

Editorial

A journal without the means of some change is without the means of its conservation, to paraphrase Edmund Burke. It is with great pleasure that we announce that this journal is changing and will survive. Our new publishers, Cambridge University Press, have persuaded us to produce four issues per year instead of the previous two, a change which will necessitate considerable editorial reorganisation but which will result in a more assimilable and useful product for the busy clinician.

One thing which we are determined not to change, however, is the quality of the articles which we publish. We shall continue to obtain authoritative reviews by international experts on subjects of current clinical importance or of significant background interest. A journal such as this permits authors the luxury of writing at length about their areas of expertise without the artificial constraints of predefined column-inches of print or of a predetermined contents list. Most of our contributors respond by reviewing their topics in greater depth than they find possible in other publications. Their articles are usually supported by an extensive list of references which should provide a valuable guide to further reading for those with a special interest in the field reviewed.

This issue continues the tradition of blending the topical with the unfamiliar. Subjects such as the management of postterm pregnancy and audit of antenatal care are the source of considerable controversy in current obstetric practice. The management of the pregnant diabetic and the antenatal detection of congenital heart disorders are areas where clinical management is continuing to change. The physiology of the ductus venosus, although of less immediate relevance to patient care, is a relatively neglected aspect of the transition between fetus and neonate and will, we think, prove to be of considerable general interest.

We are grateful for the help which we received from our colleagues at Edward Arnold in establishing this new venture in 1989 and to our new friends at Cambridge University Press for ensuring that our journal can continue to be published in these difficult financial times. We are delighted that we shall thus be able to provide our readers with further material of high quality in the fascinating and rapidly changing field of fetomaternal medicine. Like Shelley's cloud, we change but we cannot die.



William Dunlop
Editor