

# The SCTS Cardiac Scholarship

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**Had I known quite how much would be involved in securing a fellowship position in the United States, I might have embarked on a simpler task, such as mapping the human genome!**

My six-month “to-do” list prior to leaving for the US included passing the United States Medical Licensing Examination, publishing a book, and sitting the final Fellowship exam (which, like waterboarding, simulates a near-death experience in order to elicit every last piece of information you may know on a topic), in addition to completing the reams of paperwork required for national, state and institution credentialing in America. Hence the first of many thanks are due to my family, and to Messrs Fountain and Townsend at Harefield Hospital, without whose support and forbearance over those six months I would have failed miserably at the first of these hurdles.

The effort was certainly well worth it. I have enjoyed a superb time at Mount Sinai Medical Center in New York, as well as a stint at the Universität Leipzig Herzzentrum. Ani Anyanwu, a Harefield trainee who completed a fellowship at Mount Sinai under Dr David Adams, and then accepted a position there two years ago as Director of Heart and Heart-Lung Transplantation, wrote a comprehensive account of his fellowship experience in the December 2005 edition of the Bulletin. His article closely reflects my experience, so I will not duplicate his comments here. I hope it suffices to say that his account of his fellowship operative experience as first surgeon at Mount Sinai, which included VADs, transplants, complex mitral valve reconstruction and advanced aortic root and arch surgery, was the primary reason I

applied for the same fellowship; and talking to senior fellows at institutions ranging from the Harvard teaching hospitals to the Cleveland Clinic has emphatically confirmed the exceptional nature of the operative teaching here.

I planned to spend one year at Mount Sinai, but extended it to two years because of the unparalleled learning opportunity, and I am very grateful for this chance to thank the superlative clinicians and teachers with whom I was lucky enough to work. I owe particular thanks to Dr Paul Stelzer whose focus is aortic root surgery and who helped me to do Bentall, David and Ross procedures; Ani who enabled me to do complex, re-operative VADs and transplants; Dr Randall Griepp who taught me the principles of thoracoabdominal, arch and aortic root work; cardiologist Dr Valentin Fuster who has been unstinting in his support; and finally Dr David Adams who, even more importantly than teaching me how to plan and perform complex mitral, tricuspid and aortic valve reconstruction, has been an absolutely phenomenal role model, mentor and supporter.

My original intention was also to incorporate a three-month endovascular fellowship at the Cleveland Clinic into the fellowship year, funded by the Cardiac Scholarship of the Society for Cardiothoracic Surgery in Great Britain and Ireland, as I thought that this would complement my UK training in minimally invasive and robotic surgery. I am extremely grateful to the Society for its generosity and also for its flexibility when I requested support for a change of plan. With the help of Dr Adams and the Society I was instead able to spend the time under Professor Friederich Mohr at his outstanding unit in Leipzig, where he leads highly successful, high-volume transcatheter and trans-apical aortic valve replacement and minimally invasive mitral valve surgery programs. This tremendous experience has enabled me to take on a role focused on developing minimally invasive mitral repair and transcatheter aortic valve programs at Mount

Sinai. The latter has become particularly relevant as Dr David Adams was recently named as the primary investigator of the pivotal FDA trial of percutaneous aortic valve replacement with the CoreValve® Device.

When planning this fellowship I never considered the possibility that I would take a consultant post in the US; and so accepting Dr Adams’ offer to stay on at Mount Sinai required careful thought. I am therefore very grateful for the help and advice I had from so many people, particularly Mr Alan Wood, Mr Patrick Magee, Mr Thanos Athanasiou, and Professor John Pepper, as well as my Programme Director Mr Anthony de Souza. There is so much to learn from spending time with experts in another healthcare system, in another country, particularly when those experts see teaching and mentoring as a key priority and are able to devote real time and resources to it; and I would be very happy to talk to any trainees who want to explore fellowship options. I am incredibly excited by the opportunities and challenges presented by taking up this consultant post, and I cannot thank the Society enough for helping to make this happen.



*Repairing a mitral valve with  
Dr David Adams*

*This fellowship year was also funded by an HCA International Travel Award*

# *the* **bulletin**



Society for Cardiothoracic Surgery  
in Great Britain and Ireland

December 2008

*New Patient Representative*

*Article 14 Applications*

*Mesothelioma & Lung Cancer Initiative*

*The Changing Cardiothoracic Workforce*

*Here to the North Pole!*

*Travelling Fellowship report*

*Annual Meeting 2009*

***Cardiac Surgeons  
A Pain in the Neck!***

# Contents

President's Report	3
Secretary's Report	5
Revalidation	6
New Patient Representative	9
Mesothelioma and Lung Cancer Initiative	10
Article 14 Applications	11
Annual Meeting Bournemouth 2009	12
Cardiothoracic Surgeons: A pain in the neck!	14
Trainees Report	17
Treasurer's Report	18
National Selection for Trainees	19
The Marian and Christina Ionescu Travelling Fellowship	20
SCTS Cardiac Scholarship	21
Here to the North Pole	22
Nursing Report	23
Society Cardiac and Thoracic Scholarship	25
Ionescu Travelling Fellowship	25
New Appointments	25
Forthcoming Events	27
Obituary	29
Applications for SCTS Treasurer	29
Crossword	30



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