From the Editor-in-Chief

'N MY COMMENTS PUBLISHED IN THE JUNE ISSUE OF the journal,¹ I promised to bring you news of the hand-over of editorial responsibility in the August issue. As it happened, instead of bringing you this information, which at that stage was still maturing, I chose instead to delegate my responsibilities to Christo Tchervenkov, Jeff Jacobs, and Richard Jonas, who gave you a detailed account of the initial historic meeting of the new World Society for Pediatric Cardiac Surgery.² I write these comments as I return from the 43rd meeting of the Japanese Society for Pediatric Cardiology and Pediatric Cardiac Surgery, and I am now in the position to provide the news I promised for the August issue. I start my comments, however, with a sad heart, since whilst in Tokyo I was informed by Ed Bove of the recent tragedy that befell the transplant team at Ann Arbor, who lost an entire harvest crew, along with the pilots, when a plane bringing a donor organ back to Ann Arbor crashed on take-off in Lake Michigan, having procured the organ. Elsewhere in this issue, Ed has provided a touching obituary for David Ashburn, a remarkably talented young cardiac surgeon within his group who was just commencing his career.³ I knew of David through his writings on behalf of the Congenital Heart Surgeon's Society, in which organisation he was the initial John Kirklin fellow. Sadly, we will no longer be able to benefit from his huge potential. In discussions in Tokyo, Ed also informed me that, from 2000 until the present, in the United States of America, there have been 85 crashes with 70 deaths involving rotor wing transports, and 15 crashes with 34 deaths on fixed wing aircraft, albeit that, apart from the crash in Lake Michigan, none of these fatalities were directly related to procurement of organs. As Ed commented to me, nonetheless, these statistics are "pretty staggering", the more so since he is aware of other fatalities occurring in direct relation to procurement of organs elsewhere in the World, even though precise statistics are unavailable. The price we pay to take advantage of the huge advances in medical treatment can, indeed, be considerable.

I had not appreciated until arriving in Tokyo that the meeting I was attending was a joint one between the Japanese paediatric cardiologists and their paediatric cardiac surgeons. On asking an old friend, Yasunaru Kawashima,⁴ when he had been President of this illustrious joint society, he told me that, in fact, it had not always been a joint society. The invitation for the surgeons to join had come relatively late in his own career, and he had never served as President. It must still be a fact, nonetheless, that our Japanese colleagues were the first to join together their societies so as to cater in collaborative fashion for the cardiological and surgical disciplines. I am certainly unaware of any older joint society, and during discussions in Tokyo, none of my other colleagues could identify an alternative candidate. Christo, Jeff, and Richard, in their comments published in the last issue,² had indicated their own hopes that the newly formed World Society of Pediatric Cardiac Surgery would eventually transform itself into a World Federation of all disciplines working in the field. It is certainly the case that the Association for European Paediatric Cardiology has been enriched since it opened its portals to practitioners working in all disciplines. The success achieved by our Japanese friends, and by the European Association, matched also by the achievements of the British Congenital Cardiac Association, shows that such an approach is optimal, but for sure it will take time to come to fruition on a worldwide basis.

With regard to the future editorial policy of the Journal, by the time you read these comments, I will have officially retired from my position as Professor in the University of London. I am pleased to announce that, from the next issue, overall control as Editor-in-Chief will be assumed by my long-term friend and colleague, Ted Baker. Ted has been executive editor for the last few years, and prior to that had served on the editorial team of Pediatric Cardiology. He also joined me as editor for the second edition of our textbook, Paediatric Cardiology, and is presently working with our other colleagues as we prepare the third edition. He has a good track record, therefore, in editorial aspects of publishing. He is currently the Medical Director of Guy's and St Thomas' Hospitals in London, as well as continuing his practice as a paediatric cardiologist, so he is equally versed in administrative and management activities. At our meeting in London in April, Gil Wernovsky also committed himself to continue as our Supplements editor. The most recent results of his activities are seen in the magnificent supplement, published in concert with this issue, which contains the best material in manuscript form presented by those speaking at the conferences held in St Petersburg and Orlando in February of this year. Gil is committed to continue to produce supplements of this quality, which gives us much to look forward to. The other major step forward with our editorial approach will be the shift, at the beginning of 2008, to electronic submission and tracking of manuscripts. It is likely that the establishment of an electronic database, which can be accessed by the editorial team from any site, will then also permit us to extend our editorial presence in the United States of America, but details of this have still to be finalised. All of the editorial team, however, are currently undertaking the necessary training to ensure that the new system works, since it will have a hard act to follow if it is to match the efficiency with handling of manuscripts provided by our long-standing editorial assistant, Felicity Gil. I am pleased to announce that, in the first instance, Felicity will retain her role as editorial assistant, and will do her very best to ensure that Gil and myself are able to help Ted as he takes over the reins as Editor-in-Chief. I will maintain my own commitment to the journal as Emeritus Editor. In this role, I will be on hand to provide Ted with whatever assistance he considers necessary, and I will retain responsibility for the stylistic and grammatical content of the published papers.

During the meeting in Japan, which was immediately followed by a meeting of the Nomenclature Working Group, which I was privileged also to attend, I was told in no uncertain terms by Giovanni Stellin that my insistence of using English rather than Latin words offended the sensibilities of those such as himself who consider Latin to be a more elegant language. It remains my own conviction that our English language, or its American version, has improved by moving with the times. This has meant that the majority of the Latin words on which a good part of our language is based have now been anglicised when used in the vernacular setting. I am equally convinced that such Anglicisation of anatomical terms will, in the fullness of time, lead also to improved communication, and will remove grammatical solecism. At the same time, I recognise the strength of feeling held by Giovanni and others who share his views. I should emphasise, therefore, that whenever I send manuscripts back for approval prior to setting proofs, I always ask the authors if they are comfortable with my editorial changes. Thus far, no author has requested reversion to Latin alternatives – but that might simply reflect their reticence to argue with the Editor-in-Chief, whose decision is, of course, final. It would be equally sad, however, if those holding the opposite views to my own were deterred from submitting manuscripts because of my policy of Anglicisation. I shall be discussing this issue with Ted, since now it is his word which will be final! Any who have strong opinions on this issue, nonetheless, should feel free to request that we retain their preferred Latin nomenclature.

In stepping down as Editor-in-Chief, I should close by stating that it has been a privilege and pleasure for me to have edited the journal from its birth. The recent improvements in the Journal, not least the doubling of our impact factor in the last year, point towards even bigger and better things to come. I know that I leave the editorial control in very safe hands.

> Robert H. Anderson Editor-in-Chief

References

- 1. Anderson RH. From the Editor-in-Chief. Cardiol Young 2007; 17: 241-242.
- Tchervenkov CI, Jacobs JP, Jonas R. The World Society for Pediatric and Congenital Heart Surgery. Cardiol Young 2007; 17: 339–341.
- 3. Bove E. Obituary David Ashburn. Cardiol Young 2007; 17: (in this issue).
- Uemura H. The Paediatric Cardiology Hall of Fame Yasunaru Kawashima. Cardiol Young 2003; 13: 84–94.