

Od nacionalnog glasila do međunarodnoga kardiološkog časopisa From National Bulletin to International Cardiology Journal

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Bolesti srca i krvnih žila godinama su vodeći uzrok smrtnosti diljem svijeta, pa tako i u Hrvatskoj. Hrvatsko kardiološko društvo (HKD) od svojeg osnivanja 1992. godine, kao vodeća stručna udruga nastoji utjecati na smanjenje pobola i smrtnosti od ove skupine bolesti, prije svega međudjelovanjem edukacije članova i javnosti, uz primjenu dijagnostike i liječenja, ravnomjerno unutar Hrvatske, sukladno načelima medicine utemeljene na znanstvenim dokazima.

Od mnogobrojnih aktivnosti HKD-a tijekom prethodnih dvadeset godina spomenut ćemo samo neke važne za temu ovog uvodnika. Godine 1998. pokrenuta je studija Liječenje ishemijske bolesti srca (LIBS)¹, a 1999. god. na hrvatski su jezik prevedene smjernice Europskog kardiološkog društva (ESC-a) za prevenciju koronarne bolesti srca². Članovi Radne skupine za akutni koronarni sindrom HKD-a tijekom 2004. god. prevode ESC smjernice za liječenje akutnog infarkta miokarda s elevacijom ST-segmenta³ te su u studenome iste godine u suradnji s tadašnjim Ministarstvom zdravlja i socijalne skrbi Republike Hrvatske, Hrvatskim zavodom za zdravstveno osiguranje te zdravstvenim ustanovama primarne, sekundarne i tercijarne zdravstvene zaštite pokrenuli *Hrvatsku mrežu urgentne perkutane koronarne intervencije*. Ovaj nacionalni program intervencijske kardiologije iznimno je uspješan primjer zbrinjavanja bolesnika s akutnim infarktom miokarda na području cijele zemlje⁴, a istodobno i jedna od najčešće obrađivanih tema moderne hrvatske kardiologije. Nedugo nakon toga formiraju se najvažniji hrvatski kardiološki komunikacijski mediji – u svibnju 2006. godine pokrenuto je mjesečno glasilo *Kardio list* i obnovljen je portal HKD-a (www.kardio.hr). Osim redovitog

Cardiovascular diseases have long been the leading cause of death throughout the world and in Croatia as well. The Croatian Cardiac Society (CCS) was founded in 1992 and, as the leading professional association in Croatia, strives to reduce the morbidity and mortality from these groups of diseases, primarily through the interaction of the education of its members and the public and the application of diagnostics and treatment equally throughout Croatia, according to evidence-based medical principles.

Of the many initiatives that the CCS undertook during the past twenty years, we will mention only a few relevant to the topic of this editorial. In 1998 the study *Treatment and secondary prevention of ischemic coronary events in Croatia* (TASPIC-CRO study)¹ was started, and the Prevention of coronary heart disease in clinical practice: recommendations of the Task Force of the European Society of Cardiology (ESC) were translated into Croatian in 1999². In 2004, members of the CCS Working Group on Acute Coronary Syndrome translated the ESC Guidelines on management of acute myocardial infarction in patients presenting with ST-segment elevation³. In November of the same year, the Croatian Primary Percutaneous Coronary Intervention Network for patients with ST-segment elevation acute myocardial infarction was established in cooperation with the former Ministry of Health and Social Welfare of the Republic of Croatia, the Croatian Health Insurance Fund, and primary, secondary, and tertiary healthcare institutions. This national program for cardiology interventions is an extremely successful example of arranging treatment for patients with acute myocardial infarction at the na-

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izlaženja glasila na hrvatskom jeziku, prvo razdoblje karakteriziraju jasne, razumljive, provjerene, primjenjive i ažurne kardiološke informacije te oblik omotnice čiji se rubovi perforiraju.⁵ Od početka 2007. glasilo postupno prerasta u časopis koji najprije izlazi u formatu B5, a od 2008. godine redovito izlazi na hrvatskom i engleskom jeziku u formatu A4 kao mjesečnik ili dvomjesečnik.

Potporna ESC-a licencom za organiziranje međunarodnih edukacijskih stručno-znanstvenih skupova najvišeg ranga iz područja kardiologije (*Dubrovnik Cardiology Highlights: An ESC Update Programme in Cardiology*), uključenje u mrežu nacionalnih kardioloških časopisa pod okriljem ESC-a te međunarodna indeksacija časopisa tijekom 2009. (EMCare) i 2011. godine (EBSCO/Academic Search Complete), snažno su unaprijedili časopis. Radi bolje prepoznatljivosti početkom 2012. god. *Kardio list* mijenja naziv u *Cardiologia Croatica*.⁶ Novi poticaj nastupa u srpnju 2014. god., kada časopis dobiva suizdavača – renomiranu izdavačku kuću *Medicinska naklada*, što je omogućilo modernizaciju časopisa uz uvođenje DOI oznaka, QR kodova, autorskih identifikatora ORCID i napredniji grafički dizajn.⁷

U razdoblju koje slijedi, a nakon završetka kreiranja XML datoteka svih brojeva od 2013. godine nadalje časopis *Cardiologia Croatica* unaprijedit će svoju organizaciju i uredničke postupke te potom aplicirati za sekundarnu multidisciplinarnu bibliografsku bazu podataka.

tional level⁴, and one of the most important topics in modern Croatian cardiology. Soon after, the most important media for communication in Croatian cardiology were formed – in May 2006, the monthly bulletin *Kardio list* published its first issue, and the web portal of the CCS was reestablished (www.kardio.hr). In addition to regular publications in Croatian, this early period was characterized by clear, concise, verified, applicable, and up-to-date cardiologic information as well as being published in the shape of a perforated envelope.⁵ From 2007, the bulletin gradually grew into a journal that was first published in the B5 format, with regular monthly or bimonthly issues in the A4 format in both Croatian and English since 2008.

The journal was significantly enhanced by an ESC license to organize educational scientific conferences (*Dubrovnik Cardiology Highlights: An ESC Update Programme in Cardiology*), inclusion into the network of national cardiologic journals under ESC, and international indexing of the journal in 2009 (EMCare) and 2011 (EBSCO/Academic Search Complete). For better international visibility, the title of the journal was changed from *Kardio list* to *Cardiologia Croatica* in early 2012.⁶ Further incentive came in July of 2014 when the journal acquired a co-publisher – the established publisher *Medicinska naklada*, which resulted in the modernization of the journal through the introduction of DOI (Digital Object Identifier) identification system, QR (Quick Response) codes, ORCID (Open Researcher and Contributor ID) for authors, and a more advanced graphical design.⁷

In the coming months, once all issues since 2013 have been translated to XML, the journal *Cardiologia Croatica* will upgrade its organization and editorial procedure and then apply to a secondary multidisciplinary bibliographical database.

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