

The Heart Group

2024 GP SYMPOSIUM

PROGRAMME

14 SEPTEMBER 2024

The Heart Group 2024 GP Symposium has been endorsed by The Royal New Zealand College of General Practitioners (RNZCGP) and has been approved for up to 5 CME credits for Continuing Professional Development (CPD) purposes.



The Royal New Zealand
College of General Practitioners
Te Whare Tohu Rata o Aotearoa

Sponsored by :



PROGRAMME

7:30 – 8:00

Coffee

8:00 – 8:05

Opening Introduction

Dr Tom Pasley

8:05 – 10:00

SESSION 1:

Chairperson: Dr Chris Ellis

8:05 – 8:30

ECG quiz

Dr Ivor Gerber and Dr Andrew Martin

8:30 – 8:55

Diabetes drugs and the heart

Dr Ruvin Gabriel and Dr Colin Edwards

There is an increasing recognition that the newer generation of medications developed for diabetes have a big role to play in advancing management of cardiac disease.

Learning aims:

- What are the indications for SGLT2 inhibitors and GLP1 agonists in the setting of cardiac disease
- Outline the cardiovascular benefits of these agent
- How to monitor patients initiated on these agents

8:55 – 9:20

Fits, faints and funny spells

Dr Daniel Chan and Dr Tom Pasley

Episodes of transient loss of consciousness in young people often has a benign clinical course though occasionally can be a harbinger of potentially life threatening pathology.

Learning aims:

- When to be concerned about loss of consciousness in young people
- Which patients with loss of consciousness can be safely evaluated in the community

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9:20 – 9:45

Atrial fibrillation in 2024

Assoc Prof Nigel Lever and Dr Sarah Fitzsimons

Management of atrial fibrillation is a constantly evolving field.

This session will focus on management of atrial fibrillation in 2024.

Learning aims:

- What is device detected atrial fibrillation and how to approach this
- Do all patients need medication for AF?
- Choice of management between a rate and rhythm control strategy
- Longer term follow up of the patient with AF who has had a pulmonary vein isolation – what to watch out for

9:45 – 10:05

Intra: Interventional Cardiology and Electrophysiology

Dr Jonathon White and Dr David Heaven

There is an increasing array of interventions that are performed to aid with management of patients with cardiac disease.

Learning aims:

- Updates for common procedures.
- New developments in atrial fibrillation ablation: pulsed field ablation
- Managing bleeding risk in AF patients: percutaneous left atrial appendage occlusion

10:05 – 10:45

Morning tea

Meet **intra** and THG Cardiologists

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10:45 – 12:30

SESSION 2:

Chairperson: Dr Andrew Martin

10:45 – 11:10

Common issues following cardiac procedures and surgery and how to address these

Dr Wil Harrison and Dr Ruvin Gabriel

Patients are often advised to “see their GP” in 2 weeks after discharge from a cardiac intervention. What exactly are you supposed to be looking for?

Learning aims:

- Common complications to be aware of post cardiac surgery – when to worry and when to reassure
- What medications need review
- Identifying those with psychological issues – a degree of depression is common post a cardiac intervention – how to approach this

11:10 – 11:35

Statin indications and intolerance

Dr Anthony Kueh and Dr Shakiya Ershad

Statins are the second most widely prescribed drugs in the world. They are proven effect in the correct clinical setting, but intolerance is an issue.

Learning aims:

- Indications for a statin in primary prevention and how to target / identify those with maximum benefit
- Statins in elderly and statin reluctant
- Approaching those with statin intolerance who clearly need to be on one

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11:35 – 12:00

Psychoactive drugs and the heart

Dr Jith Somaratne and Dr Boris Lowe

The number of agents that are prescribed from a psychiatric perspective is ever increasing with a need for awareness of cardiac side effects.

Learning aims:

- Stimulant drugs for ADHD and assessment of risk from a cardiac perspective
- Monitoring for cardiac toxicity relating to Clozapine
- Agents that may prolong the QT interval – how long is too long, and how to monitor and manage risk

12:00 – 12:25

Return to work, exercise and sexual activity following cardiac events or procedures

Dr Peter Barr and Dr Cara Wasywich

Returning to normal life activities following a cardiac event or procedure can be daunting for both the patient and clinician.

The inability to do so can be associated with psychosocial interactions with a loss of taha wairua, taha hinengaro and taha whanau.

Learning aims:

- When it is safe to return to work and exercise activity post an acute cardiac event / intervention
- Cardiac medications that may impact on sexual function
- Use of agents to support sexual function

12:30

CLOSING REMARKS

Dr Andrew Martin

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The Heart Group



Dr Andrew Martin



Dr Anthony Kueh



Dr Arthur Coverdale



Dr Boris Lowe



Dr Cara Wasywich



Dr Chethan Kasargod



Dr Chris Ellis



Dr Colin Edwards



Dr Daniel Chan



Dr David Heaven



Dr Fiona Stewart



Dr Ivor Gerber



Dr Jamie Voss



Dr Jen-li Looi



Dr Jith Somaratne



Dr Jonathon White



Dr Kok Lam Chow



Dr Luciana Marcondes



Assoc Prof Malcolm Leggett



Dr Matt O'Connor



Dr Michael Stubbs



Dr Miriam Wheeler



Dr Nezar Amir



Assoc Prof Nigel Lever



Dr Peter Barr



Dr Peter Ruygrok



Prof Ralph Stewart



Prof Rob Doughty



Dr Ross Nicholson



Dr Ruvin Gabriel



Dr Sarah Fitzsimons



Dr Shakiya Ershad



Dr Tim Sutton



Prof Tom Gentles



Dr Tom Pasley



Dr Wil Harrison