The changes foreshadowed in an editorial in the March 2006 issue of the Journal (Indexation of the Journal – further growth1) have come to fruition with this new-look journal, now published by a professional publisher. Changes are evident throughout the issue: new cover design, new layout and new typeface. I welcome views from readers on these changes. I hope this is the start of an evolutionary process in the Journal. As this issue goes to press, negotiations are underway for the Journal to be acquired by the Joint Faculty of Intensive Care Medicine (JFICM). If these negotiations go according to plan, the Journal will be owned by the JFICM and published by AMPCo, the Australasian Medical Publishing Company.

Notwithstanding the other excellent articles in this issue, I wish to highlight those dealing with resuscitation. As an editor, it is very exciting to be able to include, in the same issue, the absolute latest guidelines on resuscitation developed by the Australian Resuscitation Council (ARC) and an article on the history of resuscitation.

The ARC guidelines in many ways illustrate the way “business is done” in medicine in the 21st century. Noted experts are charged with developing guidelines. They undertake an extensive search of the literature for each facet of the guidelines. The evidence gathered is ranked according to its strength and validity. The guidelines are then developed in light of this evidence, in terms of what is practical in the clinical sphere. Consultation occurs, and the guidelines are finalised — only for this process to be repeated as the evidence advances and accumulates. All this takes time and resources. The final product, summarised in the articles in this issue (pages 87, 129 and 132)2-4 and available in full on the ARC website (http://www.resus.org.au), is a testament to this modern process and to those who drive it. It also illustrates the usefulness and value of the Journal, that these guidelines can now be effectively presented to a wide readership in a timely manner. It is hoped this will reduce some of the lag time in the take-up of the guidelines by practitioners.

The excellent and erudite article by Dr Trubuhovich on the history of mouth-to-mouth resuscitation, which also appears in this issue (page 157), provides insight into how things were done in the past.5 Three aspects of this article stand out — how thoroughly Dr Trubuhovich has researched the history, how lucidly he writes about it, and how interesting is the content. Scholarship (in the truest sense of the word) indeed! This is the second article in his series on the history of resuscitation, and we look forward to more.

This issue of the Journal rings in many changes and contains within it also the old and the new of resuscitation.

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References