

From the Editor

A Look Ahead (from Behind)

Here I am six months into my tenure as editor of the *Journal of ExtraCorporeal Technology (JECT)*. I have learned much in the last six months. In addition to becoming reacquainted with the perfusion community and the profession as a whole, I have also started to learn all the processes and responsibilities of being the editor. By the end of 2016, I expect to have acquired a better feeling for the spirit of the journal and the needs and wants of the readers. Defining the niche that the *JECT* will have in the profession is an important first step in defining the direction that the journal will take in the next several years. Defining the niche will require input of the entire perfusion community. Ideas about the type of content you, as readers, would like to see in the journal and how you would like the content to be presented are needed. An area that does need to be explored is the role of social media in disseminating the content from the journal. Anyone interested in exploring and developing the social media side of *JECT* will be welcomed with open arms. I am also making a call out to any perfusionist who would like to become a reviewer of the manuscripts submitted to the journal. Reviewers play an important role in assuring the integrity of the journal content. Please contact me if you are interested. Finally, please feel free to contact me with any ideas for content so I can start to define the role that the *JECT* will play in your professional career.

In this issue, there is a series of articles on the Advances in Myocardial Protection from the presenters at the symposium of the same name at the 2015 American Society of ExtraCorporeal Technology Quality and Outcomes meeting. This series provides information on the history, current status, and continuing challenges of providing optimal myocardial protection for cardiac surgery patients. There are also two papers in this issue that “look for patterns” in the data collected on patients. The first paper by Robert Groom examines the use of outcome registries as a way to better define the problems, and in doing so, provide better solutions (1). The second paper by Riley et al. examines the coagulation parameters collected in a population of ECMO patients in an attempt to identify the parameter or parameters that will provide an early warning for patients at risk for bleeding (2). As big data come to medicine, the ability to interpret and analyze the data and then apply the results to improve patient care will represent a new skill set for perfusionists, as well as new opportunities for studies. The last paper is a look back on a paper that was first published in *JECT* in 2002 that reported on the



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heater-cooler device (HCD) being the source of microbial contamination in the operating room and efforts required to decontaminate the device (3). Interestingly, the next report of HCDs being the source of nontuberculous *Mycobacterium* infection was in 2013 (4). In 2016, the incidence of nontuberculous *Mycobacterium* infection has reached critical levels (5). Thus, the review of this classic article is timely. Riley’s commentary on the classic article also provides some important information on the current state of the problem (6). All in all, the relevance of the classic article demonstrates the importance of a journal, such as *JECT* to disseminate information to the community. In this case, it has taken 11 years for action, but the article provides a basis for action and interaction between perfusionists and the manufacturers to resolve the problem. This article also demonstrates the importance of contributing your case studies and problem solving strategies to *JECT*. What you observe and report today may provide an early warning to conditions that influence patient outcome in the future!

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