

Medicine and Faith

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Contrary to what most people still imagine, science, in its eternal quest to understand and explain the world rationally with facts that need to be proven and demonstrated, and the Faith, whose definition by Paulo (São Paulo for those who practice catholicism), in his epistle to the Hebrews is: “... *the substance of things hoped for, the evidence of things not seen*” are not incompatible.

In lectures and classes for which I have the honor to be invited, I expose to those who give me the pleasure of their audience that, in recent decades, several studies have shown that patients who have some kind of faith, though not necessarily linked to a religious doctrine, often have a better chance of cure than materialists. Among the scientific research performed, a 6-year prospective study with 557 seniors, performed by Lutgendorf et al. [1] in 2004, showed that among those who attended religious services, the relative risk of death was reduced to 78% and the levels of interleukin-6 were 66% lower during the follow-up period.

Article of Drs. Fernando Lucchese and Harold Koenig (p. 103)

The surgeons, who deal with patients in extreme situations, should also follow with interest researches on this subject. Accordingly, BJCVS (Brazilian Journal of Cardiovascular Surgery) published in this issue, an article by Dr. Fernando Lucchese and Harold Koenig, titled “Religion, spirituality and cardiovascular disease: research, clinical implications, and opportunities in Brazil”. The text reviews the research on the relationship between religion, spirituality and cardiovascular disease, discusses mechanisms that help explain the reported associations, examines the clinical implications of these findings and addresses the need for future research on this topic in Brazil.

Even with all the obstacles, such as short-time and working conditions short of ideals, among others, we physicians are committed to seeking the best for the patient. The greater understanding of the needs of the patient, not only physical but also spiritual, is the primary factor in order to treatment is able to be more effective and also fits into

the “humanization” of medicine, a concept so expensive that still endures, despite a world increasingly run and impersonal.

Second part of the test by Dr. Rodolfo Neirotti (p. 129)

Still, in this issue we publish the second of three parts of the essay by Dr. Rodolfo Neirotti entitled “Cardiac Surgery: the infinite quest”. The topic emphasizes how cardiovascular surgery can learn lessons from other complex systems that identified solutions to intricate obstacles, and that expertise should be always open to innovation.

Review article on coronary surgery by Dr. Luis Dallan e Fábio Jatene (p. 137)

Nor can I fail to mention the well based retrospective on CABG, written by Drs. Luis Dallan and Fabio Jatene. In a text rich in detail, they recount from the beginning until today the prospects of this today consecrated technique to be known by all who deal with cardiac surgery.

40th Congress of the Brazilian Society of Cardiovascular Surgery

An opportunity we have to talk and delve on these topics will be at the 40th Congress of the Brazilian Society of Cardiovascular Surgery (BSCVS), to be held in the period 18-20 April, at Costão do Santinho, Florianópolis, SC, the same city the event was held in 2007. There will also be the presence of other health professionals, such as Perfusionists, Nurseries and Physiotherapists, beyond academics.

Keeping the tradition of recent years, we have the presence of international guests who, with their knowledge and expertise, will showcase innovations and perspectives of international cardiac surgery. There will, as always, several activities of great interest, especially the “Hands On”, which is improved every year and, through practical training of new prostheses and orthoses implant enables surgeons to update their knowledge of what is inside latest in cardiac surgery state of the art, always aiming to provide greater benefits to patients.

This whole range of attractions was only possible thanks to the commitment of all members of the current Board and the Cardiovascular Surgery Society (BSCVS), chaired by Dr. Walter Gomes, with support from other members. Also, we should mention the incessant work of the Organizing Committee, led by Dr. Lourival Bonatelli Filho, flanked by Dr. Milton de Miranda Santoro, Dr. Renato Bastos Pope and Dr. Ricardo José Choma, so that participants can enjoy the sights and activities in the best way possible.

Editorial Board Meeting of BJCVS with the Associate Editors and Editorial Board Members

On April 18, from 11am to 12pm, there will be the new traditional meeting of the Editorial Board of BJCVS with the Associate Editors and Editorial Board members also open to all members who wish to participate. We will have the opportunity to discuss the prospects of the Journal, which was indexed in EBSCO database and is finalizing the process for entering the PubMed Central. The presence in new media and distribution through social networks, as well as ways to increase the Impact Factor, 1.239 currently, will also be topics of discussion.

Article published in BJCVS has 100 citations in Google Scholar (p. 153)

We are pleased to inform the study “Basics notions of heart rate variability and its clinical applicability”, published in BJCVS 24.2, reached the milestone of 100 citations. We congratulate the authors Luiz Carlos Marques Vanderlei, Carlos Marcelo Pastre, Rosângela Akemi Hoshi, Tatiana Dias de Carvalho and Moacir Fernandes de Godoy

by conquest. Facts like this encourage us to continue our commitment to the BJCVS be consolidated as one of the most important journals of cardiovascular surgery worldwide.

The articles available for testing by the Continuing Medical Education (CME) in this issue are as follows: “*Impact on early and late mortality after blood transfusion in coronary artery bypass graft surgery*” (p. 1), “*Surgical treatment for infective endocarditis and hospital mortality in a Brazilian single-center*” (p.29), “*Surgical repair of chordae tendineae rupture after degenerative valvular regurgitation using standardized bovine pericardium*” (p. 36), “*Five-year outcomes following PCI with DES versus CABG for unprotected LM coronary lesions: meta-analysis and meta-regression of 2914 patients*” (p. 83).

My warmest regards,



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REFERENCE

1. Lutgendorf SK, Russell D, Ullrich P, Harris TB, Wallace R. Religious participation, interleukin-6, and mortality in older adults. *Health Psychol.* 2004;23(5):465-75.