

## The “road travelled”: reflections on the transformation of information exchange in a digital age

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EuroIntervention has evolved – gone mostly digital, electronic, online, whatever you choose to call it – and this has been happening little by little over the last few years, something which surprises no one, and that is a bit of the story I want to tell.

Imagine, if you were hearing this announcement 5 or 10 years ago, how this would have been greeted: welcomed perhaps with both dread and derision – the end of print! – but today it is simply the next step in the way we naturally communicate among ourselves, not just in medical publications, but obviously in general. And when I thought of these opening lines last night, I realised that 5 years ago I would have jotted them down on a piece of paper, but instead I typed them on my phone... for that has become our lives: integrated, timely and, mostly, online. Of course, the truth is more nuanced than that. EuroIntervention is still a print journal (as is clearly evidenced by this issue). Meetings in person are still very much in demand... and life seems to continue with even the occasional need for pen and paper (though much less demand for ink).

Still, it seems only right to continue to be aware and pay attention to the speed of change itself.

When EuroIntervention was first conceived, the discipline of interventional cardiology was itself still in its adolescence. The very first editorial was signed by two individuals whose vision and leadership had shaped and continue to shape the field today: Professor Jean Marco, creator of the “Course on Complex Coronary Angioplasty and New Techniques in Interventional Cardiology” in 1989 and later Chair of EuroPCR, and Professor Patrick W. Serruys, who joined his EURO CVS course with that of Jean Marco to form EuroPCR in the early 2000s, and who became the first Editor-in-Chief of EuroIntervention. In this editorial, they spoke about the emergence of the Journal out of the increasing interest in the field, as manifested by the success of the EuroPCR course:

“The live demonstrations in the context of the course has a tremendous impact on the audience but is only a fleeting moment in time. The images portrayed on the screens, the words employed by the opinion leaders, the body language and the skill of the operator are by nature volatile and ephemeral. To some extent they all belong to the oral tradition and this mode of communication could be considered to be almost “tribal”. This fleeting moment has to be passed on from generation to generation or it will disappear forever. The written word has a more everlasting character but needs some extra gestational thought and criticism and may embody more effectively the words long term credibility”<sup>1</sup>.

I remember when I first read (and reread) that editorial, I couldn't have agreed more with the sentiment expressed about the written word: what could offer more assurance, more credibility than, for what seemed evident at the time, the “printed” page?

But my career – as someone who is neither a doctor nor a scientist, but who has worked in medical and scientific communications for 40 years – has been built on asking questions, and as I reacted to the recent changes in EuroIntervention, I found myself questioning my own previously held “truths”, my own inherent, and relatively unquestioned, belief in the importance of the printed page.

In the first year of publication (I began working with EuroIntervention on the third issue in late 2005), simply the intention of producing a Journal on such a specialised field 4 times a year was considered, at the very least, cutting-edge. The original issues of EuroIntervention were finalised by hand, with long printed galleys that were corrected with a red pen. Articles were topical, though often received months in advance, with each edition of the Journal reflecting the whole of interventional cardiology and interventional medicine at that time. This was before PubMed recognition, well before the Impact Factor could rise, or even be calculated (gaining

that recognition was a long road, requiring the patience of both the publisher and Editorial Board). It was a time of evolution in the organisation of the speciality, the beginning of the EAPCI as it emerged out of the ESC Working Group, and an even faster evolution in the protocols and guidelines of the practice itself – so there was much to publish.

Paul Cummins, who was the founding Managing Editor of *EuroIntervention* remembered those formative years:

“In 2005, Patrick (Prof. Patrick W. Serruys) as our Captain, myself as the boatswain, embarked on the *EuroIntervention* journey with a modest quarterly publication schedule. Fast forward to 2024, the journal now graces the academic arena with two insightful issues each month. In the inaugural days, I actively participated in numerous meetings and congresses, driven by the mission of proactively engaging early career researchers. My efforts aimed to extend personal invitations to these prospective authors, urging them to contribute their valuable work to *EuroIntervention*. Parallelly Patrick successfully applied his charm and wit when approaching that esteemed International Guild of Established Experts. In those days, the challenges were apparent, especially in the absence of PubMed indexing and impact factors. However, it was during this pivotal time that a select group of pioneers emerged – authors who fearlessly and passionately embraced the challenge. Their conviction in the potential of *EuroIntervention*, even without the backing of traditional metrics, is etched in my memory and without them this marvellous moment would not have been achieved.”

But for all the radical nature of the endeavour, the Journal came out of a much older and easily recognised tradition of scientific journals, a continuum of professional and academic publications that go back through the 20<sup>th</sup> century, a formal tradition in the dissemination of clinical knowledge and experience both within and outside the University, the Grand Rounds, and the major meetings.

Today, in 2024, it is only natural that *EuroIntervention* continues to evolve from these roots, keeping apace not just with the science and clinical experience that the speciality demands, but with the way that science – and experience – is transmitted.

And yet I find myself inhabited by that “classic” idea that the printed page promised a universal approach to knowledge; we were all supposedly trained from a young age to read – and interpret – texts, to become “literate”. Are we all equally literate today in the new technologies of communication? What impact do these new ways of promulgating knowledge and clinical experience have on the quality of what is offered or how it is assimilated? Have we kept up with the way we communicate... and not just the content that is being communicated? How do we remain in control of the quantity and complexity of what is said, if the means we use are increasingly targeted, “lean” and functional, resulting in the different layers of interpretation of data and text hidden by being not present at all, or requiring research skills that were different from those required for a traditional library (even if the answer is only, for those who know how, a “click” away)?

*EuroIntervention* has indeed continued to evolve; here you will find, more readily than ever before, what you need. The

tools and data are there, and the Journal, as it has since the beginning, is responding present. But if we are not trained in enquiry – whether it is about the news, advances in technology, a treatment, a patient’s history or an ethical question – what value does all our available knowledge have, no matter what form it comes in? The basic qualities of listening, perceiving and reacting to information – and our ability to judge – are these not more basic and acquired skills than the form in which we receive our data? How do we begin to answer a question without knowing how to build or formulate another?

The underlying skills that form the foundation of our ability to respond to and ask questions, our ability to remain attentive to others and keep a sense of wonder, all these take many forms and are a function of changes in our society and culture. I am reminded of a remark by Prof. Richard Lewis, late President of the ACC, when he said that he had always wanted to be a historian but instead chose medicine, and it was near the end of his career that he realised that, in fact, he had been a historian all along. One of the underlying skills that he employed as a doctor being his role as a historian – not simply taking in information and data, but understanding and interpreting it in a way that affected the world, which was, in this case, the patient.

While the complexity of the content and the language continues to be dense, the means of communications has become stripped down – layer by layer, to what the current readership and generation consider to be essential – trained by social media and by an increase in visual stimulation and augmented experience. But paying attention remains essential – reading fully developed, carefully chosen texts in a peer-reviewed journal is a critical block in the foundation of experience, and *EuroIntervention* holds to this tradition.

These then are my thoughts as a non-medical observer, trained in traditional texts and literature and brought up to believe that the skills involved in observation itself – whether of data, or imagery or the history of an individual – are learned skills, and the more that we understand and master our ability to observe thoughtfully and with an enlightened questioning, the less chance that our judgement could be supplanted by some promise of AI or something else.

Clarity in presentation – which is something that changes for each reader in function of their training and age – should not mean a lessening of the value of the content these readers receive – or how they use it. This is what the “new” *EuroIntervention* offers.

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### Conflict of interest statement

The author has no conflicts of interest to declare in relation to this article.

### Reference

1. Serruys PW, Marco J. The history of EuroPCR... and why a new journal? *EuroIntervention*. 2005;1:4-5.