It is with great pride that I assume the Presidency of the Heart Failure Society of America, a mature and vibrant community of thought leaders cohesively aligned around a singular mission to reduce the burden of heart failure worldwide. Two decades ago, what began as a group of “tens” has now blossomed into an assembly of “thousands”.

Today, we find ourselves at crossroads of uncertainty. Healthcare reform, globalization, increasing burden of disease, fiscal pressures, realignment of academic-industrial relationships, challenges in scientific exploration and aging populations are simply some competing trials and tribulations that we must confront.

A strategic vision is an imperative to harness collective direction and develop measurable goals to achieve incremental outcomes. The HFSA leadership has decided to embark on revisiting our strategic plan, a process that will begin later in 2016 and culminate in a fully expressed plan in 2017, an attempt to guide us together, into the next tide of healthcare.

In the near term, the HFSA must, in addition to the many initiatives, focus on two discrete deliverables in order to meet its mission. The first, is to relentlessly support and develop the effective interpretation and implementation of its guidelines for therapy in heart failure. The second, is to connect more closely on the global stage to harness collective wisdom of the multiple efforts underway in different countries and through distinct scientific societies.

It is insufficient to simply promulgate guidelines. All too often we stop at this stage and consider our job done. The HFSA has an imperative to act in this area and I believe we can do so by developing a structured Implementation Science Initiative @ HFSA that seeks to actively partner with other societies, use innovative educational portals and engage its members to focus their efforts on the real world application of emerging effective therapy. It has been disappointing to see the gains in therapeutic science only meagerly translated into the community setting.

Heart failure is a syndrome with immense challenges worldwide. The epidemiology of this disorder is changing across the globe and sentinel differences exist in the availability of treatments, the responses to therapy and even to ability to adopt such therapy. Marked differences are observed in application of drug therapy, use of implantable defibrillators and resynchronization therapy, use of therapy that may have already been demonstrated to be of less utility and stark differences in use of advanced technology such as mechanical circulatory support devices and even heart transplantation. We cannot confront these challenges alone and have an imperative to join hands with other societies, such as the European Society of Cardiology Heart Failure Association or the Japanese Heart Failure Society, to name a few.

The HFSA has never been on a more secure footing. We are the voice of Heart Failure in the Americas, have created avenues for heart failure awareness, been the nucleus for the recognition of Advanced Heart Failure and Transplant Cardiology as a specialized certifiable field of expertise, supported and fostered training and educational programs, seeded the scientists of today and supported those promises into tomorrow and has served as a portal for advocacy for the field and its members. We must now do much more, together.

Disclosures

Dr. Mehra reports consulting fees from St. Jude Medical, Medtronic, Johnson and Johnson, Stealth Biopeptides and Teva Pharmaceuticals.

References


