



Elections to EACVI Board 2022-2024

Application for the position: *(Select one position)*

- EACVI President-Elect
- EACVI Treasurer
- EACVI Secretary
- EACVI Councillor (Echocardiography)
- EACVI Councillor (Cardiovascular Magnetic Resonance)
- EACVI Councillor (Nuclear Cardiology & Cardiac CT)
- EACVI Vice-President-Elect (Echocardiography)
- EACVI Vice-President-Elect (Cardiovascular Magnetic Resonance)
- EACVI Vice-President-Elect (Nuclear Cardiology & Cardiac CT)

1. Your Identity	
Title	Dr
Family Name(s)	Baritussio
First Name(s)	Anna
City	Padova
Country	Italy



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2. General Curriculum Vitae (300 words max)

I graduated in Medicine in 2009 at the University of Padua (Italy), where I also completed training in Cardiology, in 2015, and PhD training programme, in 2017.

I worked for three years in the United Kingdom, as a clinical-research fellow at the Cardiac MRI Department of the Bristol Heart Institute, and as a Research Associate of the School of Clinical Sciences of the University of Bristol (UK). After thorough training in CMR, I gained interest in non-ischemic cardiomyopathies.

I was awarded Level 3 certification in CMR by both the European Association of Cardiovascular Imaging and the Society for Cardiovascular Magnetic Resonance.

I soon had the chance to be more actively involved within national and international scientific societies. Since 2019 I am Nucleus member and Secretary of the CMR Working Group of the Italian Society of Cardiology. I have been member of the EACVI Membership Committee and I am still member of the Certification and Accreditation Committee (CMR sub-committee) and Heart Imagers of Tomorrow Committee. This has allowed me to understand how the EACVI community works and be familiar with its main objectives, and this has been, and yet is, an extremely instructive and fruitful experience.

Currently, I am a Consultant Cardiologist and Adjunct Professor at the University Hospital of Padua (Italy). My main interests are multi-modality imaging and inflammatory and auto-immune myocardial and pericardial diseases. My current clinical duties include the supervision and reporting of CMR exams and the performance, supervision and reporting of echocardiographic exams (including stress echocardiography and trans-oesophageal echocardiography). I am also one of the staff members of the multi-disciplinary Cardio-Immunology outpatient clinic that takes care of about 1000 patients with clinically suspected or biopsy-proven myocarditis. Currently my research mainly focuses on the identification of clinical, laboratory and imaging predictors of dismal prognosis in myocarditis.



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3. Previous experience(s) in the EACVI or ESC or your National Bodies?

- Member of the EACVI Membership committee (2016-2018)
- Member of the Heart Imagers of Tomorrow (HIT) Committee (2020-2022)
- Member of the Certification and Accreditation Committee, CMR sub-committee, Grader for EACVI CMR certification (2020-2022)
- Member of the Certification and Accreditation Committee, Laboratory Accreditation sub-committee (2020-2022)

4. Are you a Board or Nucleus Member of another scientific organisation?

Yes No

If Yes, please
specify:

I am Nucleus Member and Secretary of the working group “Applications of Cardiovascular Magnetic Resonance” of the Italian Society of Cardiology (January 2019 – on-going).

5. Selected publications (please list 10 max)

1. **Baritussio A**, Muthurangu V. Cardiovascular magnetic resonance for the assessment of left ventricular filling pressure in heart failure. *Eur Heart J* 2022; 43: 2523-25



2. Merlo M, Gagno G, **Baritussio A**, Bauce B, Biagini E, Canepa M, Cipriani A, Castelletti S, Dellegrottaglie S, Guaricci AI, Imazio M, Limongelli G, Musumeci MB, Parisi V, Pica S, Pontone G, Todiere G, Torlasco C, Basso C, Sinagra G, Filardi PP, Indolfi C, Autore C, Barison A. Clinical application of CMR in cardiomyopathies: evolving concepts and techniques : A position paper of myocardial and pericardial diseases and cardiac magnetic resonance working groups of Italian society of cardiology. *Heart Fail Rev.* 2022 May 10. doi: 10.1007/s10741-022-10235-9
3. **Baritussio A**, Schiavo A, Basso C, Giordani AS, Cheng CY, Pontara E, Cattini MG, Bison E, Gallo N, De Gaspari M, Carturan E, Thiene G, Tarantini G, Plebani M, Rizzo S, Gregori D, Iliceto S, Marcolongo R, Caforio ALP. Predictors of relapse, death or heart transplantation in myocarditis before the introduction of immunosuppression: negative prognostic impact of female gender, fulminant onset, lower ejection fraction and serum autoantibodies. *Eur J Heart Fail.* 2022; 24, 1033–1044
4. Rafael Blanco-Domínguez , Raquel Sánchez-Díaz, Hortensia de la Fuente, Luis J Jiménez-Borreguero, Adela Matesanz-Marín, Marta Relaño, Rosa Jiménez-Alejandre, Beatriz Linillos-Pradillo, Katerina Tsilingiri, María L Martín-Mariscal, Laura Alonso-Herranz, Guillermo Moreno, Roberto Martín-Asenjo, Marcos M García-Guimaraes, Katelyn A Bruno, Esteban Dauden, Isidoro González-Álvaro, Luisa M Villar-Guimerans, Amaia Martínez-León, Ane M Salvador-Garicano, Sam A Michelhaugh, Nasrien E Ibrahim, James L Januzzi, Jan Kottwitz, Sabino Iliceto, Mario Plebani, Cristina Basso, **Anna Baritussio**, Mara Seguso, Renzo Marcolongo, Mercedes Ricote, DeLisa Fairweather, Héctor Bueno, Leticia Fernández-Friera, Fernando Alfonso, Alida L P Caforio, Domingo A Pascual-Figal, Bettina Heidecker, Thomas F Lüscher, Saumya Das, Valentín Fuster, Borja Ibáñez, Francisco Sánchez-Madrid, Pilar Martín. A Novel Circulating MicroRNA for the Detection of Acute Myocarditis. *N Engl J Med* 2021; 384(21):2014–2027.
5. **Baritussio A**, Biglino G, Scatteia A, De Garate E, Dastidar AG, Palazzuoli A, Harries I, Strange JW, Diab I, Bucciarelli-Ducci C. Long-term outcome of myocardial scarring and deformation with cardiovascular magnetic resonance in out of hospital cardiac arrest survivors. *European Heart Journal --- Cardiovascular Imaging* 2021; 22: 1149–1156. doi:10.1093/ehjci/jeaa293
6. Dastidar AG, **Baritussio A**, De Garate E, Drobni Z, Biglino G, Singhal P, Milano EG, Angelini GD, Dorman S, Strange J, Johnson T, Bucciarelli-Ducci C. Prognostic Role of Cardiac MRI and Conventional Risk Factors in Myocardial Infarction With Nonobstructed Coronary Arteries. *J Am Coll Cardiol Img* 2019;12:1973–82
7. Zorzi A, Susana A, De Lazzari M, Migliore F, Vescovo G, Scarpa D, **Baritussio A**, Tarantini G, Cacciavillani L, Giorgi B, Basso C, Iliceto S, Bucciarelli Ducci C, Corrado D, Perazzolo Marra M. Diagnostic value and prognostic implications of early cardiac magnetic resonance in survivors of out-of-hospital cardiac arrest. *Heart Rhythm* 2018; 15: 1031-41
8. Dastidar AG, Rodrigues JCL, Johnson TW, De Garate E, Singhal P, **Baritussio A**, Scatteia A, Strange JW, Nightingale AK, Angelini GD, Baumbach A, Delgado V, Bucciarelli-Ducci C. Myocardial infarction with non obstructed coronary arteries. Impact of CMR early after presentation. *J Am Coll Cardiol Img* 2017; 10: 1204-1206



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9. Scatteia A, **Baritussio A**, Bucciarelli-Ducci C. Strain imaging using cardiac magnetic resonance. *Heart Fail Rev* 2017; 22:465–476

10. **Baritussio A**, Zorzi A, Dastidar AG, Susana A, Mattesi G, Rodrigues JCL, Biglino G, Scatteia A, De Garate E, Strange JW, Cacciavillani L, Iliceto S, Nisbet A, Angelini GD, Corrado D, Perazzolo Marra M, Bucciarelli-Ducci C. Out of hospital cardiac arrest survivors with inconclusive coronary angiogram: impact of cardiovascular magnetic resonance on clinical management and decision-making. *Resuscitation* 2017; 116: 91–97

6. Publication metrics

ORCID ID: 0000-0002-6900-6705

Google scholar profile link:

<https://scholar.google.com/citations?user=gLsy3U4AAAAJ&hl=en>

Google scholar h-index: 14

7. Total number of peer reviewed publications / textbooks and chapters

Total number of peer-reviewed publications: 72, total number of book chapters: 8.

8. Why are you interested in joining the EACVI Board (300 words max)?



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Until now I have dedicated most of my working experience to Cardiovascular Magnetic Resonance, which is my greatest passion, and everyday I feel privileged to be able to share my enthusiasm and expertise with trainees. I truly believe that multi-modality imaging should be the standard of care to approach the patient and the disease, and should be encouraged and promoted.

I had the chance to understand how the EACVI community works and what the mission of the Association is, I would like to be more actively involved and I am confident that my previous and current experience within the Association would help me contribute to its activities.

I would be interested in joining the EACVI Board to contribute promoting training and education, maybe also by boosting the “new” learning tools that the recent pandemics has inevitably promoted.

