

Editorial



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President's Message: 4 Pillars of Korean Society of Heart Failure

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First, I would like to express my deepest gratitude to the members of the Korean Society of Heart Failure (KSHF), a society with 20 years of tradition and development, for giving me the opportunity to serve as the President of KSHF.¹⁾

The Society began as the Korean Heart Failure Study Group under the Korean Society of Cardiology 21 years ago, and subsequently evolved into the KSHF. The efforts of various advisors and dedicated board members, especially former president Seok Min Kang, have greatly contributed to the consolidation of this society.²⁾

In recent years, the prevalence of heart failure has increased dramatically in Korea owing to rapid aging of the population. Subsequently, hospitalizations for heart failure have increased, resulting in a large socioeconomic burden.³⁾ We believe that adequate treatment of patients with heart failure, along with extensive research into this condition, play an important role in essential medical care and in reducing the socioeconomic burden of the disease. I will lead the KSHF's key agenda for the next three years at a critical time when advancements in research are required. We aim to carry out these advances while continuing the successful work of our previous board members.

Below are some of the initiatives I will focus on during my term (**Figure 1**). The remainder of this paper is organized using each letter of KSHF as a theme.

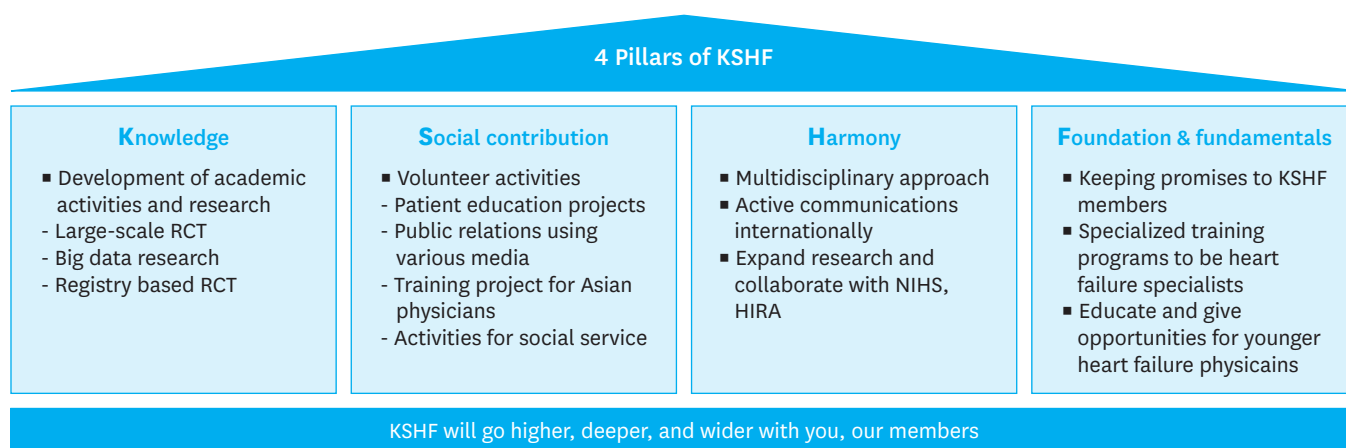


Figure 1. Four pillars of KSHF.

HIRA = Health Insurance Review and Assessment Service; KSHF = Korean Society of Heart Failure; NIHS = National Institution of Health; RCT = randomized controlled trial.

K: The first initiative is further development of academic activities and research, which falls under K for Knowledge. We will inherit Heart Failure Seoul and its many academic activities as an international society, and endeavor to establish KSHF as a stronger and more prominent society for heart failure in Asia. In particular, we will have the necessary research systems to better support registry-based randomized controlled trials (RCTs). We aim to further develop the registries on which we have been working, along with supporting new large-scale RCTs, big data research, policy research, and research conducted by each study group (such as digital, advanced heart failure, and genomic).⁴⁾ We hope that these efforts will aid us in moving heart failure research in Korea to the next level.

S: The second is to contribute to society, which falls under S for Social Contributions. Along with inheriting and continuing previous successful heart failure awareness and public outreach projects, we aim to promote volunteer activities that contribute to society both domestically and internationally, patient education projects, and public relations activities using various media. In addition, we will promote training projects for Korean and other Asian heart failure physicians in line with our international status.

H: The third is to expand harmonious and cooperative exchanges with multidisciplinary, domestic, and international societies, which fall under H for Harmony. Thus far, active exchanges have been crucial for the KSHF internationally. We aim to further solidify and expand our research collaborations, especially with the Korea National Institute of Health, National Health Insurance Service, and Health Insurance Review and Assessment Service.

F: The fourth is to strengthen the foundation of the KSHF, which falls under F for Foundation and Fundamentals. For many societies, one of the most important things is to stay true to the fundamentals of society and engage its members. We are committed to providing specialized training programs for our members to develop them into true heart failure specialists. We seek to continue improving the quality of heart failure care in hospitals, especially by engaging and educating younger heart failure physicians and providing them with opportunities to work with the KSHF. The KSHF actively engages with its members to perform such tasks.

The KSHF is currently in a critical period of youthful activity and increased responsibility. Along with members of the Board of Directors, we aim to strengthen the foundation of the KSHF and further develop this society, laying the foundation for

breakthroughs in the mid- to long-term. In addition, the health-care crisis triggered by the government's unilateral expansion of medical schools,⁵⁾ which began in March, is undermining the status and pride of heart failure specialists responsible for caring for heart transplant recipients and patients with severe heart failure, which is an important part of essential care. I recognize the seriousness of this situation for the KSHF, and believe that that it is time to reflect on and find solutions for the continued development and role of Society. Most importantly, I hope that, together with the Board of Directors and the members of the KSHF, we can work through this crisis. We will do our best to become the "KSHF," which will make great leaps higher, deeper, and wider. We ask for your support and participation in our endeavors as well as your criticism from time to time.

I look forward to the continued success of the KSHF and encourage the active involvements of its members to make solid advances in heart failure. The KSHF is committed to establishing itself as a trusted organization for the heart failure community and a driving force in heart failure care and research.

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Conflict of Interest

The author has no financial conflicts of interest.

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