

World Rare Disease Day – 29th of February 2016 III Conference of Rare Cardiovascular Diseases at John Paul II Hospital in Krakow

Natalia Dłużniewska¹, Grzegorz Kopeć¹, Tomasz Grodzicki², Elżbieta Fryżlewicz--Chrapisińska³, Anna Prokop-Staszecka⁴, Piotr Podolec¹

¹ Center for Rare Cardiovascular Diseases, Department of Cardiac and Vascular Diseases at the John Paul II Hospital, Institute of Cardiology, Krakow, Poland; ² Department of Internal Medicine and Gerontology, University Hospital, Jagiellonian University Medical College, Kraków, Poland; ³ National Health Fund – Małopolska Division, Krakow, Poland; ⁴ Department of Pulmonology and Oncology, John Paul II Hospital, Krakow, Poland

The third Conference of Rare Cardiovascular Diseases took place at the John Paul II Hospital in Krakow, Poland on the 29th of February 2016. The conference was organized as part of the World Rare Disease Day 2016 annually celebrated by the Centre for Rare Cardiovascular Diseases in Krakow, Poland (CRCD).

A rare disease, also referred to as an orphan disease, is any disease that affects a small percentage of the population. There is no single, widely accepted definition for rare diseases. In Europe a disease is defined as rare when it affects fewer than 1 in 2000, and in USA a disorder is defined as rare when it affects fewer than 200,000 people at any given time. 80% of rare diseases have identified genetic origins whilst others are the result of infections, allergies and environmental causes, or are degenerative and proliferative. 50% of rare diseases affect children.

The main objective of World Rare Disease Day is to raise awareness amongst the general public and decision-makers about rare diseases and their impact on patients' lives.

Organizing third Conference of Rare Cardiovascular Diseases the CRCD adopted the general aim of the World Rare Disease Day and invite most influential persons in the field of rare diseases in

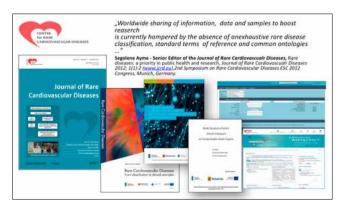


Figure 1. Main achievements of the Centre for Rare Cardiovascular Diseases in the John Paul II Hospital in KraKow, Poland: Journal of Rare Cardiovascular Diseases; Text Book of Rare Cardiovascular Diseases, Learning Programme, Web Page, Registry of Patients with Rare Cardiovascular Diseases

Poland. The list of attendees included: members of the Polish Parliament, authorities of Lesser Poland Voivodeship, authorities of Marshal's Office and Krakow Municipal Council, Heads of Cardiological Departaments in Malopolska, and memberships of Centre for rare Cardiocavascular Disease.

The general parts of the official Programme of the conference included: (1) Educational session on rare cardiovascular diseases; (2) health care system and every-day problems of rare cardiovascular diseases patients in receiving good quality care; (3) financing the diagnosis and treatment of rare cardiovascular disease; (4) Model of Referring Patients Suffering from Rare Diseases proposed by the CRCD.

The lecture of Professor Piotr Podolec covered the issue of Rare Disease as priority in European Union. Professor Podolec reviewed the definition of rare disease and acknowledged the biggest problems faced by patients rare cardiovascular diseases patients. He also appreciated the role of European international cooperations as a framework for clinical and scientific research development leading to improvement of knowledge about rare cardiovascular diseases allowing introduction of novel diagnostic and therapeutic procedures. Professor Podolec shared with the audience the achievements of the CRCD, such as the Classification of Rare Cardiovascular Diseases, Journal of Rare Cardiovascular Diseases, Registry of Rare Cardiovascular Diseases the webpage of the CRCD (Figure 1).



Figure 2. National and International Partners

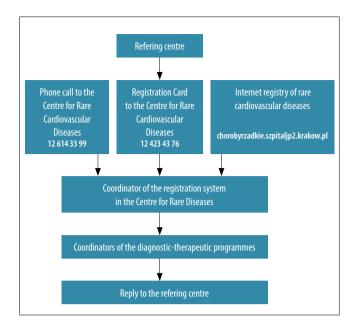
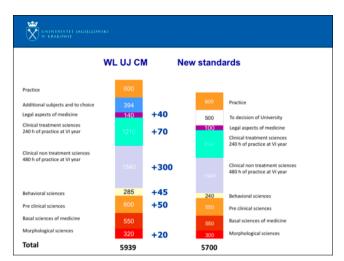


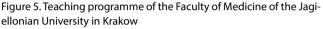
Figure 3. Model of Referring Patients suffering from Rare Disease



Figure 4. Textbook of The Curriculum in the Field of Rare Diseases for Medical Students

Professor Podolec highlighted that from 2006 to 2015, the CRCD has been instrumental in providing diagnostic path and making key decisions for 2300 patients with RCDs. Also CRCD has played an important role in the dissemination of knowledge on RCDs through symposia and conferences (ESC Congresses in Paris in 2011, in Munich in 2012, in Amsterdam in 2013, in Barcelona in 2014 and in London in 2015).





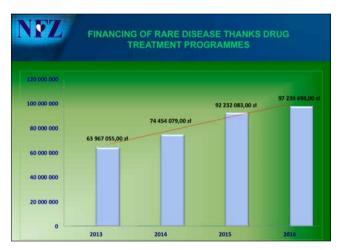


Figure 6. Financing of Rare Disease owing to drug treatment programmes

Assoc. Professor Grzegorz Kopeć talked about local cooperation of cardiology departments of Malopolska region of Poland aiming at improving care for rare cardiovascular diseases patients. Centre for Rare Cardiovascular Diseases in John Paul II hospital in Krakow is main referral centre which collaborates with provides support to all doctors of Malopolska region, who look after patients with rare cardiovascular diseases. Our partnerships are: The Edward Szczeklik Specialist Hospital in Tarnów, Municipal Hospital in Chrzanów, University Children's Hospital in Krakow and The Tytus Chałubiński Hospital in Zakopane. Doctor Kopeć also presented Model of Referring Patients Suffering from Rare Diseases proposed by the CRCD and National Health Fund, which aims at improving the system of consultation and referral of patients with rare cardiovascular diseases to the CRCD (Figure 3).

Professor Tomasz Grodzicki, dean of Faculty of Medicine at the Jagiellonian University in Krakow, delivered a lecture on learning programme of rare diseases (Figure 4). The overall objective of the program is to raise awareness of rare diseases among medical students and doctors and increase their competence and thus improve the care of patients with rare disease. Professor Grodzicki remarked that all students of the Faculty of Medicine in the University are tought about general problems with diagnosis and treatment of patients with rare diseases, certain diseases as examples of pathophysiology – metabolic disorders, genetic defects, etc. (Figure 5). Also students have possibility to choose supplementary course and get the knowledge of selected diseases in detail.

The last topic of the Conference was dedicated to the issue of financing of diagnosis and treatment of rare cardiovascular disease

Photo reportage – III Conference of Rare Cardiovascular Diseases at John Paul II Hospital in Krakow



Figure 7. Opening speech of the III Conference of Rare Cardiovascular Diseases at John Paul II Hospital in Krakow - Dr Anna Prokop-Staszecka MD, PhD, Director of the John Paul II Hospital in Krakow - outlined the ups and downs of the CRCD in John Paul II Hospital in Krakow throughout its 5 years of operation. She thanked to the entire CRCD team for collaboration and expressed the hope that diagnostic process and treatment of rare disease will be well funded soon



Figure 9. Assoc. Prof. Grzegorz Kopeć – focused on cooperation on rare disease with other institutions in Małopolska. He presented organizational scheme which function as part of Małopolska collaboration network and emphasised that CRCD have developed a Model of Referring Patients Suffering from Rare Diseases which aims to improve the system of consultation and referral of patients from referring centers to the Center of Rare Cradiovascular Diseases

patients. The director of National Health Found in Małopolska, Ms. Elżbieta Fryżlewicz-Chrapisińska said, that funding the diagnosis and treatment of these group of patients encounter many difficulties. Mrs. Chrapisińska marked that owing to introduction of drug treatment programmes important gains continue to be made with the increase of the development of new diagnostic and therapeutic procedures (Figure 6).



Figure 8. Opening lecture: Rare Disease as priority in European Union - Prof. Piotr Podolec MD, PhD, Director of the Institute of Cardiology of the Jagiellonian University Medical College in Krakow, Poland, Head of the Department of Cardiac and Vascular Diseases and the Centre for Rare Cardiovascular Diseases at the John Paul II Hospital in Krakow – highlighted that above 2500 patients with rare cardiovascular Diseases have been treated in Department of Cardiac and Vascular Diseases so far. Professor Podolec thanked to Dr A. Prokop-Staszecka, and the administration team of the John Paul II Hospital in Krakow for collaboration in creation of CRCD, RCD registries, the Curriculum in the Field of Rare Diseases for Medical Students and Journal of Rare Cardiovascular Disease



Figure 10. From the left: Jakub Podolec MD, PhD, expert from CRCD; Lidia Gądek, Member of Parliament; Prof. Tomasz Grodzicki MD, PhD, Dean of Medical Faculty Jagiellonian University in Krakow and Head of the Department of the Centre for Rare at Medical University Hospital in Krakow; Dr Anna Prokop – Staszecka MD, PhD, Director of the John Paul II Hospital in Krakow, Prof. Piotr Podolec MD, PhD, Director of the Institute of Cardiology Jagiellonian University Medical College, Head of the Department of Cardiac and Vascular Diseases and the Centre for Rare Cardiovascular Diseases at the John Paul II Hospital in Krakow



Figure 11. From the left: Ewa Podłęska, Deputy Head of the Social Policy Department; Elżbieta Fryźlewicz-Chrapisińska, Director of National Health Found in Małopolska; Dariusz Madera, Director of Health and Social Policy Department



Figure 12. Mrs. Lidia Gądek MD, Member of Parliament - talked about actually status of work progress on rare diseases in Parliamentary Health Commission. Also she declared to involved CRCD in John Paul II Hospital in Krakow to the list of Ministry of Health and better financial support for rare disease in Poland



Figure 13. Mr. Dariusz Madera, Director of Health and Social Policy Department- said that establishing the Center for rare Cardiovascular Diseases at the John Paul II Hospital was prepared perfectly and thanks to Director A. Prokop-Staszecka and Professor P. Podolec could be possible to extend to a European Network for Orphan Cardiovascular Diseases

Information for authors

Aims and scope

Journal of Rare Cardiovascular Diseases (JRCD) is an international, quarterly, peer reviewed journal that keeps cardiologists up to date with rare disorders of heart and vessels. Topics covered include congenital heart defects, cardiomyopathies, rhythm abnormalities, rare forms of arterial hypertension, pulmonary hypertension, cardiac tumors and other rare diseases affecting heart and vessels such as connective tissue diseases, metabolic disorders, neuro-muscular diseases another unclassified rare diseases.

Instructions for authors

The Journal will consider for publication articles written in English.

Types of papers

The following types of papers will be considered for publication in JRCD:

Original articles: word limit 4000 words, 40 references, no more than 6 figures/tables

Review articles: word limit 5000 words, 50 references, no more than 5 figures

Brief Report: word limit 2000 words, 20 references, no more than 4 figures

Case Report: word limit 3500 words, 30 references, no more than 5 figures.

Letters to editor: up to 600 words Editorial

The type of paper should be indicated on the title page.

Manuscript submission

Submission of a manuscript implies: that the work described has not been published before; that it is not under consideration for publication anywhere else; that its publication has been approved by all co-authors, if any, as well as by the responsible authorities – tacitly or explicitly – at the institute where the work has been carried out. The publisher will not be held legally responsible should there be any claims for compensation.

Permissions

Authors wishing to include figures, tables, or text passages that have already been published elsewhere are required to obtain permission from the copyright owner(s) for both the print and online format and to include evidence that such permission has been granted when submitting their papers. Any material received without such evidence will be assumed to originate from the authors.

Online Submission

All articles must be submitted using an electronic submission system at: www.jrcd.eu.

Title page

The title page should include: Type of paper The name(s) of the author(s) A concise and informative title The affiliation(s) and address(es) of the author(s) The e-mail address, telephone and fax numbers of the corresponding author Declaration of conflict of interest

Abstract

Please provide an abstract of 150 to 250 words. The abstract should not contain any undefined abbreviations or unspecified references.

Keywords

Please provide 4 to 6 keywords which can be used for indexing purposes.

Text

Text Formatting

Manuscripts should be submitted in Word. Use a normal, plain font (e.g., 12-point Times Roman) for text. Use italics for emphasis. Use the automatic page numbering function to number the pages. Do not use field functions.

Use tab stops or other commands for indents, not the space bar. Use the table function, not spreadsheets, to make tables. Use the equation editor or MathType for equations. Save your file in doc format. Do not submit docx files.

Headings

Please use no more than three levels of displayed headings. Original article should consists of the following sections: Background, Methods, Results, Discussion, Conclusions, References

Case reports should include the following headings: Case presentation, Review of literature, Patient management and follow-up, References.

Abbreviations

Abbreviations should be defined at first mention and used consistently thereafter.

Footnotes

Footnotes can be used to give additional information, which may include the citation of a reference included in the reference list. They should not consist solely of a reference citation, and they should never include the bibliographic details of a reference. They should also not contain any figures or tables. Footnotes to the text are numbered consecutively; those to tables should be indicated by superscript lower-case letters (or asterisks for significance values and other statistical data). Footnotes to the title or the authors of the article are not given reference symbols.

Acknowledgments

Acknowledgments of people, grants, funds, etc. should be placed in a separate section before the reference list. The names of funding organizations should be written in full.

Scientific style Please always use internationally accepted signs and symbols for units (SI units).

Generic names of drugs are preferred; if trade names are used, the generic name should be given at first mention.

References

Reference citations in the text should be identified by numbers in square brackets [].

The list of references should only include works that are cited in the text and that have been published or accepted for publication. Personal communications and unpublished works should only be mentioned in the text. Do not use footnotes or endnotes as a substitute for a reference list.

The entries in the list should be numbered consecutively. The example:

Roldan CA. Valvular and coronary heart disease in systemic inflammatory diseases: systemic disorders in heart disease. Heart 2008; 94: 1089–1101.

Please, list the first three authors and add "et al.".

Tables

All tables are to be numbered using Arabic numerals. Tables should always be cited in text in consecutive numerical order.

For each table, please supply a table caption (title) explaining the components of the table.

Identify any previously published material by giving the original source in the form of a reference at the end of the table caption.

Footnotes to tables should be indicated by superscript lower-case letters and included beneath the table body.

Artwork / Figure

For the best quality final product, it is highly recommended that you submit all of your artwork – photographs, line drawings, etc. – in an electronic format. Your art will then be produced to the highest standards with the greatest accuracy to detail. The published work will directly reflect the quality of the artwork provided.

Supply all figures electronically.

Indicate what graphics program was used to create the artwork.

Figure Numbering

All figures are to be numbered using Arabic numerals. Figures should always be cited in text in consecutive numerical order.

Figure parts should be denoted by lowercase letters (a, b, c, etc.). Each figure should have a concise caption describing accurately what the figure depicts. Include the captions in the text file of the manuscript, not in the figure file.

Figure captions begin with the term Fig. in bold type, followed by the figure number, also in bold type.

No punctuation is to be included after the number, nor is any punctuation to be placed at the end of the caption.

Identify all elements found in the figure in the figure caption; and use boxes, circles, etc., as coordinate points in graphs. Identify previously published material by giving the original source in the form of a reference citation at the end of the figure caption.

Permissions

If you include figures that have already been published elsewhere, you must obtain permission from the copyright owner(s) for both the print and online format. Please be aware that some publishers do not grant electronic rights for free and that Publisher will not be able to refund any costs that may have occurred to receive these permissions. In such cases, material from other sources should be used.

Electronic Supplementary Material

We accept electronic multimedia files (animations, movies, audio, etc.) and other supplementary files to be published online. This feature can add dimension to the author's article. Supply all supplementary material in standard file formats. Please include in each file the following information: article title, journal name, author names; affiliation and e-mail address of the corresponding author.

To accommodate user downloads, please keep in mind that larger-sized files may require very long download times and that some users may experience other problems during downloading.

For each supplementary material, please supply a concise caption describing the content of the file.

Ethical standards

Manuscripts submitted for publication must contain a statement to the effect that all human studies have been approved by the appropriate ethics committee and have therefore been performed in accordance with the ethical standards laid down in the 1964 Declaration of Helsinki. It should also be stated clearly in the text that all persons gave their informed consent prior to their inclusion in the study. Details that might disclose the identity of the subjects under study should be omitted. The editors reserve the right to reject manuscripts that do not comply with the above-mentioned requirements. The author will be held responsible for false statements or failure to fulfill the above-mentioned requirements.

Conflict of interest

Authors must indicate whether or not they have a financial relationship with the organization that sponsored the research. They should also state that they have full control of all primary data and that they agree to allow the journal to review their data if requested.

Therefore the manuscript must be accompanied by the "Conflict of Interest Disclosure Form". To download this form, please follow the hyperlink on the right.

Copyright transfer

Authors will be asked to transfer copyright of the article to the Publisher (or grant the Publisher exclusive publication and dissemination rights). This will ensure the widest possible protection and dissemination of information under copyright laws.

Disclaimer

The authors, editors and publisher will not accept any legal responsibility for any errors or omissions that may be made in this publication.

The publisher makes no warranty, express or implied, with respect to the material contained herein.