

Original Article

Cardiology in the Young: Where we have been. Where we are. Where we are going.

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Abstract *Cardiology in the Young* is devoted to cardiovascular issues affecting the young, and older patients with congenital heart disease, or with other cardiac diseases acquired during childhood. The journal serves the interests of all professionals concerned with these topics. By design, the journal is international and multidisciplinary in its approach, and members of the editorial board take an active role in its mission, helping to make it an indispensable reference for paediatric and congenital cardiac care. All aspects of paediatric and congenital cardiac care are covered within the journal. The content includes original articles, brief reports, editorials, reviews, and papers devoted to continuing professional development. High-quality colour figures are published on a regular basis, and without charge to the authors. Regular supplements are published containing the abstracts of the annual meetings of the Association for European Paediatric and Congenital Cardiology, along with other occasional supplements. These supplements are supplied free to subscribers.

The vision of *Cardiology in the Young* is to use print and electronic media to improve paediatric and congenital cardiac care.

The mission of *Cardiology in the Young* is to be a premier global journal for paediatric and congenital cardiac care – an essential journal that spans the domains of patient care, research, education, and advocacy, and also spans geographical, temporal, and subspecialty boundaries.

Cardiology in the Young was officially launched in December, 1990. The late Lucio Parenzan was Editor-in-Chief from 1990 through Volume 4, Number 1, January 1994. Professor Robert Anderson and Giancarlo Crupi then shared the Editor-in-Chief position until the end of 1995. Then, from 1995 through 2007, Professor Robert Anderson served as the sole Editor-in-Chief of *Cardiology in the Young*. Edward Baker, MD, FRCP, FRCPC, served as Editor-in-Chief of *Cardiology in the Young* from 2007 to 2013. In January, 2014, Jeffrey P. Jacobs, MD, FACS, FACC, FCCP, became Editor-in-Chief of *Cardiology in the Young*.

Jeffrey P. Jacobs, MD, FACS, FACC, FCCP is Director of the Andrews/Daicoff Cardiovascular Program at Johns Hopkins All Children's Heart Institute and Professor of Cardiac Surgery in the Division of Cardiac Surgery of the Department of Surgery at Johns Hopkins University. He is also Surgical Director of the Heart Transplantation Program and Director of the Extracorporeal Life Support Program at Johns Hopkins All Children's Heart Institute. Dr Jacobs has been a cardiothoracic surgeon at All Children's Hospital since 1998.

Keywords: *Cardiology in the Young*; future; mentorship

Received: 13 October 2014; Accepted: 13 October 2014

ON 1 JANUARY, 2014, I HAD THE HONOUR OF beginning my tenure as Editor-in-Chief of *Cardiology in the Young*. As the 1st year of my leadership comes to an end, I would like to use this paper to achieve the following objectives:

- formally acknowledge the founders and former Editors-in-Chief of *Cardiology in the Young*;
- introduce the new Editorial leadership team of *Cardiology in the Young*;
- emphasise the importance of the relationship of *Cardiology in the Young* with The Association for European Paediatric and Congenital Cardiology (AEPC);
- discuss the new relationship of *Cardiology in the Young* with The International Society for Nomenclature of Paediatric and Congenital Heart Disease (ISNPCHD); and
- describe potential new relationships with The Pediatric Cardiac Intensive Care Society (PCICS) and The World Congress of Paediatric Cardiology and Cardiac Surgery (WCPCCS).

Cardiology in the Young is devoted to cardiovascular issues affecting the young, and older patients suffering from congenital heart disease, or other cardiac diseases acquired during childhood.¹ The journal serves the interests of all professionals concerned with these topics. By design, the journal is international and multidisciplinary in its approach, and members of the editorial board take an active role in its mission, helping to make it an indispensable reference for paediatric and congenital cardiac care. All aspects of paediatric and congenital cardiac care are covered within the journal. The content includes original articles, brief reports, editorials, reviews, and papers devoted to continuing professional development. High-quality colour figures are published on a regular basis, and without charge to the authors. Regular supplements are published containing the abstracts of the annual meetings of the Association for European Paediatric and Congenital Cardiology, along with other occasional supplements. These supplements are supplied free to subscribers:

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Founders and former Editors-in-Chief of *Cardiology in the Young*

Cardiology in the Young was officially launched in December, 1990. It is a fact that *Cardiology in the Young* would simply not exist today if not for the foresight and vision of our Emeritus Founding Editors:²

- Professor Robert H. Anderson, University College, London, United Kingdom.
- Dr G. William Henry, University of North Carolina at Chapel Hill, United States of America.

Cardiology in the Young was officially launched in December, 1990. The late Lucio Parenzan was Editor-in-Chief from 1990 through Volume 4, Number 1, January 1994. Professor Robert Anderson and Giancarlo Crupi then shared the Editor-in-Chief position until the end of 1995. Then, from 1995 through 2007, Professor Robert Anderson served as the sole Editor-in-Chief of *Cardiology in the Young*. *Cardiology in the Young* is indebted to the late Lucio Parenzan and also to Giancarlo Crupi for his tireless efforts in assisting Lucio Parenzan with the editorial responsibilities in Bergamo.

In 1999, Professor Robert Anderson invited Edward Baker, MD, FRCP, FRCPC, to become Executive Editor of *Cardiology in the Young*. Ted Baker eventually succeeded Professor Anderson as Editor-in-Chief in 2007, stepping down from this role at the end of 2013.³ Under the leadership of Ted Baker, Allen D. Everett, MD, FACC, FSCAI, FAPS, was Associate Editor for Cardiology and I was Associate Editor for Surgery.

I am now truly honoured to follow Ted Baker as Editor-in-Chief, beginning in January, 2014.

In November of 2013, before beginning my term as Editor-in-Chief of *Cardiology in the Young*, my initial acts were to assure the continued ongoing involvement of Bob Anderson, Bill Henry, Ted Baker, and Allen Everett. I am very pleased that all four of these leaders will continue their active roles in *Cardiology in the Young*. Ted agreed to remain on our Editorial Board as Past Editor-in-Chief. Bob and Bill agreed to continue to contribute to *Cardiology in the Young* as Emeritus Founding Editors with the responsibility for commissioning and production of reviews. Allen Everett agreed to accept the new position of Senior Associate Editor.

The contributions of Bob Anderson, Bill Henry, Ted Baker, and Allen Everett are notable and important. I am truly honoured to follow in their footsteps and try to maintain their legacy. I would like to take this opportunity to pay tribute to Bob Anderson, Bill Henry, Ted Baker, and Allen Everett. These four individuals have truly advanced the science and art of paediatric and congenital cardiac care!

Professor Robert H. Anderson: Emeritus Founding Editor of *Cardiology in the Young*



I would like once again to congratulate Bob Anderson for his ability to remain energetically and intimately involved in the academic world of professionals caring for patients with congenitally

malformed hearts, even after his official so-called “retirement”. I would again like to thank Bob for his support, friendship, mentorship, professional guidance, and advice over the past 16 years. Bob has played a major role in the development of my own career, and I am appreciative for all that he has done for me. He placed an amazingly high level of trust in me when I was very young, and I appreciate this support. Bob has also been a strong supporter and advocate of our programme at Johns Hopkins All Children’s Heart Institute for quite some time. In February of 2015, Bob will be a featured speaker at our annual February meeting hosted by All Children’s Hospital for the 14th consecutive year (*Johns Hopkins All Children’s Heart Institute 15th International Symposium on Congenital Heart Disease, Friday February 6, 2015 to Monday February 9, 2015, Co-Sponsor: The American Association for Thoracic Surgery (AATS)*). At our meeting, every day for the past 13 years, we have started our sessions with an anatomy lesson from Bob. On a daily basis, he sets the stage for the rest of the day, and raises the academic level of our meeting. I am a better person because of the mentorship that I have received over the years from Bob Anderson, and I am thankful!

Although he “retired” several years ago from his position as Professor of Paediatric Cardiac Morphology at the Institute of Child Health in London, Bob Anderson remains active in the fields of teaching and research relative to the normal and the congenitally malformed heart. Often considered to be trained as a cardiac pathologist, his training in fact was in human cardiac anatomy. It was his extensive collaboration with Anton Becker, from the University of Amsterdam, that provided most of his insights into the structure of the heart when congenitally malformed. It is fortunate, perhaps, that most of the problems afflicting the congenitally malformed heart are anatomical rather than pathological. Access to Anton’s huge knowledge, nonetheless, proved invaluable in emphasising the importance of also taking note of additional pathological changes. Professor Anderson had studied cardiac development during his initial training in human cardiac anatomy. On returning to the United Kingdom from his training in the Netherlands, however, he was fortunate to be appointed at the Brompton Hospital, where for 25 years he was privileged to work as a clinical cardiac anatomist. During this period, influenced by his clinical colleagues, he tended to eschew developmental hypotheses when describing and diagnosing the lesions found in congenitally malformed hearts, believing the evidence relating to cardiac development, at that time, to be insufficiently robust to substantiate the concepts often being advanced to explain the anomalies.

All this has now changed. The impetus of his ongoing research subsequent to his alleged “retirement” has been focussed very much on the developing heart. This opportunity has been greatly enhanced by his appointment as Visiting Professor to the Institute of Genetic Medicine at Newcastle University, working with Deborah Henderson and Bill Chaudhry. It has also been made possible by his ongoing collaborations with Tim Mohun, at the National Institute of Medical Research in London, and with Nigel Brown at St George’s Medical University, also in London. The availability of large numbers of data sets prepared from developing mice and human hearts using episcopic microscopy, and the potential to examine these data sets in any desired plane, has brought to the forefront again the importance of his accrued anatomical knowledge. The possibility to investigate congenital cardiac lesions in genetically modified mice also now permits him to take advantage of the extensive experience gained in the description of these lesions in human hearts.

During the latter part of his career, before retirement, Professor Anderson shifted his centre of activity from the National Heart and Lung Institute, at Royal Brompton Hospital in London, to the Institute of Child Health, at Great Ormond Street Hospital. He made this change so as to focus on education, as well as to continue his research. He has been fortunate to continue this emphasis on education subsequent to retirement. Thus, in the immediate aftermath of his retirement, he was invited to take up a position as Visiting Professor of Pediatrics at the Medical University of South Carolina, in Charleston. This appointment continues. His presence as an educator in the United States of America, specifically through the excellent opportunities provided by attendance at the symposiums organised on an annual basis by All Children’s Hospital and Johns Hopkins All Children’s Heart Institute in Saint Petersburg, Florida, led to an important invitation to teach and research at Children’s Memorial Hospital in Chicago. This collaboration also continues, although the hospital itself has been now rebranded as Ann & Robert H. Lurie Children’s Hospital of Chicago. Through his ongoing collaborations with Andrew Redington and Dan Penny, who were, in the past, his colleagues at the Royal Brompton and Great Ormond Street Hospitals, Professor Anderson now also enjoys regular teaching commitments in Toronto and Houston. He has also resumed his old and important collaborations with colleagues at Pittsburgh Children’s Hospital; the ongoing friendship of Professor Anderson with Jay Fricker, initially established in Pittsburgh, now resulted in a Visiting Professorship at the University of Florida in Gainesville.

Throughout his career, an important part of his activities was involvement in editorial activities. Initially the editor of the International Journal of Cardiology, Professor Anderson was delighted when, with the introduction of “*Cardiology in the Young*”, he was invited by Bill Henry to join the editorial team. He subsequently became Editor-in-Chief and fulfilled this role until the time of his official “retirement”. Bob is now delighted to be able to rejoin the editorial team, with Bill and Bob taking responsibility for review articles. Equally important in his editorial role has been his ongoing involvement with “Paediatric Cardiology”, now in its third edition, and “Surgical Anatomy of the Heart”, now appearing in its fourth edition as “Wilcox’s Surgical Anatomy of the Heart”.⁴ Bob is hopeful for ongoing opportunities to add to his research, educational, and editorial portfolios.

Dr G. William Henry: Emeritus Founding Editor of *Cardiology in the Young*



I would like to thank and acknowledge Bill Henry for his continued passionate commitment to *Cardiology in the Young*. *Cardiology in the Young* was officially launched in December, 1990 under the leadership of Bill Henry and Bob Anderson. As a new Editor-in-Chief, I am very thankful to have the ongoing support, involvement, and mentorship of Bill and Bob, as well as Ted Baker. This active link and legacy makes one realise that we are all part of something greater than ourselves and our current era. I thank Bill Henry for his continued involvement with *Cardiology in the Young* and his ongoing mentorship and support!

Although Bill's entire cardiology career has been centred in North Carolina, he chose an international approach during training, and it was while at the Brompton Hospital in London during the early 1980s that he first met Bob Anderson. His first position following cardiology training was an academic faculty appointment at the University of North Carolina. There he teamed with Carol Lucas, the first chair of the Department of Biomedical Engineering at the University of North Carolina, to create a productive and multidisciplinary research team focussed on understanding the maturational changes of the pulmonary circulation, and on studying the effects of pulmonary hypertension and congenital heart disease on the pulmonary circulation, while being an active clinical member of the division of paediatric cardiology.

Bill's clinical and academic endeavours prompted his appointment as chief of paediatric cardiology at the University of North Carolina at the age of 35. In this role, Bill maintained his national and international collaborative relationships that helped shape his approach to academic paediatric cardiology. With the resultant growth of the clinical paediatric cardiology programme, he obtained sufficient support within the constraints and tensions of an academic medical centre to form the North Carolina Children's Heart Center in 2004, where he served as its founding director.

While at the University of North Carolina, in 1988, Bill approached Bob Anderson in London about starting an interdisciplinary, internationally organised journal devoted to cardiac disease in the young, and was met with immediate enthusiasm. Bill and Bob subsequently devoted efforts to securing the requisite international participation and support, whereby *Cardiology in the Young* was officially launched in December, 1990. As originally planned, the international character and scope of the journal has remained a persistent strength. What is less well known is that the first 3084 pages of *Cardiology in the Young* were in fact typeset by Bill in Chapel Hill, using the first available desktop publishing software, and were printed in Hong Kong, after Bill found the necessary specialised colour offset printing capabilities in the back streets of Kwun Tong. The fonts and layout formats originally designed by Bill persist in *Cardiology in the Young* today.

Retiring recently from academic paediatric cardiology after 32 years, Bill formed the only independent private practice of paediatric cardiology in North Carolina, permitting him to enjoy the freedom to organise and to advocate for clinical care on his own terms, as well as allowing him to continue to participate in ongoing international collaborations.

Edward Baker, MD, FRCP, FRCPCH: Past Editor-in-Chief of *Cardiology in the Young*



On a personal note, I would like to thank Ted Baker for his awesome leadership as Editor-in-Chief of *Cardiology in the Young*. In 1999, Professor Robert Anderson invited him to become Executive Editor of *Cardiology in the Young*. Ted Baker eventually succeeded Professor Anderson as Editor-in-Chief in 2007, stepping down from this role at the end of 2013. It has been a true pleasure for Allen Everett and me to serve as Associate Editors of *Cardiology in the Young* and collaborate with Ted. Under the leadership of Ted, I served as Associate Editor of *Cardiology in the Young* from 2009 to 2014, and Allen served as Associate Editor of *Cardiology in the Young* from 2010 to 2014. In September, 2011, Ted hosted a delightful dinner in Cambridge immediately before the Seventh Annual Meeting of The Multi-Societal Database Committee for Pediatric and Congenital Heart Disease: "Meeting Theme: The relationship between Outcomes Analysis, Quality Improvement, and Patient Safety". Ted is a true pleasure as a collaborator – a true gentleman. From Ted, I have learnt a great deal about leadership, academics, and editorial style.

Ted Baker trained in medicine in Cambridge and London. His interest in cardiovascular science began when, as part of this training in 1979, he experienced the early development of coronary angioplasty and cardiac transplantation while on attachment to the Cardiovascular Medicine service at Stanford Medical Center.

After qualifying, Ted initially trained in general paediatrics. It was when Michael Tynan, who led the paediatric cardiac service at Guy's Hospital in

London, encouraged him to specialise in paediatric cardiology that the course of Ted's career was set. Guy's was a relatively small paediatric cardiac unit at that time, but under Tynan's leadership it was one of the most innovative services in Europe. It was a period of incredible change, with major advances in the interventional treatment of congenital heart disease, the surgical repair of cardiac anomalies, the diagnosis and management of congenital heart disease before birth, the medical management of the critically ill neonate, and in postoperative care. Guy's unit was at the forefront of all these developments, and Ted was hugely fortunate to be a part of all of them. However, Ted focused on the rapid developments in imaging of the heart. Initially, this was the development of cross-sectional and then Doppler echocardiography and of radionuclide imaging, but eventually, the introduction of magnetic resonance imaging into the study of congenital cardiac anomalies became his major focus of work.

Ted spent a year as a visiting professor at the Children's Hospital of Pittsburgh in 1986. While there, he initiated a programme of magnetic resonance studies of the heart, demonstrating the value of the techniques in a range of congenital cardiac conditions. He returned to Guy's as a consultant paediatric cardiologist in 1987. In the years after this, the clinical and academic activity of Guy's unit grew consistently, and Ted led a programme of recruitment of one of the best teams of paediatric cardiologists, cardiac surgeons, and intensivists in the United Kingdom. Because of his leadership and initiative, the unit at Guy's was the first in the United Kingdom to recognise the need for paediatric cardiologists to subspecialise in particular areas of practice.

In 1993, Guy's merged with its neighbouring hospital, St Thomas' in London. Ted was made chief of all the children's services in the merged institution and then later became the chief of women's and children's services. He recognised the need to bring together the services from the two hospital sites and worked tirelessly to achieve this objective. He was rewarded when the new combined maternity unit was established at St Thomas' and then when the new Evelina Children's Hospital, the first new children's hospital in London for 100 years, opened in 2005.

In 2003, Ted was made Medical Director of Guy's and St Thomas', and led the two hospitals through an extraordinary 7 years during which they built a reputation as one of the leading academic medical centres in the United Kingdom. Through all this time, he worked on a daily basis as a clinical paediatric cardiologist and continued to lead a research programme in cardiac magnetic resonance imaging. The research team grew into a leading cardiovascular imaging centre at King's College London. Ted has authored numerous research papers and textbooks, and was from 1989 to 1999 Associate

Editor of the journal *Pediatric Cardiology*. When he stepped down from this post, Professor Robert Anderson invited him to become Executive Editor of *Cardiology in the Young*. He eventually succeeded Professor Anderson as Editor-in-Chief in 2007, stepping down from this role at the end of 2013.

Ted moved to Oxford in 2010 to become Medical Director there, and over the last 4 years he has worked with the hospitals and universities in Oxford to help them fulfil their full potential as a major clinical and biomedical research centre. Now, in 2014, he has moved to a national role and has been appointed Deputy Chief Inspector of Hospitals for England.

The new Editorial leadership team of *Cardiology in the Young*

Jeffrey P. Jacobs, MD, FACS, FACC, FCCP,
Editor-in-Chief of *Cardiology in the Young*



Jeffrey P. Jacobs, MD, FACS, FACC, FCCP, is Director of the Andrews/Daicoff Cardiovascular Program at Johns Hopkins All Children's Heart Institute and Professor of Cardiac Surgery in the Division of Cardiac Surgery of the Department of Surgery at Johns Hopkins University. He is also Surgical Director of the Heart Transplantation Program and Director of the Extracorporeal Life Support Program at Johns Hopkins All Children's Heart Institute. Dr Jacobs has been a cardiothoracic surgeon at All Children's Hospital since 1998.

Dr Jacobs has been a member of the Editorial Board of *Cardiology in the Young* since 2003. In 2009, he was appointed Associate Editor for Surgery and Supplements Editor. Since 1 January, 2014, Dr Jacobs has been Editor-in-Chief of *Cardiology in the Young*, one of the most widely read journals dedicated to paediatric and congenital cardiac care. Dr Jacobs is also an Associate Editor of the World Journal for Pediatric & Congenital Heart Surgery and serves as a member of the Editorial Board of this important journal.

Dr Jacobs received his Bachelor's Degree (Summa Cum Laude) from the University of Miami, where he was elected to Phi Beta Kappa. He received his Medical Degree from the University of Miami School of Medicine through the Honors Programme in Medicine. At the University of Miami School of Medicine, Dr Jacobs was elected to the Alpha Omega Alpha Medical Society and graduated as a Doctor of Medicine with Distinction in Research 1988. He then completed a 5-year residency in General Surgery followed by a 2-year residency in Thoracic and Cardiovascular Surgery at the University of Miami/Jackson Memorial Medical Center. Dr Jacobs spent an additional year at the University of London in England training in paediatric cardiothoracic surgery at Great Ormond Street (GOS) Hospital for Sick Children; this Paediatric Cardiac Surgery Fellowship was through the Overseas Doctors Training Scheme of The Royal College of Surgeons of England. His training at GOS was under the leadership and mentorship of Jaroslav Stark, Marc deLeval, and Martin Elliott.

Dr Jacobs is a Diplomate of the American Board of Surgery and the American Board of Thoracic Surgery. He also has a Congenital Heart Surgery Certificate from the American Board of Thoracic Surgery. He is also a Fellow of the American College of Surgeons (FACS), the American College of Cardiology (FACC), and the American College of Chest Physicians (FCCP). He is a member of The American Association for Thoracic Surgery (AATS), The Society of Thoracic Surgeons (STS), The European Association for Cardio-Thoracic Surgery (EACTS), The Southern Thoracic Surgical Association (STSA), The Congenital Heart Surgeons' Society (CHSS), and The European Congenital Heart Surgeons Association (ECHSA). He is the founding Secretary of The World Society for Pediatric and Congenital Heart Surgery (WSPCHS).

Jeffrey P. Jacobs, MD, Chairs several Society of Thoracic Surgeons (STS) Task Forces related to the STS Database: He was Chair of the STS Congenital Heart Surgery Database Task Force for 8 years from 2006 through 2014. In 2007 and 2009, he was appointed Chair of the STS Database Task Force on Longitudinal Follow-up and Linked Registries, and of the STS Database Public Reporting Task Force, respectively. In 2014, he was appointed Chair of the STS Database Access and Publications (A&P) Task Force. He is also

Co-chair of the Joint EACTS-STs Congenital Database Committee. Dr. Jacobs is also Chair of the CHSS Committee on Quality Improvement and Outcomes and is a member of the CHSS Executive Council. Dr Jacobs is also Vice President of the Southern Thoracic Surgical Association.

In January, 2010, Dr Jacobs was appointed to the Task Force on Clinical Data Standards of American College of Cardiology Foundation (ACCF) and the American Heart Association (AHA). He was then selected to be a member of the "Key Data Elements and Definitions in Pediatric Cardiology Electronic Health Records Writing Committee" as the Task Force liaison for the "ACCF/AHA Task Force on Clinical Data Standards".

In October, 2010, Dr Jacobs was appointed by the World Health Organization (WHO) to be a member of the Cardiovascular Working Group within the Topic Advisory Group (TAG) for Internal Medicine that is contributing to the revision of the International Classification of Diseases (ICD) towards its 11th edition (ICD-11). He is also First Vice President of the International Society for Nomenclature of Paediatric and Congenital Heart Disease (ISNPCHD) and Co-Chair of The International Working Group for Mapping and Coding of Nomenclatures for Paediatric and Congenital Heart Disease, also known as the Nomenclature Working Group (NWG), of the ISNPCHD. The ISNPCHD developed and maintains the International Pediatric and Congenital Cardiac Code (IPCCC) and has been actively developing terminology and definitions for the congenital and paediatric cardiac nomenclature for ICD-11.

Since 2009, he has been a member of the Steering Committee of the World Congress of Pediatric Cardiology and Cardiac Surgery. Also since 2009, Dr Jacobs has been a member of the Board of Directors of the Pediatric Cardiac Intensive Care Society as their Liaison to The World Society for Pediatric and Congenital Heart Surgery. Since 2011, he has been a member of the Council of the European Congenital Heart Surgeons Association (ECHSA).

Since 2000, Dr Jacobs has been Chair of The Annual International Symposium on Congenital Heart Disease with Echocardiographic, Anatomic, Surgical, and Pathologic Correlation. This annual symposium is one of the largest multi-disciplinary meetings in the world for paediatric and congenital cardiac care. In 2009, 2010, 2011, 2012, 2014, and 2015, this meeting was co-sponsored by The American Association for Thoracic Surgery (AATS).

Although his primary professional activity is patient care as a clinical cardiothoracic surgeon, Dr Jacobs has particular expertise and interest in healthcare quality measurement, outcomes analysis, public reporting of outcomes of healthcare, linking databases, and longitudinal follow-up of patients. He also has extensive experience planning educational meetings and their

scientific programmes. Dr Jacobs performs both paediatric and adult cardiac and thoracic surgery and enjoys providing individual attention to both patients and their families. He spends his leisure time with his wife Stacy and their children Jessica and Joshua.

Allen D. Everett, MD, FACC, FSCAI, FAPS,
Senior Associate Editor of *Cardiology in the Young*



My initial appointment as Editor-in-Chief of *Cardiology in the Young* was to appoint Allen Everett as Senior Associate Editor of *Cardiology in the Young*. I consider Allen a close friend with a brilliant mind. I place tremendous value on our professional and personal collaborations in multiple domains.

Dr Everett is Professor of Paediatrics at Johns Hopkins in the Helen Taussig Division of Congenital Heart Disease. At Johns Hopkins, he is Director of the Paediatric Proteome Center.

Dr Everett has been Associate Editor for *Cardiology in the Young* since 2010 and became Senior Associate Editor in 2014.

Dr Everett received his Bachelor's Degree from the University of Tennessee at Chattanooga in 1979 and his medical degree from East Tennessee State University in 1984. Dr Everett completed his training in Paediatrics and Paediatric Cardiology at the University of Virginia. His cardiology speciality was Interventional Cardiology. Dr Everett was a tenured Associate Professor of Pediatrics at the University of Virginia, when he relocated to

Johns Hopkins in 2003. Dr Everett became Professor of Pediatrics at Johns Hopkins in 2012.

Dr Everett is Board-Certified in Pediatrics and Pediatric Cardiology by the American Board of Pediatrics and is a Fellow of the American College of Cardiology, Society of Cardiac Angiography and Interventions, and The Pediatric Academic Societies (PAS).

The research focus of Dr Everett has been vascular biology with both national and international funding from the American Heart Association, National Institute of Health, and European Commission. Dr Everett developed and currently directs the Pediatric Proteome Center at Johns Hopkins, a high-end mass spectrometry facility focussed on biomarker discovery and development for paediatric disease. Dr Everett, with Dr Vera Ignjatovic at Murdoch Childrens Research Institute, Melbourne, Australia, is Co-Director of the Pediatric Proteome Initiative (PediOme) for the International Human Proteome Initiative. Dr Everett currently holds three patents through Johns Hopkins for biomarker discoveries and is a paid consultant for the diagnostic startup company ImmunArray Ltd. [<http://www.immunarray.com/>].

With Dr Scott Lim, Dr Everett is the Editor and Author of the Field Guide of Congenital Heart Disease, which is in its third edition.

Dr Everett lives in Baltimore, MD, United States of America, with his wife and children.

Henry L. Walters III, MD, Associate Editor for Surgery – *Cardiology in the Young*



In November of 2013, before beginning my term as Editor-in-Chief of *Cardiology in the Young*, my initial acts were to assure the continued ongoing involvement of Bob Anderson, Bill Henry, Ted Baker, and Allen Everett. After securing the ongoing involvement of Bob, Bill, Ted, and Allen, my next moves were to appoint Hal Walters as Associate Editor for Surgery and Rodney Franklin as Associate Editor for Cardiology. Both Rodney and Hal are international leaders in paediatric and congenital cardiac care who have made countless contributions in multiple domains. I am honoured that Rodney and Hal are my close friends and professional colleagues.

Henry (Hal) L. Walters III, MD, is Chief of the Department of Cardiovascular Surgery at Children's Hospital of Michigan in Detroit, Michigan. He is also Professor of Surgery (FTA) at Wayne State University School of Medicine.

Dr Walters received his Bachelor of Arts degree in Biology (Magna Cum Laude) from Rice University, where he was elected to Phi Beta Kappa. He received his medical degree from Baylor College of Medicine, where he was elected to the Alpha Omega Alpha Medical Honor Society. He then completed a 6-year residency in General Surgery at the Massachusetts General Hospital, spending 1 year as a Surgical Registrar at Derriford Hospital in Plymouth, England. He spent 1 year as a Special Cardiovascular Research Fellow with John Kirklin, MD, at the University of Alabama at Birmingham, followed by a 2-year residency in Thoracic and Cardiovascular Surgery at the University of Alabama at Birmingham. Dr Walters spent an additional year at the University of Alabama at Birmingham training in paediatric cardiothoracic surgery with Albert Pacifico, MD, and James Kirklin, MD.

Dr Walters is a Diplomate of the American Board of Thoracic Surgery and also holds the Congenital Heart Surgery Certificate from the American Board of Thoracic Surgery. He is a member of The American Association for Thoracic Surgery (AATS), The Society of Thoracic Surgeons (STS), The European Association for Cardio-Thoracic Surgery (EACTS), The Southern Thoracic Surgical Association (STSA), The Congenital Heart Surgeons' Society (CHSS), The International Society of Heart and Lung Transplantation (ISHLT), and the World Society for Pediatric and Congenital Heart Surgery (WSPCHS).

In addition to being the Associate Editor for Surgery for *Cardiology in the Young*, Dr Walters is a regular guest editor for The Annals of Thoracic Surgery, The Journal of Thoracic and Cardiovascular Surgery, the Journal of Heart and Lung Transplantation, Pediatric Radiology, and the World Journal for Pediatric and Congenital Heart Surgery.

Dr Walters is Co-Chair of the Definitions Working Group (DWG) of The International Society for the Nomenclature of Pediatric and Congenital Heart Disease (ISNPCHD) and is a member of the Executive Committee of ISNPCHD. The DWG of ISNPCHD is charged, by the World Health Organization (WHO), with developing the terminology and definitions for paediatric and congenital cardiac disease for the upcoming ICD-11. Dr Walters also chairs the Education Committee of the Congenital Heart Surgeons' Society and is a member of the CHSS Executive Council. He also Chairs the Thoracic Committee of Gift of Life Michigan.

Dr Walters' clinical focus is congenital heart surgery, with special emphasis on the surgical correction of neonatal cardiac disease. His laboratory research has included studies on reperfusion after global ischaemia during cardiopulmonary bypass, as well as studies on the relaxation of ischaemic contracture and the importance of blood perfusion in an isolated rat heart model. Dr Walters' current in-laboratory research involves tissue engineering of cardiac valves and conduits. Current clinical research interests include paediatric cardiac surgical databases, outcome analyses, quality improvement, and the development of an international nomenclature for paediatric and congenital heart disease.

Dr Walters and his wife, Katherine, operate a sheep and hay farm in Manchester, Michigan. Although Katherine was a neonatal nurse by training, she spent 18 years home-schooling their daughters, Hannah and Grace. Hannah, having graduated with a BA in Psychology from Wheaton College and a Masters in Clinical Psychology from Madonna University, is now employed as an infant clinical psychologist. Grace graduated with a Bachelor of Science degree in Biology from Wheaton College, and aspires to become a Physician's Assistant.

Rodney C.G. Franklin, MD, FRCP, FRCPC,
Associate Editor for Cardiology – *Cardiology in the Young*



In November of 2013, before beginning my term as Editor-in-Chief of *Cardiology in the Young*, my initial acts were to assure the continued ongoing involvement of Bob Anderson, Bill Henry, Ted Baker, and Allen Everett. After securing the ongoing involvement of Bob, Bill, Ted, and Allen, my next moves were to appoint Hal Walters as Associate Editor for Surgery and Rodney Franklin as Associate Editor for Cardiology. Both Hal and Rodney are international leaders in paediatric and congenital cardiac care who have made countless contributions in multiple domains. I am honoured that Hal and Rodney are my close friends and professional colleagues.

Dr Rodney Franklin is Lead Paediatric Cardiology Consultant at the Royal Brompton Hospital and Honorary Senior Lecturer at the National Heart and Lung Institute, Imperial College, in London, United Kingdom. His medical degrees are from University College London, United Kingdom (MBBS, MD). His training in paediatric cardiology was based for 6 years at Great Ormond Street Hospital for Sick Children in London, where he was also British Heart Foundation Junior Research Fellow. His MD thesis analysed the long-term outcome of over 400 patients with tricuspid atresia and double inlet ventricle. He completed his training at the Wilhelmina Children's Hospital in Utrecht, the Netherlands. Dr Franklin has dual specialist accreditation in Paediatrics and Paediatric Cardiology. He is a Fellow of the Royal College of Physicians (FRCP) and the Royal College of Paediatrics and Child Health (FRCPC), and a member of the British Congenital Cardiac Association, British Cardiovascular Society, and British Medical Association.

Dr Franklin is Clinical Lead of the United Kingdom National Congenital Heart Disease Audit, within the National Institute of Cardiovascular Outcomes Research (previously Central Cardiac Audit Database), which monitors and quality assures outcomes following paediatric and congenital heart disease surgical and transcatheter interventions in the United Kingdom and the Republic of Ireland. Since 2004, Dr Franklin has also been a member of the Cardiology Expert Working Group for the United Kingdom Department of Health Information Centre, developing new Healthcare Resource Groups and national procedural codes (OPCS-4 [Office of Population Censuses and Surveys Classification of Surgical Operations and Procedures, 4th revision]).

Dr Franklin is President of the International Society for Nomenclatures of Paediatric (ISNPCHD) and Congenital Heart Disease and co-chair of its Nomenclature Working Group (the International Working

Group for Mapping and Coding of Nomenclatures for Paediatric and Congenital Heart Disease). A founding member of the Society, he is guardian and chief developer of the AEPC-derived version of the International Paediatric and Congenital Cardiac Code (IPCCC), a comprehensive international, coding-nomenclature system for paediatric and congenital cardiology and related procedures. Currently, Dr Franklin is also creating a congenital cardiology subset within the Systematised Nomenclature of Medicine (SNOMED) Clinical Terms, with the International Health Terminology Standards Development Organisation, inclusive of comprehensive mapping to the IPCCC.

A member of the Association for European Paediatric Cardiology (AEPC) since 1993, Dr Franklin was a founding member of the Association's Coding Committee and has been its President since 2005. In February, 2010, Dr Franklin was appointed as the AEPC representative and member of the American College of Cardiology Foundation and the American Heart Association Task Force on Clinical Data Standards. As such, he is a member of the writing committee for a white paper on Key Data Elements and Definitions in Pediatric and Congenital Heart Disease for the Electronic Health Record.

In 2009, as part of the process to revise the International Classification of Diseases towards its 11th iteration (ICD-11), Dr Franklin was appointed by the World Health Organization to be Co-Chair of the Internal Medicine Topic Advisory Group representing Paediatrics, as well as co-chair of its Cardiovascular Working Group and a member of the Pediatric Topic Advisory Group. The ISNPCHD has been actively developing terminology and definitions for congenital and paediatric cardiac nomenclature for ICD-11.

Dr Franklin's research interests are mostly outcomes related. Recent and ongoing grant-linked projects include:

- the development and application of the US and UK disease-specific Paediatric Cardiology Quality of Life Instrument (UK Principle Investigator);
- development of consensus and evidence-based morbidity-centric comparators of outcome following cardiac procedures; and
- development of evidence based monitoring protocols to prevent infant mortality following early cardiac surgery.

Dr Franklin's leisure time is spent with family in London and Donegal, as well as ski-mountaineering.

John M. Costello, MD, MPH, Associate Editor for Critical Care – *Cardiology in the Young*



The multidisciplinary nature of paediatric and congenital cardiac care necessitates expanding the scope of the Associate Editors of *Cardiology in the Young* to additional domains. I am very pleased to announce that John Costello has accepted the position as Associate Editor for Critical Care for *Cardiology in the Young*. John has been an extremely active reviewer for *Cardiology in the Young* and has been a member of our Editorial Board. I truly believe that John is a rising superstar in paediatric cardiac critical care.

John M. Costello, MD, MPH, is Director of Inpatient Cardiology and Medical Director of the Regenstein Cardiac Care Unit at Ann & Robert H. Lurie Children's Hospital of Chicago and an Associate

Professor of Paediatrics at Northwestern University Feinberg School of Medicine.

Dr Costello is an Associate Editor of *Cardiology in the Young*, one of the most widely read journals dedicated to patients with paediatric and congenital cardiac disease. He serves on the Board of Directors of the Pediatric Cardiac Intensive Care Society and the Midwest Pediatric Cardiology Society. He also serves on the Executive Committee of the Pediatric Cardiac Critical Care Consortium (PC4) and the Medical Advisory Board of the Children's Heart Foundation. Dr Costello also serves on the Editorial Board of the World Journal for Pediatric & Congenital Heart Surgery.

Dr Costello received his Bachelor's Degree from the University of Notre Dame in 1991 and his medical degree from Northwestern University School of Medicine in 1995. He then completed a 3-year paediatric residency at Children's Memorial Hospital in Chicago, followed by a 5-year combined fellowship in Paediatric Cardiology and Critical Care Medicine, also at Children's Memorial Hospital. Upon completion of his training in 2003, Dr Costello was recruited to join the Department of Cardiology at Boston Children's Hospital, where he held a faculty appointment at Harvard Medical School. Dr Costello received his Masters in Public Health degree from the Harvard School of Public Health. He returned to Chicago in 2010.

Dr Costello is a Diplomat of the American Board of Pediatrics and its Sub-boards of Pediatric Cardiology and Pediatric Critical Care Medicine. He is a member of the American Heart Association, the American College of Cardiology, the Society of Critical Care Medicine, the Society for Pediatric Research, the Pediatric Cardiac Intensive Care Society, and the Midwest Pediatric Cardiology Society.

Dr Costello's primary professional activity is as a paediatric cardiac intensivist. His research interests focus on clinical investigations in critically ill children with congenital and acquired cardiac disease. He is specifically interested in perioperative clinical trials, the epidemiology and prevention of healthcare-associated infections in critically ill children, as well as in outcomes in neonates with critical congenital heart disease.

Dr Costello resides in the Chicago suburbs with his wife Doyle and their five sons.

Kevin D. Hill, MD, MSCI, Associate Editor for Interventional Cardiology – *Cardiology in the Young*



The multidisciplinary nature of paediatric and congenital cardiac care necessitates expanding the scope of the Associate Editors of *Cardiology in the Young* to additional domains. I am very pleased to announce that Kevin D. Hill, MD, MSCI, has accepted the position as Associate Editor for Interventional Cardiology for *Cardiology in the Young*. Kevin has been an extremely active reviewer for *Cardiology in the Young* and has been a member of our Editorial Board. I truly believe that Kevin is a rising superstar in paediatric cardiology and also in research related to the analysis of outcomes in medical and surgical care.

Kevin D. Hill, MD, MSCI, is an Assistant Professor of Paediatrics at Duke University School of

Medicine. He is an interventional cardiologist and directs the Duke Paediatric Pulmonary Hypertension Program.

Dr Hill was born in South Africa but his family migrated to the United States in the early 1990s. He received his Bachelor's Degree from the College of William and Mary in 1998 and his medical degree from Wake Forest University in North Carolina in 2002. He continued on at Wake Forest to complete a 3-year paediatric residency in 2005. He then completed a 3-year paediatric cardiology fellowship at Vanderbilt University in Nashville, Tennessee, followed by an additional year of training in interventional cardiac catheterisation under the mentorship of Drs Tom Doyle and Dana Janssen. Concomitantly he completed a Masters of Science in Clinical Investigation. In 2009, Dr Hill was recruited to join the Division of Paediatric Cardiology at Duke Children's Hospital in Durham, North Carolina, where he has remained on faculty. He has Joint Appointments at the Duke Clinical Research Institute and within the Duke Department of Radiology, Division of Radiation Safety.

Dr Hill is a Diplomat of the American Board of Paediatrics and the Sub-board of Paediatric Cardiology. He is a member of the American Heart Association, the American College of Cardiology, and the Society for Paediatric Research. He serves on the Society of Thoracic Surgeons Congenital Heart Surgery Access and Publications Committee and the American College of Cardiology National Cardiovascular Data Registry IMPACT Research and Publications Committee.

Dr Hill's primary clinical activities are as a paediatric cardiac interventionalist and as director of the Duke Paediatric Pulmonary Hypertension Program. His research interests focus on outcomes research in children undergoing cardiac surgery and/or cardiac catheterisation and improving the safety and efficacy of cardiac catheterisation in children. He receives research support from the United States National Institutes of Health, the United States Food and Drug Administration, industry, and several foundations.

Dr Hill, his wife Camille, and his two daughters, Claire and Anneka, live in Cary, North Carolina. His brother Garick is a paediatric cardiologist at Children's Hospital of Wisconsin.

Patricia Hickey, PhD, MBA, RN, FAAN, NEA-BC, Associate Editor for Nursing – *Cardiology in the Young*



The multidisciplinary nature of paediatric and congenital cardiac care necessitates expanding the scope of the Associate Editors of *Cardiology in the Young* to additional domains. I am very pleased to announce that Patricia Hickey, PhD, MBA, RN, FAAN, NEA-BC, has accepted the position as Associate Editor for Nursing for *Cardiology in the Young*. Under the leadership of Patty, we hope to increase the publications from nurses in *Cardiology in the Young*. Patty is an internationally known nurse scientist who has excelled in multiple domains, including patient care, research, teaching, charitable paediatric cardiac care, and advocacy. Patty has mentored young nurses at Johns Hopkins All Children's Heart Institute and, along with Ashley Collins, BSN, RN, CCRN, Patty is the Nursing Symposium Co-Chair for our annual February meeting at All Children's Hospital (*Johns Hopkins All Children's Heart Institute 15th International Symposium on Congenital Heart Disease, Friday February 6, 2015 to Monday February 9, 2015, Co-Sponsor: The American*

Association for Thoracic Surgery (AATS)). It is indeed an honour to count Patty Hickey among my colleagues and friends, and I am very pleased that she has agreed to become Associate Editor for Nursing for *Cardiology in the Young*.

Dr Patricia Hickey is known internationally for her work in hospital and nursing leadership, patient safety, and bridging nursing practice and health policy. Her programme of research examines the nursing and organisational factors associated with outcomes in paediatric patients. She has disseminated cutting-edge knowledge in more than 60 publications and hundreds of presentations at national and international symposia.

The greatest impact of her contributions to paediatric global health has been in paediatric leadership at the international level, particularly in China, through 25 years of senior volunteer work with Project HOPE. She is recognised as one of the primary architects of the largest programme for paediatric cardiovascular surgery in the world at Shanghai Children's Medical Center in Pudong, which is renowned as a Centre of Excellence. The impact of her vision and leadership over two decades is reflected in the training and education of thousands of Chinese nurses and physicians and improved care for more than 40,000 Chinese children. Today, more than 1000 medical students, junior faculty, nurses, and physicians from other Asian countries have travelled to Shanghai to learn from the physicians and nurses who were taught and mentored by the Boston Children's team collaboratively. Sustainability continues through transnational exchanges that Dr Hickey has orchestrated for 210 medical students, junior faculty, physicians, and nurses from Shanghai and Boston.

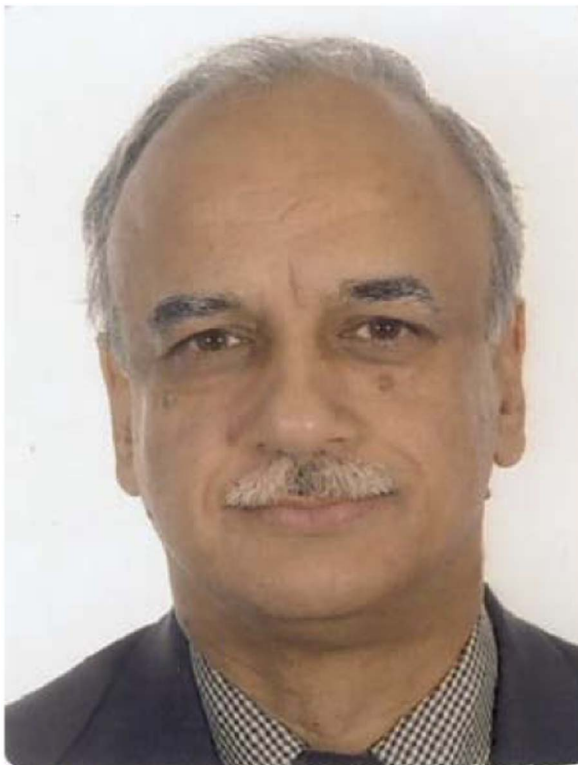
Dr Hickey collaboratively leads the International Quality Improvement Collaborative for Reducing Pediatric Mortality in the Developing World, which includes leveraging internet technology to teach clinicians in 39 centres across resource-limited countries. To date, this collaborative has educated more than 1000 physicians and nurses across the world. An outcome of this project is the significant reduction of mortality and sepsis in more than 25,000 patients across 21 paediatric cardiac surgery programmes in developing countries.

As the nursing director of OPEN Pediatrics, she has designed educational curricula for nurses and physicians in more than 100 countries. She is also a founding board member of a non-profit organisation for paediatric healthcare in Guatemala. This foundation raises funds for children to receive healthcare who would otherwise not because of economic and social circumstances.

Internationally, she is on the Education Committee of the Global Humanitarian Forum for Congenital Heart Surgery in Geneva and on the Executive Committee of the International Quality Improvement Collaborative for Reducing Mortality in the Developing World. Nationally, she is a member of the Quality Metric Steering Committee for the American College of Cardiology and the Transforming Care Delivery Expert Panel for the American Academy of Nursing. Her policy work has been influential at the state level with the development of an interdisciplinary model for legislative action in Massachusetts.

Dr Hickey's contributions have been recognised with several prestigious honours and awards, including the American Association of Critical Care Nurses Circle of Excellence Award, Fellowship in the American Academy of Nursing, and The United States' President's Gold Volunteer Service Award in 2013.

Shakeel Ahmed Qureshi, MBCHB, FRCP, FRCPCH, Associate Editor for Mentorship – *Cardiology in the Young*



The Associate Editor for Mentorship is another new position on the Editorial Board of *Cardiology in the Young*. *Cardiology in the Young* is very lucky to have former AEPC President Shakeel Ahmed Qureshi, MBCHB, FRCP, FRCPCH, as Chair of our new

Committee on Mentorship and as *Associate Editor for Mentorship for Cardiology in the Young*.⁵ I believe that this initiative is one of the most important new endeavours of our journal. Shak is obviously recognised as an international leader in paediatric cardiology and is the perfect person to lead this initiative.

Shak has written the next four paragraphs to describe the Committee on Mentorship of *Cardiology in the Young*.⁵

Over the years, it has become apparent that many manuscripts are rejected by peer-reviewed journals because the use of the English language may be inadequate or unsatisfactory. Very often, the scientific content of these papers is excellent and worthy of publication. It seems a pity, therefore, that the authors of such papers struggle to publish their excellent scientific work.

Cardiology in the Young has initiated a new service for authors, whose first language may not be English and who struggle to pass on the correct meaning and message of their research and manuscript. The Associate Editor for Mentorship is Professor Shakeel Qureshi and a Committee on Mentorship has been set up to help with this important task. The members of this Committee on Mentorship are:

- Shakeel Ahmed Qureshi, MBCHB, FRCP, FRCPCH, Evelina Children's Hospital, United Kingdom.
- Jeffrey P. Jacobs, MD, FACS, FACC, FCCP, All Children's Hospital, Johns Hopkins University, Saint Petersburg, Tampa, and Orlando, United States of America.
- Dr Lee Benson, Hospital for Sick Children, Toronto, Canada.
- Dr Rui Anjos, CUF Descobertas Hospital, Portugal.
- Dr Bharat Dalvi, Glenmark Cardiac Centre, India.
- Dr Kuberan Pushparajah, Evelina Children's Hospital, United Kingdom.
- Dr Gurleen Sharland, Evelina Children's Hospital, United Kingdom.

The role of the members of this Committee on Mentorship is not to completely re-write the manuscript for the authors, nor for the authors to submit their work to this Committee on Mentorship for re-writing, but to help the authors improve it. The submitted manuscript will still need to be peer-reviewed as normal, and only if the reviewers think that the scientific content is worth publishing, but the authors need help to improve their English, would help be sought from the Associate Editor for Mentorship and the members of the Committee on Mentorship. Once comments for improvement have

been received from the Committee on Mentorship, these suggestions will be fed back to the authors for guidance. The authors will then have a chance to improve their manuscript and re-submit it for publication. This initiative is viewed as an important step in the development of *Cardiology in the Young*. It will be interesting to see how this initiative progresses in the future.

Cambridge University Press additionally lists a number of language-editing services that authors may consider.⁶

Shakeel A. Qureshi is a Consultant Paediatric Cardiologist and Professor of Paediatric Cardiology at the Evelina Children's Hospital, Guy's & St Thomas's Foundation Trust, and King's College, London. He was Head of Service for Paediatric Cardiology between 2004 and 2012 and Director of Cardiac Catheterisation Laboratory between 1999 and 2012.

Professor Qureshi received his MBChB degree from the University of Manchester in 1976, and passed Membership of Royal College of Physicians of London in 1979. He completed his training in Paediatric Cardiology at Harefield Hospital, Guy's Hospital, and Royal Liverpool Children's Hospital. He was appointed as Consultant Paediatric Cardiologist at Liverpool in 1987 and then at Guy's Hospital in 1988. He spent 2 years (between 1983 and 1985) at the Armed Forces Institute of Cardiology, Rawalpindi, Pakistan, where he set up the Department of Paediatric Cardiology.

Professor Qureshi was elected Fellow of Royal College of Physicians in 1995 and Royal College of Paediatrics and Child Health in 1997. He is a member of British Congenital Cardiac Association (BCCA), of which he was a founder secretary, British Cardiac Society (BCS), British Medical Association (BMA), Association for European Paediatric and Congenital Cardiology (AEPC), and Society of Cardiac Angiography and Interventions (SCAI). He was Scientific Secretary of AEPC between 2003 and 2007, its President-elect in 2009 and 2010, and President between 2010 and 2013. He was also President-Elect of BCCA between 2007 and 2009 and President between 2009 and 2012.

Professor Qureshi has been a member of many committees in the United Kingdom as well as abroad. In the United Kingdom, he was a Council member of the British Paediatric Cardiac Association (1991–1996), Royal College of Physicians Committee on Cardiology (1994–1999), Secretary of Specialty Advisory Committee for Paediatric Cardiology (1997–2000), its Chairman (2000–2003), member

of the Advisory Group for Commission for Health Improvement (1998–1999), member of the Committee on Safety of Medicines (1998 – to date), and member of the Steering Group and Standards Group for Safe and Sustainable Paediatric Cardiac Surgery programme (2008–2012). Overseas, he was a member of the European Society of Cardiology (ESC) Scientific Committee (1995–1996 and 2001), National Delegate of Educational Committee of AEPC (1999–2009), and a member of the Congress Programme Committee of ESC (2010–2013). In 2007, he was invited to give the prestigious lecture of AEPC, the Edgar Mannheimer lecture, and also gave the first Edgar Mannheimer lecture at the Ethiopian Paediatric Society meeting in Addis Ababa in 2012.

Apart from being a clinical paediatric cardiologist, Professor Qureshi has developed particular expertise and interest in interventional paediatric cardiology as well as in adults with congenital heart disease. In addition, he has an interest in quality outcomes in congenital heart disease. Professor Qureshi has been a visiting professor to many units around the world, where he has taught interventional techniques to many doctors and teams. He is invited to many international scientific conferences around the world where he has given countless lectures, in particular on interventional techniques and the latest developments. He also holds practical workshops in these meetings as well as at hospitals around the world. For the past 15 years, he has been Co-Director of Congenital & Structural Interventions (CSI) Annual Course held in Frankfurt, Germany, and has been a regular faculty member of Paediatric Interventional Cardiology Symposium (PICS) since its development.

Professor Qureshi has published over 150 papers in peer-reviewed journals, written numerous book chapters and review articles, as well as co-edited an interventional paediatric cardiology textbook. He is a co-inventor of the Tyshak balloon and has two patents for catheters and devices. He was the subject of a British Broadcasting Corporation (BBC) documentary in 1992 for an innovative interventional procedure, and in 2005, when he took a team to help with the earthquake in Pakistan. He was awarded one of the highest civilian awards by the government of Pakistan for services to medicine in 2004. In the same year, he was given the PICS Outstanding achievement award. He spends his leisure time with his wife, children, and grandchildren, and has a new hobby (golf).

Professor Tom R. Karl, Associate Editor for Cultural, Ethical, and Humanitarian Affairs – *Cardiology in the Young*



The Associate Editor for Cultural, Ethical, and Humanitarian Affairs is another new position on the Editorial Board of *Cardiology in the Young*.⁷ *Cardiology in the Young* is very lucky to have Tom R. Karl as our new *Associate Editor for Cultural, Ethical, and Humanitarian Affairs for Cardiology in the Young*. I believe that this initiative is one of the most important new endeavours of our journal. Tom is obviously recognised as an international leader in paediatric cardiac surgery, and is the perfect person to lead this initiative. In fact, after accepting his appointment as Associate Editor for Cultural, Ethical, and Humanitarian Affairs for *Cardiology in the Young*, Tom has also accepted a position as a member of our team at Johns Hopkins All Children's Heart Institute as a partner to Jim Quintessenza and me!

Tom has written the next six paragraphs to describe the role of the Associate Editor for Cultural, Ethical, and Humanitarian Affairs for *Cardiology in the Young*:⁷

Our passion for our daily clinical and scientific work, and the typically unrelenting pace of our speciality, places us at risk of being consumed by what we love most. Although we enjoy the creative and performance-based aspects of our chosen field, no one in our speciality would need

to be reminded of the brevity of life, nor of the missed opportunities to travel other roads.

Fortunately, medicine has a long and very rich history of talented physicians and surgeons who have prevailed in various non-medical arenas, such as music, art, and literature. Well-known examples include Albert Schweitzer, Fritz Kreisler, Hector Berlioz, Theodor Billroth, Alexander Borodin, Irvin D. Yalom, Abraham Verghese, Khaled Hosseini, Richard Bing, Anton Chekhov, Sir Arthur Conan Doyle, Atul Gawande, and an extensive list of others. The list of enthusiastic amateur participants would, needless to say, be many times longer. In reality, most of us maintain at least voyeuristic interests in the arts, despite our main responsibilities, as evidenced by the enthusiasm for cultural programmes associated with many of our international meetings. The founding editor of *Cardiology in the Young*, Professor Robert Anderson, has led the way in introducing musical performances into the programmes of various paediatric cardiac meetings, sometimes with an enthusiastic reception.

Ethical issues abound in medicine and assume special importance in the current paediatric cardiac milieu. We deal almost daily with foetal diagnosis, complex univentricular palliations, extracardiac comorbidities, novel surgical procedures, circulatory support and transplantation, clinical research, end-of-life care, and other areas that demand special ethical consideration. The medical ethics literature is abundant but complex, and the academic theory is not always applicable to the clinical situation requiring an urgent resolution. Those of us working on the "front line" may be well positioned to identify and discuss the challenging ethical issues that characterise our speciality.

Finally, medical practitioners in general have a long history of involvement in humanitarian initiatives around the world. In the paediatric cardiac specialities, we have witnessed a proliferation of individuals, teams, and institutions willing to bring modern cardiac diagnostic and therapeutic technology to developing and/or underserved parts of the world. Does this sort of activity have a meaningful impact on child health worldwide? Certainly, at the most basic level, there are thousands of children whose lives have been saved by visiting teams. But beyond that, we have witnessed the birth of new paediatric cardiac programmes, nurtured by talented local teams with help from humanitarian organisations abroad. Many of these units now

function independently, achieve good clinical outcomes, and contribute to research and international data registry projects. Call it politics, medical tourism, selfless humanitarian effort, or some combination, the result speaks for itself. The individuals who have persisted to make it all happen deserve to be recognised and their ongoing stories are very much worth telling.

Cardiology in the Young has in the past recognised some of the issues discussed above in published articles and commentary. The Editorial Board of *Cardiology in the Young* has recently been re-organised to include an Associate Editor for Culture, Ethics, and Humanitarian Affairs, and with this gesture we hope to re-emphasise the relevance of these broad areas and to encourage submissions that may not fall clearly within our traditional scientific content. It would be contradictory to write specific guidelines for such submissions, but without a doubt interesting days lie ahead.

As one of our senior colleagues likes to say to his trainees, "Don't let the job own you!" (Dearani J, personal communication).

Tom R. Karl, MS, MD, FRACS, is Associate Editor for Culture, Ethics, and Humanitarian Affairs. Dr Karl is currently Consultant Cardiac Surgeon and Director of Cardiac Surgical Research for the Mater Children's Hospital, Brisbane, Australia (Queensland Paediatric Cardiac Service). He is Professor of Surgery at the University of Queensland and Professor of Surgery (Emeritus) at University of California, San Francisco. He is also a former Director of Paediatric Cardiac Surgery at the Royal Children's Hospital, Melbourne, Australia. His main area of interest is neonatal cardiac surgery and related research. Dr Karl received his cardiac surgical education in New York, New Haven, Cardiff, London, and Melbourne. He is certified by the American Board of Thoracic Surgery (ABTS) and is a Fellow of the Royal Australian College of Surgeons. He has over 25 years of experience in his speciality and has served as a primary mentor for over 50 advanced trainees, the majority of whom have successful careers in paediatric cardiac surgery.

Dr Karl has served on several editorial boards, including the *Annals of Thoracic Surgery* (past Associate Editor), *EJCTS* (currently Associate Editor), *The Korean Journal of Thoracic and Cardiovascular Surgery* (currently Editorial Board member), *Annals of Pediatric Cardiology* (currently Editorial Board member), *Cardiology in the Young* (currently Associate Editor), and others. He is a reviewer for six additional cardiac journals and also a regular contributor to the peer-reviewed cardiac literature.

Dr Karl is a member of The American Association for Thoracic Surgery (AATS), The Society of Thoracic Surgeons (STS), The Asian Society for Cardiovascular & Thoracic Surgery (ASCVTS), The European Association for Cardio-Thoracic Surgery (EACTS), The World Society for Pediatric and Congenital Heart Surgery (WSPCHS), The Congenital Heart Surgeons' Society (CHSS), and other professional societies. He is a founding member of The World Society for Pediatric and Congenital Heart Surgery (WSPCHS). Since 1996, he has been a member of the Steering Committee of the World Congress of Pediatric Cardiology and Cardiac Surgery.

Dr Karl has had extensive experience with humanitarian initiatives relating to cardiac surgery in underserved areas of the world, and has operated with paediatric cardiac teams in 12 countries. Dr Karl has numerous interests outside cardiac surgery, especially relating to sports and music. He is a founding member (with Dr Gil Wernovsky) of the Baby Blue Sound Collective (BBSC), an international consortium of musicians and composers, connected by their paediatric cardiac interests. The BBSC has performed over the past 8 years in the United States of America, United Kingdom, Australia, France, and South Africa.

Gil Wernovsky, MD, FAAP, FACC, Associate Editor for Interdisciplinary Collaboration – *Cardiology in the Young*



The Associate Editor for Interdisciplinary Collaboration is another new position on the Editorial Board of *Cardiology in the Young*. *Cardiology in the*

Young is very lucky to have Gil Wernovsky, MD, FAAP, FACC, as *Associate Editor for Interdisciplinary Collaboration for Cardiology in the Young*. I believe that this initiative is one of the most important new endeavours of our journal. Gil is obviously recognised as an international leader in paediatric cardiology and is the perfect person to lead this initiative. In an era where geographical and subspecialty boundaries continue to be increasingly blurred, Interdisciplinary Collaboration is critical for patient care, research, education, and advocacy. *Cardiology in the Young* is an extremely strong advocate for Interdisciplinary Collaboration. I am honoured that Gil and I are close friends and professional colleagues, and I am truly pleased that Gil has agreed to be our Associate Editor for Interdisciplinary Collaboration.

Gil Wernovsky is Medical Director of Patient- and Family-Centred Care for The Heart Program at Miami Children's Hospital. Before joining Miami Children's Hospital, he served as Director of Program Development at The Cardiac Center at The Children's Hospital of Philadelphia and as Associate Chief of the Division of Pediatric Cardiology. He was also Medical Director of the NeuroCardiac Care Program and the former Medical Director of the Cardiac Intensive Care Unit.

Dr Wernovsky received his medical training at Pennsylvania State University and his paediatric training at New York Hospital. He completed additional training in paediatric cardiology and cardiac intensive care at Boston Children's Hospital, and had a faculty appointment at Harvard Medical School. In Philadelphia, he was Professor of Paediatrics at the Perelman School of Medicine at the University of Pennsylvania.

Dr Wernovsky's clinical interests include the critical care of newborns with critical congenital heart disease, mechanical support of the failing circulation, and outpatient follow-up of patients with complex congenital heart disease. For over 25 years, he has focussed on the long-term functional outcomes of patients after surgery for complex congenital cardiac disease, particularly patients with transposition of the great arteries and forms of functionally univentricular hearts such as hypoplastic left heart syndrome.

Dr Wernovsky has made multiple important contributions in the domain of research. He conducted the pilot study and was one of the lead investigators for the Boston Circulatory Arrest Trial. He was also the Principal Investigator of the PRIMACORP study, an international multicentre randomised trial designed to improve cardiac output after cardiac surgery. Dr Wernovsky was also Co-Chair of the Perioperative Working Group of the Pediatric Heart Network of the National Institutes of Health.

Gil Wernovsky is widely known as one of the leading educators in paediatric cardiology. He founded, and for 16 years directed, the largest paediatric cardiac meeting in the United States – the Annual Postgraduate Course in Pediatric Cardiovascular Disease – organised by The Children's Hospital of Philadelphia and entering its 17th year.

Although his primary professional activity is as a clinical cardiologist, Dr Wernovsky has particular expertise and interest in healthcare quality measurement, outcomes analysis, longitudinal follow-up, and medical education. He also has extensive experience planning educational meeting programmes.

The relationship of *Cardiology in the Young* with The Association for European Paediatric and Congenital Cardiology (AEPC)

The Association for European Paediatric and Congenital Cardiology (AEPC) was founded in Lyon in 1963 and has subsequently created a network of specialists working in the same field encountering similar problems.⁸ The mission of AEPC is to promote the knowledge of the normal and diseased heart and circulation, exchange of knowledge, and continuous education.⁸

Earlier this year, as the new Editor-in-Chief of *Cardiology in the Young* (CiTY), I wrote to all of the members of the AEPC⁸ to confirm the fundamental importance of the close relationship and collaboration between AEPC and *Cardiology in the Young*. *Cardiology in the Young* is honoured to be the official journal of AEPC,⁸ and as Editor-in-Chief I place massively high value on this relationship and collaboration. I would like to share the following facts with the members of AEPC:

- *Cardiology in the Young* continues to grow in international stature and is recognised as the pre-eminent place for publication of information and research related to paediatric and congenital cardiac care.
- AEPC members will now be able to access *Cardiology in the Young* through the members portal on the AEPC website, once logged in, making it easier to access *Cardiology in the Young* without the need for additional logins.
- All active AEPC members will be able to access the entirety of the Journal's content, from Volume 1 to the latest issue (Volume 24).
- *Cardiology in the Young* is increasing page output by 44% from 2014 to 2015, meaning that more content is available for AEPC members to freely access.
- Being affiliated with the journal means that AEPC can use *Cardiology in the Young* as a vehicle to

publish newsletters, articles, and abstract supplements in addition to other types of content.

The commitment of *Cardiology in the Young* to AEPC is strong and dedicated. Several leaders from AEPC are members of the Editorial Board of *Cardiology in the Young*.

All members of AEPC should feel free to contact me at any time with ideas about *Cardiology in the Young* and our important relationship with AEPC. We hope that the membership of AEPC will continue to consider CiTY for publication of their best scientific research.

The Association for European Paediatric and Congenital Cardiology (AEPC) offers the following description of AEPC:⁸

AEPC was founded in Lyon in 1963 (Association Européenne pour la Cardiologie Pédiatrique) and has subsequently created a network of specialists who are committed to the practice and advancement of congenital cardiology and closely related fields. *Cardiology in the Young* is the official journal of the AEPC. The AEPC offers a free subscription of "*Cardiology in the Young*" as part of the annual membership fee. The membership also offers several other benefits.

The overall membership of the Association now stands at 1060 paediatric cardiologists and other specialists working in the field of paediatric cardiology and its related disciplines in 2010. The number of members increases by 11% a year. As far as we are aware, this makes the Association the largest democratically administered global association in the field of congenital cardiology, and what is equally encouraging is that we now represent members from all the continents. New members are very welcome as they will always bring with them new ideas and innovations.

AEPC and its Working Groups aim to enhance collaboration among members for scientific research and professional development and to maintain high standards of professional practice. The Ordinary Members of AEPC originate from 32 countries in Europe, and each country is represented within the Association by an elected National Delegate. The AEPC has also several members outside Europe. The Association cooperates with numerous associations working in the field of congenital heart defects originating from other continents. The AEPC also works closely together with The European Society of Cardiology (ESC) and its organisations.

Clearly AEPC stands for **The Association for European Paediatric and Congenital Cardiology**. It is a fact that the current Editor-in-Chief of *Cardiology in the Young* is not European and is not a Cardiologist. However, in an era where geographical and subspeciality boundaries continue to be increasingly blurred, I assure the members of the AEPC of my firm commitment to the relationship between AEPC and *Cardiology in the Young*. My training in London at Great Ormond Street Hospital for Children has made both my wife and me increasingly European, and our commitment to AEPC is of primary importance to *Cardiology in the Young*. Indeed, the relationship between **The Association for European Paediatric and Congenital Cardiology** and *Cardiology in the Young* is important and fundamental; this relationship is the primary relationship and affiliation of *Cardiology in the Young*.

The new societal relationships of *Cardiology in the Young*

In order to assure the continued leadership of *Cardiology in the Young* in the domain of paediatric and congenital cardiac disease, I feel that it is essential that *Cardiology in the Young* maintain its extremely important relationship with The Association for European Paediatric and Congenital Cardiology (AEPC).⁸ Simultaneously, it is also critical that we expand our Societal Partnerships. In early 2014, I proposed that *Cardiology in the Young* form three new Societal Partnerships, so that *Cardiology in the Young* will have the following four Societal Partners:

- The Association for European Paediatric and Congenital Cardiology (AEPC) (<http://www.aepc.org/>).
- The Pediatric Cardiac Intensive Care Society (PCICS) (<http://www.pcics.org/>).
- The International Society for Nomenclature of Paediatric and Congenital Heart Disease (ISNPCHD) (<http://www.ipccc.net/>).
- The World Congress of Pediatric Cardiology and Cardiac Surgery (WCPCCS) (<http://wcpccs2013.co.za/>).

Each of these four organisations is international in nature and is not associated with any particular country. Each of these organisation is different in structure and therefore requires a different plan for partnership.

I am, however, absolutely certain that if each of these four organisations has a formal affiliation with *Cardiology in the Young*, we will position *Cardiology in the Young* to remain a leading journal in the world in the domain of paediatric and congenital cardiac care, and at the same time increase our readership and Impact Factor.

The International Society for Nomenclature of Paediatric and Congenital Heart Disease (ISNPCHD)

The International Society for Nomenclature of Paediatric and Congenital Heart Disease is an established not-for-profit organisation, with the mission to identify, standardise, and maintain an international nomenclature system, the International Paediatric and Congenital Cardiac Code (IPCCC [www.ipccc.net]), enhancing global communication and facilitating patient care, research, and training in paediatric and congenital heart disease across disciplines. The IPCCC provides a common language and terminology, inclusive of definitions and imaging, through which institutions across the world can seamlessly communicate, comparing and improving outcomes and the quality of care that is given to children, young people, and adults born with malformed hearts.

On 14 May, 2014, ISNPCHD officially adopted *Cardiology in the Young* as their official journal. Below are some bullet points about ISNPCHD:

- ISNPCHD maintains the International Paediatric and Congenital Cardiac Code (IPCCC).
- The IPCCC is the global standard for nomenclature and classification of paediatric and congenital cardiac disease.
- ISNPCHD generates two or three very high-impact publications every year.
- Several of the most referenced publications in *Cardiology in the Young* were authored by ISNPCHD.
- Rodney Franklin, our new Associate Editor for Cardiology, is the current President of ISNPCHD.
- I am the Vice President of ISNPCHD.
- As shown in Table 1, several members of ISNPCHD are also members of the Editorial Board of *Cardiology in the Young*.
- ISNPCHD meets for 1 week every year; these meetings have been in all continents except Antarctica.
- ISNPCHD has only 20 to 30 members; the annual meeting is typically attended by 20 people.
- Although this is a small organisation in size, its members represent every major international organisation in the domain of paediatric and congenital cardiac disease, and the organisation generates extremely important editorial content.

Rodney Franklin, the President of ISNPCHD, has provided the following text about ISNPCHD:

The International Society for Nomenclature of Paediatric and Congenital Heart Disease (ISNPCHD) is an established not-for-profit organisation, incorporated in Canada, with the

collective mission to identify, standardise, and maintain an international nomenclature system, the International Paediatric and Congenital Cardiac Code (IPCCC), to enhance global communication, and facilitate patient care, research, and training in paediatric and congenital heart disease across disciplines. In other words, the IPCCC provides a common language and terminology, inclusive of definitions and imaging, which covers the entire field of diagnostic and procedural terms for paediatric and congenital heart disease. The IPCCC is the product of the cross-mapping work by the ISNPCHD Nomenclature Working Group during the decade following the publication in 2000 of two similar and complementary nomenclature systems – namely, the International Congenital Heart Surgery Nomenclature and Database Project under the auspices of the European Association for Cardio-Thoracic Surgery and Society of Thoracic Surgeons, and the European Paediatric Cardiac Code under the auspices of the Association for European Paediatric Cardiology. The IPCCC is owned by the ISNPCHD but is digitally published for free download for private use (www.ipccc.net) in these two Societal versions, both with a Long List of over 10,000 terms with qualifiers and a Short List of up to 1000 terms for use in databases when comparing institutional outcomes, both nationally and internationally. The Long Lists of the IPCCC comprehensively cover the field of paediatric and congenital cardiac care, including diagnoses of congenital and related acquired pathology, co-morbid conditions, transcatheter and operative procedures, and a full list of post-procedural complications. The Short Lists are used within databases across the world with over 500,000 registered patients. The ISNPCHD encourages the commercial use of the IPCCC by requiring and providing free-of-charge licence agreements for its use, to ensure that the IPCCC remains unaltered by parties other than the ISNPCHD.

Since 2007, the ISNPCHD has been operating through three working groups:

- The *Nomenclature Working Group*, which continues to maintain, develop, expand, update, and preserve the IPCCC.
- The *Definitions Working Group*, which is engaged in writing definitions for the terms in the IPCCC. More recently this has focussed on the terms provided by the ISNPCHD at the behest of the World Health Organization (WHO) for the 11th

revision of the International Classification of Diseases.

- The *Archiving Working Group*, which is engaged in linking images and videos to the IPCCC, including cardiac morphologic specimens, echocardiography, angiography, computerised axial tomography, magnetic resonance imaging, intraoperative photographs, and intraoperative videos.

The ISNPCHD, through the IPCCC, enables institutions from around the world to seamlessly communicate with each other, comparing and then improving outcomes and the quality of care that is given to children, young people, and adults born with malformed hearts. This common language enables institutions to learn from those hospitals performing best at a global level, as well as facilitating research projects, such as comparing the longer-term quality of life and complications in those who have required operative and transcatheter interventions. In addition, the nomenclature with corresponding definitions and matching imaging enhances teaching of this speciality to the next generation of clinicians dedicated to paediatric and congenital cardiac care, both in the developed and developing world.

The Pediatric Cardiac Intensive Care Society (PCICS)

PCICS is engaged in an active dialogue with *Cardiology in the Young* and is considering the adoption of *Cardiology in the Young* as an affiliated journal. Below are some bullet points about PCICS:

- PCICS is the largest international organisation of paediatric cardiac intensivists.
- PCICS holds annual meetings that currently rotate between Europe and North America.
- John Costello, our new Associate Editor for Critical Care, is on the Board of Directors of PCICS.
- Dr Peter Laussen is the current President of the Pediatric Cardiac Intensive Care Society and is a member of the Editorial Board of *Cardiology in the Young*.
- Paul A. Checchia, MD, FCCM, FACC, is Vice President and Incoming President of the Pediatric Cardiac Intensive Care Society, and is a member of the Editorial Board of *Cardiology in the Young*.
- I am also a member of the Board of Directors of PCICS.
- Additional representatives of the PCICS on the Editorial Board of *Cardiology in the Young* are Dr David Cooper, Dr Allan Goldman, and Dr Parvathi Iyer.

- If *Cardiology in the Young* becomes an affiliated journal of PCICS, we can expect to receive multiple high-quality manuscript submissions from PCICS, and potentially Consensus Statements published by PCICS that have high Impact Factor.

PCICS was formed to provide an international professional forum to promote excellence in paediatric cardiac critical care medicine.⁹ The founders of the society launched the inaugural membership campaign in 2003. By the end of 2005, PCICS had held their first Symposium and had grown to 250 members in 12 nations.⁹ PCICS seeks participation by healthcare professionals dedicated to acquiring knowledge and improving practice for critically ill patients with congenital and acquired cardiac disease.

The Purpose of PCICS is to⁹

- support, encourage, and promote excellence in medical care and research in the field of paediatric cardiac critical care medicine;
- encourage collegial relationships among paediatric specialists;
- improve the level of care of paediatric and adult patients with congenital cardiac disease, paediatric patients with acquired cardiovascular disease, and paediatric patients after cardiac surgery;
- promote basic and clinical research related to paediatric patients in the perioperative period;
- organise international scientific meetings on a permanent basis; facilitate links between complementary international and national professional colleges and societies; and
- promote and disseminate related educational material through established and developing communication technologies.

The World Congress of Pediatric Cardiology and Cardiac Surgery (WCPCCS)

WCPCCS is engaged in an active dialogue with *Cardiology in the Young* and is considering the adoption of *Cardiology in the Young* as their official journal. Below are some bullet points about WCPCCS:^{10,11}

- WCPCCS is an international meeting that is held every 4 years and attended by 4000 or more delegates.
- WCPCCS is held every 4 years and represents in many ways the “Olympics” for HealthCare Professionals caring for patients with paediatric and congenital cardiac disease.
- WCPCCS is under the overall control of an International Steering Committee whose membership

Table 1. Editorial Board of *Cardiology in the Young*

Editor-in-Chief	Jeffrey P. Jacobs, MD, FACS, FACC, FCCP <i>Professor of Surgery, Johns Hopkins University</i> <i>Director, Andrews/Daicoff Cardiovascular Program</i> <i>Surgical Director of Heart Transplantation and Extracorporeal Life Support Programs</i> <i>Johns Hopkins All Children's Heart Institute</i> <i>601 Fifth Street South, Suite 607</i> <i>Saint Petersburg, Florida 33701, United States of America</i> JeffJacobs@msn.com	
Past Editor-in-Chief	Edward Baker MD, FRCP, FRCPC <i>Professor Edward Baker</i> <i>Medical Director</i> <i>Oxford Radcliffe Hospitals NHS Trust</i> <i>John Radcliffe Hospital</i> <i>Headington</i> <i>Oxford</i> <i>OX3 9DU</i> <i>United Kingdom</i>	
Emeritus Founding Editors	Professor Robert H. Anderson Dr G. William Henry	University College, London, United Kingdom University of North Carolina at Chapel Hill, United States of America
Senior Associate Editor	Allen D. Everett, MD, FACC, FSCAI, FAPS	Johns Hopkins University, Baltimore, United States of America
Associate Editor for Surgery	Henry L. Walters III, MD	Children's Hospital of Michigan, United States of America
Associate Editor for Cardiology	Rodney C.G. Franklin, MD, FRCP, FRCPC	Royal Brompton & Harefield Hospital NHS Foundation Trust, United Kingdom
Associate Editor for Critical Care	John M. Costello, MD, MPH	Northwestern University Feinberg School of Medicine, United States of America
Associate Editor for Interventional Cardiology	Kevin D. Hill, MD, MSCI	Duke University, United States of America
Associate Editor for Nursing	Patricia Hickey, PhD, MBA, RN, FAAN, NEA-BC	Boston Children's Hospital, Boston, Massachusetts, United States of America
Associate Editor for Mentorship	Shakeel Ahmed Qureshi, MBCHB, FRCP, FRCPC	Evelina Children's Hospital, United Kingdom
Associate Editor for Cultural, Ethical, and Humanitarian Affairs	Professor Tom R. Karl	University of Queensland; Mater Children's Hospital, Australia
Associate Editor for Interdisciplinary Collaboration	Gil Wernovsky, MD, FAAP, FACC	Miami Children's Hospital, United States of America
Supplements Editor	Jeffrey P. Jacobs, MD, FACS, FACC, FCCP	All Children's Hospital, Johns Hopkins University, Saint Petersburg, Tampa, and Orlando, United States of America
Images Editor	Dr Roxane McKay	Minnesota, United States of America
International Editor	Professor Hiromi Kurosawa	Tokyo Women's Medical University, Japan

Table 1. *Continued*

Founding Editors	Professor Anton Becker Dr Giancarlo Crupi Dr Arthur Garson, Jr Dr Fernando Lucchese Professor Michael Tynan	Amsterdam, The Netherlands Ospedale Riuniti (Bergamo), Italy University of Virginia, Charlottesville, United States of America Hospital São Francisco, Porto Alegre, Brazil London, United Kingdom
International Editorial Board	Professor Lindsey Allan Dr Maurice Beghetti Dr Lee Benson Dr Per Bjørnstad Dr Anthony Chang Professor Tjark Ebels Dr Timothy Feltes Dr J William Gaynor Dr Allan Goldman Dr Willem Helbing Professor John Hess Dr Eero Jokinen Professor Hiromi Kurosawa Dr Doff B McElhinney Dr Luc Mertens Dr Cleonice de C Mota Dr Jane Newburger Dr Edgardo Ortiz Professor Daniel Penny Dr Andrew Redington Dr Girish Shirali Dr Norman Silverman Dr Giovanni Stellin Dr Andras Szatmari Dr Hideki Uemura Dr Steven Webber Dr James Wilkinson Dr Shi-Joon Yoo	King's College Hospital, London, United Kingdom Hôpital des Enfants, Geneva, Switzerland Hospital for Sick Children, Toronto, Canada Oslo, Norway Children's Hospital of Orange County, United States of America Academisch Ziekenhuis Groningen, The Netherlands Ohio State University, Columbus, United States of America The Children's Hospital of Philadelphia (CHOP), United States of America Great Ormond Street Hospital Children, London, United Kingdom Sophia Children's Hospital, Rotterdam, The Netherlands Deutsches Herzzentrum München, Germany Helsinki University Children's Hospital, Finland Tokyo Women's Medical University, Japan Stanford University Medical Center, Palo Alto, United States of America The Hospital for Sick Children, Toronto, Canada Universidade Federal de Minas Gerais, Belo Horizonte, Brazil Boston Children's Hospital, Boston, Massachusetts, United States of America Philippine Children's Medical Center, Quezon City, Philippines Texas Children's Hospital, Houston, Texas, United States of America The Hospital for Sick Children, Toronto, Canada Medical University of South Carolina, Charleston, United States of America Stanford University Medical Center, Palo Alto, United States of America Universita di Padova, Italy Hungarian Center for Pediatric Cardiology, Budapest, Hungary Royal Brompton Hospital, London, United Kingdom Vanderbilt University, Nashville, Tennessee, United States of America Royal Children's Hospital, Melbourne, Australia Hospital for Sick Children, Toronto, Canada
New Members of International Editorial Board	Professor Vera Aiello Dr Zohair Al Halees Dr Marie Josée Hélène Béland Dr Paul Andrew Checchia Professor M. Sertac Cicek Dr Mitchell Cohen Dr Steven Colan Dr David Cooper Professor William Michael DeCampli	University of São Paulo Medical School, Brazil King Faisal Specialist Hospital & Research Centre, Saudi Arabia Montreal Children's Hospital, Canada Texas Children's Hospital, Houston, Texas, United States of America Anadolu Health Foundation, Turkey Phoenix Children's Hospital, United States of America Boston Children's Hospital, Boston, Massachusetts, United States of America Cincinnati Children's Hospital Medical Center, United States of America Arnold Palmer Hospital for Children, Florida, United States of America

Table 1. *Continued*

	Dr Christopher Thomas Hugo-Hamman	Christiaan Barnard Memorial Hospital, South Africa
	Dr Krishna Iyer	Fortis Escorts Heart Institute and Research Centre, India
	Dr Parvathi Iyer	Fortis Escorts Heart Institute and Research Centre, India
	Dr Otto Krogmann	Heart Center Duisburg, Germany
	Dr Peter Laussen	Hospital for Sick Children, Toronto, Canada
	Professor Bohdan Jarosław Maruszewski	Children's Memorial Health Institute, Poland
	Professor Stephen Seslar	University of Washington, United States of America
	Professor Narayanswami Sreeram	University Hospital of Cologne, Germany
	Dr James D. St. Louis	University of Minnesota, United States of America
	Professor Christo Ivanov Tchervenkov	The Montreal Children's Hospital, Canada
	Dr Paul Weinberg	The Children's Hospital of Philadelphia (CHOP), United States of America
Committee on Mentorship	Shakeel Ahmed Qureshi, MBCHB, FRCP, FRCPCH	Evelina Children's Hospital, United Kingdom
	Jeffrey P. Jacobs, MD, FACS, FACC, FCCP	All Children's Hospital, Johns Hopkins University, Saint Petersburg, Tampa, and Orlando, United States of America
	Dr Lee Benson	Hospital for Sick Children, Toronto, Canada
	Dr Rui Anjos	CUF Descobertas Hospital, Portugal
	Dr Bharat Dalvi	Glenmark Cardiac Centre, India
	Dr Kuberan Pushparajah	Evelina Children's Hospital, United Kingdom
	Dr Gurleen Sharland	Evelina Children's Hospital, United Kingdom
AEPC Representation	Professor Lindsey Allan	King's College Hospital, London, United Kingdom
	Dr Rui Anjos	CUF Descobertas Hospital, Portugal
	Edward Baker, MD, FRCP, FRCPCH	Oxford Radcliffe Hospitals NHS Trust, Oxford, United Kingdom
	Professor Anton Becker	Amsterdam, The Netherlands
	Dr Maurice Beghetti	Hôpital des Enfants, Geneva, Switzerland
	Dr Per Bjørnstad	Oslo, Norway
	Dr Giancarlo Crupi	Ospedale Riuniti (Bergamo), Italy
	Rodney C.G. Franklin, MD, FRCP, FRCPCH	Royal Brompton & Harefield Hospital NHS Foundation Trust, United Kingdom
	Dr Allan Goldman	Great Ormond Street Hospital Children, London, United Kingdom
	Dr Willem Helbing	Sophia Children's Hospital, Rotterdam, The Netherlands
	Professor John Hess	Deutsches Herzzentrum München, Germany
	Dr Eero Jokinen	Helsinki University Children's Hospital, Finland
	Dr Otto Krogmann	Heart Center Duisburg, Germany
	Dr Kuberan Pushparajah	Evelina Children's Hospital, United Kingdom
	Shakeel Ahmed Qureshi, MBCHB, FRCP, FRCPCH	Evelina Children's Hospital, United Kingdom
	Dr Gurleen Sharland	Evelina Children's Hospital, United Kingdom
	Professor Narayanswami Sreeram	University Hospital of Cologne, Germany
	Dr Andras Szatmari	Hungarian Center for Pediatric Cardiology, Budapest, Hungary
	Professor Michael Tynan	London, United Kingdom
	Dr Hideki Uemura	Royal Brompton Hospital, London, United Kingdom

Table 1. *Continued*

ISNPCHD Representation		
ISNPCHD – NWG	<p>Professor Vera Aiello Dr Marie Josée Hélène Béland Dr Steven Colan Rodney C.G. Franklin, MD, FRCP, FRCPC Jeffrey P. Jacobs, MD, FACS, FACC, FCCP</p> <p>Dr J William Gaynor Professor Hiromi Kurosawa Dr Otto Krogmann Professor Bohdan Jarosław Maruszewski Dr Giovanni Stellin Professor Christo Ivanov Tchervenkov Dr Paul Weinberg</p>	<p>University of São Paulo Medical School, Brazil Montreal Children's Hospital, Canada Boston Children's Hospital, Boston, Massachusetts, United States of America Royal Brompton & Harefield Hospital NHS Foundation Trust, United Kingdom All Children's Hospital, Johns Hopkins University, Saint Petersburg, Tampa, and Orlando, United States of America The Children's Hospital of Philadelphia (CHOP), United States of America Tokyo Women's Medical University, Japan Heart Center Duisburg, Germany Children's Memorial Health Institute, Poland Universita di Padova, Italy The Montreal Children's Hospital, Canada The Children's Hospital of Philadelphia (CHOP), United States of America</p>
ISNPCHD – Additional Representation	<p>Professor Robert H. Anderson Allen D. Everett, MD, FACC, FSCAI, FAPS Henry L. Walters III, MD Professor Stephen Seslar Dr James D. St. Louis</p>	<p>University College, London, United Kingdom Johns Hopkins University, Baltimore, United States of America Children's Hospital of Michigan, United States of America University of Washington, United States of America University of Minnesota, United States of America</p>
PCICS Representation	<p>Dr Paul Andrew Checchia Dr David Cooper John M. Costello, MD, MPH Dr Allan Goldman Jeffrey P. Jacobs, MD, FACS, FACC, FCCP</p> <p>Dr Parvathi Iyer Dr Peter Laussen</p>	<p>Texas Children's Hospital, Houston, Texas, United States of America Cincinnati Children's Hospital Medical Center, United States of America Northwestern University Feinberg School of Medicine, United States of America Great Ormond Street Hospital Children, London, United Kingdom All Children's Hospital, Johns Hopkins University, Saint Petersburg, Tampa, and Orlando, United States of America Fortis Escorts Heart Institute and Research Centre, India Hospital for Sick Children, Toronto, Canada</p>
WCPCCS Representation	<p>Dr Zohair Al Halees Dr Lee Benson Professor M. Sertac Cicek Dr Christopher Thomas Hugo-Hamman Jeffrey P. Jacobs, MD, FACS, FACC, FCCP</p> <p>Professor Tom R. Karl Professor Hiromi Kurosawa Dr Krishna Iyer Shakeel Ahmed Qureshi, MBCHB, FRCP, FRCPC Gil Wernovsky, MD, FAAP, FACC Dr James Wilkinson</p>	<p>King Faisal Specialist Hospital & Research Centre, Saudi Arabia Hospital for Sick Children, Toronto, Canada Anadolu Health Foundation, Turkey Christiaan Barnard Memorial Hospital, South Africa All Children's Hospital, Johns Hopkins University, Saint Petersburg, Tampa, and Orlando, United States of America University of Queensland; Mater Children's Hospital, Australia Tokyo Women's Medical University, Japan Fortis Escorts Heart Institute and Research Centre, India Evelina Children's Hospital, United Kingdom Miami Children's Hospital, United States of America Royal Children's Hospital, Melbourne, Australia</p>

is 50% paediatric cardiologists and 50% cardiac surgeons.

- The international Steering Committee has 20–25 members at any time.
- Dr Christopher Thomas Hugo-Hamman is Chair of the Steering Committee of the World Congress of Paediatric Cardiology and Cardiac Surgery and is also a member of the Editorial Board of *Cardiology in the Young*.
- Tom Karl, Gil Wernovsky, and I are members of the international Steering Committee of WCPCCS.
- Several members of the international Steering Committee of WCPCCS are also members of the Editorial Board of *Cardiology in the Young*, including Dr Zohair Al Halees, Dr Lee Benson, Professor M. Sertac Cicek, Dr Christopher Thomas Hugo-Hamman, Dr Jeffrey P. Jacobs, Professor Tom R. Karl, Professor Hiromi Kurosawa, Dr Krishna Iyer, Shakeel Ahmed Qureshi, MBCHB, FRCP, FRCPC, Gil Wernovsky, MD, FAAP, FACC, and Dr James Wilkinson.
- The joint (cardiology/surgery) WCPCCS was initiated after separate World Congresses of Paediatric Cardiology (London 1980, New York 1984, Bangkok 1989) and Paediatric Cardiac Surgery (Bergamo, Italy 1988) during the 1980s. Each World Congress has had its own local organising committee and scientific/programme committee. Previous joint (cardiology/surgery) WCPCCS have been held in Paris (1993), Hawaii (1997), Toronto (2001), Buenos Aires (2005), Cairns (2009), and Cape Town (2013). The 2017 bid has been won by Istanbul.
- WCPCCS holds a huge meeting every 4 years – the largest meeting in the world for healthcare professionals dedicated to paediatric and congenital cardiac care.
- *Cardiology in the Young* can benefit by publishing abstracts from WCPCCS, as well as the best manuscripts from WCPCCS.
- If *Cardiology in the Young* becomes the official journal of WCPCCS, we can expect to receive multiple high-quality manuscript submissions and important high-impact content from WCPCCS.

The first World Congress of Paediatric Cardiology was held in London, United Kingdom, in 1980, organised by Dr Jane Somerville and Professor Fergus Macartney.¹⁰ The idea was that of Jane Somerville, who worked with enormous energy and enthusiasm to bring together paediatric cardiologists and surgeons from around the world.¹¹ The second World Congress of Paediatric Cardiology took place in New

York in 1985, organised by Bill Rashkind, Mary Ellen Engle, and Eugene Doyle. The third World Congress of Paediatric Cardiology was held in Bangkok, Thailand, in 1989, organised by Chompol Vongprateep. Although cardiac surgeons were heavily involved in these early meetings, a separate World Congress of Paediatric Cardiac Surgery was held in Bergamo, Italy, in 1988, organised by Lucio Parenzan. Thereafter, it was recognised that surgeons and cardiologists working on the same problems and driven by a desire to help children should really rather meet together. A momentous decision was taken to initiate a Joint World Congress of Paediatric Cardiology and Cardiac Surgery.¹⁰ A steering committee was established with membership comprising the main organisers of the four separate previous Congresses, and additional members were recruited in an effort to achieve numerical equality of cardiologists and surgeons and a broad geographical representation. The historic first “World Congress of Paediatric Cardiology and Cardiac Surgery” took place in Paris in June, 1993, organised by Jean Kachaner. The next was to have been held in Japan, but the catastrophic Kobe earthquake in 1995 forced relocation to Hawaii in 1997. Then followed Toronto, Canada (2001, organised by Bill Williams and Lee Benson), Buenos Aires, Argentina (2005, organised by Horatio Capelli and Guillermo Kreutzer), and Cairns, Australia (2009, organised by Jim Wilkinson). Most recently, having visited Europe (1993), Asia-Pacific (1997), North America (2001), South America (2005), and Australia (2009), and reflecting the “African Renaissance”, the sixth World Congress of Paediatric Cardiology and Cardiac Surgery was held in Cape Town, South Africa, from 17 to 22 February, 2013, organised by Christopher Hugo-Hamman.¹²

The Seventh World Congress of Paediatric Cardiology and Cardiac Surgery will be held in Istanbul, the only city in the world that is located on two continents, from 18 to 23 June, 2017, under the leadership of Professor M. Sertac Cicek.¹³ This World Congress promises academic excellence in a culturally stimulating environment. All those interested in the care of patients with paediatric and congenital cardiac disease should attend this meeting, which represents “The Olympics of our Profession”. Information about The sixth World Congress of Paediatric Cardiology and Cardiac Surgery can be found at (<http://wcpccs2017.org/en/>).

Summary

The vision of *Cardiology in the Young* is to use print and electronic media to improve paediatric and congenital cardiac care.

The mission of *Cardiology in the Young* is to be a premier global journal for paediatric and congenital cardiac care – an essential journal that spans the domains of patient care, research, education, and advocacy, and also spans geographical, temporal, and subspeciality boundaries.

As we complete the 1st year of new leadership of *Cardiology in the Young*, we acknowledge the important contributions made by our prior leaders:

- Professor Robert H. Anderson, University College, London, United Kingdom (Emeritus Founding Editor).
- Dr G. William Henry, University of North Carolina at Chapel Hill, United States of America (Emeritus Founding Editor).
- Edward Baker, MD, FRCP, FRCPC, Oxford, United Kingdom (Past Editor-in-Chief).

Over the past year, we have expanded our Editorial Board and leadership as well as our societal partnerships. These changes have been made with the following goals:

- maintaining our position as a premier global journal for paediatric and congenital cardiac care;
- facilitating our ability to span the domains of patient care, research, education, and advocacy; and
- enhancing our ability to span geographical, temporal, and subspeciality boundaries.

By achieving these objectives, *Cardiology in the Young* will be well positioned to continue to use print and electronic media to improve paediatric and congenital cardiac care.

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