

BJCVS is indexed in PubMed Central

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The Brazilian Journal of Cardiovascular Surgery (BJCVS) has one more reason to celebrate: finally we have been indexed in PubMed Central – PMC (www.ncbi.nlm.nih.gov/pmc/), on-line repository, free access of publications on health area, basis of 3.3 million of full content articles provided by 4.916 journals^[1] which BJCVS is part of them now.

It is one more platform we are present and I am confident that with the adoption of English language as the official language and the changing from quarterly to bimonthly, it will allow the Journal to be more recognized, accessed, attracting new readers and consequently more people will be interested in publishing their articles making our Impact Factor (IF) could grow again.

The presence on PMC is one more award of the work performed since the beginning of my supervision as a Chief-Editor of BJCVS in 2002, in order to provide the journal a wider recognition in the international scenario. Since 2005, the submission and review of the manuscripts have been performed by our website (www.bjcv.org), we have achieved the indexation in important databases such as PubMed/Medline, ISI-Thomson-Reuters, Scopus, and now PMC. It has been a tough task but pleasant and I feel glad for reaching this current level.

It was only possible thanks to the support of the Editorial Staff and also the Brazilian Society of Cardiovascular Surgery (SBCCV), through the several Board of Directors ahead our Society during this time where they have never denied any support or motivation.

I also cannot forget to praise my predecessors such as the late Prof. Dr. Adib Jatene, founder of BJCVS and Prof. Dr. Fábio Jatene, who, with a lot of effort have overcome several obstacles to keep a national journal dedicated to heart surgery.

I cannot forget to mention GN1, our partner for 10 years, whose support and expertise in Information Technology were essential for our approval at PMC. GN1 is also responsible for creating the files of BJCVS in XML extension, a type of language that allows the sharing through the Internet of information

and also connects with other languages used by some databases such as Scielo and PubMed Central.

30 years

In 2016 we will reach 30 years of uninterrupted circulation, something not easy in a country with little tradition in supporting scientific activities, like Brazil. In order to celebrate this data as it deserves to be, we have been planning together with SBCCV many actions that will be released soon.

42nd Congress of SBCCV

From 26th to 28th of March in Curitiba, PR, it was held the 42nd Congress of SBCCV. As usual, the event presented a high scientific level with classes and lectures which discussed the news on cardiovascular surgery, similar areas and activities as the traditional and praised “Hands on”.

The following Free Subjects of the Medical Congress were awarded: 1st place – “*Developing and experimental study of aortic bioprosthesis of rapid release (no suture)*” by Dr. Walter Gomes (SP) and colleagues; 2nd place – “*Calcification and deformity of the aortic valve annulus associated to the severity of aortic stenosis and the greater transvalvar gradient after TAVT*”, by Dr. Alvaro Machado Rosler (RS) and colleagues, 3rd place – “*Valve-in-valve Mitral: A new frontier in reoperations? Increasing the limits of indication through hydrodynamic tests in vitro*”, by Dr. Thiago Vila Nova (SP) and colleagues.

The award “Professional of the year” was delivered, deservedly to Dr. Paulo Roberto Slud Brofman, an icon of cardiovascular surgery, not only in the state of Paraná but also in the whole country. The Editorial Board of BJCVS met to evaluate the changes of the journal and its impact on the authors and reviewers. It was also discussed the new system to streamline the process of evaluation and approving of works, which the associate editors will have a fundamental role, as previously detailed on last edition^[2].

I would like to highlight in this edition, apart from the articles of a wide range of cardiac surgery areas, the work of Igor Bie Biernet, Rogério Carvalho de Oliveira, Pedro Beraldo de Andrade and Carlos Antonio Caramori (page 254), covering

with a great propriety the bibliometrics index issues, as the Impact Factor, which has been the object of several discussions among the academic environment. Evandro Mesquita Tinoco, Celso Vale de Souza Júnior and Thiago Reigado Ferreira from page 260 tell the story of Andreas Vesalius, a Renaissance that revolutionized the anatomy and cardiovascular knowledge.

Geraldo Verginelli

A little of the rich life of professor Geraldo Verginelli, who left us in 2014, is told from page 283 in an article by Prof. Dr. Noedir Stolf and I as a second author. Dr. Verginelli accomplished like a few people did, the triple mission of assisting patients, teaching and researching. Regarding assisting patients, he had a key role in developing cardiovascular surgery at Clinics Hospital at Medical School of the University of São Paulo, acting in all areas and specialties. As for teaching, many cardiovascular surgeons in Brazil own a lot of their graduation to him.

EMC

The following articles are available for testing of Continuously Medical Education (EMC) in this edition: I-“*Stratification of complexity in congenital heart surgery: comparative study of the Risk Adjustment for Congenital Heart Surgery (RACHS-1) method, Aristotle basic score and Society of Thoracic Surgeons-European Association for Cardio-Thoracic Surgery (STS-EACTS) mortality score*” (page 148), II-“*Atrioventricular block in coronary artery bypass surgery: perioperative predictors and impact on mortality*” (page 164), III-“*Effect of N-acetylcysteine in hearts of rats submitted to controlled hemorrhagic shock*” (page 173), IV-“*Analysis of immunostaining and western blotting of endothelin 1 and its receptors in mitral stenosis*” (page 211) and V-“*Andreas Vesalius 500 years - A Renaissance that revolutionized cardiovascular knowledge*” (page 260).

The EMC is an useful tool for testing and updating the knowledge and it is worth 0.5 score towards SBCCV exam of Title and 1.0 at revalidation of specialist title exam. I draw attention to this laborious tool, counting on committed reviewers who has been helping us to elaborate questions and answers.

We will contact the authors of the chosen articles counting on their cooperation in order to express the best evidence shown on the publication. There are five questions with five alternatives in each of the chosen articles per Edition. It is essential that the Author send us together with question the accurate highlighted part where the question was generated. Counting on the goodwill of the noble Authors who honor us with their preferences for BJCVS.

May all receive my warmest regards,

Domingo M. Braile
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Clinical value of BNP as an independent predictor of mortality following heart surgery

Valor clínico do BNP como um preditor independente de mortalidade após cirurgia cardíaca

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Detection and characterization of mortality predictors is becoming an interesting approach in the field of cardiovascular surgery, particularly in valve and CABG procedures. Yet there is a paucity of trials in order to obtain precise data on this topic using statistic criteria. In the last decades, many cardiologists have turned attention to underlying role of inflammation in heart diseases and different types of heart operation. The key point raised by these experts is that main expression from inflammatory cardiovascular process can be translated into serologic appearance of some markers^[1-3].

From the publication “Predictors of mortality in cardiac surgery: B-type natriuretic peptide” by Murad Junior et al.^[4], the first observation can be drawn is epidemiologic quality of retrospective study of valve and CABG patients. Undoubtedly main step for identifying a mortality predictor using statistical analysis is to know how patients were selected and included in the study.

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The second and most remarkable observation can be drawn from publication by Murad Junior et al.^[4] is the meticulous view regarding preoperative role of BNP as a mortality predictor in the setting of valve and CABG operations. Many authors have advocated that cardiac diseases have some inflammatory burden preoperatively and, on account of it, postoperative time becomes a particular moment for so many complications and deleterious events^[5-7].

This study provides a very elegant representation of preoperative BNP values and its relationship with 30-day mortality. Thus, publication by Murad et al.^[4] is a cornerstone reference for Brazilian cardiologic community in an attempt to preoperatively include BNP as prognostic marker in valve and CABG operations.

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