

SCT Newsletter



July/August
2014

Hello, and welcome to the July/August SCT newsletter. This issue of the newsletter is fully interactive with three different levels of involvement. First you can read it. If you are feeling more enthusiastic than that, you can submit a case study and if you are feeling even more enthusiastic than that then you can choose to be nominated for the council!

New SCT Website

There is a new SCT website which can be found at the existing web address of www.sct.org.nz. The new site is much improved and contains lots of information about our profession. An interesting new addition is a member's area which will have content such as professional development and education committee updates added, as well as historical newsletters. There is also a forum for people to add any research that they have been involved in or any case presentations they would like anyone to view or comment on. This will be a great resource for us all so please get behind it and don't be afraid to contribute. This link will take you directly to the registration page <http://sct.org.nz/register-with-us>. The forms required for SCT membership and the forms required for the certificate in physiological measurement / certification of cardiac physiologists are frequently updated and can also be found on the website if they are needed.

Contributions to the newsletter

With the arrival of our new website, now would be a great time to submit a case study for inclusion into the newsletter. Submissions from any discipline within cardiology and respiratory would be very welcome. Please e-mail anything you would like to submit to me at gary.zealand@hbdhb.govt.nz Please remember to ensure that case studies are made confidential.

Annual general meeting

The SCT AGM will take place on Wednesday the 29th of October at 8AM. If any members have an item that they would like raised then please e-mail the council.

Special congratulations

Special congratulations to Angela Morgan from Capital and Coast DHB for winning the 2014 sonographer investigator's award from the American society of echocardiography. This is a huge achievement, a boost for New Zealand echocardiography and obviously represents a lot of hard work on Angela's part. Further information can be found here

<http://asecho.org/science-shines-in-portland>

Conference report.

Many thanks to Lynette Shekleton for sending us this interesting report from the CSANZ conference in Dunedin;

Having been a few years since I have attended Cardiac Society, I was a little concerned how my neurons were going to stand up to two and a half days of constant use. However there was always something on offer to capture my attention due to the variety of topics offered. In fact several times I had to make choices between sessions that I would have loved to have heard both. This made me wonder about future developments of conferences. Surely in this age of technology, sessions could be recorded and available online allowing delegates to view them in their own time and thus avoid the issue to clashing sessions. It sounds a simple solution to me, but rarely is anything involving technology simple! I will be sure to include it in my feedback to CSANZ though!

One of the leading presentations for me, was the National Heart Foundation lecture taken by Professor Cliona Ni Mhurchu from the University of Auckland, and was entitled 'Turning the tide on obesity: science, policy and action?' She told us how there is now evidence that poor diet and obesity are starting to account for almost as much disease as factors like tobacco and alcohol. In fact in New Zealand it is only secondary to tobacco, and it is even expected to surpass tobacco by 2016. A sobering thought! Little old New Zealand actually has the third highest obesity rates in the OECD countries (following the US and Mexico). To date the focus for intervention has been on individual behaviour and the physiology of obesity, but this is having little impact. Areas that are currently being researched as to their effectiveness include: taxing sugary drinks, better nutritional labelling and a reduction in advertising of junk food and beverages to children. Further information on this can be found on the following websites: <http://nihi.auckland.ac.nz> <http://diet.auckland.ac.nz> This lecture was followed up by a series of speakers covering various topics around obesity and prevention.

Another presentation I was eager to attend was 'Lessons from the Christchurch Earthquakes: Genetics, psychology and service provision' by Dr Paul Bridgman, Canterbury Hospital. This was a fascinating presentation of their findings after two major earthquakes. After the first earthquake there was a surge in STEMI admissions, 6 stress cardiomyopathy admissions, and also increased admissions with earthquake triggered noncardiac chest pain. The hypothesis put forward was that the patients presenting with noncardiac chest pain or stress cardiomyopathy may be more psychologically vulnerable than the patients presenting with MI's. Their findings were that there was increased anxiety and neuroticism in those presenting with noncardiac chest pain. However, both the stress cardiomyopathy and MI patients were psychologically normal. Then there was the February earthquake... This resulted in a different pattern of admission, with an increase in stress cardiomyopathy admissions and a 63% increase in STEMI admissions. Only two of the stress CM patients had a psychiatric history of note. With such a group of stress CM patients, this was thought to be a great opportunity to investigate the possibility of a responsible gene and a great amount of funding, time and effort has gone towards this. However this has so far been unsuccessful. So, the take away lesson from the Christchurch earthquakes... you can not predict the future!

Unfortunately due to travel difficulties, two of the main speakers did not arrive in time for their presentations causing major headaches for the organizers. They did a brilliant job of reshuffling the order so that the conference continued uninterrupted. It did however make it difficult for the delegates choosing which presentations to attend as they were often not in the advertised order.

Overall the conference was well worth attending from both a social point of view where I was able to reconnect with many colleagues from around the country, and from an educational point of view where I was able to learn of new thoughts and developments.

Council position.

We are currently accepting nominations to be a member of the SCT council for the year 2014-2015. This is a rewarding and interesting way to be actively involved in our profession and if you would like to put your name forward then please fill the form on the next page and send it to us by **Friday the 19th of October**.



The Society of Cardiopulmonary Technology (NZ) Incorporated

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NOMINATIONS OF COUNCIL MEMBERS FOR 2014-2015 (One position available)

I / We _____ of _____ (Hospital)

and _____ of _____ (Hospital)

nominate _____ of _____ (Hospital)

for election to the Council of The Society of Cardiopulmonary Technology (NZ) Inc.

The above must be completed by the nominees only.

To be nominated you must be a current ordinary or affiliate member.

ACCEPTANCE OF NOMINATION

(Please complete this form if you, the nominated person, accept)

I consent to serve on the Council if I am nominated and elected.

Signed: _____

Date: _____

Detach the above and return, fax or email to the following address by
Friday 19th October

*The Society of Cardiopulmonary Technology
Dept of Clinical Physiology
Level 3, Auckland City Hospital
Park Rd, Grafton, Auckland
Fax number: (09) 6309877*

Current vacancies

Nelson

You will find an advert for a temporary 0.8FTE Cardiac physiologist in Nelson attached separately. If you are interested in this position then act fast as it closes very soon!

Wellington



(AH070-14) Team Leader – Cardiac Physiology

- Fully-qualified and motivated leader sought for this pivotal role
- Lead the team of Cardiac Technicians to deliver excellent patient care
- Permanent, full time

We are looking for a fully-qualified and motivated Team Leader to provide leadership and support to a large team of Cardiac Technicians at Wellington Hospital. The Cardiology Service is a secondary and tertiary service provided for Capital & Coast DHB and those of the central region of New Zealand. Cardiac Physiology provides a full range of diagnostic testing as an integral part of the Cardiology Service.

The ideal applicant will have:

- A minimum of 5 years postgraduate experience working as a clinical cardiac physiologist.
- Previous management and leadership experience of a cardiology service is essential.
- Evidence of a commitment to professional development.
- Proven leadership and team building skills
- An excellent Role model

For further information on this role, please email Recruitment@ccdhb.org.nz. Please indicate vacancy number and job title in the subject line.

Applications close 01 September 2014.

Interested? For a copy of the role description and to apply, follow this link:
<https://capitalhealth.carecentre.net.nz/Job/Team-Leader-Cardiac-Physiology/Wellington-Hospital/2599>
