

European Heart Journal - Case Reports (EHJ-CR): a new format for an old concept

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The case report is perhaps the oldest form of medical publication. Reports on specific patients date back at least to the 2nd millennium BCE, and until the 20th century, case reports were considered a mainstay of clinical research. Indeed, many diseases and syndromes still bear witness to the influence of case reports and case series on the medical lexicon. With the rise of more advanced research techniques, case reports rightly no longer exhibit the same power in guiding medical practice they once did; however, they still have an important part to play in medical practice.

This issue marks the launch of European Heart Journal – Case Reports (EHJ-CR). This new open access journal joins the rest of the European Society of Cardiology (ESC) family and aims to broaden the society's coverage of medical publishing by providing a dedicated repository for case reports, case series, cardiac images and local quality improvement projects (QIPs) of wider significance. Case reports can be submitted directly to the journal (via https://academic.oup.com/ehjcr) or transferred from one of the other members of the ESC journal family.

Much of the continuing importance of case reports as a publication format comes from their role in educating junior clinicians in the technique of writing, editing, and submitting manuscripts for review and publication. Further, case reports should have a specific structure and a simple message making the review process ideal for educating more senior clinicians with limited experience of undertaking peer review. To this end, *EHJ-CR* has been launched with a mandate to be an education platform to help develop the skills of current and future clinician researchers. The *EHJ-CR* is intended to assist members of the young cardiology groups within the ESC and its associations in gaining publishing, reviewing, and editing experience.

The junior reviewer programme developed by the *EHJ-CR* forms the centre point for the education efforts. Clinicians either in specialty training or within 5 years of completion with some research experience have been recruited to join this programme. Articles published within the *EHJ-CR* will be reviewed by both a junior reviewer from this programme and a senior experienced reviewer. This process has two

main benefits. The junior reviewer will have their review scrutinized by his/her senior colleague and feedback will be provided. This provides a learning experience for the reviewer. Further, given the relatively junior authorship of many case reports, this ensures that the peer-review process is truly undertaken by close peers to the manuscript authors. Those that successfully participate as junior reviews will be accredited for their work and contribution to the journal.

An important feature of the *EHJ-CR* is the aim to publish high-quality, well-written, and researched case reports. However, truly unique, one-of-a-kind, case reports are increasingly rare. Although these remain important and interesting, this journal will not be limited to these alone. Indeed, case reports of relatively common conditions will be considered if they demonstrate beautiful instructive images or an interesting/important learning point.

Other article types that are similarly undertaken in large part by more junior clinicians will also be published by the *EHJ-CR*. Quality improvement projects form a vital element of institutional management. Good QIPs are often a labour-intensive process, which can reveal important lessons for clinical practice. They are often undertaken by junior clinicians with limited scope to share their findings and improve outcomes outside their local institution. The *EHJ-CR* intends to publish high-quality QIPs with a message that may be of widespread benefit.

The *EHJ-CR* intends to utilize multimedia elements as a central component of the journal. Taking an experimental perspective, the journal will be a pilot vehicle for novel social media approaches to publishing for the ESC journal family. The journal will aim to publish slide shows with each case report and develop podcasts to discuss particular case reports in greater detail. Case reports involving complex multidisciplinary management will be published as 'grand rounds' with increase word and figure limits to allow for complete discussion of the case complexity.

We continue to see the case report as an important aspect of medical publications, no longer as the driver of medical practice but

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as a format with significant educational promise. The *EHJ-CR*, as the home of the cardiology case report will help ensure the educational benefit of publishing is developed and improved for all clinicians involved in the research or management of cardiac patients and pathology.

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Reference

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