
Cardiology was first published in 1937; the original editors were Drs. Bruno Kirsch of Cologne and W. Löffler of Zurich. The journal was originally named Cardiologia - International Archives of Cardiology. In 1970, the name of the journal was changed to Cardiology. The Editorial Board at the time the journal was founded consisted of 24 distinguished cardiologists from Europe, North and South America, and Asia. The United States had 5 members including Paul D. White and Frank N. Wilson; Switzerland had 3 members, the UK and Czechoslovakia 2. The remaining 14 members came from the Netherlands, Portugal, Rumania, France, Germany, Sweden, Denmark, Austria, Mexico, and Japan. The 3 eastern European members are of even greater interest given current political changes in that region.

More than half the articles in the first two volumes were in German, a quarter were in French, 15% were in Italian, and only 5% were in English. By 1960, the majority of the articles were in English, although French and German manuscripts were still being published. In 1970, when the journal took its present name, English became the sole language of the publication. Contributions in those first two volumes (1937-1938) came from the Netherlands, Italy, Germany, Denmark, France, Switzerland, and the USA. Each article ended with summaries in French, German, English, and Italian. There were no editorials and only occasional book reviews. Slightly more than one-third of the articles dealt with laboratory investigations in animals. Most studies were observational rather than experimental.

It is interesting to review the topics covered in the first two volumes of Cardiologia. A number of animal studies were published including one of particular merit on the circulatory effects of intravenous epinephrine and adrenal cortical hormones. Clinical studies of note included work dealing with ventricular premature beats recorded by electrocardiography, congenital heart block, pathological observations on the etiology of atherosclerosis, and the application of cardiac output determinations to clinical problems. Thus, many of the topics which interest us today were already being considered in 1937 and 1938. Modern cardiology was already prefigured at that time.

The new Editor and Editorial Board are honored to be part of a scholarly enterprise that is more than 50 years old. On behalf of the publisher and the members of the new Board, I would like to take a few minutes of our readers’ time to state some of the future goals and plans for the journal.

Foremost in our sights will be to maintain the high academic standards set by my predecessor, Dr. Jan J. Kellerman, and his Editorial Board. We will continue to solicit original manuscripts of outstanding quality from the international cardiovascular community. These submissions will receive the same meticulous attention from the Publisher, Mr. Thomas Karger, and his staff as they have in the past.
However, any venture that rests on its previous achievements and fails to renew itself by taking on new projects will eventually become stale. With this principle in mind, Cardiology will have a number of new features in 1991. The Editorial Board has been subdivided into 12 areas of interest, each with its own section head. I hope to expand the number of pages published each year and plan to write a brief editorial essay for each issue; the Editorial Board and our readers are likewise encouraged to submit similar didactic, editorial essays. A ‘Letters to the Editor’ section has been added. Readers are encouraged to submit concise, critical or illustrative comments for publication in this section. The ‘Controversies in Cardiology’ section will expand while continuing to focus on topics that are currently contested. Finally, our new cover reflects the commitment of myself and the Editorial Board to develop and enlarge Cardiology, building further on the standard of excellence set by previous editors. Indeed, 1991 will have 8 volumes instead of the usual 6. We hope to publish 12 issues in the future with the shortest possible delay. We encourage our readers to submit manuscripts, ideas, letters, and comments. Indeed, in the final analysis, a professional journal is only as good as the scholarly community that reads and contributes to it.

Joseph S. Alpert, MD