

Science at cross roads! Budget cuts, scientific antipathy and more.....

Dear Colleagues

The spirit of spring is here, at least for those of us in the northern hemisphere. The first quarter of the year here in the United States has been quite chaotic with all the sweeping changes in the politics and policies which had a significant impact on the scientific community. The scientific community stood united in their unwavering support of innovation, creativity and principles of integrity against all other distractors. The newly announced budget cuts will dramatically reduce the funding to NIH. Unfortunately, the funding from the private bodies is not encouraging either. Declining interest in the value of science that is being generated through public funding sources is a major concern. It is quite alarming to see that physician turned politicians are willing to embrace pseudoscience in order to appease a segment of political demographic. Their feverish disregard to scientific facts, questioning the global public health importance of vaccines and the real looming threat of global warming are a testament to the scientific antipathy that is vivid. Whether it is the politics or the economics or scientific apathy that brought us here, there is an urgent need to reevaluate our goals and priorities on how science is going to evolve in the coming decades. This calls for greater collaboration and communication to prevent duplication and redundancy at all levels. The value of private-public partnerships is ever more important.

The International Symposium on Left Atrial Appendage (ISLAA 2017) concluded in Austin, TX during the first week of March with several amazing technologies and solid science were evaluated by experts in the field. With the Watchman device's approval by FDA, the science of LAA has come to the forefront in a big way. The systemic role of left atrial appendage (LAA) in various pathophysiologic processes of the human body was reviewed. There are three major trials that are ongoing in the LAA space. The AMAZE trial is looking at the adjunctive benefits of LAA exclusion using the Lariat device to pulmonary vein isolation and cavotricuspid isthmus ablation in non-paroxysmal AF patients. The AMULET IDE study is evaluating the comparative efficacy of the SJM Amulet LAA plug

against the Watchman device. There are design differences between the two and Amulet allows for the use of dual antiplatelet therapy during the first 6 weeks after device deployment. The WAVECREST IDE study compares J and J's Wavecrest device against Watchman for non-inferiority outcomes. These 3 major randomized controlled trials will redefine the LAA space in the next few years.

This issue of the journal has several important and interesting original studies published. Ranging from the impact of steroids on the outcomes of AF ablation to the changing paradigms in the use of intravenous sotalol there is wealth of new information that will keep you engaged. We once again thank all of our contributors, reviewers, editorial board members and above all you, the readers for your support of the journal. There were a few glitches in the PUBMED transition that are being addressed. Thank you for your patience.

Best wishes



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