

Letters to the Editor

RBCCV 44205-900

Medline -1

Below is the content of letters sent by David Tirone and Tomas Salerno to Dr. Sheldon Kotzin, administrator of medline recommending the indexation of RBCCV/BJCVS. We have already requested other internationally respected cardiovascular surgeons to send letters too, aiming at strengthening our position.

Dear Mr. Kotzin

Re: Brazilian Journal of Cardiovascular Surgery

The President of the Brazilian Society of Cardiovascular Surgery and the Editor of the Brazilian Journal of Cardiovascular Surgery, Dr. Domingo Braile, asked me write this letter in support of their plea to have their journal indexed in the National Library of Medicine.

I am an honorary member of that society and receive regular copies of their journal. As an academic surgeon I have to say that the quality of papers published is better than in many journals already listed in Medline. I sincerely hope your committee will review Dr. Braile's request to have their journal indexed and guide them through the process. I am certain the users of Medline you will find the publications in that journal worthy of referencing.

Sincerely
David Tirone,
Toronto, Canada

Medline – 2

Dr. Braile

Congratulations on the work and for the continuous struggle to try to index our journal. I believe that this is a unique opportunity; we have never been so close!

I am certain, that this time it will be possible and we will

succeed. As you know, I am more than willing to help in any way possible.

Give my warmest regards to Maria Cecilia.

Fabio Jatene
São Paulo, SP

Medline - 3

Dear Friends from Brazil:

I received the news about the hard work that has resulted in the justified qualification of the BJCVS, a condition that is not always recognized in countries of the northern hemisphere. This is due, in my view, to a lack of editorial investigation and studies of the contents on the part of appraisers, who, unhappily, do not share the organizational concepts with which you work.

The journal – BJCVS – is a clear example of these expressions as when you analyze the methods of its editor and collaborators it has already achieved the required standard, not only in itself, but due to the final product, which is the consequence of all the work.

We have justly praised, from scientific and practical points of view the publicizing of the hard and creative work of surgeons, in particular Brazilians, with which the editions of the BJCVS have been developed.

I believe that in other countries these thoughts are difficult to valorize; countries where there is a tradition of conceptualizing other perfectionist utilities, which are not as creative in the scientific world but that, under our conditions, are indispensable because they supplant, in many aspects, the missing material elements.

I praise you and I ask you to forgive these feelings of honest criticism of which I cannot free myself after so many years of my life in this fine humanistic profession that we have chosen, to be doctors, and also a little of science writers.

With my warmest regards I send a fraternal hug and the greatest wishes for success.

Adolfo Saadia
Buenos Aires, Argentina

Conselho Editorial

Dear Prof. Braile,

I was informed informally by prof. Ricardo Lima, that you named me as a member of editorial board of Brazilian Journal for Cardiovascular Surgery.

Please would you be so kind and send me some information, that I will try to send to it some papers in the future.

Thank you very much for your kindness and hope to see you soon,

*Borut Gersak
Ljubljana, Eslovênia*

It is better to prevent than to cure

Constantly, the press publishes information about the high increases in the number of lawsuits – both civil and criminal – against doctors, thereby highlighting this delicate question that we recognized years ago. It is important that reports of this nature are seen by doctors not as a negative element causing discouragement or depression, but more as a warning; they should make us aware of the importance of taking, a progressively more preventive attitude.

In our profession and in the position as legal advisers of several medical societies we will continue fighting the good fight, trying to transform the series of paradigms that, for sure, contribute excessively to this geometric increase.

It is important that everyone is certain that, more serious than the precarious conditions of the public health system or the decline in healthcare plans, is the legislation that governs the doctor-patient relationship – read the Consumer Code. As this legislation places on the shoulders of doctors, independent of specialty, a heavy, sharp and cruel sword, often placing the doctor in the position of God and, for this, arbitrarily demanding the impossible, which is, perfection in treatment.

Numerous lawsuits have been successful in the judiciary system, not only against doctors, but also against hospitals and clinics, soliciting the judge to concede depositions to perform procedures that are, in many cases, totally contraindicated. The worst thing is that many judges grant these depositions, without prior analysis and without using any type of selection criteria.

However, there is more. The number of lawsuits related to delay in treatment, for example, is increasing disturbingly. And with this comes the Consumer Protection Code stipulating inversion of the burden of proof, simplifying the

defense of the patient, contributing to the lack of foundation of the justice system and much more.

Sincerely, we do not have doubts about the lack of information of the judiciary system concerning the limitations of Science, as well as the total absence of legal conjecture to accomplish a valid prior judgment in respect to a complain against a doctor, which are the vital propelling elements of this sad figure.

We will not tire to say that, as well as maintaining a good doctor-patient relationship, it is essential that doctors, in these bitter times, try to be more pro-active, that is, to prevent, so that they are prepared lest they are caught up in court cases. Thus, the use of informed written consent and the existence of well kept patients' records, only to mention two items, are indispensable.

The good fight should always be fought, without weakening, but with earnestness, awareness and ethics.

*Antonio Ferreira Couto Filho
Rio de Janeiro, RJ
President of the Biolaw Commission of the Brazilian
Lawyer Institute (IAB) and Legal adviser to The Brazilian
College of Surgeons and SOBRACIL-RJ*

Biotronik Brazil – Completing 25 years of success

Brazil is a country with the size of a continent and a population of 189 millions of inhabitants, composed of different ethnical and cultural groups.

Currently more than 288 centers are dedicated to cardiac conduction disorders and arrhythmias throughout the country, with more than 724 professionals performing the implantation of pacemakers resynchronizes and defibrillators. However, there is still much to do considering that the number of implantations per million of inhabitants 138 . Remains far below most developed countries.

Long distances between towns and between implant centers, difficult access to “state-of-the-art” diagnostic examinations, socioeconomic inequality, constant financial crises in healthcare and regional problems of infrastructure are some of the aspects that currently challenge the treatment that patients rightly they deserve.

Biotronik Brazil is the only pagemaker manufacturer that has uninterruptedly remained in the country, in spite of the critical economic circumstances, when some companies temporarily abandoned the country.

During all these years, in particular at the beginning, grout was consolidated by national and international trials in partnership with our clients and high quality technical support. This cooperation resulted in more than 100 contributions in congresses since 2000 presenting Biotronik Products.

As a consequence of this, Biotronic was awarded “top hospitalar” three times. Since 1999, a national prize that recognizes the extraordinary services rendered in the health sector. This strong compromise to render the highest quality services was reformed by the inauguration of a new and modern training center in 2003 at a more accessible location which today accommodates the marketing department integrating technical support (medial engineering department), training and development and regulatory issues at a single location.

2007 was an important year in the history of Biotranik Brazil, as it commemorated 25 years of uninterrupted activities with more than 160,000 pace makers implanted.

Home monitoring is another important tool that is being prepared with the launch of a national home monitoring

service center to assist doctors in the management of their patients, offering the best possible assistance in technical and clinical terms in Portuguese. Apart from the participation of Brazilian Doctors in many international studies, such as Cognition, Effect, Castle-AF, Setrox S e ICD Labor (Latin American Study of BIOTRONIK CDI's), they also conduct some national protocols such as AVISA (Efficiency of home monitoring in patients with Brady- Tachy Sundrame) and a study on home monitoring focused on the control and prevention of atrial fibrillation which will include 300 patients over the next two years.

We hope that Biotronik will continue with its success story due to love and dedication that its founder, Max Shaldach, who made Barzil his second home, or who knows, perhaps his first at heart.