



The Meaning of the South American Society of Cardiology

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The dynamics of the development of global relations, in its various aspects, besides promoting amazing changes – not rarely driven by questionable interests – has also served positive purposes.

South America has acquired a more recognizable identity in recent years, due in part to the urgent need to form alliances based on proximity and common interests.

Several factors have contributed to this increased visibility, among them, the notion of shortened distances due to the greatly improved means of transportation and the extraordinary advent of new means of communication.

The Union of Cardiology Societies of South America (USCAS), now known as the South-American Cardiology Society (SSC), conceived 40 years ago, now joins this movement with great prospects.

The various societies have been showing ever greater interest in using and promoting this union. Over the years, the national congresses have been holding symposiums similar to those of the South-American Society of Cardiology, symposiums that increasingly arouse interest in view of the ever better choice of themes and panel participants.

The inauguration of the sscardio.org portal, on March 15^{th} of this year, constitutes a giant step toward this hope for integration. The web site will serve as a meeting point for the most varied communications and will, without doubt, open the way for the insertion of a great variety of interactive programs.

Conclusion of the Study of Cardiovascular Disease Risk Factors in South America, now about to be published, is a first and wide-reaching step toward the formation of this collection of interactive actions. These actions are certain to be extremely useful for the various sectors involved in cardiovascular health care of our populations. The data made available will serve as reference, pointing to appropriate measures in the prevention of cardiovascular diseases. At this point in time, when degenerative diseases associated with cardiovascular disease – such as obesity and metabolic syndrome, among

others – are increasing in epidemic proportions in developing countries, the findings reported take on an even greater importance.

There are now 22,000 cardiologists enrolled in South American Society of Cardiology, an impressive number even when compared to the large macro-regional or even continental societies. Handled qualitatively and in a fitting manner, such a number must lend due representativity to this contingent in the national scenario. Attempting to contribute to this qualification is one of the future tasks of the SSC.

It is possible to dream of a destiny just as successful as that of other large Continental Societies.

For this to come about, the larger societies have a special share of responsibility. The Brazilian Society of Cardiology is inserted in this context and will certainly respond adequately to the challenge.

In fact, it already does so by appointing a member of this Society to the presidency for the third time. The first two were Dr. Reinaldo Chiaverini and Dr. Rubem Rodrigues.

In addition, the offer to host the SSC web page, using the top quality of our information technology sector, further strengthens this attitude.

The Brazilian Congress of Cardiology, to be held in Recife (Pernambuco) in 2006, will reserve space for the simultaneous occurrence of the South-American Congress of Cardiology.

These are initial steps, but with ongoing interaction and the uniformization of actions, the South-American Society of Cardiology should contribute to configuration of the desired profile of South-American cardiologists. The SSC possible contribution to the harmonization of interests and increased opportunities for post-graduate work should play a relevant role in the near future. Its identification as a possible link with academic institutions should certainly constitute one of its tasks as soon as it has become better organized.

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For all of this to come to pass, we must motivate more representatives to get involved with this concept. In each National Society, the presence of cardiologists, constructive leaderships committed to this process is essential.

The challenge has been made. The means to achieve the goals set are tangible. We hope for more such spontaneous, individual manifestations within the Brazilian Society of Cardiology in order to carry on with this task.