Mustafa Kemal – President, Turkish Society of Cardiology

As a result of Turkey's high-quality medical treatment, medical tourism is significantly increasing. Patients from all around the world, especially the Middle East, are coming to Turkey for the same world-class standard of healthcare at the cheapest price

24.05.2021

Tags: Turkey, Turkish Society of Cardiology, Cardiology, Healthcare

The president of the Turkish Society of Cardiology, Mustafa Kemal Erol, discusses the prevalence of cardiovascular disease, which accounts for over a third of deaths in Turkey, the improvements made after the 2008 smoking ban, and their work with the healthcare industry and academia to raise awareness and bring the down the number of affected patients.

Can you reintroduce the Turkish Society of Cardiology and its objectives to our readers?

The Turkey Society of Cardiology was founded in 1963 and this year the society is celebrating its 58th anniversary as one of the biggest medical associations in Turkey. The aim of our society is to increase the cardiovascular health of the Turkish population by supporting the scientific research into, and education of, cardiovascular disease in the Turkish population. This is accomplished through a variety of educational activities and collaborations with the Turkish government. Additionally, we support members assessing relevant research in cardiology through financial means if they apply to our society.

What is the current prevalence of cardiovascular diseases in Turkey and what is driving that statistic?

Prior to the COVID-19 pandemic, cardiovascular and circulatory disease were the main cause of death in Turkey. According to 2019 death statistics, 37 percent of the deaths in Turkey were caused by cardiovascular disease, followed by cancer and respiratory disease with 18 and 13 percent, respectively.

This number has decreased from 40 percent in 2015 and has continued to decrease, due to both the smoking ban in 2008 and increased education concerning cardiovascular disease among the Turkish population. This was a very big achievement in public health ceasing smoking activities throughout Turkey's cafes, hotels and other indoor areas.

There is no different reason for the prevalence of atherosclerosis or cardiovascular disease in Turkey compared to other countries. It must be noted that cardiovascular disease is multifactorial, and its causes can be linked not only to smoking but age, high cholesterol, diabetes, obesity and genetics. However, following the 2008 ban on smoking I mentioned, the practice is decreasing and therefore the factors continuing to affect the Turkish population may be high diabetes, low sports activities and obesity.

What is being done to combat cardiovascular diseases in Turkey and do you believe it is enough?

Until the number of deaths caused by cardiovascular disease reaches zero, it will not be enough. Nevertheless, in Turkey there are significant steps being made in the fight against cardiovascular disease including both the smoking ban and public awareness campaigns. Both the Minister of Health and our society are collaborating to bring further awareness to cardiovascular disease in order to increase public education on the matter.

What is an example of some research recently conducted by the Society?

In 2018 the Turkish Society of Cardiology led a research study to understand the pervasiveness of acute myocardial infarction in the Turkish population. Fifty hospitals were studied over 15 days providing a snapshot across different Turkish demographics.

This study was then repeated during the pandemic to observe the decrease of heart attack patients in hospitals. The same study was executed again over 15 days in the same hospitals to compare the registered numbers with those pre-COVID. We detected a 47 percent decrease in the

admission of attack patients in Turkey’s hospitals, almost half of the heart attacks avoiding hospitals during this period likely due to fears of infection risk.

Additionally, patients that did come to hospitals were arriving in the late stages of the sickness and hospitals recorded approximately double the amount of adverse cardiovascular events compared to the pre-pandemic period. These results were announced to the public through television, radio and social media to spread further awareness concerning early detection and treatment of heart attacks as well as reducing the risk of infection at hospitals through the use of masks and social distancing.

Does the Turkish Society of Cardiology work with the private industry in addition to its collaborations with researchers, scientists, and universities?

We have very good relationships with private companies, particularly pharmaceutical and MedTech companies that sponsor our research and offer financial support to research projects for us to, in turn, give them scientific advice in a collaborative manner. They also attend our congresses, meetings, education activities to exhibit their products and give unconditional support to our organization.

What is one of the most important things that you have discovered about cardiovascular disease in the last 10 years?

In general, the Turkish population does not frequently use the services of ambulances, with individuals travelling by car or other means to arrive hospitals in the late stages of the disease. In order to improve this number, we launched a campaign, Please Call 112, the Turkish emergency number. This has seen ambulance use move from 20 percent up to approximately 32 percent in two years, but this campaign is continuing to further improve this figure. We are also conducting educational campaigns regarding early symptom detection for acute myocardial infarction to reduce the number of late-stage arrivals.

How high is the quality of young professionals, doctors and healthcare more generally in Turkey?

In Turkey, there is a high level of medical education with talented cardiologist specialists available for the focus of our society. Furthermore, in the last 15 years, the government has expanded access to labs in every city, with hospitals and educated cardiologists now being able to reach patients within the golden first hour of an attack.

Additionally, the Turkish health system is high quality, with all Turkish people having health insurance and access to both public and private hospitals. The access to knowledge globally has also improved allowing Turkish doctors to easily reach information, not only for simple coronary angiography, stent implantation and pacemaker implantations but also advanced operations such as TAVI (transaortic valve implantation) and MitraClip implantations.

As a result of Turkey's high-quality medical treatment, medical tourism is significantly increasing. Patients from all around the world, especially the Middle East, are coming to Turkey for the same world-class standard of healthcare at the cheapest price.

What are your hopes for the near future?

My hope is that the pandemic will end as soon as possible, and we avoid any mutant strains of the virus that may resist our vaccine efforts and spiral out of control. However, it is comforting to see the health system in Turkey has been able to withstand significant increases in COVID-19 cases and provide the level of care necessary for patients being admitted to the hospital.

See more interviews