

NASCI cardiac CT angiography course

Lourens Erasmus

Drs W E Scribante & Partners, George, W Cape

The course was the first joint venture between the RSSA and the North American Society of Cardiac Imaging (NASCI), and comprised 40 hours of training over 2 consecutive weekends: 15 - 17 March at the Radisson Blu Hotel, V&A Waterfront, Cape Town, and the second from 22 - 24 March at the Sandton Sun Hotel, Johannesburg.

The course was unique in many respects. Firstly, it was presented over consecutive weekends, with delegates required to attend both weekends in their entirety to obtain the necessary accreditation. So-called 'essential pre-course reading' was also provided in the form of 5 published articles that covered the basics of cardiac anatomy, the cardiac conduction system, CT physics, image acquisition, post-processing, and atherosclerotic plaque characterisation. Didactic lectures were presented at the start of each session, followed by supervised case study reviews under supervision of the esteemed faculty, which included Professor Charles White, and Drs Harold Litt, Shawn Teague and Suhny Abbara, under the leadership of Professor Jill Jacobs. Fully equipped CT workstations were provided, with only two attendees per workstation, which facilitated a true hands-on experience. After each case, questions were posted to the audience, and answers from delegates recorded



From L to R: Dr Harold Litt; Proff Charles White, Leon Janse van Rensburg, Jill Jacobs; Drs Gregory Kicksa, Shawn Teag, and (inset) Suhny Abbara.



Harold Litt presenting.

with an electronic audience response system, provided by NASCI, and expertly handled by Ms Michele Wittling. At the end of the course, each delegate was credited with 70 supervised case reviews.

I must emphasise the logistical challenges of this event in setting up about 50 workstations and integration between the different vendors (GE Healthcare, Philips, Siemens, Tecmed Africa). These challenges were met and handled expertly by the representatives from these companies, who worked together towards the common goal for the course.

As a novice in the field of interpretation of coronary CTA, I found the training course to be of the highest quality, providing me with essential basic knowledge and some practical experience for providing this service to our patients. The challenge now lies in continued education and service provision.

Special thanks to all involved in organising and presenting this course, with Professor Leon Janse van Rensburg, as usual, at the helm.

RSSA honorary membership award

Rounding off the NASCI course, the RSSA and South African community had the privilege of presenting Professor Jill Jacobs with honorary RSSA membership. A well-published academic and professor in the Department of Radiology of New York University, Professor Jacobs is also a director of the Cardiac Imaging Programme at the NYU Langone Medical Center. The honour was awarded in recognition and appreciation of her value and outstanding contribution to the South African radiological community. She has been a regular visitor to South Africa, an ardent and passionate supporter of teaching academic radiology in the country, instrumental in bringing foremost international radiologists to participate in RSSA CME teaching courses, and played a leading role in presenting the RSSA/NASCI Cardiac Accreditation Course in South Africa and establishing official ties between the RSSA and NASCI.

We proudly welcome Professor Jill Jacobs as our fifth esteemed RSSA honorary member, and extend our sincerest gratitude for her commitment and dedication towards South African radiology.



Dr Thami Mngoma (RSSA Treasurer and RSSA CME Association Trustee) presents Professor Jill Jacobs with her honorary membership certificate.

ECR 2013

Lili Huang

Medical officer in radiology, Steve Biko Academic Hospital and University of Pretoria

The 25th European Congress of Radiology (ECR) took place in Vienna, Austria, from 7 - 11 March 2013. A wide range of relevant and controversial topics from paediatric to adult radiology, physics and professional issues were covered in parallel sessions in the short span of 5 days. The presentations included junior- and senior-level radiology, as well as those suitable for students and radiographers. Numerous interactive sessions, and refresher and practical courses, were held. Over 300 exhibitors from around the world were present to display the latest medical imaging developments and services.

The annual programme features sessions held by 3 countries; this year, the RSSA was one of the guests of honour among Chile and Spain. HIV/AIDS and TB, two of South Africa's major health issues, were discussed by several renowned radiologists including Proff Zarina Lockhat, Victor Mngomezulu and Congress Director Leon Janse van Rensburg; and Drs Tracy Kilborn, Pieter Janse van Rensburg, Richard Pitcher and RSSA President Clive Sperryn.

I was privileged to present 3 e-posters on paediatric cardiology: Walking the tight rope: When to intervene in rheumatic heart disease; This is the left, right?; and Assessing a broken heart. My colleague at Steve Biko Academic Hospital, Dr Anith Chacko, also attended the congress and presented 2 e-posters.

My attendance at ECR 2013 was made possible by the generosity of an RSSA CME Association grant. I sincerely thank the trustees of the Association for providing me with the opportunity to attend the congress.

ESR meets South Africa: ECR 2013 report-back

Clive Sperryn

RSSA President

The RSSA had the opportunity to participate in the 'ESR Meets' programme at ECR 2013 – the second African country to do so after Egypt in 2012. There were two elements to participation: the academic programme and the RSSA booth and entertainment programme.

The academic programme: ESR meets South Africa

Clive Sperryn and the ECR President, Professor Jose Ignatio Bilbao, chaired the session. We were welcomed by Professor Gabriel Krestin, President of the ESR. Dr Sperryn introduced the audience to South African radiology, comparing radiologist:population ratios with other countries, and introduced the topics of HIV and TB before introducing the speakers.

In South Africa, HIV infection is a high risk factor for stroke in young patients. **Professor Victor Mngomezulu** presented 'HIV-related cerebrovascular disease: The South African experience', a systematic review of published literature from 3 major South African academic centres in the last 12 years, and ended with some unique angiographic images.

The concept of the Rich focus as the cause of tuberculous meningitis is controversial. Using original images from Arnold Rich's work, as well

as from the South African physician J N Coetzee's thesis on tuberculous meningitis, **Dr Pieter Janse van Rensburg** illustrated why there is doubt concerning the role of the Rich focus as the cause of basal cisternal tuberculous meningitis, and proposed a more likely pathogenetic mechanism based on radiological-pathological correlations using MR imaging.

The incidence of TB is increasing in both the developing and developed worlds, and is complicated by the emergence of multidrug-resistant disease and co-infection with HIV. **Dr Tracy Kilborn** covered the varied presentations of TB in the spine, and discussed the MRI features.

South Africa has the highest global HIV prevalence, estimated at 5.6 million people, including 377 000 children. **Professor Richard Pitcher** described the 5-year findings of a Cape Town-based USA-UCT collaborative paediatric pulmonology HIV-research group focusing on severe CXR abnormalities in HIV-infected children.

Professor Zarina Lockhat gave an inspirational overview of radiology training, showing some fascinating camouflage images by Art Wolfe to highlight the way we perceive images. The final session was a celebration of South Africa: the country, its people, its diversity, and its attractions.

On behalf of the RSSA, we thank all our speakers for their excellent presentations. We had excellent feedback from several European radiologists.

Clive Sperryn later participated as a panellist in the ECR 2013 Image Interpretation Quiz, facing some challenging cases as part of a successful international team.

The booth and cultural activities

The South African booth was impressive. We had assistance from SA Tourism, and Carmen and Pranusha provided impressive artwork. Patricia Trietsch (RSSA secretary) manned the booth which acted as a meeting point. She made the following comments: 'It was a wonderful experience and certainly different from our SA congresses. It is huge – although many doctors told me it was nothing compared with the RSNA, so that must be mind-boggling! I was fascinated by the



From L to R: Tracy Kilborn, Patricia Trietsch (back), Clive Sperryn and Zarina Lockhat.



From L to R: Clive Sperry, Bongoza Mabhongo (wife of the SA ambassador in Vienna) and Leon Janse van Rensburg.

continuous comings and goings of the delegates. It was great to meet many of our registrars whom I've spoken to on so many occasions but am now able to put a name to a face and also actually chat face-to-face and find out so much about them.'

Thanks to Dr Lili Huang, a radiologist from Pretoria, for her exceptional piano recital on the grand piano. Lunchtime cultural entertainment was provided by Thabiso Serobanyane and Sibongiseni Ndlovu who gave an

energetic performance and managed to entice Leon Janse van Rensburg onto the stage for an impromptu performance that found its way onto YouTube! The booth was visited by Mrs Bongoza Mabhongo, wife of the SA ambassador in Vienna.

The evening's wine tasting was well attended, including Ms Lydia Greyling, Minister Plenipotentiary, from the SA embassy in Vienna. Ogilvie provided a great team from London and everything ran smoothly; overall, it was a great success.

Thanks to Patricia for manning the booth, to Zarina for the leading role she played in the organisation of the artwork for the booth and the entertainment programme, and to all the SA radiologists who supported us. And thanks to Leon Janse van Rensburg for the initial contact and for support and involvement in the organisation throughout. We believe we have been able to gain positive exposure that will benefit South African radiology in the future.

A reminder ...

... of the SORSA/RSSA congress from 23 - 25 August 2013 at the International Convention Centre in Durban; the Advanced MSK Imaging Course from 21 - 23 February 2014 at the Table Bay Hotel, V&A Waterfront, Cape Town; and – retrospectively by now – the Cone Beam CT workshop in Cape Town on 1 June, which we hope to report on in the next *SAJR*. Further details are on the RSSA website.

OBITUARY

Philip Palmer



Philip Palmer died on 3 January 2013 at the age of 91. He had led an amazingly productive life, leaving a lasting legacy in his contribution to radiology in developing countries and investigation of tropical diseases.

Born into a medical family in 1921, he saw service as a stretcher bearer in World War II. After graduating in medicine at London University, he was in general practice for a while and then specialised in radiology. In 1954 he emigrated with his family to Bulawayo in Southern Rhodesia (now Zimbabwe). At the time, Mpilo Hospital, where he was stationed, had an outstanding group of medical staff, many of whom were later appointed professors in various parts of the world. Philip contributed substantially to this pool, and to radiological services in the region. Even at this early stage of his career, he was appointed to international radiology committees.

From 1964 to 1968, Philip was professor and head of the Department of Radiology at the University of Cape Town. He totally reorganised radiological services and training, with lasting impact on UCT and the country, and attracted many talented trainee and qualified radiologists. His clinical teaching sessions were notable; two anecdotes illustrate his influence and ingenuity. At the time, gastrointestinal examinations were largely

dependent on barium meals and enemas, for which there was a waiting list of many months except for 'emergency' appointments, which some clinicians exploited. Philip believed that if such a test was required it should be available immediately; he cancelled all bookings and insisted on being the radiological arbiter on the need for these examinations. Professor Jannie Louw, the legendary head of surgery, was incensed when he requested an emergency test and was told by his registrar that Professor Palmer would decide whether and when it would be done. The registrar was sent to demand Professor Palmer's presence, to which Philip replied that he would welcome Professor Louw in his office at any time! Barium examination procedures ran smoothly thereafter. Another time, Philip diagnosed silicosis on a chest X-ray and was ridiculed by the clinicians, as the patient was a woman and had not been on the mines. An autopsy soon afterwards confirmed the diagnosis. This was insufficient for Philip, who went to the Transkei and through some outstanding fieldwork demonstrated what is now known as 'hut lung'.

Philip and his wife, Miep, moved to the USA. In 1970 he was appointed as the first professor of diagnostic radiology at the then-new UC Davis School of Medicine, California, where he remained. Often in collaboration with the WHO, he continued to be one of the most influential radiologists of his time, and received many international awards.

Philip's first wife, Pauline, predeceased him; he is survived by their daughter Alison, their son Robin, three grandchildren and two great-grandchildren, and his wife Miep.

J P van Niekerk, R E Kottler

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