

Letters to the Editor

RBCCV 44205-919

Medline - I

The letter below was sent, singly, by the following cardiovascular surgeons as a support of indexing of BJCVS by Medline..

Emile A. Bacha
Gerald Buckberg
Gianni Angelini
Hank Edwards
Joseph A. Dearani

Mr. Sheldon Kotzin
Scientific Review Administrator
U.S. National Library of Medicine
Building 38 Room 2W06
8600 Rockville Pike
Bethesda, MD 20894

Re: Brazilian Journal of Cardiovascular Surgery

Dear Mr. Kotzin,

The President of the Brazilian Society of Cardiovascular Surgery and the Editor of the Brazilian Journal of Cardiovascular Surgery, Dr. Domingo Braille, asked me write this letter in support of their plea to have their journal indexed in the National Library of Medicine.

I regularly read articles published in their journal. As an academic surgeon, I feel the quality of papers published is better than in many journals already listed in Medline. I sincerely hope your committee will review Dr. Braille's request to have their journal indexed and guide them through the process. I am certain the users of Medline will find the publications in that journal worthy of referencing.

Sincerely,

Medline II

Mr. Sheldon Kotzin
Scientific Review Administrator
U.S. National Library of Medicine
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8600 Rockville Pike
Bethesda, MD 20894
USA
Email: kotzins@mail.nlm.nih.gov

5th July 2007
Dear Mr. Kotzin,

I have just been invited by Dr. Domingo Braille, the Editor of the Brazilian Journal of Cardiovascular Surgery, to become a member of the Editorial Board of this Journal.

I am Associate Editor of the European Journal of Cardiothoracic Surgery and of the Revista Portuguesa de Cardiologia (Portuguese Heart Journal), and I am a member of the Editorial Board of the Journal of Heart Valve Disease and of the Thoracic and Cardiovascular Surgeon, all indexed journals. In addition, I am a regular collaborator and reviewer for the European Heart Journal, Heart, Annals of Thoracic Surgery and the Journal of Thoracic and Cardiovascular Surgery. I, therefore, have a significant experience in journal peer-review, with more than 200 reviews per year.

I have accompanied the Brazilian Journal of Cardiovascular Surgery, and I feel the papers that are published are of excellent quality, in many cases superior to those of renowned international journals. As you know, Brazilian cardiovascular surgery is very active and the surgeons are among the best in the world, many having been pioneers in our specialty. Their national and regional societies hold successful annual scientific meetings with very high quality programs, indicative of the very good research and clinical activity.

I know that Dr. Braille has applied to have the Brazilian

Journal of Cardiovascular Surgery indexed in the National Library of Medicine. I strongly support his request, and I hope your committees will approve it.

Yours sincerely,

Manuel J Antunes, MD, PhD, DSc – Coimbra, Portugal

RETAINING FEES

X

MEDICAL FEES

Article 22 of the Brazilian Bar Association Bylaws sets forth that a fee must be paid for the provision of professional services by lawyers enrolled in the Brazilian Bar Association (OAB). There are three different ways for lawyers to collect their fees: through agreements, court decision and as a result of defeat.

Conventional retaining fees are contracted between the lawyer and his/her client (Article 35 and Paragraph 2 of the Code of Ethics and Discipline). The ones granted by court decision are those that require arbitration and the consequent legal collection arises in the absence of conventional fees. Defeat fees are paid by the defeated party to the lawyer of the prevailing party. Retaining fees have been defined as privileged credit, pursuant to Law no. 8.906/94, and many are the adjudications that understand the maintenance nature of a lawyer's fee agreement.

Article 41 of the Brazilian Bar Association Code of Ethics and Discipline provides that the lawyer shall avoid degrading the costs of professional services, which shall not be fixed in an insignificant manner or lower than the minimum standard set forth by the Table of Retaining Fees. Several parameters are provided in Article 35 of the Brazilian Bar Association Bylaws with the purpose of assisting professionals in fixing their fees, regarding the complexity of the case, the difficulty of the matters considered, the required time and work, the professional's inability to assist other clients involved in the same complaint, the cost of the case, the client's financial conditions, the place where services shall be provided, and the lawyer's competence and renown. The purpose of the assistance is to help lawyers obtain a fair remuneration proportional to the services rendered.

Notice that retaining fees may even accumulate, since conventional fees may be added to maintenance fees, provided that the sum does not exceed the amount the client shall earn.

These provisions, set forth through final court decisions, laws and doctrines, have been materialized pursuant to the way the Brazilian society conceives retaining fees.

As for medical fees, they are fixed by Table AMB/92, which has been in effect for 15 years and has set forth the sums in currency, so that it is accurate to state that medical doctors have not been able to update the said table.

Efforts made in this direction have taken the matter to the Economic Defense Administrative Board (CADE), but medical fees have been interpreted and judged as syndication.

Historically, Regional and even Federal Boards, at times, have made attempts to stimulate the debate about vile fees or even propose a new table of retaining fees. However, the Judiciary Power has always acted to inhibit any of such advances, while keeping an inert position on ordinary matters, such as the definition of the cost of a medical appointment for the year 2007.

That is what has been verified with the Brazilian Hierarchical Classification of Medical Procedures (CBHPM), resolution no. 01673/03 of the Federal Medical Board, which was dismissed last year with the entailment that it constituted an attack against the segment and democracy.

Brazil lives with a health system "guaranteed" by the government and with a purchased one and, in both cases medical fees are deemed as workforce and, therefore, a cost. Health plans, hospitals and laboratories are eager to reach a fair and enduring criterion for remuneration of their medical doctors, who carry on their own businesses, so that they could reach an updated and actual cost to set their prices which, consequently, should achieve their billing goals.

Winds are blowing towards the instauration of a Medical Doctors Association. It is an alternative, even though the unbalance between legal and medical fees is symptomatic.

Antônio Ferreira Couto Filho - Attorney-at-law - Rio de Janeiro/RJ

Veja magazine reportage

Dear Mr. Júlio César (Editorship secretary - Veja magazine)

I was deeply angry with this week's *Veja* magazine front page ("Paz no coração" – "Peace in your heart"). The matter mixes up coronary disease with heart diseases. It might implicate that angioplasty can supplant the surgery in any episode and that is not true, because both are completely distinctive diseases!

When the journalist Adriana Dias Lopes looked for me and asked for a published interview, I asked her about what the reportage would be. The reporter answered that would be about heart diseases, of course! She did not exactly specify the context. She said she would like to "profile" me. During the interview, I asked her many times about how the reportage

would be, without getting any suitable response back. As usual, I tried to be kind and answered all her questions. We talked about the positive and negative aspects of the surgeries I have been idealized, about the outcomes worldwide, and I still gave her the telephone number of the patients, in whom I did the surgery more than 10 years ago. In the preface of the special reportage "Untouched Heart" ("Coração Intocado"), by Ana Paula Buchalla, clinically treated patients were heard. It would not be fair to hear also those who were saved by surgeries?

Unaware about what the content of the reportage would be, I asked her to read the written text before it was sent to be published. My request was not considered and when I read what has been published, I was shocked by the following reasons:

1) The magazine apposes the management of coronary diseases through angioplasty versus surgery, by trying to convince the reader that the later is already out of date! Well, if angioplasty were so much better, why former President Clinton has recently undergone surgery for?

2) The reportage reached a crescendo up to page 114 and in the next page I turned up to be "Dom Quixote das Araucárias" under the heading "He never gives up", as if I were The Last of the Mohicans to carry out surgery, yet to dream of one day the major surgery will be performed again, and that the surgeries I once have idealized were a such a failure! What all the hours of recorded interview were good for? The reportage was about coronary disease and not about heart diseases. It is not right to give information to the readers without knowing this difference. I believe Dr. Jatene and Dr. Stolf also on a "Catch-22" situation by the same reasons.

3) The article does not show any of the positive issues I have openly discussed about with the reporter, such as the long years studying abroad. I do not carry out surgeries with my unconscious mind! I idealize the surgeries with my unconscious mind. Brazil will be honored at the XVIII World Congress of Cardiovascular Surgery. The celebration will take place in Greece. I will be the Brazilian representative. Who would honor failures? In Japan, the Hayama Heart Center was conceived thanks to this surgery. In Berlin, the Hospital Charité withholds one of the world's best outcomes. And there are many other centers! Every year in Japan, home of the society of "Heart Volume Reduction", and specialized in this surgery, promotes a meeting in some country to discuss the outcomes obtained by applying the procedure in several countries worldwide.

We are in our XIV Congress. The last one was held in Korea. I stand up for my fellow surgeons because, to the best of my knowledge, none of us carry out a surgery without a precisely surgery indication or requirement.

But, you, Mr., may be sure of one thing, if some day the surgeries were not useful anymore to sick ones, I shall put

my scalpel out, and I certainly will not go on hunting windmills!

Sincerely yours

Randas Vilela Batista – Curitiba/PR - Brazil

RBCCV 22.2

Dear friend Domingo.

I thank you for sending me the interesting article about Dr. De Bakey. I have just received the RBCCV/BJCVS issue 22.2 (April/July 2007). I should mention that the RBCCV/BJCVS was never so good! I have read all the Original Articles with interest and pleasure. The standard of the articles was very high. Congratulations, once more.

I believe that I have already mentioned how proud I am to have the logo I have drawn for the 3rd National Congress of Cardiac Surgery in the front page. This congress was held in Rio de Janeiro, 1975. Two years later, the logo was chosen to be the official logotype of the Brazilian Society of Cardiovascular Surgery.

With best wishes,

Milton A Meier - Rio de Janeiro/RJ

Congresso Sul Brasileiro/Conselho Editorial RBCCV

Dear Dr. Braile,

I would once again like to express my very deepest appreciation to you and the entire organization for allowing me to participate in the "Congresso Sul Brasileiro de Cirurgia Cardiovascular" in Gramado, Brazil. The educational program was outstanding; the courtesy shown me and the camaraderie, heartwarming. Brazil is a beautiful country and it is always an enormous pleasure to visit, be among old friend and make new ones.

It is a distinct honor to be invited to join the Editorial Board of the Brazilian Journal of Cardiovascular Surgery and I happily would like to accept.

I would like to express my deep appreciation for all your efforts regarding the Journal, the Cardiovascular Congress, and Brazil. Many thanks. With warmest personal regards,
I am

Sincerely,

Joseph S. Coselli, M.D., Houston/Texas - USA