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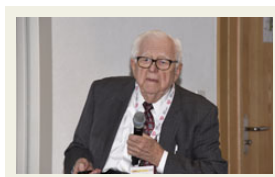
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Funding

The course is supported by educational grants from St Jude Medical, Servier, Novartis, and Bayer Healthcare.

The Postgraduate Course in Heart Failure

The First Postgraduate Course in Heart Failure reviewed from the perspective of three participant physicians from the Netherlands



The formal declaration of war on heart failure (HF) by the iconic Eugene Braunwald marked the spectacular culmination of the first Postgraduate Course on Heart Failure (PCHF) in October 2015. After 160 h of intense lectures, 140 h of self-study, and 8 elaborate examinations, Europe has now witnessed the graduation of the first genuine HF cardiologists trained on its soil. The first group consisted of 59 participants from 32 countries, mainly from the European Union but also including participants from Russia, India, Mexico, and the Dominican Republic. We had the privilege to be among the first PCHF graduates and would like to highlight those aspects of PCHF that make it unique (Figure 1).

Why we chose Postgraduate Course on Heart Failure

The reason to specialize in HF was shared by most participants, as we were all motivated by the immense burden of HF on our patients and communities. 'While the tsunami of HF that we are now facing should be regarded as the success of cardiology' (Eugene Braunwald), our health care systems are barely coping. Or as Frank

Ruschitzka liked to say, 'HF has changed from Cinderella into center stage'. But it was not only the sheer patient volume that motivated us to apply for PCHF.

The expanding and often multidisciplinary treatments have made contemporary HF management so complex that it requires a dedicated physician with specific expertise in the multiple domains of HF care, including clinical medicine and pharmacotherapy, cardiac devices and their programming, imaging of the heart and multidisciplinary decision making. While HF training programmes have been available in the USA and the UK for a decade, the European Society of Cardiology (ESC) HF curriculum in Europe has only recently been published.¹ Postgraduate Course on Heart Failure thus offered the first opportunity to specialize in the most important disease of our time.

Postgraduate Course on Heart Failure course overview

The course was designed and organized by the department of cardiology at the University Hospital Zurich, and led by the energetic and captivating chairs Prof. Frank Ruschitzka and Prof. Thomas F. Lüscher. It has to be stressed, however, that the entire staff of



Figure 1 Postgraduate Course on Heart Failure participants and lecturers.

cardiology contributed to the course with remarkable enthusiasm and proficiency. The impressive network of the course directors allowed for most lectures to be given by key opinion leaders from around the world and interactive discussions with the participants were strongly encouraged. In addition to lectures, there were exciting rapid-fire sessions with live cases from the catheterization lab, hands on training in various skills (including echocardiography, ECMO implantation, and LVAD trouble shooting), clinical rounds in the University Hospital Zurich, and interesting HF cases presented by the participants. The themes were carefully selected to include all relevant aspects of contemporary HF care, including a whole module dedicated to hands on training in device implantation and troubleshooting. The seemingly impossible task to integrate 11 h of intense lectures and effective hands on training all in 1 day was accomplished with the Swiss sense of timing and the meticulous organizational skills of Ruth Amstein PhD, Kirsten Schlaudraff MD, and Lydia Tchambaz PhD from the Zurich Heart House. As Karl Swedberg noted that 'There are very few centers in the world that could have pulled this off'.

Highlights of Postgraduate Course on Heart Failure

Mentioning highlights is difficult as all modules were of very high quality with excellent talks and content. The quality of the course was underscored by the fact that it was rated as excellent by >80% of the candidates. We were indulged with global experts and assembled outstanding faculty staff, resulting in a line-up not many congresses can match. It felt like walking in the footsteps of giants for each and every module. The relaxed atmosphere encouraged us to exchange ideas and clarify misconceptions with these experts as if we were joining them on ward rounds.

It is impossible to mention all outstanding lectures, but of specific merits were the imaging lectures by the ESC president Jeroen Bax, walking through the ESC Guidelines with their writers John McMurray and Alec Vahanian, discussing clinical finesse with Frank Ruschitzka and his team, and the grand finale with three visionary lectures by Mandeep Mehra and Eugene Braunwald.

One of the absolute strengths of the course was its dynamic nature, as the course structure was continuously adjusted to allow implementation of paradigm shifting scientific discoveries as they occurred. For instance, the course was adjusted to allow the lead author of the PARADIGM study, Prof. John McMurray, to present unique insights into the study just weeks after its publication.²

Another absolute highlight was the HFpEF module, led by Carolyn Lam and Scott Solomon. The lectures provided detailed insight into this complex disease for which no treatment is currently available. We also discussed all the drug trials that have failed and ways to advance, including new trials such as PARAGON.³

Another highlight we need to mention is the practical in-depth training at the Zurich University Hospital. The course consisted of

rapid-fire sessions, hands-on training, and ward rounds that taught us the clinical subtleties of HF care at the bedside of real patients. For each case, such as specific types of cardiomyopathies, the demonstration focused on practical tips and tricks including imaging, blood tests, and specific therapy choices. In fact, the fifth module was entirely dedicated to practical skills as it was held in the St Jude skills centre in Brussels, focusing on arrhythmias, CRT and ICD therapy in HF.

Finally, a major highlight of PCHF was the sense of unity provided by our focus on a common enemy. This sense of team spirit was invigorated by the often fatherly Frank Ruschitzka, who constantly stressed the need for HF doctors to be team players with phrases such as 'We as HF doctors are a team, we leave no one behind'.

For many of the attendees, the course has truly changed their lives, not merely by being the first official ESC trained HF doctors but also by building a network of colleagues in the spirit of the 'HF cardiologists of tomorrow'. Some have already put their new knowledge into practice by setting up their own HF clinics in remote areas of the world or founding the first National HF Societies in their countries.

Conclusions

In summary, PCHF is a truly unique educational initiative that will hopefully produce a swift response to the impending HF epidemic.



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Funding

The Postgraduate Course on Heart Failure was made possible by educational grants from St Jude Medical, Servier, Novartis, and Bayer Healthcare.

References

References are available as supplementary material at *European Heart Journal* online.