

Answers to the 5 questions of the Nominating Committee

Helmut Pürerfellner, January 2022

1. What is your vision on the financial and human resources of EHRA within ESC?

To begin with, EHRA is proud and happy to be part of the ESC family. This also means a lot of practical advantages. However, this should not be at the cost of not having dynamic Associations, ready to adapt to fast changes and to adopt new initiatives.

Regarding financial resources EHRA is one of the strongest Associations creating considerable income I will strive for a budget allocated to EHRA from ESC Central where we can identify areas for investment and development on our own that should result in mid-long term improvements of our Association.

EHRA currently has a dedicated staff of 3 persons. My goal is to both enhance stability with a team that stays together over an extended period and introduce more flexibility by increasing the staff when it comes to situations with a higher demand on human forces (e.g. Annual Congress).

2. Do you think that an EHRA-only membership (i.e. without ESC Professional membership) should be offered and why yes, or why not?

In principal, colleagues should not be deprived of the right and freedom to choose which membership to take. I will argue for an EHRA-only membership due to different reasons already extensively discussed within our Association: A single entry-point via ESC to become an EHRA member weakens our independence and identity, in addition around 20% of EHRA members come from non ESC member countries. Finally, it would give a clear statement that EHRA resources gained by EHRA membership are accessible to all Association members.

3. What can EHRA do more for clinical training, education and certification of electrophysiologists?

The COVID pandemic has profoundly changed our medical environment so that training and education have to be adapted to a more dynamic and participative mode. Clinical training can be leveraged by Training Fellowships, Proctor- and Preceptor programs for the Young EP group. Moreover, we will include a training village hosted by EHRA in cooperation with the industry during all our future EHRA annual congresses. Another plan is to establish a Training Centre in the European Heart House. I will actively promote an accreditation program together with the National Cardiac Societies where young colleagues will have a path (expected duration of 2 years) finished by the EHRA exam.

4. What should be the role of EHRA in research?

EHRA has a history of endorsing external projects. However, the time has come to start having our Association in a central position initiating and leading projects which are attractive enough to be supported by public funds (EU commission and National Grants). EHRA should therefore organize multinational and multicenter research projects and continue to organize scientific projects to be submitted to the EU Horizon program (e.g. EHRA-PATHS, AFFECT-EU, PROFID). The National Cardiac Societies are the primary targets for acquiring centres (including centres in low-income countries with less scientific activity in the past).

5. What is the role of EHRA in the production of recommendations and guidelines?

Our Association is dealing with both clinical expertise but even more with highly sophisticated technical aspects of rhythm management in both catheter ablation and CRM device implantations. The knowledge and expertise of these latter can only be provided by those working on them on a daily basis, such as most EHRA members do. Therefore, it makes perfectly sense that EHRA produces documents containing recommendations about the practical aspect of these techniques from the consensus and expertise of its own members.