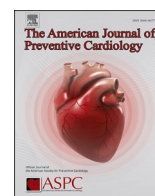


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President's page: ASPC is leading the way in preventive cardiology

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ABSTRACT

It is hard for me to believe that my two-year term as president of the American Society for Preventive Cardiology (ASPC) will conclude in just 4 months. My objective over the last two years has been to make ASPC a major driving force and leader in the field of preventive cardiology. Although my time as president will conclude shortly, I will continue to make sure these goals are brought to fruition by satisfying goals and milestones I set at the start of my presidency, and by helping the leadership coming forward to achieve their goals as well. My only regret is that the COVID-19 pandemic made me unable to interact with so many of our valuable members. Hopefully, I will still meet many of you at the Annual Meeting in Louisville this July which will be held live.

1. New courses

The ASPC Expert Course in Preventive Cardiology has been fully updated and expert faculty expanded. The Expert's course now incorporates 24 one-half hour lectures that span the entire spectrum of preventive cardiology. Attendees have expressed enthusiasm for both the comprehensiveness and quality of the presentations. They also express appreciation for the fact that most faculty stay for the entire course and are accessible and willing to interact and answer questions.

I am pleased to announce that we will be launching two new Master Classes in preventive cardiology. The first is entitled "IMAGING TECHNIQUES TO ASSESS GLOBAL CVD AND CVD RISK," and will be chaired by Drs. Alison Bailey and Harold Bays and will be held July 28-29 in Louisville, Kentucky. It will conclude just before the start of our Annual Meeting. Topics to be covered include: (a) overview of cardiac imaging, (b) coronary calcium and coronary computed tomography (CT) angiography, (c) echocardiography and magnetic resonance imaging, (d) treadmill testing, myocardial perfusion imaging, and positron emission tomography (PET) scanning, (e) cardiac catheterization, intravascular ultrasound (IVUS), and optical coherence tomography (OCT), (f) practical tips, and (g) a debate on chest pain evaluation and management.

A Master Class in Exercise and Lifestyle will launch in 2023. This initiative will be led by Drs. Barry Franklin and Heather Johnson. The curriculum for this class is in development but will also be comprehensive and state of the art.

2. The ASPC annual meeting

The organizing committee for this year's meeting has done an outstanding job of assimilating a broad range of fascinating lectures under the rubric of "The ABCs of Preventive Cardiology." This year's conference will be held in Louisville, a city of charm, grace, and excellent bourbon. It is also home to the Muhammed Ali museum and the Louisville Baseball Bat Co. A sampling of lectures planned include: (a) ABC's of Preventive Cardiology, (b) the Heart-Brain axis, (c) children and primordial prevention, (d) costs of prevention, (d) role of stress management in cardiovascular disease (CVD) prevention, (e) impact of treating inflammation in preventing vascular disease, (f) glomerulus: the intersection of the heart and kidney, and (g) and dream and sleep: effect of sleep on CVD., among others. The Women in Preventive Cardiology section of ASPC is highly active and is made up of a veritable Who's Who of women preventive cardiologists. Prior to the start of the annual meeting, they will be hosting a luncheon entitled, "Networking with the Women in Preventive Cardiology." The luncheon will be followed by a satellite symposium (Saving the Hearts of Women Through Prevention).

3. Mentorship program for fellows in training and young physicians

The ASPC Board of Directors (BOD) approved a mentorship program for fellows in training and young clinicians. Many of our up-and-coming members have chosen mentors through this program. It is our hope that by mentoring physicians early in their careers, we can help foster vital, productive careers in preventive cardiology. In addition, we now have a

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physician representing these two groups on our BOD. This representative serves a one-year term on the BOD. It is hoped that these individuals will help to grow ASPC and pursue leaderships paths within our organization.

4. Defining preventive cardiology

Later this year we will be publishing a comprehensive definition of preventive cardiology.

5. ASPC centers of excellence

Later this year we will be publishing a set of clinical and organizational criteria that will have to be met in order for an institution to achieve status as an ASPC Center of Excellence in the practice of CVD prevention.

6. Added certification in cardiovascular disease prevention

The ASPC recognizes that there are many endocrinologists, internists, and family physicians committed to the practice of CVD prevention. There is simply no way for ASPC to develop a certification program that grants someone the right to henceforth be defined as a "preventive cardiologist." This designation requires the completion of an internal medicine residency and fellowship in cardiology. However, we would like to facilitate recognition of outstanding clinicians who focus on CVD prevention in their practices.

In 2023 we will be introducing a pathway that awards participants in the program with Added Certification in Cardiovascular Disease Prevention. This will require completion of a comprehensive program which includes the following:

A. A pre-specified number of CME hours committed to preventive cardiology over 2-3 years. Yes, retrospective appropriate CME can be used. Curriculum requirements will be published.

B. Completion of the ASPC Preventive Cardiology Self-Assessment Program comprised of approximately 250 questions.

C. Successful passing of a certification examination (approximately 150 questions). This will be administered by a professional testing service with expert validation.

D. Attending a specified number of hours at the ASPC Expert's Course, Annual Meeting, or the Master Classes.

E. Published research or CME presentations pertaining to preventive cardiology.

Greater definition of qualifying criteria will be presented at the Annual Meeting in July.

7. Fellow of the ASPC

I am happy to announce that the ASPC will be welcoming 8 of our

members to fellowship status. These physicians will be presented with a beautifully framed certificate acknowledging their new status in our organization. I look forward to congratulating each of these awardees in person in Louisville and acknowledging their many achievements and contributions to the practice and advancement of our field.

8. Membership growth

I am most pleased to be able to say that ASPC has over 300 new members over the last two years. We want this trend to continue. If you know someone who is enthusiastic about CVD prevention, tell them about us and encourage them to join us in our endeavors to advance the field. We want to incorporate their intelligence, energy, and dedication into what we do.

9. Clinical practice statements

We now have two Clinical Practice Statements (CPS) that have appeared in the AJPC in the last few months. The first, chaired by Drs. Erin Michos and Keith Ferdinand, is a deeply insightful document detailing how we can encourage greater participation of women and members of racial minorities to participate in cardiovascular clinical trials. The second is one chaired by Dr. Matthew Budoff and addresses the importance of cardiac CT angiography in current preventive practice. Five more will be forthcoming this year: there will be a two-part CPS on exercise and CVD (chaired by Dr. Barry Franklin) as well as ones on nutrition (chaired by Dr. Danielle Belardo), global risk assessment (chaired by Dr. Nathan Wong), and coronary calcium measurement (chaired by Dr. Michael Blaha). If you have an idea for a CPS or would like to be part of a writing committee for one, please email me at peter.toth@cghmc.com.

10. Strategic planning

Later this month some members of the BOD and I will gather for 2.5 days for a strategic planning meeting. We will be looking at ways to improve, consider innovative ideas and approaches, and to make ASPC more relevant to you. We will be looking at recruitment efforts, advocacy, encouraging more people to participate in committees, lead initiatives, develop CME programming, and forge new partnerships.

ASPC is dynamic and on the move. If you would like to become more involved, let me know. If you have ideas, tell me what you want to do. We want more people involved. Join us in the quest to keep people healthier for longer and to defeat as many manifestations of CVD as possible.

Declaration of Competing Interest

None.