## BCS-HRUK Clinical Fellowship: AZ Sint Jan Hospital, Bruges, Belgium

In pursuit of advanced training in interventional cardiac electrophysiology and devices, I was honoured to receive the Heart Research UK-British Cardiovascular Society Clinical Fellowship Award. This prestigious opportunity allowed me to undertake a clinical fellowship at AZ Sint Jan Hospital in Bruges, Belgium—an institution known for its global excellence in cardiac electrophysiology and devices. The objectives of this fellowship were to experience an alternate healthcare model, engage with an international training environment, participate in clinical research, and deepen my exposure to advanced electrophysiological techniques.

My clinical background in the UK provided a strong foundation, but I was eager to broaden my perspective by immersing myself in a different healthcare system. The Belgian public healthcare system, which operates on an insurance-based model with government reimbursement, offered an interesting contrast to the National Health Service. I observed how both patients and doctors navigate this system and the way care is structured around these features. This exposure deepened my understanding of international health policy and its practical implications on service delivery and patient outcomes.

One of the most impactful elements of the fellowship was observing novel electrophysiological techniques rarely performed in the UK. I witnessed Vein of Marshall ethanolization as part of complex atrial fibrillation ablation strategies, particularly in cases of persistent atrial fibrillation. This technique, which involves the targeted ablation of autonomic innervation and fibrotic tissue within the Marshall bundle, is an innovative adjunctive therapy. I also had the opportunity to observe coronary venous ethanolization for ventricular summit arrhythmias—procedures requiring high anatomical precision and multidisciplinary collaboration. These procedures expanded my clinical knowledge and will inform my future practice in complex ablation therapies.

Additionally, I gained insights into the structure of clinical training in Belgium. The training pathway here is generally shorter than in the UK, with earlier subspecialisation. Through discussions with Belgian trainees and consultants, I explored the advantages and challenges of this system, particularly in terms of clinical exposure and research integration, which occurs early in training, with academic publication expected for those with and without doctoral degrees. This comparative view enriched my appreciation for the varied approaches to medical education across Europe.

Research is a cornerstone of the department, and I was privileged to observe a unit that integrates this seamlessly with clinical activity. Their collaborations with both industry partners and academic institutions, facilitate robust, real-world data collection and innovation. I engaged with ongoing projects and discussions around study design, data analysis, and publication planning, reinforcing the vital role of clinical research in advancing patient care.

This fellowship not only enhanced my clinical acumen and technical skills but also reaffirmed the importance of collaborative international learning. The experience at AZ Sint Jan Hospital has been formative, shaping both my clinical perspective and professional aspirations. I will return to the UK equipped with new techniques, fresh insights, and a broader appreciation for the diversity and innovation that characterise global cardiovascular care.



Running Bruges by night after long days in the EP lab



The cycle to the hospital