

From the Editor and Publisher

As some of us move inexorably towards the end of their sixth decade, it is salutary to realize that this period encompasses most of the history of diagnosis and treatment for Cardiology in the Young. In their excellent volume entitled *The Developing Heart*,¹ Neill and Clark point out that the decade of the 1990s marks the 50th anniversary of the beginning of surgery for correction of malformations in the hearts of children. Within the history that they chart, they identify four eras, of which the first is the era of pathological anatomy. The highlight of this period, which included such other monumental landmarks as the monograph of von Rokitansky,² they identify as the publication of Abbott's *Atlas of Congenital Heart Disease*.³ This important book, still worthy of detailed study, provided a working classification in the English language. If, however, Abbott was the colossus who bestrode the end of the pathological era, then there can be no question but that another giant of cardiac pathology has straddled all the remaining eras of the growth of our subject, namely Jesse Edwards. We are reminded of the importance of the contributions of Edwards by the appearance of a perceptive interview with this influential figure in a recent issue of the *American Journal of Cardiology*.⁴ It is all too easy for today's students to forget the contributions made by our predecessors. Who can give chapter and verse for the career of Ebstein,⁵ or even Fallot?⁶ Aphorisms, such as emphasizing that those who neglect to learn from the mistakes of the past are condemned to repeat them, are known to us all. It is equally important that we do not ignore them. The interview with Edwards, therefore, is worthy of emphasis.

It, and its predecessors, bring a much-needed readability to what otherwise can be a dry periodical. Roberts, in fact, has been responsible for other innovations in Cardiological publishing, including trenchant comments from the editorial chair! His assessment of the contributions of Edwards deserves review by all who read our own Journal. He rates Edwards as 'a great man', and we agree with this assessment. He has personally trained many other great cardiac pathologists and clinicians, while there can be no serious student who has not read several of his written contributions, although few would challenge the familiarity

claimed by Roberts, perhaps to their detriment. Just to read through the selected list from his publications, together numbering close to 800, is to review the history of congenital heart disease. Edwards worked in Minnesota when 'The big four' (Edwards, Kirklin, Burchell, and du Shane) were establishing the pre-eminence of the Mayo Clinic. In 1960, he moved the short distance to Twin Cities (Minneapolis-St Paul) where Lillehei had been equally instrumental in the birth of Paediatric Cardiac Surgery. The achievements from both centres are impressive, not least being the establishment of the 'Heath-Edwards' gradings for categorization of pulmonary vascular disease.⁷ It must surely have been an oversight not to have included this monumental study amongst the most important publications. In this respect, Edwards himself chose only 18 of his 726 papers, but Roberts rightly persuaded him to expand this to 149. Included are the categorizations for tricuspid atresia and common arterial trunk which still enjoy widespread use, as well as many other landmark papers, such as the elucidation of double outlet right ventricle⁸ which is highlighted by Roberts himself. Any who know Jesse Edwards will have no difficulty in picking out the essence of the man from this interview. It is no surprise that Dr Edwards has no real regrets when looking retrospectively at his professional achievements. It is, nonetheless, his philosophy for congenital heart disease which will best lead us forward: 'Basically, I believe in simplicity, call it the way you see it, and I think that people in other fields can understand'. If we all applied this philosophy to the coming eras, we would do everyone a great service!

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References

1. Neill CA, Clark EB. *The Developing Heart: A 'History' of Pediatric Cardiology*. Kluwer Academic Publishers, Dordrecht. 1995, p 5
2. von Rokitansky CF. *Die Defekte der Scheidewande des Herzens*. Wilhelm Braumuller, Vienna. 1875
3. Abbott ME. *Atlas of congenital heart disease*. American Heart Association. New York. 1936

4. Roberts WC, Jesse E, Edwards MD: A conversation with the Editor. *Am J Cardiol* 1998; 81: 902–911
5. Mann JR, Lie JT. The life story of Wilhelm Ebstein (1836–1912) and his almost overlooked description of a congenital heart disease. *Proc Staff Meet Mayo Clin* 1979; 54: 197–204
6. Allwork SP. Tetralogy of Fallot: the centenary of the name. A new translation of the first of Fallot's papers. *Eur J Cardiothorac Surg* 1988; 2: 386–392
7. Heath D, Edwards JE. The pathology of hypertensive pulmonary vascular disease: a description of six grades of structural changes in the pulmonary arteries with special reference to congenital cardiac septal defects. *Circulation* 1958; 18: 533–547
8. Neufeld HN, DuShane JW, Wood EH, Kirklin JW, Edwards JE. Origin of both great vessels from the right ventricle. I without pulmonary stenosis. *Circulation* 1961; 23: 399–412