

***Pediatric Electrophysiology Society Minutes
Orlando, FL
9 November 2003***

The meeting was held at the Wyndham Hotel, Lake Buena Vista, Florida. Approximately 35 members attended.

Minutes from the Spring meeting were approved.

Commercial LQTS testing –

Michael Ackerman spoke on the status of industry efforts to provide a clinical genetic screening panel for LQTS. Legal hurdles to this effort related to intellectual property ownership have been cleared by a company located in Connecticut for the 5 known genetic mechanisms of LQTS, and if this company remains solvent, he expressed optimism that such a screen would be available in 6 – 12 months. His understanding is that preliminary negotiations with major insurers indicate that this would be generally considered to be a reimbursable test. Issues relating to sensitivity and specificity were also discussed, and the potential impact of more widespread application of such screening for patients with nonspecific phenotypes.

Treasurer's report –

Rich Friedman, Treasurer, provided a brief report of Society finances. The Society remains solvent with a current balance of ~\$16,000.

PEPS Fall meeting site –

Jim Perry, President, proposed changing the Fall meeting site of PEPS to the American Academy of Pediatrics convention. Reasons suggested for this move included the expressed enthusiasm of the AAP for welcoming greater involvement of the PEPS with its annual meeting and willingness to assist with the logistics of such a meeting, as well as the generally more attractive venues for the AAP in comparison to the AHA. Dr. Perry also proposed the possibility of combining the Fall meeting, whether at AAP or AHA, with 1 – 1 ½ days of academic activities. This might take the form of an abstract session, fellows' competition, invited speakers in a topic-driven program and/or structured pediatric EP didactics, oriented to fellows, affiliated professionals and pediatric cardiologists, and akin to the course now organized biennially by him in San Diego. A wide range of opinions was expressed on both the desirability of this plan and the quality of pediatric EP and pediatric cardiology in general at each meeting. It was decided by consensus to explore the option of an AAP-based meeting in the Fall of 2004, without explicit commitment to the venue of future Fall meetings.

Sudden cardiac death in TOF –

Ed Walsh presented preliminary data related to his efforts to realize a multi-center case control study to determine risk factors for cardiac arrest and VT in TOF. He has met his

target of >50 cases, and is now in the process of collecting three matched controls for each case. Preliminary descriptive statistics for the cases was discussed. Although it will not be possible to finish a study in time for abstract submission to NASPE 2004, Dr. Walsh hopes to be able to present summary data at that time to the PEPS.

Proposals for PEPS multicenter and/or Registry studies –

Multicenter studies: Anne Dubin – Biventricular pacing
Pat Frias – Pacing modalities in AV block with narrow escape
Arnold Fenrich – Cryoablation registry

Registry studies: Andy Blaufox – Ablation of VT in normal anatomy
Andy Blaufox – Ablation of JET
Andy Blaufox – Ablation of IART

Discussion of the appropriate role of PEPS in screening and approving requests to use the organization framework and / or communally developed databases for research projects was discussed. It was determined that the volume of such requests was low enough that the Executive Committee could handle them without need to create a Research / Publications Subcommittee. The Vice-President (currently John Triedman) will administer this process, solicit information from members interested in developing or collaborating in such projects, and provide access to that information to other members. It was decided by consensus that members should generally feel free to develop new projects, using the structure of the PEPS and its communal databases. Responsibilities of members undertaking such projects includes: 1) demonstration of active work on the project to the Society within 1 year of project proposal, 2) provision of reasonable compensation to the administrators of the Pediatric RF Registry or other PEPS-run databases for cost of extraction of data, and 3) willingness to work and publish collaboratively with other PEPS members who express an interest in the same or closely-related projects.

Credentialing of Pediatric EP through the ABIM –

John Kugler led a discussion on the desirability of a pediatric EP certification examination managed by the ABIM on behalf of the ABP. This topic has been discussed and abandoned in the past due to a lack of interest on the part of the credentialing organizations. Dr. Kugler revived the topic because of the recent success in creating a joint pediatric / IM agreement to develop and administer a sub-board exam in transplant hepatology. A wide variety of opinions were expressed, and no consensus was reached as to whether it makes sense to pursue this issue further at present. An update on promulgation of training guidelines was deferred until the Spring meeting.

The meeting was adjourned by Jim Perry.

Next meeting will be in association with NASPE in May 2004, San Francisco, CA. See you there!!!

Minutes transcribed by John Triedman