Dear Readers,

The first edition of the journal was undoubtedly a major challenge. In general, we heard positive and favourable comments on its contents. We must confess that the second issue was even more challenging since we had to maintain the same level of quality.

To start the issue we have four well-written editorials, three of which analyse important trials that we are proud to report in the journal. This indicates that major players and trialists have deemed EuroIntervention meritorious to report these important findings here. It is essential that interventionalists realise that they have a powerful instrument to communicate and share the result of their investigations. The Editorial Board feels adamantly that the best interventional “material” should be published in the journal and they will strive for this goal with all their energy.

Important companies such as Boston, Guidant, Medtronic and Conor have agreed that some of their pivotal investigations be published in the journal and for this we are grateful. In relation to the ARTS II paper, since the principal investigator is also the Editor-in-Chief, we classically submitted the paper for review to a Guest Editor, Valentin Fuster and received from him three pertinent reviews.

The Working Group on Interventional Cardiology of the European Society of Cardiology is making its entry in the journal with the announcement of six fellowship grants sponsored by major industrial partners and also present a discussion paper over training program’s in interventional cardiology. On behalf of the EuroPCR board, Pim de Feyter and his co-authors have reviewed the essence and highlights of the EuroPCR 2005 course. Along the same lines, we decided to create a section for a politician’s point of view in relation to EuroIntervention and EuroPCR. Dr Douste Blazy, former cardiologist and former French Minister of Health has voiced opinions that many European cardiologists share.

In the clinical research section, three interesting papers deal with the outcome of high-risk patients refused surgery. Furthermore, two papers critically review physiological approaches. In addition, one clinical and one experimental paper report the multi-kinetic profile achievable with the Conor stent. Another experimental paper is also reported, one description of a new device and last but not least, the description of a new angiographic score, which will be applied in the Syntax trial, a score that could potentially become an important tool in intervention cardiology.

We hope you will enjoy reading this second issue of EuroIntervention, which will be also freely distributed at the EuroPCR booth during the forthcoming European Society of Cardiology in Stockholm and also distributed to all attendees at TCT2005 in Washington. Finally we would like to remind you that the published papers will be available for download at www.europcronline.com in the EuroIntervention section.