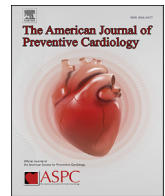


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ASPC President's Message

Expanding educational infrastructure for American Society for Preventive Cardiology

I am deeply honored to author my first President's Page for the American Society for Preventive Cardiology (ASPC). The ASPC is evolving rapidly and meeting the educational needs of our membership is a vital part of our mission. Our members are motivated, highly committed clinicians devoted to comprehensive cardiovascular disease prevention. Cardiovascular disease (CVD) remains the leading cause of death and disability throughout much of the world. For three decades we witnessed substantive reductions in mortality from CVD. Despite the availability of ever more effective drug and procedural interventions, since about 2013, this trend reversed and we are observing increasing rates of CVD mortality once again. This will most certainly be exacerbated by the COVID-19 pandemic which dramatically altered the risk for morbidity and mortality for those with underlying CVD. The pace of change in cardiovascular medicine is rapid and we must be prepared to meet new challenges head on and deliver personalized, state of the art medicine on a day to day basis. We want to help our membership accept these challenges with enthusiasm and energy.

The ASPC 2020 Virtual Summit on CVD Prevention was highly successful with over 850 attendees. With a strong focus on the care of patients from racial minorities and women, a very talented faculty brought much needed attention to clinical differences between racial groups and between men and women. We learned about health care disparities as well as what needs to be done to close health care gaps for both the diagnosis and treatment of CVD in all people. A variety of other lectures and debates brought focused attention to a host of other issues, such as use of the polypill, implications of the ISCHEMIA trial, and novel approaches to heart failure management, among many others. For clinicians interested in viewing the lectures on an on demand basis, please register at <https://www.asponline.org/congress2020/>. There is no charge. This will also be a great way for you to become acquainted with ASPC and receive CME. We are already planning ASPC 2021. It will be a program emphasizing inclusiveness and the care of one and all at risk for CVD. It too will include cutting edge lectures and lively debates exploring the broad spectrum of preventive cardiology.

Professional societies throughout the world have crafted guidelines in cardiovascular medicine. The ASPC is happy to contribute to such efforts, but as an organization we will focus on producing a different type of document: Clinical Practice Statements. These will be highly focused, succinct statements of 5–8 printed pages published in the American Journal of Preventive Cardiology. They will include the most important, practical information to understand and apply in everyday clinical settings. The first four topics include: (1) approaches to increasing participation of women and persons from minority groups to participate in clinical trials; (2) appropriate use and interpretation of CT angiography and coronary calcium scoring; (3) understanding and applying dietary interventions known to impact risk for cardiovascular disease; (4) making exercise a daily part of life and reducing risk for heart disease. These

clinical practice statements will be authored by two chairpersons with recognized expertise in the topic, a patient, as well as members of ASPC with an interest in participating. These will be authored on average by 6–8 ASPC members. We have members who have spent a long time thinking about issues or who have significant experience with specific problems in cardiovascular medicine. We want to tap into that resource and make you feel included in the academic and intellectual life of our organization.

In recent years we have offered an Experts Course in Preventive Cardiology. We are expanding the course and making it a free-standing academic offering independent of the annual meeting. It will include 27 one-half lectures over two days. The course encompasses the management of issues in hypertension, chronic kidney disease, coronary artery disease, obesity and dieting, use of anticoagulants and anti-thrombotics, atrial fibrillation, dyslipidemia, exercise, obstructive sleep apnea, inflammation and CVD, racial and gender differences in CVD, androgen supplementation, peripheral arterial and venous disease, cardiac imaging, and others. The faculty is highly talented and engaged. There will be ample time to interact with faculty and address questions. A certificate for Continuing Medical Education is provided at conclusion of the course. The course will have its own textbook, the ASPC Manual of Preventive Cardiology (Wong, N., Amsterdam, E., and Toth, P.P. Springer 2020). All attendees will receive a copy.

We are committed to growing our membership by another 300 persons over the next two years. We welcome clinicians from all parts of the world who share in our mission. I particularly want to welcome more women and persons from racial and ethnic minority groups to join, which can help us expand our commitment to healthcare for all with invigorated insights and to fight to reduce disparities in the care of people at risk for CVD both in the United States and throughout the world.

We are establishing a young physician's section within ASPC. These recent graduates of residencies and fellowship programs are brimming with energy and new ideas. They are eager to shine a whole new light on problems, and we will afford them every opportunity to do so. A young physician will also hold a single two-year term on our Board of Directors. This will provide young physicians with an opportunity to enter into a leadership position within our organization and foster their long-term development and commitment to our field.

In an effort to emphasize inclusiveness and to bring forward the next generation of thought leaders, the document entitled "2021 Top Ten Things to Know about Ten Cardiovascular Disease Risk Factors" will include important commentary by ten mentors and 10 mentees with aspirations for an academic career in medicine. This effort will be lead by Dr. Harold Bays and will be a rich source of information of great daily utility. This will be published in the AJPC.

We want you to take advantage of DocMatters. Please sign up. Every 2 weeks a member of our Board of Directors will initiate dialogue about a

controversial issue or important new finding relevant to preventive cardiology. This then initiates a cascade of responses from our membership. The back and forth is extraordinarily insightful and educational. Members of ASPC are also free to initiate a DocMatters cascade. Try it.

A working group of board members and at large members will be studying the issue of how to define preventive cardiology. In addition, we will initiate work on a self-assessment program in cardiovascular disease prevention and explore ways by which a certificate of added expertise might be given to members who complete a rigorous program of continuing medical education. The ASPC will be developing educational webinars, is looking to partner with other organizations who share in our goals and objectives in medical education, and will be creating a Hospitals and Health Systems Centers of Excellence in Preventive Cardiology Program.

The ASPC committees and working groups require commitment, time, and energy. If you are interested in being a part of a committee or a

future member of the board of directors, then email me. The ASPC wants you to feel included. You do not have to be a cardiologist to join. I am a family physician. If you share in a commitment to cardiovascular disease prevention, you will find your professional home with us. You will feel like you became part of a highly functional family.

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