## **EDITORIAL**



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## Peer review and peer recognition

The principle of peer review is critical to the scientific contribution made by articles published in a medical journal. Since its inception in 2004 SA Heart has established itself firmly as a peer-reviewed cardiovascular journal worthy of the South African Heart Association for which it is the official mouthpiece. Equally important in the development of our Journal is the recognition SA Heart has received among peers. Since January 2009 SA Heart is listed as an approved Journal by the Department of Education (DoE) and with the publication of this issue SA Heart joins an elite group of publications recognised by the European Society of Cardiology (ESC) as a National Cardiovascular Journal. The invitation to the editor of SA Heart to join the ESC Editors Club marks the recognition the Journal has gained amongst our international peers. Similarly the recognition by the DoE reflects the recognition by the broader scientific community in South Africa. The listing by the DoE follows a thorough assessment by the Department of Education (DoE) and the Academy of Sciences of South Africa (ASSAf) and the South African Heart Association can take pride in these achievements by its Journal. Equally important is the implication for the authors contributing to this Journal, as their peer-reviewed articles published in SA Heart now qualify for national subsidy and this development has opened the door to broader international indexing. The Journal is published quarterly in printed as well as electronic format and publications in SA Heart are at present readily detected by major internet search engines. Inclusion and indexing in large international bibliographic databases will soon enhance the dissemination of information to which the Journal aspires. The latter goal is one of the aims of the ESC Editors Club and is expanded on in the mission statement of the Editors Club included in this issue of the Journal.

The publication of this issue of SA Heart marks the recognition of our Journal by our European peers. However, the scientific content is also a strong reminder that we are a South African journal serving the interests, first and foremost, of the profession in Africa. The articles in this issue tackle major local challenges in the field of cardiovascular health care such as rheumatic heart disease, infective endocarditis and valvular heart disease including the management of valvular heart disease in HIV-infected individuals, whilst an article on the development of percutaneous valve replacement keeps our readers abreast of this exciting and important international development. The article on unique aspects of the presentation of hypertrophic cardiomyopathy in Nigeria underlines the important role the Journal plays, not only as a mouthpiece for the South African Heart Association but also as a vehicle for the dissemination of information from and for the rest of Africa.

The article by Zühlke and Mayosi on rheumatic heart disease highlights the scourge of rheumatic fever on the African continent and draws attention to the A.S.A.P. programme (awareness raising, conducting surveillance studies, advocacy, and promoting the establishment of national prevention), an important initiative aimed at addressing and overcoming this disease. The role of echocardiography-based screening in the A.S.A.P. program is highlighted and the proposed criteria for the diagnosis of rheumatic heart disease should generate valuable debate. The need for early surgery in the management of many patients with infective endocarditis has become firmly established in the developed world. In South Africa logistical and financial restraints impacting on health care, particularly in the state hospitals, is perceived to impact on decision-making regarding surgery in these patients and Essop provides a timely overview of this topic. The increasing burden of aortic stenosis seen worldwide due to the aging of the population is exacerbated in South Africa by the additional burden of rheumatic heart disease. Chin and Commerford address this important topic in a review that provides invaluable tips on the diagnosis and management of aortic stenosis. Arguably the major confounding factor in managing patients with valvular heart disease in South Africa is co-existing HIV-infection, a situation that is encountered with increasing frequency by cardiologists and cardiac surgeons. Naidoo and Shein review this topic and provide unique South African perspectives based on their own experience. Percutaneous interventions for heart valve disease such as mitral balloon valvuloplasty is well-established in South Africa and the expectation is that local skill and knowledge will ensure that the exciting new development of percutaneous heart valve replacement will soon be added to the therapeutic options that can be offered to South Africans suffering from heart valve disease. In the article by Weich and Doubell the field is reviewed and South African perspectives are discussed. Finally, the article by Mbakwem, Oke and Ajuluchukwu on the presentation of hypertrophic cardiomyopathy in a Nigerian population is a valuable addition to the limited information available on this condition in African patients.

The Journal strives to be continually improving and maturing as a scientific publication of note. The recognition by the DoE and the ESC mentioned here and the quality of the scientific articles featured in this issue of SA Heart suggests that our objective of being the premier cardiovascular journal on the continent is no longer just an aim to aspire to in future but is now also a position we must constantly work at to maintain.