

**Dear colleagues!**

The title theme of the ninth issue of the Russian Journal of Cardiology is the socio-psychological aspects of cardiology. This concept requires clarification. We all know that medicine deals not only with the biological characteristics of a person, but also with his social beginning and personality. Cardiovascular pathology is psychosomatic like no other. The life of a human being, a patient, in society, affects his health, leading first to functional and then to morphological changes.

But in addition to psychosomatics, there are many other fields of knowledge in which the doctor worked and has to be oriented. Some of the articles in this issue reveal different aspects of the social and psychological sides of cardiologist's work.

I offer my opinion on the problem of such competences — humanitarian knowledge — for doctors in general and for cardiologists in particular. The problem of development of humanitarian competences is becoming more and more acute. It is quite clear that it is not enough to study philosophy, history and bioethics in being student, as well as the elements of psychology, today, because working with a patient requires not only separate skills, but also a special construction of personality. We can even say that today, in an era of narrow specialization and precision methods, the role of the clinician, as it was a hundred and two hundred years ago, is being rediscovered. But time requires different view and approaches to the conformation of such a doctor.

The issue touches upon the topic of urban space in terms of physical activity as a factor of prophylaxis. This theme is reminiscent of a fairly well-known cultural research trend — urbanism. In the future, doctors, social anthropologists and culturologists, could probably make many interesting discoveries together.

An attempt to talk about the association between psychological "disadaptation" and circulatory disorders is proposed as an opinion. This conversation is always complex, since neuroscience still does not explain how the thought materializes. Nevertheless, it is this phenomenon that a cardiologist deals with when talking about psychological risk factors.

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Another important view is disease pattern in the patient's mind. In response to a recently published article by colleagues, we offer an opinion on the reasons for the late help-seeking of patients with clinical picture of acute coronary syndrome, in the qualitative research methodology.

Stress, as the central social and psychological element of cardiology, is certainly in the focus of the current issue of the journal: an article on the results of the ESSE-RF study is devoted to it. And another phenomenon adjoins the concept of stress — masked hypertension, a somatic state closely connected with psychological movements, "soul movements" of the patient.

Finally, ethical and legal aspects should be noted within the scope of the topic. On behalf of the recently opened Ethics Section of the Russian Society of Cardiology, I would like to draw the attention of physicians to the complex intertwining of medical, legal and ethical issues. Two texts written by fellow lawyers and philosophers are devoted to it.

Other articles in the issue, as always, cover many sections of cardiology, including pharmacotherapy, diagnostic methods, risk factors' correction, and fundamental sections of medicine.

I wish you an interesting reading!