American College of Cardiology and British Cardiovascular Society at 100—learning, sharing and growing together: a letter from America

Dipti Itchhaporia

The American College of Cardiology (ACC) is proud of its long history of trans-Atlantic collaboration with the British Cardiovascular Society (BCS). Our shared history has cultivated new leaders and researchers, enabled the sharing of innovation and knowledge, and, most importantly, forged friendships and connections that have served to move our respective societies and the profession forward.

In the last year, let alone the last decade and the previous 100 years, cardiovascular medicine has undergone profound and rapid change. Scientific breakthroughs and advancing technologies have made it so that we can now treat patients previously deemed untreatable. In contrast, countless others can live longer and with a significantly improved quality of life. Responding to these changes, however, has not been easy. It has required us to rethink how we deliver care, conduct research, interact, learn new skills and new technologies, as well as keep up with the latest research, clinical guidelines and more.

Undoubtedly, one of the College’s most successful domestic and international collaboration experiences was the inaugural Twinning Program between the ACC California Chapter (CA ACC) and BCS that was conceived by ACC past President John Gordon Harold, MD, MACC and inaugurated in March 2009 (figure 1). The programme succeeded in bringing many BCS leaders to California, including Nick Boon, Huon Gray, Keith Fox, Iain Simpson, Simon Ray, Sarah Clarke and Martin Cowie, as well as Sir Roger Boyle, past National Clinical Director for Heart Disease and Stroke in the National Health Service for England, and Peter Littlejohns, Clinical and Public Health Director of the UK National Institute for Health and Care Excellence, for educational programmes. These exchanges succeeded in both forging stronger personal and professional relationships between us and facilitating the sharing of knowledge and training. The late Arthur Hollman, cardiologist and archivist to the BCS, had also been a regular contributor to CA ACC newsletters with historical articles (figure 2). Jamal Rana, current president of the CA ACC, was the first recipient of the BCS-ACC Twinning Fellowship in Multimodality Imaging between Royal Brompton and Cedar Sinai Hospitals and Marc Dweck received cardiac CT training as the first BCS fellow who came to California. In the words of Dr Harold: “One of the best things about the program is the ability to share experiences that may lead to greater cross-pollination of ideas and concepts, and ultimately to improve care of our patients.”

The ACC and BCS recognised the need to actively help clinicians acquire leadership skills, tools and experience...
essential for transforming cardiovascular care in a changing world. We also identified the opportunities inherent in working together to leverage our collective strengths and facilitate knowledge sharing and leadership growth among our members. We share a commitment to improving heart health in our countries and globally as well as we share similar concerns regarding the global social and economic problems posed by non-communicable diseases and the increasing prevalence of cardiovascular risk factors like hypertension, obesity, high cholesterol and diabetes.

The early Twinning Program also laid the groundwork for other successful partnerships between ACC US chapters and global partner societies that continue to this day. Currently, the Virginia Chapter of the ACC and BCS are part of the ACC’s growing international exchange programme, which brings members from respective ACC chapters together with global society to learn about advances in cardiovascular science and exchange ideas on quality programming and health systems. These programmes have served to underscore that we have as much to learn as to teach.

Outside of our chapter programmes, ACC and BCS leaders have worked side by side over the years to create joint educational programming at important meetings like ACC’s Annual Scientific Session and the BCS Annual Conference. Our respective leaders have joined together on panels and moderated discussions on important topics impacting the delivery of cardiovascular care. It has been a true honour and privilege to be part of many of these joint ACC and BCS sessions throughout my history with the ACC chapter, as chair of the ACC’s Board of Governors, and now as president of the ACC. I am excited for the future as I watch the next generation of ACC and BCS leaders grow through the ranks due to our joint programmes and our work together.

‘It takes both sides to build a bridge’—and that is precisely what the ACC and BCS have done. Together we have built a trans-Atlantic bridge united by shared missions to advance heart health worldwide. Together we continue to learn from each other and collectively benefit patients around the globe. Henry Ford said, “Coming together is a beginning, staying together is progress, and working together is a success.” We have experienced success by working together, and I believe that together we will also succeed in our shared commitment to transforming cardiovascular care and supporting cardiovascular clinicians in their efforts to improve heart health.

Funding The authors have not declared a specific grant for this research from any funding agency in the public, commercial or not-for-profit sectors.

Competing interests None declared.

Patient and public involvement Patients and/or the public were not involved in the design, or conduct, or reporting, or dissemination plans of this research.

Patient consent for publication Not required.

Ethics approval This study does not involve human participants.

Provenance and peer review Commissioned; externally peer reviewed.

© Author(s) (or their employer(s)) 2022. No commercial re-use. See rights and permissions. Published by BMJ.

To cite Itchhaporia D. Heart 2022;108:751–752.

Heart 2022;108:751–752.
doi:10.1136/heartjnl-2021-320141