Editorial: The Journal of *Fetal Diagnosis and Therapy*: Past Achievements – Future Challenges

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Basel

As the newly appointed Executive Editor-in-chief of 'our' Journal, I feel a double obligation: firstly to recognize and to preserve the enormous courage and achievements of the Founding Editors and secondly to help leading the Journal into the future in a rapidly changing exciting field of medicine.

It is worthwhile to briefly remember the short history of less than 15 years which our Journal has been in existence. The field of modern fetal therapy had one of its important starting points during the 1982 Meeting at the Krock Foundation in California where William Liley was very instrumental as one of the most inspiring founding fathers. In 1986 the first issues appeared, and the Journal quickly became the official organ of the International Fetal Medicine and Surgery Society. Due to the outstanding activities especially of Maria Michejda and Kevin Pringle, but also of our colleagues H. Nakano and S. Uzan and later Mark Evans, the Journal quickly became listed in the Index Medicus and Current Contents. Kevin Pringle has summarized the aim of the editors to make their periodical the premier journal in the field of fetal diagnosis and therapy, so that the investigators in the field would first turn here rather than to any other journal with subjects pertaining to this field.

Despite all the enthusiasm stemming especially from the first publications on fetal surgery in humans, there were also later setbacks and some degree of scepticism for newly evolving fields in medicine. Only very lately good results from fetal surgery and fetal medical treatment in utero have been reported, and especially the dramatically expanding field of fetal stem cell and gene therapy in utero has convinced us that we need a forum for the complex questions surrounding these topics. The scope of the problems spans from technical aspects all the way to legal and ethical considerations. I find it important that the Journal deals with these issues in a timely fashion and comprehensively, so that critics should not be able to say that we only deal with defined technical aspects rather than with the impact of our innovations on individuals and society at large. In summary, we clearly see a defined place for our Journal among all the other publications in the areas of ultrasound, genetics, and prenatal diagnosis. Our Journal should be the premier periodical dealing with prenatal therapy which has always been the ultimate aim of prenatal diagnosis.

The idea to change the office of the Executive Editor-in-Chief to Basel was stimulated by the fact that the Karger Publishing House which has kindly supported the Journal even in difficult times is now located in the same city which has always been found to be very helpful for the everyday editorial work. Although this transition has at times looked difficult mainly due to communication deficits, I have accepted the request when it was put forward by the Karger Company and approved by members of the Editorial Board, because I can see the logistic

advantages of the current situation. The new international group of Editors-in-Chief which appears in this issue has already developed ideas how to further increase the quality of the Journal and to please a hopefully increasing readership. On top of the original papers and short communications we will have a Review or Opinion in each issue. We will now publish in a larger format which means one third more material translating to 20 more papers. In addition to paper version of manuscripts we allow E-mail and diskette submissions, and all Editors-in-Chief can receive papers from their region before the final issue will be assembled in the Basel office. We are happy that both societies active in the field of in utero therapy, i.e., The International Fetal Medicine and Surgery Society which holds an annual scientific meeting as well as The Fetus as a Patient Society which holds regular postgraduate course have both adopted our Journal as their official publication organ. The two societies supplement each other in a meaningful way, and both of them provide a strong support for our Journal.

Because we are convinced that with the support of our colleagues active in the field of fetal diagnosis and therapy, our Journal will be an important forum for progress reports and discussion in fetal medicine, it will help to improve the chances of babies with handicaps recognized in utero – and then it is all worthwhile.

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131