In 1936 I began my fellowship at the then Rockefeller Institute for Medical Research in New York, now the Rockefeller University with Dr Alexis Carrel, the experimental surgeon, and Charles Lindbergh, the aviator, to work on a system they had designed to perfuse organs under sterile conditions and with any desirable pressure and pulse rate. Working at the Rockefeller Institute were scientists of great stature such as Landsteiner, the discoverer of the blood groups, Peyton Rous (the role of viruses in cancer) and Oswald Avery, who established the role of nucleic acid as the carrier of genetic information. Over this highly diverse group of individuals presided Simon Flexner, the director of the Rockefeller Institute. It was customary for any new fellow to present him or herself to the director. My visit with Dr Flexner was rather brief but I remember that he talked without interruption and finished his discourse without changing either pitch or rhythm. He ended abruptly but not before he had advised me to marry a rich woman.

Who was Simon Flexner and why make him the center of this discussion? Simon Flexner was an administrator, presiding over a diverse group of scientists working primarily in fundamental research related to clinical conditions. A look at Simon Flexner’s career will explain why I singled him out as an ideal administrator. He was born in 1863, the fourth son of nine children in Louisville, Kentucky. He graduated from the Louisville College of Pharmacy, worked in a drugstore, and then began the study of medicine at the University of Louisville. He obtained his medical degree in two years. Following, he studied pathology at the Johns Hopkins Hospital with William H. Welch, who became a major influence in his career and who was one of the founding members of Johns Hopkins University and of the Rockefeller Institute. As resident pathologist at Johns Hopkins Hospital, Flexner continued research in bacteriology and pathology and was promoted to Professor of Pathological Anatomy. In the Philippines, he discovered a widespread strain of the dysentery bacillus since known as the Flexner type. In 1901 he took a month leave to head a government commission investigating the outbreak of bubonic plague in San Francisco. In the same year, the Rockefeller Institute for Medical Research was founded in New York City and Flexner became its director and one of the seven members of the Institute’s Board of Scientific Directors headed by William H. Welch. Beginning in 1903 with the advice of Welch, Flexner organized the Rockefeller Institute according to specifications he had himself drawn up at the Board’s request. There were to be several laboratory departments each headed by a competent scientist. Flexner did not choose the field of science to be represented, rather he selected the scientist because of his stature. In 1906 he was instrumental in opening a new laboratory building, and in 1910 a modern research hospital. In 1907 America experienced the first large epidemic of poliomyelitis. Flexner was able to transmit the disease from monkey to monkey and therefore laid the foundation for the development of protective vaccines for polio.

Obviously Flexner was not only a competent administrator but also an outstanding and original investigator. Later in life, his energies were expended more and more upon the direction of the Rockefeller Institute and his main contributions were to stimulate and advise his juniors. He left a free hand to senior investigators but he shepherded the younger scientists until they were ready for independent work. Simon Flexner died in New York City at the age of 83.

The following features made Flexner an outstanding administrator: he was himself a first rate scientist; he appointed scientists to his staff not because he wanted a representative of a specific scientific field but because he wanted to support an individual outstanding scientist; he...
did not hesitate to appoint to his staff workers who were his scientific equals; he was tolerant of the idiosyncrasies and foibles of his faculty. An example was the appointment and continued support of Alexis Carrel, the experimental surgeon and Nobelist, who was a great scientist but because of his interests in metaphysics and social sciences, was a gadfly amongst the other members of the Institute; Flexner also had excellent relations with the Board of the Rockefeller Institute, particularly with Welch and with John D. Rockefeller, Jr, who assured the Institute of continuous funding. At that time, individual grant support was not a major factor and the Director of the Institute distributed the funds amongst his faculty according to his own lights.

I have chosen Simon Flexner as an ideal medical administrator, primarily because he was tolerant, selfless in support of his faculty, and considered his main function the support of individual scientists. Because he himself was a competent scientist, he recognized talent and genius. He was no threat to the scientific ambitions of his faculty but rather supported them once he recognized their worth.

In scientific and medical institutions, administration has assumed a pivotal role. It directs the course and development of science, and it chooses personnel, both key and technical. Sometimes administrators rule by decree, and do so either openly, autocratically or diplomatically; sometimes however, they fail to consult the faculty. In most medical schools, there exists a faculty senate, or similar body, which acts like a parliament to advise and consent. But often these advisory bodies either do not exist, or they are powerless and fulfill only a cosmetic function. Administrators of medical schools or scientific institutions should be compassionate yet firm. Firmness is indeed needed. But firmness should be combined with compassion. Foremost, the administrator should have respect for his faculty.

Boards oversee both the financial and scientific future of the establishment. Although the most important function of a board is to raise money, it should also concern itself with the interrelationship between the administration and individual scientists or physicians. Like the board of the Rockefeller Institute at the beginning of the 20th century, it should be aware of the relationship of the administration to the faculty and of the value of their scientific accomplishments. Faculty, administration and board should be balanced.

In the long run, good will, decency, respect for the individual scientist and appreciation for good science are the pillars on which scientific and medical establishments should be built.

Simon Flexner was a shining example.

Richard J. Bing, M.D.

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**RICHARD BING’S 91st BIRTHDAY**

On October 12, 2000 Richard Bing will be 91 years old. Through his many contributions in Past Truth & Present Poetry, he actively promotes and enhances this News Bulletin. I would like to pay tribute to this outstanding investigator and renaissance human being who, in my view, planted the seed that led to the creation of the International Society for Heart Research. This Society evolved from the International Study Group for Research in Cardiac Metabolism, established in 1968, at a meeting in Dubrovnik in Yugoslavia. The year before, a group of investigators, including Richard Bing, had come together to lay out the principles and aims of this new group.

In those days cardiology was dominated by pumps and pressures. The only suitable clinical training was one based on the catheter laboratory. It was into this scene in about 1948 that Richard Bing initiated the new metabolic cardiology, via the catheter laboratory. During his studies on congenital heart disease he inserted a catheter into the coronary sinus, drew off black venous blood and his fertile mind immediately realized that he had a major tool at his command for studying the oxygenation and metabolism of the intact human heart.

Not only that, but he carried his ideas further and delineated the metabolic fuels of the human heart (fatty acids when fasting, glucose when fed). He further established that defective energy production was not the source of the problem in heart failure. It was this classic series of six articles that appeared in the American Journal of Medicine and in the Journal of Clinical Investigation, as well as his Harvey lecture that carried the message that the heart was more than just a pump. It had its own metabolic needs, governed by its own complex machinery. Metabolic pathways were the forerunners of today’s signal system. His classic series on Physiological Studies in Congenital Heart Disease covered eight outstanding articles, still classics in their own right. Thus it was that from congenital heart disease that his work evolved to metabolism of the human heart to myocardial ischemia and later to hypertrophy and failure, always one step ahead of his times.

As brilliant as his start was, much more was to come. For decades running, he and his laboratory produced a series of outstanding papers, many well ahead of his times and confirmed by later work. Few know that Richard was among the first to relate angiotensin to the blood pressure. He was also one of the first to define the contractile properties of isolated human heart muscle. He initiated studies into the metabolism and electricity of the effects of ischemia on the mammalian heart. He and Sigmundur Gudbjarnason were the first to study the metabolism of myocardial infarction and the repair process.

Today we accept these ideas without
any second thought. Aspirant academic cardiologists readily enter a career in cardiology without any major catheter laboratory training. Rather, considerable biochemical and molecular biological training is now the norm. In my view, Richard Bing was the person who started off this modern cardiological revolution. If it had not been for him, the International Study Group for Research in Cardiac Metabolism would never have existed and, if it hadn’t been for that, the International Society for Heart Research would not have been born. In turn, the vigorous contribution of the ISHR to the modern era of receptors, cell signalling and molecular cardiology would not have occurred.

As Richard is fond of saying, “we only build on the shoulders of others”. He has already in his historical writing outlined how he came to build on the shoulders of others. Let us not forget how we build on his shoulders.

Lionel H. Opie, M.D., D. Phil., F.R.C.P.
Cape Town, South Africa

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From Bench to Bedside to Bar: Heart Failure Update "Venice 2000"
(June 28 - July 1, 2000)

You’ve either got or you haven’t got style. Roberto Ferrarri has it, and makes sure that everyone gets the benefit of it when he organises meetings. With a city like Venice you have a head start, and the use of the spectacular Fondazione Giorgio Cini as a conference area capitalised on this advantage. This former monastery occupies most of the island of San Giorgio Maggiore, which dominates the lagoon. The rooms were magnificent, often lined with tapestries or bookshelves bearing ancient tomes, and the gardens and cloisters were cool and inviting. Many of the speakers and delegates stayed in the Hotel Danieli, facing the island across the lagoon. Stepping out onto the 4th floor terrace of the Danieli at breakfast was like walking into a Canaletto, and it was possible to observe the stream of delegates entering the Fondazione, and time ones own boat trip accordingly.

Against this tempting backdrop, it was necessary for the meeting programme to compete strongly for the delegates’ attention. Here some real imagination had been shown to involve the 1000 or so practicing doctors who had come to be enlightened on current thinking about the etiology and treatment of heart failure. Many meetings have had the optimistic title “Bench to Bedside” or “Molecule to Man” and usually it is nothing more than an excuse for a mixed programme. In this case, some real daring had been shown. The three day program represented the progression of the disease, with the first day as NYHA II and III, the second as NYHA III and IV and the last day as End-stage. Each morning, two young cardiologists (rapporteurs) presented to the entire meeting two real-life cases in parallel, giving information in small stages. Experienced chairmen controlled the session, and a team of invited discussants were on stage to give comments and questions. After each increment of information, the audience was asked to give its views on the possible etiology and treatment of the case. We could vote using a hand-held radio-link device, usually choosing from four options. Our answers were collated by computer and shown after a minute or so on the main screen. Supplementary questions were sometimes decided by a show of hands. This really sharpened the audiences attention. As a basic scientist, I voted out of curiosity, but was surprised to see my answers falling in with the majority of the clinicians. Some outcomes were startling, for example the audience voted unanimously to discharge a particular patient on β-blockers, when the use of these for the condition in general hospitals is 10-20%. No doubt the audience was a self-
selected group representing the most forward-thinking doctors of their generation.

The outcome of the cases was not revealed in the morning, but at the end of the day. Meanwhile, the participants were invited to disperse and attend the scientific part of the programme. Six parallel sessions followed the coffee break, each reflecting one aspect related to the cases under consideration. Lunch was served in the cloisters, and the Poster session was within the lunch area to stimulate discussion. Again, the posters were themed both by day and by subject area.

After lunch a Cultural lecture eased us gently over the post-prandial lull. Peter Harris gave a scientific dissertation on the hierarchy and function of the angels, illustrated by many of his own delicate sketches of the winged spirits on the stonework of Venice. The phylogeny of the heavenly host is apparently every bit as complex as that of the vertebrates. In another session, Milton Packer tried to convey the human side of what it is like to end a clinical trial early. Movingly, he spoke of the good outcome of the COPERNICUS trial, likening carvedilol to a beautiful woman who he had always loved, and who now was seen to love him too. It might, of course, be suggested that he get out more.

Finally, the Congress Social event was a delightful, dream-like evening in the gardens of the Fondazione Cini. Extravagant tables of food were laid out, with different areas representing the various culinary regions of Italy. A theatre company performed a mime of the voyages of Marco Polo in a clearing between the trees, with jeweled costumes and exotic music. Costumed figures on stilts drifted between the guests, silently dancing. Fireworks left a surrounding smoky mist, through which huge white balloons floated eerily. Characteristically for Italy, the final songs around the piano were famous operatic arias, with several of the delegates (notably Giorgio Vescovo) revealing unexpectedly fine voices.

This was a meeting with real imagination and style. Thanks Roberto, and thanks too to Luigi Tavazzi, Karl Swedberg and of course Sandra Marini.

Sian E. Harding, Ph.D.
London, UK

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**XXIIInd Annual Meeting of the ISHR - American Section (Louisville, Kentucky; June 14 - 18, 2000)**

The XXIIInd Annual Meeting of the ISHR – American Section was held in Louisville, Kentucky, on June 14-18, 2000. The conference was generously sponsored by the Jewish Hospital Heart and Lung Institute, Louisville, KY, which also provided the logistic and organizational support. Despite the adverse weather and attending flight cancellations or delays, the meeting was extremely successful. This five-day conference was attended by a total of 626 delegates, with 141 invited speakers, 263 abstracts presented, 24 symposia, 1 workshop, 3 luncheon panels, and 3 moderated poster sessions. The Keynote Lecture was delivered by Dr Ferid Murad, Nobel Laureate (Figure 1). The international representation was robust, with participants from 18 countries besides the United States (2 from Argentina, 1 from Belgium, 39 from Canada, 3 from Denmark, 4 from France, 7 from Germany, 1 from Greece, 1 from Iceland, 3 from Ireland, 1 from Italy, 8 from Japan, 4 from Norway, 1 from China, 2 from Poland, 3 from South Korea, 3 from Sweden, 2 from the Netherlands, and 24 from the United Kingdom), and with approximately one-third of the abstracts submitted from outside the U.S. Three to four symposia were held simultaneously on topics pertaining to myocardial ischemia/preconditioning, vascular biology, angiogenesis, ventricular function, excitation-contraction coupling, calcium homeostasis, hypertrophy, heart failure, cardiac development, gene therapy, apoptosis, nitric oxide, and signaling. There were also business meetings of the American Section Council and International Council.

The format of the meeting was designed to enable maximal interaction among investigators, particularly between junior and senior investigators, e.g., posters were displayed from 8:00 am to 7:00 pm and poster presenters were required to be at the poster site three times a day (morning break, lunch break, and from 5-7:00 pm). Each day was concluded by a moderated poster session featuring 4-5 abstracts of particular interest, which was held between 6-6:30 pm. We were pleased to note that despite the very intense scientific program (8 hours of sessions from 8:00 am to 6:00 pm), the moderated poster sessions were extremely well attended, stimulating discussion and participation. The three luncheon symposia (“How to Write an NIH Grant”; “Proteomics”; and “DNA Chip Arrays”) provided an opportunity for informal discussion of timely topics of broad interest to the delegates. These panels as well as the symposia focused on emerging technologies and new frontiers in biomedical research.

For the first time in the history of the ISHR, some of the sessions were recorded and posted on the web as a webcast (thesesessions can be viewed by visiting the ISHR website). We encourage future ISHR meeting organizers to use this feature, which enables wide dissemination of the information presented. The Best Abstract Awards
were also a new initiative and were extremely well received. All posters were graded by a scientific committee on the basis of originality, data quality, and importance. The presenters of the abstracts that received the three highest grades were selected for the Best Abstract Awards, which consisted of $750 plus a plaque for the first abstract and $500 and $250 for the second and third abstract, respectively. The winner was Hanno Elsässer from the Max-Planck-Institute, Germany (Figure 2). Dr Annarosa Leri from New York Medical College received the second prize, and the third place award went to Dr Kobra Haghighi from the University of Cincinnati. We feel that the Best Abstract Awards stimulated the poster presenters to perform at their best.

The highlight of the meeting was undoubtedly the superb Keynote Lecture delivered by Dr Murad (available as a webcast on our website). He presented a lucid account of the history of the discovery of nitric oxide and its innumerable physiological roles. Dr Murad’s pioneering work was pivotal in paving the way for the identification of NO as the endothelium-derived relaxing factor and guanylate cyclase as its second messenger, and spawned the work of many other scientists. The Young Investigator Competition was held under the Chairmanship of Dr Naranjan Dhalla at the Jewish Hospital Heart and Lung Institute. Four outstanding young scientists presented their research to an audience of more than 200 attendees. The winner was Dr Simon J. Conway (Medical College of Georgia) for his paper entitled “Myocardial dysfunction precedes abnormal remodeling of the cardiovascular system in the splotch (Sp2H) mouse mutant”. The three runner-ups were Dr Zhen-Hai Yao, Dr Martin G. Vila Petroff, and Dr Subodh Verma.

The meeting also featured a vibrant social program, including the Welcoming Reception at the Jewish Hospital Heart and Lung Institute, a dinner at the Kentucky Derby Museum, a dinner cruise on the Ohio River, and the banquet at the Louisville Zoo. Over 200 participants attended the banquet and were entertained by a magician, animal trainers, and a stand-up comic. The Young Investigator Award and the Best Poster Awards were presented following the banquet.

The organizers wish to thank the speakers, delegates, sponsors, and staff for their contributions to this conference.

Roberto Bolli, M.D.
ANNOUNCING THE ISHR AWARDS FOR 2001

The Richard J. Bing Award for Young Investigators, the Research Achievement Award, and the Peter Harris Distinguished Scientist Award

Dear Colleague:

As you know, the International Society for Heart Research (ISHR) has established three very distinguished awards of international importance for recognizing outstanding scientists who have made significant contributions to the advancement of cardiovascular science: The Richard J. Bing Award for Young Investigators, the Research Achievement Award, and the Peter Harris Distinguished Scientist Award. This portfolio of awards was designed to cover the entire spectrum of the academic landscape, so as to include scientists at every stage of their development. Thus, while the Richard Bing Award recognizes young talent (investigators less than 36 year-old), the Peter Harris Award focuses on lifelong accomplishments and the Research Achievement Award is targeted at scientists in the intermediate phase of their career (less than 55 year-old). The monetary prize for the Richard Bing Award will be $5,000, for the Research Achievement Award $30,000 (thanks to the generous sponsorship of Chugai Pharmaceutical Company), and for the Peter Harris Award $5,000. These high-profile recognitions will be presented at the XVIIth World Congress of the ISHR in Winnipeg, July 6-11, 2001, where the recipients of the Research Achievement Award and the Peter Harris Award will give a special lecture. The winners of the three awards will be announced in the Journal of Molecular and Cellular Cardiology, in the ISHR website, and in HEART NEWS AND VIEWS.

You will notice that compared with previous editions, the ISHR awards for 2001 have been substantially changed, marking an important step in the evolution of our Society. As announced previously in this column (HEART NEWS AND VIEWS 2000; 8(1): 9), this will be the first time that the ISHR bestows the Research Achievement Award, a new initiative that was developed to include in our portfolio of honors those investigators who are already well established but still young and vigorous enough to be likely to develop their research even further. This is a large and very active constituency of scientists that until now had been excluded from our awards. I am pleased that my proposal to boost the monetary prizes for the Richard Bing competition (from $1,000 to $5,000 for the winner and from no cash prize to $1,000 for the three runner-ups) has been approved by the overwhelming majority of Council. I believe this change will invigorate the competition and will significantly enhance the visibility and attractiveness of the Award, helping to make it one of the most coveted recognitions for young investigators worldwide. In addition, I have changed the application process for the Richard J. Bing Award by strengthening the documentation of the applicant’s contribution to the work presented. The nomination process for the Peter Harris Award has also been changed by requiring not only a letter of nomination that specifically describes the candidate’s scientific contributions but also a curriculum vitae, a streamlined list of up to 20 publications, and reprints of the 5 most important papers. These new requirements bring the Peter Harris Award in line with the nomination process used for other awards of similar prestige for senior scientists. It is my hope that the ISHR awards will project the image of a Society that aims at recognizing the best cardiovascular science through a rigorous selection.

I enclose announcements describing the application/nomination procedures for these three awards. This information can also be found by visiting the ISHR website (www.ishrworld.org). I would be grateful if you could distribute the announcements among your colleagues and invite interested persons to submit nominations/applications. Please note that the deadline for receipt of the Richard J. Bing Award Applications is January 8, 2001 and for receipt of the nominations for the Research Achievement Award and the Peter Harris Award is December 20, 2000. Applications/nominations received after those dates will not be considered.

Thank you very much in advance for your help in identifying candidates for these prestigious awards.

Roberto Bolli, M.D.
THE INTERNATIONAL SOCIETY FOR HEART RESEARCH invites submissions for the Richard J. Bing Award for Young Investigators. The purpose of this Award is to recognize outstanding endeavors by new investigators in research activities, and to encourage continued biomedical research careers broadly related to cardiovascular biology. Details of the competition are as follows:

1. Candidates must be active members (or have applied for membership) of the ISHR (membership application forms are available on the ISHR website at www.ishrworld.org or from Dr Roberto Bolli, Secretary General, ISHR, Division of Cardiology, ACB, Third Floor, University of Louisville, 550 South Jackson Street, Louisville, KY 40202; tel.: +1 502 852 1837, fax: +1 502 852 6474, e-mail: rbolli@louisville.edu).
2. Candidates must be less than 36 years of age on July 11, 2001.
3. Applications must include the following:
   - An original manuscript in any area of cardiovascular biology
   - A curriculum vitae
   - A statement detailing how much of the design and research work was done by the candidate and by any co-investigators. This statement must be endorsed by the candidate’s immediate supervisor (e.g., Division Head, Department Chairman, or Institute Director). In case of multi-authored manuscripts, the supervisor should also indicate that among all of the co-authors, the applicant is the most appropriate candidate for the Award, and offer rationale for this opinion.
4. The manuscript can be either unpublished work or can be one that has been recently submitted to any journal (on or after December 1, 2000). Publication of the manuscript prior to the XVIIth World Congress of the ISHR (July 6-11, 2001) does not preclude consideration for the Award so long as the manuscript was submitted after December 1, 2000.
5. Ten copies of each manuscript together with ten copies of the applicant’s curriculum vitae and one copy of the letter stating the contribution of the applicant to the work should be received by Dr Roberto Bolli, Secretary General, ISHR, Division of Cardiology, ACB, Third Floor, University of Louisville, 550 South Jackson Street, Louisville, KY 40202, no later than January 8, 2001. Applications received after January 8, 2001 will not be considered.
6. Only one submission per author will be considered. The candidate must be the sole or the first author of the manuscript submitted.
7. Four finalists will be selected from the submitted works by a Committee of the ISHR. Each finalist will qualify for a travel award for economy airfare and other travel costs of up to US$2,500 toward his/her attendance at the XVIIth World Congress of the ISHR in Winnipeg, July 6-11, 2001. All finalists will receive a free electronic subscription to the Journal of Molecular and Cellular Cardiology.
8. At the congress, each finalist will verbally present his/her study to the Society. The winner of the Award will receive a plaque and a cash award of US$5,000. The three runner-ups will receive a plaque and a cash award of US$1,000.
9. Any finalist who, for any reason, cannot personally present his or her work must withdraw from the competition. Substitute presenters are not allowed.
10. Submitted manuscripts will not be returned.

THE PETER HARRIS DISTINGUISHED SCIENTIST AWARD

THE INTERNATIONAL SOCIETY FOR HEART RESEARCH invites nominations for the Peter Harris Distinguished Scientist Award. Details of the competition are as follows:

1. This is a very distinguished Award of international importance and its presentation will be a highlight of the XVIth World Congress of the ISHR. It has been conferred at each World Congress of the ISHR in recognition of distinguished scientific achievements in the field of cardiovascular research. With the inauguration of the Research Achievement Award, the Peter Harris Award will be focused to recognize and reward lifetime contributions to science. Previous recipients include S. Ebashi, A. Fleckenstein, R.B. Jennings, H.E. Morgan, and L.H. Opie.
2. The Award will consist of a plaque and an honorarium of $5,000.
3. The winner will be announced at the XVIIth World Congress of the ISHR in Winnipeg, July 6-11, 2001, where he/she will present a major lecture.
4. A photograph and biosketch of the winner will be published in the Journal of Molecular and Cellular Cardiology and in HEART NEWS AND VIEWS, and will be posted in the ISHR website.
5. Candidates must be active members (or have applied for membership) of the International Society for Heart Research (membership application forms are available on the ISHR website at www.ishrworld.org or from Dr Roberto Bolli, Secretary General, ISHR, Division of Cardiology, ACB, Third Floor, University of Louisville, 550 South Jackson Street, Louisville, KY 40202).
6. The Award carries with it a requirement to attend the XVIIth World Congress of the ISHR. Travel expenses will not be reimbursed (at the discretion of the winner, these expenses can be supported by the Award). The registration fee will be waived.
7. Nominations must include the following materials:
   - A letter (maximum two pages) describing the candidate’s research achievements. Letters proposing a nomination are most helpful if they deal as specifically as possible with the candidate’s most important contributions to science. Academic rank or administrative service will not be taken into account by the Selection Committee.
   - A curriculum vitae containing a bibliography which is abbreviated to list only the candidate’s most important publications (maximum of 20). If a particular paper is referred to in the nominating letter, this paper must be included in the abbreviated bibliography.
   - Reprints of five of the candidate’s most significant publications.
8. Self-nominations will not be considered.
9. Nominations should be sent to Roberto Bolli, M.D., Secretary General, ISHR, Division of Cardiology, ACB, Third Floor, University of Louisville, 550 South Jackson Street, Louisville, KY 40202; tel.: +1 502 852 1837, fax: +1 502 852 6474, e-mail: rbolli@louisville.edu. Deadline for receipt of applications is December 20, 2000. Nominations received after that date will not be considered.

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**RESEARCH ACHIEVEMENT AWARD**

**Sponsored by Chugai Pharmaceutical Company**

The International Society for Heart Research invites nominations for the Research Achievement Award. This is a very distinguished Award of international importance and its presentation will be a highlight of the XVIIth World Congress of the ISHR. Details of the competition are as follows:

1. The purpose of this Award is to recognize an outstanding scientist who has made major and independent contributions to the advancement of cardiovascular science and who is likely to further develop his/her research in the future. Thus, the main criteria for selecting awardees are scientific excellence and potential for future research contributions.
2. The Award will consist of a plaque and a monetary prize of $30,000, which will be used to support the research program of the awardee.
3. The winner will be announced at the XVIIth World Congress of the ISHR in Winnipeg, July 6-11, 2001, where he/she will present a major lecture.
4. A photograph and biosketch of the winner will be published in the Journal of Molecular and Cellular Cardiology and in HEART NEWS AND VIEWS, and will be posted in the ISHR website.
5. Candidates must be active members (or have applied for membership) of the International Society for Heart Research (membership application forms are available on the ISHR website at www.ishrworld.org or from Dr Roberto Bolli, Secretary General, ISHR, Division of Cardiology, ACB, Third Floor, University of Louisville, 550 South Jackson Street, Louisville, KY 40202).
6. The recipient must be less than 55 years old on July 11, 2001.
7. The Award carries with it a requirement to attend the XVIIth World Congress of the ISHR. Travel expenses will not be reimbursed (at the discretion of the winner, these expenses can be supported by the Award). The registration fee will be waived.
8. Nominations must include the following materials:
   - A letter (maximum two pages) describing the candidate’s research achievements. Letters proposing a nomination are most helpful if they deal as specifically as possible with the candidate’s most important contributions to science. Academic rank or administrative service will not be taken into account by the Selection Committee.
   - A curriculum vitae containing a bibliography which is abbreviated to list only the candidate’s most important publications (maximum of 20). If a particular paper is referred to in the nominating letter, this paper must be included in the abbreviated bibliography.
Dear Fellow Members and Friends:

Our plans for the organization of the Winnipeg 2001 ISHR World Congress, are now in the homestretch (The Louisville Syndrome). In this communication, we would like to share some information about the “special programs” to be held in the Winnipeg Congress. These are:

- **Public forum** on diet, exercise, stress and cardiovascular health (Dr Harvey Finkel, Brookline, USA; Dr Bruce Holub, Guelph, Canada; Dr Tom Kottke, Rochester, USA; and Dr Jeffrey Wigand, Charleston, USA are being invited);
- **Senior Investigator Awards**: Peter Harris Award and Research Achievement Award (both to be selected by ISHR); and Special Award for Promoting Cardiovascular Education and Research (to be selected by the International Academy of Cardiovascular Sciences);
- **Young Investigator Awards competitions for the**:
  - Richard Bing Award (ISHR); American Section Award; and European Section Award. The short lists of candidates for these competitions are being made by the respective societies;
- **Cardiovascular Landmark Lectures**: In this series of lectures, we are inviting Nobel Laureates (Dr Michael S. Brown, Dr Alfred G. Gilman, Dr Louis J. Ignarro and Dr Michael Smith) and some notable international authorities in their field (Dr Eugene Braunwald, Boston, USA; Dr Victor Dzau, Boston, USA; Dr Robert J. Lefkowitz, Durham, USA; Dr Lionel H. Opie, Cape Town, South Africa; Dr Rodolfo Paoletti, Milan, Italy; Dr Philip Poole-Wilson, London, UK; Dr Shigetake Sasayama, Kyoto, Japan; Dr Wolfgang Schaper, Bad Nauheim, Germany; Dr Paul M. Vanhoutte, Courbevoie, France; Dr James T. Willerson, Houston, USA; and Dr Yoshio Yazaki, Tokyo, Japan).

In addition, we have sent invitations to 500 distinguished scientists to participate as speakers and/or chairmen for 70 scientific themes in as many symposia. Applications and/or nominations for the award competitions will be processed by the respective societies or sections. Some of the competitions are already being announced in this newsletter. There are, of course, several social and colourful events being planned. Please diarize your calendars for July 6-11, 2001.

“See you in Winnipeg.”

Pawan K. Singal, Ph.D.
Organizing Secretary
From the Editor of the Journal of Molecular and Cellular Cardiology: One Year on the Watch

IT HAS BEEN ONE YEAR since the new team of Associate Editors and Editorial Board have assumed stewardship for the Journal. Our announced intention at the start of the term was to “attract and to publish the finest work in Molecular and Cardiovascular Biology.” Paramount to the achievement of this goal was: (i) the appointment of outstanding scientists as Associate Editors and to the Editorial Board, (ii) enhancement of the review process and (iii) improved access of our readership to journal content. Substantial progress has been made in each of these areas.

Currently there are 10 Associate Editors with individual and collective expertise in all aspects of cardiovascular, molecular and cellular biology, electrophysiology and integrated physiology. Of note, we have recently appointed Drs Mercadier and Nagai representing Europe and the Pacific Rim, respectively. Our 83 member Editorial Board has similar broad scientific representation and is committed to the timely provision of high-quality reviews. As a consequence of this collective expertise, we have seen significant increases in contemporary scientific areas previously under-represented in the Journal.

Considerable attention has been placed upon the mechanics and timeliness of the review process. It is now possible to either submit a manuscript to the journal office electronically or via hard copy to initiate review. Hard copy manuscript submissions are scanned into PDF files for electronic transmission. The vast majority (unless specifically requested otherwise) of reviews are transmitted online electronically among the editorial office, Associate Editors and Referees. These changes have resulted in a substantial decrease in our time to first decision (Fig. 1) which is now competitive with any journal in the field. Occasional aberrations do occur and for this we apologize to our authors.

After considerable discussion and deliberation, we initiated a policy of pre-screening reviews. We felt that this would afford authors the opportunity to submit to another journal in a timely manner if their work was judged either inappropriate by content or unlikely to be competitive in the complete review process. Approximately 10% of our current submissions are handled in this matter.

Our publisher, Academic Press, has been supportive in initiating a number of improvements and innovations for the Journal. There is now a strict 48 hour turn around policy for galley proofs of accepted manuscripts. This and other inhouse facilitation has resulted in a major decrease in the time from acceptance to publication (Fig. 2). Of related interest and importance is the immediate online electronic posting of accepted articles at the Journal website. Articles have a digital object I.D.# which will also accompany the print version so that authors can cite their work. This process will be complete for all submissions by August 2000.

Journal content has been and will continue to be a major priority. A number of outstanding, timely mini-reviews have been or will be published in upcoming issues by acknowledged authorities in the field. We have also initiated a fast-track option for the review process.
ISHR MEETINGS CALENDAR

  VII Meeting of the Latin American Section / Scientific Forum X.  
  Belo Horizonte, Minas Gerais, Brazil.  
  Enquiries: Dr O.M. Gomes, Sao Francisco de Assis Cardiovascular Foundation / HSFA, Rua Jacui 1191 - Concórdia, Belo Horizonte/MG, Brazil CEP 31.110-050.  
  Tel./Fax +55 31 444 8807; E-mail servicer@servicer.com.br

- December 6-8, 2000.  
  XVII Meeting of the Japanese Section and Satellite Symposium "Molecular Mechanisms of Excitation-Contraction Coupling in the Myocardium".  
  Osaka, Japan.  
  Enquiries: Inter Group Corporation, Builco Building, 3-7-3, Nakatsu, Kita-ku, Osaka 531-0071.  
  Tel. +81 6 6375 9477; Fax +81 6 6376 2362; E-mail secret-1@intergroup.co.jp

  XVII World Congress of the International Society for Heart Research.  
  Winnipeg, Manitoba, Canada.  
  Enquiries: XVII ISHR World Congress, c/o Institute of Cardiovascular Sciences, St. Boniface General Hospital Research Centre, University of Manitoba, Faculty of Medicine, 351 Taché Avenue, Winnipeg, Manitoba, Canada R2H 2A6.  
  Tel. +1 204 235 3421; Fax +204 233 6723; E-mail ishr@cc.umanitoba.ca; Website www.heartconference.com

  Regulation of Energy Metabolism in the Heart and Vasculature.  
  Banff, Canada.  
  Enquiries: Dr G.D. Lopaschuk, c/o Cardiovascular Disease Research Group, Department of Pediatrics, University of Alberta, 423 Heritage Medical Research Centre, Edmonton, AB, Canada T6G 2S2.  
  Tel. +1 403 492 2170; Fax +1 403 492 9753; E-mail gary.lopaschuk@ualberta.ca

  Heart Failure Summit.  
  Toronto, Canada.  
  Enquiries: Dr M.J. Sole, c/o The Centre for Cardiovascular Research, Eaton Wing 13 North - Suite 208, Toronto General Hospital, Toronto, ON, Canada MSG 2C4.  
  Tel. +1 416 340 3471; Fax +1 416 340 5985; E-mail msole@torhosp.toronto.on.ca

  Diseases of the Cardiovascular System and Immunity: Interactions and Therapeutics.  
  Montreal, Canada.  
  Enquiries: Dr G. Bkaily, c/o Department of Anatomy and Cell Biology, Faculty of Medicine, University of Sherbrooke, 3001 12E Avenue North, Sherbrooke, PQ, Canada J1H 5N4.  
  Tel. +1 819 564 5303; Fax +1 819 564 5320; E-mail g.bkaily@courier.usher.ca

  Remodeling and Progression of Heart Failure.  
  Minneapolis, USA.  
  Enquiries: Dr I. Anand, c/o Department of Cardiology, VA Medical Center 111C, 1 Veterans Drive, Minneapolis, MN, USA 55417.  
  Tel. +1 612 725 2000, ext. 3723; Fax +1 612 725 2262; E-mail anand001@maroon.tc.umn.edu

  International Muscle Energetics Conference.  
  Burlington, USA.  
  Enquiries: Dr N.R. Alpert, c/o Department of Physiology & Biophysics, University of Vermont, College of Medicine, Given Medical Building, Burlington, VT, USA 05405-0068.  
  Tel. +1 802 656 2540; Fax +1 802 656 0747; E-mail alpert@salus.med.uvm.edu

  Models in Cardiovascular Research (Australasian Section) - Satellite Meeting of the IUPS 2001 Congress.  
  Brisbane, Australia.  
  Enquiries: Satellite Meeting Secretariat, PO Box 164, Fortitude Valley QLD 4006, Australia.  
  Tel. +61 7 3854 1611; Fax +61 7 3854 1507; E-mail iups@ozaccom.com.au; Website www.baker.edu.au/ISHR

- July 3-6, 2002.  
  XXII Meeting of the European Section.  
  Szeged, Hungary.  
  Enquiries: Dr A. Végh, Department of Pharmacology and Pharmacotherapy, University of Szeged, Faculty of Medicine, Dóm tér 12, H-6720, Szeged, Hungary.  
  Tel. +36 62 545 673; Fax +36 62 544 565; E-mail vegh@freemail.hu; Website www.cardiovasc.com/ishr2002

  XVIII World Congress of the International Society for Heart Research.  
  Brisbane, Australia.  
  Enquiries: ISHR 2004 Congress, PO Box 164, Fortitude Valley QLD 4006, Australia.  
  Tel. +61 7 3854 1611; Fax +61 7 3854 1507; E-mail heart2004@ozaccom.com.au; Website www.baker.edu.au/ISHR

In Blue: XVII World Congress and Satellite Meetings

Specifically, a select number of publications judged to be both timely and of substantial scientific interest and importance will be reviewed and accepted by the Editor and appropriate Associate Editor within 48 hours of receipt.

It has been a busy and challenging initial period with the Journal. I am grateful for the outstanding assistance of our Managing Editorial Staff, Associate Editors, Editorial Board and outside reviewers. We are happy to receive feedback (positive and negative) from authors and our readership for potential improvements to the Journal. We look forward to serving our authors and readership in the upcoming year.

Reference


Richard A. Walsh, M.D.  
JMCC Editor-in-Chief
HEART NEWS AND VIEWS is published thanks to an educational grant from Servier

a private French pharmaceutical company committed to research in cardiovascular medicine as well as other key therapeutic areas. We have successfully developed products for the treatment of hypertension, heart failure, and ischemic heart disease, which are among the main fields of our scientific interest. A number of landmark studies like PROGRESS, EUROPA, PREAM1, PEP, and HYVET are being conducted in these therapeutic fields, with our support.

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Servier supports a number of important projects in the field of cardiology, such as the Education and Training Programs of the European Society of Cardiology.

Servier is also the founding father of The European Cardiologist Journal by Fax and Dialogues in Cardiovascular Medicine, a quarterly publication with a worldwide circulation edited by Roberto FERRARI and David J. HEARSE.

Dialogues discusses in a comprehensive way issues from the cutting edge of basic research and clinical cardiology.

The forthcoming issue, devoted to CYTOKINES, will feature articles by:

D. Mann, L. Agnoletti, H. Drexler,
B. Schleffer, S. Anker, B. Bozkurt

For further information on Dialogues in Cardiovascular Medicine please contact: Mr Thierry Hénane - Servier International
31 rue du Pont - 92200 Neuilly-sur-Seine - France

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