Twenty years of interventional cardiac electrophysiology: Meeting future challenges with continuing innovations

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The “Sixth International Symposium on Interventional Electrophysiology in the Management of Cardiac Arrhythmias” was held in Newport, Rhode Island on September 24–26, 2010. This symposium commemorated a special landmark in clinical cardiac electrophysiology. Twenty years had elapsed since the first in this series of symposia recognized interventional electrophysiology as a distinct scientific discipline. In 1990, this symposium was the very first international meeting devoted exclusively to the fundamentals of science and clinical practice of interventional electrophysiology. The umbrella of “interventional electrophysiology” gathered such diverse but fundamentally linked sciences of experimental electrophysiology, epidemiology, pharmacotherapy, cardiac pacing, defibrillation, catheter and surgical ablation, imaging, and clinical trials as applied to the management of cardiac arrhythmias. The crystallization of this discipline and the breadth and depth of science in this field led to the evolution of a committed scientific journal devoted to it, the *Journal of Interventional Cardiac Electrophysiology*. The meeting continues a longstanding tradition of providing a scientific forum for experts from Europe and North America to present frontiers in research as well as critically evaluate developments in interventional cardiac electrophysiology in a scientific forum. The presentations at this meeting are the basis for a series of review articles that have been critically acclaimed in past years and memorialized in print, initially in

textbook form and more recently as special issues of the *Journal of Interventional Cardiac Electrophysiology*.

This symposium’s scientific program was restructured to focus on translational science, new technology, and the restructuring of clinical practice based on clinical trials in our field. Regenerative medicine, genomics, and molecular biologic research into inherited or acquired heart rhythm disorders assumed center stage in basic science presentations. Innovations in technology brought imaging methods in clinical electrophysiology into focus. New catheter navigation technology, computed tomographic and magnetic resonance imaging methods, intracardiac and three-dimensional echocardiography, and essentials of clinical interpretation of these imaging data for the interventionalist brought a new frontier into view, the “integrated” electrophysiologic laboratory. New developments in device and ablation therapy were reviewed in the context of evidence-based practice. The rise of performance standards and metrics for arrhythmia programs, impact of clinical trials, and registries on interventional electrophysiologic practice and outcomes research in clinical electrophysiology focused the discussions on the path ahead for the interventional electrophysiologist.

The Newport symposium has now been memorialized with the authors preparing state-of-the-art review articles for two special issues of the journal. The first issue encompasses advances in basic and translation science, imaging, new technology and developing standards for patient follow-up and management, catheter and surgical ablation, and clinical trials in drug, device, and ablation therapies. Special issues like this one are not possible without the enormous support of our authors and our editorial staff. We are grateful to the authors for this serious effort to critically assess our current

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status and share their ideas and viewpoints on the future. We believe that their efforts have truly borne fruit in the compilation of these two special issues of *Journal of Interventional Cardiac Electrophysiology*. We expect that these analytical reviews and reports will stimulate clinical and basic researchers worldwide and engender vigorous discussion and debate. We hope that you, our readers and our

contributors, will find this a worthwhile and energizing exercise in the scientific dialogue that is often overwhelmed by other demands for all of us.

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