

EDITOR'S PAGE



Should All Roads Lead to Rome?



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The European Society of Cardiology (ESC) meeting was big. Really big! It has become the largest cardiology meeting in the world, eclipsing the American College of Cardiology and the American Heart Association Scientific Sessions. There is a lot of pride in this bigness, and it is a real testimony to the ascent of cardiology, not only in Europe but throughout the world due to the collaboration of so many. But, how big is too big? When I was president of the American College of Cardiology, I invited the president of the ESC, Lars Ryden, to visit Heart House in Bethesda. He and his executive, Mr. Alan Howard, came and spent about 3 days. We received some criticism for sharing all of our “secrets” with the Europeans, but I believed it was productive and the right thing to do and I still do. Despite being proud of our accomplishments on both sides of the Atlantic, I think most of us agree that our collaboration trumps our competitiveness. But this ESC was really big in many ways. Marty Leon, Gregg Stone, and Ron Waksman have entertained us over the recent years with the likes of special speakers such as Bill Clinton, George W. Bush, Hillary Clinton, and so forth. The Europeans, however, have gone one up on them by featuring the Pope at this meeting.

But the title of this page is not about which meeting will win the gold medal, but about the value of these meetings. As someone who has certainly benefited from almost 50 years of these symposia, I would have little credibility if I were to say they have outlived their usefulness. In fact, I do not believe that, and the personal contact and interchange of face-to-face meetings is, I believe, irreplaceable. However, times, they are a-changing. Interviews were conducted at the ESC to gauge the commitment for bringing huge numbers of physicians to a single place.

Questions about online provision of the presentations were posed. I do not know how much actual time an attendee at ESC spent in didactic sessions or the interactive ones. I do know that the one day I tested the recommended public transportation route to get to the convention, it required 3 bus rides and a 0.5-mile walk and took 1.5 hours to get there. If I had returned to my hotel the same way, I would have to deduct 3 hours from any educational benefit—except for learning something about the Rome transit system. Do not get me wrong, I loved Rome, especially the Town Hall meeting we held for authors of *JACC* manuscripts and the side trip to Pompeii, Positano, and Amalfi. But who will pay? Restrictions on industry sponsorship of travel have now hit the Europeans as it previously did in the United States. The massive cost of the large meetings are still supported by industry, and they serve as revenue sources for the societies. The scientific information that is presented at these meetings reflects extensive work of so many investigators and the value of this stimulation to their work is vitally important. But how many attendees actually hear or experience the communication of this information? I was discussing this with George Vetrovec on the flight home, and we reflected that years ago the scientific sessions were the places you had to go to hear the latest advances. If not, you waited for the publication or learned about these developments months later from the drug representative (perhaps with a slightly different emphasis). Now, my colleagues in Atlanta knew the results of the NORSTENT (Trial of Drug Eluting Stent Versus Bare Metal Stent to Treat Coronary Artery Stenosis) before I did. This, by the way, was the study that captured front-page headlines on Wednesday morning of the meeting. This interventional study of greatest news interest showed once again that bare-metal stents

were comparable to drug-eluting stents for the endpoint of death and myocardial infarction and showed the superiority of drug-eluting stents for restenosis endpoints. Despite the value of knowing this in the era of better stents and medical therapies, we should remember that we have known this for more than a decade (1). I doubt we are going back to bare-metal stents. Yes, it is fun to be there for presentations and late-breaking trials, most of which are published the same day as the presentations, but do we all have to be there?

I love these meetings and I love to meet and interact with many people from all over the world, but I do wonder if it will be this way in 10 years. How will medical knowledge be communicated

then? Is the time already here when it will be necessary to make travel more virtual? If everything is learned online, will we lose that beneficial terror when presenting to a real audience knowing that Eugene Braunwald was in attendance? I hope we do not lose that, but I suspect that economics may at some point in the future change the way we communicate. Then all roads may not lead to Rome, but Rome may lead to all roads. After all, the empire did not last forever.

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REFERENCE

1. King SB 3rd. Restenosis: the mouse that roared. *Circulation* 2003;108:248-9.