

Editorial

Cardiovascular diseases are killer number one in developed countries and are becoming so in the developing countries too. Developing countries like ours are passing through a health transition phase, which is characterised by decrease in epidemic of acute infectious diseases, increase in life expectancy and change in socio-economic structure. Life style changes are already evident in developing countries. The consumption of saturated fats and tobacco is rising in sharp contrast to the overall decline in developed countries. If these patterns of change currently experienced in developing countries follow those experienced previously in the west, an epidemic of cardiovascular diseases is expected in the near future in SAARC nations with its significant impact in the lower Socio-economic class people.

The pattern of Coronary Artery Disease seen in this region presents unique challenges to the treating cardiologists and cardiac surgeons. Beside CAD, a large number of young adults are suffering from advanced Rheumatic heart disease making them a cripple.

All these facts point out there is a considerable burden of Cardiovascular diseases in the Society like ours which if left untreated leads to disability and significant number of deaths causing a great social and economic loss to the nation. A joint effort in SAARC region is extremely needed to overcome these common cardiac problems.

Dr. Prakash Raj Regmi

Chief Editor