

Cardiologist demonstrates intricate procedure

Cardiologists and other medical practitioners from around Africa recently had the opportunity to watch a South African professor expertly direct a special repair device via tiny wires and catheters towards a patient's heart in order to repair a hole in this vital organ.



Professor Farrel Hellig

The live interactive demonstration by local interventional cardiologist, Professor Farrel Hellig, was performed in the cardiac catheterisation laboratory at Netcare Sunninghill Hospital in Johannesburg, from where it was streamed in real time to hundreds of delegates attending the 20th Pan-African Course on Interventional Cardiology (PAFCIC) held in Tunisia recently.

Hellig, an interventional cardiologist and associate professor at the University of Cape Town's Medical School, spoke participants through the intricate keyhole procedure to close the hole, or flap, in the wall of the inter-atrial septum of the heart, know as a patent foramen ovale (PFO) repair.

The procedure was followed closely on a large screen by delegates in Tunisia, who were able to interact and engage with the professor throughout the procedure. Professor Hellig says the PFO is a relatively easy intervention for him and his team to perform, as they have undertaken many of them in recent years.

Held under the auspices of the Pan African Society of Cardiology (PASCAR), PAFCIC aims to educate the continent's doctors on interventional cardiology, thereby aiming to improve cardiovascular care in Africa. Hellig's procedure was one of 10 performed by experts at centres around the continent to demonstrate to delegates the latest techniques in this subspeciality. In addition to these live case transmissions, the PAFCIC programme included practical workshops and keynote lectures by international experts.

Interventional cardiology

"Interventional cardiology is revolutionising heart medicine in many important ways, and is becoming an increasingly critical sub-speciality both locally and around the world. However, the techniques involved can be complex and insufficient cardiologists in South Africa and on the African continent have had the opportunity to acquire the necessary skills," he said.

"As a consequence, these approaches are still not widely available to the many vulnerable patients throughout the continent who could greatly benefit from them. I think that it is therefore of critical importance to familiarise as many of our colleagues as possible with these techniques."
Highly-trained cardiologists now perform a range of procedures ranging from heart valve replacement and repair to the unblocking of blocked blood vessels with stents using minimally invasive techniques that are far less traumatic to the body than open-heart surgery, where large incisions have to be made to perform surgery.
"These procedures tend to reduce patients' hospital stays and the recovery period. Moreover, they often enable us to treat highly compromised patients who might not have survived open heart surgery," he said
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