N THIS COMMENT "FROM THE EDITORS", WE continue our discussion of the topics set out in our February issue. 1 In that issue, we announced the establishment of the World Society for Paediatric and Congenital Heart Surgery. We added our own hopes that, potentially, this society could expand into an association that would represent, in democratic fashion, the needs of those practising throughout the world in the various specialities involved with Cardiology in the Young. For those who may have missed our original announcement, we emphasise again that the first meeting of the new society will be held in Washington, District of Columbia, at the beginning of May, hosted by Richard Jonas. We hope that it will be attended by representatives from all disciplines, even though the focus will be paediatric cardiac surgery. Details of the programme, and the officers of the new society, are available from www.wspchs.com.

Hard on the heels of the announcement of the new World Society for Paediatric and Congenital Heart Surgery, we were contacted at Cardiology in the Young with news of the establishment of the new Brazilian Society of Paediatric Cardiology (www.cardiol.br). In previous years, the needs and requirements of the very many paediatric cardiologists and paediatric cardiac surgeons practising in Brazil, along with their colleagues working in related disciplines, have been met by the Brazilian Society of Cardiology. Many of us, including the Editor-in Chief, have been guests at their splendid annual meetings. Good as it is for paediatric cardiology to have a small, but special, part of these huge meetings, and hard as the officers for the sub-specialties try, there is no doubt that those involved with cardiology in the young feel that they are relatively minor participants in such meetings. Many of their colleagues practising in adult cardiology are able to obtain sponsorship to support their attendance, an option less readily available to those working exclusively with neonates, infants, and children. Even if those involved with the "junior" specialty support themselves to attend the meetings, they often find it difficult to obtain hotel accommodation due to block booking by the industry. In similar fashion, restaurants also tend to be fully booked by industry, and try as they might, the paediatric cardiologists or surgeons, and their colleagues, are simply submerged by

the numbers of their counterparts working in adult cardiology and cardiac surgery.

For all these reasons, it is much more pleasant, in our opinion, and far more educational, to attend meetings specifically designed for paediatric cardiologists, paediatric cardiac surgeons, and those working in related disciplines. The exemplar of such a meeting is the superb event organised annually by the Association for European Paediatric Cardiology (www.aepc.org). Not only do those meetings provide the opportunity for specialists, and those in training, to meet together in convivial surroundings, but they now provide firstclass programmes of education. The officers of the Association now also represent their members within the "corridors of power" of the ever-expanding European Union. Those who have established the new Brazilian Society of Paediatric Cardiology, led by their first president, Sandra Mattos, hope that their new grouping will emulate the achievements of the European Association, representing in democratic fashion not only in Brazil, but also on the World stage, the needs of all their members. It is, of course, the case that we at Cardiology in the Young have a very special relationship with the European Association. All members of the European Association now receive the Journal as part of their dues. We publish on a regular basis, and as a stand-alone supplement, the abstracts of all the presentations given, and posters displayed, at the annual meeting. We also try, whenever possible, to publish a Newsletter from the Association in each of our issues, and the President and Secretary-General of the Association now occupy "ex-officio" seats on our Editorial Board. We hope that we will be able to negotiate similar arrangements with the newly-formed Brazilian Society, but there are problems. The economy is such currently in Brazil that it may not be possible for the new society to set its dues at a level sufficiently high to include a subscription for their entire membership. It is also unlikely that they can fund the production of standalone supplements. We are exploring, therefore, the possibility of publishing their abstracts in exclusively electronic fashion, and perhaps a means of offering electronic subscriptions to the Journal.

It is the matter of electronic publishing that brings us to the crux of this particular editorial comment.

By the time you read this message, we will all have enjoyed the 2007 version of "Heart Week in Florida". For those of you who have not previously attended one of these spectacular meetings, they are the closest thing existing in North America to meetings designed specifically to meet the needs of those working in the fields of cardiology in the young. "Heart Week in Florida" is a joint collaborative project sponsored by the Children's Hospital of Philadelphia together with the Congenital Heart Institute of Florida, and has now become recognized as one of the major planks of continuing medical and nursing education for those working in the fields of diagnosis and treatment of heart disease in neonates, infants, children, and young adults. We anticipate that the meeting held in St. Petersburg, and organised by The Congenital Heart Institute of Florida and All Children's Hospital, will have attracted over 300 participants. The meeting focused on hypoplastic left heart syndrome, with an additional one day mini-symposium centred on the multidisciplinary challenges of caring for adult patients with congenital cardiac disease. The subsequent meeting, held in Orlando, and organised by the Cardiac Center at The Children's Hospital of Philadelphia, will have been attended, if the trend we now see continues, by over 800 interested physicians, surgeons, nurses, along with those working in allied disciplines. This year, as in previous years, the programme at St Petersburg will be delivered by a hand-picked faculty. Again as in previous years, thanks to the generosity of All Children's Hospital, ^{2–5} and in the last supplement⁵ thanks to support from industry, we will hopefully publish the written accounts of selected presentations as a special supplement to the Journal, combining these reviews with the very best of those given in Orlando during the meeting organised by the Children's Hospital of Philadelphia.

This year, as in the past, the meeting in Orlando presents a mix of plenary topics, subspecialty breakouts, controversies, and late breaking research. Indeed, a highpoint of Cardiology 2007 in Orlando will be the display of over 70 posters, as well as three oral abstracts competing for the 4th Annual Outstanding Investigator Award. The quality of the work described in these abstracts is fantastic. These have been selected by the faculty from well over 100 submitted for consideration, representing work from over 50 separate centres and 16 different countries. For these reasons, it is our wish to publish them in Cardiology in the Young. In some instances, such as where the abstracts have already been published, or have been submitted for publication, this will not be possible, the abstracts having previously been published by the American Heart Association, or similar bodies, and the work itself currently being under consideration for publication.

Many abstracts, however, are available for publication, as will be those to be presented at the inaugural meeting of the World Society of Paediatric and Congenital Heart Surgery. At this latter meeting, the initial day will be devoted to a postgraduate course centred on the multidisciplinary approach to Tetralogy of Fallot. This will be followed by a second day featuring an honorary guest lecture by Aldo Castaneda, 18 oral presentations, and multiple poster presentations derived from over 70 submitted abstracts. Our problem is to determine how best we can publish these deserving contributions. It remains a fact that, during the early stages of careers, material presented in abstract form remains a crucial stepping-stone. As far as journals are concerned, unless funds are available to publish abstracts as "stand-alone" supplements, as we achieve on behalf of the Association for European Paediatric Cardiology, and as is done by the American Heart Association and the American College of Cardiology, the abstracts would occupy many more pages within the regular issues of the Journal than are available to accommodate them. The potential solution, as already discussed, lies in publishing exclusively in electronic format. Individual authors will be able to cite exclusively electronic supplements through the digital object identifier (doi), and make reference to their abstract published therein. This will apply to abstracts accepted for publication from the meetings held in Orlando and Washington, District of Columbia. All eligible abstracts presented at the meeting, therefore, have been allocated a specific number, allowing authors to cite their abstract as part of two distinct supplements to the Journal, which we will make available via our website at www.journals.cambridge. org/jid CTY.

Finally, the emergence of the Brazilian Society of Paediatric Cardiology, and the establishment of the World Society for Paediatric and Congenital Heart Surgery, points to a huge hiatus in world-wide representation. This is the notable absence of a North American Society for Paediatric Cardiology. There is, of course, a newly created Joint Council on Congenital Heart Disease, which is composed of representatives of the American Board of Paediatrics, the American College of Cardiology, the American Heart Association, the American Academy of Paediatrics, the Congenital Heart Surgeons' Society, the International Society for Adult Congenital Cardiac Disease, and the Society of Thoracic Surgeons. This council is currently chaired by Gerard Martin, from Washington, District of Columbia. It is our hope that he may wish to use our pages to express his own views on this issue. It is also the case that many "local" societies already exist in North America, and their officers organise meetings of the highest quality. It is our wish to provide a service for all these gatherings, but it would be much easier to achieve this goal via a North American Society of Paediatric Cardiology, or better still, a World Society for Paediatric and Congenital Heart Disease. We will address these aspects further in our next issue.

Robert H. Anderson
Editor-in-Chief, Cardiology in the Young
Gil Wernovsky
Supplements Editor, Cardiology in the Young
Jeffrey P. Jacobs
Editorial Board Member, Cardiology in the Young

References

- Jacobs JP, Anderson RH. News and Comments. Cardiol Young 2007; 17: 1–2.
- Jacobs JP, Anderson RH (Eds.). Controversies relating to the hypoplastic left heart syndrome. Cardiol Young 2004; 14 (Suppl 1): I1–I130.

- Jacobs JP, Wernovsky G, Gaynor JW, Anderson RH (Eds.). Controversies concerning the ventriculo-arterial junctions and other topics. Cardiol Young 2005; 15 (Suppl 1): I1–I198.
- Jacobs JP, Wernovsky G, Gaynor JW, Anderson RH (Eds.). Controversies and challenges in the management of the functionally univentricular heart. Cardiol Young 2006; 16 (Suppl 1): I1–I104.
- Jacobs JP, Wernovsky G, Gaynor JW, Anderson RH (Eds.). Controversies and challenges of the atrioventricular junctions and other challenges facing paediatric cardiovascular practitioners and their patients. Cardiol Young 2006; 16 (Suppl 3): III1–III156.