News and comment

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rom this issue of *Cardiology in the Young*, we are delighted to welcome a new member to our editorial team. Bob Anderson, cardiac morphologist from London, and previously European Editor of the International Journal of Cardiology, has resigned from the latter journal so as to join us in our quest to become the foremost Journal concerned with cardiology in the young. He will now become an important part of our overall team, which will continue to function from our offices in Bergamo and London. Bob will have the particular task of supervising assessment of pediatric cardiologic and morphologic papers, as well as ensuring an overall uniformity of style in grammar and literary presentation. He will bring with him considerable experience working with authors and referees as gained during his tenure at the International Journal of Cardiology. Over this time the Journal gained a reputation for respecting the rights of authors and for minimizing (as far as possible) the unwanted bias of referees. We hope to continue both of these trends, already established, when dealing with manuscripts submitted to Cardiology in the Young.

We have also established, as part of our overall policy, the desire to encourage discussion of contentious topics. To that end, we publish two editorials in this issue which address areas which, in the past, have generated widely contrasting views.

In the first editorial, Norman Silverman and Isobel Muhiudeen assess the role of transesophageal echocardiography in infants and children. Whilst recognizing the unequivocal utility of the technique in certain circumstances, they wonder if it is that much better then transthoracic investigation when used for routine examinations in this age group.

Another editorial concerns the topic of isomerism of the atrial appendages. In a recent editorial published in the *American Journal of Cardiology*, Richard Van Praagh and his colleagues argued strongly against the notion of atrial isomerism.² In our editorial, William Devine presents an opposing viewpoint, emphasizing that it is the appendages which are isomeric, and that it is the

morphology of their junctions with the venous components of the atriums which is the most convincing criterion for diagnosis.³ The importance of analyzing separately the state of the spleen from the morphology of the appendages is then emphasized by two excellent studies conducted by Steven Webber and his colleagues from Vancouver.^{4,5} Fascinatingly, they show that, of cases recognized from the population because of congenital absence of the spleen, some can have virtually normal arrangement of the heart and thoracoabdominal organs, albeit still with a tendency towards incomplete lateralization.

We hope that anyone who takes issue with the views expressed will themselves write to voice their own opinions. The success of *Cardiology in the Young* will depend on the opportunity to promote free and informed exchanges of opinion. To date, 123 authors on six continents have contributed to the contents of *Cardiology in the Young*. In fact, the response to the journal necessitated a second printing of two issues. The strength of the editorial board, whose members have devoted much time and energy in the review process, is represented in the variety and excellence of the material published thus far. We are extremely grateful to all of our colleagues who have participated in this endeavor, and we look forward to expanding participation to all who are willing.

For those readers in terested in logistics, the publisher has been presented with unusual problems to solve in the distribution of the journal to six continents during the first year of the journal's publication. The war in the Persian Gulf closed the Suez Canal to commercial shipping, stranding some shipments of one issue. This was followed by the B.C.C.I. scandal that delayed commercial shippers obtaining valid letters of credit as their ships were docked in Hong Kong harbor. One transshipment through the former U.S.S.R. has never been located.

Finally, we are pleased to publish the manuscript by

Sheri Carroll and her colleagues at the University of North Carolina, the Indian Institute of Technology and the Georgia Institute of Technology. Ms. Carroll's work in the area of fluid mechanics/flow visualization in the pulmonary circulation was presented in Kyoto last summer at the World Congress of Biomedical Engineering. Furthermore, she is this year's winner of the World Forum for Pediatric Cardiology Student Research Competition. She was recently awarded a scholarship of US\$1000 from the World Forum to further her education in the United States. The most astounding aspect of her work is the level of academic performance despite her student status—undergraduate student I might add! We congratulate her.

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