

# Development of the European Network in Orphan Cardiovascular Diseases

# **EU Project inauguration**

Malopolska Regional Operational Programme (MROP), Priority 8. Interregional cooperation, Action 8.2.

### Jakub Stępniewski, Piotr Musiałek

John Paul II Hospital, Department of Cardiac and Vascular Diseases of the Jagiellonian University, Medical College, Krakow, Poland

Both international and Polish cardiology community warmly welcomed our prior international project entitled *Establishing a European Network for Orphan Cardiovascular Diseases* (European Regional Development Fund and Małopolska Regional Operational Programme for 2007–2013). More than that, the first international project of Krakow CRCD received wide support that enabled establishment of collaboration with our initial International Partners, and successful organization of several international symposia devoted to "no-one's" RCD patients, including the symposium held at ESC congresses in 2012.

Therefore, efforts have been made not only to sustain this initiative but also to make it grow further.

Following our successful application, a new Project entitled **Development of the European Network in Orphan Cardiovascular Diseases** was officially launched during the quarterly CRCD

video-consultation meeting on May 10<sup>th</sup> 2013 in the John Paul II Hospital in Krakow. The inauguration meeting was opened by the Director of the John Paul II Hospital, Dr Krzysztof Bederski (Figure 1), who expressed his appreciation for the activities of the CRCD. He perceived the uniqueness of the Centre, which is one of the very few of this kind in Poland and also still rare in Europe. His communication was followed by Professor Piotr Podolec (Figure 1), the Head of the Centre, who acknowledged the efforts of the members of the CRCD team put in applying for the European grant. Professor Podolec admitted that this initiative, which leading aim is to improve the quality of health care for patients affected by rare diseases of heart and vessels, could not be conducted at such a high level if not for enormous dedication of people engaged in the Project and financial support from EU. He summarized hitherto achievements of the Centre particularly appreciating the coop-



Figure 1. Dr Krzysztof Bederski (Director of the John Paul II Hospital) (right) and Professor Piotr Podolec (Head of the Centre for Rare Cardiovascular Diseases) (left) officially opening the Project and welcoming the guests



Figure 2. Mr. Wojciech Kozak, (Vice-Marshal of the Malopolska Region) discussing the role of the Project in developing the potential of Malopolska Region to improve the quality of healthcare of patients with rare diseases

J. Stępniewski, P. Musiałek



Figure 3. Dr Grzegorz Kopeć (Deputy Head of the Centre for Rare Cardiovascular Diseases) discussing the aims of the Project



Figure 4. Dr Maciej Kowalczyk (Director of the University Children's Hospital of Krakow) deliberates on the need for continuity of care for patients with rare diseases

eration with the Project Partners, Lithuanian University of Health Sciences in Kaunas, Lithuania and the Research Institute of Cardiology, Pauls Stradins Clinical University Hospital in Riga, Latvia. Gaining the recognition at the national and international level is by far one of the most prominent successes of the Centre, mentioned Professor Podolec.

The Head of the Krakow CRCD highlighted that creating cooperation links with different European expert centres enabled selecting the most adequate management pathway for over 60 difficult rare cardiovascular patients consulted in the Centre. Recognizing the role of partnerships in the field of rare diseases, Professor Podolec welcomed 6 Partners joying the new Project. International centres establishing the formal new collaboration include The Deutsche Herzzentrum, Berlin in Germany and San Rafaele Hospital, Milan in Italy. New National partners are Dr Tytus Chalubinski Memorial District Hospital in Zakopane, District Hospital in Chrzanow, Edward Szczeklik Memorial Specialized Hospital in Tarnow and the University Children's Hospital of Krakow.

Before Doctor Grzegorz Kopeć, the Deputy Head of the Centre outlined the general aims of the *Development of the European Net*-



Figure 5. Dr Krzysztof Kłos (Director of District Hospital in Chrzanow) outlines problems that his physicians face when they manage patients with rare diseases



Figure 6. Regina Tokarz (Director of the Dr Tytus Chalubinski Memorial District Hospital in Zakopane) discusses the shortcomings of the national health system with regard to the care of patients with rare diseases

work in Orphan Cardiovascular Diseases Project, Mr Wojciech Kozak (Figure 2), the Vice-Marshal of the Malopolska Region declared his sincere appreciations for the Krakow CRCD achievements. He emphasized, that establishing the Centre was consistent with the European Union Commission Recommendations on implementation public health strategies to ensure that patients with rare diseases have access to high-quality care, including diagnostics and treatment. This improves the potential of Malopolska Region in this field at the national and international level.

Doctor Kopeć (Figure 3) stressed that fostering equal opportunities in access to up-to-date diagnostic and treatment options for patients with orphan cardiovascular diseases as the key value of the Project and the mission of the Centre.

Dr Kopec highlighted a role of education as one of primary aims for 2013–2015. He admitted that improving the quality of



Figure 7. Doktor Marcin Kuta (Director of the Edward Szczeklik Memorial Specialized Hospital in Tarnow) values the supportive role of such institutions like the Centre for Rare Cardiovascular Diseases in creating the chain of co-operation

care should be based on the improvement of knowledge and skills of the medical staff bringing aid to this unique group of patients. Therefore, sharing the expertise and know-how between Expert and non-Expert Centres remains crucial step for improving the recognition of often atypical symptoms (and, on the contrary, sometimes the symptoms commonly associated with another, more frequent disease) in the context of cardiovascular pathology, leading to shortening time to the appropriate diagnosis and management. Complexity of most RCDs and the lack of expert guidelines makes the management of these diseases exceptionally difficult. Therefore, engaging in international research cooperation and expert committees should result in formulation of diagnostic and therapeutic algorithms to support physicians in their decision making.

Doctor Kopec explained that improving the quality of care requires certain amendments in the health care system administration. For this reason, cooperation with the Polish National Health Fund, formal Partner of the Project, is directed at the elaboration of optimal rare cardiovascular diseases management models. He confirmed that formulation of internet-based, multicenter RCDs registries, recognized as a powerful apparatus in expanding knowledge on rare diseases, is in progress.

Representatives of new National Partners expressed their gratitude for becoming part of this important initiative, and presented their vision of roles in the Project.

Doctor Maciej Kowalczyk (Figure 4), Director of the *University Children's Hospital of Krakow*, referred to the durable cooperation with the John Paul II Hospital and the CRCD in Krakow, that has lasted for many years now. He explained that many RCDs start in childhood and with the development of medical care quality these children more often reach maturity. Continuation of appropriate care in highly specialized centres is pivotal to sustain their survival.

Doctor Krzysztof Klos representing District Hospital in Chrzanow, Ms Regina Tokarz representing Dr Tytus Chalubinski Memorial District Hospital in Zakopane, and Doktor Marcin Kuta from Edward Szczeklik Memorial Specialized Hospital in Tarnow expressed



Figure 8. Professor Tomasz Grodzicki (Dean of Faculty of Medicine of the Jagiellonian University Medical College in Krakow) debating about the need for sharing the knowledge and experience in the field of rare diseases

their gratitude for inviting their hospitals to join the cooperation network. Doctor Klos (Figure 5) admitted that physicians in his centre more frequently face problematic cardiological cases and therefore consultation in highly specialized centres is often needed to determine optimal management. He believed that grouping the expertise in the fields of RCDs within dedicated Expert Centres is required. Ms Tokarz (Figure 6) agreed, that without reasonable changes in the national health system administration, patients with RCDs will struggle to find an appropriate medical attention. Doctor Kuta (Figure 7) was convinced that in the absence of comprehensive management strategies in majority of RCDs, distributing actual knowledge among peripheral medical institutions will support physicians in early diagnosing and proper referral of these patients.

Dean of Faculty of Medicine of the Jagiellonian University Medical College in Krakow, Professor Tomasz Grodzicki (Figure 8) focused on importance of disseminating knowledge about RCDs in promoting the future improvement of RCD patients quality of care. He expressed his determination to broaden the Medical Faculty Curriculum by topics directly referring the problem of rare diseases.

The inauguration meeting was closed by Professor Piotr Podolec, who encouraged the Partners to strengthen the cooperation networks and whished successful collaboration within the Project. All to both direct and ultimate benefit of RCD patients!

# **Call for papers**



## Why submit to the Journal of Rare Cardiovascular Diseases?

- first journal dedicated to rare cardiovascular diseases
- a platform for communicating and exchanging, clinical information and research data
- international editorial board
- all articles peer-reviewed
- first decision in 3 weeks
- open access
- no charges for authors
- your work will reach the investigators and clinicians focused on treating rare CVD patients
- your acknowledged contribution to evolution of high-quality,
  common, standards in managing patients with rare cardiovascular disease

Submit to the Journal of Rare Cardiovascular Diseases via www.jrcd.eu

## 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.