

## SASCI Annual Report 2014

After a busy year where SASCI's role as a representative body of interventional cardiologists has once again been extended, I have to start by thanking the hard working SASCI executive: **Dave Kettles** (Vice-President), **Sajidah Khan** (AfricaPCR, International Congresses, Education and Guidelines), **Cobus Badenhorst** (Treasurer), **Adie Horak** (Secretary and SASCI @ World Paed Cardio Congress 2013), **Graham Cassel** (ex-officio President: AfricaPCR and non-invasive coronary imaging), **Mpiko Ntsekhe** (Academic: Visiting Professors Program and AfricaPCR), **Chris Zambakides** (CTO working group), **Len Steingo** (SA Heart PPC: Coding and Funders), **Mark Abelson** (SA Heart PPC: Coding and Funders), **Jean Vorster** (SA Heart Congress 2014), **Gill Longano** (ISCAP), **Liezl Le Grange** (ISCAP). Allow the opportunity to mention a special thanks to **Craig Goodburn**, **Hans Buyl** and **Tracey du Preez** who are the outgoing Industry representatives. Their input and the value added to the society are highly appreciated.

The last year had many new developments and I am pleased to report on our activities.

The year started off with the 2<sup>nd</sup> **AfricaPCR** program that was held in Cape Town in February. The AfricaPCR Interactive Case Corner and a full day AfricaPCR program were embedded in the World Congress of Paediatric Cardiology and Cardiac Surgery 2013. The main AfricaPCR Program also included a "How should I Treat" session on Pericardial Disease and two "Learning" sessions on Balloon Mitral Valvuloplasty and TAVI. In support, two SASCI Breakfast Symposia were also hosted to bolster the adult coronary content. Adie Horak was the SASCI program convener with able assistance from Dave Kettles and Mark Abelson. These symposia were well attended and the subject matter led to enthusiastic audience participation.

SASCI is very proud to have partnered with Europa Organisation and PASCAR to establish the first standalone **AfricaPCR Course** (13 – 15 March 2014 at CTICC). The scientific program caters for both the high level interventionalist and those still building capacity. We believe that this is indeed a congress by the people and for the people of Africa.

It is difficult to explain the number of hours that went into the organisation of such a congress and I would like to extend my heartfelt appreciation toward the SASCI representatives on the AfricaPCR Board. They are: Tom Mabin (SA Heart Educational), Mpiko Ntsekhe (PASCAR), Sajidah Khan (Academia) and Gill Longano and Dianne Kerrigan (ISCAP). We will continue to develop the AfricaPCR course to ensure that it is indeed a congress for our continent. A second needs analysis is planned for the month following AfricaPCR with representation from all relevant stake holders.

SASCI supports the **SA Heart Congress** and will contribute to the scientific program for 2014. Jean Vorster (SASCI) has been tasked to assist Sajidah Khan (SA Heart Durban Branch) in developing a valuable interventional program. A high quality and full Allied Program (ISCAP) will also be offered which should ensure high attendance from our Allied group members. Please see ISCAP report for more details.

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#### Other activities include:

SASCI and Tom Mabin's **TAVI Appeal Hearing** took place on 15 March 2013 in Pretoria after the **Council for Medical Schemes** (CMS) initially ruled "in favour" of Medshield not funding TAVI based on the funders own rule exclusion. The ruling of the appeal committee was received in April and is in the patient's favour. The Medical Aid was directed to pay for the TAVI procedure in full and it is viewed that the Medical Aid cannot exclude therapy only based on their own rules (even if these are approved by CMS). The Medical Aid appealed and the CMS Appeal Board hearing took place on 26 July 2013. The Appeal Board ruling was finally received on 13<sup>th</sup> of November. The wait was worth the while as the Board instructed Medshield to fund the procedure up to the level of the average surgical procedure. This is not completely what we hoped for but still a major victory for clinicians and our ability to treat our patients based on best available evidence, guidelines AND clinical judgment. At the time of writing Medshield has only paid up to their internal prosthesis limit (we are however expecting an enhanced payment at the current global fee level). The next step has been to "enforce" this ruling and thus far Discovery Health as employed a decision that TAVI is reimbursed for all options (up to a global fee level).

A SASCI delegation consisting of Farrel Hellig, Len Steingo, Graham Cassel, David Jankelow and George Nel met with **Discovery Health**. The reimbursement methodology for procedures is under discussion. The SASCI Exco did advise Discovery Health to remove the current barriers (patient co-payment and motivations) to CT coronary angiography and to then assess utilisation. It is envisaged that new reimbursement models will be developed to better reflect the changing face of intervention so that lesion subsets such as bifurcation and CTO's, will have specific codes to reflect the complexity, training and time required for such procedures. Discovery plans to implement a global fee arrangement which we believe could change the reimbursement dynamics for the better in cardiology in South Africa. Please watch society notices carefully in the next few months.

The Executive Committee of SASCI has reviewed the data regarding the pericardial covered stent and supported the application for this product to be made available to local practitioners. A letter was issued by Dave Kettles on behalf of the SASCI Exco and has been send to Discovery Health. Approval was finally received in July 2014.

In January this year, SASCI submitted a guidance document to Medscheme regarding the use of Drug Eluting Balloons (DEB) in the Treatment of Coronary Artery Disease. These recommendations are based on current ESC guidelines and our interpretation of the current use of these balloons. Dr Lenny Steingo was the principal author of this document on behalf of the SASCI Executive committee. A copy of these and other guidelines can be found on the SASCI website ([www.sasci.org](http://www.sasci.org)).

**SAMA CPT Coding** - Mark Abelson and Len Steingo have undertaken the huge task of submitting new codes to SAMA last year. Due to their hard work and excellent preparation (and on the day representation by Len)

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most submissions were accepted. These are the first cardiovascular codes in many years to be included in the SAMA Doctor Billing Manual (2014).

- **Interpretation items 1286 and 1287** – SASCI requested that the code interpretation should be changed from “per vessel” to “per *lesion*” and this has been approved.
- **Renal Denervation (RDN)** – A *new dedicated code* will be added to the 2014 DBM. The description will indicate that the item is applicable for each renal artery.
- **Fractional Flow Reserve (FFR)** – *Two dedicated add-on codes* have been granted. These will be codes to be added, per vessel, to the primary procedure code. This will be charged equivalent to IVUS.
- **Transcatheter closure of the left atrial appendage (LLA)** – A *new dedicated code* will be added.
- **Trans-catheter Aortic Valve Implantation (TAVI)** – A *dedicated code* will be added. However, as there are few TAVI codes in the CPT® structure, further attention will be given to include a range of TAVI codes and not only one.
- **Vascular Closure Device** – A dedicated code was NOT granted as closure is seen as inherent part of the procedure.
- **Percutaneous coronary angioplasty using a drug eluting balloon (DEB)** – A dedicated code was NOT granted but the description of items 5058 – 5068 will be revised to include the use of a drug eluting balloon. This will be charged equivalent to a stent.
- **Z-codes** – Are problematic as some medical aids use this to justify non-payment. SASCI approached SAMA to understand the reasons for Z-codes and the process to be followed to get Z-codes removed. SAMA firstly confirmed that the Z coding should NOT be used to motivate non-payment as the code only indicates that a code is new within the coding structure. Utilisation data has been submitted to SAMA for codes **1272** (coronary sinus lead implantation) and **1274** (aspiration of thrombus from coronary artery or saphenous vein bypass graft) and we expect removal of the Z-code in 2014.

Coding remains a major challenge requiring extensive time even with inclusion in SAMA DBM individual funders (administrators) still need to decide to firstly include the code in their coding structure and then decide if funding is to be made available. SASCI is working to make claiming less cumbersome and less complex.

SASCI will engage the funders in 2014 to secure the use of these codes and possible funding for these new codes in 2014.

Mark Abelson has written a Summary and Motivation to medical aids for blanket reimbursement for FFR/IVUS. The Executive Committee of SASCI has reviewed the data on the appropriate use of Intra-Vascular Ultrasound (IVUS) and Fractional Flow Reserve (FFR) and strongly recommends that the cost pertaining to the use of these devices should be routinely covered by the medical aids. In October Medscheme sent a letter to SASCI confirming that they have reviewed the funding indications for IVUS and that Medscheme will fund IVUS when it is performed by a cardiologist.

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Chris Zambakides has drafted a response to funders to address the issue of “substantial” use of Section 21 Drug Eluting Stents in the market. This document should be available on the SASCI website soon after the AGM.

#### **Educational for members and fellows:**

**French-Reunion-South African** 2013 took place in April 2013 in Bordeaux, France. Tom Mabin once again represented SASCI on the organising committee and a high quality program with exceptional faculty has been assembled. This was the final FRSA meeting SASCI will officially be involved in.

During **EuroPCR** in May 2013 SASCI once again had high visibility with two joint “How should I treat?” sessions (with Croatia, Cyprus and Serbian Societies as well as Polish Society). In addition SASCI participated in a new learning program based on presentation of “complication cases” chaired by Graham Cassel. Live cases to the main PCR auditorium from Farrel Hellig’s unit at Sunninghill also took place. SASCI members have growing involvement in EuroPCR 2014 and this event should prove to be a must attend for SASCI members.

SASCI participated in a Joint Country Society Session during the **TCT 2013 Congress** held in San Francisco (27 October - 1 November). Graham Cassel, Dave Kettles and Chris Zambakides represented SASCI at the congress. The session was about “Multivessel Disease: Matching the Therapy to Doctor and Patient Preference (Presented by the South African Society of Cardiovascular Intervention, the Interventional Working Group of Cardiology Society of Serbia, the Working Group of Interventional Cardiology of The Croatian Cardiac Society, the Cyprus Society of Cardiology and The Working Group of the Hellenic Society). SASCI will again partner with international societies at TCT 2014. If you wish to submit a case, please contact George Nel ([sasci@sasci.co.za](mailto:sasci@sasci.co.za)) and Graham Cassel.

Individual members continue to share their experience with colleagues. “**A Radial Access Workshop**” was held at Steve Biko Academic Hospital in October 2013 with Adriaan Snyders as operator. Five cases using radial access was performed with success. Radial access is very topical and will also feature prominently in the AfricaPCR 2014 Program in Cape Town.

A dedicated **CTO portfolio** within the SASCI Exco has been created with the aim to create awareness and improve CTO procedure outcomes through education and training. CTO is a lengthy procedure which calls for patience and precision. If members are interested in learning these procedures they can contact Chris Zambakides and Farrel Hellig. Crossroads held a theoretical workshop in mid-2013 on CTO’s. A SASCI CTO workshop is considered for mid-2014 which will be planned and run through SASCI office. Prof Tony Gershlick (Visiting Professor 2014) is currently in the country and his evening educational lecture series on CTO has been well received by audiences from across the country.

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Dr Adie Horak was the convener of a full day **rotational atherectomy** workshop, which was held on 26 January 2014 in Sandton, Johannesburg. The meeting, which attracted huge interest, was attended by 43 cardiologists across the country as well as a delegate from Namibia and another from Kenya. The workshop was proudly sponsored by Boston Scientific.

South African Fellows once again had the opportunity to attend the annual **Society for Cardiac Angiography and Intervention (SCAI)** Fellows Program in Las Vegas (December 2013). The recipients were Alfonso Pecoraro, Zaid Moosa, Pumeshen Bisetty and Tawanda Butau. This program is made possible through generous support from SCAI and Boston Scientific. SASCI also facilitated the process to ensure that a Mauritian delegate also gets the opportunity to attend and we are working on expanding future SCAI invitations to other African countries. The 4 delegates who attended the congress will give feedback at our next Fellows workshop that will be held in June 2014.

**Visiting Professor Program 2014** - SASCI can confirm that Prof Tony Gershlick (University of Leicester, UK) is in South Africa since 15 February. He has completed his tenure in Bloemfontein, Johannesburg and is currently based in Cape Town. SASCI would like to thank Prof H Theron, Prof R Essop, Prof P Manga and Prof Mpiko Ntsekhe (who is the SASCI executive who is tasked with organising this program and who has the huge responsibility to ensure that the Visiting Professor is registered as a section 29 visitor with the HPCSA). This is important because not only is he teaching by giving lectures, but also by teaching hands on in the cath lab. After AfricaPCR he will spend some time at University of Stellenbosch with Prof Anton Doubell, where after he will travel to Pretoria. UP and Medunsa will run a joint program at Steve Biko (Profs Sarkin and Mntla). He will conclude his 2 months in South Africa with a one week stay in Durban where Prof DP Naidoo and Dr Sajidah Khan will host him. During his tenure, SASCI, in collaboration with the SA Heart Branches, hosts evening lecture meetings for our SA Heart, SASCI and ISCAP members. The meetings in Bloemfontein and Johannesburg were very successful and we are looking forward to the 3 lectures that he will give in Cape Town (25 March), Pretoria (2 April) and Durban (7 April). Contact the SASCI office ([sasci@sasci.co.za](mailto:sasci@sasci.co.za)) or go to [www.sasci.co.za](http://www.sasci.co.za) if you need more information or if you would like to attend.

Prof David Holmes (USA) has been earmarked as our next visiting professor in 2015. Medtronic is thanked for their longstanding and continued support of this program and thanks go to Pharma Dynamics who is sponsoring the 2014 Visiting Professor evening lecture series.

Sajidah Khan is the South African national coordinator for the new **ESC eLearning Platform**. This program will focus on web based Fellows training offering training in 6 sub-specialties with the first module being interventional cardiology. Planning for the introduction in 2014 (of this substantial training program) is well advanced and SASCI received guidance from the respective Heads of Medical Schools. Participants need to become members of the EAPCI association and a fee of EUR120 per calendar year applies. The duration of EAPCI Learning Programme is 3 years (in addition to theoretical training there is a very specific interventional

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case mix requirement for certification). SASCI hopes that the first South African trainee will join this program in the not too distant future.

**Aine Mugabi**, the 2012 recipient of the **RC Fraser International Fellowship** in Cardiovascular intervention award travelled to Dr Martyn Thomas' (Consultant Cardiologist & Clinical Director for Cardiovascular Services) unit at Guy's & St Thomas' Hospital in London for a period of one month in January 2014. His report back after the program was very positive and he apparently already made some changes at his own unit since returning from the UK. Our latest recipient, **Ahmed Ismail Vachiat**, a Physician and Fellow in Cardiology at Charlotte Maxeke Johannesburg Academic Hospital, will also travel to the UK later in 2014. He is planning to get GMC registration which will allow him to hands on participation during his program. This long standing and important award is annually sponsored by **Boston Scientific**. The name of the 2014 recipient will be announced at the annual SASCI Fellows Workshop (June) and nominations will be called for in the next month.

The **8th Annual SASCI Fellows Program** took place in April 2013 at Lagoon Beach with Dr Mark Abelson as Program Director and the faculty was: Jean Vorster, Dave Kettles, Tom Mabin, Chris Zambakides and Farrel Hellig. The meeting in its new interactive format was a resounding success and attended by a record number of 32 South African Fellows as well as a delegation of nine from Mauritius and two from Kenya. In total more than 70 delegates attended this truly African learning initiative and our biggest Fellows Program yet! We plan to continue to grow the African and Mauritius delegations and plan to expand on the interactive nature of the presentations. The **9th Annual SASCI Fellows Program** will take place 7 and 8 June 2014 in Johannesburg with Chris Zambakides as program convenor. All fellows/registrars and recently qualified cardiologists should contact the SASCI office if you would like to attend this workshop. Members are also requested to approach Chris Zambakides or George Nel if they want to be considered as faculty.

**Interventional Society Of Cathlab Allied Professionals (ISCAP)** - Our Associated Group continues its high activity levels and we request that full members continue to support them through lecturing and creating opportunities for your team to get involved at the national and branch level. ISCAP has 118 paid up members. The first Cath Lab training course was successfully completed in Johannesburg through the Netcare Training Academy. ISCAP is currently compiling content for a non-branded University accredited course in future. 86 Allied's are registered to attend **AfricaPCR 2014** and ISCAP is proud to be associated with this congress. ISCAP is planning a program with Dr A Snyders (SA Heart) on "Muscle for Life" in 2014.

2013 saw continued professional development training and - workshops held in the regions: Gauteng, Bloemfontein, Port Elizabeth, Durban and Cape Town. Workshops in Gauteng are already booked to 2015, together with more of the very popular Wet Lab hands-on training days. 2014 has seen three ISCAP Gauteng meetings already! ISCAP together with our industry supporters will take the CPD accredited meetings on 'tour' throughout the country in an effort to standardise education, protocols and practice across the labs in South Africa and in due course Africa. ISCAP has been asked to partner with some of Industry's own programs. This increases the number of training opportunities offered through all regions, and allows ISCAP to take the

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meetings national. This year, Gauteng ISCAP plans to reach out to Nelspruit, Vereeniging, and Rustenburg. It must be pointed out that the ISCAP training program has been made possible only because of the generosity of both the Industry and the presenters, and successful only because of the support given by the attendees.

ISCAP has realised another one the major launch objectives: Our 1<sup>st</sup> **Cardiac Catheterisation Manual** (Part 1 consisting of more than 300 pages) will be launched during the AfricaPCR Congress in Cape Town. The Manual is not for sale but available to paid up ISCAP members. SASCI Exco and Medical Schools will also receive a copy. The first print run of 500 Manuals was sponsored by **B Braun** and they will manage distribution as well.

AfricaPCR will be a great time for beginning the new venture: ISCAP wants to initiate relationships with Allied Professional Cath Lab staff throughout **Africa including Mauritius**. ISCAP plans to actively pursue membership from these countries. This will enable them to join the training programs and participate in our meetings, workshops and to receive newsletters.

I would like to thank Dianne Kerrigan and her team for all the hard work in getting the Manual published (in record time) and for Cobus Badenhorst for his extensive contribution as reviewer for the SASCI Exco.

To the SASCI executive and our industry partners, a BIG round of thanks for your support, your passion and your hard work throughout the year.

The following corporate supporters have demonstrated their commitment to our society and education in South Africa: Amayeza, Angio Quip, Aspen, AstraZeneca, Baroque, B Braun, Biotronik, Boston, Cipla, Cordis, Edwards, Medtronic, Paragmed, Pharma Dynamics, Sanofi, Scientific Group, Surgical Innovations, Terumo, Torque Medical, Viking and Volcano as well as Cardiac Output, Condor Medical and Disa Vascular. We are looking forward to working in collaboration with you in 2014.

Please contact SASCI's Executive Officer, George Nel on 083 458 5954 / [sasci@sasci.co.za](mailto:sasci@sasci.co.za) if you need any assistance or need to formally communicate with the executive.

Farrel Hellig

SASCI President

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