of the Committee on Scientific Sessions Program. He was the first surgical AHA representative to the ACC/AHA Task Force on Practice Guidelines, from 1995–2000. He served on our council’s leadership committee for many years (as chair from 1997–99) and received our council’s Mentoring Award in 2005. His nomination is a tribute to his broad-reaching understanding of the relationship between basic science and clinical practice, his participation in AHA programs and initiatives, and his dedication to the AHA mission.

Scientific Session 2007 will be held Nov. 4–7, 2007, in Orlando, Fla., at the Orange County Convention Center. Abstract submission deadline is June 1. We encourage all basic and clinical scientists in the areas of cardiac and vascular surgery and cardiovascular anesthesiology to submit abstracts and to attend the meeting. Our council’s Vivien Thomas Young Investigator Award Competition is entering its 12th year and has attracted an ever-increasing number of high quality abstracts. We encourage young investigators and their mentors to submit their best work for this competition. As always, Scientific Sessions will offer a wide variety of abstract and poster presentations, plenary sessions, meet-the-expert panels, how-to-do-it sessions and other symposia in our areas of interest. Scientific Sessions offers a unique opportunity to interact with non-surgical/anesthesia cardiovascular specialists whose research and clinical interests may correspond to yours. Go to http://scientificsessions.americanheart.org/portal/scientificsessions/ss/submitabstracts for additional information about Scientific Sessions and to submit abstracts. We look forward to seeing you in Orlando.

For those of you with research interests in cardiovascular repair and myocardial regeneration, I encourage you to submit abstracts to the 4th Annual Symposium of the Basic Science Council, to be held in Keystone, Colo., July 30–Aug. 2, 2007. The focus will be on “Structural and Molecular Approaches in the Cellular Area” with an abstract deadline date of April 16. Go to http://www.americanheart.org/presenter.jhtml?identifier=3044056 for additional information.

The AHA and ACC are embarking on a multidisciplinary project to develop practice guidelines on the management of patients with thoracic aortic disease. Members of our council will be representing the surgical and anesthesia specialties on the writing group. The first writing group meeting will take place just prior to the ACC meeting in New Orleans. It is hoped that the final publication will be available in about one year.

On the advocacy front, please note the importance of encouraging our legislators to appropriately fund research and health care relating to cardiovascular diseases and stroke. The AHA has a very active advocacy program in Washington, D.C., but your grassroots support is needed. You can quickly and easily contact your legislators to support important legislation in these areas. Go to http://www.americanheart.org/presenter.jhtml?identifier=2945 to join the grassroots network and to learn how simple your supporting “vote” can be.

We encourage all members of the council to check with their non-member colleagues about joining. Membership information and benefits can be found at http://www.americanheart.org/presenter.jhtml?identifier=3004002. The more members we have, the more we can broaden our scope of opportunities within the AHA.

Please feel free to contact me with any thoughts or suggestions on how we can better serve you, our members.
Society of Cardiovascular Anesthesiologists

Christina Mora Mangano, MD, FAHA

Over the last two decades, the Society of Cardiovascular Anesthesiologists (SCA) has enjoyed a productive relationship with the AHA’s Council on Cardiac Surgery and Anesthesia. Since 1996, a representative from the SCA has sat on the council’s Leadership Committee and participated as a member of their Program Committee. The ongoing interaction has been an important portal to improved communication between the two groups. This article outlines some of the common interests of cardiac surgeons and anesthesiologists and serves as an introduction to the Society of Cardiovascular Anesthesiologists.

In 2007, enhancing communication between the cardiac surgery community and cardiac anesthesiologists is critically important. Patients presenting for cardiovascular surgery today are increasingly aged and suffer a greater number of co-morbidities than patients we cared for during the 1990s and earlier. The complexity and technical challenge of many procedures has increased (“beating-heart” surgery, mitral valve repair, aortic valve resuspension, the application of circulatory arrest with ante-grade and/or retrograde cerebral perfusion) and thus the quality of communication among the individuals caring for a surgical patient is critical. Increasingly, the clinical issues, research endeavors and educational initiatives of the CV anesthesiology community overlap with those of our surgical colleagues. Clearly the patient goals are the same: offer surgical interventions to improve the duration and quality of an individual’s life. (Anesthesiologists are also tasked with maintaining the patient in an unconscious, pain-free state during the intervention – but this writer offers that this is the least challenging of our responsibilities.) Challenges shared with our surgical focus on limiting end-organ damage and enhancing the rate of recovery. The anesthesiologist has also become the echocardiography consultant in the operating room. Many ambitious procedures could not be performed without real-time, on-going echocardiography. In all academic heart centers, and in the majority of private practices, the cardiac OR includes an anesthesiologist expert in intra-operative echocardiography.

The SCA is an international organization of physicians that represents the anesthesiology colleagues of the cardiac surgery community. In 2008, the SCA will celebrate its 30th anniversary. The organization continues to grow and now includes 6,984 members (including 2,599 residents and 79 fellows, and approximately 1,000 members from 32 countries outside of the United States). The original mission of the SCA — to facilitate education, research and clinical excellence in the fields of cardiovascular and thoracic anesthesia — remains and is supported by an increasingly robust set of activities.

Providing educational programs for our membership remains at the core of the SCA mission. The Accreditation Council for Continuing Medical Education refers to the SCA as a role model for similar organizations in regard to their educational missions. The SCA sponsored three domestic meetings in the past year. The 10th Annual Comprehensive Review and TEE Update took place in San Diego in February 2007 and included the almost 600 participants enrolled in this educational endeavor. In March of this year, the 12th Annual Update on Cardiopulmonary Bypass Meeting was held in Whistler, British Columbia, Canada. The multidisciplinary meeting included more than 270 anesthesiologists, surgeons and perfusionists. Our 2007 Annual Meeting and Workshops in Montreal, Canada, received outstanding reviews by the almost 850 registrants.

The SCA proposed and supported the establishment of accredited training programs in cardiothoracic anesthesia. In 2006, the Anesthesiology Residency Review Commission approved our application. Over 20 academic centers have applied for and achieved accreditation for their cardiac anesthesiology training programs. The SCA Board of Directors believes that accreditation of fellowship training programs is essential to achieving the goals of the SCA’s strategic mission. The SCA continues to consult with the National Board of Echocardiography (NBE), which prepares and administers the certification examination in perioperative echocardiography. Over 2,050 physicians have passed the exam, 1701 are testamurs, and approximately 400 members of the SCA and the NBE have completed guidelines for board certification in perioperative transesophageal echocardiography. These guidelines define the nature and extent of training and experience required for individuals to qualify for board certification.

The SCA is committed to assisting members of the anesthesiology community in participating in the examination and certification processes and achieving desired status. The SCA co-sponsored the revision of the ACC/AHA TEE practice guidelines. The SCA continues to support research activities by funding grants and by offering opportunities for presentation of original research at its Annual Meeting. Over the last 28 years, the SCA awarded over 33 grants to investigators in the discipline of cardiovascular anesthesia. These awards include both starter and mid-career grants. To enhance our ability to support original research, the SCA Board of Directors has established an independent Research and Education fund and is in the process of establishing an independent, non-profit foundation. The Board continues to augment this account as is fiscally possible.

The SCA greatly values its relationship with the AHA and the Council on Cardiac Surgery and Anesthesia. We hope that our collaboration will continue to improve our ability to care for patients requiring cardiovascular surgery.