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Editorial

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The European Society of Cardiology (ESC) Congress 2016 in Rome – the world's largest and most influential cardiovascular meeting – featured best science in 500 sessions and covered 150 topics. It definitely plugged the gap between cardiovascular knowledge and routine clinical practice. Many trials provoked discussions and raised controversies. The DANISH trial stimulated rethinking for implantable cardioverter defibrillators (ICD) in non-ischemic heart failure; the NORSTENT trial surprisingly did not demonstrate a mortality benefit of the DES vs. BMS but a significantly better restenosis rate. No cardiovascular benefits of pressure masks in sleep apnea and little value of platelet monitoring in elderly patients can be listed as negative trial results. Four new practice guidelines for 2016 were presented: heart failure, cardiovascular prevention and dyslipidemia, atrial fibrillation and cardio-oncology. Many sessions on

prevention of cardiovascular disease (CVD) focused on eliminating the risk and not postponing it! Technology developments for tomorrow included artificial hearts, percutaneous valvular interventions and mobile health technologies. Altogether an excellent and very informative meeting in Rome!

This is my last editorial as section editor for cardiology of *Wiener Klinische Wochenschrift* (WKW); the function period of more than 3 years arranged by the Austrian Society of Cardiology (ÖKG) and Springer Medizin is ending with this issue. I would like to thank the ÖKG and Springer for their confidence and trust, wish the journal a bright future and again address the plea to all cardiologists early in their careers: *academic legacy is most important* and don't forget "you are what PubMed says you are!"

Conflict of interest O. Pachinger declares that he has no competing interests.

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