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Editorial

Introduction to the special supplement



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With increasing population of coronary artery disease and even higher prevalence of risk factors fueling it, the enormity of the problem of sudden cardiac death (SCD) has begun to be perceived in the developing countries like India. The alarming increase in the sudden deaths in our country mandates focused attention of cardiologists and physicians towards this problem. It is imperative for the practicing clinician to have a clear understanding of the scope of this problem and be conversant with the available and evolving therapies in this area. The current issue of this journal has been conceptualized to achieve this objective. The presentation of this special supplement on SCD to the readers is a great moment for the editorial team of the IHJ. This endeavor intends to focus on the catastrophic clinical problem of SCD and serve as a useful resource for the cardiologists to access balanced scientific information for practice. This publication is a conglomeration of articles written by authors from different parts of the world, summarizing the current developments in this field and presenting their authoritative insights of the issues involved in the management of SCD. The content has been designed to present a holistic picture of the problem and at the same time allow a comprehensive elaboration of each component of the management.

It is well recognized that despite being a global phenomenon, the issues involved in the management of SCD are not uniform and hence there can be no universal solutions. The first ICD implant in 1980 was a major landmark in

the history of SCD and this therapy remains the only proven tool to influence survival outcomes of high risk patients. The ability of these devices in preventing sudden deaths is established beyond doubt and is the present standard of care, but clinical wisdom arising from experience of last 2 decades has taught us that defibrillators alone will not suffice in reducing the burden of SCD. There are numerous strategies that can influence the SCD figures but have not been utilized to their full potential. These exist in the realms of preventive cardiology, management of acute coronary syndromes, fine tuning of indications for ICD, appropriate device programming, genomics for risk stratification, ablation of ventricular arrhythmias and neural modification of the substrate. A conscious effort has been made to include the contribution of each of these components.

This supplement is privileged to have Prof Mark E Josephson, the father of clinical electrophysiology as the special guest editor. His immense and passionate continued contribution since 1970's as a teacher, clinician and researcher has been a major factor in the evolution of this area. I gratefully acknowledge his involvement in the editorial process and his mentorship in bringing out this supplement. The authors and the editorial team who have worked diligently to bring out this issue in a given time frame deserve commendation. We are hopeful that this supplement would be a valuable resource in understanding and managing the problem of SCD, thus stimulating further research in this area.

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