

Dear Colleagues,

We are delighted to announce that we made a dynamic start of the year with the scientific statement for role of cardiovascular multimodality imaging in women in January ./ For link see below/. I would like to thank all the contributors for their great effort and amazing work and it is a big privilege to invite Prof. Ana G Almeida, one of the main authors of this paper, to give the first interview for this year!

The second interview with Dr. Sara Moscatelli in this newsletter was prepared by a young colleague, Dr. Niya Mileva .

We want to encourage you to get involved and take this opportunity to highlight the work of women in our imaging community as well.

Those interviews and many proposed materials you will find here !

It's time to start organizing our plans for future scientific and professional development. Don't forget the opportunities that EACVI offers for your professional development, as well as the special award of the EACVI Women TF for women in imaging.

Last but not least - now is the time to prepare your scientific abstracts for our next EACVI meeting and meet again in Berlin from 11 to 13th December 2024!

## Highlight of the month

### Interview – Women Leaders in Cardiovascular Imaging by Assoc. Prof. Krasimira Hristova



**Professor Ana G. Almeida, MD, PhD, FESC, FACC, FSCMR, FEACVI**

Professor of Cardiology, Associated with Aggregation, Member of CCUL, Faculty of Medicine of Lisbon University, Chair of Cardiac MR Bioimaging Dpt, Faculty of Medicine of Lisbon University, Consultant Senior Cardiologist, Hospital Santa Maria/CHULN Deputy Chair of Medical Education Department, Faculty of Medicine of Lisbon University EACVI Co-chair of TF Women CVI, Co-chair of SIGs WG, Certification Board Member and IRT Board member Board member of the Outcomes Standards Committee, European Society of Cardiology

- **Could you tell us more about your professional journey?**

I am a cardiologist and professor of cardiology at the Faculty of Medicine of Lisbon and the Santa Maria Hospital. My medical career after the university was followed by the choice of Cardiology as my first option. Cardiology was appealing for the opportunity of practicing both clinical assistance and techniques and also for the potential for research and teaching. Since the beginning I was attracted by the imaging techniques and their potential. I could learn the skills of echocardiography since my residency. I had later the opportunity of learning and

practicing CMR since the 90s, a modality that I pioneered in Portugal as cardiologist. I was awarded a PhD in 2001 with a thesis based on CMR. From 2010, I have also been practicing cardiac CT, which is also a technique with great potential. I have been using these techniques in a MMI approach not only clinically but also in research and academic activities, with many courses and PhD supervising activities. I have been involved as EACVI Board councillor since 2018, and as well, from 2004, as a member of EACVI CMR nucleus, committees and task forces.

- **You are part of the EACVI Women TF in CVI and you have done a wonderful job - could you describe how a woman can join you?**

Thank you very much for your words. I'm very grateful for being invited by Prof. Bernard Cosyns to be the co-Chair of the Task Force together with Julia Grapsa as Chair. It was an opportunity to bring to light the not only the differences of women from men regarding the CV diseases but also the differences of CV MMI findings and consequent approaches considering the sex. Our TF has been developing and plan many initiatives. Besides the current TF board, we are open to receive new ideas and suggestions regarding not only research and education's initiatives but also the ones on advocacy in order to ensure increased equity on opportunities between sexes. We are happy to receive new community members. In our TF "micro-website", within the EACVI site, we link to the CVI Task Force on LinkedIn, where we have 170 members, and accept registration as community members for receiving the newsletter and all news, and be a part of the initiatives.

- **What are your key notes to women to be inspired by imaging?**

I would say that the potential of imaging in Cardiology is huge for our practice, and that women should be ambitious and courageous, not only for practicing with the best of expertise but also on accepting leadership roles. Imaging is within all the Cardiology practice areas and is most appealing since it is growing fast both in technology and applications.

- **How do you spend your free / personal time? What is your hobby?**

This is a nice question. I would say, my main hobby is music. I play piano since childhood with almost a complete graduation. I play often, listen to music all free time and try to attend concerts as much as possible. Also, reading, is also present in my life, namely on history, philosophy and arts in general. I also enjoy travelling and exploring.

- **Have you encountered a challenging time at work where you felt that as a woman you have been harassed or bullied?**

I feel that regarding the progression in career, women, namely when considering leadership roles, are frequently proposed as second choices when subjective criteria are applied, while often men with similar qualifications are the primary ones to be chosen. During women's professional lives, we know that different experiences may occur including harassment and bullying, which will have impact in their performance and career.

- **What is your favourite research topic?**

I would say the impact of imaging on ischemic heart disease/microvascular disease, non-ischemic cardiomyopathy and arrhythmia.

- **What is the most important advice to a woman who wants to do cardiology in 2024?**

My advice is that if Cardiology is her main interest, she should not fear to follow any path, non-invasive or invasive or accept pressures. The medical career is long and even interruptions like maternity should not have impact in its progression as long as she is motivated.

- **What was the last book you read?**  
Clara Schumann – The artist and the woman, from Nancy B Reich.
- **What was the last movie you watched?**  
Oppenheimer, from Christopher Nolan.
- **How important it is to have a mentor?**  
Mentorship is very important during the training phase of the medical profession. A mentor may help the mentee to identify the best directions in the career as well as the options of fellowships and training, He/she may also help solving doubts, obstacles and issues of relationship in the team, including harassment and lobbying.

### Interview – Women Leaders in Cardiovascular Imaging by Dr. Nija Mileva



**Dr Sara Moscatelli**

Doctor Sara Moscatelli is a young Italian cardiologist currently working in paediatric cardiology and part of a PhD program in London, UK. She is an EACVI HIT Ambassador, part of the Italian Cardiologist of Tomorrow group, and EACVI Web and Comms Committee Member. She speaks about the obstacles she overcame along her journey as a young woman in medicine, the balance she finds between research and clinical work, and the motivation to get through the difficulties along the pathway.

- **Dear Dr Moscatelli, we are very pleased to have the opportunity to talk to you. Tell us more about yourself and your background.**  
Well, when I hear this question, I always hesitate if I should answer in a rather professional way or if I should let the people know more personal stuff. In a very professional pathway, I am an Italian cardiologist. I have studied medicine and cardiology in Italy. However, in my last year of residency, I went for a fellowship in London. In the end, I stayed in London, and I had the opportunity to find a few mentors, but in particular, Professor Kaski with whom I am doing a Ph.D. on cardiomyopathies in paediatric patients.  
During the process, I have been to a lot of different places because also in Italy, I moved from my hometown. I went to Milan and then from Milan, I went to Genoa. I am sharing this because I believe it is a very important experience, not only in a professional way but also a life experience. All those cities, different centres, and diverse personalities taught me something. On the other hand, it becomes more difficult to define where your home is. Whenever anybody asks me where my home is, that's a very difficult question because my family is in Bologna, but my real life is in London. So, I believe traveling, studying, and working abroad is priceless in terms of expanding your network and gaining experience. However, it may be very challenging from a personal point of view.
- **You specialised in the field of Paediatric Cardiology. How did you choose this specialty?**  
To be honest, I have never thought that I would work with kids. In medical school, I had some rotations in paediatric cardiology, but when I was there, I thought: “No, that is not quite for me”. I would say that for most of the time of my cardiology residency, I wanted to be a

cardiologist working with cardiac MRI, and one of my big heroes was Doctor Chiara Bucciarelli-Ducci. However, what happened was that my journey through the residency has not been very easy, I encountered a lot of barriers, and I was exposed to bullying, episodes of mobbing, and sexual harassment. I am sure you can imagine that this period was very hard for me, and after three years of intense behaviour, I reached the point where it was impossible to tolerate. I was very concerned that people might think that I was weak, that I was not strong enough to be a cardiologist and to stay in the field. However, things escalated to the point where I knew this could not go on anymore, so what happened in the end was that I moved to a paediatric cardiology department in another hospital.

- **What do you believe are the biggest upsides and the greatest challenges when it comes to working with children?**

To be honest, this change brought a bit of relief, however, it was also accompanied by a lot of disappointment, because this was not my original plan. Anyway, this was the perfect example, that you never know what the future can bring and the beauty of this unexpected change of direction. I remember the very first time when I saw an echo of a univentricular heart, for me it was like a miracle. I've never seen something like that. I needed to get more information, study more and, and that is where everything and I thought: "Okay, that probably was not my original pathway, but I came here and it is so interesting, so beautiful that I have to stay". It was not only exciting for the scientific part, but it was also beautiful because of the relationship with the patients. You are not only treating the kid – your patient, but you are also working with the whole family and at some point, you are feeling them as part of the team. What's more, I felt that if I do this job, I'm going to make a change in the life of someone who hopefully has a whole lifetime in front, which is rarely the case for adult cardiologists. So, what I'm doing now is something that is life-changing and can make a substantial change for the whole life ahead of the patient.

- **Was that moment of transition when you started the Pink Lady group?**

Well, when I encountered all the difficulties during my residency, I was sure that I was not the only one with a similar experience. I started to touch base, and the more I was talking about women's discrimination, the more people were engaging and that is when the Pink Ladies came out. We started online meetings every couple of months with around 30-40 people. We were talking about project articles, we published a few interesting things, and we were working without any financial support. I remember that for one of the articles that was published, there was a fee to be paid, so we just divided the amount among us. More importantly, we discussed various problems and were trying to raise awareness and focus more attention on women's discrimination in the field.

- **Speaking about social media initiatives, recently the new podcast of the EACVI has been launched. Could you enlighten us on the main aspects of this project?**

Yes, we have relaunched the EACVI Cardio Talk, where we discuss topics about the latest research studies and educational content in cardiovascular imaging. Also, we present the point of view of some experts in the field of cardiovascular imaging, and for me, this is the most interesting part of the podcast. I think it's important for young people to hear the experiences of key opinion leaders in the field, to learn about their pathway, and to recognize themselves in that story. I find this part of the podcast especially motivating.

- **What will be your advice to physicians at the beginning of their professional pathway?**

My belief was always to follow my passion, to pursue the thing that was making my heart speed faster. I think that if you choose the pathway that you like, even if it's difficult, then you can find the strength to overcome all difficulties. There will always be things that are not working out, and these are all occasions to know yourself better. I remember feeling demotivated from a lot of new projects that I had started and didn't succeed. But the mistakes that I made in my past taught me a lot for the next things that have worked out tremendously well for my career. So, my advice is to try to understand what you are passionate about and give it a go. Don't be scared if it's hard, and don't be scared if you fail because from the failure you can learn a lot. Failure is the best teaching life experience that you can have.

## Education and career development

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### Grants

- 1. EACVI Research Grants**  
The best way to boost your career!  
**Application period is 31 March to 30 September.**  
More information available at: [EACVI Research Grants](#)
- 2. EACVI Training Grants**  
The best opportunity for specialised training in the field of non-invasive cardiovascular imaging!  
**Application period is 31 March to 30 September.**  
More information available at: [EACVI Training Grants](#)

### Upcoming organised meetings and congresses

- 1. [ESC Congress 2024](#)**  
30-31 August 01-02 September 2024, London - UK
- 2. [Euro-Echo Imaging](#)**  
11-13 December 2024, Berlin, Germany

### Upcoming EACVI courses & educational programmes

- 1. EACVI HIT Summer School**  
This EACVI HIT Summer School will be focusing on the Lifetime Management of Patients with Heart Valves and Cardiac Devices. It will take place on 29-30 June in Dubrovnik, Croatia. Seats are limited, register now!  
<https://esc365.escardio.org/event/1595>
- 2. EACVI CMR CHD Course**  
The EACVI Teaching Course on CMR in Congenital and Paediatric Heart Disease will take place from 04-06 September in London, UK.  
This course is designed for Clinical Cardiologists, Paediatric Cardiologists, Adult Congenital Heart Disease specialists and Radiologists, interested in CMR CHD. It will also be useful to

prepare for the EACVI CMR CHD certification exam. Interactive lectures, video teaching, scanner optimization and practical hands-on using dedicated workstations performed directly by attendees. 15-20 cases will be studied that can be included in candidates' EACVI certification logbooks (in CMR and CMR CHD). Register now. Seats are limited.  
<https://esc365.escardio.org/event/1381>

### 3. EACVI Cardiac CT Course

The EACVI Cardiac Computed Tomography Course will take place from 12-14 September in Milan, Italy. It is designed for trainees and consultants, either cardiologists or radiologists, interested in learning practical skills in CCT. A mix of interactive lectures, mock exam questions followed by interactive review with the faculty, as well as heavily hands-on practical with image analysis sessions on dedicated workstations performed directly by attendees. A number of clinical cases will be reviewed and certified to be used in candidates' logbooks for EACVI certification in CCT. Save the date and stay tuned, registration will open soon.

<https://esc365.escardio.org/event/1593>

### 4. EACVI CMR Course

Registration is now open for the EACVI Preparatory Course to Certification in CMR that will take place from 19-21 September at the European Hear House in Sophia Antipolis, France. A mix of interactive lectures and hands-on practical lessons with simulation scanning and image analysis sessions in which attendees will perform on dedicated workstations. It also includes a review of clinical cases that can contribute to the logbook of cases to submit for the EACVI CMR certification. Register now!

<https://esc365.escardio.org/event/1585>

## **Upcoming certification exams 2024**

Registration opens 3 months before and closes 15 days before exam date

### Summer session

27 June 2024 [EACVI \(TTE\) Online Certification Exam - Transthoracic Echocardiography](#)

28 June 2024 [EACVI/EACTAIC \(TOE\) Online Certification Exam - Transesophageal Echocardiography](#)

### Winter session

18 October 2024 [EACVI Online Certification Exam - Cardiac Computed Tomography \(CCT\)](#)

22 October 2024 [EACVI/AEPC Online Certification Exam - Congenital Heart Disease Echocardiography \(Echo CHD\)](#)

25 October 2024 [EACVI Online Certification Exam - Cardiovascular Magnetic Resonance CHD \(CMR-CHD\)](#)

03 November 2024 [EACVI/EANM Online Certification Exam - Nuclear Cardiology \(NC\)](#)

26 November 2024 [EACVI Online Certification Exam - Cardiovascular Magnetic Resonance \(CMR\)](#)

28 November 2024 [EACVI \(TTE\) Online Certification Exam - Transthoracic Echocardiography](#)

29 November 2024 [EACVI/EACTAIC \(TOE\) Online Certification Exam - Transoesophageal Echocardiography](#)

- 1) **Cardiovascular multimodality imaging in women: a scientific statement of the European Association of Cardiovascular Imaging of the European Society of Cardiology.**  
<https://doi.org/10.1093/ehjci/jeae013>
- 2) **Women in Cardiovascular Imaging: A Call for Action to Address Ongoing Challenges**  
<https://doi.org/10.1093/ehjci/jead158>
- 3) **Understudied, Under-Recognized, Underdiagnosed, and Undertreated: Sex-Based Disparities in Cardiovascular Medicine (Circulation: Cardiovascular Interventions)**  
<https://www.ahajournals.org/doi/10.1161/CIRCINTERVENTIONS.121.011714>
- 4) **Normative values of the aortic valve area and Doppler measurements using two-dimensional transthoracic echocardiography: results from the Multicentre World Alliance of Societies of Echocardiography Study**  
<https://academic.oup.com/ehjcmaging/article/24/4/415/6798870>
- 5) **Sex- and age-specific normal values for automated quantitative pixel-wise myocardial perfusion cardiovascular magnetic resonance**  
<https://academic.oup.com/ehjcmaging/article/24/4/426/6862891>
- 6) **Multimodality imaging in thoracic aortic diseases: a clinical consensus statement from the European Association of Cardiovascular Imaging and the European Society of Cardiology working group on aorta and peripheral vascular diseases**  
<https://academic.oup.com/ehjcmaging/advancearticle/doi/10.1093/ehjci/jead024/7070979>
- 7) **Coronary Arterial Function and Disease in Women With No Obstructive Coronary Arteries (Circulation Research)**  
<https://www.ahajournals.org/doi/10.1161/CIRCRESAHA.121.319892>
- 8) **Sex Differences and Similarities in Valvular Heart Disease (Circulation Research):**  
<https://www.ahajournals.org/doi/10.1161/CIRCRESAHA.121.319914>
- 9) **Sex and age-specific interactions of coronary atherosclerotic plaque onset and prognosis from coronary computed tomography**  
<https://doi.org/10.1093/ehjci/jead094>

Be part of our professional community!  
[EACVI Task Force - Women in Cardiovascular Imaging](#)

*This newsletter has been prepared by the "Newsletter" sub-group of EACVI Women task force, led by Assoc. Prof. Krasimira Hristova.*