

EUROPEAN NATIONAL SOCIETY CARDIOVASCULAR JOURNALS BACKGROUND, RATIONALE AND MISSION STATEMENT OF THE “EDITORS’ CLUB” (TASK FORCE OF THE EUROPEAN SOCIETY OF CARDIOLOGY)

Fernando ALFONSO¹, Giuseppe AMBROSIO², Fausto PINTO³, Ernst VAN DER WALL⁴

¹Editor-in-Chief of “Revista Española de Cardiología”, published by the Spanish Society of Cardiology;

²Editor-in-Chief of “Giornale Italiano di Cardiologia”, published by the Italian Federation of Cardiology;

³Editor-in-Chief of “Revista Portuguesa de Cardiologia”, published by the Portuguese Society of Cardiology;

⁴Editor-in-Chief of “Netherlands Heart Journal”, published by the Netherlands Society of Cardiology

Djamaledine Nibouche, Karlen Adamyan, Kurt Huber, Hugo Ector, Izet Masic, Rumiana Tarnovska, Mario Ivanusa, Vladimír Staněk, Jørgen Videbæk, Mohamed Hamed, Alexandras Laucevicius, Pirjo Mustonen, Jean-Yves Artigou, Mamanti Rogava, Michael Böhm, Eckart Fleck, Gerd Heusch, Rainer Klawki, Panos Vardas, Christodoulos Stefanadis, József Tenczer, Gianluigi Nicolosi, Aleksandras Laucevicius, Joseph Elias, Aleksandras Laucevicius, Abdelhamid Moustaghfir, Olaf Rødevand, Piotr Kułakowski, Victor A. Lusov, Rafael G. Oganov, Arsen Ristic, Gabriel Kamensky, Miran F. Kenda, Christer Höglund, Thomas F. Lüscher, René Lerch, Sami Kabbani, Habib Haouala, Vedat Sansoy, Alexandr Shumakov, Adam Timmis
(European National Society Cardiovascular Journals Editors, see *Appendix* for complete affiliations)

INTRODUCTION

Cardiovascular scientific production in Europe is growing both in quantity and in quality. Promoting high-quality research is a major goal of the European Society of Cardiology (ESC) [1-3]. The ESC has two highly respected official general journals, namely the European Heart Journal and Cardiovascular Research, devoted to clinical and basic research respectively [1-3]. The ESC also publishes several sub-speciality official journals covering the full spectrum of cardiovascular diseases and related techniques. Most European countries, however, also have their own cardiovascular journals. National Society Cardiovascular Journals (NSCJ) are time-honored and classically disseminate high-quality scientific research mainly originating from each particular European country. They also play a major role in education and harmonization of clinical practice. Most NSCJ are published in local languages but many of them also incorporate English editions. Altogether, NSCJ provide a highly effective means to disseminate cardiovascular research produced in Europe. Scientific knowledge, however, has no barriers and many of these journals have gained an undisputed international profile. Some NSCJ, however, are just emerging and would benefit from networking support. It became clear that enhancing collaboration among NSCJ Editors would facilitate advancement in knowledge and further diffusion of scientific and educative contents.

Developing a “Constituency Document” and “Mission Statement” was considered desirable to set the basis of future collaboration among NSCJ Editors. We assumed this responsibility in recognizing the crucial role of NSCJ in Europe. Our target was to produce and issue a core document with fundamental principles upon which all NSCJ Editors would agree. Common goals will be identified

and agreed-on measures will be pursued. The constitution document presented herein was therefore developed to formalize the NSCJ Editors’ Club Task Force.

NATIONAL SOCIETY CARDIOVASCULAR JOURNALS: BACKGROUND AND BASIC DATA

All Editors-in-Chief of the official cardiovascular journals of the ESC national societies are de facto members of the Editors’ Club. On April 2007, during the “spring days” at the Heart House in Nice, the ESC Board formally approved the initiative and the Editors’ Club Task Force was officially launched. The organization of the Task Force consists of a nucleus of NSCJ Editors and remains within the membership division of the ESC, coordinated by the ESC vice-president. Further involvement of the ESC publishing department will be also considered as required.

The initial steps of the Editors’ Club Task Force moved in the direction to gain further insights on who we are and where we are now. Accordingly, several proactive measures were taken:

1) Upon request of this Task Force, the portal on the ESC web page for the NSCJ was modified to increase its visibility. Currently, this site may be reached, not only from the area corresponding to members and national societies, but also directly from the scientific area of the ESC [4]. It is clear that NSCJ significantly contribute to the enormous scientific input provided by the ESC as a whole and appropriate recognition to this fact should be granted.

2) Electronic communication brings the scientific community closer together. Therefore, direct links to NSCJ have been updated and implemented [4]. This would further stimulate exchange of scientific research amongst European authors, researchers and readers. Submission of

high quality original research articles should be encouraged by NSCJ Editors, establishing efficient networking tools connecting all European Journals.

3) As a final preliminary step, the Task Force strived to obtain detailed editorial and organizational data from all corresponding journals. Accordingly, feedback was directly requested from the NSCJ Editors and Presidents of the national societies. A comprehensive structured questionnaire (23 items), was devised. Corporate mailing and subsequent collection of all editorial data was guaranteed with the help of the ESC membership Department. Consistency checks were performed and, when required, data confirmation was directly obtained from the corresponding national Editor. Full detail results of this

survey are currently freely available from the ESC web page (metafile of national journals) [4]. This posted material will be updated annually.

Main results of the survey are as follows. 40 National Societies responded to the structured questionnaire including a total of 34 journals. Eight National Societies have no official journal, the 3 Baltic countries share the same Journal and 3 National Societies have more than 1 Journal. The oldest cardiovascular journal in Europe is Archives des Maladies du Cœur et des Vaisseaux founded in 1908. Overall, 11 journals have more than 30 years of existence, 2 are older than 20 years and 12 have been published for more than a decade. In addition to NSCJ in local languages, 12 journals are also available in English

APPENDIX. National society journals (by alphabetic order of the country of origin) and members (Editor-in-Chief) of the Editors' Club Task Force.

National Society Name	National Society Journal	Editors-in-Chief
Albanian Society of Cardiology	Revista Shqiptare e Kardiologjisë	Not communicated
Algerian Society of Cardiology	Journal de la Société Algérienne de Cardiologie	Djamaleddine Nibouche, MD
Armenian Cardiologists Association	Armenian Journal of Cardiology	Karlen Adamyan, MD
Austrian Society of Cardiology	Journal für Kardiologie	Kurt Huber, MD
Belgian Society of Cardiology	Acta Cardiologica	Hugo Ector, MD
Bosnia and Herzegovina	Medicinski arhiv	Izet Masić, MD
Bulgarian Society of Cardiology	Bulgarian Journal of Cardiology	Rumiana Tarnovska, MD
Croatian Cardiac Society	Kardio List	Mario Ivanusa, MD
Czech Society of Cardiology	Cor et Vasa	Vladimír Staněk, MD
Danish Society of Cardiology	Cardiologisk Forum	Jørgen Videbæk, MD
Egyptian Society of Cardiology	Egyptian Heart Journal	Mohamed Hamed, MD
Estonian Society of Cardiology	Seminars in Cardiology	Aleksandras Laucevicus, MD
Finnish Cardiac Society	Sydänääni (Heart Beat)	Pirjo Mustonen, MD
French Society of Cardiology	Archives des Maladies du Cœur et des Vaisseaux	Jean-Yves Artigou, MD
Georgian Society of Cardiology	Scientific-Practical Journal	Mamanti Rogava, MD
German Cardiac Society	Clinical Research in Cardiology	Michael Böhm, MD
	Clinical Research in Cardiology Supplements	Eckart Fleck, MD
	Basic Research in Cardiology	Gerd Heusch, MD
	Cardio News	Rainer Klawki, MD
Hellenic Cardiological Society	Hellenic Journal of Cardiology	Panos Vardas, MD, Christodoulos Stefanadis, MD
Hungarian Society of Cardiology	Cardiologia Hungarica	József Tenczer, MD
Italian Federation of Cardiology	Journal of Cardiovascular Medicine (English)	Gianluigi Nicolosi, MD
	Giornale Italiano Di Cardiologia (Italian)	Giuseppe Ambrosio, MD
Latvian Society of Cardiology	Seminars in Cardiology	Aleksandras Laucevicus, MD
Lebanese Society of Cardiology	Heart News	Joseph Elias, MD
Lithuanian Society of Cardiology	Seminars in Cardiology	Aleksandras Laucevicus, MD
Moroccan Society of Cardiology	Revue Marocaine de Cardiologie	Abdelhamid Moustaghfir, MD
Netherlands Society of Cardiology	Netherlands Heart Journal	Ernst E. van der Wall, MD
Norwegian Society of Cardiology	HjerteForum – The Journal of the Norwegian Society of Cardiology	Olaf Rødevand, MD
Polish Cardiac Society	Kardiologia Polska -Polish Heart Journal	Piotr Kulakowski, MD
Portuguese Society of Cardiology	Revista Portuguesa de Cardiologia	Fausto J. Pinto, MD
Romanian Society of Cardiology	Romanian Heart Journal	Eduard Apetrei, MD
Russian Federation Society of Cardiology	Russian Journal of Cardiology	Victor A. Lusov, MD
	Cardiovascular Therapy and Prevention	Rafael G. Oganov, MD
Cardiology Society of Serbia	Kardiologija*	Velibor Obradović, MD
Slovak Society of Cardiology	Kardiológia/Cardiology	Gabriel Kamensky, MD
Slovenian Society of Cardiology	Slovene Cardiology	Miran F. Kenda, MD
Spanish Society of Cardiology	Revista Española de Cardiología	Fernando Alfonso, MD
Swedish Society of Cardiology	Svensk Cardiology	Christer Höglund, MD
Swiss Society of Cardiology	Kardiologiskuläre Medizin	Thomas F. Lüscher, MD, René Lerch, MD
Syrian Cardiovascular Association	Heart Forum	Sami Kabbani, MD
Tunisian Society of Cardiology	Cardiologie Tunisienne	Habib Haouala, MD
Turkish Society of Cardiology	Archives of the Turkish Society of Cardiology	Vedat Sansoy, MD
Ukrainian Society of Cardiology	Ukrainian Journal of Cardiology	Alexandr Shumakov, MD
British Cardiovascular Society (UK)	Heart	Adam Timmis, MD

* National journal of the Cardiology Society of Serbia "Kardiologija" is not active for several years. Dr. Arsen Ristić represents the Society in the "Editors' Club" as an Associate Editor of Serbian Archives of Medicine

(full text) and 27 journals systematically include English abstracts. Thirty-five journals include original papers whereas 1 exclusively consists of review papers or state of the art articles. Thirteen journals are published monthly. The journals print run varies from 1 000 to 9 000 copies (mean 3.135 copies). A system of "peer review" is selected to evaluate manuscripts by 31 journals and 23 journals adhere to the requirements of the International Committee of Medical Journals Editors. Twenty nine journals are indexed (Index Medicus), 18 appear in PubMed (MEDLINE) and 5 have obtained an impact factor in year 2006. In addition to the print edition, 26 journals have an electronic edition, and 13 have also implemented an electronic system for manuscript submission. A dedicated web page is offered by 25 journals, whereas 26 publications are directly accessible via the web page of the corresponding national society [4].

GENERAL EDITORIAL CONSIDERATIONS

Both, technical and ethical considerations should be addressed [5-8]. Promoting editorial quality standards is of paramount importance to increase the attractiveness of our publications in the globalized and highly competing field of academic cardiovascular medicine. In this regard, the Task Force believes that every effort should be made to follow the uniform recommendations initially issued by the International Committee of Medical Journal Editors (ICMJE) nearly 30 years ago. These recommendations have been recently updated (6th edition) and the emphasis has shifted from the original technical requirements (focused on unifying technical and formal aspects of manuscript preparation), to general principles of editorial ethics and global policies that should govern biomedical publishing [5, 8]. Technical requirements are indeed important to guaranty clarity, precision and to facilitate dissemination of medical studies. In turn, implementation and strict compliance with these requirements eventually raises the overall quality of research. In this regard, the suggestions provided by the CONSORT (Consolidated Standards of Reporting Randomized Trials) group should be followed to improve presentation of randomized clinical trials [9]. These studies should comply with special requirements, including a checklist and flow diagram. We should keep in mind that cardiology is one of the medical disciplines where performance of randomized trials has more clearly fructified and the concept of evidence-based medicine is widely embraced.

Currently, online editions represent the most efficient means for disseminating the information that journals publish. Visits to electronic editions are ever increasing and full article downloads grow exponentially [3, 10]. Therefore, electronic connectivity should be facilitated so that online journal editions are made more visible to readers and, if possible, freely available. In this regard, a provocative novel index, the so called "web impact factor", has been proposed and the field of webometrics is just emerging.

On the other hand, ethical considerations directly affect the credibility of the scientific content. Therefore, they should ensure transparency, trust and honesty in the scientific process involved in performance and publication of research [5-8]. The final purpose is to protect the process of scientific exchange. It should be acknowledged that a sizable bulk of corporative research has recently moved from academic and university centers to close agreements between sponsors and private contract research organizations. Accordingly, explicitly disclosing the role of the sponsor in designing, conducting, analyzing, interpreting and writing up the trial is becoming increasingly relevant. Other concepts such as Editorial Freedom and Editorial Independence have been recently emphasized by the ICMJE, WAME (Word Association of Medical Editors) and CSE (Council of Science Editors) [5-8]. Authority and autonomy are critical to ensure appropriate editorial decisions. In this regard, NSCJ Editors should jealously safeguard the editorial independence of their respective national journals.

The peer review process – despite its limitations – has been enthroned at the highest level and it is now currently identified as an essential part of the editorial scientific process. Therefore, standards for peer review excellence should be developed. This requires both fairness in judgment and expertise in the field. Editors are responsible for monitoring and ensuring fairness, timeless, and thoroughness in this process [5-8].

Other issues such as conflicts of interest (for authors, reviewers and editors) and requirements for authorship are also intended to protect the credibility of the scientific information. Disclosure of potential conflicts of interest should be enforced. Disclosure on data accessibility and accepting a full responsibility for accurate data presentation and interpretation are key considerations. Confidentiality and agreed-on embargos should be maintained. Publication bias (selective reporting of positive findings and lack of publication of studies with negative results) should be prevented by NSCJ Editors. The whole publication process is based on the credibility, trust, authenticity and scientific honesty [5-8]. To further preserve scientific credibility, NSCJ Editors should harmonize their policies regarding scientific misconduct and scientific fraud [11-16]. The HEART Group (Heart Editors Action Round Table) of cardiovascular Editors issued a consensus document focused on redundant publication [12]. Eventually, publishing "expression of concern" notes or even retraction of published material should be considered. Salami slicing and shotgunning publication strategies should be discouraged and, at least, disclosed [11-16]. Secondary publications, even in different languages, should follow the ICMJE requirements [5].

Finally, stimulating bibliometric indexes is of clear interest to gain international recognition. The impact factor (Journal Citation Reports) represents a widely accepted means to evaluate journals' scientific prestige. However, flaws in the impact factor calculation should be acknowledged and research or scholarly merits should not

be rewarded based on the impact factor of the journal in which articles are eventually published [2, 17-19]. Padding the impact factor should be discouraged. However, NSCJ Editors should develop common policies to stimulate diffusion of European studies exclusively based on scientific quality and clinical relevance criteria. This would overcome current citation biases, particularly against non-English biomedical journals [17]. Joint support of European research by increasing recognition of European scientific and editorial quality is considered, therefore, highly advisable.

RATIONALE FOR THE EDITORS' CLUB

European NSCJ are heterogeneous and, above all, are published in different languages. This highlights that cooperation among NSCJ Editors is crucial to avoid "Tower of Babel" phenomena precluding efficient dissemination of scientific information across Europe. Even relatively humble journals should be not condemned to ostracism but rather considered highly successful providing they have a broad dissemination and are deeply appreciated by their readers. We should break boundaries and set free scientific knowledge from any constrictions generated by language, logistic, bureaucratic or economic barriers. Cross-links between European Journals are highly advisable. Cross-references should be stimulated but only when based on strict criteria of scientific quality. A minimal list of important issues should be developed with principles that all NSCJE could agree upon. Common goals, priorities and challenges should be readily identifiable. Finally, proactive global decisions should be made in order to capture a wider audience.

All the above-described editorial recommendations, however, leave enough room for specific editorial policies that shape the particular interest of every specific journal. Room for diversity should be jealously maintained as the focus and scope of different national journals actually differ. Nevertheless, advancement in knowledge is founded in the exchange of novel information by investigators, and NSCJ Editors have full responsibility for stimulating cooperation among European researches.

Here, we would like to present three typical examples where these collaborative efforts could be applicable:

1) Novel recommendations suggesting to register all clinical trials prior to definitive publication should be discussed in the light of currently available administrative national laws and recent European directives (EudraCT). Proposals for a uniform European "Repository" of clinical trials fulfilling not only administrative and regulatory issues but also editorial requirements (including free public access) should be considered [20, 21]. This will allow early recognition of undue trial design changes or methodological flaws. Eventually, most NSCJ Editors could joint uniform recommendations and common editorial policies and platforms might be devised at a European level.

2) Collaboration among NSCJ Editors is essential to further disseminate and promote clinical application of ESC clinical practice guidelines. After endorsement by national societies, translation of these guidelines into national local languages should facilitate their implementation into clinical practice [22-27]. Footnotes, incorporating comments of local experts, are pivotal in this regard. Publication of these guidelines in NSCJ should follow the general rules for "secondary publication", after primary publication in the European Heart Journal has been granted. Nevertheless, time matters, and this detailed and rigorous editorial process (typically affecting uniquely long documents) should be expedited to streamline the translation process and to monitor its accuracy. Implementation of an "early translation process" would be desirable. A full collaboration between NSCJ Editors and the ESC committee of practice guidelines is, therefore, of paramount importance. The circle of knowledge will be closed when the corresponding feedback is ensured by dissemination of selected national activity registries unraveling local practices in patient care [28, 29]. This will help to elucidate success, viability and implementation of different ESC initiatives at the national level. Hopefully, this bidirectional exchange in knowledge will promote widespread implementation of these recommendations and harmonization of cardiovascular practices across Europe. Eventually, uniform and consistent clinical practices should translate into improvements in patient care.

3) Boosting dissemination of official ESC late breaking clinical trials, by readily translating their abstracts into local languages and publishing the main results of these important studies, while paying maximal attention to preserve accuracy and scientific integrity, remains a challenge [30, 31]. This final proposal will require, once more, a close coordination between ESC scientific bodies, ESC publishing department and NSCJ Editors.

MISSION STATEMENT

1) To increase collaboration among NSCJ Editors. The main purpose of this Task Force is to foster interaction among NSCJ Editors. Selected editorial topics will be discussed and addressed using a systematic and comprehensive approach. Standing and "ad hoc" committees will be created. Common editorial policies should be developed. As needed, editorials, uniform requirements, and consensus documents will be issued. Regular meetings (annual ESC Congress and others) will be scheduled and a formal agenda will be proposed.

2) To promote editorial excellence. A major objective of the Task Force is to devise means to improve the scientific standards of NSCJ. Scientific content, quality requirements, credibility, and editorial and research ethics will be promoted [5-8].

3) To improve diffusion of scientific knowledge. Coordination of editorial initiatives among NSCJ and

also official ESC journals, will further facilitate diffusion of editorial and scientific content. To develop common strategies to increase awareness of the high quality scientific research generated in Europe, which, in turn, would positively affect bibliometric indicators. Recognition and diffusion of European cardiovascular research, ESC clinical practice guidelines and other scientific or education initiatives should be promoted. Distribution of common academic material, core curriculum, and additional teaching tools should be also facilitated. Fostering of electronic editions should be encouraged to increase diffusion and NSCJ visibility.

4) To share technical editorial information, experiences, initiatives, publishing resources and technical tools among NSCJ Editors. To address common issues regarding free access to scientific content. To foresee common strategies to advance into the dynamic field of standardized platforms for manuscript submission. To adopt common policies aimed to increase efficiency in the publication process. To promote parallel electronic and English editions in an increasing number of NSCJ and, eventually, sharing copy-editing resources. To develop joint efforts to more efficiently tackle the problem of finite editorial resources and, finally, to ensure economic viability of NSCJ.

5) To provide an operative framework and dataset that will enable future joint ventures and comprehensive European publishing initiatives. To further stimulate collaboration between NSCJ Editors and the ESC scientific bodies and publishing department. In this way, promotion of spotlight, theme or monographic issues, covering burning cardiovascular topics, might be nicely coordinated.

6) Public relations. To provide a common voice when issues concerning NSCJ arise. To serve as a liaison in the relations with governmental bodies, professional or scientific organizations, industry, the media and the public.

7) To foster collaboration between national societies and the ESC. To close the gap between ESC official journals and NSCJ. To promote European incentives to stimulate publication of quality research.

FINAL REMARKS

All the information presented in the present document set the basis to support this exciting editorial initiative. NSCJ Editors should be committed to adapt progressively their local policies, including instructions to authors, to follow general editorial recommendations [5-8, 32, 33]. The main challenge of the Editors Club will be to foster consensus and agreements upon strategic priorities among NSCJ. The breadth and quality of articles should be improved and strategic actions should be aimed to foster inclusion of most NSCJ in well-respected international bibliographic databases and electronic search systems. Joint efforts should aim to broaden distribution and dissemination of these journals and to consolidate

their prestige and recognition by the international scientific community. The main goals of this pioneering effort are, therefore, already quite clear: to increase collaboration among NSCJ Editors, enhance editorial standards, improve quality requirements, preserve publication ethics, guaranty scientific credibility and expand dissemination of scientific knowledge.

Commitment of NSCJ Editors to achieve these objectives is crucial and this Editors' Club emerging forum should provide a unique opportunity to foster global editorial policies. Overtime, the results and implications of these ambitious editorial initiatives should be critically evaluated.

ACKNOWLEDGEMENTS

The continuous help of Anne Mascarelli (ESC) deserves special recognition.

REFERENCES

1. Goodman N, Bijnens B, Van de Werf F. The European Heart Journal: a European journal with a global impact in cardiovascular medicine. *Eur Heart J* 2004; 25:1382-4.
2. Piper HM, Martinson EA, Ophof T. The hills and valleys of an impact factor. *Cardiovasc Res* 2005; 67:175.
3. Piper HM, Garcia-Dorado D, Martinson EA. Readers' choice: hot papers downloaded in 2006. *Cardiovasc Res* 2007; 73:619-22.
4. European Society of Cardiology (ESC) (<http://www.escardio.org>).
5. Uniform requirements for manuscripts submitted to biomedical journals. International Committee of Medical Journal Editors. *N Engl J Med* 1997; 336(23):309-15. (<http://www.ICMJE.org>).
6. Scott-Lichter D, and the Editorial Policy Committee, Council of Scientific Editors. CSE's White paper on promoting integrity in scientific journal publications. Reston, VA: CSE; 2006 (<http://www.councilscienceeditors.org/editorial-policies/white-paper.cfm>).
7. World Association of Medical Editors (WAME) (<http://www.WAME.org>).
8. Alfonso F, Bermejo J, Segovia J. New recommendations of the international committee of medical journal editors. Shifting focus: from uniformity in technical requirements to bioethical considerations *Rev Esp Cardiol* 2004; 57:592-3.
9. Moher D, Schulz K, Altman DG, for the CONSORT group. The revised CONSORT statement: Revised recommendations for improving the quality of reports of parallel group randomized trials. *Lancet* 2001; 357:1191-4.
10. Garcia-Dorado D, Schlüter KD, Martinson EA, Piper HM. Which papers are more interesting to the readers of Cardiovascular Research? Information from download monitoring. *Cardiovasc Research* 2005; 65:1-5.
11. Relman AS. The Ingelfinger rule. *N Engl J Med* 1981; 305:824-6.
12. Hildner FJ. Redundant publication. *Cathet Cardiovasc Diagn* 1997; 42:111-2.
13. de Maria A. Duplicate publication: insights into the essence of a medical journal. *J Am Coll Cardiol* 2003; 41:516-7.
14. Relman AS. Publish or perish – or both. *N Engl J Med* 1977; 297:724-5.
15. Hildner FJ. Ethical issues in cardiovascular publications: Observations during 25 years as an Editor. *Catheter Cardiovascular Interv* 2003; 60(2):202-7.
16. Alfonso F, Bermejo J, Segovia J. Duplicate or redundant publication: Can we afford it? *Rev Esp Cardiol* 2005; 58:601-4.
17. Seglen PO. Why the impact factor of journals should not be used to evaluate research. *BMJ* 1997; 314:497-502.
18. Smith R. Unscientific practice flourishes in science. Impact factors of journals should not be used to evaluate research *BMJ* 1998; 316:1036-40.
19. Alfonso F, Bermajo J, Segovia J. Impactology, impactitis,

- impactotherapy. *Rev Esp Cardiol* 2005; 58:1239-45.
20. de Angelis C, Drazen JM, Frizelle FA, et al. Clinical trial registration: a statement from the International Committee of Medical Journal Editors. *N Engl J Med* 2004; 351:1250-1.
21. Alfonso F, Segovia J, Heras M, Bermejo J. Publication of clinical trials in scientific journals: editorial issues. *Rev Esp Cardiol* 2006; 59:1206-14.
22. Bassand JP, Ryden L. Guidelines: making the headlines or confined to the slide lines? *Eur Heart J* 1999; 20:1149-51.
23. Alfonso F, Bermejo J, Segovia J. European guidelines at *Revista Española de Cardiología*: towards a full "globalization" of cardiovascular care? *Rev Esp Cardiol* 2004; 57:1000-2.
24. Priori SG, Altiot E, Blomstrom-Lundqvist C, et al; European Society of Cardiology. Task Force on Sudden Cardiac Death, European Society of Cardiology. Summary of recommendations. *Ital Heart J Suppl* 2002; 3(10):1051-65.
25. Brady AJ, Poole-Wilson PA. ESC-CHEF: guidelines for the aspirational and the practical. *Heart* 2006; 92:437-40.
26. Silber S, Albertsson P, Aviles FF, et al; European Society of Cardiology. Percutaneous coronary interventions. Guidelines of the European Society of Cardiology-ESC. *Kardiol Pol* 2005; 63:265-320; discussion 321-3.
27. Seidl K, Schuchert A, Tebbenjohanns J, Hartung W. Commentary on the guidelines in the diagnosis and the therapy of syncope – the European Society of Cardiology 2001 and the update 2004. *Z Kardiol* 2005; 94(9):592-612.
28. Fox KA. Registries and surveys in acute coronary syndrome. *Eur Heart J* 2006; 27:2260-2.
29. Simoons ML, van der Putten N, Wood D, Boersma E, Bassand JP. The Cardiology Information System: the need for data standards for integration of systems for patient care, registries and guidelines for clinical practice. *Eur Heart J* 2002; 23:1148-52.
30. Bermejo J, Segovia J, Alfonso F. Summary of the clinical studies reported in the scientific session of the American Heart Association 2005 (Dallas, Texas, USA, 13-16 November 2005). *Rev Esp Cardiol* 2006; 59:143-53.
31. Goyal A, Tricoci P, Melloni C, et al. Highlights from the American Heart Association Scientific Sessions, November 13 to 16, 2005; Dallas, TX. *Am Heart J* 2006; 151:295-303.
32. No authors listed. Scandinavian Cardiovascular Journal. *Circulation*. 2006; 3:114:f156.
33. Ribeiro C, Ferreira R. *Revista Portuguesa de Cardiologia*. Quality and prestige for the use of cardiovascular medicine. *Rev Port Cardiol* 1992; 11:11-2.

Fernando ALFONSO, MD, PhD
Editor-in-Chief of *Revista Española de Cardiología*
Sociedad Española de Cardiología
Nuestra Señora de Guadalupe, 5-7
28028 Madrid
Spain
E-mail: rec@revespcardiol.org