Cardiology without borders

Cardiovascular disease takes place in a border-free world. The challenge at the American College of Cardiology (ACC) and anywhere else in the world is to hold patient care above the artificial barriers raised by geopolitical issues. Fundamentally, the goal of ACC members or of any cardiology societies in the world is to provide excellent patient care. Cardiovascular disease is essentially the same throughout the world. Where there are minor variations among individuals, as clinicians we find priceless opportunity to learn. Expanding — rather contracting — our experience base helps us as individuals to realize our best potential as practitioners.

The ACC has always had an international perspective. In fact, more than 10% of its members practice outside the U.S. Clinical and educational contributions from the international members continued to be highly prized and eagerly integrated in the College thinking. Indeed, many important cardiovascular scientific discoveries have been made away from the U.S. shores. The Journal of the American College of Cardiology has benefited greatly from our international colleagues commitment to research. Every issue of the twice-monthly publication counts more than 60% of its contributed articles from international researchers. Generously sharing our knowledge dramatically improves patient care wherever we call home. This is why fostering international dialogue and encouraging a free flow of information have become priorities for the ACC and its president. Global science depends on our collective good will, cooperation, and dedication. The ACC values its professional relationship with colleagues around the world.

Last month, a team of faculties from the American College of Cardiology and I were honored to visit the Institute of Geriatric Cardiology of the Chinese PLA General Hospital in Beijing. There I met Professor Shiwen Wang and her dedicated team of cardiovascular specialists. As colleagues, we start naturally our friendship and cement our international fellowship.

This month, in the second issue of the Journal of Geriatric Cardiology (JGC), the ideal of scientific discussion and dialogue is not only honored but literally practiced. For each original article from China, there is an editorial from an US clinician or researcher and vice versa. This is real-life academic exchange and first-class scientific practice. When I mention that we should focus on things that bring us together rather than issues that pull us apart, that is on the social issues. However, when we talk about leading-edge science and research, then we show each other what we have in differences: perspective, point of views or scientific research results. Similarities unite us and differences enrich us. These differences will stimulate more creative thinking, foster greater improvement and at the end, lasting progress. This is the working principle of the Journal of Geriatric Cardiology: to be a Forum for Idea Exchange and Innovation.

I congratulate Professor Shiwen Wang and her international editorial team at the publication of the second issue of the JGC. I hope the Journal of Geriatric Cardiology will make important contribution to the scientific discussion and international collaboration against cardiovascular disease and multi-organ failure.

Michael Wolk, MD, F.A.C.C.
President of the American College of Cardiology

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Journal of Geriatric Cardiology comes to press with a new look

On behalf of all the editors and editorial board members, I would like to announce that the inaugural issue of the Journal of Geriatric Cardiology (JGC) was published after over two years of preparation, and the JGC will be continuously published. The JGC was born in accordance with the tough challenge of higher prevalence of cardiac diseases and/or complicated with other organ diseases in the elderly accompanied by the rapid growing number of the aged. Basing on the current conditions, we provide this forum for exchanging opinions in geriatric
medicine worldwide, especially when China has a much higher status in the world and geriatric cardiology in China is progressing at a fast rate.

In October 2003, we held an editorial board meeting in the Institute of Geriatric Cardiology, PLA General Hospital, Beijing and over 50 people came to that meeting. The initial name of this journal at that time was called the Journal of Geriatric Cardiology and Multiple Organ Medicine. However, the final name of Journal of Geriatric Cardiology came into being after serious consideration and discussion across several countries. In view of the advice of leading experts that multiple organ diseases belong to the specialty of surgery and intensive care medicine in the western world, the name Journal of Geriatric Cardiology may more readily be accepted in the international cardiovascular field.

The JGC features the following three points:

(1) It is organized and financially sponsored by the Institute of Geriatric Cardiology and edited by excellent Chinese and American editors and doctors. All manuscripts are to be reviewed by editors and experts in two editorial offices, which are located in the Institute of Geriatric Cardiology, Beijing and St. Mary Medical Center, USA, respectively.

(2) Physicians from western countries are invited to address editorial comments for papers written by authors in China or other Asian countries, and vice versa. The papers and comments will be published in the same issue.

(3) Considering the fact that the aged are apt to contract many diseases, especially heart diseases complicated with multiple organ involvement, we set up a special column of "Multiple Organ Diseases", in which papers concerning both clinical and basic researches of heart and other organ diseases in the elderly have the priority to be published.

The birth of the journal is hard, just like that of a newborn baby. Its name, column content and cover design were discussed repeatedly by Chinese and overseas experts. We have received help from many friends and colleagues, especially Professor Qi FANG in PUMC Hospital and Professor Eugene Braunwald in Harvard University. Professor Eugene Braunwald wrote the foreword and Professor Qi FANG also wrote an editorial for the first issue (both are republished in this issue). In March 2003 and March 2004, we held two small editorial board meet-ings in Chicago and New Orleans respectively during the ACC scientific session to discuss the journal’s goal and the contents for publishing. Professor Eugene Braunwald participated in the meetings (see photo on page 76).

We thank Professors Zhongxiang LIN, Zhuming JIANG, Junheng LI for their generous help. We thank Dr. De WANG and Dr. Yongmao JIANG, director and associate director of the Publishing House, Chinese Medical Association. We also thank Dr. Thach Nguyen, St. Mary Medical Center, USA for his generous contribution; Drs. Samuel Shubrooks and Brian Olshansky for their organizing the symposium issue for next year.

Due to the changes of the journal’s name and the corresponding goal and related research field, we will also make some changes in the constitutes of editorial board members in the near future. The new editorial board members will be mainly cardiovascular doctors. Some experts in emergency medicine and surgery will be also added appropriately.

The JGC is not perfect yet, just like anything else when it is in the growing period. It is hopeful that with all of your nourishing and support, the JGC will advance to a much higher level as soon as possible. We have made the short-term and long-term goals and plannings for the journal. We hope that you will keep on supporting this journal in the future.

I hope that all the editorial board members and experts will submit one to three manuscripts each year to our journal. Also, all your colleagues and friends in the related specialties are welcome to write for the journal, both articles and comments. I believe that the JGC will contribute to the intercommunication of geriatric cardiology worldwide, especially to make the most current progress in geriatric cardiology and multiple organ diseases in China known to the world.

We express sincere thanks to all of you for being present at the ceremony.

(This article is the speech at the ceremony and is translated from Chinese, see photo on page 76.)

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