EDITORIAL

Journal of Rare Cardiovascular Diseases: For cardiac scientists and clinicians – for all those concerned with the 'troublesome' cardiovascular patients

Dear Readers,
Dear Friends and Colleagues,

The present – already 6th– issue of the Journal demonstrates its sustained presence in the field and maturity. With the feedback that we receive from you, we are convinced that we have entered the right track, and (focused on further development) will definitely remain on it.

Consistent with our policy –driven by the needs you express– the manuscripts accepted by the Editorial Board to the present issue are concerned not only with the advancements in rare cardiovascular disease research but also with the everyday clinical issues that the physician taking care of RCD patients is faced with.

I would like to encourage you to read a brief review by Dr Paweł Rubis (with contribution from JRCD Editor) entitled 'Update on myocarditis'. You will see, in a nutshell, that this seemingly stagnant field has seen some substantial progress recently in our understanding of this mixed-bag diseae. The review highlights the central role of endomyocardial biopsy (and in findings) in establishing diagnosis and indicating treatment avenues, and explains how one moves, on the diagnostic path, from possible myocarditis to the probable and confirmed one (the latter stage, unfortunately, still not reached routinely today in the majority of patients).

Dr Hetain Patel and Jamnadas Mail from Florida, USA, on the basis of their interesting patient report, present a mini-review of the dynamic changes in epidemiology and clinical picture of Eisenmenger Syndrome. Definitely not to be missed!

The original research contribution in this issue is an important landmark on the Journal's track as this work is devoted to better understanding of one of key problems in congenital heart disease patients. Dr Paweł Iwaszczuk, a young and extremely dynamic clinician-scientist, has investigated -within a truly multidisciplinary team- mechanisms of stress in adults with congenital heart disease and how these are related to life events, socio-economic factors and coping strategies. Their principal finding – that state-anxiety level adjusted for sex, age and life events differs by CHD defect category – is only the beginning of a larger body of work from this group, paving the way for further studies on how this new knowledge can be used to optimize psychologic support to CHD patients.

Diagnostic and therapeutic challenges of overlap syndromes are exemplified in a report from the Krakow Centre of Rare Cardiovascular Diseases on coexistence of hypertrophic and restrictive cardiomiopathy.

Dr Piotr Kukla with colleagues from three Polish centers, use an example of their young patient with long QT syndrome diagnosed in the postpartum period as grounds for their excellent review of the present state of the field. I sincerely encourage you to have a look at these reports.

Let me finish by a quotation from the report by Dr Dawid Kudlinski and colleagues on a teratoma causing recurrent pericarditis: "*Once correct diagnosis was made, the patient could be offered appropriate treatment*". This highlights the importance of exhaustive diagnosis in RCD patients that –in the future– will more and more often enable disease-specific, clinically-effective treatments.

Stay with us – not only as Readers but also as contributors to the *Journal*. Sharing your experience will be much appreciated by our RCD physician community!

Piotr Podolec
Editor-in-Chief
Journal of Rare Cardiovascular Diseases