

Talk with the Docs

Dr. Steven Greenway

So often we know only the cardiologist our child visits at the Cardiology Clinic, but each of the cardiologists has an area of expertise which contributes to the overall care they provide to patients at the Cardiology Clinic. In past issues of "Keeping the Beat", we have featured Dr. Frank Dicke, Dr. David Patton, Dr. Deborah Fruitman, Dr. Robin Clegg, Dr. Joyce Harder, Dr. Kimberley Myers and Dr. Michael Giuffre. In this issue, we are pleased to introduce Dr. Steven Greenway.

You are new to Calgary. Where are you from, and what do you think of our city so far?

Hi! Thanks for the opportunity to introduce myself to your readers. I was born and raised in Winnipeg and remember driving out to Calgary in the summer when I was a kid to visit Banff with my family. A lot has changed since then! Most recently I have lived in Boston and Toronto so living within sight of the mountains is a welcome change of scenery. My family and I are settling in and we all like Calgary very much. We are still discovering all the things that Calgary offers and are enjoying the active atmosphere of Calgary.

How long have you been practicing pediatric cardiology?

I am brand new! I finished my four-year fellowship in June 2012 and started work in September. Fortunately I am well supported here with an experienced group of expert colleagues available for help and advice.

What made you decide to go into pediatric cardiology?

I was very interested in Cardiology in medical school but really liked the environment of a children's hospital. When I discovered that you could do both then I knew that was the career path for me.

What is the biggest challenge and the biggest reward about being a pediatric cardiologist?

Cardiology is probably the most sub-divided specialty in medicine so being knowledgeable and staying up-to-date in all areas is very challenging (if not impossible). Being part of a group of Cardiologists with diverse interests, like we have in Calgary, is very helpful.

I think congenital heart disease is not well known or understood by most people (doctors and the public both!). Dealing with uncertainty (will the hole close? how long will the ventricle function?) and the absence of evidence guiding our practice is also very challenging and can be frustrating. Watching what kids and families go through is humbling and being able to help is very rewarding.

What role will you play at the Cardiology Clinic? Will you focus on or specialize in a certain group of patients?

I have been appointed as a Clinician-Investigator so 50% of my time will involve patient care and the remaining 50% will be spent doing laboratory research. I am interested in the genetics of congenital heart disease so I will be searching for the DNA mutations in children that caused their heart malformation. Trying to make the advances in genomics relevant to the clinic will also be a major focus. My clinical areas of interest are in heart failure and heart transplantation. I will be helping look after the heart transplant patients and hopefully will develop a clinic to support children with decreased heart function.

Thanks to recent advancements in research and technology, children with even complex hearts can reach adulthood. Are there any new advancements on the horizon that you feel will improve the quality of life for heart kids?

Implantable heart pumps (ventricular assist devices or VADs) that support heart function are being widely and successfully used in adults. These pumps are mostly still too large for children but smaller devices are being developed. These pumps may support children whose heart is failing either as a replacement or as a support until a heart can be found for transplantation and allow them to be at home instead of staying in hospital. However, adapting these pumps for children with a single ventricle will be challenging.

I hope that genetics will be of use in the clinic. New technology ("next-generation sequencing") is allowing the rapid (and relatively cheap) reading of a person's entire genome. What to do with all this information is still not clear. Predicting an individual's response to medication ("personalized medicine") would be helpful and may help avoid serious side effects. Using next-generation sequencing to develop "biomarkers" that could signal developing problems would also be useful (for example, telling us when or why a Fontan is "failing"). Genetics may someday tell us why a child was born with a heart malformation and may even be able to predict future problems.

Cardiology Clinic News

Everyone in the Cardiology Clinic would like to wish all of our Heart kids and their families a Happy and Healthy New Year. It is a blessing and a privilege to work with such amazing kids, to be part of their journey and to be inspired by their courage and strength.

All the Best in the Coming Year,

Cardiology Staff

