

MESSAGE FROM THE CHAIRMAN OF HCP CLINICAL MANAGEMENT COMMITTEE



As the Chairman of the CMC, I am delighted to be able to announce that the arrival of the latest in Cardiovascular Diagnostic Imaging equipment, the 3D Echo, is here.

Heart Care Partners took delivery of this equipment a few months ago

and became the only site in Qld equipped with this 3D imagery for Transoesophageal Echocardiography (TOE). This Echocardiography equipment provides us with reliable, dynamic real-time information for increased visibility during guided invasive procedures. This gives us much more information for the interventional cardiologist, increasing

confidence in the treatment and providing real time feedback in the procedure. Dr Greg Scalia was requested to demonstrate this new machine nationally due to his expertise in Echo imaging. Dr Scalia is pleased to provide the information in this newsletter as to why this imaging is a highly valued new field.

Dr Stephen Cox

REAL-TIME 3D TRANSOESOPHAGEAL ECHOCARDIOGRAPHY – EVOLUTION AND REVOLUTION

Heart Care Partners introduces Real-time Transoesophageal Echocardiography – a revolutionary new imaging modality which offers unique en face visualisation of intracardiac structures.

Visualisation of complex intracardiac structures has for many years been best accomplished with transoesophageal echocardiography (TOE). This endoscopic sedated procedure allows the heart to be imaged at very close range, as the oesophagus is directly posterior to the left atrium. Images are crisp and clear, with very high resolution. Unlike transthoracic echocardiography, the ultrasound beam does not suffer interference from ribs and lung.

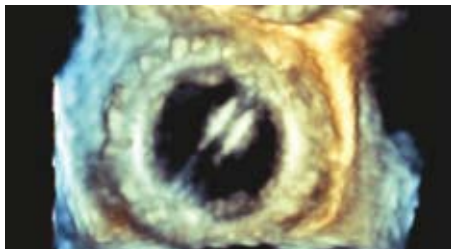


Fig 1. Left atrial view of St Jude mitral valve mechanical prosthesis in open position.

TOE is particularly suited to imaging structures posteriorly situated in the heart such as the mitral valve, inter-atrial septum and left atrium. TOE has long been the gold standard test for the investigation of endocarditis, mitral valve disease and detection of left atrial thrombus in patients with atrial fibrillation.

As with all standard ultrasound, TOE has traditionally been a tomographic modality, looking through the cardiac structures. Major improvements in transducer and computer processing have allowed the production of ultrasound probes which image a volume rather than a single slice.

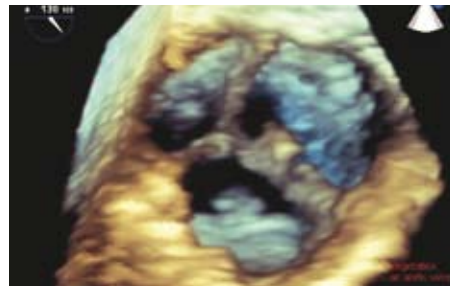


Fig 2. Aortic valve viewed from above with vegetation mass on left coronary cusp

This pyramid-shaped volume can then be cut and sliced and looked at from any angle. Rendering software allows for the first time, en face views of valves and other structures. Never before have anyone been able to see the mitral valve – in the beating heart. Surgeons can look at these structures in the arrested, depressurised heart, but not in the physiologic moving state.

Real-time Transoesophageal Echocardiography particularly lends itself to the assessment of the mitral valve prior to cardiac surgery. The preferred operation for mitral regurgitation is valve repair rather than replacement. Successful repair

Gregory M Scalia
Senior Cardiologist
Heart Care Partners

Associate Professor of Medicine -
University of Queensland



begins with accurate anatomic delineation of prolapsing segments and relative leaflet anatomy. Real-time Transoesophageal Echocardiography offers amazingly clear view of mitral prolapse and regurgitation and has quickly established itself as a valuable tool in this surgical process.

Percutaneous closure of atrial septal defects with the Amplatzer device has become the preferred treatment over surgery in most cases. Accurate sizing of the defect is critical to procedural success. Real-time Transoesophageal Echocardiography allows for the first time direct visualisation of the shape of the hole in the septum. With this technology, we are appreciating for the first time, the complex, irregular and sometimes oval-shape nature of these defects.

Real-time Transoesophageal Echocardiography offers new windows and insights in cardiac structure and anatomy. This amazing new technology has quickly established its role in the assessment and management of complex cardiac anatomical conditions and their percutaneous and surgical procedures.

HEART CARE PARTNERS - MEDICAL OBJECTS *By Operation Manager Aaron Davis*

Heart Care Partners have listened to the feedback from the majority of our referrers; this has been via the visits of Libby Woods and through feedback at venues such as our Heart Care Partners Annual Conference.

One thing that referring doctors have told us is that, where possible, you would like us to deliver our correspondence to you electronically. We are happy to advise you that Heart Care Partners is currently running a pilot of sending consultation letters electronically via the programme Medical Objects and sending test results electronically via fax.

The objective is to get correspondence and testing results from our hands to yours reliably, securely and as quickly as possible, and reduce the waiting time and administration required at your end.

We chose Medical Objects for sending consultation letters after undertaking a review of the medical electronic document exchange services in the market. Medical Objects has good uptake and provides good support to GPs in Queensland. Medical Objects also supports integration with all of the major GP practice software packages and where it is integrated, will automatically bring the correspondence in, present it on the screen to the doctor and file it in the patient's electronic medical record.

Unfortunately for test results where our communication includes tables and pictures there is not currently an end to end document exchange solution available that interfaces with the majority of GP practice software. For this reason we are piloting faxing test results to our referrers in order to get

them to you rapidly and securely. We are closely monitoring developments and when the document exchange systems are capable of an end to end solution we will trial this.

During the pilot phase of the above processes, we are pursuing feedback from referrers so that we can optimise the system before rolling it out to all referrers that we know are capable of receiving correspondence electronically. We welcome all feedback and also welcome expressions of interest to participate in the trial. Please feel free to send feedback and expressions of interest to me on the address below.

More information on Medical Objects, the electronic document exchange system that we are using can be found here: www.medical-objects.com.au

CARDIAC CONNECTIONS CONFERENCE

Heart Care Partners will be having their 3rd Annual Cardiac Connections Conference the weekend March 7th & 8th 2009. This is definitely an event not to miss if you have an interest in Cardiology.

This will be the third year that we have run our Cardiology dedicated weekend, and the response by way of attendances and the waiting list to get in, has been getting bigger each year. We will be sending invitations later in the year, so pencil the above dates into your diary now.

The Cardiology Connections conference will be run as an active learning module*. The weekend provides a great opportunity to be updated in the latest advances in cardiology patient care whilst providing a relaxed environment to meet with the Cardiologists from Heart Care Partners.

If you would like to register your interest please contact:
Rebecca Fielding from QCE.
Ph 3356 5804

**Subject to RACGP Approval*



PLAIN ECHOCARDIOGRAMS AND INCREASED CLINICS

Heart Care Partners have experienced an increasing demand for our Non Invasive diagnostic services, particularly over the last two years. In response to this demand, Heart Care Partners are pleased to announce additional session times for Plain Echocardiograms which have been resourced and allocated at Greenslopes, Mt Ommaney and Clayfield sites.

This is a considerable commitment to the above clinics both by way of extra technical staff and via technical resources.

Heart Care Partners are further pleased to advise that this commitment will allow all clinics to offer these services Monday to Friday.

For those patients in the Brisbane area it will allow easy access to a site near them.

For Bookings call:

Greenslopes Ph 3394 3100
Mt Ommaney Ph 3279 4111
and Clayfield Ph 3262 7477