



32. kongres Europskoga kardiološkog društva u Stockholmu

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Ovogodišnji, 32. kongres Europskoga kardiološkog društva (ESC) održao se u Stockholmu u Švedskoj od 28. kolovoza do 1. rujna 2010., u gradu koji je utemeljen 1525. godine i izgrađen na četvrtnaest otoka, radi ljepote poznatom i pod nazivom "Sjeverna Venecija". U pet dana trajanja Kongresa održano je više od 250 blokova predavanja, kliničkih simpozija i seminara, a nakon recenzija prihvaćeno je za objavu 4.167 od ukupno prijavljenih 9.511 sažetaka. Kongresu je nazočilo 27.550 osoba (uključuje aktivne sudionike i predstavnike industrije). Jedna od zanimljivosti jest i ta da je zabilježen najveći porast prijavljenih sažetaka iz Azije, posebice Japana, što organizatori smatraju dokazom kako je godišnji ESC kongres uistinu svjetski događaj u kardiologiji.

Glavna tema ovogodišnjeg Kongresa bila je bolest koronarnih arterija (KBS) — od gena do ishoda, a odabrana je baš zbog toga što je KBS još uvijek prvi uzrok smrti u ekonomski razvijenom svijetu. Naglasak je bio na primjeni spoznaja iz bazičnih znanosti kako bi se ostvario klinički napredak, posebice u smislu ranog otkrivanja i boljeg liječenja KBS. U program Kongresa uvedeno je i nekoliko novosti: "Cardiologists of tomorrow" — program koji ima za cilj obrazovanjem podržati stalni napredak u kardiologiji i srodnim područjima; jedan dan bio je posvećen liječnicima obiteljske medicine te medicinskim sestrama prikazujući primjere iz stvarnog života uz stručni komentar i analizu. Prikazani su najbolji radovi i istraživanja objavljeni u *European Heart Journal* te su organizirane sjednice gdje su sudionici imali priliku osobno upoznati i razgovarati s članovima radnih skupina ESC. Čak je i sama svečanost otvaranja bila bitno drukčija nego prijašnjih godina — ovaj put bila je koncipirana kao multimedijski prikaz aktivnosti ESC tijekom prethodne godine, sve s idejom kako bi se članove dodatno motiviralo i uključilo u aktivnosti.

Na ovom Kongresu predstavljene su i četiri obnovljene smjernice. Potpuno su obnovljene Smjernice za liječenje kongenitalnih srčanih bolesti kod odraslih¹ (prethodne su iz 2003.) gdje su navedene najvažnije činjenice o ovim bolestima, uz preporuke za dijagnosticiranje, liječenje, i poseban naglasak na važne kirurške i intervencijske aspekte. Smjernice daju i važne praktične savjete, s preporukama za fizičku aktivnost, trudnoću, ali i zdravstveno osiguranje. Druge su zajedničke Smjernice za revaskularizaciju miokarda (usuglašene od strane ESC i Europskoga društva za kardiotorakalnu kirurgiju)² te je već u samom nazivu sugerirana važnost timskog pristupa prilikom odabira i liječenja ovih bolesnika. Ove Smjernice se razlikuju u broj-

32nd Congress of the European Society of Cardiology in Stockholm

This year, 32nd Congress of the European Society of Cardiology (ESC) was held in Stockholm in Sweden from 28th August till 1st September 2010, in the city that was founded in 1525 and built on 14 islands, that is owing to its beauty famous as "Northern Venice". In five days that the Congress lasted, more than 250 lecture blocks, clinical symposiums and seminars were held, while the reviews were followed by acceptance of some 4,167 abstracts for publication out of total number of reported 9,511 abstracts. Some 27,550 persons (including active participants and representatives of industries) attended the Congress. One of the interesting things is that the largest increase in reported abstracts from Asia was recorded, especially from Japan, which the organizers believe to be the proof that the ESC Congress this year was really a global event in cardiology.

The main theme at the Congress this year was the coronary artery disease (CAD) — from genes to the outcomes, and this theme was selected because CAD is still the first cause of death in economically developed world. The emphasis was placed on the use of knowledge from basic sciences as to achieve clinical progress, especially for early detection and better treatment of CAD. The program of the Congress includes several novelties: "Cardiologists of tomorrow" — the program that is aimed at supporting continuous progress in Cardiology and related fields through education; one day was dedicated to family medicine doctors and nurses showing examples from real life accompanied by expert comments and analysis. The best papers and researches published in the European Heart Journal were presented and meetings were organized where the participants could get to known each other well and talk to members of the working groups organized by ESC. Even the ceremonial opening was quite different than what it was during the previous years - this time it was designed as multimedia presentation of ESC activities during the previous year, all with the idea to additionally motivate the members and involve them in the activities.

Four updated guidelines were presented at this Congress. Completely renewed are the Guidelines for treatment of congenital heart diseases in adults¹ (the previous ones date from 2003) indicating the most important facts about such diseases with recommendations for diagnostics, treatment and a special emphasis is placed on important surgical and intervention aspects. The Guidelines also provide practical advices with recommendations for physical activity, pregnancy and health insurance as well. The other guidelines are the common Guidelines for myocardial revascularization (agreed on by ESC and European Society for Cardiothoracic Surgery)² and the name itself sug-



nim preporukama u odnosu na Smjernice za PCI koje je izdalo ESC. Navedene su preporuke za postavljanje dijagnoze i provođenje revaskularizacije, imajući na umu anatomiju i kliničku sliku, preporuke za primjenu lijekova (osobito antitrombotske terapije). Prikazana je preporuka za stratifikaciju rizika, na čemu se zasnivaju daljnje odluke kako bi se u konačnici osigurao najbolji rezultat za bolesnika. Navedene su važne razlike u pristupu stabilnoj i akutnoj bolesti, kao i podvrstama akutnog koronarnog sindroma. Jedan dio Smjernica posvećen je i važnim komorbiditetima — dijabetesu, kroničnom zatajenju bubrega, perifernoj arterijskoj bolesti, bolesti karotidnih arterija, bolestima srčanih zalistaka, zatajivanju srca i aritmijama. Na samom kraju Smjernica date su preporuke za organiziranje centra u kojem se radi primarna perkutana koronarna intervencija, ali i organizaciju podataka o bolesnicima. Autori navode kako će ovo izdanje Smjernica zasigurno nastaviti, ali i započeti brojne rasprave.

Treće Smjernice bave se preporukama za liječenje atrijske fibrilacije³ te predstavljaju potpuno obnovljene Smjernice ACC/AHA/ESC iz 2006. god., proizašle iz rezultata nedavno objavljenih velikih studija. Jedna od novosti jest klasifikacija atrijske fibrilacije u pet tipova, na osnovu njeone pojave i trajanja: prvi put dijagnosticirana, paroksizmalna (obično >48 h), perzistentna (zahtjeva kardioverziju), dugotrajna (>1 godine) i permanentna (prihvaćena trajna). Daljnje novosti uključuju preporuke za početno liječenje, preporuke za primjenu različitih ljestvica za procjenu ozbiljnosti simptoma, rizika od krvarenja i moždanog udara, preporuke za primjenu antiaritmika (koje uključuju i dronedaron). Na kraju, dio Smjernica posvećen je i ablacijskoj terapiji, kirurškoj i intervencijskoj.

Četvrte obnovljene Smjernice su one koje se odnose na bolesnike sa zatajivanjem srca⁴, a objavljene su u obliku fokusiranog "updatea" za primjenu kardijalne resinkronizacijske terapije i ostalih uređaja. Radna skupina se odlučila na ovakav potez ponajprije zbog nedavno objavljenih radova koji su označili novo razdoblje u liječenju ovih bolesnika, a koje je počelo objavom Smjernica za elektrostimulaciju i za liječenje zatajivanja srca. U ovom "updateu" naglasak je na liječenju bolesnika sa disfunkcijom lijeve klijetke sa slabo izraženim simptomima, atrijskom fibrilacijom i onih bolesnika kod kojih je već prisutno liječenje elektrostimulacijom. Dio Smjernica posvećen je i primjeni uređaja koji nadomeštaju funkciju lijeve klijetke.

Sudionici kongresa imali su priliku preuzeti tiskano izdanje Zbirnih smjernica (ESC Guidelines Compendium 2010), koje se inače može nabaviti i na portalu ESC po cijeni od 59,99 EUR.

Zanimljivo je napomenuti još jednu novost: zaklada European Heart for Children, grupa koja je u okviru ESC započela humanitarni projekt za bolje liječenje djece, u međuvremenu je postala zasebna i neovisna humanitarna inicijativa. Do sada su ostvarili četiri uspješne misije — dvije u Siriji, jednu u Maroku i jednu u Egiptu. Sveukupno je u te četiri misije pregledano više od 350 djece, što je rezultiralo sa 38 operacija i šest transfera u Italiju radi kompleksnog operacijskog zahvata. Uz to, tri uređaja za ultrazvuk srca poklonjena su Maroku, Kosovu i Egiptu od strane Siemensa Španjolska i Bolnice Basildon u Ujedinjenom Kraljevstvu. Prof. Roberto Ferrari, bivši predsjednik ESC i predsjedavatelj spomenute inicijative istakao je da je svj-

ests the importance of team's approach during selection and treatment of such patients. These guidelines differ in many recommendations compared to the Guidelines for PCI issued by ESC. The recommendations for making a diagnosis and conducting revascularization were mentioned bearing in mind the anatomy and clinical manifestations, recommendation for the use of medications (especially antiplatelet therapy). The recommendation for the risk stratification was shown, on which further decisions are based as to eventually ensure the best result for a patient. Some important differences in approach to stable and acute disease as well as subtypes of acute coronary syndrome were mentioned. One part of the Guidelines was dedicated to important comorbidities — diabetes, chronic renal failure, peripheral arterial disease, carotid artery disease, heart valve diseases, heart failure and arrhythmias. At the very end of the Guidelines, some recommendations were given for organizing the center that performs primary percutaneous coronary intervention and the organization of data on patients. The authors mention that this issue of Guidelines will certainly continue and start numerous discussions.

The Third Guidelines address the recommendations for the treatment of atrial fibrillation³ and they are completely renewed Guidelines ACC/AHA/ESC of 2006 arising from the results of recently published extensive studies. One of the novelties is the classification of atrial fibrillation in 5 types based on its occurrence and duration: diagnosed for the first time, paroxysmal (usually >48 h), persistent (requires cardioversion), long-term (>1 year) and permanent (permanent accepted). Further novelties include the recommendations for initial treatment, recommendations for the use of different scales for the assessment of seriousness of symptoms, risk of bleeding and stroke, recommendations for the use of antiarrhythmics (that include dronedarone as well). Finally, a part of the Guidelines is dedicated to the ablation therapy, surgical and intervention therapy.

The fourth renewed Guidelines are the ones that relate to patients with heart failure⁴, which are published in the form of focused "update" for the application of cardiac resynchronization therapy and other devices. The Working Group decided to do so first because of recently published papers that marked a new era in the treatment of such patients that started with the publication of Guidelines for electrostimulation and for the treatment of heart failure. In this "update" the emphasis is placed on the treatment of patients with dysfunction of the left ventricle with weak symptoms, atrial fibrillation and those patients who are already treated by electrostimulation. A part of the Guidelines is dedicated to the use of devices that replace the function of the left ventricle.

The Congress participants had a chance to take printed issue of the ESC Guidelines Compendium 2010 that may be obtained at the portal of ESC at the price of EUR 59.99.

There is one more novelty that is worth mentioning: the foundation European Heart for Children, the group that within ESC started the charity project for better treatment of children and in the meanwhile it has become a separate and independent charity initiative. They have accomplished four successful missions so far — the two in Syria, one in Morocco and one in Egypt. More than 350 children were examined in these four missions resulting in 38 surgeries and six transfers to Italy due to more complicated surgery. Besides, three heart ultrasound machines have



stan da liječenje nekoliko djece neće riješiti osnovni problem, ali da se u sljedećoj fazi planira obrazovati i uvježbati lokalno medicinsko osoblje kako bi učinci ove inicijative bili dugotrajni. Ovogodišnji Kongres imao je također ulogu doprinositelja ovoj inicijativi, jer je 29. kolovoza održana humanitarna večera u Stockholmskoj vijećnici.

Europska kuvarica (European Cook Book) predstavlja jedinstvenu kuvaricu s receptima za pripremu hrane zdrave i korisne za srce, a koja sadrži ukupno 44 jelovnika, po jednog od svakog nacionalnog kardiološkog društva člana ESC. Hrvatsko kardiološko društvo (HKD) svoj prilog Europskoj kuvarici dalo predloživi meni koji uključuje bučnicu, tuna pašticadu i drhtavi kolač. Osnovna poruka kojom se želi naglasiti i proširiti izdavanjem ove kuvarice jest da se samo zdravijom prehranom može napraviti veliki korak u prevenciji nastanka i progresije bolesti poput hipertenzije, dijabetesa i KBS. Naime, iako većina ljudi zna korisnost zdrave prehrane, vrlo ih je teško uvjeriti da usvoje zdravu prehranu, budući da većina (pogrešno!) smatra da zdrava prehrana podrazumijeva monotonu prehranu, ponajprije dosadnu za nepce. Prof. Ferrari je prilikom pripreme Europske kuvarice došao do zaključka kako ustvari ne postoji istinska europska kuhinja te da je ono što se danas smatra europskom kuhinjom ustvari spoj kuhinja grčke i rimske kulture u čijoj je osnovi vino, kruh i povrće i nordijske kuhinje u čijoj je osnovi meso, svinjska mast i pivo. Predstavljanje pregleda prehrabnenih navika u Evropi zaključio je sljedećom mišljiju: jednostavan sendvič napravljen od kruha, mesa, maslaca i povrća predstavlja vrlo dobru ilustraciju spoja ove dvije navedene kulture.

Predstavljeni su rezultati velikog broja kliničkih studija te ćemo ovdje navesti kratke opise i rezultate nekoliko najzanimljivijih. Kontroverza oko primjene inhibitora protonskog pumpa (IPP) i klopidiogrela se i dalje nastavlja, a opći konsenzus je da se ipak čini da rezultati ove interakcije nisu očigledni u svakodnevnoj kliničkoj praksi. Smatra se da prijašnja upozorenja o istovremenoj primjeni IPP i klopidiogrela, koja su izdale FDA i EMEA tijekom 2009. god. nisu opravdana kliničkim podacima te da većina neželjениh učinaka dolazi iz studija gdje su čimbenici koji nisu pod kontrolom istraživača i ispitnika "zamglili" ishode. No, i dalje se preporučuje istovremena primjena IPP u bolesnika koji su na terapiji klopidiogrelom ukoliko postoji visok rizik od gastrointestinalnog krvarenja.

Prikazano je i nekoliko studija koje su se bavile ulogom fizičke aktivnosti u nastanku, prevenciji i liječenju KBS (posebno je bila interesantna studija koja je pokazala da npr. populacija skijaša na skijanje uglavnom dolazi fizički nepripremljena pa se čak 56% infarkta miokarda dešava unutar prva dva dana skijanja), pretilosti u djece (i uloge roditelja u sprječavanju/liječenju), ulozi dijeta s ograničenim unosom kalorija, o novim spoznajama o paradoksima u epidemiologiji KBS u Evropi i ostatku svijeta, novim istraživanjima cjelokupnog ljudskog genoma u potrazi za genima odgovorima za KBS otkrivanjem jednostavnih kliničkih prediktora ishemijskih događaja, problemom doza prilikom CT-angiografije, ulogom željeza u kroničnom zatajivanju srca, povezanosti ekonomske krize s povećanjem broja kardioloških hitnih stanja, itd.

Prikazani su i rezultati meta-analize na 170.000 bolesnika iz ukupno 26 studija koja nije pokazala povišenu

been given to Morocco, Kosovo and Egypt as a gift by Siemens Spain and Basildon Hospital in the United Kingdom. Prof. Roberto Ferrari, a former ESC President and Chairman of the above mentioned initiative said that he was aware of the fact that the treatment of several children would not solve the fundamental problem, but that some plans were made in the next stage concerning education and training of local medical staff, so that the effects of this initiative become long-term effects. The Congress this year was also given a role of contributor to this initiative because on 29th August charity dinner was organized in the Stockholm City Hall.

European Cook Book is the unique cook book with recipes for the preparation of food healthy and useful for heart that contains a total of 44 menus, one of every national society of cardiology that is the member of ESC. The Croatian Cardiac Society (HKD) gave its contribution to the European Cook Book by suggesting the menu including pumpkin strudel, tuna pašticada and shaky cake. The basic message of this published Cook Book is to point out and disseminate information that a big step in prevention of occurrence and progression of the disease, such as hypertension, diabetes and CAD may be made only if people eat healthier food. Namely, although most of the people know about the benefits of healthy food, it is hard to convince them to eat healthy food, because most of them (erroneously!) think that healthy food includes monotonous food which is especially boring for the palate. During the preparation of the European Cook Book Prof. Ferrari reached a conclusion that there is no true European cuisine and that the cuisine that is today considered to be the European cuisine is actually a mixture of Greek and Roman culture that include the basic food such as wine, bread and vegetables and Nordic cuisine including the basic food such as meat, lard and beer. The presentation of the overview of nutritional habits in Europe was concluded by him with the following opinion: a simple sandwich made of bread, meat, butter and vegetables in an illustrative way shows a very good mixture of these two above named cultures.

The results of a great number of clinical studies were presented and here we shall mention some brief descriptions and results of the most interesting ones. The controversy regarding the application of proton pump inhibitors (PPI) and clopidogrel still continues and the general consensus is that the results of this interaction do not seem to be very obvious in daily clinical practice. The previous warnings about simultaneous application of PPI and clopidogrel issued by FDA and EMEA during 2009 are not considered justified by clinical data and most of the undesirable effects come from the studies where the factors not controlled by researchers and examinees made the outcomes seem less serious. However, still simultaneous use of PPI in patients undergoing clopidogrel therapy is recommended, but only in those patients who show a high risk of gastrointestinal bleeding.

Several studies addressing the role of physical activity in occurrence, prevention and treatment of CAD were presented (there is an especially interesting study that showed that for instance the population of skiers come for skiing mainly unprepared, so as much as 56% myocardial infarction occurs within the first two days of skiing), obesity in children (the parents' role in its prevention and treatment), the role of diets with limited input of calories, some new information on paradoxes in epidemiology of CAD in Eu-



učestalost pojave malignih bolesti povezana s primjenom statina.

Posebno su bili zapaženi rezultati SHIFT studije, koja je pokazala da ivabradin značajno smanjuje rizik od kardiovaskularne smrti i hospitalizacija kada se daje uz uobičajenu terapiju kod bolesnika sa kroničnim zatajivanjem srca i povišenom srčanom frekvencijom. Izneseni su i rezultati studija s ticagrelorom, eritropoetinom, enoksaparinom, nefrakcioniranim heparinom, novim peroralnim inhibitorima faktora Xa apiksabanom i rivaroksabanom i mnogih drugih lijekova.

Novi predsjednik ESC je prof. Michel Komajda (Francuska) za razdoblje od 2010. do 2012. god., a nakon njega predsjednik je prof. Panos E. Vardas (Grčka, sadašnji predsjednik EHRA).

Napomenimo i to da su u svojstvu Faculty-a ovog kongresa ESC sudjelovali u organizaciji i radu kao voditelji pojedinih sjednica kongresa predsjednik HKD prof. dr. sc. Davor Miličić, zatim potpredsjednik HKD prof. dr. sc. Mijo Bergovec i akademik Željko Reiner.

Članovi HKD ove godine su na radu Kongresa sudjelovali sa ukupno tri prihvaćena rada u obliku postera — po jedan iz Kliničkog bolničkog centra Rebro, Specijalne bolnice za medicinsku rehabilitaciju u Krapinskim Toplicama i Kliničkog bolničkog centra Split.

Također je vrijedno napomenuti da su za vrijeme kongresa hrvatski kardiolozi kao istraživači aktivno sudjelovali na više sastanaka istraživača i glavnih istraživača velikih svjetskih kliničkih studija iz područja kardiologije, a koje su upravo završene ili još uvijek u tijeku (npr. CURRENT-OASIS7, SEPIA, TRILOGY, ENGAGE-AF TIMI 48, ATLAS-2 ACS TIMI 51, SIGNIFY, itd.).

rope and the rest of the world, some new researches of the overall human genome in search for genes responsible for CAD by detecting simple clinical predictors of ischemic events, the problem of doses during the time of CT-angiography, the role of iron in chronic heart failure, connection of economic crisis with a rising number of cardiac emergencies, etc.

The results of meta-analysis on 170,000 patients from the total number of 26 studies were presented not showing an increased frequency of malignancy connected with the use of statins.

The results of the SHIFT study were especially noticeable that showed that ivabradine greatly reduces the risk of cardiovascular deaths and hospitalizations when administered with usual therapy to patients with chronic heart failure and increased heart frequency. The results of the studies with ticagrelor, erythropoietin, enoxaparin, unfractionated heparin, new oral inhibitors of the factor Xa apixaban and rivaroxaban and many other drugs were presented.

The new President of ESC for the period from 2010 till 2012 is Prof. Michel Komajda (France) and Prof. Panos E. Vardas (Greece, the current President of EHRA) will be future President.

We should also mention that Prof. Davor Miličić, PhD the Croatian Cardiac Society (CCS) President, Prof. Mijo Bergovec, PhD, CCS Vicepresident and academic Željko Reiner participated in the organization and work as leaders of specific Congress meetings representing the ESC Faculty Congress.

The CCS members participated in the work of the Congress this year with a total number of 3 accepted abstracts in the form of a poster — one from the Rebro Clinical Hospital Centre, Special Hospital for Medical Rehabilitation in the Krapinske Toplice and Split Clinical Hospital Centre. It



Tijekom kongresa HKD se, kao i unazad par prethodnih godina, predstavilo na izložbenom prostoru uz materijale o nadolazećim kardiološkim zbivanjima koje HKD organizira, *Kardio listom* i promotivnim turističkim materijalima. Na samom štandu prikazana je i kronologija Smjernica ESC prevedenih u razdoblju od 1999. do. 2010. god. od strane članova HKD⁵.

Na kraju, napominjemo kako je ovo samo pregled najvažnijih vijesti prema sudu autora, za sve novosti, ali i više detalja o ovima koje su navedene u ovom članku, čitatelje upućujemo na portal ESC (<http://www.escardio.org>) gdje se mogu naći opširnije informacije.

Sljedeći, 33. po redu kongres ESC održat će se u Parizu u Francuskoj, od 27. do 31. kolovoza 2011. god.

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is also worth mentioning that during the time of the Congress, Croatian cardiologists as investigators actively participated in several meetings of researchers and principal investigators in large international clinical trials in the area of cardiology, that have been just finished or are still underway (e.g. CURRENT-OASIS7, SEPIA, TRILOGY, ENGAGE-AF TIMI 48, ATLAS-2 ACS TIMI 51, SIGNIFY, ETC.).

During the Congress as in previous years, CCS presented itself in the exhibition area with materials about future events in cardiology organized by CCS, with Kardio list and promotional tourist materials. The chronology of the ESC Guidelines which were translated during the period from 1999 to 2010 by the CCS members was also presented at the stand⁵.

Finally, we wish to mention that this is only the review of the most important novelties to the author's opinion, we refer the readers to the ESC website (<http://www.escardio.org>) if they wish to find out about all novelties and more details about the novelties in this Article, where they can find more comprehensive information.

The next 33rd ESC Congress will be held in Paris, France from 27th till 31st August 2011.

THE CROATIAN CARDIAC SOCIETY AND THE WORKING GROUP OF INTERVENTIONAL CARDIOLOGY

First Announcement

DUBROVNIK, 1-3 APRIL, 2011, CROATIA

www.crointervent2011.org

4th National Meeting on Interventional Cardiology & Fellow Course in Interventional Cardiology with International Participation

CROATIAN CARDIAC SOCIETY