

Curriculum Vitae

Professor Fausto J. Pinto, MD, PhD, FESC,
FACC, FSCAI, FASE



Place and Date of Birth

Santarém, Portugal / 3 November 1960

Married, 5 children

Present Position and Address

- Full Professor of Cardiology, Lisbon University Medical School
- Director, Lisbon Cardiovascular Institute
- President, Association for Research and Development of the Faculty of Medicine
- Av Prof Egas Moniz, 1649-028 Lisbon
- PORTUGAL

Training and Education

- MD-Lisbon University Medical School in 1984.
- Cardiology fellowship at Santa Maria University Hospital (Lisbon, Portugal) and Stanford University Medical School (CA, USA), where I was a Post-Doctoral Fellow and then Clinical Attending in the Echocardiography laboratory (1989-93).
- Interventional Cardiology Fellowship at Stanford University Medical School (CA, USA).

Post Graduate Degrees

- PhD- Lisbon University Medical School in 1993
- Aggregation- Lisbon University Medical School in 1997

European Society of Cardiology Activities

- Vice-President of ESC for National and Affiliated Societies (2010-12)
- Chairman of the Congress Program Committee (CPC) of ESC (2008-2010), Barcelona 2009 and Stockholm 2010.
- Board member of ESC (Councilor)(2004-2006).
- Member of the Science Council of ESC for 2004-2006 – Association 1 “Echocardiography”.
- Member of the Scientific Committee and CPC (Coordinator of Imaging) of the World Congress of Cardiology 2006, Barcelona (Spain), and the ESC Congress 2005, Stockholm (Sweden).
- Member of the Scientific Committee and of the Congress Program Committee of ESC Congress 2004, Munich (Germany); ESC Congress 2003, Vienna (Austria).
- Member of the Scientific Committee of the ESC Congress 2002, Berlin, Germany, and ESC Congress 2001, Stockholm.
- President and Founder of the European Association of Echocardiography (EAE) – a registered branch of ESC (2003-2004).
- General Director Euroecho 8, Athens (Greece) Dec 2004 and Euroecho 7, Barcelona (Spain) Dec 2003.
- Chairman of the Working Group of Echocardiography of ESC (2002-03).

- Vice President of the Working Group of Echocardiography of ESC (2000-02).
- *Chairman Scientific Committee Euroecho 6, Munich, Dec 2002 and Euroecho 5, Nice, Dec 2001.*
- *Local Host of the Euroecho 4, Lisbon, Dec 2000.*
- Vice-Chairman of the sub group of “Intravascular Ultrasound” of the Working Group of Echocardiography ESC (1995-1997), following as Chairman (1997-1999)

Other International Scientific Committee Participation

- ESC Representative at the ACC Committee to Develop an Expert Consensus Document on Standards for Acquisition, Measurement and Reporting of Intravascular Ultrasound Studies (IVUS) (1998).
- Expert Reviewer for the European Commission for FP7
- Member of the Board of the European Board for the Specialty of Cardiology (EBSC) (2006-2010).
- *Course Director of The International Teaching Course on Echocardiography. Tirana (Albania), 14 Oct 2006*
- *Scientific Sessions Program Committee of the American Heart Association, Orlando (USA), 14-18 Nov 2009.*
- *President of II International Congress “Cardiology at a Crossroad of Sciences”, Tyumen (Russia), 18-20 Mai 2011.*
- Member of Scientific Committee, abstract grader, member of YIA Juries and co-organizer of several international meetings, including, ACC, AHA, ASE among others

Editorial Boards

- **Editor in Chief** of the Portuguese Journal of Cardiology (since 1999)
- Editorial of Board of the following journals: European Journal of Echocardiography; European Heart Journal; The Journal of Heart Disease; International Journal of Cardiovascular and Science; Archives of the Turkish Society Cardiology; Hellenic Journal of Cardiology; Arquivos Brasileiros de Cardiologia; Romanian Heart Journal; Journal of Cardiovascular Diseases; Archives of Medical Science; Business Briefing: European Cardiology publication; Medical Science Monitor International Panel of Reviewers; The Netherlands Heart Journal; The Journal of Heart Disease, Journal of Chinese Clinical Medicine; Cardiology Management Journal; The Journal of Tehran University Heart Center; Journal of Geriatric Cardiology; Cardiology Research and Practice

Fellowships / Honours

- European Society of Cardiology (FESC),
- American College of Cardiology (FACC),
- American Society of Angiology (FASA),
- Society for Cardiac Angiography and Interventions (FSCAI)
- American Society of Echocardiography (FASE).
- Dean’s Postdoctoral Fellowship Award, Stanford University, CA, USA, 1991
- Awarded as one of the “Four best abstracts”, 5th Congress of the European Society for Organ Transplantation, Maastricht, Netherlands, 10/91
- American College of Cardiology • Bristol Travel Award, Anaheim, CA, USA, 3/93
- Upjohn Award for Outstanding Research in Cardiovascular Medicine, Stanford, CA, USA, 6/93
- Award “Nunes Correa Verdades de Faria - 2006” for “Progress in Cardiovascular Disease”
- Silver Medal of ESC, 2006
- “The D. Avgoustakis Lecture” Athens (Greece), 14 Sep 2007.
- “Cabrol Lecture” –Opatija (Croatia), 27 Sep 2007
- “Edler Lecture 2007” - “Echo Odyssey: A journey into the secrets of the heart”. Euroecho 2007, Lisbon, 2007.
- Cardiac Imaging: Perspectives into the future. Visiting Professorship at Wakayama University, Japan (12 April 2008).
- The New Frontiers of Cardiovascular Ultrasound, Visiting Professorship at University of Padova (Italy), 4 May 2009.

- “Treatment of Acute Coronary Syndromes”. Visiting Professorship at University of Belgrade (Serbia), 25 Nov 2011.
- “The role of scientific societies in promoting scientific developments” Opening lecture at the Congress of Italian Society of Cardiology, Rome, Dec 2011

Honourary Memberships

- American Society of Echocardiography
- Sociedad Colombiana de Cardiología
- Société Française de Cardiologie
- Società Italiana di Ecografia Cardiovascolare
- Romanian Society of Cardiology

Major Publications

160 papers published

Over 1100 presentations/chairmanships at national and mostly international meetings.

- *Pinto FJ, St.Goar FG, Fischell TA, Stadius ML, Valantine HA, Alderman EL, Popp RL. Nitroglycerin-Induced Coronary Vasodilation in Cardiac Transplant Recipients: Evaluation with In Vivo Intracoronary Ultrasound. Circulation 1992;85:69-77.*
- *Pinto FJ, Chenzbraun A, St.Goar FG, Botas J, Oesterle SN, Alderman EL, Schroeder JS, Valantine HA, Popp RL. Feasibility of Serial Intracoronary Ultrasound Imaging for Assessment of Progression of Intimal Proliferation in Cardiac Transplant Recipients. Circulation 1994;90:2348-2355.*
- *Rickenbacher PR, Pinto FJ, Lewis NP, Hunt SA, Alderman EL, Schroeder JS, Stinson EB, Brown BW, Valantine HA. Prognostic importance of intimal thickness as measured by intracoronary ultrasound after cardiac transplantation. Circulation 1995;92:3445-3452.*
- *Sousa P, Pinto FJ. Risk adjustment model in health outcomes evaluation: a contribution to strengthen assessment towards quality improvement in interventional cardiology. Int J Qual Health Care. 2008;20:324-330.*
- *Silva D, Cortez-Dias N, Jorge C, Marques JS, Carrilho-Ferreira P, Magalhães A, Martins SR, Gonçalves S, da Silva PC, Fiuza M, Diogo AN, Pinto FJ. Cystatin C as Prognostic Biomarker in ST-Segment Elevation Acute Myocardial Infarction. Am J Cardiol 2012; Feb 20 (Epub ahead of print)*

Major Research Interest

- Echocardiography
- Intravascular Ultrasound
- Left Ventricular Function
- Cardiovascular Imaging
- Biomarkers

Program for President Elect

I would like to start by saying how much privileged and honored I feel to have been nominated as candidate for the position of President Elect.

I stand for this election with the track record of having served the ESC for over 12 years in several leading positions. As main positions I was the Founder and first President of the European Association of Echocardiography (EAE), then served in the Board as Councilor, I was the Chairman of the Congress Program Committee with the responsibility to organize Barcelona 2009 and Stockholm 2010 and currently I'm serving as Vice President for National Societies and Affiliates. This trajectory gave me the opportunity to understand the realities of the different constituent bodies as well as an important knowledge of the ESC and its structure. The ESC is an extraordinary society that has evolved over the years due to the hard and wise work of our predecessors and became the largest and I would say the most important cardiovascular society in the world.

It is well known we are globally facing very adverse circumstances at different levels but, despite this, ESC remains strong and it is our responsibility as leaders to keep it strong. For that we obviously need to get all the needed professional advise but we have to keep focused on what we are and should continue to be, a scientific society made of men and women with one common goal: to fight cardiovascular disease. That can only be accomplished with leadership with imagination and passion, striving for excellence and willing to make a difference in a responsible way. I believe I have demonstrated through my professional life and my achievements to have that.

There are several things that should prevail as values when dealing with a Scientific Society, which include continuity, consistency, transparency and dedication among others. Therefore, It is essential to establish a midterm plan that involves at least two mandates, since two years is too short to obtain results. This means the need for an excellent understanding and cooperation between the Presidential trio.

There are many areas ESC has developed over the years that cover all the different aspects related with the life of a large organization. However I think there should be a core of strategic goals that should be defined beforehand. My strategic areas for the future can be summarized as follows:

1. Membership: We have at ESC a unique asset, our constituent bodies, which are the backbone of the Society. We represent 54 Nations, 19 Working Groups, 5 Associations and 5 Councils. All major decisions should be clearly discussed and shared with our CB in a very open and transparent way. The fair involvement of all of them in the different activities of the Society is a must, in order to keep the unity of our family. Also, the specificities and differences need to be wisely and properly addressed.

It is clear that the membership concept needs to evolve in order to face the several and complex challenges, but keeping in mind the importance of being centered on the members taking into account their expectations and needs. Several external measures have and will continue to have an important impact on the activities of any Society, such as the current global situation in Europe (and beyond) regarding industry support or the change in regulations that several countries are adopting. All changes need to be extensively discussed and done together.

The 54 National Societies represent over 70 000 health professionals dealing with cardiovascular disease and have the best knowledge about the reality and the different needs in each country. They should be consulted periodically bringing them closer and more involved in the decision processes.

The Associations, due do their specific role, should have as much autonomy as possible, either scientifically as well as financial or administrative. This implies an obvious need of excellent communication and coordination with ESC Central. I intend to delegate as much as is legally possible to the Board of the Associations.

The involvement of all healthcare professionals in the life of the Society should be encouraged. The concept of multidisciplinary is essential for a proper management of any health care institution. I will make sure structures that naturally deal with this, such as the Council for Nursing and Allied Professionals or Cardiology Practice will be properly integrated into the discussions and decision-making process.

The initiative Cardiologists of Tomorrow started a couple of years ago, in which I was deeply involved, is essential to guarantee the future of our society. I will be committed to make this group strong and give it the necessary means to grow and expand their activities.

FESC: The FESC Program needs to be invigorated with a clear definition of its value. It should be incorporated in the revised membership concept.

It is important also to stress the importance of our Affiliate Societies and members outside the ESC family. For that I intend to implement an International Affairs Department with the goal of turning ESC as the main reference for education, guidelines, and registries around the world. This implies a close collaboration with the Affiliate Societies to increase ESC's outreach and impact.

2.Education: This will be one of the main goals of my Presidency, to make ESC the main education provider in cardiovascular medicine through Innovation and Diversity.

The development and implementation of the integrated eplatform (ESCeL) will be a priority and for that a dedicated team will be put in place. This is a very powerful tool with multiple potential uses at different levels, with an endless capacity to include different contents and with the possibility to be used by the different constituent bodies.

We have the largest Congress in cardiovascular medicine in the world and that gives us a lot of pride. However we need to foresee the future and idealize preventive measures for the most likely scenarios that we'll be facing in the near future. Therefore the need to innovate on the congress model, such as make it a whole year product, or the development of virtual congresses are some of the measures that need to be well organized. With the current technology and in the new environment it seems crucial to prepare good Distance Learning Programs with Regular facilitation of webinars and courses.

Education links with certification and accreditation, which will be key elements in the near future. We need to be ready for that and be the educational providers of the Program. This will not only increase the visibility and credibility of ESC but could also provide a source of revenue. The provision of MCQs to the different users and of Credits towards CME is one example.

A very strong IT department is essential to cope with these challenges, although the possibility of outsourcing should always be considered whenever appropriate.

3.Guidelines and standards: The ESC guidelines are highly respected and quoted and an excellent work has been done which needs to be continued. A good program of Dissemination and Implementation is something that should be strongly encouraged. This is another area where the use of the online portal and the link with National Societies can be quite useful.

It will also be important to improve and expand the participation of the different constituent bodies as well as to improve dissemination with a functional link to the National Journals, through the Editors Network, including the facilitation of translation into local languages.

4. Research and training: The role of ESC as a research supporter can be divided in different aspects that go from Training and Research Grants to Registries. The creation of a Research Foundation should be carefully considered keeping in mind the need to avoid any overlap with national or European structures already in place and doing

excellent activities. This new RF should envisage, as examples, to support the development of national and transnational research projects, improve the knowledge about local and regional realities, sponsor clinical trials on orphan entities or ideas and monitor and assess how research support translates into results (return on investment). The whole field of Health Promotion represents a wide area to explore where ESC can play a major role.

The development of projects in partnership with other entities, such as industry partners or others, targeting Research Funds available from different sources in a concept of co-investment, encouraging the creation of new start ups and consequently new jobs, can certainly be a new area of growth for the ESC. Proper and well-planned business models need to be put in place.

Another area that should be actively encouraged and further reinforced is the area of Registries. The EORP should be expanded as a means for scientific growth, improve knowledge in a European perspective with a proper business perspective. It is absolutely essential to have good European data and the ESC has a unique opportunity, due to its credibility and authority, to organize that.

5. Advocacy and lobbying: European Relations are one of the cornerstones of our Society and ESC should be seen as the major advocate of patients/ cardiologists and any other health professional, in brief of cardiovascular medicine in Brussels. To accomplish this properly I support the opening of a permanent delegation in Brussels. This will be of utmost importance to reach out to audiences outside the cardiology community, including EU and National Policy Makers, NGOs and Professional Societies (ex. Contemplate an alliance with sister societies to fight against cardio metabolic epidemic in ESC countries), coordinate public campaigns with NCS.

I will organize high-level meetings with the country members responsible for the Presidency of European Council in order to discuss and lobby for the most relevant topics in our professional area.

The organization of Policy Conferences at the Heart House involving key players should also be encouraged, so the ESC can be seen as the engine pushing forward.

The CRT (Cardiovascular Roundtable) is a very important and unique platform for a transparent and proper discussion with the industrial partners. Its composition should be expanded and its goals refined.

The need to pursue our Humanitarian Activities such as the European Heart for Children will also be contemplated.

6. Governance: Accountability and transparency will be my key words for Governance. An institution such as ESC needs a very clear Governance model, in order to be effective. A Business and operational plan should be clearly defined. I will continue to have the Presidents of the Associations seating in the Board and will include also the Basic Science Council chair, considering the relevance I give to basic science as part of the backbone of the society. The Heart House Management will be under the surveillance of the Executive Board. Outsourcing will be properly considered for the activities that will be seen as appropriate.

An Ethics Committee should be considered and the COI Policies will be strictly implemented.

All of the above will need a lot of work and a dedicated team of volunteers and professionals. With my candidacy I am available to lead this team in a responsible and focused way. My previous achievements at ESC speak for themselves and I believe show the style and attitude I intend to implement if I am elected your President.

I count on you so all together we can continue to make ESC the leading force in Cardiovascular Medicine for the best of our populations and the world we live in.

All the best.

Fausto Pinto