

## *From the executive editor*

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### News and comment

Robert H. Anderson

With this issue, we now enter our third year of publication. From the editorial side, we are happy to report excellent progress and, as judged by the gratifying review which appeared in the *Journal of the American Medical Association*,<sup>1</sup> that view is shared by our critics. The caliber of papers submitted for publication continues to improve, as does the number. If things continue to proceed at the present pace, we will shortly have to give serious thought to publishing six as opposed to four issues per year. The only alternative would be to hold back articles for publication, and since we are committed to timely publication, such a policy would be as unacceptable to us as to our authors, but first we need the papers!

Further important events await for 1993. We write this introduction having just returned from the *Hong Kong Symposium on Paediatric Cardiology and Paediatric Cardiac Surgery* sponsored by the World Forum for Pediatric Cardiology together with the Hong Kong Cardiological Society and the University of Hong Kong. Thanks largely to the herculean efforts of the local organizers, our editorial board members C. K. Mok and Maurice P. Leung, the entire symposium was a huge success. We were delighted that over 150 delegates registered for the meeting, largely coming from Japan, The Philippines, Indonesia, Malaysia, Korea and Singapore, but with an sprinkling of attendance from Europe, North America and Australia. All agreed that the surroundings for the meeting, and the venues for the banquets, were superb. The only problem with the spectacular weather was that the excellence of the scientific sessions made it difficult to leave the lecture room in favor of the swimming pool. The invited faculty rose to the occasion and regaled the audience with the very latest details of advances in diagnosis and treatment of the various lesions under discussion. These presentations were then matched by the lectures and posters given by the delegates themselves. All of the speakers provided excellent abstracts, so we hope that our readers will get an even better appreciation of the content of the

meeting when we publish the material in our next issue. The success of the Hong Kong symposium, together with that of the First London Symposium, also co-sponsored by the World Forum for Pediatric Cardiology, convinces us of the need to continued to be involved in the arrangement and organization of international meetings. We are pleased, therefore, to be able to co-sponsor the Second London Symposium on *Cardiology in the Young*. This will be held at the National Heart and Lung Institute on March 22nd through 24th 1993. Organized together with the Institute of Child Health, it will address varied topics as advertised elsewhere within this issue. The faculty will be drawn mainly from the United Kingdom, but will be led by Professor Jean Kachaner of Paris and Professor Gaetano Thiene from Padua, both also valued members of our editorial board.

An even larger, and much more exciting, symposium awaits us in June, when the first World Congress to combine the activities of pediatric cardiology and pediatric cardiac surgery will be held. For the pediatric cardiologists, this will be their fourth get-together, having met previously in London, New York and Bangkok. For the pediatric cardiac surgeons, it will be their second reunion following the successful initial meeting in Bergamo.

Now, for the first time, the cardiologists and surgeons will unify their activities in Paris, meeting over a four day period, as advertised elsewhere in this and previous issues. Aply led by Jean Kachaner, and guided by the steering committee, the organizing team has assembled an impressive program, with two main symposiums planned for each morning. The afternoons give ample opportunity for presentation of papers and posters, but potential presenters should not delay, because the deadline for receipt of abstracts is January 15th. Other exciting innovations include meet-the-expert sessions and the display of a video library constructed from submitted tapes. Cardiac pathology will be represented by an exhibition of specimens, with one lesion to be

covered on each of the four days and, as might be expected from Paris, there will be a formidable social program. The abstracts for all the sessions will be published in a special supplement to *Cardiology in the Young*. So, do not miss out on either Paris or *Cardiology in the Young* in June.

But, if we have plans for an extra special issue to greet the congress, our current issue is ably showing the way. The case report, or reports of small series, are often derided when weighing the value of published work. In this issue, we are pleased to collect together no fewer than fifteen examples of reports or small series and, having read them, we hope you will share our view that they offer something for everyone. Moving from a small remnant of liver masquerading as a spleen in a patient with isomerism, through examples of division of the left atrium and absence of the leaflets of the pulmonary valve, unusual collateral arteries in tetralogy of Fallot with pulmonary atresia, rheumatic fever in an undernourished child, to resonance imaging of a mycotic

aneurysm and still other rarities and cases of interest, the lesions described cross the full spectrum of cardiology in the young. These multiple case reports are complemented by five more substantial original articles and a special review arguing coherently for the benefits of transesophageal echocardiography in the pediatric population. We trust, therefore, that you, our readers, will be stimulated by these articles to send us your own best work. As we stated in our first issue, the caliber of the Journal will stand and fall on the quality of the submitted articles. Thus far we are doing well. We can do still better, but only with your help.

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#### Reference

1. Eldredge JD, Fripp RR. Pediatric Cardiology—Cardiology in the Young. *J Am Med Assoc* 1992; 268: 1474.