Introduction

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THE International Society of Cardiology was until 1966 mainly concerned with the organization of the World Congress of Cardiology every 4 years. At the Fifth World Congress of Cardiology in New Delhi (1966) the formation of a series of Scientific Councils was initiated—on hypertension, paediatric cardiology, clinical science, arteriosclerosis and ischaemic heart disease, epidemiology and prevention, and cardiomyopathies. Their function was to develop a continuous programme of international co-operative research and education. When the Scientific Councils were formed, there was already in existence a strong team of experienced workers in cardiomyopathies supported by the World Health Organization, and this active group formed the first Council on Cardiomyopathies. Together, WHO and the ISC have formed several working parties which have made useful contributions to a better understanding of the cardiomyopathies (1, 2, 3) and soon after its first official meeting in Jamaica in 1967, the Council produced a monograph *Introduction to the Cardiomyopathies* (4) aimed at producing a wider appreciation of these disorders. Council members have also contributed to several international symposia concerned with the epidemiology, pathogenesis and classification of the myocardial diseases (5, 6).

Cardiomyopathies are literally diseases of heart muscle and although there may be considerable argument about definitions and classifications, there are clearly two main problems, congestive cardiomyopathy and hypertrophic cardiomyopathy (7). This is not to suggest that either of these problems is a pure entity, although there is evidence to indicate that they are separate entities. Considerable and detailed interest has been paid to hypertrophic cardiomyopathy (8) and there is now an increasing interest in the congestive group, which clearly constitutes an end-stage common to many aetiological factors, predominantly infective and toxic. Viral infections, alcohol and the periparturient state are factors of considerable importance in the congestive cardiomyopathy story (9) and the role of hypertension becomes increasingly interesting. There is also a fundamental concern with the structure and metabolism of the myocardium in health and disease (10, 11) and a joint WHO-ISC symposium has recently produced a most valuable monograph on the hypoxic and ischaemic heart (12).

The present symposium, held at the Royal Postgraduate Medical School of London was a further international educational venture by the Scientific Council on Cardiomyopathies with the financial support of the ISC. About 100 participants took part in the 3-day meeting, forty of whom came from fifteen countries outside the United Kingdom. The level of interest and the degree of audience participation was high throughout the meeting and this record of the symposium is intended as a further contribution to the better understanding of the disorders primarily affecting heart muscle. The success of this symposium was in great part due to the enthusiasm of Dr Celia Oakley and Professor John Goodwin and the staff of the Department of Clinical Cardiology, Hammersmith Hospital. Dr Celia Oakley has recently been elected Chairman of the Scientific Council on Cardiomyopathies and those who are interested in becoming members of the Section on Cardiomyopathies should write to Dr Oakley at the Hammersmith Hospital, London, W.12.

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