Call to Order

Dr. John Treidman, President of the Society, called the meeting to order at 7:30 PM. An acknowledgement of support and thanks was expressed to the following entities for industry support given this year to the Society:

- Bard Corporation
- Biosense-Webster
- St. Jude Medical
- Cryocath

Dr. Silvia Priori was then introduced to the members as the invited speaker for this year’s meeting. Dr. Priori’s presentation “Prolonged QT Syndrome and Cathecholaminergic Ventricular Tachycardia” was given and lasted approximately 50 minutes. It was very well received, and the Dr. Triedman expressed the Society’s thanks for her lecture and interest in our organization.

Old Business
None.

New Business

The following presentations were made to the membership concerning proposed projects:

1. Dr. Shubhayan Sanatani presented a proposal for a multi-center study to compare the effectiveness of digoxin versus propranolol for the treatment of (non WPW) supraventricular tachycardia in infants. The study is funded by the Canadian government but participation is open to any interested institution, including those outside of Canada. A handout as well as a CD-ROM with study information was provided. Further information is available through Dr. Sanatani at ssanatani@cw.bc.ca or through Dr. Jim Potts at jpotts@cw.bc.ca. (10 minutes).

2. Dr. Stuart Berger presented a proposal that was previously provided to the Executive Committee and the Heart Rhythm foundation concerning the development of a group of organizations concerned with sudden cardiac arrest.
The Society has been asked to help with advocacy and fundraising for this issue. Drs. Treidman and Van Hare (Vice-President) will serve as liaisons for the Society as well as members of the committee that will work with HRS and the HR foundation on this. (10 minutes).

3. Dr. Bob Hamilton presented a proposal for the development of a Consensus Conference dealing with the prevention of sudden cardiac death in the young. He presented a detailed outline of the aims and goals of the proposed conference as well as the guidelines of its infrastructure and a timeline. A straw poll of the members present was then taken to determine the level of support and was overwhelmingly approved with no negative comments concerning proceeding with this proposal. Further details will follow as the proposal moves forward. (30 minutes).

Treasurer’s Report

Dr. Phil Saul, Treasurer, then presented the current financial position of the society. Individual sponsors – Bard, St. Jude Medical, Biosense Webster and Cryocath each provided $2,500 (USD) support for the meeting. The current balance in the bank is $29,940.59 with no bills due save for the expected substantial meeting expenses for this evening. Membership applications were made available for those present with dues and website dues delineated. Dr. Saul noted that a large percentage of the membership has yet to send in dues for this year and he encouraged all present to check with the responsible parties assigned that duty at their institutions to comply with that request.

President’s Report

Dr. Treidman noted that the primary focus of the Society’s academic and social efforts are now centered during the HRS Annual Scientific Sessions meeting. We will still have an open meeting, primarily for discussion of old and new business at the American Heart Association meetings, next scheduled for Chicago in November of 2006. An acknowledgement and thanks was then given to Dr. Van Hare concerning his work in revising the HRS Competency Statement Addendum regarding the implantation of pacemakers and defibrillators. The issue concerned the credentialing of pediatric cardiologists who obviously are not eligible for ABIM certification in electrophysiology, as is recommended by the statement. In addition, most pediatric electrophysiologists have not taken the NASPExAM. Dr. Van Hare noted that he recently did take and pass the exam and that most of the questions on the test were within the knowledge base of most of the membership. Some of the pediatric questions were poorly structured and he subsequently has been appointed to the NASPExAM committee and will participate in question-writing for the exam, with a focus on the addition of specific pediatric-oriented questions for future exams. Dr. Friedman had volunteered to assist in this effort and Dr. Van Hare asked for others who might be interested to contact him soon, as there is a June deadline for submission.
Dr. Triedman noted that the name change to the Pediatric Electrophysiology Society currently excludes a more broad description of what we do and announced that the proposal to change the name to “The Pediatric and Congenital Electrophysiology Society” had received nearly unanimous support in the e-mail poll previously taken last year, though only a minority of members voted. The current proposal is to maintain the current internet domain name and informal name as currently used, but to change the formal name to the above and open membership up to adult cardiologists and others interested in the patients currently advocated for by the Society. This proposal was presented for discussion and there was no disagreement stated by any of the members present. Another attempt to poll the members by e-mail vote was advanced and will be done in the near future.

As there was no other new business proposed, the meeting was adjourned at 9:45 PM.

Respectfully submitted,

Richard Friedman, M.D., FHRS
Secretary, The Pediatric Electrophysiology Society