Dear Readers,
Dear Friends and Colleagues,

The present – already 6th – issue of the Journal demonstrates its sustained presence in the field and maturity. With the feedback that we receive from you, we are convinced that we have entered the right track, and (focused on further development) will definitely remain on it.

Consistent with our policy – driven by the needs you express – the manuscripts accepted by the Editorial Board to the present issue are concerned not only with the advancements in rare cardiovascular disease research but also with the everyday clinical issues that the physician taking care of RCD patients is faced with.

I would like to encourage you to read a brief review by Dr Paweł Rubis (with contribution from JRCD Editor) entitled ‘Update on myocarditis’. You will see, in a nutshell, that this seemingly stagnant field has seen some substantial progress recently in our understanding of this mixed-bag disease. The review highlights the central role of endomyocardial biopsy (and in findings) in establishing diagnosis and indicating treatment avenues, and explains how one moves, on the diagnostic path, from possible myocarditis to the probable and confirmed one (the latter stage, unfortunately, still not reached routinely today in the majority of patients).

Dr Hetain Patel and Jamnadas Mail from Florida, USA, on the basis of their interesting patient report, present a mini-review of the dynamic changes in epidemiology and clinical picture of Eisenmenger Syndrome. Definitely not to be missed!

Dr Piotr Kukla with colleagues from three Polish centers, use an example of their young patient with long QT syndrome diagnosed in the postpartum period as grounds for their excellent review of the present state of the field. I sincerely encourage you to have a look at these reports.

Let me finish by a quotation from the report by Dr Dawid Kudlinski and colleagues on a teratoma causing recurrent pericarditis: “Once correct diagnosis was made, the patient could be offered appropriate treatment”. This highlights the importance of exhaustive diagnosis in RCD patients that – in the future – will more and more often enable disease-specific, clinically-effective treatments.

Stay with us – not only as Readers but also as contributors to the Journal. Sharing your experience will be much appreciated by our RCD physician community!

Piotr Podolec
Editor-in-Chief
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